RLMS
Russia Longitudinal Monitoring Survey

Round 13
(September 2004 - December 2004)

CHILD QUESTIONNAIRE

Russian Institute of Nutrition
University of North Carolina at Chapel Hill
Institute of Sociology, Russian Academy of Sciences
### QUESTIONNAIRE FOR CHILDREN

**9TH ROUND**

[i.e., 13th round]

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>

#### SITE M

1. [ NAME OF POPULATED AREA _________________________________ | ___ | ___ | ___ | ]

#### CENSUSDM

2. [ NUMBER OF SURVEY SECTOR (FOR CITIES) __________________________ | ___ | ___ | ]

#### FAMILY M

3. [ NUMBER OF FAMILY | ___ | ___ | ]

#### PERSON M

4. [ NUMBER ON THE CARD OF THE CHILD BEING DISCUSSED | ___ | ___ | ]

#### IMR PINBF

4.1 [ DID THE CHILD PARTICIPATE IN THE SURVEY EVER BEFORE? ]

<table>
<thead>
<tr>
<th>YES</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO</td>
<td>2</td>
</tr>
</tbody>
</table>

#### IMGENDER

5. [ SEX OF THE CHILD BEING DISCUSSED: ]

<table>
<thead>
<tr>
<th>MALE</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>FEMALE</td>
<td>2</td>
</tr>
</tbody>
</table>

#### IMINTDAY

7. [ DATE OF INTERVIEW: DAY | ___ | ___ | MONTH | ___ | ___ | ]

#### IMINTMON

#### IMINTHRS

8. [ LENGTH OF INTERVIEW: | ___ | HOURS | ___ | ___ | MINUTES ]

#### IMINTMIN

9. [ LAST NAME OF INTERVIEWER _________________________________ ]

#### IMINTNUM

10. [ NUMBER OF INTERVIEWER | ___ | ___ | ___ | ]

#### IMADANSW

11. [ NUMBER OF THE ADULT WHO ANSWERED THE QUESTIONS | ___ | ___ | ]

2004
1. K

I, [INTERVIEWER! WRITE YOUR FULL LAST NAME, FIRST NAME, PATRONYMIC!]

HAVE READ TO THE CHILD’S PARENTS THE STANDARD TEXT REGARDING THE PURPOSE AND CONDITIONS OF THE STUDY AND HAVE RECEIVED THEIR CONSENT TO CONDUCT THE INTERVIEW.

INTERVIEWER’S SIGNATURE ______________________________

DATE __________________________

[INTERVIEWER! QUESTIONS HEREIN SHOULD BE ANSWERED ONLY BY AN ADULT FAMILY MEMBER, IDEALLY THE PERSON WHO TOOK CARE OF THE CHILD IN THE LAST 7 DAYS. CHILDREN MAY BE PRESENT DURING THE DISCUSSION WITH THE CONSENT OF THE PARENTS.]

[INTERVIEWER! WRITE THE NAME OF THE CHILD YOU ARE DISCUSSING.]

A. Tell me, please: On what day, in what month, and in what year was (he/she) born?

<table>
<thead>
<tr>
<th>day</th>
<th>month</th>
<th>year</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMBIRTHD</td>
<td>IMBIRTHM</td>
<td>IMBIRTHY</td>
</tr>
</tbody>
</table>

SECTION “CARE OF CHILDREN”

[INTERVIEWER! IF THE CHILD WAS BORN IN 1998 OR EARLIER, ASK QUESTIONS BEGINNING WITH QUESTION 1.


FOR THE REMAINING CHILDREN (BORN IN 2003 OR 2004), ASK QUESTION 9 ON PAGE 6.]

IMGRADE1 1. Tell me, please: Has [NAME OF CHILD] finished at least one grade of general school?

Yes ............................................. 1
No ................................................ 2 → [SKIP TO 3]
DOESN’T KNOW ................................ 7 → [SKIP TO 3]
REFUSES TO ANSWER .......................... 8 → [SKIP TO 3]

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

__________ GRADES
DOESN’T KNOW ............................... 97
REFUSES TO ANSWER .......................... 98

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

Yes ............................................. 1
No ................................................ 2 → [SKIP TO 8 ON PAGE 5]
DOESN’T KNOW ................................ 7 → [SKIP TO 8 ON PAGE 5]
REFUSES TO ANSWER .......................... 8 → [SKIP TO 8 ON PAGE 5]

RLMS, Round 13 Individual–Child
4. Has your family paid or should you have paid for (his/her) school instruction in the current quarter, not including payments for textbooks?

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

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

   ______________________ rubles
   DOESN’T KNOW            .................................. 997
   REFUSES TO ANSWER       .................................. 998

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

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

7. How much did your family pay for (his/her) textbooks?

   ______________________ rubles
   DOESN’T KNOW            .................................. 997
   REFUSES TO ANSWER       .................................. 998

7.1 Does (he/she) attend physical education classes at school?

   Yes                      .................................. 1
   No                      .................................. 2 → [ SKIP TO 7.4 ON PAGE 3 ]
   DOESN’T KNOW            .................................. 7 → [ SKIP TO 7.4 ON PAGE 3 ]
   REFUSES TO ANSWER       .................................. 8

7.2 How often does (he/she) engage in physical activities during school, in class?

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

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

   (He/she) engages in during class . . .? How many hours and minutes per week? D/K REFUSES

1. Karate, judo, self-defense, wrestling, boxing, gymnastics
   Yes . . 1 → ___ hrs ___ min 97  98
   No . . 2 IMKARHRS
   IMKARATE IMKARMIN

2. Active sports: badminton, tennis, soccer, basketball, volleyball, hockey, or swimming
   Yes . . 1 → ___ hrs ___ min 97  98
   No . . 2 IMSPOHRS
   IMSPORTS IMSPOMIN

3. Track and field, skiing, skating
   Yes . . 1 → ___ hrs ___ min 97  98
   No . . 2 IMTRAHRS
   IMTRACKF IMTRAMIN

4. Other kinds of physical activity
   Yes . . 1 → ___ hrs ___ min 97  98
   No . . 2 IMPEOHRS
   IMPEOTH IMPEOMIN

RLMS, Round 13 Individual–Child
**IMPHYSOC** 7.4 Does (he/she) engage in physical activities and sports before or after classes? I have in mind training sessions with a coach as well as simply active games outdoors--soccer, tag, hopscotch, hide and seek, riding a bicycle, roller skating, etc.

