



| | | | | | | | | | |
|-------------------------|--|-----------------|------|------------|-------------|---------------|----------------|---|-----------------------|
| A Identification | | District | Ward | Zone | Urban/Rural | E.A. Number | Village Number | Household Number | CONFIDENTIAL/ IEKUNUN |
| Name of Village | | Principal Chief | | Area Chief | | Village Chief | | Name of household head Full name of household head | |
| | | | | | | | | Surname | |

| B For all persons | | | | | | | | | | | | | | |
|---|--|--|--|---|---|---|---|---|--|---|---|--|---|---|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| Who slept the Saturday Night (13 April) here? Write the names of all adults. <u>Children and babies include visitor and persons temporarily absent (on night duty, travel etc)</u> Exclude those in Lesotho but away for more than six months except for members in institutions <u>Exclude those away continuously from Lesotho for more than five years</u> | What is (name's) residential status? 1 Present 2 Visitor 3 Member elsewhere 4 Member in RSA 5 Outside Lesotho and RSA | If (name) is absent outside Lesotho where is s/he staying? NA not applicable 15 RSA 20 Swaziland 25 Botswana 30 Namibia 35 Zimbabwe 40 Zambia 45 Mozambique 50 Angola 55 Tanzania 60 Malawi 65 Other Africa 70 America 75 Asia 80 Europe 85 Other 90 Dk | If (name) is outside Lesotho. How long is (name) in the (country)? Note: Give duration since last visit. Home and if should not exceed 5 years NA Not Applicable for those in Lesotho Enter 0 for less than one year Total number of years lived outside for those away for more than a year 9 Don't Know | What is (name's) relationship to head of household? 1 Head 2 Spouse 3 Child 4 Son/daughter-in-law 5 grand grand child 6 parent/parent-in-law 7 Other relative 8 Domestic employee 9 Other person not related | Is (name) male or female? 1 male 2 female | How old was (name) on his/her last birthday? Enter age in completed years ('00' for children less than one year) 99 D.K | What is (name's) marital status? 1 never married 2 monogamously married 3 polygamously married 4 separated 5 divorced 6 widowed 9 don't know | Is (name's) first or only spouse alive? ask all those coded 2 to 6 in col 8 NA Not applicable 1 alive 2 not alive 9 DK | What is (name's) citizenship? 10 Lesotho 15 R S A 20 Swaziland 25 Botswana 30 Namibia 35 Zimbabwe 40 Zambia 45 Mozambique 50 Angola 55 Tanzania 60 Malawi 65 Other Africa 70 America 75 Asia 80 Europe 85 Other 90 Dk | Where was (name) born? 11 Same village/town 12 Different village/town same district Other districts 01 Butha-Buthe 02 Leribe 03 Bera 04 Maseru 05 Mafeteng 06 Mchale's Hoek 07 Quthing 08 Qacha's Nek 09 Mokitlong 10 Thaba-Tseka 11 RSA 12 Other Countries 13 Don't know | Where was (name) living in April 1996? NA For persons aged less than 10 years 11 Same village/town 12 Different village/town same district Other districts 01 Butha-Buthe 02 Leribe 03 Bera 04 Maseru 05 Mafeteng 06 Mchale's Hoek 07 Quthing 08 Qacha's Nek 09 Mokitlong 10 Thaba-Tseka 11 RSA 12 Other Countries 13 Don't know | If (name) has moved since 1996, for how long has (name) lived here? Enter number of years. Enter 00 for less than 1 year 99 Don't know | Is father of (name) alive? 1 Yes 2 No 9 Don't know | Is mother of (name) alive? 1 Yes 2 No 9 Don't know |
| | | | | | | | | | | | | | | |

| E Housing characteristics and household possessions | | | | | | | | | | | | | |
|--|---|-----------------------------------|-----------------|--|--|---|---|--|--|---|---|--|--|
| 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 |
| What is the tenure of the household? 1 owned 2 rented 3 not owned | Main type of house 1 Rontabile 2 Heisi 3 Polata 4 Lilene 5 Optaka 6 Apartment Houses 7 Other (specify) | Number and types of housing units | Number of Rooms | Main fuel for cooking 1 Electricity 2 Gas 3 Paraffin 4 Coal 5 Wood 6 Liso 7 Other (specify) | Main fuel for heating 1 Electricity 2 Gas 3 Paraffin 4 Coal 5 wood 6 Liso 7 Other | Main fuel for lighting 1 Electricity 2 Gas 3 Paraffin 4 Candle 5 Other (specify) | Main toilet facility 1 No toilet 2 Sewage system 3 Pit latrine 4 VIP 5 Bucket toilet 6 Public toilet 7 Other (specify) | What is the source of water for the household? 1 Piped water on premises 2 Piped water community supply 3 Catchment tank 4 Public Well 5 Private Well 6 Spring covered 7 Spring not covered 8 River 9 Other (specify) | Possession of radio 1 Yes 2 No | Fields 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> | Cattle 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> | Sheep 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> | Goats 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> |
| | | | | | | | | | | | | | |
| | | | | | | | | | | 45 Horses | 46 Donkeys | 47 Pigs | 48 Chicken |
| | | | | | | | | | | Yes <input type="checkbox"/> | 1 Yes <input type="checkbox"/> | 1 Yes <input type="checkbox"/> | 1 Yes <input type="checkbox"/> |
| | | | | | | | | | | 2 No <input type="checkbox"/> | 2 No <input type="checkbox"/> | 2 No <input type="checkbox"/> | 2 No <input type="checkbox"/> |

| C For all persons aged 5 years and over | | D For persons aged 10 years and above | | | | | | | | | | E For women aged 12 years and over | | | | | | | | | | | |
|--|--|---|---|--|---|--|------------------------|-----|--|---|--|---|-----|-----|---|--|--|-----|-----|--|----|----|--|
| 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | | 24 | 25 | 26 | 27 | | | 28 | | 29 | 30 | | | | | |
| What is (name's) highest level of education completed? (e.g. 01 = Standard 1, 02 = Standard 2 etc) | What is (name's) employment status during last week? (NA Not applicable, 10 Employer, 20 Own account worker/farmer, 31 Regular wage/salary earner, 40 Unpaid family worker, 50 Job seeking first time, 60 Homemaker/bousewife, 70 Retired, 80 Student, 90 Disabled, 95 Other, 99 Don't know) | What was (name's) employment status during last week? (NA Not applicable, 10 Employer, 20 Own account worker/farmer, 31 Regular wage/salary earner, 40 Unpaid family worker, 50 Job seeking first time, 60 Homemaker/bousewife, 70 Retired, 80 Student, 90 Disabled, 95 Other, 99 Don't know) | If job seeking (code 50 in col 18), what was (name's) employment status 12 months ago i.e. in April 1995? (NA Not Applicable, 10 Employer, 20 Own account worker/farmer, 31 Regular wage/salary earner, 40 Unpaid family worker, 50 Job seeking first time, 60 Homemaker/bousewife, 70 Retired, 80 Student, 90 Disabled, 95 Other, 99 Don't know) | If employed last week, who was (name's) employer? (Codes 10 to 40 in col 18) | What was (name's) last type of work done? Ask all those coded 10 to 50 in column 18 (Remember to ask only those jobseeking for less than 5 years) | What was (name's) main product/service/activity of place of work | Location of Employment | | Has (name) ever or presently working in RSA? | If (name) ever worked in RSA, how long has s/he worked? (NA Not applicable, 00 If less than 1 year) | Has (name) given any live birth? (NA If male or under 12 years, 00 if NO, If YES: How many children were born alive to (name) altogether?) | Categorize number of children according to the status given below | | | When was (name's) last live birth? (NA Not applicable, Enter month (mm) and year (yy), 99 Don't Know) | What was the sex of the last live birth? (Include those who were born alive and died afterwards) (NA Not Applicable, 1 Male, 2 Female, 9 Don't know) | Is the child still alive? (NA Not Applicable, 1 alive, 2 Dead, 9 Don't know) | | | | | | |
| | | | | | | | 231 | 232 | | | | 271 | 272 | 273 | 274 | 275 | 276 | 281 | 282 | | 29 | 30 | |
| | | | | | | | | | | | | | | | | | | | | | | | |

Deaths of household members during past 12 months that is, since April 1995

49

Did death occur in the household in the last 12 months? (Tick where appropriate) 1 Yes 2 No If Yes

| No | Was the deceased male or female? | How old was the deceased? Age in completed years. Enter 00 for age less than 1 year | For women aged 12-49 years and for deaths other than from an accident: Did she die while pregnant, giving birth or within/about 1 month after giving birth? (NA Not Applicable, 1 Yes, 2 No, 9 Don't know) |
|----|----------------------------------|---|--|
| | 1 Male 2 Female | | |
| | | | |
| | | | |
| | | | |



If the Household continues on the next page tick here

Schedule No.:

Enumerator:

Date:

Supervisor:

Date:

| For Office Use only | Total B/F | | This Household | | Total C/F | |
|-----------------------------|-----------|--------|----------------|--------|-----------|--------|
| | Male | Female | Male | Female | Male | Female |
| Member Present | | | | | | |
| Visitors | | | | | | |
| Member elsewhere in Lesotho | | | | | | |
| Member outside Lesotho | | | | | | |