

APPENDIX E 2018-2019 NORTH MACEDONIA MICS AND 2018-2019 NORTH MACEDONIA ROMA SETTLEMENTS MICS QUESTIONNAIRES

The questionnaires of surveys are presented in Appendix E:

- Household questionnaire
- Questionnaire for Individual Women
- Questionnaire for Children Under Five
- Questionnaire Form for Vaccination Records at Health Facility
- Questionnaire for Children Age 5-17

Upon full customization of the English template of the questionnaires to the country context, the questionnaires were translated in Macedonian and Albanian. Data was collected using the Macedonian and Albanian versions.



HOUSEHOLD QUESTIONNAIRE

2018-2019 Macedonia 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 1 _____		HH7. Region: VARDAR..... 01 EAST..... 02 SOUTHWEST..... 03 SOUTHEAST..... 04 PELAGONIJA..... 05 POLOG..... 06 NORTHEAST..... 07 SKOPJE..... 08
HH6. Area:	URBAN..... 1 RURAL..... 2	

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.

HH11. Record the time.

HOURS : MINUTES

_____ : _____

HH12. Hello, my name is (**your name**). I come from the State Statistical Office. In collaboration with UNICEF, 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 20 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: <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 (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

To be filled after the Household Questionnaire is completed

TOTAL NUMBER

HH48 _____**HH49** _____**HH51** _____**HH52** _____

To be filled after all the questionnaires are completed

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 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?		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 \varnothing Next Line	HL12. Is (name)'s natural mother alive? 1 YES 2 NO \varnothing HL16 8 DK \varnothing HL16	HL13. Does (name)'s natural mother live in this household? 1 YES 2 NO \varnothing 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 MUNICIPALITY 3 IN ANOTHER HOUSEHOLD IN ANOTHER MUNICIPALITY 4 INSTITUTION IN THIS COUNTRY 8 DK	HL16. Is (name)'s natural father alive? 1 YES 2 NO \varnothing HL20 8 DK \varnothing HL20	HL17. Does (name)'s natural father live in this household? 1 YES 2 NO \varnothing 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 MUNICIPALITY 3 IN ANOTHER HOUSEHOLD IN ANOTHER MUNICIPALITY 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 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 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 ☺ Next Line		ED4. Has (<i>name</i>) ever attended school or pre-school education? 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 (GRADES 1-5) 2 PRIMARY (GRADES 6-9) 3 OCCUPATIONAL SECONDARY (3 YEARS) 4 SECONDARY (4 YEARS) 5 VOCATIONAL 6 HIGHER 8 DK				ED6. Did (<i>name</i>) ever <u>complete</u> that (grade/year)? 98 DK ☺ ED7			ED7. Age 3-24? 1 YES 2 NO ☺ Next Line		ED8. Check ED4: Ever attended school or pre-school education? 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	6	8	___	1	2	8	1	2	1	2
02		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
03		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
04		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
05		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
06		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
07		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
08		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
09		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
10		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
11		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
12		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
13		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
14		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2
15		___	1	2	1	2	0	1	2	3	4	5	6	8	___	1	2	8	1	2	1	2

EDUCATION 2													ED						
ED1. Line number	ED2. Name and age.		ED9. At any time during the 2018/19 school year did (name) attend school or pre-school education ?		ED10. During 2018/19 school year, which level and grade or year is (name) attending?		ED11. Is (he/she) attending a public school?		ED12. In the 2018/19 school year, has (name) received any school tuition support?		ED13. Who provided the tuition support?		ED14. For the 2018/19 school year, has (name) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies?		ED15. At any time during the 2017/18 school year did (name) attend school or any pre-school?		ED16. During the 2017/18 school year, which level and grade or year did (name) attend?		
			1 YES 2 NO ⚡ ED15		LEVEL: 0 PRE-SCHOOL ⚡ ED15 1 PRIMARY (GRADES 1-5) 2 PRIMARY (GRADES 6-9) 3 OCCUPATIONAL SECONDARY (3 YEARS) 4 SECONDARY (4 YEARS) 5 VOCATIONAL 6 HIGHER 8 DK	GRADE/ YEAR: 98 DK	If "Yes", record '1'. If "No", probe to code who controls and manages the school. 1 GOVT. 2 RELIGIOUS / FAITH ORG. 3 PRIVATE 6 OTHER 8 DK		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		Record all mentioned. A GOVT. B RELIGIOUS / FAITH ORG. C PRIVATE. X OTHER Z DK		If "Yes", probe to ensure that support does not include textbooks and that it was not received from family, other relatives, friends or neighbours. 1 YES 2 NO 8 DK		1 YES 2 NO ⚡ Next Line 8 DK ⚡ Next Line		LEVEL: 0 PRE-SCHOOL ⚡ Next Line 1 PRIMARY (GRADES 1-5) 2 PRIMARY (GRADES 6-9) 3 OCCUPATIONAL SECONDARY (3 YEARS) 4 SECONDARY (4 YEARS) 5 VOCATIONAL 6 HIGHER 8 DK 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 6 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 6 8	___
02		___	1	2	0 1 2 3 4 5 6 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 6 8	___
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04		___	1	2	0 1 2 3 4 5 6 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 6 8	___
05		___	1	2	0 1 2 3 4 5 6 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 6 8	___
06		___	1	2	0 1 2 3 4 5 6 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 6 8	___
07		___	1	2	0 1 2 3 4 5 6 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 6 8	___
08		___	1	2	0 1 2 3 4 5 6 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 6 8	___
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15		___	1	2	0 1 2 3 4 5 6 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 6 8	___

HOUSEHOLD CHARACTERISTICS		HC
HC1A. What is the religion of (<i>name of the head of the household from HL2</i>)?	CHRISTIAN ORTHODOX 1 MUSLIM 2 CHRISTIAN CATHOLIC 3 OTHER RELIGION (<i>specify</i>) _____ 6 NO RELIGION 7	
HC1B. What is the mother tongue/native language of (<i>name of the head of the household from HL2</i>)?	MACEDONIAN 01 ALBANIAN 02 TURKISH 03 ROMA 04 VLACH 05 SERBIAN 06 BOSNIAK 07 OTHER LANGUAGE (<i>specify</i>) _____ 96	
HC2. To what ethnic group does (<i>name of the head of the household from HL2</i>) belong?	MACEDONIAN 01 ALBANIAN 02 TURKISH 03 ROMA 04 VLACH 05 SERBIAN 06 BOSNIAK 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 11 DUNG 12 RUDIMENTARY FLOOR WOOD PLANKS 21 FINISHED FLOOR PARQUET OR POLISHED WOOD 31 VINYL OR ASPHALT STRIPS 32 CERAMIC TILES 33 CEMENT 34 CARPET 35 LAMINATE 36 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 12</p> <p>SOD 13</p> <p>STONE SLABS / LEAF STONE 14</p> <p>RUDIMENTARY ROOFING</p> <p>RUSTIC MAT 21</p> <p>WOOD PLANKS 23</p> <p>CARDBOARD 24</p> <p>FINISHED ROOFING</p> <p>METAL / TIN..... 31</p> <p>WOOD..... 32</p> <p>CALAMINE / CEMENT FIBRE 33</p> <p>CERAMIC TILES 34</p> <p>CEMENT..... 35</p> <p>ROOFING SHINGLES 36</p> <p>SALONITE / ASBESTOS..... 37</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>CANE / TRUNKS 12</p> <p>DIRT..... 13</p> <p>RUDIMENTARY WALLS</p> <p>STONE WITH MUD..... 22</p> <p>UNCOVERED ADOBE..... 23</p> <p>PLYWOOD 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..... 33</p> <p>CEMENT BLOCKS 34</p> <p>COVERED ADOBE..... 35</p> <p>WOOD PLANKS / SHINGLES 36</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] Dining table with chairs?</p> <p>[D] A sofa?</p> <p>[E] A closet for clothes / wardrobe?</p> <p>[F] Bed for sleeping?</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>DINING TABLE WITH CHAIRS</td> <td>1</td> <td>2</td> </tr> <tr> <td>SOFA.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>CLOSET / WARDROBE</td> <td>1</td> <td>2</td> </tr> <tr> <td>BED FOR SLEEPING.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	FIXED TELEPHONE LINE	1	2	RADIO	1	2	DINING TABLE WITH CHAIRS	1	2	SOFA.....	1	2	CLOSET / WARDROBE	1	2	BED FOR SLEEPING.....	1	2	
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HC8. Does your household have electricity? <i>If 'Yes', ask: Is the electricity provided via an interconnected grid on or is it off-grid?</i>	YES, INTERCONNECTED GRID 1 YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM)2 NO3	3 ⇒ HC10																																							
HC9. Does your household have: [A] A television? [B] A refrigerator? [C] A washing machine? [D] An electrical stove? [E] A water heater? [F] A dishwasher? [G] An air-conditioner? [H] A drying machine / clothes dryer? [I] A vacuum cleaner? [J] An air purifier? [K] A video monitoring system? [L] A jacuzzi tub?	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>TELEVISION.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>REFRIGERATOR.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>WASHING MACHINE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>ELECTRICAL STOVE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>WATER HEATER.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>DISHWASHER.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>AIR-CONDITIONER.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>DRYING MACHINE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>VACUUM CLEANER.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>AIR PURIFIER.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>VIDEO MONITORING SYSTEM.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>JACUZZI TUB.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	TELEVISION.....	1	2	REFRIGERATOR.....	1	2	WASHING MACHINE.....	1	2	ELECTRICAL STOVE.....	1	2	WATER HEATER.....	1	2	DISHWASHER.....	1	2	AIR-CONDITIONER.....	1	2	DRYING MACHINE.....	1	2	VACUUM CLEANER.....	1	2	AIR PURIFIER.....	1	2	VIDEO MONITORING SYSTEM.....	1	2	JACUZZI TUB.....	1	2	
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HC10. Does any member of your household own: [A] A wristwatch? [B] A bicycle? [C] A motorcycle or scooter? [D] An animal-drawn cart? [E] A car, truck or van? [F] A boat with a motor? [G] Additional dwelling / weekend house or apartment	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>WRISTWATCH.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>BICYCLE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>MOTORCYCLE / SCOOTER.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>ANIMAL-DRAWN CART.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>CAR / TRUCK / VAN.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>BOAT WITH MOTOR.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>ADDITIONAL DWELLING / WEEKEND HOUSE.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	WRISTWATCH.....	1	2	BICYCLE.....	1	2	MOTORCYCLE / SCOOTER.....	1	2	ANIMAL-DRAWN CART.....	1	2	CAR / TRUCK / VAN.....	1	2	BOAT WITH MOTOR.....	1	2	ADDITIONAL DWELLING / WEEKEND HOUSE.....	1	2																
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ADDITIONAL DWELLING / WEEKEND HOUSE.....	1	2																																							
HC11. Does any member of your household have a computer or a tablet?	YES 1 NO2																																								
HC12. Does any member of your household have a mobile telephone?	YES 1 NO2																																								
HC13. Does your household have access to internet at home?	YES 1 NO2																																								

