



**Caucasus Research Resource Centers
A Program of the Eurasia Foundation**

**Data Initiative Survey
HOUSEHOLD QUESTIONNAIRE
PHASE 3/2006**

Questionnaire No.	_____
Region _____ name	_____
Community _____ name	_____
Community type _____	Rural <input type="checkbox"/> Urban <input type="checkbox"/>
Date of interview _____ day / month / year	____-____-____
Interviewer _____ name, surname	_____
Supervisor _____ name, surname	_____
Person responsible for logical control _____ name, surname	_____

For the interviewer: If the respondent refuses to answer any question, use code "99" for this question. Use code "98" for answers such as "Do not know" and "I am not aware."

Section A. Household general characteristics

A1. Please indicate the number of people living in your household (h/h) _____

Please provide some information on the members of your household. Include both present and absent members. By “household,” we mean those people who usually live together, comprise one economic unit and have a common budget. First describe the head of the household (absent or present), then his/her spouse, their children, and then other members of the household (excluding guests).

For the interviewer:

In column 6, score those h/h members whose age is over 18, according to the following sequence: the oldest male, next oldest male, etc; afterward the oldest female, next oldest female, etc.

Table A-1. Household Passport/ID

H/h member order unit	Relationship to the head of the h/h (codes)	Sex	Birth Date – Year of birth	Birth Date – Month of birth (01-12)	Order of the adult (18+) in the h/h	Education	Selection
	1. Head 2. Wife/spouse 3. Son/daughter 4. Mother/father/mother in law/father in law 5. Sister/brother 6. Grandfather/grandmother 7. Son in law/daughter in law 8. Grandchild 9. Other persons related to head 10. Other persons not related to head	1. Male 2. Female				1.No primary education 2.Primary school 3.Incomplete secondary 4.Complete secondary 5.Secondary technical 6.Incomplete higher 7.Higher 8.Post graduate / scientific degree 9.Other, please specify	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1.	_____	___	_____	_____	_____	___	___
2.	_____	___	_____	_____	_____	___	___
3.	_____	___	_____	_____	_____	___	___
4.	_____	___	_____	_____	_____	___	___
5.	_____	___	_____	_____	_____	___	___
6.	_____	___	_____	_____	_____	___	___
7.	_____	___	_____	_____	_____	___	___
8.	_____	___	_____	_____	_____	___	___
9.	_____	___	_____	_____	_____	___	___
10.	_____	___	_____	_____	_____	___	___

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
11.	□□□□	□□	□□□□□□	□□□□	□□□□	□□	□□
12.	□□□□	□□	□□□□□□	□□□□	□□□□	□□	□□
13.	□□□□	□□	□□□□□□	□□□□	□□□□	□□	□□
14.	□□□□	□□	□□□□□□	□□□□	□□□□	□□	□□
15.	□□□□	□□	□□□□□□	□□□□	□□□□	□□	□□
16.	□□□□	□□	□□□□□□	□□□□	□□□□	□□	□□
17.	□□□□	□□	□□□□□□	□□□□	□□□□	□□	□□
18.	□□□□	□□	□□□□□□	□□□□	□□□□	□□	□□

A.2. To select the respondent use the following selection table (ST) (one of 8 tables).

Table ST-A

Selection Table A	
<i>If the number of adults(18+) in the household is</i>	<i>Then the number of respondent is</i>
1	
2	
3	
4	
5	
6 or more	

Section D. Demography

D1. What is your marital status?

- | | |
|--|--|
| <input type="checkbox"/> 1. Never married
<input type="checkbox"/> 2. Cohabiting “citizen’s marriage”
<input type="checkbox"/> 3. Married, living with spouse
<input type="checkbox"/> 4. Married, spouse currently away/absent for the last 6 months | <input type="checkbox"/> 5. Divorced
<input type="checkbox"/> 6. Separated
<input type="checkbox"/> 7. Widow/widower |
|--|--|

D2. What is your ethnicity?

- | | | |
|---|---|---|
| <input type="checkbox"/> 1. Abkhaz
<input type="checkbox"/> 2. Armenian
<input type="checkbox"/> 3. Assyrian
<input type="checkbox"/> 4. Azerbaijani
<input type="checkbox"/> 5. Georgian
<input type="checkbox"/> 6. Greek
<input type="checkbox"/> 7. Iranian
<input type="checkbox"/> 8. Jewish | <input type="checkbox"/> 9. Kurdish
<input type="checkbox"/> 10. Lezgin
<input type="checkbox"/> 11. Ossetian
<input type="checkbox"/> 12. Russian
<input type="checkbox"/> 13. Talysh
<input type="checkbox"/> 14. Turkish
<input type="checkbox"/> 15. Yezidi | <input type="checkbox"/> 16. Other, please specify _____ [] [] [] []

<input type="checkbox"/> 99. Refuse to answer |
|---|---|---|

D3. What language(s) do you speak at home? If more than one, please indicate the most common and second most common.

1st	2nd		1st	2nd	
<input type="checkbox"/>	<input type="checkbox"/>	1. Abkhaz	<input type="checkbox"/>	<input type="checkbox"/>	9. Kurdish
<input type="checkbox"/>	<input type="checkbox"/>	2. Armenian	<input type="checkbox"/>	<input type="checkbox"/>	10. Lezgi
<input type="checkbox"/>	<input type="checkbox"/>	3. Assyrian	<input type="checkbox"/>	<input type="checkbox"/>	11. Ossetian
<input type="checkbox"/>	<input type="checkbox"/>	4. Azerbaijani	<input type="checkbox"/>	<input type="checkbox"/>	12. Russian
<input type="checkbox"/>	<input type="checkbox"/>	5. Georgian	<input type="checkbox"/>	<input type="checkbox"/>	13. Talysh
<input type="checkbox"/>	<input type="checkbox"/>	6. Greek	<input type="checkbox"/>	<input type="checkbox"/>	14. Turkish
<input type="checkbox"/>	<input type="checkbox"/>	7. Persian	<input type="checkbox"/>	<input type="checkbox"/>	15. Yezidi
<input type="checkbox"/>	<input type="checkbox"/>	8. Hebrew			

16. Other, please specify _____ [] [] [] []

1st _____ [] [] [] []

2nd _____ [] [] [] []

99. Refuse to answer

D4. Are you a citizen of Armenia/Azerbaijan/Georgia?

