

	Yes=1 , No=2												
A18	Did (name) go to the kindergarden in the previous academic year? (for all kids of age 3,4, and 5) Yes=1, No=2												
A19	What type of Kindergarden was it? 1.Private kindergarden 2.State kindergarden												

A20. Does any household member have a child(ren) below 18 that live outside the household?

1=Yes, 2=No → **B1**

A21. Where does the child live currently?

No	1	2	3	4
Name of the child				
Current place of residence of the child				

Codes:

- | | | | |
|--------------------------|-----------------|---------------------|---------------------------|
| 1. Childcare institution | 3. Other parent | 5. Other relative | 7. Don't know |
| 2. Foster Family | 4. Grandparents | 6. Lives separately | Other (<i>indicate</i>) |

A22. Have you applied to be registered at the database of socially unprotected families (database of vulnerable families)?

- Yes → **B**
- No

A23 During the past 12 months have you or your family members received assistance to the vulnerable families (Targeted Social Assistance)?

- Yes
- No

A24. What is your family's ranking score right now? (write down) _____

77. Has not been calculated yet 99. Difficult to answer 88. Refusal

Interviewer: if the respondent cannot remember the exact score, then write down approximately. In the list below circle the range in which this score falls

- 1.0 - 57 000
- 2.57 001 - 70 000
- 3.70 001 - 100 000
- 4.100 000 – 200 000
- 5.200 000 and more

Response codes:

A1. Relationship to the Household Head

- | | |
|--|--|
| 1. Household Head | 5. Brother or sister of the Household Head/his (her) spouse |
| 2. Spouse of the Household Head | 6. Grandchild of the Household Head/his (her) spouse |
| 3. Child and step child, or daughter/son- in-law of the Household Head/spouse, | 7. Uncle or aunt, or nieces and nephews of the Household Head/his (her) spouse |
| 4. Parent or grandparent of the Household Head/his (her) spouse | 8. Other relative of the Household Head/his (her) spouse |
| | 9. Non-relative |

A4. Marital status

- | | |
|---------------|----------------------------|
| 1. Married | 5. Separated |
| 2. Cohabitant | 6. Widow/widower |
| 3. Single | 7. Not of the marriage age |
| 4. Divorced | |

A5. Religion

- | | |
|------------------------|--------------------------|
| 1. Christian Orthodox | 5. Muslim |
| 2. Christian Catholic | 6. Atheist |
| 3. Christian Gregorian | Other religion (specify) |
| 4. Jewish | |

A6. Nationality

1. Georgian
2. Abkhaz
3. Ossetian
4. Russian

5. Azeri
6. Armenian
7. Jewish
- Other (specify)

A10. Achieved education level

1. Illiterate;
2. Incomplete secondary;
3. School student
4. Secondary;
5. Vocational;
6. Incomplete higher (ceased higher education);
7. A student of higher education institution;
8. Higher.

A12. Employment (activities)

1. Worked in a private or public (budgetary) institution/organization on salary or earning;
2. Worked on his/her own landplot/took care of own livestock, poultry;
3. Had a temporary, non-agricultural job with remuneration (loader, nanny, nurse, etc.);
4. Did agricultural work (spading, hoeing, shepherding etc.) with cash remuneration;
5. Had a temporary job with remuneration in kind (food/goods/boarding)
6. Worked individually
 - as a craftsman (carpenter, mason, painter, plumber, electrician, mechanic, blacksmith, etc.);
 - as a trader, broker;
 - as a hairdresser, barber;
 - engaged in transportation of passengers or cargo by own car/bus/truck
 - engaged in sewing, knitting, embroidery, shoe-making, etc.);
7. Was engaged in individual professional activity (tutoring, private medical practice, etc.)
8. Hunted/fished, gathered mushrooms, berries, chestnuts and other forest fruit for own consumption or selling;
9. Produced hand-made things for selling;
10. Gathered scrap metal, bottles for changing them for money at respective reception points;
11. Begged;
12. Was engaged in other activity;
13. Was engaged in no activity for receiving an income during the indicated period.

B. Housing conditions

B.0 What is the main source of drinking water for members of your household?

1. PIPED WATER (PIPED INTO DWELLING)-----→GO TO B .0.2
2. PIPED WATER (PIPED INTO COMPOUND, YARD OR PLOT) -----→GO TO B.0.2
3. PIPED WATER (PIPED TO NEIGHBOR)
4. PIPED WATER (PUBLIC TAP/STANDPIPE)
5. TUBE WELL, BOREHOLE
6. PROTECTED WELL
7. UNPROTECTED WELL
8. PROTECTED SPRING
9. UNPROTECTED SPRING
10. RAINWATER COLLECTION
11. TANKER TRUCKER
12. CARTS WITH SMALL TANK/DRUM
13. SURFACE WATER(RIVER, STREAM, DAM, LAKE, POND, CANAL, IRRIGATION CHANNEL)
14. BOTTLED WATER-----→GO TO B .0.2
20. OTHER (SPECIFY)_____

How long does it take to go to the water source, get water and come back, in minutes?

_____ MINUTES 88. DOES NOT KNOW

What kind of toilet facility does this household use?

1. FLUSH TOILET PIPED TO SEWER SYSTEM
2. FLUSH TOILET PIPED TO SEPTIC TANK
3. FLUSH TOILET PIPED TO PIT (LATRINE)
4. FLUSH TOILET PIPED TO SOMEWHERE ELSE
5. FLUSH TOILET PIPED UNKNOWN PLACE/NOT SURE/DK WHERE
6. VENTILATED IMPROVED PIT LATRINE
7. PIT LATRINE WITH SLAB
8. PIT LATRINE WITHOUT SLAB
9. COMPOSTING TOILET
10. BUCKET
11. HANGING TOILET, HANGING LATRINE
12. NO FACILITY/BUSH/FIELD
20. OTHER (SPECIFY)_____

B1. The dwelling of the household consists of _____ rooms (except kitchen, bathroom, pantry and other ancillary rooms)

B2. The total area of the dwelling of the household is _____sq.m. (except kitchen, bathroom, pantry and other ancillary rooms)

