

Census Rehearsal

29 March 2009



**Scotland's
Census**
Shaping our future

If there is a mistake in the printed address,
please write your correct address below

House name / number

Street / Town / City

Postcode

Official
Use

CD

ED

Line No.

Why we need your help

We would like you to help with our census rehearsal. The next census is in 2011 and will provide the information needed to plan and fund services in Scotland and in each local community. By completing this questionnaire, you will help us to decide whether the questions, and the way the questionnaires are sent out and returned, are suitable for the census itself. The more completed questionnaires, the better prepared we will be for 2011.

What we would like you to do

We would be very grateful if you could complete this questionnaire - either on paper or (for the first time in the UK) over the internet.

Our pledge to you

All the personal information that you give us will be kept strictly confidential and only used for statistical purposes. No information will be disclosed to anyone outside the census organisation.

Many thanks for your help.

Duncan Macniven

Duncan Macniven

REGISTRAR GENERAL FOR SCOTLAND

Complete this questionnaire

on, or as soon as possible after, 29 March 2009:

- ◆ online at **www.scotlandscensus.gov.uk** using the Internet Questionnaire Access Code below

Internet Questionnaire Access Code:

- ◆ ma tha sibh ag iarraidh an ceisteachan seo a' lionaidh anns a' Ghàidhlig, 's urrainn dhuibh sin a' deanamh air an eadar-lion anns an seòladh seo **www.scotlandscensus.gov.uk**

OR

- ◆ by filling in this paper version and posting it back using the pre-paid envelope provided.

Declaration To be signed after completing this questionnaire.

This questionnaire has been completed to the best of my (our) knowledge and belief.

Signature(s)

Date



Census Helpline 0845 603 1823



Textphone 0845 603 1824



www.scotlandscensus.gov.uk



HO 01

Important guidance - before you start

How to complete this questionnaire

This questionnaire will be scanned by a computer. To make sure your answers are recorded correctly, follow the instructions below.

Please:

- Use black or blue ink
- Tick your answers within the box like this:
- Print your answers, in English, within the box like this:

S	M	I	T	H					
---	---	---	---	---	--	--	--	--	--

 Use capital letters - one per box
- Correct any mistakes like this:

S									
--------------	--	--	--	--	--	--	--	--	--

 or

S	M	S	I	T	H				
---	---	--------------	---	---	---	--	--	--	--
- If a word will not fit on to one line, continue onto the next line (if possible) like this:

1	3	0		L	A	D	Y	W	E	L	L		C	R	E	S
C	E	N	T													

Please do not draw a line through questions or pages as this can be mistaken for an actual answer.

Who should complete this questionnaire?

The householder / joint householder is responsible for completing this questionnaire for their household.

The **householder / joint householder** is the person who lives, or is present, at this address who:

- owns / rents (or jointly owns / rents) the accommodation; and / or
- is responsible (or jointly responsible) for paying the household bills and expenses.

A **household** is:

- one person living alone; or
- a group of people (not necessarily related) living at the same address who share cooking facilities and share a living room or sitting room or dining area.

If there is more than one household at this address, please see 'additional questionnaires' section below.

What should the householder complete on this questionnaire?

Household questions (H1 to H14) - for this household

Individual questions (1 to 38) - for each member of this household

Anyone else staying at this address on the night of 29 March 2009, should be included in questions H4 and H5 (on page 4), and have their details completed in the continuation of H5 on the back page.

Are additional questionnaires needed?

- If there is more than one household at this address, contact the Census Helpline to ask for one or more additional **Household Questionnaire(s)**.
- If there are more than 5 people in this household, either complete the entire questionnaire online or contact the Census Helpline to ask for one or more **Continuation Questionnaire(s)**.
- For any member of this household who does not want to disclose their information to others in the household, an **Individual Questionnaire** with an envelope can be provided. (Remember to include these people in the responses to questions H1 to H14 on this questionnaire, but leave blank their individual questions 1 to 38.)
- You can contact the Census Helpline on 0845 603 1823.



Extra guidance - household members

Children with parents who live apart

Children with parents who live apart should be included as a household member at the address where they **spend the most time**.

If they are staying at the address where they spend the least time on the night of 29 March 2009, they should also be included on the questionnaire at that address, but **only** in questions H4 and H5 (on page 4), and have their details completed in the continuation of H5 on the back page.

If they live equally between two addresses, they should only be included as a household member at the address where they are staying on the night of 29 March 2009.

Students and schoolchildren who live away from home during term-time

All students and schoolchildren living away from home should be included as household members at **both** their term-time and home addresses, and then as follows:

- home address - complete individual questions 1 to 6 only
- term-time address - complete all individual questions (1 to 38)

People from outside the UK

People from outside the UK should **only** be included on a census questionnaire as a household member **if** their total length of stay in the UK will be **6 months or more**.

If their total length of stay is **less than 6 months** they should **only** be included in questions H4 and H5 (on page 4), and have their details completed in the continuation of H5 on the back page.

Absent households

If this address is unoccupied on the night of 29 March 2009 because the whole household is away, the questionnaire should be **completed as soon as possible upon their return**.

People temporarily away from home

Anyone who is away from their **permanent or family home** on the night of 29 March 2009 should be included as a household member at that address. This includes people who are:

- living away from home while working
- members of the Armed Forces
- staying at their second address
- on holiday or travelling
- visiting friends or relatives
- living, or expecting to live, in a residential establishment (such as a hospital, care home or hostel) **for less than 6 months**
- in prison on remand (for any length of time), or **sentenced to less than 6 months** imprisonment

Do not include anyone as a household member who is:

- living, or expecting to live, in a residential establishment **for 6 months or more**
- in prison, **sentenced to 6 months or more** imprisonment

These people will be included at their establishment.

People with more than one UK address, including lodgers

People with more than one UK address should be included as a household member at:

- their permanent or family home; or
- if they do not have a permanent or family home, at the address where they spend the most time.

If they are staying at their second address on the night of 29 March 2009, they should also be included on the questionnaire at that address, but **only** in questions H4 and H5 (on page 4), and have their details completed in the continuation of H5 on the back page.

How census results are used

Census results provide reliable information about the whole population of Scotland. This helps improve people's lives by identifying what Scotland and its local communities need.

Census results are used by Government, health authorities, businesses, community groups and the general public in many ways. They help inform decisions affecting many areas of our lives, including schools, services for the elderly, housing, health, transport and the economy. For example, knowing how many young children there are, and how many people are approaching retirement, helps to plan and fund health services. Census results also help to highlight, and target support for, disadvantaged communities or particular groups of people facing inequality.

Information about individuals and households is protected and kept confidential for 100 years after each census. The records are then available to family historians.

For more information about the different ways census information can be used, visit www.scotlandscensus.gov.uk.



Household questions - people

H1 Who usually lives here (household members)?

- ◆ **Do not** include anyone staying at this address on the night of 29 March 2009 whose permanent or family home is elsewhere in the UK. Include these people in question **H4**.
- ◆ Tick all that apply.
 - Householder / joint householder
 - Family members (including partners) - remember to include children and / or babies born on or before 29 March 2009
 - Students and / or schoolchildren who live away from home during term-time
 - People who work away from home for part of the time, or are members of the Armed Forces, **if this is their permanent or family home**
 - Housemates / flatmates
 - People temporarily away from home on the night of 29 March 2009 (see page 3 for further information)
 - People staying temporarily who do not have another UK address
 - People from outside the UK, who have come to live in or visit the UK, for **6 months or more**

If you require further information on who should be included, see the extra guidance on page 3 or contact us.

H2 Counting everyone you included in question **H1**, how many people usually live here?

H3 Starting with the householder(s), list the names of the people counted in question **H2**. Remember to list children and babies.

- ◆ If a household member wishes to complete an Individual Questionnaire, tick the 'Individual Questionnaire' box beside their name and leave blank the individual questions 1 to 38 for that person.

	First name	Last name	Individual Questionnaire
Person 1			<input type="checkbox"/>
Person 2			<input type="checkbox"/>
Person 3			<input type="checkbox"/>
Person 4			<input type="checkbox"/>
Person 5			<input type="checkbox"/>

If there are more than 5 people in this household, either complete the entire questionnaire online or contact the Census Helpline on 0845 603 1823 to ask for one or more Continuation Questionnaire(s).

H4 Who **else** is staying at this address on the night of 29 March 2009?

- ◆ Tick all that apply.
 - People whose permanent or family home is elsewhere in the UK
 - People who usually live outside the UK and who are staying in the UK for less than 6 months
 - Visitors who usually live somewhere else in the UK, for example, boy / girlfriends, friends, family
 - People on holiday
 - No one else is staying at this address → **Go to H6**

H5 Counting **only** the people you included in question **H4**, how many people are staying at this address on the night of 29 March 2009?

Now → **Go to the back page and record details for these people.**

If there are **only** people staying at this address on the night of 29 March 2009 who are not household members, they should also answer questions **H6** to **H12** (on page 5) and sign the declaration on the front page. No other information is required.



Household questions - accommodation

H6 What type of accommodation is this?

A whole house or bungalow that is:

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

A flat, maisonette, or apartment that is:

- In a tenement or purpose-built block of flats (including '4-in-a-block')
- Part of a converted or shared house (including bed-sits)
- In a commercial building (for example, in an office building, hotel or over a shop)

A mobile or temporary structure:

- A caravan or other mobile or temporary structure

H7 Is this household's accommodation self-contained?

- ◆ This means that all the rooms, including the kitchen, bathroom and toilet, are behind a door that only this household can use.
- Yes, all the rooms are behind a door that only this household can use
- No

H8 How many rooms are available for use only by this household?

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

Number of rooms

H9 Does your household own or rent this accommodation?

- ◆ Tick one box only.
- Owns outright → **Go to H11**
- Owns with a mortgage or loan → **Go to H11**
- Part owns and part rents (shared ownership)
- Rents (with or without housing benefit)
- Lives here rent free

H10 Who is your landlord?

- Council (Local Authority)
- Housing Association / Registered Social Landlord
- Private landlord or letting agency
- Employer of a household member
- Relative or friend of a household member
- Other

H11 What type of central heating does this accommodation have?

- ◆ If the central heating is available, tick the box whether or not you use it.
- No central heating
- Gas
- Electric
- Oil
- Solid fuel
- Other central heating

H12 In total, how many cars or vans are owned, or are available for use, by members of this household?

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

H13 What is your household's total income from all sources over the last 12 months?

