

The Republic of Iraq

For eradication of poverty and enhancing the socio-economic status of the Households in Iraq

The Ministry of Planning and Development Cooperation
Central Organization for Statistics and Information Technology
(COSIT)



In cooperation with the Kurdistan Regional Statistical Commission (KRSCO)

Household Socio-Economic Survey in Iraq (IHSES) 2007 - 2006

Part No. 1: Socio-Economic Data

HOUSEHOLD ID			
05	04		
HH	CLUSTER		

03 INT	02 TEAM		01 WAVE	
(1 - 3)			(1 - 18)	

B. HOUSEHOLD IDENTIFICATION		
	Head of household name	15
	Work Address	16
	Number of households in Dwelling	17
	Household Size	18
	Telephone Number	19
	Work Telephone	20
	Numerical Form for this household	21
	Number of this Form	22

Code		A. FIRST IDENTIFICATION	
		Governorate	06
		Qadha'	07
		Area	08
		Quarters	09
		Alley (Street)	10
		District	11
		village	12
Draw a circle around the corresponding number			Class
Baghdad Suburban 2 Rural 1 Urban / Central Al-Rasafah 4 Al-Sader City 3 Al-Karekh 5		Provinces Rural 1 Suburban 2 Urban / Central 3	
			Building census No
			14

Date	Code	Signature	C. FIELD STAFF	
0_/_/0_	24		Interviewer	23
0_/_/0_	27	26	Team leader	25
0_/_/0_	30	29	Data Entry operator	28
0_/_/0_	33	32	Central Supervisor	31

Date of Visit	D. RECORD OF VISITS	
0_/_/0_	First Visit	35
0_/_/0_	Second Visit	36
0_/_/0_	Third Visit	37
0_/_/0_	Fourth Visit	38
0_/_/0_	Fifth Visit	39

RESULT OF THE INTERVIEW		34
1	Fully Achieved	
2	Partially Achieved	
3	No usable Information	
4	Unaccomplished: Household refused interview	
5	Unaccomplished: Household not present	
6	Unaccomplished: House not found	
7	Unaccomplished: Housing unit not occupied	
8	Unaccomplished: Housing unit is seasonal	

No	2	Yes	1	Has the Household been include in MICS3 Survey?	40
Draw a circle around the correct answer					
For the Researcher: Please double check against families included in the MICS3 Survey					

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4	Section Two: Received Supplies Rations & Consumption of Provisions & the like
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16	Section Five: Health
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24	Section Seven: Job search and past employment

Notes

Signature	Comments	Job Title	Notes Taker	Date	Serial
				0_ / _ _ /	1
				0_ / _ _ /	2
				0_ / _ _ /	3
				0_ / _ _ /	4
				0_ / _ _ /	5
				0_ / _ _ /	6
				0_ / _ _ /	7
				0_ / _ _ /	8
				0_ / _ _ /	9
				0_ / _ _ /	10
				0_ / _ _ /	11
				0_ / _ _ /	12
				0_ / _ _ /	13
				0_ / _ _ /	14
				0_ / _ _ /	15

Number of 'collection' lines in this page

Section One: Household Roster

104 Date of Birth What is the date of birth of ..[name]..			103 Age in Full Years If less than one year, write (0)	102 Gender Male 1 Female 2	101 Name Write the name the Head of the Household first, followed by the name of the husband / wife then the children as per age (the ones who are unmarried first, then the ones who are married with their families...husband / wife and their children) then the name of the father / mother, then the brother / sister then the other relatives then those who are not related to the Household	ID CODE
Year	Month	Day	Year			
						01
						02
						03
						04
						05
						06
						07
						08
						09
						10
						11
						12
						13
						14
						15
						16
						17
						18

Section One: Household Roster

Exclusive for Household Members that are 12 years of age or older		107		106	105	Individual's Code
109 SPOUSE'S ID CODE	108 Marital Status	In which province was ...[name] born? And in what environment? Governorate Code		Was ...[name]... born in this province?	What is ...[NAME]... relationship to the head of the household?	
If more then one wife, write the name of the one living within the Household. If more than one wife within the Household, write the name of the first one	Married 1	Waset 26	Dhouk 11	Yes 1 107 B ◀	Wife/ Husband 2	3
	110 • Never Married 2	Salah-Eddin 27	Arbeel, Kurdistan Reg 15		Son/Daughter -In-Law 4	
If the husband or wife were not members of the household, Code 98	110 • Divorced 3	Al-Najaf 28	Al-Salmaniyyah 13	No 2	Grandchild 5	6
	110 • Separated 4	Al-Qadisiyyah 31	Ninwi 12		Mother Or Father 6	
	110 • Widow 5	Al-Muthannah 32	Karkouk 14		Sister Or Brother 7	8
		Thi-Qar 33	Diyali 21		Other Relatives 8	
		Misan 34	Al-Anbar 22		Unrelated To The Household 9	9
		Basra 35	Baghdad 23			
		Other Country 90	Babel 24			
			Karbala' 25			
		107 B Environment Urban - 1 Rural- 2	107 A Province Code			
						01
						02
						03
						04
						05
						06
						07
						08
						09
						10
						11
						12
						13
						14
						15
						16
						17
						18

Section One: Household Roster

114	113	112	111	110	Individual's Code
What is the main reason for the absence of the ...[name].. during the last 12 months away from home?	How many months has ...[name] been absent during last 12 months from the household?	Has [name] been absent from home for one month or more during last 12 months	What is the code of the father of [name]	what is the code of the mother of [name]	
Education 01		yes 1	If the father is deceased (dead) 99	If the mother is deceased (dead) Code 99	
Work 02		no 2			
Health Reasons 03		Next Person ◀	If the father was not a member of the Household Code 98	If the mother was not a member of the Household Code 98	
Visiting Friends or Relatives 04					
Family Problems 05					
Birth 06					
Jail 07					
Tourism 08					
Escorting a patient 09					
Other [name them] 10					
	Months				
					01
					02
					03
					04
					05
					06
					07
					08
					09
					10
					11
					12
					13
					14
					15
					16
					17
					18

Rations received A

4 / 26

Section Two: Received Supplies Rations & Consumption of Provisions & the like

Consumption of ration items and similar during the past 30 days .B

221	220	219	218	217	216	215	214	ITEM CODE
How much of the ...[ITEM]... you consumed was produced by the household? Write "Zero" for None	How much of the ...[ITEM]... you consumed was received as a gift? Write "Zero" for None	Why was this purchase of ...[ITEM]...made? Supply ration insufficient 1 Supply ration & other sources insufficient 2 wanted better quality than rations 3 other 4	What was the total value of the...[ITEM]... you purchased? ((the value of incoming quantities in 216 + 217)?	How much of the ...[ITEM]....you consumed was purchased from the market? Write "Zero" for None	How much of ITEM consumed was purchased from the ration items sold on the market? Write "Zero" for None	How much of this ...[ITEM]:: consumed was received as part of your ration? Write "Zero" for None	How much ...[ITEM].. did this household consume during the past 30 days? Write "Zero" for None and move on to the next item	
Quantity	Quantity	Code	1000 Din Dinars	Quantity	Quantity	Quantity	Quantity	
								01
								02
								03
								04
								05
								06
								07
								08
								09
								10
								11
								12
								13
								14
								99

Section Two: Received Supplies Rations & Consumption of Provisions & the like

Rations received A

Ask Questions 205 - 221 For Each Material		Material Code
Unit	Material	
Kg.	Wheat flour	01
Kg.	Rice	02
Kg.	Sugar	03
Kg.	Oil or Vegetables Fat	04
Kg.	Chick Peas	05
Kg.	White Beans	06
Kg.	Lentils	07
Kg.	Tea	08
Kg.	Powder Milk	09
Kg.	Salt	10
Kg.	Soap	11
Kg.	Detergents	12
Kg.	Baby Powder Milk	13
Kg.	Children Nutrients	14
Kg.		
Kg.		
Kg.		
Kg.		
Kg.		
	Total	99

Does the household receive its rations via a "Ration Card"? 201

Yes 1

Part B ◀ No 2

How many "Rations Cards" does the household have? 202

How many household members are recorded in the ration card / cards for this household? 203

Total C	Children under 1 year of age B	household members of 1 year or more A
Number	Number	Number
<input type="text"/>	<input type="text"/>	<input type="text"/>

What is the total cost paid by the HH, including bags and transportation? 204

Total D	Transport Cost to Place of Residence C	Value of Sacs/bags B	Value of Provisions Rations A
1000 Dinar	1000 Dinar	1000 Dinar	1000 Dinar
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Section Three: Housing

PARTS OF THE HOUSING UNIT USED BY THE HOUSEHOLD				Serial
How many rooms [describe types] do you have for		Parts		
Jointly with other households	Specific to the household			
310	309			
No.	No.			
<input type="checkbox"/>	<input type="checkbox"/>	Bedroom	01	
<input type="checkbox"/>	<input type="checkbox"/>	Hall	02	
<input type="checkbox"/>	<input type="checkbox"/>	Living Room	03	
<input type="checkbox"/>	<input type="checkbox"/>	Dining Room	04	
<input type="checkbox"/>	<input type="checkbox"/>	Kitchen	05	
<input type="checkbox"/>	<input type="checkbox"/>	Bathroom	06	
<input type="checkbox"/>	<input type="checkbox"/>	Bathroom with utilities	07	
<input type="checkbox"/>	<input type="checkbox"/>	Separate Utilities	08	
<input type="checkbox"/>	<input type="checkbox"/>	Storage	09	
<input type="checkbox"/>	<input type="checkbox"/>	Garage with Ceiling	10	
<input type="checkbox"/>	<input type="checkbox"/>	Garden	11	

Would you say that your housing unit is: 311

Lack in room number of area of rooms? (A)

Yes 1
No 2

Lacks utilities inside the unit (E.g. garden, garage, storage, utilities...) or their areas? (B)

Yes 1
No 2

Old or detracted building (C)

Yes 1
No 2

B. ACCESS TO WATER AND DISPOSAL OF WASTES

How do you dispose your garbage? 312

Indicate most used method

Taken by the municipality or its contractor	1
Put in special containers	2
Throw outside the residential unit	3
Burn them	4
Submerge with soil	5
Other (mention)	6

Main sewage disposal system 313

Public network	1
Septic tank	2
Covered canal	3
Un-covered canal	4
Other (mention)	5

A. CHARACTERISTICS OF THE DWELLING

☐ How many households are there in this dwelling 301
----- Number

☐ How long have you been staying in this 302
<-- No. of years housing unit

Type of housing unit 303

House	1
Fat	2
Clay house	3
Bamboo house	4
Other (mention)	5

Principal material of the walls of the housing unit 304

Blocks	1
Stone	2
Cement blocks	3
Thermostone	4
Concrete ready made / pre-cast	5
Clay	6
Bamboo	7
Other (mention)	8

Principal material for the ceiling of the housing unit 305

Re-enforce concrete	1
Steel girders	2
Wood	3
Other (mention)	4

Principal material for the flooring of the housing unit 306

Ceramics	1
Blocks	2
Cement	3
Soil	4
Other (mention)	5

Principal material for windows 307

Aluminum	1
Iron	2
Wood	3
Other (mention)	4

What is the total area of the residential unit and the residential grounds that is being occupied by the household? 308

M² Total Built Area -A

M² Area of the land -B

Section Three: Housing

Does the household have raw water to water the garden ? 319

Yes	1
No	2

What is the state of the sanitary utilities (bathrooms) and their locations? 320

Inside the residential unit and specific for the household	1
Inside the residential unit but shared with other Households	2
Outside the residential unit buy specific to the Household	3
Outside the residential unit but shared with other Households	4
There are no sanitary utilities	5

What is the method used to cool the residential unit? 321

Air-condition	1
Cooling device	2
Fan	3
Other (mention)	4
There are none	5

What's the most likely used method for cooling inside the residential unit? 322

Central	1
Partially central	2
Non-central	3
Other (mention)	4

C. ACCESS TO SOURCES OF ENERGY

What are the main sources of electricity? 323

Public network	1
Shared generators	2
Special generator	3
There is no electricity	4

☐ Third
 ☐ Second
 ☐ First

325 How many hours per day for the prepared electricity in those days?	324 How many days per week did your household use of ..[SOURCE]..? If 'zero' go to next source	Source	Serial
Hours / Day	Day / Week		
<input type="text"/> <input type="text"/>	<input type="text"/>	Public network	1
<input type="text"/> <input type="text"/>	<input type="text"/>	Community generator	2
<input type="text"/> <input type="text"/>	<input type="text"/>	Private generator	3

What is the main source of water? 314

The residential unit is tied to a public water network	1
Public network: public tap	2
Water tank	3
River or canal	4
Open well	5
Lake or pool	6
Water spring	7
Stagnant water	8
Other (mention)	9

Are there interruptions in the availability of water from public network? 315

STABLE SUPPLY	1
INTERRUPTION ONCE OR LESS MONTHLY	2
INTERRUPTION ONCE OR LESS WEEKLY	3
INTERRUPTION MORE THAN ONCE A WEEK	4
INTERRUPTION DAILY	5
POOR RUNNING WATER	6
NO PUBLIC NETWORK	7
THERE IS A NETWORK BUT IT DOES NOT WORK	8

Is the water coming from the public network sufficient? 316

Yes	1
No	2

How do you deal with water shortages? 317

Purchase	1
River or canal	2
Public tap	3
Bring water from other areas	4
Usage of water pump	5
Other (mention)	6

Do you treat the water before usages? 318

Yes, by boiling	1
Yes, by filtration	2
Yes, by treating it chemically	3
Yes, using water bottles	4
Yes...other	5
No	6

☐ For drinking -A
☐ For cooking -B
☐ For washing -C
☐ For other purposes -D

Section Three: Housing

How old is this dwelling? 330
Less than 1 year 1
One year to less than 5 years 2
Five years to less than 10 years 3
Ten years to less than 20 years 4
Twenty years to less than 30 years 5
Thirty years to less than 50 years 6
Fifty years or more 7

E. ENVIRONMENTAL IMPACTS AND ACCESS TO FACILITIES

The environmental influences on the residential unit

331	Is your household affected for this ..[ENVIRONMENTAL IMPACT TYPE]...?	Type	Serial
	Largely affected 1		
	Little effect 2		
	Very little effect 3		
	No affect at all 4		
		Smoke and gas	01
		Dust	02
		Bad odor	03
		Noise	04
		Insects, rodents, dogs or other animals	05
		Garbage near residential unit	06
		Rain and stagnant water	07
		Outlets of sanitary systems	08
		Humidity	09
		Insufficient ventilation	10
		Security risks	11
		Insufficient lighting	12
		Other (mention)	13

Does the household members suffer from transportation problems? 332

Yes 1
334 ◀ No 2

What are the problems? (you can mention more than on) 333

Draw a circle around the one or more choices

Bad situation of the road 1
Traffic jams and condensations 2
Scarcity or distant transport means 3
Hard to reach the transport means 4
Personal security 5
Other (mention) 6

What type of main road leads to the residential unit? 334

Paved street 1
Partially paved 2
Paved road, non-paved pavement 3
Road covered with pebbles 4
Soil road 5
Other (mention) 6
There is no land road 7

326	What are the used sources of energy for the usages of [activity]..	Activity	Serial
	Electricity form public network 1		
	Electricity from shared generator 2		
	Electricity from private generator 3		
	Liquid gas cylinders 4		
	Kerosene 5		
	Wood, coal, plant-sources 6		
	Dung of animals 7		
	Other (mention) 8		
	Source Code		
	Sixth Fifth Fourth Third Second First		
		Cooking	1
		Lighting	2
		Heating	3
		Warming water	4

D. OWNERSHIP STATUS AND MONTHLY IMPUTED RENT OF THE HOUSING UNIT

Ownership of residential unit 327

329 ◀	Owned by the household 1
	Private sector 2
	Public sector 3
	Governmental sector 4
	Other (mention) 5

Type of occupancy of the residential unit 328

	Rented 1
	Provided by the owner 2
	Free in agreement with owner 3
	Free without agreement with owner 4
	Other (mention) 5

If you were to reside in a similar dwelling, what would be the estimated rental montly value? 329

Dinar 1000

Section Three: Housing

F. COMMUNICATIONS

<p style="text-align: right; color: red;">336</p> <p>What is the number of [means of communications] that the household have?</p> <p style="text-align: center; color: red; font-size: small;">Put 'zero' if none If (10) or more, write (9)</p>	<p style="text-align: center;">Means of Communications</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Serial</p>
No.		
[]	Land / phone lines	1
[]	Mobile phones	2
[]	Internet lines	3
[]	Satellite	4
[]	Other	5

<p style="text-align: right; color: red;">335</p> <p>What's the distance from your household to the nearest ...[FACILITY NAME]...?</p>	<p style="text-align: center;">Facility</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Serial</p>
Less than 100 meters		
From 101 to 300		
From 301 to 500		
From 501 to 1000		
More than 1 km to 5 km		
More than 5 km to 10 km		
More than 10 km		
Code		
[]	Elementary school	01
[]	Mid or high school	02
[]	Public hospital	03
[]	Private hospital	04
[]	Medical center / doctor	05
[]	Pharmacy	06
[]	Police station	07
[]	Post office	08
[]	Place of worship	09
[]	Youth center	10
[]	Bank	11
[]	Fire station	12
[]	Municipal council	13
[]	Public bus waiting station	14
[]	Private bus / taxi	15
[]	Markets	16

Section Three: Housing

G. EXPENSES ON HOUSING

339	338						337			ITEM DESCRIPTION	Serial	
What is the estimated proportion of use for non household consumption such as production and sale activities carried out within the housing unit? Write "zero" if there are none	What is the length of period for which the payment was made for ..[ITEM]..?						What was the last payment for this ..[ITEM].. as related to this residential unit? Previous Debts not included Write zero if the household did pay (for this material) and move on to the next paragraph					
Percentage (%)	To			From			Dinars 1000					
	Year	Month	Day	Year	Month	Day		.				
								.			The rent of a house rented from the Government, the Public Sector or the Private Sector	1
								.			Water	2
								.			Sewerage	3
								.			Raw Water	4
								.			Electricity from the Public network	5
								.			Electricity from shared Generators	6
								.			Land / Phone Line	7

What language can you deal with, and what is your level of proficiency in that language?

Skill Level	Code
Cannot	1
Weak	2
Medium	3
Good	4

Language	Code
Arabic	1
Kurdish	2
Turkmen	3
Syria	4
Chaldean	5
English	6
French	7
Persian	8
Other Languages	9

ID CODE

C - Third Language				B - Second Language				A - Mother Tongue				ID CODE
C4	C3	C2	C1	B4	B3	B2	B1	A4	A3	A2	A1	
Level of Speaking	Level of Writing	Level of Reading	Language Code	Level of Speaking	Level of Writing	Level of Reading	Language Code	Level of Speaking	Level of Writing	Level of Reading	Language Code	
<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"/>	01
<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"/>	02
<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"/>	03
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<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"/>	05
<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"/>	06
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<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"/>	08
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<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"/>	11
<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"/>	12
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<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"/>	16
<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"/>	17
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All Household Members Aged 6 or More

Section Four: Education

406	405	404	403	402	Individual's Code
What are the highest certifications you have attained?	Have you ever attended literacy classes?	Can you read and write	What is the main reason why you never attended school?	Have you ever attended school?	
No certificate, illiterate 01	yes, 1	No 1	There is no school 01	Yes, 1	
No certificate, I only read 02	currently 1		There are no seats at school 02	attended in the past 1	
No certificate, I read and write 03	attending 1		There are no sanitary utilities at school 03		
Elementary 04	Yes, I was 2	I just read 2	Transport is very difficult and unsafe 04	406 ◀	
Intermediate (mid school) 05	enrolled in the 2		There is no female teacher 05	Yes, I am 2	
Preparatory 06	past 2		There is absolutely no teacher at all 06	currently attending 2	
Vocational 07	no, never 3		Household cannot afford school expenses 07	407 ◀	
Diploma from an institution 08	attended 3	I read & write 3	Work for the family 08	No 3	
Bachelor degree 09			Work for someone else 09		
Higher diploma 10			Disability or disease 10		
Masters degree 11			Marriage 11		
PhD. (doctorate) 12			Family not interested 12		
Other 13			[NAME] not interested 13		
	◀ For all answers, move to Section Five: 501		There are no documents 14		
			Social reasons 15		
			Other 16		
					01
					02
					03
					04
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All Household Members Aged 4 or more

Section Four: Education

Exclusive for Household Members between 6 - 50 Years of Age				409	408	407		ID CODE
411	410		410	408	407			
Is the school or university that you are currently enrolled in a public or private one?	Which level or grade are you enrolled at now (or was enrolled) at school or university?		Look at Question 402 in case the person was currently enrolled in school 410	Is the [name] 50 years or less?	what is the number of school years and the repeat years that you have spent?			
Public in Iraq 1 Private in Iraq 2 Other in Iraq 3 Outside Iraq 4	Elementary 1 Mid School 2 Preparatory (or equivalent) 3 Institute 4 College 5 Higher Education 6 Other 7		Otherwise ask the person if she /he had been enrolled in school during the last 12 months Yes 1 No 2 414	Yes 1 No 2 Move to Section Five: 501				
	Grade / Class	Level / Stage)B(Repeat Years	(A) School Years		
							01	
							02	
							03	
							04	
							05	
							06	
							07	
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Section Four: Education

Exclusive for Household Members between 6 - 50 Years of Age											
415	What is the distance between the School/University and place of residence?		414				413		412		Individual's Code
What is the main reason why you left school or did not enroll in school / university?				Are you currently enrolled (continuing) in school or university? or have you left (dropped-out) education?		How old were you when you enrolled in school for the first time?					
Disability Or Disease 10			There Is No School 01		Is attending 1						
Marriage 11			No Available Seats At School 02								
Family not interested 12			Unavailability Of Sanitary Utilities 03		415 ◀						
[NAME].. Not interested 13			Transport Is Very Difficult Or Unsafe 04								
Social Reasons 14			There Is No female Teacher 05		Dropped out definitely 2						
There Are No Documents 15			There Absolutely No Teacher At All 06								
I Was Expelled / Dismissed From School 16			The Household Cannot Pay The Expenses 07								
I Concluded My Education 17			Work for the family 08								
Other 18		Work for someone else 09									
Move to Section Five: 501											
Km Meter						Years					
										01	
										02	
										03	
										04	
										05	
										06	
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Section Four: Education

Exclusive for Household Members between 6 - 50 Years of Age										ID CODE													
418									417		416												
<p>How has the household spend (exerted expenditures) during the last 12 months to avail education for your on?</p> <p style="color: red;">If the responding person was unable but to give you the total sum of amount, write "-2" in the special fields and the total amount in column (9) n</p>									<p>How much time does it take to reach the school or university?</p>		<p>What is the main transport means to school or university</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>On foot</td><td style="text-align: center;">1</td></tr> <tr><td>Private car</td><td style="text-align: center;">2</td></tr> <tr><td>Public car</td><td style="text-align: center;">3</td></tr> <tr><td>Bicycle</td><td style="text-align: center;">4</td></tr> <tr><td>Residency in</td><td style="text-align: center;">5</td></tr> <tr><td>Other</td><td style="text-align: center;">6</td></tr> </table>	On foot	1	Private car	2	Public car	3	Bicycle	4	Residency in	5	Other	6
											On foot	1											
Private car	2																						
Public car	3																						
Bicycle	4																						
Residency in	5																						
Other	6																						
- 9	Other	Private lessons	- 6 Transport	- 5 Books and school supplies	- 4 Residency	- 3 Food	- 2 Uniform or sports uniform	- 1 Tuition fees															
Dinar 1000	Dinar 1000	Dinar 1000	Dinar 1000	Dinar 1000	Dinar 1000	Dinar 1000	Dinar 1000	Dinar 1000	Minutes														
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All Household Members

Section Five: Health
Part (A): Disability & Chronic Diseases

506	505	504-A			504	503	502-A			502			501	ID CODE
Have you received any help for the disability / chronic disease during last 12 months in any of the following?	How many years ago did you become chronically ill?	What is the chronic disease that you are suffering from?			Do you suffer from a chronic disease?	How many years ago did you become disabled?	How did you become disabled?			What is the Disability that you are suffering from?			Do you suffer from any disability?	
No Chronic/Disable. 00 No help received 01 Public Hospital 02 Public Health Cen. 03 Clinic/Private Hosp 04 General Doctor 05 Specialist Doctor 06 Nurse 07 Pharmacy 08 Popular Procedures 09 Clergyman 10 Outside Iraq 11 Other 12					Yes 1 No 2	(oldest one)	Since Birth 01 Injury Due To Work 02 Disease Due To Work 03 Chemical Strike Or Enriched Uranium 04 Land Mines 05 Other - Related To Civic Conflict 06 Because Of Wars 07 Due To A Disease That Is Not Related To Work 08 Traffic Accident 09 Other related to civic conflict 10				Blindness 01 Deafness 02 Dumbness 03 Inability of Speech 04 Inability to Walk 05 Mobility Inability 06 Limping 07 Mental Retardations 08 Multiple Disabilities 09 Other 10	Yes 1 No 2		
	No. of Years	Third	Second	First		No. of Years	Third	Second	First	Third	Second	First		
													01	
													02	
													03	
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Section Five: Health

Part (B): Illness & Injuries

508				507		ID CODE
What sort of illness or injury have you suffered from?						
Injuries		Diseases		Have you suffered from any illness or injury in the last 30 days?		
Torn Ligaments	1	Hepatitis	12	High Sugar Level (diabetes)	01	Do not list any chronic disease of disability that has been mentioned before A-504 / 502
		Respiratory System And Chest Diseases	13	Pressure	02	
Head Injuries And Internal Injuries	2	Women Diseases, Such As Pregnancy And Post-Natal Complications	14	Heart Diseases	03	
				Kidneys	04	
Fractures	3	Blood Diseases	15	Tumors	05	
Poisoning	4	Inflammation Of The Thyroid Gland	16	High Level Of Blood Cholesterol	06	
Burns	5	Skin Diseases And Syphilis Disease	17	Mental Diseases	07	
Other	6	Diseases Leading To Impotency	18	Psychological Diseases	08	
510 ◀ Not available	7	Diseases Of The Sexual And Urinary Systems	19	Nervous System Diseases And Sensory Organs (Paralysis)	09	
		Parasitic And Contagious Diseases	20	Digestive System Diseases	10	
		Other Diseases	21	Thyroid Gland	11	
		There Are None	22			Yes 1
						No 2
						519 ◀
B -Code of the Most Important Injury		A - Code of the Most Important Disease				
<input type="text"/>		<input type="text"/>		<input type="text"/>		01
<input type="text"/>		<input type="text"/>		<input type="text"/>		02
<input type="text"/>		<input type="text"/>		<input type="text"/>		03
<input type="text"/>		<input type="text"/>		<input type="text"/>		04
<input type="text"/>		<input type="text"/>		<input type="text"/>		05
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<input type="text"/>		<input type="text"/>		<input type="text"/>		07
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<input type="text"/>		<input type="text"/>		<input type="text"/>		11
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<input type="text"/>		<input type="text"/>		<input type="text"/>		18

All Household Members

Section Five: Health

Part (B): Illness & Injuries

512	511	510	509	
Where is this medical service located?	Where have you received the medical care / remedy?	Did you receive medical care because of this illness or injury?	If it were an injury of ... What was the main reason for this injury?	ID CODE
<div style="text-align: right; padding-right: 5px;">Same area 1</div> <div style="text-align: right; padding-right: 5px;">Same district 2</div> <div style="text-align: right; padding-right: 5px;">Same province 3</div> <div style="text-align: right; padding-right: 5px;">Other province 4</div>	<div style="text-align: right; padding-right: 5px;">Public Hospital 01</div> <div style="text-align: right; padding-right: 5px;">Public Medical Center 02</div> <div style="text-align: right; padding-right: 5px;">Clinic / Private Hospital 03</div> <div style="text-align: right; padding-right: 5px;">General Doctor 04</div> <div style="text-align: right; padding-right: 5px;">Specialist Doctor 05</div> <div style="text-align: right; padding-right: 5px;">Medical Assistant 06</div> <div style="text-align: right; padding-right: 5px;">Nurse 07</div> <div style="text-align: right; padding-right: 5px;">Pharmacy 08</div> <div style="text-align: right; padding-right: 5px;">Popular medical procedures 09</div> <div style="text-align: right; padding-right: 5px;">Clergyman 10</div> <div style="text-align: right; padding-right: 5px;">516 ◀ Outside Iraq 11</div> <div style="text-align: right; padding-right: 5px;">Other 12</div> <div style="text-align: center; padding-top: 10px;">If more than one, select the most important</div>	<div style="text-align: right; padding-right: 5px;">Yes 1</div> <div style="text-align: right; padding-right: 5px;">No 2</div> <div style="text-align: right; padding-right: 5px;">517 ◀</div>	<div style="text-align: right; padding-right: 5px;">Traffic accident 1</div> <div style="text-align: right; padding-right: 5px;">Accident due to work 2</div> <div style="text-align: right; padding-right: 5px;">Other accidents 3</div> <div style="text-align: right; padding-right: 5px;">Family violence 4</div> <div style="text-align: right; padding-right: 5px;">Assault outside family 5</div> <div style="text-align: right; padding-right: 5px;">Civic disturbances 6</div> <div style="text-align: right; padding-right: 5px;">Other reasons 7</div>	
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All Household Members

Section Five: Health Part (B): Illness & Injuries

516 What is the total that has been spend on the following entries in the last 30 days?												515 How long did it take to reach the health facility by utilizing the actual adopted mean(s) ?	514 What's the main mean of commuting to this health facility?		513 What is the distance between this Medical Services Location and the Residence?		ID CODE
6 Total		5 Other		4 Lab test, x-ray, ultra-sound, other diagnostic procedures		3 Consultation and Hospital Fees		2 Medicines		1 Accessibility to Medical Services Entity (Place)		On foot	Private car	Public transport	Bicycle	Other	
1000 Din	Dinar	1000 Din	Dinar	1000 Din	Dinar	1000 Din	Dinar	1000 Din	Dinar	1000 Din	Dinar	Minute			KM	Meter	
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All Family Members

Section Five: Health

Part (B): Illness & Injuries

519 INTERVIEWER: PLEASE LOOK AT PERSON'S AGE, GENDER AND MARITAL STATUS IN THE THE HOUSEHOLD ROSTER AND CLASSIFY THE PERSON AS FOLLOWS:	518 How many days were you absent from your normal activities due to illness or injury?	517 Why you didn't receive medical care for this illness or injury?	ID CODE
The person is a child of less than 5 years of age 525 ◀	1	Inability to withstand cost	01
		Difficulty in securing means of transport	02
		Unavailability of a (Female) Doctor / Nurse	03
		Unavailability of a Doctor	04
		Unavailability of Medical Means (Place)	05
		The illness was mild	06
		Unavailability of the proper services	07
		Social reasons	08
		Unsafe, due to the security status	09
		Other	10
Other Go to Section Six: 601	3		
	Number of Days		
			01
			02
			03
			04
			05
			06
			07
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			09
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Section Five: Health

Part (C): Pre-natal and post natal care

21 / 26

23 / 26

Part A: Looking for Work

704 Why don't you want work? (or more work?)		703 Do you want work or more work of which kind? For example: paid job, new work, or more work?		702 Why haven't your worked during the last seven days, not even for one hour (indicate main reason)?		701 How many working hours have you worked during the last seven days?	
				Next Person Question			
◀ 708	I currently work full time	01			Too young, low age	01	
	I cannot find a job	02			Full-Time Student	02	
708 ▶	Satisfied with my status	03			Social Reasons	03	
708 ▶	Housework dedicated female	04		706 ▶	I have a contract and will start work soon ▶	04	
708 ▶	Social ties	05		704 ▶	Inability / Handicap	05	
708 ▶	Too old for work or retired	06		704 ▶	Retired	06	
708 ▶	Too young for more work	07		704 ▶	House wife	07	
708 ▶	Student	08		704 ▶	I have no desire	08	
708 ▶	Too ill/unable take more work	09			I am temporarily away from work due to illness or vacation or other reason (maternity leave ...)	09	
708 ▶	Have income no need to work	10			Due to end of work	10	
708 ▶	Due to the state of security	11	Yes 1		I was dismissed	11	
708 ▶	Other	12	705 ▶		I was unable to get a job	12	
		No 2			Due to security reasons	13	If one hour or more 703 ▶
					Other	14	
						Number of Hours	
							01
							02
							03
							04
							05
							06
							07
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For All Household Members Aged 6 and Above

Section Seven: Job search and past employment

Part A: Looking for Work

707	706	705	ID CODE	
If there had been job opportunities last week or will be available during the next two weeks, are you ready to start work?	What have you done for the sake of attaining work?	When was the last effort or procedure you have taken to search for work (or get more work) of any kind?		
	I asked friends / relatives	1		
	I applied directly to the work owner's)	2		
	I registered at the "Employment / Labour Office"	3		
	I followed up on Job Opportunities Advertisements	4	Last Seven Days	
	I promoted myself by placing and advertisement about my work	5	During Last Month	
	I tried to find work outside Iraq	6	Before More Than a Month	
	I contacted an NGO (Non-Governmental Organization)	7	I Never searched	
	I contact Local Authorities (Local Governments)	8	707 ◀	
	Other Means	9		
Yes 1				
No 2				
	Third Procedure	Second Procedure	First Procedure	
				01
				02
				03
				04
				05
				06
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For All Household Members Aged 6 and Above

Section Seven: Job search and past employment

Part B: Previous and Current Employment

<p>710</p> <p>When did you stop doing the last full-time job you had?</p> <p>After conclusion of interview with this person, complete data for next person starting with question 401</p>		<p>709</p> <p>What was your occupation in the last full-time job you had?</p>		<p>708</p> <p>Are you engaged or have you ever been engaged in a full-time wage job?</p> <p>Yes 1</p> <p>No 2</p> <p>Next Person Question 401</p>	ID CODE
Year	Month	Profession Code	Job Description		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	01
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	02
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	03
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	04
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	05
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	06
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	07
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	08
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	09
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	10
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	11
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	12
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	13
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	14
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	15
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	16
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	17
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	18