

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: _____ / _____ / 202_		HH7. Region: REPUBLIC OF KARAKALPAKSTAN 01 ANDIJAN REGION 02 BUKHARA REGION 03 JIZZAKH REGION 04 KASHKADARYA REGION 05 NAVOI REGION 06 NAMANGAN REGION 07 SAMARKAND REGION 08 SURKHANDARYA REGION 09 SYRDARYA REGION 10 TASHKENT REGION 11 FERGANA REGION 12 KHOREZM REGION 13 TASHKENT CITY 14
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 _____ : _____
<p>HH12. Hello, my name is (<i>your name</i>). We are from the State Committee of the Republic of Uzbekistan on Statistics. 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 30 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. If you have any questions about the survey, we will provide contact of person from the State Committee on Statistics of the Republic of Uzbekistan, who is in charge of this survey. May I start now?</p>		
YES 1		1 ⇒ LIST OF HOUSEHOLD MEMBERS
NO / NOT ASKED 2		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	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 any others who may not be family (such as servants, friends) but who usually live in the household. Then, ask questions HL5-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box:

HL1. Line number	HL2. First, please tell me the name of each person who usually lives here, starting with the head of the household. Probe for additional household members.	HL3. What is the relationship of (name) to (name of the head of household)?	HL4. Is (name) male or female? 1 MALE 2 FEMALE	HL5. What is (name)'s date of birth? 98 DK 9998 DK		HL6. How old is (name)? Record in completed years. If age is 95 or above, record '95'.	HL8. Record line number if woman and age 15-49.	HL10. Record line number if age 0-4.	HL11. Age 0-17? 1 YES 2 NO ☹ Next Line	HL12. Is (name)'s natural mother alive? 1 YES 2 NO ☹ 8 DK ☹ HL16	HL13. Does (name)'s natural mother live in this household? 1 YES 2 NO ☹ HL15	HL14. Record the line number of mother and go to HL16.	HL15. Where does (name)'s natural mother live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME REGION 3 IN ANOTHER HOUSEHOLD IN ANOTHER REGION 4 INSTITUTION IN THIS COUNTRY 8 DK	HL16. Is (name)'s natural father alive? 1 YES 2 NO ☹ 8 DK ☹ HL20	HL17. Does (name)'s natural father live in this household? 1 YES 2 NO ☹ HL19	HL18. Record the line number of father and go to HL20.	HL19. Where does (name)'s natural father live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME REGION 3 IN ANOTHER HOUSEHOLD IN ANOTHER REGION 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	05 GRANDCHILD	09 BROTHER-IN-LAW / SISTER-IN-LAW
02 SPOUSE / PARTNER	06 PARENT	10 UNCLE/AUNT
03 SON / DAUGHTER	07 PARENT-IN-LAW	11 NIECE / NEPHEW
04 SON-IN-LAW / DAUGHTER-IN-LAW	08 BROTHER / SISTER	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 any Pre-school Education programme? 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 EDUCATION ☹ ED7 1 PRIMARY 2 SECONDARY 3 SECONDARY SPECIALIZED VOCATIONAL 4 HIGHER 8 DK				ED6. Did (<i>name</i>) ever <u>complete</u> that (grade/year)? 1 YES 2 NO 8 DK			ED7. Age 3-24? 1 YES 2 NO ☹ Next Line		ED8. Check ED4: Ever attended school or pre-school education programme? 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	8	___	1	2	8	1	2	1	2
02		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
03		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
04		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
05		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
06		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
07		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
08		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
09		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
10		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
11		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
12		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
13		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
14		___	1	2	1	2	0	1	2	3	4	8	___	1	2	8	1	2	1	2
15		___	1	2	1	2	0	1	2	3	4	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 2020/2021 school year did (<i>name</i>) attend school or any Pre-school Education programme? 1 YES 2 NO ☺ ED15	ED10. During this current 2020/2021 school year, which level and grade or year is (<i>name</i>) attending? LEVEL: 0 PRE-SCHOOL ☺ ED15 1 PRIMARY 2 SECONDARY 3 SECONDARY SPECIALIZED VOCATIONAL. 4 HIGHER 8 DK		GRADE/YEAR: 98 DK	ED11. Is (he/she) attending a public educational institution? If "Yes", record '1'. If "No", probe to code who controls and manages the school. 1 GOVT 2 RELIGIOUS 3 PRIVATE 6 OTHER 8 DK	ED12. In the current 2020/2021 school year, has (<i>name</i>) 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. B RELIGIOUS C PRIVATE. X OTHER Z DK	ED14. For the current 2020/2021 school year, has (<i>name</i>) 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 2019/2020 school year did (<i>name</i>) attend school or any Pre-school Education programme? 1 YES 2 NO ☺ 8 DK ☺ Next Line Next Line	ED16. During that previous 2019/2020 school year, which level and grade or year did (<i>name</i>) attend? LEVEL: 0 ECE ☺ Next Line 1 PRIMARY 2 SECONDARY 3 SECONDARY SPECIALIZED VOCATIONAL 4 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 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 8	_____	
02		_____	1 2	0 1 2 3 4 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 8	_____	
03		_____	1 2	0 1 2 3 4 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 8	_____	
04		_____	1 2	0 1 2 3 4 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 8	_____	
05		_____	1 2	0 1 2 3 4 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 8	_____	
06		_____	1 2	0 1 2 3 4 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 8	_____	
07		_____	1 2	0 1 2 3 4 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 8	_____	
08		_____	1 2	0 1 2 3 4 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 8	_____	
09		_____	1 2	0 1 2 3 4 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 8	_____	
10		_____	1 2	0 1 2 3 4 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 8	_____	
11		_____	1 2	0 1 2 3 4 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 8	_____	
12		_____	1 2	0 1 2 3 4 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 8	_____	
13		_____	1 2	0 1 2 3 4 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 8	_____	
14		_____	1 2	0 1 2 3 4 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 8	_____	
15		_____	1 2	0 1 2 3 4 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 8	_____	

