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**A Swedish 'Generations and Gender Survey'
Questionnaire**

Telephone Survey

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Variable Names and Matches to GGP Wave 1 Questionnaire:

Questions are numbered with a capital letter and number. In the Swedish data files, the variable names correspond to the question number (A01, C23, etc.), but the letter is lower case. In the questionnaire below, the question number from the GGP Full Questionnaire, Wave 1, is included under each of the Swedish question numbers, starting with Q. If the GGP number starts with QR, the source of the information is for most respondents from 2011 population registers; the question was asked only when the information was not found in the registers or as a follow-up when the respondent was asked if the register information was correct and answered 'no'.

Introduction:

As you know from the letter you received from Statistics Sweden and Stockholm University Demography Unit (SUDA), you have been selected to participate in the survey called Swedish Families in Time. The survey focuses on your current and potential future family relations and the economic and social conditions that affect family life. The answers that you and other respondents provide will help us to understand how Swedish family relations function and change. They will, among other things, be used to compare Swedish families with families in other European countries. The information may also be used to develop better family policy instruments to support individuals and their families.

A. FAMILY AND HOUSEHOLD

Introduction:

To begin, I would like to ask you about your family. By family I mean any children and any partner, that is, husband, wife, cohabiting partner or registered partner

Partner

- A01 Are you married, in a cohabiting relationship or single?
Q1.01 1 – Married Proceed to A02
2 – Cohabiting Proceed to A02
3 – Single..... Go to A10

Voluntary answer:

- 4 – Registered partner..... Proceed to A02
5 – Living-apart Go to A11

- A02 What is the name of your [husband/wife/partner/cohabiting partner?]
Q1.01 A [Given name: _____] = NAME
B [Surname: _____]

Interviewer: If respondent does not give surname then ask: "And surname?"

Checkpoint:

- Is the [husband's/wife's/partner's] name in the registers?
Yes..... Go to A05
No Proceed to A03

- A03 Is [NAME] a man or a woman?
Interviewer: The question need not be asked if the answer is already given
1 – man
2 – woman

- A04 What is [NAME]'s date of birth – year, month and day?
QR1.15b year |__|__|__|__| month |__|__| day |__|__| nr |__|__|__|__|

- A05 In what year and month did you move into together?
Q3.01 Interviewer: If multiple occasions, latest time
year |__|__|__|__| month |__|__|

Checkpoint:

- Is the respondent, according to A01, married or in a registered partnership?
Yes..... if A06 in register go to A08, if not go to A06
No..... go to A07

- A06 In what year and month did you marry [register as partners]?
QR3.02b year |__|__|__|__| month |__|__| go to A08

- A07 Do you plan to marry [NAME] during the next three years?
Q3.32 Would you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

A. Family and household

A08 Do you and [NAME] live together all the time or only some of the time?
 1 – all the time go to A21
 2 – some of the time proceed to A09
 Voluntary answer:
 3 – never go to A14A

A09 Do you and [NAME] live together more than half the time, roughly half the time, or less than half the time?
 1 – more than half the time
 2 – roughly half the time
 3 – less than half the time

Go to A21

A10 Do you currently have a relationship with someone with whom you do not live?
 Q3.10 1 – yes..... proceed with A11
 2 – no Go to A19

A11 In what year and month did you become a couple?
 Q3.11 year |_|_|_|_| month |_|_|

A12 Is your partner a man or a woman?
 Q3.13 1 – man
 2 – woman

A13 In what year and month was [he/she] born?
 Q3.15 year |_|_|_|_| month |_|_|

A14A Are you and [NAME] living apart because you (both) do not want to
 Q3.12a live together or are other circumstances preventing you from living together?

1 – I want to live apart ↓ A14b	2 – Both [NAME] and I want to live apart ↓ First A14b Then A14c →	3 – [NAME] wants to live apart ↓ A14C	4 – Other circumstances restrict us ↓ A14d
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A14b. What is the most important reason that you want to live apart?
 1 – for financial reasons
 2 – to keep independence
 3 – because of children
 4 – not yet ready for living together
 5 – other _____

If A14a=2 proceed with A14c
If A14a=1 proceed with A15

A14c. What is the most important reason that [NAME] wants to live apart?
 1 – for financial reasons
 2 – to keep independence
 3 – because of children
 4 – not yet ready for living together
 5 – other _____
 F8 – do not know

A14d. What is the circumstance that restricts you the most?
 1 – work circumstances
 2 – financial circumstances
 3 – housing situation
 4 – legal circumstances
 5 – my partner has another family
 6 – because of children
 7 – other _____

A. Family and household

A15 Q3.24 How long does it take you to get from your home to where [NAME] is living?
|_|_|hours
|_|_|minutes
77 – [NAME] lives abroad (voluntary answer)

A16a Q3.25 How often do you see [him/her]?
Interviewer: If never, put zero
|_|_|_| times per:

A16b
1 – week
2 – month
3 – year

A17 Do you plan to move in together with [NAME] within the next three years?
Would you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

Checkpoint:

Is the respondent married or in a registered partnership? [A01=1,4]
Yes..... Go to A21
No proceed with A18.

A18 Q3.32 Do you plan to marry [NAME] within the next three years?
Would you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

Go to A21

A19 Q3.27 [If A10=2: Nevertheless,] Do you think that you will move in with a partner
within the next three years? Would you say definitely not, probably not, probably
yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

A20 Q3.32 Do you think that you will get married during the next three years?
Would you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

Biological or adopted children

- A21 Do you or have you had any biological or adopted children?
Q1.01 or 1 – yes..... proceed with A22
Q2.09 2 – no go to checkpoint before A36

[Loop starts]

- A22 Please tell me the names of all your children, starting with the oldest.
Q1.01 or 1 – Given name_____ = NAME1
Q2.10 2 – Given name_____ = NAME2
And so on.

Checkpoint:

- Is the child's name in the registers?
Yes..... Go to A28
No proceed with Interviewer

Interviewer: If the name is typically male or female, mark the correct gender in A23 and go to A24.

- A23 Is [NAME] male or female?
QR1.14 or 1 – man/boy
QR2.12 2 – woman/girl

- A24 Is [he/she] your biological or adopted child?
QR1.01 or
QR2.13 1 – biological
2 – adopted

Checkpoint:

- Is the respondent living with a partner? [A01 =1 or 2 or 4]
Yes..... proceed with A25
No go to A26

- A25 Is [NAME] also your current [husband's/wife's/partner's/cohabiting partner's]
QR1.01 or child?
QR2.15 1 –yes
2 – no

- A26 In what year and month was [NAME] born?
QR1.15 or
QR2.16b year |__|__|__|__| month |__|__|

- A27a Was [he/she] born in Sweden or abroad?
1 Sweden go to A27c
2 Abroad proceed with A27b

A. Family and household

- A27b In which country was [NAME] born?
Country as exact answer: _____ go to A28
- A27c In which municipality was [NAME] born?
Municipality as exact answer: _____ go to A28
IF DO NOT KNOW go to A27d
- A27d In which county was [NAME] born?
County as exact answer: _____
- A28 Does [NAME] live in your household always, sometimes, or not at all?
1 – Always go to checkpoint before A30
2 – Sometimes go to A29
3 – Not at all go to checkpoint before A30
4 – Deceased (volunteered) go to A34
- A29 Does [NAME] live in your household more than half the time, roughly half the time, or less than half the time?
1 – more than half the time
2 – roughly half the time
3 – less than half the time

Checkpoint:

- Is the child 14 years or older? [See A26]
Yes proceed with A30
No go to checkpoint before A31

- A30 Q1.16 What is [NAME] mainly doing at present? Is [he/she] employed, self employed, unemployed, [(if child under 50 years old) student], [(if child over 50 years old) retired] or something else?
Interviewer: If other, code what or print in text.

- 1 – employed
2 – self-employed
3 – unemployed
4 – student
Other:
5 – retired
6 – on parental leave
7 – on sick leave
8 – homemaker
9 – other, what: _____

Ask the following questions about all the children

Checkpoint

Does NAME always or sometimes live in the household? [A28=1 or 2]

Yes..... go to A33

No proceed with A31

A31 How long does it take you get from your home to where [NAME] is living?

Q2.21 |__|__| hours

|__|__| minutes

77 – [NAME] lives abroad (volunteered)

A32a How often do you see [him/her]?

Q2.23 Interviewer: If never, mark 0

|__|__|__| times per

A32b 1 – week

2 – month

3 – year

A33 How satisfied are you with your relationship with [name]? On a scale from

Q2.24 0 to 10 where 0 means 'not satisfied at all' and 10 means 'completely satisfied'

Scale 0-10

Value: _____

A34 Do you or have you had more children?

1 – yes..... go to A22 for next child

2 – no go to checkpoint before A36

[Loop ends]

Step children

Checkpoint:

Is the respondent living with a partner? [A01=1 or 2 or 4]
Yes.....proceed with A36
No go to A47

A36 Does your [husband/wife/partner/cohabiting partner] have children that are not
QR1.01 or yours? Include also those who do not live in your household
Q2.26 Interviewer: Do not include deceased step children.
1 – yes..... proceed with A37
2 – no go to A47

[Loop starts]

A37 Please tell me the names of all the children, starting with the oldest.
QR1.01 or 1. Given name _____ = NAME
QR2.27 2. Given name _____ = NAME
And so on.

Checkpoint:

Is the child's name in the registers?
Yes..... go to A40
No
Interviewer: If the name is typically male or female, mark the correct gender in
A38 and go to A39

A38 Is [NAME] male or female?
QR1.14 or 1 – man/boy
QR2.29 2 – woman/girl

A39 In what year and month was [NAME] born?
Q1.15b or year |_|_|_|_| month |_|_|
Q2.30

A40 Does [NAME] live in your household always, sometimes, or not at all?
1 – always go to checkpoint before A42
2 – sometimes proceed with A41
3 – not at all go to checkpoint before A42

A41 Does [NAME] live in your household more than half the time, roughly half the
time, or less than half the time?
1 – more than half the time
2 – roughly half the time
3 – less than half the time

Checkpoint:

Is the child 14 years or older? [See A39]
Yes..... proceed with A42
No go to checkpoint before A43

A. Family and household

A42 Q1.16 What is [NAME] mainly doing at present? Is [he/she] employed, self-employed, unemployed, [(if child under 50 years) student], [(if child over 50 years of age) retired] or something else?

Interviewer: If other, code what or type in text.

- 1 – employed
- 2 – self-employed
- 3 – unemployed
- 4 – student
- Other:
- 5 – retired
- 6 – on parental leave
- 7 – on sick leave
- 8 – homemaker
- 9 – other, what: _____

Checkpoint:

Does [NAME] always or sometimes live in the household? [A40=1 or 2]

Yes..... go to A45

No proceed with A43

A43 Q2.35 How long does it take to get from your home to where [NAME] is living?

|__|__| hours

|__|__| minutes

77 – [NAME] lives abroad (volunteered)

A44a Q2.36 How often do you see [him/her]?

Interviewer: If never, mark 0

|__|__|__| hours per

- A44b 1 – week
- 2 – month
- 3 – year

A45 Q2.37 How satisfied are you with your relationship with [NAME]? On a scale from 0 to 10 where 0 means 'not at all satisfied' and 10 means 'completely satisfied'

Scale 0-10

Value: _____

A46 Does your [husband/wife/partner/cohabiting partner] have any other children that are not yours, including those who do not live in your household?

1 – yes go to A37 for next step child

2 – no proceed with A47

[Loop ends]

Foster children

A47 Have you ever had foster children?
 Q2.25 Interviewer: Foster children are children who are not biological, adopted, or step children but for whom respondent has a formal or informal responsibility to provide parental care.
 1 – yes..... proceed with A48
 2 – no go to A56a if there are children in the family, otherwise go to next section

A48 Do you currently have any foster children?
 Q2.25 1 – yes..... proceed with A49
 2 – no go to A56a if there are children in the family, otherwise go to next section

[Loop starts]

A49 To help me, please tell me the names of all your current foster children, starting
 Q1.01 or with the oldest.
 Q2.10 1. Given name _____ = NAME
 2. Given name _____ = NAME
 And so on.
 Interviewer: If the name is typically male or female then mark correct sex at A50 and go to A51

A50 Is that a boy or girl?
 QR1.14 or 1 – man/boy
 QR2.12 2 – woman/girl

A51 In what year and month was [NAME] born?
 QR1.15b or year |_|_|_|_| month |_|_|
 QR2.16b

Checkpoint:

Is the child 14 years or older? [See A51]
 Yes..... proceed with A52
 No go to A53

A52 What is [NAME] mainly doing at present? Is [he/she] employed, self-
 Q1.16 employed, unemployed, student or something else?
 Interviewer: If other, code what or put as text
 1 – employed
 2 – self-employed
 3 – unemployed
 4 – student
 Other:
 5 – retired
 6 – on parental leave
 7 – on sick leave
 8 – homemaker
 9 – other, what: _____

A. Family and household

A53 Does [NAME] live in your household always, sometimes or not at all?
1 – always
2 – sometimes
3 – not at all

A54 Q2.24 How satisfied are you with your relationship with [NAME]? On a scale from 0 to 10 where 0 means 'not at all satisfied' and 10 means 'completely satisfied'
Scale 0-10
Value: _____

A55 Do you have another foster child at the moment?
1 – yes go to A49 for the next foster child
2 – no proceed with A56a

[Loop ends]

A56a Q1.18 Are any of the children we have talked about restricted in carrying out normal everyday activities, because of physical or psychological health problems or disabilities?
1 – yes..... proceed with A56b
2 – no go to checkpoint before A59

A56b Which of the children?
Names as exact answer: _____

Child maintenance

Checkpoint:

Does the respondent have a biological or adoptive child under the age of 18 who is not also the current partner's child? [See A25 and A26]

Yes..... proceed with A59

No go to checkpoint before A63

A59 Q3.53 Do you currently receive maintenance payments for any child you had with a previous partner?

1 – yes..... go to A60a

2 – no proceed with A61

A60a Q3.55 How much do you receive?

|_|_|_|_|_|_|_| Swedish crowns

Interviewer: Total amount of maintenance payments for all such children. If respondent says Swedish crowns with other time period, note in A60b

A60b 1 – week

2 – month

3 – year

4 – other, what: _____

A61 Q3.57 Do you currently pay maintenance payments for any child you had with a previous partner?

1 – yes..... Go to A62a

2 – no proceed with checkpoint before A63

A62a Q3.59 How much do you pay?

|_|_|_|_|_|_|_| Swedish crowns

Interviewer: Total amount of maintenance payments for all such children. If respondent says Swedish crowns with other time period, note in A62b

A62b 1 – week

2 – month

3 – year

4 – other, what: _____

Checkpoint:

Does the respondent's current partner have a biological or adopted child under the age of 18, who *is not* the respondent's child? (See A36 and A39)

Yes..... proceed with A63

No go to checkpoint before A67

A63 Does your current *partner* receive maintenance payments for [her/his] [child/children]?

1 – yes..... go to A64a

2 – no proceed with A65

A64a How much does he/she receive?

|_|_|_|_|_|_|_|_|_| Swedish crowns

Interviewer: Total amount of maintenance payments for all such children. If respondent says Swedish crowns with other time period, note in A64b

A64b 1 – week

2 – month

3 – year

4 – other, what: _____

A65 Does your partner pay maintenance payments for her/his child/children?

1 – yes..... go to A66a

2 – no proceed with checkpoint before A67

A66a How much?

|_|_|_|_|_|_|_|_|_| Swedish crowns

Interviewer: Total amount of maintenance payments for all such children. If respondent says Swedish crowns with other time period, note in A66b

A66b 1 – week

2 – month

3 – year

4 – other what: _____

Child care

Checkpoint:

Does the respondent have any children, step children, or foster children, younger than 14, living in the household, [See register + A26, A28, A39 and A40]

Yes..... proceed with A67

No go to checkpoint before A73

A67
Q2.03a Here are some questions about children and child care. Do you use any type of child care or other paid help to watch over any of your children, such as preschool, day care or nanny?

1 – yes..... proceed with A68

2 – no go to A70

[Loop starts]

A67b Lets starts with ...

1. Given name _____ = NAME

2. Given name _____ = NAME

And so on.

