# Questionnaire for Children

**7th Round**

[i.e., 11th round]

## 1. [ Name of Population Center __________________ | ___ | ___ | ___ ]

## 2. [ Number of Survey Sector (for Cities) __________________ | ___ | ___ ]

## 3. [ Number of Family | ___ | ___ ]

## 4. [ Number on the Card of the Child Being Discussed | ___ | ___ ]

## 4.1 [ Did the Child Participate in the Survey:

- 1994 ......................................................... 1
- 1995 ......................................................... 2
- 1996 ......................................................... 3
- 1998 ......................................................... 4
- 2000 ......................................................... 5
- 2001 ......................................................... 6
- NEVER PARTICIPATED ............................. 7 ]

## 5. [ Sex of the Child Being Discussed:

- MALE ....................................................... 1
- FEMALE ...................................................... 2 ]

## 7. [ Date of Interview: Day | ___ | Month | ___ | ___ ]

## 8. [ Length of Interview: | ___ | Hours | ___ | ___ | Minutes ]

## 9. [ Last Name of Interviewer ________________________________ ]

## 10. [ Number of Interviewer | ___ | ___ | ___ ]

## 11. [ Number of the Adult Who Answered the Questions | ___ | ___ ]

**2002**

RLMS, Round 11 Individual–Child
1. 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, except 115-130 on page 21, 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.

Questions 115-130 on pages 21-23 the child should answer for himself.

[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?

| ___ | ___ | | ___ | ___ | | ___ | ___ | ___ | ___ |
| day | month | year |

IKBIRTHD IKBIRTHM IKBIRTHY

SECTION “MIGRATION”

IKBORNDP 11. Tell me, please: Was (he/she) born in a different population center or in the one of current residence?

IN A DIFFERENT POPULATION CENTER .......... 1
IN THE ONE OF CURRENT RESIDENCE .......... 2
DOESN’T KNOW ........................................ 7
REFUSES TO ANSWER ............................... 8

IKSPEAKS 15. What language does (he/she) primarily speak at home? If (he/she) speaks several languages, please specify the primary one.

RUSSIAN ................................................. 1
CHILD IS NOT YET TALKING ..................... 996
DOESN’T KNOW ..................................... 997
REFUSES TO ANSWER .............................. 998

IKPARSPK 16. What language is primarily spoken by the parents in (his/her) home?

RUSSIAN ................................................. 1
DOESN’T KNOW ..................................... 997
REFUSES TO ANSWER .............................. 998

RLMS, Round 11 Individual–Child
SECTION “CARE OF CHILDREN”

[ INTERVIEWER! TURN TO QUESTION A ON PAGE 1 AND VERIFY THE BIRTH DATE OF THE CHILD ABOUT WHOM YOU ARE SPEAKING.]

IF THE CHILD WAS BORN IN 1996 OR EARLIER, ASK QUESTIONS BEGINNING WITH QUESTION 1.


FOR THE REMAINING CHILDREN (BORN IN 2001 OR 2002), ASK QUESTION 9 ON PAGE 6.]

IKGRADE1 K1. Now I would like to ask a few questions about the education of [NAME OF CHILD].

Tell me, please: Has (he/she) 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 ]

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

J70.1 ________ grades
DOESN’T KNOW .................................................. 97
REFUSES TO ANSWER ........................................ 98

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

J70.2 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 ]

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

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

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

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

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

Yes ................................................................. 1
No ................................................................. 2 → [ SKIP TO 7.1 ON PAGE 3 ]
DOESN’T KNOW ................................................. 7 → [ SKIP TO 7.1 ON PAGE 3 ]
REFUSES TO ANSWER ........................................ 8 → [ SKIP TO 7.1 ON PAGE 3 ]

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

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

RLMS, Round 11 Individual–Child
2. K

**IKPECLAS K7.1** Does (he/she) attend PE classes at school?

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

**IKPEFREQ K7.2** How often does (he/she) engage in physical activities during school, in class?

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

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

<table>
<thead>
<tr>
<th>(He/she) engages in during class</th>
<th>How many hours and minutes per week:</th>
<th>D/K REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Karate, judo, self-defense, wrestling, boxing, gymnastics</strong></td>
<td>Yes ...................................... 1 → K7.3.1A K7.3.1B K7.3.1C</td>
<td>K7.3.1B K7.3.1C hrs min 97 98</td>
</tr>
<tr>
<td>No ...................................... 2</td>
<td>IKKARHRS IKKARMIN</td>
<td></td>
</tr>
<tr>
<td><strong>2. Active sports: badminton, tennis, soccer, basketball, volleyball, hockey, or swimming</strong></td>
<td>Yes ...................................... 1 → K7.3.2A K7.3.2B K7.3.2C</td>
<td>K7.3.2B K7.3.2C hrs min 97 98</td>
</tr>
<tr>
<td>No ...................................... 2</td>
<td>IKSPORTS IKSPORTMIN</td>
<td></td>
</tr>
<tr>
<td><strong>3. Track and field, skiing, skating</strong></td>
<td>Yes ...................................... 1 → K7.3.3A K7.3.3B K7.3.3C</td>
<td>K7.3.3B K7.3.3C hrs min 97 98</td>
</tr>
<tr>
<td>No ...................................... 2</td>
<td>IKTRACKF IKTRAMIN</td>
<td></td>
</tr>
<tr>
<td><strong>4. Other kinds of physical activity</strong></td>
<td>Yes ...................................... 1 → K7.3.4A K7.3.4B K7.3.4C</td>
<td>K7.3.4B K7.3.4C hrs min 97 98</td>
</tr>
<tr>
<td>No ...................................... 2</td>
<td>IKPEOHRS IKPEOMIN</td>
<td></td>
</tr>
</tbody>
</table>

**RLMS, Round 13 Individual–Child**
IKPHYSOC K7.4 Does (he/she) engage in physical activities and sports before or after classes? I have in mind training sessions with a coach as well as simply active games outdoors—soccer, tag, hopscotch, hide and seek, riding a bicycle, etc.

Yes................................................................. 1 
No........................................................................... 2 → [ SKIP TO 7.7 ON PAGE 4 ]
DOESN’T KNOW.................................................. 7 → [ SKIP TO 7.7 ON PAGE 4 ]
REFUSES TO ANSWER......................................... 8 → [ SKIP TO 7.7 ON PAGE 4 ]

IKOCFREQ K7.5 How often does (he/she) engage in physical activities and sports, including outdoor games, before or after classes?

