

SECTION 1

Family Roster

Education

Non-agricultural enterprise

Employment

Social Organization/Network

PART A: HOUSEHOLD ROSTER

PERSON INTERVIEWED: PREFERABLY THE HEAD OF THE HOUSEHOLD. IF HE/SHE IS NOT AVAILABLE, FIND A "PRINCIPAL RESPONDENT" TO ANSWER THE QUESTIONS IN HIS/HER PLACE. THE PERSON SELECTED MUST BE A MEMBER OF THE HOUSEHOLD WHO IS ABLE TO GIVE INFORMATION ON THE OTHER HOUSEHOLD MEMBERS.

RESPONDENT: _____ ID CODE:

1-3. I would like to make a complete list of all the people who normally use the same entrance, live and eat their meals together in this dwelling.

* First, I would like to have the names of all the members of your immediate family, who normally live and eat their meals together in this dwelling. Start with the head of the household, wife/husband of household head, his/her children in order of age.

ALWAYS WRITE DOWN THE HEAD OF THE HOUSEHOLD FIRST, FOLLOWED BY HIS/HER SPOUSE AND THEIR CHILDREN IN ORDER OF AGE.

WRITE DOWN THE NAME IN CAPITAL LETTERS, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD FOR EACH PERSON.

* Please give me the names of any other persons related to the head of the household or to his/her wife/husband, together with their families, who normally live and eat their meals this dwelling.

WRITE DOWN THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

* Please give me the names of any other persons not related to the head of household or to his/her wife/husband but who normally live and eat their meals with your family. For instance, tenants, lodgers, servants or other persons who are not relatives.

WRITE DOWN THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

* Are there any other persons not now present but who normally live and eat their meals here? For example, any person studying somewhere else or who is on vacation or who is visiting other people.

WRITE DOWN THE NAME, SEX AND RELATIONSHIP TO THE HEAD OF HOUSEHOLD.

FOR EACH PERSON LISTED IN QUESTION 1, ASK THE QUESTIONS 4-11 AND CLASSIFY THE PERSON ACCORDINGLY IN Q.12. COMPLETE THE ENTIRE LINE BEFORE GOING ON TO THE NEXT PERSON LISTED.*

4-10. Now I would like to have some information about each of the persons you mentioned.

IF THE RESPONDENT HAS ANY DIFFICULTY WITH HIS AGE OR DATE OF BIRTH (QUESTIONS 5 AND 6), USE THE CALENDAR OF EVENTS TO MAKE AN ESTIMATE.

12. CLASSIFY EACH PERSON ACCORDING TO CRITERIA

LOOK AT THE ANSWER TO QUESTION 11.

* ALL PERSONS ALIVE FOR WHOM THE ANSWER IS 9 MONTHS OR LESS ARE CLASSIFIED AS HOUSEHOLD MEMBERS. DECEASED INDIVIDUALS ARE NEVER CLASSIFIED AS HOUSEHOLD MEMBERS. LODGERS ARE NOT CLASSIFIED AS HOUSEHOLD MEMBERS. HIRED WORKERS AND SERVANTS, IF THEY HAVE THEIR OWN FAMILY IN A DIFFERENT PLACE, ARE ALSO NOT CLASSIFIED AS HOUSEHOLD MEMBERS. GUESTS WHO HAVE COME TO VISIT FOR 3 OR MORE MONTHS ARE CLASSIFIED AS MEMBERS OF HOUSEHOLD.

* IF THE ANSWER IS MORE THAN 9 MONTHS, ONLY THE FOLLOWING ARE HOUSEHOLD MEMBERS:

- THE HEAD OF HOUSEHOLD
- INFANTS LESS THAN 3 MONTHS OLD

* APART FROM THE CASES LISTED ABOVE, ALL OTHER PERSONS FOR WHOM THE ANSWER IS MORE THAN 9 MONTHS ARE NOT HOUSEHOLD MEMBERS. ENTER CODE 1 FOR EACH HOUSEHOLD MEMBER AND CODE 2 FOR ALL OTHER PERSONS. GO ON TO THE NEXT PERSON LISTED.

HOUSEHOLD ROSTER

I D C O D E	1.	2.	3.	4.		5.	6.	7.	8.	9.	10.	
	FIRST NAME	What is [NAME]'s sex? MALE . 1 FEMALE . 2	RELATIONSHIP TO HEAD HEAD.....1 WIFE/HUSBAND.....2 SON/DAUGHTER.....3 GRANDCHILD.....4 NIECE/NEPHEW.....5 FATHER/MOTHER.....6 SISTER/BROTHER.....7 SON/DAUGHTER-IN-LAW...8 BROTHER/SISTER-IN-LAW.9 GRANDFATHER/MOTHER...10 FATHER/MOTHER-IN-LAW.11 OTHER RELATIVE.....12 SERVANT.....13 TENANT.....14 OTHER ..15	DATE OF BIRTH	MONTH	YEAR	YEARS	MARITAL STATUS MARRIED.....1 LIVING TOGETHER..2 LIVING APART BUT NOT SEPARATED.....3 (×Q. 8) DIVORCED OR SEPARATED.....4 (×Q. 8) WIDOW/ER.....5 (×Q. 8) NEVER MARRIED.....6 (×Q. 8)	Who is the husband/wife/partner of [NAME] ? WRITE THE ID CODE.IF THE PERSON IS NOT IN THE HOUSEHOLD, WRITE "0".	Does the father of [NAME] live in this household now? If yes, who is he? WRITE THE ID CODE.IF THE PERSON IS NOT IN THE HOUSEHOLD, WRITE "0".	Does the mother of [NAME] live in this household now? If yes, who is she? WRITE THE ID CODE.IF THE PERSON IS NOT IN THE HOUSEHOLD, WRITE "0".	Which ethnic group does [NAME] belong to? ALBANIAN.....1 CROAT.....2 MONTENEGRIN. 3 MUSLIM SLAV/BOSNIAC/ GORANI4 ROMA.....5 SERB... ..6 TURK.....7 YUGOSLAV.....8 OTHERS9
1												
2												
3												
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12												
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14												
15												

DISPLACEMENT

I D C O D E	1. Where was [NAME] born? HERE (SITE OF SURVEY).0 OTHER MUNICIPALITY.1-30 FORMER YUGOSLAVIA.44 ALBANIA/SERBIA**.....55 WESTERN EUROPE.....66 OTHER.....77	2. This place was... RURAL.....1 URBAN.....2 MIXED 3	3. Where did [NAME] live immediately before the conflict (March 1998)? HERE (SITE OF SURVEY).0 OTHER MUNICIPALITY.1-30 FORMER YUGOSLAVIA.....44 ALBANIA/SERBIA**.....55 WESTERN EUROPE.....66 OTHER.....77 NOT YET BORN.....88	4. How many times has [NAME] changed residence since the beginning of the conflict (March 1998)? IF 0>>NEXT PERSON	5. What was the main reason for this absence? SECURITY...1 HOUSE INHABITABLE.2 WORK.....3 STUDY... ..4 OTHER5 1st 2nd 3rd 4th	6. Where was [NAME] living during most of this absence? OTHER LOCALITY BUT SAME MUNICIPALITY.....0 OTHER MUNICIPALITY.1-30 FORMER YUGOSLAVIA.....44 ALBANIA/SERBIA**.....55 WESTERN EUROPE.....66 OTHER.....77

1									
2									
3									
4									
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** : in Questions 1, 3 and 6 Substituted Serbia to Albania in Serb questionnaire

1. WRITE DOWN THE ID CODE OF HOUSEHOLD MEMBERS OVER 16 YEARS OLD	2. Is your spouse currently living with you? 0. NEVER MARRIED AND SPOSE DEAD (>>7) 1. YES (>>7) 2. NO	3. Which ethnic group does s/he belong to? ALBANIAN.....1 CROAT..... 2 MONTENEGRIN. 3 MUSLIM SLAV/BOSNIAC/ GORANI 4 ROMA.....5 SERB... ..6 TURK.....7 YUGOSLAV..... 8 OTHERS9	4. Why did your spouse leave your household? SECURITY.....1 WORK .. 2 FAMILY REASONS...3 STUDY.....4 OTHER5	5. Where is your spouse now living? SAME MUNICIPALITY..... 0 OTHER MUNICIPALITY.1-30 FORMER YUGOSLAVIA..... 44 ALBANIA?SERBIA**...55 WESTERN EUROPE.....66 OTHER.....77	6. How long has s/he been away? ("O" IF LESS THAN A YEAR)	7. Do you have any children currently living away from home? 1. YES 2. NO >> NEXT PERSON	8. Where are they living?				9. When did he/she left?								
							SAME MUNICIPALITY.....0 OTHER MUNICIPALITY.1- 30 FORMER YUGOSLAVIA..... 44 ALBANIA/SERBIA**..... ...55 WESTERN EUROPE..... .66 OTHER77	1st	2nd	3rd	4rth	YEAR	YEAR	YEAR	YEAR				

** : in Questions 5 & 8 (4 times in Q. 8) Substituted Serbia to Albania in Serb questionnaire

for

I D C O D E	A C T I V I T Y C O N	5. For how many days in the last 7 days did you do this activity, for any employer?	6. For how many hours in the last 7 days did you do this activity?	7. For how many weeks in the last 12 months did you do this activity?	8. During these weeks, how many hours per week did you usually do this work?	9. Did you do any other work in the last 7 days, or did you have any other permanent job from which you were temporarily absent? YES...1 (»NEXT LINE) NO....2	10. FOR EACH PERSON, CHECK FOR FIRST AND SECOND HIGHEST ANSWERS TO Q. 6 (HOURS WORKED IN LAST 7 DAYS) FOR THIS INDIVIDUAL. (IF HE OR SHE REPORTED ONLY ONE ACTIVITY, MARK IT AS CODE 1.) ACTIVITY FOR WHICH ANSWER TO 6 IS HIGHEST.....1 ACTIVITY FOR WHICH ANSWER TO 6 IS SECOND HIGHEST...2 ALL OTHER ACTIVITIES ...3 (PART C1)
		DAYS PER WEEK	HOURS PER WEEK	WEEKS PER YEAR	HOURS PER WEEK	LINE)	

A							
B							
C							
D							
E							
F							
G							
H							
I							
J							
K							
L							
M							
N							
O							

I would like to ask you some questions about the **activities you performed** in the last 12 months whether work on a farm, *privately, in a household business*, or for someone else. I would like to know about all the other activities you have had in the past 12 months, **the ones you mentioned for the past 7 days and others which you did not perform in the past 7 days**. START WITH THE ONES MENTIONED IN THE PAST 7 DAYS (COPY THE ANSWERS TO 1,2,3 IN PART B1).