- ◆ Count income from every person included in **H2**.
- ◆ Include:
 - all earnings (include overtime, tips, bonuses, self-employment)
 - all pensions
 - all student grants and bursaries (but not loans)
 - all benefits and tax credits (such as child benefit, incapacity benefit)
 - all interest from savings or investments
 - all rent from property (after expenses)
 - other income (such as maintenance or grants)
- ◆ Do not deduct:
 - Taxes, National Insurance contributions, Health Insurance payments, Superannuation payments

Per week	Per year
less than £100	<input type="checkbox"/> less than £5,200
£100 to £199	<input type="checkbox"/> £5,200 to £10,399
£200 to £299	<input type="checkbox"/> £10,400 to £15,599
£300 to £499	<input type="checkbox"/> £15,600 to £25,999
£500 to £699	<input type="checkbox"/> £26,000 to £36,399
£700 to £949	<input type="checkbox"/> £36,400 to £49,399
£950 to £1,199	<input type="checkbox"/> £49,400 to £62,399
£1,200 to £1,499	<input type="checkbox"/> £62,400 to £77,999
£1,500 or more	<input type="checkbox"/> £78,000 or more



Household questions - relationships

H14 How are the members of this household related to each other?

- ◆ Tick a box to show the relationship of each person listed in question **H3** (on page 4) to each of the other members of this household. Remember to include household members who are completing an Individual Questionnaire.
- ◆ Use the same order you used in question **H3** - you may find it helpful to write the name(s) of the household member(s) again in the space provided. Remember to include children and babies.
- ◆ If there are more than 5 people in this household, contact the Census Helpline on 0845 603 1823 to ask for one or more Continuation Questionnaires.

This example shows how to provide relationship information for Robert Smith, who is Person 1, his wife (Mary) and their three children (Alison, Steven and James).

E X A M P L E

Name of Person 1

ROBERT
SMITH

NAME OF PERSON 1
PLEASE USE THE SAME
ORDER AS QUESTION **H3**

Name of Person 2

MARY
SMITH

Relationship of Person 2 to
Person:

1

- | | |
|------------------------|-------------------------------------|
| Husband or wife | <input checked="" type="checkbox"/> |
| Same-sex civil partner | <input type="checkbox"/> |
| Partner | <input type="checkbox"/> |
| Son or daughter | <input type="checkbox"/> |
| Step-child | <input type="checkbox"/> |
| Brother or sister | <input type="checkbox"/> |

Name of Person 3

ALISON
SMITH

Relationship of Person 3
to Persons:

1

2

- | | | |
|------------------------|-------------------------------------|-------------------------------------|
| Husband or wife | <input type="checkbox"/> | <input type="checkbox"/> |
| Same-sex civil partner | <input type="checkbox"/> | <input type="checkbox"/> |
| Partner | <input type="checkbox"/> | <input type="checkbox"/> |
| Son or daughter | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Step-child | <input type="checkbox"/> | <input type="checkbox"/> |
| Brother or sister | <input type="checkbox"/> | <input type="checkbox"/> |

Name of Person 1

NAME OF PERSON 1
PLEASE USE THE SAME
ORDER AS QUESTION **H3**

Name of Person 2

Relationship of Person 2
to Person:

1

- | | |
|---------------------------------------|--------------------------|
| Husband or wife | <input type="checkbox"/> |
| Same-sex civil partner | <input type="checkbox"/> |
| Partner | <input type="checkbox"/> |
| Son or daughter | <input type="checkbox"/> |
| Step-child | <input type="checkbox"/> |
| Brother or sister | <input type="checkbox"/> |
| Step-brother or step-sister | <input type="checkbox"/> |
| Mother or father | <input type="checkbox"/> |
| Step-mother or step-father | <input type="checkbox"/> |
| Grandchild | <input type="checkbox"/> |
| Grandparent | <input type="checkbox"/> |
| Other relation | <input type="checkbox"/> |
| Unrelated
(including foster child) | <input type="checkbox"/> |

Name of Person 3

Relationship of Person 3
to Persons:

1

2

- | | | |
|---------------------------------------|--------------------------|--------------------------|
| Husband or wife | <input type="checkbox"/> | <input type="checkbox"/> |
| Same-sex civil partner | <input type="checkbox"/> | <input type="checkbox"/> |
| Partner | <input type="checkbox"/> | <input type="checkbox"/> |
| Son or daughter | <input type="checkbox"/> | <input type="checkbox"/> |
| Step-child | <input type="checkbox"/> | <input type="checkbox"/> |
| Brother or sister | <input type="checkbox"/> | <input type="checkbox"/> |
| Step-brother or step-sister | <input type="checkbox"/> | <input type="checkbox"/> |
| Mother or father | <input type="checkbox"/> | <input type="checkbox"/> |
| Step-mother or step-father | <input type="checkbox"/> | <input type="checkbox"/> |
| Grandchild | <input type="checkbox"/> | <input type="checkbox"/> |
| Grandparent | <input type="checkbox"/> | <input type="checkbox"/> |
| Other relation | <input type="checkbox"/> | <input type="checkbox"/> |
| Unrelated
(including foster child) | <input type="checkbox"/> | <input type="checkbox"/> |



Name of Person 4

STEVEN
SMITH

Relationship of Person 4 to
Persons:

	1	2	3
Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Name of Person 5

JAMES
SMITH

Relationship of Person 5
to Persons:

	1	2	3	4
Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Name of Person 4

Relationship of Person 4
to Persons:

	1	2	3
Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-brother or step-sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother or father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-mother or step-father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandchild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandparent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other relation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unrelated (including foster child)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Name of Person 5

Relationship of Person 5
to Persons:

	1	2	3	4
Husband or wife	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Same-sex civil partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Son or daughter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother or sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-brother or step-sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother or father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Step-mother or step-father	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandchild	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandparent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other relation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unrelated (including foster child)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Person 1 - Individual questions

1 What is your name? (Person 1 at H3 on page 4)

First name

Last name

2 What is your sex?

Male Female

3 What is your date of birth?

Day Month Year

4 On the 29 March 2009, what is your legal marital or same-sex civil partnership status?

- | | |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership |
| <input type="checkbox"/> Married | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership |
| <input type="checkbox"/> Separated, but still legally married | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Surviving partner from a same-sex civil partnership |
| <input type="checkbox"/> Widowed | |

5 Which of these are you?

- A schoolchild
 A full-time student
 Neither of these → Go to 7

6 During term-time, do you live:

- At the address on the front of this questionnaire
 At another address → Go to 38

7 What is your country of birth?

- Scotland → Go to 9
 England → Go to 9
 Wales → Go to 9
 Northern Ireland → Go to 9
 Republic of Ireland
 Elsewhere, please write in the current name of the country

8 If you were not born in the United Kingdom, when did you most recently arrive to live here?

- ◆ Do not count short visits away from the UK.

Month Year

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

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

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

- No
 Yes, 1-19 hours a week
 Yes, 20-34 hours a week
 Yes, 35-49 hours a week
 Yes, 50+ hours a week

10 One year ago, what was your usual address?

Same as Person 1

- The address on the front of this questionnaire
 Student term-time/boarding school address in the UK, please write in below
 Another address in the UK, please write in below

- Outside the UK, please write in country below

- No usual address one year ago (such as babies not born one year ago)

11 What address do you travel to for your main job or course of study (including school)?

- ◆ Answer for the place where you spend the most time.
 ◆ If you report to a depot, please write in the depot address.

- Not currently working or studying → Go to 13
 Work or study mainly at or from home → Go to 13
 No fixed place
 Work on offshore installation, please use the address panel below to write in where you travel offshore from, for example "ABERDEEN"
 The address below, please write in

Postcode



Person 1 - Individual questions continued

12 How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.

- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

13 What religion, religious denomination or body do you belong to?

- None
- Church of Scotland
- Roman Catholic
- Other Christian
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Pagan
- Another religion, please write in

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14 How would you describe your national identity?

- ◆ Tick all that apply.
- Scottish
- English
- British
- Polish
- Indian
- Other, please write in

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

15 What is your ethnic group?

- ◆ Choose **ONE** section from A to E, then tick **ONE** box which **best describes** your ethnic group or background.

A White

- Scottish
- English
- Welsh
- Northern Irish
- British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

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B Mixed or multiple ethnic groups

- Any mixed or multiple ethnic groups, please write in

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C Asian, Asian Scottish or Asian British

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

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

D African, Caribbean or Black

- African, African Scottish or African British
- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

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

E Other ethnic group

- Arab
- Other, please write in

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Person 1 - Individual questions continued

25 Were you actively looking for any kind of paid work during the last four weeks?

Yes No

26 If a job had been available last week, could you have started it within two weeks?

Yes No

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

Yes No

28 Last week were you:

◆ Tick all that apply.

- retired (whether receiving a pension or not)?
- a student?
- looking after home or family?
- long-term sick or disabled?
- other

29 Have you ever worked?

Yes, please write in the year you last worked

→ Go to **30**

No, have never worked → Go to **38**

30 Answer the remaining questions for your main job or, if not working, your last main job.

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

31 In your main job, are (were) you:

- an employee?
- self-employed or freelance without employees?
- self-employed with employees?

32 What is (was) your full and specific job title?

◆ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.

◆ Do not state your grade or pay band.

33 Briefly describe what you do (did) in your main job.

34 Do (did) you supervise any employees?

◆ Supervision involves overseeing the work of other employees on a day-to-day basis.

Yes No

35 How many hours (to the nearest full hour) a week do (did) you usually work in your main job?

Number of hours worked in a typical week

36 At your workplace, what is (was) the main activity of your employer or business?

◆ For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY.

◆ If you are (were) a civil servant, please write GOVERNMENT.

◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.

37 In your main job, what is (was) the name of the organisation you work (worked) for?

◆ If you are (were) self-employed in your own organisation, please write in the business name.

No organisation, for example, self-employed, freelance, or work (worked) for a private individual.

38 There are no more questions for Person 1.

◆ If there are no more people in your household you do not need to answer any more questions; please leave the following pages blank.

◆ Remember to sign the declaration on page 1.

◆ Otherwise, go to questions for Person 2.



Person 2 - Individual questions

1 What is your name? (Person 2 at **H3** on page 4)

First name

Last name

2 What is your sex?

Male Female

3 What is your date of birth?

Day Month Year

4 On the 29 March 2009, what is your legal marital or same-sex civil partnership status?

- Never married and never registered a same-sex civil partnership
- Married In a registered same-sex civil partnership
- Separated, but still legally married Separated, but still legally in a same-sex civil partnership
- Divorced Formerly in a same-sex civil partnership which is now legally dissolved
- Widowed Surviving partner from a same-sex civil partnership

5 Which of these are you?

- A schoolchild
- A full-time student
- Neither of these → **Go to 7**

6 During term-time, do you live:

- At the address on the front of this questionnaire
- At another address → **Go to 38**

7 What is your country of birth?

- Scotland → **Go to 9**
- England → **Go to 9**
- Wales → **Go to 9**
- Northern Ireland → **Go to 9**
- Republic of Ireland
- Elsewhere, please write in the current name of the country

8 If you were not born in the United Kingdom, when did you most recently arrive to live here?

- ◆ Do not count short visits away from the UK.

Month Year

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

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

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

- No
- Yes, 1-19 hours a week
- Yes, 20-34 hours a week
- Yes, 35-49 hours a week
- Yes, 50+ hours a week

10 One year ago, what was your usual address?

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time/boarding school address in the UK, please write in below
- Another address in the UK, please write in below

- Outside the UK, please write in country below

- No usual address one year ago (such as babies not born one year ago)

11 What address do you travel to for your main job or course of study (including school)?

- ◆ Answer for the place where you spend the most time.
- ◆ If you report to a depot, please write in the depot address.

- Not currently working or studying → **Go to 13**

- Work or study mainly at or from home → **Go to 13**

- No fixed place

- Work on offshore installation, please use the address panel below to write in where you travel offshore from, for example "ABERDEEN"

- The address below, please write in



Person 2 - Individual questions continued

16 Which of these can you do?

◆ Tick all that apply.

	English	Scottish Gaelic
Understand	<input type="checkbox"/>	<input type="checkbox"/>
Speak	<input type="checkbox"/>	<input type="checkbox"/>
Read	<input type="checkbox"/>	<input type="checkbox"/>
Write	<input type="checkbox"/>	<input type="checkbox"/>

or

None of these

17 How well can you speak English?

Very well Well Not well Not at all

18 Do you use a language other than English at home?

◆ Tick all that apply.

- No, English only
- Yes, Scottish Gaelic
- Yes, Scots
- Yes, British Sign Language
- Yes, other(s) - please write in

19 How is your health in general?

Very Good Good Fair Bad Very Bad

20 Do you have any of the following conditions which have lasted, or are expected to last, at least 12 months?

◆ Tick all that apply.

- Deafness or severe hearing impairment
- Blindness or severe vision impairment
- A physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
- A learning disability (such as Down's Syndrome)
- A learning difficulty (such as dyslexia or dyspraxia)
- A mental health condition (such as depression or schizophrenia)
- A chronic illness (such as cancer, HIV, diabetes, heart disease or epilepsy)
- Other condition
- No

21 Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

◆ Include problems related to old age.

- Yes, limited a lot
- Yes, limited a little
- No

22 If you are aged 16 or over → Go to **23**

If you are aged 15 or under → Go to **38**

23 Which of these qualifications do you have?

◆ Tick all that apply.

- O Grade, Standard Grade, Access 3 Cluster, Intermediate 1 or 2, GCSE, CSE, Senior Certificate or equivalent
- SCE Higher Grade, Higher, Advanced Higher, CSYS, A Level, AS Level, Advanced Senior Certificate or equivalent
- GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent
- GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent
- HNC, HND, SVQ level 4 or equivalent
- First Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent
- Professional qualifications e.g. teaching, accountancy
- Other school qualifications not already mentioned (including foreign qualifications)
- Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)
- Other Higher Education qualifications not already mentioned (including foreign qualifications)
- No qualifications

24 Last week were you:

◆ Tick all that apply.

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

- working as an employee? → Go to **30**
- on a Government sponsored training scheme? → Go to **30**
- self-employed or freelance? → Go to **30**
- working paid or unpaid for your own or your family's business? → Go to **30**
- away from work ill, on maternity leave, on holiday or temporarily laid off? → Go to **30**
- doing any other kind of paid work? → Go to **30**
- none of the above



Person 2 - Individual questions continued

25 Were you actively looking for any kind of paid work during the last four weeks?

Yes No

26 If a job had been available last week, could you have started it within two weeks?

Yes No

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

Yes No

28 Last week were you:

◆ Tick all that apply.

retired (whether receiving a pension or not)?

a student?

looking after home or family?

long-term sick or disabled?

other

29 Have you ever worked?

Yes, please write in the year you last worked

→ Go to **30**

No, have never worked → Go to **38**

30 Answer the remaining questions for your main job or, if not working, your last main job.

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

31 In your main job, are (were) you:

an employee?

self-employed or freelance without employees?

self-employed with employees?

32 What is (was) your full and specific job title?

◆ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.

◆ Do not state your grade or pay band.

33 Briefly describe what you do (did) in your main job.

34 Do (did) you supervise any employees?

◆ Supervision involves overseeing the work of other employees on a day-to-day basis.

Yes No

35 How many hours (to the nearest full hour) a week do (did) you usually work in your main job?

Number of hours worked in a typical week

36 At your workplace, what is (was) the main activity of your employer or business?

◆ For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY.

◆ If you are (were) a civil servant, please write GOVERNMENT.

◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.

37 In your main job, what is (was) the name of the organisation you work (worked) for?

◆ If you are (were) self-employed in your own organisation, please write in the business name.

No organisation, for example, self-employed, freelance, or work (worked) for a private individual.

38 There are no more questions for Person 2.

◆ If there are no more people in your household you do not need to answer any more questions; please leave the following pages blank.

◆ Remember to sign the declaration on page 1.

◆ Otherwise, go to questions for Person 3.



Person 3 - Individual questions

1 What is your name? (Person 3 at H3 on page 4)

First name

Last name

2 What is your sex?

Male Female

3 What is your date of birth?

Day Month Year

4 On the 29 March 2009, what is your legal marital or same-sex civil partnership status?

- | | |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership |
| <input type="checkbox"/> Married | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership |
| <input type="checkbox"/> Separated, but still legally married | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Surviving partner from a same-sex civil partnership |
| <input type="checkbox"/> Widowed | |

5 Which of these are you?

- A schoolchild
 A full-time student
 Neither of these → Go to 7

6 During term-time, do you live:

- At the address on the front of this questionnaire
 At another address → Go to 38

7 What is your country of birth?

- Scotland → Go to 9
 England → Go to 9
 Wales → Go to 9
 Northern Ireland → Go to 9
 Republic of Ireland
 Elsewhere, please write in the current name of the country

8 If you were not born in the United Kingdom, when did you most recently arrive to live here?

- ◆ Do not count short visits away from the UK.

Month Year

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

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

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

- No
 Yes, 1-19 hours a week
 Yes, 20-34 hours a week
 Yes, 35-49 hours a week
 Yes, 50+ hours a week

10 One year ago, what was your usual address?

- Same as Person 1
 The address on the front of this questionnaire
 Student term-time/boarding school address in the UK, please write in below
 Another address in the UK, please write in below

- Outside the UK, please write in country below

- No usual address one year ago (such as babies not born one year ago)

11 What address do you travel to for your main job or course of study (including school)?

- ◆ Answer for the place where you spend the most time.
 ◆ If you report to a depot, please write in the depot address.

- Not currently working or studying → Go to 13
 Work or study mainly at or from home → Go to 13
 No fixed place
 Work on offshore installation, please use the address panel below to write in where you travel offshore from, for example "ABERDEEN"
 The address below, please write in



Person 3 - Individual questions continued

16 Which of these can you do?

◆ Tick all that apply.

	English	Scottish Gaelic
Understand	<input type="checkbox"/>	<input type="checkbox"/>
Speak	<input type="checkbox"/>	<input type="checkbox"/>
Read	<input type="checkbox"/>	<input type="checkbox"/>
Write	<input type="checkbox"/>	<input type="checkbox"/>

or

None of these

17 How well can you speak English?

Very well Well Not well Not at all

18 Do you use a language other than English at home?

◆ Tick all that apply.

- No, English only
- Yes, Scottish Gaelic
- Yes, Scots
- Yes, British Sign Language
- Yes, other(s) - please write in

19 How is your health in general?

Very Good Good Fair Bad Very Bad

20 Do you have any of the following conditions which have lasted, or are expected to last, at least 12 months?

◆ Tick all that apply.

- Deafness or severe hearing impairment
- Blindness or severe vision impairment
- A physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)
- A learning disability (such as Down's Syndrome)
- A learning difficulty (such as dyslexia or dyspraxia)
- A mental health condition (such as depression or schizophrenia)
- A chronic illness (such as cancer, HIV, diabetes, heart disease or epilepsy)
- Other condition
- No

21 Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

◆ Include problems related to old age.

- Yes, limited a lot
- Yes, limited a little
- No

22 If you are aged 16 or over → Go to **23**

If you are aged 15 or under → Go to **38**

23 Which of these qualifications do you have?

◆ Tick all that apply.

- O Grade, Standard Grade, Access 3 Cluster, Intermediate 1 or 2, GCSE, CSE, Senior Certificate or equivalent
- SCE Higher Grade, Higher, Advanced Higher, CSYS, A Level, AS Level, Advanced Senior Certificate or equivalent
- GSVQ Foundation or Intermediate, SVQ level 1 or 2, SCOTVEC Module, City and Guilds Craft or equivalent
- GSVQ Advanced, SVQ level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft or equivalent
- HNC, HND, SVQ level 4 or equivalent
- First Degree, Postgraduate qualifications, Masters, PhD, SVQ level 5 or equivalent
- Professional qualifications e.g. teaching, accountancy
- Other school qualifications not already mentioned (including foreign qualifications)
- Other post-school but pre-Higher Education qualifications not already mentioned (including foreign qualifications)
- Other Higher Education qualifications not already mentioned (including foreign qualifications)
- No qualifications

24 Last week were you:

◆ Tick all that apply.

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

- working as an employee? → Go to **30**
- on a Government sponsored training scheme? → Go to **30**
- self-employed or freelance? → Go to **30**
- working paid or unpaid for your own or your family's business? → Go to **30**
- away from work ill, on maternity leave, on holiday or temporarily laid off? → Go to **30**
- doing any other kind of paid work? → Go to **30**
- none of the above



Person 3 - Individual questions continued

25 Were you actively looking for any kind of paid work during the last four weeks?

- Yes No

26 If a job had been available last week, could you have started it within two weeks?

- Yes No

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

- Yes No

28 Last week were you:

- ◆ Tick all that apply.
- retired (whether receiving a pension or not)?
- a student?
- looking after home or family?
- long-term sick or disabled?
- other

29 Have you ever worked?

- Yes, please write in the year you last worked

→ Go to **30**

- No, have never worked → Go to **38**

30 Answer the remaining questions for your main job or, if not working, your last main job.

- ◆ Your main job is the job in which you usually work (worked) the most hours.

31 In your main job, are (were) you:

- an employee?
- self-employed or freelance without employees?
- self-employed with employees?

32 What is (was) your full and specific job title?

- ◆ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.
- ◆ Do not state your grade or pay band.

33 Briefly describe what you do (did) in your main job.

34 Do (did) you supervise any employees?

- ◆ Supervision involves overseeing the work of other employees on a day-to-day basis.
- Yes No

35 How many hours (to the nearest full hour) a week do (did) you usually work in your main job?

Number of hours worked in a typical week

36 At your workplace, what is (was) the main activity of your employer or business?

- ◆ For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY.
- ◆ If you are (were) a civil servant, please write GOVERNMENT.
- ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.

37 In your main job, what is (was) the name of the organisation you work (worked) for?

- ◆ If you are (were) self-employed in your own organisation, please write in the business name.

- No organisation, for example, self-employed, freelance, or work (worked) for a private individual.

38 There are no more questions for Person 3.

- ◆ If there are no more people in your household you do not need to answer any more questions; please leave the following pages blank.
- ◆ Remember to sign the declaration on page 1.
- ◆ Otherwise, go to questions for Person 4.



Person 4 - Individual questions

1 What is your name? (Person 4 at H3 on page 4)

First name

Last name

2 What is your sex?

Male Female

3 What is your date of birth?

Day Month Year

4 On the 29 March 2009, what is your legal marital or same-sex civil partnership status?

- | | |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership |
| <input type="checkbox"/> Married | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership |
| <input type="checkbox"/> Separated, but still legally married | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Surviving partner from a same-sex civil partnership |
| <input type="checkbox"/> Widowed | |

5 Which of these are you?

- A schoolchild
- A full-time student
- Neither of these → Go to 7

6 During term-time, do you live:

- At the address on the front of this questionnaire
- At another address → Go to 38

7 What is your country of birth?

- Scotland → Go to 9
- England → Go to 9
- Wales → Go to 9
- Northern Ireland → Go to 9
- Republic of Ireland
- Elsewhere, please write in the current name of the country

8 If you were not born in the United Kingdom, when did you most recently arrive to live here?

- ◆ Do not count short visits away from the UK.

Month Year

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

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

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

- No
- Yes, 1-19 hours a week
- Yes, 20-34 hours a week
- Yes, 35-49 hours a week
- Yes, 50+ hours a week

10 One year ago, what was your usual address?

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time/boarding school address in the UK, please write in below
- Another address in the UK, please write in below

- Outside the UK, please write in country below

- No usual address one year ago (such as babies not born one year ago)

11 What address do you travel to for your main job or course of study (including school)?

- ◆ Answer for the place where you spend the most time.
- ◆ If you report to a depot, please write in the depot address.

- Not currently working or studying → Go to 13
- Work or study mainly at or from home → Go to 13
- No fixed place
- Work on offshore installation, please use the address panel below to write in where you travel offshore from, for example "ABERDEEN"
- The address below, please write in



Person 4 - Individual questions continued

12 How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.

- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

13 What religion, religious denomination or body do you belong to?

- None
- Church of Scotland
- Roman Catholic
- Other Christian
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Pagan
- Another religion, please write in

14 How would you describe your national identity?

- ◆ Tick all that apply.
- Scottish
- English
- British
- Polish
- Indian
- Other, please write in

15 What is your ethnic group?

- ◆ Choose **ONE** section from A to E, then tick **ONE** box which **best describes** your ethnic group or background.

A White

- Scottish
- English
- Welsh
- Northern Irish
- British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

B Mixed or multiple ethnic groups

- Any mixed or multiple ethnic groups, please write in

C Asian, Asian Scottish or Asian British

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

D African, Caribbean or Black

- African, African Scottish or African British
- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

E Other ethnic group

- Arab
- Other, please write in



Person 4 - Individual questions continued

25 Were you actively looking for any kind of paid work during the last four weeks?

Yes No

26 If a job had been available last week, could you have started it within two weeks?

Yes No

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

Yes No

28 Last week were you:

- ◆ Tick all that apply.
- retired (whether receiving a pension or not)?
- a student?
- looking after home or family?
- long-term sick or disabled?
- other

29 Have you ever worked?

Yes, please write in the year you last worked

→ **Go to 30**

No, have never worked → **Go to 38**

30 Answer the remaining questions for your main job or, if not working, your last main job.

- ◆ Your main job is the job in which you usually work (worked) the most hours.

31 In your main job, are (were) you:

- an employee?
- self-employed or freelance without employees?
- self-employed with employees?

32 What is (was) your full and specific job title?

- ◆ For example, PRIMARY SCHOOL TEACHER, CAR MECHANIC, DISTRICT NURSE, STRUCTURAL ENGINEER.
- ◆ Do not state your grade or pay band.

33 Briefly describe what you do (did) in your main job.

34 Do (did) you supervise any employees?

- ◆ Supervision involves overseeing the work of other employees on a day-to-day basis.
- Yes No

35 How many hours (to the nearest full hour) a week do (did) you usually work in your main job?

Number of hours worked in a typical week

36 At your workplace, what is (was) the main activity of your employer or business?

- ◆ For example, PRIMARY EDUCATION, REPAIRING CARS, CONTRACT CATERING, COMPUTER SERVICING, DOCTOR'S SURGERY.
- ◆ If you are (were) a civil servant, please write GOVERNMENT.
- ◆ If you are (were) a local government officer, please write LOCAL GOVERNMENT and give the name of your department within the local authority.

37 In your main job, what is (was) the name of the organisation you work (worked) for?

- ◆ If you are (were) self-employed in your own organisation, please write in the business name.

No organisation, for example, self-employed, freelance, or work (worked) for a private individual.

38 There are no more questions for Person 4.

- ◆ If there are no more people in your household you do not need to answer any more questions; please leave the following pages blank.
- ◆ Remember to sign the declaration on page 1.
- ◆ Otherwise, go to questions for Person 5.



Person 5 - Individual questions

1 What is your name? (Person 5 at H3 on page 4)

First name

Last name

2 What is your sex?

Male Female

3 What is your date of birth?

Day Month Year

4 On the 29 March 2009, what is your legal marital or same-sex civil partnership status?

- | | |
|--|--|
| <input type="checkbox"/> Never married and never registered a same-sex civil partnership | <input type="checkbox"/> In a registered same-sex civil partnership |
| <input type="checkbox"/> Married | <input type="checkbox"/> Separated, but still legally in a same-sex civil partnership |
| <input type="checkbox"/> Separated, but still legally married | <input type="checkbox"/> Formerly in a same-sex civil partnership which is now legally dissolved |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Surviving partner from a same-sex civil partnership |
| <input type="checkbox"/> Widowed | |

5 Which of these are you?

- A schoolchild
- A full-time student
- Neither of these → Go to 7

6 During term-time, do you live:

- At the address on the front of this questionnaire
- At another address → Go to 38

7 What is your country of birth?

- Scotland → Go to 9
- England → Go to 9
- Wales → Go to 9
- Northern Ireland → Go to 9
- Republic of Ireland
- Elsewhere, please write in the current name of the country

8 If you were not born in the United Kingdom, when did you most recently arrive to live here?

- ◆ Do not count short visits away from the UK.

Month Year

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

- long-term physical / mental ill-health / disability; or
 - problems related to old age?
- ◆ Do not count anything you do as part of your paid employment.
- No
- Yes, 1-19 hours a week
- Yes, 20-34 hours a week
- Yes, 35-49 hours a week
- Yes, 50+ hours a week

10 One year ago, what was your usual address?

- Same as Person 1
- The address on the front of this questionnaire
- Student term-time/boarding school address in the UK, please write in below
- Another address in the UK, please write in below

- Outside the UK, please write in country below

- No usual address one year ago (such as babies not born one year ago)

11 What address do you travel to for your main job or course of study (including school)?

- ◆ Answer for the place where you spend the most time.
- ◆ If you report to a depot, please write in the depot address.
- Not currently working or studying → Go to 13
- Work or study mainly at or from home → Go to 13
- No fixed place
- Work on offshore installation, please use the address panel below to write in where you travel offshore from, for example "ABERDEEN"
- The address below, please write in



Person 5 - Individual questions continued

12 How do you usually travel to your main place of work or study (including school)?

- ◆ Tick one box only.
- ◆ Tick the box for the longest part, by distance, of your usual journey to work or study.

- Driving a car or van
- Passenger in a car or van
- On foot
- Bus, minibus or coach
- Train
- Underground, subway, metro, light rail or tram
- Taxi
- Bicycle
- Motorcycle, scooter or moped
- Other

13 What religion, religious denomination or body do you belong to?

- None
- Church of Scotland
- Roman Catholic
- Other Christian
- Muslim
- Buddhist
- Sikh
- Jewish
- Hindu
- Pagan
- Another religion, please write in

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

14 How would you describe your national identity?

- ◆ Tick all that apply.
- Scottish
- English
- British
- Polish
- Indian
- Other, please write in

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

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

15 What is your ethnic group?

- ◆ Choose **ONE** section from A to E, then tick **ONE** box which **best describes** your ethnic group or background.

A White

- Scottish
- English
- Welsh
- Northern Irish
- British
- Irish
- Gypsy / Traveller
- Polish
- Other white ethnic group, please write in

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

B Mixed or multiple ethnic groups

- Any mixed or multiple ethnic groups, please write in

C Asian, Asian Scottish or Asian British

- Pakistani, Pakistani Scottish or Pakistani British
- Indian, Indian Scottish or Indian British
- Bangladeshi, Bangladeshi Scottish or Bangladeshi British
- Chinese, Chinese Scottish or Chinese British
- Other, please write in

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

D African, Caribbean or Black

- African, African Scottish or African British
- Caribbean, Caribbean Scottish or Caribbean British
- Black, Black Scottish or Black British
- Other, please write in

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

E Other ethnic group

- Arab
- Other, please write in

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



Question H5 continued - person details

- ◆ Record details for the people included at question H5 (on page 4). Remember to include children and babies.
- ◆ You are only required to provide details for up to three people.
- ◆ Once you have finished, return to question H6 (on page 5) and complete the rest of the questionnaire. However, if there are **only** people staying at this address on the night of 29 March 2009 who are not household members, only answer questions H6 to H12 (on page 5) and sign the declaration on the front page.

Person A

V1 What is this person's name?

First name

Last name

V2 What is this person's sex?

Male Female

V3 What is this person's date of birth?

Day Month Year

V4 What is this person's usual address?

Postcode

OR outside the UK, please write in country

Country

Person B

V1 What is this person's name?

First name

Last name

V2 What is this person's sex?

Male Female

V3 What is this person's date of birth?

Day Month Year

V4 What is this person's usual address?

Postcode

OR outside the UK, please write in country

Country

Person C

V1 What is this person's name?

First name

Last name

V2 What is this person's sex?

Male Female

V3 What is this person's date of birth?

Day Month Year

V4 What is this person's usual address?

Postcode

OR outside the UK, please write in country

Country