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

RLMS, Round 11 Individual–Child
4. K

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>(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 .......... Yes ....... 1 → ______ hrs ______ min</td>
<td>K7.6.1B K7.6.1C</td>
<td>97 98</td>
</tr>
<tr>
<td>No ............2</td>
<td>IKOCKARA</td>
<td>IKOCKMIN</td>
</tr>
<tr>
<td>2. Active sports: badminton, tennis, soccer, basketball, volleyball, hockey, or swimming .......... Yes ....... 1 → ______ hrs ______ min</td>
<td>K7.6.2B K7.6.2C</td>
<td>97 98</td>
</tr>
<tr>
<td>No ............2</td>
<td>IKOCSHRS</td>
<td>IKOCMIN</td>
</tr>
<tr>
<td>3. Track and field, skiing, ice skating, roller skating .......... Yes ....... 1 → ______ hrs ______ min</td>
<td>K7.6.3B K7.6.3C</td>
<td>97 98</td>
</tr>
<tr>
<td>No ............2</td>
<td>IKOCTHR</td>
<td>IKOCMIN</td>
</tr>
<tr>
<td>4. Other kinds of physical activity, for example, tag, hide and seek, riding a bicycle .......... Yes ....... 1 → ______ hrs ______ min</td>
<td>K7.6.4B K7.6.4C</td>
<td>97 98</td>
</tr>
<tr>
<td>No ............2</td>
<td>IKOCOTH</td>
<td>IKOCOMIN</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<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 .......... Yes ....... 1 → ______ hrs ______ min</td>
<td>K7.7.1B K7.7.1C</td>
<td>97 98</td>
</tr>
<tr>
<td>No ............2</td>
<td>IKWATVHS</td>
<td>IKWTVMIN</td>
</tr>
<tr>
<td>3. Playing games with toy cars, dolls, construction sets, chess, checkers .......... Yes ....... 1 → ______ hrs ______ min</td>
<td>K7.7.3B K7.7.3C</td>
<td>97 98</td>
</tr>
<tr>
<td>No ............2</td>
<td>IKPLGHRS</td>
<td>IKPLGMIN</td>
</tr>
<tr>
<td>2. Reading, music lessons, drawing, doing homework .......... Yes ....... 1</td>
<td>K7.7.2B K7.7.2C</td>
<td>97 98</td>
</tr>
<tr>
<td>No ............2</td>
<td>IKREDHRS</td>
<td>IKREADNG</td>
</tr>
</tbody>
</table>

IKHOW2SK7.8.1 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

IK2SHR IK2SMN

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

<table>
<thead>
<tr>
<th>K7.8.2A hours</th>
<th>K7.8.2B minutes</th>
<th>[ SKIP TO 9 ON PAGE 6 ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOESN’T KNOW ........................................ 97</td>
<td>[ SKIP TO 9 ON PAGE 6 ]</td>
<td></td>
</tr>
<tr>
<td>REFUSES TO ANSWER .............................. 98</td>
<td>[ SKIP TO 9 ON PAGE 6 ]</td>
<td></td>
</tr>
</tbody>
</table>

RLMS, Round 11 Individual–Child
5. K

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

IKTOSML K8.1. (He/she) will go to school in a year or two……………………. [0]1 [0]2 [0]7 [0]8
IKTOOILL K8.2. (He/she) has poor health and cannot attend school ……………….[0]1 [0]2 [0]7 [0]8
IKEXPPELL K8.3. (He/she) was expelled from school………………………….. [0]1 [0]2 [0]7 [0]8
IKHOMESC K8.4. Family wants to give (him/her) home schooling ……………. [0]1 [0]2 [0]7 [0]8
IKNOSCHL K8.5. No schools are close to home …………………………………. [0]1 [0]2 [0]7 [0]8
IKSCOTH K8.6. Other reasons……………………………………………………. [0]1 [0]2 [0]7 [0]8

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

<table>
<thead>
<tr>
<th>Activity</th>
<th>How many hours and minutes per week?</th>
<th>D/K REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Karate, judo, gymnastics, tennis, swimming</td>
<td>Yes.........1 → ____ hrs ____ min</td>
<td>K8.A.1B</td>
</tr>
<tr>
<td></td>
<td>No.........2</td>
<td>K8.A.1C</td>
</tr>
<tr>
<td>2. Plays with a ball, goes skating, rides a bicycle</td>
<td>Yes.........1 → ____ hrs ____ min</td>
<td>K8.A.2B</td>
</tr>
<tr>
<td></td>
<td>No.........2</td>
<td>K8.A.2C</td>
</tr>
<tr>
<td>3. Dances, runs, jumps, plays hopscotch, hide and seek</td>
<td>Yes.........1 → ____ hrs ____ min</td>
<td>K8.A.3B</td>
</tr>
<tr>
<td></td>
<td>No.........2</td>
<td>K8.A.3C</td>
</tr>
<tr>
<td>4. Plays sitting: on a bench, in a sandbox</td>
<td>Yes.........1 → ____ hrs ____ min</td>
<td>K8.A.4B</td>
</tr>
<tr>
<td></td>
<td>No.........2</td>
<td>K8.A.4C</td>
</tr>
</tbody>
</table>

IKNSPREGK8.13 Is (he/she) regularly engaged in physical activities and sports in a children’s preschool institution, at a sports club, or at home?

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

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

<table>
<thead>
<tr>
<th>Activity</th>
<th>How many hours and minutes per day?</th>
<th>D/K REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Watching TV, videos, playing video or computer games</td>
<td>Yes.........1 → ____ hrs ____ min</td>
<td>K8.151B</td>
</tr>
<tr>
<td></td>
<td>No.........2</td>
<td>K8.151C</td>
</tr>
<tr>
<td>3. Playing games with toy cars, dolls, construction sets, chess, checkers</td>
<td>Yes.........1 → ____ hrs ____ min</td>
<td>K8.153B</td>
</tr>
<tr>
<td></td>
<td>No.........2</td>
<td>K8.153C</td>
</tr>
<tr>
<td>2. Reading, or listening to what is read to (him/her)</td>
<td>Yes.........1 → ____ hrs ____ min</td>
<td>K8.152B</td>
</tr>
<tr>
<td></td>
<td>No.........2</td>
<td>K8.152C</td>
</tr>
</tbody>
</table>

RLMS, Round 11 Individual–Child
6. K

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

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

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

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

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

- ________  days
- DOESN’T KNOW ...................................................... 97
- REFUSES TO ANSWER ............................................. 98

**IKHRCARE 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?

- K12A ________ hours   K12B ________ minutes
- DOESN’T KNOW ...................................................... 97
- REFUSES TO ANSWER ............................................. 98

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

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

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

- ________  days
- DOESN’T KNOW ...................................................... 97
- REFUSES TO ANSWER ............................................. 98

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

- K15A ________ hours   K15B ________ minutes
- DOESN’T KNOW ...................................................... 97
- REFUSES TO ANSWER ............................................. 98

---

RLMS, Round 11 Individual–Child
7. K

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

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

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

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

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

- __________ days
- DOESN’T KNOW………………………………………………. 97
- REFUSES TO ANSWER…………………………………….. 98

**IKHNCARE 19.** In these last 7 days, 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 do this?

- __________ hours __________ minutes
- DOESN’T KNOW………………………………………………. 97
- REFUSES TO ANSWER…………………………………….. 98

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

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

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

- __________ rubles
- DOESN’T KNOW………………………………………………. 997
- REFUSES TO ANSWER…………………………………….. 998

RLMS, Round 11 Individual–Child
8. K

SECTION “MEDICAL SERVICES”

IKHPRBLM 1.5. Has [NAME OF CHILD] had any health problems in the last 30 days?

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

IKLPRBLM 1.5.1 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 10 ]
DOESN’T KNOW ............................................. 7 → [ SKIP TO 20 ON PAGE 10 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 20 ON PAGE 10 ]

IKHPRTYP 6. Tell me: What were these problems?

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

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

IKTREABY 1.7. 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 10 ]
DOESN’T KNOW ............................................. 7 → [ SKIP TO 20 ON PAGE 10 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 20 ON PAGE 10 ]

IKCALLDR 1.8. 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 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 15 ON PAGE 9 ]

IKTYPMIN 1.9. Tell me, please: Where did you 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
REFUSES TO ANSWER ................................. 8

IKTDRHRS 10. How much time did (he/she) spend traveling to this medical institution and back on the last occasion?

L10A hours L10B minutes

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

RLMS, Round 11 Individual–Child
IKTDRPAY L11. Did (he/she) spend any money traveling to this medical institution?

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

IKTDRAMT L12. How much did (he/she) spend last time traveling to this medical institution?

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

IKTDRWAI L13. Did (he/she) spend time on that occasion waiting for (his/her) appointment?

Yes ................................................................. 1
No ................................................................. 2 → [ SKIP TO 15 ]
DOESN’T KNOW .............................................. 7 → [ SKIP TO 15 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 15 ]

IKTDRHRW 14. How much time did (he/she) spend last time waiting for the appointment?

IKTDRMNW

L14A hours L14B minutes
DOESN’T KNOW .............................................. 997
REFUSES TO ANSWER ................................. 998

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

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

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

Did you pay? How much Did in Rubles? D/K REFUSES

<table>
<thead>
<tr>
<th>Number</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
<th>D</th>
<th>K</th>
<th>P</th>
</tr>
</thead>
</table>
| 1      | Paid officially in the enterprise’s cashier’s office | Yes .... 1 → L161.1A | 9997 9998
|        |             | No .... 2 |    |   |   |   |
| 2      | Gave money or gifts directly to the medical personnel | Yes .... 1 → L161.2A | 9997 9998
|        |             | No .... 2 |    |   |   |   |

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

Yes ................................................................. 1
No ................................................................. 2 → [ SKIP TO 20 ON PAGE 10 ]
DOESN’T KNOW .............................................. 7 → [ SKIP TO 20 ON PAGE 10 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 20 ON PAGE 10 ]

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

Yes ................................................................. 1
No ................................................................. 2 → [ SKIP TO 20 ON PAGE 10 ]
DOESN’T KNOW .............................................. 7 → [ SKIP TO 20 ON PAGE 10 ]
REFUSES TO ANSWER ................................. 8 → [ SKIP TO 20 ON PAGE 10 ]
10. L

19.1 Whom and how much did you pay?

Did you pay? How much in rubles? D/K REFUSES

1. Officially in the medical enterprise’s cashier’s office .............................................. Yes ...... 1 → L191.1B | 9997 9998
   No ........ 2
   L191.1A

2. Paid money or gifts directly to the personnel who performed the investigation or procedure .............................................. Yes ...... 1 → L191.2B | 9997 9998
   No ........ 2
   L191.2A

IKHOSL3M L20. Has (he/she) been in the hospital in the last three months?

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

IKWHYHOS (char) L21. For what reason or reasons was (he/she) hospitalized?

________________________________________________________________________

DON’T KNOW .................................................. 7
REFUSES TO ANSWER ..................................... 8

IKHOSTYF L22. Tell me, please: In what kind of facility was (he/she) hospitalized (most recently)?

In a raion, city, state, village hospital ....................... 1
In a commercial hospital ..................................... 2
DON’T KNOW .................................................. 7
REFUSES TO ANSWER ..................................... 8

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

__________ days
DON’T KNOW .................................................. 97
REFUSES TO ANSWER ..................................... 98

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

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

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

Did you pay? How much in rubles? D/K REFUSES

1. For treatment and care, not counting payments for medicine, officially in the hospital cashier’s office .............................................. Yes ...... 1 → L242.1B | 9997 9998
   No ........ 2
   L242.1A

2. For treatment and care, not counting payments for medicine, directly to doctors and other medical personnel with money or gifts .................................... Yes ...... 1 → L242.2B | 9997 9998
   No ........ 2
   L242.2A

RLMS, Round 11 Individual–Child
11. L

IKPAYMED L25.1 Did you receive medicine, syringes, and dressings, which were necessary for (his/her) treatment in the hospital, for free, or did you pay for them with money or gifts?

- All medicines, syringes, and dressings were free ............................................................... 1 → [ SKIP TO 26 ]
- Some medicines, syringes, and dressings were free, and we paid for others ....................... 2
- We paid for the medicines, syringes, and dressings ............................................................... 3
- DOESN’T KNOW ............................................................... 7 → [ SKIP TO 26 ]
- REFUSES TO ANSWER ............................................................... 8 → [ SKIP TO 26 ]

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>
<th>D/K REFUSES</th>
</tr>
</thead>
<tbody>
<tr>
<td>You paid officially to the cashier or the drug store of the hospital in which (he/she) stayed</td>
<td>Yes ...... 1 → L252.1B</td>
<td>9997 9998</td>
</tr>
<tr>
<td></td>
<td>No ...... 2</td>
<td>IKAMTPMC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>L252.1A</td>
</tr>
<tr>
<td>You paid unofficially doctors or other medical personnel at the hospital in which (he/she) stayed with money or gifts</td>
<td>Yes ...... 1 → L252.2B</td>
<td>9997 9998</td>
</tr>
<tr>
<td></td>
<td>No ...... 2</td>
<td>IKAMTPMP</td>
</tr>
<tr>
<td></td>
<td></td>
<td>L252.2A</td>
</tr>
<tr>
<td>For (him/her) you bought in the pharmacy of the hospital in which (he/she) stayed medicine, syringes, and dressings</td>
<td>Yes ...... 1 → L252.3B</td>
<td>9997 9998</td>
</tr>
<tr>
<td></td>
<td>No ...... 2</td>
<td>IKAMTPMD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>L252.3A</td>
</tr>
</tbody>
</table>

IKCHECKU L26. Tell me, please: In the last three months did (he/she) go to a medical institute for a preventive examination, not because of sickness?

- Yes ............................................................... 1
- No ...................................................................... 2 → [ SKIP TO 33 ON PAGE 12 ]
- DOESN’T KNOW ............................................................... 7 → [ SKIP TO 33 ON PAGE 12 ]
- REFUSES TO ANSWER ............................................................... 8 → [ SKIP TO 33 ON PAGE 12 ]

IKCKTYP1 L28.1 Where did he/she go for a preventive examination or checkup the 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
- Somewhere else ......................................................... 6
- DOESN’T KNOW ............................................................... 7
- REFUSES TO ANSWER ............................................................... 8

INTERVIEWER: IT IS POSSIBLE TO MARK SEVERAL ANSWERS. }

RLMS, Round 11 Individual–Child
12. L

IKCKUWHO L27. Who carried out this examination or checkup the last time?  
[ INTERVIEWER: IF THIS EXAMINATION WAS DONE BY MORE THAN ONE PERSON, NOTE THE SPECIALIST WITH THE HIGHEST QUALIFICATIONS. ]

Physician ........................................................................ 1  
Physician’s assistant .................................................... 2  
Nurse ............................................................................. 3  
Someone else .................................................................. 4  
DOESN’T KNOW ............................................................ 7  
REFUSES TO ANSWER ................................................... 8

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

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

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

<table>
<thead>
<tr>
<th>Did you pay?</th>
<th>How much in rubles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes ..........</td>
<td>L301.1B</td>
</tr>
<tr>
<td>No ...........</td>
<td>L301.1A</td>
</tr>
</tbody>
</table>

IKMEDLMO L33. Tell me, please: In the last 30 days did a physician or another specialist at a medical institution—hospital, polyclinic—write a prescription or advise that (he/she) take some kind of medicine?

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

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

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

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

L35.1. At the physician’s who prescribed or recommended the medicine ............................................. 1 ............ 2 ........... 7 ............ 8
L35.2. In a state pharmacy ......................................................... 1 ............ 2 ........... 7 ............ 8
L35.3. In a non-state pharmacy ...................................................... 1 ............ 2 ........... 7 ............ 8
L35.4. From individuals .............................................................. 1 ............ 2 ........... 7 ............ 8
L35.5. At some other place ............................................................ 1 ............ 2 ........... 7 ............ 8

IKDISMED L36. Tell me, please: Was (he/she) entitled to a discount on these medicines?

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

RLMS, Round 11 Individual–Child
IKSIZDIS  

13. K

L.37. How much of a discount was (he/she) entitled to, what percentage?

100 percent ............................................................. 1
50 percent ............................................................... 2
20 percent ............................................................... 3
Less than 20 percent .................................................. 4
DOESN’T KNOW ........................................................ 7
REFUSES TO ANSWER ............................................. 8

IKPAIDPR  

L.38. Did you pay anything for these medicines?

Yes ................................................................. 1
No ........................................................................ 2 → [ SKIP TO 40 ]
DOESN’T KNOW .................................................. 7 → [ SKIP TO 40 ]
REFUSES TO ANSWER ............................................. 8 → [ SKIP TO 40 ]

IKPRAMNT  

L.39. How much did you pay for these medicines?

_______________ rubles

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

IKNOLOCM  

L.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?

Yes ................................................................. 1
No ........................................................................ 2 → [ SKIP TO 42 ON PAGE 14 ]
DOESN’T KNOW ................................................ 7 → [ SKIP TO 42 ON PAGE 14 ]
REFUSES TO ANSWER ............................................. 8 → [ SKIP TO 42 ON PAGE 14 ]

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

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

IKMNOTIM  L.41.1. Didn’t have time to buy them ................................................................. 1............ 2 ........... 7 ............. 8

IKMNOFIN  L.41.2. Couldn’t find them in a pharmacy .................................................. 1............ 2 ........... 7 ............. 8

IKMNOMON  L.41.3. Didn’t have enough money ......................................................... 1............ 2 ........... 7 ............. 8

IKMNOWAN  L.41.4. Didn’t want to buy them .......................................................... 1............ 2 ........... 7 ............. 8

IKMNOCAN  L.41.5. Physically couldn’t buy them myself and there was no one else to do it ........................................... 1............ 2 ........... 7 ............. 8

IKNOLD  

L.41  

41.1 Tell me, please: Was there a discount for (him/her) on these medicines?

Yes ................................................................. 1
No ........................................................................ 2 → [ SKIP TO 42 ON PAGE 14 ]
DOESN’T KNOW ................................................ 7 → [ SKIP TO 42 ON PAGE 14 ]
REFUSES TO ANSWER ............................................. 8 → [ SKIP TO 42 ON PAGE 14 ]

IKNOLDSZ  

L.41  

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

100 percent ............................................................. 1
50 percent ............................................................... 2
20 percent ............................................................... 3
Less than 20 percent .................................................. 4
DOESN’T KNOW .................................................. 7
REFUSES TO ANSWER ............................................. 8

RLMS, Round 11 Individual–Child
**IKVAC** L42. Tell me, please: Has (he/she) at any time had any kind of vaccination?

