

ZA5353 / ZA5656

**Children of Immigrants Longitudinal Survey
in Four European Countries
(CILS4EU)**

**Field Questionnaire
England**

Questions about you

1 Are you a boy or a girl?

030

Boy ₁
 Girl ₂

2 What is your date of birth?

031 - 036

Day Month Year

Attention: Remember to check for a "Go to" instruction after you answer the question below.

3 In which country were you born?

037 - 038

Britain ₀₁ → **Go to** **5**
 Bangladesh ₀₂
 China ₀₃
 India ₀₄
 Jamaica ₀₅
 Nigeria ₀₆
 Pakistan ₀₇
 Turkey ₀₈
 Other country ₀₉ → **Please write in:**

Spare columns 039 – 053

4 How old were you when you moved to Britain?

054 - 055

In years:

5 What is your nationality? (If you have a passport, just give the name of the country which your passport is from). If you have more than one nationality, please cross all of them.

056 - 065

British ₀₁
 Bangladeshi ₀₂
 Chinese ₀₃
 Indian ₀₄
 Jamaican ₀₅
 Nigerian ₀₆
 Pakistani ₀₇
 Turkish ₀₈
 Other nationality ₀₉ → **Please write in:**
 Don't know ₁₀

Spare Columns 066- 079

6 How well do you think you can ...

	Not at all	Not well	Well	Very well	Excellently	
...speak English?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	080
...understand English?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	081
...read English?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	082
...write English?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	083

Attention: Remember to check for a "Go to" instruction after you answer the question below.

7 Is there a language other than English spoken at your home?

Yes 1 084

No 2 → **Go to 11**

8 Which language is this?

Punjabi 01 085-100

Gujarati 02

Bengali 03

Urdu 04

Hindi 05

Cantonese 06

Turkish 07

Other 08 → Please write in:

9 Thinking about the language you have just crossed, how well do you think you can...

	Not at all	Not well	Well	Very well	Excellently	
... speak this language?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	101
... understand this language?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	102
... read this language?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	103
... write this language?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	104

10 Still thinking about the language you crossed, how often do you use this language for...

	Always	Often	Sometimes	Never	
... talking to your family?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	105
... doing things on the computer?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	106
... listening to music?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	107
... watching TV?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	108

Your School

11 Which school subject do you like most?

109 - 110

Spare columns 111 – 124

12 Which school subject do you like least?

125 - 126

Spare columns 127 – 140

13 What is the highest level of education you wish to have?

141

- No qualifications 1
- GCSEs (or a similar level) 2
- A Levels or AS Levels (or a similar level) 3
- University degree 4
- Don't know 5

14 What is the highest level of education that you think you will actually get?

142

- No qualifications 1
- GCSEs (or a similar level) 2
- A Levels or AS Levels (or a similar level) 3
- University degree 4
- Don't know 5

15 What is the highest level of education that your parents would like you to get?

143

- No qualifications 1
- GCSEs (or a similar level) 2
- A Levels or AS Levels (or a similar level) 3
- University degree 4
- Don't know 5

16 How well are you doing at school in these subjects?

	Very well	Quite well	OK	Not that well	Not at all well	
Maths	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	144
English	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	145

Attention: Remember to check for a "Go to" instruction after you answer the question below.

17 Is there a setting system at your school?

Yes	<input type="checkbox"/>					
No	<input type="checkbox"/>	→	Go to	19		146

18 Which set were you in for the last school year?

In Maths:	<input type="text"/>	147 – 150
In English:	<input type="text"/>	151 – 154

19 How much do you agree or disagree with each of these statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
I am sure that I can do well at school.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	155
School is not for people like me.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	156
I am sure that I can get good marks at school.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	157
It is very important to me to get good marks.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	158
I put a great deal of effort into my school work.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	159
Education is very important for getting a good life later on.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	160
It is very important to me to get an education at least as high as my parents.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	161

Spare columns 162 - 176

20 How often during breaks at school do you spend time with...
(Please cross one box on each line)

	Every day	Once or several times a week	Once or several times a month	Less often	Never	There are no students from this background in my school	
...students from a White British background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	177
...students from a Black or Black British background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	178
...students from an Asian or Asian British background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	179
...students from any other background?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	180

21 How often do you ...

	Every day	Once or several times a week	Once or several times a month	Less often	Never	
... answer back to your teachers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	181
... get a punishment at school (such as being sent out of class, writing lines, getting a detention)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	182
... skip a lesson without permission?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	183
... arrive late at school?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	184

22 How much do you agree or disagree with each of these statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
My parents show a lot of interest in my marks and results at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	185
My parents tell me that they are proud of me when I get good results at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	186
My parents encourage me to work hard at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	187
I get the help I need from the teachers at my school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	188
My teachers encourage me to get good results at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	189
There are teachers at my school who treat me unfairly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	190

Questions about your family

Attention: Remember to check for a "Go to" instruction after you answer the question below.

The following questions are about your biological mother.

If she is no longer alive or if you are not in touch with her, please answer the questions as best as you can.

23 In which country was your biological mother born?

Britain	<input type="checkbox"/>	01	→	Go to	25	191 – 192
Bangladesh	<input type="checkbox"/>	02				
China	<input type="checkbox"/>	03				
India	<input type="checkbox"/>	04				
Jamaica	<input type="checkbox"/>	05				
Nigeria	<input type="checkbox"/>	06				
Pakistan	<input type="checkbox"/>	07				
Turkey	<input type="checkbox"/>	08				
Other country	<input type="checkbox"/>	09	→	Please write in:		
I don't know the country	<input type="checkbox"/>	10	→	Go to	25	Spare columns 193 – 207

24 How often do you visit this country?

Twice a year or more	<input type="checkbox"/>	1				208
Once a year	<input type="checkbox"/>	2				
Less than once a year	<input type="checkbox"/>	3				
Never	<input type="checkbox"/>	4				

25

	Yes	No	Don't know	
Did your mother finish her primary schooling? (or a similar foreign level of education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	209
Did your mother finish secondary schooling and get A Levels? (or a similar foreign level of education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	210
Did your mother finish university and get a degree?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	211
Does your mother have a job at the moment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	212

26 Think about your mother's job or, if she is not working at the moment, think about her last job. Please write in the name of her job and a description of what she does in this job. If you don't know the name of the job, please describe what she does in her job as best as you can.

Name of job:	213
Description of job:	
	1

She has never worked before 2

Spare columns 214 – 242

Attention: Remember to check for a "Go to" instruction after you answer the question below.

27 How often do you usually see your mother?

- Every day ₁
- Once or several times a week ₂
- Once or several times a month ₃
- Less often ₄
- Never ₅ → Go to **29**

243

28 How well do you get along with your mother?

- Very well ₁
- Well ₂
- Not so well ₃
- Not well at all ₄

244

Attention: Remember to check for a "Go to" instruction after you answer the question below.

The following questions are about your biological father.

If he is no longer alive or if you are not in touch with him, please answer the questions as best as you can.

29 In which country was your biological father born?

- Britain ₀₁ → Go to **31**
- Bangladesh ₀₂
- China ₀₃
- India ₀₄
- Jamaica ₀₅
- Nigeria ₀₆
- Pakistan ₀₇
- Turkey ₀₈
- Other country ₀₉ → Please write in:
- I don't know the country ₁₀ → Go to **31**

245 – 246

Spare columns 247 – 260

30 How often do you visit this country?

- Twice a year or more ₁
- Once a year ₂
- Less than once a year ₃
- Never ₄

261

31

Yes No Don't know

Did your father finish his primary schooling?
(or a similar foreign level of education)

262

Did your father finish his secondary schooling and
get A Levels? (or a similar foreign level of education)

263

Did your father finish university and get a degree?

264

Does your father have a job at the moment?

265

32

Think about your father's job or, if he is not working at the moment, about his last job. Please write in the name of his job and a description of what he does in this job. If you don't know the name of the job, please describe what he does in his job as best as you can.

Name of job:
Description of job:

266

He has never worked before

Spare columns 267 – 295

Attention: Remember to check for a "Go to" instruction after you answer the question below.

33

How often do you usually see your father?

- Every day
- Once or several times a week
- Once or several times a month
- Less often
- Never

296

Go to 35

34

How well do you get along with your father?

- Very well
- Well
- Not so well
- Not well at all

297

Attention: Remember to check for a "Go to" instruction after you answer the question below.

35

Do you live with both your biological parents together in one home?

