DEVELOPING A HOUSEHOLD SURVEY INSTRUMENT ON SOCIAL PROTECTION

MICS **unicef**

Data and Analytics Section
Division of Data, Research and Policy

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About MICS

The Multiple Indicator Cluster Surveys, MICS, is one of the largest global sources of statistically sound and internationally comparable data on children and women. MICS data are gathered during face-to-face interviews in representative samples of households. The surveys are typically carried out by government organizations, with technical support from UNICEF.

Since the mid-1990s, MICS has supported more than 100 countries to produce data on a range of indicators in areas such as health, education, child protection and HIV/AIDS. MICS data can be disaggregated by numerous geographic, social and demographic characteristics.

As of 2018, five rounds of surveys have been conducted: MICS1 (1995-1999), MICS2 (1999-2004), MICS3 (2004–2009), MICS4 (2009–2012) and MICS5 (2012-2015). The sixth round of MICS (MICS6) is scheduled to take place in 2016–2019. Survey results, tools, reports, micro-data and information on the MICS programme are available at <*mics.unicef.org*>.

About the MICS Methodological Papers

MICS Methodological Papers are intended to facilitate exchange of knowledge and to stimulate discussion on the methodological issues related to the collection, analysis, and dissemination of MICS data; in particular, the papers document the background methodological work undertaken for the development of new MICS indicators, modules, and analyses. The findings, interpretation and conclusions do not necessarily reflect the policies or views of UNICEF.

Acknowledgements

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Background

Social protection is the set of public and private policies and programmes aimed at preventing, reducing and eliminating economic and social vulnerabilities to poverty and deprivation. Increasing volatility at the macro and household level, the persistence of inequalities and exclusion, threats posed to sustainable development by climate change, and changing population trends have heightened the relevance and political momentum for social protection globally. UNICEF is committed to social protection as part of its global mandate to advocate for the realization of children's rights. Within UNICEF's equity-focused approach to development, social protection is a crucial policy tool for achieving equity and social justice. As an attempt to measure coverage of social protection programmes, a global indicator, '*Proportion of the poorest households who received external economic support in the past three months'*, was proposed by the Joint United Nations Programme on HIV/AIDS (1) to measure the extent to which economic support is reaching households severely affected by various shocks. Consultative efforts among programme and data teams within UNICEF over the course of 5 years led to development of a set of Social Protection questions for inclusion in household surveys. These questions were customized and pilot-tested as a separate module in Kenya (2014), Zimbabwe (2015), and Viet Nam (2015), and field-tested as part of the preparations for the 6th round of the Multiple Indicator Cluster Surveys programme (MICS) in Belize (2015). The information collected contributes to most, if not all, components addressed in the Sustainable Development Goal (SDG) indicator 1.3.1: *Percentage of population covered by social protection floors/systems, disaggregated by sex and distinguishing children, the unemployed, old-age persons, persons with disabilities, pregnant women/newborns, work injury victims, the poor and the vulnerable.*

Purpose of the Report

This report shares experiences, methodology, challenges and considerations, and recommendations that led to the development and testing of a set of social protection questions for inclusion in household surveys. The development drew on elements of social protection programmes as defined by UNICEF's Social Protection Strategic Framework (2), namely, support for education among children of school-going age, and health insurance coverage. This document will focus on the methodological approach and main findings in the four pilot countries (Kenya, Zimbabwe, Viet Nam, and Belize), and will reference individual country reports for country-specific experiences.

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Methodology

Conceptualization

The effort for piloting the social protection questions was cross-divisional and cross-sectoral in nature. It involved consultations among UNICEF headquarters' rogramme Division and Division of Data, Research and Policies, and was done in collaboration with UNICEF's Regional Offices (East and Southern Africa and East Asia and the Pacific) and Country Offices (Kenya, Zimbabwe, Viet Nam, and Belize). Guided by the indicator definition in the UNAIDS Global AIDS Response Progress Reporting document (1), which defined specific types of support, and in consultation with technical staff at UNICEF's Data and Analytics Section, the Global MICS team, HIV/AIDS and Child Protection and Social Inclusion Sections, a draft set of questions was compiled.[1] The thinking was guided by UNICEF's Social Protection Strategic Framework (2), which defined 'social protection' and its key categories.

