

Household, Income and Labour Dynamics in Australia (HILDA)

Wave 9 General Release Marked Up Questionnaires

Release: 21.0

[PDF page](#)

1. Household Form (HF)	2
2. Household Questionnaire (HQ)	10
3. Continuing Person Questionnaire (CPQ)	23
4. New Person Questionnaire (NPQ)	111
5. Self Completion Questionnaire (SCQ)	210
6. Showcards for HF, HQ, CPQ and NPQ	230

Section 2.2 of the HILDA User Manual gives an overview of each questionnaire.





LIVING IN AUSTRALIA

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HOUSEHOLD FORM (HF)
W9 M

IN-CONFIDENCE

Date completed

IS

FS

Office to Code: Is Hhold Structure Date Set? **Yes / No** If yes, is it **IS** or **FS**?

ihhrhid	Wave 9 Randomised Household ID
ihhstate	Australian State
ihhcompi	Date competed HF (initial fieldwork)
ihhcompf	Date competed HF (final fieldwork)
ihhadst	Address status

Address Status (circle appropriate code)

Household now at new address 1 →

Household still at last known address

Corrections needed to address..... 2 →

No corrections needed..... 3

Household now at new unknown address..... 4

Write new corrections or new details for street address

No. and Street _____

Suburb/town _____

State _____ Postcode _____

INTERVIEWER NOTE: All work conducted by Roy Morgan Research is confidential. Under the Code of Professional Behaviour of the Australian Market and Social Research Society you cannot disclose any information about respondents to any third party.

Visits & phone calls	#	Visit (V) or ph (T)	Day	Date	Time in	Time out	Total time (mins)	Outcome of call	# SCQ's picked up	Comments
Initial Fieldwork Contacts (IS)	1									
	2									
	3									
	4									
	5									
	6									
	7									
	8									
	9									
	10									
	11									
	12									
	13									
	14									
Follow-up Fieldwork Contacts (FS)	1									
	2									
	3									
	4									
	5									
	6									

ihhcalls Total number of contacts
ihhpers Total persons

Non-finalised Outcome of Call codes (record in outcome column above)

NC: no contact made with a Wave 9 household member

CN: contact made, no interview – appointment NOT made

CA: contact made, no interview – appointment made

C1: contact made, and interviews with some household members completed

C2: contact made, and interviews with all household members completed

SC: call to pick up self-completion only (record number picked up)

Appointments made

	Day	Date	Time	Reason
1				
2				
3				
4				
5				

IS Interviewer Name:

FS Interviewer Name:

Interviewer ID:					F2F 1	Phone 2	Interviewer ID:					F2F 1	Phone 2
-----------------	--	--	--	--	-------	---------	-----------------	--	--	--	--	-------	---------

A) ASK A LISTED HOUSEHOLD MEMBER:

Can I first just check a few of your details? Check HF3, 5, 6 and record HF8 for respondent.

Only ivw XXXs
living in same
hhold as a PSM

B) WHO IS PRESENT FROM LAST WAVE?

Last time we had ... listed as living with you. Does [he / she] still live here?

Yes - check HF3, 5, 6 and record HF8. No - record HF8, 11-14. Repeat for all listed people.

C) MOVERS GUIDE:

All PSMs still live here

Circle code

1

- Interview household at this address
- Don't ivw any XXXs who have moved out (ie. Don't follow a XXX living without a PSM)

All PSMs have moved to one address

2

- Interview household at new local address
- Phone 1800 468 799 if non-local or unknown address
- Only interview a XXX living with a PSM

Some PSMs still live here

3

- Interview household at this address. Only interview a XXX living with a PSM
- Split PSMs who have moved locally and interview at new address
- Phone 1800 468 799 if non-local or unknown address

All PSMs have moved to more than one address.....

4

- Keep at least one PSM on this HF
- Split other PSM(s) to new household(s)
- Interview household(s) at new local address(es)
- Interview any XXXs living with PSMs (don't follow a XXX living without a PSM)
- Do not interview any XXXs still at this address
- Phone 1800 468 799 for non-local or unknown addresses

D) ANYONE ELSE NOW LIVING WITH A PSM? And does anyone else usually live here with you? Record HF3, 5-8, 10, 12.

(Do not include if: 1) Lives somewhere else more than ½ the time; or 2) Is an overseas resident living in Australia for less than 1 year.)

E) ANYONE ELSE? I have listed [read names of all Wave 9 Household Members]. Is there anyone I have missed – babies, boarders or anyone who usually lives here but is away at the moment? Record HF3, 5-8, 10, 12.

WHAT PQ TYPE APPLIES TO PEOPLE NOT LISTED?

Check pg 7 for possible PQ type. Otherwise, if EVER interviewed complete a CPQ, if NEVER interviewed complete a NPQ

HF1	*HF2	*HF3	*HF4a	*HF4b	*HF5	*HF6	*HF7		*HF8
PID	Previous W9 PID	First name and surname	Wave 8 PQ interview outcome	Wave and date last ivwd	Sex	Date of birth	Interview?		Household membership at Household Structure Date
	<u>Split hh:</u> Record person's ID from their previous W9 HF; <u>Ghosts:</u> record "ghost"	The grids have been expanded to allow recording of up to 20 persons in the household			M=1 F=2	dd/mm/yyyy	PQ type	Sample status	Listed Resident 1→HF15 Absent for workload 2→HF9 No longer member of household/in prison.... 3→HF11 Deceased 4→HF11 <u>Not listed</u> Re-joiner/Merger(pg 7) .. 5→HF10 New resident..... 6→HF10 Absent for workload new resident 7→HF9
01			ihgwli1 ihgdli1	ihgsex1	ihgage1				ihghhm1
02			ihgwli2 ihgdli2	ihgsex2	ihgage2				ihghhm2
03			ihgwli3 ihgdli3	ihgsex3	ihgage3				ihghhm3
04			ihgwli4 ihgdli4	ihgsex4	ihgage4				ihghhm4
05			ihgwli5 ihgdli5	ihgsex5	ihgage5				ihghhm5
06			ihgwli6 ihgdli6	ihgsex6	ihgage6				ihghhm6
07			ihgwli7 ihgdli7	ihgsex7	ihgage7				ihghhm7
08			ihgwli8 ihgdli8	ihgsex8	ihgage8				ihghhm8
09			ihgwli9 ihgdli9	ihgsex9	ihgage9				ihghhm9
10			• • • •						• •
11			• • • •						• •
12			ihgwli20 ihgdli20	ihgsex20	ihgage20				ihghhm20

*Ring office on 1800 468 799 to get details from previous waves for HF2 to HF8 (1st column), and GHOSTS/COMMENTS FROM W8 (page 7) prior to conducting hardcopy HF

WHEN/HOW TO CONTACT HOUSEHOLD MEMBERS CURRENTLY AWAY

				IS	FS	
HF9 Are any hhold members ABSENT FOR WORKLOAD PERIOD (HF19 =17)?				Yes.... 1.... No..... 2....	1 2	→ complete contact details below → HF10
PID(s):	First Name(s):	Expected return date: ____ / ____ / ____	Should we try to interview them: While they're away?1 When they return?.....2	CHECK: Is person aged 15-17? Yes....1 → Permission from ID ____ No.....2		
	Address:		Ph (h) Ph (w) Ph (m) Email:	Comments:		
Reason away:						
PID(s):	First Name(s):	Expected return date: ____ / ____ / ____	Should we try to interview them: While they're away?1 When they return?.....2	CHECK: Is person aged 15-17? Yes....1 → Permission from ID ____ No.....2		
	Address:		Ph (h) Ph (w) Ph (m) Email:	Comments:		
Reason away:						

FINDING OUT ABOUT JOINERS AND LEAVERS (If HF8 is not coded 3-7 go to HF15) If still overseas or in prison from Wave 8 copy detail from P7

PID	HF10	HF11		HF12		HF13	HF14	
	JOINERS: Why did [you / name in HF3] join the household?	LEAVERS: Why did [name in HF3] leave the household?		JOINERS & LEAVERS: When did this happen?		LEAVERS LOCATION: Where did [name in HF3] move to?	LEAVERS NEW HHID:	
	Marriage/live together..... 1	Separation/divorce..... 01	<i>If don't know, enter 99 / 9999</i> <i>If know year, but not month, enter 99/yyyy</i>		New address: Local.....1	New HHID for all split PSMs and XXXs who move with PSMs		
	New baby/Adopted 2	To education/job 02			New address: Non-local2			
	Share/financial reasons..... 3	To marry/live together..... 03			Address unknown.....3			
	Returned to family household.. 4	To live independently..... 04			Deceased4			
	Moved with family member.... 5	Bought own home..... 05			Overseas (provide expected return details below).....5			
	Care/support..... 6	Returned to family household.... 06			<i>Codes 1-3..... complete HF14</i>			
	Other reason (specify)..... 8	To live with other parent07			<i>Codes 2-3,5..... complete pg 5</i>			
		Left with family member.....08			<i>Code 3..... complete HF28 pg 7</i>			
		Deceased.....09			<i>Codes 2-4....phone 1800 468 799</i>			
		Other reason (specify)10						
		Don't know.....11						
	<i>Enter code</i>	<i>Specify if necessary</i>	<i>Enter code</i>	<i>Specify if necessary</i>	<i>Month</i>	<i>Year</i>	<i>Enter code</i>	<i>Record new HHID</i>
01	ihgylv1		ihgylf1		ihgjlm1	ihgjly1	ihgnlc1	
02	ihgylv2		ihgylf2		ihgjlm2	ihgjly2	ihgnlc2	
03	ihgylv3		ihgylf3		ihgjlm3	ihgjly3	ihgnlc3	
04	ihgylv4		ihgylf4		ihgjlm4	ihgjly4	ihgnlc4	
05	ihgylv5		ihgylf5		ihgjlm5	ihgjly5	ihgnlc5	
06	ihgylv6		ihgylf6		ihgjlm6	ihgjly6	ihgnlc6	
07	ihgylv7		ihgylf7		ihgjlm7	ihgjly7	ihgnlc7	
08	ihgylv8		ihgylf8		ihgjlm8	ihgjly8	ihgnlc8	
09	ihgylv9		ihgylf9		ihgjlm9	ihgjly9	ihgnlc9	
10	•		•		•	•	•	
11	•		•		•	•	•	
12	•		•		•	•	•	
	ihgylv20		ihgylf20		ihgjlm20	ihgjly20	ihgnlc20	

	HF15	HF16	HF17	HF19 Complete HF19 for everyone listed in HF3 after completing the PQ	HF20
	First name	Employment status	Health	PQ response status	SCQ outcome
	Carry over the first name of household members from HF3 to the same person number below	<p>Only to be asked for those persons aged 15 years and over i.e. born <u>on or before 30th June 1994</u></p> <p>Looking at SHOWCARD HF16, what is ...'s current employment status?</p> <p>Employed – usually works 35+ hours per week 1 Employed – usually works less than 35 hours per week 2 Not employed but is looking for work 3 <u>Neither employed nor looking for work:</u> Retired.....4 Home duties.....5 Non-working student.....6 Other 7</p>	<p>Looking at SHOWCARD HF17, does anyone here have any long-term health condition, disability or impairment such as these?</p> <p>Yes.....1 No 2</p>	<p>Interview in person.....01 Interview by phone.....02 Ineligible to interview Born after 30th June 1994 (<15).....03 Overseas for more than 6 months 04 In prison for more than 6 months.....05 XXX no longer living with a PSM 06 Refusal Too busy 07 Too invasive 08 Other reason 09 Refusal via 1800 number 10 Interview terminated 11 Other non-interview Deceased 12 Moved to another HF (complete HF14) 13 Language problem (specify) 14 Incapable/illness/infirmitry 15 Home but unable to contact 16 Away for workload (complete HF9).....17 Other unable to contact (only if HF30=11/41) 18 Contact made and all calls made (only if HF30=12/42)19</p>	<p>Code HF20 if HF19=01 or 02</p> <p>Picked up....1 To be sent....2 Refused3 Not given4 Otherwise: skip HF20</p> <p>If HF20=4, Specify reason</p>

PID	First Name	Employment Status	Health	overall	IS	FS
01		ihges1	ihglth1	ihgivwl		
02		ihges2	ihglth2	ihgivw2		
03		ihges3	ihglth3	ihgivw3		
04		ihges4	ihglth4	ihgivw4		
05		ihges5	ihglth5	ihgivw5		
06		ihges6	ihglth6	ihgivw6		
07		ihges7	ihglth7	ihgivw7		
08		ihges8	ihglth8	ihgivw8		
09		ihges9	ihglth9	ihgivw9		
10		•	•	•		
11		•	•	•		
12		ihges20	ihglth20	ihgivw20		

HF18 How are the different members of the household related to each other? (Copy the first name of the HHLD member from HF15 in the same order to Row A and Column B below.) To check or confirm answers on grid say: “[B] is [A's] [relation code]”

- 01 Married spouse (incl same sex ptnrs)
- 02 De facto spouse (incl same sex ptnrs)
- 03 Ex partner
- 04 Own child (incl adopted child)
- 05 Step child (not adopted child)
- 06 Foster child
- 07 Own parent
- 08 Step parent
- 09 Foster parent
- 10 Parent in-law (incl step/adopted/foster)
- 11 Son-in-law/daughter-in-law
- 12 Grandchild (incl step/adopted/foster)
- 13 Grandparent (incl step/adopted/foster)
- 14 Brother or sister – both parents same
- 15 Brother or sister – step or half
- 16 Adopted brother or sister
- 17 Foster brother or sister
- 18 Other relative – specify
- 19 Unrelated

Name eg John's	A's →		A: Reference Person									eg B is A's....	
	PID	01	02	03	04	05	06	07	08	09	10	11	
01													
02		irg02_01											
03		irg03_01	irg03_02										The relationship grid has been expanded to allow for up to 20 persons in the household
04		irg04_01	irg04_02	irg04_03									
05		irg05_01	irg05_02	irg05_03	irg05_04								
06		irg06_01	irg06_02	irg06_03	irg06_04	irg06_05							
07		irg07_01	irg07_02	irg07_03	irg07_04	irg07_05	irg07_06						
08		irg08_01	irg08_02	irg08_03	irg08_04	irg08_05	irg08_06	irg08_07					... to irg20_19
09		irg09_01	irg09_02	irg09_03	irg09_04	irg09_05	irg09_06	irg09_07	irg09_08				
10		irg10_01	irg10_02	irg10_03	irg10_04	irg10_05	irg10_06	irg10_07	irg10_08	irg10_09			
11		irg11_01	irg11_02	irg11_03	irg11_04	irg11_05	irg11_06	irg11_07	irg11_08	irg11_09	irg11_10		
12		irg12_01	irg12_02	irg12_03	irg12_04	irg12_05	irg12_06	irg12_07	irg12_08	irg12_09	irg12_10	irg12_11	
		irg13_01	irg13_02	irg13_03	irg13_04	irg13_05	irg13_06	irg13_07	irg13_08	irg13_09	irg13_10	irg13_11	
		irg14_01	irg14_02	irg14_03	irg14_04	irg14_05	irg14_06	irg14_07	irg14_08	irg14_09	irg14_10	irg14_11	

HF21 Are there any PSM leavers or non-contacts on this HF? (PSM and HF19=13 or 16 or 18)		Local movers, address known..... Other movers..... Non-contacts..... No movers and no non-contacts...	<u>1</u> → HF25 <u>2</u> → HF22 <u>3</u> → HF24 <u>4</u> → HF25
TRACKING INFORMATION			
HF22 HELP US CONTACT MOVERS <i>It is important that you do your best to try and locate any movers. Investigate as much as possible and record all details below. Even if you only find out the town or suburb the person may have moved to, record this below.</i>			
<ul style="list-style-type: none"> • If more than one PSM has moved to the same address record each person's name in the same box below. • If PSMs have moved to different addresses record each person's name in different boxes below. • Do not record details for any XXXs who have moved without a PSM. • Email contacts are helpful, particularly for people who have moved overseas. • If address is unknown record name of missing persons(s) along with any further information to assist with tracking. 			
Name(s) of mover		Further information	
Person ID(s) of mover			
Address and phone numbers			
Name(s) of mover		Further information	
Person ID(s) of mover			
Address and phone numbers			
Name(s) of mover		Further information	
Person number(s)			
Address and phone numbers			
HF23 Do you know where the non-local PSMs are?		MULTI RESP	
Yes.....		<u>1</u> → Ensure details recorded above at HF22 Phone 1800 468 799 Record date phoned at HF29.1 Go to HF25	
No.....		<u>2</u> → HF24	
HF24 MOVER PSMs – ADDRESS UNKNOWN OR NON-CONTACTS			
(i) Which of the following steps did you take to try and track the household/respondent?			
MULTI RESP			
Asked any remaining sample members at address..... <u>1</u>			
Asked new occupants at address			
Called all contact phone numbers (home, work, mobile) for the household/respondent..... <u>3</u>			
Asked neighbours (only if no contact with remaining sample members)			
Called all/some contact phone numbers for contact people the respondent provided in a previous wave if they move			
Other (specify)..... <u>8</u>			
(ii) Give full details and outcome of all sources/people consulted (eg names of sample members, flat/house number of neighbours etc.).			
<hr/> <hr/> <hr/>			
(iii) Is tracking required?			
Yes..... <u>1</u> → HF24(iv)			
No..... <u>2</u> → HF25			
(iv) Phone 1800 468 799 immediately.			
Record HF29.1			
(v) If you locate any of these people: phone 1800 468 799 and advise office staff to stop tracking.			

TELL US ABOUT THIS HOUSEHOLD: Complete for all HFs

HF25 Record anything which will help us reapproach the household either by phone or face-to-face.
For non-responding households or part responding households ALSO provide details of non-response. Please date all comments.

Initial Stage

Follow-up Stage

HF26 For future approaches to this household, which of the following do you think would be most successful?		Again this wave	Next wave
Answer for all households		ihhfai This wave approaches	ihhfaf Next wave approaches
It is ok for a face to face interviewer to phone this household after 2-3 face to face visits	1	1	
It is recommended that a face to face interviewer phone this household first as face to face contact is unlikely.....	2	2	
All approaches to this household should be face to face if possible.....	3	3	
This household should not be re-issued (specify reason) _____		4	4
 This household should be issued to phone only (specify reason) _____		5	5

HF27 What was the <u>main</u> reason for refusal? (Use codes 1-6 or 8 if any HF19=07-11; Code 7 if there are no refusals in the hhold)		
	IS	FS
Too busy	1	1
Not interested / waste of time	2	2
Questions too personal / too intrusive.....	3	3
Don't trust surveys / Government	4	4
Never do surveys	5	5
Weary of participating in the study.....	6	6
Other (specify)	8	8
No refusals in household	7	7

OFFICE USE ONLY

A1	Complete for HF30 IS = 03-15 & 17 (Issue FU P2?) F2F 1 Phone 2 } Skip A2-A4 Either 3 Do not issue P2 FU 4	A3	Issue FFU P3? FS = 33-45 & 47 F2F (Met only) 1 Phone 2 } Skip A4 Either 3 Do not issue P3 FFU 4
A2	Issue FU P3? IS = 03-15 & 17 F2F (Met only) 1 Phone 2 } Skip A3-A4 Either 3 Do not issue P3 FU 4	A4	Wave 10 F2F 1 Phone 2 Either 3 Do not issue W10 (must give reason/details) 4

***GHOSTS: Some people from previous waves**

If this HF is created from a 3 (or more) way split AND there are any PSMs whose address is unknown

- report these PSMs to the Team 1800 staff as a split and needing to be tracked, AND
 - record them on each split HF at HF28 as an untraceable ghost and mark ** on the right hand side of the name

*HF28 Adding a ghost to the hhold?
Any details about an untraceable ghost**?*

1. CALL 1800 468 799
 2. RECORD AT HF29.3

***COMMENTS FROM W8: IS THERE ANYTHING I NEED TO KNOW BEFORE INTERVIEWING THIS HOUSEHOLD?**

Please call 1800 468 799 to get information regarding this household.

<i>Tips for coding response status</i>			
Only code for those people in the hhold being followed-up			
	HF	HQ	PQs
<i>Full response</i>	✓	✓	From all eligible people
<i>Part response</i>	✓	✓	From some eligible people
<i>Non-response</i>	✓	<i>Possibly</i>	<i>None</i>

FINALISING THE HF - THIS MUST BE COMPLETED BEFORE CODING HF30

FINALISING THE HF - THIS MUST BE COMPLETED BEFORE CODING HF30				
	IS		FS	
	Yes	No	Yes	No
HF29.1 Any unknown address or non-local movers?				
a) Any unknown or non-local movers?	1	2	1	2
b) IF YES – Date you phoned the information through to the 1800 number?	____ / ____ / ____		____ / ____ / ____	
HF29.2 Anyone in the household deceased?				
a) PART/FULL NON-RESPONSE HHOLDS: Is anyone in the household deceased?	1	2	1	2
b) IF YES – Date you phoned the information through to the 1800 number?	____ / ____ / ____		____ / ____ / ____	
HF29.3 Any untraceable ghosts**?				
a) Have you found anything about untraceable ghosts?	1	2	1	2

ihhresp HF30 Overall Household Response Status; coded 62 to 80, 99

HF30 Response status (Have you completed HF29.1 - 29.3?)	IS	FS	
Full response			
Every eligible member of the			
current household interviewed.....02.....32			
Part response / part non-response			
Some members aged 15 plus interviewed and other(s):			
(ONE ONLY - HIERARCHY)			
Refused	03.....	33	
Non-contact	04.....	34	
Contact made with all non-respondents	05.....	35	
Away for workload period	06.....	36	
Language problem.....	07.....	37	
Incapable/death/illness	08.....	38	
Full (Household) non-response			
Full refusal-PSMs still live there.....	09.....	39	
Full refusal-Don't know if PSMs still live there	10.....	40	
No contact with a Wave 9 Household member...	11.....	41	
Contact made and all calls made.....	12.....	42	
All residents away for workload period	13.....	43	
Household does not speak English			
(specify language)	14.....	44	
Household incapable/illness	15.....	45	
Refusal via 1800 number.....	16.....	46	
Terminate (no PQs were completed).....	17.....	47	
Household deceased.....	18.....	48	
Household moved out of scope (e.g. overseas) .	19.....	49	
All PSMs moved in with another PSM	20.....	50	
Office contacted for tracking.....	97.....	98	
HF31 Postal address:			
HF31.1 For responding hholds, check mailing address			
No change to mailing address.....	1		
Change postal address to same as street address	2		
Mailing address amended below.....	3		
HF31.2 Record changes here			
.....			
.....			
.....			

OFFICE USE ONLY

Field generated suspensions (tally & total) **Returned to field (date)**



LIVING IN AUSTRALIA

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Household ID		HOUSEHOLD QUESTIONNAIRE (HQ) W9 M				
ihrhid	Randomised household ID (text)	Date of interview (dd/mm/yy)				
ihhpstate	State	Name of person providing most of the information for this form				
State	Postcode				Name of 1 st <u>other</u> person providing information for this form	ihhp1
					Name of 2 nd <u>other</u> person providing information for this form	ihhp2
						ihhp3

IN-CONFIDENCE

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Q. CHILD CARE AND HEALTH

Q1 CONFIRM WITH RESPONDENT: Are there any children less than 15 years of age living in the household?

icccinhh Yes 1
No 2 → Q27

Q2 We begin with some questions about any child care arrangements your household may have, and the costs involved. Are you able to answer these sorts of questions or should we speak to someone else?

If the person you are interviewing cannot provide the required details about childcare, skip to R1 and leave this part of the form until you can interview the person needed.

If person not available, record name for future reference _____

Q3 TIMESTAMP

Record time now : am / pm

Q4 Looking at SHOWCARD Q4, at any time in the last 12 months have you used, or thought about using, any of these forms of child care so you (or your partner) could undertake paid work?

You only need to answer "yes" or no".

(Paid work includes both working for yourself – that is, self-employed in your own business – and working for an employer.)

iccsuseth Yes 1
No 2 → Q6a

Q5 Using the scale on SHOWCARD Q5, pick a number between 0 and 10 to indicate how much of a difficulty each of the following have been for you in the last 12 months.

	N/A	DK
iccdifgq Finding good quality child care	<input type="checkbox"/>	97 99
iccdifrp Finding the right person to take care of your child	<input type="checkbox"/>	97 99
iccdifhr Getting care for the hours you need	<input type="checkbox"/>	97 99
iccdifsc Finding care for a sick child	<input type="checkbox"/>	97 99
iccdifdh Finding care during school holidays	<input type="checkbox"/>	97 99
iccdifcs The cost of child care	<input type="checkbox"/>	97 99
iccdifjm Juggling multiple child care arrangements	<input type="checkbox"/>	97 99
iccdifds Finding care for a difficult or special needs child	<input type="checkbox"/>	97 99
iccdifcc Finding a place at the child care centre of your choice	<input type="checkbox"/>	97 99
iccdifrl Finding a child care centre in the right location	<input type="checkbox"/>	97 99
iccdifch Finding care your children are happy with	<input type="checkbox"/>	97 99
iccdifsn Finding care at short notice	<input type="checkbox"/>	97 99

Q6a The next showcard, SHOWCARD Q6a, contains a longer list of child care types. Do you *actually* use any of these forms of child care while you (and your partner) are undertaking paid work?

iccwuse Yes 1 → Q7
No 2 → Q6b

Q6b What about child care while you are not undertaking paid work? Looking at SHOWCARD Q6b, and thinking of your usual week, do you use any of these forms of child care while you (or your partner) are not working?

Prompt: For example, use child care so you can study / exercise / look for work, or use child care for other reasons?

Yes 1 → Q13 iccnuse1
No 2 → Q17

Child care for school-aged children

Q7 Are there any children in the household who attend school and who are less than 15 years of age?

Yes - at least one child at school..... 1 → Q8	icsany
No - there are no children at school 2 → Q10	icsno Number of school age children in household

Q8 LIST EVERY CHILD AT SCHOOL IN GRID BELOW (ONE CHILD PER COLUMN).

- a **Looking at SHOWCARD Q8, while you (and your partner) are working, who looks after [...name of child(ren) at school...] out of school hours during term time? ASK FOR EACH CHILD AND CIRCLE THE NUMBER CORRESPONDING TO TYPE OF CARE USED (MULTI RESPONSE).**
- b **In a usual week, how many hours does [...name of child(ren) at school...] spend in that type of care while you (and your partner) are working? ASK FOR EACH CHILD If the respondent does not know write in 'DK'.**
- c **For each type of child care used for your school-aged children during the school term, what is the usual total weekly cost after any regular child care benefit you may receive has been deducted?**

FOR EACH TYPE OF CHILD CARE USED, ADD THE WEEKLY AMOUNT PAID FOR EACH CHILD & RECORD IN LAST COLUMN.

During term time care (Type of care; Usual hours in a week while parents are working; Usual weekly cost)

Names of at-school children →	Hours Suffix me	Hours	Hours	Hours	Hours	TOTAL WEEKLY COST
Me or my partner.....						
The child's brother or sister.....	bs					
Child looks after self.....	sf					
Child comes to my (or partner's) workplace....	wp		uses form of care for any child icstu_ (+suffix) ie icstu_me icstu_bs etc			
Child's grandparent who lives with us.....	gu		total hours for all children icsh_ (+ suffix) ie icsh_bs icsh_sf etc			
Child's grandparent who lives elsewhere.....	ge		total cost for all children (\$) icsc_wp icsc_gu etc			
Other relative who lives with us	au					
Other relative who lives elsewhere	ae					
A friend or neighbour coming to our home.....	fo					
A friend or neighbour in their home.....	ft					
A paid sitter or nanny	ps					
Family day care.....	fd					
Formal outside of school hours care.....	fc					
Other 1 (specify)	o1					
Other 2 (specify)	o2	Hours and costs not asked for 'Me or my partner' Costs not asked for 'Brother or sister' or 'Child looks after self' Child 6 ID: icsid6 Child 6 use and hours variables have the prefixes icstu6_ and icsh6_				
Other non-resident parent	op					
Not applicable - Boarding School	br					
Not answered	na					
Not Applicable (childcare used in holidays)	np					

Child care for school-aged children during school holidays

Q9 COPY ACROSS NAMES OF AT-SCHOOL CHILDREN INTO GRID BELOW (IN SAME ORDER AS Q8), AND ASK:

a Looking at SHOWCARD Q9, who looks after [...name of child(ren) at school...] during school holidays?

FOR EACH CHILD CIRCLE THE NUMBER CORRESPONDING TO EACH TYPE OF CARE USED (MULTI RESPONSE).

b During school holidays, how many hours per week does [...name of child(ren) at school...] usually spend in that type of care? If the child stays at carer's overnight, count these hours as well. For example, if the child goes to the grandparents for a week, hours recorded should be 168 (ie 7x24 hrs).

If the respondent does not know write in 'DK'

c For each type of child care used for your school-aged children during school holidays, what is the usual total weekly cost after any regular child care benefit you may receive has been deducted?

FOR EACH TYPE OF CHILD CARE USED, ADD THE WEEKLY AMOUNT PAID FOR EACH CHILD & RECORD IN LAST COLUMN.

During school holidays (Type of care; Usual hours in a week; Usual weekly cost)

<i>Names of at-school children →</i>	Hours Suffix <i>me</i>	Hours	Hours	Hours	Hours	TOTAL WEEKLY COST	
Me or my partner.....						<i>If care is free, record "0"</i>	
The child's brother or sister.....	<i>bs</i>	[]	[]	[]	[]		
Child looks after self.....	<i>sf</i>	[]	[]	[]	[]		
Child comes to my (or partner's) workplace...	<i>wp</i>	[]	uses form of care for any child <i>ichu_ (+ suffix) ie</i> <i>ichu_me</i> <i>ichu_bs etc</i> total hours for all children <i>ichh_ (+ suffix) ie</i> <i>ichh_bs</i> <i>ichh_wp etc</i> total weekly cost for all children <i>ichc_wp</i> <i>ichc_gu etc</i>				<i>ichc_wp</i>
Child's grandparent who lives with us	<i>gu</i>	[]				<i>ichc_gu</i>	
Child's grandparent who lives elsewhere.....	<i>ge</i>	[]				<i>ichc_ge</i>	
Other relative who lives with us	<i>au</i>	[]				<i>ichc_au</i>	
Other relative who lives elsewhere	<i>ae</i>	[]				<i>ichc_ae</i>	
A friend or neighbour coming to <i>our</i> home....	<i>fo</i>	[]				<i>ichc_fo</i>	
A friend or neighbour in <i>their</i> home.....	<i>ft</i>	[]				<i>ichc_ft</i>	
A paid sitter or nanny	<i>ps</i>	[]				<i>ichc_ps</i>	
Family day care.....	<i>fd</i>	[]	[]	[]	[]	<i>ichc_fd</i>	
Vacation care	<i>vc</i>	[]	[]	[]	[]	<i>ichc_vc</i>	
Other 1 (specify)	<i>o1</i>	[]	[]	[]	[]	<i>ichc_o1</i>	
Other 2 (specify)	<i>o2</i>	[]	[]	[]	[]	<i>ichc_o2</i>	

Other non-resident parent
Not applicable - Boarding School
Not answered
Not Applicable

op
br
na
np

Notes:

1. Child 6 ID ichid6; Child 6 uses and hours variables have the prefixes *ichu6_*, *ichh6_*.
2. Costs not asked for 'Brother or sister' or 'Child looks after self'
3. Hours and cost not asked for 'Me or my partner'.

Child care for children not yet at school

Q10 Are there any children in the household not yet at school?

Yes, has children not yet at school.....1 → Q11

No, has no child who is not yet at school2 → Q12

icpany

Q11 LIST EVERY CHILD WHO IS NOT YET AT SCHOOL IN GRID BELOW (ONE CHILD PER COLUMN).

- a **Looking at SHOWCARD Q11, while you (and your partner) are working, who looks after [...name of child(ren) not yet at school...]?
ASK FOR EACH CHILD AND CIRCLE THE NUMBER CORRESPONDING TO EACH TYPE OF CARE USED (MULTI RESPONSE).**

- b **In a usual week, how many hours does [...name of child(ren) not yet at school...] spend in that type of care while you (and your partner) are working? ASK FOR EACH CHILD AND RECORD HOURS IN CARE.**

If the respondent does not know, write in 'DK'.

- c **For each type of child care used for your children who are not yet at school, what is the usual total weekly cost after any regular child care benefit you may receive has been deducted?**

FOR EACH TYPE OF CHILD CARE USED, ADD THE WEEKLY AMOUNT PAID FOR EACH CHILD & RECORD IN LAST COLUMN.

AFTER COMPLETING THE GRID, GO TO Q12 BELOW

Care for children who are not yet at school

(Type of care; Usual hours in a week while parents are working; Usual weekly cost)

icpno	No. of pre-school children in household
-------	--

Names of children not yet at school →	Hours Suffix me	Hours	Hours	Hours	Hours	TOTAL WEEKLY COST
Me or my partner	me					If care is free, record "0"
The child's brother or sister	bs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Child's grandparent who lives with us.....	gu	<input type="checkbox"/>				icpc_gu
Child's grandparent who lives elsewhere	ge	<input type="checkbox"/>				icpc_ge
Other relative who lives with us	au	<input type="checkbox"/>				icpc_au
Other relative who lives elsewhere	ae	<input type="checkbox"/>				icpc_ae
A friend or neighbour coming to <i>our</i> home	fo	<input type="checkbox"/>				icpc_fo
A friend or neighbour in <i>their</i> home	ft	<input type="checkbox"/>				icpc_ft
A paid sitter or nanny.....	ps	<input type="checkbox"/>				icpc_ps
Family day care	fd	<input type="checkbox"/>				icpc_fd
Long day care centre at workplace.....	wd	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	icpc_wd
Private or community long day care centre ...	pd	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	icpc_pd
Kindergarten / pre-school	kp	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	icpc_kp
Other 1 (specify)	o1	Note: 1. In waves 1 and 4 up to 4 children were listed. In waves 2 and 3 there were a maximum of 3 pre-school children list- ed. The empty variables have been dropped.				
Other 2 (specify)	o2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	icpc_o2
Other non-resident parent _____ Not answered _____ Not applicable _____	op na np	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Q12 Now think about child care when you (or your partner) are not at work. Looking at SHOWCARD Q12 and thinking about your usual week, do you use any of these forms of child care for non-work related reasons? We are interested in additional child care that you haven't yet mentioned.

Prompt: For example, use child care so you (or your partner) can study / exercise / shop, or use child care for other reasons?

Yes1 → Q13

No.....2 → Q17 iccnuse2

Q13 CHECK OR CONFIRM WITH RESPONDENT: AGE OF CHILDREN

Has children from both age groups (i.e., children not yet at school
and school-aged children less than 15 years).....1 ➔ Q14

Only has children who are not yet at school2 ➔ Q16

Only has school-aged children (less than 15 years of age)3 ➔ Q14

icnagen

Non-employment related child care for school-aged children

Q14 LIST EVERY SCHOOL-AGED CHILD IN GRID BELOW (ONE CHILD PER COLUMN).

a **Looking at SHOWCARD Q14, in a usual week, what types of care do you use for [...name of child(ren) at school...] when you (or your partner) are not working?**

ASK FOR EACH CHILD AND CIRCLE THE NUMBER CORRESPONDING TO EACH TYPE OF CARE USED (MULTI RESPONSE).

b **In a usual week, how many hours does [...name of child(ren) at school...] spend in this type of care while you (or your partner) are not working? ASK FOR EACH CHILD AND RECORD HOURS IN CARE.**

If the respondent does not know, write in 'DK'.

c **What is the usual weekly cost of this type of care for your school-aged children after any regular child care benefit you may receive has been deducted?**

FOR EACH TYPE OF CHILD CARE USED, ADD THE WEEKLY AMOUNT PAID FOR EACH CHILD & RECORD IN LAST COLUMN.

Non-employment related child care (Type of care; Usual hours in a week; Usual weekly cost)

<i>Names of at-school children ➔</i>	Hours	Hours	Hours	Hours	Hours	TOTAL WEEKLY COST
The child's brother or sister..... Suffix bs	_____	_____	_____	_____	_____	If care is free, record "0"
Child's grandparent who lives with us..... gu	_____	uses form of care for any child icnsu_ (+ suffix) ie icnsu_bs icnsu_gu etc				icnsc_gu
Child's grandparent who lives elsewhere..... ge	_____					icnsc_ge
Other relative who lives with us	au	total hours for all children icnsh_ (+ suffix) ie icnsh_bs icnsh_gu etc				icnsc_au
Other relative who lives elsewhere	ae					icnsc_ae
A friend or neighbour coming to <i>our</i> home..... fo	_____	total weekly cost for all children icnsc_gu icnsc_ge etc				icnsc_fo
A friend or neighbour in <i>their</i> home..... ft	_____					icnsc_ft
A paid sitter or nanny	ps					icnsc_ps
Family day care..... fd	_____					icnsc_fd
Private / community long day care centre..... pd	_____	_____	_____	_____	_____	icnsc_pd
Formal outside of school hours care..... fc	_____	_____	_____	_____	_____	icnsc_fc
Other 1 (specify) 	o1	_____	_____	_____	_____	icnsc_o1 icnsc_o2
Other 2 (specify) 	o2	_____	_____	_____	_____	
Other non-resident parent Not answered None	op na np	_____	_____	_____	_____	

*COSTS: If a school-aged child is in the same type of care as a child who is not yet at school, the total cost should be distributed between them. For example, if a respondent pays \$40 to a sitter to mind a 3 y.o. and a 10 y.o. for 2 hours, the cost should be split among the children.

Q15 CHECK Q13: Any children not yet at school (Q13=1)?

Yes (Q13=1) 1 ➔ Q16

inpany

No (Q13=3) 2 ➔ Q17

Non-employment related child care for children not yet at school

Q16 LIST EVERY CHILD WHO IS NOT YET AT SCHOOL IN GRID BELOW (ONE CHILD PER COLUMN).

- a **Looking at SHOWCARD Q16, in a usual week, what types of care do you use for [...name of child(ren) not yet at school...] when you (or your partner) are not working?**

ASK FOR EACH CHILD AND CIRCLE THE NUMBER CORRESPONDING TO EACH TYPE OF CARE USED (MULTI RESPONSE).

- b **In a usual week, how many hours does [...name of child(ren) not yet at school...] spend in this type of care while you (or your partner) are not working? ASK FOR EACH CHILD AND RECORD HOURS IN CARE.**

If the respondent does not know, write in 'DK'.

- c **What is the usual weekly cost of this type of care for these children (who are not yet at school) after any regular child care benefit you may receive has been deducted?**

FOR EACH TYPE OF CHILD CARE USED, ADD THE WEEKLY AMOUNT PAID FOR EACH CHILD & RECORD IN LAST COLUMN.

Non-employment related child care (Type of care; Usual hours in a week; Usual weekly cost)						
Names of children not yet at school ➔	Hours Suffix	Hours	Hours	Hours	Hours	TOTAL WEEKLY COST
The child's brother or sister	bs					If care is free, record "0"
Child's grandparent who lives with us	gu					icnpsc_gu
Child's grandparent who lives elsewhere	ge					icnpsc_ge
Other relative who lives with us	au					icnpsc_au
Other relative who lives elsewhere	ae					icnpsc_ae
A friend or neighbour coming to our home	fo					icnpsc_fo
A friend or neighbour in <i>their</i> home	ft					icnpsc_ft
A paid sitter or nanny	ps					icnpsc_ps
Family day care	fd					icnpsc_fd
Private / community long day care centre	pd					icnpsc_pd
Kindergarten / pre-school	kp					icnpsc_kp
Other 1 (specify)	o1					icnpsc_o1
Other 2 (specify)	o2					icnpsc_o2
Other non-resident parent Not answered None	op na np					

*COSTS: If a school-aged child is in the same type of care as a child who is not yet at school, the total cost should be distributed between them. For example, if a respondent pays \$40 to a sitter to mind a 3 y.o. and a 10 y.o. for 2 hours, the cost should be split among the children.

Child health and health care utilisation

LIST EVERY CHILD LESS THAN 15 IN COLUMNS BELOW FOR Q17 – 26 (ONE CHILD PER COLUMN).

For up to
10 chil-
dren

USE SAME COLUMN FOR EACH CHILD ALL THE WAY DOWN THE PAGE.

ASK EACH QUESTION (OR SUBSET OF QUESTIONS) FOR EACH CHILD BEFORE MOVING TO THE NEXT QUESTION.

Q17 I would now like to ask you about the general health of [name of child/those children].

In general, would you say [name]'s health is excellent, very good, good, fair or poor?

Name of child(ren) aged less than 15 ➔		Child HF person number	ihcpno1 -	ihcpno10	
Excellent	1	1	1	1	1
Very good	2	2	2	2	2
Good	3	3	3	3	3
Fair	4	4	4	4	4
Poor	5	5	5	5	5
Don't know	9	9	9	9	9

ihcg1 -
ihcg10

Weight
kgs, lbs,
ozs, dont
know

ihcwtk1 -
ihcwtk10
ihcwtp1 -
ihcwtp10
ihcwto1 -
ihcwto10
ihcwtd1 -
ihcwtd10

Q18a How much did [name] weigh at birth?

KILOGRAMS ➔Q19	<input type="text"/> kgs					
OR	<input type="text"/> lb <input type="text"/> oz					
POUNDS and OUNCES ➔Q19	999	999	999	999	999	999
Don't know ➔Q18b						

Q18b Do you think [name] weighed less than 2.5 kilograms (or less than 5 pounds 8 ounces) at birth?

Yes.....	1	1	1	1	1	1
No	2	2	2	2	2	2
Don't know	9	9	9	9	9	9

ihcwtl1 -
ihcwtl10

Q19 Looking at SHOWCARD Q19, how long has it been since [name] last saw a dentist?

Less than 6 months.....	1	1	1	1	1	1
Six to less than 12 months.....	2	2	2	2	2	2
One to less than 2 years.....	3	3	3	3	3	3
Two to less than 5 years.....	4	4	4	4	4	4
Five or more years.....	5	5	5	5	5	5
Never been to the dentist.....	8	8	8	8	8	8
Don't know	9	9	9	9	9	9

ihctsdl -
ihctsdl0

Q20a Is there a particular doctor [name] usually sees if [he/she] is sick or if advice is needed about [his/her] health?

Yes..... ➔ Q21a	1	1	1	1	1	1
No / More than one ➔ Q20b	2	2	2	2	2	2
Don't know ➔ Q20b	9	9	9	9	9	9

ihc1gp1 -
ihc1gp10

Q20b Is there a particular clinic or health centre [name] usually goes to if [he/she] is sick or if advice is needed about [his/her] health?

Yes.....	1	1	1	1	1	1
No / More than one	2	2	2	2	2	2
Don't know	9	9	9	9	9	9

ihc1cl1 -
ihc1cl10

Q21a During the last 12 months, has [name] seen a family doctor or another GP about [his / her] health?

Name of child(ren) aged less than 15 →						
Yes.....	1	1	1	1	1	1
No	2	2	2	2	2	2
Don't know	9	9	9	9	9	9

ihcsgp1 -
ihcsgp10

Q21b Approximately how many times has [name] seen a family doctor or another GP about [his / her] health in the last 12 months?

Record no. of visits	<input type="text"/>					
Don't know	99	99	99	99	99	99

ihcnpgp1 -
ihcnpgp10

Q22 Thinking now about [name]'s most recent visit to a family doctor or other GP, did you or someone in your family have any out-of-pocket expenses for that consultation? Do not include medicines or tests prescribed by the doctor.

An out-of-pocket expense is sometimes known as a gap payment and is usually incurred if the consultation was not bulk billed.

Yes.....	1	1	1	1	1	1
No	2	2	2	2	2	2
Don't know	9	9	9	9	9	9

ihcegp1 -
ihcegp10

Q23 During the last 12 months, approximately how many times has [name] seen a medical practitioner other than a family doctor or GP about [his / her] health? Do not include visits to the dentist.

Other medical practitioner's include allied health providers such as psychologists, optometrists and physiotherapists, and alternative health care providers such as naturopaths and acupuncturists.

Record no. of visits Write "0" if none	<input type="text"/>					
Don't know	99	99	99	99	99	99

ihcnod1 -
ihcnod10

Q24 During the last 12 months, has [name] ever been admitted as a patient to a hospital? Do not include visits to emergency, outpatients or outpatient clinics.

Visits to emergency / casualty that result in admissions should be included.

Yes.....	1	1	1	1	1	1
No	2	2	2	2	2	2
Don't know	9	9	9	9	9	9

ihcead1 -
ihcead10

Q25 On how many different occasions was [name] admitted as a patient to a hospital during the last 12 months?

Record no. of admissions	<input type="text"/>					
Don't know	999	999	999	999	999	999

ihcnad1 -
ihcnad10

Q26 Altogether, in the last 12 months, how many nights did [name] stay in hospital?

Record no. of nights Write "0" if none	<input type="text"/>					
Don't know	999	999	999	999	999	999

ihcnnt1 -
ihcnnt10

Q27 Does anyone in this household currently receive the Family Tax Benefit?

READ OUT IF NECESSARY: The Family Tax Benefit is a Government payment paid to parents of dependent children. Eligibility depends on the age of the children, the amount of household income and whether or not there is more than one income earner. It can be paid as a fortnightly payment or as a lump sum payment paid at the end of the financial year.

- Yes 1 **iccfbtb**
No 2 → Q29
Don't know 9 → Q29

Q28 Is this benefit received as a fortnightly payment or as a lump sum payment at the end of the financial year?**MULTI RESP**

- | | | |
|--|---|------------------|
| Fortnightly payment..... | 1 | iccfbtfp |
| Lump sum payment at end of financial year..... | 2 | iccfbtls |
| Don't know..... | 9 | iccfbtbrf |
| | | iccfbtbdk |
| | | iccfbtbna |

Q29 TIMESTAMP

Record time now : am / pm

R. HOUSING

R1 TIMESTAMP

Record time now : am / pm

R2 We now have some questions on housing. How many bedrooms are there [here / in the home in which you live]? Count all bedrooms even if they are not currently used as a bedroom (e.g., a study).

If a bed sit, studio or single room caravan, then the answer should be zero.

Only count those rooms belonging to household members; do not count those belonging to any other household in the same dwelling.

ihsbedrm

Record whole number

R3 Do you (or any other members of this household) own this home, rent it, or do you live here rent free?

If they do have some equity in the dwelling, then it should be coded as 'own'.

ihssternr	Own / currently paying off mortgage.....	1 → R7
	Rent (or pay board)	2
	Involved in a rent-buy scheme.....	3
	Live here rent free / Life Tenure	4 → R21

'Life Tenure' refers to households or individuals who have a life tenure contract to live in the dwelling but usually do not have any equity in the dwelling.

R4 Who does this household rent from (or pay board to)?

ihsllord	A private landlord or real estate agent.....	1
	Caravan park owner or manager.....	2
	A Government housing authority	3
	A Community or Co-operative housing group	4
	An employer	5
	Someone else (not included above) (specify)	6

R5a How much does this household usually pay in rent or board?

ihsrnd weighted topcode	Record whole dollars	<input type="text"/> \$ <input type="text"/>	→ R5b
	Don't know.....	99999	→ R6

R5b And what period does that payment cover?

Per Week	1
Fortnight.....	2
4 weeks	3
Calendar month.....	4
Quarter	5
Other (specify).....	6

R6 CHECK R3 (for renters only): Is respondent involved in a rent-buy arrangement?

ihsrentby	Yes (R3=3)	1 → R7
	No (R3=2)	2 → R23

Home owners and Rent-buyers only

R7 Do any of the members of this household pay board to another member of the household?

Include here any children who pay board to their parents.

ihsbrd	Yes	1
	No	2 → R9

R8 Which members of this household pay board to another member of the household?

ihsbdref Write in ID numbers of the household members ihsbdkd paying board.

ihsbid1 to ihsbid16

R9 What is the approximate value of your home today? I mean, how much would it bring if you sold it today? Include land, home improvements, and fixtures (such as curtains and light fittings) usually sold with a home. Exclude home contents.

If respondent does not know, probe for an estimate.
If range given, write in lowest figure.

ihsvalue	Record whole dollars	\$ <input type="text"/>
	Don't know.....	9999999

R10 Did you (or other members of this household) take out mortgages or home loans from a bank, (credit union, or some other financial institution) to help pay for your home?

ihsmguse	Yes	1
	No	2 → R16

R11 Has this household paid off [this loan / these loans] completely now?

ihsmgpd	Yes	1 → R16
	No	2

R12 How much is left to pay on [this loan / these loans]?

'Best guess' is okay.

We are after the total amount of the home loan – even if this covers items other than their home.

If they have an offset account, ask them to calculate the amount still owing by subtracting the positive balance in the offset account from the remaining value of the loan. Record this amount only if it is positive.

Do not include any loans the respondent (or other members of the household) may have borrowed to fund a business, even if the home was used as security.

<i>ihsmgowe</i> <i>weighted</i> <i>topcode</i>	Record whole dollars	\$
		9999999

R13 How much is the usual repayment on [this loan / these loans]?

If no specific payments are usually made (e.g., line of credit), then record zero dollars and 'no payment required' option.

<i>ihsmg</i>	(a) Record whole dollars	\$
		99999 → R14

(b) Record frequency of payment amount

Per	Week	1
	Fortnight.....	2
	4 weeks.....	3
	Calendar month.....	4
	Quarter.....	5
	No payment required.....	6
	Other (specify).....	7

R14 And would you say you are paying [this loan / these loans] off ahead of the required schedule, behind schedule or about on schedule?

<i>ihsmgsch</i>	Ahead of schedule.....	1
	Behind schedule.....	2
	About on schedule.....	3
	Not applicable.....	7
	Don't know.....	9

R15 In what year do you expect [this loan / these loans] will be fully paid off?

'Best guess' is okay.

<i>ihsmgfin</i>	Record year			
		9997		
		9999		

R16 Did you (or any other members of this household) borrow from anyone else, such as a friend, relative, solicitor or community organisation, to help pay for this home?

ihslnoth Yes 1
No 2 → R18

R17 How much of [this loan is / these loans are] still owed?

<i>ihslnowe</i> <i>weighted</i>	Record whole dollars	\$
<i>topcode</i>	None	9999997
	Don't know	9999999

R18 Do you (or any other members of this household) have any other home loans secured against this property? For example, you might have a second mortgage as well as the first one, or you might have a home equity loan.

If no specific payments are usually made (e.g., line of credit), then record zero dollars and 'no payment required' option.

ihssluse Yes 1
No 2 → R23

R19 How much is left to pay on [this loan / these loans] against your property?

<i>ihsslowe</i>	Record whole dollars	\$
<i>ihsslowe</i>	None	9999997 → R23
<i>topcode</i>	Don't know	9999999

R20 How much are the usual repayments on [this loan / these loans]?

If no specific payments are usually made (e.g., line of credit), then record zero dollars and 'no payment required' option.

<i>ihssla</i>	(a) Record whole dollars	\$
		99999 → R23

(b) Record frequency of payment amount

<i>ihsslf</i>	Per	Week	1
		Fortnight.....	2
		4 weeks.....	3
		Calendar month.....	4
		Quarter.....	5
		No payment required.....	6
		Other (specify).....	7

NOW SKIP TO R23

(R21 & R22 are for free housing households only.)

Free housing households only

R21 If your household doesn't own this home and doesn't rent it, how is your housing provided?

ihsfrea	Housing is part of job compensation	01
	Home owned by a relative not living here.....	02
	Home owned by someone else (not a relative) / household received housing as a gift from owner.....	03
	Sold home but have not moved yet.....	04
	Public housing	05
	Staying with friends or relatives rent-free	06
	Home owned by a trust or company that is owned by a household member or other relative.....	07
	Life Tenure contract.....	08
	Other (specify)	98

R22 And if your household had to pay rent for this property, about how much do you think it would have to pay each week?

We are interested in the respondent's assessment of what this property would fetch in the private rental market.

ihsfa	Record whole dollars	\$
	Don't know.....	9999

All households join back in here

Household income

R23 Looking at SHOWCARD R23, which of these categories contains the combined income of everyone in this household, before tax and other deductions are taken out, during the last financial year. That is, July 2008 to June 2009. Please include income from all sources, including wages, investments and government pensions and benefits.

	<u>PER YEAR</u>	<u>PER WEEK</u>
ihiband3		
Negative or Zero Income	01	
\$1 - \$9,999	(\$1 - \$189)	02
\$10,000 - \$19,999	(\$190 - \$379)	03
\$20,000 - \$29,999	(\$380 - \$579)	04
\$30,000 - \$39,999	(\$580 - \$769)	05
\$40,000 - \$49,999	(\$770 - \$959)	06
\$50,000 - \$59,999	(\$960 - \$1149)	07
\$60,000 - \$79,999	(\$1150 - \$1529)	08
\$80,000 - \$99,999	(\$1530 - \$1919)	09
\$100,000 - \$124,999	(\$1920 - \$2399)	10
\$125,000 - \$149,999	(\$2400 - \$2879)	11
\$150,000 - \$199,999	(\$2880 - \$3839)	12
\$200,000 or more	(\$3840 or more)	13
Refused		98
Don't Know		99

Household details

R24 IF THE DWELLING STRUCTURE TYPE IS OBVIOUS, COMPLETE R24 WITHOUT ASKING. OTHERWISE ASK:

(What type of dwelling do you live in? Is it a separate house, a semi-detached house, a flat or home unit, or what?)
idodtyp

Non-private dwellings:

Nursing Homes 01 ➔ R26
Others (e.g., boarding house, hostel) 02 ➔ R26

Private dwellings:

Separate house 03

Separate house with attached shop, office, etc 04

Semi-detached house / row or terrace house/
townhouse etc:

with one storey 05

with 2 or more storeys 06

attached to a shop, office etc 07

Flat / unit / apartment:

in a one-storey block 08

in a two-storey block 09

in a three-storey block 10

in a four to nine-storey block 11

in a 10 or more storey block 12

attached to a house (e.g., granny flat) 13

attached to a shop, office etc 14

Caravan / Tent / Cabin / Houseboat 15

Other private dwelling (specify) 98

R25 INTERVIEWER RECORD:

Excluding those people that belong to the respondent's household, how many other people usually live in this dwelling?

You should have discovered the answer to this question when completing the HF.

*If there are no such people,
record zero.*

IF YOU DO NOT KNOW, OR ARE UNSURE,
ASK:

Excluding those people that belong to your household, how many other people usually live in this dwelling? (Record the answer in the box above.)

R26 CONFIRM POSTAL ADDRESS:

You may have asked this question when completing the HF. If so, do not re-ask; just skip to R27.

Thank you for all the information you have given us.

Can I just confirm that this is the best postal address for this household, or is there a PO Box number or some other preferred postal address?

RECORD RESPONSE REGARDING POSTAL ADDRESS AT HF31

R27 Could I also record the household phone number please?

Area code
Home

Does not have a landline telephone 6

Refused 9

R28 TIMESTAMP

Record time now : am / pm

You now need to conduct a PQ interview with all eligible (and willing) members of the household.

Use a Continuing Person Questionnaire (CPQ) for respondents who have previously completed a PQ

OR

a New Person Questionnaire (NPQ) for new respondents (including those who have just turned 15 years old).

REMEMBER TO COMPLETE THE INTERVIEWER DECLARATION.

INTERVIEWER DECLARATION

I certify that this is a true, accurate and complete interview, conducted in accordance with the AMSRS Code of Professional Behaviour (ICC/ESOMAR). I will not disclose to any other person the content of this questionnaire or any other information relating to this project.

Interviewer's Name:

Interviewer's Signature:

Interviewer's ID

Date: / /



Household ID | | | |

CONTINUING PERSON QUESTIONNAIRE (CPQ) W9 M

xwaveid Cross Wave ID (text)

ihhrpid Wave 9 Randomised Person ID (text)
ihhrrhid Wave 9 Randomised Household ID (text)
ihhpno Wave 9 HF person number (text)
ihhidate Interview date (text)

ihhstate State
ihhiwin Fieldwork period 1=initial 2=follow-up
ihhpq 1=continuing 2=new person
ihhiage Age last birthday at interview date.
Weighted postcode

IN-CONFIDENCE

A. Did this respondent complete a PQ in a previous wave? (Check HF7 PQ type on the HF or call office on 1800 468 799)

YES → Continue with the CPQ **NO** → Use a NPQ (New Person Questionnaire)

B. Is the person being interviewed aged between 15-17 years and living with parents / guardians? **YES** **NO**

C. If YES, name of parent / guardian who gave you permission to interview the 15-17 year-old.

- A. **ihhpq**
- B. **ihhpmrq**
- C. **ihhpmid** (text)

INTERVIEWER NOTE:

All work conducted by Roy Morgan Research is confidential. Under the Code of Professional Behaviour of the Australian Market and Social Research Society you (the interviewer) cannot disclose any information about respondents to any third party.

RE-INTRODUCE YOURSELF IF NEED BE.

Most people take around 35 minutes to complete the interview, and we really appreciate you taking the time to do this.

IF NECESSARY: Everything you tell me will be treated in the strictest privacy.

INTERVIEWER DECLARATION

I certify that this is a true, accurate and complete interview, conducted in accordance with the AMSRS Code of Professional Behaviour (ICC/ESOMAR). I will not disclose to any other person the content of this questionnaire or any other information relating to this project.

Interviewer's Name: _____

Interviewer's Signature: _____

Date: / /

Interviewer's ID:

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A6 Looking at SHOWCARD A6, which of these categories best describes the type of school you attended in your last year?

If attended 2 schools in last year, record for most recent school attended.

Government school 1
Catholic non-government school 2
Other non-government school 3
Other, not included above (*please specify*) 7–8

iedsstyp CPQ:A6 Type of school attended

Don't know 9

Now skip to A8

A7 Which year of school [are you attending / did you attend] in 2009?

Year 12 1
Year 11 2
Year 10 3
Year 9 or below 4
Other (*please specify*) 7–8

iedsscat CPQ:A7 Which year of school did you attend in 2009

A8 Since we last interviewed you on [*date of last interview*], have you spent any time enrolled in [a / any other] course of study for a trade certificate, diploma, degree or any other educational qualification?

Do not include hobby or recreation courses, or study for a school-level qualification.

Yes 1
No 2 ➔ B1

iedrqgenr CPQ:A8 Enrolled in course for trade certificate, diploma or degree

A9a Looking at SHOWCARD A9, what qualifications [are / were] you studying for?

Allow MULTIPLE RESPONSE if studying for more than one qualification.

Certificate level I.....	<u>524</u>
Certificate level II.....	<u>521</u>
Certificate level III.....	<u>514</u>
Certificate level IV.....	<u>511</u>
Certificate – don't know level.....	<u>500</u>
Diploma (2 years full-time or equivalent).....	<u>421</u>
Associate Degree	<u>413</u>
Advanced Diploma (3 years full-time or equivalent).....	<u>411</u>
Bachelor Degree but not Honours	<u>312</u>
Honours Bachelor Degree	<u>311</u>
Graduate Certificate	<u>221</u>
Graduate Diploma	<u>211</u>
Masters Degree	<u>120</u>
Doctorate	<u>110</u>
Other (if 'other' course, provide details below) ..	<u>995</u>
<i>Title of course</i> _____	
<i>Description</i> _____	
<i>Length of course (f/t equivalent)</i> _____	

A9b And are you currently still enrolled in a course of study for a trade certificate, diploma, degree or any other educational qualification?

Yes	1
No	2 ➔ A10

A9c Are you studying this full-time or part-time?

Full-time student.....	1
Part-time student	2

A10 Since [date of last interview], have you actually completed a course of study for a trade certificate, diploma, degree or any other educational qualification?

Do not include hobby or recreation courses, or study for a school-level qualification.

Yes	1
No.....	2 ➔ B1

iedrqdc	CPQ:A9a Qualifications studying for - Doctorate
iedrqms	CPQ:A9a Qualifications studying for - Masters degree
iedrqgd	CPQ:A9a Qualifications studying for - Graduate diploma
iedrqgc	CPQ:A9a Qualifications studying for - Graduate certificate
iedrqhd	CPQ:A9a Qualifications studying for - Honours bachelor degree
iedrqbd	CPQ:A9a Qualifications studying for - Bachelor degree but not honours
iedrqav	CPQ:A9a Qualifications studying for - Advanced Diploma (3 years full time or equivalent)
iedrqad	CPQ:A9a Qualifications studying for - Associate Degree
iedrqdp	CPQ:A9a Qualifications studying for - Diploma (2 years full time or equivalent)
iedrqcd	CPQ:A9a Qualifications studying for - Certificate - dont know level
iedrqc4	CPQ:A9a Qualifications studying for - Certificate level IV
iedrqc3	CPQ:A9a Qualifications studying for - Certificate level III
iedrqc2	CPQ:A9a Qualifications studying for - Certificate level II
iedrqcl	CPQ:A9a Qualifications studying for - Certificate level I
iedrqdk	CPQ:A9a Qualifications studying for - Dont know
iedrqna	CPQ:A9a Qualifications studying for - No answer
iedrqrf	CPQ:A9a Qualifications studying for - Refused
iedrqos	CPQ:A9a Qualifications studying for - Other
iedrqsh	CPQ:A9a Qualifications studying for - 611 Secondary school qualification - highest level
iedrqsl	CPQ:A9a Qualifications studying for - 600 Secondary school qualification - lower level
iedrqun	CPQ:A9a Qualifications studying for - 000 level unknown
iedrqdn	CPQ:A9a Qualifications studying for - Diploma NFI

iedccenr CPQ:A9b Currently enrolled in a course

iedcqtyp CPQ:A9c/NPQ:A11 Currently studying full or part time

iedrqcmp CPQ:A10 Completed trade certificate, diploma or degree

A11 Still looking at SHOWCARD A9, what qualification[s] did you complete since [date of last interview]? Allow MULTIPLE RESPONSE if completed more than one qualification.

Certificate level I.....	<u>524</u>
Certificate level II.....	<u>521</u>
Certificate level III.....	<u>514</u>
Certificate level IV.....	<u>511</u>
Certificate – don't know level.....	<u>500</u>
Diploma (2 years full-time or equivalent).....	<u>421</u>
Associate Degree	<u>413</u>
Advanced Diploma (3 years full-time or equivalent).....	<u>411</u>
Bachelor Degree but not Honours.....	<u>312</u>
Honours Bachelor Degree.....	<u>311</u>
Graduate Certificate	<u>221</u>
Graduate Diploma	<u>211</u>
Masters Degree	<u>120</u>
Doctorate.....	<u>110</u>
Other (if 'other' course, provide details below)	<u>995</u> <u>998</u>

Title of course _____

Description_____

Length of course (f/t equivalent)_____

A12 In which month and year did you complete this qualification?

If more than 1 qual. in A11,
record code no. below

	Month	Year
	Record mnth and year	2 0

Record here if respondent completed a second qualification.

If more than 1 qual. in A11,
record code no. below

	Month	Year
	Record mnth and year	2 0

A13 In which country did you complete this qualification?

If two or more qualifications, ask about the highest level qualification.

Australia.....	<u>1101</u>	Italy	<u>3104</u>
United Kingdom.....	<u>2100</u>	Malaysia.....	<u>5203</u>
Ireland / Eire	<u>2201</u>	Netherlands	<u>2308</u>
New Zealand	<u>1201</u>	Philippines	<u>5204</u>
China (excl Taiwan)....	<u>6101</u>	USA	<u>8104</u>
Germany.....	<u>2304</u>	Viet Nam	<u>5105</u>
Greece.....	<u>3207</u>	Other (specify)	<u>8888</u>
Hong Kong.....	<u>6102</u>		

iedqrodc	CPQ:A11 Qualifications completed - Doctorate
iedqroms	CPQ:A11 Qualifications completed - Masters degree
iedqrogd	CPQ:A11 Qualifications completed - Graduate diploma
iedqrogc	CPQ:A11 Qualifications completed - Graduate certificate
iedqrohd	CPQ:A11 Qualifications completed - Honours bachelor degree
iedqrobd	CPQ:A11 Qualifications completed - Bachelor degree but not honours
iedqrovav	CPQ:A11 Qualifications completed - Advanced Diploma (3 years full time or equivalent)
iedqroad	CPQ:A11 Qualifications completed - Associate Degree
iedqropd	CPQ:A11 Qualifications completed - Diploma (2 years full time or equivalent)
iedqrocd	CPQ:A11 Qualifications completed - Certificate - dont know level
iedqroc4	CPQ:A11 Qualifications completed - Certificate level IV
iedqroc3	CPQ:A11 Qualifications completed - Certificate level III
iedqroc2	CPQ:A11 Qualifications completed - Certificate level II
iedqroc1	CPQ:A11 Qualifications completed - Certificate level I
iedqrodk	CPQ:A11 Qualifications completed - Dont know
iedqrna	CPQ:A11 Qualifications completed - No answer
iedqrnf	CPQ:A11 Qualifications completed - Refused
iedqroos	CPQ:A11 Qualifications completed - Other
iedqroun	CPQ:A11 Qualifications completed - 000 level unknown
iedqrosh	CPQ:A11 Qualifications completed - 611 Secondary school qualification - highest level
iedqros1	CPQ:A11 Qualifications completed - 600 Secondary school qualification - lower level
iedqrodn	CPQ:A11 Qualifications completed - Secondary school qualification - lower level
	CPQ:A11 Qualifications completed - Diploma NFI
iednqual	CPQ:A12 Number of qualifications
iedrq1	CPQ:A12 Qualification code - Qualification 1
iedrq2	CPQ:A12 Qualification code - Qualification 2
iedrq3	CPQ:A12 Qualification code - Qualification 3
iedrq1mt	CPQ:A12 Month completed qualification - Qualification 1
iedrq2mt	CPQ:A12 Month completed qualification - Qualification 2
iedrq3mt	CPQ:A12 Month completed qualification - Qualification 3
iedrq1yr	CPQ:A12 Year completed qualification - Qualification 1
iedrq2yr	CPQ:A12 Year completed qualification - Qualification 2
iedrq3yr	CPQ:A12 Year completed qualification - Qualification 3

iedcntry CPQ:A13 Country completed qualification in

B. EMPLOYMENT STATUS

B1 At any time at all during the last 7 days, did you do any work in a job, business or farm?

- Yes 1 →B3
No 2

B2 Did you have a job, business or farm, but did not work during the last 7 days because of holidays, sickness or any other reason (such as maternity leave or on workers compensation)?

- Yes 1
No 2 →D1

B3 [Do / did] you work ...

- for an employer for wages or salary? 1 →B5
in your own business with employees? 2
in your own business with no employees? 3
without pay in a family business? 4 →B12

[If none of the above]

What then are your working arrangements?

- Receive payment in kind 5 →B5
Unpaid voluntary worker 6 →D1
Mutual obligation / Work for the Dole 7 →D1
For Govt in job creation / CDEP job 8 →B5

If respondent says they work in more than one job, code in respect of the job that they get the most pay from.

B4 Is that business incorporated? (Please refer to SHOWCARD B4 for a definition of an incorporated business.)

- Yes 1 →B5
No 2 →B12
Don't know 9 →B12

B5 CHECK B1: Did respondent work in the last 7 days?

- Yes (B1=1) 1 →B12
No (B1=2) 2 →B6

B6 How long have you been away from work?

Record number of full weeks

--	--

 weeks

OR

number of full months

--	--

 months

- Don't know, but less than 4 weeks 4
Don't know, but 4 weeks or more 5

B7 CHECK B6: Has respondent been away from work for 4 weeks or more?

- Yes, away from work 4 weeks or more 1 →B8
No, away from work less than 4 weeks 2 →B12

iesbrd DV: Current labour force status - broad
1 Employed
2 Unemployed
3 Not in the labour force

iesdtl DV: Current labour force status - detail
1 Employed ft
2 Employed pt
3 Unemployed, looking for ft work
4 Unemployed, looking for pt work
5 Not in the labour force, marginally attached
6 Not in the labour force, not marginally attached

B8 Were you on workers' compensation during the last 7 days?

Yes 1
No 2 → B10

B9 Do you expect to return to work for your current employer?

Yes 1 → B12
No 2 → D1
Don't know 9 → D1

B10 Was the main reason for your absence from work during the last 4 weeks because you were on strike or were locked out?

Yes 1 → B12
No 2

B11 Were you paid, or will you be paid, for any part of the last 4 weeks?

Yes 1 → B12
No 2 → D1

B12 CHECK B3 and B4: Classify remaining respondents.

B3=1 or 5 or 8 (Employee) 1 → C1a
B4=1 (Employee of own business) 2 → C1a
B4=2 or 9 (Employer / Self-employed) 3 → C1a
B3=4 (Unpaid family worker) 4 → C1a

iesempst B12 Current employment status

C. CURRENT EMPLOYMENT

C1a Including any paid or unpaid overtime, how many hours per week do you usually work in all your jobs?

This includes any work done at the workplace and at home.

Don't include time "on-call"; these are NOT considered usual working hours.

**IF HAS LOST JOB IN THE LAST 7 DAYS, SAY:
The questions in this section refer to the most recent job for which you received pay in the last 7 days.**

Hours per week → C2
Hours vary 997 → C1b

ijbhruw C1a Hours per week usually worked in all your jobs

C1b Including any paid or unpaid overtime, how many hours per week do you work on average over a usual 4-week period in all your jobs?

Hours per week

ijbhrua C1b Hours per week worked on average (over 4 week period) in all your jobs

C2 CHECK C1a / C1b: Hours usually worked per week.

C1a / b =35 hours or more (works full-time)1 →C4
C1a/ b =34 hours or less (works part-time).....2 →C3

ichkhru C2 Check if works part-time

C3 You have said that (currently) you usually work fewer than 35 hours per week. What is the main reason for your working part-time hours rather than full-time hours?

SINGLE RESP

- | | |
|---|--------|
| Own illness or disability | 01 |
| Caring for children | 02 |
| Caring for disabled or elderly relatives (not children)..... | 03 |
| Other personal or family responsibilities..... | 04 |
| Going to school, college, university etc | 05 |
| Could not find full-time work | 06 |
| Prefer part-time work..... | 07 |
| Involved in voluntary work | 08 |
| Attracted to pay premium attached to part-time / casual work | 09 |
| Welfare payments or pension may be affected by working full-time..... | 10 |
| Getting business established..... | 11 |
| Prefer job & part-time hours are a requirement of the job..... | 12 |
| Other (<i>please specify</i>) | 97- 98 |

ijbptrea C3 Main reason for working PT hours rather than FT

C4 If you could choose the number of hours you work each week, *and taking into account how that would affect your income*, would you prefer to work ...

- | | |
|--|-------|
| fewer hours than you do now? | 1 |
| about the same hours as you do now? | 2 →C6 |
| or more hours than you do now? | 3 |
| Don't know..... | 9 →C6 |

ijbhrcpr C4 Prefer to work

C5 In total, how many hours a week, on average, would you choose to work? Again, take into account how that would affect your income.

This includes any work done at the workplace and at home.

Prompt: If respondent indicates they would prefer not to work at all, emphasise that this also means they will receive no income from wages or salary.

TOTAL preferred hours
per week

--	--

ijbprhr C5 Total hours per week would choose to work

- C6 Do you currently have more than one job?**
That is, do you work for more than one employer? (Include any jobs from which you are away because of holidays, sickness, disability or some other reason.)

Include only paid work.

The number of jobs does not refer to the number of clients or contracts.

- Yes – have 2 or more jobs.....1
No – only have 1 job.....2 ➔C8

ijbn

C6 Currently have more than one job

- C7a I am now going to ask you some questions about your main job. That is, the job from which you usually get the most pay each week.**

Including any paid or unpaid overtime, how many hours per week do you *usually* work in your *main* job?

This includes any work done at the workplace and at home.

Don't include time "on-call"; these are NOT considered usual working hours.

Hours per week

--	--

 ➔C8

Hours vary 997 ➔C7b

ijbmhruw

C7a Hours per week usually work in main job

- C7b Including any paid or unpaid overtime, how many hours per week do you work *on average* over a usual 4-week period in your *main* job?**

Hours per week

--	--

ijbmhrua

C7b Hours per week work on average in main job

- C8 On which days of the week do you usually work (in your *main* job)?**

- Monday to Friday.....1 ➔C10
Nine day fortnight2 ➔C9b
Days vary from week to week.....3 ➔C9a
Days vary from month to month4 ➔C9a
Other (please specify days below)7-8

Monday.....1	}	➔C10
Tuesday.....2		
Wednesday3		
Thursday4		
Friday5		
Saturday6		
Sunday7		

ijbmday

C8 Type of work schedule

ijbmday1

C8b Days of the week usually work - Monday

ijbmday2

C8b Days of the week usually work - Tuesday

ijbmday3

C8b Days of the week usually work - Wednesday

ijbmday4

C8b Days of the week usually work - Thursday

ijbmday5

C8b Days of the week usually work - Friday

ijbmday6

C8b Days of the week usually work - Saturday

ijbmday7

C8b Days of the week usually work - Sunday

C9a How many days do you *usually* work in a 4-week period? IF THEY SAY IT VARIES, ASK: What would it average out to?

If a respondent says 7 days or less – confirm that this is the number of days usually worked over a 4-week period.

Number of days
(maximum 28 days)

C9b And do you usually work on weekends?

Yes 1
No 2

C10 Looking at SHOWCARD C10, which of these *best* describes your current work schedule in your (main) job?

- A regular daytime schedule 01
A regular evening shift 02
A regular night shift 03
A rotating shift (changes from days to evenings to nights) 04
Split shift (two distinct periods each day) 05
On call 06
Irregular schedule 07
Other (*please specify*) 08
-
-
-

C11 What kind of work do you do in this job? That is, what is your occupation called and what are the main tasks and duties you undertake in this job? Please describe fully.

OCCUPATION TITLE (*Obtain full title. Try to avoid one-word answers. For example: “shipping clerk”, not just “clerk”, “dairy farmer”, not just “farmer”, and “builder’s labourer”, not just “labourer”.*)

ijbmmtth C9a Number of days usually worked in a 4 week period

ijbwwe C9b And do you usually work on weekends

ijbmsch C10 Current work schedule

ijbmo62 DV: C11 Occupation 2-digit ANZSCO 2006

MAIN TASKS / DUTIES (*For example: recording accounts, frying fish and chips, operating plastic extruding machine.*)

C12a Has your occupation changed since [date of last interview]? Note that a promotion or a change in employer does not necessarily mean a change in occupation.

Yes 1
No 2
Was not employed at date of last interview 3

ijbcmocc CPQ:C12a Occupation changed since last interview

C12b How long in total have you worked in your current occupation? Include time spent in this same occupation with previous employers or in previous businesses.

If one year or more, record

--	--

 years

OR

If less than one year, record

--	--

 weeks

ijboccha C12b Time worked in current occupation - answered years or weeks

ijboccyr C12bi Years worked in current occupation
ijbocckw C12bii Weeks worked in current occupation

C13 And how long have you worked [for your current employer / in your current business]?

If one year or more, record

--	--

 years

OR

If less than one year, record

--	--

 weeks

ijbemlha C13 Time worked for current employer - answered years or weeks

ijbemlyr C13i Years worked for current employer
ijbemlwk C13ii Weeks worked for current employer

C14 What kind of industry, business or service is carried out at the business address at which you work? Describe fully (e.g., dairy farming, footwear manufacturing, clothing retail store).

ijbmi62 DV: C14 Current main job industry. 2-digit ANZSIC 2006

C15 (In your main job), are any of your usual working hours worked *at your home* (that is, the address of your usual place of residence)?

Yes 1
No 2 → C19a

ijbmh C15 Any of usual working hours worked at home

C16 Approximately how many hours each week do you *usually* work at home (for your main job only)?

Hours per week

--	--

 → C18

ijbmhrhw C16 Hours each week usually work at home

Hours vary.....997 → C17

C17 How many hours per week do you work at home *on average* over a usual 4-week period (for your main job only)?

Hours per week

ijbmhrha C17 Hours work on average each week at home

C18 Are the hours worked at home the result of a formal arrangement with your employer?

Yes 1
No 2
Not applicable - self-employed 7

ijbmagh C18 Are hours worked at home result of formal arrangement with employer

C19a Do you belong to a trade union?

Yes 1 →C20
No 2
Don't know 9

ijbtu C19a Belong to trade union

C19b Do you belong to any other union or employee association?

Only include professional employee associations which serve the work related interests of the respondent. Do not include associations which only accord members professional status in their field.

Yes 1
No 2
Don't know 9

ijbou C19b Belongs to other union or trade association

**C20 CHECK B12 on page 4: Employee status.
C20 MUST match B12.**

Employee 1 →C21a
Employee of own business 2 →C27
Employer / Self-employed 3 →C27
Unpaid family worker 4 →C30

ichkb12 C20 Check B12 employment status

Employees only

C21a Does your employer provide you with paid holiday leave? (Again, we're talking about your main job.)

Yes 1
No 2
Don't know 9

ijbmhl C21a Does employer provide paid holiday leave

C21b Does your employer provide you with paid sick leave?

Yes 1
No 2
Don't know 9

ijbmsl C21b Does employer provide paid sick leave

C22 Looking at SHOWCARD C22, which of these categories best describes your current contract of employment?

Employed on a fixed-term contract 1
Employed on a casual basis 2
Employed on a permanent or ongoing basis 3
Other (*please specify*) 7-8

ijbmcnt C22 Employment contract - current job

C23 Can you look at SHOWCARD C23 and tell me which category best describes how your pay is currently set?

Collective (enterprise) agreement 1
Individual agreement (or contract) 2
Combination of collective / enterprise agreement and individual agreement 3
Paid exactly the Award (or APCS) rate 4
Other (*please specify*) 7-8

Don't know 9

ijbmpays C23 How pay is currently set

C24 I would like you to think about your employment prospects over the next 12 months. What do you think is the per cent chance that you will leave your job voluntarily (that is, quit or retire) during the next 12 months?

0% (i.e., no chance) — 100% (i.e., absolute certainty)

Record % %

Not currently working 996 999

ijbmplej C24 Percent chance of voluntarily leaving job in next 12 months

C25 What do you think is the per cent chance that you will lose your job during the next 12 months? (That is, get retrenched or fired or not have your contract renewed.)

0% (i.e., no chance) — 100% (i.e., absolute certainty)

Record % %

Not currently working 996 999

ijbmnopj C25 Percent chance of losing job in next 12 months

C26 If you were to lose your job during the next 12 months, what is the per cent chance that the job you eventually find and accept would be at least as good as your current job, in terms of wages and benefits?

0% (i.e., no chance) — 100% (i.e., absolute certainty)

Record % %

ijbmpgj

C26 Percent chance will find and accept job at least as good as current job

Would not seek another job.....997

Not currently working.....996-999

All employed persons (inc. self-employed)

C27 Would you describe yourself as an independent contractor? The information on SHOWCARD C27 might help you to answer this.

Yes1
No2
Don't know9

ijbindc

C27 Do you describe yourself as an independent contractor?

C28 (In your main job), do you have income tax deducted directly from your earnings each pay period?

Yes1
No2
Don't know9

ijbmpaye

C28 Currently PAYE

C29 Are you employed through a labour-hire firm or temporary employment agency? That is, the agency pays your wage?

Yes1
No2

ijbmlh

C29 Employed through labour-hire firm or temporary employment agency

C30 As part of your job, do you normally supervise the work of other employees?

Yes1
No2

ijbmvsr

C30 Normally supervise work of other employees

C31 Looking at SHOWCARD C31, which one of these categories *best* describes your [employer / business]?

Commercial

Private sector "for profit" organisation 1
Government business enterprise or commercial statutory authority 2
Other commercial (*please specify*) 3

ijbmmply C31 Which of these best describes employer/business

Non-commercial

Private sector "not-for-profit" organisation 4
Other government organisation, such as a public service department, local councils, schools and universities 5
Other non-commercial (*please specify*) 6

Don't know [LAST RESORT ONLY] 9

C32 Looking at SHOWCARD C32, approximately how many people (including yourself) are employed [at the place at which you work / in your business]? (Include all employees, including part-time workers and casuals. Do not include contractors.)

One person (self).....01
2 to 402
5 to 903
10 to 1904
20 to 4905
50 to 9906
100 to 19907
200 to 49908
500 or more09

Don't know but fewer than 2010
Don't know but 20 or more11

ijbmwps C32 Number employed at place of work

C33 Does your [employer / business] operate from more than one location in Australia?

Yes1
No2 ➔C35
Don't know9

ijbmmpwp C33 Does employer operate from more than one location in Australia

C34 Looking at SHOWCARD C34, approximately how many people work [for your employer / in your business] at locations throughout Australia? Make sure you include your workplace as well.

Less than 20.....	01
20 to 99	02
100 to 499	03
500 to 999	04
1,000 to 4,999	05
5,000 to 19,999	06
20,000 or more.....	07
Don't know but fewer than 100	08
Don't know but 100 or more	09
Don't know.....	99

ijbmemsz C34 Number of people employed at locations throughout Australia

C35 I now have some questions about how satisfied or dissatisfied you are with different aspects of your job. (Again I remind you that we are only interested here in your main job.)

*If not currently employed, also read out:
These questions refer to the most recent
job you were working in.*

Looking at SHOWCARD C35, please pick a number between 0 and 10 to indicate how satisfied or dissatisfied you are with the following aspects of your job. The more satisfied you are, the higher the number you should pick. The less satisfied you are, the lower the number.

	0-10	D/K
a Your total pay?	<input type="text"/>	99
b Your job security?	<input type="text"/>	99
c The work itself (what you do)?	<input type="text"/>	99
d The hours you work?	<input type="text"/>	99
e The flexibility available to balance work and non-work commitments?	<input type="text"/>	99
f All things considered, how satisfied are you with your job?	<input type="text"/>	99

ijbmsspay	C35a Total pay satisfaction
ijbmssec	C35b Job security satisfaction
ijbmswrk	C35c The work itself satisfaction
ijbmshrs	C35d The hours you work satisfaction
ijbmsflx	C35e The flexibility to balance work and non-work commitments satisfaction
ijbmsall	C35f Overall job satisfaction

C36 At any time in the last 4 weeks have you actually looked for a new job?

Yes	1
No.....	2

ijbnewjs C36 At any time in the last 4 weeks, have you actually looked for a new job

C37 CONFIRM AGE: Just to confirm - are you 44 years or younger, or 45 years or older?

44 years of age OR YOUNGER 1 → C39
45 years of age OR OLDER 2

irtage1 C37 Check age 45 or older

C38 At what age do you expect to retire (completely) from the paid workforce?

If range provided, probe for single most likely age.

Enter age

--	--

Do not expect ever to retire 997
Don't know 999

irtiage1 C38 At what age do you plan to retire from the workforce

Previous employment

C39 I would now like you to think back to when we last interviewed you – on [date of last interview]. Were you employed then?

Yes 1
No 2 → C45

ipjempty CPQ:C39 Employed at last interview

C40 And were you working in one job *only* at this time - that is, for one employer (or in one business) - or did you have more than one job (or business)?

If self employed, the number of jobs does not refer to the number of clients or contracts. Record 2 jobs only if the respondent owned and worked in 2 separate businesses, or worked in another job as well as their own business.

Yes, one employer/business only 1
Working for 2 (or more) employers/ 2 or more business 2 → C42

ipjnjobs CPQ:C40 One job or more

C41 Do you still work for the same employer (or in the same business)?

Yes 1 → E1
No 2 → C43

ipjsemp CPQ:C41 Still work for same employer

C42 Now thinking about the employer for the main job that you held on [date of last interview]. Do you still work for that same employer?

If respondent was self employed, are they still self-employed and working in the same business?

Yes 1 → E1
No 2

ipjmsemp CPQ:C42 Thinking of main job, do you still work for same employer

C43 What was the main reason you stopped working in that job (or business) that you held on [date of last interview]?

SINGLE RESP

Employment reasons

- | | |
|--|--------|
| Job was temporary or seasonal..... | 01 |
| Holiday job..... | 02 |
| Got laid off / No work available / Retrenched /
Made redundant / Employer went out of
business / Dismissed etc..... | 03 |
| Not satisfied with job (e.g., unhappy with
hours, pay, working conditions, boss, other
workers) | 04 |
| To obtain a better job / Just wanted a change /
To start a new business | 05 |
| Self-employed: Business closed down for
economic reasons (went broke / liquidated /
no work / not enough business) | 06 |
| Self-employed: Business closed down or
sold for other reasons..... | 07 |
| <u>Personal reasons</u> | |
| Retired / Did not want to work any longer..... | 08 |
| Own sickness, disability or injury | 09 |
| Pregnancy / To have children..... | 10 |
| To stay at home to look after children, house
or someone else..... | 11 |
| Travel / have a holiday | 12 |
| Returned to study / Started study / Needed
more time to study | 13 |
| Spouse / partner transferred..... | 14 |
| Too much travel time / too far from public
transport | 15 |
| Other (please specify) | 97- 98 |

ipj1jrea CPQ:C43 Main reason stopped working in
that job

C44 Apart from the [job / jobs] you held on [date of last interview] and your current job, have you been employed in any other jobs between then and now?

- Yes 1 → C46a
No 2 → E1
-

ipjo

CPQ:C44 Employed in any other jobs
between then and now

C45 Apart from your current job, have you been employed in any other jobs since [date of last interview]?

- Yes 1
No 2 → E1

ipjoth

CPQ:C45 Employed in any other job since
last interview

C46a I now have some questions about the last job you ceased prior to your current job.

Including any paid or unpaid overtime, how many hours per week did you *usually* work in that job?

This includes any work done at the workplace and at home.

Hours per week ➔ C47
Hours varied 997 ➔ C46b

ipjohru CPQ:C46a Hours usually worked in last job prior to current job

C46b Including any paid or unpaid overtime, how many hours per week did you work on *average* over a usual 4-week period in that job?

Hours per week

ipjohra CPQ:C46b Hours worked on average in last job prior to current job

C47 What kind of industry, business or service was carried out at the business address at which you previously worked? Describe fully (e.g., dairy farming, footwear manufacturing, clothing retail store).

ipjoi62 DV: CPQ:C47 Previous job industry (currently employed) 2-digit ANZSIC 2006

C48 In that job, did you work ...

- for an employer for wages or salary? 1
in your own business with employees? 2
in your own business with no employees? 3
without pay in a family business? 4

ipjotyp CPQ:C48 Employment type, previous job, if job changed

[If none of the above]

What then were your working arrangements?

- Received payment in kind 5
Unpaid voluntary worker 6
Other (please specify) 7—8

C49 Looking at SHOWCARD C49, which of the following *best* describes your contract of employment for that job?

- Self-employed.....1
Employed on a fixed-term contract.....2
Employed on a casual basis.....3
Employed on a permanent or ongoing basis.....4
Other (*please specify*)8
-
-

ipjocnt CPQ:C49 Employment contract - previous job (currently employed)

C50 What kind of work did you do in your previous job? That is, what was your occupation called and what were the main tasks and duties you undertook in that job? Please describe fully.

OCCUPATION TITLE (*Obtain full title. Try to avoid one-word answers. For example: "shipping clerk", not just "clerk", "dairy farmer", not just "farmer", and "builder's labourer", not just "labourer".*)

ipjoo62 DV: CPQ:C50 Occupation, previous job, if job changed 2-digit ANZSCO 2006

MAIN TASKS / DUTIES (*For example: recording accounts, frying fish and chips, operating plastic extruding machine.*)

C51 What was the main reason you stopped working in that job?

SINGLE RESP

Employment reasons

- | | |
|--|----|
| Job was temporary or seasonal..... | 01 |
| Holiday job..... | 02 |
| Got laid off / No work available / Retrenched /
Made redundant / Employer went out of
business / Dismissed etc..... | 03 |
| Not satisfied with job (e.g., unhappy with
hours, pay, working conditions, boss, other
workers) | 04 |
| To obtain a better job / Just wanted a change /
To start a new business | 05 |
| Self-employed: Business closed down for
economic reasons (went broke / liquidated /
no work / not enough business) | 06 |
| Self-employed: Business closed down or
sold for other reasons..... | 07 |

ipjoreea CPQ:C51 Main reason stopped working in
that job

Personal reasons

- | | |
|---|--------|
| Retired / Did not want to work any longer..... | 08 |
| Own sickness, disability or injury..... | 09 |
| Pregnancy / To have children..... | 10 |
| To stay at home to look after children, house
or someone else..... | 11 |
| Travel / have a holiday | 12 |
| Returned to study / Started study / Needed
more time to study..... | 13 |
| Spouse / partner transferred..... | 14 |
| Too much travel time / too far from public
transport | 15 |
| Other (<i>please specify</i>) | 97- 98 |

**C52 Now go to Section E on page 16. (Section D is
only for persons not currently employed.)**

D. PERSONS NOT IN PAID EMPLOYMENT

**D1 Now some questions on looking for work. At
any time during the last 4 weeks have you
looked for paid work?**

PROBE for part-time or full-time.

*Reassure people receiving social security payments
that all information is confidential.*

- | | | |
|---|---|------|
| No – have not looked for work in last 4 weeks | 1 | →D10 |
| Yes – looked for full-time work only..... | 2 | |
| Yes – looked for part-time work only | 3 | |
| Yes – looked for any work, FT or PT | 4 | |

ijsl4wk D1 Looked for work in last 4 weeks

Job seekers

D2 Looking at SHOWCARD D2, at any time in the last 4 weeks have you done any of these things?

MULTI RESP

- Written, phoned or applied in person to an employer for work? 01
 Answered an advertisement for a job? 02
 Checked factory noticeboards, or used the touchscreens at Centrelink offices? 03
 Been registered with Centrelink as a jobseeker? 04
 Checked or registered with an employment agency? 05

Have you done anything else to find a job?

PROBE AND CODE BELOW. NOTE: THE FOLLOWING CODES ARE NOT LISTED ON THE SHOWCARD.

- Advertised or tendered for work 07
 Contacted friends / relatives 08
 Looked in newspapers, but did not actually answer an advertisement for a job 09
 Looked on internet, but did not actually answer an advertisement for a job 10
 Other (please specify) 98

None of the above (query D1) 97

ijsactwp	D2 Done any of following in last 4 weeks - Written, phoned or applied in person to an employer for work
ijsactaa	D2 Done any of following in last 4 weeks - Answered an advertisement for a job
ijsactfn	D2 Done any of following in last 4 weeks - Checked factory noticeboards, or used the touchscreens at Centrelink offices
ijsactrc	D2 Done any of following in last 4 weeks - Been registered with Centrelink as a jobseeker
ijsactea	D2 Done any of following in last 4 weeks - Checked or registered with an employment agency
ijsactat	D2 Done any of following in last 4 weeks - Advertised or tendered for work
ijsactfr	D2 Done any of following in last 4 weeks - Contacted friends/relatives
ijsactln	D2 Done any of following in last 4 weeks - Looked in newspapers, but did not actually answer an advertisement for a job
ijsactli	D2 Done any of following in last 4 weeks - Looked on internet but did not actually answer an advertisement for a job
ijsnoact	D2 Done any of following in last 4 weeks - None of the above
ijsactos	D2 Done any of following in last 4 weeks - Other
ijsactna	D2 Done any of following in last 4 weeks - No answer
ijsactrf	D2 Done any of following in last 4 weeks - Refused
ijsactdk	D2 Done any of following in last 4 weeks - Dont know

D3 When did you begin looking for work?

We are only interested here in the most recent episode of unemployment.

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

[If exact date unknown, accept an approximation of the number of weeks since commencing looking for work.]

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

weeks

Don't know – PROBE FOR:

- Less than 2 years ago 1
 2 to less than 5 years ago 2
 5 years or more 3

ijstha D3 When began looking for work - answered date or weeks or dont know (ask year ranges)

ijstday D3d Day began looking for work
 ijstmth D3m Month began looking for work
 ijstyr D3y Year began looking for work

ijstwks D3 Number of weeks since began looking for work

ijstbrd D3 Years began looking for work

ijshjsa D4 Hours spent in job search activities in last week

ijsia D5 Currently receiving Intensive Assistance from JN provider

D4 Approximately how many hours have you spent in job search activities during the last week?

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

hours

D5 Are you currently in receipt of “Intensive Assistance” from a Job Network Provider?

- Yes 1
 No 2
 Don't know 9

D6a If you had found a job, could you have started work last week?

Yes 1 → D6d
No 2
Don't know 9 → D6d

ijsavail D6a If found a job, could have started work last week

D6b What were the reasons you could not have started work last week?

Waiting to start a job 1
Other 2 → D6d

ijsnarea D6b Reasons could not have started work last week

D6c Will you be starting work in the next 4 weeks?

Yes 1 → D9
No 2

ijsn4wk D6c Starting work in next 4 weeks

D6d Could you start work in the next 4 weeks if work was available?

Yes 1
No 2

ijsan4wk D6d Start in next 4 weeks if work available

D7 Looking at SHOWCARD D7, since you began looking for work on [date in D3], have you had trouble getting a job for any of these reasons?**MULTI RESP**

Own ill health or disability 01
Employers thought you were too young or too old 02
Hours were unsuitable 03
Transport problems or it was too far to travel 04
Did not have the required education, training or skills 05
Did not have enough work experience 06
Language difficulties 07
No jobs in line of work 08
Too many applicants for the available jobs 09
Just no jobs at all 10
Difficulties in finding child care 11

ijsreahd D7 Reasons had trouble getting a job - Own ill health or disability
ijsreayo D7 Reasons had trouble getting a job - Employers thought you were too young or too old
ijsreahu D7 Reasons had trouble getting a job - Hours were unsuitable
ijsreatr D7 Reasons had trouble getting a job - Transport problems or it was too far to travel
ijsrealt D7 Reasons had trouble getting a job - Did not have the required education, training or skills
ijsreale D7 Reasons had trouble getting a job - Did not have enough work experience
ijsreald D7 Reasons had trouble getting a job - Language difficulties
ijsreanw D7 Reasons had trouble getting a job - No jobs in your line of work
ijsreama D7 Reasons had trouble getting a job - Too many applicants for the available jobs
ijsreanj D7 Reasons had trouble getting a job - Just no jobs at all
ijsreafc D7 Reasons had trouble getting a job - Difficulties in finding child care
ijsreadm D7 Reasons had trouble getting a job - Discrimination against migrant/ethnic groups
ijsreaof D7 Reasons had trouble getting a job - Other family responsibilities
ijsreano D7 Reasons had trouble getting a job - None of the above
ijsreaos D7 Reasons had trouble getting a job - Other difficulties
ijsreana D7 Reasons had trouble getting a job - No answer
ijsrearf D7 Reasons had trouble getting a job - Refused
ijsreadk D7 Reasons had trouble getting a job - Dont know
ijsreaoq D7 Reasons had trouble getting a job - Overqualified

What other difficulties have you had?

PROBE AND CODE BELOW. DO NOT PROMPT: NOTE THE FOLLOWING CODES ARE NOT LISTED ON THE SHOWCARD.
Discrimination against migrant / ethnic groups 12
Other family responsibilities (not child care difficulties) 13
Other difficulties (please specify) 98

None of the above 97 → D9

CHECK D7: If more than one response at D7 ask
D8, otherwise go to D9

D8 What is the *main* difficulty you have had in
getting a job?

Enter code from D7

ijsmreas D8 Main difficulty in getting a job

D9 Since you began looking for work on [date in
D3], how many job offers have you received?

Enter number of job offers

ijsnoffr D9 Number of job offers since began
looking for work

Now skip to D15

Have not looked for work in last 4 weeks

D10 Looking at SHOWCARD D10, which of these
categories *best* describes your main activity
since you last worked or looked for work?

- | | |
|--|---|
| Retired / Voluntarily inactive | 1 |
| Home duties / Child care | 2 |
| Study / Went to school, TAFE or university | 3 |
| Own illness, injury or disability..... | 4 |
| Looking after ill or disabled person | 5 |
| Travel / On holiday / Leisure activities..... | 6 |
| Working in an unpaid voluntary job | 7 |
| Other activity (<i>please specify</i>) | 8 |

inlmact D10 Main activity since last
worked/looked for work

D11 Even though you are not looking for work now,
would you like a job? (Assume that suitable
child care arrangements could be found.)

- | | |
|-------------------------|---------|
| Yes | 1 |
| Maybe / It depends..... | 2 |
| No | 3 → D19 |
| Don't know..... | 9 → D19 |

inlwantj D11 Like a job

D12 What are all the reasons you have not been looking for work in the last 4 weeks?

PROBE FULLY	MULTI RESP
<u>Have a job to go to</u>	<u>01</u>
<u>Personal reasons</u>	
Own illness, injury or disability.....	<u>02</u>
Pregnancy / Maternity leave	<u>03</u>
Studying / Returning to studies.....	<u>04</u>
Does not need to work.....	<u>05</u>
To give others a chance	<u>06</u>
Welfare payment / pension may be affected	<u>07</u>
Moved house / Holidays	<u>08</u>
Lack of transport.....	<u>09</u>
No time	<u>10</u>
<u>Child care reasons</u>	
Prefers to look after children.....	<u>11</u>
Difficulties in finding child care	<u>12</u>
Waiting until youngest child starts pre-school / primary school	<u>13</u>
Other child care reason	<u>14</u>
<u>Other family reasons</u>	
Ill health of someone other than self / other family reasons	<u>15</u>
<u>Believes no work available or couldn't find work because:</u>	
Too young / too old	<u>16</u>
Lacks necessary training or qualifications	<u>17</u>
Lacks necessary experience	<u>18</u>
Difficulties with language / ethnic background....	<u>19</u>
Difficulties with reading / writing	<u>20</u>
No jobs available in line of work	<u>21</u>
No jobs available with suitable hours	<u>22</u>
No jobs available at all.....	<u>23</u>
On a job-related training program.....	<u>24</u>
<u>Other reasons (please specify)</u>	<u>98</u>

CHECK D12: If more than one response at D12, ask D13, otherwise go to D14

D13 Which of these was the main reason you were not looking for work in the last 4 weeks?

Enter code from D12

inlreahj	D12 Not looking for work - Have a job to go to
inlreaoi	D12 Not looking for work - Own illness, injury or disability
inlreapm	D12 Not looking for work - Pregnancy/Maternity leave
inlreast	D12 Not looking for work - Studying/returning to studies
inlreann	D12 Not looking for work - Does not need to work
inlreago	D12 Not looking for work - To give others a chance
inlreawp	D12 Not looking for work - Welfare payment/pension may be affected
inlreamh	D12 Not looking for work - Moved house/Holidays
inlreatr	D12 Not looking for work - Lack of transport
inlreant	D12 Not looking for work - No time
inlreapc	D12 Not looking for work - Prefers to look after children
inlreafc	D12 Not looking for work - Difficulties in finding child care
inlreayc	D12 Not looking for work - Waiting until youngest child starts pre-school/primary school
inlreaoc	D12 Not looking for work - Other child care reason
inlreaho	D12 Not looking for work - Ill health of someone other than self/other family reason
inlreayo	D12 Not looking for work - Too young/too old
inlrealt	D12 Not looking for work - Lacks necessary training or qualifications
inlreale	D12 Not looking for work - Lacks necessary experience
inlreald	D12 Not looking for work - Difficulties with language/ethnic background
inlrearw	D12 Not looking for work - Difficulties with reading/writing
inlrealw	D12 Not looking for work - No jobs available in line of work
inlreash	D12 Not looking for work - No jobs available with suitable hours
inlreaja	D12 Not looking for work - No jobs available at all
inlreajt	D12 Not looking for work - On a job related training program
inlreaos	D12 Not looking for work - Other reasons
inlreani	D12 Not looking for work - Not interested
inlreatb	D12 Not looking for work - Taking a break/rest from working
inlreavw	D12 Not looking for work - Do voluntary/unpaid work
inlrearf	D12 Not looking for work - Refused
inlreadk	D12 Not looking for work - Dont know
inlmreas	D13 Main reason not looking for work in last 4 weeks

-
- D14 If you were offered a suitable job (and suitable child care was available), could you start work in the next four weeks?**

Yes 1
No 2
Don't know 9

inlan4wk D14 If offered suitable job, start work in next four weeks

All looking for work or wanting work

- D15 Assuming work was available, what would be the *lowest wage per hour*, before any tax is taken out, that you would accept?**

If asked, inform respondent to assume that they could choose to work as few or as many hours per week as they liked.

Record whole dollars \$

ijsminws D15 Lowest acceptable wage per hour

Don't know [Last resort only] 999 → D17

-
- D16 If you were offered a job paying [response to D15] dollars per hour, how many hours per week would you prefer to work in that job?**

Hours per week preferred → D18

ijsminhr D16 Hours per week prefer to work at that rate per hour

-
- D17 If you were offered a job, how many hours per week would you prefer to work?**

Hours per week preferred

ijsminhj D17 Hours per week prefer to work in any job

-
- D18 I would like you to think about your employment prospects over the next 12 months. What do you think is the per cent chance that you will find a suitable job during the next 12 months? Choose the number from 0% to 100% that is closest to your answer.**

0% (i.e., no chance) — 100% (i.e., absolute certainty)

Record % %

ijsp suit D18 Percent chance of finding suitable job in next 12 months

Don't know 999

Retirement

-
- D19 CONFIRM AGE: Just to confirm – are you 44 years or younger, or 45 years or older?**

44 years of age OR YOUNGER 1 → D22
45 years of age OR OLDER 2

irtage2 CPQ:D19 Check age 45 or older

**D20 (Can I just check), have you retired
(completely) from the workforce?**

- Yes 1 ➔ D21a
No 2 ➔ D21b
Never in workforce 3 ➔ E9
Don't know / can't say 9 ➔ D22

irtcomp CPQ:D20 Retired completely from the work-force

D21a In which year did you retire?

Record year

irtyr CPQ:D21a Year retired

Now skip to D22

**D21b At what age do you expect to retire
(completely) from the paid workforce?**

If range provided, probe for single most likely age.

Enter age

irtiage2 CPQ:D21b Age expect to retire from paid workforce

Do not expect ever to retire 997

Don't know 999

Previous employment

**D22 I would now like you to think back to when we
last interviewed you – on [date of last
interview]. Were you employed then?**

- Yes 1
No 2 ➔ D25

ipjemp CPQ:D22 Were you employed when last interviewed

D23 What was the main reason you stopped working in the job that you held on [date of last interview]?

If respondent stopped working in 2 or more jobs, we want to know about their main job.

SINGLE RESP

Employment reasons

Job was temporary or seasonal.....	01	ipj1jr	CPQ:D23 Main reason stopped working
Holiday job.....	02		
Got laid off / No work available / Retrenched / Made redundant / Employer went out of business / Dismissed etc.....	03		
Not satisfied with job (e.g., unhappy with hours, pay, working conditions, boss, other workers)	04		
To obtain a better job / Just wanted a change / To start a new business	05		
Self-employed: Business closed down for economic reasons (went broke / liquidated / no work / not enough business)	06		
Self-employed: Business closed down or sold for other reasons.....	07		

Personal reasons

Retired / Did not want to work any longer.....	08
Own sickness, disability or injury.....	09
Pregnancy / To have children.....	10
To stay at home to look after children, house or someone else	11
Travel / have a holiday	12
Returned to study / Started study / Needed more time to study.....	13
Spouse / partner transferred.....	14
Too much travel time / too far from public transport	15
Other (please specify)	98

D24 Apart from any jobs you had on [date of last interview], have you been employed in any other jobs between then and now?

Yes	1 → D26
No.....	2 → D32

ipjot

CPQ:D24 Employed in any other job between then and now

D25 Have you been employed in any job since [date of last interview]?

Yes	1
No.....	2 → D32

ipjotr

CPQ:D25 Employed in any job since last interviewed

D26 I now have some questions about your most recent job. First, what was the main reason you stopped working in that job?

SINGLE RESP

Employment reasons

- | | |
|--|----|
| Job was temporary or seasonal..... | 01 |
| Holiday job..... | 02 |
| Got laid off / No work available / Retrenched / Made redundant / Employer went out of business / Dismissed etc..... | 03 |
| Not satisfied with job (e.g., unhappy with hours, pay, working conditions, boss, other workers) | 04 |
| To obtain a better job / Just wanted a change / To start a new business | 05 |
| Self-employed: Business closed down for economic reasons (went broke / liquidated / no work / not enough business) | 06 |
| Self-employed: Business closed down or sold for other reasons..... | 07 |

ipjotrea CPQ:D26 Main reason stopped working in last job

Personal reasons

- | | |
|---|----|
| Retired / Did not want to work any longer..... | 08 |
| Own sickness, disability or injury | 09 |
| Pregnancy / To have children..... | 10 |
| To stay at home to look after children, house or someone else | 11 |
| Travel / have a holiday | 12 |
| Returned to study / Started study / Needed more time to study..... | 13 |
| Spouse / partner transferred..... | 14 |
| Too much travel time/ too far from public transport..... | 15 |
| Other (<i>please specify</i>) | 98 |

D27a Including any paid or unpaid overtime, how many hours per week did you *usually* work in that job?

This includes any work done at the workplace and at home.

Don't include time "on-call"; these are NOT considered usual working hours.

Hours per week ➔ D28

ipjothru CPQ:D27a Hours usually worked in last job (not in paid employment)

Hours varied 997 ➔ D27b

D27b Including any paid or unpaid overtime, how many hours per week did you work *on average* over a usual 4-week period in that job?

Hours per week

ipjothra CPQ:D27b Hours worked on average in last job (not in paid employment)

D28 What kind of industry, business or service was carried out at the business address at which you previously worked? Describe fully (e.g., dairy farming, footwear manufacturing, clothing retail store).

ipjot162 DV: CPQ:D28 Previous job industry (unemployed) 2-digit ANZSIC 2006

D29 In that job, did you work ...

- for an employer for wages or salary? 1
in your own business with employees? 2
in your own business with no employees? 3
without pay in a family business? 4

[If none of the above]

What then were your working arrangements?

- Received payment in kind 5
Unpaid voluntary worker 6
Other (please specify) 8

ipjottyp CPQ:D29 Employment type, previous job if unemployed

D30 Looking at SHOWCARD D30, which of the following best describes your contract of employment for that job?

- Self-employed 1
Employed on a fixed-term contract 2
Employed on a casual basis 3
Employed on a permanent or ongoing basis 4
Other (please specify) 8

ipjotcnt CPQ:D30 Employment contract - previous job (not in paid employment)

D31 What kind of work did you do in your previous job? That is, what was your occupation called and what were the main tasks and duties you undertook in that job? Please describe fully.

OCCUPATION TITLE (Obtain full title. Try to avoid one-word answers. For example: "shipping clerk", not just "clerk", "dairy farmer", not just "farmer", and "builder's labourer", not just "labourer".)

ipjoto62 DV: CPQ:D31 Occupation, previous job, if unemployed 2-digit ANZSCO 2006

MAIN TASKS / DUTIES (For example: recording accounts, frying fish and chips, operating plastic extruding machine.)

D32 CONFIRM: Can I just check. Have you been employed in any job during the past 12 months?

Yes 1
No 2 → E9

iujjblyr D32 Employed in any job in the past 12 months

E. OTHER LABOUR MARKET ACTIVITY

Work-related training

E1 During the past 12 months, have you taken part in any education or training schemes, as part of your employment?

We are only interested in structured training courses the respondent has received. Do not include training they may have participated in as a trainer.

Yes 1
No 2 → E9

ijttrwrk E1 Taken part in any work related training in past 12 months

E2 I would now like to ask you about where and when these training courses were conducted.

Please answer yes or no to the following.

Were any of these conducted ...

- | | Yes | No |
|--|--------|----|
| a at your place of employment (or while on the job) during paid work time? | 1..... | 2 |
| b at your place of employment, but in your own time? | 1..... | 2 |
| c at some other place during paid work time? | 1..... | 2 |
| d at some other place, but in your own time? | 1..... | 2 |

ijtppewt E2a Job-related training at place of employment - during paid work time
ijtppeot E2b Job-related training at place of employment - in your own time
ijttopwt E2c Job-related training at some other place - during paid work time
ijttopot E2d Job-related training at some other place - in your own time

By "work time", we mean time for which the respondent is paid. This includes usual working hours as well as any paid overtime.

Receiving time off in lieu for attending training courses should be treated the same as being paid for those hours.

E3 In total, how many different training courses did you attend in the last 12 months?

Record no. of courses

--	--

Don't know 99

ijttnum E3 Number of different training courses attended last 12 months

E4 During the last 12 months, on how many days did you attend (that / these) training course(s)? Please count part days as whole days.

Record no. of days

--	--	--

Don't know 999

ijttdays E4 Number of days attended training course

If respondent answers in weeks, convert answer to days (multiply by 5) and confirm with respondent.

E5 (And on average,) how many hours [each / that day did you spend on [that course / those courses]? Please do not include breaks, lunch, or travel time.

Record no. of hours per day

--	--

Don't know..... 99

ijtthrs E5 Average number of training hours per course day

E6 Looking at SHOWCARD E6, have you contributed towards the cost of any of this training in any of these ways?

Yes 1
No 2

ijttrcst E6 Contributed to cost of job-related training (fees/materials/books/paid for travel/took unpaid leave)

E7 Looking at SHOWCARD E7, what were the aims of any of this training?

MULTI RESP

To help you get started in your job 1
To improve your skills in your current job 2
To maintain professional status and/or meet occupational standards 3
To prepare you for a job you might do in the future or to facilitate promotion 4
To develop your skills generally 5
Because of safety / health concerns 6
Other aims (please specify) 8

ijttrhgs E7 Aim of this training - To help you get started in your job
ijttrisc E7 Aim of this training - To improve your skills in your current job
ijttrmps E7 Aim of this training - To maintain professional status and/or meet occupational standards
ijttrpfj E7 Aim of this training - To prepare you for a job you might do in the future or to facilitate promotion
ijttrdsg E7 Aim of this training - To develop your skills generally
ijttrhsc E7 Aim of this training - Because of health / safety concerns
ijttros E7 Aim of this training - Other aims
ijttrrf E7 Aim of this training - Refused
ijttrdk E7 Aim of this training - Dont know

E8 IF CURRENTLY EMPLOYED, READ OUT:
Looking at SHOWCARD E8, to what extent do you think you could use the new skills you have acquired from any of this training if you got a new job with a different employer?

IF NOT CURRENTLY EMPLOYED, READ OUT:
Looking at SHOWCARD E8, to what extent do you think you could use the new skills you have acquired from any of this training if you got a new job?

Not at all 1
Only to a limited extent 2
To a moderate extent 3
To a great extent 4
To a very great extent 5
Did not learn any new skills 7-8

ijttuse E8 How would you use your new skills if got a new job

Leave from work

E10a Thinking now just of the last 12 months, did you spend any time on workers' compensation?

Yes 1
No 2 → E11

iwcany E10a During last 12 months, did you spend any time on workers compensation

E10b How many months, weeks or days during the last 12 months were you absent from work because you were on workers' compensation?

months
OR
 weeks
OR
 days

iwcaha E10b Absent from work and on workers compensation in past 12 months - how answered

iwcamt E10b Absent from work and on workers compensation in past 12 months - Months
iwcawk E10b Absent from work and on workers compensation in past 12 months - Weeks
iwcada E10b Absent from work and on workers compensation in past 12 months - Days

E11 CHECK E9b: Has respondent had a job since July 2008?

Yes 1 → E12a
No 2 → E16

ialjbca E11 Check if has had a job since start of calendar

E12a During the last 12 months, have you spent any time on paid annual (vacation) leave?

Public holidays are not to be counted as annual leave days.

Yes 1
No 2 → E13a

ialpdany E12a Any paid annual leave in last 12 months

E12b How many weeks or days did you spend on paid annual leave?

weeks
OR
 days

ialpdpha E12b Amount of paid annual leave in last 12 months - how answered

ialpdwk E12b Amount of paid annual leave in last 12 months - Weeks

ialpdda E12b Amount of paid annual leave in last 12 months - Days

E13a During the last 12 months, have you taken any paid sick leave?

Yes 1
No 2 → E14a

ialskany E13a Any paid sick leave in last 12 months

E13b How many weeks or days did you spend on paid sick leave?

weeks
OR
 days

ialskha E13b Amount of paid sick leave in last 12 months - how answered

ialskwk E13b Amount of paid sick leave in last 12 months - Weeks

ialskda E13b Amount of paid sick leave in last 12 months - Days

E14a Looking at SHOWCARD E14, during the last 12 months, have you taken any of these other forms of paid leave?

Showcard list: Maternity; Paternity; Parental; Long-service; Bereavement; Family; Carers; Other paid leave.

Yes 1
No 2 ➔ E15a

E14b How many months, weeks or days did you spend on these types of paid leave during the last 12 months?

months
OR
 weeks
OR
 days

ialopany E14a Any other paid leave in last 12 months

ialopha E14b Amount of other paid leave in last 12 months - how answered

ialopmt E14b Amount of other paid leave in last 12 months - Months

ialopwk E14b Amount of other paid leave in last 12 months - Weeks

ialopda E14b Amount of other paid leave in last 12 months - Days

E15a During the last 12 months, apart from public holidays, have you missed work or taken any other time off for which you were not paid? (We are only interested in time-off when you were scheduled to be at work.)

Yes 1
No 2 ➔ E16

ialupany E15a Taken any unpaid leave in last 12 months

E15b How many months, weeks or days did you take off?

months
OR
 weeks
OR
 days

ialupha E15b Amount of unpaid leave in last 12 months - how answered

ialupmt E15b Amount of unpaid leave in last 12 months - Months

ialupwk E15b Amount of unpaid leave in last 12 months - Weeks

ialupda E15b Amount of unpaid leave in last 12 months - Days

E16 CHECK E9c: Has respondent been not employed BUT looking for work?

Yes 1 ➔ E17
No 2 ➔ F1a

ichkca E16 Has been not employed but looking for work for any period in the calendar

Mutual obligation activity

E17 Looking at SHOWCARD E17, since July 2008, have you been required by Centrelink or a Job Network provider to do any of the things listed?

MULTI RESP

Study	01
Part-time paid work	02
Voluntary unpaid work	03
Community Work organised by a Community Work Coordinator	04
Work for the Dole	05
Job Search Training (training to search for jobs, write applications and prepare for interviews)	06
Approved literacy / numeracy training	07
Green Corps	08
Job Placement Employment and Training (JPET) ...	09
Community Development Employment Projects	10
Relocating to an area of better employment prospects	11
Australian Apprenticeship Access Program (training to get into a new apprenticeship).....	12
Youth Pathways Program	13
Defence Force Reserve	14
None of the above	97 → F1a

imoreqps	E17 Ever been required by Centrelink/JN Provider to do... - Part-time study
imoreqpw	E17 Ever been required by Centrelink/JN Provider to do... - Part time paid work
imoreqvu	E17 Ever been required by Centrelink/JN Provider to do... - Voluntary unpaid work
imoreqcw	E17 Ever been required by Centrelink/JN Provider to do... - Community Work organised by a Community Work Coordinator
imoreqwd	E17 Ever been required by Centrelink/JN Provider to do... - Work for the dole
imoreqjs	E17 Ever been required by Centrelink/JN Provider to do... - Job Search Training
imoreqln	E17 Ever been required by Centrelink/JN Provider to do... - Approved literacy/numeracy training
imoreggc	E17 Ever been required by Centrelink/JN Provider to do... - Green Corps
imoreqje	E17 Ever been required by Centrelink/JN Provider to do... - Job Placement Employment and Training
imoreqcd	E17 Ever been required by Centrelink/JN Provider to do... - Community Development Employment projects
imoreqlr	E17 Ever been required by Centrelink/JN Provider to do... - Relocating to an area of better employment prospects
imoreqaa	E17 Ever been required by Centrelink/JN Provider to do... - Australian Apprenticeship Access Program
imoreqyp	E17 Ever been required by Centrelink/JN Provider to do... - Youth Pathways Program
imoreqdf	E17 Ever been required by Centrelink/JN Provider to do... - Defence Force Reserve
imoreqno	E17 Ever been required by Centrelink/JN Provider to do... - None of the above
imoreqrif	E17 Ever been required by Centrelink/JN Provider to do... - Refused
imoreqdk	E17 Ever been required by Centrelink/JN Provider to do... - Dont know

E18 Are you currently still undertaking any of these activities?

Yes.....	1 → F1a
No	2

E19 When did you last do any of these activities?

Month on calendar

--	--

- Early.....1
Mid.....2
Late.....3

Year on calendar

2	0		
---	---	--	--

OR

Activities not done – was required to do them, but didn't actually do97

imocreq

E18 Currently still undertaking any of these activities

imolha

E19 Last did any activity to improve employment prospects - calendar date given or not done

imolmth

E19 Month last did activity to improve employment prospects

imolyr

E19 Year last did any activity to improve employment prospects

imol3rd

E19 Time of month last did activity to improve employment prospects

F. INCOME

F1a I am now going to ask you some questions about your income. This is a very important part of this study. Your answers will assist in better understanding the way people live in Australia.

Remember that everything you tell me will remain confidential and NO information that would identify you will be used in any data analysis.

F1b CONFIRM: Do you currently receive income from wages or salary?

- Yes 1
No 2 → F10
Don't know 9 → F10

iwschave F1b Currently receive income from wages/salary

F2 CHECK C6 on page 5: Is respondent currently working in more than one job?

- Yes, has more than one job (C6=1) 1 → F3
No, has one job only (C6=2) 2 → F3
Respondent did not answer C6 3 → F3

iwscmtoj F2 Currently working in more than one job?

F3 For your [job / main job] what was the total gross amount of your most recent pay *before* tax or anything else was taken out?

It will help to answer this question if you can refer to your last pay-slip.

If respondent does not know his/her last pay, but does know his/her annual salary, accept the annual amount.

Enter amount (whole \$) → F4c

iwscmga F3 Total gross amount of most recent pay before deductions

- Nil..... 999997 → F5a
Don't know 999999 → F4a

F4a Do you know what your income from wages and salaries in this job is *after* tax is taken out?

- Yes 1
No 2 → F5b

iwscmnk F4a Do you know what your income from wages and salaries in this job is after tax is taken out

F4b What was the total amount of your most recent pay *after* tax was taken out?

Enter amount (whole \$)

iwscmna F4b What was the total amount of your most recent pay after tax was taken out

Nil..... 999997

F4c And what period does that cover?

- Week..... 1
Fortnight..... 2
Month..... 3
Year 4 → F6

iwscmcf F4c What period does that cover

F5a And is that amount your *usual* pay?

Yes 1 →F6
No 2

iwsclmu F5a Is that your usual pay

F5b How much do you *usually* receive each pay period?

IF VARIES: Looking over the last month, on average how much would you have received each week or each fortnight?

Enter amount (whole \$) \$

Nil 999997 →F6
Don't know 999999 →F6

iwsclmuga F5b How much do you usually receive each pay period

F5c And is that before tax or after tax is taken out?

Before tax is taken out 1
After tax 2
Don't know 9

iwsclmutx F5c Main job - is that before or after tax

F5d And what period does that cover?

Week 1
Fortnight 2
Month 3
Year 4

iwsclmuf F5d Main job - what period does that cover

F6 CHECK F2: Does respondent currently hold one job or more than one?

Has more than one job (F2=1) 1 →F7
Has only one job (F2=2) 2 →F10
Respondent did not answer C6 (F2=3) 3 →F10

ichkf2 F6 Number of jobs in F2

F7 Now I would like to ask you some questions about [your other job / all your other jobs together]. What was the total amount of your most recent gross pay *before* tax or anything else was taken out for [your other job / all your other jobs]?

It will help to answer this question if you can refer to your last pay-slip[s] from your [other] job[s].

If respondent does not know their last pay, but does know [his/her] annual salary in these jobs, accept the annual amount.

Enter amount (whole \$) \$ →F8c

iwscoaga F7 Total amount of your most recent gross pay all other jobs

Nil 999997 →F9a
Don't know 999999 →F8a

F8a Do you know what your income from wages and salaries in [your other job / all your other jobs] is after tax is taken out?

Yes 1
No 2 ➔F10

iwsconk F8a Do you know what your income from wages and salaries in all other jobs is after tax is taken out

F8b What was the total amount of your most recent pay from [your other job / all your other jobs] after tax was taken out?

Enter amount (whole \$)

Nil..... 999997

iwscona F8b What was the total amount of your most recent pay from all other jobs after tax was taken out

F8c And what period does that cover?

Week..... 1
Fortnight..... 2
Month..... 3
Year 4 ➔F10

iwscocf F8c Period covered

F9a Is that your *usual* pay from [your other job / all your other jobs]?

Yes 1 ➔F10
No 2

iwscou F9a Is that your usual pay from all other jobs

F9b How much do you *usually* receive each pay for [your other job / all your other jobs]?

Enter amount (whole \$)

Nil..... 999997 ➔F10
Don't know 999999 ➔F10

iwscouga F9b How much do you usually receive each pay for all other jobs

F9c And is that before tax or after tax is taken out?

Before tax is taken out..... 1
After tax 2
Don't know 9

iwscotx F9c Other jobs - is that before or after tax

F9d And what period does that cover?

Week..... 1
Fortnight..... 2
Month..... 3
Year 4

iwscouf F9d Other jobs - what period does that cover

F10 I would now like to ask you some questions about income received from government benefits, pensions or allowances.

F11 CONFIRM AGE AND SEX

IF MALE ASK: **Are you aged 65 or more?**

IF FEMALE ASK: **Are you aged 63 or more?**

- If male aged 65 or more 1 →F12a
If female aged 63 or more 2 →F12a
Otherwise..... 3 →F13
-

ibnage

F11 Check age and sex - currently eligible for Age Pension

F12a Do you currently receive the Age Pension from the Australian federal government?

- Yes 1
No..... 2 →F13
Don't know 9 →F13
-

ibncap

F12a Do you currently receive the Age Pension from the Australian federal government

F12b How much do you currently receive each fortnight?

Enter amount (whole \$)

ibncapa

F12b How much do you currently receive each fortnight

F13 Excluding any Family Tax Benefit payment, do you currently receive any (*other*) income from the government in the form of a benefit, pension or allowance?

We are only interested here in payments from Australian governments.

- Yes 1
No..... 2 →F17
Don't know 9

ibncoth1

F13 Do you currently receive any income from the government in the form of a benefit, pension or allowance

F14 Looking at SHOWCARD F14, do you currently receive any of these government pensions or allowances? (Which ones?)

MULTI RESP

Newstart Allowance	<u>01</u>
Mature Age Allowance	<u>02</u>
Service Pension (paid by Dept of Veteran Affairs) [exclude superannuation, e.g., DFRDB].....	<u>03</u>
Disability Support Pension (paid by Centrelink).....	<u>04</u>
Wife Pension.....	<u>05</u>
Carer Payment.....	<u>06</u>
Sickness Allowance	<u>07</u>
Widow Allowance (including Widow B Pension, paid by Centrelink).....	<u>08</u>
Special Benefit.....	<u>09</u>
Partner Allowance.....	<u>10</u>
Parenting Payment (NOT Family Tax Benefit)	<u>11</u>
Youth Allowance.....	<u>12</u>
Austudy / Abstudy Payment.....	<u>13</u>
None of these	<u>97</u> →F16a
Don't know	<u>99</u> →F16a

ibncnws	F14 Do you currently receive any of these government pensions or allowances - Newstart Allowance
ibncma	F14 Do you currently receive any of these government pensions or allowances - Mature Age Allowance
ibncsrv	F14 Do you currently receive any of these government pensions or allowances - Service Pension
ibncdsp	F14 Do you currently receive any of these government pensions or allowances - Disability Support Pension
ibncwfp	F14 Do you currently receive any of these government pensions or allowances - Wife Pension
ibnccrp	F14 Do you currently receive any of these government pensions or allowances - Carer Payment
ibncsck	F14 Do you currently receive any of these government pensions or allowances - Sickness Allowance
ibncwdw	F14 Do you currently receive any of these government pensions or allowances - Widow Allowance
ibncsp	F14 Do you currently receive any of these government pensions or allowances - Special Benefit
ibncprt	F14 Do you currently receive any of these government pensions or allowances - Partner Allowance
ibncpnt	F14 Do you currently receive any of these government pensions or allowances - Parenting Payment
ibncyth	F14 Do you currently receive any of these government pensions or allowances - Youth Allowance
ibncsty	F14 Do you currently receive any of these government pensions or allowances - Austudy/Abstudy payment
ibncna	F14 Do you currently receive any of these government pensions or allowances - No answer
ibncnon1	F14 Do you currently receive any of these government pensions or allowances - None of these
ibncrf	F14 Do you currently receive any of these government pensions or allowances - Refused
ibncdk1	F14 Do you currently receive any of these government pensions or allowances - Dont know
ibnca1	F15a How much was the last payment you received from these sources
ibncwl	F15b How many weeks did that payment cover

a. Enter amount (whole \$)

b. Enter number of weeks

F16a Looking at SHOWCARD F16, do you currently receive any of these other pensions, allowances or other forms of assistance? PROBE: Any others? RECORD UNDER 16a

F16b For each source marked, also ask:

How much was the latest payment you received from (specify payment / allowance)?

F16c How many weeks was that payment for?

	16a	16b	16c No. of weeks
		Amount	
War Widow's / Widower's Pension (paid by DVA)	1	\$ <input type="text"/>	<input type="text"/>
Disability Pension (paid by DVA)	2	\$ <input type="text"/>	<input type="text"/>
Carer Allowance	3	\$ <input type="text"/>	<input type="text"/>
Baby Bonus	4	\$ <input type="text"/>	<input type="text"/>
Pensions or benefits paid by overseas governments	5	\$ <input type="text"/>	<input type="text"/>
Other government pensions / benefits, excluding Superannuation, Family Tax Benefit payment (specify)	8	\$ <input type="text"/>	<input type="text"/>
None of the above	7		

F17 Looking at SHOWCARD F17, I would now like to ask you a similar set of questions in relation to your income for the last financial year. This is the period covering 1st July 2008 to 30th June 2009. This might seem repetitive but it's really important that we get this information, so please take your time working it out. First, did you work for an employer for wages and salary at any time during the last financial year?

Yes 1
No 2 →F21

F18 Last financial year, what was your total wage and salary income from all jobs before tax or anything else was deducted?

Do not include income from businesses. This should be gathered at F23, rather than here.

Enter annual amount (\$)
(whole \$) →F21

Don't know 999999 →F19

ibncwar	F16a Pensions/allowances/assistance received - War Widows Pension
ibndvva	F16a Pensions/allowances/assistance received - Disability Pension
ibnccra	F16a Pensions/allowances/assistance received - Carer Allowance
ibnccb	F16a Pensions/allowances/assistance received - Baby Bonus
ibncosp	F16a Pensions/allowances/assistance received - Pensions or benefits paid by overseas governments
ibncnon2	F16a Pensions/allowances/assistance received - None of the above
ibncoth2	F16a Pensions/allowances/assistance received - Other Government pensions/benefits
ibncmob	F16a Pensions/allowances/assistance received - Mobility Allowance
ibnccrv	F16a Pensions/allowances/assistance received - Bereavement Allowance
ibncon	F16a Pensions/allowances/assistance received - Other non income support payments
ibncoal	F16a Pensions/allowances/assistance received - Other allowances
ibnccor	F16a Pensions/allowances/assistance received - Double Orphan Pension
ibnccde	F16a Pensions/allowances/assistance received - CDEP (Community Development Employment Project)
ibncref	F16a Pensions/allowances/assistance received - Refused
ibnckd2	F16a Pensions/allowances/assistance received - Dont know
ibncwara	F16b Amount of latest payment - War Widows Pension
ibnccvaa	F16b Amount of latest payment - Disability Pension
ibnccraa	F16b Amount of latest payment - Carer Allowance
ibnccbba	F16b Amount of latest payment - Baby Bonus
ibnccspa	F16b Amount of latest payment - Pensions or benefits paid by overseas governments
ibncotha	F16b Amount of latest payment - Other Government pensions/benefits
ibnccmoba	F16b Amount of latest payment - Mobility Allowance
ibnccrvva	F16b Amount of latest payment - Bereavement Allowance
ibnccona	F16b Amount of latest payment - Other non income support payments
ibnccala	F16b Amount of latest payment - Other allowances
ibnccdora	F16b Amount of latest payment - Double Orphan Pension
ibnccdea	F16b Amount of latest payment - CDEP (Community Development Employment Project)
ibncwarw	F16c Weeks payment covered - War Widows Pension
ibnccvaw	F16c Weeks payment covered - Disability Pension
ibnccraw	F16c Weeks payment covered - Carer Allowance
ibnccbww	F16c Weeks payment covered - Baby Bonus
ibnccospw	F16c Weeks payment covered - Pensions or benefits paid by overseas governments
ibncothw	F16c Weeks payment covered - Other Government pensions/benefits
ibnccmobw	F16c Weeks payment covered - Mobility Allowance
ibnccrvw	F16c Weeks payment covered - Bereavement Allowance
ibnccnaw	F16c Weeks payment covered - Other non income support payments
ibnccalaw	F16c Weeks payment covered - Other allowances
ibnccdorw	F16c Weeks payment covered - Double Orphan Pension
ibnccdew	F16c Weeks payment covered - CDEP (Community Development Employment Project)
iwsfhave	F17 Work for wages/salary LFY
iwsfga	F18 Gross financial year wages and salaries (\$) [weighted topcode]

F19 Do you know how much your income from wages and salaries was *after* tax was taken out?

Yes 1
No 2 ➔ F21

iwsfnk F19 Know total net wage/salary income LFY

F20 What was the total amount of your wage and salary income *last financial year* after tax was taken out?

Enter annual amount
(whole \$) \$

iwsfna F20 Net financial year wages and salaries (\$) [weighted topcode]

F21 During the last financial year did you, at any time:

**work in your own business or farm; or
were a silent partner in a partnership; or
were a beneficiary of a trust (excluding those that are used just for investment purposes)?**

Yes 1
No 2 ➔ F27a

ibifhave F21 Work in own business/farm/silent partner/trust beneficiary LFY

F22 Were any of your businesses incorporated businesses? (See SHOWCARD F22 for a definition of incorporated.)

This includes trusts from F21.

Yes 1
No 2 ➔ F25a

ibifinc F22 Limited liability Co/incorporated businesses

F23 Excluding dividends, in the last financial year, what was your total income from wages and salary from these incorporated businesses *before* income tax was deducted?

Please exclude wages and salary already reported.

This includes trusts from F21.

Enter amount (whole \$) \$

Recorded elsewhere 9999998
Don't know 9999999

ibifiga F23 Gross financial year incorporated business (\$) [weighted topcode]

F24a In the last financial year, did you receive any dividends from your incorporated businesses?

This includes trusts from F21.

Yes 1
No 2 ➔ F25a

ibifdiv F24a Dividends LFY

F24b Including only your share, what was your total income from dividends from your incorporated businesses *in the last financial year*?

Enter amount (whole \$) \$

Don't know 9999999

ibifdiva F24b Gross financial year business dividends (\$) [weighted topcode]

F25a In the last financial year, did you have any unincorporated businesses?

Yes 1
No 2 →F27a

ibifuinc F25a Non-LLC or Unincorporated Business LFY

NOTE: Respondents cannot answer NO to both F25a and F22. If they do, query.

F25b What was your total share of profit or loss from your unincorporated businesses or farms before income tax but after deducting business expenses in the last financial year?

Enter amount (whole \$) →F26

Don't know 9999999 →F27a

ibifuga F25b Unincorporated business financial year income (\$) [weighted topcode]

F26 INTERVIEWER RECORD: Is the amount recorded at F25b a profit or loss?

Profit 1
Loss 2
Break-even 3

ibifup F26 Profit or loss - unincorporated businesses

F27a Looking at SHOWCARD F27a, did you earn more than \$100 during the last financial year in interest from all of these sources combined?

Showcard lists: *interest from banks; other financial institutions; bonds; debentures; cash management trusts; family or other private trust funds; or interest from loans to other persons not in this household.*

Yes 1
No 2 →F28a

ioifint F27a Interest more than \$100

F27b How much did you earn from all of these sources combined? Please include only your share.

Enter full amount if over \$100
(whole \$)

Don't know 999999

ioifinta F27b Financial year interest (\$) [weighted topcode]

F28a During the last financial year did you receive any income in the form of royalties?

Yes 1
No 2 →F28c

ioifroy F28a Receive income from royalties

F28b What was the total amount of income you received from royalties? (Include only your share.)

Enter amount (whole \$)

Don't know 999999

ioifroya F28b Financial year royalties (\$) [weighted topcode]

F28c Looking at SHOWCARD F28c, during the last financial year did you receive any income or dividends from these type of investments?

Showcard lists: company shares; managed funds; property trusts.

Yes 1
No 2 →F29a

ioifdiv F28c Receive income from dividends

F28d What was the total amount of income you received from these investments? Include *only* your share from any joint investments.

Enter amount (whole \$)

Don't know 999999

ioifdiva F28d Financial year dividends (\$) [weighted topcode]

F29a During the last financial year, did you receive rent from any properties you owned or were buying?

Exclude rent or board from another member of the household, but include income from lodgers.

Yes..... 1
No 2 →F30a

ioifrnt F29a Receive rental income

F29b What was the total amount of income you received from renting properties during the last financial year after expenses were deducted? Your share only. Please exclude rent already included in business income.

Enter amount (whole \$) →F29c

Don't know 999999 →F30a

Already reported (part of business income)... 999997 →F30a

ioifrnta F29b Financial year rental (\$) [weighted topcode]

F29c INTERVIEWER RECORD: Is the amount recorded at F29b a profit or loss?

Profit..... 1
Loss 2
Break-even..... 3

ioifrntp F29c Financial year rental property - profit or loss

F30a I am now going to ask you about your receipt of government pensions, benefits and allowances during the 2008/2009 financial year.

Before I do that, can I first ask if you received any of the government bonus payments listed on SHOWCARD F30?

Yes 1
No 2 ➔ F31

F30b Which ones?

MULTI RESP

Bonus payment for pensioners, seniors, people with disability, carers and veterans (paid in December 2008) 01
Bonus payment for families (paid in December 2008) 02
Single Income Family Bonus (paid in March 2009) 03
Back to School Bonus (paid in March 2009)..... 04
Training and Learning Bonus (paid in March 2009)....05
Temporary supplement to the Education Entry Payment (paid in March 2009) 06
Farmers Hardship Bonus (paid in March or April 2009) 07
Tax bonus for Working Australians (paid around April 2009) 08

F31 Looking at SHOWCARD F31, during the last financial year, did you receive any of these government pensions or allowances? Do not include the bonus payments already mentioned.

Yes..... 1 ➔ F32a
No..... 2 ➔ F33a

igbfany	F30a Australian Government financial year bonus - Received any of these bonuses
igbfpens	F30b Australian Government financial year bonus - For Pensioners, seniors, people with disability, carers and veterans (paid in December 2008)
igbffam	F30b Australian Government financial year bonus - For families (paid in December 2008)bonus - For families (paid in December 2008)
igbfsif	F30b Australian Government financial year bonus - Single income family (paid in March 2009)
igfbts	F30b Australian Government financial year bonus - Back to school (paid in March 2009)
igftal	F30b Australian Government financial year bonus - Training and learning (paid in March 2009)
igfeep	F30b Australian Government financial year bonus - Temporary supplement to the Education Entry Payment (paid in March 2009)
igffh	F30b Australian Government financial year bonus - Farmers hardship (paid in March/April 2009)
igbfwa	F30b Australian Government financial year bonus - Tax bonus for working Australians (paid in April 2009)
igfrf	F30b Australian Government financial year bonus - Refused
igfdk	F30b Australian Government financial year bonus - Dont know
ibnfhhave	F31 Received any government pensions, benefits or allowances last financial year

F32a Which ones? [FOR EACH ONE RECEIVED, CIRCLE CORRESPONDING NUMBER IN COLUMN A BELOW.]
PROBE: Any others? (excluding Family Tax Benefit and bonus payments already mentioned)

F32b For how many weeks last financial year did you receive the [specify pension / allowance]?
[FOR EACH ONE RECEIVED, WRITE IN NUMBER IN COLUMN B BELOW.]

F32c Including only your share, how much did you receive in total income from the [specify pension / allow last financial year? Please include any lump sum advances you received, but do not include any bonu payments previously mentioned.
[FOR EACH ONE RECEIVED, WRITE IN AMOUNT IN COLUMN C BELOW.]

IF RESPONDENT DOES NOT KNOW YEARLY AMOUNT ASK:

What about the average received per fortnight from the [specify pension / allowance]? Are you able to estimate what that amount was? WRITE IN AMOUNTS IN COLUMN D BELOW.

Pension received	How answered (annually/ fortnightly)	A	B	C	OR	D
			No. of weeks received	Annual amount		Average per fortnight
ibnfap	ibnfaph	Age Pension (from Australian Govt)	01	ibnfapw	\$ ibnfapa	\$ ibnfapf
ibnfnws	ibnfnwsh	Newstart Allowance	02	ibnfnwsw	\$ ibnfnwsa	\$ ibnfnwsf
ibnfma	ibnfmah	Mature Age Allowance	03	ibnfmaw	\$ ibnfmaa	\$ ibnfmaf
ibnfsrv	ibnfsrvh	Service Pension (paid by DVA) (excl superannuation)	04	ibnfsrvw	\$ ibnfsrva	\$ ibnfsrvf
ibnfdsp	ibnfdspb	Disability Support Pension (paid by Centrelink)	05	ibnfdspw	\$ ibnfdspa	\$ ibnfdspf
ibnfdva	ibnfdvah	Disability Pension (paid by DVA)	06	ibnfdvaw	\$ ibnfdvaa	\$ ibnfdvaf
ibnfwfp	ibnfwfph	Wife Pension	07	ibnfwfpw	\$ ibnfwfpa	\$ ibnfwfpf
ibnfcrp	ibnfcrph	Carer Payment	08	ibnfcrpw	\$ ibnfcrpa	\$ ibnfcrpf
ibnfcra	ibnfcrah	Carer Allowance	09	ibnfcraw	\$ ibnfcraa	\$ ibnfcraf
ibnfsck	ibnfsckh	Sickness Allowance	10	ibnfsckw	\$ ibnfscka	\$ ibnfsckf
ibnfwdw	ibnfwdwh	Widow Allowance (including Widow B Pension)	11	ibnfwdww	\$ ibnfwdwa	\$ ibnfwdwf
ibnfwar	ibnfwarh	War Widow's / Widower's Pension (paid by DVA)	12	ibnfwarw	\$ ibnfwara	\$ ibnfwarf
ibnfsp	ibnfsph	Special Benefit	13	ibnfspw	\$ ibnfspa	\$ ibnfspf
ibnprt	ibnprtth	Partner Allowance	14	ibnprtaw	\$ ibnprtta	\$ ibnprtff
ibnfyth	ibnfythh	Youth Allowance	15	ibnfythw	\$ ibnfytha	\$ ibnfythf
ibnfsty	ibnfstyh	Austudy/Abstudy	16	ibnfstyw	\$ ibnfstya	\$ ibnfstyf
ibnfpnt	ibnfpnth	Parenting Payment	17	ibnfpntw	\$ ibnfpnta	\$ ibnfpntf
ibnfb	ibnfbbh	Baby Bonus	18	ibnfbbw	\$ ibnfbba	\$ ibnfbbf
ibnfosp	ibnfosph	Pensions / benefits from overseas governments	19	ibnfospw	\$ ibnfospa	\$ ibnfospf
ibnfoth	ibnfothh	Other government pensions / allowances (specify)	97	ibnfothw	\$ ibnfotha	\$ ibnfothf
ibnmob	ibnmobh	Mobility Allowance		ibnmobw	ibnmoba	ibnmobf
ibnfrv	ibnfrvh	Bereavement Allowance		ibnfrvw	ibnfrva	ibnfrvf
ibnfon	ibnfonh	Other non-income support		ibnfonw	ibnfona	ibnfonf
ibnfoal	ibnfoalh	Other allowances		ibnfoalw	ibnfoala	ibnfoalf
ibnfdor	ibnfdorh	Double Orphan Pension		ibnfdorw	ibnfdora	ibnfdorf
ibnfcde	ibnfcdeh	Community Development Employment Project		ibnfcdew	ibnfcdea	ibnfcdef

F33a Looking at SHOWCARD F33, during the last financial year did you receive payments from any of these sources? Include both lump sums and more regular payments but do not include any payments we have already recorded elsewhere. Also, do not include Family Tax Benefit payments.

PROBE: Any others? [Prompt for cash gifts.]

RECORD UNDER F33a

For each source marked, also ask:

F33b How much did you receive from [specify source] during the last financial year?

	F33a	F33b	
	Estimated value		Don't know
Superannuation / Rollover Fund / Annuity / Life Insurance / Allocated Pension Fund	01	\$ 	999999
Child support / Maintenance.....	02	\$ 	999999
Workers compensation / Accident or sickness insurance / Personal accident claims.....	03	\$ 	999999
Redundancy and severance payments.....	04	\$ 	999999
Inheritance / Bequests.....	05	\$ 	999999
Parents - (IF RESPONDENT LIVES WITH PARENTS, SAY: Include any money you may receive as pocket money or as a regular allowance).....	06	\$ 	999999
Other persons not in this household (but excluding any income already reported).....	07	\$ 	999999
Any other source (specify)	96	\$ 	999999
None of the above.....	97		

ioifsup	F33a Sources of payments received - Superannuation/Rollover fund/Annuity/Life insurance/Allocated pension fund
ioifcs	F33a Sources of payments received - Child Support/maintenance
ioifwkc	F33a Sources of payments received - Workers compensation/Accident or Sickness insurance
ioifrsv	F33a Sources of payments received - Redundancy and severance payments
ioifinh	F33a Sources of payments received - Inheritance/bequests
IOIFPNT	F33a Sources of payments received - Parents
ioifohh	F33a Sources of payments received - Other persons not in this household
ioiforf	F33a Sources of payments received - Refused
ioifnone	F33a Sources of payments received - None of the above
ioifodk	F33a Sources of payments received - Dont know
ioifoth	F33a Sources of payments received - Any other source
ioipri	F33a Sources of payments received - Other regular private
ioifirr	F33a Sources of payments received - Other irregular payment
ioifpub	F33a Sources of payments received - Other regular public
ioiflss	F33a Sources of payments received - Lump sum superannuation
ioiflsw	F33a Sources of payments received - Lump sum workers' compensation
ioifsupa	F33b Financial year regular superannuation/annuity payments (\$) [weighted topcode]
ioifcsa	F33b Financial year child support/maintenance (\$) [weighted topcode]
ioifwkca	F33b Financial year regular workers' compensation/accident/sickness insurance (\$) [weighted topcode]
ioifrsva	F33b Financial year redundancy and severance payments (\$)
ioifinha	F33b Financial year inheritance/bequests (\$)
ioifpnta	F33b Financial year transfers from parents (\$) [weighted topcode]
ioifohha	F33b Financial year transfers from other persons not in this household (\$) [weighted topcode]
ioifotha	F33b Financial year any other source (\$)
ioipria	F33b Estimated value - Other regular private transfers (\$)
ioifirra	F33b Financial year other irregular payments (\$)
ioifpuba	F33b Estimated value - Other regular public (\$)
ioiflssa	F33b Estimated value - Lump sum superannuation (\$)
ioiflswa	F33b Financial year workers' compensation/accident/sickness insurance lump sum payments (\$)

F34 Do you have a credit card or charge card that you use regularly (at least once a month)?
Make sure you also include any store cards you might have.

We're only interested in cards used for personal use, not business.

Note that cards linked directly to the account holder's savings are 'debit' cards and should not be recorded here.

Yes 1
No 2 → G1

icrhavem F34 Any credit, charge or store cards used at least monthly

F35 Looking at SHOWCARD F35, how often is the entire balance on all your credit cards paid off each month?

Hardly ever or never 1
Not very often 2
About half of the time 3
Most months 4
Always or almost always 5

icrpay F35 How often pays off all credit card monthly balances

G. FAMILY FORMATION

G1 Now some questions about family. How many children do you have? Please only include natural and adopted children; not step or foster children.

itcnr DV: Own non-resident children
= G1c + G1e

NUMBER OF CHILDREN

How many of these children live in this household at least 50% of the time?

itchave (a)

IF ZERO (no children ever).....→G12
ELSE (if at least one child).....proceed

How many live in another household more than 50% of the time?

(b) → LIST IN GRID AT G15a (page 32)

itcr DV: Own resident children
= G1b + G1d

How many usually live in a non-private dwelling, but spend the remainder of the time mainly with you?

(c) → LIST BELOW IN G3a

Non-private dwellings:
boarding school, university hall of residence, institution.

How many other children (not included above) live elsewhere?

(d) → LIST IN GRID AT G15a (page 32)

(e) → LIST BELOW IN G3a

G2 CHECK G1c and G1e: Are any children listed at G1c or G1e? (if so, their names should be listed at G3a)

Yes.....1 →G3b
No2 →G12

incany

G3b Could you please tell me the age of [...name(s) of child(ren) listed at G3a...]. List age in column G3b.

G3d Looking at SHOWCARD G3d, how far away from you does [...name(s) of child(ren) listed at G3a...] usually live? Record for each child in column G3d. Best estimate OK. If DK where child is living record 9.

ONLY COMPLETE G3e TO G3i FOR CHILDREN AGED 24 YEARS OR LESS.

G3g Did [...name(s) of child(ren) listed at G3a...] attend primary or high school during 2009?

G3h Do you provide or receive any financial support to help meet general everyday expenses of [name(s)]? For instance, any weekly, fortnightly or monthly child support? Exclude any payments to cover one-off or periodic expenses such as school fees or medical bills.

Probe to find out whether respondent pays or receives everyday financial support and code accordingly for each child in column G3h. If respondent both pays and receives, record net outcome. That is, on the whole, do they end up paying or receiving financial support for everyday expenses?

G3i Do you provide or receive any other financial support? For instance, for things such as school or tuition fees, or medical, dental, or clothing costs that crop up?

Probe to find out whether pays or receives 'other' financial support and code accordingly for each child in column G3i. If pays and receives, record net outcome.

First name	Age (years)	Sex	SHOWCARD A1=<5kms B2= 5-9 C3=10-19 D4= 20-49 E5= 50-99 F6= 100-499 G7= 500 plus H8= o/seas	Month and year of birth (enter 99 / 9999 if DK)	Where does ... usually live? 1= with other parent 2= with other relatives 3= fostered/adopted out 4= living independently 8= other (specify) 9= don't know	Did ... attend school in 2009? 1=Yes 2=No	<u>Everyday</u> financial support (single response) 1 = pays 2 = receives 3 = neither 8 = refused 9 = don't know	'Other' financial support (single response) 1 = pays 2 = receives 3 = neither 8 = refused 9 = don't know	
G3a	G3b	G3c	G3d	G3e	G3f	G3g	G3h	G3i	
1.	incage1	incsex1	incdst1	incmth1	incyr1	inculv1	incsty1	incrfs1	incafs1
2.	incage2	incsex2	incdst2	incmth2	incyr2	inculv2	incsty2	incrfs2	incafs2
3.	incage3	incsex3	incdst3	incmth3	incyr3	inculv3	incsty3	incrfs3	incafs3
4.	incage4	incsex4	incdst4	incmth4	incyr4	inculv4	incsty4	incrfs4	incafs4
5.	incage5	incsex5	incdst5	incmth5	incyr5	inculv5	incsty5	incrfs5	incafs5
6.	incage6	incsex6	incdst6	incmth6	incyr6	inculv6	incsty6	incrfs6	incafs6
7.	incage7	incsex7	incdst7	incmth7	incyr7	inculv7	incsty7	incrfs7	incafs7
8.	incage8	incsex8	incdst8	incmth8	incyr8	inculv8	incsty8	incrfs8	incafs8
Allowance made for up to 13 children	incage9	incsex9	incdst9	incmth9	incyr9	inculv9	incsty9	incrfs9	incafs9
	incage10	incsex10	incdst10	incmth10	incyr10	inculv10	incsty10	incrfs10	incafs10
	incage11	incsex11	incdst11	incmth11	incyr11	inculv11	incsty11	incrfs11	incafs11
	incage12	incsex12	incdst12	incmth12	incyr12	inculv12	incsty12	incrfs12	incafs12
	incage13	incsex13	incdst13	incmth13	incyr13	inculv13	incsty13	incrfs13	incafs13

G4a CHECK G3b: Are all children aged 25 years or more?

- All children are 25 or more 1 → G12
 Else 2 → G4b

incudr25 G4a Any non-resident child aged < 25

G4b CHECK G3h: Pay or receive everyday financial support?

Any code 1 or 2 in column G3h?

- Yes, code 1 or 2 listed in column G3h 1 → G5a
 No code 1 or 2 listed in column G3h 2 → G6

incrfs G4b Check everyday financial support in G3h

G5a In total, how much regular financial support do you [pay / receive] for the everyday expenses of [this child / these children]?

Note that for any children under age 18 this will typically mean child support payments.

Enter amount
(whole \$)

incrfsa G5a How much regular financial support do you pay/receive

Don't know 99999 → G6

G5b How often is this amount [paid / received]?

- Weekly 1
 Fortnightly 2
 Four weekly 3
 Each calendar month 4
 Yearly 5
 Other (please specify) 8

incrfsf G5b How often amount paid/received

G5c INTERVIEWER RECORD: Does the respondent *pay or receive* the amount at G5a?

- Pay 1
 Receive 2

incrfspr G5c Pay or receive amount at G5a

G6 CHECK G3i: Pay or receive other financial support?

Any code 1 or 2 in column G3i?

- Yes, code 1 or 2 in column G3i 1 → G7a
 No code 1 or 2 in column G3i 2 → G8a

incafs G6 Other financial support in non-resident children grid

G7a How much have you [paid / received] for specific additional expenses such as school fees, medical bills, clothing etc for [this child / these children] over the last 12 months?

Enter amount
(whole \$)

incafsa G7a Specific additional expenses

Don't know 99999

G7b INTERVIEWER RECORD: Does the respondent *pay or receive* the amount at G7a?

Pay 1
Receive 2

incafspr G7b Pay or receive amount at G7a

Questions for parents with children aged 17 or less who live elsewhere

G8a CHECK G3b: Are there any children who are aged 17 years or less?

Yes, children aged 17 or less 1 → G8b
No children aged 17 or less 2 → G12

incudr17 G8a Any non-resident children aged < 18

G8b I have already asked you if you actually provide or receive any financial support to help meet the everyday expenses of your children. Can you now tell me whether you are expected to pay or receive any financial support, either by the Child Support Agency, or because you have a private agreement, to help meet these expenses?

Yes 1
No 2 → G9a
Don't know 9 → G9a

incexs G8b Expected to provide/receive financial support for non-resident children

G8c In total, how much regular financial support are you expected to [pay / receive] for the everyday expenses of [this child / these children]?

Enter amount
(whole \$)

Don't know 99999 → G9a

inceksa G8c Amount of expected financial support for non-resident children

G8d And what period does this cover?

Week 1
Fortnight 2
Four weeks 3
Calendar month 4
Year 5
Other (please specify) 8

incexspc G8d Period covered expected financial support for non-resident children

G8e INTERVIEWER RECORD: Should the respondent *pay or receive* the amount at G8c?

Pay 1
Receive 2

inceexpr G8e Pay or receive expected financial support for non-resident children

G8f Who decided, or helped you decide, how much child support is expected to be paid?

Child Support Agency.....1
Court.....2
Other parent privately.....3
Respondent on their own.....4
Other party (*please specify*)7

incexsda G8f Who determined amount expected financial support for non-resident children

Don't know.....9
Refused8

G9a I am now going to ask you about the contact you have with [name of youngest child who usually lives elsewhere]. Looking at SHOWCARD G9a, how often do you usually see [...name...].

Daily.....1
At least once a week2
At least once a fortnight.....3
At least once a month.....4
Once every 3 months5
Once every six months6
Once a year.....7
Less than once a year8
Never9 ➔ G12

incfsee G9a Frequency see your child who lives elsewhere

G9b About how many nights each week, fortnight or month does this child usually stay overnight with you?

If respondent refers to weeks rather than nights, record number of full weeks instead of nights. If overnight contact is sparse, interviewer to get estimate for 3, 6 or 12 month period.

Zero overnight stays in a year997

Else: Record number of nights

OR

Record number of full weeks

Per week ... 1
Fortnight.... 2
4 weeks 3
3 months ... 4
6 months ... 5
Year..... 6

Per...
Fortnight....2
4 weeks....3
3 months....4
6 months....5
Year6

incngth G9b Youngest non-resident child overnight stays - answered nights or weeks

incngtn G9b Youngest non-resident child overnight stays - number of nights

incngtnp G9b Youngest non-resident child overnight stays - nights - period

incngtw G9b Youngest non-resident child overnight stays - number of weeks

incngtwp G9b Youngest non-resident child overnight stays - weeks - period

**G9c And about how many days would [...name...]
spend with you each week, fortnight or month
without staying overnight?**

If daytime contact is sparse, interviewer to get estimate for 3, 6 or 12 month period.

Zero day visits in a year **997**

Else: Record number of days

OR

Record number of full weeks

Per week1	Per...2
Fortnight.....2	Fortnight.....2
4 weeks.....3	4 weeks.....3
3 months4	3 months4
6 months5	6 months5
Year.....6	Year6

incdayh G9c Youngest non-resident child day visits - answered days or weeks

incdayn G9c Youngest non-resident child day visits - number of days

incdaynp G9c Youngest non-resident child day visits - days - period

incdayw G9c Youngest non-resident child day visits - number of weeks

incdaywp G9c Youngest non-resident child day visits - weeks - period

G10 Looking at SHOWCARD G10, how do you feel about the amount of contact you have with [...name...]?

Nowhere near enough.....1
Not quite enough2
About right3
A little too much4
Way too much.....5

incsat G10 Opinion of amount of contact with youngest non-resident child

G11a CHECK G3f: Does the youngest child on the list at G3f usually live with their other parent? (G3f=1)

Yes.....1 → G11b
No2 → G12

incchk G11a Check if youngest child lives with other parent

G11b I now have one question about [...name...]'s other parent. Looking at SHOWCARD G11b, what is the current employment status of that other parent?

Employed full-time (35+ hours per week)1
Employed part-time (less than 35 hours per week).....2
Not employed BUT is looking for work3
Neither employed NOR looking for work:
 Retired.....4
 Home duties5
 Non-working student6
 Other7-8
Don't know.....9

incesop G11b Current employment status of the other parent

**Resident parent questions
(children living with respondent)**

G12 Do you have responsibility for any grandchildren or any step or foster children who usually live in this household?

Yes 1
No 2 ➔ G14

ircstepg G12 Has responsibility for any resident step/foster/grandchild

G13 How many of these children do NOT have a natural or adoptive parent living in this household?

Record number ➔ List names of all these children at G15a (then go to G14)

None, all have natural / adoptive parent in household 97 ➔ G14

ircstepn G13 Number of resident step/foster/grandchildren with no resident natural/adopted parent

G14 CHECK G1b, G1d and G13: Are any children recorded at any of G1b, G1d or G13? (if so their names should be listed at G15a)

Yes 1 ➔ G15b
No 2 ➔ G25

irchave G14 Has resident children (includes RC without natural parent in HH)

G15b Probe for age of children listed in G15a.

ONLY COMPLETE G15c TO G15d FOR CHILDREN AGED 24 YEARS OR LESS

G15c Did [...name(s) of child(ren)] listed at G15a / attend primary or high school during 2009?

G15d Does [...]name(s) of child(ren) in grid/ have another parent who lives elsewhere? (This includes a natural or adoptive parent, but not step or foster.) IF YES, record in column G15d.

ONLY COMPLETE G15e TO G15g FOR CHILDREN WITH A PARENT LIVING ELSEWHERE.

G15e Looking at SHOWCARD G15e, how far away from you does ...'s other parent usually live? – Best estimate OK. Only use DK (9) if the person doesn't know where the other parent is living.

G15f Do you receive any financial support from, or pay any financial support to, ...'s other parent to help meet general everyday expenses of (name)? For instance, any weekly, fortnightly or monthly child support? Exclude any payments to cover one-off or periodic expenses such as school fees or medical bills. Probe to find out whether respondent pays or receives everyday financial support and code accordingly for each child in column G15f. If respondent pays and receives, record net outcome. That is, on the whole, do they end up paying or receiving financial support for everyday expenses?

G15g Do you receive any other financial support from, or pay any other financial support to, ...'s other parent? For instance, for school or tuition fees or for medical, dental, or clothing costs that crop up? Probe to find out whether pays or receives 'other' financial support and code accordingly for each child in column G15g. If both (i.e. pays and receives) record net outcome. That is, on the whole, do they end up paying or receiving?

First name	Age (years)	Did ... attend school in 2009?	Whether ... has another natural or adoptive parent who lives elsewhere	SHOWCARD		Everyday financial support (single response)	'Other' financial support (single response)					
				A1= <5kms	B2= 5-9							
Only complete following columns if child has another natural or adoptive parent who lives elsewhere												
Only complete following columns if child is aged 24 or less												
G15a	G15b	G15c	G15d	G15e	G15f	G15g						
1.	ircage1	ircsty1	ircpew1	ircdst1	ircafs1	ircafs1						
2.	ircage2	ircsty2	ircpew2	ircdst2	ircafs2	ircafs2						
3.	ircage3	ircsty3	ircpew3	ircdst3	ircafs3	ircafs3						
4.	ircage4	ircsty4	ircpew4	ircdst4	ircafs4	ircafs4						
5.	ircage5	ircsty5	ircpew5	ircdst5	ircafs5	ircafs5						
6.	ircage6	ircsty6	ircpew6	ircdst6	ircafs6	ircafs6						
7.	ircage7	ircsty7	ircpew7	ircdst7	ircafs7	ircafs7						
8.	ircage8	ircsty8	ircpew8	ircdst8	ircafs8	ircafs8						
9.	ircage9	ircsty9	ircpew9	ircdst9	ircafs9	ircafs9						
10.	ircage10	ircsty10	ircpew10	ircdst10	ircafs10	ircafs10						

Allowance made for up to 12 children

<p>G16 CHECK G15d: Parent who lives elsewhere. Any code 1s in column G15d?</p> <p>Yes, at least one code 1 in G15d.....1→G17 Else (<u>all</u> rows are code 2 in G15d).....2→G25</p>	ircpew G16 Has resident children with a parent living elsewhere (includes RC without natural parent in HH)
<p>G17 CHECK G15f: Pay or receive everyday financial support? Any code 1 or 2 in column G15f?</p> <p>Yes, code 1 or 2 in column G15f1→G18a No code 1 or 2 in column G15f2→G19</p>	ircrfs G17 Check everyday financial support in G15f
<p>G18a Excluding any payments for specific expenses, how much <u>regular</u> (everyday) <u>financial support</u> are you currently [getting from / paying to] the other parent[s] of your [child/children]?</p> <p><i>Note that for any children under age 18 this will typically mean child support payments</i></p>	
<p>Enter amount (whole \$) <input type="text" value="\$"/></p> <p>Don't know..... 99999 →G19</p>	ircrfsa G18a Amount of regular financial support from other parents of your children
<p>G18b How often is that amount paid?</p> <p>Weekly.....1 Forthnightly.....2 Four weekly3 Each calendar month.....4 Yearly5 Other (please specify)8</p>	ircrfsf G18b How often amount paid
<p>G18c INTERVIEWER RECORD: Does the respondent <i>pay or receive</i> the amount at G18a?</p> <p>Pay1 Receive2</p>	ircrfspr G18c Pay or receive amount at G16a
<p>G19 CHECK G15g: Pay or receive other financial support? Any code 1 or 2 in column G15g?</p> <p>Yes, code 1 or 2 in column G15g1→ G20a No code 1 or 2 in column G15g.....2→ G21a</p>	ircafs G19 Check other financial support in G15g
<p>G20a How much have you [received from / paid to] the other parent[s] of your [child/children] for <u>specific additional expenses</u> such as school fees, medical bills, clothing etc over the last 12 months?</p> <p>Enter amount (whole \$) <input type="text" value="\$"/></p> <p>Don't know..... 99999</p>	ircafsa G20a Received from other parents for additional expenses

G20b INTERVIEWER RECORD: Does the respondent *pay* or *receive* the amount at G20a?

Pay 1
Receive 2

irc afspr G20b Pay or receive amount at G20a

Questions for parents with children aged 17 or less with another parent who lives elsewhere

G21a CHECK G15b and G15d: Any children aged 17 or less AND who have another parent living elsewhere (code 1 in column G15d)?

Yes, 17 or less in G15b AND code 1 in G15d 1 → G21b
Else 2 → G25

irc pew17 G21a Has resident children aged < 18 with a parent living elsewhere (inc RC without natural parent in HH)

G21b I have already asked you if you actually provide or receive any financial support to help meet the everyday expenses of your children. Can you now tell me whether you are expected to pay or receive any financial support, either by the Child Support Agency, or because you have a private agreement, to help meet these expenses?

Yes 1
No 2 → G22a
Don't know 9 → G22a

irc exs G21b Expected to provide/receive financial support for resident children

G21c In total, how much regular financial support are you expected to [pay / receive] for the everyday expenses of [this child / these children]?

Enter amount
(whole \$)

Don't know 99999 → G22a

irc exsa G21c Amount of expected financial support for resident children

G21d And what period does this cover?

Week 1
Fortnight 2
Four weeks 3
Calendar month 4
Year 5
Other (please specify) 8

irc exspc G21d Period covered expected financial support for resident children

G21e INTERVIEWER RECORD: Should the respondent *pay* or *receive* the amount at G21c?

Pay 1
Receive 2

irc exspr G21e Pay or receive expected financial support for resident children

G21f Who decided, or helped you decide, how much child support is expected to be paid?

Child Support Agency.....1
Court.....2
Other parent privately.....3
Respondent on their own.....4
Other party (*please specify*)7

Don't know.....9
Refused8

ircexsda G21f Who determined amount expected financial support for resident children

G22a I am now going to ask you about the contact

[name of youngest child with parent living elsewhere] has with [his / her] other parent.

Looking at SHOWCARD G22a, how often does [...name...] usually see [his / her] other parent?

Daily.....1
At least once a week2
At least once a fortnight.....3
At least once a month.....4
Once every 3 months5
Once every six months6
Once a year7
Less than once a year8
Never9 ➔ G25

ircfsop G22a Frequency child sees the other parent

G22b And about how many nights each week, fortnight or month does [...name...] usually stay overnight with their other parent?

If respondent refers to weeks rather than nights, record number of full weeks instead of nights.

If overnight contact is sparse, interviewer to get estimate for 3, 6 or 12 month period.

Zero overnight stays in a year997

Else: Record number of nights

- Per week ... 1
Fortnight.... 2
4 weeks.... 3
3 months ... 4
6 months ... 5
Year..... 6

OR

Record number of full weeks

- Per...
Fortnight.....2
4 weeks.....3
3 months4
6 months5
Year6

ircngth G22b Youngest resident child overnight stays with other parent - answered nights or weeks

ircngtn G22b Youngest resident child overnight stays with other parent - number of nights

ircngtnp G22b Youngest resident child overnight stays with other parent - nights - period

ircngtw G22b Youngest resident child overnight stays with other parent - number of weeks

ircngtwp G22b Youngest resident child overnight stays with other parent - weeks - period

G22c And about how many days would [...] name [...] spend with their other parent each week, fortnight or month without staying overnight?

If daytime contact is sparse, interviewer to get estimate for 3, 6 or 12 month period.

Zero day visits in a year **997**

Else:	Record number of days	OR	Record number of full weeks
	<input type="text"/>		<input type="text"/>
Per week	1	Per ...	
Fortnight	2	Fortnight....	2
4 weeks	3	4 weeks.....	3
3 months	4	3 months	4
6 months ...	5	6 months ...	5
Year.....	6	Year	6

ircdayh	G22c Youngest resident child day visits with other parent - answered days or weeks
ircdayn	G22c Youngest resident child day visits with other parent - number of days
ircdaynp	G22c Youngest resident child day visits with other parent - days - period
ircdayw	G22c Youngest resident child day visits with other parent - number of weeks
ircdaywp	G22c Youngest resident child day visits with other parent - weeks - period

G23 Looking at SHOWCARD G23, how do you feel about the amount of contact [...] name [...] has with their other parent?

Nowhere near enough	1
Not quite enough	2
About right	3
A little too much	4
Way too much.....	5

ircsat	G23 Opinion of amount of contact youngest resident child has with non-resident parent
---------------	---

G24 Looking at SHOWCARD G24, what is the current employment status of that other parent?

Employed – usually works 35+ hours per week	1
Employed – usually works less than 35 hours per week.....	2
Not employed <u>BUT</u> is looking for work	3
Neither employed <u>NOR</u> looking for work:	
Retired.....	4
Home duties	5
Non-working student.....	6
Other.....	7-8
Don't know.....	9

ircesop	G24 Current employment status of youngest resident child's other parent
----------------	---

Remaining child-related questions

G25 SEX FILTER

- Male 1 → G26
Female 2 → G27

iftsex G25 Sex Filter

G26 CONFIRM AGE:

Just to confirm, are you ...

- less than 18 years of age? 1 → H1a
18-54 years of age? 2 → G28
55 years or older? 3 → H1a

iicagem G26 Confirm age for male respondent

G27 CONFIRM AGE:

Just to confirm, are you ...

- less than 18 years of age? 1 → H1a
18-44 years of age? 2 → G28
45 years or older? 3 → H1a

iicagef G27 Confirm age for female

G28 Now a question about any future children.

Using the scale on SHOWCARD G28, I want you to pick a number between 0 and 10 to show how you feel about having [a child / more children] in the future.

Read if necessary

(The more definite you are that you would like to have [a child / more children], the higher the number you should pick. The more definite you are that you do not want to have [a child / more children], the lower the number.)

This only includes natural children, not adopted.

Record liking from 0 to 10

iiclike G28 Like to have more children in the future

G29 And how likely are you to have [a child / more children] in the future?

Again, pick a number between 0 and 10 using the scale on SHOWCARD G29. The more likely it is that you will have [a child / more children], the higher the number you should pick. The less likely it is, the lower the number.

This only includes natural children, not adopted.

Record likelihood from 0 to 10

iicexpt G29 How likely to have a child/more children in the future

G30 CHECK G29

G29 is 5 or less

(unsure / unlikely to have a child)..... 1→H1a

G29 is 6 or more 2→G31

iicprob G30 Is likely to have a child in the future

G31 How many (more) children do you intend to have?Enter intended number of children
excluding any already had

iicn

G31 How many more children do you intend to have

H. PARTNERING / RELATIONSHIPS

H1a Looking at SHOWCARD H1a, have any of these changes in marital status happened to you since [date of last interview]?

Circle code at H1a below.

H1b When did this change happen?

Where event has occurred more than once, record date of most recent occurrence.

H1a: Status Change

H1b: Month/Year

	MULTI RESP	Month	Year
Got married (in a registered marriage).....	1	<input type="text"/>	2 0 <input type="text"/>
Separated (from a registered marriage).....	2	<input type="text"/>	2 0 <input type="text"/>
Got divorced (record date divorce was finalised).....	3	<input type="text"/>	2 0 <input type="text"/>
Reunited with spouse.....	4	<input type="text"/>	2 0 <input type="text"/>
Was widowed	5	<input type="text"/>	2 0 <input type="text"/>
None of the above.....	7		

H2 CHECK H1a: Is marital status separated? (i.e. H1a=2)

Yes, H1a=code 2..... 1 → H3

No 2 → H4

H3 Thinking of your most recent separation, whose decision was it to finally separate? Mostly yours, mostly your partner's, or was it mostly a joint decision?

Mostly respondent's..... 1

Mostly partner's 2

Joint..... 3

H4 Looking at SHOWCARD H4, which of these best describes your current marital status? And by 'married' we mean in a registered marriage.

Married (in a registered marriage)..... 1 → H6

Separated, but not divorced 2 → H8

Divorced 3 → H8

Widowed..... 4 → H8

Never married but living with someone in a relationship 5 → H9

Never married and not living with someone in a relationship 6 → H5

imschgm	CPQ:H1a Changes to marital status - Got married
imschgp	CPQ:H1a Changes to marital status - Separated
imschgd	CPQ:H1a Changes to marital status - Got divorced
imschgrs	CPQ:H1a Changes to marital status - Reunited with spouse
imschgw	CPQ:H1a Changes to marital status - Was widowed
imschgn	CPQ:H1a Changes to marital status - No answer
imschgn	CPQ:H1a Changes to marital status - None of the above
imschgrf	CPQ:H1a Changes to marital status - Refused
imschgd	CPQ:H1a Changes to marital status - Dont know
imscmtmr	CPQ:H1b Month when this change happened - Got married
imscmtsp	CPQ:H1b Month when this change happened - Separated
imscmtdv	CPQ:H1b Month when this change happened - Got divorced
imscmtrs	CPQ:H1b Month when this change happened - Reunited with spouse
imscmtwd	CPQ:H1b Month when this change happened - Was widowed
imscyrmr	CPQ:H1b Year when this change happened - Got married
imscyrsp	CPQ:H1b Year when this change happened - Separated
imscyrdv	CPQ:H1b Year when this change happened - Got divorced
imscyrrs	CPQ:H1b Year when this change happened - Reunited with spouse
imscyrwd	CPQ:H1b Year when this change happened - Was widowed

imssli CPQ:H2 Check H1a for separated since last interview

imssdn CPQ:H3 Separation decision maker

imrcms CPQ:H4/NPQ:H1 Current marital status

H5 CHECK G26 OR G27:

G26 or G27=1 (less than 18 years of age).... 1 → K1
 G26 or G27=2 or 3 (18 years and over)..... 2 → H11

ichkage CPQ:H5/NPQ:H2 Check G31 for age > 17 or living independently

H6 Looking at SHOWCARD H6, which of the following best describes your current living circumstances?

- Married and living with spouse 1
 Married, but spouse is in an institution (e.g., nursing home, gaol) 2
 Married, but living with spouse less than half the time owing to work / other commitments 3

imrclc CPQ:H6/NPQ:H3 Current living circumstances

H7 CHECK H1a and H4: Is marital status unchanged and respondent currently married? (ie H1a=7 and H4=1)

- Yes 1 → K1
 No 2 → H12

ichkms CPQ:H7 Check marital status unchanged and currently married

Non-marital relationships**H8 Are you currently living with someone in a relationship?**

- Yes 1
 No 2 → H11

iordf CPQ:H8/NPQ:H7a Currently living with someone in a relationship

H9 Looking at SHOWCARD H9, how likely are you to marry your current partner?

- Very likely 1 → H12
 Likely 2 → H12
 Not sure 3
 Unlikely 4
 Very unlikely 5
 Prefer not to disclose 8-9

iordfmar CPQ:H9/NPQ:H8 How likely to marry current partner

H10 Still looking at SHOWCARD H9, even though you [are unsure about marrying / don't think you will marry] your current partner, how likely it is that you will ever marry or re-marry in the future?

- Very likely 1
 Likely 2
 Not sure 3
 Unlikely 4
 Very unlikely 5
 Prefer not to disclose 8-9

iorotmrm CPQ:H10/NPQ:H9 How likely to ever marry or remarry in future, currently defacto

NOW GO TO H12

H11 Looking at SHOWCARD H9, how likely is it that you will ever [marry / re-marry] in the future?

Very likely	1
Likely	2
Not sure	3
Unlikely	4
Very unlikely	5
Prefer not to disclose.....	8-9

iormrm

CPQ:H11/NPQ:H10 Likelihood of ever marrying or remarrying in future, not currently defacto

NOW GO TO H14

Relationships since last interview

H12 Were you living with your current [partner / spouse] when we last interviewed you; that is, on [date of last interview]?

Yes	1 → K1
No	2

iprlcp

CPQ:H12 Living with current partner/spouse when last interviewed

H13 When did you start *living* with your current partner?

We are interested here in the date people moved in together and not the date they got married.

Month	Year						
Record month and year	<table><tr><td><input type="text"/></td><td><input type="text"/></td><td>2</td><td>0</td><td><input type="text"/></td><td><input type="text"/></td></tr></table>	<input type="text"/>	<input type="text"/>	2	0	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	2	0	<input type="text"/>	<input type="text"/>		

iprlcpmt

CPQ:H13 Month when started living with partner

iprlcpyr

CPQ:H13 Year when started living with partner

H14 Were you living with a partner when we last interviewed you; that is, on [date of last interview]?

Yes	1
No	2 → H16

iprlpli

CPQ:H14 Living with a partner when last interviewed

H15 When did you stop living together with that former partner?

Month	Year						
Record month and year	<table><tr><td><input type="text"/></td><td><input type="text"/></td><td>2</td><td>0</td><td><input type="text"/></td><td><input type="text"/></td></tr></table>	<input type="text"/>	<input type="text"/>	2	0	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	2	0	<input type="text"/>	<input type="text"/>		

iprslfmt

CPQ:H15 Month when stopped living with former partner

iprslfyr

CPQ:H15 Year when stopped living with former partner

H16 An important social change in recent years has been the choices people make about relationships and marriage. Since [date of last interview] have you ever started living with someone (other than your current partner) in a relationship that lasted at least one month?

Yes	1
No	2 → K1

iprsls

CPQ:H16 Since last interview started living with someone in relationship lasting at least 1 month

H17 How many times since [date of last interview] have you started living with someone in a relationship that lasted at least one month (not including your current partner)?

Record number

1

iprsln CPQ:H17 Number of times started living with someone in relationship that lasted at least 1 month

H18 (Thinking about the most recent relationship, not including your current partner), in what month and year did you start living together?

If more than one recorded at H17 ask respondent to answer for the most recent relationship, not including their current partner.

Month Year
Record month and year

--	--

2	0	
---	---	--

iprslrmt CPQ:H18 Month started living together
in most recent relationship
iprslryr CPQ:H18 Year started living together in
most recent relationship

H19 And when did you stop living together?

Month Year
Record month and year

--	--

2	0	
---	---	--

iprflrmt CPQ:H19 Month stopped living together
in most recent relationship
iprflryr CPQ:H19 Year stopped living together in
most recent relationship

H20 CHECK H17: Are there 2 or more relationships recorded at H17?

Yes, 2 or more..... 1 → H21
No 2 → K1

ichktwo CPQ:H20 Check H26 - 2 or more relationships

H21 Can you tell me about the relationship you had before this last one: when did you start living together? And when did you stop living together?

Date started living together.

Month Year
Record month and year

--	--

2	0		
---	---	--	--

iprsl12mt CPQ:H21 Month started living together
in relationship before last
iprsl12yr CPQ:H21 Year started living together in
relationship before last

Date stopped living together.

Month Year
Record month and year

--	--

2	0	
---	---	--

iprfl12mt CPQ:H21 Month stopped living together
in relationship before last
iprfl12yr CPQ:H21 Year stopped living together in
relationship before last

K. HEALTH AND HEALTH CARE

K1 Now some questions about your health and your views on life.

In general, how would you rate your health? Is it excellent, very good, good, fair or poor?

- | | |
|-----------------|-------|
| Excellent..... | 1 |
| Very good | 2 |
| Good..... | 3 |
| Fair | 4 |
| Poor..... | 5 |
| Don't know..... | 9 →K3 |

iherate K1 In general, how would you rate your health (PQ)

K2 What do you think is the per cent chance that your health will

[**still be excellent** (if currently excellent) /
still be very good or better (if currently very good) /
still be good or better (if currently good) /
still be fair or better (if currently fair) /
have improved significantly (if currently poor)]

four years from now?

Your answer should range between 0%, which means there is no chance, and 100%, which means it is absolutely certain.

Record % %

ihelths K2 Per cent chance health same in 4 years time

Don't know..... .999

K3 CONFIRM OR CHECK AGE:

- | | |
|--------------------------|--------|
| If aged under 65 | 1 →K4a |
| If age 65-89..... | 2 →K4b |
| If aged 90 or older..... | 3 →K5a |

iheagec K3 Confirm age range

K4a How likely do you think it is that you will live to be 75 or more? Is it very likely, likely, unlikely or very unlikely?

- | | |
|---------------------|--------|
| Very likely..... | 1 →K5a |
| Likely | 2 →K5a |
| Unlikely..... | 3 →K5a |
| Very unlikely | 4 →K5a |
| Don't know..... | 9 →K5a |

ihelv75 K4 How likely will live to 75 or more, aged less than 65

K4b How likely do you think it is that you will live to be [80 (if aged <70) /

85 (if aged 70-74) /
90 (if aged 75-79) /
95 (if aged 80-84) /
100 (if aged 85-89)] or more?

Is it very likely, likely, unlikely or very unlikely?

Very likely	1
Likely	2
Unlikely	3
Very unlikely	4
Don't know.....	9

ihelv15m K4b How likely will live another 10 to 15 years, aged 65-89

ihelth K5a Long term health condition

K5a Looking at SHOWCARD K5, do you have any long-term health condition, impairment or disability (such as these) that restricts you in your everyday activities, and has lasted or is likely to last, for 6 months or more?

Yes	1
No.....	2 ➔ K19a

K5b Which ones? PROBE: Any others?

MULTI RESP

Sight problems not corrected by glasses / lenses.....	<u>01</u>
Hearing problems	<u>02</u>
Speech problems.....	<u>03</u>
Blackouts, fits or loss of consciousness	<u>04</u>
Difficulty learning or understanding things.....	<u>05</u>
Limited use of arms or fingers	<u>06</u>
Difficulty gripping things.....	<u>07</u>
Limited use of feet or legs	<u>08</u>
A nervous or emotional condition which requires treatment	<u>09</u>
Any condition that restricts physical activity or physical work (e.g., back problems, migraines)... <u>10</u>	
Any disfigurement or deformity.....	<u>11</u>
Any mental illness which requires help or supervision	<u>12</u>
Shortness of breath or difficulty breathing	<u>13</u>
Chronic or recurring pain	<u>14</u>
Long term effects as a result of a head injury, stroke or other brain damage	<u>15</u>
A long-term condition or ailment which is still restrictive even though it is being treated or medication being taken for it.....	<u>16</u>
Any other long-term condition such as arthritis, asthma, heart disease, Alzheimer's disease, dementia etc.....	<u>17</u>

ihespnc	CPQ:K5b/NPQ:K6a Which long term health conditions - Sight problems not corrected by glasses / lenses
ihehear	CPQ:K5b/NPQ:K6a Which long term health conditions - Hearing problems
ihespch	CPQ:K5b/NPQ:K6a Which long term health conditions - Speech problems
ihebflc	CPQ:K5b/NPQ:K6a Which long term health conditions - Blackouts, fits or loss of consciousness
iheslu	CPQ:K5b/NPQ:K6a Which long term health conditions - Difficulty learning or understanding things
iheluaf	CPQ:K5b/NPQ:K6a Which long term health conditions - Limited use of arms or fingers
ihedgt	CPQ:K5b/NPQ:K6a Which long term health conditions - Difficulty gripping things
ihelufl	CPQ:K5b/NPQ:K6a Which long term health conditions - Limited use of feet or legs
ihenec	CPQ:K5b/NPQ:K6a Which long term health conditions - A nervous or emotional condition which requires treatment
ihecrpa	CPQ:K5b/NPQ:K6a Which long term health conditions - Any condition that restricts physical activity or physical work (e.g. back problems, migraines)
ihedisf	CPQ:K5b/NPQ:K6a Which long term health conditions - Any disfigurement or deformity
ihemirh	CPQ:K5b/NPQ:K6a Which long term health conditions - Any mental illness which requires help or supervision
ihesbdb	CPQ:K5b/NPQ:K6a Which long term health conditions - Shortness of breath or difficulty breathing
ihecrp	CPQ:K5b/NPQ:K6a Which long term health conditions - Chronic or recurring pain
ihehibd	CPQ:K5b/NPQ:K6a Which long term health conditions - Long term effects as a result of a head injury, stroke or other brain damage
ihemed	CPQ:K5b/NPQ:K6a Which long term health conditions - A long-term condition or ailment which is still restrictive even though it is being treated
iheoth	CPQ:K5b/NPQ:K6a Which long term health conditions - Any other long-term condition such as arthritis, asthma, heart disease, Alzheimers, dementia etc
iherf	K5b Which long term health conditions - Refused
ihedk	K5b Which long term health conditions - Dont know

K6 Did you first develop [this condition / any of these conditions] after [date of last interview]?

Yes 1
No 2

ihedevli CPQ:K6 Did you first develop this condition after date of last interview

K7 [Does your condition / Do your conditions] limit the type of work or the amount of work you can do?

Yes 1
No 2 → K9
Unable to do any work 3 → K9

ihehwk K7 Does condition limit the type or amount of work you can do

K8 Using the scale on SHOWCARD K8, could you pick a number between 0 and 10 to indicate how much your condition[s] limit[s] the amount of work you can do?

An answer of 0 means “not at all” and an answer of 10 means you are “unable to do any work”.

Enter number from 0 to 10

ihehldg K8 How much condition limits the amount of work you can do

Difficulties caused by health conditions

K9 Look now at SHOWCARD K9. You only need to answer “yes” or “no”. Because of the condition[s] you have told me about, do you ever have difficulty with....

a) self care activities?

Yes 1
No 2

ihedifsc K9a Health condition causes difficulties with self-care activities

b) mobility activities?

Yes 1
No 2

ihedifma K9b Health condition causes difficulties with mobility activities

c) communicating in your own language?

Yes 1
No 2

ihedifla K9c Health condition causes difficulties with communicating in your own language

K10a Still looking at the types of tasks listed on SHOWCARD K9, do you ever need help or supervision with any of these tasks because of the condition[s] you have told me about?

Yes 1
No 2 → K12a

ihehlpco K10a Health condition necessitates needing help or supervision

K10b Which ones?

MULTI RESP

Self-care 1
Mobility 2
Communication in own language 3

iheconsc K10b Needs help with or supervision - Self-care
iheconma K10b Needs help with or supervision - Mobility
iheconla K10b Needs help with or supervision - Communication in own language

K11a Do you always need help with any of these tasks?

Yes 1
No 2 → K12a

K11b Which ones?

MULTI RESP

Self-care 1
Mobility 2
Communication in own language 3

K12a I now have some questions about different types of aids you might use because of your condition[s]. Looking at SHOWCARD K12, do you use any aids such as these?

Yes 1
No 2 → K13

K12b Which ones?

MULTI RESP

Mobility aids 1
Self-care aids 2
Non-electronic communication aids 3
Electronic communication aids 4

K13 Looking at SHOWCARD K13, has your home been modified in any way because of your condition[s]?

Yes 1
No 2

K14 CONFIRM OR CHECK: Is respondent aged 65 years or older?

Yes (65 years or older) 1 → K19a
No (less than 65 years) 2 → K15a

K15a Because of the condition[s] you have told me about, do you currently have any difficulties with employment, such as those listed on SHOWCARD K15?

Yes 1
No 2 → K16

K15b Which difficulties on SHOWCARD K15 currently apply to you?

MULTI RESP

Permanently unable to work 1
Restricts type of job can do 2
Restricts number of hours that can be worked 3
Makes it more difficult to change jobs / get a better job / find a suitable job 4
Need additional time off work 5
Need ongoing assistance / supervision at work 6
Need special equipment / arrangements 7
Other employment difficulties 8

ihealway K11a Do you always need help with any of these tasks?

ihealsc K11b Always need help with - Self-care
ihealmo K11b Always need help with - Mobility
ihealla K11b Always need help with - Communication in own language

iheahids K12a Looking at SHOWCARD K12, do you use any aids such as?

iheamob K12b Which ones? - Mobility aids
iheacare K12b Which ones? - Self-care aids
iheaneco K12b Which ones? - Non-electronic communication aids
iheaecom K12b Which ones? - Electronic communication aids

ihehmod K13 Looking at SHOWCARD K13, has your home been modified in any of these ways to help you cope with your condition[s]?

ihechage K14 CONFIRM WITH RESPONDENT. Can I just check your age again?

iheemdif K15a Because of the condition[s] you have told me about, do you currently have any difficulties with employment, such as those listed on SHOWCARD K15?

ihepuwrk K15b Long term health conditions impacts on employment - Permanently unable to work
iherjob K15b Long term health conditions impacts on employment - Restricts type of job can do
iherhour K15b Long term health conditions impacts on employment - Restricts number of hours that can be worked
ihechjob K15b Long term health conditions impacts on employment - Makes it more difficult to change jobs / get a better job / find a suitable job
ihetowrk K15b Long term health conditions impacts on employment - Need additional time off work
iheonas K15b Long term health conditions impacts on employment - Need ongoing assistance / supervision at work
ihespeq K15b Long term health conditions impacts on employment - Need special equipment / arrangements
iheothed K15b Long term health conditions impacts on employment - Other employment difficulties

K16 Are you currently attending school or enrolled in a course of study to obtain an educational qualification?

If on holidays, but expects to be attending school or studying when holidays finish, code as "YES".

Yes 1
No 2 → K18a

K17a Because of the condition[s] you have told me about, do you currently have any difficulties with education, such as those listed on SHOWCARD K17?

Yes 1
No 2 → K19a

K17b Which ones? MULTI RESP

Need additional time off school / study 1 → K19a
Have to attend special classes / school 2 → K19a
Need ongoing assistance or supervision 3 → K19a
Restricted in the number of hours can study 4 → K19a
Need special equipment, modified environment, or other special arrangements 5 → K19a
General learning difficulties 6 → K19a
Other difficulties 8 → K19a

K18a Would you like to be enrolled at school or undertaking further study?

Yes, would like to be studying 1
No, would not like to be studying 2 → K19a

K18b Are you not enrolled in an educational course because of the condition[s] you have told me about?

Yes 1
No, other reason 2

iheedqua K16 Are you currently attending school or enrolled in a course of study to obtain an educational qualification?

iheeddif K17a Because of the condition[s] you have told me about, do you currently have any difficulties with education, such as those listed on SHOWCARD K17?

ihetosch K17b Which ones? - Need additional time off school / study

iheatpsc K17b Which ones? - Have to attend special classes / school

iheeonas K17b Which ones? - Need ongoing assistance or supervision

ihereshr K17b Which ones? - Restricted in the number of hours can study

ihecspeq K17b Which ones? - Need special equipment, modified environment, or other special arrangements

iheldif K17b Which ones? - General learning difficulties

iheodif K17b Which ones? - Other difficulties

ihelstud K18a Would you like to be enrolled at school or undertaking further study?

ihenostu K18b Are you not enrolled in an educational course because of the condition(s) you have told me about?

Serious illness conditions**K19a I am now going to ask some questions about some specific medical conditions. Looking at SHOWCARD K19, have you been told by a doctor or nurse that you have any of these conditions? Please only include current conditions that have lasted or are likely to last for six months or more.**

Yes 1
No 2 → K22
Don't know 9 → K22

iheany K19a Ever been told by a doctor or nurse that you have any of these serious illnesses

K19b Which ones?

PROBE: Any others?	MULTI RESP
Arthritis or osteoporosis.....	<u>01</u>
Asthma	<u>02</u>
Any type of cancer.....	<u>03</u>
Chronic bronchitis or emphysema	<u>04</u>
Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)	<u>05</u>
Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)	<u>06</u>
Depression or anxiety.....	<u>07</u>
Other mental illness.....	<u>08</u>
Heart disease	<u>09</u>
High blood pressure or hypertension.....	<u>10</u>
Any other serious circulatory condition (e.g., stroke, hardening of the arteries).....	<u>11</u>

iheart	K19b Diagnosed with serious illness - Arthritis or osteoporosis
iheast	K19b Diagnosed with serious illness - Asthma
ihecan	K19b Diagnosed with serious illness - Any type of cancer
ihecbe	K19b Diagnosed with serious illness - Chronic bronchitis or emphysema
ihedil	K19b Diagnosed with serious illness - Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)
ihedi2	K19b Diagnosed with serious illness - Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)
ihedep	K19b Diagnosed with serious illness - Depression or anxiety
iheomi	K19b Diagnosed with serious illness - Other mental illness
ihehcd	K19b Diagnosed with serious illness - Heart disease
ihehbp	K19b Diagnosed with serious illness - High blood pressure or hypertension
iheoc	K19b Diagnosed with serious illness - Any other serious circulatory condition (eg stroke, hardening of the arteries)
iherf2	K19b Diagnosed with serious illness - Refused
ihedk2	K19b Diagnosed with serious illness - Dont know

K20a Do you regularly see a doctor or other medical practitioner about [this condition / any of these conditions]?

Yes	1
No.....	2 → K21a
Don't know.....	9 → K21a

ihersd	K20a Regularly sees a doctor or other medical practitioner about these serious illnesses
--------	--

K20b Approximately how often do you see a doctor or medical practitioner about your condition?

If more than one condition, obtain an answer for the condition for which the respondent most regularly sees a medical practitioner.

At least monthly	1
Less often than monthly, but at least once every 6 months.....	2
Less often than once every 6 months, but at least once a year.....	3
Less often than yearly	4
Don't know	9

ihesdf	K20b Approximately how often sees doctor or other medical practitioner about these serious illnesses
--------	--

K21a Do you take any prescription medications for [this condition / any of these conditions]?

Yes	1
No.....	2 → K22
Don't know.....	9 → K22

ihinx	K21a Takes any prescription medications for these conditions
-------	--

K21b CHECK K19b:

If only one condition on K19b	1 → K22
If more than one condition on K19b	2 → K21c

ihensi	K21b Check if has one or more than serious illness condition at K19
--------	---

K21c For which conditions do you take this prescription medication? *MULTI RESP*

Arthritis or osteoporosis.....	<u>01</u>
Asthma	<u>02</u>
Any type of cancer.....	<u>03</u>
Chronic bronchitis or emphysema	<u>04</u>
Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)	<u>05</u>
Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)	<u>06</u>
Depression or anxiety.....	<u>07</u>
Other mental illness.....	<u>08</u>
Heart disease	<u>09</u>
High blood pressure or hypertension.....	<u>10</u>
Any other serious circulatory condition (e.g., stroke, hardening of the arteries).....	<u>11</u>
Don't know.....	<u>99</u>

ihepmart	K21c Takes prescription medication for - Arthritis or osteoporosis
ihepmast	K21c Takes prescription medication for - Asthma
ihepmcan	K21c Takes prescription medication for - Any type of cancer
ihepmcbe	K21c Takes prescription medication for - Chronic bronchitis or emphysema
ihepmdi1	K21c Takes prescription medication for - Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)
ihepmdi2	K21c Takes prescription medication for - Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)
ihepmdep	K21c Takes prescription medication for - Depression or anxiety
ihepmomi	K21c Takes prescription medication for - Other mental illness
ihepmhd	K21c Takes prescription medication for - Heart disease
ihepmhbp	K21c Takes prescription medication for - High blood pressure or hypertension
ihepmoc	K21c Takes prescription medication for - Any other serious circulatory condition (eg stroke, hardening of the arteries)
ihepmrf	K21c Takes prescription medication for - Refused
ihepmdk	K21c Takes prescription medication for - Dont know

Retrospective questions on childhood health

K22 These next questions ask about your health during childhood; that is, before you turned 15 years of age. How would you describe your health during that time? Was it excellent, very good, good, fair or poor?

Excellent.....	<u>1</u>
Very good	<u>2</u>
Good.....	<u>3</u>
Fair	<u>4</u>
Poor.....	<u>5</u>
Health varied [unprompted]	<u>6</u>
Don't know.....	<u>9</u>

ihech K22 Health rating during childhood

K23 When you were growing up, did you ever miss a month of school because of a health problem? That is, were you absent from school for 30 or more consecutive days?

Yes	<u>1</u>
No	<u>2</u>
Don't know.....	<u>9</u>

ihechmm K23 Missed a month of school for health problems

K24 Were any of your parents or guardians smokers at any stage during your childhood?

Yes	<u>1</u>
No	<u>2</u>
Don't know.....	<u>9</u>

ihechps K24 Parents smoked during your childhood

HEALTH CARE UTILISATION: Concession cards & private health insurance

K25 Now some questions about health care services you may have used.

Look now at SHOWCARD K25. Do you have any of these cards?

MULTI RESP

Department of Veterans' Affairs Orange Treatment Entitlement Card	1
Department of Veterans' Affairs <u>White</u> Treatment Entitlement Card.....	2
Department of Veterans' Affairs <u>Gold</u> Treatment Entitlement Card.....	3
Health Care Card.....	4
Pensioner Concession Card.....	5
Commonwealth Seniors Health Card	6
No – do not have any of these cards.....	7
Don't know.....	9

iphvaora	K25 Do you have a Department of Veterans Affairs Orange Treatment Entitlement Card?
iphvawhi	K25 Do you have a Department of Veterans Affairs White Treatment Entitlement Card?
iphvagld	K25 Do you have a Department of Veterans Affairs Gold Treatment Entitlement Card?
iphhcc	K25 Do you have a Health Care Card?
iphpcc	K25 Do you have a Pensioner Concession Card?
iphcshc	K25 Do you have a Commonwealth Seniors Health Card?
iphnone	K25 None of these Health Care Cards
iphref	K25 Health Care Cards - Refused
iphdk	K25 Health Care Cards - Dont know

K26 Apart from Medicare, are you currently covered by private health insurance?

Yes	1
No.....	2 → K29
Don't know.....	9 → K31

iphpriin	K26 Apart from Medicare, are you currently covered by private health insurance?
----------	---

K27 Are you covered by family, couple, sole parent or single membership?

Family membership	1
Couple membership	2
Sole parent membership	3
Single membership.....	4
Don't know.....	9 → K31

iphcfam	K27 Are you covered by family, couple, sole parent or single membership?
---------	--

**K28 What type of health insurance do you have?
Hospital cover only, extras cover only, or both hospital and extras cover?**

'Extras' cover is also known as 'ancillary' cover. Extras include such things as dental care, physiotherapy, chiropractic services, and podiatry.	
Hospital cover only	1 → K31
Extras cover only.....	2 → K29
Both hospital and extras cover	3 → K31
Don't know.....	9 → K31

iphctype	K28 What type of health insurance do you have? Hospital cover only, extras cover only, or both hospital and extras cover?
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K29 Have you ever had private health insurance for hospital cover in the past?

Yes	1
No.....	2 → K31
Don't know.....	9 → K31

iphpast	K29 Have you ever had private health insurance for hospital cover in the past?
---------	--

K30 Looking at SHOWCARD K30, how long ago did you drop your hospital cover?

Less than one year ago.....	1
One to less than two years ago.....	2
Two to less than five years ago.....	3
Five to less than 10 years ago.....	4
Ten or more years ago	5
Don't know.....	9

iphdrop1 K30 How long ago did you drop your hospital cover?

**HEALTH CARE UTILISATION:
Doctor and hospital visits**

K31 Looking at SHOWCARD K31, how long has it been since you last saw a dentist?

Less than 6 months ago	1
Six to less than 12 months ago	2
One to less than 2 years ago.....	3
Two to less than 5 years ago	4
Five or more years ago	5
Never been to the dentist	8
Don't know	99

ihedent K31 How long since last saw a dentist

K32a Is there a particular doctor you usually see if you are sick or if you need advice about your health?

Yes	1 → K33a
No / More than one.....	2
Don't know.....	9

ihelgp K32a Is there one particular doctor you usually see if you are sick or need health advice

K32b Is there a particular clinic or health centre you usually go to if you are sick or if you need advice about your health?

Yes	1
No / More than one.....	2
Don't know.....	9

ihelclin K32b Is there one particular clinic you usually see if you are sick or need health advice

K33a During the last 12 months, have you seen a family doctor or another GP about your health?

Yes	1
No	2 → K35a
Don't know.....	9 → K35a

ihelstyr K33a During last 12 months have you seen your family doctor or another GP about your health

K33b Approximately how many times have you seen a family doctor or another GP about your health in the last 12 months?

Record number of visits

Don't know.....99

ihengp K33b Approximately how many times have you seen your family doctor or another GP in the last 12 months

K34 Thinking now about your most recent visit to a family doctor or other GP, did you or someone in your family have any out-of-pocket expenses for that consultation? Do not include medicines or tests prescribed by the doctor.

An out-of-pocket expense is sometimes known as a gap payment and is usually incurred if the consultation was not bulk billed.

Yes	1
No.....	2
Don't know.....	9

iheoop K34 For most recent doctor visit - any out of pocket expenses for consultation

K35a Looking at SHOWCARD K35, during the last 12 months, have you seen any of these health care providers about your health?

Yes	1
No.....	2 →K36a
Don't know.....	9 →K36a

ihecpny K35a During the last 12 months have you seen any of the health care providers listed on SHOWCARD K35

K35b Which ones?

PROBE: Any others?	MULTI RESP
A hospital doctor (i.e., in outpatients or casualty).....	01
A specialist doctor (excluding in outpatients or casualty of a hospital).....	02
A mental health professional, such as a psychiatrist or psychologist	03
A podiatrist (foot doctor)	04
A chiropractor or osteopath	05
A physiotherapist.....	06
An optometrist	07
Any other allied health provider, such as a speech therapist, audiologist or occupational therapist.....	08
An alternative health practitioner, such as a naturopath, acupuncturist or herbalist	09
A community nurse, practice nurse, nurse practitioner or midwife	10

ihecpnd K35b Seen during last 12 months - A hospital doctor (i.e., in outpatients or casualty)
ihecpsd K35b Seen during last 12 months - A specialist doctor (excluding in outpatients or casualty of a hospital)
ihecpmh K35b Seen during last 12 months - A mental health professional, such as a psychiatrist or psychologist
ihecpod K35b Seen during last 12 months - A podiatrist (foot doctor)
ihecpchi K35b Seen during last 12 months - A chiropractor or osteopath
ihecpphy K35b Seen during last 12 months - A physiotherapist
ihecpopt K35b Seen during last 12 months - An optometrist
ihecpahp K35b Seen during last 12 months - Any other allied health provider, such as an optometrist, speech therapist, audiologist or occupational therapist
ihecpalt K35b Seen during last 12 months - An alternative health practitioner, such as a naturopath, acupuncturist or herbalist
ihecpnrs K35b Seen during last 12 months - A community nurse, practice nurse, nurse practitioner or midwife
ihecpref K35b Seen during last 12 months - Refused
ihecpdk K35b Seen during last 12 months - Dont know

ihehcany K36a Have you had any of the health check-ups or tests in the last 12 months

K36a Looking at SHOWCARD K36, have you had any of the health check-ups and tests listed on this card during the past 12 months?

Yes	1
No.....	2 →K37
Don't know.....	9 →K37

K36b Which ones?

PROBE: Any others?	MULTI RESP
Pap smear	1
Breast screening	2
Prostate check	3
Screening for bowel cancer	4
Chest / other x-rays	5
Blood pressure	6
Cholesterol test	7
Any other blood test	8

K37 During the last 12 months, have you been admitted as a patient to a hospital for an overnight stay?

Yes	1
No.....	2 →K42
Don't know.....	9 →K42

K38 On how many different occasions were you admitted as a patient to a hospital for an overnight stay during the last 12 months?

Record number of admissions

Don't know999

K39 Altogether, in the last 12 months, how many nights did you stay in hospital?

Record number of nights

Don't know999

K40 I would now like to talk to you about your most recent overnight admission to hospital. How many nights did you stay in hospital?

Record number of nights

Don't know999

K41 Were you admitted as a public patient, as a private patient in a private hospital, or as a private patient in a public hospital?

Public patient.....	1
Private patient in a private hospital.....	2
Private patient in a public hospital.....	3
Other (please specify)	8

Don't know99

ihehcps	K36b Had check-up or test in last 12 months - Pap smear
ihehcbs	K36b Had check-up or test in last 12 months - Breast screening
ihehcpc	K36b Had check-up or test in last 12 months - Prostate check
ihehcbs	K36b Had check-up or test in last 12 months - Screening for bowel cancer
ihehcxr	K36b Had check-up or test in last 12 months - Chest / other x-rays
ihehcbs	K36b Had check-up or test in last 12 months - Blood pressure
ihehcct	K36b Had check-up or test in last 12 months - Cholesterol test
ihehcobt	K36b Had check-up or test in last 12 months - Any other blood test
ihehcfr	K36b Had check-up or test in last 12 months - Refused
ihehcdk	K36b Had check-up or test in last 12 months - Dont know

iphonpat K37 During the last 12 months, have you ever been a patient in a hospital overnight?

iphonly K38 On how many different occasions were you admitted as a patient to a hospital for an overnight stay during the last 12 months?

iphontot K39 Overnight stays in hospital in the last 12 months

iphrecad K40 Overnight stays for most recent overnight admission to hospital

iphonin K41 Hospital overnight patient admission type

K42 During the last 12 months, have you been admitted to hospital as a day patient? (Do not include visits to emergency, outpatients or outpatient clinics.)

A DAY PATIENT is admitted to the hospital for the day, whereas an OUT PATIENT is not admitted, they just receive treatment at the hospital.

- Yes 1
No 2 → K45
Don't know 9 → K45
-

iphdayly K42 During the last 12 months, have you ever been admitted to hospital as a day patient? (Do not include visits to emergency, outpatients or outpatient clinics).

K43 On how many different occasions were you admitted as a day patient to a hospital during the last 12 months?

Record number of times
Don't know 99

iphdaypa K43 On how many different occasions were you admitted as a day patient to a hospital during the last 12 months?

K44 Think now of the last time you were admitted as a day patient. Were you admitted as a public patient, as a private patient in a private hospital, or as a private patient in a public hospital?

- Public patient 1
Private patient in a private hospital 2
Private patient in a public hospital 3
Other (please specify) 8

iphdayin K44 Hospital day patient admission type

Don't know 99

Diet

K45 The next few questions are about your eating habits.

Looking at SHOWCARD K45, what is the main type of milk that you usually use?

- Whole / full cream 1
Low / reduced fat 2
Skim 3
Evaporated or sweetened condensed 4
Soy milk 5
Other (please specify) 6

iffmilk K45 Main type of milk usually use

Does not drink milk 7

If respondent indicates they drink calcium enriched milk, powdered milk, UHT milk or flavoured milk, ask them if that milk is whole milk, low fat milk or skim milk, and then code appropriately.

K46 Including tinned, frozen and fresh vegetables, on how many days in a usual week do you eat vegetables?

Please do not include chips or French fries.

Respondents should include potatoes and salad vegetables. If queried, vegetable juice is not to be included.

Record no. of days (1-7)

Do not eat vegetables in a usual week.....9 ➔K48

iffveg

K46 Number of days in a usual week eats vegetables (inc. tinned, frozen and fresh)

K47 On a day when you eat vegetables, how many serves of vegetables do you usually eat?

SHOWCARD K47 provides some examples of what a typical serve of vegetables looks like. As a rough guide, one serve is equal to a half a cup of cooked vegetables (or one cup of salad vegetables).

One serve.....1
Two serves.....2
Three serves.....3
Four serves.....4
Five serves.....5
Six serves or more.....6

iffvegs

K47 On a day when you eat vegetables, how many serves of vegetables do you usually eat

K48 Including tinned, frozen, dried and fresh fruit, on how many days in a usual week do you eat fruit?

If queried, fruit juice is not to be included.

Record no. of days (1-7)

Do not eat fruit in a usual week.....9 ➔K50

ifffrft

K48 Number of days in a usual week eats fruit (inc. tinned, frozen, dried and fresh)

K49 On a day when you eat fruit, how many serves of fruit do you usually eat?

SHOWCARD K49 provides some examples of what a typical serve of fruit looks like. (As a rough guide, one serve is equal to one medium sized piece of fruit OR two small pieces of fruit OR one cup of diced fruit pieces.)

One serve.....1
Two serves.....2
Three serves.....3
Four serves.....4
Five serves.....5
Six serves or more.....6

ifffrfts

K49 On a day when you eat fruit, how many serves of fruit do you usually eat

K50 How many days per week do you usually have some food for breakfast?

Substantial liquid meals (for example, smoothies and protein shakes) should also be included here.

Record no. of days (1-7)

None.....9

iffbf

K50 How many days per week do you usually eat some food for breakfast

K51 How often do you add salt to your food after it is cooked? Is it usually, sometimes, rarely, or never?

Never / Rarely.....1

Sometimes.....2

Usually.....3

ifffsalt

K51 How often do you add salt to your food after it is cooked

K52a How often in a usual week do you buy breakfast from a restaurant, café, fast food outlet, or any other place that prepares and sells meals?

Answers should lie in range 0 to 7

iffbrfr

K52a How often in a usual week purchases breakfast from an outlet

K52b And how often do you buy lunch?

Answers should lie in range 0 to 7

ifflunr

K52b How often in a usual week purchases lunch from an outlet

K52c And how often do you buy dinner (i.e., the evening meal)?

Answers should lie in range 0 to 7

iffdinr

K52c How often in a usual week purchases dinner from an outlet

'Meals' mean more than a beverage or a snack food (like a chocolate bar).

Carers

K53 I now have some questions about caring for others. By care I mean regular, informal help that is ongoing. Don't include any care that you might undertake as part of your paid employment.

K54 CHECK HF: Does the respondent live alone or with others?

Single-person household.....1 ➔ K58

Multi-person household2 ➔ K55

ihehtyp

K54 Check HF, Single or Multi person household

K55 Is there anyone in this household who has a long-term health condition, who is elderly or who has a disability, and for who you care or help on an ongoing basis with any of the types of activities listed on SHOWCARD K55?

Yes

1

No.....2 ➔ K58

iherca

K55 Actively cares for household member due to long-term health condition, elderly, disability

K56 Who in this household do you help or care for?

MULTI RESP

Spouse / Partner.....	<u>1</u>
Parent(s).....	<u>2</u>
Parent(s)-in-law	<u>3</u>
Adult child (aged 15+ years).....	<u>4</u>
Young child.....	<u>5</u>
Other relative.....	<u>6</u>
Other (unrelated person).....	<u>7</u>

ihercap	K56 Person cared for - Spouse/partner
ihercapt	K56 Person cared for - Parent
ihercapl	K56 Person cared for - Parent-in-law
ihercaac	K56 Person cared for - Adult child (aged 15+ years)
ihercayc	K56 Person cared for - Young child
ihercaor	K56 Person cared for - Other relative
ihercaur	K56 Person cared for - Other (unrelated person)
ihercana	K56 Person cared for - No answer
ihercarf	K56 Person cared for - Refused
ihercadk	K56 Person cared for - Dont know

K57 Are you the main carer of [this person / any of these people]? (That is, are you the person who provides most of their care?)

Yes (main carer).....	<u>1</u>
No (share the care with others)	<u>2</u>

ihercam K57 Main carer of resident person(s)

K58 Is there anyone living elsewhere who has a long-term health condition, who is elderly or who has a disability, and for who you care or help on an ongoing basis with any of the types of activities listed on SHOWCARD K55?

Yes	<u>1</u>
No.....	<u>2</u> ➔ K61

ihenca K58 Actively cares for non-resident due to long-term health condition, elderly, disability

K59 Who [is this person / are these people] living elsewhere that you help or care for?

MULTI RESP

Spouse / Partner.....	<u>1</u>
Parent(s).....	<u>2</u>
Parent(s)-in-law	<u>3</u>
Adult child (aged 15+ years).....	<u>4</u>
Young child.....	<u>5</u>
Other relative.....	<u>6</u>
Other (unrelated person).....	<u>7</u>

ihencap	K59 Who is cared for - Spouse/partner
ihencapt	K59 Who is cared for - Parent
ihencapl	K59 Who is cared for - Parent-in-law
ihencaac	K59 Who is cared for - Adult child (aged 15+ years)
ihencayc	K59 Who is cared for - Young child
ihencaor	K59 Who is cared for - Other relative
ihencaur	K59 Who is cared for - Other (unrelated person)
ihencana	K59 Who is cared for - No answer
ihencarf	K59 Who is cared for - Refused
ihencadk	K59 Who is cared for - Dont know

K60 Are you the main carer of [this person / any of these people]? (That is, are you the person who provides most of their care?)

Yes (main carer).....	<u>1</u>
No (share the care with others)	<u>2</u>

ihencam K60 Main carer of non-resident person(s)

K61 I am now going to ask you some questions about how satisfied or dissatisfied you are with some of the things happening in your life. I am going to read out a list of different aspects of life and, using the scale on SHOWCARD K61, I want you to pick a number between 0 and 10 that indicates your level of satisfaction with each. The more satisfied you are, the higher the number you should pick. The less satisfied you are, the lower the number.

- | | | | |
|---|--|----------------------|-----|
| a | The home in which you live? | <input type="text"/> | N/A |
| b | Your employment opportunities? | <input type="text"/> | 97 |
| c | Your financial situation? | <input type="text"/> | |
| d | How safe you feel? | <input type="text"/> | |
| e | Feeling part of your local community? | <input type="text"/> | |
| f | Your health? | <input type="text"/> | |
| g | The neighbourhood in which you live? | <input type="text"/> | |
| h | The amount of free time you have? | <input type="text"/> | |

ilosathl	K61 Satisfaction - The home in which you live
ilosateo	K61 Satisfaction - Your employment opportunities
ilosatfs	K61 Satisfaction - Your financial situation
ilosatsf	K61 Satisfaction - How safe you feel
ilosatlc	K61 Satisfaction - Feeling part of your local community
ilosatyh	K61 Satisfaction - Your health
ilosatnl	K61 Satisfaction - The neighbourhood in which you live
ilosatft	K61 Satisfaction - The amount of free time you have

K62 All things considered, how satisfied are you with your life? Again, pick a number between 0 and 10 to indicate how satisfied you are.

Enter number from 0 to 10

ilosat K62 Satisfaction - How satisfied are you with your life

K63 Do you speak a language other than English in this home?

- Yes 1
No 2 ➔ K65

ianlotc K63 Speak language other than English

K64 Would you say you speak English ...

- Very well? 1
Well? 2
Not well? 3
Not at all? 4

ianeab K64 How well speaks English

K65 CONFIRM ADDRESS: Can I just double-check: since we last interviewed you on [date of last interview], have you changed your address?

- Yes 1
No 2 ➔ T1

imhli CPQ:K65 Changed address since last interview

K66 What were the *main* reasons for leaving that address?

MULTI RESP

- | | |
|--|-----------|
| To start a new job with a new employer | <u>01</u> |
| To be nearer place of work..... | <u>02</u> |
| To be close to place of study..... | <u>03</u> |
| Work transfer..... | <u>04</u> |
| To start own business..... | <u>05</u> |
| Decided to relocate own business..... | <u>06</u> |
| To get a larger / better place | <u>07</u> |
| To get a smaller / less expensive place (less rent, less upkeep, etc.) | <u>08</u> |
| To get a place of my own / our own..... | <u>09</u> |
| To get married / moved in with partner..... | <u>10</u> |
| To live in a better neighbourhood | <u>11</u> |
| To be closer to friends and/or family | <u>12</u> |
| To look for work..... | <u>13</u> |
| Marital / relationship breakdown..... | <u>14</u> |
| Property no longer available..... | <u>15</u> |
| Evicted..... | <u>16</u> |
| To follow a spouse or parent / Whole family moved..... | <u>17</u> |
| To be closer to amenities / services / public transport | <u>18</u> |
| Seeking change of lifestyle..... | <u>19</u> |
| Health reasons | <u>20</u> |
| Temporary relocation (e.g., while renovating / re-building)..... | <u>21</u> |
| Other (<i>please specify</i>) | <u>97</u> |
-
-

imhreanj	CPQ:K66/NPQ:K69 Main reasons for moving - To start a new job with a new employer
imhreawp	CPQ:K66/NPQ:K69 Main reasons for moving - To be nearer place of work
imhreast	CPQ:K66/NPQ:K69 Main reasons for moving - To be close to place of study
imhreawt	CPQ:K66/NPQ:K69 Main reasons for moving - Work transfer
imhreaob	CPQ:K66/NPQ:K69 Main reasons for moving - To start own business
imhrearb	CPQ:K66/NPQ:K69 Main reasons for moving - Decided to relocate own business
imhrealb	CPQ:K66/NPQ:K69 Main reasons for moving - To get a larger/better place
imhreasrn	CPQ:K66/NPQ:K69 Main reasons for moving - To get a smaller/less expensive place
imhreapo	CPQ:K66/NPQ:K69 Main reasons for moving - To get a place of my own/our own
imhreamr	CPQ:K66/NPQ:K69 Main reasons for moving - To get married/moved in with partner
imhreabn	CPQ:K66/NPQ:K69 Main reasons for moving - To live in a better neighbourhood
imhreaff	CPQ:K66/NPQ:K69 Main reasons for moving - To be closer to friends and/or family
imhrealw	CPQ:K66/NPQ:K69 Main reasons for moving - To look for work
imhreamb	CPQ:K66/NPQ:K69 Main reasons for moving - Marital/relationship breakdown
imhreapn	CPQ:K66/NPQ:K69 Main reasons for moving - Property no longer available
imhreaev	CPQ:K66/NPQ:K69 Main reasons for moving - Evicted
imhreafm	CPQ:K66/NPQ:K69 Main reasons for moving - To follow a spouse or parent/Whole family moved
imhreaas	CPQ:K66/NPQ:K69 Main reasons for moving - To be closer to amenities/services/public transport
imhreals	CPQ:K66/NPQ:K69 Main reasons for moving - Seeking change of lifestyle
imhreahr	CPQ:K66/NPQ:K69 Main reasons for moving - Health reasons
imhreatr	CPQ:K66/NPQ:K69 Main reasons for moving - Temporary relocation
imhreama	CPQ:K66/NPQ:K69 Main reasons for moving - Moved to Australia (NFI)
imhreagh	CPQ:K66/NPQ:K69 Main reasons for moving - Government housing (no choice)
imhrearo	CPQ:K66/NPQ:K69 Main reasons for moving - Travelling/returned from overseas
imhreapf	CPQ:K66/NPQ:K69 Main reasons for moving - Personal/family reasons (NFI)
imhreawr	CPQ:K66/NPQ:K69 Main reasons for moving - Work reasons (NFI)
imhreahn	CPQ:K66/NPQ:K69 Main reasons for moving - Housing/neighbourhood reason (NFI)
imhreani	CPQ:K66/NPQ:K69 Main reasons for moving - NEI to classify
imhreana	CPQ:K66/NPQ:K69 Main reasons for moving - Not Answered
imhreaos	CPQ:K66/NPQ:K69 Main reasons for moving - Other
imhreadk	CPQ:K66/NPQ:K69 Main reasons for moving - Dont know

imhlvmth CPQ:K67 Month left
imhlvyr CPQ:K67 Year left

imhmth	CPQ:K68/NPQ:K65 Month moved to current address
imhyr	CPQ:K68/NPQ:K65 Year moved to current address

K68 And in what month (and year) did you move to your current address?

Month and year **2**

T. TRACKING INFORMATION

T1 The Living in Australia study appreciates your assistance and would like to contact you again in 12 months time to get an update from you.

Now, we have the household's home phone number, but I'd like to record your work and/or mobile phone numbers too, just for back-up.

Work

Mobile

Does not have a telephone..... 6

Refused to provide 8

T2 Do you have an email address that you check regularly?

No 1

Yes (write in full email address below) 2

Refused to provide 8

T3 How likely is it that you will move in the next 12 months?

Very likely 1

Likely 2

Neither / not sure 3 ➔ T5

Unlikely 4 ➔ T5

Very unlikely 5 ➔ T5

imhnryr T3 How likely to move in next 12 months

T4a Do you know your new address?

Please record any information you are told (even if it is only the name of the region they are moving to).

No 1

Yes, Postal address
(write in below, including p/code) 2

POST CODE _____

Street address
(write in below if different from above)

POST CODE _____

Will be overseas 4

Refused to provide 8

T4b When do you expect to begin living at your new address?

	Month	Year
Record month and year		
	2	0
Don't know.....	99	

imhexpmt T4b When expect to live in new address
Month
imhexpyr T4b When expect to live in new address
Year

- T5** We also ask for the name and number of two other people who might know where you are, in case you move in the meantime. Relatives who don't live with you are usually the best for this. (They will only be contacted if you cannot be found, and these contact details will be kept completely secure and not used for any other purpose.) Can you please let these people know that you have given this study their details in case you move and they need to be contacted?

Try to record a different contact for each respondent.

	Name and r'ship to respondent	Phone/email	Postal address			
CONTACT 1	Name:	Work: (____) _____				
		Home: (____) _____				
	Relationship to respondent :	mob:				
		Respondent's	email:	Post code		
CONTACT 2	Name:	Work: (____) _____				
		Home: (____) _____				
	Relationship to respondent :	mob:				
		Respondent's	email:	Post code		

Reason for above contact details not given: _____

ihhncr t5 number of contacts recorded

- T6** CONFIRM D.O.B. FROM HF AND RECORD: Can you confirm your date of birth please?

If queried, explain that we need DOB on this form so we can marry the information here with the information on other forms.

			1	9	
Day	Month	Year			

- T7a** There is also a self-completion questionnaire we would like you to fill in. This contains some additional questions that you might find easier to answer by yourself. You can complete this in your own time and I will come back and collect it on another day.

Give pen (i.e., the 'gift') to respondent and recommend that they use it when completing the questionnaire.

Point out instructions on the front of SCQ and emphasise that if they make a mistake it's important that they black-out the box completely.

- T7b** ON THE FRONT OF THE SCQ RECORD THE HOUSEHOLD ID (5 DIGITS) AND THE RESPONDENT'S PERSON ID (2 DIGITS). WRITE THE RESPONDENT'S FIRST NAME IN THE SPACE PROVIDED.

- T7c** RECORD SCQ
SERIAL NUMBER:

ihhscqsn

IMPORTANT NOTE: The SCQ serial number is printed on the bottom right-hand corner of the SCQ.

SCQ not issued..... 99997

- T8** TIMESTAMP

Record time now : am / pm

Total interview length : minutes

ihhpqlen

THANK AND CLOSE

REMEMBER TO COMPLETE THE INTERVIEW SITUATION DETAILS ON THE LAST PAGE

Z. INTERVIEW SITUATION

To be completed by the interviewer in between interviews or immediately after leaving house.

Z1 Were any other adults present during any of this interview?

- Yes 1
No 2 → Z3

iioadult Z1 Any other adults present

Z2 How much do you think they influenced the answers?

- Not at all 1
A little 2
A fair amount 3
A great deal 4

iioinflu Z2 Influence respondent answers

Z3 In general, how would you describe the respondent's understanding of the questions?

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

ioundst Z3 Describe respondents understanding of questions

Z4 Was the respondent suspicious about the study after the interview was completed?

- No, not at all suspicious 1
Yes, somewhat suspicious 2
Yes, very suspicious 3

iosusp Z4 Was respondent suspicious about study after completion

Z5 Did the respondent refer to any of the following documents during the interview?

- | | Yes | No |
|--|--------|----|
| (a) A pay slip? | 1..... | 2 |
| (b) A tax return? | 1..... | 2 |
| (c) A benefit statement from Centrelink? | 1..... | 2 |
| (d) Any other document? | 1..... | 2 |

iiodocps Z5a Refer to documents - a pay slip
iiodoctx Z5b Refer to documents - a tax return
iiodoccl Z5c Refer to documents - a benefit statement from Centrelink
iiodocod Z5d Refer to documents - any other document

Z6 In general, how would you describe the respondent's co-operation during the interview?

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

iiocoop Z6 Co-operation during interview

Z7 Did the respondent have any of the following problems which may have affected the interview?

Yes No

- | | |
|-------------------------------------|---------|
| a Poor eyesight (blindness)..... | 1.....2 |
| b Hearing problems | 1.....2 |
| c Reading difficulties | 1.....2 |
| d English was second language | 1.....2 |
| e Other language problems..... | 1.....2 |
-

Z8a Was this interview completed with the assistance of a third party (e.g., such as an interpreter or another member of the family)?

- | | |
|--|--------|
| No..... | 1 → Z9 |
| Yes, Roy Morgan Research organised interpreter assisted..... | 2 |
| Yes, family member / friend assisted..... | 3 |
-

Z8b What was the reason the interview had to be assisted?

- | | |
|-------------------------------------|---|
| English language difficulties | 1 |
| Sickness or disability | 2 |
| Other | 3 |
-

Z9 Where (or how) was the interview conducted?

- | | |
|--|----|
| Face-to-face inside the respondent's home | 06 |
| Face-to-face outside the respondent's home / on doorstep | 07 |
| Face-to-face at the respondent's workplace..... | 08 |
| Face-to-face some other place..... | 09 |
| By phone at respondent's home..... | 10 |
| By phone at respondent's workplace..... | 11 |
| By phone elsewhere..... | 12 |
-

Z10 Please note down any ambiguous or conflicting situations in this interview that you think editors and coders should know about?

Please add any further remarks that may help to clarify any problems arising during processing.

iiopeye Z7 Did respondent have problem which may have affected interview - a Poor eyesight
iiophear Z7 Did respondent have problem which may have affected interview - b Hearing problems
iiopread Z7 Did respondent have problem which may have affected interview - c Reading difficulties
iiopeng Z7 Did respondent have problem which may have affected interview - d English was second language
iioplangu Z7 Did respondent have problem which may have affected interview - e Other language problems
iiopnone Z7 Did respondent have problem which may have affected interview - None of these

iiohlp Z8a Assistance of 3rd party

iioreaa Z8b Reason for need of assistance

iiolocn Z9 Where (or how) was the interview conducted?



LIVING IN AUSTRALIA

Roy Morgan
Research

Freecall: 1800 656 670
Email: hilda@roymorgan.com

Household ID					NEW PERSON QUESTIONNAIRE (NPQ) W9 M
xwaveid	Cross Wave ID (text)				
ihhrpid	Wave 9 Randomised Person ID (text)				ihhstate State
ihhhrrhid	Wave 9 Randomised Household ID (text)				ihhiwin Fieldwork period 1=initial 2=follow-up
ihhpno	Wave 9 HF person number (text)				ihhpq 1=continuing 2=new person
ihhidate	Interview date (text)				ihhiage Age last birthday at interview date. Weighted topcode

IN-CONFIDENCE

- A. Did this respondent complete a PQ in a previous wave? (Check HF7 PQ type on the HF or call off)
YES → Use the CPQ (*not* the NPQ) NO → Continue to use the NPQ A. ihhpq
B. ihhpmrq
C. ihhpmid (text)

B. Is the person being interviewed aged between 15-17 years and living with parents / guardians? YES NO

C. If YES, full name of parent / guardian who gave you permission to interview the 15 -17 year-old.

INTERVIEWER NOTE:

All work conducted by Roy Morgan Research is confidential. Under the Code of Professional Behaviour of the Australian Market and Social Research Society you (the interviewer) cannot disclose any information about respondents to any third party.

RE-INTRODUCE YOURSELF IF NEED BE.

Most people take around 35 minutes to complete the interview, as we need to collect background information that other respondents gave in previous years. We really appreciate you taking the time to do this.

IF NECESSARY: Everything you tell me will be treated in the strictest privacy.

INTERVIEWER DECLARATION

I certify that this is a true, accurate and complete interview, conducted in accordance with the AMSRS Code of Professional Behaviour (ICC/ESOMAR). I will not disclose to any other person the content of this questionnaire or any other information relating to this project.

Interviewer's Name:

Interviewer's Signature:

Date: / /

Interviewer's ID: _____

CHECK: In households where you complete an NPQ, you must provide a *New Entrant's Brochure*. (One per household.) Please tick the box below to indicate you have done this.

Yes. New Entrant's Brochure provided to household.

AA. COUNTRY OF BIRTH & LANGUAGE

AA1 TIMESTAMP

Record time now : am / pm

AA2 In which country were you born?

- | | | |
|------------------------------|------|-------|
| Australia..... | 1101 | →AA14 |
| United Kingdom..... | 2100 | |
| Ireland / Eire | 2201 | |
| New Zealand | 1201 | |
| China (excl Taiwan)..... | 6101 | |
| Germany..... | 2304 | |
| Greece..... | 3207 | |
| Hong Kong..... | 6102 | |
| Italy..... | 3104 | →AA3 |
| Malaysia | 5203 | |
| Netherlands | 2308 | |
| Philippines | 5204 | |
| USA..... | 8104 | |
| Viet Nam..... | 5105 | |
| Other (please specify) | 8888 | |

Person data copied from the Household Form

ihgsex	HF5 Sex
ihgage	DV: Age last birthday at June 30 2009
ihges	HF16 Employment status on Household Form, answered by one person in household
ihglth	HF17 Long term health condition, disability or impairment on Household Form, answered by one person in household
ihgi	HF19 Individual interview outcome

Note: IHGES and IHGLTH will not describe the status collected in the person interview. Use IESBRD for employment status in the person interview and use IHELTH for health condition status in the person interview.

If only asked of new persons prefixed NPQ:

iancobs NPQ:AA2 Country of Birth

AA3 In what year did you first come to Australia to live for 6 months or more (even if you have spent time abroad since)?

Record year

ianyoan NPQ:AA3 Year first came to Australia to live

AA4 Are you an Australian citizen?

- | | | |
|-----------------|---|------|
| Yes | 1 | →AA6 |
| No..... | 2 | |
| Don't know..... | 9 | |

ianaucit NPQ:AA4 Are you an Australian citizen

AA5 Are you a permanent resident of Australia?

- | | | |
|-----------------|---|-------|
| Yes | 1 | →AA6 |
| No..... | 2 | →AA13 |
| Don't know..... | 9 | →AA13 |

ianraures NPQ:AA5 Are you a permanent resident of Australia

AA6 (Can I just check) Were you a New Zealand citizen when you arrived in Australia?

- | | | |
|-----------------|---|-------|
| Yes | 1 | →AA13 |
| No..... | 2 | |
| Don't know..... | 9 | |

iannzcin NPQ:AA6 (Can I just check) Were you a New Zealand citizen when you arrived in Australia

AA7 CHECK AA3: Did respondent arrive in Australia after 1999?

- | | | |
|---------------------------------------|---|------|
| Yes (Arrived in 2000 or later)..... | 1 | →AA9 |
| No (Arrived in 1999 or earlier) | 2 | →AA8 |

ianaf99n NPQ:AA7 Check AA3 Did respondent arrive in Australia after 1999

AA8 Did you (and your family) come to Australia as refugees or under a humanitarian migration program?

- Yes.....1 →AA13
No.....2 →AA13
Don't know.....9 →AA13
-

ianrefn NPQ:AA8 Did you (and your family) come to Australia as refugees or under a humanitarian migration program

AA9 Were you the Primary Applicant for an Australian visa or was it someone else in your family?

- Self.....1 →AA11
Someone else in family.....2 →AA10
Don't know.....9 →AA11
-

ianpappn NPQ:AA9 Australian visa - Primary applicant

AA10 Does that person currently live in this household?

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

ianpaphh NPQ:AA10 Does the primary visa applicant live in this household

AA11 Looking at SHOWCARD AA11, which of the following categories best describes your migration category when you or your family first arrived in Australia?

What we are interested in here is the visa status of the Principal Applicant in the family.

- Skilled migrant.....1
Business migrant.....2
Family migrant.....3
Refugee or Special Humanitarian migrant.....4
New Zealand citizen5
None of the above7-8
Don't know.....9
-

ianmigcn NPQ:AA11 Migration category when you or your family first arrived in Australia

AA12 Who paid for your (air)fare to come to Australia?

If more than one person or group paid the respondent's fare, please ask who the main contributor was (that is, who paid the most).

- Self or other family members.....1
Friend.....2
Australian Government.....3
Community organisation4
Other.....7-8
Don't know.....9

ianafpan NPQ:AA12 Who paid for your (air)fare to come to Australia

AA13 Is English the first language you learned to speak as a child?

Yes 1 ➔BB1
No 2 ➔BB1

ianengfn NPQ:AA13 Is English the first language you learned to speak as a child

AA14 Are you of Aboriginal or Torres Strait Islander origin?

No 1
Yes, Aboriginal 2
Yes, Torres Strait Islander 3
Yes, both 4

ianatsin NPQ:AA14 Are you of Aboriginal or Torres Strait Islander origin

BB. FAMILY BACKGROUND**BB1 This section is about your family background. Were you living with *both* your 'own' mother and father around the time you were 14 years old?**

If asked, 'own' means natural or adopted as an infant.

Both own mother and father 1 ➔BB3a
Father and stepmother 2
Mother and stepfather 3
Father only – no mother or stepmother 4
Mother only – no father or stepfather 5
Other (please specify) 8

ifmlwopn NPQ:BB1 Were you living with both your own mother and father around the time you were 14 years old

BB2 Why were you not living with both your own parents?

Parents never married or lived together 1 ➔BB5
One or both parents died 2 ➔BB5
Parents separated or divorced 3 ➔BB3b
Other (please specify; PROBE for reason not living with both parents) 8 ➔BB3a

ifmnpren NPQ:BB2 Why were you not living with both your parents

BB3a Did your mother and father ever get divorced or separate?

Yes 1
No 2 ➔BB5
Don't know 9 ➔BB5

ifmpdivn NPQ:BB3a Did your mother and father ever get divorced or separate

BB3b Did your mother and father ever get back together again?

Yes 1
No 2
Don't know 9

ifmpjonn NPQ:BB3b Did your mother and father ever get back together again

BB4 About how old were you at the time they first separated?

If more than once, ask youngest.

Enter age in whole years

Don't know 99

ifimagepn NPQ:BB4 How old were you at the time they first separated

BB5 How old were you when you first moved out of home as a young person (or are you still living at home with your [parents / guardians])?

Query if respondent says less than 15 years of age.

Enter age in whole years

Still living at home 96

ifmageln NPQ:BB5 How old were you when you first moved out of home as a young person

BB6 Now we have some questions about brothers and sisters.

**Have you ever had any brothers or sisters?
Include half or adopted, but not step or foster.**

Yes 1
No 2 → BB9a
Don't know 9 → BB9a

ifmhsibn NPQ:BB6 Have you ever had any brothers or sisters

BB7 How many?

Enter number

ifmnnsibn NPQ:BB7 How many (brothers and sisters)

BB8 Were you the oldest when you were growing up?

Do not include siblings who died before respondent was 2 years of age.

Yes - Oldest 1
No - respondent has/had an older sibling 2

ifmeldsn NPQ:BB8 Were you the oldest when growing up

BB9a In which country was your father born?

RECORD UNDER COLUMN A

BB9b And your mother? In which country was she born? RECORD UNDER COLUMN B*If asked, indicate we are**interested here in the**respondent's biological parents.*

(A) Father (B) Mother

Australia.....	1101	1101
United Kingdom.....	2100	2100
Ireland / Eire	2201	2201
New Zealand	1201	1201
China (excl Taiwan).....	6101	6101
Germany.....	2304	2304
Greece.....	3207	3207
Hong Kong.....	6102	6102
Italy.....	3104	3104
Malaysia	5203	5203
Netherlands	2308	2308
Philippines	5204	5204
USA	8104	8104
Viet Nam.....	5105	5105
Other (<i>please specify</i>) – Father	8888	

ifmfcobn NPQ:BB9a Father's Country of Birth
ifmmccobn NPQ:BB9b Mother's Country of Birth

Other (*please specify*) – Mother8888

Don't know (last resort only)99999999

BB10 Now we have a few more questions about your mother and father.

READ OUT IF APPLICABLE: If you did not live with both of your natural parents when you were growing up, we would like you to answer with respect to the persons who mostly filled the roles of mother and father when you were a child.

If they say they had two fathers / mothers (e.g., natural father who they kept in close touch with and a stepfather they were close to), ask them to identify the one who had the most influence on them (or failing that, the one they spent the most time with) up until age 14.

BB11a Looking at SHOWCARD BB11, please tell me how much schooling your father completed?
RECORD UNDER COLUMN A

BB11b And how much schooling did your mother complete?
RECORD UNDER COLUMN B

	(A) Father	(B) Mother	
None	1	1	
Primary school only.....	2	2	ifmfschn NPQ:BB11a How much schooling father completed
Some secondary school, but no more than Year 10	3	3	ifmmschn NPQ:BB11b How much schooling mother completed
Year 11 or equivalent (e.g., 5 th form, Leaving Certificate)	4	4	
Year 12 or equivalent (e.g., 6 th form, Matriculation)	5	5	
Don't know	9	9	

BB12 Did your father complete an educational qualification after leaving school? Please include any trade certificates, apprenticeships, diplomas, degrees or other educational qualifications.

Do not include hobby or recreation courses, or study for a school-level qualification.

Yes.....	1
No.....	2 →BB14
Don't know.....	9 →BB14

ifmfpsqn NPQ:BB12 Father completed an educational qualification after leaving school

BB13 Looking at SHOWCARD BB13, from where was his highest level qualification obtained?

University	1
Teachers college / College of Advanced Education.....	2
Institute of Technology.....	3
Technical college / TAFE / College of Technical and Further Education.....	4
Employer.....	5
Other (please specify)	7-8

ifmfhlqn NPQ:BB13 Which type of institution fathers highest level qualification obtained from

Don't know.....9

BB14 Did your mother complete an educational qualification after leaving school? Please include any trade certificates, apprenticeships, diplomas, degrees or other educational qualifications.

Do not include hobby or recreation courses, or study for a school-level qualification.

- Yes 1
No 2 →BB16
Don't know 9 →BB16

ifmmpsqn NPQ:BB14 Mother completed an educational qualification after leaving school

BB15 Looking at SHOWCARD BB13, from where was her highest level qualification obtained?

- University 1
Teachers college / College of Advanced Education 2
Institute of Technology 3
Technical college / TAFE / College of Technical and Further Education 4
Employer 5
Other (*please specify*) 7-8

Don't know 9

ifmmhlqn NPQ:BB15 Which type of institution mothers highest level qualification obtained from

BB16 Thinking back to when you were 14 years old, did your father work in a job, business or farm?

Accept father substitutes.

- Yes 1 →BB17a
No 2 →BB17b
Father was deceased 3 →BB17c
Father not living with respondent so don't know.... 4 →BB19
Don't know 9 →BB18

ifmfempn NPQ:BB16 Was father in paid employment when you were 14

BB17a What kind of work did he do? That is, what was his occupation called and what were the main tasks and duties he undertook in that job?
Please describe fully. THEN GO TO BB18

BB17b What about any previous employment? That is, what was his occupation called and what were the main tasks and duties he undertook in that job? Please describe fully. THEN GO TO BB18

BB17c What kind of work did he do when he was alive? That is, in his last job what was his occupation called and what were the main tasks and duties he undertook in that job? Please describe fully.
THEN GO TO BB18

OCCUPATION TITLE (Obtain full title. Try to avoid one-word answers. For example, "shipping clerk", not just "clerk", "dairy farmer", not just "farmer", and "builder's labourer", not just "labourer".)

MAIN TASKS / DUTIES (For example: recording accounts, frying fish and chips, operating plastic extruding machine.)

ifmfo6n2 DV: NPQ: Father's occupation 2-digit
ANZSCO 2006

Never had a job 9997
Don't know 9999

BB18 Was your father unemployed for a total of 6 months or more while you were growing up?

Note TOTAL (e.g., includes 6 episodes of 1 month each).

Yes..... 1
No..... 2
Don't know..... 9

ifmfuemn NPQ:BB18 Was father unemployed for 6 months or more while you were growing up

BB19 And what about your mother? Was she in paid employment when you were 14?

Accept mother substitutes.

Yes..... 1 → BB20a
No..... 2 → BB20b
Mother was deceased..... 3 → BB20c
No mother living with respondent so don't know ... 4 → A1
Don't know..... 9 → A1

ifmmempn NPQ:BB19 Was mother in paid employment when you were 14

- BB20a** What kind of work did she do? That is, what was her occupation called and what were the main tasks and duties she undertook in that job? Please describe fully. THEN GO TO A1
- BB20b** What about any previous employment? That is, what was her occupation called and what were the main tasks and duties she undertook in that job? Please describe fully. THEN GO TO A1
- BB20c** What kind of work did she do when she was alive? That is, in her last job what was her occupation called and what were the main tasks and duties she undertook in that job? Please describe fully. THEN GO TO A1

OCCUPATION TITLE (*Obtain full title. Try to avoid one-word answers. For example, "shipping clerk", not just "clerk", "dairy farmer", not just "farmer", and "builder's labourer", not just "labourer".*)

ifmmo6n2 DV: NPQ: Mother's occupation 2-digit
ANZSCO 2006

MAIN TASKS / DUTIES (*For example: recording accounts, frying fish and chips, operating plastic extruding machine.*)

Never had a job 9997
Don't know..... 9999

A. EDUCATION & EMPLOYMENT HISTORY

A1 At what age did you leave school?

(as a child/teenager; A7a picks up schooling done as a mature age student.)

If age given is 20 years or more: Query to ensure respondent is not including tertiary study.

Enter age in whole years

--	--

iedageln NPQ:A1 Age left school

Never went to school 1 → A6
Still at school..... 2

A2 Looking at SHOWCARD 1, what was the highest year of school you [completed / are currently attending]?

Year 12 or equivalent / Senior Secondary 1
Year 11 or equivalent 2
Year 10 or equivalent / Junior Secondary 3
Year 9 or equivalent 4
Year 8 or equivalent 5
Year 7 or equivalent (NSW, VIC, TAS, ACT only) 6
Did not attend secondary school but finished primary school 7
Attended primary school but did not finish 8

iedhistn NPQ:A2 Highest year of school completed/currently attending

A3 Looking at SHOWCARD 2, which of these categories best describes the type of school you [were attending in your last year / are currently attending]?

If attended 2 schools in last year, record for most recent school attended.

Government school 1
Catholic non-government school 2
Other non-government school 3
Other, not included above (please specify) 7-8

iedtypen NPQ:A3 Type of school attended/attending

Don't know 9

A4 CHECK A1

Still at school (A1=2) 1 → B1
Other 2 → A5

ichkal NPQ:A4 Check if still at school

A5 In which country did you complete your last year of school?

Australia 1101	Italy 3104
United Kingdom 2100	Malaysia 5203
Ireland / Eire 2201	Netherlands 2308
New Zealand 1201	Philippines 5204
China (excl Taiwan) 6101	USA 8104
Germany 2304	Viet Nam 5105
Greece 3207	Other (specify) 8888
Hong Kong 6102	

iedclyn NPQ:A5 Country of last school year

**A6 (Since leaving school (as a [child / teenager])),
have you ever enrolled in a course of study to
obtain a trade certificate, diploma, degree or
other educational qualification?**

Do not include hobby or recreation courses.

Yes 1
No 2 ➔ A13

iedqenrn NPQ:A6 Enrolled in course of study to
obtain qualification

A7a Looking at SHOWCARD 3, since leaving school (as a [child / teenager]) what qualifications have you completed?

Prompt for number of each type of qualification completed. Do not include hobby or recreation courses.

MULTI RESP How many?

Secondary school qual- lower level.....	600	x	
Secondary school qual- highest level	611	x	
Nursing qualification.....	001	x	
Teaching qualification	002	x	
Trade certificate or apprenticeship.....	514	x	
Technicians cert. / Advanced certificate....	511	x	
Other certificate – level I	524	x	
Other certificate – level II	521	x	
Other certificate – level III	598	x	
Other certificate – level IV	599	x	
Other certificate – don't know level	500	x	
Associate diploma/Diploma (2 yrs full-time or equivalent).....	421	x	
Associate Degree	413	x	
Undergraduate diploma / Advanced diploma (3 yrs full-time or equivalent).....	411	x	
Bachelor degree but not honours.....	312	x	
Honours bachelor degree	311	x	
Graduate Certificate	221	x	
Post-graduate diploma/Graduate diploma	211	x	
Masters degree	120	x	
Doctorate	110	x	
Other (specify details below)	995	x	

Title of course _____

Description _____

Length of course (f/t equivalent)_____

OR

- Did not complete qualification993
- Still studying994
- Don't know999

iedqngq	NPQ:A7a Qualifications obtained - Nursing qualification
iedqotq	NPQ:A7a Qualifications obtained - Teaching qualification
iedqodc	NPQ:A7a Qualifications obtained - Doctorate
iedqoms	NPQ:A7a Qualifications obtained - Masters degree
iedqogd	NPQ:A7a Qualifications obtained - Post-graduate diploma/Graduate diploma
iedqogc	NPQ:A7a Qualifications obtained - Graduate certificate
iedqohd	NPQ:A7a Qualifications obtained - Honours bachelor degree
iedqobd	NPQ:A7a Qualifications obtained - Bachelor degree but not honours
iedqodn	NPQ:A7a Qualifications obtained - Diploma NFI
iedqoav	NPQ:A7a Qualifications obtained - Undergraduate diploma/Advanced diploma
iedqoad	NPQ:A7a Qualifications obtained - Associate degree
iedqodp	NPQ:A7a Qualifications obtained - Associate diploma
iedqocd	NPQ:A7a Qualifications obtained - Other certificate-dont know level
iedqotc	NPQ:A7a Qualifications obtained - Technicians cert./Advanced certificate
iedqota	NPQ:A7a Qualifications obtained - Trade certificate or apprenticeship
iedqoc2	NPQ:A7a Qualifications obtained - Other certificate - level II
iedqocl	NPQ:A7a Qualifications obtained - Other certificate - level I
iedqoc3	NPQ:A7a Qualifications obtained - Other certificate - level III
iedqoc4	NPQ:A7a Qualifications obtained - Other certificate - level IV
iedqosl	NPQ:A7a Qualifications obtained - Secondary school - lower level
iedqosh	NPQ:A7a Qualifications obtained - Secondary school - highest level
iedqnnone	NPQ:A7a Qualifications obtained - Did not complete a qualification
iedqstdy	NPQ:A7a Qualifications obtained - Still studying
iedqodk	NPQ:A7a Qualifications obtained - Dont know
iedqona	NPQ:A7a Qualifications obtained - No answer
iedqorf	NPQ:A7a Qualifications obtained - Refused
iedgoos	NPQ:A7a Qualifications obtained - Other
iedqoun	NPQ:A7a Qualifications obtained - 000 level unknown
iedqnnq	NPQ:A7a Number of qualifications obtained - 001
iedqntq	Nursing qualification
iedqndc	NPQ:A7a Number of qualifications obtained - 002
iedqnms	Teaching qualification
iedqngd	NPQ:A7a Number of qualifications obtained - 110
iedqngc	Doctorate
iedqnhd	NPQ:A7a Number of qualifications obtained - 120
iedqnbnd	Masters degree
iedqndn	NPQ:A7a Number of qualifications obtained - 211
iedqnav	Post-graduate diploma/Graduate diploma
iedqnad	NPQ:A7a Number of qualifications obtained - 221
iedqndp	Graduate certificate
iedqncc	NPQ:A7a Number of qualifications obtained - 311
iedqntc	Honours bachelor degree
iedqnta	NPQ:A7a Number of qualifications obtained - 312
iedqnc2	Bachelor degree but not honours
iedqnc1	NPQ:A7a Number of qualifications obtained - 400
iedqnc3	Diploma NFI
iedqnc4	NPQ:A7a Number of qualifications obtained - 411
iedqnsl	Undergraduate diploma/Advanced diploma
iedqnsn	NPQ:A7a Number of qualifications obtained - 413
iedqnos	Associate degree
iedqnnun	NPQ:A7a Number of qualifications obtained - 421
ichknrs	Associate diploma
iedqncd	NPQ:A7a Number of qualifications obtained - 500
iedqntc	Other certificate - dont know level
iedqnta	NPQ:A7a Number of qualifications obtained - 511
iedqnc2	Technicians cert./Advanced certificate
iedqnc1	NPQ:A7a Number of qualifications obtained - 514
iedqnc3	Trade certificate or apprenticeship
iedqnc4	NPQ:A7a Number of qualifications obtained - 521
iedqnsn	Other certificate - level II
iedqnos	NPQ:A7a Number of qualifications obtained - 524
iedqnnun	Other certificate - level I
ichknrs	NPQ:A7a Number of qualifications obtained - 598
iedqnsl	Other certificate - level III
iedqnsn	NPQ:A7a Number of qualifications obtained - 599
iedqnos	Other certificate - level IV
iedqnnun	NPQ:A7a Number of qualifications obtained - 600
ichknrs	Secondary school - lower level
iedqnsn	NPQ:A7a Number of qualifications obtained - 611
iedqnos	Secondary school - highest level
iedqnnun	NPQ:A7a Number of qualifications obtained - 998
ichknrs	Other
iedqnsl	NPQ:A7a Number of qualifications obtained - 000
iedqnsn	level unknown
iedqnos	NPQ:A7b Check A7a

A7b CHECK A7a:

- If code 001 circled (nursing qual).....1→A7c
- Else2→A7d

A7c Looking at SHOWCARD 4, what type of nursing qualification do you have? *MULTI RESP*

Enrolled nurse.....511
 Associate diploma / Diploma
 (2 years full-time or equivalent)421
 Undergraduate diploma / Advanced Diploma
 (3 years full-time or equivalent)411
 Bachelor degree but not honours312
 Honours bachelor degree311
 Triple, Double Certificate Nurse / Registered
 Nurse, Sister.....310
 Post-graduate diploma / Graduate Diploma211
 Masters Degree120
 Doctorate110
 Other (*if 'other' course provide details below*)997

Title of course _____

Description _____

Length of course (f/t equivalent) _____

iednrsdc	NPQ:A7c What type of nursing qualification do you have - Doctorate
iednrsm	NPQ:A7c What type of nursing qualification do you have - Masters degree
iednrsgd	NPQ:A7c What type of nursing qualification do you have - Post-graduate diploma/Graduate diploma
iednrstd	NPQ:A7c What type of nursing qualification do you have - Triple, Double Certificate Nurse, Registered Nurse, Sister
iednrshd	NPQ:A7c What type of nursing qualification do you have - Honours bachelor degree
iednrsbd	NPQ:A7c What type of nursing qualification do you have - Bachelor degree but not honours
iednrsav	NPQ:A7c What type of nursing qualification do you have - Undergraduate diploma/Advanced diploma
iednrsdp	NPQ:A7c What type of nursing qualification do you have - Associate diploma/Diploma
iednrse	NPQ:A7c What type of nursing qualification do you have - Enrolled nurse
iednrsrf	NPQ:A7c What type of nursing qualification do you have - Refused
iednrsdk	NPQ:A7c What type of nursing qualification do you have - Dont know
iednrsos	NPQ:A7c What type of nursing qualification do you have - Other
iednrsc3	NPQ:A7c What type of nursing qualification do you have - Other certificate - level III
ichktch	NPQ:A7d Check A7a

A7d CHECK A7a:

If code 002 circled (teaching qual) 1 → A7e
 Else 2 → A8

A7e Looking at SHOWCARD 5, what type of teaching qualification is that? *MULTI RESP*

TPTC (Trained Primary Teaching Cert.).....421
 TSTC (Trained Secondary Teaching Cert)
 TITC (Trained Infants Teaching Cert).....411
 Associate Diploma /Diploma
 (1-2 years full-time or equivalent)498
 Undergraduate Diploma of Teaching (Dip T)
 (3 years full-time or equivalent)499
 Bachelor Degree but not honours.....312
 Honours Bachelor Degree311
 Graduate Certificate.....221
 Postgraduate Diploma, Graduate Diploma,
 Diploma of Education (Dip Ed)
 (after Bachelor Degree or Undergrad Diploma).211
 Masters Degree120
 Doctorate110
 Other (*if 'other' course provide details below*)997

Title of course _____

Description _____

Length of course (f/t equivalent) _____

iedtchdc	NPQ:A7e What type of teaching qualification do you have - Doctorate
iedtchms	NPQ:A7e What type of teaching qualification do you have - Masters degree
iedtchgd	NPQ:A7e What type of teaching qualification do you have - Postgraduate diploma, Graduate diploma, Diploma of Education
iedtchgc	NPQ:A7e What type of teaching qualification do you have - Graduate certificate
iedtchhd	NPQ:A7e What type of teaching qualification do you have - Honours bachelor degree
iedtchbd	NPQ:A7e What type of teaching qualification do you have - Bachelors degree but not honours
iedtchts	NPQ:A7e What type of teaching qualification do you have - TSTC
iedtchtp	NPQ:A7e What type of teaching qualification do you have - TPTC
iedtchdp	NPQ:A7e What type of teaching qualification do you have - Associate diploma/Diploma
iedtchav	NPQ:A7e What type of teaching qualification do you have - Undergraduate diploma of teaching
iedtchr	NPQ:A7e What type of teaching qualification do you have - Refused
iedtchdk	NPQ:A7e What type of teaching qualification do you have - Dont know
iedtchos	NPQ:A7e What type of teaching qualification do you have - Other

A8 CHECK A7a:

- If code 993 only circled 1 → A10
 If code 994 only circled 2 → A11
 Else proceed 3 → A9

ichknoq NPQ:A8 Check A7a

A9 In which country did you complete your (...highest qual from A7a...)?

If two or more qualifications at the same level ask for most recent.

Australia	1101	Malaysia	5203
United Kingdom	2100	Netherlands.....	2308
Ireland / Eire	2201	Philippines.....	5204
New Zealand.....	1201	USA.....	8104
China (excl Taiwan)	6101	Viet Nam	5105
Germany	2304	Other (specify)	8888
Greece	3207		
Hong Kong	6102		
Italy	3104		

iedcoqn NPQ:A9 Country completed highest education

A10 Are you currently enrolled in a course of study for a trade certificate, diploma, degree or any other educational qualification?

Do not include any hobby or recreational courses.

- Yes 1
 No (not an option if still studying ie A7a=994) 2 → A13

iedcgen NPQ:A10 Currently enrolled in a course

A11 Are you studying this full-time or part-time?

- Full-time student 1
 Part-time student 2

iedcqtyp CPQ:A9c/NPQ:A11 Currently studying full or part time

A12 Looking at SHOWCARD 6, what is the qualification you are studying for?

Allow MULTIPLE RESPONSE if studying for more than one qualification.

Secondary school qualification – lower level	<u>600</u>
Secondary school qualification – highest level	<u>611</u>
Certificate level I	<u>524</u>
Certificate level II	<u>521</u>
Certificate level III	<u>514</u>
Certificate level IV	<u>511</u>
Certificate – don't know level	<u>500</u>
Diploma (2 years full-time or equivalent)	<u>421</u>
Associate Degree	<u>413</u>
Advanced Diploma (3 years full-time or equivalent)	<u>411</u>
Bachelor degree but not honours	<u>312</u>
Honours bachelor degree	<u>311</u>
Graduate certificate	<u>221</u>
Graduate diploma	<u>211</u>
Masters degree	<u>120</u>
Doctorate	<u>110</u>
Other (if 'other' course, provide details below)	<u>997</u>

Title of course _____

Description _____

Length of course (f/t equivalent) _____

Don't know.....999

iedcqdc	NPQ:A12 Qualifications studying for - Doctorate
iedcqms	NPQ:A12 Qualifications studying for - Masters degree
iedcqgd	NPQ:A12 Qualifications studying for - Graduate diploma
iedcqgc	NPQ:A12 Qualifications studying for - Graduate certificate
iedcqhd	NPQ:A12 Qualifications studying for - Honours bachelor degree
iedcqbd	NPQ:A12 Qualifications studying for - Bachelor degree but not honours
iedcqdn	NPQ:A12 Qualifications studying for - Diploma NFI
iedcqav	NPQ:A12 Qualifications studying for - Advanced diploma
iedcqad	NPQ:A12 Qualifications studying for - Associate degree
iedcqdp	NPQ:A12 Qualifications studying for - Diploma
iedcqcd	NPQ:A12 Qualifications studying for - Certificate - dont know level
iedcq4	NPQ:A12 Qualifications studying for - Certificate - level IV
iedcq3	NPQ:A12 Qualifications studying for - Certificate - level III
iedcq2	NPQ:A12 Qualifications studying for - Certificate - level II
iedcq1	NPQ:A12 Qualifications studying for - Certificate - level I
iedcqsl	NPQ:A12 Qualifications studying for - Secondary school - lower level
iedcqsh	NPQ:A12 Qualifications studying for - Secondary school - highest level
iedcqdk	NPQ:A12 Qualifications studying for - Dont know
iedcqrf	NPQ:A12 Qualifications studying for - Refused
iedcqos	NPQ:A12 Qualifications studying for - Other
iedcqun	NPQ:A12 Qualifications studying for - 000 level unknown

A13 How long has it been since you left full-time education for the first time (since age 15)?

Still in FT education (currently studying, have not taken a gap between school and further education) 97 → B1

Else complete one of the boxes below:

Record number of years	OR
<input type="text"/>	<input type="text"/>
<small>Else if less than one year, record number of months</small>	

It is important to get this accurately. If respondent pauses at all, ask:

How old were you when you left full-time education for the first time?

Record respondent's age

Enter age left FT education for the 1st time

$$(3) = (1) - (2)$$

(1)	(2)
(3)	

This means it has been ... years since you left FT education for the first time?

Amend (2) if necessary. When (3) is correct, go to A14.

If they never went to school, put 15 at (2).

iehtseha NPQ:A13 How long since left full time education for first time

iehtseyr NPQ:A13 Years since left full-time education

iehtsemt NPQ:A13 Months since left full-time education

A14 Now of these [years / months], how many [years / months] in total have you spent ...

a. **In paid work? (including both full- or part-time work)**

Full years	Full months if less than 1 year
<input type="text"/>	<input type="text"/>
OR	
<input type="text"/>	<input type="text"/>

b. **Unemployed and looking for work? (NB: you do not have to be receiving unemployment benefits to be classified as unemployed)**

c. **Other (neither working nor looking for work)?**

Total

check total matches A13

iehtjbyr NPQ:A14a1 Years in paid work
iehtjbmt NPQ:A14a2 Months in paid work

iehtujyr NPQ:A14b1 Years unemployed and looking for work

iehtujmt NPQ:A14b2 Months unemployed and looking for work

iehtoyn NPQ:A14c1 Years Other
iehtomt NPQ:A14c2 Months Other

iehttott NPQ:A14 Total years since left school - Manual addition

A15 CHECK A14c: Is there any time recorded in either of the shaded boxes at A14(c)?

Yes, time recorded in shaded boxes at A14c 1 → A16

No time recorded in shaded boxes at A14c 2 → B1

ichka14c NPQ:A15 Check any time recorded in A14c

A16 Looking at SHOWCARD 7, what was your main activity during those [years / months] you spent neither working nor looking for work?

SINGLE RESP

- Retired / Voluntarily inactive 01
Home duties / Child care 02
Study / Went to school, TAFE or university 03
Own disability or handicap 04
Own illness or injury 05
Looking after ill or disabled person 06
Travelling / On holiday / Leisure activities 07
Working in an unpaid voluntary job 08
Other activity (*please specify*) 07 98

iehmacto NPQ:A16 Main activity during time spent neither working nor looking for work

B. EMPLOYMENT STATUS

B1 At any time at all during the last 7 days, did you do any work in a job, business or farm?

- Yes 1 →B3
No 2

iesbrd DV: Current labour force status - broad
1 Employed
2 Unemployed
3 Not in the labour force

B2 Did you have a job, business or farm, but did not work during the last 7 days because of holidays, sickness or any other reason (such as maternity leave or on workers compensation)?

- Yes 1
No 2 →D1

iesdtl DV: Current labour force status - detail
1 Employed ft
2 Employed pt
3 Unemployed, looking for ft work
4 Unemployed, looking for pt work
5 Not in the labour force, marginally attached
6 Not in the labour force, not marginally attached

B3 [Do / did] you work ...

- for an employer for wages or salary? 1 →B5
in your own business with employees? 2
in your own business with no employees? 3
without pay in a family business? 4 →B12

[If none of the above]

What then are your working arrangements?

- Receive payment in kind 5 →B5
Unpaid voluntary worker 6 →D1
Mutual obligation / Work for the Dole 7 →D1
For Govt in job creation / CDEP job 8 →B5

If respondent says they work in more than one job, code in respect of the job that they get the most pay from.

B4 Is that business incorporated? (Please refer to SHOWCARD B4 for a definition of an incorporated business.)

- Yes 1 →B5
No 2 →B12
Don't know 9 →B12

B5 CHECK B1: Did respondent work in the last 7 days?

Yes (B1=1) 1 → B12

No (B1=2) 2 → B6

B6 How long have you been away from work?

Record number of full weeks

--	--

 weeks

OR

number of full months

--	--

 months

Don't know, but less than 4 weeks 4

Don't know, but 4 weeks or more 5

B7 CHECK B6: Has respondent been away from work for 4 weeks or more?

Yes, away from work 4 weeks or more 1 → B8

No, away from work less than 4 weeks 2 → B12

B8 Were you on workers' compensation during the last 7 days?

Yes 1

No 2 → B10

B9 Do you expect to return to work for your current employer?

Yes 1 → B12

No 2 → D1

Don't know 9 → D1

B10 Was the main reason for your absence from work during the last 4 weeks because you were on strike or were locked out?

Yes 1 → B12

No 2

B11 Were you paid, or will you be paid, for any part of the last 4 weeks?

Yes 1 → B12

No 2 → D1

B12 CHECK B3 and B4: Classify remaining respondents.

B3=1 or 5 or 8 (Employee) 1 → C1a

B4=1 (Employee of own business) 2 → C1a

B4=2 or 9 (Employer / Self-employed) 3 → C1a

B3=4 (Unpaid family worker) 4 → C1a

iesempst B12 Current employment status

C. CURRENT EMPLOYMENT

- C1a Including any paid or unpaid overtime, how many hours per week do you usually work in all your jobs?**

This includes any work done at the workplace and at home.

Don't include time "on-call"; these are NOT considered usual working hours.

**IF HAS LOST JOB IN THE LAST 7 DAYS, SAY:
The questions in this section refer to the most recent job for which you received pay in the last 7 days.**

Hours per week →C2
Hours vary.....997 →C1b

ijbhruw C1a Hours per week usually worked in all your jobs

- C1b Including any paid or unpaid overtime, how many hours per week do you work *on average* over a usual 4-week period in *all* your jobs?**

Hours per week

ijbhrua C1b Hours per week worked on average (over 4 week period) in all your jobs

C2 CHECK C1a / C1b: Hours usually worked per week.

C1a /b =35 hours or more (works full-time)....1→C4

C1a/ b =34 hours or less (works part-time)2→C3

ichkhru C2 Check if works part-time

- C3 You have said that (currently) you usually work fewer than 35 hours per week. What is the main reason for your working part-time hours rather than full-time hours?**

SINGLE RESP

- Own illness or disability01
- Caring for children02
- Caring for disabled or elderly relatives (not children).....03
- Other personal or family responsibilities.....04
- Going to school, college, university etc.....05
- Could not find full-time work06
- Prefer part-time work.....07
- Involved in voluntary work08
- Attracted to pay premium attached to part-time / casual work09
- Welfare payments or pension may be affected by working full-time.....10
- Getting business established.....11
- Prefer job & part-time hours are a requirement of the job.....12
- Other (*please specify*)97- 98

ijbptrea C3 Main reason for working PT hours rather than FT

- C4 If you could choose the number of hours you work each week, and taking into account how that would affect your income, would you prefer to work ...**

fewer hours than you do now? 1
about the same hours as you do now? 2 → C6
or more hours than you do now? 3
Don't know 9 → C6

ijbhrcpr C4 Prefer to work

- C5 In total, how many hours a week, on average, would you choose to work? Again, take into account how that would affect your income.**

This includes any work done at the workplace and at home.

Prompt: If respondent indicates they would prefer not to work at all, emphasise that this also means they will receive no income from wages or salary.

TOTAL preferred hours
per week

ijbprhr C5 Total hours per week would choose to work

- C6 Do you currently have more than one job? That is, do you work for more than one employer? (Include any jobs from which you are away because of holidays, sickness, disability or some other reason.)**

Include only paid work.

The number of jobs does not refer to the number of clients or contracts.

Yes – have 2 or more jobs 1
No – only have 1 job 2 → C8

ijbn C6 Currently have more than one job

- C7a I am now going to ask you some questions about your main job. That is, the job from which you usually get the most pay each week.**

Including any paid or unpaid overtime, how many hours per week do you *usually* work in your main job?

This includes any work done at the workplace and at home.

Don't include time "on-call"; these are NOT considered usual working hours.

Hours → C8

Hours vary 997 → C7b

ijbmhruw C7a Hours per week usually work in main job

- C7b Including any paid or unpaid overtime, how many hours per week do you work *on average* over a usual 4-week period in your main job?**

Hours

ijbmhrau C7b Hours per week work on average in main job

**C8 On which days of the week do you usually work
(in your main job)?**

- Monday to Friday.....1 →C10
Nine day fortnight2 →C9b
Days vary from week to week.....3 →C9a
Days vary from month to month4 →C9a
Other (please specify days below)7-8

Monday.....	1
Tuesday.....	2
Wednesday	3
Thursday	4
Friday	5
Saturday.....	6
Sunday	7

ijbmday C8 Type of work schedule

- ijbmday1 C8b Days of the week usually work - Monday
ijbmday2 C8b Days of the week usually work - Tuesday
ijbmday3 C8b Days of the week usually work - Wednesday
ijbmday4 C8b Days of the week usually work - Thursday
ijbmday5 C8b Days of the week usually work - Friday
ijbmday6 C8b Days of the week usually work - Saturday
ijbmday7 C8b Days of the week usually work - Sunday

**C9a How many days do you usually work in a
4-week period? IF THEY SAY IT VARIES, ASK:
What would it average out to?**

If a respondent says 7 days or less – confirm that this is the number of days usually worked over a 4-week period.

Number of days

--	--

(maximum 28 days)

ijbmmt C9a Number of days usually worked in a 4 week period

C9b And do you usually work on weekends?

- Yes1
No.....2

ijbwwe C9b And do you usually work on weekends

C10 Looking at SHOWCARD C10, which of these best describes your current work schedule in your (main) job?

- A regular daytime schedule.....01
A regular evening shift.....02
A regular night shift.....03
A rotating shift (changes from days to evenings to nights)04
Split shift (two distinct periods each day)05
On call06
Irregular schedule.....07
Other (please specify)08

ijbmsch C10 Current work schedule

C11 What kind of work do you do in this job? That is, what is your occupation called and what are the main tasks and duties you undertake in this job? Please describe fully.

OCCUPATION TITLE (*Obtain full title. Try to avoid one-word answers. For example, "shipping clerk", not just "clerk", "dairy farmer", not just "farmer", and "builder's labourer", not just "labourer".*)

ijbm062 DV: C11 Occupation 2-digit ANZSCO 2006

MAIN TASKS / DUTIES (*For example: recording accounts, frying fish and chips, operating plastic extruding machine.*)

C12 How long in total have you worked in your current occupation? Include time spent in this same occupation with previous employers or in previous businesses.

If one year or more, record number of full years

--	--

 years

OR

If less than one year, record number of full weeks

--	--

 weeks

ijboccha C12b Time worked in current occupation - answered years or weeks

ijboccyr C12bi Years worked in current occupation

ijboccwk C12bii Weeks worked in current occupation

ijbemlha C13 Time worked for current employer - answered years or weeks

ijbemlyr C13i Years worked for current employer

ijbemlwk C13ii Weeks worked for current employer

C13 And how long have you worked [for your current employer / in your current business]?

If one year or more, record number of full years

--	--

 years

OR

If less than one year, record number of full weeks

--	--

 weeks

C14 What kind of industry, business or service is carried out at the business address at which you work? Describe fully (e.g., dairy farming, footwear manufacturing, clothing retail store).

ijbmi62 DV: C14 Current main job industry. 2-digit ANZSIC 2006

C15 (In your main job), are any of your usual working hours worked *at your home* (that is, the address of your usual place of residence)?

Yes.....1

No.....2 → C19a

ijbmh C15 Any of usual working hours worked at home

C16 Approximately how many hours each week do you usually work at home (for your main job only)?

Hours per week → C18
Hours vary 997 → C17

ijbmhrhw C16 Hours each week usually work at home

C17 How many hours per week do you work at home *on average* over a usual 4-week period (for your main job only)?

Hours per week

ijbmhrha C17 Hours work on average each week at home

C18 Are the hours worked at home the result of a formal arrangement with your employer?

Yes 1
No 2
Not applicable — self-employed 7

ijbmagh C18 Are hours worked at home result of formal arrangement with employer

C19a Do you belong to a trade union?

Yes 1 → C20
No 2
Don't know 9

ijbtu C19a Belong to trade union

C19b Do you belong to any other union or employee association?

Only include professional employee associations which serve the work related interests of the respondent. Do not include associations which only accord members professional status in their field.

Yes 1
No 2
Don't know 9

ijbou C19b Belongs to other union or trade association

**C20 CHECK B12 on page 10: Employee status.
C20 MUST match B12.**

Employee 1 → C21a
Employee of own business 2 → C27
Employer / Self-employed 3 → C27
Unpaid family worker 4 → C30

ichkb12 C20 Check B12 employment status

Employees only

C21a Does your employer provide you with paid holiday leave? (Again, we're talking about your main job.)

Yes 1
No 2
Don't know 9

ijbmhl C21a Does employer provide paid holiday leave

C21b Does your employer provide you with paid sick leave?

Yes.....1
No.....2
Don't know.....9

ijbmsl C21b Does employer provide paid sick leave

C22 Looking at SHOWCARD C22, which of these categories *best* describes your current contract of employment?

Employed on a fixed-term contract.....1
Employed on a casual basis2
Employed on a permanent or ongoing basis3
Other (*please specify*)7-8

ijbmcnt C22 Employment contract - current job

C23 Can you look at SHOWCARD C23 and tell me which category best describes how your pay is currently set?

Collective (enterprise) agreement.....1
Individual agreement (or contract)2
Combination of collective / enterprise agreement and individual agreement3
Paid exactly the Award (or APCS) rate.....4
Other (*please specify*)7-8

Don't know9

ijbmpays C23 How pay is currently set

C24 I would like you to think about your employment prospects over the next 12 months. What do you think is the per cent chance that you will leave your job voluntarily (that is, quit or retire) during the next 12 months?

0% (i.e., no chance) — 100% (i.e., absolute certainty)
Record % %
Not currently working996-999

ijbmplej C24 Percent chance of voluntarily leaving job in next 12 months

C25 What do you think is the per cent chance that you will lose your job during the next 12 months? (That is, get retrenched or fired or not have your contract renewed.)

0% (i.e., no chance) — 100% (i.e., absolute certainty)
Record % %
Not currently working996-999

ijbmnopj C25 Percent chance of losing job in next 12 months

C26 If you were to lose your job during the next 12 months, what is the per cent chance that the job you eventually find and accept would be at least as good as your current job, in terms of wages and benefits?

0% (i.e., no chance) — 100% (i.e., absolute certainty)

Record % %

Would not seek another job..... 997
Not currently working..... 996 999

ijbmpgj C26 Percent chance will find and accept job at least as good as current job

All employed persons (inc. self-employed)

C27 Would you describe yourself as an independent contractor? The information on SHOWCARD C27 might help you to answer this.

Yes 1
No 2
Don't know 9

ijbindc C27 Do you describe yourself as an independent contractor?

C28 (In your main job), do you have income tax deducted directly from your earnings each pay period?

Yes 1
No 2
Don't know 9

ijbmpaye C28 Currently PAYE

C29 Are you employed through a labour-hire firm or temporary employment agency? That is, the agency pays your wage?

Yes 1
No 2

ijbmlh C29 Employed through labour-hire firm or temporary employment agency

C30 As part of your job, do you normally supervise the work of other employees?

Yes 1
No 2

ijbmvsr C30 Normally supervise work of other employees

C31 Looking at SHOWCARD C31, which one of these categories *best* describes your [employer / business]?

Commercial

Private sector "for profit" organisation.....1
Government business enterprise or commercial statutory authority2
Other commercial (*please specify*)3

ijbmmply C31 Which of these best describes employer/business

Non-commercial

Private sector "not-for-profit" organisation4
Other government organisation, such as a public service department, local councils, schools and universities.....5
Other non-commercial (*please specify*)6

Don't know [LAST RESORT ONLY]9

C32 Looking at SHOWCARD C32, approximately how many people (including yourself) are employed [at the place at which you work / in your business]? (Include all employees, including part-time workers and casuals. Do not include contractors.)

One person (self).....01
2 to 4.....02
5 to 9.....03
10 to 19.....04
20 to 49.....05
50 to 99.....06
100 to 199.....07
200 to 499.....08
500 or more09

Don't know but fewer than 2010
Don't know but 20 or more11

ijbmwps C32 Number employed at place of work

C33 Does your [employer / business] operate from more than one location in Australia?

Yes 1
No 2 ➔ C35
Don't know 9

ijbmmpw C33 Does employer operate from more than one location in Australia

C34 Looking at SHOWCARD C34, approximately how many people work [for your employer / in your business] at locations throughout Australia? Make sure you include your work place as well.

Less than 20 01
20 to 99 02
100 to 499 03
500 to 999 04
1,000 to 4,999 05
5,000 to 19,999 06
20,000 or more 07

Don't know but fewer than 100 08
Don't know but 100 or more 09
Don't know 99

ijbmemsz C34 Number of people employed at locations throughout Australia

C35 I now have some questions about how satisfied or dissatisfied you are with different aspects of your job. (Again I remind you that we are only interested here in your main job.)

If not currently employed, also read out:

These questions refer to the most recent job you were working in.

Looking at SHOWCARD C35, please pick a number between 0 and 10 to indicate how satisfied or dissatisfied you are with the following aspects of your job. The more satisfied you are, the higher the number you should pick. The less satisfied you are, the lower the number.

	0-10	D/K
a Your total pay?	<input type="text"/>	99
b Your job security?	<input type="text"/>	99
c The work itself (what you do)?	<input type="text"/>	99
d The hours you work?	<input type="text"/>	99
e The flexibility available to balance work and non-work commitments?	<input type="text"/>	99
f All things considered, how satisfied are you with your job?	<input type="text"/>	99

ijbmipay C35a Total pay satisfaction
ijbmsssec C35b Job security satisfaction
ijbmswrk C35c The work itself satisfaction
ijbmshrs C35d The hours you work satisfaction
ijbmsflx C35e The flexibility to balance work and non-work commitments satisfaction
ijbmsall C35f Overall job satisfaction

C36 At any time in the last 4 weeks have you actually looked for a new job?

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

ijbnewjs C36 At any time in the last 4 weeks, have you actually looked for a new job

C37 CONFIRM AGE: Just to confirm - are you 44 years or younger, or 45 years or older?

44 years of age OR YOUNGER1 →C39
45 years of age OR OLDER.....2

irtage1 C37 Check age 45 or older

C38 At what age do you expect to retire (completely) from the paid workforce?

If range provided, probe for single most likely age.

Enter age

Do not expect ever to retire997
Don't know999

irtiagel C38 At what age do you plan to retire from the workforce

C39 Now go to Section E on page 20. (Section D is only for persons not currently employed.)

D. PERSONS NOT IN PAID EMPLOYMENT

D1 Now some questions on looking for work. At any time during the last 4 weeks have you looked for paid work?

PROBE for part-time or full-time.

Reassure people receiving social security payments that all information is confidential.

No – have not looked for work in last 4 weeks1 →D10
Yes – looked for full-time work only2
Yes – looked for part-time work only3
Yes – looked for any work, FT or PT4

ijsl4wk D1 Looked for work in last 4 weeks

Job seekers

D2 Looking at SHOWCARD D2, at any time in the last 4 weeks have you done any of these things?

MULTI RESP

- Written, phoned or applied in person to an employer for work? 01
 Answered an advertisement for a job? 02
 Checked factory noticeboards, or used the touchscreens at Centrelink offices? 03
 Been registered with Centrelink as a jobseeker? 04
 Checked or registered with an employment agency? 05

Have you done anything else to find a job?

- PROBE AND CODE BELOW. NOTE: THE FOLLOWING CODES ARE NOT LISTED ON THE SHOWCARD
 Advertised or tendered for work 07
 Contacted friends / relatives 08
 Looked in newspapers, but did not actually answer an advertisement for a job 09
 Looked on internet, but did not actually answer an advertisement for a job 10
 Other (please specify) 98

None of the above (query D1) 97

ijsactwp	D2 Done any of following in last 4 weeks - Written, phoned or applied in person to an employer for work
ijsactaa	D2 Done any of following in last 4 weeks - Answered an advertisement for a job
ijsactfn	D2 Done any of following in last 4 weeks - Checked factory noticeboards, or used the touchscreens at Centrelink offices
ijsactrc	D2 Done any of following in last 4 weeks - Been registered with Centrelink as a job-seeker
ijsactea	D2 Done any of following in last 4 weeks - Checked or registered with an employment agency
ijsactat	D2 Done any of following in last 4 weeks - Advertised or tendered for work
ijsactfr	D2 Done any of following in last 4 weeks - Contacted friends/relatives
ijsactln	D2 Done any of following in last 4 weeks - Looked in newspapers, but did not actually answer an advertisement for a job
ijsactli	D2 Done any of following in last 4 weeks - Looked on internet but did not actually answer an advertisement for a job
ijsnoact	D2 Done any of following in last 4 weeks - None of the above
ijsactos	D2 Done any of following in last 4 weeks - Other
ijsactna	D2 Done any of following in last 4 weeks - No answer
ijsactrf	D2 Done any of following in last 4 weeks - Refused
ijsactdk	D2 Done any of following in last 4 weeks - Dont know

D3 When did you begin looking for work?

We are only interested here in the most recent episode of unemployment.

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

If exact date unknown, accept an approximation of the number of weeks since commencing looking for work.]

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

Don't know – PROBE FOR:

- Less than 2 years ago 1
 2 to less than 5 years ago 2
 5 years or more 3

ijstha D3 When began looking for work - answered date or weeks or dont know (ask year ranges)

ijstday D3d Day began looking for work
 ijstmth D3m Month began looking for work
 ijstyr D3y Year began looking for work

ijstwks D3 Number of weeks since began looking for work

ijstbrd D3 Years began looking for work

ijshjsa D4 Hours spent in job search activities in last week

ijsia D5 Currently receiving Intensive Assistance from JN provider

D4 Approximately how many hours have you spent in job search activities during the last week?

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

D5 Are you currently in receipt of “Intensive Assistance” from a Job Network Provider?

- Yes 1
 No 2
 Don't know 9

D6a If you had found a job, could you have started work last week?

Yes.....1 →D6d
No.....2
Don't know.....9 →D6d

ijsavail D6a If found a job, could have started work last week

D6b What were the reasons you could not have started work last week?

Waiting to start a job.....1
Other.....2 →D6d

ijsnarea D6b Reasons could not have started work last week

D6c Will you be starting work in the next 4 weeks?

Yes.....1 →D9
No.....2

ijsn4wk D6c Starting work in next 4 weeks

D6d Could you start work in the next 4 weeks if work was available?

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

ijsan4wk D6d Start in next 4 weeks if work available

D7 Looking at SHOWCARD D7, since you began looking for work on [date in D3], have you had trouble getting a job for any of these reasons?**MULTI RESP**

Own ill health or disability01
Employers thought you were too young or too old02
Hours were unsuitable03
Transport problems or it was too far to travel04
Did not have the required education, training or skills05
Did not have enough work experience06
Language difficulties07
No jobs in line of work08
Too many applicants for the available jobs09
Just no jobs at all10
Difficulties in finding child care11

ijsreahd D7 Reasons had trouble getting a job - Own ill health or disability
ijsreayo D7 Reasons had trouble getting a job - Employers thought you were too young or too old
ijsreahu D7 Reasons had trouble getting a job - Hours were unsuitable
ijsreatr D7 Reasons had trouble getting a job - Transport problems or it was too far to travel
ijsrealt D7 Reasons had trouble getting a job - Did not have the required education, training or skills
ijsreale D7 Reasons had trouble getting a job - Did not have enough work experience
ijsreald D7 Reasons had trouble getting a job - Language difficulties
ijsreanw D7 Reasons had trouble getting a job - No jobs in your line of work
ijsreama D7 Reasons had trouble getting a job - Too many applicants for the available jobs
ijsreanj D7 Reasons had trouble getting a job - Just no jobs at all
ijsreafc D7 Reasons had trouble getting a job - Difficulties in finding child care
ijsreadm D7 Reasons had trouble getting a job - Discrimination against migrant/ethnic groups
ijsreaof D7 Reasons had trouble getting a job - Other family responsibilities
ijsreano D7 Reasons had trouble getting a job - None of the above
ijsreaos D7 Reasons had trouble getting a job - Other difficulties
ijsreana D7 Reasons had trouble getting a job - No answer
ijsrearf D7 Reasons had trouble getting a job - Refused
ijsreadk D7 Reasons had trouble getting a job - Dont know
ijsreaoq D7 Reasons had trouble getting a job - Overqualified

What other difficulties have you had?

PROBE AND CODE BELOW; DO NOT PROMPT: NOTE THE FOLLOWING CODES ARE NOT LISTED ON THE SHOWCARD
Discrimination against migrant / ethnic groups12
Other family responsibilities (not child care difficulties)13
Other difficulties (please specify)98

None of the above97 →D9

CHECK D7: If more than one response at D7 ask
D8, otherwise go to D9

D8 What is the *main* difficulty you have had in getting a job?

Enter code from D7

ijsmreas D8 Main difficulty in getting a job

D9 Since you began looking for work on [date in D3], how many job offers have you received?

Enter number of job offers

ijsnoffr D9 Number of job offers since began looking for work

Now skip to D15

Have not looked for work in last 4 weeks

D10 Looking at SHOWCARD D10, which of these categories *best* describes your main activity since you last worked or looked for work?

- | | |
|--|---|
| Retired / Voluntarily inactive | 1 |
| Home duties / Child care | 2 |
| Study / Went to school, TAFE or university | 3 |
| Own illness, injury or disability..... | 4 |
| Looking after ill or disabled person..... | 5 |
| Travel / On holiday / Leisure activities..... | 6 |
| Working in an unpaid voluntary job | 7 |
| Other activity (<i>please specify</i>) | 8 |

inlmact D10 Main activity since last worked/looked for work

D11 Even though you are not looking for work now, would you like a job? (Assume that suitable child care arrangements could be found.)

- | | |
|--------------------------|---------|
| Yes | 1 |
| Maybe / It depends | 2 |
| No..... | 3 → D19 |
| Don't know..... | 9 → D19 |

inlwantj D11 Like a job

D12 What are all the reasons you have not been looking for work in the last 4 weeks?

<i>PROBE FULLY</i>	<i>MULTI RESP</i>
<u>Have a job to go to</u>	<u>.01</u>
Personal reasons	
Own illness, injury or disability.....	<u>.02</u>
Pregnancy / maternity leave	<u>.03</u>
Studying / returning to studies	<u>.04</u>
Does not need to work.....	<u>.05</u>
To give others a chance	<u>.06</u>
Welfare payment / pension may be affected	<u>.07</u>
Moved house / Holidays	<u>.08</u>
Lack of transport.....	<u>.09</u>
No time	<u>.10</u>
Child care reasons	
Prefers to look after children.....	<u>.11</u>
Difficulties in finding child care.....	<u>.12</u>
Waiting until youngest child starts pre-school / primary school	<u>.13</u>
Other child care reason	<u>.14</u>
Other family reasons	
Ill health of someone other than self / other family reasons	<u>.15</u>
Believes no work available or couldn't find work because:	
Too young / too old	<u>.16</u>
Lacks necessary training or qualifications	<u>.17</u>
Lacks necessary experience.....	<u>.18</u>
Difficulties with language / ethnic background	<u>.19</u>
Difficulties with reading / writing.....	<u>.20</u>
No jobs available in line of work.....	<u>.21</u>
No jobs available with suitable hours.....	<u>.22</u>
No jobs available at all.....	<u>.23</u>
On a job-related training program.....	<u>.24</u>
Other reasons (please specify)	<u>.98</u>

inlreahj	D12 Not looking for work - Have a job to go to
inlreaoi	D12 Not looking for work - Own illness, injury or disability
inlreapm	D12 Not looking for work - Pregnancy/Maternity leave
inlreast	D12 Not looking for work - Studying/returning to studies
inlreann	D12 Not looking for work - Does not need to work
inlreago	D12 Not looking for work - To give others a chance
inlreawp	D12 Not looking for work - Welfare payment/pension may be affected
inlreamh	D12 Not looking for work - Moved house/Holidays
inlreatr	D12 Not looking for work - Lack of transport
inlreant	D12 Not looking for work - No time
inlreapc	D12 Not looking for work - Prefers to look after children
inlreafc	D12 Not looking for work - Difficulties in finding child care
inlreayc	D12 Not looking for work - Waiting until youngest child starts pre-school/primary school
inlreaoe	D12 Not looking for work - Other child care reason
inlreaho	D12 Not looking for work - Ill health of someone other than self/other family reason
inlreayo	D12 Not looking for work - Too young/too old
inlrealt	D12 Not looking for work - Lacks necessary training or qualifications
inlreale	D12 Not looking for work - Lacks necessary experience
inlreald	D12 Not looking for work - Difficulties with language/ethnic background
inlrearw	D12 Not looking for work - Difficulties with reading/writing
inlrealw	D12 Not looking for work - No jobs available in line of work
inlreash	D12 Not looking for work - No jobs available with suitable hours
inlreaja	D12 Not looking for work - No jobs available at all
inlreajt	D12 Not looking for work - On a job related training program
inlreasos	D12 Not looking for work - Other reasons
inlreani	D12 Not looking for work - Not interested
inlreatb	D12 Not looking for work - Taking a break/rest from working
inlreaww	D12 Not looking for work - Do voluntary/unpaid work
inlrearf	D12 Not looking for work - Refused
inlreadk	D12 Not looking for work - Dont know

CHECK D12: If more than one response at D12, ask D13, otherwise go to D14

D13 Which of these was the *main* reason you were not looking for work in the last 4 weeks?

Enter code from D12

inlmreas D13 Main reason not looking for work in last 4 weeks

D14 If you were offered a suitable job (and suitable child care was available), could you start work in the next four weeks?

Yes 1
No 2
Don't know 9

inlan4wk D14 If offered suitable job, start work in next four weeks

All looking for work or wanting work

D15 Assuming work was available, what would be the *lowest wage per hour*, before any tax is taken out, that you would accept?

If asked, inform respondent to assume that they could choose to work as few or as many hours per week as they liked.

Record whole dollars

\$	
----	--

Don't know [Last resort only] 999 →D17

ijsminws D15 Lowest acceptable wage per hour

D16 If you were offered a job paying [response to D15] dollars per hour, how many hours per week would you prefer to work in that job?

Hours per week preferred

--	--

→D18

ijsminhr D16 Hours per week prefer to work at that rate per hour

D17 If you were offered a job, how many hours per week would you prefer to work?

Hours per week preferred

--	--

ijsminhj D17 Hours per week prefer to work in any job

D18 I would like you to think about your employment prospects over the next 12 months. What do you think is the per cent chance that you will find a suitable job during the next 12 months? Choose the number from 0% to 100% that is closest to your answer.

0% (i.e., no chance) — 100% (i.e., absolute certainty)

Record %

--

%

Don't know 999

ijspstuit D18 Percent chance of finding suitable job in next 12 months

Retirement

D19 CONFIRM AGE: Just to confirm, are you 44 years or younger, or 45 years or older?

44 years of age OR YOUNGER 1 →D22
45 years of age OR OLDER 2

irtagen NPQ:D19 Retirement plans - Check age 45 or older

D20 (Can I just check), have you retired (completely) from the workforce?

- Yes.....1 → D21a
No.....2 → D21b
Never in workforce.....3 → E9
Don't know/can't say.....4.9 → D22

irtcompn NPQ:D20 Retired completely from the workforce

D21a In which year did you retire?

Record year → D23a

irtyrn NPQ:D21a Year retired

D21b At what age do you expect to retire (completely) from the paid workforce?

If range provided, probe for single most likely age.

Enter age

Do not expect ever to retire997

Don't know999

irtiagen NPQ:D21b Age plan to retire from the workforce

D22 CHECK A14a: Any time spent in work in A14(a)?

ELSE ASK: Have you ever been in paid work?

Yes - have been in paid work1 → D23a

No - have never been in paid work.....2 → E9

ichkpw NPQ:D22 Check A14a Ever been in paid work

Work history of those not currently in paid work

D23a How long is it since you last worked for pay, in any job or business for *two weeks or more*?

If less than one year, record number of full weeks weeks

iujtsjha NPQ:D23a How long since last worked for pay - answered weeks or years (not currently in paid work)

ELSE RECORD BELOW:

- At least 1 year, but not 2.....01
At least 2 years, but not 3.....02
At least 3 years, but not 4.....03
At least 4 years, but not 5.....04
At least 5 years, but not 6.....05
6-10 years.....06 → D30
11-15 years.....07 → D30
16-20 years.....08 → D30
21 years or more.....09 → D30
Don't know99 → D30

iujwkj NPQ:D23a How long since last worked for pay - less than 1 year - weeks (not currently in paid work)

iujyru NPQ:D23a How long since last worked for pay - years (not currently in paid work)

D23b I'm now going to ask you some questions about your *most recent* job.

Including any paid or unpaid overtime, how many hours a week did you *usually* work in your last job?

This includes any work done at the workplace and at home.

Don't include time "on-call"; these are NOT considered usual working hours.

Hours per week ➔ D25

Hours vary 997 ➔ D24

iujlhruw NPQ:D23b Hours a week usually worked, last job (not currently in paid work)

D24 Including any paid or unpaid overtime, how many hours per week did you work *on average* over a usual 4-week period in your most recent job?

Hours per week

iujlhrua NPQ:D24 Hours a week worked on average, last job (not currently in paid work)

D25 What kind of industry, business or service was carried out at the business address at which you previously worked? Describe fully (e.g., dairy farming, footwear manufacturing, clothing retail store.)

iujlji62 DV: NPQ:D25 Industry, last job (not currently in paid work) 2-digit ANSIC 2006

D26 In that job, did you work ...

- for an employer for wages or salary? 1
in your own business with employees? 2
in your own business with no employees? 3
without pay in a family business? 4 ➔ D28

[If none of the above]

What then were your working arrangements?

- Received payment in kind 5 ➔ D28
Unpaid voluntary worker 6 ➔ D28
Other (specify) 8

iujljtyp NPQ:D26 Employment type, last job (not currently in paid work)

D27a How much were you paid in that job before tax or anything else was taken out?

Enter amount (whole \$) \$

iujljwsa NPQ:D27a Pay before tax and deductions, last job (not currently in paid work)

Don't know/Can't even estimate 999999 ➔ D28

D27b And what period does that cover?

Hourly rate	1
Week.....	2
Fortnightly rate.....	3
Four weeks	4
Calendar month	5
Quarter.....	6
Year	7
Don't know	9

iujljwsf NPQ:D27b Frequency of pay, last job
(not currently in paid work)

D28 Looking at SHOWCARD D30, which of the following *best* describes your contract of employment for that job?

Self-employed.....	1
Employed on a fixed-term contract.....	2
Employed on a casual basis.....	3
Employed on a permanent or ongoing basis	4
Other (<i>please specify</i>).....	8

iujljcnt NPQ:D28 Contract of employment, last job (not currently in paid work)

D29 For how long did you work for your last employer?

If less than one year, record
number of full weeks weeks

OR

If one year or more, record
number of full years years

iujljtha NPQ:D29 Employment length - answered weeks or years, last job (not currently in paid work)

iujljtwk NPQ:D29 Weeks worked for last employer (not currently in paid work)

iujljtyr NPQ:D29 Years worked for last employer (not currently in paid work)

D30 What kind of work did you do in your last job?

That is, what was your occupation called and what were the main tasks and duties you undertook in that job? Please describe fully.

OCCUPATION TITLE (*Obtain full title. Try to avoid one-word answers. For example, "shipping clerk", not just "clerk", "dairy farmer", not just "farmer", and "builder's labourer", not just "labourer".*)

MAIN TASKS / DUTIES (*For example: recording accounts, frying fish and chips, operating plastic extruding machine.*)

iujljo62 DV: NPQ:D30 Occupation last job (not currently in paid work) 2-digit ANZSCO 2006

D31 What was the *main* reason you stopped working in that job?

SINGLE RESP

Employment reasons

Job was temporary or seasonal.....	01
Holiday job	02
Got laid off / No work available / Retrenched / Made redundant / Employer went out of business / Dismissed etc.	03
Not satisfied with job (e.g., unhappy with hours, pay, working conditions, boss, other workers)	04
To obtain a better job / Just wanted a change / To start a new business.....	05
Self-employed: Business closed down for economic reasons (went broke / liquidated / no work / not enough business).....	06
Self-employed: Business closed down or sold for other reasons.....	07
<u>Personal reasons</u>	
Retired / Did not want to work any longer.....	08
Own sickness, disability or injury	09
Pregnancy / To have children	10
To stay at home to look after children, house or someone else	11
Travel / have a holiday.....	12
Returned to study / Started study / Needed more time to study	13
Spouse / partner transferred.....	14
Too much travel time / too far from public transport	15
Other (<i>please specify</i>).....	97

iujljrea NPQ:D31 Main reason stopped working

D32 CONFIRM: Can I just check. Have you been employed in any job during the past 12 months?

iujjblyr D32 Employed in any job in the past 12 months

- Yes 1
No 2 → E9

E. OTHER LABOUR MARKET ACTIVITY

Work-related training

E1 During the past 12 months, have you taken part in any education or training schemes, as part of your employment?

We are only interested in structured training courses the respondent has received. Do not include training they may have participated in as a trainer.

Yes.....1
No2 → E9

ijttrwrk E1 Taken part in any work related training in past 12 months

E2 I would now like to ask you about where and when these training courses were conducted.

Please answer yes or no to the following.

Were any of these conducted ...

Yes No

- a at your place of employment (or while on the job) during paid work time?.....1.....2
- b at your place of employment, but in your own time?.....1.....2
- c at some other place during paid work time?.....1.....2
- d at some other place, but in your own time?.....1.....2

ijtppewt E2a Job-related training at place of employment - during paid work time
ijtppeot E2b Job-related training at place of employment - in your own time
ijttopwt E2c Job-related training at some other place - during paid work time
ijttopot E2d Job-related training at some other place - in your own time

By "work time", we mean time for which the respondent is paid. This includes usual working hours as well as any paid overtime.

Receiving time off in lieu for attending training courses should be treated the same as being paid for those hours.

E3 In total, how many different training courses did you attend in the last 12 months?

Record no. of courses

--	--

Don't know99

ijttnum E3 Number of different training courses attended last 12 months

E4 During the last 12 months, on how many days did you attend (that / these) training course(s)? Please count part days as whole days.

Record no. of days

--	--	--

Don't know999

ijttdays E4 Number of days attended training course

If respondent answers in weeks, convert answer to days (multiply by 5) and confirm with respondent.

E5 (And on average,) how many hours [each / that day did you spend on [that course / those courses]? Please do not include breaks, lunch, or travel time.

Record no. of hours per day

Don't know..... 99

ijtthrs E5 Average number of training hours per course day

E6 Looking at SHOWCARD E6, have you contributed towards the cost of any of this training in any of these ways?

Yes 1
No 2

ijttrcst E6 Contributed to cost of job-related training (fees/materials/books/paid for travel/took unpaid leave)

E7 Looking at SHOWCARD E7, what were the aims of any of this training?

MULTI RESP

To help you get started in your job 1
To improve your skills in your current job 2
To maintain professional status and/or meet occupational standards 3
To prepare you for a job you might do in the future or to facilitate promotion 4
To develop your skills generally 5
Because of safety / health concerns 6
Other aims (please specify) 8

ijttrhgs E7 Aim of this training - To help you get started in your job
ijttrisc E7 Aim of this training - To improve your skills in your current job
ijttrmps E7 Aim of this training - To maintain professional status and/or meet occupational standards
ijttrpfj E7 Aim of this training - To prepare you for a job you might do in the future or to facilitate promotion
ijttrdsg E7 Aim of this training - To develop your skills generally
ijttrhsc E7 Aim of this training - Because of health / safety concerns
ijttros E7 Aim of this training - Other aims
ijttrrf E7 Aim of this training - Refused
ijttrdk E7 Aim of this training - Dont know

E8 IF CURRENTLY EMPLOYED, READ OUT:

Looking at SHOWCARD E8, to what extent do you think you could use the new skills you have acquired from any of this training if you got a new job with a different employer?

IF NOT CURRENTLY EMPLOYED, READ OUT:
Looking at SHOWCARD E8, to what extent do you think you could use the new skills you have acquired from any of this training if you got a new job?

Not at all 1
Only to a limited extent 2
To a moderate extent 3
To a great extent 4
To a very great extent 5
Did not learn any new skills 7-8

ijttuse E8 How would you use your new skills if got a new job

Calendar

E9 I am now going to go over your work and study activities again so I can record these on a calendar.

NOTES: - Record data for the period up to, and including, time of interview.

- The 3 boxes for each month represent the start, middle and end of the month.

- Holidays should not be treated as a break in the usual activity.

a. Since July 2008, have you been enrolled in school or any course of study? IF YES: Was that full-time or part-time?

Yes 1 - FILL IN CALENDAR FOR ALL TIME PERIODS ENROLLED

No 2

- F/t or p/t study is determined by enrolment status (not hours).

- Only record courses or study that lead to a qualification

Whether activity occurs	2008												2009																																								
	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	July	Aug	Sep	Oct	Nov	Dec																							
Enrolled in school / educational course																																																					
On FT basis																																																					
icaeft																																																					
01																																																					
02																																																					
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Record start date (month and year) if more than 1 job at start of calendar.																																																					
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NOTE: THERE NEEDS TO BE A MARK AGAINST EVERY TIME PERIOD IN THE CALENDAR PRIOR TO THE DATE OF INTERVIEW

Leave from work

E10a Thinking now just of the last 12 months, did you spend any time on workers' compensation?

Yes 1
No 2 → E11

iwcany E10a During last 12 months, did you spend any time on workers compensation

E10b How many months, weeks or days during the last 12 months were you absent from work because you were on workers' compensation?

months
OR
 weeks
OR
 days

iwcaha E10b Absent from work and on workers compensation in past 12 months - how answered

iwcamt E10b Absent from work and on workers compensation in past 12 months - Months
iwcawk E10b Absent from work and on workers compensation in past 12 months - Weeks
iwcada E10b Absent from work and on workers compensation in past 12 months - Days

E11 CHECK E9b: Has respondent had a job since July 2008?

Yes 1 → E12a
No 2 → E16

ialjbcia E11 Check if has had a job since start of calendar

E12a During the last 12 months, have you spent any time on paid annual (vacation) leave?

Public holidays are not to be counted as annual leave days.

Yes 1
No 2 → E13a

ialpdany E12a Any paid annual leave in last 12 months

E12b How many weeks or days did you spend on paid annual leave?

weeks
OR
 days

ialpdaha E12b Amount of paid annual leave in last 12 months - how answered

ialpdwk E12b Amount of paid annual leave in last 12 months - Weeks

ialpdda E12b Amount of paid annual leave in last 12 months - Days

E13a During the last 12 months, have you taken any paid sick leave?

Yes 1
No 2 → E14a

ialskskany E13a Any paid sick leave in last 12 months

E13b How many weeks or days did you spend on paid sick leave?

weeks
OR
 days

ialskskha E13b Amount of paid sick leave in last 12 months - how answered

ialskskwk E13b Amount of paid sick leave in last 12 months - Weeks

ialskskda E13b Amount of paid sick leave in last 12 months - Days

E14a Looking at SHOWCARD E14, during the last 12 months, have you taken any of these other forms of paid leave?

Showcard list: Maternity; Paternity; Parental; Long-service; Bereavement; Family; Carers; Other paid leave.

Yes.....1
No.....2 → E15a

E14b How many months, weeks or days did you spend on these types of paid leave during the last 12 months?

months
OR
 weeks
OR
 days

E15a During the last 12 months, apart from public holidays, have you missed work or taken any other time off for which you were not paid? (We are only interested in time-off when you were scheduled to be at work.)

Yes.....1
No.....2 → E16

E15b How many months, weeks or days did you take off?

months
OR
 weeks
OR
 days

E16 CHECK E9c: Has respondent been not employed BUT looking for work?

Yes.....1 → E17
No.....2 → F1a

ialopany E14a Any other paid leave in last 12 months

ialopha E14b Amount of other paid leave in last 12 months - how answered

ialopmt E14b Amount of other paid leave in last 12 months - Months

ialopwk E14b Amount of other paid leave in last 12 months - Weeks

ialopda E14b Amount of other paid leave in last 12 months - Days

ialupany E15a Taken any unpaid leave in last 12 months

ialupha E15b Amount of unpaid leave in last 12 months - how answered

ialupmt E15b Amount of unpaid leave in last 12 months - Months

ialupwk E15b Amount of unpaid leave in last 12 months - Weeks

ialupda E15b Amount of unpaid leave in last 12 months - Days

ichkca E16 Has been not employed but looking for work for any period in the calendar

Mutual obligation activity

E17 Looking at SHOWCARD E17, since July 2008, have you been required by Centrelink or a Job Network provider to do any of the things listed?

MULTI RESP

Study	<u>01</u>
Part-time paid work	<u>02</u>
Voluntary unpaid work	<u>03</u>
Community Work organised by a Community Work Coordinator	<u>04</u>
Work for the Dole	<u>05</u>
Job Search Training (training to search for jobs, write applications and prepare for interviews)	<u>06</u>
Approved literacy / numeracy training	<u>07</u>
Green Corps	<u>08</u>
Job Placement Employment and Training (JPET)	<u>09</u>
Community Development Employment Projects	<u>10</u>
Relocating to an area of better employment prospects	<u>11</u>
Australian Apprenticeship Access Program (training to get into a new apprenticeship).....	<u>12</u>
Youth Pathways Program	<u>13</u>
Defence Force Reserve	<u>14</u>
None of the above	<u>97</u> ➔ F1a

imoreqps	E17 Ever been required by Centrelink/JN Provider to do... - Part-time study
imoreqpw	E17 Ever been required by Centrelink/JN Provider to do... - Part time paid work
imorequv	E17 Ever been required by Centrelink/JN Provider to do... - Voluntary unpaid work
imoreqcw	E17 Ever been required by Centrelink/JN Provider to do... - Community Work organised by a Community Work Coordinator
imoreqwd	E17 Ever been required by Centrelink/JN Provider to do... - Work for the dole
imoreqjs	E17 Ever been required by Centrelink/JN Provider to do... - Job Search Training
imoreqln	E17 Ever been required by Centrelink/JN Provider to do... - Approved literacy/numeracy training
imoreqgc	E17 Ever been required by Centrelink/JN Provider to do... - Green Corps
imoreqje	E17 Ever been required by Centrelink/JN Provider to do... - Job Placement Employment and Training
imoreqcd	E17 Ever been required by Centrelink/JN Provider to do... - Community Development Employment projects
imoreqrl	E17 Ever been required by Centrelink/JN Provider to do... - Relocating to an area of better employment prospects
imoreqaa	E17 Ever been required by Centrelink/JN Provider to do... - Australian Apprenticeship Access Program
imoreqyp	E17 Ever been required by Centrelink/JN Provider to do... - Youth Pathways Program
imoreqdf	E17 Ever been required by Centrelink/JN Provider to do... - Defence Force Reserve
imoreqno	E17 Ever been required by Centrelink/JN Provider to do... - None of the above
imoreqrif	E17 Ever been required by Centrelink/JN Provider to do... - Refused
imoreqdk	E17 Ever been required by Centrelink/JN Provider to do... - Dont know

E18 Are you currently still undertaking any of these activities?

Yes.....	<u>1</u> ➔ F1a
No	<u>2</u>

imocreq E18 Currently still undertaking any of these activities

E19 When did you last do any of these activities?

Month on calendar

--	--

Year on calendar

2	0	
----------	----------	--

Early.....1

Mid.....2

Late.....3

OR

Activities not done – was required to do them, but didn't actually do97

imolha E19 Last did any activity to improve employment prospects - calendar date given or not done

imolmth E19 Month last did activity to improve employment prospects

imolyr E19 Year last did any activity to improve employment prospects

imol3rd E19 Time of month last did activity to improve employment prospects

F. INCOME

F1a I am now going to ask you some questions about your income. This is a very important part of this study. Your answers will assist in better understanding the way people live in Australia.

Remember that everything you tell me will remain confidential and NO information that would identify you will be used in any data analysis.

F1b CONFIRM: Do you *currently* receive income from wages or salary?

- Yes.....1
No2 →F10
Don't know9 →F10

iwschave F1b Currently receive income from wages/salary

F2 CHECK C6 on page 11: Is respondent currently working in more than one job?

- Yes, has more than one job (C6=1) 1 →F3
No, has one job only (C6=2) 2 →F3
Respondent did not answer C6 3 →F3

iwscmtoj F2 Currently working in more than one job?

F3 For your [job / main job] what was the total gross amount of your most recent pay *before* tax or anything else was taken out?

It will help to answer this question if you can refer to your last pay-slip.

If respondent does not know his/her last pay, but does know his/her annual salary, accept the annual amount.

Enter amount (whole \$) →F4c

- Nil.....999997 →F5a
Don't know999999 →F4a

iwscmga F3 Total gross amount of most recent pay before deductions

F4a Do you know what your income from wages and salaries in this job is *after* tax is taken out?

- Yes.....1
No2 →F5b

iwscmnk F4a Do you know what your income from wages and salaries in this job is after tax is taken out

F4b What was the total amount of your most recent pay *after* tax was taken out?

Enter amount (whole \$)

- Nil.....999997

iwscmna F4b What was the total amount of your most recent pay after tax was taken out

F4c And what period does that cover?

- Week.....1
Fortnight2
Month.....3
Year4 →F6

iwscmcf F4c What period does that cover

F5a And is that amount your *usual* pay?

Yes 1 →F6
 No 2

iwsclmu F5a Is that your usual pay

F5b How much do you *usually* receive each pay period?

IF VARIES: Looking over the last month, on average how much would you have received each week or each fortnight?

Enter amount (whole \$)

Nil 999997 →F6
 Don't know 999999 →F6

iwsclmuga F5b How much do you usually receive each pay period

F5c And is that before tax or after tax is taken out?

Before tax is taken out 1
 After tax 2
 Don't know 9

iwsclmutx F5c Main job - is that before or after tax

F5d And what period does that cover?

Week 1
 Fortnight 2
 Month 3
 Year 4

iwsclmuf F5d Main job - what period does that cover

F6 CHECK F2: Does respondent currently hold one job or more than one?

Has more than one job (F2=1) 1 →F7
 Has only one job (F2=2) 2 →F10
 Respondent did not answer C6 (F2 = 3) 3 →F10

ichkfst F6 Number of jobs in F2

F7 Now I would like to ask you some questions about [your other job / all your other jobs together]. What was the total amount of your most recent gross pay *before* tax or anything else was taken out for [your other job / all your other jobs]?

It will help to answer this question if you can refer to your last pay-slip[s] from your other job[s].

If respondent does not know their last pay, but does know his/her annual salary in these jobs, accept the annual amount.

Enter amount (whole \$) →F8c

iwscoaga F7 Total amount of your most recent gross pay all other jobs

Nil 999997 →F9a
 Don't know 999999 →F8a

F8a Do you know what your income from wages and salaries in [your other job / all your other jobs] is after tax is taken out?

Yes.....1
No.....2 ➔F10

iwsconk F8a Do you know what your income from wages and salaries in all other jobs is after tax is taken out

F8b What was the total amount of your most recent pay from [your other job / all your other jobs] after tax was taken out?

Enter amount (whole \$)

Nil.....999997

iwscona F8b What was the total amount of your most recent pay from all other jobs after tax was taken out

F8c And what period does that cover?

Week.....1
Fortnight2
Month.....3
Year4 ➔F10

iwscocf F8c Period covered

F9a Is that your *usual* pay from [your other job / all your other jobs]?

Yes.....1 ➔F10
No2

iwscou F9a Is that your usual pay from all other jobs

F9b How much do you *usually* receive each pay for [your other job / all your other jobs]?

Enter amount (whole \$)

Nil.....999997 ➔F10
Don't know999999 ➔F10

iwscouga F9b How much do you usually receive each pay for all other jobs

F9c And is that before tax or after tax is taken out?

Before tax is taken out.....1
After tax2
Don't know9

iwscotx F9c Other jobs - is that before or after tax

F9d And what period does that cover?

Week.....1
Fortnight2
Month.....3
Year4

iwscouf F9d Other jobs - what period does that cover

F10 I would now like to ask you some questions about income received from government benefits, pensions or allowances.

F11 CONFIRM AGE AND SEX

IF MALE ASK: **Are you aged 65 or more?**

IF FEMALE ASK: **Are you aged 63 or more?**

- If male aged 65 or more 1 →F12a
If female aged 63 or more 2 →F12a
Otherwise 3 →F13
-

ibnage

F11 Check age and sex - currently eligible for Age Pension

F12a Do you currently receive the Age Pension from the Australian federal government?

- Yes 1
No 2 →F13
Don't know 9 →F13
-

ibncap

F12a Do you currently receive the Age Pension from the Australian federal government

F12b How much do you currently receive each fortnight?

Enter amount (whole \$) \$

ibncapa

F12b How much do you currently receive each fortnight

F13 Excluding any Family Tax Benefit payment, do you currently receive any (*other*) income from the government in the form of a benefit, pension or allowance?

We are only interested here in payments from Australian governments.

- Yes 1
No 2 →F17
Don't know 9

ibncoth1

F13 Do you currently receive any income from the government in the form of a benefit, pension or allowance

F14 Looking at SHOWCARD F14, do you currently receive any of these government pensions or allowances? (Which ones?)

MULTI RESP

- Newstart Allowance 01
Mature Age Allowance 02
Service Pension (paid by Dept of Veteran Affairs)
[exclude superannuation, e.g., DFRDB] 03
Disability Support Pension (paid by Centrelink) 04
Wife Pension 05
Carer Payment 06
Sickness Allowance 07
Widow Allowance (including Widow B Pension,
paid by Centrelink) 08
Special Benefit 09
Partner Allowance 10
Parenting Payment (NOT Family Tax Benefit) 11
Youth Allowance 12
Austudy / Abstudy payment 13
None of these 97 →F16a
Don't know 99 →F16a

ibncnws	F14 Do you currently receive any of these government pensions or allowances - Newstart Allowance
ibncma	F14 Do you currently receive any of these government pensions or allowances - Mature Age Allowance
ibncsrv	F14 Do you currently receive any of these government pensions or allowances - Service Pension
ibncdsp	F14 Do you currently receive any of these government pensions or allowances - Disability Support Pension
ibncwfp	F14 Do you currently receive any of these government pensions or allowances - Wife Pension
ibnccrp	F14 Do you currently receive any of these government pensions or allowances - Carer Payment
ibncsck	F14 Do you currently receive any of these government pensions or allowances - Sicknes Allowance
ibncwdw	F14 Do you currently receive any of these government pensions or allowances - Widow Allowance
ibncsp	F14 Do you currently receive any of these government pensions or allowances - Special Benefit
ibncprt	F14 Do you currently receive any of these government pensions or allowances - Partner Allowance
ibncpnt	F14 Do you currently receive any of these government pensions or allowances - Parenting Payment
ibncyth	F14 Do you currently receive any of these government pensions or allowances - Youth Allowance
ibncsty	F14 Do you currently receive any of these government pensions or allowances - Austudy/Abstudy payment
ibncna	F14 Do you currently receive any of these government pensions or allowances - No answer
ibncnon1	F14 Do you currently receive any of these government pensions or allowances - None of these
ibnrcrf	F14 Do you currently receive any of these government pensions or allowances - Refused
ibncdk1	F14 Do you currently receive any of these government pensions or allowances - Dont know

F15 How much was the last [pension / allowance] payment you received from [this source / these sources] [those listed at F14], and how many weeks did that payment cover?

a. Enter amount (whole \$)

b. Enter number of weeks

ibncal	F15a How much was the last payment you received from these sources
ibncwl	F15b How many weeks did that payment cover

F16a Looking at SHOWCARD F16, do you *currently* receive any of these other pensions, allowances or other forms of assistance? PROBE: Any others? RECORD UNDER 16a

F16b For each source marked, also ask:

How much was the latest payment you received from (specify payment / allowance)?

F16c How many weeks was that payment for?

	16a	16b	16c
		Amount	No. of weeks
War Widow's / Widower's Pension (paid by DVA)	1	\$ <input type="text"/>	<input type="text"/>
Disability Pension (paid by DVA)	2	\$ <input type="text"/>	<input type="text"/>
Carer Allowance	3	\$ <input type="text"/>	<input type="text"/>
Baby Bonus.....	4	\$ <input type="text"/>	<input type="text"/>
Pensions or benefits paid by overseas governments	5	\$ <input type="text"/>	<input type="text"/>
<u>Other government pensions benefits, excluding Superannuation, Family Tax Benefit payment (specify)</u>	8	\$ <input type="text"/>	<input type="text"/>
None of the above	7		

F17 Looking at SHOWCARD F17, I would now like to ask you a similar set of questions in relation to your income for the last financial year. This is the period covering 1st July 2008 to 30th June 2009. This might seem repetitive but it's really important that we get this information, so please take your time working it out. First, did you work for an employer for wages and salary at any time during the *last financial year*?

Yes 1

No 2 →F21

F18 Last financial year, what was your total wage and salary income from all jobs before tax or anything else was deducted?

Do not include income from businesses. This should be gathered at F23, rather than here.

Enter annual amount (\$)
(whole \$) →F21

Don't know..... 999999 →F19

ibncwar	F16a Pensions/allowances/assistance received - War Widows Pension
ibncdva	F16a Pensions/allowances/assistance received - Disability Pension
ibnccra	F16a Pensions/allowances/assistance received - Carer Allowance
ibncbb	F16a Pensions/allowances/assistance received - Baby Bonus
ibncosp	F16a Pensions/allowances/assistance received - Pensions or benefits paid by overseas governments
ibncnon2	F16a Pensions/allowances/assistance received - None of the above
ibncoth2	F16a Pensions/allowances/assistance received - Other Government pensions/benefits
ibncomob	F16a Pensions/allowances/assistance received - Mobility Allowance
ibncbrv	F16a Pensions/allowances/assistance received - Bereavement Allowance
ibncon	F16a Pensions/allowances/assistance received - Other non income support payments
ibncoal	F16a Pensions/allowances/assistance received - Other allowances
ibncondor	F16a Pensions/allowances/assistance received - Double Orphan Pension
ibnccde	F16a Pensions/allowances/assistance received - CDEP (Community Development Employment Project)
ibncref	F16a Pensions/allowances/assistance received - Refused
ibnckdk2	F16a Pensions/allowances/assistance received - Dont know
ibnccwara	F16b Amount of latest payment - War Widows Pension
ibnccvaa	F16b Amount of latest payment - Disability Pension
ibnccraa	F16b Amount of latest payment - Carer Allowance
ibnccbba	F16b Amount of latest payment - Baby Bonus
ibnccospa	F16b Amount of latest payment - Pensions or benefits paid by overseas governments
ibncotha	F16b Amount of latest payment - Other Government pensions/benefits
ibncmoba	F16b Amount of latest payment - Mobility Allowance
ibnccbrva	F16b Amount of latest payment - Bereavement Allowance
ibnconaa	F16b Amount of latest payment - Other non income support payments
ibncoala	F16b Amount of latest payment - Other allowances
ibncondora	F16b Amount of latest payment - Double Orphan Pension
ibnccdea	F16b Amount of latest payment - CDEP (Community Development Employment Project)
ibnccwarw	F16c Weeks payment covered - War Widows Pension
ibnccdvaw	F16c Weeks payment covered - Disability Pension
ibnccraw	F16c Weeks payment covered - Carer Allowance
ibnccbww	F16c Weeks payment covered - Baby Bonus
ibnccospw	F16c Weeks payment covered - Pensions or benefits paid by overseas governments
ibncothw	F16c Weeks payment covered - Other Government pensions/benefits
ibncomobw	F16c Weeks payment covered - Mobility Allowance
ibnccbrvw	F16c Weeks payment covered - Bereavement Allowance
ibnconw	F16c Weeks payment covered - Other non income support payments
ibncoalw	F16c Weeks payment covered - Other allowances
ibncondorw	F16c Weeks payment covered - Double Orphan Pension
ibnccdew	F16c Weeks payment covered - CDEP (Community Development Employment Project)
iwsfhave	F17 Work for wages/salary LFY
iwsfga	F18 Gross financial year wages and salaries (\$) [weighted topcode]

F19 Do you know how much your income from wages and salaries was *after* tax was taken out?

Yes.....1
No.....2 ➔ F21

iwsfnk F19 Know total net wage/salary income LFY

F20 What was the total amount of your wage and salary income *last financial year* after tax was taken out?

Enter annual amount
(whole \$) \$

iwsfna F20 Net financial year wages and salaries (\$) [weighted topcode]

F21 During the last financial year did you, at any time:

**work in your own business or farm; or
were a silent partner in a partnership; or
were a beneficiary of a trust (excluding those that are used just for investment purposes)?**

Yes.....1
No.....2 ➔ F27a

ibifhave F21 Work in own business/farm/silent partner/trust beneficiary LFY

F22 Were any of your businesses incorporated businesses? (See SHOWCARD F22 for a definition of incorporated.)

This includes trusts from F21.

Yes.....1
No.....2 ➔ F25a

ibifinc F22 Limited liability Co/incorporated businesses

F23 Excluding dividends, in the last financial year, what was your total income from wages and salary from these incorporated businesses *before* income tax was deducted?

Please exclude wages and salary already reported.

This includes trusts from F21.

Enter amount (whole \$) \$

ibifiga F23 Gross financial year incorporated business (\$) [weighted topcode]

Recorded elsewhere.....9999999
Don't know.....9999999

F24a In the last financial year, did you receive any dividends from your incorporated businesses?

This includes trusts from F21.

Yes.....1
No.....2 ➔ F25a

ibifdiv F24a Dividends LFY

F24b Including only your share, what was your total income from dividends from your incorporated businesses *in the last financial year*?

Enter amount (whole \$) \$

ibifdiva F24b Gross financial year business dividends (\$) [weighted topcode]

Don't know.....9999999

F25a In the last financial year, did you have any unincorporated businesses?

Yes 1
No 2 →F27a

ibifuinc F25a Non-LLC or Unincorporated Business LFY

NOTE: Respondents cannot answer NO to both F25a and F22. If they do, query.

F25b What was your total share of profit or loss from your unincorporated businesses or farms before income tax but after deducting business expenses in the last financial year?

Enter amount (whole \$) →F26

Don't know 9999999 →F27a

ibifuga F25b Unincorporated business financial year income (\$) [weighted topcode]

F26 INTERVIEWER RECORD: Is the amount recorded at F25b a profit or loss?

Profit 1
Loss 2
Break-even 3

ibifup F26 Profit or loss - unincorporated businesses

F27a Looking at SHOWCARD F27a, did you earn more than \$100 during the last financial year in interest from all of these sources combined?

Showcard lists: *interest from banks; other financial institutions; bonds; debentures; cash management trusts; family or other private trust funds; or interest from loans to other persons not in this household.*

Yes 1
No 2 →F28a

ioifint F27a Interest more than \$100

F27b How much did you earn from all of these sources combined? Please include only your share.

Enter full amount if over \$100
(whole \$)

Don't know 999999

ioifinta F27b Financial year interest (\$) [weighted topcode]

F28a During the last financial year did you receive any income in the form of royalties?

Yes 1
No 2 →F28c

ioifroy F28a Receive income from royalties

F28b What was the total amount of income you received from royalties? (Include only your share.)

Enter amount (whole \$)

Don't know 999999

ioifroya F28b Financial year royalties (\$) [weighted topcode]

F28c Looking at SHOWCARD F28c, during the last financial year did you receive any income or dividends from these type of investments?

Showcard lists: company shares; managed funds; property trusts.

Yes.....1
No2 ➔F29a

ioifdiv F28c Receive income from dividends

F28d What was the total amount of income you received from these investments? Include only your share from any joint investments.

Enter amount (whole \$) \$

Don't know999999

ioifdiva F28d Financial year dividends (\$) [weighted topcode]

F29a During the last financial year, did you receive rent from any properties you owned or were buying?

Exclude rent or board from another member of the household, but include income from lodgers.

Yes.....1
No2 ➔F30a

ioifrnt F29a Receive rental income

F29b What was the total amount of income you received from renting properties during the last financial year after expenses were deducted? Your share only. Please exclude rent already included in business income.

Enter amount (whole \$) \$ ➔F29c

Don't know999999 ➔F30a

Already reported (part of business income)...999997 ➔F30a

ioifrnta F29b Financial year rental (\$) [weighted topcode]

F29c INTERVIEWER RECORD: Is the amount recorded at F29b a profit or loss?

Profit.....1
Loss2
Break-even.....3

ioifrntp F29c Financial year rental property - profit or loss

F30a I am now going to ask you about your receipt of government pensions, benefits and allowances during the 2008/2009 financial year. Before I do that, can I first ask if you received any of the government bonus payments listed on SHOWCARD F30?

Yes 1
No 2 →F31

F30b Which ones?

MULTI RESP

Bonus payment for pensioners, seniors, people with disability, carers and veterans (paid in December 2008)	<u>01</u>
Bonus payment for families (paid in December 2008)	<u>02</u>
Single Income Family Bonus (paid in March 2009)	<u>03</u>
Back to School Bonus (paid in March 2009).....	<u>04</u>
Training and Learning Bonus (paid in March 2009).. <u>05</u>	
Temporary supplement to the Education Entry Payment (paid in March 2009)	<u>06</u>
Farmers Hardship Bonus (paid in March or April 2009)	<u>07</u>
Tax bonus for Working Australians (paid around April 2009)	<u>08</u>

F31 Looking at SHOWCARD F31, during the last financial year, did you receive any of these government pensions or allowances? Do not include the bonus payments already mentioned.

Yes 1 →F32a
No 2 →F33a

igbfany	F30a Australian Government financial year bonus - Received any of these bonuses
igbfpens	F30b Australian Government financial year bonus - For Pensioners, seniors, people with disability, carers and veterans (paid in December 2008)
igbffam	F30b Australian Government financial year bonus - For families (paid in December 2008)
igbfsif	F30b Australian Government financial year bonus - Single income family (paid in March 2009)
igfbtbs	F30b Australian Government financial year bonus - Back to school (paid in March 2009)
igbftal	F30b Australian Government financial year bonus - Training and learning (paid in March 2009)
igbfeep	F30b Australian Government financial year bonus - Temporary supplement to the Education Entry Payment (paid in March 2009)
igbfffh	F30b Australian Government financial year bonus - Farmers hardship (paid in March/April 2009)
igbfwa	F30b Australian Government financial year bonus - Tax bonus for working Australians (paid in April 2009)
igbfrf	F30b Australian Government financial year bonus - Refused
igbfdk	F30b Australian Government financial year bonus - Dont know
ibnfhhave	F31 Received any government pensions, benefits or allowances last financial year

F32a Which ones? [FOR EACH ONE RECEIVED, CIRCLE CORRESPONDING NUMBER IN COLUMN A BELOW.]
PROBE: Any others? (excluding Family Tax Benefit and bonus payments already mentioned)

F32b For how many weeks last financial year did you receive the [specify pension / allowance]?
[FOR EACH ONE RECEIVED, WRITE IN NUMBER IN COLUMN B BELOW.]

F32c Including only your share, how much did you receive in total income from the [specify pension / allowance] last financial year? Please include any lump sum advances you received, but do not include any bonus payments previously mentioned.

[FOR EACH ONE RECEIVED, WRITE IN AMOUNT IN COLUMN C BELOW.]

IF RESPONDENT DOES NOT KNOW YEARLY AMOUNT ASK:

What about the average received per fortnight from the [specify pension / allowance]? Are you able to estimate what that amount was? WRITE IN AMOUNTS IN COLUMN D BELOW.

Pension received	How answered (annually/ fortnightly)		A	B	C	OR	D
			No. of weeks received		Annual amount		Average per fortnight
ibnfap	ibnfaph	Age Pension (from Australian Govt)	01	ibnfapw	\$ ibnfa pa		\$ ibnfapf
ibnfnws	ibnfnwsh	Newstart Allowance	02	ibnfnwsw	\$ ibnfnw sa		\$ ibnfnwsf
ibnfm a	ibnfmah	Mature Age Allowance	03	ibnfmaw	\$ ibnfm a a		\$ ibnfmaf
ibnfsrv	ibnfsrvh	Service Pension (paid by DVA) (excl superannuation)	04	ibnfsrvw	\$ ibnfsrv a		\$ ibnfsrvf
ibnfdsp	ibnfdsp h	Disability Support Pension (paid by Centrelink)	05	ibnfdspw	\$ ibnfdspa		\$ ibnfdspf
ibnfdva	ibnfdvah	Disability Pension (paid by DVA)	06	ibnfdvaw	\$ ibnfdvaa		\$ ibnfdvaf
ibnfwfp	ibnfwfph	Wife Pension	07	ibnfwfpw	\$ ibnfwfpa		\$ ibnfwfpf
ibnfcrp	ibnfcrph	Carer Payment	08	ibnfcrpw	\$ ibnfcrpa		\$ ibnfcrpf
ibnfcra	ibnfcrah	Carer Allowance	09	ibnfcraw	\$ ibnfcraa		\$ ibnfcraf
ibnfsck	ibnfsckh	Sickness Allowance	10	ibnfsckw	\$ ibnfscka		\$ ibnfsckf
ibnfwdw	ibnfwdwh	Widow Allowance (including Widow B Pension)	11	ibnfwdww	\$ ibnfwdwa		\$ ibnfwdwf
ibnfwar	ibnfwarh	War Widow's / Widower's Pension (paid by DVA)	12	ibnfwarw	\$ ibnfwara		\$ ibnfwarf
ibnfsp	ibnfsph	Special Benefit	13	ibnfspw	\$ ibnfspa		\$ ibnfspf
ibnfp rt	ibnfp rth	Partner Allowance	14	ibnfp rt w	\$ ibnfp rta		\$ ibnfp rtf
ibnfyth	ibnfythh	Youth Allowance	15	ibnfythw	\$ ibnfytha		\$ ibnfythf
ibnfsty	ibnfstyh	Austudy/Abstudy	16	ibnfstyw	\$ ibnfstya		\$ ibnfstyf
ibnfp nt	ibnfp nth	Parenting Payment	17	ibnfp nt w	\$ ibnfp nta		\$ ibnfp ntf
ibnfb b	ibnfb bh	Baby Bonus	18	ibnfb bw	\$ ibnfb ba		\$ ibnfb bf
ibnfosp	ibnfosp h	Pensions / benefits from overseas governments	19	ibnfospw	\$ ibnfospa		\$ ibnfospf
ibnfoth	ibnfothh	Other government pensions / allowances (specify)	97	ibnfothw	\$ ibnfotha		\$ ibnfothf
ibnmob	ibnmobh	Mobility Allowance		ibnmobw	ibnmoba		ibnmobf
ibnfrv	ibnfrvh	Bereavement Allowance		ibnfrvw	ibnfrva		ibnfrvf
ibnfon	ibnfonh	Other non-income support		ibnfonw	ibnfona		ibnfonf
ibnfoal	ibnfoalh	Other allowances		ibnfoalw	ibnfoala		ibnfoalf
ibnfdor	ibnfdorh	Double Orphan Pension		ibnfdorw	ibnfdora		ibnfdorf
ibnfcde	ibnfcdeh	Community Development Employment Project		ibnfcde w	ibnfcdea		ibnfcdef

F33a Looking at SHOWCARD F33, during the last financial year did you receive payments from any of these sources? Include both lump sums and more regular payments but do not include any payments we have already recorded elsewhere. Also, do not include Family Tax Benefit payments.

PROBE: Any others? [Prompt for cash gifts.]

RECORD UNDER F33a

For each source marked, also ask:

F33b How much did you receive from [specify source] during the last financial year?

	F33a	F33b	
		Estimated value	Don't know
Superannuation / Rollover Fund / Annuity / Life insurance / Allocated Pension Fund	01	\$ 	99999€
Child support / Maintenance	02	\$ 	99999€
Workers compensation / Accident or sickness insurance / Personal accident claims	03	\$ 	99999€
Redundancy and severance payments	04	\$ 	99999€
Inheritance / Bequests	05	\$ 	99999€
Parents - (IF RESPONDENT LIVES WITH PARENTS, SAY: Include any money you may receive as pocket money or as a regular allowance)	06	\$ 	99999€
Other persons not in this household (but excluding any income already reported).....	07	\$ 	99999€
Any other source (specify)	96	\$ 	99999€
None of the above.....	97		

ioifsup	F33a Sources of payments received - Superannuation/Rollover fund/Annuity/Life insurance/Allocated pension fund
ioifcs	F33a Sources of payments received - Child Support/maintenance
ioifwkc	F33a Sources of payments received - Workers compensation/Accident or Sickness insurance
ioifrsv	F33a Sources of payments received - Redundancy and severance payments
ioifinh	F33a Sources of payments received - Inheritance/bequests
IOIFPNT	F33a Sources of payments received - Parents
ioifohh	F33a Sources of payments received - Other persons not in this household
ioiforf	F33a Sources of payments received - Refused
ioifnone	F33a Sources of payments received - None of the above
ioifodk	F33a Sources of payments received - Dont know
ioifoth	F33a Sources of payments received - Any other source
ioifpri	F33a Sources of payments received - Other regular private
ioifirr	F33a Sources of payments received - Other irregular payment
ioifpub	F33a Sources of payments received - Other regular public
ioiflss	F33a Sources of payments received - Lump sum superannuation
ioiflsw	F33a Sources of payments received - Lump sum workers' compensation
ioifsupa	F33b Financial year regular superannuation/annuity payments (\$) [weighted topcode]
ioifcsa	F33b Financial year child support/maintenance (\$) [weighted topcode]
ioifwkca	F33b Financial year regular workers' compensation/accident/sickness insurance (\$) [weighted topcode]
ioifrsva	F33b Financial year redundancy and severance payments (\$)
ioifinha	F33b Financial year inheritance/bequests (\$)
ioifpnta	F33b Financial year transfers from parents (\$) [weighted topcode]
ioifohha	F33b Financial year transfers from other persons not in this household (\$) [weighted topcode]
ioifotha	F33b Financial year any other source (\$)
ioifpria	F33b Estimated value - Other regular private transfers (\$)
ioifirra	F33b Financial year other irregular payments (\$)
ioifpuba	F33b Estimated value - Other regular public (\$)
ioiflssa	F33b Estimated value - Lump sum superannuation (\$)
ioiflswa	F33b Financial year workers' compensation/accident/sickness insurance lump sum payments (\$)

F34 Do you have a credit card or charge card that you use regularly (at least once a month)?
Make sure you also include any store cards you might have.

We're only interested in cards used for personal use, not business.

Note that cards linked directly to the account holder's savings are 'debit' cards and should not be recorded here.

Yes 1
No 2 → G1

icrhavem F34 Any credit, charge or store cards used at least monthly

F35 Looking at SHOWCARD F35, how often is the entire balance on all your credit cards paid off each month?

Hardly ever or never 1
Not very often 2
About half of the time 3
Most months 4
Always or almost always 5

icrpay F35 How often pays off all credit card monthly balances

G. FAMILY FORMATION

G1 How many children in total have you ever had? That is, ever [fathered / given birth to] or adopted?

This only includes natural and adopted children, not step or foster children

TOTAL CHILDREN EVER HAD

All children
itchadn
(a)

IF ZERO (no children ever).....→G12

ELSE (if at least one child).....proceed

How many of these children live in this household
at least 50% of the time?

(b) → LIST IN GRID AT
G15a (on page 36)

itcr DV: Own
resident children
= G1b + G1d

How many live in another household more than 50% of the time?

(c) → LIST BELOW IN G3a

How many usually live in a non-private dwelling, but spend the
remainder of the time mainly with you?

(d) → LIST IN GRID AT
G15a (on page 36)

Non-private dwellings:
boarding school, university
hall of residence, institution

How many other children (not included above) live elsewhere?

(e) → LIST BELOW IN G3a

DO NOT ASK (only record if this information is volunteered)

Number of children who have since died

itcdiedn
(f)

itcnr DV: Own
non-resident
children
= G1c + G1e

G2 CHECK G1c and G1e: Are any children listed at G1c or G1e? (if so, their names should be listed at G3a)

Yes.....1 →G3b

incany

No2 →G12

G3b Could you please tell me the age of [...name(s) of child(ren) listed at G3a...] List age in column G3b.

G3d Looking at SHOWCARD G3d, how far away from you does [...name(s) of child(ren) listed at G3a...] usually live? Record for each child in column G3d. Best estimate OK. If DK where child is living record 9.

ONLY COMPLETE G3e TO G3i FOR CHILDREN AGED 24 YEARS OR LESS.

G3g Did [...name(s) of child(ren) listed at G3a...] attend primary or high school during 2009?

G3h Do you provide or receive any financial support to help meet general everyday expenses of [name(s)]?
For instance, any weekly, fortnightly or monthly child support? Exclude any payments to cover one-off or periodic expenses such as school fees or medical bills.

Probe to find out whether respondent pays or receives everyday financial support and code accordingly for each child in column G3h. If respondent both pays and receives, record net outcome. That is, on the whole, do they end up paying or receiving financial support for everyday expenses?

G3i Do you provide or receive any other financial support? For instance, for things such as school or tuition fees, or medical, dental, or clothing costs that crop up?

Probe to find out whether pays or receives 'other' financial support and code accordingly for each child in column G3i.
If pays and receives, record net outcome.

First name	Age (years)	Sex 1=M 2=F	SHOWCARD A1=<5kms B2= 5-9 C3=10-19 D4= 20-49 E5= 50-99 F6= 100-499 G7=500 plus H8=o/seas	Month and year of birth (enter 99 / 9999 if DK) mnth year	Where does ... usually live? 1= with other parent 2= with other relatives 3= fostered/adopted out 4= living independently 87= other (specify) 9= don't know	Did ... attend school in 2009? 1=Yes 2=No	<u>Everyday</u> financial support (<u>single</u> response) 1 = pays 2 = receives 3 = neither 8 = refused 9 = don't know	'Other' financial support (<u>single</u> response) 1 = pays 2 = receives 3 = neither 8 = refused 9 = don't know
G3a	G3b	G3c	G3d	G3e	G3f	G3g	G3h	G3i
1.	incage1	incsex1	incdst1	incmth1 incyrl1	inculv1	incsty1	incrfs1	incafs1
2.	incage2	incsex2	incdst2	incmth2 incyrl2	inculv2	incsty2	incrfs2	incafs2
3.	incage3	incsex3	incdst3	incmth3 incyrl3	inculv3	incsty3	incrfs3	incafs3
4.	incage4	incsex4	incdst4	incmth4 incyrl4	inculv4	incsty4	incrfs4	incafs4
5.	incage5	incsex5	incdst5	incmth5 incyrl5	inculv5	incsty5	incrfs5	incafs5
6.	incage6	incsex6	incdst6	incmth6 incyrl6	inculv6	incsty6	incrfs6	incafs6
7.	incage7	incsex7	incdst7	incmth7 incyrl7	inculv7	incsty7	incrfs7	incafs7
8.	incage8	incsex8	incdst8	incmth8 incyrl8	inculv8	incsty8	incrfs8	incafs8
9.	incage9	incsex9	incdst9	incmth9 incyrl9	inculv9	incsty9	incrfs9	incafs9
10.	incage10	incsex10	incdst10	incmth10 incyrl10	inculv10	incsty10	incrfs10	incafs10
Allowance made for up to 13 children	incage11	incsex11	incdst11	incmth11 incyrl11	inculv11	incsty11	incrfs11	incafs11
	incage12	incsex12	incdst12	incmth12 incyrl12	inculv12	incsty12	incrfs12	incafs12
	incage13	incsex13	incdst13	incmth13 incyrl13	inculv13	incsty13	incrfs13	incafs13

Only complete columns G3e to G3i if child is aged 24 or less

G4a CHECK G3b: Are all children aged 25 years or more?

- All children are 25 or more..... 1 → G12
Else 2 → G4b

incudr25 G4a Any non-resident child aged < 25

G4b CHECK G3h: Pay or receive everyday financial support?**Any code 1 or 2 in column G3h?**

- Yes, code 1 or 2 listed in column G3h..... 1 → G5a
No code 1 or 2 listed in column G3h..... 2 → G6

incrfs G4b Check everyday financial support in G3h

G5a In total, how much regular financial support do you [pay / receive] for the everyday expenses of [this child / these children]?*Note that for any children under age 18 this will typically mean child support payments.*Enter amount
(whole \$)

Don't know 99999 → G6

incrfsa G5a How much regular financial support do you pay/receive

G5b How often is this amount [paid / received]?

- Weekly..... 1
Fortnightly..... 2
Four weekly 3
Each calendar month..... 4
Yearly 5
Other (please specify) 8

incrfsf G5b How often amount paid/received

G5c INTERVIEWER RECORD: Does the respondent *pay* or *receive* the amount at G5a?

- Pay 1
Receive 2

incrfspr G5c Pay or receive amount at G5a

G6 CHECK G3i: Pay or receive other financial support?**Any code 1 or 2 in column G3i?**

- Yes, code 1 or 2 in column G3i 1 → G7a
No code 1 or 2 in column G3i 2 → G8a

incafs G6 Other financial support in non-resident children grid

G7a How much have you [paid / received] for specific additional expenses such as school fees, medical bills, clothing etc for [this child / these children] over the last 12 months?Enter amount
(whole \$)

Don't know 99999

incafsa G7a Specific additional expenses

G7b INTERVIEWER RECORD: Does the respondent *pay or receive* the amount at G7a?

Pay 1
Receive 2

incafspr G7b Pay or receive amount at G7a

Questions for parents with children aged 17 or less who live elsewhere

G8a CHECK G3b: Are there any children who are aged 17 years or less?

Yes, children aged 17 or less 1 → G8b
No children aged 17 or less 2 → G12

incudr17 G8a Any non-resident children aged < 18

G8b I have already asked you if you actually provide or receive any financial support to help meet the everyday expenses of your children. Can you now tell me whether you are expected to pay or receive any financial support, either by the Child Support Agency, or because you have a private agreement, to help meet these expenses?

Yes 1
No 2 → G9a
Don't know 9 → G9a

incexs G8b Expected to provide/receive financial support for non-resident children

G8c In total, how much regular financial support are you expected to [pay / receive] for the everyday expenses of [this child / these children]?

Enter amount
(whole \$)

Don't know 99999 → G9a

incecsa G8c Amount of expected financial support for non-resident children

G8d And what period does this cover?

Week 1
Fortnight 2
Four weeks 3
Calendar month 4
Year 5
Other (*please specify*) 8

incecspc G8d Period covered expected financial support for non-resident children

G8e INTERVIEWER RECORD: Should the respondent *pay or receive* the amount at G8c?

Pay 1
Receive 2

inceexpr G8e Pay or receive expected financial support for non-resident children

G8f Who decided, or helped you decide, how much child support is expected to be paid?

Child Support Agency.....1
Court.....2
Other parent privately.....3
Respondent on their own.....4
Other party (*please specify*)7

Don't know.....9
Refused8

incexsda G8f Who determined amount expected financial support for non-resident children

G9a I am now going to ask you about the contact you have with [name of youngest child who usually lives elsewhere]. Looking at SHOWCARD G9a, how often do you usually see [...name...].

Daily.....1
At least once a week2
At least once a fortnight.....3
At least once a month.....4
Once every 3 months5
Once every six months6
Once a year.....7
Less than once a year8
Never9 ➔ G12

incfsee G9a Frequency see your child who lives elsewhere

G9b About how many nights each week, fortnight or month does this child usually stay overnight with you?

If respondent refers to weeks rather than nights, record number of full weeks instead of nights. If overnight contact is sparse, interviewer to get estimate for 3, 6 or 12 month period.

Zero overnight stays in a year997

Else: Record number of nights

OR

Record number of full weeks

Per week1
Fortnight....2
4 weeks3
3 months4
6 months5
Year.....6

Per...
Fortnight....2
4 weeks....3
3 months....4
6 months....5
Year6

incngth G9b Youngest non-resident child overnight stays - answered nights or weeks

incngtn G9b Youngest non-resident child overnight stays - number of nights

incngtnp G9b Youngest non-resident child overnight stays - nights - period

incngtw G9b Youngest non-resident child overnight stays - number of weeks

incngtwp G9b Youngest non-resident child overnight stays - weeks - period

G9c And about how many days would [...]name...] spend with you each week, fortnight or month without staying overnight?

If daytime contact is sparse, interviewer to get estimate for 3, 6 or 12 month period.

Zero day visits in a year 997

Else: Record number of days

OR

Record number of full weeks

Per week1

Fortnight....2

4 weeks.....3

3 months4

6 months5

Year.....6

Per...

Fortnight....2

4 weeks.....3

3 months4

6 months5

Year6

incdayh G9c Youngest non-resident child day visits - answered days or weeks

incday G9c Youngest non-resident child day visits - number of days

incdaynp G9c Youngest non-resident child day visits - days - period

incdayw G9c Youngest non-resident child day visits - number of weeks

incdaywp G9c Youngest non-resident child day visits - weeks - period

G10 Looking at SHOWCARD G10, how do you feel about the amount of contact you have with [...]name...]?

Nowhere near enough.....1

Not quite enough2

About right3

A little too much4

Way too much.....5

incsat G10 Opinion of amount of contact with youngest non-resident child

G11a CHECK G3f: Does the youngest child on the list at G3f usually live with their other parent? (G3f=1)

Yes.....1 → G11b

No2 → G12

incchk G11a Check if youngest child lives with other parent

G11b I now have one question about [...]name...]’s other parent. Looking at SHOWCARD G11b, what is the current employment status of that other parent?

Employed full-time (35+ hours per week).....1

Employed part-time (less than 35 hours per week).....2

Not employed BUT is looking for work3

Neither employed NOR looking for work:

Retired.....4

Home duties5

Non-working student6

Other7-8

Don’t know.....9

incesop G11b Current employment status of the other parent

**Resident parent questions
(children living with respondent)**

G12 Do you have responsibility for any grandchildren or any step or foster children who usually live in this household?

- Yes 1
No 2 ➔ G14

ircstepg G12 Has responsibility for any resident step/foster/grandchild

G13 How many of these children do NOT have a natural or adoptive parent living in this household?

Record number ➔ List names of all these children at G15a (then go to G14)

- None, all have natural / adoptive parent in household 97 ➔ G14

ircstepn G13 Number of resident step/foster/grandchildren with no resident natural/adopted parent

G14 CHECK G1b, G1d and G13: Are any children recorded at any of G1b, G1d or G13? (if so their names should be listed at G15a)

- Yes 1 ➔ G15b
No 2 ➔ G25

irchave G14 Has resident children (includes RC without natural parent in HH)

G15b Probe for age of children listed in G15a.

ONLY COMPLETE G15c TO G15d FOR CHILDREN AGED 24 YEARS OR LESS

G15c Did [...] name(s) of child(ren) listed at G15a / attend primary or high school during 2009?

G15d Does [...] name(s) of child(ren) in grid have another parent who lives elsewhere? (This includes a natural or adoptive parent, but not step or foster.) IF YES, record in column G15d.

ONLY COMPLETE G15e TO G15g FOR CHILDREN WITH A PARENT LIVING ELSEWHERE.
G15e Looking at SHOWCARD G15e, how far away from you does ...'s other parent usually live? – Best estimate OK. Only use DK (9) if the person doesn't know where the other parent is living.

G15f Do you receive any financial support from, or pay any financial support to, ...'s other parent to help meet general everyday expenses of (name)? For instance, any weekly, fortnightly or monthly child support? Exclude any payments to cover one-off or periodic expenses such as school fees or medical bills. Probe to find out whether respondent pays or receives everyday financial support and code accordingly for each child in column G15f. If respondent pays and receives, record net outcome. That is, on the whole, do they end up paying or receiving financial support for everyday expenses?

G15g Do you receive any other financial support from, or pay any other financial support to, ...'s other parent? For instance, for school or tuition fees or for medical, dental, or clothing costs that crop up? Probe to find out whether pays or receives 'other' financial support and code accordingly for each child in column G15g. If both (i.e. pays and receives) record net outcome. That is, on the whole, do they end up paying or receiving?

Firstname	Children who live here most of the time	Age (years)	Did ... attend school in 2009? 1=Yes 2=No	SHOWCARD								
				A1= <5kms B2= 5-9 C3=10-19 D4= 20-49 E5= 50-99 F6= 100-499 G7=500 plus H8=o/seas	B2= 5-9 C3=10-19 D4= 20-49 E5= 50-99 F6= 100-499 G7=500 plus H8=o/seas	Everyday financial support (single response) 1= pays 2= receives 3= neither 8= refused 9= don't know	Everyday financial support (single response) 1= pays 2= receives 3= neither 8= refused 9= don't know	'Other' financial support (single response) 1= pays 2= receives 3= neither 8= refused 9= don't know				
Only complete following columns if child has another natural or adoptive parent who lives elsewhere												
Only complete following columns if child is aged 24 or less												
G15a	G15b	G15c	G15d	G15e	G15f	G15g						
1.	ircsty1	ircpew1		ircdts1	ircrfs1	ircafs1						
2.	ircsty2	ircpew2		ircdts2	ircrfs2	ircafs2						
3.	ircsty3	ircpew3		ircdts3	ircrfs3	ircafs3						
4.	ircsty4	ircpew4		ircdts4	ircrfs4	ircafs4						
5.	ircsty5	ircpew5		ircdts5	ircrfs5	ircafs5						
6.	ircsty6	ircpew6		ircdts6	ircrfs6	ircafs6						
7.	ircsty7	ircpew7		ircdts7	ircrfs7	ircafs7						
8.	ircsty8	ircpew8		ircdts8	ircrfs8	ircafs8						
9.	ircsty9	ircpew9		ircdts9	ircrfs9	ircafs9						
10.	ircsty10	ircpew10		ircdts10	ircrfs10	ircafs10						
Allowance made for up to 12 children												

G16 CHECK G15d: Parent who lives elsewhere.**Any code 1s in column G15d?**

Yes, at least one code 1 in G15d.....1→G17

Else (all rows are code 2 in G15d).....2→G25

ircpew

G16 Has resident children with a parent living elsewhere (includes RC without natural parent in HH)

G17 CHECK G15f: Pay or receive everyday financial support?**Any code 1 or 2 in column G15f?**

Yes, code 1 or 2 in column G15f1→G18a

No code 1 or 2 in column G15f2→G19

ircrfs

G17 Check everyday financial support in G15f

G18a Excluding any payments for specific expenses, how much regular (everyday) financial support are you currently [getting from / paying to] the other parent[s] of your [child/children]?*Note that for any children under age 18 this will typically mean child support payments*Enter amount
(whole \$)

Don't know..... 99999 →G19

ircrfsa

G18a Amount of regular financial support from other parents of your children

G18b How often is that amount paid?

- Weekly.....1
- Fortnightly.....2
- Four weekly3
- Each calendar month.....4
- Yearly5
- Other (*please specify*)8

ircrfsf

G18b How often amount paid

G18c INTERVIEWER RECORD: Does the respondent *pay or receive* the amount at G18a?

- Pay1
- Receive2

ircrfspr

G18c Pay or receive amount at G16a

G19 CHECK G15g: Pay or receive other financial support?**Any code 1 or 2 in column G15g?**

Yes, code 1 or 2 in column G15g1→ G20a

No code 1 or 2 in column G15g2→ G21a

ircafs

G19 Check other financial support in G15g

G20a How much have you [received from / paid to] the other parent[s] of your [child/children] for specific additional expenses such as school fees, medical bills, clothing etc over the last 12 months?Enter amount
(whole \$)

Don't know..... 99999

ircafsa

G20a Received from other parents for additional expenses

G20b INTERVIEWER RECORD: Does the respondent *pay or receive* the amount at G20a?

Pay 1
Receive 2

ircafspr G20b Pay or receive amount at G20a

Questions for parents with children aged 17 or less with another parent who lives elsewhere

G21a CHECK G15b and G15d: Any children aged 17 or less AND who have another parent living elsewhere (code 1 in column G15d)?

Yes, 17 or less in G15b AND code 1 in G15d 1 → G21b
Else 2 → G25

ircpew17 G21a Has resident children aged < 18 with a parent living elsewhere (inc RC without natural parent in HH)

G21b I have already asked you if you actually provide or receive any financial support to help meet the everyday expenses of your children. Can you now tell me whether you are expected to pay or receive any financial support, either by the Child Support Agency, or because you have a private agreement, to help meet these expenses?

Yes 1
No 2 → G22a
Don't know 9 → G22a

ircexs G21b Expected to provide/receive financial support for resident children

G21c In total, how much regular financial support are you expected to [pay / receive] for the everyday expenses of [this child / these children]?

Enter amount
(whole \$) \$

Don't know 99999 → G22a

ircexsa G21c Amount of expected financial support for resident children

G21d And what period does this cover?

Week 1
Fortnight 2
Four weeks 3
Calendar month 4
Year 5
Other (please specify) 8

ircexspc G21d Period covered expected financial support for resident children

G21e INTERVIEWER RECORD: Should the respondent *pay or receive* the amount at G21c?

Pay 1
Receive 2

ircexspr G21e Pay or receive expected financial support for resident children

G21f Who decided, or helped you decide, how much child support is expected to be paid?

Child Support Agency.....1
Court.....2
Other parent privately.....3
Respondent on their own.....4
Other party (*please specify*)7

Don't know.....9
Refused8

ircexsda G21f Who determined amount expected financial support for resident children

G22a I am now going to ask you about the contact [name of youngest child with parent living elsewhere] has with [his / her] other parent.

Looking at SHOWCARD G22a, how often does [...name...] usually see [his / her] other parent?

Daily.....1
At least once a week2
At least once a fortnight.....3
At least once a month.....4
Once every 3 months5
Once every six months.....6
Once a year.....7
Less than once a year8
Never.....9 →G25

ircfsop G22a Frequency child sees the other parent

G22b And about how many nights each week, fortnight or month does [...name...] usually stay overnight with their other parent?

If respondent refers to weeks rather than nights, record number of full weeks instead of nights.

If overnight contact is sparse, interviewer to get estimate for 3, 6 or 12 month period.

Zero overnight stays in a year997

Else: Record number of nights

OR

Record number of full weeks

Per week1
Fortnight.....2
4 weeks3
3 months4
6 months5
Year.....6

Per...
Fortnight.....2
4 weeks.....3
3 months....4
6 months....5
Year6

ircngth G22b Youngest resident child overnight stays with other parent - answered nights or weeks

ircngtn G22b Youngest resident child overnight stays with other parent - number of nights

ircngtnp G22b Youngest resident child overnight stays with other parent - nights - period

ircngtw G22b Youngest resident child overnight stays with other parent - number of weeks

ircngtwp G22b Youngest resident child overnight stays with other parent - weeks - period

G22c And about how many days would [...] name ...] spend with their other parent each week, fortnight or month without staying overnight?

If daytime contact is sparse, interviewer to get estimate for 3, 6 or 12 month period.

Zero day visits in a year.....997

Else: Record number of days

OR

Record number of full weeks

- | | |
|----------------|----------------|
| Per week1 | Per ... |
| Fortnight....2 | Fortnight....2 |
| 4 weeks.....3 | 4 weeks.....3 |
| 3 months4 | 3 months4 |
| 6 months5 | 6 months5 |
| Year.....6 | Year6 |

ircdayh G22c Youngest resident child day visits with other parent - answered days or weeks

ircday G22c Youngest resident child day visits with other parent - number of days

ircdaynp G22c Youngest resident child day visits with other parent - days - period

ircdayw G22c Youngest resident child day visits with other parent - number of weeks

ircdaywp G22c Youngest resident child day visits with other parent - weeks - period

G23 Looking at SHOWCARD G23, how do you feel about the amount of contact [...] name ...] has with their other parent?

- | | |
|---------------------------|---|
| Nowhere near enough | 1 |
| Not quite enough | 2 |
| About right | 3 |
| A little too much..... | 4 |
| Way too much..... | 5 |

ircsat G23 Opinion of amount of contact youngest resident child has with non-resident parent

G24 Looking at SHOWCARD G24, what is the current employment status of that other parent?

- | | |
|--|-----|
| Employed – usually works 35+ hours per week | 1 |
| Employed – usually works less than 35 hours per week | 2 |
| Not employed <u>BUT</u> is looking for work | 3 |
| Neither employed <u>NOR</u> looking for work: | |
| Retired | 4 |
| Home duties | 5 |
| Non-working student..... | 6 |
| Other | 7-8 |
| Don't know..... | 9 |

ircesop G24 Current employment status of youngest resident child's other parent

Remaining child-related questions

G25 SEX FILTER

- Male 1 → G26
Female 2 → G27

iftsex G25 Sex Filter

G26 CONFIRM AGE:

Just to confirm, are you ...

- less than 18 years of age? 1 → H1
18-54 years of age? 2 → G28
55 years or older? 3 → H1

iicagem G26 Confirm age for male respondent

G27 CONFIRM AGE:

Just to confirm, are you ...

- less than 18 years of age? 1 → H1
18-44 years of age? 2 → G28
45 years or older? 3 → H1

iicagef G27 Confirm age for female

G28 Now a question about any future children.

Using the scale on SHOWCARD G28, I want you to pick a number between 0 and 10 to show how you feel about having [a child / more children] in the future.

Read if necessary

(The more definite you are that you would like to have [a child / more children], the higher the number you should pick. The more definite you are that you do not want to have [a child / more children], the lower the number.)

This only includes natural children, not adopted.

Record liking from 0 to 10

iiclike G28 Like to have more children in the future

G29 And how likely are you to have [a child / more children] in the future?

Again, pick a number between 0 and 10 using the scale on SHOWCARD G29. The more likely it is that you will have [a child / more children], the higher the number you should pick. The less likely it is, the lower the number.

This only includes natural children, not adopted.

Record likelihood from 0 to 10

iicexpt G29 How likely to have a child/more children in the future

G30 CHECK G29

G29 is 5 or less

(unsure / unlikely to have a child) 1→H1

G29 is 6 or more 2→G31

iicprob G30 Is likely to have a child in the future

G31 How many (more) children do you intend to have?Enter intended number of children
excluding any already had

iicn

G31 How many more children do you intend to have

H. PARTNERING / RELATIONSHIPS

H1 Looking at SHOWCARD H4, which of these best describes your current marital status? By ‘married’ we mean in a *registered marriage*.

- Married (in a registered marriage) 1 → H3
Separated, but not divorced 2 → H4
Divorced 3 → H4
Widowed 4 → H4
Never married but living with someone in a relationship 5 → H7b
Never married and not living with someone in a relationship 6 → H2

imrcms CPQ:H4/NPQ:H1 Current marital status

H2 CHECK G26 or G27:

- G26 or G27=1 (less than 18 years of age) 1 → K1
G26 or G27=2 (18 years and over) 2 → H10

ichkage CPQ:H5/NPQ:H2 Check G31 for age > 17 or living independently

H3 Looking at SHOWCARD H6, which of the following best describes your current living circumstances?

- Married and living with spouse 1
Married, but spouse is in an institution (e.g., nursing home, gaol) 2
Married, but living with spouse less than half the time owing to work / other commitments 3

imrclc CPQ:H6/NPQ:H3 Current living circumstances

H4 How many times, in total, have you been legally married? That is, in a registered marriage. (Include your [current / last] marriage.)

Once 1
 Twice 2
 Three times 3
 Four times 4
 Five or more – check counting marriages vs relationships, then specify number

imrnn

H5		<i>Present or most recent marriage</i>	<i>First marriage if married more than once</i>	<i>Second marriage if married more than twice</i>	<i>Third marriage if married more than 3 times</i>	<i>Fourth marriage if married more than 4 times</i>	
a	In what (month and) year were you married? <i>Only need month for present or most recent marriage.</i>	Month	imrpmtthn				
		Year	imrpyn	imrllyn	imr2lyn	imr3lyn	imr4lyn
b	(Some people live together before marrying), did you and your [wife /husband] live together before marrying?	Yes	imrplvn	imrl1vn	imr21vn	imr31vn	imr41vn
c	[IF YES to b] How long did you live together before marrying? <i>If less than one year, record months.</i>	Years	imrplvyn	imrl1vyn	imr21vyn	imr31vyn	imr41vyn
		Months	imrplvnm	imrl1vnm	imr21vnm	imr31vnm	imr41vnm
	<i>If respondent is still in their first marriage, go to H6</i>						
d	[FOR PREVIOUS MARRIAGES] How did the marriage end?	Still married	1				
		Separated	2				
		Divorced	3	3	3	3	
		Widowed	4	4	4	4	
e	[IF WIDOWED] In what year did this occur?	Year	imrpwidn	imrlwidn	imr2widn	imr3widn	imr4widn
f	[IF SEPARATED / DIVORCED] In what year did you finally separate?	Year	imrpsepn	imrlsepn	imr2sepn	imr3sepn	imr4sepn
g	[IF DIVORCED] In what year was your divorce finalised?	Year	imrpdivn	imrldivn	imr2divn	imr3divn	imr4divn
h	[IF SEPARATED / DIVORCED] Whose decision was it to finally separate?	Mostly mine	1	1	1	1	1
		Mostly partner's	2	2	2	2	2
		Joint	3	3	3	3	3

H6 CHECK H1: Is code 2, 3 or 4 recorded at H1? (That is, is respondent separated, divorced or widowed?)

Yes, code 2, 3 or 4 recorded at H1 1 → H7a
 Other 2 → H11

ichksdw

Non-marital relationships

H7a Are you currently living with someone in a relationship?

Yes 1
No 2 ➔ H10

iordf CPQ:H8/NPQ:H7a Currently living with someone in a relationship

H7b When did you begin living with your current partner?

If month not known, enter 99 and obtain year.

Record month and year

iordfmth NPQ:H7b Month began living with current partner
iordfy Year began living with current partner

H8 Looking at SHOWCARD H9, how likely are you to marry your current partner?

Very likely 1 ➔ H11
Likely 2 ➔ H11
Not sure 3
Unlikely 4
Very unlikely 5
Prefer not to disclose -8- 9

iordfmar CPQ:H9/NPQ:H8 How likely to marry current partner

H9 Still looking at SHOWCARD H9, even though you [are unsure about marrying / don't think you will marry] your current partner, how likely it is that you will ever marry [or re-marry] in the future?

Very likely 1
Likely 2
Not sure 3
Unlikely 4
Very unlikely 5
Prefer not to disclose -8- 9

iorotmrm CPQ:H10/NPQ:H9 How likely to ever marry or remarry in future, currently defacto

NOW GO TO H11

H10 Looking at SHOWCARD H9, how likely is it that you will ever [marry / re-marry] in the future?

Very likely 1
Likely 2
Not sure 3
Unlikely 4
Very unlikely 5
Prefer not to disclose -8- 9

iormrm CPQ:H11/NPQ:H10 Likelihood of ever marrying or remarrying in future, not currently defacto

H11 (Some people live together as a couple without marrying). Have you ever lived with someone (else) as a couple for more than 3 months, but did not marry them?

Yes 1
No 2 → K1

iordfpsn NPQ:H11 Ever lived with someone for more than 3 months without marrying

H12 How many such relationships have you lived in?

Exclude any current relationship reported in H7a or H7b.

Record number; must be at least 1

iordfnm NPQ:H12 How many such relationships have you lived in

H13 Thinking about [this / the first such] relationship, in what month and year did you start living together?

If month not known, enter 99 and obtain year.

Record month and year

iordflmt NPQ:H13 Month began living together, first defacto relationship excluding current

iordflyr NPQ:H13 Year began living together, first defacto relationship excluding current

H14 And how long did you live together as a couple?

Count only time spent living together. Exclude any periods of temporary separation, and also exclude the time at the beginning of the relationship before they moved in together.

Full years Full months

iordflyr NPQ:H14 Years defacto, first defacto relationship excluding current

iordflmt NPQ:H14 Months defacto, first defacto relationship excluding current

K. HEALTH AND HEALTH CARE

K1 Now some questions about your health and your views on life.

In general, how would you rate your health? Is it excellent, very good, good, fair or poor?

- | | |
|-----------------|--------|
| Excellent..... | 1 |
| Very good | 2 |
| Good..... | 3 |
| Fair | 4 |
| Poor..... | 5 |
| Don't know..... | 9 → K3 |

ihelthrate K1 In general, how would you rate your health (PQ)

K2 What do you think is the per cent chance that your health will

- [still be excellent (if currently excellent) /
still be very good or better (if currently very good) /
still be good or better (if currently good) /
still be fair or better (if currently fair) /
have improved significantly (if currently poor)]

four years from now?

Your answer should range between 0%, which means there is no chance, and 100%, which means it is absolutely certain.

Record % %

ihelths K2 Per cent chance health same in 4 years time

Don't know..... .999

K3 CONFIRM OR CHECK AGE:

- | | |
|---------------------------|---------|
| If aged under 65 | 1 → K4a |
| If age 65-89..... | 2 → K4b |
| If aged 90 or older | 3 → K5 |

iageagec K3 Confirm age range

K4a How likely do you think it is that you will live to be 75 or more? Is it very likely, likely, unlikely or very unlikely?

- | | |
|---------------------|--------|
| Very likely | 1 → K5 |
| Likely | 2 → K5 |
| Unlikely..... | 3 → K5 |
| Very unlikely | 4 → K5 |
| Don't know..... | 9 → K5 |

ihelv75 K4 How likely will live to 75 or more, aged less than 65

**K4b How likely do you think it is that you will live
to be [80 (if aged <70) /**

85 (if aged 70-74) /

90 (if aged 75-79) /

95 (if aged 80-84) /

100 (if aged 85-89)] or more?

**Is it very likely, likely, unlikely or very
unlikely?**

Very likely	1
Likely	2
Unlikely	3
Very unlikely	4
Don't know.....	9

ihelv15m K4b How likely will live another 10 to
15 years, aged 65-89

K5 Looking at SHOWCARD K5, do you have any long-term health condition, impairment or disability (such as these) that restricts you in your everyday activities, and has lasted or is likely to last, for 6 months or more?

Yes 1
No 2 ➔K19a

ihelth K5a Long term health condition

K6a Which ones? PROBE: Any others?

Circle code at K6a ➔.

K6b And could you please tell me when you first developed [this condition / each of these conditions]?

Conditions	K6a	Year first developed	At Birth	D/K
Sight problems not corrected by glasses / lenses	01	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Hearing problems	02	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Speech problems.....	03	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Blackouts, fits or loss of consciousness	04	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Difficulty learning or understanding things	05	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Limited use of arms or fingers ...	06	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Difficulty gripping things.....	07	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Limited use of feet or legs	08	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
A nervous or emotional condition which requires treatment	09	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Any condition that restricts physical activity or physical work (e.g., back problems, migraines)	10	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Any disfigurement or deformity.....	11	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Any mental illness which requires help or supervision ..	12	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Shortness of breath or difficulty breathing.....	13	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Chronic or recurring pain.....	14	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Long-term effects as a result of a head injury, stroke or other brain damage	15	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
A long-term condition or ailment which is still restrictive even though it is being treated or medication being taken for it	16	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999
Any other long-term condition such as arthritis, asthma, heart disease, Alzheimer's disease, dementia etc.	17	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	9996	9999

ihespnc CPQ:K5b/NPQ:K6a Which long term health conditions
 - Sight problems not corrected by glasses / lenses
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Hearing problems
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Speech problems
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Blackouts, fits or loss of consciousness
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Difficulty learning or understanding things
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Limited use of arms or fingers
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Difficulty gripping things
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Limited use of feet or legs
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - A nervous or emotional condition which requires treatment
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Any condition that restricts physical activity or physical work (e.g. back problems, migraines)
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Any disfigurement or deformity
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Any mental illness which requires help or supervision
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Shortness of breath or difficulty breathing
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Chronic or recurring pain
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Long term effects as a result of a head injury, stroke or other brain damage
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - A long-term condition or ailment which is still restrictive even though it is being treated
 CPQ:K5b/NPQ:K6a Which long term health conditions
 - Any other long-term condition such as arthritis, asthma, heart disease, Alzheimers, dementia etc
 K5b Which long term health conditions - Refused
 K5b Which long term health conditions - Dont know
 ihespncn NPQ:K6c Year this condition first developed -
 - Sight problems not corrected by glasses / lenses
 ihearn NPQ:K6c Year this condition first developed -
 - Hearing problems
 ihespchn NPQ:K6c Year this condition first developed -
 - Speech problems
 iheflcn NPQ:K6c Year this condition first developed -
 - Blackouts, fits or loss of consciousness
 iheslun NPQ:K6c Year this condition first developed -
 - Difficulty learning or understanding things
 iheluafn NPQ:K6c Year this condition first developed -
 - Limited use of arms or fingers
 ihedgtn NPQ:K6c Year this condition first developed -
 - Difficulty gripping things
 iheluafn NPQ:K6c Year this condition first developed -
 - Limited use of feet or legs
 ihenecl NPQ:K6c Year this condition first developed -
 - A nervous or emotional condition which requires treatment
 ihecrpan NPQ:K6c Year this condition first developed - Any
 - condition that restricts physical activity or physical work (e.g. back problems, migraines)
 ihedisfn NPQ:K6c Year this condition first developed - Any
 - disfigurement or deformity
 ihemirhn NPQ:K6c Year this condition first developed - Any
 - mental illness which requires help or supervision
 ihesbdbn NPQ:K6c Year this condition first developed -
 - Shortness of breath or difficulty breathing
 ihecrpn NPQ:K6c Year this condition first developed -
 - Chronic or recurring pain
 ihehibdn NPQ:K6c Year this condition first developed - Long
 - term effects as a result of a head injury, stroke or other brain damage
 ihemedn NPQ:K6c Year this condition first developed - A
 - long-term condition or ailment which is still
 - restrictive even though it is being treated or
 - medication being taken for it
 ihethon NPQ:K6c Year this condition first developed - Any
 - other long-term condition such as arthritis, asth-
 - ma, heart disease, Alzheimers disease, dementia
 - etc

K7 [Does your condition / Do your conditions] limit the type of work or the amount of work you can do?

- Yes 1
No 2 → K9
Unable to do any work 3 → K9

ihelthwk K7 Does condition limit the type or amount of work you can do

K8 Using the scale on SHOWCARD K8, could you pick a number between 0 and 10 to indicate how much your condition[s] limit[s] the amount of work you can do?

An answer of 0 means “not at all” and an answer of 10 means you are “unable to do any work”.

Enter number from 0 to 10

ihelthdg K8 How much condition limits the amount of work you can do

Difficulties caused by health conditions

K9 Look now at SHOWCARD K9. You only need to answer “yes” or “no”. Because of the condition[s] you have told me about, do you ever have difficulty with....

a) self care activities?

- Yes 1
No 2

ihedifsc K9a Health condition causes difficulties with self-care activities

b) mobility activities?

- Yes 1
No 2

ihedifma K9b Health condition causes difficulties with mobility activities

c) communicating in your own language?

- Yes 1
No 2

ihedifla K9c Health condition causes difficulties with communicating in your own language

K10a Still looking at the types of tasks listed on SHOWCARD K9, do you ever need help or supervision with any of these tasks because of the condition[s] you have told me about?

- Yes 1
No 2 → K12a

ihehlpco K10a Health condition necessitates needing help or supervision

K10b Which ones? **MULTI RESP**

- Self-care 1
Mobility 2
Communication in own language 3

iheconsc K10b Needs help with or supervision - Self-care

ihecomma K10b Needs help with or supervision - Mobility

iheconla K10b Needs help with or supervision - Communication in own language

K11a Do you always need help with any of these tasks?

- Yes 1
No 2 → K12a

ihealway K11a Do you always need help with any of these tasks?

K11b Which ones?

MULTI RESP

- Self-care 1
 Mobility 2
 Communication in own language 3

ihealsc K11b Always need help with - Self-care
 ihealmo K11b Always need help with - Mobility
 ihealla K11b Always need help with - Communication in own language

K12a I now have some questions about different types of aids you might use because of your condition[s]. Looking at SHOWCARD K12, do you use any aids such as these?

- Yes 1
 No 2 ➔ K13

iheaidst K12a Looking at SHOWCARD K12, do you use any aids such as?

K12b Which ones?

MULTI RESP

- Mobility aids 1
 Self-care aids 2
 Non-electronic communication aids 3
 Electronic communication aids 4

iheamob K12b Which ones? - Mobility aids
 iheacare K12b Which ones? - Self-care aids
 iheaneco K12b Which ones? - Non-electronic communication aids
 iheaecom K12b Which ones? - Electronic communication aids

K13 Looking at SHOWCARD K13, has your home been modified in any way because of your condition[s]?

- Yes 1
 No 2

ihehmod K13 Looking at SHOWCARD K13, has your home been modified in any of these ways to help you cope with your condition[s]?

K14 CONFIRM OR CHECK: Is respondent aged 65 years or older?

- Yes (65 years or older) 1 ➔ K19a
 No (less than 65 years) 2 ➔ K15a

ihechage K14 CONFIRM WITH RESPONDENT. Can I just check your age again?

K15a Because of the condition[s] you have told me about, do you currently have any difficulties with employment, such as those listed on SHOWCARD K15?

- Yes 1
 No 2 ➔ K16

iheemdif K15a Because of the condition[s] you have told me about, do you currently have any difficulties with employment, such as those listed on SHOWCARD K15?

K15b Which difficulties on SHOWCARD K15 currently apply to you?

MUTI RESP

- Permanently unable to work 1
 Restricts type of job can do 2
 Restricts number of hours that can be worked 3
 Makes it more difficult to change jobs / get a better job / find a suitable job 4
 Need additional time off work 5
 Need ongoing assistance / supervision at work 6
 Need special equipment / arrangements 7
 Other employment difficulties 8

ihepuwrk K15b Long term health conditions impacts on employment - Permanently unable to work
 iherjob K15b Long term health conditions impacts on employment - Restricts type of job can do
 iherhour K15b Long term health conditions impacts on employment - Restricts number of hours that can be worked
 ihechjob K15b Long term health conditions impacts on employment - Makes it more difficult to change jobs / get a better job / find a suitable job
 ihetowrk K15b Long term health conditions impacts on employment - Need additional time off work
 iheonas K15b Long term health conditions impacts on employment - Need ongoing assistance / supervision at work
 ihespeq K15b Long term health conditions impacts on employment - Need special equipment / arrangements
 iheothed K15b Long term health conditions impacts on employment - Other employment difficulties

K16 Are you currently attending school or enrolled in a course of study to obtain an educational qualification?

If on holidays, but expects to be attending school or studying when holidays finish, code as "YES".

Yes 1
No 2 ➔ K18a

K17a Because of the condition[s] you have told me about, do you currently have any difficulties with education, such as those listed on SHOWCARD K17?

Yes 1
No 2 ➔ K19a

K17b Which ones?

MULTI RESP

Need additional time off school / study 1 ➔ K19a
Have to attend special classes / school 2 ➔ K19a
Need ongoing assistance or supervision 3 ➔ K19a
Restricted in the number of hours can study 4 ➔ K19a
Need special equipment, modified environment, or other special arrangements 5 ➔ K19a
General learning difficulties 6 ➔ K19a
Other difficulties 8 ➔ K19a

K18a Would you like to be enrolled at school or undertaking further study?

Yes, would like to be studying 1
No, would not like to be studying 2 ➔ K19a

K18b Are you not enrolled in an educational course because of the condition[s] you have told me about?

Yes 1
No, other reason 2

iheedqua K16 Are you currently attending school or enrolled in a course of study to obtain an educational qualification?

iheeddif K17a Because of the condition[s] you have told me about, do you currently have any difficulties with education, such as those listed on SHOWCARD K17?

ihetosch K17b Which ones? - Need additional time off school / study
iheatpsc K17b Which ones? - Have to attend special classes / school
iheeonas K17b Which ones? - Need ongoing assistance or supervision
ihereshr K17b Which ones? - Restricted in the number of hours can study
ihecspeq K17b Which ones? - Need special equipment, modified environment, or other special arrangements
ihelldif K17b Which ones? - General learning difficulties
iheodif K17b Which ones? - Other difficulties

ihelstud K18a Would you like to be enrolled at school or undertaking further study?

ihenostu K18b Are you not enrolled in an educational course because of the condition(s) you have told me about?

Serious illness conditions

K19a I am now going to ask some questions about some specific medical conditions. Looking at SHOWCARD K19, have you been told by a doctor or nurse that you have any of these conditions? Please only include current conditions that have lasted or are likely to last for six months or more.

Yes 1
No 2 ➔ K22
Don't know 9 ➔ K22

iheany K19a Ever been told by a doctor or nurse that you have any of these serious illnesses

K19b Which ones?

PROBE: Any others?	MULTI RESP
Arthritis or osteoporosis.....	<u>01</u>
Asthma	<u>02</u>
Any type of cancer.....	<u>03</u>
Chronic bronchitis or emphysema	<u>04</u>
Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)	<u>05</u>
Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)	<u>06</u>
Depression or anxiety.....	<u>07</u>
Other mental illness.....	<u>08</u>
Heart disease	<u>09</u>
High blood pressure or hypertension.....	<u>10</u>
Any other serious circulatory condition (e.g., stroke, hardening of the arteries).....	<u>11</u>

iheart	K19b Diagnosed with serious illness - Arthritis or osteoporosis
iheast	K19b Diagnosed with serious illness - Asthma
ihecan	K19b Diagnosed with serious illness - Any type of cancer
ihecbe	K19b Diagnosed with serious illness - Chronic bronchitis or emphysema
ihedil1	K19b Diagnosed with serious illness - Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)
ihedi2	K19b Diagnosed with serious illness - Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)
ihedep	K19b Diagnosed with serious illness - Depression or anxiety
iheomi	K19b Diagnosed with serious illness - Other mental illness
ihehcd	K19b Diagnosed with serious illness - Heart disease
ihehbyp	K19b Diagnosed with serious illness - High blood pressure or hypertension
iheoc	K19b Diagnosed with serious illness - Any other serious circulatory condition (eg stroke, hardening of the arteries)
ih erf2	K19b Diagnosed with serious illness - Refused
ihedk2	K19b Diagnosed with serious illness - Dont know

K20a Do you regularly see a doctor or other medical practitioner about [this condition / any of these conditions]?

Yes	1
No.....	2 → K21a
Don't know.....	9 → K21a

ihersd
K20a Regularly sees a doctor or other medical practitioner about these serious illnesses

K20b Approximately how often do you see a doctor or medical practitioner about your condition?

If more than one condition, obtain an answer for the condition for which the respondent most regularly sees a medical practitioner.

At least monthly	1
Less often than monthly, but at least once every 6 months.....	2
Less often than once every 6 months, but at least once a year	3
Less often than yearly	4
Don't know	9

ihesdf
K20b Approximately how often sees doctor or other medical practitioner about these serious illnesses

K21a Do you take any prescription medications for [this condition / any of these conditions]?

Yes	1
No.....	2 → K22
Don't know.....	9 → K22

ihrx
K21a Takes any prescription medications for these conditions

K21b CHECK K19b:

If only one condition on K19b	1 → K22
If more than one condition on K19b.....	2 → K21c

ihensi
K21b Check if has one or more than serious illness condition at K19

K21c For which conditions do you take this prescription medication?

MULTI RESP

Arthritis or osteoporosis.....	<u>01</u>
Asthma	<u>02</u>
Any type of cancer	<u>03</u>
Chronic bronchitis or emphysema	<u>04</u>
Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)	<u>05</u>
Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)	<u>06</u>
Depression or anxiety.....	<u>07</u>
Other mental illness.....	<u>08</u>
Heart disease	<u>09</u>
High blood pressure or hypertension.....	<u>10</u>
Any other serious circulatory condition (e.g., stroke, hardening of the arteries).....	<u>11</u>
Don't know.....	<u>99</u>

ihepmart	K21c Takes prescription medication for - Arthritis or osteoporosis
ihepmast	K21c Takes prescription medication for - Asthma
ihepmcan	K21c Takes prescription medication for - Any type of cancer
ihepmcbe	K21c Takes prescription medication for - Chronic bronchitis or emphysema
ihepmdil	K21c Takes prescription medication for - Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)
ihepmdi2	K21c Takes prescription medication for - Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)
ihepmdep	K21c Takes prescription medication for - Depression or anxiety
ihepmomi	K21c Takes prescription medication for - Other mental illness
ihepmhd	K21c Takes prescription medication for - Heart disease
ihepmhbpp	K21c Takes prescription medication for - High blood pressure or hypertension
ihepmoc	K21c Takes prescription medication for - Any other serious circulatory condition (eg stroke, hardening of the arteries)
ihepmrf	K21c Takes prescription medication for - Refused
ihepmdk	K21c Takes prescription medication for - Dont know

Retrospective questions on childhood health

K22 These next questions ask about your health during childhood; that is, before you turned 15 years of age. How would you describe your health during that time? Was it excellent, very good, good, fair or poor?

Excellent.....	<u>1</u>
Very good	<u>2</u>
Good.....	<u>3</u>
Fair	<u>4</u>
Poor.....	<u>5</u>
Health varied [unprompted]	<u>6</u>
Don't know.....	<u>9</u>

ihech K22 Health rating during childhood

K23 When you were growing up, did you ever miss a month of school because of a health problem? That is, were you absent from school for 30 or more consecutive days?

Yes	<u>1</u>
No.....	<u>2</u>
Don't know.....	<u>9</u>

ihechmm K23 Missed a month of school for health problems

K24 Were any of your parents or guardians smokers at any stage during your childhood?

Yes	<u>1</u>
No.....	<u>2</u>
Don't know.....	<u>9</u>

ihechps K24 Parents smoked during your childhood

HEALTH CARE UTILISATION: Concession cards & private health insurance

K25 Now some questions about health care services you may have used.

Look now at SHOWCARD K25. Do you have any of these cards?

MULTI RESP

Department of Veterans' Affairs <u>Orange</u>	
Treatment Entitlement Card	1
Department of Veterans' Affairs <u>White</u>	
Treatment Entitlement Card	2
Department of Veterans' Affairs <u>Gold</u> Treatment Entitlement Card.....	3
Health Care Card.....	4
Pensioner Concession Card.....	5
Commonwealth Seniors Health Card	6
No – do not have any of these cards.....	7
Don't know.....	9

iphvaora	K25 Do you have a Department of Veterans Affairs Orange Treatment Entitlement Card?
iphvawhi	K25 Do you have a Department of Veterans Affairs White Treatment Entitlement Card?
iphvagld	K25 Do you have a Department of Veterans Affairs Gold Treatment Entitlement Card?
iphhcc	K25 Do you have a Health Care Card?
iphpcc	K25 Do you have a Pensioner Concession Card?
iphcschc	K25 Do you have a Commonwealth Seniors Health Card?
iphnone	K25 None of these Health Care Cards
iphref	K25 Health Care Cards - Refused
iphdk	K25 Health Care Cards - Dont know

K26 Apart from Medicare, are you currently covered by private health insurance?

Yes	1
No.....	2 → K29
Don't know.....	9 → K31

iphpriin	K26 Apart from Medicare, are you currently covered by private health insurance?
----------	---

K27 Are you covered by family, couple, sole parent or single membership?

Family membership	1
Couple membership	2
Sole parent membership	3
Single membership.....	4
Don't know.....	9 → K31

iphcfam	K27 Are you covered by family, couple, sole parent or single membership?
---------	--

K28 What type of health insurance do you have? Hospital cover only, extras cover only, or both hospital and extras cover?

'Extras' cover is also known as 'ancillary' cover. Extras include such things as dental care, physiotherapy, chiropractic services, and podiatry.	
Hospital cover only	1 → K31
Extras cover only.....	2 → K29
Both hospital and extras cover	3 → K31
Don't know.....	9 → K31

iphctype	K28 What type of health insurance do you have? Hospital cover only, extras cover only, or both hospital and extras cover?
----------	---

K29 Have you ever had private health insurance for hospital cover in the past?

Yes	1
No.....	2 → K31
Don't know.....	9 → K31

iphpast	K29 Have you ever had private health insurance for hospital cover in the past?
---------	--

K30 Looking at SHOWCARD K30, how long ago did you drop your hospital cover?

Less than one year ago.....	1
One to less than two years ago.....	2
Two to less than five years ago.....	3
Five to less than 10 years ago.....	4
Ten or more years ago	5
Don't know.....	9

iphdrop1 K30 How long ago did you drop your hospital cover?

**HEALTH CARE UTILISATION:
Doctor and hospital visits****K31 Looking at SHOWCARD K31, how long has it been since you last saw a dentist?**

Less than 6 months ago	1
Six to less than 12 months ago	2
One to less than 2 years ago.....	3
Two to less than 5 years ago	4
Five or more years ago	5
Never been to the dentist	8
Don't know	99

ihedent K31 How long since last saw a dentist

K32a Is there a particular doctor you usually see if you are sick or if you need advice about your health?

Yes	1 →K33a
No / More than one.....	2
Don't know.....	9

ihelgp K32a Is there one particular doctor you usually see if you are sick or need health advice

K32b Is there a particular clinic or health centre you usually go to if you are sick or if you need advice about your health?

Yes	1
No / More than one.....	2
Don't know.....	9

ihelclin K32b Is there one particular clinic you usually see if you are sick or need health advice

K33a During the last 12 months, have you seen a family doctor or another GP about your health?

Yes	1
No	2 →K35a
Don't know.....	9 →K35a

ihelstyr K33a During last 12 months have you seen your family doctor or another GP about your health

K33b Approximately how many times have you seen a family doctor or another GP about your health in the last 12 months?

Record number of visits

Don't know.....99

ihengp K33b Approximately how many times have you seen your family doctor or another GP in the last 12 months

K34 Thinking now about your most recent visit to a family doctor or other GP, did you or someone in your family have any out-of-pocket expenses for that consultation? Do not include medicines or tests prescribed by the doctor.

An *out-of-pocket expense* is sometimes known as a *gap payment* and is usually incurred if the consultation was *not bulk billed*.

Yes	1
No.....	2
Don't know.....	9

K35a Looking at SHOWCARD K35, during the last 12 months, have you seen any of these health care providers about your health?

Yes	1
No.....	2 →K36a
Don't know.....	9 →K36a

K35b Which ones?

PROBE: Any others?	MULTI RESP
A hospital doctor (i.e., in outpatients or casualty)...	<u>01</u>
A specialist doctor (excluding in outpatients or casualty of a hospital).....	<u>02</u>
A mental health professional, such as a psychiatrist or psychologist	<u>03</u>
A podiatrist (foot doctor)	<u>04</u>
A chiropractor or osteopath	<u>05</u>
A physiotherapist.....	<u>06</u>
An optometrist	<u>07</u>
Any other allied health provider, such as a speech therapist, audiologist or occupational therapist.....	<u>08</u>
An alternative health practitioner, such as a naturopath, acupuncturist or herbalist.....	<u>09</u>
A community nurse, practice nurse, nurse practitioner or midwife	<u>10</u>

K36a Looking at SHOWCARD K36, have you had any of the health check-ups and tests listed on this card during the past 12 months?

Yes	1
No.....	2 →K37
Don't know.....	9 →K37

iheoop K34 For most recent doctor visit - any out of pocket expenses for consultation

ihecpny K35a During the last 12 months have you seen any of the health care providers listed on SHOWCARD K35

ihecpnd K35b Seen during last 12 months - A hospital doctor (i.e., in outpatients or casualty)

ihecpsd K35b Seen during last 12 months - A specialist doctor (excluding in outpatients or casualty of a hospital)

ihecpmh K35b Seen during last 12 months - A mental health professional, such as a psychiatrist or psychologist

ihecpod K35b Seen during last 12 months - A podiatrist (foot doctor)

ihecpchi K35b Seen during last 12 months - A chiropractor or osteopath

ihecpphy K35b Seen during last 12 months - A physiotherapist

ihecpopt K35b Seen during last 12 months - An optometrist

ihecpahp K35b Seen during last 12 months - Any other allied health provider, such as an optometrist, speech therapist, audiologist or occupational therapist

ihecpalt K35b Seen during last 12 months - An alternative health practitioner, such as a naturopath, acupuncturist or herbalist

ihecpnrs K35b Seen during last 12 months - A community nurse, practice nurse, nurse practitioner or midwife

ihecpnf K35b Seen during last 12 months - Refused

ihecpdk K35b Seen during last 12 months - Dont know

ihehcany K36a Have you had any of the health check-ups or tests in the last 12 months

K36b Which ones?**PROBE: Any others?**

	<i>MULTI RESP</i>
Pap smear	1
Breast screening	2
Prostate check	3
Screening for bowel cancer	4
Chest / other x-rays	5
Blood pressure	6
Cholesterol test	7
Any other blood test	8

K37 During the last 12 months, have you been admitted as a patient to a hospital for an overnight stay?

Yes	1
No.....	2 →K42
Don't know.....	9 →K42

K38 On how many different occasions were you admitted as a patient to a hospital for an overnight stay during the last 12 months?

Record number of admissions

Don't know999

K39 Altogether, in the last 12 months, how many nights did you stay in hospital?

Record number of nights

Don't know999

K40 I would now like to talk to you about your most recent overnight admission to hospital. How many nights did you stay in hospital?

Record number of nights

Don't know999

K41 Were you admitted as a public patient, as a private patient in a private hospital, or as a private patient in a public hospital?

Public patient.....	1
Private patient in a private hospital.....	2
Private patient in a public hospital.....	3
Other (<i>please specify</i>)	8

Don't know99

ihehcps	K36b Had check-up or test in last 12 months - Pap smear
ihehcbs	K36b Had check-up or test in last 12 months - Breast screening
ihehcpc	K36b Had check-up or test in last 12 months - Prostate check
ihehcbc	K36b Had check-up or test in last 12 months - Screening for bowel cancer
ihehcxr	K36b Had check-up or test in last 12 months - Chest / other x-rays
ihehcbp	K36b Had check-up or test in last 12 months - Blood pressure
ihehcct	K36b Had check-up or test in last 12 months - Cholesterol test
ihehcobt	K36b Had check-up or test in last 12 months - Any other blood test
ihehcrf	K36b Had check-up or test in last 12 months - Refused
ihehcdk	K36b Had check-up or test in last 12 months - Dont know

iphonpat K37 During the last 12 months, have you ever been a patient in a hospital overnight?

iphonly K38 On how many different occasions were you admitted as a patient to a hospital for an overnight stay during the last 12 months?

iphontot K39 Overnight stays in hospital in the last 12 months

iphrecad K40 Overnight stays for most recent overnight admission to hospital

iphonin K41 Hospital overnight patient admission type

K42 During the last 12 months, have you been admitted to hospital as a day patient? (Do not include visits to emergency, outpatients or outpatient clinics.)

A DAY PATIENT is admitted to the hospital for the day, whereas an OUT PATIENT is not admitted, they just receive treatment at the hospital.

- Yes 1
No 2 ➔ K45
Don't know 9 ➔ K45

iphdayly

K42 During the last 12 months, have you ever been admitted to hospital as a day patient? (Do not include visits to emergency, outpatients or outpatient clinics).

K43 On how many different occasions were you admitted as a day patient to a hospital during the last 12 months?

Record number of times

Don't know 999

iphdaypa

K43 On how many different occasions were you admitted as a day patient to a hospital during the last 12 months?

K44 Think now of the last time you were admitted as a day patient. Were you admitted as a public patient, as a private patient in a private hospital, or as a private patient in a public hospital?

- Public patient 1
Private patient in a private hospital 2
Private patient in a public hospital 3
Other (please specify) 8

iphdayin

K44 Hospital day patient admission type

Don't know 99

Diet

K45 The next few questions are about your eating habits.

Looking at SHOWCARD K45, what is the main type of milk that you usually use?

- Whole / full cream 1
Low / reduced fat 2
Skim 3
Evaporated or sweetened condensed 4
Soy milk 5
Other (please specify) 6

iffmilk

K45 Main type of milk usually use

Does not drink milk 7

If respondent indicates they drink calcium enriched milk, powdered milk, UHT milk or flavoured milk, ask them if that milk is whole milk, low fat milk or skim milk, and then code appropriately.

K46 Including tinned, frozen and fresh vegetables, on how many days in a usual week do you eat vegetables?

Please do not include chips or French fries.

Respondents should include potatoes and salad vegetables. If queried, vegetable juice is not to be included

Record no. of days (1-7)

Do not eat vegetables in a usual week.....9 ➔ K48

iffveg

K46 Number of days in a usual week eats vegetables (inc. tinned, frozen and fresh)

K47 On a day when you eat vegetables, how many serves of vegetables do you usually eat?

SHOWCARD K47 provides some examples of what a typical serve of vegetables looks like. As a rough guide, one serve is equal to a half a cup of cooked vegetables (or one cup of salad vegetables).

- | | |
|-------------------------|---|
| One serve..... | 1 |
| Two serves..... | 2 |
| Three serves..... | 3 |
| Four serves..... | 4 |
| Five serves..... | 5 |
| Six serves or more..... | 6 |

iffvegs

K47 On a day when you eat vegetables, how many serves of vegetables do you usually eat

K48 Including tinned, frozen, dried and fresh fruit, on how many days in a usual week do you eat fruit?

If queried, fruit juice is not to be included.

Record no. of days (1-7)

Do not eat fruit in a usual week9 ➔ K50

ifffrt

K48 Number of days in a usual week eats fruit (inc. tinned, frozen, dried and fresh)

K49 On a day when you eat fruit, how many serves of fruit do you usually eat?

SHOWCARD K49 provides some examples of what a typical serve of fruit looks like. (As a rough guide, one serve is equal to one medium sized piece of fruit OR two small pieces of fruit OR one cup of diced fruit pieces.)

- | | |
|-------------------------|---|
| One serve..... | 1 |
| Two serves..... | 2 |
| Three serves..... | 3 |
| Four serves..... | 4 |
| Five serves..... | 5 |
| Six serves or more..... | 6 |

ifffrts

K49 On a day when you eat fruit, how many serves of fruit do you usually eat

K50 How many days per week do you usually have some food for breakfast?

Substantial liquid meals (for example, smoothies and protein shakes), should also be included here.

Record no. of days (1-7)

None.....9

iffbf

K50 How many days per week do you usually eat some food for breakfast

K51 How often do you add salt to your food after it is cooked? Is it usually, sometimes, rarely, or never?

Never / Rarely.....1
Sometimes.....2
Usually.....3

ifffsalt

K51 How often do you add salt to your food after it is cooked

K52a How often in a usual week do you buy breakfast from a restaurant, café, fast food outlet, or any other place that prepares and sells meals?

Answers should lie in range 0 to 7

iffbrfr

K52a How often in a usual week purchases breakfast from an outlet

K52b And how often do you buy lunch?

Answers should lie in range 0 to 7

ifflunr

K52b How often in a usual week purchases lunch from an outlet

K52c And how often do you buy dinner (i.e., the evening meal)?

Answers should lie in range 0 to 7

iffdintr

K52c How often in a usual week purchases dinner from an outlet

'Meals' mean more than a beverage or a snack food (like a chocolate bar).

Carers

K53 I now have some questions about caring for others. By care I mean regular, informal help that is ongoing. Don't include any care that you might undertake as part of your paid employment.

K54 CHECK HF: Does the respondent live alone or with others?

Single-person household.....1 → K58
Multi-person household2 → K55

ihehtyp

K54 Check HF, Single or Multi person household

K55 Is there anyone in this household who has a long-term health condition, who is elderly or who has a disability, and for who you care or help on an ongoing basis with any of the types of activities listed on SHOWCARD K55?

Yes1
No.....2 → K58

iherca

K55 Actively cares for household member due to long-term health condition, elderly, disability

K56 Who in this household do you help or care for?

MULTI RESP

Spouse / Partner.....	<u>1</u>
Parent(s).....	<u>2</u>
Parent(s)-in-law	<u>3</u>
Adult child (aged 15+ years).....	<u>4</u>
Young child.....	<u>5</u>
Other relative.....	<u>6</u>
Other (unrelated person)	<u>7</u>

ihercap	K56 Person cared for - Spouse/partner
ihercapt	K56 Person cared for - Parent
ihercapl	K56 Person cared for - Parent-in-law
ihercaac	K56 Person cared for - Adult child (aged 15+ years)
ihercayc	K56 Person cared for - Young child
ihercaor	K56 Person cared for - Other relative
ihercaur	K56 Person cared for - Other (unrelated person)
ihercana	K56 Person cared for - No answer
ihercarf	K56 Person cared for - Refused
ihercadk	K56 Person cared for - Dont know

K57 Are you the main carer of [this person / any of these people]? (That is, are you the person who provides most of their care?)

Yes (main carer).....	<u>1</u>
No (share the care with others)	<u>2</u>

ihercam K57 Main carer of resident person(s)

K58 Is there anyone living elsewhere who has a long-term health condition, who is elderly or who has a disability, and for who you care or help on an ongoing basis with any of the types of activities listed on SHOWCARD K55?

Yes	<u>1</u>
No.....	<u>2</u> ➔K61

ihenca K58 Actively cares for non-resident due to long-term health condition, elderly, disability

K59 Who [is this person / are these people] living elsewhere that you help or care for?

MULTI RESP

Spouse / Partner.....	<u>1</u>
Parent(s).....	<u>2</u>
Parent(s)-in-law	<u>3</u>
Adult child (aged 15+ years).....	<u>4</u>
Young child.....	<u>5</u>
Other relative.....	<u>6</u>
Other (unrelated person)	<u>7</u>

ihencap	K59 Who is cared for - Spouse/partner
ihencapt	K59 Who is cared for - Parent
ihencapl	K59 Who is cared for - Parent-in-law
ihencaac	K59 Who is cared for - Adult child (aged 15+ years)
ihencayc	K59 Who is cared for - Young child
ihencaor	K59 Who is cared for - Other relative
ihencaur	K59 Who is cared for - Other (unrelated person)
ihencana	K59 Who is cared for - No answer
ihencarf	K59 Who is cared for - Refused
ihencadk	K59 Who is cared for - Dont know

K60 Are you the main carer of [this person / any of these people]? (That is, are you the person who provides most of their care?)

Yes (main carer).....	<u>1</u>
No (share the care with others)	<u>2</u>

ihencam K60 Main carer of non-resident person(s)

K61 I am now going to ask you some questions about how satisfied or dissatisfied you are with some of the things happening in your life. I am going to read out a list of different aspects of life and, using the scale on SHOWCARD K61, I want you to pick a number between 0 and 10 that indicates your level of satisfaction with each. The more satisfied you are, the higher the number you should pick. The less satisfied you are, the lower the number.

a	The home in which you live?	<input type="text"/>	N/A
b	Your employment opportunities?	<input type="text"/>	97
c	Your financial situation?	<input type="text"/>	
d	How safe you feel?	<input type="text"/>	
e	Feeling part of your local community?	<input type="text"/>	
f	Your health?	<input type="text"/>	
g	The neighbourhood in which you live?	<input type="text"/>	
h	The amount of free time you have?	<input type="text"/>	

ilosathl	K61 Satisfaction - The home in which you live
ilosateo	K61 Satisfaction - Your employment opportunities
ilosatfs	K61 Satisfaction - Your financial situation
ilosatsf	K61 Satisfaction - How safe you feel
ilosatlc	K61 Satisfaction - Feeling part of your local community
ilosatyh	K61 Satisfaction - Your health
ilosatnl	K61 Satisfaction - The neighbourhood in which you live
ilosatft	K61 Satisfaction - The amount of free time you have

K62 All things considered, how satisfied are you with your life? Again, pick a number between 0 and 10 to indicate how satisfied you are.

Enter number from 0 to 10

ilosat K62 Satisfaction - How satisfied are you with your life

K63 Do you speak a language other than English in this home?

Yes 1
No 2 ➔ K65

ianlote K63 Speak language other than English

K64 Would you say you speak English ...

Very well? 1
Well? 2
Not well? 3
Not at all? 4

ianeab K64 How well speaks English

K65 And could you please tell me when you moved to your current address? That is, when you began living here.

(If you have lived here before but there was a gap of more than a year when you were living somewhere else, please just tell me the date you moved back in most recently.)

If month not known, code "99" and obtain year.

If lived at residence entire life, insert month and year in which born.

Record month

and year:

imhmth

CPQ:K68/NPQ:K65 Month moved to current address

imhyr

CPQ:K68/NPQ:K65 Year moved to current address

K66 CHECK K65: Is the answer at K65 more than 10 years ago?

Yes (K65 is more than 10 years ago)..... 1→T1

imhl10yr

NPQ:K66 Moved to current address less than 10 years ago

No (K65 is 10 years or less) 2→K67

K67 In total, how many homes have you lived in during the last 10 years?

PROBE IF PAUSE: Has it been more than 5? 10?

- | | |
|-------------|---|
| 1..... | 1 |
| 2..... | 2 |
| 3..... | 3 |
| 4..... | 4 |
| 5 - 9 | 5 |
| 10-14 | 6 |
| 15+ | 7 |

imhn10yr

NPQ:K67 How many homes lived in during last 10 years

K68 CHECK K65: Is the answer at K65 more than 12 months ago?

Yes (K65 is more than 12 months ago) 1→T1

imhlyr

NPQ:K68 Moved to current address less than 12 months ago

No (K65 is less than 12 months ago)..... 2→K69

K69 What were the *main* reasons for you moving in the last 12 months?

MULTI RESP

To start a new job with a new employer	<u>01</u>
To be nearer place of work.....	<u>02</u>
To be close to place of study.....	<u>03</u>
Work transfer.....	<u>04</u>
To start own business	<u>05</u>
Decided to relocate own business.....	<u>06</u>
To get a larger / better place	<u>07</u>
To get a smaller / less expensive place (less rent, less upkeep, etc.).....	<u>08</u>
To get a place of my own / our own	<u>09</u>
To get married / moved in with partner.....	<u>10</u>
To live in a better neighbourhood.....	<u>11</u>
To be closer to friends and/or family	<u>12</u>
To look for work.....	<u>13</u>
Marital / relationship breakdown.....	<u>14</u>
Property no longer available.....	<u>15</u>
Evicted.....	<u>16</u>
To follow a spouse or parent / whole family moved.....	<u>17</u>
To be closer to amenities / services / public transport.....	<u>18</u>
Seeking change of lifestyle.....	<u>19</u>
Health reasons	<u>20</u>
Temporary relocation (e.g., while renovating / re-building)	<u>21</u>
Other (<i>please specify</i>)	<u>97</u>

imhreanj	CPQ:K66/NPQ:K69 Main reasons for moving - To start a new job with a new employer
imhreawp	CPQ:K66/NPQ:K69 Main reasons for moving - To be nearer place of work
imhreast	CPQ:K66/NPQ:K69 Main reasons for moving - To be close to place of study
imhreawt	CPQ:K66/NPQ:K69 Main reasons for moving - Work transfer
imhreab	CPQ:K66/NPQ:K69 Main reasons for moving - To start own business
imhrearb	CPQ:K66/NPQ:K69 Main reasons for moving - Decided to relocate own business
imhrealb	CPQ:K66/NPQ:K69 Main reasons for moving - To get a larger/better place
imhreasn	CPQ:K66/NPQ:K69 Main reasons for moving - To get a smaller/less expensive place
imhreapo	CPQ:K66/NPQ:K69 Main reasons for moving - To get a place of my own/our own
imhreamr	CPQ:K66/NPQ:K69 Main reasons for moving - To get married/moved in with partner
imhreabn	CPQ:K66/NPQ:K69 Main reasons for moving - To live in a better neighbourhood
imhreaff	CPQ:K66/NPQ:K69 Main reasons for moving - To be closer to friends and/or family
imhrealw	CPQ:K66/NPQ:K69 Main reasons for moving - To look for work
imhreamb	CPQ:K66/NPQ:K69 Main reasons for moving - Marital/relationship breakdown
imhreapn	CPQ:K66/NPQ:K69 Main reasons for moving - Property no longer available
imhreaev	CPQ:K66/NPQ:K69 Main reasons for moving - Evicted
imhreafm	CPQ:K66/NPQ:K69 Main reasons for moving - To follow a spouse or parent/Whole family moved
imhreaas	CPQ:K66/NPQ:K69 Main reasons for moving - To be closer to amenities/services/public transport
imhreals	CPQ:K66/NPQ:K69 Main reasons for moving - Seeking change of lifestyle
imhreahr	CPQ:K66/NPQ:K69 Main reasons for moving - Health reasons
imhreatr	CPQ:K66/NPQ:K69 Main reasons for moving - Temporary relocation
imhreama	CPQ:K66/NPQ:K69 Main reasons for moving - Moved to Australia (NFI)
imhreagh	CPQ:K66/NPQ:K69 Main reasons for moving - Government housing (no choice)
imhrearo	CPQ:K66/NPQ:K69 Main reasons for moving - Travelling/returned from overseas
imhreapf	CPQ:K66/NPQ:K69 Main reasons for moving - Personal/family reasons (NFI)
imhreawr	CPQ:K66/NPQ:K69 Main reasons for moving - Work reasons (NFI)
imhreahn	CPQ:K66/NPQ:K69 Main reasons for moving - Housing/neighbourhood reason (NFI)
imhreani	CPQ:K66/NPQ:K69 Main reasons for moving - NEI to classify
imhreana	CPQ:K66/NPQ:K69 Main reasons for moving - Not Answered
imhreaos	CPQ:K66/NPQ:K69 Main reasons for moving - Other
imhreadk	CPQ:K66/NPQ:K69 Main reasons for moving - Dont know
imhrearf	CPQ:K66/NPQ:K69 Main reasons for moving - Refused

T1 The Living in Australia study appreciates your assistance and would like to contact you again in 12 months time to get an update from you.

Now, we have the household's home phone number, but I'd like to record your work and/or mobile phone numbers too, just for back-up.

Work	<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"/>
Mobile	<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"/>

Does not have a telephone.....6

Refused to provide8

T2 Do you have an email address that you check regularly?

No.....1

Yes (*write in full email address below*)2

Refused to provide8

T3 How likely is it that you will move in the next 12 months?

- | | |
|--------------------------|-------|
| Very likely | 1 |
| Likely | 2 |
| Neither / not sure | 3 ➔T5 |
| Unlikely | 4 ➔T5 |
| Very unlikely | 5 ➔T5 |

imhnry

T3 How likely to move in next 12 months

T4a Do you know your new address?

Please record any information you are told (even if it is only the name of the region they are moving to).

No 1

Yes, Postal address
(write in below, including p/code) 2

POST CODE _____

Street address
(write in below if different from above)

POST CODE _____

Will be overseas 4

Refused to provide..... 8

T4b When do you expect to begin living at your new address?

Month Year
Record month and year

2	0	

Don't know 99

imhexpmt T4b When expect to live in new address
Month
imhexpyr T4b When expect to live in new address
Year

- T5** We also ask for the name and number of two other people who might know where you are, in case you move in the meantime. Relatives who don't live with you are usually the best for this. (They will only be contacted if you cannot be found, and these contact details will be kept completely secure and not used for any other purpose.) Can you please let these people know that you have given this study their details in case you move and they need to be contacted?

Try to record a different contact for each respondent.

	Name and r'ship to respondent	Phone/email	Postal address	
CONTACT 1	Name:	Work: (____) _____		
		Home: (____) _____		
	Relationship to respondent :	mob:		
	Respondent's	email:	Post code	
CONTACT 2	Name:	Work: (____) _____		
		Home: (____) _____		
	Relationship to respondent :	mob:		
	Respondent's	email:	Post code	

Reason for above contact details not given:

ihhncr t5 number of contacts recorded

- T6** CONFIRM D.O.B. FROM HF AND RECORD: Can you confirm your date of birth please?

If queried, explain that we need DOB on this form so we can marry the information here with the information on other forms.

<input type="text"/>	<input type="text"/>	<input type="text"/>	1	9	<input type="text"/>	<input type="text"/>
Day	Month	Year				

- T7a** There is also a self-completion questionnaire we would like you to fill in. This contains some additional questions that you might find easier to answer by yourself. You can complete this in your own time and I will come back and collect it on another day.

Give pen (i.e. the 'gift') to respondent and recommend that they use it when completing the questionnaire.

Point out instructions on the front of SCQ and emphasise that if they make a mistake it's important that they black-out the box completely.

- T7b** ON THE FRONT OF THE SCQ RECORD THE HOUSEHOLD ID (5 DIGITS) AND THE RESPONDENT'S PERSON ID (2 DIGITS). WRITE THE RESPONDENT'S FIRST NAME IN THE SPACE PROVIDED.

- T7c** RECORD SCQ
SERIAL NUMBER:

ihhscqsn

IMPORTANT NOTE: The SCQ serial number is printed on the bottom right-hand corner of the SCQ.

SCQ not issued..... 99997

- T8** TIMESTAMP

Record time now : am / pm

Total interview length

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

minutes

ihhpqlen

THANK AND CLOSE

REMEMBER TO COMPLETE THE INTERVIEW SITUATION DETAILS ON THE LAST PAGE

Z. INTERVIEW SITUATION

To be completed by the interviewer in between interviews or immediately after leaving house.

Z1 Were any other adults present during any of this interview?

- Yes 1
No 2 → Z3

iioadult Z1 Any other adults present

Z2 How much do you think they influenced the answers?

- Not at all 1
A little 2
A fair amount 3
A great deal 4

iioinflu Z2 Influence respondent answers

Z3 In general, how would you describe the respondent's understanding of the questions?

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

ioundst Z3 Describe respondents understanding of questions

Z4 Was the respondent suspicious about the study after the interview was completed?

- No, not at all suspicious 1
Yes, somewhat suspicious 2
Yes, very suspicious 3

iiosusp Z4 Was respondent suspicious about study after completion

Z5 Did the respondent refer to any of the following documents during the interview?

Yes No

- (a) A pay slip? 1 2
(b) A tax return? 1 2
(c) A benefit statement from Centrelink? 1 2
(d) Any other document? 1 2

iiodocps Z5a Refer to documents - a pay slip
iiodoctx Z5b Refer to documents - a tax return
iiodoccl Z5c Refer to documents - a benefit statement from Centrelink
iiodocod Z5d Refer to documents - any other document

Z6 In general, how would you describe the respondent's co-operation during the interview?

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

iiocoop Z6 Co-operation during interview

Z7 Did the respondent have any of the following problems which may have affected the interview?

	Yes	No
a Poor eyesight (blindness).....	1	2
b Hearing problems	1	2
c Reading difficulties	1	2
d English was second language.....	1	2
e Other language problems.....	1	2

Z8a Was this interview completed with the assistance of a third party (e.g., such as an interpreter or another member of the family)?

No.....	1 →Z9
Yes, Roy Morgan organised interpreter assisted	2
Yes, family member / friend assisted.....	3

Z8b What was the reason the interview had to be assisted?

English language difficulties	1
Sickness or disability	2
Other.....	3

Z9 Where (or how) was the interview conducted?

Face-to-face inside the respondent's home	06
Face-to-face outside the respondent's home / on doorstep	07
Face-to-face at the respondent's workplace.....	08
Face-to-face some other place.....	09
By phone at respondent's home.....	10
By phone at respondent's workplace.....	11
By phone elsewhere	12

**Z10 Please note down any ambiguous or conflicting situations in this interview that you think editors and coders should know about?
Please add any further remarks that may help to clarify any problems arising during processing.**

iiopeye	Z7 Did respondent have problem which may have affected interview - a Poor eyesight
iiophear	Z7 Did respondent have problem which may have affected interview - b Hearing problems
iiopread	Z7 Did respondent have problem which may have affected interview - c Reading difficulties
iiopeng	Z7 Did respondent have problem which may have affected interview - d English was second language
iioplanc	Z7 Did respondent have problem which may have affected interview - e Other language problems
iiopnone	Z7 Did respondent have problem which may have affected interview - None of these

iiohlp Z8a Assistance of 3rd party

iioreea Z8b Reason for need of assistance

iiolocn Z9 Where (or how) was the interview conducted?



LIVING IN AUSTRALIA

Roy Morgan
Research

Freecall: 1800 656 670
Email: hilda@roymorgan.com

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Household ID Person No.

All data are provided **IN-CONFIDENCE**

*First name of
respondent:*

Thank you for the information you have already given our interviewer.

This form contains some additional questions that you might find easier to answer by yourself rather than having the interviewer ask them.

All information you give us will be completely confidential. When you have completed the questionnaire you should seal it in the envelope provided and give it to your interviewer, who will return it unopened to our office. If you prefer, you may post it back to us instead.

In our office, only the survey team will have access to this form. Everyone in this team has signed a deed of confidentiality and is required to observe privacy laws when handling your information.

Your full name or address will never be linked with any of the information you provide.

Instructions for completing this form

In answering these questions, please be as honest and accurate as possible.

- Use only blue or black ink, or a dark lead pencil. Put an **X** inside the box provided.
(Do not mark any areas outside the box.)
For example:

Right	Wrong
X	— <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="radio"/> <input checked="" type="checkbox"/>

- **If you make a mistake:**
Simply colour in the whole box and mark the correct one as shown.
For example:

<input type="checkbox"/> 1		X	<input type="checkbox"/> 4
-------------------------------	--	----------	-------------------------------

If more than one answer is allowed, this will be specified under the question.

What to do once you have completed the questionnaire?

Please seal it in the envelope provided.

Your interviewer will come back to collect this form on _____ around _____

If the interviewer is unable to collect this form, they will phone you and ask you to post it in the reply paid envelope to the Roy Morgan Research office.

Any questions?

Ask your interviewer, or ring us on our **FREE CALL NUMBER** **1800 656 670**

PART A: GENERAL HEALTH AND WELL-BEING
(SF-36 Health Survey)

This first set of questions seeks your views about your health, how you feel and how well you are able to do your usual activities.

Please take the time to read and answer each question carefully by crossing the box corresponding to your response. If you are unsure about how to answer a question, please give the best answer you can.

A1 In general, would you say your health is:

(Cross **ONE** box)

<input type="checkbox"/> ₁ Excellent	<input type="checkbox"/> ₂ Very good	<input type="checkbox"/> ₃ Good	<input type="checkbox"/> ₄ Fair	<input type="checkbox"/> ₅ Poor
---	---	--	--	--

igh1

A2 Compared to one year ago, how would you rate your health in general now?

(Cross **ONE** box)

<input type="checkbox"/> ₁ Much better now than a year ago
<input type="checkbox"/> ₂ Somewhat better now than a year ago
<input type="checkbox"/> ₃ About the same as one year ago
<input type="checkbox"/> ₄ Somewhat worse now than one year ago
<input type="checkbox"/> ₅ Much worse now than one year ago

igh2

A3 The following questions are about activities you might do during a typical day.

Does your health now limit you in these activities? If so, how much?

(Cross **ONE** box on **EACH** line)

	ACTIVITIES	Yes, limited a lot	Yes, limited a little	No, not limited at all
a	Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
b	Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling or playing golf	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
c	Lifting or carrying groceries	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
d	Climbing several flights of stairs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
e	Climbing one flight of stairs	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
f	Bending, kneeling, or stooping	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
g	Walking more than one kilometre	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
h	Walking half a kilometre	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
i	Walking 100 metres	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
j	Bathing or dressing yourself	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

igh3a

igh3b

igh3c

igh3d

igh3e

igh3f

igh3g

igh3h

igh3i

igh3j

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A4 During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health?

(Cross ONE box on EACH line)

		YES	NO	
a	Cut down the amount of time you spent on work or other activities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	igh4a
b	Accomplished less than you would like	<input type="checkbox"/> 1	<input type="checkbox"/> 2	igh4b
c	Were limited in the kind of work or other activities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	igh4c
d	Had difficulty performing the work or other activities (for example, it took extra effort)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	igh4d

A5 During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?

(Cross ONE box on EACH line)

		YES	NO	
a	Cut down the amount of time you spent on work or other activities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	igh5a
b	Accomplished less than you would like	<input type="checkbox"/> 1	<input type="checkbox"/> 2	igh5b
c	Didn't do work or other activities as carefully as usual	<input type="checkbox"/> 1	<input type="checkbox"/> 2	igh5c

A6 During the past 4 weeks, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbours, or groups?

(Cross ONE box)

<input type="checkbox"/> 1 Not at all	<input type="checkbox"/> 2 Slightly	<input type="checkbox"/> 3 Moderately	<input type="checkbox"/> 4 Quite a bit	<input type="checkbox"/> 5 Extremely
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A7 How much bodily pain have you had during the past 4 weeks?

(Cross ONE box)

<input type="checkbox"/> 1 No bodily pain	<input type="checkbox"/> 2 Very mild	<input type="checkbox"/> 3 Mild	<input type="checkbox"/> 4 Moderate	<input type="checkbox"/> 5 Severe	<input type="checkbox"/> 6 Very severe
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igh7

A8 During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?

(Cross ONE box)

<input type="checkbox"/> 1 Not at all	<input type="checkbox"/> 2 Slightly	<input type="checkbox"/> 3 Moderately	<input type="checkbox"/> 4 Quite a bit	<input type="checkbox"/> 5 Extremely
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igh8

- A9** These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling.

How much of the time during the past 4 weeks:

(Cross ONE box on EACH line)

		All of the time	Most of the time	A good bit of the time	Some of the time	A little of the time	None of the time	
a	Did you feel full of life?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9a
b	Have you been a nervous person?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9b
c	Have you felt so down in the dumps that nothing could cheer you up?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9c
d	Have you felt calm and peaceful?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9d
e	Did you have a lot of energy?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9e
f	Have you felt down?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9f
g	Did you feel worn out?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9g
h	Have you been a happy person?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9h
i	Did you feel tired?	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	igh9i

- A10** During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?

(Cross ONE box)

<input type="checkbox"/> 1 ₁	All of the time	igh10
<input type="checkbox"/> 2 ₂	Most of the time	
<input type="checkbox"/> 3 ₃	Some of the time	
<input type="checkbox"/> 4 ₄	A little of the time	
<input type="checkbox"/> 5 ₅	None of the time	

- A11** How TRUE or FALSE is each of the following statements for you?

(Cross ONE box on EACH line)

		Definitely True	Mostly True	Don't know	Mostly False	Definitely False	
a	I seem to get sick a little easier than other people	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	igh11a
b	I am as healthy as anybody I know	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	igh11b
c	I expect my health to get worse	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	igh11c
d	My health is excellent	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	igh11d

PART B: YOU, YOUR LIFESTYLE AND YOUR LIVING SITUATION

B1 In general, how often do you participate in moderate or intensive physical activity for at least 30 minutes?

Moderate level physical activity will cause a slight increase in breathing and heart rate, such as brisk walking. (Cross ONE box)

- 1 Not at all
- 2 Less than once a week
- 3 1 to 2 times a week
- 4 3 times a week
- 5 More than 3 times a week (but not every day)
- 6 Every day

B2 Do you smoke cigarettes or any other tobacco products? (Cross ONE box)

- 1 No, I have never smoked ➔ Go to B4
- 2 No, I no longer smoke ➔ Go to B4
- 3 Yes, I smoke daily ➔ Go to B3
- 4 Yes, I smoke at least weekly (but not daily) ➔ Go to B3
- 5 Yes, I smoke less often than weekly ➔ Go to B3

B3 How many cigarettes do you usually smoke each week?

Please convert cigar/pipe/loose tobacco to a number of cigarettes: per week

B4 Do you drink alcohol? (Cross ONE box)

- 1 No, I have never drunk alcohol ➔ Go to B7
- 2 No, I no longer drink alcohol ➔ Go to B7
- 3 Yes, I drink alcohol every day
- 4 Yes, I drink alcohol 5 or 6 days per week
- 5 Yes, I drink alcohol 3 or 4 days per week
- 6 Yes, I drink alcohol 1 or 2 days per week
- 7 Yes, I drink alcohol 2 or 3 days per month
- 8 Yes, but only rarely

B5 On a day that you have an alcoholic drink, how many standard drinks do you usually have?

A standard drink is a small glass of wine, a 285 ml glass of regular beer, a nip of spirits, or a mixed drink. (Cross ONE box)

- 1 13 or more standard drinks
- 2 11 to 12 standard drinks
- 3 9 to 10 standard drinks
- 4 7 to 8 standard drinks
- 5 5 to 6 standard drinks
- 6 3 to 4 standard drinks
- 7 1 to 2 standard drinks

ilsdrka

B6

FEMALES

OR

MALES

How often do you have 5 or more standard drinks on one occasion?

How often do you have 7 or more standard drinks on one occasion?

(Use the boxes below and cross ONE only)

- 1 Not in the last year
- 2 Less than monthly but at least once a year
- 3 Once a month
- 4 2 to 3 times a month
- 5 1 to 2 times a week
- 6 3 to 4 times a week
- 7 5 or more times a week

ilsdrex

B7 Are you currently an active member of a sporting, hobby or community-based club or association?

(Cross ONE box)

- 1 Yes
- 2 No

ilsclub

+

+

+

B8 How often do you feel rushed or pressed for time?

(Cross **ONE** box)

ilsrush

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Rarely
- 5 Never

B9 How often do you feel you have spare time that you don't know what to do with?

(Cross **ONE** box)

ilsstime

- 1 Almost always
- 2 Often
- 3 Sometimes
- 4 Rarely
- 5 Never

B10 How tall are you (without shoes)?

You only need to provide an answer in either centimeters (cms) or in feet / inches.

ibmhtcm

cms

ibmhtft
ibmhtin

OR

feet inches

(Note: There are 12 inches in a foot)

ibmwtkg

kgs

ibmwstt
ibmwtbl

OR

stones pounds

(Note: There are 14 pounds in a stone)

B12 Are you currently on a diet to lose weight?

(Cross **ONE** box)

iffcdiet

- 1 Yes
- 2 No

B13 In the last 12 months, how often have you dieted in order to lose weight?

(Cross **ONE** box)

iffdietf

- 1 Never
- 2 Once
- 3 More than once
- 4 Always on a diet

B14 Do you consider yourself to be ...

(Cross **ONE** box)

iffsrw

- 1 Acceptable weight?
- 2 Underweight?
- 3 Overweight?

B15 How satisfied are you with your current weight?

(Cross **ONE** box)

iffscw

- 1 Very satisfied
- 2 Satisfied
- 3 Neither satisfied nor dissatisfied
- 4 Dissatisfied
- 5 Very dissatisfied

B16 How often do you usually eat each of the following food types?

(Cross ONE box on EACH line)

		Never	Less than once a month	1-3 times per month	Once per week	2-4 times per week	5-6 times per week	Once per day	Two or more times per day
a	Legumes / pulses (such as kidney beans, lentils, tofu).	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
b	Biscuits, cakes, pies, cake-type desserts, pastries, etc.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
c	Pasta, rice, rice noodles/cakes, cornmeal or couscous.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
d	Snack foods (such as potato crisps, pretzels, popcorn, crackers, oriental snack mix, and salted nuts).	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
e	Breakfast cereals (such as muesli, bran flakes, porridge, and commercial cereal brands).	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
f	Confectionery (such as lollies, sweets, chocolate bars, and fudge) and ice cream.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
g	Breads (all types), crumpets and English muffins.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
h	Fried potatoes, French fries, hot chips or wedges.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
i	Red meat (for example, beef, veal, lamb, pork, and dishes where meat is the major component). Do <u>not</u> include ham.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
j	Processed meat products, such as cold meats, bacon, sausages, and meat pies.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
k	Poultry, such as chicken, turkey, and duck.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8
l	Fresh / frozen / tinned fish or shellfish. Do <u>not</u> include battered/crumbed fish, fish fingers or fish cakes.	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8

B17 The following questions are about your feelings in the past 4 weeks.

In the last four weeks, about how often did you feel ...

(Cross ONE box on EACH line)

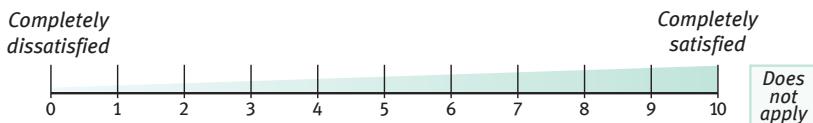
		All of the time	Most of the time	Some of the time	A little of the time	None of the time
a	tired out for no good reason?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
b	nervous?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
c	so nervous that nothing could calm you down?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
d	hopeless?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
e	restless or fidgety?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
f	so restless that you could not sit still?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
g	depressed?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
h	that everything was an effort?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
i	so sad that nothing could cheer you up?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5
j	worthless?	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5

B18 Now some questions about family life.

Please indicate, by crossing one box on each line, how satisfied or dissatisfied you currently are with each of the following relationships. The more satisfied you are, the higher the number of the box you should cross. The less satisfied you are, the lower the number of the box you should cross.

If the question does not apply to you, cross the "Does not apply" category.

How satisfied are you with:



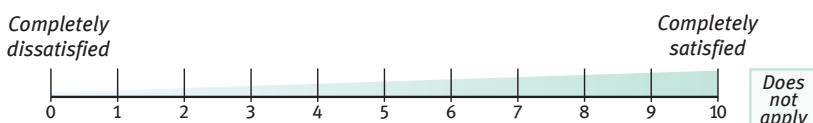
a	your relationship with your partner?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsrelsp
b	your relationship with your children?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsrelsc
c	your partner's relationship with your children?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsrelpc
d	your relationship with your stepchildren?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsrelst
e	how well the children in the household get along with each other?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsrelch
f	your relationship with your parents?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsrelrp
g	your relationship with your step-parents?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsrelrs
h	your relationship with your (most recent) former spouse or partner?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsrelfs

B19 And how satisfied are you with the following aspects of family life?

Again, please indicate, by crossing one box on each line, how satisfied or dissatisfied you currently are.

If the question does not apply to you, cross the "Does not apply" category.

How satisfied are you with:



a	the way childcare tasks are divided between you and your partner?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilsccdiv
b	the way household tasks are divided between you and your partner?	<input type="checkbox"/> 0 0	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8	<input type="checkbox"/> 9 9	<input type="checkbox"/> 10 10	<input type="checkbox"/> Does not apply	ilshhdiv

B20 Do you think you do your fair share around the house?

(Cross ONE box)

- 1 I do much more than my fair share
- 2 I do a bit more than my fair share
- 3 I do my fair share
- 4 I do a bit less than my fair share
- 5 I do much less than my fair share

B21 In general, about how often do you get together socially with friends or relatives not living with you?

(Cross ONE box)

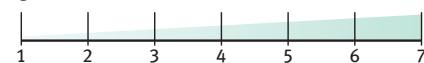
- 1 Every day
- 2 Several times a week
- 3 About once a week
- 4 2 or 3 times a month
- 5 About once a month
- 6 Once or twice every 3 months
- 7 Less often than once every 3 months

B22 The following statements have been used by many people to describe how much support they get from other people. How much do you agree or disagree with each? The more you agree, the higher the number of the box you should cross. The more you disagree, the lower the number of the box you should cross.

(Please cross ONE box for EACH statement)

Strongly
disagree

Strongly
agree



a	People don't come to visit me as often as I would like	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssuppv
b	I often need help from other people but can't get it	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssupnh
c	I seem to have a lot of friends	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssuplf
d	I don't have anyone that I can confide in	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssupac
e	I have no one to lean on in times of trouble	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssuplt
f	There is someone who can always cheer me up when I'm down	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssupcd
g	I often feel very lonely	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssupvl
h	I enjoy the time I spend with the people who are important to me	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssuppi
i	When something's on my mind, just talking with the people I know can make me feel better	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssuptp
j	When I need someone to help me out, I can usually find someone	<input type="checkbox"/> 1 ₁	<input type="checkbox"/> 2 ₂	<input type="checkbox"/> 3 ₃	<input type="checkbox"/> 4 ₄	<input type="checkbox"/> 5 ₅	<input type="checkbox"/> 6 ₆	<input type="checkbox"/> 7 ₇	ilssupsh

B23 We now would like you to think about major events that have happened in your life over the past 12 months.

For each statement cross either the YES box or the NO box to indicate whether each event happened during the past 12 months. If you answer "YES", then also cross one box to indicate how long ago the event happened or started.

Event occurred	Did any of these happen to you in the past 12 months?	YES	NO	If "YES" indicate how many months ago it happened				No answer
				0 to 3 months ago	4 to 6 months ago	7 to 9 months ago	10 to 12 months ago	
ilemar	a Got married	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilemarq1	ilemarq2	ilemarq3	ilemarq4	ilemarna
ilesep	b Separated from spouse or long-term partner	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilesepq1	ilesepq2	ilesepq3	ilesepq4	ilesepna
ilercl	c Got back together with spouse or long-term partner after a separation	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilerclq1	ilerclq2	ilerclq3	ilerclq4	ilerclna
ileprg	d Pregnancy / pregnancy of partner	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ileprgq1	ileprgq2	ileprgq3	ileprgq4	ileprgna
ilebth	e Partner or I gave birth to, or adopted, a new child	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilebthq1	ilebthq2	ilebthq3	ilebthq4	ilebthna
ileins	f Serious personal injury or illness to self	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ileinsq1	ileinsq2	ileinsq3	ileinsq4	ileinsna
ileinf	g Serious personal injury or illness to a close relative / family member	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ileinfq1	ileinfq2	ileinfq3	ileinfq4	ileinfna
iledsc	h Death of spouse or child	<input type="checkbox"/> 2	<input type="checkbox"/> 1	iledscq1	iledscq2	iledscq3	iledscq4	iledscna
iledrl	i Death of other close relative / family member (e.g., parent or sibling)	<input type="checkbox"/> 2	<input type="checkbox"/> 1	iledrlq1	iledrlq2	iledrlq3	iledrlq4	iledrlna
iledfr	j Death of a close friend	<input type="checkbox"/> 2	<input type="checkbox"/> 1	iledfrq1	iledfrq2	iledfrq3	iledfrq4	iledfrna
ilevio	k Victim of physical violence (e.g., assault)	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilevioq1	ilevioq2	ilevioq3	ilevioq4	ileviona
ilepcm	l Victim of a property crime (e.g., theft, housebreaking)	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilepcmq1	ilepcmq2	ilepcmq3	ilepcmq4	ilepcmna
ilejls	m Detained in a jail / correctional facility	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilejlsq1	ilejlsq2	ilejlsq3	ilejlsq4	ilejlsna
ilejlf	n Close family member detained in a jail / correctional facility	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilejlfq1	ilejlfq2	ilejlfq3	ilejlfq4	ilejlfna
ilertr	o Retired from the workforce	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilertrq1	ilertrq2	ilertrq3	ilertrq4	ilertrna
ilefrd	p Fired or made redundant by an employer	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilefrdq1	ilefrdq2	ilefrdq3	ilefrdq4	ilefrdna
ilejob	q Changed jobs (i.e., employers)	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilejobq1	ilejobq2	ilejobq3	ilejobq4	ilejobna
ileprm	r Promoted at work	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ileprmq1	ileprmq2	ileprmq3	ileprmq4	ileprmna
ilefni	s Major improvement in financial situation (e.g., won lottery, received an inheritance)	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilefniq1	ilefniq2	ilefniq3	ilefniq4	ilefnina
ilefnw	t Major worsening in financial situation (e.g., went bankrupt)	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilefnwq1	ilefnwq2	ilefnwq3	ilefnwq4	ilefnwna
ilemvnd	u Changed residence	<input type="checkbox"/> 2	<input type="checkbox"/> 1	ilemvdq1	ilemvdq2	ilemvdq3	ilemvdq4	ilemvdna
iledhm	v A weather-related disaster (e.g., flood, bushfire, cyclone) damaged or destroyed your home	<input type="checkbox"/> 2	<input type="checkbox"/> 1	iledhmq1	iledhmq2	iledhmq3	iledhmq4	iledhmna

B24 How much time would you spend on each of the following activities in a typical week?

IMPORTANT: • Please do not count any activity twice
• If you do not do an activity, write “0” in the hours box

		Hours per week	Minutes (if applicable)	
a	Paid employment	[]	[]	ilshremp ilsmnemp
b	Travelling to and from a place of paid employment	[]	[]	ilshrcm ilsmncom
c	Household errands, such as shopping, banking, paying bills, and keeping financial records (but do not include driving children to school and to other activities)	[]	[]	ilshrerr ilsmnerr
d	Housework, such as preparing meals, washing dishes, cleaning house, washing clothes, ironing and sewing	[]	[]	ilshrhw ilsmnhw
e	Outdoor tasks, including home maintenance (repairs, improvements, painting etc.), car maintenance or repairs and gardening	[]	[]	ilshrod ilsmnod
f	Playing with <u>your</u> children, helping them with personal care, teaching, coaching or actively supervising them, or getting them to child care, school and other activities	[]	[]	ilshrchd ilsmnchd
g	Looking after <u>other people's</u> children (aged under 12 years) on a regular, unpaid basis	[]	[]	ilshrocd ilsmnocd
h	Volunteer or charity work (for example, canteen work at the local school, unpaid work for a community club or organisation)	[]	[]	ilshrvol ilsmnvol
i	Caring for a disabled spouse or disabled adult relative, or caring for elderly parents or parents-in-law	[]	[]	ilshrcar ilsmnkar
TOTAL: This cannot exceed 168 hours and typically will not be greater than 120. If it is, please re-think your answers.		[]	Add total hours (whole hours only)	ilshrttl

B25 Have you ever been told by a doctor or nurse that you have any of the long-term health conditions listed below? Please only include those conditions that have lasted or are likely to last for six months or more.

(Cross ONE box on EACH line)

		YES	NO	
a	Arthritis	[1]	[2]	ilsheart
b	Asthma	[1]	[2]	ilsheast
c	Any type of cancer	[1]	[2]	ilshecan
d	Chronic bronchitis or emphysema	[1]	[2]	ilshecbe
e	Type 1 diabetes (childhood onset)	[1]	[2]	ilshed11
f	Type 2 diabetes (adult onset)	[1]	[2]	ilshed12
g	Depression / Anxiety	[1]	[2]	ilshedep
h	Heart / Coronary disease	[1]	[2]	ilshehcd
i	High blood pressure / Hypertension	[1]	[2]	ilshehbyp
j	Any other serious circulatory condition (e.g., stroke, hardening of the arteries)	[1]	[2]	ilsheoc

B26 How well do the following words describe you? For each word, cross one box to indicate how well that word describes you. There are no right or wrong answers. (Cross ONE box for EACH word.)

(Cross ONE box for EACH word.)

ipntalk	talkative	<table border="1"><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td></tr><tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td></tr></table>	1	2	3	4	5	6	7	1	2	3	4	5	6	7
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B27 Are you married or living with someone in a long-term relationship?

(Cross ONE box)

- 1 YES ➡ PLEASE COMPLETE THE NEXT QUESTION, B28
 2 No ➡ Go to C1

ilsmarlt

B28 The next few questions are about your relationship with your spouse or partner.

(Please cross ONE box for EACH statement)

a	How good is your relationship compared to most?	Poor <input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	Excellent	ilsrlrel
b	How often do you wish you had not married/got into this relationship?	Never <input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	Very often	ilsrlfrr
c	To what extent has your relationship met your original expectations?	Hardly at all <input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	Completely	ilsrlrme
d	How much do you love your spouse/partner?	Not much <input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	Very, very much	ilsrlaol
e	How many problems are there in your relationship?	Not many <input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	Very many	ilsrlpir
f	How well does your spouse/partner meet your needs?	Poor <input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	Excellent	ilsrlsmn

PART C: PERSONAL AND HOUSEHOLD FINANCES

ifiprosp

C1 Given your current needs and financial responsibilities, would you say that you and your family are ...

(Cross ONE box)

- 1 Prosperous
 2 Very comfortable
 3 Reasonably comfortable
 4 Just getting along
 5 Poor
 6 Very poor

C2 Since January 2009 did any of the following happen to you because of a shortage of money?

(Cross ONE box on EACH line)

		YES	NO	
a	Could not pay electricity, gas or telephone bills on time	<input type="checkbox"/> 1	<input type="checkbox"/> 2	ifiprbeg
b	Could not pay the mortgage or rent on time	<input type="checkbox"/> 1	<input type="checkbox"/> 2	ifiprbmr
c	Pawned or sold something	<input type="checkbox"/> 1	<input type="checkbox"/> 2	ifiprbps
d	Went without meals	<input type="checkbox"/> 1	<input type="checkbox"/> 2	ifiprbwm
e	Was unable to heat home	<input type="checkbox"/> 1	<input type="checkbox"/> 2	ifiprbuh
f	Asked for financial help from friends or family	<input type="checkbox"/> 1	<input type="checkbox"/> 2	ifiprbfh
g	Asked for help from welfare / community organisations	<input type="checkbox"/> 1	<input type="checkbox"/> 2	ifiprbwo

C3a Suppose you had only one week to raise \$3000 for an emergency. Which of the following best describes how hard it would be for you to get that money?

(Cross ONE box)

- 1 I could easily raise the money ➔ Go to C3b
- 2 I could raise the money, but it would involve some sacrifices (e.g., reduced spending, selling a possession) ➔ Go to C3b
- 3 I would have to do something drastic to raise the money (e.g., selling an important possession) ➔ Go to C3b
- 4 I don't think I could raise the money ➔ Go to C4

C3b And how would you obtain that money?

(Cross ALL boxes that apply)

- 1 Use savings
- 1 Borrow from a relative who lives with you
- 1 Borrow from a relative who lives elsewhere
- 1 Borrow from a friend
- 1 Borrow from a financial institution or use credit
- 1 Sell an asset
- 1 Use some other method to find the money

ifisav

ifibrelh

ifibrelo

ifibfri

ifibfin

ifisass

ifioth

ifina no answer

C4 Who makes the decisions about the following issues in your household? (Cross ONE box on EACH line)

	Always me	Usually me	Shared equally between partner & self	Usually my partner	Always my partner	Always /usually other person(s) in house	Shared equally among household members	Always /usually someone not living in house	Does not apply
a	Managing day-to-day spending and paying bills	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8 <input type="checkbox"/> 9
b	Making large household purchases (e.g., cars and major appliances)	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8 <input type="checkbox"/> 9
c	The number of hours you spend in paid work	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8 <input type="checkbox"/> 9
d	The number of hours your partner / spouse spends in paid work	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8 <input type="checkbox"/> 9
e	The way children are raised	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8 <input type="checkbox"/> 9
f	Social life and leisure activities	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8 <input type="checkbox"/> 9
g	Savings, investment and borrowing	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	<input type="checkbox"/> 8 8 <input type="checkbox"/> 9

idhhdd

idhhlp

idhbw

idhpwhr

idhcup

idhsoc

idhsib

- C5 Do you have any responsibility for the payment of household bills, such as electricity, gas, water and council rates?

(Cross ONE box)

- 1 Yes ➡ Please continue
 2 No ➡ Go to PART D on page 17

ixpresp

HOUSEHOLD SPENDING

- C6 Following is a list of things that many Australians regularly spend money on. For each type of expenditure, cross either the YES box or the NO box to indicate whether anyone in this household spends any money on that item. If you answer YES then also write in your best estimate of the average amount spent on that item. Write the amount rounded up to the nearest dollar.

We are interested in the total amount spent by all people in the household.

If you are unsure please make your best guess.

Do not include expenses associated with any businesses you may own.

Weekly Expenses

(Cross ONE box on EACH line)

			NO	YES	HOW MUCH PER WEEK?	
a	Groceries <i>(Include food, cleaning products, pet food and personal care products. Do <u>not</u> include alcohol or tobacco.)</i>		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpgrocs ixpgroca
b	Alcohol <i>(Include alcohol consumed with meals eaten out.)</i>		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpalc ixpalca
c	Cigarettes and other tobacco products		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpcig ixpciga
d	Public transport and taxis		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixppubt ixppubta
e	Meals eaten out <i>(Include restaurants, take-away food, and bought lunches and snacks. Do <u>not</u> include alcohol.)</i>		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpwmeo ixpwmeoa

Monthly Expenses

			NO	YES	HOW MUCH PER MONTH?	
f	Motor vehicle fuel (petrol, diesel, LPG) and engine oil		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpmvf ixpmvfa
g	Men's clothing and footwear		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpmcf ixpmcfa
h	Women's clothing and footwear		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpwcf ixpwdfa
i	Children's clothing and footwear		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpccf ixpccfa
j	Telephone rent and calls, and internet charges <i>(Include rent and charges on mobile phones)</i>		<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➡	\$ <input type="text"/> ·00	ixpteli ixptelia

Annual Expenses

		NO	YES	HOW MUCH IN THE LAST 12 MONTHS?	
k	Holidays and holiday travel costs <i>(Include short & long holidays.)</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixphol ixphola
l	Private health insurance	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpphi ixpphia
m	Other insurance (such as home and contents and motor vehicle insurance)	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpoi ixpoia
n	Fees paid to doctors, dentists, opticians, physiotherapists, chiropractors and any other health practitioner	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixphltp ixphltpa
o	Medicines, prescriptions and pharmaceuticals <i>(Include alternative medicines.)</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpphrm ixpphrma
p	Electricity bills, gas bills and other heating fuel (such as firewood and heating oil)	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixputil ixputila
q	Repairs, renovations and maintenance to your home	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixphmrn ixphmrna
r	Motor vehicle repairs and maintenance <i>(Include regular servicing.)</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpmvrv ixpmvra
s	Education fees paid to schools, universities and other education providers <i>(Include private tuition fees.)</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpeduc ixpeduca
t	Buying brand new motor vehicles, motorbikes or other vehicles <i>(Include boats, planes, caravans, trailers and jet skis.)</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpncar ixpncara
u	Buying used or second-hand motor vehicles, motorbikes or other vehicles <i>(Include boats, planes, caravans, trailers and jet skis.)</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpucar ixpucara
v	Computers and related devices (such as printers, digital cameras, iPods, MP3 players, electronic organizers and game consoles)	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpcomp ixpcompa
w	Televisions, home entertainment systems and other audio visual equipment (such as DVD players and video cameras)	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixptvav ixptvava
x	Household appliances, such as ovens, fridges, washing machines and air conditioners	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpwg ixpwga
y	Furniture <i>(Make sure you include any bedroom and outdoor furniture. Do <u>not</u> include floor coverings.)</i>	<input type="checkbox"/> 1	<input type="checkbox"/> 2 ➔	\$ <input type="text"/> .00	ixpfurn ixpfurna

PART D: YOUR JOB AND THE WORK PLACE

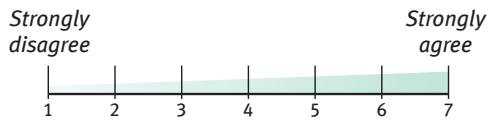
D1 Are you currently in paid work?

- 1 Yes ➡ PLEASE GO TO D2 AND COMPLETE THE REST OF PART D
 2 No ➡ Go to PART E ON PAGE 18

ijopw

D2 The following statements are about your current (main) job. Please indicate, by crossing one box on each line, how strongly you agree or disagree with each. The more you agree, the higher the number of the box you should cross. The more you disagree, the lower the number of the box you should cross.

(Please cross **X** ONE box for EACH statement)



a	My job is more stressful than I had ever imagined	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomms
b	I fear that the amount of stress in my job will make me physically ill	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijompi
c	I get paid fairly for the things I do in my job	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijompf
d	I have a secure future in my job	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomsf
e	The company I work for will still be in business 5 years from now	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomcsb
f	I worry about the future of my job	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomwf
g	My job is complex and difficult	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomcd
h	My job often requires me to learn new skills	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomns
i	I <u>use</u> many of my skills and abilities in my current job	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomus
j	I have a lot of freedom to decide <u>how</u> I do my own work	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomfd
k	I have a lot of say about what happens on my job	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomls
l	I have a lot of freedom to decide <u>when</u> I do my work	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomfw
m	I have a lot of choice in deciding what I do at work	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomdw
n	My working times can be flexible	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomflex
o	I can decide when to take a break	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijombrk
p	My job requires me to do the same things over and over again	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomrpt
q	My job provides me with a variety of interesting things to do	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomvar
r	My job requires me to take initiative	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomini
s	I have to work fast in my job	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomfast
t	I have to work very intensely in my job	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomwi
u	I don't have enough time to do everything in my job	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ijomtime

D3 Following is a list of conditions and entitlements that employers sometimes provide their employees. For each, please indicate whether you, or other employees working at a similar level to you at your workplace, would be able to use these if needed.

(Cross ONE box on EACH line)

		Yes	No	Don't know	
a	Paid maternity leave	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	ijowppml
b	Unpaid maternity leave	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	ijowpuml
c	Parental leave	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	ijowppnl
d	Special leave for caring for family members	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	ijowpcr
e	Permanent part-time work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	ijowpptw
f	Home-based work	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	ijowphbw
g	Flexible start and finish times	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	ijowpfx
h	Child care facilities or subsidised child care expenses	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/>	ijowpcc

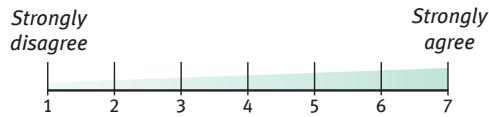
PART E: PARENTING

E1 Do you have parenting responsibilities for any children aged 17 years or less?

- 1 Yes ➔ PLEASE GO TO E2 AND COMPLETE THE REST OF PART E
 2 No ➔ Go to PART F ON PAGE 20

iparesp

E2 The following statements are about raising children. Thinking about the children aged 17 years or less that you have parenting responsibility for, please indicate, by crossing one box on each line, how strongly you agree or disagree with each statement. The more you agree, the higher the number of the box you should cross. The more you disagree, the lower the number of the box you should cross.



a	Being a parent is harder than I thought it would be	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipahard
b	I often feel tired, worn out, or exhausted from meeting the needs of my children	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipatird
c	I feel trapped by my responsibilities as a parent	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipatrap
d	I find that taking care of my child/children is much more work than pleasure	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawork

E3 Do you think you do your fair share of looking after the children?

(Cross ONE box)

1 I do much more than my fair share
 2 I do a bit more than my fair share
 3 I do my fair share
 4 I do a bit less than my fair share
 5 I do much less than my fair share

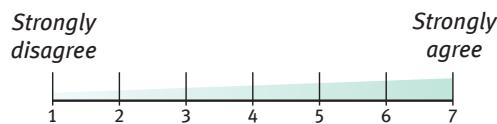
ipashare

This question is for parents who are in paid work.

If you are not in paid work, skip this question and ➡ Go to PART F ON PAGE 20

- E4** The following statements are about combining work with family responsibilities. Please indicate, by crossing one box on each line, how strongly you agree or disagree with each. The more you agree, the higher the number of the box you should cross. The more you disagree, the lower the number of the box you should cross. *Strongly* *St*

(Please cross ONE box for EACH statement)



a	Having both work and family responsibilities makes me a more well-rounded person	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input checked="" type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkmrp
b	Having both work and family responsibilities gives my life more variety	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawklmv
c	Managing work and family responsibilities as well as I do makes me feel competent	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkfc
d	Because of my family responsibilities, I have to turn down work activities or opportunities that I would prefer to take on	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawktdw
e	Having both work and family responsibilities challenges me to be the best I can be	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkcm
f	Because of my family responsibilities, the time I spend working is less enjoyable and more pressured	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkle
g	Because of the requirements of my job, I miss out on home or family activities that I would prefer to participate in	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkmfh
h	Because of the requirements of my job, my family time is less enjoyable and more pressured	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkfle
i	Working makes me feel good about myself, which is good for my children	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkgd
j	My work has a positive effect on my children	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkpec
k	Working helps me to better appreciate the time I spend with my children	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkbac
l	The fact that I am working makes me a better parent	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkbp
m	I worry about what goes on with my children while I'm at work	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkwc
n	Working leaves me with too little time or energy to be the kind of parent I want to be	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawklte
o	Working causes me to miss out on some of the rewarding aspects of being a parent	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkrap
p	Thinking about the children interferes with my performance at work	<input type="checkbox"/> 1 1	<input type="checkbox"/> 2 2	<input type="checkbox"/> 3 3	<input type="checkbox"/> 4 4	<input type="checkbox"/> 5 5	<input type="checkbox"/> 6 6	<input type="checkbox"/> 7 7	ipawkcip

PART F:**F1 Are you male or female?**(Cross **ONE** box) Male Female**F2 Which age group do you belong to?**(Cross **ONE** box)

- | | | | |
|----------------------------|---------------|-----------------------------|------------------|
| <input type="checkbox"/> 1 | 15 – 17 years | <input type="checkbox"/> 6 | 35 – 44 years |
| <input type="checkbox"/> 2 | 18 – 19 years | <input type="checkbox"/> 7 | 45 – 54 years |
| <input type="checkbox"/> 3 | 20 – 21 years | <input type="checkbox"/> 8 | 55 – 64 years |
| <input type="checkbox"/> 4 | 22 – 24 years | <input type="checkbox"/> 9 | 65 – 74 years |
| <input type="checkbox"/> 5 | 25 – 34 years | <input type="checkbox"/> 10 | 75 years or over |

F3 What is today's date?day month year

<input type="text"/>	/	<input type="text"/>	/	2	0	<input type="text"/>	<input type="text"/>
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iscdate

F4 Is there anything else that you would like to tell us about living in Australia?

If so, please write on the lines below. (To ensure your privacy remains protected at all times, please do not write any personal contact details here such as your name, address or phone number.)

THERE ARE NO MORE QUESTIONS.

Please seal the completed questionnaire in the envelope provided and have it ready when the interviewer returns to collect it.

The interviewer will come back at the time shown on the front cover.

If the interviewer cannot come back, they will phone you and ask you to post it using the reply-paid envelope provided.

Once again, Thank You for your cooperation and participation.

Roy Morgan
Research

SHOWCARDS

WAVE 9 MAIN

SHOWCARD HF16

- **Employed (including self employed and working students):**
 - usually works 35 hours or more per week..... 1**
 - usually works less than 35 hours per week..... 2**
- **Not employed but looking for work** 3
- **Neither employed nor looking for work:**
 - retired** 4
 - home duties** 5
 - non-working student..... 6**

SHOWCARD HF17

Please Answer Yes or No

DISABILITIES/ HEALTH CONDITIONS WHICH:

- **Have lasted, or are likely to last, 6 months or more;**
- **Restrict everyday activity; and**
- **Can not be corrected by medication or medical aids.**

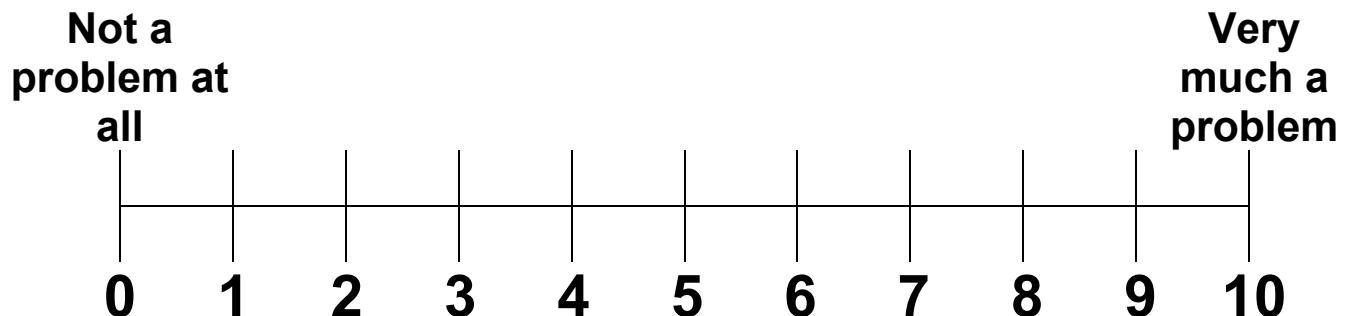
- Sight problems not corrected by glasses or contact lenses
- Hearing problems
- Speech problems
- Blackouts, fits or loss of consciousness
- Difficulty learning or understanding things
- Limited use of arms or fingers
- Difficulty gripping things
- Limited use of feet or legs
- A nervous or emotional condition which requires treatment
- Any condition that restricts physical activity or physical work (e.g., back problems, migraines)
- Any disfigurement or deformity
- Any mental illness which requires help or supervision
- Shortness of breath or difficulty breathing
- Chronic or recurring pain
- Long term effects as a result of a head injury, stroke or other brain damage
- A long term condition or ailment which is still restrictive even though it is being treated or medication is being taken for it
- Any other long-term condition such as arthritis, asthma, heart disease, Alzheimer's disease, dementia etc

SHOWCARD Q4

Types of child care you might have considered so you (or your partner) can undertake paid work:

- Family Day Care, Long Day Care, any other care at a Child Care Centre
- Outside of school hours or Vacation Care
- Someone paid to come to your home to care for your child
- Someone paid to care for your child in their home
- A friend, relative or neighbour caring for your child for free or for payment in kind

SHOWCARD Q5



- a Finding good quality child care
- b Finding the right person to take care of your child
- c Getting care for the hours you need
- d Finding care for a sick child
- e Finding care during school holidays
- f The cost of child care
- g Juggling multiple child care arrangements
- h Finding care for a difficult or special needs child
- i Finding a place at the child care centre of your choice
- j Finding a child care centre in the right location
- k Finding care your (child is / your children are) happy with
- l Finding care at short notice

SHOWCARD Q6a

- **Family Day Care, Long Day Care, any other care at a Child Care Centre**
- **Outside of school hours or Vacation Care**
- **Someone paid to come to your home (nanny/baby-sitter)**
- **Someone paid to care for your child in their home**
- **A relative who lives with you (paid or unpaid)**
- **A relative who doesn't live with you (paid or unpaid)**
- **A friend or neighbour (caring for the child either at your home or in their home; paid or unpaid)**
- **The child's brother or sister**
- **The child goes to your (or your partner's) work**
- **Child looks after his or her self**
- **Some other form of child care**

SHOWCARD Q6b

- **Family Day Care, Long Day Care, any other care at a Child Care Centre**
- **Outside of school hours or Vacation Care**
- **Someone paid to come to your home to care for your child (nanny/baby-sitter)**
- **Someone paid to care for your child in their home**
- **A relative who lives with you (whether paid or unpaid)**
- **A relative who doesn't live with you (whether paid or unpaid)**
- **A friend or neighbour (caring for the child either at your home or in their home, whether paid or unpaid)**
- **The child's brother or sister (whether paid or unpaid)**
- **Some other form of child care**

SHOWCARD Q8

Me or my partner (e.g., you arrange working hours so one of you is able to care for your child/ren)	1
The child's brother or sister	2
Child looks after self	3
Child comes to my (or my partner's) workplace	4
Child's grandparent who lives with us	5
Child's grandparent who lives elsewhere	6
Other relative who lives with us	7
Other relative who lives elsewhere	8
A friend or neighbour coming to <u>our</u> home.....	9
A friend or neighbour in <u>their</u> home.....	10
A paid sitter or nanny.....	11
Family day care.....	12
Formal outside of school hours care.....	13
Other (please specify)	21

SHOWCARD Q9

Me or my partner (e.g., taking paid or unpaid leave, you arrange working hours so one of you is able to care for your child/ren)	1
The child's brother or sister	2
Child looks after self	3
Child comes to my (or my partner's) workplace	4
Child's grandparent who lives with us	5
Child's grandparent who lives elsewhere	6
Other relative who lives with us	7
Other relative who lives elsewhere	8
A friend or neighbour coming to <u>our</u> home.....	9
A friend or neighbour in <u>their</u> home.....	10
A paid sitter or nanny.....	11
Family day care	12
Vacation care	13
Other (please specify)	21

SHOWCARD Q11

Me or my partner (e.g., you arrange working hours so one of you is able to care for your child/ren).....	1
The child's brother or sister.....	2
Child's grandparent who lives with us.....	3
Child's grandparent who lives elsewhere.....	4
Other relative who lives with us	5
Other relative who lives elsewhere	6
A friend or neighbour coming to <u>our</u> home.....	7
A friend or neighbour in <u>their</u> home.....	8
A paid sitter or nanny	9
Family day care	10
Long day care centre at workplace	11
Private or community long day care centre	12
Kindergarten / pre-school	13
Other (please specify).....	21

SHOWCARD Q12

- **Family Day Care, Long Day Care, any other care at a Child Care Centre**
- **Out of school hours or Vacation Care**
- **Someone paid to come to your home to care for your child (nanny/baby-sitter)**
- **Someone paid to care for your child in their home**
- **A relative who lives with you (whether paid or unpaid)**
- **A relative who doesn't live with you (whether paid or unpaid)**
- **A friend or neighbour (caring for the child either at your home or in their home, whether paid or unpaid)**
- **The child's brother or sister (whether paid or unpaid)**
- **Some other form of child care**

SHOWCARD Q14

The child's brother or sister.....	1
Child's grandparent who lives with us.....	2
Child's grandparent who lives elsewhere.....	3
Other relative who lives with us.....	4
Other relative who lives elsewhere.....	5
A friend or neighbour coming to <u>our</u> home	6
A friend or neighbour in <u>their</u> home	7
A paid sitter or nanny	8
Family day care	9
Private or community long day care centre.....	10
Formal outside of school hours care	11
Other (please specify).....	21

SHOWCARD Q16

The child's brother or sister.....	1
Child's grandparent who lives with us.....	2
Child's grandparent who lives elsewhere.....	3
Other relative who lives with us.....	4
Other relative who lives elsewhere.....	5
A friend or neighbour coming to <u>our</u> home	6
A friend or neighbour in <u>their</u> home	7
A paid sitter or nanny	8
Family day care	9
Private or community long day care centre.....	10
Kindergarten / pre-school.....	11
Other (please specify).....	21

SHOWCARD Q19

- | | |
|---|----------|
| Less than 6 months ago | 1 |
| Six to less than 12 months ago | 2 |
| One to less than 2 years ago..... | 3 |
| Two to less than 5 years ago | 4 |
| Five or more years ago | 5 |
| Never been to the dentist | 8 |

SHOWCARD R23

TOTAL GROSS INCOME OF EVERYONE LIVING IN THIS HOUSEHOLD

LAST FINANCIAL YEAR (1 July 2008 to 30 June 2009),
BEFORE TAX OR ANYTHING ELSE IS DEDUCTED.

Include income from all sources, such as wages, investments and
government pensions and benefits.

<u>Per Year</u>	<u>Per Week</u>	
Negative or Zero Income.....		1
\$1 - \$9,999.....	(\$1 - \$189).....	2
\$10,000 - \$19,999.....	(\$190 - \$379).....	3
\$20,000 - \$29,999.....	(\$380 - \$579).....	4
\$30,000 - \$39,999.....	(\$580 - \$769).....	5
\$40,000 - \$49,999.....	(\$770 - \$959).....	6
\$50,000 - \$59,999.....	(\$960 - \$1149).....	7
\$60,000 - \$79,999.....	(\$1150 - \$1529).....	8
\$80,000 - \$99,999.....	(\$1530 - \$1919).....	9
\$100,000 - \$124,999.....	(\$1920 - \$2399).....	10
\$125,000 - \$149,999.....	(\$2400 - \$2879).....	11
\$150,000 - \$199,999.....	(\$2880 - \$3839).....	12
\$200,000 or more.....	(\$3840 or more).....	13

SHOWCARD AA11

Skilled migrant	1
Business migrant.....	2
Family migrant*	3
Refugee or Special Humanitarian migrant	4
New Zealand citizen.....	5
None of the above.....	7

* Family migrants include people coming to Australia as spouses, parents or children of Australian permanent residents or citizens

SHOWCARD BB11

None	1
Primary school only	2
Some secondary school, but no more than Year 10	3
Year 11 or equivalent (e.g., 5th form, Leaving Certificate)	4
Year 12 or equivalent (e.g., 6th form, Matriculation)	5

SHOWCARD BB13

University	1
Teachers college / College of Advanced Education	2
Institute of Technology	3
Technical college / TAFE / College of Technical & Further Education	4
Employer	5
Other (please specify)	7

SHOWCARD 1

Year 12 or equivalent (Senior Secondary)	1
• 6 th form	
• Matriculation	
• Leaving Honours Certificate (SA)	
• Leaving Certificate (NSW, WA)	
• Certificate of Secondary Education (WA)	
• General Certificate of Education (GCE) A levels (UK)	
• International Baccalaureate	
• Higher School Certificate (NSW, Vic, Tas, ACT)	
• Senior Certificate (Qld)	
• Northern Territory Certificate of Education (NTCE)	
• South Australian Certificate of Education (SACE)	
• Tasmanian Certificate of Education (TCE)	
• Victorian Certificate of Education (VCE)	
• Western Australian Certificate of Education (WSCE)	
• Year 12 Certificate (ACT)	
Year 11 or equivalent.....	2
• 5 th form	
• School Leaving Certificate (Vic)	
• Technical Leaving Certificate (Vic)	
• Leaving Certificate (SA)	
• Leaving (Vic, SA)	
Year 10 or equivalent (Junior Secondary).....	3
• 4 th form	
• Intermediate (Vic, SA, NSW)	
• School Certificate (NSW, Tas)	
• Junior Certificate (Qld, WA)	
• Achievement Certificate (WA)	
• General Certificate of Education (GCE) O levels (UK)	
• General Certificate of Secondary Education (UK)	
• Junior Secondary Studies Certificate (NT)	
• Certificate of Lower Secondary Studies (WA)	
• Year 10 Certificate (ACT, NSW)	
Year 9 or equivalent.....	4
Year 8 or equivalent.....	5
Year 7 or equivalent.....	6
Did not attend secondary school but finished primary school	7
Attended primary school but did not finish	8

SHOWCARD 2

Government school	1
Catholic non-government school.....	2
Other non-government school	3
Other, not included above (please specify).....	7

SHOWCARD 3

Secondary school qualification – lower level.....	600
Secondary school qualification – highest level.....	611
Nursing qualification.....	001
Teaching qualification.....	002
Trade certificate or apprenticeship.....	514
Technician's certificate / Advanced certificate	511
Other certificate – level I	524
Other certificate – level II	521
Other certificate – level III	598
Other certificate – level IV	599
Other certificate – don't know level	500
Associate diploma/Diploma (2 yrs full-time or equivalent)	421
Associate degree	413
Undergraduate diploma/ Advanced diploma (3 yrs full-time or equivalent)	411
Bachelor degree but not honours.....	312
Honours bachelor degree	311
Graduate certificate.....	221
Post-graduate diploma /graduate diploma.....	211
Masters degree	120
Doctorate	110
Other (please specify)	995
Did not complete qualification	993
Still studying	994

SHOWCARD 4

Enrolled nurse	511
Associate diploma / Diploma (2 years full-time or equivalent)	421
Undergraduate diploma / Advanced diploma (3 years full-time or equivalent)	411
Bachelor degree but not honours	312
Honours bachelor degree	311
Triple, Double Certificate Nurse	310
Registered Nurse, Sister	310
Post-graduate diploma / Graduate diploma	211
Masters degree.....	120
Doctorate	110
Other (please specify).....	997

SHOWCARD 5

TPTC (Trained Primary Teaching Cert.).....	421
TSTC (Trained Secondary Teaching Cert.)	
TITC (Trained Infants Teaching Cert.)	411
Associate Diploma /Diploma (1-2 years full-time or equivalent)	498
Undergraduate Diploma of Teaching (Dip T) (3 years full-time or equivalent)	499
Bachelor Degree but not honours	312
Honours Bachelor Degree.....	311
Graduate Certificate.....	221
Postgraduate Diploma, Graduate Diploma, Diploma of Education (Dip Ed) (after Bachelor Degree or Undergrad Diploma)....	211
Masters Degree	120
Doctorate	110
Other (please specify).....	997

SHOWCARD 6

Secondary school qualification – lower level	600
Secondary school qualification – highest level	611
Certificate level I.....	524
Certificate level II.....	521
Certificate level III.....	514
Certificate level IV	511
Certificate – don't know level	500
Diploma (2 years full-time or equivalent).....	421
Associate Degree	413
Advanced Diploma (3 years full-time or equivalent).....	411
Bachelor degree but not honours	312
Honours bachelor degree	311
Graduate certificate	221
Graduate diploma.....	211
Masters degree	120
Doctorate	110
Other (please specify).....	997

SHOWCARD 7

Retired / Voluntarily inactive.....	1
Home duties / Child care	2
Study / Went to school, TAFE or university	3
Own disability or handicap	4
Own illness or injury.....	5
Looking after ill or disabled person	6
Travel / On holiday / Leisure activities.....	7
Working in an unpaid voluntary job.....	8
Other activity (please specify)	97

SHOWCARD A6

Government school	1
Catholic non-government school.....	2
Other non-government school	3
Other, not included above (please specify).....	7

SHOWCARD A9

Certificate – level I.....	524
Certificate – level II.....	521
Certificate – level III.....	514
Certificate – level IV	511
Certificate – don't know level	500
Diploma (2 yrs full-time or equivalent).....	421
Associate Degree	413
Advanced Diploma (3 yrs full-time or equivalent)	411
Bachelor Degree but not Honours	312
Honours Bachelor Degree.....	311
Graduate Certificate.....	221
Graduate Diploma	211
Masters Degree	120
Doctorate	110
Other (please specify)	995

SHOWCARD B4

Incorporated business

- has a registered business name with the Australian Securities and Investments Commission (ASIC);
- has “Incorporated”; “Limited”; “Proprietary Limited” or “no liability” in the name (abbreviated as “Ltd”, “Pty Ltd” or “N.L.”); and
- the company may be sued to recover the company’s debts, but the directors or shareholders may not.

Unincorporated business

- if the above criteria is not met, the business is NOT incorporated – that is, it’s unincorporated.

SHOWCARD C10

A regular daytime schedule	1
A regular evening shift.....	2
A regular night shift.....	3
A rotating shift (changes from days to evenings to nights).....	4
Split shift (two distinct periods each day).....	5
On call.....	6
Irregular schedule.....	7
Other (please specify)	8

SHOWCARD C22

- Employed on a fixed-term contract.....1**
- Employed on a casual basis.....2**
- Employed on a permanent or ongoing basis3**
- Other (please specify)**7

SHOWCARD C23

Collective (enterprise) agreement.....1

An agreement made at your workplace or firm between your employer and either a union or a group of employees.

It may sometimes be known as an Enterprise Bargaining Agreement (EBA) or a Certified Agreement (CA).

Individual agreement (or contract).....2

An agreement between you and your employer.
It may be verbal or written. It could simply be a letter of appointment.

Included here are Australian Workplace Agreements (AWAs), individual employment contracts, and informal individual arrangements.

Combination of collective / enterprise agreement and individual agreement.....3

This will apply in those cases where you are covered by a collective (i.e., enterprise) agreement, but are paid above the rate specified in that agreement.

Paid exactly the Award rate (or rate specified in the Australian Pay and Classification scale)4

None of the above.....7

Other arrangement (*please describe*)

SHOWCARD C27

**If you are an independent contractor,
you:**

- usually issue invoices (including tax invoices) to bill clients for the work that you do for them
- usually earn income from using your skills and effort, not just from owning your business
- do not spend most of your work time dealing with administrative tasks and paperwork for your business
- may be able to negotiate the terms of your work contract
- may perform work for more than one client
- may subcontract work to another person or business

SHOWCARD C31

Commercial*

Private sector “for profit” organisation 1

**Government business enterprise or
commercial statutory authority 2**

Other commercial (please specify) 3

** By ‘commercial’ we mean businesses that undertake activity for profit. It should not include businesses which, in the course of providing a public service, may happen to make a profit.*

Non-commercial

Private sector “not-for-profit” organisation 4

**Other government organisation, such as a
public service department, local councils,
schools and universities 5**

Other non-commercial (please specify) 6

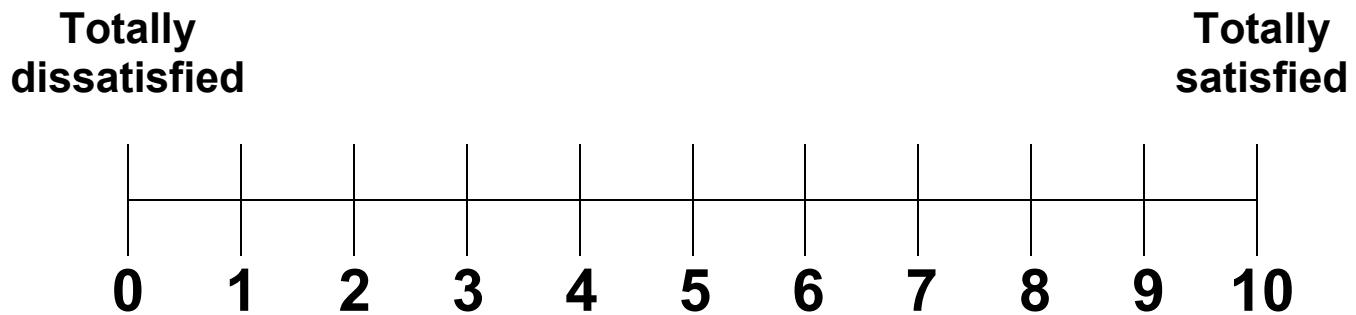
SHOWCARD C32

- One person (self)
- 2 to 4
- 5 to 9
- 10 to 19
- 20 to 49
- 50 to 99
- 100 to 199
- 200 to 499
- 500 or more

SHOWCARD C34

- **Less than 20**
- **20 to 99**
- **100 to 499**
- **500 to 999**
- **1,000 to 4,999**
- **5,000 to 19,999**
- **20,000 or more**

SHOWCARD C35



- a Your total pay**
- b Your job security**
- c The work itself (what you do)**
- d The hours you work**
- e The flexibility available to balance work and non-work commitments**
- f All things considered, how satisfied are you with your job?**

SHOWCARD C49

Self-employed1

Employed on a fixed-term contract.....2

Employed on a casual basis.....3

Employed on a permanent or ongoing basis.....4

Other (please specify)8

SHOWCARD D2

Written, phoned or applied in person to an employer for work	1
Answered an advertisement for a job.....	2
Checked factory notice boards, or used the touch-screens at Centrelink offices	3
Been registered with Centrelink as a jobseeker.....	4
Checked or registered with an employment agency.....	5
Anything else (please specify)	98

SHOWCARD D7

Because of your own ill health or disability	1
Employers thought you were too young or too old.....	2
The hours were unsuitable	3
You had transport problems or it was too far to travel	4
You did not have the required education, training or skills	5
You did not have enough work experience.....	6
Because of language difficulties	7
Because there were no jobs in your line of work	8
Because there were too many applicants for the available jobs.....	9
Because there were just no jobs at all.....	10
Because of difficulties in finding child care.....	11
Any other difficulties (please specify)	98

SHOWCARD D10

- Retired / Voluntarily inactive**1
- Home duties / Child care.....**2
- Study / Went to school, TAFE or university**3
- Own illness, injury or disability.....**4
- Looking after ill or disabled person.....**5
- Travel / On holiday / Leisure activities**6
- Working in an unpaid voluntary job.....**7
- Other activity (please specify).....**8

SHOWCARD D30

Self-employed	1
Employed on a fixed-term contract.....	2
Employed on a casual basis.....	3
Employed on a permanent or ongoing basis	4
Other (please specify)	8

SHOWCARD E6

- **Pay course fees**
- **Purchase materials, books etc.**
- **Pay for travel,
accommodation while
attending course**
- **Take unpaid time off to attend
training course**

SHOWCARD E7

- To help you get started in your job.....1**
- To improve your skills in your current job.....2**
- To maintain professional status and/or meet occupational standards3**
- To prepare you for a job you might do in the future or to facilitate promotion4**
- To develop your skills generally5**
- Because of health / safety concerns.....6**
- Other aims (please specify)8**

SHOWCARD E8

- Not at all**1
- Only to a limited extent**2
- To a moderate extent**3
- To a great extent.....**4
- To a very great extent**5
- Did not learn any new skills.....**7

SHOWCARD E14

- **Maternity leave**
- **Paternity leave**
- **Parental leave**
- **Long-service leave**
- **Bereavement leave**
- **Family leave**
- **Carers leave**
- **Other form of paid leave**

But NOT

- ° annual leave
- ° sick leave, or
- ° workers' compensation

SHOWCARD E17

Study	1
Part-time paid work	2
Voluntary unpaid work	3
Community Work organised by a Community Work Coordinator.....	4
Work for the Dole	5
Job Search Training (training to search for jobs, write applications and prepare for interviews)	6
Approved literacy / numeracy training	7
Green Corps	8
Job Placement Employment and Training (JPET)	9
Community Development Employment Projects	10
Relocating to an area of better employment prospects	11
Australian Apprenticeship Access Program (training to get you into a new apprenticeship)	12
Youth Pathways Program	13
Defence Force Reserve	14

SHOWCARD F14

Newstart Allowance.....	1
Mature Age Allowance	2
Service Pension (paid by Dept of Veterans' Affairs)	3
Disability Support Pension (paid by Centrelink)	4
Wife Pension	5
Carer Payment	6
Sickness Allowance	7
Widow Allowance (including Widow B Pension, paid by Centrelink).....	8
Special Benefit.....	9
Partner Allowance	10
Parenting Payment (<i>NOT Family Tax Benefit</i>)	11
Youth Allowance.....	12
Austudy / Abstudy payment	13
None of these	97

SHOWCARD F16

War Widow's / Widower's Pension (paid by Dept of Veterans' Affairs)	1
Disability Pension (paid by Dept of Veterans' Affairs)	2
Carer Allowance	3
Baby Bonus.....	4
Pensions or benefits paid by <u>overseas governments</u>	5
<u>Any other government pensions/</u> benefits (please specify).....	8

Do not include:

- Family Tax Benefit (Child Endowment)
- Superannuation payments

SHOWCARD F17

LAST FINANCIAL YEAR

1st July 2008 to 30th June 2009

SHOWCARD F22

Incorporated business

- has a registered business name with the Australian Securities and Investments Commission (ASIC);
- has “Incorporated”; “Limited”; “Proprietary Limited” or “no liability” in the name (abbreviated as “Ltd”, “Pty Ltd” or “N.L.”); and
- the company may be sued to recover the company’s debts, but the directors or shareholders may not.

Unincorporated business

- if the above criteria is not met, the business is NOT incorporated – that is, it’s unincorporated.

SHOWCARD F27a

Interest from:

- **banks**
- **other financial institution**
- **bonds**
- **debentures**
- **cash management trusts**
- **family or other private trust funds, or**
- **interest from loans to other persons not in this household**

SHOWCARD F28c

- **Company shares**
- **Managed funds**
- **Property trusts (listed and unlisted)**

SHOWCARD F30

One-off Government bonus payments made in the 2008-2009 financial year

2008 (Economic Security Strategy) Bonus Payments

- **Bonus payment for pensioners, seniors, people with disability, carers and veterans** (paid in December 2008)..... 1
- **Bonus payment for families** (paid in December 2008) 2

2009 (Stimulus Package) Bonus Payments

- **Single Income Family Bonus** (paid in March 2009)..... 3
- **Back to School Bonus** (paid in March 2009) 4
- **Training and Learning Bonus** (paid in March 2009)..... 5
- **Temporary supplement to the Education Entry Payment** (paid in March 2009)..... 6
- **Farmers Hardship Bonus** (paid in March or April 2009).... 7
- **Tax bonus for Working Australians**
(paid around April 2009)..... 8

SHOWCARD F31

Age Pension (from Australian Government)	1
Newstart Allowance	2
Mature Age Allowance.....	3
Service Pension (paid by Dept of Veterans' Affairs)	4
Disability Support Pension (paid by Centrelink).....	5
Disability Pension (paid by Dept of Veterans' Affairs)	6
Wife Pension.....	7
Carer Payment.....	8
Carer Allowance	9
Sickness Allowance.....	10
Widow Allowance (incl. Widow B Pension, paid by Centrelink)	11
War Widow's / Widowers Pension (paid by Dept of Veterans' Affairs)	12
Special Benefit	13
Partner Allowance.....	14
Youth Allowance	15
Austudy / Abstudy	16
Parenting Payment	17
Baby Bonus	18
Pensions / benefits from <u>overseas</u> governments	19
<u>Other government pensions / allowances</u> (please specify).....	97
Do <u>not</u> include Family Tax Benefit	

SHOWCARD F33

Superannuation / Roll-over Fund / Annuity / Life Insurance / Allocated Pension Fund	1
Child Support / Maintenance	2
Workers' Compensation / Accident or Sickness Insurance / Personal Accident Claims	3
Redundancy and severance payments.....	4
Inheritance / Bequests.....	5
Parents.....	6
Other persons not in this household (but excluding any income already reported).....	7
Any other source (please specify)	96

- Include cash gifts
- Do not include Family Tax Benefit

SHOWCARD F35

- Hardly ever or never.....1**
- Not very often**2
- About half of the time.....3**
- Most months**4
- Always or almost always**5

SHOWCARD G1

- Lives in this household
at least 50% of the time.....1**
- Lives in another household
more than 50% of the time.....2**
- Lives in a non-private dwelling, but spends
the remainder of the time mainly with you.....3**
- Lives elsewhere**4

SHOWCARD G3d

Less than 5 kilometres	A1
5-9 kms.....	B2
10-19 kms.....	C3
20-49 kms.....	D4
50-99 kms.....	E5
100-499 kms.....	F6
500 kms or more	G7
Overseas.....	H8

SHOWCARD G9a

Daily	1
At least once a week	2
At least once a fortnight.....	3
At least once a month	4
Once every 3 months	5
Once every 6 months	6
Once a year	7
Less than once a year	8
Never.....	9

SHOWCARD G10

- Nowhere near enough.....1**
- Not quite enough2**
- About right3**
- A little too much4**
- Way too much5**

SHOWCARD G11b

- Employed full-time - usually 35 hours or more per week**1
- Employed part-time - usually less than 35 hours per week.....**2
- Not employed BUT is looking for work.....**3
- Neither employed NOR looking for work:**
- Retired**4
- Home duties**5
- Non-working student.....**6
- Other**7

SHOWCARD G15e

Less than 5 kilometres	A1
5-9 kms.....	B2
10-19 kms.....	C3
20-49 kms.....	D4
50-99 kms.....	E5
100-499 kms.....	F6
500 kms or more	G7
Overseas.....	H8

SHOWCARD G22a

Daily	1
At least once a week	2
At least once a fortnight.....	3
At least once a month	4
Once every 3 months	5
Once every 6 months	6
Once a year	7
Less than once a year	8
Never.....	9

SHOWCARD G23

- Nowhere near enough.....1**
- Not quite enough2**
- About right3**
- A little too much4**
- Way too much5**

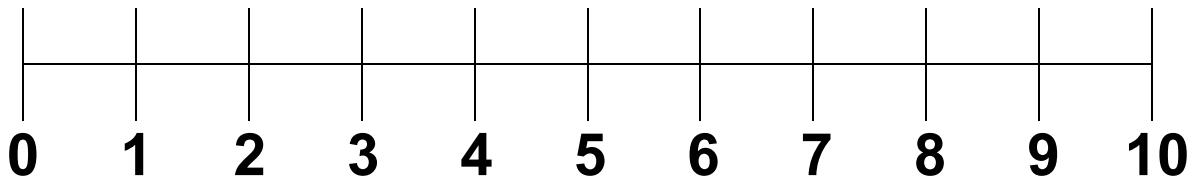
SHOWCARD G24

- Employed – usually works 35 hours or more per week**1
- Employed – usually works less than 35 hours per week.....**2
- Not employed BUT is looking for work.....**3
- Neither employed NOR looking for work:**
- Retired**4
- Home duties**5
- Non-working student.....**6
- Other**7

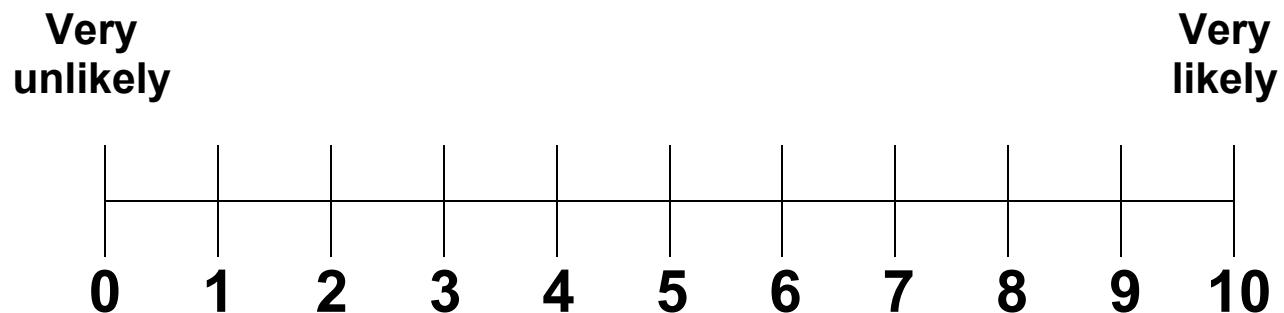
SHOWCARD G28

**Would
definitely not
like to have a
child / more
children**

**Would very
much like to
have a child /
more
children**



SHOWCARD G29



SHOWCARD H1a

Got married (in a registered marriage)	1
Separated (from a registered marriage)	2
Got divorced (finalised a divorce).....	3
Reunited with spouse	4
Was widowed.....	5
None of the above	7

SHOWCARD H4

Married (in a registered marriage).....	1
Separated (but not divorced).....	2
Divorced	3
Widowed.....	4
Never married but <u>living with someone</u> in a relationship	5
Never married and <u>not</u> living with someone in a relationship	6

SHOWCARD H6

- | | |
|--|----------|
| Married and living with spouse | 1 |
| Married but spouse is in an institution
(e.g., nursing home, gaol)..... | 2 |
| Married, but living with spouse
less than half the time owing to
work / other commitments | 3 |

SHOWCARD H9

- Very likely.....1**
- Likely2**
- Not sure3**
- Unlikely.....4**
- Very unlikely**5
- Prefer not to disclose.....8**

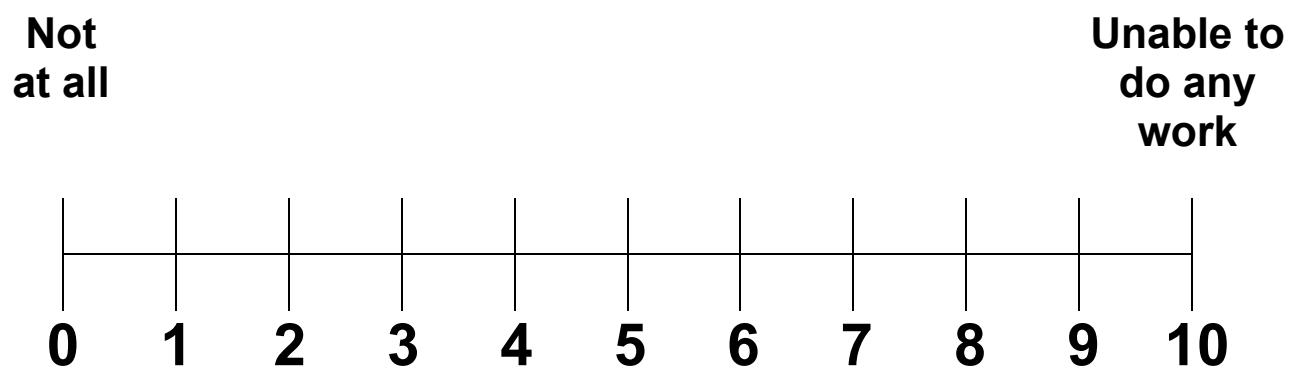
SHOWCARD K5

DISABILITIES / HEALTH CONDITIONS WHICH:

- Have lasted, or are likely to last, 6 months or more;
- Restrict everyday activity; and
- Cannot be corrected by medication or medical aids.

Sight problems not corrected by glasses or lenses	1
Hearing problems.....	2
Speech problems	3
Blackouts, fits or loss of consciousness	4
Difficulty learning or understanding things	5
Limited use of arms or fingers	6
Difficulty gripping things.....	7
Limited use of feet or legs	8
A nervous or emotional condition which requires treatment.....	9
Any condition that restricts physical activity or physical work (e.g., back problems, migraines).....	10
Any disfigurement or deformity	11
Any mental illness which requires help or supervision.....	12
Shortness of breath or difficulty breathing	13
Chronic or recurring pain.....	14
Long-term effects as a result of a head injury, stroke or other brain damage.....	15
A long-term condition or ailment which is still restrictive even though it is being treated or medication is being taken for it	16
Any other long-term condition such as arthritis, asthma, heart disease, Alzheimer's disease, dementia etc	17

SHOWCARD K8



SHOWCARD K9

Self-care

For example:

- Bathing / showering
- Dressing / undressing
- Eating / feeding
- Going to toilet
- Bladder / bowel control

Mobility

For example:

- Moving around away from home
- Moving around at home
- Getting in or out of a bed or chair

Communication in own language

For example:

- Understanding / being understood by strangers, friends or family, including use of sign language or lip reading

SHOWCARD K12

Mobility aids

Some examples of aids used to help with mobility:

- Canes
- Walking sticks
- Crutches
- Walking frames
- Wheelchair
- Scooter
- Specially modified car or car aids

Self-care aids

Any aids to help with self-care activities such as:

- bathing
- dressing and undressing
- toileting and managing incontinence

Non-electronic communication aids

such as picture boards or large print books to assist with communication

Electronic communication aids

such as hearing aids, audio tapes, a talking word processor or special computer software to assist with communication

SHOWCARD K13

Some examples of home improvements that might help with your disability / health condition

- Ramps
- Hand grab rails
- Toilet / bath / laundry modifications
- Kitchen modifications
(e.g., special handles to turn on taps)
- New / changed heating or air-conditioning
- Visual doorbell
- Visual telephone
- Visual smoke alarm
- Other home modifications
(e.g., doors widened)

SHOWCARD K15

***Types of difficulties with employment
(because of long-term health condition or disability)***

- Permanently unable to work**1
- Restricts the type of job you can do**2
- Restricts the number of hours that can be worked....**3
- Makes it more difficult to change jobs,
get a better job or find a suitable job**4
- Need additional time off work**5
- Need ongoing assistance or supervision at work**6
- Need an employer who will provide special
equipment, modify the work environment
or some other special arrangement**7
- Other employment difficulties**8

SHOWCARD K17

Types of difficulties with education (because of long-term health condition or disability)

- Need additional time off school / study.....1**
- Have to attend special classes / school.....2**
- Need ongoing assistance or supervision3**
- Restricted in the number of hours you can study.....4**
- Need special equipment, modified environment or other special arrangements5**
- General learning difficulties6**
- Other difficulties8**

SHOWCARD K19

Arthritis or osteoporosis	1
Asthma	2
Any type of cancer	3
Chronic bronchitis or emphysema	4
Type 1 diabetes (also known as juvenile-onset or insulin-dependent diabetes)	5
Type 2 diabetes (also known as late-onset or non-insulin dependent diabetes)	6
Depression or anxiety	7
Other mental illness	8
Heart disease	9
High blood pressure or hypertension	10
Any other serious circulatory condition (e.g., stroke, hardening of the arteries).....	11

SHOWCARD K25

1. Department of Veterans' Affairs Orange Treatment Entitlement Card



2. Department of Veterans' Affairs White Treatment Entitlement Card



3. Department of Veterans' Affairs Gold Treatment Entitlement Card



4. Health Care Card (often given to people receiving a government benefit or with low incomes)



5. Pensioner Concession Card



6. Commonwealth Seniors Health Card (typically issued to self-funded retirees)



SHOWCARD K30

- Less than one year ago**1
- One to less than two years ago.....**2
- Two to less than five years ago**3
- Five to less than 10 years ago**4
- Ten or more years ago**5

SHOWCARD K31

- Less than 6 months ago**1
- Six to less than 12 months ago**2
- One to less than 2 years ago**3
- Two to less than 5 years ago**4
- Five or more years ago**5
- Never been to the dentist**8

SHOWCARD K35

A hospital doctor (i.e., in outpatients or casualty)	1
A specialist doctor (excluding in outpatients or casualty of a hospital)	2
A mental health professional, such as a psychiatrist or psychologist	3
A podiatrist (foot doctor)	4
A chiropractor or osteopath	5
A physiotherapist	6
An optometrist	7
Any other allied health provider, such as a speech therapist, audiologist, or occupational therapist	8
An alternative health practitioner, such as a naturopath, acupuncturist or herbalist	9
A community nurse, practice nurse, nurse practitioner or midwife	10

SHOWCARD K36

FOR WOMEN ONLY

Pap smear	1
Breast screening	2
Screening for bowel cancer	4
Chest / other x-rays	5
Blood pressure	6
Cholesterol test	7
Any other blood test	8

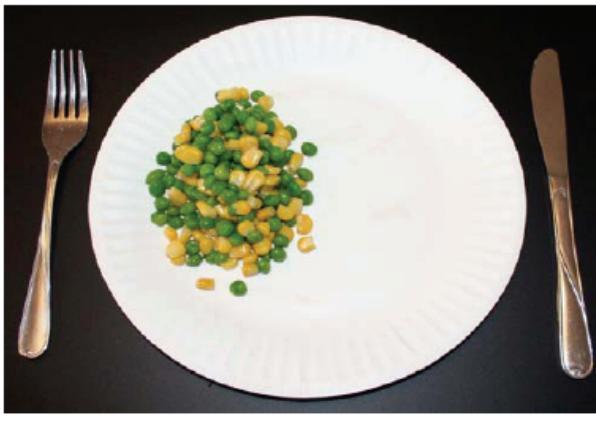
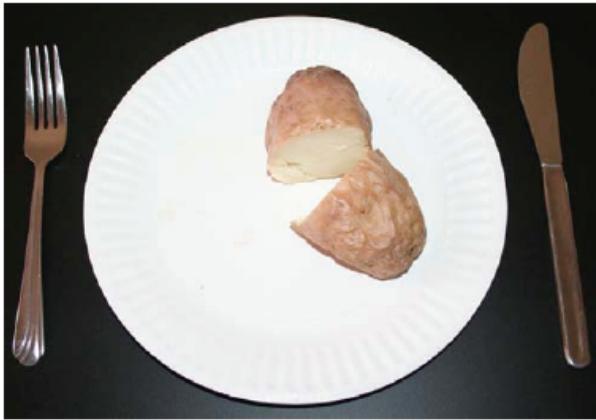
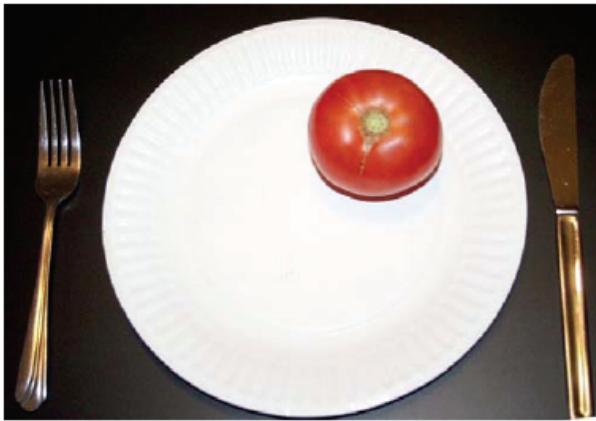
FOR MEN ONLY

Prostate check	3
Screening for bowel cancer	4
Chest / other x-rays	5
Blood pressure	6
Cholesterol test	7
Any other blood test	8

SHOWCARD K45

- Whole / full cream.....1**
- Low / reduced fat2**
- Skim3**
- Evaporated or sweetened condensed milk4**
- Soy milk.....5**
- Other (please specify)6**
- Do not drink milk7**

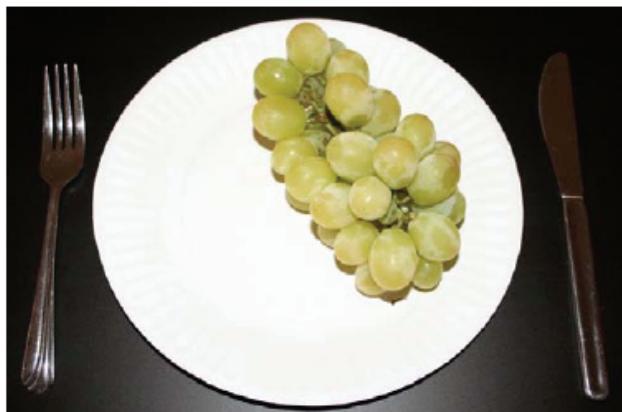
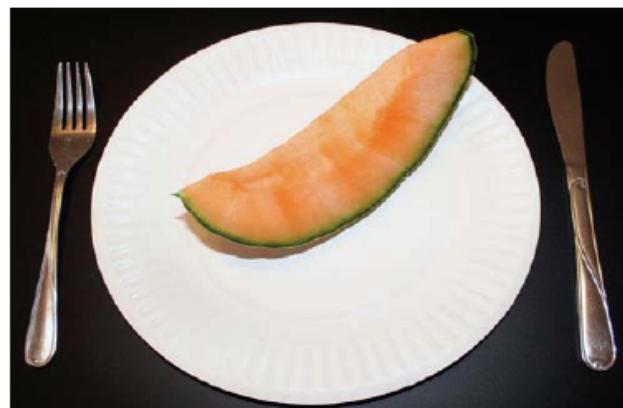
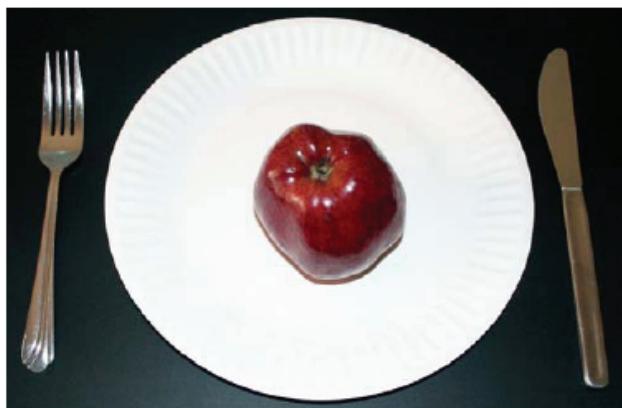
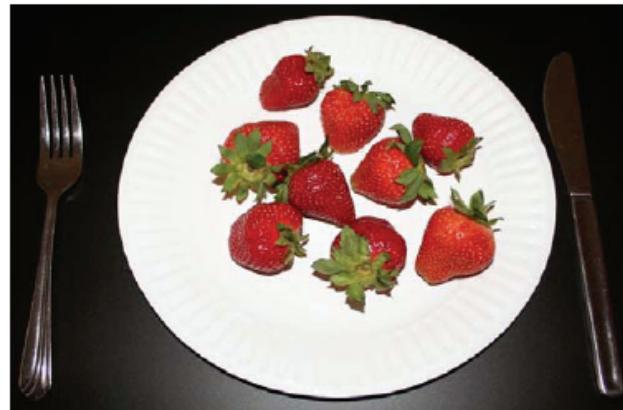
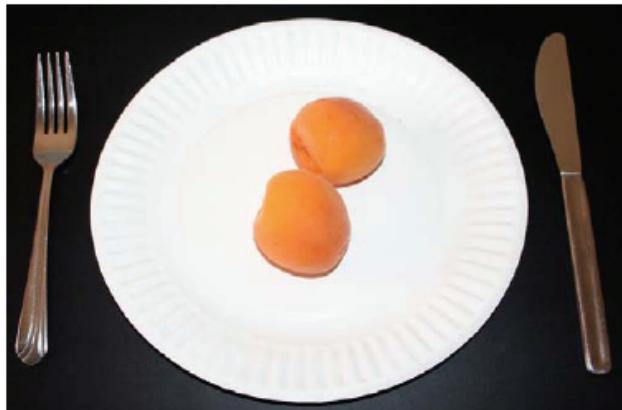
SHOWCARD K47



Photos on this card are examples only

If you eat twice as much broccoli as shown in the picture above each day, then your number of serves = 2

SHOWCARD K49



Photos on this card are examples only

If you eat twice as many grapes as shown in the picture above each day, then your number of serves = 2

SHOWCARD K55

Self-care

For example:

- Bathing / showering
- Dressing / undressing
- Eating / feeding
- Going to toilet
- Bladder / bowel control

Mobility

For example:

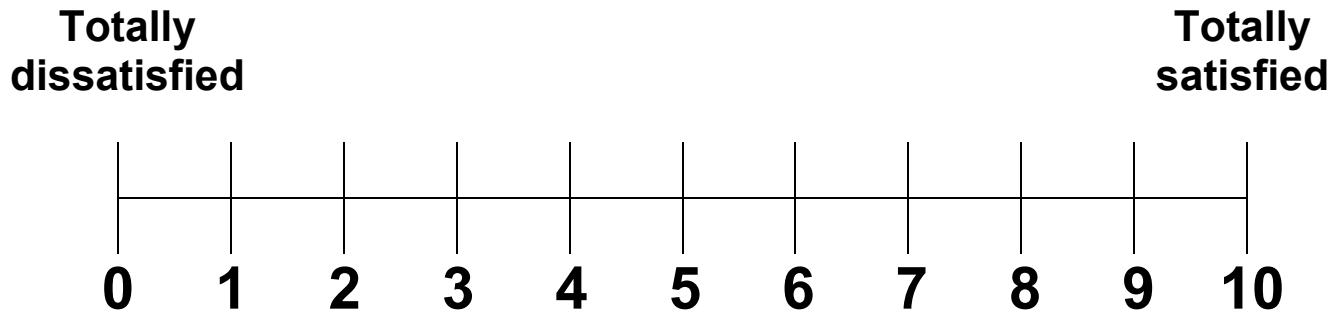
- Moving around away from home
- Moving around at home
- Getting in or out of a bed or chair

Communication in own language

For example:

- Understanding / being understood by strangers, friends or family, including use of sign language or lip reading

SHOWCARD K61



- a The home in which you live
- b Your employment opportunities
- c Your financial situation
- d How safe you feel
- e Feeling part of your local community
- f Your health
- g The neighbourhood in which you live
- h The amount of free time you have