

LABOUR FORCE SURVEY

Household Questionnaire

April 2018



INSTRUCTIONS

Use No.2B pencils only. Do not use pens.

Shade the appropriate bubble or square to the response given, like this: ● or this: ■

Do NOT record responses like this: ⊗ ● ⊙ ⊗ ⊙ ⊙
Bubbles ○ denote questions with one response only.

Squares □ denote questions where multiple responses are permitted.

When required, please print carefully for optimum accuracy.

DISTRICT	URBAN/RURAL	CLUSTER	ED NUMBER	HOUSEHOLD
<input type="radio"/> Corozal <input type="radio"/> Orange Walk <input type="radio"/> Belize <input type="radio"/> Cayo <input type="radio"/> Stann Creek <input type="radio"/> Toledo	<input type="radio"/> Urban <input type="radio"/> Rural	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
			CTV	
			<input type="text"/> <input type="text"/>	

	Interviewer	Field Supervisor	Zone Supervisor	Editor Coder	HQ	Re-interviewer
Name						
Signature						
Date						

RECORD OF VISITS						
Interviewer Calls	Date dd/mm/yy	Time Started	Time Ended	Result	Final Result Code	
1	<input type="text"/> <input type="text"/> <input type="text"/> 1 8	<input type="text"/> : <input type="text"/> <input type="text"/> <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="text"/> : <input type="text"/> <input type="text"/> <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="checkbox"/>	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨ ⑩	
2	<input type="text"/> <input type="text"/> <input type="text"/> 1 8	<input type="text"/> : <input type="text"/> <input type="text"/> <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="text"/> : <input type="text"/> <input type="text"/> <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="checkbox"/>		
3	<input type="text"/> <input type="text"/> <input type="text"/> 1 8	<input type="text"/> : <input type="text"/> <input type="text"/> <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="text"/> : <input type="text"/> <input type="text"/> <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="checkbox"/>		
4	<input type="text"/> <input type="text"/> <input type="text"/> 1 8	<input type="text"/> : <input type="text"/> <input type="text"/> <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="text"/> : <input type="text"/> <input type="text"/> <input type="radio"/> a.m. <input type="radio"/> p.m.	<input type="checkbox"/>		

RESULT CODES

- | | |
|--------------------------|---------------------------------------------------|
| 1=Complete | 7=No Contact |
| 2=Partially Complete | 8=Vacant Lot |
| 3=Vacant dwelling | 9=Under Construction/Not Liveable (uninhabitable) |
| 4=Refusal | 0=Other (specify) _____ |
| 5=Address not found | |
| 6=No suitable respondent | |

No. Household members

No. 14 & Over HH members

SERIAL NUMBER

HOUSEHOLD LISTING MODULE (ALL PERSONS)

HL1	HL2	HL3	HL4	HL5	HL6	HL7
READ		Age	Relation To Head	Sex	Ethnicity	Country of Birth
<p>First, I will be listing your household members. Household members are persons who usually sleep at least 4 nights per week and share a daily meal with the household.</p> <p>Kindly begin with the head of the household and then give me the names of the other members in order of age, from the oldest to youngest.</p>		<p>LAST WEEK SUNDAY, what was your/N's age?</p> <p>0 =Less than 1 year old 98=98 or older 99=DK/NS</p>	<p>What is your/N's relationship to the head of this household?</p> <p>1=Head 2=Spouse/Partner 3=Child 4=In-law (son,daughter) 5=Grandchild 6=Parent/Parent-in-law 7=Other Relative 8=Non-Relative 9=DK/NS</p>	<p>What is your/N's sex?</p> <p>1=Male 2=Female 9=DK/NS</p>	<p>To which ethnic group do you/does N belong?</p> <p>1=Creole 2=Garifuna 3=Maya 4=Mestizo/Hispanic 5=Mennonite 6=East Indian 7=Other 9=DK/NS</p>	<p>In what country were you/was N born?</p> <p>1=Belize 2=Mexico 3=Guatemala 4=Honduras 5=El Salvador 6=USA 7=Other (specify) 9=DK/NS</p>
GO TO NEXT PERSON						
Person Number	Name	Age	Relation	Sex	Ethnicity	Country
1		<input type="text"/>	①②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
3		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
4		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
5		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
6		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
7		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
8		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
9		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1 0		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1 1		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1 2		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1 3		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1 4		<input type="text"/>	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨

HOUSEHOLD LISTING MODULE (ALL PERSONS)

HL1	HL2	HL3	HL4	HL5	HL6	HL7
		Age	Relation To Head	Sex	Ethnicity	Country of Birth
		LAST WEEK SUNDAY, what was your/N's age? 0 =Less than 1 year old 98=98 or older 99=DK/NS	What is your/N's relationship to the head of this household? 1=Head 2=Spouse/Partner 3=Child 4=In-law (son,daughter) 5=Grandchild 6=Parent/Parent-in-law 7=Other Relative 8=Non-Relative 9=DK/NS	What is your/N's sex? 1=Male 2=Female 9=DK/NS	To which ethnic group do you/does N belong? 1=Creole 2=Garifuna 3=Maya 4=Mestizo/Hispanic 5=Mennonite 6=East Indian 7=Other 9=DK/NS	In what country were you/was N born? 1=Belize 2=Mexico 3=Guatemala 4=Honduras 5=El Salvador 6=USA 7=Other (specify) 9=DK/NS
						GO TO NEXT PERSON
Person Number	Name	Age	Relation	Sex	Ethnicity	Country
1	5	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1	6	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1	7	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1	8	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
1	9	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	0	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	1	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	2	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	3	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	4	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	5	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	6	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	7	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨
2	8	□□	②③④⑤⑥⑦⑧⑨	①②⑨	①②③④⑤⑥⑦⑨	①②③④⑤⑥⑦⑨

EDUCATION MODULE (FOR PERSONS 5 YEARS AND OLDER)

ED1	ED2	ED3	ED4	ED5	ED6
Person Number	Name	School	Present Education	Last Education	Not attending/never attended school
	TRANSFER NAMES OF HOUSEHOLD MEMBERS 5 YEARS AND OLDER FROM THE HOUSEHOLD LISTING MODULE	Are you/Is N presently attending school?	In what class/form/level are you/is N presently?	What was the last class/form/level you have/N has completed?	What is/was the MAIN reason you/N are/is not attending/never attended school?
		1=Yes 2=No 9=DK/NS	1=Infant I 2=Infant II 3=Standard I 4=Standard II 5=Standard III 6=Standard IV 7=Standard V 8=Standard VI 9=1st Form 10=2nd Form	11=3rd Form 12=4th Form 13=Associate/6th Form Junior College 14=Bachelors 15=Master's or Higher 16=Other 17=None 18=Never Attended 99=DK/NS	1=Too young 2=Financial Reasons 3=Working For Pay 4=Domestic Duties 5=Transportation 6=Illness/Disability 7=Not Interested in School 8=Other 9=DK/NS
		IF 2 OR 9 GO TO ED5	GO TO NEXT PERSON	IF LESS THAN 14 YEARS CONTINUE, ELSE GO TO NEXT PERSON	GO TO NEXT PERSON
1		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
2		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
3		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
4		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
5		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
6		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
7		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
8		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
9		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
10		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
11		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
12		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
13		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨
14		①②⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	① ⑨ 0①②③④⑤⑥⑦⑧⑨	①②③④⑤⑥⑦⑧⑨

EDUCATION MODULE (FOR PERSONS 5 YEARS AND OLDER)

ED1		ED2	ED3	ED4	ED5	ED6
Person Number		Name	School	Present Education	Last Education	Not attending/never attended school
			Are you/ Is N presently attending school?	In what class/form/ level are you/ is N presently?	What was the last class/form/level you have/N has completed?	What is/was the MAIN reason you/N are/is not attending/never attended school?
			1=Yes 2=No 9=DK/NS	1=Infant I 2=Infant II 3=Standard I 4=Standard II 5=Standard III 6=Standard IV 7=Standard V 8=Standard VI 9=1st Form 10=2nd Form	11=3rd Form 12=4th Form 13=Associate/6th Form Junior College 14=Bachelors 15=Master's or Higher 16=Other 17=None 18=Never Attended 99=DK/NS	1=Too young 2=Financial Reasons 3=Working For Pay 4=Domestic Duties 5=Transportation 6=Illness/Disability 7=Not Interested in School 8=Other 9=DK/NS
			IF 2 OR 9 GO TO ED5	GO TO NEXT PERSON	IF LESS THAN 14 YEARS CONTINUE, ELSE GO TO NEXT PERSON	GO TO NEXT PERSON
1	5		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
1	6		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
1	7		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
1	8		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
1	9		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	0		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	1		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	2		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	3		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	4		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	5		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	6		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	7		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨
2	8		① ② ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ⑨ 0 ① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨	① ② ③ ④ ⑤ ⑥ ⑦ ⑧ ⑨

