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Statistics
South Africa

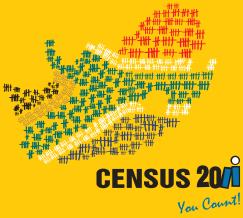
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HOUSEHOLD QUESTIONNAIRE

FOR STATISTICAL USE ONLY

A



CENSUS 2011

You Count!

STATISTICS ACT NO. 6 OF 1999 (CONFIDENTIALITY)

17(1) Despite any other law, no return or other information collected by Statistics South Africa for the purposes of official or other statistics that relates to an individual or a household may be disclosed to any person.

17(3b) Any person who is involved in the collection of, or who may use, that information or data, must first take an oath of confidentiality.

18(1e) Any officer of Statistics South Africa who willfully discloses any data or

18(1g) information obtained in the course of such employment to a person not authorised to receive that information is guilty of an offence and liable on conviction to a fine not exceeding R10 000, or to imprisonment for a period not exceeding 6 months or to both.

ENUMERATION AREA NUMBER

Province

Local municipality

Main place

Sub-place

Physical identification of the dwelling unit

Postal code

Landline/Cell phone of enumerated household

PARTICULARS OF THE HOUSEHOLD

Dwelling unit number

Household number

Total number of households at this dwelling

Map reference number

Listing record number

Total number of persons in the household

Males

Females

Total

Questionnaire

of

completed for this household

If more than one questionnaire is used in the household, write the barcode of the 1st questionnaire below

METHOD OF QUESTIONNAIRE COMPLETION - Mark the appropriate circle with an X

A fieldworker through an interview

A household member through self-completion

FIELD STAFF

Fieldworker ID No.

Supervisor ID No.

Signature

Signature

RESPONSE DETAILS

Visit No.	Date (actual)	Interview	Result Code	Next Visit (Planned)	
		Start Time	End Time	Date	Time
1					
2					
3					
4					

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

RESULT CODE

RESPONSE DETAILS

FINAL RESULT CODE

SHOULD YOU ENCOUNTER ANY DIFFICULTIES IN THE COMPLETION OF THE QUESTIONNAIRE, PLEASE CONTACT:

ON

OR PHONE THE CENSUS HOTLINE, TOLL FREE, ON

0800 110 248

PROCEDURES OF ENUMERATION

Who should be the respondent?

The head/acting head of the household.

In the absence of head/acting head, any responsible adult member left in charge of the household.

Note:

A household is a group of persons who live together, and provide themselves jointly with food or other essentials for living, or a single person who lives alone.

Domestic workers are counted as a separate household even if they live in the same dwelling as the employer.

Who should be counted in this questionnaire?

All persons present in the household on the reference night (midnight 9-10 October 2011)

Include babies born before the reference night as well as visitors.

Members who died after the reference night must be counted as alive.

Members of the household who were absent overnight, for example working, travelling, at an entertainment venue or at a religious gathering, if they returned to the household the next day.

Individuals in converted hostels, residential hotels and old age homes (depending on arrangement).

How to complete the questionnaire

Read every question carefully

Make sure that all the codes are written inside the boxes.

For example:

3

Correct

3

Incorrect

For numeric values, such as age, person number, number of children, the enumerator/respondent should write the correct answer in the box and include leading zeros. For example:

0

0

7

For open-ended questions, the enumerator/respondent should write legibly in CAPITAL LETTERS in the boxes provided with no spaces between the words. For example Cape Town should be written as:

C

A

P

E

T

O

W

N

Do not write zeros in boxes where questions are not applicable

What to use when completing this questionnaire?

Use only a pencil. If you make a mistake, use a soft rubber to erase the mistake and write the correct answer.

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Please write the name and surname of the household head and first names of every person who was present in this household on the census night (midnight 9-10 October 2011)

One name on each row. Start with head or acting head of household.

The head or acting head is the person who is the main decision-maker of the household. If people are equal decision-makers, then take the oldest person as the household head.

For babies with no name, write BABY.

Please include babies, small children, old people and visitors who were present in this household on the census night (9-10 October 2011)

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SECTION B: MIGRATION (Continued)[illegible]

SECTION C: GENERAL HEALTH AND FUNCTIONING -
ASK OF EVERYONE LISTED ON THE FLAP

SECTION D: PARENTAL SURVIVAL AND
INCOME - ASK OF EVERYONE LISTED ON
THE FLAP

P-12 HEALTH AND FUNCTIONING	P-13 ASSISTIVE DEVICES AND MEDICATION	P-14 MOTHER ALIVE	P-14a MOTHER PERSON NUMBER	P-15 FATHER ALIVE
<p>Does (name) have difficulty in the following:</p> <p>A = Seeing even when using eye glasses? B = Hearing even when using a hearing aid? C = Communicating in his/her language (i.e. understanding others or being understood by others)? D = Walking or climbing stairs? E = Remembering or concentrating? F = With self-care such as washing all over, dressing or feeding?</p> <p>1 = No difficulty 2 = Some difficulty 3 = A lot of difficulty 4 = Cannot do at all 5 = Do not know 6 = Cannot yet be determined</p> <p>Write the appropriate code in the box.</p>	<p>Does (name) use any of the following:</p> <p>A = Eye glasses? B = Hearing aid? C = Walking stick or frame? D = A wheelchair? E = Chronic medication?</p> <p>1 = Yes 2 = No 3 = Do not know</p> <p>Write the appropriate code in the box.</p>	<p>Is (name's) own biological mother still alive?</p> <p>1 = Yes 2 = No 3 = Do not know</p> <p>Mark the appropriate circle with an X.</p> <p>If 2-3, Go to P-15</p>	<p>Who in this household is (name's) biological mother?</p> <p>If the person's mother does not reside in the household (not listed on the flap), write 98.</p> <p>Note: Refer to person number on flap e.g. 02</p> <p>If 2-3, Go to P-16</p>	<p>Is (name's) own biological father still alive?</p> <p>1 = Yes 2 = No 3 = Do not know</p> <p>Mark the appropriate circle with an X.</p> <p>If 2-3, Go to P-16</p>
<div><div><input type="checkbox"/> Seeing (A)</div><div><input type="checkbox"/> Hearing (B)</div><div><input type="checkbox"/> Communicating (C)</div></div> <div><div><input type="checkbox"/> Walking / Climbing (D)</div><div><input type="checkbox"/> Remembering / Concentrating (E)</div><div><input type="checkbox"/> Self-care (F)</div></div>	<div><div><input type="checkbox"/> Glasses (A)</div><div><input type="checkbox"/> Hearing aid (B)</div><div><input type="checkbox"/> Walking stick / frame (C)</div></div> <div><div><input type="checkbox"/> Wheelchair (D)</div><div><input type="checkbox"/> Chronic medication (E)</div></div>	<div><div><input type="radio"/> 1 Yes</div><div><input type="radio"/> 2 No</div><div><input type="radio"/> 3 Do not know</div></div>	<div><div><input type="text"/></div><div><input type="text"/></div></div>	<div><div><input type="radio"/> 1 Yes</div><div><input type="radio"/> 2 No</div><div><input type="radio"/> 3 Do not know</div></div>
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**SECTION E: EDUCATION - ASK OF ALL PERSONS
AGED 5 YEARS AND OLDER LISTED ON THE FLAP**

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SECTION E: EDUCATION
(Continued)

P-22 LITERACY

Does (name) have difficulty in doing any of the following:
A = Writing his/her name?
B = Reading (e.g. newspapers, magazines, religious books etc) in any language?
C = Filling in a form (e.g. social grants forms)?
D = Writing a letter in any language?
E = Calculating/working out how much change he/she should receive when buying something?
F = Reading road signs?
1 = No difficulty
2 = Some difficulty
3 = A lot of difficulty
4 = Unable to do
5 = Do not know
Write the code in the appropriate box.

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

☐ Writing his/her name (A) ☐ Writing a letter (D)
☐ Reading (B) ☐ Calculating (E)
☐ Filling a form (C) ☐ Reading road signs (F)

SECTION F: EMPLOYMENT - ASK OF ALL PERSONS AGED
15 YEARS AND OLDER LISTED ON THE FLAP

P-23 EMPLOYMENT STATUS

(Answer all three questions and then follow the skip instruction below)

In the SEVEN DAYS before 10 October ...
P-23a
Did (name) work for a wage, salary, commission or any payment in kind (including paid domestic work), even if it was for only one hour?
1 = Yes
2 = No
3 = Do not know
Mark the appropriate circle with an X.

In the SEVEN DAYS before 10 October ...
P-23b
Did (name) run or do any kind of business, big or small, for herself/himself or with one or more partners, even if it was for only one hour?
1 = Yes
2 = No
3 = Do not know
Mark the appropriate circle with an X.

In the SEVEN DAYS before 10 October ...
P-23c
Did (name) help without being paid in any kind of business run by her/his household, even if it was for only one hour?
1 = Yes
2 = No
3 = Do not know
Mark the appropriate circle with an X.

If 1 (Yes) to any of P-23a, P-23b or P-23c, Go to P-29a

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know

☐ 1 Yes
☐ 2 No
☐ 3 Do not know



SECTION F: EMPLOYMENT (Continued)

P-24 TEMPORARY ABSENCE FROM WORK	P-25 LOOKING FOR WORK	P-26 LIKED TO WORK	P-27 REASONS FOR NOT WORKING	P-28 AVAILABLE TO WORK
<p>Even though <i>(name)</i> did not do any work for pay, profit or did not help without pay in a household business in the SEVEN DAYS before 10 October, did he/she have a paid job or business that he/she would definitely return to?</p> <p>1 = Yes 2 = No 3 = Do not know</p> <p>Mark the appropriate circle with an X.</p> <p>If 1, Go to P-29a</p>	<p>In the four weeks before 10 October was <i>(name)</i> looking for any kind of job or trying to start any kind of business?</p> <p>1 = Yes 2 = No 3 = Do not know</p> <p>Mark the appropriate circle with an X.</p> <p>If 1, Go to P-28</p>	<p>Would <i>(name)</i> have liked to work in the SEVEN DAYS before 10 October?</p> <p>1 = Yes 2 = No 3 = Do not know</p> <p>Mark the appropriate circle with an X.</p> <p>If 2 or 3, Go to P-32</p>	<p>What was the main reason for not trying to find work or starting a business in the last four weeks before 10 October?</p> <p>01 = Awaiting the season for work 02 = Waiting to be recalled to former job 03 = Health reasons 04 = Pregnancy 05 = Disabled or unable to work (handicapped) 06 = Housewife/homemaker (family considerations/child care) 07 = Undergoing training to help find work 08 = No jobs available in the area 09 = Lack of money to pay for transport to look for work 10 = Unable to find work requiring his/her skills 11 = Lost hope of finding any kind of work 12 = No transport available 13 = Scholar or student 14 = Retired 15 = Too old/young to work 16 = Did not want to work 17 = Other</p> <p>Write the appropriate code in the boxes.</p>	<p>If a suitable job had been offered or circumstances had allowed, would <i>(name)</i> have been able to start work or a business in the SEVEN DAYS before 10 October?</p> <p>1 = Yes 2 = No 3 = Do not know</p> <p>Mark the appropriate circle with an X.</p> <p>Any response, Go to P-32</p>
<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="text" value=""/><input type="text" value=""/></p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>
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<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="text" value=""/><input type="text" value=""/></p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>
<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="text" value=""/><input type="text" value=""/></p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>
<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="text" value=""/><input type="text" value=""/></p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>
<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="text" value=""/><input type="text" value=""/></p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>
<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="text" value=""/><input type="text" value=""/></p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>
<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>	<p><input type="text" value=""/><input type="text" value=""/></p>	<p><input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know</p>
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SECTION F: EMPLOYMENT (Continued)[illegible]

SECTION G: FERTILITY - ASK OF WOMEN AGED 12-50 YEARS LISTED ON THE FLAP

P-32 CHILDREN EVER BORN	P-33 AGE AT FIRST BIRTH	P-34 TOTAL CHILDREN EVER BORN	P-35 TOTAL SURVIVING AND LIVING IN THE HOUSEHOLD	P-36 TOTAL SURVIVING AND LIVING ELSEWHERE	P-37 TOTAL CHILDREN NO LONGER ALIVE	P-38 LAST CHILD BORN	P-39 SEX OF LAST CHILD BORN	P-40 LAST CHILD BORN ALIVE	P-41 DATE OF DEATH OF LAST CHILD BORN
Has (name) ever given birth to a live child, even if the child died soon after birth? 1 = Yes 2 = No 3 = Do not know	At what age did (name) have her first child born?	How many children has (name) ever had that were born alive?	How many of (name's) children are still alive and living with her in this household, including grown-ups?	How many of (name's) children are still alive and living elsewhere, including grown-ups?	How many of (name's) children are no longer alive?	When was (name's) last child born, even if the child died soon after birth?	Is (name's) last child born male or female? 1 = Male 2 = Female 3 = Do not know	Is (name's) last child born still alive? 1 = Yes 2 = No 3 = Do not know	When did (name's) last child born die?
Mark the appropriate circle with an X.	Example 2 5	Example Boys 0 2 Girls 0 2 Total 0 4	Example Boys 0 2 Girls 0 1 Total 0 3	Example Boys 0 0 Girls 0 0 Total 0 0	Example Boys 0 0 Girls 0 1 Total 0 1	Example 1 9 0 4 2 0 0 5	Mark the appropriate circle with an X.	Mark the appropriate circle with an X.	Example 1 0 0 3 2 0 0 7
If 2 or 3, Go to H-01		Write the correct number in the boxes below	Write the correct number in the boxes below	Write the correct number in the boxes below	Write the correct number in the boxes below			If 1 or 3, Go to H-01	
<input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know	<input type="radio"/> <input type="radio"/>	Boys <input type="radio"/> <input type="radio"/> Girls <input type="radio"/> <input type="radio"/> Total <input type="radio"/> <input type="radio"/>	Boys <input type="radio"/> <input type="radio"/> Girls <input type="radio"/> <input type="radio"/> Total <input type="radio"/> <input type="radio"/>	Boys <input type="radio"/> <input type="radio"/> Girls <input type="radio"/> <input type="radio"/> Total <input type="radio"/> <input type="radio"/>	Boys <input type="radio"/> <input type="radio"/> Girls <input type="radio"/> <input type="radio"/> Total <input type="radio"/> <input type="radio"/>	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	<input type="radio"/> 1 Male <input type="radio"/> 2 Female <input type="radio"/> 3 Do not know	<input type="radio"/> 1 Yes <input type="radio"/> 2 No <input type="radio"/> 3 Do not know	<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
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Census 2011 - A® Statistics South Africa, November 2010



SECTION H: HOUSING, HOUSEHOLD GOODS AND SERVICES AND AGRICULTURAL ACTIVITIES - ASK OF EVERY HOUSEHOLD

<div><div>H-01 TYPE OF LIVING QUARTERS</div><div>What is the type of these living quarters?</div><div><div>01 = Housing unit</div><div>02 = Converted Hostel (e.g. family unit)</div><div>03 = Residential Hotel</div><div>04 = Home for the aged</div><div>05 = Other</div></div><div><div></div><div></div><div>Write the appropriate code in the boxes.</div></div><div>If 03-05, Go to H-07</div></div>	<div><div>H-04 TENURE STATUS</div><div>What is the tenure status of this dwelling?</div><div><div>1 = Rented</div><div>2 = Owned but not yet paid off</div><div>3 = Occupied rent-free</div><div>4 = Owned and fully paid off</div><div>5 = Other</div></div><div><div></div><div>Write the appropriate code in the box.</div></div><div>Refers to the MAIN dwelling structure only and NOT to the land that it is situated on.</div></div>
<div><div>H-02 TYPE OF MAIN DWELLING</div><div>Which of the following best describes the MAIN dwelling and OTHER dwelling(s) that this household occupies?</div><div><div>01 = House or brick/concrete block structure on a separate stand or yard or on a farm</div><div>02 = Traditional dwelling/hut/structure made of traditional materials</div><div>03 = Flat or apartment in a block of flats</div><div>04 = Cluster house in complex</div><div>05 = Townhouse (semi-detached house in a complex)</div><div>06 = Semi-detached house</div><div>07 = House/flat/room in backyard</div><div>08 = Informal dwelling (shack in backyard)</div><div>09 = Informal dwelling (shack not in backyard, e.g. in an informal/squatter settlement or on a farm)</div><div>10 = Room/flatlet on a property or a larger dwelling/servants' quarters/granny flat</div><div>11 = Caravan/tent</div><div>12 = Other</div></div><div><div>Main dwelling</div><div>Other dwelling</div><div><div></div><div></div><div></div><div></div></div><div>Write the appropriate code in the boxes.</div></div></div>	<div><div>H-05 ESTIMATED VALUE OF PROPERTY</div><div>What would you estimate the market value or municipal valuation of this property to be?</div><div><div>1 = Less than R50 000</div><div>2 = R50 001 – R100 000</div><div>3 = R100 001 – R200 000</div><div>4 = R200 001 – R400 000</div><div>5 = R400 001 – R800 000</div><div>6 = R800 001 – R1 600 000</div><div>7 = R1 600 001 – R3 200 000</div><div>8 = More than R3 200 001</div><div>9 = Do not know</div></div><div><div></div><div>Write the appropriate code in the box.</div></div></div>
<div><div>H-02a CONSTRUCTION MATERIAL</div><div>What is the main material used for the construction of the roof and wall of the MAIN dwelling?</div><div><div>01 = Brick</div><div>02 = Cement block/Concrete</div><div>03 = Corrugated iron/zinc</div><div>04 = Wood</div><div>05 = Plastic</div><div>06 = Cardboard</div><div>07 = Mud and cement mix</div><div>08 = Wattle and daub</div><div>09 = Tile</div><div>10 = Mud</div><div>11 = Thatch/Grass</div><div>12 = Asbestos</div><div>13 = Other</div></div><div><div>ROOF</div><div>WALL</div><div><div></div><div></div><div></div><div></div></div><div>Write the appropriate code in the boxes.</div></div></div>	<div><div>H-06 AGE OF THE PROPERTY</div><div>What is the age of this dwelling?</div><div><div>01 = Less than one year</div><div>02 = 1 - 5 years</div><div>03 = 6 - 10 years</div><div>04 = 11 - 20 years</div><div>05 = 21 - 30 years</div><div>06 = 31 - 40 years</div><div>07 = 41 - 50 years</div><div>08 = 51 - 60 years</div><div>09 = 61 years or older</div><div>10 = Do not know</div></div><div><div></div><div>Write the appropriate code in the boxes.</div></div><div>The age of the dwelling refers to when the building was completed, not the time of any later remodelling, additions or conversions. If the actual age is not known, give the best estimate.</div></div>
<div><div>H-03 ROOMS</div><div>How many rooms are there in the MAIN dwelling of this household?</div><div><div>Dining rooms</div><div>Living rooms</div><div>Dining/Living room</div><div>Bedrooms</div><div>Study Rooms</div><div>One room with multiple uses</div><div>Other rooms</div><div>Total Rooms</div></div><div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div><div>Write the correct number of rooms in the boxes.</div></div>	<div><div>H-07 ACCESS TO PIPED WATER</div><div>In which way does this household mainly get piped water for household use?</div><div><div>1 = Piped (tap) water inside the dwelling</div><div>2 = Piped (tap) water inside the yard</div><div>3 = Piped (tap) water on community stand: distance less than 200m from dwelling</div><div>4 = Piped (tap) water on community stand: distance between 200m and 500m from dwelling</div><div>5 = Piped (tap) water on community stand: distance between 500m and 1000m (1 km) from dwelling</div><div>6 = Piped (tap) water on community stand: distance greater than 1000m (1 km) from dwelling</div><div>7 = No access to piped water</div></div><div><div></div><div>Write the appropriate code in the box.</div></div></div>
<div><div>H-08 SOURCE OF WATER</div><div>What is this household's MAIN source of WATER for household use?</div><div><div>1 = Regional/local water scheme (operated by municipality or other water services provider)</div><div>2 = Borehole</div><div>3 = Spring</div><div>4 = Rain water tank</div><div>5 = Dam/pool/stagnant water</div><div>6 = River/stream</div><div>7 = Water vendor</div><div>8 = Water tanker</div><div>9 = Other</div></div><div><div></div><div>Write the appropriate code in the box.</div></div><div>If 2-9, Go to H-10</div></div>	



SECTION H: HOUSING, HOUSEHOLD GOODS AND SERVICES AND AGRICULTURE ACTIVITIES (Continued)

H-09 RELIABILITY OF WATER SUPPLY

In the last 12 months, has this household had any interruptions in piped water supply?

- ☐ 1 = Yes
☐ 2 = No

If 2, Go to H-10

Mark the appropriate circle with an X.

H-09a RELIABILITY OF WATER SUPPLY

Did any specific interruption(s) in piped water supply last longer than two days ?

- ☐ 1 = Yes
☐ 2 = No

If 2, Go to H-10

Mark the appropriate circle with an X.

H-09b ALTERNATIVE WATER SOURCE

What alternative water source did the household use during water supply interruption?

- 1 = Borehole
2 = Spring
3 = Rain water tank
4 = Dam/pool/stagnant water
5 = River/stream
6 = Water vendor
7 = Water tanker
8 = Other
0 = None

Write the appropriate code in the box.

H-10 TOILET FACILITIES

What is the MAIN type of TOILET facility used by this household?

- 1 = Flush toilet (connected to sewerage system)
2 = Flush toilet (with septic tank)
3 = Chemical toilet
4 = Pit toilet with ventilation (VIP)
5 = Pit toilet without ventilation
6 = Bucket toilet
7 = Other
0 = None

Write the appropriate code in the box.

H-11 ENERGY/FUEL

What type of energy/fuel does this household MAINLY use for cooking, heating and lighting?

- COOKING ☐ 1 = Electricity 6 = Candles
HEATING ☐ 2 = Gas 7 = Animal Dung
LIGHTING ☐ 3 = Paraffin 8 = Solar
4 = Wood 9 = Other
5 = Coal 0 = None

Write the appropriate code in the box.

Note

- Wood (4), coal (5) and animal dung (7) cannot be used for lighting
- Candles (6) cannot be used for heating or cooking

H-12 REFUSE DISPOSAL

How is the refuse or rubbish from this household MAINLY disposed of?

- 1 = Removed by local authority/private company at least once a week
2 = Removed by local authority/private company less often
3 = Communal refuse dump
4 = Own refuse dump
5 = No rubbish disposal
6 = Other

Write the appropriate code in the box.

H-13 HOUSEHOLD GOODS AND SERVICES

Does this household own any of the following in working order?

- 1 = Yes
2 = No

Write the appropriate code in the box.

- Refrigerator ☐ Motorcar ☐
Electric/gas stove ☐ Television ☐
Vacuum cleaner ☐ Radio ☐
Washing machine ☐ Landline/Telephone ☐
Computer ☐ Cell phone ☐
Satellite television ☐ Mail Post box/bag ☐
DVD Player ☐ Mail delivery at home ☐

H-13a ACCESS TO INTERNET

How does this household MAINLY access internet?

- 1 = From home
2 = From Cell phone
3 = From work
4 = From elsewhere
5 = No access to internet

Write the appropriate code in the box.

H-14 AGRICULTURAL ACTIVITIES

What kind of agricultural activity is the household involved in? (More than 1 activity can be chosen)

- ☐ 1 = Livestock production (cattle, goats, sheep, pigs, etc)
☐ 2 = Poultry production (chicken, ducks, geese, guinea fowl, ostrich, etc)
☐ 3 = Vegetable production
☐ 4 = Production of other crops (grains, fruits, etc)
☐ 5 = Fodder grazing/pasture/grass for animals
☐ 6 = Other
☐ 0 = None

Mark the appropriate circle with an X.

If only 2-6, Go to H-14b. If 0, Go to M-00

H-14a LIVESTOCK

How many of the following does the household own?

- | | 0 | 1 - 10 | 11 - 100 | + 100 |
|------------|-----------------------|-----------------------|-----------------------|-----------------------|
| 1 = Cattle | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2 = Sheep | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3 = Goats | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 4 = Pigs | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 5 = Other | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Mark the appropriate circle with an X.

H-14b PLACE OF AGRICULTURAL ACTIVITIES

Where does this household operate its agricultural activities?

- ☐ 1 = Farm land
☐ 2 = Backyard or school
☐ 3 = Communal or tribal land
☐ 4 = Other

Mark the appropriate circle with an X.



[illegible]