

A. Identification

1. Centre identification

| |
|--|
| 1. Province _____ _ _ (Annex 1 Code) |
| 2. Municipality _____ _ _ _ (Annex 8 Code) |
| 3. Centre code _____ _ _ _ _ |
| 4. Address _____ |
| 5. Type of Service in the centre _____ _ |

Interviewer, before beginning to fill out this questionnaire, we recommend that you read the following introduction to the respondent: "I will now ask you some questions relating to your work, income, health, studies, etc."

Interviewer, ask the two questions from the Work Report in order to ascertain whether that person has been interviewed over previous days and, if so, whether s/he would like to answer sections B, C and E again.

2. Order number of the person to whom the information refers

Order number of the person to whom the information refers

No. _____ |_|_|_|

Nature, characteristics and purpose

The Survey on Homeless Persons (SHP-Persons) is statistical research, designed for the purpose of studying the socio-demographic profile and living conditions of these persons.

Legislation

Statistical Secrecy

The personal information obtained by the **statistical services, both directly from the respondents**, and from administrative sources, will be the object of protection and are covered by statistical secrecy (art. 13.1 of the Law on the Public Statistical Services, dated 9 May 1989, (LFEP). All statistical personnel will be obliged to maintain statistical secrecy (art. 17.1 of the LFEP).)

Obligation of providing data.

Laws 4/1990 and 13/1996 establish the **obligation of providing data** requested for compiling statistics. Statistical services may request data from individuals and legal entities, both national and foreign, resident in Spain (art. 10.1 de la LFEP).

All individuals and legal entities that provide data, **must respond in a true, exact and comprehensive manner within the stipulated deadline** to the questions outlined in due form by the statistical services (art. 10.2 de la LFEP).

In order to monitor compliance with these regulations, the LFEP (art. 48) grants the INE sanctioning capacity.

In exceptional cases, in view of the nature of this research, collaboration will be on a voluntary basis.

B. Basic socio-demographic features

3. SEX

Male _____ 1

Female _____ 6

4. Date of birth

1. Day |_|_|/ 2. Month |_|_|/ 3. Year 19|_|_|

Interviewer, if the date of birth of the respondent is later than 31 December 1993, the survey ends here.

5. What is your nationality?

Spanish _____ 1

Foreign (*Please specify nationality*) _____ 2

Nationality..... |_|_|_| (Annex Code 2)

Both _____ 3

C. Use of services

6. Where do you plan to sleep tonight? (Interviewer, the fields for the name of the centre, address and municipality are only filled out if the respondent **will not be sleeping in the establishment at which s/he is being interviewed**. If s/he does not know where they will be sleeping, enter code 99 and go to question 9).

1. Code of location of accommodation, by type _____ |__|__| (Annex Code 4)

2. Centre name _____

3. Address _____

4. Municipality _____ |__|__| (Annex Code 8)

7. Tell me how often you sleep in said place, from the following options. (Interviewer, the place is deduced from the answer to question 6)

Every night _____ 1

More than twice a week _____ 2

Once or twice a week _____ 3

From time to time _____ 4

DOES NOT KNOW/DOES NOT REMEMBER 9

8. Out of the following cases, how long have you been sleeping there? (Interviewer, the place is deduced from the answer to question 6)

Has not slept there yet _____ 1

Since yesterday _____ 2

For less than a week _____ 3

For more than a week and less than a month _____ 4

For more than a month and less than three months _____ 5

For more than 3 months and less than 1 year _____ 6

For more than 1 year and less than 5 years _____ 7

For more than 5 years _____ 8

DOES NOT KNOW/DOES NOT REMEMBER _____ 9

Interviewer, if question 7 has been answered by choosing option 1, please transfer the code for question 6 to seven days for question 9.

Interviewer, if the answer to question 8 is 4, 5, 6, 7 or 8, please transfer the code from question 6 to seven days for question 9.

9. Where have you slept for the last 7 nights? (Interviewer, the reference period for determining **surveyability** is the week prior to that of the interview, there being a requirement for the person to have slept, at least once, in one of the accommodations with codes 11, 12, 13, 14, 21, 23, 31, 41 and 42). (Day 7 is regarded as yesterday) (If the respondent does not remember a day, enter code 99).

- 1. Day 7 (Code) _____ |__|
- 2. Day 6 (Code) _____ |__|
- 3. Day 5 (Code) _____ |__|
- 4. Day 4 (Code) _____ |__|
- 5. Day 3 (Code) _____ |__|
- 6. Day 2 (Code) _____ |__|
- 7. Day 1 (Code) _____ |__|

- 11. Hostel, residence or shelter.
- 12. Shelters for battered women.
- 13. Centres for refugees and centres for asylum-seekers.
- 14. Immigrant confinement centres.
- 21. Flat provided by a public administration, an NGO or body (including flats paid for by persons in receipt of the minimum integration income).
- 23. Occupied flat.
- 31. Pension paid by a public administration, an NGO or body (including pensions paid for by persons in receipt of the minimum integration income).
- 41. In public areas (train, bus or metro station, car park, public garden, open space, etc.)
- 42. Make-shift accommodation (entrance of a building, cave, car, etc).

Interviewer, if the respondent has not slept at least one night in any of the accommodations shown in the attached chart, this is the end of the survey.

10. Where or what type of food have you made in the last 7 days? (Interviewer, if the respondent does not remember one day, enter code 9)

- | <u>Lunch/Mid-day</u> (Annex Code 5) | <u>Dinner/Evening</u> (Annex Code 5) |
|-------------------------------------|--------------------------------------|
| 1a. Day 7 (Code) _____ __ | 1b. Day 7 (Code) _____ __ |
| 2a. Day 6 (Code) _____ __ | 2b. Day 6 (Code) _____ __ |
| 3a. Day 5 (Code) _____ __ | 3b. Day 5 (Code) _____ __ |
| 4a. Day 4 (Code) _____ __ | 4b. Day 4 (Code) _____ __ |
| 5a. Day 3 (Code) _____ __ | 5b. Day 3 (Code) _____ __ |
| 6a. Day 2 (Code) _____ __ | 6b. Day 2 (Code) _____ __ |
| 7a. Day 1 (Code) _____ __ | 7b. Day 1 (Code) _____ __ |

Interviewer, the answers to questions 11, 12 and 13 are deduced from the seven-day period of the previous question. Where fully filled out and without codes 0 or 9, please go to section D.

11. Have you stopped eating at all over the last 7 days?

Yes _____ 1

No _____ 6 → Go to section D

DOES NOT KNOW/DOES NOT REMEMBER 9

12. What time of day was it?

At mid-day _____ 1

In the evening _____ 2

At mid-day and in the evening 3

DOES NOT KNOW/DOES NOT REMEMBER 9

13. Why did you not eat on said day? (Interviewer, if there were more than one day, it would refer to the last one; the respondent must indicate the main reason)

You did not find anywhere to eat _____ 1

The place where you might have eaten was closed or out of service _____ 2

The place where you might have eaten was far away _____ 3

You did not know about places where you could eat _____ 4

The food was not good _____ 5

You did not have enough money to pay for food _____ 6

You had already eaten that day _____ 7

You weren't hungry _____ 8

Another reason (Please specify) 0

DOES NOT KNOW/DOES NOT REMEMBER _____ 9

D. Living conditions

Interviewer, please consult question 9. D1 is to be completed if the code for the answer given on day 7, or otherwise on the closest day to it, was 11, 12, 13 or 14. D2 is to be completed if it was 21, 23 or 31. D3 is to be completed if it was 41 or 42.

D1. Persons who slept in collective accommodation last night

14. How many persons slept in your bedroom last night?

One _____ 1

Two _____ 2

Three or four _____ 3

More than four _____ 4

15. In said bedroom, did you sleep...

in a bunk? _____ 1

alone in a bed? _____ 2

on a mattress on the floor? _____ 3

directly on the floor? _____ 4

in a hammock? _____ 5

sharing a bed or mattress? _____ 6

in another way? (Please specify) _____ 7

16. Do you have to pay to sleep at that centre?

Yes _____ 1

No, it is free _____ 2

No, but one must perform work or duties in return _____ 3

DOES NOT KNOW/DOES NOT REMEMBER _____ 9

17. Can you eat at that centre?

Yes _____ 1

No _____ 6 → Go to question 19

DOES NOT KNOW/DOES NOT REMEMBER _____ 9

18. Do you have to pay to eat at that centre?

Yes _____ 1

No, it is free _____ 2

No, but one must perform work or duties in return _____ 3

DOES NOT KNOW/DOES NOT REMEMBER _____ 9

19. Is it compulsory to leave the centre in the mornings?

Yes _____ 1

No _____ 6

DOES NOT KNOW/DOES NOT REMEMBER _____ 9

20. Is there somewhere you can receive mail?

Yes _____ 1

No _____ 6 → Go to question 22

DOES NOT KNOW/DOES NOT REMEMBER 9

21. Where do you usually receive it?

At this centre _____ 1

At a friend's house _____ 2

Where you normally sleep or stay _____ 3

At a relative's house _____ 4

At a PO box _____ 5

Somewhere else (*Please specify*) 6

22. Is there somewhere you can receive telephone calls or messages?

Yes _____ 1

No _____ 6 → Go to question 24

DOES NOT KNOW/DOES NOT REMEMBER 9

23. Where do you usually receive them?

At this centre _____ 1

At a friend's house _____ 2

Where you normally sleep or stay _____ 3

At a relative's house _____ 4

On her/his mobile phone _____ 5

On another person's mobile phone _____ 6

Somewhere else (*Please specify*) 7

24. Do you have Internet access and/or email?

Yes _____ 1

No _____ 6 → Go to question 26

DOES NOT KNOW/DOES NOT REMEMBER 9

25. Where?

At this centre _____ 1

At a friend's house _____ 2

Where you normally sleep or stay _____ 3

At a relative's house _____ 4

On her/his mobile phone _____ 5

On another person's mobile phone _____ 6

Somewhere else (*Please specify*) 7

26. Do you have the possibility of participating or making suggestions at the centre in which you are staying?

Yes _____ 1

No _____ 6 → Go to section E
DOES NOT KNOW/DOES NOT REMEMBER 9

27. How is it done?

Through an Assembly _____ 1
Through a Suggestions box _____ 6
Through the Users' committee _____ 9
→ Go to section E

D2. Persons who slept at a flat or in a guesthouse room last night.

Interviewer, check question 9, if the answer given on day 7 or, alternatively, the nearest day to it, is code 21 or 23, go to question 28. If it is code 31, go to question 31.

28. Do you have to pay to sleep at that flat?

No, it is free _____ 1 → Go to question 32
No, but one must perform work or duties in return _____ 2 → Go to question 32
Yes, one must pay a small amount _____ 3
No, it is borrowed from a relative _____ 4 → Go to question 32
No, it is borrowed from friends or acquaintances _____ 5 → Go to question 32
No, it is an unoccupied dwelling _____ 6 → Go to question 30
Other (*Please specify*.....) 7 → Go to question 32

29. Who do you pay for sleeping at that flat?

A body or an NGO _____ 1
The person you works for _____ 2
A person who lives in the flat _____ 3
A person who does not live in the flat _____ 4
Other (*Please specify*.....) 5
→ Go to question 32

30. Does the owner want you to leave?

Yes, but nothing has been done for you to leave _____ 1
Yes, the owner has taken legal measures _____ 2
Yes, the owner has taken police measures _____ 3
Yes, the owner has threatened with pressure and reprisals _____ 4
No _____ 5
DOES NOT KNOW/DOES NOT REMEMBER _____ 9
→ Go to question 32

31. Do you have to pay to sleep at that guesthouse?

No, it is provided by a public administration, an NGO or another body 1
No, but one must perform work or duties in return _____ 2
Yes, one must pay a small amount _____ 3
No, it is provided by a relative _____ 4

No, it is provided by friends or acquaintances _____ 5

Other (*Please specify.....*) 6

32. Please tell me whether the flat or guesthouse has:

| | Yes | No | Does not know/Does not answer |
|------------------|----------------------------|----------------------------|-------------------------------|
| 1. Natural light | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 2. Hot water | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 3. Shower | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 4. Toilet | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 5. Heating | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 6. Kitchen | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 7. Refrigerator | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 8. Television | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 9. Landline | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 10. Internet | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |

→ Go to section E

D3. Persons who last night slept in places not intended to be inhabited

33. Is there anywhere you can leave your belongings?

Yes 1

No 6 → Go to question 35

DOES NOT KNOW/DOES NOT REMEMBER 9

34. Out of the places I am going to mention, where do you usually leave them?

Nowhere 1

Where you sleep 2

At a centre of a public administration, an NGO or a body 3

At a relative's house 4

At a friend or acquaintance's house 5

Other (Please specify) 6

35. Is there somewhere you can receive mail?

Yes 1

No 6 → Go to question 37

DOES NOT KNOW/DOES NOT REMEMBER 9

36. Where do you usually receive it?

At a centre of a public administration, an NGO or a body 1

At a friend's house 2

Where you normally sleep or stay 3

At a relative's house 4

At a PO box 5

Other (Please specify) 6

37. Is there somewhere you can receive telephone calls or messages?

Yes _____ 1
 No _____ 6 → Go to question 39
 DOES NOT KNOW/DOES NOT REMEMBER _____ 9

38. Where do you usually receive them?

At a centre of a public administration, an NGO or a body _____ 1
 At a friend's house _____ 2
 Where you normally sleep or stay _____ 3
 At a relative's house _____ 4
 On your mobile phone _____ 5
 On another person's mobile phone _____ 6
 Other (*Please specify*) 7

39. Do you have Internet access and/or email?

Yes _____ 1
 No _____ 6 → Go to question 41
 DOES NOT KNOW/DOES NOT REMEMBER _____ 9

40. Where?

At a centre of a public administration, an NGO or a body _____ 1
 At a friend's house _____ 2
 Where you normally sleep or stay _____ 3
 At a relative's house _____ 4
 On your mobile phone _____ 5
 On another person's mobile phone _____ 6
 Other (*Please specify*) 7

41. Near where you slept last night...

| | 1. is there... | 2. May you use it? | 3. Is it free? |
|--------------------|---|---|---|
| 1. a toilet? _____ | Yes _____ <input type="checkbox"/> 1 No _____ <input type="checkbox"/> 6 END DOES NOT KNOW _____ <input type="checkbox"/> 9 END | Yes _____ <input type="checkbox"/> 1 NO _____ <input type="checkbox"/> 6 END | Yes _____ <input type="checkbox"/> 1 No _____ <input type="checkbox"/> 6 |
| 2. a shower? _____ | Yes _____ <input type="checkbox"/> 1 No _____ <input type="checkbox"/> 6 END DOES NOT KNOW _____ <input type="checkbox"/> 9 END | Yes _____ <input type="checkbox"/> 1 NO _____ <input type="checkbox"/> 6 END | Yes _____ <input type="checkbox"/> 1 No _____ <input type="checkbox"/> 6 |

42. Please tell me where you normally wash up and do your bodily functions

| | Yes | No | Does not know/Does not answer |
|--|----------------------------|----------------------------|-------------------------------|
| 1. In the street _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 2. In parks and open spaces _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 3. In public bathrooms _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 4. In bar and restaurant bathrooms _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 5. In the centre where they eat _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 6. At a friend or relative's house _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 7. Other (<i>Please specify</i>) | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |

43. Why did you not go to a centre in which you could sleep last night? (Interviewer, if necessary remind the informant what was answered in question 9)

- You did not want to sleep in the centres _____ 1
- You did not know the centres existed _____ 2
- You have not been able to go to the centre where he/she wanted to sleep 3
- This type of centre does not exist in this municipality _____ 4 → Go to section E
- You have not been able to stay at the centre where you stayed the night before last 5
- Other causes (*Please specify*) 6

44. Why do you not want to go to a shelter or hostel?

- You do not trust those who are usually there _____ 1
- It is too noisy _____ 2
- The other residents bother you _____ 3
- You cannot go with animals _____ 4
- You do not like how they are run 5
- Another reason (*Please specify*) 6

E. Other socio-demographic features

45. Where were you born?

In Spain (*Please specify municipality and province*) _____ 1

Municipality|_|_|_| (Annex Code 8)

Province |_|_|_| (Annex Code 1)

In another country (*Please specify the country*) _____ 2

Country..... |_|_|_|_| (Annex Code 2))

46. Since when have you lived in Spain?

1. Year _____ |_|_|_|_|

2. Month _____ |_|_|

47. Since when have you lived in this Autonomous Community?

1. Year _____ |_|_|_|_|

2. Month _____ |_|_|

Interviewer: *If the year/month appearing in question 47 is subsequent to that appearing in question 46, go to question 48. Otherwise, go to question 49.*

48. What Autonomous Community do you come from?

Please specify |_|_|_| (Annex 3 Code)

49. Where did you live one year ago?

In this municipality _____ 1

In another municipality (*Please specify the municipality and province*) _____ 2

Municipality..... |_|_|_|_| (Annex 8 Code)

Province..... |_|_|_| (Annex 1 Code)

In another country (*Please specify the country*) _____ 3

Country..... |_|_|_|_| (Annex Code 2)

50. Are you registered?

Yes _____ 1

No _____ 6

51. What is your mother tongue?

Castilian _____ 1

Other (*Please specify the mother tongue*) _____ 2

Mother tongue..... |_|_|_|_| (Annex 9 Code)

52. Do you speak any languages other than your mother tongue?

Yes _____ 1

No _____ 6 → Go to question 54

53. Which ones?

Castilian 1

Others (*Please specify a maximum of three*) 2

Language 1..... |_|_|_| (Annex 9 Code)

Language 2..... |_|_|_| (Annex 9 Code)

Language 3..... |_|_|_| (Annex 9 Code)

54. Where was your father born?

In Spain 1

In another country (*Please specify the country*) 2

Country..... |_|_|_| (Annex 2 Code)

DOES NOT KNOW/DOES NOT REMEMBER 9

55. Where was your mother born?

In Spain 1

In another country (*Please specify the country*) 2

Country..... |_|_|_| (Annex 2 Code)

DOES NOT KNOW/DOES NOT REMEMBER 9

F. Accommodation: background and search

56. Why were you forced to leave the accommodation you had before becoming homeless?

| | Yes | No |
|--|----------------------------|----------------------------|
| 1. Due to separation from your partner _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> |
| 2. Due to you or your children suffering violence _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Because the building where you lived collapsed, was demolished or burned down _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 4. Because you were evicted from the dwelling _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 5. The rental contract ended _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 6. Because you lost your job _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 7. Due to hospitalisation _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 8. Due to being deprived of liberty _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 9. Because of changing location _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 10. They or their partner could not continue to pay for the accommodation _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 11. Due to other reasons (<i>Please specify</i>) | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 12. DOES NOT KNOW/DOES NOT RESPOND _____ | <input type="checkbox"/> 1 | |

57. How long have you been living without accommodation that you can consider your own?

Less than one month _____ 1

1 to 6 months _____ 2

6 to 12 months _____ 3

Between 1 and 3 years _____ 4

More than 3 years _____ 5

DOES NOT KNOW/DOES NOT REMEMBER 9

58. In the last six months, have you done anything to seek or obtain your own accommodation?

Yes _____ 1

No _____ 6 → Go to question 61

DOES NOT KNOW/DOES NOT REMEMBER 9

59. Have you done this with help from someone?

No, along _____ 1

Yes, with the help of a relative or friend _____ 2

Yes, with the help of a social worker _____ 3

Yes, with other help (*Please specify*) 4

60. What medium have you used to do this? (Interviewer, a maximum of two answers is allowed).

- Through the municipal council _____ 1
- Through a social services body _____ 2
- Through an NGO _____ 3 → Go to section G
- Through an advertisement in the press or a real estate agency _____ 4
- Through relatives or friends _____ 5
- Through a religious community _____ 6
- Other (Please specify) 7

61. Why have you not done anything to seek accommodation?

- The person does not have enough money _____ 1
- The person does not want to search for it _____ 2
- The person does not know how to do it _____ 3
- The person believes that s/he cannot find it _____ 4
- Due to health reasons _____ 5
- Due to serving a sentence _____ 6
- Other (Please specify) 7

G. Economic activity, employment and unemployment

62. Over the course of your life, have you, at some point, had a job lasting more than six months?

Yes _____ 1

No _____ 6

DOES NOT KNOW/DOES NOT REMEMBER 9

63. With regard to work, what was your situation last week?

With a job:

Part-time _____ 1

Full-time _____ 2

Unemployed person _____ 3 → Go to question 68

Retired person _____ 4

With a disability _____ 5

Refugee _____ 6 → Go to section H

Other (*Please specify*) 7

64. What has your occupation been during the last week? (*Interviewer, please state the job that the interviewee considers as his/her main job*)

Occupation literal _____ Occupation code I__I (Annex 6)

65. Professional status: Whom have you worked for during the last week?

Self-employed _____ 1

For one or more individuals who paid you _____ 2

For a company _____ 3

For a public administration _____ 4

For an NGO _____ 5

For another employer (*Please specify*) 6

DOES NOT KNOW/DOES NOT RESPOND _____ 9

66. How long have you been working in said occupation? (*Interviewer, where this is more than three months, please disregard days, and where this is more than 2 years, please disregard months*)

1. Years _____ |__|

2. Months _____ |__|

3. Days _____ |__|

67. How did you find your job? (*Interviewer, a maximum of two answers is allowed*)

Through family, friends or acquaintances _____ 1

Through a company _____ 2

Through an advertisement in a newspaper, on a noticeboard, on a lamppost, at a bus stop, etc. 3

Through public employment services _____ 4 → Go to section H

Through social services or an NGO _____ 5

Attending street recruitment centres _____ 6

By setting up as a freelancer _____ 7

By other means (*Please specify*) 8

68. Have you worked before?

Yes _____ 1

No _____ 6 → Go to question 71

69. What was your last occupation? (At a 1-digit level of the National Classification of Occupations)

Occupation literal _____ Occupation code I__I (Annex 6)

70. Why did you lose your last job?

The contract ended _____ 1

Due to employment regulation or closure of the company _____ 2

Due to being made redundant _____ 3

The person quit the job due to health reasons _____ 4

The person quit the job due to having to care for family _____ 5

The person quit the job for other reasons _____ 6

Another reason (Please specify) 7

71. Have you done anything to seek work in the last week?

Yes _____ 1

No _____ 6 → Go to question 74

72. In the last week, what or whom have you used in order to get a job?

| | Yes | No |
|---|----------------------------|----------------------------|
| 1. Through family, friends or acquaintances _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 2. Through a company _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 3. Through an advertisement, a newspaper, on a noticeboard, at a bus stop _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 4. through public employment services _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 5. Through social services or an NGO _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 6. Attending street recruitment centres _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 7. Trying to find it on their own _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 8. By other means (Please specify) | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |

73. How long have you been looking for work?

For less than 6 months _____ 1

For 6 to 12 months _____ 2

For 1 to 3 years _____ 3 → Go to section H

For more than 3 years _____ 4

DOES NOT KNOW/DOES NOT REMEMBER 9

74. For which of the following reasons are you not seeking work? (*Interviewer, a maximum of two answers is allowed*).

For health reasons _____ 1

Because you believe that, at your age, it would be difficult to find work 2

Due to having to care for family _____ 3

Due to a lack of training _____ 4

Due to not believing that there are job vacancies for you _____ 5

Because you do not have papers (you are not authorised to work) ___ 6

Because you are passing through _____ 7

Because you are undertaking a course _____ 8

Because you do not want to work _____ 0

Another reason (*Please specify*) 9

H. Economic situation

75. In the last month, have you received money...

| | Yes | No |
|-----------------------------------|----------------------------|----------------------------|
| 1. for your work? _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 2. for the sale of objects? _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 3. for providing services? _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |

76. In the last month, have you received any of the following benefits?

| | Yes | No |
|--|----------------------------|----------------------------|
| 4. Minimum Integration Income (MII) _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 5. Unemployment benefit _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 6. Disability pension _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 7. Retirement pension _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 8. Widowhood pension _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 9. Non-contributory pension _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 10. Another benefit (<i>Please specify</i>) | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |

77. In the last month, have you received money from...

| | Yes | No |
|---|----------------------------|----------------------------|
| 11. a relative? _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 12. a friend or acquaintance? _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 13. people on the street? _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 14. an NGO? _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 15. another? (<i>Please specify</i>) | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |

Interviewer, in order to formulate the following question, see questions 75, 76 and 77, and replace the dots with answers to said questions. Please take note below of the code, according to the interviewee's response.

78. You have told me that, in the last month, you have received money from... which has entailed the largest amount of money?

_____ | | |

79. In the last month, if you pool all or your income, what have you received in total, more or less? (*Interviewer, it necessary, round without cents*).

| | | | | Euros

80. Out of the responses that I am going to list for you, where do you usually spend most of the money? It is compulsory to choose two responses.

- Food _____ 1
- Beverages _____ 2
- Accommodation _____ 3
- Clothing _____ 4
- Transport, travel _____ 5
- Entertainment _____ 6
- Delivery or sending things home _____ 7
- Medication _____ 8
- Other (*Please specify*) 9

81. Do you currently have debts?

- Yes _____ 1
- No _____ 6 → Go to question 83
- ~~DOES NOT KNOW/DOES NOT REMEMBER~~ 9

82. Whom do you have debts with? (Interviewer, a maximum of two answers is allowed).

- With a bank or savings bank _____ 1
- With the administration (Treasury, etc.) _____ 2
- With a shop, supermarket, etc. _____ 3
- With an individual (owner of the flat, etc.) _____ 4
- With a friend _____ 5
- With a relative _____ 6

83. In the last year, have you had to ask for a loan?

- Yes _____ 1
- No _____ 6 → Go to section I
- ~~DOES NOT KNOW/DOES NOT REMEMBER~~ 9

84. Whom have you asked? (Interviewer, a maximum of two answers is allowed).

- A bank or savings bank _____ 1
- An NGO _____ 2
- The family _____ 3
- Friends _____ 4
- Others (*Please specify*) 5

I. Education

85. What is the highest educational level you have completed?

Study literal _____ Educational level code I__I (Annex 7)

Interviewer, if the person does not have studies, but can read and write, s/he will be encoded as B. Primary education, and if s/he does not have studies, and cannot even read or write, s/he will be encoded as Z. Illiterate persons.

86. At what age did you finish your studies or leave school?

Age _____ I__I__I

87. Do you have difficulty reading, writing or doing calculations in everyday life? (Note whether the question is "if the person has difficulty" due to any circumstance, and not "if the person knows").

| | Yes | No |
|-----------------------|----------------------------|----------------------------|
| 1. Reading | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 2. Writing | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| 3. Doing calculations | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |

88. During the last year, have you followed any educational or training course? This considers all types of courses, whether regulated or unregulated, so long as they last a minimum of 10 classroom hours)

Yes (Please specify) 1

No _____ 6

J. Health

89. How is your current state of health? (Interviewer, it is important for the interviewer not to make any suggestion. Minor illnesses, such as a common cold, will not be borne in mind).

Very good _____ 1

Good _____ 2

Fair _____ 3

Poor _____ 4

Very poor _____ 5

90. Do you customarily have difficulty sleeping? (Customarily is understood to be outside of temporary situations).

Yes _____ 1

No _____ 6

DOES NOT KNOW/DOES NOT RESPOND 9

91. How many hours do you usually sleep daily? (Interviewer, the goal is to ascertain the total number of hours that the person sleeps each day, and not only at night).

Hours |_|_|

92. Do you have a health card? (The health card with which a person may see a doctor, or a National Health System hospital)

Yes _____ 1

No _____ 6

DOES NOT KNOW/DOES NOT RESPOND 9

93. Has a doctor told you that you have some serious or chronic illness?

Yes _____ 1

No _____ 6 → Go to question 95

DOES NOT KNOW/DOES NOT RESPOND 9

94. What type is it? (Interviewer, a maximum of two answers is allowed)

Diseases of the circulatory tract _____ 1

Diseases of the respiratory tract and the digestive tract _____ 2

Endocrine/metabolic diseases, and diseases of the sensory organs _____ 3

Diseases of the osteo-articular tract _____ 4

Mental disorders _____ 5

Other illnesses _____ 9

95. Have you been to the doctor (without having been hospitalised) in the last month? (Interviewer, this must only bear in mind whether the person has visited a doctor's office due to their own needs, and not due to those of other family members, or accompanying others)

Yes _____ 1

No _____ 6

DOES NOT KNOW/DOES NOT RESPOND 9

96. Over the course of the last year, have you spent at least one night in a hospital? (*Interviewer, the goal is to ascertain whether, in the last year, the person has spent at least one night in a hospital, either to run tests, have surgery, or due to an urgent problem while being diagnosed*).

Yes _____ 1

No _____ 6

DOES NOT KNOW/DOES NOT REMEMBER 9

97. In the last week, have you taken medications to sleep or because you were nervous?

Yes _____ 1

No _____ 6

DOES NOT KNOW/DOES NOT RESPOND 9

98. Do you have any recognised disabilities?

Yes _____ 1

No _____ 6 → Go to question 101

99. To what extent (percentage)?

_____%

100. What type? (*Interviewer, this admits as many responses as are pertinent*)

Physical _____ 1

Sensory _____ 2

Intellectual _____ 3

Psychological _____ 4

101. Do you currently smoke?

Yes, I smoke daily _____ 1

Yes, I smoke, but not daily _____ 2

I do not currently smoke, but I have smoked in the past _ 3

I do not smoke, nor have I ever smoked regularly _____ 4

102. Regarding the consumption of beverages with alcohol, could you please tell me how frequently, and what type of alcoholic beverages you drink regularly?

| | 1. Low Alcohol Content* | 2. High Alcohol Content** |
|-------------------------------|--------------------------------|----------------------------------|
| Daily _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 |
| 4 to 6 days a week _____ | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 |
| 2 to 3 days a week _____ | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 |
| 1 day a week _____ | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| 1 day every 2 weeks _____ | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| 1 day a month _____ | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |
| Less than 1 day a month _____ | <input type="checkbox"/> 7 | <input type="checkbox"/> 7 |
| Less than once a year _____ | <input type="checkbox"/> 8 | <input type="checkbox"/> 8 |

***Beverages with a low alcohol content:** wine, beer, sparkling wine, sherry, cider and combinations thereof.

** **Beverages with a high alcohol content:** anise, brandy, gin, whisky, rum, etc., and mixed drinks using them.

103. With the frequency that you have just stated, how many glasses or drinks do you drink?
(Interviewer, we wish to know the number of glasses or drinks (of both types of beverage) that the respondent drinks in the periods indicated in the previous question).

1. Number of glasses or drinks of beverages with a low alcohol content |__|__|
2. Number of glasses or drinks of beverages with a high alcohol content |__|__|

104. Do you personally know anyone who uses drugs?

- Yes _____ 1
 No _____ 6
 DOES NOT KNOW/DOES NOT RESPOND 9

105. Have you ever used drugs?

- Yes _____ 1
 No _____ 6 →Go to question 107
 DOES NOT KNOW/DOES NOT RESPOND 9

106. In the last month, have you used any of the following drugs?

| | Yes | No | Does not |
|--|----------------------------|----------------------------|----------------------------|
| <u>know/Does not respond</u> | | | |
| 1. Marijuana or hashish joint _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 2. Cocaine _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 3. Heroine (powder) _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 4. Others (<i>Please specify</i>) | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |

107. Some persons have the habit of playing the lottery, betting games, ONCE coupon or slot machines. Do you usually spend money on this type of gambling?

- Yes _____ 1
 No _____ 6
 DOES NOT KNOW/DOES NOT RESPOND 9

K. Family: family ties and background

108. What is your current situation? *(Interviewer, the corresponding option will be ticked, bearing in mind the actual situation of the individual)*

Single _____ 1 → Go to question 110

Married _____ 2

De facto couple _____ 3

Widowed _____ 4 → Go to question 110

Legally separated _____ 5 → Go to question 110

De facto separated _____ 6 → Go to question 110

Divorced _____ 7 → Go to question 110

109. Do you currently live with your partner?

Yes _____ 1

No _____ 6

110. Do you have children? *(Interviewer, this refers to any type of children (legitimate, adopted, etc.) and in any type of situation (single, from a previous partner, etc.))*

Yes _____ 1

No _____ 6 → Go to question 113

111. How many? *(Interviewer, note down the total number of children, even if they are from different mothers or fathers)*

|_|_|

112. Do you currently live with any of your children? *(Interviewer, not down "Yes", both if the respondent considers that the children living with her/him are hers/his, and if the respondent considers her/himself to live with them)*

Yes _____ 1

No _____ 6

113. At this point in time, do you have any friends that you are sure you can count on in case of trouble or need?

Yes _____ 1

No _____ 6

DOES NOT KNOW/DOES NOT RESPOND 9

114. In your situation, have you had any contact, even by telephone or by letter, with a member of your family who does not live with you? (Interviewer, in the event that the respondent has no relatives, the three options will be left blank). (Interviewer, please complete as many response options as the interviewee answers affirmatively). (In the case of answering **In the last month**, do not ask about the last year; if it is **In the last year**, do not ask **No contact**)

| | 1. In the last month | 2. In the last year | 3. No contact |
|----------------------------|-----------------------------|----------------------------|--------------------------|
| 1. Spouse or partner _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Father _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Mother _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Children _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Siblings _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Other relatives _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Interviewer, if the informant has doubts about the following question, clarify that this refers to **her/his family** in the biological sense.

115. Until you turned 18 years old, did you live most of the time...

- with your family (parents, siblings)? _____ 1
- with your mother? _____ 2
- with your father? _____ 3
- with your grandparents? _____ 4
- with other relatives? _____ 5
- with other non-family members? _____ 6
- in a foster institution? _____ 7

116. Prior to turning 18 years old, did any of the following situations occur in your family?

| | Yes | No | Does not know/Does not respond |
|---|----------------------------|----------------------------|---------------------------------------|
| 1. Lack of money _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 2. Prolonged unemployment of a family member _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 3. Death of a family member _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 4. Illness, disability or serious accident of the parents _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 5. Parents divorced, one parent left home _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 6. Serious fights and conflicts between the parents _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 7. Problems with violence in the family _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 8. Alcohol problems in the family or themselves _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 9. A parent was in prison _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 10. Serious conflicts between you and someone in the family _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 11. The family was evicted from the dwelling _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 12. Frequent changes in the place of residence _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 13. Other (Please specify:) | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |

L. Use of social services

117. In the last year, have you had any contact with a social worker?

Yes _____ 1

No _____ 6 → Go to question 119

118. How did you establish contact? (Interviewer, if the person answered with several forms, consider only the main means)

By your own initiative _____ 1

On the street _____ 2

Through social services _____ 3

Through an NGO _____ 4

Through a relative _____ 5

Through a friend or acquaintance _____ 6

Through a legal decision _____ 7

By other means (Please specify) 8

119. In the last year, which of the services or benefits mentioned below have you requested, and which have been granted to you?

1. Requested 2. Granted

1. Accommodation _____ Yes 1 No 6 Yes 1 No 6
 6

2. Care at a day centre _____ Yes 1 No 6 Yes 1 No 6

3. Care at a rehabilitation centre _____ Yes 1 No 6 Yes 1 No 6

4. Information/guidance/shelter _____ Yes 1 No 6 Yes 1 No 6

5. Food/Dining room _____ Yes 1 No 6 Yes 1 No 6

6. Hygiene/Clothing service _____ Yes 1 No 6 Yes 1 No 6

7. Specialised social care _____ Yes 1 No 6 Yes 1 No 6

8. Financial assistance _____ Yes 1 No 6 Yes 1 No 6

9. Other (Please specify) _____ Yes 1 No 6 Yes 1 No 6

120. Please tell me, in your opinion, if social services have helped you...

Not at all _____ 1

Little _____ 2

Enough _____ 3

Quite a lot _____ 4

121. In the last year, have you received the Minimum Integration Income?

Yes _____ 1

No _____ 6 → Go to question 124

122. Are you still receiving it?

Yes _____ 1 Go to section M

No _____ 6

123. Why are you not receiving it anymore? (Interviewer, a maximum of two answers is allowed)

- Your income is greater than that established to receive it _____ 1
- Your family situation has changed _____ 2
- You do not meet the minimum time to constitute a family or cohabitation unit _____ 3
- You have changed your place of residence _____ 4
- You receive another subsidy _____ 5
- You have work _____ 6
- Other (*Please specify*) 7
- DOES NOT KNOW/DOES NOT REMEMBER _____ 9

→ Go to
section M

124. Have you tried to obtain the Minimum Integration Income?

- Yes _____ 1 → Go to section M
- No _____ 6

125. Why have you not tried to do so?

- You were unaware of its existence _____ 1
- You were not interested in the benefit _____ 2
- You believe that you do not meet the requirements _____ 3
- Other (*Please specify*) 4

M. Equality, non-discrimination and relationship with justice

126. Since you have become homeless, have you felt discriminated due to this condition? (You have not been allowed to do something, you have been bothered, or you have been made to feel inferior)

- Never _____ 1
 Sometimes _____ 2
 Many times _____ 3
 Constantly _____ 4

127. Since you have become homeless, have you been a victim of a crime or assault?

| | Yes | No | Does not know/Does not respond |
|---|----------------------------|----------------------------|--------------------------------|
| 1. You have been assaulted _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 2. You have had money, belongings, documents (passport, ID) stolen... | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 3. You have suffered some sort of sexual assault _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 4. You have been swindled _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 5. You have been insulted or threatened _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |
| 6. Other (<i>Please specify</i>) | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 | <input type="checkbox"/> 9 |

(If the person answers No to all of the options, go to question 130)

128. Did you press charges for these facts?

- Yes _____ 1 → Go to question 130
 No _____ 6

129. Why did you not press charges?

- You did not know how to do so 1
 It serves no purpose _____ 2
 Due to your legal situation _____ 3
 Due to fear of reprisals _____ 4
 For another reason _____ 5

130. Has someone pressed charges against you?

- Yes, once _____ 1
 Yes, several times _____ 2
 No _____ 3
 DOES NOT KNOW/DOES NOT RESPOND 4

131. Have you been arrested?

- Yes, once _____ 1
 Yes, several times _____ 2
 No _____ 3
 DOES NOT KNOW/DOES NOT RESPOND 4

If the respondent has answered No to questions 130 and 131, please end the survey.

Interviewer, if the respondent has been arrested, or charges have been pressed against her/him on more than one occasion, the following question will refer to the case that was the most important for the interviewee.

132. What type of legal assistance did you have?

- Social services attorney _____ 1
- Attorney provided by an NGO _____ 2
- Attorney hired personally _____ 3
- Court-appointed attorney _____ 4
- You had no legal assistance _____ 5
- YOU DO NOT REMEMBER _____ 9

133. Have you ever been convicted?

- Yes, by a juvenile court _____ 1
- Yes, by other courts _____ 2
- Yes, by both types of courts _____ 3
- No _____ 4 → End of the survey

134. Have you ever been in a juvenile detention centre?

- Yes, once _____ 1
- Yes, more than once _____ 2
- No _____ 3

135. Have you been in prison?

- Yes, serving a sentence _____ 1
- Yes, awaiting sentencing _____ 2
- No _____ 3

136. Have you ever served a sentence other than a prison sentence?

- Yes _____ 1
- No _____ 6

Interviewer, if the respondent has answered No to questions 135 and 136, please end the survey.

137. Have you ever been in any of the following centres, serving a sentence?

| | 1. In-house | | 2. Mobile | |
|------------------------------------|--------------------------------|-------------------------------|--------------------------------|-------------------------------|
| 1. Detox or withdrawal _____ | Yes <input type="checkbox"/> 1 | No <input type="checkbox"/> 6 | Yes <input type="checkbox"/> 1 | No <input type="checkbox"/> 6 |
| 2. Psychiatric _____ | Yes <input type="checkbox"/> 1 | No <input type="checkbox"/> 6 | Yes <input type="checkbox"/> 1 | No <input type="checkbox"/> 6 |
| 3. Special education _____ | Yes <input type="checkbox"/> 1 | No <input type="checkbox"/> 6 | Yes <input type="checkbox"/> 1 | No <input type="checkbox"/> 6 |
| 4. DOES NOT KNOW/DOES NOT REMEMBER | Yes <input type="checkbox"/> 1 | | Yes <input type="checkbox"/> 1 | |

Interviewer, view questions 135 and 137, and replace the dots in the following question with the pertinent option, according to the respondent's answer to said questions.

138. When you left the, you received support from.....

| | Yes | No |
|---------------------------------|----------------------------|----------------------------|
| Family and/or friends _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| Social services _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| An NGO _____ | <input type="checkbox"/> 1 | <input type="checkbox"/> 6 |
| DOES NOT KNOW/DOES NOT REMEMBER | <input type="checkbox"/> 1 | |

N. Final questions reserved for the interviewer

Interviewer, please thank the respondent for her/his collaboration, and then fill in the following questions.

Please ensure that the questions necessary to consider this questionnaire complete have been answered. They are the following: identification on the cover (questions 1 and 2), 3, 4, 5, 9 and 10. For route **D1**: 14, 15 and 16. For route **D2**: 28, 31 and 32. For route **D3**: 33, 41 and 43. And from section E, question 46. If any have not been answered, given their importance, please try to get the respondent to answer them.

139. Time used in completing this questionnaire (in minutes)

|_|_|_| minutes

140. Date of completion of this questionnaire:

1. Day |_|_| / 2. Month |_|_| / 3. Year 2012

141. Interviewer code

Remarks:

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