

ANNEX 1 QUESTIONNAIRES AND INSTRUCTIONS FOR INTERVIEWERS

1. Household questionnaire

Subsequent number of questionnaire in voivodship **COUNCIL FOR SOCIAL MONITORING**

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SOCIAL DIAGNOSIS 2009*An independent study of the conditions and quality of life in Poland***PART I****A. HOUSEHOLD CHARACTERISTICS**0. Household status in the study

1. Territorial symbol voivodship district commune
3. Symbol of class of place of residence
4. Household identification number
- 4b. Number of households at a given address
5. Number of all household members

6. Number of all household members 7. Number of household members aged 15 or older prior to 1st March **B. INFORMATION ON THE INTERVIEW CONDUCTED**

1. Course of visits to the household dwelling

Subsequent visit number	Date of visit day/month	Beginning hour of visit	Duration of visit in minutes	Remarks
1				
2				
3				

2. Completion of interview with household:

1. interview completed
2. interview not completed

If the interview was not completed (answer no. 2), we move on to providing reasons (item 3), and if it was completed, we move on to the collective information on individual interviews (item 4).

3. Reason for failing to complete the interview*Choose one answer by circling the appropriate number.*

The interview was not completed, although the household was contacted, because:

1. the household cannot participate in research (old age, illness, alcohol abuse)
2. it is a household of foreigners (beyond the scope of research)
3. the household initially refused to participate in research (perhaps they will agree to participate in subsequent years)
4. the household refuses to participate in research now and in the future

It was not possible to contact the household, although its location was determined,, because:

5. the whole household was temporarily absent due to a stay abroad
6. the whole household was temporarily absent due to vacation
7. the whole household was temporarily absent for unknown reasons
8. there was nobody home

The location of the household was not determined because:

9. the address provided on the list could not be found (e.g. there is no such address, no inhabitants, liquidation of dwelling)

10. the household changed the place of residence and its new address could not be established

11. the interview was not completed due to other reasons (e.g. the household moved abroad, all household members moved to a collective accommodation facility)

4. Collective information regarding individual interviews (all household members who turned 16 prior to January 1st 2007 are subject to an individual interview)

4.1. Number of persons in household subject to individual interview

4.2. Number of individual interviews conducted

4.3. Number of individual questionnaires considered to be filled out improperly

5. Does the household agree to participate in research in the subsequent years? (Choose one answer by circling the appropriate number)

1 YES 2 NO 3 DO NOT KNOW YET

I hereby confirm that the information presented in the questionnaire was gathered in accordance with the provided research procedure

Day	month	year	Name of interviewer:		
		0 9			
Signature of interviewer			Checked by (name):		

C. HOUSEHOLD COMPOSITION

Household reference number

1 Person reference number ¹	2 Fixed reference number ²	3 First name of the household member							
1									
2									
3									
4									
5									
6									
7									
8									
9 (Additional Sheet 'C')									
10 (Additional Sheet 'C')									
11 (Additional Sheet 'C')									
12 (Additional Sheet 'C')									
1 Person reference number		1	2	3	4	5	6	7	8
4 Relationship to household head									
5 Family number									
6 Relationship to family head									
7 Date of birth	Day								
8	Month								
9	Year (last two digits)								
10 Gender (1-man, 2-woman)									
11 Marital status									
12 Education level completed (if 99 go to 15)									
13 Number of study years									
14 Specialization of completed education									
15 Education status (if 8 go to 18)									
16 Type of education services									
17									
18 Driving licence 1 YES, 2 NO; 8 – not applicable									

¹ The same numbers were attributed to the households interviewed in 2007; the following numbers were ascribed to persons who were not on the list.

² Fixed numbers refer only to households interviewed in 2007. The interviewed persons are to be attributed numbers from the first column. In the case of persons not on the list a blank space should be left.

19	Knowledge of foreign languages <i>actively</i> <i>passively</i> <i>none</i>	English																		
20		German																		
21		French																		
22		Russian																		
23		Spanish																		
24	Other																			
25	Does he/she have a mobile phone, a smartphone or a PDA? (1 YES a mobile phone, 2 YES a smartphone or a PDA, 3 has both devices, 4 NO, does not have any of these devices)																			
26	Does he/she have a payment card? (1 YES, 2 NO)																			
27	Disability 0, 1, 2, 3, 4, 5 go to 28; 8 go to 39																			
28	Type of illness (indicate max 3 diseases)																			
29																				
30																				
31	Does he/she receive a disability living allowance? (ask if 1, 2 or 3 in q. 27, in other cases go to 34)																			
32	Which illness is a basis for receiving the disability living allowance? (indicate one)																			
33	How long has the illness, which is the basis for receiving the disability leaving allowance, lasted? (0 – inborn, in other cases, indicate the number of years)																			
34	Does the disabled member of household require care?																			
35	Who helps/ cares for the disabled member of household? (mark X in columns of carers; if the carer does not belong to the household – see the instruction)																			
36	Which school does/has the disabled member of household attend/attended? (1 – comprehensive, 2 – special, 3 – mixed abilities or a mixed-abilities class, 8 – has never attended school)																			
37	Does the disabled member of household receive attendance allowance? 1 – YES, 2 – NO																			
38	Does the disabled member of household receive social insurance benefit? 1 – YES, 2 – NO																			
39	Source of income		Main																	
40				Additional	1															
41		2																		
42	Being present in the household (or not)																			
43	Reasons for temporary absence																			
44	Being a household member (or not)																			
45	Movement of persons in household		Date of arrival	Month																
46				Year																
47			Date of leave	Month																
48				Year																
49			Reason for arrival																	
50			Reason for leave																	
51	Status of being subject to an individual interview																			
52	Result of the individual interview																			

53. Reference number of person providing answers in the name of the household

D. ECONOMIC ACTIVITY OF HOUSEHOLD MEMBERS AGED 15 OR MORE

(definition of economic activity according to the BAEL; person reference number as in Part C)

1	Person reference number (the same as in PART C)							
2	Has this person performed any work, earned income, or helped without pay in any family business activity within the last 7 days? 1 YES go to 4, if 2 NO go to 3							
3	Has this person been an employee, been a self-employed or worked 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 5; if 2 NO go to 8							
4	How many hours did this person work during the last 7 days?							
5	What kind of work does this person perform in her/his main workplace?							
6	Is this person employed full-time? 1 YES go to 8; if 2 NO go to 7							
7	Why does this person work part-time?							
8	Is this person registered in the Labour Office? ? 1 YES go to 9, 2 NO go to 10							
9	Does this person receive unemployment benefit? 1 YES, 2 NO							
10	Has this person been seeking employment in the last 4 weeks? 1 YES (currently unemployed) go to 12; 2 YES (currently employed) or 5 NO (currently unemployed) go to 15; 3 NO (but she has already found one) go to 13; 4 NO (currently unemployed) go to 11							
11	Why is he/she not looking for a job?							
12	Is he/she ready to start working this or next week? 1 YES, 2 NO							
13	How long has this person been unemployed? (concerns also retirees and disability pensioners; if less than 2 years go to 19; if 2 years or longer go to 22; persons who have never worked in the "Years" row enter 97 and go to 23) (in months)	Years						
14		Months						
15	Ownership of the institution that employs this person (professionally active persons)							
16	Ownership of institution that is the additional employer of this person (professionally active persons)							
17	Is the main place of employment located in the city/town of residence? (professionally active persons) 1 YES, 2 NO							
18	Presently performed occupation							
19	Was this person registered in the Labour Office in the last 2 years? 1 YES, 2 NO go to 23							
20	How many times was this person registered in the Labour Office in the last 2 years?							
21	For how long, in total, was this person unemployed during the last 2 years (in months)?							
22	Occupation in the most recent place of employment (for the unemployed and the professionally inactive persons)							
23	Has this person participated in any activity associated with the raising of her/his professional qualifications or other skills in the last 2 years? 1 YES, 2 NO – go to 27							
24	Provide the type(s) (max three) of educational activity							
25								
26								
27	Did this person work abroad in the period of 2005–2009? 1 YES, 2 NO							
28	Did this person study abroad in the period of 2005–2009? 1 YES, 2 NO (if both 27 and 28 NO – go to 35)							
29	How many times did this person go abroad to work or study in the period of 2005 – 2009?							
30	In which countries did this person work or study? (if more than two, enter the two in which this person spent the longest time)							
31								
32	Provide the total time of working/ studying abroad 2005 – 2009 (in months)	Working						
33		Studying						
34	The reasons for this person's coming back from abroad after a stay in 2005-2009 longer than 6 months? (if this condition is not fulfilled, then leave a blank space)							
35	How long has this person worked in total (number of years)?							
36	How long has this person worked for their current employer (number of years; if less than a year, enter 1 year)							

37	In how many places (including temporary jobs) did this person work in years 2000 – 2009?						
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E. NUTRITION

I would like to ask about your household's ability to satisfy nutrition needs.

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

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

- | | | |
|--|--------------------------------|-------------------------------|
| 1.1. vegetables and vegetable preserves | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.2. fruit and fruit preserves | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.3. meat (including poultry) | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.4. meat and poultry preserves | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.5. fish and fish preserves | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.6. butter and other edible fats | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.7. milk | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.8. dairy products | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.9. sugar | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.10. confectionery (sweets, chocolate etc.) | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 1.11. tobacco and alcohol products | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |

2. In comparison with 2007, did the level of satisfaction of nutrition needs of your household:

Choose one answer by circling the appropriate answer.

1. worsen
2. improve
3. remain unchanged

F. AFFLUENCE OF HOUSEHOLD

Now I would like to ask whether you possess any property and/or savings and whether you take advantage of loans or financing.

1. Does your household have any savings? YES NO

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

2. What is the approximate amount of savings of your household?

Show CARD No. 1, ask for the selection of one variant and put a check mark in the square next to it.

- 1 up to the equivalent of the monthly income of the household
- 2 above the monthly – up to the equivalent of the 3-month income of the household
- 3 above the 3-month – up to the equivalent of the 6-month income of the household
- 4 above the 6-month – up to the equivalent of the 12-month income of the household
- 5 above the 12-month income of the household
- 6 hard to say

3. What is the form of your household savings

Provide separate answers for each the forms of savings and put a check mark in the square next to it.

- | | | |
|---|--------------------------------|-------------------------------|
| 3.1. bank deposits in PLN | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.2. bank deposits in foreign currencies | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.3. bonds | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.4. investment funds | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.5. Individual Pension Fund | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.6. securities quoted on the stock exchange | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.7. shares and stocks in private joint-stock companies | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.8. investment in real estate property | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.9. investment in goods other than real estate | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.10. cash | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 3.11. other | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |

4. What is the purpose of your household savings?

Provide separate answers for each form of savings and put a check mark in the square next to it.

- | | | |
|---|--------------------------------|-------------------------------|
| 4.1. a reserve for current consumer needs (such as food, clothes, shoes, etc) | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.2. regular charges (such as rent) | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.3. the purchase of durable goods | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.4. the purchase of a house, apartment, payment made to housing association | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.5. the renovation of your house/ apartment | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.6. medical treatment | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.7. the purchase, or lease of work tools (machines, rental charges, etc) | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.8. recreation | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.9. a reserve for random events | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.10. securing of your children's future | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 4.11. security for old age | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |

4.12. for other purposes 1 YES 2 NO

4.13. for no special purpose 1 YES 2 NO

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

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

6. Where did your household incur loans or financing? *Provide an answer for each of the sources of loans and financing listed below and put a check mark in the square next to it.*

6.1. from banks 1 YES 2 NO

6.2. from other institutions 1 YES 2 NO

6.3. from private persons 1 YES 2 NO

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

Show CARD No. 1, ask for the selection of one variant and put a check mark in the square next to it.

