

German Institute for
Economic Research
DIW Berlin

Center for Social
and Economic Research
SOCECONIC

Center for Social and
Economic Research
CASE-Kyrgyzstan

Panel survey of households

LIFE IN KYRGYZSTAN IN 2012

The research project "Economic Transformation, Household Behavior and Well-Being in Central Asia: The Case of Kyrgyzstan"

Questionnaire for Individuals

HOUSEHOLD IDENTIFICATION

Household code 2010	
Household code 2011	
Household code 2012	

Interviewer code	
Supervisor code	

Name of respondent _____

Individual Code _____
(from the main household roster)

Did respondent complete this questionnaire for individuals in 2011 survey?

Yes	1
No	2

SURVEY RESULTS

Interview No.	Date of visit (DD.MM)	Time of interview		Other person(s) present?	Interviewer assessment of interview	Comments (If "unreliable", please indicate reason here)
		Start (HH:MM)	Finish (HH:MM)			
				1 Yes	1 Reliable	
				2 No	2 Unreliable	
1						
2						
3						

- ☐ Individual questionnaire is fully completed
☐ Individual questionnaire is partly completed

Questionnaire printed in	1	Russian
	2	Kyrgyz

Reasons for incomplete answers

<input type="checkbox"/>	Refusal to answer some questions
<input type="checkbox"/>	Respondent not prepared for long interview
<input type="checkbox"/>	Other, please specify _____

Which modules?

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1. SUBJECTIVE WELL-BEING

Now I would like to ask you about your satisfaction with different aspects of your life

		0	1	2	3	4	5	6	7	8	9	10	Not applicable (90)
		Rate: 0 (Completely dissatisfied) -----> 10 (Completely Satisfied)											
I100	How satisfied are you with your life, all things considered? Please rate from 0 (completely dissatisfied) to 10												
I101	How satisfied are you today with the following areas of your life? Please rate them from 0 (completely dissatisfied) to 10 (completely satisfied)												
1	Your health												
2	Your job (if employed)												
3	Your household income												
4	Your personal income												
5	Standard of living of your household												
6	Your dwelling												
7	Your family life												
8	The quality of education at your children's / grand children's school												
9	Your security												
10	Childrens/young generation's future												
11	How would you rate your own current overall situation compared with other people in this town or village?												
12	How satisfied are you with the current economic situation of your household?												
13	How would you rate your household's current economic situation compared with other people in this town or village?												
					highly increased	moderately increased	stayed the same	moderately decreased	highly decreased				
					1	2	3	4	5				
I102a	How do you think you will feel in one year from now (all things considered)?												
I102b	If you look back 1 year, how has your overall feeling of satisfaction with your life changed since that date?												
I102c	How do you think the economic situation of your household will be in one year from now?												
I102d	If you look back 1 year, how has your household's economic situation changed since that date?												
I103	How do you see yourself, are you generally a person who is fully willing to take risks or do you avoid taking risks?	0	1	2	3	4	5	6	7	8	9	10	
		(0) Completely unwilling to take risks -----> (10) Completely willing to take risks											

2. EDUCATION, HEALTH AND PERSONALITY

2. A. EDUCATION

I would like to ask you now about your education

I200a	Did you attend kindergarden before your primary school?	Yes	1
		No --> go to I201	2
I200b	How long did you attend kindergarden?	_____ years	
		Do not remember / do not know	99
I201	Can you read?	Yes, easily	1
		Yes, with difficulty	2
		No	3
I202	Can you write?	Yes, easily	1
		Yes, with difficulty	2
		No	3
I203	Are you currently enrolled at an educational institution?	Yes	1
		No --> go to I207	2
I204	In what level are you enrolled in the current academic year (2011-2012)?	At a general school (grades 1-11)	1
		Secondary special	2
		Secondary technical	3
		University (bachelor, diploma, master)	4
		Kandidate or doctor nauk	5
I205	In what grade/year are you enrolled in the current academic year (2012-2013), i.e. in which year of school or university	_____	
I205a	Are you a full-time or part-time student?	Full-time	1
		Part-time	2
I206	Are you currently attending the educational institution (incl. school holidays)?	Yes	1
		No	2
I207	What is the highest degree you obtained so far (certificate / diploma)?	Illiterate	1
		Primary	2
		Basic	3
		Secondary general	4
		Primary Technical	5
		Secondary professional / special	6
		University (bachelor, diploma, master)	7
		Kandidate or doctor nauk	8
	If answer option 1-4 is chosen --> go to I211		
I208	What was the last subject area that you specialised in?	Natural sciences	1
		Education	2
		Medicine/Dentistry	3
		Technical sciences/Engineering	4
		IT/Computer Sciences	5
		Agriculture/Veterinary services	6
		Economics/Finance/Business	7
		Law	8
		International relations/Other social sciences	9
		Languages/Arts	10
		Others	11
		Not applicable	90
I209	How many years, if any, did you study on a distance learning	_____ years (If None, write 0)	
I210	Do you have a second higher education?	Yes	1
	<i>Only for respondents who answered I207=7 or 8</i>	No	2
I210a	In total, how many years did you study in post-secondary education such as technikum or university?	_____ years	
I210b	What was the primary language of teaching in your post-secondary studies?	Kyrgyz	1
		Uzbek	2
		Russian	3
		Other	4
I210c	How many times did you do an internship during your post-secondary studies?	_____ times	
		Not applicable	99

2. A. EDUCATION (cont)

I211	What type of school was the last school you attended?	Public	1
		Private	2
		International	3
		Other	4
		Never went to school -> go to I213b	5
I211a	To what extent was the education you obtained there useful for your professional life?	Very useful	1
		Useful	2
		Not useful at all	3
		Not applicable	90
I211b	How many years, in total, did you study in secondary school?	_____ years	
I211f	What was the primary language of teaching in your secondary study?	Kyrgyz	1
		Uzbek	2
		Russian	3
		Other	4
I211g	In which type of settlement was the secondary school that you graduated from located?	Bishkek	1
		Other city	2
		Village of town type	3
		Village	4
		Other	5
I211c	At the end of your secondary school, did you participate in the National Unified Test which takes place since 2002?	Yes	1
		No --> go to I212	2
I211d	If you participated in the National Unified Test, what was your score?	_____ points	
		Do not know	99
I212	Did you ever study abroad? (including the former members of Soviet Union)	Yes	1
		No	2
I213	How many hours per week do you use a computer for work or study purposes?	_____ hours per week	
I213a	Where do you get access to Internet for work or study purposes? (Mark all that are applicable)	At home	1
		At work	2
		At school/college/university	3
		Internet provider shops/cafes	4
		Never use(d) Internet	6
I213c	Do you have a current or savings account in a bank or in another financial institution?	Yes	1
		No	2
The following question should only be answered by men.			
I213b	Have you served in the military forces during Soviet Times?	Yes	1
		No	2

