

NOP 62533
(1-5)

LIVING IN BRITAIN
WAVE II COVERSHEET

Last known address

Card Wave Serial No Household No Check No Person No
(6-8) (9) (10-14) (15) (16) (17-18)

001 00
Address _____

County/Post Code _____

CHECK PHONE NUMBER: Telephone STD/No. _____
WAVE 1 FID _____

Address of interview

Circle appropriate code: (19)
Household now at new address 1
Household still at last known address 2
- address/phone number corrections needed 2
- no corrections needed 3

Enter corrections or new details below, if needed.

No. and street _____

District/Town _____

County _____ Post Code _____

Telephone STD _____ No. _____

Office Use Only: Final Loc Code (20-23)

Outcome at Last Known Address (Ring the appropriate outcome code)

- | | | |
|---|---|---|
| No moves (including some deceased) | 1 | Complete the contents of the coversheet. |
| Whole household deceased | 2 | Complete the contents of the coversheet to the extent possible. |
| Whole household move to one address | 3 | Write in the new address above. If local move, wait until you have found the household then complete the contents of this coversheet. If non-local or new address unknown complete a Mover's Form. Send the Mover's Form and this coversheet back to Chelmsford for reissue. Do not complete the rest of this coversheet. |
| Partial household move | 4 | Complete this coversheet for remaining members. If split-off(s) local, create additional coversheet(s). If split-off(s) non-local or new address unknown, send completed Mover's Form to Chelmsford. |
| Whole household move to more than one address | 5 | Complete coversheet with any respondent contacted. Treat others as partial household moves, i.e. create new coversheet for local addresses, complete a Mover's Form for non-local or unknown addresses. |
| Mover status not determined (Whole h'hold noncontact/refusal) | 6 | Complete Final Household Outcome (page 10) and return coversheet to Chelmsford. |

Interviewer Area: Interviewer Name: _____ Interviewer Number: _____

(24-26)

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(27)
(28-32)

Call No.	Day	Date	Time in 24hr	Use this column to specify the outcome of call and appointments made
1				
2				
3				
4				
5				
6				
7				
8				

Total No. of calls at last known address (33-34) Total No. of calls at address of interview (35-36) Office Use Only: Batch Code (37-40)

Office Use Only: Type of coversheet First issue . . . 1 Whole h'hold reissue from other area . . . 2 Split off h'hold from first issue . . . 3 (41)

E N U M E R A T I O N G R I D

CARD 002

DETERMINING WHO IS PRESENT FROM LAST YEAR

"Last year we had (Name of first person) listed as living with you. Does he/she still live here?" Enter appropriate code in column 9. The information in columns 3-8 should not be read out. It is provided for your use in uncertain cases.

"And what about (next person)? Does he/she still live here?" Ask about **ALL** other persons listed in the grid below. Enter appropriate 'original member' code at column 9. NB Column 9, Code 2 refers to temporary absence (less than 6 months).

IF NONE OF THE PEOPLE LISTED BELOW ARE PRESENT, STOP HERE. DETERMINE THEIR NEW ADDRESS(ES). GO BACK TO FRONT PAGE FOR FURTHER INSTRUCTIONS.

IDENTIFYING NEW ENTRANTS

"And does anyone else usually live here with you?" Enter their title, first name and surname in column 2, in sequence after the last preprinted line. Then complete column 9. Do not complete columns 3-8 for these people. "I (now) have listed (read names out of all current household members). Is there anyone else who normally lives here that I have missed, such as babies or lodgers or anyone who usually lives here but is away at the moment?" Complete columns 1,2 and 9 for these people.

1. PN (17-18)	2. NAME Title, First name and surname ID: 2 _____	3. PID (19-26)	4. S e x	5. Date of Birth	6. Relationship to Wave 1 HRP	7. Interview Outcome from Wave 1 (27)	8. Type of Interview This Wave (28)
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							
11							

INDIVIDUAL OUTCOMES

AFTER THE INTERVIEW IS FINISHED, COMPLETE

COLUMNS 17 - 22 FOR EVERYONE LISTED IN

COLUMN 2.

17. Interview Outcome	18. Reason for Refusal	19. Reason for Other Non Interview
Full interview	1 For Interview	Write in details below for Interview Outcome codes 4-5 and 8 from column 17
Proxy	2 Outcome code 3	
Refusal	3 from column 17	
Absent, no proxy	4	
Other non-interview, no proxy	Too busy 1	
Child under 16	Elderly/sick 2	
Moved	Not interested 3	
Other (include deceased)	Other (specify) 4	
(43)	NA 0 (44)	

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CARD 003

00
(17-18)

IS THERE ANYTHING THAT NEXT YEAR'S INTERVIEWER SHOULD KNOW ABOUT HOW TO LOCATE OR INTERVIEW THIS HOUSEHOLD? Yes1 No2 (19)

If Yes, give details:

FINAL HOUSEHOLD OUTCOME

COOPERATING HOUSEHOLDS (Based on current household membership)	(20-21)	ORIGINAL SAMPLE MEMBERS FOUND - NO INTERVIEW(S)	(20-21)
Completely Cooperating		Partial nonresponse	
Every eligible member of the household interviewed	10	Only coversheet enumeration completed	30
Partially Cooperating		Complete nonresponse	
Some members interviewed and some proxied	11	Refusal to Headquarters - no enumeration	31
Some members interviewed or proxied and some noncontact or refusal	12	Refusal by whole household to interviewer - no enumeration	32
Household questionnaire information gathered, but no individual interviews	13	COMPLETE BOX BELOW	33
		Language problems - no enumeration	33
		COMPLETE BOX BELOW	34
		Unable to be interviewed because of age, infirmity or disability - no enumeration	34
		COMPLETE BOX BELOW	
ORIGINAL SAMPLE MEMBERS NOT FOUND		Other Outcomes	
Address not found - No trace	20	Whole h'hold deceased	40
Address demolished/empty/no longer used as residential accommodation - No trace	21	Proxy taken with member of Wave 1 household at original address	41
Address occupied but no contact	22	Withdrawn from sample	42
Complete refusal of information about occupants	23	- Institutionalised - won't be followed	43
		- Moved out-of-scope	44
		- Moved back to Wave 1 h'hold/address	44

Record here further details for outcome codes 32-34:

Information about the household:

How many original sample members are still present at the address?

|

|

If unknown enter 98. (22-23)

How many new household members are there?

|

|

If unknown enter 98 (24-25)

Anything else known about household? Please enter details.

Household Level Document Check

Have you completed the following items?

NB. All items need to be completed for cooperating households. If noncontact/refusal household, only the front page and household outcome page need to be completed.

	Yes	No	NA	
On Coversheet				
- Front page	1	2		(26)
- Enumeration grid	1	2		3
		(27)		
- Individual outcomes (28)		1	2	3
- Tracking	1	2		3
		(29)		
- Household outcomes	1	2		(30)
- Voucher Form	1	2		3
		(31)		
Mover's form	1	2		3
		(32)		

WRITE IN THE TITLE, FIRST NAME AND SURNAME OF ANY NEW ENTRANTS

BELOW, AS YOU DID FOR PAGE 2 OF THE COVERSHEET.

COMPLETE THE HOUSEHOLD MEMBERSHIP AND INTERVIEW OUTCOME COLUMNS

FOR ALL PERSONS. THESE CAN BE COPIED FROM COLUMNS 9 AND 17 FROM THE COVERSHEET.

1. PN	2. Name	3. PID	4. Household membership	5. Interview Outcome
			Original member -Resident 1 -Absent 2 -Moved 3 -Deceased 4 New Entrant -Resident 5 -Absent 6	Full interview 1 Proxy 2 Refusal 3 Absent, no proxy 4 Other non-interview, no proxy 5 Child under 16 6 Moved 7 Other (include deceased) 8
01			<input type="text"/>	<input type="text"/>
02			<input type="text"/>	<input type="text"/>
03			<input type="text"/>	<input type="text"/>
04			<input type="text"/>	<input type="text"/>
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06			<input type="text"/>	<input type="text"/>
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11			<input type="text"/>	<input type="text"/>
12			<input type="text"/>	<input type="text"/>

NOP/62533

CARD 10

1-5

6-8

Wave

Serial Number

Household No.

Check No.

2

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9

10-14

15

16

00

LIVING IN BRITAIN

17-18

WAVE 2

HOUSEHOLD QUESTIONNAIRE

	DAY	MONTH	YEAR						
DATE OF INTERVIEW	<table border="1" style="display: inline-table; width: 40px; height: 25px;"> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>			<table border="1" style="display: inline-table; width: 40px; height: 25px;"> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>			<table border="1" style="display: inline-table; width: 40px; height: 25px;"> <tr> <td style="width: 20px; text-align: center;">9</td> <td style="width: 20px;"></td> </tr> </table>	9	
9									
	_	**_**	**_**						
	HOURS	MINUTES							
TIME AT START	<table border="1" style="display: inline-table; width: 40px; height: 25px;"> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>			<table border="1" style="display: inline-table; width: 40px; height: 25px;"> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>					
	_	**_**							

FOR INTERVIEWER REFERENCE

INTERVIEWER CHECK

(FROM FRONT PAGE OF COVERSHEET)

Was an interview carried out at this address last year? **

Yes 1

No 2

(FROM OBSERVATION)

What type of accommodation does household live in? **

- Detached house/bungalow01
- Semi-detached house/bungalow02
- End terraced house03
- Terraced house04
- Purpose built flat/maisonette05
- Converted flat/maisonette06
- Dwelling with business premises07
- Bedsitter in multiple occupation08
- Bedsitter other09
- Institutional accomodation
- (GIVE DETAILS)** _____ 10
- Other **(GIVE DETAILS)** _____ 11

6. Verify age by using Age Card and ask: *'That means ... is now (read age), is that correct?'*
 IF YES enter age. IF NO recheck Date of Birth and age.
 IF AGED 16 OR OVER ask 7-9. IF AGED 15 OR UNDER ENTER 0,00 and 0 at 7-9.
7. *'Are you/is currently married, living with a partner, widowed, divorced or separated or have you/they never been married?'*
8. If coded 1 or 2 at 7 ask *'Does your/his/her spouse/partner live in the household?'* IF YES enter person number of spouse/partner. IF NO enter 00. If coded 3-6 at 7 enter 00.
9. Ask *'Last week were you/was in paid employment at all, including being away temporarily from a job you/they would normally have been doing?'*
10. Ask *'Is the NATURAL father of in the H'hold?'* and write in Person number. IF NOT IN H'HOLD CODE 00.
11. Ask *'Is the NATURAL mother of ... in the H'hold?'* and write in Person number. IF NOT IN H'HOLD CODE 00.
12. For each child under 16 write in mother number. If no mother then write in father number otherwise ask *'Who is responsible for ... and what is their relationship to him/her?'* IF 16 OR OVER CODE 00
13. Use this column to explain any complicated relationships among HH members.

6. AGE	7. MARITAL STATUS Married Living as couple Widowed Divorced Separated	8. SPOUSE PARTNER NUMBER	9. PAID EMPLOY MENT Yes No	10. FATHER NUMBER Not in household code 00	11. MOTHER NUMBER Not in household code 00	12. RESP ADULT Code for each child under 16 If 16 or over code 00	13. COMMENT TO CLARIFY RELATIONSHIP
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THE FOLLOWING STATEMENT MUST BE READ TO ALL RESPONDENTS:

This interview is completely voluntary -- if we should come to any question that you don't want to answer, just let me know and we'll go on to the next question.

H1. I would like to ask you a few questions about your household's accommodation. How many rooms are there here, **including** bedrooms but **excluding** kitchens, bathrooms, and any rooms you may let or sublet?

WRITE IN NUMBER

--	--

H2 . Does your household own or rent this accommodation or does it come rent-free?

- **
- Owned/being bought on mortgage..... 1
 - Shared ownership (part-owned part-rented) 2 **ASK H3**
 - Rented 3
 - Rent free 4 **GO TO H38 (page 14)**
 - Other (**SPECIFY**)
-
- 5

H3. In whose name is this (house/flat/room) owned?

	FIRST MENTION	SECOND MENTION				
ENTER PERSON NO(s) (FROM HOUSEHOLD GRID) OF FIRST TWO OWNERS(s) MENTIONED	<table border="1" style="width: 60px; height: 25px;"><tr><td style="width: 30px;"></td><td style="width: 30px;"></td></tr></table> **_**			<table border="1" style="width: 60px; height: 25px;"><tr><td style="width: 30px;"></td><td style="width: 30px;"></td></tr></table> **_**		
IF OWNER IS NOT IN HOUSEHOLD ENTER '00' AND EXPLAIN IN MARGIN						

H4 . **INTERVIEWER CHECK (FRONT PAGE)**
Was an interview carried out at this address last year?

- **
- Yes..... 1 **ASK H5**
 - No..... 2 **GO TO H21 (page 10)**

SAME ADDRESS LAST YEARH5 . Is this accommodation: **(READ OUT)**

- **
- Owned outright.....1 **ASK H6**
- Or is it being bought with a mortgage
or a loan?2 **GO TO H9**

H6 . Did you become the outright owner(s) of this
property before September 1st 1991?

- **
- Yes1 **GO TO H53 (page 18)**
- No2 **ASK H7**

NEW OUTRIGHT OWNERSH7. Which of the following best describes how you came to own
this property outright? Have you **(READ OUT)**

- **
- Bought it for cash1 **ASK H8**
- Paid off a mortgage or loan2 **GO**
- Inherited or been given all or a **TO**
share of the property3 **H53 (page 18)**
- Or something else? **(SPECIFY)**
- _____ 4

H8. How much did you pay for the property?

WRITE IN TO NEAREST £:

--	--	--	--	--	--	--

GO TO H53 (page 18)

- **
- Don't know.....8 **GO TO H53**
- Refused9 **(page 18)**

CURRENT MORTGAGE PAYERSH9. Last year on September 1st 1991 were you **(READ OUT)**

- **
- Buying this accommodation with a mortgage.....1 **ASK H10**
- Renting this accommodation.....2 **GO TO H13**
- Or did you own it outright?.....3 **GO TO H17**

SAME ADDRESS LAST YEAR

H10 . Since last year that is September 1st 1991 have you taken out any additional mortgage or loan on this house/flat?

- **
- Yes..... 1 **ASK H11**
- No..... 2 **GO TO H19 (page 9)**

H11. How much in total is this additional mortgage or loan?

WRITE IN TO NEAREST £:

--	--	--	--	--

_

- **
- Don't know..... 8
- Refused 9

H12 . What was this additional mortgage/loan used for?

CODE ALL THAT APPLY

- | | | | |
|----|------------------------------------|---|----|
| a) | Home extension..... | 1 | ** |
| b) | Home improvements or repairs | 2 | ** |
| c) | Car purchase | 3 | ** |
| d) | Other consumer goods..... | 4 | ** |
| e) | Other (SPECIFY) | | |
| | | 5 | ** |

**GO TO
H19 (page 9)**

NEW BUYERS ONLY

H13. How much did you pay for the property?

WRITE IN TO NEAREST £:

--	--	--	--	--	--

_

- **
- Don't know..... 8
- Refused 9

SAME ADDRESS LAST YEAR

H14. How much have you borrowed in order to buy this property?

WRITE IN TO NEAREST £:

--	--	--	--	--	--

**

Don't know..... 8

Refused 9

H15 . How many years has your mortgage still to run?

YEARS

WRITE IN

--	--

**

Don't know 8

H16 . Is your mortgage or loan (READ OUT)

**

A repayment mortgage or loan 1

An endowment mortgage 2

Part repayment and part endowment 3

Or some other type of mortgage or loan?

(SPECIFY)

4

Don't know 8

**GO TO
H19**

PREVIOUS OUTRIGHT OWNERS

H17. How much in total is your new mortgage or loan?

WRITE IN TO NEAREST £:

--	--	--	--	--	--

**

Don't know..... 8

Refused 9

SAME ADDRESS LAST YEAR

H18 . What is this new mortgage or loan used for?

CARD 13

CODE ALL THAT APPLY

- a) Home extension.....1 **
 - b) Home improvements or repairs2 **
 - c) Car purchase3 **
 - d) Other consumer goods.....4 **
 - e) Other (**SPECIFY**)
-
- 5 **

**GO TO
H19**

ASK ALL CURRENT MORTGAGE PAYERS

H19 . How much was your last total monthly instalment on the mortgage(s) or loan(s)?

**INCLUDE LIFE INSURANCE PAYMENTS IF PAID WITH MORTGAGE
IF ENDOWMENT MORTGAGE INCLUDE BOTH PREMIUMS AND INTEREST**

WRITE IN TO NEAREST £:

--	--	--	--

ASK H20

_

- Don't know8 **GO TO**
- Refused9 **H50 (page 17)**

H20 . Did that payment include any of the following? (**READ OUT**)

- | | <u>Yes</u> | <u>No</u> | <u>Don't
know</u> | | |
|----|---|-----------|-----------------------|----|------------------------------------|
| a) | A mortgage protection policy?1 |2 |8 | ** | GO TO
H50
(page 17) |
| b) | Building structure insurance?1 |2 |8 | ** | |
| c) | Contents or possessions insurance?1 |2 |8 | ** | |
| d) | Any other extra payments?1 |2 |8 | ** | |

(GIVE DETAILS)

NEW ADDRESS ONLY

H21 . Is this accommodation: **(READ OUT)**

- Owned outright ^{**} 1 **ASK H22**
- Or is it being bought with a mortgage
or a loan?..... 2 **GO TO H28 (page 11)**

ASK OUTRIGHT OWNERS ONLY

H22 . Which of the following best describes how you came to own this property outright? Have you **(READ OUT)**

- Paid off a mortgage or loan..... ^{**} 1 **ASK H23**
- Bought it for cash..... 2 **GO TO H25**
- Inherited or been given all or a
share of the property 3 **GO TO H26**
- Or something else? **(SPECIFY)**
_____ 4

H23 . How much did you pay for the property?

WRITE IN TO NEAREST £:

--	--	--	--	--	--

^{***}

- Don't know..... ^{**} 8
- Refused 9

H24. In what year did you first start paying a mortgage on this house/flat?

WRITE IN YEAR: 19

--	--

^{**_**}

- Don't know..... ^{**} 8

H25 . How much did you pay for the property?

WRITE IN TO NEAREST £:

--	--	--	--	--	--

^{***}

- Don't know..... ^{**} 8
- Refused 9

NEW ADDRESS ONLY

H26. In what year did you first become the owner of this house/flat?

WRITE IN YEAR: 19

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_

**

Don't know..... 8

H27 . About how much would you expect to get for your home if you sold it today?

IF RANGE GIVEN WRITE IN LOWEST FIGURE

WRITE IN TO NEAREST £:

--	--	--	--	--	--

**

Don't know..... 8

Refused 9

MORTGAGE PAYERS ONLY

H28 . In what year did you first start paying a mortgage on this house/flat?

WRITE IN YEAR: 19

--	--

_

**

Don't know..... 8

H29 . How much did you pay for the property?

WRITE IN TO NEAREST £:

--	--	--	--	--	--

**

Don't know..... 8

Refused 9

NEW ADDRESS ONLY

CARD 14

H30. How much did you borrow originally when you bought the property, that is excluding any later additions to the mortgage?

WRITE IN TO NEAREST £:

--	--	--	--	--	--

.. 8

**

Don't know..... 8

Refused 9

H31 . How many years has the mortgage still to run?

YEARS

WRITE IN

--	--

.. 8

**

Don't know..... 8

H32 . Is your mortgage or loan (**READ OUT**)

**

A repayment mortgage or loan..... 1

An endowment mortgage 2

Part repayment and part endowment..... 3

Or some other type of mortgage or loan?

(SPECIFY)

..... 4

Don't know 8

H33 . Have you subsequently taken out any additional mortgage or loan on this house/flat?

**

Yes..... 1 **ASK H34**

No..... 2 **GO TO H36**

H34 . How much in total is this additional mortgage or loan?

WRITE IN TO NEAREST £:

--	--	--	--	--	--

**.34

**

Don't know..... 8

Refused 9

NEW ADDRESS ONLY

H35 . What was this additional mortgage/loan used for?

CODE ALL THAT APPLY

- a) Home extension..... 1 **
- b) Home improvements or repairs 2 **
- c) Car purchase 3 **
- d) Other consumer goods..... 4 **
- e) Other (**SPECIFY**)
 _____ 5 **

H36 . How much was your last total monthly instalment on the mortgage(s) or loan(s)?

**INCLUDE LIFE INSURANCE PAYMENTS IF PAID WITH MORTGAGE
 IF ENDOWMENT MORTGAGE INCLUDE BOTH PREMIUMS AND INTEREST**

WRITE IN TO NEAREST £:

--	--	--	--

ASK H37

**

- Don't know..... 8 **GO TO**
- Refused 9 **H50 (page 17)**

H37 . Did that payment include any of the following? (**READ OUT**)

- | | | <u>Yes</u> | <u>No</u> | <u>Don't
know</u> | |
|----|--|------------|-----------|-----------------------|----|
| a) | A mortgage protection policy? | 1 | 2 | 8 | ** |
| b) | Building structure insurance? | 1 | 2 | 8 | ** |
| c) | Contents or possessions insurance? | 1 | 2 | 8 | ** |
| d) | Any other extra payments? | 1 | 2 | 8 | ** |

(GIVE DETAILS) _____

**GO TO
 H50
 (page 17)**

ASK TENANTS ONLY (SAME AND NEW ADDRESS)

H38 . Does the accommodation go with the present job of anyone in the household?

**

Yes..... 1
No..... 2

H39 . In whose name is this (house/flat/room) rented?

	FIRST MENTION	SECOND MENTION				
ENTER PERSON NO(s) (FROM HOUSEHOLD GRID) OF FIRST TWO TENANTS MENTIONED	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>			<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>		
IF TENANT IS NOT IN HOUSEHOLD ENTER '00' AND EXPLAIN IN MARGIN	**_**	**_**				

H40 . Who is the accommodation rented from or provided by?

ORGANISATIONS

- Local Authority/Council..... 01
- New Town Commission or Corporation 02
- Property company..... 03
- Scottish Homes
(Scottish Special Housing Association)..... 04
- Other Housing association, cooperative or
charitable trust 05
- Employer 06
- Other organisation (**SPECIFY**)
_____ 07

INDIVIDUALS

- Relative 08
- Employer 09
- Other individual 10

H41 . Do you rent your accommodation (**READ OUT**)

**

Furnished..... 1
Partly furnished 2
Or unfurnished?..... 3

H42 . **INTERVIEWER CHECK (H2, CODE 4): Is this accommodation rent free?**

**

Yes.....1 **GO TO H53 (page 18)**

No.....2 **ASK H43**

H43 . How much was the last rent payment, including any services or water charges but after any rebates?

WRITE IN TO NEAREST £:

--	--	--	--

ASK H44

**

Don't know.....8 **GO TO**

Refused9 **H50 (page 17)**

100% rent rebate0 **GO TO H48 (page 16)**

H44 . What period did this cover?

**

Week.....1

Fortnight.....2

Four weeks3

Calendar month.....4

Quarter5

Six months.....6

Other (**WRITE IN**)

7

OFFICE
CODE

--	--	--

H45 . Did your last rent include any payment for any of the following things **CARD 15**
(READ OUT EACH IN TURN)

	<u>Yes</u>	<u>No</u>	<u>Don't know</u>	
a) Water charges?	1	2	8	**
b) Land or business premises?	1	2	8	**
c) A garage?	1	2	8	**
d) Heating or lighting or hot water?	1	2	8	**
e) Meals?	1	2	8	**
f) Any other services your landlord might provide for you?	1	2	8	**

GIVE DETAILS

H46 . Was any housing benefit such as a rent rebate or rent allowance deducted from the last rent payment?

	**	
Yes.....	1	ASK H47
No.....	2	GO TO H50

H47 . So what would the last rent payment have been if Housing Benefit had not been deducted from it?

WRITE IN TO NEAREST £:

--	--	--	--

GO TO H50

	**	
Don't know.....	8	GO TO H50

ASK RECIPIENTS OF 100% RENT REBATE/HOUSING BENEFIT

H48. So what would the rent have been if Housing Benefit had not been deducted from it?

WRITE IN TO NEAREST £:

--	--	--	--

ASK H49

	**	
Don't know.....	8	GO TO H50

H49 . What period would that cover?

**

- Week..... 1
 - Fortnight..... 2
 - Four weeks 3
 - Calendar month..... 4
 - Quarter 5
 - Six months..... 6
 - Other (**WRITE IN**)
-
- 7

OFFICE
CODE

--	--	--

-

ASK ALL RENTERS/MORTGAGE PAYERS

H50 . Many people these days are finding it difficult to keep up with their housing payments. In the last twelve months would you say you have had any difficulties paying for your accommodation?

- Yes..... 1 **ASK H51**
- No 2 **GO**
- Rent rebate 100% for past 12 months..... 3 **TO**
- Don't know..... 8 **H53**
- Refused 9

H51. Did you have to (**READ OUT**)

Yes No Refused

- a) Borrow money? 1 2..... 9 **
- b) Cut back on other household spending
in order to make the payments? 1 2..... 9 **

H52. In the last twelve months have you ever found yourself more than two months behind with your rent/mortgage?

- Yes..... 1
- No..... 2
- Refused 9

CONSUMPTION**H53. SHOWCARD H1**

Would you look at this card please and tell me if you have any of the items listed in your (part of the) accommodation?

INCLUDE ITEMS STORED OR BEING REPAIRED

Yes..... ^{**} 1 **ASK H54**
 No..... 2 **GO TO H57**

H54. Which items do you have?

(CODE ALL THAT APPLY IN GRID BELOW)

FOR EACH ITEM ASK H55

H55. Was it bought in the last year since September 1st 1991?

(INCLUDE GIFTS) CODE IN GRID BELOW

	<u>H54</u>	<u>H55</u>	
	Have	Bought	
a) Colour television.....	1	1	***
b) Video recorder	2	2	***
c) Deep freeze or fridge freezer	3	3	***
(EXCLUDE: fridge only)			
d) Washing machine.....	4	4	***
e) Tumble drier.....	5	5	***
(Combined washer/drier code d) and e))			
f) Dish washer.....	6	6	***
g) Microwave oven.....	7	7	***
h) Home computer	8	8	***
(EXCLUDE: video games)			
i) Compact disc player	9	9	***

H56 . IF ANY ITEMS BOUGHT IN PAST YEAR ASK:

How much in total have you paid for these, excluding any interest paid on loans?

WRITE IN TO NEAREST £:

--	--	--	--	--

_

**
 Don't know..... 8
 Refused 9

H57 . SHOWCARD H2

During the last year, that is since September 1st 1991 have (any of you) paid for any major repairs or improvements to your home such as those listed on this card?

**
 Yes..... 1 **ASK H58**
 No..... 2 **GO TO H59**

Building extension or room conversion Garage or car port Drive way or concrete base for vehicle Garden shed/garden fence/garden patio Kitchen or bathroom units Any other extension or improvements Interior or exterior painting or decorating Repairs or replacement of guttering, roof, door, plumbing, plaster woodwork	Repairs or replacement of windows (including double glazing) Repairs or replacement of walls (eg brickwork, stucco) Repairs or replacement of electricity system (including rewiring) Any other repairs, replacements or decorations
--	---

H58 . How much in total did you pay, excluding any interest paid on loans?

WRITE IN TO NEAREST £:

--	--	--	--	--

_

**
 Don't know..... 8
 Refused 9

H59. Do you have any form of central heating, including any electric storage heaters, in your (part of the) accommodation?

**
 Yes..... 1 **ASK H60**
 No..... 2 **GO TO H62**

H60. Is the central heating fuelled by **(READ OUT)** **CARD 16**
CODE ONE ONLY

	**	
Mains Gas.....	1	GO TO H63
Electricity.....	2	
Solid fuel	3	GO TO H62
Oil	4	ASK H61
Or something else?	5	GO TO H62

H61. How much have you spent on oil for the
central heating in the last year?

WRITE IN TO NEAREST £:

--	--	--	--

	**	
Don't know.....	8	
Refused	9	

H62 . Do you have gas supplied to your (part of this) accommodation?
INCLUDE CALOR GAS

	**	
Yes.....	1	ASK H63
No.....	2	GO TO H67

H63. Do you pay for your gas by **(READ OUT)**

	**	
Slot meter or Key meter	1	GO TO H66
Account	2	ASK
Board Budgeting scheme.....	3	H64
Included in rent	4	GO TO H67
Other (SPECIFY)		
_____	5	ASK H64

H64 . How much was your last (account) payment?

WRITE IN TO NEAREST £:

--	--	--

ASK H65

	**	
Don't know.....	8	GO TO H67
Refused	9	

H65 . How long did this cover?

**

Calendar month	1	GO TO H67
Quarter	2	
Six months	3	
Other (WRITE IN)	4	

OFFICE
CODE

--	--	--

H66 . About how much did your household spend on gas last week?

WRITE IN TO NEAREST £:

--	--

- **
- Don't know.....8
 - Refused9

H67. Is the electricity (for this part of the accommodation) paid for by (**READ OUT**)

**

Slot meter, electricity card or disc	1	GO TO H70
Account	2	ASK
Board Budgeting scheme	3	H68
Included in rent.....	4	GO TO H71
Other (SPECIFY)	5	ASK H68

H68 . How much was your last account payment?

WRITE IN TO NEAREST £:

--	--	--

ASK H69

- **
- Don't know.....8 **GO TO**
 - Refused9 **H71**

H69 . How long did this cover?

	**			
Calendar month	1	GO TO H71	OFFICE CODE	
Quarter	2			
Six months	3		***	
Other (WRITE IN)	4			

H70. About how much did your household spend on electricity in the last week?

WRITE IN TO NEAREST £:

--	--

Don't know.....	**
	8
Refused	9

H71 . **SHOWCARD H3**

Please look at this card and tell me approximately how much your household spends each week on food and groceries?

**INCLUDE ALL FOOD, BREAD, MILK, SOFT DRINKS ETC;
EXCLUDE PET FOOD, ALCOHOL, CIGARETTES AND MEALS OUT**

- | | | |
|----|--------------------|-----|
| | | *** |
| A. | Under £10..... | 01 |
| B. | £10 - £19 | 02 |
| C. | £20 - £29 | 03 |
| D. | £30 - £39 | 04 |
| E. | £40 - £49 | 05 |
| F. | £50 - £59 | 06 |
| G. | £60 - £79 | 07 |
| H. | £80 - £99 | 08 |
| I. | £100 - £119 | 09 |
| J. | £120 - £139 | 10 |
| K. | £140 - £159 | 11 |
| L. | £160 or over | 12 |

H72 . Is there a car or van normally available for private use by you or any members of your household?

IF YES How many cars or vans?

INCLUDE any provided by employers if normally available for private use by the household. **EXCLUDE** vehicles used solely for the carriage of goods.

	**
None.....	0
One.....	1
Two	2
3+	3

H73. **INTERVIEWER CODE:** Who answered these household questions?

ENTER PERSON NUMBER(S) FROM HOUSEHOLD GRID

1st PERSON

--	--

_

2nd PERSON

--	--

_

3rd PERSON

--	--

_

Hours

--	--

_

Minutes

--	--

_

TIME AT END

Filename: W2HHQ.DOC
Directory: O:\ANNEB\3794\MRDOC\WORD\WAVE2
Template: C:\MSOFFICE\WINWORD\TEMPLATE\NORMA
L.DOT
Title: household [mainstage]
Subject:
Author: S1480
Keywords:
Comments:
Creation Date: 23/01/98 15:45
Revision Number: 2
Last Saved On: 23/01/98 15:45
Last Saved By: S1480
Total Editing Time: 8 Minutes
Last Printed On: 29/01/98 17:20
As of Last Complete Printing
Number of Pages: 22
Number of Words: 4,312 (approx.)
Number of Characters: 24,584 (approx.)

NOP/62533
1-5

CARD 19
6-8

Wave	Serial Number	Household No	Check No	Person No
<input type="text" value="2"/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/>
	9 10-14	15	16	17-18

LIVING IN BRITAIN

WAVE 2

INDIVIDUAL QUESTIONNAIRE

NEIGHBOURHOOD AND INDIVIDUAL DEMOGRAPHICS

D1a. DATE OF INTERVIEW

DAY	MONTH	YEAR
<input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
_	**_**	9 <input type="text" value=""/>

D1b. TIME BEGUN

HOURS	MINUTES
<input type="text" value=""/> <input type="text" value=""/>	<input type="text" value=""/> <input type="text" value=""/>
_	**_**

FOR INTERVIEWER REFERENCE

INTERVIEWER CHECK

(FROM COVERSHEET PAGE 2, COLUMN 7)

a) Was respondent interviewed last year?

Yes1
No2

**

(FROM HOUSEHOLD GRID)

b) Is respondent responsible adult for child 12 or under?

Yes1
No2

**

THE FOLLOWING STATEMENT MUST BE READ TO ALL RESPONDENTS:

This interview is completely voluntary -- if we should come to any question that you don't want to answer, just let me know and we'll go on to the next question.

I'd like to start with some questions about yourself and where you live.

D2. Overall, do you like living in this neighbourhood? **

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

D3. If you could choose, would you stay here in your present home or would you prefer to move somewhere else? **

- Stay here ----- 1 GO TO D5
- Prefer to move ----- 2 ASK D4
- Don't know ----- 8 GO TO D5

D4. What is the main reason why you would prefer to move?

OFFICE CODE

--	--

** - 33

D5. Can I just check, have you yourself lived in this (house/flat) for more than a year, that is since before September 1st 1991?

- Yes ----- 1 GO TO D10
- No ----- 2 ASK D6

D6. In what month did you move here?

WRITE IN: MONTH YEAR

		19		
**	**		**	**

D7. Did you move for reasons that were wholly or partly to do with your own job, or employment opportunities?

- Yes ----- 1 ASK D8
- No ----- 2 GO TO D9

D8. **SHOWCARD 1**

Which, if any of the reasons listed on this card were reasons for you moving?

CODE ALL THAT APPLY

- a) Employer moved job to another workplace ----- 01 ****
- b) Got a different job with the same
 employer which meant moving workplace ----- 02 ****
- c) Moved to start a new job with a new employer - 03 ****
- d) Moved to be nearer work
 but didn't move workplace----- 04 ****
- e) Moved to start own business ----- 05 ****
- f) Decided to relocate own business ----- 06 ****
- g) Salary increased so could afford to move home 07 ****
- h) Moved to look for work ----- 08 ****
- i) None of the above ----- 00 ****

D9. What were your (other) main reasons for moving?

WRITE IN _____

OFFICE CODE

-		**-**	

D10 . Would you please tell me your exact date of birth?

IF CANNOT GIVE EXACT DATE OBTAIN NEAREST YEAR AND CODE DAY/MONTH = 98

WRITE IN:

DAY	MONTH	YEAR							
<table border="1" style="border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>			<table border="1" style="border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>			<table border="1" style="border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> </table>			
-	**-**	**-**							

1

D11. **INTERVIEWER CHECK: RESPONDENT IS** **

- Male ----- 1
- Female ----- 2

D12. **INTERVIEWER CHECK (FRONT PAGE)**

Was respondent interviewed last year?

- Yes ----- 1 ASK D13
- No ----- 2 **GO TO D22 (page 8)**

FOR RESPONDENTS INTERVIEWED LAST YEAR

D13 . **SHOWCARD 2**

Please look at this card and tell me which best describes your current situation?

CODE ONE ONLY

- Self employed ----- 01
 - In paid employment ----- 02
(full or part-time) **ASK D14**
 - Unemployed ----- 03
 - Retired from paid work altogether ----- 04
 - On maternity leave ----- 05
 - Looking after family or home ----- 06
 - Full-time student/ at school ----- 07 **GO TO D16**
 - Long term sick or disabled ----- 08
 - On a government training scheme ----- 09 **ASK D14**
 - Something else (**PLEASE GIVE DETAILS**) -----
-
- 10

D14. Have you attended any education institution full-time since September 1st last year?

- Yes ----- 1 **ASK D15**
- No ----- 2 **GO TO D17**

D15. When did you leave this education institution?

MONTH YEAR

WRITE IN:

--	--

 19

--	--

--* *-*-*

D16. **SHOWCARD 3**

Could you look at this card and tell me what type of education institution (you are attending/you attended last)?

- Comprehensive school ----- 01
 - Grammar school (not fee-paying) ----- 02
 - Fee paying Grammar school ----- 03
 - Sixth form College/Tertiary College ----- 04
 - Public or other private school ----- 05
 - Other type of school
(**PLEASE GIVE DETAILS**) ----- 06
-
- Nursing school/Teaching Hospital ----- 07
 - College of further/higher education ----- 08
 - Other College or training establishment ----
(**PLEASE GIVE DETAILS**) ----- 09
-

Polytechnic/Scottish Central Institutions -- 10
University ----- 11

D17. **SHOWCARD 4****CARD 20**

Please look at this card. Have you gained any of the qualifications listed since September 1st, last year?

Yes ----- ^{**} 1 **ASK D18**
 No ----- 2 **GO TO D19**

D18. Which qualifications have you gained since then?

CODE ALL THAT APPLY

- a) Youth training certificate ----- 01 ****
- b) Recognised trade apprenticeship completed ----- 02 ****
- c) Clerical and commercial qualifications
 (eg typing/shorthand/book-keeping/commerce) ----- 03 ****
- d) City & Guilds Certificate -
 Craft/Intermediate/Ordinary/Part I ----- 04 ****6
- e) City & Guilds Certificate - Advanced/Final/Part II ----- 05 ****
- f) City & Guilds Certificate - Full Technological/Part III ----- 06 ****
- g) Ordinary National Certificate (ONC) or Diploma (OND),
 BEC/TEC/BTEC National/General Certificate or Diploma -- 07 ****
- h) Higher National Certificate (HNC) or Diploma (HND),
 BEC/TEC/BTEC Higher Certificate or Higher Diploma ----- 08 ****
- i) Nursing qualifications (eg SEN, SRN, SCM RGN) ----- 09 ****
- j) Teaching qualifications (not degree) ----- 10 ****
- k) University diploma ----- 11 ****
- l) University or CNAA First Degree (eg BA, B.Ed, BSc) ----- 12 ****
- m) University or CNAA Higher Degree (eg MSc, PhD) ----- 13 ****
- n) Other technical, professional or higher qualifications
 (PLEASE GIVE DETAILS) _____ 14 ****

D19. **SHOWCARD 5**

CARD 21

Please look at this card. Have you obtained any of the qualifications listed since September 1st, last year?

Yes ----- ^{**} 1 **ASK D20**
 No ----- 2 **GO TO D36 (page**

12)

D20. Which qualifications have you obtained?

CIRCLE CODE IN GRID FOR EACH MENTIONED ASK D21

D21. How many subjects did you pass in? **(DOES NOT APPLY TO CPVE)**

ENTER IN GRID BELOW AND GO TO D36 (page 12)

	D20	D21	
		NUMBER HELD	
<u>ENGLISH/WELSH SCHOOL EXAMS</u>			
a) GCSE grades D-G	01	<input type="text"/> <input type="text"/>	****
b) GCSE grades A-C	02	<input type="text"/> <input type="text"/>	****
c) A level	03	<input type="text"/> <input type="text"/>	****
d) CPVE: Certificate of Pre-Vocational Education	04	<input type="text"/> <input type="text"/>	****
<u>SCOTTISH SCHOOL EXAMS</u>			
e) SCE Ordinary Grade bands D-E or 4-5	05	<input type="text"/> <input type="text"/>	****
f) O grades (pass or bands A-C or 1-3)	06	<input type="text"/> <input type="text"/>	****
g) Standard Grade level 4-7	07	<input type="text"/> <input type="text"/>	****
h) Standard Grade level 1-3	08	<input type="text"/> <input type="text"/>	****
i) Higher Grade or Revised Higher Grade	09	<input type="text"/> <input type="text"/>	****
j) Certificate of 6th year studies	10	<input type="text"/> <input type="text"/>	****
<u>OTHER (INCLUDING FOREIGN QUALIFICATIONS)</u>			
k) Other School Exams	11	<input type="text"/> <input type="text"/>	****
(PLEASE GIVE DETAILS)			

NOW GO TO D36 (page 12)

FOR RESPONDENTS NOT INTERVIEWED LAST YEAR

D22. Where were you born?

OFFICE CODE

--	--	--	--

IF UK:
RECORD VILLAGE OR TOWN AND COUNTY
IF CITY: PROBE FOR DISTRICT

_____ GO TO D24

OFFICE CODE

--	--

IF NOT UK:
RECORD COUNTRY ONLY _____ ASK D23

D23. In what year did you first come to this country to live (even if you have spent time abroad since)?

ENTER YEAR:

19

--	--

Don't know ----- ** 8
 Refused ----- ** 9

D24. **SHOWCARD 6**

Could you look at this card please and tell me which of these groups you consider you belong to?

- White ----- 01
- Black - Caribbean ----- 02
- Black - African ----- 03
- Black - Other

(PLEASE GIVE DETAILS)

_____ 04

- Indian ----- 05
- Pakistani ----- 06
- Bangladeshi ----- 07
- Chinese ----- 08
- Any other ethnic group

(PLEASE GIVE DETAILS)

_____ 09

Refused ----- 99

D25. **SHOWCARD 7**

CARD 22

Please look at this card and tell me which best describes your current situation?

CODE ONE ONLY

- | | |
|---|---------------------|
| | *** |
| Self employed ----- | 01 |
| In paid employment ----- | 02 |
| (full or part-time) | ASK D26 |
| Unemployed ----- | 03 |
| Retired from paid work altogether ----- | 04 |
| On maternity leave ----- | 05 |
| Looking after family or home ----- | 06 |
| Full-time student/ at school ----- | 07 GO TO D27 |
| Long term sick or disabled ----- | 08 |
| On a government training scheme ----- | 09 ASK D26 |
| Something else (PLEASE GIVE DETAILS) | |
| _____ | 10 |

D26. How old were you when you left school?

DO NOT INCLUDE TECHNICAL COLLEGE

**

- | | |
|----------------------------|--------------------|
| Never went to school ----- | 1 GO TO D29 |
| Still at school ----- | 2 ASK D27 |

WRITE IN AGE:

--	--

D27. **SHOWCARD 8**

Could you look at this card and tell me what type of school (you are attending/you attended last)?

- | | |
|---|----|
| | ** |
| Comprehensive school ----- | 1 |
| Grammar school (<u>not</u> fee-paying) ----- | 2 |
| Fee paying Grammar school ----- | 3 |
| Sixth form College/Tertiary College ---- | 4 |
| Public or other private school ----- | 5 |
| Elementary school ----- | 6 |
| Secondary modern/secondary school ----- | 7 |
| Technical school (not college) ----- | 8 |
| Other type of school | |
| (PLEASE GIVE DETAILS) | |
| _____ | 9 |

D28. **INTERVIEWER CHECK (D26 code 02)**

Is respondent still at school?

**

- | | |
|-----------|--------------------|
| Yes ----- | 1 GO TO D33 |
|-----------|--------------------|

No ----- 2 **ASK D29**

D29. **SHOWCARD 9**

Please look at this card and tell me which, if any, of these further education institutions you have attended full-time or are attending?

IF MORE THAN ONE, CODE MOST RECENT

**

- Nursing school/Teaching Hospital ----- 1
- College of further/higher education ----- 2 **ASK D30**
- Other College or training establishment-----
- (PLEASE GIVE DETAILS)**

_____ 3

- Polytechnic/Scottish Central Institutions ---- 4
- University ----- 5 _____
- None of above ----- 7 **GO TO D31**

D30. How old were you when you left there, or when you finished or stopped your course?

**

Still in further education ----- 1

WRITE IN AGE:

--	--

_

D31. **SHOWCARD 10****CARD 23**

Please look at this card. Do you have any of the qualifications listed?

**

Yes ----- 1 **ASK D32**
 No ----- 2 **GO TO D33**

D32. Which qualifications do you have?

CODE ALL THAT APPLY

- a) Youth training certificate ----- 01 ****
- b) Recognised trade apprenticeship completed ----- 02 ****
- c) Clerical and commercial qualifications
 (eg typing/shorthand/book-keeping/commerce) ----- 03 ****
- d) City & Guilds Certificate -
 Craft/Intermediate/Ordinary/Part I ----- 04 ****
- e) City & Guilds Certificate - Advanced/Final/Part II ----- 05 ****
- f) City & Guilds Certificate - Full Technological/Part III ----- 06 ****
- g) Ordinary National Certificate (ONC) or Diploma (OND),
 BEC/TEC/BTEC National/General Certificate or Diploma -- 07 ****
- h) Higher National Certificate (HNC) or Diploma (HND),
 BEC/TEC/BTEC Higher Certificate or Higher Diploma ----- 08 ****
- i) Nursing qualifications (eg SEN, SRN, SCM, RGN) ----- 09 ****
- j) Teaching qualifications (not degree) ----- 10 ****
- k) University diploma ----- 11 ****
- l) University or CNAA First Degree (eg BA, B.Ed, BSc) ----- 12 ****
- m) University or CNAA Higher Degree (eg MSc, PhD) ----- 13 ****
- n) Other technical, professional or higher qualifications
- (PLEASE GIVE DETAILS)** _____ 14 ****

D33 . Please look at this card. Do you have any of the qualifications listed?

Yes ----- 1 ASK D34
 No ----- 2 GO TO D36

D34. Which qualifications do you have? **CIRCLE CODE IN GRID**
FOR EACH MENTIONED ASK D35

D35 . How many subjects did you pass in? **ENTER IN GRID BELOW**

	D34	D35	
<u>ENGLISH AND WELSH SCHOOL EXAMS</u>		<u>NUMBER HELD</u>	
a) School Certificate or Matriculation -----	01 -----	UAAAAAAAAA; 3 3 g	****
b) CSE grade 2-5 -----	02 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
c) CSE grade 1 -----	03 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
d) GCSE grades D-G -----	04 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
e) GCSE grades A-C -----	05 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
f) O level (obtained before 1975) ----	06 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
g) O level A-C (1975 or later) -----	07 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
h) O level D,E (1975 or later) -----	08 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
i) Higher School Certificate -----	09 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
j) A level -----	10 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
<u>SCOTTISH SCHOOL EXAMS</u>			
k) SCE Ordinary Grade bands D-E or 4-5 (1973 or later) -----	12 -----	UAAAAAAAAA; 3 3 g	****
l) O grades (pass or bands A-C or 1-3) --	13 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
m) Standard Grade level 4-7 -----	14 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
n) Standard Grade level 1-3 -----	15 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
o) Higher Grade -----	16 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
p) Certificate of 6th year studies ---	17 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
q) SLC: School Leaving Certificate - Lower Grade -----	18 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
r) SLC: School Leaving Certificate - Higher Grade -----	19 -----	AAAAAAAAAAU UAAAAAAAAA; 3 3 g	****
<u>OTHER (INCLUDING FOREIGN QUALIFICATIONS)</u>			
s) Other ----- (PLEASE GIVE DETAILS)	20 -----	UAAAAAAAAA; 3 3 g	****

CARD 26

ASK ALL

D36 . Do you normally read a daily newspaper? **

- Yes ----- 1 **ASK D37**
- No ----- 2 **GO TO D40**

D37 . Which one? **CODE FIRST TWO MENTIONS
IF MORE THAN ONE ASK D38**

D38 . Which one do you read most frequently?

	<u>D37</u>		D38
	1st	2nd	most
	mention	mention	frequent
	****	****	**_**
Daily Express -----	01	01	01
Daily Mail -----	02	02	02
Daily Mirror/Record -----	03	03	03
Daily Star -----	04	04	04
The Sun -----	05	05	05
Today -----	06	06	06
Daily Telegraph -----	07	07	07
Financial Times -----	08	08	08
The Guardian -----	09	09	09
The Independent -----	10	10	10
The Times -----	11	11	11
Morning Star -----	12	12	12
Other Irish/Northern Irish/Scottish/ Regional or local daily morning paper (WRITE IN)			
_____	13	13	13
Evening paper/Other (WRITE IN)			
_____	14	14	14

D39 . Which political party do you think (**IF ONE MENTION ONLY,
PAPER AT D37; OTHERWISE D38**) generally supports?

**

- Conservative ----- 1
- Labour ----- 2
- Other (**SPECIFY**)
- _____ 3
- None ----- 4
- Don't know ----- 8

D40 . **SHOWCARD 12**

I will read some statements that are sometimes made about what is just and unjust in Britain.

Please tell me which answer on this card comes closest to your view on each of these statements?

READ OUT a) to d) BELOW

	STRONGLY AGREE	AGREE	NEITHER AGREE NOR DISAGREE	DISAGREE	STRONGLY DISAGREE	CAN'T CHOOSE	
a) It is just that those who can afford it obtain better education for their children	1	2	3	4	5	8	**
b) It is all right if businessmen make good profits because everybody benefits in the end	1	2	3	4	5	8	**
c) It is unjust that rich people are able to buy themselves better health care than poor people	1	2	3	4	5	8	**
d) In Britain, people have equal opportunities to get ahead	1	2	3	4	5	8	**

D41 . **INTERVIEWER CHECK:** Who was present during this section?
CODE ALL THAT APPLY

- ****
- a) Respondent alone ----- 1
 - b) Partner present ----- 2
 - c) Other adult(s) present ----- 3
 - d) Child(ren) present ----- 4

HEALTH AND CARING

	HOURS	MINUTES
TIME BEGUN	ÚÁÁÁÁÁÁÁÁÁÁ¿ 3 3 3	ÚÁÁÁÁÁÁÁÁÁÁ¿ 3 3 3
	ÁÁÁÁÁÁÁÁÁÁÙ ***	ÁÁÁÁÁÁÁÁÁÁÙ ***

I would now like to ask you about your health and the use you make of health services.

M1 Please think back over the last 12 months about how your health has been. Compared to people of your own age, would you say that your health has on the whole been ...READ OUT

**

- | | |
|---------------------|---|
| Excellent ----- | 1 |
| Good ----- | 2 |
| Fair ----- | 3 |
| Poor ----- | 4 |
| or Very Poor? ----- | 5 |
| Don't know ----- | 8 |

M2 How energetic do you feel compared to most people of your age ?
Would you say you are . . . **READ OUT**

**

- | | |
|-------------------------|---|
| More energetic ----- | 1 |
| About the same ----- | 2 |
| Or less energetic -- -- | 3 |
| Don't know ----- | 8 |

M3 Can I check, are you registered as a disabled person, either with Social Services or with a green card?

**

- | | |
|-----------|---|
| Yes ----- | 1 |
| No ----- | 2 |

M4 **SHOWCARD 13**

Do you have any of the health problems or disabilities listed on this card? You can just tell me which letters apply.

EXCLUDE TEMPORARY CONDITIONS

CODE ALL THAT APPLY OR CODE 'NONE'

- **
- None ----- 0 **GO TO M5**
- A Problems or disability connected with:
 arms, legs, hands, feet, back, or neck
 (including arthritis and rheumatism)01 **
- B Difficulty in seeing (other than needing
 glasses to read normal size print)02 **
- C Difficulty in hearing03 **
- D Skin conditions/allergies04 **
- E Chest/breathing problems, asthma, bronchitis05 **
- F Heart/blood pressure or blood
 circulation problems06 **
- G Stomach/liver/kidneys or digestive problems07 **
- H Diabetes08 **
- I Anxiety, depression or bad nerves09 **
- J Alcohol or drug related problems10 **
- K Epilepsy11 **
- L Migraine or frequent headaches12 **
- M Other health problems
 (PLEASE GIVE DETAILS)13 **
-

M5 Does your health in any way limit your daily activities compared to most people of your age?

??

- Yes ----- 1 **ASK M6**
- No ----- 2 **GO TO M7**

M6 **SHOWCARD 14**

Please look at this card and tell me which of these activities, if any, you would normally find difficult to manage on your own?

CODE ALL THAT APPLY

- a) Doing the housework ----- 1 **
- b) Climbing stairs ----- 2 **
- c) Dressing yourself ----- 3 **
- d) Walking for at least 10 minutes -- 4 **
- e) (None of these) ----- 5 **

M7 Does your health limit the type of work or the amount of work you can do?

INCLUDE BOTH PAID AND UNPAID WORK

**

Yes ----- 1 ASK M8
No ----- 2 **GO TO M10**

M8 Does your health keep you from doing some types of work?

**

Yes ----- 1
No ----- 2 ASK M9
Can do nothing ----- 3 GO TO M10
Don't know ----- 8 **ASK M9**

M9 For work you can do, how much does your health limit the amount of work you can do? **READ OUT**

**

A lot ----- 1
Somewhat ----- 2
Just a little -- 3
or Not at all? ---- 4

ASK ALL

M10 Since September 1st last year, approximately how many times have you talked to, or visited a GP or family doctor about your own health? Please do not include any visits to a hospital.

**

None ----- 1
One or two ----- 2
Three to five ----- 3
Six to ten ----- 4
More than ten ----- 5
Don't know ----- 8

M11 Since September 1st last year, did you have any kind of accident as a result of which you saw a doctor or went to hospital?

**

Yes ----- 1 ASK M12
No ----- 2 **GO TO M15**

M12 **IF YES AT M11:** Have you had one accident or more than one?

**

One ----- 1
 Two ----- 2
 Three ----- 3
 Four + ----- 4

FOR EACH ACCIDENT ASK:

M13 Which month did that happen in?

**IF MORE THAN THREE RECORD MOST RECENT
 PROMPT FOR YEAR IF NEEDED.**

**JAN = 01 FEB = 02 etc
 CAN'T REMEMBER = 98**

	1st ACCIDENT	2nd ACCIDENT	3rd ACCIDENT
	ÚÁÁÁÁÁÁÁÁÁ¿	ÚÁÁÁÁÁÁÁÁÁ¿	ÚÁÁÁÁÁÁÁÁÁ¿
	3 3 3	3 3 3	3 3 3
MONTH:	ÁÁÁÁÁÁÁÁÁÁÙ	ÁÁÁÁÁÁÁÁÁÁÙ	ÁÁÁÁÁÁÁÁÁÁÙ
	***	***	***
	ÚÁÁÁÁÁÁÁÁÁ¿	ÚÁÁÁÁÁÁÁÁÁ¿	ÚÁÁÁÁÁÁÁÁÁ¿
	3 3 3	3 3 3	3 3 3
YEAR: 19	ÁÁÁÁÁÁÁÁÁÁÙ	19 ÁÁÁÁÁÁÁÁÁÁÙ	19 ÁÁÁÁÁÁÁÁÁÁÙ
	***	***	***

M14 **FOR EACH ACCIDENT:-** Where did your accident happen?

CODE FIRST THAT APPLIES

	1st accident	2nd accident	3rd accident
	**	**	**
Sports facilities	----1	----- 1	----- 1
At normal workplace	----2	----- 2	----- 2
Home/garden	----3	----- 3	----- 3
At school or college	----4	----- 4	----- 4
In a motor vehicle	----5	----- 5	----- 5
On the road or pavement	----6	----- 6	----- 6
Other (SPECIFY)			
_____	----7	----- 7	----- 7

M15 Since September 1st last year, have you been in hospital or clinic as an in-patient overnight or longer?

**INCLUDE
 CHILDBIRTH**

**

Yes ----- 1 **ASK M16**
 No ----- 2 **GO TO M20**

M16 Since September 1st last year, in all, how many days have you spent in a hospital or clinic as an in-patient?

NUMBER OF DAYS: 3 3 3 3
ÜÄÄÄÄÄÄÄÄÄÄÄ;
ÄÄÄÄÄÄÄÄÄÄÄÜ

_

**

Don't know ----- 8
Refused ----- 9

M17 INTERVIEWER CHECK: IS RESPONDENT FEMALE AND UNDER 45?

**

Yes ----- 1 ASK M18
No ----- 2 GO TO M19

M18 Was any of this for child-birth?

**

Yes - all ----- 1
Yes - some ----- 2
No ----- 3

M19 Was/were your hospital stay(s) free under the National Health Service or paid for privately?
CODE ONE ONLY

**

All free under the NHS ----- 1
All paid for privately ----- 2
Some NHS/ some private ----- 3
Don't know ----- 8

ASK ALL

M20 SHOWCARD 15

Here is a list of some health and welfare services. Have you yourself made use of any of these services since September 1st last year?

**

Yes ----- 1 ASK M21
No ----- 2 GO TO M24

M21 Which services have you used?
(CODE ALL THAT APPLY IN GRID BELOW)
PROMPT FOR `Any Others'?

FOR EACH SERVICE USED ASK M22 AND M23

CARD 27

M22 Thinking about the (**SERVICE AT M21**) was this from the NHS or social services, or was it from a private or voluntary agency?

CODE IN GRID BELOW

M23 Was it all free or did you have to pay anything for this?

<u>M21.</u>	<u>M22.</u>	<u>M23.</u>
Used NHS/SSD	= 1	Free = 1
Private/Voluntary	= 2	Paid = 2
Both		
(codes 1 and 2)	= 3	Both = 3
Don't know	= 8	

a) Health visitor, district nurse -- 1	1 - 2 - 3 - 8	1 - 2 - 3	**-**
b) Home-help ----- 2	1 - 2 - 3 - 8	1 - 2 - 3	**-**
c) Meals on wheels -----v3	1 - 2 - 3 - 8	1 - 2 - 3	**-**
d) Social worker or welfare officer 4	1 - 2 - 3 - 8	1 - 2 - 3	**-**
e) Chiropodist ----- 5	1 - 2 - 3 - 8	1 - 2 - 3	**-**
f) Alternative medical practitioner (e.g. homeopath, osteopath) --- 6	1 - 2 - 3 - 8	1 - 2 - 3	**-**
g) Psychotherapist (including psychiatrist or analyst) --- 7	1 - 2 - 3 - 8	1 - 2 - 3	**-**
h) Speech therapist or occupational therapist ----- 8	1 - 2 - 3 - 8	1 - 2 - 3	**-**
i) Physiotherapist ----- 9	1 - 2 - 3 - 8	1 - 2 - 3	**-**
j) Any other health or welfare services? (PLEASE GIVE DETAILS)			
i) _____ 10	1 - 2 - 3 - 8	1 - 2 - 3	**-**
ii) _____ 11	1 - 2 - 3 - 8	1 - 2 - 3	**-**

M24 **SHOWCARD 16 FOR MEN; SHOWCARD 17 FOR WOMEN**

Would you please tell me whether you have had any of the health check-ups and tests listed on this card since September 1st last year?

**

Yes ----- 1 ASK M25
 No ----- 2 GO TO M27

M25 Which ones? You can just tell me which letters apply
FOR EACH MENTION RING CODE IN GRID AND ASK M26
INCLUDE TESTS DONE AS PART OF TREATMENT

CARD 28

M26 Did you get this on the NHS or was it private?

<u>M25.</u>	<u>M26.</u>	
Check ups/	NHS	= 1
Tests	Private	= 2
Both		= 3
Don't know		= 8

- | | | | |
|----|--------------------------------------|---|------------------|
| a) | dental check-up----- | 1 | 1 - 2 - 3 - 8*** |
| b) | eyesight test by an optician----- | 2 | 1 - 2 - 3 - 8*** |
| c) | chest/other x-rays----- | 3 | 1 - 2 - 3 - 8*** |
| d) | blood pressure ----- | 4 | 1 - 2 - 3 - 8*** |
| e) | cholesterol test----- | 5 | 1 - 2 - 3 - 8*** |
| f) | other (PLEASE GIVE DETAILS) | | |

	6	1 - 2 - 3 - 8***
--	---	------------------

FOR WOMEN ONLY

- | | | | |
|----|------------------------|---|------------------|
| g) | cervical smear ----- | 7 | 1 - 2 - 3 - 8*** |
| h) | breast screening ----- | 8 | 1 - 2 - 3 - 8*** |

M27 Do you smoke cigarettes?

**

Yes ----- 1 ASK M28
 No ----- 2 GO TO M29

M28 Approximately how many cigarettes a day do you usually smoke, including those you roll yourself?
IF VARIES, PROMPT FOR DAILY AVERAGE OVER LAST WEEK

UAAAAAAAAA;

NUMBER: 3 3 3 PER DAY

AAAAAAAAAÙ

Less than 1 = 00 ***

M29 **INTERVIEWER CHECK:** Is this a single person household?

**

Yes ----- 1 GO TO M32
 No ----- 2 ASK M30

M30 **INTERVIEWER CHECK (ASK IF NEEDED):**

Is there anyone living with you who is sick, handicapped or elderly whom you look after or give special help to (for example, a sick or handicapped (or elderly) relative/husband/wife/friend, etc)?

**

Yes ----- 1 ASK M31
 No ----- 2 GO TO M32
 Other (**SPECIFY**) 3

M31 Who is the person/people you look after?

ENTER PERSON NUMBER(S) FROM HOUSEHOLD GRID

1st	2nd	3rd
PER	PER	PER
SON	SON	SON

--	--	--	--	--	--

M32 Do you provide some regular service or help for any sick, handicapped or elderly person not living with you?

EXCLUDE HELP PROVIDED IN COURSE OF EMPLOYMENT

**

Yes ----- 1 GO TO M34
 No ----- 2 CHECK M33

M33 **INTERVIEWER CHECK:** Is M30 coded 'Yes'?

**

Yes ----- 1 GO TO M37
 No ----- 2 GO TO M38

M34 Is that one person or more than one?

IF MORE THAN ONE PROBE HOW MANY

ENTER NUMBER CARED FOR: $\bar{U}\bar{A}\bar{A}\bar{A}\bar{A}\bar{A}\bar{A}$
 3 3
 $\bar{A}\bar{A}\bar{A}\bar{A}\bar{A}\bar{A}\bar{U}$

**

M35 Who is it that you look after or help?

CODE FIRST TWO MENTIONED
CODE RELATIONSHIP TO RESPONDENT

	1st Dep	2nd Dep
	**	**
Parent/parent-in-law	1	1
Other relative (SPECIFY) _____	2	2
Friend or neighbour	3	3
Client(s) of voluntary organisation	4	4
Other (SPECIFY) _____	5	5

M36 Does (DEPENDANT) usually live in any of the following:- hospital, an old people's or nursing home, or a residential home for the disabled?

	1st Dep	2nd Dep
	**	**
Yes	1	1
No	2	2

ASK ALL CARE-GIVERS

M37 In total, how many hours do you spend each week looking after or helping (him/her/them)?

IF `VARIES' PROBE `Is that usually under or over 20 hours a week?'
INCLUDE CARE BOTH INSIDE AND OUTSIDE HOUSEHOLD

0 - 4 hours per week-----	01
5 - 9 hours per week-----	02
10-19 hours per week-----	03
20-34 hours per week-----	04
35-49 hours per week-----	05
50-99 hours per week-----	06
100 or more hours per week/ continuous care -----	07
Varies under 20 hours-----	08
Varies 20 hours or more-----	09
Other (SPECIFY) _____	10
Don't know -----	98

M38 **INTERVIEWER CHECK:** Who was present during this section?
CODE ALL THAT APPLY

- a) Respondent alone ----- 1
- b) Partner present ----- 2
- c) Other adult(s) present ----- 3
- d) Child(ren) present ----- 4

L6 . What month and year did you start living together?
IF CAN'T REMEMBER MONTH CODE `98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR
UAAAAAAAAAA¿ UAAAAAAAAAA¿
3 3 3 193 3 3
AAAAAAAAAAÙ AAAAAAAAAAAÙ
**** ****

L7 . Did that marriage end in divorce, widowhood, or something else?

**
Widowhood.....1 ASK L8
Divorce/annulment.....2 GO TO L9
Other (SPECIFY) _____3 GO TO L10

L8 . In what month and year were you widowed?
IF CAN'T REMEMBER MONTH CODE `98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR GO TO L11
UAAAAAAAAAA¿ UAAAAAAAAAA¿
3 3 3 193 3 3
AAAAAAAAAAÙ AAAAAAAAAAAÙ
**** ****

L9 . In what month and year did your divorce/annulment become final?
IF CAN'T REMEMBER MONTH CODE `98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR
UAAAAAAAAAA¿ UAAAAAAAAAA¿
3 3 3 193 3 3
AAAAAAAAAAÙ AAAAAAAAAAAÙ
**** ****

L10 . In what month and year did you stop living together?
IF CAN'T REMEMBER MONTH CODE `98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR
UAAAAAAAAAA¿ UAAAAAAAAAA¿
3 3 3 193 3 3
AAAAAAAAAAÙ AAAAAAAAAAAÙ
**** ****

L11 . INTERVIEWER CHECK: How many marriages are recorded at L3?

**
Two.....1 GO TO L27 (page 27)
Three or more.....2 ASK L12

L24 . In what month and year were you widowed?

CARD 30

IF CAN'T REMEMBER MONTH CODE `98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR

 UAAAAAAAAA; UAAAAAAAAA; GO TO L27

 3 3 3 193 3 3

 AAAAAAAAAAU AAAAAAAAAAU

 **** ****

L25 . In what month and year did your divorce/annulment become final?

IF CAN'T REMEMBER MONTH CODE `98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR

 UAAAAAAAAA; UAAAAAAAAA; GO TO L27

 3 3 3 193 3 3

 AAAAAAAAAAU AAAAAAAAAAU

 **** ****

L26 . In what month and year did you stop living together?

IF CAN'T REMEMBER MONTH CODE `98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR

 UAAAAAAAAA; UAAAAAAAAA; GO TO L27

 3 3 3 193 3 3

 AAAAAAAAAAU AAAAAAAAAAU

 **** ****

MOST RECENT MARRIAGE

(IF MORE THAN FOUR ASK ABOUT MOST RECENT)

L27 . In what month and year were you (last) married?

IF CAN'T REMEMBER MONTH CODE `98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR

 UAAAAAAAAA; UAAAAAAAAA; GO TO L27

 3 3 3 193 3 3

 AAAAAAAAAAU AAAAAAAAAAU

 **** ****

L28. **INTERVIEWER CHECK:** Write in person number of spouse (from Household Grid) (WRITE `00' IF WIDOWED/DIVORCED OR NOT IN HOUSEHOLD)

UAAAAAAAAA; GO TO L27

3 3 3

AAAAAAAAAAU

L29. (As you know more people are living together before getting married.) Did you and your husband/wife live together as a couple before getting married?

Yes.....1 **ASK L30**

No.....2 **GO TO L31**

COHABITATION

L35 . As you know some couples live together without actually getting married. Have you ever lived with someone as a couple for three months or more? (Please do not include the marriage(s) you have just told me about).

**

Yes.....1 ASK L36
 No.....2 GO TO L39

L36. In all, how many partners have you ever lived with for three months or more outside of marriage?

EXCLUDE MARRIAGE PARTNERS

WRITE IN: UAAAAAAAAA_{3 3 3} ASK L37
AAAAAAAAAU

**

Don't know.....8 ASK L37
 Refused.....9 GO TO L39

L37 . In what month and year did you start living with your (1st/2nd/3rd/etc) partner?

IF LIVED WITH SAME PARTNER MORE THAN ONCE, NOTE IN MARGIN

L38 . What month and year did you stop living together?

RECORD DATES OF START AND END OF ALL COHABITATION SPELLS (OR CIRCLE NOT ENDED CODE)

IF CAN'T REMEMBER MONTH CODE '98' AND OBTAIN YEAR

	L37				L38					
	Date Started		Date Ended		Date Ended		Date Ended		OR <u>Not</u>	
	MONTH	YEAR	MONTH	YEAR	MONTH	YEAR	MONTH	YEAR	<u>Ended</u>	
1st									1	**..**
2nd									1	****
3rd									1	****
4th									1	****
5th									1	****
6th									1	****
7th									1	****
8th									1	****
9th									1	****

L39 . Have you ever had any adopted or step children living with you? 10th

--	--	--	--

--	--	--	--

 1 ****

**
 Yes 1 **ASK L40**
 No 2 **GO TO L42**

L40 . How many step/adopted children have you had in all?

--	--

_

L41 . I would like to ask you about each adopted or step child
ASK a - g FOR EACH CHILD IN TURN, STARTING WITH THE ELDEST
WRITE IN OR CIRCLE CODES IN GRID ON NEXT PAGE

CARD 33

CARD 34

	1st Child	2nd Child	3rd Child	4th Child
a) What is the child's date of birth?	DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	_	**_**	**_**	**_**
b) Is the child a boy or a girl?	Boy 1 Girl..... 2	Boy 1 Girl 2	Boy 1 Girl 2	Boy 1 Girl..... 2
	**	**	**	**
c) Is s/he a step or adopted child?	Step 1 Adopted..... 2	Step..... 1 Adopted 2	Step 1 Adopted 2	Step 1 Adopted..... 2
	**	**	**	**
d) In what year did s/he begin living with you?	YEAR 19 <input type="text"/>	YEAR 19 <input type="text"/>	YEAR 19 <input type="text"/>	YEAR 19 <input type="text"/>
	_	**_**	**_**	**_**
e) Does s/he still live with you? IF `YES' REPEAT A-E IF MORE CHILDREN OTHERWISE GO TO L42	Yes 1 REPEAT FOR NEXT CHILD No 2 GO TO G Died 3 ASK F	Yes..... 1 REPEAT FOR NEXT CHILD No..... 2 GO TO G Died..... 3 ASK F	Yes 1 REPEAT FOR NEXT CHILD No..... 2 GO TO G Died..... 3 ASK F	Yes 1 GO TO L42 No 2 GO TO G Died 3 ASK F
	**	**	**	**
f) IF DIED When was that? REPEAT A-E IF MORE CHILDREN OTHERWISE GO TO L42	YEAR 19 <input type="text"/>	YEAR 19 <input type="text"/>	YEAR 19 <input type="text"/>	YEAR 19 <input type="text"/>
	_	**_**	**_**	**_**
g) IF LIVING ELSEWHERE What age was s/he when s/he last lived with you? REPEAT A-E IF MORE CHILDREN OTHERWISE GO TO L42	AGE <input type="text"/>	AGE <input type="text"/>	AGE <input type="text"/>	AGE <input type="text"/>
	_	**_**	**_**	**_**

L42. Do you have or have you ever had/fathered any children?
**BIOLOGICAL CHILDREN ONLY: INCLUDE STILLBIRTHS. EXCLUDE ADOPTED, FOSTERED
OR STEP CHILDREN**

Yes.....1 **ASK L43**
No.....2 **GO TO L45**

L43. How many children have you had/fathered in all?
INCLUDE STILLBIRTHS

--	--

L44. I would like to ask you about each child
**ASK a - e FOR EACH CHILD IN TURN STARTING WITH THE ELDEST
WRITE IN OR CIRCLE CODES IN GRID ON NEXT PAGE**

CARD 35

CARD 36

	1st Child	2nd Child	3rd Child	4th Child	
a) What is the child's date of birth?	DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR	
	<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"/> <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
	_	**_**	**_**	**_**	
b) Is the child a boy or a girl?	Boy 1 Girl..... 2	Boy 1 Girl 2	Boy 1 Girl 2	Boy 1 Girl 2	
	**	**	**	**	
c) Does s/he still live with you? IF `YES' OR STILL BORN REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	Yes..... 1 REPEAT FOR NEXT CHILD No 2 GO TO E Died 3 ASK D Stillborn 4 REPEAT FOR NEXT CHILD	Yes..... 1 REPEAT FOR NEXT CHILD No 2 GO TO E Died 3 ASK D Stillborn 4 REPEAT FOR NEXT CHILD	Yes 1 REPEAT FOR NEXT CHILD No..... 2 GO TO E Died..... 3 ASK D Stillborn..... 4 REPEAT FOR NEXT CHILD	Yes..... 1 REPEAT FOR NEXT CHILD No 2 GO TO E Died 3 ASK D Stillborn 4 REPEAT FOR NEXT CHILD	
	**	**	**	**	
	d) IF DIED When was that? REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	YEAR 19 <input type="text"/> <input type="text"/> ***	YEAR 19 <input type="text"/> <input type="text"/> ***	YEAR 19 <input type="text"/> <input type="text"/> **_**	YEAR 19 <input type="text"/> <input type="text"/> **_**
	e) IF LIVING ELSEWHERE What age was s/he when s/he last lived with you? REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	AGE <input type="text"/> <input type="text"/> ***	AGE <input type="text"/> <input type="text"/> ***	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**

CARD 37

CARD 38

	5th Child	6th Child	7th Child	8th Child
a) What is the child's date of birth?	DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR
	<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"/> <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	_	**_**	**_**	**_**
b) Is the child a boy or a girl?	Boy ** 1	Boy ** 1	Boy ** 1	Boy ** 1
	Girl 2	Girl 2	Girl 2	Girl 2
c) Does s/he still live with you? IF `YES' OR STILL BORN REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	Yes ** 1 REPEAT FOR NEXT CHILD	Yes ** 1 REPEAT FOR NEXT CHILD	Yes ** 1 REPEAT FOR NEXT CHILD	Yes ** 1 REPEAT FOR NEXT CHILD
	No 2 GO TO E	No 2 GO TO E	No 2 GO TO E	No 2 GO TO E
	Died 3 ASK D	Died 3 ASK D	Died 3 ASK D	Died 3 ASK D
	Stillborn 4 REPEAT FOR NEXT CHILD	Stillborn 4 REPEAT FOR NEXT CHILD	Stillborn 4 REPEAT FOR NEXT CHILD	Stillborn 4 REPEAT FOR NEXT CHILD
d) IF DIED When was that? REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	YEAR 19 <input type="text"/> <input type="text"/> ***	YEAR 19 <input type="text"/> <input type="text"/> ***	YEAR 19 <input type="text"/> <input type="text"/> **_**	YEAR 19 <input type="text"/> <input type="text"/> **_**
e) IF LIVING ELSEWHERE What age was s/he when s/he last lived with you? REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	AGE <input type="text"/> <input type="text"/> ***	AGE <input type="text"/> <input type="text"/> ***	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**

CARD 39

CARD 40

	9th Child	10th Child	11th Child	12th Child
a) What is the child's date of birth?	DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR	DAY MONTH YEAR
	<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"/> <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	_	**_**	**_**	**_**
b) Is the child a boy or a girl?	Boy 1 Girl..... 2	Boy 1 Girl 2	Boy 1 Girl 2	Boy 1 Girl 2
	**	**	**	**
c) Does s/he still live with you? IF `YES' OR STILL BORN REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	Yes 1 REPEAT FOR NEXT CHILD	Yes 1 REPEAT FOR NEXT CHILD	Yes 1 REPEAT FOR NEXT CHILD	Yes 1 GO TO L45
	No 2 GO TO E	No 2 GO TO E	No 2 GO TO E	No 2 GO TO E
	Died 3 ASK D	Died 3 ASK D	Died 3 ASK D	Died 3 ASK D
	Stillborn 4 REPEAT FOR NEXT CHILD	Stillborn 4 REPEAT FOR NEXT CHILD	Stillborn 4 REPEAT FOR NEXT CHILD	Stillborn 4 GO TO L45
	**	**	**	**
d) IF DIED When was that? REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	YEAR 19 <input type="text"/> <input type="text"/> **_**	YEAR 19 <input type="text"/> <input type="text"/> **_**	YEAR 19 <input type="text"/> <input type="text"/> **_**	YEAR 19 <input type="text"/> <input type="text"/> **_**
	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**
e) IF LIVING ELSEWHERE What age was s/he when s/he last lived with you? REPEAT A-C IF MORE CHILDREN OTHERWISE GO TO L45	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**
	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**	AGE <input type="text"/> <input type="text"/> **_**

L45 . **INTERVIEWER CHECK RESPONDENT IS:**

**

Male 16 - 64.....1 **ASK**
 Female 16 - 45.....2 **L46**
 Others.....3 **GO TO L49**

L46 . Do you think you will have any (more) children?
BIOLOGICAL CHILDREN ONLY; EXCLUDE ADOPTED, STEP OR FOSTER CHILDREN

**

Yes1 **ASK L47**
 Currently pregnant
 (self or partner).....2
 No3 **GO TO L49**
 Don't know4

L47 . How many (more) children do you think you will have?

IF RANGE, WRITE LOWER

--	--

**

Don't know8
 Refused.....9

L48 . **INTERVIEWER CHECK: Who was present during this section?**
CODE ALL THAT APPLY

a) Respondent alone1
 b) Partner present2
 c) Other adult(s) present3
 d) Child(ren) present4

**This page has deliberately
been left blank**

Employment Status History

(LIFE-CALENDAR CAN BE USED AS RECALL AID)

L49. When was the first time that you left full-time education?
 PROMPT FOR MONTH AND YEAR
 IF CAN'T REMEMBER MONTH CODE '98' AND OBTAIN YEAR

WRITE IN: MONTH YEAR ASK L50

****		****	

**
 Never left..... 0 GO TO E1 (page 41)

L50 . **SHOWCARD 18**
 Which description on this card comes closest to what you first did after leaving full-time education?
ENTER CODE IN FIRST ROW OPPOSITE, UNDER 'Status Code' L50
WRITE IN STATUS SO THAT YOU CAN REFER TO IT

SHOWCARD 18	
01	Self-employed
02	Full-time paid employment
03	Part-time paid employment
04	Unemployed
05	Retired from paid working altogether
06	Maternity leave
07	Looking after family or home
08	Full-time Student/At School
09	Long term sick or disabled
10	On a government training scheme
11	National Service/War Service
12	Something else (please give details)

L51 . When was the next time your situation changed, I mean a change to one listed on the card, even if only for a month or two.
WRITE IN MONTH AND YEAR. IF MONTH NOT KNOWN, CODE SEASON:

- 13 Winter
- 14 Spring
- 15 Summer
- 16 Autumn

IF STATUS STILL APPLIES CIRCLE 'Not Ended' AND GO TO E1 (page 41)

L52 . Which of the descriptions on the card best describes what you did next, even if it was only for month or so.
ENTER UNDER 'Status Code' ON GRID

REPEAT L51 AND L52 UNTIL THE STATUS THAT IS APPLICABLE TODAY IS REACHED. THEN CIRCLE 'Not Ended' AND GO TO E1 (page 41).

EMPLOYMENT

CARD 46

	HOURS	MINUTES
	UAAAAAAAAAAAAA¿	UAAAAAAAAAAAAA¿
TIME SECTION BEGUN	3 3 3	3 3 3
	AAAAAAAAAAAAAAÙ	AAAAAAAAAAAAAAÙ
	****	****

E1. Can I just check, did you do any paid work last week - that is in the seven days ending last Sunday - either as an employee or self employed?

**

Yes ----- 1 **GO TO E4**
 No ----- 2 **ASK E2**

E2. Even though you weren't working did you have a job that you were away from last week?

**

Yes ----- 1 **ASK E3**
 No ----- 2 **GO TO E92 (page 65)**
 Waiting to take up job ----- 3 **GO TO E101 (page 67)**

E3. What was the main reason you were away from work last week?

**

Maternity leave ----- 1
 Other leave/holiday ----- 2
 Sick/injured ----- 3
 Attending training course ----- 4
 Laid off/on short time ----- 5
 On strike ----- 6
 Other personal/family reasons
(GIVE DETAILS)

_____ 7
 Other reasons **(GIVE DETAILS)**

_____ 8

E4. Is your current job **(READ OUT)**

**

A permanent job ----- 1
 A seasonal, temporary or casual job ----- 2
 Or a job done under contract or for a
 fixed period of time? ----- 3

E5. What was your (main) job last week? Please tell me the exact job title and describe fully the sort of work you do.

IF MORE THAN ONE JOB: MAIN = JOB WITH MOST HOURS. IF EQUAL HOURS: MAIN JOB = HIGHEST PAID

ENTER JOB TITLE: _____

DESCRIBE FULLY WORK DONE: (IF RELEVANT 'WHAT ARE THE MATERIALS MADE OF?')

OFFICE CODE

--	--	--	--	--	--

26-31

E6. What does the firm/organisation you work for actually make or do (at the place where you work)?

DESCRIBE FULLY

OFFICE CODE

--	--	--	--

32-35

E7. Are you an employee or self-employed?

**

Employee ----- 1 **ASK E8**
Self-employed ----- 2 **GO TO E65 (page 58)**

E8. Do you have any managerial duties or do you supervise any other employees?

**

Manager ----- 1
Foreman/supervisor ----- 2
NOT manager or supervisor ----- 3

E9. How many people are employed at the place where you work?
INCLUDE ALL EMPLOYEES INCLUDING PART-TIME AND SHIFT WORKERS

- ****
- | | |
|---------------------------------------|----|
| 1 - 2 ----- | 01 |
| 3 - 9 ----- | 02 |
| 10 - 24 ----- | 03 |
| 25 - 49 ----- | 04 |
| 50 - 99 ----- | 05 |
| 100 - 199 ----- | 06 |
| 200 - 499 ----- | 07 |
| 500 - 999 ----- | 08 |
| 1000 or more ----- | 09 |
| | |
| Don't know but fewer
than 25 ----- | 10 |
| Don't know but 25
or more ----- | 11 |

E10. Thinking about your (main) job, how many hours,
excluding overtime and meal breaks, are you
 expected to work in a normal week?
IF NO NORMAL HOURS NOTE THIS IN MARGIN AND ASK FOR AVERAGE

WRITE IN: $\overline{\text{U}}\text{AAAAAAAAAA}\overline{\text{A}}$
 $\text{3} \quad \text{3} \quad \text{3}$ HOURS
 $\text{A}\text{AAAAAAAAAA}\text{U}$

**

Not applicable -----	7
Don't know -----	8
Refused -----	9

E11. And how many hours overtime do you usually work in a normal week?
NO USUAL: GIVE AVERAGE

WRITE IN: $\overline{\text{U}}\text{AAAAAAAAAA}\overline{\text{A}}$
 $\text{3} \quad \text{3} \quad \text{3}$ HOURS **ASK E12**
 $\text{A}\text{AAAAAAAAAA}\text{U}$

**

Don't know -----	8	ASK E12
None -----	0	GO TO E13

E12. How much of that overtime is usually paid overtime?
NO USUAL: GIVE AVERAGE

WRITE IN: $\overline{\text{U}}\text{AAAAAAAAAA}\overline{\text{A}}$
 $\text{3} \quad \text{3} \quad \text{3}$ HOURS
 $\text{A}\text{AAAAAAAAAA}\text{U}$

**

No paid overtime -----	0
Don't know -----	8

E17. **SHOWCARD 19**

I'm going to read out a list of various aspects of jobs, and after each one I'd like you to tell me from this card which number best describes how satisfied or dissatisfied you are with that particular aspect of your own present job (**READ OUT**)

(**WRITE IN NUMBER CHOSEN WHERE 1 = NOT SATISFIED AT ALL; 7 = COMPLETELY SATISFIED; 4 = NEITHER SATISFIED NOR DISSATISFIED**)

(**PROMPT IF NECESSARY: 'HOW SATISFIED WOULD YOU SAY YOU ARE WITH THE IN YOUR PRESENT JOB?'**).

DOESN'T APPLY TO ME = 0
DON'T KNOW = 8

- | | | | |
|---|---|-------------------------|----|
| 1 | Promotion prospects ----- | ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ | ** |
| 2 | The total pay, including any overtime
or bonuses ----- | ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ | ** |
| 3 | Relations with your supervisor or manager -- | ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ | ** |
| 4 | Your job security ----- | ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ | ** |
| 5 | Being able to use your own initiative ----- | ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ | ** |
| 6 | The actual work itself ----- | ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ | ** |
| 7 | The hours you work ----- | ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ | ** |

E18. All things considered, how satisfied or dissatisfied are you with your present job overall using the same 1 - 7 scale?

WRITE IN NUMBER CHOSEN -----	ÚÁÁÁÁ¿ 3 3 ÁÁÁÁÁÙ	**
Don't know = 8		

E23. RECORD PAY SLIP CHECK **

Respondent checked most recent payslip - 1
 Respondent checked earlier payslip ----- 2
 No payslip checked ----- 3

E24. Can you tell me what your Tax Code is?

WRITE IN: ÚAAAAAAAAAAAAAAAAAAAAAAAAAAAAÀ¿
 3 3 3 3 3 3
 AAAAAAAAAAAAAAAAAAAAAAAAAAAAAÙ

Don't know ----- 8
 Refused ----- 9

E25. Your take home pay last time was (**AMOUNT AT E21**).
 Is this the amount you usually receive (before any
 statutory sick pay or statutory maternity pay)?

**

Yes ----- 1 GO TO E30
 No ----- 2 **ASK E26**

E26. How much are you usually paid?
IF NO USUAL: GIVE AVERAGE

ENTER TO NEAREST £: ÚAAAAAAAAAAAAAAAAAAAAAAAAAAAA¿
 3 3 3 3 3 3 **ASK E27**
 AAAAAAAAAAAAAAAAAAAAAAAAAAAAAÙ

Don't know ----- 8 GO TO E29
 Refused ----- 9 **GO TO E30**

E27. What period does that cover?

**

Week ----- 1
 Fortnight ----- 2
 Four weeks ----- 3
 Calendar month ----- 4
 Other (**WRITE IN**)

OFFICE CODE
 ÚAAAAAAAAAAAA¿
 3 3 3 3
 AAAAAAAAAAAAAÙ

----- 5

E28. And is that before or after any deductions for tax,
 national insurance, union dues and so on or are there
 usually no deductions at all made from your salary?

**

Before deductions ---- 1
 After deductions ---- 2
 No deductions ----- 3
 Don't know ----- 8

E29. Can I just check, why was it that your pay last time was different from your usual pay?

CODE ALL THAT APPLY

- a) It included back pay ----- 1 **
 - b) It included advance holiday pay ----- 2 **
 - c) It included a tax refund ----- 3 **
 - d) It included statutory sick pay ----- 4 **
 - e) Absent due to sickness, no statutory
sick pay included ----- 5 **
 - f) It included statutory maternity pay ---- 6 **
 - g) Unusual amount of overtime ----- 7 **
 - h) Other (**SPECIFY**) ----- 8 **
-

E30 . **INTERVIEWER CHECK (FRONT PAGE)**
Was respondent interviewed last year?

- Yes ----- 1 **ASK E31**
- No ----- 2 **GO TO E46 (page 53)**

RESPONDENTS INTERVIEWED LAST YEAR

E31 . What was the date you started working in your present position?
 If you have been promoted or changed grades, please give me the date
 of that change. Otherwise please give me the date when you started
 doing the job you are doing now for your present employer.

```

          DAY          MONTH          YEAR
    ÚÁÁÁÁÁÁÁÁÁÁ¿  ÚÁÁÁÁÁÁÁÁÁÁ¿  ÚÁÁÁÁÁÁÁÁÁÁ¿
     3   3   3     3   3   3     3   3   3
    ÁÁÁÁÁÁÁÁÁÁÙ  ÁÁÁÁÁÁÁÁÁÁÙ  ÁÁÁÁÁÁÁÁÁÁÙ
          ***          ***          ***
    
```

IF DON'T KNOW DAY OR MONTH ENTER `98' CODE YEAR AND ASK E32, IF UNSURE

E32. **INTERVIEWER CHECK**

Is date at E31 September 1st 1991 or before?

**

DATE AT E31 IS: September 1st 1991 or BEFORE -- 1 **GO TO E64 (page 57)**
 AFTER September 1st 1991 ----- 2 **ASK E33**

SHOWCARD 20

E33. Which of the types of organisations on this card
 do you work for (in your main job)?

**

- Private firm/company/plc ----- 1
 - Civil Service or central government
 (not armed forces) ----- 2
 - Local government or town hall
 (inc local education, fire, police) -- 3
 - National Health Service or State
 Higher Education (inc polytechnics) -- 4
 - Nationalised Industry ----- 5
 - Non-profit making organisation (include
 charities, co-operatives etc) ----- 6
 - Armed forces ----- 7
 - Other (**PLEASE GIVE DETAILS**)
-
- 8

E34. Does your pay ever include incentive bonuses or
 profit related pay?

**

- Yes ----- 1
- No ----- 2

E35. Some people can normally expect their pay to rise every year by moving to the next point on the scale, as well as receiving negotiated pay rises. Are you paid on this type of incremental scale?

INCLUDE AS `YES' IF RESPONDENT IS AT TOP OF SCALE

**

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

E36. Is there a trade union, or a similar body such as a staff association, recognised by your management for negotiating pay or conditions for the people doing your sort of job in your workplace?

**

Yes -----	<u>1</u>	ASK E37
No -----	2	GO TO E38
Don't know -----	8	

E37. Are you a member of this trade union/association?

**

Yes -----	<u>1</u>	GO TO E39
No -----	2	ASK E38

E38. Are you a member of any trade union or similar body?

**

Yes -----	1
No -----	2

E39. In your current job do you have opportunities for promotion?

**

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

E44. Does your present employer run a pension scheme or
superannuation scheme for which you are eligible?
INCLUDE CONTRIBUTORY AND NON-CONTRIBUTORY SCHEMES

**

Yes -----	1	<u>ASK E45</u>
No -----	2	GO TO
Don't know -----	8	E64 (page 57)

E45. Do you belong to your employer's pension scheme?

**

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

NOW GO TO E64 (page 57)

RESPONDENTS NOT INTERVIEWED LAST YEARE46. **SHOWCARD 20**

Which of the types of organisations on this card
do you work for (in your main job)?

	**
Private firm/company/plc -----	1
Civil Service or central government (not armed forces) -----	2
Local government or town hall (inc local education, fire, police) --	3
National Health Service or State Higher Education (inc polytechnics) --	4
Nationalised Industry -----	5
Non-profit making organisation (include charities, co-operatives etc) -----	6
Armed forces -----	7
Other (PLEASE GIVE DETAILS)	
_____	8

E47. Does your pay ever include incentive bonuses or
profit related pay?

	**
Yes -----	1
No -----	2

E48. Some people can normally expect their pay to rise every
year by moving to the next point on the scale, as well
as receiving negotiated pay rises. Are you paid on
this type of incremental scale?

INCLUDE AS 'YES' IF RESPONDENT IS AT TOP OF SCALE

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

E49. Is there a trade union, or a similar body such as a
staff association, recognised by your management for
negotiating pay or conditions for the people doing
your sort of job in your workplace?

	**
Yes -----	1 ASK E50
No -----	2 GO TO E51
Don't know -----	8

E50. Are you a member of this trade union/association?

**

Yes ----- 1 GO TO E52
 No ----- 2 **ASK E51**

E51. Are you a member of any trade union or similar body?

**

Yes ----- 1
 No ----- 2

E52. In your current job do you have opportunities for promotion?

**

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

E53. **SHOWCARD 21**

Which of the categories on this card best describes the times of day you usually work? **CODE ONE ONLY**

**--28

Mornings only ----- 01
 Afternoons only ----- 02
 During the day ----- 03
 Evenings only ----- 04
 At night ----- 05
 Both lunchtime and evenings ----- 06
 Other times of day ----- 07
 Rotating shifts ----- 08
 Varies/no usual pattern ----- 09
 Other (**PLEASE GIVE DETAILS**)
 ----- 10

E54. Does your present employer run a pension scheme or superannuation scheme for which you are eligible?

INCLUDE CONTRIBUTORY AND NON-CONTRIBUTORY SCHEMES

**

Yes ----- 1 ASK E55
 No ----- 2 **GO TO**
 Don't know ----- 8 **E56**

E55. Do you belong to your employer's pension scheme?

**

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

E56 . What was the date you started working in your present position?
 If you have been promoted or changed grades, please give me the date
 of that change. Otherwise please give me the date when you started
 doing the job you are doing now for your present employer.

DAY	MONTH	YEAR
UAAAAAAAAA¿	UAAAAAAAAA¿	UAAAAAAAAA¿
3 3 3	3 3 3	3 3 3
AAAAAAAAAAÙ	AAAAAAAAAAÙ	AAAAAAAAAAÙ
***	***	***

IF DON'T KNOW DAY OR MONTH ENTER `98' CODE YEAR AND ASK E57, IF UNSURE

E57. INTERVIEWER CHECK

Is date at E56 September 1st 1991 or before?

**

DATE AT E56 IS: September 1st 1991 or BEFORE ----- 1 ASK E58
AFTER September 1st 1991 ----- 2 GO TO E61

E58 . Thinking back to September 1st last year, at that time how much
 were you usually paid?

ENTER TO NEAREST £: UAAAAAAAAAAAAAAAAAAAAAAAAA¿ ASK E59
 3 3 3 3 3 3
 AAAAAAAAAAAAAAAAAAAAAAAAAAÙ

NO USUAL PAY: GIVE AVERAGE

**

Same as now ----- 7
 Don't know ----- 8 GO TO E64
 Refused ----- 9 GO TO E64
 (page 57)

E59 . And what period did that cover?

**

Week ----- 1
 Fortnight ----- 2
 Four weeks ----- 3
 Calendar month ----- 4
 Year ----- 5

OFFICE CODE
 UAAAAAAAAA¿
 3 3 3 3
 AAAAAAAAAAÙ

Other (WRITE IN)

6

E63 . And was that before or after any deductions for tax, national insurance, union dues and so on or were there usually no deductions made at all from your salary?

**

Before deductions ---- 1
 After deductions ----- 2
 No deductions ----- 3
 Don't know ----- 8

ASK ALL EMPLOYEES

E64. In all, before tax and other deductions, how much have you earned in the past 12 months?

DO NOT PROBE, WRITE IN:

OFFICE CODE

--	--	--	--	--

**

Don't know ----- 8
 Refused ----- 9

NOW GO TO E82 (page 63)

E76. Where do you mainly work? Is it **(READ OUT)** **

At home ----- 1
From your own home ----- 2 **GO TO E79**
 From separate business premises ----- 3
 From a van or stall ----- 4 **ASK**
 From clients or customer's premises ----- 5 **E77**
 Or from some other place? **(GIVE DETAILS)**

6

E77. About how much time does it usually take for you to get to work each day, door to door?

ONE WAY JOURNEY ONLY
IF NO USUAL GIVE AVERAGE

WRITE IN NUMBER OF MINUTES:

UAAAAAAAAAAAAAAAAA
 3 3 3 3
 AAAAAAAAAAAAAAAAAA

Don't know ----- **
 8

E78. And what usually is your main means of travel to work?
CODE ONE ONLY

British rail, train ----- 1
 Underground, tube, metro ----- 2
 Bus, minibus or coach (public or private) ---- 3
 Motor cycle, scooter, moped ----- 4
Driving a car or van ----- 5
Passenger in car or van ----- 6
 Pedal cycle ----- 7
 On foot **(WALKS ALL WAY ONLY)** ----- 8
 Other **(SPECIFY)**

9

**

E79. **SHOWCARD 22**

I'm going to read out a list of various aspects of jobs, and for each one I'd like you to tell me from this card which number best describes how satisfied or dissatisfied you are with that particular aspect of your own present job (**READ OUT**)

(WRITE IN NUMBER CHOSEN WHERE 1 = NOT SATISFIED AT ALL;
7 = COMPLETELY SATISFIED; 4 = NEITHER SATISFIED NOR DISSATISFIED)

(PROMPT IF NECESSARY: `HOW SATISFIED WOULD YOU SAY YOU ARE WITH THE IN YOUR PRESENT JOB?'.)

DOESN'T APPLY TO ME = 0
DON'T KNOW = 8

- | | | | |
|---|---|--|----|
| 1 | The total pay, including any overtime
or bonuses ----- | ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ
ÚÁÁÁÁ¿
3 3 | ** |
| 2 | Your job security ----- | ÁÁÁÁÁÙ
ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ
ÚÁÁÁÁ¿
3 3 | ** |
| 3 | Being able to use your own initiative --- | ÁÁÁÁÁÙ
ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ
ÚÁÁÁÁ¿
3 3 | ** |
| 4 | The actual work itself ----- | ÁÁÁÁÁÙ
ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ
ÚÁÁÁÁ¿
3 3 | ** |
| 5 | The hours you work ----- | ÁÁÁÁÁÙ
ÚÁÁÁÁ¿
3 3
ÁÁÁÁÁÙ | ** |

E80. All things considered, how satisfied or dissatisfied are you with your present job overall using the same 1 - 7 scale?

WRITE IN NUMBER CHOSEN
 ÚÁÁÁÁ¿
 3 3
 ÁÁÁÁÁÙ
 **
 Don't know ----- 8

E81. On what date did you start doing your present job, by that I mean the beginning of your current spell of doing the work you are doing now on a self-employed basis?

DAY	MONTH	YEAR
ÚÁÁÁÁÁÁÁ¿	ÚÁÁÁÁÁÁÁ¿	ÚÁÁÁÁÁÁÁ¿
3 3 3	3 3 3	3 3 3
ÁÁÁÁÁÁÁÁÙ	ÁÁÁÁÁÁÁÁÙ	ÁÁÁÁÁÁÁÁÙ
--	**--**	**--**

IF DON'T KNOW DAY OR MONTH ENTER `98' AND CODE YEAR

ASK ALL CURRENTLY WORKING (E1 or E2 = 1)

CARD 50

E82 . Since September 1st last year, have you taken part in any education or training schemes or courses, as part of your present employment?

**

Yes ----- 1 **ASK E83**
 No ----- 2 **GO TO E85**

E83. Was any of this training (**READ OUT**)

Yes No

- a) Training to help you get started in your current job? ----- 1 --- 2 **
- b) To increase your skills in your current job for example by learning new technology? ----- 1 --- 2 **
- c) To improve your skills in your current job? ----- 1 --- 2 **
- d) To prepare you for a job or jobs you might do in the future? ----- 1 --- 2 **
- e) To develop your skills generally? ----- 1 --- 2 **

E84. Since September 1st last year, how long have you spent on this training? Please tell me approximately how many hours per week you spent on training, and how many weeks your course lasted in total.

(IF CAN'T SAY, WRITE APPROXIMATE TIME SPENT OVER YEAR, IN MARGIN)

HOURS
per week

WEEKS

WRITE IN:

--	--

 FOR

--	--

--

--

**

Don't know ----- 8

Refused ----- 9

E85. **INTERVIEWER CHECK (FRONT PAGE)**

Is respondent the Responsible Adult for any child/children aged 12 or under?

**
 Yes ----- 1 ASK E86
 No ----- 2 GO TO E101 (page 67)

E86. **SHOWCARD 23**

Which of the following best describes the way you arrange for your children aged 12 or under to be looked after while you are at work?

CODE UP TO 3 MENTIONS

	1st Mention	2nd Mention	3rd Mention
	****	****	****
01 I work only while they are at school	01	01	01
02 They look after themselves until I get home	02	02	02
03 I work from home	03	03	03
04 My spouse/partner looks after them	04	04	04
05 A <u>nanny or mother's help</u> looks after them at home	05	05	05
06 They go to a <u>work-place nursery</u>	06	06	06
07 They go to a <u>day nursery</u>	07	07	07
08 They go to a <u>child minder</u>	08	08	08
09 A <u>relative</u> looks after them	09	09	09
10 A <u>friend or neighbour</u> looks after them	10	10	10
11 Other (PLEASE GIVE DETAILS)	11	11	11

E87. **INTERVIEWER CHECK:**

IF ANY CODES 5 - 11 RINGED ABOVE: ASK E88

IF ONLY CODES 1 - 4 RINGED ABOVE: GO TO E91

E88. Is this childcare free of charge or does some or all of it have to be paid for?

**
 All free of charge ----- 1 GO TO E92
 Some/all paid for ----- 2 ASK E89

E89. About how much a week on average does the childcare cost?

UAAAAAAAAAAAAAAAAA
 ENTER TO NEAREST £: 3 3 3 3
 AAAAAAAAAAAAAAAAAA

Don't know ----- 8
 Refused ----- 9

**

E90. **SHOWCARD 24**

Which of the statements on this card comes closest to how you pay for this childcare?

**

I pay for all of it out of my wages/salary --- 1
 I pay for most of it out of my wages/salary -- 2
 I share the cost equally with my spouse/
 partner ----- 3
 My spouse/partner pays for most of it ----- 4
 My spouse/partner pays for all of it ----- 5
 Other (**PLEASE GIVE DETAILS**)

6

E91. Who usually looks after your children when they are ill?
CODE ONE ONLY

**

AÄÄÄ
 Respondent ----- 1 3
 Spouse/partner ----- 2 **GO TO**
 Mother's help/nanny ----- 3 **E101 (page 67)**
 Relative ----- 4 3
 Friend/neighbour ----- 5 3
 Other (**GIVE DETAILS**) 3
 ----- 6 3
 ----- 3
 It varies ----- 7 3
 AÄÄÄ

ASK ALL NOT CURRENTLY WORKING (E2=2)

E92. Have you looked for any kind of paid work in the last week, that is the 7 days ending yesterday?

**

Yes ----- 1 **GO TO E95**
 No ----- 2 **ASK E93**

E93. Have you looked for any kind of paid work in the last four weeks?

**

Yes ----- 1 **GO TO E95**
 No ----- 2 **ASK E94**

E94. Although you are not looking for paid work at the moment, would you like to have a regular paid job even if only for a few hours a week?

**

Yes ----- 1 **ASK E95**
No ----- 2 **GO TO E101**

E95. Are you looking for (Would you like to have) a particular kind of job or any sort of job you could find?

**

Particular ----- 1 **ASK E96**
Any sort/both ----- 2 **GO TO E97**

E96. What sort of job would that be? Could you give me if possible a job title and describe the sort of work you would be doing?

ENTER JOB TITLE:

OFFICE CODE

--	--	--	--	--

DESCRIBE FULLY WORK DONE:

E97 . About how many hours in a week do you think you would be able to work?

WRITE IN: HOURS
 3 3 3
 AAAAAAAAAA

**

None ----- 0 **GO TO**
Don't know ----- 8 **E99**

E98. What weekly take-home pay would you expect to get (for that)?

ENTER TO NEAREST £:
 3 3 3 3 3
 AAAAAAAAAAAAAAAAAAAAA

**

Don't know ----- 8
Refused ----- 9

E104. Do you currently earn any money from (a second job) odd jobs or from work that you might do from time to time (apart from your main job)?

INC BABY SITTING, MAIL ORDER AGENT, POOLS AGENT ETC

**

Yes ----- 1 ASK E105
 No ----- 2 GO TO E109

E105. What is it that you do (and what does the firm or person you work for make or do)?

ENTER JOB TITLE:

OFFICE CODE

--	--	--	--	--	--

DESCRIBE FULLY WORK DONE:

E106. Are you an employee or self employed?

**

Employee ----- 1
 Self-employed ----- 2

E107. How many hours do you usually work a month in your second/odd job(s), excluding meal breaks but including any overtime you might do?

NO USUAL: GIVE AVERAGE

WRITE IN : UAAAAAAAAAA;
 3 3 3 HOURS
 AAAAAAAAAAAU

Don't know ----- 8

**

E108. Before tax and other deductions how much did you earn from your second and all other occasional jobs in the last calendar month?

ENTER TO NEAREST £: UAAAAAAAAAAAAAAAAAAAAAAAAAA;
 3 3 3 3 3
 AAAAAAAAAAAAAAAAAAAAAAAAAAAU

Don't know ----- 8
 Refused ----- 9

**

E109. **INTERVIEWER CHECK RESPONDENT IS**

**

Male 16-64 -----	1	ASK
Female 16-59 -----	2	<u>E110</u>
Others -----	3	GO TO E111

E110. In the past year have household or family responsibilities ever **READ OUT**

	Yes	No	
a) <u>prevented</u> you from looking for a job? -----	1	2	**
b) prevented you from accepting a full-time job that you were offered? -----	1	2	**
c) prevented you from changing jobs? -----	1	2	**
d) <u>required</u> you to change your job ? -----	1	2	**
e) required you to leave paid employment? -----	1	2	**
f) required you to work fewer hours? -----	1	2	**

E111 . **INTERVIEWER CHECK:** Who was present during this section?
CODE ALL THAT APPLY

a) Respondent alone -----	1
b) Partner present -----	2
c) Other adult(s) present -----	3
d) Child(ren) present -----	4

**This page has deliberately
been left blank**

EMPLOYMENT HISTORY

CARD 52

	HOURS		MINUTES
	UAAAAAAAAAAAAU	U	UAAAAAAAAAAAAU
	3 3 3	3	3 3 3
TIME SECTION BEGUN	AAAAAAAAAAAAAU		AAAAAAAAAAAAAU
	***		***

J1. **INTERVIEWER CHECK (D13 or D25 code 07)**
Is respondent full-time student/at school?

**

Yes ----- 1 GO TO J9 (page 4)

No ----- 2 ASK J2

J2 . (Other than any training schemes you've already told me about that were part of your present employment) Since September 1st last year, have you taken part in any education or training at all? Please include government training schemes, open university courses, correspondence courses and work experience schemes.

EXCLUDE LEISURE COURSES
INCLUDE ANY TRAINING FROM PREVIOUS EMPLOYERS

**

Yes ----- 1 ASK J3

No ----- 2 GO TO J5

J3 . Was any of this education or training? (**READ OUT**)

	Yes	No	
a) To develop your skills <u>generally</u> ?	----- 1	----- 2	**
b) To prepare you for a job or jobs you might do in the future?	----- 1	----- 2	**
c) To increase your skills in your <u>current job</u> , for example by learning new technology?	----- 1	----- 2	**
d) To improve your skills in your <u>current job</u> ?	----- 1	----- 2	**

J4. Since September 1st last year, how long have you spent on this training? Please tell me approximately how many hours per week you spent on training, and how many weeks your course lasted in total.
(IF CAN'T SAY, WRITE APPROXIMATE TIME SPENT OVER YEAR, IN MARGIN)

	HOURS		WEEKS
	per week		
WRITE IN:			FOR
	***		***

**

Don't know ----- 8

Refused ----- 9

J5. **INTERVIEWER CHECK (FRONT PAGE)**
 Was respondent interviewed last year?

**

Yes ----- 1 CHECK J6
 No ----- 2 CHECK J7

EITHER COMPLETE J6 OR J7 , NOT BOTH

RESPONDENTS INTERVIEWED LAST YEAR

J6 . **INTERVIEWER CHECK (E7)**
 Is respondent

**

An employee ----- 1 CHECK E31, page 49 and
ENTER DATE BELOW at J8
 Self employed ----- 2 CHECK E81, page 62 and
ENTER DATE BELOW at J8
 Neither? ----- 3 GO TO J9

RESPONDENTS NOT INTERVIEWED LAST YEAR

J7. **INTERVIEWER CHECK (E7)**
 Is respondent

**

An employee ----- 1 CHECK E56, page 55 and
ENTER DATE BELOW at J8
 Self employed ----- 2 CHECK E81, page 62 and
ENTER DATE BELOW at J8
 Neither? ----- 3 GO TO J9

J8. **INTERVIEWER CHECK**

WRITE IN: DAY MONTH YEAR NOW GO
 ÚÀÀÀÀÀÀÀÀÀÀÚ ÚÀÀÀÀÀÀÀÀÀÀÚ ÚÀÀÀÀÀÀÀÀÀÀÚ TO J11
 3 3 3 3 3 3 3 3
 ÀÀÀÀÀÀÀÀÀÀÀ ÀÀÀÀÀÀÀÀÀÀÀ ÀÀÀÀÀÀÀÀÀÀÀ

*** *** ***

NON EMPLOYEES ONLY

J9. **SHOWCARD 25**

Please look at this card and tell me which best describes your current situation?

- Unemployed ----- 03
 - Retired from paid work altogether ----- 04
 - On maternity leave ----- 05
 - Looking after family or home ----- 06
 - Full-time student/ at school ----- 07
 - Long term sick or disabled ----- 08
 - On a government training scheme ----- 09
 - Something else (**PLEASE GIVE DETAILS**)
-
- 10

J10. On what date did your present spell of being (**CODE AT J9**) begin?

	DAY	MONTH	YEAR
WRITE IN:	UAAAAAAAAA¿ 3 3 3	UAAAAAAAAA¿ 3 3 3	UAAAAAAAAA¿ 3 3 3
	AAAAAAAAAAÙ	AAAAAAAAAAÙ	AAAAAAAAAAÙ
	***	***	***

IF DON'T KNOW DAY OR MONTH ENTER '98' AND CODE YEAR

J11. **INTERVIEWER CHECK:** Is date at J8 or J10 September 1st 1991 or before?

ASK RESPONDENT IF UNCLEAR

DATE IS: Yes, September 1st 1991 or before ----- 1 **GO TO J32 (page 12)**
 No, after September 1st 1991 ----- 2 **ASK J12**

READ OUT

I'd like to ask you a few questions now about what you might have been doing since September 1st last year in the way of paid work, unemployment, or things like time spent retired or looking after your family. We can use this calendar to help sort it out.

HAND CALENDAR

As we need to get as complete a picture as possible I'd like you to tell me about any spells you may have had in or out of paid employment, even if they were just a few days when you were waiting to take up another job. I'd also like you to tell me about any changes that might have happened while you were working like getting promoted or starting a different job with the same employer.

I'll start by asking what you were doing immediately before {your current job which you told me earlier started on (DATE J8)/your current spell of (CODE J9) which started on (DATE J10)}

J12. **SHOWCARD 26**

Can you look at this card please and tell me which of the descriptions comes closest to what you were doing immediately before then?

ENTER CODE FROM SHOWCARD 26 ON GRID AT J12

J13. And on what date did you start doing that?

IF DON'T KNOW DAY OR MONTH, ENTER `98'

J14. **IF `PAID EMPLOYMENT' (01 or 02): RECORD BRIEF JOB TITLE**

IF `SOMETHING ELSE' (10): RECORD BRIEF DETAILS

CONTINUE WITH J12 - J14 UNTIL DATE REPORTED AT J13 IS September 1ST 1991 OR BEFORE.

SHOWCARD 26	
01 Doing a <u>different job</u> for the <u>same employer</u>	04 Retired from paid work altogether
02 In paid employment (<u>not</u> self employed)	05 On maternity leave
03 Working for <u>myself</u> (self employed)	06 Looking after family or home
03 Unemployed/looking for work	07 In full-time education/student
	08 <u>Long term</u> sick or disabled
	09 On a government training scheme
	10 Something else (PLEASE GIVE DETAILS)

J12

J13

J14

SPELL NO BEFORE <u>CURRENT</u> STATUS	STATUS CODE (FROM CARD 26)	DATE SPELL BEGAN (DON'T KNOW = 98)			IF `EMPLOYMENT' (01 or 02): ENTER BRIEF JOB TITLE IF `SOMETHING ELSE' (10) WRITE IN DETAILS
		DAY	MONTH	YEAR	
1 CARD 53	<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"/> ***	
7	<input type="text"/> ***	<input type="text"/> ***	<input type="text"/> ***	<input type="text"/> ***	
8 CARD 54	<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"/> ***	

J15.

WRITE IN NUMBER OF PERIODS OF
PAID EMPLOYMENT (01 OR 02) RECORDED AT J12 ABOVE

UAAAA
3 3
AAAAAU

**

IF J15 = NONE GO TO J32 (page 12)

IF J15 = 1 OR MORE CONTINUE WITH J16 THROUGH TO J31 AND OBTAIN
DETAILS OF ALL JOBS SINCE September 1991, STARTING WITH MOST
RECENT JOB ON FIRST ROW OF GRID ON FOLLOWING PAGE.
YOU NEED TO COMPLETE AS MANY ROWS OF GRID AS NUMBER GIVEN AT J15

IF MORE THAN 4 SPELLS CONTINUE ON SUPPLEMENT JOB GRID
WHEN DETAILS OF ALL JOB SPELLS ARE COMPLETE GO TO J42 (page 13)

J16

J

17

<p>Spell Number</p> <p>WRITE IN</p>	<p>Transfer details for relevant spell no. of status code and date began (Month/year only)</p>	<p>Could you give me some details of the job which you started in (DATE at J16). Please tell me the exact job title and describe fully the sort of work you did. NB. IF MORE THAN ONE JOB, MAIN = MOST HOURS IF EQUAL HOURS THEN HIGHEST PAID</p>
<p>**</p>	<p>STATUS CODE (01/02)</p> <p><input type="text"/> 0 <input type="text"/></p> <p>***</p> <p>MONTH YEAR</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*** ***</p>	<p>ENTER JOB TITLE: _____ OFFICE CODE</p> <p><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/></p> <p>***</p> <p>DESCRIBE FULLY WORK DONE: (AND MATERIALS USED, IF RELEVANT)</p>
<p>**</p>	<p>STATUS CODE (01/02)</p> <p><input type="text"/> 0 <input type="text"/></p> <p>***</p> <p>MONTH YEAR</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*** ***</p>	<p>ENTER JOB TITLE: _____ OFFICE CODE</p> <p><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/></p> <p>***</p> <p>DESCRIBE FULLY WORK DONE: (AND MATERIALS USED, IF RELEVANT)</p>
<p>**</p>	<p>STATUS CODE (01/02)</p> <p><input type="text"/> 0 <input type="text"/></p> <p>***</p> <p>MONTH YEAR</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*** ***</p>	<p>ENTER JOB TITLE: _____ OFFICE CODE</p> <p><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/></p> <p>***</p> <p>DESCRIBE FULLY WORK DONE: (AND MATERIALS USED, IF RELEVANT)</p>
<p>**</p>	<p>STATUS CODE (01/02)</p> <p><input type="text"/> 0 <input type="text"/></p> <p>***</p> <p>MONTH YEAR</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*** ***</p>	<p>ENTER JOB TITLE: _____ OFFICE CODE</p> <p><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/></p> <p>***</p> <p>DESCRIBE FULLY WORK DONE: (AND MATERIALS USED, IF RELEVANT)</p>

J18	J19	J20	J21	J22
CHECK STATUS CODE (J16)	Were you a full-time employee a part-time employee or self-employed?	Did you have any employees?	SHOWCARD 27 Which of the types of organisation on this card did you work for?	Did you have any managerial duties, or did you supervise any other employees?
STATUS CODE (01/02) <input type="checkbox"/> <input checked="" type="checkbox"/> 0 **** 01..... GO TO J22 02..... ASK J19	** F/T Employee..... 1 GO TO J21 P/T Employee..... 2 GO TO J21 Self-Employed..... 3 ASK J20	** Yes..... 1 No..... 2 NOW GO TO J25	** Private firm 1 Civil Service 2 Local Government..... 3 NHS 4 Nationalised Industry 5 Non-Profit Organisation 6 Armed Forces 7 Other (SPECIFY) 8	** Manager 1 Foreman/ supervisor 2 NOT manager or supervisor 3
STATUS CODE (01/02) <input type="checkbox"/> <input checked="" type="checkbox"/> 0 **** 01..... GO TO J22 02..... ASK J19	** F/T Employee..... 1 GO TO J21 P/T Employee..... 2 GO TO J21 Self-Employed..... 3 ASK J20	** Yes..... 1 No..... 2 NOW GO TO J25	** Private firm1 Civil Service 2 Local Government..... 3 NHS 4 Nationalised Industry 5 Non-Profit Organisation 6 Armed Forces 7 Other (SPECIFY) 8	** Manager 1 Foreman/ supervisor 2 NOT manager or supervisor 3
STATUS CODE (01/02) <input type="checkbox"/> <input checked="" type="checkbox"/> 0 **** 01..... GO TO J22 02..... ASK J19	** F/T Employee..... 1 GO TO J21 P/T Employee..... 2 GO TO J21 Self-Employed..... 3 ASK J20	** Yes..... 1 No..... 2 NOW GO TO J25	** Private firm1 Civil Service 2 Local Government..... 3 NHS 4 Nationalised Industry 5 Non-Profit Organisation 6 Armed Forces 7 Other (SPECIFY) 8	** Manager 1 Foreman/ supervisor 2 NOT manager or supervisor 3
STATUS CODE (01/02) <input type="checkbox"/> <input checked="" type="checkbox"/> 0 **** 01..... GO TO J22 02..... ASK J19	** F/T Employee..... 1 GO TO J21 P/T Employee..... 2 GO TO J21 Self-Employed..... 3 ASK J20	** Yes 1 No..... 2 NOW GO TO J25	** Private firm1 Civil Service 2 Local Government..... 3 NHS 4 Nationalised Industry 5 Non-Profit Organisation 6 Armed Forces 7 Other (SPECIFY) 8	** Manager 1 Foreman/ supervisor 2 NOT manager or supervisor 3

	J23	J24	J25	J26	J27
Spell No. WRITE IN	CHECK STATUS CODE (J16)	Was this job at the same workplace as the job you told me about before?	What did the firm/organisation you worked for actually make or do? DESCRIBE FULLY	How many people (were employed/did you employ) at the place where you worked?	Please think back to September 1st last year or to when you started that job, if that is more recent. At that time, how much were you usually paid?
	<p>STATUS CODE (01/02)</p> <p><input type="text"/></p> <p><input type="text" value="0"/></p> <p>**_**</p> <p>01..... ASK J24 02.... GO TO J25</p>	<p>**</p> <p>Same 1 GO TO J27 Different..... 2 ASK J25</p>	<p>OFFICE CODE</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>**_**</p>	<p>**_**</p> <p>1-2 01 3-9 02 10-24 03 25-49 04 50-99 05 100-199 06 200-499 07 500-999 08 1000 or more 09 DK, fewer than 25 10 DK, 25 or more..... 11</p>	<p>ENTER TO NEAREST £</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>**_**</p> <p>ASK J28</p> <p>**</p> <p>Don't know..... 8 Refused..... 9 GO TO J30</p>
	<p>STATUS CODE (01/02)</p> <p><input type="text"/></p> <p><input type="text" value="0"/></p> <p>**_**</p> <p>01..... ASK J24 02.... GO TO J25</p>	<p>**_**</p> <p>Same 1 GO TO J27 Different..... 2 ASK J25</p>	<p>OFFICE CODE</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>**_40</p>	<p>**_**</p> <p>1-2 01 3-9 02 10-24 03 25-49 04 50-99 05 100-199 06 200-499 07 500-999 08 1000 or more 09 DK, fewer than 25 10 DK, 25 or more..... 11</p>	<p>ENTER TO NEAREST £</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>**_**</p> <p>ASK J28</p> <p>**9</p> <p>Don't know..... 8 Refused..... 9 GO TO J30</p>
	<p>STATUS CODE (01/02)</p> <p><input type="text"/></p> <p><input type="text" value="0"/></p> <p>**_**</p> <p>01..... ASK J24 02.... GO TO J25</p>	<p>**</p> <p>Same 1 GO TO J27 Different..... 2 ASK J25</p>	<p>OFFICE CODE</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>**_**</p>	<p>**_**</p> <p>1-2 01 3-9 02 10-24 03 25-49 04 50-99 05 100-199 06 200-499 07 500-999 08 1000 or more 09 DK, fewer than 25 10 DK, 25 or more..... 11</p>	<p>ENTER TO NEAREST £</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>**_**</p> <p>ASK J28</p> <p>**</p> <p>Don't know..... 8 Refused..... 9 GO TO J30</p>
	<p>STATUS CODE (01/02)</p> <p><input type="text"/></p> <p><input type="text" value="0"/></p> <p>**_**</p> <p>01..... ASK J24 02.... GO TO J25</p>	<p>**</p> <p>Same 1 GO TO J27 Different..... 2 ASK J25</p>	<p>OFFICE CODE</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>**_**</p>	<p>**_**</p> <p>1-2 01 3-9 02 10-24 03 25-49 04 50-99 05 100-199 06 200-499 07 500-999 08 1000 or more 09 DK, fewer than 25 10 DK, 25 or more..... 11</p>	<p>ENTER TO NEAREST £</p> <p><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>**_**</p> <p>ASK J28</p> <p>**</p> <p>Don't know..... 8 Refused..... 9 GO TO J30</p>

J28

J29

J30

J31

<p>How long a period did that cover?</p>	<p>And was that before or after any deductions for tax, national insurance, union dues and so on or were there no deductions at all usually made from your pay?</p>	<p>SHOWCARD 28 Would you look at this card please and tell me which of the statements on the card best describes why you stopped doing that job?</p>	<p>FOR SPELL ONE ONLY IF J30 IS 02 ASK: What was the main thing about your present job that attracted you to it? OTHERS RETURN TO J16 IF THERE ARE MORE JOB SPELLS TO COMPLETE</p>						
<p>Week 1 Fortnight 2 Four Weeks 3 Calendar Month 4 Year 5 Other 6 (WRITE IN)</p> <p>OFFICE CODE</p> <table border="1" style="width: 100px; height: 20px; margin: 0 auto;"> <tr> <td style="width: 33px;"></td> <td style="width: 33px;"></td> <td style="width: 33px;"></td> </tr> </table> <p style="text-align: center;">**..**</p>				<p>Before deduction.....1 After2 No deductions3 Don't know8</p>	<p>Promoted 01 Left for better job..... 02 Made Redundant..... 03 Dismissed/sacked..... 04 Temporary job ended 05 Took retirement 06 Health reasons 07 Left to have baby 08 Look after family 09 Look after other person..... 10 Other reason 11</p>	<p>WRITE IN:</p> <p style="text-align: center;">—</p> <p style="text-align: center;">OFFICE CODE</p> <table border="1" style="width: 100px; height: 20px; margin: 0 auto;"> <tr> <td style="width: 33px;"></td> <td style="width: 33px;"></td> <td style="width: 33px;"></td> </tr> </table> <p style="text-align: center;">**..**</p>			
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<p>Week 1 Fortnight 2 Four Weeks 3 Calendar Month 4 Year 5 Other 6 (WRITE IN)</p> <p>OFFICE CODE</p> <table border="1" style="width: 100px; height: 20px; margin: 0 auto;"> <tr> <td style="width: 33px;"></td> <td style="width: 33px;"></td> <td style="width: 33px;"></td> </tr> </table> <p style="text-align: center;">**..**</p>				<p>Before deduction.....1 After2 No deductions3 Don't know8</p>	<p>Promoted 01 Left for better job..... 02 Made Redundant..... 03 Dismissed/sacked..... 04 Temporary job ended 05 Took retirement 06 Health reasons 07 Left to have baby 08 Look after family 09 Look after other person..... 10 Other reason 11</p>				
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J1. Were you working as an employee or were you self-employed?

**

Employee ----- 1 GO TO J40
 Self-employed ----- 2 ASK J39

J1. Did you have any employees?

**

Yes ----- 1 GO TO J41
 No ----- 2 GO TO J42

J1. Did you have any managerial duties or were you supervising any other employees?

**

Manager ----- 1
 Foreman/supervisor ----- 2
Not Manager or supervisor -- 3

J1. How many people were employed/did you employ at the place where you worked?

1 - 2 ----- 01
 3 - 9 ----- 02
 10 - 24 ----- 03
 25-49 ----- 04
 50-99 ----- 05
 100-199 ----- 06
 200-499 ----- 07
 500-999 ----- 08
 1000 or more ----- 09

 Don't know but fewer than 25 ----- 10
 Don't know but 25 or more ----- 11

J1 . **INTERVIEWER CHECK:** Who was present during this section?
CODE ALL THAT APPLY

a) Respondent alone ----- 1
 b) Partner present ----- 2
 c) Other adult(s) present ----- 3
 d) Child(ren) present ----- 4

VALUES AND OPINIONS

CARD 59

ENTER TIME SECTION BEGUN

	HOURS	MINUTES
	UAAAAAAAAAAj	UAAAAAAAAAAj
	3 3 3	3 3 3
	AAAAAAAAAAU	AAAAAAAAAAU
	***	***

V1 . **SHOWCARD 29**

People have different views about the way governments work. I'm going to read out some things people have said about governments in Britain and I'd like you to tell me which answer off the card comes closest to how you feel about each statement.

		NEITHER			
		AGREE			
STRONGLY		NOR		STRONGLY	CAN'T
AGREE	AGREE	DISAGREE	DISAGREE	DISAGREE	CHOOSE

READ OUT

- a) On the whole, what governments do in Britain reflects the wishes of the people -- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 8 **
- b) Ordinary people don't really have a chance to influence what governments do --- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 8 **
- c) The government should place an upper limit on the amount of money that any one person can make ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 8 **
- d) Governments can be trusted to place the needs of the nation above the interests of their own party ----- 1 ----- 2 ----- 3 ----- 4 ----- 5 ----- 8 **

V2 . Generally speaking do you think of yourself as a supporter of any one political party?

**

Yes ----- 1 **GO TO V4**
 No ----- 2 **ASK V3**

V3 . Do you think of yourself as a little closer to one political party than to the others?

**

Yes ----- 1 **ASK V4**
 No ----- 2 **GO TO V6**

IF YES AT V2 OR V3

V4 . Which one? **CODE ONE ONLY**

	Conservative -----	01	
	Labour -----	02	
	Liberal Democrat/Liberal/SLD -----	03	
	Scottish Nationalist -----	04	
	Plaid Cymru -----	05	
	Green Party -----	06	
	Other party (SPECIFY)		
	_____	07	
	Other answer (SPECIFY)		
	_____	08	
	None -----	10	GO TO
	Don't know -----	98	V6
	Refused -----	99	

V5. Would you call yourself a very strong supporter of (**QUOTE PARTY NAMED AT V4**) fairly strong or not very strong?

**

Very strong ----- 1
 Fairly strong ----- 2
 Not very strong ----- 3
 Don't know ----- 8

ASK ALL

V6. Did you vote in this (past) year's general election?

**

Yes -----	1	ASK V7
No -----	2	GO
Can't vote -----	3	TO
Don't know -----	8	V8
Refused -----	9	

V7. Which political party did you vote for?

**IF ALLIANCE,
OR INDEPENDENT LIBERAL,
OR INDEPENDENT SDP
CODE OTHER PARTY
AND SPECIFY**

Conservative -----	01
Labour -----	02
Liberal Democrat/Liberal/SLD -----	03
Scottish Nationalist -----	04
Plaid Cymru -----	05
Green Party -----	06
Other party (SPECIFY) _____	07
Other answer (SPECIFY) _____	08
Don't know -----	98
Refused -----	99

V8. How interested would you say you are in politics?
Would you say you are (**READ OUT**)

**

Very interested -----	1
Fairly interested -----	2
Not very interested -----	3
or Not at all interested? -----	4

V9 . **SHOWCARD 30**

I'm going to read out some things that may concern you.
 I'd like you to give me the answer off this card
 that comes closest to how concerned you are about each
 of the following. **READ OUT**

	A	A	NOT	NOT	
	GREAT	FAIR	VERY	AT	
	DEAL	AMOUNT	MUCH	ALL	
a) The rising price of food and other consumer goods	----- 1	----- 2	----- 3	----- 4	**
b) The destruction of the ozone layer	----- 1	----- 2	----- 3	----- 4	**
c) The high rate of unemployment	----- 1	----- 2	----- 3	----- 4	**
d) The extinction of many animal and plant species	----- 1	----- 2	----- 3	----- 4	**
e) Declining moral standards	----- 1	----- 2	----- 3	----- 4	**

V10. **SHOWCARD 31**

In politics it is not always possible to obtain everything
 one might wish. On this card several goals are listed.
 Which would be your first choice?

RECORD BELOW

V11. And which would be your second choice?

	V10	V11
	1st Choice	2nd Choice
	**	**
Maintaining order in the nation	----- 1	----- 1
Giving people more say in important government decisions	----- 2	----- 2
Fighting rising prices	----- 3	----- 3
Protecting freedom of speech	----- 4	----- 4

V12. **SHOWCARD 32**

Are you currently a member of any of the kinds of organisations on this card?

CARD 60

**

Yes ----- 1 ASK V13
 No ----- 2 GO TO V14

V13 . Which ones? **PROBE:** `Any others?' until `No'

SKIP

19

CODE ALL THAT APPLY ON GRID BELOW

	<u>MEMBER</u>	<u>ACTIVITIES</u>	
	V13	V15	
a) Political party -----	1	1	***
b) Trade Unions -----	2	2	***
c) Environmental group -----	3	3	***
d) Parents'/School Association -----	4	4	***
e) Tenants'/Residents' Group or Neighbourhood Watch -----	5	5	***
f) Religious group or church organisation -----	6	6	***
g) Voluntary services group -----	7	7	***
h) Other community or civic group (GIVE DETAILS) -----	8	8	***
i) Social Club/Working men's club -----	9	9	***
j) Sports Club -----	10	10	***
k) Women's Institute/Townswomen's Guild -----	11	11	***
l) Women's Group/Feminist Organisation -----	12	12	***
m) Other group or organisation (GIVE DETAILS) ---	13	13	***

V14. Do you join in the activities of any of the organisations on this card on a regular basis?

**

Yes ----- 1 ASK V15
 No ----- 2 GO TO V16

V15 . Which ones? **PROBE:** `Any others?' until `No'

CODE ALL THAT APPLY ON GRID ABOVE

ASK ALL

V16 . Do you have a full driving licence?

**

Yes ----- 1 **ASK V17**
 No ----- 2 **GO TO V18**

V17 . Do you normally have access to a car or van whenever
 you want to use it?

**

Yes ----- 1
 No ----- 2

V18 . **INTERVIEWER CHECK:** Who was present during this section?
CODE ALL THAT APPLY

a) Respondent alone ----- 1
 b) Partner present ----- 2
 c) Other adult(s) present ----- 3
 d) Child(ren) present ----- 4

HOUSEHOLD FINANCES

CARD 61

TIME BEGUN	HOURS	MINUTES
	UAAAAAAAAA¿	UAAAAAAAAA¿
	3 3 3	3 3 3
	AAAAAAAAAAU	AAAAAAAAAAU
	_	**_**

INTRODUCTION: One of the most important parts of our research is how people are getting by financially these days. We have found that we need to ask about a number of different types of income because otherwise our results could be misleading. I'd like to remind you that anything you tell me is completely confidential.

F1 . I am going to show you four cards listing different types of income and payments. Please look at this card (**SHOWCARD 33**) and tell me if, since September 1st last year, you have received any of the types of income or payments shown, either just yourself or jointly?

IF YES: Ask 'which ones?' PROBE 'Any others?' UNTIL FINAL 'No'.
RING CODES FOR ALL THAT APPLY. REPEAT FOR EACH CARD IN TURN.
IF RESPONDENT REFUSES CODE 'Refused' AT F2

SHOWCARD 33

N.I. Retirement		
(Old Age) Pension -----	01	**_**
A Pension from a previous		
employer -----	02	**_**
A Pension from a spouse's		
previous employer ---	03	**_**
A Private Pension/Annuity	04	**_**
A Widow's or War Widow's		
Pension -----	05	**_**
A Widowed mother's		
allowance -----	06	**_**

SHOWCARD 34

Severe Disablement Allow. -	16	**_**
Invalidity Pension, Benefit		
or Allowance -----	17	**_**
Industrial Injury or		
Disablement Allowance ---	18	**_**
Attendance Allowance -----	19	**_**
Mobility Allowance -----	20	**_**
Invalid Care Allowance ----	21	**_**
War disability Pension ----	22	**_**
Disability living allowance	23	**_**
Disability working		
allowance -----	24	**_**

SHOWCARD 35

Unemp. Benefit <u>and</u> Income		
Support together -----	31	**_**
Income Support (Suppl.		
Benefit) -----	32	**_**
Unemployment Benefit ----	33	**_**
N.I. Sickness Benefit		
(Not employer's sick		
pay) -----	34	**_**
Child Benefit -----	35	**_**
One Parent Benefit -----	36	**_**
Family Credit -----	37	**_**
Maternity Allowance -----	38	**_**
Housing Benefit/Rent		
rebate or allowance ----	39	**_**
Community Charge Benefit	40	**_**
Any other state benefit -	41	**_**

SHOWCARD 36

Educational Grant -----	51	**_**
Trade Union/Friendly		
Society Payments -----	52	**_**
Maintenance or Alimony ----	53	**_**
Payments from a family		
member <u>not</u> living		
here -----	54	**_**
Rent from Boarders or lodgers		
(<u>not</u> family members)		
living here with you ----	55	**_**
Rent from any other		
property -----	56	**_**
Foster Allowance -----	57	**_**
Sickness or accident		
insurance -----	58	**_**
Any other regular payment		
(PLEASE GIVE DETAILS) ---	59	**_**

CARD 62

F2 . **INTERVIEWER CHECK**

How many sources of income in total were recorded above?

ENTER NUMBER	ÚÁÁÁÁÁÁÁÁÁÁ¿ 3 3 3 ÁÁÁÁÁÁÁÁÁÁÙ **--**	ASK F3a Refused ----- 9 ** None ----- 0 GO TO F4
--------------	--	---

F3 a. TRANSFER THE NAME AND CODE OF EACH RECEIVED INTO SEPARATE INCOME GRIDS. FOR EACH ONE ASK 3b - 3f BELOW AND RECORD ANSWERS IN GRIDS.

IF RESPONDENT RECEIVES MORE THAN ONE INCOME WITHIN ANY SOURCE ENTER IN SEPARATE GRIDS.

F3b. And in which months since September 1st last year have you received ?
 (RING CODES FOR MONTHS WHEN PAID, IF ALL UP TO CURRENT MONTH RING 'ALL')

F3c. Are you still receiving ?

F3d. How much was the last payment of you received?
 (TO NEAREST £)

F3e. What period did that cover?

F3f. (Have you been receiving/did you receive) that solely in your name or jointly with someone else?
 (IF 'JOINTLY' RECORD PERSON NUMBER FROM HOUSEHOLD GRID; IF PERSON NOT IN HOUSEHOLD CODE '00'. IF RECEIVED BOTH JOINTLY AND SOLELY OVER PAST YEAR (e.g. with spouse who has since died or left household) RECORD PERIOD OF JOINT RECEIPT, AND PERIOD OF SOLE RECEIPT ON SEPARATE GRIDS)

a) Payment Name													Code <input style="width: 20px; height: 20px;" type="text"/>		63 (**-**) Repeat 1 (20)		
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
	1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12
c) If still receiving			d) Last amount received				e) Period covered				f) Sole or Joint receipt						
(**)			(Nearest £)				(**)				(**)						
Yes 1			£ <input style="width: 40px; height: 20px;" type="text"/>				1 week 1				Sole 1						
No 2			(**-)**				2 weeks 2				Joint 2						
			(**)				4 weeks 3				With						
			Don't know 8				Month 4				↓						
			Refused 9				Other 5				Person No. <input style="width: 40px; height: 20px;" type="text"/>						
							Office Code				(**-)**						
							<input style="width: 60px; height: 20px;" type="text"/>										
							(**-)**										

a) Payment Name													Code <input style="width: 20px; height: 20px;" type="text"/>		64 (**-**) Repeat 1 (20)		
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
	1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12
c) If still receiving			d) Last amount received				e) Period covered				f) Sole or Joint receipt						
(**)			(Nearest £)				(**)				(**)						
Yes 1			£ <input style="width: 40px; height: 20px;" type="text"/>				1 week 1				Sole 1						
No 2			(**-)**				2 weeks 2				Joint 2						
			(**)				4 weeks 3				With						
			Don't know 8				Month 4				↓						
			Refused 9				Other 5				Person No. <input style="width: 40px; height: 20px;" type="text"/>						
							Office Code				(**-)**						
							<input style="width: 60px; height: 20px;" type="text"/>										
							(**-)**										

a) Payment Name													Code <input style="width:20px; height:20px;" type="text"/>		65 (**_**) Repeat 1 (20)		
(**_**)																	
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
	1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12
c) If still receiving			d) Last amount received			e) Period covered			f) Sole or Joint receipt								
(**)			(Nearest £)			(**)			(**)								
Yes 1			£ <input style="width:40px; height:20px;" type="text"/>			1 week 1			Sole 1								
No 2			(**_**)			2 weeks 2			Joint 2								
						4 weeks 3			With								
						Month 4			↓								
						Other 5			Person No. <input style="width:40px; height:20px;" type="text"/>								
						Office Code			(**_**)								
						<input style="width:60px; height:20px;" type="text"/>											
						(**_**)											
			Don't know 8														
			Refused 9														

a) Payment Name													Code <input style="width:20px; height:20px;" type="text"/>		66 (**_**) Repeat 1 (20)		
(**_**)																	
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
	1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12
c) If still receiving			d) Last amount received			e) Period covered			f) Sole or Joint receipt								
(**)			(Nearest £)			(**)			(**)								
Yes 1			£ <input style="width:40px; height:20px;" type="text"/>			1 week 1			Sole 1								
No 2			(**_**)			2 weeks 2			Joint 2								
						4 weeks 3			With								
						Month 4			↓								
						Other 5			Person No. <input style="width:40px; height:20px;" type="text"/>								
						Office Code			(**_**)								
						<input style="width:60px; height:20px;" type="text"/>											
						(**_**)											
			Don't know 8														
			Refused 9														

a) Payment Name													Code <input style="width:20px; height:20px;" type="text"/>		67 (**_**) Repeat 1 (20)		
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12	01
c) If still receiving		d) Last amount received				e) Period covered				f) Sole or Joint receipt							
(**)		(Nearest £)				(**)				(**)							
Yes 1		£ <input style="width:40px; height:20px;" type="text"/>				1 week 1				Sole 1							
No 2		(**_**)				2 weeks 2				Joint 2							
						4 weeks 3				With							
						Month 4				↓							
						Other 5				Person No. <input style="width:40px; height:20px;" type="text"/>							
						Office Code				(**_**)							
						<input style="width:60px; height:20px;" type="text"/>				(**_**)							

a) Payment Name													Code <input style="width:20px; height:20px;" type="text"/>		68 (**_**) Repeat 1 (20)		
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12	01
c) If still receiving		d) Last amount received				e) Period covered				f) Sole or Joint receipt							
(**)		(Nearest £)				(**)				(**)							
Yes 1		£ <input style="width:40px; height:20px;" type="text"/>				1 week 1				Sole 1							
No 2		(**_**)				2 weeks 2				Joint 2							
						4 weeks 3				With							
						Month 4				↓							
						Other 5				Person No. <input style="width:40px; height:20px;" type="text"/>							
						Office Code				(**_**)							
						<input style="width:60px; height:20px;" type="text"/>				(**_**)							

a) Payment Name													Code <input style="width: 20px; height: 20px;" type="text"/>		69 (**_**) Repeat 1 (20)		
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12	01
c) If still receiving		d) Last amount received				e) Period covered				f) Sole or Joint receipt							
(**)		(Nearest £)				(**)				(**)							
Yes 1		£ <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				1 week 1				Sole 1							
No 2		(**_**)				2 weeks 2				Joint 2							
						4 weeks 3				With							
						Month 4				↓							
						Other 5				Person No. <input style="width: 20px; height: 20px;" type="text"/>							
						Office Code				(**_**)							
						<input style="width: 20px; height: 20px;" type="text"/>				(**_**)							

a) Payment Name													Code <input style="width: 20px; height: 20px;" type="text"/>		70 (**_**) Repeat 1 (20)		
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12	01
c) If still receiving		d) Last amount received				e) Period covered				f) Sole or Joint receipt							
(**)		(Nearest £)				(**)				(**)							
Yes 1		£ <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>				1 week 1				Sole 1							
No 2		(**_**)				2 weeks 2				Joint 2							
						4 weeks 3				With							
						Month 4				↓							
						Other 5				Person No. <input style="width: 20px; height: 20px;" type="text"/>							
						Office Code				(**_**)							
						<input style="width: 20px; height: 20px;" type="text"/>				(**_**)							

a) Payment Name													Code <input type="text"/>		71 <small>(**)**</small> Repeat 1 (20)		
b) Months received																	
A L L <small>(**)</small>	1991				1992												1993
	Sep <small>(**)</small>	Oct <small>(**)</small>	Nov <small>(**)</small>	Dec <small>(**)</small>	Jan <small>(**)</small>	Feb <small>(**)</small>	Mar <small>(**)</small>	Apr <small>(**)</small>	May <small>(**)</small>	Jun <small>(**)</small>	Jul <small>(**)</small>	Aug <small>(**)</small>	Sep <small>(**)</small>	Oct <small>(**)</small>	Nov <small>(**)</small>	Dec <small>(**)</small>	Jan <small>(**)</small>
1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12	01
c) If still receiving		d) Last amount received				e) Period covered				f) Sole or Joint receipt							
<small>(**)</small>		(Nearest £)				<small>(**)</small>				<small>(**)</small>							
Yes 1		£ <input type="text"/>				1 week 1				Sole 1							
No 2		<small>(**..**)</small>				2 weeks 2				Joint 2							
		<small>(**)</small>				4 weeks 3				With							
		Don't know 8				Month 4				↓							
		Refused 9				Other 5				Person No. <input type="text"/>							
						Office Code <input type="text"/>				<small>(**..**)</small>							

a) Payment Name													Code <input type="text"/>		72 <small>(**)**</small> Repeat 1 (20)		
b) Months received																	
A L L <small>(**)</small>	1991				1992												1993
	Sep <small>(**)</small>	Oct <small>(**)</small>	Nov <small>(**)</small>	Dec <small>(**)</small>	Jan <small>(**)</small>	Feb <small>(**)</small>	Mar <small>(**)</small>	Apr <small>(**)</small>	May <small>(**)</small>	Jun <small>(**)</small>	Jul <small>(**)</small>	Aug <small>(**)</small>	Sep <small>(**)</small>	Oct <small>(**)</small>	Nov <small>(**)</small>	Dec <small>(**)</small>	Jan <small>(**)</small>
1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12	01
c) If still receiving		d) Last amount received				e) Period covered				f) Sole or Joint receipt							
<small>(**)</small>		(Nearest £)				<small>(**)</small>				<small>(**)</small>							
Yes 1		£ <input type="text"/>				1 week 1				Sole 1							
No 2		<small>(**..**)</small>				2 weeks 2				Joint 2							
		<small>(**)</small>				4 weeks 3				With							
		Don't know 8				Month 4				↓							
		Refused 9				Other 5				Person No. <input type="text"/>							
						Office Code <input type="text"/>				<small>(**..**)</small>							

a) Payment Name													Code <input style="width:20px; height:20px;" type="text"/>		73 (**-**) Repeat 1 (20)		
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12	01
c) If still receiving		d) Last amount received				e) Period covered				f) Sole or Joint receipt							
(**)		(Nearest £)				(**)				(**)							
Yes 1		£ <input style="width:20px; height:20px;" type="text"/>				1 week 1				Sole 1							
No 2		(**-)**				2 weeks 2				Joint 2							
		(**)				4 weeks 3				With							
		Don't know 8				Month 4				↓							
		Refused 9				Other 5				Person No. <input style="width:20px; height:20px;" type="text"/>							
						Office Code				(**-)**							
						<input style="width:20px; height:20px;" type="text"/>											
						(**-)**											

a) Payment Name													Code <input style="width:20px; height:20px;" type="text"/>		74 (**-**) Repeat 1 (20)		
b) Months received																	
A L L (**)	1991				1992												1993
	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)	Feb (**)	Mar (**)	Apr (**)	May (**)	Jun (**)	Jul (**)	Aug (**)	Sep (**)	Oct (**)	Nov (**)	Dec (**)	Jan (**)
1	09	10	11	12	01	02	03	04	05	06	07	08	09	10	11	12	01
c) If still receiving		d) Last amount received				e) Period covered				f) Sole or Joint receipt							
(**)		(Nearest £)				(**)				(**)							
Yes 1		£ <input style="width:20px; height:20px;" type="text"/>				1 week 1				Sole 1							
No 2		(**-)**				2 weeks 2				Joint 2							
		(**)				4 weeks 3				With							
		Don't know 8				Month 4				↓							
		Refused 9				Other 5				Person No. <input style="width:20px; height:20px;" type="text"/>							
						Office Code				(**-)**							
						<input style="width:20px; height:20px;" type="text"/>											
						(**-)**											

F4 . How well would you say you yourself are managing financially these days? Would you say you are (**READ OUT**) **

Living comfortably -----	1
Doing alright -----	2
Just about getting by -----	3
Finding it quite difficult -----	4
or Finding it very difficult? -----	5
Don't know -----	8

F5 . Would you say that you yourself are better off, worse off or about the same financially than you were a year ago? **

Better off -----	1
Worse off -----	2
About the same -----	3
Don't know -----	8

F6 . Looking ahead, how do you think you yourself will be financially a year from now, will you be (**READ OUT**) **

<u>Better off</u> than you are now -----	1
<u>Worse off</u> than you are now -----	2
Or about the same? -----	3
Don't know -----	8

F7 . In the past 12 months about how much have you received in the way of dividends or interest from any savings and investments you may have? Was it (**READ OUT**) **

Nothing -----	1
More than £1 but less than £100 --	2
Between £100 and £1000 -----	3
Or more than £1000? -----	4
Don't know -----	8
Refused -----	9

PENSIONS BEFORE JULY 1st 1988

F13. What year did you first take out a policy?

YEAR

WRITE IN: 19

_

**

Don't know ----- 8

Refused ----- 9

F14. How much was your last contribution or premium?

£

_

**

Don't know ----- 8

Refused ----- 9

F15. How long did this cover?

**

A week -----	1	3	OFFICE CODE
A month -----	2	3	
A quarter -----	3	3	GO TO <input type="text"/> <input type="text"/> <input type="text"/>
Six months -----	4	3	**_**
A year -----	5	3	
A once off payment ---	6	3	
Other (SPECIFY) -----	7	3	
		3	
		3	

AAÛ

PENSIONS SINCE JULY 1st 1988

F16. What year did you first take out a policy?

YEAR

WRITE IN: 19

_

**

Don't know ----- 8

Refused ----- 9

F17. Since September 1st 1991, over and above those contributions paid on your behalf by the Department of Social Security, have you yourself made any extra contributions towards your personal pension?

**

Yes ----- 1 ASK F18

No ----- 2 GO TO F20

F18. How much was your last contribution?

£

_

**

Don't know ----- 8

Refused ----- 9

F19. How long did this cover?

**

A week -----	1	
A month -----	2	OFFICE CODE
A quarter -----	3	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
Six months -----	4	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>
A year -----	5	**_**
A once off payment ---	6	
Other (SPECIFY) -----	7	

F20 . **INTERVIEWER CHECK: (HOUSEHOLD GRID)**

Is this a single person household?

**

Yes ----- 1 GO TO F23

No ----- 2 ASK F21

INTERNAL TRANSFERS

F21 . **SHOWCARD 37**

Please tell me whether you give or transfer money to any member of your household for any of the purposes listed on this card?

DO NOT INCLUDE POCKET MONEY FOR CHILDREN UNDER 16

Yes ----- **1 ASK F22**
 No ----- **2 GO TO F23**

F22 (a) Who do you give money to?

ENTER EACH PERSON NUMBER FROM HOUSEHOLD GRID IN GRID BELOW

PROBE 'anyone else' UNTIL THREE MENTIONS OR FINAL 'No'

FOR EACH PERSON ASK (b) - (d) AND RECORD IN GRID

- (b) What is this money for? (CODE ALL THAT APPLY)
- (c) About how much in total do you give to (PERSON)? (TO NEAREST £)
- (d) How often do you give this money (for any purpose)?

(a) Person No.	(b) Purpose of transfer	(c) Amount transferred	(d) Frequency of transfer
CARD 76 <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto; text-align: center;"> **--** </div>	<u>CODE ALL THAT APPLY</u> Rent 1 Housekeeping 2 Board/Keep 3 Personal Spending or Allowance 4 Household bill or food 5 Other (SPECIFY) 6	UAAAAAAAAAAAAAAAAA 3 3 3 3 3 AAAAAAAAAAAAAAAAAA **--** (NEAREST £) Don't know 8 Refused 9	** Weekly 1 Fortnightly 2 Monthly 3 Other 4 (SPECIFY) OFFICE CODE <div style="border: 1px solid black; width: 40px; height: 15px; margin: 0 auto; text-align: center;"> **--** </div>
CARD 77 <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto; text-align: center;"> **--** </div>	<u>CODE ALL THAT APPLY</u> Rent 1 Housekeeping 2 Board/Keep 3 Personal Spending or Allowance 4 Household bill or food 5 Other (SPECIFY) 6	UAAAAAAAAAAAAAAAAA 3 3 3 3 3 AAAAAAAAAAAAAAAAAA **--** (NEAREST £) Don't know 8 Refused 9	** Weekly 1 Fortnightly 2 Monthly 3 Other 4 (SPECIFY) OFFICE CODE <div style="border: 1px solid black; width: 40px; height: 15px; margin: 0 auto; text-align: center;"> **--** </div>
CARD 78 <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto; text-align: center;"> **--** </div>	<u>CODE ALL THAT APPLY</u> Rent 1 Housekeeping 2 Board/Keep 3 Personal Spending or Allowance 4 Household bill or food 5 Other (SPECIFY) 6	UAAAAAAAAAAAAAAAAA 3 3 3 3 3 AAAAAAAAAAAAAAAAAA **--** (NEAREST £) Don't know 8 Refused 9	** Weekly 1 Fortnightly 2 Monthly 3 Other 4 (SPECIFY) OFFICE CODE <div style="border: 1px solid black; width: 40px; height: 15px; margin: 0 auto; text-align: center;"> **--** </div>

F25. **INTERVIEWER CHECK:** *Is respondent living with spouse/partner?*

**

Yes ----- 1 ASK F26
 No ----- 2 GO TO F33

F25 . **SHOWCARD 39**

People organise their household finances in different ways. Which of the methods on this card comes closest to the way you organise yours? It doesn't have to fit exactly - just choose the nearest one. You can just tell me which letter applies.

**

- A I look after all the household money except my partner's personal spending money --- 1
- B My partner looks after all the household's money except my personal spending money ----- 2
- C I am given a housekeeping allowance. My partner looks after the rest of the money ----- 3
- D My partner is given a housekeeping allowance. I look after the rest of the money ----- 4
- E We share and manage our household finances jointly ----- 5
- F We keep our finances completely separate -- 6
- G Some other arrangement (**PLEASE GIVE DETAILS**)
 _____ 7

F26 . In your household who has the final say in big financial decisions

Respondent ----- 1
 Partner ----- 2
 Both have equal say ----- 3
 Other (**WRITE IN**)

_____ 4

F27 . Could you please tell me who mostly does the housework such as cooking, cleaning and laundry? Is it **(READ OUT)**
CODE ONE ONLY

- **
- Always done by yourself ----- 1
 - Usually done by yourself ----- 2
 - Done by yourself and your spouse/partner **ASK F29**
about equally ----- 3
 - Usually done by your spouse/partner ---- 4
 - Always done by your spouse/partner ---- 5
-
- (IF VOLUNTEERED)
- Someone else does part/all ----- 7 **GO TO F30**

F28 . How fair do you think that is? Is it **(READ OUT)**

- **
- Very fair ----- 1
 - Somewhat fair ----- 2
 - Somewhat unfair ----- 3
 - Very unfair ----- 4

F29 . **INTERVIEWER CHECK: (HOUSEHOLD GRID)**
Is/are there child(ren) aged 12 or under living in the household?

- **
- Yes ----- 1 ASK F31
 - No ----- 2 **GO TO F33**

F30 . How about taking care of your children? Is it **(READ OUT)**

- **
- Always done by yourself ----- 1
 - Usually done by yourself ----- 2
 - Done by yourself and your spouse/partner **ASK F32**
about equally ----- 3
 - Usually done by your spouse/partner ---- 4
 - Always done by your spouse/partner ---- 5
-
- (IF VOLUNTEERED)
- Someone else does part/all ----- 7 **GO TO F33**

F31 . How fair do you think that is? Is it **(READ OUT)**

- **
- Very fair ----- 1
 - Somewhat fair ----- 2
 - Somewhat unfair ----- 3
 - Very unfair ----- 4

ASK ALL

F32. About how many hours do you spend on housework in an average week, such as time spent cooking, cleaning and doing the laundry?

HOURS

WRITE IN

--	--

**

Don't know ----- 8

READ OUT

We've asked a lot of questions about finances, employment and health because they are important in most people's lives. We also want to find out about what has been happening in the last year in your own life that has been especially important to you.

F33 . Would you please tell me anything that has happened to you (or your family) which has stood out as important? This might be things you've done, or things that have been of interest or concern. Just whatever comes to mind as important to you.

WRITE VERBATIM

F34 . **INTERVIEWER CHECK:** Who was present during this section?
CODE ALL THAT APPLY

- ***
- a) Respondent alone ----- 1
 - b) Partner present ----- 2
 - c) Other adult(s) present ----- 3
 - d) Child(ren) present ----- 4

	HOURS		MINUTES
TIME NOW	UAAAAAAAAA¿	UAAAAAAAAA¿	UAAAAAAAAA¿
	3 3 3	3 3 3	3 3 3
	AAAAAAAAAAU	AAAAAAAAAAU	AAAAAAAAAAU
	***	***	***

**NOW HAND SELF-COMPLETION QUESTIONNAIRE
TO RESPONDENT**

F35 . Interviewer Check for Self-Completion.

**

Respondent completed and returned ----- 1
 Respondent needed assistance ----- 2
 Respondent refused ----- 3
 (SPECIFY WHY)

Other ----- 4
 (WRITE IN)

F36 . **READ OUT**

That's all the questions I have. Thank you very much for your time and patience. You have been a great help. One of the things we are most interested in is how things might change and so we would like to contact you again in about a year's time.

**NOW GO TO TRACKING INFORMATION ON
COVERSHEET (PAGE 8)**

**REMEMBER TO COMPLETE INTERVIEWER OBSERVATIONS AFTER THE
INTERVIEW IS COMPLETE**

INTERVIEWER OBSERVATIONS

COMPLETE AFTER INDIVIDUAL INTERVIEW

I1. Were any other people present during any of this interview?

**

Yes ----- 1 ANSWER I2
 No ----- 2 **GO TO I4**

I2. Did any of these people seem to influence any of the answers given by the respondent?

**

A great deal ----- 1 **ANSWER**
 A fair amount ----- 2 **I3**
 A little ----- 3
 Not at all ----- 4 **GO TO I4**

I3. In what way was the respondent influenced?
 [NOTE PARTICULAR QUESTIONS]

I4. In general, the respondent's co-operation during the interview was

**

Very good ----- 1
 Good ----- 2
 Fair ----- 3
 Poor ----- 4
 Very poor ----- 5

I5. Was the respondent willing to complete the tracking schedule?

**

Yes, completed ----- 1
 No, refused (**GIVE DETAILS**) - 2

Other (**SPECIFY**) ----- 3

I6. Did the respondent have any of the following problems which may have affected the interview?

	Yes	No	
a) Poor eyesight (blindness) -----	1 ---	2 ---	** GO TO
b) Hearing problems -----	1 ---	2 ---	** I8
c) Reading difficulties -----	1 ---	2 ---	**
d) English was 2nd language -----	1 ---	2 ---	**
e) Other language problems -----	1 ---	2 ---	**
f) Interpreter used (DETAIL BELOW) -----	1 ---	2 ---	** ANSWER I7

I7. WRITE IN PERSON NUMBER OF INTERPRETER FROM HOUSEHOLD GRID OR 00 IF NOT IN HOUSEHOLD

UAAAAAAAAA
3 3 3
AAAAAAAAAU

I8. Please note down any ambiguous or conflicting situations in this interview that you feel editors and coders should know about.

OFFICE CODE

--	--

I9. In general how would you describe the interview? Please add any further remarks that may help to clarify any problems arising during processing. Is there anything the Research Centre should be aware of for contacting the respondent again in the future?

OFFICE CODE

--	--

(Instructions: write any general impressions about the interview situation that might have a bearing on our understanding of the interview or recontacting the respondent)

OFFICE USE ONLY

Wave	Serial Number	Household No.	Check No.	Person No.
<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"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
8	9-13	14	15	16-17

LIVING IN BRITAIN

CONFIDENTIAL

SELF COMPLETION QUESTIONNAIRE

COMPLETING THE QUESTIONNAIRE:

The questions inside cover a wide range of subjects, but each one can be answered simply by ticking the box next to the answer. No special knowledge is required: we are confident that everyone will be able to take part.

The questionnaire should not take very long to complete, and we hope you will find it interesting and enjoyable. It should be filled in only by you. Any answers you give will be treated as confidential and anonymous.

THANK YOU AGAIN FOR YOUR HELP

*The **Living in Britain** survey is carried out by an independent social research centre situated within the University of Essex. It is funded by the Economic and Social Research Council (ESRC), with contributions also from government departments. Please contact us if you would like further information.*

1. Here are some questions regarding the way you have been feeling over the last few weeks. For each question please tick the box next to the answer that best describes the way you have felt.

Have you recently....

- a) been able to concentrate on whatever you're doing ?

(18)

Better than usual	1
Same as usual	2
Less than usual	3
Much less than usual.....	4

- b) lost much sleep over worry ?

(19)

Not at all	1
No more than usual.....	2
Rather more than usual	3
Much more than usual.....	4

- c) felt that you were playing a useful part in things ?

(20)

More than usual	1
Same as usual	2
Less so than usual	3
Much less than usual.....	4

- d) felt capable of making decisions about things ?

(21)

More so than usual.....	1
Same as usual	2
Less so than usual	3
Much less capable.....	4

e) felt constantly under strain ?

- Not at all 1
- No more than usual 2
- Rather more than usual 3
- Much more than usual..... 4

(22)

f) felt you couldn't overcome your difficulties ?

- Not at all 1
- No more than usual 2
- Rather more than usual 3
- Much more than usual..... 4

(23)

g) been able to enjoy your normal day-to-day activities ?

- More so than usual..... 1
- Same as usual 2
- Less so than usual 3
- Much less than usual..... 4

(24)

h) been able to face up to problems ?

- More so than usual..... 1
- Same as usual 2
- Less able than usual 3
- Much less able 4

(25)

i) been feeling unhappy or depressed ?

- Not at all 1
- No more than usual 2
- Rather more than usual 3
- Much more than usual..... 4

(26)

j) been losing confidence in yourself ?

- Not at all 1
- Not more than usual 2
- Rather more than usual 3
- Much more than usual 4

(27)

k) been thinking of yourself as a worthless person ?

- Not at all 1
- No more than usual 2
- Rather more than usual 3
- Much more than usual 4

(28)

l) been feeling reasonably happy, all things considered ?

- More so than usual 1
- About same as usual 2
- Less so than usual 3
- Much less than usual 4

(29)

2. Here are some questions about family life.
Do you personally agree or disagree ...

a) Living together outside of marriage is always wrong

- Strongly agree 1
- Agree 2
- Neither agree nor disagree 3
- Disagree 4
- Strongly disagree 5

(30)

b) Adult children have an obligation to look after their elderly parents

Strongly agree..... 1
Agree..... 2
Neither agree nor disagree 3
Disagree..... 4
Strongly disagree 5

(31)

c) It is better to divorce than to continue an unhappy marriage.

Strongly agree..... 1
Agree..... 2
Neither agree nor disagree 3
Disagree..... 4
Strongly disagree 5

(32)

d) The man should be the head of the household

Strongly agree..... 1
Agree..... 2
Neither agree nor disagree 3
Disagree..... 4
Strongly disagree 5

(33)

e) The Bible is God's word and every word in it is true

Strongly agree..... 1
Agree..... 2
Neither agree nor disagree 3
Disagree..... 4
Strongly disagree 5

(34)

3. Here are a few questions about your friends. Please choose the three people you consider to be your closest friends. They should not include people who live with you but they can include relatives.

	1st friend	2nd friend	3rd friend
a) Is this friend?	male female <input type="checkbox"/> <input type="checkbox"/> 1 <input type="checkbox"/> 2 35	male female <input type="checkbox"/> <input type="checkbox"/> 1 <input type="checkbox"/> 2 36	male female <input type="checkbox"/> <input type="checkbox"/> 1 <input type="checkbox"/> 2 37
b) Is this person a relative? If YES please write in their relationship to you (eg mother, uncle, cousin) if not write in `None'	Yes No <input type="checkbox"/> <input type="checkbox"/> 1 <input type="checkbox"/> 2 ↓ ----- WRITE IN RELATIONSHIP OFFICE CODE <input type="checkbox"/> <input type="checkbox"/> 1 38-39	Yes No <input type="checkbox"/> <input type="checkbox"/> 1 <input type="checkbox"/> 2 ↓ ----- WRITE IN RELATIONSHIP OFFICE CODE <input type="checkbox"/> <input type="checkbox"/> 1 40-41	Yes No <input type="checkbox"/> <input type="checkbox"/> 1 <input type="checkbox"/> 2 ↓ ----- WRITE IN RELATIONSHIP OFFICE CODE <input type="checkbox"/> <input type="checkbox"/> 1 42-43
c) What is your friend's age?	Years <input type="checkbox"/> <input type="checkbox"/> 1 44-45	Years <input type="checkbox"/> <input type="checkbox"/> 1 46-47	Years <input type="checkbox"/> <input type="checkbox"/> 1 48-49
d) About how long have you known him or her?	Less than 1 year <input type="checkbox"/> 1 1-2 years <input type="checkbox"/> 2 3-10 years <input type="checkbox"/> 3 10 years or more <input type="checkbox"/> 4 50	Less than 1 year <input type="checkbox"/> 1 1-2 years <input type="checkbox"/> 2 3-10 years <input type="checkbox"/> 3 10 years or more <input type="checkbox"/> 4 51	Less than 1 year <input type="checkbox"/> 1 1-2 years <input type="checkbox"/> 2 3-10 years <input type="checkbox"/> 3 10 years or more <input type="checkbox"/> 4 52

	1st friend	2nd friend	3rd friend
e) How often do you see or get in touch with your friend either by visiting, writing or by telephone?	Most days <input type="text" value="1"/>	Most days <input type="text" value="1"/>	Most days <input type="text" value="1"/>
	At least once <input type="text" value="2"/>	At least once <input type="text" value="2"/>	At least once <input type="text" value="2"/>
	a week <input type="text" value="3"/>	a week <input type="text" value="3"/>	a week <input type="text" value="3"/>
	At least once <input type="text" value="3"/>	At least once <input type="text" value="3"/>	At least once <input type="text" value="3"/>
	a month <input type="text" value="4"/>	a month <input type="text" value="4"/>	a month <input type="text" value="4"/>
	Less often <input type="text" value="4"/>	Less often <input type="text" value="4"/>	Less often <input type="text" value="4"/>
	53	54	55
f) About how many miles away does your friend live?	Less than one mile <input type="text" value="1"/>	Less than one mile <input type="text" value="1"/>	Less than one mile <input type="text" value="1"/>
	Less than five miles <input type="text" value="2"/>	Less than five miles <input type="text" value="2"/>	Less than five miles <input type="text" value="2"/>
	Between five and fifty miles <input type="text" value="3"/>	Between five and fifty miles <input type="text" value="3"/>	Between five and fifty miles <input type="text" value="3"/>
	Over fifty miles <input type="text" value="4"/>	Over fifty miles <input type="text" value="4"/>	Over fifty miles <input type="text" value="4"/>
	55	57	58
g) Which of these best describes what your friend does?	Full time employment <input type="text" value="1"/>	Full time employment <input type="text" value="1"/>	Full time employment <input type="text" value="1"/>
	Part time	Part time	Part time

	<p>employment <input type="text" value="2"/></p> <p>Unemployed <input type="text" value="3"/></p> <p>Full time education <input type="text" value="4"/></p> <p>Full time housework <input type="text" value="5"/></p> <p>Fully retired <input type="text" value="6"/></p> <p>59</p>	<p>employment <input type="text" value="2"/></p> <p>Unemployed <input type="text" value="3"/></p> <p>Full time education <input type="text" value="4"/></p> <p>Full time housework <input type="text" value="5"/></p> <p>Fully retired <input type="text" value="6"/></p> <p>60</p>	<p>employment <input type="text" value="2"/></p> <p>Unemployed <input type="text" value="3"/></p> <p>Full time education <input type="text" value="4"/></p> <p>Full time housework <input type="text" value="5"/></p> <p>Fully retired <input type="text" value="6"/></p> <p>61</p>
--	---	---	---

- 4a. Thinking now of your best friend or the friend you feel closest to. What is the name or title of your friend's current job? If this friend is not working, please give details of his/her last job.

WRITE IN JOB TITLE _____

- 4b. What kind of work does (or did) your friend do most of the time?

WRITE IN _____

**THANK YOU. THESE ARE ALL THE QUESTIONS.
PLEASE FILL IN YOUR AGE AND SEX BELOW AND
GIVE THIS FORM TO YOUR INTERVIEWER.**

Please write in your date of birth:

Day		Month		Year		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
						<input type="text" value="1"/>

and tick male or female

male

female

1

2

**THANK YOU.
YOU CAN NOW GIVE THIS TO YOUR INTERVIEWER**

P2. INTERVIEWER CHECKS

a) What is the sex of the person being proxied? (PROXY SUBJECT)

Male ----- 1
Female ----- 2

b) What is the relationship of the proxy informant
(the person answering the questions) to the person
who this proxy interview is about?

WRITE IN RELATIONSHIP _____

OFFICE CODE
UAAAAAAAAA
3 3 3
AAAAAAAAAAU

c) Enter person number of Proxy INFORMANT (FROM HOUSEHOLD GRID)
PLEASE NOTE IN MARGIN IF PROXY INFORMANT AND
PROXY SUBJECT BELONG TO DIFFERENT HOUSEHOLDS

PERSON NUMBER
UAAAAAAAAA
3 3 3
AAAAAAAAAAU

d) What is the reason the person is being proxied?

REASON FOR PROXY

Table with reasons for proxying such as 'Temporarily absent', 'In institution (eg hospital, OPH)', 'Studying away from home', etc. Includes a 'GIVE DETAILS BELOW' instruction and a numbered list up to 12.

P12 . **SHOWCARD P4**

Please look at this card. Does (NAME) have any of the qualifications listed?

Yes -----	**	<u>1</u>	ASK P13
No -----		2	GO TO
Don't know -----		8	P14

P13. Which is the highest qualification (she/he) has got?

(CODE ONE ONLY)

- | | | |
|---|------|----|
| a) Youth training certificate ----- | **** | 01 |
| b) Recognised trade apprenticeship completed ----- | | 02 |
| c) Clerical and commercial qualifications
(eg typing/shorthand/book-keeping/commerce) ----- | | 03 |
| d) City & Guilds Certificate -
Craft/Intermediate/Ordinary/Part I ----- | | 04 |
| e) City & Guilds Certificate - Advanced/Final/Part II ----- | | 05 |
| f) City & Guilds Certificate - Full Technological/Part III ----- | | 06 |
| g) Ordinary National Certificate (ONC) or Diploma (OND),
BEC/TEC/BTEC National/General Certificate or Diploma -- | | 07 |
| h) Higher National Certificate (HNC) or Diploma (HND),
BEC/TEC/BTEC Higher Certificate or Higher Diploma ----- | | 08 |
| i) Nursing qualifications (eg SEN, SRN, SCM, RGN) ----- | | 09 |
| j) Teaching qualifications (not degree) ----- | | 10 |
| k) University diploma ----- | | 11 |
| l) University or CNA A First Degree (eg BA, B.Ed, BSc) ----- | | 12 |
| m) University or CNA A Higher Degree (eg MSc, PhD) ----- | | 13 |
| n) Other technical, professional or higher qualifications | | |
| (PLEASE GIVE DETAILS) _____ | | 14 |

NOW GO TO P16 (page 8)

P14 . **SHOWCARD P5**

Please look at this card. Does (NAME) have any of the qualifications listed?

Yes -----	**	<u>1</u>	ASK P15
No -----		2	GO TO
Don't know -----		8	P16

P15. Which is the highest qualification (she/he) has got?
(**CODE ONE ONLY**)

ENGLISH AND WELSH SCHOOL EXAMS

- | | | |
|----|---|------|
| | | **** |
| a) | School Certificate or Matriculation ----- | 01 |
| b) | CSE grade 2-5 ----- | 02 |
| c) | CSE grade 1 ----- | 03 |
| d) | GCSE grades D-G ----- | 04 |
| e) | GCSE grades A-C ----- | 05 |
| f) | O level (obtained before 1975) ----- | 06 |
| g) | O level A-C (1975 or later) ----- | 07 |
| h) | O level D,E (1975 or later) ----- | 08 |
| i) | Higher School Certificate ----- | 09 |
| j) | A level ----- | 10 |

SCOTTISH SCHOOL EXAMS

- | | | |
|----|--|----|
| k) | SCE Ordinary Grade bands D-E or 4-5
(1973 or later) ----- | 12 |
| l) | O grades
(pass or bands A-C or 1-3) ----- | 13 |
| m) | Standard Grade level 4-7 ----- | 14 |
| n) | Standard Grade level 1-3 ----- | 15 |
| o) | Higher Grade ----- | 16 |
| p) | Certificate of 6th year studies ----- | 17 |
| q) | SLC: School Leaving Certificate
- Lower Grade ----- | 18 |
| r) | SLC: School Leaving Certificate
- Higher Grade ----- | 19 |

OTHER (INCLUDING FOREIGN QUALIFICATIONS)

- | | | |
|----|---|----|
| s) | Other
(PLEASE GIVE DETAILS) ----- | 20 |
|----|---|----|

0

HEALTH AND CARING

I would now like to ask you about (NAME's) health and use (she/he) makes of health services.

P16. Please think back over the last 12 months about how (his/her) health has been. Compared to people of (his/her) own age, would you say that (his/her) health has on the whole been **READ OUT**

- | | |
|--------------------|----|
| | ** |
| Excellent ----- | 1 |
| Good ----- | 2 |
| Fair ----- | 3 |
| Poor ----- | 4 |
| or Very Poor ----- | 5 |
| Don't know ----- | 8 |

P17. Is (NAME) registered as a disabled person, either with Social Services or with a green card?

- | | |
|------------------|----|
| | ** |
| Yes ----- | 1 |
| No ----- | 2 |
| Don't know ----- | 8 |

P18. **SHOWCARD P6**

Does (NAME) have any of the health problems or disabilities listed on this card? You can just tell me which letters apply.

EXCLUDE TEMPORARY CONDITIONS

CODE ALL THAT APPLY OR CODE `NONE'

- | | |
|------------------|----------------|
| | ** |
| None ----- | 0 GO TO |
| Don't know ----- | 8 P19 |

- | | | |
|---|---|----|
| A | Problems or disability connected with:
arms, legs, hands, feet, back, or neck
(including arthritis and rheumatism).....01 | ** |
| B | Difficulty in seeing (other than needing
glasses to read normal size print).....02 | ** |
| C | Difficulty in hearing.....03 | ** |
| D | Skin conditions/allergies.....04 | ** |
| E | Chest/breathing problems, asthma, bronchitis...05 | ** |
| F | Heart/blood pressure or blood
circulation problems.....06 | ** |
| G | Stomach/liver/kidneys or digestive problems....07 | ** |
| H | Diabetes.....08 | ** |
| I | Anxiety, depression or bad nerves09 | ** |
| J | Alcohol or drug related problems.....10 | ** |
| K | Epilepsy.....11 | ** |
| L | Migraine or frequent headaches.....12 | ** |
| M | Other health problems
(PLEASE GIVE DETAILS)13 | ** |

P19. Does (NAME's) health in any way limit (his/her) daily activities compared to most people of (his/her) age?

	**
Yes -----	<u>1 ASK P20</u>
No -----	2 GO TO
Don't know -----	8 P21

P20 . **SHOWCARD P7**

Please look at this card and tell me which of these activities, if any, (NAME) would normally find difficult to manage on (his/her) own?

CODE ALL THAT APPLY

	**
Don't know -----	8
a) Doing the housework -----	1
b) Climbing stairs -----	2
c) Dressing him/herself -----	3
d) Walking for at least 10 minutes --	4
e) (None of these) -----	5

P21 . Does (his/her) health limit the type of work or the amount of work (she/he) can do?

INCLUDE BOTH PAID AND UNPAID WORK

	**
Yes -----	<u>1 ASK P22</u>
No -----	2 GO TO
Don't know -----	8 P24

P22 . Does (NAME'S) health keep (him/her) from doing some types of work?

	**
Yes -----	1 ASK
No -----	<u>2 P23</u>
Can do nothing -----	<u>3 GO TO P24</u>
Don't know -----	8 ASK P23

P23 . For work (NAME) can do, how much does it limit the amount of work (she/he) can do? **READ OUT**

	**
A lot -----	1
Somewhat -----	2
Just a little ---	3
or Not at all -----	4

P29. INTERVIEWER CHECK: IS PROXY SUBJECT FEMALE AND UNDER 45?

Yes ----- 1 ASK P30
 No ----- 2 GO TO P31

P30. Was any of this for childbirth?

Yes - all ----- 1
 Yes - some ----- 2
 No ----- 3
 Don't know ----- 8

P31. SHOWCARD P8

Here is a list of some health and welfare services. Has (NAME) made use of any of these services since September 1st 1990 last year?

Yes ----- 1 ASK P32
 No ----- 2 GO TO
 Don't know ----- 8 P33

P32 . Which services has (she/he) used?

(CODE ALL THAT APPLY IN GRID BELOW)
 PROMPT FOR `Any Others'?

- a) Health visitor, district nurse ----- 1 **
- b) Home-help ----- 2 **
- c) Meals on wheels ----- 3 **
- d) Social worker, welfare officer ----- 4 **
- e) Chiropodist ----- 5 **
- f) Alternative medical practitioner
 (e.g. homeopath, osteopath) ----- 6 **
- g) Psychotherapist (including
 psychiatrist or analyst) ----- 7 **
- h) Speech therapist, occupational
 therapist ----- 8 **
- i) Physiotherapist ----- 9 **
- j) Any other health or welfare services?
 (PLEASE GIVE DETAILS)
- i) _____ 10 **
- ii) _____ 11 **

P33 . Does (NAME) smoke cigarettes regularly, occasionally or not at all?

Yes, regularly ----- 1
 Yes, occasionally ----- 2
 No, not at all ----- 3
 Don't know ----- 8

P34 . Does (NAME) look after or give special help to anyone living here who is sick, handicapped or elderly?

**

Yes ----- 1 ASK P35
 No ----- 2 GO TO
 Don't know ----- 8 P36

P35 . Who is the person/people (she/he) looks after?

ENTER PERSON NUMBER(S) FROM HOUSEHOLD GRID

```

PERSON NUMBER
UAAAAAAAAA¿
A 3 3 3 ****
AAAAAAAAAA¿
UAAAAAAAAA¿
B 3 3 3 ****
AAAAAAAAAA¿
UAAAAAAAAA¿
C 3 3 3 ****
AAAAAAAAAA¿
    
```

EMPLOYMENT

P36. Did (NAME) do any paid work last week - that is in the seven days ending last Sunday - either as an employee or self employed?

**

Yes ----- 1 GO TO P40
 No ----- 2 ASK P37
 Don't know ----- 8 GO TO P58 (page 18)

P37 . Even though (NAME) wasn't working did (she/he) have a job that (she/he) was away from last week?

**

Yes ----- 1 GO TO P39
 No ----- 2 ASK P38
 Waiting to take up job ----- 3 GO TO
 Don't know ----- 8 P58 (page 18)

ASK ALL NOT CURRENTLY WORKING (P37 = 2)

P38. Has (she/he) looked for any paid work in the last four weeks?

**

Yes ----- 1 ÄÄ¿
 No ----- 2 3 GO TO
 Don't know ----- 8 3 P58 (page 18)
 Refused ----- 9 ÄÄ¿

P39. What was the main reason (she/he) was away from work last week?

- Maternity leave ----- 01
- Other leave/holiday ----- 02
- Sick/injured ----- 03
- Attending training course ----- 04
- Laid off/on short time ----- 05
- On strike ----- 06
- Other personal/family reasons (GIVE DETAILS)--
----- 07
- Other reasons (GIVE DETAILS) -----
----- 08
- Don't know ----- 98

IF PROXY SUBJECT IN EMPLOYMENT

P40. Is (his/her) current job (READ OUT)

- A permanent job ----- 1
- A seasonal, temporary or casual job ----- 2
- Or a job done under contract or for a fixed
period of time? ----- 3
- Don't know ----- 8

P41. What was (his/her) main job last week? Please tell me the exact job title and describe fully the sort of work (she/he) does.

- Don't know ----- 8 GO TO P46

IF MORE THAN ONE JOB: MAIN = JOB WITH MOST HOURS. IF EQUAL HOURS: MAIN JOB = HIGHEST PAID

ENTER JOB TITLE: _____

**DESCRIBE FULLY WORK DONE:
(IF RELEVANT 'WHAT ARE THE MATERIALS MADE OF?')**

OFFICE CODE

--	--	--	--	--	--

P42. What does the firm/organisation (she/he) works for actually make or do (at the place where (she/he) works)?
DESCRIBE FULLY

OFFICE CODE

UAAAAAAAAAAAAAAAAAAAAAAAAA;

3 3 3 3 3
 AAAAAAAAAAAAAAAAAAAAAAAAAU

P43. Is (she/he) an employee or self-employed?

Employee ----- 1 GO TO P46
 Self-employed ----- 2 ASK P44
 Don't know ----- 8 GO TO P46

SELF EMPLOYED ONLY

P44. Does (she/he) have any employees?

YES, has employees ----- 1 ASK P45
 NO, does not have employees ----- 2 GO TO
 Don't know ----- 8 P48

P45. How many people does (she/he) employ?

 AAAAAA;
 1 - 2 ----- 01 3
 3 - 9 ----- 02 3
 10 - 24 ----- 03 3
 25 - 49 ----- 04 3
 50 - 99 ----- 05 3
 100 - 199 ----- 06 3
 200 - 499 ----- 07 3 GO TO
 500 - 999 ----- 08 3 P48
 1000 or more ----- 09 3
 Don't know but fewer
 than 25 ----- 10 3
 Don't know but 25
 or more ----- 11 3
 Don't know ----- 98 3
 AAAAAAU

EMPLOYEES ONLY

P46. Does (she/he) have any managerial duties or supervise any other employees?

**

- Manager ----- 1
- Foreman/supervisor ----- 2
- NOT** manager or supervisor ----- 3
- Don't know ----- 8

P47. **SHOWCARD P9**

Which of the types of organisations on this card does (NAME) work for?

- Private firm/company/plc ----- 01
- Civil Service or central government ----- 02
- Local government/town hall
(inc local education, fire, police) -- 03
- National Health Service or State
Higher Education (inc polytechnics) -- 04
- Nationalised Industry ----- 05
- Non-profit making organisation (include
charities, co-operatives) ----- 06
- Armed forces ----- 07
- Other (**SPECIFY**) ----- 08

- Don't know ----- 98

ASK ALL EMPLOYED

P48. How many hours does (NAME) usually work in a normal week in that job, excluding any overtime?

IF NO NORMAL HOURS NOTE THIS IN MARGIN AND ASK FOR AVERAGE

WRITE IN: UAAAAAAAAA
 3 3 3
 AAAAAAAAAU HOURS

**

Don't know ----- 8

P49. Would you say (his/her) current job is part-time or full-time?

**

- Part time ----- 1
- Full time ----- 2
- Don't know----- 8

P50. **SHOWCARD P10**

Which of the categories on this card best describes the times of day (NAME) usually works? **CODE ONE ONLY**

- ****
- Mornings only ----- 01
 - Afternoons only ----- 02
 - During the day ----- 03
 - Evenings only ----- 04
 - At night ----- 05
 - Both lunchtime and evenings ----- 06
 - Other times of day ----- 07
 - Rotating shifts ----- 08
 - Varies/no usual pattern ----- 09
 - Other (**GIVE DETAILS**) -----
 - 10

 - Don't know ----- 98

P51. Does (NAME) work mainly:

- **
- At home ----- 1 **GO TO P53**
 - At his/her employer's premises ----- 2
 - Driving or travelling around ----- 3
 - Or at one or more other places? ----- 4 **ASK P52**
 - Other (**GIVE DETAILS**) -----
 - 5

 - Don't know ----- 8 **GO TO P53**

P52 . And what is usually (his/her) main means of travel to work?
CODE ONE ONLY

- ****
- British rail, train ----- 01
 - Underground, tube, metro ----- 02
 - Bus, minibus or coach (public or private) ---- 03
 - Motor cycle, scooter, moped ----- 04
 - Driving a car or van ----- 05
 - Passenger in car or van ----- 06
 - Pedal cycle ----- 07
 - On foot (**WALKS ALL THE WAY**) ----- 08
 - Other (**SPECIFY**) -----
 - 09

 - Don't know ----- 98

INTERVIEWER CHECK (HOUSEHOLD GRID)

P53. Is proxy subject the Responsible Adult for any child/children aged 12 or under?

**

Yes ----- 1 ASK P54

No ----- 2 GO TO P58

P54. **SHOWCARD P11**

How are (NAME's) children aged 12 or under looked after while (she/he) is at work?

**

Don't know ----- 8

CODE UP TO 3 MENTIONS

	3	1st	3	2nd	3	3rd	3
	3	Mention	3	Mention	3	Mention	3
She/he works only while they are at school -----	3	01	3	01	3	01	3
They look after themselves until she/he gets home -	3	02	3	02	3	02	3
She/he works from home -----	3	03	3	03	3	03	3
His/her spouse/partner looks after them -----	3	04	3	04	3	04	3
A <u>nanny or mother's help</u> looks after them at home -	3	05	3	05	3	05	3
They go to a <u>work-place nursery</u> -----	3	06	3	06	3	06	3
They go to a <u>day nursery</u> -----	3	07	3	07	3	07	3
They go to a <u>child minder</u> -----	3	08	3	08	3	08	3
A <u>relative</u> looks after them -----	3	09	3	09	3	09	3
A <u>friend or neighbour</u> looks after them -----	3	10	3	10	3	10	3
Other (GIVE DETAILS)	3	11	3	11	3	11	3

P55. **INTERVIEWER CHECK:**

IF ANY CODES 5 - 11 RINGED ABOVE: ASK P56

IF ONLY CODES 1 - 4 RINGED ABOVE: GO TO P57

P56. Is this childcare free of charge or does some or all of it have to be paid for?

**

All free of charge ----- 1

Some/all paid for ----- 2

Don't know ----- 8

P57. Who usually looks after (NAME'S) child/children when they are ill?
CODE ONE ONLY

	**
Proxy subject -----	1
Proxy subject's spouse/partner ---	2
Mother's help/nanny -----	3
Relative -----	4
Friend/neighbour -----	5
Other (GIVE DETAILS)	
_____	6
Don't know -----	8

ASK ALL

P58. **INTERVIEWER CHECK: PROXY SUBJECT IS**

	**
Male 16-64 -----	1 ASK
Female 16-59 -----	<u>2 P59</u>
Others -----	3 GO TO P61

P59. Some people, although they have a job, are entitled to sign on, while others who are looking for work may not sign on.

May I just check, last week was (NAME) signed on at an Unemployment Benefit Office?

	**
Yes -----	<u>1 ASK P60</u>
No -----	2 GO TO
Don't know -----	8 P61

P60. Can I just check, was this (**READ OUT**)
CODE FIRST THAT APPLIES

	**
To claim unemployment benefit -----	1
To claim income support as an unemployed person -----	2
Or in order to get credits for National Insurance contributions? -----	3
Don't know -----	8

ASK ALL

INTRODUCTION: And lastly, we have found that in order to help our research we need to ask about the income that (NAME) receives. I'd like to remind you that anything you tell me is completely confidential.

P61. SHOWCARD P12

Would you please look at this card and give me the letter for the group in which you would place (NAME'S) total personal income from all sources, before tax and other deductions.

<u>WEEKLY</u> INCOME	<u>ANNUAL</u> INCOME		****
BEFORE TAX	BEFORE TAX		
LESS THAN £77	LESS THAN £ 3,999	A -----	01
£ 78 - £ 115	£ 4,000 - £ 5,999	B -----	02
£ 116 - £ 154	£ 6,000 - £ 7,999	C -----	03
£ 155 - £ 192	£ 8,000 - £ 9,999	D -----	04
£ 193 - £ 230	£ 10,000 - £ 11,999	E -----	05
£ 231 - £ 289	£ 12,000 - £ 14,999	F -----	06
£ 290 - £ 346	£ 15,000 - £ 17,999	G -----	07
£ 347 - £ 385	£ 18,000 - £ 19,999	H -----	08
£ 386 - £ 442	£ 20,000 - £ 22,999	I -----	09
£ 443 - £ 500	£ 23,000 - £ 25,999	J -----	10
£ 501 - £ 558	£ 26,000 - £ 28,999	K -----	11
£ 559 - £ 615	£ 29,000 - £ 31,999	L -----	12
£ 616 - £ 673	£ 32,000 - £ 34,999	M -----	13
£ 674 OR MORE	£ 35,000 - OR MORE	N -----	14
No income at all		0 -----	00
		Don't know -----	98
		Refused -----	99

	HOURS	MINUTES
TIME NOW	UAAAAAAAAA¿	UAAAAAAAAA¿
	3 3 3	3 3 3
	AAAAAAAAAU	AAAAAAAAAU
	~	**~**

END PROXY INTERVIEW

Thank you for your time, that is all the questions I have.

**NOW GO TO TRACKING INFORMATION FOR PROXY (Page 7)
ON COVERSHEET**

**REMEMBER TO COMPLETE INTERVIEWER OBSERVATIONS AFTER
THE INTERVIEW IS COMPLETE (page 20)**

INTERVIEWER OBSERVATIONS

COMPLETE AFTER PROXY INTERVIEW

PI1. INTERVIEWER CHECK: Who was present during the interview?
CODE ALL THAT APPLY

- ****
- Informant alone ----- 1 GO TO P14
- Partner present ----- 2 ANSWER
- Other adult(s) present ----- 3 PI2
- Child(ren) present ----- 4

PI2. Did any of these people seem to influence any of the answers given by the informant?

- **
- A great deal ----- 1 ANSWER
- A fair amount ----- 2 PI3
- A little ----- 3 _____
- Not at all ----- 4 GO TO P14

PI3. In what way was the informant influenced? [NOTE PARTICULAR QUESTIONS]

PI4. In general, the informant's co-operation during the interview was

- **
- Very good ----- 1
- Good ----- 2
- Fair ----- 3
- Poor ----- 4
- or Very poor ----- 5

PI5. Was the informant willing to complete the tracking schedule ?

- **
- Yes, completed ----- 1
- No, refused (GIVE DETAILS)----- 2
- _____ 2
- Other (SPECIFY)----- 3
- _____ 3

PI6. In general how would you describe the proxy interview? Please add any further remarks that may help to clarify any problems arising during processing. Is there anything the Research Centre should be aware of for contacting the informant or proxy subject again in the future?

OFFICE CODE

--	--

(Instructions: write any general impressions about the interview situation that might have a bearing on our understanding of the interview or recontacting informant/household).

LIVING IN BRITAIN

<i>PERIOD</i>	WWI	1910-1929	1930-1949	WWII
YEAR 19	10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29		30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49	
Marital/ fertility dates				
Age left school x				
Self-employee 1				
Full-time employee 2				
Part-time employee 3				
Unemployed 4				
Retired 5				
Looking after family 6				
Other 7				

<i>PERIOD</i>	1950-1969	1970-1989	1990 +
YEAR 19	50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69	70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89	90 91 92
Marital/ fertility dates			
Age left school x			
Self-employee 1			
Full-time employee 2			
Part-time employee 3			
Unemployed 4			
Retired 5			
Looking after family 6			
Other 7			

Insert the following dates where relevant:

Year(s) of marriage

M

Year(s) children born

C

LIFE HISTORY CALENDAR

- A) **Colour television**
- B) **Video recorder**
- C) **Deep freeze or fridge freezer (exclude fridge only)**
- D) **Washing machine**
- E) **Tumble drier**
- F) **Dish washer**
- G) **Microwave oven**
- H) **Home computer (exclude video games)**
- I) **Compact disc player**

QH53

H2

Building extension or room conversion

Garage or car port

Drive way or concrete base for vehicle

Garden shed/garden fence/garden patio

Kitchen or bathroom units

Any other extensions or improvements

Interior or exterior painting or decorating

Repair or replacement of guttering, roof, door, plumbing, plaster, woodwork

Repairs or replacement of windows (including double glazing)

Repairs or replacement of walls (eg brickwork, stucco)

Repairs or replacement of electricity system (including rewiring)

Any other repairs, replacements or decorations

**Include all food, bread, milk, soft drinks etc;
Exclude pet food, alcohol, cigarettes and meals out.**

A) UNDER £10

B) £10---£19

C) £20---£29

D) £30---£39

E) £40---£49

F) £50---£59

G) £60---£79

H) £80---£99

I) £100--£119

J) £120--£139

K) £140--£159

L) £160 OR OVER

- A) Employer moved job to another workplace**

- B) Got a different job with the same employer which meant moving workplace**

- C) Moved to start a new job with a new employer**

- D) Moved to be nearer work but didn't move workplace**

- E) Moved to start own business**

- F) Decided to relocate own business**

- G) Salary increased so could afford to move home**

- H) Moved to look for work**

- I) None of the above**

Self employed

In paid employment (full or part-time)

Unemployed

Retired from paid work altogether

On maternity leave

Looking after family or home

Full-time student/ at school

Long term sick or disabled

On a government training scheme

Something else (please give details)

Comprehensive school

Grammar school (not fee-paying)

Fee paying grammar school

Sixth form College/Tertiary College

Public or other private school

Other type of school (please give details)

Nursing school/Teaching Hospital

College of further/higher education

Other college or training establishment (please give details)

Polytechnic/Scottish Central Institutions

University

- A) Youth training certificate**
- B) Recognised trade apprenticeship completed**
- C) Clerical and commercial qualifications (eg typing/shorthand/book-keeping/commerce)**
- D) City & Guilds Certificate - Craft/Intermediate/Ordinary/Part 1**
- E) City & Guilds Certificate - Advanced/Final/Part 11**
- F) City & Guilds Certificate - Full Technological/Part 111**
- G) Ordinary National Certificate (ONC) or Diploma (OND),
BEC/TEC/BTEC National/General Certificate or Diploma**
- H) Higher National Certificate (HNC) or Diploma (HND),
BEC/TEC/BTEC Higher Certificate or Higher Diploma**
- I) Nursing qualifications (eg SEN, SRN, SCM RGN)**
- J) Teaching qualifications (not degree)**
- K) University diploma**
- L) University or CNAA First Degree (eg BA, B.Ed, BSc)**
- M) University or CNAA Higher Degree (eg MSc, PhD)**
- N) Other technical, professional or higher qualifications (please give details)**

ENGLISH/WELSH SCHOOL EXAMS

A) GCSE grades D-G

B) GCSE grades A-C

C) A Level

D) CPVE : Certificate of Pre-Vocational Education

SCOTTISH SCHOOL EXAMS

E) SCE Ordinary Grade bands D-E or 4-5

F) O grades (pass or bands A-C or 1-3)

G) Standard Grade level 4-7

H) Standard Grade level 1-3

I) Higher Grade or Revised higher Grade

J) Certificate of 6th year studies

Other (including foreign qualifications)

K) Other School Exams (please give details)

White

Black - Caribbean

Black - African

Black - Other (please give details)

Indian

Pakistani

Bangladeshi

Chinese

Any other ethnic group (please give details)

Self employed

In paid employment (full or part-time)

Unemployed

Retired from paid work altogether

On maternity leave

Looking after family or home

Full-time student/ at school

Long term sick or disabled

On a government training scheme

Something else (please give details)

Comprehensive school

Grammar school (not fee-paying)

Fee paying Grammar school

Sixth form college/Tertiary college

Public or other private school

Elementary school

Secondary modern/secondary school

Technical school (not college)

Other type of school (please give details)

Nursing school/Teaching Hospital

College of further/higher education

Other College or training establishment (please give details)

Polytechnic/Scottish Central Institutions

University

None of above

- A) Youth training certificate**
- B) Recognised trade apprenticeship completed**
- C) Clerical and commercial qualifications (eg typing/shorthand/book-keeping/commerce)**
- D) City & Guilds Certificate - Craft/Intermediate/Ordinary/Part 1**
- E) City & Guilds Certificate - Advance/Final/Part 11**
- F) City & Guilds Certificate - Full Technological/Part 111**
- G) Ordinary National Certificate (ONC) or Diploma (OND),
BEC/TEC/BTEC Higher National/General Certificate or Diploma**
- H) Higher National Certificate (HNC) or Diploma (HND),
BEC/TEC/BTEC Higher Certificate or Higher Diploma**
- I) Nursing qualifications (eg SEN, SRN, SCM, RGN)**
- J) Teaching qualifications (not degree)**
- K) University diploma**
- L) University or CNAA First Degree (eg BA, B.Ed, BSc)**
- M) University or CNAA Higher Degree (eg MSc, PhD)**
- N) Other technical, professional or higher qualifications (please give details)**

ENGLISH AND WELSH SCHOOL EXAMS

A) School Certificate or Matriculation

B) CSE grade 2-5

C) CSE grade 1

D) GCSE grades D-G

E) GCSE grades A-C

F) O Level (obtained before 1975)

G) O Level A-C (1975 or later)

H) O Level D,E (1975 or later)

I) Higher School Certificate

J) A Level

SCOTTISH SCHOOL EXAMS

K) SCE Ordinary Grade bands D-E or 4-5 (1973 or later)

L) O grade (pass or bands A-C or 1-3)

M) Standard Grade level 4-7

N) Standard Grade level 1-3

O) Higher Grade

P) Certificate of 6th year studies

Q) SLC: School Leaving Certificate lower Grade

R) SLC: School Leaving Certificate Higher Grade

OTHER (INCLUDING FOREIGN QUALIFICATIONS)

S) Other school exams (please give details)

Strongly Agree

Agree

Neither Agree Nor Disagree

Disagree

Strongly Disagree

- A** Problems or disability connected with: arms, legs, hands, feet, back, or neck (including arthritis and rheumatism)
- B** Difficulty in seeing (other than needing glasses to read normal size print)
- C** Difficulty in hearing
- D** Skin conditions/allergies
- E** Chest/breathing problems, asthma, bronchitis
- F** Heart/blood pressure or blood circulation problems
- G** Stomach/liver/kidneys or digestive problems
- H** Diabetes
- I** Anxiety, depression or bad nerves
- J** Alcohol or drug related problems
- K** Epilepsy
- L** Migraine or frequent headaches
- M** Other health problems (please give details)

Doing the housework

Climbing stairs

Dressing yourself

Walking for at least 10 minutes

None of these

- A) Health visitor, district nurse**
- B) Home-help**
- C) Meals on wheels**
- D) Social worker or welfare officer**
- E) Chiropodist**
- F) Alternative medical practitioner (e.g. homeopath, osteopath)**
- G) Psychotherapist (including psychiatrist or analyst)**
- H) Speech therapist or occupational therapist**
- I) Physiotherapist**
- J) Any other health or welfare services (please give details)**

FOR MEN ONLY

- A) **Dental check-up**

- B) **Eyesight test by an optician**

- C) **Chest/other x-rays**

- D) **Blood pressure**

- E) **Cholesterol test**

- F) **Other (please give details)**

FOR WOMEN ONLY

- A) Dental check-up**

- B) Eyesight test by an optician**

- C) Chest/other x-rays**

- D) Blood pressure**

- E) Cholesterol test**

- F) Other (please give details)**

- G) Cervical smear**

- H) Breast screening**

- 01 I became self-employed**
- 02 I started full-time paid employment**
- 03 I started working part-time**
- 04 I became unemployed**
- 05 I retired from paid work altogether**
- 06 I went on maternity leave from my job.**
- 07 I started looking after my family full-time**
- 08 I became a full-time student/at school**
- 09 I became long term sick or disabled**
- 10 I started a government training scheme**
- 11 I started national service/war service**
- 12 Something else (please give details)**

- 7) Completely satisfied**
- 6) Mostly satisfied**
- 5) Somewhat satisfied**
- 4) Neither satisfied nor dissatisfied**
- 3) Somewhat dissatisfied**
- 2) Mostly dissatisfied**
- 1) Completely dissatisfied**

Private firm/company/plc

Civil Service or central government (not armed forces)

Local government or town hall (inc local education, fire, police)

National Health Service or State Higher Education (including polytechnics)

Nationalised Industry

**Non-profit making organisation
(including charities, co-operatives etc)**

Armed forces

Other (please give details)

Mornings only

Afternoons only

During the day

Evenings only

At night

Both lunchtime and evenings

Other times of day

Rotating shifts

Varies/no usual pattern

Other (please give details)

- 7) Completely satisfied**
- 6) Mostly satisfied**
- 5) Somewhat satisfied**
- 4) Neither satisfied nor dissatisfied**
- 3) Somewhat dissatisfied**
- 2) Mostly dissatisfied**
- 1) Completely dissatisfied**

- 01) I work only while they are at school
- 02) They look after themselves until I get home
- 03) I work from home
- 04) My spouse/partner looks after them
- 05) A nanny or mother's help looks after them at home
- 06) They go to a work-place nursery
- 07) They go to a day nursery
- 08) They go to a child minder
- 09) A relative looks after them
- 10) A friend or neighbour looks after them
- 11) Something else (please give details)

I pay for all of it out of my wages/salary

I pay for most of it out of my wages/salary

I share the cost equally with my spouse/partner

My spouse/partner pays for most of it

My spouse/partner pays for all of it

Other (please give details)

Unemployed

Retired from paid work altogether

On maternity leave

Looking after a family or home

Full-time student/ at school

Long term sick or disabled

On a government training scheme

Something else (please give details)

**Doing a different job for the same employer
(I was promoted or moved from this job)**

Working for a different employer

In paid employment (not self employed)

Working for myself (self-employed)

Unemployed/looking for work

Retired from paid work altogether

On maternity leave

Looking after a family or home

In full-time education/student

Long term sick or disabled

On a government training scheme

Something else (please give details)

Private firm/company/plc

Civil Service or Central Government (not armed forces)

**Local Government/town hall
(including local education, fire, police)**

**National Health Service or State Higher Education
(including polytechnic)**

Nationalised Industry

**Non-profit making organisation
(include charities, co-operatives etc)**

Armed forces

Other (please give details)

I was promoted

I left for a better job

I was made redundant

I was dismissed/sacked

It was a temporary job which ended

I took retirement

I gave up work for health reasons

I left to have a baby

I left to look after children/home

I left to look after another person (not children)

I left for another reason (please give details)

Strongly agree

Agree

Neither agree nor disagree

Disagree

Strongly disagree

QV1

30

A great deal

A fair amount

Not very much

Not at all

QV9

31

Maintaining order in the nation

Giving people more say in important government decisions

Fighting rising prices

Protecting freedom of speech

- A) **Political party**
- B) **Trade union**
- C) **Environmental group**
- D) **Parents'/School Association**
- E) **Tenants'/Residents' Group or Neighbourhood Watch**
- F) **Religious group or church organisation**
- G) **Voluntary service group**
- H) **Other community or civic group (please give details)**
- I) **Social club/working men's club**
- J) **Sports club**
- K) **Women's Institute/Townswomen's guild**
- L) **Women's Group/Feminist organisation**
- M) **Other group or organisation (please give details)**

N.I. Retirement (old age) Pension

A Pension from a previous employer

A Pension from a spouse's previous employer

A Private Pension or Annuity

A Widow's or War Widow's Pension

A Widowed mother's allowance

Severe Disablement Allowance

Invalidity Pension, Benefit or Allowance

Industrial injury or Disablement Allowance

Attendance Allowance

Mobility Allowance

Invalid Care Allowance

War Disability Pension

Disability Living Allowance

Disability Working Allowance

Unemployment Benefit and Income Support together

Income Support (Supplementary Benefit)

Unemployment Benefit

N.I. Sickness Benefit (not employer's statutory sick pay)

Child Benefit

One Parent Benefit

Family Credit

Maternity Allowance

Housing Benefit (paid direct to you)

Community Charge Benefit

Any other state benefit (please give details)

Educational Grant

Trade Union/Friendly Society Payments

Maintenance or Alimony payments

Payments from a family member not living here

**Rent from boarders or lodgers (not family members)
living here with you**

Rent from any other property

Foster Allowance

Sickness or accident insurance

Any other regular payments (please give details)

Rent

Housekeeping

Board/Keep

Personal Spending or Allowance

Household bills or food

Other (please give details)

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Maintenance/alimony/child support

Household bills/expenses

Education/grant

Spending money/allowance

Repay loan from person (not bank or finance company)

Other (please give details)

- A) I look after all the household money except my partner's personal spending money**

- B) My partner looks after all the household's money except my personal spending money**

- C) I am given a housekeeping allowance. My partner looks after the rest of the money**

- D) My partner is given a housekeeping allowance. I look after the rest of the money.**

- E) We share and manage our household finances jointly.**

- F) We keep our finances completely separate**

- G) Some other arrangement (please give details)**

Self employed

In paid employment (full or part-time)

Unemployed

Retired from paid work altogether

On maternity leave

Looking after family or home

Full-time student/at school

Long term sick or disabled

On a government training scheme

Something else (please give details)

Comprehensive school

Grammar school (not fee-paying)

Fee paying grammar school

Sixth form college/Tertiary college

Public or other private school

Elementary school

Secondary modern/secondary school

Technical school (not college)

Other type of school (please give details)

QP8

P3

Nursing school/Teaching Hospital

College of further/higher education

Other College or training establishment (please give details)

Polytechnic/Scottish central institutions

University

None of above

- A) Youth training certificate**
- B) Recognised trade apprenticeship completed**
- C) Clerical and commercial qualifications (eg typing/shorthand/book-keeping/commerce)**
- D) City & Guilds Certificate - Craft/Intermediate/Ordinary/Part 1**
- E) City & Guilds Certificate - Advance/Final/Part 11**
- F) City & Guilds Certificate - Full Technological/Part 111**
- G) Ordinary National Certificate (ONC) or Diploma (OND),
BEC/TEC/BTEC National/General Certificate or Diploma**
- H) Higher National Certificate (HNC) or Diploma (HND), BEC/TEC/BTEC
Higher Certificate or Higher Diploma**
- I) Nursing qualifications (eg SEN, SRN, SCM, RGN)**
- J) Teaching qualifications (not degree)**
- K) University diploma**
- L) University or CNA A First Degree (eg BA, B.Ed, BSc)**
- M) University or CNA A Higher Degree (eg MSc, PhD)**
- N) Other technical, professional or higher qualifications (please give
details)**

ENGLISH/WELSH SCHOOL EXAMS

A) School Certificate or Matriculation

B) CSE grade 2-5

C) CSE grade 1

D) GCSE grades D-G

E) GCSE grades A-C

F) O Level (obtained before 1975)

G) O Level A-C (1975 or later)

H) O Level D,E (1975 or later)

I) Higher School Certificate

J) A Level

SCOTTISH SCHOOL EXAMS

K) SCE Ordinary Grade bands D-E or 4-5 (1973 or later)

L) O Grades (pass or bands A-C or 1-3)

M) Standard Grade level 4-7

N) Standard Grade level 1-3

O) Higher Grade

P) Certificate of 6th year studies

Q) SLC: School leaving Certificate Lower grade

R) SLC: School leaving certificate Higher grade

OTHER (INCLUDING FOREIGN QUALIFICATIONS)

S) Other school exams (please give details)

A Problems or disability connected with: arms legs, hands, feet, back or neck (including arthritis and rheumatism)

B Difficulty in seeing (other than needing glasses to read normal size print)

C Difficulty in hearing

D Skin conditions/allergies

E Chest/breathing problems, asthma, bronchitis

F Heart/blood pressure or blood circulation problems

G Stomach/liver/kidneys or digestive problems

H Diabetes

I Anxiety, depression or bad nerves

J Alcohol or drug related problems

K Epilepsy

L Migraine or frequent headaches

M Other health problems (please give details)

- A) Doing the housework**

- B) Climbing stairs**

- C) Dressing him/herself**

- D) Walking for at least 10 minutes**

- E) None of these**

- A) Health visitor or district nurse**
- B) Home-help**
- C) Meals on wheels**
- D) Social worker or welfare officer**
- E) Chiropodist**
- F) Alternative medical practitioner (eg homeopath, osteopath)**
- G) Psychotherapist (including psychiatrist or analyst)**
- H) Speech therapist or occupational therapist**
- I) Physiotherapist**
- J) Any other health or welfare service (please give details)**

Private firm/ company /plc

Civil Service or central government (not armed forces)

Local government or town hall (including local education, fire, police)

National Health Service or State Higher Education (including polytechnic)

Nationalised Industry

Non-profit making organisation (including charities, co-operatives etc)

Armed forces

Other (please give details)

QP47

P10

Mornings only

Afternoons only

During the day

Evenings only

At night

Both lunchtime and evenings

Other times of day

Rotating shifts

Varies/no usual pattern

Other (please give details)

- 01) She/he works only while they are at school**
- 02) They look after themselves until she/he gets home**
- 03) She/he works from home**
- 04) His/her spouse/partner looks after them**
- 05) A nanny or mother's help looks after them at home**
- 06) They go to a work-place nursery**
- 07) They go to a day nursery**
- 08) They go to a child minder**
- 09) A relative looks after them**
- 10) A friend or neighbour looks after them**
- 11) Something else (please give details)**

**WEEKLY INCOME
BEFORE TAX**

**ANNUAL INCOME
BEFORE TAX**

O) NO INCOME

A) LESS THAN £ 77

LESS THAN £ 3,999

B) £ 78 - £ 115

£ 4,000 - £ 5,999

C) £ 116 - £ 154

£ 6,000 - £ 7,999

D) £ 155 - £ 192

£ 8,000 - £ 9,999

E) £ 193 - £ 230

£ 10,000 - £ 11,999

F) £ 231 - £ 289

£ 12,000 - £ 14,999

G) £ 290 - £ 346

£ 15,000 - £ 17,999

H) £ 347 - £ 385

£ 18,000 - £ 19,999

I) £ 386 - £ 442

£ 20,000 - £ 22,999

J) £ 443 - £ 500

£ 23,000 - £ 25,999

K) £ 501 - £ 558

£ 26,000 - £ 28,999

L) £ 559 - £ 615

£ 29,000 - £ 31,999

M) £ 616 - £ 673

£ 32,000 - £ 34,999

N) £ 674 OR MORE

£ 35,000 - OR MORE

QP61