<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>	2 ⇒ HC17
<p>HC16. What size of agricultural land do members of this household own?</p> <p><i>Record the answer as stated by respondent.</i></p>	<p>M2 1 _____</p> <p>ARES..... 2 _____</p> <p>DECARES..... 3 _____</p> <p>HECTARES 4 _____</p> <p>DK 9999998</p>	
<p>HC17. Does this household own any livestock, herds, other farm animals, poultry or beehives?</p>	<p>YES 1</p> <p>NO 2</p>	2 ⇒ HC19
<p>HC18. How many of the following animals does this household have?</p> <p>[A] Milk cows or bulls?</p> <p>[B] Other cattle?</p> <p>[C] Horses, donkeys or mules?</p> <p>[D] Goats?</p> <p>[E] Sheep?</p> <p>[F] Chickens?</p> <p>[G] Pigs?</p> <p>[H] Turkeys?</p> <p>[I] Beehives?</p> <p>[J] Other poultry?</p> <p><i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i></p>	<p>MILK COWS OR BULLS ____</p> <p>OTHER CATTLE ____</p> <p>HORSES, DONKEYS OR MULES..... ____</p> <p>GOATS..... ____</p> <p>SHEEP..... ____</p> <p>CHICKENS ____</p> <p>PIGS ____</p> <p>TURKEYS..... ____</p> <p>BEEHIVES..... ____</p> <p>OTHER POULTRY ____</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] CHILD ALLOWANCE	[B] SPECIAL ALLOWANCE	[C] SOCIAL FINANCIAL ASSISTANCE	[D] ANY RETIREMENT PENSION	[E] PERMANENT FINANCIAL ASSISTANCE	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME
ST2. Are you aware of <i>(name of programme)?</i>	YES..... 1 NO..... 2 [B]	YES..... 1 NO..... 2 [C]	YES..... 1 NO..... 2 [D]	YES..... 1 NO..... 2 [E]	YES..... 1 NO..... 2 [X]	YES (<i>specify</i>) 1 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 NO..... 2 [C] DK..... 8 [C]	YES..... 1 ST4 NO..... 2 [D] DK..... 8 [D]	YES..... 1 ST4 NO..... 2 [E] DK..... 8 [E]	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 AGO 2 [C] DK..... 998 [C]	MONTHS AGO 1 [D] YEARS AGO 2 [D] DK..... 998 [D]	MONTHS AGO 1 [E] YEARS AGO 2 [E] DK..... 998 [E]	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
	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 / TYRES 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>AIR CONDITIONER/ INVERTER..... 07</p> <p>THERMOSTATIC STORAGE HEATER..... 08</p> <p>ELECTRIC PANELS 09</p> <p>OTHER (<i>specify</i>) _____ 96</p> <p>NO SPACE HEATING IN THE HOUSEHOLD 97</p>	<p>01 ⇒EU8</p> <p>06 ⇒EU8</p> <p>07 ⇒EU8</p> <p>08 ⇒EU8</p> <p>09 ⇒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 / TYRES 15</p> <p>SAWDUST 16</p> <p>OTHER (<i>specify</i>) _____ 96</p> <p>DK_____ 98</p>	

EU9. At night, what does your household <u>mainly</u> use to <u>light</u> the household?	ELECTRICITY	01
	SOLAR LANTERN.....	02
	RECHARGEABLE FLASHLIGHT, TORCH OR LANTERN.....	03
	BATTERY POWERED FLASHLIGHT, TORCH OR LANTERN.....	04
	BIOGAS LAMP	05
	GASOLINE LAMP	06
	KEROSENE OR PARAFFIN LAMP.....	07
	CHARCOAL	08
	WOOD.....	09
	CROP RESIDUE / GRASS / STRAW / SHRUBS.....	10
	ANIMAL DUNG / WASTE	11
	OIL LAMP.....	12
	CANDLE	13
	OTHER (<i>specify</i>)	96
NO LIGHTING IN HOUSEHOLD	97	

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	
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 DWELLING.....1 IN OWN YARD / PLOT2 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 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 ONCE1 NO, ALWAYS SUFFICIENT2 DK.....8	2 ⇒WS10A1 8 ⇒WS10A1
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 EXPENSIVE2 SOURCE NOT ACCESSIBLE.....3 OTHER (<i>specify</i>)6 DK.....8	
WS10A1. Where do you or other members of your household most often wash your hands?	FIXED FACILITY (SINK / TAP) IN DWELLING 1 IN YARD / PLOT 2 MOBILE OBJECT (BUCKET / JUG / KETTLE)..... 3 NO HANDWASHING PLACE IN DWELLING / YARD / PLOT 4 OTHER (<i>specify</i>) 6	
WS10A2. Do you have any soap or detergent in your house for washing hands? <i>If “yes”, probe: Do you have soap, detergent or both for handwashing?</i>	YES, BAR OR LIQUID SOAP..... 1 DETERGENT (POWDER / LIQUID / PASTE).. 2 BOTH TYPES..... 3 NO..... 4	

<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 TANK12</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</p> <p>LATRINE21</p> <p>PIT LATRINE WITH SLAB22</p> <p>PIT LATRINE WITHOUT SLAB /</p> <p>OPEN PIT23</p> <p>COMPOSTING TOILET.....31</p> <p>BUCKET41</p> <p>HANGING TOILET /</p> <p>HANGING LATRINE51</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</p> <p>WITHIN THE LAST 5 YEARS1</p> <p>MORE THAN 5 YEARS AGO2</p> <p>DON'T KNOW WHEN3</p> <p>NO, NEVER EMPTIED4</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 PIT2</p> <p>TO DON'T KNOW WHERE3</p> <p>EMPTIED BY HOUSEHOLD</p> <p>BURIED IN A COVERED PIT4</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 / PLOT2</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>	

HH13. Record the time.	HOUR AND MINUTES __ : __			
HH14. Language of the Questionnaire.	MACEDONIAN2 ALBANIAN3			
HH15. Language of the Interview.	MACEDONIAN2 ALBANIAN3 OTHER LANGUAGE (specify) 6			
HH16. Native language of the Respondent.	MACEDONIAN02 ALBANIAN03 TURKISH.....04 ROMA05 VLACH06 SERBIAN07 BOSNIAK08 OTHER LANGUAGE (specify) 96			
HH17. Was a translator used for any parts of this questionnaire?	YES, ENTIRE QUESTIONNAIRE 1 YES, PART OF QUESTIONNAIRE2 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 CHILDREN0 1 CHILD1 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.				
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≠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	2 ⇒ HH45
	NO2	

HH41. Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.

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