



HOUSEHOLD QUESTIONNAIRE

2023 Kyrgyzstan MICS



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: _____ / _____ / 2 0 2 3		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:	URBAN 1 RURAL 2													
<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>		HH11. Record the time. HOURS : MINUTES _____ : _____												
HH12. Hello, my name is (<i>your name</i>). 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 NO / NOT ASKED 2		1 ⇨ LIST OF HOUSEHOLD MEMBERS 2 ⇨ HH46												
HH46. Result of Household Questionnaire interview: Discuss any result not completed with Supervisor.	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 (specify) 96													
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	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #ffffcc;"> <th colspan="2" style="text-align: center; padding: 5px;">To be filled after the Household Questionnaire is completed</th> </tr> <tr style="background-color: #ffffcc;"> <th colspan="2" style="text-align: center; padding: 5px;">TOTAL NUMBER</th> </tr> </thead> <tbody> <tr> <td style="text-align: center; padding: 5px;">HH48</td> <td style="text-align: center; padding: 5px;">_____</td> </tr> <tr> <td style="text-align: center; padding: 5px;">HH49</td> <td style="text-align: center; padding: 5px;">_____</td> </tr> <tr> <td style="text-align: center; padding: 5px;">HH51</td> <td style="text-align: center; padding: 5px;">_____</td> </tr> <tr> <td style="text-align: center; padding: 5px;">HH52</td> <td style="text-align: center; padding: 5px;">_____</td> </tr> </tbody> </table>		To be filled after the Household Questionnaire is completed		TOTAL NUMBER		HH48	_____	HH49	_____	HH51	_____	HH52	_____
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HH55	_____													
HH56	ZERO 0 ONE 1													

LIST OF HOUSEHOLD MEMBERS																		HL	
<p>First complete HL2-HL4 vertically for all household members, starting with the head of the household. Once HL2-HL4 are complete for all members, <u>make sure to probe</u> 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.</p> <p>Then, ask questions HL5-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box:</p>																			
HL1. Line number	HL2. First, please tell me the name of each person who usually lives here, starting with the head of the household. <i>Probe for additional household members.</i>	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)? <i>Record in completed years.</i> <i>If age is 95 or above, record '95'.</i>	HL8. <i>Record line number if woman and age 15-49.</i>	HL10. <i>Record line number if age 0-4.</i>	HL11. Age 0-17? 1 YES 2 NO & Next Line	HL12. Is (name)'s natural mother alive? 1 YES 2 NO & HL16 8 DK & HL16	HL13. Does (name)'s natural mother live in this household? 1 YES 2 NO & HL15	HL14. <i>Record the line number of mother and go to HL16.</i>	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 & HL20 8 DK & HL20	HL17. Does (name)'s natural father live in this household? 1 YES 2 NO & HL19	HL18. <i>Record the line number of father and go to HL20.</i>	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)? <i>If 'No one' for a child age 15-17, record '90'.</i>		
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 3 4 8	1 2 8	1 2		1 2 3 4 8		
02			1 2				02	02	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
03			1 2				03	03	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
04			1 2				04	04	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
05			1 2				05	05	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
06			1 2				06	06	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
07			1 2				07	07	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
08			1 2				08	08	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
09			1 2				09	09	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
10			1 2				10	10	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
11			1 2				11	11	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
12			1 2				12	12	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
13			1 2				13	13	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
14			1 2				14	14	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
15			1 2				15	15	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8		
* Codes for HL3: Relationship to head of household:				01 HEAD 02 SPOUSE / PARTNER 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 / FOSTER / STEPCHILD 14 SERVANT (LIVE-IN) 96 OTHER (NOT RELATED) 98 DK			

EDUCATION											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 ⇄ Next Line		ED4. Has (<i>name</i>) ever attended school or any pre-school? 1 YES 2 NO ⇄ Next Line		ED5. What is the highest level and grade or year of school (<i>name</i>) has ever <u>attended</u> ? LEVEL: 0 PRE-SCHOOL ⇄ ED7 1 PRIMARY 2 BASIC SECONDARY 3 COMPLETE SECONDARY 4 PROFESSIONAL PRIMARY/MIDDLE 5 HIGHER 8 DK				ED6. Did (<i>name</i>) ever complete that (grade/year)? 1 YES 2 NO 8 DK		ED7. Age 3-24? 1 YES 2 NO ⇄ Next Line		ED8. Check ED4: Ever attended school or pre-school? 1 YES 2 NO ⇄ Next Line						
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. Line number	ED2. Name and age.		ED9. At any time during the current school year did (name) attend school or any pre- school? 1 YES 2 NO ☹ ED15	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? If “Yes”, record ‘1’. If “No”, probe to code who controls and manages the school. 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? If “Yes”, probe to ensure that support was not received from family, other relatives, friends or neighbours. 1 YES 2 NO ☹ ED14 8 DK ☹ ED14	ED13. Who provided the tuition support? Record all mentioned. 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? If “Yes”, probe to ensure that support was not received from family, other relatives, friends or neighbours. 1 YES 2 NO 8 DK	ED15. At any time during the previous school year did (name) attend school or any pre-school? 1 YES 2 NO ☹ 8 DK ☹ Next Line Next Line	ED16. During that previous school year, which level and grade or year did (name) attend? LEVEL: 0 PRE-SCHOOL ☹ Next Line 1 PRIMARY 2 BASIC SECONDARY 3 COMPLETE SECONDARY 4 PROFESSIONAL PRIMARY/MIDDLE 5 HIGHER 8 DK	GRADE/YEAR: 98 DK
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
HC2. To what nationality does (<i>name of the head of the household from HL2</i>) belong?	KYRGYZ.....01 RUSSIAN02 UZBEK03 KAZAKH04 TAJIK05 DUNGAN06 UYGUR07 OTHER (<i>specify</i>) 96	
HC3. How many rooms do members of this household usually use for sleeping?	NUMBER OF ROOMS__ __	
HC4. Main material of the dwelling floor. <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/ CLAY11 DUNG12 RUDIMENTARY FLOOR WOOD PLANKS (NON WHITTLED).....21 REED22 MDF WOOD23 FINISHED FLOOR PARQUET OR WHITTLE WOOD.....31 VINYL / LAMINATED MDF32 CERAMIC TILES / STONE TILES.....33 CEMENT34 CARPET35 OTHER (<i>specify</i>) 96	
HC5. Main material of the roof. <i>Record observation.</i>	NO ROOF11 NATURAL ROOFING THATCH / REED12 SOD13 RUDIMENTARY ROOFING WOOD PLANKS.....23 CARDBOARD24 ADOBE / CLAY25 ROOFING PAPER26 FINISHED ROOFING METAL / TIN31 WOOD32 CALAMINE / ROOFING SLATES / ONDULINE33 CERAMIC TILES34 CEMENT / CONCRETE SLABS.....35 ROOFING SHINGLES36 OTHER (<i>specify</i>) 96	

<p>HC6. Main material of the exterior walls.</p> <p><i>Record observation.</i></p>	<p>NO WALLS11</p> <p>NATURAL WALLS</p> <p>REED12</p> <p>CLAY.....13</p> <p>RUDIMENTARY WALLS</p> <p>STONE WITH CLAY22</p> <p>UNCOVERED ADOBE23</p> <p>PLYWOOD / MDF24</p> <p>CARDBOARD25</p> <p>REUSED WOOD.....26</p> <p>FINISHED WALLS</p> <p>CEMENT31</p> <p>STONE WITH LIME / CEMENT32</p> <p>BRICKS / SLAG CONCRETE BLOCKS.....33</p> <p>CEMENT BLOCKS34</p> <p>CLAY PLASTER35</p> <p>WOOD PLANKS / SHINGLES / SIDING.....36</p> <p>WOOD BLOCKS37</p> <p>STEEL/ALUMINIUM CONSTRUCTION38</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>	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>FIXED TELEPHONE LINE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>RADIO.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>TABLE</td> <td>1</td> <td>2</td> </tr> <tr> <td>WARDROBE</td> <td>1</td> <td>2</td> </tr> <tr> <td>SOFA</td> <td>1</td> <td>2</td> </tr> <tr> <td>BED</td> <td>1</td> <td>2</td> </tr> <tr> <td>KITCHEN CUPBOARD</td> <td>1</td> <td>2</td> </tr> <tr> <td>SEWING MACHINE</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	FIXED TELEPHONE LINE.....	1	2	RADIO.....	1	2	TABLE	1	2	WARDROBE	1	2	SOFA	1	2	BED	1	2	KITCHEN CUPBOARD	1	2	SEWING MACHINE	1	2	
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BED	1	2																											
KITCHEN CUPBOARD	1	2																											
SEWING MACHINE	1	2																											
<p>HC8. Does your household have electricity?</p>	<p>YES, INTERCONNECTED GRID1</p> <p>YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM)2</p> <p>NO3</p>	<p>3 ⇒ HC10</p>																											

HC9. Does your household have:	YES NO	
[A] A smart/flat-screen TV (LED or Plasma TV)?	SMART/FLAT-SCREEN TV 1 2	
[H] A Cathode Ray Tube TV (simple TV)?	CRT TV 1 2	
[B] A refrigerator?	REFRIGERATOR 1 2	
[C] Automatic washing machine?	WASHING MACHINE 1 2	
[D] A fan?	FAN 1 2	
[E] Water heater (e.g. Ariston)?	WATER HEATER 1 2	
[F] Air conditioner?	AIR CONDITIONER 1 2	
[G] Microwave oven?	MICROWAVE 1 2	
HC10. Does any member of your household own:	YES NO	
[A] A wristwatch?	WRISTWATCH 1 2	
[B] A bicycle?	BICYCLE 1 2	
[C] A motorcycle or scooter?	MOTORCYCLE/SCOOTER 1 2	
[D] An animal-drawn cart?	ANIMAL-DRAWN CART 1 2	
[E] A car, truck or van?	CAR/TRUCK/VAN 1 2	
[F] A tractor/agricultural machinery?	TRACTOR/AGRICULTURAL MACHINERY 1 2	
HC11. Does any member of your household have a computer or a tablet?	YES.....1 NO2	2⇒HC12
HC11A. And specifically, does any member of your household have:	YES NO	
[A] A laptop?	LAPTOP 1 2	
[B] A desktop PC?	DESKTOP PC 1 2	
[C] A tablet?	TABLET 1 2	
HC12. Does any member of your household have a mobile telephone?	YES.....1 NO2	2⇒HC13

<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>NO2</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>RENT2</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>NO2</p>	2 ⇒ HC17
<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>NO2</p>	2 ⇒ HC19

<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 such as ducks, turkeys or geese?</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>NO2</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 PAYED 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 ☺ ST3 NO.....2 ☺ [B]	YES..... 1 ☺ ST3 NO2 ☺ [C]	YES..... 1 ☺ ST3 NO2 ☺ [D]	YES 1 ☺ ST3 NO..... 2 ☺ [X]	YES (<i>specify</i>)..... 1 ☺ ST3 NO..... 2 ☺ End
ST3. Has your household or anyone in your household received assistance through (<i>name of programme</i>)?	YES.....1 ☺ ST4 NO.....2 ☺ [B] DK.....8 ☺ [B]	YES..... 1 ☺ ST4 NO2 ☺ [C] DK8 ☺ [C]	YES..... 1 ☺ ST4 NO2 ☺ [D] DK8 ☺ [D]	YES 1 ☺ ST4 NO..... 2 ☺ [X] DK..... 8 ☺ [X]	YES 1 ☺ ST4 NO..... 2 ☺ End DK..... 8 ☺ 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] DK.....998 ☺ [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 AGO.....2 ____ ☺ [X] DK.....998 ☺ [X]	MONTHS AGO...1 ____ ☺ End YEARS AGO.....2 ____ ☺ End DK.....998 ☺ 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>01I⇒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>DK 98</p>	
<p>EU9. At night, what does your household <u>mainly</u> use to <u>light</u> the household?</p> <p><i>Probe:</i> 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
<p>WS1. What is the <u>main</u> source of drinking water used by members of your household?</p> <p><i>If unclear, probe to identify the place from which members of this household most often collect drinking water (collection point).</i></p>	<p>PIPED WATER</p> <p>PIPED INTO DWELLING 11</p> <p>PIPED TO YARD / PLOT 12</p> <p>PIPED TO NEIGHBOUR 13</p> <p>PUBLIC TAP / STANDPIPE..... 14</p> <p>TUBE WELL / BOREHOLE 21</p> <p>DUG WELL</p> <p>PROTECTED WELL 31</p> <p>UNPROTECTED WELL 32</p> <p>SPRING</p> <p>PROTECTED SPRING 41</p> <p>UNPROTECTED SPRING 42</p> <p>RAINWATER..... 51</p> <p>TANKER-TRUCK..... 61</p> <p>CART WITH SMALL TANK 71</p> <p>SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)..... 81</p> <p>PACKAGED WATER</p> <p>BOTTLED WATER..... 91</p> <p>SACHET WATER 92</p> <p>OTHER (<i>specify</i>) 96</p>	<p>11 ⇨ WS7</p> <p>12 ⇨ WS7</p> <p>13 ⇨ WS3</p> <p>14 ⇨ WS3</p> <p>21 ⇨ WS3</p> <p>31 ⇨ WS3</p> <p>32 ⇨ WS3</p> <p>41 ⇨ WS3</p> <p>42 ⇨ WS3</p> <p>51 ⇨ WS3</p> <p>61 ⇨ WS4</p> <p>71 ⇨ WS4</p> <p>81 ⇨ WS3</p> <p>91</p> <p>92</p> <p>96 ⇨ WS3</p>
	<p>PIPED WATER</p> <p>PIPED INTO DWELLING 11</p> <p>PIPED TO YARD / PLOT 12</p> <p>PIPED TO NEIGHBOUR 13</p> <p>PUBLIC TAP / STANDPIPE..... 14</p> <p>TUBE WELL / BOREHOLE 21</p> <p>DUG WELL</p> <p>PROTECTED WELL 31</p> <p>UNPROTECTED WELL 32</p> <p>SPRING</p> <p>PROTECTED SPRING 41</p> <p>UNPROTECTED SPRING 42</p> <p>RAINWATER..... 51</p> <p>TANKER-TRUCK..... 61</p> <p>CART WITH SMALL TANK 71</p> <p>SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)..... 81</p> <p>OTHER (<i>specify</i>) 96</p>	<p>11 ⇨ WS7</p> <p>12 ⇨ WS7</p> <p>13</p> <p>14</p> <p>21</p> <p>31</p> <p>32</p> <p>41</p> <p>42</p> <p>51</p> <p>61</p> <p>71</p> <p>81</p> <p>96</p> <p>61 ⇨ WS4</p> <p>71 ⇨ WS4</p>

WS3. Where is that water source located?	IN OWN DWELLING 1 IN OWN YARD / PLOT 2 ELSEWHERE 3	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 COLLECT 000 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 SUFFICIENT 2 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 ACCESSIBLE 3 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?	YES 1 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>	BOIL A ADD BLEACH / 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 (<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</p> <p>FLUSH TO PIPED SEWER SYSTEM 11</p> <p>FLUSH TO SEPTIC TANK..... 12</p> <p>FLUSH TO PIT LATRINE 13</p> <p>FLUSH TO OPEN DRAIN 14</p> <p>FLUSH TO DK WHERE 18</p> <p>PIT LATRINE</p> <p>VENTILATED IMPROVED PIT LATRINE 21</p> <p>PIT LATRINE WITH SLAB..... 22</p> <p>PIT LATRINE WITHOUT SLAB / OPEN PIT 23</p> <p>COMPOSTING TOILET 31</p> <p>BUCKET 41</p> <p>HANGING TOILET / HANGING LATRINE 51</p> <p>NO FACILITY / BUSH / FIELD 95</p> <p>OTHER (<i>specify</i>) 96</p>	<p>11 ⇨ WS14</p> <p>14 ⇨ WS14</p> <p>18 ⇨ WS14</p> <p>41 ⇨ WS14</p> <p>51 ⇨ WS14</p> <p>95 ⇨ End</p> <p>96 ⇨ WS14</p>
<p>WS12. Has your (<i>answer from WS11</i>) ever been emptied?</p>	<p>YES, EMPTIED 1</p> <p>NO, NEVER EMPTIED..... 4</p> <p>DK 8</p>	<p>4 ⇨ WS14</p> <p>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</p> <p>TO A TREATMENT PLANT 1</p> <p>BURIED IN A COVERED PIT 2</p> <p>TO DON'T KNOW WHERE 3</p> <p>EMPTIED BY HOUSEHOLD</p> <p>BURIED IN A COVERED PIT 4</p> <p>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 DWELLING 1</p> <p>IN OWN YARD / PLOT 2</p> <p>ELSEWHERE 3</p>	
<p>WS15. Do you share this facility with others who are not members of your household?</p>	<p>YES 1</p> <p>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 KNOWN HOUSEHOLDS (NOT PUBLIC) 1</p> <p>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 DK 98	
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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 DWELLING 1</p> <p>IN YARD / PLOT 2</p> <p>MOBILE OBJECT OBSERVED</p> <p>(BUCKET / JUG / KETTLE) 3</p> <p>NOT OBSERVED</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT 4</p> <p>NO PERMISSION TO SEE..... 5</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, PRESENT 1</p> <p>NO, NOT PRESENT 2</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 DWELLING 1</p> <p>IN YARD / PLOT 2</p> <p>MOBILE OBJECT</p> <p>(BUCKET / JUG / KETTLE) 3</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT 4</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>NO 2</p>	<p>2 ⇨ End</p>
<p>HW6. Can you please show it to me?</p>	<p>YES, SHOWN 1</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>	

HH13. Record the time.	HOUR AND MINUTES.....__ : __																																																													
HH14. Language of the Questionnaire.	KYRGYZ 1 RUSSIAN 2																																																													
HH15. Language of the Interview.	KYRGYZ 1 RUSSIAN 2 OTHER LANGUAGE (specify) 6																																																													
HH16. Native language of the Respondent.	KYRGYZ01 RUSSIAN02 UZBEK03 KAZAKH.....04 TAJIK05 DUNGAN06 UYGUR07 OTHER LANGUAGE (specify)96																																																													
HH17. Was a translator used for any parts of this questionnaire?	YES, ENTIRE QUESTIONNAIRE 1 YES, PART OF QUESTIONNAIRE 2 NO, NOT USED 3																																																													
HH18. Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:	NO CHILDREN 0 1 CHILD 1 2 OR MORE CHILDREN (NUMBER) __	0 ⇒ HH29 1 ⇒ HH27																																																												
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.																																																														
<table border="1"> <thead> <tr> <th>HH20. Rank number</th> <th>HH21. Line number from HL1</th> <th>HH22. Name from HL2</th> <th colspan="2">HH23. Sex from HL4</th> <th>HH24. Age from HL6</th> </tr> <tr> <th>RANK</th> <th>LINE</th> <th>NAME</th> <th>M</th> <th>F</th> <th>AGE</th> </tr> </thead> <tbody> <tr><td>1</td><td>__ __</td><td></td><td>1</td><td>2</td><td>__ __</td></tr> <tr><td>2</td><td>__ __</td><td></td><td>1</td><td>2</td><td>__ __</td></tr> <tr><td>3</td><td>__ __</td><td></td><td>1</td><td>2</td><td>__ __</td></tr> <tr><td>4</td><td>__ __</td><td></td><td>1</td><td>2</td><td>__ __</td></tr> <tr><td>5</td><td>__ __</td><td></td><td>1</td><td>2</td><td>__ __</td></tr> <tr><td>6</td><td>__ __</td><td></td><td>1</td><td>2</td><td>__ __</td></tr> <tr><td>7</td><td>__ __</td><td></td><td>1</td><td>2</td><td>__ __</td></tr> <tr><td>8</td><td>__ __</td><td></td><td>1</td><td>2</td><td>__ __</td></tr> </tbody> </table>	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	__ __		
HH20. Rank number	HH21. Line number from HL1	HH22. Name from HL2	HH23. Sex from HL4		HH24. Age from HL6																																																									
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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 _

LINE 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.

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
NO 2

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 15-17 1
NO 2

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≠90 1
NO, HL20=90 FOR ALL GIRLS AGE 15-17 2

2 ⇒ HH40

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.

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.

May we interview (*name(s) of female member(s) age 15-17*) later?

- ☐ 'Yes' for all girls age 15-17 ⇒ Continue with HH40.
- ☐ '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.
- ☐ '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.

HH40. Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?	YES, AT LEAST ONE 1 NO..... 2	2 ⇒ HH45A
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HH41. Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.

HH44A. Check HC7[A] and HC12: Does this household have a fixed telephone line or does any member of the household have a mobile phone?	YES, HC7[A]=1 OR HC12=1 1 NO, HC7[A]=2 AND HC12=2 2	2 ⇒ HH45
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HH44B. Thank you for your participation.

The National Statistical Committee will be conducting a phone survey about the situation of children, families and households in the future. We would like to invite you to participate in this survey. If you agree to participate, we will ask you to share a phone number we can reach you at and convenient times to contact you. The phone interview will take about 5 minutes, and we may call you a few times over a period of a few months. Participation in this phone survey is voluntary, and even if you agree to participate now, you may decide to withdraw from participation in the future. There will be no costs to you for participating in the phone survey. Please know that all the information you share during future phone interviews will remain strictly confidential, and your phone number will not be shared with anyone outside our team. Would you like to participate?

YES..... 1 NO..... 2	2 ⇒ HH45
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HH44C. Do you have a personal phone number or does your household have a communal number where you can be reached?	YES 1 NO 2	2 ⇒ HH45
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HH44D. You may share your household communal number, but please, do not share any personal phone numbers that belong to individual members of your household. Please, tell me what is the best phone number to contact you on.

	[P1] BEST NUMBER	[P2] 2 ND NUMBER	[P3] 3 RD NUMBER
HH44E. Ask for and record phone number.	_____	_____	_____
HH44F. Just to confirm, the number is (<i>number recorded in HH44E</i>)? If no, return to HH44E and correct entry.	YES 1 NO 2 <input type="checkbox"/> HH44E	YES 1 NO 2 <input type="checkbox"/> HH44E	YES 1 NO 2 <input type="checkbox"/> HH44E
HH44G. Is this a fixed line or a mobile phone number?	FIXED LINE 1 MOBILE 2	FIXED LINE 1 MOBILE 2	FIXED LINE 1 MOBILE 2
HH44H1. Usually, what time of the day would be best to call you on this number?	PERIOD BETWEEN AND ANY TIME 95 OTHER (specify) 96	PERIOD BETWEEN AND ANY TIME 95 OTHER (specify) 96	PERIOD BETWEEN AND ANY TIME 95 OTHER (specify) 96
HH44H2. Usually, what days of the week are best to call you on this number? Probe: Any other day? If X is recorded, no other answer is possible.	MONDAY A TUESDAY B WEDNESDAY C THURSDAY D FRIDAY E SATURDAY F SUNDAY G DK/NO PREF X	MONDAY A TUESDAY B WEDNESDAY C THURSDAY D FRIDAY E SATURDAY F SUNDAY G DK/NO PREF X	MONDAY A TUESDAY B WEDNESDAY C THURSDAY D FRIDAY E SATURDAY F SUNDAY G DK/NO PREF X
HH44I. Remember, you may share your household communal number, but please, do not share any personal phone numbers that belong to individual members of your household. Do you have another personal or communal phone number where you can be reached?	YES 1 <input type="checkbox"/> [P2] NO 2 <input type="checkbox"/> HH45	YES 1 <input type="checkbox"/> [P3] NO 2 <input type="checkbox"/> HH45	YES 1 <input type="checkbox"/> [P4] NO 2 <input type="checkbox"/> HH45
			Tick here if additional questionnaire used: <input type="checkbox"/>

HH45. Now return to the HOUSEHOLD INFORMATION PANEL and,

- 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.

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.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS	