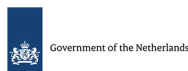


Annex Booklet

Household Survey 2013



Livelihoods and Food Security Trust Fund



Annex 1: Village questionnaire

INFORMED CONSENT AND INTRODUCTION

Informed consent: it is necessary to introduce the village leaders to the survey and obtain the consent of all prospective respondents to participate. If a prospective respondent (e.g., a woman decision maker) is not present at the beginning of the interview, be sure to return to this page and obtain consent before interviewing him or her. Ask to speak with an important person in the village.

Hello. My name is _____. I am working with MSR/ICF. We are conducting a survey to determine the success of the LIFT program, which has been funded by people around the world and provides support to villages to help poor and vulnerable households to improve their livelihoods and income.

We are interviewing 3,200 households in 200 villages across Myanmar. These include some villages where LIFT organizations have been working and other villages where LIFT organizations have never worked.

Each village has been selected randomly so that we can collect information on the livelihoods and the kinds of food households grow and eat to see whether LIFT's support has been effective. Your village is among those selected and we would like to ask you as an important member of the village some questions about your village. In total, the questions should take about 15 minutes of your time.

Your information will help LIFT know how best to provide support, and to understand if this assistance is helping households and children in this village. We ask for your open and honest information. The results will be summarized for the 200 selected villages. I hope you will assist us and the LIFT program so that it can work more effectively to support the poor and vulnerable people of Myanmar.

We can return later today if you don't have time to finish all the questions now. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. You don't have to be in the survey, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact the person listed on this card.

GIVE CARD WITH CONTACT INFORMATION

Do you have any questions about the study or about your participation?

ASK THE FOLLOWING CONSENT QUESTIONS OF ALL PROSPECTIVE RESPONDENTS.

AS APPLICABLE, CHECK AND SIGN THE CONSENT BOX BELOW.

[NAME], do you agree to participate in the survey?

NAME: _____ RESPONDENT AGREED _____ RESPONDENT DID NOT AGREE _____

ADDITIONAL VILLAGE LEADERS ASKED TO PARTICIPATE

	RESPONDENT Agreed	RESPONDENT Didn't agree
1 NAME _____ Do you agree to participate in the survey?		
2 NAME _____ Do you agree to participate in the survey?		
3 NAME _____ Do you agree to participate in the survey?		

My signature affirms that I have read the verbal informed consent statement to the respondent(s), and I have answered any questions asked about the study. The respondent consented to the interview.

INTERVIEWER'S NAME AND CODE _____
_____/_____/2013

SIGNATURE AND DATE _____
_____/_____/2013

LIFT Village Survey

PROFILE OF VILLAGE

Questionnaire No

SECTION 1: GENERAL INFORMATION

1.1	Village name		_ _ _ _
1.2	Village MIMU code		_ _ _ _
1.3	Village tract name		_ _ _ _
1.4	Township name		_ _ _ _
1.5	State/Region		_ _ _ _
1.6	LIFT Fund Village/ Control Village	LIFT Fund Village1 Control Village2	_ _ _ _
1.7	Interview date	__DD__/_MM__/_2013	____/____/2013

		Name	Code
1.8	Enumerator		_ _
1.9	Supervisor		_ _
1.10	Editor		_ _

Name of LIFT Implementing Partners who are working or plan to work in this village:

1

2

3

4

5

Respondent information

	Name	Sex Male--- 1 Female--2	Designation/Occupation
1.11			
Respondent—1		1 2	
Respondent—2		1 2	
Respondent—3		1 2	
Respondent—4		1 2	
Respondent—5		1 2	
Village telephone no.			
2. Households			Total
2.1	# of households		_ _
3. Village population			Total

3.1	Male			
3.2	Female			

4.	What are the average wages per day (Kyat) paid locally	
4.1	Male	_____ Kyats
4.2	Female	_____ Kyats

5. Village access and proximity to services

	Multiple answers	Distance from village (mile) a	Mode of Transport		Time needed (One-way) (minutes)		Cost (Kyats) (One-way)	
			Wet	Dry	Wet	Dry	Wet	Dry
			b	c	d	e	f	g
1	Nearest township							
2	Sub-rural health centre							
3	Primary school (govt.)							
4	Middle school (govt.)							
5	High school (govt.)							
6	Bank							

Codes for Column b and c:

On foot.....	1	Motor cycle.....	5
Ox-cart/ horse cart	2	Car	6
Trailer Jeep	3	Boat.....	7
Bicycle.....	4	Other Specify.....	8

6. Standard of road access to the village: SELECT THE ONE THAT BEST DESCRIBES THE SITUATION

No road reaching all the way to the village (e.g., access by water sea/river)	1	
Rough track reaching all the way to the village (bullock cart or walking only)	2	
Rough track Suitable for trawlargee but not for cars/trucks	3	
Accessible by car/truck in dry weather only	4	
Accessible by car/truck in all weather	5	

Type	Yes....1 No.....0	If 'yes', No. of HH
7. Availability of electricity		
1 Electricity (Govt.)		
2 Electricity organized by village		
3 Electricity (Private/commercial generator)		

8. Infrastructure/facilities within the village

Type	Yes....1 No.....0	Number
1 Primary school (govt.)	<input type="checkbox"/>	<input type="text"/>
2 Middle school (govt.)	<input type="checkbox"/>	<input type="text"/>
3 High school (govt.)	<input type="checkbox"/>	<input type="text"/>
4 Non govt. school	<input type="checkbox"/>	<input type="text"/>
5 Sub rural health centre	<input type="checkbox"/>	<input type="text"/>
6 Grain bank/seed bank	<input type="checkbox"/>	<input type="text"/>
7 Cyclone shelter	<input type="checkbox"/>	<input type="text"/>

9. Are there any functioning self-help groups in the village Yes.....1 No.....2 If "2" ►11
10. If yes, what are they and what do they do?

	Name of self help group		Main activities		No of member HHs	No. of male members	No. of female members	When did it last meet? (indicate the month/year)
	Name	Code	Main activities	Code				
	a		b		c	d	e	F M_ M_ Y_ Y_
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

NOTE: If members are households, use column c. If members are individuals, use column d & e.

11. Have any NGOs been working in the village in the past 24 months? Yes.....1 No.....2 If "2" ►13

12. If yes, what have been their major activities in the village?

	Name of NGO	NGO code	Major activities?	Activities Code
	a		b	
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

13. Has any government or non-government agency conducted training for any members of the village in the past 12 months? Yes.....1 No.....2 If "2" ►15

14. If yes, what type of training?

	Name of agency or NGO a	NGO code	Nature of training b	Training Code
1				
2				
3				
4				
5				
6				
7				
8				

15. Source of credit in this village

	Type of lender	Interest rate (%) Per month a	Term of loan (moths) Write dash(-) if no term fixed. b	Frequency of repayment c	Repayment (in cash/kind) Cash 1 Kind Specify 2 d	Collateral needed (Y/N) Yes 1 No 2 e
1						
2						
3						
4						
5						

NOTE: In the "Type of lender" column, fill in the following codes:

- Private bank 1
- Micro-credit provider (low interest, of 2.5% per month or less) 2
- Village Savings and Loans Association 3
- Family/friend 4
- Money lender 5
- Shop-keeper 6
- Private company 7
- Farmers Association/Cooperative 8
- Pre-sale of product to trader 9
- Government 10
- Other (specify) _____ 88

		Yes.....1 No.....2
16.	Is there any savings and loan association operating in this village?	
17.	Does the village have access to low interest micro-credit? (less or equal to 2.5%)	

18. If yes to either or both questions, complete the following table

	Name of Savings and Loan group or microcredit provider Name a	Code	Main objective for providing credit B	Total no. current loans in village from these sources c	No. current loans to women d
1	_____				
2	_____				

3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: Codes for Main objective for providing credit:

- Agri.....1
- Fishery.....2
- Small business.....3
- Non farm IGA Specify.....4
- Other Specify.....5

19. Water sources in the village

	Main water source	Does your village use this source		Quantity			Purpose of use			All-year-round availability	
		1 Yes	2 No	1 Very important	2 important	3 Minor	Drinking.....1	Other HH uses.....2	Both.....3	Yes.....1	No.....0
1	River	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Creek	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Pond	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Brick well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Hand-dug well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Tube Well (Motor pump)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Tube well (Hand pump)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Spring water (natural)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Spring water (stored)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Public water supply system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Dam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Rain water storage tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Purchased water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15	Other (specify)	1	2	1	2	3	__	__
16	Other (specify)	1	2	1	2	3	__	__

20. Months during which water is scarce

		Yes.....1	No0
20.1	January		__
20.2	February		__
20.3	March		__
20.4	April		__
20.5	May		__
20.6	June		__
20.7	July		__
20.8	August		__
20.9	September		__
20.10	October		__
20.11	November		__
20.12	December		__

■ End of the village profile

Annex 2: LIFT Household 2013 Survey

INFORMED CONSENT AND INTRODUCTION

Informed consent: it is necessary to introduce the household to the survey and obtain the consent of all prospective respondents to participate. If a prospective respondent (e.g., a woman decision maker) is not present at the beginning of the interview, be sure to return to this page and obtain consent before interviewing him or her. Ask to speak with a responsible adult in the household.

Hello. My name is _____. I am working with MSR/ICF. We are conducting a survey to determine the success of the LIFT program, which has been funded by people around the world and provides support to villages to help poor and vulnerable households to improve their livelihoods and income.

We are interviewing 3,200 households in 200 villages across Myanmar. These include some villages where LIFT organizations have been working and other villages where LIFT organizations have never worked.

Sixteen households in each village have been selected randomly so that we can collect information on the livelihoods and the kinds of food households grow and eat to see whether LIFT's support has been effective. Your household is among those selected and we would like to ask you as head of the household or spouse some questions about your household and its livelihoods and food situation. We would also like to measure the height and weight of any children under 5 years of age in your household. In total, the questions should take about 30 to 45 minutes of your time.

Your information will help LIFT know how best to provide support, and to understand if this assistance is helping households and children in this village. We ask for your open and honest information. The results will be summarized for the 3,200 households interviewed. I hope you will assist us and the LIFT program so that it can work more effectively to support the poor and vulnerable people of Myanmar.

We can return later today if you don't have time to finish all the questions now. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. You don't have to be in the survey, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact the person listed on this card.

GIVE CARD WITH CONTACT INFORMATION

Do you have any questions about the study or about your participation?

ASK THE FOLLOWING CONSENT QUESTIONS OF ALL PROSPECTIVE RESPONDENTS.

AS APPLICABLE, CHECK AND SIGN THE CONSENT BOX BELOW.

Who is the main male adult (18 years or older) decision-maker in the household?

[NAME], do you agree to participate in the survey?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

Who is the main female adult (18 years or older) decision-maker in the household?

[NAME], do you agree to participate in the survey?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

Are there other mothers or responsible persons for children under five years of age with whom I haven't talked yet?

[NAME], do you agree to participate in the survey and allow that children are weighed and measured?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

ADDITIONAL ELIGIBLE HOUSEHOLD MEMBERS

RESPONDENT
Agreed RESPONDENT
Didn't agree

1 NAME _____ Do you agree to
participate in the survey?
Signature _____

2 NAME _____ Do you agree to
participate in the survey?
Signature _____

3 NAME _____ Do you agree to
participate in the survey?
Signature _____

4 NAME _____ Do you agree to
participate in the survey?
Signature _____

My signature affirms that I have read the verbal informed consent statement to the respondent(s), and I have answered any questions asked about the study. The respondent consented to the interview.

INTERVIEWER'S NAME AND CODE _____ / _____ / 2013

SIGNATURE AND DATE _____ / _____ / 2013

HOUSEHOLD QUESTIONNAIRE

Questionnaire No

SECTION 1: GENERAL INFORMATION			
1.1	Village name		_____
1.2	Village MIMU code		_____
1.3	Village tract name		_____
1.4	Township name		_____
1.5	State/Region		_____
1.6	Interview start time	____:____	_____
1.7	Interview end time	____:____	_____
1.8	Interview duration	____:____	_____
1.9	LIFT Fund Village/ Control Village	LIFT Fund Village 1 Control Village 2	_____
1.10	Interview date	__DD__ / __MM__ / <u>2013</u>	____ / ____ / <u>2013</u>
Name			
		Name	Code
1.11	Enumerator		__
1.12	Anthropometrist		__
1.13	Supervisor		__
1.14	Editor		__
Name			
1.15	Name of head of HH (De jeure)	_____	
1.16	Does this HH have children aged under five	Yes	1
		No	2
1.17	How many children in the household are aged under five	__	
1.18	Household name from village list	_____	
1.19	Household number from village list	__	

SECTION 2: RESPONDENT INFORMATION

2.1	Respondent's name			
	Criteria for the respondent	<p><i>Only head of household or spouse can be used as respondents. The head of HH has to be a living member of the HH and determined by the HH members themselves. The head of HH can be female.</i></p> <p><i>(If the head of household or spouse cannot provide information the interviewer can ask the de facto head of HH (e.g., member who earns main income.)</i></p>		
2.2	Position in the Household	Head of Household	1	__
		Spouse	2	
		De facto Head of Household	3	
2.3	Sex	Male	1	__
		Female	2	
2.4	Respondent's ethnicity	Bamar	1	__
		Kachin	2	
		Kayah	3	
		Kayin	4	
		Chin	5	
		Mon	6	
		Rakhine	7	
		Shan	8	
		Indian	9	
		Chinese	10	
		Mixed ethnicity	11	
		Other ethnic group (specify____)	12	
		Other ethnic group (specify____)	13	
2.5	Respondent's religion	Buddhist	1	__
		Christian	2	
		Hindu	3	

		Islam	4	
		Other (specify) _____	5	
2.6	Age	_____ years		____
Specify age in years. If specific age is not known, round to the nearest 5 years upwards.				
2.7	Was any HH member interviewed as part of 2011 LIFT baseline survey	Yes	1	____
		No	2	
		Don't know	8	

SECTION 3: DEMOGRAPHY

Total number of HH members | _____ |

Definition of HH members: Has to have stayed in the HH at some time during the past 3 months. For our purposes today, members of a household are adults or children that live together, eat from the "same pot" and are normally considered to be regular HH members.							
	3.1	3.2	3.3	3.4	3.5	3.6	3.7
	Name of household member	Relationship of (Name's) with the Head of Household	What is (Name's) Sex	What is (NAME's) age, in completed years?	Highest education level attended of (Name's)	Physical/mental disability that prevents him/her from working or studying	Regularly or full-time attending school/studying
		Head of HH 1 Spouse..... 2 Son, daughter, son/daughter-in-law . 3 Parent/parent-in-law 4 Other relative..... 5 Non-relative..... 6	Male...1 Female.....2	Specify age in years. If specific age not known, round to the nearest 5 years upwards.	No (formal) education Primary school (Grades 1-5) 2 Middle school (Grades 6-9) 3 High school (Grades 10-11) 4 Vocational education 5 Tertiary education (University) 6 Don't know 99	Yes 1 No 0	Yes 1 No 0
All HH members					5 and above 5		
1	Head of the HH:	_	_ 	_	_	_	_
2		_	_ 	_	_	_	_
3		_	_ 	_	_	_	_
4		_	_	_	_	_	_

5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

If control villages this section should be skipped ►5.1

SECTION 4: INVOLVEMENT WITH LIFT PARTNERS

4.1	Are you aware of the activities of [USE NAME OF LIFT PARTNER(S) WHO HAVE WORKED IN THIS VILLAGE] in your village? [READ A LIST OF THE ACTIVITIES THAT THE SPECIFIC PARTNER MAY HAVE UNDERTAKEN IN THIS VILLAGE]	Yes-1 No-0 ►5.1		_
	If yes, have you or anyone from your household participated or benefited from any of the following activities this organization has been doing? <u>Multiple responses</u>			
	If yes, list how many male and female members of the household participated or received support?	Yes-1 No-0	No. of males	No. of females
4.2	Training related to crops and crop production	_	_	_
4.3	Training in livestock	_	_	_
4.4	Training in fisheries	_	_	_
4.5	Training in other vocational skills (eg carpentry, tailoring/sewing, mechanics/repairs, soap and shampoo making etc.)	_	_	_
4.6	Training in skills for small business management (eg business planning, bookkeeping etc.)	_	_	_
4.7	Training in natural resource management (eg community forestry, plant nurseries, mangrove reforestation, soil conservation etc.)	_	_	_
4.8	Training in health, hygiene or nutrition	_	_	_
4.9	Demonstration plots or field trials	_	_	_
4.10	Farmer field schools, farmer extension groups, farmer exchange visits	_	_	_
4.11	Provision of inputs for agriculture (eg seeds, fertilizer, pesticides etc.) including through revolving funds	_	_	_
4.12	Provision of equipment for crop production, storage or processing (tillers, seeders, weeders, threshers etc.) including through revolving funds	_	_	_
4.13	Provision of animals for tillage (including animal banks, revolving funds)	_	_	_
4.14	Inputs/equipment for fisheries (including through revolving funds)	_	_	_
4.15	Inputs/equipment to start a business - including through revolving funds	_	_	_
4.16	Provision of livestock - including through revolving funds	_	_	_

4.17	Cash grants or vouchers to provide inputs for agriculture, livestock or other businesses	_ _	_ _	_ _
4.18	Savings and credit groups and provision of credit	_ _	_ _	_ _
4.19	Formation or strengthening of groups within the village	_ _	_ _	_ _
4.20	Cash for work activities (eg to construct or renovate paths, roads, bridges, piers or ponds etc.)	_ _	_ _	_ _
4.21	Support for crop or product marketing	_ _	_ _	_ _
4.22	Support for natural resource management (eg community forestry, soil conservation, mangrove replanting etc. through seedlings or other materials)	_ _	_ _	_ _
4.23	Support for disaster risk reduction or climate change preparedness	_ _	_ _	_ _
4.24	Other 1 please specify	_ _	_ _	_ _
4.25	Other 2 please specify	_ _	_ _	_ _
4.26	Other 3 please specify	_ _	_ _	_ _

SECTION 5: SOURCES OF HH INCOME

	What were the sources of income for your household during the previous 12 months? (<u>Read each line</u>)	Yes—1 No—0
5.1	Sale of rice	<input type="checkbox"/>
5.2	Sale of paddy	<input type="checkbox"/>
5.3	Sale of other cereals (maize, wheat, barley, oats, sorghum etc.)	<input type="checkbox"/>
5.4	Sale of beans, pulses and peanuts	<input type="checkbox"/>
5.5	Sale of tubers and root crops (cassava, potatoes, taro, yam etc.)	<input type="checkbox"/>
5.6	Sale of vegetables (fresh and dried)	<input type="checkbox"/>
5.7	Sale of fruits (fresh and dried)	<input type="checkbox"/>
5.8	Sale of beverage crops (tea or coffee)	<input type="checkbox"/>
5.9	Sale of toddy products (including sap, alcoholic beverage and jaggery)	<input type="checkbox"/>
5.10	Sale of other crops/agricultural products (rubber, reed broom, flowers, perennial trees, etc....) INDICATE NATURE OF THIS BUSINESS...	<input type="checkbox"/>
5.11	Sale of fresh wild catch of fish, prawns, crabs, shellfish	<input type="checkbox"/>
5.12	Sale of fresh farmed fish, prawns, crabs, shellfish	<input type="checkbox"/>
5.13	Sale of processed fish, prawns, crabs, shellfish (dried, salted, paste)	<input type="checkbox"/>
5.14	Sale of other wild food products (fruits and animals) – fresh or processed	<input type="checkbox"/>
5.15	Sale of firewood, timber/poles, bamboo, charcoal, rattan, palm leaves, thatch etc.	<input type="checkbox"/>
5.16	Sale of livestock or livestock products (whole animals, meat, milk, eggs etc.)	<input type="checkbox"/>
5.17	Small business - small scale production (not agricultural products) INDICATE NATURE OF THIS BUSINESS.....	<input type="checkbox"/>
5.18	Small business – trading, buying and selling INDICATE NATURE OF THIS BUSINESS.....	<input type="checkbox"/>
5.19	Small business – services (including transport services, repair, mechanical, post harvest processing ,etc.) INDICATE NATURE OF THIS BUSINESS	<input type="checkbox"/>

5.20	Casual labour – agriculture	<input type="checkbox"/>
5.21	Casual labour – fishery	<input type="checkbox"/>
5.22	Casual labour – forestry or forest products	<input type="checkbox"/>
5.23	Casual labour – Other SPECIFY NATURE OF THE CASUAL LABOUR	<input type="checkbox"/>
5.24	Cash for work	<input type="checkbox"/>
5.25	Regular full-time employment	<input type="checkbox"/>
5.26	Regular part-time employment	<input type="checkbox"/>
5.27	Interest from lending	<input type="checkbox"/>
5.28	Remittances	<input type="checkbox"/>
5.29	Pensions	<input type="checkbox"/>
5.30	Government/NGO assistance (cash vouchers)	<input type="checkbox"/>
5.31	Re-sale of food aid	<input type="checkbox"/>
5.32	Gifts of money	<input type="checkbox"/>
5.33	Any other source of income 1 (specify) _____	<input type="checkbox"/>
5.34	Any other source of income 2 (specify) _____	<input type="checkbox"/>
5.35	Any other source of income 3 (specify) _____	<input type="checkbox"/>
5.36	If no source of income in the last 12 months answer 99	<input type="checkbox"/>

For questions No 5.37 to 5.39, use the following codes.