HOUSEHOLD CHARACTERISTICS

HC

<p>HC1B. What is the mother tongue/native language of (<i>name of the head of the household from HL2</i>)?</p>	<p>UZBEK.....01 RUSSIAN.....02 KARAKALPAK.....03 TAJIK.....04 KYRGYZ.....05 KAZAKH.....06 TURKMEN.....07</p> <p>OTHER LANGUAGE (<i>specify</i>) _____ 96</p>	
<p>HC3. How many rooms do members of this household usually use for sleeping?</p>	<p>NUMBER OF ROOMS..... __ __</p>	
<p>HC4. Main material of the dwelling floor.</p> <p><i>Record observation.</i></p> <p><i>If observation is not possible, ask the respondent to determine the material of the dwelling floor.</i></p>	<p>NATURAL FLOOR EARTH / SAND..... 11</p> <p>RUDIMENTARY FLOOR WOOD PLANKS..... 21</p> <p>FINISHED FLOOR PARQUET OR POLISHED WOOD..... 31 VINYL/LINOLEUM OR ASPHALT STRIPS..... 32 CERAMIC TILES..... 33 CEMENT/CONCRETE..... 34 CARPET..... 35</p> <p>OTHER (<i>specify</i>) _____ 96</p>	
<p>HC5. Main material of the roof.</p> <p><i>Record observation.</i></p>	<p>NATURAL ROOFING THATCH..... 12 PROCESSED CLAY WITH SAMAN..... 14</p> <p>RUDIMENTARY ROOFING WOOD PLANKS..... 23 SOFT ROOF/RUBEROID..... 25</p> <p>FINISHED ROOFING METAL / METAL TILE..... 31 WOOD..... 32 CERAMIC TILES..... 34 CEMENT/CONCRETE..... 35 SLATE/CEMENTONDULIN..... 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>NATURAL WALLS DIRT 13</p> <p>RUDIMENTARY WALLS STONE WITH MUD 22 UNCOVERED ADOBE (GUWALA) 23 PLYWOOD 24 REUSED WOOD 26</p> <p>FINISHED WALLS CEMENT 31 STONE WITH LIME / CEMENT 32 CEMENT BLOCKS 34 WOOD PLANKS / SHINGLES 36 WOODEN CARCASS WITH CLAY / “SINCH” 37 UNBURNT BRICK 38 BURNT BRICK 39 PROCESSED CLAY WITH SAMAN (HAY) / “PAHSA” 40 FOAM BLOCK 41 PLASTER / ALABASTER 42 TRAVERTINE 43 MARBLE TILE 44</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 cupboard?</p> <p>[D] Khontakhta?</p> <p>[E] Dining-room table?</p> <p>[F] Wardrobe for clothes?</p> <p>[G] Bed?</p> <p>[H] Sofa?</p> <p>[I] A mechanical 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>CUPBOARD</td> <td>1</td> <td>2</td> </tr> <tr> <td>KHONTAKHTA</td> <td>1</td> <td>2</td> </tr> <tr> <td>DINING-ROOM TABLE</td> <td>1</td> <td>2</td> </tr> <tr> <td>WARDROBE FOR CLOTHES.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>BED.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>SOFA.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>A MECHANICAL SEWING MACHINE.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	FIXED TELEPHONE LINE	1	2	RADIO	1	2	CUPBOARD	1	2	KHONTAKHTA	1	2	DINING-ROOM TABLE	1	2	WARDROBE FOR CLOTHES.....	1	2	BED.....	1	2	SOFA.....	1	2	A MECHANICAL SEWING MACHINE.....	1	2	
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<p>HC8. Does your household have electricity?</p>	<p>YES, INTERCONNECTED GRID 1 YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM) 2 NO 3</p>	<p>3 ⇒ HC10</p>																														

HC9. Does your household have:	YES	NO	
[A] A television?	TELEVISION.....	1 2	
[B] A refrigerator?	REFRIGERATOR.....	1 2	
[C] A fan?	FAN.....	1 2	
[D] A washing machine?	WASHING MACHINE	1 2	
[E] A microwave oven?	MICROWAVE OVEN.....	1 2	
[F] An air conditioner?	AIR CONDITIONER.....	1 2	
[G] A vacuum cleaner?	VACUUM CLEANER.....	1 2	
[H] A DVD player?	DVD PLAYER.....	1 2	
[I] An electric sewing machine?	ELECTRIC SEWING MACHINE	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 (arabah)?	ANIMAL-DRAWN CART	1 2	
[E] A car?	CAR	1 2	
[F] A boat with a motor?	BOAT WITH MOTOR	1 2	
[G] A truck or a van?	TRUCK / VAN.....	1 2	
[I] A tractor?	TRACTOR	1 2	
HC11. Does any member of your household have a computer or a tablet?	YES	1	
	NO	2	
HC12. Does any member of your household have a mobile telephone?	YES	1	
	NO	2	
HC13. Does your household have access to internet at home?	YES	1	
	NO	2	
HC14. Do you or someone living in this household own this dwelling?	OWN	1	
	RENT.....	2	
<i>If 'No', then ask: Do you rent this dwelling from someone not living in this household?</i>	OTHER (<i>specify</i>).....	6	
<i>If 'Rented from someone else', record '2'. For other responses, record '6' and specify.</i>			
HC15. Does any member of this household own any land that can be used for agriculture?	YES	1	
	NO	2	2⇒HC17

<p>HC16. How many hectares of agricultural land do members of this household own?</p> <p><i>If 1 hectare or more, circle '1' and record hectares. If 95 or more hectares, circle '1' and record '95'.</i></p> <p><i>If less than 1 hectare, probe: How many sotkas? circle '2' and record in sotkas. If less than 1 sotka, circle '2' and record "00'.</i></p> <p><i>If unknown, circle '998'.</i></p>	<p>HECTARES 1 ____</p> <p>SOTKAS 2 ____</p> <p>DK 998</p>	
<p>HC17. Does this household own any livestock, herds, other farm animals, or poultry?</p>	<p>YES 1</p> <p>NO 2</p>	<p>2 ⇒ HC19</p>
<p>HC18. How many of the following animals does this household have?</p> <p>[A] Milk cows or bulls?</p> <p>[H] Camels?</p> <p>[C] Horses, donkeys or mules?</p> <p>[D] Goats?</p> <p>[E] Sheep?</p> <p>[I] Chicken?</p> <p>[J] Rabbits?</p> <p>[G] Pigs</p> <p>[K] Beehives</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>CAMELS ____</p> <p>HORSES, DONKEYS OR MULES ____</p> <p>GOATS ____</p> <p>SHEEP ____</p> <p>CHICKEN ____</p> <p>RABBITS ____</p> <p>PIGS ____</p> <p>BEEHIVES ____</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] SOCIAL BENEFITS OR MATERIAL ASSISTANCE TO LOW INCOME FAMILIES	[B] ONE TIME CHILDBIRTH ALLOWANCE (CONGRATULATO RY MONEY)	[C] ALLOWANCE FOR CHILDREN WITH DISABILITY UNDER 16 YEARS OLD	[D] DISABILITY ALLOWANCE	[E] ALLOWANCES FOR WORKING MOTHERS FOR CHILD CARE UNDER THE AGE OF AGE OF TWO YEARS	[F] ANY TYPE OF PENSIONS	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME
ST2. Are you aware of <i>(name of programme)?</i>	YES1 ☺ ST3 NO2 ☺ [B]	YES1 ☺ ST3 NO2 ☺ [C]	YES1 ☺ ST3 NO2 ☺ [D]	YES1 ☺ ST3 NO2 ☺ [E]	YES1 ☺ ST3 NO2 ☺ [F]	YES1 ☺ ST3 NO2 ☺ [X]	YES <i>(specify)</i> _____ 1 ☺ ST3 NO2 ☺ End
ST3. Has your household or anyone in your household received assistance through <i>(name of programme)?</i>	YES1 ☺ ST4 NO2 ☺ [B] DK8 ☺ [B]	YES1 ☺ ST4 NO2 ☺ [C] DK8 ☺ [C]	YES1 ☺ ST4 NO2 ☺ [D] DK8 ☺ [D]	YES1 ☺ ST4 NO2 ☺ [E] DK8 ☺ [E]	YES1 ☺ ST4 NO2 ☺ [F] DK8 ☺ [F]	YES1 ☺ ST4 NO2 ☺ [X] DK8 ☺ [X]	YES1 ☺ ST4 NO2 ☺ End DK8 ☺ End
ST4. When was the <u>last</u> <u>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 AGO1 ___ ☺ [B] YEARS AGO2 ___ ☺ [B] DK998 ☺ [B]	MONTHS AGO1 ___ ☺ [C] YEARS AGO2 ___ ☺ [C] DK998 ☺ [C]	MONTHS AGO1 ___ ☺ [D] YEARS AGO2 ___ ☺ [D] DK998 ☺ [D]	MONTHS AGO1 ___ ☺ [E] YEARS AGO2 ___ ☺ [E] DK998 ☺ [E]	MONTHS AGO1 ___ ☺ [F] YEARS AGO2 ___ ☺ [F] DK998 ☺ [F]	MONTHS AGO1 ___ ☺ [X] YEARS AGO2 ___ ☺ [X] DK998 ☺ [X]	MONTHS AGO1 ___ ☺ End YEARS AGO2 ___ ☺ End DK998 ☺ End