B3. What is the ownership type of the household's dwelling? (To the interviewer: read to the respondent. Only one answer is admissible)

1. Owned by the household/a household member;
2. Rented by the household (rent is being paid);
3. Owned by the household as a mortgage for debt;
4. Belongs to a relative/friend and the household lives there alone free of charge;
5. The state/other organization has handed over the dwelling to the household free of charge for its temporary use;
6. Household lives free of charge together with another household;
7. Household lives in a dormitory, hotel or other building not belonging to it;
- Other (specify) _____
88. Don't know
99. Refusal

B4. What is the type of the dwelling? (To the interviewer: read to the respondent. Only one answer is admissible)

1. A flat in a multi-flat building (inhabited by one household);
2. A flat in a multi-flat building (inhabited by several households);
3. A flat in an "Italian yard" with individual kitchen and bathroom/toilet;
4. A flat in an "Italian yard" with common kitchen and/or bathroom/toilet;

5. A private house (belonging to one household);
 6. A private house (belonging to several households);
 7. A flat in a dormitory or hotel;
 8. A barrack type building/cabin;
 9. Non-residential area (railway carriage, storehouse etc.)
 10. A flat in a non-residential institution (hospital, kindergarten, school building, etc.).
- Other (specify) _____

B5. Are the below facilities and services available to your household?

		B7.1 Available or not 1 =Yes 2 =No ↓ Next 99 =Refusal	B7.2 Is it inside or outside the house (flat) 1 = Inside 2 =Outside ↓ 88= Don't know 99 =Refusal	B7.3 Central (common) or individual 1 =Central 2 =Individual 88 = Don't know 99=Refusal	B7.4 How many hours per day is the facility available? 1=24 2=12-24 3= 6-12 4=Less than 6 88 = Don't know 99=Refusal	B7.5 How would you evaluate the quality of performance? 1=Good 2=Average 3=Bad 88 = Don't know 99=Refusal
1	Water supply					
2	Hot water					
3	Electricity					
4	Gas supply					
5	Sewerage					
6	Waste disposal					
7	Toilet					
8	Bathroom					

B6. To what extent did you manage to heat the dwelling during the past winter?

1. All the dwelling was heated;
2. Only a part of the dwelling was heated, where we mainly live;
3. Only one room was heated;
4. The dwelling practically was not heated →B8

B7. What types of heating means did you use last winter? Which were the main and auxiliary ones?

Heating means	B7.1 Main heating means Encircle one answer	B7.2 Auxiliary heating means Several answers may be encircled
Central heating system	1	1
Common heating system (for several households)	2	2
Individual heating system	3	3
Natural gas stove („Karma”, “Nicala”etc.)	4	4
Electric heater	5	5
Stove (burning firewood, coal, diesel oil, saw dust etc.)	6	6
Fireplace	7	7
Open fire in the middle of the room	8	8
Other (specify) _____		

B8. Of the below mentioned, which is the main problem for the household?

Problem	1 =Is a problem 2 =Is not a problem
The roof is very damaged and water leaks through it	
The floor/walls are very damaged	
There is an earth floor	
The dwelling is damp	
The windows are broken	
The light is insufficient	
It is noisy (because of transport, an enterprise or neighbors)	
The dwelling is too small for our household	
Other (specify)_____	

B9. Do you own other dwelling apart from this one? (a flat, a house, a summerhouse)?

1. Yes.
2. No; →C1

B10. How do you use that dwelling?

1. We rent it out;
 2. Gave it as a mortgage for the debt;
 3. Use for our business;
 4. Relatives/friends live there without paying rent;
 5. We use it seasonally;
 6. We cannot use it, it's abandoned/closed;
 7. It is on the territory not under the control of the authorities, so we can not use it;
Other (specify)_____
99. Refusal

C.

Household assets

C1. Which of the following functioning durables does the household own? (along each item write the number of the items owned. If not owned, write 0)

Item	N	Number
Automobile (of all types – car, truck, bus etc.)	1.	
Tractor (of all types, combine harvester or sowing machine, mini tractor)	2.	
Mobile phone	3.	
Washing machine	4.	
Black & White TV set	5.	
Color TV set	6.	
Refrigerator	7.	
Gas stove	8.	
Vacuum cleaner	9.	
Iron	10.	
Electric water heater (tank)	11.	
Gas water heater	12.	
Individual system of heating and hot water	13.	
Microwave oven	14.	
Personal computer	15.	
Internet	16.	
Compact disk stereo cassette record player	17.	
Video camera or digital photo camera	18.	
Video record-player or DVD player	19.	
Electric generator	20.	
Satellite dish	21.	
Air conditioner	22.	
Piano or grand piano	23.	
Toaster	24.	
Dishwasher	25.	
Kitchen unit	26.	

C2. Do you possess livestock?

1. Yes 2. No → **C4**

C3. How much livestock do you possess? (Write the number, if not owned, write 0)

#	Grown up	Quantity	#	Young	Quantity
1.	Cows, buffalos		2.	Calves	
3.	Horses, oxen		4.	Foals	
5.	Sheep, goats		6.	Lambs, kids	
7.	Rabbits		8.	Young rabbits	
9.	All types of poultry		10.	Poults	
11.	Pigs		12.	Piglets	
13.	Asses and mules		14.	Foals	
15.	Beehives				

C4. Do you own and/or cultivate agricultural land?

1. Yes, I cultivate my own land
2. Yes, I cultivate a rented land
3. Yes, I cultivate a land owned by others
4. Yes, I own agricultural land cultivated by others → **D1**
5. Yes, I own agricultural land which is not cultivated → **D1**
6. No, I don't own or cultivate any agricultural land → **D1**

C5. What do you use the land for and what is the area? (Read each item. Along each crop indicate the area occupied by the latter within 0.01ha. If the land is not used for that crop, write 0)

	Crop	Area		
		Own	Rented	Owned by others
1.	Vineyard (ha)			
2.	Orchard (ha)			
3.	Wheat, sunflower (ha)			
4.	Maize (ha)			
5.	Potato (ha)			
6.	Hazelnut (ha)			
7.	Citrus, kiwi, feijoa plantations (ha)			
8.	Tea plantation (ha)			
9.	Haricot beans, soybeans (ha)			
10.	Vegetable garden (sq.m.)			
11.	Greenhouse (sq.m.)			
12.	Tobacco (ha)			
13.	Meadow for gathering hay (ha)			
14.	Pasture (ha)			
15.	Other crops (ha)			
16.	I own a land which I do not cultivate			

Converter of square meters into hectares

Sq.m	100	200	300	400	500	600	700	800	900	1000
ha	0.01	0.02	0.03	0.04	0.05	0.06	0.07	0.08	0.09	0.1
Sq.m	1100	1200	1300	1400	1500	1600	1700	1800	1900	2000
ha	0.11	0.12	0.13	0.14	0.15	0.16	0.17	0.18	0.19	0.2
Sq.m	2100	2200	2300	2400	2500	2600	2700	2800	2900	3000
ha	0.21	0.22	0.23	0.24	0.25	0.26	0.27	0.28	0.29	0.3
Sq.m	3100	3200	3300	3400	3500	3600	3700	3800	3900	4000
ha	0.31	0.32	0.33	0.34	0.35	0.36	0.37	0.38	0.39	0.4
Sq.m	4100	4200	4300	4400	4500	4600	4700	4800	4900	5000
ha	0.41	0.42	0.43	0.44	0.45	0.46	0.47	0.48	0.49	0.5

D. Household income

D1. Regular personal cash income during last month (received or to be received), in GEL *(The table is to be completed for all household members. If a person had no income of a certain category, write "-").*

No of the household member from A block													
Income type	Name												
Salary (including all kinds of remuneration)	1												
Income from private activities	2												
Pension (considering all kinds of supplements)	3												
Scholarship	4												
Aliment	5												
IDP allowance	6												
Social assistance to families with many children	7												
Social assistance to orphans	8												
Social assistance to 1st category disabled, blind	9												
Social assistance to single unemployed pensioners or households consisting of only two or more unemployed pensioners	10												
Social assistance to families with many children for a disabled child	11												
Social assistance to vulnerable families (so-called subsistence allowance TSA)	12												
Prevention and reintegration allowance	13												
Other social assistance	14												
Other regular cash income	15												

D2. What is the total income of the household during the last 12 months from the sources listed below? (GEL) *(Read. If the household had no income of a certain type, write "-")*

N	Income source	Amount
D2.1	From selling domestic animals or their products (milk, eggs, meat, cheese, butter, wool, etc.)	
D2.2	From selling other agricultural products or goods processed from the latter (wine, vodka, vegetable oil, flour, dried fruit, etc.)	
D2.3	From renting out property (flat, summerhouse, car, etc.)	
D2.4	From selling property (flat, summerhouse, car, etc.)	
D2.5	Cash assistance from children/grandchildren or parents living in Georgia	
D2.6	Cash assistance from other relatives living in Georgia	
D2.7	Cash assistance from non-relatives living in Georgia (friend, neighbor, etc.)	
D2.8	Cash assistance from children/grandchildren or parents living abroad	
D2.9	Cash assistance from other relatives living abroad	
D2.10	Cash assistance from non-relatives living abroad (friend, neighbor etc.)	
D2.11	Total of other non-regular cash income (seasonal, one-time, etc.) of household members	

E. Access to education

Household member # from Block A		1	2	3	4	5	6	7	8	9	10	
Household member name from Block A												
E1	Did he/she attend any educational institution, visited a tutor or a circle during the last academic year? 1=Yes, 2=No =>E6											
E2	Which educational institution did he/she attend?(multiple answers are possible) 1. Private kindergarten 2. Public kindergarten 3. Private school 4. Public school 5. Vocational school 6. University 7. Boarding school / 8. daycare centre 9. Training courses 10. Study group 11. Tutor Other (specify)											
E3	Who financed the education? 1.The household, fully 2.The household, partially 3. The State, fully 4.Other organization, fully Other (specify) 88 Don't know											
E4	How long did it take to get to the educational institution?											
E5	How did s/he get to the educational institution? 1. Walked 2. By bicycle 3. By transport Other (specify)											
E6	Out of those listed in E3, which education institution would he/she like to attend but didn't attend? If none, write 77 → E8											
E7	Why did not he/she attend 1.There is no appropriate institution nearby 2.Could not afford 3.Works 4.Not enough time 5.Is above the age-limit Other (specify)											
Amount spent by the household for his/her education (in GEL)												
E8	Education fee											
E9	For books and manuals											
E10	For buying other school items (notebooks, sports uniform, etc.)											
E11	Tutor's fee											
E12	Transportation costs for attending the education institution											
E13	Other education-related costs											

F. Access to health care

F1. Health utilization and expenditures – (for all household members)

99. Don't know

88. refuse to answer

	Household member # from Section A	1	2	3	4	5	6
	<i>Household member name Section A</i>						
1	<p>How would you evaluate your state of health?</p> <p>1. Very good 2. Good 3. Neither good nor bad 4. Bad 5. Very bad</p>						
2	<p>During the past 30 days, did you apply to any health care facility for <u>outpatient</u> care?</p> <p>1. Yes 2. No →9</p>						
3	<p>In total, how many outpatient visits did you make to a health facility during the past 30 days??</p>						
4	<p>To whom did you apply for medical assistance during your <u>most recent</u> visit for outpatient care?</p> <p>1. Family doctor 2. Pediatrician 3. Obstetrician/ gynecologist 4. Therapist 5. Narrow specialist 6. Private doctor 7. Dentist 8. Other (write in)</p>						
5	<p>How much did you pay in <u>total</u> for your medical consultation during your most recent visit? (except for the amount paid by insurance)</p> <p>If no payment, write zero</p>						
6	<p>Did you make any <u>gifts</u> (food, etc.) or provide any services to a health professional during your last visit, besides the payment? If yes, what was the value of the gift or service?</p> <p>If no gift, write zero</p>						
7	<p>Did you have to make any <u>other</u> payments not already recorded, including payments for laboratory tests and x-rays, in connection with the consultation? (except for the amount paid by insurance)</p> <p>If yes, how much was paid?</p> <p>If no payment, write zero.</p>						

