▪■■ MICS

WOMEN'S INFORMATION PANEL	WM

This questionnaire is to be filled for all women aged 15 to 49 (see Household List, column HL7). A separate questionnaire should be used for each woman qualified.

WM1. Cluster number:		**WM2.** Household number:	
WM3. Woman's name:		**WM4.** Woman's line number:	
Name			
WM5. Interviewer's name and number:		**WM6.** Day / Month / Year of interviewing:	
Name			

Repeat the introduction if you haven't read it to this woman already:

We are from *Ipsos Strategic Puls*. We are working on a project related to family health and education. I would like to talk to you about these issues. The interview will last about 30 minutes. All information obtained will remain strictly confidential and your answers will only be analysed as group data by the project team without any direct correlations to your personal data..

If you have already read it to this woman at the beginning from the household questionnaire, then read the following:

We are working on a project related to family health and education. I would like to talk to you about these issues. This interview will last about 30 minutes. All information obtained will remain strictly confidential and your answers will only be analysed as group data by the project team without any direct correlations to your personal data..

Can we start now?

☐ *Yes, permission is given* ⇨ *Go to WM10 to record time and start the interview.*

☐ *No, permission is not given* ⇨ *Complete WM7. Talk to your supervisor about this result.*

WM7. Result of woman's interview	Completed	01
	Not at home	02
	Refused	03
	Partly completed	04
	Incapacitated	05
	Other (*specify*)	**96**

WM8. Editor in the field (Name and number):	WM9. Data entered by (Name and number):
Name	Name

WM10. *Record the momentary time.* Hour and minutes	

WOMAN'S BACKGROUND	WB

WB1. In what month and year were you born?	Birth date	
	Month	
	DK month	98
	Year	
	DK year	9998
WB2. How old are you? *Probe:* How old were you at your last birthday? *Compare age with the given date and immediately correct WB1 and/or WB2 if the answers are not consistent*	Age (completed years)	
WB3. Have you ever attended school or preschool?	Yes	1	2⇨WB7
	No	2	
WB4. What is the highest level of education that you have attended?	Preschool	0	0⇨WB7
	Primary	1	
	Secondary	2	
	Higher	3	

WB5. What is the highest grade/year you completed at that level? *If less than 1 grade, enter "00"*	Grade/year	
WB6. *Check WB4:* ☐ Secondary or higher. ⇨ Go to Next Module ☐ Primary ⇨ Continue with WB7		
WB7. Now I would like you to read this sentence to me. *Show the sentence on the card to the respondent.* *If the respondent cannot read whole sentence, probe:* Can you read one part of the sentence to me?	Cannot read at all .... 1 Able to read only parts of sentence .... 2 Able to read whole sentence .... 3 No sentence in the language she understands .... 4 *(specify language)* Blind / mute, visually / speech impaired 5	

CHILD MORTALITY   CM

Questions CM0 – CM12 refer to LIVE BIRTHS only.

CM0. Check in WM1, for cluster number:
- ☐ If the number of the cluster where you currently are interviewing belongs to the additional clusters with mostly Roma population ⇨ Go to CM1
- ☐ Other cases⇨ Continue with CM0A

CM0A. Now i want to ask you about the births you have had during your lifetime. How many live born children have you had in your entire life? What I mean is have you given birth to a child who ever breathed or cried or shown any signs of life – even if that child had lived for only few minutes or hours? *If none, circle '00'.*	None 00 Number of live born children	⇨CM12A
CM0B. When did you gave your last birth (even if the child has died)? Month and year must be recorded.	Date of last birth Day Doesn't know day 98 Month Year	⇨CM12A
CM1. Now I'd like to ask you about all the births you have given in your lifetime. Have you ever given any birth?	Yes 1 No 2	2⇨CM8
CM2. What is the date of your first birth? What I mean is the very first time you gave birth, even if the child is not alive anymore, or even if his/her father is not your current partner. *Move to CM4 only if the year of her first birth is given, if not, continue with CM3.*	Date of first birth Day Doesn't know day 98 Month DK month 98 Year Doesn't know year 9998	⇨CM4
CM3. How many years ago did you you first give birth to a child?	Total completed years since first birth	
CM4. Are any sons or daughters you have given birth to living with you now?	Yes 1 No 2	2⇨CM6

CM5. How many sons are living with you? How many daughters are living with you? *If none, record '00'.*	Sons at home		
	Daughters at home		
CM6. Are there any sons or daughters you have given birth to who are alive but are not living with you?	Yes	1	2⇨CM8
	No	2	
CM7. How many sons are alive but are not living with you? How many daughters are alive but are not living with you? *If none, record '00'.*	Sons living elsewhere		
	Daughters living elsewhere		
CM8. Have you ever given birth to a boy or a girl that was born alive but died later? *If the answer is "No" probe:* What I mean is given birth to a child who breathed, or cried, or showed any other signs of life, even if it had lived for only a few minutes or hours?	Yes	1	
	No	2	2⇨CM10
CM9. How many boys have died? How many girls have died? *If none, record '00'.*	Dead boys		
	Dead girls		
CM10. Sum all the answers in CM5, CM7, and CM9 and write down the total number of live born children.	Sum		

CM11. Let's make sure I have understood you correctly, you have had (*total number in CM10*) live born children in total during your lifetime. Is this right?

☐ Yes. Check below:

    ☐ No live born children (i.e. the sum equals 0)⇨ Go to CM12A
    ☐ One or more live born children ⇨ Continue with CM12

☐ No ⇨ Check the answers from CM1-CM10 and make any necessary corrections, before you proceed and move to CM12

CM12. Out of all these (*total number in CM10*) live born children you have had, tell me when did you deliver the last one (even if that child has died)? *Month and year must be recorded.*	Date of last birth		
	Day		
	DK day	98	
	Month		
	Year		
CM12A. Sometimes women have pregnancies that might not end with a live birth. Have you ever had any pregnancy that was miscarried, ended in a stillbirth, or that was aborted?	Yes	1	2⇨CM13
	No2		
CM12B. How many miscarriages have you had during your lifetime? By miscarriage, I mean an early and involuntary end of pregnancy within the first 5th month of pregnancy	None	00	
	Number of miscarriages		
CM12C. How many of your pregnancies have ended with a stillbirth? By stillbirth, I mean a birth that took place after the 5th month of pregnancy, but the child did not show any signs of life.	None	00	
	Number of stillbirths		
CM12D. And how many abortions have you had during your lifetime? By abortion, i mean a pregnancy that was voluntarily terminated within the first 5 months of pregnancy	None	00	00⇨CM13
	Number of abortions		

		Date of (last) abortion		
CM12E. When did your (last) abortion took place? *Month and year must be recorded.*		Month		
		Year		

CM12F. *Check in CM12E when the last abortion took place and if:*

☐ There are no abortions during the last 2 years. ⇨ Go to CM13
☐ The last abortion took place during the last 2 years, that is, since (the month of interviewing) in 2009, ⇨ Continue with CM12G

CM12G. *If the respondent has mentioned more than one abortion, i.e. CM12D is higher than 1, then ask her for the exact month and year of each mentioned abortion that took place during the last 2 years, i.e. since (the month of interviewing) 2009. Write down month and year for each abortion in CM12H, starting from the last, and for each recorded abortion ask the respondent to tell you how many weeks/months she was pregnant when she aborted and record this appropriately.*

	Last abortion	Previous to the last abortion	Second last from the last abortion	Third last from the last abortion
CM12H. What month and year your (last) abortion took place?	*Don't ask, it is given in CM12E*	Month Year	Month Year	Month Year
CM12I. How many Months (weeks) were you pregnant when your pregnancy was aborted? *If the respondent answers in weeks, write down on the appropriate line for weeks, otherwise just record the given months*		Weeks1 Months2	Weeks1 Months2	Weeks1 Months2	Weeks1 Months2

CM13. *Check CM0B or CM12: Her last birth occurred during the last 2 years, i.e., since (the day and month of interview) in **2009***

☐ *No live births during the last 2 years.* ⇨ *Go to ILLNESS SYMPTOMS Module.*
☐ *One or more live births during the last 2 years.* ⇨ *Ask about the name of the last born child*

Child's name_____

If the child has passed away, please be very careful when you are referring to this child by its name in the modules that follow. If the child has passed away right after it was given birth and it did not get any name at all, refer to this child as 'the baby/the infant' and be very careful in your approach.

Continue with the next module.

DESIRE FOR LAST BIRTH   DB

This module is to be filled with all the women with a live birth in the last 2 years, preceding the date of the interview.

Check the module for Child Mortality CM13 and record the name of the last-born child here _____.
Use this child's name in the questions that follow, where indicated.