The proposed global indicator, '*Proportion of the poorest households who received external economic support in the past three months',* was considered as a starting point. While agreeing that the global indicator addresses the need to assess the number of households that are covered by social protection services and responds to UNICEF's interest of linking services with child-related outcomes, several considerations were taken into account:

(1) Focus on a few universal concepts on social protection and social transfers that are similar and identical across countries;

(2) Use of clear concepts that can be understood the same way by survey managers, interviewers and respondents;

(3) Minimization of substantial country customizations and use of ambiguous concepts that could affect data quality;

(4) An awareness that wealth index (which this indicator draws on) has an urban bias, and the bottom quintile(s) cannot be compared across countries; and

(5) Data collected via the Social Protection questions can be validated against services, programme records, and/or other surveys).

The team agreed to first pilot-test the questions in 3 countries (Kenya, Zimbabwe, and Viet Nam) in different regions in a 'stand-alone approach' (i.e., outside of existing survey programmes such as the MICS) to accumulate experiences and evidence on country customization and to inform the development of a standardized module to be used in national population-based surveys such as the MICS. The proposed social protection questions that resulted from the pilot-testing in the 3 countries was further field-tested by UNICEF in Belize as part of the preparations for the 6th round of MICS.

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[1] The process was initiated at a meeting at UNICEF Headquarters in February 2012.

Key objectives of the pilot-testing

The key objectives of the pilot-testing of the country-customized social protection questions were to:

(i) Ascertain the extent to which the draft set of questions are understood by the intended respondents;

(ii) Check whether the questions flow, and the structure/skip patterns work well; and

(iii) Validate the data collected via the Social Protection questions against the administrative records, whenever possible.

The experience and lessons learned facilitated an evidence-based process of the development of Social Protection questions for household surveys that can be customized for countries to measure the extent to which the poorest households (and overall population) are reached by social protection programmes.

Selection of countries

The social protection questions were pilot- and field-tested in Kenya (2014), Zimbabwe (2015), Viet Nam (2015), and Belize (2015).

These countries were selected on the basis of the following key criteria:

(1) Social protection programmes were sufficiently mature and had high coverage, at least in selected regions/areas;

(2) The national programmes (both the ministry in charge of social protection programmes as well as the national statistics offices) had interest in collaborating with UNICEF to undertake pilot-testing in order to contribute to the global effort of developing a set of questions related to social protection;

(3) Spread across regions (i.e., a mix of regions, in this case Africa, Asia, and Central America and the Caribbean); and

(4) Presence of a fairly solid administrative data systems in place to guide the selection of communities with high social protection programme coverage (and in the case of Viet Nam to draw on the administrative data systems to validate survey data against administrative data).

Methodology

Tables 1-3 and the respective narrative below summarize the methodology followed for the social protection questions development and pilot-testing in each country. Full details are contained in separate documents for the countries.

Kenya

The exercise in Kenya was carried out in two phases: first phase (April 7 - 11, 2014); and second phase (May 26 - June 6, 2014). In phase 1, consultations with UNICEF Kenya and others were done to adopt the questionnaire. This was fielded using a walk-through but only 1 household was found to receive targeted benefits. Therefore, in phase 2, guided by village chief and village elders/community workers, visited only households that were known to receive Orphans and Vulnerable Children – Cash Transfer (OVC-CT) and Old Persons – Cash Transfer (OP-CT). In total, five villages with OVC-CT or OP-CT recipient households were purposively selected for fieldwork. With support of County Statistical Officers of Kenya National

Bureau of Statistics in Kakamega County, the team was able to identify five villages for fieldwork. All cash transfer (CT) recipient households were visited (except those where eligible respondents were not at home at the time of field work).

Table 1 shows the number of households receiving OVC-CT or OP-CT, and total number of households interviewed with the Social Protection questions, by village and by sub-county, in Kakamega County. In total, 36 households receiving OVC-CT and 14 households receiving OP-CT were interviewed. Further details are available online.

Table 1. Coverage of OVC-CT or OP-CT programmes, Kakamega County, Kenya 2014			
Village & sub-county	Households receiving OCT-CT	Households receiving OP-CT	Total households in village
Ekonjero, Kisa South	9	-	84
Eshiruri, Kisa South	15	-	128
Ituti, Kisa South	10	-	91
Emanyatta, Kisa Central	1	7	95
Emakhatsa, Kisa Central	1	7	178
Total	36	14	576

Zimbabwe
The exercise in Zimbabwe was carried out from February 29 to March 11, 2015. In order to reach a minimum number of 50 recipient households (as agreed upon by all parties), the team was guided by the administrative records and visited only targeted households that were known to receive Harmonised Social Cash Transfer (HSCT). With support from the Zimbabwe National Statistical Agency and the Ministry of Public Service, Labour and Social Welfare, the team was able to identify four districts for the data collection. All HSCT recipient households were visited. A total of 100 recipient households were interviewed. During the last day of fieldwork interviewers did a random walk-through and administered the module to all households in the locality, without knowing in advance whether or not they were HSCT recipients. A total of 20 random households were interviewed, with the goal to test the question content and flow and the level of knowledge and understanding of questions with all households in the community, regardless of if the household was an HSCT recipient.

Table 2 shows the number of households that were administered the social protection questions in Zimbabwe, according to whether they were targeted or not and by residence, province and district. A total of 120 households were interviewed. Further details are available online.

Table 2. Number of households interviewed by various characteristics, Zimbabwe 2015	
Characteristic	Number of interviewed households
Targeted/Not targeted[1]	
Targeted (Bindura, Chitungwiza, Epworth, Goromonzi)	100
Not targeted (Goromonzi)	20
Residence	
Urban	46
Rural	74
Province	
Mashonaland Central (Bindura District)	23
Mashonaland East (Goromonz District)	51
Harare (Chitungwiza; Epworth)	46
District	
Bindura	23
Chitungwiza	31
Epworth	15
Goromonzi	51
Total	**120**

[1] Targeted: households identified in advance from administrative records as HSCT recipients.
Not targeted: households interviewed randomly without prior knowledge of programme benefit

Viet Nam

The pilot-testing exercise took place December 10-19, 2015 in Quang Nam Province, Nui Thanh District. Quang Nam Province was selected because it is one of the four focus provinces of the Social Assistance System Strengthening Programme (SASSP – the World Bank-supported national programme where considerable investments and UNICEF's technical inputs are being made). Also, Quang Nam Province is located in the middle of the country (central), and represents a combination of characteristics (urban, peri-urban/rural, rural; ethnic diversity, etc.). Quang Nam is also a province with a greater volume of social protection beneficiaries than the three other provinces. Furthermore, it is one of the provinces where an electronic database system containing administrative records has been put in place, allowing ease of access to admin data for validation with coverage estimates generated from pilot-testing. Nui Thanh District was selected from among the districts in Quang Nam Province taking into consideration the following: it is a district with presence of ethnic minority; and it is geographically diverse (coastal area, flat region and mountain areas), although it is also not far from the provincial capital (30 kilometres away), enabling fairly easy access by the study team. Following the guidance from UNICEF headquarters team and the MICS team's sampling consultant, it was determined that the study would generate commune-level coverage estimates, and validate/compare against data in the admin data systems. Based on the same guidance, three communes were selected for diversity: (1) urban: Nui Thanh Town; (2) peri-urban/rural: Tam Hiep; and (3) Tam Tra (mountains).

For this exercise, the listing of households from the 2009 Viet Nam Census was updated by the Viet Nam General Statistics Agency for the three selected communes. All Enumeration Areas (EAs) in each of the three communes were included in the pilot-testing. Overall, in all three communes, 12 per cent of the households that were not contacted for an interview from the original sample have been replaced (13 per cent in Nui Thanh Town, 12 per cent in Tam Hiep, and 9 per cent in Tam Tra).

Table 3 shows the number of EAs and the number of selected households for each commune. A total of 1,100 households were interviewed in 55 EAs. Further details are available [online](#).

Table 3. Number of Enumeration Areas (EAs) & households interviewed by commune, Viet Nam 2015			
Commune	Number of EAs in commune	Number of households selected	Total number of households in the commune*
Commune 3: Nui Thanh Town (urban)	23	460	3,144
Commune 1: Tam Hiep (peri-urban/rural)	24	480	3,239
Commune 2: Tam Tra (mountain)	8	160	857
Total	55	1,100	7,240

*Based on updated listing of households

Belize

The field-testing of the questions took place in November to December 2015 in Dangriga district, Belize. Even though the field testing of the module in Viet Nam was in planning stages and the field work was expected to be completed before the planned Belize field test, it was decided that the draft version of the social protection questions to be included in Belize so that 1) additional data is collected in a different region and customisation challenges are observed, 2) MICS team who will be present in Belize field test becomes more familiar with the module and contributes to the discussions around the topic, 3) qualitative data can be collected to accompany the analysis, and 4) to observe how the social protection questions will function when it is part of a full set of MICS questionnaires. The social protection questions were included as part of the household questionnaire.

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Summary Findings

This section first provides a summary of the key findings from each field-test experience. This is followed by a synthesis of the overall findings, including guidance and customization for the MICS questionnaires and interpretation of the data from the social protection questions.

Kenya

We encountered two main challenges:

(1) Fairly low programme coverage at the lowest administrative levels (districts and below), even in locations where the programme coverage was high at the provincial level (i.e., in provinces with a programme coverage that met the established threshold of more than 10 percent). During the piloting, we found that the absolute number of recipient households in the lowest administrative levels (on whom we were to test the draft questions) was extremely low. As a result, during the first phase, we were unable to test the questions on a sufficient number of households. Upon further consideration, in order to meet the main objectives of the exercise, during the second phase, we opted for administering the questions only to households that were recipient of social transfers-recipient, so that we could ascertain whether the questions were understood by the intended respondents and whether the question flow and the structure/skip patterns worked well. In the selected clusters, we were guided by the community and village chiefs, as well as local social workers to identify the recipient households.

(2) In rural Kenya, households are often spread out over large geographic areas. The vastness of the space presented a challenge in our ability to pilot-test the social protection questions beyond the recipient households, given the resources (i.e., limited number of days in the field and number of data collection teams).

Zimbabwe

We countered challenges similar to Kenya, as explained above (i.e., fairly low programme overage at the lowest administrative levels even where the programme coverage was high at the provincial level). Therefore, as was the case for Kenya, we focused our efforts on pilot-testing the questions among recipient households, based on administrative data records maintained by the national social programme (Harmonized Social Cash Transfer (HSCT) Programme) that targets poor and labour-constrained households.

We selected 4 districts in and around Harare. In the selected clusters/villages, we were guided by teams from the Ministry of Public Service, Labour and Social Welfare that were assigned to each of the data collection teams. They assisted with locating the households that were benefiting from the HSCT programme, as identified by their administrative records.

Viet Nam

Based on lessons learned in Kenya and Zimbabwe, we modified our approach. We mobilized more data collection teams, provided by the General Statistics Office, to enable us to cover a sufficiently large number of households within the allocated time. We also benefited from households being close to each other even in rural communities (relative to those in Kenya and Zimbabwe), allowing us to cover far greater number of households. Thus, in Viet Nam, the data collection teams went to all selected households in the selected communes, not only to households that were recipient of social transfers or other support. Furthermore, the study team benefited from the availability of a well-functioning administrative record system, which enabled validation of the piloting data against those in the administrative records.

Aggregate coverage levels were found to be similar. The average coverage based on administrative data for 'Monthly Social Assistance' and the coverage reported in the pilot survey data is 16 per cent, each. For the 'Electricity Subsidy for the Poor', the average aggregate coverage based on administrative data and that from pilot survey data is 7 per cent, each. As it can be expected, the percentage of true positives (i.e., "Yes, received" in administrative records/"Yes, received 0–3 months ago" in the pilot data set) is somewhat lower for both programmes: 12 per cent for 'Monthly Social Assistance' and 6 per cent for 'Electricity Subsidy for the Poor'. This could be explained with the fact that some cases were declared as recipient of social support in the past three months in the pilot survey but were not confirmed with the administrative records.

However, for 'Monthly Social Assistance', the pilot-test demonstrated that 73 per cent of the households have been verified with the administrative records as confirmed recipient (68, 75 and 80 per cent for the communes, respectively, when based on three-month averages of the administrative records). On the other hand, for 'Electricity Subsidy for the Poor', the pilot-test demonstrated that 85 per cent of the households have been verified with the administrative records as confirmed recipient (46, 86 and 79 per cent for the communes, respectively, when based on three-month average of the administrative records). Validation analysis was carried out to assess the accuracy of the module that was customized specifically for Viet Nam and administered. Sensitivity (true positive rate) seems very good for monthly social assurance, and average for electricity subsidy (perhaps due to the quarterly dispatch of funds which may have affected the ability to accurately recall). Specificity (true negative rate) is extremely good (almost 100 per cent) for both sets of questions. Exact figures can be found online.

Belize

Qualitative data revealed that the first question including the introductory statement[2] was very difficult

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[2] The question asked was: "I would like to ask you about various external economic assistance programmes provided to households. by external assistance I mean support that comes from the government, from non-governmental organizations, religious, charitable, or community-based organizations, but excluding those from family, relatives, friends or neighbours. Are you aware of any external economic assistance programmes such as: boost, secondary school subsidy, pensions, labour programmes, food pantry, nutritional supplements, or other similar programmes?"

to understand. This is also reflected in the below dialogue with respondents:

"I: When she read those words, what did you think?
R: I think she need to say it in our language, because sometimes we do not understand. I could only understand because she explain it to me." (36 year old female)

"I: When you hear about economic assistance programs, what programs come to mind?
R: I still don't understand the questions because it is too long." (40 year old female)

In the focus groups, the interviewers voiced their concerns about the questions on social protection and economic assistance. They found questions too long, so that the participants do no let them finish. This was especially focussed on the first question:

"The questions were too long and complicated. The first question is followed by too many examples and it does not apply to a number of households. People were puzzled and we ended up repeating the list." (Focus Group 1)

According to the results of the quantitative analysis, 48 percent of the household questionnaire respondents indicated that they are aware of external economic support programs and 16 percent stated that at least one of the members have received such a support before. This proportion was 7 percent for the last three months, and among households in the two lowest wealth quintiles it was 8 percent. The percentage of children and young people aged 5-24 years in households who are currently attending school who received support for school fees and materials during the current/most recent school year was 1 percent among all households and among households in the two lowest wealth quintiles. Among all households, pension was received in 4 percent, 2 percent received BOOST (Building Opportunities for Our Social Transformation, a cash-transfer programme mainly on health and education) and less than 1 percent received food assistance. Pension was only received in households where the head of household was older and most prevalent among the households with the oldest heads (e.g. age 70+: 35 percent, age 60-69: 16 percent).

It was observed that the design of the school support questions required a roster approach and was difficult to administer. It was concluded that a better alternative may be to ask these questions as part of the Education module in the MICS Household Questionnaire where they will fit more naturally and save time.

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Customization Considerations and MICS6 Indicators

Key considerations in country customization of social protection questions

- Standard questions are guided by UNICEF's Social Protection Strategic Framework (2) and primarily covers questions on social transfers and social protection interventions that enhance access to services (e.g., health and education services). *Questions will need to be customized to be aligned to the national programmes.*

- Countries should consider the scope, diversity, type, content, frequency of payment of social protection schemes (social assistance as well as social insurance programmes). Furthermore, it must be recognized that countries have a diverse set of social protection mechanisms and systems in place, with varying degrees of maturity, with diverse intensity of coverage, and various eligibility criteria for beneficiaries. While cash transfers and grants are intended to be disbursed regularly (though this may not always be the case), some social transfer schemes are seasonal (e.g., agricultural inputs) or for emergency relief purposes (e.g., public works projects) and tend to be restricted to specific regions within a given country and over a specific period of time. While acknowledging that all schemes are important, *it is important for the country teams to agree on a few of the major schemes that are of critical importance (i.e., agree on a minimum number of social protection schemes for measurement) for which they wish to generate meaningful estimates in order to inform their policies and programmes*.

- Countries may also consider setting aside questions (that do not end up in the minimum set of questions) *for social protection-specific special studies that may be more targeted in certain geographical regions, clusters, areas and on specific population groups.* In special studies/targeted surveys, more questions on social protection can be asked.

- Customizing questions in the draft module to be aligned to specific programmes in a given country *requires a larger involvement of not only the national statistics office but also with the key line ministry/ministries in charge of social protection/social welfare programmes than what is typically required from line ministries*. Details of the various social protection programmes (social transfers, health vouchers and insurance schemes, scholarships and fee waiver programmes, etc.) and eligibility criteria need to be provided by the key ministry/ministries. Experiences from pilot-testing in selected countries so far have revealed that the ministry in charge of social welfare as well as Ministry of Education are critical stakeholders with information that enable meaningful country customization of the module.

Sampling

- Social transfer schemes (apart from pension) tend to target economically disadvantaged households or those that are provided on the basis of certain criteria. Recipients that are provided with transfers on the basis of social and economic conditions tend to be clustered in certain geographical regions, areas, communities. *Thus, at the national and even sub-national levels (provinces/states, districts), coverage estimates may be very low, while at the community-level the coverage may be high in specific areas*.

- To generate meaningful estimates on coverage of the various social transfer schemes at the national and provincial/state and district levels from *population-based household surveys*, it is important to take this condition into sampling considerations. *In some instances, oversampling of certain districts or clusters may be considered. However, it should be carefully considered, keeping the objectives of the full survey in mind, as there are opportunity costs associated with oversampling.*

- Special studies/targeted surveys that are implemented in selected sub-national regions/areas where the coverage of transfer programmes are anticipated to be reasonably high, oversampling may not be required.

Training of interviewers and supervisors

- Survey managers need to ensure that a thorough *review is undertaken on the background documents* on the countries' social protection programmes and schemes. It is important that interviewers share the same knowledge and ask questions the same way and use a consistent language in additional explanations and probing. To ensure that interviewers are fully equipped with knowledge and tools required to collect data on social protection schemes, a simple table of describing each scheme, who it targets, eligibility criteria, geographical areas of concentration, etc. may be *included in the interviewers training manual and be covered during interviewers training*.

- Critical that *national and sub-national level counterparts from the statistics office as well as social welfare and other line ministries/departments participate in the training of interviewers* to review questions and be able to elaborate on each scheme as well as to answer any questions from interviewers on the key concepts that are being measured.

Interpretation of data

- The scope, diversity, type and content of social protection programmes differ by country. In some countries, primary education is free for all. In some countries, health insurance may be provided to all (through the national health insurance programme and/or private sector). **Comparison of**

coverage estimates across countries need to be handled carefully, taking this diversity across countries into consideration.

- The field of social protection is evolving, and even within the same country the content and eligibility of certain schemes may change over time. *Comparison of coverage estimates over time in a given (same) country needs to be handled carefully, taking this evolving nature across time into consideration.*

Comparing coverage estimates generated from household surveys against administrative data

- Countries have administrative data systems that track cash transfers and child grants/benefits disbursed to beneficiaries. The level of availability and quality of administrative data may differ by social protection scheme, by the scale of schemes as well as donor reporting requirements (in countries where key social transfer programmes are financially supported by external funders). When coverage estimates are generated from general population-based household surveys (such as MICS), it is important to *keep in mind that the estimates from surveys may not be entirely comparable to estimates obtained from administrative data systems, particularly if the administrative data systems are not up-to-date, complete or the quality of data reported is a concern.*

- In Viet Nam, where administrative data records for the major transfer programmes were available and accessible, a one-to-one matching exercise was carried out to compare data on recipients collected from households against those maintained in the administrative data systems. *The result of the analysis revealed a good match, suggesting that the questions customized for Viet Nam resulted in valid responses.*

- It should be noted that validity also depends on how well the questions are customized and sufficiently aligned to the national social protection schemes to enable reliable responses from respondents, and other country-specific factors that are not known to us at this time.

Social protection questions and indicators

Upon conclusion of the pilot-testing in 3 countries and field-testing in Belize as part of the preparations for the 6th round of MICS6, the MICS team agreed that the standardized set of social protection-related questions are comprised of:

(i)   The Social Transfer module (located in the Household Questionnaire);
(ii)   Questions on educational support placed in the Education module (located in the Household Questionnaire), and
(iii)   Questions on health insurance (located in the Individual Questionnaires for Women and for Men age 15-49, and Questionnaires for Children age 5-17 and Under-five).

For a full set of the questions, see the *Annex.*

Table 4. MICS social protection indicators and definitions			
MICS INDICATOR	**SDG**	**Module**	**Description**
EQUITABLE CHANCE IN LIFE			
EQ.2a EQ.2b EQ.2c	Health insurance coverage		WB CB UB	Percentage of women, men and children covered by health insurance a) women age 15-49 men age 15-49 b) children age 5-17 c) children under age 5
EQ.3	Population covered by social transfers	1.3.1	ST-ED	Percentage of household members living in households that received any type of social transfers and benefits in the last 3 months
EQ.4	External economic support to the poorest households		ST-ED	Percentage of households in the two lowest wealth quintiles that received any type of social transfers in the last 3 months
EQ.5	Children in the households that received any type of social transfers		ST-ED	Percentage of children under age 18 living in the households that received any type of social transfers in the last 3 months
EQ.6	School-related support		ED	Percentage of children and young people age 5-24 years currently attending school that received any type of school-related support in the current/most recent academic year

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References

(1) Joint United Nations Programme on HIV/AIDS, *Global AIDS Response Progress Reporting 2014: Construction of core indicators for monitoring the 2011 United Nations Political Declaration on HIV and AIDS*, UNAIDS, Geneva, 2014.

(2) *https://www.unicef.org/socialpolicy/files/UNICEF_Social_Protection_Strategic_Framework_full_doc_std.pdf*

Annex: MICS Household Questionnaire

EDUCATION 2 — ED

ED1. Line number

ED2. Name and age.

ED9. At any time during the current school year did (*name*) attend school or any Early Childhood Education programme?
1 YES
2 NO Ƨ ED15

ED10. During this current school year, which level and grade or year is (*name*) attending?
LEVEL:
0 ECE Ƨ ED15
1 PRIMARY
2 LOWER SEC.
3 UPPER SEC.
4 HIGHER
8 DK
GRADE/YEAR: 98 DK

ED11. Is (he/she) attending a public school? If "Yes", record '1'. If "No", probe to code who controls and manages the school.
1 GOVT./ PUBLIC
2 RELIGIOUS/ FAITH ORG.
3 PRIVATE
6 OTHER
8 DK

ED12. In the current school year, has (*name*) received any school tuition support? If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.
1 YES
2 NO Ƨ ED14
8 DK Ƨ ED14

ED13. Who provided the tuition support? Record all mentioned.
A GOVT. / PUBLIC
B RELIGIOUS/ FAITH ORG.
C PRIVATE.
X OTHER
Z DK

ED14. For the current school year, has (*name*) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies? If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.
1 YES
2 NO
8 DK

ED15. At any time during the previous school year did (*name*) attend school or any Early Childhood Education programme?
1 YES
2 NO Ƨ Next Line
8 DK Ƨ Next Line

ED16. During that previous school year, which level and grade or year did (*name*) attend?
LEVEL:
0 ECE Ƨ Next Line
1 PRIMARY
2 LOWER SEC.
3 UPPER SEC.
4 HIGHER
8 DK
GRADE/YEAR: 98 DK

LINE	NAME	AGE	ED9 YES NO	ED10 LEVEL	ED10 GRADE/YEAR	ED11 AUTHORITY	ED12 YES NO DK	ED13 TUITION	ED14 YES NO DK	ED15 YES NO DK	ED16 LEVEL	ED16 GRADE/YEAR
01		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
02		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
03		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
04		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
05		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
06		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
07		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
08		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
09		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
10		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
11		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
12		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
13		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
14		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__
15		__	1 2	0 1 2 3 4 8	__	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 8	__

SOCIAL TRANSFERS   ST

ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.

	[A] ASSISTANCE TYPE 1	[B] ASSISTANCE TYPE 2	[C] ASSISTANCE TYPE 3	[D] ANY RETIREMENT PENSION	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME
ST2. Are you aware of (*name of programme*)?	YES...1 NO...2 ↳[B]	YES...1 NO...2 ↳[C]	YES...1 NO...2 ↳[D]	YES...1 NO...2 ↳[X]	YES (specify)____ 1 NO...2 ↳End
ST3. Has your household or anyone in your household received assistance through (*name of programme*)?	YES...1 ↳ST4 NO...2 ↳[B] DK...8 ↳[B]	YES...1 ↳ST4 NO...2 ↳[C] DK...8 ↳[C]	YES...1 ↳ST4 NO...2 ↳[D] DK...8 ↳[D]	YES...1 ↳ST4 NO...2 ↳[X] DK...8 ↳[X]	YES...1 ↳ST4 NO...2 ↳End DK...8 ↳End
ST4. When was the <u>last time</u> your household or anyone in your household received assistance through (*name of programme*)? *If less than one month, record '00' in Months.* *If less than 12 months, record '1' and record in Months.* *If 1 year/12 months or more, record '2' and record in Years.*	MONTHS AGO 1 __ __ ↳[B] YEARS AGO...2 __ __ ↳[B] DK...998 ↳[B]	MONTHS AGO 1 __ __ ↳[C] YEARS AGO...2 __ __ ↳[C] DK...998 ↳[C]	MONTHS AGO 1 __ __ ↳[D] YEARS AGO...2 __ __ ↳[D] DK...998 ↳[D]	MONTHS AGO 1 __ __ ↳[X] YEARS AGO...2 __ __ ↳[X] DK...998 ↳[X]	MONTHS AGO...1 __ __ ↳End YEARS AGO...2 __ __ ↳End DK...998 ↳End

Annex: Individual Questionnaire for Women 15-49*

WOMAN'S BACKGROUND	WB	
WB18. Are you covered by any health insurance?	YES...1	
	NO 2	2⇨End
WB19. What type of health insurance are you covered by? *Record all mentioned.*	MUTUAL HEALTH ORGANIZATION / COMMUNITY-BASED HEALTH INSURANCE.....................................A HEALTH INSURANCE THROUGH EMPLOYER ....B SOCIAL SECURITY ....C OTHER PRIVATELY PURCHASED COMMERCIAL HEALTH INSURANCE...D OTHER (*specify*)_____X	

*Questions and response categories are the same in the MICS Questionnaire for Individual Men age 15-49. Similar questions and response categories are asked to the mother/caregiver for children age 5-17 and children under five in the respective MICS questionnaires.

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