Sale of rice	1	Small business – services (including transport services, repair, mechanical, post-harvest processing, etc.) INDICATE NATURE OF THIS BUSINESS	19
Sale of paddy	2	Casual labour – agriculture	20
Sale of other cereals (maize, wheat, barley, oats, sorghum etc.) ...	3	Casual labour – fishery	21
Sale of beans, pulses and peanuts	4	Casual labour – forestry or forest products	22
Sale of tubers and root crops (cassava, potatoes, taro, yam etc.) .	5	Casual labour – Other SPECIFY NATURE OF THE CASUAL LABOUR	23
Sale of vegetables (fresh and dried)	6	Cash for work.....	24
Sale of fruits (fresh and dried)	7	Regular full-time employment.....	25
Sale of beverage crops (tea or coffee)	8	Regular part-time employment.....	26
Sale of toddy products (including sap, alcoholic beverage and jaggery)	9	Interest from lending (cash or kind)	27
Sale of other crops/agricultural products (rubber, reed broom, flowers, perennial trees, etc.)	10	Remittances.....	28
Sale of fresh wild catch of fish, prawns, crabs, shellfish	11	Pensions.....	29
Sale of fresh farmed fish, prawns, crabs, shellfish	12	Government/NGO assistance (cash vouchers)	30

Sale of processed fish, prawns, crabs, shellfish (dried, salted, paste)	13	Re-sale of food aid.....	31
Sale of other wild food products (fruits and animals) – fresh or processed.....	14	Gifts of money.....	32
Sale of firewood, timber/poles, bamboo, charcoal, rattan, palm leaves, thatch etc.	15	Other—1	33
Sale of livestock or livestock products (whole animals, meat, milk, eggs etc.)	16	Other—2	34
Small business - small scale production (not agricultural products) INDICATE NATURE OF THIS BUSINESS.....	17	Other—3	35
Small business – trading, buying and selling INDICATE NATURE OF THIS BUSINESS.....	18	Did not have income	99

5.37	What was the most important source of income for your household during the previous 12 months?	__	
5.38	What was the second most important source of income for your household during the previous 12 months?	__	
5.39	What was the third most important source of income for your household during the previous 12 months?	__	
5.40	What is the average total income for your household from all sources in a normal month?		
	Less than Ks 25,000	1	__
	Ks 25,000 – Ks 50,000	2	
	> Ks 50,000 – Ks 75,000	3	
	> Ks 75,000 – Ks 100,000	4	
	> Ks 100,000 – Ks 150,000	5	
	> Ks 150,000 – Ks 200,000	6	
	> Ks 200,000 – Ks 250,000	7	
	> Ks 250,000 – Ks 300,000	8	
	> Ks 300,000 – Ks 350,000	9	
	> Ks 350,000 – Ks 400,000	10	
	Over Ks 400,000	11	
	Don't know/no response	99	

5.41	How do you compare your household's income during these past 12 months with the previous year?		
	Increased	1	__
	Same as previous year	2	
	Decreased	3	
	Don't know/no response	99	

SECTION 6: CASUAL EMPLOYMENT (Not full-time employment)

Number of days of paid casual employment in the past 12 months – total for all household members

	Did any members of your household work casually for wages in the past 12 months?		
6.1	Yes	1	
	No	2	▶6.19
6.2	Total number of days household members were paid for <u>agricultural</u> work – main monsoon season:	Male HH member	Female HH member
6.3	● Soil preparation/ploughing and/or planting	_ _ days	_ _ days
6.4	● Weeding, pest control, or other labour activities while crop is growing	_ _ days	_ _ days
6.5	● Harvesting	_ _ days	_ _ days
6.6	● Other activities (including, , post-harvest work etc.)	_ _ days	_ _ days
	Total number of days household members were paid for <u>agricultural</u> work – winter/summer season:	Male HH member	Female HH member
6.7	● Soil preparation/ploughing and/or planting	_ _ days	_ _ days
6.8	● Weeding, pest control, or other labour activities while crop is growing	_ _ days	_ _ days
6.9	● Harvesting	_ _ days	_ _ days
6.10	● Other activities (including, , post-harvest work etc.)	_ _ days	_ _ days

To ask for all throughout the year

6.11	Total number of days household members were paid for <u>fishery</u> related work	_ _ days	_ _ days
6.12	Total number of days household members were paid for <u>forestry</u> related work	_ _ days	_ _ days
6.13	Total number of days household members were paid for <u>masonry/construction work/carrying stones bricks/digging</u> (not agricultural, not fishery and not forestry)	_ _ days	_ _ days
6.14	Total number of days household members were paid for <u>portage /carrying goods and materials</u> (not agricultural, not fishery and not forestry)	_ _ days	_ _ days
6.15	Total number of days household members were paid for <u>other work</u> 1 SPECIFY TYPE - Other casual work 1.....	_ _ days	_ _ days

6.16	Total number of days household members were paid for <u>other work 2</u> SPECIFY TYPE - Other casual work 2.....	__ days	__ days
6.17	Total number of days household members were paid for <u>other work 3</u> SPECIFY TYPE - Other casual work 3.....	__ days	__ days
6.18	How do you compare the availability of casual work in this area this year with the previous year?		
	Increased	1	__
	Same as previous year	2	
	Decreased	3	
Don't know/no response	99		
6.19	In the last 12 months, did anyone from your household work for in-kind payment (eg payment in food, goods, services but not in money)?		
	Yes	1	__
	No	2 ▶7.1	
6.20	Which was the more important for your household in the past 12 months, work where your household's members were paid in cash, or work paid in kind?		
	Paid in cash	1	__
	Paid in kind	2	

Ensure the answers are consistent with 5.20 to 5.23

SECTION 7: EMPLOYMENT OF FARM LABOUR

Number of days of farm labour employed by your HH in the past 12 months

7.1 Did your household undertake any farming activities in the past 12 months?

Yes	1	_____
No	2 ▶8.1	_____

Yes	1	_____
No	2 ▶8.1	_____

7.2 Did your household employ workers to assist in your agricultural production in the past 12 months?

Yes	1	_____
No	2 ▶8.1	_____

	Total number of person-days workers were engaged – main monsoon season:	Yes .. 1	Male workers	Female workers
		No 0	Total Days	Total Days
7.3	● Soil preparation/ploughing and/or planting	_____	_____	_____
7.4	● Weeding, pest control, or other labour activities while crop is growing	_____	_____	_____
7.5	● Harvesting	_____	_____	_____
7.6	● Other activities (including, , post-harvest work etc.)	_____	_____	_____

	Total number of person-days workers were engaged – winter/summer season:	Yes... 1	Male workers	Female workers
		No 0	Total Days	Total Days
7.7				
7.8	● Soil preparation/ploughing and/or planting	_____	_____	_____
7.9	● Weeding, pest control, or other labour activities while crop is growing	_____	_____	_____
7.10	● Harvesting	_____	_____	_____

7.11	● Other activities (including, , post-harvest work etc.)	____	_____	_____
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7.12	Did your household employ more, less or about the same amount of farm labour during the past 12 months compared with the previous year?			
More farm labour		1		____
Same as previous year		2		
Less labour		3		

SECTION 8: HOUSEHOLD DIETARY DIVERSITY SCORE

Now I would like to ask you about the types of foods that you or anyone else in your household ate yesterday during the day and night. Did you or anyone else in your HH eat: **(Multiple responses)**

Read out the list		Yes—1 No—0
8.1	Any rice, sticky rice, or any other food made from rice, sticky rice, maize, wheat, barley, oats, millet, sorghum?	__
8.2	Any noodles, bread, biscuits or any other foods made from flour?	__
8.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	__
8.4	Any vegetables?	__
8.5	Any fruits?	__
8.6	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, other meats or organs such as liver, heart, kidney etc.?	__
8.7	Any other meats from frogs, eel, rats, snakes, dogs, cats etc.?	__
8.8	Any eggs from chickens, quails, ducks or other birds?	__
8.9	Any fish, crabs, prawns, or shellfish, either fresh or dried?	__
8.10	Any food made from gram, peas, cowpeas, pigeon peas, lentils, beans, peanuts or other nuts?	__
8.11	Any milk, milk solids, yogurt, cheese, or other milk products?	__
8.12	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?	__
8.13	Any sugar, jaggery, honey?	__
8.14	Any coffee or tea?	__
8.15	Any condiments such as salt, pepper, curry, or chillies etc.?	__

SECTION 9: MONTHS OF ADEQUATE HOUSEHOLD FOOD PROVISIONING

Now I would like to ask you about your household's food supply during different months of the year. Please think back over the last 12 months from now to the same time last year.

9.1	Were there months in the past 12 months in which your household did not have enough food to meet your household's needs? This includes food from any source such as from your own production, purchase or exchange.		
	Yes	1	<input type="checkbox"/>
	No	2	▶10.1 <input type="checkbox"/>
If yes, which were the months in the past 12 months during which your household did not have enough food? (Do not read out the list of months.) (Multiple responses)			
Fill in Code "1" if the respondent identifies that month as one in which the household DID NOT HAVE enough food. If the respondent does not identify that month fill in Code "0".			Inadequate—1 Adequate—0
9.2	September 2013	Tawthalin	<input type="checkbox"/>
9.3	August 2013	Wagaung	<input type="checkbox"/>
9.4	July 2013	Waso	<input type="checkbox"/>
9.5	June 2013	Nayone	<input type="checkbox"/>
9.6	May 2013	Kasone	<input type="checkbox"/>
9.7	April 2013	Tagu	<input type="checkbox"/>
9.8	March 2013	Tabaung	<input type="checkbox"/>
9.9	February 2013	Tabodwe	<input type="checkbox"/>
9.10	January 2013	Pyatho	<input type="checkbox"/>
9.11	December 2012	Nadaw	<input type="checkbox"/>
9.12	November 2012	Tazaungmon	<input type="checkbox"/>
9.13	October 2012	Thadingyut	<input type="checkbox"/>

SECTION 10: COPING STRATEGIES (AND HOUSEHOLD HUNGER SCALE)

In the past four weeks, did your household have to engage in strategies because there was not enough food?		Never0
		Rarely or sometimes .1
		Often2
10.1	In the past four weeks, did your family reduce the size and/ or the number of meals eaten in a day because there was not enough food to eat?	<input type="checkbox"/>
10.2	In the past four weeks, did your family change the family diet to cheaper or less-preferred foods, in order to have enough food to eat?	<input type="checkbox"/>
10.3	In the past four weeks, did your family eat wild food (e.g., berries, fruits, roots, leaves, insects, small animals etc.) more frequently than usual, in order to have enough food to eat?	<input type="checkbox"/>

Household hunger scale			
10.4	In the past four weeks, was there any time when there was no food to eat of any kind in your household?	__	
10.5	In the past four weeks, did you or any member of your household go to sleep at night hungry?	__	
10.6	In the past four weeks, did you or any member of your household go a whole day and night without eating?	__	
In the past 12 months, did you or any member of your HH have to do any of the following activities, so that you had enough food to eat?		Yes..... 1	
		No 0	
10.7	In the past 12 months, did your HH sell off (or consume) seeds meant for planting next season's crops in order to have enough food to eat?	__	
10.8	In the past 12 months, did your HH use savings in order to have enough food to eat?	__	
10.9	In the past 12 months, did one or more children from your HH discontinue school in order to save money or work to bring in additional income, so that your HH had enough food to eat?	__	
10.1 0	In the past 12 months, did you or any member of your HH decrease money spent on health or medicines, so that your HH had enough food to eat?	__	
10.1 1	In the past 12 months, did your HH borrow food or money for food from relatives, friends or neighbours, in order to have enough to eat?	__	
10.1 2	In the past 12 months, did your HH borrow money from money lenders, loans associations, banks, traders or shop keepers in order to buy enough food to eat?	__	
10.1 3	In the past 12 months, did your HH sell, pawn or exchange any of the household's assets, including tools, equipment or any other possessions, in order to buy enough food to eat?	__	
10.1 4	In the past 12 months, did your HH sell (or consume) more of your livestock than usual (e.g., cattle, goats, chicken, ducks, pigs, buffalo) in order to have enough food to eat?	__	
10.1 5	In the past 12 months, did your HH sell, mortgage or rent any of your land, in order to have enough food to eat?	__	
10.1 6	Overall, how would you compare your household's food availability from all sources in the past 12 months with the previous year?	__	
	Increased		1
	Same as previous year		2
	Decreased		3
	Don't know/no response	99	

SECTION 11: ACCESS TO LAND FOR AGRICULTURE

11.1	Does your household or any of its members own land? (Including land of ANY type)			
	Yes	1		_
	No	2	▶11.5	

Note: Ownership should be considered very broadly to include cases where land is formally titled and registered in one or more household member's name; land that has been purchased, transferred or inherited but not formally titled (or if titled not registered in the household's name); land leased from government; and, land where the household believes it has an established right (formal or informal) to use the land, a right that is generally recognized by the community.

11.2	If yes, What is the total area of land that your household owns?	Unit _____		
11.3	Is your household leasing out any of its own land at present?	Yes 1 No 0 ▶11.5		_
11.4	If yes, What is the area of land that your household is leasing out at present?	Unit _____		_
11.5	Is your household renting any land for agriculture? (paying in cash)	Yes 1 No 0 ▶11.7		_
11.6	If yes, What is the area of land that your household is renting (in cash) at present?	Unit _____		_
11.7	Is your household renting any land for agriculture? (paying in kind)	Yes 1 No 0 ▶11.9		_
11.8	If yes, What is the area of land that your household is renting (in kind) at present?	Unit _____		_
11.9	Is your household share farming another's land (where you share the crop with the landowner)?	Yes 1 No 0 ▶11.11		_
11.10	If yes, What is the area of land that your household is sharefarming at present?	Unit _____		_
11.11	Did your household cultivate any other land that was provided free of charge?	Yes 1 No 0 ▶11.13		_
11.12	If yes, What is the area of land that your household is cultivating free of charge?	Unit _____		_
11.13	Is your household growing any crop at present?	Yes 1 No 0 ▶11.15		_
11.14	What total area of land your household is cultivating at present?	Unit _____		_
11.15	Did your household pump water or receive water from a canal to irrigate in the past 12 months?	Yes 1 No 0 ▶12.1		_
11.16	If yes, what area of your land did your household irrigate?	Unit _____		

SECTION 12: HOUSEHOLD CROP PRODUCTION

► To ask all households that have access to land

I would now like to ask some questions about the **annual** crops your household grew in the previous 12 months: **(NOTE: Perennial and tree crops are to be excluded)**

			Yes—1
			No—0
12.1	Did your household grow any annual crops (for own consumption or for sale) in the past 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
12.2	Did your household grow crops in the previous monsoon season (in 2012, not this current season)?	<input type="checkbox"/>	<input type="checkbox"/> If no for 12.1 and 12.2 ► 13.1
12.3	What was the major crop your household grew in the 2012 monsoon season? (USE BELOW CODES or specify other.....)	_____	<input type="checkbox"/>
12.4	Did your household grow any other crops after the last monsoon season (in the winter or summer season)?	<input type="checkbox"/>	<input type="checkbox"/>
12.5	What was the major crop your household produced after the last monsoon season (in the winter or summer season)? (USE BELOW CODES or specify other.....)	_____	<input type="checkbox"/>

Crop codes

Paddy/rice/sticky rice 1	Cowpea 12	Tomato 23	Cotton34
Corn/maize 2	Pigeon pea 13	Pumpkin..... 24	Tobacco35
Wheat..... 3	Chick pea 14	Green beans..... 25	Betel leaf36
Millet 4	Lentil 15	Aubergine 26	Other (specify)37
Sorghum..... 5	Lima/butter bean 16	Okra 27	Other (specify)38
Groundnut 6	Navy/kidney bean.... 17	Onion 28	Other (specify)39
Sesame seed 7	Soy bean 18	Chilli..... 29	
Mustard/rape seed 8	Cassava 19	Garlic 30	
Sunflower 9	Potato 20	Ginger..... 31	
Niger Seed 10	Sweet potato 21	Turmeric32	
Green/black gram.... 11	Yam 22	Sugarcane33	

Crop	Crop code	What was the area planted?		How much did you harvest?			Crop yield compared with your average season?	Where was the seed from?			How was the soil tilled prior to planting?	How was the seed sown?	Did you use inorganic fertilizer?	Did you use organic fertilizer?	Did your HH use insecticides?	Did your HH use fungicides?	Did your HH use herbicides?		
		12.6		12.7			12.8	12.9			12.10	12.11	12.12	12.13	12.14	12.15	12.16		
		Unit	Qty	Unit	Form of harvested product 1 Loose grains 2 In pod 3 On cob 4 Other (specify)	Qty (Total harvested for all acres planted)	Better... 1 Same... 2 Worse... 3	Own seed	Purchase/ provided		Manpower.. 1 Draft animal2 Power tiller. 3 Tractor..... 4	Broadcast.....1 Seeder2 Transplanted...3	Yes. 1 No .. 0	Yes..1 No...0	Yes .1 No...0	Yes .1 No...0	Yes .1 No...0		
Major crop grown in 2012 monsoon	__ 	Acre	__	—	_____ 	__	__	__ 	__ 	__ 			__	__	__	__	__	__	__
Major post-monsoon crop in 2013	__ 	Acre	__	—	_____ 	__	__	__ 	__ 	__ 			__	__	__	__	__	__	__
Current monsoon crop 2013	__ 	Acre	__																

* **Form of harvested product:** e.g., beans in pod or beans without pod, corn on the cob or loose grains, etc.

