State of Palestine
The Palestinian Central Bureau of Statistics
Survey on the Socioeconomic Palestinian Households, 2016 Questionnaire

the information in this questionnaire are for pure statistical purposes only; It is considered confidential in accordance with the Public Statistics Law for the year 2000

Part 1: Identification Data

ID00	Household serial number in sample	□□□□	ID3	Enumeration area's no.	□□□	ID6	Household no. in enumeration area sample	□□
ID1	Governorate	□□	ID4	Bldg. no. in enumeration area	□□□	ID7	Location of housing unit to the barrier wall / Distance between the housing unit and the buffer zone	
ID2	Locality	□□□□□□	ID5	No of unit within the building	□□□		1. Inside the barrier wall (West Bank) 2. Outside the barrier wall (West Bank) / 3. Less than 1000 m from the buffer zone (Gaza) 4. 1000 m and more (Gaza)	□

Part 2: Quality Control

QC1		Field Worker Visit Schedule			QC2	Interview Result			□
		Day	Month	Year	1	Completed	5	Refused / reason ………………………………	
1		□□□□ □□ □□			2	Partially completed	6	Information not available	
2		□□□□ □□ □□			3	Household is abroad	7	Unit uninhabited	
3		□□□□ □□ □□			4	Nobody is home	8	Other / Specify: ………………………………	
QC1_1 Duration of Interview		Questions begin at: □□:□□ questions ended at: □□:□□							

Number of Household Members

QC3_T :Total number of household members □□	**QC3_M** :male members □□	**QC3_F** :female members □□

IR01	Field worker's name :	IR02	Field worker no. :	□□□□□	Date □□□□/□□/□□
IR03	Supervisor's name	IR04	Supervisor's no.	□□□□□	Date □□□□/□□/□□
IR05	Editor's name	IR06	Editor's no.	□□□□□	Date □□□□/□□/□□
IR07	Encoder's name	IR08	Encoder's no.	□□□□□	Date □□□□/□□/□□

Part 3: Household Member Data

D1	D2	D3	D4	D5	D6	D7	For individuals above 5 years:		
	Full Name (four name)	**Relation of (Name..) with the head of household** 1. Head of household 2. Husband/wife 3. Son/ daughter 4. Father/ mother 5. Brother/ sister 6. Grandfather/ grandmother 7. Grandson/ granddaughter 8. Son's wife/ Daughter's husband 9. Other relatives 10. Others	**Sex of (Name…)** 1. Male 2. Female	**Age in full years of (name …..).** For individuals less than one year put 00 and for individuals of 98 years or above put 98	**Refugee status of (Name..)** 1. Registered refugee 2. Non registered refugee 3. Not a refugee	**Does (Name..) have health insurance** 1. None 2. Only governmental 3. Only UNRWA 3. Only private 4. Governmental and UNRWA 5. Governmental and private 6. UNRWA and private 7. Israeli 8. Other/ specify	**D8** **Is (name…) enrolled in educations?** 1. Enrolled in kindergarten. **Move to next member** 2. Enrolled in education (post kindergarten) 3. Was enrolled and dropped out 4. Was enrolled and graduated 5. Never enrolled. **Move to D10**	**D9** What are the number of schooling years successfully completed by (Name) in formal education?	**D10** **What is the educational status for (name….)** 1. illiterate 2. Reads and writes 3. Elementary 4. Preparatory 5. Secondary 6. Intermediate level diploma 7. Bachelor's degree BA 8. Higher diploma 9. Masters degree Ma 10. PHd
Member's serial number									
1		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
2		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
3		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
4		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
5		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
6		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
7		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
8		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
9		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
10		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
11		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
12		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
13		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐
14		☐☐	☐	☐☐	☐	☐.......	☐	☐☐	☐☐

D1	D2	For individuals above 10 years		For individuals above 12 years
Member series number	Full name (four names)	**D11** **(Name…) relation to labor force during the past week** 1.　　Working 1-14 hours 2.　　Working 15-34 hours 3.　　Working 35 or more hours 4.　　(not working and looking for a job – worked before) Looked for a job in the past four weeks 5.　　not working and looking for a job – did not work before) Looked for a job in the past four weeks **Is not working and does not want to work, reasons:** 6.　Full time studying/ training 7.　Full time housework 8.　Disability/ age/ illness 9.　Availability of income/ retirement 10. Others **If answers were choices 5-10, move to D13**	**D12** **What is the sector (name) works in?** 1.　　Private national inside EST. 2.　　Private national outside EST. 3.　　Private Foreign inside EST. 4.　　 Private Foreign outside EST. 5.　　National government 6.　　Local authority 7.　Foreign government 8.　Charitable association 9.　UNRWA 10. International organization 11. Other / Specify	**D13** **What is (Name) marital status?** 1.　　Never married 2.　　first time contract without getting married 3.　　Married 4.　　Divorced 5.　　Widow 6.　　Separated
1		☐☐	☐☐	☐
2		☐☐	☐☐	☐
3		☐☐	☐☐	☐
4		☐☐	☐☐	☐
5		☐☐	☐☐	☐
6		☐☐	☐☐	☐
7		☐☐	☐☐	☐
8		☐☐	☐☐	☐
9		☐☐	☐☐	☐
10		☐☐	☐☐	☐
11		☐☐	☐☐	☐
12		☐☐	☐☐	☐
13		☐☐	☐☐	☐
14		☐☐	☐☐	☐

☐ Fieldworker: please put X if another questionnaire was used for the same household

	Part Four: Housing Data		Answer
H1	What kind of dwelling unit does the family live in ?	1. Villa 2. House 3. Apartment 4. Independent room 5. Tent 6. Barracks 7. Caravan 8. Other/ specify…….	☐
H2	What type of tenure?	1. Full ownership 2. Mortgage/ loaned residence 3. Rented without furniture 4. Rented with furniture 5. For free 6. In exchange of labor 7. Other/ specify…..	☐
H3	1. What is the value of monthly rent? 2. Specify the currency?	**Asked to respondents by 3 or 4 to question H2** Currency: 1 NIS 2. JD 3. USD	☐☐☐☐ ☐
H4	1. If you rented a similar residence these days, what would be the estimated rent for this current month? 2. Specify currency	**Rent value:** **Currency:** 1. NIS 2. JD 3. USD	☐☐☐☐ ☐
H5	Number of rooms in this house?	**(Excluding bathroom and kitchen)**	☐☐
H6	Dwelling connection to utilities networks (**main source of such services**)		**Answer**
	1. Water	Local public water network 2. Israeli water Network (Mikrot) 3. Rain water collection well 4. Springs 5. Tanks 6. Irrigation well 7. Other/ specify ……	☐
	2. Electricity	1. Public network 2. Private generator 3. None	☐
	3. Sewage	1. Public network 2. Porous Cesspit 3. Tight Cesspit 4. None	☐

H7	Is the service provided by public networks disrupted (for dwellings connected to public utility networks)		**Answer**
	1. Water	1. Service continuously available. 2. Service disrupted once a month. 3. Service disrupted once a week 4. Service disrupted more than once a week. 5. Service disrupted on daily basis (fixed hours of service a day). 6. Network not operating. 7. Other/ specify……………………	☐
	2. Electricity	2. Service continuously available. 2. Service disrupted once a month. 3. Service disrupted once a week Service disrupted more than once a week. 5. Service disrupted on daily basis (fixed hours of service a day). 6. Network not operating. 7. Other/ specify……………………	☐
How many of the below are available in this house?			**Number**
H8	Kitchen (number)		☐
H9	Bathroom (number)		☐
H10	Toilet (number)		☐
H11	Shared toilet and bathroom (number)		☐

	What is the main energy source used in..		**Number**
H12	**1. Cooking**	1. Gas. 2. Kerosene. 3. Electricity. 4. Wood. 5. Other/ specify………………	☐
	2. Heating	1. Gas. 2. Kerosene. 3. Electricity. 4. Wood. 5. Diesel. 6. Coal. 7. Other/ specify…………… 8. None	☐
	3. Air conditioning	1. Electricity 2. Other/ Specify …………….. 3. None	☐
	4. Baking	1. Gas. 2. Electricity. 3. Wood. 4. Olive cake 5. Other (coal, animal waste)/ specify…….. 6. None.	☐
	5. Heating water	**1.** Solar energy. 2. Gas. 3. Kerosene. 4. Electricity. 5. Wood. 6. Coal. 7. Diesel. 8. Other/ specify…..	☐

H13	How many of the following durables are available to the household? (if none, write 0)	1. Private car	☐	13. Electric van	☐	25. Israeli mobile phone line	☐
		2 .Electric fridge	☐	14. Gas / electric cooker	☐	26. Computer (PC)	☐
		3. Freezer	☐	15. Microwave	☐	27. Computer (laptop)	☐
		4. Solar heater	☐	16. Gas/ electric oven	☐	28. Water filter	☐
		5. Water heater (wooden or boiler)	☐	17. Central heat	☐	29. Smart mobile phone	☐
		6. Automatic washing machine	☐	18. Heater	☐	30. Air Conditioner	☐
		7. Regular washing machine	☐	19. Fireplace	☐	31. Central Air Conditioner	☐
		8. Dryer	☐	20. Home Library	☐	32. IPAD/ Tablet	☐
		9. Dishwasher	☐	21. Regular TV	☐	33. Radio	☐
		10. Kerosene cooker (babour)	☐	22. VCR/ DVD	☐	34. TV/ LCD/ LED/ S-D	☐
		11. Palestinian mobile line	☐	23. Satellite dish	☐	35. Play station / X-box	☐
		12. Vacuum cleaner	☐	24. Phone line	☐	36. Other / Specify …..	☐

Part 5: Assistance and Coping Strategy

C01	In the second half of 2016, have you or any of your family received any type of Assistance from any agency (like food, medicine, labor, education)	1. Yes 2. No.. Move to C03	☐

To researcher: Record Assistance received by the family during the second half of 2016 / set a line per every type of assistance.

C02	A. What is the type of assistance received by household or one of its members	B. What is the value of assistance received by household or one of its members Value (the total sum of all times of the same type of assistance from the same source in NIS)	C. What is the source of Assistance received by household or one of its members	D. Type of Assistance Periodicity	E. Level of satisfaction with assistance	F. Main reason behind non-satisfaction with assistance
	1. Food 2. Free treatment/ medicine 3. Clothing 4. Employment/ job 5. Compensations for martyrs. 6. Cash (money) 7. Health insurance. 8. Food ratio 9. School nutrition 10. production inputs (seeds, fertilizers, animal feed, water tanks) 11. drinking water 12. electricity charging 13. housing (shelter, rent, caravan) 14. other/ specify……		1. Ministry of social affairs 2. Other PNA institutions 3. Political parties/ factions 4. Zakat committees 5. International/ development agency 6. UNRWA 7. Arab or foreign states 8. Charitable/ Religions associations 9. Family and relatives 10. Friends/ Acquaintance/ neighbors/doers of good deed 11. Labor unions 12. Local banks 13. Local reform committee 14. Other/ specify………	1. Periodic 2. Contingency	1. Very satisfied 2. Satisfied 3. Dissatisfied 4. Very dissatisfied 9. I don't know/ no answer **If answer= 1,2,9, move to next line**	1. quantity 2. quality 3. quality and quantity 4. frequency of Assistance 5. other/ specify 9. I don't know/ no answer
1	☐☐ …………………………	☐☐☐☐	☐☐…………………………	☐	☐	☐

2	☐☐	☐☐☐☐	☐☐	☐	☐	☐
3	☐☐	☐☐☐☐	☐☐	☐	☐	☐
4	☐☐	☐☐☐☐	☐☐	☐	☐	☐
5	☐☐	☐☐☐☐	☐☐	☐	☐	☐
6	☐☐	☐☐☐☐	☐☐	☐	☐	☐
7	☐☐	☐☐☐☐	☐☐	☐	☐	☐
8	☐☐	☐☐☐☐	☐☐	☐	☐	☐
9	☐☐	☐☐☐☐	☐☐	☐	☐	☐
10	☐☐	☐☐☐☐	☐☐	☐	☐	☐
11	☐☐	☐☐☐☐	☐☐	☐	☐	☐

C03	**During the past 30 days**, how many times has your family encountered the following: 0. Never 1. Once or twice 2. From 3 – 10 times 3. More than 10 times 9. I don't know/ no answer	1. Anxiety that household will not have sufficient food (food insecurity)	☐
		2. Household members were not able to have preferred types of food due to lack of resources	☐
		3. Household members had to eat limited types of food due to lack of resources	☐
		4. Household members had to eat to un-preferred food due to lack of resources	☐
		5. Household members had to eat food less than what they need because of it insufficiency	☐
		6. Household members had to eat less number of meals because of insufficient food	☐
		7. Absence/ insufficient food at home because of insufficient resources to purchase	☐
		8. Any of household members had to sleep at night hungry because there was insufficient food	☐
		9. Any household member had to abstain from eating all day long because of insufficient food	☐

C04	**During past 12 months,** the family was on loan, borrowing or debt? 1. Yes 2. No 3. I do not know 4. No answer **(If the choice was: 2, 3 ,4 Move to C6_1)**	☐
C05	What is the total value of the loan/ borrowing/ debt in **NIS?**	☐☐☐☐☐☐

C06_1	(A) **In the second half of 2016,** has any of the family members faced traumatic shocks	Answer: 1. Yes 2. No **Move to the next line**	(B) what is the impact/ effect of this shocks: 1. Increase. 2. Reduction. 3. No change			
			Income	Assets	Food Storage	Purchase power of food supply
1.	High cost of food supply	☐	☐	☐	☐	☐
2.	High cost of production input	☐	☐	☐	☐	☐
3.	Shortage of water	☐	☐	☐	☐	☐
4.	Loss in assets (including land) and projects	☐	☐	☐	☐	☐
5.	Loss in assets or projects due to Israeli measures	☐	☐	☐	☐	☐

C06_1	(A) **In the second half of 2016,** has any of the family members faced traumatic shocks	Answer: 1. Yes 2. No **Move to the next line**	(B) what is the impact/ effect of this shocks: 1. Increase. 2. Reduction. 3. No change			
			Income	Assets	Food Storage	Purchase power of food supply
6.	Restriction imposed on access to land	☐	☐	☐	☐	☐
7.	Inability to repay loans	☐	☐	☐	☐	☐
8.	Bad weather conditions (storm, inundation, drought)	☐	☐	☐	☐	☐
9.	Loss of part or all of salary/ income	☐	☐	☐	☐	☐
10.	Damage to crops (disease, failure, storage damage)	☐	☐	☐	☐	☐
11.	Serious illness that inhibits performance of routine activities	☐	☐	☐	☐	☐
12.	Death of family's main breadwinner (God forbids)	☐	☐	☐	☐	☐
13.	Delay of payment of salary	☐	☐	☐	☐	☐
14.	Loss of some/ all of assistance	☐	☐	☐	☐	☐
15.	Lack of permits	☐	☐	☐	☐	☐
16.	Inability to receive health care because of lack of medicine and equipment	☐				
17.	Inability to pay treatment cost	☐				
18.	Inability to travel abroad for education	☐				
19.	Inability to travel abroad for treatment	☐				
20.	Inability to travel abroad for other reasons (other than education or health)	☐				
C06_2	What are the most significant shocks that your family endured and had major impact on your family's situation (**insert event/action code from previous question C06_1**)	☐☐First	☐☐Second		☐☐Third	

C07	**During the past 30 days**, did your family do the following:	A. Answer 1.Yes. 2. No 8.NA 9. Don't know (2,8,9 move to next item	B. Number of times	C. Is the possibility of future use still exist 1. Yes. 2. No
1	Not pay bills (water, electricity, etc.)	☐	☐☐	☐
2	Sell assets property (radio, furniture, fridge, TV, Jewelry, and other)	☐	☐☐	☐
3	Use family savings	☐	☐☐	☐
4	Sell productive equipment (sewing machine, hand carts, transportation vehicles)	☐	☐☐	☐
5	Reorganize family members to save money (cohabitation, food jointly, etc.)	☐	☐☐	☐
6	Reduce Expenses on education/ health/ clothes etc…	☐	☐☐	☐
7	Plant land/ Raise cattle/ fishing	☐	☐☐	☐
8	Looking for overtime job	☐	☐☐	☐
9	Reduce expenses on fertilizers, animal feed, vaccination	☐	☐☐	☐
10	Sell the remaining animals (females)	☐	☐☐	☐
11	Forced to take children out of school	☐	☐☐	☐
12	Sell house or agriculture land	☐	☐☐	☐

C08	In the past 30 days (make sure you repeat the following phrase in asking all of the questions related to coping strategies) and when the family did not have sufficient food or money to purchase food, how many times have you?	1. Never happened 2. Rarely happens (less than once a week) 3. Every once in a while (one or twice a week) 4. Happens most of the time 5. Always happens (daily)
1	Eaten stored food (As legumes, dairy products, that were stored to be used in winter)	☐
2	Collected wild plants (khobesa, zaatar, etc)	☐
3	Purchased low quality markets "Leftover"	☐
4	Bought or consumed fewer types of food items (less expensive)	☐
5	Reduced portion of food for adults in favor of children's	☐
6	Reduced number of daily meals	☐
7	Purchased food on credit	☐
8	Reduced the portion of meals for all household members	☐
9	Asked for and received assistance from friends and/or relatives	☐
10	Sent women and / or children to work for food	☐

C09	In the past 12 months, did you feel?	A. Answer: 1. Yes 2. No
1	Feeling concerned because of the non-availability of sufficient food due to lack of money/ resources	☐
2	Inability of eating healthy food due to lack of money/ resources	☐
3	Having limited types of food due to lack of money/ resources	☐
4	Having to eat less number of meals due to lack of money/ resources	☐
5	Having to eat less than need due to lack of money/ resources	☐
6	Absence of food in the household due to lack of money/ resources	☐
7	Starving and not eating food due to lack of money/ resources	☐
8	Not eating for a whole day due to lack of money/ resources	☐

Part six: Food Diversity and Facing Food Shortage

E01	Over the past week, how many days has the family consumed the following food products and what was the main source thereof		
	Food Group	**A. Number of days of consumption of this group** (Fill in the number of days regardless of the number of consumption times per day)	**B. Main source** 1. Food assistance via voucher/ coupons 2. Purchased cash 3. Self-produced 4. Barter 5. Gifts 6. In-kind food assistance 7. Purchased on credit 8. Loan from family/ neighbors 9. Other/ Specify………..
.1	Wheat, Frekeh, purghul	☐	☐…………………………………
.2	Rice	☐	☐…………………………………

E01	Over the past week, how many days has the family consumed the following food products and what was the main source thereof		
	Food Group	**A. Number of days of consumption of this group** (Fill in the number of days regardless of the number of consumption times per day)	**B. Main source** 1. Food assistance via voucher/ coupons 2. Purchased cash 3. Self-produced 4. Barter 5. Gifts 6. In-kind food assistance 7. Purchased on credit 8. Loan from family/ neighbors 9. Other/ Specify………..
.3	Bread	☐	☐....................................
.4	Fish	☐	☐....................................
.5	Eggs	☐	☐....................................
.6	Red meat (lamb, beef, veal)	☐	☐....................................
.7	White meat (poultry)	☐	☐....................................
.8	Canned meat/ fish	☐	☐....................................
.9	Milk and dairy products	☐	☐....................................
.10	Olive oil	☐	☐....................................
.11	Vegetable oil	☐	☐....................................
.12	Pickles (olives and other vegetables)	☐	☐....................................
.13	Orange color fruits (Mango, papaya, peach, apricot, etc)	☐	☐....................................
.14	Other types of fruit	☐	☐....................................
.15	Orange color vegetables (carrot, pumpkin etc)	☐	☐....................................
.16	Green leaves (spinach, broccoli, etc)	☐	☐....................................
.17	Other vegetables	☐	☐....................................
.18	Dried beans (lentils, chick beans)	☐	☐....................................
.19	Liver, kidney, heart and other types of meat	☐	☐....................................
.20	Potatoes and other similar vegetables	☐	☐....................................
.21	Dried fruit and fruit paste	☐	☐....................................
.22	Sugar, jam, sweets	☐	☐....................................
.23	Thyme and dukka	☐	☐....................................
.24	Other – drinks, tea, coffee, spices	☐	☐....................................

Part Seven: Income

I01	In your opinion what is the total mount your family needs per month to fulfill its basic life needs (like food, housing, clothes, education, health, etc.)	Respondents shall estimate mounts in NIS *Field worker records (-) in boxes in case an answer is impossible to achieve*	☐☐☐☐☐

I02	**In the past 12 months**, which of the following sources were included as source of household income:	**Answer:** 1. Yes 2. No
	1. Agriculture, animal breeding, fishing	☐
	2. Family business (other than agriculture)	☐
	3. Government wage and salary	☐
	4. Private sector wage and salary	☐
	5. Wages from Israeli labor sectors	☐
	6. Transfers from Palestinian Territory (including pension)	☐
	7. Transfers from abroad	☐

	8. International organizations (assistance)		☐
	9. Social assistance		☐
	10. Salary from international organizations		☐
	11. National insurance (Jerusalem)		☐
	12. Property Income		☐
	13. Other/ specify		☐
I02_1	From the above stated sources, what is the main source of household income (**specify using the code**)		☐☐
I03	**In the past 12 months,** what is the average monthly income of the sources with answer yes in I02		☐☐☐☐☐☐

Part Eight: Agriculture and Livestock

A1	Does the household have (owned, leased or used) agriculture land?	1. Yes 2. No **Move to question number A3**	☐
A2	What is the area of agriculture land (owned, leased or used) the family has in sq. m.	The total area in sq. m. as in 30/10/2016	sq. m. ☐☐☐☐☐
A3	Did the household have livestock during the agriculture year 2015/2016	1. Yes 2. No **Move to question number A5** **NOTE: If answer to A1 and A3 = 2 then move to question number T1**	☐

		Kind	Number	Kind	Number
A4	How many animal heads as on 30/10/2016 (including economic projects)? (register the number, write 0 in the box in case no animals)	1. Milk cows	☐☐☐☐	6. Egg chicken	☐☐☐☐
		2. Fattening calves	☐☐☐☐	7. Beehives	☐☐☐☐
		3. Sheep	☐☐☐☐	8. Camels	☐☐☐☐
		4. Goat	☐☐☐☐	9. Other/ Specify	☐☐☐☐
		5. Carnivorous chicken	☐☐☐☐☐		

		Answer: 1. Yes 2. No 8. N/A					
A5	Did the household own any of the following agricultural equipment as on 30/10/2016?	1. plough	☐	2. manual plough (hack)	☐	3. automatic spray	☐
		4. hoe/ shovel	☐	5. automatic plough	☐	6. tractor	☐
		7. hand spray	☐	8.threshing tool	☐	9.harrow	☐
		10. hatchet	☐	11. fishing hook	☐	12. harvesting machine	☐
		13. mangers	☐	14. Poultry Drinkers	☐	15. Animal trimming tools	☐
		16. Other/ Specify …………					☐

Part Nine: Freedom of Movement

T1	**During the second half 2016** to what extent you can say that restrictions on your mobility caused problems to you and your family?	1. Very much 2. Minor 3. Not at all 9. I don't know				☐
T2	**During the second half 2016**, have you or any of your family members faced difficulties that impeded your access to…	**A. there is difficulty**	**B. Reasons for difficulty: 1. Yes 2. No**			
		1. No difficulty 2. minor difficult 3. Big difficulty 8. NA 9. I do not know (1, 8, 9 move to next line)	1. Restrictions on movement checkpoints / barriers/ crossing zone, buffer zone	2. Cannot afford cost	3. shelling / military operations	4. other reason/ Specify

1.	Work place	☐	☐	☐	☐	☐
2.	Farming land/ harvest	☐	☐	☐	☐	☐
3.	School or university	☐	☐	☐	☐	☐
4.	Health utilities	☐	☐	☐	☐	☐
5.	Inside the barrier wall (Inside WB)					
6.	Outside the barrier wall (Outside WB)					

T3	**How far is you home from the following services and what is the most used means of transportation and duration of travel**				
		1. Distance	2. Means of transport	3. Duration	**Distance**
	1. Public transportation	☐	☐	☐☐☐	1 less than 1km
	2. Nearest private doctor clinic	☐	☐	☐☐☐	2 1- 5 km 3 more than 5 km
	3. Health center (mother and child)	☐	☐	☐☐☐	**Most use transport means**
	4. Nearest public or private hospital	☐	☐	☐☐☐	1. On foot 2. Private car
	5. Pharmacy	☐	☐	☐☐☐	3. Public transportation
	6. Nearest elementary school	☐	☐	☐☐☐	4. Taxi (call) 5. Other/ specify
	7. Nearest secondary school	☐	☐	☐☐☐	
	8. Nearest food purchase center	☐	☐	☐☐☐	
	9. Nearest shopping center	☐	☐	☐☐☐	