

Iceland
ISSP 2015 – Work Orientations IV
Questionnaire
(English)



The aim of the survey is to examine public attitudes, with a focus on **work orientation**. Amongst other things examined will be what matters most to Icelanders regarding work and the effects of work on family life. The responses of participants will help scholars, students and others interested in research related to work orientations. The main results will be published on the Social Science Research Institute's website next winter.

You are not obliged to answer the survey as a whole or individual questions. Nevertheless it is important that all questions are answered so that the results are as reliable as possible. All responses are confidential and the results will only be published in a manner that ensures that answers cannot be traced back to individual respondents.

Thank you in advance and with hope for a good reception,

Guðbjörg Andrea Jónsdóttir
Director, Social Science Research Institute

A1. Please tick one box for each statement below to show how much you agree or disagree with it, thinking of work in general.

Please tick one box on each line.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. A job is just a way of earning money - no more	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
b. I would enjoy having a paid job even if I did not need the money	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>

A2. For each of the following, please tick one box to show how important you personally think it is in a job.

Please tick one box on each line.

How important is...	Very important	Important	Neither important nor unimportant	Not important	Not important at all	Can't choose
a. ... job security	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
b. ... high income	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
c. ... good opportunities for advancement	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
d. ... an interesting job	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
e. ... a job that allows someone to work independently	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
f. ... a job that allows someone to help other people	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
g. ... a job that is useful to society	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
h. ... a job that allows someone to decide their times or days of work	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
i. ... a job that involves personal contact with other people	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>

A3. Have you ever given up or would you give up good job opportunities for the benefit of your family life?

Please tick one box only.

- | | | |
|--------------------------|---|--|
| <input type="checkbox"/> | 1 | Yes, I have done so and probably would do so again |
| <input type="checkbox"/> | 2 | Yes, I have done so but probably would not do so again |
| <input type="checkbox"/> | 3 | No, I have not done so but probably would do so |
| <input type="checkbox"/> | 4 | No, I have not done so and probably would not do so |
| <input type="checkbox"/> | 8 | Can't choose |

A4. Have you ever remained or would you remain in a job that was not satisfying for you for the benefit of your family life?

Please tick one box only.

- | | | |
|--------------------------|---|--|
| <input type="checkbox"/> | 1 | Yes, I have done so and probably would do so again |
| <input type="checkbox"/> | 2 | Yes, I have done so but probably would not do so again |
| <input type="checkbox"/> | 3 | No, I have not done so but probably would do so |
| <input type="checkbox"/> | 4 | No, I have not done so and probably would not do so |
| <input type="checkbox"/> | 8 | Can't choose |

A5. Over the past five years, have you been discriminated against with regard to work, for instance when applying for a job, or when being considered for a pay increase or promotion?

Please tick one box only.

- | | | | |
|--------------------------|---|-----------------------------------|----------------------------------|
| <input type="checkbox"/> | 1 | Yes | Please answer question A6 |
| <input type="checkbox"/> | 2 | No | Please go to question A7 |
| <input type="checkbox"/> | 0 | Did not work or did not seek work | Please go to question A7 |

A6. In your opinion, what was the main reason for the discrimination?

Please tick one box only.

- ☐ 1 My age
- ☐ 1 My race, ethnicity
- ☐ 1 My nationality
- ☐ 1 My sex
- ☐ 1 My religion
- ☐ 1 My disability/ mental or physical illness
- ☐ 1 My family responsibilities
- ☐ 1 My political beliefs
- ☐ 1 Other reason
- ☐ 8 Can't choose

A7. Over the past five years, have you been harassed by your superiors or co-workers at your job, for example, have you experienced any bullying, physical or psychological abuse?

Please tick one box only.

- ☐ 1 Yes
- ☐ 2 No
- ☐ 0 Does not apply (I do not have a job/ superior/ co-worker)

A8. To what extent do you agree or disagree with the following statements?

Please tick one box on each line.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. Workers need strong trade unions to protect their interests.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
b. Strong trade unions are bad for Iceland's economy.	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

A9. Suppose you could decide on your work situation at present. Which of the following would you prefer?

Please tick one box only.

- | | | |
|--------------------------|---|--|
| <input type="checkbox"/> | 1 | A full-time job [30 hours or more per week] |
| <input type="checkbox"/> | 2 | A part-time job [10-29 hours per week] |
| <input type="checkbox"/> | 3 | A job with less than [10] hours a week |
| <input type="checkbox"/> | 4 | No paid job at all |
| <input type="checkbox"/> | 8 | Can't choose |

A10. Are you currently working for pay?

If you are currently on leave BUT are in an employment relationship, please answer "Yes."

Please tick one box only.

- | | | | |
|--------------------------|---|-----|-----------------------------------|
| <input type="checkbox"/> | 1 | Yes | Please answer question A11 |
| <input type="checkbox"/> | 2 | No | Please go to question A32 |

IF YOU ARE CURRENTLY WORKING FOR PAY (OR ON LEAVE BUT ARE IN AN EMPLOYMENT RELATIONSHIP): PLEASE ANSWER QUESTIONS A11 – A31.

A11. Think of the number of hours you work, and the money you earn in your main job, including any regular overtime.

If you had only one of these three choices, which of the following would you prefer?

Please tick one box only.

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | 1 | Work longer hours and earn more money |
| <input type="checkbox"/> | 2 | Work the same number of hours and earn the same money |
| <input type="checkbox"/> | 3 | Work fewer hours and earn less money |
| <input type="checkbox"/> | 8 | Can't choose |

A12. For each of these statements about your (main) job, please tick one box to show how much you agree or disagree that it applies to your job.

Please tick one box on each line.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. My job is secure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. My income is high	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. My opportunities for advancement are high	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. My job is interesting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I can work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. In my job I can help other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. My job is useful to society	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. In my job, I have personal contact with other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A13. Now some more questions about your working conditions.

Please tick one box for each item below to show how often it applies to your work.

Please tick one box on each line.

How often...	Always	Often	Sometimes	Hardly ever	Never	Can't choose
a. ... do you have to do hard physical work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. ... do you find your work stressful?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A14. And how often...

Please tick one box on each line.

	Always	Often	Sometimes	Hardly ever	Never	Can't choose
a. ... do you work at home during your usual working hours?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b....does your job involve working on weekends?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A15. Which of the following statements best describes how your working hours are decided? (By working hours we mean here the times you start and finish work, and not the total hours you work per week or month.)

Please tick one box only.

- ☐ 1 Starting and finishing times are decided by my employer and **I cannot change** them on my own
- ☐ 2 I can decide the time I start and finish work, **within certain limits**
- ☐ 3 **I am entirely free** to decide when I start and finish work

A16. Which of the following statements best describes your usual working schedule in your main job?

Please tick one box only.

- ☐ 1 I have a regular schedule or shift (daytime, evening, or night)
- ☐ 2 I have a schedule or shift which regularly changes (for example, from days to evenings or to nights)
- ☐ 3 I have a schedule where daily working times are decided at short notice by my employer
- ☐ 8 Can't choose

A17. Which of the following statements best describes how your daily work is organized?

Please tick one box only.

- ☐ 1 **I am free** to decide how my daily work is organized
- ☐ 2 I can decide how my daily work is organized, **within certain limits**
- ☐ 3 **I am not free** to decide how my daily work is organized
- ☐ 8 Can't choose

A18. How difficult would it be for you to take an hour or two off during working hours, to take care of personal or family matters?

Please tick one box only.

- ☐ 1 Not difficult at all
- ☐ 2 Not too difficult
- ☐ 3 Somewhat difficult
- ☐ 4 Very difficult
- ☐ 8 Can't choose

A19. How often do you feel that...

Please tick one box on each line.

	Always	Often	Sometimes	Hardly ever	Never	Can't choose
a. ...the demands of your job interfere with your family life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. ...the demands of your family life interfere with your job?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A20. How much of your past work experience and/ or job skills can you make use of in your present job?

Please tick one box only.

<input type="checkbox"/>	Almost none
<input type="checkbox"/>	A little
<input type="checkbox"/>	A lot
<input type="checkbox"/>	Almost all
<input type="checkbox"/>	Can't choose

A21. Over the past 12 months, have you had any training to improve your job skills, either at the workplace or somewhere else?

Please tick one box only.

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No
<input type="checkbox"/>	Can't choose

A22. In general, how would you describe relations at your workplace...

Please tick one box on each line.

	Very good	Quite good	Neither good nor bad	Quite bad	Very bad	Can't choose
a. ... between management and employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. ... between workmates/ colleagues?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A23. How satisfied are you in your (main) job?*Please tick one box only.*

- | | | |
|--------------------------|---|------------------------------------|
| <input type="checkbox"/> | 1 | Completely satisfied |
| <input type="checkbox"/> | 2 | Very satisfied |
| <input type="checkbox"/> | 3 | Fairly satisfied |
| <input type="checkbox"/> | 4 | Neither satisfied nor dissatisfied |
| <input type="checkbox"/> | 5 | Fairly dissatisfied |
| <input type="checkbox"/> | 6 | Very dissatisfied |
| <input type="checkbox"/> | 7 | Completely dissatisfied |
| <input type="checkbox"/> | 8 | Can't choose |

A24. To what extent do you agree or disagree with each of the following statements?*Please tick one box on each line.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. I am willing to work harder than I have to in order to help the firm or organization I work for succeed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I am proud to be working for my firm or organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I would turn down another job that offered quite a bit more pay in order to stay with this organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A25. Now think of the type of work you do, irrespective of the firm or organization you work for. To what extent do you agree or disagree with each of the following statements?*Please tick one box on each line.*

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. Given the chance, I would change my present type of work for something different.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I am proud of the type of work I do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A26. How difficult or easy do you think it would be for you to find a job at least as good as your current one?

Please tick one box only.

- | | | |
|--------------------------|---|----------------------------|
| <input type="checkbox"/> | 1 | Very easy |
| <input type="checkbox"/> | 2 | Fairly easy |
| <input type="checkbox"/> | 3 | Neither easy nor difficult |
| <input type="checkbox"/> | 4 | Fairly difficult |
| <input type="checkbox"/> | 5 | Very difficult |
| <input type="checkbox"/> | 8 | Can't choose |

A27. All in all, how likely is it that you will try to find a job with another firm or organization within the next 12 months?

Please tick one box only.

- | | | |
|--------------------------|---|---------------|
| <input type="checkbox"/> | 1 | Very likely |
| <input type="checkbox"/> | 2 | Likely |
| <input type="checkbox"/> | 3 | Unlikely |
| <input type="checkbox"/> | 4 | Very unlikely |
| <input type="checkbox"/> | 8 | Can't choose |

A28. To what extent, if at all, do you worry about the possibility of losing your job?

Please tick one box only.

- | | | |
|--------------------------|---|------------------------|
| <input type="checkbox"/> | 1 | I worry a great deal |
| <input type="checkbox"/> | 2 | I worry to some extent |
| <input type="checkbox"/> | 3 | I worry a little |
| <input type="checkbox"/> | 4 | I don't worry at all |

A29. To what extent do you agree or disagree with the following statements?

Please tick one box on each line.

In order to avoid unemployment I would be willing...	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. to accept a job that requires new skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. to accept a position with lower pay.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. to accept temporary employment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. to travel longer to get to work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. to move within Iceland	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. to move to a different country.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A30. Over the past 12 months, in addition to your main job, have you done any other work for pay?

Please tick one box only.

- ☐ 1 Yes, during all of that period
- ☐ 2 Yes, during most of that period
- ☐ 3 Yes, during some of that period
- ☐ 4 No

Please answer question A31

Please answer question A31

Please answer question A31

Please go to question B1

A31. Over the entire 12 months, how much did you earn from your additional job(s) in total compared with your main job?

Please tick one box only.

From my additional job(s), I earned...

- ☐ 1 much less than from main job
- ☐ 2 less than from main job
- ☐ 3 about the same as from main job
- ☐ 4 more than from main job
- ☐ 5 much more than from main job
- ☐ 8 Can't choose

PLEASE ANSWER QUESTIONS A32 - A44 IF YOU ARE NOT CURRENTLY WORKING FOR PAY

A32. Have you ever had a paid job for one year or more?

Please tick one box only.

- | | |
|--------------------------|-----|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |

Please answer question A33

Please go to question A36

A33.

a. When did your last paid job end?

In _____(year)

b. Please also specify the month.

In _____(month)

A34. How satisfied were you in your last job?

Please tick one box only.

- | | |
|--------------------------|------------------------------------|
| <input type="checkbox"/> | Completely satisfied |
| <input type="checkbox"/> | Very satisfied |
| <input type="checkbox"/> | Fairly satisfied |
| <input type="checkbox"/> | Neither satisfied nor dissatisfied |
| <input type="checkbox"/> | Fairly dissatisfied |
| <input type="checkbox"/> | Very dissatisfied |
| <input type="checkbox"/> | Completely dissatisfied |
| <input type="checkbox"/> | Can't choose |

A35. What was the main reason that your job ended?

Please tick one box only.

- | | | |
|--------------------------|----|--------------------------------------|
| <input type="checkbox"/> | 1 | I reached retirement age |
| <input type="checkbox"/> | 2 | I retired early, by choice |
| <input type="checkbox"/> | 3 | I retired early, not by choice |
| <input type="checkbox"/> | 4 | I became (permanently) disabled |
| <input type="checkbox"/> | 5 | My place of work shut down |
| <input type="checkbox"/> | 6 | I was dismissed |
| <input type="checkbox"/> | 7 | My term of employment/contract ended |
| <input type="checkbox"/> | 8 | Family responsibilities |
| <input type="checkbox"/> | 9 | I got married |
| <input type="checkbox"/> | 10 | Other reason, what? _____ |

A36. Would you like to have a paid job, either now or in the future?

Please tick one box only.

- | | | | |
|--------------------------|---|-----|-----------------------------------|
| <input type="checkbox"/> | 1 | Yes | Please answer question A37 |
| <input type="checkbox"/> | 2 | No | Please go to question A43 |

A37. How likely do you think it is that you would find a job?

Please tick one box only.

- | | | |
|--------------------------|---|---------------|
| <input type="checkbox"/> | 1 | Very likely |
| <input type="checkbox"/> | 2 | Likely |
| <input type="checkbox"/> | 3 | Unlikely |
| <input type="checkbox"/> | 4 | Very unlikely |
| <input type="checkbox"/> | 8 | Can't choose |

A38. To what extent, if at all, do you worry about the possibility of not finding a job?

Please tick one box only.

- | | | |
|--------------------------|---|------------------------|
| <input type="checkbox"/> | 1 | I worry a great deal |
| <input type="checkbox"/> | 2 | I worry to some extent |
| <input type="checkbox"/> | 3 | I worry a little |
| <input type="checkbox"/> | 4 | I don't worry at all |

A39. To what extent do you agree or disagree with the following statements?

Please tick one box on each line.

In order to get a job I would be willing...	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. to accept a job that requires new skills.	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
b. to accept a position with low pay.	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
c. to accept temporary employment.	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
d. to travel a long time to get to work.	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
e. to move within Iceland.	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
f. to move to a different country.	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>

A40. Thinking about the past 12 months, have you done any of the following in order to find a job?

Please tick one box on each line.

	No	Yes, once or twice	Yes, more than twice
a. Registered at a public employment agency?	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>
b. Registered at a private employment agency?	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>
c. Answered advertisements for jobs?	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>
d. Advertised yourself for a job, for example on the internet or in newspapers?	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>
e. Applied directly to employers?	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>
f. Asked relatives, friends, or colleagues to help you find a job?	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>

A41. Over the past 12 months, have you had any training to improve your job skills?

Please tick one box only.

- Yes
- No
- Can't choose

A42. Are you currently looking for a job?

Please tick one box only.

- | | |
|--------------------------|-----|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |

A43. What is your main source of economic support?

Please tick one box only.

- | | |
|--------------------------|------------------------------|
| <input type="checkbox"/> | Current spouse/ partner |
| <input type="checkbox"/> | Other family members |
| <input type="checkbox"/> | Pension (private/ state) |
| <input type="checkbox"/> | Unemployment benefits |
| <input type="checkbox"/> | Social assistance/ welfare |
| <input type="checkbox"/> | Occasional work |
| <input type="checkbox"/> | Student loans/ stipends |
| <input type="checkbox"/> | Savings |
| <input type="checkbox"/> | Investments or rental income |
| <input type="checkbox"/> | Other |

A44. To what extent, if at all, do you worry about the possibility of losing this main economic support?

Please tick one box only.

- | | |
|--------------------------|------------------------|
| <input type="checkbox"/> | I worry a great deal |
| <input type="checkbox"/> | I worry to some extent |
| <input type="checkbox"/> | I worry a little |
| <input type="checkbox"/> | I don't worry at all |

If you are currently working for pay, please go to question B2 next.

B1. Over the past five years, have you ever worked for pay?

Please tick one box only.

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

Please answer question B2

Please go to question B3

B2. Over the past five years, did you experience any of the following changes in your working life?

Please tick one box on each line.

	No	Yes, once	Yes, twice	Yes, three times	Yes, more than three times	Can't choose
a. I was unemployed for a period longer than three months.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I changed my employer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I changed my occupation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I started my own business/ became self-employed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I took up an additional job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B3. How would you generally rate your current financial situation?

Please tick one box only.

My current financial situation is...

<input type="checkbox"/>	Very good
<input type="checkbox"/>	Good
<input type="checkbox"/>	Neither good nor bad
<input type="checkbox"/>	Bad
<input type="checkbox"/>	Very bad
<input type="checkbox"/>	Can't choose

B4. Compared to five years ago, how do you think your financial situation has changed?

Please tick one box only.

My current financial situation is...

- | | | |
|--------------------------|---|-------------------------------------|
| <input type="checkbox"/> | 1 | much better than five years ago |
| <input type="checkbox"/> | 2 | somewhat better than five years ago |
| <input type="checkbox"/> | 3 | the same as five years ago |
| <input type="checkbox"/> | 4 | somewhat worse than five years ago |
| <input type="checkbox"/> | 5 | much worse than five years ago |
| <input type="checkbox"/> | 8 | Can't choose |

B5. And what will your financial situation likely be in five years?

Please tick one box only.

My financial situation in five years will likely be...

- | | | |
|--------------------------|---|----------------------------|
| <input type="checkbox"/> | 1 | much better than today |
| <input type="checkbox"/> | 2 | somewhat better than today |
| <input type="checkbox"/> | 3 | the same as today |
| <input type="checkbox"/> | 4 | somewhat worse than today |
| <input type="checkbox"/> | 5 | much worse than today |
| <input type="checkbox"/> | 8 | Can't choose |

B6. To what extent do you agree or disagree with the following statements?

Please tick one box on each line.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. It is good for Iceland's economy that people aged 60 and over are employed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. When people aged 60 and over are employed, they take jobs away from younger people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B7. In general, would you say your health is ...

Please tick one box only.

- | | | |
|--------------------------|---|--------------|
| <input type="checkbox"/> | 1 | excellent |
| <input type="checkbox"/> | 2 | very good |
| <input type="checkbox"/> | 3 | good |
| <input type="checkbox"/> | 4 | fair |
| <input type="checkbox"/> | 5 | poor |
| <input type="checkbox"/> | 8 | Can't choose |

C1. How often have you had injuries which needed the attention of a medical doctor or a nurse in the past 12 months?

Please tick one box only.

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | 0 | I have not been injured in the past 12 months |
| <input type="checkbox"/> | 1 | Once |
| <input type="checkbox"/> | 2 | Twice |
| <input type="checkbox"/> | 3 | Three times |
| <input type="checkbox"/> | 4 | Four times or more often |

Please answer question C4 next

Please answer question C2

Please answer question C2

Please answer question C2

Please answer question C2

C2. If you have been injured more than once in the last 12 months, only consider the most serious injury when answering the next two questions (the injury that took the longest to recover from).

What was the cause of the injury?

Please tick one box only.

- | | | |
|--------------------------|---|--|
| <input type="checkbox"/> | 1 | An injury from a traffic accident |
| <input type="checkbox"/> | 2 | An injury from home or in leisure activities |
| <input type="checkbox"/> | 3 | A work related injury |
| <input type="checkbox"/> | 4 | A sports related injury |
| <input type="checkbox"/> | 5 | An injury caused by violence, e.g. by a fight |
| <input type="checkbox"/> | 6 | An injury from a different cause, which? _____ |

C3. Were you absent from work or school for an entire day or a longer period because of this injury?

Please tick one box only.

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | 0 | No, I was not absent from work or school for a day |
| <input type="checkbox"/> | 1 | Yes, I was absent from work or school for 1-6 days |
| <input type="checkbox"/> | 2 | Yes, I was absent from work or school for 1-3 weeks |
| <input type="checkbox"/> | 3 | Yes, I was absent from work or school for 1-2 months |
| <input type="checkbox"/> | 4 | Yes, I was absent from work or school for 3-6 months |
| <input type="checkbox"/> | 5 | Yes, I was absent from work or school for 7-12 months |

C4. How many days, if any, have you been absent from work or school due to you personally being sick in the past 6 months?

Please tick one box only.

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | 0 | Have not been absent from work do to own illness in the last 6 months |
| <input type="checkbox"/> | 1 | Ca. 1-5 days |
| <input type="checkbox"/> | 2 | Ca. 6-10 days |
| <input type="checkbox"/> | 3 | Ca. 11-20 days |
| <input type="checkbox"/> | 4 | Ca. 21-30 days |
| <input type="checkbox"/> | 5 | Ca. 1-2 months |
| <input type="checkbox"/> | 6 | Ca. 3-4 months |
| <input type="checkbox"/> | 7 | Ca. 5 months or more |
| <input type="checkbox"/> | 8 | Have not worked in the past 6 months due to own illness |
| <input type="checkbox"/> | 9 | Have not worked in the past 6 months for another reason |

C5. Have you ever become sick due to factors within your work/work environment?

Please tick one box only.

- | | | |
|--------------------------|---|--|
| <input type="checkbox"/> | 0 | Nei |
| <input type="checkbox"/> | 1 | Já, en hef náð mér og hef <u>haldið áfram</u> í sömu vinnu |
| <input type="checkbox"/> | 2 | Já, en hef náð mér og <u>skipt</u> um vinnu |
| <input type="checkbox"/> | 3 | Já, en hef <u>ekki</u> náð mér en hef <u>haldið áfram</u> í sömu vinnu |
| <input type="checkbox"/> | 4 | Já, en hef <u>ekki</u> náð mér <u>þrátt fyrir</u> nýja vinnu |
| <input type="checkbox"/> | 5 | Já náði mér en hef hætt störfum <u>vegna veikindanna</u> |
| <input type="checkbox"/> | 6 | Já náði mér en hef hætt störfum af <u>öðrum ástæðum</u> |
| <input type="checkbox"/> | 7 | Já náði mér <u>ekki</u> og hef hætt störfum |

C6. Does your health affect your work ...

Please tick one box only.

- | | | |
|--------------------------|---|----------------------|
| <input type="checkbox"/> | 1 | Very rarely or never |
| <input type="checkbox"/> | 2 | Rarely |
| <input type="checkbox"/> | 3 | Sometimes |
| <input type="checkbox"/> | 4 | Often |
| <input type="checkbox"/> | 5 | Very often or always |

C7. Have you experienced any of the following in relations to your work?

Please tick all that applies

- | | | | |
|--------------------------|---|-------------------|---------------------------------------|
| <input type="checkbox"/> | 1 | Bullying | Please answer question C8 |
| <input type="checkbox"/> | 2 | Sexual harassment | Please answer question C8 |
| <input type="checkbox"/> | 3 | Physical violence | Please answer question C8 |
| <input type="checkbox"/> | 4 | Threats | Please answer question C8 |
| <input type="checkbox"/> | 5 | No, never | Please answer question D1 next |

C8. Who was the offender?

Please tick all that applies.

- | | | |
|--------------------------|---|--------------------------|
| <input type="checkbox"/> | 1 | A customer |
| <input type="checkbox"/> | 2 | A co-worker |
| <input type="checkbox"/> | 3 | A supervisor |
| <input type="checkbox"/> | 4 | Someone else, who? _____ |

D1. Have you heard about the services that VIRK – Vocational rehabilitation fund (VIRK-Starfsendur-hæfingarsjóður) offers?

Please tick one box only.

- | | | |
|--------------------------|--|---------------------------------------|
| <input type="checkbox"/> | No I have not heard about it | Please answer question D4 next |
| <input type="checkbox"/> | Yes, I have but I have not used their services | Please answer question D2 |
| <input type="checkbox"/> | Yes, I have received vocational rehabilitation at VIRK and was able to return to/start work/studies/job search, full time or part time, after their services | Please answer question D2 |
| <input type="checkbox"/> | Yes, I have received vocational rehabilitation at VIRK but I was unable to return to/start work/studies/job search after their services | Please answer question D2 |

D2. Where did you first learn about VIRK?

Please tick one box only.

- | | |
|--------------------------|--------------------------------|
| <input type="checkbox"/> | On VIRK's website |
| <input type="checkbox"/> | In a pamphlet about VIRK |
| <input type="checkbox"/> | At the doctor's office |
| <input type="checkbox"/> | From other health care workers |
| <input type="checkbox"/> | From my union |
| <input type="checkbox"/> | From my pension fund |
| <input type="checkbox"/> | From my employer |
| <input type="checkbox"/> | From family/friends |
| <input type="checkbox"/> | Other, where from? _____ |

D3. Would you recommend VIRK's services to others in need of vocational rehabilitation?

Please tick one box only.

- | | |
|--------------------------|-----|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |

D4. In the last 12 months have you attended work despite the fact that you felt you could not carry out your work as well as you are used to because of your poor health?

Please tick one box only.

- | | | |
|----------------------------|--|---------------------------------------|
| <input type="checkbox"/> 0 | No, never | Please answer question E1 next |
| <input type="checkbox"/> 1 | Yes, once in the last 12 months | Please answer question D5 |
| <input type="checkbox"/> 2 | Yes, 2-5 times in the last 12 months | Please answer question D5 |
| <input type="checkbox"/> 3 | Yes, 6 times or more often in the last 12 months | Please answer question D5 |
| <input type="checkbox"/> 4 | Not applicable/not working | Please answer question E1 next |

D5. What was the reason for your sickness the last time you went to work sick?

Please tick one box only

- | | |
|----------------------------|---|
| <input type="checkbox"/> 1 | Musculoskeletal problems (e.g. back or neck pain) |
| <input type="checkbox"/> 2 | Stress |
| <input type="checkbox"/> 3 | Colds or flu |
| <input type="checkbox"/> 4 | Mental health issues (e.g. depression or anxiety) |
| <input type="checkbox"/> 5 | Other, what? _____ |

The next questions deal with your bakground.

E1.

Please tick one box only

Are you...

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

E2.

Please write in the year of your birth (use four digits for the year)

When were you born?

--	--	--	--

E3. How many years (full-time equivalent) have you been in formal education?

Include all primary and secondary schooling, university and other post-secondary education, and full-time vocational training, but do not include repeated years. If you are currently in education, count the number of years you have completed so far.

Please enter number of years or tick a box applicable

_____ years

☐ I have no formal schooling

E4. What is the highest level of education that you have attained?

Please tick one box only

- ☐ Primary school not finished
- ☐ Primary school (until around 12 years old)
- ☐ Primary school (until around 14 years old)
- ☐ Compulsory school, secondary school exams, the nationally co-ordinated junior college entrance examination
- ☐ Short vocational training on secondary school level (e.g. home economics, marine captain study programme, foundation courses in trade, shorter music studies)
- ☐ Secondary education (gymnasium), exam from the university bridging course exam from the preliminary studies department
- ☐ Apprenticeship - upper secondary (vocational training)
- ☐ Longer vocational training on secondary school level (e.g. nursing assistant certificate programme, masseuse training, trade exam)
- ☐ Vocational training on completion of secondary school level (e.g. Grade 4 marine captain or engineer, medical secretary)
- ☐ Master craftsman - licence to supervise apprentices
- ☐ Short, practical training at university level, diploma
- ☐ Short vocational training at university level, basic diploma, 2-3 years (e.g. system analysis, business management, music and instrument teachers, music studies at a university level, art studies at a university level)
- ☐ Undergraduate degree BA/BS/B.Ed. or additional diploma
- ☐ Studies at university longer than 4 years, at an undergraduate level, such as medicine, law, pharmacology, theology, odontology
- ☐ Master's degree MA/MS
- ☐ Doctoral degree PhD
- ☐ Other, what? _____
- ☐ Do not want to answer

THE NEXT QUESTIONS DEAL WITH YOUR WORK SITUATION.

BY WORK WE MEAN DOING INCOME-PRODUCING WORK, AS AN EMPLOYEE, SELFEMPLOYED OR WORKING FOR YOUR OWN FAMILY'S BUSINESS, FOR AT LEAST ONE HOUR PER WEEK. IF YOU TEMPORARILY ARE NOT WORKING FOR PAY BECAUSE OF TEMPORARY ILLNESS/PARENTAL LEAVE/VACATION/STRIKE, ETC., PLEASE REFER TO YOUR NORMAL WORK SITUATION.

E5. Are you currently working for pay, did you work for pay in the past, or have you never been in paid work?

Please tick one box only

- | | | |
|--------------------------|---|---------------------------------|
| <input type="checkbox"/> | I am currently in paid work | Please continue with E6 |
| <input type="checkbox"/> | I am currently not in paid work but I had paid work in the past | Please continue with E7 |
| <input type="checkbox"/> | I have never had paid work | Please continue with E14 |

E6. How many hours, on average, do you usually work for pay in a normal week, including overtime?

If you work for more than one employer, or if you are both employed and self-employed, please count the total number of working hours that you do.

Please write in.

On average, I work _____ hours a week, overtime included.

THE NEXT QUESTIONS DEAL WITH SOME MORE DETAILS ON YOUR WORK SITUATION.

IF YOU WORK FOR MORE THAN ONE EMPLOYER, OR IF YOU ARE BOTH EMPLOYED AND SELF-EMPLOYED, PLEASE REFER TO YOUR MAIN JOB.

IF YOU ARE RETIRED OR NOT CURRENTLY WORKING, PLEASE REFER TO YOUR LAST MAIN JOB.

E7. Are/were you an employee, self-employed, or working for your own family's business?

Please tick one box only

- | | | |
|--------------------------|--|--------------------------------|
| <input type="checkbox"/> | An employee | Please continue with E9 |
| <input type="checkbox"/> | Self-employed without employees | Please continue with E9 |
| <input type="checkbox"/> | Self-employed with employees | Please continue with E8 |
| <input type="checkbox"/> | Working for your own family's business | Please continue with E9 |

E8. How many employees do/did you have, not counting yourself?

Please write in.

_____ employees

E9. Do/did you supervise other employees?

Please tick one box only

☐ 1 Yes

Please continue with E10

☐ 2 No

Please continue with E11

E10. How many other employees do/did you supervise?

Please write in.

_____ employees

E11. Do/did you work for a for-profit organisation or for a non-profit organisation?

Please tick one box only

☐ 1 I work/ed for a for-profit organisation

☐ 2 I work/ed for a non-profit organisation

E12. Do/did you work for a public or a private employer?

Please tick one box only

☐ 1 Public employer

☐ 2 Private employer

E13. What is/was your occupation – i.e., what is/was the name or title of your main job?

Please write in and describe as clearly as possible.

a. My occupation is/was:

b. In your main job, what kind of activities do/did you do most of the time?

c. What does/did the firm/organisation you work/worked for mainly make or do – i.e., what kind of production/function is/was performed at your workplace?

E14. Which of the following best describes your current situation?

If you temporarily are not working because of temporary illness/parental leave/vacation/strike etc., please refer to your normal work situation

Please tick one box only

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | 1 | In paid work (as an employee, self-employed, or working for your own family's business) |
| <input type="checkbox"/> | 2 | Unemployed and looking for a job |
| <input type="checkbox"/> | 3 | In education (not paid for by employer), in school/student/pupil even if on vacation |
| <input type="checkbox"/> | 4 | Apprentice or trainee |
| <input type="checkbox"/> | 5 | Permanently sick or disabled |
| <input type="checkbox"/> | 6 | Retired |
| <input type="checkbox"/> | 7 | Doing housework, looking after the home, children or other persons |
| <input type="checkbox"/> | 9 | Other |

E15. Do you have a spouse or a steady partner and, if yes, do you share the same household?

Please tick one box only

- | | | |
|--------------------------|--|---------------------------------|
| <input type="checkbox"/> | Yes, I have a spouse/partner and we share the same household | Please continue with E16 |
| <input type="checkbox"/> | Yes, I have a spouse/partner but we don't share the same household | Please continue with E16 |
| <input type="checkbox"/> | No, I don't have a spouse/partner | Please continue with E22 |

THE NEXT QUESTIONS DEAL WITH THE WORK SITUATION OF YOUR SPOUSE/PARTNER.

BY WORK WE MEAN DOING INCOME-PRODUCING WORK, AS AN EMPLOYEE, SELFEMPLOYED OR WORKING FOR HIS/HER OWN FAMILY'S BUSINESS, FOR AT LEAST ONE HOUR PER WEEK. IF HE/SHE TEMPORARILY IS NOT WORKING FOR PAY BECAUSE OF TEMPORARY ILLNESS/PARENTAL LEAVE/VACATION/STRIKE, ETC., PLEASE REFER TO HIS/HER NORMAL WORK SITUATION.

E16. Is your spouse/partner currently working for pay, did he/she work for pay in the past, or has he/she never been in paid work?

Please tick one box only

- | | | |
|--------------------------|---|---------------------------------|
| <input type="checkbox"/> | He/she is currently in paid work | Please continue with E17 |
| <input type="checkbox"/> | He/she is currently not in paid work but he/she had paid work in the past | Please continue with E18 |
| <input type="checkbox"/> | He/she has never had paid work | Please continue with E21 |

E17. How many hours, on average, does your spouse/partner usually work for pay in a normal week, including overtime?

If he/she works for more than one employer, or if he/she is both employed and self-employed, please count the total number of working hours that he/she does.

Please write in.

On average, he/she works _____ hours a week, overtime included.

THE NEXT QUESTIONS DEAL WITH SOME MORE DETAILS ON YOUR SPOUSE'S/PARTNER'S WORK SITUATION.

IF HE/SHE WORKS FOR MORE THAN ONE EMPLOYER, OR IF HE/SHE IS BOTH EMPLOYED AND SELF-EMPLOYED, PLEASE REFER TO HIS/HER MAIN JOB.

IF HE/SHE IS RETIRED OR NOT CURRENTLY WORKING, PLEASE REFER TO HIS/HER LAST MAIN JOB.

E18. Is/was your spouse/partner an employee, self-employed, or working for his/her own family's business?

Please tick one box only

- | | |
|--------------------------|---|
| <input type="checkbox"/> | An employee |
| <input type="checkbox"/> | Self-employed without employees |
| <input type="checkbox"/> | Self-employed with employees |
| <input type="checkbox"/> | Working for his/her own family's business |

E19. Does/did your spouse/partner supervise other employees?

Please tick one box only

- | | |
|--------------------------|-----|
| <input type="checkbox"/> | Yes |
| <input type="checkbox"/> | No |

E20. What is/was your spouse's/partner's occupation – i.e., what is/was the name or title of his/her main job?

Please write in and describe as clearly as possible.

a. His/her occupation is/was:

b. In his/her main job, what kind of activities does/did he/she do most of the time?

c. What does/did the firm/organisation he/she work/worked for mainly make or do – i.e., what kind of production/function is/was performed at his/her workplace?

E21. Which of the following best describes your spouse's/partner's current situation?

If he/she temporarily is not working because of temporary illness/parental leave/vacation/strike etc., please refer to his/her normal work situation.

Please tick one box only

- | | | |
|--------------------------|---|---|
| <input type="checkbox"/> | 1 | In paid work (as an employee, self-employed, or working for your own family's business) |
| <input type="checkbox"/> | 2 | Unemployed and looking for a job |
| <input type="checkbox"/> | 3 | In education (not paid for by employer), in school/student/pupil even if on vacation |
| <input type="checkbox"/> | 4 | Apprentice or trainee |
| <input type="checkbox"/> | 5 | Permanently sick or disabled |
| <input type="checkbox"/> | 6 | Retired |
| <input type="checkbox"/> | 7 | Doing housework, looking after the home, children or other persons |
| <input type="checkbox"/> | 9 | Other |

**E22. Are you or have you ever been a member of a trade union or similar organisation?
If yes: is that currently or only previously?**

Please tick one box only

- | | | |
|--------------------------|---|-----------------------------------|
| <input type="checkbox"/> | 1 | Yes, currently |
| <input type="checkbox"/> | 2 | Yes, previously but not currently |
| <input type="checkbox"/> | 3 | No, never |

E23. Do you belong to a religion and, if yes, which religion do you belong to?

Please tick one box only

- | | | |
|--------------------------|----|--|
| <input type="checkbox"/> | 0 | No religion |
| <input type="checkbox"/> | 1 | Icelandic National Church |
| <input type="checkbox"/> | 2 | Catholic |
| <input type="checkbox"/> | 3 | Protestant |
| <input type="checkbox"/> | 4 | Orthodox |
| <input type="checkbox"/> | 5 | Other Christian |
| <input type="checkbox"/> | 6 | Jewish |
| <input type="checkbox"/> | 7 | Islamic |
| <input type="checkbox"/> | 8 | Buddhist |
| <input type="checkbox"/> | 9 | Hindu |
| <input type="checkbox"/> | 10 | Other Asian religions |
| <input type="checkbox"/> | 11 | Paganism (belief in the old nordic gods) |
| <input type="checkbox"/> | 12 | Other religions |

E24. Apart from such special occasions as weddings, funerals, etc., how often do you attend religious services?

Please tick one box only

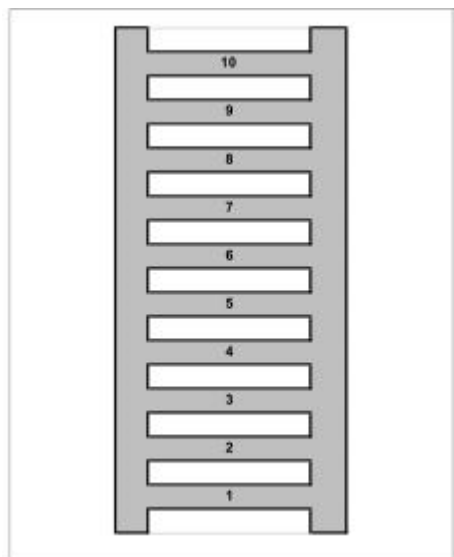
- | | | |
|--------------------------|---|------------------------------------|
| <input type="checkbox"/> | 1 | Several times a week or more often |
| <input type="checkbox"/> | 2 | Once a week |
| <input type="checkbox"/> | 3 | 2 or 3 times a month |
| <input type="checkbox"/> | 4 | Once a month |
| <input type="checkbox"/> | 5 | Several times a year |
| <input type="checkbox"/> | 6 | Once a year |
| <input type="checkbox"/> | 7 | Less frequently than once a year |
| <input type="checkbox"/> | 8 | Never |

E25. In our society, there are groups which tend to be towards the top and groups which tend to be towards the bottom. Below is a scale that runs from the top to the bottom.

Where would you put yourself on this scale?

Please tick one box only.

<input type="checkbox"/>	10	-Top
<input type="checkbox"/>	9	
<input type="checkbox"/>	8	
<input type="checkbox"/>	7	
<input type="checkbox"/>	6	
<input type="checkbox"/>	5	
<input type="checkbox"/>	4	
<input type="checkbox"/>	3	
<input type="checkbox"/>	2	
<input type="checkbox"/>	1	-Bottom



E26. Some people don't vote nowadays for one reason or another. Did you vote in the last Icelandic national election in April 2013?

Please tick one box only.

<input type="checkbox"/>	Yes, I did vote	Please continue with E27
<input type="checkbox"/>	No, I did not vote	Please continue with E28
<input type="checkbox"/>	I was not eligible to vote in the last election	Please continue with E28

E27. Thinking back to the last general election in April 2013. Which party did you vote for?

Please tick one box only.

- | | | |
|--------------------------|----|---|
| <input type="checkbox"/> | 1 | Alþýðufylkinguna (People's front of Iceland (R)) |
| <input type="checkbox"/> | 2 | Bjarta framtíð (Bright Future (A)) |
| <input type="checkbox"/> | 3 | Dögun (Dawn (P)) |
| <input type="checkbox"/> | 4 | Flokk heimilanna (Households Party (I)) |
| <input type="checkbox"/> | 5 | Framboð Sturlu Jónssonar (Sturla Jónsson (K)) |
| <input type="checkbox"/> | 6 | Framsóknarflokkinn (Progressive Party (B)) |
| <input type="checkbox"/> | 7 | Hægri græna (Right Green People's Party (G)) |
| <input type="checkbox"/> | 8 | Húmanistaflokkinn (Humanist Party (H)) |
| <input type="checkbox"/> | 9 | Landsbyggðarflokkinn (Rural Party (M)) |
| <input type="checkbox"/> | 10 | Lýðræðisvaktina (Democracy Watch (L)) |
| <input type="checkbox"/> | 11 | Pírata (Pirate Party (P)) |
| <input type="checkbox"/> | 12 | Regnbogann (Rainbow (J)) |
| <input type="checkbox"/> | 13 | Samfylkinguna (Social Democratic Alliance (S)) |
| <input type="checkbox"/> | 14 | Sjálfstæðisflokkinn (Independence Party (D)) |
| <input type="checkbox"/> | 15 | Vinstri hreyfinguna - grænt framboð (Left-Green Movement (V)) |
| <input type="checkbox"/> | 16 | Other party, which one? _____ |
| <input type="checkbox"/> | 17 | Empty ballot |

E28. Do you belong to a national minority or ethnic minority here in Iceland?

Please select one or two groups only.

- | | | |
|--------------------------|---|-----------------------|
| <input type="checkbox"/> | 1 | Yes, which one? _____ |
| <input type="checkbox"/> | 2 | No |

E29-30. Including yourself, how many people – including children – usually live in your household?

Please write in.

Adults of 18 years and older

Children between 6-17 years of age

Children up to the age of 5 years

This makes a total of how many people?

E31. What is the age of the youngest child in your household?

Please write in or tick the box.

Age of youngest child _____ years

☐

Does not apply/ no children in household

E32. Before taxes and other deductions, what on average is your own total monthly income?

Please write in.

My total monthly income (in ISK) is on average: _____

If you live in a single household - Please continue with E34

E33. Before taxes and other deductions, what on average is the total monthly income of your household?

Please write in.

The total monthly income (in ISK) of my household is on average: _____

E34. What is your current legal marital status?

If you have never been married but are in informal cohabitation, please answer “I have never been married.”

Please tick one box only.

☐

Married

☐

Civil partnership

☐

Separated from my spouse/civil partner (but still legally married/still legally in a civil partnership)

☐

Divorced from spouse/legally separated from my civil partner

☐

Widowed/my civil partner died

☐

I have never been married/never been in a civil partnership

E35. In which country was your father born?

Please write in or tick the box.

- ☐ 1 Iceland
- ☐ 2 Other country, which? _____

E36. In which country was your mother born?

Please write in or tick the box.

- ☐ 1 Iceland
- ☐ 2 Other country, which? _____

E37. Would you describe the place where you live as...

Please tick one box only.

- ☐ 1 A big city
- ☐ 2 The suburbs or outskirts of a big city
- ☐ 3 A small city or town
- ☐ 4 A country village
- ☐ 5 A farm or home in the country

Finally we would like to invite you to participate in Félagsvísindastofnun's online panel, where people are invited to respond to surveys online on a regular basis. Most surveys are in Icelandic and the respondents have a good chance of winning gift certificates. We will ensure that the number of surveys sent to each individual will be kept to a minimum. You can unregister from the panel at any time.

F1. Are you interested in participating in the online panel?

- ☐ 1 Yes
- ☐ 2 No

F2. If you are interested in participating in the online panel, please write your e-mail adress below.

F3. Do you have any comments regarding the survey as a whole or individual questions?

Iceland
ISSP 2015 – Work Orientations IV
Questionnaire
(English Web version)

The survey is completed. If you have answered all the questions you wish to answer, we kindly ask you to put the questionnaire in the accompanying envelope. The post fee has been paid, so you can place the envelope in the nearest postbox or deliver it to the post office.

Thank you for participating in the International Social Survey Programme.



HÁSKÓLI ÍSLANDS
FÉLAGSVÍSINDASTOFNUN

ISSP 2015 Work Orientation

ISSP_Intro

ISSP International Social Survey Programme

Work Orientation

If you want to pause the survey and return to it later, you can always close it and click the survey link again when you want to resume the survey. Your answers are automatically saved.

Click "Next" to begin the survey.

Choose "Icelandic" in the drop down menu in the top right corner to answer the survey in Icelandic.

Thank you for your participation.

Guðbjörg Andrea Jónsdóttir

Director of Social Science Research Institute

Q1 Please tick one box for each statement below to show how much you agree or disagree with it, thinking of work in general.

[illegible]

Q2 For each of the following, please tick one box to show how important you personally think it is in a job. How important is...

[illegible]

Q3 Have you ever given up or would you give up good job opportunities for the benefit of your family life?

- ☐ Yes, I have done so and probably would do so again (1)
- ☐ Yes, I have done so but probably would not do so again (2)
- ☐ No, I have not done so but probably would do so (3)
- ☐ No, I have not done so and probably would not do so (4)
- ☐ Can't choose (8)

Q4 Have you ever remained or would you remain in a job that was not satisfying for you for the benefit of your family life?

- ☐ Yes, I have done so and probably would do so again (1)
- ☐ Yes, I have done so but probably would not do so again (2)
- ☐ No, I have not done so but probably would do so (3)
- ☐ No, I have not done so and probably would not do so (4)
- ☐ Can't choose (8)

Q5 Over the past five years, have you been discriminated against with regard to work, for instance when applying for a job, or when being considered for a pay increase or promotion?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Did not work or did not seek work (0)
- ☐ Do not want to answer (7)

Display This Question:

If Over the past five years, have you been discriminated against with regard to work, for instance when applying for a job, or when being considered for a pay increase or promotion? PLEASE... Yes Is Selected

Q6 In your opinion, what was the main reason for the discrimination?

- ☐ My age (1)
- ☐ My race, ethnicity (2)
- ☐ My nationality (3)
- ☐ My sex (4)
- ☐ My religion (5)
- ☐ My disability/ mental or physical illness (6)
- ☐ My family responsibilities (7)
- ☐ My political beliefs (8)
- ☐ Other reason (9)
- ☐ Can't choose (98)

Q7 Over the past five years, have you been harassed by your superiors or co-workers at your job, for example, have you experienced any bullying, physical or psychological abuse?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Does not apply (I do not have a job/ superior/ co-worker) (0)
- ☐ Do not want to answer (7)

Q8 To what extent do you agree or disagree with the following statements?

	Strongly agree (1)	Agree (2)	Neither agree nor disagree (3)	Disagree (4)	Strongly disagree (5)	Can't choose (8)
Workers need strong trade unions to protect their interests. (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strong trade unions are bad for Iceland's economy. (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q9 Suppose you could decide on your work situation at present. Which of the following would you prefer?

- ☐ A full-time job [35 hours or more per week] (1)
- ☐ A part-time job [10-34 hours per week] (2)
- ☐ A job with less than [10] hours a week (3)
- ☐ No paid job at all (4)
- ☐ Can't choose (8)

Q10 Are you currently working for pay? If you are currently on leave BUT are in an employment relationship, please answer "Yes."

- ☐ Yes (1)
- ☐ No (2)
- ☐ Do not want to answer (7)

Q11 Think of the number of hours you work, and the money you earn in your main job, including any regular overtime. If you had only one of these three choices, which of the following would you prefer?

- ☐ Work longer hours and earn more money (1)
- ☐ Work the same number of hours and earn the same money (2)
- ☐ Work fewer hours and earn less money (3)
- ☐ Can't choose (8)

Q12 For each of these statements about your (main) job, please tick one box to show how much you agree or disagree that it applies to your job.

[illegible]

Q13 Now some more questions about your working conditions. Please tick one box for each item below to show how often it applies to your work. How often...

[illegible]

Q14 And how often...

	Always (1)	Often (2)	Sometimes (3)	Hardly ever (4)	Never (5)	Can't choose (8)
... do you work at home during your usual working hours? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
... does your job involve working on weekends? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q15 Which of the following statements best describes how your working hours are decided? (By working hours we mean here the times you start and finish work, and not the total hours you work per week or month.)

- ☐ Starting and finishing times are decided by my employer and I cannot change them on my own (1)
- ☐ I can decide the time I start and finish work, within certain limits (2)
- ☐ I am entirely free to decide when I start and finish work (3)
- ☐ Do not want to answer (7)

Q16 Which of the following statements best describes your usual working schedule in your main job?

- ☐ I have a regular schedule or shift (daytime, evening, or night) (1)
- ☐ I have a schedule or shift which regularly changes (for example, from days to evenings or to nights) (2)
- ☐ I have a schedule where daily working times are decided at short notice by my employer (3)
- ☐ Can't choose (8)

Q17 Which of the following statements best describes how your daily work is organized?

- ☐ I am free to decide how my daily work is organized (1)
- ☐ I can decide how my daily work is organized, within certain limits (2)
- ☐ I am not free to decide how my daily work is organized (3)
- ☐ Can't choose (8)

Q18 How difficult would it be for you to take an hour or two off during working hours, to take care of personal or family matters?

- ☐ Not difficult at all (1)
- ☐ Not too difficult (2)
- ☐ Somewhat difficult (3)
- ☐ Very difficult (4)
- ☐ Can't choose (8)

Q19 How often do you feel that...

	Always (1)	Often (2)	Sometimes (3)	Hardly ever (4)	Never (5)	Can't choose (8)
...the demands of your job interfere with your family life? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
...the demands of your family life interfere with your job? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q20 How much of your past work experience and/ or job skills can you make use of in your present job?

- ☐ Almost none (1)
- ☐ A little (2)
- ☐ A lot (3)
- ☐ Almost all (4)
- ☐ Can't choose (8)

Q21 Over the past 12 months, have you had any training to improve your job skills, either at the workplace or somewhere else?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Can't choose (8)

Q22 In general, how would you describe relations at your workplace...

[illegible]

Q23 How satisfied are you in your (main) job?

- ☐ Completely satisfied (1)
- ☐ Very satisfied (2)
- ☐ Fairly satisfied (3)
- ☐ Neither satisfied nor dissatisfied (4)
- ☐ Fairly dissatisfied (5)
- ☐ Very dissatisfied (6)
- ☐ Completely dissatisfied (7)
- ☐ Can't choose (8)

Q24 To what extent do you agree or disagree with each of the following statements?

[illegible]

Q25 Now think of the type of work you do, irrespective of the firm or organization you work for. To what extent do you agree or disagree with each of the following statements?

	Strongly agree (1)	Agree (2)	Neither agree nor disagree (3)	Disagree (4)	Strongly disagree (5)	Can't choose (8)
Given the chance, I would change my present type of work for something different. (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am proud of the type of work I do. (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q26 How difficult or easy do you think it would be for you to find a job at least as good as your current one?

- ☐ Very easy (1)
- ☐ Fairly easy (2)
- ☐ Neither easy nor difficult (3)
- ☐ Fairly difficult (4)
- ☐ Very difficult (5)
- ☐ Can't choose (8)

Q27 All in all, how likely is it that you will try to find a job with another firm or organization within the next 12 months?

- ☐ Very likely (1)
- ☐ Likely (2)
- ☐ Unlikely (3)
- ☐ Very unlikely (4)
- ☐ Can't choose (8)

Q28 To what extent, if at all, do you worry about the possibility of losing your job?

- ☐ I worry a great deal (1)
- ☐ I worry to some extent (2)
- ☐ I worry a little (3)
- ☐ I don't worry at all (4)
- ☐ Do not want to answer (7)

Q29 To what extent do you agree or disagree with the following statements? In order to avoid unemployment I would be willing...

	Strongly agree (1)	Agree (2)	Neither agree nor disagree (3)	Disagree (4)	Strongly disagree (5)	Can't choose (8)
to accept a job that requires new skills. (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to accept a position with lower pay. (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to accept temporary employment. (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to travel longer to get to work. (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to move within Iceland. (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to move to a different country. (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q30 Over the past 12 months, in addition to your main job, have you done any other work for pay?

- ☐ Yes, during all of that period (1)
- ☐ Yes, during most of that period (2)
- ☐ Yes, during some of that period (3)
- ☐ No (4)
- ☐ Do not want to answer (7)

If No Is Selected, Then Skip To End of Block If Do not want to answer Is Selected, Then Skip To End of Block

Q31 Over the entire 12 months, how much did you earn from your additional job(s) in total compared with your main job? From my additional job(s), I earned ...

- ☐ much less than from main job (1)
- ☐ less than from main job (2)
- ☐ about the same as from main job (3)
- ☐ more than from main job (4)
- ☐ much more than from main job (5)
- ☐ Can't choose (8)

Q32 Have you ever had a paid job for one year or more?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Do not want to answer (7)

Display This Question:

If Have you ever had a paid job for one year or more? PLEASE TICK ONE BOX ONLY
Yes Is Selected

Q33a When did your last paid job end? If you do not wish to answer, please select "do not want to answer" in the dropdown list.

- ☐ 2016 (2016)
- ☐ 2015 (2015)
- ☐ 2014 (2014)
- ☐ 2013 (2013)
- ☐ 2012 (2012)
- ☐ 2011 (2011)
- ☐ 2010 (2010)
- ☐ 2009 (2009)
- ☐ 2008 (2008)
- ☐ 2007 (2007)
- ☐ 2006 (2006)
- ☐ 2005 (2005)
- ☐ 2004 (2004)
- ☐ 2003 (2003)
- ☐ 2002 (2002)
- ☐ 2001 (2001)
- ☐ 2000 (2000)
- ☐ 1999 (1999)
- ☐ 1998 (1998)
- ☐ 1997 (1997)
- ☐ 1996 (1996)
- ☐ 1995 (1995)
- ☐ 1994 (1994)
- ☐ 1993 (1993)
- ☐ 1992 (1992)
- ☐ 1991 (1991)
- ☐ 1990 (1990)
- ☐ 1989 (1989)
- ☐ 1988 (1988)
- ☐ 1987 (1987)
- ☐ 1986 (1986)
- ☐ 1985 (1985)
- ☐ 1984 (1984)
- ☐ 1983 (1983)
- ☐ 1982 (1982)
- ☐ 1981 (1981)
- ☐ 1980 (1980)
- ☐ 1979 (1979)
- ☐ 1978 (1978)
- ☐ 1977 (1977)
- ☐ 1976 (1976)
- ☐ 1975 (1975)
- ☐ 1974 (1974)

- ☐ 1973 (1973)
- ☐ 1972 (1972)
- ☐ 1971 (1971)
- ☐ 1970 (1970)
- ☐ 1969 (1969)
- ☐ 1968 (1968)
- ☐ 1967 (1967)
- ☐ 1966 (1966)
- ☐ 1965 or earlier (1965)
- ☐ Do not want to answer (7)

Display This Question:

If Have you ever had a paid job for one year or more? Please tick one box only. Yes Is Selected

Q33b Please also specify the month.If you do not wish to answer, please select "do not want to answer" in the dropdown list.

- ☐ January (1)
- ☐ February (2)
- ☐ March (3)
- ☐ April (4)
- ☐ May (5)
- ☐ June (6)
- ☐ July (7)
- ☐ August (8)
- ☐ September (9)
- ☐ October (10)
- ☐ November (11)
- ☐ December (12)
- ☐ Do not want to answer (97)

Display This Question:

If Have you ever had a paid job for one year or more? PLEASE TICK ONE BOX ONLY
Yes Is Selected

Q34 How satisfied were you in your last job?

- ☐ Completely satisfied (1)
- ☐ Very satisfied (2)
- ☐ Fairly satisfied (3)
- ☐ Neither satisfied nor dissatisfied (4)
- ☐ Fairly dissatisfied (5)
- ☐ Very dissatisfied (6)
- ☐ Completely dissatisfied (7)
- ☐ Can't choose (8)

Display This Question:

If Have you ever had a paid job for one year or more? PLEASE TICK ONE BOX ONLY
Yes Is Selected

Q35 What was the main reason that your job ended?

- ☐ I reached retirement age (1)
- ☐ I retired early, by choice (2)
- ☐ I retired early, not by choice (3)
- ☐ I became (permanently) disabled (4)
- ☐ My place of work shut down (5)
- ☐ I was dismissed (6)
- ☐ My term of employment/contract ended (7)
- ☐ Family responsibilities (8)
- ☐ I got married (9)
- ☐ Do not want to answer (97)

Q36 Would you like to have a paid job, either now or in the future?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Do not want to answer (7)

Q37 How likely do you think it is that you would find a job?

- ☐ Very likely (1)
- ☐ Likely (2)
- ☐ Unlikely (3)
- ☐ Very unlikely (4)
- ☐ Can't choose (8)

Q38 To what extent, if at all, do you worry about the possibility of not finding a job?

- ☐ I worry a great deal (1)
- ☐ I worry to some extent (2)
- ☐ I worry a little (3)
- ☐ I don't worry at all (4)
- ☐ Do not want to answer (7)

Q39 To what extent do you agree or disagree with the following statements? In order to get a job I would be willing ...

	Str on gly agr ee (1)	Agree (2)	Neither agree nor disagree (3)	Disagree (4)	Strongly disagree (5)	Can't choose (8)
to accept a job that requires new skills. (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to accept a position with low pay. (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to accept temporary employment. (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to travel a long time to get to work. (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to move within Iceland. (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
to move to a different country. (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q40 Thinking about the past 12 months, have you done any of the following in order to find a job?

	No (1)	Yes, once or twice (2)	Yes, more than twice (3)	Do not want to answer (7)
Registered at a public employment agency? (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Registered at a private employment agency? (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Answered advertisements for jobs? (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Advertised yourself for a job, for example on the internet or in newspapers? (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Applied directly to employers? (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Asked relatives, friends, or colleagues to help you find a job? (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q41 Over the past 12 months, have you had any training to improve your job skills?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Can't choose (8)

Q42 Are you currently looking for a job?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Do not want to answer (7)

Q43 What is your main source of economic support?

- ☐ Current spouse/ partner (1)
- ☐ Other family members (2)
- ☐ Pension (private/ state) (3)
- ☐ Unemployment benefits (4)
- ☐ Social assistance/ welfare (5)
- ☐ Occasional work (6)
- ☐ Student loans/ stipends (7)
- ☐ Savings (8)
- ☐ Investments or rental income (9)
- ☐ Other (10)
- ☐ Do not want to answer (97)

Q44 To what extent, if at all, do you worry about the possibility of losing this main economic support?

- ☐ I worry a great deal (1)
- ☐ I worry to some extent (2)
- ☐ I worry a little (3)
- ☐ I don't worry at all (4)
- ☐ Do not want to answer (7)

Display This Question:

If Are you currently working for pay? PLEASE TICK ONE BOX ONLY Yes Is Not Selected

O1 Over the past five years, have you ever worked for pay?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Do not want to answer (7)

Display This Question:

If Over the past five years, have you ever worked for pay? Please tick one box only. Yes Is Selected

Or Are you currently working for pay? If you are currently on leave BUT are in an employment relatio... Yes Is Selected

O2 Over the past five years, did you experience any of the following changes in your working life?

	No (1)	Yes, once (2)	Yes, twice (3)	Yes, three times (4)	Yes, more than three times (5)	Can't choose (8)
I was unemployed for a period longer than three months. (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I changed my employer. (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I changed my occupation. (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I started my own business/ became self-employed. (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I took up an additional job. (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

O3 How would you generally rate your current financial situation?My current financial situation is...

- ☐ Very good (1)
- ☐ Good (2)
- ☐ Neither good nor bad (3)
- ☐ Bad (4)
- ☐ Very bad (5)
- ☐ Can't choose (8)

O4 Compared to five years ago, how do you think your financial situation has changed?My current financial situation is...

- ☐ much better than five years ago (1)
- ☐ somewhat better than five years ago (2)
- ☐ the same as five years ago (3)
- ☐ somewhat worse than five years ago (4)
- ☐ much worse than five years ago (5)
- ☐ Can't choose (8)

O5 And what will your financial situation likely be in five years? My financial situation in five years will likely be...

- ☐ much better than today (1)
- ☐ somewhat better than today (2)
- ☐ the same as today (3)
- ☐ somewhat worse than today (4)
- ☐ much worse than today (5)
- ☐ Can't choose (8)

O6 To what extent do you agree or disagree with the following statements?

	Strongly agree (1)	Agree (2)	Neither agree nor disagree (3)	Disagree (4)	Strongly disagree (5)	Can't choose (8)
It is good for Iceland's economy that people aged 60 and over are employed. (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When people aged 60 and over are employed, they take jobs away from younger people. (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

O7 In general, would you say your health is...

- ☐ excellent (1)
- ☐ very good (2)
- ☐ good (3)
- ☐ fair (4)
- ☐ poor (5)
- ☐ Can't choose (8)

VE1 How often have you had injuries which needed the attention of a medical doctor or a nurse in the past 12 months?

- ☐ I have not been injured in the past 12 months (0)
- ☐ Once (1)
- ☐ Twice (2)
- ☐ Three times (3)
- ☐ Four times or more often (4)
- ☐ Do not want to answer (7)

If I have not been injured in ... Is Selected, Then Skip To How many days, if any, have you been ...
If Do not want to answer Is Selected, Then Skip To How many days, if any, have you been ...

VE2 If you have been injured more than once in the last 12 months, only consider the most serious injury when answering the next two questions (the injury that took the longest to recover from). What was the cause of the injury?

- ☐ An injury from a traffic accident (1)
- ☐ An injury from the home or in leisure activities (2)
- ☐ A work related injury (3)
- ☐ A sports related injury (4)
- ☐ An injury caused by violence, e.g. by a fight (5)
- ☐ An injury from a different cause, which? (6) _____
- ☐ Do not want to answer (7)

VE3 Were you absent from work or school for an entire day or a longer period because of this injury?

- ☐ No, I was not absent from work or school for a day (0)
- ☐ Yes, I was absent from work or school for 1-6 days (1)
- ☐ Yes, I was absent from work or school for 1-3 weeks (2)
- ☐ Yes, I was absent from work or school for 1-2 months (3)
- ☐ Yes, I was absent from work or school for 3-6 months (4)
- ☐ Yes, I was absent from work or school for 7-12 months (5)
- ☐ Do not want to answer (7)

VE4 How many days, if any, have you been absent from work or school due to you personally being sick in the past 6 months?

- ☐ Have not been absent from work or school do to own illness in the last 6 months (0)
- ☐ Ca. 1-5 days (1)
- ☐ Ca. 6-10 days (2)
- ☐ Ca. 11-20 days (3)
- ☐ Ca. 21-30 days (4)
- ☐ Ca. 1-2 months (5)
- ☐ Ca. 3-4 months (6)
- ☐ Ca. 5 months or more (7)
- ☐ Have not worked in the past 6 months due to own illness (8)
- ☐ Have not worked in the past 6 months for other reasons (9)
- ☐ Do not want to answer (97)

VE5 Have you ever become sick due to factors within your work/work environment?

- ☐ No (0)
- ☐ Yes, but I have recovered and continue doing the same work (1)
- ☐ Yes, but I have recovered and changed workplaces (2)
- ☐ Yes, but I have not recovered and continue doing the same work (3)
- ☐ Yes, but I have not recovered even though I have changed workplaces (4)
- ☐ Yes, I have recovered but I have retired because of the illness (5)
- ☐ Yes, I have recovered but have retired for another reason (6)
- ☐ Yes, I did not recover and have retired (7)
- ☐ Do not want to answer (97)

VE6 Does your health affect your work...

- ☐ Very rarely or never (1)
- ☐ Rarely (2)
- ☐ Sometimes (3)
- ☐ Often (4)
- ☐ Very often or always (5)
- ☐ Do not want to answer (7)

VE7 Have you experienced any of the following in relations to your work? Please tick all that applies

- ☐ Bullying (1)
- ☐ Sexual harassment (2)
- ☐ Physical violence (3)
- ☐ Threats (4)
- ☐ No, never (5)
- ☐ Do not want to answer (7)

If No, never Is Selected, Then Skip To End of Block If Do not want to answer Is Selected, Then Skip To End of Block

VE8 Who was the offender/who were the offenders? Please tick all that applies.

- ☐ A customer/client (1)
- ☐ A co-worker (2)
- ☐ A supervisor (3)
- ☐ Someone else, who? (4) _____
- ☐ Do not want to answer (7)

VIRK1 Have you heard about the services that VIRK – Vocational rehabilitation fund (VIRK-Starfsendur-hæfingarsjóður) offers?

- ☐ No, I have not heard about it (0)
- ☐ Yes, I have but I have not used their services (1)
- ☐ Yes, I have received vocational rehabilitation at VIRK and was able to return to/start work/studies/job search, full time or part time, after their services (2)
- ☐ Yes, I have received vocational rehabilitation at VIRK but I was unable to return to/start work/studies/job search after their services (3)
- ☐ Do not want to answer (7)

If No, I have not heard about it Is Selected, Then Skip To In the last 12 months have you attend... If Do not want to answer Is Selected, Then Skip To In the last 12 months have you attend...

VIRK2 Where did you first learn about VIRK?

- ☐ On VIRK's website (1)
- ☐ In a pamphlet about VIRK (2)
- ☐ At the doctor's office (3)
- ☐ From other health care workers (4)
- ☐ From my union (5)
- ☐ From my pension fund (6)
- ☐ From my employer (7)
- ☐ From family/friends (8)
- ☐ Other, where from? (9) _____
- ☐ Do not want to answer (97)

VIRK3 Would you recommend VIRK's services to others in need of vocational rehabilitation?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Don't know (9)
- ☐ Do not want to answer (7)

Display This Question:

If Are you currently working for pay? If you are currently on leave BUT are in an employment relatio... Yes Is Selected

VIRK4 In the last 12 months have you attended work despite the fact that you felt you could not carry out your work as well as you are used to because of your poor health?

- ☐ No, never (0)
- ☐ Yes, once in the last 12 months (1)
- ☐ Yes, 2-5 times in the last 12 months (2)
- ☐ Yes, 6 times or more often in the last 12 months (3)
- ☐ Not applicable/not working (4)
- ☐ Do not want to answer (7)

Display This Question:

If In the last 12 months have you attended work despite the fact that you felt you could not carry o... Yes, once in the last 12 months Is Selected

Or In the last 12 months have you attended work despite the fact that you felt you could not carry o... Yes, 2-5 times in the last 12 months Is Selected

Or In the last 12 months have you attended work despite the fact that you felt you could not carry o... Yes, 6 times or more often in the last 12 months Is Selected

VIRK5 What was the reason for your sickness the last time you went to work sick?

- ☐ Musculoskeletal problems (e.g. back or neck pain) (1)
- ☐ Stress (2)
- ☐ Colds or flu (3)
- ☐ Mental health issues (e.g. depression or anxiety) (4)
- ☐ Other, what? (5) _____
- ☐ Do not want to answer (7)

BV_intro The next questions deal with your bakground.

SEX Are you ...

- ☐ Male (1)
- ☐ Female (2)
- ☐ Do not want to answer (7)

BIRTH When were you born?

- ☐ 1998 (1998)
- ☐ 1997 (1997)
- ☐ 1996 (1996)
- ☐ 1995 (1995)
- ☐ 1994 (1994)
- ☐ 1993 (1993)
- ☐ 1992 (1992)
- ☐ 1991 (1991)
- ☐ 1990 (1990)
- ☐ 1989 (1989)
- ☐ 1988 (1988)
- ☐ 1987 (1987)
- ☐ 1986 (1986)
- ☐ 1985 (1985)
- ☐ 1984 (1984)
- ☐ 1983 (1983)
- ☐ 1982 (1982)
- ☐ 1981 (1981)
- ☐ 1980 (1980)
- ☐ 1979 (1979)
- ☐ 1978 (1978)
- ☐ 1977 (1977)
- ☐ 1976 (1976)
- ☐ 1975 (1975)
- ☐ 1974 (1974)
- ☐ 1973 (1973)
- ☐ 1972 (1972)
- ☐ 1971 (1971)
- ☐ 1970 (1970)
- ☐ 1969 (1969)
- ☐ 1968 (1968)
- ☐ 1967 (1967)
- ☐ 1966 (1966)
- ☐ 1965 (1965)
- ☐ 1964 (1964)
- ☐ 1963 (1963)
- ☐ 1962 (1962)
- ☐ 1961 (1961)
- ☐ 1960 (1960)
- ☐ 1959 (1959)
- ☐ 1958 (1958)
- ☐ 1957 (1957)
- ☐ 1956 (1956)
- ☐ 1955 (1955)
- ☐ 1954 (1954)
- ☐ 1953 (1953)
- ☐ 1952 (1952)

- ☐ 1951 (1951)
- ☐ 1950 (1950)
- ☐ 1949 (1949)
- ☐ 1948 (1948)
- ☐ 1947 (1947)
- ☐ 1946 (1946)
- ☐ 1945 (1945)
- ☐ 1944 (1944)
- ☐ 1943 (1943)
- ☐ 1942 (1942)
- ☐ 1941 (1941)
- ☐ 1940 (1940)
- ☐ 1939 (1939)
- ☐ 1938 (1938)
- ☐ 1937 (1937)
- ☐ 1936 (1936)
- ☐ 1935 (1935)
- ☐ 1934 (1934)
- ☐ 1933 (1933)
- ☐ 1932 (1932)
- ☐ 1931 (1931)
- ☐ 1930 (1930)
- ☐ 1929 (1929)
- ☐ 1928 (1928)
- ☐ 1927 (1927)
- ☐ 1926 (1926)
- ☐ 1925 (1925)
- ☐ 1924 (1924)
- ☐ 1923 (1923)
- ☐ 1922 (1922)
- ☐ 1921 (1921)
- ☐ 1920 (1920)
- ☐ 1919 (1919)
- ☐ 1918 (1918)
- ☐ 1917 (1917)
- ☐ 1916 (1916)
- ☐ 1915 (1915)
- ☐ 1914 (1914)
- ☐ 1913 (1913)
- ☐ 1912 (1912)
- ☐ 1911 (1911)
- ☐ 1910 (1910)
- ☐ 1909 (1909)
- ☐ 1908 (1908)
- ☐ 1907 (1907)
- ☐ 1906 (1906)
- ☐ 1905 (1905)
- ☐ 1904 (1904)

- ☐ 1903 (1903)
- ☐ 1902 (1902)
- ☐ 1901 (1901)
- ☐ 1900 (1900)
- ☐ Do not want to answer (9997)

EDUCYRS How many years (full-time equivalent) have you been in formal education? Include all primary and secondary schooling, university and other post-secondary education, and full-time vocational training, but do not include repeated years. If you are currently in education, count the number of years you have completed so far. Please enter number of years or tick a box as applicable.

- ☐ (1) _____
- ☐ I have no formal schooling (0)
- ☐ Don't know (99)
- ☐ Do not want to answer (97)

nat_DEGR What is the highest level of education that you have attained?

- ☐ Primary school not finished (1)
- ☐ Primary school (until around 12 years old) (2)
- ☐ Primary school (until around 14 years old) (3)
- ☐ Compulsory school, secondary school exams, the nationally co-ordinated junior college entrance examination (4)
- ☐ Short vocational training on secondary school level (e.g. home economics, marine captain study programme, foundation courses in trade, shorter music studies) (5)
- ☐ Secondary education (gymnasium), exam from the university bridging course exam from the preliminary studies department (6)
- ☐ Apprenticeship - upper secondary (vocational training) (7)
- ☐ Longer vocational training on secondary school level (e.g. nursing assistant certificate programme, masseuse training, trade exam) (8)
- ☐ Vocational training on completion of secondary school level (e.g. Grade 4 marine captain or engineer, medical secretary) (9)
- ☐ Master craftsman - licence to supervise apprentices (10)
- ☐ Short, practical training at university level, diploma (11)
- ☐ Short vocational training at university level, basic diploma, 2-3 years (e.g. system analysis, business management, music and instrument teachers, music studies at a university level, art studies at a university level) (12)
- ☐ Undergraduate degree BA/BS/B.Ed. or additional diploma (13)
- ☐ Studies at university longer than 4 years, at an undergraduate level, such as medicine, law, pharmacology, theology, odontology (14)
- ☐ Master's degree MA/MS (15)
- ☐ Doctoral degree PhD (16)
- ☐ Other, what? (17) _____
- ☐ Do not want to answer (97)

WS_text THE NEXT QUESTIONS DEAL WITH YOUR WORK SITUATION. BY WORK WE MEAN DOING INCOME-PRODUCING WORK, AS AN EMPLOYEE, SELF-EMPLOYED OR WORKING FOR YOUR OWN FAMILY'S BUSINESS, FOR AT LEAST ONE HOUR PER WEEK. IF YOU TEMPORARILY ARE NOT WORKING FOR PAY BECAUSE OF TEMPORARY ILLNESS/PARENTAL LEAVE/VACATION/STRIKE, ETC., PLEASE REFER TO YOUR NORMAL WORK SITUATION.

WORK Are you currently working for pay, did you work for pay in the past, or have you never been in paid work?

- ☐ I am currently in paid work (1)
- ☐ I am currently not in paid work but I had paid work in the past (2)
- ☐ I have never had paid work (3)
- ☐ Do not want to answer (7)

If I am currently not in paid ... Is Selected, Then Skip To THE NEXT QUESTIONS DEAL WITH SOME MOR... If I have never had paid work Is Selected, Then Skip To Which of the following best describes... If Do not want to answer Is Selected, Then Skip To Which of the following best describes...

WRKHRS How many hours, on average, do you usually work for pay in a normal week, including overtime? If you work for more than one employer, or if you are both employed and self-employed, please count the total number of working hours that you do. On average, I work

WS_det_text THE NEXT QUESTIONS DEAL WITH SOME MORE DETAILS ON YOUR WORK SITUATION. IF YOU WORK FOR MORE THAN ONE EMPLOYER, OR IF YOU ARE BOTH EMPLOYED AND SELF-EMPLOYED, PLEASE REFER TO YOUR MAIN JOB. IF YOU ARE RETIRED OR NOT CURRENTLY WORKING, PLEASE REFER TO YOUR LAST MAIN JOB.

EMPREL Are/were you an employee, self-employed, or working for your own family's business?

- ☐ An employee (1)
- ☐ Self-employed without employees (2)
- ☐ Self-employed with employees (3)
- ☐ Working for your own family's business (4)
- ☐ Do not want to answer (7)

Display This Question:

If Are/were you an employee, self-employed, or working for your own family's business? Please tick one box only. Self-employed with employees Is Selected

NEMPLOY How many employees do/did you have, not counting yourself? Please write in.

WRKSUP Do/did you supervise other employees?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Do not want to answer (7)

Display This Question:

If Do/did you supervise other employees? Please tick one box only. Yes Is Selected
NSUP How many other employees do/did you supervise? Please write in.

TYPORG1 Do/did you work for a for-profit organisation or for a non-profit organisation?

- ☐ I work/ed for a for-profit organisation (1)
- ☐ I work/ed for a non-profit organisation (2)
- ☐ Do not want to answer (7)

TYPORG2 Do/did you work for a public or a private employer?

- ☐ Public employer (1)
- ☐ Private employer (2)
- ☐ Do not want to answer (7)

ISCO08a What is/was your occupation – i.e., what is/was the name or title of your main job?
Please write in and describe as clearly as possible. My occupation is/was:

- ☐ (1) _____
- ☐ Do not want to answer (7)

ISCO08b In your main job, what kind of activities do/did you do most of the time? Please write in and describe as clearly as possible.

- ☐ (1) _____
- ☐ Do not want to answer (7)

ISCO08c What does/did the firm/organisation you work/worked for mainly make or do – i.e., what kind of production/function is/was performed at your workplace? Please write in and describe as clearly as possible.

- ☐ (1) _____
- ☐ Do not want to answer (7)

MAINSTAT Which of the following best describes your current situation? If you temporarily are not working because of temporary illness/parental leave/vacation/strike etc., please refer to your normal work situation.

- ☐ In paid work (as an employee, self-employed, or working for your own family's business) (1)
- ☐ Unemployed and looking for a job (2)
- ☐ In education (not paid for by employer), in school/student/pupil even if on vacation (3)
- ☐ Apprentice or trainee (4)
- ☐ Permanently sick or disabled (5)
- ☐ Retired (6)
- ☐ Doing housework, looking after the home, children or other persons (7)
- ☐ Other (9)
- ☐ Do not want to answer (97)

PARTLIV Do you have a spouse or a steady partner and, if yes, do you share the same household?

- ☐ Yes, I have a spouse/partner and we share the same household (1)
- ☐ Yes, I have a spouse/partner but we don't share the same household (2)
- ☐ No, I don't have a spouse/partner (3)
- ☐ Do not want to answer (7)

If No, I don't have a spouse/p... Is Selected, Then Skip To Are you or have you ever been a membe...If Do not want to answer Is Selected, Then Skip To Are you or have you ever been a membe...

SPWtext THE NEXT QUESTIONS DEAL WITH THE WORK SITUATION OF YOUR SPOUSE/PARTNER. BY WORK WE MEAN DOING INCOME-PRODUCING WORK, AS AN EMPLOYEE, SELF-EMPLOYED OR WORKING FOR HIS/HER OWN FAMILY'S BUSINESS, FOR AT LEAST ONE HOUR PER WEEK. IF HE/SHE TEMPORARILY IS NOT WORKING FOR PAY BECAUSE OF TEMPORARY ILLNESS/PARENTAL LEAVE/VACATION/STRIKE, ETC., PLEASE REFER TO HIS/HER NORMAL WORK SITUATION.

SPWORK Is your spouse/partner currently working for pay, did he/she work for pay in the past, or has he/she never been in paid work?

- ☐ He/she is currently in paid work (1)
- ☐ He/she is currently not in paid work but he/she had paid work in the past (2)
- ☐ He/she has never had paid work (3)
- ☐ Do not want to answer (7)

If He/she is currently not in ... Is Selected, Then Skip To THE NEXT QUESTIONS DEAL WITH SOME MOR...If He/she has never had paid work Is Selected, Then Skip To Which of the following best describes...If Do not want to answer Is Selected, Then Skip To Which of the following best describes...

SPWRKHRS How many hours, on average, does your spouse/partner usually work for pay in a normal week, including overtime? If he/she works for more than one employer, or if he/she is both employed and self-employed, please count the total number of working hours that he/she does. Please write in. On average, he/she works

SPDtext THE NEXT QUESTIONS DEAL WITH SOME MORE DETAILS ON YOUR SPOUSE'S/PARTNER'S WORK SITUATION. IF HE/SHE WORKS FOR MORE THAN ONE EMPLOYER, OR IF HE/SHE IS BOTH EMPLOYED AND SELF-EMPLOYED, PLEASE REFER TO HIS/HER MAIN JOB. IF HE/SHE IS RETIRED OR NOT CURRENTLY WORKING, PLEASE REFER TO HIS/HER LAST MAIN JOB.

SPEMPREL Is/was your spouse/partner an employee, self-employed, or working for his/her own family's business?

- ☐ An employee (1)
- ☐ Self-employed without employees (2)
- ☐ Self-employed with employees (3)
- ☐ Working for his/her own family's business (4)
- ☐ Do not want to answer (7)

SPWRKSUP Does/did your spouse/partner supervise other employees?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Don't know (9)
- ☐ Do not want to answer (7)

SPISCO08a What is/was your spouse's/partner's occupation – i.e., what is/was the name or title of his/her main job? Please write in and describe as clearly as possible. His/her occupation is/was:

- ☐ (1) _____
- ☐ Do not want to answer (7)

SPISCO08b In his/her main job, what kind of activities does/did he/she do most of the time? Please write in and describe as clearly as possible.

- ☐ (1) _____
- ☐ Do not want to answer (7)

SPISCO08c What does/did the firm/organisation he/she work/worked for mainly make or do – i.e., what kind of production/function is/was performed at his/her workplace? Please write in and describe as clearly as possible.

- ☐ (1) _____
- ☐ Do not want to answer (7)

SPMAINST Which of the following best describes your spouse's/partner's current situation?
If he/she temporarily is not working because of temporary illness/parental leave/vacation/strike etc., please refer to his/her normal work situation.

- ☐ In paid work (as an employee, self-employed, or working for your own family's business) (1)
- ☐ Unemployed and looking for a job (2)
- ☐ In education (not paid for by employer), in school/student/pupil even if on vacation (3)
- ☐ Apprentice or trainee (4)
- ☐ Permanently sick or disabled (5)
- ☐ Retired (6)
- ☐ Doing housework, looking after the home, children or other persons (7)
- ☐ Other (9)
- ☐ Do not want to answer (97)

UNION Are you or have you ever been a member of a trade union or similar organisation? If yes: is that currently or only previously?

- ☐ Yes, currently (1)
- ☐ Yes, previously but not currently (2)
- ☐ No, never (3)
- ☐ Do not want to answer (7)

nat_RELIG Do you belong to a religion and, if yes, which religion do you belong to?

- ☐ No religion (0)
- ☐ Icelandic National Church (11)
- ☐ Catholic (1)
- ☐ Protestant (2)
- ☐ Orthodox (3)
- ☐ Other Christian (4)
- ☐ Jewish (5)
- ☐ Islamic (6)
- ☐ Buddhist (7)
- ☐ Hindu (8)
- ☐ Other Asian religions (9)
- ☐ Paganism (belief in the old nordic gods) (12)
- ☐ Other religions (10)
- ☐ Do not want to answer (97)

ATTEND Apart from such special occasions as weddings, funerals, etc., how often do you attend religious services?

- ☐ Several times a week or more often (1)
- ☐ Once a week (2)
- ☐ 2 or 3 times a month (3)
- ☐ Once a month (4)
- ☐ Several times a year (5)
- ☐ Once a year (6)
- ☐ Less frequently than once a year (7)
- ☐ Never (8)
- ☐ Do not want to answer (97)

TOPBOT In our society, there are groups which tend to be towards the top and groups which tend to be towards the bottom. Below is a scale that runs from the top to the bottom. Where would you put yourself on this scale?

- ☐ 10 - Top (10)
- ☐ 9 (9)
- ☐ 8 (8)
- ☐ 7 (7)
- ☐ 6 (6)
- ☐ 5 (5)
- ☐ 4 (4)
- ☐ 3 (3)
- ☐ 2 (2)
- ☐ 1 - Bottom (1)
- ☐ Do not want to answer (97)

VOTE_LE Some people don't vote nowadays for one reason or another. Did you vote in the last Icelandic national election in April 2013?

- ☐ Yes, I did vote (1)
- ☐ No, I did not vote (2)
- ☐ I was not eligible to vote in the last election (3)
- ☐ Do not want to answer (7)

Display This Question:

If Some people don't vote nowadays for one reason or another. Did you vote in the last icelandic nat... Yes, I did vote Is Selected

nat_PRTY Thinking back to the last general election in april 2013. Which party did you vote for?

- ☐ Alþýðufylkinguna (People's front of Iceland (R)) (1)
- ☐ Bjarta framtíð (Bright Future (A)) (2)
- ☐ Dögun (Dawn (P)) (3)
- ☐ Flokk heimilanna (Households Party (I)) (4)
- ☐ Framboð Sturlu Jónssonar (Sturla Jónsson (K)) (5)
- ☐ Framsóknarflokkinn (Progressive Party (B)) (6)
- ☐ Hægri græna (Right Green People's Party (G)) (7)
- ☐ Húmanistaflokkinn (Humanist Party (H)) (8)
- ☐ Landsbyggðarflokkinn (Rural Party (M)) (9)
- ☐ Lýðræðisvaktina (Democracy Watch (L)) (10)
- ☐ Pírata (Pirate Party (P)) (11)
- ☐ Regnbogann (Rainbow (J)) (12)
- ☐ Samfylkinguna (Social Democratic Alliance (S)) (13)
- ☐ Sjálfstæðisflokkinn (Independence Party (D)) (14)
- ☐ Vinstri hreyfinguna - grænt framboð (Left-Green Movement (V)) (15)
- ☐ Other party, which one? (16) _____
- ☐ Empty ballot (17)
- ☐ Do not want to answer (97)

nat_ETHN Do you belong to a national minority or ethnic minority here in Iceland?
Please write in or tick a box as applicable.

- ☐ Yes, which? (1) _____
- ☐ No (2)
- ☐ Do not want to answer (7)

HOMPOP Including yourself, how many people – including children – usually live in your household? Please choose a number in each category. The number appearing in the "total" row should be the number of people living in your household.

- _____ Adults of 18 years and older (1)
- _____ Children between 6-17 years of age (2)
- _____ Children up to the age of 5 years (3)
- _____ Total

AO What is the age of the youngest child in your household? Please write in or tick a box as applicable.

- ☐ Age of youngest child: (1) _____
- ☐ Does not apply/ no children in household (9)
- ☐ Do not want to answer (7)

nat_RINC Before taxes and other deductions, what on average is your own total monthly income? Please write in.

- ☐ My total monthly income (in ISK) is on average: (1) _____
- ☐ Do not want to answer (7)

Display This Question:

If Including yourself, how many people – including children – usually live in your household? Please choose a number in each category. The number appearing in the "total" row should be the number of pe... Adults of 18 years and older Is Greater Than 1

nat_INC Before taxes and other deductions, what on average is the total monthly income of your household? Please write in.

- ☐ The total monthly income (in ISK) of my household is on average: (1) _____
- ☐ Do not want to answer (7)

MARITAL What is your current legal marital status? If you have never been married but are in informal cohabitation, please answer "I have never been married."

- ☐ Married (1)
- ☐ Civil partnership (2)
- ☐ Separated from my spouse/civil partner (but still legally married/still legally in a civil partnership) (3)
- ☐ Divorced from spouse/legally separated from my civil partner (4)
- ☐ Widowed/my civil partner died (5)
- ☐ I have never been married/never been in a civil partnership (6)
- ☐ Do not want to answer (97)

F_BORN In which country was your father born? Please write in or tick the box.

- ☐ Iceland (1)
- ☐ Other country, which? (2) _____
- ☐ Do not want to answer (7)

M_BORN In which country was your mother born? Please write in or tick the box.

- ☐ Iceland (1)
- ☐ Other country, which? (2) _____
- ☐ Do not want to answer (7)

URBRURAL Would you describe the place where you live as...

- ☐ A big city (1)
- ☐ The suburbs or outskirts of a big city (2)
- ☐ A small city or town (3)
- ☐ A country village (4)
- ☐ A farm or home in the country (5)
- ☐ Do not want to answer (7)