5-17 CHILD INFORMATION PANEL	**FS**

FS1. *Cluster number:* ___ ___ ___	**FS2**. *Household number:* ___ ___
FS3. *Child's name and line number:* NAME _____ ___ ___	**FS4**. *Mother's / Caretaker's name and line number:* NAME _____ ___ ___
FS5. *Interviewer's name and number:* NAME _____ ___ ___	**FS6**. *Supervisor's name and number:* NAME _____ ___ ___

FS7. *Day / Month / Year of interview:* ___ ___ /___ ___ / 2 0 2 3	**FS8**. *Record the time:*	HOURS : MINUTES __ __ : __ __

Check respondent's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE:

If age 15-17, verify that adult consent for interview is obtained (HH33 or HH39) or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in FS17. The respondent must be at least 15 years old. In the very few cases where a child age 15-17 has no mother or caretaker identified in the household (HL20=90), the respondent will be the child him/herself.

FS9. *Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?*	YES, INTERVIEWED ALREADY 1 NO, FIRST INTERVIEW............... 2	1⇨FS10B 2⇨FS10A

FS10A. Hello, my name is (*your name*). We are from Planning and Statistical Authority. We are conducting a survey about the situation of children, families and households. I would like to talk to you about (*child's name from FS3*)'s health and well-being. This interview will take about **15** minutes. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	**FS10B**. Now I would like to talk to you about (*child's name from FS3*)'s health and well-being in more detail. This interview will take about **15** minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?
YES .... 1 NO / NOT ASKED.. 2	1⇨*CHILD'S BACKGROUND Module* 2⇨FS17

FS17. *Result of interview for child age 5-17 years*
 	
 Codes refer to the respondent.
 	
 Discuss any result not completed with Supervisor.
	COMPLETED 01
	 NOT AT HOME..02
	 REFUSED 03
	 PARTLY COMPLETED 04
	 INCAPACITATED
	   (specify) _____ 05
	 NO ADULT CONSENT FOR MOTHER/
	   CARETAKER AGE 15-17..06
	
	 OTHER (specify)_____ 96

CHILD'S BACKGROUND		CB
CB1. *Check the respondent's line number (FS4) in 5-17 CHILD INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the HOUSEHOLD QUESTIONNAIRE?*	YES, RESPONDENT IS THE SAME, FS4=HH47 ....1 NO, RESPONDENT IS NOT THE SAME, FS4≠HH47 2	1⇨CB8

CB2. In what month and year was (*name*) born?
 	
Month and year <u>must</u> be recorded.
	DATE OF BIRTH
	  MONTH.. __ __
	
	  YEAR...................................... 2 0 __ __	

CB3. How old is (*name*)? *Probe*: How old was (*name*) at (his/her) last birthday? *Record age in completed years.* *If responses to CB2 and CB3 are inconsistent, probe further and correct.*	AGE (IN COMPLETED YEARS) .... __ __	
CB4. Has (*name*) ever attended school or any early childhood education programme?	YES..1 NO...2	2⇨CB11
CB5. What is the highest level and grade or year of school (*name*) has ever attended?	EARLY CHILDHOOD EDUCATION .... 000 PRIMARY ....**1** __ __ PREPARATORY................................**2** __ __ SECONDARY ....**3** __ __ UNIVERSITY/HIGHER ....**4** __ __	000⇨CB7
CB6. Did (he/she) ever complete that (grade/year)?	YES..1 NO...2	
CB7. At any time during the current school year 2022/2023 did (*name*) attend school or any early childhood education programme?	YES..1 NO...2	2⇨CB9
CB8. During this current school year 2022/2023, which level and grade or year is (*name*) <u>attending</u>?	EARLY CHILDHOOD EDUCATION .... 000 PRIMARY ....**1** __ __ PREPARATORY................................**2** __ __ SECONDARY ....**3** __ __ UNIVERSITY/HIGHER ....**4** __ __	
CB9. At any time during the previous school year 2021/2022 did (name) attend school or any early childhood education programme?	YES..1 NO...2	2⇨CB11
CB10. During that previous school year 2021/2022, which level and grade or year did (*name*) <u>attend</u>?	EARLY CHILDHOOD EDUCATION .... 000 PRIMARY ....**1** __ __ PREPARATORY................................**2** __ __ SECONDARY ....**3** __ __ UNIVERSITY/HIGHER ....**4** __ __	
CB11. Is (*name*) covered by any health insurance?	YES..1 NO...2	2⇨End

