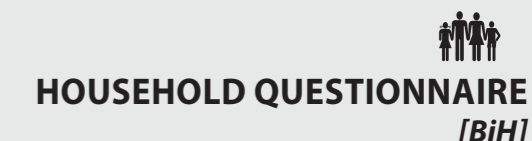


# Appendix F: MICS4 BiH Roma Survey Questionnaires

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.



HOUSEHOLD INFORMATION PANEL		HH
<b>HH1.</b> Cluster number: _____	<b>HH2.</b> Household number: _____	
<b>HH3.</b> Interviewer name and code: Name _____	<b>HH4.</b> Supervisor name and code: Name _____	
<b>HH5.</b> Day / Month / Year of interview: _____ / _____ / _____		
<b>HH6.</b> Settlement type:  Urban ..... 1  Rural ..... 2	<b>HH7.</b> Region FBiH Canton: Una-Sana Canton.....01 Posavina Canton .....02 Tuzla Canton .....03 Zenica-Doboj Canton.....04 Bosnia-Podrinje Canton .....05 Central Bosnia Canton .....06 Herzegovina-Neretva Canton .....07 West Herzegovina Canton.....08 Canton Sarajevo .....09 Canton 10.....10	Republic of Srpska ..... 11  Brcko District of BiH..... 15

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 → 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:

<b>HH8.</b> Name and surname of head of household: _____	
<b>HH9.</b> 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 interview .....04 Dwelling unit vacant / Address not a dwelling .....05 Dwelling unit destroyed .....06 Dwelling unit not found .....07 Other (specify)..... 96	<b>HH10.</b> Respondent to household questionnaire:  Name: _____  Line Number from Module HL: _____
<b>HH12.</b> Number of women aged 15-49 years: _____	<b>HH11.</b> Total number of household members: _____
<b>HH13A.</b> Number of men aged 15-49 years: _____	<b>HH13.</b> Number of completed Questionnaires for women aged 15-49: _____
<b>HH14.</b> Number of children under age 5: _____	<b>HH13B.</b> Number of completed Questionnaires for men aged 15-49: _____
<b>HH16.</b> Control carried out by (Name and code): Name _____	<b>HH15.</b> Number of completed under-5 questionnaires: _____
	<b>HH17.</b> 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?  1 Male 2 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"
Line	Name	Relationship*	M	F	Month	Year	Age	15-49	15-49	Mother	Mother	Y N DK	Mother	Y N DK	Father
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
<b>WS1.</b> 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
<b>WS2.</b> 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
<b>WS3.</b> WHERE IS THIS WATER SOURCE LOCATED?	In own apartment/house ..... 1 In own estate ..... 2 Elsewhere ..... 3	1⇒WS6 2⇒WS6
<b>WS4.</b> HOW LONG DOES IT TAKE TO GO TO THE WATER SOURCE, COLLECT WATER, AND COME BACK?	Number of minutes ..... _____ DK ..... 998	
<b>WS5.</b> 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	
<b>WS6.</b> DO YOU DO ANYTHING TO THE WATER TO MAKE IT SAFER FOR DRINKING?	Yes ..... 1 No ..... 2 DK ..... 8	2⇒WS8 8⇒WS8

<b>WS7.</b> 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	
<b>WS8.</b> 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
<b>WS9.</b> DO YOU SHARE THIS FACILITY WITH OTHERS WHO ARE NOT MEMBERS OF YOUR HOUSEHOLD?	Yes ..... 1 No ..... 2	2⇒Next Module
<b>WS10.</b> 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
<b>WS11.</b> 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
<b>HC1b.</b> WHAT IS THE MOTHER TONGUE OF THE HEAD OF HOUSEHOLD?	Bosnian..... 1 Croatian..... 2 Serbian ..... 3 Romany ..... 4 Other language ( <i>specify</i> )..... 6	
<b>HC2.</b> HOW MANY ROOMS IN THIS HOUSEHOLD ARE USED FOR SLEEPING?	Number of rooms ..... ___	
<b>HC3.</b> <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	
<b>HC4.</b> <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	
<b>HC5.</b> <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	
<b>HC6.</b> 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

