

LIVING STANDARDS MEASUREMENT SURVEY

HOUSEHOLD						LSMS-1		
Municipality _____ (name)						Enumeration Area code in Municipality _____		
Settlement _____ (name)						Household code in Enumeration Area _____		
Name and surname of Interviewer _____			Interviewer code _____			Name and surname of Supervisor _____		
						Supervisor Code _____		
How many households live here? One household only _____ 1 More than one Household _____ 2 - GO TO LAST PAGE TO SELECT ONE HOUSEHOLD								
Household address _____					Household telephone _____ <i>(Area code compulsory)</i>			
Name and surname of head of household _____					Total number of household members _____			
Complete after each visit								
Result of first visit					Result of Second visit			
Completed questionnaire and left diary 1					Completed questionnaire and diary 1			
Partially completed questionnaire 2					Refused further co-operation 2			
Duration of first visit (minutes) _____					Questionnaire not completed 3			
Date and time for second appointment _____					Duration of second visit (minutes) _____			
Control of interview process, by module:								
Modules			Interviewer notes		Controller comments			
			first visit	second visit				
1.1. Demography								
1.2. Migration								
2. Housing and durable goods								
3. Social programmes								
4. Health and health care								
5.1. Daily consumption of food, drinks and tobacco ("diary")								
5.2. Use of non-food articles and services								
6. Education								
7. Employment status								
8. Agriculture								
Date of first visit								
Date interview completed				/		/		
			(day)		(month)			

Module: 1.1. D E M O

Enter name and surname of HEAD of household at number 1 in column A01. Following this, list names and surnames of other household members.

Each household member keeps his/her person number (as registered in column A01) in all of the following modules.

PERSON NUMBER	A01.	A1.	A2.	A02.	A03.	A7.
	Name and Surname	Sex <u>Circle</u> 1=male 2=female	Relationship to head of household	Date of birth (day, month, year) 99 = Does not know day 99 = Does not know month 9999 = Does not know year	How many months in the year was the person present in the household (specify number of months)	Status in the household during survey period (enter appropriate code)
PN	NAME AND SURNAME	M F	RELATIONSHIP	DATE OF BIRTH	PRESENCE	STATUS
1		1 2	Head of household	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
2		1 2	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
3		1 2	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
4		1 2	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
5		1 2	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
6		1 2	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
7		1 2	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>
8		1 2	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/>

Codes for A2. Relationship to head of household:

- 1 Spouse, partner
- 2 Child of head of household/spouse, partner
- 3 Brother/sister or brother/sister-in-law of head of household/spouse, partner
- 4 Grandson/daughter of head of household/spouse, partner
- 5 Parent of head of household/spouse, partner
- 6 Other relation
- 7 Unrelated

Codes for A7. Status in the household:

- 1 Resident
- 2 Attending education and living elsewhere
- 3 Works and lives elsewhere
- 4 Attending military service
- 5 Serving prison sentence
- 6 Hospitalisation
- 7 Attending education abroad
- 8 Works or lives abroad
- 9 Temporarily absent (vacation, business trip)

GRAPHY

One household member, who knows the most about the basic demographic characteristics of all members, can respond to questions in this module (apart from questions AN3 and B4).

Each household member responds separately to question AN3. A parent or guardian responds for children up to 15 years of age.

Questions B2, B3 and B4 are only posed to household members aged 15 and above.

A3.	AN3.	B1.	For those aged 15 and above only			B5.
			B2.	B3.	B4.	
Marital status (circle) Legally married = 1 Cohabiting, not legally married = 2 Single = 3 Divorcé/e = 4 Widow/er = 5	National or ethnic background Serb = 1 (circle) For members of other ethnic communities – enter response on line. If respondent does not want to state his/her national or ethnic background, enter - Undeclared.	Education (enter appropriate code)	Undergoing additional schooling (circle, multiple responses allowed) YES (1-3) → B4 Courses - 1 Seminars - 2 Training - 3 NO - 4 → B3	Reason for no additional schooling of respondent (enter appropriate code)	Can you claim that you know (circle, multiple responses allowed) 1 – a foreign language 2 – how to use a computer 3 – how to drive a car (with a license) 4 – none of the above	Activity (enter appropriate code) For respondents working/residing abroad, enter 00
MARRIAGE	NATIONALITY	EDUCATION	SCHOOLING	REASON	SKILLS	ACTIVITIES
1 2 3 4 5	1 _____	<input type="text"/>	1 2 3 4	<input type="text"/>	1 2 3 4	<input type="text"/>
1 2 3 4 5	1 _____	<input type="text"/>	1 2 3 4	<input type="text"/>	1 2 3 4	<input type="text"/>
1 2 3 4 5	1 _____	<input type="text"/>	1 2 3 4	<input type="text"/>	1 2 3 4	<input type="text"/>
1 2 3 4 5	1 _____	<input type="text"/>	1 2 3 4	<input type="text"/>	1 2 3 4	<input type="text"/>
1 2 3 4 5	1 _____	<input type="text"/>	1 2 3 4	<input type="text"/>	1 2 3 4	<input type="text"/>
1 2 3 4 5	1 _____	<input type="text"/>	1 2 3 4	<input type="text"/>	1 2 3 4	<input type="text"/>
1 2 3 4 5	1 _____	<input type="text"/>	1 2 3 4	<input type="text"/>	1 2 3 4	<input type="text"/>
1 2 3 4 5	1 _____	<input type="text"/>	1 2 3 4	<input type="text"/>	1 2 3 4	<input type="text"/>

Codes for B1. Education (highest level completed):	
00	Pre-school children and primary school pupils
01	No school
02	Incomplete primary school
03	Primary school
04	One/two-year vocational school
05	Secondary – three-year and for skilled workers
06	Secondary – four-year and for highly skilled workers
07	Gymnasium
08	Postsecondary non-university institution
09	University
10	Masters, specialist degree
11	Doctoral degree

Codes for B3. Reason for no schooling:	
1	Completed desired school
2	No interest
3	No financial means, conditions
4	Illness, old age
5	Further schooling planned
6	Other

Codes for B5. Activity (in the last week):	
01	Employed (formally)
02	Working outside formal employment
03	Employer (co-/owner of company or shop)
04	Individual agricultural worker
05	Performs activity independently
06	Supporting family member
07	Others who perform occupation
08	Unemployed – seeking employment
09	Stopped working (military service, serving prison sentence)
10	Pensioner
11	Has income from property (rent, lease, dividends)
12	Has other personal income (social assistance, alimony)
13	Housewife
14	Child, pupil, student
15	Incapable of work
16	Others, not performing occupation
00	Abroad

THIRD STAGE SELECTION FOR NATIONAL SAMPLE: COMPLETE IF MORE THAN 1 HOUSEHOLD IN A DWELLING

1. List all the households alphabetically by the surname of the Head of Household and enter the number of individuals in each household.

Households listed alphabetically by Surname of HoH	Number of individuals in each household
1	
2	
3	
4	
5	
IF MORE THAN 5 PHONE BELGRADE OFFICE	

2. Use the grid below to select one household within the dwelling to interview. The columns refer to the four digit Household Code in Enumeration District (1001-1014) and the rows refer to the number of households in the dwelling unit. Find the row corresponding to this number in the grid. Then refer to the column corresponding to the Dwelling Unit selection sequence number. The cell corresponding to this row and column will identify the number of the household to be selected within the dwelling.

Number of Households in Dwelling Unit	Household Code in Enumeration District													
	1001	1002	1003	1004	1005	1006	1007	1008	1009	1010	1011	1012	1013	1014
2	1	2	2	2	1	1	2	1	1	2	1	1	2	2
3	2	3	1	1	2	3	3	1	3	3	2	1	1	2
4	2	1	2	2	3	4	3	1	4	1	4	4	2	3
5	2	1	1	3	4	5	1	3	2	3	5	4	4	2

Total number of households

Number selected from Grid

3. Enter the total number of households and the number selected from the Grid and proceed to interview this household. **Once a selection has been made no substitutions are allowed**

GPS CO-ORDINATES													
Longitude							Latitude						
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Republican Statistical Office of Serbia (RSO)
 Belgrade, Milana Rakica 5, Telephone: 011/2412-922, Fax: 011/2411-260
www.statserb.sr.gov.yu
 April, 2007.

Municipality code:

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Enumeration Area code in the Municipality:

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Household code in the Enumeration Area:

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Module: 1.2 Migration

1.2. Migration			Household members								→
			Head	2	3	4	5	6	7	8	
M1.	Mother's residence at the time of respondent's birth	Settlement (place)									
		Municipality – foreign country									
A4.	What was your place of residence before 1991 (prior to wartime activities)?	Central Serbia	1	1	1	1	1	1	1	1	
		Vojvodina	2	2	2	2	2	2	2	2	
		Kosovo and Metohija	3	3	3	3	3	3	3	3	
		Montenegro	4	4	4	4	4	4	4	4	
		Bosnia and Herzegovina	5	5	5	5	5	5	5	5	
		Croatia	6	6	6	6	6	6	6	6	
		Other	7	7	7	7	7	7	7	7	
A5.	What is your current residential status?	Citizen of Republic of Serbia, of which:									A5a. M6. A6. A5a.
		- Permanent resident	1	1	1	1	1	1	1	1	
		- Internally displaced person	2	2	2	2	2	2	2	2	
		Refugee	3	3	3	3	3	3	3	3	
	Other	4	4	4	4	4	4	4	4		
A5a.	Have you ever been a refugee or an IDP?	Refugee since 1991	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	M2.
		IDP since 1999	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	
A6.	Your status according to the citizenship of Republic of Serbia	Applied for citizenship	1	1	1	1	1	1	1	1	M3.
		Received citizenship, but did not regulate documents	2	2	2	2	2	2	2	2	
		Planning to apply for citizenship	3	3	3	3	3	3	3	3	
		Not planning to apply for citizenship	4	4	4	4	4	4	4	4	
M2.	Have you lived in the same place continuously since birth?	Yes	1	1	1	1	1	1	1	1	S1
		No	2	2	2	2	2	2	2	2	M3.
M3.	Previous place of residence	Settlement (place)									
		Municipality – foreign country									
M4.	Date of move to your current place of residence	Month (99 – don't know)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
		Year (9999 – don't know)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
M5.	Reason for move to current place of residence (code one only)	Family reasons	1	1	1	1	1	1	1	1	
		Business	2	2	2	2	2	2	2	2	
		Education	3	3	3	3	3	3	3	3	
		Health reasons	4	4	4	4	4	4	4	4	
		War (forced migration)	5	5	5	5	5	5	5	5	
		Other reasons	6	6	6	6	6	6	6	6	
M6.	Place of residence before 24.03.1999.	Settlement (place)									MR1.
		Municipality									

HOUSEHOLD OF DISPLACED PEOPLE FROM KOSOVO-METOHIA (Answers relate to whole household)																											
MP1.	After leaving Kosovo-Metohija, do you still live in the same municipality on the territory of central Serbia and Vojvodina or Montenegro? YES 1 → MP5. NO 2 → MP2.																										
MP2.	In total, how many times have you changed your place of residence in the territory of central Serbia, Vojvodina and Montenegro <input type="text"/> <input type="text"/>																										
MP3.	Municipalities in which you lived (resided) in central Serbia, Vojvodina and Montenegro	<input type="text"/> (municipality name)	<input type="text"/> (municipality name)																								
MP4.	State the reasons for your move <i>(rate the reasons which relate to your household by importance – 1 for most important, 2 for second most important, etc.)</i>																										
	Better living conditions	<input type="text"/>																									
	Less expensive dwelling costs	<input type="text"/>																									
	Better conditions for children's schooling	<input type="text"/>																									
	Better employment opportunities	<input type="text"/>																									
	Organised move (government, NGO, etc.)	<input type="text"/>																									
	Purchase of apartment/house	<input type="text"/>																									
	Union of household members	<input type="text"/>																									
	Other	<input type="text"/>																									
MP5.	Do all members of your household have personal identification documents? YES 1 → MP13. NO 2 → MP6.																										
MP6.	What documents do you or some household members lack? CODE ALL THAT APPLY <table border="0"> <tr><td>ID card (for displaced persons)</td><td>1</td></tr> <tr><td>Personal ID card</td><td>2</td></tr> <tr><td>Birth certificate</td><td>3</td></tr> <tr><td>Marriage certificate</td><td>4</td></tr> <tr><td>Passport</td><td>5</td></tr> <tr><td>Citizenship certificate</td><td>6</td></tr> <tr><td>Health insurance card</td><td>7</td></tr> <tr><td>Driving licence</td><td>8</td></tr> <tr><td>Diploma</td><td>9</td></tr> <tr><td>Employment registration card</td><td>10</td></tr> <tr><td>Property documents</td><td>11</td></tr> <tr><td>Other documents</td><td>12</td></tr> </table>			ID card (for displaced persons)	1	Personal ID card	2	Birth certificate	3	Marriage certificate	4	Passport	5	Citizenship certificate	6	Health insurance card	7	Driving licence	8	Diploma	9	Employment registration card	10	Property documents	11	Other documents	12
ID card (for displaced persons)	1																										
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Driving licence	8																										
Diploma	9																										
Employment registration card	10																										
Property documents	11																										
Other documents	12																										
MP7.	Why do you not have the documents mentioned? CODE ALL THAT APPLY <table border="0"> <tr><td>Lost or destroyed</td><td>1</td></tr> <tr><td>Issuance is in process</td><td>2</td></tr> <tr><td>Never had them</td><td>3</td></tr> <tr><td>Other</td><td>4</td></tr> </table>			Lost or destroyed	1	Issuance is in process	2	Never had them	3	Other	4																
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Issuance is in process	2																										
Never had them	3																										
Other	4																										
MP8.	Do you encounter everyday problems due to the lack of personal documents? YES 1 → MP9. NO 2 → MP10.																										
MP9.	Most often, the problems concern CODE ALL THAT APPLY <table border="0"> <tr><td>Finding employment</td><td>1</td></tr> <tr><td>Health care</td><td>2</td></tr> <tr><td>Education</td><td>3</td></tr> <tr><td>Residence (dwelling) issues</td><td>4</td></tr> <tr><td>Registering residency</td><td>5</td></tr> <tr><td>Freedom of movement</td><td>6</td></tr> <tr><td>Other</td><td>7</td></tr> </table>			Finding employment	1	Health care	2	Education	3	Residence (dwelling) issues	4	Registering residency	5	Freedom of movement	6	Other	7										
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Other	7																										
MP10.	Have you tried to acquire the personal documents which you or your household members lack? YES 1 → MP11. NO 2 → MP13.																										

