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Permit number: 1961/08

Code number:

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County

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Code of settlement

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Surveyor's code

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Participation is voluntary!
Data gathering serves an exclusively statistical purpose!

TURNING POINTS OF THE LIFE-COURSE

(Social, demographic panel survey)
3rd WAVE



	This questionnaire checked by:	Checking date:	Checking person's remarks
In Debrecen/Budapest			
In the DRI			

2008 / 2009

INFORMATION ABOUT THE SURVEY FOR THE RESPONDENT

This survey that is being carried out by the **Demographic Research Institute of HCSO** is part of an international research project and is the continuation of two previous surveys which you participated in in 2001/2002 and 2004/2005, respectively. Since 2001 we have been contacting **15,000 people** every 3–4 years in order to find out how their **life circumstances** have evolved, as well as to reveal the factors that influence **family formation, employment, the preparation for retirement**, as well as the life of **the elderly**. A few months ago we sent you a letter letting you know that we would contact you again with a questionnaire **at the end of 2008**. As the main goal of the research is to follow the **changes** that have occurred during the past 7 years, **it is of utmost importance that the same person answers the questionnaire each and every time!** Your name and address was randomly selected from the **national residence register** in 2001. Your personal information has been treated confidentially since the first survey, according to the **Law on Data Protection** and the **Law on Statistics**. The data were **exclusively used for scientific purposes**. Your name and address will be continuously kept in order for us to be able to contact you again. However, the data will be processed **anonymously**, and the results published in a **summarised form**.

To the letter we recently sent you we attached a **small booklet** containing the most important results of the previous survey conducted 4 years ago. We would like to do the same thing after the present survey, too. The results of the research are being **used** in several ways by **experts** working towards the education of the young, and for the improvement of families' situation and the problems of the elderly.

We would be grateful if you could kindly contribute to the accomplishment of our goals through answering the following questionnaire.

It will take about **an hour** to fill the questionnaire.

BASIC RULES OF QUESTIONING TECHNIQUES

Questions and answers must always be read out word by word!

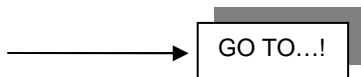
The line means the end of the text you are supposed to read out loudly. The text below the line must not be read out, only the answers marked.

9 – DK, 99 – DK, 9999 – DK

Are to be marked only when the respondent does not know how to answer the question. If the questionnaire does not contain this option, it may be added by hand.

8, 88 – does not wish to answer

The respondent does not wish to answer the question. This option was added to a few sensitive questions, in other cases it may be written by hand.



„Skip sign”: after the answer you are TO GO ON TO the question indicated.

421.: IF THE PERSON LIVES WITH

Instructions written with grey background refer to specific groups of respondents.

PARTNER!

OTHERWISE → GO TO 501!

ONLY ONE REASON MAY BE CHOSEN!

Instructions to interviewers are put in frames.

Let's begin with you and your family circumstances!

101. Sex of respondent

- 1 – male
- 2 – female

102. **Where** were you born? Please name the locality where your mother was living when you were born (not the locality where the hospital was located!)

WRITE THE NAME OF THE SETTLEMENT!

REGISTRATION FROM THE LIST OF CODES

102a–102b.: ASK ONLY THOSE WHO WERE NOT BORN ON THE TERRITORY OF TODAY'S HUNGARY. OTHERWISE: → GO TO 103

102a. In which country is this settlement situated?

Country code:

COUNTRY CODE:	
1 – Romania	6 – other EU member state
2 – Slovakia	7 – other non-EU member state
3 – Serbia	
4 – Ukraine	8 – DOESN'T WISH TO ANSWER
5 – Germany	9 – DK

102b. Since when have you been living in Hungary?

 year

 month

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

103. When were you born precisely?

 year

 month day

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

104. What is your official marital status?

- 1 – unmarried,
- 2 – married and living together,
- 3 – married, separated,
- 4 – widow,
- 5 – divorced?

105. Together with you, how many people live here, in this household (including student living in dormitory, weekly commuter)?

 persons

IF RESPONDENT IS LIVING ALONE: →

GO TO 120!

106. Please provide a few data on these persons! Let's begin with your partner if you have got one ...

WRITE THE CODES INTO THE TABLE!

Serial number		How is he/she related to you?	Sex: 1=male 2=female	Date of birth		In what year did you and [name] first start living in the same household?		What is his / her main activity?
				Year	Month	Year	Month	
1.	Respondent	You do not need to fill it in for the respondent !						
2.	partner	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	children (respondent's or partner's children: code 03–06)	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11.	Other members of household (code: 07–16)	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
16.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
17.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18.		<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

RELATIONSHIP CODES:

PARTNER:
01 – spouse
02 – cohabiting partner
GYERMEK:
03 – common biological child of respondent and his/her mate
04 – respondent's own biological child from his/her earlier relationship
05 – mate's own biological child from his/her earlier relationship
06 – adopted child
OTHER MEMBERS OF THE HOUSEHOLD:
07 – parent
08 – foster parent, not related parent
09 – mother-, father-in-law (also for cohabiting partner)
10 – spouse, partner of child (daughter-, son-in-law)
11 – grandchild, great-grandchild
12 – sibling
13 – sibling (half-, step-)
14 – grandparent , great-grandparent (also for the cohabiting partner)
15 – other relative
16 – not relative

ACTIVITY CODES:

01 – employed, employee
02 – employed, in entrepreneurial status
03 – unemployed
04 – on child-care leave
05 – pensioner
06 – homemaker
07 – child before school age
08 – student
09 – other active
10 – other inactive

107. Is any member of your household including yourself limited in his/her ability to carry out normal everyday activities, because of a physical or mental health problem or a disability?

- 1 – yes
- 2 – no

GO TO 108!

IF THERE IS SUCH A MEMBER, INDICATE THE SERIAL NUMBER FROM THE FIRST COLUMN OF THE TABLE AT QUESTION 106!

107a. Who is/are they?

Serial number of household member:

Serial number of household member:

Serial number of household member:

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

108. Is there a member of the household including yourself who is typically absent for at least three days a week for example because he/she lives in a dormitory or has another flat?

- 1 – yes
- 2 – no

IF THERE IS SUCH A MEMBER, INDICATE SERIAL NUMBER FROM THE FIRST COLUMN OF THE TABLE AT QUESTION 106!

108a. Who is/are they?

Serial number of household member:

Serial number of household member:

Serial number of household member:

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

FROM TABLE 106 FIND THE YEAR OF BIRTH OF THE YOUNGEST CHILD LIVING IN THE HOUSEHOLD (WHETHER IT'S OWN, ADOPTED OR FOSTER) (CODES 3-6)!

- 1 – was born in 2002 or after

GO TO 109!

- 2 – was born between 1995 and 2001

GO TO 15!

- 3 – no children or they were born before 1995

IF RESPONDENT HAS A PARTNER GO TO 118!
IF RESPONDENT HAS NO PARTNER GO TO 120!

109. If you think of your child(ren) younger than 6 years, are they exclusively raised at home or they go to the nursery, day care centre or other institution?

COPY THE SERIAL NUMBER OF THE HOUSEHOLD MEMBER FROM THE FIRST COLUMN OF THE TABLE AT QUESTION 106!

Serial number of household member: <input type="text"/> <input type="text"/>	Form of childcare provision: <input type="text"/>
Serial number of household member: <input type="text"/> <input type="text"/>	Form of childcare provision: <input type="text"/>
Serial number of household member: <input type="text"/> <input type="text"/>	Form of childcare provision: <input type="text"/>
Serial number of household member: <input type="text"/> <input type="text"/>	Form of childcare provision: <input type="text"/>

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

CODES OF THE FORM OF CHILDCARE PROVISION	
1	– Doe not go to any institution, stays at home
2	– goes to the nursery
3	– goes to the kindergarten
4	– goes to other institution (e.g. family day care centre)

110. **This** question refers to the youngest child who does not go to school yet. Has the person who has taken care of this child received any child-care allowance (GYED)?

GYED: IS THE LARGER AMOUNT OF MONEY WHICH DEPENDS ON THE PRE-BIRTH WAGE

1 – yes

2 – no

9 – DK

111–114.: WHEN THE RESPONDENT IS A WOMAN, USE 'YOU', WHEN IT IS A MAN, USE 'THE CHILD'S MOTHER'. IN CASE OF MANY CHILDREN THE YOUNGEST SHOULD BE TAKEN INTO CONSIDERATION!

111. **You**/the child's mother ...

1 – are/is still staying at home with the child, or

GO TO 114!

2 – have/has already resumed your/her work?

112. **How** old was your child when you/the mother resumed your/her work?

years months

9 – DK

99 – DK

IF THE CHILD WAS EXACTLY 3 YEARS OLD WHEN THE MOTHER RESUMED HER WORK → GO TO 114!

IF THE CHILD WAS YOUNGER THAN 3 YEARS OLD WHEN THE MOTHER RESUMED HER WORK:

113a. What was the main reason for which you/the child's mother resumed your/her work before the child became 3 years old? Should there be many reasons, please mention the most important one!

1 – For financial reasons;

2 – she wanted to do other things, too besides child raising; or

3 – it was necessary for her future employment?

7 – other reason

9 – DK

IF THE CHILD WAS OLDER THAN 3 YEARS OLD WHEN THE MOTHER RESUMED HER WORK:

113b. What was the main reason for which you/the child's mother stayed at home even after the child became older than 3 years? Please mention the most important reason!

1 – She wanted to work but did not find a job before

2 – she wanted to work, but did not manage to provide any childcare to the child

3 – she didn't want to work yet for the children's sake

4 – she didn't want to work but for other reason?

7 – other reason

9 – DK

114. Have you/the child's mother done any paid work since being at home with the child?

1 – yes

2 – no

8 – DOESN'T WISH TO ANSWER

9 – DK

115 –117.: IF RESPONDENT OR PARTNER HAS A CHILD BORN IN 1995 OR LATER IN THE HOUSEHOLD (SEE QUESTION 106). OTHERWISE → GO TO 118!

115. I'm going to read out various tasks that have to be done when one lives together with children. Please tell me, who in your household does these tasks?

Choose your answers from CARD NO. 2!

	Always the respondent	Usually the respondent	IF RESPONDENT HAS A PARTNER			Always or usually someone else from the household	Always or usually someone else from outside the household	Children do it by themselves	Not relevant
			Task shared between respondent and partner	Usually the partner	Always the partner				
a./ dressing the children or seeing that the children are properly dressed	1	2	3	4	5	6	7	8	
b./ putting the children to bed and/or seeing that they go to bed	1	2	3	4	5	6	7	8	
c./ staying at home with the children when they are ill	1	2	3	4	5	6	7	8	0
d./ playing with the children	1	2	3	4	5	6	7	8	0
e./ helping the children with homework	1	2	3	4	5	6	7	8	0
f./ taking the children to/from school, or day care centre, kindergarten	1	2	3	4	5	6	7	8	0

116.: IF LIVING TOGETHER WITH SPOUSE/PARTNER. OTHERWISE → GO TO Hiba! A hivatkozási forrás nem található.!

116. How satisfied are you with the way childcare tasks are divided between you and your spouse/partner? Please use CARD NO. 1 and tell me the value on the scale. On this scale 0 means not satisfied at all, 10 means very satisfied.

Scale value: 99 – DK

119. How satisfied are you with the division of household tasks between you and your spouse/partner? Please use **CARD NO. 7**

Scale value: 99 – DK

ASK EVERYONE!

120. Do you regularly help other people with childcare? Please only think of people whom you don't live together with, are not members of your household and don't pay you for this!

1 – yes,
2 – no

GO TO 121!

120a. To whom do you provide this help? **WRITE THE CODE INTO THE CELL 'WHOM'!**

To whom?	Generally how many times a month?
<input type="text"/>	<input type="text"/> 00 – more rarely, than monthly 99 DK
<input type="text"/>	<input type="text"/> 00 – more rarely, than monthly 99 DK
<input type="text"/>	<input type="text"/> 00 – more rarely, than monthly 99 DK
<input type="text"/>	<input type="text"/> 00 – more rarely, than monthly 99 DK
<input type="text"/>	<input type="text"/> 00 – more rarely, than monthly 99 DK

120b. How often do you generally provide help to this person in a month?

CODES OF 'PEOPLE WHOM YOU HELP' TO BE WRITTEN INTO THE CELL 'TO WHOM'	
01 – the spouse or partner living in another household	09 – the respondent's brother
02 – the respondent's mother	10 – the respondent's grand-mother
03 – the respondent's father	11 – the respondent's grandfa-ther
04 – the respondent's mother-in-law	12 – the respondent's grand-child
05 – the respondent's father-in-law	13 – other relative
06 – the respondent's son	14 – a friend
07 – the respondent's daughter	15 – a neighbour
08 – the respondent's sister	16 – another person

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

121. Do you usually make use of paid help in performing household tasks?

1 – yes
2 – no

121a. On the average how many times a month?

122–123.: ASK EVERYONE – SENSIBLY! IF RESPONDENT SURELY DOESN'T HAVE ANY GRANDCHILDREN GO TO 201!

122. Do you have any grandchildren? **IF RESPONDENT ASKS: EVERYONE IS A GRANDCHILD WHOM HE/SHE CONSIDERS TO BE!**

1 – yes

122a. How many grandchildren?

122b. Of them, how many are you related to?

2 – no

GO TO 201!

123. Do you have any great-grandchildren?

1 – yes
2 – no

123a. How many great-grandchildren?

Questions concerning partnership

ASK EVERYONE!

201. Did you live together with a partner in November 2004? (The time of the previous survey?)

1 – yes, in a marriage

GO TO 203!

2 – yes, in a partnership

3 – no

GO TO 207!

202. Did you marry him/her afterwards?

1 – yes

202a. When?

year

month

2 – no

GO TO 205!

203. Are you still married to him/her?

1 – yes, still living together

GO TO 223!

2 – yes, but living apart

3 – no, we've already separated

4 – partner died

204. In what month and year did it happen?

year

month

GO TO 207!

205. Does the relationship still exist?

1 – yes, it does

GO TO THE FIRST COLUMN OF 209!

2 – no, the relationship doesn't exist anymore

3 – the partner died

206. In what month and year did it happen?

year

month

207. Have you lived together with a partner (cohabiting or in a marriage) since then for at least 3 months?

1 – yes

GO TO 208!

2 – no

207a. I will now ask you a few questions about this partnership!

GO THROUGH ALL PARTNERSHIPS BEFORE REACHING THE TIME OF THE SURVEY!

WRITE CODES INTO THE TABLE!

	When did you start cohabiting?		Did you get married? 1 – yes 2 – no	IF THEY DID GET MARRIED When did you get married?		What happened with this marriage? 1 – still married 2 – broke up, moved apart 3 – broke up, divorced 4 – partner died	IF THE MARRIAGE WAS DISSOLVED When did it happen?	
	year	month		year	month		year	month
1.	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

208. Therefore currently you... IF YOU ARE CERTAIN, DON'T ASK, ONLY NOTE DOWN!

- 1 – live with your spouse,
- 2 – live with your partner,
- 3 – have a non-cohabiting partner, or
- 4 – don't have a partner?

GO TO 223!

HAS A PARTNER	HAS A NON-CO-HABITING PARTNER	HAS NO CONSTANT PARTNER
<p>209a. Are you planning to marry your partner in the next 3 years? 1 – definitely not 2 – rather not 3 – rather yes 4 – definitely yes</p> <p>210a. Does your partner wish to marry you? 1 – yes 2 – no 3 – (the partner is) undecided 9 – (the respondent) doesn't know</p> <p style="text-align: center;">↓</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">GO TO 223!</p>	<p>209. b. Are you planning to marry your partner in the next 3 years? 1 – definitely not 2 – rather not 3 – rather yes 4 – definitely yes</p> <p>210. b. Does your partner wish to marry you? 1 – Yes 2 – No 3 – (the partner is) undecided 9 – (the respondent) doesn't know</p> <p>211. b. Are you planning to move in with your partner in the next 3 years? 1 – no 2 – probably not 3 – probably yes 4 – yes</p> <p>212. b. Does your partner wish to move in with you? 1 – yes 2 – no 3 – (the partner is) undecided 9 – (the respondent) doesn't know</p> <p style="text-align: center;">CONTINUE WITH 213!</p>	<p>209c. Are you planning to marry anybody in the next 3 years? 1 – definitely not 2 – rather not 3 – rather yes 4 – definitely yes</p> <p style="text-align: center;">↓</p> <p>211c. Are you planning to move in with anybody in the next 3 years? 1 – no 2 – probably not 3 – probably yes 4 – yes</p> <p style="text-align: center;">↓</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">GO TO 221!</p>

213. When did this relationship begin?

 year month

214. Have you been ever living together for at least 3 month with your present partner?

- 1 – yes
- 2 – no

215. When was your partner born?

 year month

216. How long does it take to get you from your home to where your partner is living at present?

 hours minutes

217. How many times do you meet in person on the average in a month?

 times

- 00 – more rarely than once a month
- 99 – DK

218. Why don't you live together? What is the main reason? **CHOOSE ONLY ONE REASON!**

- 1 – Your decision, _____
- 2 – shared decision, _____
- 3 – your partner's decision, or _____
- 4 – external obstacles prevent you from living together? _____

GO TO 219!

GO TO 220!

219. Why don't you (or both of you) want to live together? Please choose the main reason from **CARD NO. 4!** **CHOOSE ONLY ONE REASON!**

- 1 – the relationship is not stable enough to live together
- 2 – in order to maintain autonomy and independence
- 3 – because of financial reasons
- 4 – living together cannot be accomplished because of the children
- 5 – none of the above reasons; another "main reason"

AFTER THE RESPONSE GO TO 221!

220. What external obstacle do you have in mind? Please choose the main reason from **CARD NO. 5** **CHOOSE ONLY ONE REASON!**

- 1 – because of housing problems
- 2 – because of working conditions
- 3 – because of financial problems
- 4 – because of your partner's family obligations (e.g. married, in divorce)
- 5 – because of other legal problems
- 6 – none of the above reasons; another "main reason"

221. If you were to live together with someone, how would that affect the following? Please use **CARD NO. 6** to answer.

How would living together with someone affect ...	Would get much worse	... worse	... neither worse, nor better	... better	... much better	Would have no effect	DK
a./ your freedom to do what you want?	1	2	3	4	5		9
b./ your employment opportunities?	1	2	3	4	5	7	9
c./ your financial situation?	1	2	3	4	5		9
d./ your sexual life?	1	2	3	4	5	7	9
e./ what your parents think of you?	1	2	3	4	5	7	9
f./ what your friends or people around you think of you?	1	2	3	4	5		9
g./ the joy and satisfaction you get from life?	1	2	3	4	5		9

222. Please mark as they do in schools, from 1 to 5. How true is it to your situation that... ?

How true is it to your situation that... ?	Not at all					Absolutely		DK
	true					Not applicable		
a./ Most of your friends think that you should live together with your partner/with someone.	1	2	3	4	5	7	9	
b./ Your parents think that you should live together with your partner/with someone.	1	2	3	4	5	7	9	
c./ Most of your relatives think that you should live together with your partner/with someone.	1	2	3	4	5	7	9	

223–226. IF RESPONDENT IS MARRIED OR HAS A COHABITING OR NON-COHABITING PARTNER! IF THE RESPONDENT HAS NO RELATIONSHIP → GO TO 301!

223. Please use **CARD NO. 1** to indicate how satisfied you are with your relationship! 0 means that you are not satisfied at all and 10 that you are fully satisfied.

Scale value: 99 – DK

224. Looking at **CARD NO. 7** please tell how often do you disagree over the following issues with your spouse/partner?

How often do you argue over...	Never	Sometimes	Quite often	Very often	Irrelevant	Doesn't know
a./ the sharing of house-work?	1	2	3	4		9
b./ financial matters, spending?	1	2	3	4		9
c./ the use of leisure time?	1	2	3	4		9
d./ relations with friends (if you have any)?	1	2	3	4	7	9
e./ relations with parents (if you have any living parents)?	1	2	3	4	7	9
f./ child-raising issues (if you have child/ren)?	1	2	3	4	7	9
g./ having children?	1	2	3	4		9
h./ common goals, plans?	1	2	3	4		9
i./ drinking alcohol?	1	2	3	4		9
j./ jealousy?	1	2	3	4		9

225. Look at **CARD NO. 8**. Use it to indicate what characterises your behaviour the most when you have an argument with your partner.

	Never	Rarely	Some times	Quite often	Very often	Doesn't wish to answer	DK
a./ You keep your opinion to yourself to avoid a bigger dispute.	1	2	3	4	5	8	9
b./ You discuss the difference calmly.	1	2	3	4	5	8	9
c./ You argue, shout at each other.	1	2	3	4	5	8	9
d./ It comes to blows.	1	2	3	4	5	8	9

226. In the past year have you thought of divorce or breaking off the relationship?

- 1 – No;
- 2 – Yes, I have thought of it;
- 3 – Yes, we have both thought of it;
- 4 – Yes, we are seriously considering the possibility of divorce or breaking off the relationship, or
- 5 – We are divorcing?

9 – DK

FAMILY PLANS, CHILDREN

ASK EVERYONE!

301. Now I shall read out a few statements. What do you think about them? Please mark again as they do in school. 1 means complete disagreement, 5 complete agreement. You may use the intermediate marks, too.

To what extent do you agree with...	Doesn't agree at all					Agrees completely					DK
	1	2	3	4	5	1	2	3	4	5	
a./ Marriage is an outdated institution.	1	2	3	4	5	1	2	3	4	5	9
b./ It is all right for an unmarried couple to live together even if they have no interest in marriage.	1	2	3	4	5	1	2	3	4	5	9
c./ Marriage is a lifetime relationship and should never be dissolved.	1	2	3	4	5	1	2	3	4	5	9
d./ It is better if a couple with an unhappy marriage gets a divorce, even if they have children.	1	2	3	4	5	1	2	3	4	5	9
e./ A woman has to have children in order to be fulfilled.	1	2	3	4	5	1	2	3	4	5	9
f./ A man has to have children in order to be fulfilled.	1	2	3	4	5	1	2	3	4	5	9
g./ A child needs both a father and a mother to grow up happily.	1	2	3	4	5	1	2	3	4	5	9
h./ A woman has the right to have a child as a single parent even if she doesn't want to have a stable relationship.	1	2	3	4	5	1	2	3	4	5	9
i./ When children turn about 18–20 years old they should start to live independently.	1	2	3	4	5	1	2	3	4	5	9
j./ Homosexual couples should be granted the same rights as heterosexual couples.	1	2	3	4	5	1	2	3	4	5	9

**302. In your opinion, what is the ideal age to have the first child nowadays...
 for a woman? for a man?**

years
 00 – never

years
 00 – never

IF UNABLE TO SPECIFY AN AGE, ASK!

IF UNABLE TO SPECIFY AN AGE, ASK!

But, what do you think:
 66 – Rather before the age of 25, or
 77 – between 25 and 30, or
 88 – rather over 30?

 99 – DK

But, what do you think:
 66 – Rather before the age of 25, or
 77 – between 25 and 30, or
 88 – rather over 30?

 99 – DK

BEFORE ASKING QUESTION 303 MAKE SURE YOU IDENTIFY AND MARK THE CATEGORY THE RESPONDENT BELONGS TO!

IF NECESSARY, ASK OR CHECK FROM THE PREVIOUS QUESTIONS!

- WHETHER THE RESPONDENT HAS A PARTNER: question 208
- THE RESPONDENT'S YEAR OF BIRTH: question 103
- IN CASE THE MALE RESPONDENT IS MARRIED, THE SPOUSE'S YEAR OF BIRTH: question 106
- THE YEAR OF BIRTH OF THE NON-COHABITING PARTNER IN CASE OF MALE RESPONDENT: question 215

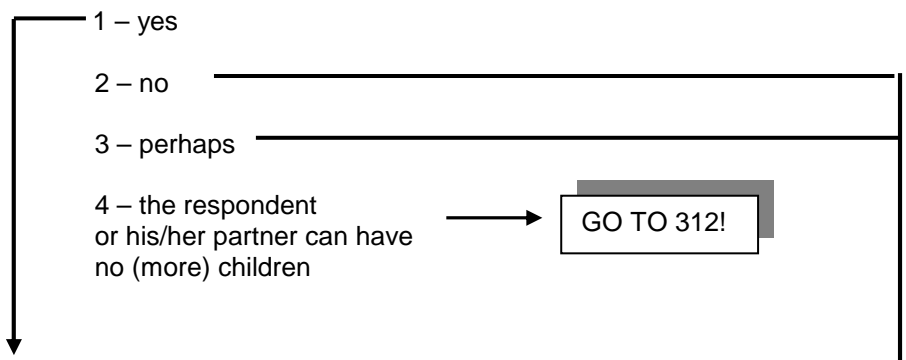
Which category does the respondent belong to?

- 1 – Woman born in 1959 or later → GO TO 303a!
- 2 – Woman born in 1958 or earlier → GO TO 312!
- 3 – Man with a spouse, partner or non-cohabiting partner and whose partner was born in 1959 or later → GO TO 303b!
- 4 – Man with a spouse, partner or non-cohabiting partner and whose partner was born in 1958 or earlier → GO TO 312!
- 5 – Man with no partner and who himself was born in 1949 or later → GO TO 303c!
- 6 – Man with no partner and who was born in 1948 or earlier → GO TO 312!

303. a. To your knowledge, are you currently pregnant? QUESTION FOR THE 1ST CATEGORY!

303b. To your knowledge, is your partner currently pregnant? QUESTION FOR THE 3RD CATEGORY!

303c. Even if you don't have a stable partner, is there any woman who, to your knowledge, is carrying your child? QUESTION OF THE 5TH CATEGORY!



IF RESPONDENT OR THE PARTNER IS PREGNANT, ASK THE QUESTION IN THE FOLLOWING WAY:

304a. We would like to ask you a few things about your pregnancy. Since these questions might be sensitive, if you wish, you may mark your answers on the attached sheet of paper.

HAND OVER THE FAMILY PLANNING PAGE SO THAT THE RED TEXT IS PLACED ABOVE!

Only this side of the paper should be filled. Your answers will be then put into an envelope and sealed, as I have to hand them down in a sealed envelope.

FROM OTHER RESPONDENTS ASK IN THIS WAY:

304b. We would like to ask you a few questions concerning family planning. Since these questions might be sensitive, if you wish, you may mark your answers on the attached sheet of paper.

HAND OVER THE FAMILY PLANNING PAGE SO THAT THE BLACK TEXT IS PLACED ABOVE!

Only this side of the paper should be filled. Your answers will be then put into an envelope and sealed, as I have to hand them down in a sealed envelope.

You only need to fill this in if you or your partner/spouse are/is currently PREGNANT

1. In what month is the child expected to be born? Please write the name of the month.

2. Just before this pregnancy began, did you yourself want to have a/another baby at some time?
Please underline!

yes	not sure	no
-----	----------	----

3. Did this pregnancy occur sooner than you wanted, later than you wanted, or at about the right time?

Please underline and follow the arrow!

About the right time	Sooner	Later	did not plan
----------------------	--------	-------	--------------

If the pregnancy occurred sooner or at about the right time!

4. In what month and year did you first start doing something to help you (your partner/spouse) get pregnant this time? (Since when have you not been using any protection?)

Since 20__ year ____month

5. Did you or your partner/spouse do any of the things listed below to help you (your partner/spouse) get pregnant? Please underline!

- a.) receiving medication
- b.) methods for ascertaining timing of ovulation
- c.) in vitro fertilisation (IVF) or micro-fertilisation (ICSI)
- d.) surgery
- e.) artificial insemination
- f.) other medical treatment

If the pregnancy occurred later or it wasn't planned at all!

6. Did you or your partner /spouse use or do anything to prevent pregnancy at the time it occurred?

Please underline!

did use protection	did not use protection
--------------------	------------------------

Please name all of the things you used or did.

- a.) condom
- b.) pills: **The NAME of the pills:**

- c.) intra-uterine device (coil, loop)
- d.) diaphragm/ cervical cap
- e.) foam/ cream/ jelly/ suppository
- f.) injectables (e.g. Depo-Provera)
- g.) implants (e.g. Implanon)
- h.) hormonal emergency contraception afterwards ("morning-after pill")
- i.) withdrawal
- j.) safe period method (rhythm)

7. Just before this pregnancy began, did your partner/spouse want to have a/another baby?

Please underline!

yes	partner was not sure	no	does not know, haven't talked about it
-----	----------------------	----	--

8. Did this pregnancy occur sooner than your partner/spouse wanted, later than your partner/spouse wanted, or at about the right time?

Please underline!

about the right time	sooner	later	did not plan	does not know, haven't talked about it
----------------------	--------	-------	--------------	--

9. At what age did you have your first sexual intercourse?

_____years

Thank you for your valuable answers, you do NOT have to fill in the next page!

You only need to fill this in if you or your partner/spouse are/is currently NOT PREGNANT

1. As far as you know, is there any physical condition that prevents you or your partner/spouse to get pregnant?

Please underline in both rows. If you don't have a partner, skip the second row!

IN YOUR CASE	there is	there is none	not aware of any such condition
IN YOUR PARTNER'S/SPOUSE'S CASE:	there is	there is none	not aware of any such condition

2. (If the respondent is a woman): Do you intend to get pregnant and have a/another child soon?

(If the respondent is a man): Do you wish your partner/spouse would get pregnant and have a/another child soon?

Please underline and follow the arrow!

would like	would not like		
<p><i><u>If a pregnancy is being planned!</u></i></p> <p>3. Do you or your partner/spouse do any of the things listed below to help you (your partner/spouse) get pregnant? <i>Please underline!</i></p> <p>a.) receiving medication b.) methods for ascertaining timing of ovulation c.) in vitro fertilisation (IVF) or micro-fertilisation (ICSI) d.) surgery e.) artificial insemination f.) other medical treatment</p> <p>4. Did you or your partner/spouse use or do anything before to prevent pregnancy?</p> <p>- yes - no</p> <p>5. In what month and year did you last use or do anything to prevent pregnancy? <i>Please write the year and month below!</i></p> <p>20__ year ____ month</p>	<p><i><u>If a pregnancy is not being planned!</u></i></p> <p>6. Do you or your partner /spouse use or do anything to prevent pregnancy? <i>Please underline!</i></p> <table border="1" style="width: 100%; margin-bottom: 10px;"> <tr> <td style="width: 50%; text-align: center;">are using protection</td> <td style="width: 50%; text-align: center;">are not using any protection</td> </tr> </table> <p>Please name all of the things you use or do.</p> <p>a.) condom b.) pills: The NAME of the pills: _____ c.) intra-uterine device (coil, loop) d.) diaphragm/ cervical cap e.) foam/ cream/ jelly/ suppository f.) injectables (e.g. Depo-Provera) g.) implants (e.g. Implanon) h.) hormonal emergency contraception afterwards ("morning-after pill") i.) withdrawal j.) safe period method (rhythm)</p>	are using protection	are not using any protection
are using protection	are not using any protection		

7. Does your partner/spouse intend to get pregnant and have a/another child soon?

Please underline! If you do not have a partner, skip the row!

THE PARTNER'S/SPOUSE'S OPINION	would like to get pregnant	would not like to get pregnant	does not know, have not talked about it
---------------------------------------	----------------------------	--------------------------------	---

8. At what age did you have your first sexual intercourse?

_____ years

Thank you for your valuable answers, you do NOT have to fill in the next page!

Thank you for your answers, let's now turn back to the traditional questionnaire!

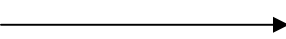
305. **Do** you have any plans and ideas regarding having (another) child within the next three years?

- 1 – definitely yes
- 2 – probably yes
- 3 – probably not
- 4 – definitely not

9 – DK

306. In case you don't have any children within the next 3 years, would you like to have children sometimes later?

- 1 – yes
- 2 – no



GO TO 310!

307. At what age would you like to have your (next) child?

 years

- 88 – doesn't say a number
- 99 – DK

308. Would you prefer to have a girl or a boy as your (first) next child?

- 1 – a girl
- 2 – a boy
- 3 – the gender of the child doesn't matter

309. Taking everything into consideration how many more children would you like to have (above the ones you already have)?

IF RESPONDENT OR HIS PARTNER IS CURRENTLY PREGNANT, ASK THE QUESTION IN THE FOLLOWING WAY:

Except your current pregnancy how many other children would you like to have?

 children

- 88 – doesn't say a number (e.g. "as many as I/we shall have", "as many as God will give us" etc.)
- 99 – DK

AFER THE RESPONSE GO TO 311!

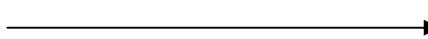
310. Can you imagine a circumstance or change in your life that would make you decide to have a (another) child?

- 1 – yes
- 2 – perhaps
- 3 – no

9 – DK

311. **Was** there any phase in your life when you planned more children than you currently have so far?

- 1 – yes
- 2 – no
- 8 – doesn't wish to answer
- 9 – doesn't remember, DK



311a. **The** reasons mainly responsible for the changes in your childbearing plans, are ...

- 1 – family,
- 2 – financial,
- 3 – professional career related, or
- 4 – health related?

- 7 – other reason
- 8 – doesn't wish to answer
- 9 – DK

**FAMILY REASON: E.G. THE DETERIORATION OF ONE'S MARRIAGE
FINANCIAL REASON: E.G. THE FLAT USED TO BE TOO SMALL**

312. Do you have any children who don't live in the same household as you do? Please only refer to biological and adopted children. Don't include foster children.

1 – yes

2 – no

GO TO 313!

**312a. Please provide some data concerning these children!
WRITE THE CODES INTO THE TABLE!**

	Date of birth		Sex: 1 – male 2 – female	Adopted child?	The biological child of respondent's present mate? IF YES: CODE 1, OTHERWISE: CODE 2!	Since when haven't they lived in the same household?		Where is the child living today? 1 – in this locality 2 – in the country 3 – elsewhere abroad 4 – deceased 9 – no information	
	year	month				year	month		
1. child									→
2. child									→
3. child									→
4. child									→
5. child									→
6. child									→
7. child									→
8. child									→
9. child									→
10. child									→

GO TO THE LAST COLUMN!

313. Have you since 2001 raised another child, not your own, with whom you are no longer living together? (e.g. child from an earlier marriage of a spouse/partner)?

DO NOT INCLUDE THOSE CHILDREN WHOM THE RESPONDENT HAS BROUGHT UP A CHILD AS AN APPOINTED FOSTERER!

1 – yes

2 – no

GO TO 401!

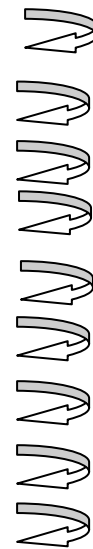
313a. Please give some data on them, too!

	Date of birth		Sex: 1 – male 2 – female	Is the child your present partner's biological child? IF YES, CODE 1, OTHERWISE CODE 2!	Since when have you lived together? year	Since when have you not been living together? year	Where is the child living today? 1 – in this locality 2 – in the country 3 – elsewhere ab 4 – deceased 9 – no information	
	year	month						
1.								→
2.								→
3.								→
4.								→

GO TO THE LAST COLUMN!



	How long does it take you to get to where your child is living at present?		How often do you on the average see each other in person in a month? 00 – more rarely than once a month	How satisfied are you with your relationship with your child? CARD NO. 1
	hours	minutes		
1. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



IF THE CHILD DECEASED: When?	
year	month
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>



	How long does it take you to get to where your child is living at present?		How often do you on the average see each other in person in a month? 00 – more rarely than once a month	How satisfied are you with your relationship with your child? CARD NO. 1
	hours	minutes		
1. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. ch. cont.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



IF THE CHILD DECEASED: When?	
year	month
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Questions regarding the respondent...

401. What is your highest completed level of schooling?

HAND OVER CARD NO. 12. IN CASE OF SEVERAL QUALIFICATIONS ENTER THE HIGHER CODE NUMBER !

- 01 – did not go to school
- 02 – less than 8 years of primary school
(4-6 years of primary school)
- 03 – 8 years of primary school (4 + 4 system also)
- 04 – vocational school (trade school, apprenticeship)
- 05 – specialised secondary school maturity
- 06 – general secondary school maturity
- 07 – higher education after secondary school but not college
- 08 – higher level, accredited qualification programme
- 09 – college diploma
- 10 – university diploma
- 11 – post-graduate degree (PhD, DLA)

GO TO 403!

GO TO 403!

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402. What was the main subject matter of these studies?

WRITE EXACT ANSWER!

403. Now, we are going to talk about your formal studies performed in schools. Please tell me when did you start and finish each level of your education. Let's start from primary school!

WRITE CODES INTO THE TABLE!

	Level of school	Beginning of studies (year)	End of studies (year)	Type of course
1.	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
2.	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
3.	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
4.	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
5.	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
6.	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
7.	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>
8.	<input style="width: 20px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 20px; height: 20px;" type="text"/>

CODES FOR SCHOOL LEVEL:

01 – primary school up to 8 classes
02 – 9 – 10 classes
03 – vocational school (trade school, apprenticeship)
04 – specialised secondary school
05 – general secondary school
06 – higher education after secondary school but not college
07 – higher level, not accredited qualification programme
08 – higher level, accredited qualification programme
09 – college
10 – university
11 – post-graduate programme, (PHD, DLA)

CODES FOR TYPE OF COURSE:

1 – day courses
2 – evening classes
3 – correspondence courses
4 – distance learning
5 – other

404. Do you work at present? Do you perform some kind of paid activity?

1 – yes

2 – no

404a. How, in what form? Please use **CARD NO. 13** to answer!

IN CASE OF MULTIPLE ANSWERS THE MOST IMPORTANT ONE!

- 01 – employed, employee
- 02 – independent, entrepreneur, self-employed owner
- 03 – member of a cooperative or a co-owner of a company
- 04 – performing communal work
- 05 – does work while on pension (include part-time work, casual work!)
- 06 – studies as day student and works regularly
- 07 – studies as day student and works occasionally
- 08 – does work while on child care leave
- 09 – lives on casual work (manual)
- 10 – helping family member (helps in family business)

AFTER THE RESPONSE GO TO 408!

404b. Why not? How can you describe your present situation?

- 01 – old-age pension, own right
- 02 – disability pension (work disability)
- 03 – widow's pension
- 04 – on child-care fee (GYED)
- 05 – on child-care allowance (GYES)
- 06 – on child-raising support (GYET)
- 07 – homemaker
- 08 – student
- 09 – unemployed
- 10 – other

404c. How satisfied are you with the present situation? To answer please use **CARD NO. 7!**

Value on the scale:

99 – NT

405–406.: IF RESPONDENT IS ON CHILD-CARE FEE (GYED), CHILD-CARE ALLOWANCE (GYES), CHILD-CARE SUPPORT (GYET) AND IS NOT WORKING! OTHERWISE: IF RESPONDENT DOES NOT DO ANY WORK, GO TO QUESTION 407, IF RESPONDENT WORKS, GO TO 408!

405. Do you have the opportunity to resume your work immediately after your maternity/parental/childcare leave has ended?

- 1 – yes
- 2 – no
- 9 – DK

406. Do you intend to resume your work immediately after your leave has ended?

- 1 – definitely yes
- 2 – probably yes
- 3 – probably not
- 4 – definitely not
- 9 – DK

407.: IF RESPONDENT DOES NOT PERFORM ANY KIND OF PAID ACTIVITY!

407. In which year did you stop working?

If in 2003 or earlier:

9999 – DK

0000: THE RESPONDENT NEVER WORKED

GO TO 420!

408.: IF RESPONDENT IS CURRENTLY WORKING OR STOPPED WORKING AFTER 2003. OTHERWISE → GO TO QUESTION 420!

408. What is (was) your (last) precise occupation? If more than one, consider the most important one!

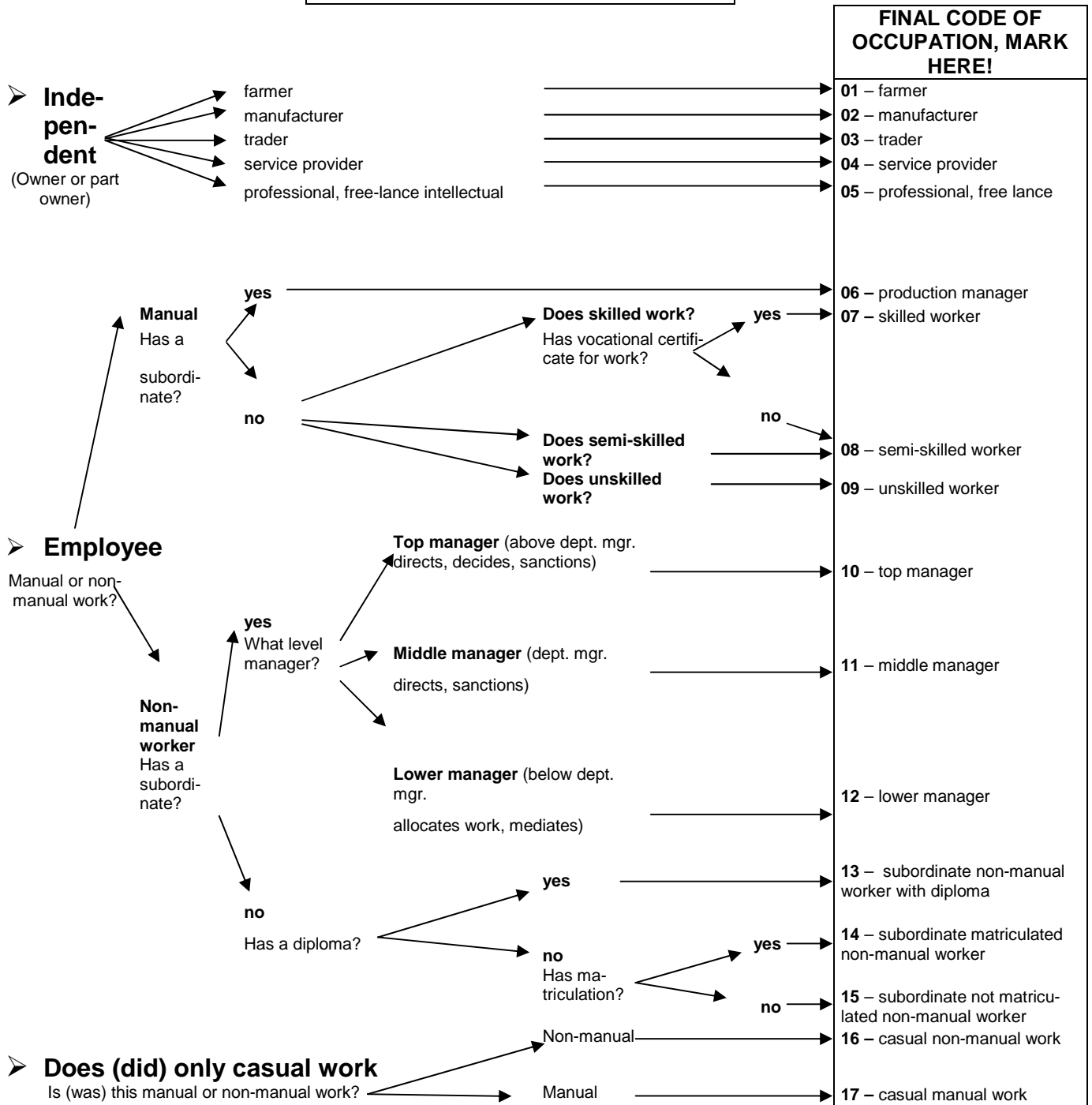
[Empty rectangular box for occupation description]

[Four small empty boxes for FEOR code]

FEOR

408a. Do (did) you do this work independently or as an employee?

FOLLOW THE ARROWS AND UNDERLINE!



[Two small empty boxes]

409.: IF INDEPENDENT, MANAGER

409. How many employees, subordinates do (did) you have?

persons

8888 – no employee/subordinate
9999 – DK

410–419.: FOR ACTIVE WORKERS ONLY, OTHER RESPONDENTS → GO TO QUESTION 420!

410. How many hours did you work at this job last week, including overtime?

hours

99 – DK

411. Of what type is your current work contract, if you have any? Please use **CARD NO. 14 to answer the question!**

- 1 – permanent contract
 - 2 – fixed-term contract
 - 3 – independent, entrepreneur, self-employed owner
 - 4 – issuing bills on a monthly basis
 - 5 – is only valid for one certain work commissioned
 - 6 – temporary (being hired with a temporary worker's certificate)
 - 7 – no written contract
- 9 – DK

412. Which of the following statements best describes where you usually work?

- 1 – I usually work at home,
 - 2 – I usually work part of the week at home and part away from home.
 - 3 – I usually work in one place away from home.
 - 4 – I usually work in a variety of places away from home.
- 9 – DK

413. Aside from working time or hours, which of the following would best describe the regularity or irregularity of your work?

- 1 – continuous through much of the year
 - 2 – seasonal
 - 3 – intermittent
 - 4 – casual
 - 5 – other
- 9 – DK

414. When do you usually work at this job? Please choose your answer from **CARD NO. 15!**

- Regularly...
- 01 – during the daytime
 - 02 – in the evening
 - 03 – at night
 - 04 – early in the morning
 - 05 – over the weekend
 - 06 – the working hours change periodically
 - 07 – two or more working periods each working day
 - 08 – 24x48
- Irregularly...
- 09 – work on call
 - 10 – each week according to the agreement
 - 11 – irregular working times
 - 12 – some other arrangement of working time
- 99 – DK

415. How satisfied are you with your current job? Please use **CARD NO. 1** and tell me the value on the scale!

Value on the scale:

99 – DK

416. And how satisfied are you with job security? Please use **CARD NO. 16** and tell me the value on the scale!

Value on the scale:

99 – DK

417. Do you currently earn money from an additional job or business?

- 1 – yes
- 2 – no
- 8 – doesn't want to answer
- 9 – DK

417a. How many hours did you work last week in your additional job or business?

hours

99 – NT

418. How often has each of the followings happened to you during the past three months? Please use **CARD NO. 17**

How often did it happen that... ..	Several times a week	Several times a month	Less often than that	Never	Does not know
a./ you have come home from work too tired to do the chores that needed to be done at home.	1	2	3	4	9
b./ it has been difficult for you to fulfil your family responsibilities because of the amount of time you spent on your job.	1	2	3	4	9
c./ you could not properly fulfil your work at the workplace, because you were too tired from the chores you had had at home the previous day.	1	2	3	4	9
d./ you have found it difficult to concentrate at work because of your family responsibilities.	1	2	3	4	9

419: IF RESPONDENT WORKS AS AN EMPLOYEE! OTHERWISE → GO TO 421!

419. Does your employer allow regular flexible time arrangements for personal reasons, like for adapting to children's, sick family members' schedules?

- 1 – yes
- 2 – no

9 – DK

420.: IF RESPONDENT DOES NOT DO ANY PAID WORK. OTHERWISE → GO TO 421 !

420. Are you planning to take a job in the future?

- 1 – yes, has already found a job and is about to start soon
- 2 – yes, looking for work at present, and if a suitable job is found would start next week
- 3 – szándékában áll munkát vállalni, de csak a távolabbi jövőben, vagy
- 4 – not planning to take a job in the future

9 – DK

421. On CARD NO. 18, there are some needs related to work. Please look at them and tell me which ones you personally think are important in a job? Please choose three and mention them in the order of importance!

- 01 – good pay
- 02 – not too much pressure
- 03 – good job security
- 04 – a job respected by people in general
- 05 – good working hours
- 06 – an opportunity to use initiative
- 07 – generous holidays
- 08 – a job in which you feel you do worthwhile, meaningful work
- 09 – a responsible job
- 10 – a job that is interesting
- 11 – a job that meets one's abilities

Most important:

Second most important:

Third most important:

422.: DEPENDING ON THE RESPONDENT'S AGE !!!

IF RESPONDENT WAS BORN IN 1943 OR EARLIER (IS 65-YEAR-OLD OR OLDER) → GO TO 501!

422a: IF RESPONDENT WAS BORN BETWEEN 1944 AND 1958 (IS AGED 50–64 YEARS)

422a. Now looking back to January 1989, tell me please whether you've been working continuously or not since the 1st of January, 1989. Please consider only those activities that lasted for at least 3 months. Let's go through every job you've had. For this please use the types of activities written on CARD NO. 19. Which activity describes best what you were doing in January 1989? In case of multiple activities (for example if you were both studying and working) please choose the one you consider to be the most important!

422b: IF RESPONDENT WAS BORN IN 1959 OR LATER (IS AGED 49 YEARS OR YOUNGER)

422b. Now, we are going to talk about your work and studies since your 16th birthday. We are only interested in activities that lasted at least 3 months. Please choose from the activities on CARD NO. 19. Which activity best describes what you've been mainly doing since the age of 16? If more than one activity applies to a certain period of time, for example, you were working and studying at the same time, please choose the activity which you consider of bigger importance!

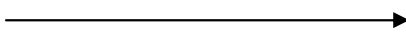
	Which of the items on the card best describes what you were mainly doing? And next? CARD NO. 19 Activity codes	When did this period of activity start?		When did this period of activity end? IF CURRENTLY EXISTS, CODE ACTUAL DATE!	
		year	month	year	month
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
16.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
17.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ACTIVITY CODES:	
WORKED:	DID NOT WORK:
01 – was an employee	05 – had old-age pension on own right or widow's pension
02 – was self-employed or independent	06 – was on disability pension (work disability)
03 – was a helping family member	07 – was on child-care fee (GYED), child-care allowance (GYES), child-care support (GYET), any other form of maternity leave (e.g. TGYÁS)
04 – lived on casual work	08 – was a student
	09 – was unemployed
	10 – was a homemaker
	11 – was on military service
	12 – other inactivity status

423. **Was** there any period in your life when you were only having a part-time job, that is you were working for no more than 30 hours per week? Please only consider periods longer than 3 months.

1 – yes

2 – no



GO TO 501!

423a. When did you first work part-time? When did that job begin? And when did it end? And when did the second such period of part-time job start?

GO THROUGH ALL SUCH PERIODS!

WRITE THE CODES INTO THE TABLE!

	When did the first period of part-time work start?		When did this period of part-time work end?	
	year	month	year	month
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Questions regarding the spouse, cohabiting or non-cohabiting partner!

501–511.: IF RESPONDENT HAS A SPOUSE, A COHABITING OR NON-COHABITING PARTNER. OTHERWISE → GO TO 601!

501. Where was your partner born? Please tell me the name of the locality where your partner's mother was living when your partner was born! (Not the name of the locality where the hospital was located)

WRITE THE NAME OF THE LOCALITY INTO THE BOX!

USE THE
LOST OF
CODES

501a–501b: IF THE PARTNER WAS BORN OUTSIDE THE PRESENT TERRITORY OF HUNGARY. OTHERWISE → GO TO 502!

501a. In which country is that locality situated today? Country code:

COUNTRY CODE:	
1 – Romania	6 – other EU member state
2 – Slovakia	7 – other non-EU member state
3 – Serbia	
4 – Ukraine	8 – DOESN'T WISH TO ANSWER
5 – Germany	9 – DK

501b. Since when has the partner been living in Hungary? year month (9999 – DK, 99 – DK)

502. What is your partner's highest school qualification.

HAND OVER CARD NO. 12! IN CASE OF SEVERAL QUALIFICATIONS ENTER THE HIGHER CODE NUMBER !

- 01 – did not go to school
- 02 – less than 8 years of primary school (4-6 years of primary school)
- 03 – 8 years of primary school (4 + 4 system also)
- 04 – vocational school (trade school, apprenticeship)
- 05 – specialised secondary school maturity
- 06 – general secondary school maturity
- 07 – higher education after secondary school but not college
- 08 – higher level, accredited qualification programme
- 09 – college diploma
- 10 – university diploma
- 11 – post-graduate degree (PhD, DLA)
- 99 – DK

503. Does the spouse/cohabiting or non-cohabiting partner currently work or do some form of paid activity?

1 – yes

2 – no

503a. How, in what form? Please use CARD NO. 13 to answer!

IN CASE OF MULTIPLE ANSWERS THE MOST IMPORTANT ONE!

- 01 – employed, employee
- 02 – independent, entrepreneur, self-employed owner
- 03 – member of a cooperative or a co-owner of a company
- 04 – performing communal work (community service)
- 05 – does work while on pension (include part-time work, casual work!)
- 06 – studies as day student and works regularly
- 07 – studies as day student and works occasionally
- 08 – does work while on child care leave
- 09 – lives on casual work (manual)
- 10 – helping family member (helps in family business)
- 99 – DK

503b. Why not? How can you describe your partner's present situation?

- 01 – old-age pension, own right
- 02 – disability pension (work disability)
- 03 – widow's pension
- 04 – on child-care fee (GYED)
- 05 – on child-care allowance (GYES)
- 06 – on child-raising support (GYET)
- 07 – homemaker
- 08 – student
- 09 – unemployed
- 10 – other
- 99 – DK

503c. In which year did your partner stop working?

0000: THE PARTNER NEVER WORKED

AFTER THE RESPONSE GO TO 601!

504-511.: ONLY FOR THOSE WHOSE PARTNER IS CURRENTLY WORKING. OTHERWISE GO TO 601!

504. What is (was) his/her (last) precise occupation? If more than one, consider the main one!

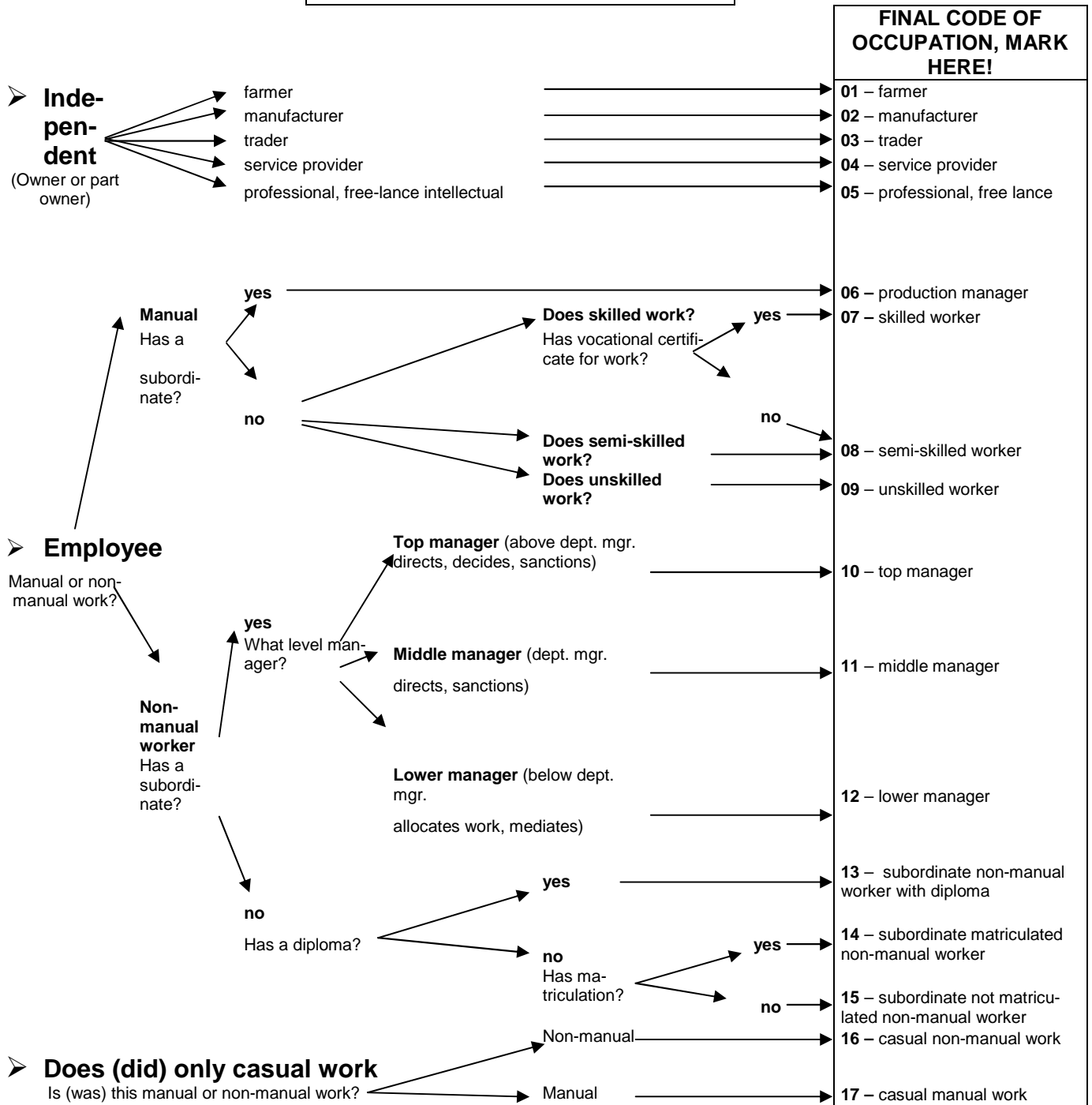
[Empty box for occupation description]

[Four empty boxes for FEOR code]

FEOR

504a. Does (has) your partner/spouse do(ne) this work independently or as an employee?

FOLLOW THE ARROWS AND UNDERLINE!



[Two empty boxes]

505.: IF THE PARTNER IS INDEPENDENT, MANAGER (SEE QUESTION 504a: codes 01-06, 10-12)

505. How many employees, subordinates does your partner have?

□□□□ persons

8888 – no employee/subordinate
9999 – DK

□□□□

506. How many hours did your partner work at this job last week, including overtime?

□□ hours

99 – DK

□□

507. Of what type is your partner's current work contract, if he/she has any? Please use **CARD NO. 14** to answer the question!!

- 1 – permanent contract
 - 2 – fixed-term contract
 - 3 – independent, entrepreneur, self-employed owner
 - 4 – issuing bills on a monthly basis
 - 5 – is only valid for one certain work commissioned
 - 6 – temporary (being hired with a temporary worker's certificate)
 - 7 – no written contract
- 9 – DK

□

508. Which of the following statements best describes where your partner usually works ...

- 1 – usually works at home;
 - 2 – usually works part of the week at home and part away from home;
 - 3 – usually work in one place away from home;
 - 4 – usually work in a variety of places away from home.
- 9 – DK

□

509. Aside from working time or hours, which of the following would best describe the regularity or irregularity of your partner's work?

- 1 – continuous through much of the year
 - 2 – seasonal
 - 3 – intermittent
 - 4 – casual
 - 5 – other
- 9 – DK

□

510. When do you usually work at this job? Please choose your answer from **CARD NO. 15**!

- Regularly...
- 01 – during the daytime
 - 02 – in the evening
 - 03 – at night
 - 04 – early in the morning
 - 05 – over the weekend
 - 06 – the working hours change periodically
 - 07 – two or more working periods each working day
 - 08 – 24x48
- Irregularly...
- 09 – work on call
 - 10 – each week according to the agreement
 - 11 – irregular working times
 - 12 – some other arrangement of working time
- 99 – DK

□□

511. Does your partner currently earn money from an additional job or business?

- 1 – yes →
- 2 – no
- 8 – doesn't want to answer
- 9 – DK

511a. How many hours did you work last week in your additional job or business?

□□ hours

99-DK

□

□□

Preparation for getting elderly, years of retirement

601. To what extent do you agree or disagree with each of the following statements?
 If you strongly agree choose 5, if you strongly disagree, choose 1. You may of course use intermediate marks, too.

To what extent do you agree with the fact that...	Strongly disagree					Strongly agree	DK
	1	2	3	4	5		
a./ Grandparents should look after their grandchildren if the parents of these grandchildren are unable to do so.	1	2	3	4	5		9
b./ Parents ought to provide financial help for their adult children when the children are having financial difficulties.	1	2	3	4	5		9
c./ If their adult children were in need, parents should adjust their own lives in order to help them	1	2	3	4	5		9

602. In your opinion, from what age can a person be regarded as old?

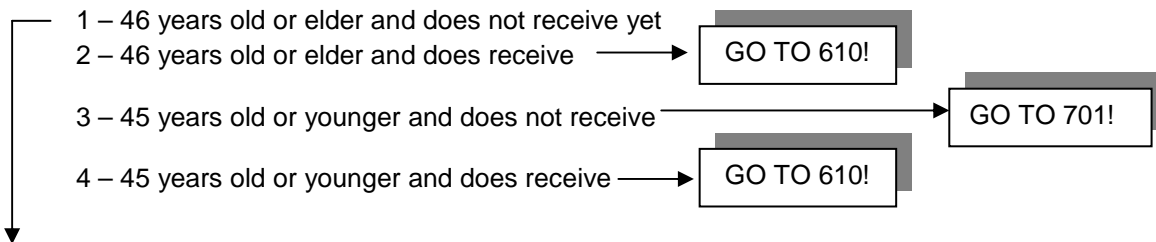
years

99 – DK

603. Do you receive some kind of pension?

ATTENTION! IF HE/SHE RECEIVES PENSION FOR BEING A WIDOW(ER) OR ORPHAN, HE/SHE IS NOT UNDERSTOOD AS A PENSIONER. PLEASE ONLY TAKE THE FOLLOWING FORMS OF PENSION INTO ACCOUNT:

- OLD-AGE PENSION IN YOUR OWN RIGHT,
- EARLY RETIREMENT, PRE-RETIREMENT PENSION IN YOUR OWN RIGHT
- DISABILITY PENSION (IRRESPECTIVE OF %), REHABILITATION ALLOWANCE
- WIDOW'S PENSION ONLY IF RESPONDENT HAS REACHED RETIREMENT AGE!

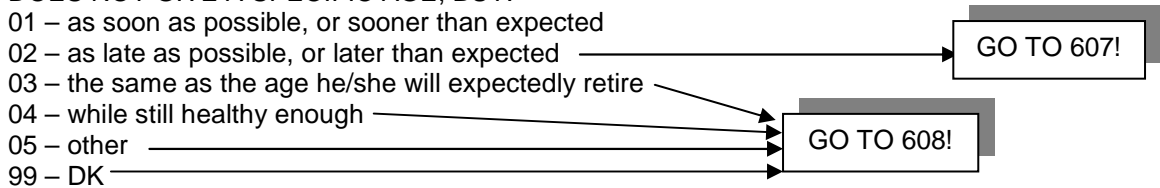


604. If it depended on you, at what age would you retire?

years

IF SAYS 62 YEARS OR MORE → GO TO 607
IF SAYS 61 YEARS OR LESS → GO TO 605

DOES NOT GIVE A SPECIFIC AGE, BUT:



605–606: IF WOULD LIKE TO RETIRE SOONER. OTHERWISE → GO TO 607!

605. Why would you like to retire sooner than the retirement age?

WRITE DOWN, THEN MARK BELOW THE LINE!

MULTIPLE ANSWERS ALLOWED (MAX. 3.)!

- | | |
|---|--|
| <ul style="list-style-type: none"> 01 – as a young pensioner it would be easier to find a job 02 – would be free of being unemployed or the threat of becoming unemployed 03 – would like to earn while on pension 04 – does not like workplace, job 05 – would like to do different kind of work (e.g. enterprise, agricultural work) | <ul style="list-style-type: none"> 06 – tired 07 – health deteriorated 08 – would like to spend more time with the family 09 – would like more free time, tired of restrictions 10 – does not need to have a job 11 – other 99 – don't know |
|---|--|

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

606. Have you already requested a pension?

- 1 – yes →
- 2 – no

606a. What kind of pension have you requested?

- 1 – old-age pension in your own right
- 2 – disability pensions
- 3 – widow's pension
- 4 – other
- 9 – DK

<input type="checkbox"/>
<input type="checkbox"/>

AFTER THE ANSWER GO TO 608!

607.: IF WOULD LIKE TO RETIRE LATER. OTHERWISE → GO TO 608!

607. Why would you like to postpone retirement beyond official retirement age?

WRITE DOWN, THAN MARK BELOW THE LINE!

MULTIPLE ANSWERS ALLOWED (MAX. 3.)!

- 1 – for financial reasons (need the earnings)
- 2 – likes the job, workplace, occupation, would like to work for a long while
- 3 – when sent into retirement will still not be too old to work
- 4 – would be bored as a pensioner: would not be satisfied by home life, the family and household
- 5 – would feel lonely, superfluous as a pensioner, life would be without purpose
- 6 – you are only valued as long as you work and have a job
- 7 – other
- 9 – DK

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

608–609.: ASK EVERY NON-PENSIONER OVER 46!

608. Are you planning, when on pension ...

Are you planning, when on pension...	Yes, am planning	Per-haps	Not planning	Don't know
a./ to do work with informal hours (e.g. home work, casual, seasonal, contract work)?	1	2	3	9
b./ to begin a business of some kind?	1	2	3	9
c./ to take full-time or part-time work as an employee?	1	2	3	9
d./ to do work of an agricultural nature to supplement your income?	1	2	3	9
e./ to play a considerable part in caring for and supervising children, grandchildren?	1	2	3	9

609. All things considered

- 1 – are you expecting a pleasant, calm, enjoyable old age, or
- 2 – on a period full of problems and difficulties?

- 3 – other: yes and no, it depends on how things turn out
- 9– DK

AFTER THE RESPONSE GO TO 701!

QUESTIONS 610–618: ASK ONLY PENSIONERS AND THOSE WHO RECEIVE SOME FORM OF PENSION!

610. As a pensioner, what type of benefit do you receive?

ATTENTION! IF HE/SHE RECEIVES A TRANSITORY PENSION FOR BEING A WIDOW(ER) OR ORPHAN, HE/SHE IS NOT UNDERSTOOD AS A PENSIONER.

- 1 – old-age pension in your own right
- 2 – pre-retirement scheme benefit
- 3 – early retirement
- 4 – pre-retirement
- 5 – disability pension
- 6 – rehabilitation allowance

611. When did you retire, since which have you been receiving this benefit?

year
9999 – DK

612. Before retirement for how many years altogether you had been employed?

years

99 – DK

613. Did that time...

- 1 – suit your ideas, or
- 2 – would you have liked to retire earlier, or
- 3 – would you have liked to remain active?

- 9 – DK

616–618.: ASK EVERY PENSIONER AND RECEIVER OF ANY FORM OF PENSION!

616. Do you currently work for income?

- 1 – yes, works continuously, in employment or on contract
- 2 – yes, works occasionally, not regularly
- 3 – not engaged in income-earning work

- 8 – doesn't wish to answer
- 9 – DK

617. I am going to list a few kinds of activities. Please indicate which of these are your everyday "task", something you do regularly, practically every day, and which are not.

Does this belong to your everyday task...	Is a task	Not a task	Irrelevant
a./ household work (cooking, washing, housework, shopping),	1	2	7
b./ agricultural work, gardening, animal husbandry,	1	2	7
c./ care of pets (e.g. dog, cat, bird, fish, etc.),	1	2	7
d./ work around the house, repairs, maintenance,	1	2	7
e./ care, supervision of children, grandchildren,	1	2	7
f./ work for the household or farm of the children, grandchildren,	1	2	7
g./ nursing a sick person, caring for someone,	1	2	7
h./ working outside the household and family (to complement the pension)	1	2	7
i./ public activity, voluntary work (in a civil organisation, party, local government, etc.)?	1	2	7

618. All things considered, how would you characterise your present situation and life? Is this...

- 1 – rather a pleasant, balanced, enjoyable period of your life, or
- 2 – a period full of problems and difficulties?

- 3 – other, both are true
- 9 – DK

Questions regarding income and financial situation

701. On the average what is your monthly net income?

thousand HUF/month

8888 – DOESN'T WISH TO ANSWER
9999 – DK

701.: IF DOES NOT KNOW / DOES NOT WISH TO ANSWER!

701a. We process the data of this questionnaire without names, using statistical methods. Can you say in which of the categories on CARD NO. 21 you belong?

- 01. 30,000 HUF or less
- 02. 31,000 – 50,000 HUF
- 03. 51,000 – 70,000 HUF
- 04. 71,000 – 90,000 HUF
- 05. 91,000 – 110,000 HUF
- 06. 111,000 – 130,000 HUF
- 07. 131,000 – 150,000 HUF
- 08. 151,000 – 200,000 HUF
- 09. 201,000 – 250,000 HUF
- 10. 251,000 – 300,000 HUF
- 11. 301,000 – 350,000 HUF
- 12. 351,000 – 400,000 HUF
- 13. 401,000 – 450,000 HUF
- 14. 451,000 – 500,000 HUF
- 15. 501,000 and above
- 88 – REFUSES TO ANSWER
- 99 – DOES NOT KNOW

IF THE RESPONDENT IS THE ONLY MEMBER OF THE HOUSEHOLD: GO TO 704!

702.: IF RESPONDENT HAS A COHABITING SPOUSE/PARTNER. OTHERWISE → GO TO 703!

702. On the average what is the monthly net income of your spouse / partner?

thousand HUF/month

8888 – DOES NOT WISH TO ANSWER
9999 – DK

702a.: IF DOES NOT KNOW / DOES NOT WISH TO ANSWER!

702a. We process the data of this questionnaire without names, using statistical methods. Can you say in which of the categories on CARD NO. 21 you belong?

- 01. 30,000 HUF or less
- 02. 31,000 – 50,000 HUF
- 03. 51,000 – 70,000 HUF
- 04. 71,000 – 90,000 HUF
- 05. 91,000 – 110,000 HUF
- 06. 111,000 – 130,000 HUF
- 07. 131,000 – 150,000 HUF
- 08. 151,000 – 200,000 HUF
- 09. 201,000 – 250,000 HUF
- 10. 251,000 – 300,000 HUF
- 11. 301,000 – 350,000 HUF
- 12. 351,000 – 400,000 HUF
- 13. 401,000 – 450,000 HUF
- 14. 451,000 – 500,000 HUF
- 15. 501,000 and above
- 88 – REFUSES TO ANSWER
- 99 – DOES NOT KNOW

703. Look at **CARD NO. 22**! Please tell me what the combined average monthly (net) income of your household is, including your own income. Besides the salaries and pension please take other sources of income into account, too.

thousand/month

8888 – DOES NOT WISH TO ANSWER
9999 – DK

703a.: IF DOES NOT KNOW / DOES NOT WISH TO ANSWER!

703a. We process the data of this questionnaire without names, using statistical methods. Can you say in which of the categories on **CARD NO. 21 you belong?**

- 01. 30,000 HUF or less
- 02. 31,000 – 50,000 HUF
- 03. 51,000 – 70,000 HUF
- 04. 71,000 – 90,000 HUF
- 05. 91,000 – 110,000 HUF
- 06. 111,000 – 130,000 HUF
- 07. 131,000 – 150,000 HUF
- 08. 151,000 – 200,000 HUF
- 09. 201,000 – 250,000 HUF
- 10. 251,000 – 300,000 HUF
- 11. 301,000 – 350,000 HUF
- 12. 351,000 – 400,000 HUF
- 13. 401,000 – 450,000 HUF
- 14. 451,000 – 500,000 HUF
- 15. 501,000 and above
- 88 – REFUSES TO ANSWER
- 99 – DOES NOT KNOW

704. What would you say, how do you manage with this income? Please use **CARD NO. 24** to answer!

- 1 – Have to go without,
- 2 – financial problems from month to month,
- 3 – can just make ends meet by budgeting carefully,
- 4 – live acceptably, or
- 5 – live without problems?

9 – DK

705. What is the area of the apartment in m²?

m²

999 – DK

706. a. Number of rooms larger than 12 m²? b. Number of rooms with an area of 4–12 m²?

rooms

99 – DK

rooms

9 – DK

707. Look at **CARD NO. 1**. Use it to indicate how satisfied you are with your apartment or house. 0 means that you are not satisfied at all, and 10 that you are fully satisfied.

Scale value:

99 – DK

708. Are you planning to move within the next three years?

- 1 – definitely yes
- 2 – probably yes
- 3 – probably not
- 4 – definitely not

GO TO 710!

9 – DK

709. Would that be to another country, to another locality or within the same municipality?

- 1 – to another country
- 2 – to another locality
- 3 – within the same locality
- 4 – within the country, but cannot say about locality

9 – DK

710. Look at CARD NO. 25 and please indicate which of the followings you have. What don't you have because you cannot afford it? What don't you have because you don't want it? And what don't you have for other reasons?

i.

Do you have...	Have	DOES NOT HAVE BECAUSE		
		... be- cause cannot afford it	... because does not need it	of other reason
a./ an apartment in which everyone has a separate room	1	2	3	4
b./ WC and bathroom or shower in the apartment	1	2	3	4
c./ garden, terrace or balcony overlooking pleasant environment	1	2	3	4
d./ telephone (landline or mobile)	1	2	3	4
e./ car (for personal use)	1	2	3	4
f./ second car (for personal use)	1	2	3	4
g./ colour TV set	1	2	3	4
h./ microwave oven	1	2	3	4
i./ washing machine (automatic)	1	2	3	4
j./ dishwasher	1	2	3	4
k./ video recorder or DVD-player	1	2	3	4
l./ personal computer	1	2	3	4
m./ Internet-access	1	2	3	4

711. Look at **CARD NO. 26**. Use it to indicate the things you do and achieve and those which you do not do, either because you cannot afford them or do not need them, do not want them, or for some other reason.

You do and achieve.....	Do	DOES NOT DO BECAUSE		
		Cannot afford	Does not need	Other reason
a./ go away for a week for a holiday once a year?	1	2	3	4
b./ regularly buy new clothes?	1	2	3	4
c./ replace worn out furniture.?	1	2	3	4
d./ invite friends for supper once a month?	1	2	3	4
e./ save at least 10,000 HUF a month?	1	2	3	4
f./ keep your house / apartment nice warm?	1	2	3	4
g./ have lunch with your family in a restaurant once a month?	1	2	3	4

712. How much do you worry about the following things?

Do you worry a lot, a little, or not at all about...	Not at all	A little A lot		Does not apply	DK
		WORRY			
a./ your state of health?	1	2	3		9
b./ IF YOU HAVE ONE : losing your job?	1	2	3	7	9
c./ IF YOU HAVE ONE : your children's future?	1	2	3	7	9
d./ IF YOU HAVE ONE : your family's financial situation?	1	2	3	7	9

713. Look at **CARD NO. 1** and indicate to what level are you satisfied with your standard of living. 0 means not satisfied at all, while 10 means that you are fully satisfied.

Scale value
 99 – DK

PARENTS, PARENTAL HOUSE

801. May I ask you whether your biological mother is still alive?

- 1 – yes, she is
- 2 – no, she deceased
- 9 – DK

GO TO 809!

802. How satisfied are you with the relationship with your mother? Please use **CARD NO. 1 and tell me the value on the scale.**

Scale value:
99 – DK

803. Is your mother limited in her ability to carry out normal everyday activities because of a physical or mental health problem or a disability?

- 1 – yes
- 2 – no
- 9 – DK

804. Are you currently living together with your biological mother?

- 1 – yes
- 2 – no

GO TO 809!

805. Which of the items on **CARD NO. 29 apply to your mother's living arrangement? Please mention all categories that apply!**

	yes	no	DK
a./ Alone, by herself in a household	1	2	9
Not living alone, but:			
b./ With her partner/spouse	1	2	
c./ With her son(s)	1	2	
d./ With her daughter(s)	1	2	
e./ With her grandchild(ren) or great grandchild(ren)	1	2	
f./ With her own mother or father	1	2	
g./ With a relative	1	2	
h./ With a friend, other than her partner/spouse	1	2	
i./ In a home for the elderly or in a dwelling that specifically meets the needs of the elderly (like a service flat, semiindependent sheltered accommodation)	1	2	
j./ In another institution	1	2	

806. How long does it take to get from your home to where your mother is living at present?

hour minutes

807. How often do you see your mother on the average in a month?

times

00 – more rarely than once a month

808. Do you intend to start living together with your mother within the next 3 years?

- 1 – definitely yes
- 2 – probably yes
- 3 – probably not
- 4 – definitely not

9 – DK

809. May I ask you whether your biological father is still alive?

- 1 – yes, he is
- 2 – no, he deceased
- 9 – DK

GO TO 818!

810. How satisfied are you with the relationship with your father? Please use **CARD NO. 1 and tell me the value on the scale.**

Scale value:
99 – DK

811. Is your father limited in his ability to carry out normal everyday activities because of a physical or mental health problem or a disability?

- 1 – yes
- 2 – no
- 9 – DK

812. ASK ONLY THOSE RESPONDENTS WHOSE MOTHER IS STILL ALIVE (see question 801), IF SHE'S NOT ALIVE → GO TO 813!

812. Are your mother and father living in the same household?

- 1 – yes
- 2 – no

GO TO 818!

813. Are you currently living together with your biological father?

- 1 – yes
- 2 – no

GO TO 818!

814. Which of the items on **CARD NO. 30 apply to your father's living arrangement? Please mention all categories that apply!**

	igen	nem	NT
a./ Alone, by himself in a household	1	2	9
Not living alone, but:			
b./ With his partner/spouse	1	2	
c./ With his son(s)	1	2	
d./ With his daughter(s)	1	2	
e./ With his grandchild(ren) or great grandchild(ren)	1	2	
f./ With his own mother or father	1	2	
g./ With a relative	1	2	
h./ With a friend, other than his partner/spouse	1	2	
i./ In a home for the elderly or in a dwelling that specifically meets the needs of the elderly (like a service flat, semiindependent sheltered accommodation)	1	2	
j./ In another institution	1	2	

815. How long does it take to get from your home to where your father is living at present?

hour minutes

816. How often do you see your father on the average in a month?

times

00 – more rarely than once a month

817. Do you intend to start living together with your father within the next 3 years?

- 1 – definitely yes
 - 2 – probably yes
 - 3 – probably not
 - 4 – definitely not
-
- 9 – DK

818. How many of your brothers and sisters are alive? **BROTHERS AND SISTERS ARE THOSE WHOM THE RESPONDENT CONSIDERS AS SUCH**

brothers

sisters

819.: ASK EVERYONE - SENSIBLY!

819. How many of your grandparents are alive? **GRANDPARENTS ARE YHOSE WHOM THE RESPONDENT CONSIDERS AS SUCH**

grandparents

9 – DK

820–821.: IF RESPONDENT IS NOT LIVING TOGETHER WITH ANY OF HIS/HER PARENTS (see questions 804, 813)!FOR THOSE WHO LIVE TOGETHER WITH AT LEAST ONE PARENT → GO TO 822!

820. When did you first leave the 'parental home'?

year

month

821. Have you moved back to your parents' home for a longer period, at least for three months?

- 1 – yes
- 2 – no

CONTINUE WITH 901!

822–824.: IF RESPONDENT IS LIVING TOGETHER WITH AT LEAST ONE OF HIS/HER PARENTS (see questions 804, 813)!

822. Have you ever lived separately from your parents for at least three months?

- 1 – yes
- 2 – no

GO TO 824!

823. In what month and year did that happen for the first time?

year

month

824. Do you intend to start living separately from your parents within the next 3 years?

- 1 – definitely yes
 - 2 – probably yes
 - 3 – probably not
 - 4 – definitely not
-
- 9 – DK

STATE OF HEALTH AND SENSE OF WELL-BEING

901. Use CARD NO. 1 to indicate how satisfied you are with the state of your health. 0 means that you are not at all satisfied and 10 that you are fully satisfied.

Scale value:
99 – DK

902. Do you have any long-standing illness or chronic condition?

1 – yes → **902a. For how long have you had this illness?**

- 1 – for less than 6 months
- 2 – between 6 months and 1 year
- 3 – between 1 and 4 years
- 4 – between 4 and 10 years
- 5 – for over 10 years
- 9 – DK

2 – no

9 – DK

903. Are you hindered in your everyday activity by some kind of health problem, illness, disability?

1 – yes → **903a. How much does this problem hinder you?**

- 1 – severely, or
- 2 – moderately?

- 3 – varying, it depends
- 9 – DK

903b. For how long have you been suffering from this problem?

- 1 – for less than 6 months
- 2 – between 6 months and 1 year
- 3 – between 1 and 4 years
- 4 – between 4 and 10 years
- 5 – for over 10 years
- 9 – DK

903c. Do you need regular help with personal care such as help with eating, getting up, dressing, bathing, using toilet etc?

- 1 – yes
- 2 – no

2 – no

9 – DK

904. What is your height?

cm

888 – DOES NOT WISH TO ANSWER
999 – DK

905. What is your weight?

kg

888 – DOES NOT WISH TO ANSWER
999 – DK

906. Have you ever been smoking?

1 -- yes, still smoking

→ **906a. How many cigarettes do you smoke on the average on a regular day?**

cigarettes
99 – DK

2 -- yes, but not anymore

→ **906b. When did you give up smoking?**

IF IT HAPPENED MORE THAN ONCE, CONSIDER THE LAST ONE!

year month
9999 – DK 99 – DK

3 -- never smoked

→ **GO TO 908!**

9 -- DK

907.: ASK ONLY THOSE WHO HAVE EVER SMOKED. OTHERWISE GO TO → 908!

907. At what age did you start smoking?

years
99 – DK

ASK EVERYONE!

908. People's general well-being can be influenced by many things. Evaluate how valid the following statements are in your case using CARD NO. 3!

ix.

How true is it that?	Fully	Partly	Rather not	Not at all	DK
	TRUE				
a./ there is always someone around me I can discuss my everyday problems with?	4	3	2	1	9
b./ I can always rely on someone in case of need?	4	3	2	1	9
c./ I often feel that no one is interested in what I say?	4	3	2	1	9
d./ I feel that intimacy and warmth are missing from my life?	4	3	2	1	9
e./ I often feel lonely?	4	3	2	1	9

909. Please tell me how frequently you experienced the next items during the previous week using **CARD NO. 32!**

During the past week...	seldom or never	some-times	often	most or all of the time	DK
a./ I felt that I could not shake off the blues even with help from my family or friends.	1	2	3	4	9
b./ I felt depressed	1	2	3	4	9
c./ I thought my life had been a failure	1	2	3	4	9
e./ I felt fearful	1	2	3	4	9
f./ I felt lonely	1	2	3	4	9
g./ I had crying spells	1	2	3	4	9
h./ I felt sad	1	2	3	4	9

910. Do you think most people would try to take advantage of you if they got a chance, or would they try to be fair?

- 1 – would take advantage, or
- 2 – would try to be fair
- 3 – other
- 9 – DK

911. Generally speaking, would you say that most people can be trusted or that you need to be very careful in dealing with people?

- 1 – Most people can be trusted, or
- 2 – need to be very careful.
- 3 – other
- 9 – NT

912. Now, at the end, evaluate your general living conditions again, please. Look at **CARD NO. 33** on which 10 represents the best living conditions you can imagine and 0 the worst.

	Scale value	DK
a./ How would you rate your present living conditions?	<input type="text"/> <input type="text"/>	99
b./ And what living conditions would you consider fair for yourself?	<input type="text"/> <input type="text"/>	99
c./ And what do you expect your living conditions will be in five years' time?	<input type="text"/> <input type="text"/>	99

THANK YOU FOR YOUR CO-OPERATION AND YOUR VALUABLE CONTRIBUTION!

Surveyor!

After finishing the interview make sure again that the respondent has a biological or adopted child aged between 20 and 25 (that is, born between 1984 and 1988) (see questions 106 and 302). Data about them should be written on the parent's address card! Then:

IF there is a (are) child(ren) of such an age living in this household, set a date for an interview with him/her/them (YOUNG QUESTIONNAIRE, YOUNG ADDRESS CARD!)

IF the child(ren) of such an age is/are not living in this household, but in at a fair distance, try to get in touch with them and set a date for an interview with his/her/them (YOUNG QUESTIONNAIRE, YOUNG ADDRESS CARD!)

IF the child(ren) of such an age is/are living far away, ask for his/her/their address and contact details and following the instructions deliver this information to the HCSO county organizer.