A68 Which type of child care do you use for [NAME]? Multiple alternatives possible.

Q2.03b Interviewer: Mark number in A69

1 – Preschool/daycare

2 – Family day car

3 – after school care-center

4 – nanny

5 – other

6 – nothing for this child go instruction before A70

A69 How often do you use [named in A68]

Q2.03c

	Mark if used	Frequency of usage			
		W=week; M=month; Y=year			
1 –Preschool/daycare		_____ times per	W	M	Y
2 –Family day care		_____ times per	W	M	Y
3 –After school care-center		_____ times per	W	M	Y
4 –Nanny		_____ times per	W	M	Y
5 –Other		_____ times per	W	M	Y

Checkpoint:

If more children, go to checkpoint before A68 for next child.

If no more children, proceed with A70.

[Loop ends]

A. Family and household

A70 Do you [(if A68=1-5) also] receive regular help with child care from persons who do not live in the household? For example relatives, friends, or other persons for whom caring for children is not a job?

- 1 – yes..... proceed with A71
- 2 – no..... go to checkpoint before A73

A71 From whom have you received such help?
 Q2.04b Interviewer: DO NOT read the alternatives but use the codes listed below. If more than person with the same relation is listed then give each person a specific number in A72. Up to five persons may be listed.
 List number in A72

- 1 – partner
- 2 – respondent’s mother
- 3 – respondent’s father
- 4 – partner’s mother
- 5 – partner’s father
- 6 – son
- 7 – daughter
- 8 – stepson
- 9 – stepdaughter
- 10 – grandparent (female)
- 11 – grandparent (male)
- 12 – grandchildren
- 13 – sister
- 14 – brother
- 15 – other relative
- 16 – friend, acquaintance, neighbour, colleague
- 17 – previous partner; child’s other parent
- 18 – other person

Also ask A72 for every person mentioned in A71

A72 How frequently does [person mentioned] help to look after your children?
 Q2.04c **Enter into table**

Above-mentioned persons	W=week; M=month; Y=year			
	_____ times per	W	M	Y
	_____ times per	W	M	Y
	_____ times per	W	M	Y
	_____ times per	W	M	Y
	_____ times per	W	M	Y

Grandchildren

Checkpoint:

Does the respondent have any biological or adopted child older than 16 years old?
[See register and A23]

Yes..... proceed with A73

No go to checkpoint before C01

A73a Do you have any grandchildren?

Q2.38 1 – yes..... proceed with A73b

2 – no go to checkpoint before C01

A73b How many?

Q2.38 |__|__| Number of grandchildren

Checkpoint:

If A73b = 1 go to A76

A74 In what year was the oldest of your grandchildren born?

Q2.39a year |__|__|__|__|

A75 And in what year was the youngest of your grandchildren born?

Q2.40 year |__|__|__|__| go to A77

A76 In what year was your grandchild born?

Q2.39b year |__|__|__|__|

A77a How frequently do you help to look after your [grandchild/grandchildren]?

Q2.41 |__|__|__| times per

A77b 1 – week

2 – month

3 – year

4 – do not help

Checkpoint:

Does the respondent have any grandchildren that are 16 years or older?
(A74/A76)

Yes..... proceed with A78

No go to checkpoint before C01

A78 Do you have any great-grandchildren?

Q2.42a 1 – yes..... proceed with A79

2 – no go to checkpoint before C01

A79 How many?

Q2.42b |__|__| number of great-grandchildren

C. PARENTS, CHILDHOOD AND PARENTAL HOME

Introduction: CINTRO

Now I would like to ask some questions about your parents, your childhood and your parental home. We'll begin with the questions about your *biological* parents or your adoptive parents, meaning those who are registered as your parents.

Interviewer: The questions do not apply to step or foster parents, even if the respondent lived with them during the larger part of their childhood (up until age 15) or if the respondent sees them as their real parents.

Questions on biological or adoptive mother

C01 Is your mother still alive?
QR1.01 or 1 – yes
QR5.09 or 2 – no
QR5.64 3 – do not know

Checkpoint:

If information on respondent's biological or adoptive mother is in the register, interviewer skips to C05

If the biological or adoptive mother is alive or the respondent does not know, go to C03

C02 In what year did she die?
QR5.10 or year |__|__|__|__|
QR5.65

C03 In what year was she born?
QR1.15b or year |__|__|__|__|
QR5.11 or
QR5.18 or
QR5.66

C04a Was she born in Sweden or abroad?
QR5.12a or 1 – Sweden go to C05
QR5.19a or 2 – abroad proceed with C04b
QR5.31a or
QR5.67a or
QR5.100a

C04b In what country was she born?
QR5.12b or Country as exact answer: _____
QR5.19b or
QR5.31b or
QR5.67b or
QR5.100b

Questions on biological or adoptive father

C05 Is your father still alive?

QR1.01 or 1 – yes

QR5.35 or 2 – no

QR5.57 3 – do not know

Checkpoint:

If there is information on the respondent's biological or adoptive father in the registers, interviewer skips to C09

If the biological or adoptive father is alive or respondent does not know go to C07.

C06 In what year did he die?

QR5.36 or year |__|__|__|__|

QR5.58

C07 In what year was he born?

QR1.15b or year |__|__|__|__|

QR5.37 or

QR5.44 or

QR5.59

C08a Was he born in Sweden or abroad?

QR5.05a or 1 – Sweden go to C09

QR5.38a or 2 – abroad proceed with C08b

QR5.45a or

QR5.60a or

QR5.96a

C08b In what country was he born?

QR5.05b or Country as exact answer: _____

QR5.38b or

QR5.45b or

QR5.60b or

QR5.96b

C09 Have your biological or adoptive parents ever separated?

Q5.16 1 – yes.....proceed with C10

Q5.23 2 – nogo to checkpoint before C11

Q5.42 3 – they never lived togethergo to checkpoint before C11

Q5.49 8 – do not knowgo to checkpoint before C11

Q5.71 9 – no answer.....go to checkpoint before C11

Q5.104

C10 In which year did this happen?

Q5.17 or year |__|__|__|__|

Q5.24 or

Q5.43 or

Q5.50 or

Q5.72 or

Q5.105

Checkpoint:

- Both parents alive, never separated..... proceed with C11
- Both parents alive, separated or respondent don't know or refuses to answer whether parents separated.....go to C21
- Mother alive but not father or respondent does not know if father is alive.....go to C21
- Father alive but not mother or respondent does not know if mother is alive.....go to C28
- Neither parent is alive or respondent does not know if the parents are alive..... go to text before C35a

Questions about parents, if they are both alive and live together

- C11 May I check, do you (possibly) live with your parents?
Q1.01 1 – yes..... go to C17
2 – no proceed with C12

- C12 Do your parents live together, just the two of them, or do other persons live in their household?
Q5.87 1 – by themselves go to C14
2 – with other persons.....proceed with C13
other:
3 – in group quarters, such as care or healthcare facilities.....proceed with C14

- C13 Who else lives in your parents' household?
Q5.87 Interviewer: Check all that apply
1 – Respondent's brother/brothers
2 – Respondent's sister/sisters
3 – Another relative
4 – A friend
5 – Others in group quarters, such as care or healthcare facility
6 – Others

- C14 How long does it take to get from your home to your mother's and father's residence?
Q5.90 |__|__| hours
|__|__| minutes
77 – Parents live abroad (volunteered)

- C15a How often do you see your mother?
Q5.92 |__|__|__| times per

- C15b 1 – week
Q5.92 2 – month
3 – year

- C16a How often do you see your father?
Q5.91 |__|__|__| times per

- C16b 1 – week
Q5.91 2 – month
3 – year
- C17 How satisfied are you with the relationship with your mother? On
Q5.94 a scale from 0 to 10 where 0 means 'not at all satisfied' and 10 means 'completely satisfied'
Scale 0-10
Value: _____
- C18 How satisfied are you with the relationship with your father? On
Q5.93 a scale from 0 to 10 where 0 means 'not at all satisfied' and 10 means 'completely satisfied'
Scale 0-10
Value: _____
- C19 Is your mother limited in carrying out normal everyday activities because of
Q5.89 physical or psychological health problems or disabilities?
1 – yes
2 – no
- C20 Is your father limited in carrying out normal everyday activities because of
Q5.88 physical or psychological health problems or disabilities?
1 – yes
2 – no

Go to text before C35

Questions on mother, if parents are not living together (including if father is not alive or if respondent does not know if the father is alive)

- C21 May I check, do you (possibly) live with your mother?
Q1.01 1 – yes..... go to C26
2 – no proceed with C22
- C22 Does your mother live alone or do other people live in her household?
Q5.81 1 – alone go to C24
2 – other people in household..... proceed with C23
other:
3 – in group quarters such as care or healthcare facilities..... proceed with C24
4 – do not know go to C24
- C23 With whom does she live?
Q5.81 Interviewer: Check all that apply
1 – husband/partner/cohabiting partner
2 – respondent's brother/brothers
3 – respondent's sister/sisters
4 – husband's/partner's/cohabiting partner's child/children
5 – a relative
6 – a friend

C. Parents, childhood and parental home

7 – others in group quarters, such as care or healthcare facility

8 – others

9 – Living again with respondent's father

C24 How long does it take to get from your home to your mother's residence?

Q5.83 |__|__| hours

|__|__| minutes

77 – mother lives abroad (volunteered)

C25a How often do you see your mother?

Q5.84 |__|__|__| times per

C25b 1 – week

Q5.84 2 – month

3 – year

C26 How satisfied are you with the relationship with your mother? On a
Q5.85 scale from 0 to 10 where 0 means 'not at all satisfied' and 10 means 'completely satisfied'

Scale 0-10

Value: _____

C27 Is your mother limited in carrying out normal everyday activities because of
Q5.82 physical or psychological health problems or disabilities?

1 – yes

2 – no

If father is not alive or if respondent does not know if the father is alive - go to text before C35a, others proceed to C28

Questions on father, if parents are not living together (including if mother is not alive or if respondent does not know if the mother is alive)

- C28 May I check, do you (possibly) live with your father?
Q1.01 1 – yes..... go to C33
2 – no proceed with C29
- C29 Does your father live alone or do other people live in his household?
Q5.75 1 – alone go to C31
2 – other people in the household..... proceed with C30
other:
3 – in group quarters such as care or healthcare facilities..... proceed with C31
4 – do not know Go to C31
- C30 With whom does he live?
Q5.75 Interviewer: Check all that apply
1 – wife/partner/cohabiting partner
2 – respondent’s brother/brothers
3 – respondent’s sister/sisters
4 – husband’s/partner’s/cohabiting partner’s child/children
5 – a relative
6 – a friend
7 – others in group quarters, such as care or healthcare facility
8 – others
9 – Living again with respondent’s mother
- C31 How long does it take to get from your home to your father’s residence?
Q5.77 |__|__| hours
|__|__| minutes
77 – Father lives abroad (volunteered)
- C32a How often do you see your father?
Q5.78 |__|__|__| times per
- C32b 1 – week
Q5.78 2 – month
3 – year
- C33
Q5.79 How satisfied are you with the relationship with your father? On scale from 0 to 10 where 0 means 'not at all satisfied' and 10 means 'completely satisfied'
Scale 0-10
Value: _____
- C34 Is your father limited in carrying out normal everyday activities because of physical or
Q5.76 psychological health problems or disabilities?
1 – yes
2 – no

Childhood and parental home

Introduction:

Next are some more questions about your childhood.

C35a Did you live mostly in Sweden or abroad during your childhood, meaning up
Q5.108 until you were 15 years old?

1 – Sweden go to C35c

2 – Abroad proceed with C35b

C35b In what country?

Q5.108 Country as exact answer: _____ go to C36

C35c In what municipality did you mostly live during your childhood?

Municipality as exact answer: _____

IF DO NOT KNOW go to C35d

All other go to checkpoint before C36

C35d In what county did you mostly live during your childhood?

County as exact answer: _____

Checkpoint

If respondent's biological or adoptive parents never lived together (C09 = 3)

.....Go to C37

Otherproceed with C36

C36 Did you live with both of your biological or adoptive parents during most of your
Q5.109 childhood?

1 – yes go to C38

2 – no proceed with C37

Interviewer: Childhood means up until age 15

C37 With whom did you live at that time?

Q5.110 Interviewer: Adoptive parents does not mean step parents who adopted the
respondent after marrying the respondent's biological or adoptive parent

1 – with biological or adoptive mother only Go to C39

2 – with biological or adoptive father only Go to C41

3 – with biological or adoptive mother and stepfather Go to C38

4 – with biological or adoptive father and stepmother Go to C38

5 – with grandparents Go to C43

6 – with relatives Go to C43

8 – with foster parents Go to C38

9 – in a boarding school Go to C43

10 – in an orphanage Go to C43

11 – in a juvenile home Go to C43

12 – other Go to C43

C. Parents, childhood and parental home

C38 Q5.111 How was the relationship between your [depending on the answer in C37, parents/mother and stepfather/ father and stepmother/ foster parents] during this period of time? On a scale from 0 to 10 where 'really bad' and 10 means 'absolutely perfect'

Scale 0-10

Value: _____

88 – do not know

C39A What was your [mother's/stepmother's/foster mother's] occupation or main activity when you were 15 years old?

1 – paid work..... Gå till C39B

2 – homemaker

3 – other, namely:_____

77 – does not know anything about the mother.....go to checkpoint before C41

88 – do not know

99– no answer

C39B Q5.114 What was her occupation when you were 15 years old?

_____ (Code: ISCO)

C40 Q5.115 What is your [mother's/stepmother's/foster mother's] highest completed education?

0 – No education

1 – Primary or the equivalent

2 – High school, vocational

3 – High School, academic

4 – Post-secondary, less than three years

5 – Post-secondary, three years or more

6 – People's college, short vocational education or the equivalent

8 – Other, namely:_____

Checkpoint: If C37 = 1 go to C43, others proceed with C41.

C41a What was your [father's/step father's/foster father's] occupation or main activity when you were 15 years old?

1 – paid work..... Go to C41B

2 – homemaker

3 – other, namely:_____

77 –does not know anything about the father.....go to C43

88 – do not know

99 – no answer

C41b Q5.112 What was his occupation when you were 15 years old?

_____ (Code: ISCO)

C. Parents, childhood and parental home

C42 Q5.113 What is your [father's/stepfather's/foster father's] highest completed education?

- 0 – No education
- 1 – Primary or the equivalent
- 2 – High school, vocational
- 3 – High School, academic
- 4 – Post-secondary, less than three years
- 5 – Post-secondary, three years or more
- 6 – People's college, short vocational education or the equivalent
- 8 – Other, namely: _____

C43 Q5.116 In what year and month did you for the first time start living away from your childhood home for at least three months?

Year |__|__|__|__| month |__|__|
7777 – Still living in childhood home

Siblings, grandparents

C44 Q5.106a How many brothers and sisters do you have?
Interviewer: Include only full siblings, not step siblings.
Include siblings who have died

|__|__| brothers
|__|__| sisters
0 = none Go to C46

C45 Q5.106b How many of your siblings are still alive?
Interviewer: If the respondent says "all", enter the same number as the number in C44. If the respondent has had one brother and/or a sister who had died and only gives one number, then ask one for each gender.

|__|__| brothers
|__|__| sisters

Checkpoint:

The respondent is younger than 65 yearsproceed with C46

C46 Q5.107 How many of your grandparents are still alive?
Interviewer: Include parents of the respondent's biological or adoptive parents, that is, at most four persons.

|__|__| living grandparents

D. PARTNERSHIP HISTORY

Introduction: Here are some questions about any previous partners that you have lived with or been married to.

D01 [If the respondent lives with a partner today): Excluding your current
Q3.33 [husband/wife/partner/cohabiting partner]] Have you previously lived together with someone as a couple or have you ever been married?

Interviewer: This and the following questions are to be asked whether the past partner is a man or a woman.

1 – yes proceed with next introduction

2 – no go to text before E01

Introduction: DTABINTRO

Now I will ask some questions about the partner or partners with whom you have lived. If you have lived with the same person more than once, you should count them as separate partnerships. Let us start with your first partnership

[Loop starts]

D02 What was the name of your first/second... partner?
[Given name]

D03a Were you married or registered partners?
QR3.35a 1 – yes..... proceed with D03b
2 – no go to D04

D03b What year and month did you marry?
QR3.35 year |__|__|__|__| month |__|__|

D04 What year and month did you start living together?
Q3.34 year |__|__|__|__| month |__|__|

D05 What year and month was [name] born?
QR3.36 year |__|__|__|__| month |__|__|

D06 What was the [her/his] highest level of education during the
Q3.37 time that you lived together?

0 – No education

1 – Primary or the equivalent

2 – High school, vocational

3 – High School, academic

4 – Post-secondary, less than three years

5 – Post-secondary, three years or more

6 – People’s college, short vocational training or the equivalent

8 – Other or do not know

9 – No answer

D. Partnership History

D07 Q3.38 When you moved in together, how many children did your partner have that were not yours?

Interviewer: Moved in together = started to live together; include adopted and foster children, even if they did not start living with respondent and partner)
_____ number of children

D08 Q3.43 Did your relationship end by separation or did your partner die?

- 1 – Separated
- 2 – Partner died
- 3 – Became LAT in the same relationship

D09 Q3.44 In what year and month did that happen?

year |_|_|_|_| month |_|_|

Checkpoint:

If [wife/husband/partner] deceased (see D08) then go to D13

If the relationship ended with separation, proceed with D10

D10 Q3.45 Did you and this partner have children together?

Interviewer: Includes common biological or adopted children

- 1 – yes.....proceed with D11
- 2 – no go to check before D12

D11 Q3.46 With whom did your children mainly stay during the first year after the separation?

Interviewer: DO NOT read the alternatives but multiple responses are possible if the children mostly lived at different places.

- 1 – with respondent
- 2 – with respondent's former wife/husband/partner
- 3 – 1 and 2 at different times
- 4 – with a relative
- 5 – with others
- 6 – at an orphanage
- 7 – started living independently
- 8 – already living independently
- 9 – other

D12 Q3.50 Who initiated the separation? Was it you, your partner or both?

- 1 – respondent
- 2 – respondent and partner together
- 3 – partner

D13 Q3.51 Have you had any other living-together partnership or been married afterwards (apart from your current partnership)?

- 1 – yes..... return to D02
- 2 – no proceed with D14

[Loop ends]

D. Partnership History

D14 Our survey also includes same-sex relationships. [Have any of the partners/Was
Q3.52a the partner] that you just talked about been of the same sex as you?
 1 – yes.....proceed with D15
 2 – no.....go to control before E01

D15 Who?
Q3.52b Interviewer: Indicate which person/persons

E. HEALTH AND WELLBEING

Introduction: Next are some questions about your health and your wellbeing

Health

- E01 How is your health in general?
Q7.01 Would you say that it is very good, good, fair, bad, or very bad?
 1 – very good
 2 – good
 3 – fair
 4 – bad
 5 – very bad
- E02 Do you have any chronic illness or other long-term difficulties with your health?
Q7.02a 1 – yes..... proceed with E03
 2 – no go to E04
- E03 How long have you had these illnesses or difficulties?
Q7.02b 1 – less than 6 months
 2 – 6 months to one year
 3 – 1 year to 5 years
 4 – 5 years to 10 years
 5 – 10 years or more
- E04 Are you limited in carrying out normal everyday activities because of physical or
Q7.03a psychological health problems or disabilities?
 1 – yes..... proceed with E05
 2 – no go to checkpoint before E06
- E05 How long have you been limited in carrying out such activities?
Q7.03b 1 – Less than 6 months
 2 – 6 months to one year
 3 – 1 year to 5 years
 4 – 5 years to 10 years
 5 – 10 years or more

Checkpoint:

- Is the respondent living with a partner or married? (A01=1 or 2 or 4)?
 Yes..... proceed with E06
 No go to E07
- E06 And your partner, is he/she limited in carrying out normal everyday activities
Q1.18 because of physical or psychological health problems or disabilities?
Q3.26a 1 – yes
 2 – no

Care from others

Checkpoint:

Is the respondent limited in carrying out normal everyday activities? (E04=1)
 Yes..... proceed with E07
 No go to E13

E07 Q7.04 Do you need regular help with personal care such as eating, getting out of bed, dressing, showering or using the toilet?
 1 – yes..... proceed with E08
 2 – no go to E13

E08 Q7.05 Over the last 12 months, have you received regular help with personal care from professional care-givers?
 1 – yes
 2 – no

E09 Q7.06 Over the last 12 months, have you [(if E08=1) also] received help from other people for whom providing such care is not a job?
 1 – yes..... proceed with E10
 2 – no go to E13

[Loop starts]

E10 Q7.07 From whom did you get this help?
 Interviewer: respondent can name up to 5 persons. DO NOT read the alternatives.

- 1 – partner
- 2 – respondent’s mother
- 3 – respondent’s father
- 4 – partner’s mother
- 5 – partner’s father
- 6 – son
- 7 – daughter
- 8 – stepson
- 9 – stepdaughter
- 10 – grandmother
- 11 – grandfather
- 12 – grandchild
- 13 – sister
- 14 – brother
- 15 – other relative
- 16 – friend, acquaintance, neighbour, colleague
- 17 – other person

Interviewer: Ask E11 for all persons mentioned in E10		Persons who helped the respondent					
		1	2	3	4	5	
E11 Q7.08	Did this person live in the same household as you at that time?	1 – yes 2 – no					

[Loop ends]

Care to others

E13 Q7.10 Now, a question about helping others. Apart from help that you may have given to small children, over the last 12 months have you given people regular help with personal care such as eating, getting out of bed, dressing, showering or using the toilet?

Interviewer: NOTE! Does not mean help that the respondent may provide in her/his job

- 1 – yes..... proceed with E14
- 2 – no..... go to E16

[Loop starts]

E14 Whom have you helped?

Q7.11 Interviewer: respondent can list up to five persons. DO NOT read the alternatives.

- 1 – partner
- 2 – respondent’s mother
- 3 – respondent’s father
- 4 – partner’s mother
- 5 – partner’s father
- 6 – son
- 7 – daughter
- 8 – stepson
- 9 – stepdaughter
- 10 – grandmother
- 11 – grandfather
- 12 –grandchildren
- 13 – sister
- 14 – brother
- 15 – other relative
- 16 – friend, relative, neighbor, colleague
- 17 – other person

Interviewer: Ask E15 for all persons mentioned in E14		Persons who assisted the respondent				
		1	2	3	4	5
E15 Q7.12 Did you and this person live in the same household at that time?	1 – yes 2 – no					

[Loop ends]

Emotional support

E16 Q7.13 Next are some questions about your personal feelings. Over the last 12 months, have you talked to anyone about your personal feelings?

- 1 – yes..... proceed with E17
- 2 – no..... go to E19

[Loop starts]

E17 Q7.14 With whom did you talk most about such things during the last 12 months?

Interviewer: respondent can name up to 5 persons. DO NOT read the alternatives.

- 1 – partner
- 2 – respondent’s mother
- 3 – respondent’s father
- 4 – partner’s mother
- 5 – partner’s father
- 6 – son
- 7 – daughter
- 8 – stepson
- 9 – stepdaughter
- 10 – grandmother
- 11 – grandfather
- 12 – grandchild
- 13 – sister
- 14 – brother
- 15 – other relative
- 16 – friend, relative, neighbour, colleague
- 17 – other person

Interviewer: Ask E18 for each of the persons mentioned in E17		Persons who the respondent have spoken to				
		1	2	3	4	5
E18 Q7.15 Did you and this person live in the same household at that time?	1 – yes 2 – no					

[Loop ends]

E19 Q7.16 Apart from anything that may be a part of your work, has anyone during the last 12 months spoken to you about their personal feelings?

- 1 – yes..... proceed with E20
- 2 – no go to F01

E20 Q7.17 How many persons have spoken to you about their personal feelings during the last 12 months?

|_|_|_| persons

E21 Q7.18 How many of these lived in the same household as you at that time?

|_|_|_| persons

Interviewer: possible to answer 0 here

F.FERTILITY

Checkpoint:

Respondent is a woman younger than 45 years old or the partner is a woman younger than 45 years old... .. Go to F01
 Respondent is a single man or a man with a male partner..... Go to F02
 Other..... Go to text before G01

Introduction: Next are some questions about having children and pregnancy.

F01 First may I check whether [you/your partner] is currently pregnant?
 Q6.02 1 – yes..... proceed with next text
 2 – no..... go to F02
 3 – maybe, do not yet know proceed with next text

Text: Thank you and congratulations; the questions that I would have asked are no longer relevant so instead we will proceed to questions about your education and work.

Go to G01.

F02 First I would like to know if you want to have a (another) child now?
 Q6.11 1 – yes..... proceed with F03
 2 – no..... proceed with F03
 3 – not sure proceed with F03
 4 – not able to have children go to F04

F03 For some people, it is not physically possible to have children. As far as you
 Q6.12 know, is it physically possible for you, yourself, to have children/more children?
 Would you say definitely not, probably not, probably yes or definitively yes?
 1 – definitely not..... proceed with F04
 2 – probably not..... proceed with F04
 3 – probably yes go to checkpoint before F06
 4 – definitely yes go to checkpoint before F06
 8 – do not know go to checkpoint before F06

F04 Have you had an operation that makes it impossible for you to have children/more
 Q6.13a children?
 1 – yes..... proceed with F05
 2 – no..... go to checkpoint before F06

F05 In what year and month did you have this operation?
 Q6.13b year |__|__|__|__| month |__|__|

Checkpoint:

Does the respondent have a husband/wife/cohabiting partner/partner?[A01=1,2,4,5 or A10=1]
 Yes..... proceed with F06
 No go to checkpoint before F10

F. Fertility

F06
Q6.15 Couples do not always have the same views about how many children they want and when. Does your partner want a (another) child right now?

- 1 – yes..... proceed with F07
- 2 – no..... proceed with F07
- 3 – partner is unsure proceed with F07
- 4 – partner is not able to have children go to F08
- 97 – do not know proceed with F07

F07
Q6.16 Do you think that it is physically possible for your current partner to have children if he/she wanted to? Would you say definitely not, probably not, probably yes or definitely yes?

- 1 – Definitely not..... proceed with F08
- 2 – Probably not proceed with F08
- 3 – Probably yes go to checkpoint before F10
- 4 – Definitely yes go to checkpoint before F10

F08
Q6.17a Has your partner had an operation that makes it impossible for him/her to have children/more children?

- 1 – yes..... proceed with F09
- 2 – no..... go to checkpoint before F10

F09
Q6.17b In what year and month did [he/she] have this operation?
year |__|__|__|__| month |__|__|

Plans to have children

Checkpoint:

- Did the respondent answer 1 or 2 on F03 or F07?
- Yes..... go to F11
- No proceed with F10

F10
Q6.22 [(if 2 on F02): Even if you do not want (another) child now,] Do you plan to have a (another) child within the next three years? Would you say definitely not, probably not, probably yes or definitely yes?

- 1 – definitely not
- 2 – probably not
- 3 – probably yes
- 4 – definitely yes

F11
Q6.23 Do you plan to adopt or apply for adoption or take a foster child within the next three years? Would you say definitely not, probably not, probably yes or definitely yes?

- 1 – definitely not
- 2 – probably not
- 3 – probably yes
- 4 – definitely yes

Checkpoint:

Did the respondent answer 3 or 4 on any of the prior two questions (F10 and/or F11)?

Yes..... go to F14

No..... proceed with F12

F12
Q6.24 Supposing you do not have a/another child during the next three years, do you plan to have (more) children at all? Would you say definitely not, probably not, probably yes or definitely yes?

1 – definitely not

2 – probably not

3 – probably yes

4 – definitely yes

Checkpoint:

Did the respondent answer 3 or 4 on any of the prior four questions (F10/ F11/F12)?

Yes..... proceed with F14

No..... go to G01

F14
Q6.25 Would you prefer to have a boy or a girl?

1 – boy

2 – girl

3 – it does not matter

G. RESPONDENTS EDUCATION AND OCCUPATION

Education and occupation

Introduction:

Next come some questions about your background, including language, education and occupation.

G01 What language was the first that you learned to speak, Swedish or some other
Q1.08 language? If other language: Which language?

Interviewer: Two languages possible

1 – Swedish

2 – Other: _____

2b – Other 2: _____

G02a What language do you usually speak at home or with your closest family?

Q1.09 1 – Swedish go to G02b

2 – Other proceed with G02atxt

G02atxt Which language: _____

Q1.09

G02b Do you usually speak more than one language at home or with your closest
Q1.09 family?

1 – yes proceed with G02c

2 – no go to checkpoint before G03

G02c Which language is the second most frequent you speak then?

Q1.09 1 – Swedish go to checkpoint before G03

2 – Other proceed with G02ctxt

G02ctxt Which language?: _____

Q1.09

Checkpoint:

Education information found in register proceed with G03reg

No education information found in register go to G03

G03reg Here at Statistics Sweden there is an educational registry for the entire Swedish
population and it lists your highest attained education as...

- ... [SUN2000 Nivå Txt]

- ...[SUN2000 Inriktning Txt]

-

Is this correct?

1 – yes proceed with G05

2 – no go to G03

G. Respondents education and occupation

- G03
QR1.48 What is the highest level of education you have completed?
0 – No education
1 – Primary school or equivalent go to G05
2 – High school, vocational
3 – High school, academic
4 – Post-secondary education, less than three years
5 – Post-secondary education, three or more years
6 – People’s college, short vocational education or equivalent
8– Other, namely: _____
- G04
QR1.49 What was the main subject matter of these studies?
Interviewer: Exact answer: _____
- G05
QR1.50 What year and month did you complete your studies?
year |__|__|__|__| month |__|__|
- G06
Q1.51 Are you currently studying?
Interviewer: Not study circles or similar
1 – yes..... go to G08
2 – no proceed with G07
- G07
Q1.52 Do you plan to begin studying again within the next three years? Would
you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes
- G08
Q1.13 What are you mainly doing at present? Are you employed,
self-employed, unemployed, [(if respondent under 50 years old) student], [(if
respondent is over 50 years old) retired, or something else?

Interviewer: If other, code what or write in text
1 – employedgo to text before G30
2 – self-employedgo to text before G30
3 – unemployedgo to G15
4 – studentgo to G17
5 – retired.....go to G20

Other:
6 – parental leave.....proceed with G09
7 – sick leavego to G22
8 – homemakergo to G23
9 – other, what: _____go to G29

Questions to those who are on parental leave

G09 In what year and month did you start your parental leave?
Q8.03 year |__|__|__|__| month |__|__|

G10 How satisfied are you with being on parental leave? On a scale from 0 to 10
Q8.04 where 0 equals 'not at all satisfied' and 10 equals 'completely satisfied'

Scale 0-10

Value: _____

G11 Is your leave full time or part time?
Q8.05b 1 – full-time
 2 – part-time

G12 Do you have the opportunity to resume your work after your parental
Q8.06 leave has ended?
 1 – yes
 2 – no

G13 Do you plan to work after your parental leave has ended? Would you say
Q8.07a/b definitely not, probably not, probably yes or definitely yes?
 1 – definitely not
 2 – probably not
 3 – probably yes
 4 – definitely yes

Checkpoint:

If Yes on G12, go to text before G26
If No on G12, go to text before G29

Questions to the unemployed

G15 In what year and month did you become unemployed?
Q8.08 year |__|__|__|__| month |__|__|

G16 Did you have a job or your own business directly before becoming
Q8.11 unemployed?
 1 – yes..... go to text before G26
 2 – no go to G29

Questions to students

- G17 In what year and month did you start studying?
Q8.12 year |__|__|__|__| month |__|__|
- G18 Do you plan to complete your studies within the next three years?
Q8.14 Would you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes
- G19 Did you have a job or business directly before you began to study?
Q8.15 1 – yes go to text before G26
2 – no go to G29

Questions to the retired

- G20 In what year and month did you retire?
Q8.16 year |__|__|__|__| month |__|__|
- G21 Did you have a job or business directly before you retired?
Q8.19 1 – yes..... go to text before G26
2 – no go to G29

Questions to those on long term sick leave

Interviewer: Not employed or with own business

- G22 Did you have a job or business directly before going on sick leave?
Q8.21 1 – yes..... go to text before G26
2 – no go to G29

Questions to homemakers

- G23 Did you have a job or business directly before you became a homemaker?
Q8.25 1 – yes..... proceed with G24
2 – no go to G25
- G24 In what year and month did you become a homemaker?
Q8.22 year |__|__|__|__| month |__|__|
- G25 Do you plan to take a job or start a business within the next three years?
Q8.24 Would you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

Checkpoint:

If Yes on G23, go to text before G26
If No on G23, go to G29

Previous employment

Introduction:

Now follow some questions about your previous work. If you had two or more types of work, tell only about the one that took up most of your time.