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>DOESN’T KNOW</td>
<td>7</td>
</tr>
<tr>
<td>REFUSES TO ANSWER</td>
<td>8</td>
</tr>
</tbody>
</table>

**IMOCFREQ** 7.5 How often does (he/she) engage in physical activities and sports, including outdoor games, before or after classes?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-3 times a month</td>
<td>1</td>
</tr>
<tr>
<td>1 time a week</td>
<td>2</td>
</tr>
<tr>
<td>2 times a week</td>
<td>3</td>
</tr>
<tr>
<td>3-4 times a week</td>
<td>4</td>
</tr>
<tr>
<td>Every day</td>
<td>5</td>
</tr>
<tr>
<td>DOESN’T KNOW</td>
<td>7</td>
</tr>
<tr>
<td>REFUSES TO ANSWER</td>
<td>8</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Activity</th>
<th>(He/she) engages in before or after classes?</th>
<th>How many hours and minutes per week?</th>
<th>D/K REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Karate, judo, self-defense, wrestling, boxing, gymnastics</td>
<td>Yes ... 1</td>
<td>____ hrs ____ min</td>
<td>97 98</td>
</tr>
<tr>
<td></td>
<td>No ... 2</td>
<td>IMOCKARA</td>
<td>IMOCKMIN</td>
</tr>
<tr>
<td>2. Active sports: badminton, tennis, soccer, basketball, volleyball,</td>
<td>Yes ... 1</td>
<td>____ hrs ____ min</td>
<td>97 98</td>
</tr>
<tr>
<td>hockey, or swimming</td>
<td>No ... 2</td>
<td>IMOCSHRS</td>
<td>IMOCMIN</td>
</tr>
<tr>
<td>3. Track and field, skiing, ice skating, roller skating</td>
<td>Yes ... 1</td>
<td>____ hrs ____ min</td>
<td>97 98</td>
</tr>
<tr>
<td></td>
<td>No ... 2</td>
<td>IMOCSPOR</td>
<td>IMOCSMIN</td>
</tr>
<tr>
<td>4. Other kinds of physical activity, for example, tag, hide and seek,</td>
<td>Yes ... 1</td>
<td>____ hrs ____ min</td>
<td>97 98</td>
</tr>
<tr>
<td>riding a bicycle</td>
<td>No ... 2</td>
<td>IMOCTRAC</td>
<td>IMOCMIN</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Activity</th>
<th>(He/she) engages in?</th>
<th>How many hours and minutes per day?</th>
<th>D/K REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Watching television, videos, playing video or computer games</td>
<td>Yes ... 1</td>
<td>____ hrs ____ min</td>
<td>97 98</td>
</tr>
<tr>
<td></td>
<td>No ... 2</td>
<td>IMWATCTV</td>
<td>IMWTVMIN</td>
</tr>
<tr>
<td>3. Playing games with toy cars, dolls, construction sets, chess, checkers</td>
<td>Yes ... 1</td>
<td>____ hrs ____ min</td>
<td>97 98</td>
</tr>
<tr>
<td></td>
<td>No ... 2</td>
<td>IMPLGAME</td>
<td>IMPLGMIN</td>
</tr>
<tr>
<td>2. Reading, music lessons, drawing, doing homework</td>
<td>Yes ... 1</td>
<td>____ hrs ____ min</td>
<td>97 98</td>
</tr>
<tr>
<td></td>
<td>No ... 2</td>
<td>IMREADNG</td>
<td>IMREDMIN</td>
</tr>
</tbody>
</table>
4. K

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

Yes ............................................ 1
No .................................................. 2 → [ SKIP TO 7.8.1 ]
DOESN'T KNOW .................................. 7 → [ SKIP TO 7.8.1 ]
REFUSES TO ANSWER .......................... 8 → [ SKIP TO 7.8.1 ]

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMCMPT RH 1. At home</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IMCMPT RW 2. At a place of study</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IMCMPT RE 3. In other places</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>

IMINTRNT 123. Tell me, please: In the last 12 months has (he/she) had to use the Internet?

Yes ............................................ 1
No .................................................. 2 → [ SKIP TO 7.8.1 ]
DOESN'T KNOW .................................. 7 → [ SKIP TO 7.8.1 ]
REFUSES TO ANSWER .......................... 8 → [ SKIP TO 7.8.1 ]

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

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMINTERN H 1. At home</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IMINTERN W 2. At a place of study</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IMINTERN C 3. In an Internet café</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IMINTERN E 4. In other places</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>

IMI72 125. In the last 12 months has (he/she) used the Internet for:

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>IM14STUD 1. Study</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IM14ENTR 3. Entertainment</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IM14COMM 4. Communication with friends</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IM14CULT 6. Expanding (his/her) horizons</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IM14REFR 7. Getting reference information</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>IM14OTH 9. Other things</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>

IMI72 7.8.1 How does (he/she) get to school?

[ INTERVIEWER! MARK ONLY ONE ANSWER.]

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

IM2SHR 7.8.2 How many total hours and minutes does it take (him/her) to go to school and return?

