**Material and Social Deprivation**

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| --- | --- | --- |
|  |  |  |

### The date of the interview

**Day Month Year**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |

 **Enumeration Area Rotation Household Sequence number of** **interview**

**Interviewer**

**Regional supervisor**

**Logical and arithmetical control**

According to the “Law of Georgia on Official Statistics” 25th Article, point first, with the view of fulfilling its functions the Geostat shall be authorized to request and receive from administrative bodies, physical and legal persons all kinds of statistical data and other information, including confidential information and/or information containing personal data, in line with the “Law on Personal Data Protection".

The information provided by you is confidential and protected by the “Law of Georgia on Official Statistics” 28th Article, point first. It is only used for calculating the general statistical indexes.

Thank you for your cooperation!

**MDH: Household Deprivation**

**MDH1. Can your household afford to:**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Yes | No |
| 1. | Go for a week's annual holiday away from home, including stays in second dwelling or with friends/relatives? | 1 | 2 |
| 2. | Have a meal with meat, chicken, fish (or vegetarian equivalent ) every second day? | 1 | 2 |
| 3. | Face an unexpected but necessary expense of XXXX from your own resources? | 1 | 2 |
| 4. | Keep its home adequately warm? | 1 | 2 |

**MDH2**. **Could you tell me your household replaces furniture (bed, sofa/dresser, cupboard) when warn out or damaged?**

|  |  |
| --- | --- |
| Yes | 1 |
| No, because the household cannot afford it | 2 |
| No, for some other reason (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 3 |

**MDH3**. **Does your household have a car/van for private use?**

|  |  |
| --- | --- |
| Yes | 1 |
| No, because the household cannot afford it | 2 |
| No, for some other reason (Please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | 3 |

**MDH4. In the past 12 month has the household been in arrears:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | Yes, once | Yes, twice or more | No |
| 1. | Unable to pay for rent, mortgage repayment for the main dwelling on time due to financial difficulties? | 1 | 2 | 3 |
| 2. | Unable to pay utility bills (heating, electricity, gas, water, etc.) of the main dwelling on time due to financial difficulties? | 1 | 2 | 3 |
| 3. | On hire purchase instalments or other loan payments, i.e. has been unable to pay these on time due to financial difficulties? | 1 | 2 | 3 |

**MDH5. Do you have any of the following problems with your accommodation?**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Yes | No |
| 1. | Water is leaking from the roof | 1 | 2 |
| 2. | Damp walls, floor or foundation | 1 | 2 |
| 3. | Rotten windows or floors | 1 | 2 |
| 4. | The dwelling is very dark (implies insufficient daylight) | 1 | 2 |
| 5. | The size of the dwelling is not enough for your household | 1 | 2 |

**MDH6. Do you have the following problems in the area where your main dwelling is located? (Circle one answer in a category)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | Very often | Often | Sometimes | Rarely or never |
| 1. | Polluted environment (garbage dumped on the ground) | 1 | 2 | 3 | 4 |
| 2. | Demaged places / objects / equipment created for public comfort (bus stops, sidewalks, street lighting poles, etc.) | 1 | 2 | 3 | 4 |
| 3. | Annoying noise from neighbors or the street (due to traffic, restaurant / bar, factory, etc.) | 1 | 2 | 3 | 4 |
| 4. | Grimed environment (eg smoke, dust, unpleasant odor, polluted water) | 1 | 2 | 3 | 4 |
| 5. | Crimes, violence or vandalism | 1 | 2 | 3 | 4 |

**MDH7. How accessible are the following services for your household (excluding financial availability)? (Circle one answer in a category)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | With great difficulty | With some difficulty | Easily | Very easily | Do not need / Do not use |
| 1. | Public transport | 1 | 2 | 3 | 4 | 5 |
| 2. | Postal or banking services | 1 | 2 | 3 | 4 | 5 |

**MDP: Personal Deprivation**

***For Interviewer:*** *Please ask questions to each household member separately!*

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4.1** | **4.2** | **4.3** | **5** | **6** | **7** | **8** | **9** | **10** | **11** |
|  | **Name and Surname**Copy namesof all membersof the householdfrom Shinda02to below | **Age** | **Please identify, number of Household member** | **Is age 16 years and above?** | **Do you have two pairs of shoes in a good condition that are suitable for daily activities?** | **Could you tell me if you can replace worn-out clothes by some new (not second hand) ones?** | **Do you get together with friends /family (relatives) for a drink/meal at least once a month?** | **Do you regularly participate in a leisure activities (that costs money)?** | **Do you spend a small amount of money most weeks on your own pleasure (buying/doing something for yourself)?** | **Do you have an internet connection for personal use when needed?** |
| Mother | Father*If age <15→Q5* | Partner |  1. Yes 2. No *→ Next Member* | 1. Yes2. No, cannot afford it3. No, other reason | 1. Yes2. No, cannot afford it3. No, other reason | 1. Yes2. No, cannot afford it3. No, other reason |  1. Yes 2. No, cannot afford it 3. No, other reason | 1. Yes2. No, cannot afford it3. No, other reason | 1. Yes2. No, cannot afford it3. No, other reason |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |

**WI: Work Intensity**

***For Interviewer:*** *Please ask questions to each household member separately!*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6.1** | **6.2** | **6.3** | **7.1** | **7.2** | **7.3** | **8.1** | **8.2** | **8.3** |
|  | **Name and Surname**Copy namesof all membersof the householdfrom Shinda02to below | **Age** | **Is age between 18-59 years?** | ***Check:*** *Shinda 05-1, If there is code 1 circled to any of the following questions: Q1, Q2,Q3?* | **Please specify, considering all the jobs (main and additional), the type of your workload according to the working hours by your estimation?** | **Please specify, considering all the jobs (main and additional), total number of hours worked per month?** | **Have you been a student for the past 3 months?** |
| *Apply 1 for “Full time”, or 2 for “Part time”* | *Apply 1 for “Yes”, or 2 for “No”* |
| 1. Yes2. No *→ Next Member* | 1. Yes2. No *→ 8.1* | Last month | Two months ago | Three months ago | Last month | Two months ago | Three months ago | Last month | Two months ago | Three months ago |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |  |  |  |  |  |  |  |