2. EDUCATION, HEALTH AND PERSONALITY

2.B. HEALTH

Now, I would like to ask you about your state of health

I214	Have you suffered from any of the following illnesses in the last 12 months? (multiple answers allowed)	Myocardial infarction (heart attack)	1
		High blood pressure	2
		Stroke	3
		Anemia	4
		Tuberculosis	5
		Kidney disease	6
		Flu/Cold	7
		Gastrointestinal	8
		Liver disease	9
		Gynecological illness	10
		Other	11
		Haven't suffered from any of them	12
I215	Do you have any kind of chronic illness? (multiple answers allowed)	Heart disease	1
		Illness of lungs	2
		Liver disease	3
		Kidney disease	4
		Brucellosis	5
		Gastrointestinal	6
		High Blood pressure	7
		Low Blood pressure	8
		Spinal problems	9
		Diabetes	10
		Other	11
		Don't have any	12
I216	How many times have you consulted a doctor/dentist for any illness, infection during the last 12 months? (write 0, if none)	_____ times	
I217	How many nights did you spend in a hospital due to any illness or infection during the last 12 months? (write 0, if none)	_____ nights	
I217a	How many days, in total, did you miss from work, study or your usual activities due to illness in the last 12 months? (write	_____ days	
I218	If you had to pay for health treatment in the last 12 months, could you/ your family afford the expenses?	Yes	1
		No	2
		Not applicable	90
I218a	What is your height? (as reported by the respondent)	_____ cm	
I218b	What is your current weight? (as reported by the respondent)	_____ kg	
I219	Do you smoke?	Yes	1
		No --> go to I220	2
I219a	How many cigarettes per day do you usually smoke?	_____ cigarettes	
I220	Do you drink alcoholic beverages?	Yes	1
		No --> go to I224	2
I221	How often did you drink alcoholic beverages in the last 30 days?	Every day	1
		4-6 times a week	2
		1-3 times a week	3
		1-3 times in the last 30 days	4
		Didn't drink alcohol --> go to I223	5
I222	Which of the following alcoholic beverages did you drink during the last 30 days and, if so, how many liters do you usually consume during a day? (multiple answers possible)	1 liter == 1000 grams	
			Liters
		Beer	1
		Dry wine, champagne	2
		Home-made alcoholic beverages	3
		Vodka or other hard liquor	4
Others	5		
I224	Do you do any sport or any health supporting exercises?	Yes, regularly	1
		Yes, sometimes	2
		No	3

2. EDUCATION, HEALTH AND PERSONALITY

2.C. PERSONALITY

Now I want to ask about your personality

I536	On a scale from 1 to 5, how much do you agree with the following statements? I see myself as someone who...	Strongly disagree				Fully agree
		1	2	3	4	5
1	...keeps distance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	...Tends to find fault with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	... Does a thorough job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	...Is depressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	...Is curious about many different things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	...Generates a lot of enthusiasm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	... Generally trusts other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	...Tends to be lazy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	...Is relaxed, handles stress well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	...Is ingenious, a deep thinker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	...Tends to be quiet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	...Can be cold and aloof	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	...Is inventive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	...Worries a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	...Has an active imagination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16	...Is outgoing, sociable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17	...Is sometimes rude to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18	...Makes plans and follows through with them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19	...Gets nervous easily	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20	...Values art and esthetic events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21	...Has few artistic interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. LABOUR MARKET

3.A. CURRENT EMPLOYMENT STATUS

Now I would like to ask you about your employment status

I301	During the past 7 days, have you worked for someone who is not a member of your household, e.g. for an enterprise, company, farm, the government, or any other individual?	Yes	1
		No	2
I302	During the past 7 days, have you worked on a farm or in a business owned or rented by you or another member of your household?	Yes	1
		No	2
I303	In the past 7 days, have you done any farming, fishing, hunting, or gathering of fruit, berries, nuts or other products?	Yes	1
		No	2
I304	Do you have a permanent job, own business, other income-generating activity, or work as an unpaid family worker where you were absent during the last 7 days but to which you will return?	Yes	1
		No	2
If at least one answer = Yes --> go to Section 3.B.			
If all answers (I301- I304) = No --> go to Section 3.C.			

3.B.OVERVIEW OF WORK DURING THE LAST 7 DAYS

I305	During the last 7 days, what was your work/occupation? If you had several different occupations, please name the two in which you spent most of your time. (If you did not work during the last 7 days, please refer to the last 7 days you worked)	1.	
		2.	
I306	How many hours did you spend doing each of these occupations respectively during the last 7 days? (Not hours per day but total hours during the last 7 days)	1.	
		2.	

3.B.1. MAIN EMPLOYMENT

Now, I would like to ask you some **questions about your work as ...** (the occupation in which the person spent most time in the last 7 days).

Interviewer: If the answer to I305 on the occupation is precise enough to answer I307 and I308 yourself, please enter the position and sector right away and go on with question I309. If it is not precise enough, read the answer options aloud to the respondent and ask him/her to tell you his/her position and sector. If he/she does not know, please ask for further details on the occupation to determine it yourself.

