# **Living, working and COVID-19**

Explanatory notes to the dataset:

lwc\_r1\_r2\_r3\_public\_09112021

## Introduction

This dataset release includes a merged datafile, containing EU27 data from Round 1, Round 2 and Round 3 of Eurofound’s Living, Working and Covid-19 online survey. Fieldwork for Round 1 took place between 9 April 2020 and 11 June 2020; for Round 2 between 22 June 2020 and 27 July 2020; for Round 3 between 15 February and 30 March 2021.

These are cross-sectional datasets and the three rounds should be analysed separately. The survey had a panel element in which respondents were asked to leave their email address in case they agree to be recontacted in further rounds, this panel information will be available in a further dataset release. For more information on the methodology, please see the [Methodological Annex](https://www.eurofound.europa.eu/sites/default/files/wpef20023.pdf) to Round 3.

The variables are ordered according to variable name. Variable names are organised by general topic: variables starting with B are age, gender and country, C variables relate to quality of life and society (including vaccinations), D variables relate to work and support, E variables relate to the respondent’s financial situation, F variables include public services and classifications, and H variables relate to the respondent’s household.

Additionally, variables with the second digit “0” (so starting with B0, C0, D0, E0, F0 and H0) were first asked in Round 1. Variables with second digit “2” were first asked in Round 2, and those with second digit “3” were first asked in Round 3.

Trend variables that were included in multiple survey round are named according to the round it was first asked, e.g. country (asked in all rounds) can be found in B001, and employment status before the pandemic (first asked in Round 2) can be found in D235, while vaccination status, first asked in Round 3, can be found in C313.

The datasets have been cleaned to exclude partial interviews. Missing values, including “Don’t know/Prefer not to answer”, “Not applicable” options and not answered (skipped) questions have been coded as system missing in this release.

For analysis dataset users should use the weight provided (w\_gross\_trim). This weight can be used for within-country and cross-country analysis. Only EU27 data is included in this dataset release.

## System and auxiliary variables

Name: **CASE**

Label: **Case ID (sequential)**

Note: Case number (sequential according to time the questionnaire was first opened)

Availability: Round 1, 2 and 3

Name: **Wave**

Label: **Survey round**

Value labels:

**1** Round 1 Spring 2020

**2**Round 2 Summer 2020

**3**Round 3 Spring 2021

Note: In Eurofound’s [Living, Working and Covid-19 report](https://www.eurofound.europa.eu/publications/report/2020/living-working-and-covid-19) only cases up to and including 1 May were used from the Round 1 dataset, while this release includes all cases.

Availability: Round 1, 2 and 3

Name: **w\_gross\_trim**

Label: **Weight**

Note: Weight correcting for age crossed with gender (12 age/gender categories), education (2 categories: tertiary and below tertiary) and urbanisation level (2 categories: urban and rural), as well as country population aged 18 and over. For more information, please see the [Methodological Annex](https://www.eurofound.europa.eu/sites/default/files/wpef20023.pdf).

Availability: Round 1, 2 and 3

Name: **LANGUAGE**

Label: **Language of the interview**

Value labels:

**1** Bulgarian **2** Czech **3** Danish4 Dutch  
**5** English **6** Estonian **7** Finnish **8** French **9** German **10** Greek **11** Croatian **12** Hungarian **13** Italian **14** Latvian **15** Lithuanian **16** Polish **17** Portuguese **18** Romanian **19** Slovak **20** Slovenian **21** Spanish **22** Swedish

Note: Language of the questionnaire filled in by the respondent

Availability: Round 1, 2 and 3

Name: **STARTED**

Label: **Interview start time**

Note: Date and time respondent started the interview

Availability: Round 1, 2 and 3

Name: **LASTDATA**

Label: **Time when data was most recently updated**

Availability: Round 1, 2 and 3

Name: **TIME\_SUM**

Label: **Time spent with interview overall (except outliers)**

Availability: Round 1, 2 and 3

Name: **FINISHED**

Label: **Reached last page**

Value labels :

**0** No **1** Yes

Availability: Round 1, 2 and 3

Name: **LASTPAGE**

Label: **Last page respondent reached**

Availability: Round 1, 2 and 3

## B variables

Name: **B001**

Label: **Country**

*Question text: In which country do you live?*

Value labels:

**1** Austria  
**2** Belgium  
**3** Bulgaria  
**4** Croatia  
**5** Cyprus  
**6** Czechia  
**7** Denmark  
**8** Estonia  
**9** Finland  
**10** France  
**11** Germany  
**12** Greece  
**13** Hungary  
**14** Ireland  
**15** Italy  
**16** Latvia  
**17** Lithuania  
**18** Luxembourg  
**19** Malta  
**20** Netherlands  
**21** Poland  
**22** Portugal  
**23** Romania  
**24** Slovakia  
**25** Slovenia  
**26** Spain  
**27** Sweden

Note: This question was compulsory to answer. The respondent could select from 60 country options. Only EU27 countries are included in this release.

Availability: Round 1 and 2 and 3

Name: **B002**

Label: **Gender**

*Question text: How would you describe yourself?*

Value labels:

**1** Male  
**2** Female  
**3** In another way

Availability: Round 1, 2 and 3

Name: **B003\_01**

Label: **Age**

*Question text: How old are you?*

Note: This question was compulsory to answer. Those indicated they were under 18 could not continue the questionnaire. Respondents with answers up to and including 98 are included in this dataset.

Availability: Round 1, 2 and 3

Name: **C001\_01**

Label: **Life satisfaction**

*Question text: All things considered, how satisfied are you with your life these days? Please answer on a scale of 1 to 10, where 1 means very dissatisfied and 10 means very satisfied.*

Note: No value labels in the dataset, but in the questionnaire extremes were labelled as 1 “Very dissatisfied”, 10 “Very satisfied”.

Availability: Round 1, 2 and 3

Name: **C002\_01**

Label: **Happiness**

*Question text: Taking all things together on a scale of 1 to 10, how happy would you say you are?  
Here 1 means you are very unhappy and 10 means you are very happy.*

Note: No value labels in the dataset, but in the questionnaire extremes were labelled as 1 “Very unhappy”, 10 “Very happy”.

Availability: Round 1 and 2

Name: **C003\_01**

Label: **I am optimistic about my future**

*Question text: To what extent do you agree or disagree with the following statements?* *I am optimistic about my future*

Value labels:

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

Availability: Round 1, 2 and 3

Name: **C003\_02**

Label: **I am optimistic about my** **children's or grandchildren's future**

*Question text: To what extent do you agree or disagree with the following statements?*

*I am optimistic about my* *children's or grandchildren's future*

Value labels:

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

Note: This question was replaced by “I am optimistic about the future of my country” in Round 2 and in Round 3 (found separately in variable C203\_07).

Availability: Round 1

Name: **C003\_03**

Label: **Resilience 1:** **I find it difficult to deal with important problems that come up in my life**

*Question text: To what extent do you agree or disagree with the following statements?*

*I find it difficult to deal with important problems that come up in my life*

Value labels:

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

Availability: Round 1, 2 and 3

Name: **C003\_04**

Label: **Resilience 2:** **When things go wrong in my life, it generally takes me a long time to get back to normal**

*Question text: To what extent do you agree or disagree with the following statements?*

*When things go wrong in my life, it generally takes me a long time to get back to normal*

Value labels:

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

Availability: Round 1, 2 and 3

Name: **C004\_01**

Label: **General health**

*Question text: In general, how is your health?*

Value labels:

**1** Very good  
**2** Good  
**3** Fair  
**4** Bad  
**5** Very bad

Availability: Round 1, 2 and 3

Name: **C005\_01**

Label: **WHO-5: I have felt cheerful and in good spirits**

*Question text: Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks.*

*I have felt cheerful and in good spirits*

Value labels:

**1** At no time  
**2** Some of the time  
**3** Less than half of the time  
**4** More than half of the time  
**5** Most of the time  
**6** All of the time

Note: One of the items constituting the WHO-5 mental wellbeing index. The answer options were presented to the respondent in reverse order.

Availability: Round 1, 2 and 3

Name: **C005\_02**

Label: **WHO-5: I have felt calm and relaxed**

*Question text: Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks.*

*I have felt calm and relaxed*

Value labels:

**1** At no time  
**2** Some of the time  
**3** Less than half of the time  
**4** More than half of the time  
**5** Most of the time  
**6** All of the time

Note: One of the items constituting the WHO-5 mental wellbeing index. The answer options were presented to the respondent in reverse order.

Availability: Round 1, 2 and 3

Name: **C005\_03**

Label: **WHO-5: I have felt active and vigorous**

*Question text: Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks.*

*I have felt active and vigorous*

Value labels:

**1** At no time  
**2** Some of the time  
**3** Less than half of the time  
**4** More than half of the time  
**5** Most of the time  
**6** All of the time

Note: One of the items constituting the WHO-5 mental wellbeing index. The answer options were presented to the respondent in reverse order.

Availability: Round 1, 2 and 3

Name: **C005\_04**

Label: **WHO-5: I woke up feeling fresh and rested**

*Question text: Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks.*

*I woke up feeling fresh and rested*

Value labels:

**1** At no time  
**2** Some of the time  
**3** Less than half of the time  
**4** More than half of the time  
**5** Most of the time  
**6** All of the time

Note: One of the items constituting the WHO-5 mental wellbeing index. The answer options were presented to the respondent in reverse order.

Availability: Round 1, 2 and 3

Name: **C005\_05**

Label: **WHO-5: My daily life has been filled with things that interest me**

*Question text: Please indicate for each of the five statements which is closest to how you have been feeling over the last two weeks.*

*My daily life has been filled with things that interest me*

Value labels:

**1** At no time  
**2** Some of the time  
**3** Less than half of the time  
**4** More than half of the time  
**5** Most of the time  
**6** All of the time

Note: One of the items constituting the WHO-5 mental wellbeing index. The answer options were presented to the respondent in reverse order.

Availability: Round 1, 2 and 3

Name: **C006\_01**

Label: **I have felt particularly tense**

*Question text: Please indicate for each of the three statements which is closest to how you have been feeling over the last two weeks.*

*I have felt particularly tense*

Value labels:

**1** All of the time  
**2** Most of the time  
**3** More than half of the time  
**4** Less than half of the time  
**5** Some of the time  
**6** At no time

Availability: Round 1, 2 and 3

Name: **C006\_02**

Label: **I have felt lonely**

*Question text: Please indicate for each of the three statements which is closest to how you have been feeling over the last two weeks.*

*I have felt lonely*

Value labels:

**1** All of the time  
**2** Most of the time  
**3** More than half of the time  
**4** Less than half of the time  
**5** Some of the time  
**6** At no time

Availability: Round 1, 2 and 3

Name: **C006\_03**

Label: **I have felt downhearted and depressed**

*Question text: Please indicate for each of the three statements which is closest to how you have been feeling over the last two weeks.*

*I have felt downhearted and depressed*

Value labels:

**1** All of the time  
**2** Most of the time  
**3** More than half of the time  
**4** Less than half of the time  
**5** Some of the time  
**6** At no time

Availability: Round 1, 2 and 3

Name: **C007\_01**

Label: **Trust in the news media**

*Question text: Please answer on a scale of 1-10 how much you personally trust each of the following institutions.*

*The news media*

Note: No value labels in the dataset, but in the questionnaire extremes were labelled as 1 “Do not trust at all”, 10 “Trust completely”.

Availability: Round 1, 2 and 3

Name: **C007\_02**

Label: **Trust in the police**

*Question text: Please answer on a scale of 1-10 how much you personally trust each of the following institutions.*

*The police*

Note: No value labels in the dataset, but in the questionnaire extremes were labelled as 1 “Do not trust at all”, 10 “Trust completely”.

Availability: Round 1, 2 and 3

Name: **C007\_03**

Label: **Trust in your country’s government**

*Question text: Please answer on a scale of 1-10 how much you personally trust each of the following institutions.*

*Your country’s government*

Note: No value labels in the dataset, but in the questionnaire extremes were labelled as 1 “Do not trust at all”, 10 “Trust completely”.

Availability: Round 1, 2 and 3

Name: **C007\_04**

Label: **Trust in the European Union**

*Question text: Please answer on a scale of 1-10 how much you personally trust each of the following institutions.*

*The European Union*

Note: No value labels in the dataset, but in the questionnaire extremes were labelled as 1 “Do not trust at all”, 10 “Trust completely”.

Availability: Round 1, 2 and 3

Name: **C007\_05**

Label: **Trust in the healthcare system**

*Question text: Please answer on a scale of 1-10 how much you personally trust each of the following institutions.*

*The healthcare system*

Note: No value labels in the dataset, but in the questionnaire extremes were labelled as 1 “Do not trust at all”, 10 “Trust completely”.

Availability: Round 1, 2 and 3

Name: **C008**

Label: **Urbanisation level**

*Question text: Would you consider the area in which you live to be...?*

Value labels:

**1** The open countryside  
**2** A village/small town  
**3** A medium to large town  
**4** A city or city suburb

Note: This was one of the variables used in weighting, with 1 and 2 coded as rural and 3 and 4 coded as urban. Base population data was the 2016 European Quality of Life Survey.

Availability: Round 1, 2 and 3

Name: **C203\_05**

Label: **I feel left out of society**

*Question text: To what extent do you agree or disagree with the following statements?*

*I feel left out of society*

Value labels:

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

Availability: Round 2 and 3

Name: **C203\_06**

Label: **In general I feel very positive about myself**

*Question text: To what extent do you agree or disagree with the following statements?*

*In general I feel very positive about myself*

Value labels:

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

Availability: Round 2

Name: **C203\_07**

Label: **I am optimistic about the future of my country**

*Question text: To what extent do you agree or disagree with the following statements?*

*I am optimistic about the future of my country*

Value labels:

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

Availability: Round 2 and 3

Name: **C209\_01**

Label: **Satisfaction with democracy in country**

*Question text: On the whole, how satisfied are you with the way democracy works in your country? Please answer on a scale of 1 to 10, where 1 means very dissatisfied and 10 means very satisfied.*

Note: No value labels in the dataset, but in the questionnaire extremes were labelled as 1 “Very dissatisfied”, 10 “Very satisfied”.

Availability: Round 2 and 3

Name:  **C303\_08**

Label: **I feel I am free to decide how to live my life**

*Question text: To what extent do you agree or disagree with the following statements?*

*I feel I am free to decide how to live my life*

Value labels:

**1** Strongly agree

**2** Agree

**3** Neither agree nor disagree

**4** Disagree

**5** Strongly disagree

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Availability: Round 3

Name: **C307\_06**

Label: **Trust in social media**

*Question text:* *Please answer on a scale of 1-10 how much you personally trust each of the following institutions.*

*Social Media*

Value labels:

**1** 1 Do not trust at all  
**2** 2  
**3** 3  
**4** 4  
**5** 5  
**6** 6  
**7** 7  
**8** 8  
**9** 9  
**10** 10 Trust completely

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Availability: Round 3

Name: **C307\_07**

Label: **Trust in science**

*Question text:* *Please answer on a scale of 1-10 how much you personally trust each of the following institutions.*

*Science*

Value labels:

**1** 1 Do not trust at all  
**2** 2  
**3** 3  
**4** 4  
**5** 5  
**6** 6  
**7** 7  
**8** 8  
**9** 9  
**10** 10 Trust completely

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Availability: Round 3

Name: **C307\_08**

Label: **Trust in pharmaceutical firms**

*Question text:* *Please answer on a scale of 1-10 how much you personally trust each of the following institutions.*

*Pharmaceutical firms*

Value labels:

**1** 1 Do not trust at all  
**2** 2  
**3** 3  
**4** 4  
**5** 5  
**6** 6  
**7** 7  
**8** 8  
**9** 9  
**10** 10 Trust completely

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Availability: Round 3

Name:  **C310**

Label: **Chronic (long-standing) physical or mental health problem, illness or disability**

*Question text:* *Do you have any chronic (long-standing) physical or mental health problem, illness or disability? Chronic (long-standing) means illnesses or health problems which have lasted, or are expected to last, for 6 months or more.*

Value labels:

**1** Yes

**2** No

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Availability: Round 3

Name:  **C311**

Label: **Limitation in your daily activities by physical or mental health problem, illness or disability**

*Question text:* *Are you limited in your daily activities by this physical or mental health problem, illness or disability?*

Value labels:

**1** Yes, severely

**2** Yes, somewhat  
**3** No

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Note: Asked those who answered “Yes” to C310.

Availability: Round 3

Name:  **C312\_01**

Label: **Trust in people**

*Question text:* *Generally speaking, would you say that most people can be trusted, or that you can’t be too careful in dealing with people? Please tell me on a scale of 1 to 10, where 1 means that you can’t be too careful and 10 means that most people can be trusted.*

Value labels:

**1** 1 You can’t be too careful  
**2** 2  
**3** 3  
**4** 4  
**5** 5  
**6** 6  
**7** 7  
**8** 8  
**9** 9  
**10** 10 Most people can be trusted

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Availability: Round 3

Name:  **C313**

Label: **Received Covid-19 vaccine**

*Question text:* *Have you been vaccinated against Covid-19?*

Value labels:

**1** Yes, both doses

**2** Yes, one dose  
**3** No

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Availability: Round 3

Name:  **C314\_01**

Label: **Intention to take vaccine**

*Question text:* *How likely or unlikely is it that you will take the COVID-19 vaccine when it becomes available to you?*

Value labels:

**1** Very likely

**2** Rather likely  
**3** Neither likely nor unlikely

**4** Rather unlikely

**5** Very unlikely

**-1** Don't know/ Prefer not to answer

**-9** Not answered

Note: Asked those who answered “No” to C313

Availability: Round 3

Name:  **C315**

Label: **Reason for not taking vaccine: Residual option**

*Question text:* *Why is it unlikely that you will take the COVID-19 vaccine?*

*Please select all that apply.*

Note: Asked if answered “Rather unlikely” or “Very unlikely” to C314\_01.

Availability: Round 3

Name:  **C315\_01**

Label: **Reason for not taking vaccine: I am worried that it will make my health issues worse**

*Question text:* *Why is it unlikely that you will take the COVID-19 vaccine?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Note: Asked if answered “Rather unlikely” or “Very unlikely” to C314\_01.

Availability: Round 3

Name:  **C315\_02**

Label: **Reason for not taking vaccine: I do not trust the safety of the vaccine**

*Question text:* *Why is it unlikely that you will take the COVID-19 vaccine?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Note: Asked if answered “Rather unlikely” or “Very unlikely” to C314\_01.

Availability: Round 3

Name:  **C315\_03**

Label: **Reason for not taking vaccine: I think the risk of COVID-19 is exaggerated**

*Question text:* *Why is it unlikely that you will take the COVID-19 vaccine?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Note: Asked if answered “Rather unlikely” or “Very unlikely” to C314\_01.

Availability: Round 3

Name:  **C315\_04**

Label: **Reason for not taking vaccine: I think COVID-19 doesn't exist**

*Question text:* *Why is it unlikely that you will take the COVID-19 vaccine?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Note: Asked if answered “Rather unlikely” or “Very unlikely” to C314\_01.

Availability: Round 3

Name:  **C315\_05**

Label: **Reason for not taking vaccine: Other reason**

*Question text:* *Why is it unlikely that you will take the COVID-19 vaccine?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Note: Asked if answered “Rather unlikely” or “Very unlikely” to C314\_01.

Availability: Round 3

Name:  **C316\_01**

Label: **Tested positive for COVID-19**

*Question text:* *Since the outbreak of COVID-19 pandemic in early 2020, have you experienced any of the following?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name:  **C316\_02**

Label: **Someone close to you tested positive for COVID-19**

*Question text:* *Since the outbreak of COVID-19 pandemic in early 2020, have you experienced any of the following?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name:  **C316\_03**

Label: **Someone close to you died from COVID-19**

*Question text:* *Since the outbreak of COVID-19 pandemic in early 2020, have you experienced any of the following?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name:  **C316\_04**

Label: **Someone close to you died from another cause**

*Question text:* *Since the outbreak of COVID-19 pandemic in early 2020, have you experienced any of the following?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **C317**

Label: **Social media use**

*Question text:* *How often do you use social media (e.g. Facebook, Twitter, Instagram, etc.)?*

Value labels:

**1** Every day, for 3 hours or more

**2** Every day, for more than 1 hour but less than 3 hours

**3** Every day, for less than 1 hour  
**4** Every other day  
**5** Less often  
**6** Never

Availability: Round 3

Name: **C318**

**Label: Change in trust in science**

*Question text: Since the beginning of the pandemic, has your trust in science…*

Value labels:

**1** Decreased a lot  
**2** Decreased a little  
**3** Stayed the same  
**4** Increased a little  
**5** Increased a lot

Availability: Round 3

Name: **C319**

Label: **Main source of news**

*Question text:* *What is your main source of news?*

Value labels:

**1** Television programmes (web or broadcasted)  
**2** Press (web or printed)  
**3** Radio  
**4** Social media or blogs (e.g. Facebook, Twitter, Instagram, Youtube etc.)  
**5** Other information sources

Availability: Round 3

Name: **D001**

Label: **Employment status**

*Question text: Which of these categories best describes your situation?*

*Your current situation*

**1** Employee  
**2** Self-employed with employees  
**3** Self-employed without employees  
**4** Unemployed  
**5** Unable to work due to long-term illness or disability  
**6** Retired  
**7** Full-time homemaker/fulfilling domestic tasks  
**8** Student

Availability: Round 1, 2 and 3

Name: **D002**

Label: **Round 1: lost job during Covid-19 pandemic**

*Question text: During the covid-19 pandemic...*

*Have you lost your job(s)/contract(s) or work assignments?*

**1** Yes, permanently  
**2** Yes, temporarily  
**3** No

Note: This was modified in Round 2 to a question asked about the current employment status and employment status in the month before the Covid-19 pandemic (D235).

Availability: Round 1

Name: **D003**

Label: **Change in working hours during Covid-19 pandemic**

*Question text: During the covid-19 pandemic have you working hours…*

Value labels:

**1** Decreased a lot  
**2** Decreased a little  
**3** Stayed the same  
**4** Increased a little  
**5** Increased a lot

Note: Respondents were presented the answer categories in reverse order.

Availability: Round 1 and 2

Name: **D004\_01**

Label: **Kept worrying about work when you were not working**

*Question text Round 1: How often in the last 2 weeks have you...?*

*Question text Round 2: How often in the last month, have you…?*

*Kept worrying about work when you were not working*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Note: Round 1 asked about the previous two weeks and Round 2 about the previous month. In this dataset data from the two rounds are merged into the same variable.

Availability: Round 1, 2 and 3

Name: **D004\_02**

Label: **Felt too tired after work to do some of the household jobs which need to be done**

*Question text Round 1: How often in the last 2 weeks have you...?*

*Question text Round 2: How often in the last month, have you…?*

*Felt too tired after work to do some of the household jobs which need to be done*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Note: Round 1 asked about the previous two weeks and Round 2 about the previous month. In this dataset data from the two rounds are merged into the same variable.

Availability: Round 1, 2 and 3

Name: **D004\_03**

Label: **Found that your job prevented you from giving the time you wanted to your family**

*Question text Round 1: How often in the last 2 weeks have you...?*

*Question text Round 2: How often in the last month, have you…?*

*Found that your job prevented you from giving the time you wanted to your family*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Note: Round 1 asked about the previous two weeks and Round 2 about the previous month. In this dataset data from the two rounds are merged into the same variable.

Availability: Round 1, 2 and 3

Name: **D004\_04**

Label: **Found it difficult to concentrate on your job because of your family responsibilities**

*Question text Round 1: How often in the last 2 weeks have you...?*

*Question text Round 2: How often in the last month, have you…?*

*Found it difficult to concentrate on your job because of your family responsibilities*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Note: Round 1 asked about the previous two weeks and Round 2 about the previous month. In this dataset data from the two rounds are merged into the same variable.

Availability: Round 1, 2 and 3

Name: **D004\_05**

Label: **Found that your family responsibilities prevented you from giving the time you should to your job**

*Question text Round 1: How often in the last 2 weeks have you...?*

*Question text Round 2: How often in the last month, have you…?*

*Found that your family responsibilities prevented you from giving the time you should to your job*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Note: Round 1 asked about the previous two weeks and Round 2 about the previous month. In this dataset data from the two rounds are merged into the same variable.

Availability: Round 1, 2 and 3

Name: **D005\_01**

Label: **Worked in free time to meet work demands**

*Question text Round 1:* *Over the last 2 weeks, how often have you worked in your free time to meet work demands?*

*Question text Round 2 and 3:* *Over the last month, how often have you worked in your free time to meet work demands?*

Value labels:

**1** Every day  
**2** Every other day  
**3** Once or twice a week  
**4** Less often  
**5** Never

Note: Round 1 asked about the previous two weeks and Round 2 about the previous month. In this dataset data from the two rounds are merged into the same variable.

Availability: Round 1, 2 and 3

Name: **D006\_01**

Label: **Worked from home before Covid-19 pandemic**

*Question text:* *How frequently did you work from home before the outbreak of COVID-19?*

Value labels:

**1** Daily  
**2** Several times a week  
**3** Several times a month  
**4** Less often  
**5** Never

Availability: Round 1 and 2

Name: **D007\_01**

Label: **Round 1: Started working from home as a result of the Covid-19 situation**

*Question text: Have you started to work from home as a result of the COVID-19 situation?*

Value labels:

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

Note: This question was replaced by D210 and D211 in Round 2.

Availability: Round 1

Name: **D008\_01**

Label: **Job security**

*Question text: Using this scale, how likely or unlikely do you think it is that you might lose your job in the next 3 months?*

Value labels:

**1** Very likely  
**2** Rather likely  
**3** Neither likely nor unlikely  
**4** Rather unlikely  
**5** Very unlikely

Availability: Round 1, 2 and 3

Name: **D209**

Label: **Employment contract in main job**

*Question text: What kind of employment contract do you have in your main job?*

Value labels:

**1** Contract of unlimited duration  
**2** Contract of limited duration  
**3** A temporary employment agency contract  
**4** An apprenticeship or other training scheme  
**5** No contract

Availability: Round 2 and 3

Name: **D210\_01**

Label: **Location of work during pandemic: Home**

*Question text: During the COVID-19 pandemic, where did you work? Multiple answers possible*

*At home*

Value labels:

**0** No  
**1** Yes

Availability: Round 2 and 3

Name: **D210\_02**

Label: **Location of work during pandemic: Employer's premises**

*Question text: During the COVID-19 pandemic, where did you work? Multiple answers possible*

*At my employer’s premises*

Value labels:

**0** No  
**1** Yes

Availability: Round 2 and 3

Name: **D210\_03**

Label: **Location of work during pandemic: Places sent by employer/clients**

*Question text: During the COVID-19 pandemic, where did you work? Multiple answers possible*

*At locations I was sent to by my employer or requested to go to by clients*

Value labels:

**0** No  
**1** Yes

Availability: Round 2 and 3

Name: **D210\_04**

Label: **Location of work during pandemic: Other locations**

*Question text: During the COVID-19 pandemic, where did you work? Multiple answers possible*

*Other locations*

Value labels:

**0** No  
**1** Yes

Availability: Round 2 and 3

Name: **D211\_01**

Label: **Working hours per week past month**

*Question text: Last month, how many hours per week did you work on average?*

Availability: Round 2 and 3

Name: **D211\_02**

Label: **Hours worked from home past month**

*Question text: Out of these, how many hours did you work from home?*

Availability: Round 2 and 3

Name: **D212\_02**

Label: **Caring for children or grandchildren: hours per week**

*Question text: Last month, on average, how many hours per week were you involved in any of the following activities outside of paid work? If none or not applicable to you, please enter 0.*

*Caring for and/or educating your children, grandchildren*

Availability: Round 2 and 3

Name: **D212\_03**

Label: **Caring for elderly or disabled relatives: hours per week**

*Question text: Last month, on average, how many hours per week were you involved in any of the following activities outside of paid work? If none or not applicable to you, please enter 0.*

*Caring for elderly / disabled relatives*

Availability: Round 2 and 3

Name: **D212\_04**

Label: **Cooking and housework: hours per week**

*Question text: Last month, on average, how many hours per week were you involved in any of the following activities outside of paid work? If none or not applicable to you, please enter 0.*

*Cooking and housework*

Availability: Round 2 and 3

Name: **D212\_05**

Label: **Sport, culture or leisure: hours per week**

*Question text: Last month, on average, how many hours per week were you involved in any of the following activities outside of paid work? If none or not applicable to you, please enter 0.*

*Sporting, cultural or leisure activity*

Availability: Round 2 and 2

Name: **D212\_06**

Label: **Voluntary or charitable activity: hours per week**

*Question text: Last month, on average, how many hours per week were you involved in any of the following activities outside of paid work? If none or not applicable to you, please enter 0.*

*Voluntary or charitable activity*

Availability: Round 2 and 3

Name: **D212\_07**

Label: **Training or education: hours per week**

*Question text: Last month, on average, how many hours per week were you involved in any of the following activities outside of paid work? If none or not applicable to you, please enter 0.*

*Training or education*

Availability: Round 2 and 3

Name: **D213\_01**

Label: **You have the feeling you are doing useful work**

*Question text: For each of the following statements, please select the response which best describes your current work situation.*

*You have the feeling you are doing useful work*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D213\_01**

Label: **You have the feeling you are doing useful work**

*Question text: For each of the following statements, please select the response which best describes your current work situation.*

*You have the feeling you are doing useful work*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D213\_02**

Label: **You feel physically exhausted at the end of the working day**

*Question text: For each of the following statements, please select the response which best describes your current work situation.*

*You feel physically exhausted at the end of the working day*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D213\_03**

Label: **You feel emotionally drained by work**

*Question text: For each of the following statements, please select the response which best describes your current work situation.*

*You feel emotionally drained by work*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D213\_04**

Label: **You feel isolated when working**

*Question text: For each of the following statements, please select the response which best describes your current work situation.*

*You feel isolated when working*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D213\_05**

Label: **Your colleagues or peers help and support you**

*Question text: For each of the following statements, please select the response which best describes your current work situation.*

*Your colleagues or peers help and support you*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D213\_06**

Label: **Your manager helps and supports you**

*Question text: For each of the following statements, please select the response which best describes your current work situation.*

*Your manager helps and supports you*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D213\_07**

Label: **You have enough time to get the job done**

*Question text: For each of the following statements, please select the response which best describes your current work situation.*

*You have enough time to get the job done*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D214**

Label: **Change in amount of work done during Covid-19 pandemic**

*Question text: During the COVID-19 pandemic, the amount of work you managed to do…*

Value labels:

**1** Decreased a lot  
**2** Decreased a little  
**3** Stayed the same  
**4** Increased a little  
**5** Increased a lot

Note: Respondents were presented the answer categories in reverse order.

Availability: Round 2

Name: **D215\_01**

Label: **I am satisfied with the amount of work I managed to do**

*Question text: To what extent do you agree or disagree with the following statements about working from home during the COVID-19 pandemic?*

*I am satisfied with the amount of work I managed to do*

Value labels:

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

Availability: Round 2

Name:  **D215\_02**

Label: **I am satisfied with the quality of my work**

*Question text: To what extent do you agree or disagree with the following statements about working from home during the COVID-19 pandemic?*

*I am satisfied with the quality of my work*

Value labels:

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

Availability: Round 2

Name: **D215\_03**

Label: **With the equipment I have at home I could do my work properly**

*Question text: To what extent do you agree or disagree with the following statements about working from home during the COVID-19 pandemic?*

*With the equipment I have at home I could do my work properly*

Value labels:

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

Availability: Round 2

Name:  **D215\_04**

Label: **My employer provided all the equipment I need to work from home**

*Question text: To what extent do you agree or disagree with the following statements about working from home during the COVID-19 pandemic?*

*My employer provided all the equipment I need to work from home*

Value labels:

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

Availability: Round 2

Name: **D215\_05**

Label: **Overall, I am satisfied with my experience of working from home**

*Question text: To what extent do you agree or disagree with the following statements about working from home during the COVID-19 pandemic?*

*Overall, I am satisfied with my experience of working from home*

Value labels:

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

Availability: Round 2

Name: **D216\_01**

Label: **Work from home preferences when there are no restrictions**

*Question text: If you had the choice, how often would you like to work from home if there were no restrictions due to COVID-19?*

Value labels:

**1** Daily  
**2** Several times a week  
**3** Several times a month  
**4** Less often  
**5** Never

Availability: Round 2 and 3

Name: **D217**

Label: **At risk of Covid-19 because of job**

*Question text: Do you think you are currently at risk of contracting the COVID-19 virus because of your job?*

Value labels:

**0** No  
**1** Yes

Availability: Round 2

Name: **D218\_01**

Label: **Physical contact with people at work**

*Question text:* *In your work, are you currently in direct physical contact with people (colleagues, customers, passengers, pupils, patients, etc.)?*

Value labels:

**1** Always  
**2** Most of the time  
**3** Sometimes  
**4** Rarely  
**5** Never

Availability: Round 2

Name: **D219\_01**

Label: **Informed about Covid-19 prevention measures**

*Question text:* *Thinking about your job, how well informed are you about the measures needed to prevent the spread of COVID-19?*

Value labels:

**1** Very well informed  
**2** Well informed  
**3** Not very well informed  
**4** Not at all informed

Availability: Round 2

Name: **D220**

Label: **Required to wear PPE to prevent Covid-19**

*Question text:* *For your job, are you required to wear personal protective equipment to prevent the spread of COVID-19?*

Value labels:

**0** No  
**1** Yes

Availability: Round 2

Name: **D221**

Label: **Employer provides PPE**

*Question text:* *Does your employer provide personal protective equipment?*

Value labels:

**1** Yes, all the time  
**2** Yes, sometimes  
**3** No

Availability: Round 2

Name: **D222\_01**

Label: **Introduced new or significantly changed products or services during Covid-19 pandemic**

*Question text: During the COVID-19 pandemic, did you do one or several of the following?*

*Introduce any new or significantly changed products or services*

Value labels:

**0** No  
**1** Yes

Note: This question was asked of self-employed respondents.

Availability: Round 2

Name: **D222\_02**

Label: **Introduced new or significantly changed processes during Covid-19 pandemic**

*Question text: During the COVID-19 pandemic, did you do one or several of the following?*

*Introduced new or significantly changed processes during Covid-19 pandemic*

Value labels:

**0** No  
**1** Yes

Note: This question was asked of self-employed respondents.

Availability: Round 2

Name: **D222\_03**

Label: **Introduced new or significantly changed marketing methods during Covid-19 pandemic**

*Question text: During the COVID-19 pandemic, did you do one or several of the following?*

*Introduced new or significantly changed marketing methods during Covid-19 pandemic*

Value labels:

**0** No  
**1** Yes

Note: This question was asked of self-employed respondents.

Availability: Round 2

Name: **D222\_04**

Label: **Tried to find new customers, clients, patients, students etc. during Covid-19 pandemic**

*Question text: During the COVID-19 pandemic, did you do one or several of the following?*

*Tried to find new customers, clients, patients, students etc. during Covid-19 pandemic*

Value labels:

**0** No  
**1** Yes

Note: This question was asked of self-employed respondents.

Availability: Round 2

Name: **D223**

Label: **Change in income from self-employment in last month**

*Question text: If you compare your income from self-employment in the last month with your income in the same month last year, would you say it has…?*

Value labels:

**1** Decreased a lot  
**2** Decreased a little  
**3** Stayed the same  
**4** Increased a little  
**5** Increased a lot

Note: This question was asked of self-employed respondents. Respondents were presented the answer categories in reverse order.

Availability: Round 2

Name: **D224\_01**

Label: **I find it hard to bear the responsibility of running my business**

*Question text: To what extent do you agree or disagree with the following statement?*

*I find it hard to bear the responsibility of running my business*

Value labels:

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

Note: This question was asked of self-employed respondents.

Availability: Round 2

Name: **D225**

Label: **Change in staff during Covid-19 pandemic**

*Question text: During the COVID-19 pandemic, has the number of people who work for you…?*

Value labels:

**1** Decreased  
**2** Stayed the same  
**3** Increased

Note: This question was asked of respondents who were self-employed with employees.

Availability: Round 2

Name: **D226**

Label: **Change in staff in the next 3 months**

*Question text: In the next 3 months, do you expect the total number of people who work for you to…?*

Value labels:

**1** Decreased  
**2** Stayed the same  
**3** Increased

Note: This question was asked of respondents who were self-employed with employees.

Availability: Round 2

Name: **D227\_01**

Label: **Business security - likelihood to go bankrupt**

*Question text: How likely or unlikely is it that your business will go bankrupt in the next 3 months?*

Value labels:

**1** Very likely  
**2** Rather likely  
**3** Neither likely nor unlikely  
**4** Rather unlikely  
**5** Very unlikely

Note: This question was asked of self-employed respondents.

Availability: Round 2

Name: **D228\_01**

Label: **Received/requested deferral, reduction or cancellation of tax, bill, mortgage, loan or debt payments**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*Deferral, reduction or cancellation of tax, bill, mortgage, loan or debt payments*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Availability: Round 2 and 3

Name: **D228\_02**

Label: **Received/requested deferral, reduction or cancellation of payments for your business**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*For your business: deferral, reduction or cancellation of tax, bill, loan or debt payments*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Note: This question was asked of self-employed respondents.

Availability: Round 2 and 3

Name: **D229\_01**

Label: **Helpfulness of support measures related to expenses**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation? Please answer on a scale of 1 to 5 where 1 means “not at all helpful” and 5 means “extremely helpful”.*

Value labels:

**1** 1 Not at all helpful   
**2** 2  
**3** 3  
**4** 4  
**5** 5 Extremely helpful

Availability: Round 2 and 3

Name: **D230\_01**

Label: **Received/requested unemployment benefit**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*Unemployment benefit*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Availability: Round 2 and 3

Name: **D230\_02**

Label: **Received/requested wage support**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*Wage support (supplement or replacement while still in employment or short-time working schemes)*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Availability: Round 2 and 3

Name: **D230\_03**

Label: **Received/requested paid sick/care leave**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*Paid sick leave or paid care leave (for example, for those who had to self-isolate or take care of children or dependent adults)*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Availability: Round 2 and 3

Name: **D230\_04**

Label: **Received/requested state aid to businesses**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*State aid to businesses*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Note: This question was asked of self-employed respondents.

Availability: Round 2 and 3

Name: **D230\_05**

Label: **Received/requested other support**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*Other support from public services to help with living expenses or household needs (e.g. benefits, allowances, vouchers, food)*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Availability: Round 2 and 3

Name:  **D231\_01**

Label: **Helpfulness of support measures related to benefits**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation? Please answer on a scale of 1 to 5 where 1 means “not at all helpful” and 5 means “extremely helpful”.*

Value labels:

**1** 1 Not at all helpful   
**2** 2  
**3** 3  
**4** 4  
**5** 5 Extremely helpful

Availability: Round 2

Name: **D232\_01**

Label: **Received/requested support from NGOs**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*Any form of support from non-governmental organisations and charities*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Availability: Round 2 and 3

Name: **D232\_02**

Label: **Received/requested support from relatives/friends**

*Question text: Have you received or requested any of the following forms of support since the outbreak of COVID-19 pandemic?*

*Any form of support from relatives or friends*

Value labels:

**1** Have received  
**2** Have requested but not yet received  
**3** Have requested but the request was rejected  
**4** No / Not applicable to me

Availability: Round 2 and 3

Name:  **D233\_01**

Label: **Helpfulness of support from NGOs**

*Question text: Overall, how helpful were the support measures you identified for your current financial situation? Please answer on a scale of 1 to 5 where 1 means “not at all helpful” and 5 means “extremely helpful”.*

Value labels:

**1** 1 Not at all helpful   
**2** 2  
**3** 3  
**4** 4  
**5** 5 Extremely helpful

Availability: Round 2 and 3

Name:  **D233\_02**

Label: **Helpfulness of support from relatives/friends**

*Question text: Overall, how helpful were the support measures you identified for your current financial situation? Please answer on a scale of 1 to 5 where 1 means “not at all helpful” and 5 means “extremely helpful”.*

Value labels:

**1** 1 Not at all helpful   
**2** 2  
**3** 3  
**4** 4  
**5** 5 Extremely helpful

Availability: Round 2 and 3

Name: **D234\_01**

Label: **The rules for obtaining support are clear and transparent**

*Question text: To what extent do you agree or disagree with the following statements about support measures introduced during the COVID-19 pandemic?*

*The rules for obtaining support are clear and transparent*

Value labels:

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

Availability: Round 2 and 3

Name: **D234\_02**

Label: **Obtaining support from public services is easy and efficient**

*Question text: To what extent do you agree or disagree with the following statements about support measures introduced during the COVID-19 pandemic?*

*Obtaining support from public services is easy and efficient*

Value labels:

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

Availability: Round 2 and 3

Name: **D234\_03**

Label: **The support measures are fair**

*Question text: To what extent do you agree or disagree with the following statements about support measures introduced during the COVID-19 pandemic?*

*The support measures are fair*

Value labels:

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

Availability: Round 2 and 3

Name: **D234\_04**

Label: **The support measures reach those who need them most**

*Question text: To what extent do you agree or disagree with the following statements about support measures introduced during the COVID-19 pandemic?*

*The support measures reach those who need them most*

Value labels:

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

Availability: Round 2 and 3

Name: **D235**

Label: **Employment status before Covid-19**

*Question text: Which of these categories best describes your situation?*

*Your situation in the month before the COVID-19 outbreak*

Value labels:

**1** Employee  
**2** Self-employed with employees  
**3** Self-employed without employees  
**4** Unemployed  
**5** Unable to work due to long-term illness or disability  
**6** Retired  
**7** Full-time homemaker/fulfilling domestic tasks  
**8** Student

Availability: Round 2 and 3

Name: **D336**

Label: **Long-term unemployment**

*Question text:* *How long have you been unemployed?*

Value labels:

**1** Less than 12 months

**2** 12 months or more

Availability: Round 3

Name: **D337\_01**

Label: **Support duration: Deferral, reduction or cancellation of tax, bill, mortgage, loan or debt payments**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D337\_02**

Label: **Support duration: For your business: deferral, reduction or cancellation of tax, bill, loan or debt payments**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D337\_03**

Label: **Support duration: Unemployment benefit**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D337\_04**

Label: **Support duration: Wage support**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D337\_05**

Label: **Support duration: Paid sick leave or paid care leave**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D337\_06**

Label: **Support duration: State aid to businesses**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D337\_07**

Label: **Support duration: Other support from public services to help with living expenses or household needs**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D337\_08**

Label: **Support duration: Any form of support from non-governmental organisations and charities**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D337\_09**

Label: **Support duration: Any form of support from relatives or friends**

*Question text: Counting from the outbreak of COVID-19 pandemic until the end of 2020, for how many months did you receive each of the following forms of support?*

*Please count each month in which you received support, regardless of whether it lasted a full month or less, and add the total number of months together. Do not include 2021.*

Value labels:

**1** Less than 2 months

**2** 2- 5 months

**3** 12 months or more

Availability: Round 3

Name: **D338\_01**

Label: **Helpfulness: Deferral, reduction or cancellation of tax, bill, mortgage, loan or debt payments**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation?*

Value labels:

**1** Not at all helpful

**2** 2

**3** 3

**4** 4

**5** Extremely helpful

Availability: Round 3

Name: **D338\_02**

Label: **Helpfulness: For your business: deferral, reduction or cancellation of tax, bill, loan or debt payments**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation?*

Value labels:

**1** Not at all helpful

**2** 2

**3** 3

**4** 4

**5** Extremely helpful

Availability: Round 3

Name: **D338\_03**

Label: **Helpfulness: Unemployment benefit**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation?*

Value labels:

**1** Not at all helpful

**2** 2

**3** 3

**4** 4

**5** Extremely helpful

Availability: Round 3

Name: **D338\_04**

Label: **Helpfulness: Wage support**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation?*

Value labels:

**1** Not at all helpful

**2** 2

**3** 3

**4** 4

**5** Extremely helpful

Availability: Round 3

Name: **D338\_05**

Label: **Helpfulness: Paid sick leave or paid care leave**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation?*

Value labels:

**1** Not at all helpful

**2** 2

**3** 3

**4** 4

**5** Extremely helpful

Availability: Round 3

Name: **D338\_06**

Label: **Helpfulness: State aid to businesses**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation?*

Value labels:

**1** Not at all helpful

**2** 2

**3** 3

**4** 4

**5** Extremely helpful

Availability: Round 3

Name: **D338\_07**

Label: **Helpfulness: Other support from public services to help with living expenses or household needs**

*Question text: Overall, how helpful were the support measures you just identified for your current financial situation?*

Value labels:

**1** Not at all helpful

**2** 2

**3** 3

**4** 4

**5** Extremely helpful

Availability: Round 3

Name: **E001\_01**

Label: **Household's ability to make ends meet**

*Question text: A household may have different sources of income and more than one household member may contribute to it. Thinking of your household’s total monthly income: is your household able to make ends meet….?*

Value labels:

**1** With great difficulty  
**2** With difficulty  
**3** With some difficulty  
**4** Fairly easily  
**5** Easily  
**6** Very easily

Availability: Round 1, 2 and 3

Name: **E002\_01**

Label: **Gone without fresh fruit and vegetables**

*Question text: Thinking about food, over the last two weeks did you or someone else in your household change your diet because money was needed for other essentials?*

*Gone without fresh fruit and vegetables*

Value labels:

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

Availability: Round 1

Name: **E002\_02**

Label: **Bought cheaper cuts of meat or bought less than wanted**

*Question text: Thinking about food, over the last two weeks did you or someone else in your household change your diet because money was needed for other essentials?*

*Bought cheaper cuts of meat or bought less than wanted*

Value labels:

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

Availability: Round 1

Name: **E003\_01**

Label: **Arrears: rent or mortgage**

*Question text:* *Has your household been in arrears at any time during the past 3 months, that is, unable to pay as scheduled any of the following?*

*Rent or mortgage payments for accommodation*

Value labels:

**0** No  
**1** Yes

Note: Student loans was added to arrears in Round 2.

Availability: Round 1, 2 and 3

Name: **E003\_02**

Label: **Arrears: utility bills**

*Question text:* *Has your household been in arrears at any time during the past 3 months, that is, unable to pay as scheduled any of the following?*

*Utility bills, such as electricity, water, gas*

Value labels:

**0** No  
**1** Yes

Note: Student loans was added to arrears in Round 2.

Availability: Round 1, 2 and 3

Name: **E003\_03**

Label: **Arrears: consumer loans**

*Question text:* *Has your household been in arrears at any time during the past 3 months, that is, unable to pay as scheduled any of the following?*

*Payments related to consumer loans, including credit card overdrafts (to buy electrical appliances, a car, furniture, etc.)*

Value labels:

**0** No  
**1** Yes

Note: Student loans was added to arrears in Round 2.

Availability: Round 1, 2 and 3

Name: **E003\_04**

Label: **Arrears: phone or internet bills**

*Question text:* *Has your household been in arrears at any time during the past 3 months, that is, unable to pay as scheduled any of the following?*

*Telephone, mobile or internet connection bills*

Value labels:

**0** No  
**1** Yes

Note: Student loans was added to arrears in Round 2.

Availability: Round 1, 2 and 3

Name: **E003\_05**

Label: **Arrears: informal loans**

*Question text:* *Has your household been in arrears at any time during the past 3 months, that is, unable to pay as scheduled any of the following?*

*Payments related to informal loans from friends or relatives not living in your household*

Value labels:

**0** No  
**1** Yes

Note: Student loans was added to arrears in Round 2.

Availability: Round 1, 2 and 3

Name: **E003\_06**

Label: **Arrears: healthcare or health insurance**

*Question text:* *Has your household been in arrears at any time during the past 3 months, that is, unable to pay as scheduled any of the following?*

*Payments for healthcare or health insurance*

Value labels:

**0** No  
**1** Yes

Note: Student loans was added to arrears in Round 2.

Availability: Round 1, 2 and 3

Name: **E004**

Label: **Household's financial situation since 3 months ago**

*Question text: When you compare the financial situation of your household 3 months ago and now would you say it has become better, worse or remained the same?*

Value labels:

**1** Better  
**2** The same  
**3** Worse

Availability: Round 1, 2 and 3

Name: **E005**

Label: **Household's financial situation in 3 months' time**

*Question text: Thinking of the financial situation of your household in 3 months’ time do you think it will become better, worse or remain the same?*

Value labels:

**1** Better  
**2** The same  
**3** Worse

Availability: Round 1, 2 and 3

Name: **E006**

Label: **Household savings (time it would cover)**

*Question text: If your household would not receive any income, how long would your household be able to maintain the same standard of living using savings?*

Value labels:

**1** No savings  
**2** Less than 3 months  
**3** From 3 up to 6 months  
**4** From 6 up to 12 months  
**5** 12 or more months

Availability: Round 1, 2 and 3

Name: **E007\_01**

Label: **Accommodation security**

*Question text: How likely or unlikely do you think it is that you will need to leave your accommodation within the next 6 months because you can no longer afford it?*

Value labels:

**1** Very likely  
**2** Rather likely  
**3** Neither likely nor unlikely  
**4** Rather unlikely  
**5** Very unlikely

Availability: Round 1, 2 and 3

Name: **E008\_01**

Label: **Source of support: illness**

*Question text: From whom would you get support in each of the following situations? For each situation, choose the most important source of support.*

*If you needed help around the house when ill*

Value labels:

**1** A member of your family/relative  
**2** A friend, neighbour, or someone else, who does not belong to your family/ relatives  
**3** A service provider, institution or organisation  
**4** Nobody

Availability: Round 1

Name: **E008\_02**

Label: **Source of support: advice**

*Question text: From whom would you get support in each of the following situations? For each situation, choose the most important source of support.*

*If you needed advice about a serious personal or family matter*

Value labels:

**1** A member of your family/relative  
**2** A friend, neighbour, or someone else, who does not belong to your family/ relatives  
**3** A service provider, institution or organisation  
**4** Nobody

Availability: Round 1

Name: **E008\_03**

Label: **Source of support: job search**

*Question text: From whom would you get support in each of the following situations? For each situation, choose the most important source of support.*

*If you needed help when looking for a job*

Value labels:

**1** A member of your family/relative  
**2** A friend, neighbour, or someone else, who does not belong to your family/ relatives  
**3** A service provider, institution or organisation  
**4** Nobody

Availability: Round 1

Name: **E008\_04**

Label: **Source of support: feeling depressed**

*Question text: From whom would you get support in each of the following situations? For each situation, choose the most important source of support.*

*If you were feeling a bit depressed and wanting someone to talk to*

Value labels:

**1** A member of your family/relative  
**2** A friend, neighbour, or someone else, who does not belong to your family/ relatives  
**3** A service provider, institution or organisation  
**4** Nobody

Availability: Round 1

Name: **E008\_05**

Label: **Source of support: childcare**

*Question text: From whom would you get support in each of the following situations? For each situation, choose the most important source of support.*

*If you needed help in looking after your children*

Value labels:

**1** A member of your family/relative  
**2** A friend, neighbour, or someone else, who does not belong to your family/ relatives  
**3** A service provider, institution or organisation  
**4** Nobody

Availability: Round 1

Name: **E008\_06**

Label: **Source of support: help with shopping**

*Question text: From whom would you get support in each of the following situations? For each situation, choose the most important source of support.*

*If you needed help with shopping*

Value labels:

**1** A member of your family/relative  
**2** A friend, neighbour, or someone else, who does not belong to your family/ relatives  
**3** A service provider, institution or organisation  
**4** Nobody

Availability: Round 1

Name: **E203\_07**

Label: **Arrears: student loans**

*Question text:* *Has your household been in arrears at any time during the past 3 months, that is, unable to pay as scheduled any of the following?*

*Student loans*

Value labels:

**0** No  
**1** Yes

Note: Student loans was added to arrears in Round 2.

Availability: Round 2 and 3

Name: **E208**

Label: **Home ownership**

*Question text: Which of the following best describes your accommodation?*

Value labels:

**1** Owned without mortgage (i.e. without any loans)  
**2** Owned with mortgage  
**3** Rented, from social, municipal or non-profit housing provider  
**4** Rented, from private landlord or company  
**5** Other

Availability: Round 2 and 3

**Name: E309\_01**

Label: **Finances compared to others**

*Question text: In comparison to most people in your country, would you say the financial situation of your household is:*

Value labels:

**1** Much worse  
**2** Somewhat worse

**3** Neither worse nor better

**4** Somewhat better

**5** Much better

Availability: Round 3

Name: **F004**

Label: **Education level completed**

*Question text: What is the highest level of education you have successfully completed?*

Value labels:

**1** Primary  
**2** Secondary  
**3** Tertiary

Note: In Round 1 and Round 2 the question on education was asked in the above way, in Round 3 a full list of ISCED categories were asked (see F344). Education was one of the variables used in weighting, with 1 and 2 coded as below tertiary and 3 coded as tertiary. Base population data was ISCED categories by gender and age group from the 2018 Labour Force Survey.

Availability: Round 1, 2 and 3

Name: **F005**

Label: **Round 1: NUTS 2 AT**

*Question text: Please select your region from the list below*

Value labels:

**1** East Austria  
**2** South Austria  
**3** West Austria

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F006**

Label: **Round 1: NUTS 2 BE**

*Question text: Please select your region from the list below*

Value labels:

**1** Brussels Capital Region  
**2** Flemish Region  
**3** Walloon Region

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F007**

Label: **Round 1: NUTS 2 BG**

*Question text: Please select your region from the list below*

Value labels:

**1** Northern and Eastern Bulgaria  
**2** South-Western and South-Central Bulgaria

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F008**

Label: **Round 1: NUTS 2 DE**

*Question text: Please select your region from the list below*

Value labels:

**1** Baden-Württemberg  
**2** Bavaria  
**3** Berlin  
**4** Brandenburg  
**5** Bremen  
**6** Hamburg  
**7** Hessen  
**8** Mecklenburg-Vorpommern  
**9** Lower Saxony  
**10** North Rhine-Westphalia  
**11** Rhineland-Palatinate  
**12** Saarland  
**13** Saxony  
**14** Saxony-Anhalt  
**15** Schleswig-Holstein  
**16** Thuringia

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F009**

Label: **Round 1: NUTS 2 EL**

*Question text: Please select your region from the list below*

Value labels:

**1** Attica  
**2** Nisia Aigaiou, Kriti  
**3** Voreia Ellada  
**4** Kentriki Ellada

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F010**

Label: **Round 1: NUTS 2 ES**

*Question text: Please select your region from the list below*

Value labels:

**1** North West  
**2** North East  
**3** Community of Madrid  
**4** Centre  
**5** East  
**6** South  
**7** Canary Islands

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name:  **F011**

Label: **Round 1: NUTS 2 FI**

*Question text: Please select your region from the list below*

Value labels:

**1** Mainland Finland  
**2** Åland

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F012**

Label: **Round 1: NUTS 2 FR**

*Question text: Please select your region from the list below*

Value labels:

**1** Région parisienne  
**2** Bassin parisien  
**3** Nord  
**4** Est  
**5** Ouest  
**6** Sud-Ouest  
**7** Centre-Est (Auvergne-Rhône-Alpes)  
**8** Méditerranée  
**9** Départements d'Outre-Mer

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F013**

Label: **Round 1: NUTS 2 HU**

*Question text: Please select your region from the list below*

Value labels:

**1** Central Hungary  
**2** Transdanubia  
**3** Great Plain and North

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F014**

Label: **Round 1: NUTS 2 IT**

*Question text: Please select your region from the list below*

Value labels:

**1** North West  
**2** North East  
**3** Centre  
**4** South  
**5** Islands

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F015**

Label: **Round 1: NUTS 2 NL**

*Question text: Please select your region from the list below*

Value labels:

**1** North Netherlands  
**2** East Netherlands  
**3** West Netherlands  
**4** South Netherlands

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F016**

Label: **Round 1: NUTS 2 PL**

*Question text: Please select your region from the list below*

Value labels:

**1** Central Region  
**2** South Region  
**3** East Region  
**4** Northwest Region  
**5** Southwest Region  
**6** North Region

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F017**

Label: **Round 1: NUTS 2 PT**

*Question text: Please select your region from the list below*

Value labels:

**1** Mainland Portugal  
**2** Azores  
**3** Madeira

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F018**

Label: **Round 1: NUTS 2 RO**

*Question text: Please select your region from the list below*

Value labels:

**1** 1 – Nord-Vest, Centru  
**2** 2 – Nord-Est, Sud-Est  
**3** 3 – Sud-Muntenia, București-Ilfov  
**4** 4 – Sud-Vest Oltenia, Vest

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F019**

Label: **Round 1: NUTS 2 SE**

*Question text: Please select your region from the list below*

Value labels:

**1** East Sweden  
**2** South Sweden  
**3** North Sweden

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F020**

Label: **Round 1: NUTS 2 UK**

*Question text: Please select your region from the list below*

Value labels:

**1** North East  
**2** North West  
**3** Yorkshire and the Humber  
**4** East Midlands  
**5** West Midlands  
**6** East of England  
**7** Greater London  
**8** South East  
**9** South West  
**10** Wales  
**11** Scotland  
**12** Northern Ireland

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 1 (Round 2 and 3 variable: F225)

Name: **F225**

Label: **NUTS 2 region (Round 2)**

*Question text: Please select your region from the list below*

Value labels:

**1** Ostösterreich   
**2** Südösterreich   
**3** Westösterreich   
**4** Région de Bruxelles-Capitale/Brussels Hoofdstedelijk Gewest   
**5** Vlaams Gewest   
**6** Région Wallonne   
**7** Северна и Югоизточна България   
**8** Югозападна и Южна централна Бъ   
**9** Baden-Württemberg   
**10** Bayern   
**11** Berlin   
**12** Brandenburg   
**13** Bremen   
**14** Hamburg   
**15** Hessen   
**16** Mecklenburg-Vorpommern   
**17** Niedersachsen   
**18** Northrhein-Westfalen   
**19** Rheinland-Pfalz   
**20** Saarland   
**21** Sachsen   
**22** Sachsen-Anhalt   
**23** Schleswig-Holstein   
**24** Thüringen   
**25** Αττική   
**26** Νησιά Αιγαίου, Κρήτη   
**27** Βόρεια Ελλάδα   
**28** Κεντρική Ελλάδα   
**29** Noroeste   
**30** Noreste   
**31** Comunidad de Madrid   
**32** Centro (ES)   
**33** Este   
**34** Sur   
**35** Canarias   
**36** Manner-Suomi   
**37** Åland   
**38** Île-de-France   
**39** Centre-Val de Loire   
**40** Bourgogne-Franche-Comté   
**41** Normandie   
**42** Nord-Pas-de-Calais-Picardie   
**43** Alsace-Champagne-Ardenne-Lorr   
**44** Pays-de-la-Loire   
**45** Bretagne   
**46** Aquitaine-Limousin-Poitou-Cha   
**47** Languedoc-Roussillon-Midi-Pyr   
**48** Auvergne-Rhône-Alpes   
**49** Provence-Alpes-Côte d’Azur   
**50** Corse   
**51** RUP FR — Régions Ultrapériphéques   
**52** Közép-Magyarország   
**53** Dunántúl   
**54** Alföld és Észak   
**55** Nord-ovest   
**56** Sud   
**57** Isole   
**58** Nord-est   
**59** Centro (IT)   
**60** Noord-Nederland   
**61** Oost-Nederland   
**62** West-Nederland   
**63** Zuid-Nederland   
**64** Makroregion Poludniowy   
**65** Makroregion Północno-zachodni   
**66** Makroregion Poludniowo-Zachod   
**67** Makroregion Północny   
**68** Makroregion Centralny   
**69** Makroregion Wschodni   
**70** Makroregion Województwo Mazow   
**71** Continente   
**72** Região Autónoma dos Açores   
**73** Região Autónoma da Madeira   
**74** Macroregiunea Unu (Nord-Vest, Centru)   
**75** Macroregiunea Doi (Nord-Est, Sud-Est)   
**76** Macroregiunea Trei (Sud-Muntenia, București-Ilfov)   
**77** Macroregiunea Patru (Sud-Vest, Vest)   
**78** Östra Sverige   
**79** Södra Sverige   
**80** Norra Sverige   
**81** North East (England)   
**82** North West (England)   
**83** Yorkshire and the Humber   
**84** East Midlands (England)   
**85** West Midlands (England)   
**86** East of England   
**87** London   
**88** South East (England)   
**89** South West (England)   
**90** Wales   
**91** Scotland   
**92** Northern Ireland

Note: In Round 1 NUTS 2 regions were measured in different variables and region names were translated. In Rounds 2 and 3 they were in the same variable and appeared in the country’s official language only. In both rounds only those regions appeared to the respondent that were found in the country selected in the beginning of the survey.

Availability: Round 2 and 3 (Round 1 variables: F005-F020)

Name: **F226**

Label: **Respondent has children in school**

*Question text: Are you the parent or guardian of children living in your household who are in primary or secondary education?*

Value labels:

**0** No **1** Yes

Availability: Round 2

Name: **F227\_01**

Label: **Child received:** **Materials or instructions to self-study, online or for downloading**

*Question text: Since the pandemic began, have your children received any of the following as part of their online schooling programme?*

*Materials or instructions to self-study, online or for downloading*

Value labels:

**1** No **2** Yes, too little  
**3** Yes, about the right amount  
**4** Yes, too much

Availability: Round 2

Name: **F227\_02**

Label: **Child received: Online classes**

*Question text: Since the pandemic began, have your children received any of the following as part of their online schooling programme?*

*Online classes*

Value labels:

**1** No **2** Yes, too little  
**3** Yes, about the right amount  
**4** Yes, too much

Availability: Round 2

Name: **F227\_03**

Label: **Child received:** **Individual feedback from the teacher(s), written/sent online**

*Question text: Since the pandemic began, have your children received any of the following as part of their online schooling programme?*

*Individual feedback from the teacher(s), written/sent online*

Value labels:

**1** No **2** Yes, too little  
**3** Yes, about the right amount  
**4** Yes, too much

Availability: Round 2

Name: **F227\_04**

Label: **Child received: Individual feedback from the teacher(s), live**

*Question text: Since the pandemic began, have your children received any of the following as part of their online schooling programme?*

*Individual feedback from the teacher(s), live*

Value labels:

**1** No **2** Yes, too little  
**3** Yes, about the right amount  
**4** Yes, too much

Availability: Round 2

Name: **F228\_01**

Label: **I am satisfied with the quality of online schooling.**

*Question text: To what extent do you agree or disagree with the following statements about online schooling of your children in recent months?*

*I am satisfied with the quality of online schooling.*

Value labels:

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

Availability: Round 2 and 3

Name: **F228\_02**

Label: **I am informed or consulted about the education of my children.**

*Question text: To what extent do you agree or disagree with the following statements about online schooling of your children in recent months?*

*I am informed or consulted about the education of my children.*

Value labels:

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

Availability: Round 2 and 3

Name: **F228\_03**

Label: **Overall, online schooling has been a positive experience for my children.**

*Question text: To what extent do you agree or disagree with the following statements about online schooling of your children in recent months?*

*Overall, online schooling has been a positive experience for my children.*

Value labels:

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

Availability: Round 2 and 3

Name:  **F228\_04**

Label: **Overall, online schooling has been a positive experience for me as a parent/guardian.**

*Question text: To what extent do you agree or disagree with the following statements about online schooling of your children in recent months?*

*Overall, online schooling has been a positive experience for me as a parent/guardian.*

Value labels:

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

Availability: Round 2 and 3

Name: **F228\_05**

Label: **Our household has or has obtained sufficient equipment to carry out online schooling at home.**

*Question text: To what extent do you agree or disagree with the following statements about online schooling of your children in recent months?*

*Our household has or has obtained sufficient equipment to carry out online schooling at home.*

Value labels:

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

Availability: Round 2 and 3

Name:  **F228\_06**

Label: **I would like more online schooling in the future, even when the COVID-19 pandemic is over**

*Question text: To what extent do you agree or disagree with the following statements about online schooling of your children in recent months?*

*I would like more online schooling in the future, even when the COVID-19 pandemic is over*

Value labels:

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

Availability: Round 2 and 3

Name: **F229\_01**

Label: **Respondent as student received:** **Materials or instructions to self-study, online or for downloading**

*Question text: You mentioned you were a student. Since the pandemic began, have you received any of the following?*

*Materials or instructions to self-study, online or for downloading*

Value labels :

**1** No **2** Yes, too little  
**3** Yes, about the right amount  
**4** Yes, too much

Availability: Round 2

Name: **F229\_02**

Label: **Respondent as student received: Online lectures**

*Question text: You mentioned you were a student. Since the pandemic began, have you received any of the following?*

*Online lectures*

Value labels :

**1** No **2** Yes, too little  
**3** Yes, about the right amount  
**4** Yes, too much

Availability: Round 2

Name: **F229\_03**

Label: **Respondent as student received: Individual feedback from the teacher(s), written/sent online**

*Question text: You mentioned you were a student. Since the pandemic began, have you received any of the following?*

*Individual feedback from the teacher(s), written/sent online*

Value labels :

**1** No **2** Yes, too little  
**3** Yes, about the right amount  
**4** Yes, too much

Availability: Round 2

Name: **F229\_04**

Label: **Respondent as student received: Individual feedback from the teacher(s), live**

*Question text: You mentioned you were a student. Since the pandemic began, have you received any of the following?*

*Individual feedback from the teacher(s), live*

Value labels :

**1** No **2** Yes, too little  
**3** Yes, about the right amount  
**4** Yes, too much

Availability: Round 2

Name: **F230\_01**

Label: **I am satisfied with the quality of online education.**

*Question text: To what extent do you agree or disagree with the following statements about online education in recent months?*

*I am satisfied with the quality of online education.*

Value labels:

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

Availability: Round 2

Name: **F230\_02**

Label: **I am informed or consulted about online education.**

*Question text: To what extent do you agree or disagree with the following statements about online education in recent months?*

*I am informed or consulted about online education.*

Value labels:

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

Availability: Round 2

Name: **F230\_03**

Label: **Overall, online education has been a positive experience for me.**

*Question text: To what extent do you agree or disagree with the following statements about online education in recent months?*

*Overall, online education has been a positive experience for me.*

Value labels:

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

Availability: Round 2

Name: **F230\_04**

Label: **I had or have obtained sufficient equipment to carry out online education at home.**

*Question text: To what extent do you agree or disagree with the following statements about online education in recent months?*

*I had or have obtained sufficient equipment to carry out online education at home.*

Value labels:

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

Availability: Round 2

Name: **F230\_05**

Label: **I would like more online education in the future, even when the COVID-19 pandemic is over.**

*Question text: To what extent do you agree or disagree with the following statements about online education in recent months?*

*I would like more online education in the future, even when the COVID-19 pandemic is over.*

Value labels:

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

Availability: Round 2

Name: **F231\_01**

Label: **Prescriptions online or by telephone**

*Question text: Since the pandemic began, have you received any of the following services from a doctor?*

*Prescriptions online or by telephone*

Value labels :

**0** No **1** Yes

Availability: Round 2 and 3

Name: **F231\_02**

Label: **Medical consultation online or by telephone**

*Question text: Since the pandemic began, have you received any of the following services from a doctor?*

*Medical consultation online or by telephone*

Value labels :

**0** No **1** Yes

Availability: Round 2 and 3

Name:  **F231\_03**

Label: **Emergency healthcare (such as ambulance or emergency department)**

*Question text: Since the pandemic began, have you received any of the following services from a doctor?*

*Emergency healthcare (such as ambulance or emergency department)*

Value labels :

**0** No **1** Yes

Availability: Round 2 and 3

Name: **F231\_04**

Label: **Consultation at the GP, family doctor or health centre premises**

*Question text: Since the pandemic began, have you received any of the following services from a doctor?*

*Consultation at the GP, family doctor or health centre premises*

Value labels :

**0** No **1** Yes

Availability: Round 2 and 3

Name: **F231\_05**

Label: **Consultation at the hospital or a medical specialist premises**

*Question text: Since the pandemic began, have you received any of the following services from a doctor?*

*Consultation at the hospital or a medical specialist premises*

Value labels :

**0** No **1** Yes

Availability: Round 2 and 3

Name: **F232**

Label: **Unmet need for healthcare**

*Question text: Since the pandemic began, have you needed a medical examination or treatment that you have not received?*

Value labels :

**0** No **1** Yes

Note: In Round 3 see also “Current healthcare need” (F339)

Availability: Round 2 and 3

Name: **F233\_01**

Label: **Could not afford it (too expensive)**

*Question text: How important were the following reasons for not receiving the medical examination or treatment?*

*Could not afford it (too expensive)*

Value labels :

**1** 1 Not at all important  
**2** 2  
**3** 3  
**4** 4 **5** 5Very important

Availability: Round 2 and 3

Name: **F233\_02**

Label: **Waiting list**

*Question text: How important were the following reasons for not receiving the medical examination or treatment?*

*Waiting list*

Value labels :

**1** 1 Not at all important  
**2** 2  
**3** 3  
**4** 4 **5** 5Very important

Availability: Round 2 and 3

Name: **F233\_03**

Label: **Could not take time off work or could not take time off from caring for children or others**

*Question text: How important were the following reasons for not receiving the medical examination or treatment?*

*Could not take time off work or could not take time off from caring for children or others*

Value labels :

**1** 1 Not at all important  
**2** 2  
**3** 3  
**4** 4 **5** 5Very important

Availability: Round 2 and 3

Name:  **F233\_04**

Label: **Too far to travel or no means of transport**

*Question text: How important were the following reasons for not receiving the medical examination or treatment?*

*Too far to travel or no means of transport*

Value labels :

**1** 1 Not at all important  
**2** 2  
**3** 3  
**4** 4 **5** 5Very important

Availability: Round 2 and 3

Name: **F233\_05**

Label: **Appointment or treatment not available due to the pandemic**

*Question text: How important were the following reasons for not receiving the medical examination or treatment?*

*Appointment or treatment not available due to the pandemic*

Value labels :

**1** 1 Not at all important  
**2** 2  
**3** 3  
**4** 4 **5** 5Very important

Availability: Round 2 and 3

Name: **F233\_06**

Label: **I did not want to risk contracting the COVID-19 virus by seeking healthcare**

*Question text: How important were the following reasons for not receiving the medical examination or treatment?*

*I did not want to risk contracting the COVID-19 virus by seeking healthcare*

Value labels :

**1** 1 Not at all important  
**2** 2  
**3** 3  
**4** 4 **5** 5Very important

Availability: Round 2 and 3

Name: **F233\_07**

Label: **Other reason**

*Question text: How important were the following reasons for not receiving the medical examination or treatment?*

*Other reason*

Value labels :

**1** 1 Not at all important  
**2** 2  
**3** 3  
**4** 4 **5** 5Very important

Availability: Round 2 and 3

Name: **F234\_01\_1**

Label: **Online social benefits: Yes, before pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Social benefits or services (applications for unemployment, disability childcare benefits, fuel allowances etc.): Yes, before pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F234\_01\_2**

Label: **Online social benefits: Yes, since pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Social benefits or services (applications for unemployment, disability childcare benefits, fuel allowances etc.): Yes, since pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F234\_02\_1**

Label: **Online public employment services: Yes, before pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Public employment services for job search: Yes, before pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F234\_02\_2**

Label: **Online public employment services: Yes, since pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Public employment services for job search: Yes, since pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F234\_03\_1**

Label: **Online tax services: Yes, before pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Tax declarations, applications for tax refunds/tax credits: Yes, before pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F234\_03\_2**

Label: **Online tax services: Yes, since pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Tax declarations, applications for tax refunds/tax credits: Yes, since pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F234\_04\_1**

Label: **Online ID/registration services: Yes, before pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Obtaining or renewing personal identification documents (ID, passport, driving license), registering life events (birth, marriage, death): Yes, before pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F234\_04\_2**

Label: **Online ID/registration services: Yes, since pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Obtaining or renewing personal identification documents (ID, passport, driving license), registering life events (birth, marriage, death): Yes, since pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F234\_05\_1**

Label: **Online business registration services: Yes, before pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Creation, registration or development of business: Yes, before pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name:  **F234\_05\_2**

Label: **Online business registration services: Yes, since pandemic**

*Question text: Have you used any of the following public services online? Please select all that apply.*

*Creation, registration or development of business: Yes, since pandemic*

Value labels :

**0** Not selected  
**1** Selected

Availability: Round 2

Name: **F235\_01**

Label: **Difficulty receiving online social benefits**

*Question text: The last time you used these services online, how easy or difficult was it to receive them?*

*Social benefit applications (such as unemployment benefits, disability benefits, childcare allowances*

Value labels :

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

Availability: Round 2 and 3

Name: **F235\_02**

Label: **Difficulty receiving online public employment services**

*Question text: The last time you used these services online, how easy or difficult was it to receive them?*

*Public employment services for job search*

Value labels :

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

Availability: Round 2 and 3

Name: **F235\_03**

Label: **Difficulty receiving online tax services**

*Question text: The last time you used these services online, how easy or difficult was it to receive them?*

*Tax declarations, applications for tax refunds/tax credits*

Value labels :

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

Availability: Round 2 and 3

Name: **F235\_04**

Label: **Difficulty receiving online ID/registration services**

*Question text: The last time you used these services online, how easy or difficult was it to receive them?*

*Obtaining or renewing personal identification documents (ID, passport, driving license), registering life events (birth, marriage, death)*

Value labels :

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

Availability: Round 2 and 3

Name: **F235\_05**

Label: **Difficulty receiving online business registration services**

*Question text: The last time you used these services online, how easy or difficult was it to receive them?*

*Creation, registration or development of business*

Value labels :

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

Availability: Round 2 and 3

Name: **F236**

Label: **Sector of work**

*Question text: What is the main activity of the company or organisation where you work?*

Value labels :

**1** Agriculture **2** Industry  
**3** Construction **4** Commerce and hospitality  
**5** Transport **6** Financial services  
**7** Public administration **8** Education  
**9** Health  
**10** Other services

Availability: Round 2 and 3

Name: **F339**

Label: **Current healthcare need**

*Question text: Do you currently have a medical problem for which you cannot receive medical examination or treatment?*

Value labels:

**1** Yes

**2** No

Availability: Round 3

Name: **F340\_01**

Label: **Use of care services: Professional childcare services for pre-school children and after-school care (paid or unpaid)**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Yes

**2** No, I needed it but could not obtain it

**3** No, I did not need it

Note: Asked if respondent has children under 12 in the household

Availability: Round 3

Name: **F340\_02**

Label: **Use of care services: Informal childcare by people you pay for the service**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Yes

**2** No, I needed it but could not obtain it

**3** No, I did not need it

Note: Asked if respondent has children under 12 in the household

Availability: Round 3

Name: **F340\_03**

Label: **Use of care services: Unpaid care for children by family, friends or volunteers**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Yes

**2** No, I needed it but could not obtain it

**3** No, I did not need it

Note: Asked if respondent has children under 12 in the household

Availability: Round 3

Name: **F340\_04**

Label: **Use of care services: Tutoring (to help teaching your children)**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Yes

**2** No, I needed it but could not obtain it

**3** No, I did not need it

Note: Asked if respondent has children under 18 in the household

Availability: Round 3

Name: **F340\_05**

Label: **Use of care services: Professional care services or support with daily activities (paid or unpaid)**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Yes

**2** No, I needed it but could not obtain it

**3** No, I did not need it

Availability: Round 3

Name: **F340\_06**

Label: **Use of care services: Informal care by people you pay for care**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Yes

**2** No, I needed it but could not obtain it

**3** No, I did not need it

Availability: Round 3

Name: **F340\_07**

Label: **Use of care services: Unpaid care by family, friends or volunteers**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Yes

**2** No, I needed it but could not obtain it

**3** No, I did not need it

Availability: Round 3

Name: **F340\_08**

Label: **Use of care services: Household services (by people you pay for helping with domestic work, including cleaning)**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Yes

**2** No, I needed it but could not obtain it

**3** No, I did not need it

Availability: Round 3

Name: **F341\_01**

Label: **Quality care services: Professional childcare services for pre-school children and after-school care (paid or unpaid)**

*Question text: To what extent did the following services or support meet your or your household’s needs over the last 12 months?*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F341\_02**

Label: **Quality of care services: Informal childcare by people you pay for the service**

*Question text: To what extent did the following services or support meet your or your household’s needs over the last 12 months?*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F341\_03**

Label: **Quality of care services: Unpaid care for children by family, friends or volunteers**

*Question text: To what extent did the following services or support meet your or your household’s needs over the last 12 months?*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F341\_04**

Label: **Quality of care services: Tutoring (to help teaching your children)**

*Question text: To what extent did the following services or support meet your or your household’s needs over the last 12 months?*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F341\_05**

Label: **Quality of care services: Professional care services or support with daily activities (paid or unpaid)**

*Question text: To what extent did the following services or support meet your or your household’s needs over the last 12 months?*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F341\_06**

Label: **Quality of care services: Informal care by people you pay for care**

*Question text: To what extent did the following services or support meet your or your household’s needs over the last 12 months?*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F341\_07**

Label: **Quality of care services: Unpaid care by family, friends or volunteers**

*Question text: To what extent did the following services or support meet your or your household’s needs over the last 12 months?*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F341\_08**

Label: **Quality of care services: Household services (by people you pay for helping with domestic work, including cleaning)**

*Question text: To what extent did the following services or support meet your or your household’s needs over the last 12 months?*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F343\_01\_01**

Label: **Use administrative services: Yes, online - Social benefits or services**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_01\_02**

Label: **Use administrative services: Yes, in person - Social benefits or services**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_02\_01**

Label: **Use administrative services: Yes, online - Public employment services**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_02\_02**

Label: **Use administrative services: Yes, in person - Public employment services**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_03\_01**

Label: **Use administrative services: Yes, online - Tax declarations, applications for tax refunds/tax credits**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_03\_02**

Label: **Use administrative services: Yes, in person - Tax declarations, applications for tax refunds/tax credits**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_04\_01**

Label: **Use administrative services: Yes, online - Obtaining or renewing personal identification documents**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_04\_02**

Label: **Use administrative services: Yes, in person - Obtaining or renewing personal identification documents**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_05\_01**

Label: **Use administrative services: Yes, online - Creation, registration or development of business**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F343\_05\_02**

Label: **Use administrative services: Yes, in person - Creation, registration or development of business**

*Question text: Have you used any of the following public services in the last 12 months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F344**

Label: **Education (ISCED) – from Round 3**

*Question text: What is the highest level of education you completed?*

Value labels:

**1** Primary education or less

**2** Lower secondary

**3** Secondary

**4** Post-secondary non-tertiary

**5** Short-cycle tertiary

**6** University: Bachelor

**7** University: Master

**8** University: Doctoral (PhD)

Note: ISCED categories only asked from Round 3, in Rounds 1 and 2 only Primary/Secondary/Tertiary categories given. Education is one of the weighting variables.

Availability: Round 3

Name: **F346\_01**

Label: **Type of current healthcare need: Preventive screening or test**

*Question text: What is the type of medical examination or treatment that you need but cannot currently receive?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F346\_02**

Label: **Type of current healthcare need: Treatment for cancer (including a scheduled surgery)**

*Question text: What is the type of medical examination or treatment that you need but cannot currently receive?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F346\_03**

Label: **Type of current healthcare need: Other scheduled surgery**

*Question text: What is the type of medical examination or treatment that you need but cannot currently receive?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F346\_04**

Label: **Type of current healthcare need: Other examination or treatment by a hospital or specialist**

*Question text: What is the type of medical examination or treatment that you need but cannot currently receive?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F346\_05**

Label: **Type of current healthcare need: Other examination or treatment by a GP/family doctor or health centre**

*Question text: What is the type of medical examination or treatment that you need but cannot currently receive?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F346\_06**

Label: **Type of current healthcare need: Dental care**

*Question text: What is the type of medical examination or treatment that you need but cannot currently receive?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F346\_07**

Label: **Type of current healthcare need: Mental health care**

*Question text: What is the type of medical examination or treatment that you need but cannot currently receive?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F346\_07**

Label: **Type of current healthcare need: Other**

*Question text: What is the type of medical examination or treatment that you need but cannot currently receive?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F347\_01**

Label: **Reason not using online consultation: I did not need medical consultation**

*Question text: Regarding medical consultation online or by telephone, what was your main reason for not accessing it?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F347\_02**

Label: **Reason not using online consultation: These services were not available**

*Question text: Regarding medical consultation online or by telephone, what was your main reason for not accessing it?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F347\_03**

Label: **Reason not using online consultation: Could not afford paying for such consultation (too expensive)**

*Question text: Regarding medical consultation online or by telephone, what was your main reason for not accessing it?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F347\_04**

Label: **Reason not using online consultation: I did not have access to the necessary devices**

*Question text: Regarding medical consultation online or by telephone, what was your main reason for not accessing it?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F347\_05**

Label: **Reason not using online consultation: Too difficult to use**

*Question text: Regarding medical consultation online or by telephone, what was your main reason for not accessing it?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F347\_06**

Label: **Reason not using online consultation: My issue could only be addressed on-site or face-to-face**

*Question text: Regarding medical consultation online or by telephone, what was your main reason for not accessing it?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F347\_07**

Label: **Reason not using online consultation: I prefer having consultations face-to-face**

*Question text: Regarding medical consultation online or by telephone, what was your main reason for not accessing it?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F347\_08**

Label: **Reason not using online consultation: Other reason**

*Question text: Regarding medical consultation online or by telephone, what was your main reason for not accessing it?*

*Please select all that apply.*

Value labels:

**0** No

**1** Yes

Availability: Round 3

Name: **F348\_01**

Label: **Quality online medical consultation**

*Question text: You indicated that you received a medical consultation online or by telephone. To what extent over the last 12 months did it meet your needs?*

*Please answer on a scale of 1-5 where 1 means it did not meet your needs at all and 5 means it met your needs completely.*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F349\_01**

Label: **Quality of public employment services**

*Question text: To what extent did public employment services meet your needs over the last 12 months?*

*Please answer on a scale of 1-5 where 1 means they did not meet your needs at all and 5 means they met your needs completely.*

Value labels:

**1** Did not meet my needs at all

**2** 2

**3** 3

**4** 4

**5** Met my needs completely

Availability: Round 3

Name: **F350**

Label: **Use online schooling**

*Question text: Did your children participate in online schooling in the last three months?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

**Name: H001**

**Label:** Household size

*Question text: Including yourself, how many people usually live in your household?*

Value Labels:

**1** 1  
**2** 2  
**3** 3  
**4** 4 **5** 5  
**6** 6  
**7** 7  
**8** 8  
**9** 9  
**10** 10 or more

Availability: Round 1, 2 and 3

Name: **H002**

Label: **Spouse or partner in household**

*Question text: Do you have a spouse/partner that lives in your household?*

Value labels:

**0** No

**1** Yes

Availability: Round 1, 2 and 3

Name: **H005**

Label: **Number of children aged 0-11 in household**

*Question text: How many children or young people live in your household?*

*If none, please enter 0.*

Value labels:

**0** 0

**1** 1  
**2** 2  
**3** 3  
**4** 4  
**5** 5

**6** 6

**7** 7

**8** 8

**9** 9

**10** 10 or more

Availability: Round 1, 2 and 3

Name: **H006**

Label: **Number of children aged 12-17 in household**

*Question text: How many children or young people live in your household?*

*If none, please enter 0.*

Value labels:

**0** 0

**1** 1  
**2** 2  
**3** 3  
**4** 4  
**5** 5

**6** 6

**7** 7

**8** 8

**9** 9

**10** 10 or more

Availability: Round 1, 2 and 3

Name: **H203**

Label: **Respondent's parents or grandparents in household (from Round 2)**

*Question text: Do you have a parent or grandparent that lives in your household?*

Value labels:

**0** No

**1** Yes

Availability: Round 2 and 3

Name: **H204**

Label: **Children or young people in household (from Round 2)**

*Question Are there any children or young people aged less than 25 in your household?*

Value labels:

**0** No

**1** Yes

Availability: Round 2 and 3

Name: **H207**

Label: **Number of young adults aged 18-24 in household (from Round 2)**

*Question text: How many children or young people live in your household?*

*If none, please enter 0.*

Value labels:

**0** 0

**1** 1  
**2** 2  
**3** 3  
**4** 4  
**5** 5

**6** 6

**7** 7

**8** 8

**9** 9

**10** 10 or more

Availability: Round 2 and 3

Name: **H308**

Label: **Own children in household**

*Question Are you the parent or stepparent of any of the children in your household?*

Value labels:

**0** No

**1** Yes

Availability: Round 3

## Computed variables

Name: **who5**

Label: **WHO-5 mental wellbeing index**

Note: Measured on a scale of 0-100, calculated from C005 variables.

Availability: Round 1, 2 and 3