__________________ hours _____________ minutes → [ SKIP TO 9 ON PAGE 6 ]
DOESN'T KNOW ...................................... 97 → [ SKIP TO 9 ON PAGE 6 ]
REFUSES TO ANSWER ............................... 98 → [ SKIP TO 9 ON PAGE 6 ]
5. K

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

<table>
<thead>
<tr>
<th>Reason</th>
<th>Yes</th>
<th>No</th>
<th>D/K REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMTOOSML 1. (He/she) will go to school in a year or two</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>IMTOOII 2. (He/she) has poor health and cannot attend school</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>IMEXPELL 3. (He/she) was expelled from school</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>IMHOMESC 4. Family wants to give (him/her) home schooling</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>IMMOSCHL 5. No schools are close to home</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
<tr>
<td>IMSCOTH 6. Other reasons</td>
<td>1</td>
<td>2</td>
<td>7</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Activity</th>
<th>How many hours and minutes per week?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Karate, judo, gymnastics, tennis, swimming</td>
<td>D/K REFUSES</td>
</tr>
<tr>
<td>Plays with a ball, goes skating, rides a bicycle</td>
<td></td>
</tr>
<tr>
<td>Dances, runs, jumps, plays hopscotch, hide and seek</td>
<td></td>
</tr>
<tr>
<td>Plays sitting: on a bench, in a sandbox</td>
<td></td>
</tr>
</tbody>
</table>

IMNSPREG 8.13 Is (he/she) regularly engaged in physical activities and sports in a children’s preschool institution, at a sports club, or at home?

<table>
<thead>
<tr>
<th>Option</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>DOESN’T KNOW</td>
<td>7</td>
</tr>
<tr>
<td>REFUSES TO ANSWER</td>
<td>8</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Activity</th>
<th>How many hours and minutes per day?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Watching TV, videos, playing video or computer games</td>
<td>D/K REFUSES</td>
</tr>
<tr>
<td>Playing games with toy cars, dolls, construction sets, chess, checkers</td>
<td></td>
</tr>
<tr>
<td>Reading, or listening to what is read to (him/her)</td>
<td></td>
</tr>
</tbody>
</table>
9. **Tell me, please:** In the last 7 days did anyone look after [NAME OF CHILD] who is not a member of your household: friends, workers at a children’s institution, school teachers, or relatives who live separately?

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

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

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

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

    __________ DAYS
    DOESN’T KNOW ............................... 97
    REFUSES TO ANSWER .................... 98

12. On those days of the last 7 when relatives who live separately helped care for [NAME OF CHILD], how many hours and minutes a day on average did they help?

    __________ HOURS __________ MINUTES
    DOESN’T KNOW ............................... 97
    REFUSES TO ANSWER .................... 98

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

    Yes ............................................. 1
    No ............................................... 2 → [SKIP TO 17 ON PAGE 7]
    DOESN’T KNOW ............................... 7 → [SKIP TO 17 ON PAGE 7]
    REFUSES TO ANSWER .................... 8 → [SKIP TO 17 ON PAGE 7]

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

    __________ DAYS
    DOESN’T KNOW ............................... 97
    REFUSES TO ANSWER .................... 98

15. **On those days of the last 7 when** [NAME OF CHILD] went to kindergarten, nursery, after-school group, or something similar, how many hours and minutes a day on average was (he/she) there?

    __________ HOURS __________ MINUTES
    DOESN’T KNOW ............................... 97
    REFUSES TO ANSWER .................... 98
16. **Who owns the preschool or school that [NAME OF CHILD] attends?**

- Government ........................................ 1
- Official department or enterprise ............... 2
- Private owner ................................. 3
- Someone else .................................... 4
- DOESN'T KNOW ................................. 7
- REFUSES TO ANSWER ............................ 8

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

- Yes ........................................ 1
- No ........................................ 2 ➔ [SKIP TO 20]
- DOESN'T KNOW ................................. 7 ➔ [SKIP TO 20]
- REFUSES TO ANSWER ............................ 8 ➔ [SKIP TO 20]

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

_________ DAYS

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

19. **On those days of the last 7, when people who are not your relatives helped to care for [NAME OF CHILD], how many hours and minutes a day on average did they help?**

_________ HOURS __________ MINUTES

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

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

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

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

_______________ rubles

- DOESN'T KNOW ................................. 997
- REFUSES TO ANSWER ............................ 998
SECTION “MEDICAL SERVICES”

IMHPRBLM 5. Has [NAME OF CHILD] had any health problems in the last 30 days?

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

IMLPBLM 5.1 Perhaps in the last 30 days [NAME OF CHILD] did not feel well, for example, had a headache, sore throat, or toothache, or had a cold or upset stomach, a slightly elevated temperature, or a burn, injury, or scratch?

Yes .............................................. 1
No .................................................. 2 → [SKIP TO 20 ON PAGE 9]
DOESN’T KNOW .................................. 7 → [SKIP TO 20 ON PAGE 9]
REFUES TO ANSWER .......................... 8 → [SKIP TO 20 ON PAGE 9]

IMHPRTYP 6. Tell me, please: What were these problems?
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

DOESN’T KNOW .................................. 7
REFUES TO ANSWER .......................... 8

IMTREABY 7. What did you do to solve the health problems (he/she) had in the last 30 days?

Went to a medical institution or health worker ........................................ 1
Did not go to a health worker, but treated by myself ................................. 2 → [SKIP TO 20 ON PAGE 9]
DOESN’T KNOW .................................. 7 → [SKIP TO 20 ON PAGE 9]
REFUES TO ANSWER .......................... 8 → [SKIP TO 20 ON PAGE 9]

IMCALLDR 8. Let’s talk about (his/her) most recent meeting with a health worker in the last 30 days. Tell me, please: Last time did you call a health worker to see (him/her) at home or did (he/she) go there for an appointment?

WENT TO AN APPOINTMENT ........................................... 1
CALLED TO THE HOUSE ............................................. 2 → [SKIP TO 15 ON PAGE 9]
DOESN’T KNOW .................................. 7 → [SKIP TO 15 ON PAGE 9]
REFUES TO ANSWER .......................... 8 → [SKIP TO 15 ON PAGE 9]

IMTYPMIN 9. Tell me, please: Where did (he/she) go to see a doctor last time?

