Appendix F: MICS4 BiH
Roma Survey Questionnaires

An identical approach to the MICS4 methodology was applied in the FBiH, RS and BD. Questionnaires were translated into local languages and were administered during fieldwork in the FBiH, RS and BD.

We are from the Ministry for Human Rights and Refugees 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
- No, permission not given

Go to HH18 to record the time and then begin the interview.

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:

HH10. Respondent to household questionnaire:
- Name:
- Line Number from Module HL:

HH11. Total number of household members:

HH12. Number of women aged 15-49 years:

HH13. Number of completed Questionnaires for women aged 15-49:

HH13A. Number of men aged 15-49 years:

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. Control carried out by (Name and code):
- Name:

HH17. Data entry operator (Name and code):
- Name:

MONITORING THE SITUATION OF CHILDREN AND WOMEN 183
### HOUSEHOLD MEMBER LISTING FORM

**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.

### Instructions for Listing Members

**For women aged 15-49**

- **Line No.**
- **Name**
- **Relationship* to the Head of Household**
- **Month**
- **Day**
- **Year**
- **Age**
- **Mother**
- **N. DK**

**For men aged 15-49**

- **Father**

**For children aged 5-14**

- **Brother**

**For children under age 5**

- **Sister**

**For children aged 0-17 years**

- **Stepchild**

---

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

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

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.
### EDUCATION

**For household members aged 5 and above**

<table>
<thead>
<tr>
<th>Line</th>
<th>Name</th>
<th>Age</th>
<th>Yes</th>
<th>No</th>
<th>Level</th>
<th>Grade/Year</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>___</td>
<td>1</td>
<td>2</td>
<td>___</td>
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<td>___</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
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<td>1</td>
<td>2</td>
</tr>
<tr>
<td>03</td>
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<td>2</td>
<td>___</td>
<td>0 1 2 3 8</td>
<td>___</td>
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<td>2</td>
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<td>04</td>
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<td>1</td>
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<td>___</td>
<td>0 1 2 3 8</td>
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<td>1</td>
<td>2</td>
</tr>
<tr>
<td>05</td>
<td>___</td>
<td>1</td>
<td>2</td>
<td>___</td>
<td>0 1 2 3 8</td>
<td>___</td>
<td>1</td>
<td>2</td>
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<tr>
<td>06</td>
<td>___</td>
<td>1</td>
<td>2</td>
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<td>0 1 2 3 8</td>
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<td>07</td>
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<td>0 1 2 3 8</td>
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<td>08</td>
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<td>0 1 2 3 8</td>
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<tr>
<td>09</td>
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<td>2</td>
<td>___</td>
<td>0 1 2 3 8</td>
<td>___</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>10</td>
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<td>1</td>
<td>2</td>
<td>___</td>
<td>0 1 2 3 8</td>
<td>___</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

**For household members aged 5-24 years**

<table>
<thead>
<tr>
<th>Line</th>
<th>Name</th>
<th>Age</th>
<th>Yes</th>
<th>No</th>
<th>Level</th>
<th>Grade/Year</th>
<th>Y</th>
<th>N</th>
<th>DK</th>
<th>Level</th>
<th>Grade/Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>___</td>
<td>1</td>
<td>2</td>
<td>___</td>
<td>0 1 2 3 8</td>
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<td>0 1 2 3 8</td>
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<td>2</td>
<td>___</td>
<td>0 1 2 3 8</td>
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<td>1</td>
<td>2</td>
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<td>___</td>
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<td>1</td>
<td>2</td>
<td>8</td>
<td>0 1 2 3 8</td>
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<td>0 1 2 3 8</td>
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<td>1</td>
<td>2</td>
<td>8</td>
<td>0 1 2 3 8</td>
<td>___</td>
</tr>
</tbody>
</table>
**WATER AND SANITATION**

**W5.1** What is the main source of drinking water for members of your household?

- Piped water (main water-supply) ........................................ 11
- 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 ........................................................................ 21
- Covered (protected) well ................................................. 31
- Uncovered (unprotected) well .......................................... 32
- Water from spring .......................................................... 41
- 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

**W5.2** 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) ........................................ 11
- 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 ........................................................................ 21
- Covered (protected) well ................................................. 31
- Uncovered (unprotected) well .......................................... 32
- Water from spring .......................................................... 41
- 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

**W5.3** Where is this water source located?

- In own apartment/house .................................................. 1
- In own estate .................................................................... 2
- Elsewhere ........................................................................ 3

**W5.4** How long does it take to go to the water source, collect water, and come back?

- Number of minutes ......................................................... 998

**W5.5** Who usually goes to this source to collect water for your household?

- Adult woman (age 15+ years) ........................................... 1
- Adult man (age 15+ years) ............................................... 2
- Female child (under 15) ................................................... 3
- Male child (under 15) ....................................................... 4

**W5.6** Do you do anything to the water to make it safer for drinking?

- Yes .............................................................................. 1
- No .............................................................................. 2
- DK .............................................................................. 8

**W5.7** What do you usually do to make the water safer for drinking?

- Boil ................................................................. A
- Add chlorine .............................................................. B
- Steam 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

**W5.8** What kind of toilet facility do members of your household usually use?

- If "flush" or "pour flush", probe: Where does it flush to?

**W5.9** Do you share this facility with others who are not members of your household?

- Yes .......................................................................... 1
- No ............................................................................ 2

**W5.10** 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) ................................. 2

**W5.11** 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**

**HC1a. What is the mother tongue of the head of household?**
- Bosnian ................................................... 1
- Croatian .................................................. 2
- Serbian .................................................... 3
- Romany ..................................................... 4
- Other language (specify) ................................ 6

**HC2. How many rooms in this household are used for sleeping?**
Number of rooms ........................................... 6

**HC3. Main material of the dwelling floor.**
- Natural floor .............................................. 11
- Earth / Sand ............................................... 13
- Straw .......................................................... 13
- Rudimentary floor ................................. Wood planks .................................................... 21
- Parquet or polished wood .................. 31
- Vinyl / Linoleum or asphalt strips ........... 32
- Ceramic tiles ........................................... 33
- Cement .................................................... 34
- Carpet ...................................................... 35
- Laminate .................................................. 36
- Other (specify) ........................................... 96

**HC4. Main material of the roof.**
- Natural roofing ................................. No Roof ......................................................... 11
- Thatch ...................................................... 12
- Rudimentary Roofing ............................ Wood planks (shingle) ..................................... 23
- Cardboard ................................................ 24
- Metal / Sheet metal .................................. 31
- Wood ....................................................... 32
- Calamine roofing / Cement fibre ........... 33
- Ceramic tiles ........................................... 34
- Cement (slab) .......................................... 35
- Roofing shingles ..................................... 36
- Other (specify) ........................................... 96

**HC5. Main material of the exterior walls.**
- Natural walls ........................................... 12
- Trunks ...................................................... 12
- Dirt .......................................................... 13
- Rudimentary walls .............................. Reed and mud ........................................... 21
- Stone with mud ....................................... 22
- Uncovered adobe .................................... 23
- Plywood .................................................. 24
- Cardboard ................................................ 25
- Rested wood ........................................... 26
- Rudimentary 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 (specify) ........................................... 96

**HC6. What type of fuel does your household mostly 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 (specify) ........................................... 96

**HC7. Is the cooking usually done in the house, in a separate building or outdoors?**
- In the apartment/house ................................ 1
- In a separate room used as kitchen ........... 1
- In a separate building ................................ 2
- Elsewhere in the house ............................. 2
- Outdoors ................................................. 4
- Other (specify) ........................................... 6

**HC8. Does your household own:**
- [A] Electricity ........................................ 1
- [B] A radio ............................................. 1
- [C] A television ........................................ 1
- [D] A fixed telephone (non-mobile) ........... 1
- [E] A refrigerator ..................................... 1
- [F] A bed ................................................ 1
- [G] An electrical cooker ............................ 1
- [H] A computer / Laptop ........................... 1
- [I] Internet connection .............................. 1
- [J] Air-conditioning .................................. 1
- [K] Digital camera .................................. 1
- [L] Washing machine ............................... 1
- [M] Clothes dryer ...................................... 1
- [N] Dishwasher ........................................ 1
- [O] Vacuum cleaner ................................ 1
- [P] A DVD player ...................................... 1
- [Q] A coffee maker ................................... 1
- [R] A video security system (CCTV) ........... 1

**HC9. Does any member of your household own:**
- [A] A watch ........................................... 1
- [B] A mobile telephone ............................. 1
- [C] A bicycle ........................................... 1
- [D] A motorcycle or scooter .................... 1
- [E] An animal (fixed coat) ......................... 1
- [F] A car or truck ..................................... 1
- [G] A tractor ............................................ 1

**HC10. Do you or someone living in this household own the following?**
- [A] Own ................................................. 1
- [B] Rent ................................................. 1
- [C] Other (Not owned or rented) ............ 1

**HC11. Does any member of this household own any land that can be used for agriculture?**
- Yes ................................................. 1
- No ....................................................... 1

**HC12. How many dunums of agricultural land do members of this household own altogether?**
- Dunums ................................................. 2

**HC13. Does this household own any livestock, herds, other farm animals or poultry?**
- Yes ....................................................... 2
- No ....................................................... 2

**HC14. How many of the following animals does this household own?**
- Heifers, milk cows, calves or bulls ........... 1
- Horses, donkeys, or mules ........................ 1
- Goats ................................................... 1
- Sheep .................................................... 1
- Chickens, chicks or roosters ................... 1
- Other poultry ........................................ 1
- Pigs ...................................................... 1
- Bee hives ............................................. 1

**HC15. Does any member of this household have a bank account?**
- Yes ....................................................... 1
- No ....................................................... 1

---

[190] MULTIPLE INDICATOR CLUSTER SURVEY 2011–2012

[191] MONITORING THE SITUATION OF CHILDREN AND WOMEN
**CHILD DISCIPLINE**

**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.

<table>
<thead>
<tr>
<th>Rank</th>
<th>Line no.</th>
<th>Name</th>
<th>M</th>
<th>F</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>8</td>
<td>__</td>
<td>1 2</td>
<td>__</td>
<td>__</td>
<td>__</td>
</tr>
</tbody>
</table>

**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.

<table>
<thead>
<tr>
<th>Last digit of household number (HH2)</th>
<th>Total number of eligible children in the household (CD6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 2 3 4 5 6 7 8+</td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>1 2 2 4 3 6 5 4</td>
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<td>7</td>
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<td>1 2 1 4 1 2 6 4</td>
</tr>
<tr>
<td>9</td>
<td>1 1 2 1 2 3 7 5</td>
</tr>
</tbody>
</table>

**CD7.**

**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.

**CD10.** Adults use certain ways to teach children proper behavior or to address a behavior 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:

- Yes ____________________________ 1
- No ____________________________ 2

**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.** Shamed, 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, hammer, 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 ear.

- 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 train up, raise or educate a child properly, the child needs to be physically punished?

- Yes ____________________________ 1
- No ____________________________ 2
- Don’t know / No opinion ............ 8

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1. CHI
2. RA
3. RA
4. RA
5. RA
6. RA
7. RA
8. RA

**Monitoring the Situation of Children and Women**

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**HAND WASHING**

**HW1.** Please show me where members of your household most often wash their hands.

- Observed .................................................. 1
- Not observed ........................................ 2
- 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.

- Water is available .................................................. 1
- Water is not available ........................................ 2

- Verify by checking the tap/pump or sink, bucket, water container, etc., for presence of water.

**HW3.** Record if soap or detergent is present at the specific place for washing hands.

- Bar of soap ................................................ A
- Detergent (Powder / Liquid / Paste) .......... B
- Liquid soap .................................................. C
- Ash / Sand .................................................... D

- 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?

- Record the observation. Circle all that apply.

**HH19.** Record the interview end time.

- Hour and minutes .................................................. 1: __ __

**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 (HL16).

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.

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**WOMAN’S INFORMATION PANEL**

**WM1.** Cluster number: _______ _______ _______

**WM2.** Household number: _______ _______ _______

**WM3.** Woman’s name: ______________________

**WM4.** Woman’s line number: _______ _______ _______

**WM5.** Interviewer name and code: _______ _______

**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 Ministry of Human rights and refugees 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.**

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.** Control carried out by (Name and number)

**WM9.** Data entry operator (Name and number):

- Name ______________________________________ _______ _______