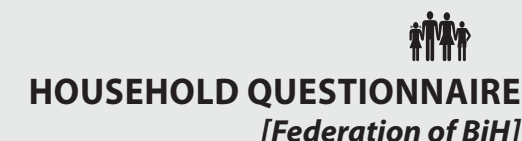


MICS4 INDICATOR	Module	Numerator	Denominator	MDG
10. ACCESS TO MASS MEDIA AND USE OF INFORMATION/COMMUNICATION TECHNOLOGY				
MT.1	Exposure to mass media ^(M)	MT	Number of women aged 15-49 years who, at least once a week, read a newspaper or magazine, listen to the radio, and watch television	Total number of women aged 15-49 years
MT.2	Use of computers ^(M)	MT	Number of young women aged 15-24 years who used a computer during the last 12 months	Total number of women aged 15-24 years
MT.3	Use of Internet ^(M)	MT	Number of young women aged 15-24 who used the Internet during the last 12 months	Total number of women aged 15-24 years
11. SUBJECTIVE WELL-BEING				
SW.1	Life satisfaction ^(M)	LS	Number of women aged 15-24 years who are very or somewhat satisfied with their family life, friendships, school, current job, health, where they live, how they are treated by others and how they look	Total number of women aged 15-24 years
SW.2	Happiness ^(M)	LS	Number of women aged 15-24 years who are very or somewhat happy	Total number of women aged 15-24 years
SW.3	Perception of a better life ^(M)	LS	Number of women aged 15-24 years whose life improved during the last one year and who expect that their life will be better after one year	Total number of women aged 15-24 years
12. TOBACCO AND ALCOHOL USE				
TA.1	Tobacco use ^(M)	TA	Number of women aged 15-49 years who smoked cigarettes or used smoke or smokeless tobacco products on one or more days during the last one month	Total number of women aged 15-49 years
TA.2	Smoking before age 15 ^(M)	TA	Number of women aged 15-49 years who smoked a whole cigarette before age 15	Total number of women aged 15-49 years
TA.3	Alcohol use ^(M)	TA	Number of women aged 15-49 years who had at least one alcoholic drink on one or more days during the last one month	Total number of women aged 15-49 years
TA.4	Use of alcohol before age 15 ^(M)	TA	Number of women aged 15-49 years who had at least one alcoholic drink before age 15	Total number of women aged 15-49 years

Appendix F: BiH MICS4 Questionnaires

An identical approach to the MICS4 methodology was applied in the FBiH, RS and BD. Questionnaires adapted to the languages and alphabets used in BiH were administered during fieldwork in the FBiH, RS and BD. The questionnaires presented in this Appendix are examples of the Household Questionnaire (including individual cover pages for the FBiH, RS and BD), the Questionnaire for Women Aged 15-49 administered in the FBiH, the Questionnaire for Men Aged 15-49 administered in the RS and the Under-5 Questionnaire administered in BD.



HOUSEHOLD INFORMATION PANEL		HH
HH1. Cluster number: _____	HH2. Household number: _____	
HH3. Interviewer name and code: Name _____	HH4. Supervisor name and code: Name _____	
HH5. Day / Month / Year of interview: _____ / _____ / _____		
HH6. Settlement type: Urban 1 Rural 2	HH7. Region FBiH Canton: Una-Sana Canton.....01 Posavina Canton02 Tuzla Canton03 Zenica-Doboj Canton.....04 Bosnia-Podrinje Canton05 Central Bosnia Canton06 Herzegovina-Neretva Canton07 West Herzegovina Canton.....08 Canton Sarajevo.....09 Canton 10.....10	

WE ARE FROM THE **FEDERAL MINISTRY OF HEALTH – INSTITUTE OF PUBLIC HEALTH OF THE FEDERATION OF BOSNIA AND HERZEGOVINA**. WE ARE CONDUCTING A SURVEY CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE UP TO **20** MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL.

MAY I START NOW?

- Yes, permission given ⇒ Go to HH18 to record the time and then begin the interview.
- No, permission not given ⇒ Complete HH9. Inform your supervisor of this result.