I307	In your work as... , which position do you hold?	Legislator, Senior official, Manager	1
		Professional	2
		Technician, Associated professional	3
		Clerk	4
		Service worker, shop or market sales worker	5
		Skilled agricultural or fishery worker	6
		Craft and related trades	7
		Plant or machine operator or assembler	8
		Unskilled worker	9
		Armed forces	10
I308	In which sector is your occupation as ...?	Agriculture and fishing	1
		Mining	2
		Manufacturing	3
		Energy and water	4
		Construction	5
		Trade and repair	6
		Hotels and restaurants	7
		Transport and communications	8
		Finance	9
		Real estate, renting and business activities	10
		Public administration	11
		Education	12
		Health and social work	13
		Utilities, social and personal services	14
		Private households with employed persons	15
		Extra-territorial organizations (e.g. embassies, UN)	16

3.B.1. MAIN EMPLOYMENT (cont)

I309	For how many months or years have you been working on this job? (Only indicate number of months if total time is less than 1 year)	Months: _____	1
		Years: _____	2
I310	In this work, what is your wage status? Are you ...?	Employer	1
		Own-account worker	2
		Employee	3
		Member of a producers' cooperative	4
		Contributing family worker	5
		Other	6
If answers to I310 are 3,4,5, or 6 --> go to I315			
<i>Questions I311-I314 are for Employers and Own-account workers ONLY</i>			
I311	Is your business officially registered?	Yes	1
		No	2
I312	Do you have any employees, except for yourself?	Yes	1
		No --> go to I314	2
I313	How many employees do you have who are not members of your household? (write 0, if none)	_____	
I314	In this work, what are your profits? (Indicate either Som or US Dollar; only one time unit)	_____ Som (1) per _____	Day 1
			Week 2
		_____ US Dollar (2) per _____	Month 3
--> go to Section 3.B.2			
<i>Questions I315-I321 are for Employees, Family workers, Cooperative members and others ONLY</i>			
I315	How many employees work at your workplace?	_____ employees	
I316	When you started this work, did you sign a written contract?	Yes	1
		No	2
I316a	Do you have a written contract now at this work?	Yes	1
		No	2
I317	Do you use a "work book" for this job?	Yes	1
		No	2
I318	Are you entitled to the benefits of social security in this job?	Yes	1
		No	2
I319	Do you receive any wage income for this work?	Yes	1
		No --> go to Section 3.B.2	2
I320	How much do you earn? (Indicate either Som or US Dollar; only one time unit)	_____ Som (1) per _____	Day 1
			Week 2
		_____ US Dollar (2) per _____	Month 3
I321	During the last 12 months, did you have any wage arrears (overdue wages) at this job?	Yes	1
		No --> go to Section 3.B.2	2
I321a	What amount does your employer owe you in overdue wages today?	_____ Soms	

3.B.2. ADDITIONAL EMPLOYMENT

If the respondent indicated having only one job, then proceed to section 3.D.

Now, I would like to ask you some questions about your work as ... (the occupation the person spent <u>second most time</u> in last 7 days).			
I322	In this work, which position do you hold?	Legislator, Senior official, Manager	1
		Professional	2
		Technician, Associated professional	3
		Clerk	4
		Service worker, shop or market sales worker	5
		Skilled agricultural or fishery worker	6
		Craft and related trades	7
		Plant or machine operator or assembler	8
		Unskilled worker	9
		Armed forces	10
I323	In which sector is your occupation as ...?	Agriculture and fishing	1
		Mining	2
		Manufacturing	3
		Energy and water	4
		Construction	5
		Trade and repair	6
		Hotels and restaurants	7
		Transport and communications	8
		Finance	9
		Real estate, renting and business	10
		Public administration	11
		Education	12
		Health and social work	13
		Utilities, social and personal services	14
		Private households with employed persons	15
		Extra-territorial organizations (e.g. embassies, UN)	16
I324	For how many months or years have you been working in this job? (Only indicate number of months if total time less than 1 year)	Months: _____	1
		Years: _____	2
I325	In this work, what is your wage status? Are you ...?	Employer	1
		Own-account worker	2
		Employee	3
		Member of a producers' cooperative	4
		Contributing family worker	5
		Other	6
If answers to I325 are 3,4,5, or 6 -> go to I330			
Questions I326-I329 are for Employers and Own-account workers ONLY			
I326	Is your business officially registered?	Yes	1
		No	2
I327	Do you have any employees, except for yourself?	Yes	1
		No -> go to I329	2
I328	How many employees do you have who are not members of your household? (write 0, if none)	_____	
I329	In this work, what are your profits? (Indicate either Som or US Dollar; only one time unit)	_____ Som (1) per _____	Day 1
		_____ US Dollar (2) per _____	Week 2
			Month 3
-> go to Section 3.D.			
Questions I330-I336 are for Employees, Family workers, Cooperative members and others ONLY			
I330	How many employees are working at your workplace?	_____ employees	
I331	When you started this work, did you sign a written contract?	Yes	1
		No	2
I332	Do you use a "work book" for this job?	Yes	1
		No	2
I333	Are you entitled to the benefits of social security in this job?	Yes	1
		No	2
I334	Do you receive any wage income for this work?	Yes	1
		No -> Go to Section 3.D	2
I335	How much do you earn? (Indicate either Som or US Dollar; only one time unit)	_____ Som (1) per _____	Day 1
		_____ US Dollar (2) per _____	Week 2
			Month 3
I336	During the last 12 months, did you have any wage arrears (overdue wages) at this job?	Yes	1
		No	2
-> go to Section 3.D.			

3. LABOUR MARKET

3.C. CURRENT UNEMPLOYMENT OR INACTIVITY

I337	Have you ever had a job (in an enterprise, farm, household...) or your own business?	Yes	1
		No --> go to I342	2
I338	In which month and year were you laid off?	Month _____	Year _____
I339	Why did your last employment end?	Closing down of enterprise	1
		Reorganization or personnel reduction	2
		Expiration of the employment contract	3
		Dismissal initiated by employer	4
		End of farming season	5
		Illness or injury	6
		Retirement	7
		Marriage	8
		To take care of family members (incl. maternity leave)	9
		Change of residence	10
		Political insecurity / violence	11
		Other reason	12
I340	In what sector was your job?	Agriculture and fishing	1
		Mining	2
		Manufacturing	3
		Energy and water	4
		Construction	5
		Trade and repair	6
		Hotels and restaurants	7
		Transport and communications	8
		Finance	9
		Real estate, renting and business activities	10
		Public administration	11
		Education	12
		Health and social work	13
		Utilities, social and personal services	14
		Private households with employed persons	15
		Extra-territorial organizations (e.g. embassies, UN)	16
I341	Which position did you hold in your last job?	Legislator, Senior official, Manager	1
		Professional	2
		Technician, Associated professional	3
		Clerk	4
		Service worker, shop or market sales worker	5
		Skilled agricultural or fishery worker	6
		Craft and related trades	7
		Plant or machine operator or assembler	8
		Unskilled worker	9
		Armed forces	10

