

Var-ID	Variable	national ID	Availability	SAQ	CATI	Register	Details and justification
a628_f	Decision on having a child depend on partners work	fru29f	X		X		Different filter: if intention to have a child next three years (a622 = yes) or intention to adopt a child next three years (a623=yes). Different answering scale: 0 = not at all to 10 = a great deal
a628_g	Decision on having a child depend on partners health	fru29g	X		X		Different filter: if intention to have a child next three years (a622 = yes) or intention to adopt a child next three years (a623=yes). Different answering scale: 0 = not at all to 10 = a great deal
a628_h	Decision on having a child depend on childcare availability	fru29h	X		X		Different filter: if intention to have a child next three years (a622 = yes) or intention to adopt a child next three years (a623=yes). Different answering scale: 0 = not at all to 10 = a great deal
a628_i	Decision on having a child depend on the opportunity for a parental leave	fru29i	X		X		Different filter: if intention to have a child next three years (a622 = yes) or intention to adopt a child next three years (a623=yes). Different answering scale: 0 = not at all to 10 = a great deal
a629_a	Friends opinion for a child	fru30c	X		X		Different filter: if intention to have a child next three years (a622 = yes) or intention to adopt a child during next three years (a623=yes). Different answering scale: 0 = strongly disagree to 10 = strongly agree
a629_b	Parents opinion for a child	fru30a	X		X		Different filter: if intention to have a child next three years (a622 = yes) or intention to adopt a child during next three years (a623=yes). Different answering scale: 0 = strongly disagree to 10 = strongly agree
a629_c	Relatives opinion for a child	fru30b	X		X		Different filter: if intention to have a child next three years (a622 = yes) or intention to adopt a child during next three years (a623=yes). Different answering scale: 0 = strongly disagree to 10 = strongly agree
a630	No of intended children	fru12	X		X		
a631	Intention for adoption or foster-child parenthood (next 3 years)						
a701	General health status	hel01	X		X		Different answering scale: 1 (excellent) to 5 (poor)
a702a	Long-standing or chronic illness	hel02a	X		X		
a702b	Duration of long-standing or chronic illness	hel02c	X		X		
a703a	Health problem or disability that limit everyday activities	hel03a	X		X		

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a703b	Duration since limited everyday activities	hel03b	X		X		
a704	Needed regular help (last 12 months)	hel19f / hel19g /hel19h/hel19i/ hel19j	X		X		Different filter - only asked to persons with any health limitations, values for persons without health limitations are put to 2!
a705_1	Received regular help (last 12 months)	hel20	X		X		Different filter: if limitations in daily activities (a703a = yes). Different answering categories: yes and no.
a706	Help received from non-professional	hel23a	X		X		Different filter: if limitations in daily activities (a703a = yes).
a707_x	Support person	hel23b_x	X		X		Different filter: if limitations in daily activities (a703a = yes).
a708_x	Support person in the household						
a709_x	Payment for support person	hel23c_x	X		X		Different filter: if limitations in daily activities (a703a = yes).
a710	Given regular help (last 12 months)	hel25a / hel26a	X		X		Different filter: Persons living alone did not receive this question
a711_x	Support person	hel25b_x/ hel26b_x	X		X		Separate questions for people within and outside household (2 * 5 questions)
a712_x	Support person in the household	hel25 / hel26	X		X		Response is variable specific - meaning each variable contains either yes or no.
a713	Talk about personal things (last 12 months)	hel31a	X		X		
a714_x	Talk partner	hel31b	X		X		
a715_x	Talk partner in the household						
a716	Talk with another person about his/hers personal things (last 12 months)	hel32a	X		X		
a717_x	Talk partner	hel32b	X		X		
a718_x	Talk partner in the household						
a719_a	Control about finances						
a719_b	Control about work						
a719_c	Control about housing conditions						
a719_d	Control about health						

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a719_e	Control about family life						
a720_a	Large number of trusting persons in case of trouble	hel39a	X		X		
a720_b	Experience of emptiness	hel39b	X		X		
a720_c	Miss of community	hel39c	X		X		
a720_d	Large number of persons who are completely trustworthy	hel39d	X		X		
a720_e	Experience of rejection	hel39e	X		X		
a720_f	Large number of person with close relationship	hel39f	X		X		
a721_a	Frequency of feeling the blues	spm19_3	X	X			
a721_b	Frequency of depression	spm19_6	X	X			
a721_c	Frequency of thoughts about a failed life	spm19_9	X	X			
a721_d	Frequency of fear feeling	spm19_10	X	X			
a721_e	Frequency of feelings of loneliness	spm19_14	X	X			
a721_f	Frequency of crying spells	spm19_17	X	X			
a721_g	Frequency of sad feelings	spm19_18	X	X			
a801	Current work or activity status	arb01	X		X		Different answering category: 2: "helping family members" not available
a802	Current maternity or parental leave	arb40	X		X		
a802m, a802y	Start date of maternity or parental leave	arb41_mnd, arb41_aar	X		X		
a804	Satisfaction with maternity or parental leave	arb42	X		X		
a805a	Paid work in last week	arb02a	X		X		Based on question to all if they worked - added filter for parental leave.
a805b	Full-time or part-time leave						Based on question to all if they worked - added filter for parental leave.

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a806	Opportunity of resume work after parental leave	arb43a	X		X		
a807a	Intention to resume work after parental leave	arb43b	X		X		Different answering categories: yes and no.
a807b	Want to resume work after parental leave	arb44	X		X		
a808m, a808y	Start date of unemployment	arb45_mnd, arb45_aar	X		X		
a809	Satisfaction with unemployment status						
a810	Intention for a job (next 3 years)						
a811	Job before unemployment	arb46	X		X		
a812m, a812y	Start date of studying						
a813	Satisfaction with student life	arb47	X		X		
a814	Intention to finish education (next 3 years)	arb48	X		X		Different answering categories: yes and no.
a815	Job before studying	arb49	X		X		
a816m, a816y	Start date of retirement	arb50_mnd, arb50_aar	X		X		
a817	Satisfaction with retirement	arb51	X		X		
a818	Intention for a job (next 3 years)	arb52	X		X		Country specific variable. Different question: "Do you want to part time or full time job now?" Question is asked to all who did not work - for the GGS variable a818_2000 an filter is added that includes only the retired. Only two answering categories.
a819	Job before retirement	arb53a	X		X		Based on a question asked to both, the retired and the ill - filter added for the retired.
a820	Intention for a job (next 3 years)	arb52	X		X		Country specific variable. Different question: "Do you want to part time or full time job now?" Question is asked to all who did not work - for the GGS variable a820_2000 an filter is added that includes only the ill or permanently disabled. Only two answering categories.
a821	Job before illness or disability	arb53a	X		X		Based on a question asked to both, the retired and the ill - filter added for the ill.

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a822m, a822y	Start date of housewife/house husband status	arb54_mnd, arb54_aar	X		X		
a823	Satisfaction with housewife/house husband status	arb55	X		X		
a824	Intention for a job (next 3 years)	arb56	X		X		Different answering categories: yes and no.
a825	Job before housewife/house husband status	arb57	X		X		
a826	Intention for a job (next 3 years)	arb58	X		X		Different answering categories: yes and no.
a827	Job before military or social service	arb59	X		X		
a828	Last occupation	arb60	X		X		1. digits of ISCO '88
a829	Employment	arb61	X		X		Country specific answering categories; category "farming" not available. Additional answering category "trainee".
a830	Reason for stopping work	arb62	X		X		
a831	Paid work (last 7 days)	arb02a	X		X		
a832	Current occupation	arb07	X		X		
a833m, a833y	Date of job start	arb08_mnd, arb08_aar	X		X		
a834	Part or full time job	arb10a	X		X		
a835	Working time	arb09	X		X		
a836	Description about the job	arb11	X		X		
a837	Work schedule	arb13	X		X		Different filter: not if self-employed (a838=2). Different answering categories: categories 7, 8, 9 not available.
a838	Employment	arb12	X		X		
a839	Satisfaction about current job	arb14	X		X		
a840	Supervision about work of personnel	arb15	X		X		
a841	Composition of local business unit	arb16	X		X		
a842	Work-place in privat or public organisation	arb17	X		X		Different answering categories: category 3 ("mixed") not available.
a843_a	Employer benefits for child care						

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a843_b	Employer benefits for health care						
a843_c	Employer benefits for further education						
a843_d	Employer benefits for housing						
a844	Employer allowance for flexible time arrangements	arb18a / arb18b / arb18c	X		X		
a845	Permanent or time limited job	arb19	X		X		Different answer categories: 1. Permanent, not limited in time, 3. Temporary, (2 - fixed term is not available)
a846	Kind of not permant job						
a847	Satisfaction about job security						
a848	Intention for a job change (next 3 years)	arb21	X		X		Different answering categories: yes and no.
a849	Intention to quit paid job (next 3 years)	arb22	X		X		Different answering categories: yes and no.
a850	Satisfaction about self-employment	arb23	X		X		
a851	No of paid employees	arb24	X		X		
a852	Expected development of the business (next 3 years)	arb25	X		X		
a853	Intention to start new business (next 3 years)	arb26	X		X		Different answering categories: yes and no.
a854	Intention to quit the business (next 3 years)	arb27	X		X		Different answering categories: yes and no.
a855_a	Frequency of disregarding the chores						
a855_b	Frequency of disregarding the family responsibilities						
a855_c	Frequency of late arrival at work						
a855_d	Frequency of concentration difficulties						

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a856	Intention for retirement or early retirement (next 3 years)	arb22, arb27, arb37a-d	X		X		Based on several questions on retirement intentions. Different filter: age 50 years or older. Only two answering categories.
a857_a	Development after retirement: self-realization	arb34a	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a857_b	Development after retirement: finances	arb34b	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a857_c	Development after retirement: others people opinion	arb34c	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a857_d	Development after retirement: satisfaction from life	arb34d	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a857_e	Development after retirement: health	arb34e	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a857_f	Development after retirement: relation to the partner	arb34f	X		X		Different filter: if aged 50+ and if R have co-residential partner. Different answering scale: 0 to 10.
a857_g	Development after retirement: relation to children and grandchildren	arb34g	X		X		Different filter: if aged 50+ and if R have children aged 18+. Different answering scale: 0 to 10.
a858_a	Decision for retirement depend on finances	arb35a	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a858_b	Decision for retirement depend on the work	arb35b	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a858_c	Decision for retirement depend on the own health	arb35c	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a858_d	Decision for retirement depend on the family life	arb35d	X		X		Different filter: if aged 50+. Different answering scale: 0 to 10.
a859_a	Partners opinion about retirement	arb36a	X		X		Different filter: if aged 50+ and if R have co-residential partner. Different answering scale: 0 to 10.
a859_b	Childrens opinion about retirement	arb36b	X		X		Different filter: if aged 50+ and if R have children aged 18+. Different answering scale: 0 to 10.

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a859_c	Friends opinion about own retirement	arb36c	X		X		Filter is 50 years and older (not 46 years). Different answering scale (0 to 10)
a859_d	Relatives opinion about own retirement						
a860	Additional job	arb39a	X		X		
a861	Kind of additional activity						
a862	Working time in additional job	arb39b	X		X		
a863	Additional job						
a864_1, a864_2, a864_3, a864_4, a864_5, a864_6, a864_7, a864_8, a864_9	Types of income (last 12 months)		X			X	Country specific variable, a864_2 "earnings from an additional job or business" are not separately available and are included in a864_1 "earning from a job or business". A864_2 is always 9 (not applicable)
a865_x	Number of received payments (last 12 months)		X			X	
a866_x	Net amount of income types (last 12 months)		X			X	Net amount in Norwegian Kroner. All amounts rounded in steps of 10.000 NOK. If there was an income in a category but the amount was less than 5000 NOK, then the variable a866 has a value of 0 NOK. The maximum amount may also include respondents with higher incomes, but to make the data anonymous, they were included in the highest group. (Example: All incomes from a main job higher than 4.000.000 were ceiled down to 4.000.000). a866_2 (additional job) and a866_4 (survivor benefits) are not separately available. "Net amount of additional job earnings" is part of a866_1 "Net amount job earnings" and "survivor benefits" are part of a866_3 "Net amount for pensions."
a867_x	Range of income types						
							Different filter for all questions about partner's activity: only co-resident partners are included
a901	Partners activity	arbp01	X		X		Different answer categories: 2 is not available.
a902	Partner on maternity or parental leave	arbp14	X		X		
a903m, a903y	Start date of maternity or parental leave	arbp15_mnd, arbp15_aar	X		X		

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a904a	Paid work in last week						
a904b	Full-time or part-time leave						
a905	Opportunity for the partner to resume work after parental leave	arbp16	X		X		
a906a	Partners intention to resume work after parental leave						
a906b	Partners wish to resume work after parental leave						
a907m, a907y	Date since start of unemployment of the partner	arbp17_mnd, arbp17_aar	X		X		
a908	Partner had a job before unemployment	arbp18	X		X		
a909m, a909y	Start date of studying of the partner	arbp19_mnd, arbp19_aar	X		X	X	
a910	Partner had a job before studying	arbp20 / arbp21	X		X		
a911m, a911y	Start date of retirement of the partner	arbp22_mnd, arbp22_aar	X		X		
a912	Partner had a job before retirement	arbp23a	X		X		
a913	Partner had a job before illness						
a914m, a914y	Start date of housewife/house husband status of the partner	arbp24_mnd, arbp24_aar	X		X		
a915	Partner had a job before housewife/house husband status	arbp25	X		X		
a916	Partner had a job before military or social service	arbp26	X		X		
a917	Last occupation of the partner	arbp27	X		X		1 digist of ISCO '88

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a918	Partners employment	arbp28	X		X		Different answering category, "farmer" not available, additional category "trainee"
a919	Partners reason for stopping work	arbp29	X		X		
a920	Partner in paid work (last 7 days)	arbp02a	X		X		
a921	Current occupation of the partner	arbp03	X		X		
a922	Partner in part or full time job	arbp05a	X		X		
a923	Working time of the partner	arbp04	X		X		
a924	Statement about partners work	arbp06	X		X		
a925	Work schedule of the partner	arbp08	X		X		Different filter: not if partner is self-employed (a918=2). Answering categories 5,7,8 and 9 are not available.
a926	Partners employment	arbp07	X		X		
a927	Partner supervise about work of personnel	arbp09	X		X		
a928	Partner work in a private or public organisation	arbp10	X		X		Answering category 3 "mixed" is not available.
a929_a	Partners employer benefits for child care						
a929_b	Partners employer benefits for health care						
a929_c	Partners employer benefits for further educational training						
a929_d	Partners employer benefits for housing						
a930	Partner employer allowance for flexible time arrangements	arbp11b	X		X		
a931	No of paid employees of the partner	arbp12	X		X		

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a932	Partners additional job	arbp13a	X		X		
a933	Kind of additional activity of the partner						
a934	Working time of the partner for additional job	arbp13b	X		X		
a935	Partners additional job						
a936_1, a936_2, a936_3, a936_4, a936_5, a936_6, a936_7, a936_8, a936_9	types of income of the partner (last 12 months)		X			X	Country specific variable, a936_2 "earnings from an additional job or business" are not separately available and are included in a936_1 "earning from a job or business". A936_2 is always 9 (not applicable)
a937_x	No of received payments of the partner (last 12 months)		X			X	
a938_x	Net amount of income types of the partner (last 12 months)		X			X	Net amount in Norwegian Kroner. All amounts rounded in steps of 10.000 NOK. If there was an income in a category but the amount was less than 5000 NOK, then the variable a938 has a value of 0 NOK. The maximum amount may also include respondents with higher incomes, but to make the data anonymous, they were included in the highest group. (Example: All incomes from a main job higher than 4.000.000 were ceiled down to 4.000.000). a938_2 (additional job) and a938_4 (survivor benefits) are not separately available. Additional job earnings are part of a936_1 "net amount for job earnings" and survivor benefits are part of a936_3 "Net amount for pensions".
a939_x	Range of income for each payment types of the partner						
a1001_a	Household appliance: colour TV	spm41_1	X	X			
a1001_b	Household appliance: videorecorder or DVD player	spm41_2	X	X			
a1001_c	Household appliance: washing machine	spm41_3	X	X			

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a1001_d	Household appliance: microwave	spm41_4	X	X			
a1001_e	Household appliance: home computer	spm41_5	X	X			
a1001_f	Household appliance: dishwasher	spm41_6	X	X			
a1001_g	Household appliance: telephone	spm41_7	X	X			Different question: only asked about mobile phone.
a1001_h	Household appliance: private car or van	spm41_8	X	X			
a1001_i	Household appliance: second car	spm41_9	X	X			
a1001_j	Household appliance: second home	spm41_10	X	X			
a1002	Management with household income	ecie01a / ecie01b	X		X		
a1003_a	Wish/reality of a warm home						
a1003_b	Wish/reality of an annual holiday trip						
a1003_c	Wish/reality of buying new furniture if needed						
a1003_d	Wish/reality of buying new clothes						
a1003_e	Wish/reality of eating meat every second day						
a1003_f	Wish/reality of having a meal or drink with acquaintance (once a month)						
a1004_a	Unpaid rent for accomodation						
a1004_b	Unpaid mortgages						
a1004_c	Unpaid utility bills						
a1004_d	Unpaid purchase instalment						

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a1005	Saving opportunities	eie04	X		X		
a1006_a, a1006b, a1006c, a1006d, a1006e	Types of income (not from employment)						
a1007_a	Received incomes by others in the houshold (last 12 months): wages						
a1007_b	Received incomes by others in the houshold (last 12 months): child alimony						
a1007_c	Received incomes by others in the houshold (last 12 months): educational grants						
a1007_d	Received incomes by others in the houshold (last 12 months): maternity and parental leave benefits						
a1007_e	Received incomes by others in the houshold (last 12 months): unemployment benefit						
a1007_f	Received incomes by others in the houshold (last 12 months): incapacity benefits						
a1007_g	Received incomes by others in the houshold (last 12 months): retirement pension						

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a1007_h	Received incomes by others in the household (last 12 months): social assistance payments						
a1007_i	Received incomes by others in the household (last 12 months): widow's or survivor's or war benefit						
a1008, a1008u	Average net income of all household members (last 12 months)						
a1009	Range of net income of the household						
a1010	Regular transfers from non-household person	ove01	X		X		
a1011_x	Person who provides money	ove02_x	X		X		
a1012_x	Received money from inheritance	ove03_x	X		X		
a1013_x	Occasional or regular transfer						
a1014_x	Value of the received assets (last 3 years)						
a1015	Own or partners given assets (last 3 years)	ove06	X		X		
a1016_x	Person who received paid asset	ove07_x	X		X		
a1017_x	Occasional or regular transfer						
a1018_x	Value of the paid asset (last 12 months)						
a1101	Religious denomination	hol01	X		X		Country specific list.
a1102, a1102u	No of attendances in religious services	spm3_24	X	X			Different answering categories

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a1103_a	Opinion about the importance of religious registration of children	spm30_1	X	X			
a1103_b	Opinion about the importance of a religious wedding for a couple	spm30_2	X	X			
a1103_c	Opinion about the importance of a religious funeral	spm30_3	X	X			
a1104a	Most important aim for the future	spm49_1 / spm49_2 / spm49_3 / spm49_4	X	X			Different questions: asked as separate items. Different answering categories.
a1104b	Second important aim for the future	spm49_1 / spm49_2 / spm49_3 / spm49_4	X	X			Different questions: asked as separate items. Different answering categories.
a1105	Estimation about trustworthiness about the people	spm52	X	X			
a1106	Opinion about others people fairness	spm53	X	X			
a1107_a	Opinion about marriage	spm44_1	X	X			
a1107_b	Opinion about cohabitation	spm44_2	X	X			
a1107_c	Opinion about lifetime marriage	spm44_3	X	X			
a1107_d	Opinion about divorce (also in case of having children)	spm44_4	X	X			
a1107_e	Opinion about women's fulfillment due to children	spm44_5	X	X			
a1107_f	Opinion about men's fulfillment due to children	spm44_6	X	X			
a1107_g	Opinion about home with father and mother for happy children	spm44_7	X	X			
a1107_h	Opinion about single mothers (also voluntary ones)	spm44_8	X	X			

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a1107_i	Opinion about leaving parental home when 18-20	spm44_9	X	X			
a1107_j	Opinion about same rights for homosexual couples	spm44_10	X	X			
a1108_1, a1108_2, a1108_3	First three important qualities of children	spm47_1 to spm47_11	X	X			Different questions: asked as separate items. Different answering categories.
a1109_1, a1109_2, a1109_3	First three important aspects of a job	spm48_1 to spm48_11	X	X			Different questions: asked as separate items. Different answering categories.
a1110_a	Opinion about responsibility for domestic care for the elderly	spm28_1	X	X			
a1110_b	Opinion about responsibility for childcare	spm28_3	X	X			
a1110_c	Opinion about responsibility for after school care for children	spm28_4	X	X			
a1110_d	Opinion about responsibility for financial support for the poor elderly	spm28_5	X	X			
a1110_e	Opinion about responsibility for financial support for the poor elderly	spm28_6	X	X			
a1111_a	Opinion about grandparents duty to care for their grandchildren	spm29_1	X	X			
a1111_b	Opinion about parental help to children with financial difficulties	spm29_2	X	X			
a1111_c	Opinion about adjustment of parents live to support adult children	spm29_3	X	X			
a1112_a	Opinion about childrens responsibility to care for their parents	hol02a	X		X		Different answering scale: 0 to 10

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a1112_b	Opinion about adjustment of childrens working lives to support the parents	hol02b	X		X		Different answering scale: 0 to 10
a1112_c	Opinion about caring responsibility for the parents by male or female children	hol02c	X		X		Different answering scale: 0 to 10
a1112_d	Opinion about childrens help to parents with financial difficulties	hol02d	X		X		Different answering scale: 0 to 10
a1112_e	Opinion about care responsibility of the children for their parents	hol02e	X		X		Different answering scale: 0 to 10
a1113_a	Opinion about age difference for a couple	spm45_1	X	X			
a1113_b	Opinion about the effect of wage differences for a relationship	spm45_2	X	X			
a1113_c	Opinion about differences to political leaders	spm45_3	X	X			
a1113_d	Opinion about women's self-determination about their income	spm45_4	X	X			
a1113_e	Opinion about equal fulfilment in paid work and household work	spm45_5	X	X			
a1113_f	Opinion about a negative effect on children due to mothers work	spm45_6	X	X			
a1113_g	Opinion about a negative effect on children due to fathers work	spm45_7	X	X			
a1113_h	Opinion about the parent who should get the child after the divorce	spm45_8	X	X			

Var-ID	Variable	national ID	Availability	SAQ	CATI	Register	Details and justification
a1114_a	Opinion about job preferences for men in times of employment scarcity	spm46_1	X	X			
a1114_b	Opinion about job preferences for the young in times of employment scarcity	spm46_2	X	X			
a1114_c	Opinion about job preferences for person with children in times of employment scarcity	spm46_3	X	X			
	type of dwelling of the respondent	hus10	X		X		Country specific answering categories
	floor where respondent lives	hus12	X		X		1. floor in Norway = ground floor

6. LOGG Questionnaire

6.1. Computer assisted telephone contact (CATI)

In the following, questions and responses are typed in either small or capital letters. The interviewers were directed to read aloud to the respondent everything in small letters, whereas everything in capital letters was meant to support the interviewer and should not be read aloud to the respondent.

R = Respondent

NOK = Norwegian Crones

Family and household members		
Var-ID LOGG		Var-ID GGS
Person_fam 01_x	<p>According to public registers, [your family comprises the following persons/you live alone]. Is this correct? "Your family" mean persons that you live with AND own children that are alive, whether they live with you or not.</p> <p>IF R LIVES IN A SHARED ACCOMMODATION, ONLY THESE PERSONS WHO SHARE FOOD. IF R LIVES WITH SEVERAL GENERATIONS, ONLY THESE PERSONS WHO SHARE FOOD. IF R LIVES AT ANOTHER PLACE THEN REGISTERED IN THE PUBLIC REGISTER, THE R SHOULD ANSWER ABOUT THE NEW ADDRESS IF THIS IS HIS/HER MAIN ADDRESS (FOR EXAMPLE STUDENTS) OR ABOUT HIS/HER OLD REGISTERED ADDRESS IF THIS IS HIS/HER MAIN ADDRESS (FOR EXAMPLE COMMUTER).</p> <p>FOR EACH PERSON ON THE LIST: What is your family relationship to [name]?</p> <ol style="list-style-type: none"> 1. RESPONDENT (= R) 2. SPOUSE 3. REGISTERED PARTNER 4. COHABITING PARTNER 5. OWN CHILD WITH CURRENT COHABITING PARTNER/SPOUSE/REGISTERED PARTNER 6. OWN CHILD WITH OTHER THAN POSSIBLE CURRENT COHABITING PARTNER/SPOUSE/REGISTERED PARTNER 7. STEP CHILD, CHILD PERSONS WITH CATEGORIES 2-4 HAVE FROM PREVIOUS RELATIONSHIPS 8. FOSTER CHILD 9. FATHER 10. MOTHER 11. STEP PARENT 12. FOSTER PARENT 13. PARENT TO COHABITING PARTNER/SPOUSE/REGISTERED PARTNER 14. STEP OR FOSTER SIBLING 15. SPOUSE/ REGISTERED PARTNER TO PERSON IN CATEGORIES 5-7 16. COHABITING PARTNER TO PERSON IN CATEGORIES 5-7 17. GRANDCHILD OR GREAT-GRANDCHILD (OR COHABITING PARTNER/SPOUSE/REGISTERED PARTNER'S) 18. GRANDPARENT OR GREAT-GRANDPARENT (OR COHABITING PARTNER/SPOUSE/REGISTERED PARTNER'S) 19. BROTHER OR SISTER (OR COHABITING PARTNER/SPOUSE/REGISTERED PARTNER'S) 20. OTHER RELATIVE (OR COHABITING PARTNER/SPOUSE/REGISTERED PARTNER'S) 21. TENANT/LODGER 22. WORKER (E.G. APPRENTICE/AU PAIR) 23. OTHER PERSON, NOT A RELATIVE 24. SPOUSE/REGISTERED PARTNER TO PERSONS IN CATEGORIES 20-23 25. COHABITING PARTNER TO PERSONS IN CATEGORIES 20-23 	Ahg3_x

Var-ID LOGG		Var-ID GGS
Person_fam02_x	<p>Does he/she live with you all of the time or just part of the time? PART OF THE TIME MEANS THAT THEY LIVE TOGETHER AT LEAST ONE WEEKEND DURING AN ORDINARY MONTH</p> <ol style="list-style-type: none"> 1. Yes, all of the time 2. Yes, part time 3. No 	
Person_fam03_x	<p>IF LIVES PART OF THE TIME WITH R (FAM02= 2) AND HAS CATEGORIES 6, 7 OR 8 IN FAMILY RELATIONSHIP AND IS UNDER 18 YEARS</p> <p>During an ordinary month, how often does [name] live with you?</p> <ol style="list-style-type: none"> 1. ABOUT ONE WEEKEND PER MONTH 2. ABOUT EVERY OTHER WEEKEND AND ONE WEEK DAY 3. ABOUT ONE WEEK 4. ABOUT HALF OF THE TIME 5. ABOUT 3 WEEKS OR MORE 	
Person_fam04_x	<p>IF LIVES PART OF THE TIME WITH R OR DOES NOT LIVE WITH R (FAM02=2 OR 3) AND HAS CATEGORIES 6, 7 OR 8 AND IS 18 YEARS OR MORE, OR IF LIVES PART OF THE TIME OR NOT WITH R AND HAS CATEGORIES 2, 3, 4, 5, 9-25</p> <p>Where does [NAME] live when [he/she] does not live with you. Is [NAME]</p> <ol style="list-style-type: none"> 1. Living in an other dwelling 2. In the military or doing civil service 3. Commuting 4. In education elsewhere 5. In hospital 6. In old age- or nursing home → person_fam05_x 7. Other institution → person_fam05_x 8. OTHER 	
Person_fam05_aar_x Person_fam05_mnd_x	<p>IF FAM04=6 OR 7</p> <p>When did he/she move there [to old age- or nursing home/institution]? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01</p> <p>MONTH [____] YEAR [____]</p> <p>DON'T KNOW</p>	
	<p>Fam06¹</p> <p>Are there any other persons in your family that we have not mentioned? With "your family", we mean persons that lives with you and own children that are alive, whether they are registered on your address or not (E.G. COHABITING PARTNER, FOSTER CHILD, APPRENTICE OR NEWBORN CHILD)</p> <ol style="list-style-type: none"> 1. YES → Fill in household (fam01) 2. NO → bar10 	Ahg2_x
The household		
hus01	<p>IF R LIVES WITH [COHABITING PARTNER/SPOUSE/REGISTERED PARTNER]</p> <p>Does your [cohabiting partner/ spouse/registered partner] have any children from previous relationships that do not live with you?</p> <ol style="list-style-type: none"> 1. YES → hus02 2. NO → hus07 	A226
	<p>Hus 02²</p> <p>IF HUS01=1</p> <p>What are their names?</p> <p>01 [NAME] 02 [NAME] 03 [NAME]</p>	A227

¹ If someone were included in this question, they were added to the other household-variables.

² Question Hus02 is not a variable. Names of the step-children are only used as a help when asking about them.

Var-ID LOGG		Var-ID GGS
Barn_hus03_x	IF HUS01=1. (TO BE FILLED IN BY INTERVIEWER IF OBVIOUS. FOR EVERY PERSON IN HUS02) Is [NAME] male/female? 1. MALE 2. FEMALE	A229_x
Barn_hus04_x	IF HUS01=1. FOR EVERY PERSON IN HUS02 How old is [NAME]? AGE ____ DON'T KNOW	A230m_x A230y_x
Barn_hus05a_x	IF YES HUS01. TO BE ASKED FOR EVERY PERSON I HUS02 Are you together with [NAME] weekly, monthly, annually or less often? 1. WEEKLY 2. MONTHLY 3. ANNUALLY 4. LESS OFTEN 5. NEVER	A236u_x
Barn_hus05b_x	IF TOGETHER WITH PARTNER'S CHILD WEEKLY, MONTHLY OR ANNUALLY (HUS05A=1, 2 OR 3) About how many times are you together per [week/month/year]? NUMBER OF TIMES PER [WEEK/MONTH/YEAR] _____	A236_x
hus06	IF ANY OF THE CHILDREN IN HUS04 ARE 20 YEARS OR OLDER Do any of the children of [COHABITING PARTNER/SPOUSE/REGISTERED PARTNER] have children of their own? 1. YES 2. NO	
Person_hus07_x	IF THERE ARE PERSONS IN THE HOUSEHOLD THAT ARE 18 YEARS OR OLDER THAT ARE NOT COHABITING PARTNER/SPOUSE/REGISTERED PARTNER (LIST). TO BE ASKED FOR EACH PERSON IN THE LIST. IF PERSON IS CATEGORY 22 (WORKER, AS E.G. APPRENTICE/AU PAIR) IT CAN BE FILLED IN AS "1. EMPLOYED" BY INTERVIEWER I will now ask about the work situation and daily activities of adults in your household. Which category best describes what [NAME] is mainly doing at present. WE WANT INFORMATION ABOUT WORK SITUATION/ DAILY ACTIVITIES. QUESTIONS ABOUT R AND COHABITING PARTNER/SPOUSE/REGISTERED PARTNER WILL BE ASKED LATER IN THE INTERVIEW EVERYBODY 1. Employed EVERYBODY 2. Student, schoolchild or in vocational training IF YOUNGER THAN 67 YEARS 3. Unemployed IF YOUNGER THAN 67 YEARS OLD 4. On Disability pension IF MINIMUM 62 AND MAXIMUM 66 YEARS OLD 5. On Negotiated pension IF FROM 55 AND UP TO 66 YEARS OLD 6. On Occupational pension IF OLDER THAN 67 YEARS OLD 7. On old age pension from the National Scheme EVERYONE 8. Homemaker IF MALE AND YOUNGER THAN 30 YEARS OLD 9. Military or civil service 10. Other	Ahg8_x

Var-ID LOGG		Var-ID GGG
hus09f_x	IF YES HUS09D Do you know the cause for the memory problems? 1. YES → hus09g 2. NO → hus09h	
hus09g_x	IF YES HUS09F Is it caused by dementia, stroke or something else? 1. DEMENTIA/ALZHEIMER 2. STROKE/HEART ATTACK 3. SOMETHING ELSE	
hus09h_x	IF YES HUS09A. TO BE ASKED FOR EACH PERSON THAT IS 18 YEARS OR OLDER MARKED WITH LIMITATIONS Does [NAME] need help with daily activities? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT. 1. YES 2. NO	
hus09h1_x	IF YES HUS09A. TO BE ASKED FOR EACH PERSON UNDER 18 YEARS MARKED WITH LIMITATIONS Does [NAME] need extra help with daily activities? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT. 1. YES 2. NO	
hus09i_x	IF YES HUS09A. TO BE ASKED FOR EACH PERSON MARKED WITH LIMITATIONS Does [NAME] need assistance with personal care? 1. YES 2. NO	
hus09j_x	IF YES HUS09H AND/OR YES HUS09I Who helps [NAME]? MULTIPLE ANSWERS POSSIBLE 1. NOBODY 2. RESPONDENT 3. COHABITING PARTNER, SPOUSE/REGISTERED PARTNER 4. HOME NURSING CARE 5. OTHER FAMILY 6. PERSONAL ASSISTANT 7. OTHERS	
The dwelling		
hus10	EVERYONE I'm now going to ask you some questions about your current dwelling unit. Do you live in 1. A detached house → hus13a 2. A farmhouse → hus13a 3. An attached (row) house → hus13a 4. An apartment or room → hus11 5. In an institution → hus13a 6. Other → hus13a	A1202
hus11	IF LIVES IN APARTMENT OR APARTMENT BUILDING (HUS10=4) If R lives in an apartment: Does the building you live in have an elevator? 1. YES 2. NO	A1202
hus12	IF LIVES IN APARTMENT (HUS10=4) AND OLDER THAN 50 YEARS On which floor do you live? FLOOR _____	A1203

Var-ID LOGG		Var-ID GGS
hus19	EVERYONE On a scale from 0 to 10, where 0 means "not at all satisfied" and 10 means "completely satisfied", how satisfied are you with the neighborhood/parish/borough that you presently live in? VALUE _____	
hus20	EVERYONE Do you intend to move within the next three years? 1. YES → hus21 2. NO	A146
hus21	IF YES (HUS20=1) Would that be to another country, to another municipality or within the same municipality? 1. TO ANOTHER COUNTRY 2. TO ANOTHER MUNICIPALITY 3. WITHIN THE SAME MUNICIPALITY 4. DON'T KNOW	A147
Children		
Care for children		
	Now I will ask some questions about child care.	
bar01	IF R LIVES WITH CHILD UNDER 14 YEARS IN THE HOUSEHOLD (FAM02=1 OR 2) WITH CATEGORIES, 6, 7 OR 8 (FAM01), BUT DOES NOT LIVE WITH [COHABITING PARTNER/SPOUSE/REGISTERED PARTNER] I'm going to read out various tasks that have to be done when one lives with children. Please tell me, who in your household does these tasks? IF R ANSWERS "ALWAYS OR USUALLY OTHERS IN THE HOUSEHOLD", NOTE THE PERSON'S REFERENCE NUMBER FROM FAM01	A201
bar01a	Dressing the children or seeing that the children are properly dressed	A201b_a
bar01b	Putting the children to bed and/or seeing that they go to bed	A201b_b
bar01c	Staying at home with the children when they are ill	A201b_c
bar01d	Playing with the children and/or taking part in leisure activities with them	A201b_d
bar01e	ONLY IF ONE OR MORE OF THE CHILDREN ARE 6 YEARS OR OLDER Helping the children with homework	A201b_e
bar01f	Taking the children to/from school, day care centre, babysitter or leisure activities	A201b_f
bar01	ANSWER CATEGORIES FOR BAR01 1. Always you 2. Usually you 3. Always or usually others in the household ³ → NOTE REF NR. FROM HOUSEHOLD INFORMATION 4. Always or usually someone that does not live in the household 5. The children do it themselves 6. NOT RELEVANT	A201
	Bar02 ⁴ IF R LIVES WITH CHILD UNDER 14 YEAR IN THE HOUSEHOLD (FAM02=1 OR 2) WITH CATEGORIES 5, 6, 7 OR 8 (FAM01), AND TOGETHER WITH [COHABITING PARTNER/SPOUSE/REGISTERED PARTNER] I'm going to read out various tasks that have to be done when one lives with children. Please tell me, who in your household does these tasks? IF R ANSWERS "ALWAYS OR USUALLY OTHERS IN THE HOUSEHOLD", NOTE THE PERSON'S REFERENCE NUMBER FROM FAM01	A201
	Dressing the children or seeing that the children are properly dressed	A201b_a
	Putting the children to bed and/or seeing that they go to bed	A201b_b

³ If answer 3: Always or usually others in the household, structure of variable names LOGG: bar01x_x, GGS: A201b_xx

⁴ Questions bar01 and bar02 are identical, except somewhat different wording depending on having a cohabiting partner/spouse/registered partner or not. In the data file these are combined in variables bar01a to bar01f.

Var-ID LOGG		Var-ID GGS
	Staying at home with the children when they are ill	A201b_c
	Playing with the children and/or taking part in leisure activities with them	A201b_d
	ONLY IF ONE OR MORE OF THE CHILDREN ARE 6 YEARS OR OLDER Helping the children with homework	A201b_e
	Taking the children to/from school, day care centre, babysitter or leisure activities	A201b_f
	ANSWER CATEGORIES FOR BAR02 1. Always you 2. Usually you 3. You and [cohabiting partner/spouse/reg. partner] share the task quite equally 4. Usually [cohabiting partner/spouse/reg. partner] 5. Always [cohabiting partner/spouse/reg. partner] 6. Always or usually someone else in the household → NOTE REF NR. FROM FAM01 7. Always or usually someone that does not live in the household 8. The children do it themselves 9. NOT RELEVANT	A201
bar03	IF R LIVES WITH CHILD UNDER 14 YEARS IN THE HOUSEHOLD (FAM02=1 OR 2) WITH CATEGORY 5, 6, 7 OR 8 (FAM01), AND WITH [COHABITING PARTNER/SPOUSE/REGISTERED PARTNER] On a scale from 0 to 10, where 0 means "not at all satisfied" and 10 means "completely satisfied", how satisfied are you with how these tasks are divided between you and your [cohabiting partner/spouse/ registered partner]? VALUE _____	A202
bar04a	IF R LIVES WITH CHILD UNDER 11 YEAR IN THE HOUSEHOLD (FAM02=1 OR 2) WITH CATEGORY, 6, 7 OR 8 (FAM01) I will now ask some questions about children and childcare. Do you get regular paid help with childcare for one or more of the children in the household in the day time? The time that children spend at school should not be included, but for school-age children include time spent in e.g. an after school care-centre. 1. YES → bar04b 2. NO → bar06a	A203a
bar04b_x	IF YES (BAR04A=1). ASKED FOR EACH CHILD I would like to know what kind of childcare you have for each of the children. Let's start with [NAME]. MULTIPLE ANSWERS POSSIBLE 1. RELATIVE 2. BABYSITTER 3. APPRENTICE/AU PAIR 4. DAY CARE CENTRE 5. PLAY GROUND 6. AFTER-SCHOOL CARE CENTER 7. OTHER 8. NO ARRANGEMENT	A203b_x
bar04c_x	IF YES (BAR04A=1). TO BE ASKED FOR EACH CHILD About how many hours per week do you use this childcare? _____ HOURS PER WEEK	A203c_x A203cu_x
bar05	IF YES (BAR04A=1). About how much in total do you pay for these childcare arrangements per month? _____ NOK PER MONTH	A204 A204u
bar06a	IF R LIVES WITH CHILD UNDER 11 YEARS IN THE HOUSEHOLD (FAM02=1 OR 2) WITH CATEGORY 5, 6, 7 OR 8 (FAM01) Do you (also) get regular help with childcare from relatives or friends or other people? HERE WE ASK ABOUT HELP FROM OTHER PEOPLE THAN R'S COHABITING PARTNER/SPOUSE/REGISTERED PARTNER IN THE HOUSEHOLD 1. YES → bar06b 2. NO → bar07a	A204a

Var-ID LOGG		Var-ID GGS
bar06b_x	IF YES (BAR06A=1) Who helps you? RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS. 01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]	A204b_x
bar06c_x	TO BE ASKED FOR EACH PERSON IN BAR06B Do you get help from [REF. PERSON] regularly or only when you need it? 1. REGULARLY 2. WHEN YOU NEED IT	
bar06d_x	TO BE ASKED FOR EACH PERSON In BAR06B Do you receive this help weekly, monthly or annually? 1. WEEKLY 2. MONTHLY 3. ANNUALLY	A204cu_x
bar06e_x	IF BAR06D=1, 2 OR 3 About how many times is this per [week/month/year]? _____ NUMBER OF TIMES PER [WEEK/MONTH/YEAR]	A204c_x
bar07a	EVERYONE Do you regularly help others with childcare? REGULARLY HERE MEANS AT LEAST ONCE A MONTH TO THE SAME PERSON. IF R MENTIONS THAT HE/SHE WORKS AS A BABYSITTER OR IN DAY CARE CENTER, ONLY INCLUDE CHILDCARE THAT HE/SHE DOES WHEN HE/SHE IS NOT AT WORK. 1. YES → bar07b 2. NO → bar08	A208a
bar07b_x	IF YES (BAR07A=1) Who did you help with childcare? RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS. 01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]	A208b_x
bar07c_x	TO BE ASKED FOR EACH PERSON IN BAR07B Do you help [REF. PERSON] regularly or when needed? 1. REGULARLY 2. WHEN NEEDED	
bar07d_x	TO BE ASKED FOR EACH PERSON IN BAR07B Do you give this help weekly, monthly or annually? 1. WEEKLY 2. MONTHLY 3. ANNUALLY	
bar07e_x	TO BE ASKED FOR EACH PERSON IN BAR07B About how many times is this per [week/month/year]? _____ NUMBER OF TIMES PER [WEEK/MONTH/YEAR]	
Other children not in the household		
bar10	IF R HAS OWN CHILD (FAM01=5 OR 6) We have talked about your children. Besides those [NUMBER OF CHILDREN], do you have other children that is not mentioned yet? THIS COULD BE CHILDREN THAT E.G. IS NO LONGER ALIVE. 1. YES → bar15 2. NO → bar21	a209

Var-ID LOGG		Var-ID GGS
bar09	ONLY ABOUT THE OLDEST CHILD OLDER THAN 18 YEARS IF HE/SHE LIVES IN THE HOUSEHOLD. ONLY OWN CHILD. On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied, on the whole, are you with your relationship to [NAME]? VALUE _____	
bar23a_x	IF CHILD NOT IN THE HOUSEHOLD THAT IS STILL ALIVE Do you see [name] weekly, monthly, annually, or less often? 1. WEEKLY 2. MONTHLY 3. ANNUALLY 4. LESS OFTEN 5. NEVER	A223u_x
bar23b_x	IF TOGETHER WITH CHILD NOT IN THE HOUSEHOLD WEEKLY, MONTHLY OR ANNUALLY (BAR23A=1, 2 OR 3) About how many times per [week/month/year] do you see each other? _____ TIMES PER [WEEK/MONTH/YEAR]	A223_x
bar24	IF OLDEST CHILD MORE THAN 18 YEARS DOES NOT LIVE IN THE HOUSEHOLD. ONLY OWN CHILD Now I will ask some questions about your relationship to your oldest child. Think of the relationship you have to [NAME OF THE OLDEST CHILD]. On a scale from 0 to 10, where 0 means "strongly disagree" and 10 means "strongly agree", how much do you agree with the following statements?	
bar24a	We agree on what is important in life VALUE _____	
bar24b	We have frequent conflicts VALUE _____	
bar24c	[he/she] often criticizes me VALUE _____	
bar24d	[he/she] understands me when I have problems VALUE _____	
bar25	IF OLDEST CHILD OLDER THAN 18 DOES NOT LIVE IN THE HOUSEHOLD. ONLY OWN CHILD. On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied, on the whole, are you with your relationship to [NAME]? VALUE _____	A224_x
Relationship to adult step children		
bar26	IF R HAS [COHABITING PARTNER/SPOUSE/REGISTERED PARTNER] THAT HAS CHILDREN (SEE HUS01) AND ONE OF THESE CHILDREN ARE 18 YEARS OR OLDER (SEE HUS04) – ONLY THE OLDEST. You said previous that your [cohabiting partner/spouse/registered partner] has children from previous relationship. Think of the relationship you have to [NAME]. On a scale from 0 to 10, where 0 means "strongly disagree" and 10 means "strongly agree", how much do you agree with the following statements?	
bar26a	We agree on what is important in life VALUE _____	
bar26b	We have frequent conflicts VALUE _____	
bar26c	[he/she] often criticizes me VALUE _____	
bar26d	[he/she] understands me when I have problems VALUE _____	
bar27	IF R HAS [COHABITING PARTNER/SPOUSE/REGISTERED PARTNER] THAT HAS CHILDREN (SEE HUS01) AND WHERE ONE OF THESE CHILDREN IS 18 YEARS OR OLDER (SEE HUS04) – ONLY THE OLDEST. On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied are you, on the whole, with your relationship to [NAME]? VALUE _____	A237_x

Var-ID LOGG		Var-ID GGS
sam02a	IF COHABITING PARTNER WAS NOT REGISTERED WITH NATIONAL INSURANCE NUMBER FROM THE REGISTER IN ADVANCE Is your cohabiting partner born in Norway? 1. YES → sam03a / sam04 2. NO → sam02b	A303a
sam02b_1 andnr	IF COHABITING PARTNER IS NOT BORN IN NORWAY (SAM02A=2) In which country is [he/she] born? COUNTRY _____	A303b
sam02c_ mnd/_aar	IF COHABITING PARTNER NOT BORN IN NORWAY (SAM02A=2) When did [he/she] settle in Norway? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH _ _ YEAR _ _ DON'T KNOW	A303cm A303cy
sam03a	IF COHABITING PARTNER WAS NOT REGISTERED WITH NATIONAL INSURANCE NUMBER FROM THE REGISTER IN ADVANCE What is the highest level of education your partner/spouse has successfully completed? 1. ELEMENTARY SCHOOL → sam04a 2. SECONDARY SCHOOL → sam04a 3. COLLEGE/UNIVERSITY → sam03b 4. DON'T KNOW → sam04a	A308
sam03b	IF COLLEGE OR UNIVERSITY (SAM03A=3) Is this education of more than 5 years? 1. YES 2. NO	A308
sam04a	IF COHABITING PARTNER Do you have concrete plans of getting married within the next 2 years? 1. YES → sam05 2. NO → sam04b	
sam04b	IF NOT PLANNING TO GET MARRIED WITHIN THE NEXT 2 YEARS (SAM04A=2) Do you plan to getting married further ahead in time? 1. YES 2. NO	
sam05	IF COHABITING PARTNER Even if you feel than marriage is you and your partner's decision to make, other people might have opinions on what you should do. On a scale from 0 to 10 where 0 is "completely disagree" and 10 is "completely agree", how much do you agree with the following statements:	
sam05a	IF PARENTS ALIVE My parents think it is about time we get married VALUE _____	
sam05b	IF CHILD OVER AGE 6 My children think it is about time we get married VALUE _____	
sam05c	Most of my relatives think it is about time we get married VALUE _____	
sam05d	Most of my friends think it is about time we get married VALUE _____	

Var-ID LOGG		Var-ID GGS
sam13a1	IF NON-RESIDENT PARTNER (SAM06=1) Are you together with [him/her] one or several times per week? 1. YES 2. NO → sam13a2	A325u
sam13a2	IF NOT WITH NON-RESIDENT PARTNER WEEKLY (SAM13A1=2) Are you together with [him/her] monthly or annually? 1. MONTHLY 2. ANNUALLY	A325u
sam13b	IF TOGETHER WITH NON-RESIDENT PARTNER WEEKLY, MONTHLY OR ANNUALLY (SAM13A1=1 OR SAM13A2=1 OR 2) About how many times are you together per [week/month/year]? _____ TIMES PER [WEEK/MONTH/YEAR]	A325
sam14a	IF NON-RESIDENT PARTNER (SAM06=1) Is your non-resident partner in any way limited in his/her daily activities as a consequence of poor health, mental health problems or disability? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING OR TRANSPORT 1. YES → sam14b 2. NO → sam15	A326
sam14b	IF NON-RESIDENT PARTNER LIMITED (SAM14A=1) Is [he/she] limited very much, pretty much or not so much? 1. VERY MUCH 2. PRETTY MUCH 3. NOT SO MUCH	
sam14c	IF NON-RESIDENT PARTNER LIMITED(SAM14A=1) AND OVER 65 YEARS (SAM09) Does he/she have memory problems? 1. YES → sam14d 2. NO → sam14h	
sam14d	IF YES (SAM14C=1, 2 OR 3) Does [NAME] have problems with his/her memory that limit his/her ability to do daily activities? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT. HERE WE ONLY ASK FOR LIMITATIONS THAT IS A RESULT OF MEMORY PROBLEMS 1. YES → sam14e 2. NO → sam14h	
sam14e	IF YES SAM14D Has [NAME] been to the doctor concerning his/her memory problem? 1. YES 2. NO	
sam14f	IF YES SAM14D Do you know the reason for his/her memory problem? 1. YES → sam14g 2. NO → sam14h	
sam14g	IF YES (SAM14F=1) Is it caused by dementia, stroke or something else? 1. DEMENTIA/ALZHEIMER 2. STROKE/HEART ATTACK 3. SOMETHING ELSE	
sam14h	IF NON-RESIDENT PARTNER LIMITED (SAM14A=1) Does [NAME] need assistance with daily activities? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT. 1. YES 2. NO	

Var-ID LOGG		Var-ID GGS
sam14i	IF NON-RESIDENT PARTNER LIMITED (SAM14A=1) Does [NAME] need assistance with personal care? 1. YES 2. NO	
sam14j	IF YES SAM14H AND/OR YES SAM14I Who gives the needed assistance [NAME]? MULTIPLE ANSWERS POSSIBLE 1. NOBODY 2. RESPONDENT 3. HOME NURSING CARE 4. PERSONAL ASSISTANT 5. OTHER FAMILY 6. LIVES I INSTITUTION 7. OTHERS	
sam15	IF NON-RESIDENT PARTNER Do you intend to start living with your partner within the next 3 years? 1. YES 2. NO	A327
Partnership History		
sam16	IF MARRIED OR REGISTERED PARTNER I will now ask some questions about your [spouse/registered partner]. Were you cohabiting partners before you [got married/became registered partners]? 1. YES → sam17 2. NO → sam18a	
sam17_ mnd/ _aar	IF YES (SAM16=1) When did you first start living together? NOTE MONTH AND YEAR FOR THE FIRST TIME THEY STARTED LIVING TOGETHER USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	A301m A301y
sam18a	IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD Now I will ask some questions about previous live-in relationships. Except of your current [cohabiting partnership/marriage/registered partnership], have you ever before had a cohabiting partner or been married/had a registered partner? 1. YES → sam19a 2. NO → sam31a / par01	A333
sam18b	IF NOT COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD Now I will ask some questions about previous live-in relationships. Have you ever before been married or had a cohabiting partner or registered partner? 1. YES → sam19a 2. NO → sam31a / par04a	A333
sam19_ mnd_x/ _aar_x	IF PREVIOUS PARTNERSHIP (SAM18A=1 OR SAM18B=1) We would like to know when you were in this live-in relationship. Start with your last relationship. When did you start living together? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	A334m_x A334y_x

Var-ID LOGG		Var-ID GGS
sam26a_x	IF RELATIONSHIP ENDED, MOVED APART (SAM23=2) AND IF R HAS CHILDREN OF HIS/HER OWN Did you have children together with [him/her]? 1. YES → sam26b 2. NO → sam27	A345_x
sam26b_x	IF YES (SAM26A=1) With whom did your children mainly stay in the first year after you broke up? 1. WITH YOU 2. WITH [EX-COHABITING PARTNER/EX-SPOUSE/EX-REG. PARTNER] 3. WITH BOTH OF US 4. WITH RELATIVES 5. WITH OTHERS 6. AT A CHILDREN'S HOME 7. STARTED TO LIVE INDEPENDENTLY 8. CHILD WAS ALREADY LIVING INDEPENDENTLY 9. OTHER	A3461_x A3462_x A3463_x
sam27_x	IF MOVED APART (SAM23=1) On a scale from 0 to 10, where 0 means "no conflict" and 10 means "a lot of conflict", how much conflict was it between you and your partner relating to the break-up? VALUE _____	
sam28_mnd_x/_aar_x	IF PREVIOUS PARTNER DIED(SAM23=2) When did [he/she] die? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	A344m_x A344y_x
sam29_x	IF PREVIOUS PARTNER DIED (SAM23=2) AND IF OWN CHILD Did you have children together with [him/her]? 1. YES 2. NO	A345_x
sam30_x ⁶	sam30a IF PREVIOUS PARTNERSHIP AND IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD Except of your current [cohabiting partnership/marriage/registered partnership], have you ever had a cohabiting partner or been married/had a registered partner after this cohabitation? 1. YES → sam19b for next person 2. NO → sam31a	A351_x
sam30_x	sam30b IF PREVIOUS PARTNERSHIP AND IF NOT COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD Did you have other live-in relationships before that one? 1. YES → sam19b for next person 2. NO → sam31a	A351_x

⁶ Different wording in the questionnaire depending on whether respondent has cohabiting partner, spouse or registered partner in the household or not, but same variable in data file (sam30_x).

Var-ID LOGG		Var-ID GGS
Child maintenance		
sam31a	IF OWN CHILD IN THE HOUSEHOLD UNDER AGE 18 (FAM02=1 OR 2) WITH OTHER THAN CURRENT COHABITING PARTNER/SPOUSE/REGISTERED PARTNER (FAM01=6) You said before that you don't live with the [mother/father] of your child/children. Do you receive child maintenance for this child/these children? SOME CAN HAVE CHILDREN WITH MORE THAN ONE PREVIOUS PARTNER AND MIGHT RECEIVE CHILD MAINTENANCE FROM SEVERAL OR ONLY ONE "CONTRIBUTOR". IF R SAYS HE/SHE DOES NOT RECEIVE FROM ALL, THE ANSWER IS "PARTLY". 1. YES → sam31b 2. NO → sam32a1 3. PARTLY → sam31b	A353
sam31b	IF RECEIVE CHILD MAINTENANCE (SAM31A=1) About how much do you receive in child maintenance per month? HERE WE WANT TO KNOW THE RUNNING, TOTAL, MONTHLY AMOUNT THAT R RECEIVES. DO NOT INCLUDE MAINTENANCE DEBT AND EXTRA MAINTENANCE _____ NOK PER MONTH	A355 A355u
sam32a1	IF NOT RECEIVE MAINTENANCE FOR CHILD IN THE HOUSEHOLD (SAM31A=2) Do you pay maintenance for [him/her/them]? 1. YES → sam32b 2. NO → par01	A357
sam32a2	IF OWN CHILD YOUNGER THAN 18 YEARS NOT LIVES IN THE HOUSEHOLD (FAM02=3) You said before that you don't live with your child/children. Do you pay child maintenance for this child/these children? SOME MAY HAVE MORE THAN ONE CHILD AND MAY PAY FOR SEVERAL OR ONLY ONE. IF R SAYS HE/SHE DOES NOT PAY FOR ALL THE CHILDREN, THE ANSWER IS PARTLY. 1. YES → sam32b 2. NO → par01 3. PARTLY → sam32b	A357
sam32b	IF R PAYS CHILD MAINTENANCE (SAM32A1=1 OR SAM32A2=1) ⁷ About how much do you pay in child maintenance per month? HERE WE WANT TO KNOW THE RUNNING, TOTAL, MONTHLY AMOUNT THAT R PAYS. DO NOT INCLUDE MAINTENANCE DEBT AND EXTRA MAINTENANCE _____ NOK PER MONTH	A359 A359u
Household and partnership arrangements		
Household arrangements		
par01	IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD I will now mention some ordinary household tasks. For each of the tasks please tell me if it is you or your partner that usually do this. Let's start with [cooking]. Is it...	A401
par01a	cooking	A401_a
par01b	doing the dishes INCLUDING FILLING AND CLEARING THE DISHWASHER	A401_b
par01c	washing and ironing clothes	
par01d	buy food and necessary household goods	A401_c
par01e	cleaning and clearing the dwelling	A401_d
par01f	doing small repairs in and around the house	A401_e

⁷ Because of an error in the filter, only cases from sam32a2 are included in sam32b.

Var-ID LOGG		Var-ID GGS
	ANSWER CATEGORIES FOR PAR01 1. Always you 2. Usually you 3. You and [cohabiting partner/ spouse/ registered partner] about equally 4. Usually [cohabiting partner/ spouse/ registered partner] 5. Always [cohabiting partner/ spouse/ registered partner] 6. Always or usually other person: _____ [REF. NUMBER. FAM01/REF. NUMBER LIST PROVIDERS AND RECEIVERS] (If answer 6: Always or usually other person, structure of variable names LOGG: par01x_2, GGS: A401_x1)	
par02	IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD On a scale from 0 to 10, where 0 means "not at all satisfied" and 10 means "completely satisfied", how satisfied are you with this division of labor? VALUE _____	A402
par03a	IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD Does your household regularly pay someone to do housework? REGULARLY HERE MEANS AT LEAST ONCE PER MONTH FROM THE SAME PERSON/FIRM. DO NOT INCLUDE MUNICIPAL HOME CARE, WE WILL ASK ABOUT THIS LATER. 1. YES → par03b 2. NO → par06	A404
par03b	IF YES (PAR03A=1) About how many times is this per month? NUMBER OF TIMES PER MONTH _____	
par04a	IF NOT COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD I will now ask some questions about assistance with cleaning and other household tasks. Does your household regularly pay someone to do housework? REGULARLY HERE MEANS AT LEAST ONCE PER MONTH FROM THE SAME PERSON/FIRM. DO NOT INCLUDE MUNICIPAL HOME CARE, WE WILL ASK ABOUT THIS LATER. 1. YES → par04b 2. NO → for	A404
par04b	IF YES (PAR04A=1) About how many times is this per month? NUMBER OF TIMES PER MONTH _____	
Current relationship		
par06	IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD Think of the relationship you have to your [cohabiting partner/spouse/registered partner]. On a scale from 0 to 10, where 0 means "strongly disagree" and 10 means "strongly agree", how much do you agree with the following statements?	
par06a	We agree on what is important in life	VALUE _____
par06b	We have frequent conflicts	VALUE _____
Par06c	[he/she] often criticizes me	VALUE _____
Par06d	[he/she] understands me when I have problems	VALUE _____
par07	IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied are you with your relationship to your [cohabiting partner/spouse/registered partner]? VALUE _____	A407

Var-ID LOGG		Var-ID GGS
par08	IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD Couples often disagree about important issues in life. On a scale from 0 to 10, where 0 means "never" and 10 means "very often", how often, within the last 12 months, did you and your partner/spouse have disagreement about...	A408
par08a	household chores VALUE _____	A408_a
par08b	money VALUE _____	A408_b
par08c	spending leisure time VALUE _____	A408_c
par08d	sex VALUE _____	A408_d
par08e	relations with friends VALUE _____	A408_e
par08f	IF ONE OR BOTH PARENTS ALIVE relations with parents and in-laws VALUE _____	A408_f
par08g	IF CHILD IN THE HOUSEHOLD AT AGE 18 OR YOUNGER child raising issues VALUE _____	A408_g
par08h	IF R IS UNDER AGE 50 OR FEMALE [COHABITING PARTNER/SPOUSE/ REG. PARTNER] UNDER AGE 50 having children VALUE _____	A408_h
par08i	alcohol VALUE _____	A408_i
par10	IF COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER IN THE HOUSEHOLD Over the past 12 months, have you thought about breaking up your relationship? 1. YES 2. NO	A410
Parents and childhood home		
Life conditions of parents		
Now I will ask some questions about your parents.		
for01	IF R NOT LIVES WITH MOTHER AND IF R BORN IN 1952 OR EARLIER OR IF MOTHER IS NOT REGISTERED IN THE REGISTER FOR R BORN AFTER 1952 Is your mother still alive? 1. YES → for06 2. NO → for04 3. I DON'T KNOW IF SHE IS ALIVE → for05 4. I DON'T KNOW ANYTHING ABOUT MY MOTHER → for07	A509, A564
for04	IF MOTHER NOT ALIVE (FOR01=2) In which year did she die? YEAR __ __ DON'T KNOW	A510, A565
for05	IF MOTHER NOT ALIVE (FOR01=2) OR R DOESN'T KNOW WHETHER OR NOT MOTHER IS ALIVE (FOR01=3) In which year was she born? YEAR __ __ DON'T KNOW	A511
	for06 ⁸ IF MOTHER ALIVE (FOR01=1) In which year was she born? YEAR __ __ DON'T KNOW	A518, A566

⁸ For06 is combined with for05 in the data file.

Var-ID LOGG		Var-ID GGS
for07	IF R NOT LIVES WITH FATHER AND IF R BORN IN 1952 OR PREVIOUS OR IF MOTHER IS NOT REGISTERED IN THE REGISTER FOR R BORN AFTER 1952 Is your father still alive? 1. YES → for12 2. NO → for10 3. I DON'T KNOW IF HE IS ALIVE → for11 4. I DON'T KNOW ANYTHING ABOUT MY FATHER → for15a	A535, A557
for10	IF FATHER NOT ALIVE (FOR07=2) In which year did he die? YEAR __ __ DON'T KNOW	A536, A558
for11	IF FATHER NOT ALIVE (FOR07=2) OR R DOESN'T KNOW WHETHER FATHER IS ALIVE OR NOT (FOR07=3) In which year was he born? YEAR __ __ DON'T KNOW	A537
	for12 ⁹ IF FATHER ALIVE (FOR07=1) In which year was he born? YEAR __ __ DON'T KNOW	A544, A559
for13	IF R NOT LIVES WITH NEITHER MOTHER NOR FATHER AND IF BOTH ARE ALIVE Do your parents live together? 1. YES → for19a 2. NO → for14a	A574
for14a	IF PARENTS NOT LIVE TOGETHER (FOR13=2) OR R LIVES WITH ONE OF THE PARENTS OR BOTH PARENTS ARE DEAD Were your parents ever divorced? 1. YES → for14b 2. NO → for15a 3. NO, THEY NEVER LIVED TOGETHER → for15a 4. NO, OTHER SITUATION → for15a	A516, A523 A542, A549, A571
for14b	IF YES (FOR14A=1) In which year did they break up? YEAR __ __ DON'T KNOW	A517, A524, A543, A550, A572
for15a	IF MOTHER ALIVE AND IF PARENTS NOT LIVE TOGETHER OR R LIVES WITH FATHER Does your mother live alone? 1. YES → for17a 2. NO → for15b	A525_x
for15b_x	IF NO (FOR15A=2) Who does she live with? MULTIPLE ANSWERS POSSIBLE 1. COHABITING PARTNER/SPOUSE → for16 2. HER SON(S) → for16 3. HER DAUGHTER(S) → for16 4. RELATIVE → for16 5. INSTITUTION OR ASSISTED LIVING → for15c 6. OTHERS → for16	A525_x

⁹ For12 is combined with for11 in the datafile.

Var-ID LOGG		Var-ID GGS
for15c	IF INSTITUTION OR ASSISTED LIVING (FOR15B=5) What kind of institution/assisted living is this? 1. OLD AGE OR NURSING HOME 2. NURSING FLATS (STAFFED 24H) 3. SERVICE FLATS, PURPOSE BUILT FLATS OR OTHER OLD AGE ACCOMMODATION (NOT STAFFED 24H) 4. OTHER INSTITUTION	A525_x
for15d_by del/_kom mnr/_lan dnr	IF PARENTS NOT LIVE TOGETHER (FOR13=2) AND MOTHER IS NOT REGISTERED IN REGISTER (FOR06=DATE) In what country, municipality or part of town does your mother live? COUNTRY/MUNICIPALITY/PART OF TOWN _____	
for17a	IF FATHER ALIVE AND IF PARENTS NOT LIVE TOGETHER OR R LIVES WITH MOTHER Does your father live alone? 1. YES → for21a 2. NO → for17b	A551_x
for17b_x	IF NO (FOR17A=2) Who does he live with? MULTIPLE ANSWERS POSSIBLE 1. COHABITING PARTNER/SPOUSE → for18 2. HIS SON(S) → for18 3. HIS DAUGHTER(S) → for18 4. RELATIVE → for18 5. INSTITUTION OR ASSISTED LIVING → for17c 6. OTHERS → for18	A551_x
for17c	IF INSTITUTION OR ASSISTED LIVING (FOR17B=5) What kind of institution/assisted living is this? 1. OLD AGE OR NURSING HOME 2. NURSING FLATS (STAFFED 24H) 3. SERVICE FLATS, PURPOSE BUILT FLATS OR OTHER OLD AGE ACCOMMODATION (NOT STAFFED 24H) 4. OTHER INSTITUTION	A551_x
for17d_by del/_kom mnr/_lan dnr	IF PARENTS NOT LIVE TOGETHER (FOR13=2) AND FATHER NOT REGISTERED IN REGISTER (FOR12=DATE) In what country, municipality or part of town does your father live? COUNTRY/MUNICIPALITY/PART OF TOWN _____	
for19a	IF PARENTS LIVE TOGETHER (FOR13=1) Do your parents live together – just the two of them? 1. YES → for20 2. NO → for19b	A587_x
for19b_x	IF NO (FOR19A=2) Who do they live with? MULTIPLE ANSWERS POSSIBLE 1. THEIR SON(S) → for20 2. THEIR DAUGHTER(S) → for20 3. RELATIVE → for20 4. IN INSTITUTION OR ASSISTED LIVING → for19c 5. OTHERS → for20	A587_x
for19c	IF INSTITUTION OR ASSISTED LIVING (FOR19B=4) What kind of institution/assisted living is this? 1. OLD AGE OR NURSING HOME 2. NURSING FLATS (STAFFED 24H) 3. SERVICE FLATS, PURPOSE BUILT FLATS OR OTHER OLD AGE ACCOMMODATION (NOT STAFFED 24H) 4. OTHER INSTITUTION	A587_x

Var-ID LOGG		Var-ID GGS
for19d_by del/_kom mnr/_lan dnr	IF PARENTS LIVE TOGETHER (FOR13=1) AND PARENTS NOT REGISTERED IN REGISTER (FOR06=DATE AND FOR12=DATE) In what country, municipality or part of town do your parents live? COUNTRY/MUNICIPALITY/PART OF TOWN _____	
The parent's health		
I will now ask some questions about your [mother's/father's/parent's] health.		
for21a	IF MOTHER ALIVE AND R NOT LIVES WITH MOTHER Is your mother limited in her ability to carry out normal everyday activities because of a physical or mental health problem or a disability? NORMAL EVERYDAY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING OR TRANSPORT. 1. YES → for21b 2. NO → for22a	A526, A582, A589
for21b	IF MOTHER LIMITED (FOR21A=1) Is she limited to a great extent, to a moderate extent or to some extent? 1. GREAT EXTENT 2. MODERATE EXTENT 3. SOME EXTENT	
for21c	IF MOTHER LIMITED (FOR21A=1) AND OVER AGE 65 Does she have a problem with her memory? 1. YES → for21d 2. NO → for21h	
for21d	IF YES (FOR21C=1, 2 OR 3) Does your mother have a memory problem of such an extent that it restricts his/her ability to do daily activities? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT. HERE WE ONLY ASK FOR LIMITATIONS THAT RESULT FROM PROBLEMS WITH THE MEMORY 1. YES → for21e 2. NO → for21h	
for21e	IF YES FOR21D Has she been to the doctor concerning her memory problem? 1. YES 2. NO	
for21f	IF YES FOR21D Do you know the reason for her memory problem? 1. YES → for21g 2. NO → for21h	
for21g	IF YES (FOR21F=1) Is it caused by dementia, stroke or something else? 1. DEMENTIA/ALZHEIMER 2. STROKE/HEART ATTACK 3. SOMETHING ELSE	
for21h	IF MOTHER LIMITED (FOR21A=1) Does your mother need help with daily activities? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT. WE ASK FOR HER CHILDREN'S OPINION OF HER NEED FOR HELP 1. YES 2. NO 3. DON'T KNOW	

Var-ID LOGG		Var-ID GGS
for21i	IF MOTHER LIMITED (FOR21A=1) Does your mother need help with personal care? 1. YES 2. NO 3. DON'T KNOW	
for21j	IF YES FOR21H AND/OR YES FOR21I Who helps your mother? MULTIPLE ANSWERS POSSIBLE 1. NOBODY 2. RESPONDENT 3. HOME NURSING CARE 4. PERSONAL ASSISTANT 5. FAMILY 6. LIVES AT AN INSTITUTION 7. OTHERS	
for22a	IF MOTHER ALIVE AND IF PARENTS NOT LIVE TOGETHER (FOR13=02) AND IF NOT ANSWERED 'INSTITUTION OR ASSISTED LIVING' IN FOR15B (=5) AND IF MOTHER IS LIMITED (FOR21A=1) OR IF MOTHER IS OVER AGE 60 Does your mother live in a dwelling adapted for people with special needs? 1. YES → for22b 2. NO → for23a	A525_x, A581_x
for22b	IF YES (FOR22A=1) What kind of [adapted dwelling/institution] is this? 1. OLD AGE OR NURSING HOME 2. NURSING FLATS (STAFFED 24H) 3. SERVICE FLATS, PURPOSE BUILT FLATS OR OTHER OLD AGE ACCOMMODATION (NOT STAFFED 24H) 4. OTHER INSTITUTION	A525_x, A581_x
for23a	IF FATHER ALIVE AND R NOT LIVES WITH HIM Is your father limited in his ability to carry out normal everyday activities because of a physical or mental health problem or a disability? NORMAL EVERYDAY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING OR TRANSPORT. YES → for23b NO → for24a	A552, A576, A588
for23b	IF FATHER LIMITED (FOR23A=1) Is he limited to a great extent, to a moderate extent or to some extent? 1. GREAT EXTENT 2. MODERATE EXTENT 3. SOME EXTENT	
for23c	IF FATHER LIMITED (FOR23A=1) AND OVER AGE 65 Does he have a memory problem? 1. YES → for23d 2. NO → for23h	
for23d	IF YES (FOR23C=1) Are these memory problems so severe that they interfere with daily activities? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT. HERE WE ONLY ASK FOR LIMITATIONS THAT RESULT FROM PROBLEMS WITH THE MEMORY 1. YES → for23e 2. NO → for23h	

Var-ID LOGG		Var-ID GGS
for23e	IF YES FOR23D Has he seen a doctor for his memory problem? 1. YES 2. NO	
for23f	IF YES FOR23D Do you know the reason for his memory problems? 1. YES → for23g 2. NO → for23h	
for23g	IF YES (FOR23F=1) Is it caused by dementia, stroke or something else? 1. DEMENTIA/ALZHEIMER 2. STROKE/ HEART ATTACK 3. OTHER	
for23h	IF FATHER LIMITED (FOR23A=1) Does your father need help with daily activities? DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT. WE ASK FOR HIS CHILDREN'S CONSIDERATION OF HIS NEED FOR HELP 1. YES 2. NO 3. DON'T KNOW	
for23i	IF FATHER LIMITED (FOR23A=1) Does your father need help with personal care? 1. YES 2. NO 3. DON'T KNOW	
for23j	IF YES FOR23H AND/OR YES FOR23I Who helps your father? MULTIPLE ANSWERS POSSIBLE 1. NOBODY 2. RESPONDENT 3. HOME NURSING CARE 4. PERSONAL ASSISTANT 5. FAMILY 6. LIVES AT AN INSTITUTION 7. OTHERS	
for24a	IF FATHER ALIVE AND IF PARENTS NOT LIVE TOGETHER (FOR13=2) AND IF NOT ANSWERED 'INSTITUTION OR ASSISTED LIVING' IN FOR17B (=5) AND IF FATHER IS LIMITED (FOR23A=1) OR IF FATHER IS OVER AGE 60 Does your father live in a dwelling adapted for people with special needs? 1. YES → for24b 2. NO → for26a	A551_x, A575_x
for24b	IF YES (FOR24A=1) What kind of dwelling/institution is this? 1. OLD AGE OR NURSING HOME 2. NURSING FLATS (STAFFED 24H) 3. SERVICE FLATS, PURPOSE BUILT FLATS OR OTHER OLD AGE ACCOMMODATION (NOT STAFFED 24H) 4. OTHER INSTITUTION	A551_x, A575_x

Var-ID LOGG		Var-ID GGS
for25a	IF PARENTS LIVE TOGETHER (FOR13=1) AND IF NOT ANSWERED 'INSTITUTION OR ASSISTED LIVING' IN FOR19B (=4) AND IF MOTHER IS LIMITED (FOR21A=1) AND/OR FATHER IS LIMITED (FOR23A=1) OR IF MOTHER IS OVER AGE 60 AND/OR FATHER IS OVER AGE 60 Do your parents live in a dwelling adapted for people with special needs? 1. YES → for25b 2. NO → for26a	A587_x
for25b	IF YES (FOR25A=1) What kind of dwelling/institution is this? 1. OLD AGE OR NURSING HOME 2. NURSING FLATS (STAFFED 24H) 3. SERVICE FLATS, PURPOSE BUILT FLATS OR OTHER OLD AGE ACCOMMODATION (NOT STAFFED 24H) 4. OTHER INSTITUTION	A587_x
Relationship to parents		
Now I will ask some questions about your relationship with your [parents/mother/father].		
for26a	IF MOTHER ALIVE AND R NOT LIVES WITH HER Do you see your mother weekly, monthly, annually, or less often? 1. WEEKLY 2. MONTHLY 3. ANNUALLY 4. LESS OFTEN 5. NEVER	A528u, A584u, A592u
for26b	IF SEES MOTHER WEEKLY, MONTHLY OR ANNUALLY (FOR26A=1, 2 OR 3) About how many times per [week/month/year] do you see your mother? NUMBER OF TIMES PER [WEEK/MONTH/YEAR] _____	A528, A584, A592
for27a	IF FATHER IS ALIVE AND R DOES NOT LIVE WITH HIM Do you see your father weekly, monthly, annually, or less often? 1. WEEKLY 2. MONTHLY 3. ANNUALLY 4. LESS OFTEN 5. NEVER	A554u, A578u, A591u
for27b	IF TOGETHER WITH FATHER WEEKLY, MONTHLY OR ANNUALLY (FOR27A=1, 2 OR 3) About how many times per [week/month/year] do you see your father? NUMBER OF TIMES PER [WEEK/MONTH/YEAR] _____	A554, A578, A591
for28	IF MOTHER ALIVE AND IF R SEES MOTHER (FOR26A=1,2,3 OR 4) Think of the relationship you have to your mother. On a scale from 0 to 10, where 0 means "strongly disagree" and 10 means "strongly agree", how much do you agree with the following statements?	
for28a	We agree on what is important in life VALUE _____	
for28b	We have frequent conflicts VALUE _____	
for28c	She often criticizes me VALUE _____	
for28d	She understands me when I have problems VALUE _____	
for29 ¹⁰	for29a IF MOTHER ALIVE AND IF SEES MOTHER (FOR26A=1,2,3 OR 4) On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied, on the whole, are you with your relationship to your mother? VALUE _____	A529, A585, A594

¹⁰ Different wording in the questionnaire depending on whether respondent meets or never meets mother, but same variable (for29).

Var-ID LOGG		Var-ID GGS
for29	for29b IF MOTHER ALIVE AND IF NEVER SEES MOTHER (FOR26A=5) You said you never see your mother, but could we still ask you: On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied, on the whole, are you with your relationship to your mother? VALUE _____	A529, A585, A594
for30	IF FATHER ALIVE AND IF SEES FATHER (FOR27A=1,2,3 OR 4) Think of the relationship you have to your father. On a scale from 0 to 10, where 0 means "strongly disagree" and 10 means "strongly agree", how much do you agree with the following statements?	
for30a	We agree on what is important in life VALUE _____	
for30b	We have frequent conflicts VALUE _____	
for30c	He often criticizes me VALUE _____	
for30d	He understands me when I have problems VALUE _____	
for31 ¹¹	for31a IF FATHER ALIVE AND IF SEES FATHER (FOR27A=1,2,3 OR 4) On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied are you, on the whole, with your relationship to your father? VALUE _____	A555, A579, A593
for31	for31b IF FATHER ALIVE AND IF NEVER SEES FATHER (FOR27A=5) You said you never see your father, but could we still ask you: On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied are you, on the whole, with your relationship to your father? VALUE _____	A555, A579, A593
Brothers, sisters, grandparents		
for32a_1 for32a_2	IF BORN IN 1952 OR EARLIER How many brothers and sisters do you have? Only count full and half brothers and sisters. ALSO COUNT SIBLINGS THAT ARE NO LONGER ALIVE. _____ BROTHERS _____ SISTERS	A5106a_b A5106a_s
for32b_1 for32b_2	IF BROTHERS AND SISTERS (1 OR MORE IN FOR32A) How many of your brothers and sisters are alive? _____ BROTHERS _____ SISTERS	A5106b_b A5106b_s
for33a	IF BORN 1960 OR LATER How many of your grandparents are alive? NUMBER _____ → for33b	A5107
for33b	IF GRANDPARENTS ALIVE (1 OR MORE IN FOR33A) Which of your grandparents are alive? MULTIPLE ANSWERS POSSIBLE 1. MOTHER'S MOTHER 2. MOTHER'S FATHER 3. FATHER'S MOTHER 4. FATHER'S FATHER	
for34	IF BORN 1980 OR LATER How many of your great grandparents are alive? NUMBER _____	

¹¹ Different wording in the questionnaire depending on whether respondent meets or never meets father, but same variable (for31).

Var-ID LOGG		Var-ID GGS
Childhood home		
Now I will ask some questions about your childhood home.		
for35_1	EVERYONE Where did you live most of your childhood, that is until your were 15? 1. Norway → for35_2 2. Abroad → for35_3	A5108_1 A5108_2
for35_ko mmnr	IF R LIVED IN NORWAY (FOR35_1=1) Which municipality? _____	A5108_1 A5108_2
for35_lan dnr	IF R LIVED ABROAD (FOR35_1=2) Which country? _____	A5108_1 A5108_2
for36	EVERYONE Who did you live with most of your childhood, that is, until you were 15? MULTIPLE ANSWERS POSSIBLE. SIBLING NOT TO BE CODED. 1. WITH BOTH PARENTS 2. WITH MOTHER ONLY 3. WITH FATHER ONLY 4. WITH MOTHER AND STEPFATHER 5. WITH FATHER AND STEPMOTHER 6. WITH GRANDPARENT(S) 7. WITH OTHER RELATIVE(S) 8. WITH FOSTER PARENT(S) 9. IN A BOARDING SCHOOL 10. IN AN ORPHANAGE 11. IN A SPECIAL YOUTH HOME 12. OTHER	A5110
for37	IF LIVED WITH FATHER (for36=1, 3 or 5) What was your father's occupation when you were 15? 1. OCCUPATION: _____ 2. DIDN'T HAVE OCCUPATION 3. DON'T KNOW	A5112
for38	IF BORN 1952 OR EARLIER [Is/was] your father's highest completed educational level elementary school, secondary school or college/University? 1. ELEMENTARY SCHOOL 2. SECONDARY SCHOOL 3. COLLEGE OR UNIVERSITY 4. DON'T KNOW	A5113
for39	IF LIVED WITH MOTHER (FOR36=1, 2 OR 4) What was your mother's occupation when you were 15? 1. OCCUPATION: _____ 2. DIDN'T HAVE OCCUPATION 3. DON'T KNOW	A5114
for40	IF BORN 1952 OR EARLIER [Is/was] your mother's highest completed educational level elementary school, secondary school or college/university? 1. ELEMENTARY SCHOOL 2. SECONDARY SCHOOL 3. COLLEGE OR UNIVERSITY 4. DON'T KNOW	A5115

Var-ID LOGG		Var-ID GGS
for46b	Most of your relatives think that it is about time for you to move out VALUE _____	A5122_c
for46c	Most of your friends think it is about time for you to move out VALUE _____	A5122_a
for47	IF LIVES WITH EITHER MOTHER OR FATHER OR BOTH PARENTS AND AGE 25 OR OLDER Are you planning to live separately from your [mother/father/parents] within the next 3 years? 1. YES 2. NO	A5118
for48	IF LIVES WITH EITHER MOTHER OR FATHER OR BOTH PARENTS AND AGE 25 OR OLDER Suppose you live separately from your parents within the next 3 years. On a scale from 0 to 10, where 0 means "much worse" and 10 means "much better", how would it affect:	A5119
for48a	The possibility to do what you want VALUE _____	A5119_a
for48b	Your employment opportunities VALUE _____	A5119_b
for48c	Your financial situation VALUE _____	A5119_c
for48d	Your sexual life VALUE _____	A5119_d
for48e	What people around you think of you VALUE _____	A5119_e
for48f	The general quality of your life VALUE _____	A5119_f
for49	IF LIVES WITH EITHER MOTHER OR FATHER OR BOTH PARENTS AND AGE 25 OR OLDER On a scale from 0 to 10, where 0 means "not at all" and 10 means "very much", how much would the decision on whether to move out within the next 3 years depend on...	A5120
for49a	Your financial situation VALUE _____	A5120_a
for49b	Your work VALUE _____	A5120_b
for49c	Your housing conditions VALUE _____	A5120_c
for49d	Your health VALUE _____	A5120_d
for49e	Your parent's health VALUE _____	A5120_e
for49f	You having a partner VALUE _____	A5120_f
for50	IF LIVES WITH EITHER MOTHER OR FATHER OR BOTH PARENTS AND AGE 25 OR OLDER Although you may feel that the decision to start living separately from parents is yours, it is likely that others have opinions about what you should do. On a scale from 0 to 10, where 0 means "strongly disagree" and 10 means "strongly agree", to what extent do you agree with these statements.	A5122
for50a	Your [mother/ father/ parents] think that it is about time for you to move out VALUE _____	A5122_b
for50b	Most of your relatives think that it is about time for you to move out VALUE _____	A5122_c
for50c	IF CHILD AGE 12 OR OLDER Your child(ren) think(s) it is about time for you to live separately from your [mother/father/parents] VALUE _____	A5122_d
for50d	Most of your friends think it is about time for you to live separately from your [mother/father/parents] VALUE _____	A5122_a
Fertility		
Current pregnancy		
fru01	IF WOMAN AGE 49 OR YOUNGER Now I will ask some questions about having children. Are you currently pregnant? 1. YES → fru03 2. NO → fru13 3. MAYBE, DON'T KNOW YET → fru13	A602

Var-ID LOGG		Var-ID GGS
fru02	IF MAN AND COHABITING PARTNER (WOMAN), SPOUSE OR NON-RESIDENT PARTNER (WOMAN) AGE 49 OR YOUNGER Now I will ask some questions about having children. Is your [cohabiting partner/spouse/non-resident partner] currently pregnant? 1. YES → fru03 2. NO → fru13 3. MAYBE, DON'T KNOW YET → fru13	A602
fru03_ mnd/ _aar	IF PREGNANT (FRU01=1 OR FRU02=1) When is the child expected to be born? MONTH __ __ YEAR __ __ DON'T KNOW	A603m A603y
fru04	IF PREGNANT (FRU01=1 OR FRU02=1) Just before this pregnancy began, did you yourself wish to have a/another baby at some time? 1. YES → fru05 2. NO → fru06 3. DON'T KNOW → fru05	A604
fru05	IF PREGNANT (FRU01=1 OR FRU02=1) Did this pregnancy occur sooner than you wanted, later than you wanted, or at about the right time? 1. PREVIOUS 2. LATER 3. ABOUT THE RIGHT TIME	A605
fru06	IF PREGNANT (FRU01=1 OR FRU02=1) AND COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER Couples don't always agree on how many children they want and when. Just before you became aware of this pregnancy, did your partner/spouse want to have a/another baby? 1. YES → fru07 2. NO → fru10a 3. [COHABITING PARTNER/SPOUSE/NON-RESIDENT PARTNER] WAS NOT SURE 4. RESPONDENT DOES NOT KNOW	A606
fru07_ mnd/ _aar	IF WANTED CHILD (FRU04=1 AND FRU06=1) AND COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER Many couples that try to get pregnant experience that it might take quite some time before they succeed. From about when did you try to become pregnant? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	
fru08a	IF WANTED CHILD (FRU04=1 AND FRU06=1) AND COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER Did you or your partner/spouse use any kind of medical support to help you (your partner/spouse) to get pregnant? 1. YES → fru08b 2. NO → fru10a	A607_x
fru08b_x	IF YES (FRU08=1) What kind of medical support was this? Please name all of the things you did. MULTIPLE ANSWERS POSSIBLE 1. MEDICATION 2. METHODS FOR ASCERTAINING TIMING OF OVULATION 3. IN VITRO FERTILISATION (IVF) OR MICRO-FERTILISATION (ISCI) 4. SURGERY 5. ARTIFICIAL INSEMINATION 6. OTHER, SPECIFY	A607_x

Var-ID LOGG		Var-ID GGS
fru14	IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF FEMALE AGE 49 OR YOUNGER WITH COHABITING PARTNER OR SPOUSE OR IF MALE WITH COHABITING PARTNER (FEMALE) OR SPOUSE THAT IS AGE 49 OR YOUNGER Couples do not always have the same feelings about the number or timing of children. Does your partner/spouse want to have a/another baby now? 1. YES 2. NO 3. [COHABITING PARTNER/SPOUSE/NON-RESIDENT PARTNER] WAS NOT SURE 4. RESPONDENT DOES NOT KNOW	A615
fru15	IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF FEMALE AGE 49 OR YOUNGER OR IF MALE AGE 49 OR YOUNGER WITHOUT COHABITING PARTNER OR SPOUSE OR IF MALE WITH COHABITING PARTNER (FEMALE) OR SPOUSE THAT IS AGE 49 OR YOUNGER Some people are not physically able to have children. As far as you know, is it physically possible for you, yourself, to have a/another baby? 1. YES → fru17 2. NO → fru16 3. DON'T KNOW → fru17	A612
fru16_ mnd/ _aar	IF UNABLE TO HAVE CHILD (FRU15=1 OR 2) When did you find out that you would (probably) not be able to have a/another child? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	A614m A614y
fru17	IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF FEMALE AGE 49 OR YOUNGER WITH COHABITING PARTNER OR SPOUSE OR IF MALE WITH COHABITING PARTNER (FEMALE) OR SPOUSE THAT IS AGE 49 OR YOUNGER Do you think it would be physically possible for your current partner/spouse to have a child of his/her own if he/she wanted to? 1. YES 2. NO 3. DON'T KNOW	A616
fru18a	IF R WANTS CHILD(REN) AND COHABITING PARTNER/SPOUSE WANTS CHILD(FRU13=1 AND FRU14=1) Many couples that try to get pregnant experiences that it might take quite some time before they succeed. Have you and your [partner/spouse] tried to get pregnant without succeeding? 1. YES → fru18b 2. NO → fru21a	
fru18b_ m nd/ _aar	IF TRIED TO GET PREGNANT WITHOUT SUCCEEDING (FRU18A=1) From about when did you try? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	
fru19a	IF TRIED TO GET PREGNANT WITHOUT SUCCEEDING (FRU18A=1) Do you or your [cohabiting partner/spouse] use any kind of medical help to get pregnant? 1. YES → fru19b 2. NO → fru21a	A618_x

Var-ID LOGG		Var-ID GGS
Fertility intentions		
fru23	IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF FEMALE AGE 46 OR YOUNGER IF POSSIBLE TO GET PREGNANT (FRU15=1 OR 3) OR IF MALE AGE 49 OR YOUNGER, OR IF MALE AGE 50 OR OLDER WITH COHABITING PARTNER (FEMALE), SPOUSE OR NON-RESIDENT PARTNER (FEMALE) THAT IS AGE 46 OR YOUNGER AND IF POSSIBLE TO GET PREGNANT FOR COHABITING PARTNER/SPOUSE (FRU17=1 OR 3) AND IF NOT STERILIZED (FRU21B=15) Do you intend to have a/another child within the next three years? 1. YES 2. NO	A622
fru24	IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF FEMALE AGE 46 OR YOUNGER, OR IF MALE AGE 49 OR YOUNGER, OR IF MALE AGE 50 OR OLDER WITH COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER THAT IS AGE 46 OR YOUNGER Do you intend to adopt a child within the next three years? 1. YES 2. NO	A623
fru25	IF NOT CHILD WITHIN THE NEXT 3 YEARS (FRU23=2, AND FRU24=2) AND IF FEMALE AGE 43 OR YOUNGER OR IF MALE AGE 46 OR YOUNGER, OR IF MALE AGE 50 OR OLDER WITH COHABITING PARTNER (FEMALE), SPOUSE OR NON-RESIDENT PARTNER (FEMALE) THAT IS AGE 43 OR YOUNGER COHABITING PARTNER/SPOUSE (FRU17=1 OR 3) AND IF NOT STERILISED (FRU21B=15) Suppose you will not have a/another child within the next three years. Do you still intend to have a/another child? 1. YES → fru26a 2. NO → fru28	A624
fru26a	IF INTEND TO HAVE CHILD (FRU23=1 OR FRU24=1 OR FRU25=1) Would you prefer that your (next) child would have a particular sex? 1. YES → fru26b 2. NO → fru27	A625
fru26b	IF PREFER PARTICULAR SEX (FRU26A=1) Would you prefer a boy or a girl? 1. BOY 2. GIRL	A625
fru27	IF INTEND TO HAVE CHILD (FRU23=1 OR FRU24=1 OR FRU25=1) How many children do you intend to have in total (including the children you already have)? NUMBER OF CHILDREN _____	A626
fru28	IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF FEMALE AGE 46 OR YOUNGER, OR IF MALE AGE 49 OR YOUNGER, OR IF MALE AGE 50 OR OLDER WITH COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER THAT IS AGE 46 OR YOUNGER IF INTEND TO HAVE CHILD WITHIN THE NEXT 3 YEARS (FRU23=1 OR FRU24=1) AND IF NOT STERILISED (FRU21B=15) Suppose you will have a/another child within the next 3 years. On a scale from 0 to 10, where 0 means "much worse" and 10 means "much better", how would it affect:	A627
fru28a	The possibility to do what you want VALUE _____	A627_a
fru28b	Your employment opportunities VALUE _____	A627_b
fru28c	Your financial situation VALUE _____	A627_c
fru28d	Your sexual life VALUE _____	A627_d
fru28e	What people around you think of you VALUE _____	A627_e
fru28f	The general quality of your life VALUE _____	A627_f
fru28g	IF COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER The contact between you and your [cohabiting partner/spouse/non-resident partner] VALUE _____	A627_g
fru28h	IF COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER Your [cohabiting partner`s/spouse`s /non-resident partner`s] employment opportunities VALUE _____	A627_h

Var-ID LOGG		Var-ID GGS
fru28i	The care and security you might get in old age VALUE _____	A627_i
fru28k	IF AT LEAST ONE PARENT ALIVE The contact between you and your parents VALUE _____	A627_k
fru29	IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF FEMALE AGE 46 OR YOUNGER, OR IF MALE AGE 49 OR YOUNGER, OR IF MALE AGE 50 OR OLDER WITH COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER THAT IS AGE 46 OR YOUNGER IF INTEND TO HAVE CHILD WITHIN THE NEXT 3 YEARS (FRU23=1, OR FRU24=1) AND IF NOT STERILISED (FRU21B=15) On a scale from 0 to 10, where 0 means "not at all" and 10 means "a great deal", how would your decision about having a/another child be affected by:	A628
fru29a	Your financial situation VALUE _____	A628_a
fru29b	Your work VALUE _____	A628_b
fru29c	Your housing conditions VALUE _____	A628_c
fru29d	Your health VALUE _____	A628_d
fru29e	You have a suitable partner VALUE _____	A628_e
fru29f	IF COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER Your [cohabiting partners/spouses/non-resident partners] employment VALUE _____	A628_f
fru29g	IF COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER Your [cohabiting partners/spouses/non-resident partners] health VALUE _____	A628_g
fru29h	Availability of childcare VALUE _____	A628_h
fru29i	Your opportunity to go on parental leave or care leave VALUE _____	A628_i
fru29j	IF AT LEAST ONE PARENT ALIVE The life situation of your parents VALUE _____	
fru30	IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF INTEND TO HAVE CHILD WITHIN THE NEXT 3 YEARS (FRU23=1, OR FRU24=1) AND IF FEMALE AGE 46 OR YOUNGER, OR IF MALE AGE 49 OR YOUNGER, OR IF MALE AGE 50 OR OLDER WITH COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER THAT IS AGE 46 OR YOUNGER OR IF NOT PREGNANT NOW (FRU01=2 OR 3 OR FRU02=2 OR 3) AND IF INTEND TO HAVE MORE CHILDREN CHILD WITHIN THE NEXT 3 YEARS (FRU23=2, OR FRU24=2) AND IF FEMALE AGE 43 OR YOUNGER, OR IF MALE AGE 46 OR YOUNGER, OR IF MALE AGE 50 OR OLDER WITH COHABITING PARTNER, SPOUSE OR NON-RESIDENT PARTNER THAT IS AGE 43 OR YOUNGER AND IF NOT STERILISED (FRU21B=15) Although you may feel that the decision of whether or not to have child(ren) is yours, it is likely that others have opinions about what you should do. On a scale from 0 to 10, where 0 means "strongly disagree" and 10 means "strongly agree", to what extent to do agree with these statements.	A629
fru30a	IF AT LEAST ONE PARENT ALIVE My parent(s) think(s) I should have a/another child within the next 3 years VALUE _____	A629_b
fru30b	Most of my relatives think I should have a/another child within the next 3 years VALUE _____	A629_c
fru30c	Most of my friends think I should have a/another child within the next 3 years VALUE _____	A629_a
Health and well-being		
General health		
hel01	EVERYONE I will now ask some questions about your health. In general, would you say your health is excellent, very good, good, fair, or poor? 1. Excellent 2. Very good 3. Good 4. Fair 5. Poor	A701

Var-ID LOGG		Var-ID GGS
hel02a	<p>EVERYONE</p> <p>Do you have a long term illness, chronic health problem or disability?</p> <p>1. YES → hel02b</p> <p>2. NO → hel03a</p>	A702a
hel02b	<p>IF ILLNESS, CHRONIC HEALTH PROBLEM OR DISABILITY (HEL02A=1 OR 2)</p> <p>What illness, chronic health problem, or disability is this primarily?</p> <p>RECORD UP TO 3 ILLNESSES, HEALTH PROBLEMS OR DISABILITIES. WRITE WHAT R SAYS, WHETHER IT IS A MEDICAL EXPRESSION ("DIAGNOSIS"), OR A LESS SCIENTIFIC EXPRESSION. THE ILLNESSES/ PROBLEMS/DISABILITIES SHALL BE CODED AUTOMATICALLY AFTER THE INTERVIEW. THE SYSTEM ONLY READS THE FIRST AND THE SECOND WORD YOU WRITE. TRY TO DESCRIBE THE ILLNESS/HEALTH PROBLEM/DISABILITY WITH TWO WORDS IF POSSIBLE.</p> <p>[01] _____</p> <p>[02] _____</p> <p>[03] _____</p>	
hel02c	<p>IF LONG TERM ILLNESS, CHRONIC HEALTH PROBLEM OR DISABILITY (HEL02A=1 OR 2). TO BE ASKED FOR EACH OF THE ANSWERS IN HEL02B.</p> <p>When did you get this illness/ chronic health problem/ disability?</p> <p>1. LAST 4 WEEKS</p> <p>2. BORN WITH IT</p> <p>3. OTHER TIME: MONTH __ __ YEAR __ __ </p> <p>USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01</p> <p>4. DON'T KNOW</p>	A702b
hel03a	<p>EVERYONE</p> <p>Are you limited in your ability to carry out normal everyday activities, because of a physical or mental health problem or a disability?</p> <p>DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT.</p> <p>1. YES → hel03b</p> <p>2. NO → hel05 / hel25a / hel26a</p>	A703a
hel03b	<p>IF LIMITED (HEL03A=1)</p> <p>How long have you had these limitations?</p> <p>1. LAST 4 WEEKS</p> <p>2. BORN WITH IT</p> <p>3. OTHER TIME: MONTH __ __ YEAR __ __ </p> <p>USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01</p> <p>4. DON'T KNOW</p>	A703b
hel04a	<p>IF LIMITATIONS (HEL03A=1)</p> <p>Is your dwelling adjusted to accommodate these limitations?</p> <p>1. YES → hel05</p> <p>2. NO → hel04b</p>	A1202
hel04b	<p>IF NO (HEL04A=2)</p> <p>Does it need such adjustment?</p> <p>1. YES</p> <p>2. NO</p>	
hel05	<p>IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER</p> <p>The following items are about your physical activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?</p> <p>WE HERE ASK FOR R'S SUBJECTIVE OPINION ABOUT WHAT IS A LOT OR A LITTLE. IF R SAID THAT HE/SHE USES A WHEELCHAIR, MARK FOR "YES, A LOT" ON BOTH QUESTIONS WITHOUT READING THEM ALOUD</p>	
hel05a	<p>Moderate activities such as moving a table, pushing a vacuum cleaner, going for a walk or doing garden work?</p>	

Var-ID LOGG		Var-ID GGS
hel05b	Climbing several flights of stairs?	
hel05	ANSWER CATEGORIES FOR HEL05 1. YES, LIMITED A LOT 2. YES, LIMITED A LITTLE 3. NO, NOT LIMITED AT ALL	
hel06	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER Some questions about how you've been within the last four weeks follows. Have you because of your physical health...	
hel06a	DAILY ACTIVITIES HERE MEANS E.G. HOUSEWORK, SHOPPING AND TRANSPORT, AND - FOR EMPLOYED RESPONDENTS - ALSO WORKhad any problems doing daily activities and as a result accomplished less than you would like? 1. YES 2. NO	
hel06bhad problems doing specific types of activities? 1. YES 2. NO	
hel07	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER During the past four weeks, have you had any problems carrying out daily activities because of emotional problems, such as feeling depressed or anxious? 1. YES 2. NO	
hel08	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER During the past four weeks, did you not do these daily activities as carefully as usual as a result of any emotional problems, such as feeling depressed or anxious? 1. YES 2. NO	
hel09	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER During the past four weeks, has pain interfered with your daily activities? How much did the pain interfere.. 1. Extremely 2. Quite a bit 3. Moderately 4. Slightly 5. Not at all	
hel10	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER For how much of the time during the past four weeks have you...	
hel10a	...felt calm and peaceful?	
hel10b	...had a lot of energy?	
hel10c	...felt down?	
hel10	ANSWER CATEGORIES FOR HEL10 1. All of the time 2. Most of the time 3. Quite a bit of the time 4. Some of the time 5. A little of the time 6. None of the time	
hel11	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities 1. All of the time 2. Most of the time 3. Quite a bit of the time 4. Some of the time 5. A little of the time 6. None of the time	

Var-ID LOGG		Var-ID GGS
hel12	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER Compared to a year ago, would you say your health most of the time is...? 1. A lot better 2. A little better 3. About the same 4. A little worse 5. A lot worse	
hel13	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER Do you have eyesight problems? 1. YES → hel14 2. NO → hel16	
hel14	IF EYESIGHT PROBLEMS (HEL13=1) Can you without problems read the text in a newspaper, if necessary with glasses? 1. Yes 2. Sometimes hardly 3. Hardly 4. No	
hel15	IF EYESIGHT PROBLEMS (HEL13=1) Do you have any problems finding your way indoors in unfamiliar places due to your eyesight problems? 1. No 2. Usually not 3. Sometimes 4. Often	
hel16	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER Do you have hearing problems? 1. YES → hel17 2. NO → hel18	
hel17	IF HEARING PROBLEMS (HEL16=1) Is it hard for you to hear what people say when there are many people around, for instance in a party? 1. No 2. Yes, sometimes 3. Often	
hel18	IF LIMITATIONS (HEL03A=1) OR IF AGE 40 OR OLDER About how far are you able to walk without taking a pause? 1. UNABLE TO WALK 2. ONLY A FEW STEPS 3. ABOUT 10–100 M 4. ABOUT 100–500 M 5. ABOUT 500–1000 M 6. 1–5 KM 7. MORE THAN 5 KM	
Personal care		
hel19	IF LIMITATIONS (HEL03A=1) OR POOR PHYSICAL HEALTH (HEL05A=1 OR 2, OR HEL05B=1 OR 2) I will now read out some activities you might perform within an ordinary day. We want to know if you usually are able to perform the activity without help from others, with some help from others or if you are unable to perform the activity. Can you...	
hel19a	IF R CAN DO IT WITHOUT HELP FROM OTHERS, BUT BY USING A TECHNICAL DEVICE, IT SHOULD BE MARKED AS "WITHOUT HELP" buy food	
hel19b	do lighter housework, like washing dishes, dusting or making beds?	
hel19c	do more heavy housework, like vacuum cleaning, scrubbing floors or moving furniture?	
hel19d	wash clothes	

Var-ID LOGG		Var-ID GGS
hel19e	use public transportation	
hel19f	IF R DIDN'T ANSWER "WITHOUT HELP IN EVERY QUESTION IN HEL19A-E You said you need help with certain activities. I will now ask some more questions about help with more personal tasks. Can you... take a shower or wash yourself	A704
hel19g	dress	A704
hel19h	move up from the bed to the chair	
hel19i	eat cut up food	A704
hel19j	go to the toilet	A704
hel19	ANSWER CATEGORIES FOR HEL19 1. WITHOUT HELP 2. NEED SOME HELP 3. CANNOT PERFORM	
hel20_x	IF LIMITATIONS (HEL03A=1) OR POOR PHYSICAL HEALTH (HEL05A=1 OR 2, OR HEL05B=1 OR 2) You said that you are limited in your daily activities. Do you receive any help from home help, home nursing, personal assistant, or the like? MULTIPLE ANSWERS ARE POSSIBLE 1. YES, HOME HELP → hel21a 2. YES, HOME NURSING → hel21a 3. YES, OTHER (PERSONAL ASSISTANT ETC.) → hel21a 3. NO → hel23a	A705_x
hel21a_x	IF RECEIVES HELP (HEL20=1, 2 OR 3). FOR EACH TYPE OF HELP IN HEL20 Do you receive this help weekly or monthly? 1. WEEKLY 2. MONTHLY 3. LESS OFTEN	
hel21b_x	IF RECEIVE HELP WEEKLY OR MONTHLY (HEL21=1 OR 2). TO BE ASKED FOR EACH OF THE ANSWERS IN HEL20=1,2 AND 3 IF MORE THAN ONE About how many times per [week/month] is this? HOURS PER [WEEK/MONTH] _____	
hel23a	IF LIMITATIONS (HEL03A=1) OR POOR PHYSICAL HEALTH (HEL05A=1 OR 2, OR HEL05B=1 OR 2) Do you also regularly receive help with personal care – such as eating, getting out of bed, getting dressed or going to the toilet, from people that don't have it as their job to offer such care? REGULARLY HERE MEANS AT LEAST ONCE A MONTH FROM THE SAME PERSON 1. YES → hel23b 2. NO → hel25a	A706
hel23b_x	IF RECEIVE HELP WITH PERSONAL CARE (HEL23A=1) From whom did you receive this help? RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS 01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]	A707_x
hel23c_x	IF RECEIVE HELP WITH PERSONAL CARE (HEL23A=1). TO BE ASKED FOR EACH PERSON IN HEL23B Did [REF. PERSON] get paid to help you? 1. YES 2. NO	A709_x
hel24_x	IF RECEIVE HELP WITH PERSONAL CARE (HEL23A=1). TO BE ASKED FOR EACH PERSON IN HEL23B About how many times per month do you receive such help? HERE WE MEAN WITHIN AN ORDINARY MONTH NUMBER OF TIMES PER MONTH _____	

Var-ID LOGG		Var-ID GGS
	I will now ask some questions about helping others.	
hel25a	IF R LIVES WITH OTHERS Have you within the last year regularly helped someone that you live with personal care, like eating, getting out of bed, getting dressed, or go to the toilet? Do not include child care. REGULARLY HERE MEANS AT LEAST ONCE A MONTH TO THE SAME PERSON 1. YES → hel25b 2. NO → hel26a	A710
hel25b_x	IF GIVES HELP WITH PERSONAL CARE (HEL25A=1). Who did you help? RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS. 01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]	A711_x
hel25c_x	IF GIVES HELP WITH PERSONAL CARE (HEL25A=1). TO BE ASKED FOR EACH PERSON IN HEL25B About how many times per month have you given such help? HERE WE MEAN WITHIN AN ORDINARY MONTH NUMBER OF TIMES PER MONTH _____	
hel26a	EVERYONE Over the last 12 months, have you given people regular help with personal care such as eating, getting up, dressing, bathing, or using the toilet? Do not include the care you may have given to small children. REGULARLY HERE MEANS AT LEAST ONCE PER MONTH TO THE SAME PERSON 1. YES → hel26b 2. NO → hel27	A710
hel26b_x	IF GIVES HELP WITH PERSONAL CARE (HEL26A=1). Who did you help? RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS. 01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]	A711_x
hel26c_x	IF GIVES HELP WITH PERSONAL CARE (HEL26A=1). TO BE ASKED FOR EACH PERSON IN HEL26B About how many times per month did you give such help? HERE WE MEAN DURING AN ORDINARY MONTH NUMBER OF TIMES PER MONTH _____	
Emotional support and practical help		
	Now I will ask some questions about friends and help and support from the people you are closest to.	
hel27	EVERYONE Except from members of your own family, do you have close friends at the place where you live? 1. YES 2. NO	
hel28	EVERYONE Do you have close friends somewhere else? 1. YES 2. NO	
hel29	EVERYONE How many are so close to you that you can count on them if you got great personal problems? Do not include close family. 1. NOBODY 2. ONE OR TWO 3. THREE TO FIVE 4. SIX OR MORE	

Var-ID LOGG		Var-ID GGS
hel30	<p>EVERYONE</p> <p>How many are so close to you that you can count on them if you need practical help? LIKE E.G. HELP WITH HOUSE AND GARDEN, TRANSPORTATION, SHOPPING, ETC. Do not include close family.</p> <p>1. NOBODY 2. ONE OR TWO 3. THREE TO FIVE 4. SIX OR MORE</p>	
	In the following questions I want you to include your family.	
hel31a	<p>EVERYONE</p> <p>Over the last 12 months, have you talked to anyone about your personal experiences and feelings? PROFESSIONALS LIKE DOCTORS AND PSYCHOLOGISTS NOT TO BE INCLUDED.</p> <p>1. YES → hel31b 2. NO → hel32a</p>	A713
hel31b_x	<p>IF CLOSE TALK TO SOMEONE (HEL31A=1)</p> <p>Who did you talk with?</p> <p>RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS.</p> <p>01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]</p>	A714_x
hel32a	<p>EVERYONE</p> <p>Over the last 12 months, has anyone talked to you about his/her personal experiences and feelings? IF LISTENING TO OTHER'S PROBLEMS IS A PART OF R'S JOB, ONLY INCLUDE TALKS THAT TAKES PLACE OUTSIDE OF WORKING HOURS</p> <p>1. YES → hel32b 2. NO → hel33a</p>	A716
hel32b_x	<p>IF OTHERS HAD CLOSE TALK(S) WITH R (HEL32A=1)</p> <p>Who talked to you?</p> <p>RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS</p> <p>01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]</p>	A717_x
hel33a	<p>EVERYONE</p> <p>Have you during the past year received regular help or support from people that you don't live with, and for whom providing such help is not a job?</p> <p>E.G. HELP WITH HOUSE AND GARDEN, TRANSPORT, SHOPPING, ETC. REGULARLY HERE MEANS AT LEAST ONCE PER MONTH FROM THE SAME PERSON</p> <p>1. YES → hel33b 2. NO → hel34a</p>	
hel33b_x	<p>IF RECEIVED PRACTICAL HELP (HEL33A=1)</p> <p>Who gave you this help?</p> <p>RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS</p> <p>01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]</p>	
hel33c_x	<p>IF RECEIVED PRACTICAL HELP (HEL33A=1). TO BE ASKED FOR EACH PERSON IN HEL33B</p> <p>About how many times per month have you received such help?</p> <p>HERE WE MEAN WITHIN AN ORDINARY MONTH</p> <p>NUMBER OF TIMES PER MONTH _____</p>	

Var-ID LOGG		Var-ID GGS
hel34a	EVERYONE Have you within the last year regularly given practical help to people that you don't live with? E.G HELP WITH HOUSE AND GARDEN, TRANSPORTATION, SHOPPING, ETC. REGULARLY HERE MEANS AT LEAST ONCE PER MONTH TO THE SAME TO THE SAME PERSON 1. YES → hel34b 2. NO → hel35	
hel34b_x	IF GIVEN PRACTICAL HELP (HEL34A=1) Who did you help? RECORD UP TO 5 PERSONS. USE LIST OF PROVIDERS AND RECEIVERS 01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]	
hel34c_x	IF GIVEN PRACTICAL HELP (HEL34A=1). TO BE ASKED FOR EACH PERSON IN HEL34B About how many times per month have you given such help? WE HERE MEAN WITHIN AN ORDINARY MONTH NUMBER OF TIMES PER MONTH _____	
Mastery and well-being		
hel39	EVERYONE I will now read some statements about how you might feel and how you think of life. How much do you agree that ...	
hel39a	there are plenty of people that I can lean on in case of trouble	A720_a
hel39b	I experience a general sense of emptiness	A720_b
hel39c	I miss having people around	A720_c
hel39d	there are many people that I can count on completely	A720_d
hel39e	often, I feel rejected	A720_e
hel39f	there are enough people that I feel close to	A720_f
hel39g	I miss having a really close friend	
hel39h	I find my circle of friends and acquaintances too limited	
hel39i	I have little control over the things that happen to me	
hel39j	what happens to me in the future mostly depends on me	
hel39k	I feel just as valuable as other people	
hel39l	I feel I do not have much to be proud of	
	Then we have 4 statements left:	
hel39m	on the whole, I am satisfied with myself	
hel39n	at times I think I am no good at all	
hel39o	I am satisfied with my life	
hel39p	if I could live my life over, I would change almost nothing	
hel39	ANSWER CATEGORIES FOR HEL39 1. Strongly agree 2. Agree 3. Neither agree or disagree 4. Disagree 5. Strongly disagree	
hel40	EVERYONE I will now read three statements about how you might have felt the last week.	
hel40a	I did not feel like eating; my appetite was poor	
hel40b	My sleep was restless	
hel40c	I felt depressed	
hel40	ANSWER CATEGORIES FOR HEL40 1. Rarely or none of the time 2. Some or a little of the time 3. Occasionally or a moderate amount of the time 4. Most or all of the time	

Var-ID LOGG		Var-ID GGS
hel41	<p>EVERYONE</p> <p>How often – if at all – do you feel lonely?</p> <p>1. Often 2. Sometimes 3. Seldom 4. Never</p>	
Employment and income		
arb01	<p>EVERYONE</p> <p>Now I will ask some questions about your employment situation and daily activities. Do you mainly consider yourself as:</p> <p>EVERYONE</p> <p>1. employed EVERYONE</p> <p>2. student, schoolchild, in vocational training IF YOUNGER THAN AGE 67</p> <p>3. Unemployed IF UNDER 67 YEAR</p> <p>4. On Disability pension IF MINIMUM AGE 62, MAXIMUM AGE 66</p> <p>5. On Negotiated pension (AFP) IF MINIMUM AGE 55, MAXIMUM AGE 66</p> <p>6. On occupational pension IF OLDER THAN AGE 67</p> <p>7. On old age pension from the National Scheme EVERYONE</p> <p>8. Homemaker IF MALE, YOUNGER THAN 30</p> <p>9. Military or civil service 10. other</p>	A801
arb02a	<p>EVERYONE EXCEPT THOSE IN MILITARY OR CIVIL SERVICE (ARB01=1-8+10)</p> <p>Did you do any paid work (at least 1 hour) last week?</p> <p>1. YES → arb07 2. NO → arb02b</p>	A831
arb02b	<p>IF NOT PAID WORK LAST WEEK (ARB02A=2)</p> <p>Are you in paid work, but you were temporarily absent or had time off last week? E.G. ON A LEAVE OF ABSENCE, SICK NOTE, HOLIDAY</p> <p>1. YES → arb02c 2. NO → arb03</p>	
arb02c	<p>IF TEMPORARILY ABSENT FROM WORK (ARB02B=1)</p> <p>Why were you temporarily absent from work?</p> <p>1. HOLIDAY/FLEXI-TIME 2. OWN ILLNESS OR INJURY 3. ILLNESS OR INJURY IN THE HOUSEHOLD 4. LEAVE DUE TO PREGNANCY, BIRTH OR ADOPTION 5. PARENTAL LEAVE 6. LEAVE DUE TO SOME PERSONAL SITUATION 7. OTHER WORKING HOURS 8. EDUCATION OR TRAINING 9. OTHER REASON</p>	A802

Var-ID LOGG		Var-ID GGS
arb08 mnd/_aar	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM WORK (ARB02B=1) When did you start in this job? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH _ _ YEAR _ _ _	A833m A833y
arb09	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY FROM PAID WORK (ARB02B=1) How many hours per week do you usually work in your main occupation? Extra work brought home and overtime should be included. AN EXTRA HALF HOUR COUNTS AS ONE, E.G. 37,5 HOURS IS REGISTERED AS 38 NUMBER OF HOURS PER WEEK _____	A835
arb10a	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY FROM PAID WORK (ARB02B=1) IF R ANSWERED 37 TIMER OR MORE IN ARB09 THE INTERVIEWER CAN MARK FOR FULL-TIME WITHOUT ASKING. Is this full-time or part-time work? 1. PART-TIME → arb10b 2. FULL-TIME → arb11 3. DON'T KNOW → arb11	A834
arb10b	IF PART-TIME (ARB10A=2) What is the main reason that you work part-time and not full-time? 1. SCHOOL/STUDIES 2. OWN ILLNESS, DISABILITY 3. CARE FOR OWN CHILDREN 3. CARE FOR OTHERS IN NEED OF PERSONAL CARE (ADULT RELATIVES) 5. CARE FOR CHILDREN AND OTHERS IN NEED OF PERSONAL CARE 6. OTHER PERSONAL OR FAMILY-RELATED REASONS 7. COULD NOT GET FULL-TIME JOB 8. THE WORK IS TOO DEMANDING 9. DO NOT WANT A FULL-TIME JOB 10. OTHER REASONS	
arb11	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY FROM PAID WORK (ARB02B=1) Which of the following statements best describes where you work? 1. I usually work at the same place somewhere outside home. 2. I usually work at home. 3. I usually work parts of the week at home, and the rest of the time outside home. 4. I usually work several different places outside home	A836
arb12	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY FROM PAID WORK (ARB02B=1) Are you in this job ... "FRÉELANCERS" COULD HAVE CONTRACTS WITH AND SALARIES FROM MULTIPLE EMPLOYERS AT THE SAME TIME, WHILE STILL BE WITHOUT REGULAR "EMPLOYMENT". TAX-WISE, THEY ARE TREATED AS EMPLOYED AND THUS SHOULD BE CODED AS "EMPLOYED" 1. Employed/freelancer → arb13 2. Self-employed → arb23 3. In employment-related training or paid apprenticeship → arb13 4. Working without pay in a family enterprise → arb13	A838

Var-ID LOGG		Var-ID GGS
Employees		
arb13	IF EMPLOYED (ARB12=1, 3 OR 4) Which of the following working hour arrangements is closest to yours? 1. Day work between 0600 and 1800 2. Work that starts previous than 0600 and ends previous than 1800 3. Work that starts in ordinary day-time, but ends after 1800 4. Regular evening duty, between 1800 and 2100 5. Regular night work, between 2100 and 0600 6. 2-shift work 7. Continuous shift work ENTIRE WEEK INCLUDING SATURDAY AND SUNDAY 8. Continuous shift work ENTIRE WEEK EXCEPT SATURDAY AND SUNDAY 9. Rotation, shift 10. Other working hour arrangement	A837
arb14	IF EMPLOYED (ARB12=1, 3 OR 4) On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied are you with your current job? VALUE _____	A839
arb15	IF EMPLOYED (ARB12=1, 3 OR 4) Do you supervise or coordinate other people's work 1. YES 2. NO	A840
arb16	IF EMPLOYED (ARB12=1, 3 OR 4) If you think of your tasks at work, are those of your colleagues that do the same kind of tasks... 1. Only women 2. Mostly women 3. About as many women as men 4. Mostly men 5. Only men	A841
arb17	IF EMPLOYED (ARB12=1, 3 OR 4) Do you work in a... IF EMPLOYED THROUGH AN TEMPORARY STAFF RECRUITMENT AGENCY OR SOMETHING SIMILAR, CONSIDER THE TYPE OF OWNERSHIP OF THIS FIRM 1. Privately owned company 2. Corporation, organization or the like 3. Municipal enterprise 4. County enterprise 5. Federal enterprise	A842
arb18	IF EMPLOYED (ARB12=1, 3 OR 4) Does your employer give you the opportunity to...	
arb18a	reduced working hours? PART-TIME	
arb18b	work flexi-time? MEANS THAT R CAN COME LATE OR LEAVE EARLY	A844
arb18c	organize your working hours so that you can have whole days off work?	
arb18	ANSWER CATEGORIES FOR ARB18 1. YES 2. NO	
arb19	IF EMPLOYED (ARB12=1, 3 OR 4) Is your current work contract, if you have any, a permanent contract, a fixed-term contract, or a temporary contract? TEMPORARY CONTRACT MEANS THAT IT IS LIMITED IN TIME. 1. PERMANENT, NOT LIMITED IN TIME 2. TEMPORARY 3. DON'T KNOW	A845

Var-ID LOGG		Var-ID GGS
arb21	IF EMPLOYED (ARB12=1, 3 OR 4) Do you intend to change company or start a business within the next three years? 1. YES 2. NO	A848
arb22	IF EMPLOYED (ARB12=1, 3 OR 4) AND IF AGE 49 OR YOUNGER Do you intend to give up paid work within the next three years? 1. YES → arb29 2. NO → arb29	A849
Self-employed		
arb23	IF SELF-EMPLOYED (ARB12=2) On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied are you with your current job? VALUE _____	A850
arb24	IF SELF-EMPLOYED (ARB12=2) How many employees are there in your firm, including family members that receive payments? NUMBER OF EMPLOYEES _____	A851
arb25	IF SELF-EMPLOYED (ARB12=2) How do you expect your firm to develop over the next 3 years? Do you think it will ... 1. Grow and expand 2. Keep going as it is today 3. Decline 4. Probably be given up 5. Other 6. Don't know	A852
arb26	IF SELF-EMPLOYED (ARB12=2) Do you intend to start a new business or take an other job within the next 3 years? 1. YES 2. NO	A853
arb27	IF SELF-EMPLOYED (ARB12=2) AND IF AGE 49 OR YOUNGER Are you planning to quit working within the next 3 years? 1. YES 2. NO	A854
Everyone in paid work		
arb29	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) To what extent do you in your work experience...	
arb29a	hectic and stressful work?	
arb29b	little variation in tasks? MONOTONOUS WORK	
arb29c	data systems that are hard to learn?	
arb29d	irregular working hours?	
arb29	ANSWER CATEGORIES FOR ARB29 1. To a great extent 2. To some extent 3. To a small extent 4. Not at all	
arb30	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) To what extent to you in your work experience that....	

Var-ID LOGG		Var-ID GGS
arb30a	NOT IF R IS SELF-EMPLOYED WITHOUT ANY EMPLOYEES (ARB24=0) colleagues ask you for advice?	
arb30b	NOT IF R IS SELF-EMPLOYED (ARB12=2) your leaders appreciate what you do?	
arb30c	you have opportunities for learning new things?	
arb30d	you have autonomy in the job?	
arb30	ANSWER CATEGORIES FOR ARB30 1. To a great extent 2. To some extent 3. To a small extent 4. Not at all	
arb31a1	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) AND IF ALL OF R'S CHILDREN WERE BORN IN 1991 OR EARLIER Now I will ask some questions about leave due to birth or child care when the child(ren) were small. Have you ever taken a leave due to birth or child care? 1. YES → arb31b 2. NO → arb33	
arb31a2	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) AND IF ONE OR MORE CHILD(REN) BORN IN 1991 OR EARLIER, BUT ALSO CHILD BORN IN 1992 AND LATER Now I will ask some questions about work and leave when [name of child born in 1991 or earlier] was little. Leave due to birth or child care for children born in 1992 or later can be found in registers. Did you take a leave of absence due to birth or child care when or after [name of child born in 1991 or earlier] was born? 1. YES → arb31b 2. NO → arb33	
arb31b	IF TAKEN A LEAVE (ARB31A1=1 OR ARB31A2=1) About how many months was this altogether? NUMBER OF MONTHS _____ DON'T KNOW	
arb32a	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) AND IF HAS CHILD(REN) BORN IN 1991 OR PREVIOUS Have you ever had reduced working hours because of child care? 1. YES → arb32b 2. NO → arb33	
arb32b	IF REDUCED WORKING HOURS (ARB32A=1) Was this more than one year altogether? 1. YES → arb32c 2. NO → arb33	
arb32c	IF REDUCED WORKING HOURS (ARB32b=1) About how many [months/years] were this altogether? SUMMED UP IF SEVERAL PERIODS NUMBER OF [MONTHS/YEARS] _____ DON'T KNOW	
arb37a	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) AND IF WORKING (ARB01=1) AND IF AGE 50 OR OLDER Now I will ask some questions about retirement. Have you given some thought to the timing of your retirement? 1. YES → arb37b1 2. NO → arb37b2	

Var-ID LOGG		Var-ID GGS
arb37b1	IF THOUGHT OF TIMING OF RETIREMENT (ARB37A=1) If it was all up to you, at what age would you prefer to retire? AGE _____	
arb37b2	IF NOT THOUGHT OF TIMING OF RETIREMENT (ARB37A=2) Could I ask you anyway: If it was all up to you, at what age would you prefer to retire? AGE _____	
arb37c	IF THOUGHT OF TIMING OF RETIREMENT (ARB37A=1) Have you <u>decided</u> at what age you would quit work and retire? 1. YES → arb37d 2. NO → arb34	
arb37d	IF DECIDED AGE FOR RETIREMENT (ARB37C=1) At what age is this? AGE _____	
arb34	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) AND IF WORKING (ARB01=1) AND IF AGE 50 OR OLDER Now, suppose you were to retire as soon as you have the opportunity to do so. On a scale from 0 to 10, where 0 means "much worse" and 10 means "much better", how do you think retirement will affect...	A857
arb34a	the possibility to do what you want VALUE _____	A857_a
arb34b	your financial situation VALUE _____	A857_b
arb34c	what people around you think of you VALUE _____	A857_c
arb34d	the quality of your life VALUE _____	A857_d
arb34e	your health VALUE _____	A857_e
arb34f	IF R HAS COHABITING PARTNER, SPOUSE/REGISTERED PARTNER the closeness between you and your partner/spouse VALUE _____	A857_f
arb34g	IF R HAS CHILD(REN) OLDER THAN 18 the closeness between you and your children [and grandchildren] VALUE _____	A857_g
arb35	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) AND IF WORKING (ARB01=1) AND IF AGE 50 OR OLDER On a scale from 0 to 10, where 0 means "not at all" and 10 means "to a considerable extent", how much influence do the following have on your decision to retire as soon as you have the opportunity?	A858
arb35a	your financial situation VALUE _____	A858_a
arb35b	your work VALUE _____	A858_b
arb35c	your health VALUE _____	A858_c
arb35d	your family life VALUE _____	A858_d
arb36	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) AND IF WORKING (ARB01=1) AND IF AGE 50 OR OLDER Although you may feel that the decision to retire is yours alone, it is likely that others have opinions about what you should do. On a scale from 0 to 10, where 0 means "completely disagree" and 10 means "completely agree", how much do you agree with the following statements?	A859
arb36a	IF R HAS COHABITING PARTNER, SPOUSE/REGISTERED PARTNER my [cohabiting partner/spouse/registered partner] thinks that you should retire when possible VALUE _____	A859_a
arb36b	IF R HAS CHILD(REN) AGE 18 OR OLDER my children think that you should retire when possible VALUE _____	A859_b
arb36c	Most of your friends think that you should retire when possible VALUE _____	A859_c
arb36d	Your employer thinks that you should retire when possible VALUE _____	
arb36e	Most of your colleagues thinks that you should retire when possible VALUE _____	
arb37e	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) AND IF WORKING (ARB01=1) AND IF AGE 50 OR OLDER Would you consider continuing working after you have achieved the right to retirement/pension? 1. YES → arb39a 2. NO → arb38a	

Var-ID LOGG		Var-ID GGS
arb38	IF WOULD NOT CONSIDER WORKING AFTER GIVEN THE RIGHT TO PENSION (ARB37E=2) On a scale from 0 to 10, where 0 means "would definitely not continue" and 10 means "would definitely continue", how likely is it that you would continue working after all if you got...	
arb38a	better adjusted working hours? VALUE _____	
arb38b	more autonomy in work? VALUE _____	
arb38c	higher wage? VALUE _____	
arb38d	more interesting tasks? VALUE _____	
arb38e	less straining tasks? VALUE _____	
arb38f	considerably higher pension when retiring? VALUE _____	
arb38g	better opportunities to combine part-time work with pensions VALUE _____	
arb38h	encouragement to continue from the closest supervisor VALUE _____	
Extra work		
arb39a	IF DID PAID WORK LAST WEEK (ARB02A=1) OR IF TEMPORARILY ABSENT FROM PAID WORK (ARB02B=1) Some have more than one job. Do you currently earn money from an additional job or business? HERE MEANS PAID WORK 1. YES → arb39b 2. NO	A860
arb39b	IF ADDITIONAL JOB (ARB39A=1) How many hours per week do you normally work in your additional job or business? Including overtime and work done from the home. HALF AN HOUR IS TO BE COUNTED AS ONE E.G. 37,5 HOURS IS REGISTERED AS 38 NUMBER OF HOURS PER WEEK _____ DON'T KNOW	A862
Other activities		
Maternity leave, parental leave, adoption a leave of absence, or care leave		
arb40	IF CURRENTLY ON A LEAVE OF ABSENCE (ARB02C =4 OR 5) You previous said you were away from work because you are on a leave of absence. Are you on... ALTERNATIVE 1 ONLY IF R IS FEMALE 1. Maternity leave 2. Parental leave 3. Adoption a leave of absence 4. Unpaid care leave	A802
arb41_ mnd/_aar	IF ON A LEAVE OF ABSENCE (ARB02C =4 OR 5) In what month and year did you start this leave? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	A802m A802y
arb42	IF ON A LEAVE OF ABSENCE (ARB02C =4 OR 5) On a scale from 0 to 10, where 0 means "completely dissatisfied" and 10 means "completely satisfied", how satisfied are you about being on [maternity leave/on parental leave/adoption a leave of absence/care leave?] VALUE _____	A804
arb43a	IF ON A LEAVE OF ABSENCE (ARB02C =4 OR 5) Do you have the opportunity to resume your work after your leave has ended? 1. YES → arb43b 2. NO → arb44	A806
arb43b	IF OPPORTUNITY TO RESUME WORK AFTER LEAVE (ARB43A=1) Do you intend to resume your work after your leave has ended? 1. YES 2. NO	A807a
arb44	IF NOT OPPORTUNITY TO RESUME WORK AFTER LEAVE (ARB43A=2) Do you want to work when your leave has ended? 1. YES 2. NO 3. DON'T KNOW	A807b

Var-ID LOGG		Var-ID GGS
arb62	<p>IF NOT EMPLOYMENT, BUT HAD PAID WORK PREVIOUS (ARB49=1 OR ARB53A=1 OR ARB53B=1 OR ARB57=1 OR ARB59=1)</p> <p>What was the main reason that you quit this job?</p> <ol style="list-style-type: none"> 1. LAID OFF (BUSINESS CLOSURE, REDUNDANCY, EARLY RETIREMENT, DISMISSAL, ETC. 2. MANDATORY RETIREMENT 3. END OF CONTRACT/TEMPORARY JOB 4. SALE/CLOSURE OF OWN OR FAMILY BUSINESS 5. MARRIAGE 6. CHILD BIRTH/ NEED TO LOOK AFTER CHILDREN 7. NEED TO LOOK AFTER OLD, SICK, DISABLED PERSON(S) 8. PARTNER'S/SPOUSE'S JOB REQUIRED MOVE TO ANOTHER PLACE 9. STUDYING 10. MILITARY OR CIVIL SERVICE 11. OWN ILLNESS OR DISABILITY 12. WANTED TO RETIRE OR TO LIVE OF PRIVATE MEANS 13. OTHER REASONS _____ 	A830
arb64	<p>IF NOT EMPLOYMENT, BUT HAD PAID WORK PREVIOUS (ARB49=1 OR ARB53A=1 OR ARB53B=1 OR ARB57=1 OR ARB59=1)</p> <p>Do you miss your job?</p> <ol style="list-style-type: none"> 1. YES → arb65a 2. NO → arbp01 	
arb65	<p>IF MISSES JOB (ARB64=1)</p> <p>What parts of the job are you missing? Do you miss...</p>	
arb65a	the income	
arb65b	the colleagues	
arb65c	the professional challenges	
arb65d	the regular activity	
arb65e	the tasks you were doing	
arb65	<p>ANSWER CATEGORIES FOR ARB65</p> <ol style="list-style-type: none"> 1. YES 2. NO 	
[Cohabiting partner/spouse/reg. partner]'s employment situation and income		
arbp01	<p>IF R HAS COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER</p> <p>Now I will ask some questions about your [cohabiting partner's/spouse's/registered partner's] employment situation. Do your [cohabiting partner/spouse/registered partner] mainly consider him/her self as...</p> <p>EVERYONE</p> <ol style="list-style-type: none"> 1. Employed <p>EVERYONE</p> <ol style="list-style-type: none"> 2. Student, schoolchild, in vocational training <p>IF YOUNGER THAN AGE 67</p> <ol style="list-style-type: none"> 3. Unemployed <p>IF UNDER AGE 67</p> <ol style="list-style-type: none"> 4. On Disability pension <p>IF MINIMUM AGE 62, MAXIMUM AGE 66</p> <ol style="list-style-type: none"> 5. On Negotiated pension (AFP) <p>IF MINIMUM AGE 55, MAXIMUM AGE 66</p> <ol style="list-style-type: none"> 6. On occupational pension <p>IF OLDER THAN AGE 67</p> <ol style="list-style-type: none"> 7. On old age pension from the National Scheme <p>EVERYONE</p> <ol style="list-style-type: none"> 8. Homemaker <p>IF MALE, YOUNGER THAN 30</p> <ol style="list-style-type: none"> 9. Military or civil service 10. Other 	A901

Var-ID LOGG		Var-ID GGS
arbp02a	IF R HAS COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER, BUT THAT IS NOT IN MILITARY OR CIVIL SERVICE (ARBP01=1-8+10) Did your [cohabiting partner/spouse/registered partner] do paid work for at least 1 hour last week? 1. YES → arbp03 2. NO → arbp02b	A920
arbp02b	IF PARTNER NOT PAID WORK LAST WEEK (ARBP02A=2) Do your [cohabiting partner/spouse/registered partner] have paid work that he/she was TEMPORARILY ABSENT from the last week? LIKE HOLIDAY, SICK-LISTED, LEAVE DUE TO BIRTH OR CHILD CARE ETC 1. YES → arbp02c 2. NO → arbp17	
arbp02c	IF PARTNER TEMPORARILY ABSENT FROM WORK (ARBP02B=1) Why was [he/she] temporarily absent from work? 1. HOLIDAY/FLEXI-TIME 2. OWN ILLNESS OR INJURY 3. ILLNESS OR INJURY IN THE HOUSEHOLD 4. LEAVE DUE TO PREGNANCY, BIRTH OR ADOPTION 5. PARENTAL LEAVE 6. LEAVE DUE TO SOME PERSONAL SITUATION 7. OTHER WORKING HOURS 8. EDUCATION OR TRAINING 9. OTHER REASON	
Partner's employment		
arbp03	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP02A=1 OR ARB02B=1) I will now ask some questions about your [cohabiting partner/spouse/registered partners] current occupation. What is [NAME]'s current occupation? IF HE/SHE HAS TWO OR MORE JOBS, R ANSWERS WITH RESPECT TO THE JOB WHERE [HIS/HER] PARTNER SPEND THE MOST WORKING HOURS OCCUPATION _____	A921
arbp04	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP02A=1 OR ARB02B=1) How many hours per week does [he/she] usually work considering his/her main job? Also count overtime and extra work from home. EXTRA HALF HOUR SHALL BE COUNTED AS ONE, E.G. 37,5 HOURS IS REGISTERED AS 38 NUMBER OF HOURS PER WEEK _____	A923
arbp05a	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP02A=1 OR ARB02B=1) Is this full time or part time work? 1. FULL TIME → arbp06 2. PART TIME → arbp05b 3. DON'T KNOW → arbp06	A922
arbp05b	IF PART TIME (ARBP05A=2) What is the main reason for him/her to have a part-time instead of full-time job? 1. SCHOOL/STUDIES 2. OWN ILLNESS, DISABILITY 3. CARE FOR OWN CHILDREN 4. CARE FOR OTHERS IN NEED OF PERSONAL CARE (ADULT RELATIVES) 5. CARE FOR CHILDREN AND OTHERS IN NEED OF PERSONAL CARE 6. OTHER PERSONAL OR FAMILY-RELATED REASONS 7. COULD NOT GET FULL-TIME JOB 8. THE WORK IS TOO DEMANDING 9. DO NOT WANT A FULL-TIME JOB 10. OTHER REASONS	

Var-ID LOGG		Var-ID GGS
arbp06	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP02A=1 OR ARB02B=1) Which of the following statements gives the best description of where he/she works? 1. Usually works at the same place somewhere outside home. 2. Usually works at home. 3. Usually works parts of the week at home, and the rest of the time outside home. 4. Usually works several different places outside home	A924
arbp07	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP02A=1 OR ARB02B=1) Is he/she in this job... "FREELANCERS" COULD HAVE SIGNED CONTRACTS WITH SEVERAL EMPLOYERS AT THE SAME TIME AND RECEIVE SALARIES FROM THESE, AND STILL NOT HAVE THE USUAL CONDITIONS OF EMPLOYMENT. CONSIDERING QUESTIONS ABOUT TAXES THEY ARE STILL TO BE COUNTED AS EMPLOYED, AND SHALL BE MARKED AS EMPLOYED. 1. Employed/freelancer → arb13 2. Self-employed → arb23 3. In employment-related training or paid apprenticeship → arb13 4. Working without pay in a family enterprise → arb13	A926
Employed partner		
arbp08	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP07=1, 3 OR 4) Which of the following working hour arrangements is closest to his/her? 1. Day work between 0600 and 1800 2. Work that starts previous than 0600 and ends previous than 1800 3. Work that starts in ordinary day-time, but ends after 1800 4. Regular evening duty, between 1800 and 2100 5. Regular night work, between 2100 and 0600 6. 2-shift work 7. Continuous shift work ENTIRE WEEK INCLUDING SATURDAY AND SUNDAY 8. Continuous shift work ENTIRE WEEK EXCEPT SATURDAY AND SUNDAY 9. Rotation, shift 10. Other working hour arrangement	A925
arbp09	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP07=1, 3 OR 4) Does he/she supervise or coordinate other people's work? 1. YES 2. NO	A927
arbp10	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP07=1, 3 OR 4) Do he/she work in .. IF EMPLOYED THROUGH AN TEMPORARY STAFF RECRUITMENT AGENCY OR SOMETHING SIMILAR, MARK THE TYPE OF OWNERSHIP OF THIS FIRM 1. Privately owned company 2. A corporation, organization or the like 3. Municipal enterprise 4. County enterprise 5. Federal enterprise	A928
arbp11	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] EMPLOYED (ARBP07=1, 3 OR 4) Does his/her employer give him/her the opportunities to...	
arbp11a	reduced working hours? PART-TIME	
arbp11b	flexi-time? SO THAT R CAN COME PREVIOUS OR GO HOME LATER	A930
arbp11c	other flexible working hours arrangements?	
arbp11	ANSWER CATEGORIES FOR ARBP11 1. YES 2. NO 3. DON'T KNOW	

Var-ID LOGG		Var-ID GGS
arbp18	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] UNEMPLOYED (ARBP01=3) Was [he/she] working directly before he/she became unemployed? 1. YES → arbp27 2. NO → arbp30	A908
Students		
arbp19_ mnd/ _aar	IF [COHABITING PARTNER WITHOUT PERSONAL REGISTER NUMBER (FAM01)] STUDENT (ARBP01=2) You previous said that your cohabiting partner consider him/her self as a student/school child/ in vocational training. When did [he/she] become a student/school child/in vocational training? USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	A909m A909y
arbp20	IF [COHABITING PARTNER WITHOUT PERSONAL REGISTER NUMBER (FAM01)] STUDENT (ARBP01=2) Did [he/she] have employment directly before [he/she] started studying? 1. YES → arbp27 2. NO → arbp30	A910
arbp21	IF [COHABITING PARTNER WITH PERSONAL REGISTER NUMBER I FAM01, SPOUSE OR REGISTERED PARTNER] STUDENT (ARBP01=2) You previous said that your [cohabiting partner/spouse/registered partner] consider him/her self as a student/school child/ in vocational training. Did [he/she] have employment directly before [he/she] started studying? 1. YES → arbp27 2. NO → arbp30	A910
arbp22_ mnd/ _aar	Retired/ on disability pension IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] RETIRED/ON DISABILITY PENSION (ARBP01=4,5,6,7) You previous said that your [cohabiting partner/spouse/registered partner] consider him/herself as [retired/on disability pension/negotiated pension/old age pension]. When did [NAME] get his pension? IF R HAS HAD DIFFERENT PENSIONS – USE THE LAST TIME R STARTED RECEIVING ANY OF THESE. USE SEASON IF R DOES NOT REMEMBER THE CORRECT MONTH — SPRING=04, SUMMER=07, AUTUMN=10, WINTER=01 MONTH __ __ YEAR __ __ DON'T KNOW	A911m A911y
arbp23a	IF [COHABITING PARTNER, SPOUSE OR REGISTERED PARTNER] RETIRED/ON DISABILITY PENSION (ARBP01=4,5,6,7) Was [he/she] working directly before [he/she] became [retired/ disability pension]? 1. YES → arbp27 2. NO → arbp23b	A912
arbp23b	IF NOT IN PAID WORK DIRECTLY BEFORE RETIREMENT/PENSION (ARBP23A=2) Was [he/she] sick-listed or had rehabilitation directly before [he/she] became [retired/ disability pension]? 1. YES → arbp27 2. NO → arbp30	

Var-ID LOGG		Var-ID GGS
Cohabiting partner's income		
arbp30	IF COHABITING PARTNER NOT REGISTERED WITH PERSONAL IDENTIFIER (FAM01) What was your cohabiting partner's total income in 2006? Sum up income [he/she] gets from different sources. INCOME ALSO INCLUDES MONEY FROM THE GOVERNMENT, PENSIONS, MONEY FROM STOCKS AND INTERESTS _____ NOK	A939_x
The economic situation of the household		
Economic situation		
We will now ask some questions about your economic situation		
eie01	IF LIVES WITH OTHERS A household can have several sources of income, and different household members can contribute with this. If we think of the total income of your household, how easy or hard is it for you to "make ends meet"? Is it... 1. Very hard 2. Hard 3. A little hard 4. Quite easy 5. Easy 6. Very easy	A1002
eie01b	IF LIVES TOGETHER ALONE If we think of your total income, how hard or easy is it for you to "make ends meet"? Is it... 1. Very hard 2. Hard 3. A little hard 4. Quite easy 5. Easy 6. Very easy	A1002
eie04	EVERYONE After you have paid all bills and expenses, is there normally some money left that you could save? 1. YES 2. NO	A1005
eie05	IF COHABITING PARTNER OR SPOUSE/REGISTERED PARTNER How do you and your partner/spouse organize your total monthly expenses for food, living, and loans you might have together 1. Shared equally 2. Relative to the size of our incomes 3. The one that has money pays 4. Other, SPECIFY _____	A406
eie06	EVERYONE On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied are you with your current economic situation? VALUE _____	
Money transfer and inheritance		
ove01	EVERYONE Did you or your [cohabiting partner/spouse/registered partner] receive money or valuable gifts from anyone outside the household within the last year? Also include property and inheritance. HERE WE HAVE NOT DEFINED "VALUABLE", WHAT THIS MEANS DEPENDS ON R'S SUBJECTIVE UNDERSTANDING. 1. YES → ove02 2. NO → ove06	A1010

Var-ID LOGG		Var-ID GGS
ove02_x	IF YES (OVE01=1) Who gave you this? NOTE UNTIL 5 PERSONS. USE A LIST THAT SHOWS PROVIDERS AND RECEIVERS 01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]	A1011_x
ove03_x	TO BE ASKED ABOUT EACH PERSON IN OVE02 Was the gift from [REF. PERSON] inheritance or advanced inheritance? 1. YES → ove05 2. NO	A1012_x
ove06	EVERYONE Have you or your [cohabiting partner/spouse/registered partner] given money or valuable gifts to anyone outside the household within the last year? Also include property and inheritance. HERE WE HAVE NOT DEFINED "VALUABLE", WHAT THIS MEANS DEPENDS ON R'S SUBJECTIVE UNDERSTANDING. 1. YES → ove07 2. NO → hol01	A1015
ove07_x	IF YES (OVE06=1) Who did you give this to? NOTE UNTIL 5 PERSONS. USE A LIST THAT SHOWS PROVIDERS AND RECEIVERS 01 [REF. PERSON] 02 [REF. PERSON] 03 [REF. PERSON]	A1016_x
Attitudes and opinions		
	Now the interview is soon finished. But before we are done I will ask a few questions about quite different subjects.	
eie07a	EVERYONE Does your household have a pet? 1. YES → eie07b 2. NO → ove01	
eie07b	IF YES (EIE07A=1) What sort of pet is this? MULTIPLE ANSWERS POSSIBLE 1. DOG 2. CAT 3. OTHER	

Var-ID LOGG		Var-ID GGS
hol01	<p>EVERYONE</p> <p>Which religious denomination do you adhere to, if any?</p> <ol style="list-style-type: none"> 1. THE NORWEGIAN NATIONAL CHURCH 2. THE ROMAN-CATHOLIC CHURCH 3. PENTECOSTAL CHURCH 4. ISLAMIC RELIGIOUS FAITH/COMMUNITY 5. THE EVANGELICAL LUTHERAN NONCONFORMIST CHURCH IN NORWAY 6. THE EVANGELICAL LUTHERAN RELIGIOUS COMMUNITY 7. FOREIGN EVANGELICAL RELIGIOUS COMMUNITY 8. JEHOVAH'S WITNESSES 9. THE NORWEGIAN BAPTIST COMMUNITY 10. THE METHODIST CHURCH I NORWAY 11. THE NORWEGIAN MISSION SOCIETY 12. BUDDHISM 13. ADVENTIST SOCIETY 14. THE ORTHODOX CHURCH 15. CHRISTIAN CENTER 16. THE CHRISTIAN COMMUNITY 17. HINDUISTIC RELIGIOUS COMMUNITY 18. SIKH 19. THE MOSAIC COMMUNITY 20. THE CONGREGATION OF GOD 21. OTHER RELIGIOUS COMMUNITIES 22. HUMAN-ETHICAL CONGREGATION 23. OTHER 24. NO RELIGIOUS COMMUNITY 	A1101
hol02	<p>EVERYONE</p> <p>I am going to read out some statements about who should take care of an elderly parent. I would like you to say to what extent you agree or disagree, on a scale from 0 to 10 where 0 means "completely disagree" and 10 means "completely agree".</p>	A1112
hol02a	<p>Children should take responsibility for caring for their parents when parents are in need</p> <p>VALUE _____</p>	A1112_a
hol02b	<p>Children should adjust their working lives to the needs of their parents</p> <p>VALUE _____</p>	A1112_b
hol02c	<p>When parents are in need, daughters should take more caring responsibility than sons</p> <p>VALUE _____</p>	A1112_c
hol02d	<p>Children ought to provide financial help with their parents when their parents are having financial difficulties</p> <p>VALUE _____</p>	A1112_d
hol02e	<p>Children should have their parents to live with them when parents can no longer look after themselves</p> <p>VALUE _____</p>	A1112_e
hol03	<p>For which political party did you vote in last parliamentary election?</p> <ol style="list-style-type: none"> 1. PROGRESS PARTY 2. CONSERVATIVE PARTY 3. CENTER PARTY 4. CHRISTIAN DEMOCRATIC PARTY 5. LIBERAL PARTY 6. OR PARTY 7. SOCIALIST LEFT PARTY 8. RED ELECTORAL ALLIANCE 9. OTHER 10. DID NOT VOTE 11. DIDN'T HAVE THE RIGHT TO VOTE 12. DON'T REMEMBER 	
hol04	<p>Finally: On a scale from 0 to 10, where 0 means "Not satisfied at all" and 10 means "completely satisfied", how satisfied are you, on the whole, with your current life?</p> <p>VALUE _____</p>	

List of providers and receivers

1. COHABITING PARTNER, SPOUSE, REGISTERED PARTNER
2. NON-RESIDENT PARTNER
3. MOTHER
4. FATHER
5. MOTHER OF R'S COHABITING PARTNER, SPOUSE, REGISTERED PARTNER, NON-RESIDENT PARTNER
6. FATHER OF R'S COHABITING PARTNER, SPOUSE, REGISTERED PARTNER, NON-RESIDENT PARTNER
7. SON
8. DAUGHTER
9. STEPSON
10. STEPDAUGHTER
11. SON IN LAW
12. DAUGHTER IN LAW
13. FEMALE FRIEND
14. MALE FRIEND
15. NEIGHBOR
16. COLLEAGUE - FEMALE
17. COLLEAGUE - MALE
18. SISTER
19. BROTHER
20. MATERNAL GRANDMOTHER
21. PATERNAL GRANDMOTHER
22. MATERNAL GRANDFATHER
23. PATERNAL GRANDFATHER
24. MATERNAL GRANDMOTHER OF R'S COHABITING PARTNER, SPOUSE, REGISTERED PARTNER, NON-RESIDENT PARTNER
25. PATERNAL GRANDMOTHER OF R'S COHABITING PARTNER, SPOUSE, REGISTERED PARTNER, NON-RESIDENT PARTNER
26. MATERNAL GRANDFATHER OF R'S COHABITING PARTNER, SPOUSE, REGISTERED PARTNER, NON-RESIDENT PARTNER
27. PATERNAL GRANDFATHER OF R'S COHABITING PARTNER, SPOUSE, REGISTERED PARTNER, NON-RESIDENT PARTNER
28. GRANDCHILD - FEMALE
29. GRANDCHILD - MALE
30. GREAT-GRANDCHILD - FEMALE
31. GREAT-GRANDCHILD - MALE
32. AUNT
33. UNCLE
34. NIECE
35. NEPHEW
36. OTHER RELATIVE
37. OTHER PERSON
38. ORGANIZATION OR FIRM

6.2. Self-administered questionnaire (SAQ)

Personal characteristics		Var-ID
Var-ID		GGS
spm1	<p>Below you see a number of pairs of words that to various degrees characterize human beings. Between each pair of words are seven boxes. Tick off the box that fits best for you as you usually are.</p> <p>Do not give each pair too much thought, but tick off according to your immediate opinion.</p> <p>Tick once per line</p>	
spm1_1	Is talkative	
spm1_2	Can be cold and aloof	
spm1_3	Does a thorough job	
spm1_4	Is depressed, blue	
spm1_5	Is original, comes up with new ideas	
spm1_6	Tends to be quiet	
spm1_7	Is helpful and unselfish with others	
spm1_8	Tends to be disorganized	
spm1_9	Is relaxed, handles stress well	
spm1_10	Has an active imagination	
spm1_11	Is outgoing, sociable	
spm1_12	Is sometimes rude to others	
spm1_13	Makes plans and follows through with them	
spm1_14	Worries a lot	
spm1_15	Likes to reflect, play with ideas	
spm1_16	Is sometimes shy, inhibited	
spm1_17	Is considerate and kind to almost everyone	
spm1_18	Can be somewhat careless	
spm1_19	Gets nervous easily	
spm1_20	Has few artistic interests	
spm1	<p>ANSWER CATEGORIES FOR spm1</p> <ol style="list-style-type: none"> 1. Does not fit 2. 3. 4. 5. 6. Fits completely 	
spm2	<p>Below you will see a list over qualities people may have. To what extent is each quality an accurate description of you?</p> <p>Tick once per line.</p>	
spm2_1	Aggressive	
spm2_2	Understanding	
spm2_3	Has leadership abilities	
spm2_4	Compassionate	
spm2_5	Eager to soothe hurt feelings	
spm2_6	Defend own beliefs	
spm2_7	Sympathetic	
spm2_8	Willing to take risks	
spm2_9	Tender	
spm2_10	Assertive	
spm2_11	Sensitive to the needs of others	
spm2_12	Forceful	
spm2	<p>ANSWER CATEGORIES FOR spm2</p> <ol style="list-style-type: none"> 1. Not at all accurate 2. Slightly accurate 3. Partly accurate 4. Fairly accurate 5. Very accurate 	

Var-ID LOGG		Var-ID GGS
Activities and voluntary work		
spm3	About how often do you do the following?	
spm3_1	Tracking or training out-doors (walks, bicycle rides, skiing etc.)	
spm3_2	In-doors training (training studio, aerobics, gymnastics, etc.)	
spm3_3	Cooking dinner	
spm3_4	Shopping for food	
spm3_5	Cleaning	
spm3_6	Maintenance/Repairs	
spm3_7	Leisure travels abroad	
spm3_8	Use of country cottage/ holiday cabin	
spm3_9	Gardening (in the season)	
spm3_10	Fishing/hunting	
spm3_11	Handicrafts, carpeting etc.	
spm3_12	Using internet or e-mail	
spm3_13	Reading newspapers	
spm3_14	Voluntary work for clubs/organizations	
spm3_15	Attend meetings in clubs/organizations	
spm3_16	Read books	
spm3_17	Attend courses/lectures	
spm3_18	Go to cinema/theatre/concerts/exhibitions	
spm3_19	Go to café/restaurant	
spm3_20	Get visits or visit others	
spm3_21	Help others outside the close family (with for instance transportation, shopping etc.)	
spm3_22	Look after grandchildren	
spm3_23	Exercise so that I become out of breath and/or sweat	
spm3_24	Take part in mass or other religious meetings. <i>Not included special occasions such as weddings, baptism, etc.</i>	A1102 A1102u
spm3	ANSWER CATEGORIES FOR spm3 1. Daily 2. Weekly but not daily 3. Monthly but not weekly 4. A few times a year 5. Less often 6. Never	
spm4	Are you now or have you been an active member of an association or organization? 1. Yes, now. 2. Not now but before. 3. No, never.	
spm5	Do you now have or have you had positions of trust in an association or organization? 1. Yes, now. 2. Not now but before. 3. No, never.	
Well-being and way of life		
spm6	Below are a number of statements about how you are doing now and how you relate to different aspects of life. Considering yourself for the time being, to what extent do you agree or disagree? Tick once per line	
spm6_1	In most ways my life is close to my ideal	
spm6_2	The conditions of my life are excellent	
spm6_3	So far I have gotten the important things I want in life	
spm6_4	I feel that I have a number of good qualities	
spm6_5	All in all, I am inclined to feel that I'm a failure	
spm6_6	I am able to do things as well as most other people	
spm6_7	I take a positive attitude towards myself	

Var-ID LOGG		Var-ID GGS
spm6_8	I certainly feel useless at times	
spm6_9	I wish I could have more respect for myself	
spm6_10	I have little control over the things that happen to me	
spm6_11	What happens to me in the future mostly depends on me	
spm6_12	There is really no way I can solve some of the problems I have	
spm6_13	There is little I can do to change many of the important things in my life	
spm6_14	I often feel helpless in dealing with the problems of life	
spm6_15	Sometimes I feel that I'm being pushed around in life	
spm6_16	I can do just about anything I really set my mind to do	
spm6_17	I often think about that life eventually will come to an end	
spm6_18	I feel uneasy about death	
spm6	ANSWER CATEGORIES FOR spm6 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree	
spm7	Below is a list of words describing various emotions. To what extent have you had each of these emotions during the past 2 weeks? Tick once per line.	
spm7_1	Excited	
spm7_2	Distressed	
spm7_3	Enthusiastic	
spm7_4	Upset	
spm7_5	Attentive	
spm7_6	Scared	
spm7_7	Irritated	
spm7_8	Inspired	
spm7_9	Nervous	
spm7_10	Afraid	
spm7_11	Determined	
spm7_12	Interested	
spm7	ANSWER CATEGORIES FOR spm7 1. Not at all 2. A little 3. To some extent 4. Quite a lot 5. To a great extent	
spm8	Listed below are some symptoms or problems that people sometimes have. To what extent have you been bothered by each of the problems during the past two weeks?	
spm8_1	Nervousness or shakiness inside	
spm8_2	Suddenly scared for no reason	
spm8_3	Feeling tense or keyed up	
spm8_4	Feeling restless, can't sit still	
spm8_5	Spells of terror or panic	
spm8	ANSWER CATEGORIES FOR spm8 1. Not at all 2. A little 3. Quite a bit 4. Extremely	
spm9	How often – if at all – do you feel lonely? 1. Often 2. Sometimes 3. Seldom 4. Never	

Var-ID LOGG		Var-ID GGS
Childhood and life events		
spm10	Some people have had problems in their childhood. Did you experience any of the following problems before you turned 16?	
spm10_1	Financial problems in the family	
spm10_2	Frequent conflicts between your parents	
spm10_3	Parents got divorced	
spm10_4	Parents abused alcohol or drugs	
spm10_5	Sexual abuse	
spm10_6	Long-lasting teasing	
spm10_7	Physical or mental abuse	
spm10_8	Difficulties in keeping up at school	
spm10	ANSWER CATEGORIES FOR spm10 1. Yes 2. No	
spm11	Throughout life, many people meet with great strain. Have you experienced any of the following life events after the age of 16? State the approximate age when it happened the last time.	
spm11_1	Had a child with a serious and lasting handicap/illness	
spm11_2	Death of a close friend	
spm11_3	Death of a close family member	
spm11_4	Lost your job	
spm11_5	Serious financial loss	
spm11_6	Life threatening illness/injury	
spm11_7	Serious illness of someone close to you	
spm11_8	Serious illness of someone in your family	
spm11_9	Conflict-ridden inheritance settlement	
spm11_10	Legal problems that ended in court	
spm11_11	Subject to violence	
spm11_12	Subject to sexual abuse	
spm11_13	Subject to serious theft or break-in	
spm11	ANSWER CATEGORIES FOR spm11 1. No 2. Yes → About how old were you? _____ YEARS	
spm12	Have you, within the past 5 years, experienced any of the following events? Indicate about long time it is since it happened. If happened more than once, put several marks.	
spm12_1	Child moved away from home	
spm12_2	Changed residence	
spm12_3	Major problems in partner relationship	
spm12_4	Payment problems	
spm12_5	Sexual problems	
spm12_6	Relationship problems with own parents	
spm12_7	Relationship problems with own children	
spm12_8	Problems at work	
spm12_9	Major reorganizations at work	
spm12_10	Changed job	
spm12_11	Stopped smoking	
spm12_12	Started smoking	
spm12_13	More exercise	
spm12_14	Healthier diet	
spm12	ANSWER CATEGORIES FOR spm12 1. No, not experienced within the last 5 years 2. Past year 3. 1-2 years ago 4. 3-5 years ago	

Var-ID LOGG		Var-ID GGS
Health and lifestyle		
spm13_1	About how tall are you? _____ cm	
spm13_2	About how much do you weigh? _____ kg	
spm14	Have you, during the past 12 month ...	
spm14_1	seen a doctor	
spm14_2	seen a psychologist / psychiatrist?	
spm14_3	seen a dentist	
spm14_4	been admitted to a hospital	
spm14	ANSWER CATEGORIES FOR spm14 1. No 2. Yes	
spm15	Do you use, or have you used, any of the following types of tobacco/nicotine? Tick once per line.	
spm15_1	Cigarettes	
spm15_2	Snuff (moist powder tobacco)	
spm15_3	Other types of tobacco	
spm15_4	Nicotine chewing gum	
spm15_5	Other nicotine preparations	
spm15	ANSWER CATEGORIES FOR spm15 1. Before, but not now 2. Never 3. Rarely 4. Some times 5. Daily 6. If daily: Number/units per day _____	
spm16	Consider your alcohol consumption <u>the past 12 months</u> . About how often have you Tick once per line.	
spm16_1	consumed alcohol? Count even the times you only drank a little.	
spm16_2	consumed a volume at least equal to either 2 half liters (pints) of pilsner beer or 1/2 a bottle of wine or 3 drinks of liquor?	
spm16_3	consumed so much that you have felt intoxicated?	
spm16	ANSWER CATEGORIES FOR spm16 1. Daily or almost daily 2. 2-3 times a week 3. Once a week 4. 2-3 times a month 5. Once a month 6. Less often 7. Not the past 12 months 8. Have never consumed alcohol	

Var-ID LOGG		Var-ID GGS
spm17	If you have consumed alcohol the past year, how many 'drinks' have you usually consumed each time? (One 'drink' equals 1/2 liter of pilsner beer, one glass of wine, a small glass of dessert wine or 4 centiliters liquor) _____ Number of drinks	
spm18	Have you used any of the following medications during the last 4 weeks? Tick once per line.	
spm18_1	Strong painkillers prescribed by a doctor	
spm18_2	Tranquillizers	
spm18_3	Medications against depression	
spm18_4	Sleeping pills	
spm18_5	Naturopathic medicines	
spm18_6	Aphrodisiacs	
spm18	ANSWER CATEGORIES FOR spm18 1. Daily or almost daily 2. 2-3 times a week 3. Once a week 4. 2-3 times last month 5. No, not used	
spm19	19. Below you find a list on how you may have felt lately. Tick off how often you have felt this way during <u>the past week</u> .	
spm19_1	I was bothered by things that usually don't bother me	
spm19_2	I did not feel like eating; my appetite was poor	
spm19_3	I felt that I could not shake off the blues even with help from my family or friends	A721_a
spm19_4	I felt that I was just as good as other people	
spm19_5	I had trouble keeping my mind on what I was doing	
spm19_6	I felt depressed	A721_b
spm19_7	I felt that everything I did was an effort	
spm19_8	I was hopeful about the future	
spm19_9	I thought my life had been a failure	A721_c
spm19_10	I felt fearful	A721_d
spm19_11	My sleep was restless	
spm19_12	I was happy	
spm19_13	I talked less than usual	
spm19_14	I felt lonely	A721_e
spm19_15	People were unfriendly	
spm19_16	I enjoyed life	
spm19_17	I had crying spells	A721_f
spm19_18	I felt sad	A721_g
spm19_19	I felt that people disliked me	
spm19_20	I could not get "going"	
spm19	ANSWER CATEGORIES FOR spm19 1. Rarely or none of the time 2. Some or a little of the time 3. Occasionally or a moderate amount of the time 4. Most or all of the time	
Age-related changes		
	People feel younger or older than they really are.	
spm20	How old do you usually feel? _____ Years	
spm21	How old do you think people usually think you are? _____ Years	
spm22	If you could choose your age, how old do you wish you could be? _____ Years.	
spm23	Have you done or would you consider doing any of the following? Tick once per line.	
spm23_1	Using anti-wrinkle cream	
spm23_2	Hair treatment	
spm23_3	Lipoplasty (operation to remove fat)	

Var-ID LOGG		Var-ID GGS
spm23_4	Cosmetic operation	
spm23	ANSWER CATEGORIES FOR spm23 1. Have done it 2. I might do it 3. I might consider doing it 4. I will never do it	
spm24	Whatever age one has, one is older than earlier in life. To what extent do you agree or disagree with the following statements concerning your life up to now? Tick once per line.	
Spm24_1	Growing older has had a positive effect on my life	
spm24_2	The older I become the more I have to give up in my life	
spm24_3	Growing older has brought changes that I am dissatisfied with	
spm24_4	With increasing age I can better accept myself as I am	
spm24	ANSWER CATEGORIES FOR spm24 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree	
spm25	Compared to 10 years ago, have you experienced changes in any of these areas? Tick once per line	
spm25_1	Physical health	
spm25_2	Remembering names	
spm25_3	Finding words	
spm25_4	Sleep	
spm25_5	Condition/physical fitness	
spm25_6	Mood	
spm25_7	Care and consideration for others	
spm25_8	Ability to understand connections in life	
spm25_9	Knowledge about yourself	
spm25_10	Ability to learn new things	
spm25_11	Contact with other people	
spm25_12	Ability to work	
spm25_13	Motivation to work	
spm25	ANSWER CATEGORIES FOR spm25 1. Much better 2. Better 3. No change 4. Worse 5. Much worse 6. Not relevant	
Opinions of public spending		
spm26	Do you think public spending should increase, decrease or remain about the same as now, to the following? Tick once per line.	
Spm26_1	Nursery schools	
spm26_2	Schools and education	
spm26_3	Health services and hospitals	
spm26_4	Environment protection	
spm26_5	Old age pensions	
spm26_6	Care and assistance for the elderly	
spm26_7	Refugees and immigrants	
spm26_8	Art and culture	
spm26_9	Military defense	
spm26_10	Rural politics	
spm26	ANSWER CATEGORIES FOR spm26 1. More public spending 2. About as now 3. Less public spending	

Var-ID LOGG		Var-ID GGS
spm27	To what extent do you agree or disagree with the following statements? Tick once per line.	
spm27_1	Adult children should live close to their older parents so that they can help them	
spm27_2	Adult children should be willing to sacrifice some of the things they want in order to support their ageing parents	
spm27_3	Older parents should be able to depend on help from their adult children	
spm27_4	Parents are entitled to some return for what they have sacrifices for their own children	
spm27_5	Parents should leave an inheritance for their descendants	
spm27	ANSWER CATEGORIES FOR spm27 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree	
spm28	28. There are varying views on how we should care for people in our society. Please indicate for each of the topics mentioned whether you think it is mainly the task for society, the family or for both? Tick once per line.	
spm28_1	Care for older persons in need of care at their home	A1110_a
spm28_2	Practical help to older people, such as help with cleaning and washing clothes	
spm28_3	Care for pre-school children	A1110_b
spm28_4	Care for schoolchildren during after-school hours	A1110_c
spm28_5	Financial support for poor elderly people	A1110_d A1110_e
spm28_6	Financial support for poor, young parents	
spm28	ANSWER CATEGORIES FOR spm28 1. Mainly a task for society 2. More a task for society than for the family 3. A task equally for both society and the family 4. More a task for the family than for society 5. Mainly a task for the family	
spm29	29. To what extent do you agree or disagree with the following statements? Tick once per line.	
spm29_1	Grandparents should look after their grandchildren if the parents of these grandchildren are unable to do so	A1111_a
spm29_2	Parents ought to provide financial help for their adult children if the children are having financial difficulties	A1111_b
spm29_3	If their adult children were in need, parents should adjust their own lives in order to help them	A1111_c
spm29	ANSWER CATEGORIES FOR spm29 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree	
spm30	To what extent do you agree or disagree with the following statements? Tick once per line.	
spm30_1	It is important for an infant to be registered in the appropriate religious ceremony	A1103_a
spm30_2	It is important for people who marry in registry offices to have a religious wedding	A1103_b
spm30_3	It is important for a funeral to include a religious ceremony	A1103_c
spm30	ANSWER CATEGORIES FOR spm30 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree	
spm31	Do you consider yourself as: 1. Absolutely not religious 2. Somewhat religious 3. Very religious 4. Don't know	

Var-ID LOGG		Var-ID GGS
Family and sense of belonging		
spm32	Is it any of these that you during the past 12 months have ... Tick for every person.	
spm32_1	been on holidays with	
spm32_2	celebrated Christmas eve with	
spm32_3	celebrated your birthday with	
spm32	ANSWER CATEGORIES FOR spm32 1.No, nobody 2.Partner 3.Child 4.Grandchild 5.Parents 6.Partner's parents 7.Grandparents 8.Siblings 9.Friends 10. Others	
spm33	Is it any of these that ... (please tick off all relevant categories)	
spm33_1	you feel really appreciate you as a person?	
spm33_2	definitely would back you up in a critical situation?	
spm33_3	you wish you had more contact with than today?	
spm33	ANSWER CATEGORIES FOR spm33 1.No, nobody 2.Partner 3.Child 4.Grandchild 5.Parents 6.Partner's parents 7.Grandparents 8.Siblings 9.Friends 10. Others	
spm34	Except for family members, do you have anyone that you feel are so close that you can speak confidentially with them? 1. Yes 2. No	
spm35	Is there anyone in your family that you can speak confidentially with? Tick off all relevant persons. 1.No, nobody 2.Partner 3.Child 4.Grandchild 5.Parents 6.Partner's parents 7.Grandparents 8.Siblings 9.Friends 10. Others	
spm36	Do you have any close friends that ...	
spm36_1	are much older than you? 1. No 2. Yes → Among these, about how old is the friend you last were in touch with? ____ AGE	
spm36_2	are much younger than you? 1. No 2. Yes → Among these, about how old is the friend you last were in touch with? ____ AGE	

Var-ID LOGG		Var-ID GGS
spm36_3	come from another western country but live in Norway? 1. Yes 2. No	
spm36_4	come from another non-western country but live in Norway? 1. Yes 2. No	
spm36_5	live in another country? 1. Yes 2. No	
spm37	About how often do you spend time with ... Tick once per line.	
spm37_1	Friends	
spm37_2	Siblings	
spm37_3	Grandparents	
spm37_4	Grandchildren	
spm37_5	Partner's parents	
spm37_6	Partner's children	
spm37_7	Other relatives	
spm37	ANSWER CATEGORIES FOR spm37 1. Don't have or are not alive 2. Daily 3. Weekly, but not daily 4. Monthly, but not weekly 5. A few times a year 6. Less often 7. Never	
spm38	How many of your neighbors ... Tick once per line.	
spm38_1	do you have a nodding acquaintance with?	
spm38_2	do you talk to when you meet?	
spm38_3	can you borrow things from?	
spm38_4	have a key to your apartment?	
spm38_5	can you ask to do shopping for you if you are ill?	
spm38_6	do you have disagreements with?	
spm38	ANSWER CATEGORIES FOR spm38 1. Most of them 2. Many 3. Some 4. One 5. None	
spm39	To what degree do you agree with the following statements about the place where you live? Tick once per line.	
spm39_1	I feel I belong here	
spm39_2	People here have very diverse values and opinions	
spm39_3	The community has strong solidarity	
spm39_4	People here would intervene if they witnessed youth doing property damage	
spm39_5	People here would report it if they witnessed people under-age drink or getting high	
spm39_6	I feel safe when walking around in the area at night	
spm39	ANSWER CATEGORIES FOR spm39 1. Not true at all 2. Is for the most part not true 3. Is somewhat true 4. Is quite true 5. Is very true	
spm40	40. Would you miss the following if you had to move from the place where you live? Tick once per line.	
spm40_1	The scenery of the place	
spm40_2	Buildings at the place	

Var-ID LOGG		Var-ID GGS
spm40_3	Your house or flat	
spm40_4	Family and relatives (at the place)	
spm40_5	Friends or neighbors (at the place)	
spm40	ANSWER CATEGORIES FOR spm40 1. Yes a lot 2. Yes, quite a lot 3. Yes, a little 4. No	
Assets and finances		
spm41	Do you have or wish to have any of the following in your household? Tick once per line.	
spm41_1	Colour TV	A1001_a
spm41_2	Video/dvd-player	A1001_b
spm41_3	Washing machine	A1001_c
spm41_4	Micro Wave	A1001_d
spm41_5	Home computer	A1001_e
spm41_6	Dishwasher	A1001_f
spm41_7	Mobile telephone	A1001_g
spm41_8	Car for private use	A1001_h
spm41_9	A second car	A1001_i
spm41_10	A second home (for vacation)	A1001_j
spm41	ANSWER CATEGORIES FOR spm41 1. Yes, have it 2. No, cannot afford 3. No, don't want it	
spm42	How will you describe your financial situation at the moment? Tick once. 1. Very comfortable 2. Comfortable 3. I manage but have to be careful 4. Difficult to make ends meet 5. Very difficult financial situation	
spm43	How important would you say that each of the following is in your life now? Tick once per line.	
spm43_1	Friends	
spm43_2	Family	
spm43_3	Material living conditions	
spm43_4	Your job/studies (if relevant)	
spm43_5	Leisure	
spm43_6	Health	
spm43_7	Your weight	
spm43_8	Faith or religion	
spm43_9	Politics	
spm43_10	Nature and outdoor life	
spm43_11	Organizational life	
spm43_12	The place where you live	
spm43_13	Your current dwelling	
spm43_14	Art and culture	
spm43_15	Your sexual life	
spm43_16	Your looks	
spm43	ANSWER CATEGORIES FOR spm43 Very important Quite important Somewhat important Not important	

Var-ID LOGG		Var-ID GGS
Attitudes and opinions		
spm44	To what extent do you agree or disagree with the following statements? Tick once per line.	
spm44_1	Marriage is an outdated institution	A1107_a
spm44_2	It is all right for an unmarried couple to live together even if they have no interest in marriage	A1107_b
spm44_3	Marriage is a lifetime relationship and should never be ended	A1107_c
spm44_4	It is all right for a couple with an unhappy marriage to get a divorce even if they have children	A1107_d
spm44_5	A woman has to have children in order to be fulfilled	A1107_e
spm44_6	A man has to have children in order to be fulfilled	A1107_f
spm44_7	A child needs a home with both a father and a mother to grow up happily	A1107_g
spm44_8	A woman can have a child as a single parent even if she doesn't want to have a stable relationship with a man	A1107_h
spm44_9	When children turn about 18–20 years old they should start to live independently	A1107_i
spm44_10	Homosexual couples should have the same rights as heterosexual couples do	A1107_j
spm44	ANSWER CATEGORIES FOR spm44 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree	
spm45	To what extent do you agree or disagree with the following statements? Tick once per line.	
spm45_1	In a couple it is better for the man to be older than the woman	A1113_a
spm45_2	If a woman earns more than her partner, it is not good for the relationship	A1113_b
spm45_3	On the whole, men make better political leaders than women do	A1113_c
spm45_4	Women should be able to decide how to spend the money they earn without having to ask their partner's permission	A1113_d
spm45_5	Looking after the home or family is just as fulfilling as working for pay	A1113_e
spm45_6	A pre-school child is likely to suffer if his/her mother works	A1113_f
spm45_7	Children often suffer because their fathers concentrate too much on their work	A1113_g
spm45_8	If parents divorce it is better for the child to stay with the mother than with the father	A1113_h
spm45	ANSWER CATEGORIES FOR spm45 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree	
spm46	To what extent do you agree or disagree with the following statements? Tick once per line.	
spm46_1	When jobs are scarce, men should have more right to a job than women	A1114_a
spm46_2	When jobs are scarce, younger people should have more right to a job than older people	A1114_b
spm46_3	When jobs are scarce, people with children should have more right to a job than childless people	A1114_c
spm46	ANSWER CATEGORIES FOR spm46 1. Strongly agree 2. Agree 3. Neither agree nor disagree 4. Disagree 5. Strongly disagree	
Characteristics		
spm47	In your view, how important are the following qualities that children can acquire? Tick once per line.	A1108
spm47_1	Good manners	A1108
spm47_2	Independence	A1108
spm47_3	Hard work	A1108
spm47_4	Feeling of responsibility	A1108
spm47_5	Imagination	A1108
spm47_6	Tolerance and respect for other people	A1108
spm47_7	Thrift, saving money and things	A1108

Var-ID LOGG		Var-ID GGS
spm47_8	Determination, perseverance	A1108
spm47_9	Religious faith	A1108
spm47_10	Unselfishness	A1108
spm47_11	Obedience	A1108
spm47	ANSWER CATEGORIES FOR spm47 1. Very important 2. Quite important 3. Somewhat important 4. Not important	
spm48	In your view, how important are the following aspects of a job? Tick once per line.	A1109
spm48_1	Good pay	A1109
spm48_2	Not too much pressure	A1109
spm48_3	Good job security	A1109
spm48_4	A job respected by people in general	A1109
spm48_5	Good working hours	A1109
spm48_6	An opportunity to use initiative	A1109
spm48_7	Generous holidays	A1109
spm48_8	A job in which you feel you can achieve something	A1109
spm48_9	A responsible job	A1109
spm48_10	A job that is interesting	A1109
spm48_11	A job that meets one's abilities	A1109
spm48	ANSWER CATEGORIES FOR spm48 1. Very important 2. Quite important 3. Somewhat important 4. Not important	
spm49	People sometimes talk about what the aims of this country should be for the next 10 years. How important do you consider the following aims. Tick once per line.	A1104
spm49_1	A stable economy	A1104
spm49_2	Progress toward a less impersonal and more human society	A1104
spm49_3	Progress toward a society in which ideas count more than money	A1104
spm49_4	The fight against crime	A1104
spm49	ANSWER CATEGORIES FOR spm49 1. Very important 2. Quite important 3. Somewhat important 4. Not important	
spm50	How satisfied are you with the following aspects of your life for the time being? Tick once per line.	
spm50_1	Your material living conditions	
spm50_2	Your contact with your family	
spm50_3	Your contact with your friends	
spm50_4	Your looks	
spm50_5	Your weight	
spm50_6	Your sexual life	
spm50	ANSWER CATEGORIES FOR spm50 1. Very satisfied 2. Satisfied 3. Both satisfied and dissatisfied 4. Dissatisfied 5. Very dissatisfied	
spm51	How would you describe your actual sexual orientation? Are you sexually attracted to ... 1. the opposite sex 2. the same sex 3. both sexes 4. don't know	

Var-ID LOGG		Var-ID GGS
spm52	<p>Generally speaking, would you say that most people can be trusted or that you need to be very careful in dealing with people?</p> <p>1. Most people can be trusted 2. Need to be very careful</p>	A1105
spm53	<p>Do you think most people would try to take advantage of you if they got a chance, or would they try to be fair?</p> <p>1. Would take advantage 2. Would try to be fair</p>	A1106
spm54	<p>Below we give brief descriptions of some persons. Read each description and tick off one box according to how much each person <u>is like or unlike</u> you. It is important to this person ...</p>	
spm54 1	to think up new ideas and to do things in his/her own original way	
spm54 2	to have a lot of money and expensive things	
spm54 3	to show his/her abilities	
spm54 4	to live in secure surroundings	
spm54 5	to do lots of new and different things in life	
spm54 6	that people do what they're told and follow rules	
spm54 7	to listen to and understand people who are different from him/her	
spm54 8	to make his/her own decisions about his/her life	
spm54 9	to help the people around him/her and to care for their well-being	
spm54 10	to be successful	
spm54 11	to have an exciting life and take risks	
spm54 12	always to behave properly	
spm54 13	to take the lead and tell others what to do	
spm54 14	to be loyal to his/her friends	
spm54 15	to care for nature and to look after the environment	
spm54 16	that it is tidy and clean around him-/herself	
spm54 17	to follow the customs as he/she has learned them	
spm54 18	to have a good time and to "spoil" oneself	
spm54 19	to protect the weak and to treat everyone in fair way	
spm54 20	to have fun	
spm54 21	to be humble and modest and not to draw attention to him-/herself	
spm54	<p>ANSWER CATEGORIES FOR spm54</p> <p>1. Very much like me 2. Like me 3. Somewhat like me 4. A little like me 5. Not like me 6. Not like me at all</p>	
	<p>If you have any comments about this questionnaire, please fill them in below:</p> <p>_____</p>	
	<p><i>Thank you for completing this questionnaire!</i></p>	