12.17	Have any of the activities of [USE NAME(S) OF LIFT PARTNERS WHO IS/ARE WORKING IN THE VILLAGE] in your village affected the way your household grew these crops, the inputs you used, or the way you processed or sold your crops?	Yes 1 No 2▶13.1	<input type="checkbox"/>
If yes, can you indicate which activities:			
12.18.1	Training or advice given to farmers		<input type="checkbox"/>
12.18.2	Demonstration plots		<input type="checkbox"/>
12.18.3	Provision of inputs (seed, fertilizer, pesticides etc.)		<input type="checkbox"/>
12.18.4	Provision of credit		<input type="checkbox"/>
12.18.5	Provision of equipment (tillers, seeders, weeders, pumps, threshers etc.)		<input type="checkbox"/>
12.18.6	Provision of buffalo or cattle for ploughing		<input type="checkbox"/>
12.18.7	Other (please specify.....)		<input type="checkbox"/>
12.19	How do you compare your household's <u>level</u> of crop production as a result of this support?		
	Increased	1	<input type="checkbox"/>
	Stayed the same	2	
	Decreased	3	
	Don't know/can't tell	4	
12.20	How do you compare your household's <u>net income</u> from crop production as a result of this support?		
	Increased	1	<input type="checkbox"/>
	Stayed the same	2	
	Decreased	3	
	Don't know/can't tell	4	

SECTION 13: CONSTRAINTS TO CROP PRODUCTION

SECTION 13: CONSTRAINTS TO CROP PRODUCTION		
13.1.	What are the major constraints or problems limiting your HH's crop production? (Why didn't your household produce more baskets of crop?) Do not read out the answers (Multiple responses)	Yes..... 1 No 0
13.1.1	lack of money to buy the necessary inputs (or lack of credit)	<input type="checkbox"/>
13.1.2	lack of land	<input type="checkbox"/>
13.1.3	lack of draught power/mechanical power in the village	<input type="checkbox"/>
13.1.4	draught power/mechanical power are too expensive	<input type="checkbox"/>
13.1.5	lack of other tools and equipment in the village	<input type="checkbox"/>
13.1.6	other tools and equipment are too expensive	<input type="checkbox"/>
13.1.7	lack of fertilizer in the village	<input type="checkbox"/>
13.1.8	fertilizer is too expensive	<input type="checkbox"/>
13.1.9	lack of seeds in the village	<input type="checkbox"/>
13.1.10	seeds are too expensive	<input type="checkbox"/>
13.1.11	lack of household labour	<input type="checkbox"/>
13.1.12	lack of casual labour available locally in the village	<input type="checkbox"/>
13.1.13	casual labour is too expensive	<input type="checkbox"/>
13.1.14	lack of pesticides in the village	<input type="checkbox"/>
13.1.15	local labour lack appropriate skills	<input type="checkbox"/>
13.1.16	pesticides are too expensive	<input type="checkbox"/>
13.1.17	lack of knowledge, skills or experience	<input type="checkbox"/>
13.1.18	not interested/grows enough/too risky to grow more	<input type="checkbox"/>
13.1.19	low prices for the agricultural crops grown	<input type="checkbox"/>
13.1.20	bad/unreliable weather (including too little or too much rain)	<input type="checkbox"/>
13.1.21	lack of water resources or irrigation infrastructure	<input type="checkbox"/>
13.1.22	crop pests and disease	<input type="checkbox"/>
13.1.23	low soil fertility/poor soil structure etc.	<input type="checkbox"/>
13.1.24	Salinity	<input type="checkbox"/>
13.1.25	soil acidity	<input type="checkbox"/>
13.1.26	Other 1 (specify)_____	<input type="checkbox"/>
13.1.27	Other 2.(specify)_____	<input type="checkbox"/>

SECTION 14: MARKETING

14.1	Did your household sell any crops during the last 12 months?			
	Yes	1		<input type="text"/>
	No	2	▶15.1	<input type="text"/>

14.2	Now I want to ask you about the main crop you sold. What was the main crop your household sold during the past 12 months			
	Name _____ (Use the crop codes provided above.)			<input type="text"/>

14.3	Did your household sell your main crop alone or did you sell with other farmers?			
	Sold alone only	1		<input type="text"/>
	Sold in group only	2		
Sold alone and in group	3			

14.4	Were you able to access information on prices for the main crop before you sold it?			
	Yes	1		<input type="text"/>
	No	2	▶14.6	<input type="text"/>

	If you were able to access information on prices, where did you get this information from?	Yes	1
		No	0
	NOTE: Do not read the options. (Multiple answers)	Other	88
14.5.1	Radio/TV		<input type="text"/>
14.5.2	Newspaper/weekly journal		<input type="text"/>
14.5.3	Friends/Family		<input type="text"/>
14.5.4	Cellphone		<input type="text"/>
14.5.5	Farmer association/cooperative		<input type="text"/>
14.5.6	NGO/other organization		<input type="text"/>
14.5.7	Dealer/broker		<input type="text"/>
14.5.8	Other (specify) _____ (88)		<input type="text"/>

14.6	Did you know the price for your main crop at the nearest market town at the time of sale?	Yes	1		
		No	2	▶14.8	
14.7	If you knew the price at the market town, was the price higher, same or lower than the price that you would get selling at your village?	Higher	1		
		Same	2		
		Lower	3		
14.8	Where did you sell your main crop?	Own village	1		
		Village-tract	2		
		Market town	3		
		Other (specify) _____	88		
14.9	When did you sell your main crop?	Immediately after harvest	1		
		1 month later	2		
		2 months later	3		
		3 months later	4		
		4 or more months later	5		
14.10	How would you rate the quality of the main crop you sold over the previous 12 months?	Above average for the area	1		
		Average	2		
		Below average	3		

SECTION 15: CREDIT

15.1	Have you or any household member taken a loan in the last 12 months ?		
	Yes	1	
	No	2 ▶15.5	
From whom did you borrow money? (Multiple answers possible)			
15.2.1	Private bank		
15.2.2	Micro-credit provider (low interest, 2.5% or less)		
15.2.3	Village Savings and Loans Association		
15.2.4	Family/friend		
15.2.5	Money lender		
15.2.6	Shop-keeper		
15.2.7	Private company		
15.2.8	Farmers Association/Cooperative		
15.2.9	Pre-sale of product to trader		
15.2.10	Government		
15.2.88	Other (specify) _____		

15.3	What was the most important use of the loans taken in the last year?		
		most important use	
	Home improvement including water supply	1	
	House purchase or construction	2	
	Construction other than house	3	
	Land purchase/rent	4	
	Purchase of working tools or equipment	5	
	Food purchases	6	
	Purchase of agricultural inputs	7	
	Purchase of animals/medicine for animals	8	
	Purchase of other assets	9	
	Bride price / Wedding	10	
	Health emergency	11	
	Funeral	12	

Business investment	13
Repayment of loans	14
School/education fees/costs	15
Other (specify) _____	88

15.4	What is the value of your household's current debt from all sources of credit?		
	Less than Ks 25,000	1	_
	Ks 25,001 – Ks 50,000	2	
	Ks 50,001 – Ks 75,000	3	
	Ks 75,001 – Ks 100,000	4	
	Ks 100,001 – Ks 150,000	5	
	Ks 150,001 – Ks 200,000	6	
	Ks 200,001 – Ks 300,000	7	
	Ks 300,001 – Ks 400,000	8	
	Ks 400,001 – Ks 500,000	9	
	Ks 500,001 – Ks 600,000	10	
	Ks 600,001 – Ks 700,000	11	
	Ks 700,001 – Ks 800,000	12	
	Ks 800,001 – Ks 900,000	13	
	Ks 900,001 – Ks 1,000,000	14	
	Over Ks 1,00,000	15	
	No debt	16	
	Do not know/No answer	99	
15.5	How do you compare your household's current level of indebtedness with previous years?		
	Increasing	1	_
	Staying much the same	2	
	Decreasing	3	
	Do not know/ No response	99	

SECTION 16: HOUSEHOLD LIVESTOCK OWNERSHIP

16.1	How many animals does your household currently own? Does your household share the ownership of any livestock with others? (Multiple responses)				
	Record the number in the spaces provided (include both mature and young).				
			Yes 1 No 0	Own Number	Shared Number
	Cattle	1			
	Horses	2			
	Goats and/or sheep	3			
	Buffalo	4			
	Pigs	5			
	Chickens	6			
	Ducks	7			
	Other 1 (specify) _____	8			
	Other 2 (specify) _____	9			
Other 3 (specify) _____	10				

**SECTION 17: HOUSEHOLD OWNERSHIP OF AGRICULTURAL
EQUIPMENT AND MACHINERY**

Does your household currently own any of the following agricultural equipment and machinery? Record the answer in the space provided – ownership can be full or shared ownership with other households. (Multiple responses)		Not own...0	Own 1	Shared..... 2
17.1.1	Ploughs/tillage equipment for use with draught animals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.2	Power tiller	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.3	Tractor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.4	Power thresher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.5	Backpack sprayer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.6	Improved crop storage bin or silo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.7	Tarpaulin or seed drying net	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.8	Irrigation pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.9	Animal drawn cart	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.10	Trailer (drawn by vehicle)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.11	Seeder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.12	Other 1 (specify)_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.13	Other 2 (specify)_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.1.14	Other 3 (specify)_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 18: OTHER HOUSEHOLD ASSETS

18.1	What is the major source of lighting in your household?		
	Electricity from the grid	1	<input type="checkbox"/>
	Village generator	2	
	Own generator	3	
	Shared generator with other household(s)	4	

18.2	Lamp (kerosene/oil)	5	
	Candle	6	
	Other (specify) _____	88	
	What is the major source of cooking fuel in your household?		
	Electricity	1	
	Gas	2	
	Charcoal	3	
	Kerosene	4	<input type="checkbox"/>
	Wood	5	
	Dung	6	
Other (specify) _____	88		

Does your household, including the head, spouse and all members, own any of the following items? Read the following list to respondents.		
Assets		Yes.....1
		No.....0
18.3.1	Bicycle	<input type="checkbox"/>
18.3.2	Motorcycle	<input type="checkbox"/>
18.3.3	Trishaw	<input type="checkbox"/>
18.3.4	Trawlarjee	<input type="checkbox"/>
18.3.5	Car	<input type="checkbox"/>
18.3.6	Truck	<input type="checkbox"/>
18.3.7	Bed (wooden or steel)	<input type="checkbox"/>
18.3.8	Mattress	<input type="checkbox"/>
18.3.9	Stove (gas or electric)	<input type="checkbox"/>
18.3.10	Fuel efficient wood stove	<input type="checkbox"/>
18.3.11	Chair	<input type="checkbox"/>
18.3.12	Table	<input type="checkbox"/>

18.3.13	Gold/ Jewellery	<input type="checkbox"/>
18.3.14	Radio/cassette	<input type="checkbox"/>
18.3.15	TV / satellite dish	<input type="checkbox"/>
18.3.16	DVD player	<input type="checkbox"/>
18.3.17	Sewing machine	<input type="checkbox"/>
18.3.18	Cell phone	<input type="checkbox"/>
18.3.19	Watch	<input type="checkbox"/>
18.3.20	Solar panel	<input type="checkbox"/>
18.3.21	Boat without motor	<input type="checkbox"/>
18.3.22	Boat with motor	<input type="checkbox"/>
18.3.23	Fishing net	<input type="checkbox"/>
18.3.24	Fish/aquaculture pond	<input type="checkbox"/>
18.3.25	Household savings	<input type="checkbox"/>

18.4	Does your household own the house you are living in?			<input type="checkbox"/>
	Yes	1		
	No	2		
18.5	What is the main material of the house roof, walls and floors? If possible answer based on observation – if more than one house record for the best house.			
18.6	Roofing material	Zinc sheets or corrugated iron	1	<input type="checkbox"/>
		Tarpaulin or plastic sheet	2	
		Palm frond or thatch	3	
		Other (specify) _____	88	
18.7	Wall material	Zinc sheets or corrugated iron	1	<input type="checkbox"/>
		Tarpaulin or plastic sheet	2	
		Bamboo, palm frond or thatch	3	
		Timber	4	
		Bricks, cement, cement block, or cement and stone	5	
		Mud bricks/mud	6	

18.8	Floor material	Other (specify) _____	88	____
		Timber	1	
		Bamboo	2	
		Earth	3	
		Cement	4	
		Other (specify) _____	88	

18.9	Looking back over the past 2 years, do you think that your household's total assets and wealth are.....		
	Increasing	1	____
	Staying much the same	2	
	Decreasing	3	

SECTION 19: TRAINING

19.1	Over the past 3 years, has any member of your household received any training in crop production?	Complete below table
19.2	Over the past 3 years, has any member of your household received any training in livestock production?	Complete below table
19.3	Over the past 3 years, has any member of your household received any training in fisheries (either wild capture or aquaculture)?	Complete below table
19.4	Over the past 3 years, has any member of your household received any training in any other vocational skill?	Complete below table
19.5	Which organization provided this training (ASK FOR EACH TRAINING ATTENDED)	Complete below table
19.6	Who in the household received this livelihood training, only male member(s) of the household, only female member(s), or both male and female members? (ASK FOR EACH TRAINING ATTENDED)	Complete below table
19.7	Did your household or any of its members use any skills acquired during this training to improve household livelihoods or food security? (ASK FOR EACH TRAINING ATTENDED)	Complete below table

	Received training? 1= yes; 2= no	19.5 Who provided this training 1=Government; 2 = NGO; 3 = Other, 4= Don't Know	19.6 Sex of HH training participants 1=Male; 2=Female; 3=Both	19.7 Used skills 1= Yes; 2= No
19.1	Crop production []	[]	[]	[]
19.2	Livestock []	[]	[]	[]
19.3	Fisheries []	[]	[]	[]
19.4	Other vocational/livelihood skill []	[]	[]	[]

SECTION 20: WATER

20.1	What is the main source of drinking-water used by your household in the past 12 months in the rainy season?	
	Piped water into dwelling	1
	Piped water to yard/plot	2
	Public tap/standpipe	3
	Cart with small tank/drum	4
	Tanker/truck	5
	Tube well/borehole	6
	Protected dug well (Brick-lined well)	7
	Unprotected dug well	8
	Protected spring	9
	Unprotected spring	10
	Rainwater collection	11
	Bottled purified water (Purchased)	12
	Surface water (river, dam, lake, pond, stream, canal, irrigation channels)	13
	Others (Specify) _____	14

20.2 What is the **main** source of drinking-water used by your household in the past 12 months in the winter season?

Piped water into dwelling	1	
Piped water to yard/plot	2	
Public tap/standpipe	3	
Cart with small tank/drum	4	
Tanker/truck	5	
Tube well/borehole	6	
Protected dug well (Brick-lined well)	7	
Unprotected dug well	8	
Protected spring	9	
Unprotected spring	10	
Rainwater collection	11	
Bottled purified water (Purchased)	12	
Surface water (river, dam, lake, pond, stream, canal, irrigation channels)	13	
Others (Specify) _____	14	

20.3 What is the **main** source of drinking-water used by your household in the past 12 months in the summer season?

Piped water into dwelling	1	
Piped water to yard/plot	2	
Public tap/standpipe	3	
Cart with small tank/drum	4	
Tanker/truck	5	
Tube well/borehole	6	
Protected dug well (Brick-lined well)	7	
Unprotected dug well	8	
Protected spring	9	
Unprotected spring	10	

	Rainwater collection	11	
	Bottled purified water (Purchased)	12	
	Surface water (river, dam, lake, pond, stream, canal, irrigation channels)	13	
	Others (Specify) _____	14	
20.4	Do you treat your water in any way to make it safer to drink?	Yes 1	
		No 2 ▶27.0	<input type="text"/>
		Don't know 9 ▶27.0	
	If Yes, what do you usually do to the water to make it safer to drink? Anything else? Record all items mentioned.		
20.5.1	Boil		<input type="text"/>
20.5.2	Add bleach/chlorine/iodine		<input type="text"/>
20.5.3	Strain it through a cloth		<input type="text"/>
20.5.4	Use a water filter (ceramic, sand, composite, etc.)		<input type="text"/>
20.5.5	Solar disinfection		<input type="text"/>
20.5.6	Let it stand and settle		<input type="text"/>
20.5.7	Others (specify) -----		<input type="text"/>

SECTION 27: ANTHROPOMETRIC MEASUREMENTS

27.0	CHILD 1 Name	
27.1	Age in months (For example if the child is nine months old _0_ _ _9_)	_ _ _	
27.2	Date of birth of Child 1	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)	Day of birth: _ _ _ DK day... 15 Month..... _ _ _ Year... 20_ _
27.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5
27.4	Sex of child 1	Male.....1 Female.....2	<input type="text"/>
27.5	Record child's weight	_ _ _ _ _ kg	
27.6	Record height / length child 1 (measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)	_ _ _ _ _ . _ _ cm	
27.7	Record height measurement posture for child 1	Standing 1 Lying 2	<input type="text"/>
27.8	Results	Measured 1 Not present 2	Refused 3 Other 4

SECTION 28: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 1] eat at home or outside home:

(Multiple responses)