Yes................................................................. 1  → [ SKIP TO 49 ON PAGE 15 ]
No...................................................................... 2  → [ SKIP TO 49 ON PAGE 15 ]
DOESN'T KNOW ............................................. 7  → [ SKIP TO 49 ON PAGE 15 ]
REFUSES TO ANSWER ................................. 8  → [ SKIP TO 49 ON PAGE 15 ]

43. Please remember what kind of vaccinations (he/she) has had. (He/she) has had vaccinations

against . . .

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

**IKVACTUB** L43.1. Tuberculosis ............................................................. 1........ 2....... 7...... 8
**IKVACMEA** L43.2. Measles ............................................................. 1........ 2....... 7...... 8
**IKVCADS1** L43.3. Diphtheria, whooping cough, tetanus
AKDS/ADS 1 ............................................................. 1....... 2....... 7...... 8
**IKVCADS2** L43.4. Diphtheria, whooping cough, tetanus
AKDS/ADS 2 ............................................................. 1....... 2....... 7...... 8
**IKVCADS3** L43.5. Diphtheria, whooping cough, tetanus
AKDS/ADS 3 ............................................................. 1....... 2....... 7...... 8
**IKVCPO1** L43.6. Polio 1st time....................................................... 1....... 2....... 7...... 8
**IKVCPO2** L43.7. Polio 2nd time..................................................... 1....... 2....... 7...... 8
**IKVCPO3** L43.8. Polio 3rd time..................................................... 1....... 2....... 7...... 8
**IKVACHEP** L43.9. Hepatitis ............................................................. 1....... 2....... 7...... 8
**IKVCMUMP** L43.10. Mumps ............................................................ 1....... 2....... 7...... 8
**IKVMENIN** L43.12. Meningitis ......................................................... 1....... 2....... 7...... 8
**IKVACOTH** L43.11. Other illness ......................................................... 1....... 2....... 7...... 8

**IKVACL3M** L44. Please remember: Has (he/she) had any vaccinations in the last three months?

Yes................................................................. 1  → [ SKIP TO 49 ON PAGE 15 ]
No...................................................................... 2  → [ SKIP TO 49 ON PAGE 15 ]
DOESN'T KNOW ............................................. 7  → [ SKIP TO 49 ON PAGE 15 ]
REFUSES TO ANSWER ................................. 8  → [ SKIP TO 49 ON PAGE 15 ]

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

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

**IKVL3TUB** L45.1. Tuberculosis ............................................................. 1........ 2....... 7...... 8
**IKVL3MEA** L45.2. Measles ............................................................. 1........ 2....... 7...... 8
**IKVL3AD1** L45.3. Diphtheria, whooping cough, tetanus
AKDS/ADS 1 ............................................................. 1....... 2....... 7...... 8
**IKVL3AD2** L45.4. Diphtheria, whooping cough, tetanus
AKDS/ADS 2 ............................................................. 1....... 2....... 7...... 8
**IKVL3AD3** L45.5. Diphtheria, whooping cough, tetanus
AKDS/ADS 3 ............................................................. 1....... 2....... 7...... 8
**IKVL3PO1** L45.6. Polio 1st time....................................................... 1....... 2....... 7...... 8
**IKVL3PO2** L45.7. Polio 2nd time..................................................... 1....... 2....... 7...... 8
**IKVL3PO3** L45.8. Polio 3rd time..................................................... 1....... 2....... 7...... 8
**IKVL3HEP** L45.9. Hepatitis ............................................................. 1....... 2....... 7...... 8
**IKVL3MUM** L45.10. Mumps ............................................................ 1....... 2....... 7...... 8
**IKVL3MEN** L45.12. Meningitis ......................................................... 1....... 2....... 7...... 8
**IKVL3OTH** L45.11. Other illness ......................................................... 1....... 2....... 7...... 8
15. K

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

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

IKVCPOLY L46.1. In a children’s or maternity hospital ....................... 1...... 2...... 7...... 8
IKVCHOSP L46.2. In a polyclinic .............................................................. 1...... 2...... 7...... 8
IKVCCCLI L46.3. In a hospital ................................................................. 1...... 2...... 7...... 8
IKVCDOCT L46.4. At a private doctor ..................................................... 1...... 2...... 7...... 8
IKVCSCHO L46.5. At school ................................................................. 1...... 2...... 7...... 8
IKVCKIND L46.6. At a kindergarten or nursery ................................. 1...... 2...... 7...... 8
IKVCOTHR L46.7. In another place ..................................................... 1...... 2...... 7...... 8

IKPAIDVC L47. 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 ]

IKAMTVAC L48. How much did you pay?

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

IKNGETVC L49. 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. 16 ]
DOESN’T KNOW ............................................. 7 → [ SKIP TO NEXT SECT. P. 16 ]
REFUSES TO ANSWER ........................................ 8 → [ SKIP TO NEXT SECT. P. 16 ]

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

Too expensive.................................................. 1
No transportation to 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

RLMS, Round 11 Individual–Child
SECTION “HEALTH EVALUATION”

M1. Now a few questions about health. But first I would like to ask you what you think (his/her) height and weight are.

IKWTSELF How many kilograms does (he/she) weigh?

[ INTERVIEWER! IN THIS QUESTION YOU NEED TO UNDERSTAND THE SUBJECTIVE OPINION OF THE RESPONDENT ABOUT HIS WEIGHT AND HEIGHT. EXACT MEASUREMENTS OF THESE DATA WILL BE MADE AT THE END OF THE INTERVIEW. ]

__________ KG

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

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

__________ CM

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

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

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

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

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

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

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

IKCHEART M20.61. Heart disease ................................................................. 1 ....... 2 ....... 7 ....... 8
IKCLUNGS M20.62. Illness of the lungs .......................................................... 1 ....... 2 ....... 7 ....... 8
IKCLIVER M20.63. Liver disease ................................................................. 1 ....... 2 ....... 7 ....... 8
IKKIDNEY M20.64. Kidney disease ............................................................. 1 ....... 2 ....... 7 ....... 8
IKCGI M20.65. Gastrointestinal disease .................................................... 1 ....... 2 ....... 7 ....... 8
IKCSPINE M20.66. Spinal problems ............................................................ 1 ....... 2 ....... 7 ....... 8
IKCNASOP M20.68. Nasopharynx disease .................................................. 1 ....... 2 ....... 7 ....... 8
IKCOTHER M20.67. Other chronic illnesses ............................................ 1 ....... 2 ....... 7 ....... 8

RLMS, Round 11 Individual–Child
IKDIABET M43. Has a doctor ever said that (he/she) had diabetes or increased sugar in the blood?