G26 Q8.28 What was your last occupation? Please describe the principal activity you performed.

_____ (Code: ISCO)

G27 Q8.29 In this job were you employed or did you own your own business?

- 1 – employed
- 2 – own business

G28 Q8.30 What were the main reasons you stopped doing this work?

Interviewer: DO NOT read the alternatives. Code volunteered responses, more than one if given.

- 1 – laid off, fired
- 2 – early retirement
- 3 – retired
- 4 – contract ended/temporary employment
- 5 – sold/shut down own or family business
- 6 – got married
- 7 – had a child
- 8 – needed to look after elderly, sickly or physically handicapped person
- 9 – partner’s work required moving to another place
- 10 – started studying
- 11 – started military service
- 12 – own illness or physical handicap
- 13 – other reason. What: _____

Questions to those who answered that they do not work as their primary occupation

G29 Q8.31 Did you do any paid work during last week, either as an employee or as a business owner?

- 1 – yes..... proceed with G30
- 2 – no go to checkpoint before H01

Questions to those who are working

Introduction:

I would now like to ask a few questions about your current work. If you have two or more jobs, then tell me only about the one that takes up most of your time.

G30
Q8.32 What is your current occupation? Please describe the principal activity you perform.
_____ (Code: ISCO)

G31
Q8.33 In what year and month did you start this job?
year |__|__|__|__| month |__|__|

G32
Q8.34 Is your work full-time or part-time?
1 – full-time
2 – part-time

G33
Q8.35 How many hours per week do you normally work at this job, including overtime?
|__|__|__| hours per week

G34
Q8.36 Do you usually work away from home, at home, or part of the week at home and part away from home?
1 – usually away from home
2 – usually at home
3 – part of the week at home and part away from home

G35 Do you have regular or irregular work hours at your job?
Interviewer: Regular means roughly the same work schedule every week.
1 – Regular proceed with G36
2 – Irregular go to next checkpoint

G36
Q8.37 Do you work during the daytime, in the evening, at night or any other time?
1 – during the daytime
2 – in the evening
3 – at night

Other:
4 – early in the morning
5 – during weekends
6 – work schedule changes periodically
7 – two or more different periods every day
8 – other, what: _____

Checkpoint:

Q8.38 Is the respondent employed or a business owner?
Employed..... proceed with G37
Business owner..... go to G48

Questions to employees

- G37 How satisfied are you with your current job? On a scale from 0 to 10
Q8.39 where 0 equals 'not at all satisfied' and 10 equals 'completely satisfied'
Scale 0-10
Value: _____
- G38 Do you supervise or coordinate work for any personnel?
Q8.40 1 – yes
 2– no
- G39 At your work place, are your coworkers mostly men, women or is the distribution
Q8.41 about equal?
 1 – mostly men
 2 – mostly women
 3 – roughly equal share of men and women
 4 – work alone
- G40 Is the business or organization where you work private or public?
Q8.42 1 – private
 2 – public
 3 – other, what: _____
- G42 Does your employer allow flexible time arrangements for personal reasons, such
Q8.44 as adapting to children´s schedules?
 1 – yes / yes, to a certain degree
 2– no
- G43 Is your work contract permanent, fixed-term or temporary?
Q8.45 1 – permanent
 2 – fixed-term
 3 – temporary
- G45 How satisfied are you with job security? On a scale from 0 to 10
Q8.47 where 0 equals 'not at all satisfied' and 10 equals 'completely satisfied'
Scale 0-10
Value: _____
- G46 Do you plan to change jobs or start a business within the next three years?
Q8.48 Would you say definitely not, probably not, probably yes or definitely yes?
 1 – definitely not
 2 – probably not
 3 – probably yes
 4 – definitely yes

- G47 Do you plan to stop working within the next three years?
Q8.49 Would you say definitely not, probably not, probably yes or definitely yes?
Interviewer: By stop working we mean stop working for good.
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

Go to checkpoint before G53

Questions to the self-employed (business owners)

- G48 How satisfied are you with being a business owner? On a scale from 0 to 10
Q8.50 where 0 equals 'not at all satisfied' and 10 equals 'completely satisfied'

Scale 0-10

Value: _____

- G49 How many paid employees do you have?
Q8.51 Interviewer: Include family members who work for pay
Number of employees: |__|__|__|__|
0 – no paid employees

- G50 Next is a question about the expectations you have for your business during
Q8.52 the next three years. Do you think your business will grow and expand, keep
going as it is today, decline or be shut down?
1 – grow and expand
2 – keep going as it is today
3 – decline
4 – be shut down

- G51 Do you plan to start a new business or take a different job within the next three
Q8.53 years? Would you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

- G52 Do you plan to stop working within the next three years?
Q8.54 Would you say definitely not, probably not, probably yes or definitely yes?
1 – definitely not
2 – probably not
3 – probably yes
4 – definitely yes

Question to those who work and are over 50 years old

Checkpoint:

Is the respondent 50 years old or older and does not have main activity retired (G08)?

Yes..... proceed with G53

No go to G54

G53 Do you plan to retire within the next three years?

Q8.56 Would you say definitely not, probably not, probably yes or definitely yes?

Interviewer: Include all types of retirement except early retirement due to illness.

1 – definitely not

2 – probably not

3 – probably yes

4 – definitely yes

Additional jobs or business, those with main activity employee or business owner

G54 Do you currently earn money from an additional job or business? This could be,
Q8.60 for example, part-time work, odd jobs, paid household work, part-time self-employment, a small business, or part-time agriculture.

1 – yes..... proceed with G55

2 – no go to checkpoint before H01

G55 What kind of occupation is this?

Q8.61 _____(Code: ISCO)

G56 How many hours per week do you normally work in this additional activity,
Q8.62 including overtime?

|_|_|_|_| hours per week

G57 Is this additional activity paid employment or owning a business?

Q8.63 1 – paid employment

2 – owning a business

H. PARTNER'S EDUCATION AND OCCUPATION

Checkpoint:

Does respondent have a wife/husband/partner/cohabiting partner? (A01 = 1,2,4)

Yes..... proceed with H01

No go to I01

Introduction:

Now come some questions about your partner [name]

H01 What is the highest level of education your partner has completed?

QR3.08

0 – No education

1 – Primary school or equivalent..... go to H10

2 – High school, vocational

3 – High School, academic

4 – Post-secondary, less than three years

5 – Post-secondary, three years or more

6 – People's college, short vocational education or the equivalent

8 – Other, namely: _____

H02 Main subject matter of partner's studies:

QR3.05

Information from register; if

register data not available, information is missing

H10 Which language was the first that your partner learned to speak, Swedish or some
Q3.04 other language? If other language: Which language?

Interviewer: Two languages possible

1 – Swedish

2 – Other: _____

H11 Now I would like to ask some questions about what your partner is mainly doing
Q1.16 at present. Is [he/she] employed, self-employed, unemployed [(if partner under the
age of 50 years old] student], [(if partner over the age of 50 years old) retired] or
something else?

Interviewer: If other, code what or print in text

1 – employed go to text before H30

2 – self-employed go to text before H30

3 – unemployed go to H17

4 – student go to H19

5 – retired..... go to H21

Other:

6 – parental leave..... proceed to H12

7 – sick leave go to H23

8 – homemaker go to H24

9 – other, what: _____ go to H29

Questions to those whose partner is on parental leave

- H12 In what year and month did your partner start her/his parental leave?
Q9.03 year |__|__|__|__| month |__|__|
- H13 Is [she/he] on parental leave full-time or part-time?
Q9.04b 1 – full-time
 2 – part-time
- H14 Does [she/he] have the opportunity to resume work after [her/his] parental
Q9.05 leave has ended?
 1 – yes
 2 – no
- H15 Does [she/he] want to resume work after her/his parental leave has ended?
Q9.06a/b 1 – yes
 2 – no
 3 – partner does not know

Checkpoint:

- If Yes at H14, proceed to text prior to H26
If No at H14, proceed to text prior to H29

Questions to those whose partner is unemployed

- H17 In what year and month did [he/she] become unemployed?
Q9.07 year |__|__|__|__| month |__|__|
- H18 Did your partner have a job or business directly before she/he became
Q9.08 unemployed?
 1 –yes..... go to intro before H26
 2 – no go to H29

Questions to those whose partner is a student

- H19 In what year and month did [she/he] start studying?
Q9.09 year |__|__|__|__| month |__|__|
- H20 Did your partner have a job or business directly before he/she started studying?
Q9.10 1 –yes..... go to text before H26
 2 – no go to H29

Questions to those whose partner is retired

H21 In what year and month did [she/he] retire?

Q9.11 year |__|__|__|__| month |__|__|

H22 Did your partner have a job or business directly before he/she retired?

Q9.12

1 – yes..... go to text before H26

2 – no..... go to H29

Questions to those whose partners are on long-term sick-leave

Interviewer: Not those who are unemployed or who have a business.

H23 Did your partner have a job or business directly before he/she went on sick
Q9.13 leave?

1 – yes..... go to text before H26

2 – no..... go to H29

Questions to those whose partner is a homemaker

H24 Did your partner have a job or business before he/she became a homemaker?

Q9.15

1 – yes..... proceed with H25

2 – no..... go to H29

H25 In what year and month did he/she become a homemaker?

Q9.14

year |__|__|__|__| month |__|__|

Partner's previous employment

Introduction:

Now come some questions about your partner's previous work. If [she/he] had two or more types of work, please tell about the one that took up most of [her/his] time.

H26 What was [his/hers] last occupation? Please describe the principal activity
Q9.17 [he/she] performed.

_____ (Code: ISCO)

H27 In this job, was [he/she] an employee or business owner?

Q9.18

1 – employee

2 – business owner

H28 Q9.19 What were the main reasons your partner stopped doing this work?

Interviewer: DO NOT read the alternatives. Code volunteered answers, more than one if given

- 1 – laid off, fired
- 2 – early retirement
- 3 – retired
- 4 – contract ended/temporary employment
- 5 – sold/shut down own or family company
- 6 – married
- 7 – had children
- 8 – needed to take care of elderly, sick or disabled person
- 9 – respondent's work required moving to another place
- 10 – started studying
- 11 – started military service
- 12 – own illness or disability
- 13 – other reason. What: _____

Questions to those who did not declare partner working

H29 Q9.20 Did your partner do any paid work during last week, either as an employee or as a business owner?

- 1 – yes..... proceed with H30
- 2 – no..... go to I01

Questions to those whose partners are working

Introduction:

Now I would like to ask some questions about your partner's current work. If [she/he] has two or more types of work, tell only about the one that takes up most of her/his time.

H30 Q9.21 What is your partner's current occupation? Please describe the principal activity [she/he] performs

_____ (Code: ISCO)
8888 – knows nothing about partner's occupation..... proceed to I01

H31 Q9.22 Is [her/his] work full-time or part-time?

- 1 – full-time
- 2 – part-time

H32 Q9.23 How many hours per week does [she/he] normally work normally work in this job, including overtime?

|_|_|_| hours per week

I. Övriga hushållsmedlemmar

H33
Q9.24 Does [NAME] usually work away from home, at home, or part of the week at home and part away from home?
1 – usually away from home
2 – usually at home
3 – part of the week at home and part away from home

H34 Does your partner have regular or irregular working hours at her/his work?
Interviewer: Regular means virtually the same schedule each week
1 – Regular proceed with H35
2 – Irregular proceed to next checkpoint

H35
Q9.25 Does [she/he] work during the daytime, in the evening, at night or any other time?
1 – during the daytime
2 – in the evening
3 – at night

Other:

- 4 – early in the morning
- 5 – during the weekend
- 6 – work hours change periodically
- 7 – two or several different periods each day
- 8 – other, what: _____

Checkpoint:

Q9.26 Is the respondent's partner an employee or a business owner?
Employee proceed with H36
Business owner (self-employed) go to H40

Questions to those whose partners is an employee

H36
Q9.27 Does your partner supervise or co-ordinate the work of any personnel?
1 – yes
2 – no

H37
Q9.28 Is the business or organization where [she/he] works public or private?
1 – private
2 – public
3 – other, what: _____
4 – do not know

H39
Q9.30 Does your partner's employer allow flexible time arrangements for personal reasons, such as adapting to children's schedules?
1 – yes
2 – no

Go to H41

Questions to those whose partner is self-employed (own business)

- H40 How many paid employees does your partner's business have?
Q9.31 Interviewer: Include family members who work for pay
Number of employees: |__|__|__|__|
0 – no paid employees

Partner's additional job or business

- H41 Does your partner currently earn money from an additional job or business?
Q9.32 This could, for example, be a part-time job, odd jobs, paid household work,
running a small business or part-time agriculture
1 – yes..... proceed with H42
2 – no go to I01
- H42 Which type of activity is this?
Q9.33 _____(Code: ISCO)
- H43 How many hours per week does [she/he] normally work in her/his additional job,
Q9.33 including overtime?
_____ hours per week
- H44 Is this additional activity paid employment or owning a business?
Q9.35 1 – paid employment
2 – owning a business

I. OTHER HOUSEHOLD MEMBERS

- I01 Are there any other persons in your household who have not yet been mentioned?
Q1.01 Interviewer: Not lodgers, persons in the same student hall, or such. Only persons within the household
1 – yes..... proceed with I02
2 – no go to J01

Interviewer instructions:

The question applies to all excluding persons below who have already been discussed earlier in the interview and should not be repeated here.

- 1 – Cohabiting partner or wife/husband
- 2 – Biological child with current partner
- 3 – Biological child with a former partner
- 4 – Stepchild
- 5 – Adopted child
- 6 – Foster child
- 7 – Biological or adoptive parent

Introduction:

If more than one then let us start with the oldest.

[Loop starts]

- I02 What is [his/her] name?
Q1.01 Given name: _____

Interviewer: If the name is typically male or female then enter the correct gender in I03 and proceed to I04.

- I03 Is that a man or a woman?
Q1.14 1 – man/boy
2 – woman/girl

- I04 What year and month was [NAME] born?
Q1.15b year |__|__|__|__| month |__|__|

- I05 How is [NAME] related to you?
Q1.01 8 – Step- or foster parent
9 – Parent-in-law
10 – Partner's step- or foster-parent
11 – Grandchild or great-grandchild (either respondent's or partner's)
12 – Grandparents or great-grandparents (either respondent's or partner's)
13 – Brother or sister
14 – Partner's brother or sister
15 – Child's partner
16 – Other relative to respondent
17 – Other relative to partner
18 – A friend
19 – Other person

Checkpoint:

Is that person 14 years or older? [See I04]

Yes..... proceed with I06

No go to I07

I06 What is [NAME] mainly doing at present? Is she/he employed, self-
Q1.16 employed, unemployed, [(if child under 50 years) student], [(if child over 50 years
old) retired] or something else?

1 – employed

2 – self-employed

3 – unemployed

4 – student

5 – retired

Other:

6 – parental-leave

7 – sick-leave

8 – homemaker

9 –other, what:_____

I07 Is [he/she] limited in carrying out normal everyday activities because of physical
Q1.18a or psychological health problems or disabilities?

1 – yes

2 – no

I08 Is there another person in the household that we have not yet talked about earlier
in the interview?

1 – yes..... go to I02 for next person

2 – no proceed with J01

[Loop ends]

J. HOUSEHOLD DWELLING

Introduction:

Now to finish up, some questions about the dwelling where you live.

J01 How many rooms are there in the dwelling?

Q1.19 Interviewer: Do not count kitchen, hallway, bathroom and other such spaces.
Count only rooms with windows.

Number of rooms: _____
777 = Respondent is homeless

J02 What is the approximate living floor space of the dwelling in square meters?

Q1.20 Interviewer: open question, mark one of the alternatives

- 1 – under 30 m²
- 2 – 30 to 39 m²
- 3 – 40 to 49 m²
- 4 – 50 to 59 m²
- 5 – 60 to 79 m²
- 6 – 80 to 99 m²
- 7 – 100 to 119 m²
- 8 – more than 119 m²

J03 In what year and month did you start living in this dwelling?

Q1.21 year |__|__|__|__| month |__|__|

J04 What form of tenancy do you have? Do you own, rent, is the dwelling a cooperative*, do you sublet or something else?

Q1.22

- 1 – own proceed to check before J05
- 2 – cooperative proceed to check before J05
- 3 – rent (tenant) proceed to check before J05
- 4 – sublet (sub-tenant) proceed to check before J05

Other:

- 5 – rent-free (through work or other.) go to J06
- 6 – other, what: _____ go to J06

*In a cooperative, the building is owned by an association of persons who individually own the right to live in a particular dwelling in the building.

Checkpoint:

Does the respondent live with a person over the age of 18?
(See A01, I04,)

- Yes..... proceed to J05
- No go to J06

J. Household residence

J05
Q1.23 Who owns or holds the [second-hand if J04=4] contract for the dwelling?

Interviewer: Multiple alternatives possible

- 1 – respondent
- 2 – respondent’s partner
- 3 – Other household member
- 4 – Other person outside of the household

J06
Q1.45 How satisfied are you with your dwelling? On a scale from 0 to 10 where 0 means “not at all satisfied” and 10 means “completely satisfied”

Scale 0-10

Value: _____

J07
Q1.46 Do you plan to move within the next three years? Would you say definitely not, probably not, probably yes or definitely yes?

- 1 – Definitely not..... go to K01
- 2 – Probably not go to K01
- 3 – Probably yes proceed to J08
- 4 – Definitely yes proceed to J08

J08
Q1.47 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 – Within the country but cannot say about municipality

J. CONTACT INFORMATION

K01 That's all the questions I have. Thank you very much for your time and patience.
Q1.115a You have been a great help. As we previously told you, you will receive a postal
questionnaire to fill in on your own. You will be able to decide for yourself
whether you want to do this through the internet or on paper and send it in to us.

Let me just check that the address we have for you is correct to ensure that I can
send out the postal questionnaire to the correct address. Is it correct that you will
be living at ...

INTERVIEWER REPORT

Interviewer instructions: enter the following information without asking for it.

K03 The interview finished at time: ____:____ the ____ / ____ - 20____
Q1.201

K04 Interruptions in the interview:
1 – at question number ... for ... minutes
2 – at question number ... for ... minutes
3 – at question number ... for ... minutes

K05 Overall, how willing was the respondent to answer the questions?
Q1.303 not willing at all 1 2 3 4 5 6 7 8 9 10 very willing

K06 How would you judge the information that the respondent provided?
Q1.304 not reliable at all 1 2 3 4 5 6 7 8 9 10 very reliable



Swedish families in time

Thank you for participating in the survey, *Swedish families in time*. The information you have provided in the telephone interview will give decision-makers and the public a better picture of family life in Sweden today and how it has changed and how it will continue to change in the future.

This questionnaire includes additional questions that are important for understanding family change but that take less time to answer than the interview. Most of the questions offer alternatives that you can simply choose. Your participation is, of course, voluntary, and you can refuse to answer single questions, but your answers can never be replaced by anyone else's!

You can choose to answer the questions on the Internet. You will find the questions at www.insamling.scb.se. Log in with the following user-id and password:

Userid:

Password:

If you choose instead to answer the questionnaire via the paper form, send it in the postage-paid envelope.

Your information is protected

Just as in the telephone interview in which you participated earlier, the information you provide is protected by the law on openness and secrecy (2009:400) together with the law on personal information (1998:204). Everyone who works with the survey is bound by confidentiality and the results that are presented never include any individual answers. The number at the top of the form allows Statistics Sweden to know who has answered and who should get a reminder. After Statistics Sweden has finished working on the data, all identifying information that would allow anyone to see to whom the information refers is removed before your answers are given to researchers at the Stockholm University Demography Unit, the Aging Research Center at Karolinska Institute, the Swedish National Data Service and the UNECE database held outside Sweden. In reports about the study's results your answers will be presented only as numbers in tables and figures, together with others' answers.

Do you want to know more about the survey?

If you have questions about the survey, you are welcome to contact the survey leader, Mohammad Sepahvand, Statistics Sweden in Örebro by telephone at 019-17 61 94 or by email to GGS@scb.se or you can call one of us listed below.

More information about the survey in Sweden and in other countries is found on the home page www.suda.su.se/ggs. After the survey has been completed, you will be able also to find overviews of the survey's results.

Thank you for participating in the survey. Your participation is important and of great help!

With warm regards,

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Instructions

The questionnaire will be read by machine. When you answer, therefore, we ask you to think about the following:

- Use a ballpoint pen with black or blue ink, not red. Don't use a pencil!

- Write numbers clearly:

1	2	3	4	5	6	7	8	9	0
---	---	---	---	---	---	---	---	---	---

- Write with clear and LARGE letters:

A	B	C	D	E	F	G	H	I	J
---	---	---	---	---	---	---	---	---	---

- Mark your answers with an X, like this,

X

NOT like this:

x

- If you want to change your answer, cover the entire box:
- If you want to write more text than the room in the rows or boxes allows, or if you want to explain or clarify anything:
 - Don't write between or near the answer boxes
 - Write instead on the comment page

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HOUSEHOLD INCOME AND EXPENDITURES

1. Does your household have access to the following items?

It does not matter whether the item is owned, rented, or otherwise provided for you.

	Yes 1	Would like but cannot afford 2	Do not have for other reasons 3
a. TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Video- or DVD-player	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Washing machine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Home Computer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Car available for private use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. A second car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. A second home (e.g. for vacationing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How easy or difficult is it for your household to make ends meet every month?

- 1 Very difficult
 2 Difficult
 3 Fairly difficult
 4 Fairly easy
 5 Easy
 6 Very easy

3. Is your household able to afford the following items, supposing you wanted them?

	Yes 1	No 2
a. Keeping your home adequately warm	<input type="checkbox"/>	<input type="checkbox"/>
b. Paying for a week's vacation away from home	<input type="checkbox"/>	<input type="checkbox"/>
c. Replacing worn-out furniture	<input type="checkbox"/>	<input type="checkbox"/>
d. Buying new, rather than second-hand clothes	<input type="checkbox"/>	<input type="checkbox"/>
e. Having friends or family for dinner at least once a month	<input type="checkbox"/>	<input type="checkbox"/>

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4. During the past 12 months, has your household had difficulty paying any of the following on time?

	Yes 1	No 2	Not Applicable 3
a. Rent for accomodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mortgage payments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Utility bills, such as for electricity, water and gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Payments for other credit purchases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Is there normally some money left in the household that you can save?

1 Ja
2 Nej

6. a) During the past 12 months, have you received money, assets, or good from a person outside the household?
Include property or inheritance but not birthday or Christmas gifts etc.

1 Yes
2 No → Proceed to Question 7a

b) Who has given you that?
Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

From whom?	Was this an Inheritance?	Approximately how much was the total cash value? (in SEK)
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr





7. a) During the last 12 months, have you given money, assets, or goods to a person outside the household?

Include property but not birthday or Christmas gifts etc.

1 Yes

2 No → Proceed to Question 8

b) To whom have you given that?

Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

To whom?

Approximately how much was the total cash value? (in SEK)

Grid for recording recipient information (10 columns).

Grid for recording cash value (10 columns).

kr

Grid for recording recipient information (10 columns).

Grid for recording cash value (10 columns).

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Grid for recording recipient information (10 columns).

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Grid for recording recipient information (10 columns).

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Grid for recording recipient information (10 columns).

Grid for recording cash value (10 columns).

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RETIREMENT

8. Are you retired?

- 1 Yes → Proceed to Question 12
 2 No

9. Now suppose that during the next three years you were to retire. Do you think the following aspects of your life would be better or worse?

Try to answer even if you do not currently have plans to retire

	Much better	Somewhat better	Neither better nor worse	Somewhat worse	Much worse	Not applicable
	1	2	3	4	5	6
a. The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Your quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. The closeness between you and your partner, if any	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. The closeness between you and your children and any grandchildren	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. How much would your decision to retire within the next three years depend on the following?

Try to answer even if you do not currently have plans to retire

	Not at all	A little	Quite a lot	A great deal
	1	2	3	4
a. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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11. Although you may feel that the decision to retire is yours alone. It is likely that others have opinions about it. To what extent do you agree or disagree with the following statements about how others may feel about you retiring during the next three years?		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable
		1	2	3	4	5	6
a.	Your partner thinks that you should retire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Your children think that you should retire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Most of your friends think that you should retire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Most of your relatives think that you should retire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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HOUSEHOLD ORGANISATION

12. Who usually performs the following tasks in your household?

	Always you	Usually you	You and your partner equally	Usually your partner	Always your partner	Usually someone else in the household	Usually someone outside the household
	1	2	3	4	5	6	7
a. Preparing meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Doing the dishes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Shopping for food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Vacuum-cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Doing small repairs in and around the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Paying bills and keeping finances in order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Organising joint social activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. How satisfied are you with the division of household tasks between you and your partner?
 Mark your answer on a scale of 0 to 10 where 0 means "not at all satisfied", 10 means "completely satisfied"

Not at all satisfied									Completely satisfied	
0	1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. Which people give your household regular help with household tasks?
 Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

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1 Receive no help



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15. Does your household regularly pay someone to do housework?											
1 <input type="checkbox"/> Yes											
2 <input type="checkbox"/> No											
16. Are there children younger than 14 in your household?											
1 <input type="checkbox"/> Yes											
2 <input type="checkbox"/> No → Proceed to question 19											
17. Below are various tasks that may need to be done when there are children in the household. In your household who usually perform the following?											
	Always you	Usually you	You and your partner equally	Usually your partner	Always your partner	Usually someone else in the household	Usually someone outside the household	Not applicable			
	1	2	3	4	5	6	7	8			
a.	Dressing the children or seeing that they are properly dressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Putting the children to bed or seeing that they go to bed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c.	Staying at home with a sick child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Playing with the children and/or taking part in leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e.	Helping the children with homework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f.	Taking the children to/from school, day care centre, babysitter or leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. How satisfied are you with the way childcare tasks are divided between you and your partner? Mark your answer on a scale from 0 to 10 where 0 means "not at all satisfied", 10 means "completely satisfied"											
	Not at all satisfied									Completely satisfied	
	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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19. Now follow some questions about decision-making. Who makes decisions about the following issues in your household?

	Always you	Usually you	You and your partner equally	Usually your partner	Always your partner	Usually someone else in the household	Usually someone outside the household	Not applicable
	1	2	3	4	5	6	7	8
a. Routine purchases for the household	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Occasional more expensive purchases for the household	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. The amount of time you spend in paid work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. The amount of time your partner spends in paid work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. The way your children are raised	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Social life and leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

20. How do you and your partner divide your income?

1 You manage all the money and give your partner a share

2 Your partner manages all the money and gives you a share

3 You pool all the money and take out what you yourselves think you need

4 You pool some of the money and keep the rest separate

5 You each keep your own money separate

6 Another way, specify:

21. Within the last 12 months, how often did you and your partner have disagreement about the following?

	Never	Seldom	Sometimes	Frequently	Very frequently	Not applicable
	1	2	3	4	5	6
a. Household chores	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Use of leisure time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Relations with friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Relations with parents and in-laws	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Child-raising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Drinking alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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22. How satisfied are you with the relationship between you and your partner?										
<i>Mark your answer on a scale from 0 to 10 where 0 means "not at all satisfied", 10 means "Completely satisfied"</i>										
Not at all satisfied										Completely satisfied
0	1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Are you considering breaking-up/separating from your partner during the next three years?										
<i>Note! Select only one alternative.</i>										
1	<input type="checkbox"/> Definitely not									
2	<input type="checkbox"/> Probably not									
3	<input type="checkbox"/> Yes, probably									
4	<input type="checkbox"/> Yes, definitely									
24. Even though it may seem outlandish, suppose that you were to separate from your partner within the next three years. Do you think that the following areas of your life would be better or worse?										
		Much better	Somewhat better	Neither better nor worse	Somewhat worse	Much worse	Not applicable			
		1	2	3	4	5	6			
a.	The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b.	Your employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c.	Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
d.	Your sexual life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
e.	What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
f.	Your quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
g.	The welfare of your children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
h.	The closeness between you and your children and any grandchildren	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
25. How much would your decision to separate within the next three years depend on the following things?										
		Not at all	A little	Quite alot	A great deal					
		1	2	3	4					
a.	Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
b.	Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
c.	Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
d.	Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

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HEALTH AND WELL-BEING

26. Below are some statements about how you are currently feeling. Please indicate to what extent recently you have experienced the following.

	Yes 1	More or less 2	No 3
a. There are plenty of people that you can lean on in case you have a problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. You experience a sense of emptiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You miss having people around	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. There are many people that you can count on completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Often, you feel rejected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. There are enough people that you feel close to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. During the previous week, how frequently did you experience the following feelings?

	Seldom or never 1	Sometimes 2	Often 3	Most or all of the time 4
a. Had difficulty shaking off the blues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Felt depressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Thought that your life has been a failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Felt fearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Felt lonely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Had crying spells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Felt sad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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28. How much control do you feel you will have over the following areas of your life during the next three years?					
	None at all	Little	Quite a lot	A great deal	Not applicable
	1	2	3	4	5
a.	Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Your family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Have you had paid employment during the last three months?					
1	<input type="checkbox"/> Yes				
2	<input type="checkbox"/> No → Proceed to question 31				
30. How often have the following things happened to you during the past three months?					
	Several times a week	Several times a month	Once or twice a month	Never	
	1	2	3	4	
a.	You have come home from work too tired to do household work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	It has been difficult for you to fulfill family responsibilities because of your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	You have arrived at work too tired to function well because of your household work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	You have had difficulty concentrating at work because of your family responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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VALUE ORIENTATION AND ATTITUDES

31. Now a few questions about your view and attitude toward family life and how society has changed. Do you agree or disagree with the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a. Marriage is an outdated institution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It is all right for a couple to live together even if they are not interested in marrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Marriage is a lifetime relationship and should never be ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. It is all right for a married couple to separate if the marriage is not working, even if they have children together	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. A woman has to have children in order to be fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. A man has to have children in order to be fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. A child needs a home with both a mother and father to have a good upbringing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. A woman can have a child as a single parent even if she doesn't want to have a stable relationship with a man	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. A man can have a child as a single parent even if he doesn't want to have a stable relationship with a woman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. When children turn about 18-20 years old, they should start to live independently of their parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Homosexual couples should have the same rights as heterosexual couples do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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32. Please indicate for each of the following areas whether you think that it is mainly a task for society or the family.						
	Exclusively society	More society than family	Equally society as family	More family than society	Exclusively family	
	1	2	3	4	5	
a.	Care for older persons at their home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Care for pre-school children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Care for schoolchildren during after-school hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Financial support for older people who live below subsistence level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Financial support for younger people with children who live below subsistence level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Do you agree or disagree with the following statements?						
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
	1	2	3	4	5	
a.	Grandparents should provide for their grandchildren if the parents are unable to do so	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Parents ought to provide financial help for their adult children when they are having financial difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	If their adult children were in need then parents should adjust their own lives in order to help them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Below are some statements regarding who should take care of elderly parents. Do you agree or disagree with the following statements?						
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
	1	2	3	4	5	
a.	Children should take responsibility of their parents if needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Children should adjust their working life to the needs of their parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	When parents are in need of care, daughters should take more responsibility than sons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Children ought to provide financial support to their parents when they are having financial difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Children should let their parents live with them when they can no longer look after themselves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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35. Do you agree or disagree with the following statements?		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	In a couple it is better if the man to be older than the woman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	If the woman earns more than her partner, it is not good for the relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	On the whole, men are better political leaders than women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Women should be able to decide how to spend the money they earn without having to ask their partner's permission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Looking after the home and family can be equated with working for pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	A pre-school child is likely to suffer if his/her mother is working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g.	Children often suffer because their fathers concentrate too much on work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.	If parents divorce it is better for the child to stay with the mother than with the father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	When jobs are scarce, men should have more right to a job than women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j.	When jobs are scarce, younger people should have more right to a job than older people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k.	When jobs are scarce, people with children should have more right to a job than childless people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l.	When jobs are scarce, native-born people should have more right to a job than foreign-born people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Generally speaking, do you think that most people can be trusted or do you think that you need to be very careful in dealing with other people?						
1 <input type="checkbox"/> Most people can be trusted						
2 <input type="checkbox"/> Need to be very careful						
37. Do you think that most people would try to take advantage of you if they got a chance or would they try to be honest and fair?						
1 <input type="checkbox"/> Would take advantage						
2 <input type="checkbox"/> Would try to be honest and fair						

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38. Which religious denomination do you adhere to?

- 01 Church of Sweden
 02 Catholic Church
 03 An orthodox church or congregation
 04 One of the Swedish free churches
 05 Other Christian movement or group
 06 Judaism
 07 Islam
 08 Hinduism
 09 Buddhism

10 Other religion, specify:

- 11 No religious denomination
 12 Do not know

39. How often do you attend religious services?*Do not count weddings, baptisms, funerals or the like.*

- 1 Several times a week
 2 About once a week
 3 1-3 times a month
 4 1-3 times every three months
 5 Less than once every three months
 6 Never

40. Do you agree or disagree with the following statements about religious ceremonies?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a. It is important for an infant to become part of a religion through baptism or other equivalent religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It is important to marry in a religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. It is important that a funeral is a religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you for participating in the survey!

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Swedish families in time

Thank you for participating in the survey, *Swedish families in time*. The information you have provided in the telephone interview will give decision-makers and the public a better picture of family life in Sweden today and how it has changed and how it will continue to change in the future.

This questionnaire includes additional questions that are important for understanding family change but that take less time to answer than the interview. Most of the questions offer alternatives that you can simply choose. Your participation is, of course, voluntary, and you can refuse to answer single questions, but your answers can never be replaced by anyone else's!

You can choose to answer the questions on the Internet. You will find the questions at www.insamling.scb.se. Log in with the following user-id and password:

Userid:

Password:

If you choose instead to answer the questionnaire via the paper form, send it in the postage-paid envelope.

Your information is protected

Just as in the telephone interview in which you participated earlier, the information you provide is protected by the law on openness and secrecy (2009:400) together with the law on personal information (1998:204). Everyone who works with the survey is bound by confidentiality and the results that are presented never include any individual answers. The number at the top of the form allows Statistics Sweden to know who has answered and who should get a reminder. After Statistics Sweden has finished working on the data, all identifying information that would allow anyone to see to whom the information refers is removed before your answers are given to researchers at the Stockholm University Demography Unit, the Aging Research Center at Karolinska Institute, the Swedish National Data Service and the UNECE database held outside Sweden. In reports about the study's results your answers will be presented only as numbers in tables and figures, together with others' answers.

Do you want to know more about the survey?

If you have questions about the survey, you are welcome to contact the survey leader, Mohammad Sepahvand, Statistics Sweden in Örebro by telephone at 019-17 61 94 or by email to GGS@scb.se or you can call one of us listed below.

More information about the survey in Sweden and in other countries is found on the home page www.suda.su.se/ggs. After the survey has been completed, you will be able also to find overviews of the survey's results.

Thank you for participating in the survey. Your participation is important and of great help!

With warm regards,

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Instructions

The questionnaire will be read by machine. When you answer, therefore, we ask you to think about the following:

- Use a ballpoint pen with black or blue ink, not red. Don't use a pencil!

- Write numbers clearly:

1	2	3	4	5	6	7	8	9	0
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- Write with clear and LARGE letters:

A	B	C	D	E	F	G	H	I	J
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- Mark your answers with an X, like this,

X

NOT like this:

x

- If you want to change your answer, cover the entire box:
- If you want to write more text than the room in the rows or boxes allows, or if you want to explain or clarify anything:
 - Don't write between or near the answer boxes
 - Write instead on the comment page





HOUSEHOLD INCOME AND EXPENDITURES

1. Does your household have access to the following items?			
<i>It does not matter whether the item is owned, rented, or otherwise provided for you.</i>			
		Yes	Would like but cannot afford
		1	2
			Do not have for other reasons
			3
a.	TV	<input type="checkbox"/>	<input type="checkbox"/>
b.	Video or DVD-player	<input type="checkbox"/>	<input type="checkbox"/>
c.	Washing machine	<input type="checkbox"/>	<input type="checkbox"/>
d.	Microwave	<input type="checkbox"/>	<input type="checkbox"/>
e.	Home Computer	<input type="checkbox"/>	<input type="checkbox"/>
f.	Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>
g.	Car available for private use	<input type="checkbox"/>	<input type="checkbox"/>
h.	A second car	<input type="checkbox"/>	<input type="checkbox"/>
i.	A second home (e.g. for vacation)	<input type="checkbox"/>	<input type="checkbox"/>
j.	Internet	<input type="checkbox"/>	<input type="checkbox"/>
2. How easy or difficult is it for your household to make ends meet every month?			
1	<input type="checkbox"/> Very difficult		
2	<input type="checkbox"/> Difficult		
3	<input type="checkbox"/> Fairly difficult		
4	<input type="checkbox"/> Fairly easy		
5	<input type="checkbox"/> Easy		
6	<input type="checkbox"/> Very easy		
3. Is your household able to afford the following items, supposing you wanted them?			
		Yes	No
		1	2
a.	Keeping your home adequately warm	<input type="checkbox"/>	<input type="checkbox"/>
b.	Paying for a week's vacation away from home	<input type="checkbox"/>	<input type="checkbox"/>
c.	Replacing worn-out furniture	<input type="checkbox"/>	<input type="checkbox"/>
d.	Buying new, rather than second-hand clothes	<input type="checkbox"/>	<input type="checkbox"/>
e.	Having friends or family for dinner at least once a month	<input type="checkbox"/>	<input type="checkbox"/>

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4. During the past 12 months, has your household had difficulty paying any of the following on time?

	Yes 1	No 2	Not applicable 3
a. Rent for accomodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mortgage payments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Utility bills, such as for electricity, water and gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Payments for other credit purchases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Is there normally some money left over in the household that you can save?

1 Yes
2 No

6. a) During the last 12 months, have you received money, assets, or goods from a person outside the household?
Include property or inheritance but not birthday or Christmas gifts etc.

1 Yes
2 No → Proceed to question 7a

b) Who has given you that?
Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

From whom?	Was this an Inheritance?	Approximately how much was the total cash value? (in SEK)
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr





7. a) During the last 12 months, have you given money, assets or goods to a person outside the household?

Include property but not birthday or Christmas gifts etc.

1 Yes

2 No → Proceed to question 8

b) To whom have you given that?

Record up to five persons by their relation to you, e.g. parent, sibling, children, friend etc.

To whom?

Approximately how much was the total cash value? (in SEK)

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RETIREMENT

8. Are you retired?

- 1 Yes → Proceed to Question 12
 2 No

9. Now suppose that during the next three years you were to retire. Do you think the following aspects of your life would be better or worse?

Try to answer even if you do not currently have plans to retire

	Much better	Somewhat better	Neither better nor worse	Somewhat worse	Much worse	Not applicable
	1	2	3	4	5	6
a. The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Your quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. The closeness between you and your partner, if any	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The closeness between you and your children and any grandchildren	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. How much would your decision to retire within the next three years depend on the following?

Try to answer even if you do not currently have plans to retire

	Not at all	A little	Quite a lot	A great deal
	1	2	3	4
a. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





11. Although you may feel that the decision to retire is yours alone, it is likely that others have opinions about it. To what extent do you agree or disagree with the following statements about how others may feel about you retiring during the next three years?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable
	1	2	3	4	5	6
a. Your partner thinks that you should retire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your children think that you should retire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Most of your friends think that you should retire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Most of your relatives think that you should retire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	





HOUSEHOLD ORGANISATION

12. Who usually performs the following tasks in your household?

	Always you	Usually you	Usually someone else in the household	Usually someone outside the household
	1	2	3	4
a. Preparing meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Doing the dishes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Shopping for food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Vacuum-cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Doing small repairs in and around the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Paying bills and keeping finances in order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Which people give your household regular help with household tasks?
Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

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1 Receive no help

14. Does your household regularly pay someone to do housework?

1 Yes

2 No

15. Are there children younger than 14 in your household?

1 Yes

2 No → Proceed to question 17



16. Below are various tasks that may need to be done when there are children in the household. In your household who usually performs the following?

	Always you 1	Usually you 2	Usually someone else in the household 3	Usually someone outside the household 4	Not applicable 5
a. Dressing the children or seeing that they are properly dressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Putting the children to bed or seeing that they go to bed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Staying at home with a sick child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Playing with the children and/or taking part in leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Helping the children with homework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Taking the children to/from school, day care centre, babysitter or leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



HEALTH AND WELL-BEING

17. Below are some statements about how you are currently feeling. Please indicate to what extent recently you have experienced the following.

	Yes 1	More or less 2	No 3
a. There are plenty of people that you can lean on in case you have a problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. You experience a sense of emptiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You miss having people around	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. There are many people that you can count on completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Often, you feel rejected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. There are enough people that you feel close to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. During the previous week, how frequently did you experience the following feelings?

	Seldom or never 1	Sometimes 2	Often 3	Most or all of the time 4
a. Had difficulty shaking off the blues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Felt depressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Thought that your life has been a failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Felt fearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Felt lonely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Had crying spells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Felt sad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. How much control do you feel you will have over the following areas of your life during the next three years?

	None at all 1	Little 2	Quite a lot 3	A great deal 4	Not applicable 5
a. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Your family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

20. Have you had paid employment during the last three months?

1 Yes

2 No → Proceed to question 22



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21. How often have the following things happened to you during the past three months?

	Several times a week 1	Several times a month 2	Once or twice a month 3	Never 4
a. You have come home from work too tired to do household work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It has been difficult for you to fulfill family responsibilities because of your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You have arrived at work too tired to function well because of your household work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. You have had difficulty concentrating at work because of your family responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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MOVING IN TOGETHER WITH A PARTNER

22. Suppose that during the next three years you were to start living with someone. Do you think that the following parts of your life would be better or worse?

Try to answer the question even if you do not currently have a partner.

	Much better	Somewhat better	Neither better nor worse	Somewhat worse	Much worse	Not applicable
	1	2	3	4	5	6
a. The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Your employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Your sexual life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Your quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

23. How much would your decision about whether to start or not to start living with a/your current partner during the next three years depend on the following things?

Try to answer the question even if you do not currently have a partner.

	Not at all	A little	Quite a lot	A great deal
	1	2	3	4
a. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24. Although you may feel that the decision to start living together with a partner is yours (and your partner's), other people may have opinions about it. Do you agree or disagree with the following statements about what other people might think about you starting to live with a/your current partner during the next three years?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicable
	1	2	3	4	5	6
a. Most of your friends think that you should start living together with a/your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Your parents think that you should start living together with a/your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your children think that you should start living together with a/your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Most of your relatives think that you should start living together with a/your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	





25. Do you have a partner that you are not living together with right now?

1 Yes

2 No —————▶ *Proceed to Question 27*

26. Does your partner think that you should start living together?

1 Yes

2 No

3 Your partner is not sure

4 Do not know





VALUE ORIENTATION AND ATTITUDES

27. Now a few questions about your view and attitude toward family life and how society has changed. Do you agree or disagree with the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a. Marriage is an outdated institution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It is all right for a couple to live together even if they are not interested in marrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Marriage is a lifetime relationship and should never be ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. It is all right for a married couple to separate if the marriage is not working, even if they have children together.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. A woman has to have children in order to be fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. A man has to have children in order to be fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. A child needs a home with both a mother and father to have a good upbringing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. A woman can have a child as a single parent even if she doesn't want to have a stable relationship with a man	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. A man can have a child as a single parent even if he doesn't want to have a stable relationship with a woman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. When children turn about 18-20 years old, they should start to live independently of their parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Homosexual couples should have the same rights as heterosexual couples do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>





28. Please indicate for each of the following areas whether you think that it is mainly a task for society or the family.						
	Exclusively society	More society than family	Equally society as family	More family than society	Exclusively family	
	1	2	3	4	5	
a.	Care for older persons at their home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Care for pre-school children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Care for schoolchildren during after-school hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Financial support for older people who live below subsistence level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Financial support for younger people with children who live below subsistence level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Do you agree or disagree with the following statements?						
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
	1	2	3	4	5	
a.	Grandparents should look after their grandchildren if the parents are unable to do so	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Parents ought to provide financial help for their adult children when they are having financial difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	If their adult children were in need then parents should adjust their own lives in order to help them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Below are some statements regarding who should take care of elderly parents. Do you agree or disagree with the following statements?						
	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
	1	2	3	4	5	
a.	Children should take responsibility for their parents if needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Children should adjust their working lives to the needs of their parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	When parents are in need of care, daughters should take more responsibility than sons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Children ought to provide financial support to their parents when they are having financial difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Children should let their parents live with them when they can no longer look after themselves.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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31. Do you agree or disagree with the following statements?		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	In a couple it is better for the man to be older than the woman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	If the woman earns more than her partner, it is not good for the relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	On the whole, men are better political leaders than women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Women should be able to decide how to spend the money they earn without having to ask their partner's permission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Looking after the home and family can be equated with working for pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	A pre-school child is likely to suffer if his/her mother works	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g.	Children often suffer because their fathers concentrate too much on work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.	If parents divorce it is better for the child to stay with the mother than with the father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	When jobs are scarce, men should have more right to a job than women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j.	When jobs are scarce, younger people should have more right to a job than older people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k.	When jobs are scarce, people with children should have more right to a job than childless people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l.	When jobs are scarce, native-born people should have more right to a job than foreign-born people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

32. Generally speaking, do you think that most people can be trusted or do you think that you need to be very careful in dealing with other people?

1 Most people can be trusted

2 Need to be very careful

33. Do you think that most people would try to take advantage of you if they got a chance or would they try to be honest and fair?

1 Would take advantage

2 Would try to be honest and fair

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**34. Which religious denomination do you adhere to?**

- 01 Church of Sweden
 02 Catholic Church
 03 An orthodox church or congregation
 04 One of the Swedish free churches
 05 Another Christian movement or group
 06 Judaism
 07 Islam
 08 Hinduism
 09 Buddhism

10 Other religion, specify:

- 11 No religious denomination
 12 Do not know

35. How often do you attend religious services?

Do not count weddings, baptisms, funerals or the like.

- 1 Several times a week
 2 About once a week
 3 1-3 times a month
 4 1-3 times every three months
 5 Less than once every three months
 6 Never

36. Do you agree or disagree with the following statements about religious ceremonies?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a. It is important for an infant to become part of a religion through baptism or other equivalent religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It is important to marry in a religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. It is important that a funeral is a religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you for participating in the survey!





Swedish families in time

Thank you for participating in the survey, *Swedish families in time*. The information you have provided in the telephone interview will give decision-makers and the public a better picture of family life in Sweden today and how it has changed and how it will continue to change in the future.

This questionnaire includes additional questions that are important for understanding family change but that take less time to answer than the interview. Most of the questions offer alternatives that you can simply choose. Your participation is, of course, voluntary, and you can refuse to answer single questions, but your answers can never be replaced by anyone else's!

You can choose to answer the questions on the Internet. You will find the questions at www.insamling.scb.se. Log in with the following user-id and password:

Userid:

Password:

If you choose instead to answer the questionnaire via the paper form, send it in the postage-paid envelope.

Your information is protected

Just as in the telephone interview in which you participated earlier, the information you provide is protected by the law on openness and secrecy (2009:400) together with the law on personal information (1998:204). Everyone who works with the survey is bound by confidentiality and the results that are presented never include any individual answers. The number at the top of the form allows Statistics Sweden to know who has answered and who should get a reminder. After Statistics Sweden has finished working on the data, all identifying information that would allow anyone to see to whom the information refers is removed before your answers are given to researchers at the Stockholm University Demography Unit, the Aging Research Center at Karolinska Institute, the Swedish National Data Service and the UNECE database held outside Sweden. In reports about the study's results your answers will be presented only as numbers in tables and figures, together with others' answers.

Do you want to know more about the survey?

If you have questions about the survey, you are welcome to contact the survey leader, Mohammad Sepahvand, Statistics Sweden in Örebro by telephone at 019-17 61 94 or by email to GGS@scb.se or you can call one of us listed below.

More information about the survey in Sweden and in other countries is found on the home page www.suda.su.se/ggs. After the survey has been completed, you will be able also to find overviews of the survey's results.

Thank you for participating in the survey. Your participation is important and of great help!

With warm regards,

Elizabeth Thomson
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Gunnar Andersson
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Anna Welin
Survey Leader
Statistics Sweden
Tel: 019-17 60 02



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Instructions

The questionnaire will be read by machine. When you answer, therefore, we ask you to think about the following:

- Use a ballpoint pen with black or blue ink, not red. Don't use a pencil!

- Write numbers clearly:

1	2	3	4	5	6	7	8	9	0
---	---	---	---	---	---	---	---	---	---

- Write with clear and LARGE letters:

A	B	C	D	E	F	G	H	I	J
---	---	---	---	---	---	---	---	---	---

- Mark your answers with an X, like this,

X

NOT like this:

x

- If you want to change your answer, cover the entire box:
- If you want to write more text than the room in the rows or boxes allows, or if you want to explain or clarify anything:
 - Don't write between or near the answer boxes
 - Write instead on the comment page

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HOUSEHOLD INCOME AND EXPENDITURES

1. Does your household have access to the following items?

It does not matter whether the item is owned, rented, or otherwise provided for you.

	Yes 1	Would like but cannot afford 2	Do not have for other reasons 3
a. TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Video or DVD-player	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Washing machine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Home Computer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Car available for private use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. A second car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. A second home (e.g. for vacation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How easy or difficult is it for your household to make ends meet every month?

- 1 Very difficult
 2 Difficult
 3 Somewhat difficult
 4 Fairly easily
 5 Easily
 6 Very easily

3. Is your household able to afford the following items, supposing you wanted them?

	Yes 1	No 2
a. Keeping your home adequately warm	<input type="checkbox"/>	<input type="checkbox"/>
b. Paying for a week's vacation away from home	<input type="checkbox"/>	<input type="checkbox"/>
c. Replacing worn-out furniture	<input type="checkbox"/>	<input type="checkbox"/>
d. Buying new, rather than second-hand clothes	<input type="checkbox"/>	<input type="checkbox"/>
e. Having friends or family for dinner at least once a month	<input type="checkbox"/>	<input type="checkbox"/>

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4. During the past 12 months, has your household had difficulty paying any of the following on time?

	Yes 1	No 2	Not applicable 3
a. Rent for accomodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mortgage payments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Utility bills, such as for electricity, water and gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Payments for other credit purchases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Is there normally some money left over in the household that you can save?

1 Yes
2 No

6. a) During the past 12 months, have you or your partner received money, assets, or goods from a person outside the household?
Include property or inheritance but not birthday or Christmas gifts etc.

1 Yes
2 No → Proceed to question 7

b) Who has given you that?
Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

From whom?	Was this an inheritance?	Approximately how much was the total cash value? (in SEK)
	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	kr
	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	kr
	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	kr
	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	kr
	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	kr





7. a) During the last 12 months, have you or your partner given money, assets or goods to a person outside of the household?

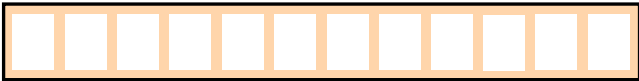
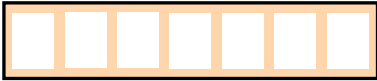
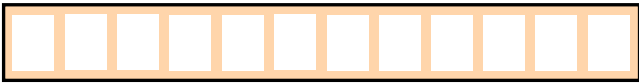
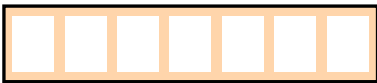
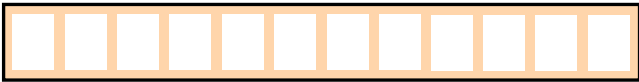
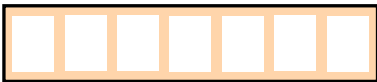
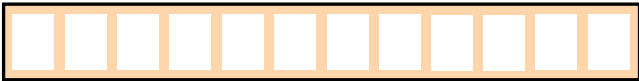

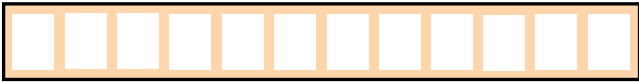
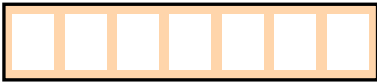
Include property but not birthday or Christmas gifts etc.

1 Yes

2 No → Proceed to question 8

b) To whom have you given that?

Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

To whom?	Approximately how much was the total cash value? (in SEK)	
		kr
		kr
		kr
		kr
		kr





HOUSEHOLD ORGANISATION

8. Who usually performs the following tasks in your household?

	Always you	Usually you	You and your partner equally	Usually your partner	Always your partner	Usually someone else in the household	Usually someone outside the household
	1	2	3	4	5	6	7
a. Preparing meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Doing the dishes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Shopping for food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Vacuum-cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Doing small repairs in and around the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Paying bills and keeping finances in order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Organising joint social activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. How satisfied are you with the division of household tasks between you and your partner?
 Mark your answer on a scale of 0 to 10 where 0 means "not at all satisfied", 10 means "completely satisfied"

Not at all satisfied									Completely satisfied	
0	1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Which people give your household regular help with household tasks?
 Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

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1 Receive no help



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11. Does your household regularly pay someone to do housework?											
1 <input type="checkbox"/> Yes											
2 <input type="checkbox"/> No											
12. Are there children younger than 14 in your household?											
1 <input type="checkbox"/> Yes											
2 <input type="checkbox"/> No → Proceed to question 15											
13. Below are various tasks that may need to be done when there are children in the household. In your household who usually performs the following?											
		Always you	Usually you	You and your partner equally	Usually your partner	Always your partner	Usually someone else in the household	Usually someone outside the household	Not applicable		
		1	2	3	4	5	6	7	8		
a.	Dressing the children or seeing that they are properly dressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Putting the children to bed or seeing that they go to bed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c.	Staying at home with a sick child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Playing with the children and/or taking part in leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e.	Helping the children with homework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f.	Taking the children to/from school, day care centre, babysitter or leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. How satisfied are you with the way childcare tasks are divided between you and your partner? Mark your answer on a scale from 0 to 10 where 0 means "not at all satisfied", 10 means "completely satisfied"											
	Not at all satisfied									Completely satisfied	
	0	1	2	3	4	5	6	7	8	9	10
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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15. Now follow some questions about decision-making. Who makes decisions about the following issues in your household?

	Always you	Usually you	You and your partner equally	Usually your partner	Always your partner	Usually someone else in the household	Usually someone outside the household	Not applicable
	1	2	3	4	5	6	7	8
a. Routine purchases for the household	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Occasional more expensive purchases for the household	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. The amount of time you spend in paid work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. The amount of time your partner spends in paid work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. The way your children are raised	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Social life and leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

16. How do you and your partner divide your income? Note! Select only one alternative

- 1 You manage all the money and give your partner a share
 2 Your partner manages all the money and gives you a share
 3 You pool all the money and take what you yourselves think you need
 4 You pool some of the money and keep the rest separate
 5 You each keep your own money separate

6 Another way, specify:

17. Within the last 12 months, how often did you and your partner have disagreement about the following?

	Never	Seldom	Sometimes	Frequently	Very frequently	Not applicable
	1	2	3	4	5	6
a. Household chores	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Use of leisure time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Sex	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Relations with friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Relations with parents and in-laws	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Child-raising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Having children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
i. Drinking alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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18. How satisfied are you with the relationship between you and your partner?										
<i>Mark your answer on a scale from 0 to 10 where 0 means "not at all satisfied", 10 means "Completely satisfied"</i>										
Not at all satisfied										Completely satisfied
1	2	3	4	5	6	7	8	9	10	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Are you considering breaking up/separating from your partner during the next three years?										
<i>Note! Select only one alternative.</i>										
1	<input type="checkbox"/> Definitely not									
2	<input type="checkbox"/> Probably not									
3	<input type="checkbox"/> Yes, probably									
4	<input type="checkbox"/> Yes, definitely									
20. Even though it may seem outlandish, suppose that you were to separate from your partner within the next three years. Do you think that the following areas of your life would be better or worse?										
		Much better	Somewhat better	Neither better nor worse	Somewhat worse	Much worse	Not applicable			
		1	2	3	4	5	6			
a.	The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
b.	Your employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
c.	Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
d.	Your sexual life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
e.	What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
f.	Your quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
g.	The welfare of your children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
h.	The closeness between you and your children and any grandchildren	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	
21. How much would your decision to separate within the next three years depend on the following things?										
		Not at all	A little	Quite alot	A great deal					
		1	2	3	4					
a.	Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
b.	Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
c.	Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
d.	Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

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FERTILITY

22. Here are some questions about having children. Is it physically possible for you or a partner of yours to have children?

- 1 Yes
 2 No —————> Proceed to question 30
 3 Not sure

23. How many children in total would you like to have?

Children

24. Are you or your partner currently pregnant?

- 1 Yes —————> Proceed to question 30
 2 No
 3 Maybe, not sure yet

25. Now suppose that during the next three years you were to have a/another child. Do you think that the following aspects of your life would be better or worse?

	Much better	Somewhat better	Neither better nor worse	Somewhat Worse	Much worse	Not applicable
	1	2	3	4	5	6
a. The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Your employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Your sexual life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Your quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. The closeness between you and your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h. Your partner's employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
i. The care and security you may get in old age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
j. Certainty in your life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
k. The relationship with your parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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26. How much would your decision to have a/another child within the next three years depend on the following?

	Not at all 1	Some 2	Quite a lot 3	A great deal 4
a. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. You having a suitable partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Your partner's work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Your partner's health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Availability of child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Your opportunity to go on parental leave/work leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. Although you may feel that the decision to have a/another child is yours (and your partner's) alone, it is likely that other people might have opinions about it. Do you agree or disagree with the following statements about what other people might think about you having a/another child during the next three years?

	Strongly agree 1	Agree 2	Neither agree nor disagree 3	Disagree 4	Strongly disagree 5
a. Most of your friends think that you should have a/another child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your parents think that you should have a/another child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Most of your relatives think that you should have a/another child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. Are you or your partner using any of the following measures/methods for preventing pregnancy?

Mark all the contraceptive methods you use.

- 1 Condom
- 1 Contraceptive pills
- 1 Intra-uterine device (coil, loop)
- 1 Diaphragm/ cervical cap
- 1 Foam/ cream /jelly /suppository
- 1 Injectables
- 1 Implants
- 1 Natural Family Planning/Persona
- 1 Hormonal emergency contraception ("morning-after pill")
- 1 Withdrawal (interrupted intercourse)
- 1 Safe period method
- 1 No, no method

Proceed to question 30

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29. Are you or your partner using any of the following methods to encourage pregnancy?*Mark all the methods you use.*

- 1 Medical treatments
- 1 Methods for ascertaining timing of ovulation
- 1 In vitro fertilisation (IVF) or micro-fertilisation (ICSI)
- 1 Surgery
- 1 Artificial insemination
- 1 Other medical treatment
- 1 No, no method

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HEALTH AND WELL-BEING

30. Below are some statements about how you are currently feeling. Please indicate to what extent recently you have experienced the following.

	Yes 1	More or less 2	No 3
a. There are plenty of people that you can lean on in case you have a problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. You experience a sense of emptiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You miss having people around	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. There are lots of people that you can count on completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Often, you feel rejected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. There are enough people that you feel close to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. During the previous week, how frequently did you experience the following feelings?

	Seldom or never 1	Sometimes 2	Often 3	Most or all of the time 4
a. Had difficulty shaking off the blues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Felt depressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Thought that your life has been a failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Felt fearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Felt lonely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Had crying spells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Felt sad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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32. How much control do you feel that you will have over the following areas of your life during the next three years?						
		None at all	Little	Quite a lot	A great deal	Not applicable
		1	2	3	4	5
a.	Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e.	Your family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Have you had paid employment during the past three months?						
	1	<input type="checkbox"/>	Yes			
	2	<input type="checkbox"/>	No	→	Proceed to question 35	
34. How often have the following things happened to you during the past three months?						
		Several times a week	Several times a month	Once or twice a month	Never	
		1	2	3	4	
a.	You have come home from work too tired to do household work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	It has been difficult for you to fulfill family responsibilities because of your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c.	You have arrived at work too tired to function well because of your household work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	You have had difficulty concentrating at work because of your family responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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VALUE ORIENTATION AND ATTITUDES

35. Now a few questions about your view and attitude toward family life and how society has changed. Do you agree or disagree with the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a. Marriage is an outdated institution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It is all right for a couple to live together even if they are not interested in marrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Marriage is a lifetime relationship and should never be ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. It is all right for a married couple to separate if the marriage is not working, even if they have children together	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. A woman has to have children in order to be fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. A man has to have children in order to be fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. A child needs a home with both a mother and father to have a good upbringing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. A woman can have a child as a single parent even if she doesn't want to have a stable relationship with a man	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. A man can have a child as a single parent even if he doesn't want to have a stable relationship with a woman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. When children turn about 18-20 years old, they should start to live independently of their parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Homosexual couples should have the same rights as heterosexual couples do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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36. Please indicate for each of the following areas whether you think that it is mainly a task for society or the family.						
		Exclusively society	More society than family	Equally society as family	More family than society	Exclusively family
		1	2	3	4	5
a.	Care for older persons at their home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Care for pre-school children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Care for schoolchildren during after-school hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Financial support for older people who live below subsistence level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Financial support for younger people with children who live below subsistence level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Do you agree or disagree with the following statements?						
		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	Grandparents should look after their grandchildren if the parents are unable to do so	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Parents ought to provide financial help for their adult children when they are having financial difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	If their adult children were in need then parents should adjust their own lives in order to help them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Below are some statements regarding who should take care of elderly parents. Do you agree or disagree with the following statements?						
		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	Children should take responsibility of their parents if needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Children should adjust their working lives to the needs of their parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	When parents are in need of care, daughters should take more responsibility than sons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Children ought to provide financial support to their parents when they are having financial difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Children should let their parents live with them when they can no longer look after themselves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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39. Do you agree or disagree with the following statements?		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	In a couple it is better for the man to be older than the woman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	If the woman earns more than her partner, it is not good for the relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	On the whole, men are better political leaders than women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Women should be able to decide how to spend the money they earn without having to ask their partner's permission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Looking after the home and family can be equated with working for pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	A pre-school child is likely to suffer if his/her mother is working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g.	Children often suffer because their fathers concentrate too much on work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.	If parents divorce it is better for the child to stay with the mother than with the father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	When jobs are scarce, men should have more right to a job than women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j.	When jobs are scarce, younger people should have more right to a job than older people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k.	When jobs are scarce, people with children should have more right to a job than childless people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l.	When jobs are scarce, native-born people should have more right to a job than foreign-born people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Generally speaking, do you think that most people can be trusted or do you think that you need to be very careful in dealing with other people?						
1 <input type="checkbox"/> Most people can be trusted						
2 <input type="checkbox"/> Need to be very careful						
41. Do you think that most people would try to take advantage of you if they got a chance or would they try to be honest and fair?						
1 <input type="checkbox"/> Would take advantage						
2 <input type="checkbox"/> Would try to be honest and fair						

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42. Which religious denomination do you adhere to?

- 01 Church of Sweden
 02 Catholic Church
 03 An orthodox church or congregation
 04 One of the Swedish free churches
 05 Other Christian movement or group
 06 Judaism
 07 Islam
 08 Hinduism
 09 Buddhism
- 10 Other religion, specify:
- 11 No religious denomination
 12 Do not know

43. How often do you attend religious services?*Do not count weddings, baptisms, funerals or the like.*

- 1 Several times a week
 2 About once a week
 3 1-3 times a month
 4 1-3 times every three months
 5 Less than once every three months
 6 Never

44. Do you agree or disagree with the following statements about religious ceremonies?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a. It is important for an infant to become part of a religion through baptism or other equivalent religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It is important to marry in a religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. It is important that the funeral is a religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you for participating in the survey!

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Swedish families in time

Thank you for participating in the survey, *Swedish families in time*. The information you have provided in the telephone interview will give decision-makers and the public a better picture of family life in Sweden today and how it has changed and how it will continue to change in the future.

This questionnaire includes additional questions that are important for understanding family change but that take less time to answer than the interview. Most of the questions offer alternatives that you can simply choose. Your participation is, of course, voluntary, and you can refuse to answer single questions, but your answers can never be replaced by anyone else's!

You can choose to answer the questions on the Internet. You will find the questions at www.insamling.scb.se. Log in with the following user-id and password:

Userid:

Password:

If you choose instead to answer the questionnaire via the paper form, send it in the postage-paid envelope.

Your information is protected

Just as in the telephone interview in which you participated earlier, the information you provide is protected by the law on openness and secrecy (2009:400) together with the law on personal information (1998:204). Everyone who works with the survey is bound by confidentiality and the results that are presented never include any individual answers. The number at the top of the form allows Statistics Sweden to know who has answered and who should get a reminder. After Statistics Sweden has finished working on the data, all identifying information that would allow anyone to see to whom the information refers is removed before your answers are given to researchers at the Stockholm University Demography Unit, the Aging Research Center at Karolinska Institute, the Swedish National Data Service and the UNECE database held outside Sweden. In reports about the study's results your answers will be presented only as numbers in tables and figures, together with others' answers.

Do you want to know more about the survey?

If you have questions about the survey, you are welcome to contact the survey leader, Mohammad Sepahvand, Statistics Sweden in Örebro by telephone at 019-17 61 94 or by email to GGS@scb.se or you can call one of us listed below.

More information about the survey in Sweden and in other countries is found on the home page www.suda.su.se/ggs. After the survey has been completed, you will be able also to find overviews of the survey's results.

Thank you for participating in the survey. Your participation is important and of great help!

With warm regards,

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Instructions

The questionnaire will be read by machine. When you answer, therefore, we ask you to think about the following:

- Use a ballpoint pen with black or blue ink, not red. Don't use a pencil!

- Write numbers clearly:

1	2	3	4	5	6	7	8	9	0
---	---	---	---	---	---	---	---	---	---

- Write with clear and LARGE letters:

A	B	C	D	E	F	G	H	I	J
---	---	---	---	---	---	---	---	---	---

- Mark your answers with an X, like this,

X

NOT like this:

x

- If you want to change your answer, cover the entire box:
- If you want to write more text than the room in the rows or boxes allows, or if you want to explain or clarify anything:
 - Don't write between or near the answer boxes
 - Write instead on the comment page

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HOUSEHOLD INCOME AND EXPENDITURES

1. Does your household have access to the following items?

It does not matter whether the item is owned, rented, or otherwise provided for you.

	Yes 1	Would like but cannot afford 2	Do not have for other reasons 3
a. TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Video or DVD-player	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Washing machine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Home Computer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Dishwasher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Car available for private use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. A second car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. A second home (e.g. for vacation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. How easy or difficult is it for your household to make ends meet every month?

- 1 Very difficult
 2 Difficult
 3 Fairly difficult
 4 Fairly easy
 5 Easy
 6 Very easy

3. Is your household able to afford the following items, supposing you wanted them?

	Yes 1	No 2
a. Keeping your home adequately warm	<input type="checkbox"/>	<input type="checkbox"/>
b. Paying for a week's vacation away from home	<input type="checkbox"/>	<input type="checkbox"/>
c. Replacing worn-out furniture	<input type="checkbox"/>	<input type="checkbox"/>
d. Buying new, rather than second-hand clothes	<input type="checkbox"/>	<input type="checkbox"/>
e. Having friends or family for dinner at least once a month	<input type="checkbox"/>	<input type="checkbox"/>

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4. During the past 12 months, has your household had difficulty paying any of the following on time?

	Yes 1	No 2	Not applicable 3
a. Rent for accomodation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mortgage payments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Utility bills, such as for electricity, water and gas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Payments for other credit purchases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Is there normally some money left over in the household that you can save?

1 Yes
2 No

6. a) During the last 12 months, have you received money, assets, or goods from a person outside the household?
Include property or inheritance but not birthday or Christmas gifts, etc.

1 Yes
2 No —————> *Proceed to question 7a*

b) Who has given you that?
Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

From whom?	Was this an Inheritance?	Approximately how much was the total cash value? (in SEK)
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> kr
<input type="text"/>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	<input type="text"/> K r

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7. **a) During the last 12 months, have you given money, assets or goods to a person outside the household?**

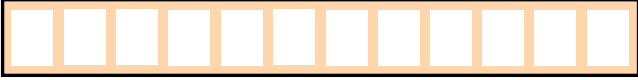
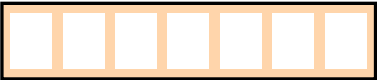


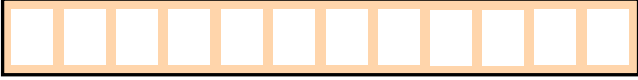





Include property but not birthday or Christmas gifts etc.

1 Yes

2 No → Proceed to question 8

b) To whom have you given that?

Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

To whom?	Approximately how much was the total cash value? (in SEK)	
		kr
		kr
		kr
		kr
		kr

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HOUSEHOLD ORGANISATION

8. Who usually performs the following tasks in your household?

	Always you	Usually you	Usually someone else in the household	Usually someone outside the household
	1	2	3	4
a. Preparing meals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Doing the dishes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Shopping for food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Vacuum-cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Doing small repairs in and around the house	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Paying bills and keeping finances in order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Which people give your household regular help with household tasks?
Record up to five persons by their relation to you e.g. parent, sibling, children, friend etc.

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1 Receive no help

10. Does your household regularly pay someone to do housework?

1 Yes
 2 No

11. Are there children younger than 14 in your household?

1 Yes
 2 No —————> *Proceed to question 13*



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12. Below are various tasks that may need to be done when there are children in the household. In your household who usually performs the following?

	Always you	Usually you	Usually someone else in the household	Usually someone outside the household	Not applicable
	1	2	3	4	5
a. Dressing the children or seeing that they are properly dressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Putting the children to bed or seeing that they go to bed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Staying at home with a sick child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Playing with the children and/or taking part in leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Helping the children with homework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Taking the children to/from school, day care centre, babysitter or leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FERTILITY

13. Here are some questions about having children. Is it physically possible for you or a partner of yours to have children?

1 Yes

2 No —————> Proceed to question 21

3 Do not know

14. How many children in total would you like to have?

Children

15. Are you or your partner currently pregnant?

1 Yes —————> Proceed to question 21

2 No

3 Maybe, not sure yet

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16. Now suppose that during the next three years you were to have a/another child. Do you think that the following aspects of your life would be better or worse?		Much better	Somewhat better	Neither better nor worse	Somewhat worse	Much worse	Not applicable
		1	2	3	4	5	6
a.	The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b.	Your employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c.	Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d.	Your sexual life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e.	What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f.	Your quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g.	The closeness between you and your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.	Your partner's employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	The care and security you may get in old age	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
j.	Certainty in your life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
k.	The relationship with your parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. How much would your decision to have a/another child within the next three years depend on the following?		Not at all	A little	Quite a lot	A great deal
		1	2	3	4
a.	Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	You having a suitable partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	Your partner's work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g.	Your partner's health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.	Availability of child care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	Your opportunity to go on parental leave/work leave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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<p>18. Although you may feel that the decision to have a/another child is yours (and your partner's) alone, it is likely that other people might have opinions about it. Do you agree or disagree with the following statements about what other people might think about you having a/another child during the next three years?</p>					
	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a.	Most of your friends think that you should have a/another child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Your parents think that you should have a/another child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Most of your relatives think that you should have a/another child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>19. Are you or your partner using any of the following measures/methods for preventing pregnancy? <i>Mark all the contraceptive methods you use.</i></p>					
1	<input type="checkbox"/> Condom	}	Proceed to question 21		
1	<input type="checkbox"/> Contraceptive pills				
1	<input type="checkbox"/> Intra-uterine device (coil, loop)				
1	<input type="checkbox"/> Diaphragm/ cervical cap				
1	<input type="checkbox"/> Foam/ cream /jelly /suppository				
1	<input type="checkbox"/> Injectables				
1	<input type="checkbox"/> Implants				
1	<input type="checkbox"/> Natural Family Planning/ Persona				
1	<input type="checkbox"/> Hormonal emergency contraception ("morning-after pill")				
1	<input type="checkbox"/> Withdrawal (interrupted intercourse)				
1	<input type="checkbox"/> Safe period method				
1	<input type="checkbox"/> No, no method				
<p>20. Are you or your partner using any of the following methods to encourage pregnancy? <i>Mark all the methods you use.</i></p>					
1	<input type="checkbox"/> Medical treatments				
1	<input type="checkbox"/> Methods for ascertaining timing of ovulation				
1	<input type="checkbox"/> In vitro fertilisation (IVF) or micro-fertilisation (ICSI)				
1	<input type="checkbox"/> Surgery				
1	<input type="checkbox"/> Artificial insemination				
1	<input type="checkbox"/> Other medical treatment				
1	<input type="checkbox"/> No, no method				

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HEALTH AND WELL-BEING

21. Below are some statements about how you are currently feeling. Please indicate to what extent recently you have experienced the following.

	Yes 1	More or less 2	No 3
a. There are plenty of people that you can lean on in case you have a problem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. You experience a sense of emptiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You miss having people around	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. There are many people that you can count on completely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Often, you feel rejected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. There are enough people that you feel close to	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. During the previous week, how frequently did you experience the following feelings?

	Seldom or never 1	Sometimes 2	Often 3	Most or all of the time 4
a. Had difficulty shaking off the blues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Felt depressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Thought that your life has been a failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Felt fearful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Felt lonely	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Had crying spells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Felt sad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

23. How much control do you feel you will have over the following areas of your life during the next three years?

	None at all 1	A little 2	Quite a lot 3	A great deal 4	Not applicable 5
a. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Your family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

24. Have you had paid employment during the past three months?

1 Yes

2 No → Proceed to question 26

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25. How often have the following things happened to you during the past three months?

	Several times a week 1	Several times a month 2	Once or twice a month 3	Never 4
a. You have come home from work too tired to do household work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It has been difficult for you to fulfill family responsibilities because of your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You have arrived at work too tired to function well because of your household work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. You have had difficulty concentrating at work because of your family responsibilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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LEAVING THE PARENTAL HOME

26. Do you live with your parents?

1 Yes2 No → Proceed to question 30

27. Now suppose that you were to living separately from your parents within the next three years. Do you think the following aspects of your life would be better or worse?

	Much better	Somewhat better	Neither better nor worse	Somewhat worse	Much worse
	1	2	3	4	5
a. The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your sexual life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The joy and satisfaction you get from life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. How much would the decision to start living separately from your parents within the next three years depend on the following?

	Not at all	A little	Quite a lot	A great deal
	1	2	3	4
a. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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29. Although you may feel that the decision to start living separately from your parents is yours alone, it is likely that others have opinions about it. Do you agree or disagree with the following statements about what other people might think about your moving away from home during the next three years?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a. Most of your friends think it is time for you to move away from home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your parents think it is time for you to move away from home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Most of your other relatives think it is time for you to move away from home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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MOVING IN TOGETHER WITH A PARTNER

30. Suppose that during the next three years you were to start living with someone. Do you think that the following parts of your life would be better or worse?

Try to answer the question even if you do not currently have a partner

	Much better	Somewhat better	Neither better nor worse	Somewhat worse	Much worse
	1	2	3	4	5
a. The possibility to do what you want	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your employment opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your sexual life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. What people around you think of you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Your quality of life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. How much would your decision about whether to start or not to start living with a/ your current partner during the next three years depend on the following things?

Try to answer the question even if you do not currently have a partner.

	Not at all	A little	Quite a lot	A great deal
	1	2	3	4
a. Your financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your housing conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Your health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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32. Although you may feel that the decision to start living together with a partner is yours (and your partner's), other people may have opinions about it. Do you agree or disagree with the following statements about what other people might think about you starting to live with a/your current partner during the next three years?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Not applicabl e
	1	2	3	4	5	6
a. Most of your friends think that you should start living together with a/ your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Your parents think that you should start living together with a/ your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your children think that you should start living together with a/ your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Most of your relatives think that you should start living together with a/ your partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

33. Do you have a partner that you are not living with right now?

1 Yes

2 No → Proceed to question 35

34. Does your partner think that you should start living together?

1 Yes

2 No

3 Your partner is not sure

4 Do not know

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VALUE ORIENTATION AND ATTITUDE

35. Now a few questions about your view and attitude toward family life and how society has changed. Do you agree or disagree with the following statements?		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	Marriage is an outdated institution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	It is all right for a couple to live together even if they are not interested in marrying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Marriage is a lifetime relationship and should never be ended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	It is all right for a married couple to separate if the marriage is not working, even if they have children together	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	A woman has to have children in order to be fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	A man has to have children in order to be fulfilled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g.	A child needs a home with both a mother and father to have a good upbringing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.	A woman can have a child as a single parent even if she doesn't want to have a stable relationship with a man	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	A man can have a child as a single parent even if he doesn't want to have a stable relationship with a woman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j.	When children turn about 18-20 years old, they should start to live independently of their parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k.	Homosexual couples should have the same rights as heterosexual couples do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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36. Please indicate for each of the following areas whether you think that it is mainly a task for society or the family.						
		Exclusively society	More society than family	Equally society as family	More family than society	Exclusively family
		1	2	3	4	5
a.	Care for older persons at their home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Care for pre-school children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Care for schoolchildren during after-school hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Financial support for older people who live below subsistence level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Financial support for younger people with children who live below subsistence level	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Do you agree or disagree with the following statements?						
		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	Grandparents should look after their grandchildren if the parents are unable to do so	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Parents ought to provide financial help for their adult children when they are having financial difficulties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	If their adult children were in need then parents should adjust their own lives in order to help them	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Below are some statements regarding who should take care of elderly parents. Do you agree or disagree with the following statements?						
		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	Children should take responsibility for their parents if needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Children should adjust their working lives to the needs of their parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	When parents are in need of care, daughters should take more responsibility than sons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Children ought to provide financial support to their parents when they are having financial difficulties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Children should let their parents live with them when they can no longer look after themselves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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39. Do you agree or disagree with the following statements?		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
		1	2	3	4	5
a.	In a couple it is better for the man to be older than the woman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	If the woman earns more than her partner, it is not good for the relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	On the whole, men are better political leaders than women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.	Women should be able to decide how to spend the money they earn without having to ask their partner's permission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.	Looking after the home and family can be equated with working for pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	A pre-school child is likely to suffer if his/her mother works	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g.	Children often suffer because their fathers concentrate too much on work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.	If parents divorce it is better for the child to stay with the mother than with the father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	When jobs are scarce, men should have more right to a job than women	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j.	When jobs are scarce, younger people should have more right to a job than older people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k.	When jobs are scarce, people with children should have more right to a job than childless people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l.	When jobs are scarce, native-born people should have more right to a job than foreign-born people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Generally speaking, do you think that most people can be trusted or do you think that you need to be very careful in dealing with other people?						
1 <input type="checkbox"/> Most people can be trusted						
2 <input type="checkbox"/> Need to be very careful						
41. Do you think most people would try to take advantage of you if they got a chance or would they try to be honest and fair?						
1 <input type="checkbox"/> Would take advantage						
2 <input type="checkbox"/> Would try to be honest and fair						

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42. Which religious denomination do you adhere to?

- 01 Church of Sweden
 02 Catholic Church
 03 An Orthodox church or congregation
 04 One of the Swedish free churches
 05 Another Christian movement or group
 06 Judaism
 07 Islam
 08 Hinduism
 09 Buddhism
- 10 Other religion, specify:
- 11 No religious denomination
 12 Do not know

43. How often do you attend religious services?*Do not count weddings, baptisms, funerals or the like.*

- 1 Several times a week
 2 About once a week
 3 1-3 times a month
 4 1-3 times every three months
 5 Less than once every three months
 6 Never

44. Do you agree or disagree with the following statements about religious ceremonies?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
	1	2	3	4	5
a. It is important for an infant to become part of a religion through baptism or other equivalent religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. It is important to marry in a religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. It is important that a funeral is a religious ceremony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you for participating in the survey!

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