

# CHINA ECONOMIC, POPULATION, NUTRITION, AND HEALTH SURVEY

## 1993 HOUSEHOLD DIETARY SURVEY

Province (District):	21 Liaoning	32 Jiangsu	37 Shandong	41 Henan	<input type="checkbox"/> <input type="checkbox"/> T1
	42 Hubei	43 Hunan	45 Guangxi	52 Guizhou	
Urban Site: 1		Rural Site: 2		<input type="checkbox"/> T2	
City: _____		County: _____		<input type="checkbox"/> T3	
Neighborhood: _____		Village(Town): _____		<input type="checkbox"/> T4	
Household Sequence Number: _____		Household Sequence Number: _____		<input type="checkbox"/> T5	
Name of Interviewer: _____					
Date of Interview: ____Year ____Month ____Day				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> T7	
Completion Evaluation: <u>1 Good</u> <u>2 OK</u> <u>3 Poor</u>				<input type="checkbox"/> CO	
Name of Verifier: _____					

1. Name and line number of the most important person in planning meals in the household. Name\_\_\_\_ Line Number  V1  
 Name and line number of the assisting person in planning meals in the household. Name\_\_\_\_ Line Number  V2
2. Name and line number of the most important person in preparing meals in the household. Name\_\_\_\_ Line Number  V3  
 Name and line number of the assisting person in preparing meals in the household. Name\_\_\_\_ Line Number  V4
- Survey of household major food sources for the last month.

**TABLE 1**

Code 3	Item 4	State Store Level Price		State Store Market Price		Free Market		Household-Produced	
		Consumed?*( 1/0) 5	Quantity? 6	Consumed?*( 1/0) 7	Quantity? 8	Consumed?*( 1/0) 9	Quantity? 10	Consumed?*( 1/0) 11	Quantity? 12
V5 1	rice	V6 <input type="checkbox"/>	V7 <input type="text"/>	V8 <input type="checkbox"/>	V9 <input type="text"/>	V10 <input type="checkbox"/>	V11 <input type="text"/>	V12 <input type="checkbox"/>	V13 <input type="text"/>
2	wheat flour	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
3	other grains	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
4	cooking oil	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
5	eggs	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
6	pork (or beef or mutton)	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>
7	sugar	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

\* Record 1 if bought; otherwise, record 0.

**TABLE 2 RECORD OF HOUSEHOLD FOOD AMOUNTS**

Household ID: \_\_\_\_\_ Province (T1) \_\_\_\_\_ Site (T2) \_\_\_\_\_ City (County) (T3) \_\_\_\_\_ Neighborhood (Town/Village) (T4) \_\_\_\_\_ Household (T5) \_\_\_\_\_

Food Code (V14)	Amount purchased or grown (jin) (V24)		Amount discarded (jin) (V25)		Amount purchased or grown (jin) (V24)		Amount discarded (jin) (V25)		Amount purchased or grown (jin) (V24)		Amount discarded (jin) (V25)		Amount purchased or grown (jin) (V24)		Amount discarded (jin) (V25)		Amount purchased or grown (jin) (V24)		Amount discarded (jin) (V25)		
	Each Day																				
Food Name																					
Initial Amount on Hand (jin) (V15)																					
Day 1 (V16)																					
Day 2 (V17)																					
Day 3 (V18)																					
Day 4 (V19)																					
Total (jin) (V20)																					
Total Remaining (jin) (V21)																					
Actual Consumption (jin) (V22)																					
Consumption per Person per Day (gm) (V23)																					

**TABLE 3 RECORD OF HOUSEHOLD MEALS PER PERSON PER DAY**

Household ID: \_\_\_\_\_ Province (T1) \_\_\_\_\_ Site (T2) \_\_\_\_\_ City (County) (T3) \_\_\_\_\_ Neighborhood (Town/Village) (T4) \_\_\_\_\_ Household (T5) \_\_\_\_\_

Line Number(A1)*	□□				□□				□□				□□				□□				□□				Remark				
Name																													
Age (years) (V26)	□□□				□□□				□□□				□□				□□□				□□□				□□□				
Gender** (V27)	□				□				□				□				□				□				□				
Occupation (V28)																													
Activity Level*** (V29)	□				□				□				□				□				□				□				
Time	Morning+ V36	Noon+ V37	Dinner+ V38	Snack+ V39	Morning V36	Noon V37	Dinner V38	Snack V39	Morning V36	Noon V37	Dinner V38	Snack V39	Morning V36	Noon V37	Dinner V38	Snack V39	Morning V36	Noon V37	Dinner V38	Snack V39	Morning V36	Noon V37	Dinner V38	Snack V39	Morning V36	Noon V37	Dinner V38	Snack V39	Total Person-days
Day 1 (V30)																													
Day 2 (V31)																													
Day 3 (V32)																													
Day 4 (V33)																													
Number of meals/person (V34)																													
Calculate number of person-days (V35)																													

\* Line number for guests is -2.

\*\* 1 male 2 female

\*\*\* 1 very light physical activity (working in a sitting position, e.g., office worker, watch repairer, etc.)

3 moderate physical activity (student, driver, electrician, metal worker, etc.)

5 very heavy physical activity (loader, logger, miner, stonecutter, etc.)

+ 1 eat meal at home 0 eat no meal at home

2 light physical activity (working in standing position, e.g., salesperson, laboratory technician, teacher, etc.)

4 heavy physical activity (farmer, dancer, steel worker, athlete, etc.)

6 no working ability (under age seven)

