

Eritrea Food Security and Livelihoods assessment

Enumerator Guide

Guide to administering the household questionnaire – reminders and clarifications

Equipment :

For enumerators: Check that a sufficient number of paper copies of your questionnaires are available, and that you have at least two pencils with rubber gum and a functioning sharpener with you. Ensure that you have 10 stones or beans for proportional piling with you.

Also, before starting the nutrition modules make sure that one sample of capsules of Vitamin A, deworming and vaccination tablets, micronutrient powder bags and other nutritious products (plumpy nut, plumpy sup, etc) are available for each enumerator to facilitate the comprehension of respondents.

For anthropometric measurers: Make sure that each couple (team) has an electronic scale with height board, as well as MUAC tapes.

Before starting the interview ensure that the introductory household identifier section (SO1) is completed correctly – MAKE SURE THAT YOU HAVE ALL THE NECESSARY CODES FROM YOUR TEAM LEADERS.

Arriving in the household: After greeting the household members in place, read the ‘*Statement of informants*’ in the front page of the questionnaire and ask for consent from the household to undertake the questionnaire. Explain that you are doing the exercise on behalf of the Government and partners. Assure the household that the information you collect is CONFIDENTIAL and will be used to understand the vulnerability and food security situation of the rural and urban households in Eritrea. Outputs will be used to inform future policy and programming for Government and development partners.

When you arrive in the selected household ask if the head of household is present. If not ask for another adult member of the household to respond to the questions. Explain the reasons for the study. Ask if the person has the time to reply to the questions stating that it will take about 45 minutes. If the person accepts, find a comfortable place to sit and start the interview.

DO NOT MAKE ANY PROMISES OF ASSISTANCE AS A RESULT OF RESPONDING TO THE QUESTIONNAIRE.

>>> *If any particular issues are raised take note of them and report them in your field report*<<<.

SECTION 1: HOUSEHOLD DEMOGRAPHICS

Definition of Household

A household refers to people who live and eat together from one pot for not less than 6 months. A household can consist of ONE or MORE people.

People who are visiting are not a member of the household. Children who do not live in the household or people who have migrated (far and for a period of more than one month) are not part of the household. People who are travelling for a short period (up to one month) are classed as part of the household. Clarify that this refers to the USUAL members of the household (follow the definition of a household above). There will only be one head of household.

Polygamous households >>> Where a male head of household has more than 1 wife then consider them as separate households if each wife is living with her children as a family unit and not eating from same pot even if they have the same husband (i.e. if a man has 3 wives and each wife lives in a different houses then consider them as separate households).

1.01 : FORENAME is sufficient. If the interviewee does not want to give their name then use **MAN** for males and **WOMAN** for females.

1.03 : AGE of HEAD of HOUSEHOLD >>> if the age is unknown, try and estimate based on local events. Children less than 12 months should be noted as '00'.

1.05 : MARITAL STATUS >>> Pay attention to the various option, in particular to the difference between married monogamous and married polygamous, as well as separate and divorced. If marital status = 3 go to 1.06, for all the other options skip next and jump to question 1.07.

1.07 : RECORD SCHOOL LEVEL ATTENDED : Mention the highest level of education attended – if illiterate mention 1.

1.09 : SCHOOL ATTENDANCE : Say YES for drop out (interruption of attendance) or non-attendance (i.e. he/she never started going to school).

1.15 : CHRONIC DISEASES : Examples of chronic diseases (affecting household members for more than 3 months) are: Diabetes, HIV/AIDS, asthma, cardiac failure, epilepsy, hypertension, Parkinson, schizophrenia, glaucoma, rheumatoid arthritis.

SECTION 2: HOUSEHOLD DEMOGRAPHICS

Definition of Migration: Migration refers to those members of the household who left for 6 months or more and did not come back in this period, and to those who left even less than 6 months but do not intend to return before 6 months from the date of their departure.

2.06 : REMITTANCES : The question refers to the frequency of remittances received over the last 5 years - Familiarize with the terms 'frequently' (more than once a year), 'regularly' (once a year), 'occasionally' (less than once a year), 'never'.

2.07 : Transfers : Make sure you refer to the estimated amount received over the last 12 months. If more than one transfer were received in this period include the sum of all amounts.

2.09 : Members who joined the HH : Please include those who joined for not less than one consecutive month, over the last 12 months.

SECTION B : HABITAT AND HOUSEHOLD'S EQUIPMENT.

General statement for this section: Be careful how you word these question as these could appear rude. In particular, questions 3.1 to 3.6 should be asked in such a way that these are not too direct.

3.02, 3.03, 3.04 : components of housing : Observation can help support statements from the respondent. In case you esteem the question offensive just make use of observation.

3.05: number of rooms in the house: Please make sure that you do not include bathrooms/toilets, kitchens and areas for animals (covered or open-air).

3.09: who is collecting firewood: Please make sure that you mark all those that apply - i.e. if father and daughter fetch firewood mark a) and d).

3.12: problems faced whilst collecting firewood: Insecurity (1) can include harassment, sexual assault, theft, robbery, forced bribery, etc.

3.16: contenitors for water: make sure that you ask the daily average of water consumed over the last 7 days. If too complicated ask for water consumed over the last 24 hours. Also, make sure that the household members show you the contenitors they claim to have used so that the capacity of each is assessed for correct data collection.

3.18: responsible for collecting water: Mark all those that apply.

3.19: Type of toilets: The ventilated pit latrine, or ventilated improved pit latrine (VIP), is a pit latrine with a pipe (vent pipe) fitted to the pit, and a screen (flyscreen) at the top outlet of the pipe. Use of buckets or other contenitors to release waste in the street or in the nature can be included in the option: 'Others'.

3.22: Household assets >>> Note Y/N (i.e. 1/0) for **each** of the items that the household owns. If the household does not own the asset write « 0 ». if the item/asset is not functioning write « 0 ». Observation can come to help to support respondent's answers and, in some cases, to raise the attention on those assets that were not mentioned by the respondent.

SECTION 4 : FOOD CONSUMPTION and FOOD SOURCES

DEFINITION OF MEAL >>> A 'meal' is food that is cooked in the household and eaten by household members together at home. Ask how many times the different categories of household members ate a meal last week. Categories = age 12 +, children age 6-12 years, children age 2-5 years.

4.02.: Make sure that you familiarize with groups of food items. Pay particular attention to the difference between fruits and vegetables of orange colour with other fruits and vegetables. 4.02.2 (1 to 17) : NUMBER OF DAYS CONSUMED >>> Even if the food item/group is consumed several times a day just consider as once. Over the week the consumption can be a maximum of 7.

4.02.3 : SOURCE OF FOOD >>> Record only the MAIN source of the food group even if there are multiple sources – ask from where most of the food group is sourced, for example if 55% of the food

group comes from production and 45% comes from market, then record the main source as 'production'. Codes are available in the box at the end of the list of food items.

4.02.2.14 : MILK AND MILK PRODUCTS >>> if milk is only used for tea or coffee then probe for information. If it is only 2 or 3 spoons per cup then include it as 'spices/condiments'. If half a cup of milk is used for tea or coffee several times a day then include it in the category 'milk and milk products'.

4.02.2.7: OTHER VEGETABLES: One tomato or an onion in the sauce shall be considered as condiments, group 17, instead of Other vegetables, group 7.

SECTION 5 : INCOME SOURCES AND livelihoods

INCOME SOURCES >>> Ask several questions to understand the different income sources that the household has and how many people work. If you have a clear idea of the income sources at the beginning of the section it will be easier to answer the questions.

5.01 : NUMBER OF HOUSEHOLD MEMBERS CONTRIBUTING TO REVENUES >>> clarify that this is money brought into the household by any member from any source.

5.02 : 3 MAIN ACTIVITIES >>> Familiarize with the list of codes of activities and select the 3 main activities based on their contribution to the monthly household budget.

5.03 : RELATIVE CONTRIBUTION OF MAIN ACTIVITIES >>> If no clear answer is provided, please use beans or stones for proportional piling. The respondent is asked to divide the 10 beans into three groups reflecting the proportion of contribution of each activity. Then count the stones and include the values. The total must sum up to 100%. If only one activity is mentioned, the budget must be 100% for that activity.

SECTION 6 : CREDIT and EXPENDITURE

CREDIT

6.03: Reasons for contracting debts: Mention the three main, unless only one or two options apply

6.05-6.06: Time required to repay debt: Make sure that the two answers are consistent.

EXPENDITURE:

- **PAY ATTENTION to TIME PERIODS in this section.** Some questions refer to the last 30 days (6.06 to 6.11), some to the last 6 months (6.12).
- **FOOD SUPPLY MODALITIES:** Column 6.9 refers to expenditures in CASH; Column 6.10 refers to quantity (in Kg) of each food consumed from other modalities mentioned in column 6.9. Make sure that all answers are reconducted to unit KG (or LITRE for oil and water).
- **Question 6.12 (6 months recall period):** second column refers to amount (Nafka) spent in CASH, third column to amount (Nafka) spent ON CREDIT.
- **Question 6.12.4: Ask household to specify** if 'clothing/shoes' is part of school uniform – if yes then include in response **6.12.3.** 'Education, school fees, uniform etc'.

- **Question 6.12.17:** If households have a communal electricity bill then divide the total bill by the number of households.

For this section, if the person has difficulties to find the amount spent, ask how much they spend per week and multiply by 4.

Cross-check this section with the income section. If expenses are greater than income then please review both sections.

SECTION 7 : AGRICULTURE

7.03 SIZE of PLOT: 1 Hectare = 10,000 square metres (100 x 100 metres).

7.09.3 Harvested quantity (unit of measurement): if bags or special units please note the number of Kgs.

7.14, 7.15 (agro-inputs): If no fertilizers/chemicals is applied mark 6.

SECTION 8 : LIVESTOCK

8.03 Number of livestock: Observation is required to confirm the respondent's answer. If you esteem that the response is not in line with the observation findings ask the respondent to show his/her animals.

8.05 Calendar of shocks: Please note that calendar refers to the period April 2014-March 2015.

Animals owned, bought, sold, dead: Make sure that animals bought 8.06 are consistent with animals owned 8.03. Also, the total number of heads of each species should tally. If discrepancies arise, ask the respondent to clarify.

8.10: Before asking the question make sure that you are aware of the major symptoms of the most common livestock diseases to mark the right answer if respondent is not aware of the specific names of diseases.

8.16, 8.17 migration: this questions refer to ordinary periodical migration.

8.22, 8.23 non-ordinary migration: this questions refer to unusual migration (i.e. to look for water, pastures due to drought in the area pastorals usually go).

SECTION 9 : SHOCKS and SURVIVAL STRATEGIES

9.01 Shocks or difficulties last 12 months: A shock is defined as an unexpected natural or man-made event (usually with a sudden onset) having an impact on the safety of household members and/or on their livelihoods.

9.02A: Shocks: Help the respondent to understand that they should mention all the problems which have affected them. Familiarize with the list of shocks in advance. Do NOT read out the list – the interviewee has to respond spontaneously. The severity refers to their impact on the normal life and safety of households. If 'Other' (24) is noted specify what the problem is.

9.02.B: impact of shocks: Ask if each of the shocks has created a decrease in or loss of income – include both cash and in-kind income.

9.02E: Coping strategies: Ask how the household managed the effects of the shock – use the 'coping strategies' codes 01 – 27. Familiarize with the list of strategies to reduce time of the interview. Do not mention strategies. Include the main strategy mentioned by the respondent for each shock.

9.04, 9.05: PAY ATTENTION to TIME PERIODS in this section. Question 9.04 refers to the last 7 days (food coping strategies), question 9.05 to the 30 days (livelihood coping strategies).

9.05 livelihood coping: Four possible answers are displayed:

- **No**, because I did not need to
- **No, because I already used these assets** and cannot continue → this implies that HH would have considered using them if they had the chance
- **Yes**, I did
- **NA**; not applicable can be used only in those cases where the coping strategy can not be adopted (e.g. a Head of household cannot withdraw children from school if he/she has no children; he/she cannot sell house or plot of land if he/she does not own any; he/she cannot spend savings if he/she has no savings at all, etc)

SECTION 10 : ASSISTANCE

10.1 External assistance: external assistance refers to food/cash/other aid provided by the government or a humanitarian organization. Food shared, gifts or assets from relatives or friends are not included in this question.

SECTION 11 : MARKETS

11.2 to 11.11: Please refer to the closest market, or to the one the respondent usually go to (if not the closest one).

NUTRITION MODULES: *Nutrition modules are conducted to collect information on health, nutrition, parental care and practices, hygiene and food consumption of women and children 0-59 months. These modules are administered to women 15-49, mothers or primary caregivers of children 0-59.*

NUTRITION MODULE 1 – Women's health and practices of hygiene:

This module shall be administered to each woman in reproductive age (15-49 years) who live in the household. Use one row to refer information collected by one woman. Complete all the questions M1.1. to M1.12.17 for the first woman, then do the same for the second, and so on for each woman 15-49 years of age in the household.

Question M1.6: show sample of capsule of Vitamin A after asking the question

Question 1.8 to 1.11: these questions shall be administered to women with at least one child aged 0-5 years.

Question M1.12: These food items reflect those in section 4 (for the household). Familiarize with this section. Pay attention that this module refers to women's consumption over the last 24 hours. Before asking this question, state clearly that a small quantities of milk, tomatoes, vegetables, meat etc shall not be considered as food items, but rather as condiments (option 17).

NUTRITION MODULE 2 – Maternal breastfeeding:

This module shall be administered to mothers or primary caregivers of children aged 0 to 23 months (i.e. less than 2 years old). Complete all the questions M2.1. to M1.12.19 for the first child, then do the same for the second, and so on for each 0-23 months of age in the household. If no child of such age live in the household skip this section.

M2.1: After asking the name of the child(ren) go back to household roster (first page after front page of the questionnaire) and make sure that you transcribe the same ref. ID number.

M.2.4: Ask mothers to show birth certificate, if available.

M.2.8: Show sample of folic acid/iron dose for pregnant women

M2.11: Colostrum is a yellow milky fluid produced by mothers during the first few days after giving birth, before true milk appears. It contains proteins, carbohydrates, fats, vitamins, minerals, and proteins (antibodies) that fight disease-causing agents such as bacteria and viruses.

M2.12: ORS is a rehydration solution of water, sugar and salt (easily home-made), plus micronutrients like zinc if available, usually recommended for children affected by diarrhoea.

NUTRITION MODULE 3 – child feeding and complementary feeding

This module tries to capture adequate introduction of foods in a child's diet complementary to breast milk or formulas. Ideally, infants should be breastfed within one hour of birth, breastfed exclusively for the first six months of life and continue to be breastfed up to 2 years of age and beyond. Starting at 6 months, breastfeeding should be combined with safe, age-appropriate feeding of solid, semi-solid and soft foods.

This module shall be administered to mothers or primary caregivers of children aged 6 to 23 months. Complete all the questions M3.1. to M3.8p for the first child, then do the same for the second, and so on for each 6-23 months of age in the household.

If no child of such age live in the household skip this section. If you have doubts about children's age being more or less of 6 months, ask respondents to show birthday certificate. If mother states that the child is 6 months or more and a birthday certificate is not available, include the child.

M3.1: After asking the name of the child(ren) go back to household rooster (first page after front page of the questionnaire) and make sure that you transcribe the same ref. ID number. This number must coincide with the one of the same child in Module 2.

M3.2: This question refers to the introduction of complementary foods to breastfeeding. The introduction of soft, semi-solid and solid complementary foods does not necessarily coincide with weaning or the end of breastfeeding. This question is key and must be clearly addressed by enumerator and answered by respondent. Any food else than liquids (e.g. breast-milk, formula, animal milk, fruit juice, etc) is to be considered as soft, semi-solid or solid. A complete list of solid or semi-solid is included in question M3.8.

M3.5, m3.6, M3.7: Please show the respondents samples of specific high concentration nutritious food (plumpy nut/soup/dose, CSB, Micronutrient powders).

M3.8: for ease of memory ask the mother what the child ate from the morning of the day before the interview until the morning of the interview. Familiarize with the module and list of food items to optimize time of the interview. As for the previous modules, negligible quantities shall not be considered as food groups consumed but shall be included in 3.8p condiments.

NUTRITION MODULE 4 – Health and access to health care

This module tries to capture preventive treatments to diseases having an impact on nutritional status of the children 0-59. This module shall be administered to mothers or primary caregivers of children aged 0 to 59 months (less than 5 years of age). As per the previous modules, complete all the questions M4.1 to M4.18p for the first child, then do the same for the second, and so on for each 0-59 months of age in the household.

Whenever possible, vaccinations book should be scrutinized by enumerators to confirm mother's statements.

M4.1: After asking the name of the child(ren) go back to household rooster (first page after front page of the questionnaire) and make sure that you transcribe the same ref. ID number. This number must coincide with the one of the same child in Modules 2 and 3, if applicable (when the child is below 23 months of age).

M4.3: Make sure that the actual mother's or primary caregiver's number from the household rooster in the demographic section (page 2) is transcribed here.

M4.4.: Note that anti-measles vaccination is usually carried out after the 9th month since birth. Make sure you have sample.

M4.5: the Bacillus Calmette–Guérin (BCG) is an ant-tuberculosis vaccine. Make sure you have sample. In case of absence of vaccination book, enumerators could request the mum to show the scar of the vaccination on the left arm.

M4.6, M4.7: Capsules of Vitamin A and deworming tablets should be brought along by enumerators.

M4.8: IMN = Impregnated Mosquito Net (using anti-mosquito chemicals or repellent)

M4.15: Diarrhoea is defined by three or more soft or liquid stool during the last 24 hours.

NUTRITION MODULE 5 – Anthropometric measurement

It is **extremely** important that the women you interview agree to join you with their children for measurement. You should repeat the purpose of the visit and the survey and obtain the consent of the mother or caretaker before measuring the child. **Do not pressure anyone into consent.**

Anthropometric measurers must work in teams composed by 2 measurers. Each team shall be provided the following materials:

- *Equipment bag*
- *List of assigned households and their addresses (or location)*
- *Weighing scale*
- *Scale hooks*
- *Weighing pants or hanging swing*
- *Storage bag for pants*
- *Piece of rope for scales*
- *Storage box for scales*
- *Height/length measuring board*
- *Sliding head/foot pieces*
- *Clipboard*
- *Stapler and box of staples*
- *Pencils and pencil sharpener, Eraser, Pens*

A specific training of anthropometric measurers, including measurement of height, weight, MUAC, Oedema must be conducted by qualified staff from UNICEF and/or Ministry of Health. A session of standardisation is mandatory in a nutrition training in order to reduce measurement errors during data collection. During this session, ideally each enumerator measures 10 children aged 6 to 59 months twice. The anthropometric data are entered into a computer by the trainer and the accuracy of measurement from each measurer is assessed.

This module captures anthropometric measurement of all children aged 6 – 59 months (less than 5 years and more than 6 months of age) and must be completed by anthropometric measurers. It is important that this sheet remains attached to the same household questionnaire to avoid risks of losing them.

As per the previous modules, anthropometric measurers will have to up all the empty boxes for the first child (first row), then do the same for the second, and so on for each of the children aged 6-59 months of age in the household.

The anthropometrists will have to transcribe in the first column the code of each child from the initial demographic household roster (page 2 of the questionnaire). This number must coincide with the one of the same child in Modules 2, 3 (if applicable) and 4 (always applicable). The number of mother or primary caregiver must be also included in the third column. This must coincide with the one from other modules.

Height must be measured with the precision of millimetres (0,1cm), whereas weight with the precision of decigram (0,1Kg). The last column (comments) can be used for referring specific cases

such as clinical malnutrition to team leaders. Cases of Oedema must be automatically referred to team leaders and relevant staff for immediate treatment. A referral sheet can be also used by each anthropometrist to draw their attention on cases of extreme malnutrition for referral.

NUTRITION MODULE 6 – MUAC Women 15-49

First column: please include the number of each woman from the household roster (page 2). This must correspond with the number in module nutrition 1.

Second Column: Cross-check that the name and numbers correspond with household roster (page 2) and module nutrition 1.

MUAC measurement: enumerators must be duly trained on techniques for appropriate measurement before data collection.

REMEMBER – YOU ARE PART OF A TEAM!!

**CALL YOUR TEAM LEADER OR SUPERVISOR IF YOU HAVE ANY PROBLEMS OR
QUESTIONS – NO QUESTION IS TOO SMALL – QUALITY COUNTS!!**

GOOD LUCK!!

1 Anthropometric Measurement Guide

The end of Section 10 is specifically related to physical measurements. It is **extremely** important that the women you interview agree to join you with their children for measurement.

You should repeat the purpose of the visit and the survey and obtain the consent of the mother or caretaker before measuring the child. **Do not pressure anyone into consent.**

Who do you take height and weight measurements of?

- All the women in the household between the age of 15 to 49 years, excluding those that are pregnant

Who do you take MUAC measurements of?

- All the women in the household between the age of 15 to 49 years, even if pregnant.
- The babies of those women between 6 and 59 months (i.e. below 5 years)