	Household member # from Section A	1	2	3	4	5	6
8	<p>What was your opinion of the service received during your last visit?</p> <p>1. Very satisfied 2. Satisfied 3. Neither satisfied nor dissatisfied 4. Dissatisfied 5. Very dissatisfied</p>						
9	<p>During the past 30 days, have you purchased any medicines at a pharmacy to treat a health problem?</p> <p>1. Yes 2. No→11</p>						
10	<p>How much did you pay in total for medicines purchased during the past 30 days? (except for the amount paid by insurance)</p>						
11	<p>During the past 12 months, were you admitted to a health facility overnight to obtain inpatient care?</p> <p>1. Yes 2. No→19</p>						
12	<p>During the past 12 months, on how many separate occasions did you stay overnight at a health facility to obtain inpatient care?</p>						
13	<p>During your <u>most recent</u> inpatient admission, at what type of health care facility did you stay?</p> <p>1. Polyclinic 2. General hospital 3. Specialized hospital 4. Private hospital 5. Other</p>						
14	<p>How much did you pay to the hospital <u>cashier</u> for costs associated with your most recent inpatient admission? (except for the amount paid by insurance)</p>						
15	<p>How much did you pay to hospital <u>staff</u> for costs associated with your most recent inpatient admission? (except for the amount paid by insurance)</p>						
16	<p>Did you make any <u>gifts</u> (food, etc.) or provide any services to staff, besides the payment? If yes, what was the value of the gift or service?</p> <p>If no gift, write zero</p>						
17	<p>Did you have to make any <u>other</u> payments not already recorded, including payments for laboratory tests, x-rays, or drugs, in connection with the most recent inpatient admission? If yes, how much was paid?</p> <p>If no payment, write zero</p>						
18	<p>What was your opinion of the service received during your last inpatient stay?</p> <p>1. Very satisfied 2. Satisfied 3. Neither satisfied nor dissatisfied 4. Dissatisfied 5. Very dissatisfied</p>						

Household member # from Section A		1	2	3	4	5	6
19	Was there any time during the last 12 months when you think you should have received medical care, but did not? 1. Yes 2.No → F4 3.Don't know → F4						
20	What was the reason why you did not receive medical care? 1.I did self-treatment at home 2.I could not afford to pay for treatment 3.The health facility is too far/too difficult to reach 4.The quality of health care is not good 5.Other						

F2.What was the main source of funding for purchasing medical services?

- | | |
|----------------------------------|----------------|
| 1. Household budget | 88. Don't know |
| 2. Medical insurance | 99. Refusal |
| 3. Friends/relatives' assistance | |

F3. What was the main source of funding for purchasing medicines?

- | | |
|----------------------------------|----------------|
| 1. Household budget | 88. Don't know |
| 2. Medical insurance | 89. Refusal |
| 3. Friends/relatives' assistance | |

F4. Is there a child under 5 in the household?

1. Yes 2. No=>F12

F5. Please provide information about each child under 5.

To the interviewer: Ask mother or other caretaker about the child

	Child's # from block A (Indicate)			
	Child's first name (Indicate)			
F.5.0	Child's date of birth	Year/m onth	Year/m onth	Year/m onth
F.5.0.1	Does your child have Birth certificate			
F.5.1	What was the child's weight at birth? (in kg) (If do not know, write -)			
F.5.2	What was the child's height at birth? (in cm) (If do not know, write -)			
F.5.4	What was the child's age when last weighed ? (If was not weighed at all, write -)	Yea rs	Mon ths	Yea rs
F.5.5	What was the child's weight when last weighed? (If was not weighed at all, write down -)			
	What was the child's age when last measured ? (If was not measured at all, write down -)	Year s	Mon ths	Year s
F.5.6				
	What was the child's height when last measured ? (If was not measured at all, write down-)			
F.5.7	Where was the child born? 1. At maternity hospital; → F11.9. 2. At home; 3. Other.			
F.5.8	Why did the mother not give birth at maternity hospital? 1. Lack of money; 2. There is not one nearby; 3. There was no time ; 4. Other.			
F.5.9	Is the child breastfed? 1. Exclusively; → F11.13. 2. Partially → F11.12. 3. No.			

	Child's # from block A (<i>Indicate</i>)			
	Child's first name (<i>Indicate</i>)			
F.5.0	Child's date of birth	Year/m onth	Year/m onth	Year/m onth
F.5.0.1	Does your child have Birth certificate			
F.5.10	Was the child breastfed? 1=Yes; 2=No → F11.15			
F.5.11	How many months was the child breastfeed (at least partly)?			
F5.12	How many months was the child exclusively breastfeed?			
F5.13	When did you start breastfeeding the child? <i>(Record the numbrs of days and hours; if after less that 1hour from its birth,write 0 days and 0 hours).</i>	Day s	Hou rs	Day s
F5.14	Did you consult a specialist about breastfeeding? 1=Yes 2= No			
F5.15	How adequately was the child fed during the last three months? 1. We had no problems with feeding the child 2. There were cases when the child was hungry because of the lack of food 3. The child was often hungry because of the lack of food; 88. Do not know 99. Refusal			
F5.16	Is the child under doctor's surveillance? 1. Yes; → F11.18 2. No.			
F5,17	Why is the child not under doctor's surveillance? 1. Lack of money; 3. Do not deem it necessary; 2. There is no pediatician nearby; 4. Other.			
F5,18	Does the child receive any vaccination? 1. Receives all necessary vaccinations; 4. Does not receive, there is no doctor nearby; 2. Receives some vaccinations; 5. Does not receive, I did not know it was needed. 3. Does not receive, does not need it yet;			
F5.19	Since this time yesterday, did the child receive any of the following:			
	F5.19.1 Vitamin supplements 1=Yes 2=No 88=Don't know			
	F5.19.2 Plain water 1=Yes 2=No 88=Don't know			
	F5.19.3 Sweetened water or juice 1=Yes 2=No 88=Don't know			
	F5.19.4 Oral rehydration solution (ORS) 1=Yes 2=No 88=Don't know			
	F5.19.5 Infant formula 1=Yes 2=No 88=Don't know			
	F5.19.6 Milk 1=Yes 2=No 88=Don't know			
	F5.19.7 Other liquids 1=Yes 2=No 88=Don't know			
	F5.19.8 Solid or semi-solid food 1=Yes 2=No → F12 88=Don't know →F12			
F5.20	Since this time yesterday, how many times did the child eat solid, semisolid, or soft food other than liquids?			