1 up to the equivalent of the monthly income of the household

2 above the monthly – up to the equivalent of the 3-month income of the household

3 above the 3-month – up to the equivalent of the 6-month income of the household

4 above the 6-month – up to the equivalent of the 12-month income of the household

5 above the 12-month income of the household

6 hard to say

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

Provide an answer for each of the purposes of credits and financing incurred listed below and put a check mark in the square next to it.

8.1. for current consumer expenses (such as food, clothes, shoes, etc) 1 YES 2 NO

8.2. regular charges (e.g. rent) 1 YES 2 NO

8.3. the purchase of durable goods 1 YES 2 NO

8.4. apartment/house purchase, payment made to housing association 1 YES 2 NO

8.5. the renovation of your house/ apartment 1 YES 2 NO

8.6. medical treatment 1 YES 2 NO

8.7. the purchase, or lease of work tools (machines, rental charges, etc) 1 YES 2 NO

8.8. recreation 1 YES 2 NO

8.9. the purchase of securities 1 YES 2 NO

8.10. the payment of previously incurred debts 1 YES 2 NO

8.11. the development of your own business activity 1 YES 2 NO

8.12. education 1 YES 2 NO

8.13. other purposes 1 YES 2 NO

9. *Provide an answer for each of the types of goods listed below by putting a checkmark in the right square or entering the number.*

Does your household or any of its members have the items of property listed below? It does not matter whether the item is 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 item, please indicate (the answer is provided in the column *If the household does not*) whether the household would like to have this item but cannot afford it due to financial reasons (answer YES), or the household does not have this item due to other than financial reasons, for instance, does not want to have or does not need it (answer NO). In the column *How many* enter the number for only three items (desktop computer, laptop, car, etc).

	Do you have:		If not, is it due to financial reasons:		How many
	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.1 washing machine	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.2 dishwasher	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.3 microwave oven	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.4 LCD or plasma TV	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.5 satellite or cable TV	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.6 DVD player	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.7 home cinema	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.8 summer cottage	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.9 desktop computer	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.10 portable computer (laptop, notebook)	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.11 passenger car (semi-truck)	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.12 Internet access at home through the computer, laptop or mobile phone	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.13 landline or stationary telephone (including voip- telephone services)	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.14 motorboat, sailboat	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	
9.15 plot for recreation	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	1 <input type="checkbox"/> YES	2 <input type="checkbox"/> NO	

10. In comparison with 2007, did the material situation of your household:

Choose one answer by circling the appropriate answer.

1. worsen

2. improve

3. remain unchanged

11. To what extent do you agree or disagree with the following statements?

	I completely disagree	I disagree	I neither agree nor disagree	I agree	I completely agree
11.1. During shopping, we care most about the quality of the product. The price is a secondary matter.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
11.2. In our household, we regularly meet with many friends and relatives.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
11.3. In our household, we like to spend a lot of money on technical devices.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
11.4. In our household, we are familiar with all the latest technical devices.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

12. Would you change the stationary or mobile telephone operator for an operator who offers combined services of stationary and mobile telephony and access to Internet? (*this question is asked if a household has a stationary telephone and the head of household has a mobile phone*)

- 1 no
 2 rather not
 3 neither yes nor no
 4 rather yes
 5 yes

13. If there is a computer (desktop computer or a laptop) in the household, when was it bought or modernised? (*provide the last two digits of the year*)

purchase modernisation

14. If there is a computer (desktop computer or a laptop) in the household, when was it bought? (*provide the last two digits of the year*)

G. HOUSING CONDITIONS

Now I would like to talk about your housing conditions.

1. Does your household live in its own separate dwelling? 1 YES 2 NO

2. What is the usable dwelling space of your household in m²?

3. I would also like to ask about the installations with which your dwelling is equipped. Does your dwelling have: *Provide an answer with regard to each of the installation and equipment types by putting a checkmark in the right square.*

- 3.1. a water-supply system 1 YES 2 NO
 3.2. a flushable toilet that uses running water 1 YES 2 NO
 3.3. a bathroom with a bathtub or shower 1 YES 2 NO
 3.4. hot running water 1 YES 2 NO
 3.5. gas from a supply system 1 YES 2 NO
 3.6. gas from a cylinder 1 YES 2 NO

4. How is the apartment heated? *Choose one answer by putting a checkmark in the right square.*

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

5. Does your household have at present any overdue payments with regard to: *Provide an answer for each of the payments listed by filling the appropriate square:*

Variants: 1 - yes 1 month, 2 - yes 2 months, 3 - yes 3 months, 4 - yes 4-6 months, 5 - yes 7-12 months, 6 - yes more than 12 months, 7 - no, 8 - not applicable.

- 5.1. rent payments for your apartment 1 2 3 4 5 6 7 8
 5.2. gas or electricity charges 1 2 3 4 5 6 7 8
 5.3. the payment of a housing credit 1 2 3 4 5 6 7 8

6. In comparison with 2007 did the housing conditions of your household: *Please select one of the variants of the answer by putting a checkmark in the appropriate square.*

1. worsen
 2. improve
 3. remain unchanged

H. EDUCATION

Now I would like to ask you about the education of children.

NOTE: QUESTIONS 1 TO 5 PERTAIN ONLY TO HOUSEHOLDS WITH CHILDREN AGED 26 OR LESS

1, 2, 3. What level of education would you like your children to attain and is there a chance it will happen?

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”(Show CARD No. 2).

education level

- 1 vocational school
 2 profile-oriented (general education) secondary school
 3 vocational college or secondary school
 4 university (bachelor)
 5 university (masters)

assessment of chances:

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

1. Child number*	2. Education level	3. Assessment of chances
1.1. <input type="checkbox"/> <input type="checkbox"/>	2.1. <input type="checkbox"/>	3.1. <input type="checkbox"/>
1.2. <input type="checkbox"/> <input type="checkbox"/>	2.2. <input type="checkbox"/>	3.2. <input type="checkbox"/>
1.3. <input type="checkbox"/> <input type="checkbox"/>	2.3. <input type="checkbox"/>	3.3. <input type="checkbox"/>
1.4. <input type="checkbox"/> <input type="checkbox"/>	2.4. <input type="checkbox"/>	3.4. <input type="checkbox"/>
1.5. <input type="checkbox"/> <input type="checkbox"/>	2.5. <input type="checkbox"/>	3.5. <input type="checkbox"/>
1.6. <input type="checkbox"/> <input type="checkbox"/>	2.6. <input type="checkbox"/>	3.6. <input type="checkbox"/>

* The child number should correspond with the number of the person listed in part C row 1

4, 5. Does your child use the computer and Internet? (show CARD No 3)

- 1 Yes, but only with other household members
 2 Yes, it uses them on its own
 3 No it cannot use them because of the illness
 4 No, but it can use the computer/Internet
 5 No it does not have access to the computer/Internet
 6 No, it is too young

1. Child number*	2. The use of computer	3. The use of Internet
1.1. <input type="checkbox"/> <input type="checkbox"/>	4.1. <input type="checkbox"/>	5.1. <input type="checkbox"/>
1.2. <input type="checkbox"/> <input type="checkbox"/>	4.2. <input type="checkbox"/>	5.2. <input type="checkbox"/>
1.3. <input type="checkbox"/> <input type="checkbox"/>	4.3. <input type="checkbox"/>	5.3. <input type="checkbox"/>
1.4. <input type="checkbox"/> <input type="checkbox"/>	4.4. <input type="checkbox"/>	5.4. <input type="checkbox"/>
1.5. <input type="checkbox"/> <input type="checkbox"/>	4.5. <input type="checkbox"/>	5.5. <input type="checkbox"/>
1.6. <input type="checkbox"/> <input type="checkbox"/>	4.6. <input type="checkbox"/>	5.6. <input type="checkbox"/>

* The child number should correspond with the number of the person listed in part C row 1; copy from the table above

NOTE: QUESTIONS 1 TO 5 PERTAIN ONLY TO HOUSEHOLDS WITH CHILDREN AT SCHOOL AGE (over reception class)

6. Have you been forced for financial reasons to:

Provide an answer with regard to each of the resignation type by putting a checkmark in the right square.

- 6.1. withdraw from enrolling your child to extra-curricular activities? 1 YES 2 NO
 6.2. withdraw or suspend school fees? 1 YES 2 NO
 6.3. withdraw your child from using school's dining services? 1 YES 2 NO
 6.4. withdraw your child from private lessons? 1 YES 2 NO
 6.5. change school for a one with lower or no fees? 1 YES 2 NO
 6.6. other limitations? 1 YES 2 NO

7. In comparison with 2007 did the satisfaction of needs of your households associated with children's education: Please select one of the variants of the answer by putting a checkmark in the appropriate square.

1. worsen
 2. improve
 3. remain unchanged

I. SOCIAL ASSISTANCE

Now I would like to ask you about the assistance for your household.

1. Does the household receive assistance? 1. YES 2. NO

If the household receives Assistance, we go to question 2, if not, we go to Section J Culture and Recreation

2. What is the form of assistance for the household? Provide answers independently for each of the forms of assistance listed below by putting a checkmark in the appropriate square.

- 2.1. financial 1 YES 2 NO
 2.2. material 1 YES 2 NO
 2.3. services 1 YES 2 NO

J. CULTURE AND RECREATION

Now I would like to talk to you about matters associated with culture and recreation.

1. Within last year, have any of your household members, due to the lack of money, had to abstain from:

Provide a separate answer for each category listed below by putting a checkmark in the right square. Answer NOT APPLICABLE means no needs of a given type.

- | | | | |
|--|---------------------------------|--------------------------------|--|
| 1.1. cinema | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO | 3. <input type="checkbox"/> NOT APPLICABLE |
| 1.2. theatre, opera, operetta, concert | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO | 3. <input type="checkbox"/> NOT APPLICABLE |
| 1.3. museum or exhibition | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO | 3. <input type="checkbox"/> NOT APPLICABLE |
| 1.4. the purchase of a book | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO | 3. <input type="checkbox"/> NOT APPLICABLE |
| 1.5. the purchase of newspapers, magazines | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO | 3. <input type="checkbox"/> NOT APPLICABLE |

2. How many books (approximately) do you have at home (excluding textbooks and instruction manuals)?

- 1 none
 2 less than 25 volumes
 3 26-50 volumes
 4 51-100 volumes
 5 101-500 volumes
 6 more than 500 volumes

3. In comparison with 2007 did the fulfilment of needs of your household with regard to culture: *Choose one answer by putting a checkmark in the right square*

1. worsen
 2. improve
 3. remain unchanged

4. 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 putting a checkmark in the right square. Answer NOT APPLICABLE means no needs of a given type.

- | | | | |
|--|--------------------------------|---|---|
| 4.1. a summer camp or a trip for your (under-age) children | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO, children went for holidays | 3 <input type="checkbox"/> NOT APPLICABLE |
| 4.2. holidays or trips for adults | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO, the adults went for holidays | 3 <input type="checkbox"/> NOT APPLICABLE |
| 4.3. family trips (adults and children) | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO, the family went for holidays | 3 <input type="checkbox"/> NOT APPLICABLE |

5. In comparison with 2007 did the fulfilment of needs of your household with regard to recreation: *Choose one answer by putting a checkmark in the right square*

1. worsen
 2. improve
 3. remain unchanged

K. HEALTH CARE

Now I would like to ask you about issues associated with health care.

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

Provide answers pertaining to each of the units listed below by putting a checkmark in the right square.

- | | | |
|--|---------------------------------|--------------------------------|
| 1.1. health care units rendering services paid for by the National Health Fund (NFZ) | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO |
| 1.2. units rendering services paid for from your own pocket | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO |
| 1.3. units paid by an employer who pays for a medical services plan | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO |
| 1.4. units paid by charity organizations/ other persons | 1. <input type="checkbox"/> YES | 2. <input type="checkbox"/> NO |

2. Was any member of your household hospitalized within the last year? (for other reasons than pregnancy)

1. YES 2. NO

If any member of the household used the services of health care units (hospitalization, sanatorium, rehabilitation, medical analyses, visits to the doctor/ dentist etc.) in the last 3 months, go to question 3, otherwise go to question 4.

3. During the last 3 months, the household paid a total of (PLN) for:

- 3.1. the purchase of outpatient medical services in healthcare units (including the non-standard services of dentists, orthodontists, payment for orthopaedic equipment, partly financed by the by the National Health Fund) PLN
- 3.2. informal payments, that is, the so-called gifts of gratitude aimed at obtaining better or faster service PLN
- 3.3. gifts of sincere gratitude for services already rendered PLN
- 3.4. treatment at a private or public hospital where costs of treatment were covered by the respondent within the confines of the official purchase of medical services PLN
- 3.5. payments made at a public hospital (contributions, payments for services rendered by nurses during night duty hours, the purchase of medications for a patient treated at a hospital) PLN

4. Please specify how much money has been spent in the last 3 months in your households on medications and other pharmaceutical articles associated with an illness in your household (in PLN)? PLN

5. Did you encounter the following situations in your household during the last year: *Provide a separate answer for each situation listed below by putting a checkmark in the right square*

- 5.1. did you not have enough money to buy medications prescribed or recommended by the doctor
1 YES 2 NO 3 THERE WAS NO SUCH NEED
- 5.2. due to the lack of money, did you fail to treat your teeth
1 YES 2 NO 3 THERE WAS NO SUCH NEED
- 5.3. due to the lack of money, did you have to give up dental prostheses
1 YES 2 NO 3 THERE WAS NO SUCH NEED
- 5.4. due to the lack of money, did you have to give up doctor's appointments
1 YES 2 NO 3 THERE WAS NO SUCH NEED
- 5.5. due to the lack of money, did you have to give up medical tests (lab tests, X-ray, ECG)
1 YES 2 NO 3 THERE WAS NO SUCH NEED
- 5.6. due to the lack of money, did you have to give up rehabilitation treatment
1 YES 2 NO 3 THERE WAS NO SUCH NEED
- 5.7. due to the lack of money, did you have to give up a stay at a sanatorium
1 YES 2 NO 3 THERE WAS NO SUCH NEED
- 5.8. due to the lack of money, did you have to give up hospital treatment
1 YES 2 NO 3 THERE WAS NO SUCH NEED?

6. In comparison with 2007, did the fulfilment your household healthcare needs: *Choose one answer by putting a checkmark in the right square*

1. worsen
2. improve
3. remain unchanged?

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 contribute any income (from any source) to the common budget.

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

if you refuse to answer – please provide the range

2. Please assess the amount of the average net income in your household in year 2008

if you refuse to answer – please provide the range

3. Is your household able to make ends meet at your present income level: *Select one answer and put a checkmark in the appropriate square.*

- 1 with great difficulty
2 with difficulty
3 with some difficulty
4 easily
5 with great ease

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

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

Show CARD No. 4, ask for the selection of one answer and put a checkmark in the appropriate square.

- 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

6. In comparison with 2007 did the income situation of your household: *Choose one answer by putting a checkmark in the right square*

1. worsen
2. improve
3. remain unchanged

7. Is the regular income of your household sufficient to satisfy your needs? 1. YES 2. NO

If the income is not sufficient to satisfy your current needs, go to question 8, if it is – go to Section M.

8. What actions does your household undertake in order to fulfil the current needs? *A separate answer is to be provided for each activity by putting a checkmark in the appropriate square.*

- 8.1. takes advantage of savings made 1. YES 2. NO
8.2. sells off or pawns property owned (material goods) 1. YES 2. NO
8.3. limits the current needs 1. YES 2. NO
8.4. takes loans or financing 1. YES 2. NO

- 8.5 takes advantage of the assistance of relatives 1. YES 2. NO
 8.6 takes advantage of the assistance of the church/ Caritas 1. YES 2. NO
 8.7. takes advantage of social assistance 1. YES 2. NO
 8.8. a household member undertakes additional work 1. YES 2. NO
 8.9. undertakes other activities 1. YES 2. NO
 8.10. undertakes no activity 1. YES 2. NO

M. COMPUTERS AND THE INTERNET

Now I would like to talk to you about the issues associated with computers and the Internet.

Question 1 applies to all the households

1. At present, it is becoming possible to deal with an increasing number of matters on the Internet. Listed below are various official matters which can be dealt with over the Internet. If there were such possibilities, how would you like to deal with these issues? *Show CARD No. 5. Please mark the answers by putting a checkmark in the square next to the appropriate number from 1 to 4. The meaning of each number is as follows:*

1. *I do not need the Internet to deal with this*

2. *On the Internet, I would only like to get information or download the appropriate forms and then deal with the matters in the traditional way*

3. *I would like to have the possibility of dealing with it entirely over the Internet (including payment)*

4. *I do not expect to deal with such matters*

1.1. Tax statements	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.2. Labour Office services concerning job offers	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.3. Issues associated with benefits and allowances (e.g. unemployment benefits, family benefits, scholarships)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.4. Issues pertaining to personal documents (such as passport, identity card, driving license)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.5. Car registration	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.6. Building permits	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.7. Police, City guards, prosecutor's office – reporting on crimes and complaints	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.8. Access to public libraries (searching through catalogues, borrowing books)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.9. Ordering and receiving certificates or copies of documents (birth certificate, marriage certificate)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.10. Crèche, kindergarten, school and university registration	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.11. Change of permanent address	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.12. Official issues associated with business operations	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.13. Health related services (e.g. information on available services at healthcare units, waiting times for a doctor's appointment, hospital or sanatorium admittance, dates and places or rendering healthcare services)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.14. Dealing with matters associated with religious beliefs and activity of the Church	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>
1.15. Other official matters (courts, commune offices, district, voivodship or central offices)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/>

Questions 2, 3, and 4 apply to households with computers and access to Internet (answer YES to the question F. 9.12)

2. For how long have you had the Internet at home? *Please provide the installation year.*

3. How do the members of your household connect to the internet at home? (*more than one answer is acceptable*)

3.1. dial-up modem (you cannot use the phone and the internet simultaneously)

3.2. permanent access from a landline phone operator - *Neostrada*

3.3. permanent access from a landline phone operator (*Netia, Dialog, etc.*)

3.4. permanent access provided by a cable TV operator

3.5. other permanent access, such as the local areal network, access from a local provider or a shared connection in the neighbourhood

3.6. permanent access provided by a mobile phone operator, e.g. *BlueConnect, iPlus* or *Twój Internet, Business Everywhere Orange*

3.7. Internet access through your mobile phone (modem in the mobile phone)

3.8. other

4. If the household has a permanent Internet link, what is the speed?

1 128 kb/s 5 1Mb/s 9 hard to say

2 256 kb/s 6 2Mb/s

3 320 kb/s 7 6Mb/s

4 512 kb/s 8 higher than 6Mb/s

Question 5 pertains to households without access to the Internet (NO in question F.9.12)

5. Which of the reasons best describes why your household does not have Internet access?

Show CARD No. 6; 3 possibilities can be selected at most by putting checkmarks in the right squares.

1. the lack of adequate equipment

2. the lack of technical possibility of getting the permanent access to Internet

3. sufficient ability to use the Internet elsewhere

4. we do not need the Internet

5. it has nothing interesting to offer
 6. fear of losing privacy when using the Internet
 7. the Internet may be harmful, for instance, it may demoralise children and take up too much time
 8. the access cost is too high
 9. the lack of adequate skills to use it
 10. other reasons
 11. we are planning to get it this year

N. DISABILITY

THE PRESENT SECTION APPLIES ONLY TO HOUSEHOLDS WITH A DISABLED MEMBER WITH DISABILITY LIVING ALLOWANCE (in C27 symbol 1, 2 or 3)

1. Does your household have any expenses related to the disability? 1. YES 2. NO

2. If 1 YES, what was the approximate amount of expenses:
 if more than 99.000 enter 99 000, if no expenses enter 0, if no answer enter 99 999

for medical treatment (including medicines) PLN
 for rehabilitation treatment PLN
 for equipment, devices, etc. PLN
 other PLN

3. Does the disabled person work 1. YES 2. NO

4, 5 If 3 YES, does he/she work in a supported employment enterprise or on a position adapted to disabled people?

1. Person number*	2. The person works in a supported employment enterprise or on a position adapted to disabled people
4.1. <input type="checkbox"/> <input type="checkbox"/>	5.1. 1. <input type="checkbox"/> YES 2 <input type="checkbox"/> NO
4.2. <input type="checkbox"/> <input type="checkbox"/>	5.2. 1. <input type="checkbox"/> YES 2 <input type="checkbox"/> NO
4.3. <input type="checkbox"/> <input type="checkbox"/>	5.3. 1. <input type="checkbox"/> YES 2 <input type="checkbox"/> NO

* The person number should correspond with the person reference number in Part C, row 1.

6, 7 How do you help the disabled member of your household?

(mark the answers by putting a checkmark in the square next to the appropriate number from 1 to 4 in the columns ascribed to a given person; show CARD No. 7)

SCOPE OF ASSISTANCE

- 1 we do not help at all, he/she performs this activity unaided
 2 he/she performs this activity with little help
 3 he/she performs this activity with great help
 4 he/she does not perform this activity (not applicable)

Activities	Person number*		
	6.1 <input type="checkbox"/> <input type="checkbox"/>	6.2 <input type="checkbox"/> <input type="checkbox"/>	6.3 <input type="checkbox"/> <input type="checkbox"/>
7.1. washing himself/herself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.2. getting dressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.3. eating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.4. cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.5. preparing food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.6. washing the dishes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.7. doing shopping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.8. commuting from the place of residence to school/ work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.9. visits to the doctor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.10. going for holidays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* The person number should correspond with the person reference number in Part C, row 1.

QUESTIONS 8-11 APPLY TO HOUSEHOLDS WITH A DISABLED MEMBER AGED 26 OR LESS. IF THERE ARE MORE THAN ONE DISABLED CHILDREN, THE QUESTIONS REFER TO THE OLDEST ONE

8. Has the disabled child gone for holidays without parents and other relatives?

- 8.1. for holidays with friends 1. YES 2. NO
 8.2. for rehabilitation camps 1. YES 2. NO
 8.3. for group trips 1. YES 2. NO

9. How do you assess the chances of your child getting a job which provides him/her financial independence?

- 1 it has already achieved this level (go to 11)
 2 a great chance (go to 11)
 3 a moderate chance
 4 a little chance
 5 no chance

10. Why in your opinion does your child have only moderate or lower chances of getting a job which gives him/her financial independence? *Please indicate the most important reason:*

- 1 the type of disability does not allow/ will not allow it
- 2 he/she does not have/ will not acquire sufficient qualifications
- 3 the local labour market does not offer work opportunities for such a person
- 4 other reasons

11. Talking from your experience, do you agree with the following statements regarding disabled people:

- | | | |
|---|--------------------------------|-------------------------------|
| 11.1. They remain dependant to on other people throughout their life | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 11.2. They should have special privileges at school | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 11.3. They have difficulties making contact with others | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 11.4. They should be helped to make contact with others | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 11.5. They should live with parents/ carers as long as possible | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 11.6. They should try to live as independently as possible | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 11.7. They should work even part-time | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 11.8. Work can help them integrate with other people | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |
| 11.9. The state should provide them all types of financial benefits and care allowances | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO |

THANK YOU FOR YOUR TIME

2. Individual questionnaire

Assigned questionnaire number in the voivodship (same as in Part I)

COUNCIL FOR SOCIAL MONITORING

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SOCIAL DIAGNOSIS 2009

Independent study of conditions and quality of life in Poland

PART II Individual questionnaire

WOMAN³

Household identification number (same as in Section I C)

Person number (copy from Section I C) Fixed number (copy from Section I C)

Name (copy from Section I 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 even if some questions are difficult. Please answer them as accurately as you can.

At some point 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 from one topic to another because the sets of questions have been put in a random order.

Your 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 the 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 to kindly 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.

INSTRUCTIONS

In questions which it is necessary to select one or more answers, please mark your choice by placing a checkmark next to the selected answer. In questions which we ask for your assessment, please write the appropriate number in the square. If the scale of assessment for the question looks like this:

1	2	3	4	5	6	7
completely						very
not important						important

Then the intermediate numbers (2, 3, 4, 5, 6) mean that the lower the number, the less important a given issue is (2 is less important than 3) and the greater the number, the more important the issue is (6 more important than 5).

In questions which a numerical value should be provided, please put it in the correct squares, making sure that the last digit is in the last square.

³ The questionnaire was prepared in two versions, for female and male respondents.

1. Your **date of birth**
 Day Month Year

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

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, could you say it was.... (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 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 husband)

5. The expectations of your husband toward you were so great you were unable to meet them
 1 OFTEN 2 IT HAPPENED 3 NEVER 4 NOT APPLICABLE
6. Your 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 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 (from school, from neighbours, 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 over your children
 1 OFTEN 2 IT HAPPENED 3 NEVER 4 NOT APPLICABLE
13. You had too little time for your children
 1 OFTEN 2 IT HAPPENED 3 NEVER 4 NOT APPLICABLE

In the recent months:

14. You felt that your source of income was unstable and uncertain
 1 OFTEN 2 IT HAPPENED 3 NEVER 4 NOT APPLICABLE (lack of income)
15. 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)

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

In the recent months:

19. You had a feeling that the place you live in was overcrowded; for instance too many people live in your apartment, neighbouring apartments, the whole building

1 OFTEN 2 IT HAPPENED 3 NEVER

20. You were afraid of crime, drug addiction, or hooliganism within your district, housing estate, or vicinity

1 OFTEN 2 IT HAPPENED 3 NEVER

21. Problems associated with neighbours 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:

22. You suffered from a physical indisposition, such as bones aching or shortness of breath which made it difficult to walk about, climb the stairs, etc.

1 OFTEN 2 IT HAPPENED 3 NEVER

23. 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:

24. You had to deal with some formal matters

1 YES 2 NO (if NO, please go to question 28)

25. You were not able to deal with a formal matter efficiently, quickly and easily

1 OFTEN 2 IT HAPPENED 3 NEVER

26. You had to search for friends or other ways in order to deal with a formal matter

1 OFTEN 2 IT HAPPENED 3 NEVER

27. You felt completely helpless and humiliated when dealing with a formal matter

1 OFTEN 2 IT HAPPENED 3 NEVER

28. Did you vote during the last parliamentary election in 2007? 1 YES 2 NO

29. Do you use a mobile phone? 1 YES 2 NO

During the last year, did you:

30. Undertake a more profitable or an additional job 1 YES 2 NO

31. Invest some money in production, trade or services 1 YES 2 NO

32. Make some money on stocks, bonds or transfer of money between bank accounts 1 YES 2 NO

33. Acquire new qualifications or skills with better earnings in mind 1 YES 2 NO

34. How would you evaluate your material situation at present?

1. GREAT

2. VERY GOOD

3. GOOD

4. NEITHER GOOD NOR BAD

5. NOT TOO GOOD

6. BAD

7. TERRIBLE

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

1. VERY HAPPY

2. RATHER HAPPY

3. NOT TOO HAPPY

4. UNHAPPY

36. During the last year, did you take advantage of the services of the health care units:

36.1. paid for by the National Health Fund 1 YES 2 NO

36.2. paid for from your own pocket 1 YES 2 NO

36.3. paid for by an employer who paid for a medical services plan 1 YES 2 NO

37. How often within the last few months were you so depressed that you thought about suicide?

1. VERY OFTEN

2. QUITE OFTEN

3. RARELY

4. NEVER

38. Do you feel loved and trusted? 1 YES 2 NO

39. How often, on average, during the month, do you participate in sermons or other meetings of religious character? (if less often than once a month – please enter 0) times a month

40. How many people do you consider to be your friends?

41. How strong is your willingness to live these days? (please put a checkmark in the appropriate square)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1	2	3	4	5	6	7	8	9	10
I do not want to live at all								I want to live very much	

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

43. Do you believe that reforms in Poland after year 1989 were successful or unsuccessful?

1. successful
 2. unsuccessful
 3. hard to say

44. Has the accession of Poland to the European Union had any influence on your life? 1 YES 2 NO

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

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

46. Do you smoke cigarettes? 1 YES 2 NO

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

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

49. In the last two years, did you engage in any activities in your community? (commune, housing estate, town, neighbourhood) 1 YES 2 NO

50. Please specify how you usually react to troubles and difficult situations in your life: (you can choose more than one answer, putting a checkmark in the appropriate square)

- 50.1. I turn to others for advice
 50.2. I pull myself together and take action
 50.3. I start using alcohol
 50.4. I tell myself that it could be worse or that others face even worse situations
 50.5. I give up, I do not know what to do
 50.6. I use tranquilizers
 50.7. I pray to God for assistance
 50.8. I get occupied with other things which divert my attention from problems and make me feel better

51. What was the education level of your father (or main guardian), when you were 14?

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

52. In the last year, did you attend a public meeting (but not at work)? 1 YES 2 NO

53. - If yes, did you speak during the meeting? 1 YES 2 NO

54. In the last year, did you participate in preparing or conducting of meeting (outside work)? 1 YES 2 NO

55. Listed below in the fields separated by lines N, O, P etc., we describe various categories of feelings and behaviours. Please read each group of four 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. Mark your selection by putting a checkmark in the appropriate circle next to number 0, 1, 2 or 3.

- 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. I have as much energy as ever to work.
 1. I have less energy than I used to have.
 2. I don't have enough energy to do 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 tired or fatigued more easily than usual.
 2. I am too 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 any more than I used to be.
 1. I am worried about such ailments as: stomach pains, upset stomach, 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.

56. Provided below are several statements. Please assess to what extent they are consistent with your beliefs and attitudes. Please mark the assessments by entering the selected digit in the square next to each statement. The meaning of each digit is as follows:

1 – DEFINITELY YES

2 – YES

3 – RATHER YES

4 – NEITHER YES NOR NOT

5 – RATHER NOT

6 – NO

7 – DEFINITELY NOT

- 56.1. I admire people who have expensive houses, cars and clothes.
56.2. My life has sense and is valuable, despite painful experiences
56.3. The most important thing is a life full pleasures
56.4. The measure of success in life is the state of ownership of various material goods
56.5. I like to have things that others envy
56.6. I like to buy things of no practical use
56.7. Shopping itself gives me a lot of joy
56.8. In order to be successful in life, you have to sometimes disregard other people's interests
56.9. I have a lot of energy now
56.10. People mainly try to help others
56.11. Homosexuals should be able to live according to their beliefs
56.12. Criminals should not have the same rights as honest people
56.13. A real patriot should not speak badly about Poles and Poland
56.14. The situation in the country would be better, if we did not care so much of treating everybody equally
56.15. Foreigners in our country have too strong influences
56.16. I wait impatiently for what the next day will bring
56.17. The groups wronged by fate (the blind, the deaf-mute, people on wheelchairs) have developed an attitude of entitlement and focus too much on their privileges
56.18. Some people are just more worthy than others
56.19. I would like to be attractive and look good
56.20. In an ideal world, all nations would be equal
56.21. I attach great importance to material goods
56.22. We should do our best to treat people equally
56.23. I want to gain some friends
56.24. Some groups of people do not deserve respect
56.25. Most people would take advantage of me, if they could
56.26. We should aim at making the incomes of all people more or less equal
56.27. Without physical punishment, it is impossible to bring up children well

57. Taking all into account, do you believe that the last year was successful in your life? 1 YES 2 NO

58. Who or what was the cause that the previous year was a good one or a bad one in your life? (more than one answers are acceptable)

58.2. myself

58.4. fate (providence)

58.1. authorities

58.3. other people

59. Listed below are several ailments associated with health conditions. Please specify whether you suffered from any of them within the LAST MONTH. If you did not suffer from it at all during the 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
59.1. strong headaches	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.2. stomach pains or flatulence	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.3. pain or tension in the neck or arm muscles	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.4. chest or heart pains	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.5. dry mouth or throat	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.6. attacks of excessive sweating	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.7. shortness of breath	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.8. shortness of breath	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.9. accelerated heartbeat (palpitation)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.10. shivers or convulsions	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.11. pressure on the bladder and more frequent urinating	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.12. a feeling tiredness not associated with work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.13. constipation	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.14. nosebleeds	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
59.15. sudden changes of blood pressure	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

60. In general, do you believe that most people can be trusted or are you of the opinion that one can never be too careful 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

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

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

62. — if YES, have you ever performed any functions in such organizations? 1 YES 2 NO

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

64. We would like you to now evaluate 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 – SOMEWHAT SATISFIED
 4 – SOMEWHAT UNSATISFIED
 5 – UNSATISFIED
 6 – VERY UNSATISFIED
 7 – not applicable

To what extent are you satisfied with:

64.1. your relations with close family members	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.2. the financial situation of your family	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.3. the financial situation of your family	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.4. the present income of your family	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.5. your ability to fulfil nutrition needs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.6. health	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.7. what you are accomplishing in life	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.8. the situation in the country	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.9. housing conditions	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.10. your place of residence	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.11. goods and services you can get	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.12. what the future seems to hold for you	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.13. your sex life	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.14. education	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.15. ways of spending leisure time	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.16. moral standards in you community	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.17. work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.18. children	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.19. marriage	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
64.20. safety in the place of residence	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

65. Below, you will find a number of different behaviours listed. Some may pertain directly to you; others may pertain only to other people. By circling one of the responses, please indicate which of the following behaviours bother you personally and which do not. Please enter the appropriate number from 1 to 5 in the square next to each of the described behaviours. The meaning of the numbers is as follows:

- 1 – I DO NOT CARE ABOUT IT AT ALL
 2 – I CARE LITTLE ABOUT IT
 3 – I CARE ABOUT IT TO SOME EXTENT
 4 – I CARE ABOUT IT VERY MUCH
 5 – IT IS HARD TO SAY

How much do you care if:

- 65.1. Someone pays less tax than she/he ought to.
 65.2. Someone avoids paying for the use of public transport (e.g. busses, trains, trams).
 65.3. Someone is able not to pay for electricity.
 65.4. Someone collects unemployment insurance longer than regulations allow
 65.5. Someone does not pay administration fees for his/her apartment (despite being able to).
 65.6. Someone imports goods from abroad and does not pay duty.

66. Your own personal net monthly income average from the last three months amounted to: PLN

67. What personal net monthly income do you expect to get in two years? PLN

68. How much time did you spend watching TV on average in the last week?

1. I do not watch TV
 2. less than one hour
 3. one to two hours
 4. two to three hours
 5. three to four hours
 6. above four hours

69. In the past month, did you go:

- 69.1. to the cinema, theatre or a concert
 69.2. to a restaurant, café, pub
 69.3. for a meeting with friends
 69.4. for a birthday, name-day or other party

IN THE PAST YEAR:

70. I visited a psychologist (psychiatrist) 1 YES 2 NO
 71. I drank too much alcohol 1 YES 2 NO
 72. I tried drugs 1 YES 2 NO
 73. I lost a close acquaintance 1 YES 2 NO
 74. I could not find a job after graduating from school 1 YES 2 NO 3 NOT APPLICABLE
 75. I was shifted to a lower position at work 1 YES 2 NO 3 NOT APPLICABLE
 76. I missed a promotion at work 1 YES 2 NO 3 NOT APPLICABLE
 77. I was promoted 1 YES 2 NO 3 NOT APPLICABLE
 78. I had serious problems with my superior 1 YES 2 NO 3 NOT APPLICABLE
 79. I started my own business 1 YES 2 NO
 80. I lost a lot of money doing business 1 YES 2 NO 3 NOT APPLICABLE
 81. I fell victim to a theft 1 YES 2 NO
 82. I fell victim to mugging 1 YES 2 NO
 83. Somebody broke into my car or house 1 YES 2 NO
 84. I was accused of a criminal offence 1 YES 2 NO
 85. I was detained by the police 1 YES 2 NO
 86. I was accused in a civil case 1 YES 2 NO
 87. I caused a collision or a car accident 1 YES 2 NO
 88. A close friend/relative was detained or broke the law 1 YES 2 NO
 89. I was discriminated against due to my nationality, appearance, beliefs, or due to other reasons 1 YES 2 NO
 90. My apartment (house) was seriously damaged 1 YES 2 NO
 91. My apartment (house) was renovated 1 YES 2 NO
 92. I had problems with the owner or manager of the building in which I live 1 YES 2 NO 3 NOT APPLICABLE
 93. I fell seriously ill 1 YES 2 NO

94. What, in your opinion, is the most important in life?

1. pleasures, affluence, the lack of stress
 2. a feeling of sense, achieving important objectives despite difficulties, pain and sacrifices

95. Do you plan to go abroad to work in the next two years?

1. YES, to a European Union country; *provide the name of the country*
2. YES, to a country outside the European Union; *provide the name of the country*.....
3. NO

96. — if YES, for how long?

1. no longer than one year
2. one to two years
3. more than two years
4. permanently
5. it depends on how I will be doing abroad

97. Do you plan to go abroad within the next two years to study there?

1. YES, to a European Union country; *provide the name of the country*
2. YES, to a country outside the European Union; *provide the name of the country*.....
3. NO

98. — if YES, for how long?

1. no longer than one year
2. one to two years
3. more than two years
4. permanently
5. it depends on how I will be doing abroad

99. What, in your opinion, is the most important in a professional career? (Please read all answers and select no more than 3, putting a checkmark in the squares next to them)

1. The lack of tension and stress
2. A high level of independence
3. The possibility of personal development
4. Work consistent with skills
5. The possibility of a quick promotion
6. Employment stability
7. Favourable work hours
8. The possibility of working at home
9. Long leave
10. Job respected by others
11. Good remuneration
12. Other factors

100. What solutions would make it easier to reconcile work and family duties, including parenting? Please enter the appropriate number from 1 (the most important solution) to 10 (the least important solution)

- 100.1 part-time job
- 100.2 shift work
- 100.3 flexible work hours
- 100.4 possibility of doing some of the work at home
- 100.5 more days off during the week
- 100.6 longer maternity leave
- 100.7 longer paid parental leaves
- 100.8 higher benefits (family, children, etc.)
- 100.9 better opportunities of providing care outside home to children aged 7 or less (more crèches and kindergartens near your home, adjustment of time of crèche and kindergarten care to the working hours of the parents)
- 100.10 better opportunities of providing care outside home to children aged 7-12 (more extracurricular activities at schools, housing estate dayrooms etc.)

101. Do you trust the following institutions?:

- | | | | |
|--|--------------------------------|-------------------------------|--|
| 101.1. Banks | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |
| 101.2. The Sejm (lower chamber of Polish Parliament) | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |
| 101.3. The President | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |
| 101.4. Investment funds | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |
| 101.5. Life insurance companies | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |
| 101.6. The European Parliament | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |
| 101.7. The Police | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |
| 101.8. The government | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |
| 101.9. The Social Insurance Institution | 1 <input type="checkbox"/> YES | 2 <input type="checkbox"/> NO | 3 <input type="checkbox"/> I HAVE NO OPINION |

102. Which of the statements concerning democracy, provided below, do you support most?

- 1. democracy is better than any other form of government
- 2. sometimes, non-democratic rule is better than democracy
- 3. for people like me, it does not really matter whether the government is democratic or not
- 4. democracy is a bad form of government
- 5. it is hard to say

103. **Do you practice any sports or physical activity?** 1 YES 2 NO

104. Were you unemployed for some time between 2000 and 2009 (did not have a job and kept seeking one)?

- 1 YES 2 NO

105 – if YES, **what was the main reason for being unemployed** (you may mark more than one answer):

- 105.1. a period between contracts of employment with the same company
- 105.2. your own decision
- 105.3. individual dismissal
- 105.4. obligatory work stoppage due to the problems of the employer
- 105.5. due to training/ school
- 105.6. due to family/ personal reasons
- 105.7. group dismissal
- 105.8. end of a fixed-term contract
- 105.9. other reasons

106. Do you agree with the following statements regarding disabled people?:

- 106.1. They remain dependant to other people throughout their entire life 1 YES 2 NO
- 106.2. They should have special privileges at school 1 YES 2 NO
- 106.3. They have difficulties to make contact with others 1 YES 2 NO
- 106.4. They should be helped to make contact with others 1 YES 2 NO
- 106.5. They should live with parents/ carers as long as possible 1 YES 2 NO
- 106.6. They should try to live as independently as possible 1 YES 2 NO
- 106.7. They should work even part-time 1 YES 2 NO
- 106.8. Work can help them integrate with other people 1 YES 2 NO
- 106.9. The state should provide them all types of financial benefits and care allowances 1 YES 2 NO
- 106.10. – if in your opinion, disabled people should work, what would be the most appropriate workplace for them? *Please choose one answer*
- 1 In supported-employment enterprises employing only or mainly disabled people
- 2 In all enterprises which are ready to employ on a position for disabled persons
- 106.11. They should stay at home and live on disability allowance 1 YES 2 NO

107. **How in your opinion work should be divided in family with respect to the age of children?** (Please select for one of four situations one of six variants of division of work by putting a checkmark in the squares next to them)

OPTIONS OF WORK DIVISION

- 1 – both husband and wife work full time
- 2 – the father works full time, and the mother works part time
- 3 – the father works full time, and the mother stops working for a certain time
- 4 – the father works full time, and the mother gives up work
- 5 – the father works part time, and the mother works full time
- 6 – the father stops working for a certain time and the mother works full time

- 107.1. if there are no children aged 12 or less
- 107.2. if there are children aged 3 or less
- 107.3. if there are children aged 3-6
- 107.4. if there are children aged 6-12

Provided below are questions addressed only to some respondents. Please check which conditions you meet and go to the appropriate sections of the questionnaire:

- Working at present
- Persons who changed a job between 2000 and 2009, regardless of whether they are working now
- Persons who did not work between 2000 and 2009
- Persons who within the last 12 months were entitled to a parental leave
- Using computers
- Using the Internet
- Disabled persons

PERSONS WORKING AT PRESENT

108. Is it possible at your main workplace to?

108.1. change the starting or ending hour of work YES NO108.2. leave the company for at least one hour YES NO108.3. perform some of your duties at home YES NO

109. What are the conditions that would convince you to work abroad? (please select no more than 2 answers)

1. if the salary was higher than now2. if the job was more interesting than the one I have3. if the possibilities of promotion/ development were greater than now4. if I was sure I would get employed for at least a year5. I would not work abroad under any conditions

110. How much time does it take you to get to work on the average?

(one direction in minutes; if you usually work at home, enter 0) minutes

PERSONS WHO CHANGED A JOB BETWEEN 2000 AND 2009, REGARDLESS OF WHETHER THEY ARE WORKING NOW

111. How many times did you change jobs in years 2000–2009? times

112. Why did you change jobs in years 2000–2009? (you may choose more than one reason)

112.1. voluntary decision to get a better job/ remuneration112.2. end of fixed-term agreement112.3. due to independent reasons (health, dismissal, leave, company restructuring, company bankruptcy, retirement)112.4. other reasons113. Was the job change associated with the change of profession as well? YES NO114. Was the job change associated with the change of place of residence? YES NO

PERSONS WHO DID NOT WORK BETWEEN 2000 AND 2009

115. Why didn't you work between 2000 and 2009? (select no more than 3 reasons by putting checkmarks in squares)

1. studying, raising qualifications2. taking care of the home3. taking care of children4. taking care of disabled/ elderly household members5. due to a health condition6. due to inappropriate age7. due to the lack of qualifications demanded by employers8. retirement9. due to difficulties with finding a job10. the receipt of social benefits11. I did not want to work

116. Under what conditions would you be willing to work in the country?

(please select and mark no more than 2 answers)

1. if there was a possibility of working part-time2. if there was a possibility of working at home, at least partially3. if there was a possibility of flexible work time organization4. if there was a possibility of receiving greater assistance from other family members in the performance of family duties5. if there was a possibility of taking advantage of proper care for children or ill persons6. if there was a possibility of retaining the social benefits I am receiving now7. other8. I do not want to work at all

PERSONS WHO WITHIN THE LAST 12 MONTHS WERE ENTITLED TO A PARENTAL LEAVE

117. Did you go on a parental leave in the last 12 months? YES NO (go to question 120)

118. – if YES, which forms of parental leave did you take advantage of?

1. work time reduction2. a full-time parental leave3. a part-time parental leave4. a mixed form (leave/work time reduction)119. Did you receive a parental leave allowance during the parental leave? YES NO

120. – if NO in question 117 – **What were the main reasons for which you did not take advantage, a parental leave in the last 12 months?** (please select and mark no more than 2 answers)

- 1. the lack of or too low a parental leave allowance
- 2. the lack of sufficient possibilities to choose a convenient period for a parental leave
- 3. negative effects on the amount of future old-age pension
- 4. negative effects on my career (negative attitude of the employer)
- 5. I wanted to go back to work as soon as possible
- 6. other reasons

PERSONS USING COMPUTERS

121. **How many hours did you spend using the computer this week?** hours

122. **What is your main activity when using the computer?** Please specify two activities in which you dedicate most of your time – enter number 1 next to the activity which consumes most of your time, and number 2 next to the second activity.

- 122.1. work
- 122.2. studying
- 122.3. entertainment
- 122.4. searching and reading information on the Internet
- 122.5. maintaining relations with others using the Internet

123. **When using a computer, did you perform the following functions?**

Place checkmarks in squares with the proper answers

	YES	NO
123.1. copying or pasting a file or a folder	<input type="checkbox"/>	<input type="checkbox"/>
123.2. using the function of copying, cutting and pasting for the purpose of duplication or for moving selected fragments of a document	<input type="checkbox"/>	<input type="checkbox"/>
123.3. using the basic mathematical functions in a spreadsheet	<input type="checkbox"/>	<input type="checkbox"/>
123.4. the creation of an electronic presentation	<input type="checkbox"/>	<input type="checkbox"/>
123.5. the installation of new devices (printer, scanner, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
123.6. sending an e-mail with attachments (documents, graphics)	<input type="checkbox"/>	<input type="checkbox"/>
123.7. using a Web browser (e.g. Google, Yahoo!) to find information	<input type="checkbox"/>	<input type="checkbox"/>
123.8. creating a Web page	<input type="checkbox"/>	<input type="checkbox"/>
123.9. writing a computer program, using programming language	<input type="checkbox"/>	<input type="checkbox"/>

PERSONS USING THE INTERNET

124. **When did you start using the Internet?** (enter year)

125. **How many hours did you spend last week using the Internet?**

126. **Have you ever met, in person, anyone that you got to know on the Internet?**
 1 YES 2 NO 3 I have not met anybody on the Internet

127. **Please specify whether using the Internet you performed the activities listed below?** (please read the list and mark which of them you ever did, and the ones you did last week, by placing checkmarks in the appropriate squares)

Activity	Any time	During the last week
127.1. checking and sending electronic mail (e-mail)	<input type="checkbox"/>	<input type="checkbox"/>
127.2. the use of communicators enabling conversations with friends (such as ICQ, Gadu-Gadu etc.)	<input type="checkbox"/>	<input type="checkbox"/>
127.3. chatting	<input type="checkbox"/>	<input type="checkbox"/>
127.4. participation in discussion groups and forums	<input type="checkbox"/>	<input type="checkbox"/>
127.5. phone calls using the Internet (VoIP, Skype),	<input type="checkbox"/>	<input type="checkbox"/>
127.6. videoconferences	<input type="checkbox"/>	<input type="checkbox"/>
127.7. Web page browsing	<input type="checkbox"/>	<input type="checkbox"/>
127.8. gathering of materials necessary for work or studies	<input type="checkbox"/>	<input type="checkbox"/>
127.9. participation in Internet trainings and courses	<input type="checkbox"/>	<input type="checkbox"/>
127.10. looking for a job, sending job offers	<input type="checkbox"/>	<input type="checkbox"/>
127.11. purchasing products on the Internet (except for auctions)	<input type="checkbox"/>	<input type="checkbox"/>
127.12. using online banking services	<input type="checkbox"/>	<input type="checkbox"/>
127.13. participation in Internet auctions	<input type="checkbox"/>	<input type="checkbox"/>
127.14. playing network games	<input type="checkbox"/>	<input type="checkbox"/>
127.15. downloading free software	<input type="checkbox"/>	<input type="checkbox"/>
127.16. downloading free music, movies	<input type="checkbox"/>	<input type="checkbox"/>
127.17. creation or modification of your own Web page or blog	<input type="checkbox"/>	<input type="checkbox"/>

- | | | |
|--|--------------------------|--------------------------|
| 127.18. creating and publishing your own text, graphics, music or other kinds of art on the Internet | <input type="checkbox"/> | <input type="checkbox"/> |
| 127.19. obtaining information from the Web pages of public institutions | <input type="checkbox"/> | <input type="checkbox"/> |
| 127.20. downloading or filling out official forms | <input type="checkbox"/> | <input type="checkbox"/> |
| 127.21. listening to music or radio on the Internet | <input type="checkbox"/> | <input type="checkbox"/> |
| 127.22. watching TV and video files on the Internet | <input type="checkbox"/> | <input type="checkbox"/> |
| 127.23. booking tickets (e.g. for a flight, cinema or theatre) | <input type="checkbox"/> | <input type="checkbox"/> |
| 127.24. reading newspapers on the Internet | <input type="checkbox"/> | <input type="checkbox"/> |
| 127.25. using the Internet and e-mail for work | <input type="checkbox"/> | <input type="checkbox"/> |
| 127.26. visiting web pages of social network services (e.g. <i>Nasza Klasa</i>) | <input type="checkbox"/> | <input type="checkbox"/> |

DISABLED PERSONS

128. Do you feel that others treat you badly only due to your disability? 1 YES 2 NO

129. What are the things associated with your disability that make your life difficult?

Please select and mark no more than three answers

- 1 architectural barriers
- 2 impracticable regulations impeding access to public places
- 3 inappropriate attitude to persons like me
- 4 the lack of confidence in my own abilities
- 5 the unwillingness of employers to employ persons like me
- 6 excessive care and the lack of confidence of guardians in my self-reliance
- 7 the lack of care, loneliness
- 8 the lack of adequate types of rehabilitation treatment
- 9 other
- 10 nothing

130. Whose company do you prefer the most?

- 1 of disabled people
- 2 of people without disabilities
- 3 It does not matter to me, if I socialise with disabled or people without disabilities

131. Do you encounter architectural barriers in the building you live, which impede moving? 1 YES 2 NO

132. – if YES, what barriers are these? (please select and mark all the important ones)

- 1 too narrow door frames
- 2 too narrow corridors
- 3 the lack of lift
- 4 high or steep stairs
- 5 too narrow staircases
- 6 the lack of banisters and handholds
- 7 the lack of wheelchair ramps
- 8 uneven floors and high doorsteps
- 9 other

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 at the University of Warsaw and University of Finances and Management

3. Instruction for interviewers

INSTRUCTIONS CONCERNING THE ORGANIZATION AND RULES OF THE FILLING OUT OF QUESTIONNAIRES FOR THE RESEARCH PROJECT "SOCIAL DIAGNOSIS 2009" R5

Introductory remarks

"Social Diagnosis" is a cyclical project, repeated with the same sample of households. In the upcoming fourth wave (R5), we plan to examine all households which participated in the third wave of the panel research (R4) and new households.

In year 2009, only those households will be examined (questionnaires for households which are included in the collective list sent to the Voivodship Statistical Offices by e-mail on 08.01.2009 or later. If the household is on the list, but any of its current members are not, they are assigned consecutive numbers after the last number from the list of year 2007.

Data on households is gathered on the basis of the interview conducted with the household head or a person who knows a lot about the household (part I of the questionnaire). Household members aged 16 (those, who turned 16 no later than on the 1st March, 2009) and older fill out part II of the questionnaire on their own in the presence of a pollster. If the respondents cannot fill out this part on their own, the pollster is obliged to help them. Men cannot be given questionnaires for women and women cannot be given questionnaires for men because the respondent's gender is coded in the questionnaire.

Definitions, classifications and groupings are largely consistent with those used in research based on the samples of households conducted by the Central Statistical Office. The proposed additions or slightly different qualifications are associated with the recommendations of Eurostat for research on households.

In the case of households which were included in the R4, apart from the full form for the fourth wave of research, you will receive the printouts from part C of the form R4 (*number of household, number of voivodship and district, numbers of household members, their gender and year of birth as well as fixed numbers of household members*). Please conduct the interview section C on the basis of printouts from the fourth wave of research that is, taking into account all persons from the household included in printouts from R4 and the new household members. **It is necessary to keep in mind that the household members are to be numbered in the same way as in wave R4** and persons who joined the household after year 2007 are assigned the consecutive numbers after the last number from the R4. **If the number of persons is greater than 8, all persons with numbers above 8 are entered in a separate Section C sheet.** For persons who left the household permanently after the third wave, we ask only that you fill out of the selected rows: rows 42 (enter symbol 3), 44, 47, 48, 50. We are doing our best to conduct individual interviews (part II of the questionnaire) with all household members aged 16 or more, even those with whom, for various reasons, interviews could not be conducted during the first, second or third wave.

On the cards, which are shown to the respondent, answers like "I don't know" or "it is hard to say" are not included, but they may be included in the questionnaire and market, if the respondent spontaneously gives us such an answer. Also, in the case of questions which are not accompanied by cards, we do not read such answers to the respondent, but we mark them (if they are included among the available answers), if the respondent spontaneously answers the question in this way.

Please inform the examined households that, like in the previous years, 20 money prizes will be drawn among them for PLN 1000 each.

Detailed instructions

PART I

Section A. HOUSEHOLD CHARACTERISTICS

point 0 – enter the one-digit symbol of household status in the study:

symbol

- 1 the household participated in the third wave (R4) and it lives at the same address ⇒ we go to point 1
- 2 the household participated in the third wave, but its address in the country has changed ⇒ we do not conduct the interview (we do not follow this household)
- 3 the household participated in the third wave of research, but it moved abroad or all household members have moved to collective accommodation facilities ⇒ we do not conduct the interview
- 4 a new household (it did not participate in the third wave of research) and it was drawn for the purpose of the current wave.

point 1 – enter the seven-digit symbol of the territorial unit accordingly with the new territorial division of the country (voivodship, district, commune)

point 3 – enter the one-digit symbol of the class of place of residence in which the household lives, according to the list of symbols provided below:

symbol

- 1 cities inhabited by population of 500 thousand or more
- 2 cities inhabited by population of 200–500 thousand
- 3 cities inhabited by population of 100–200 thousand
- 4 cities inhabited by population of 20–100 thousand
- 5 cities inhabited by population smaller than 20 thousand
- 6 the rural area

point 4 – enter the identification number of the household. It is a five-digit number which does not change during the subsequent research cycles, therefore, for those households which participated in the previous wave (R4), it will be the same as in year 2007; for new households, established as a result of a division of the household examined in year 2007, it will be assigned from the pool of numbers reserved for a given voivodship especially for these households.

point 5 – enter the one-digit symbol of the source of income of the household in accordance with the list of symbols provided below:
symbol

- 1 households of employees
- 2 households of farmer - employees
- 3 households of farmers
- 4 households of the self-employed working outside agriculture, freelancers
- 5 households of retirees and disability pensioners
- 6 households living on unearned sources other than disability pension and retirement

Section B. INFORMATION ON THE CONDUCTED INTERVIEW

Question 5. Please ask whether the household agrees to participate in the subsequent wave in year 2011.

Section C. HOUSEHOLD COMPOSITION

row 1 – for households which were examined in year 2007, please number the members exactly in the same way as in 2007. If the number of household members is greater than 8, for the remaining persons (9, 10 etc.) data in Section C is entered on a separate sheet, which is put inside the questionnaire after the interview.

2 fixed number – a number assigned to persons participating in the R4 and included in the register of households drawn for the wave of 2009.

row 4 – enter the one-digit symbol of relationship to the household head:

symbol

- 1 household head
- 2 husband, wife
- 3 partner (husband, wife, common law spouse)
- 4 son, daughter
- 5 son in law, daughter in law (child's partner)
- 6 granddaughter, great granddaughter
- 7 father, mother, father in law, mother in law
- 8 grandfather, grandmother
- 9 brother, sister
- 10 other

The household head is the person who mostly or fully provides for the household.

row 5 – enter the one-digit family symbol:

symbol

- 1 for the first family members
- 2 for the second family members
- 3 for the third family members
- 4 – 8 for members of the fourth and subsequent families
- 0 for persons who are not members of families in a family household and for persons in a non-family or special household.

row 6 – enter the one-digit symbol of relationship to the household head. The household head is the man in the case of a full family (married couple, couple with no children or with children) or a single parent in a single parent family:

symbol

- 1 household head
- 2 partner (wife)
- 3 son, daughter
- 4 other persons outside the family
- 0 a person in a non-family or special household

A family consists of household members who are married (formally or informally), related or adopted. The following types of families are found:

Full family – married couple (couple) with no children, married couple (couple) with children

Single-parent family – mother with children, father with children

Non-family households are those, in which there is no group of persons defined as a family (in accordance with the definition provided above). There are single-person and multi-person non-family households (for instance, a grandmother with a grandson, a brother and sister living together, or persons who are not related living together).

Special households consist of persons, living together with a single or multi-person household, who are not members of such households and who do not constitute a separate household in accordance with the definition provided above (family and non-family households). These may be maids, students renting rooms, or employees.

Note: In each questionnaire, both rows 4 and 6 are to be filled out.

row 10 – enter the one-digit gender symbol:

symbol

- 1 man
- 2 woman

row 11 – enter the one-digit status symbol:

symbol

- 1 single
- 2 married
- 3 widowed
- 4 divorced
- 5 legally separated (separation declared by the court)
- 6 separated in fact (spouses do not live together without a decree passed by the court)

row 11 – enter the two-digit symbol of completed education

symbol

- 10 university with an academic degree, at least Ph. D.
- 11 university with the M.A., M. Sc. or equivalent degree
- 12 university with engineer, bachelor degree
- 20 postsecondary
- 30 vocational secondary
- 40 general secondary
- 50 vocational
- 51 lower secondary school
- 60 completed elementary
- 70 no education (elementary not completed, no school education)
- 99 not applicable (person aged 0–12)

row 13 – enter the total number of full years of education, regardless of whether a given school has been completed (elementary, secondary, vocational or grammar school, full-time or extramural studies, doctoral studies). Years of education during any kind of postgraduate studies, trainings and courses are not included. A training course is understood as a non-school form of education, leading to attaining, raising or changing ones professional qualifications, preparatory courses for entry exams, language courses, computer courses, driving schools etc.

row 14 – enter the two-digit symbol of the area of education completed

symbol

- 14 education
- 21 art
- 22 humanities (religion, foreign languages and mother tongue, history, archaeology, philosophy, etc)
- 31 social sciences (psychology, sociology, demography, political sciences, economy, etc) 32 journalism and information
- 34 economy and administration (management, marketing, finances, banking, insurance, accounting and taxes, management and administration sciences, etc)
- 38 law
- 42 biological sciences
- 44 physical sciences
- 46 mathematics and statistics
- 48 computerization (IT science)
- 52 technical sciences (technology, industry, construction, etc)
- 54 production and processing
- 58 architecture and construction
- 62 agriculture, forestry, fishing
- 64 veterinary science
- 71 public health
- 72 healthcare (medicine, dentistry, nursing, pharmacology, etc)
- 76 social assistance (social services)
- 81 public services and transport services
- 85 environmental protection and sanitary services
- 86 security and protection
- 90 armed forces and defence
- 91 other
- 92 no specialization (e.g. elementary, grammar or general secondary education)
- 98 not applicable (persons prior to the completion of elementary school or with no elementary education)
- 99 no data

row 15 – enter a one-digit symbol on the educational status of the person, defined as using or not using various educational services, rendered by the education system or other public and non-public institutions outside school (pertains to the current situation)

symbol

- 1 attending crèche or kindergarten
- 2 full time student
- 3 evening, extramural student
- 4 taking advantage of various forms of education outside school (additional courses, trainings, etc.)
- 5 following individual programme of study
- 8 not taking advantage of any educational services

For persons who have symbol 1, 2, 3 or 4 entered in row 15, fill out row 16 and possibly 17 (if a person takes advantage of more than one education service). If symbols 5 or 8 have been entered already, go to row 18.

row 16–17 – enter a two-digit symbol of the type of educational service (two most significant)

symbol

- 11 public crèche, kindergarten
- 12 non-public crèche, kindergarten
- 21 student at an elementary, grammar public school
- 22 student at an elementary, grammar non-public school
- 30 student at a vocational school, vocational training
- 41 student at a public general secondary school
- 42 student at a non-public general secondary school
- 51 student at a public vocational secondary school
- 52 student at a non-public vocational secondary school
- 61 student at a public postsecondary school
- 62 student at a non-public postsecondary school
- 71 student at a public university
- 72 student at a non-public university
- 81 postgraduate studies student at a public university
- 82 postgraduate studies student at a non-public university
- 83 doctoral studies student at a public university
- 84 doctoral studies student at a non-public university
- 90 additional training and courses financed by an employer
- 91 additional training and courses, financed from the resources of the Labour Fund
- 92 additional training and courses, financed from the resources of the European Social Fund
- 93 additional training and courses, financed from the resources of the household
- 94 other forms of skills development (e.g. driving school, instrument playing lessons, foreign language course)
- 98 I don't know

row 17 – enter:

- 1 if the respondent has a driving license
- 2 if the respondent does not have a driving license
- 3 if not applicable (if the respondent is under age)

row 19 – 24 – for each language enter:

- 1 if a given person knows the language actively (able to speak and write)
- 2 if a given person knows the language actively (able only to write)
- 3 if a given person does not know one of the languages

row 27 – enter a one-digit symbol with regard to the disability category:

symbol

- 1 for persons having a valid certificate from a medical commission at the Social Insurance Institution
- 2 for persons having a valid certificate from the Disability Adjudicating Panel at the District Family Assistance Centre
- 3 for persons having valid certificates both from the medical commission at the Social Insurance Institution and the Disability Adjudicating Panel at the District Family Assistance Centre
- 4 for persons declaring that due to their disability or illness they are completely or partially unable to perform such activities as learning, working or taking care of the household, but who do not have a certificate of the medical commission
- 5 disabled children aged 16 or less
- 0 in other cases
- 8 not applicable (the person is not disabled)

row 28-30 – type of illness; enter up to three main ones

symbol

- 1 a motor organ illness not requiring a wheelchair
- 2 a motor organ illness requiring a wheelchair
- 3 a sight organ illness
- 4 a hearing organ illness
- 5 a psychical illness (neurosis, autism, depression, schizophrenia, Alzheimer's disease, etc.)
- 6 diabetes
- 7 cardiovascular diseases
- 8 neoplastic diseases
- 9 other chronic diseases

row 31 – only for persons with symbols 1,2 or 3 in row 27

symbol

- 1 a certificate of severe disability or a complete inability to work and to independent existence, or the first group of invalidity
- 2 a certificate of moderate disability or a general inability to work, or the second group of invalidity
- 3 a certificate of slight disability or a partial inability to work, or a requirement to professional retraining, or the third group of invalidity

row 32 – enter only one illness (the basis for the statement of disability)

symbol

- 1 psychical diseases (neurosis, autism, depression, schizophrenia, Alzheimer's disease, etc.)
- 2 sight organ diseases
- 3 hearing organ diseases
- 4 speech or vocal organs diseases
- 5 cardiovascular or respiratory diseases (heart, lung or bronchial tubes, or haemopoietic system diseases)
- 6 digestive or metabolic, or endocrine system diseases (diabetes)
- 7 genitourinary system diseases
- 8 muscular and skeletal diseases (diseases of motor organs, rheumatism, rheumatoid arthritis, backbone diseases)
- 9 other

row 33 – enter 0 if the illness is inborn; in other cases enter the number of years passed since the diagnosis; if the illness lasts less than one year, enter 1

row 34 – enter an appropriate symbol

symbol

1. The disabled person requires assistance and/or care several times a day and at night-time
2. The disabled person requires assistance and/or care several times a day
3. The disabled person requires assistance and care twice a day at most
4. The disabled person requires assistance and care from time to time, not every day
5. The disabled person requires assistance only from time to time
6. The disabled person does not require any assistance or care

row 35 – enter the X symbol in the column of a household member who helps, cares and looks after the disabled person; if there is also a person from outside the household who regularly helps the disabled person, enter an appropriate symbol in the column of the disabled member of household

symbol

- 1 a relative from outside the household
- 2 a friend or an acquaintance
- 3 a nurse or a social worker (a person paid by the household or an institution)
- 4 a neighbour
- 5 someone else (regardless of being paid or not)

row 36 – enter an appropriate symbol (regardless of the time of diagnosis):

- 1 The disabled person learnt/ learns at a comprehensive school
- 2 The disabled person learnt/ learns at a special school
- 3 The disabled person learnt/ learns at a mixed abilities school or in a mixed abilities class at a comprehensive school
- 8 The disabled person has never learnt at any school

rows 37 and 38 – symbols listed in the questionnaire

rows 39-41 – pertain to the source of income of individual household members;

enter the two-digit symbols of the main and additional sources of income (only two additional sources of income can be provided)

symbol

- 11 hired work in the public sector
- 12 hired work in the private sector
- 13 hired casual job in the public sector
- 14 hired casual job in the private sector
- 15 farming
- 16 assisting in farming
- 17 employer, excluding individual farmers
- 18 regular self-employment
- 19 casual self-employment
- 20 assisting in self-employment
- 21 pension (outside the farming social insurance system)
- 22 pension of individual farmer (due to the farming social insurance)
- 23 disability pensions
- 24 family benefits 25 maternity benefits
- 26 unemployment benefits
- 27 other benefits from the Labour Fund
- 28 allowances for persons on parental leaves (former parental benefits)
- 29 other social insurance benefits (e.g. childbirth and funeral benefits, illness and rehabilitation benefits)
- 30 family benefits and allowances in accordance with the act on family benefits of 2003 and its subsequent amendments, childcare benefits, or housing benefits
- 31 social assistance benefits
- 32 other social assistance benefits (e.g. parental, targeted and special benefits)
- 33 alimony for the children
- 34 other income in form of social benefits (including scholarships)
- 35 income from property (interest, dividends etc.)
- 36 income from the rental of a house, apartment, or garage

- 37 foreign old age and disability pensions
- 38 benefits due to voluntary illness and accident insurance
- 39 other insurance compensation
- 40 donations, alimony from private persons
- 41 other income
- 42 other revenues (sale of property, savings, credits)
- 43 being supported by other household members

row 42 – enter the one-digit symbol for the status of presence of the person in the household symbol

- 1 person present in the household
- 2 person temporarily absent, but treated as a household member (absent over 2 months)
- 3 permanently absent from the household (pertains only to persons participating in wave 4)

row 43 – enter the one-digit symbol concerning the reasons for a temporary absence symbol

- 1 stay at a hospital or assistance home
- 2 being away studying
- 3 serving in the army
- 4 other institutions (e.g. custody, prison etc.)
- 5 work away from place of residence in the country
- 6 work outside the country
- 7 studying away from place of residence in the country
- 8 studying abroad
- 9 business trip
- 0 other

row 44 – enter the one-digit symbol of membership in the household symbol

- 1 the person was a member of a household subjected to wave 4 of research (belongs to the panel sample of persons) and is still a household member,
- 2 the person left the household permanently,
- 3 the person died,
- 4 a person was born after wave 4 – the mother was subjected to research during this wave,
- 5 the person was not a member of the household subjected to research in wave 4 (does not belong to the panel sample of persons), if one of three conditions is met:
 - a) the household was subjected to examination in wave 4 and the person became a member after wave 3 (from outside),
 - b) a household newly included in research (none of its members belonged to a household examined during wave 4),
- 6 the person was supposed to be examined during wave 4, but he or she was not included by mistake (he/she belongs to the panel sample),
- 7 the person came back to the household: the person was a member of the household subjected to research in waves 1,2,3, but did not participate in wave 4 of the study (belongs to a new panel sample of persons).

NOTE:

Rows 45–50 are filled out only for households which participated in the third wave of research (R4) in year 2007. They pertain to persons who were household members in the previous cycle and left, or persons who joined the household in the interval between the previous and current wave:

rows 45 - 46 – enter the date of joining the household – month and year (two last digits)

rows 47 - 48 – enter the date of leaving the household – month and year (two last digits)

row 49 – enter the one-digit symbol pertaining to the reason for joining the household symbol of reason for JOINING the household –

- 1 marriage, cohabitation, breakdown of informal relationship
- 2 divorce, separation
- 3 birth
- 4 other
- 8 not applicable

row 50 – enter the one-digit symbol pertaining to the reason for leaving the household symbol of reason for LEAVING the household –

- 1 marriage, cohabitation
- 2 divorce, separation, breakdown of informal relationship
- 3 death
- 4 establishing an independent household in the country (enter the address and possibly the phone number on a separate sheet)
- 5 establishing a new household abroad
- 6 other
- 8 not applicable

row 51

symbol

- 1 subject to individual interview (member of the household, present at the household, 16 or older as of 01.03.2009, that is the ones born not later than on 01.03.1993)
- 2 subject to individual interview, but requires special treatment (staying away temporarily, e.g. army service, hospital, studying, long-term leave except for staying abroad)
- 3 staying abroad
- 4 not subject to individual interview (younger than 16)
- 5 not subject to individual interview due to other reasons (mentally ill, old age)

row 52

symbol

1 complete interview

The interview was not conducted, although contact was established because:

- 2 the person was unable to provide answers (illness, intoxication)
 - 3 the person did not return the form to be filled out
 - 4 the person initially refused to participate in the interview (there is a possibility of participation in the consecutive years)
 - 5 the person definitely refused to participate in the research now and in the future
- The person could not be contacted because:
- 6 he/she was away from the household temporarily (e.g. a short business trip)
 - 7 it was not possible to contact this person at home, and he/she was not delivered the forms to be filled out in the household.

Section D. ECONOMIC ACTIVITY OF HOUSEHOLD MEMBERS AGED 15 OR MORE

This section pertains to persons aged 15 not later than 01.03.2009, that is the ones born by the end of February 1994.

row 1 – enter the personal number same as in Section C row 1

row 2 - 3 – symbols and rules provided on the form

row 5 – enter symbol

symbol

1. based on a fixed term contract (but not a contract mentioned as untypical forms of employment (6–11) or for a period longer than one year)
2. based on a contract of employment for an unspecified period of time
3. own activity as an entrepreneur hiring workers
4. own activity as a self-employed person
5. family member assisting free of charge
6. casual job (based on fixed-term agreements, e.g. for substitution, for the period of performance of specific work)
7. other short-term agreements (e.g. student trainings)
8. trial period employment
9. hired on the basis of a civil law agreement (contract for specific work; mandate contract)
10. hired with no formal agreement and/or on the basis of an oral agreement
11. other

row 6 – symbols and rules provided on the form

Full-time means full-time employment in at least one company.

row 7 – enter the symbol of the most significant reason symbols

1. cannot find a full-time job
2. does not want to work full time
3. has to because he/she is unable to provide the children with appropriate care
4. has to because he/she is unable to provide care for an ill, elderly or disabled person
5. has another job
6. other reasons

row 8 – symbols and rules provided on the form

row 9 – symbols provided on the form

row 10 – the question pertains to all the respondents, rules provided on the form

symbol

1. YES and he/she currently does not work
2. YES and he/she currently works
3. NO and he/she currently does not work, but he/she has already found a job
4. NO and he/she currently does not work
5. NO and he/she currently works

row 11 – enter the symbol of the most significant reason:

symbol

1. studying, raising qualifications
2. taking care of the house
3. taking care of the children
4. taking care of the disabled or elderly household members
5. due to health conditions
6. due to inappropriate age
7. due to the lack of qualifications
8. retired person
9. he/she is convinced he/she will not find a job
10. does not want to lose the right to social benefits
11. does not want to work
12. other reasons

row 12 – symbols provided on the form

rows 13 - 14 – enter the number of months/years of unemployment; for persons who have never worked enter 97 and go to row 23; it is 2 years or more go to row 22; it is less than 2 years to row 21

row 15 – enter the one-digit number of the form of ownership of the institution being the main workplace symbol

1. state
2. belonging to the units of territorial self-government
3. private
4. cooperative or social/religious organizations
- 8 not applicable (enter in the case of persons who do not work)

row 16 – enter the one-digit number of the form of ownership of the institution being an additional workplace symbol

1. state
2. belonging to units of territorial self-government
3. private
4. cooperative or social/religious organizations
8. not applicable (enter in the case of persons, who do not work)
9. not applicable (enter in the case of persons with no additional job)

row 17 – symbols provided on the form (according to the administrative division)

row 18 – enter the three-digit symbols of the profession performed in accordance with the “Ordinance of the Minister of Labour and Social Policy of 10.12.2002 concerning the classification of professions and specializations for the needs of the labour market and the scope of its application.”

row 19 – symbols and rules provided on the form

row 20 – enter how many times the person was registered at the Labour Office

row 21 – enter the total number of months of unemployment

row 22 – enter the three-digit symbols of the profession performed in accordance with the “Ordinance of the Minister of Labour and Social Policy of 10.12.2002 concerning the classification of professions and specializations for the needs of the labour market and the scope of its application.”

This classification is also used in the BAEL and EUSILC.

row 23 – symbols and rules provided on the form

rows 24, 25, 26 – enter the two-digit symbols of educational activity type

symbol

- 21 student at an elementary, grammar public school
- 22 student at an elementary, grammar non-public school
- 30 student at a vocational school, vocational training
- 41 student at a public general secondary school
- 42 student at a non-public general secondary school
- 51 student at a public vocational secondary school
- 52 student at a non-public vocational secondary school
- 61 student at a public postsecondary school
- 62 student at a non-public postsecondary school
- 71 student at a public university – full-time studies
- 72 student at a public university – extramural or evening studies
- 73 student at a non-public university studies
- 81 postgraduate studies student at a public university
- 82 postgraduate studies student at a non-public university

- 83 doctoral studies student at a public university
 84 doctoral studies student at a non-public university
 90 additional training and courses financed by the employer
 91 additional training and courses, financed from the resources of the Labour Fund
 92 additional training and courses, financed from the resources of the European Social Fund
 93 additional training and courses, financed from the resources of the household
 94 other forms of skills development (e.g. driving school, instrument playing lessons, foreign language course)
 98 I don't know

row 27 – symbols provided on the form

row 28 – symbols and rules provided on the form

row 29 – enter the number of stays

rows 30, 31 – enter symbol

symbol

1 Austria	6 Greece	11 Germany	16 other EU countries (Czech Republic, Slovakia, Hungary, Estonia, Lithuania, Latvia, Cyprus, Slovenia, Malta, Bulgaria, Romania)	17 USA
2 Belgium	7 Spain	12 Portugal		18 Canada
3 Denmark	8 The Netherlands	13 Sweden		19 Australia
4 Finland	9 Ireland	14 Great Britain		20 other countries
5 France	10 Luxembourg	15 Italy		

rows 32 – 33 – enter the number of months

row 34 – enter a symbol if the persons meets the following condition: he/she was abroad for a longer period than 6 months between 2005 and 2009 and came back to Poland last year (after the 1st January 2008)

symbol

1. The person had such a plan on leaving abroad
2. The person lost/ finished his/her work
3. The person finished studying
4. The person was unable to find work abroad
5. The person came back for family reasons
6. The person came back due to a decrease in wages abroad as compared with the wages in Poland
7. The person came back for health reasons
8. The person came back for a certain time to deal with his/her matters
0. other reasons
9. hard to say

rows 35, 36 – enter the number of years

row 37 – enter the number of workplaces

Section F. MATERIAL AFFLUENCE

Questions 12 and 13 – regardless of when the household was established; if the respondent does not remember, we enter 9; if there is more than one computer in the household, in question 12 the subject is the last purchase (modernization), and in question 13 – the first purchase.

Section H. SOCIAL ASSISTANCE

Question 1 pertains to various forms of assistance, both from private persons and institutions, such as social assistance centers (communal, district, voivodship-level), district family assistance centers, non-religious charity organizations (these include non-governmental organizations acting in the field of social assistance, including the charity organizations, that is, associations, foundations, committees, charity societies and actions, such as the Polish Red Cross, PKPS, Foundation for Social Action), religious organizations (e.g. Caritas) and parishes, trade unions and companies.

Section L. INCOME SITUATION

Questions 1 and 2 – in the case of a refusal, we enter 99999, in the case of difficulties with providing of precise amount, we ask for a range and enter the middle value from the interval in a single right square. If a provided interval is higher than one of the listed below, we enter a symbol of the interval which is closer to the upper value. If the respondent provides a precise amount of income or categorically refuses to answer, the income interval square remains blank.

symbol of income interval

1. Less than PLN 300	9. PLN 6001 - PLN 7000
2. PLN 301 – 600	10. PLN 7001 – PLN 8000
3. PLN 601 – 1000	11. PLN 8001 – PLN 9000
4. PLN 1001 – 2000	12. PLN 9001 – PLN 10 000
5. PLN 2001 – 3000	13. PLN 10 001 – PLN 15 000
6. PLN 3001 – 4000	14. PLN 15 001 – PLN 20 000
7. PLN 4001 – 5000	15. More than 20 000
8. PLN 5001 – 6000	

Question 5 – answer 5 is marked also when the household does not have to repay a credit

Section M. COMPUTER AND INTERNET

Question 2, if the respondent does not remember, fill in 9999

Other sections in part I do not provide for the special definitions of categories of answers, and any doubts will be explained during the training.

Part II (individual questionnaire)

The pollster fills out only the first page (copying from section C the household number, the number of the person and his/her first name); the rest is filled out by the respondent in the presence of the pollster.

In exceptional situations, the respondent may fill out the questionnaire without the pollster being present; in such cases, it is necessary to attach an envelope, so that other members of the households cannot see the filled-out questionnaire before it is picked up by the pollster.

Please explain the rules of filling out of the questionnaire in a simple manner (page two); particularly, the meaning of the numerical scales, defined verbally only at the ends. Please point out to the respondent that in the date of birth on page 3, Roman numbers cannot be used (e.g. 15 02 78 and not 15 II 78).