DB1. When you became pregnant with (*name*), did you want to get pregnant at that period?	Yes No		1 2	1⇨Next Module
DB2. Did you want to become pregnant sometime later, or you did not want to have any (more) children?	Later No more		1 2	2⇨Next Module
DB3. How much longer did you want to wait?	Months Years DK		1 2 998	

MATERNAL AND NEWBORN HEALTH   MN

This module is to be filled with all the women with live births during the last 2 years.
Record the name of the last-born child here _____.
Use this child's name in the following questions, where indicated in brackets, like this: (name).

MN1. Did you see anyone for care during your pregnancy with (*name of child*)?	Yes 1 No2	2⇨MN17

MN2. Whom did you see?
 	
Probe:
Anyone else?
 	
Probe until you are sure about the type of person seen and circle all the answers given, if more than one mentioned.
	Health professional:
	   Doctor A
	   Auxiliary midwife C
	   Midwife D
	   Nurse E
	Other person
	   Non-medical person that traditionally attends birth in the local community F
	   Community health worker G
	
	Other (*specify*) X	

MN3. How many times did you receive care during this pregnancy?	Number of times __ __ DK 98	
MN4. As part of your care during this pregnancy, were any of the following done at least once: [A] Was your blood pressure measured? [B] Did you give a urine sample? [C] Did you give a blood sample?	Yes No Blood pressure 1 2 Urine sample 1 2 Blood sample 1 2	

MN17. Who assisted you with the delivery of (*name of child*)?
 	
Probe:
Anyone else?
 	
Probe for the type of person assisting and circle all answers given.
 	
If respondent says 'No one' assisted, probe to determine whether any adults were present at the delivery and write down under 'Other' if the given answer is not listed as an option.
	Health professional:
	   Doctor A
	   Auxiliary midwife C
	   Midwife D
	   Nurse E
	
	Other person
	   Non-medical person that traditionally attends birth in the local community F
	   Community health worker G
	   Relative / Friend H
	
	Other (*specify*) **X**
	No one Y	

MN18. Where did you give birth to (*name of child*)?
 	
Probe to closely identify the type of place before you circle any of the given answer codes.
 	
If unable to determine whether it is a public or private institution, write the name of the place where birth was given on the line below.
 	
....
(Name of place)
	Home
	    Your home
	    Other home
	
	Public sector
	    Clinical Hospital
	    General Hospital
	    Health post (birth post)
	    Clinical Centre – Skopje
	    Gynaecology Hospital – Chair
	    Other public institution (*specify*)
	
	Private Medical Sector
	    Private hospital
	    Private clinic
	    Private maternity home
	    Other private
	        medical (*specify*)
	
	Other (*specify*)
		
		11
		12
		
		21
		22
		23
		24
		25
		26
		
		31
		32
		33
		
		36
		
		96
			
			11⇨MN20
			12⇨MN20
			
			96⇨MN20

MN19. Was (*name*) delivered by caesarean section? That is, did they cut your belly open to take the baby out?	Yes No	1 2	
MN20. When (*name*) was born, was he/she a very large, larger than average, average, smaller than average, or very small baby?	Very large Larger than average Average Smaller than average Very small DK	1 2 3 4 5 8	
MN21. Was (*name*) weighed at birth?	Yes No DK	1 2 8	2⇨MN23 8⇨MN23
MN22. How much did (*name*) weigh? *If card is available, give it a priority and copy the answer from there.*	From card 1 (kg) .... From recall 2 (kg) .... DK	 99998	
MN23. Has your menstrual period returned since the birth of (*name*)?	Yes No	1 2	
MN24. Did you ever breastfeed (*name*)?	Yes No	1 2	2⇨Next Module
MN25. How long after birth did you first put (*name*) on your breast for feeding? *If less than 1 hour, record '00' hours.* *If less than 24 hours, circle code 1 and write down the exact number of hours.* *Otherwise, record the number of days and circle code 2.*	Immediately Hours 1 .... Days 2 .... Don't know / remember	000 998	
MN26. In the first three days after delivery, was (*name*) given anything to drink other than breast milk?	Yes No	1 2	2⇨Next Module

| MN27. What else was (*name*) given to drink?

Probe:
Anything else?

Record all mentioned answers | Milk (other than breast milk)
Plain water
Sugar or glucose water
Gripe water
Sugar-salt-water solution
Fruit juice
Infant formula (artificial milk)
Tea
Honey
Other (*specify*) | A
B
C
D
E
F
G
H
I
X | |

ILLNESS SYMPTOMS   IS

IS1. *Check Household List, column HL9 in the Household Questionnaire*
Is the respondent the mother or guardian of at least one child aged under 5?
☐   *Yes ⇨ Continue with IS2.*
☐   *No ⇨ Go to Next Module.*

| IS2. Sometimes children have severe illnesses and should be taken immediately to a health facility.
          What types of symptoms would cause you to take your child to a health facility right away?

          Probe additionally:
          Any other symptoms?

Keep asking for more signs or symptoms until the mother/guardian cannot recall any additional symptoms.

Circle all symptoms mentioned, but do NOT prompt with any suggestions and write down all additional answers not listed in the given answer options under 'other' | Child not able to drink or breastfeed
Child becomes sicker
Child develops a fever
Child has fast breathing
Child has difficult breathing
Child has blood in stool
Child is drinking poorly
Child has a rush

Other (*specify*)

Other (*specify*)

Other (*specify*) | A
B
C
D
E
F
G
H

X

Y

Z | |

CP0. Couples use different ways or methods in order to postpone or avoid pregnancy.		
Have you heard of :	Yes 1	
[A]Sterilization of Female?	No 2	
Probe: Women can have an operation in order to avoid having more children.		
[B]Sterilization of Male?	Yes 1	
Probe: Men can have an operation in order to avoid having more children.	No 2	
[C]Coil?	Yes 1	
Probe: Women can have a coil placed inside them by a doctor or a nurse.	No 2	
[D] Injections?	Yes 1	
Probe: Women can use injections from a health provider, which have effects on their hormones and stop them from getting pregnant for one or more months.	No 2	
[E] Implants?	Yes 1	
Probe: Women can have one or more small rods implanted in their upper arm (by a doctor or a nurse) and thus prevent pregnancy for one or more years.	No 2	
[F] Pills?	Yes 1	
Probe: Women can take pills on every day basis to avoid getting pregnant.	No 2	
[G] Male Condom?	Yes 1	
Probe: Men can put a rubber cover on their penis before the sexual intercourse.	No 2	
[H] Female Condom?	Yes 1	
Probe: Women can put a cover in their vagina before the sexual intercourse.	No 2	
[I] Diaphragm?	Yes 1	
Probe: Women can insert a soft rubber cup in their vagina to block the sperm from entering their uterus or tubes	No 2	
[J] Foam, Jelly?	Yes 1	
Probe: Women may use spermicidal products (like for ex. foam, jelly, cream) that can kill or prevent the sperm from moving and reaching the egg.	No 2	
[K] Lactational Amenorrhea Method (LAM)?	Yes 1	
	No 2	
[L] Rhythm Method?	Yes 1	
Probe: Every month when the woman is sexually active, she can avoid pregnancy by not having a sexual intercourse on the fertile days in the month, i.e. days she is most likely to get pregnant.	No 2	
	Yes 1	
	No 2	
[M] Withdrawal?	Yes 1	
Probe: Men can be cautious and pull out before reaching climax.	No 2	
[N]Urgent Contraception?	Yes 1	
Probe: As an emergency measure, within a period of 3 days, after having unprotected sexual intercourse, women can take special pills to prevent getting pregnant.	*(specify)*	
[X] Have you heard of any other ways or methods that men or women can utilise in order to avoid pregnancy?	*(specify)*	
	No 2	
CP1. Now, I would like to talk to you about another topic – planning the family. Are you pregnant at the moment?	Yes, she is pregnant 1 No 2 Not sure or don't know 8	1⇨Next Module

CP2. At the moment, are you doing anything or using any method to postpone or avoid pregnancy?	Yes	1	2⇨Next Module
	No2		
CP3. What are you doing to postpone or avoid pregnancy? If more than one method is mentioned, circle each one as appropriate.	Female sterilization	A	
	Male sterilization	B	
	IUD	C	
	Injections	D	
	Implants	E	
	Pills	F	
	Male condom	G	
	Female condom	H	
	Diaphragm	I	
	Foam / Jelly	J	
	Lactational amenorrhoea method (LAM)	K	
	Rhythm / Periodic abstinence	L	
	Withdrawal	M	
	Other (specify)	X	

UNFULFILLED NEED FOR CONTRACEPTION   UN

UN1. Check CP1. Is she currently pregnant?

☐ Yes, she is currently pregnant ⇨ Continue with UN2
☐ No, not sure or doesn't know ⇨ Go to UN5

UN2. Now I'd like to talk to you about your current pregnancy. When you got pregnant, did you want to get pregnant?	Yes	1	1⇨UN4
	No2		
UN3. Did you want to have a baby sometime later or you did not want to have any (more) children?	Later	1	
	No more	2	
UN4. Now I'd like to ask a few questions about the future. After the child you are expecting right now, would you like to have another child, or you would rather not have any more children?	To have another child	1	1⇨UN7
	No more / None	2	2⇨UN13
	Indecisive / Doesn't know	8	8⇨UN13

UN5. Check CP3. Currently using "Female sterilization"?

☐ Yes ⇨ Go to UN13
☐ No ⇨ Continue with UN6

UN6. Now I would like to ask you about the future. Would you like to have (another) child, or you would rather not have any (more) children?	Wants to have (other) children	1	2⇨UN9
	Doesn't want any/no more children	2	3⇨UN11 8⇨UN9
	She says she cannot get pregnant	3	
	Indecisive / Doesn't know	8	
UN7. For how long would you like to wait before you give birth to (another) child?	Months 1 ☐		
	Years 2 ☐		
	Soon / Now	993	994⇨UN11
	She says she cannot get pregnant	994	
	After the marriage	995	
	Other	996	
	Don't know	998	

UN8. *Check CP1. Currently pregnant?*

☐ Yes, currently pregnant ⇨ Go to UN13
☐ No, not sure or doesn't know ⇨ Continue with UN9

UN9. *Check CP2. At the moment is she using any method?*

☐ Yes ⇨ Go to UN13
☐ No ⇨ Continue with UN10

UN10. Do you think that you are physically able to get pregnant at the moment?	Yes	1	1 ⇨UN13
	No	2	
	Don't know	8	8 ⇨UN13

UN11. Why do you think you are not physically able to get pregnant? Multiple answers are possible	Irregular sex / No sex	A	
	Menopause	B	
	Never menstruated	C	
	Hysterectomy (surgical removal of uterus)	D	
	Trying to get pregnant for 2 years or more without any results	E	
	Postpartum amenorrhea	F	
	Breastfeeding	G	
	Too old	H	
	Fatalistic	I	
	Other (*specify*)	X	
	Don't know	Z	

UN12. *Check UN11. "Never menstruated"- has it been mentioned?*

☐ Mentioned ⇨ Go to Next Module
☐ Not mentioned ⇨ Continue with UN13

UN13. When did your last menstrual cycle start?			
	Days ago	1	⬚
	Weeks ago	2	⬚
	Months ago	3	⬚
	Years ago	4	⬚
	In menopause / Has had hysterectomy	994	
	Before her last birth	995	
	Has never menstruated	996	

ATTITUDES TOWARD DOMESTIC VIOLENCE   DV

DV1. Sometimes a husband can be annoyed or irritated by things that his wife does. In your opinion, is a husband justified to hit or beat his wife in the following situations:

		Yes	No	DK
[A]	If she goes out without telling him?			
[B]	If she neglects the children?			
[C]	If she argues with him?			
[D]	If she refuses to have sex with him?			
[E]	If she burns the food?			

	Yes	No	DK
Goes out without telling	1	2	8
Neglects children	1	2	8
Argues with him	1	2	8
Refuses sex	1	2	8
Burns food	1	2	8

MARRIAGE/UNION   MA

MA1. Are you currently married or living together with a man as married?	Yes, currently married .... 1 Yes, living with a man .... 2 No, not in union 3	3⇨MA5
MA2. How old is your husband/partner? *Probe additionally*: How old was your husband/partner on his last birthday?	Age in years [＿＿] DK 98	⇨MA7 98⇨MA7
MA5. Have you ever been married or lived together with a man as if married?	Yes, formerly married .... 1 Yes, formerly lived with a man .... 2 No 3	3 ⇨Next Module
MA6. What is your marital status now: are you widowed, divorced or separated?	Widowed .... 1 Divorced .... 2 Separated 3	
MA7. Have you been married or lived with a man only once or more than once?	Only once .... 1 More than once 2	
MA8. In what month and year did you <u>first</u> marry or start living with a man as if married?	Date of first marriage/ living together Month [＿＿] DK month .... 98 Year [＿＿＿＿] DK year 9998	⇨Next Module ⇨MA9
MA9. How old were you when you started living with your first husband/partner?	Age in years [＿＿]	

TOBACCO AND ALCHOHOL CONSUMPTION   TA

TA1. have you ever tried smoking, at least one or two puffs?	Yes .... 1 No 2	2⇨TA6
TA2. At what age did you first smoke a whole cigarette?	I have never smoked a whole cigarette .... 00 Age [＿＿]	00⇨TA6
TA3. Do you smoke cigarettes today?	Yes .... 1 No 2	2⇨TA6
TA4. During the last 24 hours, how many cigarettes have you smoked?	Number of cigarettes [＿＿]	

TA5. During the last month, for how many days have you smoked cigarettes? *If less than 10 days, write the number of days.* *If 10 days or more, circle „10".* *If „every day" or „almost every day", circle „30"*	Number of days	0 ⬚	
	10 days or more	10	
	Every day/Almost every day	30	
TA6. Have you ever tried to smoke tobacco products, except cigarettes, like for example, cigars, water pipe, cigarillo or dry tobacco?	Yes No	1 2	2⇨TA10
TA7. During the last month, have you consumed any type of smoking tobacco products, excluding cigarettes?	Yes No	1 2	2⇨TA10
TA8. What type of smoked tobacco product did you use or smoke during the last one month? *Circle all mentioned.*	Cigars Water pipe Cigarillos Pipe Other (*specify*)(⬚)	A B C D X	
TA9. During the last one month, on how many days did you use smoked tobacco products, excluding cigarettes? *If less than 10 days, record the number of days.* *If 10 days or more but less than a month, circle "10".* *If "everyday" or "almost every day", circle "30"*	Number of days	0 ⬚	
	10 days or more but less than a month	10	
	Everyday / Almost every day	30	
A10. Have you ever tried any type of product made from tobacco, like for example tobacco chewing gum, burmut, or tobacco for soaking?	Yes No	1 2	2 ⇨TA14
TA11. During the last month, have you consumed any type of products from non-smoking tobacco?	Yes No	1 2	2 ⇨TA14
TA12. What type of smokeless tobacco product did you use during the last one month? *Circle all mentioned.*	Chewing tobacco Snuff Dip Other (*specify*)	A B C X	
TA13. During the last one month, on how many days did you use smokeless tobacco products? *If less than 10 days, record the number of days.* *If 10 days or more but less than a month, circle "10".* *If "everyday" or "almost every day", circle "30"*	Number of days	0 ⬚	
	10 days or more but less than a month	10	
	Everyday / Almost every day	30	
TA14. Now a few questions about alcohol consumption. Have you ever tried consuming alcohol?	Yes No	1 2	2⇨NEXT MODULE
TA15. One intake of alcohol refers to one can or bottle of beer, one glass of wine or a glass of Rakia, cognac, vodka, whiskey, or rum. At what age did you drink your first glass of alcohol, excluding any time you had a few sips?	I have never drank a whole glass Age	00 ⬚	

TA 16. During the last month, how many days have you had at least one glass of alcohol? *If the respondent has drunk zero glasses, circle „00"* *If less than 10 days, write the number of days.* *If 10 days or more, circle „10".* *If „every day" or „almost every day", circle „30"*	Has not drank any glass during the last month 00 Number of days 0 ⬚ 10 days or more 10 Every day/almost every day 30	00⇨ NEXT MODULE
TA 17. During the last month, on days you had alcohol, how many glasses have you mostly had?	Number of glasses ⬚	

LS1. *Check WB2: Is respondent's age between 15и 24?*

☐   Aged 25-49 ⇨ go to WM11
☐   Aged 15-24 ⇨ continue with LS2

LS2. Now, I would like to ask you a few simple questions about happiness and satisfaction. First, taking all things together, would you say you are very happy, somewhat happy, neither happy nor unhappy, somewhat unhappy or very unhappy? You can also look at these pictures to help you with your response. *Show response card 1 to the respondent and explain what each symbol represents. Circle the answer pointed by the respondent.*	Very happy 1 Somewhat happy 2 Neither happy nor unhappy 3 Somewhat unhappy 4 Very unhappy 5	
LS3. Now I'd like to ask a few simple questions about the level of your satisfaction from various fields. For any of the questions, we have five possible answers: please let me know, for each question, are you very or somewhat satisfied, neither satisfied nor unsatisfied, or somewhat or very unsatisfied? Once again, you can take a look at these images that might help you with your answer. *Please hand the answer card 2 to the respondent and explain what each of the symbols represents. For each question from LS3 to LS13, circle the response given by the respondent* how satisfied are you from your family life?	Very satisfied 1 Somewhat satisfied 2 Neither satisfied nor unsatisfied 3 Somewhat unsatisfied 4 Very unsatisfied 5	
LS4. How satisfied are you from your friendships?	Very satisfied 1 Somewhat satisfied 2 Neither satisfied nor unsatisfied 3 Somewhat unsatisfied 4 Very unsatisfied 5	
LS5. During the current (2010-2011) school year, have you attended school at all?	Yes 1 No 2	2⇨LS7
LS6. How satisfied are /were you from the school you have attended?	Very satisfied 1 Somewhat satisfied 2 Neither satisfied nor unsatisfied 3 Somewhat unsatisfied 4 Very unsatisfied 5	
LS7. How satisfied are you from your current job? *If the respondent says that he/she does not have a job, circle "0" and continue with the next question. Do not probe to find out how she feels about not having a job, unless she tells you herself.*	Doesn't have a job 0 Very satisfied 1 Somewhat satisfied 2 Neither satisfied nor unsatisfied 3 Somewhat unsatisfied 4 Very unsatisfied 5	

LS8. How satisfied are you from your health?	Very satisfied	1
	Somewhat satisfied	2
	Neither satisfied nor unsatisfied	3
	Somewhat unsatisfied	4
	Very unsatisfied	5
LS9. How satisfied are you with your place of living? *If necessary, explain that the questions refer to their life environment, including their neighbourhood and dwelling.*	Very satisfied	1
	Somewhat satisfied	2
	Neither satisfied nor unsatisfied	3
	Somewhat unsatisfied	4
	Very unsatisfied	5
LS10. How satisfied are you from the treatment you receive by the people around you?	Very satisfied	1
	Somewhat satisfied	2
	Neither satisfied nor unsatisfied	3
	Somewhat unsatisfied	4
	Very unsatisfied	5
LS11. How satisfied are you from your looks?	Very satisfied	1
	Somewhat satisfied	2
	Neither satisfied nor unsatisfied	3
	Somewhat unsatisfied	4
	Very unsatisfied	5
LS12. How satisfied are you from your own life, in general?	Very satisfied	1
	Somewhat satisfied	2
	Neither satisfied nor unsatisfied	3
	Somewhat unsatisfied	4
	Very unsatisfied	5
LS13. How satisfied are you from your current income? *If the respondent responds that he/she does not have any income, circle "0" and continue with the next question. Do not probe to find out how she feels about not having any income, unless she tells you herself.*	No income	0
	Very satisfied	1
	Somewhat satisfied	2
	Neither satisfied nor unsatisfied	3
	Somewhat unsatisfied	4
	Very unsatisfied	5
LS14. Compared to the same period last year, would you say that, in general, your life has improved or become worse?	Improved	1
	Remained the same, more or less	2
	Got worse	3
LS15. And in a year time from now, do you expect that your life, in general, will be improved or will get worse?	Will be improved	1
	Remained the same, more or less	2
	Will get worse	3

WM11. *Record the momentary time.*	Hour and minutes		:

WM12. *Check Household roster, column HL9, in the Household Questionnaire.*
Is the respondent a mother or a guardian to at least one child aged between 0 and 4 that lives in this household or is she a mother/guardian to at least one child aged between 2 and 9?
☐ *Yes, she has a child aged between 0 and 4⇨ Go to the QUESTIONNAIRE FOR CHILDREN UNDER FIVE*
for that particular child and start the interview with this respondent – mother/guardian to this child.
☐ *Yes, she has a child aged between 2 and 9⇨ Go to the QUESTIONNAIRE FOR CHILDREN DISABILITY*
for that particular child and start the interview with this respondent – mother/guardian to this child.
☐ *No ⇨ End the interview with this respondent by thanking her for the collaboration.*

Check if there is any the presence of any other suitable women, children under 5, or children aged between 2 and 9 in the household.

Interviewer's Observations

Field Editor's Observations

Supervisor's Observations