



Section A: Sex

A1. Your sex:

Male

Female

Section B: Year of Birth

B1. Your year of birth:

Table 1. Summary of the main characteristics of the four groups of patients.

Section C: Nationality

C1. What is your nationality?

Section D: Civil Status

D1. What is your civil status?

Married, cohabiting

Married, permanently separated

Single

Divorced

Widowed

Section E: Family Changes

E1. Has your family status changed since 1999/12/31?

Married

Moved together with partner



Child was born

Child entered household

Daughter/son left household

Separated from partner/spouse

Divorced

Partner/ spouse passed away

Father passed away

Mother passed away

Child passed away

Another person in household passed away

Other family changes

Section F: Satisfaction

F1. How satisfied are you currently altogether with your life?

not satisfied at all 0

1

2

3

4

5

6

7

8

9

throughout satisfied 10

F2. How satisfied are you currently with the following areas?

ganz
und gar
unzufrie-
den 0 1 2 3 4 5 6 7 8 9
ganz
und gar
zufrieden

with your sleep?



ganz und gar unzufrie den 0	1	2	3	4	5	6	7	8	9	ganz und gar zufriede n 10
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(in case of employment) with your work?

with your household income?

with your personal income?

with your accomodation?

with your leisure time?

with your family life?

(in case of having children in pre-school
age) with the existing possibilities of
daycare?

with the democacy how it is persisting in
Germany?

Section G: Occupational Activity (exact)

G1. What kind of occupation do you carry out at the moment?



Section H: Income/ Wage (amount)

H1.

**Please specify the average monthly amount for the following income:
wage as employee:**

(incl. apprenticeship pay, partial retirement pay, employee leave benefits)

(gross amount before taxes and social insurance fees).

Section I: Income/ Selfemployment (amount)

I1.

Please specify the average monthly amount for the following income:

income from selfemployment/ freelance work

(gross amount before taxes and social insurance fees).

Section J: Interest in Politics

J1. In general: How strong is your interest in politics?

- Very strong

Strong

Not very strong

Not at all



Section K: Party

K1. Which party do you lean towards?

SPD	<input type="checkbox"/>
CDU	<input type="checkbox"/>
CSU	<input type="checkbox"/>
FDP	<input type="checkbox"/>
Bündnis 90 / Die Grünen	<input type="checkbox"/>
Die Linke	<input type="checkbox"/>
DVU / Republikaner / NPD	<input type="checkbox"/>
Others	<input type="checkbox"/>

Section L: Body height

L1. What is your body height in cm?

If unknown, please make a guess.

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Section M: Body weight

M1. What is your body weight in kg?

If unknown, please make a guess.

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