HOUSING & HOUSEHOLD MODULE

HH1 What type of dwelling does your household occupy?

- Undivided private house
- Part of a private house
- Apartment/Condominium
- Double House/Duplex
- Combined business & dwelling
- Barracks
- Other (Specify _____)
- DK/NS

HH2 Does your household own, lease, rent or squat in its dwelling?

- Own / Hire-purchase
- Lease
- Rent - Private
- Rent - Government
- Rent free
- Squat
- Other (Specify _____)
- DK/NS

HH3 How many bedrooms are there in this dwelling?

- 1 2 3 4 5 6+ DK/NS
-

HH4A What is the MAIN type of toilet facility your household uses?

- Water closet linked to BWS sewer system
- Water closet linked to septic tank
- Pit latrine, ventilated and elevated
- Pit latrine, ventilated and not elevated
- Pit latrine, elevated and not ventilated
- Pit latrine, not ventilated and not elevated
- Other (Specify _____)
- None
- DK/NS → **SKIP TO HH5**

HH4B Is this facility shared with any other household?

- Yes No

HH5 What is the MAIN source of lighting for your household?

- Electricity from BEL
- Electricity from another source
- Gas/Kerosene Lamp
- Candle
- Other (Specify _____)
- None
- DK/NS

HH6 What is the MAIN type of fuel used for cooking?

- Gas (Butane/biogas)
- Wood/charcoal
- Kerosene
- Electricity
- Other (Specify _____)
- Does not cook
- DK/NS

HH7 What is your household's MAIN source of water supply?

- Public piped into dwelling
- Public piped into yard only
- Private piped into dwelling or yard
- Public standpipe
- Protected dug well
- Unprotected dug well
- Private catchment, not piped (vat, drum, water tank, etc.)
- River/Creek/Spring/Stream/Pond
- Other (Specify _____)
- DK/NS

HH8 What is your household's MAIN source of drinking water?

- Bottle/purified water
- Public piped into dwelling or yard
- Private piped into dwelling or yard
- Public standpipe
- Protected dug well
- Unprotected dug well
- Private catchment, not piped (vat, drum, water tank, etc.)
- River/Creek/Spring/Stream/Pond
- Other (Specify _____)
- DK/NS

HH9 What is the main materials of the outer walls?

- No walls
- Cane/Palm/trunks
- Palmetto/Wild cane/Sticks
- Bamboo/Palmetto with mud/white lime
- Stone with mud
- Plywood
- Carton/Cardboard
- Reused wood
- Cement/Concrete
- Stone with lime/concrete
- Bricks
- Cement blocks
- Wood planks/shingles
- Wood and concrete
- Stucco
- Other (Specify _____)

HH10 What is the MAIN material of the floor of this dwelling?

- Earth/ Sand
- Wood planks
- Plywood
- Parquet or polished wood
- Vinyl or asphalt strips/marley
- Ceramic tiles/cement tiles
- Cement/Concrete
- Carpet
- Other (Specify _____)

HH11 How many of the following appliances or equipment does your household own and have in working order?

[READ ALL OPTIONS]

	0	1	2	3	4	4+	DK/NS
a. Air conditioner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Refrigerator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Microwave oven	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Washing machine	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Clothes dryer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Stove (Gas/electric/solar)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Radio/stereo	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. DVD player	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Television	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Electric generator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Mobile/cellular phone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. Computer/laptop	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. Private motor vehicle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. Animal drawn cart	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o. Bicycle or motorbike	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

HH12 Does your household have...

[READ ALL OPTIONS]

	Yes	No	DK/NS
a. Cable/Satellite TV service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Fixed line telephone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Internet Access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>