Read out the list for <u>Child 1</u>			Yes—1 No—0
28.1	Any breast milk?	1	<input type="checkbox"/>
28.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?	2	<input type="checkbox"/>
28.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	3	<input type="checkbox"/>
28.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)	4	<input type="checkbox"/>
28.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?	5	<input type="checkbox"/>
28.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)	6	<input type="checkbox"/>
28.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?	7	<input type="checkbox"/>
28.8	Any other fruits including wild fruits?	8	<input type="checkbox"/>
28.9	Any liver, heart, kidney or other organs?	9	<input type="checkbox"/>
28.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?	10	<input type="checkbox"/>
28.11	Any eggs from chickens, quails, ducks or other birds?	11	<input type="checkbox"/>
28.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?	12	<input type="checkbox"/>
28.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?	13	<input type="checkbox"/>
28.14	Any milk, milk solids, yogurt, cheese, or other milk products?	14	<input type="checkbox"/>
28.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?	15	<input type="checkbox"/>
28.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?	16	<input type="checkbox"/>
28.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot sauce, or beverages such as coffee or tea etc.?	17	<input type="checkbox"/>
28.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?	18	<input type="checkbox"/>
28.19	“Did [Name of Child 1] have diarrhea in the last 2 weeks’ (diarrhea = 3 or more loose stools in any 24 hour period)	Yes	1
		No	2
		DK/ No response	99

SECTION 29: ANTHROPOMETRIC MEASUREMENTS

29.0	CHILD 2 Name		
29.1	Age in months (For example if the child is nine months old _0_ _ _9_)	_ _ _		
29.2	Date of birth of Child 2	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)		Day of birth: _ _ _ DK day... 15 Month..... _ _ _ Year... 20_ _
29.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5	_ _
29.4	Sex of child 2	Male.....1 Female.....2		_ _
29.5	Record child's weight	_ _ _ _ _ kg		
29.6	Record height / length child 2 (measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)	_ _ _ _ _ . _ _ cm		
29.7	Record height measurement posture for child 2	Standing 1 Lying 2	_ _	
29.8	Results	Measured 1 Not present 2	Refused 3 Other 4	_ _

SECTION 30: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 2] eat at home or outside home:

(Multiple responses)

Read out the list for **Child 2**

			Yes—1 No—0
30.1	Any breast milk?	1	_ _
30.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?	2	_ _
30.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	3	_ _
30.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)	4	_ _
30.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?	5	_ _
30.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)	6	_ _
30.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?	7	_ _
30.8	Any other fruits including wild fruits?	8	_ _
30.9	Any liver, heart, kidney or other organs?	9	_ _
30.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?	10	_ _

30.11	Any eggs from chickens, quails, ducks or other birds?	11	__
30.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?	12	__
30.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?	13	__
30.14	Any milk, milk solids, yogurt, cheese, or other milk products?	14	__
30.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?	15	__
30.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?	16	__
30.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot sauce, or beverages such as coffee or tea etc.?	17	__
30.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?	18	__
30.19	“Did [Name of Child 2] have diarrhea in the last 2 weeks’ (diarrhea = 3 or more loose stools in any 24 hour period)	Yes	1
		No	2
		DK/ No response	99

SECTION 31: ANTHROPOMETRIC MEASUREMENTS

31.0	CHILD 3 Name	
31.1	Age in months (For example if the child is nine months old _0_ _ _9_)	__ _	
31.2	Date of birth of Child 3	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)	Day of birth: __ _ DK day... 15 Month..... __ _ Year... 20 _
31.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5
31.4	Sex of child 3	Male.....1 Female.....2	__
31.5	Record child’s weight	__ _ _ _ _ kg	
31.6	Record height / length child 3 (measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)	__ _ _ _ _ _ _ cm	
31.7	Record height measurement posture for child 3	Standing 1 Lying 2	__
31.8	Results	Measured 1 Not present 2	Refused 3 Other 4

SECTION 32: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 3] eat at home or outside home:

(Multiple responses)

Read out the list for <u>Child 3</u>			Yes—1	No—0
32.1	Any breast milk?	1	<input type="checkbox"/>	<input type="checkbox"/>
32.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?	2	<input type="checkbox"/>	<input type="checkbox"/>
32.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	3	<input type="checkbox"/>	<input type="checkbox"/>
32.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)	4	<input type="checkbox"/>	<input type="checkbox"/>
32.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?	5	<input type="checkbox"/>	<input type="checkbox"/>
32.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)	6	<input type="checkbox"/>	<input type="checkbox"/>
32.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?	7	<input type="checkbox"/>	<input type="checkbox"/>
32.8	Any other fruits including wild fruits?	8	<input type="checkbox"/>	<input type="checkbox"/>
32.9	Any liver, heart, kidney or other organs?	9	<input type="checkbox"/>	<input type="checkbox"/>
32.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?	10	<input type="checkbox"/>	<input type="checkbox"/>
32.11	Any eggs from chickens, quails, ducks or other birds?	11	<input type="checkbox"/>	<input type="checkbox"/>
32.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?	12	<input type="checkbox"/>	<input type="checkbox"/>
32.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?	13	<input type="checkbox"/>	<input type="checkbox"/>
32.14	Any milk, milk solids, yogurt, cheese, or other milk products?	14	<input type="checkbox"/>	<input type="checkbox"/>
32.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?	15	<input type="checkbox"/>	<input type="checkbox"/>
32.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?	16	<input type="checkbox"/>	<input type="checkbox"/>
32.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot sauce, or beverages such as coffee or tea etc.?	17	<input type="checkbox"/>	<input type="checkbox"/>
32.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?	18	<input type="checkbox"/>	<input type="checkbox"/>
32.19	“Did [Name of Child 3] have diarrhea in the last 2 weeks’ (diarrhea = 3 or more loose stools in	Yes	1	<input type="checkbox"/>
		No	2	<input type="checkbox"/>

any 24 hour period)	DK/ No response	99
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SECTION 33: ANTHROPOMETRIC MEASUREMENTS

33.0	CHILD 4 Name	
33.1	Age in months (For example if the child is nine months old _0_ _ _9_)	_ _ _	
33.2	Date of birth of Child 4	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)	Day of birth: _ _ _ DK day... 15 Month..... _ _ _ Year... 20_ _
33.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5
33.4	Sex of child 4	Male.....1 Female.....2	_ _
33.5	Record child's weight	_ _ _ _ _ _ kg	
33.6	Record height / length child 4 (measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)	_ _ _ _ _ _ . _ _ cm	
33.7	Record height measurement posture for child 4	Standing 1 Lying 2	_ _
33.8	Results	Measured 1 Not present 2	Refused 3 Other 4

SECTION 34: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 4] eat at home or outside home:

(Multiple responses)

Read out the list for <u>Child 4</u>		Yes—1 No—0
34.1	Any breast milk?	_ _
34.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?	_ _
34.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	_ _
34.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)	_ _
34.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?	_ _
34.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)	_ _
34.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?	_ _
34.8	Any other fruits including wild fruits?	_ _

SECTION 36: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 5] eat at home or outside home:

(Multiple responses)

Read out the list for <u>Child 5</u>			Yes—1 No—0	
36.1	Any breast milk?		<input type="checkbox"/>	
36.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?		<input type="checkbox"/>	
36.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?		<input type="checkbox"/>	
36.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)		<input type="checkbox"/>	
36.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?		<input type="checkbox"/>	
36.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)		<input type="checkbox"/>	
36.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?		<input type="checkbox"/>	
36.8	Any other fruits including wild fruits?		<input type="checkbox"/>	
36.9	Any liver, heart, kidney or other organs?		<input type="checkbox"/>	
36.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?		<input type="checkbox"/>	
36.11	Any eggs from chickens, quails, ducks or other birds?		<input type="checkbox"/>	
36.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?		<input type="checkbox"/>	
36.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?		<input type="checkbox"/>	
36.14	Any milk, milk solids, yogurt, cheese, or other milk products?		<input type="checkbox"/>	
36.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?		<input type="checkbox"/>	
36.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?		<input type="checkbox"/>	
36.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot sauce, or beverages such as coffee or tea etc.?		<input type="checkbox"/>	
36.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?		<input type="checkbox"/>	
36.19	"Did [Name of Child 5] have diarrhea in the last 2 weeks' (diarrhea = 3 or more loose stools in any 24 hour period)	Yes	1	<input type="checkbox"/>
		No	2	
		DK/ No response	99	

■ END OF THE QUESTIONNAIRE

Annex 3: Nutrition and anthropometry questionnaire

INFORMED CONSENT AND INTRODUCTION

Informed consent: it is necessary to introduce the household to the survey and obtain the consent of all prospective respondents to participate. If a prospective respondent (e.g., a woman decision maker) is not present at the beginning of the interview, be sure to return to this page and obtain consent before interviewing him or her. Ask to speak with a responsible adult in the household.

Hello. My name is _____. I am working with MSR/ICF. We are conducting a survey to determine the success of the LIFT program, which has been funded by people around the world and provides support to villages to help poor and vulnerable households to improve their livelihoods and income.

We are interviewing 6,400 households in 200 villages across Myanmar. These include some villages where LIFT organizations have been working and other villages where LIFT organizations have never worked. The households in each village have been selected randomly so that we can collect information on the livelihoods and the kinds of food households grow and eat to see whether LIFT's support has been effective. Your household is among 32 households selected in your village and we would like to ask you as head of the household or spouse some questions about your household and its livelihoods and food situation. We would also like to measure the height and weight of any children under 5 years of age in your household. In total, this should take about 20 to 30 minutes of your time.

Your information will help LIFT know how best to provide support, and to understand if this assistance is helping households and children in this village. We ask for your open and honest information. The results will be summarized for the 6,400 households interviewed. I hope you will assist us and the LIFT program so that it can work more effectively to support the poor and vulnerable people of Myanmar.

We can return later today if you don't have time to finish all the questions now. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. You don't have to be in the survey, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact the person listed on this card.

GIVE CARD WITH CONTACT INFORMATION

Do you have any questions about the study or about your participation?

ASK THE FOLLOWING CONSENT QUESTIONS OF ALL PROSPECTIVE RESPONDENTS.

AS APPLICABLE, CHECK AND SIGN THE CONSENT BOX BELOW.

Who is the main male adult (18 years or older) decision-maker in the household?

[NAME], do you agree to participate in the survey?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

Who is the main female adult (18 years or older) decision-maker in the household?

[NAME], do you agree to participate in the survey?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

Are there other mothers or responsible persons for children under five years of age with whom I haven't talked yet?

[NAME], do you agree to participate in the survey and allow that children are weighed and measured?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

ADDITIONAL ELIGIBLE HOUSEHOLD MEMBERS

RESPONDENT
Agreed RESPONDENT
Didn't agree

1 NAME _____ Do you agree to
participate in the survey?

Signature _____

2 NAME _____ Do you agree to
participate in the survey?

Signature _____

3 NAME _____ Do you agree to
participate in the survey?

Signature _____

4 NAME _____ Do you agree to
participate in the survey?

Signature _____

My signature affirms that I have read the verbal informed consent statement to the respondent(s), and I have answered any questions asked about the study. The respondent consented to the interview.

INTERVIEWER'S NAME AND CODE _____
_____/_____/2013

SIGNATURE AND DATE _____
_____/_____/2013

LIFT Nutrition 2013 Survey

SHORT QUESTIONNAIRE – FOR THE ADDITIONAL HOUSEHOLDS FOR NUTRITION SAMPLE

Questionnaire No	
SECTION 1: GENERAL INFORMATION	

1.1	Village name		_____
1.2	Village MIMU code		_____
1.3	Village tract name		_____
1.4	Township name		_____
1.5	State/Region		_____
1.6	Interview start time	____:____	_____
1.7	Interview end time	____:____	_____
1.8	Interview duration	____:____	_____
1.9	LIFT Fund Village/	LIFT Fund Village 1	_____
	Control Village	Control Village 2	
1.10	Interview date	_DD_ / _MM_ /2013	___ / ___ / 2013
		Name	Code
1.11	Anthropometrist		__
1.12	Supervisor		__
1.13	Editor		__
1.14	Name of head of HH (<i>De jeure</i>)	_____	
1.15	Number of children under 5		__

1.16	<p>Ensure at least 1 child is under 5 years of age</p> <p>Date of birth of child</p>	<p><i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)</p>	<p>Day of birth: __ __ DK day... 15 Month..... __ __ Year... 20 __ __ </p>
1.17	Household head name from village list	_____	
1.18	Household number from village list	__	

SECTION 2: RESPONDENT INFORMATION

2.1	Respondent's name			
	Criteria for the respondent	<p><i>Only head of household or spouse can be used as respondents. The head of HH has to be a living member of the HH and determined by the HH members themselves. The head of HH can be female.</i></p> <p><i>(If the head of household or spouse cannot provide information the interviewer can ask the de facto head of HH (e.g., member who earns main income.)</i></p>		
2.2	What is (Name's) position in the Household	Head of Household	1	__
		Spouse	2	
		De facto Head of Household	3	
2.3	Sex	Male	1	__
		Female	2	
2.4	Respondent's ethnicity	Bamar	1	__
		Kachin	2	
		Kayah	3	
		Kayin	4	
		Chin	5	
		Mon	6	
		Rakhine	7	
		Shan	8	
		Indian	9	
		Chinese	10	
		Mixed ethnicity	11	
		Other ethnic group (specify _____)	12	
2.5	Respondent's religion	Buddhist	1	__
		Christian	2	
		Hindu	3	
		Islam	4	
		Other (specify) _____	5	
2.6	Age	_____ years	__	
	Specify age in years. If specific age is not known, round to the nearest 5 years upwards.			

SECTION 3: DEMOGRAPHY

3.1	Total number of HH members		__		
Definition of HH members: Has to have stayed in the HH at some time during the past 3 months and is normally considered to be a regular HH member.					
3.3	Relationship of main care giver to child/children under 5	Mother	1	__	
.....		Father	2		
.....		Grandmother	3		
.....		Grandfather	4		
.....		Aunty	5		
.....		Uncle	6		
.....		Older sister	7		
.....		Older brother	8		
.....		Female cousin	9		
.....		Male cousin	10		
.....		Other female relative	11		
.....		Other male relative	12		
.....		Female who is not a relative	13		
.....		Male who is not a relative	14		
3.4	Highest level of education of care giver attended	No (formal) education	1	__	
.....		Primary school (Grades 1–5)	2		
.....		Middle school (Grades 6-9)	3		
.....		High school (Grades 10-11)	4		
.....		Vocational education	5		
.....		Tertiary education (University)	6		
.....		Don't know	99		

If control villages this section should be skipped ►4.2

SECTION 4: INVOLVEMENT WITH LIFT PARTNERS

4.1a	Are you aware of the activities of [USE NAME OF LIFT PARTNER(S) WHO HAVE WORKED IN THIS VILLAGE] in your village? [READ A LIST OF THE ACTIVITIES THAT THE SPECIFIC PARTNER MAY HAVE UNDERTAKEN IN THIS VILLAGE]	Yes-1 No-0 ►4.2			<input type="text"/>
4.1b	If yes, have you or anyone from your household participated or benefited from any of the following activities this organization has been doing? <u>Multiple responses</u>				
	If yes, list how many male and female members of the household participated or received support?	Yes-1 No-0	No. of males	No. of females	
	Training related to crops and crop production	1	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Training in livestock	2	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Training in fisheries	3	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Training in other vocational skills (eg carpentry, tailoring/sewing, mechanics/repairs, soap and shampoo making etc.)	4	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Training in skills for small business management (eg business planning, bookkeeping etc.)	5	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Training in natural resource management (eg community forestry, plant nurseries, mangrove reforestation, soil conservation etc.)	6	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Training in health, hygiene or nutrition	7	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Demonstration plots or field trials	8	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Farmer field schools, farmer extension groups, farmer exchange visits	9	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Provision of inputs for agriculture (eg seeds, fertilizer, pesticides etc.) including through revolving funds	10	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Provision of equipment for crop production, storage or processing (tillers, seeders, weeders, threshers etc.) including through revolving funds	11	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Provision of animals for tillage (including animal banks, revolving funds)	12	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Inputs/equipment for fisheries (including through revolving funds)	13	<input type="text"/>	<input type="text"/>	<input type="text"/>

Inputs/equipment to start a business - including through revolving funds	14	<input type="text"/>	<input type="text"/>	<input type="text"/>
Provision of livestock - including through revolving funds	15	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cash grants or vouchers to provide inputs for agriculture, livestock or other businesses	16	<input type="text"/>	<input type="text"/>	<input type="text"/>
Savings and credit groups and provision of credit	17	<input type="text"/>	<input type="text"/>	<input type="text"/>
Formation or strengthening of groups within the village	18	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cash for work activities (eg to construct or renovate paths, roads, bridges, piers or ponds etc.)	19	<input type="text"/>	<input type="text"/>	<input type="text"/>
Support for crop or product marketing	20	<input type="text"/>	<input type="text"/>	<input type="text"/>
Support for natural resource management (eg community forestry, soil conservation, mangrove replanting etc. through seedlings or other materials)	21	<input type="text"/>	<input type="text"/>	<input type="text"/>
Support for disaster risk reduction or climate change preparedness	22	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other 1 please specify	23	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other 2 please specify	24	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other 3 please specify	25	<input type="text"/>	<input type="text"/>	<input type="text"/>

4.2	What is the average total income for your household from all sources in a normal month?		
	Less than Ks 25,000	1	
	Ks 25,000 – Ks 50,000	2	
	> Ks 50,000 – Ks 75,000	3	
	> Ks 75,000 – Ks 100,000	4	
	> Ks 100,000 – Ks 150,000	5	
	> Ks 150,000 – Ks 200,000	6	
	> Ks 200,000 – Ks 250,000	7	<input type="text"/>
	> Ks 250,000 – Ks 300,000	8	
	> Ks 300,000 – Ks 350,000	9	
	> Ks 350,000 – Ks 400,000	10	
	Over Ks 400,000	11	
	Don't know/no response	99	

SECTION 5: MONTHS OF ADEQUATE HOUSEHOLD FOOD PROVISIONING

Now I would like to ask you about your household's food supply during different months of the year. Please think back over the last 12 months from now to the same time last year.

