



**Batch Sequence No**


# SSA: UHSNET

## Assessing Impacts of Women’s Dispossession from Land and Home

### Staff details and survey time

Name of interviewer: .....

Date of interview:

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Name of supervisor: .....

Starting time: .....

Completed ..... 1

Partially done..... 2 *(Reasons for partial response should be explained in the remarks)*

Interviewer remarks:

.....

.....

.....

**Supported by: HLRN-HIC**

## Community Survey Questionnaire

### Introduction

Greetings! My name is \_\_\_\_\_ (*mention name and show ID card where necessary*). I am an enumerator from Shelter and settlements Alternatives: Uganda Human Settlements Network (SSA: UHSNET).

Shelter and Settlements Alternatives: Uganda Human Settlement Network (SSA: UHSNET) is a national network organization that brings together different stakeholders in the human settlements sector to more effectively address issues and challenges affecting human settlements in Uganda. SSA: UHSNET is partnering with Housing and Land Rights Network of the Habitat International Coalition (HIC-HLRN) to implement a project titled "*Assessing Impacts of Women's Dispossession from Land and Home.*"

We are conducting a survey on the condition of women in this area affected by a threatened eviction so as to gather information about potential losses and damage to you including to your wealth, wellbeing, and habitat in case of displacement, or other losses of home or land. It will take us one hour of your time and the information you give will be confidential.

Would you like to take part in this survey?

If yes, thank you for taking part in this important survey.

If No, (say thank you and move on to the next house)

<b>Section A: Identification Particulars</b>	
Name of respondent	
Telephone number	
District	
Division	
Parish	
Village/Zone	

1. Complete the table below based on questioning the respondent to find out all the current members of her household where she is living now

No.	Current HH member	Relationship	Gender	Year of birth/Age	Education level	Employment status
1	Self	Self	Female			
2						
3						
4						
5						

2. Where did you live originally?

Name of home of origin: ..... Location: .....

3. Please tell me why you left your original home (and when) and also all the reasons why you have moved subsequently, so we can get the story of your housing history

.....  
 .....

4. Are you discriminated in this community based on your identity? If so, Why?

.....  
.....  
**Section B: Economic Values and Assets (household)**

**a. Structure (dwelling and other)**

1. If you are to replace your house, what would be the cost?

(a) UGX 0–5,000,000	(b) UGX 6,000,000–10,000,000
(c) UGX 11,000,000–20,000,000	(d) > UGX 20,000,000

2. What is the type of occupancy?

(a) Tenant ..... (b) Owner occupied ..... (c) Any other .....

3. If renting, how much is spent per month? .....

4. If its owner occupied, how was it acquired? .....

5. If any other, specify.....

6. How did you acquire this land?  
.....  
.....

7. What is the size of the land? How much do you pay for it? And how are you using it?  
.....  
.....

8. What other non-economic benefits do you get from this land/ plot?  
.....  
.....

9. Where do you get water?

- i. Tap in house
- ii. Tap in compound
- iii. Kiosk
- iv. Other (specify) \_\_\_\_\_

10. Do you have any other human-made water sources?  
.....

11. Are there areas for waste disposal? i. Yes..... ii. No.....

12. What toilet facilities do you use?

- i. Latrine in compound
- ii. Communal latrine
- iii. Pit latrine
- iv. Other (specify) \_\_\_\_\_

**b. Contents (personal and household articles/livelihoods inventory)**

1. Now I would like to ask you about assets owned by your household.

No	Type of assets	Number	Total estimated value (in UGX)
1	Furniture/Furnishings		
2	Household Appliances e.g. Kettle, Flat iron, etc.		
3	Electronic Equipment e.g. TV., Radio, Cassette, etc.		
4	Generators		
5	Bicycle		
6	Motor cycle		
7	Boat		
8	Mobile phone (s)		
9	Other household assets		

**c. Environment goods and services/ecology**

1. What kind of environmental resources do you use?

(a) Water (b) Building materials (c) Food (d) Medicine (e) Others (specify).....

**d. Equipment/inventory**

1. How do you employ these assets to facilitate your livelihoods?

.....  
 .....

**e. Trees/crops**

1. Do you grow crops on your land? i. Yes .... ii. No ....

2. Please list the kind of crops you grow and their value

No	Trees & crops	Cash	Food	Value
1				
2				
3				
4				

**f. Infrastructure/services/utilities**

1. What social amenities do you have in your place, and how far are they?

i. Hospitals  distance .....

ii. Schools  distance .....

iii. Banks  distance .....

iv. Churches  distance .....

v. Mosques  distance .....

vi. Community gathering points  distance .....

vii. Other (specify) .....  distance .....

**g. Livestock and animals**

1. Do you own any livestock? i. Yes ii. No
2. If yes, what types? .....
3. Estimate their value .....

**h. Subsidies and rations**

1. What items do you receive on a regular basis without pay?
- .....

**i. Vital documents**

1. Do you possess any vital documents? i. Yes ..... ii. No ..... Such as?
  - (a) Academic certificates,
  - (b) National IDs,
  - (c) Birth certificates,
  - (d) ATM cards,
  - (e) Agreements,
  - (f) Driving and riding permits
  - (g) Ration cards
  - (h) Others (specify) .....

**j. Work/livelihood**

1. Do you have any source of income? i. Yes ..... ii. No ..... If yes, mention them.
 

.....

.....
  2. How much is your monthly income? (Personal) (also HH income, if known)
- .....

**k. Loans, other debt payments**

1. Do you have any loans or debts and what did you use the money for?
 

.....
2. How would it affect you in case of an eviction?
 

.....

**Section C: Regular Expenditures (household)**

Type of value	Questions				
(a) <b>Bureaucratic and legal fees</b>	1. Are there legal services in your community? i. Yes ... ii. No ...				
	2. How do you benefit from these services?				
	3. How much do you spend on these services daily/monthly/Annually?				
(b) <b>Food</b>	<b>Your food source</b>	<b>Amount</b>	<b>Daily</b>	<b>Weekly</b>	<b>Monthly</b>

		<b>spent</b>						
		Own production						
		Market						
		Others (specify)						
<b>(c) Health care</b>	1. What is the level and frequency of disease incidence do you often suffer in this neighbourhood? .....							
	2. Do you have access to immunization and primary, women health care services. Yes..... ii. No..... If yes, how far from your home?							
	3. How much do you spend on health care per month? .....							
	4. Are you satisfied with the services? i. Yes .... ii. No .... Reasons: .....							
<b>(d) Information</b>	1. What sources of information are available to you on housing and land rights? (a) Social media, (b) TV, (c) newspaper, (d) radio, (e) community meetings, (f) Others (specify) .....							
	2. How much do you spend on accessing this information per day on different sources of information? .....							
<b>(e) Investment</b>	1. Do you use your house for economic activities? i.Yes ..... ii. No .....							
	2. If yes, which economic activities are you engaged in? .....							
	3. How much investment capital did you use? .....							
<b>(f) Public Participation</b>	1. Do you hold community meetings to discuss key challenges affecting the community? i. Yes .... ii. No ....							
	2. If yes, how much does it cost to hold a community meeting? .....							
	3. Other than meetings, how else do you contribute to addressing issues affecting your community and what are the costs? .....							
<b>(g) Transportation Costs</b>	1. What mode of transport is commonly used in your area? .....							
	2. Do you incur expenses on transport? i. Yes ... ii. No ...							
	3. If yes, how much do you spend on transport on the following daily?							
		<table border="1"> <thead> <tr> <th><b>Item</b></th> <th><b>Amount spent</b></th> </tr> </thead> <tbody> <tr> <td>Health facilities</td> <td></td> </tr> </tbody> </table>		<b>Item</b>	<b>Amount spent</b>	Health facilities		
<b>Item</b>	<b>Amount spent</b>							
Health facilities								

	School	
	religious facilities	
	Market	
	Community trainings/meetings	
	Other (specify)	
<b>(h) Education</b>	1. How much do you spend on tuition, registration and school supplies? .....	

**Section D: Social Assets (household)**

**a. Community spaces**

1. What kind of spaces do you have in your community if any?  
.....  
.....

2. Do you have access to these community spaces i. Yes ... ii. No ...

**b. Crèches/childcare services**

3. Do you have places where to leave children while you are at work or away from home? i. Yes ... ii. No ...

Please describe.....  
.....

**c. Cultural heritage/sacred sites/structures**

1. Do you have any culturally relevant sites in your community like Shrines, burial grounds, clan enclaves? i. Yes ... ii. No ...

Please describe .....

**d. Family**

1. I would like to ask you about the qualities of a good family life.

NO	Aspect of family life	Do you consider this to be important?	Are you able to do it currently?	Do you think you will be able to do it after relocation?
1	Feeding my family			
2	Paying school fees without fail			
3	Having quality time to share with family members			
4	Attending extended family gatherings			
5	Participating in religious activities			
6	Participating in community activities			
7	Other:			

**e. Inheritance status**

1. Have you enjoyed any property rights through succession? i. Yes ... ii. No ...

Please describe .....

2. Is this succession gender distributive?

.....

**f. Inviolable/priceless values**

1. Do you have any personal/ household items, photos, documents of sentimental value that were given or inherited by you/or your family.

NO	Item	Description	Estimated value ( UGX)
1			
2			
3			
4			
5			

**g. Psychological well-being**

1. Did you suffer distress as a result of leaving your original home?

i. Yes ..... ii. No .....

2. How did it impact you?

.....  
 .....

3. Do you anticipate any type of distress as a result of displacement? i. Yes ..... ii. No .....

Please describe .....

**h. Social and institutional capital**

1. I would like to ask you about social bonds.

No	Type of social grouping	Do you have access to this or similar group currently?	Do you think you will have access to this or similar group after relocation?
1	Extended family whose members frequently visit(ed) each other		
2	Active community		
3	religious/other place of worship		
4	Workplace/place of employment		
5	Cooperative society		
6	Savings and credit self-help group		
7	Other type of social grouping		
8	Other:		



**i. Social status/solidarity/cohesion/integration**

1. What roles do you play in your community?

.....  
.....

**Section E: Civic Assets (non-material)**

**a. Social cohesion/ integration**

1. How often do you interact with people from the neighbouring community?

.....  
.....

2. What is the nature of the relationship between your community and the neighbouring community?

.....  
.....

3. Is there tension and conflict within your community and between your community and your neighbours? i. Yes ..... ii. No .....

4. If yes, how has the tension and conflict manifested?

.....  
.....

5. How is the conflict managed?

.....

**b. Political legitimacy**

1. Are you registered as citizens with a NIN? i. Yes ..... ii. No .....

2. Do you feel your rights as a citizen are respected by the authorities? i. Yes ..... ii. No .....

Please describe .....

.....

3. Are you registered to vote in this community? i. Yes ..... ii. No .....

4. Do you have anyone from among you who has been elected in previous elections?

.....  
.....

**c. Political participation**

1. Do you engage in meetings with leaders in your area? i. Yes ..... ii. No .....

2. If yes, how do you participate in these meetings and who organizes them?

.....  
.....

3. What kinds of issues are discussed in these meetings?

.....  
.....

4. How regular are these meetings and do you get feedback?

.....  
.....

**d. Civil order**

1. How does your community and the local leadership handle internal unrest, conflict and other social issues?

.....  
.....

2. What role do women play in the handling of these issues?

.....  
.....

**e. Safety and crime prevention/management**

1. What types of crime/violence do you experience in your community and what's the frequency, if any?

.....  
.....

2. How are these issues handled in your community and how long does it take to solve these cases?

.....  
.....

3. Who is affected most by domestic, sexual, psychological violence in your community?

.....  
.....

**Section F: Public/State Costs/Expenditures**

**a. Bureaucracy and administration:**

1. Which government public administrative offices are available within this community?  
(a) Local council office(s)  
(b) Municipal council  
(c) Judicial/Court  
(d) Police  
(e) Others (specify) \_\_\_\_\_
2. How accessible are these Public administrative offices (*charges involved, time taken, satisfaction derived from the services*)?

**b. Equipment:**

1. Are you aware of any Public service works being implemented in this community (*road works, garbage collection, awareness campaigns, sewage systems, water installations, etc.*)?  
i. Yes ..... ii. No ..... Specify: \_\_\_\_\_
2. Have you ever witnessed an eviction? i. Yes ii. No (If yes, *could you describe how the process was conducted?*)

.....  
.....

3. If yes, what kind of tools/equipment was used? .....

4. What personnel conducted the eviction? .....

**c. Lawyers and judges**

1. I would like to know if there are any public legal aid services in this community (*i.e. LCs, courts, police, others*) Please specify:

**d. Police:**

1. Where is the nearest police station in your community (*how far*)? \_\_\_\_\_

2. How do you assess services of the police? \_\_\_\_\_

(a) Number of personnel? \_\_\_\_\_

(b) Frequency of their presence (during day/night hours)? \_\_\_\_\_

**e. Military:**

1. Do you have any military presence in this area? \_\_\_\_\_

2. How do you assess the military presence? \_\_\_\_\_

(a) Number of personnel? \_\_\_\_\_

(b) Frequency of their presence? \_\_\_\_\_

**f. Services and fees:**

1. Are public services available in your area?

i. Health services Distance.....

ii. Urban planning Distance.....

iii. Sanitation (sewage treatment, garbage collection etc.), Distance.....

iv. Education services Distance.....

v. Public Notice / information) Distance.....

vi. Issuance of national documents Distance.....

vii. Others (specify) .....

End Time: \_\_\_\_\_