



## STATISTICAL SURVEY ON INCOME AND LIVING CONDITIONS PERSONAL QUESTIONNAIRE PGS-02 (ANNUAL)

Respondent number						
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Members of private households are interviewed
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State Data Agency (Statistics Lithuania) guarantees the confidentiality of the received statistical data
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We kindly invite you to fill in and submit the statistical questionnaire online at <a href="http://apklausos.stat.gov.lt">apklausos.stat.gov.lt</a>
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Information on the protection and management of personal data is provided at <a href="http://stat.gov.lt/asmens-duomenu-apsauga">stat.gov.lt/asmens-duomenu-apsauga</a>
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Survey date: 

2	0	2	4				
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year month day

### A. PERSONAL DATA

<b>A1</b>	<b>Are you currently living in the household?</b>
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- Yes ..... 1  
No, you are temporarily away until the end of the survey period ..... 2  
Not specified ..... 3

Filter FA1 If the person is identified ⇒ Filter FA2 If the person is not identified ⇒ A2
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<b>A2</b>	<b>What country were you born in?</b>
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- In Lithuania ..... 1  
In another country ..... 2  
.....  
Enter the name of the country Country code  
In another country but country unknown ..... 3  
Not specified ..... 4

<b>A3</b>	<b>What is your citizenship?</b>
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- Of the Republic of Lithuania ..... 1  
Of another country ..... 2  
.....  
Enter the name of the country Country code  
You have no citizenship ..... 3  
Not specified ..... 4

Filter FA2 (Age = (survey year – 1) – birth year) If age < 1 and the questionnaire is filled out ⇒ Filter FB1 If age < 1 and the questionnaire is not completed ⇒ AA5 If age ≥ 1 ⇒ A4
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<b>A4</b>	<b>Did you ever live abroad for a period of at least 1 year?</b>
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- Yes ..... 1 ⇒ A5  
No ..... 2 } ⇒ Filter FA3  
Not specified ..... 3 }

<b>A5</b>	<b>Please indicate when you arrived or last returned to live in Lithuania:</b>
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..... year ..... month  
Not specified N

#### Filter FA3

If 1 ≤ age < 16 and the questionnaire is filled out ⇒ Filter FB1  
If 1 ≤ age < 16 and the questionnaire is not completed ⇒ AA5  
If age ≥ 16 and the person is identified and the questionnaire is completed and A6-A8 specified in the AD ⇒ C1  
If age ≥ 16 and the questionnaire is not completed ⇒ C1  
If age ≥ 16 and the person is not identified and the questionnaire is not completed ⇒ C1  
If age ≥ 16 and the person is identified and the questionnaire is filled out and A6/A7/A8 not specified in the AD ⇒ A6/A7/A8  
If age ≥ 16 and the person is not identified and the questionnaire is filled out ⇒ A6

<b>A6</b>	<b>What is your legal marital status?</b>
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- Never married ..... 1  
Married ..... 2  
Divorced ..... 3  
Widowed ..... 4  
Not specified ..... 5

<b>A7</b>	<b>In which country was your father born?</b>
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- Lithuania ..... 1  
Another country ..... 2  
.....  
Enter the name of the country Country code  
In another country but country unknown ..... 3  
Not specified ..... 4

<b>A8</b>	<b>In which country was your mother born?</b>
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- Lithuania ..... 1  
Another country ..... 2  
.....  
Enter the name of the country Country code  
In another country but country unknown ..... 3  
Not specified ..... 4 } ⇒ C1

## B. CHILD CARE

Filter FB1 (Child's age = survey date - date of birth)  
If the child's age < 13 ⇒ Filter FB2  
If the child's age ≥ 13 ⇒ Filter FP1

Filter FB2  
If the child's age < 8 ⇒ B1  
If the child's age ≥ 8 ⇒ B3

**B1 Does the child attend nursery or kindergarten?**  
If a child attends a pre-school class at a kindergarten or school, it is marked as attending kindergarten.  
Yes ..... 1 ⇒ B2  
No ..... 2 ⇒ Filter FB3

**B2 Usually how many hours per week?**  
..... ⇒ B5

Filter FB3  
If the child's age < 5 ⇒ Filter FB4  
If the child's age ≥ 5 ⇒ B3

**B3 Does the child attend a comprehensive school?**  
If a child attends a pre-school class at a school, it is marked as attending kindergarten.  
Yes ..... 1 ⇒ B4  
No ..... 2 ⇒ Filter FB4

**B4 Usually how many hours per week?**  
Excluding hours spent in distance learning.  
.....

**B5 Does the child attend an extended day group at school, a weekly kindergarten, etc.?**  
Yes ..... 1 ⇒ B6  
No ..... 2 ⇒ Filter FB4

**B6 Usually how many hours per week?**  
..... ⇒ Filter FB4

Filter FB4  
If the child's age < 3 ⇒ B9  
If the child's age ≥ 3 ⇒ B7

**B7 Does the child attend a day-care or a children's activity centre?**  
Yes ..... 1 ⇒ B8  
No ..... 2 ⇒ B9

**B8 Usually how many hours per week?**  
.....

**B9 Is the child cared for by a paid baby-sitter?**  
Yes ..... 1 ⇒ B10  
No ..... 2 ⇒ B11

**B10 Usually how many hours per week?**  
.....

**B11 Are the grandparents, other family members (not parents), relatives, friends, neighbours taking care of the child without a payment?**  
Yes ..... 1 ⇒ B12  
No ..... 2 ⇒ Filter FP1

**B12 Usually how many hours per week?**  
..... ⇒ Filter FP1

## C. WORK, ACTIVITY STATUS

**C1 How would you describe your main activity status at the moment?**

Employee working full time .....	1
Employee working part-time .....	2
Self-employed working full-time (including unpaid family worker) .....	3
Self-employed working part-time (including unpaid family worker) .....	4
Unemployed .....	5
Pupil, student.....	6
A pensioner or recipient of an early retirement pension .....	7
A person who is unemployed due to a long-term health problem .....	8
Compulsory initial military service soldier .....	9
Housewife/househusband .....	10
Another person .....	11

Filter FC1  
If age ≥ 16 and the questionnaire is not completed ⇒ AA5  
If age ≥ 16 and the questionnaire is filled out ⇒ C2

**C2 Has the current activity status changed in 2023?**  
Yes ..... 1 ⇒ C3  
No ..... 2 ⇒ Filter FC2

<b>C3</b>	<b>What was the activity status every month in 2023?</b> Enter the correct code from question C1 in the cell of each month in the table.											
January	February	March	April	May	June	July	August	September	October	November	December	

Filter FC2

If age &gt; 74 and C1 = 1-4 ⇒ Filter FE1

If age &gt; 74 and C1 = 5-11 ⇒ C5

If age ≤ 74 ⇒ C4

**C4** **How many months during last 5 years have you been unemployed last time?**  
If you are currently unemployed, the present period of unemployment is considered the last.

|\_|\_| month

You have not been unemployed during this period .. 0

Not specified ..... N

Filter FC3

If C1 = 1-4 ⇒ Filter FE1

If C1 = 5-11 ⇒ C5

**C5** **Are you currently working?**

Yes ..... 1 ⇒ Filter FD1

No ..... 2 ⇒ C6

**C6** **Have you ever worked?**

You worked at least one hour per week and received income. Unpaid work in a family business is also included.

Yes, you have worked at least once for 3 months or longer..... 1

*Permanent job*

Yes, you only worked for less than 3 months for at least 2 consecutive years..... 2

*Regular (seasonal) work*

Yes, you only worked occasionally and for less than 3 months ..... 3

*Only occasional (irregular) work*

No, you never worked ..... 4

⇒ Filter FD1

⇒ H1

**D. LAST MAIN ACTIVITY**

Filter FD1

If age &gt; 74 ⇒ D3

If age = 16-74 ⇒ D2

**D2** **Please indicate the type (nature) of the main economic activity of your last workplace or the type of activity:**

Economic activity code in accordance with the Statistical Classification of Economic Activities in the European Community (NACE Rev. 2) |\_|\_|

**D3** **Please indicate your profession (position or main work performed) in the last workplace or in the course of individual activity:**

Profession code according to the Lithuanian Classification of Occupations (LCO 2012) ..... |\_|\_|

**D4** **How would you describe your employment status?**

Employee..... 1

A person who is self-employed and has employees ..... 2

A self-employed person without employees ..... 3

A person working unpaid in a family business, in personal agriculture ..... 4

⇒ G1

**E. CURRENT MAIN ACTIVITY**

If a respondent has several jobs and cannot indicate which one is the main job, the job with the most hours is considered the main job.

Filter FE1

If a household is interviewed for the 1<sup>st</sup> time or if a household is not interviewed for the 1<sup>st</sup> time and the household member has moved in → E1

Otherwise → E2

**E1** **Have you changed your main job in the last 12 months?**

Yes ..... 1

No ..... 2

⇒ Filter FE2

**E2** **Have you changed your main job since the last survey?**

Yes ..... 1

No ..... 2

Filter FE2

If the person is identified ⇒ Filter FE4

If the person is not identified ⇒ E4

**E4** **Please indicate the type (nature) of your workplace's main economic activity or the type of activity you are engaged in individually:**

Economic activity code in accordance with the Statistical Classification of Economic Activities in the European Community (NACE Rev. 2) ..... |\_|\_|

H7.1	Please specify the amount:
	EUR

<b>H8</b>	<b>How many months did you receive this amount?</b>
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\_\_\_\_

<b>H9</b>	<b>Please indicate which of the following incomes you received in 2023:</b>
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- |  |   |         |
|--|---|---------|
| Salary supplements, bonuses .....                                    | 1 | } ⇒ H10 |
| Payment for overtime, premium for working in harmful conditions..... | 2 |         |
| Other income (tips, unused per diem, etc.) .....                     | 3 |         |
| You did not receive additional income .....                          | 4 | ⇒ J1    |

<b>H10</b>	<b>Is the specified additional income included in the amount of income received above?</b>
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- Yes, all additional income is included in the stated income amount ..... 1 ⇒ J1
- No, not everything is included ..... 2 ⇒ H11

<b>H11</b>	<b>You will indicate additional non-included income received:</b>
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- |  |   |
|--|---|
| Calculated amount (pre-tax) .....              | 1 |
| Amount received after tax .....                | 2 |
| Amount received if you did not pay taxes ..... | 3 |

<b>H11.1</b>	<b>Please specify the amount:</b>
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\_\_\_\_ EUR

## J. COMPANY CAR

<b>J1</b>	<b>Did your employer give you the opportunity to use the company car for personal purposes in 2023?</b>
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- Yes ..... 1 ⇒ J2
- No ..... 2 ⇒ K1

<b>J2</b>	<b>Please specify the type of the car:</b>
-----------	--

- |                              |   |
|------------------------------|---|
| Passenger car.....           | 1 |
| Minibus .....                | 2 |
| Lorry.....                   | 3 |
| Truck.....                   | 4 |
| Other (please specify) ..... | 5 |

<b>J3</b>	<b>Please specify the make and model of the car:</b>
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\_\_\_\_\_  
\_\_\_\_\_

<b>J4</b>	<b>Please specify the year of the car's first registration:</b>
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\_\_\_\_

<b>J5</b>	<b>How many months did you use the car in 2023?</b>
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\_\_\_\_

## K. INCOME FROM WORK IN KIND

<b>K1</b>	<b>Did you receive free car fuel and/or services (payment for communication services, accommodation services, meals, tourist trips, etc.) from work for personal purposes in 2023?</b>
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- Yes ..... 1 ⇒ K2
- No ..... 2 ⇒ Filters FK1

<b>K2</b>	<b>Please indicate the average monthly value of income in kind and how many months you received this income in 2023:</b>
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- |  |          |            |
|--|----------|------------|
| 1. Car fuel .....  | ____ EUR | ____ month |
| 2. Car insurance, repair, technical inspection, tire change, etc. .... | ____ EUR | ____ month |
| 3. Meals, meal vouchers .....  | ____ EUR | ____ month |
| 4. Fee for communication services....                                  | ____ EUR | ____ month |
| 5. Accommodation.....  | ____ EUR | ____ month |
| 6. Tourist trips .....   | ____ EUR | ____ month |
| 7. Other services (swimming pool subscription, etc.) .....             | ____ EUR | ____ month |

Filter FK1

If the person is identified ⇒ M1

If the person is not identified ⇒ L1

## L. SICKNESS BENEFIT

<b>L1</b>	<b>Did you have a sick leave in 2023?</b>
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- Yes ..... 1 ⇒ L2
- No ..... 2 ⇒ M1

<b>L2</b>	<b>For how many days was sickness benefit paid?</b>
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\_\_\_\_

Not specified

N

Filter FL1
If H2 = 3 ⇒ M1
In other case ⇒ L3

<b>L3</b>	<b>Is sickness benefit included in the above income?</b>
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- Yes ..... 1
- No ..... 2

### M. RENTAL INCOME

<b>M1</b>	<b>Did you receive income from the rental of the property after deducting the property owner's expenses for minor repairs, insurance, loan, etc. in 2023?</b> Rent of house, apartment, room, land, etc.
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Yes ..... 1 ⇒ M2

No ..... 2 ⇒ N1

<b>M2</b>	<b>What amount of income did you receive before taxes during the year?</b>
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\_\_\_\_\_ EUR ⇒ M4

Not indicated N ⇒ M3

<b>M3</b>	<b>Please indicate an approximate amount of income:</b>
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- |                           |    |
|---------------------------|----|
| Less than EUR 150 .....   | 1  |
| EUR 150–200 .....         | 2  |
| EUR 201–250 .....         | 3  |
| EUR 251–300 .....         | 4  |
| EUR 301–500 .....         | 5  |
| EUR 501–800 .....         | 6  |
| EUR 801–1,000 .....       | 7  |
| EUR 1,001–1,500 .....     | 8  |
| EUR 1,501–2,000 .....     | 9  |
| EUR 2,001–3,000 .....     | 10 |
| EUR 3,001–4,000 .....     | 11 |
| More than EUR 4,000 ..... | 12 |
| Not specified .....       | 13 |

<b>M4</b>	<b>Did you pay income (business license) tax and social security contributions from this income?</b>
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Yes ..... 1 ⇒ M5

No ..... 2 ⇒ N1

<b>M5</b>	<b>What amount was paid during the year?</b>
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\_\_\_\_\_ EUR

Not specified N

### N. INCOME FROM BUSINESS, INDIVIDUAL ACTIVITY

<b>N1</b>	<b>Did you receive income from your own business, individual activity, except for agriculture and property rental in 2023?</b>
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Yes ..... 1 ⇒ N2

No ..... 2 ⇒ O1

<b>N2</b>	<b>You were:</b>
-----------	------------------

- |   |        |
|---|--------|
| Owner of a sole proprietorship .....  | 1      |
| A person carrying out individual activities according to a business certificate .....               | 2 ⇒ N5 |
| A person carrying out individual activity according to the certificate of individual activity ..... | 3      |
| A person working unpaid in the family business .....  | 4 ⇒ O1 |
| Other (please specify) .....  | 5 ⇒ N5 |

<b>N5</b>	<b>What was the annual income from business, individual activities for your household needs?</b>
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\_\_\_\_\_ EUR ⇒ N7

Not specified N ⇒ N6

<b>N6</b>	<b>Please indicate an approximate amount of income:</b>
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- |                            |    |
|----------------------------|----|
| Less than EUR 300 .....    | 1  |
| EUR 300–500 .....          | 2  |
| EUR 501–1,000 .....        | 3  |
| EUR 1,001–2,000 .....      | 4  |
| EUR 2,001–3,000 .....      | 5  |
| EUR 3,001–4,000 .....      | 6  |
| EUR 4,001–5,000 .....      | 7  |
| EUR 5,001–6,000 .....      | 8  |
| EUR 6,001–8,000 .....      | 9  |
| EUR 8,001–10,000 .....     | 10 |
| EUR 10,001–15,000 .....    | 11 |
| EUR 15,001–25,000 .....    | 12 |
| More than EUR 25,000 ..... | 13 |
| Not specified .....        | 14 |

<b>N7</b>	<b>Did you pay income tax or business license tax in 2023?</b>
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Yes ..... 1 ⇒ N8

No ..... 2 ⇒ N9

<b>N8</b>	<b>Please specify annual amount:</b>
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\_\_\_\_\_ EUR

Not specified N

**N9 Did you pay social security contributions in 2023?**

Yes ..... 1 ⇒ N10  
 No ..... 2 ⇒ Filter FN1

**N10 Please specify annual amount:**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| EUR

N

**Filter FN1**

If N7 = 2 and N9 = 2 ⇒ O1  
 In other case → Filter FN2

**Filter FN2**

If N7 = 1 and N8 = not specified and/or N9 = 1 and  
 N10 = Not specified ⇒ O1  
 In other case ⇒ N11

**N11 Did you deduct income or business license tax, social security contributions when specifying the amount of income?**

Yes ..... 1  
 No ..... 2

**O. PROPERTY INCOME****O1 Did you receive any dividends in 2023?**

Yes ..... 1  
 No ..... 2

**O2 Did you receive interest on deposits, securities, loans granted in 2023?**

Yes ..... 1 ⇒ O3  
 No ..... 2 ⇒ Filter FP1

**O3 Please specify the amount of interest received:**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| EUR ⇒ Filter FP1  
 Not specified N ⇒ O4

**O4 Please specify an approximate amount:**

Less than EUR 10 ..... 1  
 EUR 10–20 ..... 2  
 EUR 21–30 ..... 3  
 EUR 31–70 ..... 4  
 EUR 71–100 ..... 5  
 EUR 101–150 ..... 6  
 EUR 151–200 ..... 7  
 EUR 201–500 ..... 8  
 EUR 501–1,000 ..... 9  
 More than EUR 1,000 ..... 10  
 Not specified ..... 11

**P. PENSIONS, SOCIAL BENEFITS****Filter FP1**

If the person is identified (has an ID) and age < 16 ⇒ ZB1  
 If the person is identified (has an ID) and age ≥ 16 ⇒ P2  
 If the person is not identified and age ≥ 16 ⇒ P4  
 If the person is not identified and age < 16 ⇒ P1

**P1 Which of the following benefits did the child receive in 2023?**

Orphan's (survivor's) pension, welfare orphan's pension ..... 1  
 Targeted compensation for care or care (assistance) costs ..... 2  
 Disability pension benefits ..... 3  
 He (she) did not receive benefits from the list ..... 4

} ⇒ ZB1

**P2 Did you receive a pension from other countries in 2023?**

Yes ..... 1 ⇒ P5  
 No ..... 2 ⇒ Filter FP6

**P4 Which pensions did you receive in 2023?**

Old age pension ..... 1  
 Early retirement pension ..... 2  
 Compensation for special working conditions ..... 3  
 Disability pension ..... 4  
 Old-age or disability pension, welfare compensation ..... 5  
 Widows', orphans' (survivor's) pension, welfare orphan's pension ..... 6  
 Single person benefit ..... 13  
 State pension of affected persons ..... 7  
 I or II-degree state pension ..... 8  
 Researchers' state pension ..... 9  
 State pension of officers and soldiers ..... 10  
 State pension of judges ..... 11  
 Pension of other countries ..... 12  
 You did not receive pensions from the list ..... 14

**Filter FP4**

If P4 = 12 (it doesn't matter if others are marked) ⇒ P5  
 In other case ⇒ P6

**P5 Please specify the average monthly amount of the pension from other countries and how many months you received it:**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| EUR      \_\_\_\_|\_\_\_\_| month

**Filter FP5**

If the person is identified ⇒ Filter FP6  
 If the person is not identified ⇒ P6

<b>P6</b>	<b>Which of the following incomes did you receive in 2023?</b>
Unemployment social security benefits .....	1
Targeted compensation for care or care (assistance) costs .....	2
Targeted payment for compensating study costs for disabled students .....	3
Compensation for the costs of the purchase of passenger cars and their technical adaptation for the disabled .....	4
Vocational rehabilitation benefit .....	5
Social insurance benefits for accidents at work and occupational diseases .....	6
Severance pays .....	7
Maternity benefit .....	8
Childcare allowance.....	9
Paternity benefit .....	10
Burial allowance .....	11
Support payment for early withdrawal from commercial agricultural production .....	12
You did not received income from the list .....	13

Filter FP6
If age $\geq 60 \rightarrow$ Filter FP7
If age $< 60 \rightarrow$ P7

<b>P7</b>	<b>Did you receive a scholarship in 2023?</b>
Yes .....	1 $\Rightarrow$ P8
No .....	2 $\Rightarrow$ Filter FP7

<b>P8</b>	<b>Please specify the average monthly amount of the scholarship and how many months you received it:</b>
_ _ _ _  EUR       _ _  month	

Filter FP7
If C6 = 3 or 4 $\Rightarrow$ Filter FR1
In other case $\Rightarrow$ P9

<b>P9</b>	<b>Did you receive a benefit from your employer after the death of a relative in 2023?</b>
Yes .....	1 $\Rightarrow$ P10
No .....	2 $\Rightarrow$ Filter FR1

<b>P10</b>	<b>Please specify the amount of the payment received:</b>
_ _ _ _  EUR	

## R. PRIVATE PENSION FUNDS

Filter FR1
If age $\leq 59 \Rightarrow$ R5
If age $> 59 \Rightarrow$ R1

<b>R1</b>	<b>Did you receive regular income from private pension funds or pension insurance, excluding benefits to heirs in 2023?</b>
Lump sum payment is not included.	
Yes .....	1 $\Rightarrow$ R2
No .....	2 $\Rightarrow$ R5

<b>R2</b>	<b>Please specify the amount of the monthly payment (allowance):</b>
_ _ _ _  EUR $\Rightarrow$ R4	
Not specified N $\Rightarrow$ R3	

<b>R3</b>	<b>Please specify an approximate amount:</b>
Less than EUR 150 .....	1
EUR 150–250 .....	2
EUR 251–300 .....	3
EUR 301–350 .....	4
EUR 351–400 .....	5
EUR 401–450 .....	6
EUR 451–550 .....	7
More than EUR 550 .....	8
Not specified .....	9

<b>R4</b>	<b>How many months did you receive this payment (allowance)?</b>
_ _	

<b>R5</b>	<b>As an heir, did you receive a payment from private pension funds or pension insurance in 2023?</b>
Yes .....	1 $\Rightarrow$ R6
No .....	2 $\Rightarrow$ Filter FR2

<b>R6</b>	<b>Please specify the amount of payment (allowance):</b>
_ _ _ _  EUR $\Rightarrow$ Filter FR2	
Not specified N $\Rightarrow$ R7	

<b>R7</b>	<b>Please specify an approximate amount:</b>
Less than EUR 50 .....	1
EUR 50–100 .....	2
EUR 101–150 .....	3
EUR 151–200 .....	4
EUR 201–300 .....	5
EUR 301–500 .....	6
EUR 501–800 .....	7
EUR 801–1,000 .....	8
EUR 1,001–1,500 .....	9
EUR 1,501–2,500 .....	10
More than EUR 2,500 .....	11
Not specified .....	12



Filter FR2 If age > 59 → T1 If age ≤ 59 → R8
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<b>R8</b>	<b>Did you yourself (not including contributions paid by the employer) make additional payments to private pension insurance funds (II and III stage) in 2023?</b>
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Yes ..... 1 ⇒ R9

No ..... 2 ⇒ T1

<b>R9</b>	<b>Please specify the amount paid:</b>
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\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| EUR ⇒ T1

Not specified N ⇒ R10

<b>R10</b>	<b>Please specify an approximate amount:</b>	
	Less than EUR 30 .....	1
	EUR 30–60 .....	2
	EUR 61–100 .....	3
	EUR 101–150 .....	4
	EUR 151–200 .....	5
	EUR 201–300 .....	6
	EUR 301–400 .....	7
	EUR 401–500 .....	8
	EUR 501–700 .....	9
	701–1,300 EUR .....	10
	More than EUR 1,300 .....	11
	Not specified .....	12

## T. HEALTH

<b>T1</b>	<b>How is your health in general?</b>
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Very good ..... 1

Good ..... 2

Fair ..... 3

Bad ..... 4

Very bad ..... 5

Not specified ..... 6

<b>T2</b>	<b>Do you suffer from any chronic disease or long-term health issues?</b> Long-term is defined as an illness or health problem that has lasted or is likely to last for 6 months or more.
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Yes ..... 1

No ..... 2

Not specified ..... 3

<b>T3</b>	<b>Has your activity been limited because of a health problem in activities people usually do?</b>
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Severely limited ..... 1 } ⇒ T3.1

Limited but not severely ..... 2 } ⇒ T3.1

Not limited at all ..... 3 } ⇒ T4

Not specified ..... 4 } ⇒ T4

<b>T3.1</b>	<b>Have you been limited for at least the past 6 months?</b>
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Yes ..... 1

No ..... 2

Not specified ..... 3

<b>T4</b>	<b>Was there any time during the last 12 months when you really needed a medical examination or treatment (excluding dental) for yourself?</b>
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Yes ..... 1 ⇒ T5

No ..... 2 ⇒ T7

<b>T5</b>	<b>Did you have such services each time you really needed?</b>
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Yes ..... 1 ⇒ T7

No ..... 2 ⇒ T6

<b>T6</b>	<b>Please indicate the main reason:</b>
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Could not afford (too expensive) ..... 1

Had to wait a long time for service (difficult to get appointment ticket, referral, etc.) ..... 2

Due to lack of time (work, childcare, etc.) ..... 3

Too far or no means of transportation ..... 4

Fear of doctors, hospitals, examination or treatment ..... 5

Wanted to wait and see if problem got better on its own ..... 6

Did not know any good doctor or specialist ..... 7

Other reason (specify) ..... 8

<b>T7</b>	<b>Was there any time during the last 12 months when you really needed a dental examination or treatment for yourself?</b>
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Yes ..... 1 ⇒ T8

No ..... 2 ⇒ Filter FU1

<b>T8</b>	<b>Did you have such services each time you really needed?</b>
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Yes ..... 1 ⇒ Filter FU1

No ..... 2 ⇒ T9

<b>T9</b>	<b>Please indicate the main reason:</b>
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Could not afford (too expensive) ..... 1

Had to wait a long time for service (difficult to get appointment ticket, referral, etc.) ..... 2

Due to lack of time (work, childcare, etc.) ..... 3

Too far or no means of transportation ..... 4

Fear of dentists, hospitals, examination or treatment ..... 5

Wanted to wait and see if problem go better on its own ..... 6

Did not know any good dentist ..... 7

Other reason (specify) ..... 8

## U. TRAINING AND EDUCATION

Filter FU1
If age < 60 ⇒ U1
If age ≥ 60 ⇒ U4

<b>U1</b>	<b>Are you currently studying at a higher, vocational or general school?</b>
Yes .....	1 } ⇒ U3
Yes, but currently on leave .....	2 }
No .....	3 ⇒ U4

<b>U3</b>	<b>Where do you study?</b>
In grades 1–4 of a general education school .....	1
In grades 5–10 of a general education school or grades 1–2 of gymnasium .....	2
In grades 3–4 of gymnasium .....	3
In a vocational training institution where you enrolled without having basic education .....	4
In a vocational training institution where you enrolled having basic education .....	5
In a vocational training institution where you enrolled having secondary education .....	6
At a college.....	7
At a university, academy, or seminary – bachelor's degree program .....	8
At a university, academy, or seminary – master's degree or equivalent program* .....	9
At a university, institute, academy, or seminary – doctoral (PhD) program .....	10

<b>U4</b>	<b>What did you finish?</b>
Please indicate the educational institution where you received your highest education.	
Doctorate, post-graduate studies at a university (academy, institute, seminary) .	1
Master's degrees or equivalent programs at a university (academy, institute, seminary) .....	2
Bachelor studies at a university (academy, institute, seminary) .....	3
College .....	4
Higher school (until 2006) .....	5
Special secondary school, technical school (until 1995) .....	6
Vocational training institution you entered with secondary education .....	7
The comprehensive school where you received your secondary education.....	8
The vocational training institution you entered with your basic education.....	9
Vocational training institution that you entered without basic education .....	10
The general education school or vocational training institution where you received your basic education .....	11
The comprehensive school where you received your primary education .....	12
You haven't finished primary school.....	13

⇒ V1

⇒ Filter FU2

⇒ V1

\* Master's degree or equivalent program – including master's, integrated, or residency studies.

Filter FU2
If aged 16–34 ⇒ U5
In other case ⇒ V1

<b>U5</b>	<b>Did you complete secondary education at a vocational school along with your profession?</b>
Yes .....	1
No .....	2

## V. MATERIAL DEPRIVATION

<b>V1</b>	<b>Do you replace worn-out clothes by some new (not-second hand) ones?</b>
Yes .....	1
No, because you can't afford it.....	2
No, for other reason .....	3

<b>V2</b>	<b>Do you have two pairs of shoes in good condition that are suitable for daily activities (e.g., for going to work)?</b>
Yes .....	1
No, because you can't afford it.....	2
No, for other reason .....	3

<b>V3</b>	<b>Do you get-together with friends/relatives for a drink/meal at least once a month?</b>
Yes .....	1
No, because you can't afford it.....	2
No, for other reason .....	3

<b>V4</b>	<b>Do you <u>regularly</u> participate in a paid leisure activity?</b>
Leisure activities: sports, going to cinemas, concerts, etc.	
Yes .....	1
No, because you can't afford it .....	2
No, for other reason.....	3

<b>V5</b>	<b>Do you spend a small amount of money most weeks on yourself, for your own pleasure (buying/doing something for yourself)?</b>
Yes .....	1
No, because you can't afford it .....	2
No, for other reason .....	3

<b>V6</b>	<b>Do you have an Internet connection at home for personal use when needed?</b>
Yes .....	1
No, because you can't afford it .....	2
No, for other reason .....	3

## Z. QUALITY OF LIFE

<b>Z1</b>	<b>Overall, how satisfied are you with your life these days?</b> Please answer on a scale of 0 to 10, where 0 means not at all satisfied and 10 means completely satisfied.
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0 1 2 3 4 5 6 7 8 9 10

Not specified

99

<b>Z2</b>	<b>Do you trust strangers?</b> Please answer on a scale of 0 to 10, where 0 means that in general you do not trust strangers and 10 that you completely trust them.
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0 1 2 3 4 5 6 7 8 9 10

Not specified

99

## ZA. ACCESS TO SERVICES

<b>ZA1</b>	<b>In the last 12 months, have you personally felt discriminated against (even only once) when in contact in person, over the phone or via email with any administrative offices or public services?</b> You have contacted, for example, a health institution, municipality, ministry, police, social services, etc.
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Yes ..... 1 ⇒ ZA2

No ..... 2 } ⇒ ZA3

You have not been in contact ..... 3

Not specified ..... 4

<b>ZA2</b>	<b>Please indicate the main reason:</b>
------------	---

Age (too young/ too old) ..... 1

Sex ..... 2

Disability or long-term health problem ..... 3

Immigrant or ethnic origin ..... 4

Religion/belief ..... 5

Sexual orientation ..... 6

Other reason ((for example, income, profession, education level, outward appearance, etc.) ..... 7

Not specified ..... 8

<b>ZA3</b>	<b>In the last 5 years, have you personally felt discriminated against (even only once) when trying to rent or buy an apartment or house?</b>
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Yes ..... 1 ⇒ ZA4

No ..... 2 } ⇒ ZA5

You have not tried to rent or buy an apartment or house ..... 3

Not specified ..... 4

<b>ZA4</b>	<b>Please indicate the main reason:</b>
------------	---

Age (too young/ too old) ..... 1

Sex ..... 2

Disability or long-term health problem ..... 3

Immigrant or ethnic origin ..... 4

Religion/belief ..... 5

Sexual orientation ..... 6

Other reason ((for example, income, profession, education level, outward appearance, etc.) ..... 7

Not specified ..... 8

<b>ZA5</b>	<b>In the last 12 months, have you personally felt discriminated against (even only once), either as a parent/guardian or as a student, when in contact with somebody from an educational institution?</b>
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Yes ..... 1 ⇒ ZA6

No ..... 2 } ⇒ ZA7

You have not been in contact ..... 3

Not specified ..... 4

<b>ZA6</b>	<b>Please indicate the main reason:</b>
------------	---

Age (too young/ too old) ..... 1

Sex ..... 2

Disability or long-term health problem ..... 3

Immigrant or ethnic origin ..... 4

Religion/belief ..... 5

Sexual orientation ..... 6

Other reason ((for example, income, profession, education level, outward appearance, etc.) ..... 7

Not specified ..... 8

<b>ZA7</b>	<b>In the last 12 months, have you personally felt discriminated against (even only once) in public spaces, for example in a shop, café or restaurant, or when using leisure or sports facilities, etc.?</b>
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Yes ..... 1 ⇒ ZA8

No ..... 2 } ⇒ Filter FZA1

Not specified ..... 3

<b>ZA8</b>	<b>Please indicate the main reason:</b>
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Age (too young/ too old) ..... 1

Sex ..... 2

Disability or long-term health problem ..... 3

Immigrant or ethnic origin ..... 4

Religion/belief ..... 5

Sexual orientation ..... 6

Other reason ((for example, income, profession, education level, outward appearance, etc.) ..... 7

Not specified ..... 8

Filter FZA1

If C1 = 1–4 ⇒ ZA9

If C1 = 5–11 ⇒ ZA11

**ZA9 If you lost your job, would you have the right to receive unemployment benefits?**

- Yes ..... 1  
 No ..... 2  
 Not specified ..... 3

**ZA10 Would you be entitled to sickness benefit if you were unable to work due to illness or injury?**

- Yes ..... 1  
 No ..... 2  
 Not specified ..... 3

**ZA11 During the last 12 months, how often did you use public transport (bus, trolleybus, train etc.)?**

- Daily ..... 1  
 Every week (not every day) ..... 2 } ⇒ AA1  
 Every month (not every week) ..... 3  
 Less than once a month ..... 4 } ⇒ ZA12  
 Never ..... 5  
 Not specified ..... 6 ⇒ AA1

**ZA12 What is the main reason for not using public transport, or not using it more often?**

- It is too expensive ..... 1  
 No public transport available in the area ..... 2  
 Physical access too difficult for a person with a disability) ..... 3 } ⇒ AA1  
 Frequency too low or inconvenient schedules ..... 4  
 Travel time too long ..... 5  
 Safety or security concerns ..... 6  
 Other reason ..... 7  
 Not specified ..... 8

**ZB. CHILD HEALTH****ZB1 How would you describe the child's health in general?**

- Very good ..... 1  
 Good ..... 2  
 Fair ..... 3  
 Bad ..... 4  
 Very bad ..... 5  
 Not specified ..... 6

**ZB2 Is the child's activity limited because of a health problem in activities most children of the same age usually do?**

- Severely limited ..... 1 } ⇒ ZB3  
 Limited but not severely ..... 2  
 Not limited at all ..... 3 } ⇒ Filter FZC1  
 Not specified ..... 4

**ZB3 Has the child's activity been limited for at least the past 6 months?**

- Yes ..... 1  
 No ..... 2  
 Not specified ..... 3

**ZC. CHILD CARE**

Filter FZC1

If the child's age ≥ 13 ⇒ AA5

If the child's age &lt; 13 and B5 ≠ 1 and B7 ≠ 1 ⇒ ZC3

If the child's age &lt; 13 and (B5 = 1 and B7 = 1) ⇒ ZC1

**ZC1 Does your household pay for or contribute to the cost of formal childcare services (extended day group at school, weekly kindergarten, childcare at day-care or children's activity centre, etc.)?**

- Yes ..... 1 } ⇒ ZC2  
 No ..... 2  
 Not specified ..... 3 ⇒ AA5

**ZC2 Does your child need more formal childcare services?**

- Yes ..... 1 ⇒ ZC4  
 No ..... 2 } ⇒ AA5  
 Not specified ..... 3

**ZC3 Does your child need any formal childcare services (extended day group at school, weekly kindergarten, childcare at day-care or children's activity centre, etc.)?**

- Yes ..... 1 ⇒ ZC4  
 No ..... 2 } ⇒ AA5  
 Not specified ..... 3

**ZC4 What is the main reason for not making use of any formal childcare services or for not making use of more childcare services than received at present?**

- Household cannot afford it ..... 1  
 No places available ..... 2  
 Places available, but not nearby ..... 3  
 Places available, but opening hours not suitable ..... 4 } ⇒ AA5  
 Places available, but quality of services available not satisfactory ..... 5  
 Other reasons ..... 6  
 Not specified ..... 7

## AA. SURVEY INFORMATION

<b>AA1</b>	<b>Survey method:</b>		<b>AA2</b>	<b>Did the person surveyed answer the questionnaire questions himself/herself?</b>
	Computer assisted personal interview .....	2		Yes .....
	Telephone assisted personal interview .....	3		1    ⇒ AA4
	The questionnaire filled out by the respondent online .....	4		No, another member of the household .....
	Paper assisted personal interview .....	1		2    ⇒ Filter FAA3
	Other .....	5		

Filter FAA2  
 If the number of household members aged 16 and over = 1 ⇒ AA4  
 In other case ⇒ AA2

Filter FAA3  
 If the number of household members aged 16 and over = 2 ⇒ AA4  
 In other case ⇒ AA3

<b>AA3</b>	<b>Please indicate which household member answered the questionnaire questions:</b>	Person number	_ _ _
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<b>AA4</b>	<b>Please indicate how much time it took to complete the questionnaire:</b>	_ _ _  min.
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<b>AA5</b>	<b>Your comments (if any):</b>
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Contact: Tel. +370 650 96 338 or Email [nut@stat.gov.lt](mailto:nut@stat.gov.lt)

**INFORMATION**  
**REGARDING STATISTICAL SURVEY ON INCOME AND LIVING CONDITIONS**  
**(QUESTIONNAIRE PGS-02 (ANNUAL))**

<b>LEGAL BASIS</b>	Regulation (EU) 2019/1700 of the European Parliament and of the Council of 10 October 2019 establishing a common framework for European statistics relating to persons and households, based on data at individual level collected from samples, amending Regulations (EC) No 808/2004, (EC) No 452/2008 and (EC) No 1338/2008 of the European Parliament and of the Council, and repealing Regulation (EC) No 1177/2003 of the European Parliament and of the Council and Council Regulation (EC) No 577/98. Commission Implementing Regulation (EU) 2022/2498 of 9 December 2022 specifying technical items of data sets of the sample survey in the income and living conditions domain on access to services pursuant to Regulation (EU) 2019/1700 of the European Parliament and of the Council.
<b>PURPOSE, TYPE AND COVERAGE OF STATISTICAL SURVEY</b>	<p>The purpose of the Survey is to prepare and publish statistical information on population income, poverty, social exclusion and living conditions which is comparable at the EU level.</p> <p>It is a statistical sample survey.</p> <p>The sample covers 8,000 households. Statistical data are collected through population interviewing.</p>
<b>TIME AND PLACE OF PUBLICATION OF STATISTICAL INFORMATION</b>	<p>In May, in the news releases;</p> <p>On the Official Statistics Portal (<a href="http://osp.stat.gov.lt">osp.stat.gov.lt</a>).</p>
<b>OBLIGATION TO PROVIDE STATISTICAL DATA</b>	Pursuant of the Law on Official Statistics and State Data Governance of the Republic of Lithuania.
<b>CONFIDENTIALITY OF STATISTICAL DATA AND PROTECTION OF PERSONAL DATA</b>	<p>Pursuant of the Law on Official Statistics and State Data Governance of the Republic of Lithuania.</p> <p>Information on the protection and management of personal data is provided at <a href="http://stat.gov.lt/asmens-duomenu-apsauga">stat.gov.lt/asmens-duomenu-apsauga</a>.</p>

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