

EUROPEAN ATTITUDES SURVEY, Winter 2004/2005

Interviewer's Name _____ Interviewer's Number

Area Code Respondent Code

Date of Interview: Day Month Time Interview Began (24hr clock)

Hello, I am from the Economic and Social Research Institute in Dublin. We have been commissioned by a group of researchers in University College Dublin to carry out a survey into peoples attitudes to a range of social issues. Your name was selected at random from the electoral register for inclusion in this survey. All the information you provide will be treated in the strictest confidence and will not be released to anyone in any way which would allow your views and your opinions to be identified with you. This survey is being conducted at this time in more than 20 European countries including countries in Central and Eastern Europe. It will allow us to examine how Ireland compares relative to other countries in terms of attitudes, experiences etc.

**A1 On an average weekday, how much time, in total do you spend on the following activities:
[Int. Show Card 1]**

	No time at all	Less than ½ hour	½ hour to 1 hour	More than 1 hour up to 1½ hours	More than 1 ½ hours up to 2 hours	More than 2 hours up to 2 ½ hours	More than 2 ½ hours up to 3 hours	More than 3 hours	DK
A1 Watching Television.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88
A2 Watching news or politics And current affairs on TV.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88
A3 Listening to the radio.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88
A4 Listening to news or politics and current affairs on radio.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88
A5 Reading the newspapers.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88
A6 Reading about news or politics & current affairs in newspapers.....	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88

A7 Now, using this card, how often do you use the internet, the World Wide Web or e-mail – whether at home or at work – for your personal use? [Int. Show Card 2]

No access at Home or Work	Never Use	Less than Once a month	Once a month	Several times a month	Once a week	Several times a week	Every day	DK
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88

A8 Using this card, generally speaking, would you say that most people can be trusted, or that you can't be too careful in dealing with people? Please tell me on a score of 0 to 10, where 0 means you can't be too careful and 10 means that most people can be trusted. [Int. Show Card 3]

You can't be too careful _____ *Most people can be trusted* **DK**

0	01	02	03	04	05	06	07	08	09	10	88

A9 Using this card, do you think that most people would try to take advantage of you if they got the chance, or would they try to be fair? [Int. Show Card 4]

Most people would try to take advantage of me _____ *Most people would try to be fair* **DK**

0	01	02	03	04	05	06	07	08	09	10	88

A10 Would you say that most of the time people try to be helpful or that they are mostly looking out for themselves? [Int. Show Card 5]

People mostly look out for themselves _____ *People mostly try to be helpful* **DK**

0	01	02	03	04	05	06	07	08	09	10	88

Now we want to ask you a few questions about politics and government

B1 How interested would you say you are in politics – are you.....READ OUT...

Very interested ₁ Quite interested ₂ Hardly interested ₃ Not at all interested ₄ DK ₈

B2 How often does politics seem so complicated that you can't really understand what is going on? Please use this card. [Int. Show Card 6]

Never ₁ Seldom ₂ Occasionally ₃ Regularly ₄ Frequently ₅ DK ₈

B3 How difficult or easy do you find it to make your mind up about political issues? Please use this card. [Int. Show Card 7]

Very difficult ₁ Difficult ₂ Neither difficult nor easy ₃ Easy ₄ Very easy ₅ DK ₈

B4 Using this card, please tell me on a score of 0-10 how much you *personally* trust each of the institutions I read out. 0 means you do not trust the institution at all, and 10 means you have complete trust. [Int. Show Card 8]

No trust at all _____ *Complete trust* **DK**

		0	01	02	03	04	05	06	07	08	09	10	88
B4	The Dáil?												
B5	The legal system?												
B6	The Gardaí?												
B7	Politicians?												
B8	Political Parties?												
B9	The European Parliament?												
B10	The United Nations?												

B11 Some people don't vote nowadays for one reason or another. Did you vote in the last general election in May 2002?

Yes..... 1 No..... 2 → Go to B13 Not eligible to vote 3 → Go to B13

B12 Which party did you give your first preference vote to in that election?

Fianna Fail	Fine Gael	Labour	Progressive Democrats	Green Party	Sinn Féin	Independent	Other (specify)	Refused	DK
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 77	<input type="checkbox"/> 88

B13 There are different ways of trying to improve things in Ireland or help prevent things from going wrong. During the last 12 months, have you done any of the following? Firstly have you.....READ OUT

	Yes	No	(Don't know)
B13a. Contacted a politician, government or local government official.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8
B14. Worked in a political party or action group.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8
B15. Worked in another organisation or association.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8
B16. Worn or displayed a campaign badge/sticker.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8
B17. Signed a petition.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8
B18. Taken part in a lawful public demonstration.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8
B19. Boycotted certain products.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 8

B20a Is there a particular political party you feel closer to than all the other parties?

Yes..... 1 No..... 2 Don't know 8

B20b Which one?

Fianna Fáil.....	<input type="checkbox"/> 1	Green Party.....	<input type="checkbox"/> 5
Fine Gael.....	<input type="checkbox"/> 2	Sinn Fein.....	<input type="checkbox"/> 6
Labour.....	<input type="checkbox"/> 3	Other (write in) _____	<input type="checkbox"/> 7
Progressive Democrats.....	<input type="checkbox"/> 4	Refused.....	<input type="checkbox"/> 77 → Go to B21
		Don't know.....	<input type="checkbox"/> 88 → Go to B21

B20c How close do you feel to this party. Do you feel that you are.....

Very Close	Quite Close	Not Close	Not at all Close	Don't Know
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8

B21 Are you a member of any political party?

Yes..... 1 No..... 2 → Go to B23 Don't know 8 → Go to B23

B22 Which one?

Fianna Fáil.....	<input type="checkbox"/> 1	Green Party.....	<input type="checkbox"/> 5
Fine Gael.....	<input type="checkbox"/> 2	Sinn Fein.....	<input type="checkbox"/> 6
Labour.....	<input type="checkbox"/> 3	Other (write in) _____	<input type="checkbox"/> 7
Progressive Democrats.....	<input type="checkbox"/> 4	Refused.....	<input type="checkbox"/> 77
		Don't know.....	<input type="checkbox"/> 88

B23 In politics people sometimes talk of "left" and "right". Using this card, where would you place yourself on this scale, where '0' means the left and '10' means the right? [Int. Show Card 9]

<i>Left</i>												<i>Right</i>	<i>DK</i>
0	01	02	03	04	05	06	07	08	09	10	88		

B39 Would you say that Ireland's cultural life is generally undermined or enriched by people coming to live here from other countries. Show Card 15.

Cultural life undermined → *Cultural life enriched* *DK*

0	01	02	03	04	05	06	07	08	09	10	88

B40 Is Ireland made a worse or better place to live by people coming to live here from other countries. Show Card 16.

Worse place to live → *Better place to live* *DK*

0	01	02	03	04	05	06	07	08	09	10	88

AND NOW A FEW QUESTIONS ABOUT YOU AND YOUR LIFE.

C1 Taking all things together, how happy would you say you are? [Int. Show Card 17]

Extremely unhappy → *Extremely happy* *DK*

	0	01	02	03	04	05	06	07	08	09	10	88

C2 Using this card, how often do you meet *socially* with friends, relatives or work colleagues? [Int. Show Card 18]

- | | |
|---|--|
| Never..... <input type="checkbox"/> 1 | Once a week..... <input type="checkbox"/> 5 |
| Less than once a month.... <input type="checkbox"/> 2 | Several times a week..... <input type="checkbox"/> 6 |
| Once a month..... <input type="checkbox"/> 3 | Every day..... <input type="checkbox"/> 7 |
| Several times a month..... <input type="checkbox"/> 4 | Don't know..... <input type="checkbox"/> 88 |

C3 Do you have anyone with whom you can discuss intimate and personal matters?

- Yes..... 1 No..... 2 Don't know 8

C4 Compared to other people of your age, how often would you say you take part in social activities? [Int. Show Card 19]

- | | | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| Much less than most | Less than most | About the same | More than most | Much more than most | DK |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 8 |

C5 Have you or a member of your household been the victim of burglary or assault in the last 5 years?

- Yes..... 1 No..... 2 Don't know 8

C6 How safe do/would you feel walking alone in this area after dark? Do/would you feel.... ..

- | | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| Very Safe | Safe | Unsafe | Very unsafe | DK |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |

C7 How is your health in general? Would you say it isREAD OUT

- | | | | | | |
|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| Very good | Good | Fair | Bad | Very bad | DK |
| <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 8 |

C8 Are you hampered in your daily activities in any way by any longstanding illness, or disability, infirmity or mental health problem? PROMPT IN RELATION TO PRECODES.

Yes a lot 1 Yes to some extent 2 No 3 DK 8

C9 Do you consider yourself as belonging to any particular religion or denomination?

Yes..... 1 No..... 2 → Go to C11 Don't know 8 → Go to C11

C10 Which one? Record as fully as possible Ask about specific denomination e.g. if Protestant, record if whether C of I, Presbyterian, Methodist etc.

GO TO C13

C11 Have you ever considered yourself as belonging to any particular religion or denomination?

Yes..... 1 No..... 2 → Go to C13 Don't know 8 → Go to C13

C12..... Which one? Record as fully as possible

ASK ALL

C13 Regardless of whether you belong to a particular religion, how religious would you say you are? Please use this card. [Int. Show Card 20]

Not at all

<i>religious</i>										<i>Very religious</i>		<i>DK</i>
0	01	02	03	04	05	06	07	08	09	10	88	

C14 Apart from special occasions such as weddings and funerals, about how often do you attend religious services nowadays? [Int. Show Card 21]

Every day 1 More than once a week 2 Once a week 3 At least once a month 4 Only on special holy days 5 Less often 6 Never 7 DK 88

C15 Apart from when you are at religious services, how often, if at all, do you pray? [Int. Show Card 21]

Every day 1 More than once a week 2 Once a week 3 At least once a month 4 Only on special holy days 5 Less often 6 Never 7 DK 88

C16 Would you describe yourself as being a member of a group that is discriminated against in this country?

Yes..... 1 Go to C17 No..... 2 Go to C18 Don't know 8 Go to C18

C17 On what grounds is your group discriminated against? PROBE: "What other grounds?" Tick all that apply

Colour or race....	<input type="checkbox"/> 1	Gender.....	<input type="checkbox"/> 7
Nationality.....	<input type="checkbox"/> 2	Sexuality.....	<input type="checkbox"/> 8
Religion.....	<input type="checkbox"/> 3	Disability.....	<input type="checkbox"/> 9
Language.....	<input type="checkbox"/> 4	Other (WRITE IN) _____	<input type="checkbox"/> 10
Ethnic group.....	<input type="checkbox"/> 5	Don't know.....	<input type="checkbox"/> 88
Age.....	<input type="checkbox"/> 6		

C18 Are you a citizen of Ireland?

Yes.....₁ No.....₂ Don't know ₈

C19 What citizenship do you hold? _____ Don't know..... ₈

C20 Were you born in Ireland?

Yes.....₁ No.....₂ Don't know ₈

C21 In which country were you born? _____ Don't know ₈

C22 How long ago did you first come to live in Ireland? [Int. Show Card 22]

Within the last year	1-5 years ago	6-10 years ago	11-20 years ago	More than 20 years ago	DK
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈₈

C23 What language or languages do you speak most often at home?

WRITE IN UP TO 2 LANGUAGES _____
 _____ Don't know..... ₈₈₈

C24 Do you belong to a minority ethnic group in Ireland?

Yes.....₁ No.....₂ Don't know ₈

C25 Was your father born in Ireland?

Yes.....₁ No.....₂ Don't know ₈

C26 In which country was your father born? _____

C27 Was your mother born in Ireland?

Yes.....₁ No.....₂ Don't know.....₈

C28 In which country was your mother born? _____

I would now like to ask you some questions about health and medicine.

D1 How much do you approve or disapprove if otherwise healthy people use medicines to.. [Show Card 23]

	Strongly Approve	Approve	Neither approve nor disapprove	Disapprove	Strongly Disapprove	Don't know
D1 Lose weight?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
D2 Reduce hair loss?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
D3 Improve their memory?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
D4 Feel happier?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
D5 Improve their sex life?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈

D6 When you have a health problem, how often do you use herbal remedies? Please use this card 24.

Never or almost never	Some of the time	About half the time	Most of the time	Always or almost always	Don't have health problems	Don't know
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	<input type="checkbox"/> ₈

D7 When you are prescribed a medicine, how often do you worry about side effects? Please use card 25.

Never or almost never <input type="checkbox"/> 1	Some of the time <input type="checkbox"/> 2	About half the time <input type="checkbox"/> 3	Most of the time <input type="checkbox"/> 4	Always or almost always <input type="checkbox"/> 5	Don't use prescribed medicines <input type="checkbox"/> 6	Don't know <input type="checkbox"/> 8
--	---	--	---	--	---	---

D8 When you have a health problem, how often do you prefer a medicine prescribed by a medical doctor as opposed to one that you can just buy or one that is recommended by some other practitioner? Please use card 25.

Never or almost never <input type="checkbox"/> 1	Some of the time <input type="checkbox"/> 2	About half the time <input type="checkbox"/> 3	Most of the time <input type="checkbox"/> 4	Always or almost always <input type="checkbox"/> 5	Don't have health problems <input type="checkbox"/> 6	Don't know <input type="checkbox"/> 8
--	---	--	---	--	---	---

D9 Please think back to the last time a doctor prescribed you a medicine you had not had before. Which statement on the card comes closest to what you did with this prescription? Card 26.

I didn't collect the medicine from the pharmacy	<input type="checkbox"/> 1	Can't remember last occasion	<input type="checkbox"/> 5
I collected the medicine but didn't use any of it	<input type="checkbox"/> 2	Never had a prescription from a doctor	<input type="checkbox"/> 6
I used some or all of the medicine but not exactly as prescribed	<input type="checkbox"/> 3	Other answer	<input type="checkbox"/> 7
I used the medicine exactly as prescribed	<input type="checkbox"/> 4	Don't know	<input type="checkbox"/> 8

D10 Are you regularly taking any pills or using any medication prescribed for you?

Yes.....1 No.....2 Don't know8

D11 Many people occasionally use medicine prescribed for somebody else. In the last 5 years, how often have you taken or used a prescribed medicine that was prescribed for someone else? Please use card 27.

Four times or more <input type="checkbox"/> 1	Two or three times <input type="checkbox"/> 2	Once <input type="checkbox"/> 3	Not in last 5 years <input type="checkbox"/> 4	Don't know <input type="checkbox"/> 8
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D12 Suppose you had a very sore throat. Who, if anyone, would you go to first for advice or treatment? Please choose one answer from card 28.

Nobody.....	<input type="checkbox"/> 1	}	GO TO D13
Friends or family.....	<input type="checkbox"/> 2		
Pharmacist/chemist/drug store.....	<input type="checkbox"/> 3		
Doctor.....	<input type="checkbox"/> 4		
Nurse.....	<input type="checkbox"/> 5		
The internet/web.....	<input type="checkbox"/> 6		
A medical helpline.....	<input type="checkbox"/> 7		
Other practitioner.....	<input type="checkbox"/> 8	→	ASK D12a
Don't know.....	<input type="checkbox"/> 88	→	GO TO D13

D12a Which of these types of practitioner do you think you would go to first for advice or treatment? Please choose one answer from this card? Card 29.

Acupuncture or acupressure.....	<input type="checkbox"/> 1	Massage therapy.....	<input type="checkbox"/> 6
Chinese medicine.....	<input type="checkbox"/> 2	Physiotherapy.....	<input type="checkbox"/> 7
Chiropractic or osteopathy.....	<input type="checkbox"/> 3	Reflexology.....	<input type="checkbox"/> 8
Herbal treatment or homeopathy.....	<input type="checkbox"/> 4	Other practitioner.....	<input type="checkbox"/> 9
Hypnotherapy.....	<input type="checkbox"/> 5	Don't know.....	<input type="checkbox"/> 88

D13 Suppose now that you had a serious headache. Who, if anyone, would you go to first for advice or treatment? Please choose one answer from card 28.

- | | | | | |
|-------------------------------------|--------------------------|----|---|-----------|
| Nobody | <input type="checkbox"/> | 1 | } | GO TO D14 |
| Friends or family | <input type="checkbox"/> | 2 | | |
| Pharmacist/chemist/drug store | <input type="checkbox"/> | 3 | | |
| Doctor..... | <input type="checkbox"/> | 4 | | |
| Nurse | <input type="checkbox"/> | 5 | | |
| The internet/web..... | <input type="checkbox"/> | 6 | | |
| A medical helpline..... | <input type="checkbox"/> | 7 | | |
| Other practitioner | <input type="checkbox"/> | 8 | → | ASK D13a |
| Don't know..... | <input type="checkbox"/> | 88 | → | GO TO D14 |

D13a Which of these types of practitioner do you think you would go to first for advice or treatment? Please choose one answer from this card? Card 29.

- | | | | | | |
|--------------------------------------|--------------------------|---|-------------------------|--------------------------|----|
| Acupuncture or acupressure | <input type="checkbox"/> | 1 | Massage therapy..... | <input type="checkbox"/> | 6 |
| Chinese medicine..... | <input type="checkbox"/> | 2 | Physiotherapy..... | <input type="checkbox"/> | 7 |
| Chiropractic or osteopathy..... | <input type="checkbox"/> | 3 | Reflexology..... | <input type="checkbox"/> | 8 |
| Herbal treatment or homeopathy | <input type="checkbox"/> | 4 | Other practitioner..... | <input type="checkbox"/> | 9 |
| Hypnotherapy | <input type="checkbox"/> | 5 | Don't know..... | <input type="checkbox"/> | 88 |

D14 Suppose now that you had serious sleeping problems. Who, if anyone, would you go to first for advice or treatment? Please choose one answer from card 28.

- | | | | | |
|-------------------------------------|--------------------------|----|---|-----------|
| Nobody | <input type="checkbox"/> | 1 | } | GO TO D15 |
| Friends or family | <input type="checkbox"/> | 2 | | |
| Pharmacist/chemist/drug store | <input type="checkbox"/> | 3 | | |
| Doctor..... | <input type="checkbox"/> | 4 | | |
| Nurse | <input type="checkbox"/> | 5 | | |
| The internet/web..... | <input type="checkbox"/> | 6 | | |
| A medical helpline..... | <input type="checkbox"/> | 7 | | |
| Other practitioner | <input type="checkbox"/> | 8 | → | ASK D14a |
| Don't know..... | <input type="checkbox"/> | 88 | → | GO TO D15 |

D14a Which of these types of practitioner do you think you would go to first for advice or treatment? Please choose one answer from this card? Card 29.

- | | | | | | |
|--------------------------------------|--------------------------|---|-------------------------|--------------------------|----|
| Acupuncture or acupressure | <input type="checkbox"/> | 1 | Massage therapy..... | <input type="checkbox"/> | 6 |
| Chinese medicine..... | <input type="checkbox"/> | 2 | Physiotherapy..... | <input type="checkbox"/> | 7 |
| Chiropractic or osteopathy..... | <input type="checkbox"/> | 3 | Reflexology..... | <input type="checkbox"/> | 8 |
| Herbal treatment or homeopathy | <input type="checkbox"/> | 4 | Other practitioner..... | <input type="checkbox"/> | 9 |
| Hypnotherapy | <input type="checkbox"/> | 5 | Don't know..... | <input type="checkbox"/> | 88 |

D15 Suppose now that you had serious backache. Who, if anyone, would you go to first for advice or treatment? Please choose one answer from card 28.

- | | | | | |
|-------------------------------------|--------------------------|----|---|-----------|
| Nobody | <input type="checkbox"/> | 1 | } | GO TO D16 |
| Friends or family | <input type="checkbox"/> | 2 | | |
| Pharmacist/chemist/drug store | <input type="checkbox"/> | 3 | | |
| Doctor..... | <input type="checkbox"/> | 4 | | |
| Nurse | <input type="checkbox"/> | 5 | | |
| The internet/web..... | <input type="checkbox"/> | 6 | | |
| A medical helpline..... | <input type="checkbox"/> | 7 | | |
| Other practitioner | <input type="checkbox"/> | 8 | → | ASK D15a |
| Don't know..... | <input type="checkbox"/> | 88 | → | GO TO D16 |

D15a Which of these types of practitioner do you think you would go to first for advice or treatment? Please choose one answer from this card? [Card 29].

- | | | | |
|--------------------------------------|----------------------------|-------------------------|-----------------------------|
| Acupuncture or acupressure | <input type="checkbox"/> 1 | Massage therapy..... | <input type="checkbox"/> 6 |
| Chinese medicine..... | <input type="checkbox"/> 2 | Physiotherapy | <input type="checkbox"/> 7 |
| Chiropractic or osteopathy..... | <input type="checkbox"/> 3 | Reflexology..... | <input type="checkbox"/> 8 |
| Herbal treatment or homeopathy | <input type="checkbox"/> 4 | Other practitioner..... | <input type="checkbox"/> 9 |
| Hypnotherapy | <input type="checkbox"/> 5 | Don't know..... | <input type="checkbox"/> 88 |

D16 In choosing your regular GP, do you feel that you have.... READ OUT....

- Enough choice 1 Not enough choice 2 Don't know 8

D17 Some people prefer to see the same doctor for all their everyday health problems. Others prefer to see different doctors for different everyday health problems. How about you – do you prefer to see... READ OUT....

- The same doctor for all your everyday health problems 1
 Or different doctors for different everyday health problems?..... 2
 No preference either way 3
 Don't know..... 8

D18 Using this card, how many times in the past twelve months have you consulted a doctor for yourself? Please include contact with any doctors, including specialists and GPs. [Card 30].

- Never Once or twice 3-5 times 6-10 times More than 10 times Don't know
1 2 3 4 5 8

[Card 31] Now please use this card to show how much you agree or disagree with each of these statements:

	Agree Strongly	Agree	Neither agree nor disagree	Disagree	Disagree Strongly	Don't know
D19 Most illnesses cure themselves without having to go to a doctor.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D20 When suffering from illnesses like the common cold, people can cure themselves.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D21 People rely too much on their doctors rather than themselves to keep healthy.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D22 When people are sure about what medicine they need, their doctor should just prescribe it for them.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D23 It is best to follow doctors' orders.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D24 I generally feel a bit disappointed when I leave a doctor's surgery without a prescription.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

[Card 32] Using this card, please indicate how often you think the following applies to doctors in general:

	Never or almost never	Some of the time	About half of the time	Most of the time	Always or almost never	Don't know
D25 Doctors keep the whole truth from their patients.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D26 GPs treat their patients as their equals.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D27 Before doctors decide on a treatment, they discuss it with their patient.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D28 Patients are reluctant to ask their doctor all the questions they'd like to ask.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D29 Doctors are willing to admit their mistakes to their patients.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
D30 Doctors use words or phrases that their patients find difficult to understand.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

I now want to ask you about how citizens and members of society should behave.

[Card 33] Using this card, how much you agree or disagree with each of these statements:

		Agree Strongly	Agree	Neither agree nor disagree	Disagree	Disagree Strongly	Don't know
E1	Citizens should spend at least some of their free time helping others.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
E2	Society would be better off if everyone just looked after themselves.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
E3	Citizens should not cheat on their taxes.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈

[Card 34] How much would you trust the following groups to deal honestly with people like you?

[Note to interviewer: Code 'no experience' as 'don't know']

		Distrust a lot	Distrust	Neither trust nor distrust	Trust	Trust a lot	Don't know
E4	Plumbers, builders, car mechanics and other repair people.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
E5	Financial companies such as banks or insurers.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
E6	Public officials.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈

[Card 35] How often, if ever, have each of these things happened to you in the last five years?

[Note to interviewer: Code 'no experience' as 'don't know']

		Never	Once	Twice	3 or 4 times	5 times or more	Don't know
E7	A plumber, builder, car mechanic or other repair person overcharged you or did unnecessary work.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
E8	You were sold food that was packed to conceal the worse bits.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
E9	A bank or insurance company failed to offer you the best deal you were entitled to.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
E10	You were sold something second-hand that quickly proved to be faulty.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
E11	A public official asked you for a favour or a bribe in return for a service.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈

E12 [Card 36] We have just asked you about experiences of being treated dishonestly over the past five years. Using this card, how worried are you that things like this will happen to you?

Not at all worried	A bit worried	Fairly worried	Very worried	Don't know
<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈

[Card 37] How wrong, if at all, do you consider the following ways of behaving to be? Use this card for your answers. How wrong is.....READ OUT.....

		Not wrong at all	A bit wrong	Wrong	Seriously wrong	Don't know
E13	...someone paying cash with no receipt so as to avoid paying VAT or other taxes?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈
E14	...someone selling something second-hand and concealing some or all of its faults?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈
E15	...someone making an exaggerated or false insurance claim?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈
E16	...a public official asking someone for a favour or bribe in return for their services?.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₈

[Card 38] Using this card, how much you agree or disagree with these statements about how people see rules and laws?

	Agree Strongly	Agree	Neither agree nor disagree	Disagree	Disagree Strongly	Don't know
E17 If you want to make money, you can't always act honestly.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
E18 You should always strictly obey the law even if it means missing good opportunities.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
E19 Occasionally, it is alright to ignore the law and do what you want to.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

[Card 39] Using this card, how much you agree or disagree with these statements about the way economy works these days?

	Agree Strongly	Agree	Neither agree nor disagree	Disagree	Disagree Strongly	Don't know
E20 Nowadays businesses are only interested in making profits and not in improving service or quality for customers.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
E21 Nowadays large firms work together in order to keep their prices unnecessarily high.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
E22 Nowadays customers and consumers are in a better position to protect their interests.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

[Card 40] Suppose you planned to get benefits or services you were not entitled to. Using this card, how many of your friends or relatives do you think you could ask for support?

None	A few of them	Quite a lot	Most or all of them	I would never do it	Refused	Don't know how many
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8	<input type="checkbox"/> 9

[Card 41] How often, if ever, have you done each of these things in the last five years? Use this card for your answers. How often, if ever, have you.... READ OUT.....

	Never	Once	Twice	3 or 4 times	5 times or more	No experience	Don't know
E24 ...kept the change from a shop assistant or waiter knowing they had given you too much?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8
E25 ...paid cash with no receipt so as to avoid paying VAT or other taxes?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8
E26 ...sold something second-hand and concealed some or all of its faults?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8
E27 ...misused or altered a card or document to pretend you were eligible for something you were not?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8
E28 ...made an exaggerated or false insurance claim?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8
E29 ...offered a favour or bribe to a public official in return for their services?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8
E30 ...over-claimed or falsely claimed government benefits such as social security or other benefits?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8

SECTION F

In this section I would like to ask you for a few details about yourself and the others in your household.

F1 How many people in total (including yourself and all children of all ages/live here regularly as members of this household)? _____ persons.

Int. Record respondent on line 1 below and list other members in descending order of age

F2 Record Gender of each person

F3 Record year of birth of each person

F4 Record relationship of each person TO THE RESPONDENT (listed on line 1)

Person Number	Name (or Initial)	(a)		(b) Year of Birth (4 digits)	(c) Relationship to respondent (yellow card)
		Male	Female		
1.	(Respondent)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		0
2.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
3.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
4.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
5.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
6.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
7.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
8.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
9.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
10.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
11.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		
12.		<input type="checkbox"/> ₁	<input type="checkbox"/> ₂		

F5 Which phrase on this card best describes the area where you live? [Int. Show Card 42]

- | | | | | | |
|---------------------------------------|---|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| A big city | The suburbs or outskirts
of a big city | A town or
small city | A country
village | A farm or home in
the countryside | Don't
Know |
| <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₅ | <input type="checkbox"/> ₈ |

F5a Does any member of this household own this dwelling?

NOTE TO INTERVIEWER: Own includes buying with the help of a mortgage or loan.

- Yes.....₁ No₂ Don't know.....₈

F5b How many rooms does this household have the use of, not counting kitchens, bathrooms and toilets?

NOTE TO INTERVIEWER: Also exclude rooms used solely for business, hallways, landings, cloakrooms, store-rooms.

WRITE IN:

--	--

Don't know

88

F6 What is the highest level of education you have completed to date? [Int. Show Card 43]

- | | |
|--|--|
| None/Primary not completed..... | <input type="checkbox"/> ₁ →Go to F7 |
| Primary or equivalent..... | <input type="checkbox"/> ₂ →Go to F6a |
| Intermediate/Junior/Group Certificate or equivalent..... | <input type="checkbox"/> ₃ →Go to F6a |
| Leaving Certificate or equivalent..... | <input type="checkbox"/> ₄ →Go to F6a |
| Diploma/Certificate..... | <input type="checkbox"/> ₅ →Go to F6a |
| Primary degree..... | <input type="checkbox"/> ₆ →Go to F6a |
| Post graduate/higher degree..... | <input type="checkbox"/> ₇ →Go to F6a |
| Don't know..... | <input type="checkbox"/> ₈₈ →Go to F7 |

F6a [Card 44] In which one of these fields or subjects is your highest qualification?

NOTE TO INTERVIEWER: If respondent's highest qualification is in more than one subject code as 01.

General or no specific field.....	01
Art – fine or applied.....	02
Humanities – languages, classics, history, theology, etc.....	03
Technical & engineering, including architecture and planning, industry, craft, building trades, etc.....	04
Agriculture & forestry.....	05
Teacher training or education.....	06
Science, mathematics, computing, etc.....	07
Medical, health services, nursing, etc.....	08
Economics, commerce, business administration, accountancy, etc.....	09
Social & behavioural studies, public administration, media, culture, sport and leisure studies, etc.....	10
Law and legal services.....	11
Personal care services – catering, domestic science, hairdressing, etc.....	12
Public order and safety – police, army, fire services, etc.....	13
Transport and telecommunications.....	14
Don't know.....	88

F7 How many years of full-time education have you completed?

WRITE IN: _____

Don't Know 88

**F8a Using this card, which of these descriptions applies to what you have been doing for the last 7 days? PROMPT: Which others? [Int. Tick all that apply Show Card 45]
IF MORE THAN ONE CODED AT F8a**

F8b (Show Card 45 and tick one only in F8b): And which of these descriptions *BEST* describes your situation (in the last seven days)?

	F8a	F8b
In <u>paid work</u> (or away temporarily) (employee, self-employed, working for your family business)	<input type="checkbox"/> 1	<input type="checkbox"/> 1
In <u>education</u> , even if on vacation (not paid for by employer)	<input type="checkbox"/> 2	<input type="checkbox"/> 2
<u>Unemployed</u> and actively looking for a job	<input type="checkbox"/> 3	<input type="checkbox"/> 3
<u>Unemployed</u> , wanting a job but not actively looking for a job	<input type="checkbox"/> 4	<input type="checkbox"/> 4
Permanently <u>sick or disabled</u>	<input type="checkbox"/> 5	<input type="checkbox"/> 5
<u>retired</u>	<input type="checkbox"/> 6	<input type="checkbox"/> 6
Doing <u>housework, looking after children or other persons</u>	<input type="checkbox"/> 7	<input type="checkbox"/> 7
Other	<input type="checkbox"/> 8	<input type="checkbox"/> 8
Don't know	<input type="checkbox"/> 88	<input type="checkbox"/> 88

ASK IF NOT IN PAID WORK AT F8a. THOSE IN PAID WORK (CODE 01), GO TO F12.

F9 Can I just check, did you do any paid work (of an hour or more) in the last seven days?

Yes..... 1 →Go to F12 No 2 →Go to F10 Don't know..... 8 →Go to F10

F10 Have you ever had a paid job?

Yes..... 1 No 2 →Go to F27 Don't know 8 →Go to F27

F11 In what year were you last in a paid job? _____ yr Don't Know..... 8888

INTERVIEWER: If Respondent currently in work (at F8a or F9), ask F12 to F24 about current job; if not in paid work but had a job in the past (1 at F10), ask F12 to F26 about last job.

F12 In your main job are/were you....READ OUT

An employee..... 1→Go to F14 Self-employed..... 2 Work in own family's business..... 3→Go to F14 Don't know..... 8

F13 How many employees (if any) do/did you have?

WRITE IN number of employees: GO TO F15 Don't Know..... 88

ASK IF EMPLOYEE OR FAMILY BUSINESS OR DON'T KNOW (CODES 1,3,8 AT F12)

F14 Do/did you have a work contract of.....READ OUT

Unlimited duration 1 Limited duration..... 2 No contract 3 Don't know..... 8

ASK ALL WORKING/PREVIOUSLY WORKED

F15 Including yourself, about how many people are/were employed at the place where you usually work/worked?

READ OUT

Under 10 1 10 to 24 2 25 to 99 3 100 to 499 4 500 or more 5 Don't know 8

F16 In your main job, do/did you have any responsibility for supervising the work of other employees?

Yes..... 1 No..... 2→Go to F18 Don't know 8→Go to F18

F17 How many people are/were you responsible for? _____ persons Don't Know..... 88

ASK ALL WORKING/PREVIOUSLY WORKED

CARD 46 I am going to read out a list of things about your working life. Using this card, please say how much the management at your work allows/allowed you....READ OUT AND CIRCLE APPROPRIATE NUMBER ON EACH LINE....

	I have/had no influence										I have/had complete control	Don't know
F18 ...to decide how your own daily work is/was organised?	00	01	02	03	04	05	06	07	08	09	10	88
F19 ...to influence policy decisions about the activities of the organisation?	00	01	02	03	04	05	06	07	08	09	10	88
F19a ...to choose or change your pace of work?	00	01	02	03	04	05	06	07	08	09	10	88

F20 What are/were your total 'basic' or contracted hours each week (in your main job), excluding any paid and unpaid overtime?

_____ hours Don't Know..... 88

F21 Regardless of your basic or contracted hours, how many hours do/did you normally work a week (in your main job), including any paid or unpaid overtime.?

_____ hours Don't Know 8

F22 What is/was the name or title of your main job? Please record as fully as possible

F23 In your main job, what kind of work do/did you do most of the time? Please record as fully as possible

F24 What training or qualifications are/were needed for the job? Please record as fully as possible [Int. If none please write NONE – do not leave blank]

F25 What does/did the firm/organisation you work/worked for mainly make or do? Please record as fully as possible

F26 In the last 10 years have you done any paid work in another country for a period of 6 months or more?

Yes.....₁ No.....₂ Don't know.....₈

ASK ALL

F27 Have you ever been unemployed and seeking work for a period of more than three months?

Yes.....₁ No.....₂→Go to F30 Don't know₈→Go to F30

F28 Has any of these periods lasted for 12 months or more?

Yes.....₁ No.....₂ Don't know₈

F29 Have any of these periods been within the past 5 years?

[Int. Note that these periods refer to the periods of more than 3 months at F27].

Yes.....₁ No.....₂ Don't know₈

ASK ALL

F30 Are you or have you ever been a member of a trade union or similar organisation?

PROMPT IN RELATION TO PRECODES

Yes, currently₁ Yes, previously₂ No.....₃ Don't know.....₈

F31 Please consider the income of all household members and any income which may be received by the household as a whole. What is the *main* source of income in your household? Show [Card 47].

TICK ONE BOX ONLY

Wages or salaries ...	<input type="checkbox"/> ₁	Any other Social Welfare payment...	<input type="checkbox"/> ₆
Income from self-employment excl farming..	<input type="checkbox"/> ₂	Income from investment, savings, insurance or property	<input type="checkbox"/> ₇
Income from farming	<input type="checkbox"/> ₃	Income from other sources...	<input type="checkbox"/> ₈
Pension...	<input type="checkbox"/> ₄	Refused...	<input type="checkbox"/> ₇₇
Unemployment/redundancy benefit...	<input type="checkbox"/> ₅	Don't know...	<input type="checkbox"/> ₈₈

F32 Using this card, if you add up the income from *all* sources, which letter describes your household's total *net* income? If you don't know the exact figure, please give an estimate. Use the part of the card that you know best: weekly, monthly or annual income. [Int Show Card 48]

Total Net Household Income

Per Week	Per Month	Per Year	Category
Less than €40	Less than €150	Less than €1800	J <input type="checkbox"/> ₁
€40 to under €70	€150 to under €300	€1,800 to under €3,600	R <input type="checkbox"/> ₂
€70 to under €120	€300 to under €500	€3,600 to under €6,000	C <input type="checkbox"/> ₃
€120 to under €230	€500 to under €1,000	€6,000 to under €12,000	M <input type="checkbox"/> ₄
€230 to under €350	€1,000 to under €1,500	€12,000 to under €18,000	F <input type="checkbox"/> ₅
€350 to under €460	€1,500 to under €2,000	€18,000 to under €24,000	S <input type="checkbox"/> ₆
€460 to under €580	€2,000 to under €2,500	€24,000 to under €30,000	K <input type="checkbox"/> ₇
€580 to under €690	€2,500 to under €3,000	€30,000 to under €36,000	P <input type="checkbox"/> ₈
€690 to under €1150	€3,000 to under €5,000	€36,000 to under €60,000	D <input type="checkbox"/> ₉
€1,150 to under €1,730	€5,000 to under €7,500	€60,000 to under €90,000	H <input type="checkbox"/> ₁₀
€1,730 to under €2,310	€7,500 to under €10,000	€90,000 to under €120,000	U <input type="checkbox"/> ₁₁
€2,310 or more	€10,000 or more	€120,000 or more	N <input type="checkbox"/> ₁₂
		Refused	<input type="checkbox"/> ₇₇
		Don't Know	<input type="checkbox"/> ₈₈

F32a [Card 49] Around how large a proportion of the household income do you provide yourself?

- None..... 01
- Very small..... 02
- Under a half..... 03
- About half..... 04
- Over a half..... 05
- Very large..... 06
- All..... 07
- Refused..... 77
- Don't know..... 88

F33 Which of the descriptions on this card comes closest to how you feel about your household's income nowadays? [Int. Show Card 50]

- Living comfortably on present income 1
- Coping on present income 2
- Finding it difficult on present income 3
- Finding it very difficult on present income 4
- Don't Know 8

F34 If for some reason you were in serious financial difficulties and had to borrow money to make ends meet, how difficult or easy would that be? [Int. Show Card F51]

- Very difficult 1
- Quite difficult 2
- Neither easy nor difficult 3
- Quite easy 4
- Very Easy 5
- Don't Know 8

ASK ALL F35 INTERVIEWER CODE:

RESP LIVES WITH SPOUSE/PARTNER AT F4, p.13
DOES NOT

1	ASK F36
2	GO TO F49

F36 What is the highest level of education your spouse has achieved? [Int. Show Card 43]

- None/Primary not completed.....1
- Primary or equivalent.....2
- Junior/Inter Cert/Group Cert or equivalent.....3
- Leaving Cert or equivalent.....4
- Diploma/Certificate....5
- Primary degree....6
- Post graduate/higher degree....7
- Don't know....88

F37a Which of the descriptions on this card applies to what he/she has been doing for the last 7 days?

PROMPT: "Which others?" CODE ALL THAT APPLY [Show Card 45]

ASK IF MORE THAN ONE CODED AT F37a

F37b : And which of the descriptions on this card best describes his/her situation (in the last 7 days)?

- | | F37a | F37b |
|--|-----------------------------|-----------------------------|
| In <u>paid work</u> (or away temporarily) (employee, self-employed, working for your family business)..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 1 |
| In <u>education</u> , even if on vacation (not paid for by employer)..... | <input type="checkbox"/> 2 | <input type="checkbox"/> 2 |
| <u>Unemployed</u> and actively looking for a job..... | <input type="checkbox"/> 3 | <input type="checkbox"/> 3 |
| <u>Unemployed</u> , wanting a job but not actively looking for a job..... | <input type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| <u>Permanently sick or disabled</u> | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| <u>Retired</u> | <input type="checkbox"/> 6 | <input type="checkbox"/> 6 |
| Doing <u>housework</u> , looking after children or other persons..... | <input type="checkbox"/> 7 | <input type="checkbox"/> 7 |
| Other..... | <input type="checkbox"/> 8 | <input type="checkbox"/> 8 |
| Don't know..... | <input type="checkbox"/> 88 | <input type="checkbox"/> 88 |

ASK IF NOT IN PAID WORK AT F37a. IF IN PAID WORK (CODE 01), GO TO F39

F38 Can I just check, did he/she do any paid work (of an hour or more) in the last 7 days?

- Yes.....1
- No.....2→Go to F49
- Don't know8→Go to F49

ASK IF PARTNER IN PAID WORK AT F37a OR F38

F39 What is the name or title of his/her main job? Please record as fully as possible

F40 In his/her main job, what kind or work does he/she do most of the time? Please record as fully as possible

F41 What training or qualifications are needed for the job? WRITE IN (IF NONE, WRITE NONE)

F42 In his/her main job is he/sheREAD OUT

An employee..... ₁ Self-employed..... ₂ Work in own family's business..... ₃ Don't know..... ₈

F43 How many employees (if any) does he/she have? _____ employees Don't Know..... ₈₈₈₈₈

F44 In his/her main job, does he/she have any responsibility for supervising the work of other employees?

Yes..... ₁ No..... ₂ → Go to F46 Don't know ₈ → Go to F46

F45 How many people is he/she responsible for? _____ persons Don't Know ₈₈

ASK IF PARTNER IN PAID WORK (code 01 at F37a or code 1 at F38)

CARD 46 I am going to read out a list of things about your partner's working life. Using this card, please say how much the management at his/her work allows him/her....READ OUT AND CIRCLE ONE NUMBER ON EACH LINE....

	He/she has no influence											He/she has complete control	Don't know
F46 ...to decide how his/her own daily work is organised?	00	01	02	03	04	05	06	07	08	09		10	88
F47 ...to influence the policy decisions about the activities of the organisation?	00	01	02	03	04	05	06	07	08	09		10	88

F48 How many hours does he/she normally work a week (in his/her main job)? Please include any paid or unpaid overtime _____ hours Don't Know..... ₈₈₈

FATHER

MOTHER

F49 What was the highest level of education your father completed : [Show Card 43]

- None/Primary not completed ₁
- Primary or equivalent..... ₂
- Junior/Inter Cert/Group Cert or equivalent... ₃
- Leaving Cert or equivalent..... ₄
- Diploma/Certificate..... ₅
- Primary Degree..... ₆
- Post graduate/higher degree..... ₇
- Don't know..... ₈₈

F50 When you were 14 did your father work as:

- Employee..... ₁ Go to F52
- Self Employed..... ₂ Go to F51
- Not working..... ₃ Go to F61
- Father died/absent when respondent 14... ₄ Go to F61
- Don't Know..... ₈ Go to F61

F51 How many employee's did he have?

- None ₁
- 1-24 ₂
- 25 or more ₃
- Don't know ₈₈

F52 Did he have any responsibility for supervising the work of other employees?

- Yes ₁
- No ₂
- Don't know ₈₈

F53 What was the name/title of his main job? Write in:

F55 What was the highest level of education your mother completed: [Show Card 43]

- None/Primary not completed ₁
- Primary or equivalent..... ₂
- Junior/Inter Cert/Group Cert or equivalent..... ₃
- Leaving Cert or equivalent..... ₄
- Diploma/Certificate..... ₅
- Primary Degree..... ₆
- Post graduate/higher degree..... ₇
- Don't know..... ₈₈

F56 When you were 14 did your mother work as:

- Employee ₁ Go to F58
- Self Employed..... ₂ Go to F57
- Not working..... ₃ Go to F61
- Mother died/absent when respondent 14 ₄ Go to F61
- Don't Know ₈ Go to F61

F57 How many employee's did she have?

- None ₁
- 1-24 ₂
- 25 or more ₃
- Don't know ₈₈

F58 Did she have any responsibility for supervising the work of other employees?

- Yes ₁
- No ₂
- Don't know ₈₈

F59 What was the name/title of her main job? Write in

F54 Which of the descriptions on this card best describes the sort of work he did?

F60 Which of the descriptions on this card best describes the sort of work she did?

[Int.SHOW CARD 52 WITH FULL DESCRIPTIONS]

[Int.SHOW CARD 52 WITH FULL DESCRIPTIONS]

- Traditional professional occupations..... 1
- Modern professional occupations..... 2
- Clerical and intermediate occupations..... 3
- Senior Management or administrators..... 4
- Technical/craft occupations..... 5
- Semi-routine manual or service occupations.. 6
- Routine manual or service occupations..... 7
- Middle/junior manager..... 8
- Don't know..... 88

- Traditional professional occupations..... 1
- Modern professional occupations..... 2
- Clerical and intermediate occupations..... 3
- Senior Management or administrators..... 4
- Technical/craft occupations..... 5
- Semi-routine manual or service occupations... 6
- Routine manual or service occupations..... 7
- Middle/junior manager..... 8
- Don't know..... 88

ASK ALL

F61 During the last twelve months, have you taken any course or attended any lecture or conference to improve your knowledge or skills for work?

- Yes..... 1 No..... 2 Don't know 8

F62 Could you tell me your present marital status and since when you have held this status?

Married... <input type="checkbox"/> 1	Separated ... <input type="checkbox"/> 2	Divorced.... <input type="checkbox"/> 3	Widowed... <input type="checkbox"/> 4	Never Married... <input type="checkbox"/> 5	Ref... <input type="checkbox"/> 7	DK... <input type="checkbox"/> 8
Since (yr) _____	Since (yr) _____	Since (yr) _____	Since (yr) _____			
F63 Are you currently living With your husband/wife? Yes..... <input type="checkbox"/> 1 No <input type="checkbox"/> 2		F65 Are you currently living with a partner? Yes... <input type="checkbox"/> 1 No..... <input type="checkbox"/> 2				
Go to F66		F64 Are you currently living with another partner? Yes <input type="checkbox"/> 1 No..... <input type="checkbox"/> 2				

F66 Have you ever lived with a partner without being married to them?

- Yes..... 1 No 2 Refused..... 7 Don't know..... 8

F67 ASK ALL MARRIED, SEPARATED OR WIDOWED (CODES 1,2,4 AT F62). OTHERS GO TO F69

F68 Have you ever been divorced?

- Yes..... 1 No 2 Refused..... 7 Don't know..... 8

ASK ALL F69 INTERVIEWER REFER TO HOUSEHOLD GRID AND CODE: [See Q F4, p13]

F69 RESPONDENT HAS CHILDREN LIVING AT HOME 1 DOES NOT..... 2

F70 Have you ever had any children of your own, step-children, adopted children, foster children or a partner's children living in your household

- Yes..... 1 No..... 2 Don't know 8

F70a Is your mother still alive?

NOTE TO INTERVIEWER: also refers to adoptive or step mother if appropriate

- Yes..... 1 No..... 2 Don't know 8

F70b Is your father still alive?

NOTE TO INTERVIEWER: also refers to adoptive or step mother if appropriate

Yes.....₁ No.....₂ Don't know₈

Now for some questions about balancing different parts of your life.

[Card 53] Firstly, I am going to read out a list of statements about how you may have been feeling recently. For each statement, using this card, I would like you to say how often you have felt like this over the last two weeks. Please use this card.

		All of the time	Most of the time	More than half of the time	Less than half of the time	Some of the time	At no time
G1	I have felt cheerful and in good spirits.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
G2	I have felt calm and relaxed.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
G3	I have felt active and vigorous.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
G4	I have woken up feeling fresh and rested.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆
G5	My daily life has been filled with things that interest me.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆

[Card 54] I am now going to read out some statements about men and women and their place in the family. Using this card, please tell me how much you agree or disagree with the following statements?

		Agree Strongly	Agree	Neither agree nor disagree	Disagree	Disagree Strongly	Don't know
G6	A woman should be prepared to cut down on her paid work for the sake of her family.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G7	Men should take as much responsibility as women for the home and children.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G8	When jobs are scarce, men should have more right to a job than women.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G9	When there are children in the home, parents should stay together even if they don't get along.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G10	A person's family ought to be his or her main priority in life.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈

G11 Interviewer Code:

Interviewer refer to household grid and code

RESPONDENT LIVES WITH HUSBAND/WIFE/PARTNER
(CODE 01 AT F4, P 13)

1. ASK G12

DOES NOT

2. GO TO G29

G12 In which year did you first start living in the same household as your husband/wife/partner?

WRITE IN YEAR

--	--	--	--

OR CODE (Don't know)

8888

[Card 55] Couples sometimes disagree about household and family issues. Using this card, how often do you and your husband/wife/partner disagree about.....READ OUT.....

	Never	Less than once a month	Once a month	Several times a month	Once a week	Several times a week	Every day	Neither partner does paid work	Don't know
G13 how to divide house-work.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 88
G14 money?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 88
G15 the amount of time spent on paid work?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 88

Card 56 Now look at this card. When you and your husband/wife/partner make decisions about the following, who generally gets their way on....READ OUT.....

	Always me	Usually me	About equal or both together	Usually my spouse/partner	Always my spouse/partner	Always or usually someone else	Don't know
G16 ...occasional more expensive purchases for the household?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8
G17 ...how to divide housework?.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 8

G18 Interviewer Code:
Interviewer refer to F37a and F38, p.17 and code

RESPONDENT'S PARTNER IS WORKING (CODE 01 AT F37A OR 01 AT F38, p.17)

PARTNER IS NOT WORKING

Card 57 How often does his/her work involve....READ OUT.....

	Never	Less than once a month	Once a month	Several times a month	Once a week	Several times a week	Every day	Don't know
G19 ...working evenings or nights.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88
G20 ...having to work overtime at short notice.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 88

G21 Card 58 Using this card, how often does his/her work involve working at weekends?

Never	Less than once a month	Once a month	Several times a month	Every week	Don't know
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

G22 I'd now like to talk about housework, as described on the card. By housework, we mean things done around the home, such as cooking, washing, cleaning, care of clothes, shopping, maintenance of property, but not including childcare and leisure activities. On a typical weekday about how many hours in total, do people in your household spend on housework for your home?

Note to Interviewer: Code to Nearest Hour. Accept Estimate

WRITE IN:

Don't know 88

G23 [Card 60] And about how much of this time do you spend yourself? Please use this card.

- None or almost none..... 1
- Up to a quarter of the time..... 2
- More than a quarter, up to a half of the time 3
- More than a half, up to three quarters of the time 4
- More than three quarters, less than all of the time 5
- All or nearly all of the time 6
- Don't know..... 88

G24 [Still Card 60] And about how much of this time does your husband/wife/partner spend on housework? Please use this card.

- None or almost none..... 1
- Up to a quarter of the time..... 2
- More than a quarter, up to a half of the time 3
- More than a half, up to three quarters of the time 4
- More than three quarters, less than all of the time 5
- All or nearly all of the time 6
- Don't know..... 88

G25 Still thinking about the total amount of time people in your household spend on housework at your home, about how many hours are spent doing housework during a typical weekend?

Note to Interviewer: Code to Nearest Hour. Accept Estimate

WRITE IN:

--	--

Don't know

88

G26 [Still Card 60] And about how much of this time do you spend yourself? Please use this card.

- None or almost none..... 1
- Up to a quarter of the time..... 2
- More than a quarter, up to a half of the time 3
- More than a half, up to three quarters of the time 4
- More than three quarters, less than all of the time 5
- All or nearly all of the time 6
- Don't know..... 88

G27 [Still Card 60] And about how much of this time does your husband/wife/partner spend on housework? Please use this card.

- None or almost none..... 1
- Up to a quarter of the time..... 2
- More than a quarter, up to a half of the time 3
- More than a half, up to three quarters of the time 4
- More than three quarters, less than all of the time 5
- All or nearly all of the time 6
- Don't know..... 88

**G28 Interviewer Code:
INTERVIEWER REFER TO G23 & G26 AND CODE**

RESPONDENT DOES NO OR NEARLY NO HOUSEWORK
(CODE 01 AT G23 AND 01 AT G26)

1. GO TO G38

ALL OTHERS

2. GO TO G34

ASK IF RESPONDENT NOT LIVING WITH PARTNER

G29 I'd now like to talk about household as described on the card. By housework, we mean things done around the home, such as cooking, washing, cleaning, care of clothes, shopping, maintenance of property, but not including childcare and leisure activities. On a typical weekday about how many hours in total, do people in your household spend on housework for your home?

Note to Interviewer: Code to Nearest Hour. Accept Estimate

WRITE IN:

--	--

Don't know

88

G30 [Card 60] And about how much of this time do you spend yourself? Please use this card.

- None or almost none..... 1
- Up to a quarter of the time..... 2
- More than a quarter, up to a half of the time 3
- More than a half, up to three quarters of the time 4
- More than three quarters, less than all of the time 5
- All or nearly all of the time 6
- Don't know..... 88

G31 Still thinking about the total amount of time people in your household spend on housework at your home, about how many hours are spend doing housework during a typical weekend?

Note to Interviewer: Code to Nearest Hour. Accept Estimate

WRITE IN:

--	--

Don't know

88

G32 [Still Card 60] And about how much of this time do you spend yourself? Please use this card.

- None or almost none..... 1
- Up to a quarter of the time..... 2
- More than a quarter, up to a half of the time 3
- More than a half, up to three quarters of the time 4
- More than three quarters, less than all of the time 5
- All or nearly all of the time 6
- Don't know..... 88

**G33 Interviewer Code:
INTERVIEWER REFER TO G30 & G32 AND CODE**

RESPONDENT DOES NO OR NEARLY NO HOUSEWORK
(CODE 01 AT G30 AND 01 AT G32)

1. GO TO G38

ALL OTHERS

2. GO TO G34

ASK IF RESPONDENT DOES HOUSEWORK

[Card 61] Thinking about the housework you usually do, how much do you agree or disagree with each of the following statements?

	Agree Strongly	Agree	Neither agree nor disagree	Disagree	Disagree Strongly	Don't know
G34 There are so many things to do at home, I often run out of time before I get them all done.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
G35 I find my housework monotonous.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
G36 I can choose myself when and how to do housework.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
G37 I find my housework stressful.....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

ASK ALL

G38 [Card 62] How well equipped is your home for housework? If, for instance 0 means a home which does not have running water and 10 means a home with a dishwasher, how would you rate your own home?



G39 And apart from housework, do you look after others in your household, such as small children or someone ill, disable or elderly?

Yes.....1 No.....2 Don't know8

G40 [Card 63] Apart from your own children, how often, if at all, do you give unpaid help to a family member or relative outside your household with childcare, other care, housework or home maintenance?

Never 1 Less than once a month 2 Once a month 3 Several times a month 4 Once a week 5 Several times a week 6 Every day 7 Don't know 8

G41 And if you needed help, is there anyone outside your household you can count on to give you unpaid help with childcare, other care, housework or home maintenance?

Yes.....1 No.....2 Don't know8

G42 Interviewer record or ask if necessary:

Can I just check, do any of your children aged 12 or under live here with you? Please also include step, adopted, foster or partner's children.

YES 1. GO TO G43

NO 2. GO TO G45

G43 [Card 64] Thinking about the youngest child in the household, I would like to ask you about his/her usual childcare, not counting lessons in school. By childcare I mean care carried out by anyone other than yourself or your current husband/wife/partner.

Using this card, what is the main type of childcare that the youngest child receives? Please select only one.

- Child's grandparent(s)..... 1
- My ex-husband/ex-wife/ex-partner 2
- Other family member 3
- Other unpaid childcare, looked after at carer's or own home 4
- Paid childcare, looked after at carer's or own home 5
- Free nursery or childcare, looked after somewhere other than home..... 6
- Paid nursery or childcare, looked after somewhere other than home..... 7
- Child manages alone at home..... 8
- No childcare needed (e.g. don't go out to work, always one parent at home
I/my current partner care for children) 9
- Other..... 10
- Don't know..... 88

G44 In your present situation, would you ideally like much more childcare, slightly more childcare, or is the amount you have about right?

- Much more 1
- Slightly more 2
- About right 3
- Would like less childcare 4
- Don't know 8

ASK ALL

G45 Do you have any children, of any age, who do not currently live in your household? Please include any step, adopted, foster or partner's children.

Note to Interviewer: Include only living children

- YES 1. ASK G46
- NO 2. GO TO G57
- Don't know 8

G46 How many children is that?

WRITE IN:

--	--

ASK G47

Don't know

88

GO TO G53

G47 Interviewer Code:

Interviewer refer to G46 and code

RESPONDENT HAS ONE CHILD NOT LIVING IN HOUSEHOLD (G46=1)

1. ASK G48

RESPONDENT HAS 2 OR MORE CHILDREN NOT LIVING IN HOUSEHOLD (G46=2 OR MORE)

2. GO TO G50

G48 Is this a son or a daughter?

Son.....₁ Daughter.....₂ Don't know₈

G49 In which year was he/she born?

WRITE IN YEAR:

--	--	--	--

 GO TO G53

OR CODE Don't know 8888 GO TO G53

ASK IF 2 OR MOR CHILDREN NOT LIVING IN HOUSEHOLD (code 2 at G47)

G50 Thinking about your *oldest* child who does not currently live in your household, in which year was he/she born?

WRITE IN YEAR:

--	--	--	--

 GO TO G53

OR CODE Don't know 8888 GO TO G53

G51 And in which year was your youngest child who does not currently live in your household born?

WRITE IN YEAR:

--	--	--	--

 GO TO G53

OR CODE Don't know 8888 GO TO G53

G52 How many of the children who do not currently live in your household are daughters?

WRITE IN:

--	--

Don't know 88

ASK IF ANY CHILDREN NOT LIVING IN HOUSEHOLD

G53 Card 65 Using this card, please tell me how much financial support you currently provide to your child(ren) or grandchildren who live apart from you? Please include any step, adopted, foster or partner's children.

A lot of support Some support No Support Don't know
₁ ₂ ₃ ₈

G54 Card 66 How much support in everyday housework or care do you provide for your grown up children or grandchildren who live apart from you?

A lot of support	1	}	Ask G55
Some support.....	2		
No support.....	3		
Children living apart not grown up	4		
Don't know.....	8		Ask G55

G55 Still Card 65 And how much financial support do you currently receive from your grown up children or grandchildren who live apart from you? Please use this card.

A lot of support Some support No Support Don't know
₁ ₂ ₃ ₈

G56 Still Card 65 How much support with your everyday housework or care do you currently receive from you're your grown up children or grandchildren who live apart from you? Please use this card.

A lot of support
1

Some support
2

No Support
3

Don't know
8

ALL

G57 Interviewer Code:

Interviewer refer to F3 and code

RESPONDENT BORN AFTER 1958
(F3=1959-1990 inclusive)

1. ASK G58

ALL OTHERS

2. GO TO G59

G58 Card 67 Do you plan to have a child within the next three years? Please use this card.

Note to interviewer: IF RESPONDENT OR RESPONDENT'S PARTNER IS PREGNANT CODE AS 4.

Definitely not
1

Probably not
2

Probably yes
3

Definitely yes
4

Don't know
8

G59 Interviewer Code:

INTERVIEWER REFER TO F8b, P.14 AND CODE: MAIN ACTIVITY OF RESPONDENT

In paid work (Code 01 at F8b, p.14)

1. ASK G60

In education (Code 02 at F8b, p.14)

2. GO TO G94

Retired (Code 06 at F8b, p.14)

3. GO TO G108

All others (Code 03-05, 07-09, 88 at F8b, p.14)

4. GO TO G110

G60 Interviewer Code:

Interviewer refer to F12, p.15 and code

Employee (Code 1 at F12, p.15)

1. ASK G61

All others (Codes 2-8 at F12, p.15)

2. GO TO G81

G61 If someone was applying nowadays for the job you do now, would they need any education or vocational schooling beyond compulsory education?

YES

1. ASK G62

NO

2.
GO TO G63

Don't know

8

G62 About how many years of education or vocational schooling beyond compulsory education would they need?

- | | | | |
|--|----------------------------|--|-----------------------------|
| Less than 1 year (beyond compulsory school)..... | <input type="checkbox"/> 1 | About 6-7 years..... | <input type="checkbox"/> 6 |
| About 1 year..... | <input type="checkbox"/> 2 | About 8-9 years..... | <input type="checkbox"/> 7 |
| About 2 years..... | <input type="checkbox"/> 3 | 10 years or more (beyond compulsory school.... | <input type="checkbox"/> 8 |
| About 3 years..... | <input type="checkbox"/> 4 | Don't know..... | <input type="checkbox"/> 88 |
| About 4-5 years..... | <input type="checkbox"/> 5 | | |

ASK, IF EMPLOYEE AND MAIN ACTIVITY IS PAID WORK (CODE 1 AT G59 AND CODE 1 AT G60)

G63 [Card 68] If somebody with the right education and qualifications replaced you in your job, how long would it take for them to learn to do the job reasonably well?

- | | | | |
|---------------------------------------|----------------------------|---------------------------------------|-----------------------------|
| 1 day or less..... | <input type="checkbox"/> 1 | More than 1 year, up to 2 years..... | <input type="checkbox"/> 6 |
| 2-6 days..... | <input type="checkbox"/> 2 | More than 2 years, up to 5 years..... | <input type="checkbox"/> 7 |
| 1-4 weeks..... | <input type="checkbox"/> 3 | More than 5 years..... | <input type="checkbox"/> 8 |
| 1-3 months..... | <input type="checkbox"/> 4 | Don't know..... | <input type="checkbox"/> 88 |
| More than 3 months, up to 1 year..... | <input type="checkbox"/> 5 | | |

[Card 69] Using this card, please tell me how true each of the following statements is about your current job.

- | | Not at all true | A little true | Quite true | Very true | Don't know |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| G64 There is a lot of variety in my work..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |
| G65 My job requires that I keep learning new things..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |
| G66 My job is secure..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |
| G67 My wage or salary depends on the amount of effort I put into my work..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |
| G68 I can get support and help from my co-workers when needed..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |
| G69 I can decide the time I start and finish work..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |
| G70 My health or safety is at risk because of my work..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 8 |

[Card 70] Still thinking about your current job, how much do you agree or disagree with each of the following statements?

- | | Agree Strongly | Agree | Neither agree nor disagree | Disagree | Disagree Strongly | Don't know |
|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| G71 My job requires that I work very hard..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 8 |
| G72 I never seem to have enough time to get everything done in my job..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 8 |
| G73 My opportunities for advancement are good..... | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 | <input type="checkbox"/> 4 | <input type="checkbox"/> 5 | <input type="checkbox"/> 8 |

G74 How many people is your immediate supervisor or boss responsible for?

- | | | |
|------------------------|----|-------------|
| Have no boss..... | 01 | →GO TO G75a |
| 1-3 persons..... | 02 | } ASK G75 |
| 4-9 persons..... | 03 | |
| 10-19 persons..... | 04 | |
| 20-49 persons..... | 05 | |
| 50-99 persons..... | 06 | |
| 100 or more persons... | 07 | } ASK G75 |
| DK how many..... | 88 | |
| DK who boss is..... | 89 | →GO TO G75a |

G75 Is your immediate supervisor/boss a man or a woman?

Man..... ₁

Woman ₂

ASK, IF EMPLOYEE AND MAIN ACTIVITY IS PAID WORK (CODE 1 AT G 59 AND CODE 1 ATG60)

G75a Card 71 What is the proportion of women at your workplace?

NOTE TO INTERVIEWER: Workplace is the establishment at which or from the respondent works.

None..... ₁

Over a half..... ₅

Very small..... ₂

Very large..... ₆

Under a half... ₃

All..... ₇

About half..... ₄

Don't know..... ₈₈

G76 In what year did you (first) start working for your current employer?

WRITE IN YEAR:

--	--	--	--

OR CODE

Don't know

8888

Card 72 Thinking about the organisation you work for, how much do you agree or disagree with each of the following statements?

	Agree Strongly	Agree	Neither agree nor disagree	Disagree	Disagree Strongly	Don't know
G77 I would turn down another job with higher pay in order to stay with this organisation.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G78 My work is closely supervised.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈

G79 Card 73 Now using this card, how difficult or easy would it be for you to get a similar or better job with another employer if you wanted to?

Extremely Difficult	—————→									Extremely easy	Don't know
00	01	02	03	04	05	06	07	08	09	10	88

G80 [Still Card 73] In your opinion, how difficult or easy would it be for your employer to replace you if you left? Please use this card.

Extremely Difficult	—————→									Extremely easy	Would not be replaced	Don't know
00	01	02	03	04	05	06	07	08	09	10	55	88

ASK IF MAIN ACTIVITY IS PAID WORK AT (code 1 at G59)

G81 How long does it usually take you to get to work on a normal workday? Count travel time and waiting time – but not time taken to shop or drop off/pick up children.

WRITE IN NUMBER OF MINUTES

--	--	--

OR CODE

No commute/work from home 000

Have no permanent workplace/unable to specify time/no normal daily travel time 555

Don't know 888

[Card 74] How often does your work involve.....READ OUT....

	Never	Less than once a month	Once a month	Several times a month	Once a week	Several times a week	Every day	Don't know
G82 ...working evenings or nights.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G83 ...having to work overtime at short notice.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G84 [Card 75] How often does your work involve working at weekends?

Never	Less than once a month	Once a month	Several times a month	Every week	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[Card 76] Using this card, how often do you....READ OUT.....

	Never	Hardly ever	Sometimes	Often	Always	Don't have partner/family)	Don't know
G85 ...keep worrying about work problems when you are not working?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
G86 ...feel too tired after work to enjoy the things you would like to do at home.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
G87 ...find that your job prevents you from giving the time you want to your partner or family?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G88 Interviewer Code:
Interviewer refer to G87 and code

- Code 06 (Don't have partner/family) at G87 1. GO TO G90A
- All others (Codes 01-05 or 88 at G87) 2. ASK G89

[Card 77] How often do you....READ OUT...?

	Never	Hardly ever	Sometimes	Often	Always	Don't have partner/family)	Don't know
G89 ...find that your partner or family gets fed up with the pressure of your job?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G90 ...find it difficult to concentrate on work because of your family responsibilities?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IF MAIN ACTIVITY IS PAID WORK (code 1 at G59, P.27)

G90a Interviewer Code:
Interviewer refer to G60 and code

- Employee (code 1 at G60) 1. ASK G91
- All others (code 2 at G60) 2. GO TO G110

G91 What is your usual gross pay before deductions for tax and insurance?
 [To be recorded in country's own currency and later converted into Euros]

WRITE IN AMOUNT
 In own currency

--	--	--	--

GO TO G93

OR CODE

(Refusal) N77
 (Don't know) N88

ASK G92
ASK G92

G92 And what is your usual net pay (after deductions for tax and insurance)?
 If no 'usual' pay, record pay in last full pay period.
 [To be recorded in Euros]

WRITE IN AMOUNT
 In own currency

--	--	--	--

GO TO G93

OR CODE

(Refusal) N77
 (Don't know) N88

ASK G110
ASK G110

G93 How long a period does that pay cover?

- One hour..... 01
- One day..... 02
- One week..... 03
- Two weeks..... 04
- Four weeks..... 05
- Calendar month..... 06
- Year..... 07
- Don't know..... 88

GO TO G110

ASK IF MAIN ACTIVITY IS STUDY/EDUCATION (code 2 at G59, p.27)
G94 Card 78 At what level are you studying? Please use this card.

- Primary education 1
- Group/Inter/Junior Certificate 2
- Leaving Certificate 3
- Diploma/Certificate (not a degree)..... 4
- Primary/Undergraduate degree (Bachelors degree) 5
- Higher or post-graduate degree (Masters/PhD etc.) 6
- Adult education (not covered by any of the above) 7
- Don't know 88

[Card 79] Thinking about the place where you study, please tell me how much you agree or disagree with each of the following statements. Please use this card.

	Agree Strongly	Agree	Neither agree nor disagree	Disagree	Disagree Strongly	Don't know/Does not apply
G95 The premises are pleasant.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G96 There is usually peace and quiet during classes/lectures.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G97 There are teachers who treat me badly or unfairly.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G98 There are students who treat me badly or unfairly.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G99 Teachers are interested in the students.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G100 When I criticise something, my teachers listen to what I have to say.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G101 There are students in my classes/course(s) who I can ask for help and discuss problems with.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G102 My studies prevent me from spending as much time with my family as I would like to.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G103 Family responsibilities prevent me from spending as much time on my studies as I would like to.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈

G104 [Card 80] Do you feel you get the help you need from the teachers about your course(s)?

Yes always ₁ Yes often ₂ Not very often ₃ No never ₄ Don't know ₈

G105 How many hours do you spend studying during an average term-time week? Include everything to do with study such as classes/lectures, doing homework, writing essays and preparing for tests and exams.

WRITE IN NUMBER OF HOURS
CODE 100 hours or more as 100

--	--	--

OR CODE Don't know 888

G106 And thinking about your studies, do you usually feel you have....READ OUT.....

...far too much to do ₁ A bit too much to do ₂ About the right amount to do ₃ A bit too little to do ₄ Or far too little to do ₅ Don't know ₈

G107 Do you find the pace of your course(s) too slow, about right, or too fast?

Pace too slow.....	1	}	GO TO G110
Pace about right.....	2		
Pace too fast.....	3		
Don't know.....	8		

ASK IF MAIN ACTIVITY RETIRED (code 3 at G59, p.27)

G108 In what year did your retire?

WRITE IN YEAR

--	--	--	--

ASK G109

OR CODE

Don't know

8888

ASK G109

Never had a paid job

0000

GO TO G110

G109 Did you want to retire then or would you have preferred to continue in paid work?

Wanted to retire then ₁

Preferred to continue in paid work..... ₂

Don't know..... ₈

ALL

G110 Interviewer Code:

Interviewer refer to F3 and code

RESPONDENT BORN AFTER 1934
(f3 = 1935 – 1990 inclusive)

1. ASK G111

ALL OTHERS

2. GO TO G117

ASK IF UNDER 70

[CARD 81] For you personally, how important do you think each of the following would be if you were choosing a job? Please use this card.

	Not important at all	Not important	Neither important nor unimportant	Important	Very important	Don't know
G111 A secure job.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G112 A high income.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G113 A job with good promotion opportunities.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G114 A job that enabled you to use your own initiative.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈
G115 A job which allowed you to combine work and family responsibilities.....	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₈

G116 How many hours a week, if any, would you choose to work, bearing in mind that your earnings would go up or down according to how many hours you work?

WRITE IN HOURS

--	--

Don't know

8888

ASK ALL

G117 Thinking back, in what year did you start working in your first job?

(By first job we mean the first job that lasted at least 6 months during which you worked at least 20 hours per week)

WRITE IN YEAR

--	--	--	--

ASK G118

OR CODE

Don't know

8888

ASK G109

Never had a paid job

0000

GO TO END TIME

G118 In total, how many years have you been in paid work?

NOTE TO INTERVIEWER: Count years in full-or part-time work equally.

WRITE IN NUMBER YEARS

--	--	--	--

Don't know

8888

G119 Interviewer Code Gender: Male.....₁ → Go to G125, P.35

Female.....₂ → Go to G120

G120 Interviewer Code:

Interviewer record or refer to F4 and G45 and code

Respondent has son/daughter (children in household
At F4 or outside household at G45)

1. ASK G121

All others

2. GO TO G125

G121 [Card 82] Including any time spent on maternity or parental leave, around how long in total have you spent full-time at home because you were caring for your child(ren)? Please use this card.

- | | | |
|--|--|-------------------|
| No time at home full-time because of children..... | <input type="checkbox"/> ₁ | GO TO G123 |
| Up to six months..... | <input type="checkbox"/> ₂ | } ASK G122 |
| More than 6 months, up to 12 months..... | <input type="checkbox"/> ₃ | |
| More than a year, but up to 2 years..... | <input type="checkbox"/> ₄ | |
| More than 2 years, but up to 4 years..... | <input type="checkbox"/> ₅ | |
| More than 4 years, but up to 10 years..... | <input type="checkbox"/> ₆ | |
| More than 10 years..... | <input type="checkbox"/> ₇ | |
| Don't know..... | <input type="checkbox"/> ₈₈ | GO TO G123 |

G122 Do you think that this has had negative consequences for your occupational career?

IF YES, is that definitely or probably? IF NO, is that definitely not or probably not?

- | | | | | |
|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| Yes
definitely | Yes
probably | No, Probably
not | No, definitely
not | Don't
know |
| <input type="checkbox"/> ₁ | <input type="checkbox"/> ₂ | <input type="checkbox"/> ₃ | <input type="checkbox"/> ₄ | <input type="checkbox"/> ₈ |

G123 [Card 82] And around how long in total, have you spent in part-time work rather than full-time work because you were caring for your child(ren)? Please use this card.

- | | | |
|--|--|-------------------|
| No time spent in part-time work rather than full-time because of children... | <input type="checkbox"/> ₁ | GO TO G125 |
| Up to six months..... | <input type="checkbox"/> ₂ | } ASK G124 |
| More than 6 months, up to 12 months..... | <input type="checkbox"/> ₃ | |
| More than a year, but up to 2 years..... | <input type="checkbox"/> ₄ | |
| More than 2 years, but up to 4 years..... | <input type="checkbox"/> ₅ | |
| More than 4 years, but up to 10 years..... | <input type="checkbox"/> ₆ | |
| More than 10 years..... | <input type="checkbox"/> ₇ | |
| Don't know..... | <input type="checkbox"/> ₈₈ | GO TO G125 |

G124 Do you think that this has had negative consequences for your occupational career?

IF YES, is that definitely or probably? IF NO, is that definitely not or probably not?

Yes definitely <input type="checkbox"/> 1	Yes probably <input type="checkbox"/> 2	No, Probably not <input type="checkbox"/> 3	No, definitely not <input type="checkbox"/> 4	Don't know <input type="checkbox"/> 8
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Now I'd like to ask you a few questions about your interest in and knowledge of politics. If you don't know the answer, please just say so, and we'll move straight on to the next one.

G125 [Card 83] Looking at this card, can you tell me the name of the Minister for Finance?

Dermot Ahern.....	<input type="checkbox"/> 1
Brian Cowan.....	<input type="checkbox"/> 2
Mary Hanafin	<input type="checkbox"/> 3
Mary Harney.....	<input type="checkbox"/> 4
Not sure/don't know.....	<input type="checkbox"/> 8

G126 [Card 84] Can you tell me which political party has SECOND largest number of seats in the Dáil?

Labour.....	<input type="checkbox"/> 1
Fianna Fáil.....	<input type="checkbox"/> 2
Fianna Gael.....	<input type="checkbox"/> 3
Green party.....	<input type="checkbox"/> 4
Not sure/don't know.....	<input type="checkbox"/> 8

G127 [Card 85] Obviously, a person on a low income will pay less total money in income tax than someone on a high income. But do you think that a person on a low income pays..... READ OUT.....

...a bigger <i>proportion</i> of their earnings in income tax than someone on a high income..	<input type="checkbox"/> 1
...the same <i>proportion</i>	<input type="checkbox"/> 2
...or a smaller <i>proportion</i> of their earnings in income tax?.....	<input type="checkbox"/> 3
Not sure/don't know.....	<input type="checkbox"/> 4
(NOT ON CARD) Can't answer question.....	<input type="checkbox"/> 5

G128 Five countries have permanent seats on the Security Council of the United Nations. Can you tell me all or any of the names of any of these five countries?

France.....	<input type="checkbox"/> 1
Great Britain.....	<input type="checkbox"/> 2
Germany.....	<input type="checkbox"/> 3
Russia.....	<input type="checkbox"/> 4
China.....	<input type="checkbox"/> 5
Japan.....	<input type="checkbox"/> 6
Canada.....	<input type="checkbox"/> 7
U.S.....	<input type="checkbox"/> 8
Other country/countries (specify).....	<input type="checkbox"/> 9
Couldn't name any country.....	<input type="checkbox"/> 10
Not sure/Don't know.....	<input type="checkbox"/> 11

G129 [Card 86] Which of the following best describes who is entitled to vote in elections for the Dáil

Residents.....	<input type="checkbox"/> 1
Taxpayers.....	<input type="checkbox"/> 2
Legal Residents.....	<input type="checkbox"/> 3
Citizens.....	<input type="checkbox"/> 4
Not sure/don't know.....	<input type="checkbox"/> 5

G130 What is the maximum number of years allowed between elections for the Dáil?

- 4 years..... ₁
- 5 years..... ₂
- 6 years..... ₃
- 7 years..... ₄
- Not sure/don't know ₅

INTERVIEWER ENTER END TIME:

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(Use 24 hour clock)

**LEAVE SUPPLEMENTARY QUESTIONNAIRE FOR SELF – COMPLETION
AND RETURN IN PREPAID ENVELOPE.**

THESE QUESTIONS ARE FOR THE INTERVIEWER TO ANSWER

QUESTIONS ON THE INTERVIEW AS A WHOLE

J1 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

J2 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

J3 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

J4 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

J5 Was anyone else present, who interfered with the interview?

- Yes 01

ASK J6

- No 02

GO TO J7

J6 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/parent's parent..... ₃
- Other relative..... ₄
- Other non-relative..... ₅
- Don't know..... ₈

J9 If you have any additional comments on the interview, please write them in the space below.

**THANK YOU FOR TAKING THE TIME TO ANSWER THESE QUESTIONS.
END**