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

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

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

IKDCDIET M45.1. Special diet ................................................................. 1 .... 2 .... 7 ...... 8
IKDCWCON M45.2. Weight control ......................................................... 1 .... 2 .... 7 ...... 8
IKDCORAL M45.3. Pills ........................................................................ 1 .... 2 .... 7 ...... 8
IKDCSHOT M45.4. Insulin shots .............................................................. 1 .... 2 .... 7 ...... 8
IKDCHERP M45.5. Herbal treatment ....................................................... 1 .... 2 .... 7 ...... 8
IKDCHOME M45.6. Homeopathic treatment ........................................... 1 .... 2 .... 7 ...... 8
IKDCOTHR M45.7. Something else .......................................................... 1 .... 2 .... 7 ...... 8

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

Yes .............................................................. 1
No ............................................................... 2 → [ SKIP TO 62.3 ]
DOESN’T KNOW ........................................ 7 → [ SKIP TO 62.3 ]
REFUSES TO ANSWER ........................................ 8 → [ SKIP TO 62.3 ]

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

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

IKEVERHP M62.3 Has (he/she) ever been diagnosed with “hepatitis,” “Botkin’s disease,” or “jaundice”?

Yes .............................................................. 1
No ............................................................... 2 → [ SKIP TO 67 ON PAGE 18]
DOESN’T KNOW ........................................ 7 → [ SKIP TO 67 ON PAGE 18]
REFUSES TO ANSWER ........................................ 8 → [ SKIP TO 67 ON PAGE 18]

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

In | ___ | ___ | ___ | ___ | YEAR
DOESN’T KNOW ........................................ 7
REFUSES TO ANSWER ........................................ 8
**IKTYPHP M62.5** With which type of hepatitis was (he/she) sick?

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

  \[ DOESN'T KNOW \] ..................................... 7
  \[ REFUSES TO ANSWER \] ................................. 8

**IKDRKTEA M67.** Does (he/she) drink tea?

- Yes .......................................................... 1
- No.................................................................. 2 \[ SKIP TO 69 \]
  \[ DOESN'T KNOW \] ..................................... 7 \[ SKIP TO 69 \]
  \[ REFUSES TO ANSWER \] ................................. 8 \[ SKIP TO 69 \]

**IKFRETEA M68.** How often during the last 30 days did (he/she) drink tea?

- Every day ..................................................... 1
- 4-6 times a week.......................................... 2
- 2-3 times a week.......................................... 3
- Once a week ............................................... 4
- Less than once a week.................................. 5
- Never in the past 30 days .............................. 6
  \[ DOESN'T KNOW \] ..................................... 7
  \[ REFUSES TO ANSWER \] ................................. 8

**IKDRKCOF M69.** Does (he/she) drink coffee?

- Yes .......................................................... 1
- No.................................................................. 2 \[ SKIP TO 96 \]
  \[ DOESN'T KNOW \] ..................................... 7 \[ SKIP TO 96 \]
  \[ REFUSES TO ANSWER \] ................................. 8 \[ SKIP TO 96 \]

**IKFRECOF M70.** How often during the last 30 days did (he/she) drink coffee?

- Every day ..................................................... 1
- 4-6 times a week.......................................... 2
- 2-3 times a week.......................................... 3
- Once a week ............................................... 4
- Less than once a week.................................. 5
- Never in the past 30 days .............................. 6
  \[ DOESN'T KNOW \] ..................................... 7
  \[ REFUSES TO ANSWER \] ................................. 8

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

- Yes .......................................................... 1
- No.................................................................. 2
  \[ DOESN'T KNOW \] ..................................... 7
  \[ REFUSES TO ANSWER \] ................................. 8
19. L

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

<table>
<thead>
<tr>
<th>Option</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>

**IKEARACH M98.** In the last 7 days has (he/she) had an earache?

<table>
<thead>
<tr>
<th>Option</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>

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

<table>
<thead>
<tr>
<th>Option</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>

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

<table>
<thead>
<tr>
<th>Option</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>

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

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
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<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>

**IKDIARDY M102.** How many days in the last 7 has (he/she) had diarrhea?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOESN’T KNOW</td>
<td>97</td>
</tr>
<tr>
<td>REFUSES TO ANSWER</td>
<td>98</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOESN’T KNOW</td>
<td>97</td>
</tr>
<tr>
<td>REFUSES TO ANSWER</td>
<td>98</td>
</tr>
</tbody>
</table>

**IKMUCUSSM104.** In the last 7 days have you noticed mucus in (his/her) stool (whitish or some other color)?

<table>
<thead>
<tr>
<th>Option</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>
**IKBLOODSM105.** 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

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

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

**IKVOMITS M107.** Tell me, please: Since the diarrhea started, has (he/she) thrown up?

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

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

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

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

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

[ INTERVIEWER: RETURN TO ITEM 5 ON THE COVER PAGE AND 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 1991 OR EARLIER. FOR ALL OTHERS, SKIP TO QUESTION 115. ]

**IKEVRMEN M110.** Tell me, please: Has she ever menstruated?

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

[ SKIP TO 115 ON PAGE 21 ]

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

| ___ | ___ | YEARS
- DOESN’T KNOW ............................................... 97
- REFUSES TO ANSWER ....................................... 98
[ INTERVIEWER! QUESTIONS 115-130 ON PAGES 21-23 SHOULD BE ANSWERED BY THE CHILD (HIMSELF/HERSELF). ]

M115. [ INTERVIEWER! RETURN TO QUESTION A ON PAGE 1. ASK QUESTIONS 115-130 ONLY OF CHILDREN WHO WERE BORN IN 1996 OR EARLIER. THE REMAINING CHILDREN (WHO WERE BORN IN 1997 OR LATER) SHOULD BE ASKED THE QUESTIONS IN THE NEXT SECTION ON PAGE 24. ]

IKRSHAPE Please look at these drawings and say which of these nine figures most closely resembles your figure. Tell me the number of the drawing.

