# Family and Fertility Survey Austrian Questionnaire

# 1. SEX #1 male #2 female 2. AGE: \_\_\_\_

# 3. WHAT IS THE HIGHEST LEVEL OF EDUCATION THAT YOU SUCCESSFULLY COMPLETED?

#1 compulsory school not completed

#2 compulsory school

#3 apprenticeship /vocational training

#4 training college: three years (from 14 to 17) (=BMS)

#5 general secondary education: (from 14 to 18) (=AHS)

#6 training college: five years (from 14 to 19) (=BHS)

#7 graduation

#8 educational establishment similar to university (Akademien)

# 4. ARE YOU

#1 self-employed, independent profession

#2 employed

#3 unemployed - out of work

#4 housewife/houseman

#5 trainee

#6 maternity leave

#7 retired

#8 other

# 5. ARE YOU

#1 single

#2 married

#3 widowed

#4 divorced

# Section 0: FAMILY AND HOUSEHOLD CHARACTERISTICS

- 6. TO BEGIN, I WOULD LIKE TO ASK YOU SOME QUESTIONS ON YOUR HOUSEHOLD, i.e. ALL PERSONS LIVING TOGETHER WITH YOU.

  HOW MANY PERSONS, INCLUDING YOURSELF, USUALLY LIVE IN YOUR HOUSEHOLD?

  #1 respondent on his/her own

  #2 other household members: \_\_\_\_ (number of household members including respondent)
- 7. HOW OLD IS THIS/ARE THESE OTHER HOUSEHOLD MEMBERS?

(Descending order according to age)

- #1 second household member
- #2 third household member
- #3 fourth household member
- #4 fifth household member
- #5 sixth household member
- #6 seventh household member
- #7 eighth household member
- #8 ninth household member

# Loop household members: start

8. SEX

- #1 male
- #2 female
- 9. Type of relationship to the respondent THIS PERSON IS MY
  - #1 parent
  - #2 step-parent
  - #3 partner's parent
  - #4 partner's step-parent
  - #5 partner
  - #6 brother/sister
  - #7 partner's brother/sister
  - #8 son/daughter
  - #9 adopted child, foster-child
  - #10 partner's child
  - #11 grandchild
  - #12 grandparent
  - #13 partner's grandparent
  - #14 other relative of mine
  - #15 other relative of my partner
  - #16 non-relative

# If household member is over 15

### 10. MARITAL STATUS

- #1 single
- #2 married
- #3 widowed
- #4 divorced

# If household member is over 15

# 11. MAIN ACTIVITY

- #1 self-employed, independent profession
- #2 employed
- #3 unemployed out of work
- #4 housewife/househusband
- #5 trainee
- #6 maternity leave
- #7 retired
- #8 other

Loop household members: end

# Section 9: VALUES, BELIEFS AND OPINIONS

- 12. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ON YOUR VIEWS AND OPINIONS ON SEVERAL TOPICS, ESPECIALLY IN CONNECTION WITH EMPLOYMENT, PARTNERSHIP AND FAMILY.
- 13. I AM GOING TO READ OUT SOME STATEMENTS. COULD YOU PLEASE TELL ME WHETHER YOU PERSONALLY AGREE OR DISAGREE WITH EACH OF THE FOLLOWING STATEMENTS.
  - A- Unmarried couples should have the same rights and possibilities as married couples.
  - B- If a woman wants to have a child as a single parent, and she does not want to have a stable relationship with a man, it should be accepted by society.
  - C- It would be a good thing if in the future more emphasis were placed on family life.
  - D- Partners of the same sex should also have the possibility to marry.
  - E- Divorces of married couples with children should be made more difficult.
  - F- In a step-family, i.e. with one non-relative parent, a child grows up as well as with natural parents.
  - G- A child grows up with a single parent as well as with both natural parents.
    - #1 agree
    - #2 disagree
    - #3 don't know
- 14. I AM GOING TO READ OUT A NUMBER OF POSSIBLE AND OFTEN HEARD REASONS FOR WANTING A CHILD. PLEASE TELL ME FOR EACH OF THEM WHETHER YOU PERSONALLY AGREE OR DISAGREE.
  - A- Children make it less likely that one will be lonely in his old age.
  - B- Children help a person to develop.
  - C- Children bring meaning to a person's life.
  - D- It is important to see the own family carried on.
  - E- Having children strengthens the relationship with the partner.
  - F- If one already has a child, one likes a further so that the first child doesn't grow up as only child.
    - #1 agree
    - #2 disagree
    - #3 don't know
- 15. I AM GOING TO READ OUT A NUMBER OF POSSIBLE AND OFTEN HEARD REASONS FOR NOT WANTING A CHILD. COULD YOU TELL ME FOR EACH OF THEM WHETHER YOU PERSONALLY AGREE OR DISAGREE.
  - A- Children are very expensive.
  - B- Children make it harder for a woman to have a job.
  - C- Pregnancies and births of children are hard on a woman.
  - D- There would not be enough time for other important things in life.
  - E- The bringing up of children entails many worries and problems.
  - F- The partners don't have enough time left for each other with children.
    - #1 agree
    - #2 disagree
    - #3 don't know
- 16. THERE ARE SEVERAL REASONS FOR SPLITTING UP. WHAT DO YOU PERSONALLY THINK? WOULD YOU CONSIDER EACH OF THE FOLLOWING REASONS SUFFICIENT OR INSUFFICIENT FOR SPLITTING UP?
  - A- The characters of the partners are too different, they don't go together.
  - B- The partner drinks too much and/or is aggressive.
  - C- The partner is unfaithful.
  - D- The own life-plans and wishes cannot be realized in the partnership.
  - E- The sexual relationship with the partner is unsatisfactory.
  - F- It is not possible to have children with the partner.
  - G- The partner offends against the honour of the family by his behaviour.
  - H- The division of household tasks is unsatisfactory.

list 901

- 7. THE INCREASING PARTICIPATION OF WOMEN IN THE LABOUR MARKET RAISES THE QUESTION WHETHER AND HOW LONG A MOTHER (OR FATHER) SHOULD STAY AT HOME AFTER THE BIRTH OF A CHILD. ON THIS LIST THERE ARE SEVERAL POSSIBILITIES. WHICH WOULD YOU RANK FIRST, WHICH WOULD YOU RANK SECOND?
  - A- I will give up my job when the first child is born.
  - B- I will reduce my employment when the first child is born.
  - C- I will interrupt my job till all children have reached school age.
  - D- I will interrupt my job for two years maternity leave.
  - E- I will interrupt my job for maximum one year.
  - F- My partner and me will split the two years maternity leave between us.
  - G- My partner will interrupt his job for two years maternity leave, I'll go on working.
    - #1 first choice
    - #2 second choice
    - #3 nether/nor

#### Answers for men

- 18. A- My partner will give up her job when the first child is born.
  - B- My partner will reduce her employment when the first child is born.
  - C- My partner will interrupt her job till all children have reached school age.
  - D- My partner will interrupt her job for two years maternity leave.
  - E- My partner will interrupt her job for maximum one year.
  - F- My partner and me will split the two years maternity leave between us.
  - G- I will interrupt my job for two years maternity leave, my partner will go on working.
    - #1 first choice
    - #2 second choice
    - #3 nether/nor
- 19. IN MANY COUNTRIES THERE ARE CONSIDERATIONS ABOUT POLITICAL MEASURES TO MAKE IT EASIER FOR PEOPLE TO HAVE AND RAISE CHILDREN. IF YOU COULD CHOOSE, WHICH OF THE FOLLOWING MEASURES SHOULD BE IMPLEMENTED FIRST?
  - A- Better day-care facilities for children.
  - B- An allowance for families with children.
  - C- Better working conditions for parents with young children- more flexible working hours.
  - D- None of these measures should be implemented.
- 20. IN GENERAL, DO YOU APPROVE OR DISAPPROVE OF ABORTION UNDER THE FOLLOWING CIRCUMSTANCES?
  - A- When the mother's health is at risk from the pregnancy.
  - B- When the child is likely to be born physically handicapped.
  - C- When the woman is not married, or has no partner.
  - D- When a married couple doesn't want to have any more children.
  - E- When the woman doesn't wish to have any more children.
  - F- When the man doesn't wish to have any more children.

# Section 0: FAMILY AND HOUSEHOLD CHARACTERISTICS/ PART II

21. WE HAVE ALREADY TALKED ABOUT YOUR HOUSEHOLD. IS THERE A PERSON YOU WOULD REGARD AS A MEMBER OF YOUR FAMILY AND WITH WHOM YOU HAVE AN INTIMATE RELATIONSHIP?

#1 yes #2 no

If yes

22. WHICH PERSONS - EXCEPT THOSE LIVING IN YOUR HOUSEHOLD - DO YOU REGARD AS MEMBERS OF YOUR FAMILY? WHICH TYPE OF RELATIONSHIP TO YOU HAVE WITH THEM?

This person is my ...

#1 parent

#2 step-parent

#3 partner's parent

#4 partner's step-parent

#5 current partner

#6 former partner

#7 brother/sister

#8 partner's brother/sister

#9 son/daughter

#10 adopted child, foster-child

#11 partner's child

#12 grandchild

#13 grandparent

#14 partner's grandparent

#15 other relative of mine

#16 other relative of my partner

#17 non-relative

If at least one person

23. HOW MANY PERSONS ARE THESE ALTOGETHER?

Questions on all persons; if different frequencies of visiting within one category - for example brother more often than sister - indicate the most frequent contact:

24. HOW OFTEN DO YOU VISIT THIS PERSON, OR ARE VISITED BY THIS PERSON?

#A- parent

#B- step-parent

#C- partner's parent

#D- partner's step-parent

#E- current partner

#F- former partner

#G- brother/sister

#H- partner's brother/sister

#I- son/daughter

#J- adopted child, foster-child

#K- partner's child

#L- grandchild

#M- grandparent

#N- partner's grandparent

#O- other relative of mine

#P- other relative of my partner

#Q- non-relative

#1 at least three times a week

#2 at least once a week

#3 at least once a month

#4 at least once a year

#5 more seldom

# 25. IS THERE A PERSON - EXCEPT THOSE PERSONS LIVING IN YOUR HOUSEHOLD - YOU REGARD AS A MEMBER OF YOUR FAMILY WHO RECEIVES SUPPORT FROM YOU IN MONEY OR KINDS

#1 yes #2 no

#### If yes

# 26. WHICH PERSONS ARE THESE?

#1 parent

#2 step-parent

#3 partner's parent

#4 partner's step-parent

#5 current partner

#6 former partner

#7 brother/sister

#8 partner's brother/sister

#9 son/daughter

#10 adopted child, foster-child

#11 partner's child

#12 grandchild

#13 grandparent

#14 partner's grandparent

#15 other relative of mine

#16 other relative of my partner

#17 non-relative

# 27. IS THERE ALSO A PERSON WHO RECEIVES SERVICES AND HELP FROM YOU?

#1 yes

#2 no

# If yes

# 28. WHICH PERSONS ARE THESE?

#1 parent

#2 step-parent

#3 partner's parent

#4 partner's step-parent

#5 current partner

#6 former partner

#7 brother/sister

#8 partner's brother/sister

#9 son/daughter

#10 adopted child, foster-child

#11 partner's child

#12 grandchild

#13 grandparent

#14 partner's grandparent

#15 other relative of mine

#16 other relative of my partner

#17 non-relative

# 29. IS THERE A PERSON WHO SUPPORTS YOU IN MONEY OR KIND?

#1 yes

#2 no

#### If yes

### 30. WHICH PERSONS ARE THESE?

#1 parent

#2 step-parent

#3 partner's parent

#4 partner's step-parent

- #5 current partner
- #6 former partner
- #7 brother/sister
- #8 partner's brother/sister
- #9 son/daughter
- #10 adopted child, foster-child
- #11 partner's child
- #12 grandchild
- #13 grandparent
- #14 partner's grandparent
- #15 other relative of mine
- #16 other relative of my partner
- #17 non-relative

# 31. IS THERE ALSO A PERSON WHO SUPPORTS YOU WITH SERVICES OR HELP?

#1 yes

#2 no

# If yes

# 32. WHICH PERSONS ARE THESE?

- #1 parent
- #2 step-parent
- #3 partner's parent
- #4 partner's step-parent
- #5 current partner
- #6 former partner
- #7 brother/sister
- #8 partner's brother/sister
- #9 son/daughter
- #10 adopted child, foster-child
- #11 partner's child
- #12 grandchild
- #13 grandparent
- #14 partner's grandparent
- #15 other relative of mine
- #16 other relative of my partner
- #17 non-relative

| 33. NOW I WOULD LIKE TO ASK A FEW QUESTIONS ON YOUR PARENTAL HOME. INCLUDING                          |
|---|
| YOURSELF, HOW MANY CHILDREN (BY BIRTH) HAS YOUR MOTHER HAD?   |
| TOOKSDER, NOW MINT CHIESTER (BT BIRTI) INTO TOOK MOTHER HAD:  |
|   |
| 34. IN WHAT MONTH AND WHAT YEAR WERE YOU BORN?  |
|   |
| year: (two digits)  |
| month: (two digits)   |
|   |
| 35. DID YOU LIVE IN THE SAME FAMILY UP TO THE AGE OF 15?  |
| #1 yes - without interruption   |
| #2 yes - with interruption  |
| #3 no   |
| #4 don't know   |
| W Gold Child  |
| 36. WITH WHOM DID YOU LIVE MOST OF THE TIME UP TO THE AGE OF 15?                                      |
|   |
| #1 with both parents  |
| #2 with mother only   |
| #3 with father only   |
| #4 with mother and step-father  |
| #5 with father and step-mother  |
| #6 with grandparents  |
| #7 with foster-parents  |
| #8 with other relatives   |
| #9 with other non-relatives   |
|   |
| If mother had more than one child:  |
| 37. WITH HOW MANY OLDER AND HOW MANY YOUNGER BROTHERS, OR SISTERS,                                    |
|   |
| DID YOU LIVE IN YOUR CHILDHOOD?   |
|   |
| A- number of younger sisters:   |
| B- number of younger brothers:  |
| C- number of older sisters:   |
| D- number of older brothers:  |
|   |
| 38. HAVE YOU EVER LIVED WITH STEP-BROTHERS OR STEP-SISTERS?   |
| #1 yes  |
| #2 no   |
|   |
| If stan buathous ou stan sistans:   |
| If step-brothers or step-sisters: 39. WITH HOW MANY OLDER AND HOW MANY YOUNGER STEP-BROTHERS OR STEP- |
|   |
| SISTERS DID YOU LIVE IN YOUR CHILDHOOD?   |
| A- number of younger step-sisters:  |
| B- number of younger step-brothers:   |
| C- number of older step-sisters:  |
| D- number of older step-brothers:   |
|   |
| 40. WOULD YOU HAVE LIKED TO HAVE MORE, FEWER OR THE ACTUAL NUMBER OF BROTHERS                         |
| AND SISTERS?  |
| #1 more   |
| #1 more<br>#2 few   |
|   |
| #3 actual number  |
| #4 don't know   |
|   |
| 41. DID YOUR PARENTS (OR FOSTER-PARENTS) EVER SEPARATE OR DIVORCE?                                    |
| #1 yes  |
| #2 no   |
|   |

Section 1: PARENTAL HOME

If parents did separate or divorce:

| 42. HOW OLD WERE YOU AT THAT TIME?   |
|--|
| years  |
| If parents did separate or divorce:  |
| 43. HOW HAVE YOU EXPERIENCED THE SEPARATION AT THAT TIME?                    |
| #1 very contentious  |
| #2 rather contentious  |
| #3 rather not contentious  |
| #4 not at all contentious  |
| #5 don't know  |
| If parents did separate or divorce:  |
| 44. HOW INTENSIVE WAS YOUR CONTACT WITH YOUR MOTHER/YOUR FATHER WHEN YOU DID |
| NOT LIVE IN THE SAME HOUSEHOLD? HOW OFTEN DID YOU SEE THIS PARENT ON         |
| AVERAGE?   |
| #1 at least three times a week   |
| #2 at least once a week  |
| #3 at least once a month   |
| #4 at least once a year  |
| #5 more seldom   |
| #6 never   |
| 45. WHO USUALLY DID THE HOUSEWORK AND THE BRINGING UP OF THE CHILDREN?       |
| #1 mostly mother   |
| #2 mostly father   |
| #3 both of them equally  |
| #4 mostly other members of the household                                     |
| #5 mostly other persons  |
| 46. ARE YOU STILL LIVING WITH YOUR (FOSTER-)PARENTS AT THIS TIME?            |
| #1 yes   |
| #2 no  |
|  |
| If not:  |
| 47. WHEN DID YOU STOP LIVING WITH YOUR (FOSTER-)PARENTS?                     |
| year: (two digits)   |
| month: (two digits)  |
|  |

# Section 2: RESIDENTIAL - AND MIGRATION HISTORY

48. NOW I WOULD LIKE TO ASK SOME QUESTIONS ON YOUR MIGRATION HISTORY. WHERE DID

|        | A- COUNTRY  |          |              |             |           |   |
|--------|---|----------|--------------|-------------|-----------|---|
|        | #1 Austria  |          |              |             |           |   |
|        | #2 other country: _   |          |              |             |           |   |
|        | B- If Austria: FEDERAL Co   | OUNTRY   |              |             |           |   |
|        | #1 Vienna   |          |              |             |           |   |
|        | #2 Lower Austria  |          |              |             |           |   |
|        | #3 Burgenland   |          |              |             |           |   |
|        | #4 Styria   |          |              |             |           |   |
|        | #5 Carinthia  |          |              |             |           |   |
|        | #6 Upper Austria  |          |              |             |           |   |
|        | #7 Salzburg   |          |              |             |           |   |
|        | #8 Tyrol  |          |              |             |           |   |
|        | #9 Vorarlberg   |          |              |             |           |   |
|        | C- If Austria: DISTRICT   |          |              |             |           |   |
| 49. WI | HERE DID YOU LIVE MOS   | T OF THE | TIME U       | P TO THE A  | GE OF 15  | ) |
|        | A- COUNTRY  |          |              |             | 102 01 10 |   |
|        | #1 Austria  |          |              |             |           |   |
|        | #2 other country:   |          |              |             |           |   |
|        | B- If Austria: FEDERAL Co   | OLINTRY  | <del> </del> | <del></del> |           |   |
|        | #1 Vienna   | J0111111 |              |             |           |   |
|        | #2 Lower Austria  |          |              |             |           |   |
| -      | #3 Burgenland   |          |              |             |           |   |
|        | #4 Styria   |          |              |             |           |   |
|        | #4 Styria<br>#5 Carinthia   |          |              |             |           |   |
|        |   |          |              |             |           |   |
|        | #6 Upper Austria  |          |              |             |           |   |
|        | #7 Salzburg   |          |              |             |           |   |
|        | #8 Tyrol  | 100      |              |             |           |   |
|        | //O T / 11  |          |              |             |           |   |
|        | #9 Vorarlberg   |          |              |             |           |   |
|        | #9 Vorarlberg<br>C- If Austria: DISTRICT  |          |              |             |           |   |
| 50. HO | C- If Austria: DISTRICT   | HAD THIS | S CITY/TO    | )WN/VILL    | AGE?      |   |
| 50. HO | C- If Austria: DISTRICT W MANY INHABITANTS  | HAD THIS | S CITY/TO    | OWN/VILLA   | AGE?      |   |
| 50. HO | C- If Austria: DISTRICT W MANY INHABITANTS 1 #1 < 2.000   | HAD THIS | S CITY/TO    | OWN/VILLA   | AGE?      |   |
| 50. HO | C- If Austria: DISTRICT W MANY INHABITANTS I #1 < 2.000 #2 2-5.000  | HAD THIS | S CITY/TO    | DWN/VILLA   | AGE?      |   |
| 50. HO | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000   | HAD THIS | S CITY/TO    | OWN/VILLA   | AGE?      |   |
| 50. HO | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000  | HAD THIS | S CITY/TO    | OWN/VILLA   | AGE?      |   |
| 50. HO | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000  | HAD THIS | S CITY/TO    | OWN/VILLA   | AGE?      |   |
| 50. HO | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio  | HAD THIS | S CITY/TO    | OWN/VILLA   | AGE?      |   |
| 50. HO | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000  | HAD THIS | S CITY/TO    | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I  #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio   |          |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I  #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE  |          |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY  |          |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I  #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria  |          |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I  #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country:  | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Co   | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Country #1 Vienna  | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Co   | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Country #1 Vienna  | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Country #1 Vienna #2 Lower Austria   | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: #1 Vienna #2 Lower Austria #3 Burgenland  | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Co #1 Vienna #2 Lower Austria #3 Burgenland #4 Styria #5 Carinthia                                       | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Co #1 Vienna #2 Lower Austria #3 Burgenland #4 Styria #5 Carinthia #6 Upper Austria                      | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Co #1 Vienna #2 Lower Austria #3 Burgenland #4 Styria #5 Carinthia #6 Upper Austria #7 Salzburg          | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Co #1 Vienna #2 Lower Austria #3 Burgenland #4 Styria #5 Carinthia #6 Upper Austria #7 Salzburg #8 Tyrol | n you w  |              | OWN/VILLA   | AGE?      |   |
|        | C- If Austria: DISTRICT  W MANY INHABITANTS I #1 < 2.000 #2 2-5.000 #3 5-10.000 #4 10-50.000 #5 50-100.000 #6 100.000-1Mio #7 > 1Mio  HERE DID YOU LIVE WHE A- COUNTRY #1 Austria #2 other country: B- If Austria: FEDERAL Co #1 Vienna #2 Lower Austria #3 Burgenland #4 Styria #5 Carinthia #6 Upper Austria #7 Salzburg          | n you w  |              | OWN/VILLA   | AGE?      |   |

| #2 more than a single room, but not a whole flat for disposal #3 flat #4 house #5 other  53. WHAT IS THE LEGAL STATUS OF THIS HOUSING? #1 owner #2 relative of the owner #3 cooperative housing #4 main tenant #5 subtenant #6 other  If no change of address since respondent was 15 years old 54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)? square metres  55. DID YOU CHANGE AT LEAST ONCE YOUR ADDRESS SINCE YOUR 15th BIRTHDAY! #1 yes #2 no  If at least one change of address 56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS 56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS 56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS 57. ONG IST BIRTHDAY! I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHITHE HOW HOW AND THE NEXT? AND THE NEXT?  first change of address year: month: second year: month:   |          |
|--|----------|
| #3 flat #4 house #5 other  53. WHAT IS THE LEGAL STATUS OF THIS HOUSING? #1 owner #2 relative of the owner #3 cooperative housing #4 main tenant #5 other  If no change of address since respondent was 15 years old 54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?   |          |
| #5 other  53. WHAT IS THE LEGAL STATUS OF THIS HOUSING?  #1 owner  #2 relative of the owner  #3 cooperative housing  #4 main tenant  #5 subtenant  #6 other   If no change of address since respondent was 15 years old  54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?  square metres  55. DID YOU CHANGE AT LEAST ONCE YOUR ADDRESS SINCE YOUR 15th BIRTHDAY?  #1 yes  #2 no  If at least one change of address  56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS YOUR 15th BIRTHDAY? I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHICH HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month:  second year: month:  second year: month:  firth year: month:  fifth year: month:  sixth year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOUR OF FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes  |          |
| #5 other  53. WHAT IS THE LEGAL STATUS OF THIS HOUSING?  #1 owner  #2 relative of the owner  #3 cooperative housing  #4 main tenant  #5 subtenant  #6 other   If no change of address since respondent was 15 years old  54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?  square metres  55. DID YOU CHANGE AT LEAST ONCE YOUR ADDRESS SINCE YOUR 15th BIRTHDAY?  #1 yes  #2 no  If at least one change of address  56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS YOUR 15th BIRTHDAY? I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHICH HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month:  second year: month:  second year: month:  firth year: month:  fifth year: month:  sixth year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOUR OF FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes  |          |
| #1 owner #1 owner #2 relative of the owner #3 cooperative housing #4 main tenant #5 subtenant #6 other  #7 other end of address since respondent was 15 years old  #6 other  #6 other  #6 other  #6 other  #6 other  #6 other  #7 other end of address in the FLAT/HOUSE IN SQUAL (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?  #6 other  #7 outher end of address since your Address since your 15th Birthday?  #6 outher end of address of address your Have changed your Address your 15th Birthday?  #6 outher end of address your month:  #6 outher year:  #7 outher year:  #7 outher year:  #7 month:  #8 outher end of address year:  #7 month:  #7 year:  #7 month:  #7 year:  #7 month:  #7 year:  #7 month:  #7 NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOUR OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #8 outher end of the war of the war of the present of the war of the present of the presen |          |
| #1 owner #2 relative of the owner #3 cooperative housing #4 main tenant #5 subtenant #6 other  If no change of address since respondent was 15 years old 54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?   |          |
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| #3 cooperative housing #4 main tenant #5 subtenant #6 other  If no change of address since respondent was 15 years old 54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?  square metres  55. DID YOU CHANGE AT LEAST ONCE YOUR ADDRESS SINCE YOUR 15th BIRTHDAY! #1 yes #2 no  If at least one change of address 56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS YOUR 15th BIRTHDAY! I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHICH HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT? first change of address year: month: second year: month: fourth year: month: fourth year: month: fifth year: month: sixth year: month: seventh year: month:   |          |
| #4 main tenant #5 subtenant #6 other  If no change of address since respondent was 15 years old 54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?  |          |
| #5 subtenant #6 other  If no change of address since respondent was 15 years old 54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?   |          |
| #6 other  If no change of address since respondent was 15 years old  54. COULD YOU TELL ME THE USABLE FLOOR SPACE OF THE FLAT/HOUSE IN SQUAI (JUST FOR RESIDENTIAL PURPOSES WITHOUT GARDEN)?  square metres  55. DID YOU CHANGE AT LEAST ONCE YOUR ADDRESS SINCE YOUR 15th BIRTHDAY?  #1 yes  #2 no  If at least one change of address  56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS YOUR 15th BIRTHDAY? I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHICH HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month:  second year: month:  fourth year: month:  fourth year: month:  fifth year: month:  sixth year: month:  sixth year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOUR OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes   |          |
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| square metres  55: DID YOU CHANGE AT LEAST ONCE YOUR ADDRESS SINCE YOUR 15th BIRTHDAY  #1 yes #2 no  If at least one change of address  56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS YOUR 15th BIRTHDAY? I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHICH HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month:  |          |
| 55: DID YOU CHANGE AT LEAST ONCE YOUR ADDRESS SINCE YOUR 15th BIRTHDAY?  #1 yes #2 no  If at least one change of address 56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS YOUR 15th BIRTHDAY? I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHICH HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month: second year: month: fourth year: month: fifth year: month: sixth year: month: sixth year: month: sixth year: month: 57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOUR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes   |          |
| #1 yes #2 no  If at least one change of address 56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS YOUR 15 <sup>th</sup> BIRTHDAY? I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHICH HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month: second year: month: third year: month: fourth year: month: sixth year: month: sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)? #1 yes  |          |
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| #1 yes #2 no  If at least one change of address 56. COULD YOU TELL ME HOW MANY TIMES YOU HAVE CHANGED YOUR ADDRESS YOUR 15 <sup>th</sup> BIRTHDAY? I AM THINKING OF ALL THE DIFFERENT ADDRESSES AT WHICH HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month: second year: month: third year: month: fourth year: month: sixth year: month: sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)? #1 yes  |          |
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| HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month: second year: month: third year: month: fourth year: month: sixth year: month: sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes  |          |
| HAVE LIVED FOR 3 MONTHS OR LONGER.  WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month: second year: month: third year: month: fourth year: month: sixth year: month: sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes  | SINCE    |
| WHEN WAS THE FIRST? WHEN WAS THE NEXT? AND THE NEXT?  first change of address year: month: second year: month: third year: month: fourth year: month: fifth year: month: sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes  | CH YOU   |
| first change of address year: month: second year: month: third year: month: fourth year: month: fifth year: month: sixth year: month: seventh year: month: seventh year: month: for a continuous month: seventh year: month: for a continuous month:   |          |
| first change of address year: month: second year: month: third year: month: fourth year: month: fifth year: month: sixth year: month: seventh year: month: seventh year: month: for a continuous month: seventh year: month: for a continuous month:   |          |
| second year: month: third year: month: fourth year: month: fifth year: month: sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)? #1 yes  |          |
| third year: month: fourth year: month: fifth year: month: sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)? #1 yes  |          |
| fourth year: month: month: month: month: sixth year: month: month: seventh year: month: month |          |
| fifth year: month: sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes  |          |
| sixth year: month: seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes   |          |
| seventh year: month:  57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes  |          |
| 57. NOW I WOULD LIKE TO TALK ABOUT YOUR OCCUPATIONAL CAREER. HAVE YOU OR FINISHED ANY EDUCATION OR TRAINING (EXCEPT COMPULSORY SCHOOL)?  #1 yes  |          |
| #1 yes   |          |
| #1 yes   |          |
| #1 yes   | STARTED  |
| #1 yes   |          |
| #2 no  |          |
|  |          |
|  |          |
| If yes   |          |
|  |          |
| 58. IN WHICH MONTH DID YOU START YOUR FIRST/NEXT EDUCATION OR TRAINING first education/training year: month:   | ,        |
|  |          |
| second year: month:  |          |
| third year: month:   |          |
| fourth year: month:  |          |
| fifth year: month:   |          |
| sixth year: month:   |          |
| seventh year: month:   |          |
| , and the second |          |
| 59 HAVE VOILEVED HAD A JOD FOR 6 MONTHS OF LONGER MUNICIPALITY   |          |
| 59. HAVE YOU EVER HAD A JOB FOR 6 MONTHS OR LONGER, WHETHER YOU WERE P.  | AID OR   |
| NOT? (PAID EMPLOYMENT, UNPAID WORK IN FAMILY BUSINESS, OWN-ACCOUNT WO  | RK ETC.) |
| #1 yes   |          |
| #2 no •  |          |
|  |          |
| If yes   |          |
| 60. IN WHAT YEAR AND MONTH DID YOU START YOUR FIRST/NEXT JOB?  |          |
| first job year: month:   |          |
| second year: month:  |          |

|         | third                  | year:           | month:                                   |
|---------|------------------------|-----------------|--|
|         | fourth                 | year:           | month:                                   |
|         | fifth                  | year:           | month:                                   |
|         | sixth                  | year:           | month:                                   |
|         | seventh                | year:           | month:                                   |
|         |                        |                 |  |
| 61. H   | AVE YOU EVER LIVED     | IN THE SAME L   | HOUSEHOLD WITH SOMEONE WITH WHOM YOU HAD |
| AN II   | NTIMATE RELATIONSH     | ID BUILDING I   | T MARRY? I MEAN ALSO PARTNERSHIPS WITH   |
| WON     | IEN (for men: WITH ME) |                 | I MARKY? I MEAN ALSO PARTNERSHIPS WITH   |
| 01.     | #1 yes                 | ( <b>v</b> ).   |  |
|         | #1 yes<br>#2 no        |                 |  |
|         | #2 110                 |                 |  |
| 7.0     |                        |                 |  |
| If yes  |                        |                 |  |
| 62. 11  | N WHICH YEAR AND M     | ONTH DID YOU    | FIRST START LIVING WITH YOUR FIRST/NEXT  |
| PART    | THE SAME HOL           | JSEHOLD?        | TO OKT MOTHER!                           |
|         | first partner          | year:           | month:                                   |
|         | second                 | year:           | month:                                   |
|         | third                  | year:           | month:                                   |
|         | fourth                 | year:           | month:                                   |
|         | fifth                  | year:           | <del></del>                              |
|         | sixth                  |                 | month:                                   |
|         | seventh                | year:           | month:                                   |
|         | Seventin               | year:           | month:                                   |
| 63 H    | AVE VOLLEVED HAD CL    | III DDENI DIGI  |  |
| 05.117  | #1                     | HLDREN, INCL    | UDING ADOPTED, STEP- OR FOSTER-CHILDREN? |
|         | #1 yes                 |                 |  |
|         | #2 no                  |                 |  |
| **      |                        |                 |  |
| If yes  |                        |                 |  |
| 64. IN  | WHICH YEAR AND MO      | NTH WAS THE     | FIRST/NEXT CHILD BORN?                   |
|         | first child            | year:           | month:                                   |
|         | second                 | year:           | month:                                   |
|         | third                  | year:           | month:                                   |
|         | fourth                 | year:           | month:                                   |
|         | fifth                  | year:           | month:                                   |
|         | sixth                  | year:           |  |
|         | seventh                |                 | month:                                   |
|         | So ventin              | year:           | month:                                   |
|         |                        | 7               |  |
|         |                        | Loop: change of | t address: start                         |
| 55 NIO  | WI WOLLD I HEE TO C    | A               |  |
| 33. INO | W I WOULD LIKE IO C    | OME BACK TO     | YOUR CHANGE/S OF ADDRESS. YOUR FIRST/    |
| PCOI    | ADI THIND CHANGE (     | JE ADDRESS W    | AS IN (year, month). DID YOU MOVE TO A   |
| JIFFE.  | WENT ATTITUDE (TOWN    | / CITY/ LAND)?  |  |
|         | #1 yes                 |                 |  |
|         | #2 no                  |                 |  |
| 1       |                        |                 |  |
| f yes   |                        |                 |  |
| 66. WH  | IERE DID YOU MOVE T    | O?              |  |
|         | A- COUNTRY             |                 |  |
|         | #1 Austria             |                 |  |
|         | #2 other country       |                 |  |
|         | B- If Austria: FEDERAL |                 |  |
|         | #1 Vienna              | COONINI         |  |
|         | #2 Lower Austri        |                 |  |
|         |                        | a               |  |
|         | #3 Burgenland          |                 |  |
|         | #4 Styria              |                 |  |
|         | #5 Carinthia           |                 |  |
|         | #6 Upper Austria       | <b>a</b> :      |  |
|         | #7 Salzburg            |                 |  |
|         | #8 Tyrol               |                 |  |
|         | #9 Vorarlberg          |                 |  |
|         |                        |                 |  |

# 67. WHY DID YOU MOVE? PLEASE, TELL ME THE CODES FOR THE APPROPRIATE REASONS ON THIS LIST?

parent(s):

#1 left parent(s)

#2 returned to parent(s)

partnership / family:

#3 start of partnership

#4 end of partnership

#5 birth of a child

training / job (oneself / partner):

#6 start / end of training

#7 start / change / end of job

#8 start / change / end of job of partner

quality of housing / surroundings.:

#9 improvement in quality of housing

#10 improvement in surroundings

#11 other reasons (for example refugees)

# 68. INCLUDING YOURSELF, HOW MANY PERSONS LIVED IN THIS FLAT/HOUSE MOST OF THE TIME?

#1 respondent on his/her own

#2 two persons

#3 three persons

#4 four persons

#5 five persons

#6 six persons

#7 seven persons

#8 more than seven persons

# Loop change of address: end

# 69. ARE YOU ALL IN ALL SATISFIED WITH YOU PRESENT CONDITIONS OF HOUSING?

#1 very satisfied

#2 rather satisfied

#3 rather not satisfied

#4 very unsatisfied

# 70. DO YOU INTEND TO MOVE WITHIN THE NEXT 2 YEARS?

#1 yes

#2 no

#3 don't know

# Section 3: EDUCATION- AND OCCUPATION HISTORY

#### Loop education history: start

# 71. REFERRING ON YOUR EDUCATIONAL CAREER - YOU STARTED YOUR FIRST/SECOND.... EDUCATION IN.... (year, month). WHAT KIND OF EDUCATION WAS IT? #1 apprenticeship #2 training college: three years (from 14 to 17) (=BMS) #3 general secondary education: (from 14 to 18) (=AHS) #4 training college: five years (from 14 to 19) (=BHS) #5 vocational training without Matura (A-Level) #6 vocational training with Matura #7 graduation #8 educational establishment similar to university (Akademien) #9 postgraduate studies 72. WAS THIS FULL-TIME OR PART-TIME EDUCATION? #1 full-time #2 part-time #3 don't know 73. DID YOU SUCCESSFULLY COMPLETE THIS STUDY? #1 yes #2 no, broken off #3 no, not finished yet If education finished or broken off 74. WHEN DID YOU FINISH OR DISCONTINUE? month: year: If education broken off 75. DID YOU CONTINUE THIS EDUCATION LATER ON? #1 yes #2 no Loop education history: end Loop occupation history: start 76. NOW I WOULD LIKE TO TALK ABOUT YOUR FIRST/NEXT... JOB. YOU STARTED YOUR FIRST/NEXT JOB IN ... (year, month). Only for present job WHAT KIND OF WORK DID YOU DO WHEN YOU STARTED THIS JOB? (see occupation list - note appropriate category ) Only for present job 77. HAS YOUR WORK OR YOUR STATUS CONSIDERABLY CHANGED SINCE YOU STARTED YOUR PRESENT JOB? #1 yes #2 no If yes WHICH KIND OF WORK DO YOU DO NOW? (see occupation list - note appropriate category) If two or more jobs 78. DID THIS JOB FOLLOW THE PREVIOUS ONE IMMEDIATELY (i.e. WITHIN SIX MONTHS)?

#1 yes #2 no

```
If first job or second or further job, which did not follow immediately the previous one
79. WHAT DID YOU DO BEFORE THIS JOB?
       #1 unemployment
       #2 maternity leave
       #3 care of the children without maternity leave
       #4 housewife / househusband
       #5 education or vocational training/further education or further vocational training
       #6 illness
       #7 care of a relative
       #8 other short-time job
        #9 other
Only for present job
80. REFERRING TO YOUR PRESENT JOB - WHAT WAS YOUR 'STATUS OF EMPLOYMENT' WHEN
YOU STARTED THIS JOB?
        #1 employer, independent profession
        #2 farmer
        #3 blue-collar worker
        #4 white-collar worker
        #5 civil servant
        #6 independent collaboration
        #7 work in family business
        #8 trainee
        #9 other
Only for present job
81. HAS YOUR 'STATUS OF EMPLOYMENT' CONSIDERABLY CHANGED TILL NOW?
        #1 yes
        #2 no
82. WHAT IS YOUR PRESENT 'STATUS OF EMPLOYMENT'?
        #1 employer, independent profession
        #2 farmer
        #3 blue-collar worker
        #4 white-collar worker
        #5 civil servant
        #6 independent collaboration
        #7 unpaid work in family business
        #8 trainee
        #9 other
Only for present job
83. HOW MANY HOURS PER WEEK ON AVERAGE DO YOU WORK ON THIS JOB?
                    hours
        #1 < 13 hours
        #2 13-24 hours
        #3 25-34 hours
        #4 35-44 hours
        #5 > 45 hours
 84. DID YOU INTERRUPT THIS JOB FOR MORE THAN 6 MONTHS OR QUIT IT?
        #1 yes, interrupted
```

If interrupted / quit

#3 no

#2 yes, quit .

85. WHEN DID YOU INTERRUPT OR QUIT THIS JOB?

| year: month:_               |  |  |
|-----------------------------|--|--|
| If interrupted /quit        |  | 2  |
| 86. WHY DID YOU INTERRUP    | T OR QUIT THIS JOB? PLEASE TELL ME THE CODES FO  | R THE  |
| APPROPRIATE REASONS?        |  |  |
| list                        |  |  |
| #1 marriage or partnership  | n  |  |
| #2 we expect a child (ano   |  |  |
|                             |  |  |
| #3 maternity leave          |  |  |
| #4 dismissal/notice         |  |  |
| #5 for health reasons       |  |  |
| #6 I wanted to improve m    |  |  |
| #7 I wanted a more intere   | esting or a different work   |  |
| #8 for other reasons        |  |  |
|                             |  |  |
| If interrupted              |  |  |
| 87. AFTER THIS INTERRUPTION | ON DID YOU IMMEDIATELY CONTINUE THE SAME JOE   | 3 (SAME  |
| EMPLOYER)?                  |  |  |
| #1 yes                      |  |  |
| #2 no                       |  |  |
|                             |  |  |
| <i>If yes</i>               |  |  |
| 88. WHEN DID YOU CONTINU    | IF THIS IOR?   |  |
|                             |  |  |
| year: month:                | •  |  |
|                             | Loop occupation history: end   |  |
|                             | Loop occupation history, ena   |  |
| 16                          |  |  |
| If currently employed       | CICETED WITH VOLID DDECENT IOD?  |  |
|                             | TISFIED WITH YOUR PRESENT JOB?   |  |
| #1 very satisfied           |  |  |
| #2 rather satisfied         |  |  |
| #3 rather not satisfied     |  |  |
| #4 very unsatisfied         |  |  |
|                             |  |  |
| If currently employed       |  |  |
| 90. DO YOU INTEND TO CHAI   | NGE YOUR JOB OR YOUR EMPLOYER OR GIVE UP YOU   | JR   |
| OCCUPATION COMPLETELY       |  |  |
| #1 change job               |  |  |
| #2 change employer          |  |  |
| #3 give up occupation       |  |  |
| #4 no change intended       |  |  |
|                             |  |  |
| #5 don't know               |  |  |
|                             | THE THORESON THE PROPERTY OF T | The state of the s |
|                             | EN IMPORTANT IN YOUR OCCUPATIONAL CAREER?  |  |
| #1 yes - in the agricultur  | al field   |  |
| #2 yes - in the non-agricu  | ultural field  |  |
| #3 no                       |  |  |
|                             |  |  |
| If currently not employed   |  |  |
| 92. DO YOU INTEND TO TAK    | E UP A JOB WITHIN THE NEXT 2 YEARS?  |  |
| #1 yes                      |  |  |
| #2 no                       |  |  |
| #3 don't know               |  |  |

### **Section 4: PARTNERSHIPS**

# 93. NOW I WOULD LIKE TO TALK ABOUT YOUR PARTNERSHIPS.

If divorced or widowed

HOW MANY TIMES HAVE YOU BEEN MARRIED?

#1 once

#2 twice

#3 three times

#4 four times

#5 more than four times

#### If married

### 94. HOW MANY TIMES INCLUDING YOUR PRESENT MARRIAGE HAVE YOU BEEN MARRIED?

#1 once

#2 twice

#3 three times

#4 four times

#5 more than four times

#### If married

# 95. DO YOU LIVE IN THE SAME HOUSEHOLD WITH YOUR HUSBAND/WIFE?

If weekend-commuter: yes

#1 yes

#2 no

If married, but not the same household

96. IS IT BECAUSE OF EXTERNAL CIRCUMSTANCES THAT YOU DON'T LIVE IN THE SAME HOUSEHOLD, i.e. REASONS CONCERNING THE JOB etc.., OR DO YOU WANT TO LIVE SEPARATELY?

#1 external circumstances

#2 voluntary

# 97. HAVE YOU EVER LIVED IN THE SAME HOUSEHOLD WITH A PARTNER WITH WHOM YOU HAD AN INTIMATE RELATIONSHIP BUT DID NOT MARRY?

#1 yes skip to question 98

#2 no skip to question 100

If ever lived together with a partner to whom not married 98. HOW MANY SUCH PARTNERSHIPS HAVE YOU HAD ALTOGETHER?

If respondent is married and husband/wife is living in the same household - skip to question 62: how many partners - when start living in the same household

If respondent is married but not living in the same household with his/her partner - skip to question 99

If respondent has never lived in the same household with his/her partner - skip to question 100

If respondent had lived at least once in the same household with his/her partner - skip to question 99

# 99. ARE YOU CURRENTLY LIVING IN THE SAME HOUSEHOLD WITH A PARTNER WITH WHOM YOU HAVE AN INTIMATE RELATIONSHIP BUT TO WHOM YOU ARE NOT MARRIED?

#1 yes

#2 no

If partner is not living in the same household

100. ARE YOU CURRENTLY HAVING AN INTIMATE RELATIONSHIP WITH A PERSON WHO LIVES IN A SEPARATE HOUSEHOLD?

#1 yes

#2 no

If intimate relationship but not living in the same household 101. ARE YOU LIVING SEPARATELY BECAUSE YOU WANT TO OR BECAUSE YOU HAVE TO? #1 I want to live separately #2 my partner wants to live separately #3 both of us want to live separately #4 we have to live separately #5 we want and we have to live separately If intimate relationship but not living in the same household 102. DO YOU INTEND TO START LIVING TOGETHER WITHIN THE NEXT 2 YEARS? #1 yes #2 no #3 don't know. If intimate relationship (not living in the same household as well as living in the same household) 103. DO YOU INTEND TO MARRY WITHIN THE NEXT 2 YEARS? #1 yes #2 no #3 don't know Loop partnership table: start 104. YOU TOLD ME THAT YOU STARTED LIVING WITH YOUR FIRST/NEXT PARTNER IN ... HOW OLD WAS YOUR PARTNER WHEN YOU STARTED LIVING TOGETHER? years 105. IN WHICH COUNTRY DID YOUR PARTNER LIVE MOST OF THE TIME UP TO THE AGE OF 15? #1 Austria #2 foreign country: 106. WHAT WAS THE HIGHEST LEVEL OF EDUCATION THAT YOUR PARTNER SUCCESSFULLY COMPLETED? #1 compulsory school not completed #2 compulsory school #3 apprenticeship /vocational training #4 training college: three years (from 14 to 17) (=BMS) #5 general secondary education: (from 14 to 18) (=AHS) #6 training college: five years (from 14 to 19) (=BHS) #7 graduation #8 educational establishment similar to university (Akademien) 107. WAS YOUR PARTNER #1 self-employed, independent profession #2 employed #3 unemployed - out of work #4 housewife/househusband #5 trainee #6 maternity leave #7 retired #8 other 108. DID YOUR PARTNER ALREADY HAVE CHILDREN AT THAT TIME INCLUDING ANY #1 yes

ADOPTED OR FOSTER CHILDREN?

#2 no

If partner already had children 109. HOW MANY CHILDREN DID HE ALREADY HAVE?

| If partner already had children  |
|--|
| 110. HOW MANY CHILDREN DID HE BRING ALONG WITH HIM WHEN YOU STARTED LIVING TOGETHER? |
| TOGETHER!  |
|  |
| 111. WERE YOU MARRIED TO HIM/HER WHEN YOU STARTED LIVING TOGETHER?                   |
| #1 yes   |
| #2 no  |
| #3 not appropriate - (homosexual partnership)  |
| If not married to the partner at that time   |
| 112. WHAT WAS HIS/HER MARITAL STATUS?  |
| #1 single  |
| #2 married   |
| #3 widowed   |
| #4 divorced  |
| #5 getting a divorce   |
| If not married to the partner at that time   |
| 113. DID YOU LATER MARRY HIM/HER?  |
| #1 yes   |
| #2 no  |
| #3 not appropriate - (homosexual partnership)  |
|  |
| If married (before or after starting living together)                                |
| 114. IN WHICH MONTH AND YEAR DID YOU MARRY HIM/HER?                                  |
| month: year:   |
| 115 DO VOU CTU I I IVE TO CETTED MUCH THE DADWING                                    |
| 115. DO YOU STILL LIVE TOGETHER WITH THIS PARTNER?                                   |
| #1 yes<br>#2 no  |
| #2 IIO   |
| If not still living together   |
| 116. IN WHICH MONTH AND YEAR DID YOU STOP LIVING TOGETHER?                           |
| month: year:   |
|  |
| If not still living together   |
| 117. HOW DID YOUR PARTNERSHIP END AT THAT TIME?                                      |
| #1 split up  |
| #2 got divorced  |
| #3 had to separate (not voluntary)   |
| #4 partner died  |
|  |
| If divorce / separation  |
| 118. WHO HAS ASKED FOR THE DIVORCE / SEPARATION - MAINLY YOU OR YOUR PARTNER?        |
| #1 definitely my partner   |
| #2 rather my partner #3 rather I   |
| #3 lattlet 1 #4 definitely I   |
| #5 equally both of us (don't read out)   |
| #6 no answer   |
|  |
| If divorce   |
| 119. IN WHICH MONTH AND YEAR BECAME YOUR DIVORCE LEGALLY VALID?  month: year;        |
| month: year:   |
| If divorce / separation  |
| 120. DID YOU START LIVING TOGETHER WITH THIS PARTNER ONCE AGAIN?                     |
|  |

# Loop partnership table: ena

If never married but at least one partnership
121. NOWADAYS COUPLES DO WITHOUT MARRIAGE BECAUSE OF VERY DIFFERENT REASONS.
WHY DID YOU PERSONALLY NOT MARRY? PLEASE TELL ME THE CODES FOR THE
APPROPRIATE REASONS.
list

- #1 I felt/feel to young for marriage
- #2 marriage was never planned
- #3 I generally don't approve of marriage
- #4 we wanted/want to put out partnership to the test
- #5 partner did not (yet) want to marry
- #6 I wanted/want to guarantee my occupational career (finish training)
- #7 I wanted/want to keep my independence
- #8 I/my partner was/is married to somebody else.
- #9 financial or legal reasons
- #10 separation took place before marriage was taken into consideration
- #11 other reasons

# Loop maternity table: start

# 122. NOW I WOULD LIKE TO TALK ABOUT YOUR CHILDREN. YOU TOLD ME THAT YOUR FIRST CHILD WAS BORN IN ..... IS THIS CHILD A BOY OR A GIRL? #1 boy #2 girl 123. IS THIS CHILD A CHILD BY BIRTH, AN ADOPTED CHILD, A STEPCHILD OR A FOSTER-CHILD? #1 child by birth #2 adopted child #3 stepchild - living in the same household #4 stepchild - at times living in the same household #5 foster-child If stepchild 124. DOES/DID THIS STEPCHILD LIVE TOGETHER WITH YOU #1 at most half of the week #2 more than half of the week If child by birth 125. WAS THIS PREGNANCY PLANNED OR NOT PLANNED? #1 planned #2 rather planned #3 rather not planned #4 not planned #5 don't know - no answer If not child by birth 126. WHEN DID THIS CHILD COME TO LIVE WITH YOU? month: year: 127. DOES THIS CHILD STILL LIVE WITH YOU NOW? #1 yes #2 no If child does not still live with respondent 128. WHAT IS THE REASON THAT THIS CHILD DOES NOT LIVE WITH YOU ANY LONGER? #1 child died #2 child given up for adoption #3 child came to foster-parents or to a children's home #4 child moved out to live on her/his own #5 child moved out to live with other parent #6 I moved out - child stayed with other parent #7 guardianship ended #8 other reasons If child does not still live with respondent 129. IN WHICH MONTH AND YEAR DID THIS HAPPEN? month: year: Loop maternity table: end 130. CURRENTLY HOW MANY CHILDREN ARE LIVING WITH YOU?

131. ARE YOU CURRENTLY PREGNANT?

#1 yes
#2 no

If yes

132. WHEN IS THE BABY EXPECTED TO BE BORN?
month: \_\_\_\_\_ year:\_\_\_\_\_

# Section 6: VIEWS ON HAVING CHILDREN

133. NOW I WOULD LIKE TO TALK ABOUT CHILDREN AND THE VIEWS ON HAVING CHILDREN. DO YOU INTEND TO HAVE A CHILD WITHIN THE NEXT 2 YEARS?

#1 yes

#2 no

#3 don't know

If not

134. IN PRINCIPLE DO YOU THINK YOU WOULD LIKE TO HAVE A(NOTHER) CHILD SOMETIME?

#1 yes

#2 no

#3 don't know

135. DO YOU STILL HAVE THE PHYSICAL POTENTIAL TO HAVE CHILDREN?

#1 yes - certainly

#2 yes - probably

#3 no - probably not

#4 no - certainly not

#5 don't know

If further children wanted

136. HOW MANY (MORE) CHILDREN WOULD YOU LIKE TO HAVE?

If further children wanted

137. AT WHAT AGE DO YOU WANT TO HAVE YOUR NEXT / FIRST CHILD, AT THE LATEST?

If further children wanted

138. AT WHAT AGE DO YOU WANT TO HAVE YOUR LAST CHILD, AT THE LATEST?

If further children wanted or at least one child existent

139. IS IT IMPORTANT FOR YOU TO HAVE AT LEAST ONE DAUGHTER?

#1 yes

#2 no

#3 don't know

If further children wanted or at least one child existent

140. IS IT IMPORTANT FOR YOU TO HAVE AT LEAST ONE SON?

#1 yes

#2 no

#3 don't know

141. HOW MANY CHILDREN DO YOU THINK IS THE IDEAL NUMBER FOR A FAMILY TO HAVE IN OUR COUNTRY?

### Section 7: PARTNER CHARACTERISTICS

all questions: If currently living with partner

142. I WOULD LIKE TO ASK A FEW QUESTIONS ON YOU AND YOUR PARTNER.
COULD YOU PLEASE INDICATE WHO USUALLY PERFORMS EACH OF THE FOLLOWING
HOUSEHOLD ACTIVITIES: MOSTLY YOURSELF, MOSTLY YOUR PARTNER, BOTH OF YOU
EQUALLY, MOSTLY OTHER MEMBERS OF THIS HOUSEHOLD OR MOSTLY OTHER PERSONS NOT
BELONGING TO THIS HOUSEHOLD?

- A- preparing the daily meals
- B- vacuum-cleaning and tidy the house
- C- shopping
- D- doing the dishes
- E- insurance, tax and other financial concerns
- F- bureaucratical concerns
- G-repairs
- H- looking after the elderly
- I- doing the washing and ironing
  - #1 mostly myself
  - #2 mostly my partner
  - #3 both of us equally
  - #4 mostly other members of the household
  - #5 mostly other persons
  - #7 not relevant

# Only persons living together with children

143. AND WHAT ABOUT THE CARE OF CHILDREN? COULD YOU PLEASE INDICATE WHO USUALLY PERFORMS EACH OF THE FOLLOWING ACTIVITIES: MOSTLY YOURSELF, MOSTLY YOUR PARTNER, BOTH OF YOU EQUALLY, MOSTLY OTHER MEMBERS OF THIS HOUSEHOLD OR MOSTLY OTHER PERSONS NOT BELONGING TO THIS HOUSEHOLD?

- A- taking care of children's meals
- B- getting children dressed
- C-looking after the children when they are ill
- D- playing with the children or activities
- E- helping the children with their homework
  - #1 mostly myself
  - #2 mostly my partner
  - #3 both of us equally
  - #4 mostly other members of the household
  - #5 mostly other persons
  - #7 not relevant

#### 144. WOULD YOU SAY THAT THIS DIVISION OF LABOUR IS FAIR?

A- household activities

#1 very fair

#2 rather fair

#3 reasonably fair

#4 rather unfair

#5 very unfair

B- care of the children

#1 very fair

#2 rather fair

#3 reasonably fair

#4 rather unfair

#5 very unfair

145. IF YOU THINK OF THE WORK YOU ARE PERFORMING IN THE HOUSEHOLD OR WITH THE CHILDREN, HOW MUCH WORK DO YOU PERFORM COMPARED TO OTHER WOMEN/MEN? (personal estimation)

|          | A- household activities   |     |
|----------|---|-----|
|          | #1 much more  |     |
|          | #2 rather more  |     |
|          | #3 nearly the same  |     |
|          | #4 rather less  |     |
|          | #5 much less  |     |
|          | B- care of the children   |     |
|          | #1 much more  |     |
|          | #2 rather more  |     |
|          | #3 nearly the same  |     |
|          | #4 rather less  |     |
|          | #5 much less  |     |
|          | #3 Illucii icss   |     |
| WITH '   | OU THINK OF THE WORK YOUR PARTNER IS PERFORMING IN THE HOUSEHOLD OR HE CHILDREN, HOW MUCH WORK DOES HE/SHE PERFORM COMPARED TO OTHER I/MEN? (personal estimation)  A- household activities #1 much more |     |
|          | #2 rather more  |     |
|          | #3 nearly the same  |     |
|          | #4 rather less  |     |
|          | #5 much less  |     |
|          | B- care of the children   |     |
|          | #1 much more  |     |
|          | #2 rather more  |     |
|          | #3 nearly the same  |     |
|          | #4 rather less  |     |
|          | #5 much less  |     |
|          |   |     |
|          | W OFTEN IS THE DIVISION OF LABOUR IN THE HOUSEHOLD OR WITH THE CARE OF EN A MATTER OF DISPUTE?  A- household  #1 very often   | THE |
|          | #2 rather often   |     |
|          | #3 rather seldom  |     |
|          | #4 very seldom  |     |
|          | B- care of the children   |     |
|          | #1 very often   |     |
|          | #2 rather often   |     |
|          | #3 rather seldom  |     |
|          | #4 very seldom  |     |
|          | #4 Very Schooli   |     |
| 140 10   | OUR PARTNER EMPLOYED AT THE MOMENT?   |     |
| 140. 13  |   |     |
|          | #1 yes  |     |
|          | #2 no 14 de la companya de la compa  |     |
| TC .     |   |     |
|          | r is not employed   |     |
| 149. W   | S SHE/HE EVER EMPLOYED BEFORE?  |     |
|          | #1 yes  |     |
|          | #2 no   |     |
|          |   |     |
|          | r was employed before but not yet   |     |
| 150. W   | EN DID SHE/HE STOP WORKING?   |     |
|          | month: year:  |     |
|          |   |     |
|          |   |     |
| If partn | r is currently employed   |     |
|          | IAT KIND OF WORK DOES YOUR PARTNER DO EXACTLY?  |     |
|          |   |     |

#### If partner is currently employed

# 152. WHAT IS YOUR PARTNER'S 'STATUS OF EMPLOYMENT' IN THIS JOB?

- #1 employer, independent profession
- #2 farmer
- #3 blue-collar worker
- #4 white-collar worker
- #5 civil servant
- #6 independent collaboration
- #7 unpaid work in family business
- #8 trainee
- #9 other

# If partner is currently employed

# 153. HOW MANY HOURS PER WEEK DOES YOUR PARTNER WORK AT THIS JOB ON AVERAGE?

- #1 < 13 hours
- #2 13-24 hours
- #3 25-34 hours
- #4 35-44 hours
- #5 > 45 hours

# 154. WHAT IS THE HIGHEST EDUCATION YOUR PARTNER HAS RECEIVED?

- #1 compulsory school not completed
- #2 compulsory school
- #3 apprenticeship /vocational training
- #4 training college: three years (from 14 to 17) (=BMS)
- #5 general secondary education: (from 14 to 18) (=AHS)
- #6 training college: five years (from 14 to 19) (=BHS), graduation, educational establishment similar to university (Akademien)

# 155. WE HAVE TALKED ABOUT YOUR DESIRE TO HAVE A(NOTHER) CHILD OR NOT. DOES YOUR PARTNER WANT THE SAME NUMBER OF CHILDREN YOU WANT, OR DOES HE WANT MORE OR FEWER CHILDREN THAN YOU?

- #1 same number
- #2 more
- #3 fewer
- #4 don't know
- #5 not appropriate

# 156. HOW MANY (MORE) CHILDREN DOES YOUR PARTNER WANT?

# 157. HERE IS A LIST OF QUALITIES AN IDEAL PARTNER SHOULD HAVE. PLEASE TELL ME FOR EACH OF THE FOLLOWING QUALITIES IF IT IS FOR YOU PERSONALLY IMPORTANT OR NOT.

- A- self-confidence, ability to assert himself/herself
- B- education, intelligence
- C- humour
- D- tolerance and respect for other people
- E- love, tenderness
- F- to be good looking
- G- sensitivity
- H- capacity for solving conflicts
- I- faithfulness
- J- secure income
- K- sense of family
- L-loving dealing with the children

#### 158. WHICH OF THESE QUALITIES DOES YOUR PARTNER MEET?

- A- self-confidence, ability to assert himself/herself
- B- education, intelligence

C- humour

D- tolerance and respect for other people
E- love, tenderness
F- to be good looking
G- sensitivity
H- capacity for solving conflicts
I- faithfulness

J- secure income

K- sense of family

L- loving dealing with the children

159. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ON FAMILY PLANNING. HAVE YOU EVER USED A METHOD TO AVOID BECOMING PREGNANT, ANYTHING AT ALL?

#1 yes #2 no

If ever contraception

160. AT THE VERY FIRST SEXUAL INTERCOURSE, DID YOU EVER USE A METHOD TO AVOID BECOMING PREGNANT?

#1 yes #2 no

161. HOW OLD WERE YOU WHEN YOU FIRST DID OR USE SOMETHING TO AVOID YOUR BECOMING PREGNANT?

162. WHICH CONTRACEPTIVE METHOD OR COMBINATION OF TWO METHODS DID YOU AND/OR YOUR PARTNER USE <u>AT THAT TIME</u>? (IF COMBINATION:) WHAT WAS THE MAIN METHOD - WHAT CAME SECOND? PLEASE TELL ME THE APPROPRIATE CODES.

```
HAT CAME SECOND? PLEASE TELL ME THE APPROPRIATE CODES.

A- main method

#1 pill

#2 coil [Spirale]

#3 diaphragm

#4 foam/jelly

#5 condom

#6 injections

#7 Knaus-Ogino

#8 [Basal-Temperaturmethode]

#9 other timing methods [andere Zeitwahlmethoden]

#10 withdrawal

#11 sterilization self

#12 sterilization partner

#13 only men: don't know - my partner took care of avoiding her becoming pregnant

#14 other methods
```

# B- second method

#1 pill

#2 coil [Spirale]

#3 diaphragm

#4 foam/jelly

#5 condom

#6 injections

#7 Knaus-Ogino

#8 [Basal-Temperaturmethode]

#9 other timing methods [andere Zeitwahlmethoden]

#10 withdrawal

#11 sterilization self

#12 sterilization partner

#13 only men: don't know - my partner took care of avoiding her becoming pregnant

#14 other methods

#### If ever contraception

163. WHICH CONTRACEPTIVE METHOD OR COMBINATION OF TWO METHODS DID YOU USE <u>PREDOMINANTLY UNTIL NOW?</u> (IF COMBINATION:) WHAT WAS THE MAIN METHOD - WHAT CAME SECOND? PLEASE TELL ME THE APPROPRIATE CODES.

```
A- main method
```

#1 pill

#2 coil

#3 diaphragm

#4 foam/jelly

```
#5 condom
                #6 injections
                #7 Knaus-Ogino
                #8 [Basal-Temperaturmethode]
                #9 other timing methods
                #10 withdrawal
                #11 sterilization self
                #12 sterilization partner
                #13 only men: don't know - my partner took care of avoiding her becoming pregnant
                #14 other methods
        B- second method
               #1 pill
                #2 coil
                #3 diaphragm
                #4 foam/jelly
                #5 condom
                #6 injections
                #7 Knaus-Ogino
                #8 [Basal-Temperaturmethode]
                #9 other timing methods
                #10 withdrawal
               #11 sterilization self
               #12 sterilization partner
               #13 only men: don't know - my partner took care of avoiding her becoming pregnant
               #14 other methods
If ever contraception
164. HAVE YOU USED ANY CONTRACEPTIVE METHOD IN THE LAST 4 WEEKS?
        #1 yes
       #2 no
If contraceptive method in the last 4 weeks
165. WHICH CONTRACEPTIVE METHOD OR COMBINATION OF TWO METHODS DID YOU USE IN
THE LAST 4 WEEKS? (IF COMBINATION:) WHAT WAS THE MAIN METHOD - WHAT CAME
SECOND? PLEASE TELL ME THE APPROPRIATE CODES.
       A- main method
               #1 pill
               #2 coil
               #3 diaphragm
               #4 foam/jelly
               #5 condom
               #6 injections
               #7 Knaus-Ogino
               #8 [Basal-Temperaturmethode]
               #9 other timing methods
               #10 withdrawal
               #11 sterilization self
               #12 sterilization partner
               #13 only men: don't know - my partner took care of avoiding her becoming pregnant
               #14 other methods
       B- second method
               #1 pill
               #2 coil
               #3 diaphragm
               #4 foam/jelly
```

#5 condom #6 injections #7 Knaus-Ogino

#8 [Basal-Temperaturmethode] #9 other timing methods

| #10 withdrawal<br>#11 sterilization self   |
|--|
| #12 sterilization partner  |
| #13 only men: don't know - my partner took care of avoiding her becoming pregnant  |
| #14 other methods  |
| Questions 166-170 only women   |
| 166. HAVE YOU EVER HAD A PREGNANCY THAT MISCARRIED, WAS ABORTED OR ENDED IN A  |
| STILLBIRTH?  |
| #1 yes   |
| #2 no  |
| #3 no answer   |
| If ever had such a pregnancy   |
| 167. HOW MANY SUCH PREGNANCIES DID YOU HAVE IN ALL?  |
|  |
| If ever had such a pregnancy   |
| 168. MAY I ASK YOU HOW MANY SUCH PREGNANCIES ENDED WITH AN ABORTION?   |
|  |
|  |
| If at least one abortion   |
| 169. COULD YOU PLEASE TELL ME WHEN THIS TOOK PLACE OR HOW OLD YOU HAVE BEEN A  |
| THAT TIME?   |
| 1. abortion- age: or year:   |
| 2. abortion- age: year:  |
| 3. abortion- age: year:  |
| 4. abortion- age: year:  |
|  |
| 170. IF YOU BECAME UNINTENTIONALLY PREGNANT, WHAT WOULD YOU DO?  |
| A- have the baby and keep it yourself  |
| B- have the baby and give it up for adoption   |
| C- maybe have an abortion  |
| D- certainly have an abortion  |
| E- don't know  |
|  |
| 171. TO CONCLUDE THIS INTERVIEW I HAVE A FEW QUESTIONS ON THE INCOME OF YOUR HOUSEHOLD. COULD YOU PLEASE TELL ME THE MOST IMPORTANT SOURCE OF YOUR |
| HOUSEHOLD INCOME IN THE LAST MONTH?  |
| #1 employment income - earnings  |
| #2 cash property income  |
| #3 pension   |
| #4 unemployment benefits   |
| #5 maternity pay   |
| #6 other social benefits   |
| #7 alimony or child support  |
| #8 other cash income   |
| #6 Ottlef Cash income  |
| list   |
| 172. HOW HIGH IS THE AVERAGE NET-INCOME OF YOUR HOUSEHOLD PER MONTH, i.e. THE  |
| DISPOSABLE INCOME OF YOUR HOUSEHOLD WITHOUT TAXES AND SOCIAL CONTRIBUTIONS   |
| PLEASE TELL ME THE APPROPRIATE LETTERS ON THIS LIST. (TO BE PAID 14 TIMES A YEAR -   |
| AUSTRIAN LAW).   |
| #1 O < 5.000   |
| #2 R 5-10.000  |
| #3 H 10-15.000   |
| #4 B 15-20.000   |
| #5 V 20-30.000   |
| #6 S 30-40.000   |

#7 K 40-50.000

#1 very good #2 good

173. HOW WOULD YOU, ALL IN ALL, DESCRIBE YOUR FINANCIAL SITUATION?

# #3 fairly good #4 rather tight #5 very tight 174. AT LAST - SOME QUESTIONS ON YOUR RELIGIOUS AFFILIATION. WHICH GROUP DO YOU BELONG TO? #1 Catholic #2 Protestant #3 Islamic #4 other #5 no religion 175. ARE YOU RELIGIOUS? #1 certainly yes #2 rather yes #3 rather not #4 certainly not #5 no answer If living together with partner 176. WHICH RELIGIOUS AFFILIATION DOES YOUR PARTNER HAVE? #1 Catholic #2 Protestant #3 Islamic #4 other #5 no religion 177. IS YOUR PARTNER RELIGIOUS? #1 certainly yes #2 rather yes #3 rather not #4 certainly not #5 no answer Ascertain additional 178. WAS ANOTHER PERSON PRESENT DURING THE INTERVIEW? #1 yes #2 no If yes 179. WHO WAS PRESENT? #1 partner #2 children #3 other persons 180. WHEN WAS THIS PERSON / WERE THESE PERSONS PRESENT? #1 during the whole interview #2 during specific sections, in particular: