REDID_I

QUESTIONNAIRE FOR CHILDREN

7TH ROUND

[i.e., 11th round]

ID_I

SITEK	1. [NAME OF POPULATION CENTER]
REGION CENSUSDK	2. [NUMBER OF SURVEY SECTOR (FOR CITIES)]
FAMILYK	3. [NUMBER OF FAMILY]
PERSONK	4. [NUMBER ON THE CARD OF THE CHILD BEING DISCUSSED]
H4 IKRPINBF H4.1	4.1 [DID THE CHILD PARTICIPATE IN THE SURVEY:
	1994 1 1995 2 1996 3 1998 4 2000 5 2001 6 NEVER PARTICIPATED 7
IKGENDER H5	5. [SEX OF THE CHILD BEING DISCUSSED: **MALE
IKINTDAY IKINTMON	7. [DATE OF INTERVIEW: DAY $ \underline{ H7.1} $ MONTH $ \underline{ H7.2} $]
IKINTHRS IKINTMIN	8. [LENGTH OF INTERVIEW: H8A H8B MINUTES]
	9. [LAST NAME OF INTERVIEWER]
IKINTNUM	10. [NUMBER OF INTERVIEWER]
IKADANSW	11. [NUMBER OF THE ADULT WHO ANSWERED THE QUESTIONS $ {f H_11} $]

I,	[INTERVIEWER! WRITE YOUR FULL LAST NAME, FIRST NAME, PATRONYMIC!]						
	[INTERVIEWER! WRITE YOUR FULL LAST NAME, FIRST NAME, PATRONYMIC!]						
	HAVE READ TO THE CHILD'S PARENTS THE STANDARD TEXT REGARDING THE PURPOSE AND CONDITIONS OF THE STUDY AND HAVE RECEIVED THEIR CONSENT TO CONDUCT THE INTERVIEW.						
	Interviewer's signature						
	DATE						
	[INTERVIEWER! QUESTIONS HEREIN, EXCEPT 115-130 ON PAGE 21, SHOULD BE LY BY AN ADULT FAMILY MEMBER, IDEALLY THE PERSON WHO TOOK CARE OF THE AST 7 DAYS. CHILDREN MAY BE PRESENT DURING THE DISCUSSION WITH THE HE PARENTS.						
	QUESTIONS 115-130 ON PAGES 21-23 THE CHILD SHOULD ANSWER FOR HIMSELF.						
	[INTERVIEWER! WRITE THE NAME OF THE CHILD YOU ARE DISCUSSING.]						
A.	Tell me, please: On what day, in what month, and in what year was (he/she) born?						
	BORN_M J69,9C day month year						
	day month year IKBIRTHD IKBIRTHM IKBIRTHY						
	SECTION "MIGRATION"						
IKBORNDP 11. residence?	Tell me, please: Was (he/she) born in a different population center or in the one of current						
	IN A DIFFERENT POPULATION CENTER 1						
	IN THE ONE OF CURRENT RESIDENCE						
	DOESN'T KNOW						
	What language does (he/she) <u>primarily</u> speak at home? If (he/she) speaks several specify the <u>primary</u> one.						
	RUSSIAN						
	CHILD IS NOT YET TALKING996						
	DOESN'T KNOW 997 REFUSES TO ANSWER 998						
IKPARSPK <mark>16</mark> .	What language is primarily spoken by the parents in (his/her) home?						
	RUSSIAN 1						
	DOESN'T KNOW						
	REFUSES TO ANSWER998						

SECTION "CARE OF CHILDREN"

 $[\ \underline{\textbf{INTERVIEWER!}}\ \ \textbf{TURN}\ \ \underline{\textbf{TO QUESTION A ON PAGE 1}}\ \ \textbf{AND VERIFY THE BIRTH DATE OF THE CHILD ABOUT WHOM YOU ARE SPEAKING.}$

IF THE CHILD WAS BORN IN 1996 OR EARLIER, ASK QUESTIONS BEGINNING WITH QUESTION 1.

		<u>EN 1997 AND 2000,</u> ASK <u>QUESTIONS</u>
BEGINNING	G WITH 8.A ON PAGE 5.	
	FOR THE REMAINING CHILDREN (BORN IN 2001 OR 2002), ASK QUESTION 9 ON
<u>PAGE 6.</u>]		
IKGRADE1	K1. Now I would like to ask a few questions	about the education of [NAME OF CHILD].
	Tell me, please: Has (he/she) finished at	
	Yes	
	No	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
IKGRADES	2. How many grades of general school has	(he/she) completed?
J70.1	grades	
07011	DOESN'T KNOW	
	REFUSES TO ANSWER	98
IKINSCHL	3. Is (he/she) now attending general school	?
J70.2	Yes	1
070.2	No	2 \rightarrow [SKIP TO 8 ON PAGE 5]
		$7 \rightarrow [SKIP TO 8 ON PAGE 5]$
	REFUSES TO ANSWER	8 \rightarrow [SKIP TO 8 ON PAGE 5]
IKPAYSCH	K4. Has your family paid or should you have current quarter, not considering paymen	
	1 , ,	
	Yes	
	No DOESN'T KNOW	
	REFUSES TO ANSWER	
		on average per month for (his/her) instruction in
the current	quarter: rubles	
	rubles DOESN'T KNOW	
	REFUSES TO ANSWER	998
IKPAYBKS	K6. Did your family pay for textbooks that (ne/she) uses during this school year?
	Yes	1
		2 \rightarrow [SKIP TO 7.1 ON PAGE 3]
		$7 \rightarrow [\text{ SKIP TO 7.1 ON PAGE 3}]$
	REFUSES TO ANSWER	$8 \rightarrow [SKIP TO 7.1 ON PAGE 3]$
IKAMTBKS	K7. How much did your family pay for (his/h	ner) textbooks?
	DOFSN'T KNOW rubles	007

IKPECLAS	K7 1	Door	(ha/sha)	attand P	Feloceoe	at school?
INPECLAS	\mathbf{N}/\mathbf{I}	Does	the/she	attend P	r, ciasses	at school?

Yes	. 1	
No	. 2 —	SKIP TO 7.4
DOESN'T KNOW	. 7 —	SKIP TO 7.4
REFUSES TO ANSWER	. 8 —	SKIP TO 7.4 1

IKPEFREQ K7.2 How often does (he/she) engage in physical activities during school, in class?

1-3 times a month	1
1 time a week	2
2 times a week	3
3-4 times a week	4
Every day	5
DOESN'T KNOW	
REFUSES TO ANSWER	8

7.3 Now I will list various kinds of physical activities and ask you to tell me in which of them (he/she) participates <u>during class</u>, and if so for how many hours and minutes per week.

		(He/she) How many hours engages in and minutes during class: per week:		:S
1.	Karate, judo, self-defense, wrestling, boxing, gymnastics	Yes 1 \rightarrow K7.3.1B K7.3.1B K7.3.1K \rightarrow IKKARHRS	C 97 98	
2.	Active sports: badminton, tenni	is, IKKARATE IKKARMIN Yes $1 \rightarrow \frac{K7.3.2B}{hrs} \frac{K7.3.2}{m}$		
	nockey, or swimming	Yes $1 \rightarrow \frac{\text{nrs}}{\text{IKSPOHRS}}$ m No 2IKSPOHRS K7.3.2A IKSPORTS Yes $1 \rightarrow \frac{\text{IKSPOMIN}}{\text{IRSPOMIN}}$ mrs m	in 97 98	
]	K7.3.3A No2 <i>IKTRAHRS</i>		
4.	Other kinds of physical activity	IKTRACKF IKTRAMIN Yes1 K7.3.4 Rrs m K7.3.4A No2 IKPEOHRS	in 97 98	
		IKPEOTHR IKPEOMIN	/ K7.3.4C	

IKPHYSOC K7.4 Does (he/she) engage in physical activities and sports before or after classes? I have in mind training sessions with a coach as well as simply active games outdoors--soccer, tag, hopscotch, hide and seek, riding a bicycle, etc.

Yes	1	
No	2 →	[SKIP TO 7.7 ON PAGE 4]
DOESN'T KNOW	7 →	[SKIP TO 7.7 ON PAGE 4]
REFUSES TO ANSWER	8 →	[SKIP TO 7.7 ON PAGE 4]

IKOCFREQ K7.5 How often does (he/she) engage in physical activities and sports, including outdoor games, before or after classes?

1-3 times a month	1
1 time a week	2
2 times a week	3
3-4 times a week	4
Every day	5
DOESN'T KNOW	7
REFUSES TO ANSWER	8

 $7.6\,$ I will list various physical activities and ask you to tell me in which (he/she) engages <u>before</u> or after classes, and for how many hours and minutes per week.

	(He/she) How many engages in hours and before or minutes after classes? per week? D/K REFUSES
1. Karate, judo, self-defense,	1
wrestling, boxing, gymnastics	$Yes1 \xrightarrow{\mathbf{K7.6.1B}} hrs \frac{\mathbf{K7.6.1C}}{1} 97 98$
K7.6.1	No2 IKOCKHRS IKOCKARA IKOCKMIN
2. Active sports: badminton, tennis,	
soccer, basketball, volleyball,	K7.6.2B K7.6.2C
hockey, or swimming	
K7.6.2	No2 IKOCSHRS IKOCSPOR IKOCSMIN
3. Track and field, skiing, ice skating,	* IKOCSPOR
roller sketing	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
Toner skating	No2 IKOCTHRIC
K7.6.3	IKOCTRAC IKOCTMIN
4. Other kinds of physical activity, for	
	K7 6 4R K7 6 4C
a bicycle	Yes 1 \rightarrow K7.6.4B K7.6.4C min 97 98
K7.6.4	No2 IKOCOHRS
	IKOCOTHR IKOCOMIN
7.7 Tell me, please: Does (he/she) engage i many hours and minutes per day?	in the following <u>before or after classes</u> and if so how
	How many hours
	(He/she) and minutes
1 Watching talaxisian videos playing	engages in? per day? D/K REFUSES
1. Watching television, videos, playing	Yes1 K7.7.1B K7.7.1C 97 98
video of computer games	No2 IKWTVHRS
K7.	7.1A IKWATCTV IKWTVMIN
construction sets, chess, checkers	$ \underbrace{\mathbf{K7.7.3B}}_{\text{hrs}} \underbrace{\mathbf{K7.7.3C}}_{\text{min}} 97 \qquad 98 $
К7.	7.3A No2 IKPLGHRS IKPLGMIN
doing homework	K7.7.2B K7.7.2CYes1 → hrs min 97 98
K7.7.	No <i>IKREDHRS</i>
	IKREADNG IKREDMIN
IKHOW2S K7.8.1 How does (he/she) get to school?	
[INTERVIEWER! MARK ONLY O	ONE ANSWER.]
On foot	1
On a bicycle	
In a car or by public transportation	
On foot and by transport	
DOESN'T KNOW	7
REFUSES TO ANSWER	8
IK2SHR 7.8.2 How many total hours and minutes doe IK2SMN	es it take (him/her) to go to school and return?
K7.8.2A hours K7.8.2B r	minutes \rightarrow [SKIP TO 9 ON PAGE 6]
DOESN'T KNOW	
REFUSES TO ANSWER	

	0. ***				3. K
	8. W	hy doesn't (he/she) go to general		V N- D/	v peelicec
				res	XKEFUSES
IKTOOSML	K8.1.	(He/she) will go to school in a y	yoor or two	1 2 7	Q
IKTOOSML IKTOOILL		(He/she) has poor health and c			
IKEXPELL		(He/she) was expelled from sch			
IKEAT EEL IKHOMESC	K8.4	Family wants to give (him/her)			
IKNOSCHL	K8.5.	No schools are close to home			
IKSCOTHR	K8.6.				
mscomm	140.0.	other reasons		. 1	
	8 A N	ow I will list various kinds of ph	vsical activities and you	ı tell me which (he/	she) is engaged
		hours and minutes a week.	y sieur ueur reies una y oe	ten me vimen (ne/	one) is engaged
in unu ioi no	,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	nours and minutes a week		How many	
			(He/she)	hours and minutes	
			engages in it?		D/K REFUSES
	1.	Karate, judo, gymnastics,	0 0	•	
		tennis, swimming	Yes1 Kg	3.A.1 B _{rrs} K8.A _n 10	97 98
			No2	IKNSKHRS	
			K8.A.1 AIKNSKARA	IKNSKMIN	
	2.	Plays with a ball, goes skating,		770 A AD T70 A A	~
		rides a bicycle	Yes1 →	K8.A.2B K8.A.20	97 98
			No2	IKNSBHRS	
			K8.A.2AIKNSBALL	IKNSBMIN	
	3.	Dances, runs, jumps, plays			7
	-	hopscotch, hide and seek	Yes1 →	K8.A.3B K8.A.30	97 98
		F ,	No2	TKNSDHRS	
			K8.A.3AJKNSDANC	IKNSDMIN	
	4.	Plays sitting: on a bench, in a			~
		Plays sitting: on a bench, in a sandbox	Yes1 →	K8.A.4B K8.A.40	97 98
			No. 2	IKSSHRS	,, ,,
			K8.A.4 AKNSSITS	IKNSSMIN	
			1111100110	1111100111111	
IKNSPREGK	8.13 Is	(he/she) <u>regularly</u> engaged in ph	vsical activities and spo	rts in a children's r	reschool
		s club, or at home?	,		
,		,			
		Yes	1		
		No	2		
		DOESN'T KNOW	7		
		REFUSES TO ANSWER	8		
8	3.15 Te l	ll me, please: Does (he/she) enga	ge in the following and	if so for how many	hours and
minutes per d	lay?	, , ,		·	
				How many	
			(He/she)	hours and minutes	
			engages in it?	per day?	D/K REFUSES
	1.	Watching TV, videos, playing vi	deo	0 151D I/O 151/	~
		or computer games	1 🖴	8.151B K8.1510 min	97 98
			No2	<i>IKNSWHRS</i>	
			K8.151 No2 <i>KNSWATV</i>	<i>IKNSWMIN</i>	
	3.	Playing games with toy cars, do		0 152D K8 1530	\mathbf{C}
		Playing games with toy cars, do construction sets, chess, checker	rs1 🖴	hrs min	97 98
			K8.153A No2 <i>IKNSGAME</i>	<u>IKNSGHRS</u>	
			IKNSGAME	IKNSGMIN	
	2.	Reading, or listening to what	K	8 152R Kg 1524	7
		is read to (him/her)	Yes1 →	8.152B K8.1520 hrs min	97 98
			K8.152A No2	<u>IKNS</u> RHRS	
			IKNSREAD	<i>IKNSRMIN</i>	

IKNFCARE K	9. Tell me, please: <u>In the last 7 days</u> did anyone look after [<i>NAME OF CHILD</i>] who is not a member of your household: friends, workers at a children's institution, school teachers, or relatives who live separately?
	Yes
	No
	DOESN'T KNOW
	REFUSES TO ANSWER
IKRLCARE K	0. In the last 7 days was [NAME OF CHILD] looked after by relatives who live separately?
	Yes
	No
	DOESN'T KNOW
	REFUSES TO ANSWER $8 \rightarrow [\text{ SKIP TO } 13]$
IKDYCARE K separately?	1. On how many days of the last 7 was [NAME OF CHILD] looked after by relatives who live
	days
	DOESN'T KNOW
	REFUSES TO ANSWER
IKHRCARE IKMRCARE	2. On those days of the last 7 when relatives who live separately helped care for [NAME OF CHILD], how many hours and minutes a day on average did they help?
	K12A hours K12B minutes
	K12A hours K12B minutes DOESN'T KNOW
	REFUSES TO ANSWER
IKATTKIN K1 or something s	
	Yes1
	No
	$DOESN'T\ KNOW$
	REFUSES TO ANSWER $8 \rightarrow [SKIP TO 17 ON PAGE 7]$
	4. On how many days of the last 7 did [NAME OF CHILD] go to kindergarten, nursery, after or something similar?
	days
	DOESN'T KNOW
	REFUSES TO ANSWER 98
IKHRSKIN IKMINKIN was (he/she) th	5. On those days of the last 7 when [NAME OF CHILD] went to kindergarten, nursery, after-school group, or something similar, how many hours and minutes a day on average ere?
	K15A hours K15B minutes
	DOESN'T KNOW
	REFUSES TO ANSWER
	REI 00E0 TO 1110 II ER

IKOWNSCH K16	7. Who owns the preschool or school that [NAME OF CHILD] attends?	ŀ
ikownsch kro.		
	Government 1	
	Official department or enterprise	
	Private owner	
	Someone else	
	REFUSES TO ANSWER	
IVNDCADE V17	In the last 7 days have you been belied to core for [NAME OF CHII D] by records who as	•••
not your relatives?	In the last 7 days have you been helped to care for [$NAME\ OF\ CHILD$] by people who are?	е
	Yes1	
	No	
	$DOESN'T\ KNOW$	
	REFUSES TO ANSWER $8 \rightarrow [SKIP TO 20]$	
IKDNCARE K18. who are not your i	On how many days of the last 7 were you helped to care for [NAME OF CHILD] by peoprelatives?	le
·		
	days 	
	REFUSES TO ANSWER	
	REF OSES TO ANSWER 70	
	In these last 7 days, when people who are not your relatives helped to care for [NAME OF CHILD], how many hours and minutes a day on average did they do this? K19A hours K19B minutes	F
	K19A hours K19B minutes DOESN'T KNOW	
	REFUSES TO ANSWER	
CHILD] in the las	Tell me, please: Have you already paid or will you have to pay for the care of [NAME OF to 7 days by someone who is not a member of your household or for (his/her) stay at a ion? If you paid or will pay for these services not in money but with goods, gifts, etc., cou	
	You have already paid 1	
	You still have to pay2	
	You haven't paid and you're not	
	going to pay	
	$DOESN'T\ KNOW$	
	REFUSES TO ANSWER	
days of [NAME Of children's instituti	How much in total have you already paid or will you have to pay for the care in the last 7 F CHILD] by someone who is not a member of your household or for (his/her) stay at a ion? If you paid or will pay for these services not in money but with goods, gifts, etc., thit would be in rubles. If you pay for this service monthly, divide the monthly sum by for	
	rubles	
	rubles 	
	REFUSES TO ANSWER	

SECTION "MEDICAL SERVICES"

	Yes	$1 \rightarrow [SKIP TO 6]$
	No	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
IVI DDDIM I 5 1	Doubous in the last 20 days [NAME OF CHILD] d	lid not feel well for evenue had a
	Perhaps in the last 30 days [NAME OF CHILD] droat, or toothache, or had a cold or upset stomach.	
burn, injury, or so		
	Yes	1
	No	$2 \rightarrow [SKIP TO 20 ON PAGE 10]$
	DOESN'T KNOW	$7 \rightarrow [SKIP TO 20 ON PAGE 10]$
	REFUSES TO ANSWER	
IKHPRTYP 6. (char)	Tell me: What were these problems?	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
KTREABY L7.	What did you do to solve the health problems (health problems)	/she) had <u>in the last 30 days</u> ?
	Went to a medical institution or	
	health worker	1
	Did not go to a health worker, but treated	2
	by myself	
	DOESN'T KNOW	
	REFUSES TO ANSWER	$\delta \rightarrow [$ SKIP 10 20 ON PAGE 10 $]$
IKCALLDR L8.	Let's talk about (his/her) most recent meeting wit	
	Tell me, please: Last time did you call a health we	orker to see (him/her) at home or did
(he/she) go there t	for an appointment?	
	WENT TO AN APPOINTMENT	1
	CALLED TO THE HOUSE	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
KTYPMIN L9.	Tell me, please: Where did you go to see a doctor	last time?
	A polyclinic of the raion, city, state, village	1
	A commercial polyclinic	
	A hospital of the raion, city, state, village	
	A commercial hospital	
	A private physician	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
IKTDRHRS 10.	How much time did (he/she) spend traveling to th	is medical institution and back on the
IKTDRMIN	last occasion?	and the second s
	hoursminutes	
	DOESN'T KNOW	
	REFUSES TO ANSWER	998

IKTDRPAY L11. D	old (he/she) spend any money traveling to	this medical institution?	
	Yes	1	
	No		
	DOESN'T KNOW	$7 \rightarrow [SKIP TO 13]$	
	REFUSES TO ANSWER		
IKTDRAMT L12. H	low much did (he/she) spend last time tra	aveling to this medical institution	?
	rubles		
	Tubles Tubles Tubles	997	
	REFUSES TO ANSWER		
IKTDRWAI L13. D	oid (he/she) spend time on that occasion v	vaiting for (his/her) appointment	?
	Yes	1	
	No		
	DOESN'T KNOW		
	REFUSES TO ANSWER	$8 \rightarrow [SKIP TO 15]$	
	low much time did (he/she) spend last time	ne waiting for the appointment?	
IKTDRMNW	L14A hours L14B min	nutes	
	DOESN'T KNOW	997	
	REFUSES TO ANSWER	998	
IKPAIDDR L15. D	old you pay for the visit, with either mond	ey or gifts?	
	Yes	1	
	No	$2 \rightarrow [SKIP TO 17]$	
	DOESN'T KNOW		
	REFUSES TO ANSWER	$ \delta \rightarrow [SKIP TO 17]$	
16.1 V	Whom and how much did you pay for this	s visit?	
	J 1 J	Did How much	
1	. Paid officially in the enterprise's	you pay? in rubles?	D/K REFUSES
1	cashier's office	Yes $1 \rightarrow L161.1B$	9997 9998
	L1.6	1.1.ANo2 IKAMTPVC	, '
2	. Gave money or gifts directly to the medical personnel		9997 9998
	T.161.	$No \dots 2$ $\overline{IKAMTPVP}$	999/ 9990
	1.101.	IKPDVPSL	
IKADTEST L17. B procedures?	esides being seen by a medical worker, d	id (he/she) undergo any addition	al tests or
	Yes	1	
	No		
	DOESN'T KNOW	$7 \rightarrow \bar{[}$ SKIP TO 20 O	N PAGE 10]
	REFUSES TO ANSWER	$\delta \rightarrow [\text{ SKIP TO } 20 \text{ O}]$	N PAGE 10]
IKPAYADT L18. D	oid you pay extra for (his/her) tests or pro	ocedures, with either money or gi	ifts?
	Yes	1	
	No		N PAGE 10]
	DOESN'T KNOW	$7 \rightarrow [SKIP TO 20 O]$	N PAGE 10]
	REFUSES TO ANSWER	$\delta \rightarrow \bar{\beta}$ SKIP TO 20 O	N PAGE 10]

19.1 W ł	hom and how much did you pay?	
	Did How much you pay? in rubles? D/K REFUSA	FS
1.	Officially in the medical enterprises's	L
	cashier's office	
	L191.1A No 2 <i>IKAMTPTC</i>	
2.	Paid money or gifts directly to theIKPDTCSH	
	personnel who performed the	
	investigation or procedure	
	L191.2A No 2 <i>IKAMTPTP</i> / <i>IKPDTPSL</i>	
WWOGIAL VAO W		
IKHOSL3M L20. Ha	s (he/she) been in the hospital in the last three months?	
	Yes	
	No	
	DOESN'T KNOW	
	REPUSES TO ANSWER $\theta \rightarrow [SKIF 10.20 \text{ ON FAGE II}]$	
IKWHYHOS 21. For	r what reason or reasons was (he/she) hospitalized?	
(char)		
	D. O. F. C. VIII. V.	
	DOESN'T KNOW	
	REFUSES TO ANSWER 8	
IKHOSTYP L22. Tel	ll me, please: In what kind of facility was (he/she) hospitalized (most recently)?	
	In a raion, city, state, village hospital 1	
	In a commercial hospital	
	DOESN'T KNOW	
	REFUSES TO ANSWER 8	
IKDYSHOS L23. Ho	ow many days in total in the last three months was (he/she) in the hospital?	
	days	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
IVDDHACD I 24 1 Dia	d you now for (his/hor) stay in the hospital for madical halp, or for treatment, not	
	d you pay for (his/her) stay in the hospital, for medical help, or for treatment, not or medicine, syringes, and dressings, with either money or gifts?	
	Yes 1	
	No	
	$DOESN'T\ KNOW$	
	REFUSES TO ANSWER 8 \rightarrow [SKIP TO 25.1 ON PAGE 11]	
	hom and how much have you paid in the last three months for (his/her) stays in the	
hospital?	Did How much	
	you pay? in rubles? D/K REFUSA	ES
1.	For treatment and care, not counting	
	payments for medicine, <u>officially</u> in	
	the hospital cashier's office	
-	L242.1A No 2 <i>IKAMTPHC</i>	
2.	For treatment and care, not countingIKPDHCSH	
	payments for medicine, <u>directly</u> to doctors and other medical	
	personnel with money or gifts	
	No2 <i>IKAMTPHP</i>	
	I.242.2A No2 <i>IKAMTPHP IKPDHPSL</i>	

IKPAYMED L25.1 Did you receive medicine, syringes, and dressings, which were necessary for (his/her) treatment in the hospital, for free, or did you pay for them with money or gifts?

	All medicines, syringes, and dressings				
	were free	1 →	[SKIP TO 26]		
	Some medicines, syringes, and dressings				
	were free, and we paid for others	2			
	We paid for the medicines, syringes, and				
	dressings	3			
	DOESN'T KNOW		SKIP TO 261		
	REFUSES TO ANSWER				
25.2 **	, , , , , , , , , , , , , , , , , , , ,	., .			•
	hom and how much in all did you or your fa	amily pay <u>for i</u>	medicines, syrii	nges, ai	<u>nd</u>
<u>aressings</u> when (ne/	she) was in the hospital?	D. I	TT 1.		
		Did	How much	D (**	D = = 1 10 = 0
		you pay?	in rubles?	D/K	REFUSES
1.	I				
	or the drug store of the hospital	Yes 1 -	→ <u>L252.1B</u> _	9997	9998
	in which (he/she) stayed	No2	<i>IKAMTPMC</i>		
	L252.1A	<i>IKPDMCSH</i>			
2.	You paid unofficially doctors or other				
	medical personnel at the hospital in which	h			
	(he/she) stayed with money or gifts	Yes 1 –	→ L252.2B	9997	9998
	(ne/site) sunj eu (11011 intone) et gitts		İKAMTPMP		,,,,
	L252.2A	IKPDMPSL			
3.					
5.		<u>Y</u>			
	of the hospital in which (he/she) stayed	V 1	. I 252 2D	0007	0000
	medicine, syringes, and dressings	Yes 1 -	→ <u>L232.3D</u>	999/	9998
	L252.3/	No2 IKPDMDST	IKAMIPMD		
		- IKPDMDSI			
IVCHECVIII 16 T	-11	h - /- h - \ 4		-4- C	_
	ell me, please: <u>In the last three months</u> did (ne/sne) go to a	i medicai institi	ite ior	a
preventive examina	tion, not because of sickness?				
	V	1			
	Yes		CIVID TO 33 O	NDAG	E 10 1
	No				
	DOESN'T KNOW				
	REFUSES TO ANSWER	8 →	[SKIP TO 33 O	N PAG	E 12]
	There did he/she go for a preventive examina	ition or checki	ıp the last time	?	
<i>IKCKTYP2</i> L28.2					
IKCKTYP3 L28.3	[INTERVIEWER! IT IS POSSIBLE TO M	IARK SEVER	AL ANSWERS.]	
1720.0					
	A polyclinic of the raion, city, state, village	21			
	A commercial polyclinic				
	A hospital of the raion, city, state, village				
	A commercial hospital				
	A private physician				
	Somewhere else				
	DOESN'T KNOW				
	REFUSES TO ANSWER	/			
	KEF USES TO ANSWEK	o			

IKCKUWHO L27. Who carried out this examination or checkup the last time?

 $[\ \underline{\textbf{INTERVIEWER!}}\ \ \text{IF THIS EXAMINATION WAS DONE BY MORE THAN ONE PERSON, NOTE THE SPECIALIST WITH THE HIGHEST QUALIFICATIONS.}\]$

		Physician	1			
		Physician's assistant	2			
		Nurse				
		Someone else	4			
		DOESN'T KNOW	7			
		REFUSES TO ANSWER				
IKCKUPAV	I 20 Di	d you pay for this preventive checkup, eitl	her with money	or with gifts?		
IKCKUIAI	L29. DI		_	or with girts:		
		Yes		GYTYD TIO 44 1		
		No				
		DOESN'T KNOW				
		REFUSES TO ANSWER	8 → [SKIP 10 33]		
	30.1 W	hom and how much did you pay for this c	heckup?			
			Did	How much		
			you pay?	in rubles?	D/K 1	REFUSES
	1.	Paid officially in the cashier's office				
		of the medical institute	1 —	<u>L301.1B</u>	9997	9998
		L301.	1A No 2	<i>IKAMTPCC</i>		
	2.	Paid doctors or other medical personnel	IIKPDCCSH			
		directly with money or gifts		<u>L301.2B</u>	9997	9998
			No 2	<i>IKAMTPCP</i>		
			A IKPDCPSL			
		ll me, please: <u>In the last 30 days</u> did a phy				
institution	hospital,	polyclinicwrite a prescription or advise	that (he/she) tal	ke some kind of	f medici	ne?
		Yes	1			
		No		SKIP TO 42 O	N PAGE	14]
		DOESN'T KNOW				
		REFUSES TO ANSWER				
						-
IKFINMED	L34. W	ere you able to find or buy any of these m	edicines?			
		Yes	1			
		No				
		DOESN'T KNOW	7 → [SKIP TO 41 O	N PAGE	13]
		REFUSES TO ANSWER				
	0.5 11					
	35. W	here did you manage to find the necessary				
	T 25 1		Ye	s No	D/KR	EFUSES
WMEDDDO	L35.1.		1	2	7	0
IKMEDDRO		recommended the medicine				
IKMEDSTA	L35.2.					
IKMEDPRI	L35.3.					
IKMEDIND						
IKMEDOTH	L35.5.	At some other place	1	2	. 7	8
IKDISMED	L36 Te	ll me, please: Was (he/she) entitled to a di	scount on these	medicines?		
		Yes				
				CVID TO 20 O	NI DA CE	12 7
		No				
		DOESN'T KNOW				
		REFUSES TO ANSWER	δ → [5KIP 10 38 0	n PAGE	13]

IKSIZDIS	L57. Ho	w much of a discount was (he/she) entitled to,	what percentage?
		100 percent	1
		50 percent	
		20 percent	
		Less than 20 percent	
		DOESN'T KNOW	
		REFUSES TO ANSWER	
		REPOSES TO ANSWER	0
IKPAIDPR	L38. Die	d you pay anything for these medicines?	
		Yes	1
		No	
		DOESN'T KNOW	
		REFUSES TO ANSWER	
		TEL OSES TO THIS WELL.	
IKPRAMNT	L39. Ho	w much did you pay for these medicines?	
		rubles	
		rubles	997
		REFUSES TO ANSWER	
		Il me, please: Were there any medicines prescuence not able to find or buy?	ribed or recommended for (him/her) in the
		·	
		Yes	1
		No	$2 \rightarrow [$ SKIP TO 42 ON PAGE 14 $]$
		DOESN'T KNOW	
		REFUSES TO ANSWER	$8 \rightarrow [$ SKIP TO 42 ON PAGE 14 $]$
	41 W	hy weren't you able to obtain these medicines?	
	41. WI	ny weren't you able to obtain these medicines:	
IVMMOTIM	T 1 1 1	Didn't have time to have them	1 2 7 0
		Didn't have time to buy them Couldn't find them in a pharmacy	
		Didn't have enough money	
		Didn't want to buy them	
		Physically couldn't buy them myself and	1 / 8
IKMINOCAL	V L41.3.	there was no one else to do it	1 2 7 8
		there was no one else to do it	
IKNOLD	41.1 Tel	ll me, please: Was there a discount for (him/he	er) on these medicines?
L411		V	1
		Yes	
		No DOESN'T KNOW	
		REFUSES TO ANSWER	
		REPUSES TO ANSWER	0 → [SKIF 10 42 ON FAGE 14]
IKNOLDSZ	41.2 Но	w much of a discount was it, what percentage	for (him/her)?
L412		100 paraant	1
		100 percent	
		50 percent	
		20 percent	
		Less than 20 percent	
		REFUSES TO ANSWER	
		NET USES TO AINSWER	O

me, m, me						
		Yes		TD TO 4	OMB	OF 4.5.3
		No				
		DOESN'T KNOWREFUSES TO ANSWER				
		REFUSES TO ANSWER	o → [SK	.IF 1O 43	ONTA	GE 13]
	43. Ple	ease remember what kind of vaccinations (he/	she) has had. (l	He/she) l	nas had	vaccinati
against			Yes	No	D/K	REFUS
IKVACTUB	L43.1.	Tuberculosis	1	2	7	8
IKVACMEA	L43.2.	Measles	1	2	7	8
IKVCADS1	L43.3.	Diptheria, whooping cough, tetanus AKDS/ADS 1	1	2	7	8
IKVCADS2	L43.4.					
IKVCADS3	L43.5.	Diptheria, whooping cough, tetanus				
wwapor:	T 40 4	AKDS/ADS 3				
IKVCPOL1		Polio 1st time				
IKVCPOL2	L43.7.	Polio 2 nd time	I	2	7	8
IKVCPOL3		Polio 3 rd time				
	L43.9.					
<i>KVCMUMF</i>		1				
					7	8
		8				
IKVMENIN IKVACOTH						
IKVACOTH	L43.11.		1	2	7	
IKVACOTH	L43.11.	Other illnessease remember: Has (he/she) had any vaccina	1	2 three m	7	8
IKVACOTH	L43.11.	Other illness ease remember: Has (he/she) had any vaccina Yes No		three m	7 nonths? ON PA	
KVACOTH	L43.11.	Other illnessease remember: Has (he/she) had any vaccina	1	2 three m IP TO 49 IP TO 49	7 onths? ON PA ON PA	GE 15] GE 15]
KVACOTH	L43.11.	Other illness ease remember: Has (he/she) had any vaccina Yes No	112 → [SK7 → [SK8 → [SK	2 three m IP TO 49 IP TO 49	7 onths? ON PA ON PA	GE 15] GE 15]
KVACOTH	L43.11.	Other illness Pase remember: Has (he/she) had any vaccina Yes No DOESN'T KNOW REFUSES TO ANSWER	1	E three m IP TO 49 IP TO 49 IP TO 49	onths? ON PA ON PA ON PA	GE 15] GE 15] GE 15]
KVACOTH	L43.11. L44. Ple 45. Ha	Other illness Pase remember: Has (he/she) had any vaccina Yes	1	### TO 49 IP TO 49 IP TO 49 IP TO 49	ON PA ON PA ON PA ON PA	GE 15] GE 15] GE 15]
KVACOTH KVACL3M KVL3TUB	L43.11. L44. Ple 45. Ha	Other illness Pase remember: Has (he/she) had any vaccina Yes No DOESN'T KNOW REFUSES TO ANSWER s (he/she) had in the last three months vaccin Tuberculosis	1	### TO 49 IP TO 49 IP TO 49 IP TO 49 No	onths? ON PA ON PA ON PA ON PAD/K	GE 15] GE 15] GE 15]REFUS
KVACOTH KVACL3M KVL3TUB KVL3MEA	L43.11. L44. Ple 45. Ha L45.1. L45.2.	Other illness Pase remember: Has (he/she) had any vaccina Yes No DOESN'T KNOW REFUSES TO ANSWER s (he/she) had in the last three months vaccin Tuberculosis Measles Diphtheria, whooping cough, tetanus	1	IP TO 49 IP TO 49 IP TO 49	onths? ON PA ON PA ON PA ON PAD/K	GE 15] GE 15] GE 15]REFUS
KVACOTH KVACL3M KVL3TUB KVL3MEA KVL3AD1	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3.	Other illness	1	IP TO 49 IP TO 49 IP TO 49 IP TO 29 IP TO 29 IP TO 29 IP TO 39	onths? ON PA ON PA ON PA ON PA	GE 15] GE 15] GE 15]
KVACOTH KVACL3M KVL3TUB KVL3MEA KVL3AD1 KVL3AD2	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3.	Other illness case remember: Has (he/she) had any vaccina Yes No	1	IP TO 49 IP TO 49 IP TO 49 IP TO 30 IP	ON PA ON PA ON PA ON PA	GE 15] GE 15] GE 15]
KVACOTH KVACL3M KVL3TUB KVL3MEA KVL3AD1 KVL3AD2	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3. L45.4. L45.5.	Other illness case remember: Has (he/she) had any vaccina Yes No DOESN'T KNOW REFUSES TO ANSWER s (he/she) had in the last three months vaccin Tuberculosis Measles Diphtheria, whooping cough, tetanus AKDS/ADS 1 Diphtheria, whooping cough, tetanus AKDS/ADS 2 Diphtheria, whooping cough, tetanus AKDS/ADS 3	1	2222	7	GE 15] GE 15] GE 15] GE 15]
IKVACOTH IKVACL3M IKVL3TUB IKVL3MEA IKVL3AD1 IKVL3AD2 IKVL3AD3	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3. L45.4. L45.5.	Other illness case remember: Has (he/she) had any vaccina Yes No DOESN'T KNOW REFUSES TO ANSWER s (he/she) had in the last three months vaccin Tuberculosis Measles Diphtheria, whooping cough, tetanus AKDS/ADS 1 Diphtheria, whooping cough, tetanus AKDS/ADS 2 Diphtheria, whooping cough, tetanus AKDS/ADS 3 Polio 1st time	1	222	7	GE 15] GE 15] GE 15] GE 15]REFUS888
IKVACOTH IKVACL3M IKVL3TUB IKVL3MEA IKVL3AD1 IKVL3AD2 IKVL3AD3 IKVL3PO1 IKVL3PO1	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3. L45.4. L45.5. L45.6. L45.7.	Other illness case remember: Has (he/she) had any vaccina Yes No DOESN'T KNOW REFUSES TO ANSWER s (he/she) had in the last three months vaccin Tuberculosis Measles Diphtheria, whooping cough, tetanus AKDS/ADS 1 Diphtheria, whooping cough, tetanus AKDS/ADS 2 Diphtheria, whooping cough, tetanus AKDS/ADS 3 Polio 1st time Polio 2nd time	1	222	7	GE 15] GE 15] GE 15]REFUS888
KVACOTH KVACL3M KVL3TUB KVL3MEA KVL3AD1 KVL3AD2 KVL3AD3 KVL3AD3 KVL3PO1 KVL3PO2 KVL3PO3	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3. L45.4. L45.5. L45.6. L45.7. L45.8.	Other illness case remember: Has (he/she) had any vaccina Yes No	1	222	7	GE 15] GE 15] GE 15]REFUS8888
IKVACOTH IKVACL3M IKVL3TUB IKVL3MEA IKVL3AD1 IKVL3AD2 IKVL3AD3 IKVL3PO1 IKVL3PO2 IKVL3PO3 IKVL3PO3 IKVL3PO3	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3. L45.4. L45.5. L45.6. L45.7. L45.8. L45.9.	Other illness case remember: Has (he/she) had any vaccina Yes No	1	2 2	7	GE 15] GE 15] GE 15] GE 15]
IKVACOTH IKVACL3M IKVL3TUB IKVL3MEA IKVL3AD1 IKVL3AD2 IKVL3AD3 IKVL3PO1 IKVL3PO2 IKVL3PO3 IKVL3PO3 IKVL3HEP IKVL3MUM	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3. L45.4. L45.5. L45.6. L45.7. L45.8. L45.9. (L45.10.	Other illness case remember: Has (he/she) had any vaccina Yes No	1	222	7	GE 15] GE 15] GE 15]REFUS8888
IKVACOTH	L43.11. L44. Ple 45. Ha L45.1. L45.2. L45.3. L45.4. L45.5. L45.6. L45.7. L45.8. L45.9. (L45.10. L45.12.	Other illness case remember: Has (he/she) had any vaccina Yes No	1	222	7	GE 15] GE 15] GE 15] GE 15]

46. Where did (he/she) have these vaccinations?

			Yes	No	D/K	REFUSES
IKVCPOLY	L46.1	In a children's or maternity hospital	1	2	7	8
		In a polyclinic				
IKVCCCLI		In a hospital				
		At a private doctor				
		At school				
		At a kindergarten or nursery				
		In another place				
IKPAIDVC	L47. Die	d you pay for (his/her) vaccinations, including the	cost of vaco	cines or s	syringes	3?
		Yes	1			
		No				
		DOESN'T KNOW	$7 \rightarrow [SK]$	IP TO 4 9)]	
		REFUSES TO ANSWER	$ 8 \rightarrow [SK]$	IP TO 4 9]	
IKAMTVAC	L48. Ho	ow much did you pay?				
		rubles				
		rubles DOESN'T KNOW	997			
		REFUSES TO ANSWER	998			
IKNGETVC	L49. Die	d you want (him/her) to have some kind of vaccin	ation but we	ere unab	le to ha	ve it done?
		Yes	1			
		No	$\dots 2 \rightarrow [SK]$	IP TO N	EXT SE	CT. P. 16]
		DOESN'T KNOW	$7 \rightarrow [SK]$	IP TO N	EXT SE	CT. P. 16
		REFUSES TO ANSWER	$ 8 \rightarrow [SK]$	IP TO N	EXT SE	CT. P. 16]
IKWHYNVC	L50. WI	hy was (he/she) not able to get the vaccination? (Choose only	one of th	e answo	ers I list:
		Too expensive	1			
		No transportation to where				
		vaccinations were given				
		Fear of infection				
		There wasn't a vaccine for the vaccination				
		Didn't have time to get it	5			
		Other				
		DOESN'T KNOW				
		REFUSES TO ANSWER	8			

SECTION "HEALTH EVALUATION"

M1. Now a few questions about health. But first I would like to ask you what you think (his/her) height and weight are.

IKWTSELF How many kilograms does (he/she) weigh? [INTERVIEWER! IN THIS QUESTION YOU NEED TO UNDERSTAND THE SUBJECTIVE OPINION OF THE RESPONDENT ABOUT HIS WEIGHT AND HEIGHT. EXACT MEASUREMENTS OF THESE DATA WILL BE MADE AT THE END OF THE INTERVIEW. KG *IKHTSELF* M2. What is (his/her) height in centimeters? CMIKWTCHNG M2.1Tell me, please: How has (his/her) weight changed over the last year? (HIS/HER) WEIGHT DID NOT CHANGE...... 3 REFUSES TO ANSWER...... 8 IKEVALHL M3. How would you evaluate (his/her) health? It is: Bad4 Very bad5 DOESN'T KNOW...... 7 REFUSES TO ANSWER...... 8

20.6 Does (he/she) have any kind of chronic illness?

		Yes	No	D/K	.REFUSES
IKCHEART M20.61.	Heart disease	1	2	7	8
IKCLUNGS M20.62.	Illness of the lungs	1	2	7	8
IKCLIVER M20.63.	Liver disease	1	2	7	8
IKCKIDNY M20.64.	Kidney disease	1	2	7	8
<i>IKCGI</i> M20.65 .	Gastrointestinal disease	1	2	7	8
<i>IKCSPINE</i> M20.66 .	Spinal problems	1	2	7	8
IKCNASOP M20.68.	Nasopharynx disease	1	2	7	8
<i>IKCOTHER</i> M20.67 .	Other chronic illnesses	1	2	7	8

IKDIABET M43. Ha	s a doctor ever said that (he/she) had di	abetes or increas	ed sugar in t	he blood?	
	Yes	1			
	No		F SKIP TO 62	2.1]	
	DOESN'T KNOW				
	REFUSES TO ANSWER				
IKDIABYR M44. In	what year did a doctor first tell you abo	out this?			
	La VEAD				
	In YEAR DOESN'T KNOW	7			
	REFUSES TO ANSWER				
	REFUSES TO ANSWER	δ			
45. To	treat (his/her) diabetes you use				
		Y	es No	D/K	REFUSES
IKDCDIET M45.1	Special diet		1 2	7	8
	Weight control				
	Pills				
	Insulin shots				
	Herbal treatment				
	Homeopathic treatment				
	Something else				
<i>IKEVERTB</i> M62.1 Ha	s a doctor ever told you that (he/she) ha				
	No		F CV ID TO C	2 7	
	DOESN'T KNOW				
	REFUSES TO ANSWER				
	REFUSES TO ANSWER	₀ →	[SKIP 10 62	2.3]	
IKYEARTB M62.2 In more than once, whe	what year was (he/she) diagnosed with t n was the last time?	tuberculosis? If ((he/she) has l	nad this d	iagnosis
	In YEAR				
	In YEAR DOESN'T KNOW	7			
	REFUSES TO ANSWER				
WEVERIDARA		(A (A)		•• "•	11 110
IKEVERHP M62.3	Has (he/she) ever been diagnosed with	"hepatitis," "Bot	kin's disease	," or "jau	ndice"?
	Yes	1			
	No	2 →	[SKIP TO 6	ON PAG	Ε 18]
	DOESN'T KNOW				
	REFUSES TO ANSWER				
	what year was (he/she) diagnosed with diagnosis more than once, when was the		kin's disease,	," or "jau	ndice"? If
	In YEAR				
	In YEAR DOESN'T KNOW	7			
	REFUSES TO ANSWER				

<i>IKTYPHP</i> M62.5 \	With which type of hepatitis was (he/she	e) sick?
	Hepatitis A	1
	Hepatitis B	
	Hepatitis C	
	OTHER, WHAT EXACTLY	
	DOESN'T KNOW	
	REFUSES TO ANSWER	8
IKDRKTEA <mark>M67</mark> . 1	Does (he/she) drink tea?	
	Yes	1
	No	$2 \rightarrow [SKIP TO 69]$
	DOESN'T KNOW	$7 \rightarrow [SKIP TO 69]$
	REFUSES TO ANSWER	$8 \rightarrow [SKIP TO 69]$
IKFRETEA M68. 1	How often <u>during the last 30 days</u> did (h	ne/she) drink tea?
	Every day	1
	4-6 times a week	
	2-3 times a week	
	Once a week	
	Less than once a week	
	Never in the past 30 days	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
IKDRKCOF M69. 1	Does (he/she) drink coffee?	
	•	
	Yes	
	No	
	DOESN'T KNOWREFUSES TO ANSWER	
	REP USES TO ANSWER	0 → [SKII 10 70]
IKFRECOF M70.1	How often <u>during the last 30 days</u> did (h	ne/she) drink coffee?
	Every day	1
	4-6 times a week	2
	2-3 times a week	3
	Once a week	4
	Less than once a week	5
	Never in the past 30 days	6
	DOESN'T KNOW	
	REFUSES TO ANSWER	
IKCOUGHS M96.	Tell me, please: <u>In the last 7 days</u> has (h	ne/she) had a cough?
	Yes	1
	No	
	DOESN'T KNOW	
	REFUSES TO ANSWER	

IKCONGES M97.	Tell me, in the last 7 days has (he/she) h	had a cold, perhaps a runny or stuffy nose?
	Yes	
	No	2
	DOESN'T KNOW	7
	REFUSES TO ANSWER	8
IKEARACH M98.	In the last 7 days has (he/she) had an ea	arache?
	Yes	1
	No	
	DOESN'T KNOW	7
	REFUSES TO ANSWER	8
IKSORETH M99.	In the last 7 days has (he/she) had a sor	re throat?
	Yes	1
	No	2
	DOESN'T KNOW	7
	REFUSES TO ANSWER	8
<i>IKTEETHI</i> M100 .	In the last 7 days has (he/she) been teet	hing?
	Yes	
	No	2
	DOESN'T KNOW	7
	REFUSES TO ANSWER	8
IKDIARRH M101	. In the last 7 days has (he/she) had diar	rhea?
	Yes	1
	No	$2 \rightarrow [$ SKIP TO 109 ON PAGE 20 $]$
		$7 \rightarrow [$ SKIP TO 109 ON PAGE 20 $]$
	REFUSES TO ANSWER	$8 \rightarrow [$ SKIP TO 109 ON PAGE 20 $]$
IKDIARDY M102	. How many days in the last 7 has (he/sh	e) had diarrhea?
	DAYS	
	DOESN'T KNOW	
	REFUSES TO ANSWER	98
IKBMTIME M103	Tell me, please: <u>In the last 24 hours</u>	how often has (he/she) had a bowel movement?
	<i>TIMES</i>	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
IKMUCUSSM104	.In the last 7 days have you noticed muc	cus in (his/her) stool (whitish or some other color)?
	Yes	1
	No	
	DOESN'T KNOW	
	REFUSES TO ANSWER	8

IKBLOODS <mark>M105</mark> . <u>I</u> 1	<u>1 the last 7 days</u> have you noticed blo	od in (his/her) stool?
	Yes	1
	No	
	DOESN'T KNOW	
	REFUSES TO ANSWER	8
	ell me, please: Since the diarrhea sta is (he/she) had an elevated temperatu	arted, have you noticed any other symptoms of illness are?
	Yes	1
	No	
	DOESN'T KNOW	
	REFUSES TO ANSWER	8
IKVOMITS M107. T	ell me, please: Since the diarrhea sta	arted, has (he/she) thrown up?
	Yes	1
	No.	
	DOESN'T KNOW	=
	REFUSES TO ANSWER	
IKABPAIN M108. Starge or small intest	ince the diarrhea started, has (he/she	e) had pain in the abdominal cavity: in the abdomen,
	Yes	1
	No	
	DOESN'T KNOW	
	REFUSES TO ANSWER	8
IKLEUKEM M109.	Tell me, please: Has (he/she) had le	eukemia?
	Yes	1
	No	
	DOESN'T KNOW	
	REFUSES TO ANSWER	
	YERIFY THE SEX AND BIRTH YEAR	TEM 5 ON THE COVER PAGE AND QUESTION A R OF THE CHILD UNDER DISCUSSION. ASK IN 1991 OR EARLIER. FOR ALL OTHERS, SKIP TO
IKEVRMEN M110.	Tell me, please: Has she ever mens	truated?
	Yes	1
	DOESN'T KNOW	$7 \rightarrow [SKIP TO 115 ON PAGE 21]$
	REFUSES TO ANSWER	$8 \rightarrow [SKIP TO 115 ON PAGE 21]$
IKAGEMEN M111.	How old was she when she first me	nstruated?
	VEADO	
	YEARS DOESN'T KNOW	07
	REFUSES TO ANSWER	

[INTERVIEWER! QUESTIONS 115-130 ON PAGES 21-23 SHOULD BE ANSWERED BY THE CHILD (HIMSELF/HERSELF).]

M115. [INTERVIEWER! RETURN TO QUESTION A ON PAGE 1. ASK QUESTIONS 115-130 ONLY OF CHILDREN WHO WERE BORN IN 1996 OR EARLIER. THE REMAINING CHILDREN (WHO WERE BORN IN 1997 OR LATER) SHOULD BE ASKED THE QUESTIONS IN THE NEXT SECTION ON PAGE 24.]

IKRSHAPE Please look at these drawings and say which of these nine figures most closely resembles your figure. Tell me the number of the drawing.
[INTERVIEWER!
IF YOU ARE SPEAKING WITH A <u>GIRL</u> BORN BETWEEN <u>1991 AND 1996</u> USE ENVELOPE NO. 1 WITH DRAWINGS 1-9.
IF YOU ARE SPEAKING WITH A <u>GIRL</u> BORN BETWEEN <u>1989 AND 1990</u> USE ENVELOPE NO. 2 WITH DRAWINGS 10-18 .
IF YOU ARE SPEAKING WITH A <u>BOY</u> BORN BETWEEN <u>1991 AND 1996</u> USE ENVELOPE NO. 3 WITH DRAWINGS 19-27.
IF YOU ARE SPEAKING WITH A <u>BOY</u> BORN BETWEEN <u>1989 AND 1990</u> USE ENVELOPE NO. 4 WITH DRAWINGS 28-36.
SHUFFLE THE CORRESPONDING DRAWINGS AND LAY THEM BEFORE THE RESPONDENT.]
NUMBER OF THE DRAWING 97 DOESN'T KNOW
<i>IKWSHAPE</i> M116 . Which of these drawings would you want your figure to look like? Tell me the number of the drawing.
[<u>INTERVIEWER!</u> AGAIN SHUFFLE THE DRAWINGS THAT YOU SHOWED IN QUESTION 115 AND LAY THEM OUT BEFORE THE RESPONDENT.]
NUMBER OF THE DRAWING 97 DOESN'T KNOW
IKDIETLY M117. Tell me, in the last 12 months have you been on a diet? We regard a diet as any change in your usual food in order to lose weight or get thinner.
Yes

REFUSES TO ANSWER...... 8

		<i>LL</i> .
	you think at the present time that you a	re underweight, have a normal weight, or are
overweight?		
	LAIDENHIELGUE	1
	UNDERWEIGHT	
	NORMAL WEIGHT	
	OVERWEIGHT	
	DOESN'T KNOW	
	REFUSES TO ANSWER	8
W. CODDINATIO N		
		hysical activity we mean only activities such as
1 , 5	•	ore than usual or you sweat. How do you rate
your physical activity	? You have ?	
	Too little	
	Normal	2
	Too much	3
	DOESN'T KNOW	7
	REFUSES TO ANSWER	8
119.1 Hov	v much time each day do you usually sn	end watching TV or videos, or playing video or
computer games?		
computer games.	M119.1A M119.1B	
	hours min	utes
	IKTVHR IKTVMN	utes
	DOESN'T WATCH TV OR VIDEO	06
	DOESN'T KNOW	
	REFUSES TO ANSWER	98
Wall on a Mark Wil		
IKCHANNL MI121.Wh	ich television channel do you most like	to watch? Choose one favorite channel.
-	WITH DAY WELL DO NOT DE LE TWO	
	INTERVIEWER! DO NOT READ TH	E LIST OF CHANNELS. NOTE ONLY <u>ONE</u>
CHANNEL.]		
	ORT–Russian Public Television	
	RTR-Russian Television	
	TVTS	03
	<i>NTV</i>	
	"CULTURE"	05
	TV-6	06
	<i>MTV</i>	07
	MUZ-TV	
	RenTV	
	STS	
	TNT	
	LOCAL OR CABLE	
	OTHER, SUCH AS	
	[INTERVIEWER! WRITE RESPONS	L. j
Wallan		
IKCHANNT	D. O. P. C. VIII. VO. V.	
(char)	DOESN'T KNOW	
	REFUSES TO ANSWER	98

123.1 How often do you watch the following channels?

		Always.Sometimes	Never	D/K	REFUSES
IKFREOSPM123101	. Sports	1 2	3	7	8
	2. Music				
	03 News programs				
	4 Cartoons				
IKFREOTA M12310	5 Talk shows	1 2	3	7	8
IKFREOMO M1231	06 Artistic films	1 2	3	7	8
	7 Entertainment programs				
	8 Popular science, educational programs				
	9 Advertisements				
IKFREOSE M12311	Soap operas	12	3	7	8
	o you ever ask your parents or other adults	to buy you some foo	d or dri	nk for v	which you
saw the advertiseme	ent on television?				
	Yes	1			
	No		PTO 120	1	
	BUY FOR MYSELF				
	DOESN'T KNOW				
	REFUSES TO ANSWER		PTO 129	J	
	REI OSES TO MINON ER	0 / [SKI	1012)	1	
IKBUYAD M127. D	o they buy you what you ask for?				
	Yes	1			
	No				
	DOESN'T KNOW				
	REFUSES TO ANSWER				
IKF2STAR M129.	[INTERVIEWER! QUESTION 129 IS ON	ILY FOR GIRLS ; AS	K BOYS	QUES	TION 130 .]
Н	ave you ever been on a diet or tried any oth	ner wavs to lose weig	ht to loo	k like s	omeone vou
have seen in a movie		, e			•
	Yes	1 → [SKII	P TO NE	XT SEC	CT. P. 24]
	No	2 → [SKII	P TO NE.	XT SEC	CT. P. 24]
	DOESN'T KNOW				
	REFUSES TO ANSWER	$8 \rightarrow [SKI]$	P TO NE	XT SEC	CT. P. 24]
IKM2STAR M130.	[INTERVIEWER! QUESTION 130 IS ON	ILY FOR BOYS .]			
н	ave you ever eaten differently than normal	or done more sports	to look	like sor	neone vou
have seen in a movie	e or on TV?	or done more spores	70 10011		
	Yes	1			
	No.				
	DOESN'T KNOW				
	REFUSES TO ANSWER				
	TEL COLO I O III ON LIC				

YEAR OF

BIRTH

	to. Don't forget to tell me what (he/she) ate and drank outside the home. Include all forms of k (he/she) consumed. It is also important for me to know where (he/she) ate and where the food.
Now, let's b	pegin.
[INTERVI	EWER! INDICATE THE DATE OF FILLING IN THIS SECTION:]
	DAY: MONTH:
	SECTION "DIET"
IKYUSUAL food as usual,	1. With regard to the quantity of food, did (he/she) yesterday eat about the same amount of less than usual, or more than usual?
	Same amount 1 Less 2 More 3 DOESN'T KNOW 7 REFUSES TO ANSWER 8
	2. Was (his/her) diet yesterday related to:
IKDIETDR IKDIETSP IKDIETRE	1. Doctor's recommendation 1 2 7 8 2. Observing a special diet 1 2 7 8 3. Religious practices 1 2 7 8
IKVITYES	3. Did (he/she) take multivitamins yesterday? Yes

DAY OF BIRTH

I would like you to tell me what [$NAME\ OF\ CHILD\]$ ate and drank in the last 24 hours--from waking up in the morning until going to bed at night. If (he/she) ate or drank anything during the night, please tell me

MONTH OF

BIRTH

SEX

	Time first serve d	Place where food was consumed	Product, dish, or beverage: Name, composition, cooking method, portion size, etc.	Home-cooked or not home- cooked	Amou nt (g, ml)	Type of food consumed	Code
	1	2		3	4	4.1	5
1.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home- cooked Not home- cooked PREPPLCE	GRAM S	Breakfast Dinner Supper Snack Other <i>MEALTYPE</i>	_ FOODCOD E
2.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home- cooked Not home- cooked PREPPLCE	<i>GRAM</i> S	Breakfast Dinner Supper Snack Other MEALTYPE	_ FOODCOD
3.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home- cooked Not home- cooked PREPPLCE	GRAM S	Breakfast Dinner Supper Snack Other MEALTYPE	_ FOODCOD E
4.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home- cooked Not home- cooked PREPPLCE	GRAM S	Breaktast Dinner Supper Snack Other MEALTYPE	_ FOODCOD E
5.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home-cooked Not home-cooked PREPPLCE	GRAM S	Breakfast Dinner Supper Snack Other <i>MEALTYPE</i>	_ _ FOODCOD E

RLMS, Round 11 Individual-Child

6.		Home or as a guest Public eatery Nursery or school Workplace Other place
	HOU	Other place
	R	PLACE

Homecooked

Not homecooked

PREPPLCE

S

S

S

HomeSupper
Snack
Other
Other
SPEPPLCE

S

FOODCOD
E

COOKED

FOODCOD

FOODCOD

7. Ho me or as a A HO gue UR St Pub lic eate ry Nur sery or sch ool Workpla ce Oth er plac e PLA CE

	Time first serve d	Place where food was consumed	Product, dish, or beverage: Name, composition, cooking method, portion size, etc.	Home-cooked or not home- cooked	Amou nt (g, ml)	Type of food consumed	Code
	1	2		3	4	4.1	5
1.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home-cooked Not home-cooked PREPPLCE	GRAM S	Breakfast Dinner Supper Snack Other <i>MEALTYPE</i>	_ _ FOODCOD E
		Home or as a guest Public eatery		Home- cooked		Breaktast Dinner	
2.	HOU R	Nursery or school Workplace Other place PLACE		Not home- cooked PREPPLCE	GRAM S	Supper Snack Other MEALTYPE	
3.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home- cooked Not home- cooked PREPPLCE	GRAM S	Breakfast Dinner Supper Snack Other MEALTYPE	_ FOODCOD
4.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home- cooked Not home- cooked PREPPLCE	GRAM S	Breaktast Dinner Supper Snack Other MEALTYPE	FOODCOD
5.	HOU R	Home or as a guest Public eatery Nursery or school Workplace Other place PLACE		Home- cooked Not home- cooked PREPPLCE	GRAM S	Breakfast Dinner Supper Snack Other MEALTYPE	_ FOODCOD E

RLMS, Round 11 Individual-Child

Home- cooked	Breaktast Dinner	
Not home- cooked PREPPLCE	Supper Snack Other GRAM MEALTYPE	lll
PREPPLCE	S MEALTIPE	$FOODCOD \ E$

Ho me-coo ked
Not hom e-coo ked
PR EP PL CE

Ho me-coo ked
Not hom e-coo ked
PR EP PL CE

Bre akfa st Din ner GR Sup AM per S Sna ck Oth er ME ALT YPE

Bre akfa st Din ner GR Sup AM per S Sna ck Oth er ME ALT YPE

25. P

SECTION "MEDICAL MEASUREMENTS"

IKLEGAMP	1. [<u>INTERVIEWER!</u> PLEASE NOTE:
	THE RESPONDENT HAS BOTH LEGS 1 THE RESPONDENT HAS ONLY ONE OR PART OF A LEG
	THE RESPONDENT IS MISSING ALL OR PART OF BOTH LEGS
IKARMAMP	2. [INTERVIEWER! PLEASE NOTE:
	THE RESPONDENT HAS BOTH ARMS 1 THE RESPONDENT HAS ONLY ONE
	OR PART OF AN ARM
	THE RESPONDENT IS MISSING ALL OR PART OF BOTH ARMS 3]
	OKTIMI OF BOTH MANO
IKHEIGHT	3. Height
	[INTERVIEWER! MAKE SURE RESPONDENTS TAKE OFF THEIR SHOES.]
	<i>CM</i>
IKWEIGHT	4. Weight
	[INTERVIEWER! BEFORE TAKING MEASUREMENT, MAKE SURE THE RESPONDENT IS WEARING ONLY LIGHT HOUSEHOLD CLOTHES.]
	KG
IKWAISTC	5. Waist circumference
	<i>CM</i>
IKHIPSIZ	6. Hip circumference
	CM

SECTION "INTERVIEWER'S REMARKS"

FEW MINUT	1. [NOTE IF ANYONE WAS PRESENT DURING THE I	NTERVIEW, EVEN II	ONLY FOR A
FEW MINUI	IES.	YES	NO
IKHHPRES S	S1.1. SOME OTHER MEMBER OF THE HOUSEHOLD		
	11.2. OTHER PEOPLE, NOT MEMBERS OF THIS HOUSEHO		
IKRESATT	S2 . [ASSESS THE RESPONDENT'S ATTITUDE TOWAR RESPONDENT WAS:	D THE INTERVIEW.	THE
	FRIENDLY, INTERESTED	1	
	NOT PARTICULARLY INTERESTED		
	IMPATIENT, WORRIED		
	HOSTILE		1
IKRESUND	83. [NOTE HOW THE RESPONDENT UNDERSTOOD T		J
	WELL	1	
	NOT VERY WELL		
	POORLY		J
<i>IKRESBEH</i> RESPONDE	S4 . [ASSESS THE RESPONDENT'S BEHAVIOR DURIN		THE
	WAS NERVOUS	1	
	WAS OCCASIONALLY NERVOUS		
	FELT COMFORTABLE		J
IKRESRES	85. [ASSESS THE RESPONDENT'S SHARPNESS. THE		
	VERY SLOW-WITTED	1	
	SLOW-WITTED, NEEDED EXPLANATIONS		
	AS BRIGHT AS THE MAJORITY OF RESPONDED	VTS 3	
	NOTABLY BRIGHTER THAN THE MAJORITY	4	1
IKRESSIN RESPONDE		E RESPONDENT. TH	
	VERY INTROVERTED, INSINCERE	1	
	AS SINCERE AND OPEN AS MOST RESPONDEN		
	MORE SINCERE AND OPEN THAN MOST		J
	S7 . [ASSESS WHETHER IN YOUR OPINION THE INFO YOUR IS RELIABLE:		
	RELIABLE	1	
	INFORMATION INADEQUATE TO ASSESS	2	
	NOT RELIABLE		
	1		
	I confirm that I completed the interview according to	the instructions using	the personal
	interview method, with the respondent chosen accordi		
	Signature		