

# **The Effects of Migration in Moldova and Georgia on Children and Elderly Left Behind**

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## SURVEY IDENTIFICATION

INSTRUCTIONS: PLEASE FILL THIS OUT BEFORE THE INTERVIEW.

BID.01	DIST_ID	BID.02	VILL_ID	HH_ID
Raion/region in which the interview was conducted	Raion ID	Village in which the interview was conducted	Locality ID	Household ID
<i>(write in name of the rayon/region)</i>	<i>(write ID)</i>	<i>(write in name of the village)</i>	<i>(write ID)</i>	<i>(write ID from root sheet)</i>
	<input type="text"/>		<input type="text"/>	<input type="text"/>

BID.INT	BID.03	INTER_ID	BID.SUC	BID.TEL
Name of person that has been interviewed	Name of Interviewer	Interviewer ID	If household wasn't interviewed, why?	Contact number
<i>(write name)</i>	<i>(write in name, signature)</i>	<i>(write ID)</i>	ACUM REALIZEZ INTERVIUL 01 Refused 02 Household head absent from household (several times) 03 Could not be found (multiple times) 04 Other (specify) 05	<i>[Interviewer: Fill this item out once the interview is done]</i>  <i>(write in telephone number including rayon code)</i>
		<input type="text"/>	<input type="text"/>	<input type="text"/>

## INTERVIEWER SHEET

IS.01A	IS.01B	IS.02	IS.04	IS.05
Day of the interview	Month of the interview	Starting time of the interview	Language in which the interview was conducted	What is the residence type of the household?
<i>[write DD]</i>	<i>(write MM)</i>	<i>(convert to military time)</i> <i>[Example: 12:51 am is 1251.]</i>	Romanian 01 Russian 02 Ukrainian 03 Gagauzian 04 Other(specify) 05	01 Detached house 02 Apartment/flat 03 Part of house 04 Other (specify)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## KEY DEFINITIONS

**Household:** All individuals who are living together and have communal arrangements concerning subsistence and other necessities of life, including all individuals presently residing elsewhere (in the country or abroad) whose principle commitments and obligations are to this household.

**Community:** A social group of any size whose members reside in a specific locality, share government, and often have a common cultural and historical heritage. In the case of this research we will focus on the smallest administrative unit in each country. In Moldova this is the village (commune), in Georgia the city, town or village (kalaki, daba, temi, sopeli).

**Main Respondent:** A person who is a member of the household, at least 18 years old, and the most knowledgeable person on financial and social matters of the household. Preferably the main respondent is the head of the household. If the head of the household is not at home at the time of the interview, the spouse of the head of the household would be a good alternative.

**Household Members:** Includes all members of the household regardless of age, country of birth, or maternal/paternal ties.

**Primary Caregiver:** The person responsible for nutrition, health, and schooling of a child at the time of the survey

**Children:** All household members under the age of 19.

**Elderly:** All household members aged 60 and over.

**To 'live' in a country:** To reside in a country for a *continuous period* of three months or more.

**Migrant:** A person absent at the time of the interview because he/she resided abroad, having stayed or planning to stay for at least 3 months. Also includes persons who are presently in the household at the time of the interview and who stated that during the last 12 months they have lived abroad for at least three months.

**International migration:** A move across international borders for a stay of at least three months.

**Remittances:** Monetary remittances are financial resources transferred to/by a migrant; in-kind remittances are goods transferred to/by a migrant.

## ANSWER CODES

The following answer codes are used throughout the survey:

If there are more than three digits for an answer, please extend this code. Example: If household refuses to answer income question, write 88888 instead of 888.

777	Not applicable: the question is not relevant for this individual. Don't use this code, it may only be used by the computer to fill in not applicable values.
888	No answer: the respondent does not want, or prefers not to answer the question
999	Don't know: the respondent does not know the answer to the question

## Locality in MOLDOVA

01 Chişinău	06 Soroca	11 Căuşeni	16 other Moldova, specify
02 Bălţi	07 Orhei	12 Drochia	17 Tiraspol
03 Rîbniţa	08 Comrat	13 Edineţ	18 Transnistria other than Tiraspol
04 Cahul	09 Ceadâr-Lunga	14 Vulcăneşti	19 City outside of Moldova, specify
05 Ungheni	10 Străşeni	15 Durleşti	

## COUNTRY

01 Russian Federation	06 Greece	11 Czech Republic	16 Cyprus
02 Italy	07 Portugal	12 United States	17 Polonia
03 Portugal	08France	13 United Kingdom	18 Belgium
04 Israel	09 Spain	14 Ireland	19 Kazhakstan
05Turkey	10 Romania	15 Germany	20 Azerbaijan
			21 Other, specify

## POSITION

01 managers	04clericalsupportworker	07craft and related trades workers	10 Armed forces occupations
02 professionals	05service and sales workers	08plant and machine operators, and assemblers	
03technicians and associate professionals	06skilled agricultural, forestry, and fishery workers	09 elementary occupations	

## INDUSTRY

01 Agriculture	06 Construction	11 Real estate	16 Activities of individual household employers
02Fishing	07 Wholesale and retail trade	12 Public administration	17 International organisations
03 Mining and quarrying	08 Hotels and restaurants	13 Education	18 Art/Entertainment
04 Manufacturing	09 Transport and communications	14 Health and welfare	19 Other, specify
05 Electric energy, water supply, gas sewerage, waste management	10 Finance	15 Collective, social, personal services	

## CURRENCIES

01 Moldovan LEU	03 Russian Rubles	05 Turkish Lira	07 Romanian LEU
02 Euros	04 US Dollars	06 Ukranian Hrywnja	08 Other specify

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## A. Household Roster

[Interviewer: Parts A-C are answered by the household head.]

IN THIS SECTION, WE WILL ASK SOME BASIC INFORMATION ABOUT YOUR HOUSEHOLD AND THE PEOPLE WHO YOU SHARE IT WITH. THE INFORMATION WE COLLECT IN THIS SECTION WILL BE USED TO HELP US UNDERSTAND YOUR HOUSEHOLD'S SITUATION. NONE OF THE INFORMATION YOU PROVIDE HERE WILL BE USED TO IDENTIFY YOU LATER, AND YOU CAN REST ASSURED THAT IT WILL BE TREATED WITH UTMOST CONFIDENTIALITY.

### A(1) Basic Characteristics

A.001	A.002	A.003
How many people – including yourself, your children and all people currently not present - do you consider part of the household?	How many people who you consider as <b>part of the household do NOT currently live</b> in the household?	So in <b>total</b> your <b>household</b> has [A.001] members?
(write number)	(write number)	yes 01 no 02
<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>

Please ask all of the following as **open questions** if not indicated otherwise.

	A.004	A.005	A.006	A.007	A.008	A.009	A.009A	A.010
ID	Please give me the first <b>names</b> (or initials) of all household members. Please <b>start with the household head</b> .	How many <b>months</b> has [NAME] been <b>living in this household</b> during the last twelve months?	How is [NAME] <b>related</b> to [NAME HOUSEHOLD HEAD]?	What is [NAME]'s <b>sex</b> ?	What is [NAME]'s <b>date of birth</b> ?		So, how old is [NAME]?	Does [NAME] have a <b>birth certificate</b> ?
	[CHECK WITH A.001] (write text)	(write number of months) (always round up. 2 weeks are thus 1 months)	Household head 01 Spouse 02 Biological Child 03 Adopted son or daughter 04 Stepson or stepdaughter 05 Brother or sister 06 Father or mother 07 Grandchild 08 Parent-in-law 09 Son or daughter in-law 10 Other relative 11 Unmarried partner 12 Foster child 13 Other nonrelatives 14	male 01 female 02	[YEAR]	[MONTH]	[verify age]	yes 01 no 02
1		<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>	<div> <div></div> <div></div> </div>

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6		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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	A.011	A.012	A.013	A.014	A.015	A.016	A.017	A.018A	A.018B
ID	In which locality in Moldova was [NAME] born?	In which country was [NAME] born?	What is [NAME]'s marital status?	Which is [NAME]'s native language?	Which ethnic group do you consider yourself to be part of?	What citizenship(s) does [NAME] hold (multiple possible)?		Has [NAME] applied for but not yet received an additional citizenship?	Which additional citizenship did [NAME] apply for?
	[CITY,] <i>[write code from list]</i>  Write 101 if born in other country	[COUNTRY] <i>[insert code from list]</i>	Now married 01 Living as married 02 Widowed 03 Divorced 04 Separated 05 Never married 06 Other (specify) 07	Moldovan 01 Romanian 02 Gagauz 03 Roma 04 Russian 05 Ukranian 06 Bulgarian 07 Other (specify) 08	Moldovan 01 Romanian 02 Gagauz 03 Roma 04 Russian 05 Ukranian 06 Bulgarian 07 Jewish 08 Other (specify) 09	Moldovan 01 Romanian 02 Russian 03 Ukranian 04 Bulgarian 05 Italian 06 Israeli 07 Other (specify) 08	Not applicable (only one citizenship) 01 Moldovan 02 Romanian 03 Russian 04 Ukranian 05 Bulgarian 06 Italian 07 Israeli 08 Other (specify) 09	yes 01 no 02	Moldovan 01 Romanian 02 Russian 03 Ukranian 04 Bulgarian 05 Italian 06 Israeli 07 Other (specify) 08
	Continue with A.013 if born in Moldova							Continue with A.019 if no	
1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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	A.019A	A.019B	A.019C	A.020	A.021	A.022	A.023	A.024
I D	Is [NAME] currently enrolled in an educational institution?	Why is [NAME] not currently enrolled in school?	What kind of educational institution is this?	What is the name and location of [NAME]'s school? [INSTRUCTION: if child but not enrolled, ask these for the last school, [NAME] was enrolled in]		In which grade is [NAME] currently enrolled?	What is the highest number of years of schooling [NAME] completed?	What is the highest degree of schooling [NAME] received?
	yes 01 no 02	<b>Only ask for age 8-16.</b>  Sick 01 Disability 02 Cannot afford expenses 03 School is too far 04 Child refuses to attend 05 It's not necessary 06 Migrant 07 Other, specify 08	Pre-School 01 Primary 02 Lower secondary 03 (Upper) Secondary 04 Post-secondary 05 First-stage tertiary (bachelor's degree) 06 First-stage tertiary (master's degree) 07 Second-stage tertiary (PhD/Dr) 07	<b>Name</b> (write text)	<b>Location</b> (write text)	(write number)	(write number)	No formal education 01 Primary 02 Lower secondary 03 (Upper) Secondary 04 Post-secondary 05 Incomplete tertiary 06 First-stage tertiary (bachelor's degree) 07 First-stage tertiary (master's degree) 08 Second-stage tertiary (PhD/Dr) 09
	If no, go to A.023		If 5,6,7 go to A.023					
1	<input type="text"/>	<input type="text"/>	<input type="text"/>			<input type="text"/>	<input type="text"/>	<input type="text"/>
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10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Note: Questions A.025 to A.037 are for those household members aged 14 and over **only**.

	A.025	A.026	A.027	A.028	A.029	A.030	A.031
ID	During the <b>past 12 month</b> , has [NAME] <b>worked</b> for a wage/salary, other monetary income, for payment in kind, or contributed to a family business without pay in Moldova?	Why has [NAME] not worked?	What is [NAME]'s occupation in his/her main activity?	What is the <b>economic sector</b> of [NAME]'s main activity?	<b>How many months</b> during the <b>last twelve months</b> has [NAME] <b>worked</b> ?	How many <b>weeks per month</b> does [NAME] usually <b>work</b> ?	How many <b>hours</b> , if any, does [NAME] normally <b>work per week</b> at a paid job?
	<p><i>[INSTRUCTION: only for hh members that currently live in the household i.e. NOT migrants]</i></p> <p>yes      01 no        02</p> <p><i>[INSTRUCTION: start with household members age &gt; 4]</i></p>	<p>Is a child      01 Student        02 Pensioner      03 Unemployed    04</p> <p>Vacation       05 Sick            06 Migrant        07 Forced leave   08 Other (<i>specify</i>) 09</p>	(write text)	(use codelist)	(write number)	(write number)	(write number)
	→ If yes, go to A.027	If age >14 continue with section B					
1	<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

	A.032	A.033	A.034	A.035	A.036	A.037
ID	Did [NAME] work in a <b>secondary activity during the past 12 month</b> for a wage/salary, other monetary income, for payment in kind, or contributed to a family business without pay?	What is [NAME]'s <b>occupation</b> in his/her secondary activity?	What is the <b>economic sector</b> of [NAME]'s secondary activity?	How many months during <b>the last twelve months</b> has [NAME] <b>worked in his/her secondary activity</b> ?	How many <b>weeks per month</b> does [NAME] usually <b>work in this activity</b> ?	How many <b>hours</b> does [NAME] normally <b>work per week</b> in this activity?
	<i>[INSTRUCTION: only for hh members that currently live in the household i.e. NOT migrants]</i>  yes      01 no        02	(write text)	(use codelist)	(write number)	(write number)	(write number)
	→ If no, continue with section B					
1	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5	<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

6	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INTERVIEWER: PLEASE COMPLETE THE LAST PAGE OF THE QUESTIONNAIRE NOW AND TEAR IT OUT TO PROVIDE YOU WITH A SUMMARY OF THE STATUS OF EACH HOUSEHOLD MEMBER IN THE REST OF THE INTERVIEW.

**IN THIS SECTION**, WE WILL TALK ABOUT THE CHARACTERISTICS OF YOUR HOUSEHOLD. WE ASK SOME QUESTIONS ABOUT YOUR HOUSEHOLD'S FINANCIAL SITUATION (INCLUDING INCOME, SOCIAL BENEFITS, EXPENDITURES, AND ASSETS), CHARACTERISTICS OF YOUR HOUSE, AND A FEW QUESTIONS ON PERSONAL VIEWS AND OPINIONS. SOME OF THESE QUESTIONS CAN SEEM VERY PERSONAL AND INVASIVE, AND I WOULD LIKE TO REITERATE AGAIN THAT ANY INFORMATION YOU PROVIDE WILL BE KEPT SECURE. YOUR NAME OR ADDRESS WILL BE SEPARATED FROM THE DATA YOU GIVE US, AND THE DATA WILL ONLY BE USED IN AN AGGREGATED FORMAT FOR ACADEMIC RESEARCH AT UNIVERSITIES. THIS MEANS THAT NO GOVERNMENT OFFICIAL WILL HAVE ACCESS TO THE DATA.

## B. Household Characteristics

### B(1) Personal Income of Household Members

Please tell us how much income in cash each household member received during the last month (INTERVIEWER: NAME PREVIOUS MONTH). I will list several categories of income, and I need you to tell me how much income the person has received from this source in LCU.

ID	(please copy precisely the ID of each person from roster)								
<b>Compensation for labor</b>									
B.001 A	Wage and salary from primary activity/job								
B.001 B	Other income from primary activity/job that was not wage and salary								
B.002	Wage and salary from secondary activity/job								
B.003	Stipends/scholarship								
<b>Pensions</b>									
B.004	Old-age pension								
B.005	Disability allowance								
B.006	Survivor's pension								
B.008	Other pension								
<b>State social insurance benefits</b>									
B.009	Unemployment benefit								
B.010	Social allowance (for adults and children)								
B.011	Transport compensation								
B.012	Nominal compensation (e.g. for utility bills)								

B.013	Monthly allowances for child care/child upbringing									
B.014	Maternity allowance									
B.015	Other social benefits									
<b>Other incomes</b>										
B.016	Any other income (excluding remittances)									
B.017	Support from [CHILD]'s divorced/separated parent (Only for children and if biological parent divorced/separated)									
B.018	Transfers from family members within the country									

## B(2) Income of the Household as a Whole

Type		Please tell us how much income in cash the whole household received <b>during the last year.</b> I will list sources—please tell me how much income was received for each. (write in LCU)	
B.019	Non-farm self-employment (only what was not covered before)		_____
B.020	Income from the sale of agricultural production		_____
B.021	Income from livestock sales		_____
B.022	Income from own property (rent, dividends, interest, etc)		_____
B.023	Income from selling of own property		_____
<b>State social security and assistance benefits at household level:</b>			
B.024	Cash benefit		_____
B.025	Funeral grant		_____

B.026	Other state social assistance benefits			_____
<b>Local municipality assistance benefits</b>				
B.027	Local municipality assistance benefit			_____
B.028	Other local social benefits			_____
B.029	Other benefits from charity and humanitarian institutions			_____
B.031	Is any household member <b>potentially eligible</b> for pension or social benefits <b>but does not receive</b> it because of any reasons? If yes what was the <b>main reason</b> ? [INSTRUCTION: open question, code based on response]	No The pension granting process is ongoing Was unable to collect the required documents Is unable to get to the Social Subsidies Agency because of the distance Is unable to get to the Social Subsidies Agency because of the health condition Social Subsidies Agency employees could not clarify what documents were needed Does not know if he/she is eligible for pensions Other ( <i>specify</i> )	01 02 03 04 05 06 07 08	_____

### B(3) Financial Situation

B.032	Does any household member have a <b>bank account</b> in Rep. Moldova?(incl. migrant)	yes 01 no 02		_____
B.033	Do your household's <b>savings</b> exceed <b>\$500</b> (in the bank and in cash at home)?	yes 01 no 02		_____
B.034	Does your household have an <b>outstanding debt</b> ?	yes 01 no 02	→ If no, continue with B.037	_____
B.035 A-C	If yes, where was this money <b>borrowed</b> from? (3 main sources)	Bank 01 Credit and savings association 02 Other microfinancial agencies 03 Cooperative 04 Money lender 05 Relatives 06 Friends/Neighbors 07 Employer 08 Other (specify) 09		_____ _____ _____
B.036	For which <b>purpose</b> did you borrow the money? [ASK OPEN ENDED AN CODE ACCORDINGLY]	Daily needs (food, clothes, rent etc.) 01 Consumer durables (TV, fridge, computer etc. ) 02 To buy a car 03 To buy/renovate an apartment/flat/house 04 To finance education 05 Health care 06 To invest in a private business 07 To pay for farm equipment/land/livestock 08 To repay a loan 09 To finance emigration of a family member 10		_____

	Other (specify)	11		
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## B(4) Expenditures

B.037	What is the absolute <b>minimum amount</b> of money your household needs per month to <b>make ends meet</b> (excl. migrant's expenses)? OR: What is the minimum your household need to exist per month?	(write in LCU)				
B.038	In a typical month, what is the <b>sum</b> of the household's <b>total expenditures</b> (excl. migrant's expenses)?	(write in LCU)				
B.039	How often do/did you <b>worry</b> that your total household income <b>will not be enough</b> to meet your household's expenses and bills?	Every day 01 More than 3 times a week 02 At least once a week 03 At least once a month 04 Less often 05 Never 06		<b>last 12 months</b> <b>B.039a</b>  	<b>in 1999</b> <b>B.039b</b>  	
B.040 – B.042	Please think of the food you consume during the year, including <b>both the food you purchase and produce yourself</b> . What percentage of it do you <b>buy</b> , what percentage do you <b>produce</b> and what percentage do you receive <b>for free from others</b> ?	(in percent)		<b>B.040</b> <i>buy</i>  	<b>B.041</b> <i>own produce</i>  	<b>B.042</b> <i>for free</i>  

Type		In a <b>typical month</b> , how much do you <b>spend</b> on the following items?
		(write in LCU)
Food	B.043	
Water & Electricity & Gas	B.044	
Phone bills & Internet (paid to internet cafes) and postal service expenses	B.045	
Adult clothing and footwear	B.046	
Child clothing and footwear	B.047	
Entertainment (cinema, theaters, opera houses, concert halls, circuses, amusement parks, sports events, gym or fitness center admission, etc.)	B.048	
Cigarettes, tobacco	B.049	



Alcohol, beer, wine, etc.	B.050	<input type="text"/>
Newspapers and magazines	B.051	<input type="text"/>

## B(5) Assets

Type	Code	1 How many of the following assets does your household <b>own and use?</b>  (write number)	2 How many are less than five years old?  (write number)	3 How many of the following assets did your household <b>own and use in 1999?</b> <b>(this does not have to be the same item)</b>  (write number)
		→ If 0 go to next item in same column. Then begin with second column.		
Farm Land (in hectares)	B.052	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tractor	B.053	<input type="text"/>	<input type="text"/>	<input type="text"/>
Plough, other large farm machinery	B.054	<input type="text"/>	<input type="text"/>	<input type="text"/>
Car	B.055	<input type="text"/>	<input type="text"/>	<input type="text"/>
Motorcycles	B.056	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bicycles	B.057	<input type="text"/>	<input type="text"/>	<input type="text"/>
Washing machines	B.058	<input type="text"/>	<input type="text"/>	<input type="text"/>
Refrigerator, deep freezer	B.059	<input type="text"/>	<input type="text"/>	<input type="text"/>
Radios	B.060	<input type="text"/>	<input type="text"/>	<input type="text"/>
Television (color)	B.061	<input type="text"/>	<input type="text"/>	<input type="text"/>
Computer and electronical entertainment devices (DVD-player, cameras etc.)	B.062	<input type="text"/>	<input type="text"/>	<input type="text"/>
Cell phone	B.063	<input type="text"/>	<input type="text"/>	<input type="text"/>

B.064	Do you have a working landline at home (excl. cell phone)?	yes no	01 02	<input type="text"/>
B.065	Do you have internet access at home?	yes no	01 02	<input type="text"/>

B.066	Who in the household mostly makes the decisions about the purchase of durable goods?	household head 01 spouse of household head 02 both decide 03 grandmother 04 grandfather 05 Other, specify 06			□ □ □
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## B(6) Housing

B.067	How would you evaluate the <b>present living conditions</b> of your household?	Very good 01 Good 02 Neither good nor bad 03 Bad 04 Very bad 05			□ □ □
B.068	What is the <b>ownership status</b> of the house/residence?	Privately owned 01 State owned 02 Cooperative 03 Privately Rented 04 Other (specify) 05	→ If 02, 03, 04, or 05, continue with B.070		□ □ □
B.069	On whose name is the <b>property title</b> ?	One person who lives in household (write ID) [1 to 20] Several people living in the household (specify) 22 Person outside of household (specify) 23			□ □ □
B.070	In what <b>year</b> was the house/building <b>built</b> ?	(write year)			□ □ □ □ □
B.071	What is the <b>living area</b> of the house/flat in m <sup>2</sup> ?	(write number)			□ □ □ □ □
B.072	How many <b>rooms</b> does the house/flat have (excluding kitchen)?	(write number)			□ □ □
B.073	Does your household have <b>electricity</b> ?	yes 01 no 02	→ If no continue with B.075		□ □ □
B.074	From which <b>source</b> do you get your <b>electricity</b> ?	Network 01 Own generator 02 Both 03			□ □ □
				present	in 1999
B.075	What is the <b>main material</b> of the dwelling <b>floor</b> ?	Clay 01 Polished wood 02 Linoleum, vinyl or asphalt strips 03 Ceramic tiles 04 Cement 05 Laminate 06 Carpet 07 Other (specify) 08			□ □ □
B.076	What type of <b>heating system</b> do you use in your house? (the most important)	Central public heating 01 Autonomous private heating 02 Private heating on wood/coal 03 Electricity 04 Other(specify) 06			□ □ □

B.077	What type of <b>fuel</b> does your household mainly use for <b>cooking</b> ?	Electricity 01 Gas 02 Gas bottle 03 Coal 04 Wood/twigs 05 Other(specify) 06		<input type="text"/>	
B.078	What is the main <b>source of drinking water</b> for members of your household?	Piped water 01 Dug well 02 Water from spring 03 Rainwater collection 04 Surface water (river, stream, dam, lake, pond, canal, irrigation channel) 05 Bottled water 06 Other(specify) 07		<input type="text"/>	
B.079	Do you <b>have a toilet facility</b> inside your house/flat?	yes 01 no 02		<input type="text"/>	
B.080	Did you <b>live</b> in the same house/residence <b>in 1999</b> ?	yes 01 no 02		<input type="text"/>	
B.081	How would you evaluate your <b>living conditions</b> back <b>in 1999</b> ?	Much better 01 Better 02 Neither better nor worse 03 Worse 04 Much worse 05		<input type="text"/>	

## B(7) Personal Views and Opinions

Now I'd like you to tell me your views on various issues. How would you place your views on this scale? 1 means you agree completely with the statement on the left; 10 means you agree completely with the statement on the right; and if your views fall somewhere in between, you can choose any number in between.

[INTERVIEWER: Please show card.]

B.082	Incomes should be made more equal	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	We need larger income differences as incentives	<input type="text"/>
B.083	Private ownership of business should be increased	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Government ownership of business should be increased	<input type="text"/>
B.084	State should take more responsibility to ensure the well-being of everyone	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Each one should take more responsibility to ensure his/her own well-being	<input type="text"/>
B.085	Competition is good. It stimulates people to work hard and develop new ideas	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Competition is harmful. It brings out the worst in people	<input type="text"/>
B.086	In the long run, hard work usually brings a better life	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Hard work doesn't generally bring success - it's more a matter of luck and connections	<input type="text"/>

B.087	People can only get rich at the expense of others	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Wealth can grow so there's enough for everyone	<input type="text"/>
B.088	Generally speaking, most people can be trusted	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	You need to be very careful in dealing with people	<input type="text"/>

B.089	Using this card on which 1 means you are very unhappy and 10 means you are very happy where would you put your <b>happiness</b> as a whole?	(write number between 1 and 10)	<input type="text"/>
B.090	Using the same card as before, on which 1 means you are very unsatisfied and 10 means you are very satisfied, where would you put your <b>satisfaction with your life</b> as a whole?	(write number between 1 and 10)	<input type="text"/>
B.091	How proud are you to be Moldovan? (Read out and code one answer):	Very proud 01 Quite proud 02 Not very proud 03 Not at all proud 04 I am not Moldovan (do not read out! Code only if volunteered!) 05	<input type="text"/>

## C. Migrants

**IN THIS SECTION,** WE ARE GOING TO TALK ABOUT THE PEOPLE WE IDENTIFIED BEFORE WHO ARE NOW INTERNATIONAL MIGRANTS. WE WILL ASK SOME INFORMATION ON HOW EACH PERSON'S MIGRATION HISTORY HAS DEVELOPED, AND THEN WE'RE GOING TO DISCUSS HOW THIS PERSON STILL MAINTAINS CONTACT WITH THIS HOUSEHOLD.

### C(0) Migration Screening

C.00A	C.00A0	C.00B	C.00C	C.00D	C.00E	C.00F
Has [NAME] <b>ever lived abroad</b> for three or more months at one time since 1999?	How long has the migrant been abroad during the last 12 months?	Does [NAME] <b>plan to migrate</b> abroad in the next 12 months?	<b>Before 1990</b> , did anyone from your family – this includes relatives not currently part of the household and deceased relatives – leave Moldova to <b>work or live</b> in a <b>different part of the USSR or a different country</b> ?	<b>To which country did this family member go?</b>	<b>What was the primary reason for this?</b> <i>[Interviewer: read out list]</i>	<b>Can you please tell us the year when this happened?</b>
yes 01 no 02	(write number of months)	<i>[only for non-migrants]</i> yes 01 no 02 migrant 03	yes 01 no 02	(use code list)	Graduate assignment 01 Military Service 02 Government program 03 Temporary labor (harvest) 04 Studies 05 Own initiative 06 Other(specify) 07	(write YEAR)
			If 02 then continue with section C(1)			
___	___	___				
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## C(1) Migration History

[Instruction: In uneven fields write the **number of months** for which the person was absent from the household; in even fields write the **country ID**.]

[TIP: fill out from right to left starting in 2011. Give hints on events in each year such as elections, sports events, extreme weather, etc]

*(please copy precisely the ID of each person who has ANY migration experience since 1999 from roster)*

	C.001	C.002	C.003	C.004	C.005	C.006	C.007	C.008	C.009	C.010	C.011	C.012	C.013	C.014	C.015	C.016	C.017	C.018	C.019	C.020	C.021	C.022	C.023	C.024	C.025	C.026
ID	1999	LOC	2000	LOC	2001	LOC	2002	LOC	2003	LOC	2004	LOC	2005	LOC	2006	LOC	2007	LOC	2008	LOC	2009	LOC	2010	LOC	2011	LOC
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## C(2) Individual Migration

[Interviewer: please ask open question and code accordingly unless indicated otherwise.]

ID	(please copy precisely ID of each person who is a migrant from roster)			<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
C.027	In which <b>year</b> did [MIGRANT] leave the home country for the <b>first</b> time (EVER)?	(write year)		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
C.028	Why did [MIGRANT] migrate the first time?	Higher wages in other countries 01 Absence of a job in Moldova 02 To be able to pay for education 03 To be able to pay for health 04 To be able to invest in business 05 To be able to pay for debts 06 Better way of life abroad 07 To join close family members 08 To study abroad 09 Government program for temporary work 10 Conflict/Insecurity 11 Other (specify) 12		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
C.029	What was [MIGRANT]'s <b>status</b> before he/she migrated the first time?	Occupied 01 Unemployed 02 Housewife 03 Pensioner 04 Student/pupil 05 Other (specify) 06	Skip to C.032 if C.029=3, 4, , or 5	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
C.030	What was [MIGRANT]'s <b>profession</b> before he/she migrated the first time?	[write text]						
C.031	What was the <b>economic sector</b> where [MIGRANT] worked before he/she migrated the first time?	[insert code from codelist]		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
C.032	What was the <b>destination</b> country of the first departure (EVER) of [MIGRANT]?	(write number) [LOC]		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
C.033	What was the main reason for [MIGRANT] to migrate to that specific country?	Language 01 Join family 02 Social contacts other than family 03 Recommended by others 04 Low cost of migration 05 Job guarantee 06 Good working conditions 07 Other (specify) 08		<div></div>	<div></div>	<div></div>	<div></div>	<div></div>

C.046	<b>How</b> did [MIGRANT] pay for the <b>first migration</b> ? Indicate the two most important sources of money.	Personal savings 01 Gift/loan from family members 02 Gift/loan from friends 03 Money with usury from business/individual 04 Loan from bank 05		Most important	Most important	Most important	Most important	Most important
C.047		Property sales (sales of land, house, flat) 06 Sale of personal goods 07 Other (specify) 08		2nd most important	2nd most important	2nd most important	2nd most important	2nd most important
C.034	In which <b>year</b> did [MIGRANT] leave the home country for the <b>last time</b> (EVER)?	(write number) [YEAR]						
C.035	<b>Why</b> did [MIGRANT] migrate the <b>last time</b> (can mean the current migration spell)?	Higher wages in other countries 01 Absence of a job in home country 02 To be able to pay for education 03 To be able to pay for health 04 To be able to invest in business 05 To be able to pay for debts 06 Better way of life abroad 07 To join close family members 08 To study abroad 09 Government program for temporary work 10 Conflict/insecurity 11 Other (specify) 12						
C.036	What was the <b>destination</b> country of <b>last</b> departure of [MIGRANT]?	(write location from list)						
C.037	<b>Why</b> did [MIGRANT] choose to migrate to <b>that country</b> ?	Language 01 Join family 02 Social contacts other than family 03 Recommended by others 04 Low costs of migration 05 Job guarantee 06 Good working conditions 07 Other (specify) 08						
C.038	Where did [MIGRANT] acquire the necessary documents (e.g. visa, permits, .etc.)?	Embassy/consulate 01 Intermediary 02 Does not need any documents 03 Other, specify 04						



C.045	How much money did [MIGRANT] <b>spend in total for migrating</b> the LAST time he/she left (preparation of documents, visa, travel costs, intermediary)?	(write in LCU)						
C045 CURR	In which currency is this?	(use codelist)						
C.039	Does [MIGRANT] have a <b>residence permit</b> in the country he/she is living in now? <i>[read options]</i>	yes 01 no 02						
C.040	Did [MIGRANT] find it <b>difficult to find a job</b> in [LOCATION], the <b>last time he/she went</b> ? <i>[read options]</i>	No, already had a job 01 No, many jobs are available 02 No, he/she knows the right people 03 No, he/she was lucky 04 Yes, it was somewhat difficult 05 Yes, it was very difficult 06 Yes, he/she did not find a job 07	→ If has migrated in 2011 skip to C.042					
C.041	How would you describe [MIGRANT]'s <b>migration pattern</b> ? <i>[read options]</i>	Comes back less than once a year 01 Comes back at least once a year 02 Goes back and forth on a regular basis 03 Only goes abroad at certain times of the year (e.g. harvest work) 04	Skip if not current migrant					
C.042	How many times per month does [MIGRANT] <b>communicate</b> with members of this household when abroad on average? <i>[show card]</i>	Every day 01 More than 3 times a week 02 At least once a week 03 At least once a month 04 Less often 05 Never 06						
C.043	Which <b>means of communication</b> is mainly used for the communication between [MIGRANT] and the household members in the home country?	Phone 01 Regular mail 02 Parcels 03 Email 04 Internet phone (Skype, Yahoo, etc) 05 Other ( <i>specify</i> ) 06	→ If has migrated in 2011 skip to C.048					

C.044	What is/has been [MIGRANT]'s main <b>reason for returning</b> to the home country?	Family reasons	01	Skip if current migrant	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
		Has a better job in home country now	02						
		Has opened an enterprise in home country	03						
		Has earned enough money abroad	04						
		Working conditions abroad too bad	05						
		Was expelled from the host country	06						
		Health problems	07						
		Must take care of children	08						
		Must take care of elderly person	09						
		Old age/retirement	10						
		Seasonal worker	11						
		No job in host country	12						
		Does not have a motive	13						
		Other (specify)	14						
C.048	Does [MIGRANT] have a <b>work permit</b> for his/her current employment abroad?	yes	01		<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
		no	02						
C.049	In what <b>economic sector</b> is [MIGRANT]'s current job?	(use codelist)			<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>

Careful: Rightmost two columns are for non-household members from here on until the end of the migration section! If there are more than 3 household members who are migrants, please use a new sheet of the questionnaire if you are filling out the paper-based version.

For the non-household members sending remittances, please use IDs 51 and 52.

[Interviewer: please ask open question and code accordingly unless indicated otherwise.]



ID	(please copy precisely the ID of each person who is a migrant from roster)					51	52		
C.050	Did the household receive <b>any monetary or in-kind remittances</b> from [MIGRANT]?	yes	01		<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	Not applicable	Not applicable	
		no	02						
C.070 A	What is the name of this person?	(write text)			Not applicable	Not applicable	Not applicable	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
C.070 B	Who was this? If more than one the two most important.	A biological child of an elderly belonging to the household	01		Not applicable	Not applicable	Not applicable	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
		An adopted/step-/half-child of an elderly belonging to the household	02						
		Another relative not belonging to the household	03						
		The divorced/separated biological parent of a child	04						
		The fiancée	05						
		A friend	06						
		Other, specify	07						

C.051	Has the household <b>received in-kind remittances</b> which [MIGRANT] SENT or BROUGHT back in the past 12 months?	yes 01 no 02	→ If no, continue with C.059	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.052	Did [MIGRANT] <b>bring back or send any</b> of the following goods in the past 12 months?	Food	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.053		Adult Clothing	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.054		Child Clothing	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.055		Toys	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.056		Medicine and Medical Equipment	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.057		Electronic Devices and Household Appliances	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.058	What is the <b>total value</b> of the in-kind remittances received from [MIGRANT] over the last 12 months?	<i>Less than 500 01</i> <i>500-1000 02</i> <i>1000-1500 03</i> <i>1500-2000 04</i> <i>2000-2500 05</i> <i>2500-3000 06</i> <i>3000-3500 07</i> <i>3500-4000 08</i> <i>4000-4500 09</i> <i>4500-5000 10</i> <i>5000-7500 11</i> <i>7500-10000 12</i> <i>10000-20000 13</i> <i>20000-50000 14</i> <i>More than 50000 15</i>						
C058 CURR	In which currency is this?	(useodelist)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.059	Have household members received <b>monetary remittances</b> from [MIGRANT] in the past 12 months?	yes 01 no 02	→ If no, continue with C.065	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.060	In the past 12 months, <b>how many times</b> have you received remittances from [MIGRANT]?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

C.061	What is the <b>average sum</b> received from [MIGRANT] at each transfer in the last 12 months?	(write in currency units)		<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
C-061C	In which currency is this?	(use codelist)		<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
C.062	How much money has the household received in <b>total</b> from [MIGRANT] in the past 12 months?	(write in currency units)		<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
C-062C	In which currency is this?	(use codelist)		<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
C.063	<b>Who</b> in the household mostly <b>receives</b> the <b>monetary remittances</b> from [MIGRANT]?	(write ID from Roster)		<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
C.065 A	Has[MIGRANT] <b>brought back cash</b> to the home country in the last 12 months?	yes    01 no     02	→ If no, continue with C.067	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	not applicable	not applicable
C.065 B	What <b>the total amount</b> of money migrant <b>brought back in cash</b> to the country in the <b>last 12 month</b> ?	(write in currency units)		<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	not applicable	not applicable
C.065 CURR	In which currency is this?	(use codelist)		<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	not applicable	not applicable
C.066	What did [MIGRANT] <b>mostly use the cash brought back</b> in the last 12 months for? (choose most important uses)	Food 01 Payment of utility bills 02 Durable goods 03 Housing (buying, building, renovating, etc.) 04 Medical expenses for child/elderly 05 Medical expenses for other household members 06 Education 07 Investment in business 08 Agricultural activities 09 Savings 10 Transfers to others 11 Donations to church or other charitable purpose 12 Other (specify) 13		<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	not applicable	not applicable

C.067	Has the household sent money or goods to [MIGRANT] in the past 12 months?	yes 01 no 02	→ If no, continue with C.069	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.068	What was the value of these transfers in <b>total</b> ?	(write in LCU)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.068C	In which currency is this?	(use code list)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C.069	In the last 12 months, did your household receive remittances from <b>anyone we have not talked about yet</b> ?	yes 01 no 02  ASK THIS QUESTION FOR ALL HOUSEHOLDS. ALSO FOR HOUSEHOLDS WHICH HAVE NO MIGRANT!		ASK THIS QUESTION AFTER ALL MIGRANTS HAVE BEEN COVERED <input type="text"/> IF THE ANSWER IS 01 the go back to C.070A				
C.064 A-C	How has the household <b>mostly used money</b> received from migrants in the last 12 months? (rank the three most important uses)	Food 01 Payment of utility bills 02 Durable goods 03 Housing (buying, building, renovating, etc.) 04 Medical costs for non-child or non-elderly 05 Medical costs for child/elderly 06 Education 07 Investment in business 08 Household agricultural activities 09 Savings 10 Transfers to others 11 Donations to church or other charitable purpose 12 Other (specify) 13		<input type="text"/> <input type="text"/> <input type="text"/>				
C.071	Which household member <b>typically decides</b> about how to spend remittances?	One person who lives in household (write ID to 20) 21 Several people living in the household (specify) 22 Person outside of household (specify relation to household head) 23		<input type="text"/>				
C.072	Taking into account <b>all kinds of income</b> we have talked about, that is salaries, remittances, pensions and income from agricultural sales, who would you say is the <b>main contributor to the household budget</b> ?	(write household ID from Roster)		<input type="text"/>				

## D. Caregiver

**IN THIS SECTION** WE WILL TALK ABOUT YOUR EXPERIENCES AS THE PRIMARY CAREGIVER FOR A CHILD/CHILDREN IN THIS HOUSEHOLD. WE WILL START BY DISCUSSING THE CHILD/CHILDREN IN YOUR CARE IN TERMS OF HEALTH, SCHOOLING, AND TIME USE. WE WILL THEN ASK A LITTLE ABOUT HOW YOU INTERACT WITH EACH CHILD AS WELL AS HOW EACH CHILD BEHAVES.

### D(0) Caregiver Screening

[Interviewer: please ask open question and code accordingly unless indicated otherwise.]

D.00A has to be answered by the household head.]

For reason of programming, in the computer-assisted version D.000 asks to recapitulate [CHILD]'s age. This is not relevant for the paper-based questionnaire.

ID	(please copy precisely the ID of each child from roster)							
D.00A0	Where is the current primary caregiver of [CHILD]?	In household 01 Abroad 02 Other, specify 03						
D.00A	Who in this household is the <b>current primary caregiver</b> of [CHILD]?	(please copy precisely the ID from roster) 1-15 Caregiver outside of household 101 There is no caregiver 102						
D.00B	How is [CAREGIVER] <b>related</b> to [CHILD]?	Mother 01 Father 02 Brother or sister 03 Grandparent 04 Unmarried partner of household head 05 Stepmother 06 Stepfather 07 Other (specify) 08						
D.00C	Where is the <b>biological mother</b> of [CHILD]?	If currently living in <u>household</u> 01  If not currently living in hh: Divorced/separated 51 Living abroad 52 Divorced and living abroad 53 Deceased 54 Other (specify) 55	→ If in hh, go to D.00G					
D.00D	<b>When</b> did the divorce/migration/death/other cause happen?	[YEAR]	→ If 54 in D.00C, go to D.00G					
D.00E	<b>Where</b> does biological mother of [CHILD] live?	[CITY](write code from list)	Artikel I.					
D.00F		[COUNTRY](write code from list)						
D.00G	Where is the <b>biological father</b> of [CHILD]?	If currently living in <u>household</u> 01  If not currently living in hh: Divorced/separated 51 Living abroad 52 Divorced and living abroad 53 Dead 54 Other (specify) 55	→ If in hh, go to D(1)					

D.00H	<b>When</b> did the divorce/migration/death/other cause happen?	[YEAR]	→ If 54 in D.00G, go to D(1)					
D.00J	<b>Where</b> does biological father of [CHILD] live?	[CITY](write code from list)		___	___	___	___	___
D.00K		[COUNTRY](write code from list)		___	___	___	___	___
D.000	Please reenter the age of the child. If you are unsure, please ask again.	(write number)		___	___	___	___	___
D.002	If the primary caregiver was not interviewed, why?	CONDUCTED INTERVIEW 01 Absent from household 02 Refused to participate 03 Other (specify) 04		___	___	___	___	___

## D(1) Child Health

[Interviewer: please read out answer options unless indicated otherwise.]

[D.00B has to answered by each caregiver]

ID	(please copy precisely the ID of each child from roster)			___	___	___	___	___
D.005	What was [CHILD]'s <b>weight</b> when she/he was <b>born</b> ?	(write number) [in grams]		___	___	___	___	___
D.006	Is or was [CHILD] <b>breast fed</b> ?	yes 01 no 02	→ If no, skip to D.008	___	___	___	___	___
D.007	<b>For how long</b> was [CHILD] <b>breast fed</b> ?	(write number) [in months]		___	___	___	___	___
D.008	<b>Compared</b> to other children of this age would you say [CHILD]'s <b>health is ...?</b>	Much better 01 Better 02 Neither better nor worse 03 Worse 04 Much worse 05		___	___	___	___	___
D.009	If [CHILD] had one or more <b>serious illnesses or accidents</b> , what kind of problem was the most serious <b>ever</b> ?	No illness 01 Pulmonary 02 Digestive 03 Broken bones 04 Eye 05 Teeth 06 Skin 07 Fever 08 Mental illness 09 Unidentifiable 10 Other (specify) 11	→ If no illness, continue with D.012	___	___	___	___	___

D.010	Did you <b>seek treatment</b> or advice for this illness at any point?	yes 01 no 02	→ If yes, go to D.012	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.011	If you did <b>NOT</b> take [CHILD] to see a doctor, why?	Illness was not serious 01 Have medicine to treat the illness 02 Too expensive to see a doctor 03 Doctor is too far away 04 No time to see a doctor 05 Do not know where to go 06 Do not trust local doctors 07 Other reasons (please explain) 08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.012	Has [CHILD] seen a <b>doctor</b> during the last 12 months?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.013	What <b>kind of facility</b> do you contact in case of <b>serious sickness</b> ?	I don't contact any 01 Medical Family Center 02 Central Raion Hospital 03 Republican Hospital (state) 04 Specialized Hospital 05 Other, specify 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.014	What is the <b>travel time</b> to this facility?	(write in minutes)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.015	Does [CHILD] have a <b>registered disability</b> ?	yes 01 no 02	→ If no, go to D.017	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.016	What is the <b>degree</b> of this disability?	Severe [I] 01 Moderate [II] 02 Mild [III] 03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.017	Does [CHILD] have any <b>long term health problems</b> that affect his/her daily life?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.018	Does [CHILD] have a <b>vaccination card</b> ?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.019	[INSTRUCTIONS: show vaccination overview]  Has [CHILD] <b>received</b> any of the following <b>vaccinations</b> ?	Tuberculosis (BCG)	yes 01 no 02	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.020		Diphtheria - Pertussis - Tetanus (DPT)	yes 01 no 02	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.021		Poliomyelitis	yes 01 no 02	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.022		Measles	yes 01 no 02	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.023		Hepatitis B	yes 01 no 02	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



## D(2) Child Schooling

[Instruction: For children not in school any more, please answer all questions retrospectively for the last year the child attended school.][Interviewer: please ask open ended unless indicated otherwise.]

ID	(please copy precisely the ID of each person from roster)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.024	Approximately how much <b>time</b> does it take to make a <b>one-way</b> trip to [CHILD]'s current school?	(write number) [in minutes]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.025	In which <b>language</b> is the <b>instruction</b> in this school?	Romanian 01 Russian 02 Other (specify) 03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.026	How good would you say the <b>school</b> is in terms of <b>overall quality</b> (including teaching and infrastructure)?[read options]	Very good 01 Good 02 Neither good nor poor 03 Poor 04 Very poor 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.027	Has [CHILD] <b>ever been out</b> of school for at least three consecutive months at any time, excluding holiday times?	yes 01 no 02	→ If no, continue with D.030	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.028	What <b>grade</b> was [CHILD] in when this happened (the last time)?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.029	<b>Why</b> did [CHILD] miss school for three consecutive months or more the last time (excl. holiday times)?	Child was ill 01 Child was doing household chores 02 Child was working outside home 03 School was too far away 04 School was too expensive 05 Child refused to attend 06 Other (specify) 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.030	Has [CHILD] ever <b>repeated</b> a grade?	yes 01 no 02	→ If no, continue with D.032	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.031 a	<b>Which</b> grade(s) did [CHILD] repeat?	(write grade as number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.031 b				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.031 c				<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

D.032	Has [CHILD] been <b>suspended, excluded, or expelled</b> from school in the past school year?	yes no	01 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.033	Had [CHILD] been given any <b>disciplinary measures</b> last school year, such as being placed on probation at school?	yes no	01 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.034	Have you been contacted by a teacher of [CHILD]'s school in the last school year?	yes no	01 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.035	How would you say [CHILD] is <b>performing</b> in school? <i>[read options]</i>	Very well Well Neither well nor poorly Poorly Very poorly	01 02 03 04 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.036	What was [CHILD] 's <b>annual score</b> for the following subjects last year:	Native language			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.037		Romanian/ Russian (if not native language)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.038		Foreign Language (e.g. English, French, Italian, German)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.039		Mathematics			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.040		Total average for the whole year			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.041	What was the total of <b>expenditure on schooling</b> (including tuition fees, textbook fees, pens, exercise books, food, uniforms, etc.) for the past school year?	(write in LCU)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.042	How much else did you <b>pay for schooling</b> to teachers (incl. gifts)?	(write in LCU)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.043	For the past school year, how much did <b>transportation</b> cost?	(write in LCU)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

D.044	For the past school year, how much did you spend on <b>supplemental tutoring</b> for [CHILD]?	(write in LCU)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.045	<b>Imagine</b> finances were not a problem and everything else went right, what is the <b>highest level of formal education</b> you <b>WISH</b> [CHILD] could <b>complete</b> ?	Primary 01 Lower secondary 02 (Upper) Secondary 03 Post-secondary 04 First-stage tertiary (bachelor) 05 First-stage tertiary (master) 06 Second-stage tertiary 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.046	Consider your <b>current financial situation</b> and the child's prospects. Using this card on which 0 means impossible and 10 is certain, <b>how likely</b> is it that [CHILD] <b>will complete</b> this level of education?	[INSTRUCTION: Please show ladder.]  (write number between 0 and 10)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.047	So, what is the <b>highest level</b> of schooling you <b>THINK</b> [CHILD] will <b>CERTAINLY</b> complete?	Primary 01 Lower secondary 02 (Upper) Secondary 03 Post-secondary 04 First-stage tertiary (bachelor) 05 First-stage tertiary (master) 06 Second-stage tertiary 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.048	Is there anything <b>standing in the way</b> of [CHILD] going as far in school as you would like him/her to go?	yes 01 no 02	→ If no, continue with D.050	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.049	What is the <b>main reason</b> that [CHILD] <b>cannot go as far in school</b> as you would like him/her to go?	Cannot pay for education 01 No access to required level (distance) 02 Child's ability 03 Child has to care for siblings and elderly 04 Child is needed for other things in the household 05 Child wants to migrate 06 Other (specify) 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

D.050	Who in the household is mostly <b>making the decisions</b> related to [CHILD] 's schooling?	Mother decides 01 Father decides 02 Both decide 03 Caregiver if other than mother/father 04 Other (specify) 05						
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### D(3) Child's Migration

ID	(please copy precisely ID of each child from roster)							
D.051	Do you think it would be <b>good</b> for [CHILD] to <b>live or work</b> in a <b>different country</b> when [CHILD] finishes his/her formal education?	yes 01 no 02	→ If no, continue with D.057					
D.052	<b>Why</b> do you think it would be good for [CHILD]?	Absence of a job in home country 01 Good working conditions abroad 02 Better way of life abroad 03 To help family 04 Join family abroad 05 To study abroad 06 Other (specify) 07						
D.053	<b>Which country</b> would be the best for [CHILD] to live or work?	(write code for COUNTRY)						
D.054	Using this card on which <b>0 means impossible</b> and <b>10 is certain</b> , how <b>likely</b> is it that [CHILD] <b>will actually live or work</b> in that country in the future?	[INSTRUCTION: Please show ladder.] (write number)						
D.055	How much do you think [CHILD] could <b>earn</b> in that country per month?	(write in currency units)						
D.055 CURR	Which currency is this?	(use codelist)						
D.056	Do you think formal <b>education is important</b> to live or work in that country?	yes 01 no 02						

D.057	Do you think [CHILD] will give you <b>financial support in the future?</b>	yes no	01 02		___	___	___	___	___
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#### D(4) Child's Time Allocation

ID	(please copy precisely ID of each child from roster)			___	___	___	___	___
D.058	Does [CHILD] have access to <b>age-appropriate books at home</b> besides textbooks?	yes no	01 02	If age<3 skip to D.073	___	___	___	___
D.059	Does [CHILD] have a <b>place</b> at home where he/she can read or <b>study in quiet?</b>	yes no	01 02		___	___	___	___
D.060	Did [CHILD] do any chores last month?	yes no	01 02		___	___	___	___
D.061	How many hours did [CHILD] do chores last week?	(write number)			___	___	___	___
D.062	How many days did [CHILD] do chores last months?	(write number)			___	___	___	___
D.063	Did [CHILD] work for the family farm last month?	yes no	01 02		___	___	___	___
D.064	How many hours did [CHILD] work for the family farm last week?	(write number)			___	___	___	___
D.065	How many days did [CHILD] work for the family farm last month?	(write number)			___	___	___	___
D.066	Did [CHILD] work for the family non-farm business last month?	yes no	01 02		___	___	___	___
D.067	How many hours did [CHILD] work for the non-farm business last week?	(write number)			___	___	___	___
D.068	How many days did [CHILD] work for the non-farm business last month?	(write number)		If no then skip to D.073	___	___	___	___
D.069	Did [CHILD] work for money last month?	yes no	01 02		___	___	___	___

D.070	How many hours did [CHILD] work for money last week?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.071	How many days did [CHILD] work for a wage last month?	(write number)	If no to D.063 and D.069 then skip to D.073	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.072	What were [CHILD]'s <b>earnings</b> last month?	(write in LCU)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.073	How many <b>classmates or friends</b> does [CHILD] often play or spend time with?	(write number)	If age<2 skip to D.077	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.074	How <b>frequently</b> does [CHILD] have <b>friends come to your home</b> for fun or to work on something together? <i>[show card]</i>	Every day 01 More than 3 times a week 02 At least once a week 03 At least once a month 04 Less often 05 Never 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.075	Do you <b>know the names</b> of [CHILD]'s good friends?	yes 01 no 02 Child does not have any friends 03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.076	Compared to others of his/her age, <b>how well</b> does [CHILD] <b>get along with other children</b> ? <i>[read options]</i>	Very well 01 Well 02 Neither well nor poorly 03 Poorly 04 Very poorly 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.077	How would you describe your <b>relationship with</b> [CHILD]? <i>[read options]</i>	Very close 01 Close 02 Neither close nor distant 03 Distant 04 Very distant 05	If caregiver is mother, go to D.079	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.078	How would you describe the <b>relationship</b> between [CHILD] and his/her <b>mother</b> ? <i>[read options]</i>	Very close 01 Close 02 Neither close nor distant 03 Distant 04 Very distant 05	If caregiver is father, go to D.080	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.079	How would you describe the <b>relationship</b> between [CHILD] and his/her <b>father</b> ? <i>[read options]</i>	Very close 01 Close 02 Neither close nor distant 03 Distant 04 Very distant 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.080	How often have you done	Playing	Only 5+	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

D.081	the following <b>activities</b> with [CHILD] in the last month? Please indicate how often you have done them:	Worked with [CHILD] around the house	Only 5+	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.082		Helped [CHILD] do homework or a school project?	Only 6+	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.083		Discussed [CHILD]'s experiences at school (e. g., asking [CHILD] what he/she did at school)?	Only 6+	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.084		Discussed news or current events with [CHILD]?	Only 4+	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.085		Done a special activity with [CHILD] outside the house (like going to the cinema or a zoo)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.086	Over the last week, how many times have you had a <b>dinner</b> together with [CHILD]?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## D(5) Parenting Practices

All adults use certain ways to teach children the right behavior or to address a behavior problem. I will read various methods that are used, and I want you to tell me if you are or anyone else in your household uses this method with [CHILD]:

ID	(please copy precisely the ID of each child from roster)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.087	Explain why something was wrong	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.088	Offer extra privileges or money	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.089	Threaten to take away privileges	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.090	<b>Encourage [CHILD] to think independently.</b>	yes 01 no 02	If age<6 skip to D.092	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.091	<b>Encourage [CHILD] to work harder,</b> when [CHILD] is not doing well at school,	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.092	When [CHILD] is in bad mood or in trouble, you can easily <b>notice</b> it immediately.	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.093	[CHILD] <b>is willing to talk</b> to you when she/he has difficulties.	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

D.094	You know what [CHILD] <b>does after school.</b>	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.095	If [CHILD] does something that annoys you (or another caretaker), you ...	Shake [CHILD]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.096		Shout, yell or scream at [CHILD]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.097		Make [CHILD] work around the house		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.098		Call [CHILD] dumb, lazy or another name like that		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.099		Spank or slap [CHILD]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.100		Beat or hit [CHILD] repeatedly		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.100 N1	For each of the following, please tell me which of the two propositions you most agree with: 1. "Each person is primarily responsible for his/her success or failure in life" 2. "One's success or failure in life is a matter of his/her destiny"	[Interviewer: write 1 or 2]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D.100 N2	For each of the following, please tell me which of the two propositions you most agree with: 1. "To be successful, above all one needs to work very hard" 2. "To be successful, above all one needs to be lucky"	[Interviewer: write 1 or 2]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## D(6) Child Behavior (Strengths and Difficulties Questionnaire [SDQ])

PC1 – Parent Report Measure for Children aged 04-10, Baseline version;

PY1 – Parent Report Measure for Youth aged 11-19, Baseline version;



## PC1 – Only for children 4-10 years old

For each item, please state if the following statements are Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can, even if you are not absolutely certain. Please give your answers on the basis of the child's behavior over the last six months.

Not True 01  
Somewhat True 02 [Interviewer: please show card]  
Certainly True 03

ID	(please, copy precisely the ID of each child from roster)							
D.101	Considerate of other people's feelings							
D.102	Restless, overactive, cannot stay still for long							
D.103	Often complains of headaches, stomachaches or sickness							
D.104	Shares readily with other children, for example toys, treats, pencils							
D.105	Often loses temper							
D.106	Rather solitary, prefers to play alone							
D.107	Generally well behaved, usually does what adults request							
D.108	Many worries or often seems worried							
D.109	Helpful if someone is hurt, upset or feeling ill							
D.110	Constantly fidgeting or squirming							
D.111	Has at least one good friend							
D.112	Often fights with other children or bullies them							
D.113	Often unhappy, depressed or tearful							
D.114	Generally liked by other children							
D.115	Easily distracted, concentration wanders							
D.116	Nervous or clingy in new situations, easily loses confidence							

D.117	Kind to younger children							
D.118	Often lies or cheats							
D.119	Picked on or bullied by other children							
D.120	Often offers to help others (parents, teachers, other children)							
D.121	Thinks things out before acting							
D.122	Steals from home, school or elsewhere							
D.123	Gets along better with adults than with other children							
D.124	Many fears, easily scared							
D.125	Good attention span, sees work through to the end							
D.126	Did [CHILD] experience a <b>change in character</b> after the migration of the household member? <i>[Ask only if migration experience in household.]</i>	yes no	01 02					

## PY1 – Only for children 11-19 years old

For each item, please state if the following statements are Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain. Please give your answers on the basis of the child's behavior over the last six months or this school year.

Not True                      01  
Somewhat True            02            [Interviewer: please show card]  
Certainly True              03

ID	<i>(please, copy precisely the ID of each child from roster)</i>							
D.127	Considerate of other people's feelings							
D.128	Restless, overactive, cannot stay still for long							
D.129	Often complains of headaches, stomachaches or sickness							

D.130	Shares readily with other youth, for example books, games, food			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.131	Often loses temper			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.132	Would rather be alone than with other youth			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.133	Generally well behaved, usually does what adults request			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.134	Many worries or often seems worried			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.135	Helpful if someone is hurt, upset or feeling ill			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.136	Constantly fidgeting or squirming			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.137	Has at least one good friend			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.138	Often fights with other youth or bullies them			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.139	Often unhappy, depressed or tearful			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.140	Generally liked by other youth			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.141	Easily distracted, concentration wanders			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.142	Nervous in new situations, easily loses confidence			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.143	Kind to younger children			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.144	Often lies or cheats			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.145	Picked on or bullied by other youth			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.146	Often offers to help others (parents, teachers, children)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.147	Thinks things out before acting			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.148	Steals from home, school or elsewhere			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.149	Gets along better with adults than with other youth			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.150	Many fears, easily scared			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D.151	Good attention span, sees work through to the end			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D.152	Did [CHILD] experience a <b>change in character</b> after the migration of the household member? <i>[Ask only if migration experience in household.]</i>	yes 01 no 02		<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
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[INTERVIEWER: Please ask for the telephone number and fill it in on the second page of the questionnaire.]

# THANK YOU FOR YOUR PARTICIPATION

## Please find details of our research at ...

## E. Children (11 – 19 years of age)

[Interviewer: Each child has to be interviewed separately]

IN THIS SECTION , WE WOULD LIKE TO TALK A LITTLE BIT ABOUT YOUR LIFE. JUST TO BE SURE, YOU ARE BETWEEN 11 AND 19, CORRECT? FIRST, WE'RE GOING TO ASK A FEW QUESTIONS ABOUT YOUR FAMILY, THEN WE'LL TALK ABOUT SCHOOL HEALTH, AND TOPICS LIKE THAT. IF YOU EVER DON'T WANT TO ANSWER A QUESTION, YOU DON'T HAVE TO, AND WHEN YOU HAVE QUESTIONS I WANT YOU TO ASK THEM,. PLEASE FEEL FREE TO INTERRUPT ME IF YOU NEED TO ASK SOMETHING OR WANT TO TELL ME SOMETHING ELSE. IT WOULD HELP US IF YOU ANSWERED ALL ITEMS AS BEST AS YOU CAN EVEN IF YOU ARE NOT ABSOLUTELY CERTAIN. PLEASE GIVE YOUR ANSWERS ON THE BASIS OF HOW YOU HAVE FELT OVER THE LAST SIX MONTH.

### E(1) Responsibility

ID	(please copy precisely the ID of each child from roster)							
E.001	If child was not interviewed, why?	Not applicable, interview was conducted 01 Disabled and not able to answer 02 Absent from household 03 Sick 04 Refused 05 Other (specify) 06						

[Interviewer: in the following please always ask open ended unless indicated otherwise. For questions with repeating options, show card.]

In the computer-assisted version, E.002B (What is the name of your caregiver?) double checks the name of the caregiver in order to decrease the risk of not being able to match the data.

ID	(please copy precisely the ID of each child from roster)							
E.002	Who living in your household is <b>primarily responsible for raising you</b> ?  [For interviewer: If parent is regularly abroad, please ask who is responsible if that person is away.]	If in household, write ID  If not in household: Sister not in hh 51 Brother not in hh 52 Grandmother 53 Grandfather 54 Step-mother 55 Step-father 56 Aunt 57 Uncle 58 Other family member 59 Friend of family 60 Neighbor 61 Godmother, godparents 62 Other (specify) 71	→ Continue with E.006 if mother lives in hh					
E.003	Have you had <b>any contact</b> with your biological mother in the past 12 months?	Yes, mother is in household 01 Yes, mother is not in household 02 No 03	→ If no, go to E.008					
E.004	During the past 12 months, <b>how often</b> have you <b>seen</b> her? [read scale out once, show card for this and following questions]	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07						

E.005	During the past 12 months, <b>how often</b> did you talk on the telephone/skype or receive a letter/parcel/email from her?	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.006	<b>During the last 12 months, how often</b> did you talk about school with your mother?	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07	→ Continue with E.007 if not in school	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.007	<b>During the last 12 months, how often</b> did you talk about your health with your mother?	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07	→ Continue with E.011 if father lives in hh	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.008	Have you had <b>any contact</b> with your biological <b>father</b> in the past 12 months?	Yes, father is in household 01 Yes, father is not in household 02 No 03	→ If no, continue with E.013	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.009	During the past 12 months, <b>how often</b> have you <b>seen</b> him?	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.010	During the past 12 months, <b>how often</b> did you talk on the telephone or receive a letter from him?	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.011	<b>How often</b> did you talk about school with your father?	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07	→ Continue with E.012 if not in school	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

E.012	How often do you talk about your health with your father?	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07						
E.013	If you need help with the following situations, who would you turn to?	If you were having a problem with your studies at school?						
E.014	If in household, write ID 1:15 If not in household:	If you were having a health problem?						
E.015	Sister not in household 51 Brother not in household 52 Grandmother 53 Grandfather 54	If you were worried about something at home?						
E.016	Step-mother 55 Step-father 56 Aunt 57 Uncle 58	If you were being teased or bullied by another child?						
E.017	Other family member 59 Family's Friend 60 Neighbor 61 Godmother or Godfather 62 Other (Specify) 71	If you needed money?						

## E(2) Schooling

→Start with E.029 if not in school [Interviewer: ask open ended question unless indicated otherwise]

ID	(please copy precisely the ID of each child from roster)						
E.018	Did you go to school last week?	yes 01 no 02	→ If yes, continue with E.020				

E.019	If not, what was the <b>main reason</b> you did not?	Busy working at home 01 Busy working (at a payed job) 02 Sick 03 No motivation / Did not want to 04 Was away from home 05 Could not arrange transportation 06 Special family reasons 07 School holiday 08 Other (Specify) 09		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.020	During the last year, have you <b>skipped school</b> or <b>cut classes</b> without permission, or <b>refused</b> to go to school?	yes 01 no 02	→ If no, continue with E.022	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.021	If yes, what was the <b>main reason</b> ?	Busy working at home 01 Busy working (at a payed job) 02 Sick 03 No motivation / Did not want to 04 Was away from home 05 Could not arrange transportation 06 Special family reasons 07 School holiday 08 Other (Specify) 09		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.022	In the last month, did you get into a <b>physical fight at school</b> ?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.023	How often in the last 7 days did you come to class <b>without</b> completing <b>your homework</b> or preparation for lessons? <i>[read options]</i>	Never 01 Rarely 02 Sometimes 03 Often 04 Always 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.024	What is your <b>favorite subject</b> ?	Native Language 01 Romanian / Russian 02 Foreign Language 03 History 04 Geography 05 Mathematics 06 Science 07 Other(specify) 08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.025	[INSTRUCTION: <i>show card</i> ] Would you say in your class you are:	one of the best students 01 above average 02 average 03 below average 04 one of the worst students 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



E.026	Did your <b>school performance change</b> over the last year? If so, has it become ...? <i>[read options]</i>	Much better 01 Better 02 Neither better nor worse 03 Worse 04 Much worse 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.027	<b>How long</b> does it take you to get to school?	(write number) [in MINUTES]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.028	How do you <b>usually</b> travel to school?	By foot 01 By bus 02 By private car 03 By motorbike 04 By bicycle 05 Other (specify) 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.029	<b>Imagine</b> you had <b>no constraints</b> and <b>could study for as long as you liked</b> , or go back to school if you have already left. What is the <b>highest level</b> of formal education you <b>WISH</b> to complete?	Primary 01 Lower secondary 02 (Upper) Secondary 03 Post-secondary 04 First-stage tertiary (bachelor) 05 First-stage tertiary (master) 06 Second-stage tertiary(PhD/Dr) 07	→ If no answer, continue with E.031	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.030	Consider your family's current situation. Using this card on which 0 means impossible and 10 is certain, <b>how likely</b> is it that you <b>will complete</b> this level of education?	[INSTRUCTION: Please show ladder.]  (write number between 0 and 10)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.031	So, what is the highest level of schooling you <b>THINK</b> you will <b>CERTAINLY</b> complete?	Primary 01 Lower secondary 02 (Upper) Secondary 03 Post-secondary 04 First-stage tertiary (bachelor) 05 First-stage tertiary (master) 06 Second-stage tertiary(PhD/Dr) 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.032	What's the highest education your <b>[CAREGIVER]</b> <b>wants/wanted</b> you to get?	Primary 01 Lower secondary 02 (Upper) Secondary 03 Post-secondary 04 First-stage tertiary (bachelor) 05 First-stage tertiary (master) 06 Second-stage tertiary(PhD/Dr) 07	→ If no answer, skip E.033	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

E.033	<b>How important is/was it to (him/her/them) that you get at least that much education?</b>	Not at all important	01					
		Slightly important	02					
		Indifferent	03					
		Moderately important	04					
		Very important	05					

### E(3) Migration

IN THIS SECTION I WOULD LIKE TO ASK YOU A FEW THINGS ABOUT [MIGRANT]. IN PARTICULAR, I WILL ASK HOW THINGS HAVE CHANGED SINCE HE/SHE LEFT AND IF YOU WOULD LIKE TO MIGRATE YOURSELF SOMEDAY.

Note: Skip and continue with E(4) if no migrants in household. *[Interviewer: ask open ended question unless indicated otherwise]*

[Ask questions E.034 to E.046 only to children whose mother is living in the household but currently a migrant ([MIGRANT]=mother). Ask the question [MIGRANT=father] if the father is living in the household but currently a migrant. If both mother and father are living in the household but migrants, ask for mother [MIGRANT=mother].

ID	(please copy precisely the ID of each child from roster)			<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
E.034 O	In the last 12 months, did anyone from your family go abroad (father, mother or brother/sister)?	da 01 nu 02 <i>[Interviewer: Assure that you ask for the last 12 months. Also make sure the child understands that you only ask for close relatives living in the household.]</i>		<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
E.034	<b>Before [MIGRANT] left</b> , did you <b>know</b> he/she was going to leave?	yes 01 no 02	→ If no, continue with E.036	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
E.035	<b>Before [MIGRANT] left</b> , did he/she <b>consult you</b> about it and ask for your help in making the decision?	yes 01 no 02		<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
E.036	<b>Do you think</b> that [MIGRANT] made a <b>good decision</b> to leave?	yes 01 no 02		<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
E.037	When someone in your family migrates, things at home often change. I am going to read a few statements to you, and I	I have more responsibilities than before		<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
E.038		I have less time for myself than before		<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>
E.039		I spend more time by myself than before		<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>	<div><div></div><div></div><div></div></div>

E.040	would like you to tell me if they are:	I don't feel as safe at home as I did before		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.041	Not True 01 Somewhat True 02 Certainly True 03  <i>[show card]</i>	I have to take care of my own affairs more than I did before		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.042		I have more pocket money than before		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.043		I don't tell [MIGRANT] about problems I might have because I don't want him/her to worry		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.044		I have less interest in things like school than I did before		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.045		People in my community treat me differently than before		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.046	In general, would you say that since [MIGRANT] left, <b>your life has become...</b> <i>[read options]</i>	Much better 01 Better 02 Neither better nor worse 03 Worse 04 Much worse 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.047	Would you <b>like to live or work</b> in a different country?	yes 01 no 02	→ If no, continue with E.052	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.048	<b>Why</b> would you like to go to a different country?	Absence of a job in Moldova 01 Good working conditions 02 Better way of life in [COUNTRY] 03 To help my family 04 To join close family members 05 Social contacts other than family 06 Recommended by others 07 To escape pressure in family 08 To study abroad 09 Other (specify) 10		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.049	In <b>which country</b> would you like to live or work most?	(write number) [COUNTRY LIST]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.050	<b>Why</b> would you like to go to that country?	Job guarantee 01 Good working conditions 02 Better way of life 03 Higher wages 04 Can join family members 05 Social contacts other than family 06 Recommended by others 07 Low cost of migration 08 To study abroad 09 Language 10 Other (specify) 11		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.051	Using this card on which 0 means impossible and 10 is	[INSTRUCTION: Please show ladder.]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

	certain, <b>how likely</b> is it that you will actually live or work in that country in the future?	(write number between 0 and 10)						
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## E(4) Health

IN THIS PART I WILL ASK YOU A FEW THINGS ABOUT YOUR HEALTH.

ID	(please, copy precisely the ID of each child from roster)							
E.052	Do you have your <b>own bed</b> ?	yes no	01 02					
E.053	Did you <b>brush your teeth</b> at least once yesterday?	yes no	01 02					
E.054	Usually, you <b>eat meals</b> ...	more than 3 times a day 3 times a day 2 times a day once a day less than once a day	01 02 03 04 05					
E.055	During the previous 24-hour period did you <b>consume</b> :	Bread						
E.056		Potatoes, Pasta, Polenta, etc.						
E.057		Eggs						
E.058		Fish or Meat						
E.059		Milk or dairy products						
E.060		Vegetables						
E.061		Fruits						
E.062		Sugar, Sweets						

## E(5) Time Allocation & Activities

NOW I WOULD LIKE TO ASK A FEW QUESTIONS ON HOW YOU SPEND YOUR TIME.

[Interviewer: ask open question if not indicated otherwise.]

ID	(please copy precisely the ID of each child from roster)							
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E.076	Are you a member of any <b>groups or clubs</b> in your local area or at school?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.077	How many evenings last week did you <b>eat dinner with [CAREGIVER]</b> ?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.078	Do you ever spend time at home <b>without any adults</b> late at night?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.079	How many, if any, days per week are you at <b>home after school without an adult</b> for more than two hours?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.080 A	How often do you go to a day-care or other center in the community or the school psychologist? <i>[show card]</i>	Every day 01 More than 3 times a week 02 At least once a week 03 At least once a month 04 Less often 05 Never 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.080 A0	How often do you visit the school psychologist?	Every day 01 More than 3 times a week 02 At least once a week 03 At least once a month 04 Less often 05 Never 06 There is no psychologist 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.080 B	How often does the social assistant visit your home? <i>[show card]</i>	Every day 01 More than 3 times a week 02 At least once a week 03 At least once a month 04 Less often 05 Never 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## E(6) Emotions and Attitudes (Strengths and Difficulties Questionnaire [SDQ])

YR1 – Youth self report measure (11-17), Baseline version;

YR11

For each item, please state if the following statements are Not True, Somewhat True or Certainly True. It would help us if you answered all items as good as you can even if you are not absolutely certain. Please give your answers on the based on how you have felt over the last six months or this school year.

Not True 01  
Somewhat True 02 *[Interviewer: please show card]*

ID	(please, copy precisely the ID of each child from roster)						
E.081	I try to be nice to other people. I care about their feelings						
E.082	I am restless, I cannot stay still for long						
E.083	I get a lot of headaches, stomachaches or sickness						
E.084	I usually share with others, for example CD's, games, food						
E.085	I get very angry and often lose my temper						
E.086	I would rather be alone than with people of my age						
E.087	I usually do as I am told						
E.088	I worry a lot						
E.089	I am helpful if someone is hurt, upset or feeling ill						
E.090	I am constantly fidgeting or squirming						
E.091	I have one good friend or more						
E.092	I fight a lot. I can make other people do what I want						
E.093	I am often unhappy, depressed or tearful						
E.094	Other people my age generally like me						
E.095	I am easily distracted, I find it difficult to concentrate						
E.096	I am nervous in new situations. I easily lose confidence						
E.097	I am kind to younger children						
E.098	I am often accused of lying or cheating						
E.099	Other children or young people pick on me or bully me						
E.100	I often offer to help others (parents, teachers, children)						

E.101	I think before I do things			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.102	I take things that are not mine from home, school or elsewhere			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.103	I get along better with adults than with people my own age			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.104	I have many fears, I am easily scared			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.105	I finish the work I'm doing. My attention is good			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ID	(please copy precisely the ID of each child from roster)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.105 N1	For each of the following, please tell me which of the two propositions you most agree with: 1. "Each person is primarily responsible for his/her success or failure in life" 2. "One's success or failure in life is a matter of his/her destiny"	[Interviewer: write 1 or 2]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.105 N2	For each of the following, please tell me which of the two propositions you most agree with: 1: "To be successful, above all one needs to work very hard" 2: "To be successful, above all one needs to be lucky"	[Interviewer: write 1 or 2]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.106	I feel safe when I go out of the house on my own	Not True 01 Somewhat True 02 Certainly True 03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.107	If I try hard, I can improve my situation in life	Not True 01 Somewhat True 02 Certainly True 03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.108	Other people in my family make all the decisions about how I spend my time	Not True 01 Somewhat True 02 Certainly True 03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.109	Adults in my community treat me as well as they treat other children at my age	Not True 01 Somewhat True 02 Certainly True 03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.109 B	How proud are you to be Moldovan? (Read out and code one answer):	Very proud 01 Quite proud 02 Not very proud 03 Not at all proud 04 I am not Moldovan (do not read out! Code only if volunteered!) 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



## E(7) Parenting Practices

There are many different ways that caregiver try to influence their children's behavior. When your [CAREGIVER] wants you to do something or not to do something, do/does or doesn't/don't he/she/they do the following?

ID	(please copy precisely the ID of each child from roster)							
E.110	Explains why something was wrong	yes no	01 02					
E.111	Offers extra privileges or money	yes no	01 02					
E.112	Threatens to take away privileges	yes no	01 02					
E.113	<b>Encourages</b> you to think <b>independently</b> .	yes no	01 02					
E.114	When you are not doing well at school, he/she <b>encourages you to work harder</b> .	yes no	01 02					
E.115	When you are in a bad mood or in trouble, he/she can easily <b>notice</b> it immediately.	yes no	01 02					
E.116	You are <b>willing to talk to him/her</b> when you have difficulties.	yes no	01 02					
E.117	He/she knows what you <b>do after school</b> .	yes no	01 02					
E.118	He/she tends to keep in touch with your <b>teachers</b> .	yes no	01 02					
E.119	He/she knows who your <b>friends</b> are.	yes no	01 02					
E.120	If you had done something that annoyed him/her (or another caretaker), he/she...	Shook you						
E.121		Shouted, yelled or screamed at you						
E.122		Made you work around the house						
E.123		Called you dumb, lazy or another name like that						
E.124		yes no	01 02	Spanked or slapped you				
E.125	Beat or hit you repeatedly							

[Interviewer: please show card]

ID	(please copy precisely the ID of each child from roster)							
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E.126	How would you describe your <b>relationship</b> with [CAREGIVER]?	Very close 01 Close 02 Neither close nor distant 03 Distant 04 Very distant 05	→ If mother = caregiver continue with E.128					
E.127	How would you describe your relationship with <b>mother</b> ?  <i>Don't ask this if mother dead!</i>	Very close 01 Close 02 Neither close nor distant 03 Distant 04 Very distant 05	→ If father = caregiver continue with E.129					
E.128	How would you describe your relationship with <b>father</b> ?  <i>Don't ask this if father dead!</i>	Very close 01 Close 02 Neither close nor distant 03 Distant 04 Very distant 05						

## E(8) Health Behavior

NOW I WOULD LIKE TO ASK A FEW PERSONAL QUESTIONS. HOWEVER IT WOULD BE VERY IMPORTANT FOR OUR RESEARCH TO FIND OUT HOW CHILDREN OF YOUR AGE IN MOLDOVA/GEORGIA REALLY ARE. YOU CAN BE ASSURED THAT YOUR ANSWERS WILL BE TREATED CONFIDENTIALLY AND NEITHER THE GOVERNMENT NOR ANYONE ELSE APART FROM THE INDEPENDENT RESEARCHERS WORKING WITH THE DATA WILL GET THEM.

ID	(please, copy precisely the ID of each child from roster)							
E.129	Do you <b>smoke</b> ?	yes 01 no 02						
E.130	Has any of your family members <b>told you</b> about the <b>hazard</b> of smoking?	yes 01 no 02						
E.131 A	How much beer did you drink last week? (in ml)	(write number)	→ If child younger than 14, go to E(9)					
E.131 B	How much wine did you drink last week? (in ml)	(write number)						
E.131 C	How much liquor or vodka did you drink last week? (in ml)	(write number)						

E.132	Can you name 3 ways to <b>prevent pregnancy</b> ?	(check if these 3 measures are correct and enter code – if not do not correct child but enter wrong code) yes 01 no 02						
E.133	Have you <b>ever</b> had <b>sexual intercourse</b> ?	yes 01 no 02	→ If no, go to E.135					
E.134	Are you currently <b>sexually active</b> ?	yes 01 no 02						
E.135	Do you have <b>access to contraceptives</b> like birth control pills, condoms, diaphragms, etc.?	yes 01 no 02	→ If child is male, go to E.139					
E.136	Have you ever been <b>pregnant</b> ? If so, <b>how many</b> times?	(write number, indicate 0 if never pregnant)	→ If 0, go to E.139					
E.137	<b>How many children</b> have you carried to term?	(write number)						
E.138	How many <b>pregnancies</b> were <b>terminated</b> ?	(write number)						

## E(9) Anthropometry

ID	(please, copy precisely the ID of each elderly from roster)							
AN.03	Measurement successful?	yes 01 no 02						
AN.04	If measurements not filled out, why?	Person refused 01 Caregiver/Household head refused 02 Scale malfunctioning 03 Other (specify) 04						
AN.04	Weight Measurement	(write in kg)						
AN.05	Height Measurement	(write in cm)						
AN.06	Arm Length Measurement	(write in cm)						
RT.01	Raven's test taken successfully?	yes 01 no 02						

RT.02	If not, why not?	Person refused	01					
		Caregiver/household head refused	02					
		Did not understand task	03					
		Did not pay attention	04					
		Child cheated	05					
		Other, specify	06					
RT.15	Score on Raven's Test							

Comment: In CAPI version, the answer for each item is to be entered. Then, the resulting score is calculated automatically.

# THANK YOU FOR YOUR PARTICIPATION

## Please find details of our research at ...

**IN THIS SECTION,** I WOULD LIKE TO FIND OUT MORE ABOUT YOUR LIFE HERE. JUST TO DOUBLE CHECK, YOU ARE 60 OR OLDER, RIGHT? I WOULD FIRST LIKE TO ASK A FEW QUESTIONS ABOUT YOUR FAMILY—YOUR SPOUSE AND CHILDREN, IF YOU HAVE THEM. THEN I'D LIKE TO ASK ABOUT YOUR WORK HISTORY, YOUR HEALTH, AND WHAT KIND OF ACTIVITIES YOU DO. FINALLY, I WOULD LIKE TO TAKE YOUR HEIGHT AND WEIGHT MEASUREMENTS, WHICH I WILL EXPLAIN WHEN WE GET TO THAT PART. IF EVER YOU HAVE QUESTIONS OR ARE RELUCTANT TO ANSWER ANY QUESTION, PLEASE TELL ME AND I'D BE HAPPY TO DISCUSS IT WITH YOU. IT WOULD HELP US IF YOU ANSWERED ALL ITEMS AS BEST AS YOU CAN EVEN IF YOU ARE NOT ABSOLUTELY CERTAIN. PLEASE GIVE YOUR ANSWERS ON THE BASIS OF HOW YOU HAVE FELT OVER THE LAST SIX MONTHS.

## F. Elderly

[Interviewer: Each elderly has to be interviewed separately]

ID	(please copy precisely the ID of each elderly household member from roster)							
F.001	If elderly person was not interviewed, why?	Disabled and not able to answer	01					
		Absent from household	02					
		Sick	03					
		Too old	04					
		Refused	05					
		Other (specify)	06					
		Not applicable, elderly was interviewed	07					

ID	(please copy precisely the ID of each elderly household member from roster)						
F.002	Could you please tell me <b>today's date?</b>	correct 01 not correct 02					

### F(1) Family

ID	F.003a	F.003b	F.004A	F.004B	F.004C	F.004D
(please copy precisely the ID of each elderly and his/her spouse from roster.)	Do you have any <b>children?</b>	If so, how many?	Which of the household member is <b>your child?</b>			If $F.003b > F.004A + F.004B + F.004C$ So there are children of yours living outside of the household?
	yes 01 no 02	(write number)	(please copy precisely the ID from roster)	(please copy precisely the ID from roster)	(please copy precisely the ID from roster)	[check whether all children living in same hh] yes 01 no 02
	→ If no, continue with F.011			Skip if elderly has less than 2 children	Skip if elderly has less than 3 children	→ If no, continue with F.011

	F.004	F.006	F.007	F.008	F.009	F.010	F.011
NEW ID of child that is NOT a household member	[INSTRUCTION : explicitly only include children who do not live in the household] What is his/her name?	What is [NAME]'s sex?	When was [NAME] born?		What is the highest number of years of schooling [NAME] completed?  [Interviewer: Ask for last school graduated from and calculate the years of study.]	Where does he/she currently live?	
	(write text)	male 01 female 02	[YEARS]	[MONTH]	(write number)	[write CITY from list]	[write COUNTRY from list]
61							
62							
63							
64							
65							
66							
67							
68							

## F(2) Work history

ID	(write ELDERLY ID from Roster)				
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F.015	Which of these descriptions <b>best describes</b> your situation (in the last seven days, irrespective of being a pensioner)? [read options]	<u>In paid work (or away temporarily) as</u> Employee 01 Self-employed 02 Working in family business 03 Working on family farm 04  <u>Other</u> Unemployed 05 Permanently sick or disabled 06 Retired 07 Other, specify 08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.016	Have you <b>ever</b> had a <b>paid job</b> ?	yes 01 no 02	→ If no, go to F(3)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.017	How many <b>years</b> did you <b>work in your life</b> ?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.018	In what <b>year</b> were you <b>last in a paid job</b> ?	(write number) [YYYY]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.019	When did you <b>retire</b> ?	(write number) [YYYY]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.020	Can I just check, did you do <b>any paid work</b> (of an hour or more) in the last seven days?	yes 01 no 02	→ If no, go to F(3)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.021	<i>INSTRUCTION: if age&gt;62 then do not ask!</i>  <b>Why</b> do you still work? [read options]	I like my job 01 Cannot make ends meet without a job 02 To make extra money 03 To stay busy/active 04 Other (specify) 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.022	What is your <b>occupation</b> in this activity?	[write text]		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.023	What is the <b>economic sector</b> you work in?	(use codelist)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### F(3) Memory I

We are going to read a list consisting of 10 words, and we would like you to memorize as many as you can. We deliberately made the list long to make it difficult for anyone to memorize all of the words, and most people will only remember a few of them. Please listen carefully as we read the list, because we cannot repeat it. When we finish reading the list, we will ask you to recall and tell us as many words as you can remember, and they don't have to be in order. Is this explanation clear?

1. Hotel	3. Tree	5. Gold	7. Paper	9. King
----------	---------	---------	----------	---------

2. River	4. Arm	6. Market	8. Child	10. Cup
To be answered by the interviewer.				

ID	(please, copy precisely the ID of each elderly from roster)						
F.024	Was the explanation clear?	yes 01 no 02					
F.025	[INSTRUCTION: do not read out – just count] Did you repeat the explanation?	yes 01 no 02					
F.026	[INSTRUCTION: do not read out – just count] Was the memory test interrupted?	yes 01 no 02					
F.027	[INSTRUCTION: do not read out – just count] How many items were recalled correctly?	(write number)					

#### F(4) Health

ID	(please copy precisely the ID of each elderly from roster)						
F.028	Compared with other people of the same age, how would you say your <b>health</b> is? [read options]	Much better 01 Better 02 Neither better nor worse 03 Worse 04 Much worse 05					
F.029	Do you have a <b>disability</b> ? If so, what is your registered <b>degree</b> of disability? [read options]	Does not have disability 01 Grade III (Severe) 02 Grade II (Moderate) 03 Grade I (Mild) 04					
F.030	Now we would like to ask you about some <b>chronic illnesses</b> that you may have been <b>diagnosed</b> with. Do you have any of the following ...	Hypertension	→ If no to all, continue with F.043				
F.031		Diabetes or high blood sugar					
F.032		Tuberculosis (TBC)					
F.033		Asthma					
F.034		Other lung conditions					
F.035		Coronary heart disease, or other heart problems					
F.036		Liver problems					



F.037		Stroke		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.038		Cancer or malignant tumor		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.039		Arthritis/rheumatism		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.040		Uric Acid/Gout		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.041	Did you <b>seek treatment</b> or advice for any of these illnesses in the past?	yes 01 no 02	If yes, continue with F.043	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.042	If you did you not see a doctor, please indicate the most important reason <b>why not</b> . <i>[ask open ended]</i>	Not necessary, because the illness is not serious 01 Have medicine to treat the illness 02 Too expensive to see a doctor 03 Doctor is too far away 04 No time to see a doctor 05 Do not know where to go 06 Do not trust doctors from the community 07 Other (specify) 08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.043	Have you <b>seen a doctor</b> in the last 12month?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.044	What is the <b>travel time</b> to the closest health facility?	<i>(write number) [MINUTES]</i>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.045	<b>How many</b> cigarettes a day do you usually smoke?	<i>(write number)</i>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.046A	How much beer did you drink last week? (in ml)	<i>(write number)</i>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.046B	How much wine did you drink last week? (in ml)	<i>(write number)</i>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.046C	How much liquor or vodka did you drink last week? (in ml)	<i>(write number)</i>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## F(5) Nutrition

ID	<i>(please, copy precisely the ID of each elderly from roster)</i>			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.047	Usually, do you eat meals... <i>[read options]</i>	more than 3 times a day 01 3 times a day 02 2 times a day 03 once a day 04 less than once a day 05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.048	During the previous 24-	Bread		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

F.049	hour period did you consume:  yes      01 no        02	Potatoes, Pasta, Polenta, etc.					
F.050		Eggs					
F.051		Meat or Fish					
F.052		Milk or dairy products					
F.053		Vegetables					
F.054		Fruits					
F.055		Sweets					

## F(6) Wellbeing (Mental Health Inventory [MHI-38])

F.057	All things considered, how <b>happy</b> are you these days? Using this card on which 1 means you are very unhappy and 10 means you are very happy where would you put your happiness as a whole?	(write number between 1 and 10)		
F.058	All things considered, how <b>satisfied</b> are you with your life as a whole these days? Using the same card as before, on which 1 means you are very unsatisfied and 10 means you are very satisfied, where would you put your satisfaction with your life as a whole?	(write number between 1 and 10)		

Now we would like to ask some questions about how you have felt in the past month.*[Interviewer: show card]*

ID	(please, copy precisely the ID of each elderly from roster)						
F.059	How much of the time, during the past month, has your <b>daily life been full of things that were interesting</b> to you?	All of the time Most of the time A good bit of the time Some of the time A little of the time None of the time.	01 02 03 04 05 06				
F.060	How much of the time, during the past month, did you <b>feel relaxed</b> and <b>free of tension</b> ?	All of the time Most of the time A good bit of the time Some of the time A little of the time None of the time.	01 02 03 04 05 06				

F.061	During the past month, how much of the time have you <b>generally enjoyed things</b> ?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06					
F.062	Did you <b>feel depressed</b> during the past month? <i>[read options]</i>	Yes, to the point that I did not care about anything for days at a time 01 Yes, very depressed almost every day 02 Yes, moderately depressed on several occasions 03 Yes, quite depressed at least a couple of times 04 Yes, a little depressed now and then 05 No, I never felt depressed at all 06					
F.063	When you got up in the morning, during the past month, about <b>how often</b> did you <b>expect</b> to have an <b>interesting day</b> ?	Always 01 Very often 02 Fairly often 03 Sometimes 04 Almost never 05 Never 06					
F.064	During the past month, how much of the time have you <b>felt tense or 'high-strung'</b> ?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06					
F.065	How much of the time, during the past month, have you <b>felt calm and peaceful</b> ?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06					
F.066	How much of the time, during the past month, have you <b>felt downhearted and blue</b> ?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06					
F.067	How much of the time, during the past month, were you <b>able to relax</b> without difficulty?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06					
F.068	How often, during the past month, did you feel that <b>nothing turned out for you the way you wanted it to</b> ?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06					
F.069	During the past month, how much of the time has living been a <b>wonderful adventure</b> for you?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06					

F.070	How often, during the past month, have you felt so down in the dumps that <b>nothing could cheer you</b> ?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.071	During the past month, how much of the time have you been <b>moody or brooded</b> about things?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.072	How much of the time, during the past month, have you <b>felt cheerful</b> , light-hearted?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.073	During the past month, how often did you get <b>upset, or flustered</b> ?	Always 01 Very often 02 Fairly often 03 Sometimes 04 Almost never 05 Never 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.074	During the past month, have you been <b>anxious or worried</b> ? <i>[read options]</i>	Yes, extremely so, to the point of being sick or almost sick 01 Yes, very much so 02 Yes, quite a bit 03 Yes, some, enough to bother me 04 Yes, a little bit 05 No, not at all 07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.075	During the past month, how much of the time were you a <b>happy person</b> ?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.076	How often during the past month did you find yourself <b>having difficulty to calm down</b> ?	Always difficult 01 Very often 02 Fairly often 03 Sometimes 04 Almost never 05 Never any difficulty 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.077	During the past month, how much of the time have you been in <b>low or very low spirits</b> ?	All of the time 01 Most of the time 02 A good bit of the time 03 Some of the time 04 A little of the time 05 None of the time. 06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E.077 B	Did you lose a close family member recently?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

## F(7) Mobility

Now we would like to know your **physical ability** in daily activity. If you had [...], could you do it: *[Interviewer: show card]*

Easily 01  
With difficulty 02  
Unable 03

ID	(please copy precisely the ID of each elderly from roster)						
F.078	To carry a heavy load (like a pail of water) for 20 meters						
F.079	To draw a pail of water from a well						
F.080	To walk for 1 kilometer		If no, continue with F.082				
F.081	To walk for 5 kilometers						
F.082	To sweep the house floor or yard						
F.083	To bow, squat, kneel						
F.084	To dress without help						
F.085	To go to the bathroom (BM) without help						
F.086	To bathe						
F.087	To get out of bed						
F.088	To walk across the room						
F.089	To stand up from sitting on the floor without help						
F.090	To stand up from sitting position in a chair without help						
F.091	To shop for personal needs						
F.092	To prepare a meal for yourself						

F.093	To take medicine			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.094	To visit a friend/acquaintances in the same village			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.095	To take a trip out of town			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ID	(please copy precisely the ID of each elderly from roster)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.096	For the daily activities listed above that are necessary for you to do, do you <b>need someone to assist you</b> ?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.097	Do you currently <b>have someone</b> to assist you?	yes 01 no 02	→ If no, continue with F.102	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.098	<b>Who</b> most often assists you in these activities? (write number)	[ROSTER ID] 1 to 15 or child living outside of hh 50 Neighbor 21 Friend 22 Social worker 23 Other (specify) 24		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.099	During the last 7 days, about <b>how many days</b> did <b>this person</b> help you?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.100	<b>On the days</b> when this person helps you, about <b>how many hours</b> per day is that?	(write number)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.101	In the last 7 days, <b>how much money</b> did you spend to have someone assist you in the daily activities mentioned above?	(write number)	→ If no migrant in family, go to F.103	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
F.102	Did the <b>migrant(s)</b> from your household <b>help</b> you with any of the daily activities mentioned above <b>before they left</b> ?	yes 01 no 02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

F.103	If <b>in the future</b> you need someone to assist you in one of the daily activities above, <b>who</b> do you think <b>will assist you</b> [besides your spouse if you are not a widow/er]?	(write number) [ROSTER ID]					
		or					
		Neighbor 21 Friend 22 Social worker 23 Volunteer 24 No one 25 Will have to move to residential institution 26 Other (specify) 27					
F.104	If you have problems walking, do you have a medical device that helps you walk ( <b>walker</b> )?	yes 01 no 02 does not need one 03					

## F(8) Social Services

ID	(please copy precisely the ID of each elderly from roster)					
F.105	Do you have <b>access to free or subsidized goods</b> , such as food or heating material that reduces your expenditures (provided by government or private organizations)?	yes 01 no 02				
F.106	Do you ever <b>visit a communal day care center</b> (provided by government or private organization) where you receive assistance or have access to services?	yes 01 no 02				
F.107	Have you ever <b>lived at an old age residential institution</b> (provided by government or private)?	yes 01 no 02	→ If no continue with F.109			
F.108	If yes, <b>why</b> did you stay at a residential institution? (If lived there more than once, ask for most recent time)	Had severe financial problems 01 Had severe health problems 02 Wanted the social contact 03 Home was temporarily uninhabitable (under repair) 04 Evicted/ homeless 05 Other (specify) 06				

F.109	Do you receive <b>help from a social worker</b> ?	yes no	01 02		___	___	___	___
F.110	Do you receive <b>help from a social assistant</b> (information and help with bureaucracy)?	yes no	01 02		___	___	___	___

## F(9) Time Allocation

ID	(please copy precisely the ID of each elderly from roster)			___	___	___	___
F.111	I want to know how you <b>spent your time</b> on a <b>typical weekday</b> in the last week.  [INSTRUCTIONS: Round to next integer i.e. 30min → 1 h ; In hours – should add up to 24]	Care for children and other household members		___	___	___	___
F.112		Domestic tasks (cleaning, cooking, washing, shopping)		___	___	___	___
F.113		Tasks on family farm, other family business		___	___	___	___
F.114		Activities for pay outside of the household		___	___	___	___
F.115		Watching TV or listening to the radio		___	___	___	___
F.116		Seeing friends		___	___	___	___
F.117		Other hobbies (like reading, etc.)		___	___	___	___
F.118		Sleeping		___	___	___	___
F.119	How many days do you go to <b>church</b> in an average MONTH?	(write number)		___	___	___	___
F.120	On how many days do you have <b>contact with friends</b> in an average week?	(write number)		___	___	___	___
F.121	On how many days do you have <b>help from people</b> who are not part of your household in an average week?	(write number)	Skip to F(10) if elderly lives with younger family members.	___	___	___	___



F.122	On how many days do you have <b>contact with family</b> in an average week?	(write number)					
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## F(10) Helping Children

ID	(please copy precisely the ID of each elderly from roster)							
F.123	During the last 4 weeks, have <b>YOU HELPED</b> your adult children (or your husband's/wife's/partner's child/ren) household members with ...?	shopping or errands (e.g. provided transportation)	yes 01 no 02					
F.124		housework, yard work, or other work around the house	yes 01 no 02					
F.126	During the last 4 weeks, <b>have you helped</b> your <b>adult children</b> (or your husband's/wife's/partner's child/ren) with child care <b>WHILE they were WORKING</b> ?		yes 01 no 02					
F.127	During the last 4 weeks, <b>have you helped</b> your <b>adult children</b> , (or your husband's/wife's/partner's child/ren) with child care <b>AT TIMES OTHER THAN WHEN they were WORKING</b> ?		yes 01 no 02	→ If no migrant continue with F.129				
F.128	During the last 4 weeks, have you helped your <b>adult children</b> with child care while they were abroad?		yes 01 no 02	→ If no to all, go to F.130				
F.129	Taking all kinds of help together, in an average week about <b>how many hours</b> would you say you <b>spend helping your adult children</b> (or your husband's/wife's/partner's child/ren)?		(write number) [HOURS]					
F.125	<b>Which of your adult children</b> (or your husband's/wife's/partner's child/ren) have you most often <b>given advice, encouragement, moral or emotional support</b> in the last month?		(write number) [ROSTER ID or NEW ID from F.004]					
F.130	In the past 12 months, have you given financial support to any of your children?		yes 01 no 02	→ If no, go to F.132				
F.131	How much money have you given in <b>total</b> to your children in the past 12 months?		(write number)					

F.132	[INSTRUCTION: please finish this sentence]		Overwhelmed01 Annoyed 02 part of the family 03 proud 04 this is my duty 05		___	___	___	___
	When I <b>help my children</b> , I <b>mostly feel</b> :[read options]							

## F(11) Help from Children

ID	(please copy precisely the ID of each elderly from roster)				___	___	___	___
F.133	During the last 4 weeks, have you <b>RECEIVED help</b> from your adult <b>children</b> ...?	shopping, running errands, or transportation	yes 01 no 02	→ If no to all, go to F.136	___	___	___	___
F.134		housework, yard work, or other work around the house	yes 01 no 02		___	___	___	___
F.136	Taking all kinds of help together, in an average week about <b>how many hours</b> do your adult children (or your husband's/wife's/partner's child/ren) spend helping you?		(write number) [HOURS]		___	___	___	___
F.135	During the last 4 weeks, have you <b>received advice, encouragement, moral, or emotional support</b> from your adult children (or your husband's/wife's/partner's child/ren)?		yes 01 no 02		___	___	___	___
F.137	When my children <b>help me</b> , I <b>mostly feel</b> :[read options]		Like a burden 01 Embarrassed 02 part of the family 03 proud 04 this is their duty 05		___	___	___	___

ID	(please, copy precisely the ID of each elderly from roster)				___	___	___	___
F.138	How often during the last YEAR did you <b>talk with your children via telephone</b> ?[show card]  [INSTRUCTION: Do not ask for child living in the household]	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07			___	___	___	___
F.139		Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07			___	___	___	___
F.140	How often do your <b>children visit you</b> ?  [INSTRUCTION: Do not ask for child living in the household]		Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07		___	___	___	___

F.141	How often do you <b>speak</b> with your children about your <b>health</b> ?	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07					
F.142	How would you describe your <b>relationship</b> with your child/your children? <i>[show card]</i>	Very close 01 Close 02 Neither close nor distant 03 Distant 04 Very distant 05					

## F(12) Grandparenting

ID	(please copy precisely the ID and name of each elderly from roster)						
F.143	Do you have grandchildren? If so, <b>how many grandchildren</b> do you have?	(write number)	→ If 0, go to F(13)				
F.144	During the last 12 months, about <b>how often did you talk</b> on the telephone or <b>receive a letter or e-mail</b> from (your grandchild/any of your grandchildren)? <i>[show card]</i>  <i>[INSTRUCTION: Do not ask for child living in the household]</i>	Every day 01 More than once a week 02 About once a week 03 At least once a month 04 Several times a year 05 About once a year 06 Never 07					
F.145	How would you describe your <b>relationship with your grandchild/your grandchildren</b> ? <i>[show card]</i>	Very close 01 Close 02 Neither close nor distant 03 Distant 04 Very distant 05					
F.146	For various reasons, grandparents sometimes take on the primary responsibility for raising a grandchild. Have you <b>ever</b> had the <b>primary responsibility</b> for (your grandchild/any of your grandchildren) for six months or more?	Yes 01 No 02	→ If no, continue with F(13)				
F.147	About how many <b>years</b> altogether have you had the <b>primary responsibility</b> for (your grandchild/any of your grandchildren)?	(write number) [YEARS]					

## F(13) Personal Views and Opinions

Now I'd like you to tell me your views on various issues. How would you place your views on this scale? 1 means you agree completely with the statement on the left; 10 means you agree completely with the statement on the right; and if your views fall somewhere in between, you can choose any number in between.

F.148	Incomes should be made more equal	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	We need larger income differences as incentives	□□
F.149	Private ownership of business should be increased	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Government ownership of business should be increased	□□
F.150	State should take more responsibility to ensure the well-being of everyone	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Each one should take more responsibility to ensure his/her own well-being	□□
F.151	Competition is good. It stimulates people to work hard and develop new ideas	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Competition is harmful. It brings out the worst in people	□□
F.152	In the long run, hard work usually brings a better life	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Hard work doesn't generally bring success - it's more a matter of luck and connections	□□
F.153	People can only get rich at the expense of others	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	Wealth can grow so there's enough for everyone	□□
F.154	Generally speaking, most people can be trusted	1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10	You need to be very careful in dealing with people	□□
F.156	How proud are you to be Moldovan? (Read out and code one answer):	Very proud 01 Quite proud 02 Not very proud 03 Not at all proud 04 I am not Moldovan (do not read out! Code only if volunteered!) 05		□□

### F(14) Memory II

Some minutes ago we read a list consisting of 10 words. Can you please tell us as many words as you can remember, and they don't have to be in order.

1. Hotel	3. Tree	5. Gold	7. Paper	9. King
2. River	4. Arm	6. Market	8. Child	10. Cup

ID	(please, copy precisely the ID of each elderly from roster)			□□	□□	□□	□□
F.155	[INSTRUCTION: do not read out – just count]	(write number)		□□	□□	□□	□□
	How many items were correct?						

### F(15) Anthropometry

ID	(please, copy precisely the ID of each elderly from roster)						
AN.03	<b>Measurement successful?</b>	Yes 01 No 02					
AN.04	<b>If measurements not filled out, why?</b>	Person refused 01 Scale malfunctioning 02 No time 03 Other (specify) 04					
AN.04	<b>Weight Measurement</b>	(write in kg)					
AN.05	<b>Height Measurement</b>	(write in cm)					
AN.06	<b>Arm Length Measurement</b>	(write in cm)					

**THANK YOU FOR YOUR PARTICIPATION**

**Please find details of our research at ...**

# Overview sheet for interviewer

THIS SHEET IS TO HELP THE INTERVIEWER BY PROVIDING A SUMMARY OF ALL HOUSEHOLD MEMBERS' CHARACTERISTICS THAT WILL BE REQUIRED TO DECIDE WHICH SECTION TO ASK WHOM. PLEASE FILL IN AFTER HOUSEHOLD ROSTER.

Please write the name of each household member and put a cross if the criterion on the right side holds for an individual.

Name		ID	Age	Child	Elderly	Caregiver	Migrant
		ID from A(1)	Based on A.008	If A.008>1991	If A.008<1952	Person given in D.00A	If C.00A0 = 3 or more months