



## EUROPEAN ATTITUDES SURVEY, 2002/2003

Area Code

Respondent Code

Int No.

### Household Record Sheet

**Contact Made**

**Contacted target respondent:**

- 1. Interview Completed..... 1
- 2. Interview partially completed. Will complete..... 2
- 3. Interview broken off. Will not complete..... 3
- 4. Appointment made with respondent..... 4
- 5. Respondent refused..... 5

**Contacted other household member:**

- 6. Complete refusal of household..... 6
- 7. Appointment made by other household members..... 7
- 8. Refused by someone on behalf of respondent..... 8
- 9. Resp temp. absent but may be back during fieldwork. 9
- 10. Resp temp. absent throughout fieldwork..... 10
- 11. Resp too ill/incapacitated ..... 11

**No contact Made**

**Found address/non contact:**

- 12. Called cold. No-one at home..... 12
- 13. Had appointment but broken..... 13
- 14. Could not gain access to address..... 14

**Ineligible household:**

- 15. Derelict/demolished..... 15
- 16. Could not find address..... 16
- 17. Institution..... 17
- 18. Vacant..... 18
- 19. Other (specify) \_\_\_\_\_ 19

|                |      |                     |                                       |                                       | Identified<br>Target Resp?            |                                       |                           |          |
|----------------|------|---------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------|----------|
| Contact<br>No. | Date | Time<br>24 hr clock | Mode of Contact                       |                                       | Yes                                   | No                                    | Outcome code<br>for visit | Comments |
|                |      |                     | In Person                             | Phone                                 |                                       |                                       |                           |          |
| 1.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 2.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 3.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 4.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 5.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 6.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 7.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 8.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 9.             |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 10.            |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 11.            |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |
| 12.            |      |                     | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> | <input type="checkbox"/> <sub>1</sub> | <input type="checkbox"/> <sub>2</sub> |                           |          |

**A. Approximate age of target respondent?**

Under 20 yrs..... <sub>1</sub>      20 – 39 yrs ..... <sub>2</sub>      40 – 59 yrs..... <sub>3</sub>      60 or older..... <sub>4</sub>

**B. Respondent was:**

Male ..... <sub>1</sub>      Female ..... <sub>2</sub>      DK/Never saw Resp/Resp not selected..... <sub>88</sub>

**C. Type of house where respondent lives:**

- |   |  |
|---|--|
| Farm ..... <input type="checkbox"/> <sub>1</sub>  | Purpose built apartment block..... <input type="checkbox"/> <sub>7</sub>           |
| Detached house..... <input type="checkbox"/> <sub>2</sub>   | Other apartment block (converted house)..... <input type="checkbox"/> <sub>8</sub> |
| Semi-detached house..... <input type="checkbox"/> <sub>3</sub>  | Student apartment/complex..... <input type="checkbox"/> <sub>9</sub>               |
| Terraced house ..... <input type="checkbox"/> <sub>4</sub>  | Sheltered housing..... <input type="checkbox"/> <sub>10</sub>                      |
| The only residential unit in<br>commercial building..... <input type="checkbox"/> <sub>5</sub>        | House trailer or boat..... <input type="checkbox"/> <sub>11</sub>                  |
| One of several residential<br>units in commercial building..... <input type="checkbox"/> <sub>6</sub> | Other (specify) _____ <input type="checkbox"/> <sub>12</sub>                       |
|   | Don't know ..... <input type="checkbox"/> <sub>88</sub>                            |

**D. Which of the following are visible at the sampled address?**

|                            | Yes                        | No                         |                                 | Yes                        | No                         |
|----------------------------|----------------------------|----------------------------|---------------------------------|----------------------------|----------------------------|
| Burglar alarm.....         | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | Closed/open porch .....         | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| Intercom/entry phone ..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | Beware of dog's sign .....      | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| Security lights.....       | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | Bars/grills on any window ..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |

**E. In what physical state are the buildings/dwellings in this area?**

Very good State.....1      Good state.....2      Satisfactory state.....3      Bad state.....4      Very bad state.....5

**F. Relative to other dwellings nearby in what physical state is the sampled address?**

Much better condition.....1      Better condition.....2      More or Less same condition...3      Worse condition.....4      Much worse condition ....5

**G. In the immediate area, how common is litter or rubbish lying around?**

Very common.....1      Fairly common .....2      Not Very common .....3      Not at all common.....4

**H. How common is vandalism, graffiti or deliberate damage to property?**

Very common.....1      Fairly common .....2      Not Very common .....3      Not at all common.....4

**Qs. I to O to be answered only if the questionnaire was completed.**

**I. How was the supplementary questionnaire administered?**

Face to face Interview 1      Completed by respondent while you were present 2      Left with respondent to be collected by you 3      Left with respondent to be returned by post 4      Refused 5

**J. Did the respondent ask for clarification on any questions?**

Never 1      Almost Never 2      Now and then 3      Often 4      Very Often 5      Don't know 8

**K. Did you feel that the respondent was reluctant to answer any questions?**

Never 1      Almost Never 2      Now and then 3      Often 4      Very Often 5      Don't know 8

**L. Did you feel that the respondent tried to answer the questions to the best of his or her ability?**

Never 1      Almost Never 2      Now and then 3      Often 4      Very Often 5      Don't know 8

**M. Overall, did you feel that the respondent understood the questions?**

Never 1      Almost Never 2      Now and then 3      Often 4      Very Often 5      Don't know 8

**N. Was anyone else present, who interfered with the interview?**

Yes.....1      No.....2

**O. Who was this? Code all that apply.**

Husband/wife/partner 1  
Son/daughter (inc. step, adopted, foster, child of partner) 2  
Parent/parent-in-law/step-parent/partner's parent 3  
Other relative 4  
Other non-relative 5  
Don't know 8

