

SECTOR "GENERAL DATA / MIGRATION"

		Household member's ID							
		1	2	3	4	5	6	7	8
1	Put down RESPONDENT'S SEX	1 - male 2 - female							
2	Record RESPONDENT'S DATE OF BIRTH								
3	(Only for children under 16). Write ID of AN ADULT HOUSEHOLD MEMBER who answers the questions (from Family Card).								
4	Ask if Respondent lives permanently at this address or he/she does not live permanently because of work, training, etc.?	RECORD INTO CHILD'S SQUARE							
5	Tell me, please, have you (he/she) lived in any other locality elsewhere?	1. Permanently 2. Not permanently, but mainly here 3. Not permanently, mainly in other places							
6	Where were you born?	1 Yes 2 No, only here							
7	Tell me, please, were you born in a city, a township or selo (village, kishlak, aul)?	1. In the same locality where I live now, but in another locality. 2. In the same raion where I live now, but in another locality. 3. In another raion of the same oblast 4. In another oblast of Kazakhstan 5. In another republic of the USSR 6. In another country							
8	How old were you when departed from the locality you were born in?	1. City 2. Township 3. Selo, village, kishlak, aul							
9		Record into RESPONDENT'S SQUARE							

in question only for children

Household member's ID		1	2	3	4	5	6	7	8
9	Tell me, please, why you (he/she) left the native locality. Write only the main cause.	<p>1. Because of the family migration 2. Changed work, dispatched by employer or after higher educational institution training 3 Was looking for a job 4 Training 5. Marriage 6. Was called up 7 Poor environment 8 It became dangerous to live there (war, ethnic problems) 9. Other reasons</p>							
10	Did you arrive here or into another city, village, township or selo (village, kishlak, aul)?	9	10	11	12	13	14	15	16
11	How many places did you live at except those named by you (i.e. the place of birth and one of living)?	17	18	19	20	21	22	23	24
12	What year did you move here?	25	26	27	28	29	30	31	32
13	Why did you move here?	33	34	35	36	37	38	39	40
14	Your (his/her) propiska (where registered and live)	41	42	43	44	45	46	47	48

3

1. In the same locality where I live now
2. In the same raion where I live now but in another locality
3. In the same oblast but another raion
4. In another oblast of Kazakhstan
5. In another republic of the former USSR
6. In another country

1. In the same locality where I live now
2. In the same raion where I live now but in another locality
3. In the same oblast but another raion
4. In another oblast of Kazakhstan
5. In another republic of the former USSR
6. In another country

Household member's ID										
15	Are you going to move from here during the next year?	1 - Yes 2 - No 3 - May be	1	2	3	4	5	6	7	8
16	Where would you like to leave it for?	1. In another locality of the same raion where I live now 2. In the same oblast but another raion 3. In another oblast of Kazakhstan 4. In another republic of the former USSR 6. In another country	1	10	11	12	13	14	15	16
17	Why would you like to move?	1. Because of the family migration 2. Changed work, dispatched by employer or after higher educational institution training 3. Was looking for a job 4. Training 5. Marriage 6. Was called up 7. Poor environment 8. It became dangerous to live there (war, ethnic problems) 9. Hope for better life 10. Other reasons	17	18	19	20	21	22	23	24
18	17. What nationality, do you think, you belong to? I do not mean the nationality which is written in your passport.	RECORD THE ANSWER	25	26	27	28	29	30	31	32
19	What nationality is written in your passport?	RECORD THE ANSWER	33	34	35	36	37	38	39	40
20	What language do you (he/she), personally, speak at home?	RECORD THE ANSWER	41	42	43	44	45	46	47	48
21	Do you know Kazakh and Russian well enough to negotiate on the official level?	1 yes, both 2 no, Kazakh only 3 no, Russian only 4 neither	49	50	51	52	53	54	55	56
22	What language was mainly spoken by your parents when you were a child? FOR CHILDREN: What language is mainly spoken by his/her parents at home?	1 Kazakh 2 Russian 3 Another, SPECIFY ... RECORD THE ANSWER	57	58	59	60	61	62	63	64

'A' - questions only for adults

SECTOR "EDUCATION"

Household member's ID

B1 Now I would ask you a few questions about your education. How many forms did you finish at school?

B2 Did you get any other training except the school one?

B3 What training did you get? You graduated from...

INTERVIEWER! WRITE WHAT ACTUALLY WAS FINISHED, NOT GIVEN UP

B4 How many years were you training after school?

B5 Do you study currently? (parallel or not)

B6 Where do you study? What training will you get?

forms
(WRITE INTO RESPONDENT'S SQUARE)

1 yes
2 no

- Occupational course, e.g. in tractor driving, typing, accounting
- PTU, FSO without secondary school classes (2) (5) (4)
- PTU together with secondary school training, technical school (1)
- Technical, medical, music, pedagogical college school
- Institute, university, academy
- Post-graduate courses, internship

years
(WRITE INTO RESPONDENT'S SQUARE)

1 yes
2 no

- Occupational course, e.g. in tractor driving, typing, accounting
- PTU, FSO without secondary school classes
- PTU together with secondary school training, technical school
- Technical, medical, music, pedagogical college school
- Institute, university, academy
- Post-graduate courses, internship
- Upgrading training
- Retraining
- Secondary school

1

2

3

4

5

6

7

8

3

4

4

4

4

4

INTERVIEWER! GO BACK TO CARD IN PAGE 3/4 OF FAMILY QUESTIONNAIRE. IF RESPONDENT'S FATHER IS THE MEMBER OF THE HOUSEHOLD DON'T ASK QUESTIONS 7 and 8. GO TO QUESTION 9.

		Household member's ID									
		forms									
		(WRITE INTO RESPONDENT'S SQUARE)									
		0 no, did not									
		1. Occupational course, e.g. in tractor driving, typing, accounting									
		2. PTU, FSO without secondary school classes									
		3. PTU together with secondary school training, technical school									
		4. Technical, medical, music, pedagogical college school									
		5. Institute, university, academy									
		6. Post-graduate courses, internship									
7	Now I would ask you a few questions about education of your (his/her) parents. What education has your father got? How many forms did he finish at school?										
8	Did his/her father finish any educational institution except school? WRITE ONLY HIS HIGHEST QUALIFICATION										
INTERVIEWER! GO BACK TO CARD IN PAGE 4-5 OF FAMILY QUESTIONNAIRE. IF RESPONDENT'S MOTHER IS THE MEMBER OF THE HOUSEHOLD DON'T ASK QUESTIONS 9 and 10. PASS TO QUESTION 11.											
9	What education has your mother got? How many forms did she finish at school?										
10	Did his/her mother finish any educational institution except school? WRITE ONLY HER HIGHEST QUALIFICATION										
INTERVIEWER! ASK QUESTIONS 11 - 21 ONLY FOR SCHOOLCHILDREN. GO BACK TO CARD IN PAGE 4-5 OF THE FAMILY QUESTIONNAIRE AND CHECK THE DATE OF BIRTH OF THE CHILD YOU ARE TALKING ABOUT. ASK QUESTIONS 11 - 21 IF THE CHILD ASKED ABOUT IS NOT LESS THAN 6 YEARS OLD											
C11	Now I would ask you a few questions about education (CHILD'S NAME). Does he/she attend school currently?	to 14									

Household member's ID										
			1	2	3	4	5	6	7	8
C12	What kind of school does he/she attend Dd012 -	1 ordinary secondary school 2 lycee 3 gymnasium 4 another kind, SPECIFY ... form WRITE INTO CHILD'S SQUARE								
C13	What form? B d013 -	1 He/she will go at 7 2 He/she has already finished school 3 He/she has poor health and cannot attend school 4 He/she was dismissed 5 The family wants to educate him/her at home 6 No school close to home 7 It is very expensive 8 Other reasons	to 15							
C14	ASK THIS QUESTION ONLY ABOUT CHILDREN THAT DO NOT ATTEND SCHOOL, I.E. QUESTION 14 WAS ANSWERED "NO". ASK QUESTION 15 ABOUT SCHOOLCHILDREN Why does not he/she attend school? Choose the basic reason B d014 -	1 He/she will go at 7 2 He/she has already finished school 3 He/she has poor health and cannot attend school 4 He/she was dismissed 5 The family wants to educate him/her at home 6 No school close to home 7 It is very expensive 8 Other reasons	to 20 to 20 to 20 to 20 to 20 to 20 to 20 to 20							
C15	Recollect in your memory if he/she had to miss classes because of agricultural works during the last year the last year B d015 -	1 yes 2 no 3 he/she did not attend school the last year	to 17 to 17							
C16	How many days did he/she have to miss the last year because of agricultural works?	days								
C17	How much money did the family spend for his/her training at school, lycee, gymnasium during the last 30 days	WRITE INTO CHILD'S SQUARE tence								
C18	How much money did the family spend for the textbooks he/she studies during the last 30 days during the school?	WRITE INTO CHILD'S SQUARE, WRITE 0 IF A CHILD ATTENDS SCHOOL FREE OF CHARGE tence								
C19	How much money did the family spend for his/her way to school and back during the last 30 days	WRITE INTO CHILD'S SQUARE, PUT DOWN 0 IF A CHILD ATTENDS SCHOOL FREE OF CHARGE tence								
C20	Tell me, please, what kind of education would you like to give to CHILD'S NAME.	1 secondary school, then work 2 PTU, FSO without secondary school classes 3. PTU together with secondary school training, technical school 4. Technical, medical, music, pedagogical college school 5. Institute, university, academy								

5. College 7. Law, political sciences, economics

Dd017 -
Dd018 -
Dd019 -
Dd020 -

SECTOR "CHILDREN CARE"

Household member's ID		1	2	3	4	5	6	7
A1	Tell me, please, if does (CHILD'S NAME) need to be taken care of? <i>(If dependent on someone, put DOWN THE MAIN ANSWER)</i>							
A2	Who usually takes care of (CHILD'S NAME)? <i>IF THERE WERE A FEW PEOPLE, PUT DOWN THE MAIN ANSWER</i>							
A3	If nobody takes care of a child: Why does not anyone take care of (CHILD'S NAME)?							
A4	Tell me, please, if anybody took care of (CHILD'S NAME) during the last 7 days?							
A5	Why did not anybody take care of (CHILD'S NAME)?							
A6	How many days out of the last 7 did these people take care of him/her?							
A7	How many hours per day did it make in average?							
A8	Who owns the pre-school institution which he/she attends?							
A9	Tell me, please, how much did the household spend for the child care during the last 30 days?							

SECTOR "OCCUPATION"

INTERVIEWER, ASK THESE QUESTIONS ONLY ADULT MEMBERS OF THE HOUSEHOLD (16 AND OLDER) AND THE CHILDREN ANSWERED 2 (FINISHED SCHOOL) TO QUESTION 14 OF "EDUCATION" SECTION

Household member's ID		1	2	3	4	5	6	7	8	
1	1. Are you currently employed by an enterprise, organization, collective farm, state farm, cooperative?	1 yes 2 no 3 Paid leave for child care (up to 3 years) INTERVIEWER! IF RESPONDENT IS IN THE MATERNITY-LEAVE OR PAID LEAVE FOR CHILD CARE (UP TO 3 YEARS). MARK POSITION 1 AND PASS TO QUESTION 2.	1	2	3	4	5	6	7	8
2	2. Let us talk about your main occupation. If you work at a few places tell about the one regarded by you as primary. What are you? For e.g. smb tells "I am a foreman, junior salesman, operator assistant, welder of the IV degree qualification, chief accountant".	INTERVIEWER! RECORD DETAILED ANSWER OF RESPONDENT	9	10	11	12	13	14	15	16
3	3. Name your profession. Someone can tell about him/herself "By profession I am a milling-machine operator, a pediatricist, a civil-engineer." What are you by profession?	INTERVIEWER! RECORD DETAILED ANSWER OF RESPONDENT IF RESPONDENT HAS NO PROFESSION - RECORD 01	17	18	19	20	21	22	23	24
4	4. What are your main duties, what do you mainly do at work?	INTERVIEWER! RECORD DETAILED ANSWER OF RESPONDENT	25	26	27	28	29	30	31	32

1. 1 day
2. 1 day
3. 1 day
4. 1 day
5. 1 day
6. 1 day
7. 1 day
8. 1 day
9. 1 day
10. 1 day
11. 1 day
12. 1 day
13. 1 day
14. 1 day
15. 1 day
16. 1 day
17. 1 day
18. 1 day
19. 1 day
20. 1 day
21. 1 day
22. 1 day
23. 1 day
24. 1 day
25. 1 day
26. 1 day
27. 1 day
28. 1 day
29. 1 day
30. 1 day
31. 1 day
32. 1 day

4. a. Are you working in the same place you were working/studying?
1. Yes
2. No

4. a. Does your job correspond with your level of qualification?
1. Yes
2. No, unqualified
3. No, overqualified

Household member's ID											
	Where, for what enterprise do you work? What are its activities? For example: chemical enterprise, poultry farm, a music school for children, car repairing workshop...	INTERVIEWER RECORD DETAILED ANSWER OF RESPONDENT	1	2	3	4	5	6	7	8	
5	6. Who owns the enterprise?	1. The state. 2. An office, Department Administration. 3. A public organization 4. Municipality 5. Workers of the enterprise 6. Collective farm / state farm / another cooperative 7. Private owner, private company 8. A foreigner, a foreign company 9. A foreign company 10. Another, SPECIFY (SEE THE ANSWER)									
7	Do you have subordinates at the place you mainly work at?	1. Yes 2. No									
8	Are you the owner of the enterprise where you mainly work?	1. Yes 2. No									
9	Do you have shares or other securities of the enterprise you mainly work?	1. Yes 2. No									
10	Did you pay money to get the shares or securities? When (in what year) did you obtain these shares or other securities?	in _____ (the year) RECORD INTO RESPONDENT'S SQUARE									
11	Did you pay money to get these shares/securities?	1. Yes 2. No									
12	How much did you pay?	_____ (enge) RECORD INTO RESPONDENT'S SQUARE									
13	Did you borrow money to buy out the shares?	1. Yes 2. No									

Household member's ID		1	2	3	4	5	6	7	8
14	If you decide to sell these shares/ securities - how much would you get for them today?								
15	Do you think you will have shares and securities of this enterprise in future?								
16	Would you like to have the shares of the enterprise where you mainly work?								
17	Are you paid dividends at the enterprise where you mainly work								
18	How much were you paid as dividends during the last 12 months?								
19	What is your official salary at the main workplace?								
20	Tell me, please, if at the main work place you were paid any amount of money as salary, bonus, subsidy, allowance including payments in hard currency during the last 30 days?								
21	How much money were you paid (tell the sum after taxation) during the last 30 days at the main work place? If you were paid in hard currency re-calculate the money in tenge and tell the total amount.								
22	Did you work at the main workplace during the last 30 days?								
23	How many hours including extra-hours did you actually work at the main work place during the last 30 days?								

Household member's ID		1	2	3	4	5	6	7	8
24	Why did not you work at the main workplace during the last 30 days?	1 to 30	2 to 30	3 to 30	4 to 30	5 to 30	6 to 30	7 to 30	8 to 30
25	Did the administration make you take an unpaid leave during the last 30 days?	1 to 27	2 to 27	3 to 27	4 to 27	5 to 27	6 to 27	7 to 27	8 to 27
26	How many calendar days out of the last 30 ones did the unpaid vacation last?	1 to 30	2 to 30	3 to 30	4 to 30	5 to 30	6 to 30	7 to 30	8 to 30
27	How many hours including extra did you work at the main workplace during the last 7 days	1 to 30	2 to 30	3 to 30	4 to 30	5 to 30	6 to 30	7 to 30	8 to 30
28	Did you work at the main work place the same number of hours as usually, either less or more than usually during the last 7 days?	1 to 30	2 to 30	3 to 30	4 to 30	5 to 30	6 to 30	7 to 30	8 to 30
29	Why did you work less than usually? Choose only one reason out of those I'll enumerate you. INTERVIEWER! MARK ONLY ONE POSITION.	1 to 30	2 to 30	3 to 30	4 to 30	5 to 30	6 to 30	7 to 30	8 to 30
30	To what extend you are anxious to lose the jobplace? INTERVIEWER! IF RESPONDENT ALREADY GOT A NOTIFICATION ABOUT DISMISSAL FROM THE JOBPLACE, WRITE 6	1 to 30	2 to 30	3 to 30	4 to 30	5 to 30	6 to 30	7 to 30	8 to 30
31	Imagine an unpleasant situation - tomorrow the enterprise you work for would be closed and all employees discharged. To what extend you are sure that you could find work not worse the one you have currently?	1 to 30	2 to 30	3 to 30	4 to 30	5 to 30	6 to 30	7 to 30	8 to 30
32	Have you got any retraining to obtain a new occupation or find a new job during the last 4 yrs	1 to 30	2 to 30	3 to 30	4 to 30	5 to 30	6 to 30	7 to 30	8 to 30

Household member's ID		1	2	3	4	5	6	7	8
33	To what extent you are ready to be retrained in order to get a new profession and find another job place?	1	2	3	4	5	6	7	8
	1. Completely ready 2. Ready 3. Yes and no 4. Not much ready 5. Not ready at all	10 35 10 35							
34	Tell me, please, what specialty you would like to be retrained in?	9	10	11	12	13	14	15	16
	In <u>RECORD INTO RESPONDENT'S SQUARE</u> 2 Any option								
35	Tell me, please, if you work additionally for another organization where you are also paid.	17	18	19	20	21	22	23	24
	1 yes 2 no	10 4 1							
36	For how many enterprises, organizations do you work in addition to the main job place?	25	26	27	28	29	30	31	32
	Who owns the enterprise?								
37	INTERVIEWER! IF RESPONDENT WORKS FOR SEVERAL ENTERPRISES ASK HIM QUESTIONS 31b AND 31c.	a	b	c	a	b	c	a	b
	1. State 2. Office 3. Public organization 4. Municipality 5. Workers of the enterprise 6. Collective farm/ state farm/ 7. Another cooperative 8. Private owner, private company 9. A foreigner/ foreign company 10. Other specify WRITE THE ANSWER	3 3 3 4	3 3 3 5	3 3 3 6	3 3 3 4	3 3 3 5	3 3 3 6	3 3 3 4	3 3 3 5
38	How much money after taxation were you paid during the last 30 days at the additional job place? If you were paid not in tenge, recalculate another currency payment into tenge and tell the total amount of payment.	37	38	39	40	41	42	43	44
	<u>10000</u> / <u>10</u> <u>RECORD INTO RESPONDENT'S SQUARE</u> Write the value in tenge. and then the currency entered in-kind								
39	Did you get any subsidy from your enterprise during the last 30 days, i.e. were you paid for the expense of children care at preschool institutions, for medical service, housing, transportation, etc.?	45	46	47	48	49	50	51	52
	1. Yes 2. No	10 4 1							

(3) conclusions, children's disability, etc.

		Household member's ID									
		1	2	3	4	5	6	7	8		
40	How much of your householding expenses were reimbursed by your enterprise?	<div> <div>large</div> <div>RECORD INTO RESPONDENT'S SQUARE</div> </div>									
41	Now I would like to ask you a few questions about business activities. I would like to clear up if you have your own business regardless its official registration. Do you run your own business? May be you produce devices, tools, clothes, footwear, sell food products, provide medical services, conduct classes, work as a hair-dresser or shoe-maker.	<div> <div>1 Yes</div> <div>2 No</div> <div>to 90</div> </div>									
42	Do your activities deal with production of goods?	<div> <div>1 Yes</div> <div>2 No</div> <div>to 53</div> </div>									
43	What do you produce? Enumerate main items that you produce.	<div> <div>INTERVIEWER! PUT DOWN IN DETAIL EVERYTHING RESPONDENT SAYS.</div> </div>									
44	Would you tell how long ago (how many months) you have your own business or you are the owner or shareholder of an enterprise, firm, cooperative, farm?	<div> <div>months</div> <div>RECORD INTO RESPONDENT'S SQUARE</div> </div>									
45	Does anybody else own Your business(enterprise, firm, cooperative, farm)?	<div> <div>1 Yes</div> <div>2 No</div> <div>to 47</div> </div>									
46	Tell me, please, who else owns the business (enterprise, firm, cooperative, farm) except you? INTERVIEWER! RECORD THE ANSWER IN "a" COLUMN. IF RESPONDENT GIVES A FEW ANSWERS, WRITE THEM in 4/4	<div> <div>1. Other household members</div> <div>2. Other people, not household members</div> <div>3. Private organizations</div> <div>4. State, public organizations</div> <div>5. Foreign partners</div> <div>to 48</div> <div>to 48</div> <div>to 48</div> <div>to 48</div> </div>									

Household member's ID		1	2	3	4	5	6	7	8
47	Who else among your household members owns the business(enterprise, firm, cooperative, farm)?								
48	Tell me, please, if you (your enterprise) produced any production during the last 30 days?								
49	At what amount of money during the last 30 days did you (your enterprise) produce production?								
50	Did the production need any material costs: raw materials, fuel, seeds, etc. during the last 30 days?								
51	Would you, please, estimate the costs roughly in tenge?								
52	How many months out of the last 12 months were you producing goods?								
53	Tell me, please, if you trade, i.e. purchase and sell any goods including products made at your enterprise, if you produce any?								
54	What do you sell? Enumerate primary goods produced by your or not your enterprise?								
55	Recollect in your memory how long ago (months) you have your own business or share ownership of an enterprise, company, shop, cooperative dealing with trade?								
56	Tell me, please, if your trade (an enterprise, company, shop, cooperative) belongs to anybody else except you?								

Household member's ID		1	2	3	4	5	6	7	8
57	Detailize, please, who else owns the business (enterprise, firm, cooperative, farm)? INTERVIEWER! RECORD THE ANSWER IN "a" COLUMN. IF RESPONDENT GIVES A FEW ANSWERS, WRITE THEM IN ALL	10 59	10 59	10 59	10 59	10 59	10 59	10 59	10 59
58	Who else among the household members owns the business, enterprise, firm, cooperative, farm?	10 61	10 61	10 61	10 61	10 61	10 61	10 61	10 61
59	Do you purchase goods abroad?	10 63	10 63	10 63	10 63	10 63	10 63	10 63	10 63
60	In what country or countries do you purchase goods for selling? INTERVIEWER! WRITE IN DETAIL EVERYTHING SAID BY RESPONDENT	10 65	10 65	10 65	10 65	10 65	10 65	10 65	10 65
61	Tell me, please, if during the last 30 days you (your enterprise:) sold any goods?	10 67	10 67	10 67	10 67	10 67	10 67	10 67	10 67
62	At what amount of money did you sell goods during the last 30 days?	10 69	10 69	10 69	10 69	10 69	10 69	10 69	10 69
63	Did you (your enterprise) purchase any goods during the last 30 days?	10 71	10 71	10 71	10 71	10 71	10 71	10 71	10 71
64	At what amount of money did you purchase goods?	10 73	10 73	10 73	10 73	10 73	10 73	10 73	10 73
65	Did your trade business need any material costs due to transportation, storage and alike during the last 30 days?	10 75	10 75	10 75	10 75	10 75	10 75	10 75	10 75
66	Estimate the expenses in tenge	10 77	10 77	10 77	10 77	10 77	10 77	10 77	10 77
67	How many months out of the last 12 did you trade?	10 79	10 79	10 79	10 79	10 79	10 79	10 79	10 79

sent for discussion of answer

Household member's ID		1	2	3	4	5	6	7	8	
68	Does your business deal with providing services to the population or entities? For e.g.: you transport, repair, may be you have your own cafe, laundry? or you consult, cure etc.?	1 Yes 2 No	1 to 79	2	3	4	5	6	7	8
69	What kinds of services you provide?	INTERVIEWER! PUT DOWN IN DETAIL EVERYTHING RESPONDENT SAYS								
70	Recollect in your memory how long ago (months) have you established your own business or shared the ownership of an enterprise, company, cooperative providing services?	RECORD INTO RESPONDENT'S SQUARE								
71	Does your enterprise, firm, cooperative belong to anybody else?	1 Yes 2 No	17 to 74	18	19	20	21	22	23	24
72	a) Detailize, please, who else owns the business enterprise, firm, cooperative? INTERVIEWER! RECORD THE ANSWER IN "a" COLUMN. IF RESPONDENT GIVES A FEW ANSWERS, WRITE THEM in 4/a	1. Other household members 2. Other people, not household members 3. Private organizations 4. State, public organizations 5. Foreign partners								
73	Who else among the household members owns the business, enterprise, firm, cooperative, farm?	RECORD CORRESPONDING ID INTO RESPONDENT'S SQUARE								
74	Did you provide services during the last 30 days?	1 Yes 2 No	57 to 78	58	59	60	61	62	63	67
75	What amount of money did you earn providing services	RECORD INTO RESPONDENT'S SQUARE								

Household member's ID		1	2	3	4	5	6	7	8
76	Did providing services need material expenditures food, fuel, spares, rent for premises, etc. during the last 30 days?	1 Yes 2 No	10 78						
77	Estimate expenditures in tenge?								
78	How many months out of the last 12 did you provide services?								
79	If to sell your enterprise: equipment, raw materials, buildings, plot, left goods = how much would you get as your personal share?								
80	What percentage does it make out of the total cost of the enterprise?								
81	Did you gain anything due to your business activities (excluding wage) during the last 30 days?								
82	How much did you gain personally due to your business activities during the last 30 days? If you got it partly in another currency convert your profit into tenge. If you gained it in kind then also estimate it in tenge and give the total amount.								
83	Does any household member work for your enterprise regardless payment?								
84	Name the household members assisting you in your business								

Household member's ID		1	2	3	4	5	6	7	8
85	Do anybody else, not household members, work for your enterprise or take part in your business?	1 Yes 2 No	1	2	3	4	5	6	7
86	How many people, not household members, are engaged by your enterprise?	1 Yes 2 No	9	10	11	12	13	14	15
87	How much did you pay all of them as salary, bonus, subsidy, etc. during the last 30 days?	1 Yes 2 No	17	18	19	20	21	22	23
88	Tell me, please, if you get a salary from your business regardless profit?	1 Yes 2 No	25	26	27	28	29	30	31
89	How much were you paid as a salary during the last 30 days?	1 Yes 2 No	33	34	35	36	37	38	39
90	Tell me, please, did you do anything during the last 30 days that you have not told yet but were paid for it? May be you sewed a dress, gave a lift by your car, assisted in house or car repairing, bought and transported food, looked after a sick person or did anything else and were paid for it?	1 Yes 2 No	41	42	43	44	45	46	47
91	How much money during the last 30 days did you earn by such a job? If you were paid in kind, estimate earnings in tenge	1 Yes 2 No	49	50	51	52	53	54	55
92	Please, tell if it was an occasional earning or you often earn money this way and regularly paid for it?	1 Occasional earning 2 Regular earning	57	58	59	60	61	62	63

Household member's ID									
		1	2	3	4	5	6	7	8
93	How much money did you get during the last 30 days including salary, bonus, profit, pension, allowance, occasional earnings and other money income (including in hard currency, but convert the latter into tenge)?	1	2	3	4	5	6	7	8
94	And now a few questions about other things. Do you think you and your family would live better or worse than now after 12 months?								
95	Imagine a staircase of 9 stairs: at the first lowest stair there are the poor, at the 9-th stair - the rich. Where are you personally?	9	10	11	12	13	14	15	16
96	To what extent you are satisfied with you current life?	17	18	19	20	21	22	23	24
97	To what extent you worry that you would not be able to provide your family with the most necessary things during the nearest 12 months?	25	26	27	28	29	30	31	32
98	May be you've heard that the pension age is going to be increased. What is your opinion?	33	34	35	36	37	38	39	40
99	Do you get your pension currently?	41	42	43	44	45	46	47	48
		49	50	51	52	53	54	55	56

1. Pension is not increased in my family

Household member's ID		1	2	3	4	5	6	7	8
100	What kind of pension do you get?	1. Superannuation pension 2. Disability pension 3. Survivor's pension 4. Retirement pension 5. Pension for mothers who have given birth to 5-10 children.							
101	Were you paid your pension during the last 30 days?	1. Yes 2. No							
102	How much money were paid as pension during the last 30 days?	1. 1-10 2. 11-20 3. 21-30 4. 31-40 5. 41-50 6. 51-60 7. 61-70 8. 71-80 9. 81-90 10. 91-100 11. 101-110 12. 111-120 13. 121-130 14. 131-140 15. 141-150 16. 151-160 17. 161-170 18. 171-180 19. 181-190 20. 191-200 21. 201-210 22. 211-220 23. 221-230 24. 231-240 25. 241-250 26. 251-260 27. 261-270 28. 271-280 29. 281-290 30. 291-300 31. 301-310 32. 311-320 33. 321-330 34. 331-340 35. 341-350 36. 351-360 37. 361-370 38. 371-380 39. 381-390 40. 391-400 41. 401-410 42. 411-420 43. 421-430 44. 431-440 45. 441-450 46. 451-460 47. 461-470 48. 471-480 49. 481-490 50. 491-500 51. 501-510 52. 511-520 53. 521-530 54. 531-540 55. 541-550 56. 551-560 57. 561-570 58. 571-580 59. 581-590 60. 591-600 61. 601-610 62. 611-620 63. 621-630 64. 631-640 65. 641-650 66. 651-660 67. 661-670 68. 671-680 69. 681-690 70. 691-700 71. 701-710 72. 711-720 73. 721-730 74. 731-740 75. 741-750 76. 751-760 77. 761-770 78. 771-780 79. 781-790 80. 791-800 81. 801-810 82. 811-820 83. 821-830 84. 831-840 85. 841-850 86. 851-860 87. 861-870 88. 871-880 89. 881-890 90. 891-900 91. 901-910 92. 911-920 93. 921-930 94. 931-940 95. 941-950 96. 951-960 97. 961-970 98. 971-980 99. 981-990 100. 991-1000							
103	INTERVIEWER! ASK QUESTION 103 ONLY THOSE WHO ANSWERED QUESTION 1 OR 34 (i.e. THOSE WHO WORK OR HAVE OWN BUSINESS). If you are paid pension why do you work?	1. I've got used to work 2. I need money- pension is not enough for living 3. I am needed as a specialist 4. To support children (relatives) 5. Other reasons							
104	INTERVIEWER! CHECK YOURSELF! GO BACK TO QUESTION 1 IN PAGE 6 AND HAVE A LOOK AT WHAT RESPONDENT SAID ABOUT HIS CURRENT WORK. MAKE A CORRESPONDING REMARK	1. RESPONDENT WORKS FOR AN ENTERPRISE, ORGANISATION 2. RESPONDENT DOES NOT WORK FOR AN ENTERPRISE, ORGANISATION							
105	Why don't you work for an enterprise, organization? Choose not more than 3 reasons out of those I'll enumerate	1. Health status 2. Pension 3. Training 4. No wish to work at your own request 5. Staff reduction 6. Mass layoff, restructuring of enterprise 7. Change of work 8. Look after family members, children 9. No work after school 10. No work after university, college, PTU 11. No work after military service 12. No work after imprisonment 13. Other reasons							
106	Have you ever worked for an enterprise, organization, collective farm, state farm?	1. Yes 2. No							

Household member's ID		1	2	3	4	5	6	7	8
107	What is your joint length of service?								
108	Tell me, please, when did you leave your last jobplace for an enterprise, organization?								
109	Recollect in your memory, please, how many months out of the last 12 you worked for an enterprise or organization where you were paid?								
110	How many times during the last 12 months, when you were jobless, you were hired by an enterprise or organization?								
111	Would you like to find a job?								
112	Did you apply to any place for a job during the last 30 days?								
113	Where did you apply for work?								
	Did you apply to:								
	1 State Employment Centres								
	2 Non-state employment centres								
	3 Friends, acquaintances								
	4 Relatives								
	5 Directly to enterprises								
	6 Advertisements								
114	What kind of work you like to have? INTERVIEWER! LET RESPONDENT ANSWER BY HIMSELF								
	1 Any, just to work								
	2 Professional work								
	3 Well-paid, regardless the position								
	4 Close to home								
	5 Part-time work								
	6 Flexible schedule								
	7 Home work								
	8 At enterprise that provides with social assets for kids								
	9 Other reasons, specify								

Household member's ID		1	2	3	4	5	6	7	8
115	To what extent you are ready to acquire a new profession and find a job?	1. Completely ready 2. Ready 3. Yes and no 4. Not much 5. Not at all							
116	Are you registered by a state employment center as an unemployed person?	1 Yes 2 No							
117	Why aren't you registered as unemployed? I'll enumerate possible reasons, and you should choose only one reason, the main one	1 Don't know how to do it 2 Don't want to do it 3 Don't rely on the Centres 4 The time expired 5 Refused to work at the suggested workplaces 6 Refused to change your specialty 7 Refused to be retrained to get a new specialty 8 Other reasons							
118	How many days ago were you registered by a state employment service?	days RECORD INTO RESPONDENT'S SQUARE							
119	What were you offered at a state employment centre? You were offered.....	a Work at your profession b Work at another profession c Retraining for another profession d Else							
120	Are you paid an unemployment benefit?	1 Yes 2 No							
121	How much money were you paid as an unemployment benefit during the last 30 days?	length RECORD INTO RESPONDENT'S SQUARE							
122	Why don't you get an unemployment benefit? I'll read you various reasons. Please, choose only one reason, the main one:	1. You do not have the right on it 2. 10 days have not passed yet. 3. You are paid by your former employer 4. Paid scholarship 5. Dismissed by your wish 6. Dismissed for bad behaviour 7. Refused a job suggested by a employment centre 8. Other reasons							

		Household member's ID									
		1	2	3	4	5	6	7	8		
123	Now, think please, about your <u>main earnings</u> Do you get earnings regularly (monthly, weekly), i.e. you actually rely on them?	1 Regularly 2 More or less regularly 3 It depends 4 Occasionally 5 Don't get <u>tenge</u> RECORD INTO RESPONDENT'S SQUARE									
124	How much money did you get during the last 30 days including salary, bonus, profit, pension, allowance, occasional earnings and other money income (including in hard currency, but convert the latter into tenge)?										
125	And, finishing this part of our talk, have a look at this list. Read it attentively and say what answer describes better than the others your main occupation. We ask you to choose one answer. INTERVIEWER! SHOW THE LIST OF POSSIBLE ANSWERS ON QUESTION 125 TO RESPONDENT	1. Schoolboy/girl of secondary school, PTU 2. Student of university or college 3. Disabled, does not work because of health problems. 4. Pensioner and does not work 5. In the official maternity leave, the employer insures the same job place 6. Housewife, looking after family members (children) 7. Temporary doesn't work due to other reasons, looking for a job 8. Temporary doesn't work due to other reasons and does not want to work 9. Self-employment 10 Farmer 11 Businessman 12 Work for enterprise, organization, collect farm, state farm, cooperative 13 Other reasons, SPECIFY _____ WRITE THE ANSWER									

"MEDICAL SERVICE" SECTOR

Household member's ID		1	2	3	4	5	6	7	8
1	Tell me, please, if you had any health problems during the last 30 days?	Yes	No	to 21					
2	What are they?	<p>1 Caught cold</p> <p>2 Ear/nose/throat diseases</p> <p>3 Intestine diseases</p> <p>4 Cordial attacks</p> <p>5 Injuries</p> <p>6 Skin diseases</p> <p>7 Acute stage of lingering diseases (cancer, diabetes, rheumatism, etc.)</p> <p>8 Specific diseases</p> <p>9 Other</p> <p>10 Doctor at polyclinics</p> <p>11 Doctor at hospital</p> <p>12 Private doctors</p> <p>13 Dentist</p> <p>14 Obstetrician</p> <p>15 Doctor's assistant</p> <p>16 Sick-nurse</p> <p>17 Another specialist</p> <p>18 (RECORD THE ANSWER)</p> <p>19 Did not apply to</p> <p>20 to 10</p>							
3	Did you apply to medical institutions or doctors to solve the health problems you had during the last 30 days?	<p>1 Doctor at polyclinics</p> <p>2 Doctor at hospital</p> <p>3 Private doctors</p> <p>4 Dentist</p> <p>5 Obstetrician</p> <p>6 Doctor's assistant</p> <p>7 Sick-nurse</p> <p>8 Another specialist</p> <p>9 (RECORD THE ANSWER)</p> <p>10 Did not apply to</p>							
4	Let us talk about you last meeting with a doctor during the last 30 days. Did you call a doctor home or go there by yourself?	<p>1. Went</p> <p>2. Called</p> <p>Σ - 004 -</p>							
5	Now much time did you spend to the way there and back?	<p>FIX THE ANSWER IN MINUTES</p> <p>minutes</p> <p>RECORD INTO RESPONDENT'S SQUARE</p> <p>Σ - 005 -</p>							
6	How much money did you spend for transport there and back?	<p>Σ - 006 -</p> <p>RECORD INTO RESPONDENT'S SQUARE</p>							
7	How much time did you spend queuing a doctor?	<p>minutes</p> <p>Σ - 007 -</p> <p>RECORD INTO RESPONDENT'S SQUARE</p>							
PUT DOWN THE ANSWER IN MINUTES									

Household member's ID		1	2	3	4	5	6	7	8		
8	Did you pay for that visit to a doctor?	1 Yes 2 No	10	1	2	3	4	5	6	7	8
9	How much did you pay to a doctor for that visit?	_____ tenge £ - 009 - X (PAID IN KIND CONVERT INTO TENGE AND RECORD AS IS _____ tenge) £ - 009 - Y									
10	In addition to the visit did you have any additional examination or medical procedures?	1 Yes 2 No	10	17	18	19	20	21	22	23	24
11	Did you also pay for the examination and procedures?	_____ tenge £ - 010 - _____									
12	How much did you pay in addition?	1 Yes 2 No	10	25	26	27	28	29	30	31	32
13	Were you (he/she) hospitalized during the last 30 days? (last 30 days)	_____ tenge £ - 012 - X (PAID IN KIND CONVERT INTO TENGE AND RECORD AS IS _____ tenge) £ - 012 - Y									
14	How many days out of the last 30 did you spend at hospital?	1 Yes 2 No	10	41	42	43	44	45	46	47	48
15	Did you pay for staying there, for medical services, treatment?	_____ days £ - 014 - _____ RECORD INTO RESPONDENT'S SQUARE									
16	How much did you pay during the last 30 days for treatment and services at hospital? Include money spent for treatment, medicine, services	1 Yes 2 No	10	57	58	59	60	61	62	63	64
17	When you were sick, were you prescribed medicine that you failed to buy?	_____ tenge £ - 015 - _____ (PAID IN KIND CONVERT INTO TENGE AND RECORD AS IS _____ tenge) £ - 016 - Y									
18	How much did you pay for your (his/her) drugs during the last 30 days?	1 Yes 2 No	10	73	74	75	76	77	78	79	80
19	How much did you pay for your (his/her) drugs during the last 30 days?	_____ tenge £ - 017 - _____ (PAID IN KIND CONVERT INTO TENGE AND RECORD AS IS _____ tenge) £ - 018 - X									
20	How much did you pay for your (his/her) drugs during the last 30 days?	_____ tenge £ - 019 - _____ (PAID IN KIND CONVERT INTO TENGE AND RECORD AS IS _____ tenge) £ - 020 - Y									

		Household member's ID							
		1	2	3	4	5	6	7	8
19	Were you prescribed any medicine that you did not buy when you were sick?	1 Yes 2 No		E-015-					
20	Why did not buy the medicine prescribed? I'll enumerate the reasons, choose only one answer.	1. Failed to find medicine at drug-stores 2. Had not enough money 3. No wish to buy 4. Other reasons		E-020-					
21	Please, tell if you during the last 30 days visited medical institutions or just a specialist not because of your (his/her) sickness but to get disease-prevention examination (except pregnancy cases)?	1 Yes 2 No		E-021-					
22	Who examined you? IF THERE WERE A FEW SPECIALISTS PUT DOWN THE HIGHEST IN THE RANGE	1. Doctor 2. Dentist 3 Doctor's assistant 4 Obstetrician 5. Sick-nurse 6 Another specialist, SPECIFY (WRITE THE ANSWER)		E-022-					
23	Did you pay for disease-prevention examination you had during the visit there?	1 Yes 2 No		E-023-					
24	How much did you pay for disease-prevention examination you had during the visit there?	(PAID IN KIND CONVERT INTO TENCE AND RECORD AS IS)		E-024-y					
25	Did you (he/she) miss any working days because of sickness during the last 30 days?	1 Yes 2 No		C-025-					
26	How many days did you (he/she) miss because of sickness during the last 30 days?	days		E-026-					

QUESTIONS D27 -D37 ARE FOR CHILDREN ONLY. ADULTS ARE ASKS QUESTIONS OF THE NEXT SECTION

D27	Tell me, please, if he/she has ever been vaccinated?	1 Yes 2 No	E-027-	65	66	67	68	69	70	71	72
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2 Lines X

inoculation

			Household member's ID#											
			1	2	3	4	5	6	7	8				
D28	What kind of inoculations he/she has had? Has he/she been injected against..... <i>Measles</i> <i>Interviewer: Write each one in the corresponding square of the table. Interviewer: When you are done, write down the names of the diseases under D28A.</i>	<input type="checkbox"/> TBC <input type="checkbox"/> Measles <input type="checkbox"/> AKDC1 - diphtheria, whooping cough, tetanus <input type="checkbox"/> AKDC2 - diphtheria, whooping cough, tetanus <input type="checkbox"/> AKDC3 - diphtheria, whooping cough, tetanus <input type="checkbox"/> Polio <input type="checkbox"/> Polio <input type="checkbox"/> Polio <input type="checkbox"/> Hepatitis <input type="checkbox"/> Mumps <input type="checkbox"/> Other diseases	ed028											
D29	Was he/she vaccinated during the last 3 months?	<input type="checkbox"/> Yes <input type="checkbox"/> No	ed029											
D30	He/she was vaccinated against ... INTERVIEWER! READ EACH LINE AND PUT DOWN THE ANSWER INTO THE CORRESPONDING SQUARE OF THE TABLE	<input type="checkbox"/> TBC <input type="checkbox"/> Measles <input type="checkbox"/> AKDC1 - diphtheria, whooping cough, tetanus <input type="checkbox"/> AKDC2 - diphtheria, whooping cough, tetanus <input type="checkbox"/> AKDC3 - diphtheria, whooping cough, tetanus <input type="checkbox"/> Polio <input type="checkbox"/> Polio <input type="checkbox"/> Polio <input type="checkbox"/> Hepatitis <input type="checkbox"/> Mumps <input type="checkbox"/> Other diseases	ed030											
D31	Where was he/she vaccinated? I'll read possible places, choose only one of them	<input type="checkbox"/> 1. in polyclinics <input type="checkbox"/> 2. at hospital <input type="checkbox"/> 3. in polyclinics for children, maternity hospital <input type="checkbox"/> 4. by a private doctor <input type="checkbox"/> 5. at school <input type="checkbox"/> 6. in kindergarten, nursery school <input type="checkbox"/> 7. other places												
D32	Did you pay for her inoculation?	<input type="checkbox"/> Yes <input type="checkbox"/> No												
D33	How much did you pay?	<input type="checkbox"/> tenge (PAID IN KIND CONVERT INTO TENGE AND RECORD AS II tenge)												

Interviewer: 3 people were vaccinated (measles, polio, tetanus)

Household member's ID		1	2	3	4	5	6	7	8	
D34	Did you fail to vaccinate her against any other disease?	1 Yes 2 No	1	2	3	4	5	6	7	8
D35	Why was not he/she vaccinated? Choose only one reason out of what I'll read you:	1. Too expensive 2. No transport to go that place 3. Afraid to catch infection 4. No medicine for infection 5. No time to be vaccinated 6. Other reasons, specify WRITE THE ANSWER	9	10	11	12	13	14	15	16
D36	Did he/she take part in necessary disease-prevention examinations?	1. Yes, in all 2. Yes, in next to all 3. Yes, in some 4. Not a single examinations C.P. C.P.	17	18	19	20	21	22	23	24
D37	Why did not take part? Choose only one reason	1. No transport to go to the place where people are vaccinated 2. Did not realize that it's needed 3. Did not know where the exams take place 4. No time to have inoculation 5. Other, specify WRITE THE ANSWER	25	26	27	28	29	30	31	32

HEALTH EVALUATION " SECTOR

Household member's ID		1	2	3	4	5	6	7	8	
1	Let's talk about health. We shall have to take some medical measurements. But before it I would like to ask about your height and weight. What is your weight?	_____ kilos	1	2	3	4	5	6	7	8
2	What is your height in sm?	_____ sm	9	10	11	12	13	14	15	16
3	Now let us talk about your (his/her) health. How do you think are you healthy? He/she has:	1. Very good health 2. Good health 3. Neither good, no bad health 4. Bad health 5. Very bad health	17	18	19	20	21	22	23	24
B4	ONLY FOR GROWN-UPS Evaluate how does your health effect your everyday activities?	1. Does not effect at all 2. Practically does not 3. A bit 4. Effects very much 5. Does not allow to work, to be engaged in everyday activities.	25	26	27	28	29	30	31	32
INTERVIEWER! GO BACK TO pp.3-4 OF THE FAMILY QUESTIONNAIRE, QUESTIONS 5-11 ARE ASKED ONLY THE RESPONDENTS BORN IN 1940 OR EARLIER. THE OTHERS ARE ASKED QUESTION 12. IF IT IS OBVIOUS THAT RESPONDENT IS ABLE TO DWELL WITHOUT ASSISTANCE, PASS TO QUESTION 12.										
B5	Do you need any assistance in putting your clothes on, having food or shopping?	1 Yes 2 No	33	34	35	36	37	38	39	40
B6	GO BACK TO pp.3-4 OF THE FAMILY QUESTIONNAIRE IF RESPONDENT LIVES ALONE. DO NOT ASK QUESTIONS 6 and 7. GO TO 8 Does any household member help you?	1 Yes 2 No	41	42	43	44	45	46	47	48

		Household member's ID									
		1	2	3	4	5	6	7	8		
B7	Who helps you among the household members?	<p>HAVE A LOOK IN THE CARD (pp3-4) OF FAMILY QUESTIONNAIRE FOR THE IDs OF HOUSEHOLD MEMBERS. WRITE DOWN NO MORE THAN 3 HOUSEHOLD MEMBERS NAMED BY RESPONDENT INTO a, b, c.</p>									
B8	Does anybody, not a household member, assist you?	<p>1 Yes <u>FW 003 -</u> 2 No <u>10 12</u></p>									
B9	Who are they? They are... READ EACH LINE TO RESPONDENT AND CIRCLE THE ANSWER IN THE CORRESPONDING SQUARE	<p>a Children, grandchildren, other relatives b Neighbours, friends, colleagues c State workers of social protection organizations d Staff of service agencies e Others</p>									
B10	Do you pay for assistance which you get to put on clothes or to eat?	<p>1 Yes <u>FW 00</u> 2 No <u>10 12</u></p>									
B11	How much do you pay for such assistance during the last 30 days? If you paid in kind, convert the amount into tenge.	<p><u>FW 011 - X</u> tenge <u>FW 011 - 3</u> tenge</p>									
INTERVIEWER! QUESTIONS 12 TO 17 ARE FOR BOTH: GROWN-UPS AND CHILDREN											
12	Do you (he/she) suffer chronic diseases?	<p>1 Yes <u>FW 012 -</u> 2 No <u>10 18</u></p>									
13	Which diseases?	<p>1 Ear/eye/nose diseases 2 Intestine diseases 3 Cordial attacks <u>cardiovascular diseases</u> 4 Injuries <u>injuries</u> 5 Skin diseases <u>our family diseases</u> 6 Bone diseases 7 Cancer 8 Diabetes 9 Rheumatism 10 Specific diseases 11 Other. Specify <u>WRITE THE ANSWER</u></p>									
14	Do you (he/she) due to the GIVEN DISEASE regularly need any medicine?	<p>1 No <u>FW 014 -</u> 2 Yes <u>10 18</u></p>									

Household member's ID		1	2	3	4	5	6	7	8
15	How much money did you spend to buy out/ repair your-(his/her) medical devices-during the last 12 months?	<p>1015-X RECORD IN RESPONDENT'S SQUARE</p>							
16	Do you (he/she) need any medicine that fail to obtain?	<p>1018 1 Yes 2 No</p>							
17	Why do you fail to obtain them?	<p>1018 1 They are not sold 2 Very expensive 3 No time to take care of myself 4 Do not like to be cured</p>							
18	Do you use any medical devices (glasses, contact lenses, acoustic device, prosthetic appliances, etc.)? CIRCLE THE ANSWER IN THE GIVEN SQUARE	<p>1018 a. Yes, glasses (contact lenses) b. Yes, an acoustic device c. Yes, prosthetic appliances d. Yes, other</p>							
19	How much money did you spend to obtain/ repair your (his/her) medical devices?	<p>1019-X RECORD IN RESPONDENT'S SQUARE</p>							
20	Do you need any medical devices (glasses, contact lenses, acoustic device, prosthetic appliances, etc.) that fail to obtain them?	<p>1022 1 Yes 2 No</p>							
21	Why cannot you obtain them?	<p>1022 1 doctor does not prescribe 2 they are not sold 3 very expensive</p>							
INTERVIEWER! QUESTIONS B22-B29 ARE ONLY FOR ADULTS									
B22	Do you smoke currently?	<p>1027 1 Yes 2 No</p>							
B23	When have you started smoking? How old were you at that time?	<p>1027 1027 years old RECORD IN RESPONDENT'S SQUARE</p>							
B24	What do you mainly smoke? I'll enumerate various kinds of tobacco and you tell me what you smoke most of all.	<p>1027 1. Cheap cigarettes (per pack) 2. Cigarettes with filter 3. Cigarettes without filter 4. Hand-rolls 5. Tobacco-pipe</p>							
B25	How many cigarettes (number) do you usually smoke per day?	<p>1026 26 RECORD IN RESPONDENT'S SQUARE</p>							

Household member's ID		1	2	3	4	5	6	7	8
B26	QUESTION B22 IS ASKED THE RESPONDENTS WHO ANSWERED THAT SMOKE A PIPE. THE REST SMOKERS ARE ASKED QUESTION B23 HOW MANY GRAMS OF TOBACCO DO YOU SMOKE PER DAY?								
B27	Did you drink alcohol during the last 30 days?								
B28	How often did you drink strong drinks during the last 30 days?								
B29	I shall name various alcoholic drinks and you tell how many grams you usually drank per day during the last 30 days: in grams								
	Beer								
	Dry wine, champagne								
	Wine with high volume of alcohol								
	Moonshine								
	Vodka and other strong drinks								
	Others								

INTERVIEWER! QUESTIONS D30-D43 ARE ONLY FOR CHILDREN

p30	Please, tell if during the last 7 days (he/she) was coughing?	1. Yes	2. No					

		Household member's ID									
		1	2	3	4	5	6	7	8		
D31	Please, tell if during the last 7 days (he/she) had rhinitis?	1. Yes 2. No									
D32	Please, tell if during the last 7 days (his/her) ears were aching?	1. Yes 2. No									
D33	Please, tell if during the last 7 days (he/she) had throatache?	1. Yes 2. No									
D34	Tell if during the last 7 days (he/she) had headache?	1. Yes 2. No									
D35	Please, tell if during the last 7 days (he/she) had temperature?	1. Yes 2. No									
D36	Please, tell if during the last 7 days were cutting his/her teeth?	1. Yes 2. No									
D37	Please, tell if during the last 7 days (he/she) had diarrhea?	1. Yes 2. No									
D38	Recollect in the memory how many days out of the last 7 he/she had diarrhea?	_____ days (RECORD INTO CHILD'S SQUARE)									
D39	How often did he/she have it the last 24 hours?	_____ times (RECORD INTO CHILD'S SQUARE)									
D40	Please, tell if you noticed during the last 7 days mucus in excrement (white or any other colour)?	1. Yes 2. No									
D41	Please, tell if you noticed during the last 7 days blood in excrement?	1. Yes 2. No									
D42	Please, tell if you noticed during the last 7 days retching?	1. Yes 2. No									
D43	Please, tell if you noticed during the last 7 days aches in abdominal cavity, intestines, stomach?	1. Yes 2. No									

FEMALE SECTOR

INTERVIEWER! QUESTIONS OF THIS SECTOR ARE ONLY FOR GIRLS OF 10 YEARS OLD & ELDER AND WOMEN

		Household member's ID									
		1	2	3	4	5	6	7	8		
P1	QUESTIONS D1 and D2 ARE ONLY FOR GIRLS OF 10 YEARS OLD & ELDER Has she ever had mensus?										
P2	What age did she have her first mensus?										
3	QUESTIONS 3-23 ARE ONLY FOR WOMEN 16 YEARS OLD AND ELDER Have you been pregnant?										
4	Have you given a birth?										
5	How many children born by you are alive now?										
6	How many child births did you have?										
INTERVIEWER! QUESTIONS 7-8 ARE ONLY FOR WOMEN UNDER 50.											
7	Did you give a birth during the last 5 years?										
8	Where did you give a birth the last time?										

Household member's ID		1	2	3	4	5	6	7	8
9	Did you pay for medical services during and after child birth?	10	11	12	13	14	15	16	17
10	How much did you pay? Include all the expenses on treatment, drugs, nurse care. If you paid in kind, then convert the payment into tenge.	10	11	12	13	14	15	16	17
11	Did you undergo any medical/preventive examination for the pregnant before the last child birth?	10	11	12	13	14	15	16	17
12	Did you pay for such preventive examinations?	10	11	12	13	14	15	16	17
13	How much did you pay in total for such examinations? If you paid in kind, then convert the payment into tenge.	10	11	12	13	14	15	16	17
14	Did you take part in any examinations for babies after child birth?	10	11	12	13	14	15	16	17
15	Did you pay for such examinations?	10	11	12	13	14	15	16	17
16	How much did you pay in total for such examinations? If you paid in kind, then convert the payment into tenge.	10	11	12	13	14	15	16	17
17	How many months did you nurse (exclusively by your milk) your last child?	10	11	12	13	14	15	16	17

Household member's ID		1	2	3	4	5	6	7	8
18	How many months did you nurse (and feed) your last child?								
19	How did you feed your last child in addition to nursing during his/her first year of life?								
20	AGAIN FOR ALL WOMEN Did you have any abortions?								
21	How many abortions did you have?								
INTERVIEWER! QUESTIONS 22-24 ARE ONLY FOR WOMEN UNDER 50.									
22	Please, Tell me, what preventive measures against pregnancy did you take?								
23	What technique did you stick to prevent being pregnant? I'll give you the Questionnaire and you should look at the list of ways women use to prevent pregnancy and tell the numbers corresponding contraception means you use. INTERVIEWER! GIVE THE QUESTIONNAIRE FOR A WOMAN TO READ IT BY HERSELF AND TELL THE NUMBERS OF CORRESPONDING CONTRACEPTION MEANS SHE USED DURING THE LAST YEAR. CIRCLE THE ANSWERED NUMBERS								
24	Are you pregnant now?								

Please tell me, do you take any preventive measures against pregnancy?

"TIME BUDGET" SECTOR

		Household member's ID						
		1	2	3	4	5	6	7
B1	Let me ask you a few questions on how you spent your time during the last 7 days? QUESTIONS B1-B3 ARE ONLY FOR ADULTS Did you work during the last 7 days for an enterprise, organization, including additional work, work at home, business and farm activities?	1	2	3	4	5	6	7
	1. Yes _____ 2. No _____ to 4							
B2	How much time did you work excluding time to go your jobplace, the way back and lunch breaks during the last 7 days?	9	10	11	12	13	14	15
	_____ hours (RECORD INTO RESPONDENT'S SQUARE)							16
B3	How much time during the last 7 days did you spend going to your work and back?	17	18	19	20	21	22	23
	_____ hours (RECORD INTO RESPONDENT'S SQUARE)							24
4	Did you (he/she) work during the last 7 days in dacha, garden, except farms?	25	26	27	28	29	30	31
	1. Yes _____ 2. No _____ to D6 (to 10)							32
5	How much time did you (he/she) work during the last 7 days in dacha, garden, except farms during the last 7?	33	34	35	36	37	38	39
	_____ hours (RECORD INTO RESPONDENT'S SQUARE)							40
QUESTIONS D6-D9 ARE FOR CHILDREN ONLY								
D6	Did she/he work during the last 7 days for the family farm, in the family business?	41	42	43	44	45	46	47
	1. Yes _____ 2. No _____ to D8							

Household member's ID		1	2	3	4	5	6	7	8
D7	How much time did she/he spend in doing this job during the last 7 days without counting time to get there & back, lunch breaks)?								
		hours (RECORD INTO CHILD'S SQUARE)							
D8	Did he/she work for payment during the last 7 days except work in dacha, family farm, family business?								
		1. Yes 2. No							
D9	How much time did he/she spend in working (except time to get there & back, lunch breaks) during the last 7 days								
		hours (RECORD INTO CHILD'S SQUARE)							
10	Were you training, upgrading qualification or self-studied during the last 7 days?(FOR SCHOOL AGE CHILDREN Did he/she attend school?)								
		1. Yes 2. No							
11	How much time out of the last 7 did you spend in training, upgrading qualification or self-training?								
		hours (RECORD INTO RESPONDENT'S SQUARE)							
12	How much time did it take you (him/her) to get the place of training and back? ^{from the place}								
		hours (RECORD INTO RESPONDENT'S SQUARE)							
13	QUESTIONS D13 ONLY FOR CHILDREN How much time out of the last 7 days did he/she spend on classes out of school (including doing home assignment).								
		hours (RECORD INTO CHILD'S SQUARE)							
14	Were you (he/she) busy looking for and buying food products?								
		1. Yes 2. No							
15	How much time out of the last 7 days did you spend in looking for and buying food products?								
		hours (RECORD INTO RESPONDENT'S SQUARE)							

(12/12/20)

		Household member's ID									
		1	2	3	4	5	6	7	8		
Q16	Were you busy looking for and buying non-food goods?	1	2	3	4	5	6	7	8		
		1. Yes 2. No		to 18							
Q17	How much time out of the last 7 days did you spend in looking for and buying non-food products	9	10	11	12	13	14	15	16		
		hours (RECORD INTO RESPONDENT'S SQUARE)									
Q18	Did you attend everyday services = laundry, atelie, repairs and alike (except hair-dresser, baths, polyclinics and hospitals)?	17	18	19	20	21	22	23	24		
		1. Yes 2. No		to 20							
Q19	How much time did you spend in attending everyday services = laundry, atelie, repairs and alike (except hair-dresser, baths, polyclinics and hospitals)?	25	26	27	28	29	30	31	32		
		hours (RECORD INTO RESPONDENT'S SQUARE)									

QUESTIONS 20-35 FOR ADULTS AND CHILDREN

20	Were you (he/she) busy cooking and washing dishes during the last 7 days?	33	34	35	36	37	38	39	40		
		1. Yes 2. No		to 22							
21	How much time did you spend on it during the last 7 days?	41	42	43	44	45	46	47	48		
		hours (RECORD INTO RESPONDENT'S SQUARE)									
22	Were you busy cleaning house, repairing furniture and electrical appliances during the last 7 days?	49	50	51	52	53	54	55	56		
		1. Yes 2. No		to 24							
23	How much time did it take you during the last 7 days?	57	58	59	60	61	62	63	64		
		hours (RECORD INTO RESPONDENT'S SQUARE)									

		Household member's ID									
		<div> <div>1</div> <div>2</div> <div>3</div> <div>4</div> <div>5</div> <div>6</div> <div>7</div> <div>8</div> </div>									
24	<p>Were you busy washing clothes, ironing, sewing for the family members during the last 7 days?</p> <p>1. Yes 2. No</p>	to 26									
25	<p>How much time did it take you during the last 7 days?</p> <p>hours</p> <p>(RECORD INTO RESPONDENT'S SQUARE)</p>										

INTERVIEWER! GO BACK TO CARDS IN PAGE 4-5 OF THE FAMILY QUESTIONNAIRE AND CHECK IF CHILDREN BORN IN 1990 OR LATER ARE RECORDED THERE. IF THERE ARE NO SUCH CHILDREN, PASS TO QUESTION 28

26	<p>Did you (he/she) take part during last 7 days in looking after children born in 1990 or later and living with you I mean feeding, washing, walking etc.? Time you spent with the child, even you were busy with other things, should be counted as time with a child?</p> <p>1. Yes 2. No</p>	to 28								
27	<p>How much time did it take you (him/her) during the last 7 days?</p> <p>hours</p> <p>(RECORD INTO RESPONDENT'S SQUARE)</p>									

INTERVIEWER! GO BACK TO CARDS IN PAGE 3-4 OF THE FAMILY QUESTIONNAIRE AND CHECK IF CHILDREN BORN IN 1985-1989 ARE RECORDED THERE. IF THERE ARE NO SUCH CHILDREN, GO TO QUESTION 30

28	<p>Did you take part during last 7 days in looking after children born between 1985-1989 who live with you? I mean warming food for them, assistance in doing home assignment, even you were busy with other things, should be counted as time with a child?</p> <p>1. Yes 2. No</p>	to 30								
29	<p>How much time did it take you during the last 7 days?</p> <p>hours</p> <p>(RECORD INTO RESPONDENT'S SQUARE)</p>									

Household member's ID		1	2	3	4	5	6	7	8
30	Did you (he/she) during the last 7 days take care of other children = relatives and non-relatives of 12 years and less that live in your household, only if it is not your work?	10 32							
31	How much time did you take care of such children during last 7 days?								
32	Did you (he/she) during 7 days take care of people above 50 or more and who need assistance, e.g. to put on clothes or eat? May be you (he/she) went shopping specially for them, helped to clean the room, wash clothes? (If it is not your work).	10 34							
33	How much time did you (he/she) take care of such people during 7 days?								
34	How much time were you (he/she) sleeping during 7 days?								
35	How much spare time did you (he/she) have during the last 7 days?								

THE QUESTIONS OF THE SECTION ARE ONLY FOR KIDS UP TO 6.

THE QUESTIONS OF THE SECTION ARE ONLY FOR KIDS UP TO 6.

INTERVIEWER! INVITE A CHILD TO TAKE MEASUREMENTS AND ANSWER QUESTIONS 1=6.

And Abschied 9.10.11, 1-3

		Household member's ID									
1	Height INTERVIEWER! BE SURE THAT A CHILD IS BAREFOOTED	<u> </u> sm (RECORD INTO CHILD'S SQUARE)	1	2	3	4	5	6	7	8	9
2	Weight BEFOR WEIGHTING BE SURE THAT ONLY INDOOR GARMENT IS ON A CHILD	<u> </u> kilos (RECORD INTO CHILD'S SQUARE)	9	10	11	12	13	14	15	16	
3	Chest circumference	<u> </u> sm (RECORD INTO CHILD'S SQUARE)	17	18	19	20	21	22	23	24	
4	INTERVIEWER! BE CAREFUL! PLEASE, NOTE IF A CHILD HAS BEEN AMPUTED A LEGS OR HANDS, MAKE A CORRESPONDING MARK IN A CHILD SQUARE.	1. ONE HAND PARTLY/ TOTALLY 2. ONE LEG PARTIALLY/ TOTALLY 3. BOTH HANDS PARTIALLY / TOTALLY 4. BOTH LEGS PARTIALLY/ TOTALLY	25	26	27	28	29	30	31	32	
5	IF A CHILD'S APPEARANCE HAS SPECIFIC PECULIARITIES, RECORD THEM IN THE CORRESPONDING SQUARE		33	34	35	36	37	38	39	40	

INTERVIEWER'S REMARKS

		Household member's ID	1	2	3	4	5	6	7	8
1	MARK IF DURING INTERVIEWING THERE WAS, EVEN SHORT TIME LITTLE THE INTERVIEWING	ANY HOUSEHOLD MEMBERS IN ADDITION TO THE RESPONDENT OTHER PEOPLE, NOT HOUSEHOLD MEMBERS A CHILD SPOKE ABOUT	1	1	1	1	1	1	1	1
2	JUDGE RESPONDENT'S ATTITUDE TOWARDS INTERVIEWING:	1. FRIENDLY, INTERESTED 2. NOT MUCH INTERESTED 3. IMPATIENT 4. NEGATIVE	1	10	11	12	13	14	15	16
3	MARK HOW RESPONDENT CAUGHT THE QUESTIONS	1. WELL 2. NOT VERY WELL 3. BADLY	17	18	19	20	21	22	23	24
4	JUDGE RESPONDENT'S BEHAVIOUR DURING THE INTERVIEW	1. WAS NERVOUS 2. SOMETIMES WAS NERVOUS 3. FELT HIMSELF COMFORTABLE	25	26	27	28	29	30	31	32
5	JUDGE RESPONDENT'S NATIVE WIT	1. NOT ALL WIT 2. NOT WIT, NEEDS EXPLANATIONS 3. AS WIT AS THE MAJORITY OF RESPONDENTS 4. MUCH SMARTER THAN THE MAJOR PART OR RESPONDENTS	33	34	35	36	37	38	39	40
7	JUDGE SINCERITY & FRANKNESS:	1. CLOSED, INSINCERE 2. SINCERE, FRANK AS THE MAJORITY OF RESPONDENTS 3. MUCH MORE SINCERE AND FRANK THAN THE MAJORITY OF RESPONDENTS	41	42	43	44	45	46	47	48
8	INTERVIEWING DATE (DAY, MONTHS)		49	50	51	52	53	54	55	56

	Household member's ID	1	2	3	4	5	6	7	8
9	INTERVIEW LASTED _____ HOURS _____ MINUTES	1	2	3	4	5	6	7	8
10	IF YOU CERTIFY THAT THE INTERVIEW MEETS REQUIREMENTS, SIGN AND GO TO 13.	9	10	11	12	13	14	15	16
11	IF YOU CERTIFY THAT BECAUSE OF RESPONDENT'S ABSENCE YOU HAD TO INTERVIEW HIS/HER DEPUTY THEN PUT DOWN YOUR SIGNATURE	17	18	19	20	21	22	23	24
12	WRITE DOWN THE REASON OF RESPONDENT'S ABSENCE	25	26	27	28	29	30	31	32
13	WHO WAS INTERVIEWED? WRITE ID OF RESPONDENT'S DEPUTY FROM THE FAMILY CARD.	33	34	35	36	37	38	39	40
14	YOUR REMARKS	41	42	43	44	45	46	47	48

1 AND AT LAST:

2 CHECK IF EVERYTHING WAS WRITTEN CORRECTLY.

3 DID NOT YOU MIX UP COLUMNS? DID YOU FOLLOW ALL REGISTRATION REGULATIONS?

THANKS FOR COLLABORATION.

LABOR STATUS

Household Member's ID →		1	2	3	4	5	6	7	8
1	Did you work for money or have any profitable business during the last 7 days (even if it was one hour a week and/or you worked independently or for other people)?	Yes.....1 No.....2	to Section Occupation						
2	Even if you did not work during the last 7 days, do you have a job or your own business that you were temporarily not engaged in during the last 7 days due to sickness, vacations, temporary shut-down of the business or other reason?	Yes.....1 No.....2	to Section Occupation						
3	Did you do any unpaid work on a relative's plot or business?	Yes.....1 No.....2	to Section Occupation						
4	Even if you did not do any unpaid work, did you participate in farming business, plant growing, hunting, fishing, fruit gathering for sale or have you been selling these products?	Yes.....1 No.....2	to Section Occupation						
5	Did you look for a job or try to start your own business during the last seven days?	Yes.....1 No.....2	to Section Occupation						
6	Why did you not look for a job or try to start your own business during the last 7 days?	Waiting for a response from the employer whether they will hire me or not.....1 I have found a job but I am waiting for employer's instructions on when to start.....2 Waiting for the beginning of seasonal work (e.g. harvest).....3 There is no good job for me.....4 There are no jobs at all.....5 I am a student.....6 I am a pensioner.....7 I am old or disabled.....8 I am sick.....9 I do not want to work.....10 I take care of children/household.....11 I am registered at the Employment Center as unemployed.....12	to Section Occupation						