I D C O D E	A C T I V I T Y C O N	1. What did you do?	2. What kind of trade or business is it connected with?	3. In this work were you working on a farm owned or rented by you or a member of your household, were you working <i>privately</i> or in a <i>nonfarm business</i> belonging to you or a member of your household, or were you working for someone who is not a member of your household? FARM OWNED OR RENTED BY HOUSEHOLD MEMBER 1 (»Q.5) OWN ACCOUNT/HOUSEHOLD ENTERPRISE.....2 (>Q.5) WORK FOR NON-HOUSEHOLD MEMBER.....3	4. For how many different employers did you do this activity in the last 12 months?
		WRITTEN DESCRIPTION	OCCUPATION CODE	WRITTEN DESCRIPTION	INDUSTRY CODE

A					
B					
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					
O					

I would
some
you did

I D C O D E	A C T I V I T Y C O N	5. For how many weeks in the last 12 months did you do this activity?	6. During these weeks, how many hours per week did you usually do this work?	7. MULTIPLY THE NUMBER IN 5. BY THE NUMBER IN 6 TO OBTAIN HOURS IN THE LAST 12 MONTHS.	8. Did you do any other work in the last 12 months, or did you have any other permanent job from which you were temporarily absent? YES...1 (->NEXT LINE) NO...2	9. FOR EACH PERSON, CHECK FOR FIRST AND SECOND HIGHEST ANSWERS TO Q.7(HOURS WORKED IN LAST 12 MONTHS) FOR THIS INDIVIDUAL. (IF HE/SHE REPORTED ONLY ONE ACTIVITY,MARK IT AS CODE 1). ACTIVITY FOR WHICH ANSWER IN 7 IS HIGHEST.....1 ACTIVITY FOR WHICH ANSWER IN 7 IS SECOND HIGHEST...2 ALL OTHER ACTIVITIES ...3 (PART C2)
		WEEKS PER YEAR	HOURS PER WEEK	HOURS PER YEAR		

A					
B					
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					
O					

Before abolishment of autonomy (1991)						
1	2	3	4	5		
I D C O D E	A C T I V I T Y C O D E	I would like to ask you some questions about the kinds of activities you were performing before the abolishment of autonomy, in 1991. This includes work on a farm, <u>privately</u> , for a household business, or for someone else.		What kind of trade or business was this work connected with?	Did you have any other activity from which you generated income in 1991?	Which of these activities was the most important at that time, in the sense that you worked the most hours in it? And which was the next most important?
		What kind of work did you do?				
		In Serbian Questionnaire the title of this section and question 2 say "Before 1991" instead of "Before abolishment of autonomy (1991)"				
		TOO YOUNG TO WORK: WRITE 999 IN OCCUPATION CODE AND GO NEXT PERSON STUDENT WRITE 888, GO NEXT PERSON PENSIONER WRITE 777, GO NEXT PERSON , I DID NOT WORK: WRITE 666		YES...1 (»NEXT LINE) NO...2		
	ONE LINE PER ACTIVITY WRITTEN DESCRIPTION	OCCUPATION CODE	WRITTEN DESCRIPTION	INDUSTRY CODE	ACTIVITY REPORTED AS MOST IMPORTANT...1 ACTIVITY REPORTED AS NEXT MOST IMPORTANT.2 OTHER ACTIVITIES.....3	
A						
B						
C						
D						
E						
F						
G						
H						
I						
J						
K						
L						

<p>1. Over the past 12 months, has anyone in your household operated any non-agricultural business which produces goods or services (for example, artisan, metalworking, construction, repair work; also include processing and selling your outputs from your own crops if done regularly) or has anyone in your household owned a shop or operate a trading business?</p> <p style="text-align: center;">YES...1 NO...2 (>NEXT MODULE)</p>	<p>2. What kind of business does your household operate?</p> <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> <p style="text-align: center;">PROBE TO DETERMINE INDUSTRIAL SECTOR IN WHICH ENTERPRISE OPERATES.</p> </div>	<p>3. Who is most informed about and/or in charge of day-to-day operations of the business?</p> <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 90%;"> <p style="text-align: center;">COLLECT THE INFORMATION ON THIS PAGE FOR ALL BUSINESSES BEFORE PROCEEDING TO PART B. THEN COMPLETE PARTS B -F FOR THE FIRST BUSINESS, THEN THE SECOND, ETC., UNTIL ALL BUSINESSES ARE SURVEYED. (THERE IS ROOM ON PARTS C - E FOR THREE ENTERPRISES. IF THIS HOUSEHOLD HAS MORE THAN THREE ENTERPRISES, FILL OUT A SEPARATE SET OF PAGES FOR PARTS C -E FOR THE ADDITIONAL BUSINESSES.)</p> <p style="text-align: center;">IF IT IS NOT POSSIBLE TO SPEAK TO THE PERSON WHO IS MOST INFORMED ABOUT AND/OR IN CHARGE OF THE BUSINESS, FILL PART A AND TRY TO COME BACK LATER TO TALK TO THIS PERSON.</p> </div>	
	business	FIRST NAME	ID CODE
	ID	FULL WRITTEN DESCRIPTION	CODE
	1		
	2		
	3		
	4		
	5		
	6		

PART B: GENERAL INFORMATION

PERSON MOST INFORMED ABOUT EACH ENTERPRISE

E N T E R P R I S E C O D E	1.	2.	3.		4.	5.	6.	7.	8.
	Are you [READ ANSWER TO PART A, Q.3?] YES...1 (»3) NO....2	IF THE RESPONDENT IS NOT THE PERSON INDICATED IN PART A, Q.3, RECORD THE RESPONDENT'S ID HERE. ID NUMBER	I would like to talk to you about your business doing [READ ANSWER TO PART A, Q.2]. For how long has the business been in operation? YEARS	MONTHS	Where do you operate the business? HOME, INSIDE THE RESIDENCE.....1 HOME OUTSIDE THE RESIDENCE.....2 INDUSTRIAL SITE.....3 TRADITIONAL MARKET...4 COMMERCIAL DISTRICT SHOP.....5 ROADSIDE.....6 OTHER FIXED PLACE....7 MOBILE.....8	Do you or the members of your household own all of this enterprise? YES...1 (»8) NO....2	In how many households do the other owners live? NUMBER	What share of the profits is kept by this household, rather than the other owners? PERCENT	Has this business been in operation during the past 7 days? »»PART C YES...1 NO....2
1									
2									
3									

PART C: EMPLOYMENT

PERSON MOST INFORMED ABOUT EACH ENTERPRISE

b u s i n e s s C O D E	1. CHECK ANSWER TO PART B, Q.8.	2. Have you yourself spent time working in this business at any time during the past 7days?	3. Please list for me the names of all other household members who have worked in this business during the past 7 days.	4. ENTER THE ID CODES FOR ALL PEOPLE LISTED IN 3.	5. During the past 7 days, how many people did this business employ who are not members of this household?	6. How many of them did you pay, in cash or in kind?	7. Are there any family members who have spent time working in this business during the past 12 months but not during the past 7days?	8. Please list for me the names of all household members who have worked in this business during the past 12 months (but not during the past 7 days).	9. ENTER THE ID CODES FOR ALL PEOPLE LISTED IN 8.	10. During the past 12 months, how many people did this business employ who are not members of this household?	11. How many of them did you pay, in cash or in kind?
	ANSWER IS 1..1 ANSWER IS 2..2 (»12)	YES...1 NO....2	IF MORE THAN 6 OTHER WORKERS, LIST THE 6 MOST IMPORTANT	ID CODE	IF 0, »7	NUMBER	NUMBER	YES...1 NO....2 (»10)	IF MORE THAN 6 OTHER WORKERS, LIST THE 6 MOST IMPORTANT	ID CODE	IF 0, »PART D
			NAME		NUMBER	NUMBER		NAME		NUMBER	NUMBER

1											
2											
3											

PART D: REVENUES AND OPERATION SCHEDULE

PERSON MOST INFORMED ABOUT EACH ENTERPRISE

E N T E R P R I S E C O D E	1.	2.	3.		4.	5.		6.	7.		8.	9.
	The next questions are about the revenue you earn from your business. Please include all revenues in your answers (that is the total cash and in-kind value of goods and services that you receive from the sale of goods and services) before subtracting any business expenditures and any expenses for your household. <div style="border: 1px solid black; padding: 2px; display: inline-block;">CHECK ANSWER TO PART B, Q.8</div> ANSWER IS 1..1 ANSWER IS 2..2 (>8)	During the past 7 days, for how many days was the business in operation? DAYS	During the past 7 days, how much money has the business received from the sales of its products, goods or services? CURRENCY: 1 DEM 2. DINAR AMOUNT	CURRENCY ENCY	During the past 7 days, has the business made any transactions using something other than money? For example, has the business received payments in the form of goods and services, or have you paid for the purchase of any items with your own products? YES..1 NO...2 (>6)	What was the value of these transactions (the value of goods and services received as payment and the value of your own products that you used for payment) over the past 7 days? CURRENCY: 1 DEM 2. DINAR AMOUNT	CURRENCY ENCY	During the past 7 days, has your household consumed any goods or services produced by this business? YES..1 NO...2 (>8)	What was the value of the goods and services consumed by your household over the past 7 days? CURRENCY: 1 DEM 2. DINAR AMOUNT	CURRENCY ENCY	During the past 12 months, for how many months was the business in operation? MONTHS	During the months that the business was in operation, how many days per month did this business usually operate? DAYS
1												
2												
3												

PART E: EXPENDITURES ON INPUTS

PERSON MOST INFORMED ABOUT EACH ENTERPRISE

E N T E R P R I S E C O D E	1.	2.	3.
	CHECK ANSWER TO PART B, Q.8.	During the past 7 days, how much have you spent in total on the purchase of inputs (labor, raw materials, items for resale, transport, electricity, water, fuel, rental, maintenance, taxes, registration fees, insurance, etc.)?	In a month with 'average sales,' how much have you spent in total on the purchase of inputs (labor, raw materials, items for resale, transport, electricity, water, fuel, rental, maintenance, taxes, registration fees, insurance, etc.)?
		CURRENCY: 1 DEM 2. DINAR	CURRENCY: 1 DEM 2. DINAR
	ANSWER IS 1..1 ANSWER IS 2..2 (>3)	AMOUNT	AMOUNT

1			
2			
3			

WORKSHEET FOR CALCULATING TOTALS IN 2 AND 3

LABOR	_____	_____
RAW MATERIALS	_____	_____
RESALE ITEMS	_____	_____
TRANSPORT	_____	_____
ELECTRICITY	_____	_____
WATER	_____	_____
FUEL	_____	_____
RENT	_____	_____
TAXES	_____	_____
TOTAL	_____	_____
	7 DAYS IN Q2	12 MONTHS IN Q.3

E N T E R P R I S E C O D E	I T E M S	1. I would now like to ask you questions about the assets (that is, equipment, buildings, vehicles, tools, etc.) that you use in your business. At present, does this business own this [ITEM]?	2. Is this enterprise the sole owner of this [ITEM], or is ownership shared with another business, or with another individual? SOLE OWNER...1 SHARED WITH ANOTHER BUSINESS 2 SHARED WITH ANOTHER INDIVIDUAL 3	3. If you wanted to sell the [ITEM], how much could you sell it for today? »NEXT ITEM, Q.1. IF LAST ITEM, »4 AMOUNT	4. During the past 12 months, did this business acquire any business assets (like those we just talked about)? YES...1 NO...2 (»BUSINESS 2)
		YES...1 NO...2 (»NEXT ITEM, Q.1. IF LAST ITEM, »4)			

1	Land				
	Buildings				
	Equipment and machinery				
	Furniture				
	Small or large tools				
	Large vehicles (trucks, cars, boats, etc.)				
	Small vehicles (bicycles, carts, etc.)				
	Other durable goods				
2	Land				
	Buildings				
	Equipment and machinery				
	Furniture				
	Small or large tools				
	Large vehicles (trucks, cars, boats, etc.)				
	Small vehicles (bicycles, carts, etc.)				
	Other durable goods				
3	Land				
	Buildings				
	Equipment and machinery				
	Furniture				
	Small or large tools				
	Large vehicles (trucks, cars, boats, etc.)				
	Small vehicles (bicycles, carts, etc.)				
	Other durable goods				

1. How does your household generally find out what is going on in Kosovo?

	1ST	2ND	3RD
Television	1		
Radio	2		
Newspaper	3		
Organization (political, economic and or social)	4		
Coworkers	5		
Relatives, friends and neighbors	6		
Others	7		
Do not find out	8		

2. Are any members of your household active in any of the following groups, organizations and/or associations?

	YES...1	NO...2
Farmer's group.....		No. 1
Businessman's groups.....		No. 2
Cooperative.....		No. 3
Trade union.....		No. 4
Professional association.....		No. 5
Credit/finance group.....		No. 6
Youth group.....		No. 7
Women's group.....		No. 8
Religious group.....		No. 9
Ethnicity-based group.....		No. 10
Cultural association.....		No. 11
Sports group.....		No. 12
Neighborhood/village association.....		No. 13
Political party.....	**	No. 14
Other		No. 15

3. During the past 12 months, have members of your household joined other members of your community come together to address a common concern?

Yes, once	1
Yes, twice or three times	2
Yes, regularly	3
No	4

4. During the past 12 months, have members of your household joined other members of your community to approach an official (government and/or NGO) for assistance with a common concern?

Yes, once	1
Yes, twice or three times	2
Yes, regularly	3
No	4

5. If a member of your household suffered from a serious illness or died suddenly, who would you turn to for assistance?

1st	2nd	3rd

RECORD FIRST THREE CHOICES

- HUMANITARIAN GROUP 1
- RELATIVES IN KOSOVO 2
- RELATIVES ABROAD 3
- NEIGHBORS 4
- FRIENDS 5
- COMMUNITY LEADERS 6
- RELIGIOUS LEADERS 7
- OTHERS 8

6. If you suffered an economic loss (e.g. bad harvest, loss of employment), who would you turn to for assistance?

1st	2nd	3rd

USE SAME CODES AS IN QUESTION 5

7. Over the past 12 months, have any member of your household been the victim of....?

	YES...1	NO...2 , (>> GO TO NEXT MODULE)
Corruption/extortion		
Harassment/threats		
Physical aggression		
Theft/robbery		
Sexual aggression		
Kidnapping		

8. In this(ese) situation(s), who did you first turn to for assistance?

KFOR	1
INTERNATIONAL POLICE	2
UNMIK POLICE	3
KPC	4
RELATIVES	5
NOBODY	6
OTHERS	7

SECTION 2

Agriculture

1. Does any member of your household currently owns and/or operates land, forest, meadow, pasture?
(INCLUDE ALSO THE DWELLING PLOT)

YES..1
NO...2 (»PART A2)

P L O T C O D E	2.	3.		4.	5.	6.	7.	8.	9.	10.
	Please tell me about each plot of land that a member of your household has access to? Please describe or give me the name of each plot. COMPLETE THIS QUESTION FOR ALL PLOTS. THEN ASK QUESTIONS 3-10 FOR EACH PLOT BEFORE GOING TO THE NEXT PLOT. NAME OF PLOT	What is the area of the plot? SQUARE METERS....1 HECTARES..2 ARES.....3	UNIT	What kind of land is this? PROBE FOR ANY PLOT GIVEN. DWELLING..1 ANNUAL CROPS AND VEGETABLE GARDENS....2 TEMPORARY MEADOWS (LESS THAN 5 YEARS)..3 ORCHARDS....4 VINEYARDS..... 5 PERMANENT PASTURES 6 FORESTS 7 WATER SURFACE....8 LEFT FALLOW9 IF 9 GO TO 5, OTHERWISE GO TO 6	If plot is fallow, what was the reason? Crop rotation.....1 Lack of inputs.....2 Lack of manpower..3 Lack of equipment.4 Economic profitability5 Mines6 Other risks 7	Was this plot irrigated during the 1997-1998 season? YES..1 NO..2	Was this plot irrigated during the 1999-2000 season? YES..1 NO..2	If the plot was irrigated, from what source? Own well..1 Public pipeline..2 Stream 3 Main Irrigation Scheme...4 Other ..5	What is the status of the plot? OWNED..1 RENTED..2 BORROWED/GI FT..3 IF 2 OR 3, GO TO 11	If you were to sell this plot of land today, how much could you sell it for? Currency DEM 1 DINAR 2 NEXT PLOT
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										

P L O T C O D E	11. From whom was this plot rented or borrowed?	12. During the last cropping season what kind of arrangement was made with the owner of the land for you to use it?	13. What share of the output is given to the landlord?	14. How much money did you or will you give to the owner for the use of this land during the last cropping season?	15. How much did you or will you give to the owner in kind for the use of this land during the last cropping season?			USE CODES WITH STAR WHENEVER POSSIBLE UNIT CODES: KILO*...1 GRAM*...2 LITER*... 3 BUNCH... 4 TIN.... 5 PIECES.. 6 CARTONS. 7 BOTTLES. 8
	RELATIVE.....1 FRIEND.....2 OTHER HOUSEHOLD....3 LOCAL AUTHORITY....4 PRIVATE ORGANIZATION.5 GOVERNMENT...6 OTHER ..7	RENT.....1 SHARECROP..2 NO PAYMENT....3 EXCHANGE OF THIS PLOT FOR ANOTHER.4 OTHER .5	PER- CENTAGE	IF NO MONEY PAYMENT, WRITE ZERO. Currency DEM 1 DINAR 2		UNIT	CROP	
				AMOUNT	CODE	CODE		

1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

1. During the last cropping season 1999-2000
has your household rented out or lent out any of its own land to another household?

YES..1
NO...2 (»PART B1)

P L O T	2. Please tell me about each plot of land belonging to your household that was rented or lent out to another household? Please describe or give me the name of each plot. NAME OF PLOT	3. Who in this household is most familiar with this plot of land? WRITE DOWN ID CODE OF HOUSEHOLD MEMBER. ASK THIS PERSON QUESTIONS 4-12. ID CODE	4. What is the area of the plot? AREA CODES: SQUARE METERS...1 HECTARES.2 ARES....3		5. What kind of land is this? DWELLING..1 ANNUAL CROPS AND VEGETABLE GARDENS.....2 TEMPORARY MEADOWS (LESS THAN 5 YEARS)....3 ORCHARDS....4 VINEYARDS 5 PERMANENT PASTURES 6 FORESTS 7 WATER SURFACE...8	6. If you were to sell this plot of land today, how much could you sell it for? Currency DEM 1 DINAR 2	7. How many years has it been since this plot was fallow, or cleared from the bush? YEARS	8. To whom is this plot rented out or lent out? RELATIVE.....1 FRIEND.....2 OTHER HOUSEHOLD....3 LOCAL AUTHORITY....4 PRIVATE ORGANIZATION.5 GOVERNMENT...6 OTHER ...7	9. During the last cropping season what kind of rental or use arrangement was made with the renter using the land? RENTAL.....1 SHARECROP..2 NO PAYMENT.3 EXCHANGE OF THIS PLOT FOR ANOTHER..4 OTHER5	10. What share of the output is given to your household by the tenants? PERCENTAGE	11. How much money did you or will you receive for the use of this land during the last cropping season? IF NO MONEY PAYMENT, Currency DEM 1 DINAR 2	12. How much did you or will you receive in kind for the use of this land during the last cropping season? IF NOTHING RECEIVED IN KIND, WRITE 0 IN ALL COLUMNS.			USE CODES WITH STAR WHENEVER POSSIBLE UNIT CODES: KILO*....1 GRAM*....2 LITER*...3 BUNCH...4 TIN.....5 PIECES..6 CARTONS.7 BOTTLES.8
			AMOUNT	AREA CODE								AMT	UNIT CODE	CROP CODE	
16															
17															
18															
19															
20															
21															
22															
23															

1. Did any member of your household plant/cultivate any crop during the season 1999-2000?

YES 1

NO 2

GO TO SECTION B2

Now, I would like to speak about your household's agricultural production

C R O P C O D E	2. In the 1999-2000 season, have you planted/cultivated any [CROP] ?		3. How was this [...] cultivated? IN PURE STANDS . . 1 INTERCROPE D-MAIN CROP . . 2 INTERCROPE D-SECONDARY CROP . . 3 IF 3 >> Q.7		4. What surface of land has been planted with this crop? SQUARE METERS . . 1 HECTARES . 2 ARES..... 3		5. How much of [CROP] has your household harvested , during the last cropping season? Kg		6. CHECK IF THE HARVEST IS BIGER THEN 0 YES . . 1 NO . . 2 GO TO NEXT CROP		7. What surface has been planted with this crop? Code of main crop %		8. How much of [CROP] has your household harvested , during the last cropping season? Kg		9. CHECK IF THE HARVEST IS BIGGER THEN 0 YES . . 1 NO . . 2	
	CROP NAME	YES 1 NO 2 (>> NEXT CROP)			SURFACE	UNIT CODE										

Annual crops

1	Winter wheat															
2	Maize															
3	Barley															
4	Oats															
5	Rye															
6	Potato															
7	White beans															
8	Peas															
9	Lentils															
10	Vetches															
11	Sugar beets															
12	Soybean															
13	Sunflower															
14	Rapeseed (Colza)															
15	Tobacco															
16	Cabbage															
17	Cauliflower															
18	Spinach															
19	Salad crops															
20	Other leafy veg.															
21	Melons															
22	Watermelons															
23	Cucumber															
24	Pumpkin, squash															
25	Stawberry															
26	Pepper															
27	Tomato															
28	Eggplant															
29	Carrot															
30	Garlic															

C R O P C O D E	2. In the 1999-2000 season, have you planted/cultivated any [CROP] ?		3. How was this [...] cultivated?		4. What surface of land has been planted with this crop?		5. How much of [CROP] has your household harvested , during the last cropping season?		6. CHECK IF THE HARVEST IS BIGGER THEN 0		7. What surface has been planted with this crop?		8. How much of [CROP] has your household harvested , during the last cropping season?		9. CHECK IF THE HARVEST IS BIGGER THEN 0	
	CROP NAME	YES 1 NO 2 (>> NEXT CROP)	IN PURE STANDS . . 1 INTERCROPE D-MAIN CROP . . 2 INTERCROPE D-SECONDARY CROP . . 3 IF 3 >> Q.7	SURFACE	UNIT CODE	kg	YES . . 1 NO . . 2	GO TO NEXT CROP	Code of main crop	%	kg	YES . . 1 NO . . 2				

31	Onions															
32	Red beet															
33	Radish															

Fodder crops - Meadows and Pastures

34	Alfalfa															
35	Clover															
36	Mixed grasses															

Permanent crops: Vineyards, Orchards

37	Apple															
38	Pear															
39	Quince															
40	Apricot															
41	Cherry (sour)															
42	Peach															
43	Plums															
44	Other trees															
45	Wine grapes															
46	Table grapes															
47	Raisins															

B2: CROP PRODUCTION: FORESTS

1. Do you own any forest?

1. YES
 2. NO GO TO 6

2. LIST ALL PLOT CODES WITH FOREST IN PART A1, Q.4	3. Could you please tell me what is the approximate age of the forest in this plot (number of years)? YEARS	4. In the 1999-2000 season, did you exploit this forest? 1. YES 2. NO (>> NEXT PLOT)	5. What products did you obtain from the forest in last 12 months?		
			TIMBER CUB. MTRS	FUEL WOOD CUB METERS	BARK T

ASK THE MOST KNOWLEDGEABLE PERSON

6. Did you have access to any public authorized forest?

1. YES
 2. NO GO TO SECTION C

7. What products did you obtain from the forest in last 12 months?		
TIMBER CUB. MTRS	FUEL WOOD CUB. MTRS	BARK T

FERTILIZERS

1.	2.	3.	4.	5.	6.	7.	8.	9.		
REPORT THE CULTIVATED CROP CODE	Did you use fertilizer for cultivating this crop?	In the 1999-2000 season, What type of fertilizers did you use on [CROP]?	What was the total quantity of fertilizer used?	How much fertilizer did your household purchase in the 1999-2000 season?	How much did your household spend on fertilizer in the 1999-2000 season?	Where did you buy the fertilizer?	For [CROP], how much did you receive from other sources in the 1999-2000 season?	Who provided the fertilizer for [crop]?		
SEE B1. Q2	YES..1 NO..2 2>>NEXT ROW	FERTILIZER CODE ON THE RIGHT	kg	if 0, >> 8 kg	CURRENCY 1.DM 2.DINAR	CODES FROM THE RIGHT	if 0, >> NEXT ROW kg	HUMANITARIAN GROUP 1 RELATIVES IN KOSOVO 2 RELATIVES ABROAD 3 BANK 4 SOCIALLY OWNED ENTERPRISE/State of Serbia** 5 EMPLOYER 6 OTHERS 7	MAIN SOURCE	
									Fertilizer	Codes for bought inputs:
									1. Compound 15.15.15	1 Local Private Stockiest
									2. Compound other	2 Municipality Private Stockiest
									3. Nitrogen CAN	3 Neighbor
									4. Nitrogen Urea	4 Co-operative/Combinat
									5. Nitrogen Other	5 Other
									6. Super Phosphate	
									7. Phosphate other	
									8. Potash muriate	
									9. Potash sulfate	

**Added State of Serbia to Socially Owned Enterprise in Question 9 (Code 5) in Serbian Questionnaire

INPUTS PART C:

ASK THE MOST KNOWLEDGEABLE PERSON

MANURE

1.	2.	3.	4.	5.	6.	7.	8.	9.
REPORT THE CULTIVATED CROP CODE	Did you use manure for cultivating this crop?	In the 1999-2000 season, What type of manure did you use on [CROP]?	What was the total quantity of manure used?	How much manure did your household purchase in the 1999-2000 season?	How much did your household spend on manure in the 1999-2000 season?	Where did you buy the manure?	For [CROP], how much did you receive from other sources in the 1999-2000 season?	Who provided the manure for [crop]?
SEE B1. Q2	YES..1 NO..2 2>>NEXT ROW	MANURE CODE ON THE RIGHT	kg	kg	CURRENCY 1.DM 2.DINAR	CODES FROM THE RIGHT	if 0, >> NEXT ROW kg	HUMANITARIAN GROUP 1 RELATIVES IN KOSOVO 2 RELATIVES ABROAD 3 BANK 4 SOCIALLY OWNED ENTERPRISE/State of Serbia** 5 EMPLOYER 6 OTHERS 7 MAIN SOURCE

Codes for bought inputs:

1	Local Private Stockiest
2	Municipality Private Stockiest
3	Neighbor
4	Co-operative/Combinat
5	Other

Manure

1.	Large ruminant
2.	Small ruminant
3.	Other animal
4.	Green manure

**Added State of Serbia to Socially Owned Enterprise in Question 9 (Code 5) in Serbian Questionnaire

E Q U I P M E N T C O D E	TYPE OF FARM EQUIPMENT	1. Does your household own any [...]? FIRST ASK Q.1 FOR ALL ITEMS. THEN ASK Q. 2-15 FOR EACH ITEM BEFORE GOING TO THE NEXT ITEM.	2. How many [...] does your household own? DO NOT COUNT EQUIPMENT JOINTLY OWNED WITH OTHER HOUSEHOLDS	3. Does your household own any [...] jointly with any other household? YES...1 NO...2 (»6)	4. How many [...] are owned with another household?	5. What share of these [...] belong to your household? IF SHARE DIFFERS OVER ITEMS, PUT IN AVERAGE PERCENTAGE	6. If you sold one of those [...] today, how much money could you get for it? IF MORE THAN ONE ITEM, ASK FOR AVERAGE VALUE. REPORT FULL VALUE OF ITEMS SHARED WITH OTHER HOUSEHOLDS. 1. DM 2. DINAR AMM. Curr. Cod.		7. What is the working condition of [...]? 1. EXCELLENT 2. GOOD 3. FAIR 4. BAD 5. NOT WORKING	8. Did you use the [...] during the 1999-2000 season? 1. YES 2. NO
		YES...1 NO...2 (»NEXT ITEM)								
1	Large tractor (>40 horse power)									
2	Small tractor (<40horse power)									
3	Motocultivator									
4	Plough									
5	Disk harrow									
6	Tooth harrow									
7	Seed driller									
8	Cultivator									
9	Fertiliser broadcaster									
10	Sprayer									
11	Mower									
12	Hayraker									
13	Haybaler									
14	Combine harvester									
15	Thresher									
16	Mill									
17	Water Pump									

E Q U I P M E N T C O D E	TYPE OF FARM EQUIPMENT	9.	10.	11.	12.	13.	14.	15.
		Did you repair the [...] during the 1999-2000 season?	How much did you spend on maintenance in total for the [...] during the 1999-2000 season?	Did you receive any Aid for the repairing?	In which form?	What was the value of the Aid received?	When did you receive this assistance?	Who provided the assistance?
		1. YES 2. NO >> 11	CURRENCY 1. DM 2. DINAR AMOUNT	1. YES 2. NO >>NEXT ITEM	1. PARTS 2. VOUCHER 3. NEW EQUIPMENT 4. CASH	CURRENCY 1. DM 2. DINAR AMOUNT	1. PAST 30 DAYS 2. 1 TO 6 MO. AGO 3. 6 TO 12 MO.	HUMANITARIAN GROUP 1 RELATIVES IN KOSOVO 2 RELATIVES ABROAD 3 BANK 4 SOCIALLY OWNED ENTERPRISE/State of Serbia** 5 EMPLOYER 6 OTHERS 7

1	Large tractor (>40 horse power)							
2	Small tractor (<40horse power)							
3	Motocultivator							
4	Plough							
5	Disk harrow							
6	Tooth harrow							
7	Seed driller							
8	Cultivator							
9	Fertiliser broadcaster							
10	Sprayer							
11	Mower							
12	Hayraker							
13	Haybaler							
14	Combine harvester							
15	Thresher							
16	Mill							
17	Water Pump							

**Added State of Serbia to Socially Owned Enterprise in Question 15 (Code 5) in Serbian Questionnaire

1. Has any member of your household raised or owned livestock, poultry or any other domesticated animal during the last 12 months?

YES . . 1
NO . . . 2 (»NEXT MODULE)

ANIMAL	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.	14.	15.	16.
	During the last 12 months, has any member of your household raised any [...]?	How many [...] were owned by your household at the end of the lastmonth?	If you sold one of those [...] today, how much money could you get for it?	How many of your [...] did you sell the last 12 months?	How much did your household receive for the sale of all these [...] during the last 12 months?	How many of your [...] did you sell last month?	How much did your household receive for the sale of all these [...] during last month?	How many of your [...] did you eat last month?	How many of your [...] died or were lost during the last 12 months?	How many of your [...] died or were lost during the last 12 months?	How many of your [...] were given away during the last 12 months?	How many of your [...] were given away during the last 12 months?	How many of your [...] did your household purchase during the last 12 months?	How much did you pay for these [...] purchased during the last 12 months?	How many of your [...] did your household purchase during the last month?
	FIRST ASK Q. 2 FOR ALL ANIMALS, THEN ASK Q. 3-27 FOR EACH ANIMAL BEFORE GOING TO THE NEXT ONE.	IF ZERO, GO TO Q. 5.	CURRENCY 1. DM 2. DINAR	IF ZERO, GO TO Q. 9.	INCLUDE VALUE OF IN KIND PAYMENTS CURRENCY 1. DM 2. DINAR	IF ZERO, GO TO QUESTION 9.	CURRENCY 1. DM 2. DINAR		IF ZERO, GO TO Q. 12		IF ZERO, GO TO Q. 14.		IF ZERO, GO TO Q. 18.	INCLUDE VALUE OF IN KIND PAYMENTS CURRENCY 1. DM 2. DINAR	IF ZERO, GO TO QUESTION 18.
	YES . . 1 NO . . . 2 (»NEXT ANIMAL)	NUMBER OF ANIMALS	AMOUNT	NUMBER OF ANIMALS	AMOUNT	NUMBER OF ANIMALS	AMOUNT	NUMBER OF ANIMALS	NUMBER OF ANIMALS	NUMBER OF ANIMALS	NUMBER OF ANIMALS	NUMBER OF ANIMALS	NUMBER OF ANIMALS	AMOUNT	NUMBER OF ANIMALS

1	Calves														
2	Beef cattle														
3	Milk cows														
4	Breeding bulls														
5	Buffalos														
6	Horses														
7	Donkeys														
8	Mules														
9	Pigs														
10	Sheep														
11	Goats														
12	Chickens														
13	Other Poultry														
14	Rabbits														
15	Bees (Hives)														
16	Trouts														

ANIMAL	During the last 12 months, has any member of your household raised [...]?	17.	18.	19.	20.	21.	22.	23.	24.	25.	26.	27.	
		How much did you pay for these [...] purchased during the last month?	How many [...] were born or received as gifts by your household during the last year?	How many [...] were born or received as gifts by your household during the last month?	Who donated these animals? HUMANITARIAN GROUP 1 RELATIVES IN KOSOVO 2 RELATIVES ABROAD 3 BANK 4 SOCIALLY OWNED ENTERPRISE/Stae of Serbia** 5 EMPLOYER 6 BORN 7 OTHERS 8	How many of your [...] were vaccinated during the last month?	How many of your [...] were vaccinated during the last 12months?	Did you have to pay for the vaccinations?	How much did you pay?	Did your household sell any fresh byproducts from your [...] during the last year?	What was that fresh byproduct? EGGS.....1 MILK.....2 MEAT.....3 HONEY.....4 YOGURT.....5 CURD...6 CHEESE 7 OTHER 8	How much did you obtain from the sales of these [...] byproducts during the last year?	
	FIRST ASK Q. 2 FOR ALL ANIMALS, THEN ASK Q. 3-27 FOR EACH ANIMAL BEFORE GOING TO THE NEXT ONE.	INCLUDE VALUE OF IN KIND PAYMENTS CURRENCY 1. DM 2. DINAR	IF ZERO, GO TO QUESTION 21							EXCLUDE PRODUCTS USED BY HOUSEHOLD BUSINESSES YES...1 NO...2 (»NEXT ANIMAL)		INCLUDE VALUE OF IN KIND PAYMENTS CURRENCY 1. DM 2. DINAR	
		AMOUNT	ANIMALS	ANIMALS	MAIN SOURCE	ANIMALS	ANIMALS	ANIMALS	AMOUNT	ANIMAL)	FIRST	SECOND	AMOUNT

1	Calves												
2	Beef cattle												
3	Milk cows												
4	Breeding bulls												
5	Buffalos												
6	Horses												
7	Donkeys												
8	Mules												
9	Pigs												
10	Sheep												
11	Goats												
12	Chickens												
13	Other Poultry												
14	Rabbits												
15	Bees (Hives)												
16	Trouts												

**Added State of Serbia to Socially Owned Enterprise in Question 20 (Code 5) in Serbian Questionnaire

1. Has any member of your household purchased or received any animal feed during the last 12 months? YES..1 [] NO...2 NEXT MODULE

2. Has any member of your household purchased or received any [...]?		3. How much did your household purchase in the last 12 months?	4. Unit	5. How much did your household spend in the last 12 months?	6. How much did your household purchase in the last 30 days?	7. Unit	8. How much did your household spend in the last 30 days?	9. Did you receive any [FEED] in the last 12 months?	10. How much did your household receive in the last 12 months?	11. Unit	12. Who donated this feed? HUMANITARIAN GROUP 1 RELATIVES IN KOSOVO 2 RELATIVES ABROAD 3 BANK 4 SOCIALLY OWNED ENTERPRISE 5 EMPLOYER 6 OTHERS 7	13. Did you receive any [FEED] in the last 30 days?	14. How much did your household receive in the last 30 days?	15. Unit	16. Who donated this feed? HUMANITARIAN GROUP 1 RELATIVES IN KOSOVO 2 RELATIVES ABROAD 3 BANK 4 SOCIALLY OWNED ENTERPRISE/Sate of Serbia** 5 EMPLOYER 6 OTHERS 7
ANIMAL	YES..1 NO...2 (»NEXT FEED)	QUANTITY	UNIT	CURRENCY 1. DM 2. DINAR AMOUNT	QUANTITY	UNIT	SAME CURRENCY AS 5 AMOUNT	YES..1 NO...2 (»NEXT FEED)	QUANTITY	UNIT	MAIN SOURCE	YES..1 NO...2 (»NEXT FEED)	QUANTITY	UNIT	MAIN SOURCE

1	Hay														
2	Fresh fodder														
3	Maize meal, grains														
4	Concentrates														
5	Bran														
6	Other														

**Added State of Serbia to Socially Owned Enterprise in Question 16 (Code 5) in Serbian Questionnaire

Codes for units: 1 Small Duaj
2 Large Duaj
3 Kilogram

SECTION 3

Consumption

PART A: DAILY EXPENSES

MOST KNOWLEDGEABLE MEMBER: ___ -

	1.	In the past 7 days, has any member of your household spent money on any of the following items? PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH ITEM. ASK QUESTION 1 FOR ALL ITEMS BEFORE GOING TO 2.			2. How much did your household spend for [ITEM]? CURRENCY 1. DM 2. Dinar
			NO	YES	AMOUNT

1	Tobacco, cigarettes, cigars			
2	Newspapers or magazines			
3	Fares for busses, trams, taxis, etc.			

	3.	How many [MEALS/SNACKS] were eaten by household members outside of the home during the past 7 days?		4. What was the value of these [MEALS] eaten outside of the home in the last 7 days? CURRENCY 1. DM 2. Dinar
			NUMBER	AMOUNT

Breakfast			
Lunch			
Dinner/supper			
Snack or beverages (including alcohol)			

1.	PURCHASES IN LAST 30 DAYS				TYPICAL YEAR		HOME PRODUCTION				GIFTS	AID	STOCKS		USE CODES WITH STAR WHENEVER POSSIBLE UNIT CODES: KILO*...1 GRAM*...2 LITER*...3 BUNCH...4 TIN...5 PIECES...6 CARTONS...7 BOTTLES...8 CURRENCY CODES: DEM 1 DINAR 2	
	In the following questions, I want to ask about all food consumed by your household, regardless of which person ate it. Has your household consumed [FOOD] during the past 12 months? Please exclude from your answer any [FOOD] purchased for processing or resale in a household enterprise. PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q.1 IS YES, ASK Q.2-12.	Have the members of your household bought any [FOOD] in the past 30 days, that is since [DAY/DATE]? YES . 1 NO . . 2 (»6)	How many times in the past 30 days, have you bought [FOOD]?	How much did you buy in total?	How much did you pay in total?	How many months in the past 12 months did your household purchase [FOOD]? IF NONE WRITE ZERO	How many months in the past 12 months did your household consume [FOOD] that you grew or produced at home? IF NONE WRITE ZERO, » 10	During those months, how much did you consume in a typical month?	What was the value of the [FOOD] you consumed in a typical month from your own production?	What is the total value of the [FOOD] consumed that you received as a gift over the past 12 months? IF NONE, WRITE ZERO	What is the total value of the [FOOD] consumed that you received from aid over the past 12 months? IF NONE, WRITE ZERO	How much of [FOOD] do you currently have stored?	AMT UNIT AMT CURRENCY MONTHS MONTHS AMT UNIT UNIT CURRENCY AMOUNT AMOUNT AMT UNIT	AMOUNT AMOUNT AMT UNIT		
																NO
1 Bread																
2 Maize and other cereals (flour or grain)																
3 Pasta and rice (macaroni)																
4 Beans																
5 Butter and other fat																
6 Milk																
7 Yogurt																
8 Curd																
9 Fresh cheese																
10 Baby Formula																
11 Mutton/lamb/goat																
12 Beef/Buffalo																
13 Chicken and other poultry																
14 Pork																
15 Eggs																

1.	PURCHASES IN LAST 30 DAYS				TYPICAL YEAR		HOME PRODUCTION				GIFTS	AID	STOCKS		USE CODES WITH STAR WHENEVER POSSIBLE UNIT CODES: KILO*...1 GRAM*...2 LITER*...3 BUNCH...4 TIN....5 PIECES..6 CARTONS.7 BOTTLES.8 CURRENCY CODES: DEM 1 DINAR 2		
	In the following questions, I want to ask about all food consumed by your household, regardless of which person ate it. Has your household consumed [FOOD] during the past 12 months? Please exclude from your answer any [FOOD] purchased for processing or resale in a household enterprise. PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q.1 IS YES, ASK Q.2-12.	2. Have the members of your household bought any [FOOD] in the past 30 days, that is since [DAY/DATE]? YES . 1 NO . . 2 (»6)	3. How many times in the past 30 days, have you bought [FOOD]?	4. How much did you buy in total?	5. How much did you pay in total?	6. How many months in the past 12 months did your household purchase [FOOD]? IF NONE WRITE ZERO	7. How many months in the past 12 months did your household consume [FOOD] that you grew or produced at home? IF NONE WRITE ZERO, » 10	8. During those months, how much did you consume in a typical month?	9. What was the value of the [FOOD] you consumed in a typical month from your own production?	10. What is the total value of the [FOOD] consumed that you received as a gift over the past 12 months? IF NONE, WRITE ZERO	11. What is the total value of the [FOOD] consumed that you received from aid over the past 12 months? IF NONE, WRITE ZERO	12. How much of [FOOD] do you currently have stored?	AMT	UNIT			
																NO	YES
16	Fish																
17	Garlic																
18	Sweet Pepper																
19	Cucumber																
20	Tomatoes																
21	Cabbage																
22	Other vegetables																
23	Grapes																
24	Apples																
25	Orange and Lemons																
26	Other Fruits																
27	Canned Foods																
28	Pickles																
29	Jam and fruit preserves																
30	Soft drinks (Coca. and juices.)																

1.	PURCHASES IN LAST 30 DAYS				TYPICAL YEAR		HOME PRODUCTION				GIFTS	AID	STOCKS		USE CODES WITH STAR WHENEVER POSSIBLE UNIT CODES: KILO*...1 GRAM*...2 LITER*...3 BUNCH...4 TIN....5 PIECES..6 CARTONS.7 BOTTLES.8 CURRENCY CODES: DEM 1 DINAR 2			
	In the following questions, I want to ask about all food consumed by your household, regardless of which person ate it. Has your household consumed [FOOD] during the past 12 months? Please exclude from your answer any [FOOD] purchased for processing or resale in a household enterprise. PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q.1 IS YES, ASK Q.2-12.	Have the members of your household bought any [FOOD] in the past 30 days, that is since [DAY/DATE]? YES . 1 NO . . 2 (»6)	How many times in the past 30 days, have you bought [FOOD]?	How much did you buy in total?	How much did you pay in total?	How many months in the past 12 months did your household purchase [FOOD]? IF NONE WRITE ZERO	How many months in the past 12 months did your household consume [FOOD] that you grew or produced at home? IF NONE WRITE ZERO, » 10	During those months, how much did you consume in a typical month?	What was the value of the [FOOD] you consumed in a typical month from your own production?	What is the total value of the [FOOD] consumed that you received as a gift over the past 12 months? IF NONE, WRITE ZERO	What is the total value of the [FOOD] consumed that you received from aid over the past 12 months? IF NONE, WRITE ZERO	How much of [FOOD] do you currently have stored?	AMT UNIT AMT CURRENCY MONTHS MONTHS AMT UNIT UNIT CURRENCY AMOUNT AMOUNT AMT UNIT	AMOUNT AMOUNT AMT UNIT				
																NO	YES	AMT
31 Beer																		
32 Shilovica																		
33 Fast food: bureks, etc....																		
34 Yeast																		
35 Biscuits and cakes																		
36 Spices																		
37 Tea																		
38 Coffee																		
Misc. other food																		
39 expenses																		

PART B: STORED FOOD

MOST KNOWLEDGEABLE MEMBER

1.	PURCHASES IN LAST YEAR								GIFTS	AID	STOCKS		USE CODES WITH STAR WHENEVER POSSIBLE UNIT CODES: KILO*...1 GRAM*...2 LITER*... 3 BUNCH... 4 TIN.... 5 PIECES.. 6 CARTONS. 7 BOTTLES. 8 CURRENCY CODES: DEM 1 DINAR 2
	2.	3.	4.	5.	6.	7.	8.	9.	AMOUNT	AMOUNT	AMT	UNIT	
<p>In the following questions, I want to ask about all food consumed by your household, regardless of which person ate it.</p> <p>Has your household consumed [FOOD] during the past 12 months? Please exclude from your answer any [FOOD] purchased for processing or resale in a household enterprise.</p> <p>PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q.1 IS YES, ASK Q.2-12.</p>	<p>Have the members of your household bought any [FOOD] in the past 12 months?</p> <p>YES .1 NO . 2 (>7)</p>	<p>How many times in the past 12 months, have you bought [FOOD] ?</p>	<p>How much did you buy in total?</p>	<p>How much did you pay in total?</p>	<p>How much did you purchase in the last 30 days, that is since [DATE]?</p>	<p>What is the total value of the [FOOD] consumed that you received as a gift over the past 12 months?</p> <p>IF NONE, WRITE ZERO</p>	<p>What is the total value of the [FOOD] consumed that you received from aid over the past 12 months?</p> <p>IF NONE, WRITE ZERO</p>	<p>How much of [FOOD] do you currently have stored?</p>					
			AMT	UNIT	AMT	CURR ENCY	AMT	UNIT	AMOUNT	AMOUNT	AMT	UNIT	

40	Wheat (flour)												
41	Sunflower oil												
42	Sugar												
43	Potatoes												
44	Honey												
45	Onions												
46	Salt												

1. In the following questions, I want to ask about all purchases made for your household, regardless of which person made them. C Has your household bought, spent money on or received gifts of any [ITEM] during the past 12 months? Please exclude from your answer any [ITEM] purchased for processing or resale in a household enterprise. PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q.1 IS YES, ASK Q.2-6	2. Currency used for purchases for this article USE THE SAME CURRENCY FOR THIS ARTICLE CURRENCY: 1. DM 2. DINAR			PURCHASES 30 DAYS			12 MONTHS	GIFTS 12 MONTHS	
				3. Have the members of your household bought any [ITEM] in the last 30 days? YES . 1 NO . . 2 (>5)	4. How much did you spend? Currency 1. DEM 2. DINAR		5. How much did your household spend for [ITEM] during the past 12 months? AMOUNT	6. Did you receive any [ITEM] as a gift during the past 12 months? YES . . 1 NO . . . 2 (>NEXT ITEM)	7. What is the value of all the [ITEM] that you received as a gift during the past 12 months? AMOUNT
					AMOUNT	AMOUNT			
Firewood			1						
Charcoal			2						
Cooking gas			3						
Other fuels			4						
Electricity			5						
Personal care items (soap, shampoo, toothpaste, etc.) and cosmetics			6						
Personal services (haircuts, shaving, etc.)			7						
Women's clothing and footwear			8						
Men's clothing and footwear			9						
Children's clothing and footwear			10						
Cloth and sewing supplies, Tailoring			11						

1. In the following questions, I want to ask about all purchases made for your household, regardless of which person made them. C Has your household bought, spent money on or received gifts of any [ITEM] during the past 12 months? Please exclude from your answer any [ITEM] purchased for processing or resale in a household enterprise. PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q.1 IS YES, ASK Q.2-6	2. Currency used for purchases for this article USE THE SAME CURRENCY FOR THIS ARTICLE CURRENCY: 1. DM 2. DINAR			PURCHASES 30 DAYS			12 MONTHS	GIFTS 12 MONTHS	
				3. Have the members of your household bought any [ITEM] in the last 30 days? YES . 1 NO . . 2 (>5)	4. How much did you spend? Currency 1. DEM 2. DINAR		5. How much did your household spend for [ITEM] during the past 12 months? AMOUNT	6. Did you receive any [ITEM] as a gift during the past 12 months? YES . . 1 NO . . . 2 (>NEXT ITEM)	7. What is the value of all the [ITEM] that you received as a gift during the past 12 months? AMOUNT
					AMOUNT	AMOUNT			
Laundry and dry cleaning			12						
Household cleaning and toilet supplies (soap, washing powder, bleach, etc.)			13						
Kitchen supplies (napkins, matches, garbage bags, etc.)			14						
Over the counter remedies and medicines			15						
Prescription medicines and health services (doctor fees, hospital charges, etc.)			16						
Books, stationery (excluding textbooks)			17						
Postal expenses, telegrams,			18						
Entertainment (cinema, cassette rentals, cultural and sporting events, etc.)			19						
Electrical items (light bulbs, cords, plugs, batteries, etc.)			20						
Repair and maintenance of household articles			21						
Rent			22						

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	NO	YES	CODE	3. Have the members of your household bought any [ITEM] in the last 30 days? YES . 1 NO . . 2 (>5)	4. How much did you spend? Currency 1. DEM 2. DINAR		5. How much did your household spend for [ITEM] during the past 12 months? AMOUNT	6. Did you receive any [ITEM] as a gift during the past 12 months? YES . . 1 NO . . . 2 (>NEXT ITEM)	7. What is the value of all the [ITEM] that you received as a gift during the past 12 months? AMOUNT	
					AMOUNT	AMOUNT			AMOUNT	AMOUNT
Household linens (sheets, blankets, towels, etc.)			23							
Small kitchen appliances (blender, mixer, etc.)			24							
Dishes (crockery, cutlery, glassware, etc.) and kitchen utensils			25							
Small electrical items (radio, walkman, watch, clock, etc.)			26							
Household tools			27							
Sports and hobby equipment, toys			28							
Toys and musical instruments			29							
Vehicle repair, maintenance, parts and licenses (do not include gasoline)			30							
Repair and regular maintenance of the house			31							
Home improvements and additions			32							
Insurance (auto, property)			33							

1. In the following questions, I want to ask about all purchases made for your household, regardless of which person made them. C Has your household bought, spent money on or received gifts of any [ITEM] during the past 12 months? Please exclude from your answer any [ITEM] purchased for processing or resale in a household enterprise. PUT AN X (X) IN THE APPROPRIATE BOX FOR EACH FOOD ITEM. IF THE ANSWER TO Q.1 IS YES, ASK Q.2-6				PURCHASES 30 DAYS		12 MONTHS	GIFTS 12 MONTHS	
	NO	YES	CODE	3. Have the members of your household bought any [ITEM] in the last 30 days? YES . 1 NO . . 2 (>5)	4. How much did you spend? AMOUNT	5. How much did your household spend for [ITEM] during the past 12 months? AMOUNT	6. Did you receive any [ITEM] as a gift during the past 12 months? YES . . 1 NO . . . 2 (>NEXT ITEM)	7. What is the value of all the [ITEM] that you received as a gift during the past 12 months? AMOUNT
Excursion, holiday (including travel and lodging)			34					
Charity, donations, contributions to clubs or organizations			35					
Customs tax			36					
Excise tax			37					
Gambling and cash losses			38					
Legal or notary services			39					
Marriages, births, and other ceremonies			40					
Marriages gifts (dowries)			41					
Funeral expenses			42					

<p>1. Does your household currently own any of the following items?</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p>DETERMINE WHICH DURABLES THE HOUSEHOLD OWNS BY ASKING Q.1. FOR EACH DURABLE OWNED, AND PROCEED TO ASK Q.2-4 FOR EACH ITEM.</p> </div>				<p>2. How many years ago did you acquire this [ITEM]?</p>	<p>3. Did you purchase it or receive it as a gift or payment for services?</p>	<p>4. If you wanted to sell this [ITEM] today, how much would you receive?</p>
ITEM	CODE	YES	NO	YEARS		AMOUNT
Electric or gas stove	201					
Wood stove	202					
Generator	203					
Water heater	204					
Water reservoir	205					
Refrigerator	206					
Freezer	207					
Washing Machine	208					
Sewing/knitting machine	209					
Fan	210					
Television	211					
Video player	212					
Tape player/CD player	213					
Camera, video camera	214					
Cellular phone	215					
Computer	216					
Satellite dish	217					
Jewelry	218					
Bicycle	219					
Motorcycle/scooter	220					
Car or truck	221					

SECTION 4

Health

Remittances

Social Protection

Dwelling

1. During the past 12 months, has your household or any of its members received any money or goods from persons who are not members of your household? For example from relatives living elsewhere, child support or alimony, or from friends or neighbors?

YES...1
NO...2 (>NEXT SECTION)

DONOR	2. What are the first names of the persons who sent assistance to this household during the past 12 months? <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;">LIST ALL NAMES BEFORE GOING TO 3-10</div>	3. What is the relationship between [NAME OF DONOR] and the head of the household? Donor is _____ SPOUSE.....1 CHILD.....2 GRANDCHILD.....3 NIECE/NEPHEW.....4 PARENT.....5 SISTER/BROTHER.....6 OTHER RELATIVE.....7 NO RELATION.....8	4. Where does [DONOR] live? SAME MUNICIPALITY.....0 OTHER MUNICIPALITY.1-30 FORMER YUGOSLAVIA.....44 ALBANIA/SERBIA**.....55 SWITZERLAND.....60 GERMANY.....61 ITALY.....62 OTHER WESTERN EUROPE.63 USA.....77 OTHER.....88	5. How much money have members of the household received from [DONOR] in the past 12 months? CURRENCY 1. DEM 2. DINAR	6. What is the approximate value in cash of the assistance given in food or other goods in the past 12 months? USE SAME CURRENCY	7. Is the assistance sent by [DONOR] provided for a specific reason? YES...1 NO...2 GO TO Q.9	8. What are the top three reasons why [DONOR] sent this assistance? GENERAL EXPENSES...1 RECONSTRUCTION...2 INVESTMENT.....3 DURABLE GOODS.....4 WEDDING/FUNERAL..5 MEDICAL EXPENSES.6 OTHER.....7	9. How many times per year does [DONOR] send this assistance?	10. Does the household need to repay the assistance sent by the [DONOR]? YES...1 NO...2
	NAMES			AMOUNT	AMOUNT		1ST	2ND	3RD

				**: in Question 4 Substituted Serbia to Albania in Serb questionnaire							

SOCIAL PROTECTION

1. Did your household receive any food aid in the last 6 months? 1. YES
 2. NO
 >> GO TO 17

2. How many times did your household receive in the last 6 months?	3. When did the last distribution take place?	4. Who performed the last distribution?	5. Who provided the food for the distribution?	6. How much (in kg) did you receive at the last distribution?				
	DAY	MONTH	CODE BELOW	Wheat flour	Veg.oil	Beans	Sugar	Salt

7. Do you have a ration card? 1. YES
 2. NO, GO TO Q.13
 8. How many household members are included in the ration card?
 9. Do you know which ration you are entitled to? 1. YES
 2. NO, GO TO Q.11
 10. Did you always receive the appropriate ration in the past 6 months? 1. YES
 2. NO
 11. Were you sharing the ration with somebody outside your household? 1. YES
 2. NO
 12. How long does the ration usually last? weeks
 13. Have some members of your household been de-registered? 1. YES
 2. NO
 14. Did they all de-register voluntarily? 1. YES
 2. NO
 15. Do you have a de-registration sheet? 1. YES
 2. NO
 16. When do you think the next distribution will be?

DAY	MONTH

CODES QUESTIONS 4 AND 5
 1. MTS
 2. Red Cross
 3. Church
 4. Other local agency
 5. WFP
 6. CRS
 7. MCI
 8. Other Int. Agency
 9. Don't know

- Is any member of your household currently eligible to receive payment benefits from employer or any public administration (UNMIK/JIAS, FRY, other state)?
 17. administration (UNMIK/JIAS, FRY, other state)?
 YES...1
 NO....2 (>GO TO Q.21)

18. List the three most important types of benefits that your household is eligible for?

<input type="text"/>	<input type="text"/>	<input type="text"/>
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 - Any public pension 1
 - Company or private pension 2
 - Survivor's pension 3
 - Invalidity pension 4
 - Unemployment benefit 5
 - Illness payments 6
 - Disability payments 7
 - Job search programs 8
 - Maternity payments 9
 - Child allowances 10
 - Social assistance payment 11

19. Does your household receive these payments regularly?
 YES...1
 NO....2

20. How much have you received over the last year?

	DM
Cash	
Other	

21. Did your household receive any assistance from Center for Social Welfare in the past 6 months?

- 1. YES
- 2. NO, GO TO Q.23

	22. How much? DM
Cash	
Other	

23. Are members of your family registered with the Center for Social Welfare Programme?

- 1. YES
- 2. NO, GO TO Q. 30

24. Who is registered? ID	25. Category I or II	26. Has [person] already received? 1. YES 2. NO >Q.30	27. How many times?	28. How much cash last time? DM	29. Did they receive the food component last time? 1. YES 2. NO

30. Has anybody from this household ever visited the UNMIK Center for Social Work?

- YES...1
- NO....2

31. Has this household ever been visited by the staff of the UNMIK Center for Social Work?

- YES...1
- NO....2, GO to Q.33

32. Have you been satisfied with the services provided at the UNMIK Center for Social Work?

- Very satisfied 1
- Satisfied 2
- Somewhat unsatisfied 3
- Very unsatisfied 4

33. Did any member of your household participate in a credit program? 1. YES
2. NO, GO TO Q.37

34. Did any member of your household receive any loan? 1. YES
2. NO, GO TO Q.37

35. How much did they receive? DM

36. Who was providing the loan? USE CODES BELOW (Next Page)

37. Did this household receive any aid for repairing/rebuilding you house in the last 12 months?

1. YES
 2. NO, GO TO Q. 40

38. How much was it worth?

DM
Dinars

39. Who donated it?

USE CODES BELOW

40. Did you receive any additional aid in the past 12 months?

1. YES
 2. NO, GO TO OTHER MODULE

	ASK Q.41 FOR ALL, THEN GO TO 42-44	41. Did you receive ? 1. YES 2. NO, NEXT	42. How much was it worth? DM	43. Who donated? USE CODES ON RIGHT	44. When was the last month you received [ITEM]?	
					MONTH	YEAR
A	Winter fuel					
B	Fresh food					
C	Winter clothes					
D	Children's kits					
E	Education kits					
F	Stoves					
G	Others					

CODES FOR Q.36, 39 AND 43.	
HUMANITARIAN GROUP	1
RELATIVES IN KOSOVO	2
RELATIVES ABROAD	3
BANK	4
SOCIALLY OWNED ENTERPRISE/State of Serbia**	5
EMPLOYER	6
OTHERS	7

**Added State of Serbia to Socially Owned Enterprise in Question 36, 39 and 43 (Code 5) in Serbian Questionnaire

	INCOME SOURCES	<p>1. In the last 12 months, did your household, or any of its members, receive any payments, in cash or in any other form, from the following</p> <p style="text-align: center;">YES . . 1 NO . . . 2</p> <p>(»NEXT SOURCE)</p>	<p>2. How much did your household receive in the last 12 months from [SOURCE] including the value of any payment in the form of goods?</p> <p style="text-align: center;">CURRENCY 1. DEM 2. DINAR</p> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
--	----------------	--	--

1	Rental income:		
	Apartment, house, other living space		
	Land		
	Car, truck, other vehicles		
	Other rental		
2	Revenue from sale of assets:		
	Sale of real estate (house, land, etc...)		
	Sale of vehicles		
	Sale of durable goods of the household		
	Other sale of assets		
4	Other Income:		

Now I would like to ask you about your housing conditions.

By housing, I mean all rooms and separate structures (including tents and prefabs) used by the members of your household

D W E L L I N G C O D	Dwelling type DAMAGED: PLEASE REFER TO THE CATEGORIES USED IN THE IMG/UNHCR INVENTORIES	1.	2.	3.	4.	5.	6.
		Does your household use [STRUCTURE]? LIST ALL STRUCTURES BEFORE ASKING Q. 2-6 YES..1 NO...2 (»next dwelling	How large is the part of the [STRUCTURE] your household use? DO NOT INCLUDE KITCHEN, CORRIDORS AND BATHROOMS SQ. MTRS	What is the main material of the walls of this [STRUCTURE] MUD. 1 STONES 2 WOOD 3 BRICKS 4 CEMENT BLOCKS 5 OTHER 6	How many separations (rooms) does the [STRUCTURE] have? TENTS: GIVE NUMBER, NUMBER	When was the [STRUCTURE] built? YEAR	How did your household obtain this [STRUCTURE]? PURCHASED.. 1 FROM EMPLOYER 2 BUILT PERSONNALLY 3 SWAPPED 4 INHERITED 5 ASSIGNED AFTER WAR 6 OCCUPIED BECAUSE VACANT 7 DONATED 8 RENTED 9 OTHERS 10
1	Tent						
2	Prefab/container						
3	Damaged house						
4	Damaged apartment						
5	Intact/Repaired house						
6	Intact/Repaired apartment						
7	Barracks						
8	Others						

AMENITIES

HEAD OF HOUSEHOLD

1. What is the main source of water to wash for your household?

- CENTRALIZED PIPELINE 1 >>Q.3
- STANDING WATER PIPE 2 >>Q.4
- WELL 3 >>Q.4
- SPRING 4 >>Q.4
- BROUGHT IN WATER (TRUCK) 5 >>Q.4
- PUBLIC TAP 6
- OTHER 7

2. How long does it take to bring the water to the main dwelling? mn

3. How many hours per day was water available on average in the past 7 days? hrs

4. What is the main source of hot water for your household?

- CENTRALIZED SUPPLY 1
- ELECTRIC WATER HEATER 2
- COAL STOVE 3
- WOOD STOVE 4
- GAS WATER HEATER 5
- NO HOT WATER 6
- OTHER 7

5. What type of toilet does your household uses?

- FLUSH TOILET 1
- LATRINE 2
- NO TOILET 0 >>Q7

6. Is it shared with other households

- Yes 1
- No 2

7. Does your household have access to electricity?

- Yes 1
- No 2 >>Q10

8. How many hours per day was electricity available on average in the past 7 days? hrs

9. Has your electricity supply improved in the past 12 months?

Yes

- No 2

10. How do you light your dwelling when electricity is unavailable?

- GENERATOR 1
- KEROSENE LAMPS 2
- FLASHLIGHTS 3
- OTHER 4

11. How does your household usually heat its dwelling?

- WOOD STOVE 1
- ELECTRIC HEATER 2
- DISTRICT HEATING 3
- WATER RADIATORS- FROM A GAS, COAL, ELACTRIC BOILER INSIDE THE HOUSE 4
- COAL STOVE 5
- OTHER 6

12. How many months between October 99 and April 2000, did your household heat the dwellings? mo

13. How many rooms did your household manage to heat when it was heating the dwelling in the past 12 months?

14. Where is the nearest telephone used by the members of your household?

- INSIDE THE DWELLING 1
- NEIGHBOR'S HOUSE 2
- PUBLIC PLACE 3
- NO TELEPHONE ACCESSIBLE 0

15. How does your household dispose of garbage?

- STREET CONTAINERS 1
- COLLECTED BY TRUCK 2
- DUMPED 3
- BURNED 4
- BURIED 5