

Subsequent number of questionnaire in voivodship I _ I _ I _ I

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SOCIAL DIAGNOSIS 2003

*an independent research project
realized by the Council for Social Monitoring*

PART I

A. HOUSEHOLD CHARACTERISTICS

1. Voivodship..... Territorial symbol voiv. distr. com.
 | | - | | - | |

2. Address (street, building no., apartment no., zip code,

town/city).....
.....

3. Symbol of the class of place of residence

4. Household ID number | | | | - | 2 | - | 0 | 1 |

5. Symbol of the household source of income

B. INFORMATION REGARDING THE INTERVIEW CONDUCTED

1. Course of visits in the household dwelling

Subsequent visit number	Date of visit day/month	Hour of beginning of visit	Duration of visit in minutes	Remarks
1				
2				
3				

C. HOUSEHOLD COMPOSITION

Household ID number

				-	2	-	0	1	
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1	Person reference number	1	2	3	4	5	6	7	8
2	First name of the household member								
3	Relationship to household head								
4	Relationship to family head								
5	Family number								
6	Date of birth	day							
7		month							
8		year (two last digits)							
9	Gender (1 – man, 2 – woman)								
10	Marital status								
11	Education level completed								
12	Number of years of studying								
13	Specialization of completed education								
14	Education status (4,5,9 ⇒ row 16)								
15	Type of education services								
16	Does he/she have a mobile phone (1- YES, 2- NO)								
17	Source of income	main							
18		additional	1						
19			2						
20			3						
21	Disability								
22	Status of presence of the person in the household								
23	Reasons for temporary absence								
24	Movement of persons in household	date of arrival (month, year)							
25		date of leave (month, year)							
26		reason for arrival							
27		reason for leave							
28	Status of being subject to individual interview								
29	Result of the individual interview								

D. ECONOMIC ACTIVITY OF HOUSEHOLD MEMBERS AGED 15 AND OVERdefinition of economic activity according to BAEL (Labor Force Survey); **person reference number same as in****PART I/C)**

1	Person reference number (same as in part C)						
2	Status of presence in household (as in C row 22)						
3	Has this person performed any work, earning income, or helped without pay in any family business activity, within the last 7 days? 1 – YES (go to 5), 2- NO						
4	Has this person had a job as an employee, a self-employed person or helping without pay in any family business activity, within the last 7 days, but was temporarily not involved in this work during this period? 1 – YES (go to 6), 2 – NO (go to 7)						
5	For how many hours did this person work during the last 7 days?						
6	Was it full-time employment? 1 – YES (go to 10), 2 – NO (go to 10)						
7	Has this person been looking for a job for the last 4 weeks? 1 – YES (go to 9), 2 – NO (go to 10), 3 – NO						
8	Why is he/she not looking for a job?						
9	Is he/she able to start working this week or next week? 1 – YES, 2 - NO						
10	Is this person registered in the Labor Office?						
11	How long has this person been unemployed? (<i>fill out for persons, who have symbol 1 or 2 in row 7 and for persons, who have symbol 3 in row 7 and symbol 1 in row 10</i>) (in months)						
12	Has this person been registered in the Labor Office within the last 5 years? 1 – YES, 2 – NO (<i>go to 15 or, if professionally inactive, to 18</i>)						
13	How many times has this person been registered in the Labor Office in the last 5 years?						
14	For how long, in total, was this person unemployed during the last 5 years (in months)?						
15	Ownership of institution, which is the main employer of this person						
16	Ownership of institution, which is the additional employer of this person						
17	Presently performed occupation						
18	Occupation performed in the most recent place of employment (<i>for the unemployed and the professionally inactive persons</i>)						
19	If this person is unemployed, does he/she receive unemployment benefit 1- YES, 2 – NO, 3 – NOT APPLICABLE (he/she is not unemployed)						
20	If this person is unemployed, does he/she participate in any trainings for the unemployed (1 – YES, 2 – NO, 3 – NOT APPLICABLE)						

PART I (continued)

Household ID number - 2 - 0 1 Reference number of person interviewed in the name of household from part C **E. NUTRITION**

I would like to ask about the ability to satisfy the food needs by your household.

1. Is your household able to afford sufficient quantities of the following food articles?

Answers are to be provided separately for each of the food articles listed below, circling the appropriate word.

1.1. vegetables and vegetable preserves	1. YES	2. NO
1.2. fruit and fruit preserves	1. YES	2. NO
1.3. meat (including poultry)	1. YES	2. NO
1.4. meat and poultry preserves	1. YES	2. NO
1.5. fish and fish preserves	1. YES	2. NO
1.6. butter and other edible fats	1. YES	2. NO
1.7. milk	1. YES	2. NO
1.8. milk products	1. YES	2. NO
1.9. sugar	1. YES	2. NO
1.10. confectionery (sweets, chocolate etc.)	1. YES	2. NO
1.11. tobacco and alcohol products	1. YES	2. NO

2. Has your household used during the last year any products obtained from ?

Answers are to be provided separately for each of the forms of use of food articles, listed below, circling the appropriate word.

2.1. from own plot of land (raising, own household)	1. YES	2. NO
2.2. from relatives	1. YES	2. NO
2.3. free of charge from other persons or institutions	1. YES	2. NO

3. In comparison with 3 years ago, has the level of fulfillment of food needs of your household:

Choose one answer by circling the appropriate answer.

1. worsened
2. improved
3. remained unchanged

F. AFFLUENCE OF HOUSEHOLD

Now I would like to ask whether you possess some goods and savings and whether you take advantage of credits and loans.

1. Does your household have any savings? 1. YES 2. NO

If the household has savings, go to question 2, if not – go to question 5.

2. What is the form of your household savings?

Provide separate answers for each form of savings, circling the appropriate word.

2.1. bank deposits in PLN	1. YES	2. NO
2.2. bank deposits in foreign currencies	1. YES	2. NO
2.3. in bonds	1. YES	2. NO
2.4. in investment funds	1. YES	2. NO
2.5. in pension funds	1. YES	2. NO
2.6. in securities quoted on the stock exchange	1. YES	2. NO
2.7. shares and stocks in private joint-stock companies	1. YES	2. NO
2.8. investment in real estate property	1. YES	2. NO
2.9. investment in goods other than real estate	1. YES	2. NO
2.10. in cash	1. YES	2. NO
2.11. in other form	1. YES	2. NO

3. What is the approximate value of savings of the household?

Choose one answer by circling the appropriate number.

1. up to the equivalent of monthly income of the household
2. more than monthly income – up to the equivalent of household income for 3 months
3. more than 3 months – up to the equivalent of household income for 6 months
4. more than 6 months – up to the equivalent of household income for 1 year
5. more than the equivalent of annual income of the household
6. it is difficult to say

4. What is the purpose of your household savings?

Provide separate answers for each purpose of savings, circling the appropriate word.

4.1. a reserve for current consumer needs (such as food, clothes, shoes)	1. YES	2. NO
4.2. regular charges (such as rent)	1. YES	2. NO
4.3. purchase of durable goods	1. YES	2. NO
4.4. purchase of a house, apartment, payment made to housing association	1. YES	2. NO
4.5. renovation of house/ apartment	1. YES	2. NO
4.6. medical treatment	1. YES	2. NO
4.7. recreation	1. YES	2. NO
4.8. a reserve for random events	1. YES	2. NO
4.9. securing of the future of children	1. YES	2. NO
4.10. security for old age	1. YES	2. NO
4.11. for other purposes	1. YES	2. NO
4.12. no special purpose	1. YES	2. NO

5. Is your household currently taking advantage of loans or credits? 1. YES 2. NO

If the household is currently taking advantage of loans or credits, go to question 6, if not, go to question 9.

6. What is the total amount of debt of your household?

Choose one answer by circling the appropriate number.

1. up to the equivalent of monthly income of the household
2. more than monthly income – up to the equivalent of household income for 3 months
3. more than 3 months – up to the equivalent of household income for 6 months
4. more than 6 months – up to the equivalent of household income for 1 year
5. more than the equivalent of annual income of the household
6. it is difficult to say

7. Where did your household incur loans and credits?

Provide an answer for each of the sources of loans and credits, listed below, by circling the appropriate word.

7.1. in banks	1. YES	2. NO
7.2. in other institutions	1. YES	2. NO
7.3. from private persons	1. YES	2. NO

8. What are the purposes of loans and credits incurred by your household?

Provide an answer for each of the purposes of credits and loans incurred, listed below, by circling the appropriate word.

8.1. for current consumer expenses (such as food, clothes, shoes)	1. YES	2. NO
8.2. regular charges (e.g. rent)	1. YES	2. NO
8.3. purchase of durable goods	1. YES	2. NO
8.4. purchase of apartment, house, payment made to housing association	1. YES	2. NO
8.5. renovation of house/ apartment	1. YES	2. NO
8.6. medical treatment	1. YES	2. NO
8.7. purchase, lease of work tools (machines, rental charges etc.)	1. YES	2. NO
8.8. recreation	1. YES	2. NO
8.9. purchase of securities	1. YES	2. NO
8.10. payment of debts incurred earlier	1. YES	2. NO
8.11. development of own business activity	1. YES	2. NO
8.12. education	1. YES	2. NO
8.13. other purposes	1. YES	2. NO

9. Does your household or any of its members **have** the goods, listed below? It does not matter, whether the goods are owned, taken on lease or made available in any other way (the answer is provided in the column *Does the household have?*). **If the household does not have** a given type of goods, please indicate (The answer is provided in the column *If the household does not, then*), whether the household would like to have these goods but cannot afford them due to financial reasons (answer YES), or the household does not have these goods due to other than financial reasons, for instance, does not want to or does not need these goods (answer NO). In the column *How many*, enter the number only for three items (TV set, computer, car).

Provide an answer for each of the types of goods listed below by circling the appropriate word.

	Does the household have a		How many	If the household does not have the item, is it due to financial reasons?	
	1. YES	2. NO		1. YES	2. NO
9.1. garage	1. YES	2. NO		1. YES	2. NO
9.2. washing machine (automatic)	1. YES	2. NO		1. YES	2. NO
9.3. non-automatic washing machine	1. YES	2. NO		1. YES	2. NO
9.4. refrigerator (refrigerator - freezer)	1. YES	2. NO		1. YES	2. NO
9.5. freezer	1. YES	2. NO		1. YES	2. NO
9.6. dishwasher	1. YES	2. NO		1. YES	2. NO
9.7. microwave oven	1. YES	2. NO		1. YES	2. NO
9.8. TV set	1. YES	2. NO		1. YES	2. NO
9.9. satellite or cable TV	1. YES	2. NO		1. YES	2. NO
9.10. video recorder (recorder, player)	1. YES	2. NO		1. YES	2. NO
9.11. radio cassette recorder	1. YES	2. NO		1. YES	2. NO
9.12. CD player	1. YES	2. NO		1. YES	2. NO
9.13. computer (laptop, notebook)	1. YES	2. NO		1. YES	2. NO
9.14. passenger car (semi-truck)	1. YES	2. NO		1. YES	2. NO
9.15. motorboat, sailboat	1. YES	2. NO		1. YES	2. NO
9.16. plot for recreation	1. YES	2. NO		1. YES	2. NO
9.17. summer house	1. YES	2. NO		1. YES	2. NO
9.18. Internet access	1. YES	2. NO		1. YES	2. NO

10. Are you planning to buy a computer in the near future? *Ask the question regardless of whether the household has a computer already or not.*

1. yes
2. no
3. it is difficult to say

11. In comparison with three years ago, has the material situation of your household:

1. worsened
2. improved
3. remained unchanged.

G. HOUSING CONDITIONS

Now I would like to talk about your housing conditions.

1. Does your household use a separate dwelling? 1. YES 2. NO

2. How many rooms (including kitchen) are shared by your household with persons, who are not household members?	
3. How many rooms (including kitchen) are used only by your household members?	
4. What is the usable space of dwelling of your household in m ² ?	

5. Please specify the character of occupation of dwelling by your household. Is it:
Choose one answer by circling the appropriate number.

1. ownership of a private building
2. ownership in a low-cost building, company-owned building
3. membership in a housing association – an owner-occupied apartment
4. membership in a housing association – a tenant-occupied apartment
5. rental of apartment, payment of regulated rent (former housing allocation, apartments belonging to state-owned companies)
6. rental of apartment, payment of non-regulated rent
7. welfare apartment
8. sub-rental of part of apartment
9. living with parents or other family
10. other

6. I would also like to ask about equipment of your dwelling with installations. Is there at your dwelling:
Provide an answer with regard to each of installation and equipment types by circling the appropriate word:

6.1. a water-supply system	1. YES	2. NO
6.2. a flushable toilet using running water	1. YES	2. NO
6.3. a bathroom with a bathtub or shower	1. YES	2. NO
6.4. hot running water	1. YES	2. NO
6.5. gas from a supply system	1. YES	2. NO
6.6. gas from a cylinder	1. YES	2. NO
6.7. stationary phone	1. YES	2. NO

7. How is the apartment heated?
Choose one answer by circling the appropriate number.

1. collective central heating
2. individual central heating (using gas, coal, coke, electricity, other fuels)
3. fuel-fired furnace (coal, wood, sawdust etc.)
4. other

1. From what sources does the household receive assistance?:

Provide a separate answer for each source of assistance within the confines of each form of assistance by circling the appropriate word.

2.1. social assistance centers	1. YES	2. NO
2.2. family in Poland	1. YES	2. NO
2.3 family abroad	1. YES	2. NO
2.4. friends and acquaintances	1. YES	2. NO
2.5. secular charity organizations	1. YES	2. NO
2.6. religious organizations and parishes	1. YES	2. NO
2.7. trade unions and companies	1. YES	2. NO
2.8. district centers for family assistance	1. YES	2. NO
2.9. other	1. YES	2. NO

I. EDUCATION OF CHILDREN

REMARK: QUESTIONS 1 TO 6 PERTAIN ONLY TO HOUSEHOLDS WITH CHILDREN AGED 24 AND UNDER, WHO ARE NOT FINANCIALLY INDEPENDENT

1. Does your household include children, who completed elementary school or vocational school in the last three years and discontinued education?

1. YES 2. NO

If in the household there is a child, who completed elementary school or vocational school in the last three years and discontinued education, we go to question 2; otherwise, we go to question 3.

2. What is the reason for this situation?

Show CARD No. 1; only 3 most important reasons can be selected by circling appropriate numbers.

1. the child has sufficient education
2. further education is not worth it
3. lack of school near the place of residence
4. the child attended exams, but did not get enrolled
5. the child has difficulties with learning
6. due to health condition
7. due to material situation
8. the child took up a job
9. the child does not want to continue education
10. other reasons

3. Are there children in the household, who completed secondary school and discontinued education within the last three years?

1. YES 2. NO

If in the household there is a child, who completed secondary school in the last three years and discontinued education, we go to question 5; otherwise, we go to question 6.

4. What is the reason for this situation?
Show CARD No. 1; only 3 most important reasons can be selected by circling appropriate numbers.
1. the child has sufficient education
 2. further education is not worth it
 3. lack of school near the place of residence
 4. the child attended exams, but did not get enrolled
 5. the child has difficulties with learning
 6. due to health condition
 7. due to material situation
 8. the child took up a job
 9. the child does not want to continue education
 10. other reasons
5. Are you interested in purchase of a child's deferred assurance for education purposes, which would cover the expenses of education for children?
1. yes
 2. no
 3. we have already made such purchase

If the household is interested in purchase, we go to question 6, if not, we go to question 7, if it has already made the purchase, we go to the remark following question 7.

6. What amount of insurance premium would you be able to pay for a child's deferred assurance for education purposes?
Provide the answer by circling the appropriate number.
1. up to PLN 100 2. from PLN 100 to 200 3. more than PLN 200
7. Why are you not interested?
Provide the answer by circling the appropriate number.
1. I cannot afford the premium 2. there's no such need 3. I don't know this type of insurance

REMARK: QUESTIONS 8 TO 12 PERTAIN ONLY TO HOUSEHOLDS WITH CHILDREN ATTENDING A SCHOOL NO HIGHER THAN SECONDARY

8. In the present school year, have you been forced, due to financial reasons, to:
Provide a separate answer for each category listed below by circling the appropriate number

8.1 withdraw from sending the child to school?	1. YES	2. NO
8.2. withdraw from extracurricular activities for the child?	1. YES	2. NO
8.3. limit or suspend payment of school charges?	1. YES	2. NO
8.4 withdraw from paying for lunch at school for the child?	1. YES	2. NO
8.5. withdraw from private lessons for the child?	1. YES	2. NO
8.6. place the child in a different school, requiring lower charges?	1. YES	2. NO
8.7. impose other limitations?	1. YES	2. NO

9. What is the education level you would like your children to attain? What are the chances for realization of this goal?

For each child, select one education level by entering the appropriate number in the column „Education level”. Then evaluate the chances for attaining the selected education level by the child, entering the appropriate number in the column “Evaluation of chances.”

education level

- 1 grammar school
- 2 vocational school
- 3 profile-oriented (general education) secondary school
- 4 vocational school or vocational secondary school
- 5 post-secondary school
- 6 vocational college (bachelor degree)
- 7 college/university (master’s degree)

assessment of chances:

- 1 the child has attained this level
- 2 good chance
- 3 moderate chance
- 4 small chance
- 5 no chance

Child name and number*	Education level	Assessment of chances
	9.1.	9.2.
	9.3.	9.4.
	9.5.	9.6.
	9.7.	9.8.
	9.9.	9.10
	9.11.	9.12.
	9.13.	9.14

* the child name and number should correspond with the name and number of the person listed in part C rows 1 and 2

10. Are you, in general, satisfied with the schools attended by your children?

Choose one answer by circling the appropriate number.

- 1. yes, definitely
- 2. yes, more or less
- 3. rather not
- 4. definitely not
- 5. it is difficult to say

11. Are your children taking advantage of social assistance organized by school in the present school year (2002/2003)?

- 1. YES
- 2. NO

If the children have taken advantage of assistance, we go to question 12, if not, we go to part J.

12. From what sources was assistance provided?

Provide separate answers for each source of assistance, listed below, by circling the appropriate word.

12.1. social assistance centers	1. YES	2. NO
12.2. state sources of assistance	1. YES	2. NO
12.3. secular charity organizations	1. YES	2. NO
12.4. religious charity organizations	1. YES	2. NO
12.5. company social fund	1. YES	2. NO
12.6. district center for family assistance	1. YES	2. NO
12.7. parent-teacher association	1. YES	2. NO
12.8. other sources of assistance	1. YES	2. NO

J. CULTURE AND RECREATION

1. Within last year, has any of your household members, due to lack of money, had to withdraw from:
Provide a separate answer for each category listed below by circling the appropriate word.

1.1. movies	1. YES	2. NO
1.2. theatre, opera, operetta, concert	1. YES	2. NO
1.3. museum or exhibition	1. YES	2. NO
1.4. purchase of a book	1. YES	2. NO
1.5. purchase of newspapers, magazines	1. YES	2. NO

2. Within the last year, have you (any adult or child in your household), due to financial reasons, had to withdraw from:

Provide a separate answer for each category listed below by circling the appropriate word..

2.1. a summer camp or a trip for children	1. YES	2. NO	3. NOT APPLICABLE
2.2. vacations, trips for adults	1. YES	2. NO	3. NOT APPLICABLE
2.3. family trips (adults and children)	1. YES	2. NO	3. NOT APPLICABLE

3. In comparison with three years ago, the fulfillment of needs of your household with regard to culture and recreation:

Choose one answer by circling the appropriate number.

1. worsened
2. improved
3. remained unchanged

K. HEALTH CARE

1. Have you or any other household member changed the family doctor last year?

1. YES 2. NO

If the household answers YES in question 1, we go to question 2, otherwise we go to question 3.

2. What was the reason for a change of the family doctor?

Show CARD No. 2; underline all reasons pointed out by the respondent and circle the appropriate numbers.

- a. the new doctor's office is located closer to the place of residence
- b. the previous doctor quit his/her job
- c. the new doctor treats patients better
- d. the previous doctor did not devote enough time to patients
- e. the new doctor enjoys a better reputation
- f. the new doctor is able to provide better access to other medical services
- g. the new doctor's office is better equipped
- h. it is easier to get to the new doctor, the waiting time is shorter
- i. other reasons

3. Within last year, has any household member used the services of:

Provide answers pertaining to each of the units listed below by circling the appropriate word.

3.1. health care units rendering services paid by health care public fund	1. YES	2. NO
3.2. units rendering services paid by the household itself	1. YES	2. NO
3.3. units paid by the employer, who pays for a medical services plan	1. YES	2. NO

4. Has any member of your household been hospitalized within last year?
Provide separate answers for each type of hospital listed below, circling the appropriate word.

4.1. private	1. YES	2. NO
4.2. public	1. YES	2. NO

5. Was the cost of hospital treatment covered by:
Provide separate answers for each method of payment listed below by circling the appropriate words.

5.1. you	1. YES	2. NO
5.2. the health care public fund	1. YES	2. NO
5.3. the employer, who paid for a medical services plan	1. YES	2. NO

6. Has any member of your household visited a doctor (family doctor or a specialist) within the last 3 months?
Put a cross in applicable columns.

	family doctor	specialist
in private health care units	6.1.	6.2.
in public health care units	6.3.	6.4.

If any household member visited a family doctor or a specialist during the last 3 months, we go to question 7, otherwise we go to question 10

7. The doctor services were paid by:
Provide separate answers for each payment method by circling the appropriate word.

7.1. you	1. YES	2. NO
7.2. the health care public fund	1. YES	2. NO
7.3. the employer, who paid for a medical services plan	1. YES	2. NO

If any household member visited a doctor paid for the healthcare unit within the last 3 month, we go to question 8, otherwise we go to question 10.

8. Has the family doctor failed to provide the household member with a referral for the expected diagnostic tests, stating that: *Show CARD No. 3 and circle numbers that correspond with all reasons, provided by the respondent; if the respondent says that the doctor provided a referral, do not show the card and circle number 7.*

1. there was not enough money for such tests
2. the tests were not necessary
3. the tests will be ordered by the specialist that the household member is referred to
4. it will be better to perform the tests during hospitalization
5. the doctor did not provide a referral and did not explain why
6. I do not remember, I do not know, we did not talk about diagnostic tests at all
7. the referral was provided

If during the last 3 months any household member visited a specialist paid by the healthcare fund, we go to question 9, if not, we go to question 10.

9. Why did you choose a given specialist? *Show the CARD No. 4 and circle all relevant reasons.*
1. information regarding good quality of work of this specialist
 2. suggestion of the doctor, issuing the referral
 3. close proximity to the place of residence
 4. convenient working hours of the specialist
 5. the selected specialist working in a hospital, where further treatment was planned
 6. selected specialist working in a hospital, where the respondent got medical treatment previously
 7. the respondent was treated by this specialist earlier
 8. I don't remember/ It is difficult to say

10. Has any household member visited a dentist within the last 3 months?
Provide separate answers for each of the healthcare unit type listed below by circling the appropriate word.

10.1. in private health care units	1. YES	2. NO
10.2. in public health care units	1. YES	2. NO

If any household member used dental services within the previous 3 months, we go to question 11, otherwise we go to question 12.

11. The charges for dental services were covered by:
Provide a separate answer for each payment method by circling the appropriate word.

11.1. you	1. YES	2. NO
11.2. the health care public fund	1. YES	2. NO
11.3. the employer, who paid for a medical services plan	1. YES	2. NO

If any household member used services of any household unit within the previous 3 months (hospitalization or treatment in a sanatorium, a doctor, a dentist, medical tests, rehabilitation services), we go to question 12, otherwise we go to question 13.

12. During the previous 3 months, the household paid the total of (PLN) for:

12.1. purchase of outpatient medical services in healthcare units (including non-standard services of dentists, orthodontists, payment for orthodontic equipment etc).	
12.2. informal payments, that is, the so-called gifts of gratitude, aimed at obtaining better or faster services	
12.3. gifts of sincere gratitude for services already rendered	
12.4. treatment at a private or public hospital, where costs of treatment were covered by respondent within the confines of official purchase of medical services	
12.5. payments made at a public hospital (contributions, payments for services rendered by nurses during night duty hours, purchase of medications for a patient treated at a hospital)	

13. Please specify, how much in total was spent in the previous 3 months for medications and other pharmaceutical products associated with illness in your household (in PLN)?

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14. During the last year, did you encounter any of the following situations in your households:
Provide a separate answer for each of the listed situations by circling the appropriate word:

14.1. there was not enough money to purchase medications prescribed or recommended by doctor	1. YES	2. NO
14.2. due to lack of money, you did not use dental services despite the need to do so	1. YES	2. NO
14.3. due to lack of money, you had to withdraw from obtaining dentures	1. YES	2. NO
14.4. due to lack of money, you had to withdraw from visiting a doctor	1. YES	2. NO
14.5. due to lack of money, you had to withdraw from medical tests (such as lab tests, X-ray, ECG)	1. YES	2. NO
14.6. due to lack of money, you had to withdraw from rehabilitation	1. YES	2. NO
14.7. due to lack of money, you had to withdraw from treatment in a sanatorium	1. YES	2. NO
14.8. due to lack of money, you had to withdraw from hospitalization	1. YES	2. NO

15. What did you do when it turned out you did not have enough money to buy medications prescribed or recommended by the doctor?

15.1. asked the doctor to prescribe other medications 1. YES 2. NO

15.2. managed to get additional money to buy medications 1. YES 2. NO

15.3. decided not to buy medications 1. YES 2. NO

15.4. went to hospital and thus received medications free of charge 1. YES 2. NO

15.5. purchased cheaper medications recommended by a pharmacist 1. YES 2. NO

16. In comparison with three years ago, the fulfillment of healthcare needs of your household:
Choose one answer by circling the appropriate number.

1. worsened
2. improved
3. remained unchanged

17. Does your family have sufficient information regarding the rules of using medical services financed from public resources, including a change of the family doctor?

1. YES 2. NO

18. Has medical treatment of any of your household members been given up within the last year due to: *Provide answer(s) by circling the appropriate number(s)*

18.1. additional payments 1. YES 2. NO 3. NO NEED FOR TREATMENT OCCURRED

18.2. inability to obtain additional certificates or referrals

1. YES 2. NO 3. NO NEED FOR TREATMENT OCCURRED

19. In comparison with the previous period, did you or any household members use services rendered by healthcare units requiring own payments last year:

Select one answer by circling the appropriate number.

1. more often
2. less often
3. equally often
4. we have never used such services
5. it is difficult to say

20. How much would you be willing to spend from the household income for voluntary medical insurance, offered by a private insurance company, in order to ensure covering of costs of medical treatment for household members?

Select one answer by circling the appropriate number.

1. a monthly premium of up to PLN 100
2. a monthly premium of PLN 100-250
3. a monthly premium of PLN 250-500
4. a monthly premium exceeding PLN 500
5. I cannot afford an additional premium
6. I am not interested in this type of insurance

21. Do the experiences of your household members show that access to doctors and health care units financed from public funds is now easier or more difficult than it used to be?

Select one answer by circling the appropriate number.

- 1.easier 2. more difficult 3.without change 4. I don't know (lack of personal experience)

If it is easier, we go to question 22, if more difficult or the respondent does not know, we go to question 23
--

22. Why is it easier? Show CARD No. 5; underline all relevant reasons for improvement, indicated by the respondent.

1. it is possible to book a visit in advance
2. it is possible to book a visit by phone
3. appointments are made for a specific hour without the necessity to wait for a long time
4. more convenient and extended working hours
5. it is possible to get a doctor's advice by phone
6. doctors care more about attracting patients
7. the time of awaiting for hospitalization has shortened

23. How do you feel about your life as a whole.....? Show CARD No. 6, ask the respondent to select one statement and circle the appropriate number.

- 1 delighted
- 2 pleased
- 3 mostly satisfied
- 4 mixed
- 5 mostly dissatisfied
- 6 unhappy
- 7 terrible

L. INCOME SITUATION AND INCOME MANAGEMENT

Now I would like to ask about the financial situation and income of your household. Please take into consideration income obtained by all members of your households, who earn any income (from any source) for the common budget.

1. What was the net income of your household last month?

2. The income earned by your household last month in comparison with other average months were:
Select one answer by circling the appropriate number.

1. much higher
2. much lower
3. similar

3. Please assess the amount of the average net income in your household in year 2002.

4. Is your household able to make ends meet at the present income level:
Select one answer by circling the appropriate number.

1. with great difficulty
2. with difficulty
3. with some difficulty
4. rather easily
5. easily

5. What is the lowest net income in PLN, allowing your household to make ends meet?

6. What level of monthly net income in PLN would ensure a satisfactory standard of living of your household now and in the future?

7. Which of the following statements best characterize the way of managing income by your household?

Show CARD No. 7, ask for selection of one answer and circle the appropriate number.

1. we can afford everything and even make savings for the future
2. we can afford everything with no particular difficulties but we do not make savings for the future
3. we live economically and thus are able to afford everything
4. we live very economically to save money for significant purchases
5. we have enough money for the cheapest food, clothes, apartment charges and to pay off credit
6. we have enough money for the cheapest food, clothes and apartment charges, but not to pay off credit
7. we have enough money for the cheapest food and clothes, but not for apartment charges
8. we have enough money for the cheapest food, but not for clothes
9. we do not have enough money even for the cheapest food

8. Does the regular income of your household allow for fulfillment of current needs?

1. YES

2. NO

If the regular income does not allow for fulfillment of current needs, we go to question 9, if it does, we go to question 10.

9. What actions does your household undertake in order to fulfill the current needs?

A separate answer is to be provided for each activity by circling of the appropriate word.

9.1. takes advantage of savings made	1. YES	2. NO
9.2. sales off or pawns property owned (material goods)	1. YES	2. NO
9.3. limits the current needs	1. YES	2. NO
9.4. incurs loans, credits	1. YES	2. NO
9.5 takes advantage of assistance of the relatives	1. YES	2. NO
9.6 takes advantage of assistance of the church	1. YES	2. NO
9.7. takes advantage of social assistance	1. YES	2. NO
9.8. a household member undertakes additional work	1. YES	2. NO
9.9. undertakes other activities	1. YES	2. NO
9.10. undertakes no activity	1. YES	2. NO

10. Does anyone in your household take advantage of any form of insurance listed below?

Provide a separate answer for each insurance by circling the appropriate word.

10.1. motor third-party liability insurance	1. YES	2. NO
10.2. motor hull insurance	1. YES	2. NO
10.3. farmers third-party liability	1. YES	2. NO
10.4. insurance of buildings being part of a farm	1. YES	2. NO
10.5. basic homeowner insurance	1. YES	2. NO
10.6. life insurance	1. YES	2. NO
10.7. unit-linked life insurance	1. YES	2. NO
10.8. child's deferred assurance, dowry, endowment for child	1. YES	2. NO
10.9. annuity insurance	1. YES	2. NO
10.10. accident insurance	1. YES	2. NO
10.11. sickness insurance	1. YES	2. NO
10.12. credit insurance	1. YES	2. NO
10.13. liability insurance in private life	1. YES	2. NO
10.14. professional liability insurance	1. YES	2. NO
10.15. liability insurance for the self-employed	1. YES	2. NO
10.16. agricultural insurance (crop insurance)	1. YES	2. NO

If at least one answer YES was circled in question 10, we go to questions 11 and 12, if only answers NO were given, we go to question 13.

11. What was the main reason for you to purchase insurance?

Provide answers for each reason listed above by circling the appropriate word.

11.1. insurance obligation	1. YES	2. NO
11.2. fear for the future of the family (household)	1. YES	2. NO
11.3. an unfortunate event in the life of family (friends)	1. YES	2. NO
11.4. a suggestion, advice of acquaintances	1. YES	2. NO
11.5. advertisement	1. YES	2. NO
11.6. convinced by an insurance agent	1. YES	2. NO
11.7. other reasons	1. YES	2. NO

12. Was it necessary to obtain any of the listed types of insurance while incurring a credit?

If the respondent has any of the insurance types listed, it is necessary to provide answer for each insurance type by circling the appropriate word.

12.1. life insurance	1. YES	2. NO
12.2. motor hull insurance	1. YES	2. NO
12.3. homeowner insurance	1. YES	2. NO

13. In comparison with three years ago, the income situation of your household has:

Choose one answer by circling the appropriate number.

1. worsened
2. improved
3. remained unchanged

14. Within the last three years, did your household have to limit or give up:

14.1. savings	1. YES	2. NO
14.2. purchases	1. YES	2. NO
14.3. insurance	1. YES	2. NO

15. Within the last three years, your household has:

15.1. increased savings	1. YES	2. NO
15.2. increased purchases	1. YES	2. NO
15.3. purchased a new or additional insurance	1. YES	2. NO

16. If the income of your household increased this year, what would you use the additional money for in the first place among the possibilities listed below? *Show CARD No. 8, ask the respondent to choose two possibilities and circle appropriate numbers.*

1. increase of bank deposits
2. purchase of state securities
3. participation in an investment (mutual trust) fund
4. purchase of stocks
5. purchase of additional insurance
6. extending of the already purchased insurance
7. other

M. COMPUTER AND INTERNET**Questions 1 and 2 for households equipped with a computer (answer YES in question F.9.13)**

1. Is it possible to use the Internet and e-mail using the home computer?
 1. yes → GO TO QUESTION 4
 2. no
 3. *I don't know*

2. Which of the reason describes best, why your household does not have Internet access? *Show CARD No. 9; 3 possibilities can be circled at most.*
 1. lack of adequate equipment
 2. sufficient ability to use the Internet elsewhere
 3. the Internet is not needed, it has nothing interesting to offer
 4. fear of losing privacy when using the Internet
 5. the Internet may be harmful, for instance, it may demoralize children and take up too much time
 6. the access cost is too high
 7. other

Question 3 to all households

3. How do you think, is your household going to be equipped with Internet access by the end of this year?
 1. definitely yes
 2. rather yes
 3. rather not
 4. definitely not
 5. it is difficult to say

Questions 4-5 to households with a computer with Internet access

4. How do the household members connect with the Internet at home? *(it is acceptable to circle more than one answer)*
 1. using a stationary phone (via TP S.A.)
 2. using a stationary phone (an operator other than TP S.A)
 3. via cable TV
 4. using a mobile phone
 5. a TV decoder
 6. a radio connection
 7. in some other way
 8. I do not know

5. How long have you had Internet access at home? *Please enter installation year* [_____]

Question 6-10 to respondents having children aged 16 and under

6. Does (do) your child (children) use a computer at home or elsewhere?
 1. YES
 2. NO
 3. I DON'T KNOW

7. Does (do) your child (children) use the Internet at home or elsewhere?

1. YES 2. NO 3. I DON'T KNOW

If answer YES is given in question 6 and/or 7, we go to question 8, otherwise we finish the interview.

8. *(if the child/children uses/use the computer /the Internet at home)* How many hours per week on the average did your child (children) spend using the computer and the Internet last month? *(if the respondent does not know, enter 88 in the appropriate columns).*

Child first name & number *	computer	Internet
	8.1.	8.2.
	8.3.	8.4.
	8.5.	8.6.
	8.7.	8.8.
	8.9.	8.10.
	8.11.	8.12.

* *first name and number of the child from part I/C – household composition*

9. In general, are you happy or concerned with the fact that your child/children uses/ use a computer and the Internet and how much time he/she/they spends/spend using it?

1. definitely happy
2. rather happy
3. rather concerned
4. definitely concerned
5. it is difficult to say / I don't know

Questionnaire subsequent number in voivodship I__I__I__I

SOCIAL DIAGNOSIS 2003
an independent research project
realized by the Council for Social Monitoring

PART II individual questionnaire (self-report)

Gender:

1. man
2. woman

Household ID number (*same as in Part C*) I__I__I__I__I

Person number (*copy from part - C*) I__I__I

First name (*copy from part - C*)

People are different. They live in different conditions and feel differently about what happens to them everyday; they cope in different ways with whatever life brings to them.

This questionnaire is about how you perceive your life. Most questions should be interesting, some may be boring and tiresome, many will be easy – this is about your life and not some unknown problem; however, some questions will be difficult. Please answer them as accurately as you can.

At some points you may have a feeling that you have answered the question already, and we are asking it again in a different way. And you will be right. We are seeking the best way to ask questions. Don't be surprised when you find that we jump over from one topic to another – the sets of questions have been put in a random order.

You can be sure of our discretion. All answers will be used only for research purposes within the confines of collective statistical analyses.

Different possible answers may be provided along with questions. Please underline the one, which corresponds best with your situation. In case of some questions, it will be possible to underline more than one answer. If there are no ready answers below a question, please enter your answer in the space provided.

We would like to ask you kindly to fill out the questionnaire on your own, without any help from other household members. This is about individual assessments and feelings, and not about opinions consulted with other people. If you are unable to answer any question, please ask the interviewer for assistance.

1. Your **date of birth** I _ I _ I I _ I _ I I _ I _ I
day month year (two last digits)

2. What, in your opinion, is **the most important prerequisite for happy, successful life** (PLEASE CHOOSE AND UNDERLINE AT MOST THREE VALUES)

1. MONEY
2. CHILDREN
3. SUCCESSFUL MARRIAGE
4. WORK
5. FRIENDS
6. PROVIDENCE, GOD
7. CHEERFULNESS, OPTIMISM
8. HONESTY
9. KINDNESS AND RESPECT from OTHERS
10. FREEDOM, LIBERTY
11. HEALTH
12. EDUCATION
13. STRONG PERSONALITY
14. OTHER

3. **How do you feel about your life as a whole.....?** (please underline the appropriate answer)

- 1 delighted
- 2 pleased
- 3 mostly satisfied
- 4 mixed
- 5 mostly dissatisfied
- 6 unhappy
- 7 terrible

4. **When was your life easier – before year 1989 or at present?**

1. it was easier before year 1989
2. it is easier at present
3. it is difficult to say
4. I am too young to remember times before year 1989

In the recent months: (NOT APPLICABLE means no wife or husband)

5. The expectations of your wife/husband toward you were so great you were unable to meet them

1. OFTEN 2. IT HAPPENED 3. NEVER 4. NOT APPLICABLE

6. Your wife/husband was too extravagant in spending money that were your common property

1. OFTEN 2. IT HAPPENED 3. NEVER 4. NOT APPLICABLE

7. The problems of your wife/husband added to your troubles and made your life difficult

1. OFTEN 2. IT HAPPENED 3. NEVER 4. NOT APPLICABLE

In the recent months: (NOT APPLICABLE means no financially dependent children)

8. You had doubts about your children being hard-working and tough enough to cope in life

1. OFTEN 2. IT HAPPENED 3. NEVER 4. NOT APPLICABLE

9. You had to listen to complaints about your children (at school, from neighbors, from other parents)

1. OFTEN 2. IT HAPPENED 3. NEVER 4. NOT APPLICABLE

10. You had to bear some expenses because of something that your children did

1. OFTEN 2. IT HAPPENED 3. NEVER 4. NOT APPLICABLE

11. Your children disregarded and rejected your help, advice and guidance	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
12. You felt that you were losing influence on your children	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE

In the recent months: (NOT APPLICABLE means no parents, parents-in-law or older relatives)

13. Your parents, parents-in-law or older relatives complained about you and was particularly critical of you	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
14. You felt responsible for caring for and ensuring well-being of your parents or older relatives	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
15. You were worried about the health or state of mind of one of your parents or older relatives	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
16. Problems and worries of your parents, parents-in-law or other older relatives added to your troubles and made your life difficult	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE

In the recent months:

17. You felt that your source of income was unstable and uncertain	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
18. Financial problems added to your troubles and made your life difficult	1. OFTEN	2. IT HAPPENED	3. NEVER	

In the recent months: (NOT APPLICABLE means lack of paid work)

19. You felt that your work was too tiresome, dirty or dangerous	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
20. You felt you had too many work responsibilities that you were not able to cope with	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
21. You were treated unjustly by others at work	1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE

In the recent months:

22. You had a feeling that the place you live in was overcrowded, for instance, too many people live in your apartment, neighboring apartments, the whole building	1. OFTEN	2. IT HAPPENED	3. NEVER	
23. You were afraid of crime, drug addiction, hooliganism within your district, housing estate, vicinity	1. OFTEN	2. IT HAPPENED	3. NEVER	
24. Problems associated with neighbors or other people living in the close vicinity of your home made your life difficult	1. OFTEN	2. IT HAPPENED	3. NEVER	

In the recent months:		
25. You suffered from a physical indisposition, such as bones aching, shortness of breath, which made it difficult to walk out, climb the stairs etc.		
1. OFTEN	2. IT HAPPENED	3. NEVER
26. Health problems made it difficult for you to perform everyday tasks or participate in other activities		
1. OFTEN	2. IT HAPPENED	3. NEVER

In the recent months:		
27. You had to deal with some formal matters		
1. YES	2. NO (if NO, please go to question 31)	
28. You were not able to deal with a formal matter efficiently, quickly and easily		
1. OFTEN	2. IT HAPPENED	3. NEVER
29. You had to search for friends or other ways in order to deal with a formal matter		
1. OFTEN	2. IT HAPPENED	3. NEVER
30. You felt completely helpless and humiliated when dealing with a formal matter		
1. OFTEN	2. IT HAPPENED	3. NEVER

In the recent months: (NOT APPLICABLE means that there was no need to use medical services)			
31. You did not know where to seek medical assistance for yourself or for a relative or acquaintance			
1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
32. You did not trust the healthcare service employees to provide medical assistance for you or a relative or acquaintance			
1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE
33. Although you needed to, you decided not to see a doctor, because it would have been too burdensome, onerous or costly			
1. OFTEN	2. IT HAPPENED	3. NEVER	4. NOT APPLICABLE

During the last year, did you:	
34. Undertake a more profitable or an additional job	1. YES 2. NO
35. Invested some money in production, trade or services	1. YES 2. NO
36. Made some money on stocks, bonds or transfer of money between bank accounts	1. YES 2. NO
37. Obtained new qualifications or skills with better earnings in mind	1. YES 2. NO

38. How would you evaluate your material situation at present:
1. GREAT
2. GOOD
3. QUITE GOOD
4. NEITHER GOOD NOR BAD
5. NOT TOO GOOD
6. BAD
7. TERRIBLE

39. Please specify, **to what extent your present material situation meets your aspirations, what you would like to have**

1. not at all
2. to a minimum extent
3. to some extent
4. it is half as good as I would like it to be
5. it largely does
6. it almost completely does
7. it does fully or it is even better than I would like it to be

40. "Taken all together, **how would you say things are these days?** Would you say that you are....?"

1. VERY HAPPY
2. PRETTY HAPPY
3. NOT TOO HAPPY
4. UNHAPPY

41. **Please compare your material situation with that of the average situation of people of the same gender and age as you,** does this comparison show that your life is:

1. much worse than the average
2. worse
3. a little worse
4. same as that of an average man at my age
5. slightly better than the average
6. better
7. much better than the average.

42. During the last year, **did you use the services of the following entities?**

42.1.health care units paid by health care public funds	1. YES	2. NO
42.2. units, where you had to pay for services	1. YES	2. NO
42.3. units paid by an employer, who paid for a medical services plan	1. YES	2. NO

43. **How often within the last few months you were so depressed you thought about suicide:**

1. VERY OFTEN
2. QUITE OFTEN
3. RARELY
4. NEVER

44. During the last year, did you encounter a situation, in which **you failed to take some time off work despite the fact that the doctor provided you with a sickness leave?**

1. YES 2. NO 3. I AM NOT EMPLOYED

45. **Do you trust financial institutions ?**

- | | | | |
|---------------|--------|-------|-------------------------------------|
| 45.1. Polish | 1. YES | 2. NO | 3. I HAVE NO OPINION IN THIS REGARD |
| 45.2. foreign | 1. YES | 2. NO | 3. I HAVE NO OPINION IN THIS REGARD |

46. During the last year, **did you use services of family doctors or specialists paid by the health care public fund?**

1. YES 2. NO

47. — if YES, then, **in comparison with your earlier experiences, did the medical treatment conditions:**

1. IMPROVE
2. REMAIN UNCHANGED
3. WORSEN
4. IT IS DIFFICULT TO SAY

48. **Do you trust the following financial institutions?**

48.1. banks	1. YES	2. NO	3. I HAVE NO OPINION
48.2. life insurance companies	1. YES	2. NO	3. I HAVE NO OPINION
48.3. property insurance companies	1. YES	2. NO	3. I HAVE NO OPINION
48.4. investment (mutual trust) funds	1. YES	2. NO	3. I HAVE NO OPINION
48.5. open pension funds	1. YES	2. NO	3. I HAVE NO OPINION
48.6. stock exchange	1. YES	2. NO	3. I HAVE NO OPINION

49. **Have you been hospitalized during the last three years?** 1. YES 2. NO

50. — if YES, which factors were the most important ones for selection of the hospital (please circle all important factors):

1. you selected a hospital in accordance with suggestion of the doctor, who issued the referral
2. the hospital was selected by the emergency service employee
3. you selected the hospital on the basis of own information regarding the quality of work of different hospitals
4. you selected a given hospital due its proximity to your place of residence

51. **Do you feel that you are loved and trusted?** 1. YES 2. NO

52. **Do you feel lonely, although you do not want to be ?** 1. YES 2. NO

53. **How many people would you call your friends?** I _____ I

54. Please specify, **how you usually react to troubles and difficult situations in your life?** (*you can underline more than one answer*)

1. I turn to others for advice
2. I pull myself together and start acting
3. I start using alcohol
4. I tell myself that it could be worse or that others face even worse situations
5. I give up, I do not know what to do
6. I use tranquilizers
7. I pray to God for assistance
8. I get preoccupied with other things, which divert my attention from problems and make me feel better

55. Do you have any **specific plans** for the near future (several years), **objectives, which you very much want to achieve**

1. YES 2. NO

56. **How strong is your willingness to live these days?** (circle the appropriate number on the scale below)

1-----2-----3-----4-----5-----6-----7-----8-----9-----10
I don't want to live at all **I want to live very much**

57. **This questionnaire consists of 7 groups of statements. Please read each group of statements carefully, and then pick out one statement in each group that best describes the way you have been feeling during the past four weeks. Circle the number besides the statement you have picked. If several statements in the group seem to apply equally well, circle the highest number of that group.**

N. 0. I think that I don't look worse than I used to
 1. I am worried because I think I look old and I am not attractive
 2. I feel that I look worse than I used to
 3. I am sure that I look terrible.

O. 0. I have as much energy as ever.
 1. I have less energy than I used to have.
 2. I don't have enough energy to do very much.
 3. I don't have enough energy to do anything.

P. 0. I have not experienced any change in my sleeping pattern.
 1. I do not sleep as well as I used to.
 2. In the morning, I wake up 1-2 hours earlier and find it difficult to fall asleep again.
 3. I wake up several hours too early and I can't get back to sleep.

Q. 0. I am no more tired or fatigued than usual.
 1. I get more tired or more fatigued more easily than usual.
 2. I am tired or fatigued to do a lot of things I used to do.
 3. I am too tired or fatigued to do most of the things I used to do.

R. 0. I have not experienced any change in my appetite.
 1. My appetite is somewhat less than usual.
 2. My appetite is much less than before.
 3. I have no appetite at all.

T. 0. I am not worried about my health more than I used to be.
 1. I am worried about such ailments as: stomach pains, stomach upset or constipation.
 2. I am very worried about my health; I think about it constantly.
 3. My health condition is so worrying that I cannot think of anything else.

U. 0. I have not noticed any recent change in my interest in sex.
 1. I am less interested in sex than I used to be.
 2. I am much less interested in sex now.
 3. I have lost interest in sex completely.

58. What was the **education level** of your **FATHER (or main custodian)**, when you were 14:

0. uncompleted primary
1. primary
2. vocational
3. uncompleted secondary
4. secondary vocational
5. secondary – general education
6. uncompleted university/ college (including post-secondary)
7. university/ college

59. **How many times a month on the average do you participate in religious services and other religious meetings?** (if less often than once a month, please enter 0)

_____ times a month

60. Listed below are several ailments associated with health condition. Please specify, whether you suffered from any of them within the LAST MONTH. If you did not suffer from it at all during the period of last month, please circle number 1; if you suffered from it less frequently than for 15 days of the month, circle number 2; if you suffered from an ailment for at least one half of the month, please circle number 3.

IN THE PAST MONTH:	I did not suffer	I suffered less than 15 days	I suffered at least for one half of the month
60.1. strong headaches	1	2	3
60.2. stomach pains or flatulence	1	2	3
60.3. pain or tension of neck or arm muscles	1	2	3
60.4. chest or heart pains	1	2	3
60.5. dry mouth or throat	1	2	3
60.6. sweating	1	2	3
60.7. shortness of breath	1	2	3
60.8. aching and pains all over the body	1	2	3
60.9. accelerated heartbeat (palpitation)	1	2	3
60.10. shivers or convulsions	1	2	3
60.11. pressure on the bladder and more frequent urinating	1	2	3
60.12. a feeling tiredness not associated with work	1	2	3
60.13. constipation	1	2	3
60.14. nosebleeds	1	2	3
60.15. sudden changes of blood pressure	1	2	3

61. **In your opinion, were the reforms conducted in Poland after year 1989 successful in general or rather unsuccessful?**

1. successful
2. not successful
3. it is difficult to say

62. Did the changes that took place in Poland after year 1989 have any influence upon your life?
1. YES 2. NO

63. -- if YES, then, in general, was that influence positive or negative?

1. very negative
2. rather negative
3. rather positive
4. very positive
5. it is difficult to say

64. Do you smoke cigarettes? 1. YES 2. NO

65. — if YES, how many cigarettes per day do you smoke? _____ cigarettes

66. — if NO, have you ever smoked cigarettes in your life? 1. YES 2. NO

67. We would like you to evaluate now the following aspects of your life and tell us, to what extent you are satisfied with each of them. Please mark your choice by circling the appropriate number by each aspect of life. The numbers stand for:

- 1 – VERY SATISFIED
- 2 - SATISFIED
- 3 – QUITE SATISFIED
- 4 – RATHER UNSATISFIED
- 5 - UNSATISFIED
- 6 – VERY UNSATISFIED
- 7 – not applicable

To what extent are you satisfied with:

67.1. your relations with the closest family members	1	2	3	4	5	6	7
67.2. financial situation of your family	1	2	3	4	5	6	7
67.3. relations with colleagues (a group of friends)	1	2	3	4	5	6	7
67.4. the present income of your family	1	2	3	4	5	6	7
67.5. ability to fulfill the food needs	1	2	3	4	5	6	7
67.6. health	1	2	3	4	5	6	7
67.7. what you are accomplishing in life	1	2	3	4	5	6	7
67.8. situation in the country	1	2	3	4	5	6	7
67.9. housing conditions	1	2	3	4	5	6	7
67.10. place of residence	1	2	3	4	5	6	7
67.11. goods and services you can get	1	2	3	4	5	6	7
67.12. what the future seems to hold for you	1	2	3	4	5	6	7
67.13. sex life	1	2	3	4	5	6	7
67.14. education	1	2	3	4	5	6	7
67.15. ways of spending leisure time	1	2	3	4	5	6	7
67.16. moral standards in you community	1	2	3	4	5	6	7
67.17. work	1	2	3	4	5	6	7
67.18. children	1	2	3	4	5	6	7
67.19. marriage	1	2	3	4	5	6	7
67.20. safety in the place of residence	1	2	3	4	5	6	7

68. In general, was the previous year a good one in your life ?	1. YES	2. NO
69. Who or what was the cause that the previous year was a good one or a bad one in your life? (you can choose more than one answer)	1. the authorities 2. myself 3. other people 4. destiny (Providence)	

70. Have you engaged within the last three years in activity on behalf of the local community (commune, housing estate, town)?	1. YES	2. NO
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IN THE PREVIOUS YEAR:		
71. I visited a psychologist (psychiatrist)	1. YES	2. NO
72. I drank too much alcohol	1. YES	2. NO
73. I tried drugs	1. YES	2. NO
74. one of my relatives or acquaintances passed away	1. YES	2. NO
75. — if YES, who was it (please underline):	1. mother 2. father 3. wife (fiancée, girlfriend) 4. child 5. brother/ sister 6. grandmother/ grandfather 7. friend 8. other close acquaintance	

IN THE PREVIOUS YEAR:			
76. I could not get a job after graduating from school	1. YES	2. NO	3. NOT APPLICABLE
77. I was shifted to a lower work position	1. YES	2. NO	3. NOT APPLICABLE
78. I was passed over for promotion at work	1. YES	2. NO	3. NOT APPLICABLE
79. I was promoted	1. YES	2. NO	3. NOT APPLICABLE
80. I had serious problems with my superior	1. YES	2. NO	3. NOT APPLICABLE
81. I started my own business (company)	1. YES	2. NO	
82. I lost a substantial amount of money doing business	1. YES	2. NO	3. NOT APPLICABLE
83. I had to take up a job not consistent with my qualifications	1. YES	2. NO	3. NOT APPLICABLE
84. I was robbed	1. YES	2. NO	
85. I was attacked and beaten	1. YES	2. NO	
86. Someone broke into my car or house	1. YES	2. NO	
87. I was accused of an act, for which I could be liable to imprisonment or a fine	1. YES	2. NO	
88. I was arrested by the police	1. YES	2. NO	
89. I was a defendant in a civil case	1. YES	2. NO	
90. my close friend/relative was arrested or violated the law	1. YES	2. NO	
91. I was discriminated because of nationality, appearance, beliefs or for other reasons	1. YES	2. NO	

92. my apartment (house) was seriously damaged 1. YES 2. NO

93. my apartment (house) was renovated 1. YES 2. NO

94. I had problems with the owner or manager of the building, in which I live (lived)

1. YES 2. NO 3. NOT APPLICABLE

95. Did you participate in the last local government election? 1. YES 2. NO

96. Do you know the name of the present commune administrator or city/town mayor? 1. YES 2. NO

97. Which period after the war was the best (the most happy) in your life in general?

please circle years that indicate the happiest time

1945,6,7,8,9,1950,1,2,3,4,5,6,7,8,9,1960,1,2,3,4,5,6,7,8,9,1970,1,2,3,4,5,6,7,8,9,1980,1,2,3,4,5,6,7,8,9,1990,1,2,3,4,5,6,7,8,9,2000,1,2,2003

98. If you won a bet for PLN 200 and had a choice: take the amount of PLN 200 or toss a coin and either get nothing if it is heads or get PLN 400 if it is tails – what would you choose?

1. take PLN 200 at once
2. toss a coin and either get nothing or PLN 400

99. Which of these statements regarding democracy you find the most convincing?

1. democracy is better than any other form of government
2. sometimes non-democratic system can be better than democratic system
3. for people like me, it really doesn't matter whether the system is democratic or non-democratic
4. democracy is a bad system
5. It is difficult to say

100. Generally speaking, would you say that most people can be trusted or that you can't be too careful in dealing with people?

1. most people can be trusted
2. one can't be too careful in dealing with people
3. it is difficult to say

101. If you lost a bet for PLN 200 and had a choice: either pay PLN 200 at once or toss a coin and either pay nothing if it is heads or pay PLN 400 if it is tails – what would you choose?

1. pay PLN 200 at once
2. toss a coin and either pay nothing or pay PLN 400

102. Are you a member of any organizations, associations, parties, councils, unions, committees or religious groups?

1. YES, one
2. YES, two
3. YES, three or more
4. NO

103. — if YES, then have you ever performed a function in any of these organizations? 1. YES 2. NO

104. **If people do something for the public good in your local community, who usually comes up with the idea or organizes such activity** (please underline all categories that in your opinion are appropriate)?

1. members of local authorities
2. priest, parish
3. teachers, school
4. company owner, local businessman
5. myself
6. social organizations, associations
7. journalists
8. other persons
9. I do not know
10. Nobody

105. **Did you attend a public meeting last year (but not at work)?** 1. YES 2. NO

106. — if YES, did you **participate in discussion during the meeting?** 1. YES 2. NO

107. **Your own (personal) average monthly net income for the last three months amounted to**
_____ PLN

108. **What average monthly net income do you expect to get in two years?**
_____ PLN

109. **In general, are you satisfied or dissatisfied with yourself?**

1. I am very satisfied with myself
2. I am rather satisfied with myself
3. I am rather dissatisfied with myself
4. I am very dissatisfied with myself

110. **Please compare yourself to other men/women at the same age and say whether it is more probable for the things listed below to happen to you or to other men/women at the same age:**

1. IT IS MUCH MORE PROBABLE THAT IT WILL HAPPEN TO ME
2. IT IS MORE PROBABLE THAT IT WILL HAPPEN TO ME
3. IT CAN HAPPEN TO ME JUST AS WELL AS TO OTHER MEN/WOMEN
4. IT IS LESS PROBABLE THAT IT WILL HAPPEN TO ME
5. IT IS MUCH LESS PROBABLE THAT IT WILL HAPPEN TO ME
6. IT HAS HAPPENED TO ME ALREADY

Please enter a number on the left, indicating the probability of a given event occurring to you in comparison with other men/women at the same age. If any of these things has already happened to you, enter 6.

- 110.1 _____ victim of burglary
- 110.2 _____ becoming an alcohol addict
- 110.3 _____ being imprisoned
- 110.4 _____ a successful career in your profession
- 110.5 _____ living long and healthy life
- 110.6 _____ a suicidal attempt
- 110.7 _____ getting cancer
- 110.8 _____ winning LOTTO for more than PLN 100 thousand
- 110.9 _____ living your life without losing dignity, honestly
- 110.10 _____ poverty
- 110.11 _____ a nervous breakdown
- 110.12 _____ loneliness
- 110.13 _____ realization of most plans in life
- 110.14 _____ contracting AIDS
- 110.15 _____ having a heart attack

111. **Do you make any bets** (e.g. lotteries, horse races, sporting events etc.)
 1. YES, at least once a month 2. YES, sometimes 3. NO

112. **Do you use a computer** at work, at home or any other place at least from time to time?
 1. YES 2. NO

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Provided below are sets of questions only for persons belonging to specific groups:

- those, who work, who have not retired yet**
- employed (working)**
- those working up to 50 years of age**
- computer users**
- Internet users**

if you meet any of the above conditions, please go to the appropriate set of questions on subsequent pages.

ONLY FOR THOSE, WHO WORK, WHO HAVE NOT RETIRED YET

113. **Do you have any additional pension security?** 1. YES 2. NO

114. — if NOT, **do you plan to get any additional pension security?**
 1. YES, I do
 2. NO, I do not

115. — if YES, you plan to get some additional pension security, then of **what type ?** (*please underline the appropriate answer*)
 1. unit-linked life insurance
 2. investment (mutual trust) fund
 3. other type of security
 4. I don't know yet

116. — if YES, you plan to get some additional pension security, then **will it depend on any of the conditions listed below?**

116.1. contribution being paid by the employer	1. YES	2. NO	3. I HAVE NO OPINION
116.2. contribution being exempt from taxes	1. YES	2. NO	3. I HAVE NO OPINION
116.3. savings being exempt from taxes	1. YES	2. NO	3. I HAVE NO OPINION
116.4. I will save regardless of these allowances	1. YES	2. NO	3. I HAVE NO OPINION

ONLY FOR THE EMPLOYED (WORKING)

117. **If the employer proposed any additional form of remuneration, you would be most happy with** (*please choose at most TWO OPTIONS*):

- 1. a medical services plan (the employer pays for some medical services)
- 2. additional pension security (an employee pension plan)
- 3. sickness insurance
- 4. unit-linked life insurance
- 5. a bonus for gasoline
- 6. a mobile phone
- 7. money

118. Do you use at present any additional form of remuneration?

118.1. a medical services plan	1. YES	2. NO
118.2. additional pension security	1. YES	2. NO
118.3. unit-linked life insurance	1. YES	2. NO
118.4. a bonus for gasoline	1. YES	2. NO
118.5. a mobile phone	1. YES	2. NO
118.6. money	1. YES	2. NO

119. Do you take advantage of any group insurance provided by the employer? 1. YES 2. NO
120. — if YES, who pays the premium?
Provide the answer for each type of insurance by entering X in the appropriate row.
 The premium is paid by:

Insurance type	You (1)	The employer (2)
120.1. life insurance		
120.2. life insurance with investment fund		
120.3. accident insurance		
120.4. professional liability insurance		

ONLY FOR THE EMPLOYED AGED UP TO 50

121. Did you select an open fund?

1. I did not
2. I selected it and I did not change it
3. I selected it and I changed it

122. — if you did, **what did you take into consideration making the choice?** (you can underline more than one answer)

1. an advertisement of a given fund
2. confidence in a given fund
3. low payments
4. advice of a relative or friend
5. information obtained from a representative of a given fund
6. previous financial results of the fund
7. other reasons

ONLY FOR COMPUTER USERS

123. How do you assess your computer skills?

1. very good
2. good
3. average
4. low

124. How many hours did you spend using a computer last week? [_____]

125. Have you ever used the Internet or e-mail? 1. YES 2. NO

126. **Where do you use a computer?** (you can underline more than one answer)

1. at work
2. at home
3. at school/ university
4. at an Internet cafe/ club
5. at friends/ relatives

ONLY FOR INTERNET USERS

127. **Where do you use the Internet ?** (you can underline more than one answer)

1. at work
2. at home
3. at school/ university
4. at Internet cafe/ club
5. at friends/ relatives

128. **Who do you communicate with using the Internet?** (in the first column, enter persons that you ever contacted, and in the second – persons that you contacted last week; provide answers by entering a cross in the adequate rows)

	Ever (1)	Last week (2)
128.1. family		
128.2. work colleagues		
128.3. colleagues, friends that I also contact in ways other than via Internet		
128.4. persons that I do not have direct contact with		
128.5. persons that I met on the Internet		
128.6. persons with similar interests		
128.7. love interest		

129. **Please indicate whether you performed the tasks, listed below, while using the Internet?** (please read the list of things one can do using the Internet and mark with a cross things that you ever did and things that you did last week)

	Ever (1)	Last week (2)
129.1. receiving and sending e-mails		
129.2. instant messaging (e.g. ICQ, Gadu-Gadu, etc.)		
129.3. visiting chats		
129.4. visiting discussion groups or forums		
129.5. browsing Web pages		
129.6. gathering materials needed for school or work		
129.7. purchase of products via Internet		
129.8. accessing bank account via Internet		
129.9. participation in online auctions		
129.10. playing network games via Internet		
129.11. downloading free software, music or movies		
129.12. creating or modifying own Web page.		

130. How many hours did you spend last week using the Internet? [_____]

131. When did you start using the Internet? (please enter year) [_____]

WE ARE VERY THANKFUL FOR YOUR TIME.

**WE WOULD LIKE TO ASSURE YOU ONCE AGAIN THAT ALL INFORMATION PROVIDED BY YOU
WILL BE USED ONLY IN COLLECTIVE STATISTICAL SCIENTIFIC REPORTS**

for *THE COUNCIL FOR SOCIAL MONITORING*

Janusz Czapiński, Ph. D., professor of the University of Warsaw