CHILD DISCIPLINE		FCD
FCD1. *Check CB3: Child's age?*	AGE 5-14 YEARS....................................... 1 AGE 15-17 YEARS..................................... 2	2⇨*End*

FCD2. Now I'd like to talk to you about something else.
 Adults use certain ways to teach children the right behaviour or to address a behaviour problem. I will read various methods that are used. Please tell me if <u>you or any other adult in your household</u> has used this method with *(name)* <u>in the past month</u>.
 	
                                      YES NO
 	
 [A] Took away privileges, forbade something *(name)* liked or did not allow (him/her) to leave the house.
 	
 [B] Explained why *(name)*'s behaviour was wrong.
 	
 [C] Shook (him/her).
 	
 [D] Shouted, yelled at or screamed at (him/her).
 	
 [E] Gave (him/her) something else to do.
 	
 [F] Spanked, hit or slapped (him/her) on the bottom with bare hand.
 	
 [G] Hit (him/her) on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object.
 	
 [H] Called (him/her) dumb, lazy or another name like that.
 	
 [I] Hit or slapped (him/her) on the face, head or ears.
 	
 [J] Hit or slapped (him/her) on the hand, arm, or leg.
 	
 [K] Beat (him/her) up, that is hit him/her over and over as hard as one could.
	YES NO
	
	 TOOK AWAY PRIVILEGES 1 2
	
	 EXPLAINED WRONG
	   BEHAVIOR.. 1 2
	
	 SHOOK HIM/HER 1 2
	
	 SHOUTED, YELLED,
	   SCREAMED 1 2
	
	 GAVE SOMETHING ELSE
	   TO DO 1 2
	
	 SPANKED, HIT, SLAPPED ON
	   BOTTOM WITH BARE HAND 1 2
	
	 HIT WITH BELT, HAIRBRUSH,
	   STICK OR OTHER HARD
	   OBJECT 1 2
	
	 CALLED DUMB, LAZY OR
	   ANOTHER NAME 1 2
	
	 HIT / SLAPPED ON FACE,
	   HEAD OR EARS 1 2
	
	 HIT / SLAPPED ON HAND,
	   ARM OR LEG 1 2
	
	 BEAT UP, HIT OVER AND OVER
	   AS HARD AS ONE COULD 1 2	

FCD3. *Check FS4: Is this respondent the mother or caretaker of any other children under age 5?*	YES.. 1 NO... 2	2⇨*FCD5*
FCD4. *Check FS4: Has this respondent already responded to the following question (UCD5) for another child?*	YES.. 1 NO... 2	1⇨*End*
FCD5. Do you believe that in order to bring up, raise, or educate a child properly, the child needs to be physically punished?	YES.. 1 NO .... 2 DK / NO OPINION 8	

CHILD FUNCTIONING		FCF
FCF1. I would like to ask you some questions about difficulties (*name*) may have. Does (*name*) wear glasses or contact lenses?	YES .... 1 NO 2	
FCF2. Does (*name*) use a hearing aid?	YES .... 1 NO 2	
FCF3. Does (*name*) use any equipment or receive assistance for walking?	YES .... 1 NO.. 2	
FCF4. In the following questions, I will ask you to answer by selecting one of four possible answers. For each question, would you say that (*name*) has: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that (he/she) cannot at all. *Repeat the categories during the individual questions whenever the respondent does not use an answer category:* Remember the four possible answers: Would you say that (*name*) has: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that (he/she) cannot at all?		
FCF5. *Check FCF1: Child wears glasses or contact lenses?*	YES, FCF1=1 .... 1 NO, FCF1=2... 2	1⇨*FCF6A* 2⇨*FCF6B*
FCF6A. When wearing (his/her) glasses or contact lenses, does (*name*) have difficulty seeing? **FCF6B**. Does (*name*) have difficulty seeing?	NO DIFFICULTY .... 1 SOME DIFFICULTY... 2 A LOT OF DIFFICULTY .... 3 CANNOT SEE AT ALL 4	
FCF7. *Check FCF2: Child uses a hearing aid?*	YES, FCF2=1 .... 1 NO, FCF2=2... 2	1⇨*FCF8A* 2⇨*FCF8B*
FCF8A. When using (his/her) hearing aid(s), does (*name*) have difficulty hearing sounds like peoples' voices or music? **FCF8B**. Does (*name*) have difficulty hearing sounds like peoples' voices or music?	NO DIFFICULTY .... 1 SOME DIFFICULTY... 2 A LOT OF DIFFICULTY .... 3 CANNOT HEAR AT ALL 4	
FCF9. *Check FCF3: Child uses equipment or receives assistance for walking?*	YES, FCF3=1 .... 1 NO, FCF3=2... 2	2⇨*FCF14*

FCF10. Without (his/her) equipment or assistance, does (*name*) have difficulty walking 100 meters on level ground? *Probe:* That would be about the length of 1 football field. *Note that category 'No difficulty' is not available, as the child uses equipment or receives assistance for walking.*	SOME DIFFICULTY..2 A LOT OF DIFFICULTY ....3 CANNOT WALK 100 METERS AT ALL.........4	3⇨*FCF12* 4⇨*FCF12*
FCF12. With (his/her) equipment or assistance, does (*name*) have difficulty walking 100 meters on level ground? *Probe:* That would be about the length of 1 football field.	NO DIFFICULTY ....1 SOME DIFFICULTY..2 A LOT OF DIFFICULTY ....3 CANNOT WALK 100 METERS AT ALL.........4	3⇨*FCF16* 4⇨*FCF16*
FCF14. Compared with children of the same age, does (*name*) have difficulty walking 100 meters on level ground? *Probe:* That would be about the length of 1 football field.	NO DIFFICULTY ....1 SOME DIFFICULTY..2 A LOT OF DIFFICULTY ....3 CANNOT WALK 100 METERS AT ALL.........4	3⇨*FCF16* 4⇨*FCF16*
FCF16. Does (*name*) have difficulty with self-care such as feeding or dressing (himself/herself)?	NO DIFFICULTY ....1 SOME DIFFICULTY..2 A LOT OF DIFFICULTY ....3 CANNOT CARE FOR SELF AT ALL...............4	
FCF17. When (*name*) speaks, does (he/she) have difficulty being understood by people inside of this household?	NO DIFFICULTY ....1 SOME DIFFICULTY..2 A LOT OF DIFFICULTY ....3 CANNOT BE UNDERSTOOD AT ALL 4	
FCF18. When (*name*) speaks, does (he/she) have difficulty being understood by people outside of this household?	NO DIFFICULTY ....1 SOME DIFFICULTY..2 A LOT OF DIFFICULTY ....3 CANNOT BE UNDERSTOOD AT ALL 4	
FCF19. Compared with children of the same age, does (*name*) have difficulty learning things?	NO DIFFICULTY ....1 SOME DIFFICULTY..2 A LOT OF DIFFICULTY ....3 CANNOT LEARN THINGS AT ALL 4	
FCF20. Compared with children of the same age, does (*name*) have difficulty remembering things?	NO DIFFICULTY ....1 SOME DIFFICULTY..2 A LOT OF DIFFICULTY ....3 CANNOT REMEMBER THINGS AT ALL 4	

FCF21. Does (*name*) have difficulty concentrating on an activity that (he/she) enjoys doing?	NO DIFFICULTY .... 1 SOME DIFFICULTY.. 2 A LOT OF DIFFICULTY .... 3 CANNOT CONCENTRATE AT ALL 4	
FCF23. Compared with children of the same age, does (*name*) have difficulty controlling (his/her) behaviour?	NO DIFFICULTY .... 1 SOME DIFFICULTY.. 2 A LOT OF DIFFICULTY .... 3 CANNOT CONTROL BEHAVIOUR AT ALL . 4	
FCF24. Does (*name*) have difficulty making friends?	NO DIFFICULTY .... 1 SOME DIFFICULTY.. 2 A LOT OF DIFFICULTY .... 3 CANNOT MAKE FRIENDS AT ALL 4	
FCF25. The next questions have different options for answers. I am going to read these to you after each question. I would like to know how often (*name*) seems very anxious, nervous or worried. Would you say: daily, weekly, monthly, a few times a year or never?	DAILY .... 1 WEEKLY .... 2 MONTHLY .... 3 A FEW TIMES A YEAR .... 4 NEVER... 5	

FOUNDATIONAL LEARNING SKILLS		FL
FL0. *Check CB3: Child's age?*	AGE 5-6 YEARS .... 1 AGE 7-14 YEARS .... 2 AGE 15-17 YEARS 3	1⇨*End* 3⇨*End*
FL6. We will now be asking some questions about the habit of reading and language used at school and at home. First we are going to talk about reading. [A] Does *(name)* read books at home? [B] Does someone read to *(name)* at home?	YES NO READS BOOKS AT HOME ....1 2 READ TO AT HOME 1 2	
FL7. Which language does *(name)* speak most of the time at home? *Probe if necessary and read the listed languages.*	ARABIC...11 ENGLISH..12 FRENCH ....21 SPANISH ....22 HINDI/BENGALI ....23 OTHER (*specify*)_____96 DK 98	
FL8. *Check CB7: In the current school year, did the child attend school or any early childhood education programme?* *Check ED9 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for child if CB7 was not asked.*	YES, CB7/ED9=1 ....1 NO, CB7/ED9=2 OR BLANK........................2	1⇨*FL9A*
FL8A. *Check CB4: Did the child ever attend school or any early childhood education programmes?* *Check ED4 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for child if CB4 was not asked.*	YES, CB4/ED4=1 ....1 NO, CB4/ED4=2 OR BLANK........................2	1⇨*FL9B* 2⇨*End*
FL9A. What language do *(name)* teachers use most of the time when teaching *(name)* in class? **FL9B**. When *(name)* was in school, what language did *(name)'s* teachers use most of the time when teaching *(name)* in class? *Probe if necessary and read the listed languages.*	ARABIC...11 ENGLISH..12 FRENCH ....21 SPANISH ....22 HINDI/BENGALI ....23 OTHER (*specify*)_____96 DK 98	

FS11. *Record the time*.	HOURS AND MINUTES................. __ __ : __ __	
FS12. *Language of the Questionnaire*.	ARABIC .... 1 ENGLISH 2	
FS13. *Language of the Interview*.	ARABIC .... 1 ENGLISH .... 2 OTHER LANGUAGE (*specify*)_____ 6	
FS14. *Native language of the Respondent*.	ARABIC .... 1 ENGLISH .... 2 OTHER LANGUAGE (*specify*)_____ 6	
FS15. *Was a translator used for any parts of this questionnaire?*	YES, THE ENTIRE QUESTIONNAIRE .... 1 YES, PARTS OF THE QUESTIONNAIRE........ 2 NO, NOT USED 3	

FS16. *Thank the respondent for her/his cooperation.*

Proceed to complete the result in FS17 in the 5-17 CHILD INFORMATION PANEL and then go to the HOUSEHOLD QUESTIONNAIRE and complete HH56.

Make arrangements for the administration of the remaining questionnaire(s) in this household.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS