



HOUSEHOLD INFORMATION PANEL **HH**

HH1. Cluster number: _____		HH2. Household number: _____	
HH3. Interviewer's name and number: NAME _____		HH4. Supervisor's name and number: NAME _____	
HH5. Day / Month / Year of interview: _____ / _____ / <u>2018</u>		HH7. Oblast: Batken 01 Jalal-Abad 02 Issyk-Kul 03 Naryn 04 Osh 05 Talas 06 Chui 07 Bishkek c. 08 Osh c. 09	
HH6. Area:	URBAN1 RURAL.....2		

<p><i>Check that the respondent is a knowledgeable member of the household and at least 18 years old before proceeding. You may only interview a child age 15-17 if there is no adult member of the household or all adult members are incapacitated. You may not interview a child under age 15.</i></p>	HH11. Record the time.
	HOURS : MINUTES ____ : ____

HH12. Hello, my name is (*your name*). We are from the National Statistical Committee of the Kyrgyz Republic. We are conducting a survey about the situation of children, families and households. I would like to talk to you about these subjects. This interview usually takes about 25 minutes. Following this, I may ask to conduct additional interviews with you or other individual members of your household. All the information we obtain will remain strictly confidential and anonymous. If you do not wish to answer a question or stop the interview, please let me know. May I start now?

YES	1	1 ⇨ LIST OF HOUSEHOLD MEMBERS
NO / NOT ASKED	2	2 ⇨ HH46

HH46. Result of Household Questionnaire interview: <i>Discuss any result not completed with Supervisor.</i>	COMPLETED 01 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT 02 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME 03 REFUSED 04 DWELLING VACANT OR ADDRESS NOT A DWELLING 05 DWELLING DESTROYED 06 DWELLING NOT FOUND 07 OTHER (<i>specify</i>) 96
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HH47. Name and line number of the respondent to Household Questionnaire interview:
NAME _____
HOUSEHOLD MEMBERS
WOMEN AGE 15-49
CHILDREN UNDER AGE 5
CHILDREN AGE 5-17

<i>To be filled after the Household Questionnaire is completed</i>	
TOTAL NUMBER	
HH48	___
HH49	___
HH51	___
HH52	___

<i>To be filled after <u>all</u> the questionnaires are completed</i>	
COMPLETED NUMBER	
HH53	___
HH55	___
HH56	ZERO 0 ONE 1

LIST OF HOUSEHOLD MEMBERS

HL

First complete HL2-HL4 vertically for all household members, starting with the head of the household. Once HL2-HL4 are complete for all members, make sure to probe for additional members: Those that are not currently at home, any infants or small children and any others who may not be family (such as servants, friends) but who usually live in the household. Then, ask questions HL5-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box:

HL1. Line number	HL2. First, please tell me the name of each person who usually lives here, starting with the head of the household. Probe for additional household members.	HL3. What is the relationship of (name) to (name of the head of household)?	HL4. Is (name) male or female? 1 MALE 2 FEMALE	HL5. What is (name)'s date of birth? 98 DK 9998 DK	HL6. How old is (name)? Record in completed years. If age is 95 or above, record '95'.	HL8. Record line number if woman and age 15-49.	HL10. Record line number if age 0-4.	HL11. Age 0-17? 1 YES 2 NO ⚡ Next Line	HL12. Is (name)'s natural mother alive? 1 YES 2 NO ⚡ 8 DK ⚡ HL16	HL13. Does (name)'s natural mother live in this household? 1 YES 2 NO ⚡ HL15	HL14. Record the line number of mother and go to HL16.	HL15. Where does (name)'s natural mother live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME OBLAST 3 IN ANOTHER HOUSEHOLD IN ANOTHER OBLAST 4 INSTITUTION IN THIS COUNTRY 8 DK	HL16. Is (name)'s natural father alive? 1 YES 2 NO ⚡ 8 DK ⚡ HL20	HL17. Does (name)'s natural father live in this household? 1 YES 2 NO ⚡ HL19	HL18. Record the line number of father and go to HL20.	HL19. Where does (name)'s natural father live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME OBLAST 3 IN ANOTHER HOUSEHOLD IN ANOTHER OBLAST 4 INSTITUTION IN THIS COUNTRY 8 DK	HL20. Copy the line number of mother from HL14. If blank, ask: Who is the primary caretaker of (name)? If 'No one' for a child age 15-17, record '90'.
LINE	NAME	RELATION*	M F	MONTH	YEAR	AGE	W 15-49	0-4	Y N	Y N DK	Y N	MOTHER	Y N DK	Y N	FATHER		
01		0_1	1 2	___	_____	___	01	01	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
02		___	1 2	___	_____	___	02	02	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
03		___	1 2	___	_____	___	03	03	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
04		___	1 2	___	_____	___	04	04	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
05		___	1 2	___	_____	___	05	05	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
06		___	1 2	___	_____	___	06	06	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
07		___	1 2	___	_____	___	07	07	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
08		___	1 2	___	_____	___	08	08	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
09		___	1 2	___	_____	___	09	09	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
10		___	1 2	___	_____	___	10	10	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
11		___	1 2	___	_____	___	11	11	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
12		___	1 2	___	_____	___	12	12	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
13		___	1 2	___	_____	___	13	13	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
14		___	1 2	___	_____	___	14	14	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
15		___	1 2	___	_____	___	15	15	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
* Codes for HL3:		01 HEAD				05 GRANDCHILD						09 BROTHER-IN-LAW / SISTER-IN-LAW			13 ADOPTED / FOSTER / STEPCHILD		
Relationship to head of household:		02 SPOUSE / PARTNER				06 PARENT						10 UNCLE / AUNT			14 SERVANT (LIVE-IN)		
		03 SON / DAUGHTER				07 PARENT-IN-LAW						11 NIECE / NEPHEW			96 OTHER (NOT RELATED)		
		04 SON-IN-LAW / DAUGHTER-IN-LAW				08 BROTHER / SISTER						12 OTHER RELATIVE			98 DK		

EDUCATION 1														ED							
ED1. Line number	ED2. Name and age. Copy names and ages of <u>all</u> members of the household from HL2 and HL6 to below <u>and</u> to next page of the module.	ED3. Age 3 or above? 1 YES 2 NO ☹ <i>Next Line</i>		ED4. Has (<i>name</i>) ever attended school or any Pre-primary education programme? 1 YES 2 NO ☹ <i>Next Line</i>		ED5. What is the highest level and grade or year of school (<i>name</i>) has ever <u>attended</u> ? LEVEL: 0 PRE-SCHOOL ☹ <i>ED7</i> 1 PRIMARY 2 BASIC SECONDARY 3 COMPLETE SECONDARY 4 PROFESSIONAL PRIMARY/MIDDLE 5 HIGHER 8 DK					ED6. Did (<i>name</i>) ever <u>complete</u> that (grade/year)? 1 YES 2 NO 8 DK			ED7. Age 3-24? 1 YES 2 NO ☹ <i>Next Line</i>		ED8. Check ED4: Ever attended school or Pre-primary education programme? 1 YES 2 NO ☹ <i>Next Line</i>					
LINE	NAME	AGE	YES	NO	YES	NO	LEVEL					GRADE/YEAR	Y	N	DK	YES	NO	YES	NO		
01		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
02		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
03		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
04		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
05		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
06		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
07		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
08		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
09		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
10		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
11		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
12		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
13		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
14		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
15		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2

EDUCATION 2 **ED**

ED1. <i>Line number</i>	ED2. <i>Name and age.</i>		ED9. At any time during the current school year did (name) attend school or any Pre-primary education programme? 1 YES 2 NO ☹ <i>ED15</i>	ED10. During this current school year, which level and grade or year is (name) attending? Level: 0 PRE-SCHOOL ☹ ED15 1 PRIMARY 2 BASIC SECONDARY 3 COMPLETE SECONDARY 4 PROFESSIONAL PRIMARY/MIDDLE 5 HIGHER 8 DK GRADE/YEAR: 98 DK	ED11. Is (he/she) attending a public school? <i>If "Yes", record '1'. If "No", probe to code who controls and manages the school.</i> 1 GOVT./ PUBLIC 2 RELIGIOUS / FAITH ORG. 3 PRIVATE 6 OTHER 8 DK	ED12. In the current school year, has (name) received any school tuition support? <i>If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.</i> 1 YES 2 NO ☹ <i>ED14</i> 8 DK ☹ <i>ED14</i>	ED13. Who provided the tuition support? <i>Record all mentioned.</i> A GOVT. / PUBLIC B RELIGIOUS/ FAITH ORG. C PRIVATE. X OTHER Z DK	ED14. For the current school year, has (name) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies? <i>If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.</i> 1 YES 2 NO 8 DK ☹	ED15. At any time during the previous school year did (name) attend school or any Pre-primary education programme? 1 YES 2 NO ☹ <i>Next Line</i> 8 DK ☹ <i>Next Line</i>	ED16. During that previous school year, which level and grade or year did (name) attend? LEVEL: 0 PRE-SCHOOL ☹ <i>Next Line</i> 1 PRIMARY 2 BASIC SECONDARY 3 COMPLETE SECONDARY 4 PROFESSIONAL PRIMARY/MIDDLE 5 HIGHER 8 DK GRADE/YEAR: 98 DK
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LINE	NAME	AGE	YES NO	LEVEL	GRADE/YEAR	AUTHORITY	YES NO DK	TUITION	YES NO DK	YES NO DK	LEVEL	GRADE/YEAR
01		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
02		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
03		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
04		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
05		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
06		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
07		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
08		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
09		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
10		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
11		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
12		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
13		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
14		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___
15		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___

