Questionnaire ID

Statistics South Africa

General Household Survey 2002

Particulars of the household

PSU number

Dwelling unit number

Physical identification of the dwelling unit/household

Telephone number of enumerated household (if any)

Total number of persons in the household

Questionnaire no. for this household (for persons no. 01 - 10 = 1, etc.)

Households at the selected dwelling

Household number for this household

Total number of households at the selected dwelling

Field staff

Interviewer		Number		Interview date	
Supervisor		Number		Date checked	
RSM / QA		Number		Date checked	

For office use

Response details

Visit no	Date (actual)	Result code	Next visit (planned)
1			
2			
3			
4			

FINAL RESULT

Comments and full details of all non-response/unusual circumstances

RESULT CODES (for response details)

1	Completed
2	Non-contact
3	Refused
4	Partly complete
5	No usable information
6	Vacant dwelling
7	Listing error
8	Other

Comment and give full details above of all non-response

Questionnaire ID

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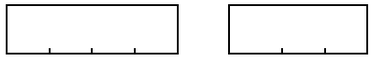

Questionnaire ID

FLAP **This section covers particulars of each person in the household**

The following information must be obtained in respect of every person who normally resides in this household at least four nights a week.
Do not forget babies. *If there are more than 10 persons in the household, use a second questionnaire.*

		Person (respondent) number									
	Ask who the head (or the acting head) of the household is	**01** Head/ Acting head	**02**	**03**	**04**	**05**	**06**	**07**	**08**	**09**	**10**
A	**First name and surname** **First name:** *Write down first name and surname of each member of the household, starting with the head or acting head.*										
	If more than one head or acting head, take the oldest. **Surname:** *Write sideways if necessary.*										
B	**Has ..... stayed here** (in this household) **for at least four nights on average per week during the last four weeks?** 1 = YES 2 = NO → ***End of questions for this person***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
C	**Is ..... a male or a female?** 1 = MALE 2 = FEMALE	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
D	**How old is .....?** *(In completed years - In whole numbers)* *Less than 1 year = 00.*										
E	**What population group does ..... belong to?** 1 = AFRICAN/BLACK 2 = COLOURED 3 = INDIAN/ASIAN 4 = WHITE 5 = OTHER, *specify*	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
F	**Is there any other person residing in this household, than those already mentioned, who is not presently here?**	☐ YES ☐ NO	→ ***If "YES", Go back to A***								

Questionnaire ID ☐☐☐☐ ☐☐☐☐

SECTION 1 This section covers particulars of each person in the household

Start from the left (person number 01) and complete section 1 for each person in the household separately.

		01	02	03	04	05	06	07	08	09	10
1.1	**What is ……'s relationship to the head of the household?** (*I.e. to the person in column 1)*										
	1 = *Mark the head/acting head*	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = HUSBAND/WIFE/PARTNER	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = SON/DAUGHTER/STEPCHILD/ADOPTED CHILD	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = BROTHER/SISTER	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = FATHER/MOTHER	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
	6 = GRANDPARENT/GREAT GRANDPARENT	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6
	7 = GRANDCHILD/GREAT GRANDCHILD	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7
	8 = OTHER RELATIVE (E.G. IN-LAWS OR AUNT/UNCLE)	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8
	9 = NON-RELATED PERSONS	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9
1.2.a	**What is ……'s present marital status?**										
	1 = MARRIED OR LIVING TOGETHER AS HUSBAND AND WIFE	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = WIDOW/WIDOWER	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DIVORCED OR SEPARATED → ***Go to Q 1.3.a***	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = NEVER MARRIED	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
1.2.b	**Does ……'s spouse/partner live in this household?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO → ***Go to Q 1.3.a***	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
1.2.c	**Which person is the spouse/partner of ……?** *Give person number*										
1.3.a	**Is …… 's father still alive?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO → ***Go to Q 1.4.a***	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Don't know	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3

		01	02	03	04	05	06	07	08	09	10
1.3.b	**Is ……'s father part of the household?** 1 = YES 2 = NO → ***Go to Q 1.4.a***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.3.c	**Which person is ……'s father?** *Give person number*										
1.4.a	**Is …… 's mother still alive?** 1 = YES 2 = NO → ***Go to Q 1.5.a*** 3 = Don't know	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3
1.4.b	**Is ……'s mother part of the household?** 1 = YES 2 = NO → ***Go to Q 1.5.a***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.4.c	**Which person is ……'s mother?** *Give person number*										
1.5.a	**Can …… read in at least one language?** 1 = YES 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.5.b	**Can …… write in at least one language?** 1 = YES 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.6.a	**In the last seven days, did …… spend at least one hour fetching water for home use (not for sale)?** 1 = YES 2 = NO → ***Go to Q 1.7.a***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.6.b	**How many hours did …… spend on fetching water in the last seven days?**										

		01	02	03	04	05	06	07	08	09	10
1.7.a	**In the last seven days, did …… spend at least one hour fetching wood/dung for home use (not for sale)?** 1 = YES 2 = NO → ***Go to Q 1.8***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.7.b	**How many hours did …… spend on fetching wood/dung in the last seven days?**										

1.8	**Do you know if there is a welfare office in your area?** 1 = YES 2 = NO 3 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3
1.9	**Who is the person who usually brings in the most money into the household?** *Give person number and mark a box below*	
	*1 = If there is one person who brings in the highest amount, give the person number of **this person** and mark box 1*	☐ 1
	*2 = If two persons or more bring in the same highest amount, give person number of **the oldest of them** and mark box 2*	☐ 2
	*3 = If the respondent does not know, give person number of **the oldest person who brings in money** and mark box 3*	☐ 3
	*4 = If no-one brings in money, give person number of **the oldest person in the household** and mark box 4*	☐ 4

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EDUCATION

		01	02	03	04	05	06	07	08	09	10
1.10	**What is the highest level of education that …… has completed?**										
	00 = NO SCHOOLING	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00
	01 = GRADE R/0	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = SUB A/GRADE 1	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = SUB B/GRADE 2	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	04 = GRADE 3/STANDARD 1	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = GRADE 4/STANDARD 2	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = GRADE 5/STANDARD 3	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = GRADE 6/STANDARD 4	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = GRADE 7/STANDARD 5	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = GRADE 8/STANDARD 6/FORM 1	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = GRADE 9/STANDARD 7/FORM 2	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = GRADE 10/STANDARD 8/FORM 3	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = GRADE 11/STANDARD 9/FORM 4	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12
	13 = GRADE 12/STANDARD 10/FORM 5/MATRIC	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13
	14 = NTC I	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14
	15 = NTC II	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15
	16 = NTC III	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16
	17 = DIPLOMA/CERTIFICATE WITH LESS THAN GRADE 12/STD 10	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17
	18 = DIPLOMA/CERTIFICATE WITH GRADE 12/STD 10	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18
	19 = DEGREE	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19
	20 = POSTGRADUATE DEGREE OR DIPLOMA	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20
	21 = OTHER (*specify in column)*	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21
	22 = DON'T KNOW	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22
1.11	**Is …… currently attending school or any other educational institution?**										
	1 = YES → ***Go to Q 1.13***	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2

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		01	02	03	04	05	06	07	08	09	10
1.12	**What is the main reason why …… is currently not attending school or any other education institution?** 01 = TOO OLD/YOUNG 02 = HAS COMPLETED SCHOOL/EDUCATION 03 = SCHOOL/EDUCATION INSTITUTION IS TOO FAR AWAY 04 = NO MONEY FOR FEES 05 = HE/SHE IS WORKING (AT HOME OR JOB) 06 = EDUCATION IS USELESS OR UNINTERESTING 07 = ILLNESS 08 = PREGNANCY 09 = FAILED EXAMS 10 = GOT MARRIED 11 = FAMILY COMMITMENT (CHILD MINDING, ETC.) 12 = OTHER, *specify in column underneath*	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12
	→ ***Go to Q 1.19***										
1.13	**Which of the following educational institutions does …… attend?** *Include distance and correspondence education* 1 = Pre-school (including day care, crèche, pre-primary) 2 = School 3 = University 4 = Technikon 5 = College 6 = Adult basic education and training/literacy classes 7 = Other adult educational classes 8 = Other than any of the above	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8
1.14	**Is it a correspondence/distance educational institution?** 1 = YES → ***Go to Q 1.16*** 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2

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		01	02	03	04	05	06	07	08	09	10
1.15	**How long does it take …… to get to the school/educational institution where he/she attends?**										
	1 = LESS THAN 15 MINUTES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = 15 - 30 MINUTES	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = MORE THAN 30 MINUTES	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = DON'T KNOW	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4

Ask for all who are attending school any educational institution

1.16	**What is the total amount of tuition fees paid for ….. in a year?** *Do not include the cost of uniforms, books and other learning materials.*										
	01 = R1 – R100	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = R101 – R200	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = R201 – R300	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	04 = R301 – R500	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = R501 – R1000	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = R1001 – R2000	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = R2001 – R3000	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = R3001 – R4000	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = R4001 – R8000	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = R8001 – R12000	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = MORE THAN R12000	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = NONE	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12
	13 = DON'T KNOW	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13
1.17	**This academic year, has …… benefited from any exemptions and/or bursaries?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3

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		01	02	03	04	05	06	07	08	09	10
1.18	**During the past 12 months, what problems, if any, did …… experience at the school**(or other educational institution)**?**	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	1 = Lack of books	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	2 = Poor teaching	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	3 = Lack of teachers	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	4 = Facilities in bad condition	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	5 = Fees too high	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	6 = Classes too large	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	7 = Other, *specify in column*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2

HEALTH

Ask for everyone

1.19	**Is …… covered by a medical aid or medical benefit scheme or other private health insurance?**										
	1 = YES	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	2 = NO	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	3 = DON'T KNOW	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
1.20	**During the past month, did …… suffer from any illnesses or injuries?**										
	1 = YES	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	2 = NO → ***Go to Q 1.29***	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
1.21	**What sort of illnesses or injuries did …… suffer from? Was it ….**										
	01 = Flu or acute respiratory tract infection	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	02 = Diarrhoea	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	03 = Severe trauma *(e.g. due to violence, motor vehicle accident, gunshot, assault, beating)*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	04 = TB or severe cough with blood	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	05 = Abuse of alcohol or drugs	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	06 = Depression or mental illness	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	07 = Diabetes	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	08 = High or low blood pressure	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	09 = HIV/AIDS	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	10 = Other sexually transmitted disease	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	11 = Other illness or injury	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
1.22	**During the past month, did …… consult a health worker such as a nurse, doctor or traditional healer as a result of illness or injury?**										
	1 = YES	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	2 = NO → ***Go to Q 1.28***	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
1.23	**What kind of health worker was it?** *If more than one consultation, take the most recent.*										
	1 = NURSE	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = DOCTOR	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = MEDICAL SPECIALIST	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = PHARMACIST/CHEMIST	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = DENTIST	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
	6 = SPIRITUAL HEALER (CHURCH RELATED)	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6
	7 = TRADITIONAL HEALER	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7
	8 = ANY OTHER HEALTH CARE PROVIDER *Including psychologist, physiotherapist, chiropractor, homeopath, optometrist*	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8
	9 = DON'T KNOW	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
1.24	**Where did the consultation take place?** *If more than one consultation, ask about the most recent one.*										
	Public sector (*i.e. government, provincial or community institution)*										
	01 = HOSPITAL	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = CLINIC	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = OTHER IN PUBLIC SECTOR, *specify*	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	Private sector (*including private clinics, surgery, private hospitals and sangomas*)										
	04 = HOSPITAL	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = CLINIC	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = PRIVATE DOCTOR/SPECIALIST	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = TRADITIONAL HEALER	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = PHARMACY/CHEMIST	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = HEALTH FACILITY PROVIDED BY EMPLOYER	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = ALTERNATIVE MEDICINE, E.G. HOMEOPATHIST	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = OTHER IN PRIVATE SECTOR, *specify*	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = DON'T KNOW	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12
1.25	**What problems, if any, were experienced by …… during this particular visit to a health worker?**	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	1 = Facilities not clean	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	2 = Long waiting time	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	3 = Opening times not convenient	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	4 = Too expensive	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	5 = Drugs that were needed, not available	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	6 = Staff rude or uncaring or turned patient away	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	7 = Incorrect diagnosis	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	8 = Other, *specify in column*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2

		01	02	03	04	05	06	07	08	09	10
1.26	**How satisfied was …… with the service he/she received?**										
	1 = Very satisfied	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = Somewhat satisfied	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Neither satisfied nor dissatisfied	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = Somewhat dissatisfied	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = Very dissatisfied	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
	6 = DON'T KNOW	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6
1.27	**Did …… have to pay for this service?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	→ ***Go to Q 1.29***										

Ask only if "NO" to Q 1.22

1.28	**Why did …… not consult any health worker during the past month?**										
	1 = TOO EXPENSIVE	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = TOO FAR	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = NOT NECESSARY	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = DON'T KNOW	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = OTHER, *specify in column underneath*	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5

Questionnaire ID

Ask for everyone in the household

Read out: **I am now going to ask about disabilities experienced by any persons within the household.**

		01	02	03	04	05	06	07	08	09	10
1.29	**Is …… limited in his/her daily activities, at home, at work or at school, because of a long-term physical, sensory, hearing, intellectual, or psychological condition, lasting six months or more?** 1 = YES 2 = NO → ***Go to Q1.31***	☐ 01 ☐ 02	☐ 01 ☐ 02	☐ 01 ☐ 02	☐ 01 ☐ 02	☐ 01 ☐ 02	☐ 01 ☐ 02	☐ 01 ☐ 02	☐ 01 ☐ 02	☐ 01 ☐ 02	☐ 01 ☐ 02
1.30	**What difficulty or difficulties does …… have? Is it …..**	**YES NO**	**YES NO**	**YES NO**	**YES NO**	**YES NO**	**YES NO**	**YES NO**	**YES NO**	**YES NO**	**YES NO**
	1 = Sight *(blind/severe visual limitation)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	2 = Hearing *(deaf, profoundly hard of hearing)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	3 = Communicating *(speech impairment)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	4 = Physical *(e.g. needs wheel chair, crutches or prosthesis; limb or hand usage limitation)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	5 = Intellectual *(serious difficulties in learning, mental retardation)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	6 = Emotional *(behavioural, psychological problems)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	7 = Other, *specify in column*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.31	**During the past 12 months, did …… make use of a welfare office or services?** 1 = YES 2 = NO → ***Go to section 2*** 3 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3

		01	02	03	04	05	06	07	08	09	10
1.32	**Which of the following services/assistance was …… in need of?**										
	a. Social worker										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	b. Social grant										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	c. Poverty relief/Job creation project										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
1.33	***Ask only if there is a "YES" in any part of Q 1.32***										
	How satisfied was …… with the service/assistance rendered at the welfare office?										
	1 = Very satisfied	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = Somewhat satisfied	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Neither satisfied nor dissatisfied	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = Somewhat dissatisfied	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = Very dissatisfied	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
	6 = DON'T KNOW	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6

SECTION 2 **This section covers activities of household members aged 15 and above in the last seven days, unemployment and non-economic activities.**
Ask for all household members aged 15 and above. ***It is very important that you try to ask these questions of each person themselves if at all possible.***
Read out: **Now I am going to ask some questions about activities in the last seven days for each household member aged 15 and above**

		01	02	03	04	05	06	07	08	09	10
2.0	*Interviewer to answer* ***Is the person him/herself responding to questions?*** 1 = YES 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
2.1	**In the last seven days, did …… do any of the following activities, even for only one hour?** *Show prompt card 2.*	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	a) Run or do any kind of business, big or small, for himself/herself or with one or more partners? *Examples: Selling things, making things for sale, repairing things, guarding cars, brewing beer, hairdressing, crèche businesses, taxi or other transport business, having a legal or medical practice, etc.*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	b) Do any work for a wage, salary, commission or any payment in kind (excl. domestic work)? *Examples: a regular job, contract, casual or piece work for pay, work in exchange for food or housing.*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	c) Do any work as a domestic worker for a wage, salary, or any payment in kind?	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	d) Help unpaid in a family business of any kind? *Examples: Help to sell things, make things for sale or exchange, doing the accounts, cleaning up for the business, etc. Don't count normal housework.*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	e) Do any work on his/her own or the family's plot, farm, food garden, cattle post or kraal or help in growing farm produce or in looking after animals for the household? *Examples: ploughing, harvesting, looking after livestock*.	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	f) Do any construction or major repair work on his/her own home, plot, cattle post or business or those of the family?	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	g) Catch any fish, prawns, shells, wild animals or other food for sale or family food?	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	h) Beg for money or food in public?	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2

If "YES" for a person to any part of Question 2.1→ Go to Q 2.3 for that person. ***If all "NO" for a person, continue with next question.***

		01	02	03	04	05	06	07	08	09	10
2.2	*If* "NO" *to all parts of Question 2.1* **Even though …… did not do any of these activities in the last seven days, does he/she have a job, business, or other economic or farming activity that he/she will definitely return to?** *For agricultural activities, the off season in agriculture is not a temporary absence.* 1 = YES 2 = NO **→*Go to Q 2.10***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
2.3	*Read out*: **You said …… was doing these activities during the last seven days** (or was temporarily absent). *Refer to Q 2.1 or Q 2.2* **What kind of work did …… do in his/her <u>main</u> job during the last seven days** (or usually does, even if he/she was absent in the last seven days)**? Give occupation or job title.** *Work includes all the activities mentioned earlier* *Record at least two words: Car sales person, Office cleaner, Vegetable farmer, Primary school teacher, etc.* *For agricultural work on own/family farm/plot, state whether for <u>own</u> use or for <u>sale</u> mostly.*										
2.4	**What were ……'s <u>main</u> tasks or duties in this job?** *Examples: Selling fruit, repairing watches, keeping accounts, feeding and watering cattle.*										
	CODE BOX FOR OFFICE USE										

		01	02	03	04	05	06	07	08	09	10
2.5	**What is the name of ……'s place of work?** *For government or large organisations, give the name of the establishment and branch or division: e.g. Education Dept – Rapele Primary School; ABC Gold Mining, Maintenance Div.* *Write 'Own house' or 'No fixed location', if relevant.*										
2.6	**What are the main goods and services produced at ……'s place of work? What are its main functions?** *Examples: Repairing cars, Selling commercial real estate, Sell food wholesale to restaurants, Retail clothing shop, Manufacture electrical appliances, Bar/ restaurant, Primary Education, Delivering newspapers to homes.*										
	CODE BOX FOR OFFICE USE										

		01	02	03	04	05	06	07	08	09	10
2.7	**What is ……'s total salary/pay at his/her <u>main</u> job?** *Including overtime, allowances and bonus, before any tax or deductions.* *Give amount in whole figures, without any text or decimals* ***If "**NONE**", "**REFUSE**" or "**DON'T KNOW**"→ Go to Q 2.9***										
2.8	***Only if amount given in Q 2.7*** **Is this** 1 = Per week 2 = Per month 3 = Annually	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3

2.9 ***Only if "**NONE**", "**REFUSE**" or "**DON'T KNOW**" in Q 2.7***

*Show the categories. Make sure the respondent points at the **correct income column** (weekly, monthly, annually) on **prompt card 3** and mark the applicable code.*

	Weekly	Monthly	Annually									
01	NONE	NONE	NONE	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
02	R1 - R46	R1 - R200	R1 - R2 400	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
03	R47 - R115	R201 - R500	R2 401 - R6 000	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
04	R116 - R231	R501 – R1 000	R6 001 - R12 000	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
05	R232 - R346	R1 001 - R1 500	R12 001 - R18 000	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
06	R347 = R577	R1 501 = R2 500	R18 001 - R30 000	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
07	R578 - R808	R2 501 - R3 500	R30 001 - R42 000	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
08	R809 - R1 039	R3 501 - R4 500	R42 001 - R54 000	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
09	R1 040 - R1 386	R4 501 - R6 000	R54 001 - R72 000	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
10	R1 387 - R1 848	R6 001 - R8 000	R72 001 - R96 000	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
11	R1 849 - R2 540	R8 001 - R11 000	R96 001 - R132 000	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
12	R2 541 - R3 695	R11 001 - R16 000	R132 001 - R192 000	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12
13	R3 696 - R6 928	R16 001 - R30 000	R192 001 - R360 000	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13
14	R6 929 OR MORE	R30 001 OR MORE	R360 001 OR MORE	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14
15	DON'T KNOW	DON'T KNOW	DON'T KNOW	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15
16	REFUSE	REFUSE	REFUSE	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16

→ Go to Section 3

Questionnaire ID

The following questions cover unemployment and non-economic activities

Ask for all household members aged 15 and above who did not work and were not absent from work (i.e. for those whose answer on Q 2.2 = 2).

Read out: **Now I am going to ask some questions about whether you (……) wanted and were (was) available for any of the types of work mentioned earlier**

		01	02	03	04	05	06	07	08	09	10
2.10	**Why did …… not work during the past seven days?**										
	01 = HAS FOUND A JOB, BUT IS ONLY STARTING AT A DEFINITE DATE IN THE FUTURE → ***Go to Q 2.14***	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = LACK OF SKILLS OR QUALIFICATIONS FOR AVAILABLE JOBS	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = SCHOLAR OR STUDENT AND PREFERS NOT TO WORK	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	04 = HOUSEWIFE/HOMEMAKER AND PREFERS NOT TO WORK	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = RETIRED AND PREFERS NOT TO SEEK FORMAL WORK	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = ILLNESS, INVALID, DISABLED OR UNABLE TO WORK (HANDICAPPED)	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = TOO YOUNG OR TOO OLD TO WORK	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = SEASONAL WORKER, E.G. FRUIT PICKER, WOOL-SHEARER	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = CANNOT FIND SUITABLE WORK (SALARY, LOCATION OF WORK OR CONDITIONS NOT SATISFACTORY)	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = CONTRACT WORKER, E.G. MINE WORKER RESTING ACCORDING TO CONTRACT	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = RECENTLY RETRENCHED	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = OTHER REASON	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12
2.11	**If a suitable job is offered, will …… accept it?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW → ***Go to Q 2.14***	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
2.12	**How soon can …… start work?**										
	1 = WITHIN A WEEK	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = WITHIN TWO WEEKS	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = WITHIN FOUR WEEKS	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = LATER THAN FOUR WEEKS FROM NOW	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = DON'T KNOW	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5

		01	02	03	04	05	06	07	08	09	10
2.13	**During the past four weeks, has …… taken any action** 1 = to look for any kind of work 2 = to start any kind of business	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2

Ask for everyone who has come to Question 2.10 (all persons unemployed or not economically active)

2.14	**Has …… ever worked before?** 1 = YES 2 = NO → ***Go to Q 2.16***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
2.15	**How long ago was it since …… last worked?**										
	01 = 1 WEEK - LESS THAN 1 MONTH	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = 1 MONTH - LESS THAN 2 MONTHS	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = 2 MONTHS - LESS THAN 3 MONTHS	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	04 = 3 MONTHS - LESS THAN 4 MONTHS	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = 4 MONTHS - LESS THAN 5 MONTHS	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = 5 MONTHS - LESS THAN 6 MONTHS	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = 6 MONTHS - LESS THAN 1 YEAR	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = 1 YEAR - LESS THAN 2 YEARS	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = 2 YEARS - LESS THAN 3 YEARS	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = 3 YEARS OR MORE	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = DON'T KNOW	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11

		01	02	03	04	05	06	07	08	09	10
2.16	**How does …… support him/herself?**	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	1 = Did odd jobs during the past seven days	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	2 = Supported by persons in the household	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	3 = Supported by persons not in the household	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	4 = Supported by charity, church, welfare, etc.	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	5 = Unemployment Insurance Fund (UIF)	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	6 = Savings or money previously earned	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	7 = Old age or disability pension	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	8 = Other sources, e.g. bursary, study loan, *specify in column*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	If "YES" to response category 1 → *Go back to Q 2.1 for that person*										

Questionnaire ID

SECTION 3 This section covers information regarding children ever born

The following information must be obtained in respect of every woman aged between 12 and 50 years. For each woman record the total number of children ever born alive. Include all children born alive,(i.e all those who are still living, whether or not they live in the household, and those who are dead). Do not include stillbirths and children adopted by the mother. Start with the last born and strictly follow the birth order. ***Do not forget babies.***

If there is no woman in the household, go to section 4.

Read out: **I am now going to ask regarding mothers in this household**

3.0.1	**Is there any woman in this household aged between 12 and 50 years, who has ever given birth?** 1 = Yes 2 = No ***End of this section. Go to Section 4***	☐ 1 ☐ 2
3.0.2	**How many women in this household aged between 12 and 50 years have ever given birth?**	
3.0.3	**What are the names of the women who have ever given birth?**	**Person number**
	1.Name of the first woman……..……*Give person number*	
	2.Name of the second woman……..…*Give person number*	
	3.Name of the third woman……..……*Give person number*	
	4.Name of the fourth woman……..……*Give person number*	
	5.Name of the fifth woman……..……*Give person number*	

<u>Remember</u>: If there are more than 3 women aged between 12 and 50 years in the household, who have ever given birth, you will need another questionnaire.

Questionnaire ID ☐☐☐☐ ☐☐☐☐

Read out: **I am now going to ask each woman questions regarding all the children she has ever had.**

Record the name of the woman and her personal number, as indicated on the flap. Record births by each woman on a separate form.

First name of woman……Person number ☐☐

		Male	Female	Total
3.1.1	**How many children (live births) have you ever given birth to?**			
3.1.2	**How many of your children are still alive?**			
3.1.3	**How many children (live births) have you had in the past 12 months**			

Read out: **Now, I am going to ask you questions regarding each of the live births you have ever had, starting with the most recent**

		Child number									
	If there are more than 10 children born to one woman, continue on the next form and change the child numbers (ie, 01=11 and so on) Record twins on separate columns	**01** Start with the last born	**02**	**03**	**04**	**05**	**06**	**07**	**08**	**09**	**10**
3.1.4	**First name and surname** *(Write down the first name of each child born alive, starting with the last born. Strictly follow the birth order)* **First name:**										
3.1.5	**Is …… still alive ?** 1 = YES 2 = NO ***Go to 3.1.10***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.1.6	*If alive*, **Is ..... a male or a female?** 1 = MALE 2 = FEMALE	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.1.7	**How old is .....?** *(In completed years - In whole numbers) Less than 1 year = 00.*										

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
3.1.8	**What was …… 's date of birth?** *(Write down the year, month and day of birth in the space provided for each child. The year must be a 4 digit number).* *YYYY* *MM* *DD*										
3.1.9	**Is …… currently a member of this household?** 1 = YES 2 = NO ***Go to 3.1.13***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.1.10	*If dead*, **Was ..... a male or a female?** 1 = MALE 2 = FEMALE	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.1.11	**How old was ..... when he/she died?** *(In completed years - In whole numbers)* *Less than 1 year = 00.*										
3.1.12	**When did …… 's death occur?** *(Write down the date of death as indicated)* *YYYY* *MM* *DD*										

Ask for all children ever born to the woman

3.1.13	**Where was …… born?** 1 = IN A HOSPITAL 2 = AT A CLINIC 3 = ELSEWHERE	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3
3.1.14	**Was the birth of …… registered?** 1 = YES ***End of section 3 for this child*** 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.1.15	**Why was the birth of …… not registered?** 1 = FAR DISTANCE 2 = LACK OF KNOWLEDGE 3 = DOES NOT SEEM IMPORTANT	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3

Questionnaire ID

Read out: **I am now going to ask each woman questions regarding all the children she has ever had.**

Record the name of the woman and her personal number, as indicated on the flap. Record births by each woman on a separate form.

First name of woman……Person number

		Male	Female	Total
3.2.1	**How many children (live births) have you ever given birth to?**			
3.2.2	**How many of your children are still alive?**			
3.2.3	**How many children (live births) have you had in the past 12 months**			

Read out: **Now, I am going to ask you questions regarding each of the live births you have ever had, starting with the most recent**

		Child number									
	If there are more than 10 children born to one woman, continue on the next form and change the child numbers (ie, 01=11 and so on) Record twins on separate columns	**01** Start with the last born	**02**	**03**	**04**	**05**	**06**	**07**	**08**	**09**	**10**
3.2.4	**First name and surname** *(Write down the first name of each child born alive, starting with the last born. Strictly follow the birth order)* **First name:**										
3.2.5	**Is …… still alive ?** 1 = YES 2 = NO ***Go to 3.2.10***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.2.6	*If alive*, **Is ..... a male or a female?** 1 = MALE 2 = FEMALE	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.2.7	**How old is .....?** *(In completed years - In whole numbers) Less than 1 year = 00.*										

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
3.2.8	**What was …… 's date of birth?** *(Write down the year, month and day of birth in the space provided for each child. The year must be a 4 digit number).* *YYYY* *MM* *DD*										
3.2.9	**Is …… currently a member of this household?** 1 = YES 2 = NO ***Go to 3.2.13***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.2.10	*If dead*, **Was ..... a male or a female?** 1 = MALE 2 = FEMALE	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.2.11	**How old was ..... when he/she died?** *(In completed years - In whole numbers)* *Less than 1 year = 00.*										
3.2.12	**When did …… 's death occur?** *(Write down the date of death as indicated)* *YYYY* *MM* *DD*										

Ask for all children ever born to the woman

3.2.13	**Where was …… born?** 1 = IN A HOSPITAL 2 = AT A CLINIC 3 = ELSEWHERE	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3
3.2.14	**Was the birth of …… registered?** 1 = YES ***End of section 3 for this child*** 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.2.15	**Why was the birth of …… not registered?** 1 = FAR DISTANCE 2 = LACK OF KNOWLEDGE 3 = DOES NOT SEEM IMPORTANT	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3

Questionnaire ID

Read out: **I am now going to ask each woman questions regarding all the children she has ever had.**

Record the name of the woman and her personal number, as indicated on the flap. Record births by each woman on a separate form.

First name of woman……Person number

		Male	Female	Total
3.3.1	**How many children (live births) have you ever given birth to?**			
3.3.2	**How many of your children are still alive?**			
3.3.3	**How many children (live births) have you had in the past 12 months**			

Read out: **Now, I am going to ask you questions regarding each of the live births you have ever had, starting with the most recent**

		Child number									
	If there are more than 10 children born to one woman, continue on the next form and change the child numbers (ie, 01=11 and so on) Record twins on separate columns	**01** Start with the last born	**02**	**03**	**04**	**05**	**06**	**07**	**08**	**09**	**10**
3.3.4	**First name and surname** *(Write down the first name of each child born alive, starting with the last born. Strictly follow the birth order)* **First name:**										
3.3.5	**Is …… still alive ?** 1 = YES 2 = NO ***Go to 3.3.10***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.3.6	*If alive*, **Is ..... a male or a female?** 1 = MALE 2 = FEMALE	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.3.7	**How old is .....?** *(In completed years - In whole numbers) Less than 1 year = 00.*										

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		01	02	03	04	05	06	07	08	09	10
3.3.8	**What was …… 's date of birth?** *(Write down the year, month and day of birth in the space provided for each child. The year must be a 4 digit number).* *YYYY* *MM* *DD*										
3.3.9	**Is …… currently a member of this household?** 1 = YES 2 = NO *Go to 3.3.13*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.3.10	*If dead*, **Was ..... a male or a female?** 1 = MALE 2 = FEMALE	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.3.11	**How old was ..... when he/she died?** *(In completed years - In whole numbers)* *Less than 1 year = 00.*										
3.3.12	**When did …… 's death occur?** *(Write down the date of death as indicated)* *YYYY* *MM* *DD*										

Ask for all children ever born to the woman

3.3.13	**Where was …… born?** 1 = IN A HOSPITAL 2 = AT A CLINIC 3 = ELSEWHERE	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3
3.3.14	**Was the birth of …… registered?** 1 = YES *End of section 3 for this child* 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
3.3.15	**Why was the birth of …… not registered?** 1 = FAR DISTANCE 2 = LACK OF KNOWLEDGE 3 = DOES NOT SEEM IMPORTANT	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3

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SECTION 4 This section covers information regarding the household.

Ask a responsible adult in the household

4.1	Indicate the type of main dwelling and other dwelling that the household occupies?	Main dwelling	Other dwelling
	01 = DWELLING/HOUSE OR BRICK STRUCTURE ON A SEPARATE STAND OR YARD OR ON FARM	☐ 01	☐ 01
	02 = TRADITIONAL DWELLING/HUT/STRUCTURE MADE OF TRADITIONAL MATERIALS	☐ 02	☐ 02
	03 = FLAT OR APARTMENT IN A BLOCK OF FLATS	☐ 03	☐ 03
	04 = TOWN/CLUSTER/SEMI-DETACHED HOUSE (*Simplex, Duplex or Triplex*)	☐ 04	☐ 04
	05 = UNIT IN RETIREMENT VILLAGE	☐ 05	☐ 05
	06 = DWELLING/HOUSE/FLAT/ROOM IN BACKYARD	☐ 06	☐ 06
	07 = INFORMAL DWELLING/SHACK IN BACKYARD	☐ 07	☐ 07
	08 = INFORMAL DWELLING/SHACK NOT IN BACKYARD, E.G. IN AN INFORMAL/SQUATTER SETTLEMENT OR ON FARM	☐ 08	☐ 08
	09 = ROOM/FLATLET	☐ 09	☐ 09
	10 = CARAVAN/TENT	☐ 10	☐ 10
	11 = OTHER, *specify*	☐ 11	☐ 11