5.1	<p>Were there months in the past 12 months in which your household did not have enough food to meet your household's needs? This includes food from any source such as from your own production, purchase or exchange.</p> <p>Yes 1 <input type="text"/></p> <hr/> <p>No 2 ▶6.1 <input type="text"/></p>																																				
5.2	<p>If yes, which were the months in the past 12 months during which your household did not have enough food? (Do not read out the list of months.) (Multiple responses)</p> <p>Fill in Code "1" if the respondent identifies that month as one in which the household DID NOT HAVE enough food. If the respondent does not identify that month fill in Code "0".</p> <p style="text-align: right;">Inadequate—1 Adequate—0</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20%;">September 2013</td><td style="width: 60%;">Tawthalin</td><td style="width: 20%; text-align: right;"><input type="text"/></td></tr> <tr><td>August 2013</td><td>Wagaung</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>July 2013</td><td>Waso</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>June 2013</td><td>Nayone</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>May 2013</td><td>Kasone</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>April 2013</td><td>Tagu</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>March 2013</td><td>Tabaung</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>February 2013</td><td>Tabodwe</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>January 2013</td><td>Pyatho</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>December 2012</td><td>Nadaw</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>November 2012</td><td>Tazaungmon</td><td style="text-align: right;"><input type="text"/></td></tr> <tr><td>October 2012</td><td>Thadingyut</td><td style="text-align: right;"><input type="text"/></td></tr> </table>	September 2013	Tawthalin	<input type="text"/>	August 2013	Wagaung	<input type="text"/>	July 2013	Waso	<input type="text"/>	June 2013	Nayone	<input type="text"/>	May 2013	Kasone	<input type="text"/>	April 2013	Tagu	<input type="text"/>	March 2013	Tabaung	<input type="text"/>	February 2013	Tabodwe	<input type="text"/>	January 2013	Pyatho	<input type="text"/>	December 2012	Nadaw	<input type="text"/>	November 2012	Tazaungmon	<input type="text"/>	October 2012	Thadingyut	<input type="text"/>
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October 2012	Thadingyut	<input type="text"/>																																			

SECTION 6: ACCESS TO LAND FOR AGRICULTURE

6.1	Does your household or any of its members own land?		
	Yes	1	<input type="text"/>
	No	Skip to 7.1	2

Note: Ownership should be considered very broadly to include cases where land is formally titled and registered in one or more household member's name; land that has been purchased, transferred or inherited but not formally titled (or if titled not registered in the household's name); land leased from government; and, land where the household believes it has an established right (formal or informal) to use the land, a right that is generally recognized by the community.

6.2	If yes, What is the total area of land that your household owns?	Unit (Acre)	<input type="text"/> <input type="text"/>
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SECTION 7: OTHER HOUSEHOLD ASSETS

7.1	Does your household, including the head, spouse and all members, own any of the following items? Read the following list to respondents.		
	Assets		No0 Yes.....1
	Bicycle	1	<input type="text"/>
	Motorcycle	2	<input type="text"/>
	Trishaw	3	<input type="text"/>
	Trawlarjee	4	<input type="text"/>
	Car	5	<input type="text"/>
	Truck	6	<input type="text"/>
	Bed (wooden or steel)	7	<input type="text"/>
	Mattress	8	<input type="text"/>
	Stove (gas or electric)	9	<input type="text"/>
	Fuel efficient wood stove	10	<input type="text"/>
	Chair	11	<input type="text"/>
	Table	12	<input type="text"/>
	Gold/ Jewellery	13	<input type="text"/>
	Radio/cassette	14	<input type="text"/>
	TV / satellite dish	15	<input type="text"/>
	DVD player	16	<input type="text"/>

	Sewing machine	17	<input type="checkbox"/>	
	Cell phone	18	<input type="checkbox"/>	
	Watch	19	<input type="checkbox"/>	
	Solar panel	20	<input type="checkbox"/>	
	Boat without motor	21	<input type="checkbox"/>	
	Boat with motor	22	<input type="checkbox"/>	
	Fishing net	23	<input type="checkbox"/>	
	Fish/aquaculture pond	24	<input type="checkbox"/>	
	Household savings	25	<input type="checkbox"/>	
7.2	Does your household own the house you are living in?			
	Yes	1	<input type="checkbox"/>	
	No	2		
7.3	What is the main material of the house roof, walls and floors? If possible answer based on observation – if more than one house record for the best house.			
7.3A	Roofing material	Zinc sheets or corrugated iron	1	<input type="checkbox"/>
		Tarpaulin or plastic sheet	2	
		Palm frond or thatch	3	
		Other (specify) _____	88	
7.3B	Wall material	Zinc sheets or corrugated iron	1	<input type="checkbox"/>
		Tarpaulin or plastic sheet	2	
		Bamboo, palm frond or thatch	3	
		Timber	4	
		Bricks, cement, cement block, or cement and stone	5	
		Mud bricks/mud	6	
		Other (specify) _____	88	
7.3C	Floor material	Timber	1	<input type="checkbox"/>
		Bamboo	2	
		Earth	3	
		Cement	4	
		Other (specify) _____	88	

SECTION 8: WATER

8.1 What is the main source of drinking-water used by your household in the past 12 months in the rainy season?

Piped water into dwelling	1
Piped water to yard/plot	2
Public tap/standpipe	3
Cart with small tank/drum	4
Tanker/truck	5
Tube well/borehole	6
Protected dug well (Brick-lined well)	7
Unprotected dug well	8
Protected spring	9
Unprotected spring	10
Rainwater collection	11
Bottled purified water (Purchased)	12
Surface water (river, dam, lake, pond, stream, canal, irrigation channels)	13
Others (Specify) _____	14

|____|

8.2 What is the main source of drinking-water used by your household in the past 12 months in the winter season?

Piped water into dwelling	1
Piped water to yard/plot	2
Public tap/standpipe	3
Cart with small tank/drum	4
Tanker/truck	5
Tube well/borehole	6
Protected dug well (Brick-lined well)	7
Unprotected dug well	8
Protected spring	9

|____|

	Unprotected spring		10	
	Rainwater collection		11	
	Bottled purified water (Purchased)		12	
	Surface water (river, dam, lake, pond, stream, canal, irrigation channels)		13	
	Others (Specify)_____		14	
8.3	What is the main source of drinking-water used by your household in the past 12 months in the summer season?			
	Piped water into dwelling		1	
	Piped water to yard/plot		2	
	Public tap/standpipe		3	
	Cart with small tank/drum		4	
	Tanker/truck		5	
	Tube well/borehole		6	
	Protected dug well (Brick-lined well)		7	
	Unprotected dug well		8	<input type="checkbox"/>
	Protected spring		9	
	Unprotected spring		10	
	Rainwater collection		11	
	Bottled purified water (Purchased)		12	
	Surface water (river, dam, lake, pond, stream, canal, irrigation channels)		13	
	Others (Specify)_____		14	
8.4	Do you treat your water in any way to make it safer to drink?	Yes	1	
		No	2	▶9.0 <input type="checkbox"/>
		Don't know	9	▶9.0
8.5	If Yes, what do you usually do to the water to make it safer to drink? Anything else? Record all items mentioned.			
	Boil		1	<input type="checkbox"/>
	Add bleach/chlorine/iodine		2	<input type="checkbox"/>

Strain it through a cloth	3	<input type="checkbox"/>
Use a water filter (ceramic, sand, composite, etc.)	4	<input type="checkbox"/>
Solar disinfection	5	<input type="checkbox"/>
Let it stand and settle	6	<input type="checkbox"/>
Others (specify) -----	7	<input type="checkbox"/>

SECTION 9: ANTHROPOMETRIC MEASUREMENTS

9.0	CHILD 1 Name	
9.1	Age in months (For example if the child is nine months old _0_ _ _9_)	_ _ _	
9.2	Date of birth of Child 1	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)	Day of birth: _ _ _ DK day... 15 Month..... _ _ _ Year... 20 _
9.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5
9.4	Sex of child 1	Male.....1 Female.....2	_
9.5	Record child's weight	_ _ _ _ _ kg	
9.6	Record height / length child 1 (measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)	_ _ _ _ _ . _ _ cm	
9.7	Record height measurement posture for child 1	Standing 1 Lying 2	_
9.8	Results	Measured 1 Not present 2	Refused 3 Other 4

SECTION 10: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 1] eat at home or outside home:

(Multiple responses)

Read out the list for <u>Child 1</u>		Yes—1 No—0
10.1	Any breast milk?	<input type="checkbox"/>
10.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?	<input type="checkbox"/>
10.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	<input type="checkbox"/>
10.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)	<input type="checkbox"/>
10.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?	<input type="checkbox"/>
10.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available)	<input type="checkbox"/>

	vegetables)		
10.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?		__
10.8	Any other fruits including wild fruits?		__
10.9	Any liver, heart, kidney or other organs?		__
10.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?		__
10.11	Any eggs from chickens, quails, ducks or other birds?		__
10.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?		__
10.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?		__
10.14	Any milk, milk solids, yogurt, cheese, or other milk products?		__
10.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?		__
10.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?		__
10.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot sauce, or beverages such as coffee or tea etc.?		__
10.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?		__
10.19	“Did [Name of Child 1] have diarrhea in the last 2 weeks’ (diarrhea = 3 or more loose stools in any 24 hour period)	Yes	1
		No	2
		DK/ No response	99
			__

SECTION 11: ANTHROPOMETRIC MEASUREMENTS

11.0	CHILD 2 Name	
11.1	Age in months (For example if the child is nine months old _0_ _ _9_)		__ _ __
11.2	Date of birth of Child 2	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)	Day of birth: __ _ __ DK day... 15 Month..... __ _ __ Year... 20__
11.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5
11.4	Sex of child 2	Male.....1 Female.....2	__
11.5	Record child’s weight		__ _ __ _ __ kg
11.6	Record height / length child 2		__ _ __ _ __ . __ cm

	(measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)		
11.7	Record height measurement posture for child 2	Standing 1 Lying 2	<input type="checkbox"/>
11.8	Results	Measured 1 Not present 2	Refused 3 Other 4

SECTION 12: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 2] eat at home or outside home:

(Multiple responses)

Read out the list for <u>Child 2</u>		Yes—1 No—0
12.1	Any breast milk?	<input type="checkbox"/>
12.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?	<input type="checkbox"/>
12.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	<input type="checkbox"/>
12.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)	<input type="checkbox"/>
12.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?	<input type="checkbox"/>
12.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)	<input type="checkbox"/>
12.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?	<input type="checkbox"/>
12.8	Any other fruits including wild fruits?	<input type="checkbox"/>
12.9	Any liver, heart, kidney or other organs?	<input type="checkbox"/>
12.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?	<input type="checkbox"/>
12.11	Any eggs from chickens, quails, ducks or other birds?	<input type="checkbox"/>
12.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?	<input type="checkbox"/>
12.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?	<input type="checkbox"/>
12.14	Any milk, milk solids, yogurt, cheese, or other milk products?	<input type="checkbox"/>
12.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?	<input type="checkbox"/>
12.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?	<input type="checkbox"/>
12.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot	<input type="checkbox"/>

	sauce, or beverages such as coffee or tea etc?			
12.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?			__
12.19	“Did [Name of Child 2] have diarrhea in the last 2 weeks’ (diarrhea = 3 or more loose stools in any 24 hour period)	Yes	1	__
		No	2	
		DK/ No response	99	

SECTION 13: ANTHROPOMETRIC MEASUREMENTS

13.0	CHILD 3 Name		
13.1	Age in months (For example if the child is nine months old _0_ _ _9_)			__ _
13.2	Date of birth of Child 3	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)		Day of birth: __ _ DK day... 15 Month..... __ _ Year... 20_ _
13.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5	__
13.4	Sex of child 3	Male.....1 Female.....2		__
13.5	Record child’s weight			__ _ _ _ _ kg
13.6	Record height / length child 3 (measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)			__ _ _ _ _ _ cm
13.7	Record height measurement posture for child 3	Standing 1 Lying 2		__
13.8	Results	Measured 1 Not present 2	Refused 3 Other 4	__

SECTION 14: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 3] eat at home or outside home:
(Multiple responses)

Read out the list for <u>Child 3</u>			Yes—1 No—0
14.1	Any breast milk?		__
14.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?		__
14.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?		__
14.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)		__
14.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?		__
14.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)		__
14.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?		__

14.8	Any other fruits including wild fruits?			
14.9	Any liver, heart, kidney or other organs?			
14.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?			
14.11	Any eggs from chickens, quails, ducks or other birds?			
14.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?			
14.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?			
14.14	Any milk, milk solids, yogurt, cheese, or other milk products?			
14.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?			
14.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?			
14.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot sauce, or beverages such as coffee or tea etc?			
14.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?			
14.19	“Did [Name of Child 3] have diarrhea in the last 2 weeks’ (diarrhea = 3 or more loose stools in any 24 hour period)	Yes	1	
		No	2	
		DK/ No response	99	

SECTION 15: ANTHROPOMETRIC MEASUREMENTS

15.0	CHILD 4 Name		
15.1	Age in months (For example if the child is nine months old _0_ _ _9_)	_ _ _ _		
15.2	Date of birth of Child 4	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)	Day of birth: _ _ _	DK day... 15
			Month..... _ _	Year... 20 _
15.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5	_ _
15.4	Sex of child 4	Male.....1 Female.....2		_ _
15.5	Record child’s weight			_ _ _ _ _ kg
15.6	Record height / length child 4 (measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)			_ _ _ _ _ _ _ cm
15.7	Record height measurement posture for child 4	Standing 1 Lying 2		_ _
15.8	Results	Measured 1 Not present 2	Refused 3 Other 4	_ _

SECTION 16: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 4] eat at home or outside home:

(Multiple responses)

Read out the list for <u>Child 4</u>		Yes—1 No—0
16.1	Any breast milk?	<input type="checkbox"/>
16.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?	<input type="checkbox"/>
16.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	<input type="checkbox"/>
16.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)	<input type="checkbox"/>
16.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?	<input type="checkbox"/>
16.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)	<input type="checkbox"/>
16.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?	<input type="checkbox"/>
16.8	Any other fruits including wild fruits?	<input type="checkbox"/>
16.9	Any liver, heart, kidney or other organs?	<input type="checkbox"/>
16.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?	<input type="checkbox"/>
16.11	Any eggs from chickens, quails, ducks or other birds?	<input type="checkbox"/>
16.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?	<input type="checkbox"/>
16.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?	<input type="checkbox"/>
16.14	Any milk, milk solids, yogurt, cheese, or other milk products?	<input type="checkbox"/>
16.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?	<input type="checkbox"/>
16.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?	<input type="checkbox"/>
16.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot sauce, or beverages such as coffee or tea etc?	<input type="checkbox"/>
16.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?	<input type="checkbox"/>

16.19	“Did [Name of Child 4] have diarrhea in the last 2	Yes	1	<input type="checkbox"/>
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weeks' (diarrhea = 3 or more loose stools in any 24 hour period)	No	2
	DK/ No response	99

SECTION 17: ANTHROPOMETRIC MEASUREMENTS

17.0	CHILD 5 Name	
17.1	Age in months (For example if the child is nine months old _0_ _ _9_)	_ _ _	
17.2	Date of birth of Child 5	<i>Probe: what was his/her birthday</i> (If mother/career does not know the exact day of birth circle 15 for the day of the month)	Day of birth: _ _ _ DK day... 15 Month..... _ _ _ Year... 20 _
17.3	Date of birth source	Birth certificate 1 Health card 2 Home registry 3	Father/mother testimony 4 Other (specify) 5
17.4	Sex of child 5	Male.....1 Female.....2	_
17.5	Record child's weight	_ _ _ _ _ kg	
17.6	Record height / length child 5 (measure children >=2 years standing, measure children <2 years lying down) (record whether standing or lying)	_ _ _ _ _ . _ _ cm	
17.7	Record height measurement posture for child 5	Standing 1 Lying 2	_
17.8	Results	Measured 1 Not present 2	Refused 3 Other 4

SECTION 18: INDIVIDUAL DIETARY DIVERSITY SCORE

Yesterday during the day and night, what did [NAME of Child 5] eat at home or outside home:

(Multiple responses)

Read out the list for <u>Child 5</u>		Yes—1 No—0
18.1	Any breast milk?	_
18.2	Any rice, rice noodles, corn, bread, porridge or any other food made from flour or other cereals including sticky rice, maize, wheat, barley, oats, millet, or sorghum?	_
18.3	Any potatoes, cassava, yams, taro, or any food made from roots or tubers?	_
18.4	Pumpkin, carrots, orange sweet potatoes or any other vegetables that are yellow/orange inside (including wild vegetables)	_
18.5	Any dark green leafy vegetables eg spinach, and other local leafy greens?	_
18.6	Any other vegetables (eg tomato, eggplant, okra, onion and other locally available vegetables)	_
18.7	Any orange or dark yellow fleshed fruits (eg ripe mangoes, ripe papaya)?	_
18.8	Any other fruits including wild fruits?	_
18.9	Any liver, heart, kidney or other organs?	_

18.10	Any beef, pork, lamb, goat, rabbit, chicken, duck, other birds, or insects (including any other meat from frogs, rats, mice, eel, snake, dog, or cat)?			__
18.11	Any eggs from chickens, quails, ducks or other birds?			__
18.12	Any fish, crabs, prawns, or shellfish, either fresh or dried?			__
18.13	Any food made from gram, lentils, dried beans or peas, chickpeas, cowpeas, pigeon peas, peanuts or other nuts and seeds?			__
18.14	Any milk, milk solids, yogurt, cheese, or other milk products?			__
18.15	Any food made with peanut oil, coconut oil, palm oil, sesame oil, sunflower oil or other oils, animal fat, butter or margarine?			__
18.16	Any sugar, jaggery, honey or other sugary foods such as chocolate, candies, biscuits, cakes or sweetened soft drinks?			__
18.17	Any condiments such as salt, pepper, curry, chillies, fish paste, other spices, soy sauce, hot sauce, or beverages such as coffee or tea etc?			__
18.18	Any salty snacks such as chanachur, salty crackers, or dried potato or vegetable chips?			__
18.19	"Did [Name of Child 5] have diarrhea in the last 2 weeks' (diarrhea = 3 or more loose stools in any 24 hour period)	Yes	1	__
		No	2	
		DK/ No response	99	

■ END OF THE QUESTIONNAIRE

Annex 4: Households expenditure module

INFORMED CONSENT AND INTRODUCTION

Informed consent: it is necessary to introduce the household to the survey and obtain the consent of all prospective respondents to participate. If a prospective respondent (e.g. a woman decision maker) is not present at the beginning of the interview, be sure to return to this page and obtain consent before interviewing him or her. Ask to speak with a responsible adult in the household.

Hello. My name is _____. I am working with MSR/ICF. We are conducting a survey to determine the success of the LIFT program, which has been funded by people around the world and provides support to villages to help poor and vulnerable households to improve their livelihoods and income.

We are interviewing 3,200 households in 200 villages across Myanmar. These include some villages where LIFT organizations have been working and other villages where LIFT organizations have never worked.

Sixteen households in each village have been selected randomly so that we can collect information on the livelihoods and the kinds of food your household grows and eats to see whether LIFT's support has been effective. Your household is among those selected and we would like to ask you as head of the household or spouse some questions about your household, its livelihoods and food situation and consumption patterns. We would also like to measure the height and weight of any children under 5 years of age in your household. In total, the questions should take about 60 to 90 minutes of your time.

Your information will help LIFT know how best to provide support, and to understand if this assistance is helping households and children in this village. We ask for your open and honest information. The results will be summarized for the 3,200 households interviewed. I hope you will assist us and the LIFT program so that it can work more effectively to support the poor and vulnerable people of Myanmar.

We can return later today if you don't have time to finish all the questions now. All of the answers you give will be confidential and will not be shared with anyone other than members of our survey team. You don't have to be in the survey, but we hope you will agree to answer the questions since your views are important. If I ask you any question you don't want to answer, just let me know and I will go on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact the person listed on this card.

GIVE CARD WITH CONTACT INFORMATION

Do you have any questions about the study or about your participation?

ASK THE FOLLOWING CONSENT QUESTIONS OF ALL PROSPECTIVE RESPONDENTS.

AS APPLICABLE, CHECK AND SIGN THE CONSENT BOX BELOW.

Who is the main male adult (18 years or older) decision-maker in the household?

[NAME], do you agree to participate in the survey?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

Who is the main female adult (18 years or older) decision-maker in the household?

[NAME], do you agree to participate in the survey?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

Are there other mothers or responsible persons for children under five years of age with whom I haven't talked yet?

[NAME], do you agree to participate in the survey and allow that children are weighed and measured?

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

NAME: _____ RESPONDENT AGREED ____ RESPONDENT DID NOT AGREE

ADDITIONAL ELIGIBLE HOUSEHOLD MEMBERS

		RESPONDENT Agreed	RESPONDENT Didn't agree
1	NAME _____ Do you agree to participate in the survey? Signature _____		
2	NAME _____ Do you agree to participate in the survey? Signature _____		
3	NAME _____ Do you agree to participate in the survey? Signature _____		
4	NAME _____ Do you agree to participate in the survey? Signature _____		

My signature affirms that I have read the verbal informed consent statement to the respondent(s), and I have answered any questions asked about the study. The respondent consented to the interview.

INTERVIEWER'S NAME AND CODE _____/_____/2013

SIGNATURE AND DATE _____/_____/2013

SECTION 21: HOUSEHOLD EXPENDITURE

HH Member ID Code

SECTION 21: HOUSEHOLD EXPENDITURE

Identify most knowledgeable person about household food consumption expenditures and administer sections 21, 22 and 23. If this person is not available, find another responsible adult member of the household who can provide information on the household's food consumption expenditures.

Read the following to the respondent:

I would like to ask you (this person) some questions about the foods and beverages consumed by any member of your household for household consumption. This includes purchases made in cash or in kind, as well as items acquired as gifts, payments or wages, plus consumption from home production. By household consumption, this means do not include those acquired for (farm or non-farm) business activities (For example, do not include expenditure for feeding daily workers)

Section 21: Food consumption expenditures in the last 7 days consumed at home

Respondent: The most knowledgeable person on household food consumption expenditures

Description of items				Consumption		Acquire			
						Purchase in cash		Received in kind	Home production
Code	Item	Unit to be used	Alternative unit	During the last 7 days, ...		During the last 7 days, ...			
				did any member of your household consume [ITEM]? Yes .. 1 No .. 2 >> Next item	what was the total quantity of [ITEM] consumed by all household members? ?	How much of the amount of [ITEM] consumed during the last 7 days came from purchases? ?	How much did the household spend on the amount consumed during the last 7 days that came from purchases? ?	How much of the amount of [ITEM] consumed during the last 7 days came from gifts, payments in kind or other sources? ?	How much of the amount of [ITEM] consumed during the last 7 days came from home production? ?
				a	Quantity b (b=c+e+f)	Quantity c	Value in Kyat d	Quantity e	Quantity f

Pulses, beans, nuts and seeds

Pulses, beans, nuts and seeds									
21.1.1	Pegyí (lablab beans)	Ticals							
21.1.2	Pegya	Ticals							
21.1.3	Pepyin	Ticals							
21.1.4	Pe poke	Ticals							
21.1.5	Sadawpe (green peas)	Ticals							
21.1.6	Gram (Chick pea)	Ticals							
21.1.7	Green gram (Pedesane)	Ticals							

21.1.8	Black gram (Matpe)	Ticals							
21.1.9	Penilay (Peyaza)	Ticals							
21.1.10	Butter Bean	Ticals							
21.1.11	Boiled Pea (any kind of peas)	Ticals							
21.1.12	Sesame	Ticals							
21.1.13	Cashew nuts	Ticals							
21.1.14	Groundnut without shell	Ticals							
21.1.15	Coconut	Number							
21.1.16	Other pulses/beans/nuts/seeds (Specify _____)	Ticals							

Meat, dairy, eggs

Meat, dairy, eggs									
21.2.1	Chicken	Ticals							
21.2.2	Duck	Ticals							
21.2.3	Beef	Ticals							
21.2.4	Pork	Ticals							
21.2.5	Mutton	Ticals							
21.2.6	Frogs	Ticals							
21.2.7	Rats	Ticals							
21.2.8	Mice	Ticals							
21.2.9	Snake	Ticals							
21.2.10	Bats	Ticals							
21.2.11	Dogs	Ticals							
21.2.12	Cats	Ticals							
21.2.13	Dried Meat	Ticals							
21.2.14	Chicken eggs	Number							
21.2.15	Duck eggs	Number							
21.2.16	Quail eggs	Number							
21.2.17	Other meats (Specify -----)	Ticals							
21.2.18	Fresh milk	Ticals							

Fish and other seafood

Fish and other seafood									
21.3.1	Ngamyitchin	Ticals							
21.3.2	Ngagyin	Ticals							
21.3.3	Ngayant	Ticals							
21.3.4	Ngakhu	Ticals							
21.3.5	Ngagyee	Ticals							
21.3.6	Ngapyayma	Ticals							
21.3.7	Ngaton/ Ngamyinn	Ticals							
21.3.8	Ngathalauk	Ticals							
21.3.9	Fish meat	Ticals							
21.3.10	Other small river fishes (<= 4")	Ticals							
21.3.11	Other medium river fishes (5" - 10")	Ticals							
21.3.12	Other large river fishes (11+)"	Ticals							
21.3.13	Eel	Ticals							
21.3.14	Kakatit	Ticals							
21.3.15	Ngamoke	Ticals							
21.3.16	Ngashwe	Ticals							
21.3.17	Ngapokethin	Ticals							
21.3.18	Sardine (All Kinds)	Ticals							
21.3.19	Pazun Kyawt	Ticals							
21.3.20	Pazun Doke	Ticals							

21.3.21	Squid and like sea fishes	Ticals							
21.3.22	Shell fish	Ticals							
21.3.23	Other small sea water fishes (<=4")	Ticals							
21.3.24	Other medium sea water fishes (5" - 10")	Ticals							
21.3.25	Other large sea water fishes (11+")	Ticals							
21.3.26	Nga Yantchauk	Ticals							
21.3.27	Other dried small river fish (<=4")	Ticals							
21.3.28	Other dried medium and above river fish (5+")	Ticals							
21.3.29	Ngakunshutchauk	Ticals							
21.3.30	Other dried small sea water fish (<=4")	Ticals							
21.3.31	Other dried medium and above sea water fish (5+")	Ticals							
21.3.32	Dried Prawns	Ticals							
21.3.33	Shrimp paste	Ticals							
21.3.34	Fish/ shrimp sauce	Ticals							
21.3.35	Ngapiyae	Ticals							
21.3.36	Nagpikaung/ Salted fish	Ticals							
21.3.37	Other fish products Specify	Ticals							
21.3.38	Ar Bye Gyauk	Ticals							
21.3.39	Dried Prawn powder	Ticals							

Roots and tubers

	Roots and tubers								
21.4.1	Sweet potatoes	Ticals							
21.4.2	Potatoes	Ticals							
21.4.3	Yams	Ticals							
21.4.4	Radish (small, medium, large)	Bundle	3						
21.4.5	Taro	Ticals							
21.4.6	Other roots/ tubers Specify	Ticals							
21.4.7	Arrow shoot	Ticals							
21.4.8	Pemyit	Ticals							
21.4.9	Palm shoot	Ticals							
21.4.10	Palawpenan	Ticals							
21.4.11	No ko	Number							

Vegetables

Vegetables									
21.5.1	Gourd	Ticals							
21.5.2	Pumpkin	Ticals							
21.5.3	Ash pumpkin	Ticals							
21.5.4	Brinjal/ Egg plant	Ticals							
21.5.5	Tomato	Ticals							
21.5.6	Cabbage	Ticals							
21.5.7	Cauliflower	Number							
21.5.8	Chayote	Number							
21.5.9	Water leaf small, medium, large	Bundles							
21.5.10	Roselle leaf small, medium, large	Bundles							
21.5.11	Horseradish leaf small, medium, large	Bundles							
21.5.12	Radish leaf small, medium, large	Bundles							
21.5.13	Pumpkin leaf small, medium, large	Bundles							
21.5.14	Cucumber	Number							
21.5.15	Horseradish	Number							
21.5.16	Bean/ Long bean small, medium, large	Bundle							
21.5.17	Bamboo shoots	Ticals							
21.5.18	Bean sprouts	Ticals							
21.5.19	Carrots	Ticals							
21.5.20	Lettuce	Number							
21.5.21	Fresh chillie	Ticals							
21.5.22	Lime	Number							
21.5.23	Other Vegetables (specify _____ _____)	Ticals							
21.5.24	Mustard leaf small, medium, large	Bundles							
21.5.25	Kinmoon small, medium, large	Bundles							
21.5.26	Subok small, medium, large	Bundles							
21.5.27	Gourd leaf small, medium, large	Bundles							
21.5.28	Fresh pepper/sweet pepper	Ticals							
21.5.29	Cat tongue	Number							
21.5.30	Kha We	Number							
21.5.31	Citrics	Number							

Fruits

	Fruits								
21.6.1	Banana	Number							
21.6.2	Papaya	Number							
21.6.3	Guava	Number							
21.6.4	Grapefruit	Number							
21.6.5	Watermelon	Number							
21.6.6	Rambutan Kyetmouk	Number							
21.6.7	Pineapples	Number							
21.6.8	Mangoes	Number							
21.6.9	Custard Apple	Number							
21.6.10	Mangosteens	Number							
21.6.11	Durian	Number							
21.6.12	Apple	Number							
21.6.13	Pear	Number							
21.6.14	Other fruits (Specify)	Ticals							
21.6.15	Pomelo	Number							
21.6.16	Oranges	Number							
21.6.17	Sunkist	Number							
21.6.18	Jackfruit	Number							
21.6.19	Strawberry	Ticals							
21.6.20	Plums	Ticals							
21.6.21	Grapes	Ticals							

Spices and condiments

	Spices and condiments								
21.7.1	Dried chilies	Ticals							
21.7.2	Chilli powder	Ticals							
21.7.3	Lemon grass	Number							
21.7.4	Onions	Ticals							
21.7.5	Garlic	Ticals							
21.7.6	Tumeric powder	Ticals							
21.7.7	Ginger	Ticals							
21.7.8	Salt	Ticals	4.						
21.7.9	Seasoning powder	Ticals							
21.7.10	Other spices and condiment (Specify: _____)	Ticals							
21.7.11	Black pepper	Ticals							
21.7.12	Cloves	Ticals							
21.7.13	Mustard seeds	Ticals							
21.7.14	Marsala	Ticals							

Other food products

	Other food products								
21.8.1	Dried rice noodle	Ticals							
21.8.2	Dried wheat noodle	Ticals							
21.8.3	Rice vermicelli	Ticals							
21.8.4	Bread	Number							
21.8.5	Cake	Number							
21.8.6	Biscuits	Packet							
21.8.7	Pone Ye Gyi	Packet							
21.8.8	Bean curd (white)	Number							
21.8.9	Tofu	Number							
21.8.10	Soy bean paste	Ticals							
21.8.11	Vermicilli (bean)	Ticals							
21.8.12	Bean curd (brown)	Number							

Unit	Code	Small	Medium/Normal	Large
Tiscal	1	NA	NA	NA
Number	2	NA	NA	NA
Bundles	3	3.1	3.2	3.3
Packet	4	4.1	4.2	4.3
Mug	5	5.1	5.2	5.3
Bottle	6	6.1	6.2	6.3
Plate	7	7.1	7.2	7.3
Bowl	8	8.1	8.2	8.3
Cup	9	9.1	9.2	9.3
Gram	10	NA	NA	NA
Tin	11	NA	NA	NA
Pyi	12	NA	NA	NA
Other Specify	13	13.1	13.2	13.3

Section 22: Other Food consumption expenditures in the last 7 days

Respondent: The most knowledgeable person on household food consumption expenditures

Description of items				Consumption		Acquire			
						Purchase in cash		Received in kind	Home production
Code	Item	Unit to be used	Alternative unit	During the last 7 days, ...		During the last 7 days, ...			
				did any member of your household consume [ITEM]?	what was the total quantity of [ITEM] consumed by all household members?	How much of the amount of [ITEM] consumed during the last 7 days came from purchases?	How much did the household spend on the amount consumed during the last 7 days that came from purchases?	How much of the amount of [ITEM] consumed during the last 7 days came from gifts, payments in kind or other sources?	How much of the amount of [ITEM] consumed during the last 7 days came home production?
				Yes ... 1 No 2 >> Next item		If 'none', write '0'.>> e		If 'none', write '0'.	If 'none', write '0'.
				a	Quantity b (b=c+e+f)	Quantity c	Value in Kyat d	Quantity e	Quantity f

Alcoholic beverages consumed at home or outside of home

Alcoholic beverages consumed at home or outside of home									
22.1.1	Beer	Bottle							
22.1.2	Toddy/nipa palm alcohol	Bottle							
22.1.3	Local liquors/alcohol	Pac							
22.1.4	Imported liquors/alcohol	Pac							
22.1.5	Rice wine (Khaung Ye)	Bottle							

Food and beverages taken outside home

Food and beverages taken outside home									
22.2.1	Fried rice	Plate							
22.2.2	Fried bean curd (Tofu)	Number							
22.2.3	Fried vermicelli	Plate							
22.2.4	Nan with boiled bean	Number							
22.2.5	Butter spread nan/bread	Number							
22.2.6	Palata (parala - an Indian pancake)	Number							
22.2.7	Ekyarkway	Number							
22.2.8	Samosa	Number							
22.2.9	Mohingar/ Nhyat noodle	Bowl							
22.2.10	Rice based traditional snacks	Number							
22.2.11	Pauksi (Chinese	Number							

	steamed bun with stuffing)								
22.2.12	Rice noodle/vermicelli salad/soup	Bowl							
22.2.13	Wheat noodle salad/soup	Bowl							
22.2.14	Fried noodle/Cutkyikite	Plate							
22.2.15	Shan noodle/Mie Shay	Bowl							
22.2.16	Hot Tofu	Bowl							
22.2.17	Fried snack (gourd/pulses etc)	Number							
22.2.18	Other food taken outside home (Specify)	Ticals							
22.2.19	Brewed tea/coffee taken outside	Cup							
22.2.20	Soft drinks and/or juices taken outside home	Bot/Cup							
22.2.21	Bottled water taken outside home	1 Lit Bot							
22.2.22	Other drinks taken outside home (Specify	1 Lit Bot							

Section 23: Food consumption expenditures in the last 30 days

Respondent: The most knowledgeable person on household food consumption expenditures

Description of items				Consumption		Acquire			
						Purchase in cash		Received in kind	Home production
Code	Item	Unit to be used	Alternative unit	During the last 30 days, ... did any member of your household consume [ITEM]? Yes ... 1 No 2 >> Next item	what was the total quantity of [ITEM] consumed by all household members ?	During the last 30 days, ...			
						How much of the amount of [ITEM] consumed during the last 30 days came from purchases ? If 'none', write '0'.>> e	How much did the household spend on the amount consumed during the last 7 days that came from purchases ?	How much of the amount of [ITEM] consumed during the last 30 days came from gifts, payments in kind or other sources? If 'none', write '0'.	How much of the amount of [ITEM] consumed during the last 30 days came home production? If 'none', write '0'.
				a	Quantity b (b=c+e+f)	Quantity c	Value in Kyat d	Quantity e	Quantity f
	Rice and cereals								
23.1.1	Rice (Ngasein)	Pyi							
23.1.2	Rice (Emata)	Pyi							

23.1.3	Rice (Medone)	Pyi							
23.1.4	Rice (Nga kywe)	Pyi							
23.1.5	Kaukhnyin (Sticky Rice)	Pyi							
23.1.6	Maize seeds (dry)	Tin							
23.1.7	Flour Rice	Ticals							
23.1.8	Flour Wheat	Ticals							
23.1.9	Other cereals (Specify	Ticals							
23.1.10	Other rice (local variety)	Pyi							
23.1.11	Sorghum	Tin							
23.1.12	Millet	Tin							
23.1.13	Wheat	Tin							
	Oil and fats								
23.2.1	Groundnut oil	Ticals							
23.2.2	Sesamum oil	Ticals							
23.2.3	Palm oil	Ticals							
23.2.4	Mustard oil	Ticals							
23.2.5	Sunflower oil	Ticals							
23.2.6	Ghee	Ticals							
23.2.7	Other cooking oil and fat (Specify	Ticals							
23.2.8	Pork fat	Ticals							
23.2.9	Rice bran oil	Ticals							
23.2.10	Margarine	Gram							
	Milk products								
23.3.1	Butter	Ticals							
23.3.2	Milk powder	Packet							
23.3.3	Branded condensed milk	Tin							
23.3.4	Domestic condensed milk	Ticals							
23.3.5	Formula milk for infants	Tin/Pkt							
	Other food items								
23.4.1	Green tea leaves	Ticals							
23.4.2	Coffee (grinded or beans)	Ticals							
23.4.4	Sugar	Ticals							
23.4.4	Palm jaggery	Ticals							
23.4.5	Cane jaggery	Ticals							
23.4.6	Pickled tea	Ticals							
23.4.7	Betel leafs	Ticals							
23.4.8	Betel nuts	Ticals							
23.4.9	Coffee mix or tea mix	Packet							
23.4.10	Cereal mix	Packet							
23.4.11	Ovaltine, horlick, etc.	Bot./Pkt.							
23.4.12	Non-dairy creamer	Packet							
23.4.13	Potato chips	Packet							
23.4.14	Other 1 (Specify.....)	Ticals							
23.4.15	Other 2 (Specify.....)	Ticals							
23.4.16	Other 3 (Specify.....)	Ticals							

HH Member ID Code

Identify most knowledgeable person about household food consumption expenditures and administer sections 24, 25 and 26. If this person is not available, find another responsible adult member of the household who can provide information on the household's food consumption expenditures.

Read the following to the respondent:

I would like to ask you (this person) some questions about the non-food items acquired by any member of your household for household consumption. This includes purchases made in cash or in kind, as well as items acquired as gifts, payments or wages. By household consumption, this means do not include those acquired for (farm or non-farm) business activities

Section 24: Non-Food consumption expenditures in the last 30 days

Respondent: The most knowledgeable person on household non-food consumption expenditures

Description of items		Yes/	Acquir	Received in
Code	Item		Purchase in cash	
		During the last 30 days, did any member of your household use any [ITEM]? Yes 1 No 2 >> Next item	How much did the household pay in total for the amount of [ITEM] consumed in the last 30 days? If 'none', write '0'. If refused '99'	In addition to purchases in cash, what is the estimated cost of any additional [ITEM] that your household consumed during the last 30 days? If 'none', write '0'. If refused '99'
			Value in Kyat	Value in Kyat
24.1.1	Firewood			
24.1.2	Charcoal			
24.1.3	Kerosene			
24.1.4	Diesel			
24.1.5	Gas (propane or other gases)			
24.1.6	Public electricity			
24.1.7	Electricity from private source			
24.1.8	Candles			
24.1.9	Battery charging			
24.1.10	Other energy sources (specify)			
	Water			
24.2.1	Drinking water			
24.2.2	Water for other use (cooking, washing)			
	Personal apparel			

24.3.1	Thanakha (solid)			
24.3.2	Thanakha (ready made)			
24.3.3	Tooth paste			
24.3.4	Personal soap			
24.3.5	Cleaning materials and laundry supply			
24.3.6	Shampoo			
24.3.7	Haircut, hair dressing, beauty parlor services			
24.3.8	Other expenditures for personal care			
	Medicines/drugs (Including traditional medicine)			
24.4.1	Traditional medicines			
24.4.2	Medicines obtained with voucher (prescription from doctor or other health professional)			
24.4.3	Other medicines/drugs (cold remedies, vitamins, etc.)			
24.4.4	Other health care non-durables (bandages, birth spacing methods, etc.)			
	Local transport (daily travel excluding that for health and education)			
24.5.1	Local bus/ boat/ trawlargee daily travel			
24.5.2	Inter-city bus/ boat/ trawlargee (for same-day travel)			
24.5.3	Taxi/ boat (for same-day travel)			
24.5.4	Trishaw/ horse cart/ boat/ trawlargee/ motor cycle (for same-day travel)			
24.5.5	Motor vehicle permanent rental for family use			
24.5.6	Petrol/Diesel for family cars			
24.5.7	Maintenance and repairs for transportation vehicles (car, bicycle)			
24.5.8	Other daily transportation costs			
	Other non-food items			
24.6.1	Telephone line services (including rental and repairs fees from other)			
24.6.2	Mobile phone services (including rental and repairs fees from other)			
24.6.3	Computer services (including rental and repairs fees from other)			
24.6.4	Internet/e-mail services			
24.6.5	Satellite services			
24.6.6	Newspapers or journal or magazines or non-text books (purchased or rent)			
24.6.7	Garbage disposal services			
24.6.8	Postal services			
24.6.9	Cinema, video house, video tape (purchased or rent)			
24.6.10	Cigarettes, cigars			
24.6.11	Cheroot			
24.6.12	Betel quid			
24.6.13	Sporting activities			
24.6.14	Other entertainments			
24.6.15	Lottery expense (any)			
24.6.16	Gambling			

24.6.17	Other 1 (specify)			
24.6.18	Other 2 (specify)			
24.6.19	Other 3 (specify)			

Section 25: Non-Food consumption expenditures in 6 months

Respondent: The most knowledgeable person on household non-food consumption expenditures

Description of items		Yes/	Acquir	Received in
Code	Item		Purchase in cash	
		Between Myanmar New year and Lighting Festival 2013 (6 months), did any member of your household use any [ITEM]?	How much did the household pay in total for the amount of [ITEM] consumed during that 6 month period?	In addition to purchases in cash, what is the estimated cost of any additional [ITEM] that your household consumed during that 6 month period?
		Yes 1	If 'none', write 'n'	If 'none', write 'n'
			Value in Kyat	Value in Kyat
	Clothing and other apparel			
25.1.1	Various types of readymade clothing (e.g., shirts, sport shirt, men/women longyi, pants, underwear (excluding school uniforms))			
25.1.2	Shoes, slippers			
25.1.3	Cloth, fabric and materials (excluding for school uniforms)			
25.1.4	Tailoring including clothing repairs (excluding for school uniforms)			
25.1.5	School uniforms			
25.1.6	Umbrella			
25.1.7	Gold jewelry, jems and precious stones			
25.1.8	Watch			
25.1.9	Other clothing and apparel (Specify)			
	Home equipment			
25.2.1	Blankets, linen, bedclothes, curtains, table clothes			
25.2.2	Crockery, pots, pans, glasses, dishes			
25.2.3	Mosquito nets			
25.2.4	Insecticides/ products that kill mosquitoes			
25.2.5	Mattress, sleeping mats			
25.2.6	Household equipment repairs			

25.2.7	Other home equipment (Specify)			
House rent and repair				
25.3.1	Do you own or are you purchasing this residence, is it provided to you by an employer, do you use it for free, or do you rent this residence	Own 1	1 ▶25.3.2	_
		Being purchased 2		
		Employer provides 3	3 ▶25.3.5	
		Free, authorized 4	4 ▶25.3.5	
		Free, not authorized 5	5 ▶25.3.5	
		Rented 6	6 ▶25.3.10	
		Other (Specify) 96	96 ▶25.3.5	
		Don't know/No response/Not applicable 98	98 ▶25.4.1	
25.3.2	If you are purchasing your house, paying a mortgage or repaying a loan for the house how much are you paying per month?			_
25.3.3	If you sold this dwelling today, how much would you receive for it?	Kyat		_
		Don't know/No response/Not applicable 98		_
25.3.4	How many years ago was this dwelling built? (How old is it?)	Years		_
		Don't know		_
25.3.5	If you rented this dwelling today, how much rent would you receive/pay?	Kyat		_
25.3.6	Time period [day, week, month, year] for renting	Day 1		_
		Week 2		
		Month 3		
25.3.7	Bamboo material for house repair/additions			_
25.3.8	Non-bamboo for house repair/additions			_
25.3.9	House additions excluding bamboo material (e.g., new room)			_
25.3.10	Other house repairs (Specify)			_ ▶25.4.1
25.3.11	How much do you pay to rent this dwelling? Both rent and fees	Kyat		_
25.3.12	Time period [day, week, month, year] for renting	Day 1		_
		2		
		Week 3		
		Month 4		
		Yea 8		
		Don't know/No response/Not applicable		
Health (Including traditional medicine)				
25.4.1	Personal health/accident insurance			

25.4.2	In patient stay/long-term care in public hospital (include all costs)			
25.4.3	In patient stay/long-term care in private clinic (include all costs)			
25.4.4	Out patient care at public hospital/health center/clinic			
25.4.5	Out patient care at private hospital/health center/clinic			
25.4.6	Home visit by doctor or other health professional			
25.4.7	Dental care			
25.4.8	Care from traditional healer			
25.4.9	Medical devices (eye glasses, hearing aids, etc.)			
25.4.10	Other health care (excluding medicines, vaccinations)			
25.4.11	Health related transportation cost			
	Education (including pre-school and adult education)			
25.5.1	School (including training) transportation costs			
25.5.2	School (including training) fees (admission and monthly fees)			
25.5.3	Contributions to the school			
25.5.4	Text books			
25.5.5	School stationeries (school bags, exercise books, pencils/pen, erasers etc.)			
25.5.6	Private tutoring			
25.5.7	Boarding			
25.5.8	Other education costs (e.g., student festival activities)			
25.5.9	Other education costs (Exam fees)			
	Travel/trips (Overnight travel excluding health and education)			
25.6.1	Long distance bus/ship travel			
25.6.2	Railway fare (for over-night travel)			
25.6.3	Plane fare			
25.6.4	Lodging and meal expenses (during travel)			
25.6.5	Other travelling expenses in over-night travel			
	Other			
25.7.1	Household worker services eg maid, carpenter, electrician, plumber etc.			
25.7.2	Other 1 (specify _____)			
25.7.3	Other 2 (specify _____)			
25.7.4	Other 3 (specify _____)			

Section 26: Value of Assets

We have already asked you about ownership of household assets, now I want to ask you about the value of your assets.

	Product	Yes = 1 No = 2	Number of Units for each item	Age of item	Price if sold	Items bought in the last 12 months	Amount paid for all items bought in the last 12 months
		If 2 next item	How many [ITEMS] do you own?	What is the age of these [ITEM]s? IF MORE THAN ONE ITEM AVERAGE AGE	If you wanted to sell one of these [ITEM]s today, how much would you receive? IF MORE THAN ONE ITEM AVERAGE VALUE	Did you purchase or pay for any of these [ITEM]s in the last 12 months Yes = 1 No = 2 If 2 next item	How much did you pay for all these [ITEM]s all together (total) in the last 12 months?
		26.1	26.2 NUMBER OF ITEMS	26.3 NUMBER OF YEARS	26.4 KYAT	26.5	26.6 KYAT
1	Bicycle						
2	Motorcycle						
3	Trishaw						
4	Trawlarjee						
5	Car						
6	Truck						
7	Bed (wooden or steel)						
8	Mattress						
9	Stove (gas or electric)						
10	Fuel efficient wood stove						
11	Chair						
12	Table						
13	Gold/ Jewellery						
14	Radio/cassette						
15	TV / satellite dish						
16	DVD player						
17	Sewing machine						
18	Cell phone						
19	Watch						
20	Solar panel						
21	Boat without motor						
22	Boat with motor						
23	Fishing net						
24	Fish/aquaculture pond						
25	Household savings						
26	Other Buildings besides House						
27	Land						
28	Household Appliances e.g., Kettle, etc.						
29	Generators						
30	Cattle						
31	Horses						
32	Goats and/or sheep						
33	Buffalo						
34	Pigs						
35	Chickens						
36	Ducks						
37	Ploughs/tillage equipment for use with draught animals						
38	Power tiller						
39	Tractor						

40	Power thresher						
41	Backpack sprayer						
42	Improved crop storage bin or silo						
43	Tarpaulin or seed drying net						
44	Irrigation pump						
45	Animal drawn cart						
46	Trailer (drawn by vehicle)						
47	Seeder						

■ END OF THE QUESTIONNAIRE

Annex 5: LIFT 2013 Focus Group Discussion Guide

Informed consent: it is necessary to introduce to each participant the purpose of the Focus Group Discussion and gain their consent before starting the Focus Group Discussion. Only, once each participant has given his or her consent can the Focus Group Discussion start.

Hello. My name is _____. I am working with MSR/ICF. We are conducting Focus Group Discussion sessions to determine the success of the LIFT program, which has been funded by people around the world and provides support to villages to help poor and vulnerable households to improve their livelihoods and income. We are doing this to help understand the views of people about their community and how the different types of support given through the LIFT program are working.

As part of a small group with fellow villagers, we would like to ask your views on a range of issues. In total, we will be undertaking 36 Focus Group Discussions in 9 villages across Myanmar where LIFT is working. In your village we will be undertaking 4 Focus Group Discussions. The views expressed in your group will be included in a report and the information will be used to help improve how projects can better support villagers such as yourselves in the future.

The answers and information you give will be completely confidential. Nevertheless, with your permission, we wish to record the event to enable us to better analysis what is said. This will enable us to explain what people in this community and others think in a report, but we will not mention any names. Your personal contributions and views will not be shared with anyone else in a way that can identify you.

During the Focus Group Discussion, one of my colleagues from MSR will ask questions to you and the other participants and another colleague will write down the answers from the group. The discussion will take no more than 1.5 hours to complete and we will have some refreshments which you can consume during or after the Focus Group Discussion. You are free to leave of course at any time.

The note-keeper should record the following identifier information:

Village of focus group: _____

Date of discussion: _____

Number of focus group participants: _____

Type of focus group: e.g., poor, vulnerable women

Gender of focus group participants: How many Males _____ Females _____

<i>Name</i>	<i>Age</i>	<i>Sex</i>	<i>Years of Education</i>	<i>Own land</i> Yes/NO	<i>Signature</i>
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

Guide questions

- In the following sections, we want to explore a number of key research questions. Ask the main question first, and then use the detailed questions to help you and the participants explore particular issues in depth or obtain more information.
- Be flexible: add your own questions to find out other interesting information, and only ask questions that seem relevant to the group.
- Remember the key issues we want to understand. Phrase questions in ways people will understand easily. Change the order around if it helps keep an interesting conversation going.
- Use your 'village information summary table' and your knowledge from the Village Profile (Key Informant Interview) to quickly understand what projects have been operating in the village.

Livelihoods and the community

We would like to know more about how people in the community earn an income or obtain the food and goods they need to live. Can you tell us more about that?

1. How do you and other people in the community earn an income or obtain the food and other goods you need? (*Describe activities briefly.. probe for agricultural and non-agricultural; fishing; casual or wage labour; full-time employment*)
2. Are there differences in the activities that different types of people do? For instance, poor people/rich people? Men and women? Old people/young people? Children? (*Describe these differences*). **Why do these differences exist?**
3. Have there been changes to these activities over the last 3 years? If so, *what* has changed? [*Probe: New ways of earning a living? Some ways getting easier? Some ways getting harder? More/less people do it? More/less income? etc?*] **How** and **why**?
4. Have there been changes in people's incomes over the last 3 years? If so, *what* has changed? **How** and **why**?
5. Do people have enough food for their household now? Have there been months your household has been short of food? If so which months? How has food supply changed over the last 3 years? If so, *what* has changed? **How** and **why**?
6. What other main changes have there been in the community over the past 3 years? **Why** have these changes happened? Are these positive or negative changes?
7. Has the way your village works together, makes decisions, or is being led changed over the past 3 years? **What** has changed? **Why** has it changed? Is it getting better for people like you? For others? **How**?

Overall perceptions and awareness of LIFT funded projects

Can you tell us about projects and organisations who have worked in your village at any time over the the past 2 or 3 years? (*Use your 'village package' and your knowledge from the local implementing partner to probe for the activities you know have taken place in that village*)

8. Are you aware of any projects or outside support that have come into your village? (If yes) Do you know the names of these projects or organisations? What have they been doing?

9. Have any of you, yourselves, been involved in any of these activities? (LIST ACTIVITIES THAT HAVE HAPPENED IN THE VILLAGE)? *(If not, probe more and understand what they know, give examples).*

Training related to crops and crop production

Training in livestock

Training in fisheries

Training in other vocational skills (e.g., carpentry, tailoring/sewing, mechanics/repairs, soap and shampoo making etc)

Training in skills for small business management (e.g., business planning, bookkeeping etc)

Training in natural resource management (e.g., community forestry, plant nurseries, mangrove reforestation, soil conservation etc)

Training in health, hygiene or nutrition

Demonstration plots or field trials

Farmer field schools, farmer extension groups, farmer exchange visits

Provision of inputs for agriculture (e.g., seeds, fertilizer, pesticides etc) including through revolving funds

Provision of equipment for crop production, storage or processing (tillers, seeders, weeders, threshers etc.) including through revolving funds

Provision of animals for tillage (including animal banks, revolving funds)

Inputs/equipment for fisheries (including through revolving funds)

Inputs/equipment to start a business - including through revolving funds

Provision of livestock - including through revolving funds

Cash grants or vouchers to provide inputs for agriculture, livestock or other businesses

Savings and credit groups and provision of credit

Formation or strengthening of groups within the village

Cash for work activities (e.g., to construct or renovate paths, roads, bridges, piers or ponds etc)

Support for crop or product marketing

Support for natural resource management (e.g., community forestry, soil conservation, mangrove replanting etc through seedlings or other materials)

Support for disaster risk reduction or climate change preparedness

10. Of all the types of support received in this village, which do you think was the most useful, important or had the biggest impact? Which was the least useful? Why?

(Explore any differences in opinion among the group, this may need some time for discussion and analysis by the group, there may be many factors to consider, a ranking/scoring matrix may assist discussion – factors may include: profitability, amount of labour required, skills needed, risks, amount/type of capital/inputs required, impact on food availability for the hh)

11. Were community members involved in deciding what activities would be most useful for this village? How? What community members were involved? Were some people left out? Who and why? (→ *defining needs & social mobilisation*)

12. Did people receive enough support to implement the activities? What type? Who from? Was it useful? (--> *support for implementation*)
13. Did people have someone they could contact if they had complaints or questions (*for example if they were left out*)? How easy was it to get in contact? Did people receive useful solutions to their problems? (--> *accountability*)

Specific activities, take-up and impact

We are now going to focus on the details of the activities that you described in this village (*only choose modules for activities that are relevant in the village*).

Farmer extension/training

14. Were there any activities to teach farmers or **share knowledge** with farmers about different or new ways to produce rice or other crops (e.g., trainings)?
- If so, what were they? What did they teach? (*prompt, project staff visits bi-weekly, key farmers trained, demonstration plots, exchange visits, Farmer Extension Groups, Farmer Field Schools, Field Days and Fairs*)
 - Were you or your households involved? (Why? Why not?)
 - How were people selected to be included and who was selected? Was this equitable? Did it benefit men and women equally? Did it support the poorest and most vulnerable?
 - Were they useful (and which was most useful)? If yes, in which way? If not useful, why not?
 - Did your household or other households in this village change the way you grow these crops as a result of this training? Why/Why not?
For those that did adopt new ways of growing, was there any change in crop yields? What happened? Why?
 - Will you or other households continue growing crops using this new way?
 - Overall, do you think these new ways will be more profitable? (*considering any increased costs of labour/inputs and the income from selling the crops*)
 - Are farming households spreading information on these new practices among themselves without the project? (*Is this common?*)

Support for other livelihoods (that did not required land)

Note that the inputs may have been provided through a revolving fund or directly.

15. Have people in this village received livestock (**pigs, ducks or goats or other animals**) or received training on rearing of these livestock?
- Were you or your households involved? Why/Why not?
 - If trained:
 - How was the training? Was it useful? How/why/why not?
 - If livestock were received:
 - How were people selected to receive them and who was selected (*poorest, most needy, etc.*)? Was it equitable? Did it benefit men and women equally?
 - Was it useful (if not, why not, what would have been more useful)?

- Was it profitable? Why/why not?
- Has it made any lasting impact for the households involved? Why/why not?

16. Have people in this village received **boats/nets/other fishing inputs** (*aquaculture ponds, traps, etc*) or received training on fishing methods?

- Were you or your households involved? Why/Why not?
- If trained:
 - How was the training? Was it useful? How/why/why not?
- If boats/nets/other inputs were received:
 - How were people selected to receive them and who was selected (*poorest, most needy, etc.*)? Was it equitable? Did it benefit men and women equally?
 - Was it useful (if not, why not, what would have been more useful)?
 - Was it profitable? Why/why not?
 - Has it made any lasting impact for the households involved? Why/why not?

