

# How to complete the remaining questions

Remember to use black or blue ink.

Put a tick in the appropriate box, like this . If you mark the wrong box, fill in the box and put a tick in the right one, like this

Where you are required to write in an answer please use CAPITAL LETTERS and leave one space between each word. Where possible, start a new line if a word will not fit.

## 9 What is your country of birth?

Elsewhere, please write in the present name of the country

S O U T H  
A F R I C A

## Household Accommodation

### H1 What type of accommodation does your household occupy?

A whole house or bungalow that is:

- Detached ACCTYPEHO
- Semi-detached
- Terraced (including end-terrace)

A flat, maisonette, or apartment that is:

- In a purpose-built block of flats or tenement
- Part of a converted or shared house (includes bed-sits)
- In a commercial building (for example, in an office building, or hotel, or over a shop)

Mobile or temporary structure:

- A caravan or other mobile or temporary structure

### H2 Is your household's accommodation self-contained?

◆ This means that all the rooms, including the kitchen, bathroom and toilet are behind a door that only your household can use.

- Yes, all the rooms are behind a door that only our household can use
- No SELDCONTHO

### H3 How many rooms do you have for use only by your household?

- ◆ Do not count bathrooms, toilets, halls or landings, or rooms that can only be used for storage such as cupboards.
- ◆ Do count all other rooms, for example kitchens, living rooms, bedrooms, utility rooms and studies.
- ◆ If two rooms have been converted into one, count them as one room.

Number of rooms

HHROOMS\_COUNTHO,  
NS\_DEP\_HOUSHO,  
PERSPERROOMHO, OCCRATHO

### H4 Do you have a bath/shower and toilet for use only by your household?

- Yes  No BATHSHOWHO

### H5 What is the lowest floor level of your household's living accommodation?

- Basement or semi-basement
- Ground floor (street level)
- First floor (floor above street level)
- Second floor LWST\_FLR\_LVLHO
- Third or fourth floor
- Fifth floor or higher

### H6 Are the rooms used by your household located on more than one floor?

- Yes  No HHFLRS\_COUNTHO

### H7 Does your accommodation have central heating?

- ◆ If you have central heating available, ✓ 'Yes' whether or not you use it.
- ◆ Central heating includes:
- gas, oil or solid fuel central heating,
  - night storage heaters,
  - warm air heating,
  - underfloor heating.
- Yes, in some or all rooms
- No CENTHEATHO,  
CENTHEAT IMPHO

### H8 How many cars or vans are owned, or available for use, by one or more members of your household?

- ◆ Include any company car or van if available for private use.
- None  One
- Two  Three
- Four or more, please write in

HHCARS\_COUNTHO,  
CARS IMPHO

### H9 Does your household own or rent the accommodation?

◆ ✓ one box only.

- Owns outright  
▶ Go to H11
- Owns with a mortgage or loan  
▶ Go to H11
- Pays part rent and part mortgage (shared ownership)  
▶ Go to H11
- Rents  
▶ Go to H10
- Lives here rent free  
▶ Go to H10

OWNERSHIPHO,  
TENUREHO,  
TENURE\_IMPHO

### H10 Who is your landlord?

- Northern Ireland Housing Executive
- Housing Association  
Housing Co-operative  
Charitable Trust
- Private landlord or letting agency
- Employer of a household member
- Relative or friend of a household member
- Other

LNDLRDHO,  
NS\_DEP\_TENHO,  
TENUREHO,  
TENURE\_IMPHO

### H11 Please turn the page.

# Person 1

## 1 What is your name? (Person 1 in Table 1)

First name and surname

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## 2 What is your sex?

Male  Female

SEXPO, GENDER\_IMPP0, WRKPEN\_INDPO, DEPPERSPO

## 3 What is your date of birth?

Day Month Year

AGEPO, AGE\_IMPP0, DEPPERSPO,  
WRKPEN\_INDPO

## 4 What is your marital status (on 29 April 2001)?

- Single (never married)
- Married (first marriage)
- Re-married
- Separated (but still legally married)
- Divorced
- Widowed

MARITALPO,  
MARITAL\_IMPP0,  
LIVARRPO

## 5 Are you a schoolchild or student in full-time education?

- Yes **Go to 6**
- No **Go to 7**

STU\_INDPO

## 6 Do you live at the address shown on the front of this form during the school, college or university term?

Only answer this question if you have answered 'Yes' to Question 5.

- Yes, I live at this address during the school/college/university term
- Go to 7**
- No, I live elsewhere during the school/college/university term

**Go to 35**  
TTADDPO,  
SOAENUMPO

## 7 Can you understand, speak, read or write Irish?

all the boxes that apply.

- Understand spoken Irish
- Speak Irish
- Read Irish
- Write Irish
- None of the above

UNDERIRISHPO,  
SPEAKIRISHPO,  
READIRISHPO,  
WRITERIRISHPO,  
KNOWIRISHPO

## 8 Do you regard yourself as belonging to any particular religion?

- Yes **Go to 8a**
- No **Go to 8b**

RELPRACPO

## 8a What religion, religious denomination or body do you belong to?

- Roman Catholic
- Presbyterian Church in Ireland
- Church of Ireland
- Methodist Church in Ireland
- Other, please write in

RLGNPO, RELG\_IMPP0,  
CMMNTY\_BCKGRNDPO

**Go to 9**

## 8b What religion, religious denomination or body were you brought up in?

- Roman Catholic
- Presbyterian Church in Ireland
- Church of Ireland
- Methodist Church in Ireland
- Other, please write in

RELUPBRPO,  
RELUPBR\_IMPP0,  
CMMNTY\_BCKGRNDPO

None

## 9 What is your country of birth?

- Northern Ireland
- England  Wales
- Scotland  Republic of Ireland
- Elsewhere, please write in the present name of the country

COBPO

## 10 To which of these ethnic groups do you consider you belong?

one box only.

- White
- Chinese
- Irish Traveller
- Indian
- Pakistani
- Bangladeshi
- Black Caribbean
- Black African
- Black Other
- Mixed ethnic group, write in

ETH\_GRPP0,  
ETHNICITYPO,  
ETHNIC\_IMPP0

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- Any other ethnic group, write in

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## 11 Over the last twelve months would you say your health has on the whole been:

- Good?
- Fairly good?
- Not good?

GHEALTHPO,  
GHEALTH\_IMPP0

## 12 Do you look after, or give any help or support to family members, friends, neighbours or others because of:

- long term physical or mental ill-health or disability,
- problems related to old age?

Do not count anything you do as part of your paid employment.

time spent in a typical week.

- No
- Yes, 1-19 hours a week
- Yes, 20-49 hours a week
- Yes, 50+ hours a week

UNPAIDCAREPO,  
UNPAIDCARE\_IMPP0,  
HHCARERS\_COUNTHO



# Person 1 - continued

**13 Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do?**

◆ Include problems which are due to old age.

Yes  No

LLTIPO, LLTI\_IMPP0,  
HLLTI\_COUNTHO

**14 What was your usual address one year ago?**

◆ If you were a child at boarding school or a student one year ago, give the address at which you were living during the school/college/university term.

◆ For a child born after 29 April 2000, ✓ 'No usual address one year ago'.

The address shown on the front of the form

No usual address one year ago

Elsewhere, please write in below

MIGSTATPO, COUNADD1YRPO, MIG\_OAPO,  
MIG\_PARLPO, MIG\_HBPO, MIG\_ELBPO,  
MIG\_NUTSP0, SOAADD1YRPO

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Postcode

**15 If you are aged 16 to 74**

▶ Go to **16**

**If you are aged 15 and under, or 75 and over**

▶ Go to **35**

**16 Which of these qualifications do you have?**

◆ ✓ all the qualifications, or their equivalents, that apply.

GCSE (grades D-G), CSE (grades 2-5)

1-4 CSEs (grade 1), 1-4 GCSEs (grades A-C),  
1-4 'O' Level Passes

5+ CSEs (grade 1), 5+ GCSEs (grades A-C),  
5+ 'O' Level Passes, Senior Certificate

1 'A' Level, 1-3 AS Levels, Advanced Senior  
Certificate

2+ 'A' Levels, 4+ AS Levels

First Degree

Higher Degree

NVQ Level 1,  
GNVQ Foundation

NVQ Level 2,  
GNVQ Intermediate

NVQ Level 3,  
GNVQ Advanced

NVQ Level 4, HNC, HND

NVQ Level 5

EDLEV01PO, EDLEV02PO, EDLEV03PO, EDLEV04PO,  
EDLEV05PO, EDLEV06PO, EDLEV07PO, EDLEV08PO,  
EDLEV09PO, EDLEV10PO, EDLEV11PO, EDLEV12PO,  
EDLEV13PO, EDQUAL\_HIGHP0, EDU\_IMPP0

**17 Last week, were you doing any work:**

- as an employee, or on a Government sponsored training scheme,
- as self-employed/freelance, or
- in your own/family business (including shop or farm)?

◆ ✓ 'Yes' if away from work ill, on maternity leave, on holiday or temporarily laid off.

◆ ✓ 'Yes' for any paid work, including casual or temporary work, even if only for one hour.

◆ ✓ 'Yes' if you worked, paid or unpaid, in your own/family business.

Yes ▶ Go to **23**

No ▶ Go to **18**

ACTLWKPO, ECACTPO,  
EMPSTATPO, ACTLW\_IMPP0

**18 Were you actively looking for any kind of paid work during the last 4 weeks?**

Yes  No

ACTLWKPO, ECACTPO, ACTLW\_IMPP0

**19 If a job had been available last week, could you have started it within 2 weeks?**

Yes  No

ACTLWKPO,  
ECACTPO,  
ACTLW\_IMPP0

**20 Last week, were you waiting to start a job already obtained?**

Yes  No

ACTLWKPO, ECACTPO,  
ACTLW\_IMPP0

**21 Last week, were you any of the following?**

◆ ✓ all the boxes that apply.

Retired

Student

Looking after home/family

Permanently sick/disabled

None of the above

ACTLWKPO,  
ACTLW\_IMPP0

**22 Have you ever worked?**

Yes, please write in the year you last worked

▶ Go to **23**

No, have never worked

▶ Go to **35**

YEARLSTWRKDPO,  
EMPSTATPO,  
COMPSIZEPO

**23 Answer the remaining questions for the main job you were doing last week, or if not working last week, your last main job.**

◆ Your main job is the job in which you usually work the most hours.

**24 Do (did) you work as an employee or are (were) you self-employed?**

Employee

Self-employed with employees

Self-employed/freelance without employees

ECACTPO

**25 How many people work (worked) for your employer at the place where you work (worked)?**

◆ If you are (were) self-employed, ✓ to show how many people you employ (employed).

1-9

10-24

25-499

500 or more

COMPSIZEPO



# Person 1 - continued

**26 What is (was) the full title of your *main* job?** OCCUPPO, NSSECP0

◆ For example, PRIMARY SCHOOL TEACHER, STATE REGISTERED NURSE, CAR MECHANIC, TELEVISION SERVICE ENGINEER, BENEFITS ASSISTANT.  
 ◆ Civil Servants, Local Government Officers - give job title not grade or pay band.

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**27 Describe what you do (did) in your *main* job.** OCCUPPO, NSSECP0

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**28 Do (did) you supervise any other employees?** EACTPO, OCCUPPO, NSSECP0

◆ A supervisor or foreman is responsible for overseeing the work of other employees on a day-to-day basis.

Yes       No

**29 What is (was) the business of your employer at the place where you work (worked)?** INDUSTRYPO

◆ For example, MAKING SHOES, REPAIRING CARS, SECONDARY EDUCATION, FOOD WHOLESALE, CLOTHING RETAIL, DOCTOR'S SURGERY.  
 ◆ If you are (were) self-employed/freelance or have (had) your own business, what is (was) the nature of your business?  
 ◆ Civil Servants, Local Government Officers - please specify your Department.

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**30 If you were working last week**      ▶ Go to 31

**If you were not working last week**      ▶ Go to 35

**31 What is the full name of the organisation you work for in your *main* job?**

◆ Write in the name or ✓ one box below as appropriate.  
 ◆ If you have your own business, write in the name.

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Self-employed/freelance       Work for a private individual

**32 What is the address of the place where you work in your *main* job?**

◆ Write in the address or ✓ one box below as appropriate.  
 ◆ If you report to a depot, write in the depot address.

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Postcode

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Mainly work at or from home       Offshore installation       No fixed place

WP\_LOCP0, WP\_COUNTRYPO, TRVWDISTPO, TRVWDISTGROUPO, TRV\_AOPO, TRV\_PARLPO

**33 How do you usually travel to work?** TRAVWRKPO

◆ ✓ one box only.  
 ◆ ✓ the box for the longest part, by distance, of your usual journey to work.

Work mainly at or from home

Train

Bus, minibus or coach (public or private)

Motor cycle, scooter or moped

Driving a car or van

Car or van pool, sharing driving

Passenger in a car or van

Taxi

Bicycle

On Foot

Other

**34 How many hours a week do you usually work in your *main* job?**

◆ Answer to nearest whole hour.  
 ◆ Give average for last four weeks.

Number of hours worked a week NOHOURSPO, EACTPO

**35 THERE ARE NO MORE QUESTIONS FOR PERSON 1.**

◆ Go to questions for Person 2.

◆ If there are no more people in your household please leave the following pages blank.

◆ Remember to sign the Declaration on the front page.

