

QUESTIONNAIRE FOR CHILDREN

KID_I

15TH ROUND

- SITEO* 1. [NAME OF POPULATED AREA _____ |__|__|__|]
REGION
- CENSUSDO* 2. [NUMBER OF SURVEY SECTOR (FOR CITIES) _____ |__|__|]
- FAMILYO* 3. [NUMBER OF FAMILY |__|__|]
H3
- PERSONO* 4. [NUMBER ON THE CARD OF THE CHILD BEING DISCUSSED |__|__|]
H4
- IORPINBF* 4.1 [**DID THE CHILD PARTICIPATE IN THE SURVEY EVER BEFORE?**
H4.1
YES..... 1
NO..... 2]
- IOGENDER* 5. [SEX OF THE CHILD BEING DISCUSSED:
H5
MALE.....1
FEMALE..... 2]
- IOINTDAY* 7. [DATE OF INTERVIEW: DAY |__|__| MONTH |__|__|]
IOINTMON **H7.1** **H7.2**
- IOINTHRS* 8. [LENGTH OF INTERVIEW: |__| HOURS |__|__| MINUTES]
IOINTMIN **H8A** **H8B**
9. [LAST NAME OF INTERVIEWER _____]
- IOINTNUM* 10. [NUMBER OF INTERVIEWER |__|__|__|]
- IOADANSW* 11. [NUMBER OF THE ADULT WHO ANSWERED THE QUESTIONS |__|__|] **H11**

2006

I,

[**INTERVIEWER!** WRITE YOUR FULL LAST NAME, FIRST NAME, PATRONYMIC!]
 I 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 SHOULD BE ANSWERED ONLY BY AN **ADULT FAMILY MEMBER**. IDEALLY THE PERSON WHO TOOK CARE OF THE CHILD IN THE **LAST 7 DAYS**. CHILDREN MAY BE PRESENT DURING THE DISCUSSION WITH THE CONSENT OF THE PARENTS.]

[**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
<i>IOBIRTHD</i>	<i>IOBIRTHM</i>	<i>IOBIRTHY</i>

11. Tell me, please: Was [*NAME OF CHILD*] born in another settlement or in the one where he/she is living now?

IN ANOTHER SETTLEMENT.....1
*IN SETTLEMENT WHERE HE/SHE
 IS LIVING NOW*2 → [SKIP TO 3]
DOESN'T KNOW.....7 → [SKIP TO 3]
REFUSES TO ANSWER.....8 → [SKIP TO 3]

K. SECTION "CARE OF CHILDREN"

[**INTERVIEWER!** IF THE CHILD WAS BORN **IN 2000** OR EARLIER, ASK **QUESTIONS BEGINNING WITH QUESTION 1**.

IF THE CHILD WAS BORN **BETWEEN 2001 AND 2004**, ASK **QUESTIONS BEGINNING WITH 8.A ON PAGE 5**.

FOR THE REMAINING CHILDREN (**BORN IN 2005 OR 2006**), ASK **QUESTION 9 ON PAGE 6**.]

IOGRADE1 **K1.** Tell me, please: Has [*NAME OF CHILD*] **finished** at least one grade of general school?

Yes1
 No.....2 → [SKIP TO 3]
DOESN'T KNOW.....7 → [SKIP TO 3]
REFUSES TO ANSWER.....8 → [SKIP TO 3]

IOGRADES 2. How many grades of general school has (he/she) **completed**?

J70.1

_____ GRADES
DOESN'T KNOW.....97
REFUSES TO ANSWER.....98

IOINSCHL 3. Is (he/she) now attending general school?

J70.2

Yes1
 No.....2 → [SKIP TO 8]
DOESN'T KNOW.....7 → [SKIP TO 8]
REFUSES TO ANSWER.....8 → [SKIP TO 8]

IOPAYSCH **K4. Has your family paid or should you have paid for (his/her) school instruction in the current quarter, not including payments for textbooks?**

Yes 1
 No..... 2 → [SKIP TO 6]
DOESN'T KNOW..... 7 → [SKIP TO 6]
REFUSES TO ANSWER..... 8 → [SKIP TO 6]

IOAMTSPM **K5. How much money does your family pay on average per month for (his/her) instruction in the current quarter?**

_____ rubles
DOESN'T KNOW 997
REFUSES TO ANSWER 998

IOPAYBKS **K6. Did your family pay for the textbooks that (he/she) uses during this school year?**

Yes 1
 No 2 → [SKIP TO 7.1]
DOESN'T KNOW 7 → [SKIP TO 7.1]
REFUSES TO ANSWER 8 → [SKIP TO 7.1]

IOAMTBKS **K7. How much did your family pay for (his/her) textbooks?**

_____ rubles
DOESN'T KNOW 997
REFUSES TO ANSWER 998

IOPECLAS **K7.1 Does (he/she) attend physical education classes 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]

IOPEFREQ **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 7
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 during class, and if so, for how many hours and minutes per week.

	(He/she) engages in during class ...:	How many hours and minutes per week:	D/K	REFUSES
1. Karate, judo, self-defense, wrestling, boxing, gymnastics	Yes 1 →	K7.3.1B _____ hrs K7.3.1C _____ min	97	98
.....	K7.3.1A No..... 2	<i>IOKARHRS</i>		
2. Active sports: badminton, tennis,	<i>IOKARATE</i>	<i>IOKARMIN</i>		
soccer, basketball, volleyball, hockey, or swimming	Yes 1 →	K7.3.2B _____ hrs K7.3.2C _____ min	97	98
.....	K7.3.2A No..... 2	<i>IOSPOHRS</i>		
.....	<i>IOSPORTS</i>	<i>IOSPOMIN</i>		
3. Track and field, skiing, skating	Yes 1 →	K7.3.3B _____ hrs _____ min	97	98
.....	K7.3.3A No..... 2	<i>IOTRAHRS</i>		
.....	<i>IOTRACKF</i>	<i>IOTRAMIN</i>		
4. Other kinds of physical activity	Yes 1 →	K7.3.4B _____ hrs _____ min	97	98
.....	K7.3.4A No..... 2	<i>IOPEOHRS</i>		
.....	<i>IOPEOTHR</i>	<i>IOPEOMIN</i>		K7.3.4C

IOPHYSOC **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, roller skating, etc.

Yes1
 No.....2 → [SKIP TO 7.7]
 DOESN'T KNOW.....7 → [SKIP TO 7.7]
 REFUSES TO ANSWER.....8 → [SKIP TO 7.7]

IOOCFREQ **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 before or after classes, and for how many hours and minutes per week.

	(He/she) engages in before or after classes?	How many hours and minutes per week?	D/K	REFUSES
1. Karate, judo, self-defense, wrestling, boxing, gymnastics	Yes..... 1 No..... 2 K7.6.1A IOOCKARA	→ K7.6.1B hrs K7.6.1C min IOOCKHRS IOOCKMIN	97	98
2. Active sports: badminton, tennis, soccer, basketball, volleyball, hockey, or swimming	Yes..... 1 No..... 2 K7.6.2A IOOCSPOR	→ K7.6.2B hrs K7.6.2C min IOOCSHRS IOOCSMIN	97	98
3. Track and field, skiing, ice skating, roller skating	Yes..... 1 No..... 2 K7.6.3A IOOCTRAC	→ K7.6.3B hrs K7.6.3C min IOOCTHRS IOOCTMIN	97	98
4. Other kinds of physical activity, for example, tag, hide and seek, riding a bicycle	Yes..... 1 No..... 2 K7.6.4A IOOCOTHR	→ K7.6.4B hrs K7.6.4C min IOOCOHR IOOCOMIN	97	98

7.7 Tell me, please: Does (he/she) engage in the following before or after classes, and for how many hours and minutes per day?

	(He/she) engages in?	How many hours and minutes per day?	D/K	REFUSES
1. Watching television, videos, playing video or computer games	Yes..... 1 No..... 2 K7.7.1A IOWATCTV	→ K7.7.1B hrs K7.7.1C min IOWTVHRS IOWTVMIN	97	98
3. Playing games with toy cars, dolls, construction sets, chess, checkers	Yes..... 1 No..... 2 K7.7.3A IOPLGAME	→ K7.7.3B hrs K7.7.3C min IOPLGHRS IOPLGMIN	97	98
2. Reading, music lessons, drawing, doing homework	Yes..... 1 No..... 2 K7.7.2A IOREADNG	→ K7.7.2B hrs K7.7.2C min IOREDHRS IOREDMIN	97	98

IOCMPTR 72.16.1 Tell me, please: **In the last 12 months** has (he/she) used a **personal computer** for any purpose, including typing documents, playing computer games, etc.?
J72.161

Yes1
No.....2 → [SKIP TO 184]
DOESN'T KNOW.....7 → [SKIP TO 184]
REFUSES TO ANSWER.....8 → [SKIP TO 184]

72.16.2 **In the last 12 months** has (he/she) used a personal computer:

	Yes	No	D/K	REFUSES
<i>IOCMPTRH</i> J721621. At home	1	2	7	8
<i>IOCMPTRW</i> J721622. At a place of study	1	2	7	8
<i>IOCMPTRE</i> J721623. In other places	1	2	7	8

IOCMPTWS 72.16.0 **In the last 12 months** did (he/she) use **computer** for studying?
J72160

Yes1
No.....2
DOESN'T KNOW.....7
REFUSES TO ANSWER.....8

IOINTRNT **J123. Tell me, please: In the last 12 months has (he/she) had to use the Internet?**

Yes1
No.....2 → [SKIP TO 184]
DOESN'T KNOW.....7 → [SKIP TO 184]
REFUSES TO ANSWER.....8 → [SKIP TO 184]

124. **In the last 12 months** has (he/she) used the Internet:

	Yes	No	D/K	REFUSES
<i>IOINTRNH</i> J124.1. At home	1	2	7	8
<i>IOINTRNW</i> J124.2. At a place of study	1	2	7	8
<i>IOINTRNC</i> J124.3. In an Internet café	1	2	7	8
<i>IOINTRNE</i> J124.4. In other places	1	2	7	8

125. **In the last 12 months** has (he/she) used the Internet for:

	Yes	No	D/K	REFUSES
<i>IOI4STUD</i> J125.1. Study	1	2	7	8
<i>IOI4ENTR</i> J125.3. Entertainment	1	2	7	8
<i>IOI4COMM</i> J125.4. Communication with friends	1	2	7	8
<i>IOI4CULT</i> J125.6. Expanding (his/her) horizons	1	2	7	8
<i>IOI4REFR</i> J125.7. Getting reference information	1	2	7	8
<i>IOI4OTHR</i> J125.9. Other things	1	2	7	8

IOCELLP **J184. Does he/she have his/her personal cell phone?**

Yes1
No.....2 → [SKIP TO 7.8.1]
ONE CELL PHONE IS USED BY SEVERAL FAMILY MEMBERS3 → [SKIP TO 186]
DOESN'T KNOW7 → [SKIP TO 7.8.1]
REFUSES TO ANSWER.....8 → [SKIP TO 7.8.1]

IOHOW2S

K7.8.1 How does (he/she) get to school?[**INTERVIEWER!** MARK ONLY ONE ANSWER.]

On foot 1
 On a bicycle 2
 In a car or by public transportation 3
 On foot and by transport 4
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IO2SHR
IO2SMN**7.8.2 How many total hours and minutes does it take (him/her) to go to school and return?**

K7.8.2A hours **K7.8.2B** minutes → [SKIP TO 9]
 DOESN'T KNOW 97 → [SKIP TO 9]
 REFUSES TO ANSWER 98 → [SKIP TO 9]

8. Why doesn't (he/she) go to general school now?

..... Yes No D/K ... REFUSES

IOTOOSML **K8.1. (He/she) will go to school in a year or two** 1 2 7 8
IOTOOILL **K8.2. (He/she) has poor health and cannot attend school** 1 2 7 8
IOEXPPELL **K8.3. (He/she) was expelled from school** 1 2 7 8
IOHOMESC **K8.4. Family wants to give (him/her) home schooling** 1 2 7 8
IONOSCHL **K8.5. No schools are close to home** 1 2 7 8
IOSCOTHR **K8.6. Other reasons** 1 2 7 8

8.A Now I will list various kinds of physical activities and you tell me which (he/she) is engaged in and for how many hours and minutes a week.

	(He/she) engages in it?	How many hours and minutes per week?	D/K	REFUSES
1. Karate, judo, gymnastics, tennis, swimming	Yes 1 →	K8.A.1B hrs K8.A.1C min	97	98
	No 2	K8.A.1A IONSKARA IONSKMIN		
2. Plays with a ball, goes skating, rides a bicycle	Yes 1 →	K8.A.2B hrs K8.A.2C min	97	98
	No 2	K8.A.2A IONSBALL IONSBMIN		
3. Dances, runs, jumps, plays hopscotch, hide and seek	Yes 1 →	K8.A.3B hrs K8.A.3C min	97	98
	No 2	K8.A.3A IONSDANC IONSDMIN		
4. Plays sitting: on a bench, in a sandbox	Yes 1 →	K8.A.4B hrs K8.A.4C min	97	98
	No 2	K8.A.4A IOSSHRS IONSSMIN		

IONSPREG K8.13 Is (he/she) regularly engaged in physical activities and sports in a children's preschool institution, at a sports club, or at home?

Yes 1
 No 2
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

8.15 Tell me, please: Does (he/she) engage in the following and, if so, for how many hours and minutes per day?

	(He/she) engages in it?	How many hours and minutes per day?	D/K	REFUSES
1. Watching TV, videos, playing video or computer games	Yes 1	→ _____ hrs _____ min	97	98
	No 2	IONSWHRS		
		IONSWATV IONSWMIN		
3. Playing games with toy cars, dolls, construction sets, chess, checkers	Yes 1	K8.153B _____ hrs _____ min	97	98
	No 2	K8.153C IONSGHRS		
		IONSGAME IONSGMIN		
2. Reading, or listening to what is read to (him/her)	Yes 1	K8.152B _____ hrs _____ min	97	98
	No 2	K8.152C IONSRHRS		
		IONSRREAD IONSRMIN		

IONFCARE **K9.** Tell me, please: In the last 7 days did anyone look after [*NAME OF CHILD*] who is not a member of your household: friends, workers at a children's institution, school teachers, or relatives who live separately?

Yes 1
 No 2 → [SKIP TO NEXT SECT.]
 DOESN'T KNOW 7 → [SKIP TO NEXT SECT.]
 REFUSES TO ANSWER 8 → [SKIP TO NEXT SECT.]

IORLCARE **K10.** In the last 7 days was [*NAME OF CHILD*] looked after by relatives who live separately?

Yes 1
 No 2 → [SKIP TO 13]
 DOESN'T KNOW 7 → [SKIP TO 13]
 REFUSES TO ANSWER 8 → [SKIP TO 13]

IODYCARE **K11.** On how many days of the last 7 was [*NAME OF CHILD*] looked after by relatives who live separately?

_____ DAYS
 DOESN'T KNOW 97
 REFUSES TO ANSWER 98

IOHRCARE 12. 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?

IOMRCARE

K12A _____ HOURS **K12B** _____ MINUTES
 DOESN'T KNOW 97
 REFUSES TO ANSWER 98

IOATTKIN **K13.** In the last 7 days did [*NAME OF CHILD*] go to kindergarten, nursery, after-school group, or something similar?

Yes 1
 No 2 → [SKIP TO 17]
 DOESN'T KNOW 7 → [SKIP TO 17]
 REFUSES TO ANSWER 8 → [SKIP TO 17]

IODYSKIN **K14.** On how many days of the last 7 did [*NAME OF CHILD*] go to kindergarten, nursery, after-school group, or something similar?

_____ DAYS
 DOESN'T KNOW 97
 REFUSES TO ANSWER 98

IOHRSKIN
IOMINKIN

15. 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 was (he/she) there?

K15A	HOURS	K15B	MINUTES
<i>DOESN'T KNOW</i>	97		
<i>REFUSES TO ANSWER</i>	98		

IOOWNSCH

K16. Who owns the preschool or school that [*NAME OF CHILD*] attends?

Government	1
Official department or enterprise	2
Private owner	3
Someone else	4
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IONRCARE

K17. In the last 7 days have you been helped to care for [*NAME OF CHILD*] by people who are not your relatives?

Yes	1		
No	2	→	[SKIP TO 20]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO 20]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO 20]

IODNCARE

K18. On how many days of the last 7 were you helped to care for [*NAME OF CHILD*] by people who are not your relatives?

_____	DAYS
<i>DOESN'T KNOW</i>	97
<i>REFUSES TO ANSWER</i>	98

IOHNCARE
IOMNCARE

19. On those days of the last 7, 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 help?

K19A	HOURS	K19B	MINUTES
<i>DOESN'T KNOW</i>	97		
<i>REFUSES TO ANSWER</i>	98		

IOCARELW

K20. Tell me, please: Have you already paid or will you have to pay for the care of [*NAME OF CHILD*] in the last 7 days by someone who is not a member of your household or for (his/her) stay at a children's institution? If you paid or will pay for these services not in money but with goods, gifts, etc., count this as payment.

You have already paid	1		
You still have to pay	2		
You haven't paid and you're not going to pay	3	→	[SKIP TO NEXT SECT. P. 8]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO NEXT SECT. P. 8]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO NEXT SECT. P. 8]

IOPAYCLW

K21. How much in total have you already paid or will you have to pay for the care in the last 7 days of [*NAME OF CHILD*] by someone who is not a member of your household or for (his/her) stay at a children's institution? If you paid or will pay for these services not in money but with goods, gifts, etc., estimate how much it would be in rubles. If you pay for this service monthly, divide the monthly sum by four.

_____	rubles
<i>DOESN'T KNOW</i>	997
<i>REFUSES TO ANSWER</i>	998

L. SECTION "MEDICAL SERVICES"

IOHPRBLM **L5. Has [NAME OF CHILD] had any health problems in the last 30 days?**

Yes	1	→	[SKIP TO 7]
No	2		
<i>DOESN'T KNOW</i>	7		
<i>REFUSES TO ANSWER</i>	8		

IOLPRBLM **L5.1 Perhaps in the last 30 days [NAME OF CHILD] did not feel well, for example, had a headache, sore throat, or toothache, or had a cold or upset stomach, a slightly elevated temperature, or a burn, injury, or scratch?**

Yes	1		
No	2	→	[SKIP TO 20]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO 20]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO 20]

IOTREABY **L7. What did you do to solve the health problems (he/she) had in the last 30 days?**

Went to a medical institution or health worker	1		
Did not go to a health worker, but treated by myself	2	→	[SKIP TO 20]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO 20]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO 20]

IOCALLDR **L8. Let's talk about (his/her) most recent meeting with a health worker in the last 30 days. Tell me, please: Last time did you call a health worker to see (him/her) at home or did (he/she) go there for an appointment?**

<i>WENT TO AN APPOINTMENT</i>	1		
<i>CALLED TO THE HOUSE</i>	2	→	[SKIP TO 15]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO 15]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO 15]

IOTYPMIN **L9. Tell me, please: Where did (he/she) go to see a doctor last time?**

A polyclinic of the raion, city, state, village	1
A commercial polyclinic	2
A hospital of the raion, city, state, village	3
A commercial hospital	4
A private physician	5
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOTDRPAY **L11. Did you spend any money traveling to this medical institution?**

Yes	1		
No	2	→	[SKIP TO 15]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO 15]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO 15]

IOTDRAMT **L12. How much did you spend last time traveling to this medical institution?**

	rubles
<i>DOESN'T KNOW</i>	997
<i>REFUSES TO ANSWER</i>	998

IOPAIDDR **L15. Did you pay for the visit, with either money or gifts?**

Yes 1
 No 2 → [SKIP TO 17]
DOESN'T KNOW 7 → [SKIP TO 17]
REFUSES TO ANSWER 8 → [SKIP TO 17]

16.1 Whom and how much did you pay for this visit?

	Did you pay?	How much in rubles?	D/K REFUSES
1. Paid officially in the enterprise's cashier's office.....	L161.1A Yes..... 1 →	L161.1B |	9997 9998
.....	No..... 2	<i>IOAMTPVC</i>	
2. Gave money or gifts directly to the medical personnel.....	L161.2A <i>IOPDVCSH</i> Yes..... 1 →	L161.2B |	9997 9998
.....	No..... 2	<i>IOAMTPVP</i>	
.....	<i>IOPDVPSL</i>		

IOADTEST **L17. Besides being seen by a medical worker, did (he/she) undergo any additional tests or procedures?**

Yes1
 No.....2 → [SKIP TO 20]
DOESN'T KNOW.....7 → [SKIP TO 20]
REFUSES TO ANSWER.....8 → [SKIP TO 20]

IOPAYADT **L18. Did you pay extra for (his/her) tests or procedures, with either money or gifts?**

Yes1
 No.....2 → [SKIP TO 20]
DOESN'T KNOW.....7 → [SKIP TO 20]
REFUSES TO ANSWER.....8 → [SKIP TO 20]

19.1 Whom and how much did you pay?

	Did you pay?	How much in rubles?	D/K REFUSES
1. Officially in the medical enterprise's cashier's office.....	L191.1A Yes..... 1 →	L191.1B |	9997 9998
.....	No..... 2	<i>IOAMTPTC</i>	
2. With money or gifts directly to the medical personnel who performed the examination or procedures.....	L191.2A <i>IOPDTCSH</i> Yes..... 1 →	L191.2B |	9997 9998
.....	No..... 2	<i>IOAMTPTP</i>	
.....	<i>IOPDTPSL</i>		

IOHOSL3M **L20. Has (he/she) been in the hospital in the last three months?**

Yes1
 No.....2 → [SKIP TO 26.1]
DOESN'T KNOW.....7 → [SKIP TO 26.1]
REFUSES TO ANSWER.....8 → [SKIP TO 26.1]

IODYSHOS **L23. How many days in total in the last three months was (he/she) in the hospital?**

 DAYS
DOESN'T KNOW.....97
REFUSES TO ANSWER.....98

IOPDHOSP **L24.1 Did you pay for (his/her) stay in the hospital, for medical help, or for treatment, not counting payments for medicine, syringes, and dressings, with either money or gifts?**

Yes 1
 No 2 → [SKIP TO 25.1]
DOESN'T KNOW 7 → [SKIP TO 25.1]
REFUSES TO ANSWER 8 → [SKIP TO 25.1]

24.2 Whom and how much have you paid in the last three months for (his/her) stays in the hospital?

	Did you pay?	How much in rubles?	D/K REFUSES
1. For treatment and care, not counting medicine, <u>officially</u> in the cashier's office	Yes..... 1 →	L242.1B	9997 9998
.....	L242.1A No..... 2	IOAMTPHC	
2. For treatment and care, not counting medicine, <u>directly</u> to doctors and other medical personnel with money or gifts	Yes..... 1 →	L242.2B	9997 9998
.....	L242.2A No..... 2	IOAMTPHP	
.....	IOPDHCSH		
.....	IOPDHPSL		

IOPAYMED **L25.1** Did you receive medicine, syringes, and dressings that 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 26.1]
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	..... 7 → [SKIP TO 26.1]
REFUSES TO ANSWER	..... 8 → [SKIP TO 26.1]

25.2 Whom and how much in all did you or your family pay for medicines, syringes, and dressings when (he/she) was in the hospital?

	How much in rubles?	D/K REFUSES
1. You paid <u>officially</u> to the cashier or the drug store of the hospital in which (he/she) stayed	Yes..... 1 →	L252.1B
.....	L252.1A No..... 2	IOAMTPMC
2. You paid <u>unofficially</u> doctors or other medical personnel at the hospital in which (he/she) stayed with money or gifts	Yes..... 1 →	L252.2B
.....	L252.2A No..... 2	IOAMTPMP
3. You bought medicine, syringes, and dressings for (him/her) <u>in any other pharmacy not affiliated with the hospital</u> in which (he/she) stayed	Yes..... 1 →	L252.3B
.....	L252.3A No..... 2	IOAMTPMD
.....	IOPDMCASH	
.....	IOPDMPSL	
.....	IOPDMDST	

IOCHKULY **L26.1** Tell me, please: In the last 12 months has (he/she) seen a medical worker for a routine checkup, not because of sickness?

Yes	..... 1
No	..... 2 → [SKIP TO 53]
DOESN'T KNOW	..... 7 → [SKIP TO 53]
REFUSES TO ANSWER	..... 8 → [SKIP TO 53]

IOCHECKU **L26.** And in the last three months has (he/she) seen a medical worker for a routine checkup, not because of sickness?

Yes	1	
No	2	→ [SKIP TO 53]
DOESN'T KNOW	7	→ [SKIP TO 53]
REFUSES TO ANSWER	8	→ [SKIP TO 53]

IOCKUPAY **L29. Did you pay for this preventive checkup, either with money or with gifts?**

Yes	1		
No	2	→	[SKIP TO 53]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO 53]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO 53]

30.1 Whom and how much did you pay for this checkup?

	Did you pay?	How much in rubles?	D/K	REFUSES
1. Paid officially in the cashier's office of the medical institute	L301.1A Yes..... 1 →	L301.1B	9997	9998
	No 2	<i>IOAMTPCC</i>		
2. Paid doctors or other medical personnel directly with money or gifts	L301.2A Yes..... 1 →	L301.2B	9997	9998
	No 2	<i>IOAMTPCC</i>		
	<i>IOPDCCSH</i>			
	<i>IOPDCPSL</i>			

IODOCREG **L53. Tell me, please: does (he/she) have (his/her) regular physician, whom you consult about all (his/her) health issues?**

Yes	1	→ [SKIP TO 55]
No	2	
<i>DOESN'T KNOW</i>	7	
<i>REFUSES TO ANSWER</i>	8	

IODOCNEC **L54. Do you have a doctor, whom he/she can see if it is necessary?**

Yes	1
No	2
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOECONHL **L55. Do you have to economize on his/her healthcare because you have other more urgent needs?**

Yes	1
No	2
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOMEDLMO **L33. Tell me, please: In the last 30 days did a physician or other specialist at a medical institution--hospital, polyclinic--write a prescription or recommend that (he/she) take medicine?**

Yes	1	
No	2	→ [SKIP TO 42]
<i>DOESN'T KNOW</i>	7	→ [SKIP TO 42]
<i>REFUSES TO ANSWER</i>	8	→ [SKIP TO 42]

IOFINMED **L34. Were you able to find or buy any of these medicines?**

Yes	1	
No	2	→ [SKIP TO 41]
<i>DOESN'T KNOW</i>	7	→ [SKIP TO 41]
<i>REFUSES TO ANSWER</i>	8	→ [SKIP TO 41]

35. Where did you manage to find the necessary medicines?

	Yes	No	D/K	REFUSES
<i>IOMEDDRO</i> L35.1. At the physician's who prescribed or recommended the medicine	1	2	7	8
<i>IOMEDSTA</i> L35.2. In a state pharmacy	1	2	7	8
<i>IOMEDPRI</i> L35.3. In a non-state pharmacy	1	2	7	8
<i>IOMEDIND</i> L35.4. From individuals	1	2	7	8
<i>IOMEDOTH</i> L35.5. At some other place	1	2	7	8

IOPAIDPR L38. Did you pay anything for these medicines?

Yes1
 No.....2 → [SKIP TO 40]
 DOESN'T KNOW.....7 → [SKIP TO 40]
 REFUSES TO ANSWER.....8 → [SKIP TO 40]

IOPRAMNT L39. How much did you pay for these medicines?

_____ rubles
 DOESN'T KNOW.....997
 REFUSES TO ANSWER.....998

IONOLOCM L40. Tell me, please: Were there any medicines prescribed or recommended for (him/her) in the last 30 days that you were not able to find or buy?

Yes1
 No.....2 → [SKIP TO 42]
 DOESN'T KNOW.....7 → [SKIP TO 42]
 REFUSES TO ANSWER.....8 → [SKIP TO 42]

41. Why weren't you able to obtain these medicines?

	Yes	No	D/K	REFUSES
<i>IOMNOTIM</i> L41.1. Didn't have time to buy them	1	2	7	8
<i>IOMNOFIN</i> L41.2. Couldn't find them in a pharmacy	1	2	7	8
<i>IOMNOMON</i> L41.3. Didn't have enough money	1	2	7	8
<i>IOMNOWAN</i> L41.4. Didn't want to buy them	1	2	7	8
<i>IOMNOCAN</i> L41.5. Physically couldn't buy them myself, and there was no one else to do it	1	2	7	8

IONMCOST L41.0 How much would you have to spend in total to buy the medicine you haven't bought?

_____ rubles
 D/A997
 REFUSES TO ANSWER.....998

IOEVRVAC L42. Tell me, please: Has (he/she) at any time had any kind of vaccination?

Yes1
 No.....2 → [SKIP TO 49]
 DOESN'T KNOW.....7 → [SKIP TO 49]
 REFUSES TO ANSWER.....8 → [SKIP TO 49]

43. Please remember what kind of vaccinations (he/she) has had. Has (he/she) had vaccinations against . . . ?

	Yes	No	D/K	REFUSES
<i>IOVACTUB</i> L43.1. Tuberculosis	1	2	7	8
<i>IOVACMEA</i> L43.2. Measles	1	2	7	8
<i>IOVCADS1</i> L43.3. Diphtheria, whooping cough, tetanus AKDS/ADS 1	1	2	7	8
<i>IOVCADS2</i> L43.4. Diphtheria, whooping cough, tetanus AKDS/ADS 2	1	2	7	8
<i>IOVCADS3</i> L43.5. Diphtheria, whooping cough, tetanus AKDS/ADS 3	1	2	7	8
<i>IOVCPOL1</i> L43.6. Polio 1 st time	1	2	7	8
<i>IOVCPOL2</i> L43.7. Polio 2 nd time	1	2	7	8
<i>IOVCPOL3</i> L43.8. Polio 3 rd time	1	2	7	8
<i>IOVACHEP</i> L43.9. Hepatitis	1	2	7	8
<i>IOVCMUMP</i> L43.10. Mumps	1	2	7	8
<i>IOVMENIN</i> L43.12. Meningitis	1	2	7	8
<i>IOVACOTH</i> L43.11. Other illness	1	2	7	8

IOSKIPRV L57. Did he/she skip any of required vaccinations?

He/she skipped1
 All required vaccinations are done2
 DOESN'T KNOW7
 REFUSES TO ANSWER8

IOVACL3M **L44. Tell me, please: Has (he/she) had any vaccinations in the last three months?**

Yes 1
 No 2 → [SKIP TO 49]
DOESN'T KNOW 7 → [SKIP TO 49]
REFUSES TO ANSWER 8 → [SKIP TO 49]

45. Has (he/she) had in the last three months vaccinations against . . . ?

		Yes	No	D/K	REFUSES
<i>IOVL3TUB</i>	L45.1. Tuberculosis	1	2	7	8
<i>IOVL3MEA</i>	L45.2. Measles	1	2	7	8
<i>IOVL3AD1</i>	L45.3. Diphtheria, whooping cough, tetanus				
	AKDS/ADS 1	1	2	7	8
<i>IOVL3AD2</i>	L45.4. Diphtheria, whooping cough, tetanus				
	AKDS/ADS 2	1	2	7	8
<i>IOVL3AD3</i>	L45.5. Diphtheria, whooping cough, tetanus				
	AKDS/ADS 3	1	2	7	8
<i>IOVL3PO1</i>	L45.6. Polio 1st time	1	2	7	8
<i>IOVL3PO2</i>	L45.7. Polio 2nd time	1	2	7	8
<i>IOVL3PO3</i>	L45.8. Polio 3rd time	1	2	7	8
<i>IOVL3HEP</i>	L45.9. Hepatitis	1	2	7	8
<i>IOVL3MUM</i>	L45.10. Mumps	1	2	7	8
<i>IOVL3MEN</i>	L45.12. Meningitis	1	2	7	8
<i>IOVL3OTH</i>	L45.11. Other illness	1	2	7	8

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

		Yes	No	D/K	REFUSES
<i>IOVCPOLY</i>	L46.1. In a polyclinic	1	2	7	8
<i>IOVCHOSP</i>	L46.2. In a hospital	1	2	7	8
<i>IOVCCCLI</i>	L46.3. In a children's polyclinic or maternity hospital	1	2	7	8
<i>IOVCDOCT</i>	L46.4. At a private doctor	1	2	7	8
<i>IOVCSCHO</i>	L46.5. At school	1	2	7	8
<i>IOVCKIND</i>	L46.6. At a kindergarten or nursery	1	2	7	8
<i>IOVCOTHR</i>	L46.7. In another place	1	2	7	8

IOPAIDVC **L47. Did you pay for (his/her) vaccinations, including the cost of vaccines or syringes?**

Yes1
 No.....2 → [SKIP TO 49]
DOESN'T KNOW.....7 → [SKIP TO 49]
REFUSES TO ANSWER.....8 → [SKIP TO 49]

IOAMTVAC **L48. How much did you pay?**

_____ rubles
DOESN'T KNOW.....997
REFUSES TO ANSWER.....998

IONGETVC **L49. Did you want (him/her) to have some kind of vaccination but were unable to have it done?**

Yes1
 No.....2 → [SKIP TO NEXT SECT.]
DOESN'T KNOW.....7 → [SKIP TO NEXT SECT.]
REFUSES TO ANSWER.....8 → [SKIP TO NEXT SECT.]

IOWHYNVC **L50. Why was (he/she) not able to get the vaccination? Choose only one of the answers I list:**

Too expensive1
 No transportation to the place where vaccinations
 were given.....2
 Fear of infection.....3
 There wasn't a vaccine for the vaccination.....4
 Didn't have time to get it5
 Other6
DOESN'T KNOW.....7
REFUSES TO ANSWER.....8

M. SECTION "HEALTH EVALUATION"

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

IOWTSELF **M1. How many kilograms does (he/she) weigh?**

[**INTERVIEWER!** IN THESE QUESTIONS WE NEED TO UNDERSTAND THE SUBJECTIVE OPINION OF THE RESPONDENT ABOUT WEIGHT AND HEIGHT. EXACT MEASUREMENTS OF THESE DATA WILL BE TAKEN AT THE END OF THE INTERVIEW.]

_____ KG
DOESN'T KNOW 997
REFUSES TO ANSWER 998

IOHTSELF **M2. What is (his/her) height in centimeters?**

_____ CM
DOESN'T KNOW 997
REFUSES TO ANSWER 998

IOWTCHNG **M2.1 Tell me, please: How has (his/her) weight changed over the last year?**

(He/she) lost weight 1
(He/she) gained weight 2
(HIS/HER) WEIGHT DID NOT CHANGE 3
DOESN'T KNOW 7
REFUSES TO ANSWER 8

IOEVALHL **M3. How would you evaluate (his/her) health? It is:**

Very good 1
Good 2
Average--not good, not bad 3
Bad 4
Very bad 5
DOESN'T KNOW 7
REFUSES TO ANSWER 8

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

		For how long has (he/she) had it?	This illness is . . . ?
			[CIRCLE ONLY ONE ANSWER]
1. Heart disease?	Yes . . . 1 →	Since the year of _____	Hereditary 1
	No . . . 2	M20.61B IOCHRTYR	Congenital..... 2
	M20.61 IOCHEART		Acquired... M20.61C ... 5
			..... IOCHRTCA
2. Lung disease?	Yes . . . 1 →	Since the year of _____	Hereditary 1
	No . . . 2	M20.62B IOCLUNYR	Congenital..... 2
	M20.62 IOCLUNGS		Acquired... M20.62C ... 5
			..... IOCLUNCA
3. Liver disease?	Yes . . . 1 →	Since the year of _____	Hereditary 1
	No . . . 2	M20.63B IOCLIVYR	Congenital..... 2
	M20.63 IOCLIVER		Acquired... M20.63C ... 5
			..... IOCLIVCA
4. Kidney disease?	Yes . . . 1 →	Since the year of _____	Hereditary 1
	No . . . 2	M20.64B IOCKIDYR	Congenital..... 2
	M20.64 IOCKIDNY		Acquired... M20.64C ... 5
			..... IOCKIDCA
5. Gastrointestinal disease?	Yes . . . 1 →	Since the year of _____	Hereditary 1
	No . . . 2	M20.65B IOCGIYR	Congenital... M20.65C ... 2
	M20.65 IOCGI		Acquired..... 5
			..... IOCGICA

	For how long has (he/she) had it?	This illness is . . . ? [CIRCLE ONLY ONE ANSWER]
6. Spinal problems?	Yes . . . 1 → Since the year of _____ No . . . 2 <i>IOCSPINE</i>	Hereditary 1 Congenital..... 2 Acquired M20.66C . 5 <i>IOCSPNCA</i>
	M20.66	M20.66B <i>IOCSPNYR</i>
7. Another <u>chronic</u> illness?	Yes . . . 1 → Since the year of _____ No . . . 2 <i>IOCOTHER</i>	Hereditary 1 Congenital..... 2 Acquired M20.67C . 5 <i>IOCOTHCA</i>
	M20.67	M20.67B <i>IOCOTHYR</i>

IODISABL **M20.7** Tell me, please: Is the child assigned to any disability classification?

Yes	1
No.....	2
<i>DOING PAPERWORK</i>	6
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IODIABET **M43.** Has a doctor ever said that (he/she) had diabetes or increased sugar in the blood?

Yes	1
No.....	2 → [SKIP TO 62.1]
<i>DOESN'T KNOW</i>	7 → [SKIP TO 62.1]
<i>REFUSES TO ANSWER</i>	8 → [SKIP TO 62.1]

IODIABYR **M44.** In what year did a doctor first tell you about this?

<i>IN</i> |__|__|__|__| <i>YEAR</i>	
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

45. To treat (his/her) diabetes you use . . .

	Yes	No	D/K	REFUSES
<i>IODCDIET</i> M45.1. Special diet	1	2	7	8
<i>IODCWCON</i> M45.2. Weight control	1	2	7	8
<i>IODCORAL</i> M45.3. Pills.....	1	2	7	8
<i>IODCSHOT</i> M45.4. Insulin shots	1	2	7	8
<i>IODCHERB</i> M45.5. Herbal treatment	1	2	7	8
<i>IODCHOME</i> M45.6. Homeopathic treatment.....	1	2	7	8
<i>IODCOTHR</i> M45.7. Something else.....	1	2	7	8

IOEVERTB **M62.1** Has a doctor ever told you that (he/she) has tuberculosis?

Yes	1
No.....	2 → [SKIP TO 62.3]
<i>DOESN'T KNOW</i>	7 → [SKIP TO 62.3]
<i>REFUSES TO ANSWER</i>	8 → [SKIP TO 62.3]

IOYEARTB **M62.2** In what year was (he/she) diagnosed with tuberculosis? If (he/she) has had this diagnosis more than once, when was the most recent time?

<i>IN</i> |__|__|__|__| <i>YEAR</i>	
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOEVERHP **M62.3** Has (he/she) ever been diagnosed with "hepatitis," "Botkin's disease," or "jaundice"?

Yes	1		
No	2	→	[SKIP TO 139]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO 139]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO 139]

IOYEARHP **M62.4** In what year was (he/she) diagnosed with “hepatitis,” “Botkin’s disease,” or “jaundice”? If (he/she) has had this diagnosis more than once, when was the most recent time?

IN |__| |__| |__| |__| YEAR
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IOTYPHP **M62.5** With which type of hepatitis was (he/she) sick?

Hepatitis A 1
 Hepatitis B 2
 Hepatitis C 3
 OTHER, WHAT EXACTLY 6

IOTYPHPT
 (char)

DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IOANXIET **M139.** Does he/she feel any anxiety or depression?

He/she doesn't feel any anxiety or depression 1
 He/she feels some anxiety or depression 2
 He/she feels severe anxiety or depression 3
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IOCOUGHHS **M96.** Tell me, please: In the last 7 days has (he/she) had a cough?

Yes 1
 No 2
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IOCONGES **M97.** Tell me, please: In the last 7 days has (he/she) had a cold, perhaps a runny or stuffy nose?

Yes 1
 No 2
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IOEARACH **M98.** Tell me, please: In the last 7 days has (he/she) had an earache?

Yes 1
 No 2
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IOSORETH **M99.** In the last 7 days has (he/she) had a sore throat?

Yes 1
 No 2
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IOTEETHI **M100.** In the last 7 days has (he/she) been teething?

Yes 1
 No 2
 DOESN'T KNOW 7
 REFUSES TO ANSWER 8

IODIARRH **M101. In the last 7 days has (he/she) had diarrhea?**

Yes	1		
No	2	→	[SKIP TO 109]
<i>DOESN'T KNOW</i>	7	→	[SKIP TO 109]
<i>REFUSES TO ANSWER</i>	8	→	[SKIP TO 109]

IODIARDY **M102. Tell me, please: How many days in the last 7 has (he/she) had diarrhea?**

	<u> </u> DAYS
<i>DOESN'T KNOW</i>	97
<i>REFUSES TO ANSWER</i>	98

IOBMTIME **M103. Tell me, please: In the last 24 hours how many times has (he/she) had a bowel movement?**

	<u> </u> TIMES
<i>DOESN'T KNOW</i>	97
<i>REFUSES TO ANSWER</i>	98

IOMUCUSS **M104. Tell me, please: In the last 7 days have you noticed mucus in (his/her) stool (whitish or some other color)?**

Yes	1
No	2
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOBLOODS **M105. In the last 7 days have you noticed blood in (his/her) stool?**

Yes	1
No	2
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOFEVERS **M106. Tell me, please: Since the diarrhea started, have you noticed any other symptoms of illness with (him/her)? Has (he/she) had an elevated temperature?**

Yes	1
No	2
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOVOMITS **M107. Since the diarrhea started, has (he/she) thrown up?**

Yes	1
No	2
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOABPAIN **M108. Since the diarrhea started, has (he/she) had pain in the abdominal cavity: in the abdomen, large or small intestine, or stomach?**

Yes	1
No	2
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

IOLEUKEM **M109. Tell me, please: Has (he/she) had leukemia?**

Yes	1
No	2
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

[**INTERVIEWER!** RETURN TO QUESTION **A** ON PAGE **1** AND VERIFY THE SEX AND BIRTH YEAR OF THE CHILD UNDER DISCUSSION. ASK QUESTIONS **110-111** IF THE CHILD IS A **GIRL** BORN IN **1995** OR EARLIER. FOR ALL OTHERS, ASK THE QUESTIONS IN THE NEXT SECTION ON PAGE **20**.]

IOEVRMEN **110. Tell me, please: Has she ever menstruated?**

N2	Yes	1	
	No	2	→ [SKIP TO NEXT SECT.]
	<i>DOESN'T KNOW</i>	7	→ [SKIP TO NEXT SECT.]
	<i>REFUSES TO ANSWER</i>	8	→ [SKIP TO NEXT SECT.]

IOAGEMEN **M111. How old was she when she first menstruated?**

|__| |__|	YEARS
<i>DOESN'T KNOW</i>	97
<i>REFUSES TO ANSWER</i>	98

SECTION “INTERVIEWER’S REMARKS”

1. [NOTE IF ANYONE WAS PRESENT DURING THE INTERVIEW, EVEN IF ONLY FOR A FEW MINUTES:

		YES		NO
<i>IOHHPRES</i>	S1.1. <i>SOME OTHER MEMBER OF THE HOUSEHOLD</i>	1	.....	2
<i>IOOTPRES</i>	S1.2. <i>OTHER PEOPLE, NOT MEMBERS OF THIS HOUSEHOLD</i>	1	.....	2]

- IORESATT* **S2.** [ASSESS THE RESPONDENT’S ATTITUDE TOWARD THE INTERVIEW. THE RESPONDENT WAS:

<i>FRIENDLY, INTERESTED</i>	1
<i>NOT PARTICULARLY INTERESTED</i>	2
<i>IMPATIENT, WORRIED</i>	3
<i>HOSTILE</i>	4]

- IORESUND* **S3.** [NOTE HOW THE RESPONDENT UNDERSTOOD THE QUESTIONS:

<i>WELL</i>	1
<i>NOT VERY WELL</i>	2
<i>POORLY</i>	3]

- IORESBEH* **S4.** [ASSESS THE RESPONDENT’S BEHAVIOR DURING THE INTERVIEW. THE RESPONDENT:

<i>WAS NERVOUS</i>	1
<i>WAS OCCASIONALLY NERVOUS</i>	2
<i>FELT COMFORTABLE</i>	3]

- IORESRES* **S5.** [ASSESS THE RESPONDENT’S SHARPNESS:

<i>VERY SLOW-WITTED</i>	1
<i>SLOW-WITTED, NEEDED EXPLANATIONS</i>	2
<i>AS BRIGHT AS THE MAJORITY OF RESPONDENTS</i>	3
<i>NOTABLY BRIGHTER THAN THE MAJORITY</i>	4]

- IORESSIN* **S6.** [ASSESS THE SINCERITY AND OPENNESS OF THE RESPONDENT. THE RESPONDENT WAS:

<i>VERY INTROVERTED, INSINCERE</i>	1
<i>AS SINCERE AND OPEN AS MOST RESPONDENTS</i>	2
<i>MORE SINCERE AND OPEN THAN MOST</i>	3]

- IOFDRELY* **S7.** [ASSESS WHETHER IN YOUR OPINION THE INFORMATION GIVEN ABOUT FOOD CONSUMPTION IS RELIABLE:

<i>RELIABLE</i>	1
<i>INFORMATION INADEQUATE TO ASSESS</i>	2
<i>NOT RELIABLE</i>	3]

I confirm that I completed the interview according to the instructions using the personal interview method, with the respondent chosen according to the instructions.

Signature _____