A polyclinic of the raion, city, state, village ........ 1
A commercial polyclinic ............................................. 2
A hospital of the raion, city, state, village .......... 3
A commercial hospital ............................................. 4
A private physician ................................................. 5
DOESN’T KNOW .................................. 7
REFUES TO ANSWER .......................... 8

IMTDRPAY 11. Did you spend any money traveling to this medical institution?

Yes .............................................. 1
No .................................................. 2 → [SKIP TO 15 ON PAGE 9]
DOESN’T KNOW .................................. 7 → [SKIP TO 15 ON PAGE 9]
REFUES TO ANSWER .......................... 8 → [SKIP TO 15 ON PAGE 9]
12. How much did you spend last time traveling to this medical institution?

rubles

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

15. Did you pay for the visit, with either money or gifts?

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

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

Did how much you pay? How much Rubles? D/K REFUSES
1. Paid officially in the enterprises's cashiers's office
   Yes . . . 1 → |__________| 9997 9998
   No . . . 2

2. Gave money or gifts directly to the medical personnel
   Yes . . . 1 → |__________| 9997 9998
   No . . . 2

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

Yes ......................................................... 1
No ......................................................... 2 → [ SKIP TO 20 ]
DOESN'T KNOW ........................................ 7 → [ SKIP TO 20 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 20 ]

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

Yes ......................................................... 1
No ......................................................... 2 → [ SKIP TO 20 ]
DOESN'T KNOW ........................................ 7 → [ SKIP TO 20 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 20 ]

19.1 Whom and how much did you pay?

Did how much you pay? Rubles? D/K REFUSES
1. Officially in the medical enterprises's cashier's office
   Yes . . . 1 → |__________| 9997 9998
   No . . . 2

2. With money or gifts directly to the medical personnel who performed the examination or procedures
   Yes . . . 1 → |__________| 9997 9998
   No . . . 2

20. Has (he/she) been in the hospital in the last three months?

Yes ......................................................... 1
No ......................................................... 2 → [ SKIP TO 26.1 ON PAGE 11 ]
DOESN'T KNOW ........................................ 7 → [ SKIP TO 26.1 ON PAGE 11 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 26.1 ON PAGE 11 ]

21. For what reason or reasons was (he/she) hospitalized?

_________________________________________________________________

_________________________________________________________________

DOESN'T KNOW ........................................ 7
REFUSES TO ANSWER ................................. 8
IMDYSHOS 23. How many days in total in the last three months was (he/she) in the hospital?

<table>
<thead>
<tr>
<th>Doesn't know</th>
<th>Refuses to answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>97</td>
<td>98</td>
</tr>
</tbody>
</table>

IMPDHOSP 24.1 Did you pay for (his/her) stay in the hospital, for medical help, or for treatment, not counting payments for medicine, syringes, and dressings, with either money or gifts?

<table>
<thead>
<tr>
<th>Did you pay?</th>
<th>How much in rubles?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2 [ SKIP TO 25.1 ]</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Did you pay?</th>
<th>How much in rubles?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>[__________] 9997 9998</td>
</tr>
<tr>
<td>No</td>
<td>2 IMPDHCSP</td>
</tr>
</tbody>
</table>

IMPAYMED 25.1 Did you receive medicine, syringes, and dressings that were necessary for (his/her) treatment in the hospital, for free, or did you pay for them with money or gifts?

<table>
<thead>
<tr>
<th>Did you pay?</th>
<th>How much in rubles?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>[ SKIP TO 26.1 ON PAGE 11 ]</td>
</tr>
<tr>
<td>No</td>
<td>2 IMPDHCSP</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Did you pay?</th>
<th>How much in rubles?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>[__________] 9997 9998</td>
</tr>
<tr>
<td>No</td>
<td>2 IMPDHCSP</td>
</tr>
</tbody>
</table>

RLMS, Round 13 Individual–Child
Tell me, please: In the last 12 months has (he/she) seen a medical worker for a routine checkup, not because of sickness?

Yes ............................................ 1
No ............................................... 2 → [ SKIP TO 33 ]
DOESN'T KNOW ................................ 7 → [ SKIP TO 33 ]
REFUSES TO ANSWER ...................... 8 → [ SKIP TO 33 ]

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

Yes ............................................ 1
No ............................................... 2 → [ SKIP TO 33 ]
DOESN'T KNOW ................................ 7 → [ SKIP TO 33 ]
REFUSES TO ANSWER ...................... 8 → [ SKIP TO 33 ]

Did you pay for this preventive checkup, either with money or with gifts?

Yes ............................................ 1
No ............................................... 2 → [ SKIP TO 33 ]
DOESN'T KNOW ................................ 7 → [ SKIP TO 33 ]
REFUSES TO ANSWER ...................... 8 → [ SKIP TO 33 ]

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

Yes ............................................ 1
No ............................................... 2 → [ SKIP TO 51 ON PAGE 13 ]
DOESN'T KNOW ................................ 7 → [ SKIP TO 51 ON PAGE 13 ]
REFUSES TO ANSWER ...................... 8 → [ SKIP TO 51 ON PAGE 13 ]

Were you able to find or buy any of these medicines?

Yes ............................................ 1
No ............................................... 2 → [ SKIP TO 41 ON PAGE 12 ]
DOESN'T KNOW ................................ 7 → [ SKIP TO 41 ON PAGE 12 ]
REFUSES TO ANSWER ...................... 8 → [ SKIP TO 41 ON PAGE 12 ]

Where did you manage to find the necessary medicines?

Yes No D/K REFUSES

1. At the physician’s who prescribed or recommended the medicine ............................................ 1 . . . . 2 . . . . . . . . . . 7 . . . . . 8
IMMEDDRO
2. In a state pharmacy .................................... 1 . . . . 2 . . . . . . . . . . 7 . . . . . 8
IMMEDSTA
3. In a non-state pharmacy .................................... 1 . . . . 2 . . . . . . . . . . 7 . . . . . 8
IMMEDPRI
4. From individuals ....................................... 1 . . . . 2 . . . . . . . . . . 7 . . . . . 8
IMMEDIND
5. At some other place .................................... 1 . . . . 2 . . . . . . . . . . 7 . . . . . 8
IMMEDOTH

Tell me, please: Was (he/she) entitled to a discount on these medicines?

Yes ............................................ 1
No ............................................... 2 → [ SKIP TO 38 ON PAGE 12 ]
DOESN'T KNOW ................................ 7 → [ SKIP TO 38 ON PAGE 12 ]
REFUSES TO ANSWER ...................... 8 → [ SKIP TO 38 ON PAGE 12 ]
37. How much of a discount was (he/she) entitled to, what percentage?

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>100 percent</td>
<td>1</td>
</tr>
<tr>
<td>50 percent</td>
<td>2</td>
</tr>
<tr>
<td>20 percent</td>
<td>3</td>
</tr>
<tr>
<td>Less than 20 percent</td>
<td>4</td>
</tr>
<tr>
<td>Doesn’t know</td>
<td>7</td>
</tr>
<tr>
<td>Refuses to answer</td>
<td>8</td>
</tr>
</tbody>
</table>

38. Did you pay anything for these medicines?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Doesn’t know</td>
<td>7</td>
</tr>
<tr>
<td>Refuses to answer</td>
<td>8</td>
</tr>
</tbody>
</table>

39. How much did you pay for these medicines?

What is the amount paid? ________ rubles

<table>
<thead>
<tr>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>997</td>
</tr>
<tr>
<td>998</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
<tr>
<td>Doesn’t know</td>
<td>7</td>
</tr>
<tr>
<td>Refuses to answer</td>
<td>8</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Reason</th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>Refuses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Didn’t have time to buy them</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Couldn’t find them in a pharmacy</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Didn’t have enough money</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Didn’t want to buy them</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
<tr>
<td>Physically couldn’t buy them myself, and there was no one else to do it</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>

41.1 How much would you have to spend in total to buy the medicine you haven’t bought?

<table>
<thead>
<tr>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>997</td>
</tr>
<tr>
<td>998</td>
</tr>
</tbody>
</table>

41.2 How much of a discount was it, what percentage, for (him/her)?

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>100 percent</td>
<td>1</td>
</tr>
<tr>
<td>50 percent</td>
<td>2</td>
</tr>
<tr>
<td>20 percent</td>
<td>3</td>
</tr>
<tr>
<td>Less than 20 percent</td>
<td>4</td>
</tr>
<tr>
<td>Doesn’t know</td>
<td>7</td>
</tr>
<tr>
<td>Refuses to answer</td>
<td>8</td>
</tr>
</tbody>
</table>
51. Many of us are buying not only the medicines prescribed or recommended by doctors but also medicines recommended by other people.

In the last 30 days have you bought medicine recommended by:

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacy workers</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Friends, relatives, acquaintances</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Radio commercials</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Newspaper commercials</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

13. L

52. How much in total have you paid for those medicines in the last 30 days? Please do not include here money you paid for medicines prescribed or recommended by a doctor.

<table>
<thead>
<tr>
<th>Source</th>
<th>rubles</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOESN’T KNOW</td>
<td>997</td>
</tr>
<tr>
<td>REFUSES TO ANSWER</td>
<td>998</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuberculosis</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Diptheria, whooping cough, tetanus AKDS/ADS 1</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Diptheria, whooping cough, tetanus AKDS/ADS 2</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Diptheria, whooping cough, tetanus AKDS/ADS 3</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Polio 1st time</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Polio 2nd time</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Polio 3rd time</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Hepatitis</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Mumps</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Meningitis</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Other illness</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuberculosis</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Diptheria, whooping cough, tetanus AKDS/ADS 1</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Diptheria, whooping cough, tetanus AKDS/ADS 2</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Diptheria, whooping cough, tetanus AKDS/ADS 3</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Polio 1st time</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Polio 2nd time</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Polio 3rd time</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Hepatitis</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Mumps</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Meningitis</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Other illness</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

44. Please remember: Has (he/she) had any vaccinations in the last three months?

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuberculosis</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Diptheria, whooping cough, tetanus AKDS/ADS 1</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>No</th>
<th>D/K</th>
<th>REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuberculosis</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Diptheria, whooping cough, tetanus AKDS/ADS 1</td>
<td>1</td>
<td>2</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

RLMS, Round 13 Individual–Child
14. L

IMVL3AD3 5. Diphtheria, whooping cough, tetanus
                          AKDS/ADS 3 ........................................ 1 ... 2 ... 7 ... 8
IMVL3PO1 6. Polio 1st time ........................................ 1 ... 2 ... 7 ... 8
IMVL3PO2 7. Polio 2nd time ...................................... 1 ... 2 ... 7 ... 8
IMVL3PO3 8. Polio 3rd time ...................................... 1 ... 2 ... 7 ... 8
IMVL3HEP 9. Hepatitis ............................................. 1 ... 2 ... 7 ... 8
IMVL3MUM 10. Mumps ................................................ 1 ... 2 ... 7 ... 8
IMVL3MEN 12. Meningitis ........................................... 1 ... 2 ... 7 ... 8
IMVL3OTH 11. Other illness ........................................ 1 ... 2 ... 7 ... 8

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

IMVCPOLY 1. In a polyclinic ........................................ 1 ... 2 ... 7 ... 8
IMVCHOSP 2. In a hospital ................................--------- 1 ... 2 ... 7 ... 8
IMVCCCLI 3. In a children's polyclinic or maternity hospital
IMVCDOCT 4. At a private doctor .................................. 1 ... 2 ... 7 ... 8
IMVCSCHO 5. At school ............................................. 1 ... 2 ... 7 ... 8
IMVCKIND 6. At a kindergarten or nursery ....................... 1 ... 2 ... 7 ... 8
IMVCOTHR 7. In another place ..................................... 1 ... 2 ... 7 ... 8

IMPAIDVC 47. Did you pay for (his/her) vaccinations, including the cost of vaccines or syringes?

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

IMAMTVAC 48. How much did you pay?