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

<p>EU6. What does your household <u>mainly</u> use for <u>space heating</u> when needed?</p>	<p>CENTRAL HEATING 01</p> <p>MANUFACTURED SPACE HEATER 02</p> <p>TRADITIONAL SPACE HEATER 03</p> <p>MANUFACTURED COOKSTOVE 04</p> <p>TRADITIONAL COOKSTOVE 05</p> <p>THREE STONE STOVE / OPEN FIRE..... 06</p> <p>OTHER (<i>specify</i>) 96</p> <p>NO SPACE HEATING IN HOUSEHOLD 97</p>	<p>01 ⇒EU8</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>	

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 /

ARTESIAN WELL	21	21 ⇨WS3
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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
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TANKER-TRUCK.....	61	61 ⇨WS4
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CART WITH SMALL TANK	71	71 ⇨WS4
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SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)	81	81 ⇨WS3
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PACKAGED WATER

BOTTLED WATER	91	
---------------------	----	--

SACHET WATER	92	
--------------------	----	--

OTHER (<i>specify</i>).....	96	96 ⇨WS3
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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 /

ARTESIAN WELL	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	
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WS3. Where is that water source located?	IN OWN DWELLING1 IN OWN YARD / PLOT2 ELSEWHERE3	1 ⇨WS7 2 ⇨WS7
WS4. How long does it take for members of your household to go there, get water, and come back?	MEMBERS DO NOT COLLECT000 NUMBER OF MINUTES__ __ __ DK998	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.....__ __ DK98	
WS7. In the last month, has there been any time when your household did not have sufficient quantities of drinking water?	YES, AT LEAST ONCE.....1 NO, ALWAYS SUFFICIENT2 DK8	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 SOURCE1 WATER TOO EXPENSIVE.....2 SOURCE NOT ACCESSIBLE.....3 OTHER (<i>specify</i>)6 DK8	
WS9. Do you or any other member of this household do anything to the water to make it safer to drink?	YES1 NO.....2 DK8	2 ⇨WS10A1 8 ⇨WS10A1
WS10. What do you usually do to make the water safer to drink? <i>Probe:</i> Anything else? <i>Record all methods mentioned.</i>	BOILA ADD BLEACH / CHLORINEB STRAIN IT THROUGH A CLOTH.....C USE WATER FILTER (CERAMIC, SAND, COMPOSITE, ETC.)D SOLAR DISINFECTIONE LET IT STAND AND SETTLEF OTHER (<i>specify</i>)X DKZ	