1. Yes, I am a citizen of Armenia/Azerbaijan/Georgia
2. No, I am a citizen of another country, please specify _____ [] [] [] []
3. I do not have any citizenship

D5. Were you born in this settlement?

1. Yes [Go to D10] 2. No

D6. Where did you move from?

1. From another place in Armenia/Azerbaijan/Georgia
2. From another country, please specify _____ [] [] [] []

D7. When did you move to this region?

YEAR

D9. What was the main reason for moving?

- 1. Job
- 2. Income
- 3. Entering higher education
- 4. My family moved to this region
- 5. Change in marital status
- 6. War/ethnic conflict
- 7. Other, please specify _____

D10. What is your main current occupation?

For the interviewer: show the card D10

- 1. Employee in a local private organization, company, or enterprise *[Go to D13]*
- 2. Employee in a state organization, company, or enterprise *[Go to D13]*
- 3. Employee in a(n) foreign, international organization, company, enterprise, or joint venture *[Go to D13]*
- 4. Self-employed, without employees *[Go to D13]*
- 5. Self-employed, with employees *[Go to D13]*
- 6. Unemployed and looking for work
- 7. Student
- 8. Pensioner, including disabled
- 9. Unemployed and not looking for work (*if not Housewife*)
- 10. Housewife
- 11. Other, please specify _____ (*if employed, then Go to D13*)

D11. If you do not work, what is the primary reason?

For the interviewer: do not read the closings, but correspond the answers to them

- 1. Cannot find a job
- 2. Cannot find a job with appropriate pay
- 3. Studying
- 4. No will
- 5. Family reasons
- 6. Physical disability
- 7. Other, please specify _____
- 8. Cannot find a job corresponding to my profession

D12. If you do not work, are you registered with the appropriate employment state and/or private agency?

For the interviewer: after answering this question go to E1

- 1. Yes, state agency
- 2. Yes, private agency
- 3. Yes, both state and private agencies
- 4. No

Questionnaire:

D13. In which field do you work?

- 1. Trade/service
- 2. Transportation/communication
- 3. Industry
- 4. Construction
- 5. Science/education/high-tech
- 6. Culture/sport

- 7. Healthcare
- 8. Banking/finance
- 9. Agriculture
- 10. Media
- 11. Public administration
- 12. Non-profit

13. Other, please specify _____

E8. Why are you not involved in any kind of educational program? If more than one reason, please indicate the first and second most important.

For the interviewer: the two most important causes can be indicated. Do not read the closings, but correspond the answers to them

1st	2nd		1st	2nd		
<input type="checkbox"/>	<input type="checkbox"/>	1. I cannot afford it	<input type="checkbox"/>	<input type="checkbox"/>	5. I am too old	8. Other, please specify 1st _____ 2nd _____
<input type="checkbox"/>	<input type="checkbox"/>	2. I do not have time	<input type="checkbox"/>	<input type="checkbox"/>	6. I am not interested	
<input type="checkbox"/>	<input type="checkbox"/>	3. I am satisfied with my current profession/position.	<input type="checkbox"/>	<input type="checkbox"/>	7. I am satisfied with my current level of education	
<input type="checkbox"/>	<input type="checkbox"/>	4. It would not give me additional career possibilities				

E9. Which of the following factors do you consider most important for getting a good job in your country? if more than one reason, please indicate the first and second most important.

For the interviewer: the two most important causes can be indicated

1st	2nd		1st	2nd		
<input type="checkbox"/>	<input type="checkbox"/>	1. Luck	<input type="checkbox"/>	<input type="checkbox"/>	5. Professional abilities and talent	8. Other, please specify 1st _____ 2nd _____
<input type="checkbox"/>	<input type="checkbox"/>	2. Hard work	<input type="checkbox"/>	<input type="checkbox"/>	6. Work experience	
<input type="checkbox"/>	<input type="checkbox"/>	3. Education	<input type="checkbox"/>	<input type="checkbox"/>	7. Money	
<input type="checkbox"/>	<input type="checkbox"/>	4. Connections				

Section M. Migration

M1. Is/was any member of your h/h living abroad for three or more months during the last three years for the purpose of studying, working or permanently living?

1. Yes
 2. No [*Go to H1*]

M2. If yes, please provide the following information for each person who has lived abroad in the last three years. Table M-2

M2	M3	M4	M5	M6	M7	M8	M9	M10	M11
H/h member order unit <i>For the interviewer: write down the number that corresponds to the household member</i>	The last country of her/his migration, please indicate	Right of residence 1. Already a citizen 2. Have the right of residence 3. Temporary registration 4. Other, please specify _____ 98. Don't know 99. Refuse to answer	What was/is the main purpose of the member of your h/h for staying abroad? <i>For the interviewer: do not read the closings, but correspond the answers to them</i> 1. To become a permanent resident 2. Education [<i>Go to M7</i>] 3. Work 4. Reunification with family [<i>Go to M7</i>] 5. Other, please specify [<i>Go to M7</i>]	Reasons for leaving the home country <i>For the interviewer: do not show or read correspond answer with suitable closing</i> 1. Was unable to get a job 2. Income s/he was earning was not enough for the h/h 3. Could not get a job corresponding to his/her qualification 4. Personal reasons 5. Unfavorable psycho-ethical environment 6. Country does not have any future 7. Other /specify 98. Don't Know 99. Refuse to answer	Duration of migration 1. 3-6 months 2. 6-12 months 3. 1-3 years	Who or what organization mainly facilitated her/his migration? 1. Private person 2. Organization within home country 3. Organization outside home country 4. Nobody 98. Don't Know 99. Refuse to answer	During migration did/does s/he have a paid occupation or other source of income? 1. S/he had/has a paid occupation 2. S/he had/has a paid occupation and other source(s) of income 3. S/he had/has other sources of income. [<i>Go to M11</i>] 4. No, s/he did/does not have any income. [<i>Go to M11</i>] 98. Don't Know 99. Refuse to answer	Please indicate if his/her work (in migration) was/is based on a written contract 1. Yes 2. Probably 3. Probably not 4. No 98. Don't Know 99. Refuse to answer	Is s/he currently staying abroad? 1. Yes 2. No

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

M13. What was the occupation of the migrant before migration?

M14. What was the occupation of the migrant during migration?

M15. What was the occupation of the migrant after migration (if s/he returned)?

For the interviewer: show card M13

Table M-13

Occupation	Before migration			During migration			After migration		
	M13			M14			M15		
	H/h member order unit								
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee in a local private organization, company, or enterprise	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Employee in a state organization, company, or enterprise	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
Employee in a foreign, international organization, company, enterprise, or joint venture	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
Self-employed, without employees	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Employer	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Unemployed and looking for work	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6
Student	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7
Pensioner, including disabled	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8
Not employed and not looking for work	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9
Housewife	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10
Other (specify)	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11
Not applicable (if s/he is still in migration; or already returned)	<input type="checkbox"/> 97	<input type="checkbox"/> 97	<input type="checkbox"/> 97	<input type="checkbox"/> 97	<input type="checkbox"/> 97	<input type="checkbox"/> 97	<input type="checkbox"/> 97	<input type="checkbox"/> 97	<input type="checkbox"/> 97
Don't know	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98

M16. Sector of occupation of the migrant before migration?

M17. Sector of occupation of the migrant during migration?

M18. Sector of occupation of the migrant after migration (if s/he returned)?

For the interviewer: show card M16

Table M-16

Occupation	Before migration M13			During migration M14			After migration M15		
	H/h member order unit								
	□	□	□	□	□	□	□	□	□
S/he does/did not work	□ 1	□ 1	□ 1	□ 1	□ 1	□ 1	□ 1	□ 1	□ 1
Trade/service	□ 2	□ 2	□ 2	□ 2	□ 2	□ 2	□ 2	□ 2	□ 2
Transportation/communication	□ 3	□ 3	□ 3	□ 3	□ 3	□ 3	□ 3	□ 3	□ 3
Industry	□ 4	□ 4	□ 4	□ 4	□ 4	□ 4	□ 4	□ 4	□ 4
Construction	□ 5	□ 5	□ 5	□ 5	□ 5	□ 5	□ 5	□ 5	□ 5
Science/education/high-tech	□ 6	□ 6	□ 6	□ 6	□ 6	□ 6	□ 6	□ 6	□ 6
Culture/sport	□ 7	□ 7	□ 7	□ 7	□ 7	□ 7	□ 7	□ 7	□ 7
Healthcare	□ 8	□ 8	□ 8	□ 8	□ 8	□ 8	□ 8	□ 8	□ 8
Banking/finance	□ 9	□ 9	□ 9	□ 9	□ 9	□ 9	□ 9	□ 9	□ 9
Agriculture	□ 10	□ 10	□ 10	□ 10	□ 10	□ 10	□ 10	□ 10	□ 10
Media	□ 11	□ 11	□ 11	□ 11	□ 11	□ 11	□ 11	□ 11	□ 11
Public administration	□ 12	□ 12	□ 12	□ 12	□ 12	□ 12	□ 12	□ 12	□ 12
Non-profit	□ 13	□ 13	□ 13	□ 13	□ 13	□ 13	□ 13	□ 13	□ 13
Other, please specify _____	□ 14	□ 14	□ 14	□ 14	□ 14	□ 14	□ 14	□ 14	□ 14
Not applicable (if s/he is still in migration)	□ 97	□ 97	□ 97	□ 97	□ 97	□ 97	□ 97	□ 97	□ 97
Don't know	□ 98	□ 98	□ 98	□ 98	□ 98	□ 98	□ 98	□ 98	□ 98

M19. Will you leave the country again if you have the possibility to do so?

For the interviewer: ask only if respondent returned from migration. Do not show the answers but correspond the responses to them.

1. Definitely 3. Maybe 5. Definitely not [*Go to H1*]
 2. Probably 4. Probably not [*Go to H1*] 98. Don't know

M20. Why would you like to leave the country again?

1. Unable to get a job 4. Personal reasons
 2. Money s/he is earning is not enough for the h/h 5. Unfavorable psycho-ethical environment
 3. Can not get a job corresponding to his/her qualification 6. The country does not have any future
 7. Other, please specify _____ □ □ □ □

Section H. Health

H1. Have you ever smoked regularly?

1. Yes 2. No [*Go to H4*]

H2. At what age did you start smoking regularly?

YEAR

H3. Do you smoke regularly now?

1. Yes 2. No [*Go to H3.2*]

H3.1. If yes, number of cigarettes per day. NUMBER

H3.2. If no, when did you quit smoking? YEAR

H4. Do you usually drink alcohol?

1. Yes 2. No [*Go to H7*]

H5. What type of alcohol do you drink and how often?

For the interviewer: read line by line

Table H-5

Type of alcohol	Codes	Codes			
		Every day	Every few days	Only on the weekends	Only on special occasions
Strong alcohol (vodka, brandy)	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 4
Wine/champagne	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 4
Light alcohol (beer)	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 4

H7. Which diseases from the list below have you heard about?

