

Household Savings Project – July 2013 – Survey Version 1

FO: Fill as much of this information before you start the interview as you can.

O1. Individual ID:

O2. Is the phone number listed on the checklist in use by the respondent? 1. ☐ Yes 2. ☐ No

O3. If not, what is a current active phone number for the respondent?

O4. Is this a phone or in-person interview? 1. ☐ Phone 2. ☐ In-person

O5. a. FO Name: b. FO ID:

O6. Did the respondent consent to the survey? 1. ☐ Yes 2. ☐ No **(End Survey)**

O7. Survey start (use 24 hour clock): :

Section P – Background and Labor Supply

First I would like to ask you a few questions about how much you usually work in a week

P1.	How old are you?	<input type="text"/> years old -98. <input type="checkbox"/> Refused -99. <input type="checkbox"/> Don't know
P2.	Can you tell me how many hours you spend on the following activities? FO: Small business time is SEPARATE from time on the shamba. Also, if the business is shared between spouses, use option "e". If the respondent is an employee, use option "f".	Per: (FO: Circle One) DAY WEEK a. <input type="checkbox"/> working on my own shamba b. <input type="checkbox"/> working on others' shamba c. <input type="checkbox"/> working as a casual d. <input type="checkbox"/> working at a salaried job e. <input type="checkbox"/> working on my own small business f. <input type="checkbox"/> working for someone else's small business g. <input type="checkbox"/> household tasks / taking care of children h. <input type="checkbox"/> herding livestock
P3.	Can you tell me how much income you receive on average? Please include all revenues from any business before spending. Please also include your share of any income you earn together with your spouse. (FO: Circle interval of time)	Ksh <input type="text"/> per: DAY WEEK MONTH -98. <input type="checkbox"/> Refused -99. <input type="checkbox"/> Don't know
P4.	Do you currently operate a small non-farm business, either on your own or together with a spouse?	1. <input type="checkbox"/> Yes, on my own 2. <input type="checkbox"/> Yes, jointly with my spouse 3. <input type="checkbox"/> Yes, both on my own and together with spouse 4. <input type="checkbox"/> No
P5.	Can you please tell me the average profit you have now or when your business was last operational?	Ksh <input type="text"/> per: DAY WEEK MONTH -97. <input type="checkbox"/> Never opened a business -98. <input type="checkbox"/> Refused -99. <input type="checkbox"/> Don't know

Section Q. Mental Accounting and Savings Habits

Now I have a few questions about how you manage your money.

Q1.	Which statement best describes the way you think about your money? (FO: Read Options)	<p>1. <input type="checkbox"/> Sina bajeti ama mafungo ya pesa ya kando kwa matumizi tofauti. Mimi hujumuisha pesa zangu kisha kuamua jinsi ya kutumia mahitaji yanapotokea. (I don't have a budget or separate pools of money for different expenses. I combine all my money together and decide where to spend it when expenses come up.)</p> <p>2. <input type="checkbox"/> Nina bajeti akilini, lakini inaweza badilika kutegemea mapato na matumizi. (I have a budget in mind, but it's very flexible depending on my income and expense.)</p> <p>3. <input type="checkbox"/> Nina bajeti akilini. Inaweza badilika, lakini kuna mahitaji mengine ambayo ninastahili kugaramia. (I have a budget in mind. It is flexible, but there are some expenses I should cater for.)</p> <p>4. <input type="checkbox"/> Nina bajeti akilini, mimi huizingatia vilivyo. (I have a budget in mind, and I am strict about maintaining it.)</p> <p>-99. <input type="checkbox"/> Don't know</p>
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Section A. Budget

Could you tell me how you **PLAN** to budget your average current income? I am not asking about how you spent your money in the past, but rather how you have budgeted for your money in the future.

Accounts (FO: Do NOT Read)		How much do you budget for this account? (FO: This should correspond to P3, the respondent's income)	Suppose you need to cater for an unexpected 1,000 KSH expense. Would you reduce your money for (account) to meet that unexpected expense? 1. Yes 2. No	Do you store money for (account) in a separate place? 1. Yes 2. No
1. Home investments	9. School fees			
2. Land investments	10. ROSCAs (- Specify)			
3. Livestock investments	11. Welfare			
4. Farm investments	12. Food			
5. Business investments	13. Transport			
6. Savings (General)	14. Rent			
7. Emergencies	15. Debt			
8. Health	16. Leisure			
	17. General / Miscellaneous			
	18. Other (FO: Write below)			

A0	I budget: (FO: Circle One)	DAILY	WEEKLY	MONTHLY
A1				
A2				
A3				
A4				
A5				
A6				
A7				

Q2.	Which accounts are most important to leave alone? (FO: List at most 3 accounts, using 1. Home Investments, 9. School Fees, etc.)	1 st : _____ 2 nd : _____ 3 rd : _____ OR B. <input type="checkbox"/> All accounts are equally important												
Q3.	Do you have any important goals that you are currently saving for? (FO: Do NOT read options. Mark all that apply. If the account is not listed in Section A, ask whether it should be included or not.)	<table border="0"> <tr> <td>0. <input type="checkbox"/> No current goals</td> <td>6. <input type="checkbox"/> Savings (General)</td> </tr> <tr> <td>1. <input type="checkbox"/> Home investments</td> <td>7. <input type="checkbox"/> Emergencies</td> </tr> <tr> <td>2. <input type="checkbox"/> Land investments</td> <td>8. <input type="checkbox"/> Health</td> </tr> <tr> <td>3. <input type="checkbox"/> Livestock investments</td> <td>9. <input type="checkbox"/> School Fees</td> </tr> <tr> <td>4. <input type="checkbox"/> Farm investments</td> <td>10. <input type="checkbox"/> Other: _____</td> </tr> <tr> <td>5. <input type="checkbox"/> Business investments</td> <td>-99. <input type="checkbox"/> Don't know</td> </tr> </table>	0. <input type="checkbox"/> No current goals	6. <input type="checkbox"/> Savings (General)	1. <input type="checkbox"/> Home investments	7. <input type="checkbox"/> Emergencies	2. <input type="checkbox"/> Land investments	8. <input type="checkbox"/> Health	3. <input type="checkbox"/> Livestock investments	9. <input type="checkbox"/> School Fees	4. <input type="checkbox"/> Farm investments	10. <input type="checkbox"/> Other: _____	5. <input type="checkbox"/> Business investments	-99. <input type="checkbox"/> Don't know
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4. <input type="checkbox"/> Farm investments	10. <input type="checkbox"/> Other: _____													
5. <input type="checkbox"/> Business investments	-99. <input type="checkbox"/> Don't know													
Q4.	FO: (Do NOT Read) How close was the respondent's original, REPORTED budget to their reported income?	<table border="0"> <tr><td>1. <input type="checkbox"/> Exact or very close</td></tr> <tr><td>2. <input type="checkbox"/> Somewhat close</td></tr> <tr><td>3. <input type="checkbox"/> Not close at all</td></tr> </table>	1. <input type="checkbox"/> Exact or very close	2. <input type="checkbox"/> Somewhat close	3. <input type="checkbox"/> Not close at all									
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2. <input type="checkbox"/> Somewhat close														
3. <input type="checkbox"/> Not close at all														

Q5.	Would you say that you are someone who saves and/or invests money regularly, sometimes, rarely, or never? (FO: Clarify that even small sums count)	1. <input type="checkbox"/> Regularly 2. <input type="checkbox"/> Sometimes 3. <input type="checkbox"/> Rarely 4. <input type="checkbox"/> Never -99. <input type="checkbox"/> Don't know
Q6.	Is saving and investment a priority for you?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No -99. <input type="checkbox"/> Don't know
Q7.	How often do you feel stressed and anxious (about life in general)? (FO: Read Options)	1. <input type="checkbox"/> Often 2. <input type="checkbox"/> Sometimes 3. <input type="checkbox"/> Rarely 4. <input type="checkbox"/> Never -99. <input type="checkbox"/> Don't know
Q8.	If you received Ksh 10,000 today, what would you do with it? Please list off everything you would use the money for, and how much you would put to each purpose. (FO: Do NOT read options)	a. Ksh [] to educational expenses b. Ksh [] to investments in the farm c. Ksh [] to investments in the home d. Ksh [] to investments in a business e. Ksh [] for food f. Ksh [] to pay off debts g. Ksh [] welfare / gifts or loans to others h. Ksh [] on leisure i. Ksh [] saved for future j. Ksh [] Other: _____ -99. <input type="checkbox"/> Don't know
Q9.	According to my records, you participated in IPA's household savings project in 2009. Did your participation in the project lead you to make any changes in how you manage your finances? (FO: Do NOT read options. Mark all that apply)	1. <input type="checkbox"/> Did not help me because I already had a bank account 2. <input type="checkbox"/> Did not help me because I didn't have funds 3. <input type="checkbox"/> Did not help me because _____ 4. <input type="checkbox"/> Helped me open a bank account that I use(d) 5. <input type="checkbox"/> Helped me to plan better 6. <input type="checkbox"/> Learned about savings and bank accounts 7. <input type="checkbox"/> Prioritized savings more (generally) 8. <input type="checkbox"/> Prioritized savings for specific accounts (FO: use savings accounts from Q3) _____ 9. <input type="checkbox"/> Helped me because _____ 10. <input type="checkbox"/> Other _____ -99. <input type="checkbox"/> Don't know

Thank the respondent for their time and give the gift. Then fill the questions below and double-check that all questions are answered, time intervals are circled, and that the survey is ready for data entry.

O8.	Individual ID (Please look at checklist, NOT the first page!):	<input type="text"/>
O9.	Did the respondent receive the 20 Ksh airtime or notebook?	1. <input type="checkbox"/> Airtime 2. <input type="checkbox"/> Notebook
O10.	Survey End (use 24 hour clock):	<input type="text"/> : <input type="text"/>
O11.	Survey Date:	<input type="text"/> July <input type="text"/> Aug