MP11.	<p>Were you faced with problems when trying to acquire them? CODE ONE ONLY</p> <p>No problems 1</p> <p>Problems were due to:</p> <p>discourtesy 2</p> <p>corruption 3</p> <p>lack of other documents 4</p> <p>lack of financial means 5</p>
MP12.a	<p>Did you receive assistance from government services or non-governmental organizations when applying for personal documents? YES 1 → MP12.b NO 2 → MP13.</p>
MP12.b	<p>Who provided you with assistance? (CODE ALL THAT APPLY)</p> <p>Government services 1</p> <p>Non-governmental organizations 2</p>
MP13.	<p>Do you wish to return to Kosovo-Metohija? YES 1 → MP14. NO 2 → MP15.</p>
MP14.	<p>State the reasons why you were unable to return to Kosovo Metohija so far CODE ALL THAT APPLY</p> <p>Bad security conditions 1</p> <p>Fear of ethnic discrimination 2</p> <p>Dwelling is destroyed 3</p> <p>Dwelling is illegally occupied 4</p> <p>No opportunity to earn an income 5</p> <p>Unstable political situation 6</p> <p>Lack of freedom of movement 7</p> <p>No trust in government of K-M 8 → MP16.</p> <p>Complicated return procedure 9</p> <p>Inability to fulfil basic human rights and freedoms 10</p> <p>Infrastructure in place of residence destroyed 11</p> <p>No adequate education conditions 12</p> <p>Lack of health care 13</p> <p>Unfavourable ethnic structure in the place of residence 14</p> <p>Fear of violence 15</p> <p>Other 16</p>
MP15.	<p>State the reasons why you would prefer to remain on the territory of central Serbia, or Vojvodina CODE ALL THAT APPLY</p> <p>Family safety 1</p> <p>Close proximity to relatives, friends 2</p> <p>Better employment conditions 3</p> <p>Opportunity for a better education 4</p> <p>Greater opportunity for health care 5</p> <p>We have become accustomed to life here (better conditions) 6</p> <p>We have purchased an apartment/house here 7</p> <hr/> <p>Bad security conditions in K-M 8</p> <p>Fear of ethnic discrimination in K-M 9</p> <p>Our dwelling in K-M is destroyed 10</p> <p>Our dwelling in K-M is illegally occupied 11</p> <p>No employment opportunities in K-M 12</p> <p>Unstable political situation in K-M 13</p> <p>Lack of freedom of movement in K-M 14</p> <p>We do not trust the government of K-M 15</p> <p>Complicated return procedure to K-M 16</p> <p>Inability to fulfil basic human rights and freedoms in K-M 17</p> <p>Infrastructure of settlement in K-M destroyed 18</p> <p>Lack of health care in K-M 19</p> <p>Unfavourable ethnic structure in settlement in K-M 20</p> <p>Fear of violence in K-M 21</p> <p>Other 22</p>

MP16.	Do you own a house or apartment in Kosovo-Metohija? YES 1 → MP17. NO 2 → MP23.			
OWNERSHIP OF DWELLINGS IN KOSOVO-METOHIA				
		HOUSES OR APARTMENTS		
		First dwelling	Second dwelling	Third dwelling
MP17.	Municipality in which the dwelling is located	(municipality name)		(municipality name)
MP18.	Surface area of dwelling (in m ²)			
MP19.	Year of construction of dwelling			
MP20.	Level of damage to dwelling			
	Demolished	1	1	1
	Damaged	2	2	2
	Undamaged	3	3	3
MP21.	Don't know	9	9	9
	Is your dwelling			
	Illegally occupied	1	1	1
	Rented out	2	2	2
	Some household member/s lives there	3	3	3
	Relatives or friends live there	4	4	4
MP22.	Unoccupied	5	5	5
	Demolished	6	6	6
	Don't know	9	9	9
	Who takes care of your dwelling			
	Household member	1	1	1
	Relatives, friends or neighbours	2	2	2
MP23.	Someone else	3	3	3
	No one	4	4	4
	Demolished	5	5	5
	Don't know	9	9	9
	Do you own land in Kosovo-Metohija	YES 1 → MP24. NO 2 → MP30.		
LAND OWNERSHIP IN KOSOVO-METOHIA				
MP24.	Municipality(ies) in which the land is located	(municipality name)	(municipality name)	(municipality name)
MP25.	Total area of land in municipality (ha/acres)	(ha) (ac)	(ha) (ac)	(ha) (ac)
MP26.	Of that only arable land (ha/acres)	(ha) (ac)	(ha) (ac)	(ha) (ac)
MP27.	Is your land:			
	Used illegally	1	1	1
	Rented out	2	2	2
	Used by your household member(s)	3	3	3
	Used by relatives or friends	4	4	4
	Is not being used	5	5	5
MP28.	Don't know	9	9	9
	Is it possible for you to use your land in Kosovo-Metohija	YES 1 → MP30. NO 2 → MP29.		
	Why you are unable to use the land? (code all that apply)			
	Destroyed (orchard, vineyard, etc.)	1		
	Illegally taken/occupied	2		
MP29.	Unsafe	3		
	Other	4		
	Did you own a house/apartment or land in K-M that you sold after leaving K-M (after 24 March 1999)?	YES 1 → MP31. NO 2 → S1		
MP31.	Total area of dwellings you sold (in m ²)	(m ²)		
MP32.	Total area of land you sold (ha/acres)	(ha) (ac) →		

Module: 2 Housing and durables

General information on the dwelling				
S1	What type of a dwelling do you live in at present?	An apartment in a building		1
		A house with several apartments		2
		A house		3
		A space not meant for living		4
S2	When (approximately) was the dwelling you are living in built?	_____ (year)		
S3	How many rooms are there in the dwelling? (6 m ² or more)	_____		
S4	What surface area of your dwelling is fit for use (m ²)? (The living space used by your household)	_____		
S5	Does your dwelling have the following rooms?		Yes	No
		1. Separate kitchen	1	2
		2. Bathroom within the dwelling (shower, bathtub, shower cabin)	1	2
		3. Toilet within the dwelling	1	2
		4. Balcony/loggia	1	2
S6	Do you have a private plot which you cultivate?	1. Yes	2. No	
S7	Do you have any complaints about your dwelling?	1. Yes ↓	2. No → S9	
S8	If yes, which of the following:		Yes	No
		Not enough space	1	2
		Noise from neighbours or from outside	2	2
		Insufficient daylight	3	2
		Humidity	4	2
		Leaking roof	5	2
		Decrepit walls, floors	6	2
		Rotten woodwork (doors, window frames)	7	2
		Air pollution	8	2
		Elevator is frequently out of order	9	2
S9	Is your dwelling equipped with the following installations?	Electricity	1	2
		Running water supply	2	2
		Sewerage	3	2
		Gas	4	2
		Centralised heating/autonomous heating	5	2
		Telephone	6	2
		Cable or satellite TV	7	2
		Interphone/videophone	8	2
		Security system (alarm, security locks ...)	9	2
S10	Does your dwelling have any of the following auxiliary rooms?	Basement	1	2
		Attic	2	2
		Garage	3	2
S11	What is your dwelling used for?	For residence	1	2
		As a workspace, for business which makes a profit ¹⁾	2	2
		For rent (room or part of apartment which you also reside in)	3	2

¹⁾ Circle “yes” in all cases where the living quarters are also used for an activity which makes a profit. For example, tailor sewing in the apartment, programmer/typist working on a computer in the apartment, etc.

S12	What is your ownership status of the dwelling?	Owner or co-owner	1	S14
		Right of tenure, protected tenant	2	
		Tenant (renting part of apartment, house)	3	S13
		Renting out whole apartment	4	
		Living free of charge in dwelling, although not an owner	5	S14

S13	If you rent the dwelling, what is your monthly rent?	_____ (dinars)
-----	--	----------------

Information on expenses for dwelling maintenance				
S14	In the previous month, what were your household expenses for: ²⁾	1. Telephone	din.	
		2. Mobile phone (sum of bills for all household members)	din.	
		3. Utilities (water, garbage disposal, central heating...)	din.	
		4. Electricity	din.	
		5. Gas	din.	
S15	Does your household have outstanding bills for: (Specify total amount of debt)		No. of months	Amount
		1. Telephone		din.
		2. Utilities (water, garbage disposal, central heating...)		din.
		3. Electricity		din.
		4. Building maintenance (common space and elevators ...)		din.
S16	In the previous month, have you been granted a discount for:	Payment of utilities	1. Yes	2. No
		Payment of electricity bill	1. Yes	2. No
S16a	In 2006, did you receive firewood as humanitarian aid?		1. Yes	2. No
S17	What type of heating do you use? (code all that apply)	1. Central heating <u>Monthly expenses</u> (from the utilities bill)	1. Yes _____ din. 2. No →	
		2. Electric heating <u>Average monthly expense for the previous heating Season</u>	1. Yes _____ din. 2. No →	
		3. Solid fuel heating (coal, firewood) <u>Total expense for the previous heating season</u>	1. Yes _____ din. 2. No →	
		4. Gas heating <u>Total expense for the previous heating season</u>	1. Yes _____ din. 2. No →	
		5. Liquid fuel heating (naphtha (rock oil), fuel oil) <u>Total expense for the previous heating season</u>	1. Yes _____ din. 2. No →	
S18	In the previous month, did you make any essential repairs to the dwelling (electrician, plumber ...)?	1. Yes →	S19	
		2. No →	S20	
S19	If yes, specify the total expenditure for essential repairs made in the previous month (for materials and labour):	_____ (dinars)		
S20	Did you have any major investments related to the dwelling over the last year (construction, carpentry, painting, ceramic works...)?	1. Yes →	S21	
		2. No →	S22	
S21	What is the total expenditure for these investments made over the last year?	_____ (dinars)		

²⁾ If bills are issued for a three or six-month period, the expenditure should be converted to a monthly level (for example, if the six-month water bill is for 3600 dinars, the monthly water expenditure is 600 dinars).

Information on second homes			
S22	Does your household own any other residence (besides the one you live in)?	1. Yes →	S23
		2. No →	S26
S23	How many of these dwellings do you possess?	_____	
S24	What is the total surface area of this dwelling that is fit for use? (if in possession of more than one, specify the total area of all of them)	_____ m ²	
S25	Estimate the total <i>annual expenditure</i> for your second home (holiday home):	_____ (EUR)	

Durable goods		If in possession of more pieces, the question refers to the one most recently acquired	
S26. Which of the following items does your household possess?	S27. Number of pieces	S28. How old is the item (years)?	S30. According to current market prices, what amount would you be able to receive for this item if you were to sell it? (EUR) ³⁾
1. Stove			
2. Washing machine			
3. Air conditioner			
4. Dishwasher			
7. Combined refrigerator with freezer			
5. Refrigerator			
6. Freezer			
8. Microwave oven			
9. Vacuum cleaner			
10. Iron			
11. Satellite dish			
12. TV			
13. Video recorder			
14. Video camera			
15. Stereo, CD /DVD player			
16. Radio cassette player			
17. PC/laptop			
18. Motorcycle			
19. Car			
20. Jeep, van			

³⁾ Do not specify values for household appliances aged 30 years or more. →

Module: 3 Social programmes

Note: Questions from SP6 to SP8a are asked for each member of household individually.

The other questions in this query are referred to the household as a whole.

Social programme - page 1 →

SP1	During the previous month did anyone in the household receive money from any of the following social programmes? How much was received?			
	1. Attendance and assistance allowance	1. Yes	Dinar _____	SP1.1a
		2. No		SP1.2
	1a Source of attendance and assistance allowance	1. Pension and disability fund		SP1.2
		2. Social protection System		
	2. Veteran's and disabled veteran's allowance	1. Yes	Dinar _____	SP1.3
		2. No		
	3. Allowance for civilian victims of war	1. Yes	Dinar _____	SP1.4
		2. No		
	4. Family subsistence allowance (MOP)	1. Yes	Dinar _____	SP1.5
		2. No		
	5. Humanitarian Aid	1. Yes	Dinar _____	SP1.6
		2. No		
	6. One-time municipal cash subsidy	1. Yes	Dinar _____	SP1.7
		2. No		
	7. Child allowance	1. Yes	Dinar _____	SP1.8
		2. No		
	8. Parents (maternity) allowance	1. Yes	Dinar _____	SP1.9
2. No				
9. Alimony	1. Yes	Dinar _____	SP2	
	2. No			
SP2	During the previous 12 months have you applied for family subsistence allowance (MOP)?		1. Yes	SP4
			2. No	SP3
SP3	Why have you not applied for family subsistence allowance? (code one only)	Did not require it	1	SP6
		Was unaware of the existence of such a programme	2	
		Do not know how to apply	3	
		Administrative procedure is too complicated	4	
		I know that I do not meet the criteria	5	
		I was already receiving it	6	SP4
SP4	During the previous 12 months, have you received family subsistence allowance?		1. Yes	SP4a
			2. No	SP5
SP4a	How many months/years have you been receiving family subsistence allowance?		_____ months _____ years	SP6
SP5	Why have you not received financial family subsistence allowance? (code one only)	1. I did not qualify based on the financial census	1	SP6
		2. I did not qualify based on other criteria	2	
		3. Social worker gave a negative evaluation	3	
		4. Other	4	

Social programme - page 2 →			Household Members									
			Head	2	3	4	5	6	7	8		
SP6	During the previous 12 months, have you applied for child allowance?		1. Yes	1. Yes	1. Yes	1. Yes	1. Yes	1. Yes	1. Yes	1. Yes		SP8
			2. No	2. No	2. No	2. No	2. No	2. No	2. No	2. No		SP7
SP7	Why have you not applied for child allowance? (code one only)	1. Did not require it	1	1	1	1	1	1	1	1	SP9	
		2. Was unaware of the existence of such a programme	2	2	2	2	2	2	2	2		
		3. Do not know how to apply	3	3	3	3	3	3	3	3		
		4. Administrative procedure is too complicated	4	4	4	4	4	4	4	4		
		5. I know that I do not meet the criteria	5	5	5	5	5	5	5	5		
		6. Other	6	6	6	6	6	6	6	6		
SP8	During the previous 12 months, have you received child allowance?		1. Yes	1. Yes	1. Yes	1. Yes	1. Yes	1. Yes	1. Yes	1. Yes	SP8a	
			2. No	2. No	2. No	2. No	2. No	2. No	2. No	2. No	SP9	
SP8a	How many months/years have you been receiving child allowance?		_____mth _____year	_____mth _____year.	_____mth _____year.	_____mth _____year	_____mth _____year	_____mth _____year	_____mth _____year	_____mth _____year	SP9	

Social programme - page 3 →				
SP9	During the previous 12 months, have you applied for humanitarian aid?		1. Yes	SP11
			2. No	SP10
SP10	Why have you not applied for humanitarian aid? (code one only)	1. Did not require it	1	SP12
		2. Was unaware of the existence of such a programme	2	
		3. Do not know how to apply	3	
		4. Administrative procedure is too complicated	4	
		5. I know that I do not meet the criteria	5	
		6. Aid is received without having to apply	6	SP11
SP11	During the previous 12 months, have you received humanitarian aid?		1. Yes	SP12
			2. No	
SP12	During the previous 12 months, have you applied for a one-time municipal cash benefit?		1. Yes	SP14
			2. No	SP13
SP13	Why have you not applied for a one-time municipal cash subsidy? (code one only)	1. Did not require it	1	SP15
		2. Was unaware of the existence of such a programme	2	
		3. Do not know how to apply	3	
		4. Administrative procedure is too complicated	4	
		5. I know that I do not meet the criteria	5	
		6. Other	6	
SP14	During the previous 12 months, have you received a one-time municipal cash subsidy?		1. Yes	SP15
			2. No	
SP15	During the previous 12 months, have you used the services of the Centre for Social Work?		1. Yes	→
			2. No	

Module: 4 Health and Health Care

1. SUBJECTIVE HEALTH STATUS			Household members								
			Head	2	3	4	5	6	7	8	
H1	How is your health in general?	Very good	1	1	1	1	1	1	1	1	H2
		Good	2	2	2	2	2	2	2	2	
		Fair	3	3	3	3	3	3	3	3	
		Bad	4	4	4	4	4	4	4	4	
		Very bad	5	5	5	5	5	5	5	5	
H2	Do you have any long standing illness or health problem?	Yes	1	1	1	1	1	1	1	1	H3
		No	2	2	2	2	2	2	2	2	→ H11
H3	For at least the <u>past 6 months</u> have you been limited in activities people usually do because of a health problem?	Yes, strongly limited	1	1	1	1	1	1	1	1	H4
		Yes, limited	2	2	2	2	2	2	2	2	
		No, not limited	3	3	3	3	3	3	3	3	
H4	What is/are your long standing illness or health problem? CODE ALL THAT APPLY										H4.a
	Problems or disabilities (including arthritis or rheumatism) connected with arms or hands		1	1	1	1	1	1	1	1	
	Problems with legs or feet		2	2	2	2	2	2	2	2	
	Problems with back or neck		3	3	3	3	3	3	3	3	
	Difficulty in seeing (while wearing spectacles or contact lenses)		4	4	4	4	4	4	4	4	
	Difficulty in hearing		5	5	5	5	5	5	5	5	
	A speech impediment		6	6	6	6	6	6	6	6	
	Severe disfigurement, skin conditions, allergies		7	7	7	7	7	7	7	7	
	Chest or breathing problems, asthma, bronchitis		8	8	8	8	8	8	8	8	
	Heart, blood pressure or blood circulation problem		9	9	9	9	9	9	9	9	
	Stomach, liver, kidney or digestive problem		10	10	10	10	10	10	10	10	
	Diabetes		11	11	11	11	11	11	11	11	
	Depression, bad nerves or anxiety		12	12	12	12	12	12	12	12	
	Epilepsy		13	13	13	13	13	13	13	13	
	Severe or specific learning difficulties (mental handicap)		14	14	14	14	14	14	14	14	
	Mental illness or suffer from phobias, panics or other nervous disorder		15	15	15	15	15	15	15	15	
	Progressive illness not included elsewhere (e.g. cancer not included elsewhere, multiple sclerosis, symptomatic HIV, Parkinson's Disease, muscular dystrophy)		16	16	16	16	16	16	16	16	
	Other health problems or disability		17	17	17	17	17	17	17	17	
H4.a	INTERVIEWER CHECK: Does respondent have more than one long standing illness or disability?	Yes	1	1	1	1	1	1	1	1	H5
		No	2	2	2	2	2	2	2	2	

1. SUBJECTIVE HEALTH STATUS - Page 2 →		Household members								
		Head	2	3	4	5	6	7	8	
H5	Which one most limits your activities? CODE ONE									H6
	Problems or disabilities (including arthritis or rheumatism) connected with arms or hands	1	1	1	1	1	1	1	1	
	Problems with legs or feet	2	2	2	2	2	2	2	2	
	Problems with back or neck	3	3	3	3	3	3	3	3	
	Difficulty in seeing (while wearing spectacles or contact lenses)	4	4	4	4	4	4	4	4	
	Difficulty in hearing	5	5	5	5	5	5	5	5	
	A speech impediment	6	6	6	6	6	6	6	6	
	Severe disfigurement, skin conditions, allergies	7	7	7	7	7	7	7	7	
	Chest or breathing problems, asthma, bronchitis	8	8	8	8	8	8	8	8	
	Heart, blood pressure or blood circulation problem	9	9	9	9	9	9	9	9	
	Stomach, liver, kidney or digestive problem	10	10	10	10	10	10	10	10	
	Diabetes	11	11	11	11	11	11	11	11	
	Depression, bad nerves or anxiety	12	12	12	12	12	12	12	12	
	Epilepsy	13	13	13	13	13	13	13	13	
	Severe or specific learning difficulties (mental handicap)	14	14	14	14	14	14	14	14	
	Mental illness or suffer from phobias, panics or other nervous disorder	15	15	15	15	15	15	15	15	
	Progressive illness not included elsewhere (e.g. cancer not included elsewhere, multiple sclerosis, symptomatic HIV, Parkinson's Disease, muscular dystrophy)	16	16	16	16	16	16	16	16	
	Other health problems or disability	17	17	17	17	17	17	17	17	
H6	How would you describe this/the most serious illness?									H7
	Light	1	1	1	1	1	1	1	1	
	Moderate	2	2	2	2	2	2	2	2	
	Difficult	3	3	3	3	3	3	3	3	
	Severe	4	4	4	4	4	4	4	4	
H7	Do you receive regular therapy or treatment for this condition?	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	Yes 1 No 2	H8
H8	Does your health problem/disability make it difficult for you to do any of the following? CODE ALL THAT APPLY									H9
	Do things with hands like using a pen or a knife and fork	1	1	1	1	1	1	1	1	
	Carry shopping	2	2	2	2	2	2	2	2	
	Cope with toilet needs	3	3	3	3	3	3	3	3	
	Read a book, magazine or newspaper (wearing glasses or contact lenses if used)	4	4	4	4	4	4	4	4	
	Hold a conversation on the telephone or in a room with the television on	5	5	5	5	5	5	5	5	
	Remember the names of people I know	6	6	6	6	6	6	6	6	
	Cope with changes to my daily routine	7	7	7	7	7	7	7	7	
	Keep myself safe	8	8	8	8	8	8	8	8	
	None of the above	9	9	9	9	9	9	9	9	

1. SUBJECTIVE HEALTH STATUS - Page 3 →			Household members								
			Head	2	3	4	5	6	7		8
H9	Are you a member of any PWD organisations? CODE ALL THAT APPLY									H10	
	Yes, related to physical disability		1	1	1	1	1	1	1	1	
	Yes, related to autism and mental disorders		2	2	2	2	2	2	2	2	
	Yes, related to hearing and seeing		3	3	3	3	3	3	3	3	
	Other		4	4	4	4	4	4	4	4	
	Several organisations		5	5	5	5	5	5	5	5	
	No		6	6	6	6	6	6	6	6	
H10	Has your handicap been confirmed by a medical commission?	Commission for categorization	1	1	1	1	1	1	1	1	H11
		Disablement commission	2	2	2	2	2	2	2	2	
		Commission for home care	3	3	3	3	3	3	3	3	
		No	4	4	4	4	4	4	4	4	
H11	Have you had any short term disease or been injured in the last month?	Yes	1	1	1	1	1	1	1	1	HD.1
		No	2	2	2	2	2	2	2	2	

2. DOCTORS VISITS (during the last month)			Household members								
			Head	2	3	4	5	6	7	8	
HD.1	Have you visited a doctor in health institution during the last month?	Yes	1	1	1	1	1	1	1	1	HD1.a →HZ.1
		No	2	2	2	2	2	2	2	2	
HD1.a	What type of health institution was it?	State	1	1	1	1	1	1	1	1	HD.2
		State and Private	2	2	2	2	2	2	2	2	
		Private	3	3	3	3	3	3	3	3	
HD.2	Which of these doctors have you visited?	General practitioner/ Specialist in general/occupational medicine	1	1	1	1	1	1	1	1	HD.3
		Paediatrician	2	2	2	2	2	2	2	2	
		Gynaecologist	3	3	3	3	3	3	3	3	
		Specialized physician in other field of medicine	4	4	4	4	4	4	4	4	
HD.3	How many times have you visited the doctor?										HD.4
HD.4	Have you used and paid, and how much the following health services? Write down the amount in Dinars if service was paid for, 2 – DIDN'T USE or 3 – DIDN'T PAY										
1	Participation for doctor visits and/or nurses interventions	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	HZ.1
2	Full price (according to price list of health institution) for doctor visits and/or nurses interventions without referral	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
3	Drugs and medical (disposable) materials given during the visit	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
4	Laboratory tests, X-rays, ultrasound	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
5	Participation for prescribed drugs	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
6	Full price for prescribed drug	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
7	Assistive devices (orthopaedic footwear, wheelchairs, corrective eye-glasses, contact lenses, hearing aids, prosthetic devices)	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
8	Transport cost to/from health institution	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
9	How much did you pay for medical stuff, either in cash or in kind, on their request? Wasn't requested (2) Didn't pay (3)	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
10	How much did you pay for gifts (total estimated value in Dinars) to medical stuff, either in cash or in kind? Not given - 2	2	2	2	2	2	2	2	2	2	

3. DENTAL VISITS (during the last month)			Household members								
			Head	2	3	4	5	6	7	8	
HZ.1	Have you visited a dentist in the <u>last month</u> ?	Yes	1	1	1	1	1	1	1	1	HZ.1a
		No	2	2	2	2	2	2	2	2	→ HA.1
HZ.1a	What type of dentist did you visit?	State	1	1	1	1	1	1	1	1	H3.2
		State and Private	2	2	2	2	2	2	2	2	
		Private	3	3	3	3	3	3	3	3	
HZ.2	How many times have you visited the dentist?		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	HZ.3
HZ.3	Have you used and how much did you pay for the following dental services? Write down the amount in Dinars if service was paid for, 2 – DIDNT USE or 3 – DIDN'T PAY										
1	Participation for dentists examination and intervention		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	HA.1
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
2	Full price for dentists examination and intervention		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
3	Drugs and other material given during the intervention		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
4	Laboratory analysis and x-rays		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
5	Participation for prescribed drugs		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
6	Full price for prescribed drugs		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
7	Orthodontic aids (bridges, crowns, braces)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
8	Transport cost to/from health institution		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
9	How much did you pay for medical stuff, either in cash or in kind, on their request?		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	Wasn't requested (2) Didn't pay (3)		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
10	How much did you pay for gifts to medical stuff, either in cash or in kind? (Total estimated value in Dinars) ? Not given - 2		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
			2	2	2	2	2	2	2	2	

4. OWN EXPENSES/ALTERNATIVE THERAPIES (During the last month)			Household members								
			Head	2	3	4	5	6	7	8	
Have you use and how much you paid the following health services? Write down the amount in Dinars if service was paid for, 2 – DIDN'T USE or 3 – DIDN'T PAY											
HA.1	Total expenses for drugs and medical supplements (vitamins, minerals, medicinal herbs, etc.)										HA.2
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
HA.2	Total expenses for other medical supplies (bandages, plasters, thermometers, etc.)										HA.3
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
HA.3	Alternative medical services (chiropractor, acupuncture, herbalist)										HB.1
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	

5. HOSPITAL STAYS – LAST 12 MONTHS (include stationary rehabilitation) and hospitals abroad - Page 1 →			Household members								
			Head	2	3	4	5	6	7	8	
HB.1	Did you stay in hospital in last 12 months?	Yes	1	1	1	1	1	1	1	1	HB.2
		No	2	2	2	2	2	2	2	2	→ HR.1
HB.2	In which type (by ownership) of hospital you stayed in?	State	1	1	1	1	1	1	1	1	HB.3
		State and private	2	2	2	2	2	2	2	2	
		Private	3	3	3	3	3	3	3	3	
HB.3	How many times did you stay in the hospital?										HB.4

5. HOSPITAL STAYS IN LAST 12 MONTHS (include stationary rehabilitation) and hospitals abroad - Page 2		Household members								
		Head	2	3	4	5	6	7	8	
HB.4	Have you used and how much did you pay stays and services in hospital? Write down the amount in Dinars if service was paid for, <u>2 – DIDNT USE</u> or <u>3 – DIDN'T PAY</u>									
1	Participation/full price for hospitalisation									HR.1
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
2	Drugs during your stay in hospital (includes prescribed drugs on dismissal)									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
3	Drugs you brought to the hospital									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
4	Disposable materials during your stay in hospital (surgical materials, implants, etc)									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
5	Disposable materials you brought to the hospital (surgical materials, implants, etc)									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
6	laboratory analysis and X rays during your stay in hospital									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
7	Orthopaedic devices you brought to the hospital									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
8	Transport costs to/from health institution									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
9	Extra accommodation and similar costs									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
10	How much did you pay for medical stuff, either in cash or in kind? ON THEIR REQUEST Wasn't requested (2) Didn't pay (3)									
		2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3	
11	Gifts to medical stuff, either in cash or in kind (Total estimated value in Dinars ON OWN INITIATIVE									
		2 – not given	2 – not given	2 – not given	2 – not given	2 – not given	2 – not given	2 – not given	2 – not given	
12	Donation for the hospital									
		2 – not given	2 – not given	2 – not given	2 – not given	2 – not given	2 – not given	2 – not given	2 – not given	

****COMMENT: Question HR1 is only for persons who haven't used health services in the last month.**

6 ASSISTANCE FOR HEALTH CARE COSTS				Household members								→
				Head	2	3	4	5	6	7	8	
HR.1	If you haven't used health services in the last month, what was the main reason? ** CODE ONLY ONE	No need		1	1	1	1	1	1	1	1	HR.2
		Minor disorder, I treated it on my own		2	2	2	2	2	2	2	2	
		Minor disorder, I didn't treat it		3	3	3	3	3	3	3	3	
		Too far		4	4	4	4	4	4	4	4	
		Poor service		5	5	5	5	5	5	5	5	
		Too expensive (less of money)		6	6	6	6	6	6	6	6	
		No health insurance		7	7	7	7	7	7	7	7	
		Other		8	8	8	8	8	8	8	8	
HR.2	Has anyone assisted you in paying health care costs in previous 12 months? Circle the answer and write down the (estimated) amount in Dinars	Relative/friend from Serbia	1									HP.1
		Relative/friend from abroad	2									
		Humanitarian organization	3									
		State/company assistance	4									
		Other	5									
		Paid expenses individually	6									
7 SMOKING AND ALCOHOL USE				Household members								→
				Head	2	3	4	5	6	7	8	
HP.1	Do you smoke?	Yes, every day		1	1	1	1	1	1	1	1	HP.2
		Occasionally		2	2	2	2	2	2	2	2	
		No		3	3	3	3	3	3	3	3	
HP.2	Do you consume alcoholic drinks?	Never		1	1	1	1	1	1	1	1	HO.1
		Several times a year		2	2	2	2	2	2	2	2	
		2 – 3 times a month		3	3	3	3	3	3	3	3	
		Once a week		4	4	4	4	4	4	4	4	
		2 – 3 times a week		5	5	5	5	5	5	5	5	
		Every day		6	6	6	6	6	6	6	6	
8 HEALTH INSURANCE				Household members								
				Head	2	3	4	5	6	7	8	
HO.1	Do the household members have health insurance, and what type of insurance?	No health insurance		1	1	1	1	1	1	1	1	HO.2
		Has health insurance based on employment		2	2	2	2	2	2	2	2	
		Has health insurance based on pension		3	3	3	3	3	3	3	3	
		Has health insurance based on employment of other household member		4	4	4	4	4	4	4	4	
		Has health insurance based on unemployment		5	5	5	5	5	5	5	5	
		IDP Health insurance		6	6	6	6	6	6	6	6	
HO.2	Did household members have health insurance in 2002?	Yes		1	1	1	1	1	1	1	1	→
		No		2	2	2	2	2	2	2	2	

Municipality code:

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Enumeration Area code in the Municipality:

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Household code in the Enumeration Area:

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Module: 5.1 Daily consumption of foods, drinks and tobacco

(FOR SEVEN DAY PERIOD)

All consumption of food, drinks and cigarettes, during the seven-day period, is recorded in the diary, regardless of when the article was purchased, received or produced. The diary is completed by the household member most familiar with the household consumption of these products, i.e. the person who is mainly responsible for the purchase and/or the preparation of food in the household. This is most often the housewife, wife or mother. The household records the daily consumption in the column of the diary for the appropriate day (Day 1, Day 2, ... Day 7).

For every product consumed, the quantity, value and source have to be recorded.

Quantities are recorded in units of measure which are provided next to the product name. Decimals are allowed

Amount in dinars is written for each quantity of the product consumed. If the household cannot estimate (or does not know) the exact amount of the product consumed, it should record the closest value. The closest value is most easily determined by comparing the purchased quantity of a product with the consumed quantity. (Example: a third of the quantity of a consumed product will have a third of the value of the purchased product.)

In addition, if a product was purchased earlier, and was consumed during the survey period, its current value should be recorded. (Example: for potatoes purchased in November 2006 at a value of 20 dinars per kilogram, which cost 15 dinars today, the current value should be recorded, i.e. 15 dinars per kilogram.)

The value is recorded in dinars, without the Para (cents).

Source is recorded for every article consumed. The code for the source should be written, i.e. the source of the product in the household.

It is important to show what has been purchased by the household, what the household produced themselves and what was received as a gift.

All articles for which the household gave money were purchased, regardless of the period. This is particularly important for consumption of “winter foods” and foods “from the freezer”. For all “winter foods” and supplies consumed, the source at the time of purchase should be recorded.

Example: “from the freezer” the household consumed:

- one kilogram of beef, received as a gift from relatives living in the country;
- one kilogram of pork, purchased in December 2006, at a price of 280 dinars per kilogram;
- half a kilogram of chicken, from their own production.

4 FRESH AND PROCESSED MEAT			Quantity	Dinars	Source
1	Beef	kg	1	460 (current retail value)	3 – received as gift
4	Pork	kg	1	260 (current retail value)	1 – purchased
8	Poultry	kg	0,5	80 (current retail value)	2 – own production

- If the household prepared food for more days, everything used on the day the food was prepared should be recorded, regardless of the number of days this food will be consumed for. Example: If, on the 1st day, lunch was cooked for the following two days, everything used for preparing this lunch has to be recorded on the day that the lunch was prepared, i.e. on the 1st day.
- If the household cannot estimate the daily consumption of certain products (due to small quantities), such as salt, spices, coffee, sugar, etc. the total consumption of that product for the entire week should be recorded. The weekly consumption of this product should only be recorded once, i.e. in one field only. Example: weekly consumption: salt 100 gr, 3 dinars, 1 - purchased.
- Daily consumption should also be recorded for household that eat at public kitchens or receive food as a gift from relatives, neighbours (often the case with elderly and ill people). Code 3 should be entered in the column for the source.
- If the household does not know where to record an article in the table, or cannot estimate the quantity or value, the consumption should be recorded textually on the final page of the diary. Upon completing the interview, it is the interviewer’s responsibility to copy the data correctly into the main diary.
- Only the total value in dinars is recorded for consumption of food and drinks outside the household (restaurants, cafes, kiosks, at work, at school, ordered food, which is delivered at the house, etc.).

Source: 1 – Bought in the shop 2 – Own production 3 – Received as a gift

Household nutrition			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
1 CEREALS AND WHEAT PRODUCTS		Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1	White bread	Kg																					
2	Semi-white bread	Kg																					
3	Whole meal, rye, integral bread	Kg																					
4	Baked goods	Kg																					
5	Other kinds of bread	Kg																					
6	Wheat and rye flour and semolina	Kg																					
7	Maize flour and maize	Kg																					
8	Flour products and paste prod.	Kg																					
9	Other cereals	Kg																					
10	Rice	Kg																					
11	Frozen pastry	Kg																					
12	Yeast	gms																					

2 FRESH VEGETABLES AND PRODUCTS			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
		Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1	Potatoes	Kg																					
2	Beans	Kg																					
3	Onions, garlic and leek	Kg																					
4	Carrot, greens, celery, beet	Kg																					
5	Cabbage, kale, escarole, broccoli	Kg																					

Source: 1 – Bought in the shop 2 –Own production 3 – Received as a gift

Household nutrition			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
2 VEGETABLES	Cont		Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
6 Spinach, mangle fresh and frozen	Kg																						
7 Cucumber	Kg																						
8 Tomatoes (fresh)	Kg																						
9 Peppers (fresh frozen and dry)	Kg																						
10 Lettuce	Kg																						
11 Peas, string beans, fresh and frozen	Kg																						
12 Mushrooms, fungus	Kg																						
13 Other fresh vegetables	Kg																						
14 Pickled vegetables	Kg																						
15 Manufactured (ketchup, canned)	Kg																						

3 FRESH FRUIT AND FRUIT PRODUCTS			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
	Cont		Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1 Apple	Kg																						
2 Pear	Kg																						
3 Cherries and sour cherries	Kg																						
4 Apricot and peach	Kg																						
5 Plum	Kg																						
6 Grapes	Kg																						
7 Other fresh fruit	Kg																						
8 Orange, lemon, tangerine	Kg																						

Source: 1 – Bought in the shop 2 – Own production 3 – Received as a gift

Household nutrition		Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
3 FRESH FRUIT AND FRUIT PRODUCTS	Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
9 Other citrus fruit, bananas, pineapple	Kg																					
10 Walnut, hazelnut and almond	Kg																					
11 Dried fruit, plums, figs	Kg																					
12 Jam, stewed fruit, marmalade	Kg																					

4 FRESH MEAT AND MEAT PRODUCTS		Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
	Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1 Beef	Kg																					
2 Baby beef	Kg																					
3 Veal	Kg																					
4 Pork	Kg																					
5 Piglet meat	Kg																					
6 Mutton and goat	Kg																					
7 Lamb and kid	Kg																					
8 Poultry	Kg																					
9 Other fresh meat and offal	Kg																					
10 Dried and cooked bacon	Kg																					
11 Dried meat – boneless	Kg																					
12 Dried meat – with bones	Kg																					
13 Salami and sausages – various kinds	Kg																					
14 Hot dogs, bratwurst	Kg																					

Source: 1 – Bought in the shop 2 –Own production 3 – Received as a gift

Household nutrition			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
4 FRESH MEAT AND MEAT PRODUCTS	Cont		Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
15	Other sausage products	Kg																					
16	Canned meat and meat products	Kg																					

5 FRESH FISH AND FISH PRODUCTS			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
	Cont		Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1	Fresh and frozen freshwater fish	Kg																					
2	Fresh and frozen salt-water fish	Kg																					
3	Fish products	Kg																					

6 FATS			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
	Cont		Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1	Pig fats, leaf fat, suet	Kg																					
2	Edible oil	L																					
3	Other vegetable fats	Kg																					
4	Margarine	Kg																					

7 MILK AND DAIRY PRODUCTS			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
	Cont		Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1	Fresh milk	L																					
2	Sour milk and yogurt	L																					
3	Home-made cheese (all kinds)	Kg																					
4	Other cheeses (caciacavallo)	Kg																					
5	Butter	Kg																					

Source: 1 – Bought in the shop 2 – Own production 3 – Received as a gift

Household nutrition		Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
7 MILK AND DAIRY PRODUCTS	Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
6 "Kajmak", cream, sour cream	Kg																					
7 Ice-cream	Gr																					
8 Other dairy products	Kg																					
9 Eggs (chicken and other)	Piece																					

8 OTHER PRODUCTS		Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
	Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1 Sugar (refined, lump sugar, icing)	Kg																					
2 Salt	Gr																					
3 Honey	Kg																					
4 Chocolate – all kinds	Kg																					
5 Sweets, cookies, biscuits, bonbons	Kg																					
6 Salties, peanut, salty flips, sticks, potato chips	Kg																					
7 Cocoa	Kg																					
8 Coffee (green, roasted, ground)	Kg																					
9 Infant food	Kg																					
10 Spices	Gr																					
11 Teas	Gr																					
12 Mayonnaise, mustard, ketchup	Kg																					
13 Instant soups	Kg																					
14 Instant meals	Kg																					

IF YOU ARE NOT ABLE TO ESTIMATE DAILY CONSUMPTION OF SOME ARTICLE (DUE TO SMALL QUANTITIES), WRITE DOWN THE CONSUMPTION OF THIS ARTICLE FOR THE WHOLE WEEK. Example: Weekly consumption: salt 100gr, 20 Dinars spent

Source: 1 – Bought in the shop 2 –Own production 3 – Received as a gift

Household nutrition			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
8 OTHER PRODUCTS		Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
15	Instant pudding, Creams	Kg																					
16	Other non mentioned	Kg																					

9 DRINKS			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
		Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1	Wine	L																					
2	Beer	L																					
3	Brandy (Rakija)	L																					
4	Other alcoholic drinks	L																					
5	Mineral water, carbonated/non-carbonated	L																					
6	Carbonated and non-carbonated soft drinks	L																					
7	Natural fruit juices	L																					

10 SMOKING			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
		Cont	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1	Cigarettes	Piece.																					
2	Tobacco	Gr.																					

11 Food and drinks outside the household			Dinars			Dinars			Dinars			Dinars			Dinars			Dinars			Dinars		
1	Food at work/school																						
2	Food in restaurant																						
3	Drinks at work/school																						
4	Drinks in restaurant																						

Page for respondent to enter uncertain items. Interviewer to enter in appropriate place in diary

Source: 1 – Bought in the shop 2 –Own production 3 – Received as a gift

			Day 1			Day 2			Day 3			Day 4			Day 5			Day 6			Day 7		
			Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source	Quantity	Dinars	Source
1																							
2																							
3																							
4																							
5																							
6																							
7																							
8																							
9																							
10																							
11																							
12																							
13																							
14																							
15																							
16																							
17																							

Municipality code:

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Enumeration Area code in the Municipality:

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Household code in the Enumeration Area:

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Module: 5.2 Use of non-food products and services

(PAY ATTENTION TO THE REFERENCE PERIOD QUESTIONS REFER TO)

**FOR ALL ARTICLES/SERVICES PURCHASED IN INSTALEMENTS, USING CHEQUES, THE FULL PRICE AT THE TIME OF PURCHASE IS SPECIFIED,
REGARDLESS OF THE NUMBER OF INSTALMENTS AND THE PAYMENT PERIOD**

1. Clothes and leather goods (for previous 3 months)		Exact amount paid, or estimated total value (dinars)			
		Shops, department stores, shopping centres, boutiques, kiosks	Market or from an individual	Self-production	Received as gift
1	Woollen, synthetic, silk and cotton fabrics, materials	1			
2	Wool for knitting (synthetic, cotton, combined)	2			
3	Overcoat, raincoat, jacket	3			
4	Suits, sets (jacket and trousers / jacket and skirt)	4			
5	Other ready-made clothing (skirts, blouses, shirts, dresses, trousers...)	5			
6	Leather clothing	6			
7	Knitwear (pullover, caps, shawls, gloves, etc.)	7			
8	Underwear, pyjamas	8			
9	Hosiery	9			
10	Leather goods (handbags, suitcases, travelling bags, wallets, gloves...)	10			
11	Other clothing articles	11			

2. Footwear (for previous 3 months)		Exact amount paid, or estimated total value (dinars)			
		Shops, department stores, shopping centres, boutiques, kiosks	Market or from an individual	Self-production	Received as gift
1	Men's sandals, shoes and boots	1			
2	Women's sandals, shoes and boots	2			
3	Children's sandals, shoes and boots	3			
4	Athletic shoes	4			
5	Slippers	5			
6	Rubber boots and other rubber footwear	6			
7	Footwear care kits	7			
8	Other footwear	8			

3. Personal hygiene and household cleaning products (for previous month)		Exact amount paid, or estimated total value (dinars)		
		Shops, department stores, shopping centres, boutiques, kiosks	Market or from an individual	Received as gift
1	Toilet soap and laundry soap	1		
2	Toilet paper and sanitary towels	2		
3	Baby diapers (disposable)	3		
4	Toothpaste and toothbrushes	4		
5	Creams, powders and makeup	5		
6	Razor blades, paste, soap, shaving cream	6		
7	Shampoos, conditioners, oils and gels for hair care	7		
8	Articles for laundry washing and maintenance (detergents, softeners, etc.)	8		
9	Dishwashing liquid (for hand and machine wash) and products for care	9		
10	Floor-care, furniture-care, bathroom-care and window-care products	10		
11	Other cleaning and hygiene maintenance products	11		

4. Textile goods and small household furnishings (for previous 3 months)		Exact amount paid, or estimated total value (dinars)			
		Shops, department stores, shopping centres, boutiques, kiosks	Market or from an individual	Self-production	Received as gift
1	Carpets and floor coverings	1			
2	Mattress, pillow, quilt, etc.	2			
3	Blankets and bedspreads	3			
4	Bed linen (sheets, covers, pillowcases...)	4			
5	Curtains, drapes, etc.	5			
6	Other textile articles	6			
7	Dishes and porcelain, glass and ceramic products	7			
8	Metal dishes and cutlery	8			
9	Plastic dishes and cutlery	9			
10	Small appliances (mixer, toaster, coffee grinder, hairdryer, iron ...)	10			
11	Lighting equipment of all kinds (chandeliers, lamps...)	11			
12	Decorative products	12			
13	Other small home furnishings	13			

5. Sports, culture, entertainment (for previous month)		Exact amount paid, or estimated total value (dinars)		
		Shops, department stores, shopping centres, boutiques, kiosks	Market or from an individual	Received as gift
1	Professional and popular books (except textbooks)	1		
2	Children's toys	2		
3	Electronic games, Game boy, Sega play station - purchase and renting	3		
4	Newspapers and magazines	4		
5	CDs and cassettes (audio and video), purchase and renting	5		
6	Film and developing photographs, tapes for cameras	6		
7	Sports equipment (bicycle, rackets, balls, hunting and fishing equipment, etc.)	7		
8	Food, medicaments and other expenditures for pets	8		
Non-goods related expenditure for sports, entertainment and culture		Amount in Dinars		
9	Tickets for cultural events	9		
10	Tickets for sports events	10		
13	Use of sports terrains, swimming pools, recreation, gyms, etc.	13		
14	Radio, TV, cable TV, satellite TV subscription	14		
15	Internet subscription	15		
16	Travelling, accommodation, transport, pocket money, etc.	16		
17	Entertainment centres (video games, slot machines, pinball machines, amusement parks ...)	17		
18	Games of chance, lottery, bingo, sports betting	18		
19	Extraordinary expenses (business escort, massage...)	19		

6. Services (for previous 3 months)		Amount in dinars
1	Sewing, cleaning and maintenance of clothes	1
2	Footwear repairs and maintenance	2
3	Production and maintenance of household textile articles	3
4	Help in the home (cleaning, cooking...)	4
5	Care for the elderly and ill	5
6	Hair, facial skin and body care (masseuse, hairdresser, beautician, pedicurist, etc.)	6
7	Private, individual lessons (mathematics, English, computers, etc.)	7

7. Automobile and other vehicles (non-agricultural) (for previous 3 months)		Exact amount paid, or estimated total value (dinars)			
		Shops, services	Market or from an individual	Own labour	Received as gift
1 Automobile and other non-agricultural vehicles – purchase	1				
2 Tyres, external and inner tubes	2				
3 Vehicle parts	3				
4 Vehicle repair	4				
5 Vehicle maintenance (car wash and lubrication)	5				
6 Garage and vehicle parking	6				
7 Fuels and vehicles lubricants	7				
8 Other equipment and vehicle related expenditures	8				
9 Vehicle safety and roadworthiness test and registration	9				
10 Vehicle insurance - basic, with registration	10				

8. Valuables (for previous 3 months)		Exact amount paid, or estimated total value (dinars)			
		Shops, department stores, shopping centres, boutiques	Market or from an individual	Self-production	Received as gift
1 Watches, wristwatches, wall clocks, pocket watches, jewellery					

9. Insurance (total amount for all household members) (for previous month)		Amount in dinars	
1 Life	1		
2 Apartment, house	2		
3 Home appliances	3		
4 Automobile, motor, motorcycle – additional Casco	4		
5 Harvest, crops	5		
6 Agricultural machines	6		

10. Taxes and contributions, payments, gifts and savings (for previous 3 months)		Amount in dinars	
1	Taxes (for house, apartment, holiday home, etc.)	1	
2	Contributions, self-contributions for local community	2	
3	Customs dues	3	
4	Payments (individual) for pension and disability insurance	4	
5	Court and administrative fees	5	
6	Solidarity resources	6	
7	Fines for traffic violations and other violations	7	
8	Lawyer's services	8	
9	Credit and loan payments	9	
10	Payment of debts owed to persons who loaned you money	10	
11	Membership in social and political organizations, religious communities	11	
12	Savings deposits	12	
13	Custom/tradition-related costs (birthdays, weddings, funerals etc.)	13	
14	Alimony, financial support of relatives	14	
15	Expenditure for assistance, gifts, donations	15	
16	Purchase of shares and bonds	16	
17	Informal payments (bribes), health and education excluded	17	

11. Transport and PTT (for previous month)		Amount in dinars	
1	Inter-city transport	1	
2	City transport (taxi, bus, concessions, passes, etc.)	2	
3	PTT charges, postage costs	3	

12. Family income over the previous 3 months			Amount in dinars	
1	Savings, loans, insurance, games of chance	Interest on savings	1	
2		Withdrawal from savings (bank or home savings)	2	
3		Debenture bonds	3	
4		Income from life and property insurance	4	
5		Games of chance, lottery, betting	5	
6		Sale of shares	6	
7		Dividends	7	
8	Inheritance, assistance and gifts from relatives and friends, humanitarian aid	Inheritance	8	
9		Assistance and gifts from friends/relatives in the country	9	
10		Assistance and gifts from friends/relatives living abroad	10	
11		Humanitarian aid (total amount)	11	
12	Incomes from ownership, rental, sale of property, etc.	Incomes from rental of business/office space	12	
13		Incomes from sale of business/office space	13	
14		Incomes from rental of real-estate as residence	14	
15		Incomes from sale of real-estate as residence	15	
16		Rental out agricultural land	16	
17		Sale of agricultural land	17	
18		Sale of jewellery and valuables	18	
19		Sale of cars and agricultural machinery	19	
20		Sale of furniture and other durables	20	
21		Income from rental of non-durable goods (buses, trucks, non-agricultural machines...)	21	
22		Other incomes (incomes not registered so far)	22	

BM1. In your opinion, what would be the minimum monthly amount with which your household would be able to cover its basic existential needs?

_____ dinars 2. Don't know

BM2. How would you rate the current financial status of your household?

1. Very bad 2. Bad 3. Neither good nor bad 4. Good 5. Very good 6. Don't know →

Module: 6 Education

6.1. Pre-school children			Children up to 7 years of age. ENTER PERSON NUMBER from “Demography”					→
D1	Who is responding on behalf of the child?	Mother	1	1	1	1	1	D1a
		Father	2	2	2	2	2	
		Grandmother/father	3	3	3	3	3	
		Guardian	4	4	4	4	4	
		Other	5	5	5	5	5	
D1a	Is the child in kindergarten or preschool?	Yes kindergarten	1	1	1	1	1	D2
		Yes pre-school	2	2	2	2	2	D2a
		No (aged up to 6 years)	3	3	3	3	3	D3
		No (aged 6 and above)	4	4	4	4	4	D3a
D2	What type of kindergarten is it?	Public/state	1	1	1	1	1	D6
		Private	2	2	2	2	2	
		Religious	3	3	3	3	3	
D2a	What type of preschool is it?	Public/state	1	1	1	1	1	D6
		Private	2	2	2	2	2	
		Religious	3	3	3	3	3	
D3	If not attending kindergarten, what is the reason? (code one only)	Child is too young	1	1	1	1	1	D4
		Service is too expensive	2	2	2	2	2	
		Too far away	3	3	3	3	3	
		Bad quality of service	4	4	4	4	4	
		No need/prefers to stay home	5	5	5	5	5	
		No vacancies or places available	6	6	6	6	6	
		Other	7	7	7	7	7	
D3a	If not attending pre-school institution, what is the reason? (code one only)	Service is too expensive	1	1	1	1	1	D4
		Too far away	2	2	2	2	2	
		Bad quality of service	3	3	3	3	3	
		No access for PWDs	4	4	4	4	4	
		Other	5	5	5	5	5	

D4	Do you pay someone to care for the child during the week?	Yes	1	1	1	1	1	D5
		No	2	2	2	2	2	D10
D5	What is the monthly amount paid for child care? (Total amount in dinars for each child)		Din_____	Din_____	Din_____	Din_____	Din_____	D10
D6	How many days a week does the child attend kindergarten/pre-school institution?		Days_____	Days_____	Days_____	Days_____	Days_____	D7
D7	How many hours a day does the child spend in the kindergarten/pre-school institution?		Hrs_____	Hrs_____	Hrs_____	Hrs_____	Hrs_____	D8
D8	What is the monthly amount paid for the kindergarten or preschool (Total amount in dinars for each child)		Din_____	Din_____	Din_____	Din_____	Din_____	D9
D9	What is the monthly amount for transport of child to kindergarten/pre-school institution? (Total amount in dinars for each child)		Din_____	Din_____	Din_____	Din_____	Din_____	D11
D10	(If child is more than 36 months old) Does the child attend 2 or more organised classes (private lessons) a week? (language, music, sports...)	Yes	1	1	1	1	1	D11
		No	2	2	2	2	2	O1
D11	What is the monthly cost of organised classes/private lessons? (Total amount in dinars for each child)		Din_____	Din_____	Din_____	Din_____	Din_____	O1

6.2. Primary and secondary school pupils				Pupils from 7 to 19 years of age. ENTER PERSON NUMBER from “Demography”					→
O1	Which school is the child currently attending?	Primary school		1	1	1	1	1	O2
		Vocational school – 1 year		2	2	2	2	2	
		Vocational school – 2 years		3	3	3	3	3	
		Three-year secondary school		4	4	4	4	4	
		Four-year secondary school		5	5	5	5	5	
		Four-year art school		6	6	6	6	6	
		Special school for children with disabilities		7	7	7	7	7	
		Gymnasium		8	8	8	8	8	
		Specialist education following secondary education lasting one year		9	9	9	9	9	
		Does not attend school		0	0	0	0	0	
O2	Which grade is the child currently attending?								O3
O3	Which grade did the child attend during the previous school year?								O5
O4	Why is the child currently not attending school? (code one only)	No financial means		1	1	1	1	1	→ end
		School is too far away		2	2	2	2	2	
		Completed desired education level		3	3	3	3	3	
		No adequate school exists		4	4	4	4	4	
		Expelled		5	5	5	5	5	
		Employed		6	6	6	6	6	
		No access for PWDs		7	7	7	7	7	
		Other		8	8	8	8	8	
O5	How much has been spent for the education of children in primary and secondary school during the 2006-07 school year? Specify amount for each child in dinars (code all that apply)	Textbooks, books	1	Din_____	Din_____	Din_____	Din_____	Din_____	O6
		Other school materials (notebooks, bags, pencils)	2	Din_____	Din_____	Din_____	Din_____	Din_____	
		School meals	3	Din_____	Din_____	Din_____	Din_____	Din_____	
		Transport to school	4	Din_____	Din_____	Din_____	Din_____	Din_____	
		Excursions, recreation	5	Din_____	Din_____	Din_____	Din_____	Din_____	
		Support for school repairs and maintenance	6	Din_____	Din_____	Din_____	Din_____	Din_____	
		Membership in children's/youth organisations	7	Din_____	Din_____	Din_____	Din_____	Din_____	
		Gifts for school staff	8	Din_____	Din_____	Din_____	Din_____	Din_____	
		Other	9	Din_____	Din_____	Din_____	Din_____	Din_____	
O6	Does the child attend 2 or more organised classes (private lessons) a week? (language, music, sports, school subject)	Yes	1	1	1	1	1	O7	
		No	2	2	2	2	2	O8	
O7	What is the monthly cost of organised classes/private lessons? (Total amount in dinars for each child)			Din_____	Din_____	Din_____	Din_____	Din_____	O8
O8	Did someone outside your household participate in your education costs during the 2006-07 school year? (Circle code of response and enter estimated amount in dinars for each child) (code all that apply)	Relative/friend from Serbia	1	Din_____	Din_____	Din_____	Din_____	Din_____	O9
		Relative/friend from abroad	2	Din_____	Din_____	Din_____	Din_____	Din_____	
		Humanitarian organisation	3	Din_____	Din_____	Din_____	Din_____	Din_____	
		State/company scholarship	4	Din_____	Din_____	Din_____	Din_____	Din_____	
		Other	5	Din_____	Din_____	Din_____	Din_____	Din_____	
		Covered all costs on our own	6						

6.3. Post-secondary non-university and university education (students)				Students ENTER PERSON NUMBER from "Demography"					→
O9	Where is the student currently living?	In apartment with family/own apartment/cousin		1	1	1	1	1	O11
		In rented apartment/room		2	2	2	2	2	
		In student hall of residence		3	3	3	3	3	
O10	What is the monthly amount for renting an apartment/room, or a room in a hall of residence? <i>Exclude meals. Enter monthly amount in dinars.</i>			Din_____	Din_____	Din_____	Din_____	Din_____	O11
O11	How much did your household spend on the student's education during the 2006-07 academic year? <i>Interviewer: Enter amount for each individual respondent in dinars (code all that apply)</i>	Tuition fees for 2006/07		1	Din_____	Din_____	Din_____	Din_____	O12
		Textbooks, books, scripts		2	Din_____	Din_____	Din_____	Din_____	
		Other materials (notebooks, bags, pencils)		3	Din_____	Din_____	Din_____	Din_____	
		Transport to university/post-secondary non-university institution		4	Din_____	Din_____	Din_____	Din_____	
		Meals in canteen /hall of residence		5	Din_____	Din_____	Din_____	Din_____	
		University administrative fees (issuance of certificates, diplomas)		6	Din_____	Din_____	Din_____	Din_____	
		Membership fees in student societies		7	Din_____	Din_____	Din_____	Din_____	
		Gifts to teaching staff		8	Din_____	Din_____	Din_____	Din_____	
		Other		9	Din_____	Din_____	Din_____	Din_____	
O12	Does the student attend organised classes or private lessons (languages, music, academic subjects)		Yes	1	1	1	1	1	O13
			No	2	2	2	2	2	O14
O13	What is the monthly cost of organised classes/private lessons? <i>(Total amount in dinars for each student)</i>			Din_____	Din_____	Din_____	Din_____	Din_____	O14
O14	Did someone outside your household participate in your education costs during the 2006-07 academic year? <i>Interviewer: Circle the code of the answer selected by respondent and enter the estimated amount in dinars for each student (code all that apply)</i>	Relative/friend from Serbia	1	Din_____	Din_____	Din_____	Din_____	Din_____	→
		Relative/friend from abroad	2	Din_____	Din_____	Din_____	Din_____	Din_____	
		Humanitarian organisation	3	Din_____	Din_____	Din_____	Din_____	Din_____	
		State/company scholarship	4	Din_____	Din_____	Din_____	Din_____	Din_____	
		Other	5	Din_____	Din_____	Din_____	Din_____	Din_____	
		Covered all costs on our own	6						

Module: 7 Employment status

Note: Refers to all household members aged 15 years and over!

EMPLOYMENT STATUS – PART C1

ALL HOUSEHOLD MEMBERS AGED 15 YEARS OVER MAIN JOB - page 1			HOUSEHOLD MEMBERS								→
Sequence number of household member →			Head	2	3	4	5	6	7	8	
C1.1 During the previous week, did you work at least one hour at any job for which you received payment (<i>or will be paid</i>) in cash or in kind?	Yes		1	1	1	1	1	1	1	1	C1.3
	No, but have a job from which you were absent or which you did perform do all of last week		2	2	2	2	2	2	2	2	C1.2
	No, was attending military service		3	3	3	3	3	3	3	3	C2.1
	No, did not perform any job, nor do you have a job you were absent from last week		4	4	4	4	4	4	4	4	C2.1
C1.2 Reason for absence from work during last week:	Vacation		1	1	1	1	1	1	1	1	C1.3
	Illness		2	2	2	2	2	2	2	2	
	Maternity/parental leave or care for child		3	3	3	3	3	3	3	3	
	Technical / economic reasons (temporary closing down of company, work reduction, forced leave, etc.)		4	4	4	4	4	4	4	4	
	Strike / suspension		5	5	5	5	5	5	5	5	
	Schooling, training related to change of occupation, training		6	6	6	6	6	6	6	6	
	Redistribution of working hours		7	7	7	7	7	7	7	7	
	Not the season for your work, bad weather		8	8	8	8	8	8	8	8	
	Paid leave		9	9	9	9	9	9	9	9	
	Unpaid leave:	Up to 3 months	10	10	10	10	10	10	10	10	C2.1
		Over 3 months	11	11	11	11	11	11	11	11	
	Other		12	12	12	12	12	12	12	12	C1.3
Respondents with codes 1 to 10 or code 12 in C1.2, answer for job they have been absent from											

MAIN JOB - page 2			HOUSEHOLD MEMBERS								→
Sequence number of household member →			Head	2	3	4	5	6	7	8	
C1.3 What is your status at this job:	Employer who hires other workers	Owner / co-owner of enterprise - institution	1	1	1	1	1	1	1	1	C1.4
		Owner / co-owner of shop, agricultural estate, doctor's surgery, office	2	2	2	2	2	2	2	2	
	Self-employed without employees		3	3	3	3	3	3	3	3	
	Employee		4	4	4	4	4	4	4	4	
	Family worker		5	5	5	5	5	5	5	5	
C1.4 What rights do you receive at this job: (possibility of more than one answer)	Salary or part of salary		1	1	1	1	1	1	1	1	C1.5
	Retirement insurance (pension)		2	2	2	2	2	2	2	2	
	Health insurance		3	3	3	3	3	3	3	3	
	Do not receive any rights		4	4	4	4	4	4	4	4	
C1.5 Within what form of ownership do you perform the job:	Private – registered		1	1	1	1	1	1	1	1	C1.6
	Private – unregistered		2	2	2	2	2	2	2	2	
	State		3	3	3	3	3	3	3	3	
	Social		4	4	4	4	4	4	4	4	
	Other		5	5	5	5	5	5	5	5	
C1.6 Do you perform this job on the basis of:	A written contract, decision, license, etc		1	1	1	1	1	1	1	1	C1.7
	Oral contract with employer		2	2	2	2	2	2	2	2	
	Without a contract		3	3	3	3	3	3	3	3	

MAIN JOB - page 3	HOUSEHOLD MEMBERS								→
Sequence number of household member →	Head	2	3	4	5	6	7	8	
C1.7 What is your occupation at this job:									C1.8
ISCO 88 Occupation code to 4 digits									
C1.8 Area of activity within which you are performing the job:									C1.9
NACE Activity code to 3 digits									

MAIN JOB - page 4		HOUSEHOLD MEMBERS								→
Sequence number of household member →		Head	2	3	4	5	6	7	8	
C1.9 How many people (including you) work with you on the job which you perform?										C1.10
C1.10 How many hours did you work on that job during the <u>previous</u> week?		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	C1.11
C1.11 How many hours did you work on that job during the <u>previous</u> month?	Enter number of hours	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	C1.12
	Don't know	999	999	999	999	999	999	999	999	

C1.12 Where do you usually perform this job:	In official area (office, factory, doctor's surgery, saloon, etc.)	1	1	1	1	1	1	1	1	C1.13
	On agricultural estate / farm	2	2	2	2	2	2	2	2	
	In your own home	3	3	3	3	3	3	3	3	
	In someone else's home	4	4	4	4	4	4	4	4	
	In the field 'door to door'	5	5	5	5	5	5	5	5	
	In vehicle	6	6	6	6	6	6	6	6	
	In the street, at the market, etc.	7	7	7	7	7	7	7	7	
	Other	8	8	8	8	8	8	8	8	

C1.13 Do you perform this job:	As a permanent job	1	1	1	1	1	1	1	1	C1.14
	As a temporary job (fixed contractual period)	2	2	2	2	2	2	2	2	
	Seasonally	3	3	3	3	3	3	3	3	
	Occasionally	4	4	4	4	4	4	4	4	

C1.14 How many years have you been performing this job? (enter zero if less than 1 year)										C1.15
C1.15 How many years have you been working for (in <u>total</u> on all jobs)? (enter zero if less than 1 year)										C1.16

C1.16 For which month and year did you receive your last salary?	Month	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	C1.17
	Year									

ADDITIONAL JOB - page 1		HOUSEHOLD MEMBERS								→
Sequence number of household member →		Head	2	3	4	5	6	7	8	
C1.17 In the last week, did you perform any additional job, besides this one, for which you were (or will be) paid?	Yes	1	1	1	1	1	1	1	1	C1.18
	No	2	2	2	2	2	2	2	2	C3.1
C1.18 Do you perform this job:	Regularly (every month)	1	1	1	1	1	1	1	1	C1.19
	Seasonally (during the season)	2	2	2	2	2	2	2	2	
	Occasionally (5-6 times a year)	3	3	3	3	3	3	3	3	
	Rarely (1-2 times a year)	4	4	4	4	4	4	4	4	
	On a random basis	5	5	5	5	5	5	5	5	
C1.19 What is your status at the additional job:	Self-employed with employees	1	1	1	1	1	1	1	1	C1.20
	Self-employed without employees	2	2	2	2	2	2	2	2	
	Employee	3	3	3	3	3	3	3	3	
	Family worker	4	4	4	4	4	4	4	4	
C1.20 What rights do you receive at this additional job: (possibility of more than one answer)	Salary or part of salary	1	1	1	1	1	1	1	1	C1.21
	Retirement insurance (pension)	2	2	2	2	2	2	2	2	
	Health insurance	3	3	3	3	3	3	3	3	
	Do not receive any rights	4	4	4	4	4	4	4	4	
C1.21 Within what form of ownership do you perform the job:	Private - registered	1	1	1	1	1	1	1	1	C1.22
	Private - unregistered	2	2	2	2	2	2	2	2	
	State	3	3	3	3	3	3	3	3	
	Social	4	4	4	4	4	4	4	4	
	Other	5	5	5	5	5	5	5	5	

C1.22 Do you perform this additional job on the basis of:	A written contract, decision, license, etc	1	1	1	1	1	1	1	1	C1.23
	Oral contract with employer	2	2	2	2	2	2	2	2	
	Without a contract	3	3	3	3	3	3	3	3	

ADDITIONAL JOB - page 2	HOUSEHOLD MEMBERS								→
Sequence number of household member →	Head	2	3	4	5	6	7	8	
C1.23 What is your occupation at this additional job:									C1.24
ISCO 88 Occupation code to 4 digits									

C1.24 Area of activity within which you are performing the additional job:									C1.25
NACE Activity code to 3 digits									

ADDITIONAL JOB - page 3			HOUSEHOLD MEMBERS								→
Sequence number of household member →			Head	2	3	4	5	6	7	8	
C1.25 Where do you usually perform this additional job:	In official area (office, factory, doctor's surgery, saloon, etc.)		1	1	1	1	1	1	1	1	C1.26
	On agricultural estate / farm		2	2	2	2	2	2	2	2	
	In your own home		3	3	3	3	3	3	3	3	
	In someone else's home		4	4	4	4	4	4	4	4	
	In the field 'door to door'		5	5	5	5	5	5	5	5	
	In vehicle		6	6	6	6	6	6	6	6	
	In the street, at the market, etc.		7	7	7	7	7	7	7	7	
	Other		8	8	8	8	8	8	8	8	
C1.26 When do you perform this additional job:	During the main job		1	1	1	1	1	1	1	1	C1.27
	After the main job		2	2	2	2	2	2	2	2	
	During the weekend		3	3	3	3	3	3	3	3	
	No fixed rule, whenever necessary		4	4	4	4	4	4	4	4	
C1.27 The main motive for this additional job is:	Basic survival		1	1	1	1	1	1	1	1	C1.28
	A better standard (car, travelling...)		2	2	2	2	2	2	2	2	
	Helping children, parents, etc.		3	3	3	3	3	3	3	3	
	Saving for the future		4	4	4	4	4	4	4	4	
	Personal satisfaction, hobby		5	5	5	5	5	5	5	5	
	Other		6	6	6	6	6	6	6	6	
C1.28 How many hours did you spend on that additional job? (enter number of hours worked)	a) During the previous week		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	C3.1
	b) During previous month	Number of hours	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
		Don't know	999	999	999	999	999	999	999	999	
GO TO C3.1 →											

EMPLOYMENT STATUS – PART C2

PREVIOUS WORK EXPERIENCE - page 1		HOUSEHOLD MEMBERS WHO DID NOT WORK DURING THE PREVIOUS WEEK								→
Sequence number of household member →		Head	2	3	4	5	6	7	8	
C2.1 Have you ever worked before?	Yes	1	1	1	1	1	1	1	1	C2.2
	No	2	2	2	2	2	2	2	2	C2.9
C2.2 When did you cease to perform your last paid job? (enter year)										C2.3
C2.3 Main reason for leaving last paid job:	Retirement	1	1	1	1	1	1	1	1	C2.4
	Dismissed	2	2	2	2	2	2	2	2	
	Job was of a seasonal or temporary character	3	3	3	3	3	3	3	3	
	Company closed down / liquidation, bankruptcy	4	4	4	4	4	4	4	4	
	Personal - family reasons (illness, schooling, care for children, etc.)	5	5	5	5	5	5	5	5	
	Left to serve military service	6	6	6	6	6	6	6	6	
	Drafted for the war	7	7	7	7	7	7	7	7	
	Other reasons	8	8	8	8	8	8	8	8	
C2.4 What was your status at your last paid job:	Self-employed with employees	1	1	1	1	1	1	1	1	C2.5
	Self-employed without employees	2	2	2	2	2	2	2	2	
	Employee	3	3	3	3	3	3	3	3	
	Family worker	4	4	4	4	4	4	4	4	
C2.5 Total number of years on paid jobs? (enter zero if less than 1 year)										C2.6
C2.6 Did you receive severance pay due to termination of employment?	Yes	1	1	1	1	1	1	1	1	C2.7
	No	2	2	2	2	2	2	2	2	

PREVIOUS WORK EXPERIENCE - page 2	HOUSEHOLD MEMBERS WHO DID NOT WORK DURING THE PREVIOUS WEEK								→
Sequence number of household member →	Head	2	3	4	5	6	7	8	
C2.7 What was your occupation at your last paid job:									C2.8
ISCO 88 Occupation code To 4 digits									
C2.8 Area of activity within which last paid job performed:									C2.9
NACE Activity code to 3 digits									
FOR RESPONDENTS AGED 75 AND OVER, GO TO C3.1									

JOB-HUNTING - page 1			HOUSEHOLD MEMBERS WHO DID NOT WORK DURING THE PREVIOUS WEEK								→
Sequence number of household member (Only for persons old 15 to 74 years) →			Head	2	3	4	5	6	7	8	
C2.9 Did you look for a job during the previous 4 weeks?	Yes		1	1	1	1	1	1	1	1	C2.10
	No		2	2	2	2	2	2	2	2	C2.12
C2.10 How long have you been looking for a job:	Less than 1 month		1	1	1	1	1	1	1	1	C2.11
	1-2 months		2	2	2	2	2	2	2	2	
	3-5 months		3	3	3	3	3	3	3	3	
	6-11 months		4	4	4	4	4	4	4	4	
	12-17 months		5	5	5	5	5	5	5	5	
	18-23 months		6	6	6	6	6	6	6	6	
	2-4 years		7	7	7	7	7	7	7	7	
	5-7 years		8	8	8	8	8	8	8	8	
	8-10 years		9	9	9	9	9	9	9	9	
	Over 10 years		10	10	10	10	10	10	10	10	
C2.11 What job-hunting methods did you use during the previous 4 weeks: (possibility of more than one answer)	Through the employment bureau		1	1	1	1	1	1	1	1	C2.13
	Direct contact with employer		2	2	2	2	2	2	2	2	
	Through relatives, friend, acquaintances, etc.		3	3	3	3	3	3	3	3	
	Responded to advertisements		4	4	4	4	4	4	4	4	
	Took a test, participated in interview or assessment		5	5	5	5	5	5	5	5	
	Studied all advertisements		6	6	6	6	6	6	6	6	
	Other method used		7	7	7	7	7	7	7	7	
	Attempted to start own business:	Searched for location, estate, equipment	8	8	8	8	8	8	8	8	
		Applied for permit, license, financial resources	9	9	9	9	9	9	9	9	
	Waited for call from employment services		10	10	10	10	10	10	10	10	
	Waited for results of test or interview		11	11	11	11	11	11	11	11	
	Did not take any steps		12	12	12	12	12	12	12	12	

JOB-HUNTING - page 2			HOUSEHOLD MEMBERS WHO DID NOT WORK DURING THE PREVIOUS WEEK								→
Sequence number of household member →			Head	2	3	4	5	6	7	8	
C2.12 Why did you not look for a job:	You have lost hope in the possibility of finding a job		1	1	1	1	1	1	1	1	C2.13
	You have already found a job you will start working on:	Within 3 months	2	2	2	2	2	2	2	2	
		In more than 3 months	3	3	3	3	3	3	3	3	
	Illness or inability to work		4	4	4	4	4	4	4	4	
	Personal or family reasons (housewife)		5	5	5	5	5	5	5	5	
	Education / training		6	6	6	6	6	6	6	6	
	Retired		7	7	7	7	7	7	7	7	
	You have means to provide for a living (property, etc.)		8	8	8	8	8	8	8	8	
	You expect to return to work, waiting for the season		9	9	9	9	9	9	9	9	
	Serving military service		10	10	10	10	10	10	10	10	
	Old age		11	11	11	11	11	11	11	11	
	Other reasons		12	12	12	12	12	12	12	12	
C2.13 If you were offered a job now, would you be able to start working within 2 weeks?		Yes	1	1	1	1	1	1	1	1	C2.14
		No	2	2	2	2	2	2	2	2	C3.1
C2.14 What is the minimum salary you would agree to work for? (in dinars)											C3.1

EMPLOYMENT STATUS - PART C3

ALL HOUSEHOLD MEMBERS OLD 15 YEARS AND MORE		HOUSEHOLD MEMBERS								→
Sequence number of household member →		Head	2	3	4	5	6	7	8	
C3.1 Field of highest level of education completed (enter the name)										C3.2
Type of School coded by RSO										
C3.2 In the last 4 weeks did you attend any school or receive any training?	Yes, Primary	1	1	1	1	1	1	1	1	C3.3
	Yes Secondary School	2	2	2	2	2	2	2	2	
	Yes, College	3	3	3	3	3	3	3	3	
	Yes, University	4	4	4	4	4	4	4	4	
	Yes, Postgraduate, Specialization	5	5	5	5	5	5	5	5	
	Yes, Training at work	6	6	6	6	6	6	6	6	
	Yes, Training in another institution	7	7	7	7	7	7	7	7	
	No	8	8	8	8	8	8	8	8	
C3.3 Are you registered with the employment services in any capacity:	Yes, as a person looking for work	1	1	1	1	1	1	1	1	C3.4
	Yes, in another capacity	2	2	2	2	2	2	2	2	
	No	3	3	3	3	3	3	3	3	
C3.4 Do you receive financial assistance from the employment service?		Yes	1	1	1	1	1	1	1	C4.1
		No	2	2	2	2	2	2	2	

EMPLOYMENT STATUS (INCOME FROM EMPLOYMENT) - PART C4

EMPLOYMENT BASED INCOME		HOUSEHOLD MEMBERS								→
Sequence number of household member →		Head	2	3	4	5	6	7	8	
C4.1 In the last month have you received any of the incomes listed below in C4.2? <i>Read all categories</i>	Yes	1	1	1	1	1	1	1	1	C4.2
	No	2	2	2	2	2	2	2	2	End

EMPLOYMENT BASED INCOME			HOUSEHOLD MEMBERS							
Sequence number of household member →			Head	2	3	4	5	6	7	8
C4.2 Net income for the previous month (in dinars)	Income from main job									
	Total income from additional job									
	Remaining back pay									
	Other allowance from main job (premium, reward, one-time assistance, selling stocks, transport reimbursement, per diems)									
	Temporary allowance for IDPs									
	Severance pay									
	Allowance from Employment Services									
	Pension accomplished in our country	Old age pension								
		Disability Pension								
		Family Pension								
	Foreign pension or part of foreign pension									
	Don't know		a	a	a	a	a	a	a	a
	Refused		b	b	b	b	b	b	b	b

→

Module: 8 Agriculture

AG1	Does your household possess or use any (arable or unarable) land on the territory of central Serbia and Vojvodina?			1. Yes ↓		2. No → AG6
				Surface area		Estimated value (EUR)
AG3	1. Total land owned by all household members (total arable and unarable land)	2. No ↓	1. Yes→	_____ ha	_____ ac.	
	1.1. Of that: arable land	2. No ↓	1. Yes→	_____ ha	_____ ac.	
	2. Rented out (surface area and estimated value received from rent in 2006)	2. No ↓	1. Yes→	_____ ha	_____ ac.	
	3. Rented by household (surface area and estimated value of rent paid in 2006)	2. No ↓	1. Yes→	_____ ha	_____ ac.	
	4. Total land used by household (total owned land (1) – Rented out land (2) + Rented by household land (3))	2. No ↓	1. Yes→	_____ ha	_____ ac.	
	4.1. Of that: arable land	2. No ↓	1. Yes→	_____ ha	_____ ac.	
AG3a	If, in 2006, the household did not cultivate the total used arable land, state the reason. Possible more answers.			1.	Crop rotation	
				2.	Lack of financial means	
				3.	Lack of workforce	
				4.	Lack of equipment	
				5.	Economic instability	
				6.	Other reasons	
AG4	Did you sale any of following products in 2006? If yes, how much did you earn (value in EUR) from the sale of agricultural products in 2006? If no, mark code 2. (No)	Product		Yes		2 No→AG5
		1. Wheat	1 →	EUR		
		2. Maize	1 →	EUR		
		3. Other cereals (rye, barley, oats)	1 →	EUR		
		4. Industrial and fodder plants	1 →	EUR		
		5. Fruit	1 →	EUR		
		6. Vines	1 →	EUR		
		7. Vegetables	1 →	EUR		
		8. Trees	1 →	EUR		
		9. Other agricultural products	1 →	EUR		
AG5	Did you purchase (value in EUR) any of the following resources in 2006? If yes, estimate total costs (in EUR) If no, mark code 2. (No) Possible more answers.	Resources		Yes		2 No→AG6
		1. Seedlings	1 →	EUR		
		2. Seeds	1 →	EUR		
		3. Products for the protection of plants	1 →	EUR		
		4. Mineral fertilizers	1 →	EUR		
		5. Other repromaterials	1 →	EUR		

AG6	Does your household own livestock, poultry or bees?			1. Yes ↓ 2. No →AG11			
AG7	<p>A. How many of the following types of livestock do your household own and what is their estimated value?</p> <p>Interviewer: Circle the code for each type and write down the number of peaces, and estimated value of all pieces of a kind.</p> <p>B. What is the estimated value of the livestock and poultry slaughtered for the households own needs or given as present in 2006?</p> <p>C. How much did your household income did you make from selling each type of livestock in 2006?</p> <p>D. How much did you spend on purchasing each type of livestock in 2006?</p> <p>Remark: For A and B put prices current value</p>		A. Current status		B. Used by household or given as present in 2006	C. Sold in 2006	D. Purchased in 2006
			Pieces	Estimated value	Estimated value	Estimated value	Estimated value
		1.Calf		EUR	EUR	EUR	EUR
		2.Heifer		EUR	EUR	EUR	EUR
		3.Dairy cow		EUR	EUR	EUR	EUR
		4.Horse		EUR	EUR	EUR	EUR
		5.Pig		EUR	EUR	EUR	EUR
		6.Sheep		EUR	EUR	EUR	EUR
		7.Goat		EUR	EUR	EUR	EUR
		8.Poultry		EUR	EUR	EUR	EUR
		9.Beehives		EUR	EUR	EUR	EUR
10.Other livestock		EUR	EUR	EUR	EUR		
AG8	Did your household sell milk in 2006 (cow, sheep and goat), cheese (cow, sheep and goat), wool, eggs and honey? If yes, estimate the total value (in EUR) of the animal products sold.			1. Yes → _____ EUR		2. No ↓	
AG9	Did your household incur any expenses for disease prevention and treatment of livestock, poultry and bees in 2006? If yes, estimate the total value (in EUR), including the value of veterinary interventions and the value of medicines and preventative products purchased subsequently.			1. Yes → _____ EUR		2. No ↓	
AG10	Did your household purchase animal feed in 2006? If yes, estimate the total value (in EUR) of the animal feed purchased (bulk, concentrated).			1. Yes → _____ EUR		2. No ↓	
AG11	Did you pay for any labour on your agricultural production in 2006? If yes, estimate the total expenditure (in EUR) for hired labour.			1. Yes → _____ EUR		2. No ↓	

		Agricultural machines/tools	Possess		Pieces	Estimated value (in EUR)
			No	Yes		
AG12	Does your household possess any of the following machines/tools, how many, and what is the estimated value (in EUR)?	1. Motorcultivator	2↓	1→		
		2. Small tractor (less than 40 hp)	2↓	1→		
		3. Large tractor (more than 40 hp)	2↓	1→		
		4. Combine harvester	2↓	1→		
		5. Attachments and other machines	2↓	1→		
		6. Tools	2↓	1→		
AG13	Did you rent any agricultural machinery in 2006? If yes, how much, in total, did you pay for the machinery rented (in EUR)?				1 Yes → _____ EUR	2 No ↓
AG14	Did you rent out any agricultural machinery in 2006? If yes, what was your total Income (in EUR) from renting out the machinery?				1 Yes → _____ EUR	2 No ↓
AG15	Did your, and in total, how much did your household pay (in EUR) for lubricants, fuels, repairs, spare parts for machinery and equipment, purchase of new machinery and equipment, as well as renovation and construction of new objects for agricultural production, in 2006?	Expenditure		Yes		2 No ↓
		1. Oils and lubricants		1 →	EUR	
		2. Liquid fuels		1 →	EUR	
		3. Machine and equipment repairs, spare parts		1 →	EUR	
		4. Machines and equipment purchased		1 →	EUR	
		5. Renovation and construction of objects		1 →	EUR	
AG16	What was your estimated net income from agricultural goods in 2006?			1 →	EUR	2 No ↓
AG17	Did you irrigate your land in 2006, how, and what were the irrigation costs (in EUR)? More than 1 answer possible.	Irrigation method		Yes		2 No ↓
		1. Own well		1 →	EUR	
		2. Public water-supply		1 →	EUR	
		3. From river		1 →	EUR	
		4. From accumulated water		1 →	EUR	
		5. From lake		1 →	EUR	
AG18	Did your household receive any agricultural subsidies in 2006? (credits, incentives and other non-refundable or refundable aid) More than 1 answer possible.	Source of subsidies		Yes		end
		1. State		1 →	EUR	
		2. Relative		1 →	EUR	
		3. Other		1 →	EUR	

Municipality code:

Number of ED in municipality:

Number of HH in the ED:

Water and Sanitation completed for every **EVEN** numbered dwelling from the "List of chosen dwellings" for the National Sample

WATER			
BO1. The floor on which the dwelling is on <i>Ground 00, first floor 01, second floor 02, etc; cellar 60, basement 70, garret 80, two floors 90.</i>			<input type="text"/> <input type="text"/>
BO2. What is the main source of drinking water for your household? <i>Circle only one answer.</i>	Urban plumbing	01	
	Rural (local) plumbing	02	
	Public tap/standpipe	03	
	Dug well	04	
	Protected, dug well or spring	05	
	Unprotected dug well or spring	06	
	Tanker-truck	07	
	Lake, river, stream	08	
	Bottled water	09	
	Other (specify)	10	
BO3. What is the main source of water used by your household for other purposes such as cooking or bathing? <i>Circle only one answer.</i>	Urban plumbing	01	
	Rural (local) plumbing	02	
	Public tap/standpipe	03	
	Dug well	04	
	Protected, dug well or spring	05	
	Unprotected dug well or spring	06	
	Tanker-truck	07	
	Lake, river, stream	08	
	Rainwater	09	
	Other (specify)	10	
BO4. What is the main source of water used by your household for yard irrigation? <i>Circle only one answer.</i>	Urban plumbing	01	
	Rural (local) plumbing	02	
	Public tap/standpipe	03	
	Dug well	04	
	Protected, dug well or spring	05	
	Unprotected dug well or spring	06	
	Tanker-truck	07	
	Lake, river, stream	08	
	Rainwater	09	
	Other (specify)	10	
BO5. In the last two weeks, has the drinking water been unavailable for at least one whole day?	Yes 1 No 2		
BO6. How many hours does the water run during a day when it is available?		<input type="text"/> <input type="text"/>	
BO7. Do you use your main drinking water source all year?	Yes 1		BO9.
	No 2 → Months	<input type="text"/> <input type="text"/>	BO8.

BO8. What is the alternative drinking water source that you use? <i>Multiple answers.</i>	Urban plumbing	01		
	Rural (local) plumbing	02		
	Public tap/standpipe	03		
	Dug well	04		
	Protected, dug well or spring	05		
	Unprotected dug well or spring	06		
	Tanker-truck	07		
	Lake, river, stream	08		
	Rainwater	09		
	Bottled water	10		
	Other (specify)	11		
BO9. How do you get drinking water when your principal source is not available? <i>(For each answer please circle code 1 or 2)</i>		Yes	No	
	Use previously saved/stored drinking water	1	2	
	Ask neighbours for help	1	2	
	Use alternative drinking water source (if Yes, specify the alternative source and write appropriate code from question BO8)	1	2	
BO10. Are there any places within the house where there are currently water loss or leaks?	Yes1 → BO11. No2 → BO12.			
BO11. How significant is the water leak? <i>If 5 is very significant and 1 is not significant, please assign 1, 2, 3, 4 or 5 for each of the leaks. If there are no leaks please assign 0.</i>	Tap or pipe in the kitchen	<input type="text"/>		
	Tap or pipe in the bathroom	<input type="text"/>		
	Tank in the toilet	<input type="text"/>		
	Central heating pipes	<input type="text"/>		
	Tap or pipe in yard	<input type="text"/>		
	Water pump in yard	<input type="text"/>		
BO12. Do you treat your water in any way to make it safer to drink?	Yes	1	BO13.	
	No	2	BO15.	
	Don't know	9		
BO13. What do you usually do to the water to make it safer to drink? <i>Multiple answers.</i> <i>Code 9 is circled only if any of the answers weren't circled.</i>	Boil	1		
	Add bleach/chlorine	2		
	Strain it through a cloth	3		
	Use water filter (ceramic, sand, etc.)	4		
	Solar disinfection	5		
	Let it stand and settle	6		
	Other (specify)	7		
	Don't know	9		
BO14. When did you treat your drinking water the last time to make it safer to drink?	Today	1		
	Yesterday	2		
	This week	3		
	This month	4		
	Several months ago	5		
	Other	6		
Only for households connected to the urban / rural (local) plumbing				
BO15. Do you pay for water?	Yes1 → BO17. No 2 → BO16.			

BO16. What is the main reason for not paying the water?	Household cannot afford to pay 1 Household do not want to pay 2 Service is free 3 Other 4	BO20.						
BO17. Do you pay water according to a meter reading?	Yes 1 No 2							
BO18. How is the amount you pay calculated?	According to the amount used 1 Fixed price 2 According to the number of family members 3 According to the size of house/flat 4 Other (specify) 5 Don't know 9							
BO19. On average how much is your bill for water supply and what is the time interval for your water payment? (please circle only one answer and write amount in dinars)	Weekly 1 Monthly 2 Every three months 3 Every six months 4 Once a year 5 Other 6 Don't know 9							
BO20. Does your household have any water payment arrears?	Yes (write down the total amount) 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> No 2 Don't know 9							
BO21. Which improvements are needed most for your existing water supply service? Choose two answers.	Increased pressure 1 Improved taste 2 Provided 24 hour service 3 Improved safety 4 No need for improvement 5 Other 6							
Only for those households fetching water outside the house/flat or yard								
BO22. How long does it take to go to your main water source, get water and come back?	Minutes <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td></tr></table> Don't know 999							
BO23. Who spends most time fetching water for your household? Circle only one answer.	Woman 1 Man 2 Female child (under 15 y.) 3 Male child (under 15 y.) 4 Everyone shares the burden 5 We pay others to carry it 6→ Other 7	BO25. BO24. BO25.						
BO24. How much a month do you pay others for carrying water? (dinars)	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table>							
SANITATION								
BO25. Is your residence connected to a central piped sewerage system?	Yes 1 →BO26. No 2 → BO27.							
BO26. Do you pay for sewerage services separate from water?	Yes (write down the total annual amount in dinars)... 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr></table> No 2 Don't know 9							

BO27. The used water in your household (for bathing, washing, cooking) is usually discharged into?	Piped sewer system	1	
	Latrine/toilet in the house	2	
	Cesspool/septic tank used only for my household	3	
	Septic tank used by several household	4	
	Goes onto the street	5	
	Goes to your own yard	6	
	Don't know	9	
BO28. What kind of toilet facility do members of your household usually use?	Flush/pour-flash connected to a piped sewer system	1	BO29.
	Flush/pour-flashed connected to a septic tank	2	
	Latrine connected to a septic tank	3	
	Pit latrine	4	
	No facilities	5	BO33.
	Other (specify)	6	BO29.
BO29. Do you share this facility with other households?	Yes	1	BO30.
	No	2	BO31.
BO30. How many households in total use this toilet facility?	Number of households (less than 10)	0	
	Ten or more households	10	
	Don't know	99	
BO31. If you have a septic tank or cesspool, what do you do when it is filled?	Have a septic tank cleaner come and empty it	1	
	It has never been filled	2	
	Other (specify)	3	
BO32. How much do you pay each time to have your septic tank or cesspool emptied?			
BO33. (Ask only if there are children less than five years of age in the household) The last time your youngest child passed stools, what was done to dispose of the stools?	Child used toilet/latrine	1	
	Put/rinsed into toilet or latrine	2	
	Put/rinsed into drain or ditch	3	
	Thrown into garbage (solid waste)	4	
	Buried	5	
	Left in the open	6	
	Other (specify)	7	
	Don't know	9	
BO34. How do you dispose of solid waste in your household? <i>Multiple answers</i>	Burn	1	
	Bury in yard	2	
	Compost	3	
	Scavengers collect	4	
	Neighbourhood waste collection and local disposal	5	
QUALITY OF WATER SUPPLY SYSTEM AND SANITATION (only for dwellings connected to piped water or sewerage system)			
BO35. During the past two years, have you brought an official complaint about your water supply or sewerage service to any authority?	Yes 1 → BO36. No 2 → BO37.		
BO36. Did you receive a satisfactory response to your complaint?	Yes 1 No 2		
BO37. Do you regularly receive information from the water authority when water cuts or shortages will occur?	Yes	1	
	No, never	2	
	No, only irregularly	3	
	Don't know	9	