

State Name:

Segment Number:

Household Number:

SUDAN HOUSEHOLD HEALTH SURVEY**FOOD SECURITY QUESTIONNAIRE**

I WOULD NOW LIKE TO ASK YOU QUESTIONS ABOUT YOUR HOUSEHOLD, LIVELIHOOD AND FOOD SECURITY

THIS MODULE IS TO BE ADMINISTERED TO THE HOUSEHOLD HEAD OR SPOUSE OF THE HOUSEHOLD HEAD (SAME PERSON INTERVIEWED FOR THE HOUSEHOLD QUESTIONNAIRE). PLEASE MAKE SURE TO COMPLETE THE HOUSEHOLD NUMBER ON TOP OF PAGES.

HOUSEHOLD CIRCUMSTANCES		HCI
HCI 1. WHICH OF THE FOLLOWING BEST DESCRIBES YOUR HOUSEHOLD? (READ ANSWERS, CIRCLE ONLY ONE)	Internally Displaced 1 Refugee 2 Returnee ex-Internally Displaced 3 Returnee ex Refugee 4 Resident 5	
HCI 2. DID YOUR HOUSEHOLD LIVE HERE 12 MONTHS AGO (1 YEAR)?	Yes 1 No 2	1⇒Skip to HCI 5
HCI 3. WHERE DID YOUR FAMILY LIVE BEFORE YOU MOVED TO THIS LOCATION?	Nearby Village (<10km)..... 1 Distant Village (>10km) 2 IDP Camp..... 3 Other State 4 Other Country 5	
HCI 4. HOW MANY MONTHS AGO DID YOU MOVE TO THIS CURRENT LOCATION (WRITE 98 IF DON'T KNOW)	_____ months	
HCI 5. DOES YOUR HOUSEHOLD USUALLY MIGRATE DURING THE YEAR FOR WORK OR TO RAISE LIVESTOCK?	Yes 1 No 2	

HOUSEHOLD BELONGINGS AND LIVESTOCK		HBL
HBL 1. DOES YOUR HOUSEHOLD OWN ANY OF THE FOLLOWING BELONGINGS (ASSETS) IN WORKING CONDITION? (CIRCLE ALL THAT APPLY)	ChairA TableB Bed C Lantern D Cooking UtensilsE HoeF AxeG Ox Drawn Plough H Hand Hammer MillI Hammer MillL	
HBL 2. DOES YOUR HOUSEHOLD OWN ANY LIVESTOCK, HERDS OR FARM ANIMALS (EVEN IF THEY ARE NOT THERE NOW)? COPY ANSWER FROM HI3, HOUSEHOLD MODULE	Yes 1 No2	2⇒Skip to HBL 10
HBL 3. HOW MANY CATTLE DOES THIS HOUSEHOLD HAVE? COPY ANSWER FROM HI4, HOUSEHOLD MODULE	0 1 1 – 5.....2 6 – 20.....3 21 – 504 51 – 1005 More than 1006 Don't Know8	

State Name:	Segment Number:	Household Number:
_____	_____ - _____	_____
HBL 4. HOW MANY MILK COWS DOES THIS HOUSEHOLD HAVE? <i>COPY ANSWER FROM HI7, HOUSEHOLD MODULE</i>	0 1 1 – 4.....2 5 – 9.....3 10 – 144 15 – 205 More than 206 Don't Know8	
HBL 5. HOW MANY CHICKENS DOES THIS HOUSEHOLD HAVE? <i>COPY ANSWER FROM HI5, HOUSEHOLD MODULE</i>	0 1 1 – 10.....2 11 – 20.....3 21 – 504 51 – 1005 More than 1006 Don't Know8	
HBL 6. HOW MANY GOATS DOES THIS HOUSEHOLD HAVE? <i>COPY ANSWER FROM HI6, HOUSEHOLD MODULE</i>	0 1 1 – 5.....2 6 – 20.....3 21 – 504 51 – 1005 More than 1006 Don't Know8	
HBL 7. HOW MANY SHEEP DOES THIS HOUSEHOLD HAVE? <i>COPY ANSWER FROM HI8, HOUSEHOLD MODULE</i>	0 1 1 – 5.....2 6 – 20.....3 21 – 504 51 – 1005 More than 1006 Don't Know8	
HBL 8. HOW MANY HORSES, DONKEYS OR MULES DOES THIS HOUSEHOLD HAVE? <i>COPY ANSWER FROM HI9, HOUSEHOLD MODULE</i>	0 1 1 – 3.....2 More than 33 Don't know8	
HBL 9. HOW MANY CAMELS DOES THIS HOUSEHOLD HAVE? <i>COPY ANSWER FROM HI10, HOUSEHOLD MODULE</i>	0 1 1 – 3.....2 More than 33 Don't know8	
HBL 10. DID YOUR HOUSEHOLD SELL ANY BELONGINGS OR LIVESTOCK IN THE LAST 1 YEAR?	Yes 1 No 2	2⇒Skip to Module LAP
HBL 11. WHICH WAS THE MAIN REASONS FOR SELLING BELONGINGS AND LIVESTOCK? <i>(CIRCLE ALL THAT APPLY)</i>	To Eat / Purchase FoodA To Pay medical Expenses.....B To Repay Debts..... C For Social Events D To Pay Normal Daily Expenses.....E For School Fees / ExpensesF To Purchase Agricultural Inputs G Other, specify H	

State Name: _____	Segment Number: _____ - _____	Household Number: _____
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LIVELIHOODS AND AGRICULTURAL PRODUCTION		LAP	
LAP 1. DOES YOUR HOUSEHOLD USUALLY USE LAND FOR FARMING?	Yes 1 No 2	2⇒Skip to LAP 6	
LAP 2. HOW MUCH LAND DO YOU HAVE ACCESS TO FOR FARMING? (write "98" for don't know)	_____ feddans (1 feddan = 0.42 ha)		
LAP 3. HOW MANY HARVESTS CAN YOU TYPICALLY HAVE IN ONE YEAR?	1 2		
LAP 4. HOW MANY MONTHS DOES FOOD FROM YOUR HARVEST TYPICALLY LAST?	_____ months		
LAP 5. HOW LONG DOES THE HUNGER SEASON TYPICALLY LAST?	_____ months		
LAP 6. DID YOU PLANT LAND IN THE PREVIOUS SEASON?	Yes 1 No 2	2⇒Skip to LAP 12	
LAP 7. HOW MUCH LAND DID YOU PLANT IN THE PREVIOUS SEASON?	_____ feddans (1 feddan = 0.42 ha)		
Please after completing LAP 1-7, fill in the following table 1 crop at a time (line by line), repeating the top questions			
LAP 8. WHAT ARE THE MAIN CROPS CULTIVATED BY YOUR HOUSEHOLD IN THE PREVIOUS SEASON? (USE <u>CROP CODE</u> BELOW, WRITE 88 IF NONE)	LAP 9. HOW MUCH DID YOU PRODUCE IN THE PREVIOUS SEASON? <u>UNITS CODE</u> 1 = BAG (90 KG) 4 = MALUA (3 KG) 2 = SACK (50 KG) 5 = PIECE 3 = TIN (15 KG)	LAP 10. WHAT IS THE PROPORTION OF THIS CROP THAT YOU CONSUME IN THE PREVIOUS SEASON? (USE PROPORTIONAL PILLING METHOD)	LAP 11. WHAT IS THE PROPORTION OF THIS CROP THAT YOU SOLD AND / OR EXCHANGED (BARTER) IN THE PREVIOUS SEASON? (USE PROPORTIONAL PILLING METHOD)
a. Main Crop: _____	_____ units: _____	_____ %	_____ %
b. Second Crop: _____	_____ units: _____	_____ %	_____ %
c. Third Crop: _____	_____ units: _____	_____ %	_____ %
d. Fourth Crop: _____	_____ units: _____	_____ %	_____ %
e. Fifth crop: _____	_____ units: _____	_____ %	_____ %
CROP CODE: 1. SORGHUM 4. RICE 8. BEANS 12. PUMPKIN 14. TOBACCO 2. MILLET 5. OTHER CEREALS 9. COWPEAS 13. OTHER VEGETABLES 15. OTHER CASH CROP 3. MAIZE 6. CASSAVA 10. SESAME 14. WATERMELON 16. OTHER CROP 7. SWEET POTATOES 11. GROUNDNUTS 15. OTHER FRUIT (SPECIFY) _____			
LAP 12. DOES YOUR HOUSEHOLD HAVE A VEGETABLE PLOT / GARDEN?	Yes 1 No 2		
LAP 13. WHICH WERE THE MAIN SOURCES OF LIVELIHOOD IN THE LAST 1 YEAR? (USE <u>INCOME SOURCES CODE</u> BELOW; WRITE 88, IF NONE)			
a. Main Source of livelihood: _____ b. Second Source of livelihood: _____ c. Third Source of livelihood: _____ d. Fourth Source of livelihood: _____ e. Fifth Source of livelihood: _____	INCOME SOURCE CODE: 1. LIVESTOCK REARING 7. UNSKILLED LABOR (FARM JOB, ...) 2. AGRICULTURAL PRODUCTION 8. HANDICRAFT (BASKETS, ...) 3. FISHING 9. SKILLED LABOR (ARTISAN) 4. HUNTING, GATHERING 10. EMPLOYEE WORK (SALARIED, TEACHER,...) 5. PETTY TRADE (BREWING / SMALL BUSINESS) 11. FOOD AID ASSISTANCES 6. COLLECTION OF NATURAL RESOURCES (FIREWOOD, GRASS, ...) 12. OTHER ACTIVITY? SPECIFY _____		

Food Security Questionnaire 3

State Name: _____	Segment Number: _____ - _____	Household Number: _____
LAP 14. DO YOU USUALLY WORK FOR FOOD ONLY (NO PAYMENT)?	Yes.....1 No2	

HOUSEHOLD EXPENDITURES			HEX
Complete one bought item at a time (line by line)			
ITEM	HEX 1. IN THE LAST 3 MONTHS , DID YOU BUY (ITEM)?	HEX 2. DID YOU PAY CASH FOR IT OR PART OF IT?	HEX 3. DID YOU USE BARTER / EXCHANGE FOR PART OF IT OR FOR THE TOTAL?
Cereals (Sorghum, maize, millet,...)	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Roots and Tubers (Cassava, groundnut, ...)	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Pulses, vegetables and fruits (Beans, pumpkin, mango...)	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Meat and fish	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Sugar, salt and cooking oils	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Cooking fuel, lighting	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Alcohol and Tobacco	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Grinding, Milling	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Medical services and items (drugs,...)	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Education, school fees and school materials	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Clothing, shoes	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Equipment, tools, seeds	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Hiring labor (farm hand, construction,...)	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
House construction and repair materials	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No
Fines, taxes, debts and rents	1. Yes 2. No ⇒Next item	1. Yes 2. No	1. Yes 2. No

State Name:

Segment Number:

Household Number:

FOOD CONSUMPTION AND SOURCES

FCS

FCS 1. IN A NORMAL/USUAL PERIOD, HOW MANY TIMES DO THE ADULTS (OVER 15) IN THIS HOUSEHOLD EAT IN A DAY?

0 1 2 3 4 5

FCS 2. IN A NORMAL/USUAL PERIOD, HOW MANY TIMES DO THE CHILDREN (15 OR UNDER) IN THIS HOUSEHOLD EAT IN A DAY?

0 1 2 3 4 5

FCS 3. IN A HUNGER PERIOD, HOW MANY TIMES DO THE ADULTS (OVER 15) IN THIS HOUSEHOLD EAT IN A DAY?

0 1 2 3 4 5

FCS 4. IN A HUNGER PERIOD, HOW MANY TIMES DO THE CHILDREN (15 OR UNDER) IN THIS HOUSEHOLD EAT IN A DAY?

0 1 2 3 4 5

Complete one item consumed at a time (line by line), each time repeating the question

FOOD ITEM

FCS 5.

LAST WEEK, HOW MANY **DAYS** DID YOUR HOUSEHOLD EAT THIS ITEM?

FCS 6.

COMPARED TO LAST WEEK, HOW MUCH DID YOU EAT THIS ITEM IN THE LAST HARVEST SEASON?

FCS 7.

COMPARED TO LAST WEEK, HOW MUCH DID YOU EAT THIS ITEM IN THE LAST RAINY SEASON?

FCS 8.

WHAT WAS THE MAIN SOURCE FOR THIS ITEM?

FOOD SOURCES CODES:

- 1 = OWN PRODUCTION
- 2 = MARKET PURCHASE
- 3 = HUNTING, FISHING, GATHERING
- 4 = EXCHANGE (LABOR / ITEMS)
- 5 = BORROWED
- 6 = GIFT (FAMILY, RELATIVES)
- 7 = FOOD AID
- 8 = OTHER
- 9 = DO NOT KNOW

A. SORGHUM AND MILLET

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

B. MAIZE

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

C. ROOTS AND TUBERS
(CASSAVA, YAMS, POTATOES)

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

D. PULSES
(BEANS, PEAS, LENTILS, ...)

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

E. OKRA

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

F. GROUNDNUTS

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

G. SESAME

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

H. WILD PLANTS AND
VEGETABLES
(LEAVES, FRUITS, GREENS...)

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

I. MEAT

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

J. FISH

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

K. EGGS

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

L. MILK

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

M. OIL, FAT, BUTTER

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

N. SUGAR

0 1 2 3 4 5 6 7

1 - 2 - 3
Same - More - Less1 - 2 - 3
Same - More - Less

Code: ____

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SHOCKS AND COPING MECHANISMS		SCM	
SCM 1. DURING THE LAST <u>1 YEAR</u>, DID YOUR HOUSEHOLD EXPERIENCE ANY INCIDENT THAT AFFECTS ITS USUAL ABILITY TO EAT AND/OR BUY FOODS OF THE QUALITY, QUANTITY OR VARIETY YOU PREFER?	Yes 1 No 2	2⇒Skip to Module FAI	
<i>After completing question SCM1, complete one incident at a time (line by line), each time repeating the questions above</i>			
SCM 2. BY ORDER OF IMPORTANCE, WHAT INCIDENTS DID YOUR HOUSEHOLD EXPERIENCE IN THE LAST <u>1 YEAR</u> INCIDENTS CODE: 1 = INSECURITY, VIOLENCE 2 = INCREASED PRICE FOR FOOD 4 = DROP IN FARM GATE PRICE 5 = FLOODS 6 = DROUGHT/DRY SPELL 7 = CROP PEST AND DISEASE 8 = LIVESTOCK DISEASE 9 = SICKNESS OF HOUSEHOLD MEMBER 10 = DEATH OF HOUSEHOLD MEMBER 11 = INCREASED HOUSEHOLD SIZE (IDPs) 12 = LOSS / LACK OF EMPLOYMENT	SCM 3. WHAT IS THE MAIN ACTION YOUR HOUSEHOLD TOOK TO COMPENSATE THE EFFECT OF THAT INCIDENT? COPING CODE: 0 = NOTHING 1 = EAT LESS PREFERRED FOODS 2 = EAT FEWER OR SMALLER MEALS PER DAY 3 = GO ONE ENTIRE DAY WITHOUT MEALS 4 = COLLECT WILD FOODS, HUNT OR HARVEST IMMATURE CROPS 5 = DISTRESS SALE / SLAUGHTER OF LIVESTOCK 6 = DISTRESS SALE OF OTHER ASSETS 7 = PURCHASE FOOD ON CREDIT 8 = BORROW FOOD FROM FAMILIES AND FRIENDS, KINSHIP SUPPORT 9 = WORKED FOR MONEY 10 = WORKED FOR FOOD ONLY 11 = REDUCED EXPENDITURES ON HEALTH OR EDUCATION 12 = SPENT SAVINGS 13 = SOME HOUSEHOLD MEMBERS MIGRATED 14 = OTHER (SPECIFY) _____	SCM 4. HOW OFTEN DID YOU DO THIS IN THE LAST <u>1 YEAR</u> ?	SCM 5. DID YOUR HOUSEHOLD RECOVER FROM THAT INCIDENT?
MAIN : (Code) ____	(Code) ____	____ times	1. Yes 2. No
SECOND : (Code) ____	(Code) ____	____ times	1. Yes 2. No
THIRD : (Code) ____	(Code) ____	____ times	1. Yes 2. No
FOURTH : (Code) ____	(Code) ____	____ times	1. Yes 2. No
FIFTH : (Code) ____	(Code) ____	____ times	1. Yes 2. No

FOOD AID		FAI
FAI 1. DID YOUR HOUSEHOLD RECEIVE FOOD AID IN THE LAST <u>3 MONTHS</u>? (SINCE BEGINNING OF THE YEAR)	Yes 1 No 2	2⇒Skip to FAI 10
FAI 2. HOW MANY TIMES DID YOU RECEIVE FOOD AID IN THE LAST <u>3 MONTHS</u> (SINCE BEGINNING OF THE YEAR)?	____ times	
FAI 3. WHAT FOODS DID YOU RECEIVE DURING THE LAST <u>3 MONTHS</u>? (SINCE BEGINNING OF THE YEAR) (CIRCLE ALL THAT APPLY)	Cereals A Pulses B CSB C Vegetable Oil D Sugar E Salt F	

Food Security Questionnaire 6

State Name: _____	Segment Number: _____ - _____	Household Number: _____
FAI 4. DID YOU TRADE OR SELL ANY OF THE COMMODITIES YOU RECEIVED AS FOOD AID?	Yes 1 No 2	2⇒Skip to FAI 6
FAI 5. WHY DID YOU TRADE OR SELL THE COMMODITIES YOU RECEIVED AS FOOD AID? (CIRCLE ALL THAT APPLY)	To buy/get other foods A To purchase animals B To pay agricultural expenses C To pay for milling D To pay for education expenses E To pay for health expenses F To purchase fuel G To repay debts H Other, specify I	
FAI 6. IN GENERAL, HOW MANY WEEKS DOES FOOD AID LAST AFTER IT IS DISTRIBUTED? (IF LESS THAN 1 WEEK, WRITE 0; IF DON'T KNOW, WRITE 98)	_____ weeks	
FAI 7. WHO COLLECTS FOOD AID? (CIRCLE ALL THAT APPLY)	Male A Female B Children C	
FAI 8. WHO IN THE HOUSEHOLD MAKES DECISION ABOUT THE USE OF FOOD AID COMMODITIES?	Male 1 Female 2 Both male and female 3	
FAI 9. HOW LONG DOES IT TAKE YOU TO GET FROM YOUR HOUSE TO THE FOOD DISTRIBUTION POINT-ONE WAY? (IF LESS THAN 1 HOUR, WRITE 0; IF DON'T KNOW, WRITE 98)	_____ walking hours	
FAI 10. DID YOU RECEIVE SEEDS IN THE LAST AGRICULTURAL/FARMING SEASON?	Yes 1 No 2	
FAI 11. DID YOU RECEIVE HAND TOOLS AND/OR PLOUGH IN THE LAST AGRICULTURAL/FARMING SEASON?	Yes 1 No 2	

INSTRUCTIONS FOR ENUMERATOR

SI3. Does any eligible woman aged 15-49 reside in the household?

Check Household questionnaire - household listing, column HL6. You should have a questionnaire with the Information Panel filled in for each eligible woman.

☐ Yes. ⇒ Go to **QUESTIONNAIRE FOR INDIVIDUAL WOMEN** to administer the questionnaire to the first eligible woman.

☐ No. ⇒ Continue.

SI4. Does any child under the age of 5 reside in the household?

Check Household questionnaire - household listing, column HL7. You should have a questionnaire with the Information Panel filled in for each eligible child.

☐ Yes. ⇒ Go to **QUESTIONNAIRE FOR CHILDREN UNDER FIVE** to administer the questionnaire to caretaker of the first eligible child.

☐ No. ⇒ End the interview by thanking the respondent for his/her cooperation. Gather together all questionnaires for this household and tally the number of interviews completed on the cover page of the Household Questionnaire.