

*RLMS*  
*Russia Longitudinal Monitoring Survey*

*Round 10*

*(September 2001- December 2001)*

*CHILD QUESTIONNAIRE*

*Russian Institute of Nutrition*  
*University of North Carolina at Chapel Hill*  
*Institute of Sociology, Russian Academy of Sciences*

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# Questionnaire for Children

6-th round

[i.e., 10th round]


*SITEJ* 1. [NAME OF POPULATION CENTER \_\_\_\_\_ | \_\_\_\_ | \_\_\_\_ | \_\_\_\_ | ]

*CENSUSDJ* 2. [NUMBER OF SURVEY SECTOR (FOR CITIES) \_\_\_\_\_ | \_\_\_\_ | \_\_\_\_ | ]

*FAMILYJ* 3. [NUMBER OF FAMILY | \_\_\_\_ | \_\_\_\_ | ]

*PERSONJ* 4. [NUMBER ON THE CARD OF THE CHILD BEING DISCUSSED | \_\_\_\_ | \_\_\_\_ | ]

*IJRPINBF* 4.1. [DID THE CHILD PARTICIPATE IN THE SURVEY:

**1994** ..... 1  
**1995** ..... 2  
**1996** ..... 3  
**1998** ..... 4  
**2000** ..... 5  
**NEVER PARTICIPATED** ..... 6 ]

*IJGENDER* 5. [SEX OF THE CHILD BEING DISCUSSED

**MALE** ..... 1  
**FEMALE** ..... 2 ]

*IJINTDAY* 7. [DATE OF INTERVIEW. DAY | \_\_\_\_ | \_\_\_\_ | MONTH | \_\_\_\_ | \_\_\_\_ | ]  
*IJINTMON*

*IJINTHRS* 8. [LENGTH OF INTERVIEW | \_\_\_\_ | HOURS | \_\_\_\_ | \_\_\_\_ | MINUTES ]  
*IJINTMIN*

9. [LAST NAME OF INTERVIEWER \_\_\_\_\_ ]

*IJINTNUM* 10. [NUMBER OF INTERVIEWER | \_\_\_\_ | \_\_\_\_ | \_\_\_\_ | ]

*IJADANSW* 11. [NUMBER OF THE ADULT WHO ANSWERED THE QUESTIONS | \_\_\_\_ | \_\_\_\_ | ]

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 115-128, 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 115-128 ON PAGES 20-23 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
IJBIRTHD	IJBIRTHM	IJBIRTHY

## SECTION "MIGRATION"

IJBORNDP 1. 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

IJSPEAKS 5. 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

IJPASPK 6. What language is primarily spoken by the parents in (his/her) home?

RUSSIAN	1
DOESN'T KNOW	997
REFUSES TO ANSWER	998

## 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 1995** OR EARLIER, ASK **QUESTIONS BEGINNING WITH QUESTION 1.**

IF THE CHILD WAS BORN **BETWEEN 1996 AND 1999**, ASK **QUESTIONS BEGINNING WITH 8.A ON PAGE 5.**

FOR THE REMAINING CHILDREN (**BORN IN 2000 OR 2001**), ASK QUESTION **9 ON PAGE 6.** ]

*IJGRADEI* 1. 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 ]

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

\_\_\_\_\_ grades  
 DOESN'T KNOW ..... 97  
 REFUSES TO ANSWER ..... 98

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

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

*IJPAYSCH* 4. 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 ]

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

\_\_\_\_\_ rubles  
 DOESN'T KNOW ..... 997  
 REFUSES TO ANSWER ..... 998

*IJPAYBKS* 6. 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 ]

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

\_\_\_\_\_ rubles  
 DOESN'T KNOW ..... 997  
 REFUSES TO ANSWER ..... 998

### 3. K.

*IJPECLAS* 7.1 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 ]

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

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

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

	(He/she) engages in during class ...?	How many hours and minutes per week?	D/K
1. Karate, judo, self-defense, wrestling, boxing, gymnastics .....	Yes ..... 1 No ..... 2	→ ____ hrs ____ min <i>IJKARHRS</i>	97
2. Active sports: badminton, tennis, soccer, basketball, volleyball, hockey, or swimming .....	<i>IJKARATE</i> Yes ..... 1 No ..... 2 <i>IJSPOHRS</i>	→ ____ hrs ____ min <i>IJKARMIN</i> <i>IJSPOHRS</i> <i>IJSPOMIN</i>	97
3. Track and field, skiing, skating .....	Yes ..... 1 No ..... 2 <i>IJTRACKF</i>	→ ____ hrs ____ min <i>IJTRAHRS</i> <i>IJTRAMIN</i>	97
4. Other kinds of physical activity .....	Yes ..... 1 No ..... 2 <i>IJPEOTHR</i>	→ ____ hrs ____ min <i>IJPEOHRS</i> <i>IJPEOMIN</i>	97

*IJPHYSOC* 7.4 Does (he/she) engage in physical activities and sports before or after classes? I have in mind training sessions with a coach as well as simply active games outdoors--soccer, tag, "classiki," 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 ]

*IJOCFREQ* 7.5 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

## 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.

	(He/she) engages in before or after classes?	How many hours and minutes per week?	D/K
1. Karate, judo, self-defense, wrestling, boxing, gymnastics .....	Yes ..... 1 No ..... 2 <i>IJOCKARA</i>	→ ____ hrs ____ min <i>IJOCKHRS</i> <i>IJOCKMIN</i>	97
2. Active sports: badminton, tennis, soccer, basketball, volleyball, hockey, or swimming .....	Yes ..... 1 No ..... 2 <i>IJOCSPOR</i>	→ ____ hrs ____ min <i>IJOCSHRS</i> <i>IJOCSMIN</i>	97
3. Track and field, skiing, skating .....	Yes ..... 1 No ..... 2 <i>IJOCTRAC</i>	→ ____ hrs ____ min <i>IJOCTHRS</i> <i>IJOCTMIN</i>	97
4. Other kinds of physical activity, for example, tag, hide and seek, riding a bicycle .....	Yes ..... 1 No ..... 2 <i>IJOCOTHR</i>	→ ____ hrs ____ min <i>IJOCOHRS</i> <i>IJOCOMIN</i>	97

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?

	(He/she) engages in?	How many hours and minutes per day?	D/K
1. Watching TV, videos .....	Yes ..... 1 No ..... 2 <i>IJWATCTV</i>	→ ____ hrs ____ min <i>IJWTVHRS</i> <i>IJWTVMIN</i>	97
2. Reading, music lessons, drawing, doing homework .....	Yes ..... 1 No ..... 2 <i>IJREADNG</i>	→ ____ hrs ____ min <i>IJREDHRS</i> <i>IJREDMIN</i>	97
3. Playing games or video games, either computer games or other games, with toy cars, dolls, construction sets, chess, checkers .....	Yes ..... 1 No ..... 2 <i>IJPLGAME</i>	→ ____ hrs ____ min <i>IJPLGHRS</i> <i>IJPLGMIN</i>	97

*IJHOW2S* 7.8.1 How does (he/she) get to school?

[**INTERVIEWER!** MARK ONLY ONE ANSWER ]

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

## 5. K.

*IJ2SHR* 7.8.2 How many total hours and minutes does it take (him/her) to go to school and return?

*IJ2SMN*

\_\_\_\_\_ hours \_\_\_\_\_ minutes → [ SKIP TO 9 ON PAGE 6 ]

*DOESN'T KNOW* ..... 97 → [ SKIP TO 9 ON PAGE 6 ]

*REFUSES TO ANSWER* ..... 98 → [ SKIP TO 9 ON PAGE 6 ]

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

Yes No D/K REFUSES

<i>IJTOOSML</i>	1. (He/she) will go to school in a year or two .....	1	2	7	8
<i>IJTOOILL</i>	2. (He/she) has poor health and cannot attend school .....	1	2	7	8
<i>IJEXPELL</i>	3. (He/she) was expelled from school .....	1	2	7	8
<i>IJHOMESC</i>	4. Family wants to give (him/her) home schooling .....	1	2	7	8
<i>IJNOSCHL</i>	5. No schools are close to home .....	1	2	7	8
<i>IJSCOTHR</i>	6. Other reasons .....	1	2	7	8

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

	(He/she) engages in it?	How many hours and minutes per week?	D/K
1. Karate, judo, gymnastics, tennis, swimming .....	Yes ..... 1 → _____ hrs _____ min No ..... 2 <i>IJNSKARA</i> <i>IJNSKMIN</i>	<i>IJNSKHRS</i>	97
2. Plays with a ball, goes skating, rides a bicycle .....	Yes ..... 1 → _____ hrs _____ min No ..... 2 <i>IJNSBALL</i> <i>IJNSBMIN</i>	<i>IJNSBHRS</i>	97
3. Dances, runs, jumps, plays hopscotch, hide and seek .....	Yes ..... 1 → _____ hrs _____ min No ..... 2 <i>IJNSDANC</i> <i>IJNSDMIN</i>	<i>IJNSDHRS</i>	97
4. Plays sitting: on a bench, in a sandbox .....	Yes ..... 1 → _____ hrs _____ min No ..... 2 <i>IJNSSITS</i> <i>IJNSSMIN</i>	<i>IJNSSHRS</i>	97

*IJNSPREG* 8.13 Does (he/she) regularly engage in physical activities and sports in a children's pre-school institution, at a sports club, or at home?

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

## 6. K.

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

	(He/she) engages in it?	How many hours and minutes per day?	D/K
1. Watching TV, videos .....	Yes ..... 1 → No ..... 2 <i>IJNSWATV</i>	____ hrs ____ min <i>IJNSWHRS</i> <i>IJNSWMIN</i>	97
2. Reading, or listening to what is read to him .....	Yes ..... 1 → No ..... 2 <i>IJNSREAD</i>	____ hrs ____ min <i>IJNSRHRS</i> <i>IJNSRMIN</i>	97
3. Playing games or video games, either computer games or others, with toy cars, dolls, construction sets, chess, checkers .....	Yes ..... 1 → No ..... 2 <i>IJNSGAME</i>	____ hrs ____ min <i>IJNSGHR</i> <i>IJNSGMIN</i>	97

- IJNFCARE* 9. Tell me, please, in the last 7 days did anyone look after [NAME OF CHILD] who is not a member of your household: friends, workers at a children's institution, school teachers, or relatives who live separately?

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

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

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

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

\_\_\_\_\_ days  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

- IJHRCARE* 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?  
*IJMRCARE*

\_\_\_\_\_ hours \_\_\_\_\_ minutes  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

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

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

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

\_\_\_\_\_ days  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

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

\_\_\_\_\_ hours \_\_\_\_\_ minutes  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

- IJOWNSCH* 16. Who owns the pre-school 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

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

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

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

\_\_\_\_\_ days  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

- IJHNCARE* 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?  
*IJMNCARE*

\_\_\_\_\_ hours \_\_\_\_\_ minutes  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

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

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

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

\_\_\_\_\_ rubles  
*DOESN'T KNOW* ..... 997  
*REFUSES TO ANSWER* ..... 998

## SECTION "MEDICAL SERVICES"

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

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

*IJLPRBLM* 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 ]

*IJHPRTYP* 6. Tell me, what were these problems?  
 (char)

\_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
*DOESN'T KNOW* ..... 7  
*REFUSES TO ANSWER* ..... 8

*IJTREABY* 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 ]

*IJCALLDR* 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 ]

*IJTYPMIN* 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

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

\_\_\_\_\_ hours \_\_\_\_\_ minutes  
*DOESN'T KNOW* ..... 997  
*REFUSES TO ANSWER* ..... 998

- IJTDRPAY* 11. 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 ]

- IJTDRAMT* 12. How much did (he/she) spend last time traveling to this medical institution?

\_\_\_\_\_ rubles  
*DOESN'T KNOW* ..... 997  
*REFUSES TO ANSWER* ..... 998

- IJTDRWAI* 13. 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 ]

- IJTDRHRW* 14. How much time did (he/she) spend last time waiting for the appointment?  
*IJTDRMNW*

\_\_\_\_\_ hours \_\_\_\_\_ minutes  
*DOESN'T KNOW* ..... 997  
*REFUSES TO ANSWER* ..... 998

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

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

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

	Did you pay?	How much in rubles?	D/K
1. Paid officially in the enterprises's cashier's office .....	Yes ... 1 →	_____	9997
	No ... 2	<i>IJAMTPVC</i>	
2. Gave money or gifts directly to the medical personnel .....	<i>IJPDVCSH</i> Yes ... 1 →	_____	9997
	No ... 2	<i>IJAMTPVP</i>	
		<i>IJPDVPSL</i>	

- IJADTEST* 17. 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 ]

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

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

19.1 Whom and how much did you pay?

	Did you pay?	How much in rubles?	D/K
1. Officially in the medical enterprises's cashier's office .....	Yes ... 1 → No ... 2	_____   <i>IJAMTPTC</i>	9997
2. Paid money or gifts directly to the personnel who performed the investigation or procedure .....	Yes ... 1 → No ... 2	_____   <i>IJAMTPTP</i>	9997
		<i>IJPDTC</i> <i>IJPDTPSL</i>	

*IJHOSL3M* 20. Has (he/she) been in the hospital in the last three months?

Yes ..... 1  
 No ..... 2 → [ SKIP TO 26 ON PAGE 11 ]  
*DOESN'T KNOW* ..... 7 → [ SKIP TO 26 ON PAGE 11 ]  
*REFUSES TO ANSWER* ..... 8 → [ SKIP TO 26 ON PAGE 11 ]

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

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*DOESN'T KNOW* ..... 7  
*REFUSES TO ANSWER* ..... 8

*IJHOSTYP* 22. 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  
*DOESN'T KNOW* ..... 7  
*REFUSES TO ANSWER* ..... 8

*IJDYSHOS* 23. How many days in total in the last three months was (he/she) in the hospital?

\_\_\_\_\_ days  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

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

Yes ..... 1  
 No ..... 2 → [ SKIP TO 25.1 ON PAGE 11 ]  
*DOESN'T KNOW* ..... 7 → [ SKIP TO 25.1 ON PAGE 11 ]  
*REFUSES TO ANSWER* ..... 8 → [ SKIP TO 25.1 ON PAGE 11 ]

- 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
1. For treatment and care, not counting payments for medicine, officially in the hospital cashier's office .....	Yes .... 1	→ [_____]	9997
	No ..... 2	IJAMTPHC IJPDHCSH	
2. For treatment and care, not counting payments for medicine, to doctors and other medical personnel with money or gifts .....	Yes .... 1	→ [_____]	9997
	No ..... 2	IJAMTPHP IJPDHPSL	

- IJPAYMED 25.1 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?

	Did you pay?	How much in rubles?	D/K
1. You paid <u>officially</u> to the cashier or the drug store of the hospital in which (he/she) stayed .....	Yes .... 1	→ [_____]	9997
	No ..... 2	IJAMTPMC IJPDMCSH	
2. You paid <u>unofficially</u> doctors or other medical personnel at the hospital in which (he/she) stayed with money or gifts .....	Yes .... 1	→ [_____]	9997
	No ..... 2	IJAMTPMP IJPDMPSL	
3. For (him/her) you bought <u>in the pharmacy of the hospital</u> in which (he/she) stayed medicine, syringes, and dressings .....	Yes .... 1	→ [_____]	9997
	No ..... 2	IJAMTPMD IJPDM DST	

- IJCHECKU 26. 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 ]

*IJCKTYP1* 28. Where did he/she go for a preventive examination or check-up the last time?

*IJCKTYP2*

*IJCKTYP3*

**[INTERVIEWER! IT IS POSSIBLE TO MARK SEVERAL ANSWERS.]**

- 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

*IJCKUWHO* 27. Who carried out this examination or check-up 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

*IJCKUPAY* 29. Did you pay for this preventive check-up, either with money or with gifts?

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

30.1 Whom and how much did you pay for this check-up?

- |  | Did<br>you pay? | How much<br>in rubles? | D/K  |
|--|-----------------|------------------------|------|
| 1. Paid officially in the cashier's office<br>of the medical institute . . . . .     | Yes . . . 1 →   | _____                  | 9997 |
|  | No . . . 2      | <i>IJAMTPCC</i>        |      |
|  |                 | <i>IJPDCCSH</i>        |      |
| 2. Paid doctors or other medical personnel<br>directly with money or gifts . . . . . | Yes . . . 1 →   | _____                  | 9997 |
|  | No . . . 2      | <i>IJAMTPCP</i>        |      |
|  |                 | <i>IJPDPCPSL</i>       |      |

*IJMEDLMO* 33. 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 → [ 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 ]

*IJFINMED* 34. Were you able to find or buy any of these medicines?

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

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

		Yes	No	D/K	REFUSES
<i>IJMEDDRO</i>	1. At the physician's who prescribed or recommended the medicine .....	1	2	7	8
<i>IJMEDSTA</i>	2. In a state pharmacy .....	1	2	7	8
<i>IJMEDPRI</i>	3. In a non-state pharmacy .....	1	2	7	8
<i>IJMEDIND</i>	4. From individuals .....	1	2	7	8
<i>IJMEDOTH</i>	5. At some other place .....	1	2	7	8

*IJDISMED* 36. Tell me, please, was (he/she) entitled to a discount on these medicines?

Yes ..... 1  
 No ..... 2 → [ SKIP TO 38 ]  
*DOESN'T KNOW* ..... 7 → [ SKIP TO 38 ]  
*REFUSES TO ANSWER* ..... 8 → [ SKIP TO 38 ]

*IJSIZDIS* 37. How much of a discount was (he/she) entitled to, what percent?

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

*IJPAIDPR* 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 ]

*IJPRAMNT* 39. How much did you pay for these medicines?

\_\_\_\_\_ rubles  
*DOESN'T KNOW* ..... 997  
*REFUSES TO ANSWER* ..... 998

*IJNOLOCM* 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
<i>IJMNOTIM</i>	1. Didn't have time to buy them .....	1	2	7	8
<i>IJMNOFIN</i>	2. Couldn't find them in a pharmacy .....	1	2	7	8
<i>IJMNONOMON</i>	3. Didn't have enough money .....	1	2	7	8
<i>IJMNOWAN</i>	4. Didn't want to buy them .....	1	2	7	8
<i>IJMNOCAN</i>	5. Physically couldn't buy them myself and there was no one else to do it .....	1	2	7	8

*IJEVRVAC* 42. Tell me, please, has (he/she) at any time had any kind of vaccination?

Yes ..... 1  
 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
<i>IJVACTUB</i>	1. Tuberculosis	1	2	7	8
<i>IJVACMEA</i>	2. Measles	1	2	7	8
<i>IJVCADS1</i>	3. Diphtheria, whooping cough, tetanus AKDS/ADS 1	1	2	7	8
<i>IJVCADS2</i>	4. Diphtheria, whooping cough, tetanus AKDS/ADS 2	1	2	7	8
<i>IJVCADS3</i>	5. Diphtheria, whooping cough, tetanus AKDS/ADS 3	1	2	7	8
<i>IJVCPOL1</i>	6. Polio 1 <sup>st</sup> time	1	2	7	8
<i>IJVCPOL2</i>	7. Polio 2 <sup>nd</sup> time	1	2	7	8
<i>IJVCPOL3</i>	8. Polio 3 <sup>rd</sup> time	1	2	7	8
<i>IJVACHEP</i>	9. Hepatitis	1	2	7	8
<i>IJVMUMP</i>	10. Mumps	1	2	7	8
<i>IJVMENIN</i>	12. Meningitis	1	2	7	8
<i>IJVACOTH</i>	11. Other illness	1	2	7	8

*IJVACL3M* 44. Please remember, has (he/she) had any vaccinations in the last three months?

Yes ..... 1  
 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
<i>IJVL3TUB</i>	1. Tuberculosis	1	2	7	8
<i>IJVL3MEA</i>	2. Measles	1	2	7	8
<i>IJVL3AD1</i>	3. Diphtheria, whooping cough, tetanus AKDS/ADS 1	1	2	7	8
<i>IJVL3AD2</i>	4. Diphtheria, whooping cough, tetanus AKDS/ADS 2	1	2	7	8
<i>IJVL3AD3</i>	5. Diphtheria, whooping cough, tetanus AKDS/ADS 3	1	2	7	8
<i>IJVL3PO1</i>	6. Polio 1 <sup>st</sup> time	1	2	7	8
<i>IJVL3PO2</i>	7. Polio 2 <sup>nd</sup> time	1	2	7	8
<i>IJVL3PO3</i>	8. Polio 3 <sup>rd</sup> time	1	2	7	8
<i>IJVL3HEP</i>	9. Hepatitis	1	2	7	8
<i>IJVL3MUM</i>	10. Mumps	1	2	7	8
<i>IJVL3MEN</i>	12. Meningitis	1	2	7	8
<i>IJVL3OTH</i>	11. Other illness	1	2	7	8

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

		Yes	No	D/K	REFUSES
<i>IJVPOLY</i>	1. In a children's or maternity hospital	1	2	7	8
<i>IJVCHOSP</i>	2. In a polyclinic	1	2	7	8
<i>IJVCCCLI</i>	3. In a hospital	1	2	7	8
<i>IJVCDOCT</i>	4. At a private doctor	1	2	7	8
<i>IJVCSCO</i>	5. At school	1	2	7	8
<i>IJVCKIND</i>	6. At a kindergarten or nursery	1	2	7	8
<i>IJVCOTHR</i>	7. In another place	1	2	7	8

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

Yes	1
No	2 → [ SKIP TO 49 ]
<i>DOESN'T KNOW</i>	7 → [ SKIP TO 49 ]
<i>REFUSES TO ANSWER</i>	8 → [ SKIP TO 49 ]

*IJAMTVAC* 48. How much did you pay?

_____ rubles	
<i>DOESN'T KNOW</i>	997
<i>REFUSES TO ANSWER</i>	998

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

Yes	1
No	2 → [ SKIP TO NEXT SECT. PAGE 16 ]
<i>DOESN'T KNOW</i>	7 → [ SKIP TO NEXT SECT. PAGE 16 ]
<i>REFUSES TO ANSWER</i>	8 → [ SKIP TO NEXT SECT. PAGE 16 ]

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

Too expensive	1
No transportation to 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
<i>DOESN'T KNOW</i>	7
<i>REFUSES TO ANSWER</i>	8

## SECTION "HEALTH EVALUATION"

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

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

\_\_\_\_\_ KG  
*DOESN'T KNOW* ..... 997  
*REFUSES TO ANSWER* ..... 998

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

\_\_\_\_\_ CM  
*DOESN'T KNOW* ..... 997  
*REFUSES TO ANSWER* ..... 998

*IJWTCHNG* 2.1 Tell me, please, how has (his/her) weight changed over the last year?

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

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

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

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

	Yes	No	D/K	REFUSES
<i>IJCHEART</i> 1. Heart disease	1	2	7	8
<i>IJCLUNGS</i> 2. Illness of the lungs	1	2	7	8
<i>IJCLIVER</i> 3. Liver disease	1	2	7	8
<i>IJCKIDNY</i> 4. Kidney disease	1	2	7	8
<i>IJCGI</i> 5. Gastrointestinal disease	1	2	7	8
<i>IJCSPINE</i> 6. Spinal problems	1	2	7	8
<i>IJCNASOP</i> 8. Nasopharynx disease	1	2	7	8
<i>IJCOTHER</i> 7. Other chronic illnesses	1	2	7	8

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

Yes ..... 1  
 No ..... 2 → [ SKIP TO 62.1 ON PAGE 17 ]  
*DOESN'T KNOW* ..... 7 → [ SKIP TO 62.1 ON PAGE 17 ]  
*REFUSES TO ANSWER* ..... 8 → [ SKIP TO 62.1 ON PAGE 17 ]

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

In | \_\_\_\_ | \_\_\_\_ | \_\_\_\_ | \_\_\_\_ | year  
*DOESN'T KNOW* ..... 7  
*REFUSES TO ANSWER* ..... 8

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

		Yes	No	D/K	REFUSES
<i>IJDCDIET</i>	1. Special diet . . . . .	1	2	7	8
<i>IJDCWCON</i>	2. Weight control . . . . .	1	2	7	8
<i>IJDCORAL</i>	3. Pills . . . . .	1	2	7	8
<i>IJDCSHOT</i>	4. Insulin shots . . . . .	1	2	7	8
<i>IJDCHERB</i>	5. Herbal treatment . . . . .	1	2	7	8
<i>IJDCHOME</i>	6. Homeopathic treatment . . . . .	1	2	7	8
<i>IJDCOTHR</i>	7. Something else . . . . .	1	2	7	8

*IJEVERTB* 62.1 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 ]

*IJYEARTB* 62.2 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

*IJEVERHP* 62.3 Has (he/she) ever been diagnosed with “hepatitis,” “Hodgkin’s disease,” or “jaundice”?

Yes . . . . . 1  
 No . . . . . 2 → [ SKIP TO 67 ]  
*DOESN'T KNOW* . . . . . 7 → [ SKIP TO 67 ]  
*REFUSES TO ANSWER* . . . . . 8 → [ SKIP TO 67 ]

*IJYEARHP* 62.4 In what year was (he/she) diagnosed with “hepatitis,” “Hodgkin’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

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

Hepatitis A . . . . . 1  
 Hepatitis B . . . . . 2  
 Hepatitis C . . . . . 3  
*OTHER* . . . . . 4  
*DOESN'T KNOW* . . . . . 7  
*REFUSES TO ANSWER* . . . . . 8

*IJDRKTEA* 67. Does (he/she) drink tea?

Yes . . . . . 1  
 No . . . . . 2 → [ SKIP TO 69 ON PAGE 18 ]  
*DOESN'T KNOW* . . . . . 7 → [ SKIP TO 69 ON PAGE 18 ]  
*REFUSES TO ANSWER* . . . . . 8 → [ SKIP TO 69 ON PAGE 18 ]

*IJFRETEA* 68. **How often in 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

*IJDRKCOF* 69. **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 ]

*IJFRECOF* 70. **How often in 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

*IJCOUGHS* 96. **Tell me, please, in the last 7 days has (he/she) had a cough?**

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

*IJCONGES* 97. **Tell me, in the last 7 days has (he/she) had a cold, perhaps a runny or stuffy nose?**

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

*IJEARACH* 98. **In the last 7 days has (he/she) had an earache?**

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

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

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

*IJTEETHI* 100. Tell me, please, in the last 7 days has (he/she) been teething?

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

*IJDIARRH* 101. Tell me, please, in the last 7 days has (he/she) had diarrhea?

Yes ..... 1  
 No ..... 2 → [ SKIP TO **109** ON PAGE **20** ]  
*DOESN'T KNOW* ..... 7 → [ SKIP TO **109** ON PAGE **20** ]  
*REFUSES TO ANSWER* ..... 8 → [ SKIP TO **109** ON PAGE **20** ]

*IJDIARDY* 102. How many days in the last 7 has (he/she) had diarrhea?

\_\_\_\_\_ days  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

*IJBMTIME* 103. Tell me, please, in the last 24 hours how often has (he/she) had a bowel movement?

\_\_\_\_\_ times  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

*IJMUCUSS* 104. In the last 7 days have you noticed mucus in (his/her) stool (whitish or some other color)?

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

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

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

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

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

*IJVOMITS* 107. Tell me, please, since the diarrhea started, has (he/she) thrown up?

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

*IJABPAIN* 108. Since the diarrhea started, has (he/she) had pain in the abdominal cavity: in the abdomen, large or small intestine, stomach?

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

*IJLEUKEM* 109. **Has (he/she) had leukemia?**

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

**[INTERVIEWER! RETURN TO QUESTION A ON PAGE 1 AND VERIFY THE SEX AND BIRTH YEAR OF THE CHILD UNDER DISCUSSION. ASK QUESTIONS 110-111 IF THE CHILD IS A GIRL BORN IN 1990 OR EARLIER. FOR ALL OTHERS, SKIP TO QUESTION 115. ]**

*IJEVRMEN* 110. **Tell me, please, has she ever menstruated?**

Yes ..... 1  
 No ..... 2 → [ SKIP TO 115 ]  
*DOESN'T KNOW* ..... 7 → [ SKIP TO 115 ]  
*REFUSES TO ANSWER* ..... 8 → [ SKIP TO 115 ]

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

| \_\_\_\_ | \_\_\_\_ | years  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

115. **[INTERVIEWER! QUESTIONS 115-128 ON PAGES 20-23 SHOULD BE ANSWERED BY THE CHILD (HIMSELF/HERSELF). ]**

**[INTERVIEWER! RETURN TO QUESTION A ON PAGE 1. ASK QUESTIONS 115-128 ONLY OF CHILDREN WHO WERE BORN IN 1995 OR EARLIER. THE REMAINING CHILDREN (WHO WERE BORN IN 1996 OR LATER) SHOULD BE ASKED THE QUESTIONS IN THE NEXT SECTION ON PAGE 24. ]**

*IJRSHAPE* **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!]**

IF YOU ARE SPEAKING WITH A GIRL BORN BETWEEN **1990 AND 1995** USE ENVELOPE NO. 1 WITH DRAWINGS 1-9.

IF YOU ARE SPEAKING WITH A GIRL BORN BETWEEN **1988 AND 1989** USE ENVELOPE NO. 2 WITH DRAWINGS 10-18.

IF YOU ARE SPEAKING WITH A BOY BORN BETWEEN **1990 AND 1995** USE ENVELOPE NO. 3 WITH DRAWINGS 19-27.

IF YOU ARE SPEAKING WITH A BOY BORN BETWEEN **1988 AND 1989** USE ENVELOPE NO. 4 WITH DRAWINGS 28-36.

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

NUMBER OF THE DRAWING | \_\_\_\_ | \_\_\_\_ |  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

- IJWSHAPE* 116. Which of these drawings would you want your figure to look like? Tell me the number of the drawing.

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

NUMBER OF THE DRAWING | \_\_\_\_ | \_\_\_\_ |  
*DOESN'T KNOW* ..... 97  
*REFUSES TO ANSWER* ..... 98

- IJDIETLY* 117. 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

- IJWTOPIN* 118. Do you think at the present time that you are under-weight, have a normal weight, or are over-weight?

*UNDER-WEIGHT* ..... 1  
*NORMAL WEIGHT* ..... 2  
*OVER-WEIGHT* ..... 3  
*DOESN'T KNOW* ..... 7  
*REFUSES TO ANSWER* ..... 8

- IJACOPIN* 119. 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

- IJTVRSTR* 120. Are you restricted from watching television at home: for example, are you not allowed to watch certain programs or forbidden to sit in front of the television for long periods?

There are never any restrictions ..... 1  
 Sometimes there are restrictions ..... 2  
 There are always restrictions ..... 3  
*DOESN'T KNOW* ..... 7  
*REFUSES TO ANSWER* ..... 8

*IJCHANNL* 121. Which television channel do you most like to watch? Choose one favorite channel.

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

*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: ]**

*IJCHANNT*  
 (char)

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

*IJPROGRM* 122. Which television program do you most like to watch? Choose only one favorite program.

**[INTERVIEWER! WRITE THE NAME OF THE PROGRAM ]**

LIKES ALL ALIKE ..... 6 → [ SKIP TO 124 ]  
 DOESN'T KNOW ..... 7 → [ SKIP TO 124 ]  
 REFUSES TO ANSWER ..... 8 → [ SKIP TO 124 ]

*IJPTYPE* 123. What type of program do you consider your favorite?

Sports ..... 01  
 Music ..... 02  
 News programs ..... 03  
 Cartoons ..... 04  
 Talk shows ..... 05  
 Artistic films ..... 06  
 Entertainment programs ..... 07  
 Popular science, educational programs .... 08  
 Advertisements ..... 09  
 Soap operas ..... 10  
*OTHER* ..... 96  
 DOESN'T KNOW ..... 97  
 REFUSES TO ANSWER ..... 98

*IJTVADS* 124. Do you watch the advertisements for goods and movies that are sometimes shown on television?

Always watch ..... 1  
 Sometimes watch ..... 2  
 Never watch ..... 3 → [ SKIP TO 128 ON PAGE 23 ]  
 DOESN'T KNOW ..... 7 → [ SKIP TO 128 ON PAGE 23 ]  
 REFUSES TO ANSWER ..... 8 → [ SKIP TO 128 ON PAGE 23 ]

*IJLIKEAD* 125. **How much do you like the advertisements for goods and services shown on television?**

Completely dislike . . . . . 1  
 Like some, dislike others . . . . . 2  
 Like very much . . . . . 3  
*DOESN'T KNOW* . . . . . 7  
*REFUSES TO ANSWER* . . . . . 8

*IJABUYAD* 126. **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  
 No . . . . . 2 → [ SKIP TO **128** ]  
*BUY FOR MYSELF* . . . . . 6 → [ SKIP TO **128** ]  
*DOESN'T KNOW* . . . . . 7 → [ SKIP TO **128** ]  
*REFUSES TO ANSWER* . . . . . 8 → [ SKIP TO **128** ]

*IJBUYAD* 127. **Do they buy you what you ask for?**

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

*IJTVIDOL* 128. **You see many people on the television screen. Is there someone among them whom you especially like, whom you want to be like? Who is this person you have seen on television?**  
 (char)

**[INTERVIEWER! WRITE THE NAME AND RECORD THE CORRESPONDING NUMBER FROM THE LIST BELOW. IF YOU DO NOT KNOW THE NAMED PERSON, ASK THE RESPONDENT TO CLARIFY ]**

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*IJIDOLCD* *RUSSIAN POLITICIAN* . . . . . 01  
*RUSSIAN TELEVISION PERSONALITY* . . . . . 02  
*RUSSIAN ACTOR/ACTRESS OR SINGER* . . . . . 03  
*FOREIGN ACTOR/ACTRESS OR SINGER* . . . . . 04  
*RUSSIAN SPORTS FIGURE* . . . . . 05  
*FOREIGN SPORTS FIGURE* . . . . . 06  
*LAWYER, DOCTOR, TEACHER* . . . . . 07  
*BUSINESSMAN* . . . . . 08  
*SOMEONE ELSE* . . . . . 09  
*DOESN'T KNOW* . . . . . 97  
*REFUSES TO ANSWER* . . . . . 98


*SEX*

*DAY OF  
BIRTH*

*MONTH OF  
BIRTH*

*YEAR OF  
BIRTH*

**“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”

- IJYUSUAL*      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:**

Yes      No      *D/K*      *REFUSES*

<i>IJDIETDR</i>	1. Doctor’s recommendation .....	1	.....	2	.....	7	.....	8
<i>IJDIETSP</i>	2. Observing a special diet .....	1	.....	2	.....	7	.....	8
<i>IJDIETRE</i>	3. Religious practices .....	1	.....	2	.....	7	.....	8

- IJVITYES*      3. **Did (he/she) take multi-vitamins yesterday?**

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

**25. P.**

	Time first served	Place where food was consumed	Product, dish, or beverage: Name, composition, cooking method, portion size, etc.	Home-cooked or not home-cooked	Amount (g, ml)	Type of food consumed	Code
	1	2		3	4	4.1	5
1.	<div> <div> <div>Home or as a guest . . . . 1</div> <div>Public eatery . . . . . 2</div> <div>Nursery or school . . . . 3</div> <div>Workplace . . . . . 4</div> <div>Other place . . . . . 5</div> </div> <div> <div>PLACE</div> </div> </div>		<div> <div>Home-cooked . . . . . 1</div> <div>Not home-cooked . . . . . 2</div> </div> <div> <div>PREPPLCE</div> </div>	GRAMS	<div> <div>Breakfast . . . . 1</div> <div>Dinner . . . . . 2</div> <div>Supper . . . . . 3</div> <div>Snack . . . . . 4</div> <div>Other . . . . . 5</div> </div> <div> <div>MEALTYPE</div> </div>	<div> <div>FOODCODE</div> </div>	
2.	<div> <div> <div>Home or as a guest . . . . 1</div> <div>Public eatery . . . . . 2</div> <div>Nursery or school . . . . 3</div> <div>Workplace . . . . . 4</div> <div>Other place . . . . . 5</div> </div> <div> <div>PLACE</div> </div> </div>		<div> <div>Home-cooked . . . . . 1</div> <div>Not home-cooked . . . . . 2</div> </div> <div> <div>PREPPLCE</div> </div>	GRAMS	<div> <div>Breakfast . . . . 1</div> <div>Dinner . . . . . 2</div> <div>Supper . . . . . 3</div> <div>Snack . . . . . 4</div> <div>Other . . . . . 5</div> </div> <div> <div>MEALTYPE</div> </div>	<div> <div>FOODCODE</div> </div>	
3.	<div> <div> <div>Home or as a guest . . . . 1</div> <div>Public eatery . . . . . 2</div> <div>Nursery or school . . . . 3</div> <div>Workplace . . . . . 4</div> <div>Other place . . . . . 5</div> </div> <div> <div>PLACE</div> </div> </div>		<div> <div>Home-cooked . . . . . 1</div> <div>Not home-cooked . . . . . 2</div> </div> <div> <div>PREPPLCE</div> </div>	GRAMS	<div> <div>Breakfast . . . . 1</div> <div>Dinner . . . . . 2</div> <div>Supper . . . . . 3</div> <div>Snack . . . . . 4</div> <div>Other . . . . . 5</div> </div> <div> <div>MEALTYPE</div> </div>	<div> <div>FOODCODE</div> </div>	
4.	<div> <div> <div>Home or as a guest . . . . 1</div> <div>Public eatery . . . . . 2</div> <div>Nursery or school . . . . 3</div> <div>Workplace . . . . . 4</div> <div>Other place . . . . . 5</div> </div> <div> <div>PLACE</div> </div> </div>		<div> <div>Home-cooked . . . . . 1</div> <div>Not home-cooked . . . . . 2</div> </div> <div> <div>PREPPLCE</div> </div>	GRAMS	<div> <div>Breakfast . . . . 1</div> <div>Dinner . . . . . 2</div> <div>Supper . . . . . 3</div> <div>Snack . . . . . 4</div> <div>Other . . . . . 5</div> </div> <div> <div>MEALTYPE</div> </div>	<div> <div>FOODCODE</div> </div>	
5.	<div> <div> <div>Home or as a guest . . . . 1</div> <div>Public eatery . . . . . 2</div> <div>Nursery or school . . . . 3</div> <div>Workplace . . . . . 4</div> <div>Other place . . . . . 5</div> </div> <div> <div>PLACE</div> </div> </div>		<div> <div>Home-cooked . . . . . 1</div> <div>Not home-cooked . . . . . 2</div> </div> <div> <div>PREPPLCE</div> </div>	GRAMS	<div> <div>Breakfast . . . . 1</div> <div>Dinner . . . . . 2</div> <div>Supper . . . . . 3</div> <div>Snack . . . . . 4</div> <div>Other . . . . . 5</div> </div> <div> <div>MEALTYPE</div> </div>	<div> <div>FOODCODE</div> </div>	
6.	<div> <div> <div>Home or as a guest . . . . 1</div> <div>Public eatery . . . . . 2</div> <div>Nursery or school . . . . 3</div> <div>Workplace . . . . . 4</div> <div>Other place . . . . . 5</div> </div> <div> <div>PLACE</div> </div> </div>		<div> <div>Home-cooked . . . . . 1</div> <div>Not home-cooked . . . . . 2</div> </div> <div> <div>PREPPLCE</div> </div>	GRAMS	<div> <div>Breakfast . . . . 1</div> <div>Dinner . . . . . 2</div> <div>Supper . . . . . 3</div> <div>Snack . . . . . 4</div> <div>Other . . . . . 5</div> </div> <div> <div>MEALTYPE</div> </div>	<div> <div>FOODCODE</div> </div>	
7.	<div> <div> <div>Home or as a guest . . . . 1</div> <div>Public eatery . . . . . 2</div> <div>Nursery or school . . . . 3</div> <div>Workplace . . . . . 4</div> <div>Other place . . . . . 5</div> </div> <div> <div>PLACE</div> </div> </div>		<div> <div>Home-cooked . . . . . 1</div> <div>Not home-cooked . . . . . 2</div> </div> <div> <div>PREPPLCE</div> </div>	GRAMS	<div> <div>Breakfast . . . . 1</div> <div>Dinner . . . . . 2</div> <div>Supper . . . . . 3</div> <div>Snack . . . . . 4</div> <div>Other . . . . . 5</div> </div> <div> <div>MEALTYPE</div> </div>	<div> <div>FOODCODE</div> </div>	

## SECTION “MEDICAL MEASUREMENTS”

*IJLEGAMP* 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 ]*

*IJARMAMP* 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 ]*

*IJHEIGHT* 3. **Height**

**INTERVIEWER!** MAKE SURE RESPONDENTS TAKE OFF THEIR SHOES ]

\_\_\_\_\_ cm

*IJWEIGHT* 4. **Weight**

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

\_\_\_\_\_ kg

*IJWAISTC* 5. **Waist circumference**

\_\_\_\_\_ cm

*IJHIPSIZ* 6. **Hip circumference**

\_\_\_\_\_ cm

## SECTION "INTERVIEWER'S REMARKS"

1. [NOTE IF ANYONE WAS PRESENT DURING THE INTERVIEW, EVEN IF ONLY FOR A FEW MINUTES:
- |                 |   | YES | NO  |
|-----------------|---|-----|-----|
| <i>IJHHPRES</i> | 1. SOME OTHER MEMBER OF THE HOUSEHOLD .....         | 1   | 2   |
| <i>IJOTPRES</i> | 2. OTHER PEOPLE, NOT MEMBERS OF THIS HOUSEHOLD .... | 1   | 2 ] |
- IJRESATT* 2. [ASSESS THE RESPONDENT'S ATTITUDE TOWARD THE INTERVIEW. THE RESPONDENT WAS:
- |  |     |
|--|-----|
| <i>FRIENDLY, INTERESTED</i> .....        | 1   |
| <i>NOT PARTICULARLY INTERESTED</i> ..... | 2   |
| <i>IMPATIENT, WORRIED</i> .....          | 3   |
| <i>HOSTILE</i> .....                     | 4 ] |
- IJRESUND* 3. [NOTE HOW THE RESPONDENT UNDERSTOOD THE QUESTIONS:
- |                            |     |
|----------------------------|-----|
| <i>WELL</i> .....          | 1   |
| <i>NOT VERY WELL</i> ..... | 2   |
| <i>POORLY</i> .....        | 3 ] |
- IJRESBEH* 4. [ASSESS THE RESPONDENT'S BEHAVIOR DURING THE INTERVIEW. THE RESPONDENT:
- |                                       |     |
|---------------------------------------|-----|
| <i>WAS NERVOUS</i> .....              | 1   |
| <i>WAS OCCASIONALLY NERVOUS</i> ..... | 2   |
| <i>FELT COMFORTABLE</i> .....         | 3 ] |
- IJRESRES* 5. [ASSESS THE RESPONDENT'S SHARPNESS. THE RESPONDENT WAS:
- |                                     |     |
|-------------------------------------|-----|
| <i>VERY SLOW-WITTED</i> .....       | 1   |
| <i>SLOW-WITTED, NEEDED</i>          |     |
| <i>EXPLANATIONS</i> .....           | 2   |
| <i>AS BRIGHT AS THE MAJORITY OF</i> |     |
| <i>RESPONDENTS</i> .....            | 3   |
| <i>NOTABLY BRIGHTER THAN THE</i>    |     |
| <i>MAJORITY</i> .....               | 4 ] |
- IJRESSIN* 6. [ASSESS THE SINCERITY AND OPENNESS OF THE RESPONDENT. THE RESPONDENT WAS:
- |  |     |
|--|-----|
| <i>VERY INTROVERTED, INSINCERE</i> ..... | 1   |
| <i>AS SINCERE AND OPEN AS MOST</i>       |     |
| <i>RESPONDENTS</i> .....                 | 2   |
| <i>MORE SINCERE AND OPEN</i>             |     |
| <i>THAN MOST</i> .....                   | 3 ] |
- IJFDRELY* 7. [ASSESS WHETHER IN YOUR OPINION THE INFORMATION GIVEN ABOUT FOOD CONSUMPTION IS RELIABLE:
- |                                  |     |
|----------------------------------|-----|
| <i>RELIABLE</i> .....            | 1   |
| <i>INFORMATION INADEQUATE TO</i> |     |
| <i>ASSESS</i> .....              | 2   |
| <i>NOT RELIABLE</i> .....        | 3 ] |

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

Signature \_\_\_\_\_