298

- Yes
- No

Go to 37

36 Why are you not living with both your biological parents together in one home?

299

- My biological parents are divorced/separated 1
- My biological parents were never married or living together 2
- My biological parent(s) is/are no longer alive 3
- My biological parent(s) is/are living or working abroad 4
- Other reason 5 →

Please write in:

Spare columns 300 - 314

37 Besides you, who else lives in your home? **Please cross all the people who you live with at home. If you move between two homes, choose your mother's home when answering this question.**

315 - 340

- Biological mother 01
- Biological father 02
- Adoptive mother 03
- Adoptive father 04
- Stepmother 05
- Stepfather 06
- Foster mother 07
- Foster father 08
- Brother(s) (include step/half brothers) 09 →
- Sister(s) (include step/half sisters) 10 →
- Grandparents 11
- Other family members 12
- Other people 13

Write in how many:

--	--

341 - 342

Write in how many:

--	--

343 - 344

Spare Columns 345 - 353

38 How many people in total live in your home, including yourself?

354 - 355

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Attention: Remember to check for a "Go to" instruction after you answer the question below.

39 Do you also live in another home on a regular basis? By this, we mean at least once every week or once every other week.

356

Yes 1

No 2 →

Go to **42**

Spare columns 357 - 370

40 Who lives in this second home? Please cross all the people who you live with in this second home.

371 – 396

Biological mother	<input type="checkbox"/>	01	
Biological father	<input type="checkbox"/>	02	
Adoptive mother	<input type="checkbox"/>	03	
Adoptive father	<input type="checkbox"/>	04	
Stepmother	<input type="checkbox"/>	05	
Stepfather	<input type="checkbox"/>	06	
Foster mother	<input type="checkbox"/>	07	
Foster father	<input type="checkbox"/>	08	
Brother(s) (include step/half brothers)	<input type="checkbox"/>	09	➔ Write in how many: <input type="text"/> <input type="text"/> 397 – 398
Sister(s) (include step/half sisters)	<input type="checkbox"/>	10	➔ Write in how many: <input type="text"/> <input type="text"/> 399 -400
Grandparents	<input type="checkbox"/>	11	
Other family members	<input type="checkbox"/>	12	
Other people	<input type="checkbox"/>	13	

Spare columns 401 – 409

41 How much of the time do you usually live in this second home?

410

More than half the time	<input type="checkbox"/>	1
About half the time	<input type="checkbox"/>	2
Less than half the time	<input type="checkbox"/>	3
Almost never	<input type="checkbox"/>	4

42 How much do you agree or disagree with each of these statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Stongly disagree	
Whenever I feel sad, my parents try to comfort me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	411
My parents often tell me to be quiet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	412
My parents are very strict with me, even over small things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	413
My parents often criticise me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	414
My parents try to help me when I have a problem.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	415
My parents show me that they love me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	416
My parents try to understand what I think and feel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	417

Spare columns 418 – 432

43 How often is each of the following true about your home?

	Always	Often	Sometimes	Never	
We like to spend free time with each other.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	433
It becomes tense when everyone is at home.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	434
We feel very close to each other.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	435
When we're together, the atmosphere is uneasy.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	436
We fight about small things.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	437

44 How much do you agree or disagree with each of these statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
My parents say that I must tell them everything that I do.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	438
My parents want to know the parents of the friends I hang out with.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	439
I always need to tell my parents exactly where I am and what I am doing when I am not at home.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	440

45 Were your grandparents (the parents of your biological parents) born in Britain?

	Yes	No	Don't know	
Grandmother (mother of your <u>mother</u>)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	441
Grandfather (father of your <u>mother</u>)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	442
Grandmother (mother of your <u>father</u>)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	443
Grandfather (father of your <u>father</u>)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	444

46 How often do you spend time in your neighbourhood with...
(Please check a box on each line)

	Every day	Once or several times a week	Once or several times a month	Less often	Never	There are no people from this background in my neighborhood	
... people from a White British background?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	445
... people from a Black or Black British background?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	446
... people from an Asian or Asian British background?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	447
... people from any other background?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	448

47

How many of the people who live in your neighbourhood are White British?

- Almost all or all 1
- A lot 2
- About half 3
- A few 4
- None or very few 5

449

Your feelings, attitudes and beliefs

48 When you are 30 years old, do you think you will ...

	Probably yes	Probably no	Don't know	
... have a job?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	450
... have a university degree?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	451
... be married?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	452
... have children?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	453
... be living in Britain?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	454
... have a lot of money?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	455
... be in good health?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	456

49 On a scale of 1 to 10 where 1 is very dissatisfied and 10 is very satisfied, how satisfied are you with...

	Very dissatisfied									Very satisfied	
	1	2	3	4	5	6	7	8	9	10	
... your life in general?	<input type="checkbox"/> ₀₁	<input type="checkbox"/> ₀₂	<input type="checkbox"/> ₀₃	<input type="checkbox"/> ₀₄	<input type="checkbox"/> ₀₅	<input type="checkbox"/> ₀₆	<input type="checkbox"/> ₀₇	<input type="checkbox"/> ₀₈	<input type="checkbox"/> ₀₉	<input type="checkbox"/> ₁₀	457 - 458
... school in general?	<input type="checkbox"/> ₀₁	<input type="checkbox"/> ₀₂	<input type="checkbox"/> ₀₃	<input type="checkbox"/> ₀₄	<input type="checkbox"/> ₀₅	<input type="checkbox"/> ₀₆	<input type="checkbox"/> ₀₇	<input type="checkbox"/> ₀₈	<input type="checkbox"/> ₀₉	<input type="checkbox"/> ₁₀	459 - 460

50 How much do you agree or disagree with each of these statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
I have a lot of good qualities.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	461
I have a lot to be proud of.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	462
I like myself just the way I am.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	463
I think things will go well for me in the future.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	464

51 How often are each of these statements true about you?

	Often true	Sometimes true	Rarely true	Never true	
I feel very worried.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	465
I get angry easily.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	466
I feel anxious.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	467
I feel depressed.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	468
I feel worthless.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	469
I act without thinking.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	470

52 How often have the following things happened to you in the last month?

	Every day	Once or several times a week	Less often	Never	
I was scared of other pupils.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	471
I was teased by other pupils.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	472
I was bullied by other pupils.	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	473

53 How good is your health compared to other young people of your age?

Very good	<input type="checkbox"/> ₁				
Good	<input type="checkbox"/> ₂				
About the same	<input type="checkbox"/> ₃				474
Bad	<input type="checkbox"/> ₄				
Very bad	<input type="checkbox"/> ₅				

54 In the last six months, how often have you had ...

	Every day	Once or several times a week	Once or several times a month	Less often	Never	
... a headache?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	475
... a stomach ache?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	476
... difficulty falling asleep?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	477

55 On a typical school night how many hours sleep do you get?

478 - 479

hours :

56 What is your height?

cm or Feet and inches
480 - 483 484 - 486

Spare columns 487 - 490

57 What is your weight?

Kg or stones/lbs

491 - 493 494 - 497

Spare columns 498 - 504

58 How often do you feel discriminated against or treated unfairly ...

	Always	Often	Sometimes	Never	
... at school?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	505
... on trains, buses, trams or the underground?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	506
... in shops, stores, cafes, restaurants or nightclubs?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	507
... by police or security guards?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	508

59 If you had a worry or concern, who would you go to? Please cross all of the different people that you would go to.

- Your mother ₀₁ 509 - 526
- Your father ₀₂
- A brother or sister ₀₃
- Another family member ₀₄
- A friend ₀₅
- Your boyfriend/girlfriend ₀₆
- A classmate ₀₇
- A teacher ₀₈
- Someone else ₀₉
- No one ₁₀

60 Have you had serious arguments with any of the following people in the past 3 months? Please cross all the different people that you have had serious arguments with.

- Your mother ₀₁ 527 - 544
- Your father ₀₂
- A brother or sister ₀₃
- Another family member ₀₄
- A friend ₀₅
- Your boyfriend/girlfriend ₀₆
- A classmate ₀₇
- A teacher ₀₈
- Someone else ₀₉
- No one ₁₀

61 In a family, who should do the following?

	Mostly the man	Mostly the woman	Both about the same	
Take care of the children	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	545
Cook	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	546
Earn money	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	547
Clean the house	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	548

62 How much do you agree or disagree with each of these statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
A man should be ready to use violence to defend his wife and children.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	549
A man should be ready to use violence if he is insulted.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	550
A man should be ready to use violence if someone talks badly about his family.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	551

63 Do you think the following are “always ok”, “often ok” “sometimes ok” or “never ok”?

	Always OK	Often OK	Sometimes OK	Never OK	Don't know	
Living together as a couple without being married	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	552
Divorce	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	553
Abortion	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	554
Homosexuality	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	555

64 How strongly do you feel British?

Very strongly	<input type="checkbox"/> 1					
Fairly strongly	<input type="checkbox"/> 2					556
Not very strongly	<input type="checkbox"/> 3					
Not at all strongly	<input type="checkbox"/> 4					

Attention: Remember to check for a "Go to" instruction after you answer the question below.