3.C. CURRENT UNEMPLOYMENT OR INACTIVITY (cont)

I342	Have you been looking for work during the past 7 days?	Yes --> go to I344	1
		No	2
I343	What is the main reason you have not been looking for work? (Mark only one) Then go to I345	Waiting for a job to start	1
		Waiting for reply/recall from employer	2
		Waiting for busy season	3
		Student	4
		Retraining (without prospect of returning to a job)	5
		Housewife / take care of a child or grandchild	6
		Too old/ retired	7
		Sick / handicapped	8
		No possibility to find a job	9
		Discouraged to find a job after the long efforts	10
		Don't know how to start a business	11
		Have no money to start a business	12
		No need to work	13
		Political instability/violence	14
		Moving abroad or elsewhere in Kyrgyzstan	15
		Other reasons	16
I344	Whom or what did you consult during your search of a job? (multiple answers allowed)	Former boss/ employer	1
		Employment agency	2
		Friends	3
		Relatives	4
		Newspaper	5
		Internet	6
		Intermediary	7
		Other	8
I345	Which are the main challenges in finding a job or opening an own business today? (multiple answers allowed)	Economic downturn	1
		Financial crisis	2
		Wrong season	3
		There are not enough jobs	4
		Need to have right qualification	5
		Need to have "connections"	6
		Difficult access to financing	7
		Difficult to get necessary permits	8
		Political instability/violence	9
		Others	10
		Don't know	99

3. LABOUR MARKET

3.D. OVERVIEW OF WORK DURING THE LAST 12 MONTHS

Now, I would like to talk to you about your activity during the last 12 months. For each of the past 12 months, please tell me what your **main activity** has been, i.e. the occupation you spent most time in during that month.

Activity		Oct 2011	Nov 2011	Dec 2011	Jan 2012	Feb 2012	Mar 2012	Apr 2012	May 2012	Jun 2012	Jul 2012	Aug 2012	Sep 2012
I346	At school/ university 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Apprenticeship, internship or retraining 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Military service 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Employee in agriculture 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Employee in non-agricultural activities 5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Own-account worker in agriculture 6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Own-account worker in non-agricultural activities 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Employer 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Member of a producers' cooperative 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Contributing family worker 10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Unemployed 11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Housewife 12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Retired (also early retirement) 13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Administrative leave without pay 14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Maternity Leave 15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Vacation/Holiday 16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Sickness/Disability 17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other 18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. LABOUR MARKET

3.E. LABOUR MARKET CV SINCE 1989

If the respondent participated in this survey last year (2011), please go to Module 4.

I348. In year... .. were you ...?		1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Not yet born	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Age 0 to 6	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
At school/ university	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Apprenticeship, internship or retraining	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Military service	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee in agriculture	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee in non-agricultural activities	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Own-account worker in agriculture	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Own-account worker in non-AG activities	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employer	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member of a producers' cooperative	11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contributing family worker	12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unemployed	13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Housewife	14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retired (also early retirement)	15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Administrative leave without payment	16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maternity Leave	17	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sickness/disability	18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	19	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do not know	20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. MOVEMENTS

Now I would like to ask you a few questions on your previous residences and movements in Kyrgyzstan

I401	Were you born in this oblast/city you currently live in?	Yes --> go to I406	1
		No	2
I402	Where were you born?	Issyk-Kul oblast	2
		Jalal-Abad oblast	3
		Naryn oblast	4
		Batken oblast	5
		Osh oblast	6
		Talas oblast	7
		Chui oblast	8
		Bishkek (Frunze)	11
		Osh City	21
If answer is "Outside Kyrgyzstan" for I402, please ask the following two questions, otherwise move to I403:			
I402a	In which country were you born?	_____ (country coding below)	
I402b	When did you leave this country?	_____ year	
I403	Where did you live before coming to this current place of living?	Issyk-Kul oblast	2
		Jalal-Abad oblast	3
		Naryn oblast	4
		Batken oblast	5
		Osh oblast	6
		Talas oblast	7
		Chui oblast	8
		Bishkek (Frunze)	11
		Osh City	21
		I always lived here --> go to I407	77
If answer is "Outside Kyrgyzstan" for I403, please ask the following two questions, otherwise move to I404:			
I403a	In which country have you lived before Kyrgyzstan?	_____ (country coding below)	
I403b	When did you leave this country?	_____ year	
I404	What kind of area was your previous place of living?	Bishkek	1
		Other city	2
		Village of town type	3
		Village	4
		Other	5
I404a	When did you move to your current place of living?	_____ year	
I405	Why did you move from your previous place of residence to your current place of residence?	Due to family considerations	1
		Job change	2
		Looking for a job	3
		School, study	4
		Marriage	5
		Military service	6
		Threat of violence	7
		Environmental hazards	8
		Escalation of interethnic conflicts	9
		Fear for safety/ security	10
		Government moved the household	11
		Other reason	12
I406	How many times did you move during the last 5 years (for more than 1 month)? (Do not count movements within same city/town/village)	_____ times	
I407	Did you ever live abroad for more than 1 month (excluding vacation, family visits, business trips)?	Yes	1
		No-->go to I411	2
I408	How long did you live abroad during your last stay (in months)?	_____ months	
I409	In which country did you stay during your last stay? (Codings below)	_____	

4. MOVEMENTS (cont)

I410	During the last 12 months, have you been abroad for more than 1 month (excluding vacation, visiting, business trips) ?		Yes	1																																																																								
			No	2																																																																								
I411	During the last 12 months, have you been elsewhere in Kyrgyzstan for more than 1 month (excluding vacation, visiting, business trips) ?		Yes	1																																																																								
			No	2																																																																								
If both I410 and I411 answered "No" --> go to I413																																																																												
I412	Please tell me in which months you were elsewhere in Kyrgyzstan or abroad since October 2011. <table border="1"> <tr><td>Oct 2011</td><td></td><td></td><td></td></tr> <tr><td>Nov 2011</td><td></td><td></td><td></td></tr> <tr><td>Dec 2011</td><td></td><td></td><td></td></tr> <tr><td>Jan 2012</td><td></td><td></td><td></td></tr> <tr><td>Feb 2012</td><td></td><td></td><td></td></tr> <tr><td>Mar 2012</td><td></td><td></td><td></td></tr> <tr><td>Apr 2012</td><td></td><td></td><td></td></tr> <tr><td>May 2012</td><td></td><td></td><td></td></tr> <tr><td>Jun 2012</td><td></td><td></td><td></td></tr> <tr><td>Jul 2012</td><td></td><td></td><td></td></tr> <tr><td>Aug 2012</td><td></td><td></td><td></td></tr> <tr><td>Sep 2012</td><td></td><td></td><td></td></tr> </table>		Oct 2011				Nov 2011				Dec 2011				Jan 2012				Feb 2012				Mar 2012				Apr 2012				May 2012				Jun 2012				Jul 2012				Aug 2012				Sep 2012				<table border="1"> <tr> <th>1) In Kyrgyzstan, not at home</th> <th>2) Outside of Kyrgyzstan</th> </tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>		1) In Kyrgyzstan, not at home	2) Outside of Kyrgyzstan																						
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1) In Kyrgyzstan, not at home	2) Outside of Kyrgyzstan																																																																											
I412a	Are you planning to move within Kyrgyzstan in the following 12 months for more than 1 month (excluding vacation, family visits, business trips) ?		Yes	1																																																																								
			No-->go to I413	2																																																																								
I412b	Which oblast are you planning to move to? (see oblast codings below)		_____																																																																									
I413	Are you planning to move abroad within the following 12 months for more than 1 month (excluding vacation, family visits, business trips) ?		Yes	1																																																																								
			No-->go to I415	2																																																																								
I414	Which country are you planning to move to? (see country codings below)		_____																																																																									
I415	If affordable, which country would you like to move to? (See codings below)		_____ country (code)																																																																									
			Not applicable	90																																																																								
<table border="1"> <thead> <tr> <th>Country coding</th> <th></th> <th>Codes of oblasts</th> <th></th> </tr> </thead> <tbody> <tr><td>Russia</td><td>1</td><td>Issyk-Kul oblast</td><td>2</td></tr> <tr><td>Kazakhstan</td><td>2</td><td>Jalal-Abad oblast</td><td>3</td></tr> <tr><td>Tajikistan</td><td>3</td><td>Naryn oblast</td><td>4</td></tr> <tr><td>Uzbekistan</td><td>4</td><td>Batken oblast</td><td>5</td></tr> <tr><td>USA</td><td>5</td><td>Osh oblast</td><td>6</td></tr> <tr><td>Turkey</td><td>6</td><td>Talas oblast</td><td>7</td></tr> <tr><td>Japan</td><td>7</td><td>Chui oblast</td><td>8</td></tr> <tr><td>China</td><td>8</td><td>Bishkek</td><td>11</td></tr> <tr><td>European countries</td><td>9</td><td>Osh city</td><td>21</td></tr> <tr><td>Other CIS countries</td><td>10</td><td></td><td></td></tr> <tr><td>Other Asian countries</td><td>11</td><td></td><td></td></tr> <tr><td>Other</td><td>12</td><td></td><td></td></tr> </tbody> </table>					Country coding		Codes of oblasts		Russia	1	Issyk-Kul oblast	2	Kazakhstan	2	Jalal-Abad oblast	3	Tajikistan	3	Naryn oblast	4	Uzbekistan	4	Batken oblast	5	USA	5	Osh oblast	6	Turkey	6	Talas oblast	7	Japan	7	Chui oblast	8	China	8	Bishkek	11	European countries	9	Osh city	21	Other CIS countries	10			Other Asian countries	11			Other	12																						
Country coding		Codes of oblasts																																																																										
Russia	1	Issyk-Kul oblast	2																																																																									
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Tajikistan	3	Naryn oblast	4																																																																									
Uzbekistan	4	Batken oblast	5																																																																									
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Other CIS countries	10																																																																											
Other Asian countries	11																																																																											
Other	12																																																																											

5. FAMILY AND HOUSEHOLD

5.A. FAMILY

Now I would like to ask questions about your family and parents

I500	If your spouse/partner lives in this household now, please indicate his or her individual ID code (see the HH roster)		_____ ID	
			Not applicable 90	
If the respondent participated in this survey last year (2011), please go to Section 5.B.				
I501	How many brothers and sisters do you currently have? (If none, write 0)		_____	
I502	How many children do you currently have? (If none, write 0)		_____	
I504	Which of the following members of groups would you accept to be your son or daughter in law?		1 Yes	2 No
		of different education	1	
		of different social status	2	
		of different ethnic background	3	
		of different religious beliefs	4	
		Mother	Father	
I504a	Was your mother and/or father a member of the Communist Party during Soviet times?	Yes 1		
		No -> I505 2		
I504b	If yes, when did they join?	_____ year	_____ year	
		Do not know 99	Do not know 99	
I504c	What position did they hold in the party hierarchy?	Ordinary member 1		
		Ray on or oblast level 2		
		National level 3		
I505	Is your mother in the household?	Yes 1		
		No --> go to I505b 2		
I505a	Interviewer: Please write down mother's ID from the household roster	_____ ID		
I505b	Is your father in the household?	Yes 1		
		No --> go to I506 2		
I505c	Interviewer: Please write down father's ID from the household roster	_____ ID		
If both parents are in the household, go to Section 5.B.				
If only one of the parents is in the household, the following questions relate to a missing parent only.				
I506	In which year were your parents born?	Mother		Don't know 99
		Father		Don't know 99
I507	Where were your parents born? (See Table 1: Codings below)	Mother		Don't know 99
		Father		Don't know 99
I508	Where do they live now/ where did they live before they passed away? (See Table 1: Codings below)	Mother		Don't know 99
		Father		Don't know 99
I509	What was their highest education level completed, or the highest certificate or diploma obtained? (See Table 2: Codings below)	Mother		Don't know 99
		Father		Don't know 99
I510	In which sector are they working/ have they worked in their current or last job? (See Table 3: Codings below)	Mother		Don't know 99
		Father		Don't know 99
I511	In their current or last job, which was the (highest) position your parents held? (See Table 4: Codings below)	Mother		Don't know 99
		Father		Don't know 99
I512	In this job, were they ...? (read out answer options using Table 5 below)	Mother		Don't know 99
		Father		Don't know 99

Codes for questions I507-I512

Table 1: Codings for I507 and I508	
Issyk-Kul oblast	2
Jalal-Abad oblast	3
Naryn oblast	4
Batken oblast	5
Osh oblast	6
Talas oblast	7
Chui oblast	8
Bishkek (Frunze)	11
Osh City	21
Outside Kyrgyzstan	66

Table 2: Codings for I509	
Illiterate	1
Primary	2
Basic	3
Secondary general	4
Secondary special	5
Secondary technical	6
University degree (BA, Diploma,	7
Doctoral candidate, nauk	8
Don't know	99

Table 3: Codings for I510	
Agriculture and fishing	1
Mining	2
Manufacturing	3
Energy and water	4
Construction	5
Trade and repair	6
Hotels and restaurants	7
Transport and communications	8
Finance	9
Real estate, renting and business activities	10
Public administration	11
Education	12
Health and social work	13
Utilities, social and personal services	14
Private households with employed persons	15
Extra-territorial organizations	16
Did not work	17

Table 4: Codings for I511	
Legislator, Senior official, Manager	1
Professional	2
Technician, Associated professional	3
Clerk	4
Service worker, shop or market	5
Skilled agricultural or fishery worker	6
Craft and related trades	7
Plant or machine operator or assembler	8
Unskilled worker	9
Armed forces	10
Not applicable	90

Table 5: Codings for I512	
Employer	1
Own-account worker	2
Employee	3
Member of a producers' cooperative	4
Contributing family worker	5
Other	6
Not applicable	90

5. FAMILY AND HOUSEHOLD

5.B. DECISION MAKING

Now I would like to ask you a few questions about the decision making process in your household

I513	Activity/process	Which member of the family had the main decision-making authority for the following activities in the last 12 months? (see codes below)	
1	what to grow in garden		
2	where to shop		
3	whether to buy major items (e.g. car, house)		
4	whether or not to lend money to others		
5	how much money to lend to others		
6	whether or not to borrow money from others		
7	how much money to borrow from others		
8	how to name the newborns		
9	how many children to have		
10	children's well-being/health		
11	whether children attend school		
12	whether children do their homework		
13	marriage of male household members		
14	marriage of female household members		
15	how much kalym to pay for marriage		
16	where male household member should work		
17	where female household member should work		
18	how much to spend of household income		
19	how much to save of household income		
20	where to invest household income		
21	negotiating with neighbours		
22	participation to discuss community issues		
23	migration of a household member		
24	how to use remittances		
25	taking care of elderly		

Codings for I513

Myself	1	All female household members	6
My spouse	2	All household members together	7
I together with my spouse	3	Children (under 18)	8
My parents or my parents-in-law	4	Not applicable	90
All male household members	5		

5.E. GENDER ATTITUDES

Now I want to ask about your general attitude towards the role of females in the society

I537	On a scale from 1 to 4, how much do you agree with the following statements?	Strongly disagree		Strongly agree		Don't know
		1	2	3	4	5
1	Important decisions should be made by the husband rather than the wife.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	A man's job is to earn money; a woman's job is to look after the home and family.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	A woman is really fulfilled only when she becomes a mother.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	A working woman can establish just as warm and secure of a relationship with her children as a mother who does not work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	A husband's career should be more important to the wife than her own.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	A university education is more important for a boy than for a girl.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Both the husband and the wife should contribute to the household income.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. FAMILY AND HOUSEHOLD

5. C. TIME USE

<p><i>I would now like to ask you what you did on the previous day, starting from 4am yesterday until 4am this morning. Each cell corresponds to 30 min. Please tell me the main activity you did during each half hour of the day. If you did several activities simultaneously, please record the one you did for the longest time.</i></p>													
I515		4am	5am	6am	7am	8am	9am	10am	11am	12pm	1pm		
Personal													
1	Sleep, rest												
2	Personal care												
3	Eating / tea-drinking												
4	Doctor/ health care												
Household and family													
5	Cooking, washing dishes												
6	Laundering												
7	House cleaning												
8	Shopping												
9	Repairs (housing&appliances)												
10	Other household												
11	Child care												
12	Elderly care												
13	Travel/Commuting												
14	Care of animal / poultry												
15	Gardening, yardwork												
16	Food processing												
17	Other home production												
Leisure													
18	Reading, TV, radio, computer												
19	Internet browsing												
20	Cinema, theater, concert												
21	Sport, exercises, walking												
22	Talks with friends/family												
23	Conversations on the phone												
24	Social reunion (wedding,guests)												
25	Religious activity												
26	Community work												
27	Other												
Education													
28	School/university												
29	Self-education												
Employment													
30	Waged employment												
31	One-time jobs												
32	Self-employment												
33	Unpaid family work												
34	Other / looking for a job												

5. FAMILY AND HOUSEHOLD

5. C. TIME USE

I514a. Indicate the date respondent refers for time use														I514b. Indicate the day of the week for time use														
<div></div>														<div></div>														
(dd/mm/yy)														(1=Monday --> 7=Sunday)														
2pm	3pm	4pm	5pm	6pm	7pm	8pm	9pm	10pm	11pm	12am	1am	2am	3am															
																												1
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5. FAMILY AND HOUSEHOLD

5.D WOMEN'S BACKGROUND AND FERTILITY

This module has to be completed only by FEMALE respondents. If respondent is MALE, then go to Module 6

If the respondent answered to this module last year (2011) AND there was NO change to marital status and number of children in the last 12 months, then please go to Module 6.

I516	Are you currently married?	Yes -> go to I519	1
		No	2
I517	Have you ever been married?	Yes	1
		No, I was never married ->go to I527	2
I518	What is your marital status now?	Widowed	1
		Divorced	2
		Separated	3
I519	Have you been married once, or more than once?	Once	1
		Twice	2
		More than twice	3

Interviewer: Please ask the following questions for up to two marriages. If the respondent was married more than twice, ask for the first two marriages. Ask questions I520-I526 for the first marriage first, then for the second marriage, if any. Then go to I527.

I520	How old were you when you got married?	(1) First marriage	(2) Second marriage
		_____ Years	_____ Years
I521	How old was your husband when you got married?	_____ Years	_____ Years
I522	How did this marriage come about?	Love marriage 1 Arranged marriage 2 Bride capture 3	Love marriage 1 Arranged marriage 2 Bride capture 3
I523	Did your husband or his family pay kalym to your family?	Yes 1 No --> go to I525 2 Not applicable 90	Yes 1 No --> go to I525 2 Not applicable 90
I524	How many sheep could one have bought with the kalym sum at that time?	_____ sheep Do not know 99 Not applicable 90	_____ sheep Do not know 99 Not applicable 90
I525	Are you still in this marriage today?	Yes -> go to I527 1 No 2	Yes -> go to I527 1 No 2
I526	How old were you when the marriage ended (i.e., divorce, separation, death, etc) ?	_____ Years	_____ Years

I527	How many births (that is, children who were born alive) did your mother have in her lifetime?	_____ Births Do not know 99
I527a	Have you ever given birth?	Yes 1 No --> go to Module 6 2
I527b	How many births (that is, children who were born alive) did you have in your lifetime?	_____ Births

Now, I would like to record the names of all your children, whether still alive or not. Please start with the first child you had.

I528	I529	I530	I531	I532	I533	I534	I535
Child No.	Name of child	Gender of [NAME]?	When was [NAME] born?	Birthweight of child in kg	Is [NAME] living with you?	Is [NAME] currently alive?	How old was [NAME] when he/she died?
		Male 1 Female 2	Please indicate month and year. (MM.YYYY)		Yes 1 No 2	Yes->next child No 2	Days 1 Months 2 Years 3
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

6. WORRIES

I would like to ask you now about worries you may have. I will name them and ask you to indicate the degree of your worry from 0 'No worry at all' to 10 'Extremely worried'

I601	When you think about the following issues, how worried are you about them?	No worry at all										Extremely worried	Not applicable
Issue	0	1	2	3	4	5	6	7	8	9	10	(90)	
1 General economic development (in Kyrgyzstan)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Your own economic situation (unemployment, etc)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Quality of education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Your own health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 The health of your family members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6 Energy supply to your household	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Environmental protection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Global terrorism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 Criminality/Vandalism in Kyrgyzstan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10 Your personal security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11 Inter-ethnic tensions in Kyrgyzstan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12 The stability of the political system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13 Violence related to the upcoming local elections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14 The future of your children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15 Corruption	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16 Food/Gas prices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
17 If you are employed: your job security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

7. SECURITY AND VIOLENCE

7.A. PERCEPTION OF SECURITY

Now, I will ask you how you feel about the security at your place of living.

Of course, these questions are somewhat sensitive, but please keep in mind that your answers will be kept anonymous and confidential.

Since it is very important for researchers to have a detailed picture of the views of Kyrgyzs citizens, we very much hope that you will be able to answer these questions.

1701	How much do you agree with the following statements on a scale from 1 to 5? <i>Interviewer: Show answer scale to respondent.</i>	strongly agree		strongly disagree		
		1	2	3	4	5
	I feel safe when walking alone in the neighbourhood during the day.	1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	I feel safe when walking alone in the neighbourhood during the night.	2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	I am concerned about violence in my neighborhood related to upcoming election.	3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	I avoid using certain ways and do not go to certain areas that I think are dangerous.	4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	My neighbourhood is overall peaceful.	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	The level of violence increased a lot compared to one year ago.	6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	It is very likely that in the next 12 months I will become a victim of violence.	7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	I heard weapons being fired in my neighbourhood in the last 12 months.	8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	The police is doing a good job.	9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7.B. VIOLENCE

In the following I will ask you about any violent incidences you know about

1702	Do you personally know anybody who experienced any of the following during the last 12 months? <i>(If respondent does not know anybody, take last answer option)</i>	Was verbally threatened	1
		Was threatened with cold weapon / fire weapon	2
		Was attacked with cold weapon / fire weapon	3
		Beating / physical abuse / kicks	4
		Was injured or killed in gun shootings	5
		Was physically forced to have sex	6
		Was robbed	7
		Was kidnapped by force/by deceit (including bride kidnapping)	8
		I do not know anyone -> go to 1704a	9
1702a	Which of these experiences was the worst one? Indicate from answer options in 1702		_____
1703	With regard to this experience as reported in 1702a, who was the person experiencing the harm? <i>(Only 1 answer)</i>	Household member	1
		Relatives	2
		Neighbours	3
		Friends	4
		Colleagues	5
		Acquaintance	6
		Refuse to answer	88
1704	Did the injured person suffer from any physical injury, extended illness or psychological illness due to the experience described?	Yes, extended illness / injury	1
		Yes, became handicapped	2
		Yes, psychological distress	3
		Yes, immediate death	4
		Yes, died in hospital / after discharge from hospital	5
		Yes, other problems	6
		No	7
		Don't know	99
1704a	Do you know anyone in your community who had to move to the other place because of violence during the last 12 months?	Yes	1
		No	2

8. SOCIAL LIFE

8.A. MEMBERSHIP IN DIFFERENT GROUPS

Now, I will ask you about your membership in any groups, such as professional, communal, or political

		1 Yes	2 No	I802: If Yes, how many hours per month (average) did you spend with this group?	
I801	As I read the following list of groups, please indicate whether you did belong to such a group during the last 12 months?	1 Professional union or work-related group			
		2 Neighbourhood/ village committee			
		3 Religious or spiritual group			
		4 Political party			
		5 Sherine			
		6 Cultural club or association (e.g., theater group, reading			
		7 Festival society (yntymak)			
		8 Credit or savings group (credit union/chemaya kassa)			
		9 Sports group			
		10 NGO or civic group			
		11 Local self defence unit			
		12 Other			
		13 No membership in any group --> go to Section 8.B			
I803	Which one of these groups is the most important one for you?	Coding (see above I801)			
The following questions all relate to the one group named in I803.					
I804	With how many of this group's members are you in regular contact?	_____ people			
I805	In which year did you join this	_____ year			
I806	Are you one of the group's leaders?	Yes	1		
		No	2		
I807	How much money or goods (indicate value in Som) did your household contribute to this group per month in the last 12 months?	_____ Soms per month			
I808	How many days of work did you contribute to this group during an average month in the last 12 months?	_____ Days per month			
I809	What is the main benefit from joining this group? (Only 1 answer)	Improves household's livelihood or access to services	1		
		Important in times of emergency/ in the future	2		
		Benefits the community	3		
		Professional development	4		
		Enjoyment/ recreation	5		
		Spiritual, social status, self esteem	6		
		Security	7		
		Other	8		
I810	Does the group or do its members help your household get access to any of the following?		1 Yes	2 No	
		Education or training	1		
		Health services	2		
		Credit or savings	3		
		Agricultural input or technology	4		
		Work	5		
		Information (on anything that might be important for you)	6		
		Administrative services	7		
I811	Are the members of this group mostly of the same... ? (Only 1 answer)	Neighbourhood (URBAN)/ village (RURAL)	1		
		Family/extended family	2		
		Religion	3		
		Gender	4		
		Age	5		
		Political view point	6		
		Occupation	7		
		Educational background	8		
Income level	9				

8. SOCIAL LIFE

8.B. INFORMAL NETWORKS

In the following I will ask you about people who you would ask for help or who you would help to solve financial or other

I812	If you suddenly needed 2000 Som, how many people you know would lend you the entire sum?	Nobody --> go to I814	1
		Very few (1-2 people)	2
		Some (3-6 people)	3
		Many (more than 6 people)	4
		Hard to say	5
I813	Whom of the following would you ask first to lend you the money? (Only one answer)	Relatives	1
		Neighbours	2
		Friends	3
		Work contacts	4
		Others	5
I814	If your house or apartment was damaged and you needed help to repair it quickly, whom would you ask for help first ? (Only one answer)	Relatives	1
		Neighbours	2
		Friends	3
		Work contacts	4
		Others	5
		Nobody	6
I815	To how many people did you give any financial help during the last 12 months? (If none, write 0).	_____	If "Nobody" go to I816
I815a	How many of these people, whom you financially helped, are from the households with a migrant abroad?	_____ persons	
I815b	How would you describe the majority of your financial help given during the last 12 months?	Gift / non-returnable transfer	1
		Interest-free loan without due date	2
		Interest-free loan with a due date	3
		A loan with interest	4
I816	From how many people did you receive any financial help during the last 12 months? (If none, write 0).	_____	If "Nobody" go to I817
I816a	How many of these people, from whom you received financial assistance, are from the households with a migrant abroad?	_____ persons	
I816b	How would you describe the majority of the financial help received by you during the last 12 months?	Gift / non-returnable transfer	1
		Interest-free loan without due date	2
		Interest-free loan with a due date	3
		A loan with interest	4
I817	To how many people did you give any non-financial help (e.g. repairing house, preparing celebrations, homework help) during the last 12 months? (If none, write 0)	_____	If "Nobody" go to I818
I817a	How many of these people, whom you helped non-financially, are from the households with a migrant abroad?	_____ persons	
I818	From how many people did you receive any non-financial help (e.g. repairing house, preparing celebrations, homework help) during the last 12 months? (If none, write 0).	_____	If "Nobody" --> go to 8C
I818a	How many of these people, from whom you received non-financial assistance, are from the households with a migrant abroad?	_____ persons	

8. SOCIAL LIFE

8.C. TRUST AND INFORMATION

Now I want to ask about your perception of the level of trust to people

1820	On a scale from 1 to 4, how much do you agree with the following statements? Interviewer: Show the corresponding scale.	Strongly disagree			Strongly agree
		1	2	3	4
1	In general, you can trust people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Nowadays, you cannot rely on anybody.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Most people who live in this community can be trusted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	In this community, you have to be cautious, otherwise someone is likely to take advantage of you.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Most people in this community are willing to help if you need it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	In this community, people generally trust each other in matters of lending and borrowing money.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1821	On a scale from 1 to 4, how much do you generally trust the following? Interviewer: Show the corresponding scale.	No trust at all			A lot of trust
		1	2	3	4
1	People from your own ethnic or linguistic group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	People from other ethnic or linguistic groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Local government officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	President / Central government officials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Community leaders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Religious leaders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Business leaders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Policemen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Judges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Neighbours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Doctors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1822	Where do you usually seek information on issues related to your community, Kyrgyzstan and the world? (multiple answers are allowed)	Talking to family members	1
		Talking to neighbours/friends/colleagues	2
		Local associations or NGOs	3
		Radio	4
		Television	5
		Newspapers	6
		Internet	7
		Other	8

1823	In your opinion, what kind of political system is the most suitable for Kyrgyzstan? (Only 1 answer)	Soviet system	1
		Russian system, as it is now	2
		Kyrgyz system, as it was until 2010	3
		Kyrgyz system, as it is now	4
		Western type democracy	5
		Do not know	99

1826	Did you vote in the last presidential election?	Yes	1
		No	2

1827	Are you planning to vote during the upcoming local elections?	Yes	1
		No	2

8. SOCIAL LIFE

8.D. LOCAL BUDGET

Now I would like to ask your opinion and involvement in the process of budget decision of local government authorities

I828	How do you think, how informed are you about the budget of your local government body (Aiyl Aimak or municipal government)?	Very well	1
		Well	2
		Badly	3
		Absolutely not informed	4
I829	Please estimate, how much it is interesting to you, how your local government body (Aiyl Aimak or municipal government) spends your money from taxes and payments?	Very interesting	1
		Interesting	2
		Little interesting	3
		Absolutely not interesting	4
I830	Do you know that your local government body should provide local population with information about local budget?	Yes	1
		No	2
I831	Estimate, please, how accessible is information about the budget of Aiyl Aimak for population?	Easily accessible	1
		Accessible	2
		Accessible with difficulties	3
		Inaccessible	4
I832	How do you think, can an ordinary citizen influence budget process of his/her local government body (Aiyl Aimak or municipal government)?	Yes	1
		No	2
I833	Did you or members of your household try to influence the budget process of your local government body (Aiyl Aimak or municipal government) during the last 12 months (since November 2011)?	Yes	1
		No	2
I834	When was the last budget hearing in your local government body (Aiyl Aimak or municipal government)?	_____._____ (month.year)	
I835	Did you participate in budget hearing of your Aiyl Aimak during the last 12 months (since November 2011)?	Yes	1
		No	2
I836	In your opinion, how much does the participation of citizens in the process of local budget production and implementation influence on quality of governmental services, provided on local level?	Influences strongly	1
		Influences fewly	2
		Doesn't influence	3
		Do not know (do not read)	99
END OF SURVEY: Our survey is finished. Thank you so much for your participation and time. As we have mentioned before, any information about your responses would stay anonymous and confidential and will be analyzed on aggregate level. If you do not mind, we will visit your household again next year!			

INTERVIEWER: Don't forget to go back to the control page of the individual questionnaire to enter the end time of the interview and information on completion! If this was the last HH respondent or the last HH visit, go back to the cover form to record end time of the visit and details on survey completion!