<b>HC7.</b> 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																																																										
<b>HC8.</b> 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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<b>HC9.</b> 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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<b>HC10.</b> 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																																																										
<b>HC11.</b> DOES ANY MEMBER OF THIS HOUSEHOLD OWN ANY LAND THAT CAN BE USED FOR AGRICULTURE?	Yes ..... 1 No ..... 2	2⇒HC13																																																									
<b>HC12.</b> 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 ..... ___																																																										
<b>HC13.</b> DOES THIS HOUSEHOLD OWN ANY LIVESTOCK, HERDS, OTHER FARM ANIMALS OR POULTRY?	Yes ..... 1 No ..... 2	2⇒HC15																																																									
<b>HC14.</b> 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..... ___																																																										
<b>HC15.</b> DOES ANY MEMBER OF THIS HOUSEHOLD HAVE A BANK ACCOUNT?	Yes ..... 1 No ..... 2																																																										

**CHILD DISCIPLINE**

**CD**

**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	--- --
<b>CD6.</b>	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) .....

<b>CD9.</b> 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 .....	
<b>CD10.</b> 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.		
<b>CD11.</b> TOOK AWAY PRIVILEGES, FORBADE SOMETHING (name) LIKED OR DID NOT ALLOW HIM/HER TO LEAVE THE HOUSE.	Yes..... 1 No..... 2	
<b>CD12.</b> EXPLAINED WHY (name)'S BEHAVIOR WAS WRONG.	Yes..... 1 No..... 2	
<b>CD13.</b> SHOOK HIM/HER.	Yes..... 1 No..... 2	
<b>CD14.</b> SHOUTED, YELLED AT OR SCREAMED AT HIM/HER.	Yes..... 1 No..... 2	
<b>CD15.</b> GAVE HIM/HER SOMETHING ELSE TO DO.	Yes..... 1 No..... 2	
<b>CD16.</b> SPANKED, HIT OR SLAPPED HIM/HER ON THE BOTTOM WITH BARE HAND.	Yes..... 1 No..... 2	
<b>CD17.</b> 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	
<b>CD18.</b> CALLED HIM/HER DUMB, LAZY OR A SIMILAR NAME.	Yes..... 1 No..... 2	
<b>CD19.</b> HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS.	Yes..... 1 No..... 2	
<b>CD20.</b> HIT OR SLAPPED HIM/HER ON THE HAND, ARM OR LEG.	Yes..... 1 No..... 2	
<b>CD21.</b> BEAT HIM/HER UP, THAT IS HIT HIM/HER REPEATEDLY AS HARD AS ONE CAN.	Yes..... 1 No..... 2	
<b>CD22.</b> 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
<b>HW1.</b> 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
<b>HW2.</b> 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	
<b>HW3.</b> 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
<b>HW4.</b> DO YOU HAVE ANY SOAP, DETERGENT OR ANY OTHER CLEANING AGENT IN YOUR HOUSEHOLD USED FOR WASHING HANDS?	Yes ..... 1 No ..... 2	2 ⇨ HH19
<b>HW5.</b> 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	

<b>HH19.</b> 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

### Controller's Observations

### Supervisor's Observations



## QUESTIONNAIRE FOR WOMEN AGED 15 TO 49 [BiH]

WOMAN'S INFORMATION PANEL		WM
<i>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.</i>		
<b>WM1.</b> Cluster number: _____	<b>WM2.</b> Household number: _____	
<b>WM3.</b> Woman's name: _____	<b>WM4.</b> Woman's line number: _____	
<b>WM5.</b> Interviewer name and code: _____	<b>WM6.</b> 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.

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.

<b>WM7.</b> 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	

<b>WM8.</b> Control carried out by (Name and number) Name _____	<b>WM9.</b> Data entry operator (Name and number): Name _____
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