65 Some people feel that they belong to other groups too. Which, if any, of the following groups do you feel you belong to? If you feel that you belong to more than one of these groups, please cross all the ones you feel you belong to.

- No other group ₀₁ → **Go to 68**
- Bangladeshi ₀₂
- Chinese ₀₃
- Indian ₀₄
- Jamaican ₀₅
- Nigerian ₀₆
- Pakistani ₀₇
- Turkish ₀₈
- Other group ₀₉ → Please write in:

557 – 572

Spare columns 573 – 580

66 How strongly do you feel that you belong to this group? (If you feel you belong to more than one of these groups, please tell us about the one you feel you belong to most strongly.)

- Very strongly ₁
- Fairly strongly ₂
- Not very strongly ₃
- Not at all strongly ₄

581

67 How important is it for you personally to maintain the customs and traditions of this group?

- Very important ₁
- Fairly important ₂
- Not very important ₃
- Not at all important ₄

582

68 Please rate how you feel about the following groups on a scale that runs from 0 to 100. The higher the number, the more positive you feel, and the lower the number, the more negative you feel towards this group. Please cross one box for each group.

	Negative				Neutral				Positive				
	0	10	20	30	40	50	60	70	80	90	100	I haven't heard of this group	
White British	<input type="checkbox"/> ₀₁	<input type="checkbox"/> ₀₂	<input type="checkbox"/> ₀₃	<input type="checkbox"/> ₀₄	<input type="checkbox"/> ₀₅	<input type="checkbox"/> ₀₆	<input type="checkbox"/> ₀₇	<input type="checkbox"/> ₀₈	<input type="checkbox"/> ₀₉	<input type="checkbox"/> ₁₀	<input type="checkbox"/> ₁₁	<input type="checkbox"/> ₁₂ 583-584	
Black or Black British	<input type="checkbox"/> ₀₁	<input type="checkbox"/> ₀₂	<input type="checkbox"/> ₀₃	<input type="checkbox"/> ₀₄	<input type="checkbox"/> ₀₅	<input type="checkbox"/> ₀₆	<input type="checkbox"/> ₀₇	<input type="checkbox"/> ₀₈	<input type="checkbox"/> ₀₉	<input type="checkbox"/> ₁₀	<input type="checkbox"/> ₁₁	<input type="checkbox"/> ₁₂ 585-586	
Asian or Asian British	<input type="checkbox"/> ₀₁	<input type="checkbox"/> ₀₂	<input type="checkbox"/> ₀₃	<input type="checkbox"/> ₀₄	<input type="checkbox"/> ₀₅	<input type="checkbox"/> ₀₆	<input type="checkbox"/> ₀₇	<input type="checkbox"/> ₀₈	<input type="checkbox"/> ₀₉	<input type="checkbox"/> ₁₀	<input type="checkbox"/> ₁₁	<input type="checkbox"/> ₁₂ 587-588	

69 What is your religion?

- No religion 1
- Buddhist 2
- Christian 3
- Hindu 4
- Jewish 5
- Muslim 6
- Sikh 7
- Other religion 8 → Please write in:

Spare columns 590 – 601

70 How important is religion to you?

- Very important 1
- Fairly important 2
- Not very important 3
- Not at all important 4

71 How often do you visit a religious meeting place (for example church, mosque, synagogue, temple)?

- Never 1
- Occasionally (but less than once a month) 2
- At least once a month 3
- At least once a week 4
- Every day 5

72 How often do you pray?

- Never 1
- Occasionally (but less than once a month) 2
- At least once a month 3
- At least once a week 4
- One to four times a day 5
- Five times a day or more 6

73 How much do you agree or disagree with each of these statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
White British people should do all they can to keep their customs and traditions.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	605
Ethnic minority groups should adapt to British society.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	606
White British people should be open to the customs and traditions of ethnic minorities.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	607
Ethnic minority groups should do all they can to keep their customs and traditions.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	608

Leisure time activities

Attention: Remember to check for a "Go to" instruction after you answer the question below.

74 Are you a member of any sports, music, drama or other club?

Yes ₁

609

No ₂ → Go to **76**

75 How often do you spend time in these clubs with...
(Please cross a box on each line)

	Every day	Once or several times a week	Once or several times a month	Less often	Never	There are no people from this background in these clubs	
... people from a White British background?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	610
... people from a Black or Black British background?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	611
... people from an Asian or Asian British background?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	612
... people from any other background?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	<input type="checkbox"/> ₆	613

Attention: Remember to check for a "Go to" instruction after you answer the question below.

76 Do you have a boyfriend/girlfriend?

Yes ₁

614

No ₂ → Go to **80**

77 Does he/she go to your school?

- Yes, same tutor/form group ₁
- Yes, but different tutor/form group ₂
- No, goes to a different school ₃
- No, has finished schooling ₄

615

78 How old is he/she?

Age in years

616 – 617

Spare columns 618 - 632

79 What is his/her background?

- White British
- Black or Black British
- Asian or Asian British
- Another background

633

80 How many boyfriends/girlfriends have you had in the past?

Number of boyfriends/girlfriends:

634 – 635

I haven't had a boyfriend/girlfriend yet

636

81 Thinking now about all of your friends. How many of them are from a...
(Please cross a box on each line)

	Almost all or all	A lot	About half	A few	None or very few	
... White British background?	<input type="checkbox"/>	637				
... Black or Black British background?	<input type="checkbox"/>	638				
...Asian or Asian British background?	<input type="checkbox"/>	639				
...any other background?	<input type="checkbox"/>	640				

82 Have you done any of the following things in the past 3 months? Please remember that we promise to make sure that your answers will be kept secret.

	Yes	No	
Deliberately damaged things that were not yours?	<input type="checkbox"/>	<input type="checkbox"/>	641
Stolen something from a shop/from someone else?	<input type="checkbox"/>	<input type="checkbox"/>	642
Carried a knife or weapon?	<input type="checkbox"/>	<input type="checkbox"/>	643
Been very drunk?	<input type="checkbox"/>	<input type="checkbox"/>	644

Attention: Remember to check for a "Go to" instruction after you answer the question below.

83 Do you usually work outside school (e.g. doing a paper round, helping your parents in their business, babysitting)?

- Yes
- No → Go to **87**

645

84 How many hours do you work during a normal school week (including weekends)?

646 – 647

85 Is this a job where you help your parents in their business?

Yes ₁

No ₂

648

86 About how much money do you earn from work each month?

£

649 – 652

87 Do your parents give you money? Please cross one of the four boxes and write next to it how much your parents give you.

Yes, each week ₁ →

£

653

654 – 657

Yes, each month ₂ →

£

Yes, occasionally ₃

No ₄

88 How often do you miss out on activities your friends do because you can't afford them?

Always ₁

Often ₂

Sometimes ₃

Never ₄

658

89 If you suddenly needed £25 by tomorrow, would you be able to get that amount?

Yes ₁

No ₂

Don't know ₃

659

90 In your spare time, how often do you...

	Every day	Once or several times a week	Once or several times a month	Less often	Never	
... visit relatives?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	660
... go to the cinema?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	661
... go out to a pub/bar/nightclub/party?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	662
... read a book (not for school)?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	663
... spend time in a club (sports/music/drama/other club)?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	664
... go to a concert/gig/DJ event?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	665
... go to a museum or art gallery?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	666
... read a newspaper?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅	667

91 Do you have...

	Yes	No	
... your own computer?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	668
... access to the internet at home?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	669
... your own room?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	670
... your own smartphone like an iphone or blackberry?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	671
... your own TV?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	672
... a games console (Playstation, Wii, X-Box etc.)?	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	673

92 How many rooms are there in your home (not counting kitchen and bathrooms)?

rooms

674 – 675

93 About how many books are there in your home?

0-25 ₁
 26-100 ₂
 101-200 ₃
 201-500 ₄
 More than 500 ₅

676

94 How often do you...

	Every day	Once or several times a week	Once or several times a month	Less often	Never	
... have a hot meal?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	677
... drink alcohol?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	678
... do sports or go to the gym?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	679
...smoke cigarettes?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	680
... eat breakfast?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	681
... use drugs such as cannabis or ecstasy?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	682

95 On a typical school day, how much time do you spend after you get home, ...

	More than 2 hours a day	About 2 hours a day	About 1 hour a day	Less than 1 hour a day	No time at all	
...watching TV?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	683
...chatting online or visiting social network sites (like myspace, facebook)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	684
...doing homework?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	685
...helping around the house (like cleaning, laying the table, food shopping)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	686
...playing video/computer games alone?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	687
...playing video/computer games, together with other people?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	688

We are interested in any comments you have about filling in this questionnaire and whether you found this interesting. For example, some young people have told us that it is too long, or they would like to tell us more about their hobbies. Please write any comments you have in the box below.