Once all questionnaires for this household have been completed, fill in the following information:

HH8. Name and surname of head of household: _____	
HH9. Result of the household interview: Household questionnaire completed.....01 No household member or no competent respondent at home at time of visit.....02 Entire household absent for extended period of time.....03 Household refused the interview04 Dwelling unit vacant / Address not a dwelling05 Dwelling unit destroyed06 Dwelling unit not found07 Other (specify) 96	HH10. Respondent to household questionnaire: Name: _____ Line Number from Module HL: _____
HH12. Number of women aged 15-49 years: _____	HH11. Total number of household members: _____
HH13A. Number of men aged 15-49 years: _____	HH13. Number of completed Questionnaires for women aged 15-49: _____
HH14. Number of children under age 5: _____	HH13B. Number of completed Questionnaires for men aged 15-49: _____
HH16. Field edited by (Name and code): Name _____	HH15. Number of completed under-5 questionnaires: _____
HH17. Data entry operator (Name and code): Name _____	

HOUSEHOLD INFORMATION PANEL		HH
HH1. Cluster number: _____	HH2. Household number: _____	
HH3. Interviewer name and code: Name _____	HH4. Supervisor name and code: Name _____	
HH5. Day / Month / Year of interview: _____ / _____ / _____		
HH6. Settlement type: Urban 1 Rural 2	HH7. Region: Republic of Srpska 11	

WE ARE FROM THE **MINISTRY OF HEALTH AND SOCIAL WELFARE OF THE REPUBLIC OF SRPSKA**. WE ARE CONDUCTING A SURVEY CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE UP TO **20** MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL.

MAY I START NOW?

- Yes, permission given ⇒ Go to HH18 to record the time and then begin the interview.
- No, permission not given ⇒ Complete HH9. Inform your supervisor of this result.

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HH13B. Number of completed Questionnaires for men aged 15-49: _____	
HH14. Number of children under age 5: _____	HH15. Number of completed under-5 questionnaires: _____
HH16. Field edited by (Name and code): Name _____	HH17. Data entry operator (Name and code): Name _____

HOUSEHOLD INFORMATION PANEL		HH
HH1. Cluster number: _____	HH2. Household number: _____	
HH3. Interviewer name and code: Name _____	HH4. Supervisor name and code: Name _____	
HH5. Day / Month / Year of interview: _____ / _____ / _____		
HH6. Settlement type: Urban 1 Rural 2	HH7. Region: Brcko District of BiH..... 15	

WE ARE FROM THE **DEPARTMENT OF HEALTH AND OTHER SERVICES OF THE GOVERNMENT OF THE BRCKO DISTRICT OF BOSNIA AND HERZEGOVINA**. WE ARE CONDUCTING A SURVEY CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE UP TO **20** MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL.

MAY I START NOW?

- Yes, permission given ⇒ Go to HH18 to record the time and then begin the interview.
- No, permission not given ⇒ Complete HH9. Inform your supervisor of this result.

Once all questionnaires for this household have been completed, fill in the following information:	
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HH13B. Number of completed Questionnaires for men aged 15-49: _____	
HH14. Number of children under age 5:..... _____	HH15. Number of completed under-5 questionnaires: _____
HH16. Field edited by (Name and code): Name _____	HH17. Data entry operator (Name and code): Name _____

HH18.

Record the interview start time

Hour ____

Minutes ____

HOUSEHOLD MEMBER LISTING FORM **HL**

FIRST, PLEASE TELL ME THE NAME OF EACH PERSON WHO USUALLY LIVES HERE, STARTING WITH THE HEAD OF THE HOUSEHOLD.
Enter data for the head of household in line 01. List all household members (HL2), their relationship to the head of household (HL3), and their gender (HL4)

Then ask: ARE THERE ANY OTHER PERSONS WHO LIVE HERE, EVEN IF THEY ARE NOT AT HOME NOW?
If "yes", complete the listing for questions HL2-HL4. Then, ask questions starting with HL5 for each person, one person at a time.
Use an additional questionnaire if all rows in the household member listing form have been used.

	For women aged 15-49	For men aged 15-49 godina	For children aged 5-14	For children under age 5	For children aged 0-17 years
--	----------------------	---------------------------	------------------------	--------------------------	------------------------------

HL1. Line No	HL2. Name	HL3. WHAT IS THE RELATIONSHIP OF (name) TO THE HEAD OF HOUSEHOLD?	HL4. Is (name) MALE OR FEMALE?		HL5. WHAT IS (name)'s DATE OF BIRTH?		HL6. HOW OLD IS (NAME)? Record in completed years. If age is 95 or above, record '95'	HL7. Circle line no. if woman is aged 15-49	HL7A. Circle line no. if man is aged 15-49	HL8. WHO IS THE MOTHER OR PRIMARY CARETAKER OF THIS CHILD? Record line no. of mother/ caretaker	HL9. WHO IS THE MOTHER OR PRIMARY CARETAKER OF THIS CHILD? Record line no. of mother/ caretaker	HL11. Is (name)'s BIOLOGICAL MOTHER ALIVE? 1 Yes 2 No ↘ HL13 8 DK ↘ HL13	HL12. DOES (name)'s BIOLOGICAL MOTHER LIVE IN THIS HOUSEHOLD? Record line no. of mother or '00' for "No"	HL13. Is (name)'s BIOLOGICAL FATHER ALIVE? 1 Yes 2 No ↘ Next Line 8 DK ↘ Next Line	HL14. DOES (name)'s BIOLOGICAL FATHER LIVE IN THIS HOUSEHOLD? Record line no. of father or '00' for "No"
			M	F	98 DK	9998 DK									
01		01	1	2	___	_____	___	01	01	___	___	1 2 8	___	1 2 8	___
02		___	1	2	___	_____	___	02	02	___	___	1 2 8	___	1 2 8	___
03		___	1	2	___	_____	___	03	03	___	___	1 2 8	___	1 2 8	___
04		___	1	2	___	_____	___	04	04	___	___	1 2 8	___	1 2 8	___
05		___	1	2	___	_____	___	05	05	___	___	1 2 8	___	1 2 8	___
06		___	1	2	___	_____	___	06	06	___	___	1 2 8	___	1 2 8	___
07		___	1	2	___	_____	___	07	07	___	___	1 2 8	___	1 2 8	___
08		___	1	2	___	_____	___	08	08	___	___	1 2 8	___	1 2 8	___
09		___	1	2	___	_____	___	09	09	___	___	1 2 8	___	1 2 8	___
10		___	1	2	___	_____	___	10	10	___	___	1 2 8	___	1 2 8	___

Tick here if additional questionnaire was used

Ask again if there are any additional household members.
Probe especially for any infants or small children not listed, and others who may not be members of the family (such as servants, friends) but who usually live in the household.
Enter the names of additional members in the list of household members and complete the form according to the instructions.

Now for each woman aged 15-49 years, write her name and line number and other necessary information in the information panel of a separate **Questionnaire for Women Aged 15 to 49**.
For each man aged 15-49 years, write his name and line number and other necessary information in the information panel of a separate **Questionnaire for Men Aged 15 to 49**.
For each child under age 5, write his/her name and line number AND the line number of his/her mother or caretaker in the information panel of a separate **Under-5 Questionnaire**.
You should now have a separate questionnaire for each eligible woman, each eligible man, and each child under five in the household.

* Codes for HL3: Relationship to the head of household:

01 Head	06 Parent	11 Niece / Nephew
02 Wife / Husband	07 Parent-In-Law	12 Other relative
03 Son / Daughter	08 Brother / Sister	13 Adopted / Fostered / Stepchild
04 Son-In-Law / Daughter-In-Law	09 Brother-In-Law / Sister-In-Law	14 Not related
05 Grandchild	10 Uncle / Aunt	98 Don't know

EDUCATION **ED**

For household members aged 5 and above							For household members aged 5-24 years										
ED1. Line number	ED2. Name and age <i>Copy from Household Member Listing Form, HL2 and HL6</i>		ED3. HAS (name) EVER ATTENDED SCHOOL OR A PRESCHOOL INSTITUTION?		ED4A. WHAT IS THE HIGHEST EDUCATION LEVEL (name) HAS ATTENDED?		ED4B. WHAT IS THE HIGHEST GRADE/YEAR (name) COMPLETED AT THIS LEVEL?		ED5. DURING THIS SCHOOL/ACADEMIC YEAR (2011-2012), DID (name) ATTEND SCHOOL/UNIVERSITY OR PRESCHOOL AT ANY TIME?		ED6. DURING THIS SCHOOL/ACADEMIC YEAR, WHICH LEVEL AND GRADE/YEAR IS (name) ATTENDING?		ED7. DURING THE PREVIOUS SCHOOL/ACADEMIC YEAR, THAT IS (2010-2011), DID (name) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?			ED8. DURING THAT PREVIOUS SCHOOL YEAR, WHICH LEVEL AND GRADE/YEAR DID (name) ATTEND?	
			1 Yes 2 NO ↘ Next Line		Level: 0 Preschool 1 Primary 2 Secondary 3 Higher 8 DK <i>If level=0, skip to ED5</i>	Grade/Year: 98 DK <i>If less than 1 grade/year, enter '00'.</i>	1 Yes 2 No ↘ ED7				Level: 0 Preschool 1 Primary 2 Secondary 3 Higher 8 DK <i>If level=0, skip to ED7</i>	Grade/Year: 98 DK	1 Yes 2 No ↘ Next Line 8 DK ↘ Next Line		Level: 0 Preschool 1 Primary 2 Secondary 3 Higher 8 DK <i>If level=0, go to next person</i>	Grade/Year: 98 DK	
Line	Name	Age	Yes	No	Level	Grade/Year	Yes	No	Level	Grade/Year	Y	N	DK	Level	Grade/Year		
01		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
02		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
03		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
04		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
05		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
06		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
07		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
08		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
09		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		
10		___	1	2	0 1 2 3 8	___	1	2	0 1 2 3 8	___	1	2	8	0 1 2 3 8	___		

WATER AND SANITATION		WS
WS1. WHAT IS THE MAIN SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR HOUSEHOLD?	Piped water (main water-supply) Piped water in apartment/house 11 Piped water in estate 12 Piped water at neighbours 13 Public tap / standpipe 14 Tube Well, Borehole 21 Dug well Covered (protected) well 31 Uncovered (unprotected) well 32 Water from spring Protected spring 41 Unprotected spring 42 Rainwater collection 51 Tanker-truck 61 Surface water (river, stream, dam, lake, pond, canal, irrigation channel) 81 Bottled water 91 Other (specify) 96	11⇒WS6 12⇒WS6 13⇒WS6 14⇒WS3 21⇒WS3 31⇒WS3 32⇒WS3 41⇒WS3 42⇒WS3 51⇒WS3 61⇒WS3 81⇒WS3 96⇒WS3
WS2. WHAT IS THE MAIN SOURCE OF WATER USED IN YOUR HOUSEHOLD FOR OTHER PURPOSES SUCH AS COOKING AND WASHING HANDS?	Piped water (main water-supply) Piped water in apartment/house 11 Piped water in estate 12 Piped water at neighbours 13 Public tap / standpipe 14 Tube Well, Borehole 21 Dug well Covered (protected) well 31 Uncovered (unprotected) well 32 Water from spring Protected spring 41 Unprotected spring 42 Rainwater collection 51 Tanker-truck 61 Surface water (river, stream, dam, lake, pond, canal, irrigation channel) 81 Bottled water 91 Other (specify) 96	11⇒WS6 12⇒WS6 13⇒WS6
WS3. WHERE IS THIS WATER SOURCE LOCATED?	In own apartment/house 1 In own estate 2 Elsewhere 3	1⇒WS6 2⇒WS6
WS4. HOW LONG DOES IT TAKE TO GO TO THE WATER SOURCE, COLLECT WATER, AND COME BACK?	Number of minutes _____ DK 998	
WS5. WHO USUALLY GOES TO THIS SOURCE TO COLLECT WATER FOR YOUR HOUSEHOLD? <i>Probe:</i> IS THIS PERSON UNDER 15 YEARS OF AGE? WHAT GENDER?	Adult woman (age 15+ years) 1 Adult man (age 15+ years) 2 Female child (under 15) 3 Male child (under 15) 4 DK 8	
WS6. DO YOU DO ANYTHING TO THE WATER TO MAKE IT SAFER FOR DRINKING?	Yes 1 No 2 DK 8	2⇒WS8 8⇒WS8

WS7. WHAT DO YOU USUALLY DO TO MAKE THE WATER SAFER FOR DRINKING? <i>Probe:</i> ANYTHING ELSE? <i>Record all items mentioned.</i>	Boil A Add chlorine B Strain it through a cloth C Use water filter (ceramic, sand, composite, etc.) D Solar disinfection E Let it stand and settle F Other (specify) X DK Z	
WS8. WHAT KIND OF TOILET FACILITY DO MEMBERS OF YOUR HOUSEHOLD USUALLY USE? <i>If "flush" or "pour flush", probe:</i> WHERE DOES IT FLUSH TO? <i>If necessary, ask permission to observe the facility.</i>	Flush / Pour flush Flush to piped sewer system 11 Flush to septic tank 12 Flush to pit (latrine) 13 Flush to somewhere else 14 Flush to unknown place / Not sure / DK where 15 Pit latrine Ventilated improved latrine with pit 21 Pit latrine with slab 22 Pit latrine without slab / Open pit 23 Ecological toilet (with composting) 31 Bucket 41 No facility, bush, field 95 Other (specify) 96	95⇒Next Module
WS9. DO YOU SHARE THIS FACILITY WITH OTHERS WHO ARE NOT MEMBERS OF YOUR HOUSEHOLD?	Yes 1 No 2	2⇒Next Module
WS10. DO YOU SHARE THIS TOILET FACILITY ONLY WITH MEMBERS OF OTHER HOUSEHOLDS THAT YOU KNOW, OR IS THE FACILITY FOR PUBLIC USE?	Other households only (not public) 1 Toilet facility for public use 2	2⇒Next Module
WS11. HOW MANY HOUSEHOLDS IN TOTAL USE THIS TOILET FACILITY, INCLUDING YOUR OWN HOUSEHOLD?	Number of households (if less than 10) 0 ____ Ten or more households 10 DK 98	

HOUSEHOLD CHARACTERISTICS		HC
HC1b. WHAT IS THE MOTHER TONGUE OF THE HEAD OF HOUSEHOLD?	Bosnian..... 1 Croatian..... 2 Serbian 3 Romany 4 Other language (<i>specify</i>) 6	
HC2. HOW MANY ROOMS IN THIS HOUSEHOLD ARE USED FOR SLEEPING?	Number of rooms ___	
HC3. <i>Main material of the dwelling floor.</i> <i>Record observation.</i>	Natural floor Earth / Sand 11 Straw 13 Rudimentary floor Wood planks 21 Finished floor Parquet or polished wood..... 31 Vinyl / Linoleum or asphalt strips 32 Ceramic tiles 33 Cement..... 34 Carpet 35 Laminate..... 36 Other (<i>specify</i>) 96	
HC4. <i>Main material of the roof.</i> <i>Record observation.</i>	Natural roofing No Roof 11 Thatch 12 Rudimentary Roofing Wood planks (shingle) 23 Cardboard 24 Finished roofing Metal / Sheet metal 31 Wood..... 32 Calamine roofing / Cement fibre 33 Ceramic tiles 34 Cement (slab) 35 Roofing shingles 36 Other (<i>specify</i>) 96	
HC5. <i>Main material of the exterior walls.</i> <i>Record observation.</i>	Natural walls Trunks 12 Dirt..... 13 Rudimentary walls Reed and mud 21 Stone with mud 22 Uncovered adobe..... 23 Plywood 24 Cardboard 25 Reused wood 26 Finished walls Cement..... 31 Stone with lime / Cement..... 32 Bricks..... 33 Cement blocks..... 34 Covered adobe 35 Wooden planks / Shingles..... 36 Facade (e.g. cement and limestone mortar)..... 37 Other (<i>specify</i>) 96	
HC6. WHAT TYPE OF FUEL DOES YOUR HOUSEHOLD MAINLY USE FOR COOKING?	Electricity 01 Liquid propane gas (LPG, gas from a cylinder) 02 Natural gas (from the gas mains) 03 Coal / Lignite 06 Charcoal 07 Wood 08 Straw / Shrubs / Grass 09 Residue from agricultural crops 11 No food is cooked in the household 95 Other (<i>specify</i>) 96	01⇒HC8 02⇒HC8 03⇒HC8 95⇒HC8

HC7. IS THE COOKING USUALLY DONE IN THE HOUSE, IN A SEPARATE BUILDING, OR OUTDOORS? <i>If "In the house", probe: IS IT DONE IN A SEPARATE ROOM USED AS A KITCHEN?</i>	In the apartment/house In a separate room used as kitchen 1 Elsewhere in the house 2 In a separate building 3 Outdoors 4 Other (<i>specify</i>) 6																																																										
HC8. DOES YOUR HOUSEHOLD HAVE: [A] ELECTRICITY? [B] A RADIO? [C] A TELEVISION? [D] A FIXED TELEPHONE (NON-MOBILE)? [E] A REFRIGERATOR? [F] BED? [G] ELECTRICAL COOKER? [H] COMPUTER / LAPTOP? [I] INTERNET CONNECTION? [J] AIR-CONDITIONING? [K] DIGITAL CAMERA? [L] WASHING MACHINE? [M] CLOTHES DRYER? [N] DISHWASHER? [O] VACUUM CLEANER [P] DVD PLAYER? [Q] JACUZZI BATHTUB? [R] VIDEO SECURITY SYSTEM (CCTV)?	<table border="0"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>Electricity.....</td><td>1</td><td>2</td></tr> <tr><td>Radio.....</td><td>1</td><td>2</td></tr> <tr><td>Television.....</td><td>1</td><td>2</td></tr> <tr><td>Fixed telephone (non-mobile).....</td><td>1</td><td>2</td></tr> <tr><td>Refrigerator.....</td><td>1</td><td>2</td></tr> <tr><td>Bed.....</td><td>1</td><td>2</td></tr> <tr><td>Electrical cooker.....</td><td>1</td><td>2</td></tr> <tr><td>Computer / Laptop.....</td><td>1</td><td>2</td></tr> <tr><td>Internet connection.....</td><td>1</td><td>2</td></tr> <tr><td>Air-conditioning.....</td><td>1</td><td>2</td></tr> <tr><td>Digital camera.....</td><td>1</td><td>2</td></tr> <tr><td>Washing machine.....</td><td>1</td><td>2</td></tr> <tr><td>Clothes dryer.....</td><td>1</td><td>2</td></tr> <tr><td>Dishwasher.....</td><td>1</td><td>2</td></tr> <tr><td>Vacuum cleaner.....</td><td>1</td><td>2</td></tr> <tr><td>DVD player.....</td><td>1</td><td>2</td></tr> <tr><td>Jacuzzi bathtub.....</td><td>1</td><td>2</td></tr> <tr><td>Video security system (CCTV).....</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	Electricity.....	1	2	Radio.....	1	2	Television.....	1	2	Fixed telephone (non-mobile).....	1	2	Refrigerator.....	1	2	Bed.....	1	2	Electrical cooker.....	1	2	Computer / Laptop.....	1	2	Internet connection.....	1	2	Air-conditioning.....	1	2	Digital camera.....	1	2	Washing machine.....	1	2	Clothes dryer.....	1	2	Dishwasher.....	1	2	Vacuum cleaner.....	1	2	DVD player.....	1	2	Jacuzzi bathtub.....	1	2	Video security system (CCTV).....	1	2	
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HC9. DOES ANY MEMBER OF YOUR HOUSEHOLD OWN: [A] A WATCH? [B] A MOBILE TELEPHONE? [C] A BICYCLE? [D] A MOTORCYCLE OR SCOOTER? [E] AN ANIMAL-DRAWN CART? [F] A CAR OR TRUCK? [G] A TRACTOR?	<table border="0"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>Watch.....</td><td>1</td><td>2</td></tr> <tr><td>Mobile telephone.....</td><td>1</td><td>2</td></tr> <tr><td>Bicycle.....</td><td>1</td><td>2</td></tr> <tr><td>Motorcycle / Scooter.....</td><td>1</td><td>2</td></tr> <tr><td>Animal drawn-cart.....</td><td>1</td><td>2</td></tr> <tr><td>Car / Truck.....</td><td>1</td><td>2</td></tr> <tr><td>Tractor.....</td><td>1</td><td>2</td></tr> </tbody> </table>		Yes	No	Watch.....	1	2	Mobile telephone.....	1	2	Bicycle.....	1	2	Motorcycle / Scooter.....	1	2	Animal drawn-cart.....	1	2	Car / Truck.....	1	2	Tractor.....	1	2																																		
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Mobile telephone.....	1	2																																																									
Bicycle.....	1	2																																																									
Motorcycle / Scooter.....	1	2																																																									
Animal drawn-cart.....	1	2																																																									
Car / Truck.....	1	2																																																									
Tractor.....	1	2																																																									
HC10. DO YOU OR SOMEONE LIVING IN THIS HOUSEHOLD OWN THIS DWELLING? <i>If "No", then ask: DO YOU RENT THIS DWELLING FROM SOMEONE NOT LIVING IN THIS HOUSEHOLD?</i> <i>If "Rented from someone else", circle '2'. For other responses, circle '6'.</i>	Own 1 Rent 2 Other (Not owned or rented) 6																																																										
HC11. DOES ANY MEMBER OF THIS HOUSEHOLD OWN ANY LAND THAT CAN BE USED FOR AGRICULTURE?	Yes 1 No 2	2⇒HC13																																																									
HC12. HOW MANY DUNUMS OF AGRICULTURAL LAND DO MEMBERS OF THIS HOUSEHOLD OWN ALTOGETHER? <i>If less than 1, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i>	Dunums ___																																																										
HC13. DOES THIS HOUSEHOLD OWN ANY LIVESTOCK, HERDS, OTHER FARM ANIMALS OR POULTRY?	Yes 1 No 2	2⇒HC15																																																									
HC14. HOW MANY OF THE FOLLOWING ANIMALS DOES THIS HOUSEHOLD OWN? [A] HEIFERS, MILK COWS, CALVES OR BULLS? [B] HORSES, DONKEYS, OR MULES? [C] GOATS? [D] SHEEP? [E] CHICKENS, CHICKS OR ROOSTERS? [H] OTHER POULTRY? [F] PIGS [G] BEE HIVES? <i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i>	Heifers, milk cows, calves or bulls..... ___ Horses, donkeys, or mules..... ___ Goats..... ___ Sheep..... ___ Chickens, chicks or roosters..... ___ Other poultry..... ___ Pigs..... ___ Bee hives..... ___																																																										
HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE A BANK ACCOUNT?	Yes 1 No 2																																																										

TABLE 1: CHILDREN AGED 2-14 YEARS ELIGIBLE FOR QUESTIONS ON CHILD DISCIPLINE

- List each of the children aged 2-14 years below in the order they appear in the Household Member Listing Form (module HL). Do not include any household members outside of the age range 2-14 years.
- Record the line number, name, gender, and age for each child.
- Then record the total number of children aged 2-14 in the box provided (CD6).
- If there are no children aged 2-14 years in the household, skip to the next module.

CD1. Rank	CD2. Line number from HL1	CD3. Name from HL2	CD4. Gender from HL4		CD5. Age from HL6
Rank	Line no.	Name	M	F	Age
1	---		1	2	--- --
2	---		1	2	--- --
3	---		1	2	--- --
4	---		1	2	--- --
5	---		1	2	--- --
6	---		1	2	--- --
7	---		1	2	--- --
8	---		1	2	--- --
CD6.	Total children aged 2-14 years				--- --

- If there is only one child aged 2-14 years in the household, skip table 2 and go to CD8; enter '1' and continue with CD9.

TABLE 2: RANDOM SELECTION OF CHILD FOR QUESTIONS ON CHILD DISCIPLINE

- Use Table 2 to select **one child** between the ages of 2 and 14 years, if there is more than one child in the household within the specified age range.
- Check the last digit of the household number (HH2) from the cover page. This is the row number you should go to in the table below (CD7).
- Check the total number of eligible children (2-14) at CD6 in Table 1 above. This is the column number you should go to.
- Find the box where the row and the column meet and circle the number that appears in the box. This is the rank of the child (CD1) for which the questions will be asked.

CD7. Last digit of household number (HH2)	Total number of eligible children in the household (CD6)								
	1	2	3	4	5	6	7	8+	
0	1	2	2	4	3	6	5	4	
1	1	1	3	1	4	1	6	5	
2	1	2	1	2	5	2	7	6	
3	1	1	2	3	1	3	1	7	
4	1	2	3	4	2	4	2	8	
5	1	1	1	1	3	5	3	1	
6	1	2	2	2	4	6	4	2	
7	1	1	3	3	5	1	5	3	
8	1	2	1	4	1	2	6	4	
9	1	1	2	1	2	3	7	5	

CD8. Record the rank of the selected child from Table 1 (CD1)

CD9. Write the name and line number of the child selected for the module from CD3 and CD2, based on the rank in CD8.	Name	
	Line number	
CD10. ADULTS USE CERTAIN WAYS TO TEACH CHILDREN PROPER BEHAVIOUR OR TO ADDRESS A BEHAVIOUR PROBLEM. I WILL READ VARIOUS METHODS THAT ARE USED AND I WANT YOU TO TELL ME IF YOU OR ANYONE ELSE IN YOUR HOUSEHOLD HAS USED THIS METHOD WITH (name) DURING THE PAST MONTH.		
CD11. TOOK AWAY PRIVILEGES, FORBADE SOMETHING (name) LIKED OR DID NOT ALLOW HIM/HER TO LEAVE THE HOUSE.	Yes..... 1 No..... 2	
CD12. EXPLAINED WHY (name)'S BEHAVIOR WAS WRONG.	Yes..... 1 No..... 2	
CD13. SHOOK HIM/HER.	Yes..... 1 No..... 2	
CD14. SHOUTED, YELLED AT OR SCREAMED AT HIM/HER.	Yes..... 1 No..... 2	
CD15. GAVE HIM/HER SOMETHING ELSE TO DO.	Yes..... 1 No..... 2	
CD16. SPANKED, HIT OR SLAPPED HIM/HER ON THE BOTTOM WITH BARE HAND.	Yes..... 1 No..... 2	
CD17. HIT HIM/HER ON THE BOTTOM OR ELSEWHERE ON THE BODY WITH SOMETHING LIKE A BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT.	Yes..... 1 No..... 2	
CD18. CALLED HIM/HER DUMB, LAZY OR A SIMILAR NAME.	Yes..... 1 No..... 2	
CD19. HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS.	Yes..... 1 No..... 2	
CD20. HIT OR SLAPPED HIM/HER ON THE HAND, ARM OR LEG.	Yes..... 1 No..... 2	
CD21. BEAT HIM/HER UP, THAT IS HIT HIM/HER REPEATEDLY AS HARD AS ONE CAN.	Yes..... 1 No..... 2	
CD22. DO YOU BELIEVE THAT IN ORDER TO BRING UP, RAISE OR EDUCATE A CHILD PROPERLY, THE CHILD NEEDS TO BE PHYSICALLY PUNISHED?	Yes..... 1 No..... 2 Don't know / No opinion 8	

HAND WASHING		HW
HW1. PLEASE SHOW ME WHERE MEMBERS OF YOUR HOUSEHOLD MOST OFTEN WASH THEIR HANDS.	Observed 1 Not observed Not in apartment/house / on estate..... 2 No permission to observe place 3 Other reason 6	2 ⇨HW4 3 ⇨HW4 6 ⇨HW4
HW2. Observe the presence of water at the specific place for washing hands. <i>Verify by checking the tap/pump or sink, bucket, water container, etc., for presence of water.</i>	Water is available..... 1 Water is not available..... 2	
HW3. Record if soap or detergent is present at the specific place for washing hands. <i>Circle all that apply. Skip to HH19 if any soap or detergent code has been circled (A, B, C or D). If "None" is circled (Y), continue with HW4.</i>	Bar of soap A Detergent (Powder / Liquid / Paste) B Liquid soap C Ash / Sand D None Y	A⇨HH19 B⇨HH19 C⇨HH19 D⇨HH19
HW4. DO YOU HAVE ANY SOAP, DETERGENT OR ANY OTHER CLEANING AGENT IN YOUR HOUSEHOLD USED FOR WASHING HANDS?	Yes 1 No 2	2⇨HH19
HW5. CAN YOU PLEASE SHOW IT TO ME? <i>Record the observation. Circle all that apply.</i>	Bar of soap A Detergent (Powder / Liquid / Paste) B Liquid soap C Ash / Sand D Not able to / Does not want to show Y	

HH19. Record the interview end time.	Hour and minutes :
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HH20. Thank the respondent for his/her cooperation and check the Household Member Listing Form:

A separate Questionnaire for Individual Women has been issued for each woman aged 15-49 years in the household list (HL7)

A separate Questionnaire for Children Under Five has been issued for each child under the age of 5 in the household list (HL9)

A separate Questionnaire for Individual Men has been issued for each man aged 15-49 years in the household list (HL7A)

Return to the cover page and make sure that all information has been entered, including the number of eligible women (HH12), children under 5 years of age (HH14) and eligible men (HH13A).

Organise the administration of the remaining questionnaire(s) in this household.

Interviewer's Observations

Field Editor's Observations

Supervisor's Observations



QUESTIONNAIRE FOR WOMEN AGED 15 TO 49 [Federation of BiH]

WOMAN'S INFORMATION PANEL		WM
This questionnaire is to be administered to all women age 15 through 49 (see Household Member Listing Form, column HL7 in the Household Questionnaire). A separate questionnaire should be used for each eligible woman.		
WM1. Cluster number: _____	WM2. Household number: _____	
WM3. Woman's name: _____ Name _____	WM4. Woman's line number: _____	
WM5. Interviewer name and code: _____ Name _____	WM6. Day / Month / Year of interview: _____ / _____ / _____	

Repeat greeting if not already read to this woman:

If greeting at the beginning of the household questionnaire has already been read to this woman, then read the following:

WE ARE FROM THE **FEDERAL MINISTRY OF HEALTH – INSTITUTE OF PUBLIC HEALTH OF THE FEDERATION OF BOSNIA AND HERZEGOVINA.** WE ARE CONDUCTING A SURVEY CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THIS INTERVIEW WILL TAKE ABOUT **20** MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL.

NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT YOUR HEALTH AND OTHER TOPICS. THIS INTERVIEW WILL TAKE ABOUT **20** MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL.

MAY I START NOW?

- Yes, permission given ⇨ Go to WM10 to record the time and then begin the interview.
- No, permission not given ⇨ Complete WM7. Inform your supervisor of this result.

WM7. Result of woman's interview	Questionnaire completed 01
	Respondent not at home 02
	Refused 03
	Questionnaire partly completed 04
	Respondent incapacitated 05
	Other (specify) _____ 96

WM8. Field edited by (Name and number) Name _____	WM9. Data entry operator (Name and number): Name _____
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