[ INTERVIEWER! ]


SHUFFLE THE CORRESPONDING DRAWINGS AND LAY THEM OUT BEFORE THE RESPONDENT. ]

NUMBER OF THE DRAWING | ___ | ___ |

DOESN’T KNOW.......................... 97

REFUSES TO ANSWER...................... 98

IKWSHAPE M116. Which of these drawings would you want your figure to look like? Tell me the number of the drawing.

[ INTERVIEWER! AGAIN SHUFFLE THE DRAWINGS THAT YOU SHOWED IN QUESTION 115 AND LAY THEM OUT BEFORE THE RESPONDENT. ]

NUMBER OF THE DRAWING | ___ | ___ |

DOESN’T KNOW.......................... 97

REFUSES TO ANSWER...................... 98

IKDIETLY M117. Tell me, in the last 12 months have you been on a diet? We regard a diet as any change in your usual food in order to lose weight or get thinner.

Yes ........................................................................ 1

No ........................................................................ 2

DOESN’T KNOW.......................... 7

REFUSES TO ANSWER...................... 8

RLMS, Round 11 Individual–Child
IKWTOPIN M118. Do you think at the present time that you are underweight, have a normal weight, or are overweight?

UNDERWEIGHT ................................................................. 1
NORMAL WEIGHT .............................................................. 2
OVERWEIGHT ................................................................. 3
DOESN’T KNOW .............................................................. 7
REFUSES TO ANSWER .................................................... 8

IKACOPIN M119. Now let’s talk about physical activity. By physical activity we mean only activities such as active sports, games, dances, that is when your heart beats more than usual or you sweat. How do you rate your physical activity? You have . . . ?

Too little ........................................................................ 1
Normal ............................................................................ 2
Too much ....................................................................... 3
DOESN’T KNOW .............................................................. 7
REFUSES TO ANSWER .................................................... 8

119.1 How much time each day do you usually spend watching TV or videos, or playing video or computer games?

M119.1A M119.1B

__ __ hours __ __ minutes

IKTVHR IKTVMN

DOESN’T WATCH TV OR VIDEO ................................. 96
DOESN’T KNOW ............................................................. 97
REFUSES TO ANSWER .................................................... 98

IKCHANNL M121. Which television channel do you most like to watch? Choose one favorite channel.

[ INTERVIEWER! DO NOT READ THE LIST OF CHANNELS. NOTE ONLY ONE CHANNEL.]

ORT–Russian Public Television ................................. 01
RTR–Russian Television ............................................ 02
TVTS ................................................................. 03
NTV ................................................................. 04
“CULTURE” ............................................................ 05
TV-6 ................................................................. 06
MTV ................................................................. 07
MUZ-TV ............................................................... 10
RenTV ................................................................. 11
STS ................................................................. 12
TNT ................................................................. 13
LOCAL OR CABLE ............................................... 08
OTHER, SUCH AS .................................................. 09

[ INTERVIEWER! WRITE RESPONSE:]

IKCHANNT

(char) DOESN’T KNOW ............................................................. 97
REFUSES TO ANSWER .................................................... 98

RLMS, Round 11 Individual–Child
123.1 How often do you watch the following channels?

..........................................................................................................................................................................................................

IKFREQSP M123101. Sports ........................................................................................................... 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQM M123102. Music ........................................................................................................... 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQNW M123103. News programs ......................................................................................... 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQCR M123104. Cartoons ..................................................................................................... 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQTA M123105. Talk shows .................................................................................................. 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQMO M123106. Artistic films ............................................................................................. 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQEN M123107. Entertainment programs ............................................................................. 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQSC M123108. Popular science, educational programs ......................................................... 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQCO M123109. Advertisements ........................................................................................... 1 ............. 2 ............ 3 ......... 7 ........... 8
IKFREQSE M123110. Soap operas .................................................................................................. 1 ............. 2 ............ 3 ......... 7 ........... 8

IKABUYAD M126. Do you ever ask your parents or other adults to buy you some food or drink for which you saw the advertisement on television?

Yes .............................................................................................................................................. 1 → [ SKIP TO 129 ]
No ............................................................................................................................................... 2 → [ SKIP TO 129 ]
BUY FOR MYSELF .................................................................................................................... 6 → [ SKIP TO 129 ]
DOESN’T KNOW ....................................................................................................................... 7 → [ SKIP TO 129 ]
REFUSES TO ANSWER .............................................................................................................. 8 → [ SKIP TO 129 ]

IKBUYAD M127. Do they buy you what you ask for?

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

IKF2STAR M129. [INTERVIEWER! QUESTION 129 IS ONLY FOR GIRLS; ASK BOYS QUESTION 130.]

Have you ever been on a diet or tried any other ways to lose weight to look like someone you have seen in a movie or on TV?

Yes .............................................................................................................................................. 1 → [ SKIP TO NEXT SECT. P. 24 ]
No ............................................................................................................................................... 2 → [ SKIP TO NEXT SECT. P. 24 ]
DOESN’T KNOW ....................................................................................................................... 7 → [ SKIP TO NEXT SECT. P. 24 ]
REFUSES TO ANSWER .............................................................................................................. 8 → [ SKIP TO NEXT SECT. P. 24 ]

IKM2STAR M130. [INTERVIEWER! QUESTION 130 IS ONLY FOR BOYS.]

Have you ever eaten differently than normal or done more sports to look like someone you have seen in a movie or on TV?

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

IKYUSUAL 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:

IKDIETDR 1. Doctor’s recommendation ........................................... [ ]...................... 1
IKDIETS 2. Observing a special diet .................................................. [ ]...................... 2
IKDIETRE 3. Religious practices ........................................................ [ ]...................... 3

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

Yes ................................................................................... 1
No ...................................................................................... 2
DOESN’T KNOW ............................................................. 7
REFUSES 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 Public eatery Nursery or school Workplace</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home-cooked Not home-cooked</td>
<td>PREPPLACE GRAM</td>
<td>Breakfast Dinner Snack Other</td>
<td>FOODCOD</td>
</tr>
<tr>
<td>2.</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home-cooked Not home-cooked</td>
<td>PREPPLACE GRAM</td>
<td>Breakfast Dinner Snack Other</td>
<td>FOODCOD</td>
</tr>
<tr>
<td>3.</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home-cooked Not home-cooked</td>
<td>PREPPLACE GRAM</td>
<td>Breakfast Dinner Snack Other</td>
<td>FOODCOD</td>
</tr>
<tr>
<td>4.</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home-cooked Not home-cooked</td>
<td>PREPPLACE GRAM</td>
<td>Breakfast Dinner Snack Other</td>
<td>FOODCOD</td>
</tr>
<tr>
<td>5.</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home or as a guest Public eatery Nursery or school Workplace</td>
<td>Home-cooked Not home-cooked</td>
<td>PREPPLACE GRAM</td>
<td>Breakfast Dinner Snack Other</td>
<td>FOODCOD</td>
</tr>
</tbody>
</table>
6. **Home or as a guest**
   - Public eatery
   - Nursery or school
   - Workplace
   - Other place

7. **Home**
   - or as a guest
   - Public eatery
   - Nursery or school
   - Workplace
   - Other place

---

**PLACE**

- Home-cooked
- Not home-cooked

**PREPPLCE**

- Breakfast
- Dinner
- Supper
- Snack
- Other

**GRAM**

- Breakfast
- Dinner
- Supper
- Snack
- Other

**MEALTYPE**

- Breakfast
- Dinner
- Supper
- Snack
- Other

**FOODCOD**
<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>
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<tbody>
<tr>
<td>1</td>
<td><strong>HOU</strong> R</td>
<td><strong>PLACE</strong></td>
<td>Home-cooked</td>
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<tr>
<td></td>
<td>Home or as a guest</td>
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<td></td>
<td>Nursery or school</td>
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<td>Workplace</td>
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<tr>
<td>2</td>
<td><strong>HOU</strong> R</td>
<td><strong>PLACE</strong></td>
<td>Not home-cooked</td>
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<tr>
<td></td>
<td>Home or as a guest</td>
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<td></td>
<td>Nursery or school</td>
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<td></td>
<td>Workplace</td>
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<td></td>
</tr>
<tr>
<td>3</td>
<td><strong>HOU</strong> R</td>
<td><strong>PLACE</strong></td>
<td>Home-cooked</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Home or as a guest</td>
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<tr>
<td></td>
<td>Nursery or school</td>
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<td>Workplace</td>
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</tr>
<tr>
<td>4</td>
<td><strong>HOU</strong> R</td>
<td><strong>PLACE</strong></td>
<td>Not home-cooked</td>
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<tr>
<td></td>
<td>Home or as a guest</td>
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<tr>
<td></td>
<td>Nursery or school</td>
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<td>Workplace</td>
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<tr>
<td>5</td>
<td><strong>HOU</strong> R</td>
<td><strong>PLACE</strong></td>
<td>Home-cooked</td>
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<tr>
<td></td>
<td>Home or as a guest</td>
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<tr>
<td></td>
<td>Nursery or school</td>
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<td></td>
<td>Workplace</td>
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</table>

RLMS, Round 11 Individual–Child
<table>
<thead>
<tr>
<th>PLACE</th>
<th>PREPPLACE</th>
<th>GRAM</th>
<th>MEALTYPE</th>
<th>FOODCOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home or as a guest</td>
<td>Home-cooked</td>
<td>Breakfast</td>
<td>Dinner</td>
<td></td>
</tr>
<tr>
<td>Public eatery</td>
<td>Not home-cooked</td>
<td>Dinner</td>
<td>Snack</td>
<td></td>
</tr>
<tr>
<td>Nursery or school</td>
<td></td>
<td>Snack</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>Workplace</td>
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SECTION “MEDICAL MEASUREMENTS”

IKLEGAMP 1.  [ INTERVIEWER!  PLEASE NOTE:

THE RESPONDENT HAS BOTH LEGS ............... 1
THE RESPONDENT HAS ONLY ONE
OR PART OF A LEG ........................................ 2
THE RESPONDENT IS MISSING ALL
OR PART OF BOTH LEGS .................................. 3 ]

IKARMAMP 2.  [ INTERVIEWER!  PLEASE NOTE:

THE RESPONDENT HAS BOTH ARMS ................. 1
THE RESPONDENT HAS ONLY ONE
OR PART OF AN ARM ...................................... 2
THE RESPONDENT IS MISSING ALL
OR PART OF BOTH ARMS .................................. 3 ]

IKHEIGHT 3. Height

[ INTERVIEWER! MAKE SURE RESPONDENTS TAKE OFF THEIR SHOES. ]

_________ CM

IKWEIGHT 4. Weight

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

_________ KG

IKWAISTC 5. Waist circumference

_________ CM

IKHIPSIZ 6. Hip circumference

_________ CM

RLMS, Round 11 Individual–Child
SECTION “INTERVIEWER’S REMARKS”

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

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>IKHHPPRES S1.1. SOME OTHER MEMBER OF THE HOUSEHOLD</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>IKOTPPRES S1.2. OTHER PEOPLE, NOT MEMBERS OF THIS HOUSEHOLD</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

IKRESATT S2. [ ASSESS THE RESPONDENT’S ATTITUDE TOWARD THE INTERVIEW. THE RESPONDENT WAS: ]

- FRIENDLY, INTERESTED
- NOT PARTICULARLY INTERESTED
- IMPATIENT, WORRIED
- HOSTILE

IKRESUND S3. [ NOTE HOW THE RESPONDENT UNDERSTOOD THE QUESTIONS: ]

- WELL
- NOT VERY WELL
- POORLY

IKRESBEH S4. [ ASSESS THE RESPONDENT’S BEHAVIOR DURING THE INTERVIEW. THE RESPONDENT: ]

- WAS NERVOUS
- WAS OCCASIONALLY NERVOUS
- FELT COMFORTABLE

IKRESRES S5. [ ASSESS THE RESPONDENT’S SHARPNESS. THE RESPONDENT WAS: ]

- VERY SLOW-WITTED
- SLOW-WITTED, NEEDED EXPLANATIONS
- AS BRIGHT AS THE MAJORITY OF RESPONDENTS
- NOTABLY BRIGHTER THAN THE MAJORITY


- VERY INTROVERTED, INSINCERE
- AS SINCERE AND OPEN AS MOST RESPONDENTS
- MORE SINCERE AND OPEN THAN MOST

IKFDRELY S7. [ ASSESS WHETHER IN YOUR OPINION THE INFORMATION GIVEN ABOUT FOOD CONSUMPTION IS RELIABLE: ]

- RELIABLE
- INFORMATION INADEQUATE TO ASSESS
- NOT RELIABLE

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