For the interviewer: read line by line

Table H-7

		Yes	No
1	HIV/AIDS	<input type="checkbox"/> 1	<input type="checkbox"/> 2
2	Gonorrhea	<input type="checkbox"/> 1	<input type="checkbox"/> 2
3	Syphilis	<input type="checkbox"/> 1	<input type="checkbox"/> 2
4	Trichomoniasis	<input type="checkbox"/> 1	<input type="checkbox"/> 2
5	Herpes	<input type="checkbox"/> 1	<input type="checkbox"/> 2
6	Chlamydia	<input type="checkbox"/> 1	<input type="checkbox"/> 2
7	Other, please specify	<input type="checkbox"/> 1	<input type="checkbox"/> 2

H8. Which way can these diseases be transmitted?

For the interviewer: to be asked line by line.

Table H-8

		HIV/AIDS		
		Yes	No	DK
1	Shared bath, towel, toilet	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
2	Shared syringe	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
3	Shaking hands	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
4	Shared utensils	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
5	Kissing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
6	Unprotected sex	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
7	Mosquito bite	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
8	Syringe	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
9	Blood transfusion	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
10	Genetically	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
11	Other, please specify	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
12	Refuse to answer	<input type="checkbox"/> 99		

Table H-8.1

		Other STD		
		Yes	No	DK
1	Shared bath, towel, toilet	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
2	Shared syringe	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
3	Shaking hands	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
4	Shared utensils	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
5	Kissing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
6	Unprotected sex	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
7	Mosquito bite	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
8	Syringe	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
9	Blood transfusion	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
10	Genetically	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
11	Other, please specify	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
12	Refuse to answer	<input type="checkbox"/> 99		

H9. Can you tell me what is your attitude towards these different groups?

For the interviewer: to be asked for each group of people indicate the answers for each case

Table H-9

		9.1. I do not mind being friends with			9.2. I do not mind cooperating (doing business) with			9.3. I do not mind being neighbors with		
		I don't mind	I mind	DK	I don't mind	I mind	DK	I don't mind	I mind	DK
1	AIDS infected person	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
2	Drug addict	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
3	Homosexual	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
4	Tubercular patient	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98
5	Alcoholic	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 98

H10. From what age do you think it is acceptable for a man and a woman to:

For the interviewer: ask line by line. If the activity is not acceptable for respondent at all – at any age – mark 88

Table H-10

		Man	Woman
1	Drink strong alcohol (vodka, brandy)	_____	_____
2	Drink wine/champagne	_____	_____
3	Drink light alcohol (beer)	_____	_____
4	Smoke tobacco	_____	_____
5	Smoke cannabis	_____	_____
6	Live separately from parents before marriage	_____	_____
7	Have sexual relations before marriage	_____	_____
8	Cohabit with a person of the opposite sex without marriage	_____	_____
9	Marry without parents' permission	_____	_____
10	Get married	_____	_____
11	Have children	_____	_____

H11.A. During the last 12 months have you been sick and felt the need of a doctor?

1. Yes 2. No

H11.B. During the last 12 months have you visited a doctor for treatment or preventative care?

1. Yes 2. No *[Go to P1]*

H11. During the last 12 months how often and for what purposes have you visited:

For the interviewer: ask line by line. complete both columns indicating the number of visits the respondent has made for each purpose.

Table H-12

		Treatment	Preventative Care
1	General practitioner	□□□□	□□□□
2	Cardiologist	□□□□	□□□□
3	Neurologist	□□□□	□□□□
4	Colon and Rectal Surgeon	□□□□	□□□□
5	Urologist	□□□□	□□□□
6	Gynecologist/obstetrician	□□□□	□□□□
7	Male reproductive surgeon/male reproductive endocrinologist (андролог)	□□□□	□□□□
8	Oncologist	□□□□	□□□□
9	Otolaryngologist/Ear, nose and throat specialist	□□□□	□□□□
10	Ophthalmologist	□□□□	□□□□
11	Gastroenterologist	□□□□	□□□□
12	Dentist	□□□□	□□□□
13	Endocrinologist	□□□□	□□□□
14	Dermatologist	□□□□	□□□□
15	Orthopedist	□□□□	□□□□
16	Pulmonologist/pulmonary specialist	□□□□	□□□□
17	Psychiatrist	□□□□	□□□□
18	Healer (non-traditional medicine)	□□□□	□□□□
19	Friends/family	□□□□	□□□□
20	Self-treatment	□□□□	□□□□
21	Other, please specify	□□□□	□□□□

Section P. Political Activity/Views

P1. To what extent are you interested in politics?

1. Very interested 2. Somewhat interested 3. Not very interested 4. Not at all interested

P2. How often do you discuss politics?

1. Very often 2. Rather often 3. Rarely 4. Never

P3. What are your main information sources for receiving news about national politics?

For the interviewer: if there are several answers, please rank them according to their importance, starting from 1.

For the interviewer: read line by line

Table P3

Source of information								
1	TV	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
2	Radio	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
3	Newspapers	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
4	Internet	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
5	Family members	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
6	Neighbors, friends	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
7	Workplace/colleagues	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

P4. Did you vote in the last parliamentary elections?

1. Yes [*Go to P6*] 2. No 99. Refuse to answer [*Go to P6*]

P5. Why did you not you vote in the last parliamentary elections?

For the interviewer: do not read the answers.

1. Not interested in politics 5. Was not of legal voting age
 2. Useless 6. Was not in the city/village
 3. Didn't like any of the candidates 7. Other, please specify _____
 4. As an act of protest 99. Refuse to answer

P6. Did you vote in the last presidential elections?

1. Yes [*Go to P8*] 2. No 99. Refuse to answer [*Go to P8*]

P7. Why did you not you vote in the last presidential elections?

For the interviewer: do not read the answers

1. Not interested in politics 5. Was not of legal voting age
 2. Useless 6. Was not in the city/village
 3. Didn't like any of the candidates 7. Other, please specify _____
 4. As an act of protest 99. Refuse to answer

P8. Over the last 12 months have you participated in any type of public political activity such as a political demonstration, meeting, signing a petition, etc.?

