INTERVIEWER: _____ └┴┴┘

EA : └┴┴┘

HHID : └┴┴┘ └┴┴┘ └┴┴┘ └┴┴┘

Informed Consent (to be read to each individual the first time the individual is interviewed):

Good morning/afternoon/evening,

My name is _____ and my colleague here is _____. We are both from SurveyMeter, an independent research organization based in Yogyakarta. We are currently conducting the fieldwork for Sakerti 5, a survey project conducted with collaboration with RAND Corporation. We will start by reading the informed consent form and ask whether you would be willing to participate in the survey. You can ask about anything that is not clear at any time. Please do discuss with your family members before deciding to participate in the survey.

The IFLS is a longitudinal survey that was first fielded in 1993, and again in 1997, 2000, and 2007. You may remember that we visited your households to interview you or your household members in 2007 or in an earlier round. Your household was interviewed since it was one of the households or part of the households that were randomly chosen to participate since the beginning of the survey in 1993. This year, we will visit the same households again to conduct the interview and to see whether there have been some changes since the last time we visited you.

If you choose to participate in the study, our interviewer will first ask you about your basic demographics, family information, health status, health care and insurance, work, retirement and pensions, household and individual income, expenditure, and assets, etc. Then the interviewer will give you a physical examination to better understand your true health conditions. The measurements include height, weight, waist circumference, blood pressure, peak meter flow lung capacity, grip strength, balance, timed walk, and timed sit to stand. We will also do a finger prick to measure your blood hemoglobin level [and to collect blood spot on a filter paper which we will store and use in the lab for analysis of C-reactive Protein that can be used to measure inflammation and the risk to cardiovascular diseases and HbA1c that can be used to measure risk of diabetes].

This survey will take some time to complete, but we will be doing it at your convenience. If you need to take a break or run some errands, please let us know so we can stop the interview and continue later in the day or the next day.

Generally, the study will pose no health risk. The blood drawing procedure will not transmit diseases to you, because the syringe and needle are new and disinfected. The small amount of blood drawn has no harm to your health. There maybe discomfort or very mild pain, we will help you deal with it.

If you agree to participate in the survey, the physical examination and test results related to your health will be feed back to you directly. And the information you provided can be used to help make health, retirement and social security policies suitable for Indonesia, which will benefit you and other people just like you.

The interview is completely voluntary and all survey information will be kept confidential. With your consent, we also will take picture of you and the front of your house solely for the purpose of confirming your identity and your address in the follow up survey. The photos and all your personal records including, questionnaires, and physical examination and test results are confidential; we will not tell others, include your family, friends, local hospitals, etc. Your personal information, including name, address, phone number, and other information which can be used to identify you will not be disclosed. You are identified by a number in the questionnaires and test records, which will be stored safely in IFLS5 project office. You may withdraw from the study any time, which will not impact any of your benefits. The researcher will keep your information confidentially until it is destroyed, and your information will not be used or disclosed during this period.

If you agree to participate in this study, all the interviews, physical examination, tests and counseling are provided to you for free. You do not need to pay anything.

If you agree to participate in this study, you will get Rp _____ as a token gift of appreciation for the time you spend with us.

If you have any questions about this study, you may contact Bondan Sikoki at SurveyMETER at email address: sm@surveymeter.org atau telpon 62-274-4477464 dan fax: 62-274-4477004

Interviewer's Statement

"*I have informed the respondent about the background, goals, procedure, risks and benefits of the survey, given him/her enough time to read the informed consent and discuss with others, and answered all questions related to the survey; I have informed the respondent that he/she can contact the SurveyMETER, when having problems about the surveand provided the accurate contact information. I have informed the respondent that he/she can withdraw from the survey anytime. I have informed the potential respondent that he/she can get a copy of this informed consent with signatures of mine*."

□ **S**igned by interviewer. Interviewer name: _____ day/month/year

Respondent's statement:

"*I have been read the informed consent and I agree to participate in*": □ **questionnaire survey**

INDONESIAN FAMILY LIFE SURVEY 2014

BOOK T

(TRACKING BOOK)

SECTION: SC

BOOK T OF ⌊__⌋

FROM FORM T1 ANSWER, IF FORM T1 IS COMPLETED	
D1.	Is information on new address/location at Form T1 adequate? Yes..... 1 No 3
D2	Where is the new location? Same village..... 01 Same sub-district..... 02 Same district ..... 03 Same province ..... 04 Outside province_____ 05 DK, information is not adequate 08
D3.	Number of Form T1 for this Book T? ⌊__⌋

TB1.	What is the final result of the interview?	Interviewed.....1 ➔ **INTERVIEWER CHECK** Refused.....2 ➔ **INTERVIEWER CHECK** Died.....4 ➔**TB3** Household was not found .....5 ➔**TB5** Household not able to meet.....6 ➔**TB3** Joined with other IFLS household.....3 "Moved out HH" confirmation .....8➔**TB3**
TB2.	What is the HHID for this joined IFLS household ?	⌊__⌋⌊__⌋⌊__⌋ ⌊__⌋⌊__⌋⌊__⌋⌊__⌋⌊__⌋⌊__⌋ ➔ **INTERVIEWER CHECK**
TB3.	What's the name of the informant ?	_____
TB4.	Relationship of informant with the household.	Neighbor .....1 Family .....2 Friend.....3 Head of RT/RW .....4 ➔ **INTERVIEWER CHECK**
TB5.	Where does the new address for tracking from?	Address book .....1 Form T1 3
TB6.	Is the (physical) building found ?	Yes.....1 No, information is not complete .....3 Other_____ 5 ➔ **INTERVIEWER CHECK**

CODE OF INTERVIEW'S RESULT:
1. Interviewed
2. Refused
3. Joined with other IFLS household
4. Died
5. Household was not found
6. Household cannot be interviewed yet

INTERVIEWER CHECK:
IF TB1 = 1 ➔ BOOK K
IF TB1 = 2 ➔ SECTION SC
IF TB1 = 3 ➔ FINISHED
IF TB1 = 4 ➔ CAPI CHECK :EXIT FORMS FOR EACH INDIVIDUAL IN THIS HOUSEHOLD WITH AR01f=1,3,5 & AR01i=1

IF TB1 = 5 ➔ FORM T1
IF TB1 = 6 ➔ SECTION SC
IF TB1 = 8 ➔ CEK PREPRINTED SC HH CONFIRMATION
1. Not Change ➔ FINISH
3. **Change ➔ FORM T1**

SECTION SC (SAMPLING DESCRIPTION AND INTERVIEW NOTES)

INTERVIEWER NOTES: ANSWER THE QUESTIONS FOR HOUSEHOLD WHO REFUSED INTERVIEW

	SAMPLING DESCRIPTION	CODE
SC01.	PROVINCE: _____	⌊_⌋⌊_⌋
SC02.	DISTRICT (KABUPATEN/KOTA): _____	⌊_⌋⌊_⌋
SC03.	SUB-DISTRICT: _____	⌊_⌋⌊_⌋⌊_⌋
SC04.	VILLAGE (DESA/KELURAHAN/NAGARI): _____	⌊_⌋⌊_⌋⌊_⌋
SC05.	URBAN/RURAL: 1. URBAN 2. RURAL	⌊_⌋
SC10.	NAME OF FIELD COORDINATOR: _____	⌊_⌋⌊_⌋⌊_⌋
SC12.	NAME OF LOCAL SUPERVISOR: _____	⌊_⌋⌊_⌋⌊_⌋
SC13.	NAME OF CAFE SUPERVISOR: _____	⌊_⌋⌊_⌋⌊_⌋
SC14.	NAME OF INTERVIEWER 1: _____	⌊_⌋⌊_⌋⌊_⌋
SC15.	NAME OF INTERVIEWER 2: _____	⌊_⌋⌊_⌋⌊_⌋
SC18a.	Name of informant: _____	
SC18b.	CAPI CHECK :	Number of household member ⌊_⌋⌊_⌋ ..... 1 No household member 3
SC19.	Household address: _____	
SC19a.	*RW*.....	⌊_⌋⌊_⌋⌊_⌋
SC19b.	Telephone No.....	A. Home ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ W. NA Y. DK B. Cell phone ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋, belonging to _____ C. Cell phone ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋, belonging to _____
SC19c	Email address.....	
SC20.	Special notes on household address/location (distance, building on the same street): _____	
SC21.	Estimate the distance of the new location from the old location of the household:	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ kilometer in the same village..... 01 Move out of the village, same sub-district ..... 11 Move out of the village, same district..... 12 Move out of the village, same province..... 13 Move out of the village, different province..... 14 DON'T KNOW ..... 98 SAME LOCATION 96
SC21a.	CLOSEST EA:	1. EA: ⌊_⌋⌊_⌋⌊_⌋ Distance to EA: ⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ km 2. Outside of EA Range : Province: _____ Province Code: ⌊_⌋⌊_⌋ Kab/Kota:_____ Kab/Kota Code: ⌊_⌋⌊_⌋
SC22.	Route to respondent's house :	

ENUMERATOR : _____ ⌊_⌊_⌊_⌋

HHID : ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋

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FORM T1

FORM FOR THE NEW LOCATION OF A PANEL HOUSEHOLD

FORM T1 ⌊_⌋ **OF** ⌊_⌋

FT03. NAME OF HOUSEHOLD HEAD TO BE TRACKED:

_____

FT04. HHID ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋

FT05. Name of Informant: _____

Address _____

_____

Location Note: _____

_____

Telephone No. ⌊_⌊_⌊_⌋ - ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋

HP(A): ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ _____

HP(B): ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ _____

A. Village _____
B. Sub-district _____
C. District _____
D. Province _____
E. Country _____

FT06. Relationship of Informant with Panel Household

Informant from 1993 01
Informant from 1997 08
Informant from 1998 09
Informant from 2000 10
Informant from 2007 10
Neighbor 02
Family 03
Community Leader (Head of RT/RW) 04
Friend 07
Others, specify _____ 05

FT07. Where does the family live now?

Address 1. _____ 8. DON'T KNOW
Loc. Note: 1. _____ 8 DON'T KNOW
_____
Telephone No. 1. ⌊_⌊_⌊_⌋ - ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ 8. DON'T KNOW

A. Village _____
B. Sub-district _____
C. District _____
D. Province _____
E. Country _____

HP(A) 1. ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ _____ 8. DON'T KNOW
HP(B) 1. ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ _____ 8. DON'T KNOW
Email 1. _____ 8. DON'T KNOW

FT07a. What is the distance from this household to the new location where the household moved to?

1. ⌊_⌋ . ⌊_⌊_⌊_⌋ , ⌊_⌊_⌋ kilometer
8. DON'T KNOW

FT09 What is the place of work of [HEAD OF HOUSEHOLD]?

A2. Name: 1. _____ 8. DK **6. NA ➔ FT07b**
A3. Address 1. _____ 8. DK
A4. Location Note : 1. _____ 8. DK
A5. Phone
No. Tlp 1. ⌊_⌊_⌊_⌊_⌋ - ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ 6. NA 8. DK
HP(A) 1. ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ _____ 6. NA 8. DK
HP(B) 1. ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ _____ 6. NA 8. DK
A. Village _____ 1. 8. DK
B. Sub-district _____ 1. 8. DK
C. Districtct _____ 1. 8. DK
D. Province _____ 1. 8. DK
D. Country _____ 1. 8. DK

FT07b. Can you inform the address of the other household member?

A1. AR00 |_|_| (96 IF NO OTHER HH MEMBERS ➔ FT09)	A1. AR00 |_|_| (96 IF NO OTHER HH MEMBERS ➔ FT09)	A1. AR00 |_|_| (96 IF NO OTHER HH MEMBERS ➔ FT09)
A2. Name of HH Member: _____	A2. Name of HH Member: _____	A2. Name of HH Member: _____
A3. Address 1. _____ 3. Same 8. DK	A3. Address 1. _____ 3. Same 8. DK	A3. Address 1. _____ 3. Same 8. DK
A4. Loc.Note: 1._____ 3. Same 8. DK	A4. Loc.Note: 1._____ 3. Same 8. DK	A4. Loc.Note: 1._____ 3. Same 8. DK
A5. Telephone No.	A5. Telephone No.	A5. Telephone No.
No. Tlp 1. |_|_|_|_|_|-|_|_|_|_|_|_|_|_| 6. NA 8. DK	No. Tlp 1. |_|_|_|_|_|-|_|_|_|_|_|_|_|_| 6. NA 8. DK	No. Tlp 1. |_|_|_|_|_|-|_|_|_|_|_|_|_|_| 6. NA 8. DK
HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK	HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK	HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK
HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK	HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK	HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK
Email 1._____ 6. NA 8. DK	Email 1._____ 6. NA 8. DK	Email 1._____ 6. NA 8. DK
A. Village 1._____ 3. Same 8. DK	A. Village 1._____ 3. Same 8. DK	A. Village 1._____ 3. Same 8. DK
B. Sub-district 1._____ 3. Same 8. DK	B. Sub-district 1._____ 3. Same 8. DK	B. Sub-district 1._____ 3. Same 8. DK
C. District 1._____ 3. Same 8. DK	C. District 1._____ 3. Same 8. DK	C. District 1._____ 3. Same 8. DK
D. Province 1._____ 3. Same 8. DK	D. Province 1._____ 3. Same 8. DK	D. Province 1._____ 3. Same 8. DK
E. Country 1._____ 3. Same 8. DK	E. Country 1._____ 3. Same 8. DK	E. Country 1._____ 3. Same 8. DK
➔FT07b next collum / FT09	**➔FT07b next collum / FT09**	**➔FT07b next collum / FT09**

FT09. Do you know the work place of the household head or of another household member ? CAPI CEK : WRITE ALL HH MEMBERS

A1. AR00 |_|_| Nama Head HH: _____	A1. AR00 |_|_| Nama HH:_____	A1. AR00 |_|_| Nama HH:_____
A2. Name of Workplace : 1.___ 8. DK 6. NA => Next Collumt/FT08	A2. Name of Workplace : 1.___ 8. DK 6. NA => Next Collumt/FT08	A2. Name of Workplace : 1.___ 8. DK 6. NA => Next Collumt/FT08
A3. Address of Workplace 1. _____ 8.DK	A3. Address of Workplace 1. _____ 8.DK	A3. Address of Workplace 1._____ 8.DK
A4. Location Note: 1. _____ 8.DK	A4. Location Note: 1._____ 8.DK	A4. Location Note: 1. _____ 8.DK
A5. Telephone	A5. Telephone	A5. Telephone
No. Tlp 1. |_|_|_|_|_|-|_|_|_|_|_|_|_|_| 6. NA 8. DK	No. Tlp 1. |_|_|_|_|_|-|_|_|_|_|_|_|_|_| 6. NA 8. DK	No. Tlp 1. |_|_|_|_|_|-|_|_|_|_|_|_|_|_| 6. NA 8. DK
HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK	HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK	HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK
HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK	HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK	HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_|_|_|_|_| 6. NA 8. DK
A. Village 1. _____ 8. DON'T KNOW	A. Village 1. _____ 8. DON'T KNOW	A. Village 1._____ 8. DON'T KNOW
B. Sub-district 1. _____ 8. DON'T KNOW	B. Sub-district 1. _____ 8. DON'T KNOW	B. Sub-district 1._____ 8. DON'T KNOW
C. District 1. _____ 8. DON'T KNOW	C. District 1. _____ 8. DON'T KNOW	C. District 1._____ 8. DON'T KNOW
D. Province 1. _____ 8. DON'T KNOW	D. Province 1. _____ 8. DON'T KNOW	D. Province 1._____ 8. DON'T KNOW
E. Country 1. _____ 8. DON'T KNOW	E. Country 1. _____ 8. DON'T KNOW	E. Country 1._____ 8. DON'T KNOW
➔FT09 next collum / FT08	**➔FT09 next collum / FT08**	**➔FT09 next collum / FT08**

FT08. Do you know another person in the new location who might have information on the location of this family?

A1. No Informan └┴┘ (96 NO INFORMAN → FT10)	A1. No Informan └┴┘ (96 NO INFORMAN → FT10)	A1. No Informan └┴┘ (96 NO INFORMAN → FT10)
A2. Name of Informant 1. _____	A2. Name of Informant 1. _____	A2. Name of Informant 1. _____
A3. Address : 1._____ 3. Same 8. DK	A3. Address : 1._____ 3. Same 8. DK	A3. Address : 1._____ 3. Same 8. DK
A4. Loc. Note: 1._____ 3. Same 8. DK	A4. Loc. Note: 1._____ 3. Same 8. DK	A4. Loc. Note: 1._____ 3. Same 8. DK
A5. Telephone No.	A5. Telephone No.	A5. Telephone No.
No. Tlp 1. └┴┴┴┘-└┴┴┴┴┴┴┴┘ 6. NA 8. DK	No. Tlp 1. └┴┴┴┘-└┴┴┴┴┴┴┴┘ 6. NA 8. DK	No. Tlp 1. └┴┴┴┘-└┴┴┴┴┴┴┴┘ 6. NA 8. DK
HP(A) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK	HP(A) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK	HP(A) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK
HP(B) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK	HP(B) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK	HP(B) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK
Email 1._____ 6. NA 8. DK	Email 1._____ 6. NA 8. DK	Email 1._____ 6. NA 8. DK
A. Village 1._____ 3. Same 8. DK	A. Village 1._____ 3. Same 8. DK	A. Village 1._____ 3. Same 8. DK
B. Sub-district 1._____ 3. Same 8. DK	B. Sub-district 1._____ 3. Same 8. DK	B. Sub-district 1._____ 3. Same 8. DK
C. District 1._____ 3. Same 8. DK	C. District 1._____ 3. Same 8. DK	C. District 1._____ 3. Same 8. DK
D. Province 1._____ 3. Same 8. DK	D. Province 1._____ 3. Same 8. DK	D. Province 1._____ 3. Same 8. DK
E. Country 1._____ 3. Same 8. DK	E. Country 1._____ 3. Same 8. DK	E. Country 1._____ 3. Same 8. DK

FT08a Do you know where [INFORMANT'S NAME] work in the new location?

A2. Name of Workplace : 1.___ 8. DK 6. NA => Next Collumt/FT08	A2. Name of Workplace : 1.___ 8. DK 6. NA => Next Collumt/FT08	A2. Name of Workplace : 1.___ 8. DK 6. NA => Next Collumt/FT08
A3.Address of Workplace : 1. _____ 8. D K	A3.Address of Workplace : 1. _____ 8. D K	A3.Address of Workplace : 1. _____ 8. D K
A4. Loc. Note: 1._____ 8. D K	A4. Loc. Note: 1._____ 8. D K	A4. Loc. Note: 1._____ 8. D K
A5. Telephone	A5. Telephone	A5. Telephone
No. Tlp 1. └┴┴┴┘-└┴┴┴┴┴┴┴┘ 6. NA 8. DK	No. Tlp 1. └┴┴┴┘-└┴┴┴┴┴┴┴┘ 6. NA 8. DK	No. Tlp 1. └┴┴┴┘-└┴┴┴┴┴┴┴┘ 6. NA 8. DK
HP(A) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK	HP(A) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK	HP(A) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK
HP(B) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK	HP(B) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK	HP(B) 1. └┴┴┴┴┴┴┴┴┴┴┴┴┘ 6. NA 8. DK
A. Village 1. _____ 8. DON'T KNOW	A. Village 1. _____ 8. DON'T KNOW	A. Village 1. _____ 8. DON'T KNOW
B. Sub-district 1. _____ 8. DON'T KNOW	B. Sub-district 1. _____ 8. DON'T KNOW	B. Sub-district 1. _____ 8. DON'T KNOW
C. District 1. _____ 8. DON'T KNOW	C. District 1. _____ 8. DON'T KNOW	C. District 1. _____ 8. DON'T KNOW
D. Province 1. _____ 8. DON'T KNOW	D. Province 1. _____ 8. DON'T KNOW	D. Province 1. _____ 8. DON'T KNOW
E. Country 1. _____ 8. DON'T KNOW	E. Country 1. _____ 8. DON'T KNOW	E. Country 1. _____ 8. DON'T KNOW
→FT08 next collum / FT10	**→FT08 next collum / FT10**	**→FT08 next collum / FT10**

FT10.	When did the family move? (Month/Year)	|__|__| / |__|__|__|__| Month / Year
FT11.	Why did the family move?	1. _____ 8. DON'T KNOW
FT12.	Is there any one in this area who could give additional information? **[NAME OF THE SECOND INFORMANT]**	Name 1. _____ 8. DON'T KNOW Address 1. _____ _____ 8. DON'T KNOW Loc. Note: 1. _____ _____ 8. DON'T KNOW Telephone No. 1. |__|__|__|__| - |__|__|__|__|__|__|__|__| 8. DON'T KNOW HP(A) 1. |__|__|__|__|__|__|__|__|__|__|__|__|__| 8. DON'T KNOW HP(B) 1. |__|__|__|__|__|__|__|__|__|__|__|__|__| 8. DON'T KNOW A. Village 1. _____ 8. DON'T KNOW B. Sub-district 1. _____ 8. DON'T KNOW C. District 1. _____ 8. DON'T KNOW D. Province 1. _____ 8. DON'T KNOW E. Country 1. _____ 8. DON'T KNOW

FT13.	**INTERVIEWER CHECK:** **ADDRESS IS CLEAR AND HH CAN BE CONTACTED** **ADDRESS IS CLEAR BUT HH CANNOT BE CONTACTED** **ADDRESS OF HH NOT CLEAR**	 **1. ➔ CONTACT HH AND INTERVIEW** **3. ➔ REFER TO LOCAL SUPERVISOR** **5. ➔ CONTACT SUPPLEMENTARY INFORMANT (FORM T1)**
FT14	**Route to location**	_____

NAME OF INTERVIEWER: _____ ⌊_⌊_⌊_⌋ **HHID :** ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ **PID** ⌊_⌊_⌋

CONFIDENTIAL

FORM T2
FORM FOR TRACKING A HOUSEHOLD MEMBER

FORM T2 ⌊_⌋ **OF** ⌊_⌋

FT03.	NAME OF HH MEMBER WHO MUST BE TRACKED:	_____
FT04.		HHID ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ PID ⌊_⌊_⌋ PIDLINK ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋
FT04a.	DOES HOUSEHOLD MEMBER NEED TO BE TRACKED?	YES .....1 ➔**FT05** NO 3
FT04b.	WRITE DOWN HHID OF HH TO BE JOINED?	⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ➔**FINISH**
FT05.	SEX : (AR07)	MALE ..... 1 FEMALE 3
FT06.	WHEN WAS HHM BORN: (AR08)	⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year
FT06a.	RANDOM DBS (AR01e)	1 3
FT07.	AGE NOW : (AR09)	⌊_⌊_⌋ YEARS
FT012.	BOOK III STATUS 2007 (AR01g)	⌊_⌋
FT013.	BOOK IV STATUS 2007 (AR01h)	⌊_⌋
FT08.	WHEN DID HHM MOVE? (AR18e)	⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year
FT08a.	BOOK EK1 STATUS 2007 (AR01l)	⌊_⌋
FT08b.	BOOK EK2 STATUS 2007 (AR01m)	⌊_⌋

FT09.	Why did HH member move? (AR18f)	AR18f 01. Work/ find work 02. School 03. Follow husband/wife/parents 04. Marriage 05. Divorcei/Separation 06. Death 07. Birth 08. Help family 09. Need place to satay 11. Wants to be independent 12. Quit job 13. Fired 14. Retired 15. Finish school 98. Don't know 95. Others
FT10.	Where does the HH member live now? (AR18i)	⌊_⌊_⌊_⌋
FT15.	Name of informant : **CAPI: IF INFORMATION IS THE SAME WITH T2 OF OTHER HH MEMBERS, PRELOAD THE INFORMATION.**	Name _____ Address _____ _____ Loc. Note: _____ _____ Telephone No. A ⌊_⌊_⌊_⌋ – ⌊_⌊_⌊_⌊_⌊_⌊_⌋ HP(A) : ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ HP(B) : ⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌋ A. Village _____ B. Sub-district _____ C. District _____ D. Prov. _____

Code F10

01. Same Village	14. Riau	32. West Java	60. Kalimantan	73. South Sulawesi	101. Malaysia	122. Saudi Arabia	995. Others_____
02. Same Sub-district	15. Jambi	33. Central Java	61. West Kalimantan	74. South East Sulawesi	102. Singapore	123. Kuwait	998. DON'T KNOW
03. Same District	16. South Sumatra	34. Yogyakarta	62. Central Kalimantan	75. Gorontalo	103. Brunei Darussalam	124. United Arab Emirates	
04. Same Province	17. Bengkulu	35. East Java	63. South Kalimantan	76. West Sulawesi	104. Hong Kong	131. Argentina	
10. Sumatra	18. Lampung	36. Banten	64. East Kalimantan	81. Maluku	105. Japan	132. USA	
11. Aceh	19. Bangka Belitung	51. Bali	65. North Kalimantan	82. North Maluku	106. South Korea	141. Australia	
12. North Sumatra	20. Riau Islands	52. West Nusa Tenggara	70. Sulawesi	90. Irian	107. Taiwan	151. Netherlands	
13. West Sumatra	30. Java	53. East Nusa Tenggara	71. North Sulawesi	91. West Papua	121. Yemen	152. United Kingdom	
	31. Jakarta		72. Central Sulawesi	94. Papua			

FT16.	Relationship of Informant with HH member **CAPI: IF INFORMATION IS THE SAME WITH T2 OF OTHER HH MEMBERS, PRELOAD THE INFORMATION.**	Informant from 1993 ..... 01 Informant from 1997 ..... 08 Informant from 1998 ..... 09 Informant from 2000 ..... 10 Informant from 2007 ..... 10 Neighbor ..... 02 Family ..... 03 Community Leader (Head of RT/RW) ..... 04 Friend ..... 07 Others, specify _____ 05
FT17.	Where does HH member live now ? **CAPI: IF INFORMATION IS THE SAME WITH T2 OF OTHER HH MEMBERS, PRELOAD THE INFORMATION.**	Address 1. _____ 8. DON'T KNOW Loc.Note 1. _____ _____ 8. DON'T KNOW Tel. No. 1. |_|_|_|_| - |_|_|_|_|_|_|_|_| 8. DON'T KNOW HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T KNOW HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T KNOW Email 1. _____ 8. DON'T KNOW A. Village 1. _____ 8. DON'T KNOW B. Sub-district 1. _____ 8. DON'T KNOW C. District 1. _____ 8. DON'T KNOW D. Province 1. _____ 8. DON'T KNOW E. Country 1. _____ 8. DON'T KNOW
FT18.	Do you know another person in the new location who might have information on the location of this HH member? **CAPI: IF INFORMATION IS THE SAME WITH T2 OF OTHER HH MEMBERS, PRELOAD THE INFORMATION.**	Name of Informant 1. _____ 8. DON'T KNOW Address 1. _____ 8. DON'T KNOW Loc. Note 1. _____ _____ 8. DON'T KNOW Tel. No. 1. |_|_|_|_| - |_|_|_|_|_|_|_|_| 8. DON'T KNOW HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T KNOW HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T KNOW A. Village 1. _____ 8. DON'T KNOW B. Sub-district 1. _____ 8. DON'T KNOW C. District 1. _____ 8. DON'T KNOW D. Province 1. _____ 8. DON'T KNOW E. Country 1. _____ 8. DON'T KNOW

FT19.	When was the last time (HHM) was here? **CAPI: IF INFORMATION IS THE SAME WITH T2 OF OTHER HH MEMBERS, PRELOAD THE INFORMATION.**	|_|_| / |_|_|_|_| ..... 1 Month / Year DON'T KNOW ..... 8 Others _____ 5
FT20.	Is (HHM) going to return to this Household or Village in the near future?	No ..... 3 ➔**FT22** Yes ..... 1 DON'T KNOW 8
FT21.	When will (HHM) return again to this HH?	|_|_| / |_|_|_|_| ..... 1 Month / Year DON'T KNOW ..... 8 Others _____ 5

FT22. Can you tell us where (HHM) works

Name of workplace: 1. _____ 8. DON'T KNOW
6. NOT APPLICABLE➔ FT22a
Address of workplace 1. _____
_____ 8. DON'T KNOW
Loc. Note 1. _____
_____ 8. DON'T KNOW
Tel. No. 1. |_|_|_|_| – |_|_|_|_|_|_|_|_| 8. DON'T KNOW
HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T
KNOW
HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T
KNOW
A. Village 1. _____ 8. DON'T KNOW
B. Sub-district 1. _____ 8. DON'T KNOW
C. District 1. _____ 8. DON'T KNOW
D. Province 1. _____ 8. DON'T KNOW
E. Country 1. _____ 8. DON'T KNOW

FT22a. Can you tell us the name and address of (HHM) school?

Name of School: 1. _____ 8. DON'T KNOW
6. NOT APPLICABLE➔ FT23
Address of School: 1. _____
_____ 8. DON'T KNOW
Loc. Note 1. _____
_____ 8. DON'T KNOW

FT23. Is there any person in this area who could give us additional information?

CAPI: IF INFORMATION IS THE SAME WITH T2 OF OTHER HH MEMBERS, PRELOAD THE INFORMATION.

Name of Informant 1._____ 8. DK 6. NA ➔FT25
Address 1. _____ 8. DON'T KNOW
Loc. Note 1. _____
_____ 8. DON'T KNOW
Tel. No. 1. |_|_|_|_| – |_|_|_|_|_|_|_|_| 8. DON'T KNOW
HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T KNOW
HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T KNOW
A. Village 1. _____ 8. DON'T KNOW
B. Sub-district 1. _____ 8. DON'T KNOW
C. District 1. _____ 8. DON'T KNOW
D. Province 1. _____ 8. DON'T KNOW
E. Country 1. _____ 8. DON'T KNOW

FT23a. Where does [SECOND INFORMANT] work?

CAPI: IF INFORMATION IS THE SAME WITH T2 OF OTHER HH MEMBERS, PRELOAD THE INFORMATION.

Name of workplace: 1. _____ 8. DON'T KNOW
6. NOT APPLICABLE 6. TB ➔ FT25
Address of workplace 1. _____
_____ 8. DON'T KNOW
Loc.Note 1. _____
_____ 8. DON'T KNOW
Tel. No. 1. |_|_|_|_| – |_|_|_|_|_|_|_|_| 8. DON'T KNOW
HP(A) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T
KNOW
HP(B) 1. |_|_|_|_|_|_|_|_|_|_|_|_| 8. DON'T
KNOW
A. Village 1. _____ 8. DON'T KNOW
B. Sub-district 1. _____ 8. DON'T KNOW
C. District 1. _____ 8. DON'T KNOW
D. Province 1. _____ 8. DON'T KNOW
E. Country 1. _____ 8. DON'T KNOW

FT25. Route to location?

CAPI: IF INFORMATION IS THE SAME WITH T2 OF OTHER HH MEMBERS, PRELOAD THE INFORMATION.

_____ ___

FT26. CAPI CEK: COMPLETE THE INFORMATION OF HHM NOT LIVING (AR00) AT ORIGINAL HOUSEHOLD (AR01a=3)

	AR00	NAMA	AR01g Status Book III 2007	AR01h Status Book IV 2007
1.	|_|_|	_____	|_|	|_|
2.	|_|_|	_____	|_|	|_|
3.	|_|_|	_____	|_|	|_|
4.	|_|_|	_____	|_|	|_|
5.	|_|_|	_____	|_|	|_|
6.	|_|_|	_____	|_|	|_|

FT24. **INTERVIEWER CHECK: FT17**
ADDRESS IS CLEAR AND HHM CAN BE RECONTACTED 1
ADDRESS IS CLEAR BUT HHM CANNOT BE RECONTACTED 3
ADDRESS IS NOT CLEAR 5

1. ➔ CONTACT AND INTERVIEW
3. ➔ REFER TO LOCAL SUPERVISOR
5. ➔ CONTACT ADDITIONAL INFORMANTS (SUPPLEMENT OF FORM T2)
➔NEXT HHM

INTERVIEWER: _____ └┴┴┘ **CONFIDENTIAL** HHID : └┴┴┘ └┴┴┘ └┴┴┘ └┴┴┘

INDONESIA FAMILY LIFE SURVEY 2014

BOOK K

(CONTROL BOOK)

SECTIONS: SC, AR, KRK, IK, CP
Respondent is a HH Member 18 Years or Older who is Knowledgeable About Characteristics of Household Members

RESVIS.	**HOUSEHOLD INTERVIEWED ?**	**1. Yes** **3. No➔ C1**

Informed Consent (to be read to each individual the first time the individual is interviewed):

Good morning/afternoon/evening,

My name is _____ and my colleague here is _____. We are both from SurveyMeter, an independent research organization based in Yogyakarta. We are currently conducting the fieldwork for Sakerti 5, a survey project conducted with collaboration with RAND Corporation. We will start by reading the informed consent form and ask whether you would be willing to participate in the survey. You can ask about anything that is not clear at any time. Please do discuss with your family members before deciding to participate in the survey.

The IFLS is a longitudinal survey that was first fielded in 1993, and again in 1997, 2000, and 2007. You may remember that we visited your households to interview you or your household members in 2007 or in an earlier round. Your household was interviewed since it was one of the households or part of the households that were randomly chosen to participate since the beginning of the survey in 1993. This year, we will visit the same households again to conduct the interview and to see whether there have been some changes since the last time we visited you.

If you choose to participate in the study, our interviewer will first ask you about your basic demographics, family information, health status, health care and insurance, work, retirement and pensions, household and individual income, expenditure, and assets, etc. Then the interviewer will give you a physical examination to better understand your true health conditions. The measurements include height, weight, waist circumference, blood pressure, peak meter flow lung capacity, grip strength, balance, timed walk, and timed sit to stand. We will also do a finger prick to measure your blood hemoglobin level [and to collect blood spot on a filter paper which we will store and use in the lab for analysis of C-reactive Protein that can be used to measure inflammation and the risk to cardiovascular diseases and HbA1c that can be used to measure risk of diabetes].

This survey will take some time to complete, but we will be doing it at your convenience. If you need to take a break or run some errands, please let us know so we can stop the interview and continue later in the day or the next day.

Generally, the study will pose no health risk. The blood drawing procedure will not transmit diseases to you, because the syringe and needle are new and disinfected. The small amount of blood drawn has no harm to your health. There maybe discomfort or very mild pain, we will help you deal with it.

If you agree to participate in the survey, the physical examination and test results related to your health will be feed back to you directly. And the information you provided can be used to help make health, retirement and social security policies suitable for Indonesia, which will benefit you and other people just like you.

The interview is completely voluntary and all survey information will be kept confidential. With your consent, we also will take picture of you and the front of your house solely for the purpose of confirming your identity and your address in the follow up survey. The photos and all your personal records including, questionnaires, and physical examination and test results are confidential; we will not tell others, include your family, friends, local hospitals, etc. Your personal information, including name, address, phone number, and other information which can be used to identify you will not be disclosed. You are identified by a number in the questionnaires and test records, which will be stored safely in IFLS5 project office. You may withdraw from the study any time, which will not impact any of your benefits. The researcher will keep your information confidentially until it is destroyed, and your information will not be used or disclosed during this period.

If you agree to participate in this study, all the interviews, physical examination, tests and counseling are provided to you for free. You do not need to pay anything.

If you agree to participate in this study, you will get Rp _____ as a token gift of appreciation for the time you spend with us.

If you have any questions about this study, you may contact Bondan Sikoki at SurveyMETER at email address: sm@surveymeter.org atau telpon 62-274-4477464 dan fax: 62-274-4477004

Interviewer's Statement

"*I have informed the respondent about the background, goals, procedure, risks and benefits of the survey, given him/her enough time to read the informed consent and discuss with others, and answered all questions related to the survey; I have informed the respondent that he/she can contact the SurveyMETER, when having problems about the surveand provided the accurate contact information. I have informed the respondent that he/she can withdraw from the survey anytime. I have informed the potential respondent that he/she can get a copy of this informed consent with signatures of mine*."

□ **S**igned by interviewer. Interviewer name: _____ day/month/year

Respondent's statement:

"*I have been read the informed consent and I agree to participate in*": □ **questionnaire survey**

SECTION SC (SAMPLING DESCRIPTION AND INTERVIEW NOTES)

NOTE: SOME INFORMATION WILL BE PRELOADED. INTERVIEWER NEEDS TO UPDATE THE INFORMATION WHEN NECESSARY.

SAMPLING INFORMATION		CODE
SC01.	PROVINCE: 1. PRELOADED	
SC02.	MUNICIPALITY (KABUPATEN/KOTA): 1. PRELOADED	
SC03.	SUBDISTRICT (KECAMATAN): 1. PRELOADED	
SC04.	VILLAGE (DESA/KELURAHAN/NAGARI): 1. PRELOADED	
SC05.	AREA: 1. URBAN 2. RURAL	
SC10.	NAME OF FIELD COORDINATOR: _____	
SC12.	NAME OF LOCAL SUPERVISOR : _____	
SC13.	NAME OF C SUPERVISOR : _____	
SC14.	NAME OF INTERVIEWER 1: _____	
SC15.	NAME OF INTERVIEWER 2: _____	
SC18.	Name of Head of the Household: 1. PRELOADED	_____
SC19.	Household Address (include house #): 1. PRELOADED	
SC19a.	RW: 1. PRELOADED	
SC19b.	TELEPHONE NUMBER: 1. PRELOADED	A. Home . B. Cellphone , belonging to _____ C. Cellphone , belonging to _____ W. NA
SC19c.	Email Address :	
SC20.	Special notes on household address/location (distance, building on the same street):	
SC22.	Route to respondent's house : 1. PRELOADED	

SECTION SC (SAMPLING DESCRIPTION AND INTERVIEW NOTES)

SC21.	Estimate the distance of the new location from the old location of the household:	⌊__⌋⌊__⌋ . ⌊__⌋⌊__⌋ kilometer in the same village ..... 01 Move out of the village, same sub-district ..... 11 Move out of the village, same district ..... 12 Move out of the village, same province ..... 13 Move out of the village, different province ..... 14 DON'T KNOW ..... 98 SAME LOCATION 96
SC21a.	CLOSEST EA	1. EA: ⌊__⌋⌊__⌋⌊__⌋ Distance to EA: ⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ km 2. Outside EA Range: Province:_____ Province Code: ⌊__⌋⌊__⌋ Kab./Kota:_____ Kab/Kota Code: ⌊__⌋⌊__⌋
SC22a.	HOUSEHOLD GPS RECORD (directly connected to computer)	a. LATITUDE : ⌊**S**⌋ ⌊__⌋⌊__⌋ º ⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ ` b. LONGITUDE: ⌊**E**⌋ ⌊__⌋⌊__⌋⌊__⌋ º ⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ ` c. ELEVATION: ⌊__⌋⌊__⌋ . ⌊__⌋⌊__⌋⌊__⌋ METER ABOVE SEA LEVEL d. ACCURACY : ⌊__⌋⌊__⌋ METER
SC22b.	PICTURE OF RESPONDEN'TS HOUSE	

SECTION AR (LIST OF HOUSEHOLD MEMBERS)

HOUSEHOLD (RT):	is a person or group of persons who occupy a part of or an entire building and who usually live together and eat from the same kitchen. What is meant by eating from one kitchen is that the arrangement to fulfill daily necessities is jointly managed.
HEAD OF THE HOUSEHOLD (KRT):	is a person among the group of householders who is responsible for satisfying daily necessities of the household or a person who is regarded/assigned as the head of the household.
HOUSEHOLDER (ART):	is anyone who usually lives in the household, whether she/he is at home during the survey or is temporarily absent. A householder who has been away for 6 or more months, and a householder who has been away for less than 6 months but plans to move out/be away for 6 or more months is not regarded as a householder. A guest who has stayed in the household for 6 or more months or a guest who has stayed in the household for less than 6 months but plans to stay for 6 or more months is regarded as a householder. (**THE NAME OF A HOUSEHOLDER IS TO BE WRITTEN ON ONE LINE ONLY**.)

AR00c. CAPI CHECK	
PANEL HOUSEHOLD .....1➔AR00x **USE PREPRINTED HH ROSTER**	**NEW HOUSEHOLD .....3➔AR00x.** **USE NEW HH ROSTER**

AR00x.	**CAPI CHECK AR00c**	**NEW HH ..... 3 ➔AR00b** **PANEL HH..... 1**
AR00a.	I would like to know about the people who live in this household. In 2007 a fieldworker came to your home and listed the names of household members. Now we would like to know whether those individuals still live in this household **INTERVIEWER INSTRUCTION:** **READ THE NAME OF HOUSEHOLD MEMBERS AND ASK QUESTION AR00 – AR01a**	
AR00b.	I would like to know the names of all the people who live in this household. Please list all the people that stay here, eat and cook together in the household. **(NOTE WITH REFERENCE TO THE ROSTER: THE NAMES THAT ARE RECORDED HERE ARE ONLY THE PEOPLE WHO USUALLY STAY IN THIS HOUSEHOLD: ADULTS, CHILDREN, AND INFANTS. LIST THE HOUSEHOLD HEAD, THE WIFE OF THE HOUSEHOLD HEAD, THEIR CHILDREN (BIRTH, STEP, ADOPTED), PARENTS, IN-LAWS, SIBLINGS, SIBLINGS IN-LAW, GRANDCHILDREN, GRANDPARENTS, AUNTS AND UNCLES, NIECES AND NEPHEWS, COUSINS, BOARDERS, AND SERVANTS (NON-FAMILY MEMBERS).** ⇨ **WRITE THE NAME OF HOUSEHOLD MEMBERS AND ASK QUESTION AR00 – AR01a**	

SECTION AR (LIST OF HOUSEHOLD MEMBERS)

HHID: ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ **Name of Household Head:** _____ **EA TERDEKAT:** ⌊_⌋⌊_⌋⌊_⌋ **LAST INTERVIEW**: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋

AR00d: TOTAL NUMBER OF LINES USED ⌊_⌋⌊_⌋

SC17. Jumlah anggota rumah tangga SAKERTI 2014: ⌊_⌋⌊_⌋

AR00.	PIDLINK	AR01.	AR01f.	AR01a.	AR02.	AR07.	AR08.	AR08a.	AR09.	AR01e	AR01g	AR01h	AR01l	AR01m
No. of HHM(PID)	Tracking AndLinking ID	NAME OF HOUSEHOLD MEMBER	AR01a Status last survey	Still living in household	Relationship to household head in the last survey	Sex	Birth date	Age in last interview	Age now	RANDOM DBS	STATUS BOOK3 2007	STATUS BOOK4 2007	STATUS EK1 2007	STATUS EK2 2007
01				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
02				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
03				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
04				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
05				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
06				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
07				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
08				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
09				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋
10				0➔**AR01i** 1 2 3 5 11		⌊_⌋	⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year		⌊_⌋⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋	⌊_⌋

NOTE TO INTERVIEWER:
WHILE FILLING OUT AR00-01a DON'T FORGET TO ASK AR03-AR06.

AR01f
0. Died
1. Yes
3. No
4. Interviewed in other HH
5. New HHM

AR01a
0. Died
1. Yes, HHM is still in HH
2. Yes, HHM was in other IFLS HH in previous wave
3. No
5. New HHM
11. HHM returns in current wave

AR02, AR02b

01.	Household head	07.	Parent-in-law	13.	Nephew/Niece
02.	Husband/Wife	08.	Sibiling	14.	Cousin
03.	Child (biological)	09.	Brother/Sister-in-law	15.	Servant
04.	Child (non-biological)	10.	Grandchild	16.	Other Family
05.	Son/daughter-in-law	11.	Grandparent	17.	Non-family
06.	Parents	12.	Uncle/Aunt		

AR07
1. Male
3. Girl

Ar01e, l, m
1. Yes
3. No

KODE AR01 g, h
1. Panel
3. New

SECTION AR (LIST OF HOUSEHOLD MEMBERS)

AR03.	Is there any child/infant who lives here who has not been listed?	Yes ..... 1➔ **PUT IN ROSTER, AR01** No 3
AR03a.	Is there a child/baby who was born in this HH after 2007 who has died or left the household?	Yes ..... 1➔ **PUT IN ROSTER, AR01** No 3
AR04.	Is there any other person like a servant, friend or boarder who has not been listed?	Yes ..... 1➔ **PUT IN ROSTER, AR01** No 3
AR05.	Is there another person who usually lives here, but is away for less than 6 months?	Yes ..... 1➔ **PUT IN ROSTER, AR01** No 3
AR06.	Is there another person who has stayed for at least 6 months or less than 6 months but intended to stay here for at least 6 months?	Yes ..... 1➔ **PUT IN ROSTER, AR01** No 3

HOW TO FILL INTERVIEW'S STATUS (AR01i)

1.	**Panel household (1993 original household)**	**AR01i is preprinted.** **New HHM➔ AR01i=1** **AR01i=1➔ individual will be interviewed and health measurement will be taken IF individual is in the household (AR01a=1,2,5,11)**
2.	**Split-off households 1997, 1998 , 2000 and 2007**	**AR01i is preprinted.** **New HHM will get AR01i=1 IF:** - **HHM '93➔ AR01i=1** - **Spouses of HHM '93➔ AR01i=1** - **Children of HHM Panel 93 ➔ AR01i=1** - **Grandchildren of HHM Panel 93➔ AR01i=1** **Individuals who are NOT HHM'93, NOT Spouses of HHM '93, OR NOT Children of HHM '93 ➔AR01i=3.** **AR01i=1➔ individual will be interviewed and health measurement will be taken IF individual is in the household (AR01a=1,2,5,11)**
3.	**New split-off households (2014)**	**Interviewer has to fill out AR01i.** **In 2007 split-off households, HHM will get AR01i =1 IF:** - **HHM '93➔ AR01i=1** - **Spouses of HHM '93➔ AR01i=1** - **Children of HHM Panel 93 ➔ AR01i=1** - **Grandchildren of HHM Panel 93➔ AR01i=1** **Individuals who are NOT HHM'93, NOT Spouses of HHM '93, OR NOT Children of HHM '93 ➔AR01i=3.** **AR01i=1➔ individual will be interviewed and health measurement will be taken IF individual is in the household (AR01a=1,2,5,11)**

NOTE ON HOW TO WRITE DOWN AR01b (TRACKING STATUS) FOR CHILDREN/GRANDCHILDREN BORN AFTER 2000 WHO HAVE MOVED OUT FROM THE HOUSEHOLD

1.	In 1993 original household: all children/grandchildren born after 2007➔ ar01b =1	**2.**	In 1997, 1998, 2000, 2007, 2014 households: Children/grandchildren of 93 panel ➔ ar01b =1 Children/grandchildren of non-93 panel ➔ ar01b=3

SECTION AR (LIST OF HOUSEHOLD MEMBERS)

AR00	AR02b.	AR10.	AR11.	AR10a.	AR11a.	AR10b.	AR11b.	AR12.	AR13.	AR14.	AR01b.	AR01i.	AR15.	AR15d.
No. of HHM (PID)	Relationship to household head now	Line No. Birth Father	Line No. Birth Mother	Line No. Grandfather (father's side)	Line No. Grandmother (father's side)	Line No. Grandfather (mother's side)	Line No. Grandmother (mother's side)	Line No. of Caretaker (HHM<15)	Marital Status	Line No. of Spouse	Tracking status	Interview Status	Religion	Ethnicity
											Preloaded except new HHM			
01	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1, 3, 4, 5, 8→**AR01b** 2, 6	⌊_⌊_⌋	⌊_⌋	⌊_⌋ **ar01a=0→ ar18d**	01 02 03 04 05 07 95	⌊_⌊_⌋
02	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1, 3, 4, 5, 8 →**AR01b** 2, 6	⌊_⌊_⌋	⌊_⌋	⌊_⌋ **ar01a=0→ ar18d**	01 02 03 04 05 07 95	⌊_⌊_⌋
03	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1, 3, 4, 5, 8→**AR01b** 2, 6	⌊_⌊_⌋	⌊_⌋	⌊_⌋ **ar01a=0→ ar18d**	01 02 03 04 05 07 95	⌊_⌊_⌋
04	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1, 3, 4, 5, 8 →**AR01b** 2, 6	⌊_⌊_⌋	⌊_⌋	⌊_⌋ ar01a=0→ ar18d	01 02 03 04 05 07 95	⌊_⌊_⌋
05	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1, 3, 4, 5, 8→**AR01b** 2, 6	⌊_⌊_⌋	⌊_⌋	⌊_⌋ ar01a=0→ ar18d	01 02 03 04 05 07 95	⌊_⌊_⌋
06	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1, 3, 4, 5, 8 →**AR01b** 2, 6	⌊_⌊_⌋	⌊_⌋	⌊_⌋ ar01a=0→ ar18d	01 02 03 04 05 07 95	⌊_⌊_⌋

AR10, AR11
51. Don't live in this HH
52. Died 98. DK

AR12
96. >=15 years old
51. Don't live in this HH

AR13
1. Not married
2. Married
3. Separated
4. Divorced
5. Widow/er
6. Cohabitate
8. Don't Know

AR14
51. Don't live in this HH

AR01b, i
1. Yes
3. No

AR15d
01. Javanese
02. Sundanese
03. Bali
04. Batak
05. Bugis
06. Chinese
07. Maduranese
08. Sasak
09. Minang
10. Banjar
11. Bima-Dompu
12. Makasar
13. Nias
14. Palembang
15. Sumbawa
16. Toraja
17. Betawi
18. Dayak
19. Melayu
20. Komering
21. Ambonese
22. Manado
23. Acehnese
25. Other Southern Sumatrans
26. Banten
27. Cirebon
28. Gorontalo
29. Kutai
95. Others

AR15
01. Islam
02. Protestant
03. Catholic
04. Hindu
05. Budha
07. Confucians
95. Others

SECTION AR (LIST OF HOUSEHOLD MEMBERS)

AR00	AR15a.	AR15b.	AR15bp.	AR15c	AR16.	AR17.	AR18a.	AR18b.	AR18c.
No. of HHM (PID)	Did [...] work in the last 12 months? (>5 years)	What were the total earnings of [...] in the last 12 months?	Is it....? [unfolding brackets for ar15b]	What was [,,,]'s primary activity during the past week?	Highest Level of Schooling Attended by HHM	Highest grade ever completed by HHM	**INTERVIEWER CHECK: AR09 AGE < 25**	**CAPI CHECK: AR01a AR01a = 1, 2, 5, or 11 (LIVE IN THIS HH)**	Is [...] in school this year?
01	3. No➔**AR15c** 8. DK➔**AR15c** 1. Yes 6. <5Years➔**AR16**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 6. UNPAID FAMILY WORKER ➔**AR15c** 8.DON'T KNOW	Breaking points: Rp 12 millions, Rp 40 millions, Rp 100 millions Possible entry points: Rp 12 millions (2 UP) or Rp 40 millions (1UP1DOWN)	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ **SCHOOL LIST** 3. No 6. Not yet in school
02	3. No➔**AR15c** 8. DK➔**AR15c** 1. Yes 6. <5Years➔**AR16**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 6. UNPAID FAMILY WORKER ➔**AR15c** 8.DON'T KNOW		⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ **SCHOOL LIST** 3. No 6. Not yet in school
03	3. No➔**AR15c** 8. DK➔**AR15c** 1. Yes 6. <5Years➔**AR16**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 6. UNPAID FAMILY WORKER ➔**AR15c** 8.DON'T KNOW		⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ **SCHOOL LIST** 3. No 6. Not yet in school
04	3. No➔**AR15c** 8. DK➔**AR15c** 1. Yes 6. <5Years➔**AR16**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 6. UNPAID FAMILY WORKER ➔**AR15c** 8.DON'T KNOW		⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ **SCHOOL LIST** 3. No 6. Not yet in school
05	3. No➔**AR15c** 8. DK➔**AR15c** 1. Yes 6. <5Years➔**AR16**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 6. UNPAID FAMILY WORKER ➔**AR15c** 8.DON'T KNOW		⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ **SCHOOL LIST** 3. No 6. Not yet in school
06	3. No➔**AR15c** 8. DK➔**AR15c** 1. Yes 6. <5Years➔**AR16**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 6. UNPAID FAMILY WORKER ➔**AR15c** 8.DON'T KNOW		⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ 3. No➔**AR18x**	1. Yes ➔ **SCHOOL LIST** 3. No 6. Not yet in school

AR15c

01.	Working/helping to earn income
02.	Job searching
03.	Attending school
04.	Housekeeping
05.	Retired
06.	At home/don't work
07.	Sick/disabled
98.	DON'T KNOW

AR16

01.	No/Not yet in school
02.	Elementary school
03.	Junior high - general
04.	Junior high - vocational
05.	Senior high - general
06.	Senior high - vocational
11.	Adult Education A
12.	Adult Education B
13.	Open University
14.	Pesantren
15.	Adult Education C
17.	School for the disabled
60.	College D1, D2, D3
61.	University S1
62.	University S2
63.	University S3
72.	Islamic Elementary School (Madrasah Ibtidaiyah)
73.	Islamic Junior High School (Madrasah Tsanawiyah)
74.	Islamic Senior High School (Madrasah Aliyah)
90.	Kindergarten
98.	DON'T KNOW
95.	OTHERS

AR17

00.	DIDN'T COMPLETE 1ST CLASS AT THAT LEVEL
01.	1
02.	2
03.	3
04.	4
05.	5
06.	6
07.	GRADUATED
96.	NO/ NOT YET IN SCHOOL
98.	DON"T KNOW

CAPI CHECK: SCHOOL LIST IN PAGE. K-11

SECTION AR (LIST OF HOUSEHOLD MEMBERS)

AR00	AR18x.	AR18d.	AR18e.	AR18f.	AR18g.	AR18h.	AR18i.	AR18k.	AR18j.
No. of HHM (PID)	**IS HHM IN A NEW HH?**	**CAPI CHECK: AR01A**	When did [...] move from/into this household?	Why did [...] move from/into this household?	**INTERVIEW CHECK: AR01a**	Is [...] still alive?	Where does [...] live now?	**CAPI CHECK: Ar01a = 3 Ar01f = ?**	**CAPI CHECK: AR01b = 1,3**
01	1. YES 2.➔ ⬇ 3. NO➔	1 0 2 3 5 11➔ ⬇	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	⌊_⌋⌊_⌋	2 5 11 3➔ ⬇.⬇⬇ 0➔EXIT FORM ⬇	3.No 1 Yes➔ ⬇ 8 DK➔ EXIT FORM	⌊_⌋⌊_⌋⌊_⌋	1. 1,3,5,blank 2. 4 changed 3. 4 Same⬇	1. Yes ➔**T2** 3. No ➔**DA**
02	1. YES 2.➔ ⬇ 3. NO➔	1 0 2 3 5 11➔ ⬇	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	⌊_⌋⌊_⌋	2 5 11 3➔ ⬇.⬇⬇ 0➔EXIT FORM ⬇	3.No 1 Yes➔ ⬇ 8 DK➔ EXIT FORM	⌊_⌋⌊_⌋⌊_⌋	1. 1,3,5,blank 2. 4 changed 3. 4 Same⬇	1. Yes ➔**T2** 3. No ➔**DA**
03	1. YES 2.➔ ⬇ 3. NO➔	1 0 2 3 5 11➔ ⬇	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	⌊_⌋⌊_⌋	2 5 11 3➔ ⬇.⬇⬇ 0➔EXIT FORM ⬇	3.No 1 Yes➔ ⬇ 8 DK➔ EXIT FORM	⌊_⌋⌊_⌋⌊_⌋	1. 1,3,5,blank 2. 4 changed 3. 4 Same⬇	1. Yes ➔**T2** 3. No ➔**DA**
04	1. YES 2.➔ ⬇ 3. NO➔	1 0 2 3 5 11➔ ⬇	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	⌊_⌋⌊_⌋	2 5 11 3➔ ⬇.⬇⬇ 0➔EXIT FORM ⬇	3.No 1 Yes➔ ⬇ 8 DK➔ EXIT FORM	⌊_⌋⌊_⌋⌊_⌋	1. 1,3,5,blank 2. 4 changed 3. 4 Same⬇	1. Yes ➔**T2** 3. No ➔**DA**
05	1. YES 2.➔ ⬇ 3. NO➔	1 0 2 3 5 11➔ ⬇	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	⌊_⌋⌊_⌋	2 5 11 3➔ ⬇.⬇⬇ 0➔EXIT FORM ⬇	3.No 1 Yes➔ ⬇ 8 DK➔ EXIT FORM	⌊_⌋⌊_⌋⌊_⌋	1. 1,3,5,blank 2. 4 changed 3. 4 Same⬇	1. Yes ➔**T2** 3. No ➔**DA**
06	1. YES 2.➔ ⬇ 3. NO➔	1 0 2 3 5 11➔ ⬇	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	⌊_⌋⌊_⌋	2 5 11 3➔ ⬇.⬇⬇ 0➔EXIT FORM ⬇	3.No 1 Yes➔ ⬇ 8 DK➔ EXIT FORM	⌊_⌋⌊_⌋⌊_⌋	1. 1,3,5,blank 2. 4 changed 3. 4 Same⬇	1. Yes ➔**T2** 3. No ➔**DA**

AR18x
1. YES
2. HHM BORN IN THIS HH IN 2000 OR AFTER BUT HAVE LEFT
3. NO

AR18f
01. Work/ find work
02.School
03. Follow husband/wife/parents
04. Marriage
05. Divorcei/Separation
06. Death
07. Birth
08. Help family
09. Need place to satay
11. Wants to be independent
12. Quit job
13. Fired
14. Retired
15. Finish school
98. Don't know
95. Others

AR18i
01. Same village
02. Same kecamatan
03. Same kabupaten
04. Same province
10. Sumatra
11. N Aceh Darussalam
12. North Sumatra
13. West Sumatra
14. Riau
15. Jambi
16. South Sumatera
17. Bengkulu
18. Lampung
19. Bangka belitung
20. Riau Islands
30. Jawa
31. Jakarta
32. West Jawa
33. Central Jawa
34. Yogyakarta
35. East Jawa
36. Banten
51. Bali
52. West Nusa Tenggara
53. East Nusa Tenggara
60. Kalimantan
61. West Kalimantan
62. Central Kalimantan
63. South Kalimantan
64. East Kalimantan
65. North Kalimantan
70. Sulawesi
71. North Sulawesi
72. Central Sulawesi
73. South Sulawesi
74. Southeast Sulawesi
75. Gorontalo
76. West Sulawesi
81. Maluku
82. North Maluku
90. Irian
91. West Papua
94. Papua
101. Malaysia
102. Singapura
103. Brunei Darussalam
104. Hongkong
105. Japan
106. South Korea
107. Taiwan
108. Timor Leste
121. Yaman
122. Saudi Arabia
123. Kuwait
124. Uni Emirates Arab
131. Argentina
132. United States of A
141. Australia
151. Netherland
152. United Kingdom
995. Others
998. DON"T KNOW

ADDRESS ROSTER IN PAGE K-12

SCHOOL LIST

FOR RESPONDENT LESS THAN 25 WHO IS STILL IN SCHOOL (AR18C=1)

AR00 Line # HHM (PID)	AR01 NAME OF HOUSEHOLD MEMBER	AR16 HIGHEST LEVEL OF EDUCATION (WRITE CATEGORY)	AR19 What is the name of the school and where is it? (Don't forget to write the number of the school)	AR20a In what village, kecamatan, Kabupatan, and province is the school located?
⌊_⌋⌊_⌋		⌊_⌋⌊_⌋	Name : 1. _____ 8. DK Address: 1. _____ 8. DK Loc.: 1. _____ 8. DK **COMFAS CODE** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW **➔AR18x SAME HOUSEHOLD MEMBER**
⌊_⌋⌊_⌋		⌊_⌋⌊_⌋	Name : 1. _____ 8. DK Address: 1. _____ 8. DK Loc.: 1. _____ 8. DK **COMFAS CODE** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW **➔AR18x SAME HOUSEHOLD MEMBER**
⌊_⌋⌊_⌋		⌊_⌋⌊_⌋	Name : 1. _____ 8. DK Address: 1. _____ 8. DK Loc.: 1. _____ 8. DK **COMFAS CODE** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW **➔AR18x SAME HOUSEHOLD MEMBER**
⌊_⌋⌊_⌋		⌊_⌋⌊_⌋	Name : 1. _____ 8. DK Address: 1. _____ 8. DK Loc.: 1. _____ 8. DK **COMFAS CODE** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW **➔AR18x SAME HOUSEHOLD MEMBER**
⌊_⌋⌊_⌋		⌊_⌋⌊_⌋	Name : 1. _____ 8. DK Address: 1. _____ 8. DK Loc.: 1. _____ 8. DK **COMFAS CODE** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW **➔AR18x SAME HOUSEHOLD MEMBER**

HHID: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋

ADDRESS LIST

FOR AR18j = 3: A HH MEMBER IN 2000 WHO MOVED (AR01a = 3) AND DOES NOT HAVE TO BE TRACKED (AR 01b = 3)

AR00	AR01	AR00id	AR21	
Line # HHM (PID)	NAME OF HOUSEHOLD MEMBER	TRACKING AND LINKING ID '00	Where does the HHM live now?	
⌊_⌋⌊_⌋		⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋	Address : 1._____ 8. DON'T KNOW Location: 1. _____ 8. DON'T KNOW Tele. No. 1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ – ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW No. HP 1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec. : 1. _____ 3. Same 8. DON'T KNOW C. Kab. : 1. _____ 3. Same 8. DON'T KNOW D. Prov.: 1. _____ 3. Same 8. DON'T KNOW	Work Address : 1. _____ 8. DK _____ 6. NA School Address: 1. _____ 8. DK _____ 6. NA Lives with whom? : 1. _____ 8. DK Name of Other Informant : 1. _____ 8. DK (in new location) ➔AR01 NEXT LINE
⌊_⌋⌊_⌋		⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋	Address : 1._____ 8. DON'T KNOW Location: 1. _____ 8. DON'T KNOW Tele. No. 1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ – ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW No. HP 1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec. : 1. _____ 3. Same 8. DON'T KNOW C. Kab. : 1. _____ 3. Same 8. DON'T KNOW D. Prov.: 1. _____ 3. Same 8. DON'T KNOW	Work Address : 1. _____ 8. DK _____ 6. NA School Address: 1. _____ 8. DK _____ 6. NA Lives with whom? : 1. _____ 8. DK Name of Other Informant : 1. _____ 8. DK (in new location) ➔AR01 NEXT LINE
⌊_⌋⌊_⌋		⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋	Address : 1._____ 8. DON'T KNOW Location: 1. _____ 8. DON'T KNOW Tele. No. 1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ – ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW No. HP 1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec. : 1. _____ 3. Same 8. DON'T KNOW C. Kab. : 1. _____ 3. Same 8. DON'T KNOW D. Prov.: 1. _____ 3. Same 8. DON'T KNOW	Work Address : 1. _____ 8. DK _____ 6. NA School Address: 1. _____ 8. DK _____ 6. NA Lives with whom? : 1. _____ 8. DK Name of Other Informant : 1. _____ 8. DK (in new location) ➔AR01 NEXT LINE

SECTION KRK (HOUSEHOLD CHARACTERISTICS)

HOUSEHOLD CHARACTERISTICS: INTERVIEWER OBSERVATION
INTERVIEWER NOTE: DON'T FILL THIS OUT AT THE BEGINNING OF THE INTERVIEW. WAIT UNTIL THE END OF THE VISIT.

KRK01.	**TYPE OF RESIDENTIAL DWELLING**	SINGLE UNIT SINGLE LEVEL ..... 01 SINGLE UNIT MULTIPLE LEVELS..... 02 DUPLEX SINGLE LEVEL ..... 03 DUPLEX MULTIPLE LEVELS ..... 04 MULTIPLE UNIT SINGLE LEVEL ..... 05 MULTIPLE UNIT MULTIPLE LEVELS ..... 06 HOUSE ON STILTS ..... 08 HIGH RISE/APARTMENT BUILDINGS..... 09 HOUSE-STORE UNITS..... 10 OTHER..... 95
KRK02.	**GENERAL SANITARY CONDITIONS, CIRCLE ALL THAT APPLY**	YES NO A. HOUSE IS SURROUNDED BY HUMAN AND ANIMAL WASTE..... 1 3 B. HOUSE IS SURROUNDED BY PILES OF TRASH..... 1 3 C. HOUSE IS SURROUNDED BY STAGNANT WATER..... 1 3 D. THERE IS A STABLE UNDER/ NEXT TO THE HOUSE..... 1 3 E. HOUSE HAS SUFFICIENT VENTILATION ..... 1 3 F. YARD IS WELL MAINTAINED AND CLEANED-UP ..... 1 3 G. HOUSE HAS A MODERATELY - SIZED YARD..... 1 3 H. HOUSE HAS KITCHEN OUTSIDE..... 1 3 I. COOKING ROOM AND SLEEPING ROOM ARE SAME..... 1 3
KRK05a.	**ESTIMATE THE SIZE OF THE HOUSE IN SQUARE METERS**	⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Square meters
KRK06.	**ESTIMATE HOW MANY ROOMS (BEDROOMS, LIVING ROOM, DINING ROOM, KITCHEN, BATHROOM, ETC.) ARE IN THIS HOUSE**	⌊_⌋⌊_⌋ Rooms
KRK08.	**MAIN FLOORING TYPE USED IN THIS HOUSE**	CERAMIC / MARBLE / GRANITE / STONE..... 01 TILES / TERRAZZO ..... 02 CEMENT / BRICKS ..... 03 LUMBER / BOARD..... 04 BAMBOO..... 05 DIRT..... 06 OTHER..... 95
KRK09.	**MAIN MATERIAL USED IN THE OUTER WALL OF THIS HOUSE**	MASONRY (CEMENT/PREFABRICATED BRICKS)..... 01 LUMBER/BOARD/PLYWOOD..... 02 BAMBOO/WOVEN/MAT..... 03 OTHER..... 95
KRK10.	**MAIN ROOFING TYPE OF THIS HOUSE**	CONCRETE ..... 01 WOOD ..... 02 METAL PLATES..... 03 ROOF TILES/SHINGLES ..... 04 ASBESTOS..... 05 FOLIAGE / PALM LEAVES/GRASS/BAMBOO..... 06 OTHER..... 95

SECTION IK (INFORMATION ON REPEAT VISIT)

IK1. In the future, we will visit this household again. You might not be here at that time. Could you tell us name of friend/family member who can tell us where you are?

Name : _____

Address: _____

Telephone number: **A.** Home ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ – ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋

B.Cellphone number: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ belonging to _____

C. Cellphone number: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ belonging to _____

W. NA **Y.DK**

IK2. If you move, where do you move to?

1. Move ➔ **6. NOT MOVE ➔ CP 8. DON'T KNOW ➔ CP**

1. Not same

1. Village:	1 _____	3. Same ➔ **CP**	8. DON'T KNOW
2. Subdistrict:	1 _____	3. Same ➔ **CP**	8. DON'T KNOW
3. District:	1 _____	3. Same ➔ **CP**	8. DON'T KNOW
4. Province:	1 _____	3. Same ➔ **CP**	8. DON'T KNOW
5. Country:	1 _____	3. Same ➔ **CP**	8. DON'T KNOW

SECTION CP (INTERVIEW SESSION NOTES)

COV0: NAME OF RESPONDENT: _____ └┴┘ AR00 (PID)

RSPNDNT: RESPONDENT IS:..... 1. HEAD OF HOUSEHOLD
2. SPOUSE OF HEAD OF HOUSEHOLD
3. OTHER HOUSEHOLD MEMBER
4. NON-HOUSEHOLD MEMBER

LANGMAIN.	Interview was entirely/mostly conducted in what language?	└┴┘ **Other:** _____
LANGOTHR.	Other language used (if any):	└┴┘ **Other:** _____

CODE FOR LANGUAGE:

00.	**Indonesian**	**04.**	**Batak**	**08.**	**Sasak**	**12.**	**Makassar**	**16.**	**Toraja**	**20.**	**Lampung**
01.	**Javanese**	**05.**	**Bugis**	**09.**	**Minang**	**13.**	**Nias**	**17.**	**Lahat**	**96.**	**NONE**
02.	**Sundanese**	**06.**	**Chinese**	**10.**	**Banjar**	**14.**	**Palembang**	**18.**	**Other South Sumatra**	**95.**	**Other**
03.	**Balinese**	**07.**	**Maduranese**	**11.**	**Bima**	**15.**	**Sumbawa**	**19.**	**Betawi**		

C1. RESULT OF INTERVIEW OF BOOK K	C2.REASON CODE FOR ANSWER "3"/"2" ON C1	C4. SUPERVISOR MONITORING	C5. CLOSEST EA
1. Completed➔**C4** 2. Partially completed 3. Not completed	1. Respondent was not at home/not available 2. Respondent was seriously ill 3. Respondent refused (to be interviewed) 5. Other:	Yes No a. Observed ..... 1 3 b. Edited..... 1 3 c. Verified..... 1 3	**1. EA:** └┴┴┘ **Distance to EA:** └┘ , └┴┴┘ **km** **2. Outside EA Range:** **Province:**_____ **Province Code:** └┴┘ **Kab./Kota:**_____ **Kab/Kota Code:** └┴┘

SECTION CP (INTERVIEW SESSION NOTES)

EVALUATION FORM FORBOOK K

CP1. WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW? **ANSWER MAY BE MORE THAN ONE.** A. NO ONE B. A CHILD 5 YEARS OLD OR UNDER C. A CHILD OLDER THAN 5 YEARS OLD D. HUSBAND/WIFE E. AN ADULT, A HOUSEHOLDER F. AN ADULT, NOT A HOUSEHOLDER	**CP2.** WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD	**CP3.** WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD

NOTES:

INTERVIEWER: _____ ⌊_⌊_⌊_⌋ **CONFIDENTIAL** HHID : ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋

INDONESIA FAMILY LIFE SURVEY 2014

BOOK I

SECTIONS: KS, KSR, PP, CP

Respondent is the Wife of Head of the Household or the Female Head of the Household or another HH Member 18 years or older who is able to answer the questions

COV00aa.	CAPI CHECK : HAS THE RESPONDENT BEEN READ THE INFORMED CONSENT EARLIER (COV00x=1 IN BOOK K) AND AGREED TO BE INTERVIEWED	1. Yes ➔ RESVIS 3. No

COV00x. Informed Consent (to be read to each individual the first time the individual is interviewed):

Good morning/afternoon/evening,

My name is _____ and my colleague here is _____. We are both from SurveyMeter, an independent research organization based in Yogyakarta. We are currently conducting the fieldwork for Sakerti 5, a survey project conducted with collaboration with RAND Corporation. We will start by reading the informed consent form and ask whether you would be willing to participate in the survey. You can ask about anything that is not clear at any time. Please do discuss with your family members before deciding to participate in the survey.

The IFLS is a longitudinal survey that was first fielded in 1993, and again in 1997, 2000, and 2007. You may remember that we visited your households to interview you or your household members in 2007 or in an earlier round. Your household was interviewed since it was one of the households or part of the households that were randomly chosen to participate since the beginning of the survey in 1993. This year, we will visit the same households again to conduct the interview and to see whether there have been some changes since the last time we visited you.

If you choose to participate in the study, our interviewer will first ask you about your basic demographics, family information, health status, health care and insurance, work, retirement and pensions, household and individual income, expenditure, and assets, etc. Then the interviewer will give you a physical examination to better understand your true health conditions. The measurements include height, weight, waist circumference, blood pressure, peak meter flow lung capacity, grip strength, balance, timed walk, and timed sit to stand. We will also do a finger prick to measure your blood hemoglobin level [and to collect blood spot on a filter paper which we will store and use in the lab for analysis of C-reactive Protein that can be used to measure inflammation and the risk to cardiovascular diseases and HbA1c that can be used to measure risk of diabetes].

This survey will take some time to complete, but we will be doing it at your convenience. If you need to take a break or run some errands, please let us know so we can stop the interview and continue later in the day or the next day.

Generally, the study will pose no health risk. The blood drawing procedure will not transmit diseases to you, because the syringe and needle are new and disinfected. The small amount of blood drawn has no harm to your health. There maybe discomfort or very mild pain, we will help you deal with it.

If you agree to participate in the survey, the physical examination and test results related to your health will be feed back to you directly. And the information you provided can be used to help make health, retirement and social security policies suitable for Indonesia, which will benefit you and other people just like you.

The interview is completely voluntary and all survey information will be kept confidential. With your consent, we also will take picture of you and the front of your house solely for the purpose of confirming your identity and your address in the follow up survey. The photos and all your personal records including, questionnaires, and physical examination and test results are confidential; we will not tell others, include your family, friends, local hospitals, etc. Your personal information, including name, address, phone number, and other information which can be used to identify you will not be disclosed. You are identified by a number in the questionnaires and test records, which will be stored safely in IFLS5 project office. You may withdraw from the study any time, which will not impact any of your benefits. The researcher will keep your information confidentially until it is destroyed, and your information will not be used or disclosed during this period.

If you agree to participate in this study, all the interviews, physical examination, tests and counseling are provided to you for free. You do not need to pay anything.

If you agree to participate in this study, you will get Rp _____ as a token gift of appreciation for the time you spend with us.

If you have any questions about this study, you may contact Bondan Sikoki at SurveyMETER at email address: sm@surveymeter.org atau telpon 62-274-4477464 dan fax: 62-274-4477004

Interviewer's Statement

"*I have informed the respondent about the background, goals, procedure, risks and benefits of the survey, given him/her enough time to read the informed consent and discuss with others, and answered all questions related to the survey; I have informed the respondent that he/she can contact the SurveyMETER, when having problems about the surveand provided the accurate contact information. I have informed the respondent that he/she can withdraw from the survey anytime. I have informed the potential respondent that he/she can get a copy of this informed consent with signatures of mine*."

□ **S**igned by interviewer. Interviewer name: _____ day/month/year

Respondent's statement:

"*I have been read the informed consent and I agree to participate in*": □ **questionnaire survey**

RESVIS.	HOUSEHOLD INTERVIEWED ?	1. Yes 3. No ➔ C1
COV00a.	NAME:	PID └─┴─┘
RSPNDNT:	RESPONDENT IS:	1. HEAD OF HOUSEHOLD (HH) 2. SPOUSE OF HEAD OF HOUSEHOLD 3. OTHER HOUSEHOLD MEMBER

SECTION KS (CONSUMPTION)

The following questions apply to food/products bought/consumed by all the members of this household during the past week, starting on [date] last week.

TYPE OF FOOD ITEM (KS1TYPE)		KS02. During the past week, what was the total expenditure to purchase [...]?		KS03. Approximately what was the total value of items consumed by this household that were self-produced or received from another source during the last week?	
A.	**STAPLE FOODS** Hulled, uncooked rice		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp. KS02a. During the past week, what was the quantity of rice purchased? ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ kg		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp. KS03a. During the past week, what was the quantity of rice consumed by the household that were self produced or received from another source? ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ kg
B.	Corn		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
C.	Sago/flour		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
D.	Cassava, tapioca, dried cassava		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
E.	Other staple foods, like sweet potatoes, potatoes, yams		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
F.	**VEGETABLES** *Kangkung*, cucumber, spinach, mustard greens, tomatoes, cabbage, *katuk*, green beans, string beans and the like.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
G.	Beans like mung-beans, peanuts, soya-beans, and the like.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
H.	Fruits like papaya, mango, banana and the like.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
I.	**DRIED FOODS** Noodles, rice noodles, macaroni, shrimp chips, other chips, and the like		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
J.	Cookies, breads, crackers		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
K.	**MEAT AND FISH** Beef, mutton, water buffalo meat and the like		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
L.	Chicken, duck and the like		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
M.	Fresh fish, oysters, shrimp, squid and the like.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
N.	Salted fish, smoked fish		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
OA.	**Other dishes, like:** Jerky, shredded beef, canned meat, sardine and the like		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.		⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.

SECTION KS (CONSUMPTION)

TYPE OF FOOD ITEM (KS1TYPE)	KS02. During the past week, what was the total expenditure to purchase [...]?		KS03. Approximately what was the total value of items consumed by this household that were self-produced or received from another source during the last week?	
OB. Tofu, *tempe*, other side dishes		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
MILK/EGGS				
P. Eggs		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
Q. Fresh milk, canned milk, powdered milk and the like		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
SPICES				
R. Sweet and salty soy sauce		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
S. Salt		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
T. Shrimp paste		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
U. Chili sauce, tomato sauce, and the like		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
V. Shallot, garlic, chili, candle nuts, corriander, MSG and the like		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
W. Javanese (brown) sugar		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
X. Butter		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
Y. Cooking oil like coconut oil, peanut oil, corn oil, palm oil and the like		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
BEVERAGES AND OTHER DRINKS/CONSUMER PRODUCTS				
Z. Drinking water		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
AA. Granulated sugar		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
BA. Coffee		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
CA. Tea		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
DA. Cocoa		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
EA. Soft drinks like Fanta, Sprite, etc.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
FA. Alcoholic beverages like beer, palm wine, rice wine, etc.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
GA. Betel nut (for chewing, traditional drug, others)		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.

SECTION KS (CONSUMPTION)

TYPE OF FOOD ITEM (KS1TYPE)	KS02. During the past week, what was the total expenditure to purchase [...]?		KS03. Approximately what was the total value of items consumed by this household that were self-produced or received from another source during the last week?	
HA. Cigarettes, tobacco		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
IA. Prepared food (eaten at home)		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
IB. Prepared food (away from home)		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.		⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.

TRANSFER OF HOUSEHOLD FOOD SUPPLY

KS04b.	What was the rupiah value of food given to other parties outside the household during the past week?	⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.

Now I would like to ask how much money was spent for non-food items during the past month.

TYPE OF NON-FOOD ITEMS (KS2TYPE)	KS06. What were the total expenditures by all household members for [...] during the past month, namely since date [...] one month ago?
A1. Electricity	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
A2. Water	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
A3. Fuel	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
A4. Telephone (including vouchers and mobile starter pack)	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
B. Personal toiletries Including soap, shaving supplies, cosmetics and the like	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
C. Household items Including laundry soap, cleaning supplies, anti-mosquitoes and the like	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
C1. Domestic services and servants' wages	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
D. Recreation and Entertainment Including movies, theater, outings, sport equipment, newspapers, magazines and the like	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
E. Transportation Including bus fare, cab fare, vehicle repair costs, gasoline and the like	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
F1. Sweepstakes and the like	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
F2. Arisan	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
G. Value of non-food items given to others/other parties outside the household on a regular basis (including debtrepayment)	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.
KS07a. What is the total value of these items consumed by this household that were self-produced or received from another source in the last month, namely since the date [...]?	⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp.

SECTION KS (CONSUMPTION)

Now I would like to ask how much money was spent by all household members for non-food items during the past one year.

TYPE OF NON-FOOD ITEMS (KS3TYPE)	KS08 What were the total expenditures by all household members for [...] during the past year, namely since the month of [...] last year?	KS09a What was the total value of [...] consumed by all household members that was self-produced or received, from another source during the last year?
A. Clothing for children and adults Including shoes, hats, shirts, pants, children clothing and the like	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
B. Household supplies and furniture Including tables, chairs, kitchen tools, bed sheets, towels and the like	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
C. Medical costs Including hospitalization costs, clinic charges, physician's fee, traditional healer's fee, medicines and the like	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
D. Ritual ceremonies, charities and gifts Including weddings, circumcisions, tithe, charities, gifts and the like	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
E. Taxes Including property tax, vehicle tax, income tax, sales tax and the like	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	
F. Other expenditures not specified above Including the purchase of cars, house, television sets, handphones, beds, livestock and the like	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
G. Value of non-food items given to others/other parties outside the household on an irregular basis (less than twelve times per year)	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	

About how much was spent on schooling in the last year for all household members?

	A Children/family members inside the household	B Children/family members outside the HH
KS10a. Approximately what was the total expenditures (e.g., tuition, PTA contribution, school committee contribution, laboratory, registration, exams, other contribution like student associations) for [...] during the past year?	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
KS11a. Approximately what was the total of expenditures for schooling needs (like for school uniforms, school supplies) for [...] during the past year?	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
KS12a. Approximately how much was spent on transportation and pocket money, special courses associated with [...]'s schooling in the past year?	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
KS12b. Approximately how much was the total cost of boarding/room rent (including meals) spent for [...] during the past year?		⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.

SECTION KS (CONSUMPTION)

Now we would like to know about the quantity and price of foods that you have purchased in the last month.

	KS13a.	KS13.	KS14.	KS14a.	KS14b.	KS15.	KS16.
FOOD ITEM (KS4TYPE)	In the last month, have you purchased […]?	The last time you purchased […], what was the quantity you purchased?	INTERVIEWER NOTE: RECORD THE UNITS	If the unit is not in kg, grams or liters, try to estimate the amount that you bought. INTERVIEWER NOTE: YOU MUST PROBE TO OBTAIN QUANTITY	INTERVIEWER NOTE: RECORD THE UNITS. IF NECESSARY, APPROXIMATE. DO NOT RECORD UNITS SUCH AS "BUNCHES" OR "CANS"	How much did you pay for that amount?	Specify brand or comment on quality.
A. Rice	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01 ➔**KS15** Liter ..... 02 ➔**KS15** Bag..... 05 DON'T KNOW ..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01 Liter..... 02 Ounce ..... 09 DON'T KNOW 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	1. High 2. Medium/Average 3. Low 8. DON'T KNOW
M. Beef	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01➔ **KS15** Bag..... 05 Ounce..... 09 DON'T KNOW ..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01 DON'T KNOW 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	1. High 2. Medium/Average 3. Low 8. DON'T KNOW
N. Chicken	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01➔ **KS15** Bag..... 05 No. of Chickens ..... 07 Ounce..... 09 DON'T KNOW..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01 DON'T KNOW..... 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	1. *Kampung*/high 2. *Ras*/average 3. Low 8. DON'T KNOW
C Fish	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01➔ **KS15** Bag..... 05 No. of fish ..... 07 Ounce..... 09 DON'T KNOW..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01 DON'T KNOW..... 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	1. Fresh fish 2. Salted fish 3. Canned fish 8. DON'T KNOW
H1. *Kangkung*	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01➔ **KS15** Bunch ..... 03 Ounce..... 09 DON'T KNOW..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01 DON'T KNOW..... 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	
H3. Spinach	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01➔ **KS15** Bunch ..... 03 Ounce..... 09 DON'T KNOW..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01 DON'T KNOW..... 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	
E. Cooking Oil	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01➔ **KS15** Liter ..... 02 ➔**KS15** Bottle ..... 04 Bag..... 05 Bamboo scoop..... 06 Ounce..... 09 DON'T KNOW..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Liter ..... 02 DON'T KNOW..... 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	1. High 2. Medium/Average 3. Low 8. DON'T KNOW

	KS13a.	KS13.	KS14.	KS14a.	KS14b.	KS15.	KS16.

SECTION KS (CONSUMPTION)

FOOD ITEM (KS4TYPE)	In the last month, have you purchased […]?	The last time you purchased […], what was the quantity you purchased?	INTERVIEWER NOTE: RECORD THE UNITS	If the unit is not in kg, grams or liters, try to estimate the amount that you bought. INTERVIEWER NOTE: YOU MUST PROBE TO OBTAIN QUANTITY	INTERVIEWER NOTE: RECORD THE UNITS. IF NECESSARY, APPROXIMATE. DO NOT RECORD UNITS SUCH AS "BUNCHES" OR "CANS"	How much did you pay for that amount?	Specify brand or comment on quality.
F. Granulated Sugar	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01➔ **KS15** Liter ..... 02 Bag ..... 05 Ounce ..... 09 DON'T KNOW..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg ..... 01 Liter..... 02 DON'T KNOW..... 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	4. Imported 5. Local 8. DON'T KNOW
K. Kerosene	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Kg..... 01 Liter ..... 02 ➔**KS15** Bamboo scoop..... 06 DON'T KNOW..... 98 Other _____ 95	⌊_⌊_⌊_⌋.⌊_⌊_⌋	Liter ..... 02 DON'T KNOW..... 98	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.	
L. Vehicle Fuel	Yes .....1 ➔ No.....3 ⬇	⌊_⌊_⌊_⌋,⌊_⌊_⌋	Liter ..... 02 ➔ **KS15** Kg..... 01 Bamboo scoop..... 06 DON"T KNOW ..... 98 Other 95	⌊_⌊_⌊_⌋,⌊_⌊_⌋	Liter ..... 02 DON"T KNOW 98	⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	1. Premium Gasoline 2. Pertamax Gasoline 3. Diesel

SECTION KSR (CONSUMPTION)

Now we want to ask about cash assistance from two government programs, the Unconditional Cash Trasnfer program (*Program Kompensasi Penurunun Subsidi BBM-Bantuan Langsung Tunai)* and the Conditonal Cash Transfer Program (*Program Bantuan Tunai Bersyarat - Keluarga Harapan)* that this household may have received.

	KSR3TYPE	A. *Program Kompensasi Pengurangan Subsidi BBM (BLT 2008)* Unconditional Cash Transfer Program	B. *Program Bantuan Tunai Bersyarat (Keluarga Harapan)* Conditional Cash Transfer Program	C. *Bantuan Langsung Sementara Masyarakat (BLSM)* Unconditional Cash Transfer Program
KSR17.	Has this household ever received cash transfer from [….] program?	No..... 3 Yes…….....1 ➔**COLUMN B**	No.....3 ➔ **COLUMN C** No program.....6 ➔ **COLUMN C** Yes……..1	No .....3 ➔**KSR24** Yes…….. 1
KSR18.	When was **the first time** this household receive the cash transfer from […] program?(Month and year)		└┴┘ / └┴┴┴┘ Month / Year	└┴┘ / └┴┴┴┘ Month / Year
KSR19.	How many times has this household received cash transfer from the […] program?		└┴┘ times	└┴┘ times
KSR21.	What was the **total amount** of cash transfer this household **received in the last 1 year** from [….] program ?		└┴┘ , └┴┴┘ , └┴┴┘ Rp.....1 DID NOT RECEIVE IN THE LAST 1 YEAR...6 DON'T KNOW 8	└┴┘ , └┴┴┘ , └┴┴┘ Rp ..... 1 DID NOT RECEIVE IN THE LAST 1 YEAR.. 6 DON'T KNOW..... 8
KSR22.	When was **the last time** this household receive the cash transfer from […] program?(Month and year)		└┴┘ / └┴┴┴┘ Month / Year	└┴┘ / └┴┴┴┘ Month / Year
KSR23.	The **last time** this household received the cash transfer from [….] program, what was the **amount**?		└┴┴┘ , └┴┴┘ Rp .....1 DON"T KNOW .....8 ➔ **COLUMN C**	└┴┴┘ , └┴┴┘ Rp ..... 1 DON"T KNOW ..... 8 ➔**KSR24**

SECTION KSR (CONSUMPTION)

Now we want to ask about rice purchases that this household may have made in the last 12 months through two different government programs. First we want to ask about rice purchasesthrough RASKIN program, then we will ask about purchases made at Market Operations for Rice.

		A. RASKIN (Rice for the Poor Program)
KSR24a.	During the past year, has this household **ever bought rice/received money** from […] program?	Don't know /no program ..... **W ➔ KSR 38** No ..... **C ➔ KSR 36** Yes, bought RASKIN rice ..... A Yes, received money for RASKIN ..... B
KSR25b.	How many times in the past year did the household buy rice/receive money from […] program?	└┴┘ times (includes both RASKIN rice purhase and RASKIN money)
KSR26b.	What was the total quantity rice bought/money received by this household from the […] program **in the last year**?	└┴┴┘ kg..... A (total rice purchase) └┴┘,└┴┴┘,└┴┴┘Rp ..... B (total money received) DON'T KNOW ..... W
KSR27.	What was the total quantity rice bought by this household from the […] program **in the last 4 weeks**?	└┴┴┘ kg..... A (total rice purchase) └┴┘,└┴┴┘,└┴┴┘Rp ..... B (total money received) DON'T KNOW ..... W
KSR28.	What was **the last time** you obtained/bought rice (month and year) from the [..] program?	DID NOT BUY RASKIN RICE ..... 6 ➔ **KSR 29a** └┴┘/└┴┴┴┘ ..... 1 Month / Year
KSR29.	The last time you bought rice from the […] program, what was the quantity of rice you bought?	└┴┴┘ kg..... 1 DON'T KNOW 8
KSR30.	The last time you obtained/bought rice from the […] program what was the maximum amount of rice you could purchase?	└┴┴┘ kg..... 1 No maximum..... 6 DON'T KNOW 8
KSR31.	The last time you bought rice from the […] program, what was the total amount that you spent buying?	└┴┘,└┴┴┘,└┴┴┘Rp ..... 1 DON'T KNOW 8
KSR32.	What would the same amount have cost in regular market at that time?	└┴┘,└┴┴┘,└┴┴┘ Rp ..... 1 DON'T KNOW 8
KSR29a.	The last time you receive money from the […] program, how much did you receive?	DID NOT RECEIVE RASKIN MONEY ..... 6 ➔ **KSR 34** └┴┘,└┴┴┘,└┴┴┘Rp 1
KSR29b.	How much […] rice were you supposed to receive?	└┴┴┘ kg..... 1 DON'T KNOW 8

SECTION KSR (CONSUMPTION)

KSR34.	What was price per kg of rice in the regular market at that time?	⌊⌊⌋, ⌊⌊⌊⌋ Rp/kg ..... 1 DON'T KNOW 8
KSR35.	What was the quality of rice purchased from the […] program?	High ..... 1 Medium ..... 2 Low ..... 3 DID NOT BUY RASKIN RICE 6
KSR36.	During the past year, have you ever refused to buy rice from the […] program even though you had the option of buying?	No ..... 3 ➔**KSR38** Not eligible ..... 6 ➔ **KSR38** Yes 1
KSR37.	Why didn't you buy rice from the […] program at that time ? **SHOWCARD NO 1**	Have no money ..... 1 The rice's quality is low ..... 2 Have no time ..... 3 Too far..... 4 Someone else need it more ..... 5 Absent ..... 6 Didn't have coupon for the program..... 7 Rice emty 8

SECTION KSR (CONSUMPTION)

Now we want to ask about purchases of kerosene, sugar, and cooking oul that this household may have made in the last 12 months through Market Operations.

TYPE OF ASSISTANCE (KSR2TYPE)	KSR38. In the past 12 months, has this household ever bought […] from market operation?	KSR39. Who distributed or sold […]? **(CIRCLE ALL THAT APPLY)**	KSR40. How many times in the last 12 months did this household buy […]?	KSR41. When was the last time?	KSR42. The last time you bought […], what was the total amount that you spent buying […] from the market operation?	KSR43. The last time you bought […], what was the price per unit of[…] you bought from the market operation?	KSR44. Unit	KSR45. The last time you bought […], what was the price per unit of[…] in the regular market?	KSR46. Unit
B. Rice	3. No 1. Yes ➔ ↓	A B C Y	1. ⌊⌊⌋⌋ times 8. DON'T KNOW	⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year	1. ⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. kg 2. liter	1. ⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. kg 2. liter
D. Granulated Sugar	3. No 1. Yes ➔ ↓	A B C Y	1. ⌊⌊⌋⌋ times 8. DON'T KNOW	⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year	1. ⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. kg 2. liter	1. ⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. kg 2. liter
J. Cooking oil	3. No 1. Yes ➔ ↓	A B C Y	1. ⌊⌊⌋⌋ times 8. DON'T KNOW	⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year	1. ⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. kg 2. liter	1. ⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. kg 2. liter
K. Kerosene	3. No 1. Yes ➔ ↓	A B C Y	1. ⌊⌊⌋⌋ times 8. DON'T KNOW	⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year	1. ⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. kg 2. liter	1. ⌊⌊⌋⌋⌊⌊⌋⌋,⌊⌊⌋⌋⌊⌊⌋⌋ Rp. 8. DON'T KNOW	1. kg 2. liter

Code for KSR39: A. Central government B. Regional government C. Non-government Y. Don't know

Now we would to ask about aid or assistance you or other household member received in the last 12 months but <u>not from government</u> and <u>not related with disaster assistance or market operation</u>.

	KSR47. In the last 12 months, did this household receive assistance like other […] ?	KSR48. From what institution was the source of that assistance?	KSR49. In the last 12 months, when the last time this household receive the assistance?	KSR50. What was **the total amount** that this household received **in the last 4 weeks**?
A Cash	3. No ↓ 1. Yes ➔	A B C D E F	6. NOT APPALICABLE ➔ **ROW B** 1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 8. DON't KNOW	1. ⌊⌊⌋⌋⌊⌊⌋⌋ , ⌊⌊⌋⌋⌊⌊⌋⌋ , ⌊⌊⌋⌋⌊⌊⌋⌋ Rp 6. NOT RECEIVED IN LAST 4 WEEKS 8. DON'T KNOW
B. In-kind (food and non-food)	3. No ↓ 1. Yes ➔	A B C D E F	6. NOT APPALICABLE 1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 8. DON't KNOW	1. ⌊⌊⌋⌋⌊⌊⌋⌋ , ⌊⌊⌋⌋⌊⌊⌋⌋ , ⌊⌊⌋⌋⌊⌊⌋⌋ Rp 6. NOT RECEIVED IN LAST 4 WEEKS 8. DON'T KNOW

Codesfor KSR48: A. Religious organization B. Political Organization C. Other domestic NGO D. Private donors E.Firms/corporations F.Foreign government/NGO/donors

SECTION PP (KNOWLEDGE OF HEALTH AND FAMILY PLANNING SERVICES)

Next we would like to ask about some health and family planning facilities that you may or may not have visited for health or family planning services.

HEALTH AND FAMILY PLANNING FACILITY (PPTYPE)	PP2 Do you know where a [...] is located?	PP3 What is the name of the [...]?*(IF MORE THAN 1, CHOOSE THE FACILITY THE RESPONDENT IS MOST LIKELY TO USE.)	PP4 Where is the location of [...]?	PP5 How long does it take to go to [...] (one way trip)?	PP6 Approximate transportation cost from home to [...] one way?
A. Public Hospital (General or Specialty)	3. No ➔ 1. Yes ➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW
B. Private Hospital	3. No ➔ 1. Yes ➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW
C. Public Health Center/ AuxiliaryCenter (*Puskemas/ Puskesmas Pembantu*)	3. No ➔ 1. Yes ➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW

HHID: ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋

SECTION PP (KNOWLEDGE OF HEALTH AND FAMILY PLANNING SERVICES)

HEALTH AND FAMILY PLANNING FACILITY (PPTYPE)	PP2 Do you know where a [...] is located?	PP3 What is the name of the [...]?*(IF MORE THAN 1, CHOOSE THE FACILITY THE RESPONDENT IS MOST LIKELY TO USE.)	PP4 Where is the location of [...]?	PP5 How long does it take to go to [...] (one way trip)?	PP6 Approximate transportation cost from home to [...] one way?
D. Private Clinic	3. No ↓ 1. Yes➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊⌋⌋⌋ ⌊⌋ ⌊⌋⌋⌋	⌊⌋⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊⌋⌋⌋⌋, ⌊⌋⌋⌋⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW
E. Private Physician (General/Specialist)	3. No ↓ 1. Yes➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊⌋⌋⌋ ⌊⌋ ⌊⌋⌋⌋	⌊⌋⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊⌋⌋⌋⌋, ⌊⌋⌋⌋⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW
F1. Midwife (private practice or village midwife)	3. No ↓ 1. Yes➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊⌋⌋⌋ ⌊⌋ ⌊⌋⌋⌋	⌊⌋⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊⌋⌋⌋⌋, ⌊⌋⌋⌋⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW

HHID: ⌊⌋⌋⌋⌋ ⌊⌋⌋⌋ ⌊⌋⌋⌋ ⌊⌋⌋⌋

SECTION PP (KNOWLEDGE OF HEALTH AND FAMILY PLANNING SERVICES)

HEALTH AND FAMILY PLANNING FACILITY (PPTYPE)	PP2 Do you know where a [...] is located?	PP3 What is the name of the [...]?*(IF MORE THAN 1, CHOOSE THE FACILITY THE RESPONDENT IS MOST LIKELY TO USE.)	PP4 Where is the location of [...]?	PP5 How long does it take to go to [...] (one way trip)?	PP6 Approximate transportation cost from home to [...] one way?
F2. Nurse/ paramedic	3. No ↓ 1. Yes➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW
G1. Traditional Birth Attendant	3. No ↓ 1. Yes➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW
G2. Traditional practitioner (shamans, wisemen, Chinese herbalists, acupuncturists)	3. No ↓ 1. Yes➔	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW

HHID: ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋

SECTION PP (KNOWLEDGE OF HEALTH AND FAMILY PLANNING SERVICES)

HEALTH AND FAMILY PLANNING FACILITY (PPTYPE)	PP2 Do you know where a [...] is located?	PP3 What is the name of the [...]?*(IF MORE THAN 1, CHOOSE THE FACILITY THE RESPONDENT IS MOST LIKELY TO USE.)	PP4 Where is the location of [...]?	PP5 How long does it take to go to [...] (one way trip)?	PP6 Approximate transportation cost from home to [...] one way?
H. Pharmacy	3. No 1. Yes➔ ↓	1. _____ _____ _____ 8. DON'T KNOW		└┴┘ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. └┴┴┘, └┴┴┘ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW
I1. Posyandu	3. No 1. Yes➔ ↓	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** └┴┴┘ └┘ └┴┴┘	└┴┘ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. └┴┴┘, └┴┴┘ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW
I2. Posyandu for Elderly	3. No 1. Yes➔ ↓	1. _____ _____ _____ 8. DON'T KNOW	Add. Address: 1. _____ 8. DON'T KNOW Loc. Loc Note: 1. _____ 8. DON'T KNOW _____ A. Vill: 1. _____ 3. Same 8. DK B. Kec: 1. _____ 3. Same 8. DK C. Kab: 1. _____ 3. Same 8. DK D. Prov: 1. _____ 3. Same 8. DK **COMFAS CODE:** └┴┴┘ └┘ └┴┴┘	└┴┘ 01. Minute 02. Hours 03. Days 98. DON'T KNOW	1. └┴┴┘, └┴┴┘ Rp. 3. Walk 5. Use own transportation 8. DON'T KNOW

SECTION CP (INTERVIEW SESSION NOTES)

US21. MEASURE OF IODINE CONTENT IN HOUSEHOLD SALT	1. WHITE 3. BLUE 5. A LITTLE BLUE

LANGMAIN. Interview was entirely/mostly conducted in what language?	└┴┘ **Other:**_____
LANGOTHR. Other language used (if any):	└┴┘ **Other:**_____

KODE BAHASA:

00.	**Indonesian**	**04.**	**Batak**	**08.**	**Sasak**	**12.**	**Makassar**	**16.**	**Toraja**
01.	**Javanese**	**05.**	**Bugis**	**09.**	**Minang**	**13.**	**Nias**	**17.**	**Lahat**
02.	**Sundanese**	**06.**	**Chinese**	**10.**	**Banjar**	**14.**	**Palembang**	**18.**	**Other South Sumatra**
03.	**Balinese**	**07.**	**Maduranese**	**11.**	**Bima**	**15.**	**Sumbawa**	**19.**	**Betawi**

20.	**Lampung**	
96.	**NONE**	
95.	**Other**	

C1.RESULT OF INTERVIEW OF BOOK I	**C2.REASON CODE FOR ANSWER "3"/"2" ON C1**	**C4. SUPERVISOR MONITORING**		
1. Completed➔**C4** 2. Partially completed 3. Not completed	1. Respondent was not at home/not available 2. Respondent was seriously ill 3. Respondent refused (to be interviewed) 5. Other:		Yes	No
		a. Observed	1	3
		b. Edited	1	3
		c. Verified	1	3

SECTION CP (INTERVIEW SESSION NOTES)

FILL OUT THIS SECTION UPON THE COMPLETION OF THE QUESTIONNAIRE BOOK.

CP1. WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW? **ANSWER MAY BE MORE THAN ONE.** A. NO ONE B. A CHILD 5 YEARS OLD OR UNDER C. A CHILD OLDER THAN 5 YEARS OLD D. HUSBAND/WIFE E. AN ADULT, A HOUSEHOLDER F. AN ADULT, NOT A HOUSEHOLDER	**CP2.** WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD	**CP3.** WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD

NOTES:

INTERVIEWER: _____ └┴┴┘ **CONFIDENTIAL** **HHID :** └┴┴┘ └┴┴┘ └┴┴┘ └┴┴┘

(IDIVWR)

INDONESIA FAMILY LIFE SURVEY 2014

BOOK II

(HOUSEHOLD ECONOMY)

SECTIONS: KR, UT, NT, HR, HI, ND,BH,CP

Primary Respondent is the Head of the Household or Person 18 years or older who is able to answer the questions

COV00aa.	CAPI CHECK : HAS THE RESPONDENT BEEN READ THE INFORMED CONSENT EARLIER (COV00x =1 IN BOOK K OR 1) AND AGREED TO BE INTERVIEWED	1. Yes ➔ **RESVIS** 3. No

COV00x. Informed Consent (to be read to each individual the first time the individual is interviewed):

Good morning/afternoon/evening,

My name is _____ and my colleague here is _____. We are both from SurveyMeter, an independent research organization based in Yogyakarta. We are currently conducting the fieldwork for Sakerti 5, a survey project conducted with collaboration with RAND Corporation. We will start by reading the informed consent form and ask whether you would be willing to participate in the survey. You can ask about anything that is not clear at any time. Please do discuss with your family members before deciding to participate in the survey.

The IFLS is a longitudinal survey that was first fielded in 1993, and again in 1997, 2000, and 2007. You may remember that we visited your households to interview you or your household members in 2007 or in an earlier round. Your household was interviewed since it was one of the households or part of the households that were randomly chosen to participate since the beginning of the survey in 1993. This year, we will visit the same households again to conduct the interview and to see whether there have been some changes since the last time we visited you.

If you choose to participate in the study, our interviewer will first ask you about your basic demographics, family information, health status, health care and insurance, work, retirement and pensions, household and individual income, expenditure, and assets, etc. Then the interviewer will give you a physical examination to better understand your true health conditions. The measurements include height, weight, waist circumference, blood pressure, peak meter flow lung capacity, grip strength, balance, timed walk, and timed sit to stand. We will also do a finger prick to measure your blood hemoglobin level [and to collect blood spot on a filter paper which we will store and use in the lab for analysis of C-reactive Protein that can be used to measure inflammation and the risk to cardiovascular diseases and HbA1c that can be used to measure risk of diabetes].

This survey will take some time to complete, but we will be doing it at your convenience. If you need to take a break or run some errands, please let us know so we can stop the interview and continue later in the day or the next day.

Generally, the study will pose no health risk. The blood drawing procedure will not transmit diseases to you, because the syringe and needle are new and disinfected. The small amount of blood drawn has no harm to your health. There maybe discomfort or very mild pain, we will help you deal with it.

If you agree to participate in the survey, the physical examination and test results related to your health will be feed back to you directly. And the information you provided can be used to help make health, retirement and social security policies suitable for Indonesia, which will benefit you and other people just like you.

The interview is completely voluntary and all survey information will be kept confidential. With your consent, we also will take picture of you and the front of your house solely for the purpose of confirming your identity and your address in the follow up survey. The photos and all your personal records including, questionnaires, and physical examination and test results are confidential; we will not tell others, include your family, friends, local hospitals, etc. Your personal information, including name, address, phone number, and other information which can be used to identify you will not be disclosed. You are identified by a number in the questionnaires and test records, which will be stored safely in IFLS5 project office. You may withdraw from the study any time, which will not impact any of your benefits. The researcher will keep your information confidentially until it is destroyed, and your information will not be used or disclosed during this period.

If you agree to participate in this study, all the interviews, physical examination, tests and counseling are provided to you for free. You do not need to pay anything.

If you agree to participate in this study, you will get Rp _____ as a token gift of appreciation for the time you spend with us.

If you have any questions about this study, you may contact Bondan Sikoki at SurveyMETER at email address: sm@surveymeter.org atau telpon 62-274-4477464 dan fax: 62-274-4477004

Interviewer's Statement

"*I have informed the respondent about the background, goals, procedure, risks and benefits of the survey, given him/her enough time to read the informed consent and discuss with others, and answered all questions related to the survey; I have informed the respondent that he/she can contact the SurveyMETER, when having problems about the surveand provided the accurate contact information. I have informed the respondent that he/she can withdraw from the survey anytime. I have informed the potential respondent that he/she can get a copy of this informed consent with signatures of mine*."

□ **S**igned by interviewer. Interviewer name: _____ day/month/year

Respondent's statement:

"*I have been read the informed consent and I agree to participate in*": □ **questionnaire survey**

RESVIS.	HOUSEHOLD INTERVIEWED ?	1. Yes 3. No ➔ C1
COV00a.	NAME:	PID ⌊_⌊_⌋
RSPNDNT:	RESPONDENT IS:	1. HEAD OF HOUSEHOLD (HH) 2. SPOUSE OF HEAD OF HOUSEHOLD 3. OTHER HOUSEHOLD MEMBER

SECTION KR (HOUSEHOLD CHARACTERISTICS)

The following questions pertain to your household features.

KR03.	What is the status of this house?	Self-owned ..... 01 ➔ **KR05a** Occupying ..... 02 ➔ **KR05a** Rented/contracted ..... 05 Other: ..... 95 ➔ **KR05a**
KR04a.	What is the rent of this house?	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. yearly ..... 1 ➔ **KR11** ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. monthly ... 2 ➔ **KR11** DON'T KNOW ..... 8 ➔ **KR11**
KR05a.	How much monthly/yearly rent would you pay if you were renting this house?	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. yearly ..... 1 ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. Monthly .... 2 DON'T KNOW 8
KR11.	Does this household utilize electricity?	Yes ..... 1 No 3
KR13.	What is the main water source for drinking for this household?	AQUA/MINERAL WATER, ETC. ..... 10 ➔ **KR13b** PIPE WATER ..... 01 WELL/PUMP (ELECTRIC, HAND) ..... 02 WELL WATER ..... 03 SPRING WATER ..... 04 RAIN WATER ..... 05 RIVER/CREEK WATER ..... 06 POND/FISHPOND ..... 07 WATERCOLLECTIONBASIN ..... 08 OTHER: 95
KR13a.	Before the water is used for drinking, is it boiled?	Yes ..... 1 No 3
KR13b.	Do you purchase water?	YES, DELIVERED TO THE HOUSE ..... 1 ➔ **KR16** YES, SELF-SERVICE ..... 2 NO 3
KR14.	Where is the main water source located?	INSIDE THE HOUSE ..... 1 ➔ **KR16** OUTSIDE THE HOUSE 3
KR15.	What is the distance (from this house) to the main water source?	⌊⌋,⌊⌊⌊⌋ **Meters**

KR16.	Is water used for other necessities, like bathing and laundry, also drawn from the same source as drinking water?	Yes ..... 1 ➔ **KR20** No 3
KR17.	What is the main source of water for other necessities like bathing and laundry?	Pipe water ..... 01 Well/pump (electric, hand) ..... 02 Well water ..... 03 Spring water ..... 04 Rain water ..... 05 River/creek water ..... 06 Pond/fishpond ..... 07 Collection basin ..... 08 Other: 95
KR17b.	Do you purchase the water?	Yes, delivered ..... 1 ➔ **KR20** Yes, self-service ..... 2 No 3
KR18.	Where is the main water source located?	Inside the house ..... 1 ➔ **KR20** Outside the house 3
KR19.	What is the distance (from this house) to the main water source?	⌊⌋,⌊⌊⌊⌋ **Meters**
KR20.	Where do the majority of householders go to the toilet?	Own toilet with septic tank ..... 01 Own toilet without septic tank ..... 02 Shared toilet ..... 03 Public toilet ..... 04 Creek/river/ditch (without toilet) ..... 05 Yard/field (without toilet) ..... 06 Sewer ..... 07 Pond/fishpond ..... 09 Animal stable ..... 10 Sea/lake ..... 11 Other: 95

SECTION KR (HOUSEHOLD CHARACTERISTICS)

KR21.	Where does this household drain its sewage?	Drainage ditch (flowing) ..... 01 Drainage ditch (stagnant) ..... 02 Permanent pit ..... 03 Disposed into river ..... 04 Disposed in side/back yard/garden ..... 05 Pond/fishpond/lake/pool ..... 07 Hole (without permanent lining) ..... 08 Paddy field/other field ..... 09 Sea, beach ..... 11 Other 95
KR22.	How does this household dispose of its garbage?	Disposed in trash can, collected by sanitation service ..... 01 Burned ..... 02 Disposed into river/creek/sewer ..... 03 Disposed in yard and let decompose ..... 04 Disposed in pit ..... 05 Forest, mountain ..... 07 Sea, lake, beach ..... 08 Paddy field/other field ..... 09 Other 95
KR23.	Do you store your perishable food in a refrigerator?	Yes ..... 1 No ..... 3 Don't have refrigerator 6
KR24.	What is the main kind of fire/stove used for cooking?	Electricity ..... 01 Gas ..... 02 Kerosene stove ..... 03 Firewood ..... 04 Charcoal ..... 05 Do not cook ..... 07 Other 95
KR24a.	Does this household have a television?	Yes ..... 1 No 3
KR24b.	Since 2007, has this household renovated/had major repair done on the house ? **1. Yes, because of disaster** **2. Yes, renovated** **3. No**	1. Built a new house ..... 1 2 3 2. Built a new room ..... 1 2 3 3. Installed a new roof ..... 1 2 3 4. Installed/replaced the floortiles/terrazzo ..... 1 2 3 5. Painted the wholehouse ..... 1 2 3 6. Built a new kitchen or expanded the kitchen ..... 1 2 3 7. Replaced/installed plumbing system ..... 1 2 3 8. Installed sewerage/sanitation system. ..... 1 2 3 9. Increased electricity voltage 1 2 3

KR24c.	How much did you spend for the renovation ?	⌊⌊⌊⌋⌋⌋ , ⌊⌊⌊⌋⌋⌋ , ⌊⌊⌊⌋⌋⌋ ..... 1 NO RENOVATION/MAJOR REPAIR ..... 6 DON'T KNOW 8
KR25.	What language is most often used in this household, other than Indonesian?	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 96 95 .....
KR26.	Does this household have a Health Card (*Kartu Sehat)*, ASKESKIN, JAMKESMAS, BPJS or JKN card?	No ..... 3➔**KR27** Yes 1
KR26a.	Who in the household has a Health Card/ASKESKIN, JAMKESMAS, BPJS, or JKN card?	All household members ..... 1 Only head of household ..... 2 ⌊⌊⌋⌋ persons 3
KR27.	Does this household participate in the Health Fund (*Program Dana Sehat)*?	Yes ..... 1 No ..... 3 No program 6
KR27a.	Does this household have or ever utilized "letter of poor" (*Surat Keterangan Tidak Mampu*)?	Yes ..... 1 No ..... 3 DON'T KNOW 8
KR27b.	Did this household have PKPS BBM BLT/BLSM card?	Yes ..... 1 No ..... 3 DON'T KNOW 8
KR27d.	Does this household get BSM (Help Poor Students) ?	Yes ..... 1 No ..... 3 DON'T KNOW 8
KR27e.	Does this household get JSLU Program (Elderly Social Security)?	Yes ..... 1 No ..... 3 DON'T KNOW 8

CODE for KR25

Javanese 01	Minang 09	Lahat 17
Sundanese 02	Banjar 10	Other South Sumatera 18
Balinese 03	Bima-Dompu 11	Betawi 19
Batak 04	Makassar 12	Lampung 20
Bugis 05	Nias 13	NONE 96
Chinese 06	Palembang 14	Other 95
Maduranese 07	Sumbawa 15	
Sasak 08	Toraja 16	

KR27f.	Does this household get Social Security Disability Program?	Yes.....1 No .....3 DON'T KNOW.....8
KR27g.	Does this household get Child Welfare Program (PKSA)?	Yes.....1 No .....3 DON'T KNOW.....8
KR27h.	Does this household get Compensation Program help for troubled youth?	Yes.....1 No .....3 DON'T KNOW.....8
KR27i.	Does this household get Social Security card / KPS?	Yes.....1 No .....3 DON'T KNOW.....8
KR27j.	Does household members in this household get the following assurance from BPJS (Sosial Security Agency)? **CAPI PRELOAD ROSTER**	
	1. Health insurance	3. No 1. Yes AR00 ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋
	2. Accident insurance	3. No 1. Yes AR00 ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋
	3. Old age pension	3. No 1. Yes AR00 ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋
	4. Death benefit	3. No 1. Yes AR00 ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋
KR27k.	Does this household have a *Kartu Keluarga* (Family Card)	Yes.....1 No 3

SECTION UT (FARM BUSINESS)

Now we would like to ask about any farm business that might be owned by this household.

UT00a.	Do you have land for farming?	No ..... 3➔**UT01** Yes 1
UT00b.	What size is the land for farming that you own?	1. ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋ Hectare 2. ⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Square meter 8. DON'T KNOW
UT00c.	How many plots of land farm do you have?	⌊_⌋⌊_⌋ plots
UT00d.	What is the size of the largest plot of your farm land?	1. ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋ Hectare 2. ⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Square meter 8. DON'T KNOW
UT00e.	What is the legal status of ownership of the largest plot of your farm land?	No document ..... 6 ➔**UT00g** Patok D ..... 1 ➔**UT00g** Letter C ..... 2 ➔**UT00g** Other ..... 5 ➔**UT00g** Title of ownership (*Sertifikat HakMilik*)..... 3
UT00f.	When did you obtain the title/document?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ Month / Year 8. DON"T KNOW
UT00g.	How much of *Bengkok* land do you have?	1. ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋ Hectare 2. ⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Square meter 6. N/A 8. DON'T KNOW
UT00h.	How much of the land/*Bengkok* land for farming is rented out?	1. ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋ Hectare 2. ⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Square meter 6. N/A 8. DON'T KNOW
UT01.	During the past 12 months, namely since the month of [...] one year ago, is there a householder who has worked in a farm business?	No .....3 ➔**UT01c** Yes.....1
UT01a.	What size is the farm land cultivated by you or members of the household in the last 12 months?	1. ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋ Hectare 2. ⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Square meter 6. N/A 8. DON'T KNOW
UT01b.	Out of the farm land cultivated in the last 12 months, what size is rented or share-cropped?	1. ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋ Hectare 2. ⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Square meter 6. N/A 8. DON'T KNOW
UT01e.	How much of the land cultivated is owned?	1. ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋ Hectare 2. ⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Square meter 6. N/A 8. DON'T KNOW

UT01f.	How much of the *Bengkok* land cultivated ?	1. ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋ Hectare 2. ⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Square meter 6. N/A 8. DON'T KNOW
UT01c.	**CAPI CHECK:**	**UT01=3 and UT00a=1.... 1 ➔ UT10** **UT01=3 and UT00a=3.... 2 ➔SECTION NT** **UT01=1 ..... 3**
UT05a.	In the last five years how many harvest of your main crops can you have in a normal year ?	⌊_⌋ times .....1 NOT APPLICABLE 6
UT07a.	What is the most valuable crop or livestock that the household farm produced for the market or for home consumption?	1. ⌊_⌋⌊_⌋ Other: ..... 8. DON'T KNOW
UT07b.	What is the next most valuable crop or livestock that the household farm provided?	1. ⌊_⌋⌊_⌋ Other: ..... 8. DON'T KNOW
UT07c.	Please list all other crops or livestock that the household farm produced. **CIRCLE ALL THAT APPLY**	A B C D E F G H I J K L M N O P Q R S T U A1 B1 W Y V .....
UT07c1	Do you or your household member use cell-phone for the farm business?	No .....3 Yes 1
UT07d.	**CAPI CHECK UT07a, UT07b, UT07c:**	**IF UT07a=90 OR UT07b=0 OR UT07c=Y.....1➔UT07xa** **IF UT07a≠90 AND UT07b≠90 AND UT07c≠Y .....3➔UT07aa**

UT07a AND UT07b Codes:		**UT07c Codes:**	
01. Cassava	14. Tobacco	A. Cassava	N. Tobacco
02. Other tuber	15. Rubber	B. Other tuber	O. Rubber
03. Groundnuts	16. Wood	C. Groundnuts	P. Wood
04. Cashews and other nuts	17. Chickens	D. Cashews and other nuts	Q. Chickens
05. Soybean	18. Fish	E. Soybean	R. Fish
06. Corn	19. Pigs	F. Corn	S. Pigs
07. Chili	20. Goats	G. Chili	T. Goats
08. Red Onion	21. Cattle	H. Red Onion	U. Cattle
09. Coconut	22. Other vegetables	I. Coconut	A1. Other vegetables
10. Bananas	23. Other fruits	J. Bananas	B1. Other fruits
11. Spice	96. NO OTHER CROP	K. Spice	W. NO OTHER CROP
12. Coffee	90. Rice	L. Coffee	Y. Rice
13. Sugarcane	95. Other	M. Sugarcane	V. Other

SECTION UT (FARM BUSINESS)

UT07xa.	How many harvest per season can you crop on the land you use to plant paddy?	⌊_⌋⌊_⌋ times
UT07xb.	**In the last 12 months, how many times did you harvest your paddy crop? (including crop failures)**	⌊_⌋⌊_⌋ **times** **If 0 ➔UT07aa**

INTERVIEWER NOTE: STARTING WITH THE MOST RECENT RICE CROP THE HOUSEHOLD HARVESTED IN THE LAST 12 MONTHS, COMPLETE ONE COLUMN FOR EACH RICE CROP.

CROP NUMBER (UT2TYPE)		MOST RECENT IN THE LAST 12 MONTHS
UT07e.	When was the paddy crop harvested?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 6. NOT HARVESTED Month / Year 8. DON'T KNOW
UT07f.	When was the paddy crop planted?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year
UT07g.	What was the area planted?	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ hectare 8. DON'T KNOW 2. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ square meter
UT07h.	What was the main source of water for the […] crop?	1. Rain 3. Pump/tube well 2. Irrigation canal 5. Others.....
UT07i.	What was the main variety of rice did you plant ?	⌊_⌋⌊_⌋ .....
UT07j.	What was the area you harvested?	6. NOT HARVESTED➔**UT07aa** 1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ hectare 2. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ square meter 8. DK
UT07k.	What was the area harvested by others?	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ hectare 6. NA 2. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ square meter 8. DON'T KNOW
UT07l.	What was the amount of the harvest?	1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ kg 1. Unhusked, unhulled rice (GKP)➔**UT07n** 2. Husked, unhulled rice (GKG) 8. DON'T KNOW
UT07m.	Approximately what was the equivalent amount of the harvest in terms of unhulled, unhusked rice (GKP)?	1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ kg GKP 8. DON'T KNOW
UT07n.	What was the market price of the harvest per kg of GKP?	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp/ kg GKP 8. DON'T KNOW
UT07o.	What was the value of harvest ?	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp 8. DON'T KNOW
UT07p.	Approximately what was the equivalent amount of the harvest in terms of milled rice?	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ kg rice 8. DON'T KNOW
UT07q.	What was the market price of the harvest per kg of rice at that time?	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp/ kg rice 8. DON'T KNOW
UT07r.	How much did you give up because of crop sharing to the owner of the land?	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ kg GKP 6. No share-cropping arrangement 8. DON'T KNOW

Code for UT07i

01. Cianjurkepala	03. Setra	05. Muncil	07. IR42	09. Black sticky rice (Ketanhitam)
02. Cianjurslyp	04. Saigon Bandung	06. IR64	08. White sticky rice (*Ketanputih*)	95. Others

SECTION UT (FARM BUSINESS)

UT07aa.	Do you or any of your household members engage in fishing (non-fishery)?	No .....3➔**UT07** Yes 1
UT07ab	Do you or any of your household member use a boat in the fishing activities?	No .....3➔**UT07ag** Yes 1
UT07ac	Do you or any of your household members own the boat used in fishing?	No .....3 Yes 1
UT07ad.	Type of boat used in fishing:	On-board powered boat > 100 GT.....1 On-board powered boat 30-100 GT.....2 On-board powered boat 5-30 GT .....3 On-board powered boat < 5 GT .....4 Offt-board powered boat.....5 Non-powered boat – small (*jukong*).....6 Non-powered boat – medium.....7 Non-powered boat - large 8
UT07ae	How many fishermen and crews are usually board on one boat?	⌊_⌊_⌋ people
UT07af.	How many fishing trips did you or your household member do in one week in [....]?	⌊_⌊_⌋ times
UT07ag	How much (in kg) isthe total catch in the last week?	⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ kg
UT07 ah.	In the last month, what is the percentage of the catch that are…	A. consumed during fishing ⌊_⌊_⌊_⌋ % B. shared with the other crew ⌊_⌊_⌊_⌋ % C. sold directly to consumer ⌊_⌊_⌊_⌋ % D. sold to dealer/distributor ⌊_⌊_⌊_⌋ % E. sold at Auction (*TPI*) ⌊_⌊_⌊_⌋ % F. stored to be processed. ⌊_⌊_⌊_⌋ %
UT07ai.	Do you or your household member use cell-phone for these fishing activities?	No ..... 3 Yes 1

UT07.	What is the approximate amount in rupiah of total production by the household from the farm business (including produce for own consumption or giving the others) during the past 12 month?	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp➔**UT08** 7. UNWILLING TO ANSWER 8. DON'T KNOW
UT07p.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 m, Rp 6 m, Rp 10 m CAPI randomizes entry points: Rp 4 m (2UP), Rp 6 m (1UP 1DOWN)
UT08.	What is the approximate amount in rupiah of total expenses spent by the household for the farm business during the past 12 months?	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp➔**UT09q** 7. UNWILLING TO ANSWER 8. DON'T KNOW
UT08p.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 m, Rp 6 m, Rp 10 m CAPI randomizes entry points: Rp 4 m (2UP), Rp 6 m (1UP 1DOWN)
UT09.	What is the approximate amount in rupiah of net profit generated by the farm business during the past 12 months?	1. **+**⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. ➔**UT09q** 3. **-**⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**UT09q** 7. UNWILLING TO ANSWER 8. DON'T KNOW
UT09p.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 m, Rp 6 m, Rp 10 m CAPI randomizes entry points: Rp 4 m (2UP), Rp 6 m (1UP 1DOWN)

SECTION UT (FARM BUSINESS)

Now we would like to raise some questions about crop loss that may affected this household's farm business in the last 12 months.

UT09q.	Did this household experienced crop loss in the past 12 months?	NO CROPS/NOT YET HARVESTED ..... 6➔**UT10** No ..... 3➔**UT10** Yes..... 1

CROP LOSS (UT3TYPE)	UT09r. Has this household experienced crop loss because of […] within the past 12 months?	UT09s. When did […] happen or start?	UT09t. What is the approximate cost of […]?
C1. Drought/lack of water	3. No ➔ **UT10** 1. Yes➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
C2. Flood	3. No ➔ **UT10** 1. Yes➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
C3. Pestilence/Rodents	3. No ➔ **UT10** 1. Yes➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
C4. Disease	3. No ➔ **UT10** 1. Yes➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
C5. Other	3. No ➔ **UT10** 1. Yes➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW Month / Year	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW

Now we would like to ask some questions about assets owned by this household that were used for farm business in the last 12 months.

TYPE OF ASSETS (UTTYPE)	UT10. Does the household farm business own [...]?	UT11. What is the total (market) value of[...]?	UT11p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	UT12. What is the total value in rupiah of any [...] purchased in the past 12 months?	UT13. What is the total value in rupiah of any [...] sold in the past 12 months?	UT14. What is the total income from the rent/lease/profit-sharing of [...] in the past 12 months?
A. Farm land	3. No➔**UT12** 1. Yes	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. ➔**UT12** 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 25 m, Rp 50 m, Rp 100 m CAPI randomizes entry points: Rp 25 m (2UP), Rp 50 m (1UP 1DOWN)	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW
D1. Poultry	3. No➔**UT12** 1. Yes	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 4 m, Rp 8 m, Rp 15 m CAPI randomizes entry points: Rp 4 m (2UP), Rp 8 m (1UP 1DOWN)	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW
D2. Livestock /fish pond	3. No➔**UT12** 1. Yes	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 4 m, Rp 8 m, Rp 15 m CAPI randomizes entry points: Rp 4 m (2UP), Rp 8 m (1UP 1DOWN)	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW
B. Hard stem plants (coconut, coffee, cloves, rubber, etc.)	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. ➔**ROW C** 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 10 m, Rp 20 m, Rp 40 m CAPI randomizes entry points: Rp 10 m (2UP), Rp 20 m (1UP 1DOWN)			

SECTION UT (FARM BUSINESS)

TYPE OF ASSETS (UTTYPE)	UT10. Does the household farm business own [...]?	UT11. What is the total (market) value of[...]?	UT11p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	UT12. What is the total value in rupiah of any [...] purchased in the past 12 months?	UT13. What is the total value in rupiah of any [...] sold in the past 12 months?	UT14. What is the total income from the rent/lease/profit-sharing of [...] in the past 12 months?
C. House or building used for the farm business	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW E** 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)			
E. Vehicles (bicycles, motor bikes, car/truck and water vehicles)	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 5 m, Rp 10 m, Rp 25 m CAPI randomizes entry points: Rp 5 m (2UP), Rp 10 m (1UP 1DOWN)			
E. Vehicles (bicycles, motor bikes, car/truck and water vehicles)	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 5 m, Rp 10 m, Rp 25 m CAPI randomizes entry points: Rp 5 m (2UP), Rp 10 m (1UP 1DOWN)			
F. Tractor	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 5 m, Rp 10 m, Rp 25 m CAPI randomizes entry points: Rp 5 m (2UP), Rp 10 m (1UP 1DOWN)			
F1. Irrigation equipment (pump, tube well, etc.)	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 5 m, Rp 10 m, Rp 25 m CAPI randomizes entry points: Rp 5 m (2UP), Rp 10 m (1UP 1DOWN)			
G. Heavy equipments (like farming machines, generator, etc.)	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 5 m, Rp 10 m, Rp 25 m CAPI randomizes entry points: Rp 5 m (2UP), Rp 10 m (1UP 1DOWN)			
H. Small tools like saws, axes, machetes, forks, plows, hoes, etc.)	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 4 m, Rp 8 m, Rp 15 m CAPI randomizes entry points: Rp 4 m (2UP), Rp 8 m (1UP 1DOWN)			
H1 Fishing equipmen (gill net, beach seine, long lines, buoy)	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 4 m, Rp 8 m, Rp 15 m CAPI randomizes entry points: Rp 4 m (2UP), Rp 8 m (1UP 1DOWN)			
I. Other (other than A-H1):	1. Yes ➔ 3. No ➔	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	Breakpoints: Rp 4 m, Rp 8 m, Rp 15 m CAPI randomizes entry points: Rp 4 m (2UP), Rp 8 m (1UP 1DOWN)			
J. Other thanFarm land (A) , Poultry&Livestock /fish pond (D1, D2)			Breakpoints: Rp 5 m, Rp 10 m, Rp 25 m CAPI randomizes entry points: Rp 5 m (2UP), Rp 10 m (1UP 1DOWN)	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW

SECTION NT (NON-FARM BUSINESS)

Now we would like to ask about any non-farm business that might be owned by this household.

NT01.	During the past 12 months, namely since the month of [...] in 19[…], is there a householder who has worked in a family-owned, non-farm business like trade/retailing or been self-employed in a non-farm enterprise?	No..... 3 --> **SECTION HR** Yes 1
NT01a.	How many non-farm businesses did you or members of the household operate at any time in the last 12 months?	1. ⌊_⌊_⌋ Types

INTERVIEWER NOTE: COMPLETE ONE COLUMN FOR EACH BUSINESS (UP TO 2 BUSINESSES) REPORTED IN NT01a. STARTING WITH THE MOST IMPORTANT BUSINESS THAT WAS OPERATED IN THE LAST YEAR.

		1. Business I	2. Business II
NT01b.	What type of business was this?	_____ _____	_____
NT02.	Is this business owned entirely by this household?	Yes..... 1 ➔ **NT05** No 3	Yes..... 1 ➔ **NT05** No 3
NT03.	What is the percentage share of this business owned by householders of this household?	⌊_⌊_⌋ Percentage	⌊_⌊_⌋ Percentage
NT04.	Who outside this household owns the business? **(CIRCLE ALL THAT APPLY)**	B C D E F G I J K L M P Q R U V	B C D E F G I J K L M P Q R U V .....
NT05.	Which householders own the business? **(CIRCLE ALL THAT APPLY)**	A B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V .....
NT05a.	Which household members were primarily responsible for this business? **RECORD THE NAME AND AR00 FOR UP TO TWO PERSONS**	A._____ ⌊_⌊_⌋ B._____ ⌊_⌊_⌋	A. _____ ⌊_⌊_⌋ B. _____ ⌊_⌊_⌋
NT05b.	Is/was this business operated outside your home?	Yes, all outside.....1 Yes, partially outside..... 2 No 3	Yes, all outside.....1 Yes, partially outside..... 2 No 3
NT05e.	Do you or any of your household members use cell-phone for this business?	Yes..... 1 No 3	Yes..... 1 No 3

NT04 and NT05 Codes:

A.	Respondent	G.	Respondent's brother/sister-in-law	M.	Cousin
B.	Respondent's wife/husband	I.	Grandchild	P.	Non family
C.	Respondent's child/child-in-law	J.	Grandparent	Q.	Step/adopted child
D.	Respondent's parents	K.	Uncle/aunt	R.	Family of spouse
E.	Respondent's parents-in-law	L.	Nephew/niece	U.	Ex spouse
F.	Respondent's sibling			V.	Other

NT05d Codes

A.	Building permit(*IMB*)	F.	Work safety permit
B.	Permit to own/start business	G.	Neighborhood permit (*HO*)
C.	Business registration	W.	NO PERMIT
D.	Commerce permit	V.	Others
E,	Electricity request for business		

SECTION NT (NON-FARM BUSINESS)

		1. Business I	2. Business II
NT05f.	Do you or you any of your household members use the internet for this business?	Yes ..... 1 No 3	Yes..... 1 No 3
NT05c.	In what field of work is this business?	95. ⌊_⌋⌊_⌋	95. ⌊_⌋⌊_⌋
NT15.	When did this business begin/start?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DK Month / Year	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DK Month / Year
NT16.	How many household members/unpaid workers, worked when the business started?	⌊_⌋⌊_⌋ Persons ..... 1 DON'T KNOW 8	⌊_⌋⌊_⌋ Persons ..... 1 DON'T KNOW 8
NT17.	How many paid workers, worked when the business started?	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Persons ..... 1 DON'T KNOW 8	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Persons ..... 1 DON'T KNOW 8
NT17a.	When this business first started, how much was the start-up capital?	NONE..... 6➔**NT18** ⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ Rp..... 1 DON'T KNOW 8	NONE..... 6➔**NT18** ⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ Rp ..... 1 DON'T KNOW 8
NT17b.	Where did the capital come from?	Household saving .....A Family .....B Other owners/partners .....C Loans from bank .....D Loans from others .....E	Household saving .....A Family .....B Other owners/partners .....C Loans from bank .....D Loans from others .....E
NT18.	Is the business still producing?	Yes..... 1➔**NT22** No 3	Yes ..... 1➔**NT22** No 3
NT19.	When did this business close/stop producing?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
NT20.	In the month before the month in which this business closed, how many household members/unpaid workers worked in this business?	⌊_⌋⌊_⌋ Persons..... 1 DON'T KNOW..... 8	⌊_⌋⌊_⌋ Persons..... 1 DON'T KNOW 8
NT21.	In the month before the month in which this business closed, how many paid workers, worked for this business?	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Persons..... 1 DON'T KNOW..... 8 ➔**NT09**	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Persons..... 1 DON'T KNOW..... 8 ➔**NT09**
NT22.	How many household members/unpaid workers participated in this business' operations in the last four weeks?	⌊_⌋⌊_⌋ Persons..... 1 DON'T KNOW..... 8	⌊_⌋⌊_⌋ Persons..... 1 DON'T KNOW 8
NT23.	How many paid workers, worked for this business in the last four weeks?	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Persons ..... 1 DON'T KNOW..... 8	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Persons ..... 1 DON'T KNOW 8

CODES FOR NT05c

01. Agriculture, Forestry, Fishery
02. Mining and Quarrying
04. Electricity, Gas and Water
05. Construction
07. Transportation and communication
08. Finance, Insurance, Real Estate
21. Restaurants, food sales
22. Industry: Food processing
23. Industry: Clothing
24. Industry: Other
25. Sales: Non food
31. Services: Government
32. Services : Teacher
33. Services : Professionals
34. Services : Transportation (becak, ojek, taxi)
35. Services : Other (tailor, hairdressing)
95. Other

SECTION NT (NON-FARM BUSINESS)

		1. Business I	2. Business II	CAPI randomizes the order in which Profit measure 1 and 2 are asked.
NT09.	What is the approximate amount in rupiah of net profit generated by the business during the past 12 months?	1. **+** ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp➔**NT09b** 3. **-** ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp➔**NT09b** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. **+** ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp➔**NT09b** 3. **-** ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp➔**NT09b** 7. UNWILLING TO ANSWER 8. DON'T KNOW	**Profit measure 1**
NT07.	What is the approximate amount in rupiah of total revenue received by the household from the business (including produce for own consumption) during the past 12 months?	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT08** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT08** 7. UNWILLING TO ANSWER 8. DON'T KNOW	
NT07a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	
NT08.	What was the approximate amount in rupiah of total expenses spent by the household for the business during the past 12 months?	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT09b** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT09b** 7. UNWILLING TO ANSWER 8. DON'T KNOW	
NT08a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	
NT09b.	What is the approximate amount in rupiah of products from your business consumed by the household?	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT09d** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT09d** 7. UNWILLING TO ANSWER 8. DON'T KNOW	**Profit measure 2**
NT09c.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	
NT09d.	What is the approximate amount of money out of the business enterprise that you used for the household?	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT09f** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT09f** 7. UNWILLING TO ANSWER 8. DON'T KNOW	
NT09e.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	
NT09f.	What was the approximate amount of money left over (money or saving)?	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT10** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔**NT10** 7. UNWILLING TO ANSWER 8. DON'T KNOW	
NT09g.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP) OR Rp 6 millions (1UP 1DOWN)	

SECTION NT (NON-FARM BUSINESS)

Now, we would like to ask your HH about assets that are being used for non-farm business only.

	1. Business I	2. Business II
NT10. Does this household own the following assets for this non-farm business? **INTERVIEWER'S NOTE:** **IF YES, ASK:** HOW MUCH IS THE VALUE OF […]		
A. Land	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW B** 3. NONE **➔ROW B** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW B** 3. NONE **➔ROW B** 7. UNWILLING TO ANSWER 8. DON'T KNOW
NT10Ap. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 25 m, Rp 50 m, Rp 100 m CAPI randomizes entry points: Rp 25 m (2UP), Rp 50 m (1UP 1DOWN)	Breakpoints: Rp 25 m, Rp 50 m, Rp 100 m CAPI randomizes entry points: Rp 25 m (2UP), Rp 50 m (1UP 1DOWN)
B. Building	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW C1** 3. NONE **➔ROW C1** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW C1** 3. NONE **➔ROW C1** 7. UNWILLING TO ANSWER 8. DON'T KNOW
NT10Bp. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)
C1. Four-wheel motor vehicles	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW C4** 3. NONE **➔ROW C4** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW C4** 3. NONE **➔ROW C4** 7. UNWILLING TO ANSWER 8. DON'T KNOW
NT10C1p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)
C4. Other vehicles	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW H** 3. NONE **➔ROW H** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔ROW H** 3. NONE **➔ROW H** 7. UNWILLING TO ANSWER 8. DON'T KNOW
NT10C4p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)
H. Other non-farm equipment	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔NT24** 3. NONE **➔NT24** 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. **➔NT24** 3. NONE **➔NT24** 7. UNWILLING TO ANSWER 8. DON'T KNOW
NT10H. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)	Breakpoints: Rp 50 m, Rp 100 m, Rp 200 m CAPI randomizes entry points: Rp 50 m (2UP), Rp 100 m (1UP 1DOWN)

SECTION NT (NON-FARM BUSINESS)

Now we would like to ask about procurement, sale and lease/profit sharing of the equipment used for non-farm businesses in the last 12 months.

		1. Business I	2. Business II
NT24.	What rupiah was the total procurement of goods used in business in the last 12 months?	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW
NT25.	What rupiah was the total sale of the business in the last 12 months?	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW
NT26.	What rupiah was the total revenue of rents or shared profit of the goods used in the business in the last 12 months?	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW **➔NT01b COLUMN B / SECTION HR**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW **➔NT01b COLUMN C / SECTION HR**

SECTION HR (HOUSEHOLD ASSETS)

Next, we would like to know about assets owned by you or by members of the household that are not used for a farm or non-farm business. (Do not report assets that are used only or mostly for a business).

INTERVIEWER CHECK: IF YOU HAVE AN ASSET THAT IS USED MOSTLY FOR A BUSINESS (FARM OR NON-FARM) BUT WAS NOT ALREADY INCLUDED IN UT OR NT, GO BACK TO UT OR NT AND CORRECT IT.

TYPE OF ASSETS (HRTYPE)	HR01. Do you or does any other member of the household own [...]?	HR02. What is the total value of [...] at present?	HR05. What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	HR06. Is the entire [...] owned by the householders?	HR07. What is the percentage share of [...] that is owned by the house-holders?	HR08. Who outside the household also owns [...]? (CIRCLE ALL THAT APPLY)	HR10. Which householders own [...]? (CIRCLE ALL THAT APPLY)	HR11. How many householders own [...]? (REFER TO ANSWER OF HR10)	HR12. ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B. You told me that members of this household own ____% (RESPONSE FROM HR06/ HR07) of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
A. House and land occupied by this household	3. No 1. Yes➔ ➔ **ROW B**	1. ⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋ Rp. ➔ 7. UNWILLING TO ANSWER➔ 8. DON'T KNOW➔	1. ⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌊_⌋ Persons **IF 01➔ROW B**	1. A ⌊_⌊_⌋ % B ⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 50 millions, Rp 100 millions, Rp 200 millions CAPI randomizes entry points: Rp 50 millions (2UP), Rp 100 millions (1UP 1DOWN) ➔**HR05 ROW A**							
B. Other house/ building (including land)	3. No 1. Yes➔ ➔ **ROW C**	1. ⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋ Rp. ➔ 7. UNWILLING TO ANSWER➔ 8. DON'T KNOW➔	1. ⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌊_⌋ Persons **IF 01➔ROW C**	1. A ⌊_⌊_⌋ % B ⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKET							
		Breakpoints: Rp 50 millions, Rp 100 millions, Rp 200 millions CAPI randomizes entry points: Rp 50 millions (2UP), Rp 100 millions (1UP 1DOWN) ➔**HR05 ROW B**							

HR08 AND HR10

A. Respondent	E. Respondent's parents-in-law	J. Grandparents	P. Non family	V. Others
B. Respondent's wife/husband	F. Respondent's sibling	K. Uncle/aunt	Q. Step/adopted child	
C. Respondent's biological and in-law	G. Respondent's brother/sister-in-law	L. Nephew/niece	R. Family of spouse	
D. Respondent's parents	I. Respondent's grandchild/great grandchild	M. Cousin	U. Ex spouse	

HR12:
A. Respondent
B. Respondent's spouse
IF A AND B ARE THE ONLY OWNERS IN HOUSEHOLD, THEIR ANSWERS SHOULD SUM TO 100%.
IF MORE HH MEMBERS THAN A AND B ARE OWNERS, THE ANSWERS OF A AND B SHOULD SUM TO LESS THAN 100%.

SECTION HR (HOUSEHOLD ASSETS)

TYPE OF ASSETS (HRTYPE)	HR01. Do you or does any other member of the household own [...]?	HR02. What is the total value of [...] at present?	HR05. What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	HR06. Is the entire [...] owned by the householders?	HR07. What is the percentage share of [...] that is owned by the house-holders?	HR08. Who outside the household also owns [...]? (CIRCLE ALL THAT APPLY)	HR10. Which householders own [...]? (CIRCLE ALL THAT APPLY)	HR11. How many householders own [...]? (REFER TO ANSWER OF HR10)	HR12. ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B. You told me that members of this household own ____% (RESPONSE FROM HR06/ HR07) of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
C. Land (not used for farm nonfarm)	3. No 1. Yes➔ ⬇ **ROW D1**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔ 7. UNWILLING TO ANSWER⬇ 8. DON'T KNOW⬇	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌊_⌋ Persons **IF 01➔ROW D1**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 25 millions, Rp 50 millions, Rp 100 millions CAPI randomizes entry points: Rp 25 millions (2UP), Rp 50 millions (1UP 1DOWN) **➔HR05 ROW C**							
D1. Poultry	3. No 1. Yes➔ ⬇ **ROW D2**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌊_⌋ Persons **IF 01➔ROW D2**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 4 millions, Rp 8 millions, Rp 15 millions CAPI randomizes entry points: Rp 4 millions (2UP), Rp 8 millions (1UP 1DOWN) **➔HR05 ROW D1**							
D2. Livestock/ fishpond	3. No 1. Yes➔ ⬇ **ROW D3**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌊_⌋ Persons **IF 01➔ROW D3**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 4 millions, Rp 8 millions, Rp 15 millions CAPI randomizes entry points: Rp 4 millions (2UP), Rp 8 millions (1UP 1DOWN) **➔HR05 ROW D2**							

SECTION HR (HOUSEHOLD ASSETS)

	HR01.	HR02.	HR05.	HR06.	HR07.	HR08.	HR10.	HR11.	HR12.
TYPE OF ASSETS **(HRTYPE)**	Do you or does any other member of the household own [...]?	What is the total value of [...] at present?	What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	Is the entire [...] owned by the householders?	What is the percentage share of [...] that is owned by the house-holders?	Who outside the household also owns [...]? **(CIRCLE ALL THAT APPLY)**	Which householders own [...]? **(CIRCLE ALL THAT APPLY)**	How many householders own [...]? **(REFER TO ANSWER OF HR10)**	**ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B.** You told me that members of this household own ____% **(RESPONSE FROM HR06/ HR07)** of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
D3. Hard stem plant that not used for farm or non-farm business	3. No 1. Yes➔ ⇩ **ROW E**	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V ……	A B C D E F G I J K L M P Q R U V ……	⌊_⌊_⌋ Persons **IF 01➔ROW E**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 10 millions, Rp 20 millions, Rp 40 millions; CAPI randomizes entry points: Rp 10 millions (2UP), Rp 20 millions (1UP 1DOWN) **➔HR05 ROW D3**							
E. Vehicles (cars, boats, bicycles, motorbikes)	3. No 1. Yes➔ ⇩ **ROW F**	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V ……	A B C D E F G I J K L M P Q R U V ……	⌊_⌊_⌋ Persons **IF 01➔ROW F**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 5 millions, Rp 50 millions, Rp 10 millions; CAPI randomizes entry points: Rp 5 millions (2UP), Rp 10 millions (1UP 1DOWN) **➔HR05 ROW E**							
F. Household appliances (radio, tape recorder, tv, fridge, sewing or washing machine, VCD player, HP, etc.)	3. No 1. Yes➔ ⇩ **ROW G**	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V ……	A B C D E F G I J K L M P Q R U V ……	⌊_⌊_⌋ Persons **IF 01➔ROW G**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 4 millions, Rp 8 millions, Rp 15 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 8 millions (1UP 1DOWN) **➔HR05 ROW E**							

SECTION HR (HOUSEHOLD ASSETS)

TYPE OF ASSETS (HRTYPE)	HR01. Do you or does any other member of the household own [...]?	HR02. What is the total value of [...] at present?	HR05. What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	HR06. Is the entire [...] owned by the householders?	HR07. What is the percentage share of [...] that is owned by the house-holders?	HR08. Who outside the household also owns [...]? (CIRCLE ALL THAT APPLY)	HR10. Which householders own [...]? (CIRCLE ALL THAT APPLY)	HR11. How many householders own [...]? (REFER TO ANSWER OF HR10)	HR12. **ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B.** You told me that members of this household own ____% **(RESPONSE FROM HR06/ HR07)** of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
G. Savings/ certificate of deposit/ stocks	3. No 1. Yes➔ ↓ **ROW H**	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊⌊⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊⌊⌋ Persons **IF 01➔ROW H**	1. A ⌊⌊⌋ % B ⌊⌊⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 4 millions, Rp 8 millions, Rp 15 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 8 millions (1UP 1DOWN) **➔HR05 ROW G**							
H. Receivables	3. No 1. Yes➔ ↓ **ROW J**	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊⌊⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊⌊⌋ Persons **IF 01➔ROW J**	1. A ⌊⌊⌋ % B ⌊⌊⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 5 millions, Rp 10 millions, Rp 25 millions; CAPI randomizes entry points: Rp 5 millions (2UP), Rp 10 millions (1UP 1DOWN) **➔HR05 ROW G**							
J. Jewelry	3. No 1. Yes➔ ↓ **ROW K1**	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW		1. Yes ➔**HR10** 3. No	⌊⌊⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊⌊⌋ Persons **IF 01➔ROW K1**	1. A ⌊⌊⌋ % B ⌊⌊⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp4 millions, Rp 6 millions, Rp 10 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN) **➔HR06 ROW J**							

SECTION HR (HOUSEHOLD ASSETS)

TYPE OF ASSETS (HRTYPE)	HR01. Do you or does any other member of the household own [...]?	HR02. What is the total value of [...] at present?	HR05. What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	HR06. Is the entire [...] owned by the householders?	HR07. What is the percentage share of [...] that is owned by the house-holders?	HR08. Who outside the household also owns [...]? (CIRCLE ALL THAT APPLY)	HR10. Which householders own [...]? (CIRCLE ALL THAT APPLY)	HR11. How many householders own [...]? (REFER TO ANSWER OF HR10)	HR12. **ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B.** You told me that members of this household own ____% **(RESPONSE FROM HR06/ HR07)** of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
K1. Household Furniture and Utensils	3. No 1. Yes➔ ↓ **ROW K2**	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW		1. Yes ➔**HR10** 3. No	⌊_⌋⌊_⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌋⌊_⌋ Persons **IF 01➔ROW K2**	1. A ⌊_⌋⌊_⌋ % B ⌊_⌋⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp4 millions, Rp 6 millions, Rp 10 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN) **➔HR06 ROW K1**							
K2. Other assets	3. No 1. Yes➔ ↓ **HR16**	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌋⌊_⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌋⌊_⌋ Persons **IF 01➔HR16**	1. A ⌊_⌋⌊_⌋ % B ⌊_⌋⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp4 millions, Rp 6 millions, Rp 10 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN) **➔HR06 ROW K2**							

HR08 AND HR10

A. Respondent	E. Respondent's parents-in-law	J. Grandparents	P. Non family	V. Others .....
B. Respondent's wife/husband	F. Respondent's sibling	K. Uncle/aunt	Q. Step/adopted child	
C. Respondent's biological and in-law	G. Respondent's brother/sister-in-law	L. Nephew/niece	R. Family of spouse	
D. Respondent's parents	I. Respondent's grandchild/great grandchild	M. Cousin	U. Ex spouse	

HR12:
A. Respondent
B. Respondent's spouse
IF A AND B ARE THE ONLY OWNERS IN HOUSEHOLD, THEIR ANSWERS SHOULD SUM TO 100%.
IF MORE HH MEMBERS THAN A AND B ARE OWNERS, THE ANSWERS OF A AND B SHOULD SUM TO LESS THAN 100%.

SECTION HR (HOUSEHOLD ASSETS)

TYPE OF ASSETS (HR2TYPE)	HR16. What is/was the total value in rupiah of any […] purchased in the past 12 months?	HR17. What is the total value of any […] sold in the past 12 months?
A. House occupied by this household	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO SALES 7. UNWILLING TO ANSWER 8. DON'T KNOW
B. Other house/building	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO SALES 7. UNWILLING TO ANSWER 8. DON'T KNOW
C. Land (not used for farm or non-farm business)	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO SALES 7. UNWILLING TO ANSWER 8. DON'T KNOW
E. Vehicles (cars, boats, bicycles, motorbikes)	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO SALES 7. UNWILLING TO ANSWER 8. DON'T KNOW
J. Jewelry	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW
V. Other assets, not used for farm or non-farm business:	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW

SECTION HI (NONLABOR INCOME)

Next we would like to ask about income received that all household members have received from other sources during the past 12 months.

SOURCE OF INCOME (HI2TYPE)	HI14. What is the total income you received from [...] during the past 12 months?		
A. Pension/retirement funds	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW
B1. Government scholarship (cash).....	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW
B2. Private scholarship (cash)	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW
C. Insurance Money	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW
D1. Winnings/Lottery (cash).....	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW

SECTION ND (NATURAL DISASTER)

Now we would like to ask about natural and disaster that your household may have experienced in the last 5 years.

ND01.	In the last 5 years, was there any natural or other disaster (including civil strife) in the area where you live? If yes, what type of disasters?	**W➔**ND02a A B C D E F G H I J S
ND02.	Did any of the disaster was severe enough to cause death or major injuries of a household member, cause direct financial loss to the household, or cause household member to relocate?	No.....3 Yes 1
ND02a.	In the last 5 years, if these households have experienced the things that cause economic disruption?	K L M N O Q R W
ND03.	**INTERVIEWER CHECK ND01 , ND02 AND ND02a: FILL IN THE NUMBER OF THE TYPE OF DISASTERS EXPERIENCED BY THE HOUSEHOLD IN ND01 AND FIT TO CONDITIONS IN ND02. ASK IF THERE MORE THAN ONE DISASTER IN THE SAME TIME, WRITE THE WORST ONE.**	⌊⌋ **COLUMN IF ND03=0 ➔ SECTION BH**

INTERVIEWER NOTE: FILL OUT THE COLUMN ACCORDING TO THE DISASTER CIRCLED IN ND01. ONE COLUMN SHOULD ONLY BE FILLED OUT FOR ONE TYPE OF DISASTER. MAXIMUM 4 COLUMNS.

	TYPE OF DISASTER? NDTYPE	**1.** ⌊⌋ _____	**2.** ⌊⌋ _____
ND04.	How many times has this household experienced […] in the last 5 years?	⌊⌋⌋⌋ times	⌊⌋⌋⌋ times
ND05.	When was the most severe […] in the last 5 years occurred?	⌊⌋⌋ / ⌊⌋⌋⌋⌋ Month Year	⌊⌋⌋ / ⌊⌋⌋⌋⌋ Month Year
ND06.	Beside that disaster, what was the other disaster occurred at that time?	A B C D E F G H I J S W K L M N O Q R	A B C D E F G H I J S W K L M N O Q R
ND07.	How much of the household business assets (farm and non-farm) were lost because of […]?	1. ⌊⌋⌋⌋, ⌊⌋⌋⌋, ⌊⌋⌋⌋ Rp➔**ND09** 6. NO HH BUSINESS ➔**ND09** 7. REFUSED TO ANSWER 8. DON'T KNOW	1. ⌊⌋⌋⌋, ⌊⌋⌋⌋, ⌊⌋⌋⌋ Rp➔**ND09** 6. NO HH BUSINESS ➔**ND09** 7. REFUSED TO ANSWER 8. DON'T KNOW
ND08.	Was it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN)
ND09.	How much of the non-business assets of the household that were lost because of […]?	1. ⌊⌋⌋⌋, ⌊⌋⌋⌋, ⌊⌋⌋⌋ Rp➔**ND10a** 7. REFUSED TO ANSWER 8. DON'T KNOW	1. ⌊⌋⌋⌋, ⌊⌋⌋⌋, ⌊⌋⌋⌋ Rp➔**ND10a** 7. REFUSED TO ANSWER 8. DON'T KNOW
ND10.	Was it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN)	Breakpoints: Rp 4 millions, Rp 6 millions, Rp 10 millions CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN)
ND10a	CAPI CHECK: IF THE ANSWER IN NDTYPE = K, L, M, N, O, Q, R?	No .....3 ➔ND11 Yes .....1➔Next Column/BH	No.....3 ➔ND11 Yes 1➔Next Column/BH

KODE ND01, ND02a, ND06

A.	Flood	F.	Tsunami	K.	The death of Head of Household / main breadwinner
B.	Landslide/mudslide	G.	Windstorm	L.	Other Household Member Deaths
C.	Mudflow	H.	Forest fire	M.	Serious illness suffered by KRT / main breadwinner who require hospital care or treatment of Periodical.
D.	Volcanic eruption	I.	Fire	N.	Suffered Serious illnesses that require treatment or hospital care Periodic Treatment
E.	Earthquake	J.	Civil Strife	O.	Job loss or business failure experienced by Household Members
				Q.	failed Harvests
				R.	Reduction in income due to crop failure or a decrease in production rate
				S.	drought
				W.	NONE

SECTION ND (NATURAL DISASTER)

	TYPE OF DISASTER? NDTYPE	1. ⌊⌋ _____	2. ⌊⌋ _____
ND11.	Was any member of the household died/killed or lost because of […]	6. No One 1. ⌊⌋⌊⌋⌊⌋ household members	6. No One 1. ⌊⌋⌊⌋⌊⌋ household members
ND12.	Did any member of the household suffer serious injury or illness because of […]	6. No One 1. ⌊⌋⌊⌋⌊⌋ household members	6. No One 1. ⌊⌋⌊⌋⌊⌋ household members
ND13.	What was the out of pocket medical cost and/or funeral cost that this household had to pay?	⌊⌋⌊⌋⌊⌋, ⌊⌋⌊⌋⌊⌋, ⌊⌋⌊⌋⌊⌋Rp	⌊⌋⌊⌋⌊⌋, ⌊⌋⌊⌋⌊⌋, ⌊⌋⌊⌋⌊⌋Rp
ND14.	Was the house where you were living at the time the […] disaster damaged or destroyed?	1. Not damaged ➔ **ND16** 2. Lightly damaged 3. Heavily damaged 4. Destroyed	1. Not damaged ➔ **ND16** 2. Lightly damaged 3. Heavily damaged 4. Destroyed
ND15.	Did you repair or rebuild your house?	No ..... 3 Yes..... 1	No.....3 Yes 1
ND16.	Did you receive any assistance from government and non-government organizations? (exclude family and friends) If yes, from whom?	W ➔**ND18** A B C D E F G H	W ➔**ND18** A B C D E F G H
ND17.	What was the amount the assistance you received?	⌊⌋⌊⌋⌊⌋, ⌊⌋⌊⌋⌊⌋, ⌊⌋⌊⌋⌊⌋Rp	⌊⌋⌊⌋⌊⌋, ⌊⌋⌊⌋⌊⌋, ⌊⌋⌊⌋⌊⌋Rp
ND18.	After the […] disaster, did any member of your household spend any time living without housing , or in temporary housing?	No.....3➔**ND04 NEXT COL /SECTION BH** Yes 1	No.....3➔**ND04 NEXT COL /SECTION BH** Yes..... 1
ND19.	Was this place a […]?	A B C D E F G H I	A B C D E F G H I
ND20.	For how long did the household member(s) live in the temporary housing? **IF THERE ARE MULTIPLE HHM AND THE LENGTH OF TIME LIVING IN TEMPORARY HOUSING ARE DIFFERENT, ASK ABOUT THE ONE WHO LIVED IN TEMPORARY HOUSING FOR THE LONGEST TIME**	1. ⌊⌋⌊⌋ 01. Days 02. Weeks 03. Months 04. Years 6. Still living there	1. ⌊⌋⌊⌋ 01. Days 02. Weeks 03. Months 04. Years 6. Still living there
ND21	Have you returned or do you expect to return?	1. Yes 2. No, but plan to return 3. No, do not plan to return ➔ **ND04 KOLOM B / SECTION BH**	1. Yes 2. No, but plan to return 3. No, do not plan to return ➔ **SECTION BH**

KODE ND16:

A.	Central government	F.	Private donors
B.	Regional government	G.	Firms/corporations
C.	Religious groups	H.	Foreign government/NGO/donors
D.	Political organizations	W.	Not received assistance
E.	Other domestic NGOs		

KODE ND19:

A.	Private home-family	F.	Camp site
B.	Private home-friend or neighbor	G.	Barracks
C.	Private home-Other	H.	Tent outside the camp site
D.	Place of worship	I.	Open space
E.	Offices/schools		

SECTION BH (BORROWING)

Now we would like to ask you about your loans from non-family or friends in the last 12 months.

BH00.	Do you or any other household member know of a place where you can borrow money?	No.....3 Yes.....1
BH01.	What type of place is this? **(CIRCLE ALL THAT APPLY)**	A B C D E F G H I J K L M N O Y V.....
BH02.	Did you or other member of the household try to borrow any money or goods from a source other than your family or friends over the past 12 months?	No.....3 ➔ **BH27** Yes.....1
BH03.	Which household member tried to borrow money or goods from a source other than your family or friends over the past 12 months? **(CIRCLE ALL THAT APPLY)**	A B C D E F G I J K L M P Q R U V.....
BH04.	Were you or other member of the household turned down in your efforts to secure a loan over the past 12 months?	No.....3 ➔**BH07** Yes.....1
BH05.	Which household member were turned down in the efforts to secure a loan over the past 12 months?	A B C D E F G I J K L M P Q R U V.....
BH06.	Where were you or other member of the household turned down? **(CIRCLE ALL THAT APPLY)**	A B C D E F G H I J K L M N O Y V.....
BH07.	Were you or other member of the household successful in securing a loan in the past 12 months?	No.....3 ➔ **BH27** Yes.....1
BH08.	Which member of the household were successful in securing a loan in the past 12 months? **(CIRCLE ALL THAT APPLY)**	A B C D E F G I J K L M P Q R U V.....
BH09.	How many times did you or other member of the household borrow from a source other than your family or friends over the past 12 months?	⌊_⌋⌊_⌋ times
BH10.	How much did you or other member of the household borrow from a source other than your family or friends over the past 12 months?	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rupiah 8. DON'T KNOW
BH27.	What is the total loan that has been paid in the last 12 months?	⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. .....1 DON'T KNOW 8
BH28.	What is the total amount of the loan now?	⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. .....1 DON'T KNOW 8

Code for BH01, BH06

A. Private commercial bank
B. Cooperative
C. Government/semi-government bank
D. Agricultural bank/SAPRODI
E. Employer
F. Landlord
G. Store Owner
H. Non-government organization
I. Neighborhood association
J. Arisan
K. Small farmers group (*kelompokpetanikecil)*
L. Money lender
M. Office
N. Pawnshop
O. Non-bank financial institution
V. Other
Y. DON'T KNOW

Code BH03, BH05 and BH08

A. Respondent
B. Respondent's Wife/husband
C. Respondent's biological children and wife/husband
D. Respondent's parents
E. Respondent's parent's-in-law
F. Respondent's siblings
G. Respondent's brother/sister-in-law
I. Grandchild
J. Grandparent
K. Uncle/aunt
L. Nephew/niece
M. Cousin
P. Non family
Q. Adopted child
R. Family of spouse
U. Ex-spouse
V. Others

SECTION CP (INTERVIEW SESSION NOTES)

LANGMAIN. Interview was entirely/mostly conducted in what language?	└┴┘ **Other:**_____
LANGOTHR. Other language used (if any):	└┴┘ **Other:**_____

CODE FOR LANGUAGE:

00. Indonesian	04. Batak	08. Sasak	12. Makassar	16. Toraja	20. Lampung
01. Javanese	05. Bugis	09. Minang	13. Nias	17. Lahat	96. NONE
02. Sundanese	06. Chinese	10. Banjar	14. Palembang	18. Other South Sumatra	95. Other
03. Balinese	07. Maduranese	11. Bima	15. Sumbawa	19. Betawi	

C1.RESULT OF INTERVIEW OF BOOK II	**C2.REASON CODE FOR ANSWER "3"/"2" ON C1**	**C4. SUPERVISOR MONITORING**		
1. Completed➔**C4**	1. Respondent was not at home/not available		Yes	No
2. Partially completed	2. Respondent was seriously ill	a. Observed	1	3
3. Not completed	3. Respondent refused (to be interviewed)	b. Edited	1	3
	5. Other:	c. Verified	1	3

SECTION CP (INTERVIEW SESSION NOTES)

EVALUATION FORM FOR BOOK 2

CP1. WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW? **ANSWER MAY BE MORE THAN ONE.** A. NO ONE B. A CHILD 5 YEARS OLD OR UNDER C. A CHILD OLDER THAN 5 YEARS OLD D. HUSBAND/WIFE E. AN ADULT, A HOUSEHOLDER F. AN ADULT, NOT A HOUSEHOLDER	**CP2.** WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD	**CP3.** WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD

NOTES:

INDONESIA FAMILY LIFE SURVEY 2014

BOOK IIIA

SECTIONS: DL, SW, PNA, HR, HI, KW, PK, BR, MG, TK, RE,SI, TR, CP

Respondent is an adult 15 years or older

COV00aa.	CAPI CHECK : HAS THE RESPONDENT BEEN READ THE INFORMED CONSENT EARLIER AND AGREED TO BE INTERVIEWED (COV00x=1 IN BOOK K OR 1 , OR 2)	1. Yes ➔ **RESVIS** 3. No

COV00x. Informed Consent (to be read to each individual the first time the individual is interviewed):

Good morning/afternoon/evening,

My name is _____ and my colleague here is _____. We are both from SurveyMeter, an independent research organization based in Yogyakarta. We are currently conducting the fieldwork for Sakerti 5, a survey project conducted with collaboration with RAND Corporation. We will start by reading the informed consent form and ask whether you would be willing to participate in the survey. You can ask about anything that is not clear at any time. Please do discuss with your family members before deciding to participate in the survey.

The IFLS is a longitudinal survey that was first fielded in 1993, and again in 1997, 2000, and 2007. You may remember that we visited your households to interview you or your household members in 2007 or in an earlier round. Your household was interviewed since it was one of the households or part of the households that were randomly chosen to participate since the beginning of the survey in 1993. This year, we will visit the same households again to conduct the interview and to see whether there have been some changes since the last time we visited you.

If you choose to participate in the study, our interviewer will first ask you about your basic demographics, family information, health status, health care and insurance, work, retirement and pensions, household and individual income, expenditure, and assets, etc. Then the interviewer will give you a physical examination to better understand your true health conditions. The measurements include height, weight, waist circumference, blood pressure, peak meter flow lung capacity, grip strength, balance, timed walk, and timed sit to stand. We will also do a finger prick to measure your blood hemoglobin level [and to collect blood spot on a filter paper which we will store and use in the lab for analysis of C-reactive Protein that can be used to measure inflammation and the risk to cardiovascular diseases and HbA1c that can be used to measure risk of diabetes].

This survey will take some time to complete, but we will be doing it at your convenience. If you need to take a break or run some errands, please let us know so we can stop the interview and continue later in the day or the next day.

Generally, the study will pose no health risk. The blood drawing procedure will not transmit diseases to you, because the syringe and needle are new and disinfected. The small amount of blood drawn has no harm to your health. There maybe discomfort or very mild pain, we will help you deal with it.

If you agree to participate in the survey, the physical examination and test results related to your health will be feed back to you directly. And the information you provided can be used to help make health, retirement and social security policies suitable for Indonesia, which will benefit you and other people just like you.

The interview is completely voluntary and all survey information will be kept confidential. With your consent, we also will take picture of you and the front of your house solely for the purpose of confirming your identity and your address in the follow up survey. The photos and all your personal records including, questionnaires, and physical examination and test results are confidential; we will not tell others, include your family, friends, local hospitals, etc. Your personal information, including name, address, phone number, and other information which can be used to identify you will not be disclosed. You are identified by a number in the questionnaires and test records, which will be stored safely in IFLS5 project office. You may withdraw from the study any time, which will not impact any of your benefits. The researcher will keep your information confidentially until it is destroyed, and your information will not be used or disclosed during this period.

If you agree to participate in this study, all the interviews, physical examination, tests and counseling are provided to you for free. You do not need to pay anything.

If you agree to participate in this study, you will get Rp _____ as a token gift of appreciation for the time you spend with us.

If you have any questions about this study, you may contact Bondan Sikoki at SurveyMETER at email address: sm@surveymeter.org atau telpon 62-274-4477464 dan fax: 62-274-4477004

Interviewer's Statement

"*I have informed the respondent about the background, goals, procedure, risks and benefits of the survey, given him/her enough time to read the informed consent and discuss with others, and answered all questions related to the survey; I have informed the respondent that he/she can contact the SurveyMETER, when having problems about the surveand provided the accurate contact information. I have informed the respondent that he/she can withdraw from the survey anytime. I have informed the potential respondent that he/she can get a copy of this informed consent with signatures of mine*."

□ **S**igned by interviewer. Interviewer name: _____ day/month/year

Respondent's statement:

"*I have been read the informed consent and I agree to participate in*": □ **questionnaire survey**

RESVIS.	RESPONDENT INTERVIEWED?	3. No ➔ C1 1. Yes

COMPLETED FROM ROSTER

RESPONDENT'S NAME: _____ **PID** ⌊__⌋⌊__⌋

RSPNDNT (CAPI CHECK) Head of household (AR02b=01) 1
Spouse of household head (AR02b=02) 2
Other hh member…….. 3

PANEL. FOR BOOK 3, IS HOUSEHOLDER (CAPI CHECK AR01g) :
Panel Respondent 1
New Respondent 3

DOB. Date of birth: ⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋⌊__⌋⌊__⌋
Day Month Year

RANDOM_SI. RANDOM SI : 1. RANDOM A 2. RANDOM B

RANDOM_PNA. 1. LIST A 2. LIST B 3. LIST C 4. LIST D

NAT_ID. Do you have a national ID (KTP)?
1. Yes, regular ID card
2. Yes, electronic ID card (e-KTP)
3. No

BIRTH_CERT. Do you have a birth certificate?
1. Yes, can show it if asked ➔ **COV11**
3. No

BIRTH_CERT_REASON. Main reason not have a birth certificate : ⌊__⌋

1 Expensive
2 Didn't know how to get one
3 Not important
4 Too far
5. Didn't know it was required
6 Complicated process
7 Cannot show if asked /misplaced birth certificae

TO BE FILLED OUT BY INTERVIEWER FOR BOOK III

AGE. How old are you.? ⌊__⌋⌊__⌋⌊__⌋ years old

MARSTAT. Marital status: ..... Never married 1
Married 2
Separated 3
Divorced 4
Widow/er 5
Cohabitate 6

SEX. Sex**:** Male 1
Female 3

COV11. Now with your consent we would like to take a picture of you. The sole purpose o the picture is to help us in confirming your identity in the follow up survey. The photo will not be disclosed to anyone.

☐ **Agreed to have picture taken**

SECTION DL (EDUCATION)

The following questions pertain to your education.

DL01a.	What languages do you speak in your daily life at home? **(CIRCLE ALL THAT APPLY)**	Indonesian ..... W Javanese ..... A Sundanese ..... B Maduranese ..... C Balinese ..... D Sasak ..... E Minang ..... F Batak ..... G Bugis ..... H Chinese ..... I Banjar ..... J Bima ..... L Makassar ..... M Nias ..... N Palembang ..... O Sumbawa ..... P Toraja ..... Q Lahat ..... R Other South Sumatra ..... S Betawi ..... T Lampung ..... U Other V
DL01f.	What is your ethinicity? **(CIRCLE ALL THAT APPLY)**	A B C D E F G H I J K L M N O P Q R S T U A1 B1 C1 D1 E1 F1 G1 V .....
DL01g.	What is your father's ethinicity? **(CIRCLE ALL THAT APPLY)**	A B C D E F G H I J K L M N O P Q R S T U A1 B1 C1 D1 E1 F1 G1 V .....
DL01h.	What is you rmother's ethinicity? **(CIRCLE ALL THAT APPLY)**	A B C D E F G H I J K L M N O P Q R S T U A1 B1 C1 D1 E1 F1 G1 V .....

CODE DL01f, DL01g, DL01h

Jawa ..... A	Bima-Dompu ..... K	Ambon ..... U
Sunda ..... B	Makassar L	Manado A1
Bali C	Nias ..... M	Aceh B1
Batak ..... D	Palembang ..... N	Other South Sumatera C1
Bugis ..... E	Sumbawa ..... O	Banten D1
Tionghoa ..... F	Toraja ..... P	Cirebon E1
Madura ..... G	Betawi ..... Q	Gorontalo F1
Sasak ..... H	Dayak ..... R	Kutai G1
Minang I	Melayu ..... S	Other V
Banjar ..... J	Komering ..... T	

DL01e.	Which ethnical group is primarily influential in daily activities of your household?	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 25 26 27 28 29 95 96
DL02.	Can you read an Indonesian-language newspaper?	Yes. ..... 1 No 3
DL02a.	Can you read a newspaper in another language?	Yes. ..... 1 No 3
DL03.	Can you write a letter in Indonesian?	Yes. ..... 1 No 3
DL03a.	Can you write a letter in another language?	Yes. ..... 1 No 3
DL03b.	Do you have cell phone?	Yes. ..... 1 No ..... 3→**DL3d**
DL03c.	What do you usually use the cell phone for?	A.Private conversation B.Bussiness Conversation C.Text Message D.Email E.Social Media (chatting,facebook,Twitter) F.Mobile Banking G.Transfer phone minutes H. Entertainment/multimedia (games, ringtone, TV, Radio,MP3) I. Internet (browsing)
DL03d.	Do you have internet access?	No ..... 3→**DL04** Yes. 1
DL03e.	Where do you get internet access?	A.Computer at home B.Computer at school C.Computer at place of work D.Computer at internet cafe (or public hotspots) E.Handphone V.Others
DL04.	Have you ever attended/are you attending school?	No ..... 3 →**DL05b** Yes. 1

CODE DL01e

Jawa 01	Bima-Dompu 11	Ambon 21
Sunda 02	Makassar 12	Manado 22
Bali 03	Nias 13	Aceh 23
Batak 04	Palembang 14	Other South Sumatera 25
Bugis 05	Sumbawa 15	Banten 26
Tionghoa 06	Toraja 16	Cirebon 27
Madura 07	Betawi 17	Gorontalo 28
Sasak 08	Dayak 18	Kutai 29
Minang 09	Melayu 19	Other 95
Banjar 10	Komering 20	NONE 96

SECTION DL (EDUCATION)

DL06.	What is the highest education level attended? **[NOTE TO INTERVIEWER: IF THEY ARE CURRENTLY ATTENDING SCHOOL, RECORD THE LEVEL THEY ARE CURRENTLY ATTENDING]**	ELEMENTARY ..... 02 JUNIOR HIGH GENERAL ..... 03 JUNIOR HIGH VOCATIONAL ..... 04 SENIOR HIGH GENERAL ..... 05 SENIOR HIGH VOCATIONAL ..... 06 COLLEGE (D1, D2, D3) ..... 60 UNIVERSITY (BACHELOR) ..... 61 UNIVERSITY (MASTER) ..... 62 UNIVERSITY (DOCTORATE) ..... 63 ADULT EDUCATION A. ..... 11 ADULT EDUCATION B ..... 12 ADULT EDUCATION C ..... 15 OPENUNIVERSITY ..... 13 ISLAMIC SCHOOL *(PESANTREN)* 14	**➔DL05b**
		SCHOOL FOR DISABLED ..... 17 ISLAMIC ELEMENTARY SCHOOL *(MADRASAH IBTIDAIYAH)* ..... 72 JUNIOR/HIGH SCHOOL *(MADRASAH TSANAWIYAH)* ..... 73 ISLAMIC SENIOR HIGH SCHOOL (*MADRASAH AALIYAH)* ..... 74 KINDERGARTEN ..... 90 DON'T KNOW ..... 98 OTHER: 95	

DL07.	What is the highest grade completed at that school?	Did not complete first grade at that level ..... 00 1 ..... 01 5 ..... 05 2 ..... 02 6 ..... 06 3 ..... 03 Graduated ..... 07 4 ..... 04 DON'T KNOW 98
DL05a.	At what age did you first attend the elementary school?	⌊__⌊__⌋ Age
DL05b.	Did you attend a kindergarten?	No ..... 3➔**DL05** Yes 1
DL05c.	At what age did you first attend the kindergarten?	⌊__⌊__⌋ Age
DL05.	**CAPI CHECK COV3:**	**RESPONDENT'S AGE ≥50 YEARS ..... 1 ➔ SECTION SW** **RESPONDENT'S AGE < 50 YEARS 3**
DL05f.	**CAPI CHECK DL04: (EVER /CURRENTLY ATTEND SCHOOL)**	**DL04=3 ..... 3 ➔ SECTION SW** **DL04=1 ..... 1**
DL06x.	**CAPI CHECK DL06: 14 (PESANTREN)?**	**YES ..... 3 ➔ SECTION SW** **NO 1**
DL07a.	Are you currently attending school? NOTES :IF DL07a=1 , THEN DL 07 MUST NOT= 07	No ..... 3 ➔**DL07x** Yes 1
DL07aa.	How many effective hours did you attend your school last week or the last week the school was in session? (**NOT INCLUDING BREAKS**)	⌊__⌊__⌋ hours
DL07x.	**CAPI CHECK : PANEL RESPONDENT? (COV 2)**	**PANEL RESPONDENT ..... 1 ➔ DL07d** **NEW RESPONDENT ..... 3 ➔ DL08b**

SECTION DL (EDUCATION)

PANEL RESPONDENT BOOK 3 ↓			NEW RESPONDENT BOOK 3 ↓	
DL07d.	**CAPI CHECK DL07a: CURRENTLY ATTENDING SCHOOL?**	**YES. ..... 1➔DL08a** **NO 3**	**DL08b.** **CAPI CHECK DL06: HIGHEST LEVEL OF SCHOOLING ATTENDED/CURRENTLY ATTENDING**	ELEMENTARY.....1 JUNIOR HIGH.....2 SENIOR HIGH .....3 D1, D2, D3, UNIVERSITY.....4
DL07b.	In what month and year did you last graduate or leave school?	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year		
DL07e.	**CAPI CHECK DL07b: GRADUATED/LEFT SCHOOL BEFORE JUNE 2007?**	**BEFORE JUNE 2007 ..... 1➔DL16xc** **JUNE 2007OR AFTER..... 3**	**DL09b.** **CAPI CHECK DL08a AND WRITE DOWN THE NUMBER OFCOLUMNS ACCORDING TO THE HIGHEST LEVEL OF SCHOOLING**	⌊_⌋ columns **COMPLETE DL10-DL16j FOR EACH LEVEL OF SCHOOLING EVER ATTENDED**
DL08a.	What levels of schooling you have attended/are attending since June 2007?	ELEMENTARY ..... A JUNIOR HIGH ..... B SENIOR HIGH..... C D1, D2, D3, UNIVERSITY..... D		
DL09a.	**CAPI CHECK DL08aAND WRITE DOWN THE NUMBER OF COLUMNS ACCORDING TO THE LEVELS OF SCHOOLING ATTENDED SINCE JUNE 2007**	⌊_⌋ columns **COMPLETE DL10-DL16j ONLY FOR THE LEVELS OF SCHOOLING ATTENDED SINCE JUNE 2007**		

SECTION DL (EDUCATION)

Now we want to ask about your education history.

	School Level (DL2TYPE)	1. Elementary	2. Junior High	3. Senior High	4. D1, D2, D3//University
DL10.	What is the school level you attended or you are still attending?	Elementary ..... 02 Adult Education A ..... 11 School for Disabled ..... 17 Madrasah Elementary ..... 72 Other 95	Junior high general ..... 03 Junior high vocational ..... 04 Adult Education B ..... 12 School for Disabled ..... 17 Madrasah Junior High School ..... 73 Other 95	Senior high general ..... 05 Senior high vocational ..... 06 Adult Education C ..... 15 School for Disabled ..... 17 Madrasah Senior High School ..... 74 Other 95	College (D1, D2, D3) ..... 60 University (BA) ..... 61 University (MA) ..... 62 University (PhD) ..... 63 Open University ..... 13 Other 95
DL11.	Under whose administration is/was the school?	Public non-religious ..... 01 Public religious ..... 02 Private non-religious ..... 03 Private Islam ..... 04 Private Catholic ..... 05 Private Protestant and others ..... 06 Private Buddhist ..... 08 Other 95	Public non-religious ..... 01 Public religious ..... 02 Private non-religious ..... 03 Private Islam ..... 04 Private Catholic ..... 05 Private Protestant and others ..... 06 Private Buddhist ..... 08 Other 95	Public non-religious ..... 01 Public religious ..... 02 Private non-religious ..... 03 Private Islam ..... 04 Private Catholic ..... 05 Private Protestant and others ..... 06 Private Buddhist ..... 08 Other 95	Public non-religious ..... 01 Public religious ..... 02 Private non-religious ..... 03 Private Islam ..... 04 Private Catholic ..... 05 Private Protestant and others ..... 06 Private Buddhist ..... 08 Other 95
DL16xa.	**CAPI CHECK DL06 AND DL07a: CURRENTLY IN SCHOOL AT THIS [...] LEVEL?**	**NO ..... 3➔DL16fa** **YES 1**	**NO ..... 3➔DL16fa** **YES 1**	**NO ..... 3➔DL16fa** **YES 1**	**NO ..... 3➔DL16fa** **YES 1**
DL16f.	What is the name and address of the school? 1. Specify 3. Same as current residence 8. DON'T KNOW (DK)	**N. Name :** 8. DK 1. _____ **Add. Address:** 8. DK 1. _____ _____ **Loc. Loc. Note:** 8. DK 1. _____ _____ **A. Vill:** 1. _____ 3. Same 8. DK **B. Kec:** 1. _____ 3. Same 8. DK **C. Kab:** 1. _____ 3. Same 8. DK **D. Prov:** 1. _____ 3. Same 8. DK **CODE CF** ⌊_⌊_⌊_⌋ ⌊_⌋ ⌊_⌊_⌊_⌊_⌋	**N. Name :** 8. DK 1. _____ **Add. Address:** 8. DK 1. _____ _____ **Loc. Loc. Note:** 8. DK 1. _____ _____ **A. Vill:** 1. _____ 3. Same 8. DK **B. Kec:** 1. _____ 3. Same 8. DK **C. Kab:** 1. _____ 3. Same 8. DK **D. Prov:** 1. _____ 3. Same 8. DK **CODE CF** ⌊_⌊_⌊_⌋ ⌊_⌋ ⌊_⌊_⌊_⌊_⌋	**N. Name :** 8. DK 1. _____ **Add. Address:** 8. DK 1. _____ _____ **Loc. Loc. Note:** 8. DK 1. _____ _____ **A. Vill:** 1. _____ 3. Same 8. DK **B. Kec:** 1. _____ 3. Same 8. DK **C. Kab:** 1. _____ 3. Same 8. DK **D. Prov:** 1. _____ 3. Same 8. DK **CODE CF** ⌊_⌊_⌊_⌋ ⌊_⌋ ⌊_⌊_⌊_⌊_⌋	**N. Name :** 8. DK 1. _____ **Add. Address:** 8. DK 1. _____ _____ **Loc. Loc. Note:** 8. DK 1. _____ _____ **A. Vill:** 1. _____ 3. Same 8. DK **B. Kec:** 1. _____ 3. Same 8. DK **C. Kab:** 1. _____ 3. Same 8. DK **D. Prov:** 1. _____ 3. Same 8. DK
DL16fa.	What languages are used in teaching at this school [...] ?	A. Indonesia C. Mandarin B. Engglish D. Daerah	A. Indonesia C. Mandarin B. Engglish D. Daerah	A. Indonesia C. Mandarin B. Engglish D. Daerah	A. Indonesia C. Mandarin B. Engglish D. Daerah
DL16j.	Approximately how much time does it take to make a one-way trip to the school, now/in your last year of school at this level.	1. ⌊_⌊_⌊_⌋ Minute ..... 1 Hour ..... 2 8. DON'T KNOW **➔DL10 NEXT COLUMN/DL16xb**	1. ⌊_⌊_⌊_⌋ Minute ..... 1 Hour ..... 2 8. DON'T KNOW **➔DL10 NEXT COLUMN/DL16xb**	1. ⌊_⌊_⌊_⌋ Minute ..... 1 Hour ..... 2 8. DON'T KNOW **➔DL10 NEXT COLUMN/DL16xb**	1. ⌊_⌊_⌊_⌋ Minute ..... 1 Hour ..... 2 8. DON'T KNOW **➔DL10 NEXT COLUMN/DL16xb**

SECTION DL (EDUCATION)

DL16xb.	**CAPI CHECK**	**PANEL RESPONDENT BOOK 3 .....1➔COMPLETE DL16a-DL16i ACCORDING TO LEVELS OF SCHOOLING ATTENDED SINCE JUNE 2007** **NEW RESPONDENT ≥ 30.....2➔DL16xc** **NEW RESPONDENT< 30.....3➔COMPLETE DL16a-DL16i FOR ALL LEVELS OF SCHOOLING EVER ATTENDED**

	School Level (DL3TYPE)	1. Elementary	2. Junior High	3. Senior High	4. D1, D2, D3//University
DL16a.	Have you ever taken the EBTANAS/UAN/UN exam at [...] level?	No..... 3 ➔ **DL16g** EBTANAS ..... 1 UAN/UN 2	No ..... 3➔ **DL16g** EBTANAS ..... 1 UAN/UN 2	No..... 3 ➔ **DL16g** EBTANAS ..... 1 UAN/UN..... 2	
DL16b.	Can you show us the official record of your EBTANAS/UAN/UN score (DANEM)? **INTERVIEWER NOTE: EBTANAS/UAN/UN SCORES SHOULD BE COPIED FROM THE OFFICIAL RECORD (DANEM).**	Yes ..... 1 No 3	Yes ..... 1 No 3	Yes ..... 1 No 3	
DL16c.	What month and year did you take the EBTANAS/UAN/UN [...]?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW	
DL16c1.	CAPI CHECK DL16a: EBTANAS/UAN/UN	EBTANAS ..... 1 UAN/UN 2	EBTANAS ..... 1 UAN/UN 2	EBTANAS..... 1 UAN/UN..... 2	
DL16c2	Number of subjects tested in the national exam (EBTANAS/UAN/UN) for the […] school level:	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	
DL16d.	What was your ebtanas score for the following subjects: (If the respondent shows you official record (*DANEM*) copy from danem, if you cannot see official record (*DANEM*) ask the respondent for their score).				
	B. Indonesian	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	
	C. English	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	
	D. Math	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	

SECTION DL (EDUCATION)

DL16e.	**Total EBTANAS/UAN/UN**	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 8. DON'T KNOW	
DL16g.	How many hours on average do you attend school each day now/in your last year at school? **FILL IN '96' IF THE RESPONDENT IS COMPLETING THEIR THESIS, ETC.**	⌊_⌋⌊_⌋ Hours/Day	⌊_⌋⌊_⌋ Hours/Day	⌊_⌋⌊_⌋ Hours/Day	⌊_⌋⌊_⌋ Hours/Day
DL16i.	Approximately how many students are/were in your class now/in last year of school attended at this level?	⌊_⌋⌊_⌋ Person(s) ..... 1 DON'T KNOW ..... 8 **➔DL16a NEXT COLUMN\DL16xc**	⌊_⌋⌊_⌋ Person(s) ..... 1 DON'T KNOW ..... 8 **➔DL16a NEXT COLUMN\DL16xc**	⌊_⌋⌊_⌋ Person(s) ..... 1 DON'T KNOW ..... 8 **➔DL16a NEXT COLUMN\DL16xc**	⌊_⌋⌊_⌋ Person(s) ..... 1 DON'T KNOW ..... 8 **➔DL16xc**

DL16xc.	**CAPI CHECK DL06**	⌊_⌋ columns **WRITE DOWN THE NUMBER OF COLUMNS ACCORDING TO LEVELS OF SCHOOLING EVER ATTENDED**
DL16xd.	**CAPI CHECK DL07x AND DL07e**	**PANEL RESPONDENT OF BOOK3 WHO IS CURRENTLY ATTENDING SCHOOL/HAS ATTENDED SCHOOL SINCE JUNE 2007 .....1➔** **NEW RESPONDENT .....2 ➔** **PANEL RESPONDENT OF BOOK 3 WHO GRADUATED/LEFT SCHOOL BEFORE JUNE 2007.....3 ➔ SW**

	School Level (DL4TYPE)	**1. Elementary**	**2. Junior High**	**3. Senior High**	**4. D1, D2, D3//University**
DL11a.	When did you first attended schooling at this level ?	1. Year: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL11c** 8. DON'T KNOW	1. Year: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL11c** 8. DON'T KNOW	1. Year: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL11c** 8. DON'T KNOW	1. Year: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL11c** 8. DON'T KNOW
DL11b.	At what age did you first attended schooling at this level?	⌊_⌋⌊_⌋ years old	⌊_⌋⌊_⌋ years old	⌊_⌋⌊_⌋ years old	⌊_⌋⌊_⌋ years old
DL11c.	What is the highest grade you have ever/are currently enrolled in at this level?	Graduated.....07**➔DL11f** 1 .....01 2 .....02 3 .....03 4 .....04 5 .....05 6 .....06 DON'T KNOW 98	Graduated ..... 07**➔DL11f** 1 ..... 01 2 ..... 02 3 ..... 03 DON'T KNOW 98	Graduated.....07**➔DL11f** 1.....01 2.....02 3.....03 DON'T KNOW.....98	Graduated ..... 07**➔DL11f** Year 1..... 01 Year 2..... 02 Year 3..... 03 Year 4..... 02 Year 5..... 03 Year 6..... 02 DON'T KNOW 98
DL11d.	Did you completed this level of schooling […] ?	Yes .....1**➔DL11f** Still in school.....6**➔DL13** No.....3	Yes..... 1**➔DL11f** Still in school ..... 6**➔DL13** No 3	Yes .....1**➔DL11f** Still in school.....6**➔DL13** No.....3	Yes..... 1**➔DL11f** Still in school ..... 6**➔DL13** No..... 3
DL11e.	Why did you leave this level of schooling?	B C D E F G H I K L M V.....	B C D E F G H I K L M V.....	B C D E F G H I K L M V.....	B C D E F G H I K L M V.....

Kode DL11e

Working/helping to earn income .....B	Not able to study..... E	School had no teachers..... H	Help at home L
Could not afford.....C	Not admitted at school ..... F	School closed/ruined I	Marriage .....M
No schools/schools too far.....D	Sick or disabled .....G	Doesn't want to go.....K	Others.....V

SECTION DL (EDUCATION)

School Level (DL4TYPE)		1. Elementary	2. Junior High	3. Senior High	4. D1, D2, D3//University
DL11f.	When did you leave/graduate from this [...] level of schooling?	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL13** 8. DON'T KNOW	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL13** 8. DON'T KNOW	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL13** 8. DON'T KNOW	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL14a** 8. DON'T KNOW
DL11g.	At what age did you leave/graduate from this […] level of schooling?	⌊_⌋⌊_⌋ years old	⌊_⌋⌊_⌋ years old	⌊_⌋⌊_⌋ years old	⌊_⌋⌊_⌋ years old
DL13.	Have you ever failed a grade at [...] school ?	No .....3 **➔DL14a** Yes 1	No ..... 3 **➔DL14a** Yes..... 1	No .....3 **➔DL14a** Yes 1	
DL14.	What grades have you failed and how many times did you repeat that grade? **CIRCLE ALL THAT APPLY**	Class / Number of repeats A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times D. 4 ⌊_⌋ times E. 5 ⌊_⌋ times F. 6 ⌊_⌋ times	Class / Number of repeats A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times	Class / Number of repeats A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times	
DL14a.	When you are at this [...] school level, did you ever leave school for 4 consecutive weeks or more, including not enrolling in a full year?	3. No **➔DL15** 1. Yes	3. No **➔DL15** 1. Yes	3. No **➔DL15** 1. Yes	3. No **➔DL15** 1. Yes
DL14b.	How many times did the school disruptions occur?	Class / Number of disruptions A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times D. 4 ⌊_⌋ times E. 5 ⌊_⌋ times F. 6 ⌊_⌋ times	Class / Number of disruptions A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times	Class / Number of disruptions A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times	Year / Number of disruptions A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times
DL14c.	When did the school disruptions occur? **(IF MORE THAN 3 TIMES, WRITE THE THREE LONGEST)**	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year) B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year) C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year)	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year) B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year) C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year)	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year) B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year) C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year)	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year) B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year) C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month / Year – Month / Year)
DL14d.	Why did the school disruption occur?	G B H C I D K E L F M V	G B H C I D K E L F M V.....	G B H C I D K E L F M V	G B H C I D K E L F M V .....
DL15.	While attending [...] school, did you work?	Yes ..... 1 No..... 3 **➔DL11a NEXT COL/DL30**	Yes.....1 No .....3 **➔DL11a NEXT COL/DL30**	Yes ..... 1 No..... 3 **➔DL11a NEXT COL/DL30**	Yes.....1 No .....3 **➔ DL30**

Code DL14d

Working/helping to earn income .....B	Not able to study.....E	School had no teachers.....H	Help at home L
Could not afford.....C	Not admitted at school .....F	School closed/ruined I	Marriage .....M
No schools/schools too far .....D	Sick or disabled.....G	Doesn't want to go.....K	Others V

SECTION DL (EDUCATION)

We would like to ask about school-related expenses for the previous school year.

DL30.	Did you attend school in the previous school year (starting 2013-2014) ?	No ..... 3➔ **DL31c** Yes 1

	DL31TYPE			
DL31a.	What were your (approximate) school-related expenses during the 2013-2014school year? Did you spend money for:	**3. No**	**1. Yes**	**DL31b.** Please give your best estimate of the amount you spent.
	T. Total (Fees, supplies, transportation, pocket money, other)	3 ↓	1 ➔	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
	A. School Fees			
	1. Registration	3 ↓	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
	2. Tuition and other scheduled fees	3 ➔ **DL31bx**	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.➔**DL31bx** How much is the tuition if you have to pay in full?
	3. Exams	3 ↓	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. ⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
	B. School supplies			
	1. Books and writing supplies	3 ↓	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
	2. Uniform and sports	3 ↓	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
	C. Transportation and Pocket Money			
	1. Transportation	3 ↓	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
	2. Housing costs, food	3 ↓	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
	3. Special courses	3 ↓	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.
	D. Other:	3 ↓	1 ➔	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.

DL40.	Did [NAME] receive any books from the school during the 2013/2014 school year? **(CIRCLE ALL THAT APPLY)**	Yes, for him/herself ..... A Yes, to share ..... B No C
DL41.	Did the school reduce [NAME] Committee fees or other fees during the 2013/2014 school year?	Yes ..... 1 No 3
DL42.	Did [NAME] receive assistance for school costs from GNOTA,School Committee, government, community groups, religious groups, or family (outside HH), or other?	No ..... 3➔ **DL31c** Yes 1

SECTION DL (EDUCATION)

DL43.	From what source was this assistance, and what was the total value? **(CIRCLE ALL THAT APPLY)**	
	T. Total	T ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	A. GNOTA	A. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	C. Government (other than BOS)	
	C1. *Bantuan Siswa Miskin* (BSM)	C1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	C2. *Bidik Misi*	C2. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	C3. Other non-BOS government assistance	C3. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	D. Community Group	D. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	E. Religious Group	E. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	F. Family	F. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	I. School Committee	I. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	J. BOS/BKMFund	J. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	K. Foreign government/foundation/individual	K. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	L. Domestic Non-Government Institution	L. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
	L1. Aid for poor students	L1. ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp

DL31c.	**CAPI CHECK :**	**Respondent not in school (DL07a = 3) .....3➔SECTION SW** **Respondent still in school (DL07a = 1).....1**

DL44a. What were your (approximate) school-related expenses during the past month? Did you spend money for:			**DL44b.** Please give your best estimate of the amount you spent.
	3. No	**1. Yes**	
T **Total (Fees, supplies, transportation, pocket money, other)**	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
A. School Fees			
1. Registration	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
2. Other scheduled fees	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.➔**DL44bx.**How much is the tuition if you have to pay in full? ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
3. Exams	3 ↓	1 ➔	
B. School supplies			
1. Books and writing supplies	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
2. Uniform and sports	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
C. Transportation and Pocket Money			
1. Transportation	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
2. Housing costs, food	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
3. Special courses	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.
D. Other:	3 ↓	1 ➔	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp.

SECTION SW (SUBJECTIVE WELLBEING)

We would like to know your opinion on the quality of your life.

SW00.	Please think about your life as a whole. How satisfied are you with it?	1. Completely satisfied. 2. Very satisfied 3. Somewhat satisfied 4. Not very satisfied 5. Not at all satisfied
SW01.	Please imagine a six-step ladder where on the bottom (the first step), stand the poorest people, and on the highest step (the sixth step), stand the richest people. On which step are you today?	Poorest Richest 1 2 3 4 5 6 8. DON'T KNOW
SW02.	On which step were you five years ago?	Poorest Richest 1 2 3 4 5 6 8. DON'T KNOW
SW03.	On which step do you expect to find five years from now?	Poorest Richest 1 2 3 4 5 6 8. DON'T KNOW

Now, we would like to know about your conditions, food consumption, health care and education of you and your children.

SW03a.	Knowing about how prices change in recent year, do you think you can keep the standard of living you have today in the next 5 years?	Very likely.....1 Likely.....2 Unlikely.....3 Very unlikely.....4 DON'T KNOW.....8
SW03b.	Concerning your current family life, which of the following is true?	Less than adequate.....1 Adequate.....2 More than adequate.....3 DON'T KNOW.....8
SW04.	Concerning your current standard of living, which of the following is true?	It is less than adequate for my needs.....1 It is just adequate for my needs.....2 It is more than adequate for my needs.....3 DON'T KNOW.....8
SW05.	Concerning your food consumption, which of the following is true?	It is less than adequate for my needs.....1 It is just adequate for my needs.....2 It is more than adequate for my needs.....3 DON'T KNOW.....8
SW06.	Concerning your healthcare, which of the following is true?	It is less than adequate for my needs.....1 It is just adequate for my needs.....2 It is more than adequate for my needs.....3 DON'T KNOW.....8
SW07.	Do you have children under 15 still residing in this household?	No.....3 ➔**SW12** Yes.....1
SW08.	Concerning your children's standard of living, which of the following is true?	It is less than adequate for their needs.....1 It is just adequate for their needs.....2 It is more than adequate for their needs.....3 DON'T KNOW.....8
SW09.	Concerning your children's food consumptio, which of the following is true?	It is less than adequate for their needs.....1 It is just adequate for their needs.....2 It is more than adequate for their needs.....3 DON'T KNOW.....8
SW10.	Concerning your children's healthcare, which of the following is true?	It is less than adequate for their needs.....1 It is just adequate for their needs.....2 It is more than adequate for their needs.....3 DON'T KNOW.....8
SW11.	Concerning your children's education, which of the following is true?	It is less than adequate for their needs.....1 It is just adequate for their needs.....2 It is more than adequate for their needs.....3 DON'T KNOW.....8
SW12.	Taken all things together how would you say things are these days - would you say you were very happy, happy, unhappy or very unhappy?	Very happy.....1 Happy.....2 Unhappy.....3 Very unhappy.....4

SECTION PNA (POSITIVE AND NEGATIVE AFFECTS)

The next question are about your experiences yesterday. Now, we would like you to think about yesterday. What did you do yesterday and how did you feel?

PNA01.	Please tell me what day yesterday ?	1. Sunday 2. Monday 3. Tuesday 4. Wednesday 5. Thursday 6. Friday 7. Saturday 8. DON"T KNOW
PNA02.	**CAPI CHEK: YESTERDAY IS :**	1. RESPONDENT IS CORRECT ➔ PNA04 3. RESPONDENT IS INCORRECT 6. PNA01=8
PNA03.	**INTERVIEWER CHEK : TELL RESPONDENT THAT YESTERDAY IS ……**	1. Sunday 2. Monday 3. Tuesday 4. Wednesday 5. Thursday 6. Friday 7. Saturday
PNA04.	Please tell me what time you woke up yesterday?	⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋ HOUR / MINUTE
PNA05.	What time did you go to sleep yesterday?	⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋ HOUR / MINUTE

Now please take a few quiet seconds to recall your activities and experiences yesterday. Good, now I have questions about your experiences yesterday

PNA05a. CAPI CHECK RANDOM _PNA ON COVER **PNA06. 1. LIST A 2. LIST B 3. LIST C 4. LIST D**

1. LIST A

	PNA06.. Yesterday, did you feel [….]?					
1	Frustrated	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
2	Sad	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
3	Enthusiastic	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
4	Lonely	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
5	Content	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
6	Worried	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
7	Bored	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
8	Happy	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
9	Angry	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
10	Tired	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
11	Stressed	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
12	Pain	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very

SECTION PNA (POSITIVE AND NEGATIVE AFFECTS)

2. LIST B

PNA06.. Yesterday, did you feel [….]?						
1	Frustrated	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
9	Angry	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
7	Bored	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
10	Tired	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
2	Sad	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
8	Happy	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
3	Enthusiastic	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
11	Stressed	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
5	Content	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
6	Worried	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
4	Lonely	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
12	Pain	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very

3. LIST C

PNA06.. Yesterday, did you feel [….]?						
8	Happy	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
4	Lonely	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
5	Content	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
11	Stressed	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
7	Bored	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
9	Angry	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
1	Frustrated	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
10	Tired	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
3	Enthusiastic	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
6	Worried	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
2	Sad	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
12	Pain	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very

SECTION PNA (POSITIVE AND NEGATIVE AFFECTS)

4. LIST D

	PNA06. Yesterday, did you feel [….]?					
3	Enthusiastic	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
1	Frustrated	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
2	Sad	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
5	Content	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
7	Bored	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
10	Tired	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
6	Worried	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
4	Lonely	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
11	Stressed	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
9	Angry	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
8	Happy	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very
12	Pain	1. Not at all	2. A little	3. Somewhat	4. Quite a bit	5. Very

Now we would like to ask you about pain you may have felt .

PNA07xx.	**CAPI CHECK: PNATYPE=12 AND PNA06 = 1 ?**	1. Yes ➔ **HR00a** 3. NO
PNA08.	Yesterday were you bothered by a pain in your […]?	A. Head / G. Hip B. Neck / H. Knee C. Shoulder / I. Ankle/foot/toes D. Arm / J. Hands E. Wrists/fingers / K. Legs F. Back/lower back / L. Buttocks
PNA09.	Does the pain limit your daily activities?	1. Yes, very much so 2. Yes, to some degree 3. No, not much 4. No, not at all
PNA10.	Treatment / actions that have you done to treat the pain?	A. Pill (modern medicine) B. Injection C. External D. Physiotherapy E. Traditional (Acupuncture, herbal medicine, and other ways the traditional way) W. NO TREATMENT / ACTION

SECTION HR (HOUSEHOLD ASSETS)

HR00a.	**CAPI CHECK :** **DID RESPONDENT ALREADY ANSWER BOOK II?**	YES ..... 1 ➔**SECTION HI** NO 3
HR00b.	**Are you currently married?**	No ..... 3 ➔**SECTION HI** Yes 1

Next, we would like to know about assets owned by you or by members of the household but not used for a business. Do not report assets used mostly or only for a business.

TYPE OF ASSETS **(HRTYPE)**	**HR01.** Do you or does any other member of the household own [...]?	**HR02.** What is the total value of [...] at present?	**HR05.** What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	**HR06.** Is the entire [...] owned by the householders?	**HR07.** What is the percentage share of [...] that is owned by the house-holders?	**HR08.** Who outside the household also owns [...]? **(CIRCLE ALL THAT APPLY)**	**HR10.** Which householders own [...]? **(CIRCLE ALL THAT APPLY)**	**HR11.** How many householders own [...]? **(REFER TO ANSWER OF HR10)**	**HR12.** **ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B.** You told me that members of this household own ____% **(RESPONSE FROM HR07)** of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
A. House and land occupied by this household	3. No 1. Yes➔ ⬇ **ROW B**	1. ⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋ Rp.➔ 7. UNWILLING TO ANSWER⬇ 8. DON'T KNOW⬇ **HR02p.** Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	1. ⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V ……..	A B C D E F G I J K L M P Q R U V ……..	⌊_⌊_⌋ Persons **IF 01➔ROW B**	1. A ⌊_⌊_⌋ % B ⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		Breakpoints: Rp 50 millions, Rp 100 millions, Rp 200 millions CAPI randomizes entry points: Rp 50 millions (2UP), Rp 100 millions (1UP 1DOWN) **➔HR05 ROW A**							
B. Other house/ building (including land)	3. No 1. Yes➔ ⬇ **ROW C**	1. ⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋ Rp.➔ 7. UNWILLING TO ANSWER⬇ 8. DON'T KNOW⬇ **HR02p.** Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	1. ⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V ……..	A B C D E F G I J K L M P Q R U V ……..	⌊_⌊_⌋ Persons **IF 01➔ROW C**	1. A ⌊_⌊_⌋ % B ⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		Breakpoints: Rp 50 millions, Rp 100 millions, Rp 200 millions CAPI randomizes entry points: Rp 50 millions (2UP), Rp 100 millions (1UP 1DOWN) **➔HR05 ROW B**							

HR08 AND HR10

A. Respondent	E. Respondent's parents-in-law	J. Grandparents	P. Non family	V. Others .....
B. Respondent's wife/husband	F. Respondent's sibling	K. Uncle/aunt	Q. Step/adopted child	
C. Respondent's biological and in-law	G. Respondent's brother/sister-in-law	L. Nephew/niece	R. Family of spouse	
D. Respondent's parents	I. Respondent's grandchild/great grandchild	M. Cousin	U. Ex spouse	

HR12:
A. Respondent
B. Respondent's spouse
IF A AND B ARE THE ONLY OWNERS IN HOUSEHOLD, THEIR ANSWERS SHOULD SUM TO 100%.
IF MORE HH MEMBERS THAN A AND B ARE OWNERS, THE ANSWERS OF A AND B SHOULD SUM TO LESS THAN 100%.

SECTION HR (HOUSEHOLD ASSETS)

TYPE OF ASSETS (HRTYPE)	HR01. Do you or does any other member of the household own [...]?	HR02. What is the total value of [...] at present?	HR05. What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	HR06. Is the entire [...] owned by the householders?	HR07. What is the percentage share of [...] that is owned by the house-holders?	HR08. Who outside the household also owns [...]? (CIRCLE ALL THAT APPLY)	HR10. Which householders own [...]? (CIRCLE ALL THAT APPLY)	HR11. How many householders own [...]? (REFER TO ANSWER OF HR10)	HR12. ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B. You told me that members of this household own ____% (RESPONSE FROM HR06/ HR07) of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
C. Land (not used for farm nonfarm)	3. No 1. Yes➔ ⇩ **ROW D1**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.➔ 7. UNWILLING TO ANSWER⇩ 8. DON'T KNOW⇩	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V ……	A B C D E F G I J K L M P Q R U V ……	⌊_⌊_⌋ Persons **IF 01➔ROW D1**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 25 millions, Rp 50 millions, Rp 100 millions CAPI randomizes entry points: Rp 25 millions (2UP), Rp 50 millions (1UP 1DOWN) **➔HR05 ROW C**							
D1. Poultry	3. No 1. Yes➔ ⇩ **ROW D2**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V ……	A B C D E F G I J K L M P Q R U V ……	⌊_⌊_⌋ Persons **IF 01➔ROW D2**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 4 millions, Rp 8 millions, Rp 15 millions CAPI randomizes entry points: Rp 4 millions (2UP), Rp 8 millions (1UP 1DOWN) **➔HR05 ROW D1**							
D2. Livestock/ fishpond	3. No 1. Yes➔ ⇩ **ROW D3**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V ……	A B C D E F G I J K L M P Q R U V ……	⌊_⌊_⌋ Persons **IF 01➔ROW D3**	1. A⌊_⌊_⌋ % B⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 4 millions, Rp 8 millions, Rp 15 millions CAPI randomizes entry points: Rp 4 millions (2UP), Rp 8 millions (1UP 1DOWN) **➔HR05 ROW D2**							

SECTION HR (HOUSEHOLD ASSETS)

	HR01.	HR02.	HR05.	HR06.	HR07.	HR08.	HR10.	HR11.	HR12.
TYPE OF ASSETS **(HRTYPE)**	Do you or does any other member of the household own [...]?	What is the total value of [...] at present?	What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	Is the entire [...] owned by the householders?	What is the percentage share of [...] that is owned by the house-holders?	Who outside the household also owns [...]? **(CIRCLE ALL THAT APPLY)**	Which householders own [...]? **(CIRCLE ALL THAT APPLY)**	How many householders own [...]? **(REFER TO ANSWER OF HR10)**	**ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B.** You told me that members of this household own ____% **(RESPONSE FROM HR06/ HR07)** of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
D3. Hard stem plant that not used for farm or non-farm business	3. No 1. Yes➔ ↓ **ROW E**	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊⌊⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊⌊⌋ Persons **IF 01➔ROW E**	1. A ⌊⌊⌋ % B ⌊⌊⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 10 millions, Rp 20 millions, Rp 40 millions; CAPI randomizes entry points: Rp 10 millions (2UP), Rp 20 millions (1UP 1DOWN) **➔HR05 ROW D3**							
E. Vehicles (cars, boats, bicycles, motorbikes)	3. No 1. Yes➔ ↓ **ROW F**	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊⌊⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊⌊⌋ Persons **IF 01➔ROW F**	1. A ⌊⌊⌋ % B ⌊⌊⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 5 millions, Rp 50 millions, Rp 10 millions; CAPI randomizes entry points: Rp 5 millions (2UP), Rp 10 millions (1UP 1DOWN) **➔HR05 ROW E**							
F. Household appliances (radio, tape recorder, tv, fridge, sewing or washing machine, VCD player, HP, etc.)	3. No 1. Yes➔ ↓ **ROW G**	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊⌊⌋ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊⌊⌋ Persons **IF 01➔ROW G**	1. A ⌊⌊⌋ % B ⌊⌊⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 4 millions, Rp 8 millions, Rp 15 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 8 millions (1UP 1DOWN) **➔HR05 ROW E**							

SECTION HR (HOUSEHOLD ASSETS)

TYPE OF ASSETS (HRTYPE)	HR01. Do you or does any other member of the household own […]?	HR02. What is the total value of [...] at present?	HR05. What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	HR06. Is the entire [...] owned by the householders?	HR07. What is the percentage share of [...] that is owned by the house-holders?	HR08. Who outside the household also owns [...]? (CIRCLE ALL THAT APPLY)	HR10. Which householders own [...]? (CIRCLE ALL THAT APPLY)	HR11. How many householders own [...]? (REFER TO ANSWER OF HR10)	HR12. ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B. You told me that members of this household own ____% (RESPONSE FROM HR06/ HR07) of the […]. Of that ____%, how much is owned by you and how much is owned by your spouse?
G. Savings/ certificate of deposit/ stocks	3. No 1. Yes➔ ↓ **ROW H**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V …….	A B C D E F G I J K L M P Q R U V …….	⌊_⌊_⌋ Persons **IF 01➔ROW H**	1. A ⌊_⌊_⌋ % B ⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 4 millions, Rp 8 millions, Rp 15 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 8 millions (1UP 1DOWN) **➔HR05 ROW G**							
H. Receivables	3. No 1. Yes➔ ↓ **ROW J**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V …….	A B C D E F G I J K L M P Q R U V …….	⌊_⌊_⌋ Persons **IF 01➔ROW J**	1. A ⌊_⌊_⌋ % B ⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp 5 millions, Rp 10 millions, Rp 25 millions; CAPI randomizes entry points: Rp 5 millions (2UP), Rp 10 millions (1UP 1DOWN) **➔HR05 ROW G**							
J. Jewelry	3. No 1. Yes➔ ↓ **ROW K1**	1. ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW		1. Yes ➔**HR10** 3. No	⌊_⌊_⌋ Percent	B C D E F G I J K L M P Q R U V …….	A B C D E F G I J K L M P Q R U V …….	⌊_⌊_⌋ Persons **IF 01➔ROW K1**	1. A ⌊_⌊_⌋ % B ⌊_⌊_⌋ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp4 millions, Rp 6 millions, Rp 10 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN) **➔HR06 ROW J**							

SECTION HR (HOUSEHOLD ASSETS)

TYPE OF ASSETS (HRTYPE)	HR01. Do you or does any other member of the household own [...]?	HR02. What is the total value of [...] at present?	HR05. What is the total income from the rent/lease/interest/ profit sharing of [...] in the past 12 months?	HR06. Is the entire [...] owned by the householders?	HR07. What is the percentage share of [...] that is owned by the house-holders?	HR08. Who outside the household also owns [...]? (CIRCLE ALL THAT APPLY)	HR10. Which householders own [...]? (CIRCLE ALL THAT APPLY)	HR11. How many householders own [...]? (REFER TO ANSWER OF HR10)	HR12. **ONLY IF THE RESPONSE TO HR10 INCLUDES A OR B.** You told me that members of this household own ____% **(RESPONSE FROM HR06/ HR07)** of the [...]. Of that ____%, how much is owned by you and how much is owned by your spouse?
K1. Household Furniture and Utensils	3. No 1. Yes➔ ↓ **ROW K2**	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW		1. Yes ➔**HR10** 3. No	⌊_⌊_⌊ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌊_⌊ Persons **IF 01➔ROW K2**	1. A ⌊_⌊_⌊ % B ⌊_⌊_⌊ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp4 millions, Rp 6 millions, Rp 10 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN) **➔HR06 ROW K1**							
K2. Other assets	3. No 1. Yes➔ ↓ **HR16**	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊,⌊_⌊_⌊_⌊ Rp. 3. NONE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. Yes ➔**HR10** 3. No	⌊_⌊_⌊ Percent	B C D E F G I J K L M P Q R U V	A B C D E F G I J K L M P Q R U V	⌊_⌊_⌊ Persons **IF 01➔HR16**	1. A ⌊_⌊_⌊ % B ⌊_⌊_⌊ % 6. Neither A nor B owns 8. DON'T KNOW
		HR02p. Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)							
		Breakpoints: Rp4 millions, Rp 6 millions, Rp 10 millions; CAPI randomizes entry points: Rp 4 millions (2UP), Rp 6 millions (1UP 1DOWN) **➔HR06 ROW K2**							

HR08 AND HR10

A. Respondent	E. Respondent's parents-in-law	J. Grandparents	P. Non family	V. Others
B. Respondent's wife/husband	F. Respondent's sibling	K. Uncle/aunt	Q. Step/adopted child	.....
C. Respondent's biological and in-law	G. Respondent's brother/sister-in-law	L. Nephew/niece	R. Family of spouse	
D. Respondent's parents	I. Respondent's grandchild/great grandchild	M. Cousin	U. Ex spouse	

HR12:
A. Respondent
B. Respondent's spouse
IF A AND B ARE THE ONLY OWNERS IN HOUSEHOLD, THEIR ANSWERS SHOULD SUM TO 100%.
IF MORE HH MEMBERS THAN A AND B ARE OWNERS, THE ANSWERS OF A AND B SHOULD SUM TO LESS THAN 100%.

SECTION HR (H)

TYPE OF ASSETS (HR2TYPE)	HR16. What is/was the total value in rupiah of any […] purchased in the past 12 months?	HR17. What is the total value of any […] sold in the past 12 months?
A. House occupied by this household	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO SALES 7. UNWILLING TO ANSWER 8. DON'T KNOW
B. Other house/building	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO SALES 7. UNWILLING TO ANSWER 8. DON'T KNOW
C. Land (not used for farm business)	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO SALES 7. UNWILLING TO ANSWER 8. DON'T KNOW
E. Vehicles (cars, boats, bicycles, motorbikes)	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO SALES 7. UNWILLING TO ANSWER 8. DON'T KNOW
J. Jewelry	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW
L. Other assets, not used for farm or non-farm business:	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 3. NO PURCHASE 7. UNWILLING TO ANSWER 8. DON'T KNOW

SECTION HI (NON-LABOR INCOME)

Next, we would like to ask about income you yourself have received from other sources during the past 12 months.

HI14a. INTERVIEWER NOTE: IF INCOME IS SHARED BY SEVERAL HOUSEHOLD MEMBERS, RECORD IN HI14 ONLY THE PORTION OWNED BY THIS RESPONDENT.

SOURCE OF INCOME (HITYPE)	HI14. What is the total income you received from [...] during the past 12 months?		
A. Pension	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW
B1. Government scholarship	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW
B2. Private scholarship	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW
C. Insurance Money	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW
D1. Winnings/Lottery	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.	3. Did not receive	8. DON'T KNOW

SECTION KW (MARITAL HISTORY)

Now we would like to ask about your marital history.

KW00a.	**CAPI CHECK COV2: IS RESPONDENT A PANEL RESPONDENT FOR BOOK III (AR01g=1) WITH PREPINTED KW ROSTER IN BOOK3A?**	No ..... 3➔ KW01a Yes, panel with KW 3A preprinted …… 1
KW00b.	When we interviewed you in 2007, we have the follwing information about your marital status at that time: **INTERVIEWER: READ THE INFORMATION LISTED IN THE KW PREPRINTED ROSTER**	1. Marital status : _____ 2. Name of last spouse/spouse in 2007 : _____ 3. PID of spouse : └─┴─┘
KW00c.	**INTERVIEWER CHECK: IS THE INFORMATION IN KW00B CORRECT?**	No .....3➔ **KW01a** Yes..... 1
KW00d.	Since the 2007 interview have you had any changes in your marriage status?	No ..... 3➔ **KW23a** Yes..... 1

KW01a	What is your current marital status?	Never married ..... 1➔**SECTION BR** Cohabitation ..... 2 Married, formal (KUA or Civil Registration) ..... 3 Married, formal according to religious law (nikah sirri) ..... 4 Married, formal according to adat law ..... 5 Separated ..... 6 Divorced..... 7 Widow/Widower 8
KW01.	**CAPI CHECK BOOK COVER: RESPONDENT FEMALE < 50 YEARS (COV3) AND PANEL RESPONDENT BOOK IV:**	Yes.....1➔**SECTION PK** No 3
KW02a.	What is the name of your current/latest spouse?	_____
KW02a1.	Do you have a marriage certificate with [….]	Yes.....1➔**KW02g** No 3
KW02a2	Reason not have a marriage certificate	. └─┘
KW02g.	**INTERVIEWER VERIFY KW02a AND AR00:** **1. If […] lives in the household fill in AR00 (line # from Roster).** **2. If […] died/does not live in household, but registered in the Roster, fill in AR00** **3. If […] is not registered in the Roster**	1. └─┴─┘ 2. └─┴─┘ 3.
KW02h.	**CAPI CHECK :RESPONDENT IS PANEL RESPONDENT .**	**NO .....3➔KW02x** **YES.....1**
KW02i.	**CAPI CHECK : RESPONDENT IS PANEL RESPONDENT BOOK IV IN 2007?**	**YES.....1➔SECTION PK** **NO 3**
KW02x.	**CAPI CHECK KW01a = 2**	**YES..... 1➔KW02l** **NO……\=3**
KW02j.	What was the date of your current/most recent marriage?	1. └─┴─┘ / └─┴─┴─┴─┘ Month Year 8. DON'T KNOW
KW02k.	**CAPI CHECK :** **YEAR IN KW02j IS BEFORE 2007.**	**YES, PANEL RESPONDENT.....1➔KW05** NO, PANEL RESPONDENT .....2➔KW12a **NEW RESPONDENT.....3➔KW12a**

KW02l.	When did you start living together with your partner ?	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month Year 8. DON'T KNOW
KW02m.	What was the value of the assets you owned just prior to of your living together with your partner?	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. ..... 1 DON'T KNOW 8
KW02n.	What was the highest education level attended by your partner? 01. None ..... 02.Elementary School ..... 03. Junior High General..... 04. Junior High Vocational ..... 05. Senior High General ..... 06. Senior High Vocational ..... 60.College (D1, D2, D3) ..... 61.University (BA) ..... 62.University (MA)..... 63.University (PHD)..... 11. Adult Education A..... 12. Adult Education B..... 15. Adult Education C 13. Open University..... 14. Islamic School *(Pesantren)*..... 17. School for the disabled ..... 70. Madrasah, General..... 72. Islamic Elementary School *(Madrasah Ibtidaiyah)*..... 73. Islamic Junior/High School *(Madrasah Tsanawiyah)* ..... 74. MadrasahSenior High School *(Madrasah Aaliyah)* ..... 90. Kindergarten..... 98. Don't Know..... 95. Other.....	01. 02. 03. 04. 05. 06. 60. 61. 62. 63. 11. 12. 15. 13. 14. 17. 70. 72. 73. 74. 90. 98. 95.....
KW02o.	What was the highest grade completed by your partner? 00. Didn't complete 1st grade at that level 01. 1 04. 4 07. Graduated 02. 2 05. 5 96. Unschooled 03. 3 06. 6 98. DON'T KNOW	00 01 02 03 04 07 Graduated 05 96 Unschooled 06 98 DON'T KNOW →**KW23a**
KW02ox.	**CAPI CHECK COV 2: RESPONDENT IS A PANEL RESPONDENT?**	NO ..... 3→**KW05** YES ..... 1→**KW23a**

KW12a.	What was the bride price/dowry for your current/ most recent marriage? **(CIRCLE ALL THAT APPLY)**	Nothing ..... W→**KW13a** Sholat (praying) accessory .... A Money ..... B Land..... C Building/House ..... D Jewelry..... E Complete set of clothing ..... G Food..... H Household Items.....I Religious book ..... K Beauty items .....L Livestock.....M Other..... V
KW12b.	What was the value of the bride price/dowry of your current/most recent marriage at the time of the marriage?	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. ..... 1 ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Other currency ..... 2 DON'T KNOW 8
KW13a.	What did you receive as a gift, not a dowry/bride price,at the time of your current/most recent marriage, that was not consumed for the wedding party? **(CIRCLE ALL THAT APPLY)**	Nothing ..... W→**KW14** Sholat (praying) accessory .... A Money ..... B Land..... C Building/House ..... D Jewelry..... E Complete set of clothing ..... G Food..... H Household Items.....I Religious book ..... K Beauty items .....L Livestock.....M Other..... V
KW13b.	What was the value of the gift?	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. ..... 1 ⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Other currency ..... 2 DON'T KNOW 8
KW14.	What was the value of the assets you owned just prior to the wedding of your current/latest marriage?	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. ..... 1 DON'T KNOW 8

SECTION KW (MARITAL HISTORY)

KW14a.	Right after the wedding ceremony of your current/latest marriage, did you move?	NO, lived at the same place .....3➔**KW14c** YES, moved within the same village.....2➔**KW14c** YES, moved to another Village.....1
KW14b.	What is the [ ] name at the place you moved at that time?	A. **Vill:** 1. _____ 3. Same as current residence 8. DON'T KNOW B. **Kec:** 1. _____ 3. Same as current residence 8. DON'T KNOW C. **Kab:** 1. _____ 3. Same as current residence 8. DON'T KNOW D. **Prov:** 1. _____ 3. Same as current residence 8. DON'T KNOW
KW14c.	How long did you reside at your first residence after the wedding?	01. ⌊_⌊_⌋ Weeks .....01 Month .....02 Year .....03 96. Still live there 98. DON'T KNOW
KW14d.	At the time you married your current/latest husband/wife, did your husband/wife change residence?	Yes .....1 No 3
KW14d1.	Because of adat and the high cost of wedding, many couples choose to live together before the wedding. Did you and your current/latest partner live together before the wedding?	No .....3 ➔**KW14e** Yes 1
KW14d2.	How long did you live together before the wedding?	01. ⌊_⌊_⌋ Weeks .....01 Month .....02 Year .....03 98. DON'T KNOW
KW14e.	Did you and your current/latest husband/wife start to live together right after the wedding?	Yes .....1➔**KW14g** No 3
KW14f.	How long after the wedding took place did you start to live together with your husband/wife?	96. Don't live together yet ➔**KW03** 01. ⌊_⌊_⌋ Weeks .....01 Month .....02 Year .....03 98. DON'T KNOW

KW14g.	At the time you lived together with your current/latest husband/wife for the first time, who else lived in the house? **(CIRCLE ALL THAT APPLY)** IN THIS CASE THE WEDDING LOCATION IS NOT REGARDED AS A JOINT RESIDENCE (REFER TO ANSWER KW14e = 1 (YES)) AND RESIDENCE REGISTERED IN KW14b.	Nobody else .....W Own parents .....A Parents-in-law.....C Biological brother.....D Biological sister .....E Brother-in-law .....F Sister-in-law.....G Other family members .....H Not family-related .....I Child (biological and non-biological) ..... J
KW03.	How many times have you been married ?	⌊_⌊_⌋ Times
KW04.	Who chose your husband/wife (from your first marriage) ?	Parents .....01 Self .....03 Family .....04 Other:.....05
KW05.	**CAPI CHECK COV5:**	FEMALE .....3➔**KW08** MALE.....1
KW06.	Do you currently have more than one wife?	NO .....3➔**KW09** YES 1
KW07.	Please mention the names of all your wives, starting with your wife in the household, then your wife in another household, and all wives from your previous marriages.	➔**KW09** **(WRITE DOWN THE NAME OF CURRENT/LAST WIFE)**
KW08.	Please mention the names of all your husbands, (starting with whom you are married now or the latest marriage, then the previous marriage and so forth).	➔**KW09** **(WRITE DOWN THE NAME OF CURRENT/LAST HUSBAND)**

SECTION KW (MARITAL HISTORY)

FILL OUT NAMES AND DATES STARTING WITH CURRENT/LATEST MARRIAGE

KWN: NUMBER OF MARRIAGE		1. Latest / Current	2. Second Latest	3. Third Latest	4. Fourth Latest	5. Fifth Latest	6. Sixth Latest
KW09.	Name of husband/wife:	_____	_____	_____	_____	_____	_____
KW10.	What (month/year) did you get married? **(CAPI PRELOAD KW02j)**	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW11a** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW11a** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW11a** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW11a** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW11a** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW11a** 8. DON'T KNOW
KW11.	How old were you when your [...] marriage started?	⌊⌊⌋⌋ Year	⌊⌊⌋⌋ Year	⌊⌊⌋⌋ Year	⌊⌊⌋⌋ Year	⌊⌊⌋⌋ Year	⌊⌊⌋⌋ Year
KW11a.	Because of adat and the high cost of wedding, many couples choose to live together before the wedding. Did you and your current/latest partner live together before the wedding?	1. Yes 3. No	1. Yes 3. No	1. Yes 3. No	1. Yes 3. No	1. Yes 3. No	1. Yes 3. No
KW11b.	What is the status of your […] marriage	2 3 4 5 **➔KW20** 6 7 8	2 3 4 5 **➔KW20** 6 7 8	2 3 4 5 **➔KW20** 6 7 8	2 3 4 5 **➔KW20** 6 7 8	2 3 4 5 **➔KW20** 6 7 8	2 3 4 5 **➔KW20** 6 7 8
KW18.	When (month/year) did the marriage end/separation begin?	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW20** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW20** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW20** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW20** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW20** 8. DON'T KNOW	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ **MONTHYEAR** **➔KW20** 8. DON'T KNOW
KW19.	How old were you when the [...] marriage ended/separation began?	⌊⌊⌋⌋ years old	⌊⌊⌋⌋ years old	⌊⌊⌋⌋ years old	⌊⌊⌋⌋ years old	⌊⌊⌋⌋ years old	⌊⌊⌋⌋ years old
KW20.	What was the highest education level attended by your husband/wife of the [...] marriage	⌊⌊⌋⌋	⌊⌊⌋⌋	⌊⌊⌋⌋	⌊⌊⌋⌋	⌊⌊⌋⌋	⌊⌊⌋⌋
KW21.	What was the highest grade completed by your husband/wife of the [...] marriage?	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98

CODE FOR KW11b

2. Cohabitation
3. Married, formal (KUA orCivil Registration)
4. Married, formal according to religious law (nikah siri)
5. Married, formal according to adat law
6. Separated
7. Divorced
8. Widow/widower

CODE FOR KW20

01. None
02. Elementary School
03. Junior High (SLP/SLTP) General
04. Junior High (SLP/SLTP) Vocational
05. Senior High (SMA/SLA/SLTA) General
06. Senior High (SMA/SLA/SLTA) Vocat.
60. Academy D1, D2, D3
61. University, Bachelor S1
62. University, Master S2
63. University, Doctorate S3
11. Adult Education A
12. Adult Education B
13. Open University
14. Pesantren
15. Adult Education C
17. School for the disabled
72. Islamic School- Elementary (MI)
73. Islamic School- Junior High(MT)
74. Islamic School- Senior High (MA)
90. Kindergarten
98. DON'T KNOW
95. Others

KODE KW21:

00. Didn't complete school at that level
01. 1
02. 2
03. 3
04. 4
05. 5
06. 6
07. Graduated
96. No school/not yet
98. DON'T KNOW

SECTION KW (MARITAL HISTORY)

KWN: NUMBER OF MARRIAGE	1. Latest / Current	2. Second Latest	3. Third Latest	4. Fourth Latest	5. Fifth Latest	6. Sixth Latest
KW09. Name of husband/wife:	_____	_____	_____	_____	_____	_____
KW22x. **CAPI CHECK :** **RESPONDENT IS:** **3. NEW RESPONDENT → KW22b** **1. PANEL RESPONDENT**	**3 → KW22b** **1**	**3 → KW22b** **1**	**3 → KW22b** **1**	**3 → KW22b** **1**	**3 → KW22b** **1**	**3 → KW22b** **1**
KW22a. **CAPI CHECK KW10 FOR PANEL:** **3. NO OTHER MARRIAGE .....** **2. MARRIAGE BEGAN BEFORE 2007.....** **1. MARRIAGE BEGAN AFTER 2006.....**	**3.→KW23a** **2.→KW23a** **1.→KW09 COLUMN 2**	**3.→KW23a** **2.→KW23a** **1.→KW09 COLUMN 3**	**3.→KW23a** **2.→KW23a** **1.→KW09 COLUMN 4**	**3.→KW23a** **2.→KW23a** **1.→KW09 COLUMN 5**	**3.→KW23a** **2.→KW23a** **1.→KW09 COLUMN 6**	**3.→KW23a** **2.→KW23a** **1.→KW09 SUPPLEMENT**
KW22b. **INTERVIEWER'S NOTE:** **FOR NEW:** **3. NO OTHER MARRIAGE** **1. ANOTHER MARRIAGE**	**3 → KW23a** **1 → KW09 COLUMN 2**	**3 → KW23a** **1 → KW09 COLUMN 3**	**3 → KW23a** **1 → KW09 COLUMN 2**	**3 → KW23a** **1 → KW09 COLUMN 3**	**3 → KW23a** **1 → KW09 COLUMN 2**	**3 → KW23a** **1 → KW09 COLUMN 3**

KW23a.	If you could choose exactly the number of children to have in your whole life, how many would that be?	⌊_⌊_⌋ Children ..... 1 UP TO GOD..... 95
KW23.	**INTERVIEWER'S NOTE:** **RESPONDENT IS A:**	FEMALE ..... 5 UNMARRIED MALE ..... 3 → **SECTION MG** MARRIED MALE ..... 1→**KW24 a**
KW23b.	How old were you on your first menstruation?	Never menstruated .....96 →**KW24a** ⌊_⌊_⌋ Years 01
KW23d.	Do you now still menstruate?	Yes .....1 →**SECTION PK** No, because another reason (medication, contraception method, etc.).....2 → **SECTION PK** No (stop at all).....3
KW23e.	How old were you when you stopped having menstruation?	⌊_⌊_⌋ Years → **SECTION PK**
KW24a.	Are you and your wife physically able to conceive a child (again) without medical help?	Yes ..... 1 No 3
KW24b.	Have you and your wife ever sought medical attention to help you conceive?	Yes ..... 1 No 3

KW25.	Do you personally wish to have another child (besides the children you already have)?	No ..... 3 →**SECTION PK** Yes 1
KW26.	How many (more) children do you wish to have?	⌊_⌊_⌋ Children UP TO GOD 95
KW27.	Among the children that you (still) wish to have, how many sons and daughters do you wish to have?	01. a. ⌊_⌊_⌋ Sons b. ⌊_⌊_⌋ Daughters 95. UP TO GOD

SECTION PK (HOUSEHOLD DECISION-MAKING)

PK00a.	Are you currently married/cohabitate? (CAPI CEK COVER)	No..... 3 ➔**SECTION BR** Yes..... 1
PK00b.	Does your spouse live in this household now/in the last 6 months? (CAPI CEK AR01a, AR02b, AR13, AR14)	Yes..... 1➔**PK18** No..... 3
PK00c.	Where do your spouse live?	Same village..... 1 Same sub-district..... 2 Same district ..... 3 Same province ..... 4 Same country..... 5 Other country ..... 6 ➔**SECTION BR**

SECTION PK (HOUSEHOLD DECISION-MAKING)

We would like to know how your family makes decisions about expenditures and use of time.

EXPENDITURES AND USE OF TIME (PK2TYPE)	PK18. In your household, who makes decisions about: (CIRCLE ALL THAT APPLY ON EACH LINE)																	
	RESPONDENT	SPOUSE	SON	DAUGHTER	MOTHER	FATHER	MOTHER-IN-LAW	FATHER-IN-LAW	BROTHER	SISTER	BROTHER-IN-LAW	SISTER-IN-LAW	GRANDPARENT	SON/DAUGHTER IN-LAW	GRANDCHILD	OTHER	X or W or Y	CAN'T ANSWER
A1. Expenditure on food eaten at home	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
A2. Choice of food eaten at home	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
B. Routine purchases for the household of items such as cleaning supplies	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
C. Your clothes	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
D. Your spouse's clothes	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
E. Your children's clothes	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V	W	Z
F. Your children's education	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V	W	Z
G. Your children's health	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V	W	Z
H. Large expensive purchases for the household (i.e., refrigerator or TV)	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
I. Giving money to your parents/family	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V	X	Z
J. Giving money to your spouse's parents/family	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V	X	Z
K. Gifts for parties/weddings	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
L. Money for monthly arisan (savings lottery)	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V	X	Z
M. Money for monthly savings	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V	X	Z
N. Time the husband spends socializing	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
O. Time the wife spends socializing	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
P. Whether you/your spouse works? **INTERVIEWER NOTE: ASK WHETHER RESPONDENT OR SPOUSE DOES OR DOES NOT WORK**	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V		Z
Q. Whether you and your spouse use contraception? **INTERVIEWER NOTE: ASK FOR COUPLES USING AND NOT USING CONTRACEPTION**	A	B	C	D	E	F	G	H	I	J	K	L	M	O	P	V	Y	Z

Code PK18: X. Never used money for this purpose.Y. Never consider the use of contraception.W. No childrenV. OTHER Z. CAN'T ANSWER

SECTION PK (HOUSEHOLD DECISION-MAKING)

PK19a. CAPI CHECK : RESPONDENT IS PANEL RESPONDENT	No ..... 3 ➔**PK20** Yes 1
PK19b. What was the date of your current/most recent marriage? (CAPI CEK KW02j or KW10 last column)	DON'T KNOW..... 8 ➔**PK20** └┴┘ / └┴┴┴┘ ..... 1 MONTH / YEAR
PK19c. CAPI CHECK : YEAR IN PK19b IS BEFORE 2007?	Yes ..... 1 ➔**SECTION BR** No ..... 3 ➔**PK20**

	PK20. At that time that you were married, was [...] alive?					**PK21.** At the time that you were married/first cohabitate, how did the status of your parents compare to the status of your parents-in-law?
	PK20a. Father 1. Yes 3. No	**PK20b.** Mother 1. Yes 3. No	**PK20c.** Father-in-Law 1. Yes 3. No	**PK20d.** Mother-in-Law 1. Yes 3. No	**ANSWER PK21 IF "1" IS CIRCLED IN BOTH PK20 COLUMNS (PK3TYPE)**	
	INTERVIEWER NOTE: (CIRCLE 1 (YES), 3 (NO) IN EACH COLUMN FOR LINES A-H. BASED ON THE INFORMATION IN PK20a-PK20d.					
A.	**1 3**		**1 3**		Father's job	Higher 1 2 3 Lower 4 5 NA 6 UA 7 DK 8
B.	**1 3**		**1 3**		Father's education	Higher 1 2 3 Lower 4 5 NA 6 UA 7 DK 8
C.		**1 3**		**1 3**	Mother's education	Higher 1 2 3 Lower 4 5 NA 6 UA 7 DK 8
	PK20abx. CIRCLE "1" IF EITHER MOTHER OR FATHER WAS ALIVE		**PK20cdx.** CIRCLE "1" IF EITHER MOTHER-IN-LAW OR FATHER-IN-LAW WAS ALIVE			
D.	**1 3**		**1 3**		Position in community	Higher 1 2 3 Lower 4 5 NA 6 UA 7 DK 8
E.	**1 3**		**1 3**		Quality of house/neighborhood	Higher 1 2 3 Lower 4 5 NA 6 UA 7 DK 8
F.	**1 3**		**1 3**		Earnings	Higher 1 2 3 Lower 4 5 NA 6 UA 7 DK 8
G.	**1 3**		**1 3**		Land	Higher 1 2 3 Lower 4 5 NA 6 UA 7 DK 8
H.	**1 3**		**1 3**		Other assets	Higher 1 2 3 Lower 4 5 NA 6 UA 7 DK 8

Code PK21 :

1. Much higher
2. Somewhat higher
3. About the same
4. Somewhat lower
5. Much lower
6. PARENT(S) NOT ALIVE AT TIME OF MARRIAGE (NA)
7. UNWILLING TO ANSWER (UA)
8. DON'T KNOW (DK)

SECTION BR (PREGNANCY SUMMARY)

Now, I would like to ask about your pregnancy history.

BR00xa.	**CAPI CHECK : BOOK COVER**	MALE (COV5) ..... 1➔**SECTION MG** PANEL RESPONDENT BOOK IV .... 2➔**SECTION MG** LESS THAN 50 YEARS (C0V3) , FEMALE (COV5) AND HAS EVER MARRIED ..... 3➔**SECTION MG** OVER 49 (COV3) AND NOT RESPONDENT BOOK IV ..... 4 LESS THAN 50 YEARS (C0V3) ,FEMALE (COV5), ANDHAS NEVER MARRIED..... 5
BR01.	Now I would like to ask you about all children that you have so far. Have you ever given birth?	No ..... 3 ➔ **BR08** Yes 1
BR02.	Do you have biological sons or daughters who are now living with you?	No ..... 3 ➔ **BR05** Yes 1
BR03.	How many biological sons are now living with you?	⌊_⌋⌊_⌋ Males
BR04.	How many biological daughters are now living with you?	⌊_⌋⌊_⌋ Females
USE LIST OF HOUSEHOLDERS TO VERIFY NUMBER OF RESPONDENT'S BIOLOGICAL CHILDREN WHO LIVE IN THIS HOUSEHOLD. IF THE TOTAL OF BR03 + BR04 AND THE NUMBER OF RESPONDENT'S BIOLOGICAL CHILDREN IN LIST OF HOUSEHOLDERS DO NOT MATCH, DO SOME PROBING TO CONFIRM THE NUMBER. REPEAT THE QUESTION BY MENTIONING EACH BIOLOGICAL CHILD'S NAME FROM LIST OF HOUSEHOLDERS (AR01).		
BR05.	Do you have biological sons or daughters, who are still alive, but do not live with you?	No ..... 3 ➔ **BR08** Yes 1
BR06.	How many biological sons are still alive, but do not live with you?	⌊_⌋⌊_⌋ Males
BR07.	How many biological daughters are still alive, but do not live with you?	⌊_⌋⌊_⌋ Females
BR08.	Have you ever given live birth to a son or daughter, who later passed away though only lived for a while?	No ..... 3 ➔ **BR11** Yes 1

BR09.	How many sons were born alive but passed away later?	⌊_⌋⌊_⌋ Males
BR10.	How many daughters were born alive but passed away later?	⌊_⌋⌊_⌋ Females
BR11.	Have you ever had a pregnancy that resulted in a stillbirth?	No ..... 3 ➔ **BR13** Yes 1
BR12.	How many stillbirths have you had?	⌊_⌋⌊_⌋
BR13.	(Besides that) have you had any miscarriages?	No ..... 3 ➔ **BR15** Yes 1
BR14.	How many miscarriages have you had?	⌊_⌋⌊_⌋
BR15.	**INTERVIEWER GUIDELINE:** **ADD THE NUMBERS (BR03, BR04, BR06, BR07, BR09, AND BR10) AND ENTER AMOUNT HERE:** To confirm your answers, you have had ⌊_⌋⌊_⌋ livebirths, is it correct ?	⌊_⌋⌊_⌋ No ..... 3 ➔ **REVISE BR01-BR10** Yes 1
BR16.	**INTERVIEWER GUIDELINE:** **ADD THE NUMBERS (BR12 AND BR14) AND ENTER AMOUNT HERE:** Again, to confirm your answers, you have had ⌊_⌋ stillbirths and miscarriages, is it correct ?	⌊_⌋⌊_⌋ No ..... 3 ➔ **REVISE BR12-BR14** Yes 1

SECTION MG (MIGRATION)

Now I would like to ask you about your birthplace and your moves from one place to another.

MG00x.	**CAPI CHECK COV2: PANEL RESPONDENT BOOK III (ar01g=1)?**	**Yes ..... [1]➔ MG18a** **No ..... [3]**
MG01.	What is the […] name of your birthplace when you were born?	A. Vill 1. _____ 3. Same as current residence 8. DK B. Kec 1. _____ 3. Same as current residence 8. DK C. Kab 1. _____ 3. Same as current residence 8. DK D. Prov 1. _____ 3. Same as current residence 8. DK E. Country 1. _____ 3. Same as current residence 8. DK
MG02.	To your best knowledge, have any of the above mentioned places changed their names?	DON'T KNOW ..... 8 ➔**MG04** No ..... 3 ➔**MG04** Yes 1
MG02a.	Is […] the current name?	3. No ➔**MG03b** 1.Yes
MG03a.	What was the name when you were born?	A. Vill 1. _____ 3. Same as current name (MG01) 8. DK B. Kec 1. _____ 3. Same as current name (MG01) 8. DK C. Kab 1. _____ 3. Same as current name (MG01) 8. DK D. Prov 1. _____ 3. Same as current name (MG01) 8. DK E. Country 1. _____ 3. Same as current name (MG01) 8. DK ➔**MG04**
MG03b.	What is the name now?	A. Vill 1. _____ 3. Same as name at birth (MG01) 8. DK B. Kec 1. _____ 3. Same as name at birth (MG01) 8. DK C. Kab 1. _____ 3. Same as name at birth (MG01) 8. DK D. Prov 1. _____ 3. Same as name at birth (MG01) 8. DK E. Country 1. _____ 3. Same as name at birth (MG01) 8. DK

MG04.	Was the place when you were born a:	Village ..... 1 Small town ..... 3 Big city ..... 5 DON'T KNOW 8
MG04a.	When you were 12 years old did you live in the same place as the place where you were born?	Yes ..... 1 ➔**MG18a** No 3
MG05.	What was the […] name of the place where you lived when you were 12 years old (the name when you were age 12)?	A. Vill 1. _____ 3. Same as name at birth (MG01) 8. DK B. Kec 1. _____ 3. Same as name at birth (MG01) 8. DK C. Kab 1. _____ 3. Same as name at birth (MG01) 8. DK D. Prov 1. _____ 3.Same as name at birth (MG01) 8. DK E. Country 1. _____ 3.Same as name at birth (MG01) 8. DK
MG06.	To your best knowledge, have any of the above mentioned places changed their names (since you were 12)?	DON'T KNOW ..... 8➔**MG08** No ..... 3➔**MG08** Yes 1
MG07.	Is the name of […] still the same or has it been changed?	A. Vill 1. _____ 3. Same name as when I was 12 (MG05) 8. DK B. Kec 1. _____ 3. Same name as when I was 12 (MG05) 8. DK C. Kab 1. _____ 3. Same name as when I was 12 (MG05) 8. DK D. Prov 1. _____ 3. Same name as when I was 12 (MG05) 8. DK E. Country 1. _____ 3. Same name as when I was 12 (MG05) 8. DK
MG08.	When you were 12, was the place a:	Village ..... 1 Small town ..... 3 Big city ..... 5 DON'T KNOW 8
MG08a.	When you were 12 ,were your biologal parents still married?	NA ..... 6 No ..... 3 Yes 1
MG08b.	When you were 12, did you live with your mother?	NA ..... 6 No ..... 3 Yes 1
MG08c.	When you were 12, did you live with father?	NA ..... 6 No ..... 3 Yes 1

HHID ⌊_⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ HHM ⌊_⌊_⌋ PID ⌊_⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ NAME _____

MG18a.	**CAPI CHECK : Respondent is panel for Book IIIA ?**	No..... 3➔**MG19b** Yes with preprinted..... 1
MG18b.	In 2007 when we interviewed you, you were living in: **INTERVIEWER WRITE INFORMATION FROM PREPRINTED MIGRATION FORM.**	A. Village: 1. _____ B. Kecamatan: 1. _____ C. Kabupaten: 1. _____ D. Province: 1. _____ E. Country: 1. _____

MG18b1.	**CAPI CHECK : IF THE RESPONDENT DOESN'T AGREE ON MG18b,**	YES .....1 ➔**MG18c** NO 3

MG18b2.	In 2007 when we interviewed you, you were living in:	A. Village: 1. _____ 3. Same as MG08b 8. DK B. Kecamatan: 1. _____ 3. Same as MG08b 8. DK C. Kabupaten: 1. _____ 3. Same as MG08b 8. DK D. Province: 1. _____ 3. Same as MG08b 8. DK E. Country: 1. _____ 3. Same as MG08b 8. DK

MG18c.	To your best knowledge, have any of the above mentioned places changed their names?	DON'T KNOW ..... 8➔**MG18e** No..... 3➔**MG18e** Yes..... 1
MG18d.	Is the name […] same or changed?	A. Vill: 1. _____ 3. Same as MG18b 8. DK B. Kec: 1. _____ 3. Same as MG18b 8. DK C. Kab: 1. _____ 3. Same as MG18b 8. DK D. Prov: 1. _____ 3. Same as MG18b 8. DK E. Country: 1. _____ 3. Same as MG18b 8. DK
MG18e.	Since 2007 when we interviewed you, have you ever moved across village to live at the new location more than 6 months?	No.....3 Yes .....1 ➔**MG20b1**
MG19b.	Have you ever moved since the age of 12?	No.....3➔**MG20b1** Yes 1
MG20b.	Have you ever moved across village to live at the new location more than 6 months?	No.....3 Yes 1
MG20b1.	**CAPI CHECK MG18a: PANEL RESPONDENT WITH MG PREPRINTED?**	Yes .....1➔**MG20c left column** No.....3➔**MG20c right column**

SECTION MG (MIGRATION)

CAPI CHECK : PANEL RESPONDENT WITH PREPRINTED MG……..[1] ⬇ ASK MG21-MG40 FOR EACH MIGRATION SINCE 2007 TO PANEL RESPONDENT	CAPI CHECK : NEW RESPONDENT.....[3] ⬇ ASK MG21-MG40 FOR EACH MIGRATION SINCE THE RESPONDENT WAS 12 YEARS OLD
MG20c. Now we would like to ask you how many times you moved since interview in 2007across village and stayed for six months or more?	**MG20c.** Now we would like to ask you how many times you moved across village since 12 years old and stayed for six months or more?
MG20c. NUMBER OF MIGRATION ⌊_⌊_⌋	
MGG20d. CAPI CHECK : **IF MG20c = 00 .....3 ➔SECTION TK** **IF MG20c> 00 .....1 ➔SECTION MG21**	
CAPI CHECK : IF MIGRATIONS ARE MORE THAN 4 TIMES, CONTINUE AT A SUPPLEMENTAL PAGE FOR THE FIFTH MIGRATION ➔SUPPLEMENT MG21	

SECTION MG (MIGRATION)

MOVENUM: NUMBER IF MIGRATION		1ST	2ND	3RD	4TH
MG21.	What is the [...] name of the [...] destination?	A. Vill: 1. _____ 3. Same as current residence 8. DON'T KNOW B. Kec: 1. _____ 3. Same as current residence 8. DON'T KNOW C. Kab: 1. _____ 3. Same as current residence 8. DON'T KNOW D. Prov: 1. _____ 3. Same as current residence8. DON'T KNOW E. Country: 1. _____ 3. Same as current residence 8. DON'T KNOW	A. Vill: 1. _____ 3. Same as current residence 8. DON'T KNOW B. Kec: 1. _____ 3. Same as current residence 8. DON'T KNOW C. Kab: 1. _____ 3. Same as current residence 8. DON'T KNOW D. Prov: 1. _____ 3. Same as current residence8. DON'T KNOW E. Country: 1. _____ 3. Same as current residence 8. DON'T KNOW	A. Vill: 1. _____ 3. Same as current residence 8. DON'T KNOW B. Kec: 1. _____ 3. Same as current residence 8. DON'T KNOW C. Kab: 1. _____ 3. Same as current residence 8. DON'T KNOW D. Prov: 1. _____ 3. Same as current residence8. DON'T KNOW E. Country: 1. _____ 3. Same as current residence 8. DON'T KNOW	A. Vill: 1. _____ 3. Same as current residence 8. DON'T KNOW B. Kec: 1. _____ 3. Same as current residence 8. DON'T KNOW C. Kab: 1. _____ 3. Same as current residence 8. DON'T KNOW D. Prov: 1. _____ 3. Same as current residence8. DON'T KNOW E. Country: 1. _____ 3. Same as current residence 8. DON'T KNOW
MG22.	To your best knowledge, have any of the above mentioned places changed their names?	DON'T KNOW ..... 8 ➔**MG24** No ..... 3 ➔**MG24** Yes 1	DON'T KNOW ..... 8 ➔**MG24** No ..... 3 ➔**MG24** Yes 1	DON'T KNOW ..... 8 ➔**MG24** No ..... 3 ➔**MG24** Yes 1	DON'T KNOW ..... 8 ➔**MG24** No ..... 3 ➔**MG24** Yes 1
MG23.	Is the [...] name still the same (as MG21) or has it been changed?	A. Vill: 1. _____ 3. Same as above MG21 8. DON'T KNOW B. Kec: 1. _____ 3. Same as above MG21 8. DON'T KNOW C. Kab: 1. _____ 3. Same as above MG21 8. DON'T KNOW D. Prov: 1. _____ 3. Same as above MG21 8. DON'T KNOW E. Country: 1. _____ 3. Same as above MG21 8. DON'T KNOW	A. Vill: 1. _____ 3. Same as above MG21 8. DON'T KNOW B. Kec: 1. _____ 3. Same as above MG21 8. DON'T KNOW C. Kab: 1. _____ 3. Same as above MG21 8. DON'T KNOW D. Prov: 1. _____ 3. Same as above MG21 8. DON'T KNOW E. Country: 1. _____ 3. Same as above MG21 8. DON'T KNOW	A. Vill: 1. _____ 3. Same as above MG21 8. DON'T KNOW B. Kec: 1. _____ 3. Same as above MG21 8. DON'T KNOW C. Kab: 1. _____ 3. Same as above MG21 8. DON'T KNOW D. Prov: 1. _____ 3. Same as above MG21 8. DON'T KNOW E. Country: 1. _____ 3. Same as above MG21 8. DON'T KNOW	A. Vill: 1. _____ 3. Same as above MG21 8. DON'T KNOW B. Kec: 1. _____ 3. Same as above MG21 8. DON'T KNOW C. Kab: 1. _____ 3. Same as above MG21 8. DON'T KNOW D. Prov: 1. _____ 3. Same as above MG21 8. DON'T KNOW E. Country: 1. _____ 3. Same as above MG21 8. DON'T KNOW
MG24.	When did you move to (DESTINATION)?	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ ➔**MG26** Month Year 8. DON'T KNOW	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ ➔**MG26** Month Year 8. DON'T KNOW	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ ➔**MG26** Month Year 8. DON'T KNOW	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ ➔**MG26** Month Year 8. DON'T KNOW
MG25.	How old were you when you moved?	⌊_⌊_⌋ Year	⌊_⌊_⌋ Year	⌊_⌊_⌋ Year	⌊_⌊_⌋ Year

SECTION MG (MIGRATION)

MOVENUM: NUMBER IF MIGRATION		1ST	2ND	3RD	4TH
MG26.	Was the place a: (**BASED ON MG21 & MG23**)	Village ..... 1 Small town ..... 3 Big city ..... 5 DON'T KNOW 8	Village ..... 1 Small town ..... 3 Big city ..... 5 DON'T KNOW 8	Village ..... 1 Small town ..... 3 Big city ..... 5 DON'T KNOW 8	Village ..... 1 Small town ..... 3 Big city ..... 5 DON'T KNOW 8
MG27.	How many kilometers is the distance from (PREVIOUS PLACE) to (DESTINATION)	⌊⌋,⌊⌋⌊⌋⌊⌋ Km ..... 1 DON'T KNOW 8	⌊⌋,⌊⌋⌊⌋⌊⌋ Km ..... 1 DON'T KNOW 8	⌊⌋,⌊⌋⌊⌋⌊⌋ Km ..... 1 DON'T KNOW 8	⌊⌋,⌊⌋⌊⌋⌊⌋ Km ..... 1 DON'T KNOW 8
MG28.	What was the main purpose for your move to (DESTINATION)?				
	02. Education/training-related	02➔ **MG31**	01➔ **MG29**	01➔ **MG29**	01➔ **MG29**
	03. Military career-related	03➔ **MG31**	02➔ **MG31**	02➔ **MG31**	02➔ **MG31**
	Family related:		03➔ **MG31**	03➔ **MG31**	03➔ **MG31**
	04. Marriage	04➔ **MG34**	04➔ **MG34**	04➔ **MG34**	04➔ **MG34**
	05. Pregnancy	05 ➔ **MG34**	05 ➔ **MG34**	05 ➔ **MG34**	05 ➔ **MG34**
	06. Death of spouse	06➔ **MG34**	06➔ **MG34**	06➔ **MG34**	06➔ **MG34**
	07. Sickness of self/spouse	07➔ **MG34**	07➔ **MG34**	07➔ **MG34**	07➔ **MG34**
	08. Migration with family	08➔ **MG34**	08➔ **MG34**	08➔ **MG34**	08➔ **MG34**
	09. To be closer to family	09➔ **MG34**	09➔ **MG34**	09➔ **MG34**	09➔ **MG34**
	10. Death of other	10➔ **MG34**	10➔ **MG34**	10➔ **MG34**	10➔ **MG34**
	11. Sickness of other	11➔ **MG34**	11➔ **MG34**	11➔ **MG34**	11➔ **MG34**
	12. Live w/family member	12➔ **MG34**	12➔ **MG34**	12➔ **MG34**	12➔ **MG34**
	13. To be independent, separate from parents	13➔ **MG34**	13➔ **MG34**	13➔ **MG34**	13➔ **MG34**
	14. Political disturbance	14➔ **MG34**	14➔ **MG34**	14➔ **MG34**	14➔ **MG34**
	15. Eviction	15➔ **MG34**	15➔ **MG34**	15➔ **MG34**	15➔ **MG34**
	16. Like the destination	16➔ **MG34**	16➔ **MG34**	16➔ **MG34**	16➔ **MG34**
	17. Transmigration	17➔ **MG34**	17➔ **MG34**	17➔ **MG34**	17➔ **MG34**
	19. Dry season/drought	19➔ **MG34**	19➔ **MG34**	19➔ **MG34**	19➔ **MG34**
	22. Family problem	22➔ **MG34**	22➔ **MG34**	22➔ **MG34**	22➔ **MG34**
	23. New housing opportunity	23 ➔ **MG34**	23 ➔ **MG34**	23 ➔ **MG34**	23 ➔ **MG34**
	24. Divorce	24➔ **MG34**	24➔ **MG34**	24➔ **MG34**	24➔ **MG34**
	25 Natural and other disasters	25 ➔ **MG34a**	25 ➔ **MG34a**	25 ➔ **MG34a**	25 ➔ **MG34a**
	95. Other	95 ..... ➔ **MG34**	95 ..... ➔ **MG34**	95 ..... ➔ **MG34**	95 ..... ➔ **MG34**
	01. Work-related (fired, retired, end-of-contract) (non-military)	01			
MG29.	Whose work?				
	02. Husband/wife	02➔ **MG34**	02➔ **MG34**	02➔ **MG34**	02➔ **MG34**
	03. Birth parents	03➔ **MG34**	03➔ **MG34**	03➔ **MG34**	03➔ **MG34**
	04. Siblings	04➔ **MG34**	04➔ **MG34**	04➔ **MG34**	04➔ **MG34**
	05. Biological child	05➔ **MG34**	05➔ **MG34**	05➔ **MG34**	05➔ **MG34**
	06. Other family member	06➔ **MG34**	06➔ **MG34**	06➔ **MG34**	06➔ **MG34**
	07. Not a family member	07➔ **MG34**	07➔ **MG34**	07➔ **MG34**	07➔ **MG34**
	01. Self	01	01	01	01

SECTION MG (MIGRATION)

MOVENUM: NUMBER OF MIGRATION		1ST	2ND	3RD	4TH
MG30.	In what connection was your move made? 1. To get work at the destination 2. To search for new job opportunities due to job market limitation at previousplace 3. Company transfer/relocation 4. Retirement 6. Job problem 7. Be closer to job 5. Other.....	1 2 3 4 6 7 5 ..... ➔ MG34	1 2 3 4 6 7 5 ..... ➔ MG34	1 2 3 4 6 7 5 ..... ➔ MG34	1 2 3 4 6 7 5..... ➔ MG34
MG31.	Whose education/training/military career?	Self .....1 Husband/wife.....2 Other family member .....3 Not a family member .....4 ➔ MG34	Self .....1 Husband/wife.....2 Other family member .....3 Not a family member.....4 ➔ MG34	Self .....1 Husband/wife.....2 Other family member .....3 Not a family member.....4 ➔ MG34	Self .....1 Husband/wife.....2 Other family member .....3 Not a family member.....4 ➔ MG34
MG34a.	What kind of natural disaster?	Flood ..... 01 Landslide/mudslide..... 02 Mudflow ..... 03 Volcanic eruption ..... 04 Earthquake ..... 05 Tsunami..... 06 Windstorm ..... 07 Forest fire ..... 08 Fire ..... 09 Social Conflic..... 10	Flood..... 01 Landslide/mudslide..... 02 Mudflow ..... 03 Volcanic eruption ..... 04 Earthquake ..... 05 Tsunami..... 06 Windstorm ..... 07 Forest fire ..... 08 Fire ..... 09 Social Conflic..... 10	Flood..... 01 Landslide/mudslide..... 02 Mudflow ..... 03 Volcanic eruption ..... 04 Earthquake ..... 05 Tsunami..... 06 Windstorm ..... 07 Forest fire ..... 08 Fire ..... 09 Social Conflic..... 10	Flood..... 01 Landslide/mudslide..... 02 Mudflow ..... 03 Volcanic eruption ..... 04 Earthquake ..... 05 Tsunami..... 06 Windstorm ..... 07 Forest fire ..... 08 Fire ..... 09 Social Conflic..... 10
MG34.	Did you move together with other householders?	No.....3➔MG39 Yes 1	No.....3 ➔MG39 Yes 1	No.....3➔ MG39 Yes 1	No.....3➔ MG39 Yes 1
MG35.	How many householders moved with you?	⌊__⌋⌊__⌋ Persons	⌊__⌋⌊__⌋ Persons	⌊__⌋⌊__⌋ Persons	⌊__⌋⌊__⌋ Persons
MG36.	Who moved together with you at the time of the move?**(CIRCLE ALL THAT APPLY)** A. Husband/wife..... B. Father..... C. Mother ..... D. Brother..... E. Sister ..... F. Parents/sister/brother-in-laws..... G. Children ..... I. Not a family member ..... H. Other family member	A B C D E F G I V	A B C D E F G I V	A B C D E F G I V	A B C D E F G I V .....
MG39.	After this move was there any other move which crossed the village (Desa) border line for 6 or more months? (Including the move to this residence, even if it has lasted for less than six months.)	Yes .....1 ➔ **MG21 NEXT COLUMN** No……..3➔ **SECTION TK**	Yes.....1 ➔ **MG21 NEXT COLUMN** No……..3➔ **SECTION TK**	Yes .....1 ➔ **MG21 NEXT COLUMN** No……..3➔ **SECTION TK**	Yes.....1 ➔ **MG21 SUPPLEMENT** No……..3➔ **SECTION TK**

SECTION TK (EMPLOYMENT)

Now we would like to ask about your work experience.

TK01a.	During the past week, did you do any of these activities?	Yes / No a. Work for pay 1 3 b. Attend school 1 3 c. Housekeeping 1 3 d. Job searching 1 3
TK01.	What was your primary activity during the past week?	Working/trying to work/helping to earn income ..... 01➔**TK16c1** Job searching ..... 02 Attending school ..... 03 Housekeeping ..... 04 Retired ..... 05 Sick/disable ..... 07 Other 95
TK02.	Did you work/try to work/help to earn income for pay for at least 1 hour during the past week?	Yes ..... 1➔**TK16c1** No 3
TK03.	Do you have a job/business, but were temporarily not working during the past week?	Yes ..... 1➔**TK16c1** No 3
TK04.	Did you work at a family-owned (farm or non-farm) business during the past week?	Yes ..... 1➔**TK16c1** No 3
TK05.	Have you ever worked before?	No ..... 3➔**TK16d** Yes 1
TK06a.	Did you last work in 2006 or later?	Yes ..... 1➔**TK16d** No 3
TK07.	When did you work for the last time?	Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
TK08.	Why haven't you worked again since that year? **(CIRCLE ALL THAT APPLY)**	Retirement ..... A Prolonged sickness ..... B Handicap ..... C Marriage ..... D Too old ..... E Have a child ..... F Family responsibilities ..... N Forbidden ..... O Other family reason ..... P Fired ..... Q Cannot find work ..... R Do not want to work ..... S Company closed/moved/bankrupt ..... T Other V

SECTION TK (EMPLOYMENT)

TK15.	Which category best describes the work you did in your last job?	Unpaid family worker.....06➔**TK16c** Self employed .....01 Self-employed with unpaid family worker/temporary worker .....02 Self-employed with permanent worker .....03 Government worker.....04 Private worker .....05 Casual worker in agriculture.....07 Casual worker not in agriculture.....08
TK16a.	What was your monthly income when you were working at that job?	⌊⌊⌊,⌊⌊⌊,⌊⌊⌊ Rp. ..... 1➔**TK16b** DON'T KNOW 8
TK16a1.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 2 millions, Rp 8 millions, Rp 10 millions CAPI randomizes entry points: Rp 2 millions (2UP), Rp 8 millions (1UP 1DOWN)
TK16b.	Was that a […?	Wage.....1 Net profits (after taking out costs) .....3 ➔**TK16d**
TK16c.	What is the name of your employer?	Name _____ AR00 ⌊⌊⌊ ➔**TK16d**
TK16c1.	How satisfied are you with your current job?	Very satisfied..... 1 Satisfied ..... 2 Unsatisfied ..... 3 Very unsatisfied..... 4
TK16d.	In the past one month, have you been looking for a job?	No .....3➔**TK16h** Yes.....1
TK16e.	How long have you been looking for a job in the past one month?	1 ⌊⌊⌊ weeks 2. ⌊⌊⌊ days
TK16f.	What activities have you done for your job search?	**Yes** **No** a. Registered with government job fairs 1 3 b. Registered with private job fairs 1 3 c. Registered with school/university job fairs 1 3 d. Contacted company 1 3 e. Responded to job ads 1 3 f. Contacted friends/relatives 1 3 g. Done nothing 1 3
TK16g.	Do you have a valid "Yellow Card"?	Yes..... 1 No ..... 3 ➔**TK16i**

TK16h.	What is the main reason not looking for a job?	Feel impossible to find a job.....01 Already has a job, but has not started yet .....02 Attending school.....03 Housekeeping .....04 Already has a business .....05 Do not need to.....06 Do not able to do work .....07 Too old .....08 Other 95
TK16i.	In the past 12 months, have you been preparing to set up a business?	No.....3➔**TK16k** Yes 1
TK16j.	What activities have you done in preparing to set up a business in the last 12 months?	**Yes** **No** a. Looked for capital 1 3 b. Looked for place of business 1 3 c. Arranged for business license 1 3 d. Done nothing 1 3

TK16k.	**CAPI CHECK :**	**IF TK05=1 AND TK06a =1 ..... 2➔ TK28** **IF TK05=1 AND TK06a=3 ..... 3➔ TK47x** **IF TK05=3 ..... 4➔SECTION SI** **IF TK01=1 OR TK02=1 OR TK03=1 OR TK04=1 ..... 1**

A. PRIMARY JOB THE JOB WHICH CONSUMES THE MOST TIME		
TK18A.	Where do you work on your [...] job? **(ENTER NAME OF COMPANY/EMPLOYER)**	_____ _____ _____
TK18Aa.	What is the address of the company?	_____ _____
TK18Ab.	What is telephone number of the company?	A.Phone ⌊⌊⌊⌊ ⌊⌊⌊⌊⌊⌊⌊⌊ B. Cellphone ⌊⌊⌊⌊⌊⌊⌊⌊⌊⌊⌊⌊ Belonging to_____ W . NA Y . DK
TK19A.	What does your company produce?	_____ _____
TK19Ab.	**CODE FOR SECTORS**	⌊⌊⌊
TK20A.	What are your primary duties at your workplace?	_____
TK20aA.	How many people work at your firm?	⌊⌊⌊,⌊⌊⌊ Persons ..... 1➔**TK21A** DON'T KNOW..... 8

SECTION TK (EMPLOYMENT)

TK20aB.	Is it[…]?	1. 1- 4 people 2. 5-19 people 3. 20-99 people 4. ≥ 100 people
TK21A.	What was the total number of hours you worked during the past week (on your job)?	⌊_⌋⌊_⌋⌊_⌋ Hours/Week
TK22A.	Normally, what is the approximate total number of hours you work per week?	⌊_⌋⌊_⌋⌊_⌋ Hours/Week
TK23A.	Approximately what is the total number of weeks you work per year?	⌊_⌋⌊_⌋ Weeks/Year
TK23A2.	How long have you worked on this job?	⌊_⌋⌊_⌋ Years ⌊_⌋⌊_⌋ Months
TK23A4.	Are you a member of a labor union or a business association?	Yes.....1 No 3
TK24A.	Which category best describes the work that you do?	Self employed .....01➔ **TK25A4** Self-employed with unpaid family worker/temporary worker .....02➔**TK25A4** Self-employed with permanent worker .....03➔**TK25A4** Government worker.....04➔ **TK24A2a** Private worker .....05➔ **TK24A2a** Casual worker in agriculture.....07➔ **TK24A2a** Casual worker not in agriculture.....08➔ **TK24A2a** Unpaid family worker.....06

CODE TK19Ab

Agriculture, forestry, fishing and hunting.....01	Wholesale, retail, restaurants and hotels.....06
Mining and quarrying.....02	Transportation, storage and communications.....07
Manufacturing 03	Finance, insurance, real estate and business services....08
Electricity, gas, water 04	Social services 09
Construction.....05	Activities that cannot be classified.....10

TK24A1.	What is the name of your employer?	_____ **AR00** ⌊_⌋⌊_⌋ ➔**TK26A5**
TK24A2a.	How did you get this job?	Through government job fairs .....01 Through private job fairs .....02 School/university job fairs .....03 Responded to job ads .....04 Contacted company .....05 Through friends/relatives.....06 Contacted by company .....07 Outsourcing/recruitment agencies.....08 Employment bureau 09

TK24A2.	By what system were you paid during the last month?	By piece .....01 Per day or hour .....02 Per week or month .....03 Exchange labor .....04 Share of harvest/output .....05 By the job .....06 In kind.....07 Other 95
TK24A5.	Do you work with a contract?	No, work without contract ..... 03➔ T**K25A1** Yes, with contract but not fixed time ..... 01➔ T**K25A1** Yes, with fixed time contract..... 02
TK24A6.	What is the term of your contract?	1. ⌊_⌋⌊_⌋ months 2. ⌊_⌋⌊_⌋ . ⌊_⌋ year
TK24A7.	When did the current contract start?	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year
TK25A1.	Approximately what was your salary/wage during the **last mo**nth (including the value of all benefits)?	⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1➔**TK25A2** DON'T KNOW 8
TK25A1a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 2 millions, Rp 8 millions, Rp 10 millions CAPI randomizes entry points: Rp 2 millions (2UP), Rp 8 millions (1UP 1DOWN)
TK25A2.	Approximately what was your salary/wage during the **last year** (including the value of all benefits)?	⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1➔ T**K25A2b** DON'T KNOW 8
TK25A2a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 12 millions, Rp 40 millions, Rp 100 millions CAPI randomizes entry points: Rp 12 millions (2UP), Rp 40 millions (1UP 1DOWN)
TK25A2b.	What is the amount of year-end-bonus or other bonuses you received during **the last year**?	⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1➔ T**K25A3** NOT APPLICABLE ..... 6➔**TK25A3** DON'T KNOW 8
TK25A2c.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 2 millions, Rp 8 millions, Rp 10 millions CAPI randomizes entry points: Rp 2 millions (2UP), Rp 8 millions (1UP 1DOWN)

SECTION TK (EMPLOYMENT)

TK25A3.	Did you receive the following benefits from your employer for this job?	Yes No a. Employer provided meals? 1 3 If yes, how many per day? 1. ⌊_⌋ times per day 2. Not every day b. Raw food, not in form of meals? 1 3 c. Housing benefits? 1 3 d. Transportation benefits? 1. Car? 1 3 2. Transportation allowance? 1 3 e. Medical benefits? 1. Employer paid some health expenses? 1 3 2. Employer provided health insurance policy? 1 3 3. Employer provided health clinic 1 3 f. Credit 1 3 g. Employer-provided pension 1 3 h. Severance eligibility 1 3
TK25A3x.	**INTERVIEWEAR CHECK: TK24A= 7 OR 8?**	**YES.....1➔ TK26A5** **NO 3**
TK25A4.	What type of pension plan are you enrolled in?	No pension plan ..... 6➔**TK25A7** TASPEN..... 1 ASABRI..... 2 JAMSOSTEK ..... 3 Other private pension..... 4
TK25A5.	What is your out of pocket contribution to the pension fund each month?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1 DON"T KNOW 8
TK25A6.	How will the pension benefit be paid out?	Annuity benefit per month/year ..... 1 Lump sum payment at retirement ..... 2 Combination of lump sum and annuity..... 3
TK25A7.	What is your out of pocket contribution to the health insurance each month?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1 DON"T KNOW ..... 8 No health insurance 6
TK25A7X.	**INTERVIEWEAR CHECK: TK24A=1, 2 OR 3 ?**	YES..... 1➔**TK26A1** NO 3
TK25A8.	Have you ever received any training from your employer?	No .....3➔**TK26A5** Yes.....1
TK25A9.	How many weeks of training did you receive r in the last 12 months?	3. Not receive any training in the last 12 months ➔**TK26A5** 1. ⌊_⌋⌊_⌋ Weeks 2. Less than a week
TK25A10.	What kind of training did you receive in the last 12 months?	A. Computer B. Language C. Technical training D. Teamwork E. Leadership V. Other ..... ➔**TK26A5**
TK26A1.	Approximately how much net profit did you gain last month, after taking out all your business expenses?	Profit (+) ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. ..1 **Loss (–)** ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. ..2 ➔**TK26A3** DON'T KNOW .....8🡻
TK26A1a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 2 millions, Rp 8 millions, Rp 10 millions CAPI randomizes entry points: Rp 2 millions (2UP), Rp 8 millions (1UP 1DOWN)
TK26A3.	Approximately how much net profit did you gain last year, after taking out all your business expenses?	Profit (+) ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. ..1 **Loss (–)** ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. ..2 ➔**TK26A5** DON'T KNOW .....8🡻
TK26A3a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 12 millions, Rp 40 millions, Rp 100 millions CAPI randomizes entry points: Rp 12 millions (2UP), Rp 40 millions (1UP 1DOWN)

Now we would like to ask you about the characteristics of your primary job.

TK26A5.	My job requires lots of physical effort.	1. All/Almost all the time 2. Most of the time 3. Some of the time 4. None/Almost none of the time
TK26A6.	My job requires lifting heavy loads.	1. All/Almost all the time 2. Most of the time 3. Some of the time 4. None/Almost none of the time

TK26A7.	My job requires stooping, kneeling, crouching.	1. All/Almost all the time 2. Most of the time 3. Some of the time 4. None/Almost none of the time
TK26A8.	My job requires good eyesight.	1. All/Almost all the time 2. Most of the time 3. Some of the time 4. None/Almost none of the time
TK26A9.	My job requires intense concentration/attention.	1. All/Almost all the time 2. Most of the time 3. Some of the time 4. None/Almost none of the time
TK26A10.	My job requires skill in dealing with people.	1. All/Almost all the time 2. Most of the time 3. Some of the time 4. None/Almost none of the time
TK26A11.	My job requires me to work with computers.	1. All/Almost all the time 2. Most of the time 3. Some of the time 4. None/Almost none of the time
TK26A12.	My job involves a lot of stress.	1. All/Almost all the time 2. Most of the time 3. Some of the time 4. None/Almost none of the time

TK27.	Do you have any additional job?	No ..... 3➔**TK28** Yes 1

B. ADDITIONAL JOB ASK ABOUT THE ONE THAT CONSUMES MOST TIME		
TK18B.	Where do you work on your [...] job? **(ENTER NAME OF COMPANY/EMPLOYER)**	_____ _____
TK19B.	What does you company produce?	_____ _____
TK19Ba.	**CODE FOR SECTORS**	⌊_⌋⌊_⌋
TK20B.	What are your primary duties at your workplace?	_____ _____
TK20Ba.	How many people work at your firm?	⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Persons ..... 1 DON'T KNOW 8

TK21B.	What was the total number of hours you worked during the past week (on your job)?	⌊_⌋⌊_⌋⌊_⌋ Hours/Week
TK22B.	Normally, what is the approximate total number of hours you work per week?	⌊_⌋⌊_⌋⌊_⌋ Hours/Week
TK23B.	Approximately what is the total number of weeks you work per year?	⌊_⌋⌊_⌋ Weeks/Year
TK23B2.	How long have you worked on this job?	⌊_⌋⌊_⌋ Years ⌊_⌋⌊_⌋ Months
TK23B4.	Are you a member of a labor union or a business association?	Yes ..... 1 No 3

CODE TK19Ab

Agriculture, forestry, fishing and hunting 01	Wholesale, retail, restaurants and hotels 06
Mining and quarrying 02	Transportation, storage and communications 07
Manufacturing 03	Finance, insurance, real estate and business services 08
Electricity, gas, water 04	Social services 09
Construction 05	Activities that cannot be classified 10

TK24B.	Which category best describes the work that you do?	Self employed ..... 01➔ **TK26B1** Self-employed with unpaid family worker/temporary worker ..... 02➔ **TK26B1** Self-employed with permanent worker .... 03➔ **TK26B1** Government worker ..... 04➔ **TK24B1a** Private worker ..... 05➔ **TK24B1a** Casual worker in agriculture ..... 07➔ **TK24B1a** Casual worker not in agriculture ..... 08➔ **TK24B1a** Unpaid family worker 06
TK24B1.	What is the name of your employer?	_____ AR00 ⌊_⌋⌊_⌋ ➔ **TK28**
TK24B1a.	How did you get this job?	Through government job fairs ..... 01 Through private job fairs ..... 02 School/university job fairs ..... 03 Responded to job ads ..... 04 Contacted company ..... 05 Through friends/relatives ..... 06 Contacted by company 07

SECTION TK (EMPLOYMENT)

TK24B2.	By what system were you paid during the last month?	By piece ..... 01 Per day or hour..... 02 Per week or month ..... 03 Exchange labor ..... 04 Share of harvest/output ..... 05 By the job ..... 06 In kind..... 07 Other 95
TK24B5.	Do you work with a contract?	No, work without contract .....03➔**TK25B1** Yes, with contract but not fixed time .....01➔**TK25B1** Yes, with fixed time contract.....02
TK24B6.	What is the term of your contract?	1 ⌊_⌋⌊_⌋ months 2. ⌊_⌋⌊_⌋ . ⌊_⌋ year
TK24B7.	When did the current contract start?	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year
TK25B1.	Approximately what was your salary/wage during the **last mo**nth (including the value of all benefits)?	⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1➔**TK25B2** DON'T KNOW 8
TK25B1a.	Is it […]?	Breakpoints: Rp 2 millions, Rp 8 millions, Rp 10 millions CAPI randomizes entry points: Rp 2 millions (2UP), Rp 8 millions (1UP 1DOWN)
TK25B2.	Approximately what was your salary/wage during the **last year** (including the value of all benefits)?	⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1➔**TK25B2b** DON'T KNOW 8
TK25B2a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 12 millions, Rp 40 millions, Rp 100 millions CAPI randomizes entry points: Rp 12 millions (2UP), Rp 40 millions (1UP 1DOWN)
TK25B2b.	What is the amount of year-end-bonus or other bonuses you received during **the last year**?	⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1➔**TK25B3** NOT APPLICABLE ..... 6➔**TK25B3** DON'T KNOW 8
TK25B2c.	Is it […]?	Breakpoints: Rp 2 millions, Rp 8 millions, Rp 10 millions CAPI randomizes entry points: Rp 2 millions (2UP), Rp 8 millions (1UP 1DOWN)

			Yes	No
TK25B3.	Did you receive the following benefits from your employer for this job?	a. Employer provided meals?	1	3
		If yes, how many per day? 1. ⌊_⌋ times per day 2. Not every day		
		b. Raw food, not in form of meals?	1	3
		c. Housing benefits?	1	3
		d. Transportation benefits?		
		1. Car?	1	3
		2. Transportation allowance?	1	3
		e. Medical benefits?		
		1. Employer paid some health expenses?	1	3
		2. Employer provided health insurance policy?	1	3
		3. Employer provided health clinic	1	3
		f. Credit	1	3
		g. Employer provided pension	1	3
		h. Severance eligibility	1	3
		➔**TK28 COLUMN 1**		
TK26B1.	Approximately how much net profit did you gain **last month**, after taking out all your business expenses?	Profit (+) ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp....1 **Loss (–)** ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp....2 ➔**TK26B3** DON'T KNOW .....8🡻		
TK26B1a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 2 millions, Rp 8 millions, Rp 10 millions CAPI randomizes entry points: Rp 2 millions (2UP), Rp 8 millions (1UP 1DOWN)		
TK26B3.	Approximately how much net profit did you gain **last year**, after taking out all your business expenses?	Profit (+) ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp....1 **Loss (–)** ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp....2 ➔**TK28 COLUMN 1** DON'T KNOW .....8🡻		
TK26B3a.	Is it below Rp […], about Rp […], or above Rp […] ? (UNFOLDING BRACKETS)	Breakpoints: Rp 12 millions, Rp 40 millions, Rp 100 millions CAPI randomizes entry points: Rp 12 millions (2UP), Rp 40 millions (1UP 1DOWN)		

SECTION TK (EMPLOYMENT)

Now we would like to ask about your employment in the past 9 years.

MAIN JOB IN THE PAST 8 YEARS	2014	2013	2012	2011	2010
TK28. Did you work in this year […]	Yes .....1 No .....3 Interview is in 2007 .....6 ➔**NEXT COLUMN**	Yes ..... 1 No ..... 3 ➔**NEXT COLUMN**	Yes .....1 No .....3 ➔**NEXT COLUMN**	Yes ..... 1 No ..... 3 ➔**NEXT COLUMN**	Yes .....1 No .....3 ➔**NEXT COLUMN**

TK28x. INTERVIEWER NOTE: CIRCLE "1" IN THE COLUMN OF THE YEAR WHEN RESPONDENT WORKED (TK28=1). ASK TK30-TK34a ONLY FOR COLUMNS WHERE "1" IS CIRCLED
1. 2014 2. 2013 3. 2012 4. 2011 5. 2010 6. 2009 7. 2008 8. 2007

	2014 1	2013 1	2012	2011 1	2010 1
TK30. Where did you work on your [...] job? **(ENTER NAME OF COMPANY/EMPLOYER)**	_____ _____ _____	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____
TK31. What does you company produce?	_____ _____	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____
TK31a. EDITOR: CODE FOR SECTOR	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋
TK32. What were your primary duties at your workplace?	_____ _____	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____
TK33. Which category best describes the work you did?	06 ⌊_⌊_⌋ **AR00 of employer** 01 04 02 05 03 07 08	06 ⌊_⌊_⌋ **AR00 of employer** 01 04 02 05 03 07 08	06 ⌊_⌊_⌋ **AR00 of employer** 01 04 02 05 03 07 08	06 ⌊_⌊_⌋ **AR00 of employer** 01 04 02 05 03 07 08	06 ⌊_⌊_⌋ **AR00 of employer** 01 04 02 05 03 07 08
TK33a. Did you have an additional job?	Yes.....1 No .....3 ➔**TK30**	Yes .....1 No.....3 ➔**TK30 NEXT COLUMN**	Yes ..... 1 No ..... 3 ➔**TK30 NEXT COLUMN**	Yes.....1 No .....3 ➔**TK30 NEXT COLUMN**	Yes ..... 1 No..... 3 ➔**TK30 NEXT COLUMN**

CODE TK31a

Agriculture, forestry, fishing and hunting 01
Mining and quarrying..... 02
Manufacturing 03
Electricity, gas, water 04
Construction 05
Wholesale, retail, restaurants and hotels..... 06
Transportation, storage and communications..... 07
Finance, insurance, real estate and business services 08
Social services..... 09
Activities that cannot be classified 10

Code TK33

Self employed 01
Self employed with unpaid family woker/temporary worker 02
Self employed with permanent worker..... 03
Government worker/employee..... 04
Private worker/employee 05
Unpaid family worker 06
Casual worker in non-agriculture 07
Casual worker in agriculture 08

PEKERJAAN UTAMA SELAMA 8 TAHUN TERAKHIR		2009	2008	2007
TK28.	Did you work in this year […]	Yes.....1 No .....3 ➔**NEXT COLUMN**	Yes .....1 No .....3 ➔**NEXT COLUMN**	Yes .....1 No .....3 ➔**NEXT COLUMN**

		2009	2008	2007
		1	**1**	
TK30.	Where did you work on your [...] job? **(ENTER NAME OF COMPANY/EMPLOYER)**	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____
TK31.	What does you company produce?	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____
TK31a.	EDITOR: CODE FOR SECTOR	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋
TK32.	What were your primary duties at your workplace?	3. Same with last column 1. _____	3. Same with last column 1. _____	3. Same with last column 1. _____
TK33.	Which category best describes the work you did?	06 ⌊_⌊_⌋ **AR00 of employer** 01 04 02 05 03 07 08	06 ⌊_⌊_⌋ **AR00 of employer** 01 04 02 05 03 07 08	06 ⌊_⌊_⌋ **AR00 of employer** 01 04 02 05 03 07 08
TK33a.	Did you have an additional job?	Yes.....1 No .....3 ➔**TK30**	Yes.....1 No .....3 ➔**TK30**	Yes .....1 No.....3 ➔**TK46a**

CODE TK31a

Agriculture, forestry, fishing and hunting	01	Wholesale, retail, restaurants and hotels	06
Mining and quarrying	02	Transportation, storage and communications	07
Manufacturing	03	Finance, insurance, real estate and business services	08
Electricity, gas, water	04	Social services	09
Construction	05	Activities that cannot be classified	10

Code TK33

Self employed	01	Private worker/employee	05
Self employed with unpaid family woker/temporary worker	02	Unpaid family worker	06
Self employed with permanent worker	03	Casual worker in non-agriculture	07
Government worker/employee	04	Casual worker in agriculture	08

SECTION TK (EMPLOYMENT)

Now we want to ask about job quitting or job termination that you may have experienced in the last 5 years.

TK46a.	In the last five years, have you been workingfor salary as private or government employee?	No..... 3 ➔**TK47x** Yes..... 1
TK46b.	When you were working for salary in the last five years, have you experienced job termination or quitted your job? **(NOT INCLUDING MANDATORY RETIREMENT OR END OF CONTRACT)**	No..... 3 ➔**TK47x** Yes..... 1
TK46c.	How many times in the last five years did you quit your job or experienced job termination? **(NOT INCLUDING MANDATORY RETIREMENT OR END OF CONTRACT)**	⌊_⌋⌊_⌋ times
TK46d.	When was the last time in the last 5 years you quit your job or experienced job termination? **(NOT INCLUDING MANDATORY RETIREMENT OR END OF CONTRACT)**	⌊_⌋⌊_⌋ /⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year

Now we want to ask about the last job termination or job quitting as private or government employee.

TK46e.	Where did you work on your last job? **(ENTER NAME OF COMPANY/EMPLOYER)**	_____ _____
TK46f.	What did the company produce?	_____
TK46g.	**EDITOR: CODE FOR SECTORS**	⌊_⌋⌊_⌋
TK46h.	How many employee did your employer have?	1. 1- 4 people 2. 5-19 people 3. 20-99 people 4 ≥ 100 people 8. DON'T KNOW

CODE TK46g			
Agriculture, forestry, fishing and hunting	01	Wholesale, retail, restaurants and hotels	06
Mining and quarrying	02	Transportation, storage and communications	07
Manufacturing	03	Finance, insurance, real estate and business services	08
Electricity, gas, water	04	Social services	09
Construction	05	Activities that cannot be classified	10

TK46i.	What type of company do you work for?	01. Government agencies 02. State-owned company 03. Domestic private company 04. Foreign/multinational company 05. Domestic worker (servants, driver, gardener, etc.)
TK46j.	How long have you been working there before you stop working?	⌊_⌋⌊_⌋ years and ⌊_⌋⌊_⌋ months
TK46k.	When was the last time you received your wage/salary from that job?	⌊_⌋⌊_⌋ /⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year
TK46l.	How much was your monthly wage/salary for the last month you were on the job?	⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp.
TK46m.	What was the main reason your job was terminated or you quitted your job?	01. Fired by the company because business was closed down/relocated/restructured 02. Firedfor other reason 03. Wage/salary was too low 04. Not conducive working environment 05. Refused being relocated 06. Prolonged sickness 07. Marriage 08. Childbirth 09. Other family reason 95. Other , mention.....
TK46n.	Did you receive severance payment when you quit the job or when your job was terminated?	No..... 3 ➔**TK46r** Yes..... 1
TK46o.	How much severance payment were you supposed to receive?	1. ⌊_⌋ times monthly wage/salary 2. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON"T KNOW
TK46p.	How much severance payment have you received so far?	⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp.
TK46q.	When did you first receive the severance payment?	1. ⌊_⌋⌊_⌋ /⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 6. HAVE NOT RECEIVED ANY
TK46r.	Did you receive pension benefit from this job?	No..... 3 ➔**TK46x** Yes..... 1
TK46s.	What type of pension?	TASPEN..... 1 ASABRI..... 2 JAMSOSTEK..... 3 Other private pension..... 4

SECTION TK (EMPLOYMENT)

TK46t.	What was the amount of the pension benefits you were supposed to receive?	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.....1 DON"T KNOW.....8
TK46u.	What is the amount of the pension benefits you have received?	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp.....1 DON"T KNOW.....8
TK46v.	When did you start to receive the pension benefit?	1. ⌊⌊⌋/⌊⌊⌊⌊⌋ **8.** DON"T KNOW Month / Year
TK46w.	What was the out-of-pocket money you need to pay per month for the pension?	⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. .....1 DON'T KNOW.....8
TK46x.	**CAPI CHECK TK46n=1 OR TK46r =1**	**NO**..... 3➔**TK47x** **YES**..... 1
TK46y.	Were you satisfied with the terms of the severance and pension payment?	Very satisfied.....1 Satisfied.....2 Unsatisfied.....3 Very unsatisfied.....4

Now we would like to ask about your first job.

TK47x.	**CAPI CHECK COV2: PANEL RESPONDENT?**	**YES..... 1➔ SECTION RE** **NO..... 3**
TK47.	When did you start working full-time for the first time? **THE MEANING OF WORKING FULL-TIME IS THAT WORKING IS THE PRIMARY ACTIVITY.**	Work never primary activity.....6➔**SECTION RE** Year ⌊⌊⌊⌋ .....1➔**TK50** DON'T KNOW 8
TK48.	What was your age when starting to work full-time for the first time?	⌊⌊⌋ **Years**
TK50.	Where did you work [...] ? **(ENTER NAME OF COMPANY/EMPLOYER)**	_____
TK50a.	What did the company produce?	_____
TK50b.	**CODE FOR SECTORS**	⌊⌊⌋

CODE TK50b

Agriculture, forestry, fishing and hunting.....01	Wholesale, retail, restaurants and hotels.....06
Mining and quarrying.....02	Transportation, storage and communications 07
Manufacturing 03	Finance, insurance, real estate and business services 08
Electricity, gas, water 04	Social services 09
Construction.....05	Activities that cannot be classified 10

TK52.	What were your daily primary duties at [...] ?	_____ _____
TK53.	Normally, what was the approximate total number of hours you worked per week on your primary job in [...] ?	⌊⌊⌊⌋ Hours/Week
TK54.	Approximately what was total number of weeks you worked per year on your primary job in [...] ?	⌊⌊⌋ Weeks/Year
TK55.	Which category best describes the work you did in your last job?	Self employed.....01➔**SECTION RE** Self-employed with unpaid family worker/temporary worker.....02➔**SECTION RE** Self-employed with permanent worker .03➔**SECTION RE** Unpaid family worker.....06➔**SECTION RE** Government worker.....04 Private worker .....05 Casual worker in agriculture.....07 Casual worker in non-agriculture.....08
TK55a.	How did you get this job?	Through government job fairs..... 01 Through private job fairs..... 02 School/university job fairs..... 03 Responded to job ads..... 04 Contacted company..... 05 Through friends/relatives..... 06 Contacted by company..... 07
TK56.	Approximately what was your monthly wage/salary/income in the year of [...] (including the value of all benefits)?	⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ Rp. ..... 1 DON'T KNOW ..... 8 **➔SECTION RE**

SECTION RE (RETIREMENT)

RE01.	**CAPI CHECK COV3: IS RESPONDENT 50 OR ABOVE?**	**RESPONDENT AGE<50** .....3➔**SECTION SI** **RESPONDENT AGE ≥50** 1

RE02.	Are you currently working?	3. Not working ➔**RE08** 1. Working
RE03.	If you lose this job one year from now, how easy do you expect you would get a similar job within a couple of months?	1. Very easy 2. Easy 3. Difficult 4. Very difficult
RE04.	Do you have any plan to stop working?	2. Change kind of work ➔**RE06** 3. Work for self➔**RE07** 4. Will not stop working➔**RE08** 5. Work until health fails➔**RE08** 6. Haven't given much thought/no plan yet➔**RE08** 1. Stop working
RE05.	At what age do you plan to stop working?	1. Age: ⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW
RE05a.	Are you planning to change the work you do?	No.....3➔**RE06a** Yes 1
RE06.	At what age do you plan to change the work you do?	1. Age: ⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 6. No plan to change work
RE06a.	Are you planning to start worki for yourself?	3. No➔**RE08** 1. Yes
RE07.	At what age do you plan to start work for yourself?	1. Age: ⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋

RE08.	Do you consider yourself […]?	1. Retired➔**RE09** 2. Partly retired➔**RE09** 3. Not retired
RE08a.	Did you ever quit from your main job and continue to work?	No .....3➔**RE24** Yes.....1
RE09.	When did you retire?	1. ⌊_⌋⌊_⌋/⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years
RE10.	What was your monthly salary the last month before you retired?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.....1 NA .....6 DON"T KNOW.....8

RE11.	The following are the reasons why some people retire. Please tell me whether, for you, these were important reasons for retirement?	
A.	Poor health	1. Very important 2. Moderately important 3. Somewhat important 4. Not important at all
B.	Wanted to do other things	1. Very important 2. Moderately important 3. Somewhat important 1. Not important at all
C.	Didn't like the work	1. Very important 2. Moderately important 3. Somewhat important 4. Not important at all
D.	Want to spend more time with family.	1. Very important 2. Moderately important 3. Somewhat important 4. Not important at all

RE12a.	Apakah I/B/S berhenti bekerja (pensiun) karena melewati umur masa pensiun?	Yes .....1 No.....3
RE12.	Did you receive any pension?	No.....3➔**RE22** Yes 1
RE13.	What type of pension	TASPEN .....1 ASABRI .....2 JAMSOSTEK.....3 Other private pension 4
RE14.	How is/was the pension benefits paid out?	Lump sum payment.....2➔**RE18** Lump sum payment in installments .....3➔**RE18** Annuity benefit per month.....1 Combination of lump sum and annuity ...4
RE15.	What is the amount of the pension benefits you were supposed to receive per month?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.....1 DON"T KNOW 8
RE16.	What is the amount of the pension benefits you received last month?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.....1 DON"T KNOW 8
RE17.	When did you start receiving the pension benefit?	1. ⌊_⌋⌊_⌋/⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW

RE18.	What was the amount of the lump sum pension payment you are supposed to received?	No lump sum payment .....6➔**RE21** └┴┴┘,└┴┴┘,└┴┴┘ Rp.....1 DON"T KNOW.....8
RE19.	What was the amount of the lump sum pension payment you have received?	└┴┴┘,└┴┴┘,└┴┴┘ Rp.....1 DON"T KNOW.....8
RE20.	When did you start to receive the lump sum pension benefit?	1. └┴┘/└┴┴┴┘ Month / Year 2. At retirement
RE21.	What was the out-of-pocket monthly contribution to your pension fund?	└┴┴┘,└┴┴┘,└┴┴┘ Rp.....1 DON"T KNOW.....8
RE22.	All in all, would you say your retirement has turned out to be satisfying, moderately satisfying, or not at all satisfying?	1. Satisfying 2. Moderately satisfying 3. Not satisfying at alll
RE23.	Thinking about your retirement years compared to the years before you retired, would you say your retirement years have been better, about the same, or not as good?	1. Better 2. About the same 3. Not as good 6. RETIRED LESS THAN 1 YEAR AGO

RE24.	Do you currently live with your children?	NO CHILDREN..... 6 ➔**SECTION SI** No..... 3 Yes 1
RE25.	In the next 5 years, do you expect to live with your children? **(CAPI PRELOAD ROSTERS**	Yes .....1 └┴┘ └┴┘ └┴┘ No..... 3
RE26.	Do you expect you will need financial help from your children in the next 5 years? **(CAPI PRELOAD ROSTERS**	Yes .....1 └┴┘ └┴┘ └┴┘ No..... 3
RE27.	In the past 12 months, did you receive financial assistance from your children? (**regardless of whether you need it or not**) **(CAPI PRELOAD ROSTERS**	Yes .....1 └┴┘ └┴┘ └┴┘ No..... 3
RE28.	Do you expect to receive financial assistance from your children in the next five years? **(CAPI PRELOAD ROSTERS**	Yes .....1 └┴┘ └┴┘ └┴┘ No..... 3
RE29.	Do you expect to leave a bequest/inheritance to one of your children? **(CAPI PRELOAD ROSTERS**	Yes .....1 └┴┘ └┴┘ └┴┘ No..... 3

SECTION SI:RISK AND TIME PREFERENCES

RANDOM_SI : A

SI01.	Suppose you are offered two ways to earn some money. With option 1, you are guaranteed Rp 800 thousand per month. With option 2, you have an equal chance of ither the same income, Rp 800 thousand per month, or, if you are lucky, Rp 1.6 million. per month, which is more. Which option will you choose?	1. Rp 800 thousand per month 2. Rp 1.6 million or Rp 800 thousand per month→**SI03** 8. DON'T KNOW
SI02.	Are you sure? In option 2 you will get at least Rp 800 thousand per month and you may get Rp 1.6 million per month. In option 1 you will always get Rp 800 thousand per month.	1. Still picks option 1 →**SI11** 2. Switches to option 2 8. DON'T KNOW
SI03.	Now, in option 2 you have an equal chance of receiving either Rp. 1.6 million per month or Rp. 400 thousand per month, depending on how lucky you are. Option 1 guarantees you an income of Rp 800 thousand per month. Which option will you choose?	1. Rp 800 thousand 2. Rp 1.6 million or Rp 400 thousand→**SI05** 8. DON'T KNOW
SI04.	Now, in option 2 you have an equal chance of receiving either Rp 1.6 million per month or Rp 600 thousand per month, depending on how lucky you are. Option 1 guarantees you an income of Rp 800 thousand per month. Which option will you choose?	1. Rp 800 thousand 2. Rp 1.6 million or Rp 600 thousand 8. DON'T KNOW →**SI11**
SI05.	Now, in option 2 you have an equal chance of receiving either Rp 1.6 million per month or Rp 200 thousand per month, depending on how lucky you are. Option 1 guarantees you an income of Rp 800 thousand per month. Which option will you choose?	1. Rp 800 thousand 2. Rp 1.6 million or Rp 200 thousand 8. DON'T KNOW →**SI11**

SI11.	Suppose you are offered two ways to earn income. With option 1, you are guaranteed an income of Rp 4 million per month. With option 2, you have an equal chance of earning either the same income, Rp 4 million per month, or, if you are unlucky, Rp 2 million per month, which is less. Which option will you choose?	1. Rp 4 million→**SI13** 2. Rp 4 million or Rp 2 million 8. DON'T KNOW
SI12.	Are you sure? In option 1you will always get Rp 4 million per month but in option 2 you may get Rp 4 million per month but you may get only Rp 2 million per month..	1. Still picks option 1 →**SI21** 2. Switches to option 2 8. DON'T KNOW
SI13.	Now, in option 2 you have an equal chance of receiving either Rp 12 million per month or nothing, depending on how lucky you are. Option 1 guarantees you an income of Rp 4 million per month. Which option will you choose?	1. Rp 4 million 2. Rp 12 million or Rp 0 →**SI15** 8. DON'T KNOW
SI14.	Now, in option 2 you have an equal chance of receiving either Rp 8 million per month or Rp 2 million per month, depending on how lucky you are. Option 1 guarantees you an income of Rp 4 million per month. Which option will you choose?	1. Rp 4 million 2. Rp 8 million or Rp 2 million 8. DON'T KNOW →**SI21**
SI15.	Now, in option 2 you have an equal chance of receiving either Rp 16 million per month or having to pay out Rp 2 million per month depending on how lucky you are. Option 1 guarantees you an income of Rp 4 million per month. Which option will you choose?	1. Rp 4 million 2. Rp 16 million or -Rp 2 million 8. DON'T KNOW →**SI21**

SECTION SI:RISK AND TIME PREFERENCES

RANDOM_SI: B

SI11.	Suppose you are offered two ways to earn income. With option 1, you are guaranteed an income of Rp 4 million per month. With option 2, you have an equal chance of earning either the same income, Rp 4 million per month, or, if you are unlucky, Rp 2 million per month, which is less. Which option will you choose?	1. Rp 4 million→**SI13** 2. Rp 4 million or Rp 2 million 8. DON'T KNOW
SI12.	Are you sure? In option 1you will always get Rp 4 million per month but in option 2 you may get Rp 4 million per month but you may get only Rp 2 million per month..	1. Still picks option 1 →**SI01** 2. Switches to option 2 8. DON'T KNOW
SI13.	Now, in option 2 you have an equal chance of receiving either Rp 12 million per month or nothing, depending on how lucky you are. Option 1 guarantees you an income of Rp 4 million per month. Which option will you choose?	1. Rp 4 million 2. Rp 12 million or Rp 0 →**SI15** 8. DON'T KNOW
SI14.	Now, in option 2 you have an equal chance of receiving either Rp 8 million per month or Rp 2 million per month, depending on how lucky you are. Option 1 guarantees you an income of Rp 4 million per month. Which option will you choose?	1. Rp 4 million 2. Rp 8 million or Rp 2 million 8. DON'T KNOW →**SI01**
SI15.	Now, in option 2 you have an equal chance of receiving either Rp 16 million per month or having to pay out Rp 2 million per month depending on how lucky you are. Option 1 guarantees you an income of Rp 4 million per month. Which option will you choose?	1. Rp 4 million 2. Rp 16 million or -Rp 2 million 8. DON'T KNOW →**SI01**

SI01.	Suppose you are offered two ways to earn some money. With option 1, you are guaranteed Rp 800 thousand per month. With option 2, you have an equal chance of ither the same income, Rp 800 thousand per month, or, if you are lucky, Rp 1.6 million. per month, which is more. Which option will you choose?	1. Rp 800 thousand per month 2. Rp 1.6 million or Rp 800 thousand per month→**SI03** 8. DON'T KNOW
SI02.	Are you sure? In option 2 you will get at least Rp 800 thousand per month and you may get Rp 1.6 million per month. In option 1 you will always get Rp 800 thousand per month.	1. Still picks option 1 →**SI22** 2. Switches to option 2 8. DON'T KNOW
SI03.	Now, in option 2 you have an equal chance of receiving either Rp. 1.6 million per month or Rp. 400 thousand per month, depending on how lucky you are. Option 1 guarantees you an income of Rp 800 thousand per month. Which option will you choose?	1. Rp 800 thousand 2. Rp 1.6 million or Rp 400 thousand →**SI05** 8. DON'T KNOW
SI04.	Now, in option 2 you have an equal chance of receiving either Rp 1.6 million per month or Rp 600 thousand per month, depending on how lucky you are. Option 1 guarantees you an income of Rp 800 thousand per month. Which option will you choose?	1. Rp 800 thousand 2. Rp 1.6 million or Rp 600 thousand 8. DON'T KNOW →**SI22**
SI05.	Now, in option 2 you have an equal chance of receiving either Rp 1.6 million per month or Rp 200 thousand per month, depending on how lucky you are. Option 1 guarantees you an income of Rp 800 thousand per month. Which option will you choose?	1. Rp 800 thousand 2. Rp 1.6 million or Rp 200 thousand 8. DON'T KNOW →**SI22**

SECTION SI:RISK AND TIME PREFERENCES

CAPI : GENERATE FOR GROUP SI21 –SI22 : RANDOM_SI: A

SI21. You have won the lottery. You can choose between being paid		
A. 1. Rp 1 million today or 2. Rp 1 million in 1 year Which do you choose?	A 1. Rp 1 million today➔**B**	2. Rp 1 million in 1 year➔**E**
B. 1. Rp 1 million today or 2. Rp 3 million in 1 year Which do you choose?	B. 1. Rp 1 million today➔**C**	2. Rp 3 million in 1 year➔**D**
C. 1. Rp 1 million today or 2. Rp 6 million in 1 year Which do you choose?	C. 1. Rp 1 million today➔**S122**	2. Rp 6 million in 1 year➔**SI22**
D. 1. Rp 1 million today or 2. Rp 2 million in 1 year Which do you choose?	D. 1. Rp 1 million today➔**SI22**	2. Rp 2 million in 1 year➔**SI22**
E. Are you sure you prefer the same amount in the future although you get the same amount if you do not wait?	E. 1 . Yes➔ **SI22**	3. No prefer Rp 1 million today➔**B**

SI22. You have won the lottery. You can choose between being paid		
A. 1. Rp 1 million today or 2. Rp 500,000 in 5 years Which do you choose?	A 1. Rp 1 million today➔**B**	2. Rp 0.5 million in 5 years➔**E**
B. 1. Rp 1 million today or 2. Rp4 million in 5 years Which do you choose?	B. 1. Rp 1 million today➔**C**	2. Rp4 million in 5 years➔**D**
C. 1. Rp 1 million today or 2. Rp10 million in 5 years Which do you choose?	C. 1. Rp 1 million today➔**SECTION TR**	2. Rp10 million in 5 years➔**SECTION TR**
D. 1. Rp 1 million today or 2. Rp2 million in 5 years Which do you choose?	D. 1. Rp 1 million today➔**SECTION TR**	2. Rp2 million in 5 years➔**SECTION TR**
E. Are you sure you prefer the smaller amount in the future rather than a larger amount without waiting?	E. 1 . Yes➔**F**	3. No prefer Rp 1 million today➔**B**

SECTION SI:RISK AND TIME PREFERENCES

CAPI : GENERATE FOR GROUP SI21 –SI22 : RANDOM_SI: B

SI22.	You have won the lottery. You can choose between being paid		
	A. 1. Rp 1 million today or 2. Rp 500,000 in 5 years Which do you choose?	A 1. Rp 1 million today➔**B**	2. Rp 0.5 million in 5 years➔**E**
	B. 1. Rp 1 million today or 2. Rp 4 million in 5 years Which do you choose?	B. 1. Rp 1 million today➔**C**	2. Rp 4 million in 5 years➔**D**
	C. 1. Rp 1 million today or 2. Rp 10 million in 5 years Which do you choose?	C. 1. Rp 1 million today➔**S121 A**	2. Rp 10 million in 5 years➔**S121 A**
	D. 1. Rp 1 million today or 2. Rp 2 million in 5 years Which do you choose?	D. 1. Rp 1 million today➔**S121 A**	2. Rp 2 million in 5 years➔**S121 A**
	E. Are you sure you prefer the smaller amount in the future rather than a larger amount without waiting?	E. 1 . Yes➔**S121 A**	3. No prefer Rp 1 million today➔**B**

SI21.	You have won the lottery. You can choose between being paid		
	A. 1. Rp 1 million today or 2. Rp 1 million in 1 year Which do you choose?	A 1. Rp 1 million today➔**B**	2. Rp 1 million in 1 year➔**E**
	B. 1. Rp 1 million today or 2. Rp 3 million in 1 year Which do you choose?	B. 1. Rp 1 million today➔**C**	2. Rp 3 million in 1 year➔**D**
	C. 1. Rp 1 million today or 2. Rp 6 million in 1 year Which do you choose?	C. 1. Rp 1 million today➔**SECTION TR**	2. Rp 6 million in 1 year➔**SECTION TR**
	D. 1. Rp 1 million today or 2. Rp 2 million in 1 year Which do you choose?	D. 1. Rp 1 million today➔**SECTION TR**	2. Rp 2 million in 1 year➔**SECTION TR**
	E. Are you sure you prefer the same amount in the future although you get the same amount if you do not wait?	E. 1 . Yes➔**SECTION TR**	3. No prefer Rp 1 million today➔**B**

SECTION TR:TRUST

Now we want to ask you about trust in this village.

TR01.	I am willing to help people in this village if they need it.	Strongly agree ..... 1 Agree ..... 2 Disagree ..... 3 Strongly disagree 4
TR02.	In this village I have to be alert or someone is likely to take advantage of me.	Strongly agree ..... 1 Agree ..... 2 Disagree ..... 3 Strongly disagree 4
TR03.	Taking into account the diversity of ethnicities in the village, I trust people withe same ethnicity as mine more.	Strongly agree ..... 1 Agree ..... 2 Disagree ..... 3 Strongly disagree 4
TR04.	I would be willing to leave my children with myr neighbors for a few hours if I cannot bring my children with along.	Strongly agree ..... 1 Agree ..... 2 Disagree ..... 3 Strongly disagree 4
TR05.	I would be willing to ask my neighbors to look after their house if I leave for a few days?	Strongly agree ..... 1 Agree ..... 2 Disagree ..... 3 Strongly disagree 4
TR06.	How safe do you consider this village?	Very safe ..... 1 Safe ..... 2 Unsafe ..... 3 Very unsafe 4
TR07.	In most parts of the village, is it safe for you to walk alone at night?	Very safe ..... 1 Safe ..... 2 Unsafe ..... 3 Very unsafe 4

Say you lost a wallet or a purse that contained Rp. 200.000 and your identity card. I'd like you to think about how likely it is that it will be returned with the money if it were found by someone else.

TR08.	Say it was found by someone who lives close by. Is it likely or unlikely that it will be returned to you with the Rp. 200.000?	A. Is it […]? 1. Likely 2. Unlikely 8. DON'T KNOW	B. 11. Very likely 12. Somewhat likely 18. DON'T KNOW 21. Somewhat unlikely 22. Very unlikely 28. DON'T KNOW
TR09.	Say it was found by a police officer. Is it likely or unlikely that it will be returned to you with the Rp. 200.000?	A. Is it […]? 1. Likely 2. Unlikely 8. DON'T KNOW	B. 11. Very likely 12. Somewhat likely 18. DON'T KNOW 21. Somewhat unlikely 22. Very unlikely 28. DON'T KNOW
TR10.	Say it was found by a complete stranger. Is it likely or unlikely that it will be returned to you with the Rp. 200.000?	A. Is it […]? 1. Likely 2. Unlikely 8. DON'T KNOW	B. 11. Very likely 12. Somewhat likely 18. DON'T KNOW 21. Somewhat unlikely 22. Very unlikely 28. DON'T KNOW

SECTION TR:TRUST

TR11.	How religious are you?	1. Very religious 2. Religious 3. Somewhat religious 4. Not religious 7. REFUSED
TR12.	What is your religion?	2. Catholic ➔**TR15** 3. Protestant ➔ **TR15** 4. Hindu ➔**TR17** 5. Budha ➔**TR19** 6. Konghucu➔**TR21** 96. NOT APPLICABLE➔**TR23** 1. Islam
TR12a.	Which Islamic tradition do you feel closest to?	1. Nahdlatul Ulama (NU) 2. Muhammadiyah 95. Others, please mention: .....
TR13.	How many times do you pray each day?	⌊_⌊_⌋ times ..... 1 Not every day ..... 2 Do not practice ..... 3 REFUSED 7
TR14a.	Did you attend/participate in *pengajian/ taklim/ ceramah* (prayer/religious meetings) in the past 12 months?	1. Yes, more than once a week. 2. Yes, at least once a week. 3. Yes, at least once a month. 4. Yes, less than once a month. 5. No 7. REFUSED ➔ TR 23
TR15.	How often do you pray/read the bible?	Before each activities ..... 1 Morning and evening ..... 2 Once a day ..... 3 Sometimes ..... 4 Do not practice ..... 5 REFUSED 7
TR16a.	Do you actively participate in religious activities such as prayer fellowship, etc in the past 12 months?	1. Yes, more than once a week. 2. Yes, at least once a week. 3. Yes, at least once a month. 4. Yes, less than once a month. 5. No 7. REFUSED ➔ TR 23
TR17.	Do you practice risadya/meditation/ yoga/ or pray in pura /sanggah/merajan/candi?	Every day ..... 1 During kajeng kliwon/full moon/tilem ..... 2 On holy days ..... 3 Don't practice ..... 4 Sometimes ..... 6 REFUSED 7
TR18.	Do you observe a certain diet for spiritual reason?	Yes, vegetarian/mutih .....1 Yes, don't eat animals except fish .....2 Yes, don't eat read meat .....3 Yes, don't eat beefi .....4 Yes, other dietary resriction .....5 No dietary restriction .....6 ➔**TR23**
TR19.	Do you practice puja mantra/meditation/ to Vihara/ or in temple?	Every day ..... 1 Every week/every 1st or 15th of the month According to Chinese calendar ..... 2 Don't practice ..... 3 Sometimes ..... 6 REFUSED 7
TR20.	Are you a vegetarian?	No ..... 3 Yes 1
TR21.	Do you pray/perform rituals?	Every day ..... 1 Every week ..... 2 No ..... 3 Sometimes ..... 6 REFUSED ..... 7 ➔**TR23**
TR22.	Do you practice individual development according to your faith?	No ..... 3 Yes 1
TR23.	Taking into account the diversity of religions in the village, I trust people withe same religion as mine more.	Strongly agree ..... 1 Agree ..... 2 Disagree ..... 3 Strongly disagree 4
TR24.	How do you feel if someone with different faith from you live in your village?	Strongly objected ..... 1 Objected ..... 2 No objection ..... 3 No objection at all 4
TR25.	How do you feel if someone with different faith from you live in your neighborhood?	Strongly objected ..... 1 Objected ..... 2 No objection ..... 3 No objection at all 4
TR26.	How do you feel if someone with different faith from you rent a room from you?	Strongly objected ..... 1 Objected ..... 2 No objection ..... 3 No objection at all 4
TR27.	How do you feel if someone with different faith from you marry one of your close relatives or children?	Strongly objected ..... 1 Objected ..... 2 No objection ..... 3 No objection at all 4

SECTION TR:TRUST

TR28.	What do you think if people who have different faith from you build a house of worship in your community?	Strongly objected ..... 1 Objected ..... 2 No objection ..... 3 No objection at all 4
TR29a.	In an election, having a candidate with the same religion as yours makes it […] to vote for him/her.	Very likely ..... 1 Somewhat likely ..... 2 Neither more or less likely ..... 3 Somewhat unlikely ..... 4 Very unlikely 5
TR30a.	In an election, if the candidates have **the same religion as yours**, how important is the religiosity of a candidate in influencing your decision to vote for him / her? A more religious candidate makes it […] to vote for him/her.	Very likely ..... 1 Somewhat likely ..... 2 Neither more or less likely ..... 3 Somewhat unlikely ..... 4 Very unlikely 5
TR30b.	In an election, if the candidates have **a different religion than yours**, how important is the religiosity of a candidate in influencing your decision to vote for him/her? A more religious candidate makes it […] to vote for him/her.	Very likely ..... 1 Somewhat likely ..... 2 Neither more or less likely ..... 3 Somewhat unlikely ..... 4 Very unlikely 5

SECTION CP (INTERVIEW SESSION NOTES)

LANGMAIN.	Interview was entirely/mostly conducted in what language?	└┴┘ **Other:**
LANGOTHR.	Other language used (if any):	└┴┘ **Other:**

CODE FOR LANGUAGE:

00.	Indonesian	04.	Batak	08.	Sasak	12.	Makassar	16.	Toraja	20.	Lampung
01.	Javanese	05.	Bugis	09.	Minang	13.	Nias	17.	Lahat	96.	NONE
02.	Sundanese	06.	Chinese	10.	Banjar	14.	Palembang	18.	Other South Sumatra	95.	Other
03.	Balinese	07.	Maduranese	11.	Bima	15.	Sumbawa	19.	Betawi		

C1.RESULT OF INTERVIEW OF BOOK III	C2.REASON CODE FOR ANSWER "3"/"2" ON C1	C4. SUPERVISOR MONITORING		
1. Completed➔**C4** 2. Partially completed 3. Not completed	1. Respondent was not at home/not available 2. Respondent was seriously ill 3. Respondent refused (to be interviewed) 5. Other:		Yes	No
		a. Observed	1	3
		b. Edited	1	3
		c. Verified	1	3

SECTION CP (INTERVIEW SESSION NOTES)
EVALUATION FORM FOR BOOK IIIA

CP1. WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW? **ANSWER MAY BE MORE THAN ONE.** A. NO ONE B. A CHILD 5 YEARS OLD OR UNDER C. A CHILD OLDER THAN 5 YEARS OLD D. HUSBAND/WIFE E. AN ADULT, A HOUSEHOLDER F. AN ADULT, NOT A HOUSEHOLDER	**CP2.** WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD	**CP3.** WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD

NOTES:

CONFIDENTIAL

INTERVIEWER : _____ ⌊_⌊_⌊_⌋ **HHID: ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋**

INDONESIA FAMILY LIFE SURVEY 2014

BOOK IIIB

SECTIONS: KM, KK, CD, KP, PSN, CO, MA, TDR, COB, EH, SA, AK, PS, RJ, FM, RN, PM, BA, TF, EP, CP

Respondent is an adult 15 years or older

RESVIS.	RESPONDENT INTERVIEWED ?	1. Yes 3. No ➔ C1

COMPLETED FROM ROSTER

NAME OF RESPONDENT: _____ AR00: ⌊_⌊_⌋

RSPNDNT. **RESPONDENT IS:**
(CAPI CHECK)
Head of h ousehold (AR02b=01) 1
Spouse of household head (AR02b=02)..... 2
Other Householder..... 3

PANEL. **FOR BOOK III, RESPONDENT IS:**
(CAPI CHECK)
Panel Respondent 1
New Respondent 3

RANDOM_CO: 1. LIST A 2. LIST B 3. LIST C 4. LIST D
(CAPI CHECK)

RANDOM_PSN: 1. LSIT A 2. LIST B 3. LIST C 4. LIST D
(CAPI CHECK)

TO BE FILLED OUT BY INTERVIEWER FOR BOOK III

QUESTIONS FOR RESPONDENT:

AGE. How old are you? ⌊_⌊_⌊_⌋ years
(CAPI CHECK)

MARSTAT What is your marital status?:
Never married..... 1
Married 2
Separated..... 3
Divorce 4
Widow/er 5
Cohabitate 6

SEX: Male.....1
(CAPI CHECK) Female..... 3

DOB. Date of Birth: ⌊_⌊_⌋ / ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋
(CAPI CHECK) Day Month Year

SECTION KM (SMOKING BEHAVIOUR)

Next I would like to ask whether you have had the habit of smoking cigarettes/smoking a pipe/chewing tobacco, now or in the past.

KM01a.	Have you ever chewed tobacco, smoked a pipe, smoked self-rolled cigarettes, or smoked cigarettes/cigars?	No ..... 3 ➔**SECTION KK** Yes..... 1
	Products normally used:	**1. Yes** **3. No**
KM01b.	Chewing tobacco	1 3
KM01c.	Smoking a pipe	1 3
KM01d.	Smoking self-rolled cigarettes	1 3
KM01e.	Smoking cigarettes/cigars	1 3
KM02a.	**CAPI CHECK KM01e:** **DOES KM01e=1 (SMOKING CIGARETTES/CIGARS)?**	**NO..... 3➔ KM04** **YES..... 1**
KM03.	Are the cigarettes classified as: **ANSWER MAY BE MORE THAN ONE**	Filtered cigarette .....A Unfiltered cigarette .....B Filtered cloves cigarette ..... C Unfiltered cloves cigarette..... D Cigar .....E
KM04.	Do you still have the habit or have you totally quit?	STILL HAVE.....1 ➔**KM05b** QUIT.....3
KM05aa.	At what age did you totally quit from […]?	1. ⌊_⌊_⌋ Years 8. DON'T KNOW
KM05b.	**CAPI CHECK KM01b KM01c KM01d:** **DOES KM01b=1 or KM01c=1 or KM01d=1 (CHEWING TOBACCO/SMOKING A PIPE)?**	**NO..... 3 ➔KM07** **YES.....** 1
KM06.	In one week how many ounces (100 grams) did/do you consume now/before totally quitting of chewing tobacco and smoking pipe?	⌊_⌊_⌋ oz (100 gr)..... 1 DON'T KNOW 8
KM06a.	**CAPI CHECK KM04=1**	**NO..... 3 ➔KM07** **YES..... 1**
KM06b.	What's the price for 1 ounce you have to pay?	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp.....1 DON'T KNOW 8
KM07.	**CAPI CHECK KM01d AND KM01e: DOES KM01d=1 OR KM01e=1 (SMOKING SELF-ROLLED CIGARETTES / CIGARETTES/CIGARS)?**	**NO..... 3 ➔KM09** **YES..... 1**

KM08.	In one day about how many cigars/cigarettes did you consume now/before totally quitting?	⌊_⌊_⌋ per day.....1 DON'T KNOW.....8
KM08a.	**CAPI CHECK KM04=1**	NO .....3➔**KM09** YES.....1
KM08f.	**INTERVIEWER CHECK KM0e=1**	NO .....3➔**KM09** YES.....1
KM08b.	How many cigarettes/packs do you usually buy each time?	⌊_⌊_⌋ cigarettes.....1➔**KM08d** ⌊_⌊_⌋ packs.....3
KM08c.	How many cigarettes for each pack?	⌊_⌊_⌋ cigarettes
KM08d.	How much did you spend each time?	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. .....1 DON'T KNOW.....8
KM08e.	What is the brand of cigarettes do you usually purchase?	Gudang Garam Merah..... 01 Gudang Garam Surya ..... 02 Gudang Garam International..... 03 Sampoerna A Mild ..... 04 Sampoerna Hijau..... 05 Djarum Super..... 06 Djarum 76 Kretek..... 07 Bentoel Filter..... 08 Bentoel Kretek tanpa filter ..... 09 Ardath ..... 10 Marlboro..... 11 Marlboro Kretk Filter ..... 12 Lucky Strike ..... 13 Kansas ..... 14 Dji Sam Soe..... 15 Other 95
KM09.	About how much money did/do you spend each week on these products?	⌊_⌊_⌊_⌋ . ⌊_⌊_⌊_⌋ Rp. ..... 1 DON'T KNOW..... 8
KM10.	At what age did you start to smoke on a regular basis?	⌊_⌊_⌋ years ..... 1 DON'T KNOW..... 8
KM11.	How soon after you wake up did/do you smoke your first cigarette, cigar, or pipe?	Within 5 minutes ..... 1 Within 6-30 minutes ..... 2 Within 31-60 minutes ..... 3 More than 1 hour..... 4 DON'T KNOW..... 8

SECTION KM (SMOKING BEHAVIOUR)

KM12.	Do you find it difficult to refrain from smoking in places where it is forbidden to smoke/chew tobacco? (such as: mall, hospital, working places)	1 Yes 3 No
KM13.	Which one is the most difficult for you to sacrifice: first smoking/chewing tobacco in the morning or smoking/chewing tobacco in other time?	1. First smokin/chewing tobacco g in the morning 3. Smoking/chewing tobacco in other time
KM14.	Do you smoke/chew tobacco more frequently during the first hours after waking than during the rest of the day?	1 Yes 3 No
KM15.	When you are so ill that you are in bed most of the day, do you smoke/chew tobacco?	1 Yes 3 No

SECTION KK (HEALTH CONDITIONS)

Next we would like to know about your health.

KK01.	In general, how is your health?	Very healthy ..... 1 Somewhat healthy ..... 2 Somewhat unhealthy ..... 3 Unhealthy..... 4
KK02a.	During the last 4 weeks, how many days of your primary daily activities did you miss due to poor health?	⌊_⌋⌊_⌋ Days ..... 1 DON'T KNOW 8
KK02b.	In the last 4 weeks, how many days have you stayed in bed due to poor health?	⌊_⌋⌊_⌋ Days..... 1 DON'T KNOW 8
KK02c.	Compared with your health 12 months ago, would you say that your health is [...]?	Much better now……1 Somewhat better now……2 About the same ……..3 Somewhat worse……4 Much worse …… 5

KK02i.	How do you expect your health to be in next year?	Much better than now..... 1 Somewhat better than now..... 2 About the same..... 3 Somewhat worse ..... 4 Much worse 5
KK02k.	Compared to another person of your age and sex, would you say that your health is […]?	Very healthy ..... 1 Somewhat healthy..... 2 Somewhat unhealthy ..... 3 Unhealthy 4
KK02l.	Knowing your current condition, do you expect you will be able to do the same activities as you do today in the next 5 years?	Very likely ..... 1 Likely ..... 2 Unlikely ..... 3 Very unlikely 4

Now we would like to ask about the amount of time you spend on different types of physical activities in the last 7 days.

PHYSICAL ACTIVITIES (KKTYPE)	**KK02m.** During the **last 7 days**, did you do any [….] for at least 10 mintues continuously?	**KK02n.** How much time did you usually spend doing [….] on one of those days	**KK02o.** During the **last 7 days**, on how many days did you do […]?
A. Now, think about all the **vigorous activities** which take hard physical effort that you did in the last 7 days. Vigorous activities make you breathe much harder than normal and may include heavy lifting, digging, plowing, aerobics, fast bicycling, cycling with loads. Think only about those physical activities that you did for at least 10 minutes at a time.	3. No↓ 1. Yes→	1. < 2 hours → 11. < 30 minutes, 12. ≥ 30 minutes 2. ≥ 2 hours → 21. < 4 hours, 22. ≥ 4 hours	⌊__⌋ days
B. Now think about activities which take **moderate physical effort** that you did in the last 7 days. Moderate physical activities make you breathe somewhat harder than normal and may include carrying light loads, bicycling at a regular pace, or mopping the floor. Again, think about only those physical activities that you did for at least 10 minutes at a time.	3. No↓ 1. Yes→	1. < 2 hours → 11. < 30 minutes, 12. ≥ 30 minutes 2. ≥ 2 hours → 21. < 4 hours, 22. ≥ 4 hours	⌊__⌋ days
C. Now think about the time you spent **walking** in the last 7 days. This includes at work and at home, walking to travel from place to place, and any other walking that you might do solely for recreation, sport, exercise, or leisure.	3. No↓ 1. Yes→	1. < 2 hours → 11. < 30 minutes, 12. ≥ 30 minutes 2. ≥ 2 hours → 21. < 4 hours, 22. ≥ 4 hours	⌊__⌋ days

SECTION KK (HEALTH CONDITIONS)

Now we would like to know your physical ability in daily activity.

Physical Functioning Measures (SHOWCARD 15)

		If you had […], could you do it:			
KK03a.	To carry a heavy load (like a pail of water) for 20 meters	1. Easily	3. With difficulty		5. Unable to do it
KK03d.	To draw a pail of water from a well	1. Easily	3. With difficulty		5. Unable to do it
KK03j.	To walk for 1 kilometer	1. Easily	3. With difficulty		5. Unable to do it
KK03c.	To walk for 5 kilometers	1. Easily	3. With difficulty		5. Unable to do it
KK03b.	To sweep the house floor yard	1. Easily	3. With difficulty		5. Unable to do it
KK03e.	To bow, squat, kneel	1. Easily	3. With difficulty		5. Unable to do it
KK03l.	To walk across the room	1. Easily	3. With difficulty		5. Unable to do it
KK03i.	To stand up from sitting on the floor without help	1. Easily	3. With difficulty		5. Unable to do it
KK03g.	To stand up from sitting position in a chair without help	1. Easily	3. With difficulty		5. Unable to do it
KK03ea.	To reach or extend your arms above shoulder level	1. Easily	3. With difficulty		5. Unable to do it
KK03eb.	To pick up a small coin from a table	1. Easily	3. With difficulty		5. Unable to do it
KK03xx.	**CAPI CHECK: ALL KK03a-KK03eb = 1?**	**1. YES → KK03n**	**3. NO**		

Activities of Daily Living (ADL) (SHOWCARD 16)

KK03f.	To dress without help	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03m.	To bathe	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03k.	To get out of bed	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03ka.	To eat (eating food by oneself when it is ready)	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03kc.	To control urination or defecation	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it

Instrumental Activities of Daily Living (IADL)

KK03n.	To shop for personal needs	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03o.	To prepare hot meals (preparing ingredients, cooking, and serving food)	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03p.	To take medicine (taking right portion right on time)	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03pa.	To do household chores (house cleaning, doing dishes, making the bed, and arranging the house)	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03pb.	To shop for groceries (deciding what to buy and pay for it)	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03pc.	To manage your money (paying your bills, keeping track of expenses, or managing assets)	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it

SECTION KK (HEALTH CONDITIONS)

KK04a.	**CAPI CHECK :**	**IF ALL OF KK03f-KK03pc = 1 AND AGE>=40 ..... 1➔KK04j** **IF ALL OF KK03f-KK03pc = 1 AND AGE<40 ..... 2➔SECTION CD** **IF ANY OF KK03f-KK03pc = 3 , 4 OR 5 ..... 3➔KK04b**

Now we would like to know if about help you may have received in your daily activities.

KK04b.	If you need to do any of the daily activities listed in KK03f-KK03pc, do you need someone to assist you?	No..... 3➔**KK04j** Yes..... 1

		First person	Second person	Third person
KK04c.	Who often assisted you? (CAPI CHECK)	Name:_____ **ART:** ⌊_⌊_⌋ **("51" IF NOT IN THE ROSTER)**	Name:_____ **ART:** ⌊_⌊_⌋ **("51" IF NOT IN THE ROSTER)**	Name:_____ **ART:** ⌊_⌊_⌋ **("51" IF NOT IN THE ROSTER)**
KK04d.	What is his/.her relationship with you ? (CAPI CHECK)	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋
KK04e.	During the last 4 weeks, about how many days did […….] help you?	1. ⌊_⌊_⌋ days 8. DON'T KNOW	1. ⌊_⌊_⌋ days 8. DON'T KNOW	1. ⌊_⌊_⌋ days 8. DON'T KNOW
KK04f.	On the days […..] helps you, about how many hours per day is that?	1. ⌊N_⌊_⌋ hours 8. DON'T KNOW	1. ⌊_⌊_⌋ hours 8. DON'T KNOW	1. ⌊_⌊_⌋ hours 8. DON'T KNOW
KK04g.	Is […] paid to help you?	Yes..... 1 No 3	Yes ..... 1 No..... 3	Yes..... 1 No 3
KK04h.	Is there any other person who helps you?	Yes..... 1 ➔ Kolom 2 No ..... 3 ➔ KK04i	Yes ..... 1 ➔ Kolom 3 No..... 3 ➔ KK04i	Yes..... 1 ➔ KK04i No ..... 3 ➔ KK04i

KK04i.	In the last 4 weeks, how much money did you spend to have someone assisted you in the daily activities mentioned above?	1. Rp ⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ 6. DID NOT HAVE TO PAY 8. DON"T KNOW
KK04j.	If in the future you need someone to assist you in one of the daily activities above, who do you think will assist you besides your spouse? **(CAPI PRELOAD NAMES))**	Name: AR00 : ⌊_⌊_⌋ **("51" IF NOT IN THE ROSTER)**
KK04k.	What is his/.her relationship with you ? (CAPI WARNING: CANNOT BE 02)	⌊_⌊_⌋

KODE KK04d AND KK04k:

02.	Spouse	04.	Non-biological child	06.	Parent	08.	Sibling	10.	Grandchild	12.	Uncle/aunt	14.	Cousin	16.	Other family
03.	Biological child	05.	Son/daughter-in-law	07.	Parent-in-law	09.	Brother/sister-in-law	11.	Grandparent	13.	Nephew/niece	15.	Servant	17.	Non-family

SECTION KK (HEALTH CONDITIONS)

KK05x. CAPI CHECK COV3: AGE OF RESPONDENT≥ 40	**AGE < 40 ..... 3➔SECTION CD** **AGE ≥ 40 ..... 1**

Now we would like to ask you about the likelihood of you reaching a certain age.

KK05. CAPI CHECK COV3: AGE OF RESPONDENT?	**1. < 50 YEAR ➔COLUMN A**	**4. 60 – 64 YEAR ➔ COLUMN D**	**7. > 75 YEAR ➔ COLUMN G**
	2. 50 – 54 YEAR ➔COLUMN B	**5. 65 – 69 YEAR ➔ COLUMN E**	
	3. 55 – 59 YEAR ➔COLUMN C	**6. 70 – 74 YEAR ➔ COLUMN F**	

AGE (KK1TYPE)	**A**	**B**	**C**	**D**	**E**	**F**	**G**
	60 years	**65 years**	**70 years**	**75 years**	**80 years**	**85 years**	**100 years**
KK06. Suppose there are 5 steps, where the lowest step represents the smallest chance and the highest step represents the highest chance, on what step do you think is your chance in reaching the age of [...]? **1 (almost impossible)** **5 (almost certain) (SHOWCARD 17)**	1	1	1	1	1	1	1
	2	2	2	2	2	2	2
	3	3	3	3	3	3	3
	4	4	4	4	4	4	4
	5	5	5	5	5	5	5

SECTION CD (CHRONIC CONDITIONS)

Now we would like to ask you about some health conditions that you may have been diagnosed with.

CD01. Did a **doctor/paramedic/nurse/midwife** ever diagnose you with […]?	**CD02.** Who first diagnose you with [...]?	CD02a. When was the condition […] first diagnosed?	CD03.Does the condition limit the kind or amount of paid work you can do?
A. Physical disabilities..... 3. No ➔ 1. Yes ➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
B. Brain damage ..... 3. No ➔ 1. Yes ➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
C. Vision problem ..... 3. No ➔ 1. Yes ➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
D. Hearing problem ..... 3. No ➔ 1. Yes ➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
E. Speech impediment .... 3. No ➔ 1. Yes ➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
F. Mental retardation..... 3. No ➔ 1. Yes ➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
I. Autism..... 3. No ➔ 1. Yes ➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all

SECTION CD (CHRONIC CONDITIONS)

Now we would like to ask you about some chronic illnesses that you may have been diagnosed with.

CHRONIC CONDITIONS (CDTYPE)	CD05. Have a doctor/paramedic/nurse/ midwive ever told you that you had [….]	CD06. In which organ or part of the body have you or have you had cancer?	CD07. When was the condition […] first diagnosed?	CD08. Who diagnosed the […] condition?	CD09. In order to deal with […] are you currently taking prescribed medication on a weekly basis?	CD09a. Are you now taking the following treatments to treat […] and its complications?	CD09b. How many timesin the last 12 months have you had:	CD09c Have your care providers ever given you health education/advice on the following?	CD10. Does the condition limit the kind or amount of paid work you can do? **(SHOWCARD 18)**
A. Hypertension	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌊⌋⌊⌋⌊⌋ / Month / Year 2. Age: ⌊⌊⌋⌊⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌊⌋⌊⌋⌊⌋	1. ⌊⌊⌋⌊⌋⌊⌋	⌊⌋⌊⌋⌊⌋⌊⌋⌊⌋	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
B. Diabetes or high blood sugar	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌊⌋⌊⌋⌊⌋ / Month / Year 2. Age: ⌊⌊⌋⌊⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No.....	⌊⌋⌊⌋⌊⌋	1. ⌊⌊⌋⌊⌋⌊⌋ 2. ⌊⌊⌋⌊⌋⌊⌋ 3. ⌊⌊⌋⌊⌋⌊⌋ 4. ⌊⌊⌋⌊⌋⌊⌋ 5. ⌊⌊⌋⌊⌋⌊⌋	⌊⌋⌊⌋⌊⌋⌊⌋⌊⌋	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
C. Tuberculosis (TBC)	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌊⌋⌊⌋⌊⌋ / Month / Year 2. Age: ⌊⌊⌋⌊⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No.....	⌊⌋⌊⌋⌊⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
D. Asthma	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌊⌋⌊⌋⌊⌋ / Month / Year 2. Age: ⌊⌊⌋⌊⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌊⌋⌊⌋⌊⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
E. Other lung conditions	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌊⌋⌊⌋⌊⌋ / Month / Year 2. Age: ⌊⌊⌋⌊⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌊⌋⌊⌋⌊⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
F. Heart attack, coronary heart disease, angina, or other heart problems	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌊⌋⌊⌋⌊⌋ / Month / Year 2. Age: ⌊⌊⌋⌊⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌊⌋⌊⌋⌊⌋		⌊⌋⌊⌋⌊⌋⌊⌋⌊⌋	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
G. Liver	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌊⌋⌊⌋⌊⌋ / Month / Year 2. Age: ⌊⌊⌋⌊⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌊⌋⌊⌋⌊⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all

SECTION CD (CHRONIC CONDITIONS)

CHRONIC CONDITIONS (CDTYPE)	CD05. Have a doctor/paramedic/nurse/ midwive ever told you that you had [….]	CD06. In which organ or part of the body have you or have you had cancer?	CD07. When was the condition […] first diagnosed?	CD08. Who diagnosed the […] condition?	CD09. In order to deal with […] are you currently taking prescribed medication on a weekly basis?	CD09a. Are you now taking the following treatments to treat […] and its complications?	CD09b. How many timesin the last 12 months have you had:	CD09c Have your care providers ever given you health education/advice on the following?	CD10. Does the condition limit the kind or amount of paid work you can do? **(SHOWCARD 18)**
H. Stroke	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌴⌴⌴		⌴⌴⌴⌴⌴	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
I. Cancer or malignant tumor	3. No ↓ 1. Yes➔	⌴	1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
J. Arthritis/rheumatism	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
M. High Cholestero (Total or LDL)l	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌋⌋ Month / Year 2. Age: ⌊⌊D⌋⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌴⌴⌴		⌴⌴⌴⌴⌴	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
N. Prostate illness	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No..... 3	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
O. Kidney disease (except for tumor or cancer)	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No.....	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
P. Stomach or other digestive disease	3. No ↓ 1. Yes➔		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No.....	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all

SECTION CD (CHRONIC CONDITIONS)

CHRONIC CONDITIONS (CDTYPE)	CD05. Have a doctor/paramedic/nurse/ midwive ever told you that you had [….]	CD06. In which organ or part of the body have you or have you had cancer?	CD07. When was the condition […] first diagnosed?	CD08. Who diagnosed the […] condition?	CD09. In order to deal with […] are you currently taking prescribed medication on a weekly basis?	CD09a. Are you now taking the following treatments to treat […] and its complications?	CD09b. How many timesin the last 12 months have you had:	CD09c Have your care providers ever given you health education/advice on the following?	CD10. Does the condition limit the kind or amount of paid work you can do? **(SHOWCARD 18)**
Q. Emotional, nervous, or psychiatric problems	3. No 1. Yes➔ ⬇		1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No.....	⌊_⌋ ⌊_⌋ ⌊_⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
R. Memory-related disease	3. No 1. Yes➔ ⬇		1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	Doctor ..... 1 Paramedic ..... 2 Nurse ..... 3 Midwive..... 4	Yes ..... 1 No.....	⌊_⌋ ⌊_⌋ ⌊_⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all

Code for CD06 (Cancer)

A.	Brain	I.	Stomach	Q.	Endometrium
B.	Oral cavity	J.	Liver	R.	Colon/Rectum
C.	Larynx	K.	Pancreas	S.	Bladder
D.	Other pharynx	L.	Kidney	T.	Skin
E.	Thyroid	M.	Prostate	U.	Non Hodgkin lymphoma
F.	Lungs	N.	Testicle	X.	Leukemia
G.	Breast	O.	Ovary	V.	Other, mention_____
H.	Oesephagus	P.	Cervix		

NOTE for CD09a

1. Codes A, B,V and W is for all CDTYPE, codes C-K are for specific CDTYPE mentioned in the parentheses.
2. CD09b is for CDTYPE A and B only, need to block the other CDTYPE.
3. CD09b is for CDTYPE A,B,F,H and M only need to block the other CDTYPE.

Code for CD09a

A.	Traditional medicine
B.	Modern medicine
C.	Insulin injection (CAPI: ONLY FOR CDTYPE B)
D.	Chemotherapy (CAPI: ONLY FOR CDTYPE I)
E.	Surgery (CAPI: ONLY FOR CDTYPE I)
F.	Radiation therapy (CAPI: ONLY FOR CDTYPE I)
G.	Physical therapy (CAPI: ONLY FOR CDTYPE H)
H.	Occupational therapy(CAPI: ONLY FOR CDTYPE H)
I.	Receiving psychiatric/psychological treatment (CAPI: ONLY FOR CDTYPE L)
J.	Taking anti-depressant (CAPI: ONLY FOR CDTYPE L)
K.	Taking tranquilizer/sleeping pills (CAPI: ONLY FOR CDTYPE L)
V.	Other treatment
W.	No treatment

Code for CD09b

1.	Blood pressure test (CAPI: ONLY FOR CDTYPE A)
2.	Blood glucose test (CAPI: ONLY FOR CDTYPE B)
3.	Urine glucose test (CAPI: ONLY FOR CDTYPE B)
4.	Fundus examination (CAPI: ONLY FOR CDTYPE B)
5.	Micro-albuminuria test (CAPI: ONLY FOR CDTYPE B)

Code for CD09c

A.	Weight control
B.	Exercise
C.	Diet
D.	Smoking control
E.	Foot self care (CAPI: ONLY FOR CDTYPE B)
W.	None of the above

CD11.	Do you usually wear glasses or corrective lenses?	1. Yes 3. No
CD12.	Do you ever wear hearing aid?	1. Yes 3. No
CD13.	Do you use a walking cane/walker/other walking aids?	1. Walking cane 2. Walker 3. Manual wheelchair 4. Electric wheelchair 6. DO NOT USE WALKING AID

SECTION KP (MENTAL HEALTH)

Now we would like to ask some questions about how you feel in the past week.

KPTYPE	KP02. (SHOWCARD 19) How often ?			
A. I was bothered by things that usually don't bother me	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
B. I had trouble concentrating in what I was doing	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
C. I felt depressed	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
D. I felt everything I did was an effort	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
E. I felt hopeful about the future	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
F. I felt fearful	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
G. My sleep was restless	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
H. I was happy	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
I. I felt lonely	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)
J. I could not get going	1. Rarely or none (≤1 day)	2. Some days (1-2 days)	3. Occasionally (3-4 days)	4. Most of the time (5-7 days)

SECTION PSN (PERSONALITY)

Here are a number of characteristics that may or may not apply to you. For example, do you agree that you are someone who *likes to spend time with others?* Please fill in the bubble that corresponds to how much you agree or disagree with each statement using the following scale: 1. Disagree strongly 2. Disagree a little 3. Neither agree nor disagree 4. Agree a little 5.Agree Strongly

RANDOM_PSN:

1. LIST A

PSNTYPE		PSN01. *I See Myself As Someone Who* [….]				
		1. Disagree strongly	2. Disagree a little	3. Neither agree nor disagree	4. Agree a little	5. Agree Strongly
1	Is talkative.	1	2	3	4	5
2	Does a thorough job.	1	2	3	4	5
3	Is original, comes up with new ideas.	1	2	3	4	5
4	Is reserved.	1	2	3	4	5
5	Is relaxed, handles stress well.	1	2	3	4	5
6	Has a forgiving nature.	1	2	3	4	5
7	Worries a lot.	1	2	3	4	5
8	Has an active imagination.	1	2	3	4	5
9	Tends to be lazy.	1	2	3	4	5
10	Values artistic, aesthetic experiences.	1	2	3	4	5
11	Is considerate and kind to almost everyone.	1	2	3	4	5
12	Does things efficiently.	1	2	3	4	5
13	Outgoing, sociable.	1	2	3	4	5
14	Is sometimes rude to others.	1	2	3	4	5
15	Gets nervous easily.	1	2	3	4	5

SECTION PSN (PERSONALITY)

RANDOM_PSN:

2. LIST B

	PSNTYPE	PSN01. *I See Myself As Someone Who* [….]				
		3. Disagree strongly	2. Disagree a little	3. Neither agree nor disagree	4. Agree a little	5. Agree Strongly
4	Is reserved.	1	2	3	4	5
12	Does things efficiently.	1	2	3	4	5
9	Tends to be lazy.	1	2	3	4	5
10	Values artistic, aesthetic experiences.	1	2	3	4	5
13	Outgoing, sociable.	1	2	3	4	5
3	Is original, comes up with new ideas.	1	2	3	4	5
11	Is considerate and kind to almost everyone.	1	2	3	4	5
2	Does a thorough job.	1	2	3	4	5
8	Has an active imagination.	1	2	3	4	5
14	Is sometimes rude to others.	1	2	3	4	5
5	Is relaxed, handles stress well.	1	2	3	4	5
1	Is talkative.	1	2	3	4	5
6	Has a forgiving nature.	1	2	3	4	5
15	Gets nervous easily.	1	2	3	4	5
7	Worries a lot.	1	2	3	4	5

SECTION PSN (PERSONALITY)

RANDOM_PSN:

3. LIST C

	PSNTYPE	PSN01. *I See Myself As Someone Who* [….]				
		4. Disagree strongly	2. Disagree a little	3. Neither agree nor disagree	4. Agree a little	5. Agree Strongly
12	Does things efficiently.	1	2	3	4	5
3	Is original, comes up with new ideas.	1	2	3	4	5
9	Tends to be lazy.	1	2	3	4	5
4	Is reserved.	1	2	3	4	5
15	Gets nervous easily.	1	2	3	4	5
5	Is relaxed, handles stress well.	1	2	3	4	5
2	Does a thorough job.	1	2	3	4	5
6	Has a forgiving nature.	1	2	3	4	5
11	Is considerate and kind to almost everyone.	1	2	3	4	5
13	Outgoing, sociable.	1	2	3	4	5
8	Has an active imagination.	1	2	3	4	5
7	Worries a lot.	1	2	3	4	5
14	Is sometimes rude to others.	1	2	3	4	5
1	Is talkative.	1	2	3	4	5
10	Values artistic, aesthetic experiences.	1	2	3	4	5

SECTION PSN (PERSONALITY)

RANDOM_PSN:

4. LIST D

	PSNTYPE	PSN01. *I See Myself As Someone Who* [….]				
		4. Disagree strongly	2. Disagree a little	3. Neither agree nor disagree	4. Agree a little	5. Agree Strongly
8	Has an active imagination.	1	2	3	4	5
9	Tends to be lazy.	1	2	3	4	5
15	Gets nervous easily.	1	2	3	4	5
11	Is considerate and kind to almost everyone.	1	2	3	4	5
13	Outgoing, sociable.	1	2	3	4	5
2	Does a thorough job.	1	2	3	4	5
14	Is sometimes rude to others.	1	2	3	4	5
6	Has a forgiving nature.	1	2	3	4	5
10	Values artistic, aesthetic experiences.	1	2	3	4	5
3	Is original, comes up with new ideas.	1	2	3	4	5
5	Is relaxed, handles stress well.	1	2	3	4	5
1	Is talkative.	1	2	3	4	5
4	Is reserved.	1	2	3	4	5
7	Worries a lot.	1	2	3	4	5
12	Does things efficiently.	1	2	3	4	5

SECTION CO (COGNITIVE CAPACITY)

Now I am going to ask some simple questions. Some may be easy, some may be hard to answer.

CO01.	Please tell me today's date	1. Gregorian calenddar: ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year 2. Islamic calendar: ⌊_⌋⌊_⌋ / _____ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year 3. Local calendar: ⌊_⌋⌊_⌋ / _____ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year 8. DON'T KNOW
CO02.	**CAPI CHECK: DATE OF INTERVIEW** 1. Gregorian calenddar: ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year 2. Islamic calendar: ⌊_⌋⌊_⌋ / _____ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year 3. Local calendar: ⌊_⌋⌊_⌋ / _____ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Day / Month / Year	**1. ALL THREE OF DAY/MONTH/YEAR WERE ANSWERED CORRECTLY** **2. TWO OF DAY/MONTH/YEAR WERE ANSWERED CORRECTLY** **3. ONE OF DAY/MONTH/YEAR WAS ANSWERED CORRECTLY** **4. NONE OF DAY/MONTH/YEAR WERE ANSWERED CORRECTLY** **5. CO01=8**
CO03.	Please tell me what the day of the week is today	1. Sunday 2. Monday 3. Tuesday 4. Wednesday 5. Thursday 6. Friday 7. Saturday 8. DON"T KNOW
CO04.	**CAPI CHECK TODAY'S DAY: _____**	**1. DAY MENTIONED IN CO03 IS CORRECT** **3. DAY MENTIONED IN CO03 IS INCORRECT** **6. CO03=8**
C04aa.	How would you rate your memory at the present time? Would you say it is excellent, very good, good, fair or poor?	1. Excellent 2. Very good 3.Good 4. Fair 5. Poor

Let's try some subtraction of numbers now.

CO04a.	What are 100 minus 7 equal to?	1. ⌊_⌋⌊_⌋	7. REFUSE➔**CO04f**	8. DON'T KNOW➔**CO04f**
CO04b.	And - 7 from that?	1. ⌊_⌋⌊_⌋	7. REFUSE➔**CO05**	8. DON'T KNOW➔**CO05**
CO04c	And - 7 from that?	1. ⌊_⌋⌊_⌋	7. REFUSE➔**CO05**	8. DON'T KNOW➔**CO05**
CO04d	And - 7 from that?	1. ⌊_⌋⌊_⌋	7. REFUSE➔**CO05**	8. DON'T KNOW➔**CO05**
CO04e	And - 7 from that?	1. ⌊_⌋⌊_⌋ ➔**CO05**	7. REFUSE➔**CO05**	8. DON'T KNOW➔**CO05**

SECTION CO (COGNITIVE CAPACITY)

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, most people will only remember a few of them. Please listen carefully as we read the list, because we cannot repeat it. When we finsih 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?

CO05. INTERVIEWER CHECK: PROBE WHETHER RESPONDENT NEED MORE EXPLANATION. READ THE LIST SLOWLY, WITH INTERVAL AROUND 2 SECONDS BETWEEN EACH WORD	**MENOLAK..... 7→SEKSI MA** **BERPARTISIPASI..... 1**

CO06. CAPI CHECK COV9 AND CIRCLE THE LIST OF WORDS TO USE: 1. A 2. B 3. C 4.D

READ THE LIST SLOWLY, WITH INTERVAL AROUND 2 SECONDS BETWEEN EACH WORD

LIST A	LIST B	LIST C	LIST D
A01. HOTEL	B01. SKY	C01. MOUNT	D01. WATER
A02. RIVER	B02. OCEAN	C02. STONE	D02. MOSQUE
A03. TREE	B03. FLAG	C03. BLOOD	D03. DOCTOR
A04. SKIN	B04. RUPIAH	C04. CORNER	D04. CASTLE
A05. GOLD	B05. WIFE	C05. SHOES	D05. FIRE
A06. MARKET	B06. MACHINE	C06. LETTER	D06. GARDEN
A07. PAPER	B07. HOUSE	C07. GIRL	D07. SEA
A08. CHILD	B08. EARTH	C08. HOUSE	D08. VILLAGE
A09. KING	B09. SCHOOL	C09. VALLEY	D09. BABY
A10. BOOK	B10. BUTTER	C10. CAR	D10. TABLE

SECTION CO (COGNITIVE CAPACITY)

Now please let us know the words you are able to recall.
INTERVIEWER CHECK: GIVE RESPONDENT ENOUGH TIME TO RECALL, APPROXIMATELY UP TO TWO MINUTES.

CO07. INTERVIEWER CHECK: CIRCLE ALL THE WORDS MENTIONED BY THE RESPONDENT ON THE COLUMN

LIST A	LIST B	LIST C	LIST D
A01. HOTEL	B01. SKY	C01. MOUNT	D01. WATER
A02. RIVER	B02. OCEAN	C02. STONE	D02. MOSQUE
A03. TREE	B03. FLAG	C03. BLOOD	D03. DOCTOR
A04. SKIN	B04. RUPIAH	C04. CORNER	D04. CASTLE
A05. GOLD	B05. WIFE	C05. SHOES	D05. FIRE
A06. MARKET	B06. MACHINE	C06. LETTER	D06. GARDEN
A07. PAPER	B07. HOUSE	C07. GIRL	D07. SEA
A08. CHILD	B08. EARTH	C08. HOUSE	D08. VILLAGE
A09. KING	B09. SCHOOL	C09. VALLEY	D09. BABY
A10. BOOK	B10. BUTTER	C10. CAR	D10. TABLE
A96. NONE RECALLED	**B96. NONE RECALLED**	**C96. NONE RECALLED**	**D96. NONE RECALLED**
A97. REFUSE TO RECALL	**B97. REFUSE TO RECALL**	**C97. REFUSE TO RECALL**	**D97. REFUSE TO RECALL**

CO08. INTERVIEWER CHECK: WRITE DOWN THE TIME NOW ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋
HOUR / MINUTE

CO08a. INTERVIEWER : "We will ask you again the recall the words later. Now we will go on with the next questions. "

SECTION MA (ACUTE MORBIDITY)

Now we'd like to know about whatever symptoms you have had during the past 4 weeks, namely since [...] date, 4 weeks ago.

SYMPTOMS (MATYPE)	MA01. Did you ever experience [...] in the last 4 weeks? 1. Yes	3. No
A. Headache	1	3
B. Runny nose	1	3
C. Cough	1	3➔**D**
a. Dry cough	a. 1	3
b. Cough with phlegm	b. 1	3
c. Bloody cough	c. 1	3
D. Difficulty breathing	1	3➔**E**
a. Wheezing	a. 1	3
b. Short, rapid breath	b. 1	3
E. Fever	1	3
F. Stomach ache	1	3
H. Nausea/vomiting	1	3
I. Diarrhea minimal of 3x per day	1	3➔**P**
a. Mixed with blood	a. 1	3
b. Mixed with mucous	b. 1	3
c. Pale liquid	c. 1	3
P. Swollen legs	1	3
K. Skin infection (boil, abcess itching)	1	3
L. Eye Infection	1	3
M. Toothache	1	3
U. Cold sores	1	3

MA07.	**CAPI CHECK COV3:**	**RESPONDENT IS< 40YEARS ..... 3 ➔ MA15** **RESPONDENT IS ≥ 40 YEARS 1**
MA08a.	Do you have to often get up during the night to urinate?	Yes ..... 1 No..... 3
MA08b.	If you have a cut or wound, does it take a long time to heal?	Yes ..... 1 No..... 3
MA08c.	Do you ever feel pain on the left side of your chest?	Yes ..... 1 No..... 3
MA08d.	Do you ever feel chest pains when climbing stairs/or up hill?	Yes ..... 1 No..... 3
MA08e.	Do you ever feel chest pains when you are active or walk fast?	Yes ..... 1 No..... 3
MA08f.	Do you often have a headache when you wake up in the morning?	Yes ..... 1 No..... 3
MA08g.	Do you/have you ever had cataract?	No.....3→MA08i Yes 1
MA08h.	Do you/did you have cataract on both eyes or just one?	Right eye .....1 Left eye.....2 Right and left eyes 3
MA08i.	Have you ever had glaucoma?	Yes .....1 No.....3
MA08j.	Have you lost all your teeth?	Yes .....1 No.....3

SECTION MA (ACUTE MORBIDITY)

MA15. Have you ever been in a traffic accident and received treatment?	No..... 3➔**MA18** Yes 1
MA16. When were you injured in a traffic accident? (**Most recent one if more than once**)	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year
MA17. Does the injury caused by the accident limit your daily activities?	1. Yes, very much so 2. Yes, to some degree 3. No, not much 4. No, not at all
MA18. Have you fallen down in the last two years?	No..... 3➔ **MA22** Yes 1
MA19. How many times have you fallen down in the last two years?	⌊_⌋⌊_⌋ Times
MA20. When did you last fall and need treatment? (**Most recent one if more than once**)	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year
MA21. Does the injury caused by the fall limit your daily activities?	1. Yes, very much so 2. Yes, to some degree 3. No, not much 4. No, not at all
MA22. Have you ever fractured your hip?	No..... 3 Yes 1

SECTION CO (COGNITIVE CAPACITY)

CO09. INTERVIEWER CHECK: WRITE DOWN THE TIME NOW ⌊_⌊_⌋ / ⌊_⌊_⌋

HOUR / MINUTE

A short while ago, we read a list of words to you and you have tried to recall some of the words you heard. Please let us know the words you are able to recall now.

CO10. INTERVIEWER CHECK: GIVE RESPONDENT ENOUGH TIME TO RECALL, APPROXIMATELY UP TO TWO MINUTES

LIST A	LIST B	LIST C	LIST D
A01. HOTEL	B01. SKY	C01. MOUNT	D01. WATER
A02. RIVER	B02. OCEAN	C02. STONE	D02. MOSQUE
A03. TREE	B03. FLAG	C03. BLOOD	D03. DOCTOR
A04. SKIN	B04. RUPIAH	C04. CORNER	D04. CASTLE
A05. GOLD	B05. WIFE	C05. SHOES	D05. FIRE
A06. MARKET	B06. MACHINE	C06. LETTER	D06. GARDEN
A07. PAPER	B07. HOUSE	C07. GIRL	D07. SEA
A08. CHILD	B08. EARTH	C08. HOUSE	D08. VILLAGE
A09. KING	B09. SCHOOL	C09. VALLEY	D09. BABY
A10. BOOK	B10. BUTTER	C10. CAR	D10. TABLE
A96. NONE RECALLED	B96. NONE RECALLED	C96. NONE RECALLED	D96. NONE RECALLED
A97. REFUSE TO RECALL	B97. REFUSE TO RECALL	C97. REFUSE TO RECALL	D97. REFUSE TO RECALL

SECTION TDR (SLEEP)

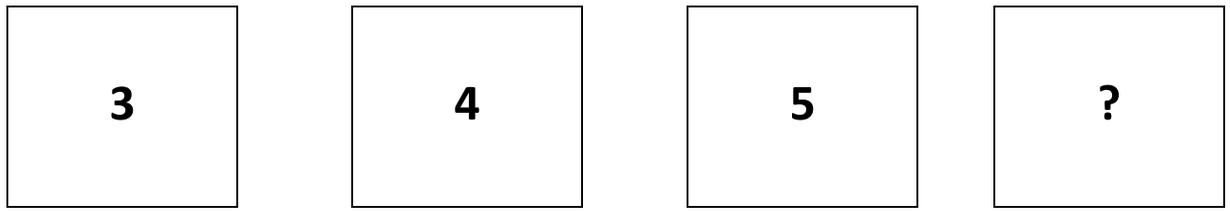
Now we would like to ask you some questions about your sleep.

	TDRTYPE	TDR01. In the past 7 days […]				
1	I had trouble sleeping	1. Never	2.Rarely	3.Sometimes	4.Often	5.Always
2	My quality of sleep was…	1. Very poor	2.Poor	3.Fair	4.Good	5.Very good
3	My sleep was refreshing	1. Not at all	2. A little bit	3. Somewhat	4. Quite a bit	5. Very much
4	I was satisfied with my sleep	1. Not at all	2. A little bit	3. Somewhat	4. Quite a bit	5. Very much
5	I had difficulty falling asleep	1. Not at all	2. A little bit	3. Somewhat	4. Quite a bit	5. Very much
6	I had a hard time concentrating because of poor sleep	1. Not at all	2. A little bit	3. Somewhat	4. Quite a bit	5. Very much
7	I had problems during the day because of poor sleep	1. Not at all	2. A little bit	3. Somewhat	4. Quite a bit	5. Very much
8	I had a hard time getting things done because I was sleepy	1. Not at all	2. A little bit	3. Somewhat	4. Quite a bit	5. Very much
9	I felt tired	1. Not at all	2. A little bit	3. Somewhat	4. Quite a bit	5. Very much
10	I felt irritable because of poor sleep	1. Not at all	2. A little bit	3. Somewhat	4. Quite a bit	5. Very much

SECTION COB (COGNITIVE CAPACITY B)

Now we will show you several series of numbers on the computer screen. In each series there will be one number that is missing. The missing number will be indicated by a question mark "?". Please look at the pattern of the numbers. Based on this pattern, tell me what the number that is missing. Sometimes the question mark will be at the beginning of the series, sometimes the question mark will be in the middle, or at the beginning.

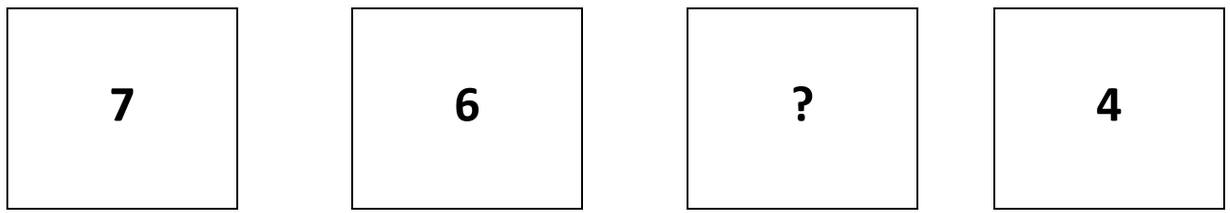
For example, if you see the following [SHOW EXAMPLE ON SHOWCARD], what number should go in the question mark?



IF RESPONDENT ANSWERS INCORRECTLY OR DID NOT ANSWER THEN SAY: The answer we were looking for is 6.

PROBE TO SEE IF RESPONDENT UNDERSTANDS THE TASK BY ASKING: Do you understand the directions for this task?

NEXT SHOW THE SECOND EXAMPLE ON SHOWCARD, AND ASK: Let's try another one: what number should go in the question mark?



IF RESPONDENT ANSWERS INCORRECTLY OR DID NOT ANSWER, THEN SAY: The answer we were looking for is 5.

I AM NOW GOING TO ASK SIX MORE QUESTIONS LIKE THE ONES YOU JUST DID. SOMETIME THERE CAN BE MORE THAN ONE MISSING NUMBER IN THE SEQUENCE. THE NUMBERS MAY INCREASE OR DECREASE. SOME OF THE PROBLEMS WILL BE EASY, AND SOME OF THEM WILL BE HARD. JUST DO THE BEST YOU CAN. IT IS MORE IMPORTANT TO ANSWER CORRECTLY THAN QUICKLY, SO TAKE A LITTLE TIME BEFORE ANSWERING. IT IS OKAY IF YOU DO NOT KNOW THE ANSWER BECAUSE SOME OF THE QUESTIONS ARE INTENDED TO BE VERY DIFFICULT. YOU CAN GO ON TO THE NEXT QUESTION AT ANY TIME. **ARE YOU READY TO BEGIN?**

SECTION COB (COGNITIVE CAPACITY B)

COBXX1. CAPI: TIME START I ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ (HOUR: MINUTE:SECOND)

STARTING BLOCK: 4, 7, 11 FOR ALL RESPONDENTS (questions appear one at a time in CAPI)

COB01.	04.	7	8	?	10

COB02.	07.	8	?	12	14

COB03.	11.	18	10	6	?	3

QUESTION BLOCK 1: 1, 2, 3 FOR RESPONDENTS WHO GOT 0 (ZERO) QUESTION CORRECT IN STARTING BLOCK

COB04.	01.	1	2	3	?

COB05.	02.	6	5	4	?

COB06.	03.	12	?	16	18

COBXX2. CAPI: WAKTU SELESAI ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ (JAM: MENIT:DETIK)

QUESTION BLOCK 2: 5, 6, 8 FOR RESPONDENTS WHO GOT 1 (ONE) QUESTION CORRECT IN STARTING BLOCK

COB04.	05.	5	?	3	2

COB05.	06.	4	7	10	?

COB06.	08.	?	4	6	8

COBXX2. CAPI: WAKTU SELESAI ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ (JAM: MENIT:DETIK)

QUESTION BLOCK 3: 9, 10, 12 FOR RESPONDENTS WHO GOT 2 (TWO) QUESTIONS CORRECT IN STARTING BLOCK

COB04.	09.	1	3	3	5	7	7	?

COB05.	10.	3	?	8	12	17

COB06.	12.	17	?	12	8

COBXX2. CAPI: TIME END ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ (HOUR: MINUTE:SECOND)

QUESTION BLOCK 4: 13, 14, 15 FOR RESPONDENTS WHO GOT 3(ALL) QUESTIONS CORRECT IN STARTING BLOCK

COB04.	13.	10	?	3	1

COB05.	14.	18	17	15	?	8

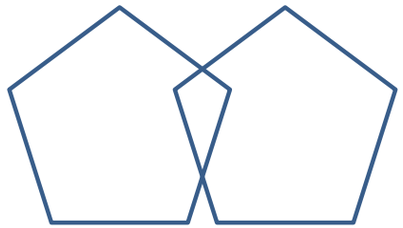
COB06.	15.	3	3	4	6	6	7	?	?

COBXX2. CAPI: TIME END ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ (HOUR: MINUTE:SECOND)

SECTION COB (COGNITIVE CAPACITY B)

COB16.	CAPI CHECK AGE OF RESPONDENT	< 50 Years..... 1➔ **SECTION EH** ≥ 50 Years..... 3
COB17.	Please try to count backward as quickly as you can from 20:	
COB17XX1.	STARTING TIME	⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋ (HOUR/MINUTE/SECOND) (CAPI)
COB17A.	INTERVIEWER CHECK: WAS THE RESPONDENT ABLE TO COUNT DOWN BACKWARD FROM 20 CORRECTLY?	YES,IN ⌊__⌋⌊__⌋ SECONDS ..... 1 NO, ... 3
COB17XX2.	ENDING TIME (CAPI)	⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋ (HOUR/MINUTE/SECOND) (CAPI)
COB17C.	LANGUAGE USED	|__| (LANGUAGE CODE)
CO B17D.	DOES INTERVIEWER UNDERSTAND THE LANGUAGE IN COB17C?	1. YES 3. NO
COB18.	Now I want to know how many animals you can name. You will have **60 seconds.** When I say "begin", say the animal as fast as you can. Please do not include mythical animals and try not to repeat the animal. GET READY TO TIME 60 SECONDS. REPEAT INSTRUCTION IF NECESSARY. WITH PENCIL AND PAPER TALLY THE NUMBER OF ANIMALS MENTIONED BY THE RESPONDENT. DO NOT TALLY MYTHICAL ANIMALS OR REPEATED ANIMALS. START THE TIMER AS SOON AS YOU SAY "BEGIN" Are you ready? Begin. CAPI: SHOW THE TIMER. AFTER 60 SECONDS, COUNT THE TALLY AND ENTER THE TOTAL IN CAPI	⌊__⌋⌊__⌋ number of animal names
COB18B.	LANGUAGE USED	|__| (LANGUAGE CODE)
CO B18C.	DOES INTERVIEWER UNDERSTAND THE LANGUAGE IN COB18B?	1. YES 3. NO

SECTION COB (COGNITIVE CAPACITY B)

COB18A.	 Please draw the two overlapping pentagons as shown in the following example **(INTERVIEWER: USE SHOWCARD, PROVIDE ANSWER SHEET AND PEN).**	ANSWER SHEET: **IDRT:** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ **ART.** ⌊_⌋⌊_⌋
COB18B.	INTERVIEWER CHECK : WAS THE RESPONDENT ABLE TO DRAW THE OVERLAPPING PENTAGONS?	YES ..... 1 NO 3

SECTION EH (EARLY HEALTH)

The next set of questions is about your health during your childhood. By childhood we mean from when you were born up until, and including, when you were age 15.

EH01.	Would you say that your health during your childhood was in general excellent, very good, good, fair, or poor?	1. Excellent 2. Very good 3. Good 4. Fair 5. Poor
EH02.	Did you ever miss school for a month or more because of a health condition during childhood (that is, from when you were born up to and including age 15)?	1. Yes 3. No 6. NA (No school)
EH03.	During your childhood, because of a health condition, were you ever confined to bed or home for one month or more?	1. Yes 3. No
EH04.	During your childhood (that is, from when you were born up to and including age 15), because of a health condition, were you ever in hospital for one month or more?	1. Yes 3. No
EH05.	Did you have any of the diseases or illnesses on this card during your childhood (that is, from when you were born up to and including age 15)? *Interviewer: Please code all that apply. Choose 'other' in the next question if necessary.*	A. Infectious disease (e.g. measles, rubella, chicken pox, mumps, tubercolosis, diphtheria, scarlet fever) B. Polio C. Asthma D. Respiratory problems other than asthma E. Allergies (other than asthma) F. Severe diarrhoea G. Epilepsy, fits or seizures H. Emotional, nervous, or psychiatric problem J. Childhood diabetes or high blood sugar K. Heart trouble L. Leukaemia or lymphoma M. Cancer or malignant tumour (excluding minor skin cancers) W. NONE OF THESE V. Other serious diseases/illnesses
EH06.	WHEN INFECTIOUS DISEASE CAPI CHECK: EH05 HAS "A" CHOSEN When in your childhood did you first have an infectious disease?	1. When I was between 0-5 years old. 2. When I was between 6-10 years old. 3. When I was between 11-15 years old. 6. NA
EH07.	WHEN POLIO CAPI CHECK: EH05 HAS "B" CHOSEN When in your childhood did you first have polio?	1. When I was between 0-5 years old. 2. When I was between 6-10 years old. 3. When I was between 11-15 years old. 6. NA
EH08.	Did you everexperience hunger in your childhood (from birth to 15 years)	1. Yes 3. No
EH09.	IF EVER HUNGER CAPI CHECKS: EH08 == 1 . When in your childhood were you frist exposed to hunger?	1. When I was between 0-5 years old. 2. When I was between 6-10 years old. 3. When I was between 11-15 years old. 6. NA

Comment [FW1]: Options: 1. Drop EH06 (and also drop the follow up questions EH09, EH10), or 2. Drop some diseases from the options in EH06, but still keeping EH09, EH10.

SECTION SA (CHILDHOOD SES)

We would like to find out more about you when you were 12 years old.

SA01	When you were 12, how many rooms did your household occupy in the accommodation, including bedrooms but excluding kitchen, bathrooms, and hallways? *Interviewer: Do not count boxroom, cellar, attic etc.*	⌊_⌋⌊_⌋
SA02.	Including yourself, how many people lived in your household at this accommodation when you were 12?	⌊_⌋⌊_⌋
SA03.	How many older brothers lived in your household at this accommodation when you were 12?	⌊_⌋⌊_⌋
SA04.	How many older sisters lived in your household at this accommodation when you were 12?	⌊_⌋⌊_⌋
SA05.	How many younger brothers lived in your household at this accommodation when you were 12?	⌊_⌋⌊_⌋
SA06.	How many younger sisters lived in your household at this accommodation when you were 12?	⌊_⌋⌊_⌋
SA07.	When you were 12, did any of your parents:	Smoke ..... A Drink heavily ..... B Have mental problems ..... C None of the above ..... X NA ..... W
MG18f.	When you were 12, were your biological parents still married?	NA ..... 6 No ..... 3 Yes 1
MG18g.	When you were 12, did you live with your biological mother?	NA ..... 6 No ..... 3 Yes 1
MG18h.	When you were 12, did you live with your biological father?	NA ..... 6 No ..... 3 Yes 1
SA08.	When you were 12, did you live with any of your grandparent?	NA ..... 6 No ..... 3 Yes 1
SA09.	When you were 12, did your households utilize electricity?	Yes ..... 1 No 3
SA10.	When you were 12, what is the main water source for drinking in your household?	Piped water ..... 01 Well/pump (electric, hand) ..... 02 Well water ..... 03 Other 95
SA11.	When you were 12, where do the majority of householders go to the toilet?	Own toilet with septic tank ..... 01 Own toilet without septic tank ..... 02 Shared toilet ..... 03 Public toilet ..... 04 Other: 95
SA12.	NUMBER OF BOOKS WHEN 12 Please look at showcard XX Approximately how many books were there in the place you lived in when you were 12? Do not count magazines, newspapers, or your school books.	1. None or very few (0-10 books) 2. Enough to fill 1 shelf (11-25 books) 3. Enough to fill 1 bookcase (26-100 books) 4. Enough to fill 2 bookcases (101-200 books) 5. Enough to fill 2 or more bookcases (more than 200 books)
SA13	OCCUPATION OF MAIN BREADWINNER WHEN 12 Please look at showcard What best describes the employment status of the household's main breadwinner when you were 12? *Interviewer: The main breadwinner is the person providing the majority of income for the household.*	Unpaid family worker ..... 06 Self employed ..... 01 Self-employed with unpaid family worker/temporary worker ..... 02 Self-employed with permanent worker ..... 03 Government worker ..... 04 Private worker ..... 05 Casual worker in agriculture ..... 07 Casual worker not in agriculture 08

SECTION AK (HEALTH INSURANCE)

Now we would like to know about health insurance or benefits that you might have.

AK01. Are you the policy holder/primary beneficiary of health benefits, health insurance, such as **ASKES, ASTEK/Jamsostek, employer provided medical reimbursement, employer provided clinic, private health insurance, savings-related insurance, JAMKESMAS , JAMKESDA, JAMKESSOS, JAMPERSAL or ASURANSI MANDIRI?**	No ..... 3 ➔ **AK06** Yes 1

Benefit Type (AKTYPE)	**AK02.** Do your benefits include [...]?	**AK03.** When did this benefit begin?	**AK04.** Does this benefit cover outpatient visits to public and private health centers? **(CIRCLE ALL THAT APPLY)**	**AK05.** Who else in the household is covered under this benefit? **(CIRCLE ALL THAT APPLY)**
A. Health Insurance (*PT ASKES)*	3.No ↓ 8. DON'T KNOW ↓ 1. Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
B. Labor (Social) Insurance (*ASTEK Jamsostek*)	3.No ↓ 8. DON'T KNOW ↓ 1. Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
C. Employer provided health insurance/benefits	3.No ↓ 8. DON'T KNOW ↓ 1. Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
D. Employer Provided Clinic	3.No ↓ 8. DON'T KNOW ↓ 1. Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
E. Private Insurance	3.No ↓ 8. DON'T KNOW ↓ 1. Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
G. Savings-related insurance	3.No ↓ 8. DON'T KNOW ↓ 1. Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital D. Other, G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
H. JAMKESMAS	3.No ↓ 8. DON'T KNOW ↓ 1. Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
I. JAMKESDA	3.No ↓ 8. DON'T KNOW ↓ 1. Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings

SECTION AK (HEALTH INSURANCE)

Benefit Type (AKTYPE)	AK02. Do your benefits include [...]?	AK03. When did this benefit begin?	AK04. Does this benefit cover outpatient visits to public and private health centers? (CIRCLE ALL THAT APPLY)	AK05. Who else in the household is covered under this benefit? (CIRCLE ALL THAT APPLY)
J. JAMKESSOS	3.No ↓ 8. DON'T KNOW ↓ 1. Yes →	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
K. JAMPERSAL	3.No ↓ 8. DON'T KNOW ↓ 1. Yes →	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
L. JKN (Jaminan Kesehatan Nasional)	3.No ↓ 8. DON'T KNOW ↓ 1. Yes →	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings

AK06. Since 2007, have you lost any health insurance coverage, such as **ASKES, ASTEK/Jamsostek, employer provided medical reimbursement, employer provided clinic, private health insurance, savings-related insurance, JAMKESMAS , JAMKESDA, JAMKESSOS, JAMPERSAL atau JKN?**	No ..... 3 →**SECTION PS** Yes 1

TYPES OF INSURANCE/BENEFITS (AKTYPE)	AK07. What benefits did you lose?	AK08. When did the benefits end?
A. Health Insurance (*PT ASKES)*	3. No ↓ 8. DON'T KNOW ↓ 1. Yes →	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
B. Labor (Social) Insurance (*ASTEK Jamsostek*)	3. No ↓ 8. DON'T KNOW ↓ 1. Yes →	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
C. Employer provided health insurance/benefits	3. No ↓ 8. DON'T KNOW ↓ 1. Yes →	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
D. Employer Provided Clinic	3. No ↓ 8. DON'T KNOW ↓ 1. Yes →	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8

SECTION AK (HEALTH INSURANCE)

TYPES OF INSURANCE/BENEFITS (AKTYPE)	AK07. What benefits did you lose?	AK08. When did the benefits end?
E. Private Insurance	3. No ➔ 8. DON'T KNOW ➔ 1. Yes ➔	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
G. Savings-related insurance	3. No ➔ 8. DON'T KNOW ➔ 1. Yes ➔	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
H. JAMKESMAS	3. No ➔ 8. DON'T KNOW ➔ 1. Yes ➔	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
I. JAMKESDA	3. No ➔ 8. DON'T KNOW ➔ 1. Yes ➔	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
J. JAMKESSOS	3. No ➔ 8. DON'T KNOW ➔ 1. Yes ➔	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
K. JAMPERSAL	3. No ➔ 8. DON'T KNOW ➔ 1. Yes ➔	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
L. JKN (Jaminan Kesehatan Nasional)	3. No ➔ 8. DON'T KNOW ➔ 1. Yes ➔	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8

SECTION PS (SELF TREATMENT)

Now we'd like to know whether you have treated yourself during the past 4 weeks, namely since [...] date, 4 weeks ago.

TYPE OF SELF TREATMENT (PSTYPE)	PS01. During the past 4 weeks, have you ever [...]?	PS02. What is the approximate total cost to purchase or make that medicine during the last 4 weeks?
A. Consumed over-the-counter modern medicines (like bodrexin, inzana, paramex)	3. No ↓ 1. Yes →	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 8. DON'T KNOW
B. Consumed traditional herbs or traditional medicines as treatment	3. No ↓ 1. Yes →	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 8. DON'T KNOW
C. Used topical medicines (like eyedrops, cream, medical plaster, ointment and the like)	3. No ↓ 1. Yes →	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 8. DON'T KNOW
E. Vitamin/Supplements	3. No ↓ 1. Yes →	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 8. DON'T KNOW
F. Massage, *coining*	3. No ↓ SECTION RJ 1. Yes →	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 8. DON'T KNOW

SECTION RJ (OUTPATIENT CARE)

HHID ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ **PID** ⌊_⌊_⌋

RJ04a.	**CAPI CHECK COV3: AGE ≥ 50 YEARS?**	**NO** ..... **3 ➔RJ00a** **YES**..... **1**

Now we would like to ask you some question about your visit to the Posyandu for the Elderly

RJ04aa.	Have you ever received vaccination for:	
	a. Pneumonia	1. Yes 3. NO
	b.Chicken pox/shingles	1. Yes 3. NO
	c.Influenze	1. Yes 3. NO
RJ04b.	In the past4 weeks, did you visit a Posyandu for the elderly?	No..... 3 ➔**RJ00a** Yes 1
RJ04c.	What is the name and location of the Posyandu for the elderly? 1. Specify 3. Same as residence 8. DON'T KNOW	**Name** 1. _____8. DK _____ **Address** 1._____8. DK _____ _____ **Loc. Note** 1._____8. DK _____ _____ **Vill:** 1. _____ 3. Same as residence 8. DON'T KNOW **Kec:** 1. _____ 3. Same as residence 8. DON'T KNOW **Kab:** 1. _____ 3. Same as residence 8. DON'T KNOW **Prov:** 1. _____ 3. Same as residence 8. DON'T KNOW **CODE CF** ⌊_⌊_⌋ ⌊_⌋ ⌊_⌊_⌋

RJ04d.	What was the purpose of your visit to the Posyandu for the Elderly?	**CIRCLE ALL THAT APPLY**
	A. Health checks.....	A
	B. Food supplement	B
	C. Meeting with other elderly.....	C
	D. Activities with other elderly	D
	E. Counseling	E
	V. Other.....	V.....
RJ04e.	How many kilometers is it from the medical facility to your residence?	⌊_⌊_⌋ . ⌊_⌊_⌋ km ..... 1 DON'T KNOW 8

RJ04f.	What is the travel time (one-way) to that facility?	1. ⌊_⌊_⌋ 02. Minute 03. Hour 8. DON"T KNOW
RJ04g.	What was the total transportation cost to the facility (**INCLUDING FUEL COST, ONE WAY TRIP)?**	⌊_⌊_⌋ . ⌊_⌊_⌋ Rp. ..... 1 DON"T KNOW 8
RJ04h.	What was the total cost of treatment or consultation including medications that may have been administered, not including prescription cost?	⌊_⌊_⌋,⌊_⌊_⌋,⌊_⌊_⌋ Rp..... 1 DIDN"T PAY ANYTHING ..... 3 DON"T KNOW 8
RJ04i.	Was a Puskesmas staff present in the Posyandu Lansia?	No ..... 3 Yes..... 1

SECTION RJ (OUTPATIENT CARE)

The next questions pertain to medical facilities or medical providers you may have visited for outpatient care during the past 4 weeks, namely since [...] date, 4 weeks ago.

RJ00a.	Have you had a general check up performed in the last 5 years?	No ..... 3 ➔ **RJ00** Yes 1
RJ00b.	Where did you go to have this general check-up? **(CIRCLE ALL THAT APPLY)**	Public hospital ..... A Public health center ..... B Private hospital ..... C Polyclinic, private clinic, medical center ..... D Private physician, family doctor ..... E Nurse, paramedic, midwife ..... F Traditional practitioner ..... G DON'T KNOW ..... Y Other V
RJ00.	In the last 4 weeks have you visited a public hospital, puskesmas, private hospital, clinic, health worker or doctor's practice or been visited by a health worker or doctor?	No ..... 3 ➔ **RJ24a** Yes 1

MEDICAL FACILITY **(RJTYPE)**	**RJ01.** Within the last 4 weeks, have you been to [...] / visited by [...]?	**RJ02.** How many times did you visit / been visited by [...] during the last 4 weeks?	**RJ02b.** How much did you pay out of pocket for outpatient care at […] during the past 4 weeks?
A. Public hospital (General or Specialty)	3. No ⬇ 1. Yes ➔	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.
B. Public Health Center (puskesmas)/Auxiliary Center (puskesmas pembantu)	3. No ⬇ 1. Yes ➔	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.
E. Private Hospital	3. No ⬇ 1. Yes ➔	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.
F. Polyclinic, Private Clinic, Medical Center	3. No ⬇ 1. Yes ➔	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.
G. Private Physician (General Practitioner, Specialist, Dentist, Family Doctor)	3. No ⬇ 1. Yes ➔	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.
H. Nurse, Paramedic, Midwife practitioner	3. No ⬇ 1. Yes ➔	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.
I. Traditional practitioner (shaman, wiseman, kyai, Chinese herbalist, masseur, acupuncturist, etc.)	3. No ⬇ **RJ05a** 1. Yes ➔	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.

SECTION RJ (OUTPATIENT CARE)

HHID ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ **PID** ⌊_⌊_⌋

Now we want to ask you about the name and location of the last medical provider you may have visited in the last 4 weeks.

RJ05a.	What is the type of medical facility or type of provider?	⌊_⌋ _____
RJ06.	What is the name and location of the medical provider? 1. Specify 3. Same as residence 8. DON'T KNOW	**Name** 1. _____ 8. DK _____ **Address** 1. _____ 8. DK _____ **Loc. Note** 1. _____ 8. DK _____ **Vill:** 1._____ 3. Same as residence 8. DK 8. DON'T KNOW **Kec:** 1._____ 3. Same as residence 8.DK 8. DON'T KNOW **Kab:** 1._____ 3. Same as residence 8. DON'T KNOW **Prov:** 1._____ 3. Same as residence 8. DON'T KNOW **CODE CF** ⌊_⌊_⌋ ⌊_⌋ ⌊_⌊_⌋
RJ08.	What was the purpose of visit?	**CIRCLE ALL THAT APPLY**
	B. Immunization	B
	C. Consultation	C
	D. Medical heck up	D
	E. Medication	E
	F. Injection	F
	H. Treatment of injury	H
	I. Treatment of illness	I
	J. Massage	J
	K. Family planning consultation	K
	L. Prenatal check	L
	M. Physiotherapy	M
	V. Other	V_____
RJ09.	Was the visit to [...] the first visit or a follow-up visit for the symptom?	First ..... 1 Follow up 3

RJ10a.	**CAPI CHECK RJ05a: FACILY IS A, B, E, F?**	**YES .....1 →RJ11** **NO 3**
RJ10.	Did the provider visit you at home?	Yes .....1 →**RJ17** No 3

RJ11.	How many kilometers is it from the medical facility to your residence?	⌊_⌊_⌋ , ⌊_⌊_⌋ Km ..... 1 DON"T KNOW 8
RJ12.	What is the travel time (one-way) to that facility?	1. ⌊_⌊_⌋ 02. Minute 03. Hour 8. DON"T KNOW
RJ14.	What was the total transportation cost to the facility (**INCLUDING FUEL COST, ONE WAY TRIP)?**	⌊_⌊_⌋,⌊_⌊_⌋ Rp. ..... 1 DON"T KNOW 8
RJ15.	Upon arrival, how long did you have to wait to be examined?	1. ⌊_⌊_⌋ 02. Minute 03. Hour 8. DON"T KNOW
RJ17.	What kind of treatment did you receive?	**CIRCLE ALL THAT APPLY**
	A. Health examination/consultation	A
	B. Injection	B
	C. Laboratory examination	C
	D. Operation/surgery	D
	E. X-Ray	E
	F. Family Planning	F
	G. Medicine	G
	I. Massage	I
	J. Traditional/herbal medicine	J
	K. Pregnancy examination	K
	L. Physiotherapy	L
	V. Other	V_____
RJ17a.	What do you think about the services that were provided by this facility?	Satisfactory ..... 1 Somewhat satisfactory ..... 2 Unsatisfactory ..... 3 Very unsatisfactory 4
RJ20.	What was the total cost to fill a prescription that you received during this visit?	⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. ..... 1 Didn't get prescription ..... 3 Didn't fill prescription ..... 5 DON'T KNOW 8

SECTION RJ (OUTPATIENT CARE)

RJ21.	What was the total cost of treatment, including medications that may have been administered, not including prescription cost? (out of pocket cost)	⌊⌊⌋,⌊⌊⌋⌊⌊⌋,⌊⌊⌋⌊⌊⌋ Rp. ..... 1 Didn't pay ..... 3 DON'T KNOW 8
RJ21a.	Did you use insurance to pay for all or some of this visit?	No ..... 3 ➔**RJ22** Yes 1
RJ21b.	What insurance did you use?	*Askes* ..... 01 *Jamsostek* ..... 02 Employer provided health benefits ..... 03 Private health insurance ..... 04 Savings related insurance ..... 05 *SKTM* ..... 06 Jamkesmas ..... 07 Jamkesda ..... 08 JKN ..... 09 Jampersal ..... 10 Other, mention 95
RJ21c.	How much is the total cost of treatment , including those that will be paid or have already been paid by insurance??	⌊⌊⌋.⌊⌊⌋⌊⌊⌋.⌊⌊⌋⌊⌊⌋ Rp ..... 1 DON'T KNOW 8
RJ21d.	Do you expect to get reimbursement from insurance?	3. No ➔**RJ22** 1. Yes
RJ21e.	How much do you expect to be reimbursed?	⌊⌊⌋,⌊⌊⌋⌊⌊⌋,⌊⌊⌋⌊⌊⌋ Rp. ..... 1 DON'T KNOW 8
RJ22.	Was any payment in kind made?	No ..... 3 ➔**RJ24a** Yes 1
RJ23.	What was the approximate value of the goods?	⌊⌊⌋,⌊⌊⌋⌊⌊⌋,⌊⌊⌋⌊⌊⌋ Rp. ..... 1 DON'T KNOW 8

Now we would like to ask you about some health examinations you may have received.

	RJ24TYPE	**RJ24a** When did you last have your […] checked?	**RJ24A** How regularly have your […] checked?
A	Blood pressure	⌊⌊⌋ / ⌊⌊⌋⌊⌊⌋⌊⌊⌋ . 1 Month / Year Never had ..... 3🡻 DON'T KNOW 8	1. Regularly 3. Irregularly
B	Cholesterol level	⌊⌊⌋ / ⌊⌊⌋⌊⌊⌋⌊⌊⌋ . 1 Month / Year Never had ..... 3🡻 DON'T KNOW 8	1. Regularly 3. Irregularly
C	Blood sugar	⌊⌊⌋ / ⌊⌊⌋⌊⌊⌋⌊⌊⌋ . 1 Month / Year Never had ..... 3🡻 DON'T KNOW 8	1. Regularly 3. Irregularly
D	**EKG (ElectroCardioGram)?**	⌊⌊⌋ / ⌊⌊⌋⌊⌊⌋⌊⌊⌋ . 1 Month / Year Never had ..... 3🡻 DON'T KNOW 8	1. Regularly 3. Irregularly
E	**Eye**	⌊⌊⌋ / ⌊⌊⌋⌊⌊⌋⌊⌊⌋ . 1 Month / Year Never had ..... 3🡻 DON'T KNOW 8	1. Regularly 3. Irregularly
F	**Dentis**	⌊⌊⌋ / ⌊⌊⌋⌊⌊⌋⌊⌊⌋ . 1 Month / Year Never had ..... 3🡻 DON'T KNOW 8	1. Regularly 3. Irregularly

RJ24AA.	**CAPI CHEK COV5: SEX OF RESPONDENT?**	**MALE .....1 ➔LINE G** **FEMALE .....3 ➔ RJ26**

	RJ24TYPE	**RJ24** When did you last have your […] checked?	**RJ24A** How regularly have your […] checked?
G	**Prostate**	⌊⌊⌋ / ⌊⌊⌋⌊⌊⌋⌊⌊⌋ . 1 Month / Year Never ..... 3➔ **SECTION FM** DON'T KNOW 8	1. Regularly 3. Irregularly ➔ **SECTION FM**

SECTION RJ (OUTPATIENT CARE)

RJ26.	Have you heard about papsmears?	No ..... 3➔**RJ29** Yes 1
RJ27.	When did you last have papsmear?	Never..... 3➔**RJ29** └─┴─┘ / └─┴─┴─┴─┘ ..... 1 Month / Year DON'T KNOW 8
RJ28.	Who did the procedure the last time you had it performed?	Public hospital ..... 01 Public health center..... 02 Private hospital..... 03 Polyclinic, private clinic, medical center .. 04 Private physician ..... 05 Nurse, paramedic, midwife..... 06 Traditional practitioner..... 07 Private lab ..... 09 DON'T KNOW ..... 08 Other 95
RJ29.	How many times did you perform self-examination of your breast in the last 12 months?	1. └─┴─┘ Times 3. None 8. DON'T KNOW
RJ29a.	Have you heard about mammograms?	No..... 3➔ **SECTION FM** Yes..... 1
RJ29b.	How many times did you have a mammogram exam in the last 12 months?	1. └─┴─┘ Times 3. None 8. DON'T KNOW

SECTION FM (FOOD FREQUENCY)

Now we would like to ask you about your eating frequency

FM01. Do you normally eat […]?	01. 3 times per day 02. 2 times per day 03. 1 times per day	04. 5-6 times per week 05. 3-4 times per week 06. 2 times per week	95. Other.....

Now we would like to ask you about the type of food you usually eat.

FOOD TYPE (FMTYPE)	FM02. In the last week, did you eat any [….]?		FM03. How many days in a week did you eat […] in the last week?
A. Sweet potatoes	3. No ↓	1. Yes →	1 2 3 4 5 6 7
B. Eggs	3. No ↓	1. Yes →	1 2 3 4 5 6 7
C. Fish	3. No ↓	1. Yes →	1 2 3 4 5 6 7
D. Meat (beef, chicken, pork, etc.)	3. No ↓	1. Yes →	1 2 3 4 5 6 7
E. Dairy	3. No ↓	1. Yes →	1 2 3 4 5 6 7
F. Green leafy vegetables	3. No ↓	1. Yes →	1 2 3 4 5 6 7
G. Banana	3. No ↓	1. Yes →	1 2 3 4 5 6 7
H. Papaya	3. No ↓	1. Yes →	1 2 3 4 5 6 7
I. Carrot	3. No ↓	1. Yes →	1 2 3 4 5 6 7
J. Mango	3. No ↓	1. Yes →	1 2 3 4 5 6 7
K. Instant noodle	3. No ↓	1. Yes →	1 2 3 4 5 6 7
L. Fast food	3. No ↓	1. Yes →	1 2 3 4 5 6 7
M. Soft drink (Coca cola, sprite , dll)	3. No ↓	1. Yes →	1 2 3 4 5 6 7
N. Sambal	3. No ↓	1. Yes →	1 2 3 4 5 6 7
O. Fried snacks (tempe, tahu, bakwan dll)	3. No ↓	1. Yes →	1 2 3 4 5 6 7
P. Rice	3. No ↓	1. Yes →	1 2 3 4 5 6 7
Q. Sweet snacks (*wajik*, *geplak*, donuts, wafers, chocolate, dll)	3. No ↓	1. Yes →	1 2 3 4 5 6 7

SECTION RN (INPATIENT CARE)

The following questions pertain to hospitalization (inpatient care) that you have had during the past 12 months, namely since the month of [...] 12 months ago.

RN00.	During the past 12 months have you ever received patient care at a hospital, puskesmas, clinic, or other?	No .....3 ➔**SEKSI PM** Yes 1

TEMPAT DIRAWAT INAP (RNTYPE)	**RN01.** During the past 12 months, have you ever received inpatient care at […] ?	**RN02.** How many times have you received inpatient care at […] during the past 12 months?	**RN02b.** How much did you pay out of pocket for inpatient care at […] during the past 12 months?
A. Public Hospital (General or Specialty)	3. No ➔ ⬇ 1. Yes	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
B. Public Health Center (puskesmas)	3. No ➔ ⬇ 1. Yes	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
C. Private Hospital	3. No ➔ ⬇ 1. Yes	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
D. Private Clinic	3. No ➔ ⬇ 1. Yes	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
V. Other	3. No ➔ ⬇ **RN05a** 1. Yes	⌊_⌋⌊_⌋ Times	⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.

SECTION RN (INPATIENT CARE)

IDRT ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ **NO. ART** ⌊_⌊_⌋

Now, we would like to ask you a few questions about the last visit for inpatient care (hospital admissions) that you have made in the past 12 months, namely in the 12 months prior to month [...]?

RN05a.	What is the type of health or service facility?	⌊_⌋ _____
RN06.	What is the name and location of facility? 1. Specify 3. Same as current residence 8. Don't Know	**Name** 1._____ 8. DK _____ **Address** 1. _____ 8. DK _____ _____ **Location**1. _____ 8. DK _____ _____ **Vill:** 1. _____ 3. Same as current residence 8. DON'T KNOW **Kec:** 1. _____ 3. Same as current residence 8. DON'T KNOW **Kab:** 1. _____ 3. Same as current residence 8. DON'T KNOW **Prov:** 1. _____ 3. Same as current residence 8. DON'T KNOW **CODE CF** ⌊_⌊_⌋ ⌊_⌋ ⌊_⌊_⌋
RN08.	How many nights were you hospitalized there?	⌊_⌊_⌋ Nights
RN10.	For what reason were you hospitalized?	Sickness ..... 01 Accident..... 02 Giving birth..... 03 Operation ..... 05 Other..... 95
RN15.	During hospitalization, what kind of treatment did you receive? **CIRCLE ALL THAT APPLY**	Physical exam/consult ..... A Injection ..... B Laboratory test..... C Surgery ..... D X-ray ..... E Birth control..... F Medications..... G IV (Drip Infusion)..... I Physiotherapy ..... J Other..... V

RN15a.	What do you think about the services that were provided by this facility ?	1. satisfactory 2. somewhat satisfactory 3. not satisfactory 4. far from satisfactory
RN18.	What was the total cost to fill a prescription that you received during this visit?	1. ⌊_⌊_⌋,⌊_⌊_⌋,⌊_⌊_⌋ Rp. 3. Didn't receive 5. Didn't fill 8. DON'T KNOW
RN19.	Upon discharge from the hospital, what was the total cost of hospitalization? (Including medications administered but not including self-bought medications and blood supply)? (out of pocket cosst)	1. ⌊_⌊_⌋,⌊_⌊_⌋,⌊_⌊_⌋ Rp. 8. DON'T KNOW
RN19a.	Did you use insurance to pay for all or some of this visit?	No .....3➔ **SECTION PM** Yes.....1
RN19b.	What insurance did you use?	*Askes* .....01 *Jamsostek*.....02 Employer provided health benefits.....03 Private health insurance .....04 Savings related insurance.....05 *SKTM*.....06 Jamkesmas .....07 Jamkesda .....08 JKN .....09 Jampersal .....10 Other..... 95
RN19c.	How much is the total cost of hospitalization , including those that will be paid or have already been paid by insurance??	⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.....1 DON'T KNOW.....8
RN19d.	Do you expect to get reimbursement from insurance?	3. No ➔**SECTION PM** 1. Yes
RN19e.	How much do you expect to be reimbursed?	⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. .....1 DON'T KNOW.....8

SECTION PM (COMMUNITY PARTICIPATION)

Now we will ask you about the arisan you participated in in the last 12 months.

PM01.	Have you participated in arisan in the last 12 months?	No ..... 3 ➔**PM15** Yes 1
PM01a.	How many arisan have you participated in the last 12 months?	⌊_⌊_⌋ Types

Now, we would like to know four main types of the arisan you participated in the last 12 months.

PM1TYPE	**PM03.**	**PM04.**	**PM05.**	**PM05a.**	**PM05b.**	**PM05c.**	**PM05d.**
ARISAN TYPE	What is the interval between meetings of the [...] arisan ?	How much money do you pay into the […] arisan each time it meets?	How long is the period between until the last person receive the pot of money?	How many people normally participate in this arisan?	How many number of pots are drawn in each meeting?	When was the last time you receive the pot of money from this arisan?	The last time you receive the pot of money from the […] arisan, what is the amount?
1. ⌊_⌊_⌋ _____	Every : ⌊_⌊_⌋ 03. Days 04. Weeks 05. Months 06. Years	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 8. DON'T KNOW	⌊_⌊_⌋ 04. Weeks 05. Month 06. Years	⌊_⌊_⌊_⌋ People	⌊_⌊_⌋	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 6. Have not received ↓	1. ⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. 8. DON'T KNOW

KODE PM01b:

01.	Office	06.	PKK	13.	Retirees
02.	RT (sub-neighborhood)	07.	Market	14.	Farmers group
03.	RW (neighborhood)	08.	Family	15.	Youth group
04.	Village	09.	Religiious group	16.	Motorcycle arisan
05.	Dharma Wanita/Dharma Pertiwi (Wives of civil servant/military)	12.	Friend	95.	Other

SECTION PM (COMMUNITY PARTICIPATION)

Now, I would like to ask you about some community or government activities and programs that may have taken place in this village during the past 12 months.

PROGRAM ATAU KEGIATAN MASYARAKAT (PM3TYPE)	PM15. Do you know whether, in the last 12 months, the […] activity has occurred in this village?	PM16. During the last 12 months did you participate in or use […]?
A. Community Meeting (each level: 10 HH level, RT, RW, Village, Kecamatan, and including Village Advisory Board activities (LMD, LKMD))	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
B. Cooperatives (include all types and levels of cooperatives: 10 HH level, RT, RW, Village, Kecematan.)	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
C. Voluntary Labor (for example cleaning up the village)	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
D. Program to Improve the Village/Neighborhood (KIP, MHT, con-block, street improvement, public facility)	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
N. Youth Groups Activity (Karang Taruna)	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
O. Religious Activities (Prayer groups, etc.)	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
P. Village library	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
Q. Village Savings and Loans	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
R. Health Fund (Dana Sehat)	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
R1. PNPM	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA
R2. Political Party	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods W.NA

PM20. CAPI CHECK BOOK COVER: SEX OF RESPONDENT ?	**MALE ---------- 1 → PM15 LINE E , F1 , H, J1** **FEMALE ---------- 3 → PM15 LINE I , J, J1**

SECTION PM (COMMUNITY PARTICIPATION)

	PROGRAM ATAU KEGIATAN MASYARAKAT (PM3TYPE)	PM15. Do you know whether, in the last 12 months, the […] activity has occurred in this village?	PM16. During the last 12 months did you participate in or use […]?
E.	**Neighbourhood Security Organization (Siskamling)**	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods
F1.	**Water for Drinking System/Supply** (for example a public pump and for bathing/washing (MCK))	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods
H.	**System for garbage disposal**	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods
I.	**Women's Association Activities (PKK)**	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods
J.	**Community Weighing Post (Posyandu)**	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	3. No ↓ 1.Yes → A. Labour /Time B. Money C. Goods
J1.	**Community Weighing Post Lansia (Posyandu Lansia)**	3. No ↓**PM24** 8. DON'T KNOW ↓**PM24** 1.Yes →	3. No 1.Yes → A. Labour /Time B. Money C. Goods → **PM24**

SECTION PM (COMMUNITY PARTICIPATION)

Now we would like to know about your parcipation in elections.

PM24. Did you vote in the most recent [.....]	**1. Yes**	**3. No**	**6. NA**	**8. DK**
a. President	1	3	6	8
b. Anggota DPD	1	3	6	8
c. DPR Pusat (Legislature- Central)	1	3	6	8
d. Anggota DPRD (Legislature- Provincial)	1	3	6	8
e. Anggota DPRD Kabupaten/Kota (Legislature- Regional)	1	3	6	8
f. Governor	1	3	6	8
g. Bupati/Walikota (Head of District)	1	3	6	8
h. Village head	1	3	6	8

PM26. What factors do you consider in electing a Bupati /Mayor?		
a. Appearance	1. Yes	3. No
b. Popularity	1. Yes	3. No
c. Quality of the program	1. Yes	3. No
d. Political affiliation	1. Yes	3. No
e. Faith/relegion	1. Yes	3. No
f. Ethnicity	1. Yes	3. No
g. Experience in governance	1. Yes	3. No
h. Gender	1. Yes	3. No
i. Gifts (“transport money”)	1. Yes	3. No
J. Age	1. Yes	3. No

SECTION BA (NON-CORESIDENT PARENTS)

Now we want to ask about your biological parents.

BA PARENTS FILL-OUT COLUMN FROM TOP TO BOTTOM

		Father	Mother
BA04.	Does your father/mother still live in this household?	No ..... 3➔**BA05** Yes 1	No ..... 3➔**BA05** Yes 1
BA04a.	**INTERVIEWER CHECK: AR00**	**1. ⌊_⌊_⌋ AR00 ➔ BA04 MOTHER'S COLUMN** **3. NOT IN HOUSEHOLD**	**1. ⌊_⌊_⌋ AR00 ➔ BA10** **3. NOT IN HOUSEHOLD**
BA05.	Is your father/mother still alive?	Yes ..... 1➔ **BA06b** No ..... 3 DON'T KNOW 8	Yes ..... 1➔ **BA06b** No ..... 3 DON'T KNOW 8
BA06a.	12 months ago was your father/mother still alive?	Yes ..... 1 No ..... 3 ➔ **BA06c** DON'T KNOW 8	Yes ..... 1 No ..... 3 ➔ **BA06c** DON'T KNOW 8
BA06aa.	Was your father/mother living in this household when he/she died?	Yes ..... 1 ➔ **BA06c** No ..... 3 DON'T KNOW 8	Yes ..... 1 ➔ **BA06c** No ..... 3 DON'T KNOW 8
BA06b.	How often have you seen your father/mother in the last 12 months?	Everyday ..... 5➔ **BA06c** At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1	Everyday ..... 5➔ **BA06c** At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1
BA06bb.	How often were you in telephone contact with your father/mother in the last 12 months?	Everyday ..... 5➔ **BA06c** At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1	Everyday ..... 5➔ **BA06c** At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1
BA06bc.	How often were you in contact through email or text messages with your father/mother in the last 12 months?	Everyday ..... 5 At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1	Everyday ..... 5 At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1
BA06c.	**CAPI CHECK BA05:** **FATHER/MOTHER ALIVE?**	**Yes ..... 1➔BA07** **DON'T KNOW ..... 8➔BA07** **No ..... 3➔BA06e**	**Yes ..... 1➔BA07** **DON'T KNOW ..... 8➔BA07** **No ..... 3➔BA06e**

SECTION BA (NON-CORESIDENT PARENTS)

FILL-OUT COLUMN FROM TOP TO BOTTOM

		Father	Mother
BA06e.	Did your father/mother died of a […]	Heart attack ..... A Heart problems ..... B Stroke ..... C Diabetes ..... D Cancer ..... E TBC ..... F Asthma ..... G Other respiratory illness .. H Dengue ..... I Malaria ..... J Childbirth ..... K Kidney ..... L Other illness ..... M Accidents ..... N Violence ..... O Suicide ..... P DON'T KNOW ..... Y	Heart attack ..... A Heart problems ..... B Stroke ..... C Diabetes ..... D Cancer ..... E TBC ..... F Asthma ..... G Other respiratory illness ... H Dengue ..... I Malaria ..... J Childbirth ..... K Kidney ..... L Other illness ..... M Accidents ..... N Violence ..... O Suicide ..... P DON'T KNOW ..... Y
BA06d.	When did your father/mother die?	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month / Year DON'T KNOW 8	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month / Year DON'T KNOW 8
BA07.	How old is your father/mother now/at time of death?	⌊_⌋⌊_⌋⌊_⌋ year ..... 1 DON'T KNOW 8	⌊_⌋⌊_⌋⌊_⌋ year ..... 1 DON'T KNOW 8
BA07a.	Did your [...] ever attend school?	No ..... 3 ➔ **BA11** DON'T KNOW ..... 8 ➔ **BA11** Yes 1	No ..... 3 ➔ **BA11** DON'T KNOW ..... 8 ➔ **BA11** Yes 1
BA08.	What is the highest level of education of your father/mother?	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____
BA09.	What is the highest class that your father/mother finished?	00 01 02 03 04 05 06 07 98	00 01 02 03 04 05 06 07 98
BA11.	What is/was your father's/mother's primary activity now/before his/her death?	Job searching ..... 02 ➔ **BA14a** Attending school ..... 03 ➔ **BA14a** Housekeeping ..... 04 ➔ **BA14a** Retired ..... 05 ➔ **BA14a** Stay at home/unemployed ..... 06 ➔ **BA14a** Sick/disabled ..... 07 ➔ **BA14a** DON'T KNOW ..... 98 ➔ **BA14a** Other ..... 95 ➔ **BA14a** Working/trying to get work/helping to earn income 01	Job searching ..... 02 ➔ **BA14a** Attending school ..... 03 ➔ **BA14a** Housekeeping ..... 04 ➔ **BA14a** Retired ..... 05 ➔ **BA14a** Stay at home/unemployed ..... 06 ➔ **BA14a** Sick/disabled ..... 07 ➔ **BA14a** DON'T KNOW ..... 98 ➔ **BA14a** Other ..... 95 ➔ **BA14a** Working/trying to get work/helping to earn income .. 01
BA12.	What was your father's/mother's status of worl before his/her death?	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋
BA13a.	What were […] primary duties (now/one year before he died)?	_____ _____ ➔ **BA14a**	_____ _____ ➔ **BA14a**

CODE FOR BA08:

02.	Elementary school	62.	University S2 (Master)	17.	School for the disabled
03.	Junior High General (SLP/SLTP)	63.	University S3 (Doctorate)	72.	Madrasah Ibtidaiyah
04.	Junior High Vocational (SLP/SLTP)	11.	Adult Education C	73.	Madrasah Tsanawiyah
05.	Senior High General (SMA/SLA/SLTA)	12.	Adult Education B	74.	Madrasah Aliyah
06.	Senior High Vocational (SMA/SLA/SLTA)	13.	Open University	98.	DON'T KNOW
60.	College D1, D2, D3	14.	Pesantren	95.	Other.....
61.	University S1 (Bachelor)	15.	Adult Education C		

CODE FORBA09:

00.	Did not/have not completed 1st grade		
01.	1		
02.	2	06.	6
03.	3	07.	Graduated
04.	4	98.	DON'T KNOW
05.	5		

CODE FOR BA12:

01. Self employed.	04. Government worker
02. Self-employed with unpaid family worker/temporary worker.	05. Private worker
	06. Unpaid family worker
03. Self-employed with permanent worker.	07. Casual worker in agriculture
	08. Casual worker not in agriculture
	98. DON'T KNOW

SECTION BA (NON-CORESIDENT PARENTS)

		Father	Mother
BA14a.	How is the health status of your father/mother now/before his/her death?	Very healthy ..... 1 Somewhat healthy ..... 2 Somewhat unhealthy ..... 3 Very unhealthy ..... 4 DON'T KNOW 8	Very healthy ..... 1 Somewhat healthy ..... 2 Somewhat unhealthy ..... 3 Very unhealthy ..... 4 DON'T KNOW 8
BA14b.	Now/before death does/did your father/mother need help with basic personal needs like dressing, eating, or bathing?	Yes ..... 1 No ..... 3 UNWILLING TO ANSWER ..... 7 DON'T KNOW ..... 8 **→BA04 MOTHER COLUMN**	Yes ..... 1 No ..... 3 UNWILLING TO ANSWER ..... 7 DON'T KNOW ..... 8 **→BA10**

BA10.	**PEWAWANCARA PERIKSA BA04, BA05, BA06a, BA06aa:**	**FATHER**	**MOTHER**
	a. BA04 AND BA05: IS FATHER/MOTHER STILL ALIVE?	**1. YES 3. NO**	**1. YES 3. NO**
	b. BA04, BA06a, AND BA06aa: DOES FATHER/MOTHER LIVE IN THE HH NOW (BA04=1) OR BEFORE HE/SHE DIED IN THE LAST 12 MONTHS(BA06a=1 AND BA06aa=1)?	**1. YES 3. NO**	**1. YES 3. NO**
	c. BA06a: DID FATHER/MOTHER DIE LESS THAN 12 MONTH AGO?	**1. YES 3. NO**	**1. YES 3. NO**
	d. TOTAL (ADD CODE '1' CIRCLED)	**TOTAL [ ]**	**TOTAL [ ]**

BA10a.	**CAPI CHECK BA10:**	**TOTAL IN BA10.d FOR MOTHER**		
		0	**1**	**2**
	TOTAL BA10.d FOR FATHER 0	**00 → BA28**	**01 →BA19-22 MOTHER ONLY**	**02 → BA28**
	1	**10 → BA19-22 FATHER ONLY**	**11 → BA18**	**12 →BA19-22 FATHER ONLY**
	2	**20 → BA28**	**21 → BA19-22 MOTHER ONLY**	**22→ BA28**

BA18.	Do your parents still live together?/Did your parents still live together at the time of death?	Yes ..... 1 **→ ASK BA19-BA22 ABOUT FATHER AND MOTHER TOGETHER AND RECORD ANSWERS IN "FATHER AND MOTHER LIVE TOGETHER" COLUMN (1ST COLUMN)** No ..... 3 **→ ASK BA19-BA22 ABOUT FATHER FIRST (2ND COLUMN), THEN REPEAT QUESTIONS BA19-BA22 ABOUT MOTHER (3RD COLUMN)**

SECTION BA (NON-CORESIDENT PARENTS)

FILL-OUT COLUMN FROM TOP TO BOTTOM

		Father and Mother Live Together	Father Only	Mother Only
BA19.	During the past 12 months (before his/her death) did you (or your spouse) ever provide help to [...] in the form of money, goods or service?	UNWILLING TO ANSWER .... 7➔ **BA21** No ..... 3➔ **BA21** Yes 1	UNWILLING TO ANSWER ..... 7➔ **BA21** No ..... 3➔ **BA21** Yes 1	UNWILLING TO ANSWER ..... 7➔ **BA21** No ..... 3➔ **BA21** Yes 1
BA20.	What type of help did you provide to [...] in the past 12 months (before his/her death) and how much? **(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**
	A. Money, loan, tuition, health care costs (including treatment).....	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	D. Value of food stuff or other goods.....	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	G. Doing household chores, or providing child care or assisting during physical recovery.....	G. ⌊⌊⌋ 03. Days 05. Months	G. ⌊⌊⌋ 03. Days 05. Months	G. ⌊⌊⌋ 03. Days 05. Months
	H. Helping family business	H. ⌊⌊⌋ 03. Days 05. Months	H. ⌊⌊⌋ 03. Days 05. Months	H. ⌊⌊⌋ 03. Days 05. Months
	V. Other.....	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
BA21.	During the past 12 months (before his/her death) did you (or your spouse) ever receive help from [...] in the form of money, goods or service?	UNWILLING TO ANSWER ... 7➔ **BA14c** No ..... 3➔ **BA14c** Yes 1	UNWILLING TO ANSWER ... 7➔ **BA27** No ..... 3➔ **BA27** Yes 1	UNWILLING TO ANSWER .. 7➔ **BA14c** No ..... 3➔ **BA14c** Yes 1
BA22.	What type of help did you receive from [...] in the past 12 months (before his/her death) and how much?	**(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**
	A. Money, loan, tuition, health care costs (including treatment).....	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	D. Value of food stuff or other goods.....	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	G. Doing household chores, or providing child care or assisting during physical recovery.....	G. ⌊⌊⌋ 03. Days 05. Months	G. ⌊⌊⌋ 03. Days 05. Months	G. ⌊⌊⌋ 03. Days 05. Months
	H. Helping family business	H. ⌊⌊⌋ 03. Days 05. Months	H. ⌊⌊⌋ 03. Days 05. Months	H. ⌊⌊⌋ 03. Days 05. Months
	V. Other.....	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp. ➔**BA14c FATHER COLUMN**	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp. ➔**BA14c FATHER COLUMN**
BA27.	**INTERVIEWER CHECK:**		**RETURN TO BA10a TO CHECK WHETHER QUESTIONS REGARDING MOTHER SHOULD BE ANSWERED**	

SECTION BA (NON-CORESIDENT PARENTS)

FILL-OUT COLUMN FROM TOP TO BOTTOM

		Father	Mother
BA14c.	Where does […] live now/before his death?	In this household ..... 00 In the same village ..... 01 In the same subdistrict ..... 02 In the same district ..... 03 In the same province ..... 04 DON'T KNOW ..... 08 In another province, ... 05 In another country 06	In this household ..... 00 In the same village ..... 01 In the same subdistrict ..... 02 In the same district ..... 03 In the same province ..... 04 DON'T KNOW ..... 08 In another province ..... 05 In another country 06
BA15.	With whom does/did [...] live now/before his/her death? **(CIRCLE ALL THAT APPLY)** **ANSWER OF "BY HIM/HERSELF" CANNOT BE COMBINED WITH OTHER ANSWERS**	By him/herself ..... A Wife/husband ..... B Daughter ..... C Son ..... D Daughter-in-law/son-in-law ..... E Sister ..... F Brother ..... G Brother/sister-in-law ..... I Grandchild ..... J Grandparent ..... K Aunt/uncle ..... L Niece/nephew ..... M Cousin ..... N Non-relative ..... O Parents ..... R Parents in law ..... S Step/foster/adopted kid ..... T Other V	By him/herself ..... A Wife/husband ..... B Daughter ..... C Son ..... D Daughter-in-law/son-in-law ..... E Sister ..... F Brother ..... G Brother/sister-in-law ..... I Grandchild ..... J Grandparent ..... K Aunt/uncle ..... L Niece/nephew ..... M Cousin ..... N Non-relative ..... O Parents ..... R Parents in law ..... S Step/foster/adopted kid ..... T Other V
BA15a.	**CAPI CHECK BA15. IF C OR D IS CIRCLED ASK:** What is the name of the son/daughter that [...] lives with now/before his/her death? **IF C OR D IS NOT CIRCLED, WRITE W**	_____ **→ BA14c MOTHER COLUMN**	_____ **→ BA28**

SECTION BA (NON-CORESIDENT SIBLINGS)

BA28.	Do you have biological or non-biological siblings who do not live in this household (including those who have died during the past 12 months, but were non-householders at the time of their deaths)?	No ..... 3➔**BA58x** Yes 1
BA29.	a. How many siblings do not live in the house are still alive? b. How many siblings died during the past 12 months and were non-householders at the time of their deaths?	..... ⌊_⌋⌊_⌋ ..... ⌊_⌋⌊_⌋
BA29x.	**INTERVIEWER CHECK:**	**IF BA29.a and BA29.b = 0 ..... 3➔BA58x** **IF BA29.a and BA29.b > 0 ..... 1**
BA54.	During the past 12 months, did you (or your spouse) ever **provide** help to siblings who do not live in the HH (including those who died within the last 12 months) in the form of money, goods or service?	UNWILLING TO ANSWER ..... 7➔**BA56** No ..... 3➔**BA56** Yes 1
BA55.	What type of help did you (or your spouse) provide to the siblings during the past 12 months and how much? **(ANSWER MAY BE MORE THAN ONE)** A. Money, loan, tuition, health care costs (including treatment)..... D. Value of food stuff or other goods..... G. Doing household chores, or providing child care or assisting during physical recovery H. Helping family business ..... V. Other.....	**(ANSWER MAY BE MORE THAN ONE)** A. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. D. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. G. ⌊_⌋⌊_⌋ 03. Days 05. Months H. ⌊_⌋⌊_⌋ 03. Days 05. Months V. ..... ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
BA56.	During the past 12 months/12 months before death, did you (or your spouse) ever receive help from siblings who do not live in the HH (including those who died in the last 12 months) in the form of money, goods or service?	UNWILLING TO ANSWER ..... 7➔**BA58x** No ..... 3➔**BA58x** Yes 1
BA57.	What type of help did you (or your spouse) receive from the siblings during the past 12 months and how much? **(ANSWER MAY BE MORE THAN ONE)** A. Money, loan, tuition, health care costs (including treatment)..... D. Value of food stuff or other goods..... G. Doing household chores, or providing child care or assisting during physical recovery H. Helping family business ..... V. Other.....	**(ANSWER MAY BE MORE THAN ONE)** A. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. D. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. G. ⌊_⌋⌊_⌋ 03. Days 05. Months H. ⌊_⌋⌊_⌋ 03. Days 05. Months V. ..... ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.

SECTION BA (NON-CORESIDENT SIBLINGS)

BA58x. CAPI CHECK (select one)	
PANEL RESPONDENT (AR01g=1)	**NEW RESPONDENT (AR01g=3)**
1 ⬇ **BA58a**	**1** ⬇ **BA58b**

PANEL RESPONDENT

BA58a. CAPI CHECK PREPRINTED CHILD ROSTERS

PREPRINTED CHILD ROSTER EXISTS, BOOK IV INDICATED (AR01h = 1) ..... 5➔SECTION TF

PREPRINTED CHILD ROSTER EXISTS, BOOK III INDICATED ..... 3➔BA00b (PREPRINTED CHILD ROSTER)

PREPRINTED CHILD ROSTER DOES NOT EXIST ..... 1➔BA58b

BA58b.	**CAPI CHECK COV3 AND COV5:**	**FEMALE AND DOES NOT ANSWER BOOK IV ..... 3 ➔BA61** **FEMALE AND ANSWER BOOK IV ..... 2 ➔SECTION TF** **MALE 1**
BA59.	Does your wife live in the household?	Not Yet Married ..... 5➔**BA62a** No ..... 3➔**BA61** Yes 1
BA60a.	Do you married only once ?	**Yes, MARRIED ONLY ONCE ..... 1 ➔BA62a** **No , MARRIED MORE THAN ONCE ..... 3 ➔BA62**
BA61.	Do you have children 7 years old or older who live outside the household, or who have died during the past 12 months but were non-householders at the time of their death?	Not Yet Married ..... 5➔**BA62a** Yes ..... 1➔**BA00b (BA FORM FOR NEW CHILD)** No 3
BA62.	Do you have children 7 years old or older who live outside the household, from other marriages than this current one, who are still alive or have died during the past 12 months?	No ..... 3 Yes 1
BA62a.	Do you have adopted/step children 7 years old or older who live outside the household, who are still alive or have died during the past 12 months?	No ..... 3➔**SECTION TF** Yes ..... 1➔**BA00b (BA FORM FOR NEW CHILD)**

CHILD ROSTER

BA00b. CAPI CHECK (choose one)	
THERE IS A PREPRINTED CHILD ROSTER BOOK.....1 ↓ INSERT PREPRINTED CHILD ROSTER BOOK III	THERE IS NO PREPRINTED CHILD ROSTER BOOK III / NEW RESPONDENT ..... 3 ↓ USE FORM BA FOR NEW CHILD

SECTION BA (NON-CORESIDENT SIBLINGS)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b)

	BA63a.	BA63b.	BA78.	BA79.	BA80.	BA81.	BA82a.	BA83a.	BA84.	BA84a.	BA84b.
		(NAME)	When […] twelve years old, you and your husband married?	When […] was 12 years old, with whom she/he lived?	What is/was […]'s primary activity now/before his/her death?	What is/was […]'s work status now/before his/her death?	What is/was […]'s type of work now/before his/her death?	CAPI CHECK BA65 AND BA65a: […] STILL ALIVE?	How often do/did you meet with […] during the past year now/before his/her death?	How often do/did you have contact with […] by telephone during the past year now/before his/her death?	How often do/did you have contact with […] by mail, sms, email/chatting during the past year now/before his/her death?
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔BA83a 01 95	⌊_⌋⌊_⌋	_____ _____	1 ➔ 3 ➔ 5 8 ➔ BA63b ROW 2 / BA90x/TF	5➔BA87a 1 2 3 4	5➔BA87a 1 2 3 4	1 2 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔BA83a 01 95	⌊_⌋⌊_⌋	_____ _____	1 ➔ 3 ➔ 5 8 ➔ BA63b ROW 3 / BA90x/TF	5➔BA87a 1 2 3 4	5➔BA87a 1 2 3 4	1 2 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔BA83a 01 95	⌊_⌋⌊_⌋	_____ _____	1 ➔ 3 ➔ 5 8 ➔ BA63b ROW 4 / BA90x/TF	5➔BA87a 1 2 3 4	5➔BA87a 1 2 3 4	1 2 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔BA83a 01 95	⌊_⌋⌊_⌋	_____ _____	1 ➔ 3 ➔ 5 8 ➔ BA63b ROW 5 / BA90x/TF	5➔BA87a 1 2 3 4	5➔BA87a 1 2 3 4	1 2 4 5

CODES FOR BA79:

1. With Father and mother
2. With Father only
3. With Mother only
4. Not with father and mother

CODES FOR BA80:

01. Working/trying to get work/helping to earn income
02. Job searching
03. Attending school
04. Housekeeping
05. Retired
06. Stay at home
07. Sick/Disabled
98. DON'T KNOW
95. Other

CODES FOR BA81:

01. Self-employed
02. Self-employed assisted other family members/temporary employees
03. Self-employed with permanent employees
04. Government worker/employee
05. Private worker/employee
06. Unpaid family worker
07. Casual worker in agriculture
08. Casual worker in non-agriculture
98. DON'T KNOW

CODES FOR BA83a:

1. Still Alive
3. Has died in the last 12 months
5. Has died more than 12 months ago
8. DON'T KNOW

CODES FOR BA84, BA84a, A84b:

1. Never
2. At least once a year
3. At least once a month
4. At least once a week
5. Everyday

SECTION BA (NON-CORESIDENT SIBLINGS)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b).

	BA63a.	BA63b.	BA87a.	BA88.	BA89a.	BA90.
		(NAME)	In the past 12 months, did you **provide** assistance to [...] in the form of money, goods, or services?	What type of assistance did you provide to […] and what is the value? **(CIRCLE AND FILL ALL THAT APPLY)**	In the past 12 months, did you **receive** assistance from [...] in the form of money, goods, or services?	What type of assistance did you receive to […] and what is the value? **(CIRCLE AND FILL ALL THAT APPLY)**
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7 ➔**BA63b ROW 2 / BA90x/TF** 3 ➔**BA63b ROW 2 / BA90x/TF**	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7 ➔**BA63b ROW 3 / BA90x/TF** 3 ➔**BA63b ROW 3 / BA90x/TF**	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7 ➔**BA63b ROW 4 / BA90x/TF** 3 ➔**BA63b ROW 4 / BA90x/TF**	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7 ➔**BA63b ROW 5 / BA90x/TF** 3 ➔**BA63b ROW 5 / BA90x/TF**	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7 ➔**BA63b ROW 6 / BA90x/TF** 3 ➔**BA63b ROW 6 / BA90x/TF**	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.

BA90x	**Is there any other child age 7 or above, biological or non-biological, co-residing or non-coresiding, who is not on the list?**	**1.Yes ➔ ADD THE CHILD TO BA63b** **3. No➔ SECTION TF**

CODE BA87a AND BA89a:
1. Yes
3. No
7. UNWILLING TO ANSWER

CODE BA88 AND BA90:
A. Money (loans, tuition, health care cost)
D. Food stuff or other goods
G. Chores, child care
H. Help with family business
V. Other

SECTION BA (NON-CORESIDENT CHILDREN)

AR00. NO. OF HHM	BA63a.	BA63b. NAME	BA63c. Is […] your biological child?	BA64. Sex	BA64a. Age in 2007?	BA64b. Birth Date Month/Year	BA64c. Did […] live in this household?	BA65. Is […] alive?	BA65a. Death Date Month/Year	BA66. Current Age/Age when died Yrs	BA66a. CAPI: AGE ≥ 15?	BA67. Marital Status	BA68. Highest education level attended by […]?	BA69. Highest grade completed by […]?	BA70. Where does […] live now/before died?
⌊_⌊_⌋	01		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	**5.** ⌊_⌋		5. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	**1**↓ **3**	**1→BA66** **8→BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	**00→BA63b ROW 2/BA90x/TF** ⌊_⌊_⌊_⌋ .....
⌊_⌊_⌋	02		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	**5.** ⌊_⌋		5. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	**1**↓ **3**	**1→BA66** **8→BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	**00→BA63b ROW 3/BA90x/TF** ⌊_⌊_⌊_⌋ .....
⌊_⌊_⌋	03		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	**5.** ⌊_⌋		5. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	**1**↓ **3**	**1→BA66** **8→BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	**00→BA63b ROW 4/BA90x/TF** ⌊_⌊_⌊_⌋ .....
⌊_⌊_⌋	04		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	**5.** ⌊_⌋		5. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	**1**↓ **3**	**1→BA66** **8→BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋	**00→BA63b ROW 5/BA90x/TF** ⌊_⌊_⌊_⌋ .....
⌊_⌊_⌋	05		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	**5.** ⌊_⌋		5. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	**1**↓ **3**	**1→BA66** **8→BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	**00→BA63b ROW 6/BA90x/TF** ⌊_⌊_⌊_⌋

CODE AR00:
96. Not Registered at the Roster

CODE BA64:
1. Male
3. Female

CODE BA63c:
1. Biological
2. Step child
3. Adopted
6. Duplicates
7. Not a child of Resp
8. DK

CODE BA65:
1. Yes
3. No
8. DK

CODE BA64C:
1. Yes
3. No

CODE BA66a:
1. Yes
3. No
8. DK

CODE BA67:
1. Unmarried
2. Married
3. Separated/ Estranged
4. Divorced
5. Widow/ widower
8. DON'T KNOW

CODE BA68:
01. No school/Not yet in school
02. Elementary
03. Junior High - General
04. Junior High - Vocational
05. Senior High - General
06. Senior High – Vocational
60. College (D1, D2, D3)
61. University (Bachelor)
62. University (Master)
63. University (PhD)
11. Adult Education A
12. Adult Education B
13. Open University
14. Islamic School (Pesantren)
15. Adult Education C
17. School for disabled
72. Islamic Elementary School (Madrasah Ibtidaiyah)
73. Islamic Junior High School (Madrasah Tsanawiyah)
74. Islamic Senior High School (Madrasah Aliyah)
90. Kindergarten
98. DON'T KNOW
95. Other

CODE BA69:
00. Did not completer 1st grade at this level
01. 1
02. 2
03. 3
04. 4
05. 5
06. 6
07. Graduated
96. No school
98. DON'T KNOW

CODE BA70:

000.	In this household	018.	Lampung	060.	Kalimantan	081.	Maluku
001.	In the same village	019.	Bangka Belitung	061.	West Kalimantan	082.	North Maluku
002.	In the same subdistrict	020.	Riau Islands	062.	Central Kalimantan	090.	Irian
003.	In the same district	030.	Java	063.	South Kalimantan	091.	West Irian Jaya
004.	In the same province	031.	DKI Jakarta	064.	East Kalimantan	094.	Papua
010.	Sumatera	032.	West Java	070.	Sulawesi	101.	Malaysia
011.	Nanggroe Aceh Darussalam	033.	Central Java	071.	North Sulawesi	102.	Singapore
012.	North Sumatra	034.	D.I. Yogyakarta	072.	Central Sulawesi	103.	Brunei Darussalam
013.	West Sumatra	035.	East Java	073.	South Sulawesi	104.	Hongkong
014.	Riau	036.	Banten	074.	Southeast Sulawesi	105.	Japan
015.	Jambi	051.	Bali	075.	Gorontalo	106.	South Korea
016.	South Sumatra	052.	West Nusa Tenggara	076.	West Sulawesi	107.	Taiwan
017.	Bengkulu	053.	East Nusa Tenggara			108.	Timor Leste

121.	Yaman		
122.	Saudi Arabia		
123.	Kuwait		
124.	United Arab Emirates		
131.	Argentina		
132.	USA		
141.	Australia		
151.	Holland		
152.	England		
998.	DON'T KNOW		
995.	Other.....		

SECTION TF (OTHER TRANSFERS)

Now we would like to know whether you have provided/received help, in the form of money, goods or services to/from persons outside the household (other than biological parents, siblings children) or to/from other parties (for example like a foundation/organization, friends, and relatives) during the past 12 months (except gifts, souvenirs, etc.)

TF01a.	**INTERVIEWER CHECK:** **RESPONDENT STATUS = MARRIED (COV4=2)?**	**NO** ..... **3➔TF02a COLUMN A1** **YES**..... **1**
TF01.	Do you live with your spouse?	Yes..... 1**➔TF02a COLUMN A1** No ..... 3**➔TF03a COLUMN A**

TFTYPE		**A** **Respondent's spouse not in the household**	**A1** **Non-biological parents not in the household**	**B** **Family members other than your parents, siblings or children**	**C** **Friends or neighbors**
TF02a.	Do you have non-biological parents who live outside the household who are still alive or died within the last 12 months?		No ..... 3 **➔TF03 COLUMN B** Yes..... 1		
TF03a.	How often have you seen […]in the last 12 months?	5. Every day **➔TF03 COLUMN A** 4. At least once a week 3. At least once a month 2. At least once a year 1. Never	5. Every day **➔TF03 COLUMN A1** 4. At least once a week 3. At least once a month 2. At least once a year 1. Never		
TF03b.	How often were you in telephone contact with […] in the last 12 months?	5. Every day **➔TF03 COLUMN A** 4. At least once a week 3. At least once a month 2. At least once a year 1. Never	5. Every day **➔TF03 COLUMN A1** 4. At least once a week 3. At least once a month 2. At least once a year 1. Never		
TF03c.	How often were you in contact through email, text messages, or chatting with […]in the last 12 month	5. Every day 4. At least once a week 3. At least once a month 2. At least once a year 1. Never **➔TF03 COLUMN A**	5. Every day 4. At least once a week 3. At least once a month 2. At least once a year 1. Never **➔TF03 COLUMN A1**		

SECTION TF (OTHER TRANSFERS)

TFTYPE	A Respondent's spouse not in the household	A1 Non-biological parents not in the household	B Family members other than your parents, siblings or children	C Friends or neighbors
TF03. In the past 12 months, did you or your spouse **provide** assistance to [...] in the form of money, goods, or services?	No.....3 ➔**TF05 COLUMN A** Yes 1	No .....3 ➔**TF05 COLUMN A1** Yes.....1	No.....3 ➔**TF05 COLUMN B** Yes 1	
TF04. In the past 12 months, what type of assistance did you or your spouse provide to […] and what is the value?	**(CIRCLE ALL THAT APLLY)**	**(CIRCLE ALL THAT APLLY)**	**(CIRCLE ALL THAT APLLY)**	
A. Money or loans	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	
B. Tuition	B. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	B. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	B. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	
C. Health care costs	C. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	C. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	C. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	
D. Food stuffs or other goods	D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	
G. Chores, child care, care for sick family	G. ⌊_⌊_⌋ 03. Days 05. Months	G. ⌊_⌊_⌋ 03. Days 05. Months	G. ⌊_⌊_⌋ 03. Days 05. Months	
H. Help family business	H. ⌊_⌊_⌋ 03. Days 05.Months	H. ⌊_⌊_⌋ 03. Days 05.Months	H. ⌊_⌊_⌋ 03. Days 05.Months	
V. Other	V. ..... ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	V. ..... ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	V. ..... ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	
TF05. In the past 12 months, did you or your spouse **receive** assistance from [...] in the form of money, goods, or services?	No.....3 ➔**TF02a COLUMN A1** Yes 1	No .....3 ➔**TF03 COLUMN B** Yes.....1	No.....3 ➔**TF05 COLUMN C** Yes 1	No .....3 ➔**SECTION EP** Yes.....1

SECTION TF (OTHER TRANSFERS)

	Respondent's spouse not in the household	Non-biological parents not in the household	Family members other than your parents, siblings or children	Friends or neighbors
TF06. In the past 12 months, what type of assistance did you or your spouse receive from […] and what is the value?	**(CIRCLE ALL THAT APLLY)**	**(CIRCLE ALL THAT APLLY)**	**(CIRCLE ALL THAT APLLY)**	**(CIRCLE ALL THAT APLLY)**
A. Money or loans	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
B. Tuition	B. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	B. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	B. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	B. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
C. Health care costs	C. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	C. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	C. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	C. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
D. Food stuffs or other goods	D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
G. Chores, child care, care for sick family	G. ⌊_⌊_⌋ 03. Days 05. Months	G. ⌊_⌊_⌋ 03. Days 05. Months	G. ⌊_⌊_⌋ 03. Days 05. Months	G. ⌊_⌊_⌋ 03. Days 05. Months
H. Help family business	H. ⌊_⌊_⌋ 03. Days 05.Months	H. ⌊_⌊_⌋ 03. Days 05.Months	H. ⌊_⌊_⌋ 03. Days 05.Months	H. ⌊_⌊_⌋ 03. Days 05.Months
V. Other	V. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	V. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	V. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	V. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
	➔TF02a COLUMN A1	**➔TF03 COLUMN B**	**➔TF05 COLUMN C**	**➔SEKSI EP**

SECTION EP (EXPECTATION)

EP01.	CAPI CHECK COV3 DAN COV5:	RESPONDENT IS BOOK IV RESPONDENT ..... 3 ➔SEKSI CP RESPONDENT IS NOT BOOK IV RESPONDENT..... 1
EP01x.	CAPI CHECK BA63b & BA66: HAVE CHILDREN AGE 7 – 24 YEAR?	YES ..... 1 ➔ EP NO ..... 3 ➔CP
EP0Xa.	Do you have any child (biological or non-biological) aged 7-24 from the current or previous wives?	Yes..... 1 ➔ EP05 No ..... 3 ➔ SEKSI CP

SECTION EP (EXPECTATION)

Now we would like to ask about your expectation about your children's education, health, and life status in the future.

EP05.	EP06.	EP07.	EP08.	EP09.	EP10.	EP11.	EP12.	EP13.	EP14.	EP15.	EP16.	EP17.	EP18.	EP19.
	HHM NUMBER IN AR (AR00)	**HHM NUMBER IN BA (BA63a)**	**NAME**	Child status	Sex	Age	Is […] still alive?	**CAPI CHECK EP11: IS […] AGED 7-4?**	Is [...] live in this HH?	Is [...] currently attending school, will attend school, or will continuing school in the future?	What his/her highest education level do you expect?	What his/her highest class level do you expect?	When […] at your age now, according to you, how is […]'s health status comparing your health status now?	When […] at your age now, according to you, how is […]'s live status comparing your live status now?
01	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋↓	**5.** ⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ↓ 8 ↓	**1. YES ➔** **3. NO ↓**	1. Yes 3. No	3. No ➔ **EP18** 1. Yes	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6
02	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋↓	**5.** ⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ↓ 8 ↓	**1. YES ➔** **3. NO ↓**	1. Yes 3. No	3. No ➔ **EP18** 1. Yes	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6
03	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋↓	**5.** ⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ↓ 8 ↓	**1. YES ➔** **3. NO ↓**	1. Yes 3. No	3. No ➔ **EP18** 1. Yes	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6
04	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋↓	**5.** ⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ↓ 8 ↓	**1. YES ➔** **3. NO ↓**	1. Yes 3. No	3. No ➔ **EP18** 1. Yes	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6
05	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋↓	**5.** ⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ↓ 8 ↓	**1. YES ➔** **3. NO ↓**	1. Yes 3. No	3. No ➔ **EP18** 1. Yes	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6

EP 19X. Is there any child (biological or non-biological) aged 7-24 that is not listed?	**1.** Yes ➔ **EP 05** **3.** No ➔ **SECTION CP**

CODE EP06 AND EP07:
96. Not Registered

CODE EP10:
1. Male
3. Female

CODE EP09:
1. Biological Child
2. Step child
3. Adopted child
6. Duplicates
7. Not a child of Resp
8. DON'T KNOW

CODE EP12:
1. Yes
3. No
8. DK

CODE EP16:

01. No school/Not yet in school	61. University (Bachelor)	15. Adult Education C
02. Elementary	62. University (Master)	17. School for disabled
03. Junior High - General	63. University (PhD)	72. Islamic ES (Madrasah Ibtidaiyah)
04. Junior High - Vocational	11. Adult Education A	73. Islamic JHS (Madrasah Tsanawiyah)
05. Senior High - General	12. Adult Education B	74. Islamic SHS (Madrasah Aliyah)
06. Senior High – Vocational	13. Open University	90. Kindergarten
60. College (D1, D2, D3)	14. Islamic School (Pesantren)	98. DON'T KNOW
		95. Other

CODE EP17:

00. Did not completer 1st grade at this level	
01. 1	
02. 2	06. 6
03. 3	07. Graduated
04. 4	96. No school
05. 5	98. DON'T KNOW

CODE EP18 AND EP19:
1. Much better
2. Better
3. Same
4. Worst
5. Much worst
6. NOT APPLICABLE

SECTION CP (INTERVIEWER NOTES)

EVALUATION FORM FOR BOOK IIIB

LANGMAIN. Interview was entirely/mostly conducted in what language?	└┴┘ **Other:** _____
LANGOTHR. Other language used (if any):	└┴┘ **Other:** _____

CODE FOR LANGUAGE:

00.	Indonesian	04.	Batak	08.	Sasak	12.	Makassar	16.	Toraja	20.	Lampung
01.	Javanese	05.	Bugis	09.	Minang	13.	Nias	17.	Lahat	96.	NONE
02.	Sundanese	06.	Chinese	10.	Banjar	14.	Palembang	18.	Other South Sumatra	95.	Other
03.	Balinese	07.	Maduranese	11.	Bima	15.	Sumbawa	19.	Betawi		

C1.RESULT OF INTERVIEW OF BOOK III	C2.REASON CODE FOR ANSWER "3"/"2" ON C1	C4. SUPERVISOR MONITORING		
1. Completed➔**C4**	1. Respondent was not at home/not available		Yes	No
2. Partially completed	2. Respondent was seriously ill	a. Observed	1	3
3. Not completed	3. Respondent refused (to be interviewed)	b. Edited	1	3
	5. Other:	c. Verified	1	3

SECTION CP (INTERVIEWER NOTES)

CP1. WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW? **ANSWER MAY BE MORE THAN ONE.** A. NO ONE B. A CHILD 5 YEARS OLD OR UNDER C. A CHILD OLDER THAN 5 YEARS OLD D. HUSBAND/WIFE E. AN ADULT, A HOUSEHOLDER F. AN ADULT, NOT A HOUSEHOLDER	**CP2.** WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD	**CP3.** WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD

NOTES:

CONFIDENTIAL

INTERVIEWER: _____ └┴┴┘

HHID : └┴┴┘ └┴┴┘ └┴┴┘ └┴┴┘

PROXY: **1. Yes** **3.No**

INDONESIA FAMILY LIFE SURVEY 2014

BOOK IV

SECTIONS: KW, BR, BA, BF, CH, BX, EP, CX, CP

RESVIS.	RESPONDENT INTERVIEWED ?	1. Yes 3. No ➔ C1

Respondent is an ever-married woman age 15-49 yearsand respondent who was interviewed for Book IV and aged 50 maximum in 2007 (in 2014 will be 57 years old maximum)

COMPLETED FROM ROSTER

PID

HOUSEHOLDER: _____ └┴┘

PANEL(COV2) HOUSEHOLDER IS A:

Panel Respondent (AR01h=1) 1

New Respondent (AR01h=3) 3

TO BE FILLED OUT BY INTERVIEWER FOR BOOK IV

AGE. How old are you? ..... └┴┘ years

MARSTAT. What is your marital status?

Married 2

Separated 3

Divorced 4

Widow 4

Cohabitate 5

DOB. Date of birth ..... └┴┘ / └┴┘ / └┴┴┴┘

DAY MONTH YEAR

SECTION KW (MARITAL HISTORY)

Now we would like to ask about your marital history.

KW00a.	**CAPI CHECK COV2: IS RESPONDENT A PANEL RESPONDENT FOR BOOK III (AR01g=1) WITH PREPINTED KW ROSTER IN BOOK3A?**	No..... 3➔ KW03a Yes, panel with KW 3A preprinted …… 1
KW00b.	When we interviewed you in 2007, we have the follwing information about your marital status at that time: **INTERVIEWER: READ THE INFORMATION LISTED IN THE KW PREPRINTED ROSTER**	1. Marital status : _____ 2. Name of last spouse/spouse in 2007 : _____ 3. PID of spouse : ⌊_⌋⌊_⌋
KW00c.	**INTERVIEWER CHECK: IS THE INFORMATION IN KW00B CORRECT?**	No..... 3➔ **KW03a** Yes..... 1
KW00d.	Since the 2007 interview have you had any changes in your marriage status?	No..... 3➔ **KW23a** Yes..... 1

KW03a.	What is your marital status?	Cohabitation ..... 2 Married formal (KUA or civil registration)... 3 Married,formal according to religious law .. 4 Married,formal according to adat law..... 5 Separated..... 6 Divorced ..... 7 Widow/widower..... 8
KW03.	How many times have you been married ?	⌊_⌋⌊_⌋ Times
KW02a.	What is the name of your current/latest spouse/partner/partner?	_____
KW02a1	Do you have a marriage certificate with […]?	Yes ..... 1 ➔**KW02g** No 3
KW02a2	Reason not have a marriage certificate	⌊_⌋
KW02g.	**CAPI CHECK:** **1. IF SPOUSE/PARTNER LIVES IN THE HOUSEHOLD, FILL IN AR00** **2. IF SPOUSE/PARTNER DIED/DOES NOT LIVE IN HOUSEHOLD, BUT REGISTERED IN ROSTER, FILL IN AR00** **3. SPOUSE/PARTNER IS NOT REGISTERED IN ROSTER**	**1.** ⌊_⌋⌊_⌋ **2.** ⌊_⌋⌊_⌋ **3.**

KW02b.	In the last 4 weeks, have you taken iron pills?	No ..... 3 ➔**KW02e** Yes 1
KW02c.	In the last 4 weeks, how many iron pills did you take?	⌊_⌋⌊_⌋⌊_⌋ ..... 1 DON'T KNOW..... 8
KW02d.	Where did you get these pills? **CIRCLE ALL THAT APPLY**	Posyandu..... A HealthCenter..... B Place of work ..... C Midwife..... D Pharmacy..... F Private doctor..... G Hospital..... H Paramedic..... I Other _____ V
KW02e.	Before you got married did you receive an injection of TT to keep your babies from getting tetanus or convulsions at birth?	Yes ..... 1 No 3
KW02x.	**CAPI CHECK :** **KW03a=2 (COHABITATION?**	**Yes ..... 1 ➔ KW02l** No 3
KW02h.	**CAPI CHECK (COV2)** **Respondent is panel respondent (AR01h=1)**	NO ..... 3 ➔**KW12a** YES 1
KW02i.	What was the date of your current/most recent marriage?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW
KW02j.	**CAPI CHECK KW02i:** **Is the year at KW02i before 2007?**	**YES ..... 1➔KW23a** **NO 3➔KW12a**
KW02l.	When did you start living together with your spouse/partner ?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW
KW02m.	What was the value of the assets you owned just prior to of your living together with your spouse/partner?	⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1 DON'T KNOW 8
KW02n.	What was the highest education level attended by your spouse/partner of the […] marriage?	⌊_⌋⌊_⌋
KW02o.	What was the highest grade completed by your spouse/partner ?	00 01 02 03 04 05 06 07 96 98 ➔ **KW23a**

SECTION KW (MARITAL HISTORY)

KW12a.	What was the dowry for your current/ most recent marriage? **CIRCLE ALL THAT APPLY**	NOTHING ..... W➔**KW13a** Sholat (praying) accessory ..... A Money ..... B Land ..... C Building/House ..... D Jewelry ..... E Complete set of clothing ..... G Food ..... H Household Items ..... I Religious book ..... K Beauty items ..... L Livestock ..... M Other _____ V
KW12b.	What was the value of the dowry of your current/most recent marriage at the time of the marriage?	⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp. ..... 1 ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Other currency ..... 2 DON'T KNOW 8

KW13a.	What did you receive as a gift, not a dowry, at the time of your current/most recent marriage, that was not consumed for the wedding party? **CIRCLE ALL THAT APPLY**	NOTHING ..... W➔**KW14** Sholat (praying) accessory ..... A Money ..... B Land ..... C Building/House ..... D Jewelry ..... E Complete set of clothing ..... G Food ..... H Household Items ..... I Religious book ..... K Beauty items ..... L Livestock ..... M Other _____ V
KW13b.	What was the value of the gift?	⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp. .... 1 ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Other currency ..... 2 DON'T KNOW 8
KW14.	What was the value of the assets you owned just prior to the wedding of your current/latest marriage?	⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ , ⌊_⌊_⌊_⌋ Rp. ..... 1 DON'T KNOW 8
KW14a.	Right after the wedding ceremony of your current/latest marriage, did you move?	NO, lived at the same place ..... 3➔**KW14c** YES, moved within the same village/town ..... 2➔**KW14c** YES, moved to another village/town 1
KW14b.	What is the […] name at the place you moved at that time?	A. Vill: 1. _____ 3. Same as current residence 8. DON'T KNOW B. Kec: 1. _____ 3. Same as current residence 8. DON'T KNOW C. Kab: 1. _____ 3. Same as current residence 8. DON'T KNOW D. Prov: 1. _____ 3. Same as current residence 8. DON'T KNOW
KW14c.	How long did you reside at your first residence after the wedding?	01. ⌊_⌊_⌊_⌋ 04. Weeks 05. Months 06. Years 96. Still live there 98. DON'T KOW

KW14d.	At the time you married your current/latest husband, did your spouse/partner change residence?	Yes ..... 1 No 3
KW14d1.	Because of *adat* and the high cost of wedding, many couples choose to live together before the wedding. Did you and your current/latest partner live together before the wedding?	No ..... 3 ➔**KW14e** Yes 1
KW14d2.	How long did you live together before the wedding?	01. ⌊_⌊_⌊_⌋ 04. Weeks 05. Months 06. Years 98. DON'T KOW
KW14e.	Did you and your current/latest spouse/partner start to live together right after the wedding?	No ..... 3 ➔**KW14g** Yes 1

KODE KW02n:			
01.	None	12.	Adult Education B
02.	Elementary School	13.	Open University
03.	Junior High General	14.	Islamc School *(Pesantren)*
04.	Junior High Vocational	15.	Adult Education C
05.	Senior High General	17.	School for disabled
06.	Senior High Vocational	72.	Islamic Elementary School *(Madrasah Ibtidaiyah)*
60.	College (D1, D2, D3)	73.	Islamic Junior High *(Madrasah Tsanawiyah)*
61.	University (BA)	74.	Islamic Senior High (Madrasah Aliyah)
62.	University (MA)	90.	Kindergarten
63.	University (PhD)	98.	DON'T KNOW
11.	Adult Education A	95.	Other

KODE KW02o:	
00.	Didn't complete 1st grade at that level
01.	1
02.	2
03.	3
04.	4
05.	5
06.	6
07.	Graduated
96.	Unschooled
98.	DON'T KNOW

SECTION KW (MARITAL HISTORY)

KW14f.	How long after the wedding took place did you start to live together with your husband?	96. Not yet living together ➔**KW04** 01. ⌊__⌋⌊__⌋⌊__⌋ 04. Weeks 05. Months 06. Years 98. DON'T KOW
KW14g.	At the time you lived together with your current/latest spouse/partner for the first time, who else lived in the house? **CIRCLE ALL THAT APPLY.** **IN THIS CASE THE WEDDING LOCATION IS NOT REGARDED AS A JOINT RESIDENCE (REFER TO ANSWER KW14e = 1 (YES)) AND RESIDENCE REGISTERED IN KW14b.**	Nobody Else ..... W Own Parents ..... B Parents-In-Law ..... C Biological Brother ..... D Biological Sister ..... E Brother-In-Law ..... F Sister-In-Law ..... G Other Family Members ..... H Not Family-Related ..... I Biological Child ..... J
KW04.	Who chose your husband (from your first marriage) ?	Parents ..... 01 Self ..... 03 Family ..... 04 Other: 95
KW08.	Please mention the names of all your husbands/partners, (starting with whom you are married now or the latest marriage, then the previous marriage and so forth). **CAPI CHECK :** **KW08 REFER TO KW03** **FOR PANEL RESPONDENT RECORD ONLY MARRIAGE IN 2007 AND AFTER .**	**WRITE DOWN NAMES IN KW09**

SECTION KW (MARITAL HISTORY)

FILL OUT NAMES AND DATES STARTING WITH CURRENT/LATEST MARRIAGE

KWN: NUMBER OF MARRIAGE.....	**Latest / Current**	**Second Latest**	**Third Latest**	**Fourth Latest**	**Fifth Latest**	**Sixth Latest**
KW09. Name of spouse/partner:	_____	_____	_____	_____	_____	_____
KW10. What (month/year) did you get married?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW11a** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW11a** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW11a** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW11a** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW11a** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW11a** 8. DON'T KNOW
KW11. How old were you when your […] marriage started?	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years
KW11a. Because of adat and the high cost of wedding, many couples choose to live together before the wedding. Did you and your current/latest spouse/partner live together before the wedding?	1 Yes 3. No	1 Yes 3. No	1 Yes 3. No	1 Yes 3. No	1 Yes 3. No	1 Yes 3. No
KW11b. What was I status of your marriage	2 3 4 5 ➔**KW20** 6 7 8	2 3 4 5 ➔**KW20** 6 7 8	2 3 4 5 ➔**KW20** 6 7 8	2 3 4 5 ➔**KW20** 6 7 8	2 3 4 5 ➔**KW20** 6 7 8	2 3 4 5 ➔**KW20** 6 7 8
KW18. When (month/year) did the marriage end/separation begin?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW20** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW20** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW20** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW20** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW20** 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year ➔**KW20** 8. DON'T KNOW
KW19. How old were you when the […] marriage ended/separation began?	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years
KW20. What was the highest education level attended by your husband/wife of the […] marriage?	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____
KW21. What was the highest grade completed by your husband/wife of the […] marriage?	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98
KW22x. CAPI CHECK: IS RESPONDENT: **3. NEW ➔KW22b** **1. PANEL**	**3. ➔KW22b** **1.**	**3. ➔KW22b** **1.**	**3. ➔KW22b** **1.**	**3. ➔KW22b** **1.**	**3. ➔KW22b** **1.**	**3. ➔KW22b** **1.**
KW22a. CAPI CHECK KW10 **FOR PANEL:** **3. NO OTHER MARRIAGE .....** **2. MARRIAGE BEGAN BEFORE 2007.....** 1. MARRIAGE BEGAN AFTER 2006.....	**3.➔KW23a** **2.➔KW23a** **1.➔KW09 COLUMN 2**	**3.➔KW23a** **2.➔KW23a** **1.➔KW09 COLUMN 3**	**3.➔KW23a** **2.➔KW23a** **1.➔KW09 COLUMN 4**	**3.➔KW23a** **2.➔KW23a** **1.➔KW09 COLUMN 5**	**3.➔KW23a** **2.➔KW23a** **1.➔KW09 COLUMN 6**	**3.➔KW23a** **2.➔KW23a** **1.➔KW09 SUPPLEMENT**
KW22b. CAPI CHECK: NUMBER OF MARRIAGESFOR NEW: **3. NO OTHER MARRIAGE .....** **1. ANOTHER MARRIAGE .....**	**3.➔KW23a** **1.➔KW09 COLUMN 2**	**3.➔KW23a** **1.➔KW09 COLUMN 3**	**3.➔KW23a** **1.➔KW09 COLUMN 4**	**3.➔KW23a** **1.➔KW09 COLUMN 5**	**3.➔KW23a** **1.➔KW09 COLUMN 6**	**3.➔KW23a** **1.➔KW09 SUPPLEMENT**

KODE KW11b

2.	Cohabitation
3.	Married formal (KUA or civil registration)
4.	Married,formal according to religious law
5.	Married,formal according to adat law
6.	Separated
7.	Divorced
8.	Widow/widower

KODE KW20

01.	None	61.	University (BA)	15.	Adult Education C	95.	Other_____
02.	Elementary School	62.	University (MA)	17.	School for disabled		
03.	Junior High General	63.	University (PhD)	72.	Islamic Elementary School *(Madrasah Ibtidaiyah)*		
04.	Junior High Vocational	11.	Adult Education A	73.	Islamic Junior High *(Madrasah Tsanawiyah)*		
05.	Senior High General	12.	Adult Education B	74.	Islamic Senior High (Madrasah Aliyah)		
06.	Senior High Vocational	13.	Open University	90.	Kindergarten		
60.	College (D1, D2, D3)	14.	Islamic School *(Pesantren)*	98.	DON'T KNOW		

KODE KW21:

00.	Didn't complete 1st gradeat that level		
01.	1		
02.	2	06.	6
03.	3	07.	Graduated
04.	4	96.	Unschooled
05.	5	98.	DON'T KNOW

SECTION KW (MARITAL HISTORY)

KW23a.	If you could choose exactly the number of children to have in your whole life, how many would that be?	⌊_⌋⌊_⌋ Children .....01 Up to God 95
KW23b.	How old were you on your first menstruation?	Never menstruated .....96 ➔**KW24a** ⌊_⌋⌊_⌋ Years 01
KW23c.	**CAPI CHECK COV3:**	**RESPONDENT'S AGE <35..... 1 ➔KW24a** **RESPONDENT'S AGE ≥ 35 ..... 3**
KW23d.	Do you now still have menstruation?	Yes .....1 ➔**KW24a** No, because another reason (medication, contraception method, etc.).....2 ➔**KW24a** No (stop at all) 3
KW23e.	How old were you when you stopped having menstruation?	⌊_⌋⌊_⌋ Years ➔**SECTION BR**

KW24a.	Are you and your spouse/partner physically able to conceive a child (again) without medical help?	Yes ..... 1 No..... 3
KW24b.	Have you and your spouse/partner ever sought medical attention to help you conceive?	Yes ..... 1 No..... 3
KW25.	Do you personally wish to have another child (besides the children you already have)?	No..... 3➔**SECTION BR** Yes 1
KW26.	How many (more) children do you wish to have?	⌊_⌋⌊_⌋ Children .....01 Up to God 95
KW27.	Among the children that you (still) wish to have, how many sons and daughters do you wish to have?	01. a. ⌊_⌋⌊_⌋ Sons b. ⌊_⌋⌊_⌋ Daugthers 95. Up to God

SECTION BR (PREGNANCY SUMMARY)

Now I would like to ask you about all of your pregnancies.

BR00x.	**CAPI CHECK:**	**NEW RESPONDENT ..... 3 ➔ BR01** **PANEL RESPONDENT 1**
BR00a.	**CAPI CHECK:**	**HAS CHILD ROSTER AND A CHILD LISTED AT CH00a ..... 1 ➔ BA00a** **HAS CHILD ROSTER AND NO CHILD LISTED AT CH00a ..... 2** **HAS NO CHILD ROSTER 3**
BR01.	Now I would like to ask you about all children that you have so far. Have you ever given birth?	**No ..... 3 ➔ BR08** **Yes 1**
BR02.	Do you have biological sons or daughters who are now living with you?	**No ..... 3 ➔ BR05** **Yes 1**
BR03.	How many biological sons are now living with you?	⌊_⌋⌊_⌋ Males
BR04.	How many biological daughters are now living with you?	⌊_⌋⌊_⌋ Females
CAPI CHECK: USE LIST OF HOUSEHOLDERS TO VERIFY NUMBER OF RESPONDENT'S BIOLOGICAL CHILDREN WHO LIVE IN THIS HOUSEHOLD. IF THE TOTAL OF BR03 + BR04 AND THE NUMBER OF RESPONDENT'S BIOLOGICAL CHILDREN IN LIST OF HOUSEHOLDERS DO NOT MATCH, DO SOME PROBING TO CONFIRM THE NUMBER. REPEAT THE QUESTION BY MENTIONING EACH BIOLOGICAL CHILD'S NAME FROM LIST OF HOUSEHOLDERS (AR01).		
BR05.	Do you have biological sons or daughters, who are still alive, but do not live with you?	No ..... 3➔**BR08** Yes 1
BR06.	How many biological sons are still alive, but do not live with you?	⌊_⌋⌊_⌋ Males
BR07.	How many biological daughters are still alive, but do not live with you?	⌊_⌋⌊_⌋ Females
BR08.	Have you ever given live birth to a son or daughter, even one who lived only for a short a while?	No ..... 3➔**BR11** Yes 1

BR09.	How many sons were born alive but passed away later?	⌊_⌋⌊_⌋ Males
BR10.	How many daughters were born alive but passed away later?	⌊_⌋⌊_⌋ Females
BR11.	Have you ever had a pregnancy that resulted in a stillbirth?	No ..... 3 ➔ **BR13** Yes 1
BR12.	How many stillbirths have you had?	⌊_⌋⌊_⌋
BR13.	(Besides that) have you had any miscarriages?	No ..... 3 ➔**BR15** Yes 1
BR14.	How many miscarriages have you had?	⌊_⌋⌊_⌋
BR15.	**CAPI CHECK:** **ADD THE NUMBERS (BR03, BR04, BR06, BR07, BR09, AND BR10) AND ENTER AMOUNT HERE:** To confirm your answers, you have had ⌊_⌋⌊_⌋ livebirths, is it correct ?	⌊_⌋⌊_⌋ No ..... 3 ➔**REVISE BR01-BR10** Yes 1
BR16.	**CAPI CHECK:** **ADD THE NUMBERS (BR12 AND BR14) AND ENTER AMOUNT HERE:** Again, to confirm your answers, you have had ⌊_⌋⌊_⌋ stillbirths and miscarriages, is it correct?	⌊_⌋⌊_⌋ No ..... 3 ➔**REVISE BR12 and BR14** Yes 1
BR16a.	**CAPI CHECK BR00a.**	**HAVE ROSTER ..... 2 ➔BA00a** **NO ROSTER ..... 3 ➔BF00**

CHILD ROSTER

BA00a. CAPI CHECK (Choose One)

RESPONDENT HAS A CHILD ROSTER FOR BOOK IV ..... 1 ↓ ↓ ↓ INSERT PREPRINTED CHILD ROSTER FOR BOOK IV	RESPONDENT HAS NO PREPRINTED CHILD ROSTER FOR BOOK IV / NEW RESPONDENT ..... 3 ↓ ↓ ↓ BF00

SECTION BA (NON-CORESIDENT CHILD ROSTER)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b).

	BA63a.	BA63b.	BA78.	BA79.	BA80.	BA81.	BA82a.	BA83a.	BA84.	BA84a.	BA84b.
		(NAME)	When […] twelve years old, you and your husband married?	When […] twelve years old, with whom did […] live?	What is/was [ ]'s primary activity now/before his/her death?	What is/was […]'s work status now/before his/her death?	What is/was [ ]'s type of work now/before his/her death?	CAPI CHECK BA65 AND BA65a: […] STILL ALIVE?	How often do/did you meet with [ ] during the past year now/before his/her death?	How often do/did you have contact with [ ] by telephone during the past year now/before his/her death?	How often do/did you have contact with [ ] by mail, sms, email/chatting during the past year now/before his/her death?
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	└─┴─┘	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	└─┴─┘	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	└─┴─┘	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	└─┴─┘	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	└─┴─┘	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5

CODESFOR BA79:
1. With Father and mother
2. With Father only
3. With Mother only
4. Not with father and mother

CODESFOR BA80:
01. Working/trying to get work/helping to earn income
02. Job searching
03. Attending school
04. Housekeeping
05. Retired
06. Stay at home
07. Sick/Disabled
98. DON'T KNOW
95. Other _____

CODESFOR BA81:
01. Self-employed
02. Self-employed assisted other family members/temporary employees
03. Self-employed with permanent employees
04. Government worker/employee
05. Private worker/employee
06. Unpaid family worker
07. Casual worker in agriculture
08. Casual worker in non-agriculture
98. DON'T KNOW

CODESFOR BA83a:
1. Still Alive
3. Has died in the last 12 months
5. Has died more than 12 months ago
8. DON'T KNOW

CODESFOR BA84, BA84a, BA84b:
1. Never
2. At least once a year
3. At least once a month
4. At least once a week
5. Everyday

SECTION BA (NON-CORESIDENT CHILD ROSTER)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b).

	BA63a.	BA63b.	BA87a.	BA88.	BA89a.	BA90.
		(NAMA)	In the past 12 months, did you **provide** assistance to [...] in the form of money, goods, or services?	**What type of assistance did you provide to […] and what is the value?** (CIRCLE AND FILL ALL THAT APPLY)	In the past 12 months, did you **receive** assistance from [...] in the form of money, goods, or services?	**What type of assistance did you receive to […] and what is the value?** (CIRCLE AND FILL ALL THAT APPLY)
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	7➔**BA63b ROW 2 / BA90x/BF** 3 ➔**BA63b ROW 2 / BA90x/BF** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	7➔**BA63b ROW 3 / BA90x/BF** 3 ➔**BA63b ROW 3 / BA90x/BF** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	7➔**BA63b ROW 4 / BA90x/BF** 3 ➔**BA63b ROW 4 / BA90x/BF**` 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	7➔**BA63b ROW 5 / BA90x/BF** 3 ➔**BA63b ROW 5 / BA90x/BF** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.	7➔**BA63b SUPPLEMENT / BA90x/BF** 3 ➔**BA63b SUPPLEMENT / BA90x/BF** 1	A. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. D. ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp. G. ⌊_⌊_⌋ 03. Days 05. Months H. ⌊_⌊_⌋ 03. Days 05. Months V. _____ ⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋.⌊_⌊_⌊_⌋ Rp.

CODE BA87a AND BA89a:
1. Yes
3. No
7. UNWILLING TO ANSWER

CODE BA88 AND BA90:
A. Money (loans, tuition, health care cost)
D. Food stuff or other goods
G. Chores, child care
H. Help with family business
V. Other _____

SECTION BA (NON-CORESIDENT CHILD ROSTER)

NON-CO RESIDENT (BA) CHILDROSTER FOR NEW RESPONDENT/PANEL RESPONDENT WITHOUT PREPRINTED CHILD ROSTER.

Now we would like to ask about all of your biological children with aged 15 years old or more that live outside the household, including biological children that have died in the last 12 months and lived outside the HH at the time of death.

AR00.	BA63a.	BA63b.	BA63c.	BA64.	BA64a.	BA64b.	BA64c.	BA65.	BA65a.	BA66.	BA66a	BA67.	BA68.	BA69.	BA70.
NO. OF HHM		NAME	Is […] you're your biological child?	Sex	Age in 2007?	Birth Date Month/Year	Is […] in this HH ?	Is […] still alive?	Death Date Month/Year	Current Age/Age when died Yrs	CAPI CHECK: Age ≥15?	Marital Status	Highest education level attended by […]?	Highest grade completed by […]?	Where does […] live now/before died?
⌊_⌊_⌋	01		1 ➔ 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ⌊_⌊_⌋ ↓	⌊_⌋		1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____
⌊_⌊_⌋	02		1 ➔ 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ⌊_⌊_⌋ ↓	⌊_⌋		1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____
⌊_⌊_⌋	03		1 ➔ 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ⌊_⌊_⌋ ↓	⌊_⌋		1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____
⌊_⌊_⌋	04		1 ➔ 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ⌊_⌊_⌋ ↓	⌊_⌋		1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____
⌊_⌊_⌋	05		1 ➔ 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ⌊_⌊_⌋ ↓	⌊_⌋		1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____

CODE AR00:
96. Not Registered at the Roster

CODE BA64:
1. Male
3. Female

CODE BA63c:
1. Yes
2. Stepchild
3. Adopted
6. Duplicate
7. Not a child
8.DON'T KNOW

CODE BA65:
1. Yes
3. No
8. DON'T KNOW

CODE BA64C:
1. Yes
3. No

CODE BA67:
1. Unmarried
2. Married
3. Separated/ Estranged
4. Divorced
5. Widow/ widower
8. DON'T KNOW

CODE BA68:

01. No school/Not yet in school	61.University (Bachelor)	15. Adult Education C
02. Elementary	62.University (Master)	17.School for disabled
03. Junior High - General	63.University (PhD)	72. Islamic Elementary School(Madrasah Ibtidaiyah)
04. Junior High - Vocational	11. Adult Education A	73. Islamic Junior High School (Madrasah Tsanawiyah)
05. Senior High - General	12. Adult Education B	74. Islamic Senior High School (Madrasah Aliyah)
06. Senior High – Vocational	13. Open University	90. Kindergarten
60.College (D1, D2, D3)	14. Islamic School (Pesantren)	98. DON'T KNOW
		95. Other

CODE BA69:
00. Did not completer 1st grade at this level
01. 1
02. 2
03. 3
04. 4
05. 5
06. 6
07. Graduated
96. No school
98. DON'T KNOW

CODE BA70:

000.	In this household	018.	Lampung	060.	Kalimantan	081.	Maluku	121.	Yaman
001.	In the same village	019.	Bangka Belitung	061.	West Kalimantan	082.	North Maluku	122.	Saudi Arabia
002.	In the same subdistrict	020.	RiauIslands	062.	Central Kalimantan	090.	Irian	123.	Kuwait
003.	In the same district	030.	Java	063.	South Kalimantan	091.	West Papua	124.	United Arab Emirates
004.	In the same province	031.	DKI Jakarta	064.	East Kalimantan	094.	Papua	131.	Argentina
010.	Sumatera	032.	West Java	065.	North Kalimantan	101.	Malaysia	132.	USA
011.	Nanggroe Aceh Darussalam	033.	Central Java	070.	Sulawesi	102.	Singapore	141.	Australia
012.	North Sumatra	034.	D.I. Yogyakarta	071.	North Sulawesi	103.	Brunei Darussalam	151.	Holland
013.	West Sumatra	035.	East Java	072.	Central Sulawesi	104.	Hongkong	152.	England
014.	Riau	036.	Banten	073.	South Sulawesi	105.	Japan	998.	DON'T KNOW
015.	Jambi	051.	Bali	074.	Southeast Sulawesi	106.	South Korea	995.	Other
016.	South Sumatra	052.	West Nusa Tenggara	075.	Gorontalo	107.	Taiwan		
017.	Bengkulu	053.	East Nusa Tenggara	076.	West Sulawesi	108.	Timor Leste		

BF00. CAPI CHECK		
PANEL RESPONDENT WITH CHILD LISTED AT CH00a IN CHILD ROSTER **1** ↓ **BF01**	**PANEL RESPONDENT WITH NO CHILD LISTED AT CH00a IN CHILD ROSTER** **2** ↓ **BF09**	**NEW RESPONDENT** **3** ↓ **BF09**

BF01.	**CAPI CHECK: NAME OF YOUNGEST CHILD (FROM CH00a).**	_____
BF02.	Age of youngest child.	└─┴─┘ Years
BF03	**CAPI CHECK: IS CHILD GREATER THAN 12 YEARS?**	Yes .....1➔**BF09** No.....3
BF04.	Did you ever breastfeed […] even for a short period?	No.....3➔**BF09** Yes 1
BF05.	How old was […] when he/she was first fed water (plain, sugared, honey, ice water, tea)?	01. └─┴─┘ 03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE EVER FED 96. NOT YET FED
BF06.	What age was […] when he/she was regularly (on a daily basis) fed other foods/beverages besides breast milk? **ENTER "96" IF NOT FED REGULARLY YET**	01. └─┴─┘ 03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE FED REGULARLY 96. NOT YET FED REGULARLY
BF07.	For how many months did you breastfeed […]?	96. STILL BREASTFEEDING➔**BF09** 05. └─┴─┘ MONTHS 88. DIED WHILE BREASTFEEDING

BF08.	Why did you stop breastfeeding […]? **CIRCLE ALL THAT APPLY**	A. MOTHER SICK/WEAK B. SORE NIPPLES C. WORK D. INCONVENIENCE E. TAKE CONTRACEPTIVE PILLS F. WANT TO GET PREGNANT G. WAS PREGNANT AGAIN H. INSUFFICIENT BREAST MILK I. CHILD'S DEATH J. CHILD'S SICKNESS K. CHILD IN INCUBATOR L. CHILD DID NOT DEVELOP M. CHILD DID NOT WANT N. CHILD LIVED SEPARATELY O. DR/NURSE'S RECOMMENDATIONS P. HUSBAND'S OBJECTIONS Q. CHILD'S INABILITY TO SUCK R. CHILD WAS BIG ENOUGH V. OTHER _____
BF09	We want to ask you about your knowledge on breastfeeding. Until what age do you think a newborn should be breastfed exclusively?	└─┴─┘ 03. DAYS 04. WEEKS 05. MONTHS ➔**CH00**

SECTION CH (PREGNANCY HISTORY)

CH00. CAPI CHECK

PANEL RESPONDENT WITH CHILD LISTED AT CH00a IN CHILD ROSTER	PANEL RESPONDENT WITH NO CHILD LISTED AT CH00a IN CHILD ROSTER	NEW RESPONDENT
1 ➔ CH01a	2 ➔ CH01b	3 ➔ CH01b

PANEL RESPONDENT WITH CHILD AT CH00a

CH01a. CAPI CHECK: FIND CH00a. ON PRE-PRINTED CHILDROSTER
NAME OF YOUNGEST CHILD:_____

a. Since the birth of […] (NAME OF CHILD IN CH00a), have you been pregnant again?	No .....3 ➔**CH42b** Yes 1
b. How many times have you been pregnant (including live births, still births, and abortions) since the birth of […] (NAME OF YOUNGEST CHILD) (NOT INCLUDING THIS PREGNANCY)	⌊_⌋⌊_⌋ **IF = 0 ➔c** **IF > 0 ➔**
d. After the birth of [YOUNGEST CHILD] how many live births do you have?	⌊_⌋⌊_⌋
e. After the birth of [YOUNGEST CHILD] how many still births/miscarriages did you have?	⌊_⌋⌊_⌋
c. Are you currently pregnant?	⌊_⌋ Yes..... 1 ➔ (ENTER "**1**") No ..... 3 ➔ (ENTER "**0**")

CH02a. CAPI CHECK: TOTAL OF PREGNANCIES (c + d + e) ⌊_⌋⌊_⌋ **IF > 0➔CH03**
IF = 0➔CH42b

NEW RESPONDENT OR PANEL RESPONDENT WITH NO CHILD AT CH00a

CH01b. CAPI CHECK: TRANSFER INFORMATION FROM SECTION BR:
a. NUMBER OF LIVE BIRTHS (BR15) AND
b. NUMBER OF STILL BIRTHS AND MISCARRIAGES (BR16)

a. NUMBER OF LIVE BIRTHS **(BR15)**	⌊_⌋⌊_⌋
b. NUMBER OF STILL BIRTHS AND MISCARRIAGES **(BR16)**	⌊_⌋⌊_⌋
c. Are you currently pregnant?	⌊_⌋ Yes..... 1 ➔ (ENTER "**1**") No ..... 3 ➔ (ENTER "**0**")

CH02b. CAPI CHECK: TOTAL OF PREGNANCIES (a+b+c) ⌊_⌋⌊_⌋ **IF > 0➔CH03**
IF = 0➔CH42b

SECTION CH (PREGNANCY HISTORY)

LIST ALL PREGNANCIES. FILL OUT ACCORDING TO EACH PREGNANCY'S OUTCOME. COMPLETE ALL COLUMNS IN CH05-CH17 BEFORE MOVING TO THE FIRST PREGNANCY AND CONTINUING.

CH03.	**CAPI CHECK: TOTAL OF COLUMNS TO BE FILLED OUT FROM CH02a/CH02b :** ⌊_⌋⌊_⌋

CH05. Chronological order of pregnancy's outcome	**[0 1]**	**[0 2]**	**[0 3]**	**[0 4]**
CH06. Classification of pregnancy's outcome	Is pregnant ..... 1 ➔**CH17** Still birth ..... 3 ➔**CH09** Miscarriage ..... 4 ➔**CH09** Live birth 2	Is pregnant..... 1 ➔**CH17** Still birth..... 3 ➔**CH09** Miscarriage..... 4 ➔**CH09** Live birth..... 2	Is pregnant ..... 1 ➔**CH17** Still birth ..... 3 ➔**CH09** Miscarriage ..... 4 ➔**CH09** Live birth 2	Is pregnant..... 1 ➔**CH17** Still birth..... 3 ➔**CH09** Miscarriage..... 4 ➔**CH09** Live birth..... 2
CH06a. Did pregnancy end in multiple birth?	Yes..... 1 No 3	Yes ..... 1 No..... 3	Yes..... 1 No 3	Yes ..... 1 No..... 3
CH07. Name of child: ..... **FILL 51 IF CHILD'S NAME ISN'T ON THE LIST FILL 52 IF CHILD HAS DIED.**	_____ ⌊_⌋⌊_⌋	_____ ⌊_⌋⌊_⌋	_____ ⌊_⌋⌊_⌋	_____ ⌊_⌋⌊_⌋
CH08. Is [...] a male or female?	Male ..... 1 Female..... 3	Male..... 1 Female..... 3	Male ..... 1 Female..... 3	Male..... 1 Female 3
CH09. What date was [...] born/you had a miscarriage? **(DAY/MON/YR)**	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ➔**CH17** DAY / MONTH / YEAR 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ➔**CH17** DAY / MONTH / YEAR 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ➔**CH17** DAY / MONTH / YEAR 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ➔**CH17** DAY / MONTH / YEAR 8. DON'T KNOW
CH10a. How old were you when [...] was born/you had a miscarriage?	⌊_⌋⌊_⌋ **Years**	⌊_⌋⌊_⌋ **Years**	⌊_⌋⌊_⌋ **Years**	⌊_⌋⌊_⌋ **Years**
CH10b. **CAPI CHECK: USE AGE TO ESTIMATE CHILD'S YEAR OF BIRTH. (BIRTH YEAR OF MOTHER PLUS AGE AT CHILD'S BIRTH/MISCARRIAGE)**	**Year** ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	**Year** ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	**Year** ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	**Year** ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
CH17. How far was/is the pregnancy when [...] was born/you had the miscariage/now?	⌊_⌋⌊_⌋ Month ..... 05 Weeks ..... 04 ➔**CH06 COLUMN 2 / CH11**	⌊_⌋⌊_⌋ Month..... 05 Weeks..... 04 ➔**CH06 COLUMN 3 / CH11**	⌊_⌋⌊_⌋ Month ..... 05 Weeks ..... 04 ➔**CH06 COLUMN 4 / CH11**	⌊_⌋⌊_⌋ Month ..... 05 Weeks ..... 04 ➔**CH06 SUPPLEMENT / CH11**

CH11.	**CAPI CHECK THE NUMBER OF COLUMNS FILLED OUT AGAINST CH03.**	**INCONSISTENT ..... 3 ➔CHECK AGAIN, UNTIL THE NUMBER OF COLUMNS = CH03** **CONSISTENT..... 1**

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH12.	**CAPI CHECK: CH09/CH10B** **3. PREGNANCY ENDED AFTER 2008** **1. PREGNANCY ENDED BEFORE 2009**	3 ➔**CH14a** 1	3 ➔**CH14a** 1	3 ➔**CH14a** 1	3 ➔**CH14a** 1
CH13.	**CAPI CHECK:** **3. CH06 = 1, 3, 4** **1. CH06 = 2 (LIVE BIRTH)**	3 ➔**CH12 KOLOM 2 /CH42** 1 ➔**CH25**	3 ➔**CH12 KOLOM 3 /CH42** 1 ➔**CH25**	3 ➔**CH12 KOLOM 4 /CH42** 1 ➔**CH25**	3 ➔**CH12 SUPPLEMENT /CH42** 1 ➔**CH25**
CH14a.	During the pregnancy, what if any complications you experienced?	Swelling of the feet or leg.....A Difficulty of vision during day.....B Difficulty of vision during night.....C Vaginal bleeding .....D Fever .....E Convulsion and fainting.....F Labor before 9 months.....G NO COMPLICATIONS..... W	Swelling of the feet or leg..... A Difficulty of vision during day..... B Difficulty of vision during night..... C Vaginal bleeding ..... D Fever ..... E Convulsion and fainting..... F Labor before 9 months..... G NO COMPLICATIONS..... W	Swelling of the feet or leg..... A Difficulty of vision during day..... B Difficulty of vision during night..... C Vaginal bleeding ..... D Fever ..... E Convulsion and fainting..... F Labor before 9 months..... G NO COMPLICATIONS..... W	Swelling of the feet or leg..... A Difficulty of vision during day..... B Difficulty of vision during night..... C Vaginal bleeding ..... D Fever ..... E Convulsion and fainting..... F Labor before 9 months..... G NO COMPLICATIONS..... W
CH14.	During the pregnancy have/did you ever have a pregnancy check-up?	No ..... 3 ➔**CH18** Yes..... 1	No ..... 3 ➔**CH18** Yes 1	No ..... 3 ➔**CH18** Yes..... 1	No ..... 3 ➔**CH18** Yes 1
CH15.	Where do/did you go for pregnancy check-ups? **(CIRCLE ALL THAT APPLY)** A. Public hospital ..... B. Private hospital..... C. Community health center (Puskesmas) .... D. Village Delivery Post (POLINDES) ..... E. Clinic/office of physician ..... F. Clinic/office of midwife ..... G. Office of traditional midwife..... I. Posyandu ..... J. Specialist..... V. Other.....	A B C D E F G I J V _____	A B C D E F G I J V _____	A B C D E F G I J V _____	A B C D E F G I J V _____

SECTION CH (PREGNANCY HISTORY)

	[0 1]	[0 2]	[0 3]	[0 4]
CH15a. What is the name and location of the provider you visited? **(IF MORE THAN 1, ASK ABOUT PROVIDER VISITED MOST FREQUENTLY.)** 3. Same as residence 8. DON'T KNOW	⌊_⌋ **(CODE CH15)** Name 8. DON'T KNOW 1._____ Address 8. DON'T KNOW 1._____ Loc. Note_____ **A. Vill:** 1. _____ 3. Same 8. DON'T KNOW **B. Kec:** 1. _____ 3. Same 8. DON'T KNOW **C. Kab:** 1. _____ 3. Same 8. DON'T KNOW **D. Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE COMFAS.** ⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋	⌊_⌋ **(CODE CH15)** Name 8. DON'T KNOW 1._____ Address 8. DON'T KNOW 1._____ Loc. Note_____ **A. Vill:** 1. _____ 3. Same 8. DON'T KNOW **B. Kec:** 1. _____ 3. Same 8. DON'T KNOW **C. Kab:** 1. _____ 3. Same 8. DON'T KNOW **D. Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE COMFAS.** ⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋	⌊_⌋ **(CODE CH15)** Name 8. DON'T KNOW 1._____ Address 8. DON'T KNOW 1._____ Loc. Note_____ **A. Vill:** 1. _____ 3. Same 8. DON'T KNOW **B. Kec:** 1. _____ 3. Same 8. DON'T KNOW **C. Kab:** 1. _____ 3. Same 8. DON'T KNOW **D. Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE COMFAS.** ⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋	⌊_⌋ **(CODE CH15)** Name 8. DON'T KNOW 1._____ Address 8. DON'T KNOW 1._____ Loc. Note_____ **A. Vill:** 1. _____ 3. Same 8. DON'T KNOW **B. Kec:** 1. _____ 3. Same 8. DON'T KNOW **C. Kab:** 1. _____ 3. Same 8. DON'T KNOW **D. Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE COMFAS.** ⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋

HHID: ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **PID:** ⌊_⌋⌊_⌋

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH16a.	During the first 3 months of your pregnancy, how many visits did you make for prenatal care?	1. ⌊_⌋⌊_⌋ Visits	1. ⌊_⌋⌊_⌋ Visits	1. ⌊_⌋⌊_⌋ Visits	1. ⌊_⌋⌊_⌋ Visits
CH16b.	During the second 3 months of your pregnancy, months 4 to 6, how many visits did you make for prenatal care?	1. ⌊_⌋⌊_⌋ Visits 6. Not yet in 2nd trimester	1. ⌊_⌋⌊_⌋ Visits 6. Not yet in 2nd trimester	1. ⌊_⌋⌊_⌋ Visits 6. Not yet in 2nd trimester	1. ⌊_⌋⌊_⌋ Visits 6. Not yet in 2nd trimester
CH16c.	During the third 3 months of your pregnancy, months 7 to 9, how many visits did you make for prenatal care?	1. ⌊_⌋⌊_⌋ Visits 6. Not yet in 3rd trimester	1. ⌊_⌋⌊_⌋ Visits 6. Not yet in 3rd trimester	1. ⌊_⌋⌊_⌋ Visits 6. Not yet in 3rd trimester	1. ⌊_⌋⌊_⌋ Visits 6. Not yet in 3rd trimester
CH16d.	At any time during your pregnancy, did you receive the following services?	1. Yes 3. No 8. DON'T KNOW	1. Yes 3. No 8. DON'T KNOW	1. Yes 3. No 8. DON'T KNOW	1. Yes 3. No 8. DON'T KNOW
	a. Weight	a. 1. 3. 8.	a. 1. 3. 8.	a. 1. 3. 8.	a. 1. 3. 8.
	b. Height	b. 1. 3. 8.	b. 1. 3. 8.	b. 1. 3. 8.	b. 1. 3. 8.
	c. Blood pressure	c. 1. 3. 8.	c. 1. 3. 8.	c. 1. 3. 8.	c. 1. 3. 8.
	d. Blood test for hemoglobin	d. 1. 3. 8.	d. 1. 3. 8.	d. 1. 3. 8.	d. 1. 3. 8.
	e. Measure of height of fetus	e. 1. 3. 8.	e. 1. 3. 8.	e. 1. 3. 8.	e. 1. 3. 8.
	f. Listen to fetal heartbeat	f. 1. 3. 8.	f. 1. 3. 8.	f. 1. 3. 8.	f. 1. 3. 8.
	g. Internal Exam	g. 1. 3. 8.	g. 1. 3. 8.	g. 1. 3. 8.	g. 1. 3. 8.
	h. Measurement of hips	h. 1. 3. 8.	h. 1. 3. 8.	h. 1. 3. 8.	h. 1. 3. 8.
CH16e.	At any time in your pregnancy did you receive an injection of TT to keep the baby from getting tetanus or convulsions at birth?	Yes .....1 No .....3 DON'T KNOW 8	Yes .....1 No .....3 DON'T KNOW 8	Yes .....1 No .....3 DON'T KNOW 8	Yes .....1 No .....3 DON'T KNOW 8
CH16f.	At any time during your pregnancy did you take iron pills?	No .....3 ➔**CH18** Yes .....1 DON'T KNOW 8	No .....3 ➔**CH18** Yes .....1 DON'T KNOW 8	No .....3 ➔**CH18** Yes .....1 DON'T KNOW 8	No .....3 ➔**CH18** Yes .....1 DON'T KNOW 8
CH16g.	How many iron pills did you take during your pregnancy?	1. ⌊_⌋⌊_⌋⌊_⌋ pills 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋ pills 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋ pills 8. DON'T KNOW	1. ⌊_⌋⌊_⌋⌊_⌋ pills 8. DON'T KNOW
CH18.	**CAPI CHECK :** **1. CH06 = 1 (STILL PREGNANT).....** **3. CH06 = 2 OR 3 .....** **2. CH06 = 4 .....**	**1. ➔CH12 COLUMN 2 / CH42b** **3. ➔ CH18a** **2.**	**1. ➔CH12 COLUMN 3 / CH42b** **3. ➔ CH18a** **2.**	**1. ➔CH12 COLUMN 4 / CH42b** **3. ➔ CH18a** **2.**	**1. ➔CH12 SUPPLEMENT / CH42b** **3. ➔ CH18a** **2.**
CH18aa.	What were the reasons of your miscarriage?	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other..... **CH12 COLUMN 2 / CH42b**	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other..... **CH12 COLUMN3 / CH42b**	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other..... **CH12 COLUMN4 / CH42b**	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other..... **CH12 SUPPLEMENT / CH42b**
CH18a.	At the time that you gave birth to [...], were you in labor for more than one day and night?	Yes .....1 No .....3 DON'T KNOW 8	Yes .....1 No .....3 DON'T KNOW 8	Yes .....1 No .....3 DON'T KNOW 8	Yes .....1 No .....3 DON'T KNOW 8

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH18b.	At the time that you gave birth to […] were you experiencing above normal bleeding?	Yes .....1 No 3	Yes .....1 No 3	Yes .....1 No 3	Yes .....1 No 3
CH18c.	At the time that you gave birth to […] were you experiencing high fever?	Yes .....1 No 3	Yes .....1 No 3	Yes .....1 No 3	Yes .....1 No 3
CH19.	Where did you give birth to [...]?				
	09. Own house	09 **➔CH20**	09 **➔CH20**	09 **➔CH20**	09 **➔CH20**
	10. Family Members House.....	10 **➔CH20**	10 **➔CH20**	10 **➔CH20**	10 **➔CH20**
	01. Public hospital	01	01	01	01
	02. Private hospital.....	02	02	02	02
	03. DeliveryHospital.....	03	03	03	03
	04. Community health center	04	04	04	04
	05.Village Delivery Post.....	05	05	05	05
	06. Clinic/office of physician	06	06	06	06
	07. Clinic/office of midwife	07	07	07	07
	08. Office/house of trad. midwife	08	08	08	08
	95. Other	95_____	95_____	95 _____	95 _____

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH19a.	What is the name and location of the place you delivered [...]? 1. Specify 3. Same as residence 8. DON'T KNOW	Name 8. DON'T KNOW 1._____ Address 8. DON'T KNOW 1._____ Loc. Note_____ **A. Vill:** 1. _____ 3. Same 8. DON'T KNOW **B. Kec:** 1. _____ 3. Same 8. DON'T KNOW **C. Kab:** 1. _____ 3. Same 8. DON'T KNOW **D. Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE COMFAS.** ⌊⌊⌊⌊⌋⌊⌋⌊⌊⌊⌊⌋	Name 8. DON'T KNOW 1._____ Address 8. DON'T KNOW 1._____ Loc. Note_____ **A. Vill:** 1. _____ 3. Same 8. DON'T KNOW **B. Kec:** 1. _____ 3. Same 8. DON'T KNOW **C. Kab:** 1. _____ 3. Same 8. DON'T KNOW **D. Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE COMFAS.** ⌊⌊⌊⌊⌋⌊⌋⌊⌊⌊⌊⌋	Name 8. DON'T KNOW 1._____ Address 8. DON'T KNOW 1._____ Loc. Note_____ **A. Vill:** 1. _____ 3. Same 8. DON'T KNOW **B. Kec:** 1. _____ 3. Same 8. DON'T KNOW **C. Kab:** 1. _____ 3. Same 8. DON'T KNOW **D. Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE COMFAS.** ⌊⌊⌊⌊⌋⌊⌋⌊⌊⌊⌊⌋	Name 8. DON'T KNOW 1._____ Address 8. DON'T KNOW 1._____ Loc. Note_____ **A. Vill:** 1. _____ 3. Same 8. DON'T KNOW **B. Kec:** 1. _____ 3. Same 8. DON'T KNOW **C. Kab:** 1. _____ 3. Same 8. DON'T KNOW **D. Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE COMFAS.** ⌊⌊⌊⌊⌋⌊⌋⌊⌊⌊⌊⌋
CH20.	Who provided care during [...]'s birth? **(CIRCLE ALL THAT APPLY)**	NOBODY ..... W➔**CH20c** Physician ..... A Private midwife ..... B Village midwife ..... C Nurse ..... D Traditional birth attendant E Family ..... H Other V	NOBODY ..... W➔**CH20c** Physician ..... A Private midwife ..... B Village midwife ..... C Nurse ..... D Traditional birth attendant E Family ..... H Other V	NOBODY ..... W➔**CH20c** Physician ..... A Private midwife ..... B Village midwife ..... C Nurse ..... D Traditional birth attendant E Family ..... H Other V	NOBODY ..... W➔**CH20c** Physician ..... A Private midwife ..... B Village midwife ..... C Nurse ..... D Traditional birth attendant E Family ..... H Other V
CH20c.	What factors led you to choose this delivery site/attendant? **(CIRCLE ALL THAT APPLY)**	Cheap ..... A Nearby ..... B Feel Safe ..... C More Comfortable ..... D Modern Service ..... E Habit ..... G Family reason ..... H Few choices ..... I Medical reasons (abnormality) ..... K Too early delivery ..... L Recommended by doctor/midwife ..... M Other _____ V	Cheap ..... A Nearby ..... B Feel Safe ..... C More Comfortable ..... D Modern Service ..... E Habit ..... G Family reason ..... H Few choices ..... I Medical reasons (abnormality) ..... K Too early delivery ..... L Recommended by doctor/midwife ..... M Other _____ V	Cheap ..... A Nearby ..... B Feel Safe ..... C More Comfortable ..... D Modern Service ..... E Habit ..... G Family reason ..... H Few choices ..... I Medical reasons (abnormality) ..... K Too early delivery ..... L Recommended by doctor/midwife ..... M Other _____ V	Cheap ..... A Nearby ..... B Feel Safe ..... C More Comfortable ..... D Modern Service ..... E Habit ..... G Family reason ..... H Few choices ..... I Medical reasons (abnormality) ..... K Too early delivery ..... L Recommended by doctor/midwife ..... M Other _____ V

HHID: ⌊⌊⌊⌋⌊⌊⌋⌊⌊⌋⌊⌊⌋⌊⌊⌋ **PID:** ⌊⌊⌋

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH20g.	How much did you spend on care during the delivery? (out of pocket)	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW
CH20ga.	Did you use insurance to pay for all or some of this visit?	No .....3 ➔**CH20h** Yes 1	No .....3 ➔**CH20h** Yes 1	No .....3 ➔**CH20h** Yes 1	No .....3 ➔**CH20h** Yes 1
CH20gb.	What insurance did you use?	*Askes* .....01 *Jamsostek* .....02 Employer provided health benefits ..03 Private health insurance .....04 Savings related insurance .....05 *SKTM* .....06 Jamkesmas .....07 Jamkesda .....08 JKN .....09 Jampersal .....10 Other, mention 95	*Askes* .....01 *Jamsostek* .....02 Employer provided health benefits ..03 Private health insurance .....04 Savings related insurance .....05 *SKTM* .....06 Jamkesmas .....07 Jamkesda .....08 JKN .....09 Jampersal .....10 Other, mention 95	*Askes* .....01 *Jamsostek* .....02 Employer provided health benefits ..03 Private health insurance .....04 Savings related insurance .....05 *SKTM* .....06 Jamkesmas .....07 Jamkesda .....08 JKN .....09 Jampersal .....10 Other, mention 95	*Askes* .....01 *Jamsostek* .....02 Employer provided health benefits ..03 Private health insurance .....04 Savings related insurance .....05 *SKTM* .....06 Jamkesmas .....07 Jamkesda .....08 JKN .....09 Jampersal .....10 Other, mention 95
CH20gc.	How much is the total cost of delivery, including those that will be paid or have already been paid by insurance??	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW
CH20gd.	Do you expect to get reimbursement from insurance?	**3.** No ➔ **CH20h** **1.** Yes	**3.** No ➔ **CH20h** **1.** Yes	**3.** No ➔ **CH20h** **1.** Yes	**3.** No ➔ **CH20h** **1.** Yes
CH20ge.	How much do you expect to be reimbursed?	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW	1. ⌊⌊⌋,⌊⌊⌋⌊⌋⌋,⌊⌊⌋⌊⌋⌋ Rp. 8. DON'T KNOW
CH20h.	In the first 40 days after the baby was born, did you receive any follow-up care from the person who delivered the baby?	Yes .....1 No 3	Yes .....1 No 3	Yes .....1 No 3	Yes .....1 No 3
CH21.	**CAPI CHECK:** **3. CH06 = 3 .....** **1. CH06 = 2 (LIVE BIRTH) .....**	**3 ➔ CH12 COLUMN 2 /CH42b** **1**	**3 ➔ CH12 COLUMN 3 /CH42b** **1**	**3 ➔ CH12 COLUMN 4 /CH42b** **1**	**3 ➔ CH12 SUPPLEMENT/CH42b** **1**
CH22.	In your opinion, compared with other infants, was [...] bigger, smaller or similar in size?	Much bigger ..... 1 Bigger ..... 2 Similar ..... 3 Smaller ..... 4 Much smaller ..... 5 DON'T KNOW 8	Much bigger ..... 1 Bigger ..... 2 Similar ..... 3 Smaller ..... 4 Much smaller ..... 5 DON'T KNOW 8	Much bigger ..... 1 Bigger ..... 2 Similar ..... 3 Smaller ..... 4 Much smaller ..... 5 DON'T KNOW 8	Much bigger ..... 1 Bigger ..... 2 Similar ..... 3 Smaller ..... 4 Much smaller ..... 5 DON'T KNOW 8
CH23.	Was [...] weighed right after birth?	No .....3 ➔**CH24a** Yes 1	No .....3 ➔**CH24a** Yes 1	No .....3 ➔**CH24a** Yes 1	No .....3 ➔**CH24a** Yes 1
CH24.	To be exact, how many kilograms was [...]'s birth weight?	⌊⌋.⌊⌊⌋ Kg	⌊⌋.⌊⌊⌋ Kg	⌊⌋.⌊⌊⌋ Kg	⌊⌋.⌊⌊⌋ Kg
CH24a.	Did you ever breastfeed [...] even for a short period?	No .....3 ➔**CH25** Yes 1	No .....3 ➔**CH25** Yes 1	No .....3 ➔**CH25** Yes 1	No .....3 ➔**CH25** Yes 1

SECTION CH (PREGNANCY HISTORY)

	[0 1]	[0 2]	[0 3]	[0 4]
CH24c. How old was [...] when he/she was first fed water (plain, sugared, honey, ice water, tea)?	01. ⌊⌊⌋⌋ 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. ⌊⌊⌋⌋ 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. ⌊⌊⌋⌋ 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. ⌊⌊⌋⌋ 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed
CH24d. What age was [...] when he/she was regularly (on a daily basis) fed other foods/beverages besides breast milk?	01. ⌊⌊⌋⌋ 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. ⌊⌊⌋⌋ 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. ⌊⌊⌋⌋ 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. ⌊⌊⌋⌋ 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed
CH24e. For how many months did you breastfeed [...]?	96. Still Breastfeeding➔**CH25** 05. ⌊⌊⌋⌋ Months 88. Died While Breastfeeding	96. Still Breastfeeding➔**CH25** 05. ⌊⌊⌋⌋ Months 88. Died While Breastfeeding	96. Still Breastfeeding➔**CH25** 05. ⌊⌊⌋⌋ Months 88. Died While Breastfeeding	96. Still Breastfeeding➔**CH25** 05. ⌊⌊⌋⌋ Months 88. Died While Breastfeeding
CH24f. Why did you stop breastfeeding [...]? **CIRCLE ALL THAT APPLY**				
A. Mother sick/weak	A	A	A	A
B. Sore nipples	B	B	B	B
C. Work	C	C	C	C
D. Inconvenience	D	D	D	D
E. Take contraceptive pills	E	E	E	E
F. Want to get pregnant	F	F	F	F
G. Was pregnant again	G	G	G	G
H. Insufficient breast milk	H	H	H	H
I. Child's death	I	I	I	I
J. Child's sickness	J	J	J	J
K. Child in incubator	K	K	K	K
L. Child did not develop	L	L	L	L
M. Child did not want	M	M	M	M
N. Child lived separately	N	N	N	N
O. Dr/nurse's recommendations	O	O	O	O
P. Husband's objections	P	P	P	P
Q. Child's inability to suck	Q	Q	Q	Q
R. Child was big enough	R	R	R	R
V. Other	V _____	V _____	V _____	V _____
CH25. Is [...] still alive?	Yes ..... 1 ➔ **CH27** No 3	Yes ..... 1 ➔ **CH27** No 3	Yes ..... 1 ➔ **CH27** No 3	Yes ..... 1 ➔ **CH27** No 3

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH26.	How old was [...] when he/she died?	⌊_⌋⌊_⌋ Days ..... 03 weeks ..... 04 Months ..... 05 Years 06	⌊_⌋⌊_⌋ Days ..... 03 weeks ..... 04 Months ..... 05 Years 06	⌊_⌋⌊_⌋ Days ..... 03 weeks ..... 04 Months ..... 05 Years 06	⌊_⌋⌊_⌋ Days ..... 03 weeks ..... 04 Months ..... 05 Years 06
CH27.	**CAPI CHECK: IS [...] LISTED IN THE HH ROSTER?**				
	1. YES, AR00 = ⌊_⌋⌊_⌋ (PID).....	**1** ⌊_⌋⌊_⌋	**1** ⌊_⌋⌊_⌋	**1** ⌊_⌋⌊_⌋	**1** ⌊_⌋⌊_⌋
	2. YES, BUT DIED OR NOT LIVE IN HOUSEHOLD, AR00.....	**2** ⌊_⌋⌊_⌋	**2** ⌊_⌋⌊_⌋	**2** ⌊_⌋⌊_⌋	**2** ⌊_⌋⌊_⌋
	3. NO	**3**	**3**	**3**	**3**
CH27x.	**CAPI CHECK CH00:**				
	1. PANEL WITH CHILD ROSTER 3. PANEL WITHOUT CHILD ROSTER OR NEW	**1 → CH12 COLUMN 2 / CH42b 3**	**1 → CH12 COLUMN 3 / CH42b 3**	**1 → CH12 COLUMN 4 / CH42b 3**	**1 → CH12 SUPPLEMENT / CH42b 3**
CH27b.	**CAPI CHECK CH25 AND CH27:**				
	1. ALIVE, IN HH (CH27=1) ..... 3. ALIVE NOT IN HH (CH27=2 OR 3 AND CH25=1) ..... 5. DEAD (CH25=3)	**1 → CH12 COLUMN 2 / CH42b 3 5**	**1 → CH12 COLUMN 3 / CH42b 3 5**	**1 → CH12 COLUMN 4 / CH42b 3 5**	**1 → CH12 SUPPLEMENT / CH42b 3 5**
CH28a.	Is/was […] now/at the time […] died 15 years old or older?	No ..... 3 → **CH12 COLUMN 2 / CH42b** Yes 1	No ..... 3 → **CH12 COLUMN 3 / CH42b** Yes 1	No ..... 3 → **CH12 COLUMN 4 / CH42b** Yes 1	No ..... 3 → **CH12 SUPPLEMENT / CH42b** Yes 1
CH28b.	**CAPI CHECK CH25 STILL ALIVE?**	Yes ..... 1 → **CH30a** No 3	Yes ..... 1 → **CH30a** No 3	Yes ..... 1 → **CH30a** No 3	Yes ..... 1 → **CH30a** No 3
CH29a.	Did [...] die within the last 12 months?	No ..... 3 → **CH12 COLUMN 2 / CH42b** Yes 1	No ..... 3 → **CH12 COLUMN 3 / CH42b** Yes 1	No ..... 3 → **CH12 COLUMN 4 / CH42b** Yes 1	No ..... 3 → **CH12 SUPPLEMENT / CH42b** Yes 1
CH29b.	Was [...] living outside the HH at the time of death?	No ..... 3 → **CH12 COLUMN 2 / CH42b** Yes 1	No ..... 3 → **CH12 COLUMN 3 / CH42b** Yes 1	No ..... 3 → **CH12 COLUMN 4 / CH42b** Yes 1	No ..... 3 → **CH12 SUPPLEMENT / CH42b** Yes 1
CH30a.	Marital status (now/at death):				
	01. Single	01	01	01	01
	02. Married	02	02	02	02
	03. Separated	03	03	03	03
	04. Divorced	04	04	04	04
	05. Widow/widower	05	05	05	05
	98. DON'T KNOW	98	98	98	98

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH31a.	Highest education level attained by non-householder: 01. No school/Not yet in School 02. Elementary 03. Jr. Hi General 04. Jr. Hi Vocational 05. Sr. Hi General 06. Sr. Hi Vocational 60. College, D1, D2, D3 61. University (Bachelors) 62. University (Masters) 63. University (PhD) 11. Adult Education A 12. Adult Education B 13. Open University 14. Islamic School (Pesantren) 15. Adult Education C 17. School for the Disabled 70. Madrasah, General 72. Islamic Elementary School (Madrasah Ibtidaiyah) 73. Islamic JuniorHigh School (Madrasah Tsanawiyah) 74. Islamic Senior High School (Madrasah Aliyah) 90. Kindergarten 98. DON'T KNOW 10. Other:	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 70 72 73 74 90 98 95 _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 70 72 73 74 90 98 95 _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 70 72 73 74 90 98 95 _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 70 72 73 74 90 98 95 _____
CH32a.	Highest grade completed by non-householder: 00. Did not complete 1st class..... 01. 1 ..... 02. 2 ..... 03. 3 ..... 04. 4 ..... 05. 5 ..... 06. 6 ..... 07. Graduated ..... 96. NO SCHOOL ..... 98. DON'T KNOW	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98
CH32b.	When […] were twelve years old were you and your spouse/partner married?	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA
CH32c.	Were […] living with you when […] were twelve ?	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH32d.	What was your primary activity when […] was 12 years old ? 02. Job searching 03. Attending school 04. Housekeeping 05. Retired 06. Stay at home/unemployed 07. Sick/disabled 98. DON'T KNOW 01. Working/trying to get work/ helping to earn income 95. Other:	 02 03 04 05 06 07 98 01 95 _____ **→CH37a**	 02 03 04 05 06 07 98 01 95 _____ **→CH37a**	 02 03 04 05 06 07 98 01 95 _____ **→CH37a**	 02 03 04 05 06 07 98 01 95 _____ **→CH37a**
CH33a.	Where does/did [...] live now/before his/her death?	**00 → CH12 COLUMN 2 / CH42b** └┴┴┘ _____	**00 → CH12 COLUMN 3 / CH42b** └┴┴┘ _____	**00 → CH12 COLUMN4 / CH42b** └┴┴┘ _____	**00 → CH12 SUPPLEMENT / CH42b** └┴┴┘ _____
CH34a.	What is/was [...]'s primary activity now/before his/her death? 02. Job searching 03. Attending school 04. Housekeeping 05. Retired 06. Stay at home/unemployed 07. Sick/disabled 98. DON'T KNOW 01. Working/trying to get work/ helping to earn income 95. Other:	 02 **→CH37a** 03 **→CH37a** 04 **→CH37a** 05 **→CH37a** 06 **→CH37a** 07 **→CH37a** 98 **→CH37a** 01 95 _____ **→CH37a**	 02 **→CH37a** 03 **→CH37a** 04 **→CH37a** 05 **→CH37a** 06 **→CH37a** 07 **→CH37a** 98 **→CH37a** 01 95 _____ **→CH37a**	 02 **→CH37a** 03 **→CH37a** 04 **→CH37a** 05 **→CH37a** 06 **→CH37a** 07 **→CH37a** 98 **→CH37a** 01 95 _____ **→CH37a**	 02 **→CH37a** 03 **→CH37a** 04 **→CH37a** 05 **→CH37a** 06 **→CH37a** 07 **→CH37a** 98 **→CH37a** 01 95 _____ **→CH37a**
CH35a.	What is/was [...]'s work status now/before his/her death? 01. Self-employed 02. Self-employed assisted other family members/temporary employees 03. Self-employed with permanent employees 04. Government worker/employee 05. Private worker/employee 06. Unpaid family worker 98. DON'T KNOW	 01 02 03 04 05 06 98	 01 02 03 04 05 06 98	 01 02 03 04 05 06 98	 01 02 03 04 05 06 98

CODE CH33a:

000.	In this household	018.	Lampung	060.	Kalimantan	081.	Maluku	121.	Yaman
001.	In the same village	019.	Bangka Belitung	061.	West Kalimantan	082.	North Maluku	122.	Saudi Arabia
002.	In the same subdistrict	020.	Riaulslands	062.	Central Kalimantan	090.	Irian	123.	Kuwait
003.	In the same district	030.	Java	063.	South Kalimantan	091.	West Irian Jaya	124.	United Arab Emirates
004.	In the same province	031.	DKI Jakarta	064.	East Kalimantan	094.	Papua	131.	Argentina
010.	Sumatera	032.	West Java	070.	Sulawesi	101.	Malaysia	132.	USA
011.	Nanggroe Aceh Darussalam	033.	Central Java	071.	North Sulawesi	102.	Singapore	141.	Australia
012.	North Sumatra	034.	D.I. Yogyakarta	072.	Central Sulawesi	103.	Brunei Darussalam	151.	Holland
013.	West Sumatra	035.	East Java	073.	South Sulawesi	104.	Hongkong	152.	England
014.	Riau	036.	Banten	074.	Southeast Sulawesi	105.	Japan	998.	DON'T KNOW
015.	Jambi	051.	Bali	075.	Gorontalo	106.	South Korea	995.	Other _____
016.	South Sumatra	052.	West Nusa Tenggara	076.	West Sulawesi	107.	Taiwan		
017.	Bengkulu	053.	East Nusa Tenggara			108.	Timor Leste		

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH36b.	What is/was [...]'s primary duty now/before his/her death?	_____	_____	_____	_____
CH37a.	How often do/did you meet with [...] during the past year now/before his/her death?				
	5. Everyday	5 ➔**CH38a**	5 ➔**CH38a**	5 ➔**CH38a**	5 ➔**CH38a**
	4. At least once a week	4	4	4	4
	3. At least once a month	3	3	3	3
	2. At least once a year	2	2	2	2
	1. Never	1	1	1	1
CH37b.	How often do/did you have a telephone contact with [...] during the past year now/before his/her death?				
	5. Everyday	5 ➔**CH38a**	5 ➔**CH38a**	5 ➔**CH38a**	5 ➔**CH38a**
	4. At least once a week	4	4	4	4
	3. At least once a month	3	3	3	3
	2. At least once a year	2	2	2	2
	1. Never	1	1	1	1
CH37c.	How often do/did you have a contact with [...] through email and text messages during the past year now/before his/her death?				
	1. Never	1	1	1	1
	2. At least once a year	2	2	2	2
	3. At least once a month	3	3	3	3
	4. At least once a week	4	4	4	4
	5. Everyday	5	5	5	5
CH38a.	In the past 12 months, did you or your husband ever provide help to [...] in the form of money, goods, or services?	UNWILLING TO ANSWER 7➔ **CH40a** No 3➔ **CH40a** Yes 1	UNWILLING TO ANSWER 7➔ **CH40a** No 3➔ **CH40a** Yes 1	UNWILLING TO ANSWER 7➔ **CH40a** No 3➔ **CH40a** Yes 1	UNWILLING TO ANSWER 7➔ **CH40a** No 3➔ **CH40a** Yes 1

SECTION CH (PREGNANCY HISTORY)

		[0 1]	[0 2]	[0 3]	[0 4]
CH39a.	What type of help did you provide to [...] in the past 12 months and what is the value? A. Money, loan, tuition, health care costs D. Food stuffs or other goods G. Chores, child care, help when ill 03. Days 05. Months H Helping family business 03. Days 05. Months V. Other:.....	(CIRCLE ALL THAT APPLY) Rupiah A. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ D. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ G. ⌊⌊⌋ 03. DAYS 05. MONTHS H. ⌊⌊⌋ 03. DAYS 05. MONTHS V. _____ ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋	(CIRCLE ALL THAT APPLY) Rupiah A. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ D. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ G. ⌊⌊⌋ 03. DAYS 05. MONTHS H. ⌊⌊⌋ 03. DAYS 05. MONTHS V. _____ ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋	(CIRCLE ALL THAT APPLY) Rupiah A. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ D. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ G. ⌊⌊⌋ 03. DAYS 05. MONTHS H. ⌊⌊⌋ 03. DAYS 05. MONTHS V. _____ ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋	(CIRCLE ALL THAT APPLY) Rupiah A. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ D. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ G. ⌊⌊⌋ 03. DAYS 05. MONTHS H. ⌊⌊⌋ 03. DAYS 05. MONTHS V. _____ ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋
CH40a.	In the past 12 months, did you or your husband ever receive help from [...] in the form of money, goods, or services?	UNWILLING TO ANSWER..... 7➔**CH12 COLUMN 2 / CH42b** No..... 3➔**CH12 COLUMN 2 / CH42b** Yes 1	UNWILLING TO ANSWER..... 7➔**CH12 COLUMN 3 / CH42b** No..... 3➔**CH12 COLUMN 3 / CH42b** Yes 1	UNWILLING TO ANSWER..... 7➔**CH12 COLUMN 4 / CH42b** No..... 3➔**CH12 COLUMN 4 / CH42b** Yes 1	UNWILLING TO ANSWER . 7➔**CH12 SUPPLEMENT / CH42b** No ..... 3➔**CH12 SUPPLEMENT/ CH42b** Yes..... 1
CH41a.	What type of help did you provide to [...] in the past 12 months and what is the value? A. Money, loan, tuition, health care costs D. Food stuffs or other goods G. Chores, child care, help when ill 03. Days 05. Months H. Helping family business 03. Days 05. Months V. Other:.....	(CIRCLE ALL THAT APPLY) Rupiah A. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ D. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ G. ⌊⌊⌋ 03. DAYS 05. MONTHS H. ⌊⌊⌋ 03. DAYS 05. MONTHS V. _____ ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋	(CIRCLE ALL THAT APPLY) Rupiah A. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ D. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ G. ⌊⌊⌋ 03. DAYS 05. MONTHS H. ⌊⌊⌋ 03. DAYS 05. MONTHS V. _____ ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋	(CIRCLE ALL THAT APPLY) Rupiah A. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ D. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ G. ⌊⌊⌋ 03. DAYS 05. MONTHS H. ⌊⌊⌋ 03. DAYS 05. MONTHS V. _____ ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋	(CIRCLE ALL THAT APPLY) Rupiah A. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ D. ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋ G. ⌊⌊⌋ 03. DAYS 05. MONTHS H. ⌊⌊⌋ 03. DAYS 05. MONTHS V. _____ ⌊⌊⌊⌋,⌊⌊⌊⌋,⌊⌊⌊⌋

CH42b.	Do you have adopted/step children over 15 years old that live outside the household, or that have died within the last 12 months and lived outside the household at the time of death?	No ..... 3 ➔**SECTION EP** Yes, with preprinted BX..... 1 ➔**INSERT PREPRINTED BX** Yes, without preprinted BX..... 2

SECTION BX (NON-CO RESIDENT ADOPTED CHILD ROSTER)

(Note: Interviewers asked questions BX64-BX90 sequentially for one child before moving down a row to the next child listed in BX63b).

	BX63a.	BX63b.	BX78.	BX79.	BX80.	BX81.	BX82a.	BX83a.	BX84.	BX84a.	BX84b.
		(NAME)	When […] twelve years old, you and your husband married?	When […] twelve years old, with whom did […] live?	What is/was [ ]'s primary activity now/before his/her death?	What is/was […]'s work status now/before his/her death?	What is/was [ ]'s type of work now/before his/her death?	INTERVIEWER CHECK BX65 AND BX65a: […] STILL ALIVE?	How often do/did you meet with [ ] during the past year now/before his/her death?	How often do/did you have contact with [ ] by telephone during the past year now/before his/her death?	How often do/did you have contact with [ ] by mail, sms, email/chatting during the past year now/before his/her death?
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BX83a** 01 95 _____	⌊_⌋⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ➘ **8** ➘ **BX90x / EP**	5➔**BX87a** 1 2 3 4	5➔**BX87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BX83a** 01 95 _____	⌊_⌋⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ➘ **8** ➘ **BX90x / EP**	5➔**BX87a** 1 2 3 4	5➔**BX87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BX83a** 01 95 _____	⌊_⌋⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ➘ **8** ➘ **BX90x / EP**	5➔**BX87a** 1 2 3 4	5➔**BX87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BX83a** 01 95 _____	⌊_⌋⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ➘ **8** ➘ **BX90x / EP**	5➔**BX87a** 1 2 3 4	5➔**BX87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BX83a** 01 95 _____	⌊_⌋⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ➘ **8** ➘ **BX90x / EP**	5➔**BX87a** 1 2 3 4	5➔**BX87a** 1 2 3 4	1 2 3 4 5

CODES FOR BX79:
1. With Father and mother
2. With Father only
3. With Mother only
4. Not with father and mother

CODES FOR BX80:
01. Working/trying to get work/helping to earn income
02. Job searching
03. Attending school
04. Housekeeping
05. Retired
06. Stay at home
07. Sick/Disabled
98. DON'T KNOW
95. Other_____

CODES FOR BX81:
01. Self-employed
02. Self-employed assisted other family members/temporary employees
03. Self-employed with permanent employees
04. Government worker/employee
05. Private worker/employee
06. Unpaid family worker
07. Casual worker in agriculture
08. Casual worker in non-agriculture
98. DON'T KNOW

CODES FOR BX83a:
1. Still Alive
3. Has died in the last 12 months
5. Has died more than 12 months ago
8. DON'T KNOW

CODES FOR BX84, BX84a, BX84b:
1. Never
2. At least once a year
3. At least once a month
4. At least once a week
5. Everyday

SECTION BX (NON-CO RESIDENT ADOPTED CHILD ROSTER)

(Note: Interviewers asked questions BX64-BX90 sequentially for one child before moving down a row to the next child listed in BX63b).

	BX63a.	BX63b.	BX87a.	BX88.	BX89a.	BX90.
		(NAME)	In the past 12 months, did you **provide** assistance to [...] in the form of money, goods, or services?	**What type of assistance did you provide to […] and what is the value?** (CIRCLE AND FILL ALL THAT APPLY)	In the past 12 months, did you **receive** assistance from [...] in the form of money, goods, or services?	**What type of assistance did you receive to […] and what is the value?** (CIRCLE AND FILL ALL THAT APPLY)
			7 ➔**BX89a** 3 ➔**BX89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BX63b ROW 2 / BX90x / EP** 3 ➔**BX63b ROW 2 / BX90x / EP** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BX89a** 3 ➔**BX89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BX63b ROW 3 / BX90x / EP** 3 ➔**BX63b ROW 3 / BX90x / EPP** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BX89a** 3 ➔**BX89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BX63b ROW 4 / BX90x / EP** 3 ➔**BX63b ROW 4 / BX90x / EP** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BX89a** 3 ➔**BX89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BX63b ROW 5 / BX90x / EP** 3 ➔**BX63b ROW 5 / BX90x / EP** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BX89a** 3 ➔**BX89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BX63b SUPPLEMENT / BX90x / EP** 3 ➔**BX63b SUPPLEMENT / BX90x / EP** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.

BX90x	Is there any other child age 7 or above, biological or non-biological, co-residing or non-coresiding, who is not on the list?	1.Yes ➔ ADD THE CHILD TO BX63b 3. No➔ SECTION TF

CODE BX87a AND BX89a:
1. Yes
3. No
7. UNWILLING TO ANSWER

CODE BX88 AND BX90:
A. Money (loans, tuition, health care cost)
D. Food stuff or other goods
G. Chores, child care
H. Help with family business
V. Other

SECTION BX (NON-CO RESIDENT ADOPTED CHILD ROSTER)

Now I would like to know about all of your adopted children that live outside the household, including adopted children that have died in the last 12 months and lived outside the HH at the time of death.

BXAR00.	BX63a.	BX63b.	BX63c.	BX64.	BX64b.	BX65.	BX65a.	BX66.	BX66a.	BX67.	BX68.	BX69.	BX70.
NO. OF HHM		NAME	Is [….] your step or adopted child?	Sex	Birth Date Month/Year	Is […] still alive?	Death Date Month/Year	Current Age/Age when died Yrs	AGE>=15?	Marital Status	Highest education level attended by […]?	Highest grade completed by […]?	Where does […] live now/before died?
⌊_⌋⌊_⌋	01		2 3 ➔ 1 ↓ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	⌊_⌋	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1➔**BX66** 8➔**BX66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	1. Yes➔ 3. No↓	⌊_⌋	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	00➔**BX63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ _____
⌊_⌋⌊_⌋	02		2 3 ➔ 1 ↓ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	⌊_⌋	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1➔**BX66** 8➔**BX66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	1. Yes➔ 3. No↓	⌊_⌋	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	00➔**BX63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ _____
⌊_⌋⌊_⌋	03		2 3 ➔ 1 ↓ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	⌊_⌋	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1➔**BX66** 8➔**BX66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	1. Yes➔ 3. No↓	⌊_⌋	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	00➔**BX63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ _____
⌊_⌋⌊_⌋	04		2 3 ➔ 1 ↓ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	⌊_⌋	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1➔**BX66** 8➔**BX66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	1. Yes➔ 3. No↓	⌊_⌋	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	00➔**BX63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ _____
⌊_⌋⌊_⌋	05		2 3 ➔ 1 ↓ 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	⌊_⌋	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1➔**BX66** 8➔**BX66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	1. Yes➔ 3. No↓	⌊_⌋	⌊_⌋⌊_⌋ _____	⌊_⌋⌊_⌋ _____	00➔**BX63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ _____

CODE BXAR00:
96. Not Registered at the Roster

CODE BX64:
1. Male
3. Female

CODE BX63c:
1. Biological child
2. Step child
3. Adopted child
6. Duplicate
7. Not a child
8. DON'T KNOW

CODE BX65:
1. Yes
3. No
8. DON'T KNOW

CODE BX67:
1. Unmarried
2. Married
3. Separated/ Estranged
4. Divorced
5. Widow/ widower
8. DON'T KNOW

CODE BX68:
01. No school/Not yet in school
02. Elementary
03. Junior High - General
04. Junior High - Vocational
05. Senior High - General
06. Senior High – Vocational
60.College (D1, D2, D3)
61.University (Bachelor)
62.University (Master)
63.University (PhD)
11. Adult Education A
12. Adult Education B
13. Open University
14. Islamic School (Pesantren)
15. Adult Education C
17.School for disabled
72. Islamic Elementary School (Madrasah Ibtidaiyah)
73. Islamic Junior High School (Madrasah Tsanawiyah)
74. Islamic Senior High School (Madrasah Aliyah)
90. Kindergarten
98. DON'T KNOW
95. Other _____

CODE BX69:
00. Did not completer 1st grade at this level
01. 1
02. 2
03. 3
04. 4
05. 5
06. 6
07. Graduated
96. No school
98. DON'T KNOW

CODE BX70:

000.	In this household	018.	Lampung	060.	Kalimantan	081.	Maluku
001.	In the same village	019.	Bangka Belitung	061.	West Kalimantan	082.	North Maluku
002.	In the same subdistrict	020.	RiauIslands	062.	Central Kalimantan	090.	Irian
003.	In the same district	030.	Java	063.	South Kalimantan	091.	West Irian Jaya
004.	In the same province	031.	DKI Jakarta	064.	East Kalimantan	094.	Papua
010.	Sumatera	032.	West Java	070.	Sulawesi	101.	Malaysia
011.	Nanggroe Aceh Darussalam	033.	Central Java	071.	North Sulawesi	102.	Singapore
012.	North Sumatra	034.	D.I. Yogyakarta	072.	Central Sulawesi	103.	Brunei Darussalam
013.	West Sumatra	035.	East Java	073.	South Sulawesi	104.	Hongkong
014.	Riau	036.	Banten	074.	Southeast Sulawesi	105.	Japan
015.	Jambi	051.	Bali	075.	Gorontalo	106.	South Korea
016.	South Sumatra	052.	West Nusa Tenggara	076.	West Sulawesi	107.	Taiwan
017.	Bengkulu	053.	East Nusa Tenggara			108.	Timor Leste

121.	Yaman	
122.	Saudi Arabia	
123.	Kuwait	
124.	United Arab Emirates	
131.	Argentina	
132.	USA	
141.	Australia	
151.	Holland	
152.	England	
998.	DON'T KNOW	
995.	Other_____	

SECTION EP (EXPECTATION)

EP02.	**CAPI CHECK:** **PANEL RESPONDENT FOR BOOK IV?**	**YES .....1 →EP** **NO 3**
EP03.	Do you have children (biological/non-biological children) that lives in or outside this household?	No .....3 →**SECTION CX** Yes 1
EP04.	How many children do you have?	⌊_⌊_⌋ → **EP05**

SECTION EP (EXPECTATION)

CAPI CHECK: FILL WITH THE NAME OF ALL CHILDREN AGE 7-24 WHO LIVES IN THIS HOUSEHOLD (AR00) AND THE NAME OF ALL CHILDREN WHO DOESN'T LIVE IN THIS HOUSEHOLD (SECTION BA AND BA). ALSO FILL THE NAME OF ALL CHILDREN AGE 7-24 FROM SECTION CH.

Now we would like to ask about your expectation about your children's education, health, and life status in the future.

EP05.	EP06.	EP07.	EP07a.	EP08.	EP09.	EP10.	EP11.	EP12.	EP13.	EP14.	EP15.	EP16.	EP17.	EP18.	EP19.
	NO. OF HHM (AR00)	**NO. OF SECTION BA (BA63a)**	**NO. OF SECTION BX (BX63a)**	**NAME**	Child status	Sex	Age	Is […] still alive?	**CAPI CHECK EP11: IS […] AGED 7-24 ?**	Is [...] live in this HH?	Is [...] currently attending school, will attend school, or will continuing school in the future?	What his/her highest education level do you expect?	What his/her highest class level do you expect?	When […] at your age now, according to you, how is […]'s health status comparing your health status now?	When […] at your age now, according to you, how is […]'s live status now?
01	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ➔ 8 ➔ 6 ⌊_⌋⌊_⌋ ➔	⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ➔ 8 ➔	**1. YES ➔** **3. NO ➔**	1. Yes 3. No	3. No **➔EP18** 1. Yes	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6
02	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ➔ **8** ➔ 6 ⌊_⌋⌊_⌋ ➔	⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ➔ 8 ➔	**1. YES ➔** **3. NO ➔**	1. Yes 3. No	3. No **➔EP18** 1. Yes	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6
03	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ➔ 8 ➔ 6 ⌊_⌋⌊_⌋ ➔	⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ➔ 8 ➔	**1. YES ➔** **3. NO ➔**	1. Yes 3. No	3. No **➔EP18** 1. Yes	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6
04	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ➔ 8 ➔ 6 ⌊_⌋⌊_⌋ ➔	⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ➔ 8 ➔	**1. YES ➔** **3. NO ➔**	1. Yes 3. No	3. No **➔EP18** 1. Yes	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6
05	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋		1 2 3 ➔ 7 ➔ 8 ➔ 6 ⌊_⌋⌊_⌋ ➔	⌊_⌋	⌊_⌋⌊_⌋	1 ➔ 3 ➔ 8 ➔	**1. YES ➔** **3. NO ➔**	1. Yes 3. No	3. No **➔EP18** 1. Yes	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋ _____	1 2 3 4 5 6	1 2 3 4 5 6

EP 19X. **I**s there any child (biological or non-biological) aged 7-24 that is not listed?	**1.** Yes ➔ **EP 04** **3.** No ➔ **SECTION CX**

CODE EP06, EP07, AND EP07a:
96. Not Registered at the Roster

KODE EP10:
1. Male
3. Female

CODE EP09:
1. Biological child
2. Step child
3. Adopted child
6. Duplicate
7. Not a child
8. DON'T KNOW

CODE EP12:
1. Yes
3. No
8. DON'T KNOW

CODE EP16:

01. No school/Not yet in school	61.University (Bachelor)	15. Adult Education C
02. Elementary	62.University (Master)	17.School for disabled
03. Junior High - General	63.University (PhD)	72. Islamic Elementary School (Madrasah Ibtidaiyah)
04. Junior High - Vocational	11. Adult Education A	73. Islamic Junior High School (Madrasah Tsanawiyah)
05. Senior High - General	12. Adult Education B	74. Islamic Senior High School (Madrasah Aliyah)
06. Senior High – Vocational	13. Open University	90. Kindergarten
60.College (D1, D2, D3)	14. Islamic School (Pesantren)	98. DON'T KNOW
		95. Other

CODE EP17:

00. Did not completer 1st grade at this level	
01. 1	
02. 2	06. 6
03. 3	07. Graduated
04. 4	96. No school
05. 5	98. DON'T KNOW

CODE EP18, EP19:
1. Much better
2. Better
3. Same
4. Worst
5. Much worst
6. NOT APPLICABLE

SECTION CX (CONTRACEPTIVE USE)

CX00. CAPI CHECK COV3: AGE OF THE RESPONDENT≥ 50?	AGE OF THE RESPONDENT≥ 50 ..... 1 ➔SECTION CP AGE OF THE RESPONDENT < 50 3

Now we would like to ask about methods to postpone or prevent pregnancy.

	BIRTH CONTROL DEVICE/METHOD (CX1TYPE)	CX01. Have you ever heard about […] to prevent pregnancy?	CX02. Have you/has your husband ever used?	CX02A. When did you first use this method?	CX02B. How old were you when you first used this method?
A.	**Contraceptive Pill** A woman can take contraceptive pills every day	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ↓ 8. DK	⌊_⌋⌊_⌋ Years
B.	**IUD/AKDR/Spiral** A woman can have an intrauterine device inserted into her uterus by a doctor or midwife	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ↓ 8. DK	⌊_⌋⌊_⌋ Years
C.	**Contraceptive Injections** A woman can be injected by a doctor or midwife to prevent pregnancy for a few months	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ↓ 8. DK	⌊_⌋⌊_⌋ Years
F.	**Contraceptive Tubes/IMPLANT/NORPLANT** A woman can have small tubes implanted in her arm to prevent pregnancy	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ↓ 8. DK	⌊_⌋⌊_⌋ Years
F1.	**Intravag** Kind of Tissue to kill spermatozoa inserted into vagina	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ↓ 8. DK	⌊_⌋⌊_⌋ Years
F2.	**Female Condom / Femidom** A kind of condom designated for woman	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ↓ 8. DK	⌊_⌋⌊_⌋ Years
G.	**Tubal Ligation/Female Sterilization** A woman can undergo surgery to prevent pregnancy	3. No 1. Yes ↓	3. No 1. Yes ↓		
I.	**Abortion** A woman can do something or have someone do something to end a pregnancy	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ↓ 8. DK	⌊_⌋⌊_⌋ Years
E.	**Condom** A man can wear a condom during intercourse	3. No 1. Yes ↓	3. No 1. Yes ↓		
H.	**Vasectomy/Male Sterilization** A man can undergo surgery to prevent having another child	3. No 1. Yes ↓ **CX20**	3. No 1. Yes **➔CX20**		

SECTION CX (CONTRACEPTIVE USE)

CX20.	Do you/does your husband now use a device/method to postpone or prevent a pregnancy?	No ..... 3➔**CX26** Yes 1
CX21.	Which birth control device/method do you/does your husband use now?	Rhythm/calendar..... 11 ➔**CP** Coitus interruptus..... 12 ➔ **CP** Traditional Herbs ..... 13 ➔ **CP** Traditional massage ..... 14 ➔ **CP** Other..... 95 ➔ **CP** Pill..... 01 1 Mo. Injection ..... 02 2 Mo. Injection ..... 03 3 Mo. Injection ..... 04 Intravag..... 05 Condom ..... 06 IUD/AKDR/Spiral ..... 07 Norplant/Implant ..... 08 Female Sterilization/Tubectomy.... 09 Male Sterilization ..... 10 Female condom/Femidom 15
CX21aa.	When did you first receive this method?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW
CX21a.	When did you (last) receive this method?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW
CX21b.	What facility did you visit?	Public hospital..... 1 Private hospital ..... 2 Puskesmas, Pembantu..... 3 Private clinic..... 4 Posyandu..... 5 Birth control post/association..... 6 Fieldworker (PLKB)..... 7 TKBK/TMK..... 8 Pharmacist/drugstore..... 9 Private physician.....10 Nurse/paramedic .....11 Midwife .....12 Traditional midwife.....13 Friend/family .....14 Village midwife/Village Policlinic .....16 DON'T KNOW.....98 Other _____ 95

CX21ba.	Where is it located? 1. Sebutkan 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW	⌊_⌋ **(CODE CX21b)** **Name:** 1. _____ 8. DK _____ **Address:** 1. _____ 8. DK _____ _____ _____ **Loc. Note:** 1. _____ 8. DK _____ _____ _____ **Vill:** 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW **Kec:** 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW **Kab:** 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW **Prov:** 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW **CODE COMFAS** ⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋
CX21c.	How much did it cost (including drugs, materials, services and other related costs)?	1. ⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
CX21d.	**CAPI CHECK:** **IS CX21=06 OR 10?**	**YES, CX21=6 (CONDOM).....1➔CX27** **YES, CX21=10 (MALE STERILIZATION) .....2➔SECTION CP** **NO.....3**
CX21e.	Was your blood pressure measured before the contraception was prescribed?	Yes.....1 No 3

HHID: ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ **PID:** ⌊_⌋⌊_⌋⌊_⌋

SECTION CX (CONTRACEPTIVE USE)

CX22.	In your visits to the provider who provides the method you are currently using, has the provider ever:	
	a. Explained the possibility of side effects due to the use of the birth control device/method being used?	Ever ..... 1 Never ..... 3 DON'T KNOW 8
	b. Explained what has to be done or where to seek help if side effects occur?	Ever ..... 1 Never ..... 3 DON'T KNOW 8
	c. Asked about your health history before prescribing contraception?	Ever ..... 1 Never ..... 3 DON'T KNOW 8
CX22d.	Since you started using the current method for birth control, have you ever had health problems or side effects?"	NO SIDE EFFECT ..... W➔**CX22h** Gaining weight ..... A Losing weight ..... B Excessive bleeding on menstruation ..... C Irregular menstruation ..... D Flare-up of red facial rash ..... E Convulsions/cramps ..... F High blood pressure ..... G Headache ..... H Nausea ..... I Fatigue ..... J Skin problems ..... K Stomachache ..... L Not mensturating ..... M Other _____ V
CX22e.	Did you visit any medical faciltiy for these side effects?	No ..... 3➔**CX22h** Yes 1
CX22f.	When did you visit the medical facility? (**Most recent visit**)	month of ⌊_⌋⌊_⌋ / year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋

CX22g.	Where is it located? 1. Sebutkan 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW	⌊_⌋⌊_⌋ **(CODE CX21b)** **Name:** 1._____ 8. DK _____ **Address:** 1._____ 8. DK _____ _____ _____ **Loc. Note:** 1._____ 8. DK _____ _____ _____ **Vill:** 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW **Kec:** 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW **Kab:** 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW **Prov:** 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW **CODE COMFAS** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋
CX22h.	Before you/your husband use the current method, did you use any other birth control method?	No ..... 3➔**CX27** Yes 1

HHID: ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ **PID:** ⌊_⌋⌊_⌋

CX22i.	What was the method you/your husband using before?	Pill ..... 01 1 Mo. Injection ..... 02 2 Mo. Injection ..... 03 3 Mo. Injection ..... 04 Intravag ..... 05 Condom ..... 06 IUD/AKDR/Spiral ..... 07 Norplant/ Implant ..... 08 Female Sterilization/Tubectomy ..... 09 Male Sterilization ..... 10 Rhythm/calendar ..... 11 Coitus interruptus ..... 12 Traditional Herbs ..... 13 Traditional massage ..... 14 Female Condom (Femidom) ..... 15 DON'T KNOW ..... 98 Other _____ 95
CX22j.	What was the reason you stopped using the method?	(Got) pregnant while using ..... A Wants to get pregnant ..... B Husband's objection ..... C Side effects ..... D Health problems ..... E Difficulty in getting pregnant ..... F Wants more effective methods ..... G Uncomfortable ..... H Husband was absent ..... I Too expensive ..... J Menopause ..... K Divorced/widow ..... L Detached (device) ..... M Too hard to use/tired of using ..... N Method not available ..... O Other _____ ..... V **➔CX27**

CX26.	Why don't you/ your husband currently use any of the birth control devices/methods to prevent pregnancy? **(CIRCLE ALL THAT APPLY)**	MENOPAUSE/HYSTERECTOMY ..... P**➔SECTION CP** IS PREGNANT ..... A WANT TO HAVE A CHILD ..... B LACK OF KNOWLEDGE ..... C HUSBAND DISAPPROVES ..... D HIGH COST ..... E HEALTH REASONS ..... F SIDE EFFECTS ..... G ADVICE OF DR/NURSE/MIDWIFE ..... H DIFFICULTY IN OBTAINING METHOD ..... I RELIGION ..... J RESPONDENT DISAPPROVES ..... K FAMILY DISAPPROVES ..... L DO NOT CARE/ INDIFFERENT ..... M INFREQUENT INTERCOURSE ..... N DIFFICULTY IN GETTING PREGNANT ..... O DIVORCEE/WIDOW ..... P INCONVENIENT ..... Q HUSBAND'S ABSENCE ..... R JUST GAVE BIRTH (PRE-MENSTRUAL) ..... S JUST GAVE BIRTH (NO SEX) ..... T BREASTFEEDING ..... U KIDS GROWN ..... W DON'T WANT TO USE ..... X OTHER _____ V
CX27.	Do you/your husband plan to use a birth control device/method to postpone/prevent pregnancy in the future?	No ..... 3**➔SECTION CP** DON'T KNOW ..... 8 **➔SECTION CP** Yes 1
CX28.	If some day you/your husband plans to use birth control, what method would you prefer?	Pill ..... 01 1 Mo. Injection ..... 02 2 Mo. Injection ..... 03 3 Mo. Injection ..... 04 Intravag ..... 05 Condom ..... 06 IUD/AKDR/Spiral ..... 07 Norplant/ Implant ..... 08 Female Sterilization/Tubectomy ..... 09 Male Sterilization ..... 10 Rhythm/calendar ..... 11 Coitus interruptus ..... 12 Traditional Herbs ..... 13 Traditional massage ..... 14 Female Condom (Femidom) ..... 15 DON'T KNOW ..... 98 Other _____ 95

SECTION CP (INTERVIEW SESSION NOTES)

LANGMAIN.	Interview was entirely/mostly conducted in what language?	⌊_⌊_⌋ Other _____
LANGOTHR.	Other language used (if any):	⌊_⌊_⌋ Other _____

CODES FOR LANGUAGE:

00. Indonesian	04. Batak	08. Sasak	12. Makassar	16. Toraja	20. Lampung
01. Javanese	05. Bugis	09. Minang	13. Nias	17. Lahat	95. Other, _____
02. Sundanese	06. Chinese	10. Banjar	14. Palembang	18. Other South Sumatera	96. NO OTHER
03. Balinese	07. Maduranese	11. Bima	15. Sumbawa	19. Betawi	

C1. RESULT OF INTERVIEW OF BOOK IV	C2. REASON	C3. REVIEW BY EDITOR	C4. LOCAL SUPERVISOR MONITORING		
1. Completed➔ **C3**	1. Respondent was not at home/not available	1. Entered, no corrections necessary		Yes	No
2. Partially completed	2. Respondent was seriously ill	2. Entered AND corrected	a. Observed by local supervisor	1	3
3. Not completed	3. Respondent refused (to be interviewed)	4. Manual edit without CAFÉ	b. Edited by local supervisor	1	3
	5. Other: _____	3. Entered, but not corrected, explain: _____	c. Verified by local supervisor.....	1	3

SECTION CP (INTERVIEW SESSION NOTES)

EVALUATION FORM FOR BOOK IV

CP1. WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW? **ANSWER MAY BE MORE THAN ONE.** A. NO ONE B. A CHILD 5 YEARS OLD OR UNDER C. A CHILD OLDER THAN 5 YEARS OLD D. HUSBAND/WIFE E. AN ADULT, A HOUSEHOLDER F. AN ADULT, NOT A HOUSEHOLDER	**CP2.** WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD	**CP3.** WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD

NOTES:

CONFIDENTIAL

INTERVIEWER : _____ ⌊_⌊_⌊_⌋ **HHID:** ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋

INDONESIA FAMILY LIFE SURVEY 2014

BOOK V

SECTIONS: DLA, MAA, PSA, RJA, FMA, RNA, BAA, CP

Respondent is a child less than 15 years old

COV00aa.	CAPI CHECK : HAS THE RESPONDENT BEEN READ THE INFORMED CONSENT EARLIER AND AGREED TO BE INTERVIEWED (COV00x=1 IN BOOK K OR 1 , 2, OR 3A)	1. Yes ➔ **RESVIS** 3. No

COV00x. Informed Consent (to be read to each individual the first time the individual is interviewed): IF PARENT/GUARDIAN IS THE ONE ANSWERING BOOK5, THIS INFORMED CONSENT IS TO BE READ TO AND AGREED BY THE PARENT/GUARDIAN

Good morning/afternoon/evening,

My name is _____ and my colleague here is _____. We are both from SurveyMeter, an independent research organization based in Yogyakarta. We are currently conducting the fieldwork for Sakerti 5, a survey project conducted with collaboration with RAND Corporation. We will start by reading the informed consent form and ask whether you would be willing to participate in the survey. You can ask about anything that is not clear at any time. Please do discuss with your family members before deciding to participate in the survey.

The IFLS is a longitudinal survey that was first fielded in 1993, and again in 1997, 2000, and 2007. You may remember that we visited your households to interview you or your household members in 2007 or in an earlier round. Your household was interviewed since it was one of the households or part of the households that were randomly chosen to participate since the beginning of the survey in 1993. This year, we will visit the same households again to conduct the interview and to see whether there have been some changes since the last time we visited you.

If you choose to participate in the study, our interviewer will first ask you about your basic demographics, family information, health status, health care and insurance, work, retirement and pensions, household and individual income, expenditure, and assets, etc. Then the interviewer will give you a physical examination to better understand your true health conditions. The measurements include height, weight, waist circumference, blood pressure, peak meter flow lung capacity, grip strength, balance, timed walk, and timed sit to stand. We will also do a finger prick to measure your blood hemoglobin level [and to collect blood spot on a filter paper which we will store and use in the lab for analysis of C-reactive Protein that can be used to measure inflammation and the risk to cardiovascular diseases and HbA1c that can be used to measure risk of diabetes].

This survey will take some time to complete, but we will be doing it at your convenience. If you need to take a break or run some errands, please let us know so we can stop the interview and continue later in the day or the next day.

Generally, the study will pose no health risk. The blood drawing procedure will not transmit diseases to you, because the syringe and needle are new and disinfected. The small amount of blood drawn has no harm to your health. There maybe discomfort or very mild pain, we will help you deal with it.

If you agree to participate in the survey, the physical examination and test results related to your health will be feed back to you directly. And the information you provided can be used to help make health, retirement and social security policies suitable for Indonesia, which will benefit you and other people just like you.

The interview is completely voluntary and all survey information will be kept confidential. With your consent, we also will take picture of you and the front of your house solely for the purpose of confirming your identity and your address in the follow up survey. The photos and all your personal records including, questionnaires, and physical examination and test results are confidential; we will not tell others, include your family, friends, local hospitals, etc. Your personal information, including name, address, phone number, and other information which can be used to identify you will not be disclosed. You are identified by a number in the questionnaires and test records, which will be stored safely in IFLS5 project office. You may withdraw from the study any time, which will not impact any of your benefits. The researcher will keep your information confidentially until it is destroyed, and your information will not be used or disclosed during this period.

If you agree to participate in this study, all the interviews, physical examination, tests and counseling are provided to you for free. You do not need to pay anything.

If you agree to participate in this study, you will get Rp _____ as a token gift of appreciation for the time you spend with us.

If you have any questions about this study, you may contact Bondan Sikoki at SurveyMETER at email address: sm@surveymeter.org atau telpon 62-274-4477464 dan fax: 62-274-4477004

Interviewer's Statement

"*I have informed the respondent about the background, goals, procedure, risks and benefits of the survey, given him/her enough time to read the informed consent and discuss with others, and answered all questions related to the survey; I have informed the respondent that he/she can contact the SurveyMETER, when having problems about the surveand provided the accurate contact information. I have informed the respondent that he/she can withdraw from the survey anytime. I have informed the potential respondent that he/she can get a copy of this informed consent with signatures of mine*."

□ **S**igned by interviewer. Interviewer name: _____ day/month/year

Respondent's statement:

"*I have been read the informed consent and I agree to participate in*": □ **questionnaire survey**

RESVIS.	RESPONDENT INTERVIEWED?	3. No ➔ C1 1. Yes

REFER TO BOOK K

PID

NAME OF CHILD: _____ ⌊__⌋⌊__⌋

TO BE FILLED OUT BY INTERVIEWER FOR BOOK V

PIDPROX

COV7. NAME OF PERSON WHO ANSWERS: _____ ⌊__⌋⌊__⌋

RELATPROX:

RELATION TO CHILD:

01. MOTHER	**02. FATHER**	**03. SIBLING**
04. AUNT/UNCLE	**05. GRANDPARENT**	**06. CHILD HIM/HERSELF**
95. OTHER		

TO BE FILLED OUT BY INTERVIEWER FOR BOOK V

AGE. How old is [NAME OF CHILD]? ..... ⌊__⌋⌊__⌋ years

SEX. Sex: Male..... 1
Female..... 3

DOB. Date of birth ⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋⌊__⌋⌊__⌋
DAY MONTH YEAR

BIRTH_CERT. Does [NAME OF CHILD] have a birth certificate? Yes (can show it if asked).... 1
No 3

BIRTH_CERT REASON Main reason not have a birth certificate : ⌊__⌋

1	Expensive	6	Complicated process
2	Didn't know how to get one	7	Cannot show if asked /misplaced birth certificae
3	Not important		
4	Too far		
5.	Didn't know it was required		

COV11. Now with your consent we would like to take a picture of you. The sole purpose o the picture is to help us in confirming your identity in the follow up survey. The photo will not be disclosed to anyone.

☐ **Agreed to have picture taken**

SECTION DLA (CHILD'S EDUCATION)

Now we would like to ask some questions about [CHILD'S NAME]'s education.

DLA01.	Has [CHILD'S NAME] ever been to school?	Yes. .....1➔**DLA03b** No 3
DLA02.	Why has [CHILD'S NAME] never been to school? **CIRCLE ALL THAT APPLY**	NOT OLD ENOUGH .....A➔**DLA04a** TO HELP PARENTS EARN MONEY .....B COULD NOT AFFORD .....C NO SCHOOL/ TOO FAR .....D NOT ABLE TO STUDY .....E NOT ACCEPTED IN SCHOOL .....F BECAUSE SICK OR DISABLED .....G SCHOOL HAD NO TEACHER .....H SCHOOL CLOSED .....I DOESN'T WANT TO GO .....K HELP AT HOME .....L OTHER _____ V
DLA03b.	Do you have cell phone?	No. .....3 ➔**DLA3d** Yes 1
DLA03c.	What do you usually use the cell phone for?	A. Private conversation B. Bussiness Conversation C. Text Message D. Email E. Social Media (chatting,facebook,Twitter) F. Mobile Banking G. Transfer phone minutes H. Entertainment/Multimedia (games, ringtones, TV, Radio, MP3)
DLA03d.	Do you have internet access?	No. .....3 ➔**DLA03x** Yes 1
DLA03e.	Where do you get internet access?	A. Computer at home B. Computer at school C. Computer at place of work D. Computer at Internet Cafe E. Handphone V. Others _____
DLA03x.	**CAPI CHECK** **DLA01 = 1**	**NO .....3➔DLA04a** **YES 1**

DLA08.	What is the highest education level attended? **[NOTE TO INTERVIEWER: IF CURRENTLY IN SCHOOL, RECORD LEVEL ATTENDING CURRENTLY]**	02. Elementary School 03. Junior High-General 04. Junior High-Vocational 05. High School-General 06. High School-Vocational 11. Adult Education A 12. Adult Education B 14. Islamic School *(Pesantren)* 15. Adult Education C 17. School for the disabled. 72. Islamic Elementary School *(Madrasah Ibtidaiyah)* 73. Islamic Junior/High School *(Madrasah Tsanawiyah)* 74. Madrasah Senior High School 98. DON'T KNOW 95. Other _____
DLA09.	What class has [CHILD'S NAME] completed? **NOTE : IF DLA07=1 , THEN DLA09 MUS NOT "00"OR"07"**	Did not finish 1st class at that level ..... 00 1 ..... 01 2 ..... 02 3 ..... 03 4 ..... 04 5 ..... 05 6 ..... 06 Graduated ..... 07 DON'T KNOW 98
DLA04.	At what age did [CHILD'S NAME] first enter elementary school ?	⌊_⌊_⌋ Years ..... 1 DON'T KNOW 8
DLA04a.	Did [CHILD'S NAME] ever attend a kindergarten?	No ..... 3➔**DLA04c** Yes 1
DLA04b.	At what age did [CHILD'S NAME] first enter kindergarten ?	⌊_⌊_⌋ Years ..... 1 DON'T KNOW 8
DLA04c.	Did [CHILD'S NAME] ever attend a playgroup?	No ..... 3➔**DLA04e** Yes 1
DLA04d.	At what age did [CHILD'S NAME] first enter playgroup ?	⌊_⌊_⌋ Years ..... 1 DON'T KNOW 8

SECTION DLA (CHILD'S EDUCATION)

DLA04e.	Is [CHILD'S NAME] attending school at Kindergarten now?	No ..... 3➔**DLA05x** Yes 1
DLA04f.	What was the total amount of money you spent on Kindergarten this academic year?	Rp ⌊__⌋⌊__⌋ . ⌊__⌋⌊__⌋⌊__⌋ . ⌊__⌋⌊__⌋⌊__⌋ ➔**DLA56x**
DL0A5x.	**CAPI CHECK: DLA08 = 14 (PESANTREN)?**	Yes ..... 3 ➔**DLA56x** No 1
DLA07.	Are you currently attending school?	No. ..... 3➔**DLA09c** Yes 1
DLA07a .	How many effective shool hours did you attend your school last week or the last week the school was in session? (**NOT INCLUDING BREAKS**)	⌊__⌋⌊__⌋ hours
DLA09c.	**CAPI CHECK DLA08: WRITE DOWN THE NUMBER OF COLUMNS NEED TO BE COMPLETED ACCORDING TO HIGHEST LEVEL OF SCHOOL ATTENDED**	⌊__⌋ columns **IF "0" THEN➔DLA56x**

SECTION DLA (CHILD'S EDUCATION)

SCHOOL LEVEL(DLATYPE)	1. Elementary	2. Junior High	3. Senior High
DLA70. What is the school level [CHILD'S NAME] attended or [CHILD'S NAME] is still attending?	Elementary ..... 02 Adult Education A ..... 11 School for Disabled ..... 17 Madrasah Elementary ..... 72 Other _____ 95	Junior high general ..... 03 Junior high vocational ..... 04 Adult Education B ..... 12 School for Disabled ..... 17 Madrasah Junior High School ..... 73 Other _____ 95	Senior high general ..... 05 Senior high vocational ..... 06 Adult Education C ..... 15 School for Disabled ..... 17 Madrasah Senior High School ..... 74 Other _____ 95
DLA71. Under whose administration is the school?	Public non-religious ..... 01 Public religious ..... 02 Private non-religious ..... 03 Private Islam ..... 04 Private Catholic ..... 05 Private Protestant and others ..... 06 Private Buddhist ..... 08 Other _____ 95	Public non-religious ..... 01 Public religious ..... 02 Private non-religious ..... 03 Private Islam ..... 04 Private Catholic ..... 05 Private Protestant and others ..... 06 Private Buddhist ..... 08 Other _____ 95	Public non-religious ..... 01 Public religious ..... 02 Private non-religious ..... 03 Private Islam ..... 04 Private Catholic ..... 05 Private Protestant and others ..... 06 Private Buddhist ..... 08 Other _____ 95
DLA71a. What year did [CHILD'S NAME] first attend this level of schooling?	1. Year ⌊_⌊_⌊_⌊_⌋ **➔DLA71c** 8. DON'T KNOW	1. Year ⌊_⌊_⌊_⌊_⌋ **➔DLA71c** 8. DON'T KNOW	1. Year ⌊_⌊_⌊_⌊_⌋ **➔DLA71c** 8. DON'T KNOW
DLA71b. At what age did [CHILD'S NAME] first enter this level of schooling?	⌊_⌊_⌋ Years	⌊_⌊_⌋ Years	⌊_⌊_⌋ Years
DLA71c. What is highest grade [CHILD'S NAME]completed at this level?	Graduated ..... 07 **➔DLA71f** Did not finish 1st class at that level ..... 00 1 ..... 01 2 ..... 02 3 ..... 03 4 ..... 04 5 ..... 05 6 ..... 06 DON'T KNOW 98	Graduated ..... 07 **➔DLA71f** Did not finish 1st class at that level ..... 00 1 ..... 01 2 ..... 02 3 ..... 03 4 ..... 04 5 ..... 05 6 ..... 06 DON'T KNOW 98	Graduated ..... 07 **➔DLA71f** Did not finish 1st class at that level ..... 00 1 ..... 01 2 ..... 02 3 ..... 03 4 ..... 04 5 ..... 05 6 ..... 06 DON'T KNOW 98
DLA71d. Did [CHILD'S NAME] graduate this level of schooling?	Still enrolled ..... 6 **➔DLA75** Yes ..... 1 **➔DLA71f** No 3	Still enrolled ..... 6 **➔DLA75** Yes ..... 1 **➔DLA71f** No 3	Still enrolled ..... 6 **➔DLA75** Yes ..... 1 **➔DLA71f** No 3
DLA71e. Why did [CHILD'S NAME]stop [….]school?	Working/help parents earn money ..... B Could not afford ..... C No school/ too far ..... D Not able to study ..... E Not accepted in school ..... F Because sick or disabled ..... G School had no teacher ..... H School closed/ruined ..... I Doesn't want to go ..... K Help at home ..... L Other _____ V	Working/help parents earn money ..... B Could not afford ..... C No school/ too far ..... D Not able to study ..... E Not accepted in school ..... F Because sick or disabled ..... G School had no teacher ..... H School closed/ruined ..... I Doesn't want to go ..... K Help at home ..... L Other _____ V	Working/help parents earn money ..... B Could not afford ..... C No school/ too far ..... D Not able to study ..... E Not accepted in school ..... F Because sick or disabled ..... G School had no teacher ..... H School closed/ruined ..... I Doesn't want to go ..... K Help at home ..... L Other _____ V
DLA71f. When did [CHILD'S NAME] leave/graduate from this level of schooling?	1. Year ⌊_⌊_⌊_⌊_⌋ **➔DLA75** 8. DON'T KNOW	1. Year ⌊_⌊_⌊_⌊_⌋ **➔DLA75** 8. DON'T KNOW	1. Year ⌊_⌊_⌊_⌊_⌋ **➔DLA75** 8. DON'T KNOW

SECTION DLA (CHILD'S EDUCATION)

	SCHOOL LEVEL (DLATYPE)	1. Elementary	2. Junior High	3. Senior High
DLA71g.	At what age did [CHILD;S NAME] leave/graduate from this level of schooling?	⌊_⌊_⌋ Years	⌊_⌊_⌋ Years	⌊_⌊_⌋ Years
DLA75.	While attending [...] school, did [CHILD'S NAME] work?	Yes ..... 1 No 3	Yes ..... 1 No 3	Yes ..... 1 No 3
DLA73.	Has [CHILD'S NAME]ever failed a grade at [...] school ?	No ..... 3 **➔DLA74a** Yes 1	No ..... 3 **➔DLA74a** Yes 1	No ..... 3 **➔DLA74a** Yes 1
DLA74.	What grades has [CHILD'S NAME] failed and how many times did you repeat that grade? **CIRCLE ALL THAT APPLY**	Grade / Number of repeats A. 1 ⌊_⌋ Times B. 2 ⌊_⌋ Times C. 3 ⌊_⌋ Times D. 4 ⌊_⌋ Times E. 5 ⌊_⌋ Times F. 6 ⌊_⌋ Times	Grade / Number of repeats A. 1 ⌊_⌋ Times B. 2 ⌊_⌋ Times C. 3 ⌊_⌋ Times	Grade / Number of repeats A. 1 ⌊_⌋ Times B. 2 ⌊_⌋ Times C. 3 ⌊_⌋ Times
DLA74a.	Has [CHILD'S NAME] ever left […] and reentered?	No ..... 3 **➔DLA76a** Yes 1	No ..... 3 **➔DLA76a** Yes 1	No ..... 3 **➔DLA76a** Yes 1
DLA74b.	How many time did [CHILD'S NAME] ever leave school and reenter?	Grade / Number of repeats A. 1 ⌊_⌋ Times B. 2 ⌊_⌋ Times C. 3 ⌊_⌋ Times D. 4 ⌊_⌋ Times E. 5 ⌊_⌋ Times F. 6 ⌊_⌋ Times	Grade / Number of repeats A. 1 ⌊_⌋ Times B. 2 ⌊_⌋ Times C. 3 ⌊_⌋ Times	Grade / Number of repeats A. 1 ⌊_⌋ Times B. 2 ⌊_⌋ Times C. 3 ⌊_⌋ Times
DLA74c.	How many and when [CHILD;S NAME] leaves school temporary? **INTERVIEWER NOTE :** **IF MORE THAN 3 LEAVES, RECORD THE THREE LONGEST**	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year) B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year) C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year)	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year) B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year) C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year)	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year) B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year) C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ until ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ (Month Year Month Year)

	SCHOOL LEVEL (DLATYPE)	1. Elementary	2. Junior High	3. Senior High
DLA74d.	What the reason [CHILD'S NAME] stop/leave this level of schooling?	To help parents earn money ..... B Could not afford..... C No school/ too far..... D Not able to study ..... E Not accepted in school..... F Because sick or disabled ..... G School had no teacher ..... H School closed/ruined..... I Doesn't want to go ..... K Help at home..... L Other_____ V	To help parents earn money .....B Could not afford .....C No school/ too far.....D Not able to study.....E Not accepted in school.....F Because sick or disabled .....G School had no teacher .....H School closed/ruined.....I Doesn't want to go .....K Help at home.....L Other_____ V	To help parents earn money..... B Could not afford..... C No school/ too far ..... D Not able to study..... E Not accepted in school ..... F Because sick or disabled..... G School had no teacher..... H School closed/ruined ..... I Doesn't want to go..... K Help at home ..... L Other _____ V
DLA76a.	Has [CHILD'S NAME] ever taken the EBTANAS/UAN exam at [...] level?	No ..... 3 ➔ **DLA76f** Yes 1	No .....3 ➔ **DLA76f** Yes 1	No..... 3 ➔ **DLA76f** Yes 1
DLA76b.	Can you show us the official record of [CHILD'S NAME]'s EBTANAS/UAN score (DANEM) or National Examination Certificate (SURAT KETERANGAN HASIL UJIAN NASIONAL /SKHUN)? **INTERVIEWER NOTE:** **EBTANAS/UAN SCORES SHOULD BE COPIED FROM THE OFFICIAL RECORD (DANEM OR SKHUN).**	Yes ..... 1 No 3	Yes .....1 No 3	Yes ..... 1 No 3
DLA76c.	What month and year did [CHILD'S NAME] take the EBTANAS/UAN [...]?	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ .....1 Month Year DON'T KNOW.....8	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1 Month Year DON'T KNOW 8
DLA76c1.	**CAPI CHECK: EBTANAS OR UAN/UN/UAS**	EBTANAS ..... 1 UAN/UN/UAS..... 2	EBTANAS .....1 UAN/UN/UAS.....2	EBTANAS..... 1 UAN/UN/UAS 2
DLA76c2.	Number of subjects tested in the national exam (EBTANAS/UAN/UN) for the […] school level:	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋
DLA76d.	What was [CHILD'S NAME] 's Ebtanas/UAN score for the following subjects: **(If the respondent shows you official record (*DANEM*) copy from danem, if you cannot see official record (*DANEM*) ask the respondent for their score).**			
	B. Indonesian	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW
	C. English	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW
	D. Math	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NA 8. DON'T KNOW

SECTION DLA (CHILD'S EDUCATION)

DLA76e.	What is the total EBTANAS/UAN/UN (NEM) score?	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 8. DON'T KNOW
DLA76xa.	**CAPI CHECK DLA07 AND DLA08: IS CHILD CURRENTLY ENROLLED IN […]?**	NO ..... 3 **➔DLA76g** YES 1	NO ..... 3 **➔DLA76g** YES 1	NO ..... 3 **➔DLA76g** YES 1
DLA76f.	What is the name and address of the school? 1. Specify 3. Same as current residence 8. DON'T KNOW (DK)	**Name :** 8. DK 1. _____ **Address:** 8. DK 1. _____ _____ **Loc. Note:** 8. DK 1. _____ _____ **A. Vill:** 1. _____ 3. Same 8. DK **B. Kec:** 1. _____ 3. Same 8. DK **C. Kab:** 1. _____ 3. Same 8. DK **D. Prov:** 1. _____ 3. Same 8. DK **CODE CF** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	**Name :** 8. DK 1. _____ **Address:** 8. DK 1. _____ _____ **Loc. Note:** 8. DK 1. _____ _____ **A. Vill:** 1. _____ 3. Same 8. DK **B. Kec:** 1. _____ 3. Same 8. DK **C. Kab:** 1. _____ 3. Same 8. DK **D. Prov:** 1. _____ 3. Same 8. DK **CODE CF** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋	**Name :** 8. DK 1. _____ **Address:** 8. DK 1. _____ _____ **Loc. Note:** 8. DK 1. _____ _____ **A. Vill:** 1. _____ 3. Same 8. DK **B. Kec:** 1. _____ 3. Same 8. DK **C. Kab:** 1. _____ 3. Same 8. DK **D. Prov:** 1. _____ 3. Same 8. DK **CODE CF** ⌊_⌋⌊_⌋⌊_⌋ ⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋
DL76fa.	What languages are used in teaching at this school [...] ?	A. Indonesia C. Mandarin B. English D. Local language	A. Indonesia C. Mandarin B. English D. Local language	A. Indonesia C. Mandarin B. English D. Local language
DLA76g.	How many hours on average did [CHILD'S NAME] attend school each day now/in his/her last year at school?	⌊_⌋⌊_⌋ Hours/Day	⌊_⌋⌊_⌋ Hours/Day	⌊_⌋⌊_⌋ Hours/Day
DLA76i.	Approximately how many students are/were in [CHILD'S NAME]'s class now/in last year of school attended at this level?	⌊_⌋⌊_⌋ Person(s) ..... 1 DON'T KNOW 8	⌊_⌋⌊_⌋ Person(s) ..... 1 DON'T KNOW 8	⌊_⌋⌊_⌋ Person(s) ..... 1 DON'T KNOW 8
DLA76j.	Approximately how much time does it take to make a one-way trip to the school, now/in [CHILD'S NAME]'s last year of school at this level.	1. ⌊_⌋⌊_⌋⌊_⌋ 1. Hour 2. Minute 8. DON'T KNOW **➔DLA70 COLUMN 2/ DLA90**	1. ⌊_⌋⌊_⌋⌊_⌋ 1. Hour 2. Minute 8. DON'T KNOW **➔DLA70 COLUMN 3/ DLA90**	1. ⌊_⌋⌊_⌋⌊_⌋ 1. Hour 2. Minute 8. DON'T KNOW **➔DLA90**

HHID ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **PID** ⌊_⌋⌊_⌋⌊_⌋

SECTION DLA (CHILD'S EDUCATION)

We would like to ask about school-related expenses for the previous school year.

DLA90.	Did [CHILD'S NAME] attend school in the previous school year (2013/2014) ?	No ..... 3➔**DLA91c** Yes..... 1

DLA91a.	What were [CHILD'S NAME] 's (approximate) school-related expenses during the 2013/2014 school year? Did you spend money for:			**DLA91b.** Please give your best estimate of the amount you spent.
	T Total			⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
		3. No	**1. Yes**	
	A. School Fees			
	1. Registration.....	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	2. Other scheduled fees (BP3, School Committee, etc).....	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp. **DLA91bx. How much should you spend for other schedule fees […]?** ⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	3. Exams.....	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	B. School supplies			
	1. Books and writing supplies	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	2. Uniform and sports	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	C. Transportation and Pocket Money			
	1. Transportation	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	2. Housing costs, food	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	3. Special courses	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	D. Other:	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
DLA100.	Did [CHILD'S NAME] receive any books from the school during the2013/2014 school year?			Yes, for himself/herself ..... A Yes, to share..... B No C
DLA101.	Did the school reduce [CHILD'S NAME]School Committee fees or other fees during the 2013/2014 school year (**i.e.FEES LISTED IN ITEM A IN DLA91a**)?			Yes..... 1 No 3
DLA102.	Did [CHILD'S NAME] receive assistance for school costs from School Committee, GNOTA, government, community groups, religious groups, or family (outside HH), or other?			No ..... 3➔ **DLA91c** Yes..... 1

SECTION DLA (CHILD'S EDUCATION)

DLA103. From what source was this assistance, and what was the total value? **(CIRCLE ALL THAT APPLY)**	**JAWABAN BOLEH LEBIH DARI SATU**
T. TOTAL	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
A. GNOTA	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
C. Government (beside BOS/BKM)	
C1. *Bantuan Siswa Miskin* (BSM)	C1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp.
C2. *Bidik Misi*	C2. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp.
C3. Other non-BOS government assistance	C3. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋⌊_⌋ Rp.
D. Community Group	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
E. Religious Group	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
F. Family	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
I. School Committee	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
J. BOS/BKM fund	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
K. Foreign Government/Foundation/Private	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
L. Domestic Non-Government Institution/Organization	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
L1. Assistance for poor students	⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.

DLA91c. CAPI CHECK DLA07:	**RESPONDENT NOT IN SCHOOL (DLA07 = 3).....3➔DLA56X** **RESPONDENT STILL IN SCHOOL (DLA07 = 1) 1**

SECTION DLA (CHILD'S EDUCATION)

DLA104TYPE				DLA104b. Please give your best estimate of the amount you spent.
DLA104a.	What were [CHILD'S NAME] 's(approximate) school-related expenses during the past month? Did you spend money for:			
T	Total.....			⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
A.	School Fees	**3. No**	**1. Yes**	
	1. Registration	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	2. Other scheduled fees (BP3, School Committee, etc)	3 → **DLA91bx**	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp. **DLA91bx. How much should you spend for other schedule fees]?** ⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	3. Exams	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
B.	School supplies			
	1. Books and writing supplies	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	2. Uniform and sports	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
C.	Transportation and Pocket Money			
	1. Transportation	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	2. Housing costs, food	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
	3. Special courses	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.
V.	Other: _____	3 ↓	1 →	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp.

SECTION DLA (CHILD'S EDUCATION)

DLA56x.	**CAPI CHECK COV3: AGE OF CHILDREN ≥ 5 YEARS OLD?**	**NO .....3 ➔SECTION MAA** **YES.....1**

	DLA2TYPE	1.Wages	2.Family farm business	3.Family non-farm business	4.Household work
DLA56a.	Has [CHILD'S NAME] ever worked for […]?	No.....3 ➔**NEXT COLUMN** Yes.....1	No.....3 ➔**NEXT COLUMN** Yes.....1	No.....3 ➔**NEXT COLUMN** Yes.....1	No.....3 ➔**NEXT COLUMN** Yes.....1
DLA57a.	Did [CHILD'S NAME] work for […] last month?	No.....3➔**DLA61a** Yes.....1	No.....3➔**DLA61a** Yes.....1	No.....3➔**DLA61a** Yes.....1	No.....3➔**DLA61a** Yes.....1
DLA58a.	How many hours did [CHILD'S NAME] work for […] in the last week he/she worked?	⌊_⌋⌊_⌋⌊_⌋ hours.....1 DON'T KNOW.....8	⌊_⌋⌊_⌋⌊_⌋ hours.....1 DON'T KNOW.....8	⌊_⌋⌊_⌋⌊_⌋ hours.....1 DON'T KNOW.....8	⌊_⌋⌊_⌋⌊_⌋ hours.....1 DON'T KNOW.....8
DLA59a.	How many weeks did [CHILD'S NAME] work for […] in last month?	⌊_⌋.⌊_⌋ weeks.....1 DON'T KNOW.....8	⌊_⌋.⌊_⌋ weeks.....1 DON'T KNOW.....8	⌊_⌋.⌊_⌋ weeks.....1 DON'T KNOW.....8	⌊_⌋.⌊_⌋ weeks.....1 DON'T KNOW.....8
DLA60a.	How much was [CHILD'S NAME]'s earnings last month?	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp.....1 DON'T KNOW.....8			
DLA61a.	At what age did [CHILD'S NAME] start working for […]?	⌊_⌋⌊_⌋ age.....1 DON'T KNOW.....8	⌊_⌋⌊_⌋ age.....1 DON'T KNOW.....8	⌊_⌋⌊_⌋ age.....1 DON'T KNOW.....8	⌊_⌋⌊_⌋ age.....1 DON'T KNOW.....8
DLA62a.	At what age did [CHILD'S NAME] last work for […]?	⌊_⌋⌊_⌋ age.....1 STILL WORKING.....6 DON'T KNOW.....8 **➔DLA56a NEXT COLUMN**	⌊_⌋⌊_⌋ age.....1 STILL WORKING.....6 DON'T KNOW.....8 **➔DLA56a NEXT COLUMN**	⌊_⌋⌊_⌋ age.....1 STILL WORKING.....6 DON'T KNOW.....8 **➔DLA56 NEXT COLUMN**	⌊_⌋⌊_⌋ age.....1 STILL WORKING.....6 DON'T KNOW.....8 **➔SECTION MAA**

SECTION MAA (ACUTE MORBIDITY)

Now, we'd like to know about [CHILD'S NAME]'s health status and whatever symptoms [CHILD'S NAME] has had during the past 4 weeks, namely since [...] date, 4 weeks ago.

MAA0a.	In general, how is [...]'s health at this time?	Very healthy .....1 Somewhat healthy .....2 Somewhat unhealthy .....3 Unhealthy.....4
MAA0b.	During the last 4 weeks how many days of activities did [...] miss because of poor health?	└┴┘ Days .....1 DON'T KNOW 8
MAA0c.	During the last 4 weeks how many days did [...] spend in bed because of poor health?	└┴┘ Days .....1 DON'T KNOW 8
MAA0d.	Compared with […]'s health 12 months ago, would you say that [NAME OF CHILD]'s health now is […]?	Much better now .....1 Somewhat better now .....2 About the same.....3 Somewhat worse .....4 Much worse .....5 Child less than 1 year old.....6

		MAA01. Did your child ever experience […] in the last 4 weeks? 1. Yes	3. No
AA	Headache	1	3↓
BA	Runny nose	1	3↓
CA	Cough	1	3→**DA**
	a. Dry cough	a. 1	3
	b. Cough with phlegm	b. 1	3
	c. Bloody cough	c. 1	3
DA	Difficulty breathing	1	3→**EA**
	a. Wheezing	a. 1	3
	b. Short, rapid breath	b. 1	3
EA	Fever	1	3↓
FA	Stomach ache	1	3↓
HA	Nausea/vomiting	1	3↓
IA	Diarrhea minimal of 3x per day	1	3→**JA**
	a. Mixed with blood	a. 1	3
	b. Mixed with mucous	b. 1	3
	c. Pale liquid	c. 1	3
JA	Skin infection (boil, abcess itching)	1	3↓

		MAA01. Did your child ever experience […] in the last 4 weeks? 1. Yes	3. No
KA	Eye Infection	1	3↓
LA	Toothache	1	3↓
MA	Cold sores	1	3

MAA04.	**CAPI CHECK: IF MAA01 = 1**	**NO ..... 3 →SECTION PSA** **YES 1**
MAA05a.	While your child was sick, did/was he/she:	
	a. Still like to play	a. 1. Yes 3. No
	b. Have difficulty sleeping	b. 1. Yes 3. No
	c. More irritable than usual	c. 1. Yes 3. No
	d. Just lie around	d. 1. Yes 3. No

MAA06.	Did [.....] have any of the diseases or illnesses during his/her childhood (that is, from when he/shewas born up to now)?	A. Infectious disease (e.g. measles, rubella, chicken pox, mumps, tubercolosis, diphtheria, scarlet fever) B. Polio C. Asthma D. Respiratory problems other than asthma E. Allergies (other than asthma) F. Severe diarrhoea G. Epilepsy, fits or seizures H. Emotional, nervous, or psychiatric problem J. Childhood diabetes or high blood sugar K. Heart trouble L. Leukaemia or lymphoma M. Cancer or malignant tumour (excluding minor skin cancers) W. NONE OF THESE V. Other serious diseases/illnesses

SECTION PSA (CHILD SELF TREATMENT)

Now, we'd like to know whether [CHILD'S NAME] has taken medicine on his/her own during the past 4 weeks, namely since [...] date, 4 weeks ago.

TYPE OF SELF TREATMENT (PSATYPE)	PSA01		PSA02
	During the past 4 weeks, has [CHILD'S NAME] ever [...]?		What is the approximate total cost to purchase or make that medicine during the past 4 weeks?
A. Consumed over-the-counter modern medicines (like bodrexin, inzana, paramex)	3. No ↓	1. Yes →	1. ⌊__⌋,⌊__⌋__⌋__⌋,⌊__⌋__⌋__⌋ Rp. 8. DON'T KNOW
B. Consumed traditional herbs or traditional medicines as treatment	3. No ↓	1. Yes →	1. ⌊__⌋,⌊__⌋__⌋__⌋,⌊__⌋__⌋__⌋ Rp. 8. DON'T KNOW
C. Used topical medicines (like eyedrops, cream, medical plaster, ointment and the like)	3. No ↓	1. Yes →	1. ⌊__⌋,⌊__⌋__⌋__⌋,⌊__⌋__⌋__⌋ Rp. 8. DON'T KNOW
E. Vitamins/Supplements	3. No ↓	1. Yes →	1. ⌊__⌋,⌊__⌋__⌋__⌋,⌊__⌋__⌋__⌋ Rp. 8. DON'T KNOW
F. Massage, *coining*, etc.	3. No ↓	1. Yes →	1. ⌊__⌋,⌊__⌋__⌋__⌋,⌊__⌋__⌋__⌋ Rp. 8. DON'T KNOW

SECTION RJA (OUT-PATIENT CARE)

The next questions pertain to medical facilities or medical providers [CHILD'S NAME] may have visited for outpatient care during the past 4 weeks, namely since [...] date, 4 weeks ago.

RJA0a. Did [CHILD'S NAME] visit a Posyandu in the last 4 weeks?

No ..... 3 ➔**RJA01a**
Yes 1

RJA0b. What is the name and address of the Posyandu, including RT?

Name 1. _____ 8. DK

Address 1. _____
_____ 8. DK

Loc. Note 1. _____
_____ 8. DK

RT 1. _____
3. Same as current residence
8. DON'T KNOW

RW 1. _____
3. Same as current residence
8. DON'T KNOW

A. Village 1. _____
3. Same as current residence
8. DON'T KNOW

CODE COMFAS |_|_|_| |_| |_|_|_|

RJA0c. What services did [CHILD'S NAME] receive at the Posyandu?

	Yes	No
a. Weighing	1	3
b. Supplementary Food	1	3
c. Vitamin A Pill	1	3
d. Oral Rehydration Solution	1	3
e. Immunization	1	3
f. Exam by Puskesmas Staff	1	3
g. Child Development Activity	1	3
v. Other _____	1	3

RJA0d. Were there any staff from the Puskesmas at the Posyandu?

No 3
Yes 1

RJA0e. Did you pay for the services [CHILD'S NAME] received at the posyandu?

No ..... 3 ➔**RJA01a**
Yes 1

RJA0f. How much did you pay?

|_|_|_| , |_|_|_|_| Rp. 1
DON'T KNOW 8

HHID: |_|_|_| |_|_|_| |_|_|_| |_|_|_|_| **PID:** |_|_|_|

SECTION RJA (OUT-PATIENT CARE)

RJA01a.	In the last 4 weeks, did [CHILD'S NAME] visit a hospital, health center, clinic, doctor's practice, or a health worker?	No ..... 3 ➔**RJA25** Yes 1

MEDICAL FACILITY (RJA1TYPE)	RJA01 Within the last 4 weeks, has [CHILD'S NAME] been to [...]/ visited by [...]?	RJA02 How many times did [CHILD'S NAME] [...] / been visited by [...] during the past 4 weeks?	RJA02a How much did you pay out of pocket for [CHILD'S NAME]'s outpatient care at […] during the past 4 weeks?
A. Public hospital (General or Specialty)	3. No➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
B. Public Health Center (puskesmas)/Auxiliary Center (puskesmas pembantu)	3. No➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
E. Private Hospital	3. No➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
F. Polyclinic, Private Clinic, Medical Center	3. No➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
G. Private Physician (General Practitioner, Specialist, Dentist)	3. No➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
H. Nurse, Paramedic, Midwife practitioner	3. No➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
I. Traditional practitioner (shaman, wiseman, kyai, Chinese herbalist, masseur, acupuncturist, etc.)	3. No➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
V. Other	3. No 1. Yes ➔ ➔ **RJA05a**	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW

SECTION RJA (OUT-PATIENT CARE)

Now, I'd like to ask you some questions about [CHILD'S NAME]LAST VISIT to health care providers.

RJA05a.	What is the type of medical facility or type of provider?	⌊__⌋ _____
RJA06.	What is the name and location of the medical provider? 1. Specify 3. Same as residence 8. DON'T KNOW (DK)	Name 1. _____ 8. DK _____ Address 1. _____ 8. DK _____ _____ Loc. Note 1. _____ 8. DK _____ _____ **Vill:** 1. _____ 3. Same as residence 8. DK **Kec** 1. _____ 3. Same as residence 8. DK **Kab:** 1. _____ 3. Same as residence 8. DK **Prov:** 1. _____ 3. Same as residence 8. DK **CODE CF** ⌊__⌋⌊__⌋⌊__⌋ ⌊__⌋ ⌊__⌋⌊__⌋⌊__⌋
RJA08.	What was the purpose of [CHILD'S NAME] visit to that facility? **ANSWER MAY BE MORE THAN ONE** B. Immunization C. Consultation D. Medical check-up E. Medications F. Injection H. Treatment for Injury I. Treatment for Illness J. Massage V. Other,	**ANSWER MAY BE MORE THAN ONE** B C D E F H I J V _____

HHID: ⌊__⌋⌊__⌋⌊__⌋ ⌊__⌋⌊__⌋ ⌊__⌋⌊__⌋ ⌊__⌋⌊__⌋ **PID:** ⌊__⌋⌊__⌋

RJA09.	Was the visit to [...] the first visit or a follow-up visit for the symptom?	First ..... 1 Follow-up 3
RJA10.	**CAPI CHECK RJA05a:** **1. IF A, B, E, F, J ➔ RJA11** ..... **3. NO**	**YES ..... 1➔RJA11** **NO 3**
RJA10a.	Did the provider visit the child at home?	Yes ..... 1 ➔ **RJA17** No 3
RJA11.	How many kilometers is it between the medical facility and [CHILD'S NAME] residence?	⌊__⌋⌊__⌋⌊__⌋ . ⌊__⌋⌊__⌋ Km ..... 1 DON'T KNOW 8
RJA12.	What is the travel time to that facility?	1. ⌊__⌋⌊__⌋ 01. Minute 02. Hour 8. DON'T KNOW
RJA14.	What was the total transportation cost to the facility (**INCLUDING FUEL COST, ONE WAY TRIP)?**	⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp ..... 1 DON'T KNOW 8
RJA15.	Upon arrival, how long did [CHILD'S NAME] have to wait to be examined?	1. ⌊__⌋⌊__⌋ 01. Minute 02. Hour 8. DON'T KNOW
RJA17.	What kind of treatment did [CHILD'S NAME] receive? **ANSWER MAY BE MORE THAN ONE** A. Medical check-up/consultation . B. Injection C. Laboratorium test D. Surgery E. X-ray G. Medications I. Massage J. Traditional treatment V. Other	**ANSWER MAY BE MORE THAN ONE** A B C D E G I J V _____
RJA17a.	What do you think about the services that were provided by this facility ?	Satisfactory ..... 1 Somewhat satisfactory ..... 2 Not satisfactory ..... 3 Far from satisfactory 4
RJA20.	What was the total cost to fill a prescription that you received during this visit?	⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp ..... 1 Didn't receive ..... 3 Didn't fill ..... 5 DON'T KNOW 8

RJA21.	What was the total cost of treatment, including medications that may have been administered, not including prescription cost?	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp ..... 1 Did not pay anything ..... 3 DON'T KNOW 8
RJA21a.	Did you use insurance to pay for all or some of this visit?	No ..... 3 ➔ **RJA22** Yes 1
RJA21b.	What insurance did you use?	*Askes* ..... 01 *Jamsostek* ..... 02 Employer provided health benefits ..... 03 Private health insurance ..... 04 Savings related insurance ..... 05 *SKTM* ..... 06 Jamkesmas ..... 07 Jamkesda ..... 08 JKN ..... 09 Jampersal ..... 10 Other 95
RJA21c.	How much was the total cost you should have paid?	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp ..... 1 DON'T KNOW 8
RJA21d.	Do you expect to get reimbursement from insurance?	3. No ➔**RJA22** 1. Yes
RJA21e.	How much do you expect to be reimbursed?	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1 DON'T KNOW 8
RJA22.	Was any payment in kind made?	No ..... 3 ➔ **RJA25** Yes 1
RJA23.	What was the approximate value of the goods?	⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Rp ..... 1 DON'T KNOW 8
RJA25.	**CAPI CHECK BOOK COVER (COV3): IS [CHILD'S NAME] 0-5 YEARS OLD?**	**NO ..... 3 ➔ SECTION FMA** **YES 1**
RJA25a.	Has [CHILD'S NAME] been given Vitamin A in the last 6 months?	Yes ..... 1 No 3

RJA26.	Does [CHILD'S NAME] have a KMS card or KIA book? IF YES, MAY I SEE IT, PLEASE?	Does not have card ..... 3 ➔**RJA30** Yes, but can't see ..... 2 ➔**RJA30** Yes, can see 1
RJA27.	FROM THE KMS CARD, RECORD THE NUMBER OF TIMES VITAMIN A WAS GIVEN	1. ⌊_⌋⌊_⌋ times vitamin A was given as recorded on the KMS/KIA card 3. Tidak tercatat di Kartu KMS/KIA
RJA28a.	1. RECORD THE DATE OF EACH IMMUNIZATION ON THE KMS CARD. 2. WRITE '44' IN 'DAY' COLUMN, IF THE CHILD HAS ALREADY HAD THE IMMUNIZATION, BUT THE DATE ISN'T RECORDED.	DAY / MONTH / YEAR
	b. BCG	b. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	c. Polio 0 (at birth)	c. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	d. Polio 1	d. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	e. Polio 2	e. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	f. Polio 3	f. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	n. Polio 4	n. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	g. DPT 1	g. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	h. DPT 2	h. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	i. DPT 3	i. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	j. Measles	j. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	k. Hepatitis B 1	k. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	l. Hepatitis B 2	l. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	m. Hepatitis B 3	m. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	n. Rotavirus 1	n. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
	o. Rotavirus 2	o. ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
RJA29.	Has [CHILD'S NAME] already received BCG, DPT 1-3, POLIO 0-4, and/or Measles and Hepatitis B, but this information isn't recorded on the KMS/KIA card?	Yes ..... 1 No ..... 3 DON'T KNOW 8
RJA29a.	**CAPI CHECK:** **PROBE ABOUT VACCINATIONS THAT HAVE BEEN RECEIVED AND WRITE "66" IN THE APPROPRIATE ROWS IN RJA28a➔ACCORDING TO THE LINES MENTIONED** **WRITE "00" IN RJA28a IN THE ROWS FOR WHICH IMMUNIZATION WERE NOT DONE** **WRITE "88" IN RJA28a IN THE ROWS FOR WHICH RESPONDENT DIDN'T KNOW WHETHER IMMUNIZATIONS HAVE BEEN DONE** **➔RJA31**	

SECTION RJA (OUT-PATIENT CARE)

RJA30.	Please telll us whether [CHILD'S NAME] has already received the immunizations listed below:	
	A. **A BCG** vaccination against turberculosis, that is, an injection in the upper arm that left a scar.	Yes ..... 1 No ..... 3 DON'T KNOW 8
	B. **Polio Vaccine**, that is, pink or white drops in the mouth? **IF 'YES':** How many times?	Yes ..... 1 No ..... 3 DON'T KNOW ..... 8 └__└__┘ Times
	C. **DPT Vaccination**, that is, an injection, usually given at the same time as polio drops **IF 'YES':** How many times?	Yes ..... 1 No ..... 3 DON'T KNOW ..... 8 └__└__┘ Times
	D. An injection against **Measles.**	Yes ..... 1 No ..... 3 DON'T KNOW 8
	E. **Anti Hepatitis B** Injection **IF 'YES':** How many times?	Yes ..... 1 No ..... 3 DON'T KNOW ..... 8 └__└__┘ Times
	F. Vitamin A **IF 'YES':** How many times?	Yes ..... 1 No ..... 3 DON'T KNOW ..... 8 └__└__┘ Times
	G. Rotavirus 1	Yes ..... 1 No ..... 3 DON'T KNOW 8
	H. Rotavirus 2	Yes ..... 1 No ..... 3 DON'T KNOW 8
RJA31.	In the last 4 weeks has [CHILD'S NAME] participated in the activities of the Child Development Program?	Yes ..... 1 No 3
RJA32.	How many times was child weighed in the last 6 months?	└__└__┘ Times..... 1 DON'T KNOW 8

SECTION FM (FOOD FREQUENCY)

FMA01. Does [CHILD'S NAME] eat?	Breastfeeding .....96 ➔**SECTION RNA** 3 or more times a day.....01 2 times a day.....02 1 time a day.....03 5-6 times a week .....04 3-4 times a week .....05 2 or less times a week.....06 DON'T KNOW 98
FMA01a. Does [CHILD'S NAME] brush their teeth? **(CIRCLE ALL THAT APPLY)**	In the morning .....A At night .....B In the afternoon .....C After meals .....D Never.....E DON'T KNOW .....Y

Now we would like to ask you about the type of food [CHILD'S NAME] usually eat.

TYPE OF FOOD FMTYPE (FMTYPE)	FMA02		FMA03
	In the last week, did [CHILD'S NAME] eat any [….]?		How many days did [CHILD'S NAME] eat […] in the last week?
A. Sweet potatoes	3. No ➔	1. Yes	1 2 3 4 5 6 7
B. Eggs	3. No ➔	1. Yes	1 2 3 4 5 6 7
C. Fish	3. No ➔	1. Yes	1 2 3 4 5 6 7
D. Meat (beef, chicken, pork, etc.)	3. No ➔	1. Yes	1 2 3 4 5 6 7
E. Dairy	3. No ➔	1. Yes	1 2 3 4 5 6 7
F. Green leafy vegetables	3. No ➔	1. Yes	1 2 3 4 5 6 7
G. Banana	3. No ➔	1. Yes	1 2 3 4 5 6 7
H. Papaya	3. No ➔	1. Yes	1 2 3 4 5 6 7
I. Carrot	3. No ➔	1. Yes	1 2 3 4 5 6 7
J. Mango	3. No ➔	1. Yes	1 2 3 4 5 6 7
K. Instant Noodle	3. No ➔	1. Yes	1 2 3 4 5 6 7
L. Fast food (eg. KFC	3. No ➔	1. Yes	1 2 3 4 5 6 7
M. Carbonated beverages (*Coca cola, sprite , etc*)	3. No ➔	1. Yes	1 2 3 4 5 6 7
N. Chili sauces/Sambal	3. No ➔	1. Yes	1 2 3 4 5 6 7
O. Fried snacks (fried *tempe, tahu, bakwan*, etc)	3. No ➔	1. Yes	1 2 3 4 5 6 7
P. Rice	3. No ➔	1. Yes	1 2 3 4 5 6 7
Q. Sweet snacks (wajik, geplak, donat, wafer, coolate, dll)	3. No ➔	1. Yes	1 2 3 4 5 6 7

SECTION RNA (INPATIENT CARE)

The following questions pertain to hospitalization (inpatient care) that [CHILD'S NAME] has had during the past 12 months, namely since the month of [...] 12 months ago.

RNA00. In the last 12 months, namely since the month of [...], did [CHILD'S NAME] receive inpatient care?	No ..... 3 ➔**SECTION BAA** Yes 1

HOSPITALIZATION FACILITY (RNA1TYPE)	**RNA01** During the past 12 months, has [CHILD'S NAME] ever received inpatient care at [...]?	**RNA02** How many times has [CHILD'S NAME] received inpatient care at [...] during the past 12 months?	**RNA02a** How much did you pay out of pocket for inpatient care at […] during the past 12 months?
A. Public Hospital (General or Specialty)	3. No ➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
B. Public Health Center (puskesmas)	3. No ➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
C. Private Hospital	3. No ➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
D. Private Clinic	3. No ➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
F. Midwife Clinic	3. No ➔ 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW
V. Other	3. No ➔ **RNA05a** 1. Yes ➔	⌊_⌋⌊_⌋ Times	1. ⌊_⌋,⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. 8. DON'T KNOW

SECTION RNA (INPATIENT CARE)

Now, we'd like to ask you some questions about [CHILD'S NAME] LAST VISIT to inpatient health care providers.

RNA05a.	What was the type of the last hospitalization facility	⌊__⌋ _____
RNA06.	What is the name and location of facility? 1. Specify 3. Same as current residence 8. Don't Know	**Name:** 1. _____ 8. DK _____ **Address:** 1. _____ 8. DK _____ _____ **Loc. Note:** 1. _____ 8. DK _____ _____ **Vill:** 1. _____ 3. Same 8. DON'T KNOW **Kec:** 1. _____ 3. Same 8. DON'T KNOW **Kab:** 1. _____ 3. Same 8. DON'T KNOW **Prov:** 1. _____ 3. Same 8. DON'T KNOW **CODE CF** ⌊__⌋⌊__⌋⌊__⌋ ⌊__⌋ ⌊__⌋⌊__⌋⌊__⌋
RNA08.	How many nights was [CHILD'S NAME] hospitalized there?	⌊__⌋⌊__⌋⌊__⌋ Nights
RNA10.	For what reason was [CHILD'S NAME] hospitalized?	Sickness .....01 Accident .....02 Operation, what type? _____ .....05 Other _____ 95
RNA15.	During hospitalization, what kind of treatment did [CHILD'S NAME] receive?	**(CIRCLE ALL THAT APPLY)** A. Physical exam/consult B. Injection C. Laboratory test D. Surgery E. X-ray F. Family Planning G. Medications I. IV (Drip Infusion) V. Other

RNA15a.	What do you think about the services that were provided by this facility ?	1. Satisfactory 2. Somewhat satisfactory 3. Not satisfactory 4. Far from satisfactory
RNA18.	What was the total cost to fill a prescription that you received during this visit?	1. ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp. 3. Didn't receive 5. Didn't fill 8. DON'T KNOW
RNA19.	Upon discharge from the hospital, what was the total cost of hospitalization? (Including medications administered but not including self-bought medications and blood supply.)	1. ⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp. 3. Did not pay anything 8. DON'T KNOW
RNA19a.	Did you use insurance to pay for all or some of this visit?	No..... 3 ➔ **SECTION BAA** Yes..... 1
RNA19b.	What insurance did you use?	*Askes* ..... 01 *Jamsostek* ..... 02 Employer provided health benefits ..... 03 Private health insurance..... 04 Savings related insurance ..... 05 *SKTM* ..... 06 Jamkesmas ..... 07 Jamkesda ..... 08 JKN ..... 09 Jampersal ..... 10 Other 95
RNA19c.	How much was the total cost you should have paid?	⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ , ⌊__⌋⌊__⌋⌊__⌋ Rp..... 1 DON'T KNOW 8

HHID: ⌊__⌋⌊__⌋⌊__⌋⌊__⌋⌊__⌋⌊__⌋⌊__⌋⌊__⌋ **PID:** ⌊__⌋⌊__⌋

SECTION BAA (PARENTAL INFORMATION)

(BAATYPE)		Father (1)	Mother (2)
BAA00.	**CAPI CHECK : [CHILD'S NAME]'S MOTHER/FATHER IS RESPONDENT FOR BOOK V?**	**YES ..... 1➔BAA00 FOR MOTHER** **NO 3**	**YES ..... 1➔ SECTION CP** **NO 3**
BAA02.	**CAPI CHECK:** **1. CHILD'S […] STAYS IN HOUSEHOLD AND REGISTERED ON HOUSEHOLD ROSTER, FILL IN NUMBER […] FROM AR00** **2. CHILD'S […]DIED/DOES NOT STAY IN HOUSEHOLD, BUT REGISTERED ON HOUSEHOLD ROSTER, FILL IN NUMBER […] FROM AR00** **3. CHILD'S […] IS NOT REGISTERED ON HOUSEHOLD ROSTER**	**1. ⌊_⌋⌊_⌋ AR00 AND STAYS IN HOUSEHOLD ➔BAA00 COLUMN MOTHER** **2. ⌊_⌋⌊_⌋ AR00 AND DIED/DOES NOT STAY IN HOUSEHOLD** **3. NOT IN HOUSEHOLD ROSTER**	**1. ⌊_⌋⌊_⌋ AR00 AND STAYS IN HOUSEHOLD ➔SECTION CP** **2. ⌊_⌋⌊_⌋ AR00 AND DIED/DOES NOT STAY IN HOUSEHOLD** **3. NOT IN HOUSEHOLD ROSTER**
BAA03.	Is [child's name] father/mother still alive?	No ..... 3➔**BAA06** DON'T KNOW ..... 8➔**BAA06** Yes 1	No ..... 3➔**BAA06** DON'T KNOW ..... 8➔**BAA06** Yes 1
BAA04.	How often has [child's name] seen his/her father/mother in the last 12 months?	Everyday ..... 5➔**BAA05** Never ..... 1 At least once per year ..... 2 At least once per month ..... 3 At least once per week 4	Everyday ..... 5➔**BAA05** Never ..... 1 At least once per year ..... 2 At least once per month ..... 3 At least once per week 4
BAA04a.	How often has [child's name] been in telephone contact with his/her father/mother in the last 12 months?	Everyday ..... 5➔**BAA05** Never ..... 1 At least once per year ..... 2 At least once per month ..... 3 At least once per week 4	Everyday ..... 5➔**BAA05** Never ..... 1 At least once per year ..... 2 At least once per month ..... 3 At least once per week 4
BAA04b.	How often has [child's name] been in contact with his/her father/mother through email, sms, chatting, or letter in the last 12 months?	Never ..... 1 At least once per year ..... 2 At least once per month ..... 3 At least once per week ..... 4 Everyday 5	Never ..... 1 At least once per year ..... 2 At least once per month ..... 3 At least once per week ..... 4 Everyday 5
BAA05.	Where does [child's name] father/mother live?	⌊_⌋⌊_⌋⌊_⌋⌊_⌋	⌊_⌋⌊_⌋⌊_⌋⌊_⌋
BAA06.	What is the highest level of education of father/mother?	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋
BAA07.	What is the highest class that father/mother finished?	00 01 02 03 04 05 06 07 96 98 **➔BAA00 FOR MOTHER**	00 01 02 03 04 05 06 07 96 98 **➔SECTION CP**

CODE BAA05:

001.	In the same village	018.	Lampung	060.	Kalimantan	081.	Maluku	121.	Yaman
002.	In the same subdistrict	019.	Bangka Belitung	061.	West Kalimantan	082.	North Maluku	122.	Saudi Arabia
003.	In the same district	020.	RiauIslands	062.	Central Kalimantan	090.	Irian	123.	Kuwait
004.	In the same province	030.	Java	063.	South Kalimantan	091.	West Papua	124.	United Arab Emirates
010.	Sumatera	031.	DKI Jakarta	064.	East Kalimantan	094.	Papua	131.	Argentina
011.	Nanggroe Aceh Darussalam	032.	West Java	065.	North Kalimantan	101.	Malaysia	132.	USA
012.	North Sumatra	033.	Central Java	070.	Sulawesi	102.	Singapore	141.	Australia
013.	West Sumatra	034.	D.I. Yogyakarta	071.	North Sulawesi	103.	Brunei Darussalam	151.	Holland
014.	Riau	035.	East Java	072.	Central Sulawesi	104.	Hongkong	152.	England
015.	Jambi	036.	Banten	073.	South Sulawesi	105.	Japan	998.	DON'T KNOW
016.	South Sumatra	051.	Bali	074.	Southeast Sulawesi	106.	South Korea	995.	Other
017.	Bengkulu	052.	West Nusa Tenggara	075.	Gorontalo	107.	Taiwan		
		053.	East Nusa Tenggara	076.	West Sulawesi	108.	Timor Leste		

CODE BAA06:

01. No school/Not yet in school	12. Adult Education B	63.University (PhD)
02. Elementary	13. Open University	72. Islamic Elementary School (Madrasah Ibtidaiyah)
03. Junior High - General	14. Islamic School (Pesantren)	73. Islamic Junior High School (Madrasah Tsanawiyah)
04. Junior High - Vocational	15. Adult Education C	74. Islamic Senior High School (Madrasah Aliyah)
05. Senior High - General	17.School for disabled	90. Kindergarten
06. Senior High – Vocational	60. College (D1, D2, D3)	98. DON'T KNOW
11. Adult Education A	61.University (Bachelor)	95. Other_____
	62.University (Master)	

CODE BAA07:

00. Did not completer 1st grade at this level	
01. 1	
02. 2	06. 6
03. 3	07. Graduated
04. 4	96. No school
05. 5	98. DK

SECTION CP (INTERVIEW SESSION NOTES)

LANGMAIN.	Interview was entirely/mostly conducted in what language?	⌊_⌋⌊_⌋ Other _____
LANGOTHR.	Other language used (if any):	⌊_⌋⌊_⌋ Other _____

CODES FOR LANGUAGE:

00. Indonesian	04. Batak	08. Sasak	12. Makassar	16. Toraja	20. Lampung
01. Javanese	05. Bugis	09. Minang	13. Nias	17. Lahat	95. Other, _____
02. Sundanese	06. Chinese	10. Banjar	14. Palembang	18. Other South Sumatera	96. NO OTHER
03. Balinese	07. Maduranese	11. Bima	15. Sumbawa	19. Betawi	

C1. RESULT OF INTERVIEW OF BOOK IV	C2. REASON	C4. LOCAL SUPERVISOR MONITORING
1. Completed ➔ **C4** 2. Partially completed 3. Not completed	1. Respondent was not at home/not available 2. Respondent was seriously ill 3. Respondent refused (to be interviewed) 5. Other: _____	Yes No a. Observed by local supervisor ..... 1 3 b. Edited by local supervisor ..... 1 3 c. Verified by local supervisor..... 1 3

SECTION CP (INTERVIEW SESSION NOTES)

EVALUATION FORM FOR BOOK V

CP1. WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW? **ANSWER MAY BE MORE THAN ONE.** A. NO ONE B. A CHILD 5 YEARS OLD OR UNDER C. A CHILD OLDER THAN 5 YEARS OLD D. HUSBAND/WIFE E. AN ADULT, A HOUSEHOLDER F. AN ADULT, NOT A HOUSEHOLDER	**CP2.** WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD	**CP3.** WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT? 1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD

NOTES:

HEALTH WORKER :_____ └┘└┘└┘ ***CONFIDENTIAL*** HHID : └┘└┘└┘└┘ └┘└┘ └┘└┘ └┘└┘

PID: └┘└┘

INDONESIA FAMILY LIFE SURVEY 2014

HEALTH MEASUREMENTS
BOOK US

SECTION: US

Respondents to be Measured are Household Member with AR01i = 1

US00a	As we have informed you earlier, we will give you a physical examination to better understand your true health conditions. The measurements include height, weight, waist circumference, blood pressure, peak meter flow lung capacity, grip strength, balance, timed walk, and timed sit to stand. We will also do a finger prick to measure your blood hemoglobin level. [**ONLY FOR DBS RESPONDENT**: and to collect blood spot on a filter paper which we will store and use in the lab for analysis of C-reactive Protein that can be used to measure inflammation and the risk to cardiovascular diseases and HbA1c that can be used to measure risk of diabetes]	**Do you agree to participate in** □ physical examination □ blood hemoglobin test **[if DBS RESPONDENT]** □ take dried blood spot □ store the DBS for future analysis of c-reactive protein and HbA1c
US00.	**CAN BE MEASURED?**	**3. REASON NOT MEASURED: ➔ C1** **6. NOT ABLE TO MEET ➔ C1** **7. REFUSED ➔ C1** **1. YES, MEASURED**

REFER TO BOOK K **PID**

NAME OF RESPONDENT: _____ └┘└┘

US01. Sex: Male 1
Female 3

US02. Date of birth └┘└┘ / └┘└┘ / └┘└┘└┘└┘
DAY MONTH YEAR

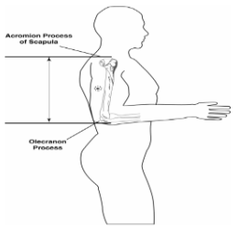
US03. Age: ..... └┘└┘└┘ years

US13aa. DBS SAMPLE :
YES 1
NO 3

	BLOOD PRESSURE **INTERVIEWER INSTRUCTION:** DESCRIBE HOW THE BLOOD PRESSURE MEASUREMENT WIL BE DONE. SHOW THE RESPONDENT THE EQUIPMENT AND DEMONSTRATE HOW THE CUFF IS PLACED AROUND THE ARM. MAKE SURE RESPONDENT IS RELAXED AND REMAIN SEATED DURING THE MEASUREMENT. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL.	
US07aa.	Do you have a rash, a cast, edema (swelling) in the arm, open sores or wounds, or a significant bruise where the blood pressure cuff will be in contact?"	1. Yes ➔ ONLY DO MEASUREMENT ON THE ARM THAT IS NOT AFFECTED 3. No 6. AGE < 15 YEARS
US07a.	Blood Pressure(HHM age ≥**15** years) **1st MEASUREMENTON LEFT ARM IF POSSIBLE**	1. ⌊_⌊_⌊_⌋/⌊_⌊_⌊_⌋ P⌊_⌊_⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. AGE < 15 YEARS 7. REFUSED
US07a1.	Left or right arm?	1. LEFT 3. RIGHT 6. NA
US07b.	Blood Pressure(HHM age ≥**15** years) **2nd MEASUREMENT ON RIGHT ARM IF POSSIBLE**	1. ⌊_⌊_⌊_⌋/⌊_⌊_⌊_⌋ P⌊_⌊_⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. AGE < 15 YEARS 7. REFUSED
US07b1.	Left or right arm?	1. LEFT 3. RIGHT 6. NA
US07c.	Blood Pressure(HHM age ≥**15** years) **3rd MEASUREMENT ON LEFT ARM IF POSSIBLE**	1. ⌊_⌊_⌊_⌋/⌊_⌊_⌊_⌋ P⌊_⌊_⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. AGE < 15 YEARS 7. REFUSED
US07c1.	Left or right arm?	1. LEFT 3. RIGHT 6. NA
	WEIGHT AND HEIGHT **INTERVIEWER INSTRUCTION:** FOR THESE MEASUREMENTS, ASK RESPONDENTS TO TAKE OFF HIS/HER SHOES. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL.	
US06.	Weight**(Kg)**	1. ⌊_⌊_⌊_⌋,⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 7. REFUSED
US04.	Height **(Cm)**	1. ⌊_⌊_⌊_⌋,⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ ➔**US05a** 7. REFUSED ➔**US05a**
US05.	Method of measuring **INTERVIEWER NOTE: US04 IF HHM WAS BORN LESS THAN 2 YEARS AGO, MEASURE LYING DOWN**	1. Standing 3. Lying down
	KNEE HEIGHT **INTERVIEWER INSTRUCTION:** DESCRIBE HOW THE MEASUREMENT WILL BE DONE. MEASURE THE HEIGHT OF THE RIGHT KNEE IF POSSIBLE. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL.	
US05a.	Height of knee (age≥ 40 years old)**(Cm)** (**RIGHT KNEE IF POSSIBLE**) 	1. ⌊_⌊_⌊_⌋,⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. AGE < 40YEARS 7. REFUSED
US05b.	Left or right knee?	1. LEFT 3. RIGHT 6. NA

CODE FOR REASON NOT MEASURED:

1. RESPONDENTFELT IT WOULD NOT BE SAFE
2. INTERVIEWER FELT IT WOULD NOT BE SAFE
3. RESPONDENT TRIED BUT WAS UNABLE TO COMPLETE THE MEASUREMENT/TEST
4. RESPONDEND DID NOT UNDERSTAND THE INSTRUCTIONS
5. RESPONDENT'S HEALTH CONDITION PREVENT MEASUREMENT
6. RESPONDENT HAS RASH, A CAST, EDEMA, OPEN SORES IN ARM (FOR US07a, US07b, US07c)
7. RESPONDENT'S HAND HAD SURGERY, SWELLING, INFLAMMATION, SEVERE PLAIN, SEVERE PAIN, OR INJURY IN LAST 6 MONTHS (US20a, US20b, US20c)
8. RESPONDENT RECENTLY HAD SURGERY OR IS INJURED OR IN CONDITIONS THAT PREVENT HIM/HER FROM WALKING (US19p)
9. NO SUITABLE SPACE
10. PROBLEM WITH EQUIPMENT OR SUPPLIES

	UPPER ARM LENGTH **INTERVIEWER INSTRUCTION:** DESCRIBE HOW THE MEASUREMENT WILL BE DONE. MEASURE THE LENGTH OF THE RIGHT UPPER ARM IF POSSIBLE. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL	
US05c.	Length of upper arm (Age≥ 40 years old) **(Cm)** (RIGHT ARM IF POSSIBLE)  	1. ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. AGE < 40YEARS 7. REFUSED
US05d.	Left or right upper arm?	1. LEFT 3. RIGHT 6. NA

	WAIST AND HIP CIRCUMFERENCE **INTERVIEWER INSTRUCTION:** DESCRIBE HOW THE MEASUREMENT WILL BE DONE. MAKE SURE RESPONDENT DOES NOT WEAR THICK CLOTHING. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL	
US06a.	Waist circumference **(≥40 years)(Cm)**	1. ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. AGE < 40YEARS 7. REFUSED
US06b.	Hip circumference(**≥40** years)**(Cm)**	1. ⌊_⌋⌊_⌋⌊_⌋ , ⌊_⌋ 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. AGE < 40YEARS 7. REFUSED
	REPEATED CHAIR STANDS **INTERVIEWER INSTRUCTION:** DESCRIBE HOW THE MEASUREMENT WILL BE DONE. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT	
US10a.	Did you recently had surgery or injury or in condition that may prevent you from doing this measurement?	1. Yes ➔ DISCUSS WITH RESPONDENT WHETHER RESPONDENT WOULD ATTEMPT TO DO THE MEASUREMENT 3. No 6. AGE <15YEARS➔**US20aa**

US10.	**REPEATED CHAIR STANDS** Time to rise from sitting to a standing position 5 times **(≥15 years)**	1. 5 TIMES IN ⌊_⌋⌊_⌋ , ⌊_⌋ seconds➔**US12** 2. LESS THAN 5 TIMES IN ⌊_⌋⌊_⌋ , ⌊_⌋ seconds 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ ➔**US20aa** 7. REFUSED➔**US20aa**
US11.	How many times sit to stand?	⌊_⌋ Times
US12.	Did respondent use his/her trunk arms during repeated chair stands?	1. Yes 3. No
US12a.	Did respondent give full effort to this test?	1. Yes 2. No because of pain, illness or other discomfort. 3. No, but no obvious reason for this.
	GRIP STRENGTH **INTERVIEWER INSTRUCTION:** SHOW THE DYANOMETER TO THE RESPONDENT AND DESCRIBE HOW THE MEASUREMENT WILL BE DONE. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL	
US20aa.	Did you recently had surgery, swelling, inflammation, severe pain or injury in one or both hands in the last 6 months?	1. Yes, both hands ➔CAPI: US20a, US20b, US20c, US20d = 3 (NOT MEASURED), REASON = 7 2. Yes, left hand ➔ CAPI: US20a, US20c = 3 (NOT MEASURED), REASON = 7 3. Yes, right hand ➔ CAPI: US20b, US20d = 3 (NOT MEASURED), REASON = 7 4. No 6. Both hands not functioning or age < 15 years
US20.	More dominant hand? **(≥15 years)**	1. Left 2. Right 3. No dominant hand 6. Both hands not functioning or age < 15 years
US20a.	Left hand**(≥ 15 years)** **1st MEASUREMENT**	1. ⌊_⌋⌊_⌋ Kg 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. Age< 15 years 7. Refused
US20b.	Right hand **(≥ 15 years)** **1st MEASUREMENT**	1. ⌊_⌋⌊_⌋ Kg 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. Age< 15 years 7. Refused
US20c.	Left hand **(≥ 15 years)** **2nd MEASUREMENT**	1. ⌊_⌋⌊_⌋ Kg 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. Age< 15 years 7. Refused

SECTION US (HEALTH MEASUREMENT)

US20d.	Right hand **(≥ 15 years)** **2nd MEASUREMENT**	1. ⌊_⌊_⌋ Kg 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ 6. Age< 15 years 7. Refused
US23.	Method of measuring	1. Standing 2. Sitting 6. Both hands not functioning or age < 15 years
US23a.	Did respondent give full effort to this test?	1. Yes 2. No because of pain, illness or other discomfort. 3. No, but no obvious reason for this.

US18aA.	Are you taking medicine for Anemia?	1. Yes 3. No
US18aB.	Are you taking medicine for High Blood Pressure?	1. Yes 3. No
US18aC.	Are you taking medicine for Diabetes?	1. Yes 3. No
US18aD.	Are you taking medicine for Cholesterol?	1. Yes 3. No
US19.	**WRITE THE COMMENTS OBSERVATION ON RESPONDENT'S SICKNESS** **[Cough, Flu, Skin Infection, Fever, Wound, etc]**	_____ _____ _____

CODE FOR REASON NOT MEASURED:

1. RESPONDENTFELT IT WOULD NOT BE SAFE
2. INTERVIEWER FELT IT WOULD NOT BE SAFE
3. RESPONDENT TRIED BUT WAS UNABLE TO COMPLETE THE MEASUREMENT/TEST
4. RESPONDEND DID NOT UNDERSTAND THE INSTRUCTIONS
5. RESPONDENT'S HEALTH CONDITION PREVENT MEASUREMENT
6. RESPONDENT HAS RASH, A CAST, EDEMA, OPEN SORES IN ARM (FOR US07a, US07b, US07c)
7. RESPONDENT'S HAND HAD SURGERY, SWELLING, INFLAMMATION, SEVERE PLAIN, SEVERE PAIN, OR INJURY IN LAST 6 MONTHS (US20a, US20b, US20c)
8. RESPONDENT RECENTLY HAD SURGERY OR IS INJURED OR IN CONDITIONS THAT PREVENT HIM/HER FROM WALKING (US19p)
9. NO SUITABLE SPACE
10. PROBLEM WITH EQUIPMENT OR SUPPLIES

US19a.	**CAPI CHECK: AGE ≥45?**	3. No➔**US09a (LUNG CAPACITY)** 1. Yes
	BALANCING TEST **iNTERVIEWER INSTRUCTION:** DESCRIBE HOW THE TEST WILL BE CONDUCTED. FIND A ROOM WITH ADEQUATE SPACE TO CONDUCT THE TEST. AVOID CARPETING. RESPONDENT NEED TO TAKE OFF FOOTWEAR. DURING THE TEST, STAND CLOSE TO THE RESPONDENT JUST IN CASE THE RESPONDENT LOSES HIS/HER BALANCE. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL	
US19b.	**BALANCING TEST:** **SEMI-TANDEM(≥45years old)** **Instruction:** Stand with the side of the heel of one foot touching the big toe of the other foot for **10** seconds 	1. ABLE TO DO THE TEST 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ ➔**US19l (SIDE-BY-SIDE)** 7. Refused➔**US19l (SIDE-BY-SIDE)**
US19c.	Did respondent hold semi-tandem stand for full **10** seconds without stepping out of place or grabbing anything?	1. Yes 3. No, enter time respondent was able to stand semi-tandem: ⌊_⌊_⌋ seconds 4. Tried but was unable ➔**US19l (SIDE-BY-SIDE)**
US19d.	Did respondent use any compensatory movement of his/her trunk, arms or legs to steady himself during the stand?	1. Yes 3. No
US19e.	**CAPI CHECK: US19c =1?** **(able to hold semi-tandem stand)**	3. No ➔**US19l (SIDE-BY-SIDE)** 1. Yes
US19f.	**CAPI CHECK: AGE≥70 ?**	3. No ➔**US19h**(45 ≤ AGE < 70) 1. Yes
US19g.	**BALANCING TEST:** **FULL –TANDEM (≥70years old)** **Instruction:** **S**tand with the heel of one foot in front of and touching the toes of the other foot for **about 30 seconds** 	1. ABLE TO DO THE TEST➔**US19i** 3. NOT MEASURED, REASON (**CODE**): ⌊_⌋ ➔**US19p (WALKING SPEED)** 7. Refuse➔**US19p (WALKING SPEED)**

US19h.	**BALANCING TEST:** **FULL –TANDEM (45 ≤ AGE <70)** **Instruction:** Stand with the heel of one foot in front of and touching the toes of the other foot for **about 60 seconds** 	1. ABLE TO DO THE TEST 3. NOT MEASURED, REASON (**CODE**): ⌊__⌋ **➔US19p (WALKING SPEED)** 7. Refused**➔US19p(WALKING SPEED)**	
US19i.	Did respondent hold full-tandem stand for full **[30/60]** seconds without stepping out of place or grabbing anything?	1. Yes 3. No, enter time respondent was able to stand full-tandem: ⌊__⌋⌊__⌋ seconds 4. Tried but was unable **➔US19p (WALKING SPEED)**	
US19j.	Did respondent use any compensatory movement of his/her trunk, arms or legs to steady himself during the stand?	1. Yes 3. No	
US19k.	Record the type of floor surface the balance measure was conducted on: **➔US19p (WALKING SPEED)**	1. Linoleum/tile/wood 2. Carpet 3. Clay	4. Concrete 9. Other
US19l.	**BALANCING TEST:** **SIDE-BY-SIDE** **Instruction:** Stand with your feet together, side-by-side for about **10** seconds. 	1. Able to do it 3. NOT MEASURED, REASON (**CODE**): ⌊__⌋ **➔US19p(WALKING SPEED)** 7.Refused **➔US19p(WALKING SPEED)**	
US19m.	Did respondent hold side-by-side stand for full **10** seconds without stepping out of place or grabbing anything?	1. Yes 3. No, enter time respondent was able to stand full-tandem: ⌊__⌋⌊__⌋ seconds 4. Tried but was unable **➔US19p (WALKING SPEED)**	
US19n.	Did respondent use any compensatory movement of his/her trunk, arms or legs to steady himself during the stand?	1. Yes 3. No	
US19o.	Record the type of floor surface the balance measure was conducted on:	1. Linoleum/tile/wood 2. Carpet 3. Clay	4. Concrete 9. Other

TIMED WALK ((≥ 60)

	INTERVIEWER INSTRUCTION: FIND A CLEAR SPACE IN NON-CARPETED AREA ABOUT 4 M LONG. SET UP THE COURSE (2.5 M LONG) WITH MASKING TAPE MARKING THE START AND FINISH LINES. EXPLAIN HOW THE TEST WILL BE CONDUCTED. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL.		
Us19p.	Do you have any problems from recent surgery, injury, or other health conditions that might prevent you from walking	1. Yes ➔ DISCUSS WITH RESPONDENT WHETHER RESPONDENT WOULD ATTEMPT TO DO THE MEASUREMENT 3. No 6. AGE < 60 YEARS **➔US09a.**	
US19q.	**TIMED WALK** **((≥ 60 years)** **FIRST WALK**	1. ⌊__⌋⌊__⌋ seconds 3. NOT MEASURED, REASON (**CODE**): ⌊__⌋ **➔US09a.(LUNG CAPACITY)** 6. < 60 yearsold**➔US09a.(LUNG CAPACITY)** 7. Refused**➔US09a.(LUNG CAPACITY)**	
US19r.	**SECOND WALK**	1. ⌊__⌋⌊__⌋ seconds 3. NOT MEASURED, REASON (**CODE**): ⌊__⌋ 7. Refused	
US19s.	Record floor type	1. Linoleum/tile/wood 2. Carpet 3. Clay	3. Concrete 9. Other
US19t.	Record walking aid	1. None 2 Walking stick 3 Elbow crutches	4 Walking frame 9. Other

CODE FOR REASON NOT MEASURED:

1. RESPONDENTFELT IT WOULD NOT BE SAFE
2. INTERVIEWER FELT IT WOULD NOT BE SAFE
3. RESPONDENT TRIED BUT WAS UNABLE TO COMPLETE THE MEASUREMENT/TEST
4. RESPONDEND DID NOT UNDERSTAND THE INSTRUCTIONS
5. RESPONDENT'S HEALTH CONDITION PREVENT MEASUREMENT
6. RESPONDENT HAS RASH, A CAST, EDEMA, OPEN SORES IN ARM (FOR US07a, US07b, US07c)
7. RESPONDENT'S HAND HAD SURGERY, SWELLING, INFLAMMATION, SEVERE PLAIN, SEVERE PAIN, OR INJURY IN LAST 6 MONTHS (US20a, US20b, US20c)
8. RESPONDENT RECENTLY HAD SURGERY OR IS INJURED OR IN CONDITIONS THAT PREVENT HIM/HER FROM WALKING (US19p)
9. NO SUITABLE SPACE
10. PROBLEM WITH EQUIPMENT OR SUPPLIES

LUNG CAPACITY

INTERVIEWER INSTRUCTION: DESCRIBE HOW THE MEASUREMENT WILL BE TAKEN. SHOW THE

	EQUIPMENT AND DEMONSTRATE HOW THE MEASUREMENT WILL BE CONDUCTED. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL.	
US09a.	Lung capacity**(≥9 years)** **1st MEASUREMENT**	1. ⌊_⌋⌊_⌋⌊_⌋ 3. REASON NOT MEASURED (**CODE**): ⌊_⌋ 6. AGE < 9YEARS 7. REFUSED
US09b.	Lung capacity**(≥9 years)** **2nd MEASUREMENT**	1. ⌊_⌋⌊_⌋⌊_⌋ 3. REASON NOT MEASURED (**CODE**): ⌊_⌋ 6. AGE < 9YEARS 7. REFUSED
US09c.	Lung capacity**(≥9 years)** **3rd MEASUREMENT**	1. ⌊_⌋⌊_⌋⌊_⌋ 3. REASON NOT MEASURED (**CODE**): ⌊_⌋ 6. AGE < 9YEARS 7. REFUSED
US09d.	Did respondent give full effort to this test?	1. Yes 2. No because of pain, illness or other discomfort. 3. No, but no obvious reason for this.

	HB LEVEL, CHOLESTEROL, AND DBS SAMPLE **INTERVIEWER INSTRUCTION: D**ESCRIBE THE MEASUREMENT AND THE PROCEDURE. SHOW THE EQUIPMENT AND EXPLAIN HOW THE MEASUREMENT WILL BE CONDUCTED. FOLLOW THE PROTOCOL EXACTLY AS WRITTEN IN THE HEALTH MEASUREMENT MANUAL.	
US13.	**HB (≥1 years)**	1. ⌊_⌋⌊_⌋ , ⌊_⌋ 3. REASON NOT MEASURED (**CODE**): ⌊_⌋ 6. AGE < 1YEARS 7. REFUSED MENOLAK
US13ab.	**CAPI CHECK: NEED DBS TEST?**	3. NO➔**US10a** 1. YES
US13a.	DBS Block-Blood sample**(≥ 1 years)**	1. ⌊_⌋ **Spot** 3. REASON NOT MEASURED (**CODE**): ⌊_⌋ 6. AGE < 1YEARS 7. REFUSED MENOLAK

CODE FOR REASON NOT MEASURED:

1. RESPONDENTFELT IT WOULD NOT BE SAFE
2. INTERVIEWER FELT IT WOULD NOT BE SAFE
3. RESPONDENT TRIED BUT WAS UNABLE TO COMPLETE THE MEASUREMENT/TEST
4. RESPONDEND DID NOT UNDERSTAND THE INSTRUCTIONS
5. RESPONDENT'S HEALTH CONDITION PREVENT MEASUREMENT
6. RESPONDENT HAS RASH, A CAST, EDEMA, OPEN SORES IN ARM (FOR US07a, US07b, US07c)
7. RESPONDENT'S HAND HAD SURGERY, SWELLING, INFLAMMATION, SEVERE PLAIN, SEVERE PAIN, OR INJURY IN LAST 6 MONTHS (US20a, US20b, US20c)
8. RESPONDENT RECENTLY HAD SURGERY OR IS INJURED OR IN CONDITIONS THAT PREVENT HIM/HER FROM WALKING (US19p)
9. NO SUITABLE SPACE
10. PROBLEM WITH EQUIPMENT OR SUPPLIES

US15a.	**CAPI CHEK: IF FEMALE 15-49 YEARS:** Are youpregnant?	1. Yes 3. No 6. Male or female <15 yearsorfemale>49years
US15b.	**CAPI CHEK: IF FEMALE 15-49 YEARS:** Are youhavingyourperiod?	1. Yes 3. No 6. Male or female <15 yearsorfemale>49years Tidak
US15c.	**CAPI CHEK: IF FEMALE 15-49 YEARS:** Are youbreastfeeding?	1. Yes 3. No 6. Male or female <15 yearsorfemale>49years
US18.	Are youfastingtoday?	1. Yes 3. No
US18b.	When did the last time you eat? **(Hour/Minute)**	⌊__⌋⌊__⌋ : ⌊__⌋⌊__⌋ 1. Today
US14.	**ACCORDING TO THE INTERVIEWER, HOW DOES THE HEALTH OF THIS PERSON COMPARE, IN GENERAL, TO THE HEALTH STATUS OF OTHER PEOPLE OF THE SAME AGE AND SEX?**	**Much worse** **About the same** **Very good** **1** 2
US18c.	**INTERVIEWER OBSERVATION:**Does [HHM NAME] have physical disability?	A. Right hand B. Left hand C. Right leg D. Left leg E. Blind F. Deaf G. Mute W. NO PHYSICAL DISABILITY

SECTION CP (INTERVIEW SESSION NOTES)

LANGMAIN. Interview was entirely/mostly conducted in what language?	⌊_⌊_⌊ Other _____
LANGOTHR. Other language used (if any):	⌊_⌊_⌊ Other _____

CODES FOR LANGUAGE:

00. Indonesian	04. Batak	08. Sasak	12. Makassar	16. Toraja	20. Lampung
01. Javanese	05. Bugis	09. Minang	13. Nias	17. Lahat	95. Other, _____
02. Sundanese	06. Chinese	10. Banjar	14. Palembang	18. Other South Sumatera	96. NO OTHER
03. Balinese	07. Maduranese	11. Bima	15. Sumbawa	19. Betawi	

C1. RESULT OF INTERVIEW OF BOOK IV	C2. REASON	C4. LOCAL SUPERVISOR MONITORING
1. Completed ➔ **C3**	1. Respondent was not at home/not available	Yes No
2. Partially completed	2. Respondent was seriously ill	a. Observed by local supervisor 1 3
3. Not completed	3. Respondent refused (to be interviewed)	b. Edited by local supervisor 1 3
	5. Other: _____	c. Verified by local supervisor..... 1 3

NOTES:

CONFIDENTIAL

INTERVIEWER: _____ ⌊_⌊_⌊_⌋ **HHID:** ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌊_⌋ ⌊_⌊_⌋

PID: ⌊_⌊_⌋

HOW TO ANSWER: CIRCLE RIGHT CHOICE AS EXAMPLE IN EK0

INDONESIA FAMILY LIFE SURVEY 2014

COGNITIVE MEASUREMENT TYPE 1 (EK1)

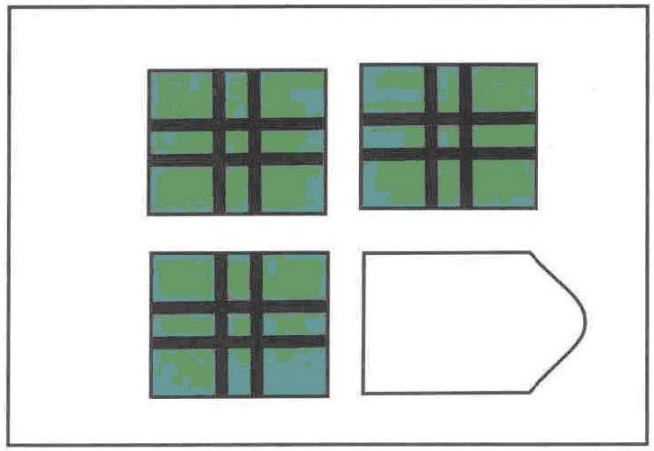
COV1.	**RESPONDENT'S NAME**	: _____ ⌊_⌊_⌋
AGE.	How old are you?	: ⌊_⌊_⌋ tahun
SEX.	Sex	: 1. Male
		3. Female
RESPTYPE.	Age 7 – 14 years ……	1
	EK1 respondent's in 2007 (AR01I=1)	2

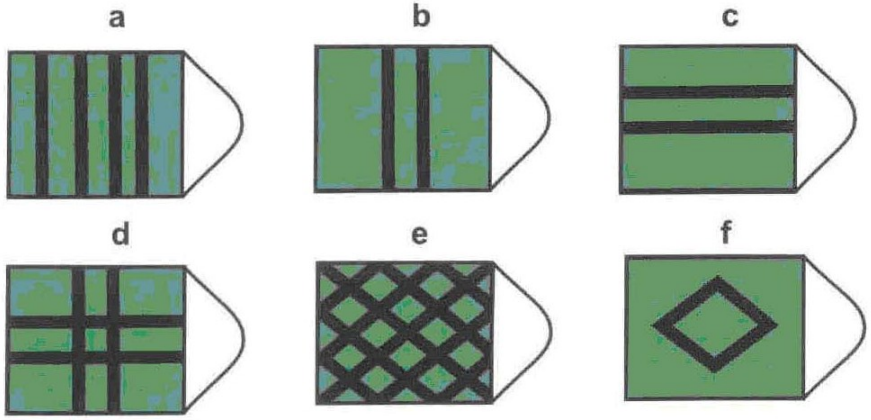
INTERVIEW	
DATE / MONTH / YEAR	⌊_⌊_⌋ / ⌊_⌊_⌋ / ⌊_⌊_⌋
START TIME (Hour / Minute)	⌊_⌊_⌋ / ⌊_⌊_⌋
FINISH TIME (Hour / Minute)	⌊_⌊_⌋ / ⌊_⌊_⌋

C3. RESULT INTERVIEW	
1.	Completed
2.	Not completed
3.	Not answered ⌊_⌋ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

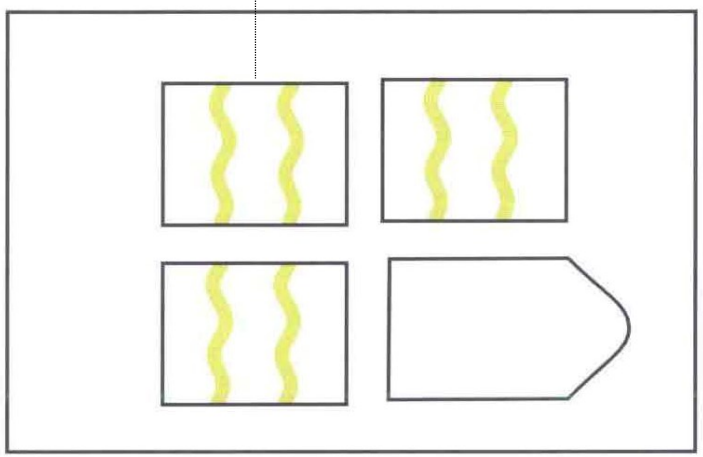
CODE C3.	
1. Refused	5. Proxy respondent
2. Cannot read	6. Other
3. Unable to answer	7. Could not be contacted
4. Not enough time	

EK0

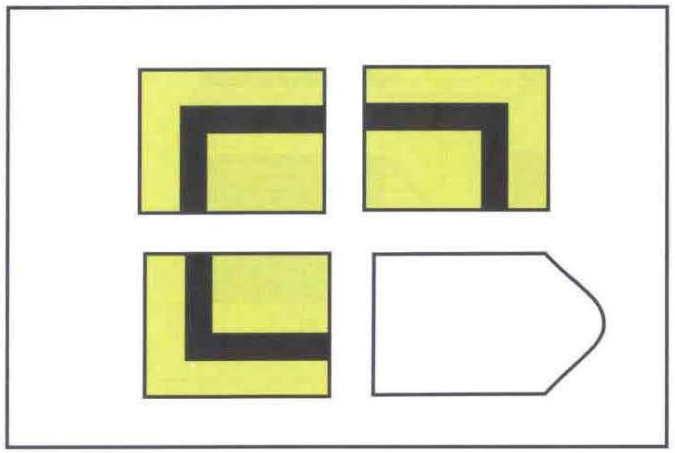


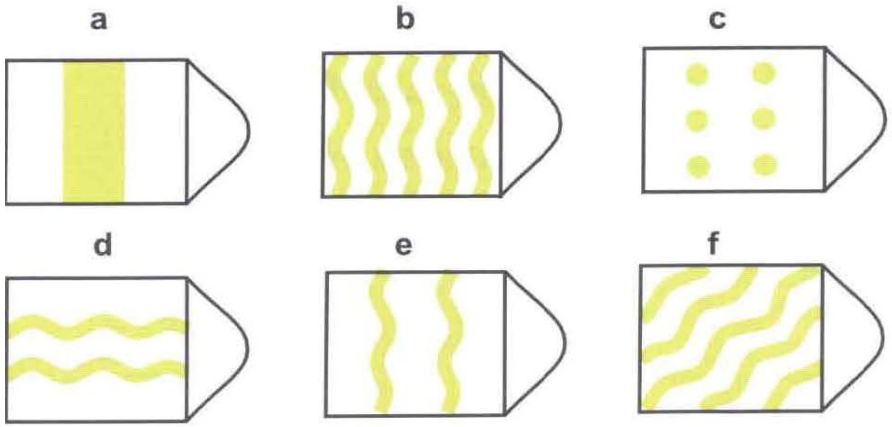


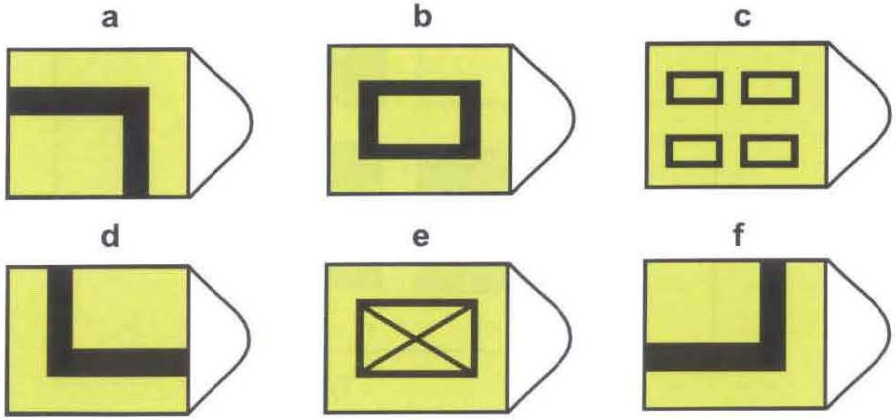
EK1



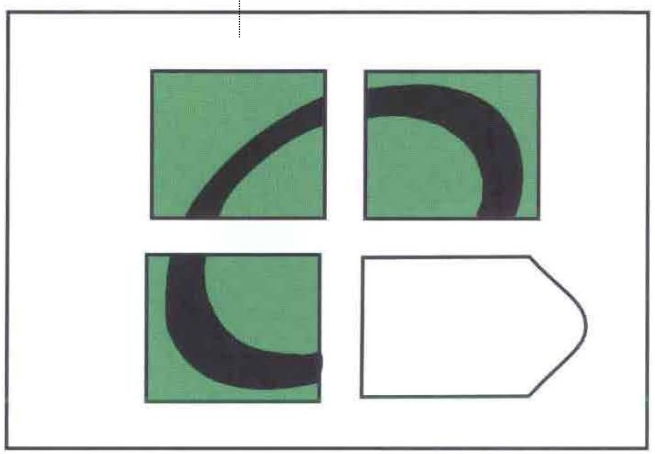
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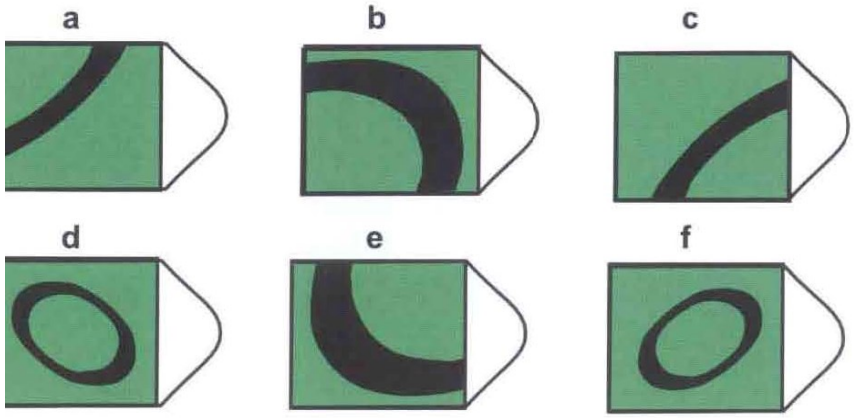




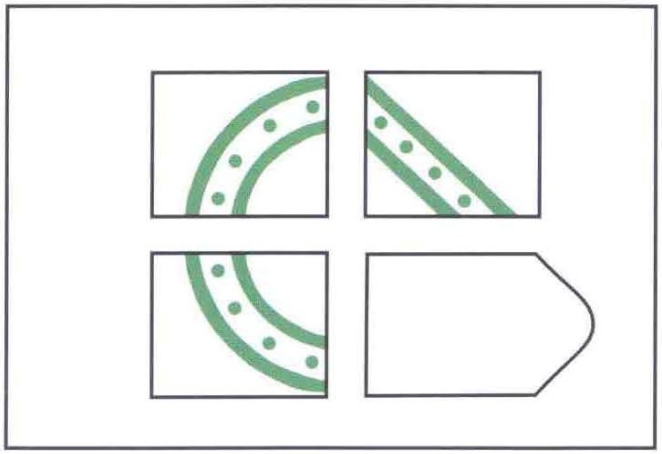


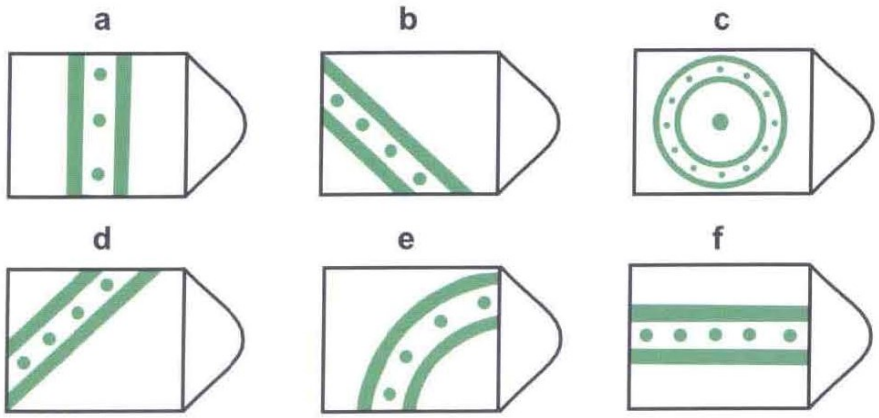
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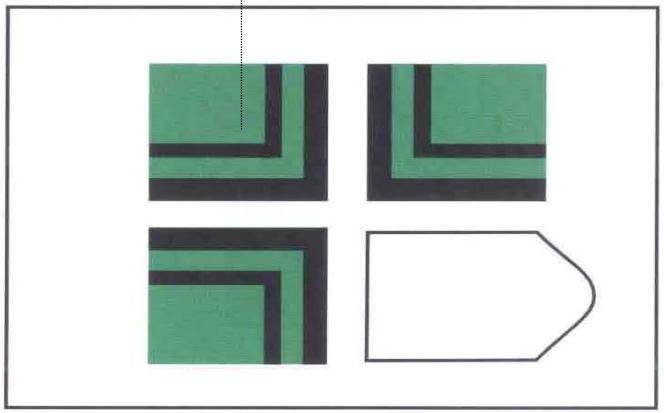


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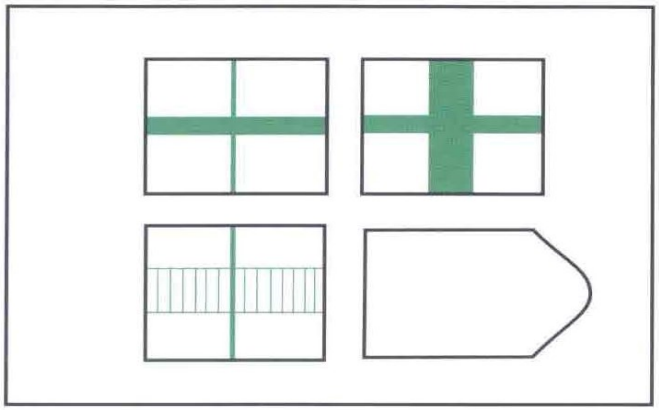




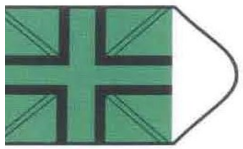
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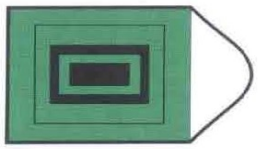
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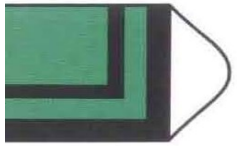
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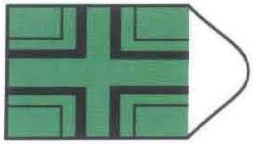
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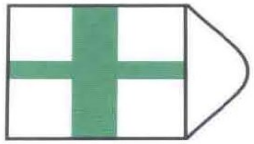
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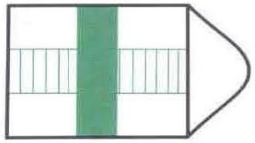
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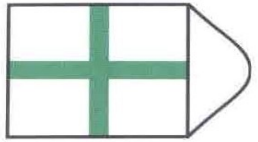
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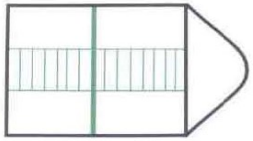
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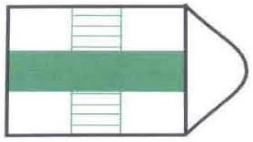
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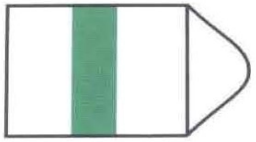
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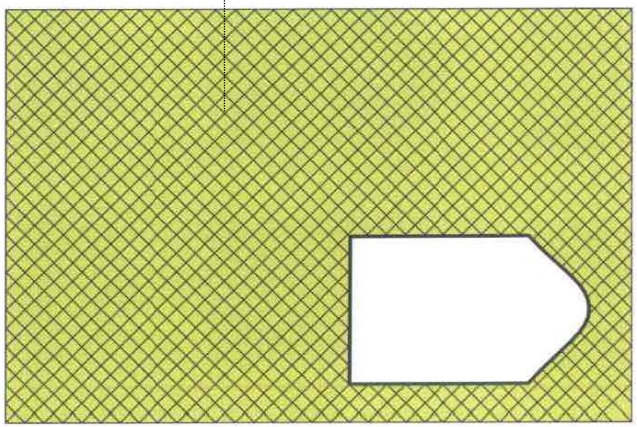
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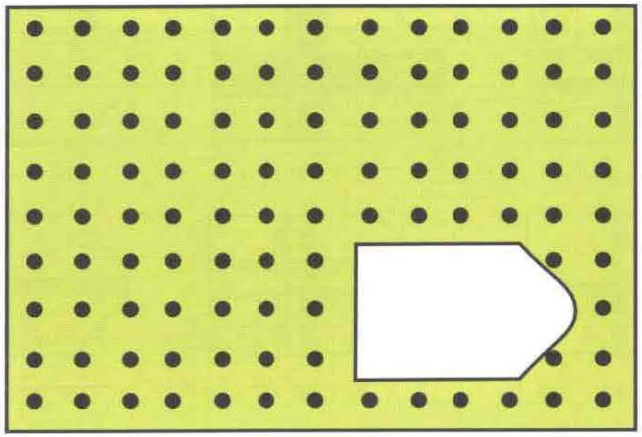
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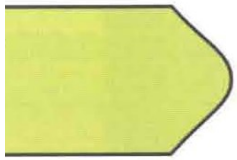
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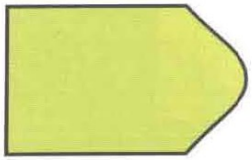
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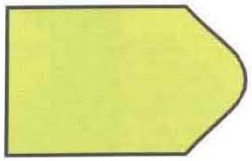
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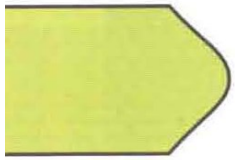
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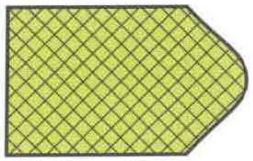
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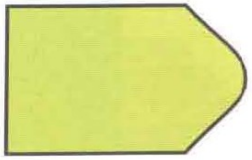
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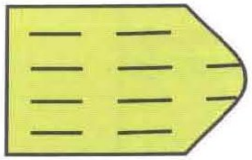
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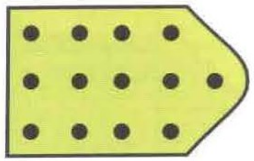
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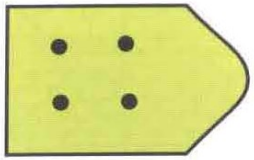
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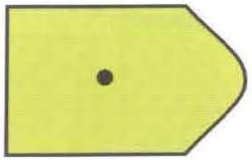
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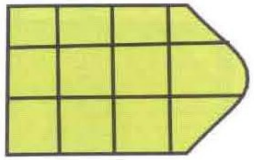
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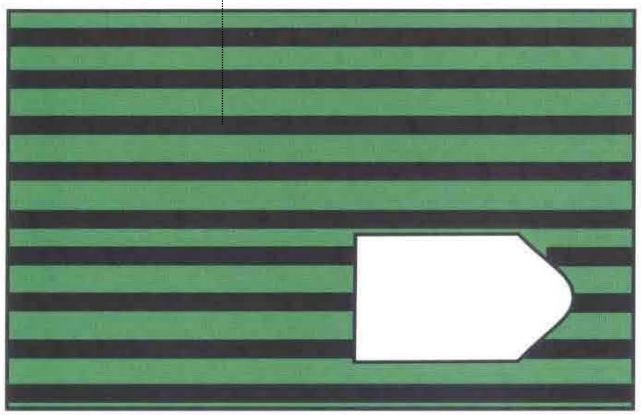
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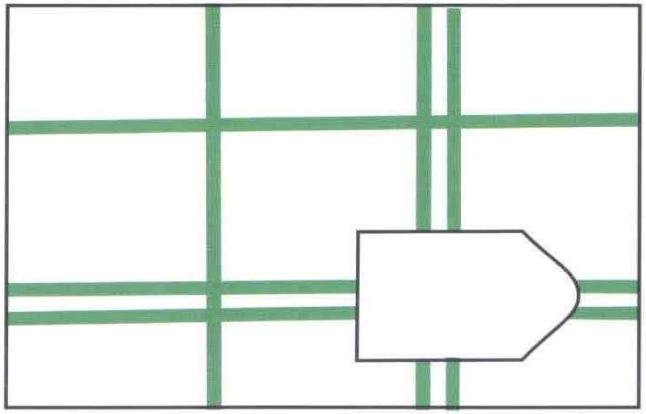
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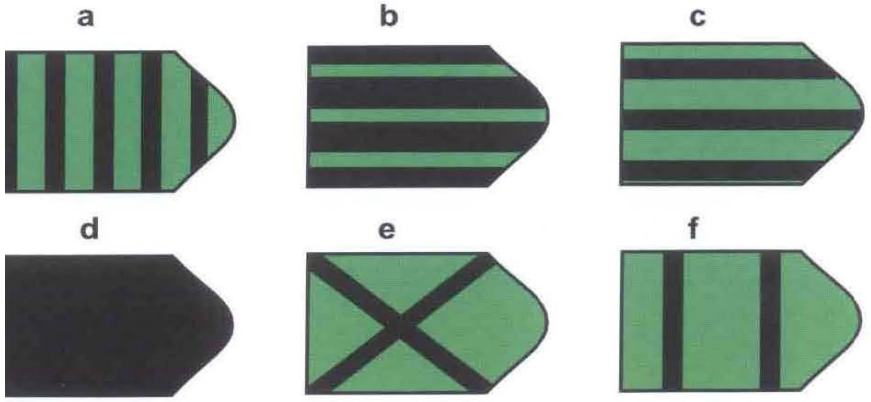


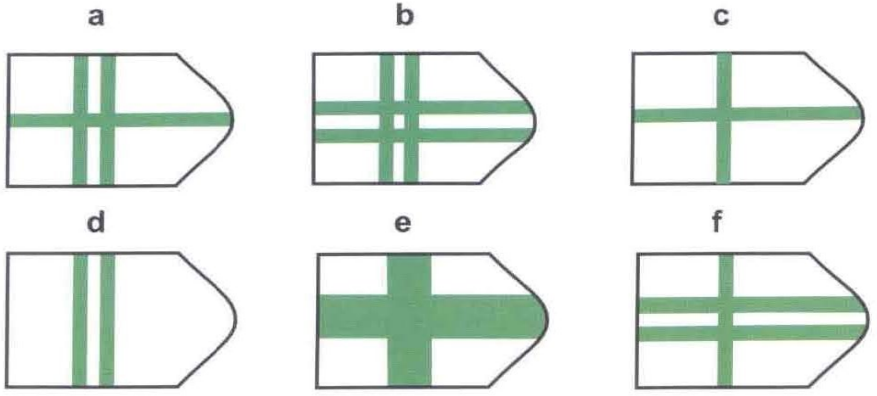
EK9



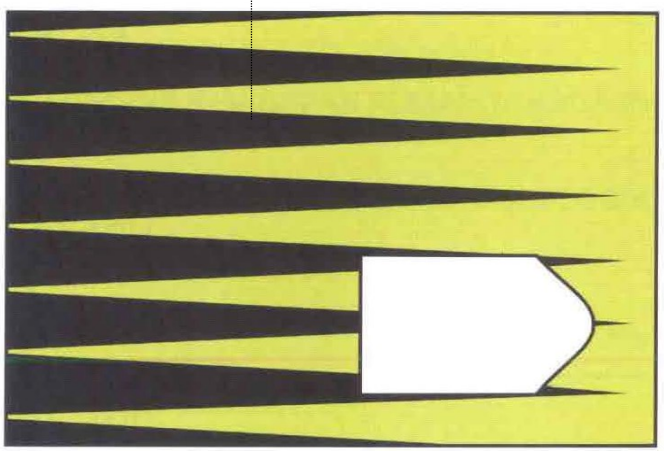
EK10



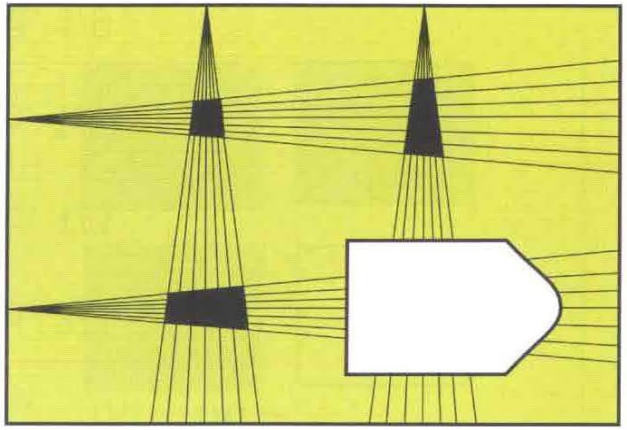


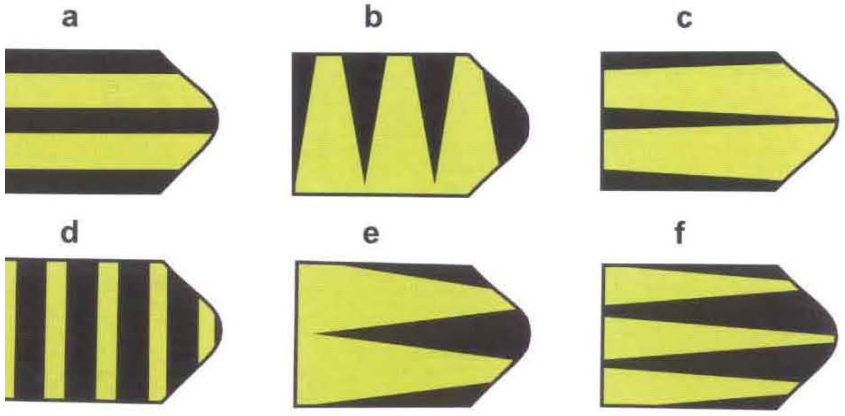


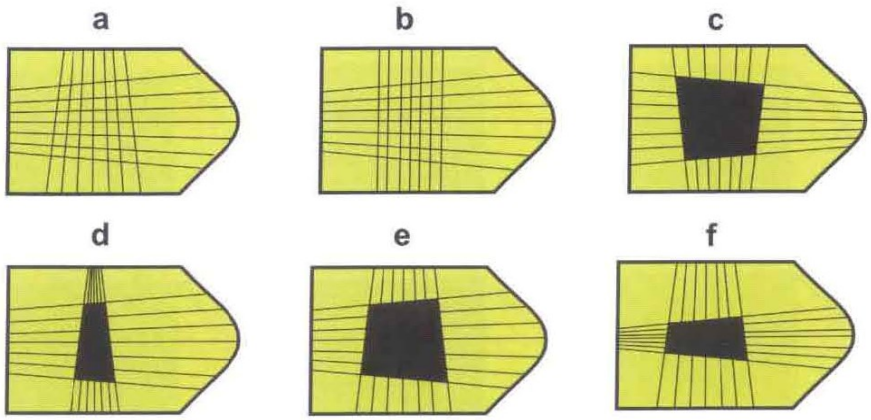
EK11



EK12







EK13. 49 - 23 = . . .

a. 25

b. 26

c. 27

EK14. 267 + 112 - 189 = . . .

a. 180

b. 188

c. 190

EK15. (8 + 9)*3 = . . .

a. 34

b. 45

c. 51

EK16. 56/84 = . . .

a. 4/7

b. 2/3

c. 3/4

d. 5/6

EK17. 1/3 - 1/6 = . . .

a. 2/3

b. 1/3

c. 1/6

d. 1/9

CONFIDENTIAL

INTERVIEWER: _____ ⌊_⌊_⌊_⌋ **HHID:** ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋

PID: ⌊_⌊_⌋

INDONESIA FAMILY LIFE SURVEY 2014

COGNITIVE MEASUREMENT TYPE 2 (EK2)

COV1.	**RESPONDENT'S NAME**	: _____ ⌊_⌊_⌋
AGE.	How old are you?	: ⌊_⌊_⌋ years old
SEX.	Sex	: 1. Male
		3. Female
RESPTYPE.	Age 15 – 59 years ……	1. All questions
	Age 60 or more	2. Only picture (EK1- EK12)

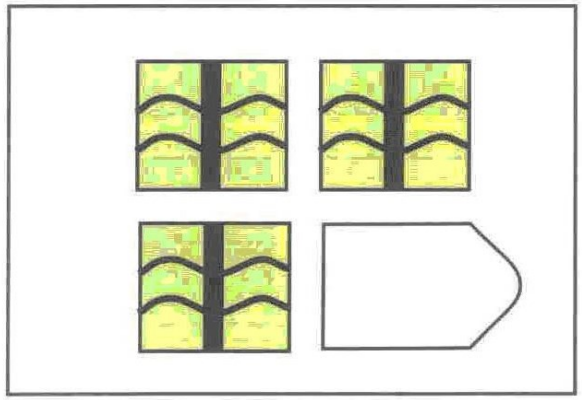
INTERVIEW	
DATE / MONTH / YEAR	⌊_⌊_⌋ / ⌊_⌊_⌋ / ⌊_⌊_⌋
START TIME (Hour / Minute)	⌊_⌊_⌋ / ⌊_⌊_⌋
FINISH TIME (Hour / Minute)	⌊_⌊_⌋ / ⌊_⌊_⌋

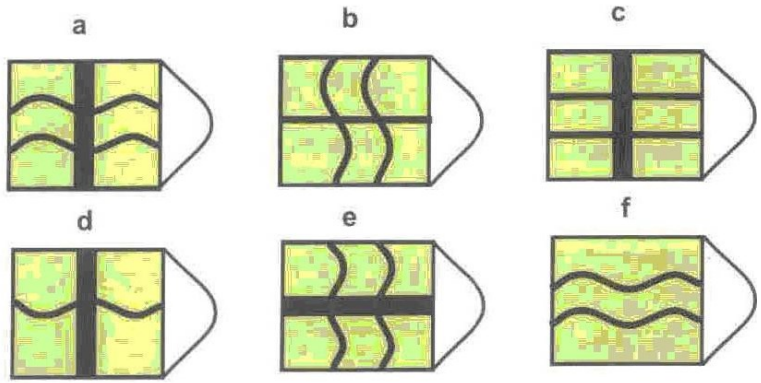
C3. RESULT INTERVIEW	
1.	Completed
2.	Not completed
3.	Not answered ⌊_⌋ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

CODE C3.	
1. Refused	5. Proxy respondent
2. Cannot read	6. Other
3. Unable to answer	7. Could not be contacted
4. Not enough time	

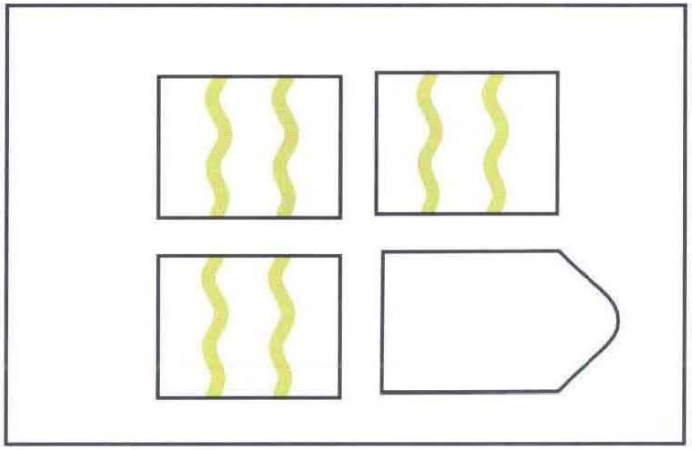
HOW TO ANSWER: CIRCLE RIGHT CHOICE AS EXAMPLE IN EK0

EK0

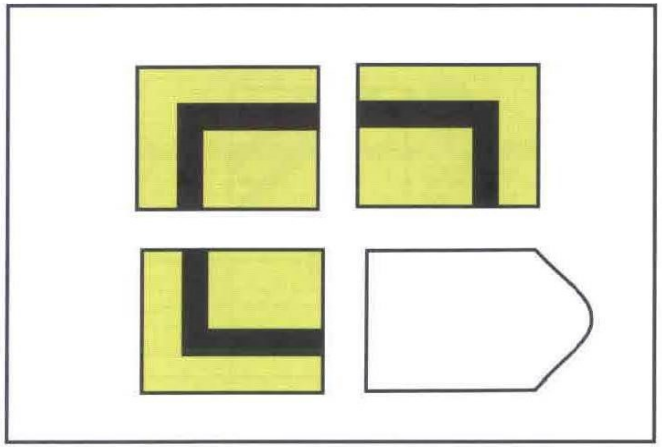


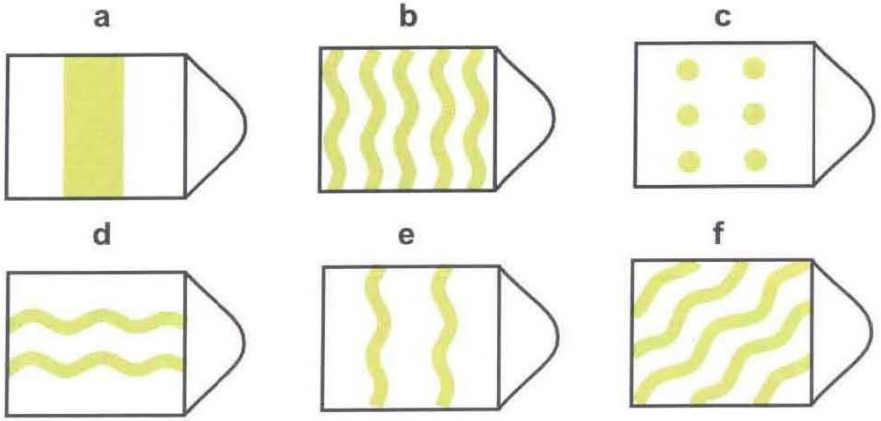


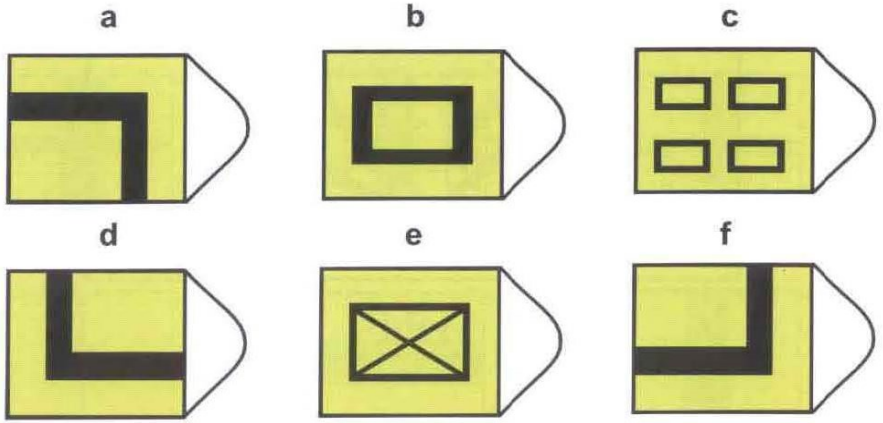
EK1



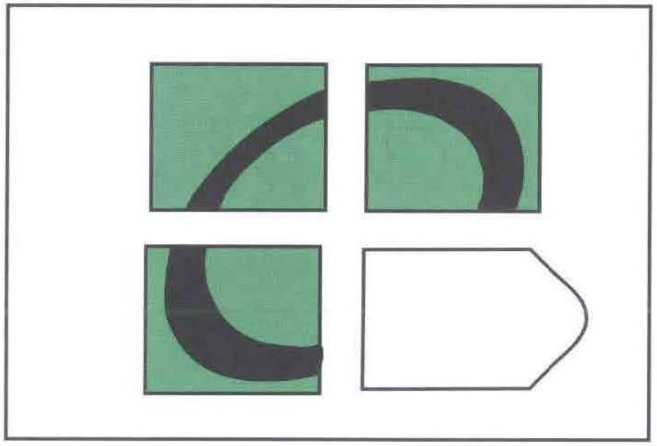
EK2



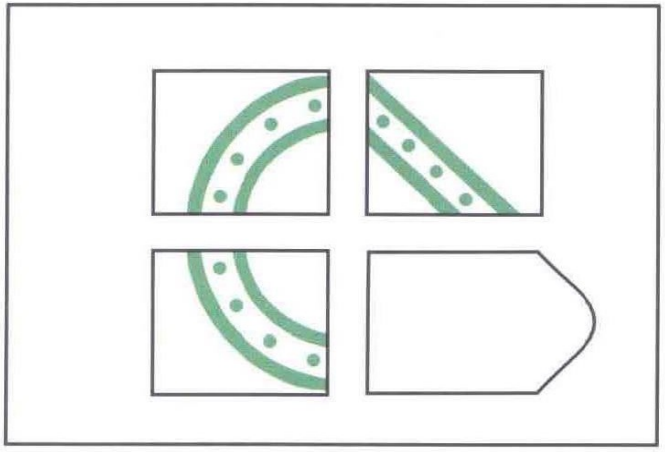


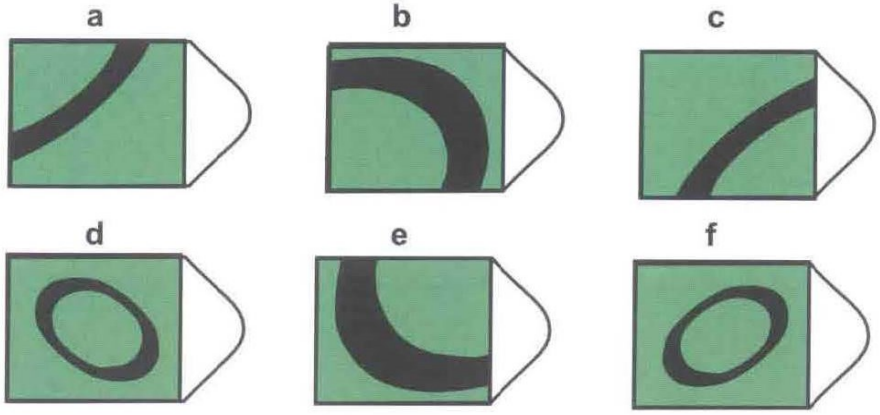


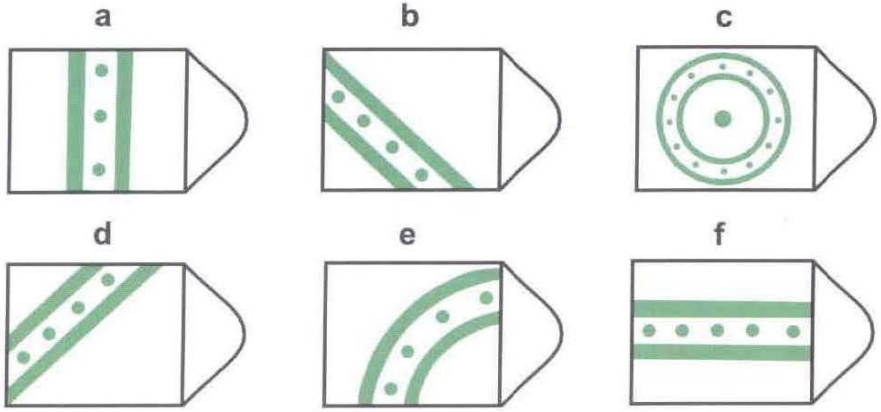
EK3



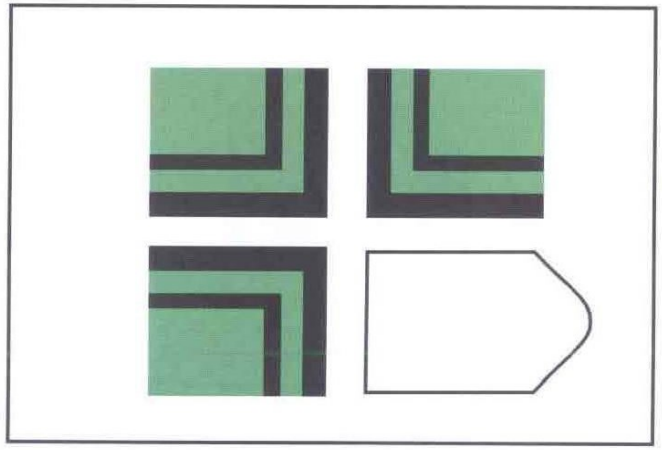
EK4



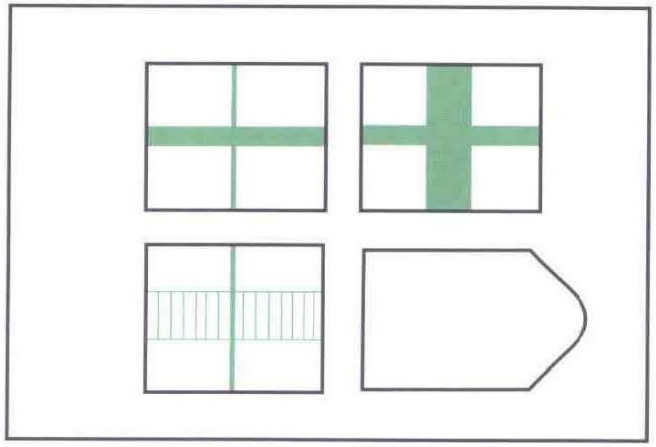




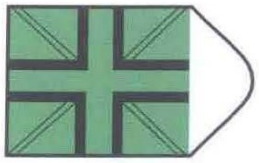
EK5



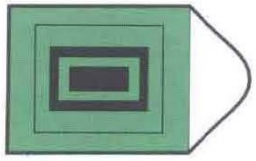
EK6



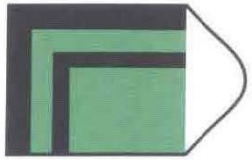
a



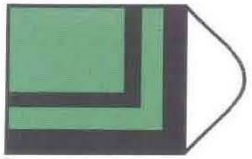
b



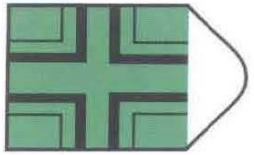
c



d



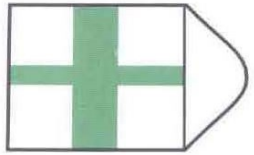
e



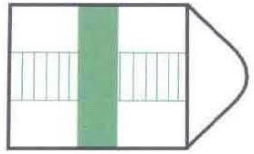
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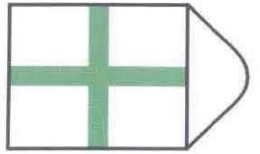
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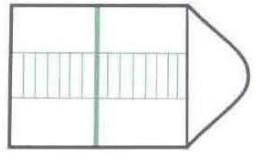
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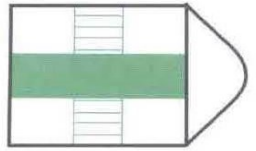
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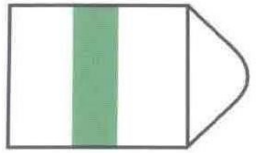
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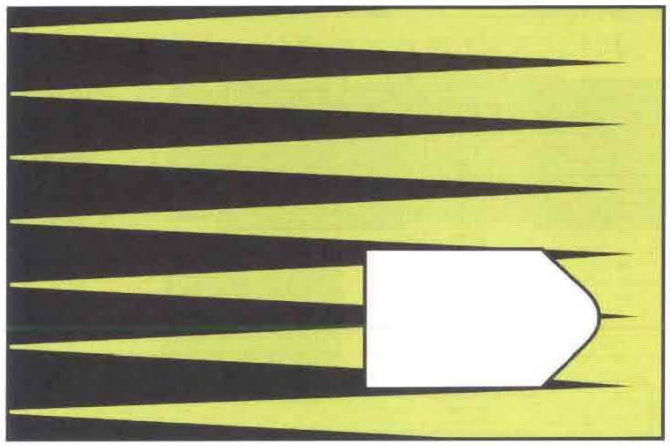
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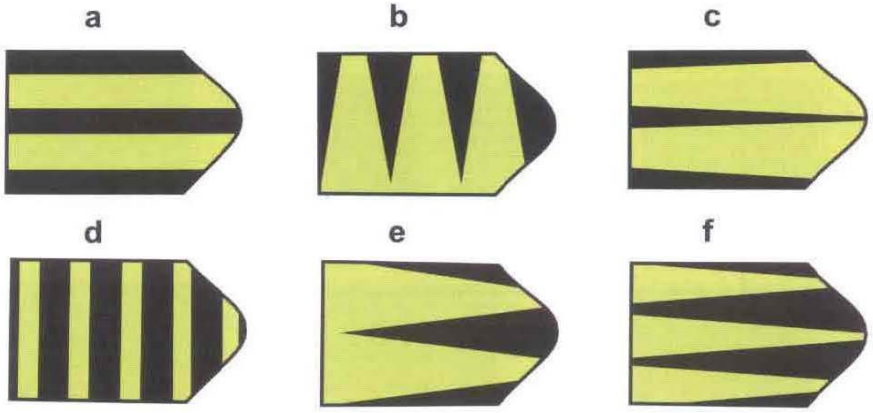


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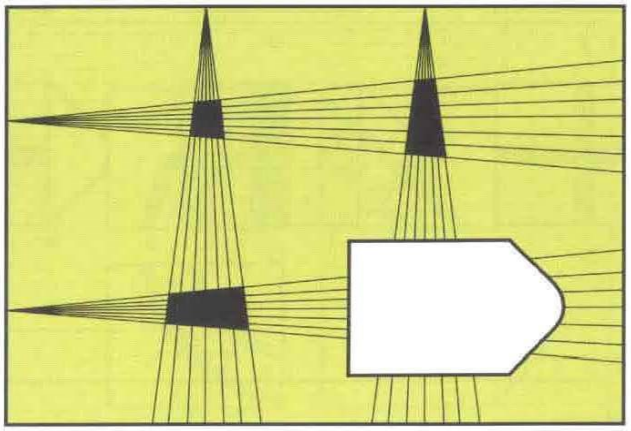


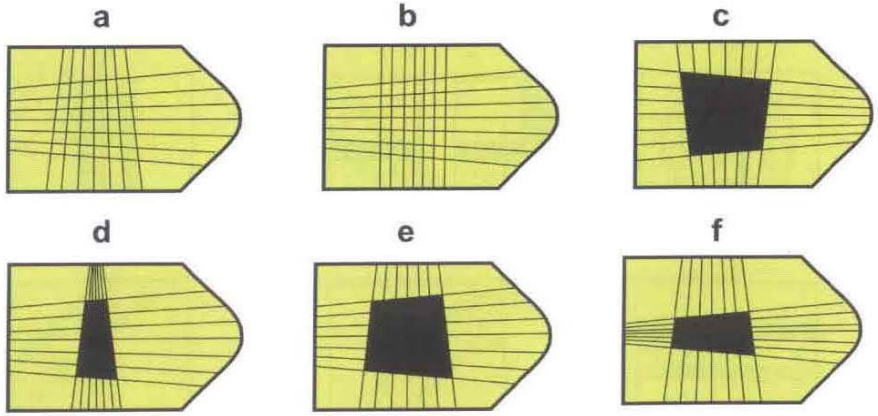
EK11





EK12





EK18. $\frac{56}{84} = \ldots$

a. $\frac{4}{7}$

b. $\frac{2}{3}$

c. $\frac{3}{4}$

d. $\frac{5}{6}$

EK19. (412 + 213) : (243 – 118)

a. 125

b. 75

c. 25

d. 5

EK20. 0,76 – 0,4 – 0,23

a. 0,11

b. 0,12

c. 0,13

d. 0,16

EK21. Jika 65 persen penduduk bercocok tanam, sedang penduduknya sejumlah 160 juta, maka banyaknya penduduk yang tidak bercocok tanam adalah…

a. 35 juta

b. 40 juta

c. 48 juta

d. 56 juta

EK22. Uang tabungan si Ali di bank Rp 75.000,00. Jika setahun kemudian bunganya 5%, maka besar bunga yang diterima Ali adalah…

a. Rp 7.500,00

b. Rp 3.750,00

c. Rp 750,00

d. Rp 375,00

INTERVIEWER : _____ ⌊_⌊_⌊_⌋ **HHID:** ⌊_⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ ⌊_⌊_⌋ **PID** ⌊_⌊_⌋

INDONESIA FAMILY LIFE SURVEY 2014

EXIT FORM

THE EXIT FORM IS FOR HOUSEHOLD MEMBER WHO IS AN INTERVIEW TARGET (AR01i=1) WHO WAS STILL ALIVE IN 2007 (AR01f = 1, 3, 5) BUT HAS DIED BY 2014 (AR01a=0)

RESVIS. INTERVIEWED?	**1. YES** **3. NO➔ C1**

FROM BOOK K:

NAME OF RESPONDENT (THE DECEASED): _____ ⌊_⌊_⌋ **PID**

TO BE ANSWERED BY HOUSEHOLD MEMBER:

SEXPROX. Sex: Male..... 1
Female..... 3

NAME OF HHM: _____ ⌊_⌊_⌋ **PIDPROX**

RELATPROX. RELATIONSHIP WITH THE DECEASED :

01. Spouse
02. Child
04. Parent
05. Sibling
06. In-law
95. Others, _____

AR00.	**PID** **(CAPI PRELOAD)**	⌊_⌊_⌋
PIDLINK.	**LINK ID (CAPI PRELOAD)**	⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊_⌊
EF01.	Did [R'S NAME] died of a (…) (**CIRCLE ALL THAT APPLY**)	Heart attack ..... A Heart problems ..... B Stroke ..... C Diabetes ..... D Cancer ..... E TBC ..... F Asthma ..... G Other respiratory illness ..... H Dengue ..... I Malaria ..... J Childbirth ..... K Kidney failure ..... L Other illnesses ..... M Accident ..... N Violence/conflict ..... O Suicide ..... J DON'T KNOW ..... Y
EF02.	How old was [R'S NAME] when he/she died?	⌊_⌊_⌊_⌋ year ..... 1 DON'T KNOW 8
EF03.	When did [R'S NAME] pass away?	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ 8. DON'T KNOW Month Year
EF04.	At the time of death, was [R'S NAME] in a hospital, in a nursing home, at home, in a hospice, or what?	At own home ..... 01 At other's house ..... 02 In a hospital ..... 03 In a nursing home ..... 04 In a hospice ..... 05 Others, _____ ..... 95 DON'T KNOW 98
EF05.	About how many days did [R'S NAME] stay in bed more than half the day because of illness or injury during the **last three months** before [his/her] death?	⌊_⌊_⌊_⌋ days ..... 1 DON'T KNOW 8
EF06.	**CAPI CEK : EF04=01**	Yes ..... 1 ➔ **EF08** No 3
EF07.	In what village, kecamatan, kabupaten, province, and country did [R'S NAME] die?	A. Village: 1. _____ 3. Same with HH 8. TT B. Sub-district: 1. _____ 3. Same with HH 8. TT C. District: 1. _____ 3. Same with HH 8. TT D. Province: 1. _____ 3. Same with HH 8. TT E. Country: 1. _____ 3. Same with HH 8. TT

EF08.	**CAPI CEK EF02 : ≥ 27 TAHUN?**	Yes ..... 1 ➔ **EF12** No 3
EF09.	Did [R'S NAME]ever attend school?	Yes ..... 1 No ..... 3 ➔ **EF12** DON'T KNOW ..... 8 ➔ **EF12**
EF10.	What was the highest level of education [R'S NAME]attended?	⌊_⌊ Others _____
EF11.	What was the highest class that [R'S NAME]finished?	00 01 02 03 04 05 06 07 98
EF12.	What was[R'S NAME]'sprimary activity now/before his/her death? **(IN THE LAST 12 MONTHS BEFORE DEATH)**	Job search ..... 02 ➔ EF14 School ..... 03 ➔ EF14 Attending school ..... 04 ➔ EF14 Retired ..... 05 ➔ EF14 At home/unemployed ..... 06 ➔ EF14 Sick/disabled ..... 07 ➔ EF14 DON'T KNOW ..... 98 ➔ EF14 Others _____ ..... 95 ➔ EF14 Working/trying to get work/ helping to earn income 01
EF13.	What is the employment status of [R'S NAME]before he/she died?	⌊_⌊
EF14.	How is the health status of [R'S NAME] before his/her death? **(IN THE LAST 12 MONTHS BEFORE DEATH)**	Very healthy ..... 1 Somewhat healthy ..... 2 Somewhat unhealthy ..... 3 Very unhealthy ..... 4 DON'T KNOW 8

CODE EF10:
- 02. SD
- 03. SMP (SLP/SLTP) General
- 04. SMP (SLP/SLTP) Vocational
- 05. SMU (SMA/SLA/SLTA) General
- 06. SMK (SMA/SLA/SLTA) Vocational
- 60. Akademi D1, D2, D3
- 61. University S1
- 62. University S2
- 63. University S3
- 11. Adult Educ A
- 12. Adult Educ B
- 13. Open University
- 14. Pesantren
- 15. Adult Educ C
- 17. School for the disabled
- 72. Madrasah Ibtidaiyah
- 73. Madrasah Tsanawiyah
- 74. Madrasah Aliyah
- 95. Others, _____
- 98. DON'T KNOW

CODE EF11:
- 00. Not completed grade 1
- 01. 1
- 02. 2
- 03. 3
- 04. 4
- 05. 5
- 06. 6
- 07. Graduated
- 98. DON'T KNOW

CODE EF13:
- 01. Self employed
- 02. Self employed with unpaid family workers/temp. workers
- 03. Self employed with permanent workers
- 04. Giovernment employee
- 05. Private employee
- 06. Unpaid family worker
- 07. Casual worker in agriculture
- 08. Casual worker in non-agriculture
- 98. DON'T KNOW

	EF1TYPE	EF15. Has [R'S NAME]ever been told by a doctor that he/she had [**……]**	EF16. When was [R'S NAME]first told by a doctor that [he/she] had)?	EF17. Since his/her last interview, did [R'S NAME]have a **[....]**?	EF18.In which organ or part of [R'S NAME]body does he/she have cancer? Including the origins and metastasis of tumor (**CHOOSE ALL THAT APPLY**)	EF19.Has he/she taken any of the following treatments to treat[R'S NAME][….] **in the past two years?** (**CHOOSE ALL THAT APPLY)**
A	**Heart problems**	1. Yes ➔ 3. No ↓	1. Age ⌊_⌋⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		⌊_⌋
B	**Cancer**	1. Yes ➔ 3. No ↓	1. Age ⌊_⌋⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No	⌊_⌋	⌊_⌋
C	**Stroke**	1. Yes ➔ 3. No ↓	1. Age ⌊_⌋⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		⌊_⌋
D	**Diabetes**	1. Yes ➔ 3. No ↓	1. Age ⌊_⌋⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		⌊_⌋
E	**Emotional/nervous/psychiatric problem**	1. Yes ➔ 3. No ↓	1. Age ⌊_⌋⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		⌊_⌋
F	**Kidney**	1. Yes ➔ 3. No ↓	1. Age ⌊_⌋⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		⌊_⌋
G	**TBC**	1. Yes ➔ 3. No ↓	1. Age ⌊_⌋⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		
H	**Dengue**	1. Yes ➔ 3. No ↓		1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		
I	**Malaria**	1. Yes ➔ 3. No ↓		1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		

	EF1TYPE	EF15. Has [R'S NAME]ever been told by a doctor that he/she had [**……]**	EF16. When was [R'S NAME]first told by a doctor that [he/she] had)?	EF17. Since his/her last interview, did [R'S NAME]have a **[....]**?	EF18.In which organ or part of [R'S NAME]body does he/she have cancer? Including the origins and metastasis of tumor (**CHOOSE ALL THAT APPLY**)	EF19.Has he/she taken any of the following treatments to treat[R'S NAME][….] **in the past two years?** (**CHOOSE ALL THAT APPLY)**
J	**Asthma**	1. Yes ➔ 3. No ↓	1. Age ⌊_⌋⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	1. Yes, most recenty 1. Age ⌊_⌋⌊_⌋⌊_⌋ 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 3. No		⌊_⌋

CODE EF18 (CANCER)

A. Brain	F. Lung	K. Pancreas	P. Cervix	U. Non Hodgkin Lymphoma
B. Oral cavity	G. Breast	L. Kidney	Q. Endometrium	V. Others, _____
C. Larynx	H. Oesophagus	M. Prostate	R. Colon/rectum	W. Leukemia
D. Other parynx	I. Stomach	N. Testicular	S. Kantung kemih	
E. Thyroid	J. Liver	O. Ovary	T. Skin	

CODE EF19 (TREATMENT):

A. Take traditional medicine	F. Control smoking
B. Take modern medicine prescribed by a doctor	G. Chemotherapy
C. Surgery	H. Radiotherapy
D. Change diet	W. No treatment
E. Exercise	

EF20	Did [R'S NAME]have memory problems as of **one month** before[he/she] died?	1. Yes 3. No ➔ **EF22**
EF21	How old was [R'S NAME] when memory problems became apparent?	1. Age ⌊_⌋⌊_⌋ years 2. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
EF22	Has [R'S NAME] fallen down in the last **two years?**	1. Yes 3. No ➔ **EF24**
EF23	How many times has [R'S NAME] fallen down seriously enough to need medical treatment?	⌊_⌋⌊_⌋⌊_⌋ times
EF24	Has [R'S NAME] fractured his/her hip since we talked in the last interview?	1. Yes 3. No
EF25	Was [R'S NAME] often troubled with pain?	1. Not at all 2. A little bit 3. Some 4. Quite a bit 5. A lot
EF26	Did [R'S NAME] gainor lose 5 or more kilograms in the**last 2 years** of his/her life?	Yes, only gained weight ..... 1 Yes, only lost weight ..... 2 Yes, first gained and then lost weight ..... 3 Yes, first lost and then gained weight ..... 4 No 5
EF27	Did [R'S NAME] ever smoke cigarettes in the **last two years** of [his/her] life?	1. Yes 3. No ➔ **EF29**
EF28	About how many cigarettes did [R'S NAME] usually smoke in a day?	⌊_⌋⌊_⌋⌊_⌋ batang
EF29	In the last **two years** before [his/her] death, did [R'S NAME] ever drink any alcoholic beverages such as beer, wine, or liquor?	Ya, setidaknya sekali sebulan ..... 1 Ya, kurang dari sekali sebulan ..... 2 Tidak 3
EF30	Because of a health or memory problem did anyone help [R'S NAME] with dressing, bathing, eating, getting in/out of bed, going to the toiletin the last **3 months of h**is/her life ?	Yes ..... 1 No ..... 3 ➔ **EF32** DON'T KNOW ..... 8 ➔ **EF32**

EF31	For how long/since when has [R'S NAME] needed help?	1. For ⌊_⌋⌊_⌋ days 2. For ⌊_⌋⌊_⌋ months 3. For ⌊_⌋⌊_⌋ years 4. Since ⌊_⌋⌊_⌋ years old 5. Since year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋
EF32	About how much did [R'S NAME] pay out-of-pocket for medical expenses in the last **6 months** before [his/her] death]?	1. Rp ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW
EF33	How much does the whole funeral cost, including costs of coffin/cinerary casket, portrait and funeral ceremony, etc, excluding grave cost.	1. Rp ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW
EF34	Who paid for the money?(Choose all that apply)? **CAPI PRELOAD ROSTERS FROM 2014 AR AND 2007 BA CHILDREN**	A. Parents : PID ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ B. Father/mother in law : PID ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ C. Spouse : PID ⌊_⌋⌊_⌋ D. Childrens : PID ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ E. Sons/daugthers in law : PID ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ F. Grandsons : PID ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ G. Grandaughters : PID ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ H. Relatives : PID ⌊_⌋⌊_⌋ ⌊_⌋⌊_⌋ I. Place of work/union J. Insurance V. Others, _____
EF35	EF35 Has [R's NAME] or his/her household prepared for his/her funeral by buying a cemeteryh plot or making payments/acquiring membership to funeral preparation services?	No ..... 3 ➔ **CK1** Yes 1
EF36	How much has [R's NAME] has spent on his/her funeral preparation until the time of his/her death?	1. Rp ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW

EVALUATION FORM

LANGMAIN. Interview was entirely/mostly conducted in what language?	⌊_⌋⌊_⌋ Others _____
LANGOTHR. Other languages used (if any):	⌊_⌋⌊_⌋ Others _____

CODE FOR LANGUAGE

00. Indonesia	04. Batak	08. Sasak	12. Makassar	16. Toraja	20. Lampung
01. Jawa	05. Bugis	09. Minang	13. Nias	17. Lahat	95. Others, _____
02. Sunda	06. Cina	10. Banjar	14. Palembang	18. Other Sumatera Selatan	96. NONE
03. Bali	07. Madura	11. Bima	15. Sumbawa	19. Betawi	

C1. INTERVIEW RESULT	C2. CODE FOR REASON FOR "3" / "2" IN C1	C4. MONITORING BY SUPERVISOR		
			Ya	Tidak
1. Completed ➔**C4**	1. Respondent not found/not at home			
2. Partially completed	2. Respondent sick	a. Observed	1	3
3. Not completed	3. Respondent refused	b. Checked	1	3
	5. Other	c. Verified	1	3

CONFIDENTIAL

INTERVIEWER : _____ ⌊_⌊_⌊_⌋ **HHID: ⌊_⌊_⌊_⌋ ⌊_⌊_⌊_⌋ ⌊_⌊_⌊_⌋ ⌊_⌊_⌋**

INDONESIA FAMILY LIFE SURVEY 2014

PROXY BOOK

SECTION: DL, KW, MG, TK, KM, KK, CD, MA, PNA, AK, RJ, RN, PM, BA, TF, BR, CH, CX, CP

Respondent is an adult aged 15 and above

RESVIS.	INTERVIEWED?	1. Yes 3. No ➔ C1

COMPLETED FROM ROSTER

RESPONDENT'S NAME:_____ PID: ⌊_⌊_⌋

RSPNDNT. **RESPONDENT:** Head of Household (AR02b=01) 1
(CAPI CHECK) Spouse of Household (AR02b=02) 2
Spouse of Household (AR02b=02) 3

PANEL. FOR BOOK III IS HOUSEHOLDER : Panel Respondent (AR01g=1) 1
(CAPI CHECK) New Respondent (AR01g=3) 3

TO BE FILLED OUT BY INTERVIEWER FOR BOOK PROXY

NAME OF PROXY: _____ ⌊_⌊_⌋ PIDPROX

RELATPROX. **RELATIONSHIP WITH THE RESPONDENT:**

01. Spouse 02. Child 04. Parent
05. Sibling 06. In-law 95. Other .....

REASPROX. **REASON FOR PROXY: _____**

TO BE FILLED OUT BY INTERVIEWER FOR BOOK PROXY

AGE. How old is [RESPONDENT'S NAME]? ⌊_⌊_⌊_⌋ years

MARSTAT. Marital status:
Unmarried 1
Married 2
Separated 3
Divorced 4
Widowed 5

SEX. Sex:
Male 1
Female 3

DOB. Birth date: ⌊_⌊_⌋ / ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋
Day Month Year

NAT_ID. Does respondent have a national ID card?:
1. Yes, regular ID card
2. Yes, electronic ID card (e-KTP)
3. No

BIRTH_CERT. Does respondent have a birth certificate? 1. Yes (can show it if asked) 3. No

BIRTH_CERT_REASON. Main reason not have a birth certificate : ⌊_⌋

1 Expensive
2 Didn't know how to get one
3 Not important
4 Too far
5. Didn't know it was required
6 Complicated process
7 Cannot show if asked /misplaced birth certificae

SECTION DL (EDUCATION)

The following questions pertain to [R'S NAME] education.

DL01a.	What languages does [R'S NAME] speak in daily life at home? **(CIRCLE ALL THAT APPLY)**	Indonesian .....W Javanese .....A Sundanese.....B Maduranese.....C Balinese.....D Sasak.....E Minang .....F Batak.....G Bugis.....H Chinese.....I Banjar .....J Bima.....L Makassar .....M Nias.....N Palembang.....O Sumbawa.....P Toraja.....Q Lahat.....R Other South Sumatra .....S Betawi .....T Lampung.....U Other.....V
DL02.	Can [R'S NAME] read an Indonesian-language newspaper?	Yes..... 1 No 3
DL02a.	Can [R'S NAME] read a newspaper in another language?	Yes..... 1 No 3
DL03.	Can [R'S NAME] write a letter in Indonesian?	Yes..... 1 No 3
DL03a.	Can [R'S NAME] write a letter in another language?	Yes..... 1 No 3
DL03b.	Does [R'S NAME] have cell phone?	Yes..... 1 No ..... 3 **→DL3d**
DL03c.	What does [R'S NAME] usually use the cell phone for?	A.Private conversation B.Bussiness conversation C.Text Message D.Email E.Social Media (chatting,facebook,Twitter) F.Mobile Banking G.Transfer phone minutes H. Entertainment/multimedia (games, ringtone, TV, Radio,MP3)
DL03d.	Do you have internet access?	No ..... 3 **→DL04** Yes..... 1
DL03e	Where does [R'S NAME] get internet access?	A.Computer at home B.Computer at school C.Computer at place of work D.Computer at Internet Cafe E.Handphone V.Others
DL04.	Has [R'S NAME] ever attended/is [R'S NAME] attending school?	No..... 3 **→DL05b** Yes. 1
DL06.	What is the highest education level attended? **[NOTE TO INTERVIEWER: IF THEY ARE CURRENTLY ATTENDING SCHOOL, RECORD THE LEVEL THEY ARE CURRENTLY ATTENDING]**	ELEMENTARY.....02 JUNIOR HIGH GENERAL.....03 JUNIOR HIGH VOCATIONAL .....04 SENIOR HIGH GENERAL.....05 SENIOR HIGH VOCATIONAL.....06 COLLEGE (D1, D2, D3) .....60 UNIVERSITY (BACHELOR).....61 UNIVERSITY (MASTER).....62 UNIVERSITY (DOCTORATE) .....63 ADULT EDUCATION A. .....11 ADULT EDUCATION B .....12 ADULT EDUCATION C .....15 OPEN UNIVERSITY.....13 ISLAMIC SCHOOL *(PESANTREN)* .....14 SCHOOL FOR DISABLED .....17 ISLAMIC ELEMENTARY SCHOOL *(MADRASAH IBTIDAIYAH)* .....72 JUNIOR/HIGH SCHOOL *(MADRASAH TSANAWIYAH)*.....73 ISLAMIC SENIOR HIGH SCHOOL (*MADRASAH AALIYAH)*.....74 KINDERGARTEN.....90 DON'T KNOW .....98 OTHER: 95
DL07.	What is the highest grade completed at that school?	Did not complete first grade at that level ..... 00 1 ..... 01 5..... 05 2 ..... 02 6..... 06 3 ..... 03 Graduated..... 07 4 ..... 04 DON'T KNOW 98
DL05a.	At what age did [R'S NAME] first attend the elementary school?	⌊__⌋⌊__⌋ Age
DL05b.	Did [R'S NAME] attend a kindergarten?	No..... 3→ **DL05** Yes. 1
DL05c.	At what age did [R'S NAME] first attend the kindergarten?	⌊__⌋⌊__⌋ Age
DL05.	**CAPI CHECK COV3:**	**RESPONDENT'S AGE ≥50 YEARS..... 1 → SECTION KW** **RESPONDENT'S AGE < 50 YEARS 3**
DL05f.	**CAPI CHECK DL04: (EVER /CURRENTLY ATTEND SCHOOL)**	**DL04=3 ..... 3 → SECTION KW** **DL04=1 ..... 1**
DL06x.	**CAPI CHECK DL06: 14 (PESANTREN)?**	**NO ..... 3 → SECTION KW** **YES..... 1**

SECTION DL (EDUCATION)

DL07a.	Is [R'S NAME] currently attending school? NOTES :IF DL07a=1 , THEN DL 07 MUST NOT= 07	No ..... 3 ➔ **DL07x** Yes..... 1
DL07aa.	How many effective hours did [R'S NAME] attend school last week or the last week the school was in session? (**NOT INCLUDING BREAKS**)	⌊__⌋⌊__⌋ hours
DL07x.	**CAPI CHECK : PANEL RESPONDENT? (COV 2)**	**PANEL RESPONDENT..... 1 ➔ DL07d** **NEW RESPONDENT..... 3 ➔ DL08b**

SECTION DL (EDUCATION)

PANEL RESPONDENT BOOK 3 (AR01g=1) ⬇			NEW RESPONDENT BOOK 3 (AR01g=3) ⬇	
DL07d.	**CAPI CHECK DL07a: CURRENTLY ATTENDING SCHOOL?**	**YES. ..... 1➔DL08a** **NO 3**	**DL08b.** **CAPI CHECK DL06: HIGHEST LEVEL OF SCHOOLING ATTENDED/CURRENTLY ATTENDING**	ELEMENTARY ..... 1 JUNIOR HIGH ..... 2 SENIOR HIGH ..... 3 D1, D2, D3, UNIVERSITY 4
DL07b.	In what month and year did [R'S NAME] last graduate or leave school?	⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month / Year		
DL07e.	**CAPI CHECK DL07b: GRADUATED/LEFT SCHOOL BEFORE JUNE 2007?**	**BEFORE JUNE 2007 ..... 1➔DL16xc** **JUNE 2007 OR AFTER 3**	**DL09b.** **CAPI CHECK DL08a AND WRITE DOWN THE NUMBER OFCOLUMNS ACCORDING TO THE HIGHEST LEVEL OF SCHOOLING**	⌊_⌋ columns **COMPLETE DL10-DL16j FOR EACH LEVEL OF SCHOOLING EVER ATTENDED**
DL08a.	What levels of schooling [R'S NAME] has attended/are attending since June 2007?	ELEMENTARY ..... A JUNIOR HIGH ..... B SENIOR HIGH ..... C D1, D2, D3, UNIVERSITY ..... D		
DL09a.	**CAPI CHECK DL08a AND WRITE DOWN THE NUMBER OF COLUMNS ACCORDING TO THE LEVELS OF SCHOOLING ATTENDED SINCE JUNE 2007**	⌊_⌋ columns **COMPLETE DL10-DL16j ONLY FOR THE LEVELS OF SCHOOLING ATTENDED SINCE JUNE 2007**		

SECTION DL (EDUCATION)

DL16xb.	**CAPI CHECK :**	**PANEL RESPONDENT (AR01g=1).....1➔ISI DL16a-DL16e ACCORDING TO LEVELS OF SCHOOLING ATTENDED SINCE JUNE 2007** **NEW RESPONDENT ≥30 YEARS OLD .....2➔DL16xc** **NEW RESPONDENT <30 YEARS OLD .....3➔ISI DL16a-DL16e FOR ALL LEVELS OF SCHOOLING EVER ATTENDED**

School Level (DL2TYPE)		**1. Elementary**	**2. Junior High**	**3. Senior High**	**4. D1, D2, D3//University**
DL16a.	Have [R'S NAME] ever taken the EBTANAS/UAN/UN exam at [...] level?	DON'T KNOW . 8➔**DL16xc** No ..... 3➔**DL16a COL 2** Yes 1	DON'T KNOW 8➔**DL16xc** No ..... 3➔**DL16a COL 3** Yes 1	DON'T KNOW . 8➔**DL16xc** No ..... 3➔**DL16a** Yes 1	
DL16b.	Can you show us the official record of [R'S NAME] EBTANAS/UAN/UN score (DANEM)? **INTERVIEWER NOTE:** **EBTANAS/UAN/UN SCORES SHOULD BE COPIED FROM THE OFFICIAL RECORD (DANEM).**	Yes ..... 1 No 3	Yes ..... 1 No 3	Yes ..... 1 No 3	
DL16c.	What month and year did **[R'S NAME]** take the EBTANAS/UAN/UN [...]?	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month Year 8. DON'T KNOW	
DL16c1.	CAPI CHECK DL16a: EBTANAS/UAN/UN	EBTANAS .....1 UAN/UN 2	EBTANAS .....1 UAN/UN 2	EBTANAS .....1 UAN/UN 2	
DL16c2.	**Number of subjects tested in the national exam (EBTANAS/UAN/UN) for the […] school level:**	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	
DL16d.	What was [R'S NAME] ebtanas score for the following subjects: (If the respondent shows you official record (*DANEM*) copy from danem, if you cannot see official record (*DANEM*) ask the respondent for their score).				
	B. Indonesian	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	
	C. English	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	
	D. Math	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋ 6 . NA 8. DON'T KNOW	
DL16e.	**Total EBTANAS/UAN/UN**	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 8. DON'T KNOW ➔**DL16a COL 2\DL16xc**	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 8. DON'T KNOW ➔**DL16a COL 3\DL16xc**	1. ⌊_⌋⌊_⌋ , ⌊_⌋⌊_⌋ 6. NB 8.DON'T KNOW ➔**DL16xc**	

SECTION DL (EDUCATION)

DL16xc.	**CAPI CHECK DL06:**	**└┘ columns ➔ WRITE DOWN THE NUMBER OF COLUMNS ACCORDING TO LEVELS OF SCHOOLING EVER ATTENDED**
DL16xd.	**CAPI CHECK DL07x and DL07e**	**PANEL RESPONDENT OF BOOK 3 WHO IS CURRENTLY ATTENDING SCHOOL/HAS ATTENDED SCHOOL SINCE JUNE 2007 ..... 1** **NEW RESPONDENT ..... 2** **PANEL RESPONDENT OF BOOK 3 WHO GRADUATED/LEFT SCHOOL BEFORE JUNE 2007 3 ➔ KW**

	School Level (DL2TYPE)	**1. Elementary**	**2. Junior High**	**3. Senior High**	**4. D1, D2, D3//University**
DL11a.	When did [R'S NAME] first attended schooling at this level?	1. Year: └┘└┘└┘└┘ **➔DL11c** 8. DON'T KNOW	1. Year: └┘└┘└┘└┘ **➔DL11c** 8. DON'T KNOW	1. Year: └┘└┘└┘└┘ **➔DL11c** 8. DON'T KNOW	1. Year: └┘└┘└┘└┘ **➔DL11c** 8. DON'T KNOW
DL11b.	At what age did [R'S NAME] first attended schooling at this level?	1. └┘└┘ years old 8. DON'T KNOW	1. └┘└┘ years old 8. DON'T KNOW	1. └┘└┘ years old 8. DON'T KNOW	1. └┘└┘ years old 8. DON'T KNOW
DL11c.	What is the highest grade [R'S NAME] has ever/is currently enrolled in at this level?	Graduated ..... 07**➔DL11f** 1 ..... 01 2 ..... 02 3 ..... 03 4 ..... 04 5 ..... 05 6 ..... 06 DON'T KNOW 98	Graduated ..... 07**➔DL11f** 1 ..... 01 2 ..... 02 3 ..... 03 DON'T KNOW 98	Graduated ..... 07**➔DL11f** 1 ..... 01 2 ..... 02 3 ..... 03 DON'T KNOW 98	Graduated ..... 07**➔DL11f** Year 1 ..... 01 Year 2 ..... 02 Year 3 ..... 03 Year 4 ..... 02 Year 5 ..... 03 Year 6 ..... 02 DON'T KNOW 98
DL11d.	Did [R'S NAME] completed this level of schooling […] ?	Yes ..... 1**➔DL11f** Still in school ..... 6**➔DL13** No 3	Yes ..... 1**➔DL11f** Still in school ..... 6**➔DL13** No 3	Yes ..... 1**➔DL11f** Still in school ..... 6**➔DL13** No 3	Yes ..... 1**➔DL11f** Still in school ..... 6**➔DL13** No 3
DL11e.	Why did [R'S NAME] leave this level of schooling?	B C D E F G H I K L V ..... Y	B C D E F G H I K L V ..... Y	B C D E F G H I K L V ..... Y	B C D E F G H I K L V ..... Y

Kode DL11e

Working/helping to earn income ..... B	Not able to study ..... E	School had no teachers ..... H	Help at home L
Could not afford C	Not admitted at school ..... F	School closed/ruined I	Marriage ..... M
No schools/schools too far ..... D	Sick or disabled ..... G	Doesn't want to go ..... K	Others V

SECTION DL (EDUCATION)

	School Level (DL2TYPE)	1. Elementary	2. Junior High	3. Senior High	4. D1, D2, D3//University
DL11f.	When did [R'S NAME] leave/graduate from this [...] level of schooling?	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL13** 8. DON'T KNOW	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL13** 8. DON'T KNOW	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL13** 8. DON'T KNOW	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ **➔DL14a** 8. DON'T KNOW
DL11g.	At what age did [R'S NAME] leave/graduate from this […] level of schooling?	1. ⌊_⌋⌊_⌋ years 8. DK	1. ⌊_⌋⌊_⌋ years 8. DK	1. ⌊_⌋⌊_⌋ years 8. DK	1. ⌊_⌋⌊_⌋ years 8. DK
DL13.	Has [R'S NAME] ever failed a grade at [...] school ?	DON'T KNOW .....8 **➔DL14a** No.....3 **➔DL14a** Yes.....1	DON'T KNOW.....8 **➔DL14a** No.....3 **➔DL14a** Yes.....1	DON'T KNOW.....8 **➔DL14a** No.....3 **➔DL14a** Yes.....1	
DL14.	What grades has [R'S NAME] failed and how many times did [R'S NAME] repeat that grade? **CIRCLE ALL THAT APPLY**	Grade / # repeats A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times D. 4 ⌊_⌋ times E. 5 ⌊_⌋ times F. 6 ⌊_⌋ times	Grade / # repeats A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times	Grade / # repeats A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times	
DL14a.	When [R'S NAME] are at this [...] school level, did [R'S NAME] ever leave school for 4 consecutive weeks or more, including not enrolling in a full year?	8. DON'T KNOW**➔DL15** 3. No **➔DL15** 1. Yes	8. DON'T KNOW**➔DL15** 3. No **➔DL15** 1. Yes	8. DON'T KNOW**➔DL15** 3. No **➔DL15** 1. Yes	8. DON'T KNOW**➔DL15** 3. No **➔DL15** 1. Yes
DL14b.	How many times did the school disruptions occur?	Grade / # disruptions A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times D. 4 ⌊_⌋ times E. 5 ⌊_⌋ times F. 6 ⌊_⌋ times	Grade / # disruptions A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times	Grade / # disruptions A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times	Year / # disruptions A. 1 ⌊_⌋ times B. 2 ⌊_⌋ times C. 3 ⌊_⌋ times D. 4 ⌊_⌋ times E. 5 ⌊_⌋ times F. 6 ⌊_⌋ times
DL14c.	When did the school disruptions occur? **(IF MORE THAN 3 TIMES, WRITE THE THREE LONGEST)**	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year	A. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year B. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year C. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ to ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year Month / Year
DL14d.	Why did the school disruption occur?	B C D E F G H I K L M Y V.....	B C D E F G H I K L M Y V.....	B C D E F G H I K L M Y V.....	B C D E F G H I K L M Y V.....
DL15.	While attending [...] school, did [R'S NAME] work?	Yes.....1 No.....3 DON'T KNOW .....8 **➔DL11a COL 2/DL30**	Yes.....1 No.....3 DON'T KNOW.....8 **➔DL11a COL 3/DL30**	Yes.....1 No.....3 DON'T KNOW.....8 **➔DL11a COL 4/DL30**	Yes.....1 No.....3 DON'T KNOW.....8 **➔DL30**

Code DL14d

Working/helping to earn income .....B	Not able to study.....E	School had no teachers .....H	Help at home L
Could not afford.....C	Not admitted at school .....F	School closed/ruined I	Marriage .....M
No schools/schools too far.....D	Sick or disabled .....G	Doesn't want to go .....K	Others.....V

We would like to ask about school-related expenses for the previous school year.

SECTION DL (EDUCATION)

DL30.	Did [R'S NAME] attend school in the previous school school year (starting 2013-2014) ?	No .....3➔ **DL31c** Yes 1

	DL31TYPE			
DL31a.	What were [R'S NAME] (approximate) school-related expenses during the 2013-2014 school year? Did [R'S NAME] spend money for:	**3. No**	**1. Yes**	**DL31b.** Please give your best estimate of the amount [R'S NAME] spent.
	T **Total (Fees, supplies, transportation, pocket money, other)**	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	A. School Fees			
	1. Registration	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	2. Tuition and other scheduled fees	3 ➔DL31bx	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp. **DL31bx.** How much is the tuition if [R'S NAME] have to pay in full? ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	3. Exam fees.....	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	B. School supplies			
	1. Books and writing supplies	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	2. Uniforms and sports	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	C. Transportation, allowance, and courses			
	1. Transportation	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	2. Allowance, housing/boarding costs, food.....	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	3. Special courses	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	V. Other.....	3 ↓	1 ➔	⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
DL40.	Did [R'S NAME] receive any books from the school during the 2013/2014 school year? **(CIRCLE ALL THAT APPLY)**			Yes, for him/herself ..... A Yes, to share ..... B No..... C
DL41.	Did the school reduce [R'S NAME] Committee fees or other fees during the 2013/2014 school year?			Yes ..... 1 No..... 3
DL42.	Did [R'S NAME] receive assistance for school costs from GNOTA, School Committee, government, community groups, religious groups, or family (outside HH), or other?			No..... 3➔ **DL31c** Yes 1
DL43.	From what source was this assistance, and what was the total value? **(CIRCLE ALL THAT APPLY)**			
	T. Total			T. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	A. GNOTA.....			A. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	C. Government (other than BOS)			C. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	D. Community Group.....			D. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	E. Religious Group.....			E. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	F. Family.....			F. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	I. School Committee			I. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	J. BOS/BKM Fund			J. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	K. Foreign government/foundation/individual.....			K. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	L. Domestic Non-Government Institution			L. ⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp

SECTION DL (EDUCATION)

DL31c. CAPI CHECK DL07a:	RESPONDENT NOT IN SCHOOL (DL07a = 3) ..... 3 ➔ SECTION KW RESPONDENT STILL IN SCHOOL (DL07a = 1) 1

DL41TYPE				
DL44a.	What were [R'S NAME] (approximate) school-related expenses during the last month? Did [R'S NAME] spend money for:	3. No	1. Yes	**DL31b.** Please give your best estimate of the amount [R'S NAME] spent.
	T **Total (Fees, supplies, transportation, pocket money, other)**	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	A. School Fees			
	1. Registration	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	2. Tuition and other scheduled fees	3 ➔DL31bx	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp. **DL31bx.** How much is the tuition if [R'S NAME] have to pay in full? ⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	3. Exam fees	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	B. School supploes			
	1. Books and writing supplies.....	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	2. Uniforms and sports	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	C. Transportation, allowance, and courses			
	1. Transportation	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	2. Allowance, housing/boarding costs, food	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	3. Special courses.....	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.
	V. Other	3 ↓	1 ➔	⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋.⌊⌊⌋⌋⌊⌊⌋⌋ Rp.

SECTION KW (MARRIAGE HISTORY)

Now we would like to ask about [R'S NAME] marital history.

KW01a.	What is [R'S NAME] current marital status?	Never married.....1➔**SECTION MG** Cohabitation .....2 Married, formal (KUA or Civil Registration).....3 Married, formal according to religious law (nikah sirri).....4 Married, formal according to adat law .....5 Separated.....6 Divorced .....7 Widow/Widower.....8
KW02a.	What is the name of [R'S NAME] current/latest spouse?	_____
KW02g.	**INTERVIEWER VERIFY KW02a AND AR00:** **1. If […] lives in the household fill in AR00 (line # from Roster).** **2. If […] died/does not live in household, but registered in the Roster, fill in AR00** **3. If […] is not registered in the Roster**	**1.** ⌊_⌊_⌋ **2.** ⌊_⌊_⌋ **3.**
KW02h.	**CAPI CHECK : RESPONDENT IS PANEL RESPONDENT .**	**NO ..... 3➔KW12a** **YES 1**
KW02x.	**CAPI CHECK KW01a = 2**	**YES..... 1➔KW02l** **NO..... 3**
KW02j.	What was the date of [R'S NAME] current/most recent marriage?	⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ .....1 Month / Year DON'T KNOW 8
KW02k.	**CAPI CHECK : YEAR IN KW02j IS BEFORE 2007.**	**YES..... 1➔SECTION MG** **NO ..... 3➔KW12a**

KW02l.	When did [R'S NAME] start living together with his/her partner ?	1. ⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋ Month Year 8. DON'T KNOW
KW02m.	What was the value of the assets [R'S NAME] owned just prior to of living together with his/her partner?	⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋,⌊_⌊_⌊_⌋ Rp. ..... 1 DON'T KNOW 8
KW02n.	What was the highest education level attended by [R'S NAME] partner?	01. None..... 02. Elementary School..... 03. Junior High General..... 04. Junior High Vocational ..... 05. Senior High General ..... 06. Senior High Vocational ..... 60. College (D1, D2, D3)..... 61. University (BA)..... 62. University (MA) ..... 63. University (PHD) ..... 11. Adult Education A ..... 12. Adult Education B ..... 15. Adult Education C 13. Open University ..... 14. Islamic School *(Pesantren)* ..... 17. School for the disabled ..... 70. Madrasah, General ..... 72. Islamic Elementary School *(Madrasah Ibtidaiyah)* ..... 73. Islamic Junior/High School *(Madrasah Tsanawiyah)* ..... 74. Madrasah Senior High School *(Madrasah Aaliyah)*..... 90. Kindergarten..... 98. Don't Know ..... 95. Other .....
KW02o.	What was the highest grade completed by [R'S NAME] partner?	Did not complete grade 1.....00 1.....01 2.....02 3.....03 4.....04 5.....05 6.....06 Finished/graduated .....07 96 UNSCHOLEED.....96 DON'T KNOW .....98 **➔SECTION MG**

SECTION KW (MARRIAGE HISTORY)

KW12a.	What was the dowry for [R'S NAME] current/ most recent marriage? **(CIRCLE ALL THAT APPLY)**	Nothing ..... W➔**KW13a** Sholat (praying) accessory ..... A Money ..... B Land ..... C Building/House ..... D Jewelry ..... E Complete set of clothing ..... G Food ..... H Household Items ..... I Religious book ..... K Beauty items ..... L Livestock ..... M Other V
KW12b.	What was the value of the dowry of [R'S NAME] current/most recent marriage at the time of the marriage?	└─┴─┴─┘,└─┴─┴─┘,└─┴─┴─┘ Rp. ..... 1 └─┴─┴─┘,└─┴─┴─┘,└─┴─┴─┘ Other currency ..... 2 DON'T KNOW 8
KW13a.	What did [R'S NAME] receive as a gift, not a dowry, at the time of [R'S NAME] current/most recent marriage, that was not consumed for the wedding party? **(CIRCLE ALL THAT APPLY)**	Nothing ..... W➔**KW14** Sholat (praying) accessory ..... A Money ..... B Land ..... C Building/House ..... D Jewelry ..... E Complete set of clothing ..... G Food ..... H Household Items ..... I Religious book ..... K Beauty items ..... L Livestock ..... M Other V
KW13b.	What was the value of the gift?	└─┴─┴─┘,└─┴─┴─┘,└─┴─┴─┘ Rp. ..... 1 └─┴─┴─┘,└─┴─┴─┘,└─┴─┴─┘ Other currency ..... 2 DON'T KNOW 8
KW14.	What was the value of the assets [R'S NAME] owned just prior to the wedding of [R'S NAME] current/latest marriage?	└─┴─┴─┘,└─┴─┴─┘,└─┴─┴─┘ Rp. ..... 1 DON'T KNOW 8
KW14a.	Right after the wedding ceremony of [R'S NAME] current/latest marriage, did [R'S NAME] move?	NO, lived at the same place ..... 3➔**KW14d** YES, moved within the same village ..... 2➔**KW14d** YES, moved to another Village 1
KW14b.	What is the [ ] name at the place [R'S NAME] moved at that time?	A. **Vill:** 1. _____ 3. Same as current residence 8. DON'T KNOW B. **Kec:** 1. _____ 3. Same as current residence 8. DON'T KNOW C. **Kab:** 1. _____ 3. Same as current residence 8. DON'T KNOW D. **Prov:** 1. _____ 3. Same as current residence 8. DON'T KNOW
KW14d.	At the time [R'S NAME] married current/latest husband/wife, did [R'S NAME] husband/wife change residence?	Yes ..... 1 No 3
KW03.	How many times has [R'S NAME] been married ?	└─┴─┘ Times

SECTION MG (MIGRATION)

Now I would like to ask you about your birthplace and your moves from one place to another.

MG01.	What is the […] name of [R'S NAME] birthplace when [R'S NAME] were born?	A. Vill 1. _____ 3. Same as current residence 8. DK B. Kec 1. _____ 3. Same as current residence 8. DK C. Kab 1. _____ 3. Same as current residence 8. DK D. Prov 1. _____ 3. Same as current residence 8. DK E. Country 1. _____ 3. Same as current residence 8. DK
MG02.	To your best knowledge, have any of the above mentioned places changed their names?	DON'T KNOW ..... 8 ➔ **MG04** No ..... 3 ➔ **MG04** Yes 1
MG02a.	Is […] the current name?	3. No ➔ **MG03b** 1.Yes
MG03a.	What was the name when [R'S NAME] were born?	A. Vill 1. _____ 3. Same as current name (MG01) 8. DK B. Kec 1. _____ 3. Same as current name (MG01) 8. DK C. Kab 1. _____ 3. Same as current name (MG01) 8. DK D. Prov 1. _____ 3. Same as current name (MG01) 8. DK E. Country 1. _____ 3. Same as current name (MG01) 8. DK ➔ **MG04**

MG03b.	What is the name now?	A. Vill 1._____ 3. Same as name at birth (MG01) 8. DK B. Kec 1._____ 3. Same as name at birth (MG01) 8. DK C. Kab 1._____ 3. Same as name at birth (MG01) 8. DK D. Prov 1._____ 3. Same as name at birth (MG01) 8. DK E. Country 1._____ 3. Same as name at birth (MG01) 8. DK
MG04.	Was the place when [R'S NAME] were born a:	Village..... 1 Small town..... 3 Big city..... 5 DON'T KNOW 8
MG04a.	When [R'S NAME] were 12 years old did [R'S NAME] live in the same place as the place where [R'S NAME] were born?	Yes .....1 ➔ **MG18a** No.....3 DK ..... 8➔**MG08**
MG05.	What was the [...] name of the place where [R'S NAME] lived when [R'S NAME] were 12 years old (the name when [R'S NAME] were age 12)?	A. Vill 1. _____ 3. Same as name at birth (MG01 8. DK B. Kec 1. _____ 3. Same as name at birth (MG01 8. DK C. Kab 1. _____ 3. Same as name at birth (MG01 8. DK D. Prov 1. _____ 3. Same as name at birth (MG01 8. DK **E. Country 1. _____** 3. Same as name at birth (MG01 8. DK
MG06.	To your best knowledge, have any of the above mentioned places changed their names (since [R'S NAME] was 12)?	DON'T KNOW ..... 8 ➔ **MG08** No..... 3 ➔ **MG08** Yes 1

SECTION MG (MIGRATION)

MG07.	Is the name of [...] still the same or has it been changed?	A. Vill 1. _____ 3. Same name as when I was 12 (MG05) 8. DK **B. Kec** **1.** _____ 3. Same name as when I was 12 (MG05) 8. DK C. Kab 1. _____ 3. Same name as when I was 12 (MG05) 8. DK D. Prov 1. _____ 3. Same name as when I was 12 (MG05) 8. DK E. Country 1. _____ 3. Same name as when I was 12 (MG05) 8. DK
MG08.	When [R'S NAME] was 12, was the place a:	Village ..... 1 Small town ..... 3 Big city ..... 5 DON'T KNOW 8
MG08a.	When [R'S NAME] was 12 ,were [R'S NAME] biological parents still married?	NA ..... 6 No ..... 3 Yes 1
MG08b.	When [R'S NAME] was 12, did [R'S NAME] live with biological mother?	NA ..... 6 No ..... 3 Yes 1
MG08c.	When [R'S NAME] was 12, did [R'S NAME] live with biological father?	NA ..... 6 No ..... 3 Yes 1

MG05d.	Has [R'S NAME] always lived in the current place?	Yes ..... 1 ➔ **S TK** No ..... 3 DON'T KNOW 8
MG05e.	When did [R'S NAME] when moved to the current place?	⌊__⌋⌊__⌋ / ⌊__⌋⌊__⌋⌊__⌋⌊__⌋ Month Year ..... 1 ➔ **MG05g** DON'T KNOW 8
MG05f.	How old was [R'S NAME] when moved to the current place?	⌊__⌋⌊__⌋ years ..... 1 DON'T KNOW 8
MG05g.	Where did [R'S NAME] move from?	A. Vill 1. _____ 3. Same as current residence 8. DK B. Kec 1. _____ 3. Same as current residence 8. DK C. Kab 1. _____ 3. Same as current residence 8. DK D. Prov 1. _____ 3. Same as current residence 8. DK E. Country 1. _____ 3. Same as current residence 8. DK

SECTION TK (EMPLOYMENT)

Now we would like to ask about [R'S NAME] work experience

TK01a.	During the past week, did [R'S NAME] do any of these activities?	Yes / No / DK a. Work for pay 1 3 8 b. Attend school 1 3 8 c. Housekeeping 1 3 8 d. Job searching 1 3 8
TK01.	What was [R'S NAME] primary activity during the past week?	Working/trying to work/helping to earn income ..... 01➔**TK18A** Job searching ..... 02 Attending school ..... 03 Housekeeping ..... 04 Retired ..... 05 Sick/disable ..... 07 Other 95
TK02.	Did [R'S NAME] work/try to work/help to earn income for pay for at least 1 hour during the past week?	Yes ..... 1➔ **TK18A** No 3
TK03.	Does [R'S NAME] have a job/business, but were temporarily not working during the past week?	Yes ..... 1➔ **TK18A** No 3
TK04.	Did [R'S NAME] work at a family-owned (farm or non-farm) business during the past week?	Yes ..... 1➔ **TK18A** No 3
TK05.	Has [R'S NAME] ever worked before?	No ..... 3➔**SECTION KM** Yes ..... 1 DON'T KNOW 8
TK07.	When did [R'S NAME] work for the last time?	Year └┴┴┴┘ ..... 1 DON'T KNOW 8

TK08.	Why hasn't [R'S NAME] worked again since that year? **(CIRCLE ALL THAT APPLY)**	Retirement ..... A Prolonged sickness ..... B Handicap ..... C Marriage ..... D Too old ..... E Have a child ..... F Family responsibilities ..... N Forbidden ..... O Other family reason ..... P Fired ..... Q Cannot find work ..... R Do not want to work ..... S Company closed/moved/bankrupt ..... T Other V
TK15.	Which category best describes the work [R'S NAME] did in his/her last job?	Unpaid family worker ..... 06➔**TK47x** Self employed ..... 01 Self-employed with unpaid family worker/temporary worker ..... 02 Self-employed with permanent worker .... 03 Government worker ..... 04 Private worker ..... 05 Casual worker in agriculture ..... 07 Casual worker not in agriculture 08
TK16a.	What was [R'S NAME] monthly income when [R'S NAME] was working at that job?	└┴┴┘,└┴┴┘,└┴┴┘ Rp. ..... 1➔**TK16b** DON'T KNOW 8
T16a1.	Is it […]?	
TK16b.	Was that a […?	Wage ..... 1 Net profits (after taking out costs) ..... 3 DON'T KNOW ..... 8 ➔ **TK47x**

SECTION TK (EMPLOYMENT)

	CURRENT JOB	A. PRIMARY JOB THE JOB WHICH CONSUMES THE MOST TIME
TK18A.	Where does [R'S NAME]work on his/her [...] job? **(ENTER NAME OF COMPANY/EMPLOYER)**	1. _____ _____ 8. DON'T KNOW
TK18Aa.	What is the address of the company?	_____ _____
TK18Ab.	What is telephone number of the company?	A. Phone ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ B. Cellphone ⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Belonging to_____ W. NA Y. DK
TK19A.	What does [R'S NAME]company produce?	1. _____ _____ 8. DON'T KNOW
TK19AA.	**CODE FOR SECTORS**	⌊_⌋⌊_⌋
TK20A.	What are [R'S NAME] primary duties at your workplace?	1. _____ _____ 8. DON'T KNOW
TK20aA.	How many people work at [R'S NAME] firm?	1. ⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ people 8. DON'T KNOW
TK21A.	What was the total number of hours [R'S NAME] worked during the past week (on his/her job)?	1. ⌊_⌋⌊_⌋⌊_⌋ hours/week 8. DON'T KNOW
TK22A.	Normally, what is the approximate total number of hours [R'S NAME] work per week?	1. ⌊_⌋⌊_⌋⌊_⌋ hours/week 8. DON'T KNOW
TK23A.	Approximately what is the total number of weeks [R'S NAME] work per year?	1. ⌊_⌋⌊_⌋ weeks/year 8. DON'T KNOW
TK23A2.	How long have [R'S NAME] worked on this job?	1. ⌊_⌋⌊_⌋ Year ⌊_⌋⌊_⌋ Month 8. DON'T KNOW
TK24A.	Which category best describes the work that [R'S NAME] do?	Self employed ..... 01➔ **TK28A1** Self-employed with unpaid family worker/temporary worker ..... 02➔ **TK28A1** Self-employed with permanent worker . 03➔ **TK28A1** Government worker ..... 04➔ **TK24A5** Private worker ..... 05➔ **TK24A5** Casual worker in agriculture ..... 07➔ **TK24A5** Casual worker not in agriculture ..... 08➔ **TK24A5** Unpaid family worker ..... 06 DON'T KNOW 9

TK24A1.	What is the name of [R'S NAME] employer?	_____ AR00 ⌊_⌋⌊_⌋ ➔**TK27**
TK24A5.	Do **[R'S NAME]** work with a contract?	No, work without contract ..... 03 Yes, with contract but not fixed time ..... 01 Yes, with fixed time contract ..... 02 DON'T KNOW 08
TK25A1.	Approximately what was [R'S NAME] salary/wage during the last month (including the value of all benefits)?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. ..... 1➔**TK25A2** DON'T KNOW 8
TK25A1a.	Is it […]?	
TK25A2.	Approximately what was [R'S NAME] salary/wage during the last year (including the value of all benefits)?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. .....1➔ TK25A2b DON'T KNOW 8
TK25A2a.	Is it […]?	
TK25A2b.	What is the amount of year-end-bonus or other bonuses you received during the last year?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. ...1➔ T**K25A3** NOT APPLICABLE ..... 6➔**TK25A3** DON'T KNOW 8
TK25A2c.	Is it […]?	
TK25A3.	Did [R'S NAME] receive the following benefits from [R'S NAME] employer for this job?	Yes / No / DK a. Employer provided meals? 1 3 8 If yes, how many per day? 1. ⌊_⌋ times per day 2. Not every day b. Raw food, not in form of meals? 1 3 8 c. Housing benefits? 1 3 8 d. Transportation benefits? 1. Car? 1 3 8 2. Transportation allowance? 1 3 8 e. Medical benefits? 1. Employer paid some health expenses? 1 3 8 2. Employer provided health insurance policy? 1 3 8 3. Employer provided health clinic 1 3 8 f. Credit 1 3 8 g. Employer-provided pension 1 3 8 h. Severance eligibility 1 3 8
TK25A3x.	**INTERVIEWEAR CHECK: TK24A= 7 OR 8?**	**YES ..... 1➔ TK27** **NO 3**
TK25A4.	What type of pension plan is [R'S NAME] enrolled in?	No pension plan ..... 6➔ **TK25A7** TASPEN ..... 1 ASABRI ..... 2 JAMSOSTEK ..... 3 Other private pension 4

SECTION TK (EMPLOYMENT)

TK25A5.	What is [R'S NAME] out of pocket contribution to the pension fund each month?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.....1 DON"T KNOW 8
TK25A6.	How will the pension benefit be paid out?	Annuity benefit per month/year.....1 Lump sum payment at retirement.....2 Combination of lump sum and annuity 3
TK25A7.	What is [R'S NAME] out of pocket contribution to the health insurance each month?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.....1 DON"T KNOW .....8 No health insurance.....6 ➔**TK27**
TK26A1.	Approximately how much net profit did [R'S NAME] gain last month, after taking out all [R'S NAME] business expenses?	**Profits (+)** ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ Rp..... 1 **Loss (-)** ⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ Rp..... 1 ➔ **TK26A3** DON'T KNOW 8
TK26A1a.	Is it […]?	
TK26A3.	Approximately how much net profit did [R'S NAME] gain last year, after taking out all your business expenses?	Profit (+) ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp....1 Loss (–) ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp....2 ➔TK26A5 DON'T KNOW .....8↓
TK26A3a.	Is it […]?	
TK27.	Does [R'S NAME] have any additional job?	DON'T KNOW ..... 8➔**TK47x** No ..... 3➔**TK47x** Yes 1

	SECOND JOB	B. ADDITIONAL JOB IF MORE THAN ONE ASK ABOUT THE ONE THAT CONSUMES MOST TIME
TK18B.	Where do [R'S NAME]work on your [...] job? **(ENTER NAME OF COMPANY/EMPLOYER)**	1. _____ _____ 8. DON'T KNOW
TK19B.	What does [R'S NAME]company produce?	1. _____ _____ 8. DON'T KNOW
TK19Bb.	**CODE FOR SECTORS**	⌊_⌋⌊_⌋
TK20B.	[R'S NAME]	1. _____ _____ 8. DON'T KNOW
TK20Ba.	How many people work at [R'S NAME]firm?	1. ⌊_⌋⌊_⌋.⌊_⌋⌊_⌋⌊_⌋ Orang 8. DON'T KNOW
TK21B.	What was the total number of hours [R'S NAME]worked during the past week (on your job)?	1. ⌊_⌋⌊_⌋⌊_⌋ Jam/Minggu 8. DON'T KNOW
TK22B.	Normally, what is the approximate total number of hours [R'S NAME]work per week?	1. ⌊_⌋⌊_⌋⌊_⌋ Jam/Minggu 8. DON'T KNOW
TK23B.	Approximately what is the total number of weeks [R'S NAME]work per year?	1. ⌊_⌋⌊_⌋ Minggu/Tahun 8. DON'T KNOW
TK23B2.	How long have [R'S NAME]worked on this job?	1. ⌊_⌋⌊_⌋ Tahun ⌊_⌋⌊_⌋ Bulan 8. DON'T KNOW
TK24B.	Which category best describes the work that [R'S NAME] does?	Self employed .....01➔ **TK26B1** Self-employed with unpaid family worker/temporary worker .....02➔ **TK26B1** Self-employed with permanent worker .03➔ **TK26B1** Government worker .....04➔ **TK25B2** Private worker .....05➔ **TK25B2** Casual worker in agriculture.....07➔ **TK25B2** Casual worker not in agriculture.....08➔ **TK25B2** Unpaid family worker..... 06 DON'T KNOW..... 98
TK24B1.	What is the name of your employer?	AR00 ⌊_⌋⌊_⌋ _____ ➔**TK47x**
TK25B1.	Approximately what was your salary/wage during the last month (including the value of all benefits)?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. .....1➔**TK25B2** DON'T KNOW 8

SECTION TK (EMPLOYMENT)

TK25B1a.	Is it […]?	
TK25B2.	Approximately what was **[R'S NAME]** salary/wage during the last year (including the value of all benefits)?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. .....1➔TK25B2b DON'T KNOW.....8
TK25B2a.	Is it […]?	
TK25B2b.	What is the amount of year-end-bonus or other bonuses **[R'S NAME]** received during the last year?	⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp. 1➔TK25B3 NOT APPLICABLE ..... 6➔TK25B3 DON'T KNOW..... 8
TK25B2c.	Is it […]?	
TK25B3.	Did [R'S NAME] receive the following benefits from your employer for this job?	Yes No DK a. Employer provided meals? 1 3 8 If yes, how many per day? 1. ⌊_⌋ times per day 2. Not every day b. Raw food, not in form of meals? 1 3 8 c. Housing benefits? 1 3 8 d. Transportation benefits? 1. Car? 1 3 8 2. Transportation allowance? 1 3 8 e. Medical benefits? 1. Employer paid some health expenses? 1 3 8 2. Employer provided health insurance policy? 1 3 8 3. Employer provided health clinic 1 3 8 f. Credit 1 3 8 g. Employer-provided pension 1 3 8 h. Severance eligibility 1 3 8➔**TK47x**

TK26B1.	Approximately how much net profit did **[R'S NAME]** again last month, after taking out all **[R'S NAME]** business expenses?	Profit (+) ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.. 1 **Loss (–)** ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.. 2 **➔TK26B3** DON'T KNOW..... 8🡻
TK26B1a.	Is it […]?	
TK26B3.	Approximately how much net profit did **[R'S NAME]** gain last year, after taking out all **[R'S NAME]** business expenses?	Profit (+) ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.. 1 **Loss (–)** ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋, ⌊_⌋⌊_⌋⌊_⌋ Rp.. 2 **➔TK28 COLUMN 1** DON'T KNOW..... 8🡻
TK26B3a.	Is it […]?	

Now we would like to ask about [R'S NAME] first job.

TK47x.	**CAPI CHECK:** **RESPONDENT IS PANELRESPONDENT FOR BOOK III (AR01g=1)**	1. Yes ➔ **SECTION KM** 3. No
TK47.	When did [R'S NAME] start working full-time for the first time? **THE MEANING OF WORKING FULL-TIME IS THAT WORKING IS THE PRIMARY ACTIVITY.**	Work never primary activity..... 6➔**SECTION KM** Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ..... 1➔**SECTION KM** DON'T KNOW 8
TK48.	What was [R'S NAME] age when starting to work full-time for the first time?	⌊_⌋⌊_⌋ **Years**

SECTION KM (SMOKING BEHAVIOR)

Next I would like to ask whether [R'S NAME]**have had the habit of smoking cigarettes/smoking a pipe/chewing tobacco, now or in the past.**

KM01a.	Has [R'S NAME]ever chewed tobacco, smoked a pipe, smoked self-rolled cigarettes, or smoked cigarettes/cigars?	No 3 ➔ **SECTION KK** Yes..... 1
	Products normally used:	**1. Yes** **3. No**
KM01b.	Chewing tobacco	1 3
KM01c.	Smoking a pipe	1 3
KM01d.	Smoking self-rolled cigarettes	1 3
KM01e.	Smoking cigarettes/cigars	1 3
KM02a.	**CAPI CHECK KM01e:** **DOES KM01e=1 (SMOKING CIGARETTES/CIGARS)?**	**No .....3➔ KM04 .....** **Yes 1**
KM03.	Are the cigarettes classified as: **ANSWER MAY BE MORE THAN ONE**	Filtered cigarette .....A Unfiltered cigarette.....B Filtered cloves cigarette .....C Unfiltered cloves cigarette.....D Cigar .....E
KM04.	Do **[R'S NAME]**still have the habit or have **[R'S NAME]**totally quit?	STILL HAVE ..... 1 ➔**KM08** QUIT 3
KM05aa	At what age did **[R'S NAME]**totally quit from […]?	1. ⌊_⌋⌊_⌋ Years 8. DON'T KNOW
KM05b.	**CAPI CHECK KM01b KM01c KM01d:** **DOES KM01b=1 or KM01c=1 or KM01d=1 (CHEWING TOBACCO/SMOKING A PIPE)?**	**No .....3 ➔KM07** **YES.....** 1
KM06.	In one week how many ounces (100 grams) did/do [R'S NAME] consume now/before totally quitting of chewing tobacco and smoking pipe?	⌊_⌋⌊_⌋ oz (100 gr)..... 1 DON'T KNOW..... 8
KM06a.	**CAPI CHECK KM04=1**	**No .....3 ➔KM07** **YES..... 1**
KM06b.	What's the price for 1 ounce [R's NAME] have to pay?	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. .... 1 DON'T KNOW..... 8
KM07.	**CAPI CHECK KM01d AND KM01e: DOES KM01d=1 OR KM01e=1 (SMOKING SELF-ROLLED CIGARETTES / CIGARETTES/CIGARS)?**	**No .....3 ➔KM09** **YES..... 1**
KM08.	**CAPI CHECK KM01e:** **DOES KM01e=1 (SMOKING CIGARETTES/CIGARS)?**	⌊_⌋⌊_⌋ per day .....1 DON'T KNOW..... 8

KM08a.	**CAPI CHECK KM04=1**	**NO ..... 3➔KM09** **YES 1**
KM08f.	**CAPI CHECK KM01e=1**	**NO ..... 3➔KM09** **YES 1**
KM08b.	How many cigarettes/packs does [R'S NAME] usually buy each time?	⌊_⌋⌊_⌋ cigarettes .....1➔**KM08d** ⌊_⌋⌊_⌋ packs 3
KM08c.	How many cigarettes for each pack?	⌊_⌋⌊_⌋ cigarettes
KM08d.	How much did [R'S NAME] spend each time?	⌊_⌋⌊_⌋⌊_⌋,⌊_⌋⌊_⌋⌊_⌋ Rp. .....1 DON'T KNOW 8
KM08e.	What is the brand of cigarettes does [R'S NAME] usually purchase?	Gudang Garam Merah .....01 Gudang Garam Surya.....02 Gudang Garam International .....03 Sampoerna A Mild.....04 Sampoerna Hijau .....05 Djarum Super .....06 Djarum 76 Kretek .....07 Bentoel Filter .....08 Bentoel Kretek tanpa filter.....09 Ardath .....10 Marlboro .....11 Marlboro Kretk Filter.....12 Lucky Strike.....13 Kansas.....14 Dji Sam Soe .....15 Lainnya, sebutkan.....95
KM09.	About how much money did/do [R'S NAME]spend each week on these products?	⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. .....1 DON'T KNOW 8
KM10.	At what age did [R'S NAME]start to smoke on a regular basis?	⌊_⌋⌊_⌋ years .....1 DON'T KNOW 8
KM11.	How soon after [R'S NAME] wake up did/do [R'S NAME]smoke your first cigarette, cigar, or pipe?	Within 5 minutes .....1 Within 6-30 minutes .....2 Within 31-60 minutes.....3 More than 1 hour .....4 DON'T KNOW 8

SECTION KK (HEALTH CONDITIONS)

Next we would like to know about [R'S NAME]**health.**

KK01.	In general, how is [R'S NAME]health?	Very healthy ..... 1 Somewhat healthy..... 2 Somewhat unhealthy..... 3 Unhealthy..... 4
KK02a.	During the last 4 weeks, how many days of [R'S NAME]primary daily activities did [R'S NAME]miss due to poor health?	⌊_⌊_⌋ Days ..... 1 DON'T KNOW 8

KK02b.	Compared with [R'S NAME]health 12 months ago, would you say that [R'S NAME]health is [...]?	Much better now ..... 1 Somewhat better now ..... 2 About the same ..... 3 Somewhat worse ..... 4 Much worse 5
KK02c.	Compared with [R'S NAME]health 12 months ago, would you say that your health is [...]?	Much better now ..... 1 Somewhat better now ..... 2 About the same ..... 3 Somewhat worse ..... 4 Much worse 5

Now we would like to know [R'S NAME] **physical ability in daily activity.**

Physical Functioning Measures

		If you had […], could you do it:		
KK03a.	To carry a heavy load (like a pail of water) for 20 meters	1. Easily	3. With difficulty	5. Unable to do it
KK03d.	To draw a pail of water from a well	1. Easily	3. With difficulty	5. Unable to do it
KK03j.	To walk for 1 kilometer	1. Easily	3. With difficulty	5. Unable to do it
KK03c.	To walk for 5 kilometers	1. Easily	3. With difficulty	5. Unable to do it
KK03b.	To sweep the house floor yard	1. Easily	3. With difficulty	5. Unable to do it
KK03e.	To bow, squat, kneel	1. Easily	3. With difficulty	5. Unable to do it
KK03l.	To walk across the room	1. Easily	3. With difficulty	5. Unable to do it
KK03i.	To stand up from sitting on the floor without help	1. Easily	3. With difficulty	5. Unable to do it
KK03g.	To stand up from sitting position in a chair without help	1. Easily	3. With difficulty	5. Unable to do it
KK03ea.	To reach or extend your arms above shoulder level	1. Easily	3. With difficulty	5. Unable to do it
KK03eb.	To pick up a small coin from a table	1. Easily	3. With difficulty	5. Unable to do it
KK03xx.	**CAPI CHECK: ALL KK03a-KK03eb = 1?**	**1. YES → KK03n**	**3. NO**	

Activities of Daily Living (ADL)

KK03f.	To dress without help	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03m.	To bathe	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03k.	To get out of bed	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03ka.	To eat (eating food by oneself when it is ready)	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it
KK03kc.	To control urination or defecation	1. Easily	3. With difficulty	4. Can do with help	5. Unable to do it

SECTION KK (HEALTH CONDITIONS)

Instrumental Activities of Daily Living (IADL)

		If you had […], could you do it:
KK03n.	To shop for personal needs	1. Easily 3. With difficulty 4. Have difficulty, can do with help 5. Unable to do it
KK03o.	To prepare hot meals (preparing ingredients, cooking, and serving food)	1. Easily 3. With difficulty 4. Have difficulty, can do with help 5. Unable to do it
KK03p.	To take medicine (taking right portion right on time)	1. Easily 3. With difficulty 4. Have difficulty, can do with help 5. Unable to do it
KK03pa.	To do household chores (house cleaning, doing dishes, making the bed, and arranging the house)	1. Easily 3. With difficulty 4. Have difficulty, can do with help 5. Unable to do it
KK03pb.	To shop for groceries (deciding what to buy and pay for it)	1. Easily 3. With difficulty 4. Have difficulty, can do with help 5. Unable to do it
KK03pc.	To manage your money (paying your bills, keeping track of expenses, or managing assets)	1. Easily 3. With difficulty 4. Have difficulty, can do with help 5. Unable to do it

KK04a.	**CAPI CHECK :**	**IF ALL OF KK03f-KK03pc = 1 ..... 1➔KK04j** **IF ANY OF KK03f-KK03pc = 3 , 4 OR 5 ..... 3➔KK04b**

Now we would like to know about help [R'S NAME] **may have received in your daily activities.**

KK04b.	If [R'S NAME] needs to do any of the daily activities listed in KK03f-KK03pc, does [R'S NAME] need someone to assist him/her?	No ..... 3➔**KK04j** Yes 1

		First person	Second person	Third person
KK04c.	Who often assisted [R'S NAME]? (CAPI CHECK)	Name:_____ **ART:** ⌊_⌊_⌋ **("51" IF NOT IN THE ROSTER)**	Name:_____ **ART:** ⌊_⌊_⌋ **("51" IF NOT IN THE ROSTER)**	Name:_____ **ART:** ⌊_⌊_⌋ **("51" IF NOT IN THE ROSTER)**
KK04d.	What is his/her relationship with [R'S NAME]? (CAPI CHECK)	⌊_⌊_⌋	⌊_⌊_⌋	⌊_⌊_⌋
KK04e.	During the last 4 weeks, about how many days did […….] help [R'S NAME]?	1. ⌊_⌊_⌋ days 8. DON'T KNOW	1. ⌊_⌊_⌋ days 8. DON'T KNOW	1. ⌊_⌊_⌋ days 8. DON'T KNOW
KK04f.	On the days […..] helps [R'S NAME], about how many hours per day is that?	1. ⌊_⌊_⌋ hours 8. DON'T KNOW	1. ⌊_⌊_⌋ hours 8. DON'T KNOW	1. ⌊_⌊_⌋ hours 8. DON'T KNOW
KK04g.	Is […] paid to help [R'S NAME]?	Yes ..... 1 No 3	Yes ..... 1 No 3	Yes ..... 1 No 3
KK04h.	Is there any other person who helps [R'S NAME]?	Yes ..... 1 ➔ Kolom 2 No ..... 3 ➔ KK04i	Yes ..... 1 ➔ Kolom 3 No ..... 3 ➔ KK04i	Yes ..... 1 ➔ KK04i No ..... 3 ➔ KK04i

KK04i.	In the last 4 weeks, how much money did [R'S NAME] spend to have someone assisted [R'S NAME] in the daily activities mentioned above?	1. Rp ⌊_⌊_⌋, ⌊_⌊_⌊_⌋, ⌊_⌊_⌊_⌋ 6. DID NOT HAVE TO PAY 8. DON"T KNOW
KK04j.	If in the future [R'S NAME] need someone to assist [R'S NAME] in one of the daily activities above, who do you think will assist [R'S NAME] besides [R'S NAME] spouse?	Name: AR00 : ⌊_⌊_⌋ **("51" IF NOT IN THE ROSTER)**
KK04k.	What is his/.her relationship with [R'S NAME]? (CAPI CHECK: CANNOT BE 02)	⌊_⌊_⌋

CODE FOR KK04d AND KK04k:

02.	Spouse	04.	Non-biological child	06.	Parent	08.	Sibling	10.	Grandchild	12.	Uncle/aunt	14.	Cousin	16.	Other family
03.	Biological child	05.	Son/daughter-in-law	07.	Parent-in-law	09.	Brother/sister-in-law	11.	Grandparent	13.	Nephew/niece	15.	Servant	17.	Non-family

SECTION CD (CHRONIC DISEASE)

Now we would like to ask you about some health conditions that [R'S NAME] **may have been diagnosed with.**

CD01. Did a **doctor/paramedic/nurse/midwife** ever diagnose [R'S NAME] with […]?	**CD02.** Who first diagnose [R'S NAME] with [...]?	CD02a. When was the condition […] first diagnosed?	CD03.Does the condition limit the kind or amount of paid work [R'S NAME] can do?
A. Physical disabilities..... 3. No ⬇ 1. Yes➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
B. Brain damage ..... 3. No ⬇ 1. Yes➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
C. Vision problem..... 3. No ⬇ 1. Yes➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
D. Hearing problem ..... 3. No ⬇ 1. Yes➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
E. Speech impediment..... 3. No ⬇ 1. Yes➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
F. Mental retardation..... 3. No ⬇ 1. Yes➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
I. Autism ..... 3. No ⬇ 1. Yes➔	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DON'T KNOW	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all

SECTION CD (CHRONIC DISEASE)

Now we would like to ask you about some chronic illnesses that [R'S NAME] **may have been diagnosed with.**

CHRONIC CONDITIONS (CDTYPE)	CD05. Have a doctor/paramedic/nurse/ midwive ever told [R'S NAME] that [R'S NAME] had [….]	CD06. In which organ or part of the body have [R'S NAME] or have [R'S NAME] had cancer?	CD07. When was the condition […] first diagnosed?	CD08. Who diagnosed the […] condition?	CD09. In order to deal with […] is [R'S NAME] currently taking prescribed medication on a weekly basis?	CD09a. Is [R'S NAME] now taking the following treatments to treat […] and its complications?	CD09b. How many timesin the last 12 months has [R'S NAME] had:	CD09c. Have [R'S NAME] care providers ever given [R'S NAME] health education/advice on the following?	CD10. Does the condition limit the kind or amount of paid work [R'S NAME] can do?
A. Hipertensi on	3. No 1. Yes➔ ⬇		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌴⌴⌴	1. ⌊⌊⌋⌋	⌴⌴⌴	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
B. Diabetes	3. No 1. Yes➔ ⬇		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌴⌴⌴	2. ⌊⌊⌋⌋ 3. ⌊⌊⌋⌋ 4. ⌊⌊⌋⌋ 5. ⌊⌊⌋⌋	⌴⌴⌴	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
C. Tuberculosis (TBC)	3. No 1. Yes➔ ⬇		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
D. Asthma	3. No 1. Yes➔ ⬇		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
E. Other lung conditions	3. No 1. Yes➔ ⬇		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
F. Heart attack, coronary heart disease, angina, or other heart problems	3. No 1. Yes➔ ⬇		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌴⌴⌴		⌴⌴⌴	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
G. Liver	3. No 1. Yes➔ ⬇		1. ⌊⌊⌋⌋ / ⌊⌊⌋⌋⌊⌊⌋⌋ Month / Year 2. Age: ⌊⌊⌋⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌴⌴⌴			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all

SECTION CD (CHRONIC DISEASE)

CHRONIC CONDITIONS (CDTYPE)	CD05. Have a doctor/paramedic/nurse/ midwive ever told [R'S NAME] that [R'S NAME] had [….]	CD06. In which organ or part of the body have [R'S NAME] or have [R'S NAME] had cancer?	CD07. When was the condition […] first diagnosed?	CD08. Who diagnosed the […] condition?	CD09. In order to deal with […] is [R'S NAME] currently taking prescribed medication on a weekly basis?	CD09a. Is [R'S NAME] now taking the following treatments to treat […] and its complications?	CD09b. How many timesin the last 12 months has [R'S NAME] had:	CD09c. Have [R'S NAME] care providers ever given [R'S NAME] health education/advice on the following?	CD10. Does the condition limit the kind or amount of paid work [R'S NAME] can do?
H. Stroke	3. No 1. Yes➔ ⬇		1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌊_⌋ ⌊_⌋ ⌊_⌋		⌊_⌋ ⌊_⌋ ⌊_⌋	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
I. Cancer or malignant tumor	3. No 1. Yes➔ ⬇	⌊_⌋⌊_⌋	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌊_⌋ ⌊_⌋ ⌊_⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
J. Arthritis/Rheumatism	3. No 1. Yes➔ ⬇		1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌊_⌋ ⌊_⌋ ⌊_⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
L. Depression	3. No 1. Yes➔ ⬇		1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌊_⌋ ⌊_⌋ ⌊_⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
M. High cholesterol (Total or LDL)	3. No 1. Yes➔ ⬇		1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌊_⌋ ⌊_⌋ ⌊_⌋		⌊_⌋ ⌊_⌋ ⌊_⌋	1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all
N. Prostate illness	3. No 1. Yes➔ ⬇		1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 2. Age: ⌊_⌋⌊_⌋ years 8. DK	1. Doctor 2. Paramedic 3. Nurse 4. Midwife	1. Yes 3. No	⌊_⌋ ⌊_⌋ ⌊_⌋			1. Yes, very much so 2. Yes, some degree 3. No, not much 4. No, not at all

SECTION CD (CHRONIC DISEASE)

Code for CD06 (Cancer)

A.	Brain	I.	Stomach	Q.	Endometrium
B.	Oral cavity	J.	Liver	R.	Colon/Rectum
C.	Larynx	K.	Pancreas	S.	Bladder
D.	Other pharynx	L.	Kidney	T.	Skin
E.	Thyroid	M.	Prostate	U.	Non Hodgkin lymphoma
F.	Lungs	N.	Testicle	X.	Leukemia
G.	Breast	O.	Ovary	V.	Other, mention_____
H.	Oesephagus	P.	Cervix		

Code for CD09a

A. Traditional medicine
B. Modern medicine
C. Insulin injection (CAPI: ONLY FOR CDTYPE B)
D. Chemotherapy (CAPI: ONLY FOR CDTYPE I)
E. Surgery (CAPI: ONLY FOR CDTYPE I)
F. Radiation therapy (CAPI: ONLY FOR CDTYPE I)
G. Physical therapy (CAPI: ONLY FOR CDTYPE H)
H. Occupational therapy(CAPI: ONLY FOR CDTYPE H)
I. Receiving psychiatric/psychological treatment (CAPI: ONLY FOR CDTYPE L)
J. Taking anti-depressant (CAPI: ONLY FOR CDTYPE L)
K. Taking tranquilizer/sleeping pills (CAPI: ONLY FOR CDTYPE L)
V. Other treatment
W. No treatment

Code for CD09b

1. Blood pressure test (CAPI: ONLY FOR CDTYPE A)
2. Blood glucose test (CAPI: ONLY FOR CDTYPE B)
3. Urine glucose test (CAPI: ONLY FOR CDTYPE B)
4. Fundus examination (CAPI: ONLY FOR CDTYPE B)
5. Micro-albuminuria test (CAPI: ONLY FOR CDTYPE B)

Code for CD09c

A. Weight control
B. Exercise
C. Diet
D. Smoking control
E. Foot self care (CAPI: ONLY FOR CDTYPE B)
W. None of the above

NOTE:
1. Codes A, B,V and W is for all CDTYPE, codes C-K are for specific CDTYPE mentioned in the parentheses.
2. CD09b is for CDTYPE A and B only, need to block the other CDTYPE.
3. CD09b is for CDTYPE A,B,F,H and M only need to block the other CDTYPE.

CD11.	Does [R'S NAME] usually wear glasses or corrective lenses?	1. Yes 3. No
CD12.	Does [R'S NAME] ever wear hearing aid?	1. Yes 3. No
CD13.	Does [R'S NAME] use a walking cane/walker/other walking aids?	1. Walking stick 2. Walker 3. Manual wheelchair 4. Electric wheelchair 6. DO NOT USE WALKING AID

SECTION MA (ACUTE MORBIDITY)

Now we'd like to know about whatever symptoms [R'S NAME] have had during the past 4 weeks, namely since [...] date, 4 weeks ago.

(MATYPE)	MA01. Did [R'S NAME] ever experience [...] in the last 4 weeks? 1. Yes	3. No	8. DON'T KNOW
A. Headache	1	3	8
B. Runny nose	1	3➔**D**	8➔**D**
C. Cough	1	3	8
a. Dry cough	a. 1	3	8
b. Cough with phlegm	b. 1	3	8
c. Bloody cough	c. 1	3	8
D. Difficulty breathing	1	3➔**E**	8➔**E**
a. Wheezing	a. 1	3	8
b. Short, rapid breath	b. 1	3	8
E. Fever	1	3	8
F. Stomach ache	1	3	8
H. Nausea/vomitting	1	3	8
I. Diarrhea minimal 3x per day	1	3➔**P**	8➔**P**
a. Mixed with blood	a. 1	3	8
b. Mixed with mucus	b. 1	3	8
c. Pale liquid	c. 1	3	8
P. Swollen legs	1	3	8
K. Skin infection (boil, abcess, itching)	1	3	8
L. Eye infection	1	3	8
M. Toothache	1	3	8
U. Cold sores	1	3	8

SECTION MA (ACUTE MORBIDITY)

MA15. Has[R'S NAME] ever been in a traffic accident and received treatment?	DON'T KNOW .....8➔**MA18** No.....3➔**MA18** Yes 1
MA16. When was [R'S NAME] injured in a traffic accident? (**Most recent one if more than once**)	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year
MA17. Does the injury caused by the accident limit [R'S NAME] daily activities?	1. Yes, very much so 2. Yes, to some degree 3. No, not much 4. No, not at all
MA18. Has [R'S NAME] fallen down in the last two years?	DON'T KNOW .....8➔ **MA22** No.....3➔ **MA22** Yes 1
MA19. How many times has [R'S NAME] fallen down in the last two years?	⌊_⌋⌊_⌋ Times
MA20. When did [R'S NAME] last fall and need treatment? (**Most recent one if more than once**)	⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year
MA21. Does the injury caused by the fall limit [R'S NAME] daily activities?	1. Yes, very much so 2. Yes, to some degree 3. No, not much 4. No, not at all
MA22. Have [R'S NAME] ever fractured [R'S NAME] hip?	No.....3 Yes 1

SECTION PNA (POSITIVE AND NEGATIVE AFFECTS)

Now we would like to ask you about pain [R's NAME] may have felt .

PNA07..	Yesterday, did **[R's NAME]** feel any pain?	1. None 2. A little 3. Some 4. Quite a bit 5. A lot 8. DON'T KNOW
PNA07xx.	CAPI CHECK: PNA07 = 1/8?	1. Yes ➔ **AK01** 3. NO
PNA08.	Yesterday were **[R's NAME]** bothered by a pain in **[R's NAME]** 's?	A. Head B. Neck C. Shoulder D. Arm E. Wrists/fingers F. Back/lower back G. Hip H. Knee I. Ankle/foot/toes J. Hands K. Legs L. Buttocksat
PNA09.	Does the pain limit **[R's NAME]**'s daily activities?	1. Yes, very much so 2. Yes, to some degree 3. No, not much 4. No, not at all
PNA10.	Treatment / actions that **[R's NAME]** has done to treat the pain?	A. Pill (modern medicine) B. Injection C. External D. Physiotherapy E. Traditional (Acupuncture, herbal medicine, and other ways the traditional way) W. NO TREATMENT / ACTION

SECTION AK (HEALTH INSURANCE)

Now we would like to know about health insurance or benefits that [R'S NAME] might have.

AK01. Is [R'S NAME] the policy holder/primary beneficiary of health benefits, health insurance, such as **ASKES, ASTEK/Jamsostek, employer provided medical reimbursement, employer provided clinic, private health insurance, savings-related insurance, JAMKESMAS , JAMKESDA, JAMKESSOS, ASKES SOSIAL, JAMPERSAL or ASURANSI MANDIRI?**	DON'T KNOW ..... 8 ➔ **AK06** No ..... 3 ➔ **AK06** Yes 1

TYPES OF INSURANCE/BENEFITS (AKTYPE)	**AK02.** Do [R'S NAME] benefits include [...]?	**AK03.** When did this benefit begin?	**AK04.** Does this benefit cover outpatient visits to public and private health centers? **(CIRCLE ALL THAT APPLY)**	**AK05.** Who else in the household is covered under this benefit? **(CIRCLE ALL THAT APPLY)**
A. Health Insurance (PT. ASKES)	3.No ↓ 8. DON'T KNOW ↓ 1.Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
B. Labor (Social) Insurance (ASTEK Jamsostek)	3. No ↓ 8. DON'T KNOW ↓ 1.Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
C. Employer provided health insurance/benefits	3.No ↓ 8. DON'T KNOW ↓ 1.Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
D. Employer provided clinic	3. No ↓ 8. DON'T KNOW ↓ 1.Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
E. Private insurance	3.No ↓ 8. DON'T KNOW ↓ 1.Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
G. Savings account-related insurance	3. No ↓ 8. DON'T KNOW ↓ 1.Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
H. JAMKESMAS	3.No ↓ 8. DON'T KNOW ↓ 1.Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
I. JAMKESDA	3. No ↓ 8. DON'T KNOW ↓ 1.Yes ➔	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings

SECTION AK (HEALTH INSURANCE)

J. JAMKESSOS	3.No → ↓ 8. DON'T KNOW ↓ 1. Yes	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
K. ASKES SOSIAL	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
L. JAMPERSAL	3.No → ↓ 8. DON'T KNOW ↓ 1. Yes	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings
M. JKN	3. No ↓ 8. DON'T KNOW ↓ 1.Yes →	1. Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ 8. DON'T KNOW	A. Puskesmas or Pustu B. Private C. Public Hospital G. Employer Provided clinic	A. Spouse B. Oldest child C. 2nd oldest child D. 3rd oldest child E. Other child W. NO ONE V. Other H. Parent/siblings

SECTION AK (HEALTH INSURANCE)

AK06. Since 2007, has [R'S NAME] lost any health insurance coverage, such as **ASKES, ASTEK/Jamsostek, employer provided medical reimbursement, employer provided clinic, private health insurance, savings-related insurance, JAMKESMAS , JAMKESDA, JAMKESSOS, ASKES SOSIAL, JAMPERSAL atau ASURANSI MANDIRI?**	DON'T KNOW ..... 8 ➔**SECTION RJ** No ..... 3 ➔ **SECTION RJ** Yes 1

TYPES OF INSURANCE/BENEFITS (AKTYPE)	**AK07.** What benefits did [R'S NAME] lose?			**AK08.** When did the benefits end?
A. Health Insurance (PT. ASKES)	3. No ⬇	8. DON'T KNOW ⬇	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
B. Labor (Social) Insurance (ASTEK Jamsostek)	3. No ⬇	8. DON'T KNOW ⬇	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
C. Employer –provided health insurance	3. No ⬇	8. DON'T KNOW ⬇	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
D. Employer –provided health clinic	3. No ⬇	8. DON'T KNOW ⬇	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
E. Private insurance	3. No ⬇	8. DON'T KNOW ⬇	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
G. Savings account-related insurance	3. No ⬇	8. DON'T KNOW ⬇	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
H. JAMKESMAS	3. No ⬇	8. DON'T KNOW ⬇	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
I. JAMKESDA	3. No ⬇	8. DON'T KNOW ⬇	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW

SECTION AK (HEALTH INSURANCE)

TYPES OF INSURANCE/BENEFITS (AKTYPE)	AK07.			AK08.
J. JAMKESSOS	3. No ➔	8. DON'T KNOW ➔	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
K. ASKES SOSIAL	3. No ➔	8. DON'T KNOW ➔	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
L. JAMPERSAL	3. No ➔	8. DON'T KNOW ➔	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW
M. JKN	3. No ➔ **SECTION RJ**	8. DON'T KNOW ➔ **SECTION RJ**	1. Yes ➔	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW

SECTION RJ (OUTPATIENT CARE)

The next questions pertain to medical facilities or medical providers [R'S NAME] **may have visited for outpatient care during the past 4 weeks, namely since [...] date, 4 weeks ago.**

RJ00.	In the last 4 weeks has R'S NAME] visited a public hospital, puskesmas, private hospital, clinic, health worker or doctor's practice or been visited by a health worker or doctor?	DON'T KNOW ..... 8 ➔**SECTION RN** No ..... 3 ➔**SECTION RN** Yes 1

MEDICAL FACILITY **(RJTYPE)**	**RJ01.** Within the last 4 weeks, has [R'S NAME] been to [...] / visited by [...]?	**RJ02.** How many times did [R'S NAME] visit / been visited by [...] during the last 4 weeks?
A. Public hospital (General or Specialty)	8. DON'T KNOW 3. No 1. Yes ➔	⌊_⌊_⌋ Times
B. Public Health Center (puskesmas)/Auxiliary Center (puskesmas pembantu)	8. DON'T KNOW 3. No 1. Yes ➔	⌊_⌊_⌋ Times
E. Private Hospital	8. DON'T KNOW 3. No 1. Yes ➔	⌊_⌊_⌋ Times
F. Polyclinic, Private Clinic, Medical Center	8. DON'T KNOW 3. No 1. Yes ➔	⌊_⌊_⌋ Times
G. Private Physician (General Practitioner, Specialist, Dentist, Family Doctor)	8. DON'T KNOW 3. No 1. Yes ➔	⌊_⌊_⌋ Times
H. Nurse, Paramedic, Midwife practitioner	8. DON'T KNOW 3. No 1. Yes ➔	⌊_⌊_⌋ Times
I. Traditional practitioner (shaman, wiseman, kyai, Chinese herbalist, masseur, acupuncturist, etc.)	8. DON'T KNOW 3. No 1. Yes ➔	⌊_⌊_⌋ Times
K. Posyandu for the elderly	8. DON'T KNOW 3. No 1. Yes ➔	⌊_⌊_⌋ Times
V. Others	8. DON'T KNOW 3. No 1. Yes ➔ **SECTION RN** **SECTION RN**	⌊_⌊_⌋ Times

SECTION RN (INPATIENT HISTORY)

The following questions pertain to hospitalization (inpatient care) that [R'S NAME] **have had during the past 12 months, namely since the month of [...] 12 months ago.**

RN00.	During the past 12 months has [R'S NAME] ever received patient care at a hospital, puskesmas, clinic, or other?	DON'T KNOW .....8➔**SECTION PM** No .....3➔**SECTION PM** Yes 1

MEDICAL FACILITY **(RNTYPE)**	**RN01.** During the past 12 months, has [R'S NAME] ever received inpatient care at […] ?	**RN02.** How many times has [R'S NAME] received inpatient care at […] during the past 12 months?
A. Public Hospital (General or Specialty)	8. DON'T KNOW 3. No 1. Yes ➔ ⬇ ⬇	⌊_⌋⌊_⌋ Times
B. Public Health Center (puskesmas)	8. DON'T KNOW 3. No 1. Yes ➔ ⬇ ⬇	⌊_⌋⌊_⌋ Times
C. Private Hospital	8. DON'T KNOW 3. No 1. Yes ➔ ⬇ ⬇	⌊_⌋⌊_⌋ Times
D. Private Clinic	8. DON'T KNOW 3. No 1. Yes ➔ ⬇ ⬇	⌊_⌋⌊_⌋ Times
V. Other	8. DON'T KNOW 3. No 1. Yes ➔ ⬇ ⬇ **SECTION PM** **SECTION PM**	⌊_⌋⌊_⌋ Times

SECTION PM (COMMUNITY PARTICIPATION)

Now we will ask you about the arisan **[R'S NAME]** participated in in the last 12 months.

PM01.	Has [R'S NAME] participated in arisan in the last 12 months?	DON'T KNOW ..... 8 ➔**SECTION BR** No..... 3 ➔**SECTION BR** Yes 1
PM01a.	How many arisan has [R'S NAME] participated in the last 12 months?	⌊_⌋⌊_⌋ Types

SECTION BA (NON-CORESIDENT PARENTS)

Now we want to ask about [R'S NAME] biological parents.

BA PARENTS FILL-OUT COLUMN FROM TOP TO BOTTOM

		Father	Mother
BA04.	Does [R'S NAME] father/mother still live in this household?	No ..... 3➔**BA05** Yes 1	No ..... 3➔**BA05** Yes 1
BA04a.	**INTERVIEWER CHECK: AR00**	**1. ⌊_⌊_⌋ AR00 ➔ BA04 MOTHER'S COLUMN** **3. NOT IN HOUSEHOLD**	**1. ⌊_⌊_⌋ AR00 ➔ BA10** **3. NOT IN HOUSEHOLD**
BA05.	Is [R'S NAME] father/mother still alive?	Yes ..... 1➔ **BA06b** No ..... 3 DON'T KNOW 8	Yes ..... 1➔ **BA06b** No ..... 3 DON'T KNOW 8
BA06a.	12 months ago was [R'S NAME] father/mother still alive?	Yes ..... 1 No ..... 3 ➔ **BA06c** DON'T KNOW 8	Yes ..... 1 No ..... 3 ➔ **BA06c** DON'T KNOW 8
BA06aa.	Was [R'S NAME] father/mother living in this household when he/she died?	Yes ..... 1 ➔ **BA06c** No ..... 3 DON'T KNOW 8	Yes ..... 1 ➔ **BA06c** No ..... 3 DON'T KNOW 8
BA06b.	How often has [R'S NAME] seen [R'S NAME] father/mother in the last 12 months?	Everyday ..... 5➔ **BA06c** At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1	Everyday ..... 5➔ **BA06c** At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1
BA06bb.	How often was [R'S NAME] in telephone contact with [R'S NAME] father/mother in the last 12 months?	Everyday ..... 5➔ **BA06c** At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1	Everyday ..... 5➔ **BA06c** At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1
BA06bc.	How often was [R'S NAME] in contact through email or text messages with [R'S NAME] father/mother in the last 12 months?	Everyday ..... 5 At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1	Everyday ..... 5 At least once per week ..... 4 At least once per month ..... 3 At least once per year ..... 2 Never 1
BA06c.	**CAPI CHECK BA05: FATHER/MOTHER ALIVE?**	**Yes ..... 1➔BA07** **DON'T KNOW ..... 8➔BA07** **No ..... 3➔BA06e**	**Yes ..... 1➔BA07** **DON'T KNOW ..... 8➔BA07** **No ..... 3➔BA06e**

SECTION BA (NON-CORESIDENT PARENTS)

		Father	Mother
BA06e.	Did [R'S NAME] father/mother died of a […]	Heart attack....01 Stroke....02 Cancer....03 Other illness....04 Old age....05 Other cause of death....06 DON"T KNOW....98	Heart attack....01 Stroke....02 Cancer....03 Other illness....04 Old age....05 Other cause of death....06 DON"T KNOW....98
BA06d.	When did [R'S NAME] father/mother die?	⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋....1 Month / Year DON'T KNOW....8	⌊_⌊_⌋ / ⌊_⌊_⌊_⌊_⌋....1 Month / Year DON'T KNOW....8
BA07.	How old is [R'S NAME] father/mother now/at time of death?	⌊_⌊_⌊_⌋ year....1 DON'T KNOW....8	⌊_⌊_⌊_⌋ year....1 DON'T KNOW....8
BA07a.	Did [R'S NAME] [...] ever attend school?	No....3➔**BA11** DON'T KNOW....8➔**BA11** Yes....1	No....3➔**BA11** DON'T KNOW....8➔**BA11** Yes....1
BA08.	What is the highest level of education of [R'S NAME] father/mother?	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____
BA09.	What is the highest class that [R'S NAME] father/mother finished?	00 01 02 03 04 05 06 07 98	00 01 02 03 04 05 06 07 98
BA11.	What is/was [R'S NAME] father's/mother's primary activity now/before his/her death?	Job searching....02 ➔ **BA14a** Attending school....03 ➔ **BA14a** Housekeeping....04 ➔ **BA14a** Retired....05 ➔ **BA14a** Stay at home/unemployed....06 ➔ **BA14a** Sick/disabled....07 ➔ **BA14a** DON'T KNOW....98 ➔ **BA14a** Other....95 ➔ **BA14a** **Working/trying to get work/helping to earn income....01**	Job searching....02 ➔ **BA14a** Attending school....03 ➔ **BA14a** Housekeeping....04 ➔ **BA14a** Retired....05 ➔ **BA14a** Stay at home/unemployed....06 ➔ **BA14a** Sick/disabled....07 ➔ **BA14a** DON'T KNOW....98 ➔ **BA14a** Other....95 ➔ **BA14a** **Working/trying to get work/helping to earn income....01**
BA12.	What was [R'S NAME] father's/mother's status of worl before his/her death?	⌊_⌊_⌋	⌊_⌊_⌋
BA13a.	What were […] primary duties (now/one year before he died)?	_____ _____ ➔**BA14a**	_____ _____ ➔**BA14a**

CODE FOR BA08:

02.	**ELEMENTARY SCHOOL**	62.	University S2 (Master)	17.	School for the disabled
03.	Junior High General (SLP/SLTP)	63.	University S3 (Doctorate)	72.	Madrasah Ibtidaiyah
04.	Junior High Vocational (SLP/SLTP)	11.	**ADULT EDUCATION C**	73.	Madrasah Tsanawiyah
05.	Senior High General (SMA/SLA/SLTA)	12.	Adult Education B	74.	Madrasah Aliyah
06.	Senior High Vocational (SMA/SLA/SLTA)	13.	Open University	98.	DON'T KNOW
60.	**COLLEGE D1, D2, D3**	14.	Pesantren	95.	Other .....
61.	University S1 (Bachelor)	15.	Adult Education C		

CODE FORBA09:

00.	**DID NOT/HAVE NOT COMPLETED 1ST**		
01.	**GRADE**		
02.	1		
03.	2	06.	6
04.	3	07.	Graduated
05.	4	98.	DON'T KNOW
	5		

CODE FOR BA12:

01. Self employed	04. Government worker
02. Self-employed with unpaid family worker/temporary worker	05. Private worker
	06. Unpaid family worker
03. Self-employed with permanent worker.	07. Casual worker in agriculture
	08. Casual worker in non-agriculture
	98. DON'T KNOW

SECTION BA (NON-CORESIDENT PARENTS)

		Father	Mother
BA14a.	How is the health status of [R'S NAME] father/mother now/before his/her death?	Very healthy ..... 1 Somewhat healthy..... 2 Somewhat unhealthy..... 3 Very unhealthy ..... 4 DON'T KNOW 8	Very healthy ..... 1 Somewhat healthy..... 2 Somewhat unhealthy..... 3 Very unhealthy ..... 4 DON'T KNOW 8
BA14b.	Now/before death does/did [R'S NAME] father/mother need help with basic personal needs like dressing, eating, or bathing?	Yes..... 1 No ..... 3 UNWILLING TO ANSWER ..... 7 DON'T KNOW..... 8 **→BA04 MOTHER COLUMN**	Yes..... 1 No ..... 3 UNWILLING TO ANSWER ..... 7 DON'T KNOW..... 8 **→BA10**

BA10.	**CAPI CHECK BA04, BA05, BA06a, BA06aa:**	**FATHER**		**MOTHER**	
	a. BA04 AND BA05: IS FATHER/MOTHER STILL ALIVE?	**1. YES**	**3. NO**	**1. YES**	**3. NO**
	b. BA04, BA06a, AND BA06aa: DOES FATHER/MOTHER LIVE IN THE HH NOW (BA04=1) OR BEFORE HE/SHE DIED IN THE LAST 12 MONTHS(BA06a=1 AND BA06aa=1)?	**1. YES**	**3. NO**	**1. YES**	**3. NO**
	c. BA06a: DID FATHER/MOTHER DIE LESS THAN 12 MONTH AGO?	**1. YES**	**3. NO**	**1. YES**	**3. NO**
	d. TOTAL (ADD CODE '1' CIRCLED)	**TOTAL [ ]**		**TOTAL [ ]**	

BA10a.	**CAPI CHECK BA10:**	**TOTAL IN BA10.d FOR MOTHER**		
		0	**1**	**2**
	TOTAL BA10.d FOR FATHER 0	**00 → BA28**	**01 →BA19-22 MOTHER ONLY**	**02 → BA28**
	1	**10 → BA19-22 FATHER ONLY**	**11 → BA18**	**12 →BA19-22 FATHER ONLY**
	2	**20 → BA28**	**21 → BA19-22 MOTHER ONLY**	**22→ BA28**

BA18.	Do [R'S NAME] parents still live together?/Did [R'S NAME] parents still live together at the time of death?	Yes ..... 1 **→ ASK BA19-BA22 ABOUT FATHER AND MOTHER TOGETHER AND RECORD ANSWERS IN "FATHER AND MOTHER LIVE TOGETHER" COLUMN (1ST COLUMN)** No ..... 3 **→ ASK BA19-BA22 ABOUT FATHER FIRST (2ND COLUMN), THEN REPEAT QUESTIONS BA19-BA22 ABOUT MOTHER (3RD COLUMN)**

SECTION BA (NON-CORESIDENT PARENTS)

		Father and Mother Live Together	Father Only	Mother Only
BA19.	During the past 12 months (before his/her death) did [R'S NAME] (or [R'S NAME] spouse) ever provide help to [...] in the form of money, goods or service?	DON'T KNOW ..... 8➔ **BA21** UNWILLING TO ANSWER .... 7➔ **BA21** No ..... 3➔ **BA21** Yes 1	DON'T KNOW ..... 8➔ **BA21** UNWILLING TO ANSWER ..... 7➔ **BA21** No ..... 3➔ **BA21** Yes 1	DON'T KNOW ..... 8➔ **BA21** UNWILLING TO ANSWER ..... 7➔ **BA21** No ..... 3➔ **BA21** Yes 1
BA20.	What type of help did [R'S NAME] provide to [...] in the past 12 months (before his/her death) and how much? **(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**
	A. Money, loan, tuition, health care costs (including treatment).....	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	D. Value of food stuff or other goods.....	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	G. Doing household chores, or providing child care or assisting during physical recovery.....	G. ⌊⌊⌋ 03. Days 05. Months	G. ⌊⌊⌋ 03. Days 05. Months	G. ⌊⌊⌋ 03. Days 05. Months
	H. Helping family business	H. ⌊⌊⌋ 03. Days 05. Months	H. ⌊⌊⌋ 03. Days 05. Months	H. ⌊⌊⌋ 03. Days 05. Months
	V. Other.....	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
BA21.	During the past 12 months (before his/her death) did [R'S NAME] (or [R'S NAME] spouse) ever receive help from [...] in the form of money, goods or service?	DON'T KNOW ..... 8➔ **BA14c** UNWILLING TO ANSWER .. 7➔ **BA14c** No ..... 3➔ **BA14c** Yes 1	DON'T KNOW ..... 8➔ **BA14c** UNWILLING TO ANSWER .... 7➔ **BA27** No ..... 3➔ **BA27** Yes 1	DON'T KNOW ..... 8➔ **BA14c** UNWILLING TO ANSWER ... 7➔ **BA14c** No ..... 3➔ **BA14c** Yes 1
BA22.	What type of help did [R'S NAME] receive from [...] in the past 12 months (before his/her death) and how much?	**(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**	**(ANSWER MAY BE MORE THAN ONE)**
	A. Money, loan, tuition, health care costs (including treatment).....	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	A. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	D. Value of food stuff or other goods.....	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	D. ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
	G. Doing household chores, or providing child care or assisting during physical recovery.....	G. ⌊⌊⌋ 03. Days 05. Months	G. ⌊⌊⌋ 03. Days 05. Months	G. ⌊⌊⌋ 03. Days 05. Months
	H. Helping family business	H. ⌊⌊⌋ 03. Days 05. Months	H. ⌊⌊⌋ 03. Days 05. Months	H. ⌊⌊⌋ 03. Days 05. Months
	V. Other.....	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.	V. ..... ⌊⌊⌊⌋.⌊⌊⌊⌋.⌊⌊⌊⌋ Rp.
		➔**BA14c FATHER COLUMN**		➔**BA14c FATHER COLUMN**
BA27.	**INTERVIEWER CHECK:**		**RETURN TO BA10a TO CHECK WHETHER QUESTIONS REGARDING MOTHER SHOULD BE ANSWERED**	

SECTION BA (NON-CORESIDENT PARENTS)

		FATHER	MOTHER
BA14c.	Where does […] live now/before his death?	In this household ..... 00 In the same village ..... 01 In the same subdistrict ..... 02 In the same district ..... 03 In the same province ..... 04 DON'T KNOW ..... 08 In another province, ... 05 In another country 06	In this household ..... 00 In the same village ..... 01 In the same subdistrict ..... 02 In the same district ..... 03 In the same province ..... 04 DON'T KNOW ..... 08 In another province ..... 05 In another country 06
BA15.	With whom does/did [...] live now/before his/her death? **(CIRCLE ALL THAT APPLY)** **ANSWER OF "BY HIM/HERSELF" CANNOT BE COMBINED WITH OTHER ANSWERS**	By him/herself ..... A Wife/husband ..... B Daughter ..... C Son ..... D Daughter-in-law/son-in-law ..... E Sister ..... F Brother ..... G Brother/sister-in-law ..... I Grandchild ..... J Grandparent ..... K Aunt/uncle ..... L Niece/nephew ..... M Cousin ..... N Non-relative ..... O Parents ..... R Parents in law ..... S Step/foster/adopted kid ..... T Other V	By him/herself ..... A Wife/husband ..... B Daughter ..... C Son ..... D Daughter-in-law/son-in-law ..... E Sister ..... F Brother ..... G Brother/sister-in-law ..... I Grandchild ..... J Grandparent ..... K Aunt/uncle ..... L Niece/nephew ..... M Cousin ..... N Non-relative ..... O Parents ..... R Parents in law ..... S Step/foster/adopted kid ..... T Other V
BA15a.	**CAPI CHECK BA15. IF C OR D IS CIRCLED ASK:** What is the name of the son/daughter that [...] lives with now/before his/her death? **IF C OR D IS NOT CIRCLED, WRITE W**	_____ **➔ BA14c MOTHER COLUMN**	_____ **➔ BA28**

SECTION BA (NON-CORESIDENT-SIBLINGS)

BA28.	Does [R'S NAME] have biological or non-biological siblings who do not live in this household (including those who have died during the past 12 months, but were non-householders at the time of their deaths)?	DON"T KNOW ..... 8➔**BA58x** No ..... 3➔**BA58x** Yes 1
BA29.	a. How many siblings do not live in the house are still alive? b. How many siblings died during the past 12 months and were non-householders at the time of their deaths?	..... ⌊_⌋⌊_⌋ ..... ⌊_⌋⌊_⌋
BA29x.	**INTERVIEWER CHECK:**	**IF BA29.a and BA29.b = 0 ..... 3➔BA58x** **IF BA29.a and BA29.b > 0 ..... 1**
BA54.	During the past 12 months, did [R'S NAME] (or [R'S NAME] spouse) ever **provide** help to siblings who do not live in the HH (including those who died within the last 12 months) in the form of money, goods or service?	DON'T KNOW ..... 8➔**BA56** UNWILLING TO ANSWER ..... 7➔**BA56** No ..... 3➔**BA56** Yes 1
BA55.	What type of help did [R'S NAME] (or [R'S NAME] spouse) provide to the siblings during the past 12 months and how much? **(ANSWER MAY BE MORE THAN ONE)** A. Money, loan, tuition, health care costs (including treatment)..... D. Value of food stuff or other goods..... G. Doing household chores, or providing child care or assisting during physical recovery H. Helping family business..... V. Other.....	**(ANSWER MAY BE MORE THAN ONE)** A. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. D. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. G. ⌊_⌋⌊_⌋ 03. Days 05. Months H. ⌊_⌋⌊_⌋ 03. Days 05. Months V. ..... ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
BA56.	During the past 12 months/12 months before death, did [R'S NAME] (or [R'S NAME] spouse) ever receive help from siblings who do not live in the HH (including those who died in the last 12 months) in the form of money, goods or service?	DON'T KNOW ..... 8➔**BA58x** UNWILLING TO ANSWER ..... 7➔**BA58x** No ..... 3➔**BA58x** Yes 1
BA57.	What type of help did [R'S NAME] (or [R'S NAME] spouse) receive from the siblings during the past 12 months and how much? **(ANSWER MAY BE MORE THAN ONE)** A. Money, loan, tuition, health care costs (including treatment)..... D. Value of food stuff or other goods..... G. Doing household chores, or providing child care or assisting during physical recovery H. Helping family business..... V. Other.....	**(ANSWER MAY BE MORE THAN ONE)** A. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. D. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. G. ⌊_⌋⌊_⌋ 03. Days 05. Months H. ⌊_⌋⌊_⌋ 03. Days 05. Months V. ..... ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.

SECTION BA (NON-CORESIDENT-CHILDREN)

BA58x. CAPI CHECK (select one)	
PANEL RESPONDENT (AR01g=1)	**NEW RESPONDENT (AR01g=3)**
1 ⬇ **BA58a**	**1** ⬇ **BA58b**

PANEL RESPONDENT		
BA58a.	**CAPI CHECK PREPRINTED CHILD ROSTERS**	
	PREPRINTED CHILD ROSTER EXISTS, BOOK IV INDICATED (AR01h = 1)	**5➔SECTION TF**
	PREPRINTED CHILD ROSTER EXISTS, BOOK III INDICATED	**3➔BA00b (PREPRINTED CHILD ROSTER)**
	PREPRINTED CHILD ROSTER DOES NOT EXIST	**1➔BA58b**

BA58b.	**CAPI CHECK COV3 AND COV5:**	**FEMALE AND DOES NOT ANSWER BOOK IV ..... 3 ➔BA61** **FEMALE AND ANSWER BOOK IV ..... 2 ➔SECTION TF** **MALE 1**
BA59.	Does [R'S NAME] wife live in the household?	Not Yet Married ..... 5➔**BA62a** No ..... 3➔**BA61** Yes 1
BA60a.	Do you married only once ?	**Yes, MARRIED ONLY ONCE ..... 1 ➔BA62a** **No , MARRIED MORE THAN ONCE ..... 3 ➔BA62**
BA61.	Do you have children 7 years old or older who live outside the household, or who have died during the past 12 months but were non-householders at the time of their death?	Not Yet Married ..... 5➔**BA62a** Yes ..... 1➔**BA00b (BA FORM FOR NEW CHILD)** No 3
BA62.	Do you have children 7 years old or older who live outside the household, from other marriages than this current one, who are still alive or have died during the past 12 months?	No ..... 3 Yes ..... 1➔**BA00b (BA FORM FOR NEW CHILD)**
BA62a.	Do you have adopted/step children 7 years old or older who live outside the household, who are still alive or have died during the past 12 months?	No ..... 3➔**SECTION TF** Yes ..... 1➔**BA00b (BA FORM FOR NEW CHILD)**

CHILD ROSTER

BA00b. CAPI CHECK (choose one)	
THERE IS A PREPRINTED CHILD ROSTER BOOK.....1 ↓ INSERT PREPRINTED CHILD ROSTER BOOK III	THERE IS NO PREPRINTED CHILD ROSTER BOOK III / NEW RESPONDENT .....3 ↓ USE FORM BA FOR NEW CHILD

SECTION BA (NON-CORESIDENT-CHILDREN)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b)

	BA63a.	BA63b.	BA78.	BA79.	BA80.	BA81.	BA82a.	BA83a.	BA84.	BA84a.	BA84b.
		(NAMA)	When […] twelve years old, [R'S NAME] and [R'S NAME] husband married?	When […] was 12 years old, with whom she/he lived?	What is/was […]'s primary activity now/before his/her death?	What is/was […]'s work status now/before his/her death?	What is/was […]'s type of work now/before his/her death?	**CAPI CHECK BA65 AND BA65a: […] STILL ALIVE?**	How often does/did [R'S NAME] meet with […] during the past year now/before his/her death?	How often does/did [R'S NAME] have contact with […] by telephone during the past year now/before his/her death?	How often does/did [R'S NAME] have contact with […] by mail, sms, email/chatting during the past year now/before his/her death?
			1. Yes 3. No 6. NA 8.DK	1 2 3 4 8	02 03 04 05 06 07 98 ➔**BA83a** 01 95	⌊_⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ↓ **8** ↓	8➔**BA87a** 5➔**BA87a** 1 2 3 4	8➔**BA87a** 5➔**BA87a** 1 2 3 4	1 2 3 4 5 8
			1. Yes 3. No 6. NA 8.DK	1 2 3 4 8	02 03 04 05 06 07 98 ➔**BA83a** 01 95	⌊_⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ↓ **8** ↓	8➔**BA87a** 5➔**BA87a** 1 2 3 4	8➔**BA87a** 5➔**BA87a** 1 2 3 4	1 2 3 4 5 8
			1. Yes 3. No 6. NA 8.DK	1 2 3 4 8	02 03 04 05 06 07 98 ➔**BA83a** 01 95	⌊_⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ↓ **8** ↓	8➔**BA87a** 5➔**BA87a** 1 2 3 4	8➔**BA87a** 5➔**BA87a** 1 2 3 4	1 2 3 4 5 8
			1. Yes 3. No 6. NA 8.DK	1 2 3 4 8	02 03 04 05 06 07 98 ➔**BA83a** 01 95	⌊_⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ↓ **8** ↓	8➔**BA87a** 5➔**BA87a** 1 2 3 4	8➔**BA87a** 5➔**BA87a** 1 2 3 4	1 2 3 4 5 8
			1. Yes 3. No 6. NA 8.DK	1 2 3 4 8	02 03 04 05 06 07 98 ➔**BA83a** 01 95	⌊_⌊_⌋	_____ _____	**1** ➔ **3** ➔ **5** ↓ **8** ↓	8➔**BA87a** 5➔**BA87a** 1 2 3 4	8➔**BA87a** 5➔**BA87a** 1 2 3 4	1 2 3 4 5 8

CODES FOR BA79:
1. With Father and mother
2. With Father only
3. With Mother only
4. Not with father and mother

CODES FOR BA80:
01. Working/trying to get work/helping to earn income
02. Job searching
03. Attending school
04. Housekeeping
05. Retired
06. Stay at home
07. Sick/Disabled
98. DON'T KNOW
95. Other

CODES FOR BA81:
01. Self-employed
02. Self-employed assisted other family members/temporary employees
03. Self-employed with permanent employees
04. Government worker/employee
05. Private worker/employee
06. Unpaid family worker
07. Casual worker in agriculture
08. Casual worker in non-agriculture
98. DON'T KNOW

CODES FOR BA83a:
1. Still Alive
3. Has died in the last 12 months
5. Has died more than 12 months ago
8. DON'T KNOW

CODES FOR BA84, BA84a, A84b:
1. Never
2. At least once a year
3. At least once a month
4. At least once a week
5. Everyday

SECTION BA (NON-CORESIDENT-CHILDREN)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b).

	BA63a.	BA63b.	BA87a.	BA88.	BA89a.	BA90.
		(NAME)	In the past 12 months, did [R'S NAME] **provide** assistance to [...] in the form of money, goods, or services?	What type of assistance did [R'S NAME] provide to […] and what is the value? **(CIRCLE AND FILL ALL THAT APPLY)**	In the past 12 months, did [R'S NAME] **receive** assistance from [...] in the form of money, goods, or services?	What type of assistance did [R'S NAME] receive to […] and what is the value? **(CIRCLE AND FILL ALL THAT APPLY)**
			8 ➔**BA89a** 7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ..... ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	8 ➔**BA63b ROW 2 / BA90x** 7 ➔**BA63b ROW 2 / BA90x** 3 ➔**BA63b ROW 2 / BA90x** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ..... ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			8 ➔**BA89a** 7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ..... ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	8 ➔**BA63b ROW 2 / BA90x** 7 ➔**BA63b ROW 2 / BA90x** 3 ➔**BA63b ROW 2 / BA90x** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ..... ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			8 ➔**BA89a** 7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ..... ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	8 ➔**BA63b ROW 2 / BA90x** 7 ➔**BA63b ROW 2 / BA90x** 3 ➔**BA63b ROW 2 / BA90x** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ..... ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			8 ➔**BA89a** 7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ..... ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	8 ➔**BA63b ROW 2 / BA90x** 7 ➔**BA63b ROW 2 / BA90x** 3 ➔**BA63b ROW 2 / BA90x** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. ..... ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.

BA90x	Is there any child aged 7 or above, biological or non-biological, co-residing or non-ceresiding that has not been listed?	1. Yes ➔**BA63b** 3. No

CODE BA87a AND BA89a:
1. Yes
3. No
7. UNWILLING TO ANSWER

CODE BA88 AND BA90:
A. Money (loans, tuition, health care cost)
D. Food stuff or other goods
G. Chores, child care
H. Help with family business
V. Other

SECTION BA (NON-CORESIDENT-CHILDREN)

BA CHILD ROSTER FOR PANEL AND NON-PANEL RESPONDENTS

We would like to ask about all of [R'S NAME] **children, biological or non-biological, resident and non-coresident, aged 7 and above**

AR00.	BA63a.	BA63b.	BA63c.	BA64.	BA64a.	BA64b.	BA64c.	BA65.	BA65a.	BA66.	BA66a.	BA67.	BA68.	BA69.	BA70.
PIDLINK		NAME	Is […][R'S NAME] biological child?	Sex	Age in 2007?	Birth Date Month/Year	Did […] live in this household?	Is […] alive?	Death Date Month/Year	Current Age/Age when died Yrs	Age ≥ 15?	Marital Status	Highest education level attended by […]?	Highest grade completed by […]?	Where does […] live now/before died?
⌊_⌋⌊_⌋	01		1 2 3 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	**5.** ⌊_⌋		5. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1 ↓ 3	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	00➔**BA63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ .....
⌊_⌋⌊_⌋	02		1 2 3 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	**5.** ⌊_⌋		5. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1 ↓ 3	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	00➔**BA63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ .....
⌊_⌋⌊_⌋	03		1 2 3 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	**5.** ⌊_⌋		5. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1 ↓ 3	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	00➔**BA63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ .....
⌊_⌋⌊_⌋	04		1 2 3 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	**5.** ⌊_⌋		5. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1 ↓ 3	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	00➔**BA63b ROW 2** ⌊_⌋⌊_⌋⌊_⌋ .....
⌊_⌋⌊_⌋	05		1 2 3 7 ↓ 8 ↓ 6 ⌊_⌋⌊_⌋ ↓	**5.** ⌊_⌋		5. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1 ↓ 3	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ years 8. DK	3 1 ↓	⌊_⌋	⌊_⌋⌊_⌋	⌊_⌋⌊_⌋	00➔**BA63b SUPPLEMENT** ⌊_⌋⌊_⌋⌊_⌋ .....

CODE AR00:
96. Not Registered at the Roster

CODE BA64:
1. Male
3. Female

CODE BA63c:
1. Biological
2. Step child
3. Adopted
6. Duplicates
7. Not a child of Resp
8. DK

CODE BA65:
1. Yes
3. No
8. DK

CODE BA64C:
1. Yes
3. No

CODE BA66a:
1. Yes
3. No
8. DK

CODE BA67:
1. Unmarried
2. Married
3. Separated/ Estranged
4. Divorced
5. Widow/ widower
8. DON'T KNOW

CODE BA68:
01. No school/Not yet in school
02. Elementary
03. Junior High - General
04. Junior High - Vocational
05. Senior High - General
06. Senior High – Vocational
60. College (D1, D2, D3)
61. University (Bachelor)
62. University (Master)
63. University (PhD)
11. Adult Education A
12. Adult Education B
13. Open University
14. Islamic School (Pesantren)
15. Adult Education C
17. School for disabled
72. Islamic Elementary School (Madrasah Ibtidaiyah)
73. Islamic Junior High School (Madrasah Tsanawiyah)
74. Islamic Senior High School (Madrasah Aliyah)
90. Kindergarten
98. DON'T KNOW
95. Other

CODE BA69:
00. Did not completer 1st grade at this level
01. 1
02. 2
03. 3
04. 4
05. 5
06. 6
07. Graduated
96. No school
98. DON'T KNOW

CODE BA70:

000.	In this household	018.	Lampung	060.	Kalimantan	081.	Maluku	121.	Yaman
001.	In the same village	019.	Bangka Belitung	061.	West Kalimantan	082.	North Maluku	122.	Saudi Arabia
002.	In the same subdistrict	020.	Riau Islands	062.	Central Kalimantan	090.	Irian	123.	Kuwait
003.	In the same district	030.	Java	063.	South Kalimantan	091.	West Irian Jaya	124.	United Arab Emirates
004.	In the same province	031.	DKI Jakarta	064.	East Kalimantan	094.	Papua	131.	Argentina
010.	Sumatera	032.	West Java	070.	Sulawesi	101.	Malaysia	132.	USA
011.	Nanggroe Aceh Darussalam	033.	Central Java	071.	North Sulawesi	102.	Singapore	141.	Australia
012.	North Sumatra	034.	D.I. Yogyakarta	072.	Central Sulawesi	103.	Brunei Darussalam	151.	Holland
013.	West Sumatra	035.	East Java	073.	South Sulawesi	104.	Hongkong	152.	England
014.	Riau	036.	Banten	074.	Southeast Sulawesi	105.	Japan	998.	DON'T KNOW
015.	Jambi	051.	Bali	075.	Gorontalo	106.	South Korea	995.	Other .....
016.	South Sumatra	052.	West Nusa Tenggara	076.	West Sulawesi	107.	Taiwan		
017.	Bengkulu	053.	East Nusa Tenggara			108.	Timor Leste		

SECTION TF (OTHER TRANSFERS)

Now we would like to know whether [R'S NAME] has provided/received help, in the form of money, goods or services to/from persons outside the household (other than biological parents, siblings children) or to/from other parties (for example like a foundation/organization, friends, and relatives) during the past 12 months (except gifts, souvenirs, etc.)

TF01a.	**INTERVIEWER CHECK:** **RESPONDENT STATUS = MARRIED (COV4=2)?**	**NO ..... 3➔TF02a COLUMN A1** **YES..... 1**
TF01.	Does [R'S NAME] live with [R'S NAME] spouse?	YES.....1➔**TF02A COLUMN A1** No ..... 3➔**TF03a COLUMN A**

CAPI CHECK: IF TF01=3, THEN GO TO TF03-TF06 COLUMN A, B, C

TFTYPE		**A** **Respondent's spouse not in the household**	**A1** **Non-biological parents not in the household**
TF02a.	Does R'S NAME] have non-biological parents who live outside the household who are still alive or died within the last 12 months?		No.....3 ➔**TF03 COLUMN B** Yes 1
TF03a.	How often has [R'S NAME] seen […]in the last 12 months?	5. Every day ➔**TF03 COLUMN A** 4. At least once a week 3. At least once a month 2. At least once a year 1. Never 8. DK	5. Every day ➔**TF03 COLUMN A1** 4. At least once a week 3. At least once a month 2. At least once a year 1. Never 8. DK
TF03b.	How often was [R'S NAME] in telephone contact with […] in the last 12 months?	5. Every day ➔**TF03 COLUMN A** 4. At least once a week 3. At least once a month 2. At least once a year 1. Never 8. DK	5. Every day ➔**TF03 COLUMN A1** 4. At least once a week 3. At least once a month 2. At least once a year 1. Never 8. DK
TF03c.	How often was [R'S NAME] in contact through email, text messages, or chatting with […]in the last 12 month	5. Every day 4. At least once a week 3. At least once a month 2. At least once a year 1. Never 8. DK ➔**TF03 COLUMN A**	5. Every day 4. At least once a week 3. At least once a month 2. At least once a year 1. Never ➔**TF03 COLUMN A1**

SECTION TF (OTHER TRANSFERS)

TFTYPE	A Respondent's spouse not in the household	A1 Non-biological parents not in the household
TF03. In the past 12 months, did [R'S NAME] or [R'S NAME] spouse **provide** assistance to [...] in the form of money, goods, or services?	DK..... 8 ➔**TF05 COLUMN A** No..... 3 ➔**TF05 COLUMN A** Yes 1	DK .....8 ➔**TF05 COLUMN A1** No.....3 ➔**TF05 COLUMN A1** Yes 1
TF04. In the past 12 months, what type of assistance did [R'S NAME] or [R'S NAME] spouse provide to […] and what is the value?	**(CIRCLE ALL THAT APLLY)**	**(CIRCLE ALL THAT APLLY)**
A. Money or loans	A. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	A. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
B. Tuition.....	B. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	B. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
C. Health care costs	C. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	C. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
D. Food stuffs or other goods	D. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	D. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
G. Chores, child care, care for sick family	G. ⌊_⌋⌊_⌋ 03. Days 05. Months	G. ⌊_⌋⌊_⌋ 03. Days 05. Months
H. Help family business	H. ⌊_⌋⌊_⌋ 03. Days 05.Months	H. ⌊_⌋⌊_⌋ 03. Days 05.Months
V. Other	V. ..... ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	V. ..... ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
TF05. In the past 12 months, did [R'S NAME] or [R'S NAME] spouse **receive** assistance from [...] in the form of money, goods, or services?	DK..... 8 ➔**TF02a COLUMN A1** No..... 3 ➔**TF02a COLUMN A1** Yes 1	DK .....8 ➔**TF03 COLUMN B** No.....3 ➔**TF03 COLUMN B** Yes 1
TF06. In the past 12 months, what type of assistance did [R'S NAME] or [R'S NAME] spouse receive from […] and what is the value?	**(CIRCLE ALL THAT APLLY)**	**(CIRCLE ALL THAT APLLY)**
A. Money or loans	A. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	A. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
B. Tuition.....	B. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	B. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
C. Health care costs	C. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	C. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
D. Food stuffs or other goods	D. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.	D. ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp.
G. Chores, child care, care for sick family	G. ⌊_⌋⌊_⌋ 03. Days 05. Months	G. ⌊_⌋⌊_⌋ 03. Days 05. Months
H. Help family business	H. ⌊_⌋⌊_⌋ 03. Days 05.Months	H. ⌊_⌋⌊_⌋ 03. Days 05.Months
V. Other	V. ..... ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. ➔**TF02a COLUMN A1**	V. ..... ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ . ⌊_⌋⌊_⌋⌊_⌋ Rp. ➔**SECTION CP**

SECTION BR (BIRTH HISTORY)

BR00xa.	**CAPI CHECK COV5: SEX OF RESPONDENT?**	**MALE.....1➔SECTION CP** **FEMALE.....5**

Now I would like to ask you about all of [R'S NAME] **pregnancies.**

BR01.	Now I would like to ask you about all children that **[R'S NAME]** has so far. Have **[R'S NAME]** ever given birth?	No ..... 3 ➔ BR08 Yes..... 1
BR02.	Does **[R'S NAME]** have biological sons or daughters who are now living with **[R'S NAME]**?	No ..... 3 ➔ BR05 Yes..... 1
BR03.	How many biological sons are now living with **[R'S NAME]**?	⌊__⌋⌊__⌋ Males
BR04.	How many biological daughters are now living with **[R'S NAME]**?	⌊__⌋⌊__⌋ Females
CAPI CHECK: USE LIST OF HOUSEHOLDERS TO VERIFY NUMBER OF RESPONDENT'S BIOLOGICAL CHILDREN WHO LIVE IN THIS HOUSEHOLD. IF THE TOTAL OF BR03 + BR04 AND THE NUMBER OF RESPONDENT'S BIOLOGICAL CHILDREN IN LIST OF HOUSEHOLDERS DO NOT MATCH, DO SOME PROBING TO CONFIRM THE NUMBER. REPEAT THE QUESTION BY MENTIONING EACH BIOLOGICAL CHILD'S NAME FROM LIST OF HOUSEHOLDERS (AR01).		
BR06.	How many biological sons are still alive, but do not live with **[R'S NAME]**?	⌊__⌋⌊__⌋ Males
BR07.	How many biological daughters are still alive, but do not live with [R'S NAME]?	⌊__⌋⌊__⌋ Females
BR08.	Has**[R'S NAME]** ever given live birth to a son or daughter, even one who lived only for a short a while?	No ..... 3 ➔ **BR11** Yes..... 1
BR09.	How many sons were born alive but passed away later?	⌊__⌋⌊__⌋ Males
BR10.	How many daughters were born alive but passed away later?	⌊__⌋⌊__⌋ Females

BR11.	Has **[R'S NAME]** ever had a pregnancy that resulted in a stillbirth?	No ..... 3 ➔ **BR13** Yes..... 1
BR12.	How many stillbirths have **[R'S NAME]** had?	⌊__⌋⌊__⌋
BR13.	(Besides that) Has [**R'S NAME**] had any miscarriages?	No ..... 3 ➔ **BR15** Yes..... 1
BR14.	How many miscarriages has [**R'S NAME**] had?	⌊__⌋⌊__⌋
BR15.	**CAPI CHECK:** ADD THE NUMBERS (BR03, BR04, BR06, BR07, BR09, AND BR10) AND ENTER AMOUNT HERE: To confirm your answers, [**R'S NAME**] has had ⌊__⌋⌊__⌋ livebirths, is it correct ?	⌊__⌋⌊__⌋ No ..... 3 ➔ **REVISE BR01-BR10** Yes..... 1
BR16.	**CAPI CHECK:** ADD THE NUMBERS (BR12 AND BR14) AND ENTER AMOUNT HERE: Again, to confirm your answers, [**R'S NAME**] has had ⌊__⌋⌊__⌋ stillbirths and miscarriages, is it correct?	⌊__⌋⌊__⌋ No ..... 3 ➔ **REVISE BR12 and BR14** Yes..... 1

SECTION CH (PREGNANCY HISTORY)

CH00x.	In the last 5 years has [[R'S NAME] been pregnant?	DON'T KNOW ..... 8 ➔**SECTION CX** No..... 3 ➔**SECTION CX** Yes 1
CH03.	**CAPI CHECK : TOTAL OF COLUMNS TO BE FILLED OUT**	⌊_⌋⌊_⌋⌊_⌋

CH05.	Chronological order of pregnancy's outcome	**1.LAST**	**2. SECOND TO LAST**
CH06.	Classification of pregnancy's outcome	Is pregnant ..... 1 ➔ **CH14** Stillbirth ..... 3 ➔ **CH09** Miscarriage ..... 4 ➔ **CH09** Live birth 2	Is pregnant ..... 1 ➔ **CH14** Stillbirth ..... 3 ➔ **CH09** Miscarriage ..... 4 ➔ **CH09** Live birth 2
CH06a.	Did pregnancy end in multiple birth?	Yes ..... 1 No..... 3	Yes ..... 1 No..... 3
CH07.	**Name of child** **Fill in '51' IF CHILD IS NOT LISTED** **Fill in ' 52' IF CHILD HAS DIED**	_____ ⌊_⌋⌊_⌋	_____ ⌊_⌋⌊_⌋
CH08.	Is [...] a male or female?	Male..... 1 Female 3	Male..... 1 Female 3
CH09.	What date was [...] born/you had a miscarriage? **(DAY/MON/YR)**	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ➔**CH11** DAY / MONTH / YEAR 8. DON'T KNOW	1. ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋ / ⌊_⌋⌊_⌋⌊_⌋⌊_⌋ ➔**CH11** DAY / MONTH / YEAR 8. DON'T KNOW
CH10a.	How old was [R'S NAME] when [...] was born/[R'S NAME] had a miscarriage?	⌊_⌋⌊_⌋ Years	⌊_⌋⌊_⌋ Years
CH10b.	**CAPI CHECK: USE AGE TO ESTIMATE CHILD'S YEAR OF BIRTH. (BIRTH YEAR OF MOTHER PLUS AGE AT CHILD'S BIRTH/MISCARRIAGE)**	Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋	Year ⌊_⌋⌊_⌋⌊_⌋⌊_⌋

SECTION CH (PREGNANCY HISTORY)

		1.LAST	2. SECOND TO LAST
CH14.	During the pregnancy has/did [R'S NAME] ever have a pregnancy check-up?	DK ..... 8 ➔ **CH18** No ..... 3 ➔ **CH18** Yes 1	DK ..... 8 ➔ **CH18** No ..... 3 ➔ **CH18** Yes 1
CH15.	**Where does/did [R'S NAME] go for pregnancy check-ups?** **(CIRCLE ALL THAT APPLY)** A. Public hospital ..... B. Private hospital ..... C. Community health center (Puskesmas) .... D. Village Delivery Post (POLINDES) ..... E. Clinic/office of physician ..... F. Clinic/office of midwife ..... G. Office of traditional midwife ..... I. Posyandu ..... J. Specialist ..... V. Other	 A B C D E F G I J V	 A B C D E F G I J V
CH18.	**CAPI CHECK :** **1. CH06 = 1 (STILL PREGNANT) .....** **3. CH06 = 2 OR 3 .....** **2. CH06 = 4 .....**	 **1. ➔ CH14 COLUMN 2 / SECTION CX** **3. ➔ CH14 COLUMN 2 / SECTION CX** **2.**	 **1. ➔ SECTION CX** **3. ➔ SECTION CX** **2.**
CH18a.	At the time that [R'S NAME] gave birth to [...], was [R'S NAME] in labor for more than one day and night?	Yes ..... 1 No ..... 3 DON'T KNOW ..... 8 ➔ **CH20**	Yes ..... 1 No ..... 3 DON'T KNOW ..... 8 ➔ **CH20**
CH19.	Where did **[R'S NAME]** give birth to [...]? 09. Own house ..... 10. Family Members House ..... 01. Public hospital ..... 02. Private hospital ..... 03. Delivery Hospital ..... 04. Community health center ..... 05. Village Delivery Post ..... 06. Clinic/office of physician ..... 07. Clinic/office of midwife ..... 08. Office/house of trad. midwife .... 95. Other	 09 ➔ **CH20** 10 ➔ **CH20** 01 02 03 04 05 06 07 08 95	 09 ➔ **CH20** 10 ➔ **CH20** 01 02 03 04 05 06 07 08 95

SECTION CH (PREGNANCY HISTORY)

	1.LAST	2. SECOND TO LAST
CH20. Who provided care during [...]'s birth? **(CIRCLE ALL THAT APPLY)**	NOBODY ..... W Physician ..... A Private midwife..... B Village midwife..... C Nurse ..... D Traditional birth attendant E Family ..... H Other..... V	NOBODY ..... W Physician ..... A Private midwife..... B Village midwife..... C Nurse ..... D Traditional birth attendant E Family ..... H Other..... V
CH25. Is [...] still alive?	Yes ..... 1 ➔ **CH14 COLUMN 2/ SECTION CX** No 3	Yes ..... 1 ➔ **SECTION CX** No..... 3
CH26. How old was [...] when he/she died?	⌊_⌊_⌋ Days ..... 03 weeks..... 04 Months ..... 05 Years..... 06	⌊_⌊_⌋ Days ..... 03 weeks ..... 04 Months..... 05 Years..... 06

SECTION CX (CONTRACEPTIVE USE)

CX00.	**CAPI CHECK COV3: AGE OF THE RESPONDENT ≥ 50?**	**AGE OF THE RESPONDENT ≥ 50**.....1 ➔**SECTION BA** **AGE OF THE RESPONDENT < 50**.....3

Now we would like to ask about methods to postpone or prevent pregnancy.

CX20.	Des [R'S NAME] /does [R'S NAME] husband now use a device/method to postpone or prevent a pregnancy?	DON'T KNOW ..... 8➔**SECTION BA** No ..... 3➔**SECTION BA** Yes 1
CX21.	Which birth control device/method does [R'S NAME] /does [R'S NAME] husband use now?	Rhythm/calendar .....11 Coitus interruptus .....12 Traditional Herbs.....13 Traditional massage .....14 Other .....95 Pill .....01 1 Mo. Injection.....02 2 Mo. Injection.....03 3 Mo. Injection .....04 Intravag .....05 Condom.....06 IUD/AKDR/Spiral.....07 Norplant/Implant.....08 Female Sterilization/Tubectomy ....09 Male Sterilization.....10 Female condom/Femidom.....15 ➔ **SECTION BA**

CHILD ROSTER

BA00a. CAPI CHECK (Choose One)

RESPONDENT HAS A CHILD ROSTER FOR BOOK IV ..... 1 ↓ ↓ ↓ INSERT PREPRINTED CHILD ROSTER FOR BOOK IV	RESPONDENT HAS NO PREPRINTED CHILD ROSTER FOR BOOK IV / NEW RESPONDENT ..... 3 ↓ ↓ ↓ BF00

SECTION BA (NON-CORESIDENT CHILD ROSTER)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b).

	BA63a.	BA63b.	BA78.	BA79.	BA80.	BA81.	BA82a.	BA83a.	BA84.	BA84a.	BA84b.
		(NAME)	When […] twelve years old, [R'S NAME] and [R'S NAME] husband married?	When […] was 12 years old, with whom she/he lived?	What is/was […]'s primary activity now/before his/her death?	What is/was […]'s work status now/before his/her death?	What is/was […]'s type of work now/before his/her death?	CAPI CHECK BA65 AND BA65a: […] STILL ALIVE?	How often does/did [R'S NAME] meet with […] during the past year now/before his/her death?	How often does/did [R'S NAME] have contact with […] by telephone during the past year now/before his/her death?	How often does/did [R'S NAME] have contact with […] by mail, sms, email/chatting during the past year now/before his/her death?
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	⌊_⌊_⌋	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	⌊_⌊_⌋	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	⌊_⌊_⌋	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	⌊_⌊_⌋	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5
			1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 ➔**BA83a** 01 95 _____	⌊_⌊_⌋	_____ _____	**1 ➔** **3 ➔** **5 🡻 8 🡻** **BA90x/BF**	5➔**BA87a** 1 2 3 4	5➔**BA87a** 1 2 3 4	1 2 3 4 5

CODESFOR BA79:
1. With Father and mother
2. With Father only
3. With Mother only
4. Not with father and mother

CODESFOR BA80:
01. Working/trying to get work/helping to earn income
02. Job searching
03. Attending school
04. Housekeeping
05. Retired
06. Stay at home
07. Sick/Disabled
98. DON'T KNOW
95. Other_____

CODESFOR BA81:
01. Self-employed
02. Self-employed assisted other family members/temporary employees
03. Self-employed with permanent employees
04. Government worker/employee
05. Private worker/employee
06. Unpaid family worker
07. Casual worker in agriculture
08. Casual worker in non-agriculture
98. DON'T KNOW

CODESFOR BA83a:
1. Still Alive
3. Has died in the last 12 months
5. Has died more than 12 months ago
8. DON'T KNOW

CODESFOR BA84, BA84a, BA84b:
1. Never
2. At least once a year
3. At least once a month
4. At least once a week
5. Everyday

SECTION BA (NON-CORESIDENT CHILD ROSTER)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b).

	BA63a.	BA63b.	BA87a.	BA88.	BA89a.	BA90.
		(NAMA)	In the past 12 months, did [R'S NAME] **provide** assistance to [...] in the form of money, goods, or services?	What type of assistance did [R'S NAME] provide to […] and what is the value? **(CIRCLE AND FILL ALL THAT APPLY)**	In the past 12 months, did [R'S NAME] **receive** assistance from [...] in the form of money, goods, or services?	What type of assistance did [R'S NAME] receive to […] and what is the value? **(CIRCLE AND FILL ALL THAT APPLY)**
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BA63b ROW 2 / BA90x/BF** 3 ➔**BA63b ROW 2 / BA90x/BF** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BA63b ROW 3 / BA90x/BF** 3 ➔**BA63b ROW 3 / BA90x/BF** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BA63b ROW 4 / BA90x/BF** 3 ➔**BA63b ROW 4 / BA90x/BF`** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BA63b ROW 5 / BA90x/BF** 3 ➔**BA63b ROW 5 / BA90x/BF** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.
			7 ➔**BA89a** 3 ➔**BA89a** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.	7➔**BA63b SUPPLEMENT / BA90x/BF** 3 ➔**BA63b SUPPLEMENT / BA90x/BF** 1	A. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. D. ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp. G. ⌊⌋⌊⌋ 03. Days 05. Months H. ⌊⌋⌊⌋ 03. Days 05. Months V. _____ ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ . ⌊⌋⌊⌋⌊⌋ Rp.

CODE BA87a AND BA89a:
1. Yes
3. No
7. UNWILLING TO ANSWER

CODE BA88 AND BA90:
A. Money (loans, tuition, health care cost)
D. Food stuff or other goods
G. Chores, child care
H. Help with family business
V. Other_____

SECTION BA (NON-CORESIDENT CHILD ROSTER)

NON-CO RESIDENT (BA) CHILDROSTER FOR NEW RESPONDENT/PANEL RESPONDENT WITHOUT PREPRINTED CHILD ROSTER.

Now we would like to ask about all of your biological children with aged 15 years old or more that live outside the household, including biological children that have died in the last 12 months and lived outside the HH at the time of death.

AR00.	BA63a.	BA63b.	BA63c.	BA64.	BA64a.	BA64b.	BA64c.	BA65.	BA65a.	BA66.	BA66a	BA67.	BA68.	BA69.	BA70.
NO. OF HHM		NAME	Is […][R'S NAME] biological child?	Sex	Age in 2007?	Birth Date Month/Year	Did […] live in this household?	Is […] alive?	Death Date Month/Year	Current Age/Age when died Yrs	Age ≥ 15?	Marital Status	Highest education level attended by […]?	Highest grade completed by […]?	Where does […] live now/before died?
⌊_⌊_⌋	01		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	⌊_⌋		1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____
⌊_⌊_⌋	02		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	⌊_⌋		1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____
⌊_⌊_⌋	03		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	⌊_⌋		1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____
⌊_⌊_⌋	04		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	⌊_⌋		1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____
⌊_⌊_⌋	05		1 2 3 7↓ 8↓ 6 ⌊_⌊_⌋↓	⌊_⌋		1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1 3➔ ↓	1➔**BA66** 8➔**BA66** 3	1. ⌊_⌊_⌋/⌊_⌊_⌊_⌊_⌋ Month / Year 8. DON'T KNOW	1. ⌊_⌊_⌋ years 8. DK	3 1➔ ↓	⌊_⌋	⌊_⌊_⌋ _____	⌊_⌊_⌋ _____	00➔**BA63b ROW 2** ⌊_⌊_⌊_⌋ _____

CODE AR00:
96. Not Registered at the Roster

CODE BA64:
1. Male
3. Female

CODE BA63c:
1. Yes
2. Stepchild
3. Adopted
6. Duplicate
7. Not a child
8.DON'T KNOW

CODE BA65:
1. Yes
3. No
8. DK

CODE BA64C:
1. Yes
3. No

CODE BA67:
1. Unmarried
2. Married
3. Separated/ Estranged
4. Divorced
5. Widow/ widower
8. DON'T KNOW

CODE BA68:

01. No school/Not yet in school	61.University (Bachelor)	15. Adult Education C
02. Elementary	62.University (Master)	17.School for disabled
03. Junior High - General	63.University (PhD)	72. Islamic Elementary School(Madrasah Ibtidaiyah)
04. Junior High - Vocational	11. Adult Education A	73. Islamic Junior High (Madrasah Tsanawiyah)
05. Senior High - General	12. Adult Education B	74. Islamic Senior High School (Madrasah Aliyah)
06. Senior High – Vocational	13. Open University	90. Kindergarten
60.College (D1, D2, D3)	14. Islamic School (Pesantren)	98. DON'T KNOW
		95. Other

CODE BA69:
00. Did not completer 1st grade at this level
01. 1
02. 2
03. 3
04. 4
05. 5
06. 6
07. Graduated
96. No school
98. DON'T KNOW

CODE BA70:

000.	In this household	018.	Lampung	060.	Kalimantan	081.	Maluku	121.	Yaman
001.	In the same village	019.	Bangka Belitung	061.	West Kalimantan	082.	North Maluku	122.	Saudi Arabia
002.	In the same subdistrict	020.	RiauIslands	062.	Central Kalimantan	090.	Irian	123.	Kuwait
003.	In the same district	030.	Java	063.	South Kalimantan	091.	West Papua	124.	United Arab Emirates
004.	In the same province	031.	DKI Jakarta	064.	East Kalimantan	094.	Papua	131.	Argentina
010.	Sumatera	032.	West Java	065.	North Kalimantan	101.	Malaysia	132.	USA
011.	Nanggroe Aceh Darussalam	033.	Central Java	070.	Sulawesi	102.	Singapore	141.	Australia
012.	North Sumatra	034.	D.I. Yogyakarta	071.	North Sulawesi	103.	Brunei Darussalam	151.	Holland
013.	West Sumatra	035.	East Java	072.	Central Sulawesi	104.	Hongkong	152.	England
014.	Riau	036.	Banten	073.	South Sulawesi	105.	Japan	998.	DON'T KNOW
015.	Jambi	051.	Bali	074.	Southeast Sulawesi	106.	South Korea	995.	Other
016.	South Sumatra	052.	West Nusa Tenggara	075.	Gorontalo	107.	Taiwan		
017.	Bengkulu	053.	East Nusa Tenggara	076.	West Sulawesi	108.	Timor Leste		

SECTION CP (INTERVIEWER'S NOTES)

EVALUATION FORM FOR BOOK PROXY

LANGMAIN.	Interview was entirely/mostly conducted in what language?	└┴┘ **Other:**_____
LANGOTHR.	Other language used (if any):	└┴┘ **Other:**_____

CODE FOR LANGUAGE

00. Indonesia	04. Batak	08. Sasak	12. Makassar	16. Toraja	20. Lampung
01. Jawa	05. Bugis	09. Minang	13. Nias	17. lahat	95. Other,
02. Sunda	06. Cina	10. Banjar	14. Palembang	18. Sumatera Selatan Lainnya	96. NONE
03. Bali	07. Madura	11. Bima	15. Sumbawa	19. Betawi	

C1. RESULT OF BOOK PROXY INTERVIEW	C2. REASON FOR "3" / "2" IN C1	C4. MONITORING BY SUPERVISORS		
1. Completed ➔**C4**	1. Respondent not home/not found		Yes	No
2. Partially completed	2. Respondent ill	a. Observed	1	3
3. Not completed	3. Responden trefused	b. Checkec	1	3
	5. Others_____	c. Verified	1	3