RUBLES
DOESN'T KNOW ........................................... 997
REFUSES TO ANSWER ................................ 998

IMNGETVC 49. Did you want (him/her) to have some kind of vaccination but were unable to have it done?

Yes ......................................................... 1
No ......................................................... 2 \[ SKIP TO NEXT SECT. P. 15 \]
DOESN'T KNOW ........................................ 7 \[ SKIP TO NEXT SECT. P. 15 \]
REFUSES TO ANSWER ................................ 8 \[ SKIP TO NEXT SECT. P. 15 \]

IMWHYNVC 50. Why was (he/she) not able to get the vaccination? Choose only one of the answers I list:

Too expensive ............................................. 1
No transportation to the place where vaccinations
were given ............................................... 2
Fear of infection ......................................... 3
There wasn’t a vaccine for the vaccination ........... 4
Didn’t have time to get it ................................ 5
Other ...................................................... 6
DOESN'T KNOW ........................................ 7
REFUSES TO ANSWER ................................ 8
SECTION “HEALTH EVALUATION”

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

**IMWTSELF**  How many kilograms does (he/she) weigh?

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

_____________ KG
**DOESN’T KNOW** .......................... 997
**REFUSES TO ANSWER** .......................... 998

**IMHTSELF** 2. What is (his/her) height in centimeters?

_____________ CM
**DOESN’T KNOW** .......................... 997
**REFUSES TO ANSWER** .......................... 998

**IMWTCNHNG** 2.1 Tell me, please: How has (his/her) weight changed over the last year?

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

**IMEVALHL** 3. How would you evaluate (his/her) health? It is:

Very good .......................... 1
Good .......................... 2
Average—not good, not bad .......................... 3
Bad .......................... 4
Very bad .......................... 5
**DOESN’T KNOW** .......................... 7
**REFUSES TO ANSWER** .......................... 8

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

<table>
<thead>
<tr>
<th>Disease</th>
<th>For how long has (he/she) had it?</th>
<th>This illness is . . . ?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Heart disease?</td>
<td>Yes . . . 1 → Since the year of ______</td>
<td>Hereditary . . . . 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Congenital . . . . 2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Acquired . . . . 5</td>
</tr>
<tr>
<td></td>
<td><strong>IMCHRRTYR</strong></td>
<td><strong>IMCHRRTCA</strong></td>
</tr>
<tr>
<td>2. Lung disease?</td>
<td>Yes . . . 1 → Since the year of ______</td>
<td>Hereditary . . . . 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Congenital . . . . 2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Acquired . . . . 5</td>
</tr>
<tr>
<td></td>
<td><strong>IMCLUNYR</strong></td>
<td><strong>IMCLUVCA</strong></td>
</tr>
<tr>
<td>3. Liver disease?</td>
<td>Yes . . . 1 → Since the year of ______</td>
<td>Hereditary . . . . 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Congenital . . . . 2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Acquired . . . . 5</td>
</tr>
<tr>
<td></td>
<td><strong>IMCLIVYR</strong></td>
<td><strong>IMCLIVCA</strong></td>
</tr>
<tr>
<td>4. Kidney disease?</td>
<td>Yes . . . 1 → Since the year of ______</td>
<td>Hereditary . . . . 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Congenital . . . . 2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Acquired . . . . 5</td>
</tr>
<tr>
<td></td>
<td><strong>IMCKIDYR</strong></td>
<td><strong>IMCKIDCA</strong></td>
</tr>
<tr>
<td>5. Gastrointestinal disease?</td>
<td>Yes . . . 1 → Since the year of ______</td>
<td>Hereditary . . . . 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Congenital . . . . 2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Acquired . . . . 5</td>
</tr>
<tr>
<td></td>
<td><strong>IMCGIYR</strong></td>
<td><strong>IMCGICA</strong></td>
</tr>
</tbody>
</table>

RLMS, Round 13 Individual–Child
16. M

Round 13 Individual–Child

For how long has (he/she) had it?
[CIRCLE ONLY ONE ANSWER]

6. Spinal problems?
   Yes . . . 1 → Since the year of ____
   Hereditary ...... 1
   No . . . 2
   IMCSPNYR
   Congenital ....... 2
   IMCSPINE
   Acquired ........ 5
   IMCSPNCA

7. Another _chronic _illness?
   Yes . . . 1 → Since the year of ____
   Hereditary ....... 1
   No . . . 2
   IMCOTHOYR
   Congenital ....... 2
   IMCOTHER
   Acquired ........ 5
   IMCOTHCA

IMDISABL 20.7 Tell me, please: Is the child assigned to any disability classification?

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

IMDIABET 43. Has a doctor ever said that (he/she) had diabetes or increased sugar in the blood?

Yes ........................................... 1
No ........................................... 2
[ SKIP TO 62.1 ]
DOESN'T KNOW ........................... 7
[ SKIP TO 62.1 ]
REFUSES TO ANSWER .................. 8

IMDIABYR 44. In what year did a doctor first tell you about this?

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

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

Yes No D/K REFUSES

IMDCDIET 1. Special diet ........................................... 1 . . 2 . . 7 . . 8
IMDCWCON 2. Weight control ........................................... 1 . . 2 . . 7 . . 8
IMDCORAL 3. Pills ........................................... 1 . . 2 . . 7 . . 8
IMDCSHOT 4. Insulin shots ........................................... 1 . . 2 . . 7 . . 8
IMDCHERB 5. Herbal treatment ........................................... 1 . . 2 . . 7 . . 8
IMDCHOME 6. Homeopathic treatment ........................................... 1 . . 2 . . 7 . . 8
IMDCOTHFR 7. Something else ........................................... 1 . . 2 . . 7 . . 8

IMEVERTB 62.1 Has a doctor ever told you that (he/she) has tuberculosis?

Yes ........................................... 1
No ........................................... 2
[ SKIP TO 62.3 ON PAGE 17 ]
DOESN'T KNOW ........................... 7
[ SKIP TO 62.3 ON PAGE 17 ]
REFUSES TO ANSWER .................. 8
[ SKIP TO 62.3 ON PAGE 17 ]

IMYEARTB 62.2 In what year was (he/she) diagnosed with tuberculosis? If (he/she) has had this diagnosis more than once, when was the most recent time?

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

RLMS, Round 13 Individual–Child
IMEVERHP 62.3 Has (he/she) ever been diagnosed with “hepatitis,” “Botkin’s disease,” or “jaundice”?

Yes ................................. 1
No .................................. 2 → [ SKIP TO 131 ]
DOESN’T KNOW .......................... 7 → [ SKIP TO 131 ]
REFUSES TO ANSWER .................. 8 → [ SKIP TO 131 ]

IMYEARHP 62.4 In what year was (he/she) diagnosed with “hepatitis,” “Botkin’s disease,” or “jaundice”? If (he/she) has had this diagnosis more than once, when was the most recent time?

IN  | ___ | ___ | ___ | ___ | YEAR
DOESN’T KNOW .......................... 7
REFUSES TO ANSWER .................. 8

IMTYPHP 62.5 With which type of hepatitis was (he/she) sick?

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

IMTYPHPST
(char) DOESN’T KNOW .......................... 7
REFUSES TO ANSWER .................. 8

IMDEPRES 131. In the last 12 months has (he/she) had a serious nervous disorder or depression?

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

IMCOUGHS 96. Tell me, please: In the last 7 days has (he/she) had a cough?

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

IMCONGES 97. Tell me, please: In the last 7 days has (he/she) had a cold, perhaps a runny or stuffy nose?

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

IMEARACH 98. Tell me, please: In the last 7 days has (he/she) had an earache?

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

IMSORETH 99. In the last 7 days has (he/she) had a sore throat?

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

RLMS, Round 13 Individual–Child
IMTEETH 100. In the last 7 days has (he/she) been teething?

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

IMDIARRH 101. In the last 7 days has (he/she) had diarrhea?

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

IMDIARDY 102. Tell me, please: How many days in the last 7 has (he/she) had diarrhea?

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

IMBMTIME 103. Tell me, please: In the last 24 hours how many times has (he/she) had a bowel movement?

__________ TIMES
DOESN'T KNOW ................................. 97
REFUSES TO ANSWER ...................... 98

IMMUCUSS 104. Tell me, please: In the last 7 days have you noticed mucus in (his/her) stool (whitish or some other color)?

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

IMBLOODS 105. In the last 7 days have you noticed blood in (his/her) stool?

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

IMFEVERS 106. Tell me, please: Since the diarrhea started, have you noticed any other symptoms of illness with (him/her)? Has (he/she) had an elevated temperature?

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

IMVOMITS 107. Since the diarrhea started, has (he/she) thrown up?

Yes ................................................. 1
No ................................................. 2
DOESN'T KNOW ................................. 7
REFUSES TO ANSWER ...................... 8
**IMABPAIN** 108. Since the diarrhea started, has (he/she) had pain in the abdominal cavity: in the abdomen, large or small intestine, or stomach?

- Yes ........................................ 1
- No ........................................... 2
- DOESN’T KNOW ............................. 7
- REFUSES TO ANSWER .................... 8

**IMLEUKEM** 109. Tell me, please: Has (he/she) had leukemia?

- Yes ........................................... 1
- No .............................................. 2
- DOESN’T KNOW ............................. 7
- REFUSES TO ANSWER .................... 8

[INTERVIEWER! RETURN TO QUESTION A ON PAGE 1 AND VERIFY THE SEX AND BIRTH YEAR OF THE CHILD UNDER DISCUSSION. ASK QUESTIONS 110-111 IF THE CHILD IS A GIRL BORN IN 1993 OR EARLIER. FOR ALL OTHERS, ASK THE QUESTIONS IN THE NEXT SECTION ON PAGE 20.]

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

- Yes ........................................... 1
- No ............................................... 2 → [SKIP TO NEXT SECT. P. 20]
- DOESN’T KNOW ............................. 7 → [SKIP TO NEXT SECT. P. 20]
- REFUSES TO ANSWER .................... 8 → [SKIP TO NEXT SECT. P. 20]

**IMAGEMEN** 111. How old was she when she first menstruated?

| ___ | ___ | YEARS
- DOESN’T KNOW ............................. 97
- REFUSES TO ANSWER .................... 98
I would like you to tell me what [NAME OF CHILD] ate and drank in the last 24 hours--from waking up in the morning until going to bed at night. If (he/she) ate or drank anything during the night, please tell me about that also. Don’t forget to tell me what (he/she) ate and drank outside the home. Include all forms of food and drink (he/she) consumed. It is also important for me to know where (he/she) ate and where the food was prepared.

Now, let’s begin.

[INTERVIEWER!] INDICATE THE DATE OF FILLING IN THIS SECTION:

DAY: | ___ | ___ | MONTH: | ___ | ___ |

SECTION “DIET”

IMYUSUAL 1. With regard to the quantity of food, did (he/she) yesterday eat about the same amount of food as usual, less than usual, or more than usual?

Same amount ........................................ 1
Less ..................................................... 2
More ................................................... 3
DOESN’T KNOW ....................................... 7
REFUSES TO ANSWER ............................. 8

2. Was (his/her) diet yesterday related to:

IMDIETDR 1. Doctor’s recommendation ........................................ 1 .... 2 .... 7 .... 8
IMDIETSP 2. Observing a special diet ........................................ 1 .... 2 .... 7 .... 8
IMDIETRE 3. Religious practices ............................................... 1 .... 2 .... 7 .... 8

IMVITYES 3. Did (he/she) take multivitamins yesterday?

Yes ..................................................... 1
No ....................................................... 2
DOESN’T KNOW ....................................... 7
REFUES TO ANSWER ............................. 8
<table>
<thead>
<tr>
<th>Time first served</th>
<th>Place where food was consumed</th>
<th>Product, dish, or beverage: Name, composition, cooking method, portion size, etc.</th>
<th>Home-cooked or not home-cooked</th>
<th>Amount (g, ml)</th>
<th>Type of food consumed</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Home or as a guest</td>
<td></td>
<td>Home-cooked</td>
<td>Breakfast</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public eatery</td>
<td></td>
<td></td>
<td>Dinner</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nursery or school</td>
<td></td>
<td></td>
<td>Supper</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Workplace</td>
<td></td>
<td></td>
<td>Snack</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other place</td>
<td></td>
<td></td>
<td>Other</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Home or as a guest</td>
<td></td>
<td>Home-cooked</td>
<td>Breakfast</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public eatery</td>
<td></td>
<td></td>
<td>Dinner</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nursery or school</td>
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<td></td>
<td>Supper</td>
<td>3</td>
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<tr>
<td></td>
<td>Workplace</td>
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<td></td>
<td>Snack</td>
<td>4</td>
<td></td>
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<tr>
<td></td>
<td>Other place</td>
<td></td>
<td></td>
<td>Other</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Home or as a guest</td>
<td></td>
<td>Home-cooked</td>
<td>Breakfast</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public eatery</td>
<td></td>
<td></td>
<td>Dinner</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nursery or school</td>
<td></td>
<td></td>
<td>Supper</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Workplace</td>
<td></td>
<td></td>
<td>Snack</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other place</td>
<td></td>
<td></td>
<td>Other</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Home or as a guest</td>
<td></td>
<td>Home-cooked</td>
<td>Breakfast</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public eatery</td>
<td></td>
<td></td>
<td>Dinner</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nursery or school</td>
<td></td>
<td></td>
<td>Supper</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Workplace</td>
<td></td>
<td></td>
<td>Snack</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other place</td>
<td></td>
<td></td>
<td>Other</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Home or as a guest</td>
<td></td>
<td>Home-cooked</td>
<td>Breakfast</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public eatery</td>
<td></td>
<td></td>
<td>Dinner</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nursery or school</td>
<td></td>
<td></td>
<td>Supper</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Workplace</td>
<td></td>
<td></td>
<td>Snack</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other place</td>
<td></td>
<td></td>
<td>Other</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Home or as a guest</td>
<td></td>
<td>Home-cooked</td>
<td>Breakfast</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public eatery</td>
<td></td>
<td></td>
<td>Dinner</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nursery or school</td>
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<tr>
<td></td>
<td>Workplace</td>
<td></td>
<td></td>
<td>Snack</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other place</td>
<td></td>
<td></td>
<td>Other</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Home or as a guest</td>
<td></td>
<td>Home-cooked</td>
<td>Breakfast</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Public eatery</td>
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<td>Dinner</td>
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<td>Snack</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Other place</td>
<td></td>
<td></td>
<td>Other</td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>
SECTION “MEDICAL MEASUREMENTS”

**IMLEGAMP** 1. [INTERVIEWER! PLEASE NOTE:

THE CHILD HAS BOTH LEGS .................. 1
THE CHILD IS MISSING ONE
OR A PART OF ONE LEG  ..................... 2
THE CHILD IS MISSING BOTH
OR PARTS OF BOTH LEGS ................... 3 ]

**IMARMAMP** 2. [INTERVIEWER! PLEASE NOTE:

THE CHILD HAS BOTH ARMS .................. 1
THE CHILD IS MISSING ONE
OR A PART OF ONE ARM ...................... 2
THE CHILD IS MISSING BOTH
OR PARTS OF BOTH ARMS ................... 3 ]

**IMHEIGHT** 3. Height

[INTERVIEWER! MAKE SURE CHILD TAKES OFF HIS/HER SHOES. ]

__________ CM

**IMWEIGHT** 4. Weight

[INTERVIEWER! BEFORE TAKING THE MEASUREMENT, MAKE SURE THE CHILD IS WEARING ONLY LIGHT HOUSEHOLD CLOTHES. ]

__________ KG

**IMWAISTC** 5. Waist circumference

__________ CM

**IMHIIPSIZ** 6. Hip circumference

__________ CM
SECTION “INTERVIEWER’S REMARKS”

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

   IMHHPRS  1. SOME OTHER MEMBER OF THE HOUSEHOLD  .......... 1 ...... 2
   IMOTPR  1. OTHER PEOPLE, NOT MEMBERS OF THIS HOUSEHOLD  .......... 1 ...... 2 ]

2. [ ASSESS THE RESPONDENT’S ATTITUDE TOWARD THE INTERVIEW. THE RESPONDENT WAS:

   FRIENDLY, INTERESTED  .......... 1
   NOT PARTICULARLY INTERESTED  .......... 2
   IMPATIENT, WORRIED  .......... 3
   HOSTILE  .......... 4 ]

3. [ NOTE HOW THE RESPONDENT UNDERSTOOD THE QUESTIONS:

   WELL  .......... 1
   NOT VERY WELL  .......... 2
   POORLY  .......... 3 ]

4. [ ASSESS THE RESPONDENT’S BEHAVIOR DURING THE INTERVIEW. THE RESPONDENT:

   WAS NERVOUS  .......... 1
   WAS OCCASIONALLY NERVOUS  .......... 2
   FELT COMFORTABLE  .......... 3 ]

5. [ ASSESS THE RESPONDENT’S SHARPNESS:

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

6. [ ASSESS THE SINCERITY AND OPENNESS OF THE RESPONDENT. THE RESPONDENT WAS:

   VERY INTROVERTED, INSINCERE  .......... 1
   AS SINCERE AND OPEN AS MOST RESPONDENTS  .......... 2
   MORE SINCERE AND OPEN THAN MOST  .......... 3 ]

7. [ ASSESS WHETHER IN YOUR OPINION THE INFORMATION GIVEN ABOUT FOOD CONSUMPTION IS RELIABLE:

   RELIABLE  .......... 1
   INFORMATION INADEQUATE TO ASSESS  .......... 2
   NOT RELIABLE  .......... 3 ]

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

Signature  __________________________________________