1. Yes, only once 2. Yes, several times 3. No 99. Refuse to answer

Questionnaire: _____

P9. In your opinion, are the things in our country moving in the right direction or wrong direction?

For the interviewer: ask without a card

- | | |
|---|--|
| <input type="checkbox"/> 1. Things are moving in the right direction | <input type="checkbox"/> 5. Things are moving in the wrong direction |
| <input type="checkbox"/> 2. Things are moving mainly in the right direction | <input type="checkbox"/> 98. Don't know |
| <input type="checkbox"/> 3. Things are not moving at all | <input type="checkbox"/> 99. Refuse to answer |
| <input type="checkbox"/> 4. Things are moving mainly in the wrong direction | |

P10. Please rank the following groups according to their importance for the country?

Table P10

		Rank			
1	Social issues	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
2	Economic issues	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
3	International issues	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
4	Democracy building	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

P11. Which of the following goals do you consider most important, second most important and third most important for your country?

For the interviewer: indicate three most important answers. Show the card P11

Table P-11

	1st	2nd	3rd
Reduce poverty	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Increase income	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
Reduce unemployment	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
Fight corruption	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Improve the environment	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Restore the territorial integrity of our country	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6
Return refugees and IDPs to their homes	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7
Reduce outmigration	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8
Encourage repatriation	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9
Reduce crime	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10
Guarantee civil rights (freedom of speech, belief, associations, etc) and rule of law.	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11
Reduce inequality	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12
Increase access to health care	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13
Guarantee political stability	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14
Strengthen military capability of the country	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15
Improve interethnic relations	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16
Other, please specify	<input type="checkbox"/> 17	<input type="checkbox"/> 17	<input type="checkbox"/> 17

P12. In your opinion, primarily which country should your country strive to cooperate with in the: (a) economic sphere; (b) political sphere? please rank them on a 5 point scale (from 1 - minimal to 5 - maximal) in order of importance.

For the interviewer: do not read the answers.

Note: Each country uses codes from last year DI and adds own countries

Table P-12

		A. Economic sphere					B. Political sphere				
1	Russia	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
2	USA	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
3	European Union	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4	Iran	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
5	Turkey	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
6	Other, please specify _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
98	Don't know	<input type="checkbox"/> 98					<input type="checkbox"/> 98				
99	Refuse to answer	<input type="checkbox"/> 99					<input type="checkbox"/> 99				

P13. What is your attitude regarding the cooperation of your country with the following Caucasian countries in economic and political spheres? Please rank them on a 5 point scale (from 1 - minimal to 5 - maximal) in order of importance.

P13.1. Azerbaijan	Economic	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	Political	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

P13.2. Armenia	Economic	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	Political	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

P13.3. Georgia	Economic	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	Political	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

P14. What is your attitude towards our country cooperating with NATO

P15. What is your attitude towards our country becoming a NATO member?

Table P-14

	P14	P15
Fully supportive	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Rather supportive	<input type="checkbox"/> 2	<input type="checkbox"/> 2
Rather against	<input type="checkbox"/> 3	<input type="checkbox"/> 3
Fully against	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Don't know	<input type="checkbox"/> 98	<input type="checkbox"/> 98

P16. How do you feel about the following groups?

For the interviewer: read line by line

Note: Each WG group agreed to leave groups to discretion of each country

Table P-16

Groups		Positive	Negative	Neutral	DK	Refuse
1	Abkhaz	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
2	Armenian	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
3	Assyrian	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
4	Azerbaijani	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
5	Georgian	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
6	Greek	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
7	Iranian	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
8	Jewish	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
9	Kurdish	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
10	Lezgin	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
11	Ossetian	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
12	Russian	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
13	Talysh	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
14	Turkish	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
15	Yezidi	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 99
99	Refuse to answer	<input type="checkbox"/> 99				

Section S. Social Institutions

S1. I will list several social institutions and please, assess your trust toward them on a 5-point scale, where “5” means fully trust, “1” – fully distrust.

For the interviewer: read line by line

Table S-1

Social institution		S1						
		Fully trust	Rather trust	Neutral	Rather distrust	Fully distrust	DK	Refuse to answer
1	Parliament	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
2	Police	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
3	Courts/justice	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
4	Political parties	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
5	Churches/Religious Department of the Caucasus Muslims/ synagogues	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
6	Media	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
7	Army	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
8	Educational system	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
9	Prime Minister and ministries	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
10	Health system	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
11	President	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
12	Human rights/ Ombudsmen	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
13	13 Market economics (business)	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
14	Local NGOs	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99

S2. Please look at this card (Table S-1) and name the institution, which is functioning most effectively in your country, second most effective and third most effective.

First

Second

Third

S3. Please look at this card (table S-4) and tell me, which of these international organizations are you familiar with?

S4. Please assess the role of the organizations in your country you are familiar with on a 5 point scale, where 5 means very productive, 1 – very unproductive.

For the interviewer: read line by line

Table S-4

International organizations	S3.	S4					
		Very productive	Productive	Less productive	Unproductive	Very unproductive	DK
UN agencies	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
World Bank	<input type="checkbox"/> 2	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
OSCE	<input type="checkbox"/> 3	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
USAID	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
IMF	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
Red Cross	<input type="checkbox"/> 6	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
EBRD	<input type="checkbox"/> 7	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
Council of Europe	<input type="checkbox"/> 8	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
Eurasia Foundation	<input type="checkbox"/> 9	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
CIS	<input type="checkbox"/> 10	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98

S5. Are you a member of any political party?

1. Yes, please specify _____ 2. No 99. Refuse to answer

S6. Are you a member of any local NGO?

1. Yes 2. No 99. Refuse to answer

S7. Do you have any religious affiliation, if yes please specify?

For the interviewer: do not read the closings, but correspond the answers to them

Table S-7

	Codes
Christian Orthodox Church	<input type="checkbox"/> 1
Catholic Church	<input type="checkbox"/> 2
Armenian Apostolic Church	<input type="checkbox"/> 3
Islam	<input type="checkbox"/> 4
Jehovah's Witnesses	<input type="checkbox"/> 5
Evangelical Church	<input type="checkbox"/> 6
Judaism	<input type="checkbox"/> 7
Baptist	<input type="checkbox"/> 8
Molokan	<input type="checkbox"/> 9
Other, please specify	<input type="checkbox"/> 10
None	<input type="checkbox"/> 88

S8. Do you attend religious services? If yes, how often?

For the interviewer: do not read the closings, but correspond the answers to them

Table S-8

	Codes
Every day	<input type="checkbox"/> 1
Several times a week	<input type="checkbox"/> 2
Once a week	<input type="checkbox"/> 3
Once a month	<input type="checkbox"/> 4
From time to time	<input type="checkbox"/> 5
Never	<input type="checkbox"/> 6

S9. Now I would like to ask you about your attitude towards representatives of different religious confessions.

For the interviewer: read line by line

Table S-9		Positive	Rather positive	Neutral	Rather negative	Negative	DK	Refuse
1	Christian Orthodox Church	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 98	<input type="checkbox"/> 99
2	Catholic Church	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 98	<input type="checkbox"/> 99
3	Armenian Apostolic Church	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 98	<input type="checkbox"/> 99
4	Islam	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 98	<input type="checkbox"/> 99
5	Jehovah's Witnesses	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 98	<input type="checkbox"/> 99
6	Evangelical Church	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 98	<input type="checkbox"/> 99
7	Judaism	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 98	<input type="checkbox"/> 99
8	Baptist	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 98	<input type="checkbox"/> 99

Section R. Crime

R1. During the day do you feel safe when you are alone in the following places?

For the interviewer: read line by line

Table R-1		Very safe	Somewhat safe	Not safe	DK	NA
1	At your home	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
2	At your work place (or where you study)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
3	On the street	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
4	Public and recreation places (theater, restaurant, etc.)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
5	In the neighborhood where I live	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
6	Outside the city/village	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
7	Crowded places	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97

R2. During the night do you feel safe when you are alone in the following places?

For the interviewer: read line by line

Table R-2		Very safe	Somewhat safe	Not safe	DK	NA
1	At your home	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
2	At your work place (or where you study)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
3	On the street	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
4	Public and recreation places (theater, restaurant, etc.)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
5	In the neighborhood where I live	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
6	Outside the city/village	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97
7	Crowded places	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 98	<input type="checkbox"/> 97

R3. How likely do you think you will be a victim of violence by the following groups or individuals?

For the interviewer: read line by line

Table R-3		Very likely	Somewhat likely	Not Very Likely	Not at all likely	DK
1	Police	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
2	Organized crime	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
3	Thieves	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
4	Drug addicts	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
5	Your husband/wife and other family members	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
6	Hooligans	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
7	Homeless people	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
8	Other, please specify	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98

R4. Have you been a victim or a witness of a crime within the last year?

1. have been a victim
 3. I have been both a victim and witness
 99. Refuse to answer
 2. have been a witness
 4.No *[Go to R10]*
 [Go to R10]

R5. What kind of crime have you experienced or witnessed?

For the interviewer: show card R5

Table R-5

	R5.1. If a victim	R5.2. If a witness
Fight	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Blackmail	<input type="checkbox"/> 2	<input type="checkbox"/> 2
Theft	<input type="checkbox"/> 3	<input type="checkbox"/> 3
Car theft	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Kidnapping	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Trafficking	<input type="checkbox"/> 6	<input type="checkbox"/> 6
Robbery	<input type="checkbox"/> 7	<input type="checkbox"/> 7
Abuse (rape)	<input type="checkbox"/> 8	<input type="checkbox"/> 8
Bribery	<input type="checkbox"/> 9	<input type="checkbox"/> 9
Swindling	<input type="checkbox"/> 10	<input type="checkbox"/> 10
Other, please specify	<input type="checkbox"/> 11	<input type="checkbox"/> 11
Refuse to answer	<input type="checkbox"/> 99	<input type="checkbox"/> 99

R6. If you were a victim of crime did you report the crime anywhere?

1. Yes 2. No [*Go to R8*]

R6.1 If yes, where did you report the crime?

For the interviewer: use table R-7

R7 How effectively was the problem solved by the following bodies? Please rank answers on a 5-point scale, where “5” means very effectively, and “1” - very ineffectively.

For the interviewer: Read line by line

Table R-7

		R6.1	R7						
			Very effective	Effective	More or less effective	Ineffective	Very ineffective	DK	Refuse to answer
1	Police	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
2	Prosecutor’s office	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
3	Ombudsman	<input type="checkbox"/> 3	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
4	Neighbors	<input type="checkbox"/> 4	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
5	Friends	<input type="checkbox"/> 5	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
6	Relatives	<input type="checkbox"/> 6	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
7	Criminal leader	<input type="checkbox"/> 7	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
8	Private agency	<input type="checkbox"/> 8	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
9	Media	<input type="checkbox"/> 9	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
10	NGO	<input type="checkbox"/> 10	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98
11	Other, please specify	<input type="checkbox"/> 11	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98

R8. If you were a witness to a crime did you report the crime anywhere?

1. Yes 2. No [*Go to R10*]

R8.A. If yes, where did you report?

For the interviewer: use table R-9

R9. How effectively was the problem solved by the following bodies? please rank answers on a 5-point scale, where “5” means very effectively, and “1” - very ineffectively.

For the interviewer: read line by line

Table R-8

		R8a	R9						
			Very effective	Effective	More or less effective	Ineffective	Very ineffective	DK	Refuse to answer
1	Police	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
2	Prosecutor’s office	<input type="checkbox"/> 2	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
3	Ombudsmen	<input type="checkbox"/> 3	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
4	Neighbors	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
5	Friends	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
6	Relatives	<input type="checkbox"/> 6	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
7	Criminal leader	<input type="checkbox"/> 7	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
8	Private agency	<input type="checkbox"/> 8	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
9	Media	<input type="checkbox"/> 9	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
10	NGO	<input type="checkbox"/> 10	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
11	Other, please specify	<input type="checkbox"/> 11	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99

R10. Could you please tell me, how effectively the below mentioned entities/people function to secure personal safety and civic rights? please rank answers on a 5-point scale, where “5” means very effectively, and “1” – very ineffectively.

For the interviewer: read line by line

Table R-10

		R8a	R9						
			Very effective	Effective	More or less effective	Ineffective	Very ineffective	DK	Refuse to answer
1	Police	<input type="checkbox"/> 1	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
2	Prosecutor’s office	<input type="checkbox"/> 2	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
3	Ombudsmen	<input type="checkbox"/> 3	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
4	Neighbors	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
5	Friends	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
6	Relatives	<input type="checkbox"/> 6	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
7	Criminal leader	<input type="checkbox"/> 7	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
8	Private agency	<input type="checkbox"/> 8	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
9	Media	<input type="checkbox"/> 9	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
10	NGO	<input type="checkbox"/> 10	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99
11	Other, please specify	<input type="checkbox"/> 11	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 98	<input type="checkbox"/> 99

Section C. Economic Behaviour

C2. Do you and/or your family have the following items?

For the interviewer: ask line by line

Table C-2

	Property	Yes	No
1	Own flat	<input type="checkbox"/> 1	<input type="checkbox"/> 2
2	Own house	<input type="checkbox"/> 1	<input type="checkbox"/> 2
3	Dacha	<input type="checkbox"/> 1	<input type="checkbox"/> 2
4	Vehicle	<input type="checkbox"/> 1	<input type="checkbox"/> 2
5	Computer	<input type="checkbox"/> 1	<input type="checkbox"/> 2
6	Telephone	<input type="checkbox"/> 1	<input type="checkbox"/> 2
7	Mobile phone	<input type="checkbox"/> 1	<input type="checkbox"/> 2
8	TV /video set	<input type="checkbox"/> 1	<input type="checkbox"/> 2
9	Automatic washing machine	<input type="checkbox"/> 1	<input type="checkbox"/> 2
10	Internet access	<input type="checkbox"/> 1	<input type="checkbox"/> 2
11	Video camera	<input type="checkbox"/> 1	<input type="checkbox"/> 2
12	Central/local heating system	<input type="checkbox"/> 1	<input type="checkbox"/> 2
13	Satellite dish	<input type="checkbox"/> 1	<input type="checkbox"/> 2
14	Air conditioner	<input type="checkbox"/> 1	<input type="checkbox"/> 2
15	Microwave	<input type="checkbox"/> 1	<input type="checkbox"/> 2
16	Cable TV	<input type="checkbox"/> 1	<input type="checkbox"/> 2
17	Livestock	<input type="checkbox"/> 1	<input type="checkbox"/> 2
18	Land plot	<input type="checkbox"/> 1	<input type="checkbox"/> 2
19	Poultry	<input type="checkbox"/> 1	<input type="checkbox"/> 2
20	Agricultural machinery	<input type="checkbox"/> 1	<input type="checkbox"/> 2
21	Work building	<input type="checkbox"/> 1	<input type="checkbox"/> 2

C3. Indicate who the contributors to the household budget are and approximately how much they contributed per month on average during the last year.

Table C-3

H/h Member ID	Approximate amount in National Currency	DK	Refuse to answer
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99
_ _ _	_ _ _ _ _ _ _ _ _ _ _ _ _ _	<input type="checkbox"/> 98	<input type="checkbox"/> 99

C4. Please indicate the main sources of your h/h income for last year

For the interviewer: three answers are possible. If there are several answers, please rank them.

Table C-4

Source	1- st	2-nd	3-rd
Salary from main place of employment (including bonuses)	<input type="checkbox"/> 1	<input type="checkbox"/> 1	<input type="checkbox"/> 1
Salary from additional work	<input type="checkbox"/> 2	<input type="checkbox"/> 2	<input type="checkbox"/> 2
Income from business (including individual (non-agricultural) business)	<input type="checkbox"/> 3	<input type="checkbox"/> 3	<input type="checkbox"/> 3
Income from agricultural activity	<input type="checkbox"/> 4	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Occasional contracts	<input type="checkbox"/> 5	<input type="checkbox"/> 5	<input type="checkbox"/> 5
Pensions	<input type="checkbox"/> 6	<input type="checkbox"/> 6	<input type="checkbox"/> 6
Scholarship	<input type="checkbox"/> 7	<input type="checkbox"/> 7	<input type="checkbox"/> 7
Social welfare	<input type="checkbox"/> 8	<input type="checkbox"/> 8	<input type="checkbox"/> 8
Benefits for children	<input type="checkbox"/> 9	<input type="checkbox"/> 9	<input type="checkbox"/> 9
Compensations	<input type="checkbox"/> 10	<input type="checkbox"/> 10	<input type="checkbox"/> 10
Alimony	<input type="checkbox"/> 11	<input type="checkbox"/> 11	<input type="checkbox"/> 11
Financial help of relatives/friends	<input type="checkbox"/> 12	<input type="checkbox"/> 12	<input type="checkbox"/> 12
Income from sale of goods (household items)	<input type="checkbox"/> 13	<input type="checkbox"/> 13	<input type="checkbox"/> 13
Income from renting of property	<input type="checkbox"/> 14	<input type="checkbox"/> 14	<input type="checkbox"/> 14
Income from sale of property	<input type="checkbox"/> 15	<input type="checkbox"/> 15	<input type="checkbox"/> 15
Interest on securities	<input type="checkbox"/> 16	<input type="checkbox"/> 16	<input type="checkbox"/> 16
Interest on deposits	<input type="checkbox"/> 17	<input type="checkbox"/> 17	<input type="checkbox"/> 17
Other	<input type="checkbox"/> 18	<input type="checkbox"/> 18	<input type="checkbox"/> 18
DK	<input type="checkbox"/> 98	<input type="checkbox"/> 98	<input type="checkbox"/> 98
Refuse to answer	<input type="checkbox"/> 99	<input type="checkbox"/> 99	<input type="checkbox"/> 99

C5. Do you have one or more regularly paid employees at your house?

1. Yes 2. No [*Go to C7*]

C6. What does/do your paid employee/s do?

For the interviewer: if more than one such person exists, indicate all

1. Babysitter 4. Security
 2. Housekeeper 5. Gardener 7. Other, please specify _____
 3. Driver 6. Social worker

C7. How much did your household spend last month on each of the following?

For the interviewer: ask line by line.

Table C-7

	Expenses	Amount in National Currency	DK / Refuse to answer
Monthly expenses			
Food stuffs			
1.	Bread	_____	<input type="checkbox"/> 99
2.	Meat	_____	<input type="checkbox"/> 99
3.	Sugar	_____	<input type="checkbox"/> 99
4.	Tea/ coffee	_____	<input type="checkbox"/> 99
5.	Cigarettes	_____	<input type="checkbox"/> 99
6.	Butter	_____	<input type="checkbox"/> 99
7.	Fruits	_____	<input type="checkbox"/> 99
8.	Vegetables	_____	<input type="checkbox"/> 99
Communal services expenses			
9.	Flat rental	_____	<input type="checkbox"/> 99
10.	Transport	_____	<input type="checkbox"/> 99
11.	Gas	_____	<input type="checkbox"/> 99
12.	Electricity	_____	<input type="checkbox"/> 99
13.	Water	_____	<input type="checkbox"/> 99
14.	Phone (home)	_____	<input type="checkbox"/> 99
15.	Mobile phone	_____	<input type="checkbox"/> 99
16.	Housing and communal services expenses (Услуги Жека)	_____	<input type="checkbox"/> 99
17.	Babysitter/ Housekeeper/Driver	_____	<input type="checkbox"/> 99
Yearly expenses			
18.	Clothes	_____	<input type="checkbox"/> 99
19.	Recreation	_____	<input type="checkbox"/> 99
20.	Health	_____	<input type="checkbox"/> 99
21.	Wedding, funeral	_____	<input type="checkbox"/> 99
22.	Purchase of house	_____	<input type="checkbox"/> 99
23.	Purchase of car	_____	<input type="checkbox"/> 99
24.	Purchase of furniture	_____	<input type="checkbox"/> 99
25.	Domestic electrical equipment	_____	<input type="checkbox"/> 99

C8. Has anyone in your household taken loans, debt or credits more than 100 USD during the past year?

1. Yes, several times 3. No *[Go to C11]*
 2. Yes, once 99. Refuse to answer *[Go to C11]*

C9. If any household members took loans from banks and/or debt and credits from individuals of more than 100 USD, what was the main purpose of doing so?

For the interviewer: read line by line, several answers are possible

Table C-9

Purpose	
Pay business expenses/invest	<input type="checkbox"/> 1
Pay for education	<input type="checkbox"/> 2
Purchase/construct/renovate a house	<input type="checkbox"/> 3
Pay for medical care	<input type="checkbox"/> 4
Purchase capital goods	<input type="checkbox"/> 5
Pay back previously taken loans/credits	<input type="checkbox"/> 6
Utilities	<input type="checkbox"/> 7
Ongoing household expenses	<input type="checkbox"/> 8
Special events (wedding, funeral, etc.)	<input type="checkbox"/> 9
Other, please specify	<input type="checkbox"/> 10
Refuse to answer	<input type="checkbox"/> 99

C10. From which of the following sources did you take your loan/credit/debt last time?

Table C-10

Source of money	
Private persons with interest	<input type="checkbox"/> 1
Private persons without interest	<input type="checkbox"/> 2
Banks and other credit organizations	<input type="checkbox"/> 3
Special credit programs	<input type="checkbox"/> 4
Refuse to answer	<input type="checkbox"/> 99

C11. Has any member of your h/h used the following banking/financial services during the last year?

For the interviewer: read line by line

Table C-11

Banking/financial services	
Transfer	<input type="checkbox"/> 1
Current account	<input type="checkbox"/> 2
Savings account	<input type="checkbox"/> 3
Loans/credit	<input type="checkbox"/> 4
Other, please specify	<input type="checkbox"/> 5
Never used	<input type="checkbox"/> 88
Don't know	<input type="checkbox"/> 98
Refuse to answer	<input type="checkbox"/> 99

C12. How would you describe the current economic condition of your h/h?

For the interviewer: do not read the closings, but correspond the answers to them

1. Very good 3. Fair 5. Very poor 98. Don't know
 2. Good 4. Poor 99. Refuse to answer

C13. To what social stratum of society do you think your h/h belongs?

For the interviewer: do not read the closings, but correspond the answers to them

1. The lowest 4. Higher part of the middle level
 2. Lower part of the middle level 5. Upper level
 3. Middle part of the middle level 98. Don't know
 99. Refuse to answer

C14. How, if at all, do you think your h/h economic condition has changed during the last three years?

C15. How, if at all, do you think your h/h economic condition has changed during the last year?

C16. How, if at all, do you think your h/h economic condition will change in one year?

C17. How, if at all, do you think your h/h economic condition will change in the next three years?

Table C-14

	Has become/will be significantly better	Has become/will be a little better	Has remained/will remain about the same	Has become/will be a little worse	Has become/will be significantly worse	Refuse to answer
C14	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
C15	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
C16	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99
C17	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 99

C18. If the socio-economic condition in your country does not improve in the next 3 years, which of the following actions will you take? (for each action: definitely yes, probably yes, probably no, definitely no).

For the interviewer: read line by line

Table C-18

		Definitely	Probably	Probably not	Definitely not	Don't know
1	Migration from the country	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
2	Migration within the country	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98
3	I will not do anything	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 98