HOUSEHOLD CHARACTERISTICS		HC
HC1B. What is the mother tongue/native language of <i>(name of the head of the household from HL2)?</i>	KYRGYZ01 RUSSIAN02 UZBEK.....03 KAZAKH04 TAJIK05 DUNGAN.....06 UYGUR.....07 OTHER LANGUAGE <i>(specify)</i> 96	
HC2. To what nationality does <i>(name of the head of the household from HL2)</i> belong?	KYRGYZ01 RUSSIAN02 UZBEK.....03 KAZAKH04 TAJIK05 DUNGAN.....06 UYGUR.....07 OTHER <i>(specify)</i> 96	
HC3. How many rooms do members of this household usually use for sleeping?	NUMBER OF ROOMS..... __ __	
HC4. <i>Main material of the dwelling floor.</i> <i>Record observation.</i> <i>If observation is not possible, ask the respondent to determine the material of the dwelling floor.</i>	NATURAL FLOOR EARTH / SAND/ CLAY 11 DUNG..... 12 RUDIMENTARY FLOOR WOOD PLANKS (NON WHITTLED)..... 21 REED..... 22 MDF WOOD 23 FINISHED FLOOR PARQUET OR WHITTLE WOOD 31 VINYL / LAMINATED MDF 32 CERAMIC TILES / STONE TILES 33 CEMENT..... 34 CARPET 35 OTHER <i>(specify)</i> 96	

<p>HC5. Main material of the roof.</p> <p><i>Record observation.</i></p>	<p>NO ROOF..... 11</p> <p>NATURAL ROOFING</p> <p>THATCH / REED..... 12</p> <p>SOD 13</p> <p>RUDIMENTARY ROOFING</p> <p>WOOD PLANKS 23</p> <p>CARDBOARD 24</p> <p>ADOBE / CLAY 25</p> <p>ROOFING PAPER 26</p> <p>FINISHED ROOFING</p> <p>METAL / TIN..... 31</p> <p>WOOD..... 32</p> <p>CALAMINE / ROOFING SLATES / ONDULINE..... 33</p> <p>CERAMIC TILES 34</p> <p>CEMENT / CONCRETE SLABS 35</p> <p>ROOFING SHINGLES 36</p> <p>OTHER (<i>specify</i>) 96</p>	
<p>HC6. Main material of the exterior walls.</p> <p><i>Record observation.</i></p>	<p>NO WALLS..... 11</p> <p>NATURAL WALLS</p> <p>REED..... 12</p> <p>CLAY 13</p> <p>RUDIMENTARY WALLS</p> <p>STONE WITH CLAY 22</p> <p>UNCOVERED ADOBE 23</p> <p>PLYWOOD / MDF..... 24</p> <p>CARDBOARD 25</p> <p>REUSED WOOD 26</p> <p>FINISHED WALLS</p> <p>CEMENT..... 31</p> <p>STONE WITH LIME / CEMENT 32</p> <p>BRICKS / SLAG CONCRETE BLOCKS 33</p> <p>CEMENT BLOCKS 34</p> <p>CLAY PLASTER 35</p> <p>WOOD PLANKS / SHINGLES / SIDING 36</p> <p>WOOD BLOCKS 37</p> <p>STEEL/ALUMINIUM CONSTRUCTION..... 38</p> <p>OTHER (<i>specify</i>) 96</p>	

<p>HC7. Does your household have:</p> <p>[A] A fixed telephone line?</p> <p>[B] A radio?</p> <p>[C] A table?</p> <p>[D] A wardrobe?</p> <p>[E] A sofa?</p> <p>[F] A bed?</p> <p>[G] A kitchen cupboard?</p> <p>[H] A sewing machine?</p>	<p style="text-align: right;">YES NO</p> <p>FIXED TELEPHONE LINE 1 2</p> <p>RADIO 1 2</p> <p>TABLE 1 2</p> <p>WARDROBE 1 2</p> <p>SOFA 1 2</p> <p>BED 1 2</p> <p>KITCHEN CUPBOARD 1 2</p> <p>SEWING MACHINE 1 2</p>	
<p>HC8. Does your household have electricity?</p>	<p>YES, INTERCONNECTED GRID 1</p> <p>YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM) 2</p> <p>NO 3</p>	<p>3 ⇒ HC10</p>
<p>HC9. Does your household have:</p> <p>[A] A smart/flat-screen TV (LED or Plasma TV)?</p> <p>[H] A Cathode Ray Tube TV (simple TV)?</p> <p>[B] A refrigerator?</p> <p>[C] Automatic washing machine?</p> <p>[D] A fan?</p> <p>[E] Water heater (e.g. Ariston)?</p> <p>[F] Air conditioner?</p> <p>[G] Microwave oven?</p>	<p style="text-align: right;">YES NO</p> <p>SMART/FLAT-SCREEN TV 1 2</p> <p>CRT TV 1 2</p> <p>REFRIGERATOR 1 2</p> <p>WASHING MACHINE 1 2</p> <p>FAN 1 2</p> <p>WATER HEATER 1 2</p> <p>AIR CONDITIONER 1 2</p> <p>MICROWAVE 1 2</p>	
<p>HC10. Does any member of your household own:</p> <p>[A] A wristwatch?</p> <p>[B] A bicycle?</p> <p>[C] A motorcycle or scooter?</p> <p>[D] An animal-drawn cart?</p> <p>[E] A car, truck or van?</p> <p>[F] A tractor/agricultural machinery?</p>	<p style="text-align: right;">YES NO</p> <p>WRISTWATCH 1 2</p> <p>BICYCLE 1 2</p> <p>MOTORCYCLE/SCOOTER 1 2</p> <p>ANIMAL-DRAWN CART 1 2</p> <p>CAR/TRUCK/VAN 1 2</p> <p>TRACTOR/AGRICULTURAL MACHINERY 1 2</p>	

<p>HC11. Does any member of your household have a computer or a tablet?</p>	<p>YES 1</p> <p>NO 2</p>	<p>2⇒HC12</p>
<p>HC11A. And specifically, does any member of your household have:</p> <p>[A] A laptop?</p> <p>[B] A desktop PC?</p> <p>[C] A tablet?</p>	<p style="text-align: right;">YES NO</p> <p>LAPTOP 1 2</p> <p>DESKTOP PC 1 2</p> <p>TABLET 1 2</p>	
<p>HC12. Does any member of your household have a mobile telephone?</p>	<p>YES 1</p> <p>NO 2</p>	<p>2⇒HC13</p>
<p>HC12A. And, specifically does any member of your household have:</p> <p>[B] A basic mobile telephone (not smartphone)?</p> <p>[C] A smartphone?</p>	<p style="text-align: right;">YES NO</p> <p>BASIC MOBILE TELEPHONE 1 2</p> <p>SMARTPHONE 1 2</p>	
<p>HC13. Does your household have access to internet at home?</p>	<p>YES 1</p> <p>NO 2</p>	
<p>HC14. Do you or someone living in this household own this dwelling?</p> <p><i>If 'No', then ask: Do you rent this dwelling from someone not living in this household?</i></p> <p><i>If 'Rented from someone else', record '2'. For other responses, record '6' and specify.</i></p>	<p>OWN 1</p> <p>RENT 2</p> <p>OTHER (<i>specify</i>) 6</p>	
<p>HC15. Does any member of this household own any land that can be used for agriculture?</p>	<p>YES 1</p> <p>NO 2</p>	<p>2⇒HC17</p>
<p>HC16. How many hectares or ares of agricultural land do members of this household own?</p> <p><i>If 1 hectare or more, record '1' and record hectares.</i></p> <p><i>If 95 or more hectares, record '1' and record '95'.</i></p> <p><i>If less than 1 hectare, record '2' and record in ares.</i></p> <p><i>If less than 1 ares, record '2' and record '00'.</i></p> <p><i>If unknown, record '998'.</i></p> <p><i>100 ares = 1 Hectare</i></p>	<p>HECTARES 1 ____</p> <p>ARES 2 ____</p> <p>DK 998</p>	
<p>HC17. Does this household own any livestock, herds, other farm animals, or poultry?</p>	<p>YES 1</p> <p>NO 2</p>	<p>2⇒HC19</p>

<p>HC18. How many of the following animals does this household have?</p> <p>[A] Milk cows, heifers or bulls older than 1 year?</p> <p>[B] Calves (young bovine less than 1 year old)?</p> <p>[C] Horses?</p> <p>[H] Donkeys or mules?</p> <p>[D] Goats?</p> <p>[E] Sheep?</p> <p>[F] Chickens?</p> <p>[I] Other poultry?</p> <p>[G] Pigs?</p> <p><i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i></p>	<p>MILK COWS, HEIFERS OR BULLS ... ___ ___</p> <p>CALVES ___ ___</p> <p>HORSES..... ___ ___</p> <p>DONKEYS OR MULES ___ ___</p> <p>GOATS..... ___ ___</p> <p>SHEEP..... ___ ___</p> <p>CHICKENS ___ ___</p> <p>OTHER POULTRY ___ ___</p> <p>PIGS ___ ___</p>	
<p>HC19. Does any member of this household have a bank account?</p>	<p>YES 1</p> <p>NO 2</p>	

SOCIAL TRANSFERS

ST

ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.

	[A] MONTHLY SOCIAL ALLOWANCE	[B] ONE-TIME GRANT PAID FOR A BIRTH (i.e. MATERNITY BENEFIT) (SUYNCHU)	[C] MONTHLY ALLOWANCE FOR LOW-INCOME FAMILIES WITH CHILDREN	[D] ANY RETIREMENT PENSION	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME
ST2. Are you aware of (<i>name of programme</i>)?	YES.....1 NO2 ♡ [B]	YES 1 NO2 ♡ [C]	YES.....1 NO2 ♡ [D]	YES 1 NO2 ♡ [X]	YES (specify) _____ 1 NO2 ♡ End
ST3. Has your household or anyone in your household received assistance through (<i>name of programme</i>)?	YES.....1 ♡ ST4 NO2 ♡ [B] DK8 ♡ [B]	YES 1 ♡ ST4 NO2 [C] DK8 ♡ [C]	YES.....1 ♡ ST4 NO2 ♡ [D] DK8 ♡ [D]	YES 1 ♡ ST4 NO2 [X] DK8 ♡ [X]	YES 1 ♡ ST4 NO2 ♡ End DK8 ♡ End
ST4. When was the <u>last time</u> your household or anyone in your household received assistance through (<i>name of programme</i>)? <i>If less than one month, record '1' and record '00' in Months.</i> <i>If less than 12 months, record '1' and record in Months.</i> <i>If 1 year/12 months or more, record '2' and record in Years.</i>	MONTHS AGO...1 ___ ♡ [B] YEARS AGO.....2 ___ ♡ [B] DK998 ♡ [B]	MONTHS AGO..1 ___ ♡ [C] YEARS AGO2 ___ ♡ [C] DK998 ♡ [C]	MONTHS AGO...1 ___ ♡ [D] YEARS AGO.....2 ___ ♡ [D] DK998 ♡ [D]	MONTHS AGO ..1 ___ ♡ [X] YEARS AGO2 ___ ♡ [X] DK998 ♡ [X]	MONTHS AGO ...1 ___ ♡ End YEARS AGO2 ___ ♡ End DK998 ♡ End

HOUSEHOLD ENERGY USE		EU
EU1. In your household, what type of cookstove is <u>mainly</u> used for <u>cooking</u> ?	ELECTRIC STOVE 01	01 ⇒EU5
	SOLAR COOKER 02	02 ⇒EU5
	LIQUEFIED PETROLEUM GAS (LPG) / COOKING GAS STOVE 03	03 ⇒EU5
	PIPED NATURAL GAS STOVE..... 04	04 ⇒EU5
	BIOGAS STOVE 05	05 ⇒EU5
	LIQUID FUEL STOVE..... 06	06 ⇒EU4
	MANUFACTURED SOLID FUEL STOVE..... 07	
	TRADITIONAL SOLID FUEL STOVE..... 08	
	THREE STONE STOVE / OPEN FIRE..... 09	09 ⇒EU4
	OTHER (<i>specify</i>) _____ 96	96 ⇒EU4
NO FOOD COOKED IN HOUSEHOLD 97	97 ⇒EU6	
EU2. Does it have a chimney?	YES..... 1	
	NO 2	
	DK 8	
EU3. Does it have a fan?	YES..... 1	
	NO 2	
	DK 8	
EU4. What type of fuel or energy source is used in this cookstove? <i>If more than one, record the main energy source for this cookstove.</i>	ALCOHOL / ETHANOL 01	
	GASOLINE / DIESEL..... 02	
	KEROSENE / PARAFFIN 03	
	COAL / LIGNITE..... 04	
	CHARCOAL 05	
	WOOD..... 06	
	CROP RESIDUE/GRASS/STRAW/SHRUBS..... 07	
	ANIMAL DUNG / WASTE..... 08	
	PROCESSED BIOMASS (PELLETS) OR WOODCHIPS 09	
	GARBAGE / PLASTIC..... 10	
	SAWDUST..... 11	
OTHER (<i>specify</i>) _____ 96		
EU5. Is the cooking usually done in the house, in a separate building, or outdoors? <i>If in main house, probe to determine if cooking is done in a separate room.</i> <i>If outdoors, probe to determine if cooking is done on veranda, covered porch, or open air.</i>	IN MAIN HOUSE NO SEPARATE ROOM..... 1	
	IN A SEPARATE ROOM 2	
	IN A SEPARATE BUILDING..... 3	
	OUTDOORS OPEN AIR 4	
	ON VERANDA OR COVERED PORCH..... 5	
	OTHER (<i>specify</i>) _____ 6	

<p>EU6. What does your household <u>mainly</u> use for <u>space heating</u> when needed?</p>	<p>CENTRAL HEATING 01</p> <p>MANUFACTURED SPACE HEATER 02</p> <p>TRADITIONAL SPACE HEATER 03</p> <p>MANUFACTURED COOKSTOVE 04</p> <p>TRADITIONAL COOKSTOVE 05</p> <p>THREE STONE STOVE / OPEN FIRE..... 06</p> <p>OTHER (<i>specify</i>) 96</p> <p>NO SPACE HEATING IN HOUSEHOLD 97</p>	<p>01 ⇒EU9</p> <p>06 ⇒EU8</p> <p>96 ⇒EU8</p> <p>97 ⇒EU9</p>
<p>EU7. Does it have a chimney?</p>	<p>YES..... 1</p> <p>NO 2</p> <p>DK 8</p>	
<p>EU8. What type of fuel and energy source is used in this heater?</p> <p><i>If more than one, record the main energy source for this heater.</i></p>	<p>SOLAR AIR HEATER..... 01</p> <p>ELECTRICITY..... 02</p> <p>PIPED NATURAL GAS 03</p> <p>LIQUEFIED PETROLEUM GAS (LPG) / COOKING GAS 04</p> <p>BIOGAS 05</p> <p>ALCOHOL / ETHANOL 06</p> <p>GASOLINE / DIESEL..... 07</p> <p>KEROSENE / PARAFFIN 08</p> <p>COAL / LIGNITE..... 09</p> <p>CHARCOAL 10</p> <p>WOOD..... 11</p> <p>CROP RESIDUE/GRASS/STRAW/SHRUBS..... 12</p> <p>ANIMAL DUNG / WASTE 13</p> <p>PROCESSED BIOMASS (PELLETS) OR WOODCHIPS 14</p> <p>GARBAGE / PLASTIC..... 15</p> <p>SAWDUST 16</p> <p>OTHER (<i>specify</i>) 96</p>	
<p>EU9. At night, what does your household <u>mainly</u> use to <u>light</u> the household?</p> <p>Probe: the Issue does not apply to power outages.</p>	<p>ELECTRICITY..... 01</p> <p>SOLAR LANTERN..... 02</p> <p>RECHARGEABLE FLASHLIGHT, TORCH OR LANTERN 03</p> <p>BATTERY POWERED FLASHLIGHT, TORCH OR LANTERN 04</p> <p>BIOGAS LAMP 05</p> <p>GASOLINE LAMP 06</p> <p>KEROSENE OR PARAFFIN LAMP..... 07</p> <p>OIL LAMP..... 12</p> <p>CANDLE 13</p> <p>OTHER (<i>specify</i>) 96</p> <p>NO LIGHTING IN HOUSEHOLD 97</p>	

WATER AND SANITATION

WS

WS1. What is the main source of drinking water used by members of your household?

If unclear, probe to identify the place from which members of this household most often collect drinking water (collection point).

PIPED WATER		
PIPED INTO DWELLING	11	11 ⇨WS7
PIPED TO YARD / PLOT	12	12 ⇨WS7
PIPED TO NEIGHBOUR	13	13 ⇨WS3
PUBLIC TAP / STANDPIPE.....	14	14 ⇨WS3
 TUBE WELL / BOREHOLE	21	21 ⇨WS3
DUG WELL		
PROTECTED WELL.....	31	31 ⇨WS3
UNPROTECTED WELL	32	32 ⇨WS3
SPRING		
PROTECTED SPRING.....	41	41 ⇨WS3
UNPROTECTED SPRING	42	42 ⇨WS3
 RAINWATER.....	51	51 ⇨WS3
TANKER-TRUCK.....	61	61 ⇨WS4
CART WITH SMALL TANK	71	71 ⇨WS4
SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)	81	81 ⇨WS3
PACKAGED WATER		
BOTTLED WATER	91	
SACHET WATER	92	
 OTHER (<i>specify</i>).....	96	96 ⇨WS3

WS2. What is the main source of water used by members of your household for other purposes such as cooking and handwashing?

If unclear, probe to identify the place from which members of this household most often collect water for other purposes.

PIPED WATER		
PIPED INTO DWELLING	11	11 ⇨WS7
PIPED TO YARD / PLOT	12	12 ⇨WS7
PIPED TO NEIGHBOUR	13	
PUBLIC TAP / STANDPIPE.....	14	
 TUBE WELL / BOREHOLE	21	
DUG WELL		
PROTECTED WELL.....	31	
UNPROTECTED WELL	32	
SPRING		
PROTECTED SPRING.....	41	
UNPROTECTED SPRING	42	
 RAINWATER.....	51	
TANKER-TRUCK.....	61	61 ⇨WS4
CART WITH SMALL TANK	71	71 ⇨WS4
SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)	81	
 OTHER (<i>specify</i>).....	96	

WS3. Where is that water source located?	IN OWN DWELLING1 IN OWN YARD / PLOT2 ELSEWHERE3	1 ⇨WS7 2 ⇨WS7
WS4. How long does it take for members of your household to go there, get water, and come back?	MEMBERS DO NOT COLLECT000 NUMBER OF MINUTES__ __ __ DK.....998	000 ⇨WS7
WS5. Who usually goes to this source to collect the water for your household? <i>Record the name of the person and copy the line number of this person from the LIST OF HOUSEHOLD MEMBERS Module.</i>	NAME _____ LINE NUMBER.....__ __	
WS6. Since last (<i>day of the week</i>), how many times has this person collected water?	NUMBER OF TIMES.....__ __ DK.....98	
WS7. In the last month, has there been any time when your household did not have sufficient quantities of drinking water?	YES, AT LEAST ONCE.....1 NO, ALWAYS SUFFICIENT2 DK.....8	2 ⇨WS9 8 ⇨WS9
WS8. What was the main reason that you were unable to access water in sufficient quantities when needed?	WATER NOT AVAILABLE FROM SOURCE....1 WATER TOO EXPENSIVE.....2 SOURCE NOT ACCESSIBLE3 OTHER (<i>specify</i>).....6 DK.....8	
WS9. Do you or any other member of this household do anything to the water to make it safer to drink?	YES1 NO.....2 DK.....8	2 ⇨WS11 8 ⇨WS11
WS10. What do you usually do to make the water safer to drink? <i>Probe:</i> Anything else? <i>Record all methods mentioned.</i>	BOILA ADD BLEACH / CHLORINEB STRAIN IT THROUGH A CLOTHC USE WATER FILTER (CERAMIC, SAND, COMPOSITE, ETC.)D SOLAR DISINFECTIONE LET IT STAND AND SETTLEF OTHER (<i>specify</i>).....X DK.....Z	

<p>WS11. What kind of toilet facility do members of your household usually use?</p> <p><i>If 'Flush' or 'Pour flush', probe:</i> Where does it flush to?</p> <p><i>If not possible to determine, ask permission to observe the facility.</i></p>	<p>FLUSH / POUR FLUSH FLUSH TO PIPED SEWER SYSTEM.....11 FLUSH TO SEPTIC TANK.....12 FLUSH TO PIT LATRINE.....13 FLUSH TO OPEN DRAIN.....14 FLUSH TO DK WHERE.....18</p> <p>PIT LATRINE VENTILATED IMPROVED PIT LATRINE.....21 PIT LATRINE WITH SLAB22 PIT LATRINE WITHOUT SLAB / OPEN PIT23</p> <p>COMPOSTING TOILET.....31</p> <p>BUCKET.....41 HANGING TOILET / HANGING LATRINE51</p> <p>NO FACILITY / BUSH / FIELD.....95</p> <p>OTHER (<i>specify</i>).....96</p>	<p>11 ⇨WS14 14 ⇨WS14 18 ⇨WS14 41 ⇨WS14 51 ⇨WS14 95 ⇨End 96 ⇨WS14</p>
<p>WS12. Has your (<i>answer from WS11</i>) ever been emptied?</p>	<p>YES, EMPTIED WITHIN THE LAST 5 YEARS.....1 MORE THAN 5 YEARS AGO.....2 DON'T KNOW WHEN3</p> <p>NO, NEVER EMPTIED4</p> <p>DK.....8</p>	<p>4 ⇨WS14 8 ⇨WS14</p>
<p>WS13. The last time it was emptied, where were the contents emptied to?</p> <p><i>Probe:</i> Was it removed by a service provider?</p>	<p>REMOVED BY SERVICE PROVIDER TO A TREATMENT PLANT.....1 BURIED IN A COVERED PIT2 TO DON'T KNOW WHERE.....3</p> <p>EMPTIED BY HOUSEHOLD BURIED IN A COVERED PIT4 TO UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE.....5</p> <p>OTHER (<i>specify</i>).....6</p> <p>DK.....8</p>	
<p>WS14. Where is this toilet facility located?</p>	<p>IN OWN DWELLING1 IN OWN YARD / PLOT.....2 ELSEWHERE.....3</p>	
<p>WS15. Do you share this facility with others who are not members of your household?</p>	<p>YES1 NO.....2</p>	<p>2 ⇨End</p>
<p>WS16. Do you share this facility only with members of other households that you know, or is the facility open to the use of the general public?</p>	<p>SHARED WITH OTHER HOUSEHOLDS (NOT PUBLIC).....1 SHARED WITH GENERAL PUBLIC.....2</p>	<p>2 ⇨End</p>

WS17. How many households in total use this toilet facility, including your own household?	NUMBER OF HOUSEHOLDS (IF LESS THAN 10) <u>0</u>	
	TEN OR MORE HOUSEHOLDS 10	
	DK98	

HANDWASHING		HW
<p>HW1. We would like to learn about where members of this household wash their hands.</p> <p>Can you please show me where members of your household <u>most often</u> wash their hands?</p> <p><i>Record result and observation.</i></p>	<p>OBSERVED</p> <p>FIXED FACILITY OBSERVED (SINK / TAP)</p> <p>IN DWELLING1</p> <p>IN YARD / PLOT.....2</p> <p>MOBILE OBJECT OBSERVED (BUCKET / JUG / KETTLE).....3</p> <p>NOT OBSERVED</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT4</p> <p>NO PERMISSION TO SEE5</p> <p>OTHER REASON (<i>specify</i>)6</p>	<p>4 ⇨HW5</p> <p>5 ⇨HW4</p> <p>6 ⇨HW5</p>
<p>HW2. Observe presence of water at the place for handwashing.</p> <p><i>Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.</i></p>	<p>WATER IS AVAILABLE.....1</p> <p>WATER IS NOT AVAILABLE.....2</p>	
<p>HW3. Is soap or detergent or ash/mud/sand present at the place for handwashing?</p>	<p>YES, PRESENT1</p> <p>NO, NOT PRESENT2</p>	<p>1 ⇨HW7</p> <p>2 ⇨HW5</p>
<p>HW4. Where do you or other members of your household most often wash your hands?</p>	<p>FIXED FACILITY (SINK / TAP)</p> <p>IN DWELLING1</p> <p>IN YARD / PLOT.....2</p> <p>MOBILE OBJECT (BUCKET / JUG / KETTLE).....3</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT4</p> <p>OTHER (<i>specify</i>)6</p>	
<p>HW5. Do you have any soap or detergent or ash/mud/sand in your house for washing hands?</p>	<p>YES.....1</p> <p>NO2</p>	<p>2 ⇨End</p>
<p>HW6. Can you please show it to me?</p>	<p>YES, SHOWN1</p> <p>NO, NOT SHOWN.....2</p>	<p>2 ⇨End</p>
<p>HW7. Record your observation.</p> <p><i>Record all that apply.</i></p>	<p>BAR OR LIQUID SOAP.....A</p> <p>DETERGENT (POWDER / LIQUID / PASTE) B</p> <p>ASH / MUD / SAND..... C</p>	

SALT IODIZATION

SA

<p>SA1. We would like to check whether the salt used in your household is iodised. May I have a sample of the salt used <u>to cook meals</u> in your household?</p> <p><i>Apply 2 drops of test solution, observe the darkest reaction within 30 seconds, compare to the colour chart and then record the response (1, 2 or 3) that corresponds to test outcome.</i></p>	<p>SALT TESTED 0 PPM (NO REACTION) 1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM) .. 2 ABOVE 15 PPM (AT LEAST 15 PPM)..... 3</p> <p>SALT NOT TESTED NO SALT IN THE HOUSE..... 4 OTHER REASON (specify) _____ 6</p>	<p>2 ⇨ HH13 3 ⇨ HH13</p> <p>4 ⇨ HH13 6 ⇨ HH13</p>
<p>SA2. I would like to perform one more test. May I have another sample of the same salt?</p> <p><i>Apply 5 drops of recheck solution. Then apply 2 drops of test solution on the same spot. Observe the darkest reaction within 30 seconds, compare to the colour chart and then record the response (1, 2 or 3) that corresponds to test outcome.</i></p>	<p>SALT TESTED 0 PPM (NO REACTION) 1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM) .. 2 ABOVE 15 PPM (AT LEAST 15 PPM)..... 3</p> <p>SALT NOT TESTED OTHER REASON (specify) _____ 6</p>	

<p>HH13. Record the time.</p>	<p>HOUR AND MINUTES __ : __</p>	
<p>HH14. Language of the Questionnaire.</p>	<p>KYRGYZ 1 RUSSIAN 2</p>	
<p>HH15. Language of the Interview.</p>	<p>KYRGYZ 1 RUSSIAN 2</p> <p>OTHER LANGUAGE (specify) _____ 6</p>	
<p>HH16. Native language of the Respondent.</p>	<p>KYRGYZ 01 RUSSIAN 02 UZBEK 03 KAZAKH 04 TAJIK 05 DUNGAN 06 UYGUR 07</p> <p>OTHER LANGUAGE (specify) _____ 96</p>	
<p>HH17. Was a translator used for any parts of this questionnaire?</p>	<p>YES, ENTIRE QUESTIONNAIRE 1 YES, PART OF QUESTIONNAIRE 2 NO, NOT USED 3</p>	
<p>HH18. Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:</p>	<p>NO CHILDREN 0 1 CHILD 1 2 OR MORE CHILDREN (NUMBER)..... __</p>	<p>0 ⇨ HH29 1 ⇨ HH27</p>

HH19. List each of the children age 5-17 years below in the order they appear in the *LIST OF HOUSEHOLD MEMBERS*. Do not include other household members outside of the age range 5-17 years. Record the line number, name, sex, and age for each child.

HH20. Rank number	HH21. Line number from HL1	HH22. Name from HL2	HH23. Sex from HL4		HH24. Age from HL6
RANK	LINE	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	__ __

HH25. Check the last digit of the household number (HH2) from the *HOUSEHOLD INFORMATION PANEL*. This is the number of the row you should go to in the table below.

Check the total number of children age 5-17 years in HH18 above. This is the number of the column you should go to in the table below.

Find the box where the row and the column meet and record the number that appears in the box. This is the rank number (HH20) of the selected child.

LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD (FROM HH18)						
	2	3	4	5	6	7	8+
0	2	2	4	3	6	5	4
1	1	3	1	4	1	6	5
2	2	1	2	5	2	7	6
3	1	2	3	1	3	1	7
4	2	3	4	2	4	2	8
5	1	1	1	3	5	3	1
6	2	2	2	4	6	4	2
7	1	3	3	5	1	5	3
8	2	1	4	1	2	6	4
9	1	2	1	2	3	7	5

HH26. Record the rank number (HH20), line number (HH21), name (HH22) and age (HH24) of the selected child.

RANK NUMBER

HH27. (When HH18=1 or when there is a single child age 5-17 in the household): Record the rank number as '1' and record the line number (HL1), the name (HL2) and age (HL6) of this child from the *LIST OF HOUSEHOLD MEMBERS*.

LINE NUMBER

NAME

AGE

HH28. Issue a *QUESTIONNAIRE FOR CHILDREN AGE 5-17* to be administered to the mother/caretaker of this child.

HH29. Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any women age 15-49?	YES, AT LEAST ONE WOMAN AGE 15-49.....1 NO2	2⇒HH40
HH30. Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.		
HH31. Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any girls age 15-17?	YES, AT LEAST ONE GIRL AGE 15-171 NO2	2⇒HH40
HH32. Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one girl age 15-17?	YES, AT LEAST ONE GIRL AGE 15-17 WITH HL20≠901 NO, HL20=90 FOR ALL GIRLS AGE 15-17.....2	2⇒HH40
<p>HH33. As part of the survey we are also interviewing women age 15-49. We ask each person we interview for permission. A female interviewer conducts these interviews.</p> <p>For girls age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.</p> <p>May we interview (<i>name(s) of female member(s) age 15-17</i>) later?</p> <p><input type="checkbox"/> 'Yes' for all girls age 15-17 ⇒ Continue with HH40.</p> <p><input type="checkbox"/> 'No' for at least one girl age 15-17 and 'Yes' to at least one girl age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH40.</p> <p><input type="checkbox"/> 'No' for all girls age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH40.</p>		
HH40. Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?	YES, AT LEAST ONE1 NO2	2⇒HH45
HH41. Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.		
<p>HH45. Now return to the HOUSEHOLD INFORMATION PANEL and,</p> <ul style="list-style-type: none"> • Record '01' in question HH46 (Result of the Household Questionnaire interview), • Record the name and the line number (from the LIST OF HOUSEHOLD MEMBERS) of the Respondent to the Household Questionnaire interview in HH47, • Fill the questions HH48 – HH52, • Thank the respondent for his/her cooperation and then • Proceed with the administration of the remaining individual questionnaire(s) in this household. <p>If there is no individual questionnaire to be completed in this household thank the respondent for his/her cooperation and move to the next household you have been assigned by your supervisor.</p>		

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS