Palestinian Central Bureau of Statistics
Socio-economic Monitoring of the Palestinian
Households' Survey

> *All information in this questionnaire is for pure statistical purposes only. It is considered confidential in accordance with the Public Statistics Law of 2000.*

IDH00	Questionnaire's serial number in sample	☐☐☐	IDH04	Building's Number	☐☐
IDH01	Governorate: _____ ☐☐		IDH05	Number of Housing unit within Building's	☐☐☐
IDH02	Locality: _____ ☐☐☐☐☐☐		IDH06	Household Number in the housing unit	☐☐
IDH03	Numeration area's No. ☐☐☐		IDH07	Household repetition	☐☐☐
IDH08	Household Number in enumeration area ☐☐		IDH09	Locality in relation to the Barrier (West Bank only) 1. Inside Barrier 2. Outside Barrier 3. Surrounded by Barrier 4. Cut by Barrier	
IDH10	Month of the survey				
IDH11	Building Address	--			
IDH12	Name of Household Head	--			
IDH13	Name of the Respondent	--			
IDH14	Respondent serial Number	☐☐			

IR01	**Visits' schedule**	Day	Month	Year	Visit Number
		☐☐	☐☐	☐☐☐☐	1st visit
		☐☐	☐☐	☐☐☐☐	2nd visit
		☐☐	☐☐	☐☐☐☐	3rd visit

IR02	Total No of household members (male, female)	☐☐	IR03	Total No of Males	☐☐
IR04	Total No of Females	☐☐			

IR07	Interviewer's name:--	IR08	Interviewer's No	☐☐☐☐	Date:
IR09	Supervisor's name:--	IR10	Supervisor's No	☐☐☐☐	Date:
IR11	Data enterer's name:--	IR12	Data enterer's No	☐☐☐☐	Date:
IR13	Encoder's name:--	IR14	Encoder's No	☐☐☐☐	Date:

IR15	**Date of data entry**	Day	Month	Year	
		☐☐	☐☐	☐☐☐☐	

☐ Interviewer: Please check the box with X if an additional questionnaire has been used.

Section 1: Household Members Data

HR01	HR02	HR03	HR04	HR05	HR06	HR07	HR08	HR09
Member's serial number	Names of usual household members (three names) Please, tell me the names of all persons who usually live in your household, including small children and infants, and starting with the household head	What is the relation of (name) to the household head? 1. Household head 2. Spouse 3. Son/daughter 4. Father/mother 5. Brother/sister 6. Grandparent 7. Grandson/granddaughter 8. Son-in-law/daughter-in-law 9. Other relative 10. Other	Is (name) male or female? 1. Male 2. Female	**Age in full years** **Record (00) if age less than 1 year** **98 – Don't know**	Is (name) a registered refugee, non-registered refugee or non-refugee? 1. Registered refugee 2. Non-registered refugee 3. Non-refugee?	ID type 1. Palestinian 2. Palestinian holding other nationalities 3. Jerusalemite 4.Israeli 5.Foreign Nationality	Have any of your family members changed his place of residence during the past six months? 1. Yes within the same gov 2. Yes to another governorate 3. Yes left the country 4. No	Reason for change place of residency 1. work 2. education 3. marriage 4. company others 5.immegration 6. wall 7. to keep Jer ID 8.Israeli measures 9. other
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17.		☐☐	☐	☐☐	☐	☐	☐	

HR01	HR02	HR10	HR11	HR12	HR13	HR14	HR15	HR16	HR17	HR18	HR19	HR20
Member's serial number	Names of usual household members (three names) Please, tell me the names of all persons who usually live in your household, including small children and infants,	Is the mother alive 1. Yes 2. No 3. I don't know	If the mother lives with the family registed the number of its line as in HR01 register 00 if she doesn't live with the family	Is the father alive 1. Yes 2. No 3. I don't know	If the father lives with the family registed the number of its line as in HR01 register 00 if she doesn't live with the family	Does the member have health insurance 0. no 1. PS ins 2. unrwa 3. private 4. PA+unrwa 5. Pa+priv 6. unrwa+priv 7. Israeli 8. other	Is the name suffering any of the following deseases, and on rerguler medication for that reason 1. Diabetes 2. blood pressure 3. heart desease 4. cancer 5. ulcer 6. asthma 6.epilepsy	Does the member suffering difficulty in 1. no difficulty 2. Some difficulty 3. bic difficulty 4. impossible				
		☐☐	☐☐	☐☐	☐☐	☐☐	☐☐	vision	hearing	movement	understanding	communication
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		Members above 5 years old		10 years and above			
HR01	**HR02**	**HR21**	**HR22**	**HR23**	**HR24**	**HR25**	**HR26**
Member's Serial number	Names of usual household members (three names) Please, tell me the names of all persons who usually live in your household, including small children and infants, and starting with the household head	School enrollment 1. enrolled 2. enrolled and quited 3. graduated 4. never enrolled	How many schooling years did (name) successfully complete? **Record (00) if schooling years are less than 1 year** **98:Don't know**	What is (name)'s educational status? 01. Illiterate 02. can read and write 03. Elementary 04. Preparatory 05. Secondary 06. Intermediate level diploma 07. Bachelors degree 08. Higher diploma 09. Masters degree 10. Ph. D. 98. Don't know	Relatyion to Labour force 1. working 1-14 hours 2. working 15-34 hours 3. working 35 and more hours **(doesn't work and willing to work-worked before)** 4. looked for job last week 5. did not look for job (discoaraged) **(doesn't work and willing to work-did not work before)** 6. looked for job last week 7. did not look for job (discoaraged) do not work and not willing to 8. student 9. housekeeping 10.disability, old age, sickness 11. Retirement income 12. other	Main occupation: What kind of work is/was (name) doing in detail?	Economic activity of the establishment 1. agriculture 2. industry 3. construction 4. commerce 5. trnsport 6. communication 7. services 88.dosnt apply 99. don't know
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				Above 10 years			Above 12 years
HR01	**HR02**	**HR27**	**HR28**	**HR 29**	**H30**	**HR31**	**HR32**
Member's Serial number	Names of usual household members (three names) Please, tell me the names of all persons who usually live in your household, including small children and infants, and starting with the household head	Sector 1. private national (inside est.) 2. private national (outside est.) 3. private foreign (inside est.) 4. private foreign (outside est.) 5. national gov 6. froeign gov 7. charity 8. UNRWA 9.inter org.	Main Occupation status 1.Employer 2.Self-employed 3.Wage employee 4. Unpaid family member	Place of Work 1.In the house 2.Within the same locality 3.within the same governorate 4.in other governorate 5.Israel 6.settlements 7.abroad	Does the member have secondary job (if answer to HR24 from 1-3) 1. yes 2. no 88. not applicable 99. donot know	Number of months worked during the last 6 months (if answer to HR24 from 1-5) 88.not apllicable 99.Don't know	What is (name)'s current marital status? Is he/she … 1. Single 2. Engaged for the first time and not married yet 3. Married 4. Divorced 5. Widow/widower 6. Separated 98. Don't know
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			☐☐	☐☐	☐☐	☐☐	☐☐

Section 2: Housing Characteristics

H201	What kind of dwelling unit does the family live in?	1. Villa 2. House 3. Apartment 4. Independent room 5. Tent 6. Other / specify:………………………………….		☐
H202	Is your dwelling?	1. Rented unfurnished 2.Rented furnished 3. Owned 4. For free 5. For work 6. Other / specify: ……………………..		☐
H203	Current dwelling usage staus	1. residence only 2. Several (work and residence)		
H204	How many rooms are there in the dwelling unit for the household use?	*(Number of rooms excluding bathroom and kitchen)*		☐☐
H205	Do you have wastewater collections system	1. public network 2. ???? 3. ????? 4.?????		
H206	What is the main source of drinking water water for your household?	1.Public local network 2. Public Istraeli network 3.cesterns 4.springs 5. tank 6. Miniral water 7. Other		☐
H207	What main source of Electricity	1. Public network 2. Community enerator 3. Neghbourhood generator 4.Private generator 5. No electricity		☐
H208	Availability of a Kitchen	1.Kitchen with Piped Water 2. Kitchen without Piped Water 3. No Kitchen		☐
H209	Availability of a Bathroom	1.Bathroom with Piped Water 2. Bathroom without Piped Water 3. No Bathroom		☐
H210	Availability of a toillet	1.Bathroom with Piped Water 2. Bathroom without Piped Water 3. No Bathroom		
H211	What main source of energy for			
	1.Cooking	1.Gas 2.Kerosene 3.Electricity 4.Wood 5.Other (specify)………..		☐
	2.Heating	1. Not Available 2.gas 3.Kerosene 4.Electricity 5.Wood/coal 6. diesel 7. Other (specify)………..		☐
	2.baking	1. Not Available 2.gas 3.Kerosene 4.Electricity 5.Wood/coal 6. diesel 7. Other (specify)………..		☐

H212	Are the following commodities and services available to the household? 1. Yes 2. No	1. Private car	☐	6. Dishwasher	☐	11.VCR/DVD	☐	16. Satellite dish	☐
		2. Electric fridge	☐	7. Central heating	☐	12.Telephone	☐	17. Internet services	☐
		3. Solar heater	☐	8. Vacuum cleaner	☐	13.Jawwal	☐	18. Radio / recorder	☐
		4. Washing machine	☐	9. Home library	☐	14.Cellular	☐	19. Printert	
		5. Gas stove	☐	10. TV	☐	15. Computer	☐		

Section 3: Ownership of land

Q301	Does the hh own agricultural land	1. Yes 2. no	☐
Q302	What is the area of the agricultural land	In donums	☐☐☐☐
Q303	How is that land used 1. yes 2. no 3. don't know	1. filed Crops 2. vegetables 3. trees 4. pastures 5. forests 6.not planted 7. Other: Specify	☐ ☐ ☐ ☐ ☐ ☐ ☐
Q304	What is the watering method used 1. Artisan well 2. public network 3. tanks 4. cister 5. Rain fed 6. other	1. Field crops 2. vegetables 3. fruit trees 4. Pastures 5. Forrests	☐ ☐ ☐ ☐ ☐
Q305	Area of fruit trees	In donums	☐☐☐
Q306	Area of vegetables	In donums	☐☐☐
Q307	Area of field crops	In donums	☐☐☐
Q308	Does the HH have livestock	1. yes	2. no

Section 4: Assistance, access and coping strategy

Q401	During the past 6 months have you or any of your household's members receive any kind of assistance	1.Yes, the household received assistance and needed it 2. Yes, the household received assistance and did not need it 3. No, the household did not receive assistance and needed it 4. No, the household did not receive assistance and did not need it 6.No 98. Don't know	☐☐
Q402	How important is the assistance received for the household's budget in the past 6 months	1.We could not manage without it 2.We would manage with great difficulties 3.It constitutes a useful complement to the regular household income 4.It only helps alleviate the hardship under difficult circumstances 5.The household would manage anyway 6.Assistance is not important to the household's livelihood 98. Don't know	☐☐
Q403	In general, how do you evaluate these assisstances	1.Very satisfied 2.Satisfied 3.Dissatisfied 4.Very dissatisfied 98.Don't know	☐☐
Q404	If dissatisfied or very dissatisfied, what is your main reason	1.Because of the quantity 2. Because of the quality 3.Because of the frequency (number of times assistance was received) 98. don't know	☐☐
Q405	If you hadnt receive assisstance, why do you think was the reason?	You havnt applied You live in a remote area You live in a relatively well off neighbrouhood	
Q406	Regardless of the fact that you had or hadn't receive assistance, do u think that you are in need	1. Yes, we need 2. No,we don't need 98.Don't know	☐☐
Q407	Regardless of the fact that you had or hadn't receive assistance, to what extent would you say that assistance is targeted to the needy in your community	1. Assistance is primarily targeted to the needy 2. Assistance targets the needy, but often others who do not need such assistance also receive it hub 3. In general, assistance is provided without any distinction between the needy and those who do not need it 98. Don't know	☐☐
Q408	For how long can you steadfast financially in the future	1. I can steadfast regardless of period 2. 1 year 3. Several months 4.barely can manage 5. We are in serious problem and we cant manage 99 don't know	☐☐
Q409	During the past 6 month did you face any of the following 1. Yes 2. No 3. Not applicable 99 don't know	1. sikness of a hh member	☐☐
		2. loss of breadwinners job	☐☐
		3. loss on HH business	☐☐
		4. loss on HH positions (house, land, agricultural, green house, etc)	☐☐
		5. Dificulties in reaching work place, land, etc	☐☐
		6. loss on assets (car, well, poultry, etc)	☐☐
		7. loss of sources of aid	☐☐
		8. loss of all or part of wage	☐☐
		9.lack of access to raw materails	☐☐
		10. a family member got new job, enheretance, better job, new porject	☐☐
		11. moving to a better services area	☐☐
		12. increase in prices	☐☐
		13. other	☐☐

Q410	**Type:** 1. Cash (for training, unemployment allowance, direct transfer, social hardship case allowance) 2. Food assistance (food for work, / training) 3. Health Assistance 4. Furniture 5. Clothes/Sheets 6. Job (cash for work) 7. Inputs for income generating activates 8. Tools and Equipments for income generating activates 9. School stationary 10. Others, specify
	Satisfaction:
	          1. Very satisfied 2.Satisfied 3.Dissatisfied 4.Very dissatisfied 88. Not applicable 98.DK\NA
	Provider:
	          1. The Municipality/village council 2. The Palestinian Authority/ministries/agencies
	          3. UNRWA 4. Other UN organizations 5. Chambers of commerce/industry 6. A Local NGO (Palestinian non governmental organization) 7. An international NGO 8. A religious organization 9. WFP 10. A private source	

	List the information about the different assisstance pakages that you have received during ??	
A	Provider 1	1.Type:	☐
		2.b Value in NIS	☐☐☐☐☐
		3.Source:	☐☐
		4.Satisfaction:	☐
B	Provider 2	1.Type:	☐
		2.b Value in NIS	☐☐☐☐☐
		3.Source:	☐☐
		4.Satisfaction:	☐
C	Provider 3	1.Type:	☐
		2. Value in NIS	☐☐☐☐☐
		3.Source:	☐☐
		4.Satisfaction:	☐

Q 411	**Coping Strategies**	1.Yes 2. no 8. not applicable 9. don't know	How many times
	a. For the household to stead financially during <u>the past week</u>, did you have to do any of the following		
	1 Consume less food	☐☐	☐☐
	2 consume lower quality food	☐☐	☐☐
	3 Borrow food or rely on help from friends or relatives	☐☐	☐☐
	4 Purchase food on credit	☐☐	☐☐
	5 Restrict consumption by adults in order for children to eat	☐☐	☐☐
	6 Reduce the number of meals eaten in a day	☐☐	☐☐
	b. For the household to stead financially during <u>the past six months</u>, did you have to do any of the following		
	1. Not pay bills/utilities	☐☐	☐☐
	2. Sell off assets jewelry, furniture, productive assets, etc)	☐☐	☐☐
	3. Used life savings	☐☐	☐☐
	4. Regrouping of family members to save money	☐☐	☐☐
	5. Reduce health and education expenses	☐☐	☐☐
	6. Change place of residence	☐☐	☐☐

Section 5: Income and Expenditure

Q501	What was your average **monthly** family income during the past 6 months (in NIS)[1]	…………………… NIS	
Q502	During the past six months, did your household income change?	1. Yes, decreased 2. Yes, increased 3. No, remained the same	☐

Q503	Could you please tell us the income of your household during the last month from the following sources (in NIS) (*to be agreed on by insitutions*)	1.Wage employment (including wages and salaries from second job, tips, bonus, commission, overtime)	☐☐☐☐
		2.Incomes from self-employment activities (excluding agriculture, including income from non agriculture home produced goods)	☐☐☐☐
		3.Income from private business (for owner-employers of small, medium or big enterprises other than agriculture)	☐☐☐☐
		4.Income from self employment home produced or own business in agriculture	☐☐☐☐
		5.Renting out land, building, rooms, and others	☐☐☐☐
		6.Dividends	☐☐☐☐
		7.Social security transfers retirement pensions, insurance compensations, etc	☐☐☐☐
		8.Cash and in kind assisstance	☐☐☐☐
		10.Income from remittances and finalcial help from relatives and/or friends living abroad	☐☐☐☐
		11.Financial help from family members living in Palestine	☐☐☐☐
		13.Other (specify)……………………………………	☐☐☐☐

Q504	Have the hh expenditures changed During the past 6 months	1. Yes decreased 2. Yes increased 3. No didn't change 98. DK			☐☐
Q505	If expenditures of hh was reduced, on which items 1.Yes 2.No 88.Not applicable 98.Don't know	1.Food	☐☐	2.Clothes	☐☐
		3.Education	☐☐	4.Housing needs	☐☐
		5.Health	☐☐	6.Travel\recreation	☐☐
		7. Transportation	☐☐	8. Utility bills	☐☐
		9.Other (specify):……………………………			☐☐

Q506	If your family expenditure were reduced on food, what was reduced? (Answer: 1- Yes 2- No)	1. Quantity consumed by housholds' members 2. Quality of food consumed 3. Quantity of meat purchased /consumed 4. Quantity of fruits purchased /consumed 5. Quantity of milk purchased /consumed 6. others (Specify …………………………)
Q507	What was your household average consumption during the past 6 months (in NIS)	…………………… NIS
Q508	What was your household food consumption during the past 6 months (in NIS)	…………………… NIS
Q509	Do you purchase food on Credit 1. Yes 2. No	☐
Q510	What is the average monthly percnetage of food purchased on credit of total monthly food purchase?	☐☐%
Q511	Is the purchase of food on credit is the same as usual? 1. Increase 2. Decreae 3. Stayed the same 9. Don't know	

Section 6: Dietary Diversity, Household Food Insecuerity Access Scale, and Consumption/Expinditures modules

Q601	In answering each of the following questions, please respond according to your situation in the past 30 days		
	0 = No, not even once in the past 30 days 1= Rarely (once or twice in the past 30 days) 2 = Sometimes (three to ten times in the past 30 days) 3= Often (more than ten times in the past 30 days)	1.Did you worry that your household would not have enough food?	☐
		2.Were you or any household member not able to eat the kinds of foods you preferred because of a lack of resources?	☐
		3.Did you or any household member eat a limited variety of foods due to a lack of resources?	☐
		4.Did you or any household member eat food that you preferred not to eat because of a lack of resources to obtain other types of food?	☐
		5.Did you or any household member eat a smaller meal than you felt you needed because there was not enough food?	☐
		6.Did you or any other household member eat fewer meals in a day because there was not enough food?	☐
		7.Was there ever no food at all in your household because there were not resources to get more?	☐
		8.Did you or any household member go to sleep at night hungry because there was not enough food?	☐
		9.Did you or any household member go a whole day and night without eating anything because there was not enough food?	☐

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[1] Income including that received as wages and salaries from employment as well as in kind benefits, mixed income from owning business, income from self employment, property income, transfers (those from relatives and friend in addition to aid received in cash or in kind)

Q602: How many days in the past Week did your household consumed the following food items and what are the sources of the food items? (**Interviewer**: include number of days only without regard to the number of times eaten per day

1.	*How many meals did the <u>adults</u> in your HH ate Yesterday* (adults above 15 years)	Adults ate ☐
2.	*How many meals did the <u>children</u> in your HH ate Yesterday* (children under 15 years)	Children ate ☐
3.	How many people (adults and children) ate the food yesterday?	☐☐

Food Item	A. Number of days the food item was eaten last 7 days (0 – 7 days)
1. Wheat, Frikeh, Burghul	
2. Rice	
3. Bread	
4. Fish	
5. Eggs	
6. Red meat (sheep/goat/beef)	
7. White meat (poultry)	
8. Canned meat/fish	
9. Milk and dairy products	
10. Olive oil	
11. Vegetable oil	
12. Pickles (olive and other vegetables)	
13. Fruits	
14. Vegetables	
15. Pulses (lentil and chickpeas)	
16. Tubers, roots, Potato	
17. Dried fruit and Dibs (molasses)	
18. Sweets, sugar, Jam	
19. Zater and Doqqa	
20. Other – drinks, tea, coffee, spices	

Expinditures on Food and Non-food items

Q603	A. What is the cash value of the food acquired for your household consumption during the past month?			
	Item	a.Cash Expenses	b.In kind receipts	c.Own production
1	Cereals and cereal products (wheat, flour, purghul, frekeh, etc)			
2	Rice			
3	Bread (and products)			
4	Legumes			
5	Fish and sea products (tinned, fresh, frozen)			
6	Meat (all types) and products (tinned, fresh, frozen)			
7	Chicken and Poultry (tinned, fresh, frozen)			
8	Eggs			
9	Milk and dairy products			
10	Oils and fats			
11	Olive oil			
12	Tupers (potatoe etc)			
13	Vegetables			
14	Fruits			
15	Sweets and confectionaries			
16	Other types of food (tea, coffee, coco, salt, peper , drinks)			
	What is the cash value of the consumption expenditures on the following items during the past month			**Cash value in NIS**
	B. Expenditures on ready meals and drinks outside homes (NIS)			
	C. Expenditures on ready meals and drinks in resturants (NIS)			

	D. the value of expenditures on Housing (includes cost of rent, routine non capital forming maintenance, cleaning materials and appliances, etc...) during the past month?	
	E. What is the value of expenditures on Utility Bills (Water/electricity/fuel/phone for household use only) during the past month	
	What is the cash value of the consumption expenditures on the following items during the past 3 months	**Cash value in NIS**
	F. the value of expenditures on Medical expenses/health care (in the country and abroad if applicable)	
	G. the value of expenditures on Transportation and communications (including spare parts, Gasoline, repair costs, etc..)	
	H. the value of expenditures on Clothing and shoes (including for women and men, adults and children	
	I. the value of expenditures on Personal care (including for women and men, adults and children) during the last month	
	J. the value of expenditures on Recreational and cultural activities during the last 6 months	
	K. the value of expenditures on Tobacco and cigarettesRecreational and cultural activities during the last 6 m	
	What is the cash value of the consumption expenditures on the following items during the past year	**Cash value in NIS**
	L. the value of expenditures on Education and school fees for all household members (in the country and abroad if applicable) during the past 6 months	

Section 7: mobility and access to basic services

Q701	To what extent would you say that movement restrictions represented an obstacle to you /your famlily durign the past 6 months 1. Very Much 2. Minor 3. Not an obtacle 4. Don't know/no answer	☐
Q702	Were you/ your family members able to reach your work place during the past 6 months 1. Not difficuly 2.difficult 3. Very difficult 4. Almost impossible 8. Not applicable 9. Don't know	☐
Q703	If you faced any difficultues in reaching workplace during the past 6 month the reason was	
	1. inability to get a permit to cross checkpoints (within WB)	☐
	2. inability to get a permit to work in Jerusalem/Israel	☐
	3. inability to move within the west bank due to movement restrictions (wall, checkpoints, earch mounts, etc)	☐
	4. Inability to get to Israeli/jerusalem due to movement restrictions (wall, checkpoints, earch mounts, etc)	☐
	5. Transportation cost inaffordable	☐
	6. due to the long time it takes to reach workplace	☐
Q704	During the past 6 month were you able to reach/plant your land months 1. Very Much 2. Minor 3. Not an obtacle 4. Don't know/no answer	
Q705	If you faced any difficultues in reaching/planting your land during the past 6 month the reason was	
	1. inability to get a permit to cross checkpoints (within WB)	
	2. inability to get a permit to cross to Jerusalem/Israel	
	3. inability to move within the west bank due to movement restrictions (wall, checkpoints, earch mounts, etc)	
	4. Inability to get to Israeli/jerusalem due to movement restrictions (wall, checkpoints, earch mounts, etc)	
	5. Transportation cost inaffordable	
	6. due to the long time it takes to reach land	

		a. the need	b. the source	c. if the answer to a is 1 or 2 what is the reason
Q706	What kind of health services did any of the households mebers need during the past 6 months	1. we needed but didn't receive thje service 2. we received the service but late 3. we received the service it within the right time 4. didn't need	1. MoH 2.UNRWA 3.Red Cresent 4.NGO 5. Private clinic 8. not applicble 9. don't know	1. Don't know were to go 2. wasn't willing to go due to disappointing previous experience 3. the health centers is farltrasportation not available 4. the service is available but cannot be reached due to movement resrticition 5. dangerous security situation around residence/service providers 6. service is not affordable 7. Not applicable 8. Don't know
1.	emergency/injuries (2 hours)			
2.	Ambulance (1 hour)			
3.	Hospital/labor services (2 hours)			
4.	Care/chaild care (diarehea, coughing) (1 day)			
5.	Special cases (broken bone etc) (1 week)			
6.	Mental health care (1 day)			
7.	Follow up on chronic deseases (1 week)			
8.	Vaccination (1 week)			
9.	Maternal health (1 week)			
10.	Birth control (1 week)			

Q707	In general, how do evaluate the serivce received	a. Evaluation		Do you think the service has improved duringthe past 6 months	
		1. good 2. Acceptable 3. Bad 4. Don't know		1. yes 2. No 9. Don't know/no answer	
1.	Waiting time				
2.	Duration				
3.	Available of medications				
4.	Service provider working hours				
5.	Distance from home to the center				
6.	Distance from home to hospital				
7.	The medical staff behaviours				
8.	Adequate number of medical staff				
9.	Adequate number of female medical staff				
10.	Emergency services				
	How far is your home from			1. Meter	2. Kilo meter
		1. public trasnportation School		☐☐	☐☐
		2. nearest clinic		☐☐	☐☐
		3. health center		☐☐	☐☐
		4. Nearest public or private hospital		☐☐	☐☐
		5. nearest elementary school		☐☐	☐☐
		6. nearest matrernal health center		☐☐	☐☐