Young Lives *8yr old Household Questionnaire* *Peru*	*Section Number:* C8__ __ *(SECTCODE)*	*Child ID:* *PE - __ __ - 8 - __ __ __* *(CHILDID)*

Enrolment Section

Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
Date section started	__ __ / __ __ / __ __	FINI
Time section started	__ __ : __ __	HINI
Fieldworker code	__ __	STAFCODE
Who answers this section? (use code from Household roster	__ __	ID

E1	Confirm that there is an eligible 7.5 to 8.5yr old child in the household?	[ ]$_1$ Yes [ ]$_2$ No	BABYHH
E2	**If there is more than one eligible child use the selection list provided. If there is no eligible child, thank the respondent and end the interview**		
E3	What is his/her full name? ENTER FIRST NAME: _____ ENTER PATERNAL NAME: _____ ENTER MATERNAL NAME: _____		CHLDFST CHLDSUR CHLDLST
E4	Does he/she have a nickname?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_9$ NK	NICKNME
E5	If so, what is it? _____		WHATNICK
E6	On what date was NAME born?	__ __ / __ __ / __ __ d d / m m / y y	DOBD DOBM DOBY
E6a	Is the date of birth documented?	[ ]$_1$ Yes birth certificate/register [ ]$_2$ No, no document [ ]$_3$ Yes, health card [ ]$_4$ Other	DOCFN
E7	Is NAME male or female	[ ]$_1$ Male [ ]$_2$ Female	SEX

E8	Who in the household can best answer questions about NAME's health and activities? ENTER FIRST NAME: _____ ENTER SURNAME: _____		CAREFST CARESUR
	What is the relationship to the child?	_____	CAREPAR
E9	Is this the person who:		
E9a	Decides what NAME does with their time?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	CHLDEAT
E9b	Decides about NAME's schooling?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	CHLDCAR
E9c	Decides what to do if NAME is ill?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	CHLDILL
E9d	Has the main responsibility for looking after NAME, e.g. preparing meals, dressing?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	CHLDLOK
E10	Is NAME OF PRIMARY CAREGIVER at home at the moment?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	CAREHOME
E11	Physical address of household		PLACNAME
	Description of address		PLACREFE
E12	Do you have a postal address where letters or packets can be sent to you?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	TIENPOS
E12a	Same address as the house	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	DCVIV

E12.b	In travel agency/terminus	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	DCAT
	Specify travel agency:_____		SPECAT
E12.c	In post office	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	DCOC
	Specify post office:_____		SPECOC
E12.d	In house of friends or relatives	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	DCPA
	Specify friends or relatives:_____		SPECPA
E12.1	Telephone number	_____	TELEF
	Who does the phone belong to?	_____	TELAQ
	Relationship to YL household	_____	TELREL

Visit #	Date	Reason for not finding primary caregiver
1	Day / month / year __ __ / __ __ / __ __ DATEVIS1	REASMIS1
2	__ __ / __ __ / __ __ DATEVIS2	REASMIS2
3	__ __ / __ __ / __ __ DATEVIS3	REASMIS3

E12.2	Final result of enrolment	[ ]₁ Accepts, signs consent form [ ]₂ Mother refused [ ]₃ Father refused [ ]₄ Mother and father refused [ ]₅ Other, specify: _____ [ ]₉ NK	RFENR RFSPEC

E12.3	Appointment for interview		
a) Immediate	1) Date	__ __ / __ __ / __ __	CITENT
	2) Time	__ __ : __ __	HORCIT
b) Other day	1) Date	__ __ / __ __ / __ __	OTRENT
	2) Time	__ __ : __ __	HOROTR
E12.4	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

Young Lives *8yr old Household Questionnaire* *Peru*	*Section Number:* *C8__ __* *(SECTCODE)*	*Child ID:* *PE - __ __ - 8 - __ __ __* *(CHILDID)*	

Identification Section

1.	Sentinel Site Number	__ __	CLUSTID
1a	Child Number	__ __ __	CHLDNRO
1b	District	_____	UBIGEO
1c	City	_____	CIUDAD

2	Start of interview Name of fieldworker: _____	Code: __ __	STAFCODE
3	Date of Start of interview	__ __ / __ __ / __ __	DINT
2a	End of interview Name of fieldworker: _____	Code: __ __	STAFCODE2
3a	Date of end of interview	__ __ / __ __ / __	DFINT
4	Name of supervisor: _____	Code: __ __	SUPCODE
4a	Date of supervisor check	__ __ / __ __ / __	SUPRDATE
5	Name of data entry clerk: _____	Code: __ __	DATACODE
5a	Date of data entry	__ __ / __ __ / __	DEDATE

Section 1: Locating Information

	Household ID	PE - __ __ - __ __ __ - __ __ __ __	HOGARID
1.0.1	Date section started	__ __ / __ __ / __ __	FINI
1.0.2	Time section started	__ __ : __ __	HINI
1.0.3	Fieldworker code	__ __	STAFCODE
1.0.4	Who answers this section? (use code from Household roster	__ __	ID

1.1	You told me your child was called NAME OF CHILD, I just want to check that this is correct		
	ENTER FIRST NAME: _____		CKCHFST
	ENTER SURNAME: _____		CKCHSUR
1.2	Can you please tell me your full name?		
	ENTER FIRST NAME: _____		CKCRFST
	ENTER SURNAME : _____		CKCRSUR
1.2a	Identity document number	_____	DNI

1.2.b	Is the information documented	[ ]₁ Yes [ ]₂ No/did not want to [ ]₃ Without documents [ ]₄ Lost/stolen/etc.	DNIDOC
1.2.c	Military card	_____	LM
1.2.d	Is the information documented?	[ ]₁ Yes [ ]₂ No/did not want to [ ]₃ Without documents [ ]₄ Lost/stolen/etc.	LMDOC
1.3	What is your relationship to NAME?	[ ]₁ Biological mother [ ]₂ Grandparent [ ]₃ Sibling [ ]₄ Biological father [ ]₅ Aunt/Uncle [ ]₆ Stepmother/father [ ]₇ Other: _____ [ ]₉ NK	RELCARE SPECARE
1.3.a	Is the respondent the biological mother?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	RMBIO
1.3.b	Enter name of mother: _____		MOTHFST
	Enter surname of mother: _____		MOTHSUR
1.3.c	National Identity card of mother	_____	MOTHDNI
1.3.d	Is the information documented?	[ ]₁ Yes [ ]₂ No/did not want to [ ]₃ Without documents [ ]₄ Lost/stolen/etc.	MOTHDNID
1.3.e	Military card	_____	MOTHLM
1.3.f	Is the information documented?	[ ]₁ Yes [ ]₂ No/did not want to [ ]₃ Without documents [ ]₄ Lost/stolen/etc.	MOTHLMD
1.4	Where does the mother live?	[ ]₁ Not in the household [ ]₂ In the household [ ]₃ Mother dead [ ]₉ NK	MOMLIVE
	Address of mother (if different)		MOTHDIRE

	Description of the address of the mother		MOTHREFE
1.5	In the last 6 months how frequently have you his mother seen him/her?	[ ]₁ Daily [ ]₂ Weekly [ ]₃ Monthly [ ]₄ Less than monthly [ ]₅ Never in last 6 months [ ]₈ N/A [ ]₉ NK	SEEMOM

3.19	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

		Young Lives 8yr old Household Questionnaire Peru	Section Number: C8__ __ (SECTCODE)	Child ID: PE - __ __ - 8 - __ __ __ (CHILDID)

Section 2: Household Composition

		Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
	2.0.1	Date section started	__ __ / __ __ / __ __	FINI
	2.0.2	Time section started	__ __ : __ __	HINI
	2.0.3	Fieldworker code	__ __	STAFCODE
	2.0.4	Who answers this section? (use code from Household roster	__ __	ID

2.0.5	Civil state of mother or guardian?	[ ]$_1$ Married [ ]$_2$ Living together [ ]$_3$ Divorced [ ]$_4$ Separated [ ]$_5$ Widowed [ ]$_6$ Single [ ]$_8$ N/A [ ]$_9$ NK	PARTNER1
2.1	Do you have a stable partner (mother/legal guardian)?	[ ]$_1$ Yes stable partner [ ]$_2$ Divorced/separated [ ]$_3$ No, single [ ]$_4$ Widow [ ]$_8$ N/A [ ]$_9$ NK	PARTNER
2.2	Does your partner live in the household?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	PARTLIVE
2.3	Who do you consider to be the head of this household?	[ ]$_1$ Myself [ ]$_2$ Partner [ ]$_3$ Other, specify _____ [ ]$_8$ N/A [ ]$_9$ NK	HEAD SPECHEAD
	Why do you consider this person to be the head of the household?	_____	
2.4	In total how many people live in the household?	__ __	HHSIZE

2.5.1 ID ID	2.5.2a What are their names? NAMEFST	2.5.2b What are their surnames? NAMESUR	2.5.2c Permanence in the household – in the last 12 months How many months PERMAN	Days per month PERDIAS	2.5.3 Age in complete years AGE	2.5.4 Sex 1=Male 2=Female SEX	2.5.2 Relationship to NAME – see code box below RELATE SPECREL	2.5.6 Currently in school? 1=Yes 2=No STILL	2.5.7 Level of schooling? See code box below Level YRSCHOOL	Grade GRADO	Years ANHOS	2.5.8 Does anyone have a chronic illness or incapacity which limits their daily activities? 1=Yes 2=No DISABLED	2.5.10 Helped support NAME financially? 1=Yes 2=No SUPPORT
01													
02													
03													
04													
05													
06													
07													
08													
09													

Young Lives 8yr old Household Questionnaire Peru	Section Number: C8__ __ (SECTCODE)	Child ID: PE - __ __ - 8 - __ __ __ (CHILDID)

2.5.1 ID	2.5.2a What are their names?	2.5.2b What are their surnames?	2.5.2c Permanence in the household – in the last 12 months		2.5.3 Age in complete years	2.5.4 Sex 1=Male 2=Female	2.5.2 Relationship to NAME – see code box below	2.5.6 Currently in school? 1=Yes 2=No	2.5.7 Level of schooling? See code box below			2.5.8 Does anyone have a chronic illness or incapacity which limits their daily activities? 1=Yes 2=No	2.5.10 Helped support NAME financially? 1=Yes 2=No
			How many months	Days per month					Level	Grade	Years		
ID	NAMEFST	NAMESUR	PERMAN	PERDIAS	AGE	SEX	RELATE SPECREL	STILL	YRSCHOOL	GRADO	ANHOS	DISABLED	SUPPORT
10													
11													
12													
13													
14													

Codes for Schooling levels	00=None	03=Primary	06=Technical college (completed)	77=Other
	01=Nursery	04=Secondary	07=University (incomplete)	88=N/A
	02=Still in 1st grade	05=Technical college (incomplete)	08=University (complete)	99=NK

Young Lives 8yr old Household Questionnaire Peru	Section Number: C8__ __ (SECTCODE)	Child ID: PE - __ __ - 8 - __ __ __ (CHILDID)

Codes for relationships with index child	01=Biological parent	04=Uncle/Aunt	07=Domestic servant	10=Half-sibling	
	02=Partner of biological parent	05=Brother/sister	08=Lodger	11=Brother/sister-in-law	
	03=Grandparent	06=Cousin	09=Nephew/Niece	13=Other	99=NK

2.6.1 ID	2.6.2a What are their names?	2.6.2b What are their surnames?	2.6.2c Permanence in the household – in the last 12 months		2.6.3 Sex 1=Male 2=Female	2.6.4 Age in complete years	2.6.5 Birthday?		2.6.6 Relationship to NAME – see code box above	2.6.7 Does anyone have a chronic illness or incapacity which limits their daily activities? 1=Yes 2=No	2.6.8 Does the child attend preschool or kindergarten? 1=Preschool, kindergarten 2=No 3=playschool or crèche 4=wawa wasi 5=Other
			How many months	Days per month							
ID	NAMEFST	NAMESUR	PERMAN	PERDIAS	SEX	AGE	HBDAY	HBMON	RELATE SPECREL	DISABLED	EDINICIA
15											
16											
17											
18											
19											
20											

2.7	FIND THE NAME OF THE CAREGIVER IN THE ROSTER AND ENTER THEIR ROSTER ID	__ __	CAREID
2.8	Which of the people listed if the head of the household? FIND THE NAME IN THE ROSTER AND ENTER THE ROSTER ID OF THE HEAD	__ __	HEADID
2.8a	Does the mother have a partner/spouse living in the home?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	TIEPAR
2.9	Which of the people listed is your husband/partner? FIND THE NAME IN THE ROSTER AND ENTER THE ROSTER ID OF THE PARTNER	__ __	PARTID
2.9a	Is the biological father in the list	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	PADRLIS
2.10	Where does the child's biological father live?	[ ]$_1$ Not in the household [ ]$_2$ Father dead [ ]$_8$ N/A [ ]$_9$ NK	DADDEAD
2.10.1	In the last 6 months how often has the child's biological father seen him/her?	[ ]$_1$ Daily [ ]$_2$ Weekly [ ]$_3$ Monthly [ ]$_4$ Less than monthly [ ]$_5$ Never in the last 6 months [ ]$_8$ N/A [ ]$_9$ NK	SEEDAD

2.11	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

Young Lives *8yr old Household Questionnaire* *Peru*	Section Number: C8__ __ *(SECTCODE)*	Child ID: PE - __ __ - 8 - __ __ __ *(CHILDID)*	

Section 3: Births and Deaths

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
3.0.1	Date section started	__ __ / __ __ / __ __	FINI
3.0.2	Time section started	__ __ : __ __	HINI
3.0.3	Fieldworker code	__ __	STAFCODE
3.0.4	Who answers this section? (use code from Household roster	__ __	ID

3.a	When you became pregnant with NAME did you want to get pregnant at the time?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	WANTCLD
3.b	Where was NAME born?	[ ]$_1$ Home [ ]$_2$ Hospital [ ]$_3$ Other health facility [ ]$_4$ Other, specify [ ]$_8$ N/A [ ]$_9$ NK ✎_____	BPLACE BRTHSPEC
3.c	Where was NAME born?	[ ]$_1$ in this district [ ]$_2$ in another district of the same province [ ]$_3$ in another province of the same department [ ]$_4$ in another department of the coast [ ]$_5$ in another department of the highlands [ ]$_6$ in another department of the jungle [ ]$_7$ another country [ ]$_9$ NK ✎_____	DONDEN DONDESPEC
3.d	Was NAME born by caesarean?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_9$ NK	CSECT
3.e	Are you NAME's biological mother?	[ ]$_1$ Yes [ ]$_2$ No	BIO1
3.f	Did you (the mother) want NAME to be a boy or a girl?	[ ]$_1$ Boy [ ]$_2$ Girl [ ]$_3$ I didn't mind [ ]$_8$ N/A [ ]$_9$ NK	WHICHSEX
3.g	Did you breast feed NAME?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_9$ NK	EVERBFED

3.1	Including NAME how many children have you had who were born alive? *(enquire for babies which cried after birth or showed some sign of life but died after a few hours or days of being born. Include index child)*	__ __	CHDBORN
3.1.1	Have you ever had a miscarriage or an abortion? *(if yes, note number)* 0=no, none	__ __	ABORTO
3.2	Of all your live born children how many were boys?	__ __	BOYBORN
3.3	How many in total were girls?	__ __	GRLBORN
3.4	How many children were born before NAME?	__ __	ORDER
3.5	Including NAME, how many children are still alive? *(ask about children who do not live at home)*	__ __	CHDALIVE
3.6	Fieldworker, calculate how many children died	__ __	BRCHK
3.7	Of the children who died, how many died before they reached the age of 5yrs?	__ __	CHLDEAD1
3.8	Would you like to have more children at some time?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	DESEOHIJ

3.19	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

Section 4: Child's School

		Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
	4.0.1	Date section started	__ __ / __ __ / __ __	FINI
	4.0.2	Time section started	__ __ : __ __	HINI
	4.0.3	Fieldworker code	__ __	STAFCODE
	4.0.4	Who answers this section? (use code from Household roster	__ __	ID

4.1	Has NAME ever gone to primary school?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	EVERSCH
4.1.1	How old was NAME when he/she first went to primary school? (answer in completed years)	__ __	SCHSTART
4.1.3	What was the highest grade NAME completed at primary school? 0 = still in 1st grade, none, 8=N/A, 9=NK	__ __	SCHIGH
4.2	At the present time does NAME attend school?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	SCHNOW
4.3	What is the main reason NAME does not go to school?	[ ]1 The monthly cost is expensive [ ]2 The uniform, books are expensive [ ]3 The transport is expensive [ ]4 It's too far away [ ]5 Child play truant or refuses to go to school [ ]6 Child has been expelled [ ]7 Fear of teachers or other pupils who beat him/her [ ]8 The school is poor quality [ ]9 Disability [ ]10 In order to help the family [ ]11 Other, specify [ ]88 N/A [ ]99 NK ✎_____	SCHWHY SPCSCH
4.3a	What grade is NAME in at the moment?	__ __	ACTGRADO
4.4	Is it a state school or a private school?	[ ]1 Public [ ]2 Private [ ]8 N/A [ ]9 NK	SCHTYP
4.4a	What is the name of the school?	✎_____	CENOMB

4.4b	Apart from this name does it have any other name or number?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	OTRNOMB
4.4.c.a	What is this name?	✍_____	CUALNOMB
4.4.c.b	What is its number?	✍_____	CUALNUM

4.4.d	What is the address of the school?
	             Department ✍_____
	             Province ✍_____
			CEDIRE
			
			CEDIREFE

4.4.e	Is the information about the school and the address in the school report?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	CEDIRED

4.4.f	Note down the main comments in the school report book		
	Main Comments (behaviour, marks/notes/grades, payments, complaints, etc.)	[ ]₁ Teacher [ ]₂ Parent [ ]₃ Auxiliary/assistant	
LINEID	SPECMEN	WHO	
1.		——	
2.		——	
3.		——	
4.		——	
5.		——	

4.4.g	What is the name of the head teacher of the school?	✍_____	DIRECTOR

4.4.1	Now I would like you to answer the following questions about NAME's school and his/her teachers		
No.	**Aspect**	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	
1.	Does the teacher do a good job of teaching?	__	ASPECTO1
2.	Does the teacher often miss classes?	__	ASPECTO2
3.	Is the relationship between the teachers and the pupils good, do they get on well together?	__	ASPECTO3
4.	Does the teacher keep the parents informed about how their children are getting on/achieving?	__	ASPECTO4
5	Does the headmaster/mistress do a good job?	__	ASPECTO5
6	Does the parent association administer the money they collect well?	__	ASPECTO6

4.4.2	Are you happy with the education your child is receiving?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	EDRECIBE
4.4.3	Why? Note what is said?	✍_____	PORQUE

4.4.4	If you could, would you change NAME to another school?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	ESCAMBIO

4.4.5	In which of the following school activities have you, the mother, the child's caretaker, or the father participated?		
No.	Activity	Participated? [ ]₁ Yes [ ]₂ No [ ]₃ Does not happen [ ]₈ N/A [ ]₉ NK	
1	Work days for the school: building, repair, cleaning, etc.	—	PARTICI1
2	Meetings of the parents association	—	PARTICI2
3	Group meetings (parents association) with NAME's teacher	—	PARTICI3
4	Individual meetings with NAME's teacher	—	PARTICI4
5	School parties	—	PARTICI5
6	Fund raising activities	—	PARTICI6

4.4.6	Who mostly helps NAME with his/her homework?	[ ]₁ Father [ ]₂ Mother [ ]₃ Caretaker [ ]₄ Older siblings [ ]₅ Other family members [ ]₆ Other adults (not family) [ ]₇ Other	QAYUDA
4.4.7	How would you rate NAME's school (educational) performance?	[ ]₁ Good [ ]₂ Average [ ]₃ Bad [ ]₈ N/A [ ]₉ NK	CALIFICA

4.4.9	What are the three most frequent reasons why NAME misses school? Choose from the options below		
		__ __	FALTA1
		__ __	FALTA2
		__ __	FALTA3

Codes for reasons for missing school

01 = Illness	04 = Lack of interest	07 = The school is a long way away	22 = Never missed school
02 = Bad weather	05 = Helping at home (cooking, washing, etc.)	08 = Travelling (away from home)	88 = N/A
03 = Working	06 = Looking after siblings	09 = Other	99 = NK

4.4.10	How far away is the school and how long does it take NAME to get there?		
	Kilometres	__ __ __	DISTANK
	Hours	__ __	DISTANH
	Minutes	__ __	DISTANM
4.4.11	How does NAME get from home to the school?	1=Yes, 2=No, 8=N/A, 9=NK	
1	Walking	__	TRANSPOR1
2	By bicycle	__	TRANSPOR2
3	By bus	__	TRANSPOR3
4	By van, car	__	TRANSPOR4
5	By lorry	__	TRANSPOR5
6	On horseback, donkey, mule	__	TRANSPOR6
7	Other, specify ✐_____	__	TRANSPOR7 SPECTRAN

4.4.12	Since NAME started this school year how much have you spent on the following:	

(Fieldworker: the purpose of this question is to estimate the total amount the parents have spent on the child's schooling. In the column "amount" give the amount in soles which the parents have spent on each item from the beginning of the school year to the present. In the next column note how they pay. If the payment is irregular put code 09=annual. In the column 4.4.12 note the amount left to pay during the rest of the school year so that the sum of the columns should give the total for the whole year. If the parents make a sole payment for the year put the amount in the left hand column, annual in the payment method and 0 in the right hand column.)

No.		Amount in soles	Method of payment – e.g. annual, monthly, etc.	How much more will you have to pay between now and the end of Dec
	LINEID	EDMONTO	EDTIEMPO	EDGASTO
1	Parents association	__ __ __ __	__ __	__ __ __ __
2	Matricula (excluding APAFA)	__ __ __ __	__ __	__ __ __ __
3	Regular monthly payments (e.g. to pay/contract the teachers)	__ __ __ __	__ __	__ __ __ __
4	Books, texts, notebooks, pencils and other supplies	__ __ __ __	__ __	__ __ __ __
5	School uniform (any type including school uniform, games kit, etc.)	__ __ __ __	__ __	__ __ __ __
6	School meals, break	__ __ __ __	__ __	__ __ __ __
7	Payments to classroom committee, fines, etc.	__ __ __ __	__ __	__ __ __ __
8	Transport (fares, school bus, etc.)	__ __ __ __	__ __	__ __ __ __
9	Photocopies	__ __ __ __	__ __	__ __ __ __
10	Special expenses (School anniversary, teachers' day, mothers day)	__ __ __ __	__ __	__ __ __ __
11	Others, specify: ✎_____ SPECEDU	__ __ __ __	__ __	__ __ __ __

Codes for payment method			
01 = Hourly	04 = Fortnightly	07 = Quarterly	88 = N/A
02 = Daily	05 = Monthly	08 = 6 monthly	99 = NK
03 = Weekly	06 = 2 monthly	09 = Annually	

4.4.13	How many hours each day does NAME spend at school?	__ __	HORAESC
4.4.14	How many hours each day does NAME spend doing homework/studying at home?	__ __	HORESCA
4.4.15	Does he/she have school lunch/break at school (breakfast/lunch/snack)?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	DESAESC
4.4.16	How many days a week does he/she have breakfast/lunch/snack at school?	__ __	DESADIAS
4.4.17	Did NAME go to a preschool (kindergarten, nursery, etc.)?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	ASISTCEI

4.4.17a	What sort of preschool?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	
1	State preschool	__	ASISTIO1
2	Parish or private preschool	__	ASISTIO2
3	PRONOEI (government programme)	__	ASISTIO3
4	Attended one but doesn't know what type/what it is called	__	ASISTIO4

4.4.18	How old was NAME when he/she first went to a preschool?	__	ASISEDAD
4.5	In the last 6 months what is the principal activity NAME has done to enjoy him/herself?	__ __	FUN
	Other, specify:	✎_____	SPCFUN

Codes for fun activities

01 = Plays with friends outside the house		02 = Plays with friends inside the house	03 = Plays with toys
04 = Does sport		05 = Watches television	06 = Plays on the computer
07 = Reads	08 = Writes/draws	09 = Helps parents	10 = Visits family
11 = None		12 = Other	99 = NK

4.12	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

Section 5: Child Health

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
5.0.1	Date section started	__ __ / __ __ / __ __	FINI
5.0.2	Time section started	__ __ : __ __	HINI
5.0.3	Fieldworker code	__ __	STAFCODE
5.0.4	Who answers this section? (use code from Household roster	__ __	ID

5.1	Compared to other children of this age would you say NAME's health is the same, better or worse?	[ ]₁ Same [ ]₂ Better [ ]₃ Worse [ ]₉ NK	HEALTHY
5.2	Has NAME been ill in the last two weeks?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	EVRMORB
5.3	If yes, what was this accident or illness? (Insert codes from Code Box 2 below)		
5.3.1	Serious illness 1 **ENTER CODE FROM BOX 1**	__ __	ILL2WK1
	If other, specify:	✎_____	ILWKSPC1
5.3.2	Serious illness 2 **ENTER CODE FROM BOX 1**	__ __	ILL2WK2
	If other, specify	✎_____	ILWKSPC2

Code Box 1: Illnesses in the last two weeks

01 = High fever/malaria	05 = Anaemia	09 = Flu	
02 = Pneumonia/severe cough	06 = Tummy ache/diarrhoea	10 = Evil spirits, air, cold	
03 = Fits/epilepsy	07 = Headache	11 = Other	
04 = Skin disease	08 = Malnutrition	88 = N/A	99 = NK

5.4	Does NAME have any long term health problems that affect how they make friends or play?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	HPFRIEND
5.5	What is the problem? **ENTER CODE FROM BOX 2**	__ __	ILFRIEND
	If other, specify	✎_____	ILFRSPEC

5.6	Does NAME have any long term health problems that affect how they attend school or work?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	HPWORK
5.7	What is the problem? **ENTER CODE FROM BOX 2**	__ __	ILLPLAY
	If other, specify	✎_____	ILPLSPEC
5.8	Does NAME have any other long term health problem?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	HPOTH
5.9	What is the problem? **ENTER CODE FROM BOX 2**	__ __	TIENFER
	If other, specify	✎_____	TIENFSPC

Code Box 2 : Long term health problems

01 = Physical disability	04 = Skin problems	07 = Asthma/respiratory problems	10 = Other
02 = Mental disability	05 = Anaemia	08 = Congenital illness	88 = N/A
03 = Fits/epilepsy	06 = HIV/AIDS	09 = Fright, spells	99=NK

5.10	In the last three years has NAME had any serious illness or injuries when you REALLY though they might die?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	MIGHTDIE
5.11	What were the illnesses/injuries		
5.11.1	Serious illness 1: **ENTER CODES FROM BOX 3**	__ __	ILLNESS1
	If other, specify	✎_____	ILL1SPEC
5.11.2	Was NAME taken for treatment for this illness or injury?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	ILL1TRT
5.11.2a	Was NAME hospitalised for this illness or injury?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	ILL1HOSP
5.11.3	Serious illness 2: **ENTER CODES FROM BOX 3**	__ __	ILLNESS2
	If other, specify	✎_____	ILL2SPEC
5.11.4	Was NAME taken for treatment for this illness or injury?	[ ]1 Yes [ ]2 No [ ]8 N/A	ILL2TRT

		[ ]9 NK	
5.11.4a	Was NAME hospitalised for this illness or injury?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	ILL2HOSP

Code Box 3 : Serious illness/injury

01 = Malaria/high fever	04 = Suffocation	07 = Quemaduras	10 = Other
02 = Pneumonia/severe cough	05 = Casi se Ahoga	08 = Asthma/respiratory problems	88 = N/A
03 = Fits/epilepsy	06 = Traffic accident	09 =	99=NK

5.12	In the last year has NAME had toothache so severe they couldn't eat properly?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	TOOTH
5.13	Is NAME covered by any health insurance?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	PAGSS
5.14	Insurance is	[ ]1 Private [ ]2 Social security health service [ ]3 Government [ ]4 Other [ ]8 N/A [ ]9 NK	SEGURO
	If other, specify	✎_____	SEGSPEC

5.14	What do you, the mother, father and siblings of the index child do in your spare time to relax?		
LINEID	ID (Who)	Activity (ACTIVI)	How Often (FREC)
1			
2			
3			
4			

5.15	Who plays with the index child?		
LINEID	ID (Who)	Activity (JACTIVI)	How Often (JFREC)

1			
2			
3			
4			

Need codes for activities and frequency.

	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

	Young Lives *8yr old Household Questionnaire* *Peru*	*Section Number:* C8__ __ *(SECTCODE)*	*Child ID:* PE - __ __ - 8 - __ __ __ *(CHILDID)*

Section 6: Caregiver Background

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
6.0.1	Date section started	__ __ / __ __ / __ __	FINI
6.0.2	Time section started	__ __ : __ __	HINI
6.0.3	Fieldworker code	__ __	STAFCODE
6.0.4	Who answers this section? (use code from Household roster	__ __	ID

6.1	In total how long have you lived in this community (complete years)? 00=Less than one year, 99=NK	__ __	TIMELIVE
6.1a	Where were you born?	[ ]₁ In this district [ ]₂ In another district of the same province [ ]₃ In another province of the same department [ ]₄ In a coastal department [ ]₅ In another department of the highlands [ ]₆ In another department of the jungle [ ]₈ N/A [ ]₉ NK	DONDEN
6.2	What is the highest grade you completed in formal school?	__ __	SHIGH
6.4	Can you read and understand a letter or newspaper easily, with difficulty or not at all in any language?	[ ]₁ Easily [ ]₂ With difficulty [ ]₃ Not at all [ ]₉ NK	LITERSPC
6.4.1	What languages do you speak? (note the 3 in which they are the most fluent)		
6.4.a	First language Other, specify:	__ __ ✎_____	IDIO1 IDIOSPEC1
6.4.b	Second language Other, specify:	__ __ ✎_____	IDIO2 IDIOSPEC2
6.4.c	Third language Other, specify:	__ __ ✎_____	IDIO3 IDIOSPEC3

Languages	
1 = Spanish	5 = English
2 = Quechua	7 = Other foreign (specify)
3 = Aymara	8 = Other (specify)
4 = Native Amazon rain forest language	88 = N/A, 99 = NK

6.4.2	What was the language in which your mother spoke to you when you were a child? (Insert code from language box above)		__ __	MOTHIDIO
6.5	Can you speak Spanish?		[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	SPEAK
6.5.1	Do you speak Spanish well, or can you just about understand it?		[ ]₁ Fluent [ ]₂ Good [ ]₃₊ Basic [ ]₈ N/A [ ]₉ NK	FLUENCY
6.5.2	Where was your mother born?	[ ]₁ In this district [ ]₂ In another district of the same province [ ]₃ In another province of the same department [ ]₄ In a coastal department [ ]₅ In another department of the highlands [ ]₆ In another department of the jungle [ ]₈ N/A [ ]₉ NK		MOTHORIU
	Other, specify	✎_____		ORIUSPEC
6.6	To what racial group do you belong?		[ ]₁ White [ ]₂ Mestizo inc. Andean Indian [ ]₃ Native of the Amazon [ ]₄ Negro [ ]₅ Asiatic [ ]₆ Other [ ]₈ N/A [ ]₉ NK	MOTHETH
	If other, specify		✎_____	METHSPEC
6.6.1	Does your child belong to the same racial group?		[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	SAMETH
6.6.5	To what racial group does your child belong?		[ ]₁ White [ ]₂ Mestizo inc. Andean Indian [ ]₃ Native of the Amazon [ ]₄ Negro [ ]₅ Asiatic [ ]₆ Other [ ]₈ N/A [ ]₉ NK	CHLDETH
	If other, specify		✎_____	CETHSPEC

6.7	To what religion do you belong	[ ]₁ Catholic [ ]₂ None [ ]₃ Muslim [ ]₄ Buddhist [ ]₅ Hindu [ ]₆ Evangelist [ ]₇ Mormon [ ]₈ Other [ ]₈₈ N/A [ ]₉₉ NK	MOTHREL
	If other, specify:	✎_____	MRELSPEC
6.7.1	Does your child belong to the same religion?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	SAMEREL
6.7.2	To what religion does NAME belong?	[ ]₁ Catholic [ ]₂ None [ ]₃ Muslim [ ]₄ Buddhist [ ]₅ Hindu [ ]₆ Evangelist [ ]₇ Mormon [ ]₈ Other [ ]₈₈ N/A [ ]₉₉ NK	CHLDREL
	If other, specify	✎_____	CRELSPEC

	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

				Young Lives	*Section Number:*	*Child ID:*		
				8yr old Household Questionnaire	C8__ __	PE - __ __ - 8- __ __ __		
				Peru	*(SECTCODE)*	*(CHILDID)*		

Section 7: Livelihoods

	Household ID	PE - __ __ - __ __ __ - __ __ __	HOGARID
7.0.1	Date section started	__ __ / __ __ / __ __	FINI
7.0.2	Time section started	__ __ : __ __	HINI
7.0.3	Fieldworker code	__ __	STAFCODE
7.0.4	Who answers this section? (use code from Household roster	__ __	ID

7.1.1	7.1.2	7.1.3		7.1.3a	7.1.4	7.1.5	7.1.6	7.1.7
	ID from roster	Activity description	Activity Code	Importance to the individual (1, 2, 3)	Occupation code	Is NAME employed by anyone for this activity? 1=Yes 2=No 9=NK	In the last 12 months how many months have you worked in this activity?	In the months in which you worked, in general what was the average number of days in the week which you worked at this activity? 1=6-7 days a week 2=3-5 days a week 3=1-2 days a week 4=Less than one day a week
LINECODE	ID	ACTDES	ACTCODE	IMPORTA	SECT	PAYMT	MONTHS	DAYS
01								
02								
03								
04								
05								

7.1.1	7.1.2	7.1.3		7.1.3a	7.1.4	7.1.5	7.1.6	7.1.7
	ID from roster	Activity description	Activity Code	Importance to the individual (1, 2, 3)	Occupation code	Is NAME employed by anyone for this activity? 1=Yes 2=No 9=NK	In the last 12 months how many months have you worked in this activity?	In the months in which you worked, in general what was the average number of days in the week which you worked at this activity? 1=6-7 days a week 2=3-5 days a week 3=1-2 days a week 4=Less than one day a week
LINECODE	ID	ACTDES	ACTCODE	IMPORTA	SECT	PAYMT	MONTHS	DAYS
06								
07								
08								
09								
10								
11								
12								
13								
14								
15								
16								
17								

7.2 Index Child's work

7.2.1	7.2.2		7.2.2a	7.2.3	7.2.4	7.2.5	7.2.6	7.2.7	7.2.8	7.2.9
	Activity description	Activity Code	Importance of this activity to the individual (1, 2, 3)	Occupation code	Is NAME employed by anyone to do this activity? 1=Yes 2=No 9=NK	Describe where this work takes place 1=Own dwelling 2=Employer's dwelling 3=Factory/workshop 4=Farm 5=Street 6=Other, specify	Over how many months in the last 12 has NAME engaged in this activity?	In the months NAME engaged in this activity how many days per week?	How many hours per day did NAME spend on this activity?	Xxx falta(ba) a la escuela para trabajar en esta actividad? 1=Yes 2=No 8=N/A 9=NK
LINECODE	ACTDES	ACTCODE	IMPORTA	SECT	PAYMT	PLACE, PLSPEC	MONTHS	WEEKS	HORAS	FALTA
19										
20										
21										
22										
23										

7.3	Of all the activities mentioned in table 7.1 what activity had been most important in terms of bringing in resources to the home in the last 12 months and which were the second and third most important contributors?		
7.3.1a	Most important contributor (ENTER LINE CODE FROM 7.1)	__ __	INC1
7.3.2	Second most important contributor (ENTER LINE CODE FROM 7.1)	__ __	INC2
7.3.3	Third most important contributor (ENTER LINE CODE FROM 7.1)	__ __	INC3

7.4	Has NAME **EVER** engaged in any formal or informal activities for money or goods?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	NAMEWRK
7.5	How old was NAME when he/she first started to work or help (completed years)	__ __	AGEWRK
7.6	Does NAME only do this activity (work) during the school terms, only on bank holidays, non school days (include weekends), school holidays or both?	[ ]₁ School term [ ]₂ Holidays [ ]₃ Both [ ]₄ Whenever (doesn't go to school) [ ]₈ N/A [ ]₉ NK	WHNSCH

7.7	Does NAME keep/save all, some or none of his/her earnings?	[ ]$_1$ All [ ]$_2$ Some [ ]$_3$ None [ ]$_4$ He/she doesn't get paid [ ]$_8$ N/A [ ]$_9$ NK	KEEPSALY
7.8	What is the main reason NAME is working?	[ ]$_1$ Supplement HH income [ ]$_2$ Generate own income [ ]$_3$ Pay HH debt [ ]$_4$ Assist HH enterprise/help out [ ]$_5$ To pay for school [ ]$_6$ To gain experience [ ]$_7$ They like to [ ]$_8$ Keep they busy/out of trouble [ ]$_9$ Bonded labour [ ]$_{10}$ Other	WHYWRK
	Other, specify	✎_____	WRKSPEC
7.9	Has NAME been engaged in any house keeping activities almost every day during the past 7 days?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	CHORES
7.9.1	On average how many hours a day does he/she help with household chores?	__ __	TMCHORES
7.9.2	Does NAME receive any money or things for doing these chores?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	MONCHORES

7.10	Has NAME ever had an accident or been seriously injured when he/she was working or while he/she was doing household chores or has he/she been seriously ill due to work?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	WRKINJ
7.11	What were these injuries/illnesses?		
7.11.1	Serious injury/illness 1	__ __	WORKINJ1
	Other, specify	✍_____	WDIS1SPC
7.11.2	Serious injury/illness 2	__ __	WORKINJ2
	Other, specify	✍_____	WDIS2SPC

Codes for serious illness/injury			
01 = Amputation, loss of part of body	04 = Eye (sight) problem	07 = Psychological damage	
02 = Burn	05 = Crushed	08 = Other, specify	
03 = Skin problem	06 = Respiratory problem	88 = N/A	99 = NK

7.12	Over the last 12 months have you or any member of the family received money or goods regularly from one of the following sources?

	Source of money	7.12.1 Did you receive? 1=Yes 2=No 8=N/A 9=NK	7.12.1a How much did you receive? 8888=N/A 9999=NK	7.12.1b In the last 12 months how many times have you received? 88=N/A 99=NK	7.12.2 Did you receive this money or goods personally? 1=Yes 2=No 8=N/A 9=NK
SRID	TRANSPEC	REMIT	MONTO	VECES	MOMREM
01	Pension or retirement fund of any type	__	__ __ __ __	__ __	__
02	Social security	__	__ __ __ __	__ __	__
03	Religious organisation, parish	__	__ __ __ __	__ __	__
04	Charity, NGO, social assistance	__	__ __ __ __	__ __	__
07	Indemnizations	__	__ __ __ __	__ __	__
08	Medical or life insurance	__	__ __ __ __	__ __	__
09	Contribution for food, divorce, children etc.	__	__ __ __ __	__ __	__
10	Interest from savings accounts or other savings	__	__ __ __ __	__ __	__
11	Dividends for stock, shares, bonds, bonuses, shareout	__	__ __ __ __	__ __	__
12	Rent of house, buildings, land, machinery, vehicles (only net rent)	__	__ __ __ __	__ __	__

SRID	Source of money TRANSPEC	7.12.1 Did you receive? 1=Yes 2=No 8=N/A 9=NK REMIT	7.12.1a How much did you receive? 8888=N/A 9999=NK MONTO	7.12.1b In the last 12 months how many times have you received? 88=N/A 99=NK VECES	7.12.2 Did you receive this money or goods personally? 1=Yes 2=No 8=N/A 9=NK MOMREM
13	Inheritance, gambling, lottery	__	__ __ __ __	__ __	__
05	Money or donations sent by family, friends, etc. who are not current members of the household	__	__ __ __ __	__ __	__
06	Money sent from outside the country	__	__ __ __ __	__ __	__
14	Other, specify: ✑_____	__	__ __ __ __	__ __	__

7.13	For each individual who sent money or goods in the last 12 months, please tell me:		
ID	7.13.1 What is their relationship to the index child? 1=Parent 2=Aunt/Uncle 3=Grandparent 4=Sibling 5=Godparent 6=Friend/neighbour 7=Other 8=N/A 9=NK	7.13.2 In the last 12 months how often have they sent money or goods? 88=N/A 99=NK	7.13.3 What did they send? 1=Money 2=Presents/goods 3=Both 9=NK
REMID	REMREL SPECREM	REMQNT	REMTYPE
01	__ If other, specify: ✎_____	__ __	__
02	__ If other, specify: ✎_____	__ __	__
03	__ If other, specify: ✎_____	__ __	__
04	__ If other, specify: ✎_____	__ __	__
05	__ If other, specify: ✎_____	__ __	__
06	__ If other, specify: ✎_____	__ __	__

7.14	During the last 12 months have you or anyone in the household regularly sent any money or goods to help anyone who is not a member of the household?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	OREMIT

7.14.1	For each person outside the household to whom you have sent money or goods in the last 12 months please tell me:		
ID	7.14.2 What is their relationship to the index child? 1=Parent 2=Aunt/Uncle 3=Grandparent 4=Sibling 5=Godparent 6=Friend/neighbour 7=Other 8=N/A 9=NK	7.14.3 In the last 12 months how often have they sent money or goods? 88=N/A 99=NK	7.14.4 What did they send? 1=Money 2=Presents/goods 3=Both 9=NK
REMID	REMREL SPECREM	REMQNT	REMTYPE
01	__ If other, specify: ✍_____	__ __	__
02	__ If other, specify: ✍_____	__ __	__
03	__ If other, specify: ✍_____	__ __	__
04	__ If other, specify: ✍_____	__ __	__
05	__ If other, specify: ✍_____	__ __	__
06	__ If other, specify: ✍_____	__ __	__

7.15	Does any member of the household have any debts?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	DEBT

		7.16 Who are these debts with?	Debt? 1=Yes 2=No 8=N/A 9=NK`	7.16a How much at the moment? 8888=N/A 9999=NK	7.16.6 Do you think that you will be able to pay back this debt in time?
7.16.1		With a formal institution such as a bank	__ FRMDEBT	__ __ __ __ FRMAMNT	__ FRMREPAY
7.16.2		With an NGO, church, cooperative	__ SEMDEBT	__ __ __ __ SEMAMNT	__ SEMREPAY
7.16.3		With a shop or credit company	__ HIREDEBT	__ __ __ __ HIREAMNT	__ HIREREPAY
7.16.4		With a money lender	__ INFDEBT	__ __ __ __ INFAMNT	__ INFREPAY
7.16.5		With a parent, friend, neighbour	__ RELDEBT	__ __ __ __ RELAMNT	__ RELREPAY
7.16.5a		Market, food shop or other for maintenance of the household	__ MERCDEBT	__ __ __ __ MERCAMNT	__ MERCREPAY
7.16.5b		Public services (electricity, etc.)	__ PUBLDEBT	__ __ __ __ PUBLAMNT	__ PUBLREPAY
7.16.5c		Other, specify: (OTHDSPEC) ✍_____	__ OTHDEBT	__ __ __ __ OTHAMNT	__ OTHREPAY

7.17	Have you or other members of the household prepared a plan as to what you would do if you were faced with a difficult time or an emergency caused for example by a natural disaster, failure of a harvest, loss of work, etc.	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	HAYPLAN

PLANID		Plan PLAN	No plan NPLAN	Description of plan PLANSPEC
01	Plan 1	__ __	__ __	✍_____
02	Plan 2	__ __	__ __	✍_____

Code Box 4: Plans for hard times

01=Nothing	05=Formal savings	09=Credit from informal loan systems e.g. rotating funds etc.
02=Family would help	06=Informal savings	
03=Friends/neighbours would help	07=Formal credit	10=Other, specify
04=Would get job	08=Credit from money lenders	

7.18	Do you or your household receive any donated foods?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	ALIMDON
7.19	If so from what organisation?		

No.	Organisation or group	1=Yes, 2=No 8=N/A, 9=NK	For how long have you received it?	
			In months	In years
1	ADRA OFASA	__ ALIMD01	__ __	__ __
2	CARITAS	__ ALIMD02	__ __	__ __
3	PRISMA	__ ALIMD03	__ __	__ __
4	CARE	__ ALIMD04	__ __	__ __
5	Ministry of Health	__ ALIMD05	__ __	__ __

6	Glass of milk program	__ ALIMD06	__ __	__ __
7	Municipality kitchen	__ ALIMD07	__ __	__ __
8	Community kitchen/club	__ ALIMD08	__ __	__ __
9	Mother's club	__ ALIMD09	__ __	__ __
10	Other, specify: ALIMSPEC ✍_____	__ ALIMD10	__ __	__ __

7.20.a	In the last 12 months what donated food have you received?		

| No | Name of the food | | Frequency | How much (the last time you received it) | | If you had bought it how much would it have cost you? | |
		Code		Quantity	Unit	Price in soles	Per unit
LINEID		CODIGO	FREC	CANT	UNID	PREC	PRECUNIT
1		__ __	__ __	__ __ __		__ __ __ . __ __	
2		__ __	__ __	__ __ __		__ __ __ . __ __	
3		__ __	__ __	__ __ __		__ __ __ . __ __	
4		__ __	__ __	__ __ __		__ __ __ . __ __	
5		__ __	__ __	__ __ __		__ __ __ . __ __	
6		__ __	__ __	__ __ __		__ __ __ . __ __	
7		__ __	__ __	__ __ __		__ __ __ . __ __	

Codes for frequency

01=Weekly	04=Every 2 months	07=Annually
02=Fortnightly	05=Every 3 months	08=Other
03=Monthly	06=Every 6 months	88=N/A, 99=NK

7.21	Who in the family eats the food		
7.21.1	Index child	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	NINCON
7.21.2	Parents	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	PADCON
7.21.3	Siblings	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	HERCON
7.21.4	Other members of the household	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	OTRCON
7.22	Do you or any member of the household belong to or use a community kitchen?	[ ]₁ Member [ ]₂ Not member and don't use it [ ]₃ Use it but am not a member [ ]₉ NK	COMED

7.23.1	What type of community kitchen (3 responses)?	[ ]1 Community kitchen [ ]2 Communal club [ ]3 Mothers' club [ ]4 Local government kitchen/cafeteria [ ]5 School cafeteria/kitchen [ ]6 University cafeteria [ ]7 Other [ ]9 NK	COMTIP1
7.23.2	What type of community kitchen	[ ]1 Community kitchen [ ]2 Communal club [ ]3 Mothers' club [ ]4 Local government kitchen/cafeteria [ ]5 School cafeteria/kitchen [ ]6 University cafeteria [ ]7 Other [ ]9 NK	COMTIP2
7.23.3	What type of community kitchen	[ ]1 Community kitchen [ ]2 Communal club [ ]3 Mothers' club [ ]4 Local government kitchen/cafeteria [ ]5 School cafeteria/kitchen [ ]6 University cafeteria [ ]7 Other [ ]9 NK	COMTIP3
	Other, specify:	✍_____	SPECTCOM
7.24	Who in the family eats in these cafeterias at least once a week?		

7.24.1	Index child	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	CINCOM
7.24.2	Parents	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	CPADCOM
7.24.3	Siblings	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	CHERCON
7.24.4	Other members of the household	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	COTRCOM

7.25	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

Section 8: Economic Changes

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
8.0.1	Date section started	__ __ / __ __ / __ __	FINI
8.0.2	Time section started	__ __ : __ __	HINI
8.0.3	Fieldworker code	__ __	STAFCODE
8.0.4	Who answers this section? (use code from Household roster	__ __	ID

8.1	Since you found you were pregnant with NAME have there been any big changes or events that decreased the economic welfare of your household?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	BADEVENT

EVID		Yes	No	
01	A natural disaster	[ ]₁	[ ]₂	PHYCHNGE
02	Decrease, change in food availability	[ ]₁	[ ]₂	HHFOOD
03	Livestock died	[ ]₁	[ ]₂	HHLSTCK
04	Crops failed	[ ]₁	[ ]₂	HHCRPS
05	Livestock stolen	[ ]₁	[ ]₂	HHLSTL
06	Crops stolen	[ ]₁	[ ]₂	HHCSTL
07	Death or reduction in household members	[ ]₁	[ ]₂	HHDEATH
08	Job loss/source of income/family enterprise	[ ]₁	[ ]₂	HHJOB
09	Severe illness or injury	[ ]₁	[ ]₂	HHILL
10	Victim of crime	[ ]₁	[ ]₂	HHCRIME
11	Divorce or separation	[ ]₁	[ ]₂	HHDIV
12	Birth/new household member	[ ]₁	[ ]₂	HHBIRTH
13	Paying for child's education	[ ]₁	[ ]₂	EDU
14	Moved, migrated or fled	[ ]₁	[ ]₂	HHMOVE
15	Other, specify: ✍_____	[ ]₁	[ ]₂	HHOTH SPECOTH
16	Other, specify: ✍_____	[ ]₁	[ ]₂	HHOTH1 SPECOTH1

8.2	How many events have been mentioned?	[ ]$_1$ No event [ ]$_2$ Only one event [ ]$_3$ More than one event [ ]$_8$ N/A [ ]$_9$ NK	EVTCHK
8.3	Which of the changes/events you mentioned affected the household welfare most?	__ __	WORSEVNT
8.4	What did the household do as a result of this big change/event?		
8.4.1	Response 1 Other, specify:	__ __ ✎_____	BRSP1 BRSP1SPC
8.4.2	Response 2 Other, specify:	__ __ ✎_____	BRSP2 BRSP2SPC
8.4.3	Response 3 Other, specify:	__ __ ✎_____	BRSP3 BRSP3SPC

Code Box 6: Response to economic shocks		
01=Nothing	07=Worked more/started new work	12=Received help from family or friends
02=Sold belongings		13=Received help from the government
03=Used savings	08=Took children out of school	14=Insurance paid
04=Used credit	09=Sent children to work	15=Other
05=Ate less	10=Fled	88=N/A
06=Bought less	11=Migrated looking for work	99=NK

8.5	Since you became pregnant with NAME have there been any important events that had a positive effect on the economy of the household?	[ ]$_1$ Yes [ ]$_2$ No [ ]$_8$ N/A [ ]$_9$ NK	GODEVENT
8.6	Please tell me what they were	Code	
8.6.1	Event 1: ✎_____ Other, specify:	__ __ ✎_____	EVPOS1 EVENPOS1
8.6.2	Event 2: ✎_____ Other, specify:	__ __ ✎_____	EVPOS2 EVENPOS2
8.6.3	Event 3: ✎_____ Other, specify:	__ __ ✎_____	EVPOS3 EVENPOS3

8.7	How many events?	[ ]₁ No event [ ]₂ Only one event [ ]₃ More than one event [ ]₈ N/A [ ]₉ NK	NEVENTO
8.8	Which event had the greatest positive impact on household economy?	__ __	GOODEVENT
8.9	What did the household do as a result?		
8.9.1	Response 1	__ __	GEVN1
	If other, specify	✍_____	GEV1SPEC
8.9.2	Response 2	__ __	GEVN2
	If other, specify:	✍_____	GEV2SPEC
8.9.3	Response 3	__ __	GEVN3
	If other, specify	✍_____	GEV3SPEC

Code Box 7: Response to positive events		
01=Nothing	07=Worked more/started new work	12=Received help from family or friends
02=Sold belongings		13=Received help from the government
03=Used savings	08=Took children out of school	14=Insurance paid
04=Used credit	09=Sent children to work	15=Other
05=Ate less	10=Fled	88=N/A
06=Bought less	11=Migrated looking for work	99=NK
15=Bought things	20=Worked less or stopped working	25=Other
16=Increased savings	21=Sent children to school	
17=Paid debts	22=Children stopped working	
18=Ate more	23=Took a holiday/break	
19=Took out credit	24=Helped family or friends	

| | Time this section was completed | __ __ : __ __ | HFIN |

Comments/Observations:	OBSERV

Section 9: Socio-Economic Status

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
9.0.1	Date section started	__ __ / __ __ / __ __	FINI
9.0.2	Time section started	__ __ : __ __	HINI
9.0.3	Fieldworker code	__ __	STAFCODE
9.0.4	Who answers this section? (use code from Household roster	__ __	ID

9.0.5	Type of house	[ ]1 Independent house [ ]2 Flat [ ]3 Alley house [ ]4 Viv. En casa de vecindad [ ]5 Improvised (made of temporary material) [ ]6 Other	TIPVIV
9.1	Are you or a member of the household the owner of the house?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	OWNHOUSE
9.2	How many rooms are there in the house?	__ __	NUMROOM
9.2.1	Do you have electricity?	[ ]1 Yes [ ]2 No [ ]8 N/A [ ]9 NK	ELEC
9.2.1a	In the last 15 days how many days have you had electricity?	__ __	ULTDIAL
9.2.1b	In the days when you had electricity, on average, how many hours did you have it?	__ __	LUZHOR
9.2.2	Observe walls:	[ ]1 Brick/concrete [ ]2 Adobe/earth [ ]3 Wood/logs [ ]4 Metal/corrugated iron [ ]5 Straw matting [ ]6 Quincha (straw/dung/mud) [ ]7 Stones with mud/earth [ ]8 Other	WALL
	If other, specify:	✎_____	SPECWALL
9.2.3	Observe roof:	[ ]1 Straw/straw matting [ ]2 Adobe/earth [ ]3 Wood/leaves [ ]4 Metal/corrugated iron [ ]5 Concrete/cement [ ]6 Tiles [ ]7 Other	ROOF

	If other, specify:	✎_____	SPECROF
9.2.4	Observe floor	[ ]$_1$ Earth or sand [ ]$_2$ Wood [ ]$_3$ Stone/brick [ ]$_4$ Cement/tiles [ ]$_5$ Linoleum or similar [ ]$_6$ Other	FLOOR
	If other, specify:	✎_____	SPECFLR
9.3	What is the main source of drinking water for members of your household?	[ ]$_1$ Piped water to the house [ ]$_2$ Well/tubewell with hand pump [ ]$_3$ Common tap, water fountain, public well [ ]$_4$ Lake, river, ditch, stream, natural spring, canal [ ]$_5$ Water truck delivery [ ]$_6$ Other [ ]$_9$ NK	DRWATER
	If other, specify	✎_____	WATRSPEC
9.3a	In the last 15 days how often have you had water?	__ __	ULTDIAA
9.3b	On the days when you had water on average how many hours did you have water?	__ __	AGUAHOR
9.4	What kind of toilet facility does your household use?	[ ]$_1$ WC, septic tank inside house [ ]$_2$ No toilet (uses hillside etc) [ ]$_3$ Pit latrine inside house [ ]$_4$ Communal latrine [ ]$_5$ River, ditch, canal, stream [ ]$_6$ Other [ ]$_9$ NK	TOILET
	If other, specify	✎_____	TOILSPEC
9.5	What is the main type of cooking fuel you use?	[ ]$_1$ Wood [ ]$_2$ None [ ]$_3$ Paraffin/kerosene [ ]$_4$ Charcoal [ ]$_5$ Gas/electricity [ ]$_6$ Coal [ ]$_7$ Dung [ ]$_8$ Other [ ]$_{99}$ NK	COOKING
	If other, specify	✎_____	COOKSPEC

9.6	What is the main fuel used for heating?	[ ]₁ Wood [ ]₂ None [ ]₃ Paraffin/kerosene [ ]₄ Charcoal [ ]₅ Gas/electricity [ ]₆ Coal [ ]₇ Dung [ ]₈ Other [ ]₉₉ NK	HEATING
	If other, specify:	✎_____	HEATSPEC

9.7	Does anyone in the household own a:	Yes	No	
9.7.1	- Working radio	[ ]₁	[ ]₂	RADIO
9.7.2	- Working refrigerator	[ ]₁	[ ]₂	FRIDGE
9.7.2.1	- Working iron	[ ]₁	[ ]₂	PLANCHA
9.7.2.2	- Working liquidizer/blender/mixer	[ ]₁	[ ]₂	LICUA
9.7.2.3	- Working gas or electric cooker	[ ]₁	[ ]₂	COCGAS
9.7.3	- Working bicycle	[ ]₁	[ ]₂	BIKE
9.7.4	- Working television	[ ]₁	[ ]₂	TV
9.7.4.1	- Working record player/music centre	[ ]₁	[ ]₂	TOCAD
9.7.4.2	- Working fan	[ ]₁	[ ]₂	VENT
9.7.4.3	- Working videocassette player	[ ]₁	[ ]₂	VIDEO
9.7.4.4	- Working washing machine	[ ]₁	[ ]₂	LAVAD
9.7.4.5	- Working clothes dryer	[ ]₁	[ ]₂	SECAD
9.7.4.6	- Working floor polisher/hoover	[ ]₁	[ ]₂	LUSTR
9.7.5	- Working motorcycle/moped/scooter	[ ]₁	[ ]₂	MOTOR
9.7.6	- Working motor vehicle (car, lorry, taxi)	[ ]₁	[ ]₂	CAR
9.7.7	- Working tractor	[ ]₁	[ ]₂	TRACTOR
9.7.8	- Agricultural equipment or tools	[ ]₁	[ ]₂	PUMP
9.7.9	- Working mobile phone	[ ]₁	[ ]₂	MOBPHONE
9.7.10	- Working landline telephone	[ ]₁	[ ]₂	PHONE
9.7.11	- Working sewing machine	[ ]₁	[ ]₂	SEWING
9.7.12	- Working knitting machine/weaving	[ ]₁	[ ]₂	CSPEC1
9.7.13	- Working water heater/immersion heater (electric or gas)	[ ]₁	[ ]₂	CSPEC2
9.7.14	- Working computer/laptop	[ ]₁	[ ]₂	CSPEC3
9.7.15	- Working microwave cooker	[ ]₁	[ ]₂	CSPEC4

9.7.15a	Do you or anyone in your household do agricultural work or raise animals?	[ ]₁ Yes [ ]₂ No [ ]₃ Only arable [ ]₄ Only livestock [ ]₈ N/A [ ]₉ NK	TRABAGR

9.7.15b	Do you or your family possess any of the following agricultural tools or equipment?	Yes	No	
9.7.16	Animal drawn plough	[ ]₁	[ ]₂	ARADO
9.7.17	Pickaxe	[ ]₁	[ ]₂	CHAQU
9.7.18	Wheelbarrow, handcart	[ ]₁	[ ]₂	CARRET
9.7.19	Harness for animals	[ ]₁	[ ]₂	APARE
9.7.20	Fumigator	[ ]₁	[ ]₂	FUMIG
9.7.21	Hosepipe	[ ]₁	[ ]₂	MANG
9.7.22	Wire fencing	[ ]₁	[ ]₂	CERC
9.7.23	Sheds	[ ]₁	[ ]₂	GALP
9.7.24	Storehouse/granary	[ ]₁	[ ]₂	ALMAC
9.7.25	Motorised saw	[ ]₁	[ ]₂	MOTOSI
9.7.26	Electric motors	[ ]₁	[ ]₂	MOTOEL
9.7.27	Silo, storage pit	[ ]₁	[ ]₂	SILO
9.7.28	Harvester	[ ]₁	[ ]₂	COSEC
9.7.29	Milking machine	[ ]₁	[ ]₂	ORDEN
9.7.30	Spades, shovel, rakes	[ ]₁	[ ]₂	LAMP
9.7.31	Machete, sickle	[ ]₁	[ ]₂	MACHE
9.7.32	Axe, bar	[ ]₁	[ ]₂	HACHA
9.7.33	Other, specify: ✎_____	[ ]₁	[ ]₂	OTRO1 OTRO1SPEC
9.7.34	Other, specify: ✎_____	[ ]₁	[ ]₂	OTRO2 OTRO2SPEC

9.8	Did anyone in the household own or rent/borrow any land in the last 12 months apart from the land your house is on?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	OWNLAND
9.9	Please tell me about each plot of land owned or rented/borrowed by members of the household during the last 12 months?		

	9.9.1 What is the total area of the plot		9.9.3 Is the plot rented, borrowed, sharecropped or owned? 1=Rented to me 2=Lent 3=Shared 4=Owner 5=Part owner 8=N/A 9=NK	9.9.4 What is the plot used for? 1=Agriculture (crops) 2=Nothing (abandoned) 3=Forest/Woodland 4=Housing/construction 5=Industry/Factory 6=Rented out to others 7=Pasture 8=Other 88=N/A, 99=NK	
	Size	Unit of measurement		Main use	Secondary use
PLOT	LAREA	LUNIT	LOWN	LUSE USESPEC	LUSE1 USESPEC1
1	__ __ __ __ __ __		__	__ __	__ __
2	__ __ __ __ __ __		__	__ __	__ __
3	__ __ __ __ __ __		__	__ __	__ __
4	__ __ __ __ __ __		__	__ __	__ __
5	__ __ __ __ __ __		__	__ __	__ __
6	__ __ __ __ __ __		__	__ __	__ __
7	__ __ __ __ __ __		__	__ __	__ __
8	__ __ __ __ __ __		__	__ __	__ __

9.10	In the last 12 months have you irrigated one or your landholdings?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	IRRIGAT
9.10.1	What area of land have you irrigated?	__ __ . __ __	PERIRRIG
	Unit of measurement	✎_____	UNIIRRI
9.11	In the last 12 months have you used a chemical fertiliser?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	FETILISE
9.11.1	What quantity of chemical fertiliser have you used in the last 12 months? Note unit of measurement.		

	Type of fertiliser	9.11.1 Amount per year	9.11.2 Unit of measurement
LINEID	TIPO	PERFERT	UNITFERT
1	✎_____	— — — —	✎_____
2	✎_____	— — — —	✎_____
3	✎_____	— — — —	✎_____
4	✎_____	— — — —	✎_____

9.12	In the last 12 months have you or anyone in your household shared a tractor or other farming vehicle with other people in the community?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	FARMSHR
9.13	In the last 12 months have you or anyone in your household shared agricultural work, animal husbandry with anyone in the community?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	LABSHR
9.14	Have you owned any livestock in the last 12 months?	[ ]₁ Yes [ ]₂ No [ ]₈ N/A [ ]₉ NK	ANIMALS
9.15	For each type of animal can you tell me whether you or someone in your household has owned them in the last 12 months		

	9.15 Type of animal	9.16 Have you owned any? 1=Yes 2=No 8=N/A 9=NK	9.17 How many do you have now? 00=None 88=N/A 99=NK	9.18 How many have you bought in the last year? 00=None 88=N/A 99=NK	9.19 How many have you sold in the last year? 00=None 88=N/A 99=NK	9.19a How many have died in the last year? 00=None 88=N/A 99=NK
LINE NUM		ANYAIM	ANIOWN	ANIBUY	ANISOLD	ANYDIE
01	Work animals (donkeys, horses, oxen)	__	— — — —	— — — —	— — — —	— — — —
02	Cattle (including calves)	__	— — — —	— — — —	— — — —	— — — —
03	Sheep, goats, pigs	__	— — — —	— — — —	— — — —	— — — —
04	Rabbits, guinea pigs, etc.	__	— — — —	— — — —	— — — —	— — — —
05	Poultry, hens, ducks	__	— — — —	— — — —	— — — —	— — — —
06	Llama, alpaca,	__	— — — —	— — — —	— — — —	— — — —

	Huanaco					
07	Other	__	__ __ __ __	__ __ __ __	__ __ __ __	__ __ __ __

9.20	Fieldworker observe: How would you classify the hygiene of the child's home?			
Characteristic		Room – which room: _____ AMBIEN	Bathroom	Kitchen
LINEID		AMBIENTE	BANHO	COCINA
1) General order		__	__	__
2) Cleanliness		__	__	__
3) Rubbish		__	__	__
4) Presence of human faeces		__	__	__
5) Presence of animal faeces		__	__	__
6) Smoke blackened walls		__	__	__
7) Damp		__	__	__
8) Animals around		__	__	__

9.21	Do you use any type of soap?	[ ]1 Only hand/cosmetic soap [ ]2 None/never had any soap [ ]3 Yes, only laundry soap [ ]4 Both cosmetic & laundry soap [ ]8 N/A [ ]9 NK	JABON
9.22	Ask them to show you the soap that they use	[ ]1 Yes, shown only cosmetic soap [ ]2 Doesn't have any [ ]3 Yes, shown only laundry soap [ ]4 Shown both cosmetic and laundry soap [ ]5 They had soap but it finished less than 2 days ago [ ]6 They had soap but it finished less than 15 days ago [ ]7 They had it but it finished more than 15 days ago [ ]8 Other, specify: ✍_____ [ ]88 N/A [ ]99 NK	ENSJAB SPECJAB
9.23	Do you use detergent?	[ ]1 Yes always, only for laundry [ ]2 Never [ ]3 Always for laundry and the house [ ]4 Occasionally for laundry and the house [ ]5 Yes, rarely for laundry and household [ ]6 Other, specify: ✍_____ [ ]8 N/A [ ]9 NK	UTILDET SPECDET

9.24	Can you show me your detergent	[ ]₁ Shows new bag [ ]₂ None, never had any [ ]₃ Shows half used bag [ ]₄ Finished less than 2 days ago [ ]₅ Finished less than 15 days ago [ ]₆ Finished more than 15 days ago [ ]₇ Other, specify: ✍_____ [ ]₈ N/A [ ]₉ NK	ENSDET SPECUTDT
9.25	Does anyone in the home use the Internet, Internet cabins, email?	[ ]₁ Yes [ ]₂ No [ ]₉ NK, or don't understand the question	

	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

Section 10: Child Mental Health

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
10.0.1	Date section started	__ __ / __ __ / __ __	FINI
10.0.2	Time section started	__ __ : __ __	HINI
10.0.3	Fieldworker code	__ __	STAFCODE
10.0.4	Who answers this section? (use code from Household roster	__ __	ID

For each of the following statements could you tell me if this is not true, somewhat true or certainly true for NAME. It would help us if you answer as best you can even if you are not absolutely certain. Please give your answers on the basis of the child's behaviour over the last six months.	1=Not true 2=Somewhat true 3=Certainly true	
10.1	Considerate of other people's feelings	__	FEEL
10.2	Restless, overactive, cannot stay still for long	__	RESTLESS
10.3	Often complains of headaches, stomach-aches or sickness	__	CHHEAD
10.4	Shares readily with other children (treats, toys, pencils, etc.)	__	SHARES
10.5	Often has temper tantrums or hot tempers	__	TEMPER
10.6	Rather solitary, tends to play alone	__	SOLITARY
10.7	Generally obedient, usually does what adult requests	__	OBEDIENT
10.8	Many worries, often seems worried	__	WORRIES
10.9	Helpful if someone is hurt, upset or feeling ill	__	HELPFUL
10.10	Constantly fidgeting or squirming	__	FIDGET
10.11	Has at least one good friend	__	FRIEND
10.12	Often fights with other children or bullies them	__	FIGHTS
10.13	Often unhappy, down-hearted or tearful	__	CHUNHAPY
10.14	Generally liked by other children	__	LIKED
10.15	Easily distracted, concentration wanders	__	DISTRACT
10.16	Nervous or clingy in new situations, easily loses confidence	__	CLINGY
10.17	Kind to younger children	__	KIND
10.18	Often lies or cheats	__	LIES
10.19	Picked on or bullied by other children	__	BULLIED

10.20	Often volunteers to help others (parents, teachers, other children)	__	VOLUNTER
10.21	Thinks things out before acting	__	THINKS
10.22	Steals from home, school or elsewhere	__	STEALS
10.23	Gets on better with adults than with other children	__	ADULTS
10.24	Many fears, easily scared	__	FEARS
10.25	Sees tasks through to the end, good attention span	__	TASKS

10.26	In your parents house was there much violence		
10.26a	Child's paternal grandparents	[ ]₁ Physical and verbal [ ]₂ No [ ]₃ Only verbal [ ]₉ NK	VIOLENAP
10.26b	Child's maternal grandparents	[ ]₁ Physical and verbal [ ]₂ No [ ]₃ Only verbal [ ]₉ NK	VIOLENAM
10.27	Have your parents told you if they were subjected to violence/beaten/hit when they were children?		
10.27	Child's paternall grandparents	[ ]₁ Physical and verbal [ ]₂ No [ ]₃ Only verbal [ ]₉ NK	PEGABAAP
10.21.e	Child's maternal grandparents	[ ]₁ Physical and verbal [ ]₂ No [ ]₃ Only verbal [ ]₉ NK	PEGABAAM
10.27	Were you or your partner beaten/hit when you were children?		
10.27c	Mother	[ ]₁ Physical and verbal [ ]₂ No [ ]₃ Only verbal [ ]₉ NK	LPEGMA
10.27d	Father	[ ]₁ Physical and verbal [ ]₂ No [ ]₃ Only verbal [ ]₉ NK	LPEGPA
10.28	Does the respondent have a partner?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	PETPAR

10.29	Does your partner drink alcohol at least once a week?	[ ]$_1$ Yes [ ]$_2$ No, none [ ]$_3$ Once or twice a month [ ]$_4$ Occasionally [ ]$_8$ N/A [ ]$_9$ NK	TOMA
10.30	When he drinks does he get drunk?	[ ]$_1$ Yes [ ]$_2$ No, never [ ]$_3$ Sometimes [ ]$_8$ N/A [ ]$_9$ NK	EMBORR
10.31	When he gets drunk does he hit you?	[ ]$_1$ Yes [ ]$_2$ No, never [ ]$_3$ Sometimes [ ]$_8$ N/A [ ]$_9$ NK	EMPEG
10.32	When he gets drunk does he hit NAME?	[ ]$_1$ Yes [ ]$_2$ No, never [ ]$_3$ Sometimes [ ]$_8$ N/A [ ]$_9$ NK	EMPEGNI

| | Time this section was completed | __ __ : __ __ | HFIN |

Comments/Observations:	OBSERV

Section 11: Social Capital

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
11.0.1	Date section started	__ __ / __ __ / __ __	FINI
11.0.2	Time section started	__ __ : __ __	HINI
11.0.3	Fieldworker code	__ __	STAFCODE
11.0.4	Who answers this section? (use code from Household roster	__ __	ID

11.1	In the last 12 months have you been an active member of any of the following types of groups in your community?		
		11.1.1	11.1.2
		Have you been a member? 1=Yes 2=No 8=N/A 9=NK	In the last 12 months, did you receive from the group any emotional help, economic help or assistance in helping you know or do things? 1=Yes 2=No
GRPID		MEMBER	ANYSUP
01	Trade Union, work syndicate	__	__
02	Community association, cooperative (e.g. neighbourhood association)	__	__
03	Women's group (e.g. mothers' club)	__	__
04	Political group/party	__	__
05	Religious group/parish	__	__
06	Credit group/funeral association	__	__
07	Sport group/team, social club	__	__
08	Association/health committee, water development, school committee/commission	__	__
09	Other, specify: ✎_____	__	__

Now I am going to ask you about individuals who have given you support in the last 12 months.

11.2	In the last 12 months, have you received any help or support from any of the following, this can be emotional help, economic help or assistance in helping you know or do things?	
	Received help from:	11.2.1 Received help? 1=Yes, 2=No, 8=N/A, 9=NK
SUPID		SUPPORT
01	Parents or family	__
01a	Members of the household	__
02	Neighbours	__
03	Friends who are not neighbours	__
04	Community leaders	__
05	Religious leaders	__
06	Political leaders	__
07	Government or local government officials	__
08	Charity or NGO	__
09	Other, specify : ✎_____ SPECSUP	__

11.3	In the last 12 months have you met with other members of the community in order to resolve a problem or work together?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	JOIN
11.4	In the last 12 months have you talked to local authorities/government representatives about any problem in the community?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	AUTHORIT
11.5	Do you think that your household is better off, the same or poorer than the majority of households in this community?	[ ]₁ Better off [ ]₂ Similar [ ]₃ Worse off [ ]₉ NK	SELFASS
11.6	In general can you trust most people in this community?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	TRUST
11.7	Do most people get on well with each other?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	ALONG
11.8	Do you feel that you are really part of this community?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	PART

11.9	Do you think that most people in this community would take advantage of you if they had the chance?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	ADVANTAG
11.10	In the last 3 years has anyone in the household suffered the following events?		
11.10.1	Robbery/theft	[ ]₁ Yes [ ]₂ No [ ]₉ NK	THEFT
11.10.2	Threats to inheritance	[ ]₁ Yes [ ]₂ No [ ]₉ NK	INHERIT
11.10.3	Threats to land rights (e.g. forced removal)	[ ]₁ Yes [ ]₂ No [ ]₉ NK	LNDRIGT
11.11	When these robberies etc. occurred did you?		
11.11.1	Go to the police?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	POLICE
11.11.2	Go to the traditional authorities?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	TRADAUT
11.11.3	Have your case taken to the law/justice system?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	COURT

Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

Section 12: Tracking Details

| | Household ID | PE - __ __ - __ __ - __ __ __ | HOGARID |

A relative

Full name:	First name:	Surname:	FAMFNAME FAMLNAME
Address			FAMADD
Phone (home)	Code:		FAMCHOME FAMHOME
Phone (work)	Code:		FAMCWORK FAMWORK
Fax number	Code:		FAMCFAX FAMFAX
Mobile phone			FAMCELL
Email			FAMMAIL

A close friend

Full name:	First name:	Surname:	FRDFNAME FRDLNAME
Address			FRDADD
Phone (home)	Code:		FRDCHOME FRDHOME
Phone (work)	Code:		FRDCWORK FRDWORK
Fax number	Code:		FRDCFAX FRDFAX
Mobile phone			FRDCELL
Email			FRDMAIL

12.1	Do you have a relative who lives in this town/city or nearby?	[ ]1 Yes [ ]2 No [ ]9 NK	HAYFLC
Full name:	First name:	Surname:	FAMNOMO FAMAPEO
Relationship			FAMPARO
Ubigeo			UBIGEOO
City			CPO
Place or locality			LOCO
Physical address			DIRECCO
Home phone number			TELCASO

Work phone number		TELTRA0
Other phone number		TELOTR0
References		REFER0

12.2	Do you have a relative who lives in another main city?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	HAYFCP

1. Full name:	First name:	Surname:	FAMNOM1 FAMAPE1
Relationship			FAMPAR1
Ubigeo			UBIGEO1
City			CP1
Place or locality			LOC1
Physical address			DIRECC1
Home phone number			TELCAS1
Work phone number			TELTRA1
Other phone number			TELOTR1
References			REFER1

2. Full name:	First name:	Surname:	FAMNOM2 FAMAPE2
Relationship			FAMPAR2
Ubigeo			UBIGEO2
City			CP2
Place or locality			LOC2
Physical address			DIRECC2
Home phone number			TELCAS2
Work phone number			TELTRA2
Other phone number			TELOTR2
References			REFER2

3. Full name:	First name:	Surname:	FAMNOM3 FAMAPE3
Relationship			FAMPAR3
Ubigeo			UBIGEO3
City			CP3

		LOC3
Place or locality		LOC3
Physical address		DIRECC3
Home phone number		TELCAS3
Work phone number		TELTRA3
Other phone number		TELOTR3
References		REFER3

4. Full name:	First name:	Surname:	FAMNOM4 FAMAPE4
Relationship			FAMPAR4
Ubigeo			UBIGEO4
City			CP4
Place or locality			LOC4
Physical address			DIRECC4
Home phone number			TELCAS4
Work phone number			TELTRA4
Other phone number			TELOTR4
References			REFER4

12.3	Do you have a family friend in Lima or another important city?	[ ]₁ Yes [ ]₂ No [ ]₉ NK	HAYFA

1. Full name:	First name:	Surname:	FAMNOM5 FAMAPE5
Relationship			FAMPAR5
Ubigeo			UBIGEO5
City			CP5
Place or locality			LOC5
Physical address			DIRECC5
Home phone number			TELCAS5
Work phone number			TELTRA5
Other phone number			TELOTR5
References			REFER5

Comments/Observations:	OBSERV

	Young Lives 8yr old Household Questionnaire Peru	Section Number: C8__ __ (SECTCODE)	Child ID: PE - __ __ - 8 - __ __ __ (CHILDID)

Section 13: Anthropometry

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
13.0.1	Date section started	__ __ / __ __ / __ __	FINI
13.0.2	Time section started	__ __ : __ __	HINI
13.0.3	Fieldworker code	__ __	STAFCODE
13.0.4	Who answers this section? (use code from Household roster	__ __	ID

13.1	Compared with other children of the same age do you think that your child is heavier (fatter) or lighter (thinner) than others?	[ ]1 Heavier [ ]2 Similar [ ]3 Lighter [ ]9 NK	COMPWEIG
13.2	Compared with other children of the same age would you say that your child was taller, the same or shorter than others?	[ ]1 Taller [ ]2 Similar [ ]3 Shorter [ ]9 NK	COMPHEAL
13.3	Is the balance calibrated?	[ ]1 Yes	TICK
13.3.1	Is the height board calibrated?	[ ]1 Yes	CALIB

Weight:

1) Mother PESOMAD1	2) Mother PESOMAD2	1) Child and Mother PESOMN1	2) Child and Mother PESOMN2
__ __ __ . __ __	__ __ __ . __ __	__ __ __ . __ __	__ __ __ . __ __

13.6	Agreed weight of child	__ __ __ . __ __	CHWEGHT
13.6.1	Why were you unable to weigh the child?	[ ]1 Child absent [ ]2 Mother or carer refused [ ]3 Child was ill [ ]4 Other, specify: ✎_____ [ ]8 N/A (child measured) [ ]9 NK	NOPESARN SPECNPRN
13.6.2	Why could you not weigh the mother?	[ ]1 Mother absent [ ]2 Mother refused [ ]3 Mother was ill [ ]4 Other, specify: ✎_____ [ ]8 N/A (mother measured) [ ]9 NK	NOPESARM SPECNPRM

Height:

1) Mother TALLMAD1	2) Mother TALLMAD2	3) Mother TALLMAD3	1) Child TALLNIN1	2) Child TALLNIN2	2) Child TALLNIN2
__ __ __ . __	__ __ __ . __	__ __ __ . __	__ __ __ . __	__ __ __ . __	__ __ __ . __

13.9	Agreed height of child		__ __ __ . __	CHHEGHT
13.10	Why could you not measure the child's height?	[ ]₁ Child absent [ ]₂ Mother or carer refused [ ]₃ Child was ill [ ]₄ Other, specify: ✎_____ [ ]₈ N/A (child measured) [ ]₉ NK		NOTMEAS MEASSPEC
13.10.1	Why could you not measure the mother's height?	[ ]₁ Mother absent [ ]₂ Mother refused [ ]₃ Mother was ill [ ]₄ Other, specify: ✎_____ [ ]₈ N/A (mother measured) [ ]₉ NK		NOTALLM SPECNTM

13.11	1) Mother	2) Mother	3) Mother	
Mid arm circumference	__ __ . __	__ __ . __	__ __ . __	PERBRA1 PERBRA2 PERBRA3
Triceps skin fold	__ __ . __	__ __ . __	__ __ . __	PLITRI1 PLITRI2 PLITRI3

13.12	Why could you not measure the mother's skin fold thickness?	[ ]₁ Mother absent [ ]₂ Mother refused [ ]₃ Mother was ill [ ]₄ Other, specify: ✎_____ [ ]₈ N/A (mother measured) [ ]₉ NK	NOMEDPLI PLIMSPEC

14.a	GPS:	W: __ __ __ . __ __ . __ __ __	GPSW
14.B	GPS	S: __ __ __ . __ __ . __ __ __	GPSS
15	Did you take the photos?	[ ]₁ Yes [ ]₂ No	FOTOS
15.1	Yes they were taken	[ ]₁ Yes [ ]₂ No [ ]₈ N/A	
	a. Child alone in….	__	FOTO1
	b. Child with mother in ….	__	FOTO2
	c. Child inside the house …	__	FOTO3
	d. Child at the door of the house with panoramic view of the house	__	FOTO4
	e. Child in the street with panoramic view of the house and street	__	FOTO5

	f. Other:	✎_____	DESCRIBA
15.2	Why were the photos not taken?		FOTEXPLI

16	Time this section was completed	__ __ : __ __	HFIN

Comments/Observations:	OBSERV

Section 14: Family Income

	Household ID	PE - __ __ - __ __ - __ __ __	HOGARID
14.0.1	Date section started	__ __ / __ __ / __ __	FINI
14.0.2	Time section started	__ __ : __ __	HINI
14.0.3	Fieldworker code	__ __	STAFCODE
14.0.4	Who answers this section? (use code from Household roster	__ __	ID

Continue from section 7 (Table 7.7.1): Work in order for each member of the household from 14.2.1 to 14.2.13, first note the code of the household member which figures in column 7.1.2 and their name. In column 7.1.3a find the first activity (most important for that individual) and look up the line code in 7.1.1 corresponding to the person activity. Write this code in column 14.2.2. Do not enter the income for those who are defined as domestic servants in 2.5.5 but do include those defined in 7.1.5 as non-remunerated family workers.

Nº	14.2.1 ID	NAME	14.2.2 COD. LINE	14.2.3 How Many hours a day do they do this work?	14.2.4 In this work do (did) they work: 1=Dependent (Salaried) 2=Self-employed 3=For the family (not remunerated)	14.2.5 If 2) self employed or 3) family: In this work what was your most recent net income (income –costs) for unit time Continue to question 14.2.9 If dependent (salaried) how much did they earn in the last pay cheque, what period did this cover. ?	14.2.6 DEPENDENT or SALARIED? Did they receive additional salaries or payments in this work (for instance Christmas bonus, etc) How much? How often? 8 = Not applicable 9 = Don't know, don't reply			14.2.7 DEPENDENT or SALARIED Did they receive any other fringe benefits in the form of money or goods, free or subsidised. (meals, food, transport, clothes, housing etc) ? (Note the two most important for each individual) 8 = Not applicable 9 = Don't know, No reply			14.2.8 What sort of work contract do/did they have? Refer to codes below Contract	14.2.9 How long have they been working in this occupation? 00 = Days		14.2.10 In the last 7 days have you been working in this, what you say is your principal, job? 1 = Yes 2 = No --- →	14.2.11 In the last 7 days have you worked as a dependent (salaried), self employed or a family worker without pay? 1 = Yes 2 = No ---→ 8 = Not applicable 9 = Don't know
	ID	Name	Cod. Line	Hours		Amount	1=Yes 2=No	Amount	Unit of time	1=Yes 2=No	Amount	Unit of time	Contract	Years	Months	W 7 days	
LINEID	ID		LINECODE	HORAS	TIPO	MONTO	MTIEMPO	SUELDO	SMONTO	STIEMPO	BIENES	BMONTO	BTIEMPO	CTRAB	TRANHOS	TMESES	ULT7	ULT7T

Young Lives
8yr old Household Questionnaire
Peru

Section Number:	Child ID:
C8__ __	PE - __ __ - 8 - __ __ __
(SECTCODE)	(CHILDID)

1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	

Young Lives
8yr old Household Questionnaire
Peru

Section Number:
C8__ __
(SECTCODE)

Child ID:
PE - __ __ - 8 - __ __ __
(CHILDID)

13																			
14																			
15																			
16																			
17																			

Young Lives 8yr old Household Questionnaire Peru	Section Number: C8__ __ (SECTCODE)	Child ID: PE - __ __ - 8 - __ __ __ (CHILDID)

Unit of time - Codes				Type of contract - Codes				
1=Hour	4=Fortnight	7=6 months		1=Indefinite/Permanent	4=Professional fees	7=Pre-professional work experience		
2=Day	5=Month	8=Year		2=Without contract	5=For service/Co-operative	8=Apprenticeship		
3=Week	6=3 months	88=N/A	99=NK	3=Fixed term/Defined	6=Youth employment program	9=Other	88=N/A	99=NK

Young Lives 8yr old Household Questionnaire Peru	Section Number: C8__ __ (SECTCODE)	Child ID: PE - __ __ - 8 - __ __ __ (CHILDID)

14.3 Fieldworker: Compare table 2.7 with table 2.5 (composition of the household) and identify all the household members aged 14 or more, note them and ask the information requested in each column:

N°	14.3.1 ID	NAME	AGE	14.3.2 In the past 7 days have you been looking for work? 1= Yes 2= No 9= Don't know
LINEID	ID			BUSCATRA
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Expenditure, consumption and home production of food

14.4 Has the family received food or been supplied with food from any family business or shop or food grown or raised by yourselves?

	14.3.1 In the last fortnight have you bought or been supplied with any of the following, including those that you grow or raise yourselves: *(Finish question 14.3.1. for each item then ask 14.3.2 and 14.3.3 for each item depending on the reply given in 14.3.1)	14.4.1 1=Yes 2=No 8=Not applicable 9=Don't know	14.4.2 How much did you spend on food in the last 15 days (note soles, not cents. 999 NK 888 N/A	14.4.3 What is the total value of the home grown or self supplied food in the last 15 days food 888=Not applicable, 999=Don't know
ID		COMPRAR	GASTAR	AUTOCONS
01	Rice (Any quality, loose or in packet?	____		
02	Wheat, wheat flour, semolina, maize, corn flour, corn derivatives?	____		
03	Oats, barley, quinua, quinua flour, barley flour or other derivatives of quinua or barley?	____		
04	Bread (White, wholemeal etc)	____		
05	Biscuits, pastries etc	____		
06	Pasta of any type?	____		
07	Red meta (beef, pork, lamb, mutton, llama etc)	____		
08	Poultry meat (chicken, turkey etc)	____		
09	Processed meats (bacon, sausage, ham, pâté, hotdogs, bones etc)	____		
10	Fish or shellfish (fresh, frozen, smoked, canned etc)	____		
11	Milk	____		
12	Milk products (yoghurt, butter, cheese etc)	____		
13	Eggs	____		
14	Edible oils, margarine etc	____		
15	Salt, seasonings, spices (chilli, cinnamon, pepper, MSG, vinegar etc)	____		
16	Sauces (tomato, mayonnaise, mustard, ketchup etc)	____		

17	Tubers and roots (Potatoes, Sweet potatoes, cassava etc)	___		
18	Pulses (Dried peas, chick peas, lentils, broad beans, soy beans etc)	___		
19	Fresh vegetables	___		
20	Fresh fruit	___		
21	Vegetables (frozen, Canned etc).	___		
22	Dried fruit, jam etc	___		
23	White and brown sugar	___		
24	Coffee, tea, cocoa, herb drinks	___		
25	Packet foods/drinks (jelly, powdered drinks, instant puddings, packet soups etc)	___		
26	Sweets, chocolates, candies, honey, molasses etc	___		
27	Prepared food, take-aways bought outside the home and eaten at home	___		
28	Food prepared and eaten outside the house, e.g. restaurant	___		
29	Meals or food received in part payment for work (if not considered before)	___		
30	Alcoholic drinks	___		
31	Soft drinks, Coke, etc.	___		
32	Other: _____	___		
33	Other: _____	___		

14.5	Time this section was completed	__ __ : __ __	HFIN