689

Spare Columns 690 - 700

Thank you for filling in this questionnaire. If you have finished early, you can try out the activities in the yellow quiz booklet.

2 How many of the best friends you have listed know each other?

All of them 1

Some of them 2

None of them 3

846

3 How many of these friends...

	All of them	Some of them	None of them	
... play sports?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	847
... play computer games?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	848
... miss/skip lessons without permission?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	849
... drink alcohol?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	850

Spare columns 851 – 860

Thank you for filling in this exercise.
If you have finished early you can try out the activities in the yellow quiz booklet.

Cols
 SN 001-007
 CKL 008
 CARD 1 009
 BATCH: 010-014
 SPARES: 015-700



Exercise 1:
Five friends



Your five best friends

1 Here are some questions about your friends. You can answer this question for a maximum of 5 friends. Please do not count your girlfriend/boyfriend.

1. What is the first name of this friend	2. Is this friend a boy or a girl?	3. How old is this friend?	4. What is his/her background?	5. Does he/she go to your school?	6. Where do you see or meet each other most often? Please tick all the places you see or meet each other.	7. How often do you talk or meet?	8. Does your mother or father know this friend?
Friend 1: <input style="width: 100%; height: 40px;" type="text"/> 701 – 715	Boy <input type="checkbox"/> ¹ Girl <input type="checkbox"/> ² 716	Age: <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> 717 – 718	White British <input type="checkbox"/> ¹ Black or Black British <input type="checkbox"/> ² Asian or Asian British <input type="checkbox"/> ³ Any other <input type="checkbox"/> ⁴ 719	Yes, in the same tutor group or form group <input type="checkbox"/> ¹ Yes, in a different tutor group or form group <input type="checkbox"/> ² No, goes to a different school <input type="checkbox"/> ³ No, has finished school <input type="checkbox"/> ⁴ 720	In school <input type="checkbox"/> ¹ In the neighbourhood <input type="checkbox"/> ² At a sports, music, drama or other club <input type="checkbox"/> ³ At work <input type="checkbox"/> ⁴ At home <input type="checkbox"/> ⁵ Online <input type="checkbox"/> ⁶ Somewhere else <input type="checkbox"/> ⁷ 721 – 727	Every day <input type="checkbox"/> ¹ Once or several times a week <input type="checkbox"/> ² Less often <input type="checkbox"/> ³ 728	Yes <input type="checkbox"/> ¹ No <input type="checkbox"/> ² 729
Friend 2: <input style="width: 100%; height: 40px;" type="text"/> 730 – 744	Boy <input type="checkbox"/> ¹ Girl <input type="checkbox"/> ² 745	Age: <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> 746 – 747	White British <input type="checkbox"/> ¹ Black or Black British <input type="checkbox"/> ² Asian or Asian British <input type="checkbox"/> ³ Any other <input type="checkbox"/> ⁴ 748	Yes, in the same tutor group or form group <input type="checkbox"/> ¹ Yes, in a different tutor group or form group <input type="checkbox"/> ² No, goes to a different school <input type="checkbox"/> ³ No, has finished school <input type="checkbox"/> ⁴ 749	In school <input type="checkbox"/> ¹ In the neighbourhood <input type="checkbox"/> ² At a sports, music, drama or other club <input type="checkbox"/> ³ At work <input type="checkbox"/> ⁴ At home <input type="checkbox"/> ⁵ Online <input type="checkbox"/> ⁶ Somewhere else <input type="checkbox"/> ⁷ 750 – 756	Every day <input type="checkbox"/> ¹ Once or several times a week <input type="checkbox"/> ² Less often <input type="checkbox"/> ³ 757	Yes <input type="checkbox"/> ¹ No <input type="checkbox"/> ² 758
Friend 3: <input style="width: 100%; height: 40px;" type="text"/> 759 – 773	Boy <input type="checkbox"/> ¹ Girl <input type="checkbox"/> ² 774	Age: <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> 775 – 776	White British <input type="checkbox"/> ¹ Black or Black British <input type="checkbox"/> ² Asian or Asian British <input type="checkbox"/> ³ Any other <input type="checkbox"/> ⁴ 777	Yes, in the same tutor group or form group <input type="checkbox"/> ¹ Yes, in a different tutor group or form group <input type="checkbox"/> ² No, goes to a different school <input type="checkbox"/> ³ No, has finished school <input type="checkbox"/> ⁴ 778	In school <input type="checkbox"/> ¹ In the neighbourhood <input type="checkbox"/> ² At a sports, music, drama or other club <input type="checkbox"/> ³ At work <input type="checkbox"/> ⁴ At home <input type="checkbox"/> ⁵ Online <input type="checkbox"/> ⁶ Somewhere else <input type="checkbox"/> ⁷ 779 – 785	Every day <input type="checkbox"/> ¹ Once or several times a week <input type="checkbox"/> ² Less often <input type="checkbox"/> ³ 786	Yes <input type="checkbox"/> ¹ No <input type="checkbox"/> ² 787
Friend 4: <input style="width: 100%; height: 40px;" type="text"/> 788 – 802	Boy <input type="checkbox"/> ¹ Girl <input type="checkbox"/> ² 803	Age: <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> 804 – 805	White British <input type="checkbox"/> ¹ Black or Black British <input type="checkbox"/> ² Asian or Asian British <input type="checkbox"/> ³ Any other <input type="checkbox"/> ⁴ 806	Yes, in the same tutor group or form group <input type="checkbox"/> ¹ Yes, in a different tutor group or form group <input type="checkbox"/> ² No, goes to a different school <input type="checkbox"/> ³ No, has finished school <input type="checkbox"/> ⁴ 807	In school <input type="checkbox"/> ¹ In the neighbourhood <input type="checkbox"/> ² At a sports, music, drama or other club <input type="checkbox"/> ³ At work <input type="checkbox"/> ⁴ At home <input type="checkbox"/> ⁵ Online <input type="checkbox"/> ⁶ Somewhere else <input type="checkbox"/> ⁷ 808 – 814	Every day <input type="checkbox"/> ¹ Once or several times a week <input type="checkbox"/> ² Less often <input type="checkbox"/> ³ 815	Yes <input type="checkbox"/> ¹ No <input type="checkbox"/> ² 816
Friend 5: <input style="width: 100%; height: 40px;" type="text"/> 817 – 831	Boy <input type="checkbox"/> ¹ Girl <input type="checkbox"/> ² 832	Age: <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> 833 – 834	White British <input type="checkbox"/> ¹ Black or Black British <input type="checkbox"/> ² Asian or Asian British <input type="checkbox"/> ³ Any other <input type="checkbox"/> ⁴ 835	Yes, in the same tutor group or form group <input type="checkbox"/> ¹ Yes, in a different tutor group or form group <input type="checkbox"/> ² No, goes to a different school <input type="checkbox"/> ³ No, has finished school <input type="checkbox"/> ⁴ 836	In school <input type="checkbox"/> ¹ In the neighbourhood <input type="checkbox"/> ² At a sports, music, drama or other club <input type="checkbox"/> ³ At work <input type="checkbox"/> ⁴ At home <input type="checkbox"/> ⁵ Online <input type="checkbox"/> ⁶ Somewhere else <input type="checkbox"/> ⁷ 837 – 843	Every day <input type="checkbox"/> ¹ Once or several times a week <input type="checkbox"/> ² Less often <input type="checkbox"/> ³ 844	Yes <input type="checkbox"/> ¹ No <input type="checkbox"/> ² 845

Questions about your classmates

In this part of the study, we will be using a list that assigns a number to each of your participating classmates. We will ask you some questions about your classmates and want you to write down in the empty space on the right the numbers of those people to whom the sentence refers.
Example:

E1 Which classmates do you sometimes spend your breaks with?

3, 8, 12

Please write down only the numbers; make sure not to write down any names. As you see, you may write down more than one number. Please make sure to always put a comma after each number.

If the sentence doesn't refer to any child at all, write a big X in the empty space.
Example:

E2 Which classmates have you ever been to a concert or gig with?

X

1 Who are your best friends in this class?
Here you may write down no more than five numbers.

916-
925

2 Who is your best friend in this class?
Here you may write down no more than one number.

926 -
927

3 Who would you not want to sit by?
Here you may write down no more than five numbers.

928-
937

4 Who are the most popular students in this class?
Here you may write down no more than five numbers.

938-
947

5 Who do you often spend time with outside of school?
From now on you can write as many numbers as you like.

948 -
957

6 Who is sometimes mean to you?

958 -
967

7 Who do you sometimes do your homework with?

968 -
973

8 Who are you sometimes mean to?

974 -
979

9 Which classmates live within a 5 minute walk from your home?

980 -
985

10 Who do your parents know?

986 -
991

11 Whose parents do your parents get together with once in a while or call each other on the phone?

992 -
997

How to fill out the questionnaire

E1 What is your favourite time of the year?

Spring	
Summer	✗
Autumn	
Winter	

Please check the box with an X. Mostly you are allowed to check only one box.

E2 What is your favourite time of the year?

Spring	✗
Summer	✗
Autumn	
Winter	

When you wish to change a given answer, cross out the wrong box and check the right box.

E3 Are the following people male or female?

	Male	Female	Don't know
David Cameron	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Margaret Thatcher	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Barack Obama	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In some questions, you have to cross one box in each line.

Attention: Remember to check for a "Go to" instruction after you answered the question below.

E4 Do you like music?

Yes

No → **Go to E6**

Please answer each question in turn. Skip questions only when told to do so in the text.

E5 What music do you like? Please cross all that apply.

Rock	✗
Pop	✗
Hip Hop	
...r music	

There are questions where you are allowed to cross more than one box. Only when you see this instruction, more than one answer is allowed.

If you check off "yes" for this question, then you should go to the next question (E5).

If you check off "no" for this question, then proceed directly to the question indicated (E6).

E6 What is your favourite sport?

Football

Write the answer in the white text boxes provided.

Your child and his/her school career

1 We would like to start with some questions about your child and his or her school. We are referring to your child in year 10 who has also taken part in this survey.

In this section, please answer about this particular child only.

What is the highest level of education you wish your child to have?

020

- No qualifications 1
- GCSEs (or a similar level) 2
- A Levels or AS Levels (or a similar level) 3
- University degree 4
- Don't know 5

2 What is the highest level of education that you think this child will actually get?

021

- No qualifications 1
- GCSEs (or a similar level) 2
- A Levels or AS Levels (or a similar level) 3
- University degree 4
- Don't know 5

3 How much do you agree or disagree with each of these statements? Please think about the schooling of your son or daughter who is taking part in this study.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
I trust the school to give my child a good education.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	022
I feel I can always talk to the school if problems arise.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	023
I have confidence in the teachers at my child's school.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	024
I would like my child to attend another school.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	025
I think the school cares about the future of my child.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	026
I believe the school could do more for my child.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	027

4 How much do you agree or disagree with each of these statements? Please think about the schooling of your son or daughter who is taking part in this study.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
I show a lot of interest in my child's marks and results at school.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	028
I tell my child I am proud when he or she gets good results at school.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	029
I encourage my child to work hard for school.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	030

5 What is your relationship to this child? 031

Biological or adoptive mother	<input type="checkbox"/> 1	
Biological or adoptive father	<input type="checkbox"/> 2	
Stepmother	<input type="checkbox"/> 3	
Stepfather	<input type="checkbox"/> 4	
Another female guardian	<input type="checkbox"/> 5	→ Please write in: <input style="width: 200px; height: 25px;" type="text"/>
Another male guardian	<input type="checkbox"/> 6	→ Please write in: <input style="width: 200px; height: 25px;" type="text"/>

Your beliefs and attitudes

6 In a family, who should do the following?

	Mostly the man	Mostly the woman	Both about the same	
Take care of the children	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	047
Cook	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	048
Earn money	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	049
Clean the house	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	050

7 Do you think the following are "always ok", "often ok", "sometimes ok" or "never ok"?

	Always OK	Often OK	Sometimes OK	Never OK	Don't know	
Living together as a couple without being married	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	051
Divorce	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	052
Abortion	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	053
Homosexuality	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	054

8 Below are some qualities that a 12-15 year old child may have. Which three qualities are the most desirable for a child this age? Please cross 3 boxes.

055 - 060

- That he or she is responsible 01
- That he or she tries hard to succeed 02
- That he or she has self-control 03
- That he or she is interested in how and why things happen 04
- That he or she has good manners 05
- That he or she has good sense and sound judgement 06
- That he or she is considerate of others 07
- That he or she acts like a boy or girl should 08
- That he or she has respect for elderly people 09
- That he or she obeys his or her parents well 10

9 How strongly do you feel British?

061

- Very strongly 1
- Fairly strongly 2
- Not very strongly 3
- Not at all strongly 4

Attention: Remember to check for a "Go to" instruction after you answer the question below.

10 Some people feel that they belong to other groups too. Which, if any, of the following groups do you feel you belong to? Please cross all the ones that you feel you belong to.

- No other group ⁰¹ → Go to **13**
- Bangladeshi ⁰²
- Chinese ⁰³
- Indian ⁰⁴
- Jamaican ⁰⁵
- Nigerian ⁰⁶
- Pakistani ⁰⁷
- Turkish ⁰⁸
- Other ⁰⁹ → Please write in:

067 - 077

Spare Columns 078 - 092

11 How strongly do you feel that you belong to this group? (If you feel you belong to more than one of these groups, please tell us about the one you feel you belong to most strongly.)

- Very strongly ¹
- Fairly strongly ²
- Not very strongly ³
- Not at all strongly ⁴

093

12 How important is it for you personally to maintain the customs and traditions of this group?

- Very important ¹
- Fairly important ²
- Not very important ³
- Not at all important ⁴

094

13 What is your religion?

095 - 096

- No religion ⁰¹
- Buddhist ⁰²
- Christian ⁰³
- Hindu ⁰⁴
- Jewish ⁰⁵
- Muslim ⁰⁶
- Sikh ⁰⁷
- Other religion ⁰⁸ → Please write in:

Spare Columns 097 - 111

14 How important is religion to you?

112

- Very important ¹
- Fairly important ²
- Not very important ³
- Not at all important ⁴

15 How much do you agree or disagree with the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	
White British people should do all they can to keep their customs and traditions.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	113
Ethnic minority groups should adapt to British society.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	114
White British people should be open to the customs and traditions of ethnic minorities.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	115
Ethnic minority groups should do all they can to keep their customs and traditions.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	116

16 Do you want to live permanently in Britain?

117

- Yes 1
- No 2
- Don't know 3

Your friends, your neighbourhood and your leisure time

17 Thinking about your friends. How many of them have a...
(Please cross one box on each line)

	Almost all or all	A lot	About half	A few	None or very few	
... White British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	118
... Black or Black British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	119
... Asian or Asian British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	120
... any other background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	121

18 How often do you spend time in your neighbourhood with ...
(Please cross one box on each line)

	Every day	Once or several times a week	Once or several times a month	Less often	Never	I don't know of people from this background in my neighbourhood	
... people from a White British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	122
... people from a Black or Black British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	123
... people from an Asian or Asian British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	124
... people from any other background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	125

19 Are any of the following things a problem where you live? Please cross all that apply.

Poor housing/building maintenance	<input type="checkbox"/> 1	126 - 129
Noisy neighbours	<input type="checkbox"/> 2	
Vandalism or crime	<input type="checkbox"/> 3	
Fear of going out at night	<input type="checkbox"/> 4	
None of these are a problem	<input type="checkbox"/> 5	

20 Do you or your partner own or rent the accommodation where you live?

Own the accommodation	<input type="checkbox"/> 1	130
Rent the accommodation	<input type="checkbox"/> 2	
Other	<input type="checkbox"/> 3 → Please write in:	<div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div>

Spare Columns 131 - 145

Attention: Remember to check for a "Go to" instruction after you answer the question below.

21 Are you a member of any sports, music, drama or other clubs?

Yes 1

146

No 2 →

Go to

23

22 How often do you spend time in these clubs with ...
(Please cross one box on each line.)

	Every day	Once or several times a week	Once or several times a month	Less often	Never	I don't know of people from this background in these clubs	
... people from a White British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	147
... people from a Black or Black British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	148
... people from an Asian or Asian British background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	149
... people from any other background?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	150

You and your household

23 Are you male or female?

151

Male 1
Female 2

24 When were you born?

152 - 153

Year:

25 Now we would like you to tell us about your ethnic background. Which of these best describes your ethnic background?

154 - 155

White

White British 01
White Irish 02
Any other white background 03

Mixed

Mixed White and Black Caribbean 04
Mixed White and Black African 05
Mixed White and Asian 06
Any other mixed background 07

Asian or Asian British

Indian 08
Pakistani 09
Bangladeshi 10
Any other Asian/Asian British background 11

Black or Black British

Caribbean 12
African 13
Any other Black/Black British background 14

Chinese or other ethnic group

Chinese 15
Any other ethnic group 16

Attention: Remember to check for a "Go to" instruction after you answer the question below.

26 In which country were you born?

156 - 157

Britain	<input type="checkbox"/>	→	Go to 29
Bangladesh	<input type="checkbox"/>		
China	<input type="checkbox"/>		
India	<input type="checkbox"/>		
Jamaica	<input type="checkbox"/>		
Nigeria	<input type="checkbox"/>		
Pakistan	<input type="checkbox"/>		
Turkey	<input type="checkbox"/>		
Other country :	<input type="checkbox"/>	→ Please write in:	

Spare Columns 158 - 172

27 What year did you move to Britain?

Year:

173 - 176

28 How often do you visit your country of birth?

177

Twice a year or more	<input type="checkbox"/>	1
Once a year	<input type="checkbox"/>	2
Less than once a year	<input type="checkbox"/>	3
Never	<input type="checkbox"/>	4

29 Where did you grow up?

178

Big city (more than 100,000 inhabitants)	<input type="checkbox"/>	1
Town (up to 100,000 inhabitants)	<input type="checkbox"/>	2
Village	<input type="checkbox"/>	3

30 What is your nationality? (If you have a passport, just give the name of the country which your passport is from.) If you have more than one nationality, please cross all that apply.

179 - 196

British	<input type="checkbox"/>	01	
Bangladeshi	<input type="checkbox"/>	02	
Chinese	<input type="checkbox"/>	03	
Indian	<input type="checkbox"/>	04	
Jamaican	<input type="checkbox"/>	05	
Nigerian	<input type="checkbox"/>	06	
Pakistani	<input type="checkbox"/>	07	
Turkish	<input type="checkbox"/>	08	
Other nationality	<input type="checkbox"/>	→ Please write in:	<input type="text"/>
Don't know	<input type="checkbox"/>	09	

Spare Columns 197 - 211

31 In which country was your biological father born?

212 - 213

Britain	<input type="checkbox"/>	01
Bangladesh	<input type="checkbox"/>	02
China	<input type="checkbox"/>	03
India	<input type="checkbox"/>	04
Jamaica	<input type="checkbox"/>	05
Nigeria	<input type="checkbox"/>	06
Pakistan	<input type="checkbox"/>	07
Turkey	<input type="checkbox"/>	08
Other country	<input type="checkbox"/>	09 → Please write in:

Spare Columns 214 - 228

32 In which country was your biological mother born?

229 - 230

Britain	<input type="checkbox"/>	01
Bangladesh	<input type="checkbox"/>	02
China	<input type="checkbox"/>	03
India	<input type="checkbox"/>	04
Jamaica	<input type="checkbox"/>	05
Nigeria	<input type="checkbox"/>	06
Pakistan	<input type="checkbox"/>	07
Turkey	<input type="checkbox"/>	08
Other country	<input type="checkbox"/>	09 → Please write in:

Spare Columns 231 - 245

33 How well do you think you can...

	Not at all	Not well	Well	Very well	Excellently	
... speak English?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	246
... understand English?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	247
... read English?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	248
... write English?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	249

Attention: Remember to check for a "Go to" instruction after you answer the question below.

34 Is there a language other than English spoken at your home?

Yes	<input type="checkbox"/>	1			250
No	<input type="checkbox"/>	2 →	Go to	38	

35 Which language is this?

251 - 266

- Bengali 01
- Cantonese 02
- Gujarati 03
- Hindi 04
- Punjabi 05
- Turkish 06
- Urdu 07
- Other 08

Please write in:

Spare Columns 267 - 281

36 Thinking about the language you have just crossed, how well do you think you can...

	Not at all	Not well	Well	Very well	Excellently	
... speak this language?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	282
... understand this language?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	283
... read this language?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	284
... write this language?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	285

37 Thinking about the child who is taking part in this survey, how often do you talk to this child in this language?

- Always 1
- Often 2
- Sometimes 3
- Never 4

286

38 What is your highest level of educational qualification? If you got your highest qualification outside Britain, please select the British level that best matches your foreign qualification.

- I don't have any educational qualifications 1
- GCSEs or a similar qualification 2
- A Levels or a similar qualification that people get at the end of secondary schooling 3
- University degree 4

287

39 Where did you get your highest level of qualification?
(Please include school or university qualifications but don't count vocational training)

- Britain 01
- Bangladesh 02
- China 03
- India 04
- Jamaica 05
- Nigeria 06
- Pakistan 07
- Turkey 08
- Other country 09

Please write in:

288 - 289

Spare Columns 290 - 304

40 How old were you when you obtained your highest level of qualification?
(Please include school or university qualifications but don't count vocational training)

Age:

305 - 306

I am still in education ¹

307

Attention: Remember to check for a "Go to" instruction after you answer the question below.

41 Do you currently have a paid job?

308

Yes ¹

No ² →

Go to

43

42 How often do you spend time during breaks at work with...
(Please cross one box on each line)

	Every day	Once or several times a week	Once or several times a month	Less often	Never	I don't know of people from this background at work	
... people from a White British background?	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶	309
... people from a Black or Black British background?	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶	310
... people from an Asian or Asian British background?	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶	311
... people from any other background?	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁶	312

Attention: Remember to check for a "Go to" instruction after you answer the question below.

43 Think about your job. If you are currently not working, please think about your last job.
What type of job is this?

313 - 314

I have never worked before ⁰¹ →

Go to

47

Professional and technical (for example: doctor, teacher, engineer, artist, accountant) ⁰²

Higher administrator (for example: banker, executive in big business, high government official, union official) ⁰³

Clerical (for example: secretary, clerk, office manager, civil servant, bookkeeper) ⁰⁴

Sales (for example: sales manager, shop owner, shop assistant, insurance agent, buyer) ⁰⁵

Service (for example: restaurant owner, police officer, waiter, barber, caretaker) ⁰⁶

Skilled worker (for example: foreman, motor mechanic, printer, tool maker, electrician) ⁰⁷

Semi-skilled worker (for example: bricklayer, bus driver, tannery worker, carpenter, sheet metal worker, baker) ⁰⁸

Unskilled worker (for example: labourer, porter, unskilled factory worker) ⁰⁹

Farm (for example: farmer, farm labourer, tractor driver) ¹⁰

44 Are you self employed or do you work for somebody else? (If you are currently not working please think about your last job)

I am self-employed or freelance without employees 1

I am self employed with employees 2

I work for somebody else 3

315

45 What is your job title? (If you are currently not working please tell us the job title of your last job)
Please describe what you do (or did) in this job

Name of job:

Description of job:

316

1

Spare Columns 317 - 320

46 Do (or did) you supervise any employees in this job?
Supervision involves overseeing the work of other employees on a day-to-day basis

Yes 1

No 2

321

Attention: Remember to check for a "Go to" instruction after you answer the question below.

47 If you suddenly needed to get hold of £1,200 within one week, would you be able to get that amount?

Yes 1

No 2 →

Go to

49

322

48 How would you get it?

Withdrawal from own bank account 1

Sale of stocks, shares or the like 2

Loan from family members or relatives 3

Loan from friends 4

Bank loan or similar 5

Other 6 →

Please write in:

323

Spare Columns 324 - 338

49 Using the answer categories below, please tell us your household's monthly total income, after tax and compulsory deductions, from all sources. If you don't know exactly, please try to answer as best as you can.

339 - 340

- £0-£714 01
- £715-£959 02
- £960-£1,199 03
- £1,200-£1,449 04
- £1,450-£1,759 05
- £1,760-£2,139 06
- £2,140-£2,569 07
- £2,570-£3,169 08
- £3,170-£4,179 09
- £4,180 or more 10
- I don't want to say 11

Attention: Remember to check for a "Go to" instruction after you answer the question below.

50 What is your marital status?

341

- Single 1
- Married 2 → **Go to 52**
- Divorced 3
- Separated 4
- Widowed 5

Attention: Remember to check for a "Go to" instruction after you answer the question below.

51 Do you have a husband, wife or partner?

342

- Yes 1
- No 2 → **Go to 70**

Attention: Remember to check for a "Go to" instruction after you answer the question below.

52 Do you live with your husband, wife or partner?

343

- Yes 1
- No 2 → **Go to 70**

53 Is this person the biological father or biological mother of the child who is taking part in this survey?

344

- Yes 1
- No 2

Your husband, wife or partner

54 When was your husband, wife or partner born?

Year:

1	9		
---	---	--	--

345 - 346

Attention: Remember to check for a "Go to" instruction after you answer the question below.

55 In which country was your husband, wife or partner born?

- Britain ⁰¹ → **Go to** **57**
- Bangladesh ⁰²
- China ⁰³
- India ⁰⁴
- Jamaica ⁰⁵
- Nigeria ⁰⁶
- Pakistan ⁰⁷
- Turkey ⁰⁸
- Other country ⁰⁹ → **Please write in:**

347 - 348

Spare Columns 349 - 363

56 What year did he or she move to Britain?

Year:

--	--	--	--

364 - 367

57 Where did your husband, wife or partner grow up?

- Big city (more than 100,000 inhabitants) ¹
- Town (up to 100,000 inhabitants) ²
- Village ³
- Don't know ⁴

368

58 What is your husband, wife or partner's nationality? If he or she has more than one nationality, please cross all that apply.

British	<input type="checkbox"/>	01	369 - 386
Bangladeshi	<input type="checkbox"/>	02	
Chinese	<input type="checkbox"/>	03	
Indian	<input type="checkbox"/>	04	
Jamaican	<input type="checkbox"/>	05	
Nigerian	<input type="checkbox"/>	06	
Pakistani	<input type="checkbox"/>	07	
Turkish	<input type="checkbox"/>	08	
Other nationality	<input type="checkbox"/>	→ Please write in:	<input type="text"/>
		09	
Don't know	<input type="checkbox"/>	10	

Spare Columns 387 - 401

59 In which country was the biological father of your husband, wife or partner born?

Britain	<input type="checkbox"/>	01	402 - 403
Bangladesh	<input type="checkbox"/>	02	
China	<input type="checkbox"/>	03	
India	<input type="checkbox"/>	04	
Jamaica	<input type="checkbox"/>	05	
Nigeria	<input type="checkbox"/>	06	
Pakistan	<input type="checkbox"/>	07	
Turkey	<input type="checkbox"/>	08	
Other country	<input type="checkbox"/>	→ Please write in:	<input type="text"/>
		09	

Spare Columns 404 - 418

60 In which country was the biological mother of your husband, wife or partner born?

Britain	<input type="checkbox"/>	01	419 - 420
Bangladesh	<input type="checkbox"/>	02	
China	<input type="checkbox"/>	03	
India	<input type="checkbox"/>	04	
Jamaica	<input type="checkbox"/>	05	
Nigeria	<input type="checkbox"/>	06	
Pakistan	<input type="checkbox"/>	07	
Turkey	<input type="checkbox"/>	08	
Other country	<input type="checkbox"/>	→ Please write in:	<input type="text"/>
		09	

Spare Columns 421 - 435

61 What is your husband, wife or partner's highest level of education? If he or she got their highest qualification outside Britain, please select the British level that best matches his or her foreign qualification.

- He or she doesn't have any educational qualifications 1
- GCSEs or a similar qualification 2
- A Levels or a similar qualification that people get at the end of secondary schooling 3
- University degree 4

436

62 Where did your husband, wife or partner get his or her highest level of education? (Please include school or university qualifications but don't count vocational training)

- Britain 01
- Bangladesh 02
- China 03
- India 04
- Jamaica 05
- Nigeria 06
- Pakistan 07
- Turkey 08
- Other country 09 → Please write in:

437 - 438

Spare Columns 439 - 453

63 How old was your husband, wife or partner when he or she received their highest level of education? (Please include school or university qualifications but don't count vocational training)

Age:

454 - 455

He/she is still in education 1

456

64 Does your husband, wife or partner currently have a paid job?

Yes 1

No 2

457

Attention: Remember to check for a "Go to" instruction after you answer the question below.

65 Think about your husband, wife or partner's job. If he or she is currently not working, please think about his or her last job.

What type of job is this?

He or she has never worked before

 →
01

Go to

69

458 - 459

Professional and technical (for example: doctor, teacher, engineer, artist, accountant)

 02

Higher administrator (for example: banker, executive in big business, high government official, union official)

 03

Clerical (for example: secretary, clerk, office manager, civil servant, bookkeeper)

 04

Sales (for example: sales manager, shop owner, shop assistant, insurance agent, buyer)

 05

Service (for example: restaurant owner, police officer, waiter, barber, caretaker)

 06

Skilled worker (for example: foreman, motor mechanic, printer, tool maker, electrician)

 07

Semi-skilled worker (for example: bricklayer, bus driver, tannery worker, carpenter, sheet metal worker, baker)

 08

Unskilled worker (for example: labourer, porter, unskilled factory worker)

 09

Farm (for example: farmer, farm labourer, tractor driver)

 10

66 Is he or she self employed or do they work for somebody else? If he or she is currently not working, please think about his or her last job

He or she is self-employed or freelance without employees

 1

He or she is self employed with employees

 2

He or she works for somebody else

 3

460

67 What is his or her job title? If he or she is currently not working, please think about his or her last job.

Please describe what he or she does (or did) in their job

461

Name of job:

Description of job:

1

Spare Columns 462 - 465

68 Does he or she supervise any employees in this job? If he or she is currently not working, please think about his or her last job. Supervision involves overseeing the work of other employees on a day-to-day basis

Yes

 1

No

 2

466

69 How did you answer these questions about your husband, wife or partner?

I answered them alone, without asking my husband, wife or partner for help 1

467

I answered them , but I asked my husband, wife or partner for help 2

My husband, wife or partner answered them 3

70

We are interested in any comments you have about filling in this questionnaire. Please write any comments you have in the box below.

468

1

Spare Columns 469 - 500

Thank you for your help with this study. Please remember to complete the enclosed contact details form to receive your 'thank you' £10 high street voucher for helping us.

Questions About You

1 Which subjects do you teach in this school?

- | | | | |
|----|----------------------|-----|--------------------------|
| 1. | <input type="text"/> | 015 | Spare Columns
016-017 |
| 2. | <input type="text"/> | 018 | Spare Columns
019-020 |
| 3. | <input type="text"/> | 021 | Spare Columns
022-023 |
| 4. | <input type="text"/> | 024 | Spare Columns
025-026 |
| 5. | <input type="text"/> | 027 | Spare Columns
028-029 |

2 What year groups do you teach in this school?

- | | | | |
|---------|--------------------------|--|-----|
| Year 7 | <input type="checkbox"/> | 1 | 030 |
| Year 8 | <input type="checkbox"/> | 2 | 031 |
| Year 9 | <input type="checkbox"/> | 3 | 032 |
| Year 10 | <input type="checkbox"/> | 4 | 033 |
| Year 11 | <input type="checkbox"/> | 5 | 034 |
| Year 12 | <input type="checkbox"/> | 6 | 035 |
| Year 13 | <input type="checkbox"/> | 7 | 036 |
| Other | <input type="checkbox"/> | 8 → Please write in <input type="text"/> | 037 |

Spare Columns 038-052

3 Are you male or female?

- | | | | |
|--------|--------------------------|---|-----|
| Male | <input type="checkbox"/> | 1 | |
| Female | <input type="checkbox"/> | 2 | 053 |

4 How old are you?

<input type="text"/>	<input type="text"/>	years	054-055
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5 Were you, or one of your parents born abroad?

- Yes, I was born abroad 1
Yes, one of my parents was born abroad 2
No 3

056

6 Has either of your parents got a university degree?

- Yes, mother 1
Yes, father 2
Yes, both parents 3
No 4

057

7 By the end of this school year, how many years will you have been teaching in total?

years

058 -059

8 How many of these years have you been teaching in this school?

years

060 - 061

About the class

This next section of questions are about the students in the class that is participating in our study even if you are not their class teacher

9 What is your relationship to this class? Please tick all that apply

- Subject teacher 1
 Form/Class tutor 2
 Head of Year 3
 Other 4 → Please write in 062

Spare Columns 063 - 077

10 Which subjects (if any) have you been teaching this class during the current school year? Please write in all subjects.

Subject 1: 078

Subject 2: 083

Subject 3: 088

Subject 4: 093

Not Applicable: 1

11 How many hours each week do you teach these subjects to this class?

Hours: 081-082

Spare Columns 079-080

Hours: 086-087

Spare Columns 084 -085

Hours: 091-092

Spare Columns 089-090

Hours: 096-097

Spare Columns 094-095

098

12 In total, how much contact time do you have with this class each week?

Hours: 099 -100

13 How long does a typical lesson for year 10 students last?

Minutes: 101 - 102

Please answer the following questions about all students in this class even if they are absent today

14 What is the total number of girls and boys in this class?

Number of girls:	<input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/>	103 - 104
Number of boys:	<input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/>	105 - 106

15 How many students in this class come from...

	None/ almost none	Less than half	About half	More than half	All/ almost all	
...families where at least one parent, or the student was born abroad and moved to Britain later on	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	107
...single parent families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	108
...less educated families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	109
...university-educated families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	110
...economically disadvantaged homes	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	111
...economically affluent homes	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	112
...families where at least one parent is unemployed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	113
...families who receive social assistance (e.g. Income Support)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	114

16 How many of the students in the class receive Free School Meals?

<input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/>	115-116
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17 In general, how do you assess the proficiency of the average student in this class in the following subjects?

	Very high	High	Medium	Low	Very low	
Mathematics	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6 117
English	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6 118

18 Approximately how many students in the class...

...sometimes have problems following the curriculum?	<input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/>	119 - 120
...experience difficulties understanding spoken English?	<input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 25px; border: 1px solid black;" type="text"/>	121 - 122

Now we would like to find out about the students in this class who are not participating in this study (for example, because they are absent today).

19 How many students in this class are not participating in the survey?

123 - 124

20 To how many of the non-participating students in this class do the following features apply?

Attention: If less than 5 students are not participating please skip this question

	None/ almost none	Less than half	About half	More than half	All/ almost all	
...families where at least one parent, or the student was born abroad and moved to Britain later on	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	125
...single parent families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	126
...less educated families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	127
...university-educated families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	128
...economically disadvantaged homes	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	129
...economically affluent homes	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	130
...families where at least one parent is unemployed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	131
...families who receive social assistance (e.g. Income Support)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	132

21 And how many of the missing students receive Free School Meals?

133 -134

Spare Columns 135-152

About the school

Now we have some questions about the whole school where you are teaching.

22 What is the average class size in your school in the following years? Please tick one box per row.

	1-15	16-20	21-25	26-30	31-35	36-40	41-45	46-50	>50	Doesn't apply	
Year 7	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	153-154
Year 8	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	155-156
Year 9	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	157-158
Year 10	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	159-160
Year 11	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	161-162
Year 12	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	163-164
Year 13	<input type="checkbox"/> 01	<input type="checkbox"/> 02	<input type="checkbox"/> 03	<input type="checkbox"/> 04	<input type="checkbox"/> 05	<input type="checkbox"/> 06	<input type="checkbox"/> 07	<input type="checkbox"/> 08	<input type="checkbox"/> 09	<input type="checkbox"/> 10	165-166

23 How many students in this school come from...

	0-10%	11- 25%	26- 50%	51-75%	More than 75%	Don't Know	
...families where at least one parent, or the student was born abroad	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	167
...single parent families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	168
...less educated families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	169
...university-educated families	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	170
...economically disadvantaged homes	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	171
...economically affluent homes	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	172
...families where at least one parent is unemployed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	173
...families who receive social assistance (e.g. Income Support)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	174

24 Is there a setting or streaming system in your school?

Yes 1

No 2 →

Go to

26

175

25 How many sets are there for Year 10s at your school in English and Maths?

English:

176-177

Maths:

178-179

26 Are there special classes for extremely gifted pupils or for weak pupils? Please tick all that apply

No ¹

Yes, for the gifted ²

Yes, for the weak ³

Yes, other ⁴ → Please write in

180

Spare Columns 181-192

27 Does the school have a preparatory class for newly-arrived migrants?

Yes ¹

No ²

193

28 Thinking about the students in your school, how much do you agree with the following statements?

	Strongly agree	Agree	Disagree	Strongly disagree	
Students enjoy being in school	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	194
Students work with enthusiasm	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	195
Students take pride in this school	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	196
Students value academic achievement	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	197
Students are co-operative and respectful	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	198
Students value the education they receive in this school	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	199
Students do their best to learn as much as possible	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	200

29 Thinking about the teachers in your school, how much do you agree with the following statements?

	Strongly agree	Agree	Disagree	Strongly disagree	
The morale of the teachers in this school is high	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	201
The teachers work with enthusiasm	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	202
Teachers take pride in this school	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	203
Teachers value academic achievement	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	204
Teachers' job satisfaction is high	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	205
Teachers' expectations for student achievement are high	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	206

30 How many teachers are there in your school?

207-208

31 Approximately how many teachers in your school were born abroad, or at least one of their parents was born abroad?

209-210

32 How many teachers in your school are male?

--	--

211-212

33 To what degree are the following a problem in your school?

	Not at All	Minor problem	Moderate problem	Serious problem	
Students arriving late to school or to lessons	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	213
Student absenteeism (i.e. unjustified absences)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	214
Skipping class/lessons	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	215
Classroom disturbance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	216
Violating dress code	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	217
Cheating	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	218
Swearing	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	219
Vandalism	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	220
Theft	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	221
Intimidation or verbal abuse among students	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	222
Intimidation or verbal abuse of teachers or staff	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	223
Rows or fights among students	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	224
Physical injury to teachers or staff	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	225
Drug abuse	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	226
Weapons	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	227
Racism	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	228
Sexual harassment	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	229

34 In your school, how much is the learning of the students in school hindered by...

	Not at all	Very little	To some extent	A lot	
...poor condition of buildings?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	230
...poor heating , ventilation and/or lighting systems?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	231
...lack of teaching space (e.g. classrooms)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	232
...lack of teaching material (e.g. textbooks)?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	233
...not enough computers?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	234
...lack of teaching materials in the library?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	235
...lack of multi-media resources for teaching?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	236
...inadequate science laboratory equipment?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	237
...inadequate facilities for the fine arts?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	238
...overcrowded classrooms?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	239
...teachers not having adequate workspace outside their classroom?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	240
...difficulties recruiting teachers?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	241

35 Do you have the following at your school?

	Yes, available in school	Yes, through Local Authority	No	Don't know	
Library	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	242
Computers that pupils can use out of class	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	243
School nurse	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	244
School psychologist	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	245
School social worker	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	246
Study counsellor	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	247
Indoor sports facilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	248
Outdoor sports facilities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	249

36 Can the students borrow books from the school library to take home?

Yes	<input type="checkbox"/> 1	
No	<input type="checkbox"/> 2	
Not applicable (no library)	<input type="checkbox"/> 3	250

37 How often...

	Never	Once a year	2-3 times a year	4-6 times a year	7 or more times a year	
...are teacher-parent meetings organised by your school for students and/or their families?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	251
...apart from regular teacher-parent meetings, how often do teachers meet or talk with a typical student's parents to discuss his or her progress at school?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	252
...are letters, calendars, newsletters, etc. sent home to provide parents with information about the school?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	253
...are written reports of student's performance provided by your school for students and/or their families?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	254
...are teacher home visits provided by your school for students and/or their families?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	255
...are other events in addition to parent-teacher meetings organised by your school, to which parents are invited?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	256
...are fundraising activities that parents participate in organised by your school?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	257

38 In general, how would you describe parental support for student achievement within your school?

Very high	<input type="checkbox"/> 1	
High	<input type="checkbox"/> 2	
Medium	<input type="checkbox"/> 3	
Low	<input type="checkbox"/> 4	
Very low	<input type="checkbox"/> 5	258

39 How often do parents not come to scheduled meetings with teachers?

- Rarely or never 1
From time to time 2
Fairly often 3
Often 4

259

40 Approximately what proportion of students in your school have parents or guardians who...

	None or almost none	Less than half	About half	More than half	All or almost all	
...volunteer regularly to help in the classroom or in some other way for the school?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	260
...attend teacher-parent meetings?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	261
...attend cultural, sporting, or social events at the school?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	262
...do fundraising or other support activities for the school?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	263

41 To what extent do you agree or disagree that this school is located in a safe neighbourhood?

- Strongly disagree 1
Disagree 2
Agree 3
Strongly agree 4

264

42 If you have any comments about this questionnaire or the Youth in Europe Study please write these below.

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Thank you for your help with this study. Please return your completed questionnaire to the NatCen fieldworker when he/she visits or using the pre-paid envelope provided.