<p>WS10A1. Where do you or other members of your household most often wash your hands?</p>	<p>FIXED FACILITY (SINK / TAP) IN DWELLING.....1 IN YARD / PLOT2</p> <p>MOBILE OBJECT (BUCKET / JUG / KETTLE).....3</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT4</p> <p>OTHER (<i>specify</i>).....6</p>	
<p>WS10A2. Do you have any soap or detergent in your house for washing hands?</p> <p><i>If “Yes”, probe: Do you have soap or detergent, or both?</i></p>	<p>YES, BAR OR LIQUID SOAP1 DETERGENT (POWDER/LIQUID/PASTE)2 SOAP AND DETERGENT.....3</p> <p>NO.....4</p>	
<p>WS11. What kind of toilet facility do members of your household usually use?</p> <p><i>If ‘Flush’ or ‘Pour flush’, probe: Where does it flush to?</i></p> <p><i>If not possible to determine, ask permission to observe the facility.</i></p>	<p>FLUSH / POUR FLUSH FLUSH TO PIPED SEWER SYSTEM.....11 FLUSH TO SEPTIC TANK.....12 FLUSH TO PIT LATRINE13 FLUSH TO OPEN DRAIN14 FLUSH TO DK WHERE18</p> <p>PIT LATRINE VENTILATED IMPROVED PIT LATRINE.....21 PIT LATRINE WITH SLAB22 PIT LATRINE WITHOUT SLAB / OPEN PIT23</p> <p>COMPOSTING TOILET (BIOTOILET)31</p> <p>BUCKET.....41 HANGING TOILET / HANGING LATRINE51</p> <p>NO FACILITY / BUSH / FIELD.....95</p> <p>OTHER (<i>specify</i>).....96</p>	<p>11 ⇒WS14 14 ⇒WS14 18 ⇒WS14 41 ⇒WS14 51 ⇒WS14 95 ⇒End 96 ⇒WS14</p>
<p>WS12. Has your (<i>answer from WS11</i>) ever been emptied?</p>	<p>YES, EMPTIED.....1</p> <p>NO, NEVER EMPTIED4</p> <p>DK.....8</p>	<p>4 ⇒WS14 8 ⇒WS14</p>

<p>WS13. The last time it was emptied, where were the contents emptied to?</p> <p><i>Probe:</i> Was it removed by a service provider?</p>	<p>REMOVED BY SERVICE PROVIDER TO A TREATMENT PLANT1 BURIED IN A COVERED PIT2 TO DON'T KNOW WHERE.....3</p> <p>EMPTIED BY HOUSEHOLD BURIED IN A COVERED PIT4 TO UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE5</p> <p>OTHER (<i>specify</i>).....6</p> <p>DK.....8</p>	
<p>WS14. Where is this toilet facility located?</p>	<p>IN OWN DWELLING1 IN OWN YARD / PLOT.....2 ELSEWHERE3</p>	
<p>WS15. Do you share this facility with others who are not members of your household?</p>	<p>YES1 NO.....2</p>	2 ⇒ End
<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 SHARED WITH GENERAL PUBLIC.....2</p>	2 ⇒ End
<p>WS17. How many households in total use this toilet facility, including your own household?</p>	<p>NUMBER OF HOUSEHOLDS (IF LESS THAN 10)<u>0</u> —</p> <p>TEN OR MORE HOUSEHOLDS10</p> <p>DK.....98</p>	

HH13. Record the time.	HOUR AND MINUTES ____ : ____	
HH14. Language of the Questionnaire.	UZBEK.....2 RUSSIAN.....3 KARAKALPAK.....4	
HH15. Language of the Interview.	UZBEK.....2 RUSSIAN.....3 KARAKALPAK.....4 OTHER LANGUAGE (specify) 6	
HH16. Native language of the Respondent.	UZBEK.....02 RUSSIAN.....03 KARAKALPAK.....04 TAJIK.....05 KYRGYC.....06 KAZAKH.....07 TURKMEN.....08 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 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

LINE NUMBER

NAME

AGE

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.

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

HH29. Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any women age 15-49?

YES, AT LEAST ONE WOMAN AGE 15-49.....1
NO2

2⇒HH40

HH30. Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.

HH31. Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any girls age 15-17?

YES, AT LEAST ONE GIRL AGE 15-171
NO2

2⇒HH40

HH32. Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one girl age 15-17?

YES, AT LEAST ONE GIRL AGE 15-17 WITH HL20≠901
NO, HL20=90 FOR ALL GIRLS AGE 15-17.....2

2⇒HH40

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 ⇒ HH44A
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 own a mobile phone?	YES, HC7[A]=1 OR HC12=1 1 NO, HC7[A]=2 AND HC12=2 2	2 ⇒ HH45
HH44B. Issue a separate CONTACT INFORMATION FORM and go to HH45.		

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,
- Proceed with the administration of the QUESTIONNAIRE ON CONTACT FORM or thank the respondent for his/her cooperation and continue with the administration of the remaining individual questionnaire(s) in this household.

If there is no individual questionnaire to be completed in this household move to the next household you have been assigned by your supervisor.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS