

Module for Chapter 12

Housing

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Two versions of the housing module are given in the following pages. They are discussed in detail in Chapter 12 of Volume 1. The shorter module collects information that can be used to describe basic household amenities and to calculate the use value of housing, which is one component of aggregate consumption. The longer module collects considerably more data, which can be used to analyze housing markets. This distinction is, however, somewhat simplistic. The long module contains many detailed questions that can be used to expand basic descriptive work under certain conditions. For example, in some countries housing prices include complexities such as "key money." It also collects useful information in countries where climates are cold, or

where the water supply is seasonal. Thus in some countries the short module should incorporate some of the questions provided in the long module.

An important issue to settle regarding the housing module is whether the minimal water, sanitation and fuel use questions that it contains are adequate. If not, the modules on these topics that are presented Chapter 14 of Volume 2, which discusses environmental issues, are more appropriate.

A final point to note is that the electronic files of the housing module are in MS Word, not Excel. In some cases it may be useful to convert them to Excel so that the entire questionnaire is in a single software package.

HOUSING MODULE (SHORT VERSION) PART A. DESCRIPTION OF THE DWELLING

Now I would like to ask you about your housing conditions. I mean by housing all the rooms and all separate buildings used by your household members. What buildings or rooms do the members of your household occupy? What buildings or rooms do the members of your household occupy?

BEFORE ASKING QUESTION 5, OBSERVE AND NOTE THE FOLLOWING:

1. WHAT IS THE MAJOR CONSTRUCTION MATERIAL OF THE EXTERNAL WALLS?

- BRICK 1
 CONCRETE PLATES 2
 CONCRETE BLOCKS 3
 UNBAKED BRICK, ADOBE 4
 WOOD, LOGS 5
 TIN, ZINC SHEETING 6
 FLATTENED TIN CANS 7
 MUD 8
 BAMBOO 9
 CANVAS, FELT 10
 OTHER (SPECIFY _____) 11

2. WHAT IS THE MAJOR MATERIAL OF THE ROOF?

- CONCRETE 1
 SHINGLES 2
 ASBESTOS SHEETS 3
 METAL SHEETS 4
 TILE 5
 WOOD 7
 UNBAKED BRICKS (SAMAN) 8
 THATCH 9
 OTHER (SPECIFY _____) 10

3. WHAT IS THE PRIMARY MATERIAL OF THE FLOOR?

- PARQUET 1
 PAINTED WOOD 2
 TILE 3
 LINOLEUM 4
 CONCRETE 5
 CLAY/EARTHEN FLOOR 6
 OTHERS(SPECIFY _____) 7

4. WHAT TYPE OF DWELLING IS IT?

- DETACHED HOUSE 1
 MULTI-FAMILY HOUSE 2
 SEPARATE APARTMENT 3
 COMMUNAL APARTMENT 4
 ROOM IN A LARGER DWELLING 5
 SEVERAL BUILDINGS CONNECTED 6
 SEVERAL SEPARATE BUILDINGS 7
 IMPROVISED HOUSING UNIT 8
 OTHER (SPECIFY _____) 9

5. How many rooms do the members of your household occupy, including bedrooms, living rooms and rooms used for household enterprises?

DO NOT COUNT BATHROOMS, KITCHENS, BALCONIES AND CORRIDORS

NUMBER OF ROOMS

6. How many, if any, of these rooms are used primarily for family enterprise or trade?

WRITE ZERO IF ROOMS ARE NOT USED FOR BUSINESS OR TRADE

NUMBER OF ROOMS

7. What is the space of your dwelling including living and accessory rooms?

SQUARE METERS

8. How long has your household been living in this dwelling?

YEARS

9. In approximately what year was this dwelling built?

ASK THE RESPONDENT TO PROVIDE AN ESTIMATE IF UNSURE
OF THE EXACT YEAR

YEAR BUILT

PART B. HOUSING SERVICES

5. How do you treat your drinking water?

- 1 BOIL IT (ONLY) 1
2 FILTER IT (ONLY) 2
3 ADD CHEMICALS/ DISINFECTANT/ SETTLING AGENT 3
4 BOIL AND FILTER BUT DO NOT ADD CHEMICALS 4
5 BOIL AND ADD CHEMICALS BUT DO NOT FILTER 5
6 FILTER AND ADD CHEMICALS BUT DO NOT BOIL 6
7 BOIL, FILTER AND ADD CHEMICALS 7

1 PRIVATE CONNECTION TO PIPELINE 1
2 PRIVATE WELL 2
3 PUBLIC TAPS/ STANDPIPE 3
4 PUBLIC WELL 4
5 NEIGHBORS 5
6 WATER VENDOR 6
7 SPRING 7
8 RIVER, STREAM, LAKE, POND 8
9 RAINWATER 9
10 OTHER (SPECIFY _____) 10
11 BOTTLED 11

2. In the dry season, is the main source of water for drinking and cooking for your household the same as is your main source in the rainy season?

- YES 1 (\Rightarrow 4)
NO 2

3. In the dry season, what is the main source of water for drinking and cooking for your household?

- 1 PRIVATE CONNECTION TO PIPELINE 1
2 PRIVATE WELL 2
3 PUBLIC TAPS/ STANDPIPE 3
4 PUBLIC WELL 4
5 NEIGHBORS 5
6 WATER VENDOR 6
7 SPRING 7
8 RIVER, STREAM, LAKE, POND 8
9 RAINWATER 9
10 OTHER (SPECIFY _____) 10
11 BOTTLED 11

6. In the rainy season, do you use the same main source of water for bathing and washing as you do for drinking and cooking in the rainy season?

- YES 1 (\Rightarrow 8)
NO 2

7. In the rainy season, what is the main source of water for bathing and washing for your household?

- 1 PRIVATE CONNECTION TO PIPELINE 1
2 PRIVATE WELL 2
3 PUBLIC TAPS/ STANDPIPE 3
4 PUBLIC WELL 4
5 NEIGHBORS 5
6 WATER VENDOR 6
7 SPRING 7
8 RIVER, STREAM, LAKE, POND 8
9 RAINWATER 9
10 OTHER (SPECIFY _____) 10

8. In the dry season, does your household use the same main source of water for bathing and washing as it does for drinking and cooking?

- YES 1 (\Rightarrow 11)
NO 2

4. Does your household treat your drinking water in any way?

- YES 1 (\Rightarrow 6)
NO 2

9. In the dry season does your household use the same main source of water for bathing and washing as it uses for drinking and cooking in the rainy season?

- YES 1 (\Rightarrow 11)
NO 2

10. In the dry season, what is the main source of water for bathing and washing for your household?

PRIVATE CONNECTION TO PIPELINE	1
PRIVATE WELL	2
PUBLIC TAP/STANDPIPE	3
PUBLIC WELL	4
VENDOR (TRUCK)	5
NEIGHBORS	6
SPRING	7
RIVER, STREAM, LAKE, POND...	8
RAINWATER	9
OTHER (SPECIFY _____)	10

14. Is this toilet or latrine used only by members of your household or do other household members use it as well?

THIS HOUSEHOLD ONLY 1
OTHER HOUSEHOLDS AS WELL 2

15. What is the main source of lighting in your dwelling?

ELECTRICITY	1
KEROSENE, OIL OR GAS LAMPS	2 (> 17)
CANDLES OR BATTERY FLASHLIGHTS	3 (> 17)
NO LIGHTING	4 (> 17)

16. How many hours a day on average was electricity available in your dwelling last month?

NUMBER OF HOURS

17. What fuel do you use most often for cooking?

GAS	1
ELECTRICITY	2
WOOD	3
COAL	4
KEROSENE	5
PEAT, MANURE	6
OTHER (SPECIFY _____)	7

18. Does your household heat your dwelling in winter?

YES 1
NO 2
(> 20)

19. How does your household heat your dwelling?

WATER RADIATORS-CENTRALIZED HOT WATER	1
WATER RADIATORS IN ROOMS FROM A GAS, COAL OR ELECTRIC BOILER WITHIN THE HOUSE	2
ELECTRIC HEATERS	3
COAL STOVE	4
WOOD STOVE	5
KEROSENE STOVE	6
STOVES FOR STRAW, BRUSH, MANURE, PEAT	7
OTHER (SPECIFY _____)	8

13. What disposal system is this toilet connected to?

SEWER SYSTEM	1
SEPTIC TANK	2
NONE/DISCHARGES TO SURFACE OR GROUNDWATER	3

20. How many months during the last 12 months was your dwelling heated?

NUMBER OF MONTHS

21. During how many of those months was your dwelling sufficiently warm?

NUMBER OF MONTHS

PART C: DWELLING EXPENDITURES

1. Is this dwelling owned by a member of your household?

YES 1
NO 2 (» 7)

2. Do you have legal title to the dwelling or any document that shows ownership?

YES 1
NO 2 (» 4)

3. What type of title is it?

FULL LEGAL TITLE, REGISTERED 1
LEGAL TITLE, UNREGISTERED 2
PURCHASE RECEIPT 3
OTHER 4

4. If you make installment payments for your dwelling, what is the amount of the installment?

WRITE ZERO IF THE HOUSEHOLD DOES NOT MAKE
INSTALLMENT PAYMENTS

AMOUNT (UNITS OF CURRENCY)
TIME UNIT
TIME UNIT

10. Does your household pay any of the rent by goods or services?

YES 1
NO 2 (» 12)

11. What is the approximate value of the goods and services paid by your household?

AMOUNT (UNITS OF CURRENCY)
PER TIME UNIT
PER TIME UNIT

5. If you sold this dwelling today how much would you receive for it?

AMOUNT (UNITS OF CURRENCY)
PER TIME UNIT
PER TIME UNIT

6. Estimate, please, the amount of money you could receive as rent if you let this dwelling to another person?

AMOUNT (UNITS OF CURRENCY)
PER TIME UNIT
PER TIME UNIT

»» QUESTION13

7. Do you rent this dwelling for goods, services or cash?

YES 1
NO 2 (» 13)

8. From whom do you rent this dwelling?

RELATIVE 1
PRIVATE EMPLOYER 2
STATE ENTERPRISE 3
STATE 4
PRIVATE PERSON/AGENCY 5

9. How much does your household pay in cash to rent this dwelling?

IF THEY DO NOT PAY, WRITE ZERO
AMOUNT (UNITS OF CURRENCY)
TIME UNIT
TIME UNIT

12. Does your rent include any of the following?

- a. Furniture
YES 1
NO 2
- b. Electricity
YES 1
NO 2
- c. Heating
YES 1
NO 2
- d. Water
YES 1
NO 2

How much did your household pay in the last month for the following services?

IF THE HOUSEHOLD DIDN'T PAY ANYTHING, WRITE ZERO

13. Centralized heating

14. Electricity

15. Gas

16. Coal

17. Oil

18. Wood

19. Other fuel

20. Water

21. Disposal of human excreta

22. Trash collection

23. Telephone

24. Apartment building fees

HOUSING MODULE (LONG VERSION)

Now I would like to ask you about your housing conditions. I mean by housing all the rooms and all separate buildings used by your household members. What buildings or rooms do the members of your household occupy?

PART A. DESCRIPTION OF THE DWELLING

1. Is this housing unit your household's primary (year round) place of residence?

PRIMARY RESIDENCE.....
SECONDARY RESIDENCE.....
 »INSTRUCTION

INSTRUCTION: I would now like to talk about your primary residence. In all the questions that follow, please give answers about your primary residence, not for the dwelling we are now in. INTERVIEWER: READ QUESTIONS 2-5 AND 7-9 ALoud.

2. WHAT IS THE MAJOR CONSTRUCTION MATERIAL OF THE EXTERNAL WALLS?

BRICK.....
CONCRETE PLATES.....
UNBAKED BRICK, ADOBE.....
WOOD, LOGS.....
TIN, ZINC SHEETING.....
FLATTENED TIN CANS.....
MUD.....
BAMBOO.....
CANVAS, FELT.....
OTHER (SPECIFY _____)

3. WHAT IS THE MAJOR MATERIAL OF THE ROOF?

CONCRETE.....
SHINGLES.....
ASBESTOS SHEETS.....
METAL SHEETS.....
TILE.....
WOOD.....
UNBAKED BRICKS (SAMAN).....
THATCH.....
OTHER (SPECIFY _____)

4. WHAT IS THE PRIMARY MATERIAL OF THE FLOOR?

PARQUET.....	1
PAINTED WOOD	2
TILE.....	3
LINOLEUM.....	4
CONCRETE.....	5
CLAY/EARTHEN FLOOR.....	6
OTHERS (SPECIFY _____)	7

5. WHAT TYPE OF DWELLING IS IT?

DETACHED HOUSE.....	1
MULTI-FAMILY HOUSE.....	2
SEPARATE APARTMENT.....	3
COMMUNAL APARTMENT.....	4
ROOM IN A LARGER DWELLING.....	5
SEVERAL BUILDINGS CONNECTED.....	6
SEVERAL SEPARATE BUILDINGS.....	7
IMPROVISED HOUSING UNIT	8
OTHER (SPECIFY _____)	9

6. How many dwelling units (including your own) are there in this building?

7. HOW MANY FLOORS ARE THERE IN THE BUILDING?
NUMBER OF FLOORS

8. WHICH FLOOR DOES THE HOUSEHOLD LIVE ON?
CODE BASEMENT = 0; GROUND FLOOR = 1, ETC.
LIST THE FLOOR WITH THE MAJORITY OF SPACE IN THE DWELLING

9. IS THERE AN ELEVATOR IN THE BUILDING?

YES	1
NO	2

(» 11)

10. How often does the elevator in this building work?
ALWAYS

CERTAIN HOURS EACH DAY	1
SOMETIMES	2
NEVER	3

OTHER (SPECIFY _____)

11. How many rooms do the members of your household occupy, including bedrooms, living rooms and rooms used for household enterprises?

DO NOT COUNT BATHROOMS, KITCHENS, BALCONIES AND CORRIDORS

NUMBER OF ROOMS

12. How many, if any, of these rooms are used primarily for family enterprise or trade?

WRITE ZERO IF ROOMS ARE NOT USED FOR BUSINESS OR TRADE

13. How many, if any, of these rooms are used primarily as bedrooms?

WRITE ZERO IF ROOMS ARE NOT USED FOR BEDROOMS

NUMBER OF ROOMS

14. What is the space of your dwelling including living and accessory rooms?

SQUARE METERS

15. How long has your household been living in this dwelling?

YEARS

16. In approximately what year was this dwelling built?

ASK THE RESPONDENT TO PROVIDE AN ESTIMATE IF UNSURE
OF THE EXACT YEAR

YEAR BUILT

PART B. HOUSING SERVICES

1. In the rainy season, what is the main source of water for drinking and cooking for your household?

- | | |
|-------------------------------------|----------|
| PRIVATE CONNECTION TO PIPELINE..... | 1 (» 3) |
| PRIVATE WELL..... | 2 |
| PUBLIC TAPS/ STANDPIPE | 3 (» 3) |
| PUBLIC WELL..... | 4 |
| NEIGHBORS..... | 5 |
| WATER VENDOR..... | 6 |
| SPRING..... | 7 |
| RIVER, STREAM, LAKE, POND..... | 8 |
| RAINWATER..... | 9 (» 8) |
| OTHER (SPECIFY _____) | 10 (» 8) |
| BOTTLED | 11 (» 4) |

2. How far is this source from your dwelling?

»» QUESTION 4

METERS:

3. How many hours per day is water available on average during the rainy season?

- | | |
|----------|----------|
| YES..... | 1 (» 10) |
| NO..... | 2 |

4. In the dry season, is the main source of water for drinking and cooking for your household the same as is your main source in the rainy season?

- | | |
|----------|---------|
| YES..... | 1 (» 8) |
| NO..... | 2 |

5. In the dry season, what is the main source of water for drinking and cooking for your household?

PRIVATE CONNECTION TO PIPELINE..... 1 (» 7)

- | | |
|--------------------------------|----------|
| PRIVATE WELL..... | 2 |
| PUBLIC TAPS/ STANDPIPE | 3 (» 7) |
| PUBLIC WELL..... | 4 |
| NEIGHBORS..... | 5 |
| WATER VENDOR..... | 6 |
| SPRING..... | 7 |
| RIVER, STREAM, LAKE, POND..... | 8 |
| RAINWATER..... | 9 (» 8) |
| OTHER (SPECIFY _____) | 10 (» 8) |
| BOTTLED | 11 (» 8) |

6. How far is this source from your dwelling?

»» QUESTION 8

METERS:

7. How many hours per day is water available on average during the rainy season?

- | | |
|----------|----------|
| YES..... | 1 (» 10) |
| NO..... | 2 |

8. Does your household treat your drinking water in any way?

- | | |
|---|---|
| BOIL IT (ONLY) | 1 |
| FILTER IT (ONLY) | 2 |
| ADD CHEMICALS/DISINFECTANT/SETTLING AGENT | 3 |
| BOIL AND FILTER BUT DO NOT ADD CHEMICALS | 4 |
| BOIL AND ADD CHEMICALS BUT DO NOT FILTER | 5 |
| FILTER AND ADD CHEMICALS BUT DO NOT BOIL | 6 |
| BOIL, FILTER AND ADD CHEMICALS..... | 7 |

10. In the rainy season, do you use the same main source of water for bathing and washing as you do for drinking and cooking in the rainy season?

- | | |
|----------|----------|
| YES..... | 1 (» 14) |
| NO..... | 2 |

11. In the rainy season, what is the main source of water for bathing and washing for your household?

- | | | |
|-------------------------------------|----------|--------------------------|
| PRIVATE CONNECTION TO PIPELINE..... | 1 (» 13) | <input type="checkbox"/> |
| PRIVATE WELL..... | 2 | <input type="checkbox"/> |
| PUBLIC TAPS/ STANDPIPE | 3 (» 13) | <input type="checkbox"/> |
| PUBLIC WELL..... | 4 | <input type="checkbox"/> |
| NEIGHBORS..... | 5 | <input type="checkbox"/> |
| WATER VENDOR..... | 6 | <input type="checkbox"/> |
| SPRING..... | 7 | <input type="checkbox"/> |
| RIVER, STREAM, LAKE, POND..... | 8 | <input type="checkbox"/> |
| RAINWATER..... | 9 (» 14) | <input type="checkbox"/> |
| OTHER (SPECIFY _____) | 10 | <input type="checkbox"/> |

12. How far is this source from your dwelling?

- | | | |
|--------------------------|---------|--------------------------|
| <input type="checkbox"/> | METERS: | <input type="checkbox"/> |
| » » QUESTION 14 | | |

13. How many hours per day is water available on average during the rainy season?

14. In the dry season, does your household use the same main source of water for bathing and washing as it does for drinking and cooking?

- | | | |
|----------|----------|--------------------------|
| YES..... | 1 (» 19) | <input type="checkbox"/> |
| NO..... | 2 | <input type="checkbox"/> |

15. In the dry season, does your household use the same main source of water for bathing and washing as it uses for bathing and washing in the rainy season?

- | | | |
|--------------------------|----------|----------|
| <input type="checkbox"/> | YES..... | 1 (» 19) |
| <input type="checkbox"/> | NO..... | 2 |

16. In the dry season, what is the main source of water for bathing and washing for your household?

- | | | |
|--------------------------|-------------------------------------|----------|
| <input type="checkbox"/> | PRIVATE CONNECTION TO PIPELINE..... | 1 (» 18) |
| <input type="checkbox"/> | PRIVATE WELL..... | 2 |
| <input type="checkbox"/> | PUBLIC TAPS/STANDPIPE..... | 3 (» 18) |
| <input type="checkbox"/> | PUBLIC WELL..... | 4 |
| <input type="checkbox"/> | VENDOR (TRUCK)..... | 5 |
| <input type="checkbox"/> | NEIGHBORS..... | 6 |
| <input type="checkbox"/> | SPRING..... | 7 |
| <input type="checkbox"/> | RIVER, STREAM, LAKE, POND..... | 8 |
| <input type="checkbox"/> | RAINWATER..... | 9 (» 19) |
| <input type="checkbox"/> | OTHER (SPECIFY _____) | 10 |

17. How far is this source of water from your dwelling?

- | | | |
|--------------------------|---------|--------------------------|
| <input type="checkbox"/> | METERS: | <input type="checkbox"/> |
| » » QUESTION 19 | | |

18. How many hours per day was water available on average in the dry season?

<input type="checkbox"/>	NUMBER OF HOURS
--------------------------	-----------------

19. What is the major source of hot water in your household?

- | | | |
|--------------------------|----------------------------|---|
| <input type="checkbox"/> | CENTRALIZED SUPPLY..... | 1 |
| <input type="checkbox"/> | GAS WATER HEATER..... | 2 |
| <input type="checkbox"/> | ELECTRIC WATER HEATER..... | 3 |
| <input type="checkbox"/> | COAL STOVE..... | 4 |
| <input type="checkbox"/> | WOOD STOVE..... | 5 |
| <input type="checkbox"/> | OTHER (SPECIFY _____) | 6 |
| <input type="checkbox"/> | NO HOT WATER..... | 7 |

20. Where do members of your household bathe?

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | INDOOR BATH/SHOWER FOR HOUSEHOLD ONLY..... | 1 |
| <input type="checkbox"/> | INDOOR BATH/SHOWER SHARED WITH OTHER HOUSEHOLDS..... | 2 |
| <input type="checkbox"/> | OUTDOOR BATH/SHOWER FOR HOUSEHOLD ONLY | 3 |
| <input type="checkbox"/> | OUTDOOR BATH/SHOWER SHARED WITH OTHER HOUSEHOLDS..... | 4 |
| <input type="checkbox"/> | PUBLIC BATHS..... | 5 |
| <input type="checkbox"/> | RIVER, POND, ETC. | 6 |
| <input type="checkbox"/> | OTHER (SPECIFY _____) | 7 |

21. What is the type of toilet that is used in your household?

FLUSH TOILET	1	<input type="text"/>
TRADITIONAL LATRINE	2 (> 24)	<input type="text"/>
VENTILATED IMPROVED PIT LATRINE	3 (> 24)	<input type="text"/>
BOWL/BUCKET	4 (> 24)	<input type="text"/>
OTHER (SPECIFY _____)	5 (> 24)	<input type="text"/>
NO TOILET	6 (> 27)	<input type="text"/>

22. How many flush toilets are in this dwelling?

23. What disposal system is this toilet connected to?

SEWER SYSTEM.....	1	<input type="text"/>
SEPTIC TANK.....	2	<input type="text"/>
NONE/DISCHARGES TO SURFACE OR GROUNDWATER.....	3	<input type="text"/>

24. Is this toilet or latrine used only by members of your household or do other household members use it as well?

THIS HOUSEHOLD ONLY	1 (> 26)	<input type="text"/>
OTHER HOUSEHOLDS AS WELL	2	<input type="text"/>

25. How many people currently use your household's toilet or latrine?

NUMBER OF PEOPLE	<input type="text"/>
240	<input type="text"/>

26. Do you have to go out of the dwelling to reach the toilet or latrine?

YES	1	<input type="text"/>
NO	2	<input type="text"/>

27. What is the main source of lighting in your dwelling?

ELECTRICITY	1	<input type="text"/>
KEROSENE, OIL OR GAS LAMPS	2 (> 30)	<input type="text"/>
CANDLES OR BATTERY FLASHLIGHTS	3 (> 30)	<input type="text"/>
NO LIGHTING	4 (> 30)	<input type="text"/>

28. Do you have an individual electric meter or do you share it with other persons?

JOINT METER.....	1	<input type="text"/>
INDIVIDUAL METER	2	<input type="text"/>

29. How many hours a day on average was electricity available in your dwelling last month?

<input type="text"/>	NUMBER OF HOURS
----------------------	-----------------

30. Does this unit have its own kitchen?

YES	1	<input type="text"/>
NO	2 (> 33)	<input type="text"/>

31. Is it inside or outside?

INSIDE.....	1	<input type="text"/>
OUTSIDE.....	2	<input type="text"/>

32. Does your household share the kitchen or do you have exclusive use of it?

EXCLUSIVE USE	1	<input type="text"/>
SHARE.....	2	<input type="text"/>

33. What fuel do you use most often for cooking?

GAS.....	1	<input type="text"/>
ELECTRICITY	2	<input type="text"/>
WOOD.....	3	<input type="text"/>
COAL.....	4	<input type="text"/>
KEROSENE.....	5	<input type="text"/>
PEAT, MANURE	6	<input type="text"/>
OTHER (SPECIFY _____)	7	<input type="text"/>

34. Does your household heat your dwelling in winter?

YES	1	<input type="text"/>
NO	2 (> 38)	<input type="text"/>

35. How does your household heat your dwelling?

- WATER RADIATORS/CENTRALIZED HOT WATER.....1
WATER RADIATORS IN ROOMS FROM A GAS.....
COAL OR ELECTRIC BOILER WITHIN THE HOUSE.....2
ELECTRIC HEATERS.....3
COAL STOVE.....4
WOOD STOVE.....5
KEROSENE STOVE.....6
STOVES FOR STRAW, BRUSH, MANURE, PEAT.....7
OTHER (SPECIFY _____).....8

41. How would you rate these problems?

- SEVERE PROBLEM, WOULD LIKE TO MOVE.....1
SERIOUS PROBLEM, BUT NOT ENOUGH
TO WANT TO MOVE.....2
MINOR, NOT MUCH OF A PROBLEM.....3

36. How many months during the last 12 months was your dwelling heated?

NUMBER OF MONTHS

37. During how many of those months was your dwelling sufficiently warm?

NUMBER OF MONTHS

38. Where is the nearest telephone that is used by the members of your household, is it...

- inside the dwelling?.....1
in the neighbor's house?.....2
in a public place
within 5 minutes walk from the dwelling?.....3
in a public place
more than 5 minutes from the dwelling?.....4
other (specify _____)?.....5
telephone not accessible?.....6

39. How does your household dispose of garbage?

- REFUSE CHUTE IN BUILDING.....1
COLLECTED BY TRUCK.....2
DUMPED.....3
BURNED.....4
BURIED.....5

40. Is the dwelling exposed to noise, odor or pollution problems?

- YES.....1
NO.....2

» NEXT PAGE

PART C: DWELLING EXPENDITURES

7. Do you have legal title to the dwelling or any document that shows ownership?

1. Is this dwelling owned by a member of your household?
YES
NO
1
2 (» 13)
2 (» 13)

2. How did your household obtain this dwelling?

- 1 PRIVATIZED
- 2 PURCHASED FROM A PRIVATE PERSON
- 3 NEWLY BUILT
- 4 COOPERATIVE ARRANGEMENT
- 5 SWAPPED
- 6 INHERITED
- 7 OTHER

3. How much did you pay for the unit?
AMOUNT:
YEAR:

4. If you make installment payments for your dwelling, what is the amount of the installment?

WRITE ZERO IF THE HOUSEHOLD DOES NOT MAKE
INSTALLMENT PAYMENTS

AMOUNT (UNITS OF CURRENCY)
TIME UNIT

5. In what year do you expect to make your last installment payment?

YEAR

6. Do you have legal title to the land or any document that shows ownership?
YES
NO
1
2 (» 26)

7. Do you have legal title to the dwelling or any document that shows ownership?

YES
NO
1
2 (» 9)

8. What type of title is it?

- 1 FULL LEGAL TITLE, REGISTERED
- 2 LEGAL TITLE, UNREGISTERED
- 3 PURCHASE RECEIPT
- 4 OTHER

9. Which household member(s) holds the title or document to this dwelling?

WRITE ID CODE OF THIS PERSON FROM THE ROSTER
1ST ID CODE:
2ND ID CODE:

10. Could you sell this dwelling if you wanted to?

YES
NO
1
2 (» 12)

11. If you sold this dwelling today how much would you receive for it?
AMOUNT (UNITS OF CURRENCY)

12. Estimate, please, the amount of money you could receive as rent if you let this dwelling to another person?
AMOUNT (UNITS OF CURRENCY)
PER TIME UNIT
»» QUESTION 28

13. Do you rent this dwelling for goods, services or cash?
YES
NO
1
2 (» 26)

- | | | | |
|-------------|-----------------|-------------------|--------------|
| TIME UNITS: | DAY | 3 MONTH | 6 YEAR |
| | WEEK | 4 QUARTER | 7 |
| | FORTNIGHT | 5 HALF YEAR | 8 |

14. From whom do you rent this dwelling?

RELATIVE.....
PRIVATE EMPLOYER.....
STATE ENTERPRISE.....
STATE.....
PRIVATE PERSON/AGENCY.....
DOES NOT KNOW.....

AMOUNT (UNITS OF CURRENCY)

21. Will any of this deposit be returned?

YES.....
NO.....

TIME UNIT
(> 24)

16. How much does your household pay in cash to rent this dwelling?

IF THEY DO NOT PAY, WRITE ZERO

AMOUNT (UNITS OF CURRENCY)

TIME UNIT

17. Does your household pay any of the rent by goods or services?

YES.....
NO.....

TIME UNIT
(> 19)

18. What is the approximate value of the goods and services paid by your household?

AMOUNT (UNITS OF CURRENCY)

PER TIME UNIT

19. Did you pay any deposit or up-front payment when you moved to this dwelling?

YES.....
NO.....

TIME UNIT
(> 24)

AMOUNT (UNITS OF CURRENCY)

20. How much was the deposit?

AMOUNT (UNITS OF CURRENCY)

21. If any of this deposit will be returned, how much will the amount be?
TIME UNIT

AMOUNT (UNITS OF CURRENCY)
TIME UNIT

23. If any of this deposit will be returned, how much will the amount be?

TIME UNIT
(> 24)

24. Does your rent include any of the following?

a. Furniture
YES.....
NO.....

TIME UNIT
(> 2)

b. Electricity
YES.....
NO.....

TIME UNIT
(> 2)

c. Heating
YES.....
NO.....

TIME UNIT
(> 2)

d. Water
YES.....
NO.....

AMOUNT (UNITS OF CURRENCY)
TIME UNIT
(> 24)

TIME UNIT
(> 24)

25. How much would a unit like this sell for in today's market?

TIME UNITS: DAY.....
WEEK.....
FORTNIGHT.....
MONTH.....
QUARTER.....
YEAR.....
HALF YEAR.....

26. Does any person who is not member of this household pay all or part of the rent or provide this housing free of charge? For example, a relative, private employer, governmental or public organization, private person or organization?

YES PAYS RENT¹
YES, PROVIDES DWELLING FREE OF CHARGE ..²
NO³ (> 28)

38. Trash collection
39. Telephone

27. Who pays part or all of the rent for this dwelling or provides this dwelling free of charge?

RELATIVE¹
STATE EMPLOYER²
PRIVATE EMPLOYER³
PUBLIC AGENCY⁴
PRIVATE PERSON/AGENCY⁵
OTHER⁶

40. Apartment building fees
41. Do you rent rooms or part of the dwelling to other people?

YES¹
NO² » PART D.

42. How many rooms do you rent out?

28. How much did your household pay in the last month for the following services?

IF THE HOUSEHOLD DIDN'T PAY ANYTHING, WRITE ZERO

29. Centralized heating
30. Electricity
31. Gas
32. Coal
33. Oil
34. Wood
35. Other fuel
36. Water
37. Disposal of human excreta

PART D. OPINIONS

1. In general, how satisfied are you with this housing unit?

VERY SATISFIED 1
SOMEWHAT SATISFIED 2
NOT SATISFIED 3

2. In general, how satisfied are you with this neighborhood as a place to live?

VERY SATISFIED 1
SOMEWHAT SATISFIED 2
NOT SATISFIED 3

PART E. PLANNED MOVES AND UPGRADES

1. Do you plan to move to another unit within the next 12 month?

YES, DEFINITELY 1
 YES, PROBABLY 2
 YES, POSSIBLY 3
 NO 4

» END OF MODULE

2. Why are you thinking of moving?

LARGER UNIT 1

SMALLER UNIT 2

CHEAPER UNIT 3

CHANGE IN HOUSEHOLD
(DEATH/DIVORCE) 4

CLOSER DISTANCE 5

SAFER/BETTER NEIGHBORHOOD 6

OTHER 7

3. Do you plan to buy or rent?

BUY 1
 RENT 2

» NEXT MODULE

Designing
Household Survey
Questionnaires for
Developing Countries

Lessons from 15 years of the
Living Standards Measurement Study

Edited by Margaret Grosh and Paul Glewwe

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