17. Have people in this village received **inputs for home gardening** (*seeds, fertiliser, tools*) or received training on home gardening?

- Were you or your households involved? Why/Why not?
- If trained:
 - How was the training? Was it useful? How/why/why not?
- If seeds/fertilizer/tools were received:
 - How were people selected to receive them and who was selected (*poorest, most needy, etc.*)? Was it equitable? Did it benefit men and women equally?
 - Was it useful (if not, why not, what would have been more useful)?
 - Was it profitable? Why/why not?
 - Has it made any lasting impact for the households involved? (E.g., *more food sources, healthier families, better nutrition*)? Why/why not?
 - Did the households involved continue growing vegetables etc the next season/year?

Savings and credit and revolving funds

18. Was any **savings and loans group, revolving fund** or **credit facility** set up in this community (*probe with example*)?

- How does it work?
 - Who manages it? Who makes decisions?
 - Savings required? Any other security?
 - Use of credit?
 - Repayment period? Regular repayment amounts?
 - Interest rates?
 - Level of defaults among borrowers?
 - What happens when default?
- When was it set up and how many people have been involved?

- How were people selected to be included and who was selected? Was this equitable? Does everyone have a chance to be involved? Does it benefit men and women equally?
- Have your households taken out loans? What for? How does this new credit/revolving fund compare with what you used before? (Other sources of credit, money lenders etc)?
- Do you think this new credit/revolving fund is making a difference for the households involved? How/why? Any problems for some households? Is household indebtedness increasing or decreasing?
- How has it affected this community? Was it useful (if not, why not)? What are the main changes it triggered? (*probe for small businesses, investments, credit worthiness, etc*)
- Is it still operating? How? If not, why not?
- Is the fund available to the village growing?

For all other types of support received

19. Go one by one through the types of support that the group reported taking place in this village:

- Describe what type of support and how it worked? How was the activity selected?
- Did it address a real need and priority for the village?
- When was it set up and how many people were involved?
- How were people selected to be included and who was selected? Was this equitable? Did it benefit men and women equally? Did it support the poorest and most vulnerable?
- How has it affected this community? Was it useful (if not, why not)? What are the main changes it triggered? (Any changes in household income? Food security?)
- Is it still operating, still working, still providing benefits? How? If not, why not?

Overall perceptions of LIFT-funded projects' contribution to change

Can you tell us about what changes or effects the activities in this community have had on your lives?

20. What were the *most significant changes* that these activities have led to in the community? (*Probe for positive and negative changes*). **Why** are these the most important?

21. *What* components/activities led to these changes? **How**?



Interviewer: ask respondents to prioritise these changes


22. Have any of these activities or types of help increased people's incomes? **Which** ones in particular, and **How** (*describe*)?

- Which of the activities was the most useful for improving income? **Why**?

- Which activities were not so useful? **Why?**
 - Were there other different activities or support that was also useful? **What and how?**
23. How have your incomes changed over the last 3 years? How much has this been affected by the activities of organisations that have come here?
24. Have any of these activities or types of help made it easier for people to have enough food for the household? **Which** ones in particular, and **How** (describe)?
- Which activities were most useful for helping households to have enough food available throughout the year? *Why?*
 - Which activities were not so useful? *Why?*
25. Do you feel these activities will have longer term impacts on your community? *What and why?*
- Which activities will be most sustainable (used in the longer term)?
 - Why those and not others?
 - Which the least? *Why?*

Poverty, vulnerability and targeting

I now wanted to briefly ask you what characteristics distinguish better and less well-off members of this community and understand how the project impacted different groups differently

 *Interviewer: get respondents to explain the broad characteristics (economic, social, political, cultural) of poor people in the community*

26. Do you feel some of the activities we discussed benefitted the poorest households most? Which ones, and why? If not, who did they benefit the most? Why was this?
27. How were people selected to be **included** (*what criteria were used*) for the activities? Could anyone participate? Who chose these criteria for inclusion?
28. Did people who were landless have the same chance of participating (*or lower/higher chances*)? Did poor people have the same chances? The elderly? Disabled?
29. Overall, who should different projects have focussed on? Why? How could the current targeting be improved?
30. Were the **impacts** of the activities we discussed earlier the same for poor people? Landless people? Men and women? Older people? *If so, how? If not, why not? (probe for different impacts of different activities)*

Conclusion

31. To conclude...If you were government, what **three interventions/activities** would you prioritise in this community to improve the lives of people living here?

To finish the group, ask if anyone has any questions and thank everyone for their time. Remember that sometimes the best comments come once the focus group is ended, so stay to chat for a short while and then record your impressions and any good quotes.

Annex 6: Villages selected for the focus group discussions in 2011 and 2013

Zone	2011 Villages	2013 Villages	Implementing partner/s working in the village for 2013
Hilly	Bant Bway	Fungkah	GRET
Hilly	Myay Nio Kone	Nam Au	Metta
Hilly	Ywar Pa Lae	Bant Bway	CESVI, UNDP/PACT
Dry	Kin Mon Chone	Nyaung Pin Seik	Action Aid, Thadar
Dry	Poe Sar Khin	Ywar Thit	ADRA
Dry	-	Than Pwayt	Oxfam
Coastal/Delta	Myoma	Ah Si Gyi	Action Aid, Radanar Ayar
Coastal/Delta	Thu Kha Ba La	Kone Gyi	ADRA, Pact, Proximity Designs, LEAD
Coastal/Delta	Kone Gyi	Leik Thit	Mercy Corps, Pact, Proximity Design, IRRI
Coastal/Delta	Vangteh		

Annex 7: List of visited villages in 2011 and 2013

LIFT villages				Control Villages			
Zone	Village	2011	2013	Zone	Village	2011	2013
Villages that were visited twice							
Dry	Inn Gyinn	✓	✓	Hilly	Nawng Hkaing/ (Nant Khan)	✓	✓
Hilly	Nam Par	✓	✓	Hilly	Nang War	✓	✓
Hilly	Simzawl	✓	✓	Hilly	Mangkheng	✓	✓
Hilly	Nabual	✓	✓	Hilly	Thlualam/ Htar lan	✓	✓
Hilly	Tinam	✓	✓	Dry	Ta Mar Pin Kone	✓	✓
Hilly	Kaptel	✓	✓	Dry	Aung San	✓	✓
Hilly	Vangteh	✓	✓	Dry	Mya San	✓	✓
Hilly	Lungding	✓	✓	Dry	Ohn Nae Boke	✓	✓
Hilly	Lomzang	✓	✓	Dry	Ayeywar	✓	✓
Hilly	Plauntung/ (Phuntong)	✓	✓	Dry	Kyauk Oo Taung	✓	✓
Dry	Nga Hmyaung Taung	✓	✓	Dry	Kyauk Sauk	✓	✓
Dry	Than Ma Taw	✓	✓	Dry	Kyet Yoe San	✓	✓
Dry	Kan Sint	✓	✓	Dry	Shar Tapin	✓	✓
Dry	Nyaung Pin Seik	✓	✓	Dry	Pin Pu	✓	✓
Dry	Ka Daung Gyi	✓	✓	Dry	Yone Kyin/ Go Kyin	✓	✓
Dry	Kayin (Kan Yin)	✓	✓	Dry	Nyaung Ni Kyin	✓	✓
Dry	Pauk Taw Kone	✓	✓	Coastal	Zee Khon	✓	✓
Dry	Thar Hmyar	✓	✓	Coastal	Thea Kone	✓	✓
Dry	Kyauk Te	✓	✓	Hilly	Ho Hti	✓	✓
Dry	Myin Win	✓	✓	Hilly	Naung San Bat	✓	✓
Dry	Ywar Thit Gyi	✓	✓	Hilly	Taung Peit	✓	✓
Dry	Myouk Kone	✓	✓	Hilly	Inn Yar	✓	✓
Dry	Htein Ba Lar	✓	✓	Hilly	Min Bu	✓	✓
Dry	Mone Taing	✓	✓	Hilly	Nyaung Win	✓	✓
Dry	Kyi Taing Kone	✓	✓	Hilly	Nant Hu Taung	✓	✓
Dry	Than Pawe/ (Than Pwayt)	✓	✓	Hilly	Pang Hpyet	✓	✓
Coastal	Kine-khon	✓	✓	Delta	Mar Yar	✓	✓
Coastal	Ward-1	✓	✓	Delta	Pyin Boe Lay	✓	✓
Coastal	Ya-hai-katoh	✓	✓	Delta	Ka Nu Ka Mar	✓	✓
Coastal	Oke HPoke Kan	✓	✓	Delta	Hpoe Thin (a) Hpa Yar Lay Su	✓	✓
Coastal	Chaung Thit	✓	✓	Delta	Ka Nyin Kwin	✓	✓
Coastal	Pin Nyar Thi	✓	✓	Delta	Mingala Thaug Tan	✓	✓

Hilly	Naung Khom	✓	✓	Delta	Salu Sate	✓	✓
Hilly	Naung Latt	✓	✓	Delta	Ka Ka Yo	✓	✓
Hilly	Hti Son	✓	✓	Delta	Ah Kyi Ka Yin Su	✓	✓
Hilly	Pone Phron	✓	✓	Delta	Kyone Thin	✓	✓
Hilly	Shwe Kyaung	✓	✓	Delta	Dhamma Thu Kha	✓	✓
Hilly	Hke Moon	✓	✓	Hilly	Nawng Hkaing/ (Nant Khan)	✓	✓
Hilly	Bant Bway	✓	✓				
Hilly	Kone Thar	✓	✓				
Delta	La Tar Chaung Hpyar	✓	✓				
Delta	Ywar Thit	✓	✓				
Delta	Nyi Naung	✓	✓				
Delta	Dhamma Rek Khi Ta	✓	✓				
Delta	Pein Hne Chaung	✓	✓				
Delta	Za Gar Lun Kone	✓	✓				
Delta	Ka Tet Kone	✓	✓				
Delta	Ba Wa Thit	✓	✓				
Delta	Ah Mat	✓	✓				
Delta	Baing Daunt Chaung	✓	✓				
Delta	Htone Bu Kya Ah Wa	✓	✓				
Delta	Pein Hne Kone	✓	✓				
Delta	Leik Thit	✓	✓				
Delta	Kwa Kwa Lay	✓	✓				
Delta	Hlwa Zar	✓	✓				
Delta	Let Pan Kone	✓	✓				
Delta	Nga Hpei Ta Yar	✓	✓				
Delta	Pauk Tu	✓	✓				
Delta	Kone Gyi	✓	✓				
Delta	Lay Yin Kwin	✓	✓				
Delta	Chaung Kwe Gyi	✓	✓				
Delta	Yae Cho Kan	✓	✓				
Delta	Ka Ti Par Ywar Thit	✓	✓				
Delta	Kant Ba Lar Chaung	✓	✓				
Delta	Gon Hnyin Tan	✓	✓				
Delta	Ka Zaung Chaung	✓	✓				

Delta	Kyun Chaung	✓	✓		
Villages that were visited only in 2011					
Hilly	Shwe Si	✓		Hilly	Sha Dau ✓
Hilly	In Waing Bawt	✓		Hilly	Sezang ✓
Hilly	Ah Kye	✓		Hilly	Khianglam ✓
Hilly	Maw Hpawng (Upper)	✓		Dry	King Htauk Kan ✓
Hilly	Pam Ma Ti/ Aung Mya	✓		Dry	Daung They Chaung ✓
Hilly	Kaung Kwet	✓		Dry	Be Gyi ✓
Hilly	Meding	✓		Dry	Kyee Myint ✓
Hilly	C.Zamual	✓		Hilly	Kyauk Yae Oe ✓
Hilly	Zungh	✓		Hilly	Nawng Mu Ywar Ma ✓
Hilly	Mualkai	✓		Delta	Pyin Boe Gyi ✓
Dry	Zee Pin Wine	✓		Delta	Boe Khway Gyi ✓
Dry	Kyauk Pyauk(N)	✓		Delta	Kyon La Tar Chaung Hpyar ✓
Dry	Sai Gyi Daw	✓		Delta	Chauk Eain Tan ✓
Dry	Kywe Chan	✓			
Dry	Nga Lone Tin	✓			
Dry	Bu Kine(E)	✓			
Dry	Taung Yat	✓			
Dry	Kyaung Oho	✓			
Dry	Kin Mon Chone	✓			
Dry	Ohan Myar Gyi	✓			
Dry	Than Kone	✓			
Dry	War Guan San Pya	✓			
Dry	Aye Mya Tharyar-S	✓			
Dry	Kyun Pyat	✓			
Dry	Hpoe Lay Lone	✓			
Dry	Yae Kyi	✓			
Dry	Kalama	✓			
Dry	Miou Aung	✓			
Dry	Poe Sar Khin	✓			
Dry	Thae Pyin	✓			
Dry	Aung Thar	✓			
Dry	Lay Tine Sin	✓			
Dry	Pinn Wa	✓			
Dry	Thit Ta Bway (N)	✓			
Dry	Kyweku	✓			
Dry	Pyin Ma Gyi	✓			
Dry	Atar Ywar Ma	✓			
Dry	Kha Paung Kone	✓			
Dry	Seik Htain (S)	✓			

Dry	Twin Ma	✓
Dry	Taung Kone	✓
Dry	Htan Ngal Taw	✓
Dry	San Kan	✓
Dry	Ywar Pa Lae	✓
Coastal	Myo-ma	✓
Coastal	Longg-kyoe	✓
Coastal	Sup-thwar	✓
Hilly	Kho Lai	✓
Hilly	Saw Sar(S)	✓
Hilly	Twe Pu	✓
Hilly	La mine Ywr Thit	✓
Hilly	Alae Pine	✓
Hilly	Naung Lwe	✓
Hilly	Kyauk Taing	✓
Hilly	Keng Hkam (North)	✓
Hilly	Myay Nio Kone	✓
Hilly	Shwe La Phone	✓
Hilly	Inn Kaung	✓
Hilly	Nat Inn	✓
Hilly	Lai Laung Kyi	✓
Hilly	Hpa Yar Hpyu	✓
Hilly	Kyay Taung	✓
Hilly	Naung Moon	✓
Hilly	Tikyit (M)	✓
Hilly	Naung Khae	✓
Hilly	Myin Wun	✓
Hilly	Myin Kwin	✓
Hilly	Man Loi	✓
Hilly	Pan Hike	✓
Hilly	Pang Kun (old)	✓
Delta	Thu Kha Ba La	✓
Delta	Hlwa Zin Kone	✓
Delta	Boe Khway Gyi	✓
Delta	Bant Bway Su	✓
Delta	War Chaung	✓
Delta	Kani	✓
Delta	Kun Daing	✓
Delta	Ka Nwi	✓
Delta	Kyon Soke	✓
Delta	Tha Mein	✓
Delta	HtawThein Kone	
Delta	Kyon Kan Wa	✓

Villages visited only in 2013

Hilly	San Ka	✓	Hilly	Hpa Raw	✓
Hilly	Pung Shwi	✓	Hilly	Tualzang	✓

Yang					
Hilly	Ma Haung	✓	Hilly	Teinlan	✓
Hilly	Sin Hkan	✓	Dry	Hpa Lan Taw	✓
Hilly	Laitui	✓	Dry	Se Lan	✓
Hilly	Tuithang	✓	Dry	Ma Gyi Pin Su	✓
Hilly	Khua Lai/ Gozang ward	✓	Dry	Zaung Taw Kan	✓
Hilly	Vaivet	✓	Dry	Lan	✓
Hilly	Buanlung	✓	Hilly	Ti Law	✓
Hilly	Surkhua	✓	Hilly	Naung Mu	✓
Hilly	Fungkah	✓	Delta	Sat Chaung	✓
Dry	Shwe Dar Kya	✓	Delta	Kyon Hlut Gyi	✓
Dry	Bant Bway(North)	✓	Delta	Htein Ta Pin	✓
Dry	Lin Sa Kyet	✓			
Dry	In Ma Htee	✓			
Dry	Aung Pan Pin	✓			
Dry	Ma Gyi Taing	✓			
Dry	Tat Kone	✓			
Dry	Yone Taw	✓			
Dry	Tet Wun (North)	✓			
Dry	Tha Pyin Saung	✓			
Dry	Pu Nyo	✓			
Dry	Kun Laung (Kone)	✓			
Dry	Myay Ni Twin	✓			
Dry	Chaung U To	✓			
Dry	Kan Yat Gyi	✓			
Dry	Kyat Tan Kone	✓			
Dry	Nan Te	✓			
Dry	Thein Taw	✓			
Dry	Nyaung Pin	✓			
Dry	Seik Kha Wa	✓			
Dry	Shwe Pay	✓			
Dry	Hnaw Pin	✓			
Dry	Kone Ba Lu	✓			
Dry	Su Lay Kone	✓			
Dry	Nwar Pyin	✓			
Dry	Saing Kan	✓			
Dry	Ma Gyi Kan	✓			
Dry	Htan Ta Pin	✓			
Dry	Wea Laung	✓			
Dry	Aing To Ywar Thit	✓			
Dry	Kullni	✓			
Dry	Yar Gyi Kone	✓			
Dry	Yone Pin Kone	✓			
Hilly	Naung Yar Sai	✓			
Hilly	Kho Khrae	✓			

Hilly	Loi Taw	✓
Hilly	Kant Kaw	✓
Hilly	Nam Au	✓
Hilly	Nam Plin	✓
Hilly	Paw Inn	✓
Hilly	Hti Ree	✓
Hilly	Nawng Ann	✓
Hilly	Pan Sone	✓
Hilly	Mong Tin Ywar Ma	✓
Hilly	Naung Peing Zay Kone	✓
Hilly	Kaung Lan	✓
Hilly	Taung Sale Late	✓
Hilly	Ah Htet Kyu Inn	✓
Hilly	Yadanar Thein Gi	✓
Hilly	Par Hat	✓
Hilly	Kone Gyi Ywar Ma	✓
Hilly	Long Wei	✓
Hilly	Pyay Thar Kone	✓
Hilly	Shwe Moke Htaw	✓
Hilly	Sin Zar Kone	✓
Delta	Kan Su	✓
Delta	Pein Hne Taung	✓
Delta	Chaung Gyi	✓
Delta	Hle Seik	✓
Delta	Shwe Bo Su	✓
Delta	Kywe Chan Wa	✓
Delta	Kan Su	✓
Delta	Nga Tan Ta Yar	✓
Delta	Ka Nyin Ta Pin	✓
Delta	Kyun Hteik	✓
Delta	La Tar Chaung	✓
Delta	Kwin Pone Gyi	✓
Delta	Kyar Chaung	✓
Delta	Ah Si Gyi	✓
Delta	Da None Chaung	✓

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