F6, The Amount of money the household spent on medical services and medicines during the last year

	Expenditure type	GEL
F6.1	Emergency medical assistance (including transportation costs)	
F6.2	Visits to doctor and medical procedures	
F6.3	Surgical operation	
F6.4	Hospital services (bed, procedures, etc.)	
F6.5	Maternity care fee (including doctor's services)	
F6.6	Women's consultations	
F6.7	Regular checkup	

F6.8	Purchasing medicines	
F6.9	Medical insurance premiums	
F6.10	Immunisation costs	
F6.11	Fee of nurse or caregiver	
F6.12	Other costs (informal fees, etc.)	

G. Access to social services

G1. Did you ask the state or any organization for social assistance during the last 12 months?

1. Yes → G6
2. No

G2. Why did not you ask?

1. I have asked earlier and there is no more need in asking;
2. I thought that my family does not need social assistance;
3. Do not know whom to ask;
4. Do not hope that I will be given assistance;
5. I can not myself and have nobody who could help me to apply;
6. Did not have the documents in order;
7. Asking for assistance is above my family's dignity;

Other (specify)_____

88. Do not know;

99. Refusal.

G3. Do you plan to ask the state or any organization for assistance?

1. Yes
2. No → H1

G4. What type of assistance will you ask for? (*Several answers are possible*)

- | | |
|------------------------------|-------------------------|
| 1. Cash assistance | 6. To finance education |
| 2. Health insurance | Other (specify)____ |
| 3. To provide me with a flat | 88. Do not know; |
| 4. Dwelling repair | 99. Refusal. |
| 5. Food assistance | |

G5. Do you hope that your request will be satisfied? → G10

- | | |
|--|------------------|
| 1. Yes | 88. Do not know; |
| 2. Yes, at least partly; | 99. Refusal. |
| 3. I do not hope but still I will try; | |

G6. Whom did you ask for assistance? (*Several answers are possible*)

- | | |
|--|---|
| 1. I applied for registration in the united data-base of vulnerable families | 6. Private organizations; |
| 2. Local government; | 7. An NGO; |
| 3. Central authorities; | 8. An international donor organization; |
| 4. Ministry of IDP-s; | Other (specify)_____ |
| 5. Ombudsman's Office; | 88. Do not know |
| | 99. Refusal. |

G7. What was the main content of your request? (*Several answers are possible*)

- | | |
|--|--|
| 1. I wanted cash assistance; | 6. I wanted repair of dwelling; |
| 2. I wanted assistance in obtaining health services; | 7. I wanted to have my own dwelling; |
| 3. Food assistance | 8. Others received assistance and I also wanted; |
| 4. I wanted benefits for financing education; | Other (specify)_____ |
| 5. I wanted benefits for transport and other payments; | 88. Do not know; |
| | 99. Refusal. |

G8. Was your request satisfied?

1. Fully satisfied;
2. Mainly satisfied;
3. Partially satisfied;
4. Insignificantly satisfied;
5. Not satisfied at all;
Other (specify) _____
88. Do not know;
99. Refusal.

G9. Did you or your family member receive any social assistance during the last one year?

1. Yes;
2. No; → H1
88. Don't know; → H1
99. Refusal. → H1

G10. What types of social assistance do you or your family member receive now or received during the last year?

1. Cash assistance from the program of vulnerable families (TSA);
2. Health insurance from the program of vulnerable families;
3. Various benefits (on transport, energy, education etc.) from the program of vulnerable families;
4. Social assistance to single pensioners;
5. Social assistance to the blind;
6. Social assistance to orphans having lost both parents;
7. Social assistance to disabled children;
8. Social assistance to multi-children single parents;
9. Reintegration and prevention;
10. Food assistance
11. Assistance with diesel oil
12. Assistance with clothes
13. Assistance with schoolbooks
14. Other non-cash assistance
Other (specify) _____
88. Do not know;
99. Refusal.

G11. Who did you receive the assistance from?

1. State;
2. Local self-governance body (mayor's office, municipality, local administration, regional authorities, etc.)
3. Local donor organizations;
4. International donor organizations;
Other (specify) _____
88. Do not know;
99. Refusal.

G12. How important the social assistance was for your family?

1. There was not much impact;
2. This assistance is very important for our family;
3. This assistance saved us.
Other (specify) _____
88. Do not know;
99. Refusal.

H. Household's coping strategies

H1. According to your income, which category of the listed below would you attribute your household to?

1. 1. We easily satisfy daily and other consumer needs (travel, buying expensive things, etc.);
 2. 2. We manage to more or less successfully satisfy daily and other consumer needs;
 3. 3. Our income (harvest) is enough only for food;
 4. 4. We can not provide ourselves even with sufficient food;
 5. 5. We feed ourselves so poorly that our health is under threat.
88. Do not know
99. Refusal

H2. Which of the below problems does your household suffer from, and which of them is the main problem? (To the interviewer: Read. Each time change the order of the listed problems)

		H2.1 Encircle all problems of the household	H2.2 Encircle the main problem of the household
1	Hunger/ malnutrition	1	1
2	Buying medicines	2	2
3	Unemployment of household members	3	3
4	Medical services	4	4
5	Buying school items	5	5
6	Housing conditions	6	6
7	Furniture	7	7
8	Buying clothes	8	8
9	Leisure, entertainment	9	9
10	Paying debt/bank loans	10	10
11	Paying utility charges	11	11
12	None of the listed	12 → H4	

H3. You said that the main problem of your household is (read the main problem indicated by the respondent). Please tell me, during the last 12 months how the acuteness of this problem has changed?

1. Has become far more acute compared to last year;
 2. Has become slightly more acute compared to last year;
 3. The acuteness of the problem has not changed;
 4. Has become slightly less acute compared to last year;
 5. Has become far less acute compared to last year.
88. Do not know;
99. Refusal

H4. How has the economic situation of your household changed during the last 12 months?

1. Has significantly worsened;
 2. Has worsened;
 3. Has not changed essentially; =>H9
 4. Has improved => H8
 5. Has significantly improved => H8
88. Do not know => H9
99. Refusal => H9

H5. What was the main reason for worsening the economic situation of your household? (Encircle at most 3 most important answers)

1. Loss of the bread-winner;
2. Serious illness of a family member resulting in a sharp increase in expenditures;
3. Loss of job by household member(s);
4. Decrease of total income of household members;

5. Price increase;
6. Paying debt;
7. Decrease/suspension of remittances from abroad;
8. Decrease in quantities of agricultural products produced for self consumption (due to bad harvest, livestock diseases or other causes)

Other (specify) _____

88. Do not know;
99. Refusal

H6. Upon worsening of the economic situation of your household, which of the below listed has become an additional source of livelihood for your household? (Encircle at most 3 main sources)

1. Assistance from a relative or a friend;
2. Assistance from a non-relative or a non-friend;
3. Borrowing from a relative or a friend;
4. Borrowing from a non-relative or a non-friend;
5. Borrowing from a bank or other financial institution;
6. Dissaving;
7. Sale of property (land, house, livestock, car, etc.);
8. Assistance from religious organizations;
9. Assistance from another NGO (charity organization);
10. Social assistance to vulnerable households;
11. Assistance from municipality;
12. Other social assistance (specify) _____
13. Have had no additional livelihood source

Other assistance (specify) _____

88. Do not know
99. Refusal

H7. What did you do to alleviate the impact of worsening economic situation on your household?

(Several answers are possible)

1. Reduced food consumption;
2. Started consuming cheaper food;
3. A household member went elsewhere for seasonal work;
4. Produced more food for own consumption;
5. Stopped buying some non-food items;
6. Started buying cheaper non-food items;
7. Started buying second-hand items;
8. Spend less on entertainment (cinema, theater, sports activities, etc.);
9. Spend less on mass media (newspapers, internet etc.);
10. Transferred children from private to public school;
11. Transferred children to a cheaper private or public school;
12. Postponed the admission to school, college or kindergarten;
13. Withdrew the child from school, college or kindergarten;
14. The child was taken to an institution;
15. A household member gave up courses of languages, computer, etc.;
16. Make greater use of public health care services;
17. Cancelled health insurance;
18. Cancelled vehicle or house insurance;
19. Make greater use of public transport or walk more;
20. Reduced visits to doctor for regular checkups;
66. Did nothing special

Other (specify) _____

88. Do not know
99. Refusal

H8. In your opinion, what was the main reason of improving the economic situation of your household? (Encircle at most 3 main reasons)

1. Household member(s) got employment
2. The salary of a household member(s) has increased
3. We started a private business

4. Profit of the household business has increased
5. Pension has been appointed/increased
6. Remittances from relatives/friends from abroad;
7. Assistance from relatives/friends in Georgia
8. Social assistance

Other (specify) _____

88. Do not know
99. Refusal

H9. In your opinion, how will the economic situation of your household change during the next 12 months? (Encircle the respective response number)

1. Will significantly worsen;
2. Will worsen;
3. Will not change essentially;
4. Will improve;
5. Will significantly improve;
88. Do not know;
99. Refusal

H10. In your opinion, how real is the risk that during the next 12 months your household will not be able to satisfy its minimum needs?

1. The risk is very high
2. The risk is higher than medium
3. The risk is medium
4. The risk is lower than medium
5. Our household will not suffer from this problem during the next 12 months
88. Do not know;
99. Refusal

H11. Did any member of your household borrow any amount of money/bank loan during the past 12 months?

1. Yes;
2. No =>H12

H12. Who did he/she borrow from?

1. A relative/a friend;
2. A private person/money lender;
3. Bank/ pawn-shop;
4. A credit association (lottery);
5. Borrowed food from the shop;

Other (specify) _____

88. Do not know;
99. Refusal.

H13. Did you pay back what you borrowed? (If the household members have borrowed several bank loans/debts during the last 12 months, the answer to this question will be the total of all debts/loans)

1. Completely;
2. Partially;
3. No

H14. Did any member of your household try without success to borrow some amount of money during the past 12 months?

1. Yes;
2. No. => J1

H15. Whom did he/she address for borrowing? (If during the last 12 months the household members have had several attempts to borrow, the answer to this and the following two question shall imply the attempt to borrow the greatest amount of money)

1. A relative/ friend;
2. A private person/money lender;

- 3. Bank/ pawn-shop;
Other (specify) _____
- 88. Do not know;
- 99. Refusal.

H16. What was the reason of refusal of lending?

- 1. Insufficient income;
- 2. Non-existence of a collateral (property, valuables);
- 3. Problems connected with previous borrowing;
- 4. The reason is unknown;
Other (specify) _____
- 88. Do not know;
- 99. Refusal.

H17. What amount did you want to borrow? (Indicate)

_____ GEL

- 99. Refusal

J. Household expenditures

Non-food expenditures during the year

J1. During the past 12 months, what were your expenditures on goods and services listed below

(Read. If there was no expenditure on an item, write "-")?

Item	Code	Expenditure (GEL)
Expenditure on purchasing transportation means or their spare parts and repair		
On purchasing an automobile or a tractor	1	
On purchasing a motor-cycle, bicycle or other transportation means (wagon, wheelbarrow, etc.)	2	
On purchasing tyres, accumulator, other spare parts and supplies	3	
On purchasing fuel and lubricants for transportation means	4	
On renting garage and parking place	5	
On paying fines and other payments connected with transportation means	6	
On diagnostics and repair of transportation means	7	
Expenditure on purchasing household items and clothes		
Furniture	8	
Household items (crockery, linen, etc.)	9	
Electric appliances (TV set, refrigerator, iron, etc.)	10	
Clothes and shoes for children	11	
Clothes and shoes for adults	12	
Expenditure on hygienic goods and cosmetics (soap, shampoo, perfume, cologne, etc.)	13	
Expenditure on leisure, recreation and entertainment		
On purchasing toys (cars, dolls, etc.)	30	
On purchasing sports equipment	31	
On gambling	32	
On hotel (sanatorium) services or renting a flat	33	
Other expenditures on recreation and entertainment (books, etc.)	34	
Expenditure on maintenance/repair of the yard, house, flat or other household property		
On repair of house or other premises (including the cost of materials and supplies)	35	
On remuneration of a workman for maintenance of the dwelling	36	
On purchasing floor-polish, window-cleaner, bath-cleaner and other similar means	37	
On hiring servant, maid, cook, etc.	38	
On repair of landline and mobile phones	39	
On repair of PC and its accessories	40	
On purchasing and installing a meter (electricity, gas, water)	41	
On repair of furniture	42	
On repair and installation of household equipment (including costs of workman's services and spare parts)	43	
On other repair	44	
Expenditure on utility services		
Rent of flat (except electricity, water and other utility charges)	45	
Water supply charges	46	
Phone charges	47	
Waste disposal and cleaning charges	48	
Elevator and other utility charges	49	
Expenditure on fuel (not for transportation means)		
Liquid gas (in gas tanks)	50	
Kerosene, diesel oil (not for transportation means)	51	
Firewood	52	
Other fuel (not for transportation means)	53	
Expenditure on goods and services related to dwelling		
Payment for long-distance and international phone calls	54	

Item	Code	Expenditure (GEL)
Payment for mobile phone calls	55	
Payment for TV channels	56	
Payment for purchasing telephone set and phone number	57	
On purchasing mobile phones	58	
On purchasing PC and its accessories	59	
Payment for internet services (DSL , ADSL)	60	
On other goods and services	61	
Other expenditure on household needs		
On textile purchased for household needs	62	
Other expenditure	63	
Expenditure on transportation of goods		
On hiring transportation means or purchasing fuel	64	
On services of loaders, storage, packing, etc.	65	
Expenditure on travel		
On travel within the country by intercity transport	68	
On travel abroad by various transportation means	69	
On food, hotel services and other expenditure during travel	70	
Expenditure connected with rites		
Food expenditure	71	
On rite-related furnishings and appurtenances, on hiring a hall etc.	72	
Other non-food expenditure: on musicians, personnel (cook, waiter) etc.	73	
Lump sum paid in connection of the rite	74	
Expenditure on gifts		
Expenditure on gifts (own production must be evaluated in GEL)	75	
Amount of gift money	76	
Expenditure on food purchased for processing		
Cereal crops (maize, wheat, etc.)	77	
Grapes (for wine, vodka, grape juice etc.)	78	
Fats for canned food	79	
Tomato, sour plum for sauces	80	
Fruit for compotes and jams	81	
Vegetables (tomato, eggplant, pepper, carrot and others) for canned lunch	82	
Meat for canning	83	
Sugar and other food items, total	84	
Other expenditure		
Money or parcel sent to relatives/friends abroad (assess the approximate value of the parcel in GEL)	85	
Money gifted to relatives/friends or the value of gifted items (except those connected with rites)	86	
On financial and brokerage services (cash transfer, etc.)	87	
On legal services (of a notary, lawyer, etc.)	88	
On baths, barber/hairdresser and other services	89	
Other expenditure (specify)		

J2. During the past 7 days, what were your expenditures on food? (Ask about daily expenditures. Make use of the diary. Indicate the amount in GEL. If no expenditures, write “-“)

Product name	Code	Day 1		Day 2		Day 3		Day 4		Day 5		Day 6		Day 7	
		Quantity	Value												
Cereals and legumes															
Bread (purchased) (kg)	1														
Wheat flour (kg)	2														
Corn flour(kg)	3														
Beans, peas, etc. (kg)	4														
Rice(kg)	5														
Buckwheat, semolina(kg)	6														
Pasta (kg)	7														
Meat and meat products															
Poultry meat(kg)	8														
Beef or pork(kg)	9														
Bacon, ham, lard, etc. (kg)	10														
Sausages(kg)	11														
Animal fat(kg)	12														
Fish															
Fresh or frozen fish(kg)	13														
Salted, smoked fish(kg)	14														
Caviar(kg)	15														
Animal products															
Milk(l)	16														
Milk powder, canned milk (condensed) (kg)	17														
Cheese(kg)	18														
Kefir, yoghurt(kg)	19														
Sour cream, cottage cheese, curd(kg)	20														
Eggs (pieces)	21														
Fats															
Butter (including melted) (kg)	22														
Margarine and vegetable fats(kg)	23														
Vegetable oils and other fats(l)	24														
Canned food															
Canned meat(kg)	25														
Canned fish(kg)	26														
Canned vegetables(kg)	27														
Canned fruit(kg)	28														
Sauces(l)	29														
Mushrooms, canned mushrooms(kg)	30														
Vegetables															
Melon, water-melon(kg)	31														
Pumpkin(kg)	32														
Potato(kg)	33														
Carrot, beet, cabbage(kg)	34														
Tomato, cucumber(kg)	35														
Green onion, greenery, radish(kg)	36														

Onion(kg)	37																		
Garlic(kg)	38																		
Eggplant and marrow(kg)	39																		
Green beans(kg)	40																		
Other vegetables (kg)	41																		
Confectionery																			
Sugar(kg)	42																		
Honey(kg)	43																		
Churchkhela [<i>Georgian delights</i>] (kg)	44																		
Jams(kg)	45																		
Cakes, ice cream(kg)	46																		
Rolls or pies(kg)	47																		
Chocolate, sweets(kg)	48																		
Kissel(kg)	49																		
Mayonnaise(kg)	50																		
Tea, coffee(kg)	51																		
Other confectionery(kg)	52																		
Beverages and cigarettes																			
Cigarettes(box)	53																		
Coca-cola, Fanta, lemonade, juices(l)	54																		
Mineral water(l)	55																		
Wine(l)	56																		
vodka, brandy, liqueur(l)	57																		
Beer(l)	58																		
Other beverages(l)	59																		
Fruit																			
Apple, pear, peach, nectarine(kg)	60																		
Plums and prunes(kg)	61																		
Cherries(kg)	62																		
Tangerine, orange, lemon(kg)	63																		
Persimmon(kg)	64																		
Fig, pomegranate(kg)	65																		
Grape(kg)	66																		
Banana, pineapple, etc. (kg)	67																		
Berries(kg)	68																		
Walnut (without shell) (kg)	69																		
Hazelnut (without shell) (kg)	70																		
Sunflower seeds(kg)	71																		
Baby food																			
Hippi(kg)	72																		
Humana(kg)	73																		
Nani(kg)	74																		
Malish(kg)	75																		
Other baby food(kg)	76																		

Food Consumption
J3. Food consumed during the week

Product name	Code	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Cereals and legumes								
Bread (purchased) (kg)	1							
Wheat flour(kg)	2							
Corn flour(kg)	3							
Beans, peas, etc. (kg)	4							
Rice(kg)	5							
Buckwheat, semolina(kg)	6							
Pasta (kg)	7							
Meat and meat products								
Poultry meat(kg)	8							
Beef or pork(kg)	9							
Bacon, ham, lard, etc. (kg)	10							
Sausages(kg)	11							
Animal fat(kg)	12							
Fish								
Fresh or frozen fish(kg)	13							
Salted, smoked fish(kg)	14							
Caviar(kg)	15							
Animal products								
Milk(l)	16							
Milk powder, canned milk (condensed) (kg)	17							
Cheese(kg)	18							
Kefir, yoghurt(kg)	19							
Sour cream, cottage cheese, curd(kg)	20							
Eggs(pieces)	21							
Fats								
Butter (including melted) (kg)	22							
Margarine and vegetable fats(kg)	23							
Vegetable oils and other fats(l)	24							
Canned food								
Canned meat(kg)	25							
Canned fish(kg)	26							
Canned vegetables(kg)	27							
Canned fruit(kg)	28							
Sauces(l)	29							
Mushrooms, canned mushrooms(kg)	30							
Vegetables								
Melon, water-melon(kg)	31							
Pumpkin(kg)	32							
Potato(kg)	33							
Carrot, beet, cabbage(kg)	34							
Tomato, cucumber(kg)	35							
Green onion, greenery, radish(kg)	36							
Onion(kg)	37							

Garlic(kg)	38							
Eggplant and marrow(kg)	39							
Green beans(kg)	40							
Other vegetables and melons(kg)	41							
Confectionery								
Sugar(kg)	42							
Honey(kg)	43							
Churchkhela(kg)	44							
Jams(kg)	45							
Cakes, ice cream(kg)	46							
Rolls or pies(kg)	47							
Chocolate, sweets(kg)	48							
Kissel(kg)	49							
Mayonnaise(kg)	50							
Tea, coffee(kg)	51							
Other confectionery(kg)	52							
Beverages and cigarettes								
Cigarettes(boxes)	53							
Coca-cola, Fanta, lemonade, juices(l)	54							
Mineral water(l)	55							
Wine(l)	56							
Vodka, brandy, liqueur(l)	57							
Beer(l)	58							
Other beverages(l)	59							
Fruit								
Apple, pear, peach, nectarine(kg)	60							
Plums and prunes(kg)	61							
Cherries(kg)	62							
Tangerine, orange, lemon(kg)	63							
Persimmon(kg)	64							
Fig, pomegranate(kg)	65							
Grapes (kg)	66							
Banana, pineapple etc. (kg)	67							
Berries(kg)	68							
Walnut (without shell) (kg)	69							
Hazelnut (without shell) (kg)	70							
Sunflower seeds(kg)	71							
Baby food								
Hippi(kg)	72							
Humana(kg)	73							
Nani(kg)	74							
Malish(kg)	75							
Other baby food(kg)	76							

J4. Weekly expenditure on eating out, in GEL

Expenditure	In a week
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	

J5. Weekly expenditure on non-food goods and services, in GEL

Expenditure	In a week
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	

J6. Indicate how many household members had Breakfast/lunch/dinner and how many at home or outside home

At home	
Outside home	

J7. Indicate how many non-household members had Breakfast/lunch/dinner, and how many, in the household

Persn/meals	
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Thank you for cooperation!!

K. Interviewer's assessment

This block is completed by the interviewer himself/herself based on his/her visual observation. He/she does not read these questions to the respondent and does not agree the answers with him/her.

K1. General assessment of the state of the household's dwelling

1. In very bad condition
2. In bad condition
3. In medium condition
4. In normal condition
5. In good condition

K2. General assessment of economic situation of the household

1. Extremely poor
2. Very poor
3. Poor
4. Medium wealth
5. Wealth above medium

K3. Assessment of reliability of information provided by the household.

	Income and expenditure item	More or less correct	Underreported	Overreported	Difficult to assess
K3.1	Regular incomes (D1)	1	2	3	4
K3.2	Non-regular incomes (D2)	1	2	3	4
K3.3	Annual expenditure on non-food items (J1)	1	2	3	4
K3.4	Daily food expenditure (J2)	1	2	3	4
K3.5	Daily food consumption (J13)	1	2	3	4
K3.6	Daily expenditure out of home (J4-J5)	1	2	3	4
K3.7	Number of person-meals at home (J6-J7)	1	2	3	4

K4. How daily expenditures were recorded

1. The questionnaire was filled in as a result of one visit;
2. The diary was completed by the household and I only moved the data to the questionnaire;
3. The household refused to complete the diary and I recorded by asking them directly within two visits;
4. The household was unable to complete the diary and I recorded by asking them directly within two visits;
5. I was unable to record a part of the expenditures

K5. How easy was it to interview the household?

1. The household consented easily to the interview;
2. The household consented to the interview but refused to fill in the diary;
3. I obtained their consent to the interview with difficulty but the answers were careful;
I obtained their consent to the interview with difficulty and the answers were careless;

Interviewer's comment

Supervisor's comment

Supervisor's signature _____