4.2	Thinking back five years ago, what type of dwelling/dwellings did this household occupy?	Main dwelling	Other dwelling
	01 = DWELLING/HOUSE OR BRICK STRUCTURE ON A SEPARATE STAND OR YARD OR ON FARM	☐ 01	☐ 01
	02 = TRADITIONAL DWELLING/HUT/STRUCTURE MADE OF TRADITIONAL MATERIALS	☐ 02	☐ 02
	03 = FLAT OR APARTMENT IN A BLOCK OF FLATS	☐ 03	☐ 03
	04 = TOWN/CLUSTER/SEMI-DETACHED HOUSE (*Simplex, Duplex or Triplex*)	☐ 04	☐ 04
	05 = UNIT IN RETIREMENT VILLAGE	☐ 05	☐ 05
	06 = DWELLING/HOUSE/FLAT/ROOM IN BACKYARD	☐ 06	☐ 06
	07 = INFORMAL DWELLING/SHACK IN BACKYARD	☐ 07	☐ 07
	08 = INFORMAL DWELLING/SHACK NOT IN BACKYARD, E.G. IN AN INFORMAL/SQUATTER SETTLEMENT OR ON FARM	☐ 08	☐ 08
	09 = ROOM/FLATLET	☐ 09	☐ 09
	10 = CARAVAN/TENT	☐ 10	☐ 10
	11 = OTHER, *specify*	☐ 11	☐ 11
	12 = HOUSEHOLD DID NOT EXIST	☐ 12	☐ 12

4.3	**What is the main material used for the roof and the walls of the main dwelling?** *Mark one code in each column.*	**Roof**	**Walls**
	01 = BRICKS	☐ 01	☐ 01
	02 = CEMENT BLOCK/CONCRETE	☐ 02	☐ 02
	03 = CORRUGATED IRON/ZINC	☐ 03	☐ 03
	04 = WOOD	☐ 04	☐ 04
	05 = PLASTIC	☐ 05	☐ 05
	06 = CARDBOARD	☐ 06	☐ 06
	07 = MIXTURE OF MUD AND CEMENT	☐ 07	☐ 07
	08 = WATTLE AND DAUB	☐ 08	☐ 08
	09 = TILE	☐ 09	☐ 09
	10 = MUD	☐ 10	☐ 10
	11 = THATCHING	☐ 11	☐ 11
	12 = ASBESTOS	☐ 12	☐ 12
	13 = OTHER, *specify*	☐ 13	☐ 13
	14 = NOT APPLICABLE	☐ 14	☐ 14
4.4	**In what condition are the roof and the walls of the main dwelling?**	**Roof**	**Walls**
	1 = Very weak	☐ 1	☐ 1
	2 = Weak	☐ 2	☐ 2
	3 = Needs minor repairs	☐ 3	☐ 3
	4 = Good	☐ 4	☐ 4
	5 = Very good	☐ 5	☐ 5

4.5	**Is the dwelling ….**	
	1 = Owned and fully paid off	☐ 1
	2 = Owned, but not yet fully paid off (e.g. with a mortgage)	☐ 2
	3 = Rented	☐ 3
	4 = Occupied rent-free as part of employment contract of family member	☐ 4
	5 = Occupied rent-free not as part of employment contract of family member	☐ 5
	6 = Other, *specify*	☐ 6
4.6	**What is the total number of rooms in the dwelling(s) that the household occupies?** *Give the total number of rooms, including living rooms, bedrooms and kitchens, but excluding bathrooms and toilets.*	
4.7	**Did any member of this household receive a government housing subsidy, such as RDP housing subsidy, to obtain this dwelling or any other dwelling?** *Do not include housing subsidies for government employees.*	
	1 = YES	☐ 1
	2 = NO	☐ 2
	3 = DON'T KNOW	☐ 3

4.8	**What is the household's main source of water?** *Mark one code only* 01 = PIPED (TAP) WATER IN DWELLING 02 = PIPED (TAP) WATER ON SITE OR IN YARD 03 = NEIGHBOUR'S TAP → ***Go to Q 4.10*** 04 = BOREHOLE ON SITE 05 = RAIN-WATER TANK ON SITE 06 = PUBLIC TAP 07 = WATER-CARRIER/TANKER 08 = BOREHOLE OFF SITE/COMMUNAL 09 = FLOWING WATER/STREAM/RIVER 10 = DAM/POOL/STAGNANT WATER 11 = WELL 12 = SPRING 13 = OTHER, *specify*	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13

Ask if water is <u>not</u> in dwelling, yard or site, otherwise go to Q 4.10.

4.9	**How long does it take members of this household to get to the water source?** 1 = 0 - 14 MIN 2 = 15 - 29 MIN 3 = 30 - 44 MIN 4 = 45 - 59 MIN 5 = 60 MIN OR MORE	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
4.10	**The water from the main source** 1 = Is it safe to drink? 2 = Is it clear? 3 = Does it taste good? 4 = Is it free from odours?	**YES NO** ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2

Ask only if Q 4.8 = 01, 02, 03 or 06 (e.g. tap/piped water), otherwise go to Q 4.14

4.11	**How often do you get interruptions in your piped water supply?** 1 = DAILY 2 = WEEKLY 3 = MONTHLY 4 = 6 MONTHLY 5 = YEARLY 6 = ALMOST NEVER → ***Go to Q 4.14***	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6
4.12	**What normally causes the interruption?** 1 = BURST PIPES 2 = PUMP NOT WORKING 3 = GENERAL MAINTENANCE 4 = NOT ENOUGH WATER IN THE SYSTEM (DEMAND TOO HIGH) 5 = WATER ONLY DELIVERED AT FIXED TIMES 6 = NON-PAYMENT FOR SERVICES (CUT OFF) → ***Go to Q 4.14*** 7 = VANDALISM 8 = OTHER, *specify* 9 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9
4.13	**The last time it happened, when was the problem rectified?** 1 = THE SAME DAY 2 = DURING THE SAME WEEK 3 = DURING THE SAME MONTH 4 = LONGER THAN MONTH, *specify*	☐ 1 ☐ 2 ☐ 3 ☐ 4

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4.14	Does this household have a connection to the MAINS electricity supply?	
	1 = YES	☐ 1
	2 = NO	☐ 2

4.15	What is the main source of energy/fuel for this household?	Cooking	Heating	Lighting
	01 = ELECTRICITY FROM MAINS	☐ 01	☐ 01	☐ 01
	02 = ELECTRICITY FROM GENERATOR	☐ 02	☐ 02	☐ 02
	03 = GAS	☐ 03	☐ 03	☐ 03
	04 = PARAFFIN	☐ 04	☐ 04	☐ 04
	05 = WOOD	☐ 05	☐ 05	
	06 = COAL	☐ 06	☐ 06	
	07 = CANDLES		☐ 07	☐ 07
	08 = ANIMAL DUNG	☐ 08	☐ 08	
	09 = SOLAR ENERGY	☐ 09	☐ 09	☐ 09
	10 = OTHER, *specify*	☐ 10	☐ 10	☐ 10
	11 = NONE	☐ 11	☐ 11	☐ 11

4.16	Thinking back five years ago, did this household have a connection to the MAINS electricity supply, then?	
	1 = YES	☐ 1
	2 = NO	☐ 2
	3 = HOUSEHOLD DID NOT EXIST	☐ 3
	4 = DON'T KNOW	☐ 4

4.17	What type of toilet facility is available for this household? *Mark only one, the main toilet*	In dwelling	On site	Off site
	1 = FLUSH TOILET CONNECTED TO A PUBLIC SEWAGE SYSTEM	☐ 11	☐ 12	☐ 13
	2 = FLUSH TOILET CONNECTED TO A SEPTIC TANK	☐ 21	☐ 22	☐ 23
	3 = CHEMICAL TOILET		☐ 32	☐ 33
	4 = PIT LATRINE WITH VENTILATION PIPE		☐ 42	☐ 43
	5 = PIT LATRINE WITHOUT VENTILATION PIPE		☐ 52	☐ 53
	6 = BUCKET TOILET		☐ 62	☐ 63
	7 = NONE → ***Go to Q 4.20***			☐ 73

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Ask if toilet is "ON SITE" *or* "OFF SITE". *Otherwise Go to Q 4.19*

4.18	**How far is the nearest toilet facility to which the household has access?**	
	1 = LESS THAN 2 MINUTES (LESS THAN 200M)	☐ 1
	2 = 2 MINUTES BUT LESS THAN 5 MINUTES (200M - 500M)	☐ 2
	3 = MORE THAN 5 MINUTES (MORE THAN 500M)	☐ 3

*Ask if answer to Q 4.17 is "*BUCKET TOILET*". Otherwise Go to Q 4.20*

4.19	**How frequently is it removed?**	
	1 = ONCE A WEEK OR MORE OFTEN	☐ 1
	2 = ABOUT ONCE A FORTNIGHT	☐ 2
	3 = ABOUT ONCE A MONTH	☐ 3
	4 = LESS OFTEN THAN ONCE A MONTH	☐ 4

Ask for all households

4.20	**How is the refuse or rubbish of this household taken care of?**	
	1 = REMOVED BY LOCAL AUTHORITY AT LEAST ONCE A WEEK	☐ 1
	2 = REMOVED BY LOCAL AUTHORITY LESS OFTEN THAN ONCE A WEEK	☐ 2
	3 = REMOVED BY COMMUNITY MEMBERS AT LEAST ONCE A WEEK	☐ 3
	4 = REMOVED BY COMMUNITY MEMBERS LESS OFTEN THAN ONCE A WEEK	☐ 4
	5 = COMMUNAL REFUSE DUMP/COMMUNAL CONTAINER	☐ 5
	6 = OWN REFUSE DUMP	☐ 6
	7 = NO RUBBISH REMOVAL	☐ 7
	8 = OTHER, *specify*	☐ 8

4.21	**Does this household have a landline telephone in the dwelling?**	
	1 = YES	☐ 1
	2 = NO	☐ 2
4.22	**Is there a cellular telephone available to this household for regular use?**	
	1 = YES	☐ 1
	2 = NO	☐ 2

Ask if answer is "No" to both Q 4.21 and Q 4.22. Otherwise Go to Q4.25

4.23	**How far does it take from here, to the nearest accessible telephone, using your usual means of transport?**	
	1 = 0 - 14 MIN	☐ 1
	2 = 15 - 29 MIN	☐ 2
	3 = 30 – 44 MIN	☐ 3
	4 = 45 – 59 MIN	☐ 4
	5 = 60 MIN OR MORE	☐ 5

Ask for all households

4.24	**Thinking back five years ago, did this household have a landline telephone in the dwelling then?**	
	1 = YES	☐ 1
	2 = NO	☐ 2
	3 = HOUSEHOLD DID NOT EXIST	☐ 3
	4 = DON'T KNOW	☐ 4

4.25	How does this household receive most of its mail/post?	
	1 = DELIVERED TO THE DWELLING	☐ 1
	2 = DELIVERED TO A POST BOX/PRIVATE BAG	☐ 2
	3 = THROUGH FRIEND OR NEIGHBOUR	☐ 3
	4 = THROUGH SHOP	☐ 4
	5 = THROUGH SCHOOL	☐ 5
	6 = THROUGH WORKPLACE	☐ 6
	7 = THROUGH AUTHORITY	☐ 7
	8 = DO NOT RECEIVE MAIL	☐ 8
	9 = OTHER, *specify*	☐ 9

4.26 **What means of transport are usually, or would usually be used by members of this household to get to the nearest of each of these facilities?**

If more than one means of transport, take the one used over the longest distance

Facility	ON FOOT	TAXI	BUS (PUBLIC)	TRAIN	OWN TRANS-PORT	OTHER, *specify below*
a Food market	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
b Public transport	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
c Pre-Primary/Pre-school centre	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
d Primary school	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
e Secondary school	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
f Clinic	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
g Hospital	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
h Post office or post office agent	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
i Welfare office	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6

If "Other" in Q 4.26, specify: .....

4.27	How long in minutes does it take or would it take, from here to reach the nearest ……using the usual means of transport?						
Facility		**0 - 14 MIN**	**15 - 29 MIN**	**30 - 44 MIN**	**45 - 59 MIN**	**60 MIN OR MORE**	**DON'T KNOW**
a	Food market	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
b	Public transport	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
c	Pre-Primary/Pre-school centre	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
d	Primary school	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
e	Secondary school	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
f	Clinic	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
g	Hospital	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
h	Post office or post office agent	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
i	Welfare office	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6

4.28	**Does this household have access to land that is, or could be, used for agricultural purposes?** 1 = YES 2 = NO → ***Go to Q 4.32***	☐ 1 ☐ 2
4.29	**How many hectares of land, for agricultural purposes, if any, does the household have access to?** *Exclude communal grazing land* 1 = LESS THAN 5.000 M^2 *(5.000 m^2 is approximately one soccer field)* 2 = 5.000M^2 - 9.999M^2 3 = 1 BUT LESS THAN 5 HA 4 = 5 BUT LESS THAN 10 HA 5 = 10 BUT LESS THAN 20 HA 6 = 20 HA OR MORE 7 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7
4.30	**On what basis does the household have access to the land?** 1 = OWNS THE LAND 2 = RENTS THE LAND 3 = SHARECROPPING 4 = TRIBAL AUTHORITY 5 = OTHER, *specify* 6 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6

4.31	**What farming activities, if any, take place on the land? Is it……..?** 1 = Field crops 2 = Horticulture 3 = Livestock 3 = Poultry 5 = Orchards 6 = Other, (*Specify)*……	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2

Ask for all households

4.32	**Did the household receive a government land grant to obtain a plot of land for residence or for farming?** 1 = YES 2 = NO 3 = DON'T KNOW	 ☐ 1 ☐ 2 ☐ 3
4.33	**Does the household own any cattle or other large livestock?** 1 = YES 2 = NO → ***Go to Q 4.35***	 ☐ 1 ☐ 2
4.34	**How many head of cattle and other large livestock are currently owned by the household?**	
4.35	**Does the household own any sheep, goats and other medium size animals?** 1 = YES 2 = NO → ***Go to Q 4.37***	 ☐ 1 ☐ 2
4.36	**How many sheep, goats and other medium size animals are currently owned by the household?**	

4.37	**Does the household own any poultry such as chickens, ducks, etc** (but excluding chicks) 1 = YES 2 = NO → ***Go to Q 4.39***	 ☐ 1 ☐ 2
4.38	**How many chicken, ducks, etc. are currently owned by the household?**	

4.39	**Does the household own any of the following?** 01 = Car or truck 02 = Motorcycle 03 = Tractor 04 = Plough 05 = Television 06 = Bicycle 07 = Radio 08 = Bed 09 = Watch or clock 10 = Books	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2
4.40	**In the past 12 months, did any adult in this household go hungry because there wasn't enough food?** 1 = NEVER 2 = SELDOM 3 = SOMETIMES 4 = OFTEN 5 = ALWAYS	 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4.41	**In the past 12 months, did any child (17 years or younger) in this household go hungry because there wasn't enough food?** 1 = NEVER 2 = SELDOM 3 = SOMETIMES 4 = OFTEN 5 = ALWAYS	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
4.42	**In the past 12 months, is there any young person, aged 5 - 17, who has left this household to live on the streets?** 1 = YES 2 = NO 3 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3
4.43	**Does any member of this household receive any of the following Welfare Grants?** 1 = Old age pension 2 = Disability grant 3 = Child support grant 4 = Care dependency grant 5 = Foster care grant 6 = Grant in aid 7 = Social relief	**YES** **NO** ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2
4.44	**What is the main source of income for this household?** 1 = SALARIES AND/OR WAGES 2 = REMITTANCES 3 = PENSIONS AND GRANTS 4 = SALES OF FARM PRODUCTS 5 = OTHER NON-FARM INCOME 6 = NO INCOME	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6

4.45	**What was the total household expenditure in the last month?** *Include everything that the household and its members spent money on, including food, clothing, transport, rent and rates, alcohol and tobacco, school fees, entertainment and any other expenses.* 01 = R 0 – R 399 02 = R 400 – R 799 03 = R 800 – R 1 199 04 = R 1 200 – R 1 799 05 = R 1 800 – R 2 499 06 = R 2 500 – R 4 999 07 = R 5 000 – R 9 999 08 = 10 000 OR MORE 09 = DON'T KNOW 10 = REFUSE	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10

Please read as you show the prompt card

Now, I am now going to ask you questions regarding your physical safety and that of other members of your household. In some of the questions I will show you a prompt card, which has eleven choices "00" to "10" describing the level of your feelings about safety or satisfaction. Kindly point out the level that best describes your feelings.

4.46	**Regarding your own safety, how safe do you feel if you are walking in this area at night?** 1 = VERY SAFE 2 = RATHER SAFE 3 = RATHER UNSAFE 4 = VERY UNSAFE	☐ 1 ☐ 2 ☐ 3 ☐ 4
4.47	**Thinking about your physical safety in your neighbourhood, how safe do you and other members of the household feel living here?** *(Ask respondent to point out the answer on a prompt card)* 01 = 10 (COMPLETELY SAFE) 02 = 09 03 = 08 04 = 07 05 = 06 06 = 05 07 = 04 08 = 03 09 = 02 10 = 01 11 = 00 (COMPLETELY UNSAFE)	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11

4.48	**During the past 12 months, have you or any member of this household been subjected to the following incidents?** **Have you or any member of this household ……** 1 = had things stolen 2 = been harassed or threatened by a household member 3 = been harassed or threatened by someone outside the household 4 = been sexually molested by a household member 5 = been sexually molested by someone out side the household 6 = been beaten up or hurt by a household member 7 = been beaten up or hurt by someone outside the household	**YES NO** ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2
4.49	**Taking everything into account, how satisfied are you with public safety these days?** *(Ask respondent to point out the answer on a prompt card)* 01 = 10 (COMPLETELY SATISFIED) 02 = 09 03 = 08 04 = 07 05 = 06 06 = 05 07 = 04 08 = 03 09 = 02 10 = 01 11 = 00 (COMPLETELY DISSATISFIED)	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11

Please read out

Now, in the following questions, I am going to ask you whether you agree with several statements dealing with general problems of life. Please tell me if you completely agree, somewhat agree, somewhat disagree or strongly disagree with the statement.

4.50	**Would you agree with the statement that, you can't do much to change most of the difficulties we face today?** 1 = COMPLETELY AGREE 2 = SOMEWHAT AGREE 3 = SOMEWHAT DISAGREE 4 = STRONGLY DISAGREE	☐ 1 ☐ 2 ☐ 3 ☐ 4
4.51	**Would you agree with the statement that, you often feel lonely?** 1 = COMPLETELY AGREE 2 = SOMEWHAT AGREE 3 = SOMEWHAT DISAGREE 4 = STRONGLY DISAGREE	☐ 1 ☐ 2 ☐ 3 ☐ 4
4.52	**Would you agree with the statement that, you don't really enjoy your work?** 1 = COMPLETELY AGREE 2 = SOMEWHAT AGREE 3 = SOMEWHAT DISAGREE 4 = STRONGLY DISAGREE	☐ 1 ☐ 2 ☐ 3 ☐ 4
4.53	**Would you agree with the statement that, life has become so complicated today that you almost can't find your way?** 1 = COMPLETELY AGREE 2 = SOMEWHAT AGREE 3 = SOMEWHAT DISAGREE 4 = STRONGLY DISAGREE	☐ 1 ☐ 2 ☐ 3 ☐ 4
4.54	**Would you agree with the statement that, you are very optimistic about the future?** 1 = COMPLETELY AGREE 2 = SOMEWHAT AGREE 3 = SOMEWHAT DISAGREE 4 = STRONGLY DISAGREE	☐ 1 ☐ 2 ☐ 3 ☐ 4
4.55	**Would you agree with the statement that, in order to get ahead nowadays you are forced to do things that are not correct?** 1 = COMPLETELY AGREE 2 = SOMEWHAT AGREE 3 = SOMEWHAT DISAGREE 4 = STRONGLY DISAGREE	☐ 1 ☐ 2 ☐ 3 ☐ 4

4.56	**Please tell me how satisfied you are with your life in general.** *(Ask respondent to point out the answer on a prompt card)* 01 = 10 (COMPLETELY SATISFIED) 02 = 09 03 = 08 04 = 07 05 = 06 06 = 05 07 = 04 08 = 03 09 = 02 10 = 01 11 = 00 (COMPLETELY DISSATISFIED)	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11

End of interview.

Thank the respondent!

Interviewer to answer questions on next page.

4.57	***Indicate the column number of the person who answered the questions in Section 5***	
4.58	***In what language was the main part of the interview conducted?*** 01 = AFRIKAANS 02 = ENGLISH 03 = ISINDEBELE/SOUTH NDEBELE/NORTH NDEBELE 04 = ISIXHOSA/XHOSA 05 = ISIZULU/ZULU 06 = SEPEDI/NORTHERN SOTHO 07 = SESOTHO/SOUTHERN SOTHO/SOTHO 08 = SETSWANA/TSWANA 09 = SISWATI/SWAZI 10 = TSHIVENDA/VENDA 11 = XITSONGA/TSONGA 12 = OTHER, *specify*	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12

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