

DEMOGRAPHIC AND HEALTH SURVEYS
 FAO FOOD INSECURITY EXPERIENCE SCALE MODULE
 MODEL HOUSEHOLD QUESTIONNAIRE

[NAME OF COUNTRY]
 [NAME OF ORGANIZATION]

IDENTIFICATION (1)												
PLACE NAME _____												
NAME OF HOUSEHOLD HEAD _____												
CLUSTER NUMBER				<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>								
HOUSEHOLD NUMBER				<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </table>								
HOUSEHOLD SELECTED FOR MAN'S SURVEY? (1=YES, 2=NO)												
INTERVIEWER VISITS												
	1	2	3	FINAL VISIT								
DATE	_____	_____	_____	DAY <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
				MONTH <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
INTERVIEWER'S NAME	_____	_____	_____	YEAR <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
RESULT*	_____	_____	_____	INT. NO. <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
				RESULT* <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
NEXT VISIT: DATE	_____	_____		TOTAL NUMBER OF VISITS <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
TIME	_____	_____										
*RESULT CODES:				TOTAL PERSONS IN HOUSEHOLD <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
1 COMPLETED				TOTAL ELIGIBLE WOMEN <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT				TOTAL ELIGIBLE MEN <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME				LINE NO. OF RESPONDENT TO HOUSEHOLD QUESTIONNAIRE <table border="1" style="width: 40px; height: 20px; float: right;"></table>								
4 POSTPONED												
5 REFUSED												
6 DWELLING VACANT OR ADDRESS NOT A DWELLING												
7 DWELLING DESTROYED												
8 DWELLING NOT FOUND												
9 OTHER _____ (SPECIFY)												
LANGUAGE OF QUESTIONNAIRE**	<table border="1" style="width: 20px; height: 20px; text-align: center;">0</table> <table border="1" style="width: 20px; height: 20px; text-align: center;">1</table>	LANGUAGE OF INTERVIEW**	<table border="1" style="width: 20px; height: 20px;"></table> <table border="1" style="width: 20px; height: 20px;"></table>	NATIVE LANGUAGE OF RESPONDENT**	<table border="1" style="width: 20px; height: 20px;"></table> <table border="1" style="width: 20px; height: 20px;"></table>	TRANSLATOR USED (YES = 1, NO = 2)	<table border="1" style="width: 20px; height: 20px;"></table>					
LANGUAGE OF QUESTIONNAIRE**	ENGLISH		**LANGUAGE CODES:									
			01 ENGLISH	03 LANGUAGE 3	05 LANGUAGE 5							
			02 LANGUAGE 2	04 LANGUAGE 4	06 LANGUAGE 6							
TEAM	TEAM SUPERVISOR		CAPI SUPERVISOR (2)									
<table border="1" style="width: 40px; height: 20px;"></table>	NAME	<table border="1" style="width: 40px; height: 20px;"></table>	NAME	<table border="1" style="width: 40px; height: 20px;"></table>	NUMBER	<table border="1" style="width: 40px; height: 20px;"></table>						
NUMBER		NUMBER		NUMBER		NUMBER						

(1) This section should be adapted for country-specific survey design.

(2) Remove the section for recording the name and ID number of the CAPI supervisor if the survey does not have CAPI supervisors who are separate from the team supervisors.

FOOD INSECURITY MODULE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	Now I would like to ask you some questions about food. During the last 12 months, was there a time when:		
FS01	You or others in your household worried about not having enough food to eat because of a lack of money or other resources?	YES 1 NO 2 REFUSED TO ANSWER 7 DON'T KNOW 8	
FS02	Still thinking about the last 12 months, was there a time when you or others in your household were unable to eat healthy and nutritious food because of a lack of money or other resources?	YES 1 NO 2 REFUSED TO ANSWER 7 DON'T KNOW 8	
FS03	Was there a time when you or others in your household ate only a few kinds of foods because of a lack of money or other resources?	YES 1 NO 2 REFUSED TO ANSWER 7 DON'T KNOW 8	
FS04	Was there a time when you or others in your household had to skip a meal because there was not enough money or other resources to get food?	YES 1 NO 2 REFUSED TO ANSWER 7 DON'T KNOW 8	
FS05	Still thinking about the last 12 months, was there a time when you or others in your household ate less than you thought you should because of a lack of money or other resources?	YES 1 NO 2 REFUSED TO ANSWER 7 DON'T KNOW 8	
FS06	Was there a time when your household ran out of food because of a lack of money or other resources?	YES 1 NO 2 REFUSED TO ANSWER 7 DON'T KNOW 8	
FS07	Was there a time when you or others in your household were hungry but did not eat because there was not enough money or other resources for food?	YES 1 NO 2 REFUSED TO ANSWER 7 DON'T KNOW 8	
FS08	Was there a time when you or others in your household went without eating for a whole day because of a lack of money or other resources?	YES 1 NO 2 REFUSED TO ANSWER 7 DON'T KNOW 8	