

REPUBLIC OF CROATIA  
CROATIAN BUREAU OF STATISTICS

**ADS-1 QUESTIONNAIRE**

The survey is carried out on the basis of the Official Statistics Act (Official Gazette, Nos 103/03, 75/09, 59/12 and 12/13 – consolidated text).

# Income and Living Conditions Survey, 2021

Type of work: 3 2 3 1	Interview number: _____	ID:	Year: <b>2021</b>
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**A1** COUNTY CODE:

**A2** SEGMENT CODE:

**A3** ENUMERATION AREA NUMBER:

**A4** DWELLING NUMBER:

**A5** NUMBER OF HOUSEHOLDS IN A DWELLING:

**A6** HOUSEHOLD NUMBER:


		<b>NEW STATUS:</b>
COUNTY:		
SETTLEMENT:		

STREET AND HOUSE NUMBER:		
NAME AND SURNAME OF HEAD OF THE HOUSEHOLD:		

**A7** Number of visits (enter the number of visits)

Number of visits	1st visit	2nd visit	3rd visit
Date of the visit			
Time of the visit			

**A8** Urbanisation level (to be entered by subject-matter unit)

1)	Densely populated area
2)	Medium densely populated area
3)	Low-densely populated area

**INFORMATION ON A HOUSING UNIT****A9** Is the selected housing unit located at the indicated address?

1)	Yes, the occupied housing unit is located there
2)	Yes, but the dwelling is no longer used for residential purposes
3)	Yes, but the dwelling is unoccupied for a long time
4)	No, it is not possible to find the housing unit
5)	The housing unit is inaccessible (due to epidemic, disaster or the like)
6)	The housing unit no longer exists

**A10** Have you contacted the tenants?

1)	Yes
2)	No

**A – INFORMATION ON THE HOUSEHOLD****A12** Does the household accept to participate in the Survey (select one of the offered answers)?

1)	Yes
2)	No, the household is absent
3)	No

**A15** Select the most important reason why the household does not participate in the Survey:

1)	Being too busy, lacking time
2)	Having enough of suveys and related negative experience
3)	Cannot participate (because of illnes or old age)
4)	Does not want to be interviewed (other reasons)
5)	Note (state the reason)

**A11\_1** Number of persons in the household being interviewed:

Enter the number:	
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**A11\_3** Are there other household members that were not mentioned in the previous question?

1)	Yes
2)	No

**A11\_4** How many other members belonging to this household have not been mentioned in the previus question?

Enter the number:	
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**A11\_6** Is there any other member, who lived in your household for at least three months in 2020 and does not belong to your present household, who has not been mentioned before?

1)	Yes
2)	No

**A7** Is the head of the household the same as in the address book?

1)	Yes
2)	No

**A14** THE BEGINNING OF THE INTERVIEW:

**Date:**      *day*        *month*

**Time:**      *hour*        *minute*

**A16**

**INTERVIEWER'S NOTES:**

DEMOGRAPHIC CHARACTERISTICS							
Ordinal number	The beginning of interviewing (enter hour and minute)			Name and surname	Who will provide answers to the Survey questions?  1 = in person  2 = another member (enter the member's ordinal number)	ONLY FOR THE HOUSEHOLD THAT WAS INTERVIEWED IN PREVIOUS YEARS  In this household, you are:	In this household, you are:
	1	hr	min				
01							
02							
03							
04							
05							
06							
07							

1 Was the member in the previous year and is the present member of the household  
 2 Moved from another household, which was interviewed in the previous year  
 3 Moved from another household, which was not interviewed in the previous year  
 4 Newborn member  
 5 Lived in the household for at least 3 months in the previous year, but was not interviewed and was not

1 Permanently present member of the household  
 2 Tenant, visitor, member of household personnel, e.g. live-in domestic workers  
 3 Household member who is occasionally/temporarily absent from the household for illness, travel, business or schooling in another



<b>DEMOGRAPHIC CHARACTERISTICS</b>			
Ordinal number	Are you a member of another household or do you live at another private address?	Do you intend to stay in this household for at least next 6 months?	Will the actual or planned absence from the household be longer than 6 months?
	<b>5</b>	<b>6</b>	<b>7</b>
<b>01</b>			
<b>02</b>			
<b>03</b>			
<b>04</b>			
<b>05</b>			
<b>06</b>			
<b>07</b>			

DEMOGRAPHIC CHARACTERISTICS					
Ordinal number	What is your date of birth? Enter the day, month and year of your birth.	Sex 1 = masculine 2 = feminine	In which country were you born, i.e., in which country did your mother live at the time of your birth? Enter the country of your birth.	Have you ever lived outside the Republic of Croatia, for at least a year?	How many full years did it pass from your last return from abroad?
	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>
01					
02					
03					
04					
05					
06					
07					

DEMOGRAPHIC CHARACTERISTICS		
Ordinal number	What country was your father born in (name and surname of the person)?	What country was your mother born in (name and surname of the person)?
	<b>13</b>	<b>14</b>
01		
02		
03		
04		
05		
06		
07		

DEMOGRAPHIC CHARACTERISTICS								
Ordinal number	What is your citizenship status?	Do you hold any other citizenship? Which one? 1 = Yes, enter which one 2 = No	How are you related to the head of the household?	Family relations within the household			What is your formal marital status?	Regardless of your formal marital status, do you live in the household together with your partner?
				SPOUSE Enter the ordinal number of the person.	FATHER Enter the ordinal number of the person.	MOTHER Enter the ordinal number of the person.		
	15	16	17	18	19	20	21	22
01								
02								
03								
04								
05								
06								
07								

- 1 head of the household
- 2 spouse
- 3 daughter/son
- 4 daughter-in-law/son-in-law
- 5 father/mother of the spouse or of the head of the household
- 6 grandfather/grandmother of the spouse or of the head of the household
- 7 grandson/granddaughter

- 1 unmarried
- 2 married
- 3 widowed
- 4 divorced

- 1 yes, in formal marital union
- 2 yes, in informal marital union
- 3 no, the person has no partner

DEMOGRAPHIC CHARACTERISTICS		EDUCATIONAL STATUS			
Ordinal number	Please, can you provide your OIB? Enter the number.	What is your highest educational attainment?	In what year did you achieve the present level of education? Enter the year.	Do you presently attend any programme of formal education (i.e., qualification programmes)?	What educational programme do you attend?
	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>
<b>01</b>					
<b>02</b>					
<b>03</b>					
<b>04</b>					
<b>05</b>					
<b>06</b>					
<b>07</b>					

- 1 you have not attended any educational level (neither kindergarten, nor pre-school education, nor elementary school)
- 2 you attended kindergarten, or pre-school education, or you started to attend elementary school, but you have not completed any grade
- 3 1 – 7 grades of elementary school (uncompleted elementary school)
- 4 elementary school (completed elementary school lasting 4, 6 or 8 years)
- 5 secondary school, **general education** (grammar school)
- 6 secondary school, **vocational education**, lasting **one year**
- 7 secondary school, **vocational education**, lasting **two years**
- 8 secondary school, **vocational education**, lasting **three or three and a half years**
- 9 secondary school, **vocational education**, lasting **four or more years**
- 10 secondary school, **art education**, lasting four years
- 11 secondary school, unknown secondary education
- 12 trainings taken after the completion of a secondary school (master craftsman exams, additional trainings, retrainings, improvement trainings, courses entered into the employment record card etc.)
- 13 professional study lasting **less than three years**
- 14 professional study lasting **at least three years**, undergraduate university study

- 1 1 – 4 grades of elementary school
- 2 5 – 8 grades of elementary school
- 3 secondary school, general education (grammar school)
- 4 secondary school, vocational education (school for craft and industrial occupations; school for qualified and highly qualified workers; technical, medical or similar secondary school)
- 5 secondary school, unknown secondary education
- 6 trainings taken after the completion of a secondary school (master craftsman exams, additional trainings, retrainings, improvement trainings, courses entered into the employment record card etc.)
- 7 professional study lasting less than three years
- 8 professional study lasting at least three years, undergraduate university study
- 9 graduate university study, integrated undergraduate and graduate university study, specialist graduate professional study, postgraduate specialist study (specialist masters), postgraduate university study (masters of science)
- 10 doctoral study

<b>CHILDCARE</b>			
A part of the questionnaire consists of questions on children as well. We want to know about how many hours a week do children spend in school, kindergarten or nursery, and who looks after them for the rest of time.			
Ordinal number	Who can provide answers to such questions in your household? (mark with X the ordinal number of the person who will provide answers on children)	Does the child attend:  1 = nursery 2 = kindergarten or a pre-school educational programme 3 = elementary school 4 = none of the above	How many hours in total does the child spend there during a typical week?  Hours spent in daycare, as an on-duty student, sports or cultural activities in school, etc.  Enter the number of hours.
	<b>28</b>	<b>29</b>	<b>30</b>
<b>01</b>			
<b>02</b>			
<b>03</b>			
<b>04</b>			
<b>05</b>			
<b>06</b>			
<b>07</b>			

<b>CHILDCARE</b>				
Ordinal number	Does the child stay in a nursery/ kindergarten/to attend a pre-school programme/extra hours in elementary school, e.g. in a nursery school?	How many total hours does the child spend in a nursery school or in a day-care centre during a typical week?  Enter the number of hours.	Does the child attend a children's day-care center, included in organised children's day care in a family or in the church or similar programmes, if such programmes are available in your usual place of residence?	How many hours in total does the child spend in such centre or programme during a typical week?  Enter the number of hours.
	<b>31</b>	<b>32</b>	<b>33</b>	<b>34</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				



<b>CHILDCARE</b>				
Ordinal number	Did you engage a person to care for your child for payment (in cash or kind)?	How many hours in total does that person cares for your child during a typical week?  Enter the number of hours.	Did you engage grandparents, other family members, friends or neighbours to care for your child, but without paying them for that service?	How many hours a week grandparents care for your child during a typical week?  Enter the number of hours.
	<b>35</b>	<b>36</b>	<b>37</b>	<b>38</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				

<b>CHILDREN'S HEALTH AND MATERIAL DEPRIVATION (INCLUDING QUESTIONS FROM AD HOC MODULE 2021)</b>						
Ordinal number	How would you describe the general health status of the child?	Is the child limited in typical activities in reference to the child's cohort due to health problems?	Has the child been limited for at least the past six months?	Was there any time during the last 12 months when your child really needed a medical examination or treatment (excluding dental examination or treatment)?	Did your child receive a medical examination or treatment every time it was needed?	What is the main reason why your child did not receive the medical examination or treatment?
	<b>39</b>	<b>40</b>	<b>41</b>	<b>42</b>	<b>43</b>	<b>44</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

CHILDREN'S HEALTH AND MATERIAL DEPRIVATION (INCLUDING QUESTIONS FROM AD HOC MODULE 2021)						
Ordinal number	Was there any time during the last 12 months when your child really needed a dental examination or treatment?	Did all your children receive a dental examination or treatment every time it was needed?	What is the main reason why your child did not receive the dental examination or treatment?	Have all children in your household aged up to 15 years got at least one piece of (not second-hand) clothes?	Have all children in your household aged up to 15 years got two pairs of properly fitting shoes, of which one pair is daily life shoes with the exception of sandals and boots?	Have all children in your household aged up to 15 years got a meal with fruits and vegetables at least once a day?
	<b>45</b>	<b>46</b>	<b>47</b>	<b>48</b>	<b>49</b>	<b>50</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

CHILDREN'S HEALTH AND MATERIAL DEPRIVATION (INCLUDING QUESTIONS FROM AD HOC MODULE 2021)						
Ordinal number	Have all children in your household aged up to 15 years got a meal with meat, chicken or fish (or vegetarian equivalent) at least once a day?	Have all children in your household aged up to 15 years got books (like picture books, encyclopaedias, picture dictionaries, fiction books, etc.) suitable for their age and level of knowledge?	Have all children in your household aged up to 15 years got outdoor leisure equipment (like bicycles, skates, scooters, tennis or badminton rackets, etc.) which is adapted to their age and physical conditions?	Have all children in your household aged up to 15 years got toys and indoor game sets (like dolls, building blocks, board games, educational babytoys, computer games, etc.) which is adapted to their age and psychophysical conditions?	Do all children in your household aged up to 15 years participate in a regular leisure activity outside home and school (doing sports, attending music school, workshops of any kind, foreign language courses, etc.)?	Did all children in your households aged up to 15 years have celebrations on their own special occasions, like birthdays, name-days, religious events, etc.)?
	<b>51</b>	<b>52</b>	<b>53</b>	<b>54</b>	<b>55</b>	<b>56</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

<b>CHILDREN'S HEALTH AND MATERIAL DEPRIVATION (INCLUDING QUESTIONS FROM AD HOC MODULE 2021)</b>					
Ordinal number	Do your children aged up to 15 years invite friends round for playing or eating from time to time?	Do your school attending children aged up to 15 years participate in school excursions, trips or events that cost money?	Have all school attending children in your household aged up to 15 years got a suitable place to study or do homework?	Did all your school attending children aged up to 15 years have the possibility to follow distance learning courses/school in an appropriate way (each had available, when necessary, computer/mobile device, good internet connection, etc.) during COVID-19 restrictions in last 12 months?	Does every child in your household aged up to 15 years go on holiday away from home at least one week per year?
	<b>57</b>	<b>58</b>	<b>59</b>	<b>60</b>	<b>61</b>
<b>01</b>					
<b>02</b>					
<b>03</b>					
<b>04</b>					
<b>05</b>					
<b>06</b>					
<b>07</b>					

<b>AD-HOC MODUL 2021: LIVING ARRANGEMENTS AND CONDITIONS OF CHILDREN WITHIN SEPARATED OR BLENDED FAMILIES (HOUSEHOLD LEVEL)</b>				
Ordinal number	Do any children aged up to 17 years currently living in your household have a parent who lives outside this household?	How many children with a parent who lives outside the household live here?	Have any household members children aged up to 17 years who live outside the household (who are not household members)?	How many children aged up to 17 years who are not members of your household live with another parent who lives inside the household?
	<b>62</b>	<b>63</b>	<b>64</b>	<b>65</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				

MAIN ACTIVITY STATUS (SELF-DEFINED)				
Ordinal number	What is the current main activity status of the person (name and surname)?	Has (name and surname) ever worked, has the respondent any employment experience?  1 = No 2 = Yes, but limited only to occasional work (lasting not more than three months and not every year) 3 = Yes, the respondent has worked and has work experience  (Opens only if answers 2 – 7 about the current activity status are selected)	Your previous job was:  (Opens only if answers 2 – 7 about the current activity status are selected)  - Occupation code is determined in the methodology department	What is the main economic activity, i.e., what services are provided in the enterprise, craft, institution for which you worked?  (Opens only if answers 2 – 7 about the current activity status are selected)
	<b>66</b>	<b>67</b>	<b>68</b>	<b>69</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				

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- |  |
|--|
| <ul style="list-style-type: none"> <li>1 Employed</li> <li>2 Unemployed</li> <li>3 Retired</li> <li>4 Unable to work due to long-standing health problems</li> <li>5 Pupil or student</li> <li>6 Fulfilling domestic tasks</li> <li>7 Other</li> </ul> |
|--|

- ↑
- |   |
|---|
| <ul style="list-style-type: none"> <li>1 Self-employed (owner or co-owner of an enterprise, craft or freelancer, farm worker on own farm) with employees</li> <li>2 Self-employed (owner or co-owner of an enterprise, craft or freelancer, farm worker on own farm) without employees</li> <li>3 Employee</li> <li>4 Family worker at agricultural farm, enterprise, craft or a freelancer (unpaid)</li> </ul> |
|---|



MAIN ACTIVITY STATUS (SELF-DEFINED)				
Ordinal number	What is the name of the local unit of the enterprise, craft or institution in which (name and surname) worked? (Opens only if answers 2 – 7 about the current activity status are selected)	Job title and main work specification in the current job  -Occupation code is determined in the methodology department	In the current job, (name and surname) is:	Type of employment contract
	<b>70</b>	<b>71</b>	<b>72</b>	<b>73</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				

1 Self-employed (owner or co-owner of an enterprise, craft or freelancer, farm worker on own farm) with employees  
 2 Self-employed (owner or co-owner of an enterprise, craft or freelancer, farm worker on own farm) without employees  
 3 Employee  
 4 Family worker at agricultural farm, enterprise, craft or a freelancer (unpaid)

1 Fixed-term written contract  
 2 Fixed-term verbal contract  
 3 Permanent written contract  
 4 Permanent verbal contract

<b>MAIN ACTIVITY STATUS (SELF-DEFINED)</b>				
Ordinal number	Is your main job a full-time or part-time one?	Do you supervise the work of other employees in your main job?  1 = Yes 2 = No	What is the main economic activity, i.e., what services are provided in the enterprise, craft, institution for which you work?  - Occupation code is determined in the methodology department	What is the name of the local unit of the enterprise, craft or institution for which you work?
	<b>74</b>	<b>75</b>	<b>76</b>	<b>77</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				

<b>MAIN ACTIVITY STATUS (SELF-DEFINED)</b>					
Ordinal number	What is the address of the local unit of the enterprise, craft or institution for which you work?	How many hours do you usually work per week in your main job?	Did you, in addition to your main job, do other jobs or activities remunerated in cash, kind or to make family profit?	How many hours did you spend per week in those additional jobs?	Approximately, how many years did you work from the time of your first regular job (either as an employee or as a self-employed person) until today?
	<b>78</b>	<b>79</b>	<b>80</b>	<b>81</b>	<b>82</b>
<b>01</b>					
<b>02</b>					
<b>03</b>					
<b>04</b>					
<b>05</b>					
<b>06</b>					
<b>07</b>					



<b>IMPACT OF COVID-19 CRISIS ON HOUSEHOLDS AND LIFE CONDITIONS / MAIN ACTIVITY STATUS (SELF-DEFINED)</b>			
Ordinal number	Were you able to work from home during the COVID-19 pandemic?	Were you unemployed for the last five years?	What was the maximum number of subsequent months in the last five years during which you were unemployed?
	<b>84</b>	<b>85</b>	<b>86</b>
<b>01</b>			
<b>02</b>			
<b>03</b>			
<b>04</b>			
<b>05</b>			
<b>06</b>			
<b>07</b>			



- 1 Yes, full time
- 2 Yes, but only partially
- 3 No, it was not possible because I have no or insufficient internet connection at home
- 4 No, it was not possible because my job is not adapted to teleworking
- 5 No, teleworking was not allowed/proposed by my employer
- 6 No, it was not possible for another reason

## INCOMES BY SOURCES

A) INCOME FROM EMPLOYMENT					
Ordinal number	Did you generate income from employment in 2020 working as an employee, irrespective of whether it was a permanent, part-time or occasional employment?	Have you got information on the amount of your average monthly net income from employment?	If you do not know the exact amount of your average monthly net income, please select one of the offered classes which you assess to be the closest to the amount of the average net income from employment that you generated in 2020.	What was the amount of your average monthly net income from employment in 2020?	For how many months did you generate the income?
	87	88	89	90	91
01					
02					
03					
04					
05					
06					
07					

- ↑
- |   |                      |
|---|----------------------|
| 1 | Up to 2 000 kuna     |
| 2 | 2 001 – 5 000 kuna   |
| 3 | 5 001 – 8 000 kuna   |
| 4 | 8 001 – 11 000 kuna  |
| 5 | 11 001 – 14 000 kuna |
| 6 | 14 001 and more      |

<b>A) INCOME FROM EMPLOYMENT</b>				
Ordinal number	Did you report supported members on your tax card in 2020 as a tax relief?  1 = Yes 2 = No	How many adult members of your immediate family are recorded on your tax card as supported members?  Enter the number.	How many children are recorded on your tax card as supported members?  Enter the number.	What was the net amount of annual leave bonus payment that you received in 2020?
	<b>92</b>	<b>93</b>	<b>94</b>	<b>95</b>
01				
02				
03				
04				
05				
06				
07				

Ordinal number	What was the net amount of Christman bonus that you received in 2020?	What was an average monthly net amount of the extra work payment that you received in 2020?	For how many months did you receive the extra work payment?  Enter the number.	What was the net amount of the performance-based bonus that you received in 2020?
	<b>96</b>	<b>97</b>	<b>98</b>	<b>99</b>
01				
02				
03				
04				
05				
06				
07				

<b>A) INCOME FROM EMPLOYMENT</b>				
Ordinal number	What was the net amount of the 13th month bonus that you received in 2020?	What was the net amount of allowance for working away from family that you received in 2020?	For how many months did you receive the allowance for working away from family?  Enter the number.	What was the net amount of jubilee award that you received in 2020?
	<b>100</b>	<b>101</b>	<b>102</b>	<b>103</b>
01				
02				
03				
04				
05				
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07				

Ordinal number	For how many working years did you receive the jubilee award?  Enter the number of working years.	What was the monthly net amount of compensation for public transportation that you received in 2020?	For how many months did you receive the compensation for public transportation?	What was the monthly net amount of hot meal allowance that you received in 2020?	For how many months did you receive the hot meal allowance?	What was the annual net amount of disability allowance that you received from your employer in 2020?
	<b>104</b>	<b>105</b>	<b>106</b>	<b>107</b>	<b>108</b>	<b>109</b>
01						
02						
03						
04						
05						
06						
07						

A) INCOME FROM EMPLOYMENT							
Ordinal number	What was the net amount of compensation in case of death of immediate family member that you received from your employer in 2020?	What was the net amount of allowance for sick-leave longer than 90 days that you received from your employer in 2020?	What was the net amount of a gift for children aged up to 15 years that you received in 2020?	What was the monthly net amount of seafarers allowance that you received in 2020?	What was the monthly net amount of fieldwork allowance that you received in 2020?	For how many months did you receive the seafarers or fieldwork allowance?	What was the net amount of childbirth lump-sum allowance that you received from your employer in 2020?
	<b>110</b>	<b>111</b>	<b>112</b>	<b>113</b>	<b>114</b>	<b>115</b>	<b>116</b>
01							
02							
03							
04							
05							
06							
07							

A) INCOME FROM EMPLOYMENT		
Ordinal number	What was the net amount of reimbursement or payment of housing-related expenses that you received from your employer?	For how many months did you receive the reimbursement or payment of housing-related expenses from your employer?  Enter the number of months.
	<b>117</b>	<b>118</b>
01		
02		
03		
04		
05		
06		
07		

<b>A) NON-CASH EMPLOYEE INCOME</b>			
Ordinal number	Did you use a company car (or any other motor vehicle) for private purposes in 2020?  1 = Yes 2 = No	For how many months did you use the company car for private purposes in 2020?  Enter the number of months.	What was the average monthly number of kilometres that you travelled for private purposes using a company car in 2020?  Enter the number of kilometres.
	<b>119</b>	<b>120</b>	<b>121</b>
01			
02			
03			
04			
05			
06			
07			

<b>A) NON-CASH EMPLOYEE INCOME</b>						
Ordinal number	Other most common forms of non-cash employee income are listed below. If you received any of them in 2020, please assess their approximate value in kuna.					
	What was the value expressed in kuna of public transportation tickets that you received in 2020?	What was the average monthly amount of expenses for mobile services that you used for private purposes?	For how many months did you use a company mobile phone for private purposes?	What is the market value expressed in kuna of free or subsidised meals or restaurant vouchers that you received on the monthly basis from your employer in 2020?	For how many months did you receive free or subsidised meals or restaurant vouchers in 2020?  Enter the number of months.	What is the market value of fringe benefits, i.e. received products and services, that you received on the monthly basis in the company for which you worked in 2020?
	<b>122</b>	<b>123</b>	<b>124</b>	<b>125</b>	<b>126</b>	<b>127</b>
01						
02						
03						
04						
05						
06						
07						

<b>A) NON-CASH EMPLOYEE INCOME</b>				
Ordinal number	Other most common forms of non-cash employee income are listed below. If you received any of them in 2020, please assess their approximate value in kuna.			
	What is the market value of non-cash gifts, i.e. products and services provided free or at reduced price, which are produced in the company for which you worked in 2020? Enter the number of months.	What was the monthly value of received reimbursements for housing-related expenses, i.e. what was the monthly market value of using accommodation provided free or at reduced rent, which you received from your employer in 2020?	For how many months did you receive reimbursements for housing-related expenses or use accommodation provided free or at reduced rent in 2020? Enter the number of months.	Did you use a loan from your employer at an annual interest rate lower than 2% in 2020? 1 = Yes, enter the interest rate 2 = No
	<b>128</b>	<b>129</b>	<b>130</b>	<b>131</b>
01				
02				
03				
04				
05				
06				
07				

<b>A) NON-CASH EMPLOYEE INCOME</b>		
Ordinal number	What was the amount of the loan in kuna, which you took from your employer at the annual interest rate lower than 2%? Enter the amount.	For how many months did you repay that loan in 2020? Enter the number of months.
	<b>132</b>	<b>133</b>
01		
02		
03		
04		
05		
06		
07		

<b>A) NON-CASH EMPLOYEE INCOME</b>			
Ordinal number	What was the market value of shares that your employer gifted you in 2020?	Assess the monthly countervalue of using sports facilities, cottages or vacation establishments provided by your employer.	For how many months did you use sports facilities, cottages or vacation establishments in 2020?  Enter the number of months.
	<b>134</b>	<b>135</b>	<b>136</b>
<b>01</b>			
<b>02</b>			
<b>03</b>			
<b>04</b>			
<b>05</b>			
<b>06</b>			
<b>07</b>			

<b>A) INCOME FROM EMPLOYMENT – SOCIAL CONTRIBUTIONS</b>	
Ordinal number	Which of the listed contributions did your employer paid for you in 2020?
	<b>137</b>
<b>01</b>	
<b>02</b>	
<b>03</b>	
<b>04</b>	
<b>05</b>	
<b>06</b>	
<b>07</b>	

1 legal/mandatory contributions paid by the employer covering health insurance  
2 pension insurance

<b>B) INCOME FROM SELF-EMPLOYMENT</b>				
Ordinal number	Assess the amount of a monthly cash income from self-employment that you generated, which was intended either for consumption or for savings in your household during 2020. Enter the amount.	If you did not answer the questions on the income, please state at least a rough estimate of the amount of the income that was intended for consumption (or for savings) in your household in 2020. Which of the listed classes includes the amount of that annual income?	Can you estimate an annual value of goods and services provided by your company, craft or free lance, which you used in your household during 2020?	For how many months in 2020 did you generate income from the enterprise, craft or free lance? Enter the number of months.
	<b>138</b>	<b>139</b>	<b>140</b>	<b>141</b>
01				
02				
03				
04				
05				
06				
07				

- ↑
- |   |                         |
|---|-------------------------|
| 1 | up to 20 000            |
| 2 | 20 001 – 40 000<br>kuna |
| 3 | 40 001 – 60 000<br>kuna |
| 4 | 60 001 – 80 000         |

<b>B) INCOME FROM SELF-EMPLOYMENT</b>			
Ordinal number	Please state a total net annual income you generated on the basis of author's agreement or copyrights in 2020?	Please state a total net annual income you generated on the basis of contractual agreement in 2020.	Please state a total net annual income you generated on the basis of direct agreement or direct cash payment in 2020.
	<b>142</b>	<b>143</b>	<b>144</b>
01			
02			
03			
04			
05			
06			
07			

INCOME		
Ordinal number	Although you have never worked, do you occasionally perform any jobs for others for direct cash payment? (The question is opened when respondents claim they have never worked.)	By performing those jobs, what was the total amount of the cash payment you generated in 2020?
	<b>145</b>	<b>146</b>
01		
02		
03		
04		
05		
06		
07		

A) INCOME FROM SELF-EMPLOYMENT – SOCIAL CONTRIBUTIONS					
Ordinal number	What contributions did you pay in 2020 based on your freelance job?	What is a total annual amount of employer's legal/mandatory health insurance contribution that you paid in 2020?	What is a total annual amount of pension insurance contribution that you paid in 2020?	Did you pay self-employment income tax in 2020?	State the amount of paid income tax in 2020.
	<b>147</b>	<b>148</b>	<b>149</b>	<b>150</b>	<b>151</b>
01					
02					
03					
04					
05					
06					
07					

↑

1 legal/mandatory contributions paid by the employer covering health insurance
2 pension insurance

<b>C) PROPERTY INCOME</b>						
Ordinal number	Did you generate an income from savings interests in 2020?	Do you know the amount of generated savings interests? 1 = YES 2 = NO	State the amount of generated savings interests in 2020.	If you cannot state the exact amount of generated savings interests in 2020, please select one of the offered classes which you assess to be the closest to that amount.	Did you generate an income from dividends, shares in company's profit, interests based on bonds and other royalties in 2020?	State the amount of income from dividends, share in company's profit, interests on royalties generated in 2020.
	<b>152</b>	<b>153</b>	<b>154</b>	<b>155</b>	<b>156</b>	<b>157</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

1	up to 1 000
2	1 001 - 4 000
3	4 001 - 7 000
4	7 001 - 10 000
5	10 001 - 13 000
6	13 001 and more

D) PENSION INCOME						
Ordinal number	Did you receive a pension in 2020? 1 = YES 2 = NO	Which one of the stated pensions did you receive?	Did you receive national or non-national pension?	State the amount of your average monthly net pension in 2020.	Of the stated amount, extract the amount of your average monthly net pension in 2020 that you received from abroad.	For how many months in 2020 did you receive the pension?  Enter the number of months.
	<b>158</b>	<b>159</b>	<b>160</b>	<b>161</b>	<b>162</b>	<b>163</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

1 old-age pension  
2 survivor's pension  
3 disability pension  
4 early retirement (due to loss of job, solving permanent redundancy, etc.)

1 national pension  
2 non-national pension  
3 national and non-national pension

D) PENSION INCOME				
Ordinal number	If you cannot state the exact amount of your pension in 2020, please select the class which you assess to be the closest to the amount of your average monthly pension.	If you cannot state the exact amount of the pension you received from abroad in 2020, please select the class which you assess to be the closest to that amount.	Did you report supported members on your tax card in 2020 as a tax relief?  1 = Yes 2 = No	How many adult members of your immediate family are recorded on your tax card as supported members?  Enter the number of persons (up to 14).
	<b>164</b>	<b>165</b>	<b>166</b>	<b>167</b>
01				
02				
03				
04				
05				
06				
07				

- ↑
- |   |                 |
|---|-----------------|
| 1 | up to 2 000     |
| 2 | 2 001 – 5 000   |
| 3 | 5 001 – 8 000   |
| 4 | 8 001 – 11 000  |
| 5 | 11 001 – 14 000 |
| 6 | 14 001 and more |

- ↑
- |   |                 |
|---|-----------------|
| 1 | up to 2 000     |
| 2 | 2 001 – 5 000   |
| 3 | 5 001 – 8 000   |
| 4 | 8 001 – 11 000  |
| 5 | 11 001 – 14 000 |
| 6 | 14 001 and more |

D) PENSION INCOME			
Ordinal number	How many children are recorded on your tax card as supported members?  Enter the number of persons (up to 14).	Did you receive a lump-sum cash benefits such as Christmas and/or Easter bonuses for retired persons in 2020?  1 = Yes 2 = No	What was the amount of the Christmas/Easter bonus you received in 2020?
	<b>168</b>	<b>169</b>	<b>170</b>
01			
02			
03			
04			
05			
06			
07			

E) SOCIAL BENEFITS							
Ordinal number	What was the amount of the maternity allowance you received in 2020?	For how many months did you receive the maternity allowance in 2020?	What was the monthly amount of the parental leave allowance you received in 2020?	For how many months did you receive the paternity allowance in 2020?	Did you receive, in 2020, any social benefit for unemployment, such as a monthly cash benefit for unemployment, cash benefit for training/retraining in the case of unemployment, lump-sum cash benefit for self-employment, lump-sum cash allowance for employment out of place of residence or pre-employment compensation for disabled persons?	State a total annual amount of benefits received for unemployment Enter the amount.	Did you receive, in 2020, any social benefit for your own disability, such as compensation for bodily damage, care allowance, family or personal disability benefit, etc.?
	<b>171</b>	<b>172</b>	<b>173</b>	<b>174</b>	<b>175</b>	<b>176</b>	<b>177</b>
01							
02							
03							
04							
05							
06							
07							

E) SOCIAL BENEFITS			
Ordinal number	State an annual amount of received social benefits for disability Enter the amount	Did you receive, in 2020, a benefit for a sick leave longer than 42 days or any other benefit for an illness of a shorter duration paid by the Croatian Health Insurance Fund?  1 = Yes 2 = No	State the annual amount of these benefits received in 2020 Enter the amount
	<b>178</b>	<b>179</b>	<b>180</b>
01			
02			
03			
04			
05			
06			
07			



<b>E) SOCIAL BENEFITS</b>					
Ordinal number	For how many months during 2020 did you receive the allowance as a caretaker or a parent caretaker?	State an average monthly amount of the allowance for having the status of a caretaker or a parent caretaker during 2020 Enter the amount	Did you realise a cash benefit as a stay-at-home parent in 2020?  1 = YES 2 = NO	For how many months during 2020 did you receive the benefit as a stay-at-home parent?	State an average monthly amount of the cash benefit for stay-at-home parent  Enter the amount
	<b>189</b>	<b>190</b>	<b>191</b>	<b>192</b>	<b>193</b>
<b>01</b>					
<b>02</b>					
<b>03</b>					
<b>04</b>					
<b>05</b>					
<b>06</b>					
<b>07</b>					

F) OTHER INCOME						
Ordinal number	Did you receive, in 2020, a severance for old-age or disability retirement, getting notice due to permanent redundancy or transferring to a new job?  1 = YES 2 = NO	You received the severance in 2020 due to:	State the amount of the severance you received in 2020  Enter the amount.	For how many years did you work for the employer that paid your severance?	What was the amount of your average net wage paid by this employer in the last three months before the severance payment?	Did you pay deposits in the third pillar retirement fund in 2020?
	<b>194</b>	<b>195</b>	<b>196</b>	<b>197</b>	<b>198</b>	<b>199</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

- 1 Old-age retirement
  - 2 Disability retirement
  - 3 Early retirement
  - 4 Getting notice due to permanent redundancy
  - 5 Consensual termination of employment relationship

F) OTHER INCOME				
Ordinal number	State the amount of your deposits into the third pillar retirement fund in 2020?	Did you receive a pension from the third pillar retirement fund in 2020?	State the amount of the received payments from the third pillar retirement fund in 2020.	Did you realise a life insurance income in 2020?
	<b>200</b>	<b>201</b>	<b>202</b>	<b>203</b>
01				
02				
03				
04				
05				
06				
07				

F) OTHER INCOME					
Ordinal number	State the amount of received payments based on life insurance policy	Did you submit an income tax record in 2020? 1 = YES 2 = NO	Did you receive a tax return or pay a tax difference upon submission of income tax record?	State the amount of the income tax return you received in 2020	State the amount of the income tax difference you paid in 2020
	<b>204</b>	<b>205</b>	<b>206</b>	<b>207</b>	<b>208</b>
01					
02					
03					
04					
05					
06					
07					

↑

1 I received the income tax return 2 I paid the income tax difference 3 None of the above
---

F) OTHER INCOME				
Ordinal number	Did you receive other cash benefits in 2020, such as:	State the total annual amount of benefits received in 2020	Did you do any occasional jobs based on the student job contract in 2020?	State a total net annual income you generated on the basis of student job contracts in 2020
	<b>209</b>	<b>210</b>	<b>211</b>	<b>212</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				



- |   |
|---|
| <ul style="list-style-type: none"> <li>1 Compensation for assembly and supervisory board members in companies</li> <li>2 Compensation for election board members (elections and referendums)</li> <li>3 Compensation for members of representative and executive bodies of government and local authorities (e.g., members of the city assembly, etc.)</li> <li>4 Compensations for sports referees and delegates</li> <li>5 Compensation for side judges or court appointed experts</li> </ul> |
|---|

HEALTH						
Ordinal number	You perceive your general health as: 1 = very good 2 = good 3 = satisfactory 4 = bad 5 = very bad	Do you suffer from any chronic illness or health problem?  1 = Yes 2 = No	In the period of at least the past 6 months, what was the severity of your limitations due to health problems in activities people usually do?  Would you say you were: 1 = severely limited 2 = limited, but not severely 3 = not limited at all	Was there any time during the last 12 months when you needed a medical examination or treatment (excluding dental) for yourself?  1 = Yes 2 = No	Did you have a medical examination or treatment each time you really needed?  1 = Yes, I had a medical examination or treatment each time I needed 2 = No, there was at least one occasion when I did not have a medical examination or treatment	What is the main reason why you did not have a medical examination or treatment?
	<b>213</b>	<b>214</b>	<b>215</b>	<b>216</b>	<b>217</b>	<b>218</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

- 1 could not afford to (too expensive)
- 2 long waiting list
- 3 being too busy, lacking time
- 4 too far to travel/no means of transportation
- 5 fear of doctor/hospitals/examination/treatment
- 6 wanted to wait and see if problem will get better on its own
- 7 did not know any good doctor or specialist
- 8 other reasons

**HEALTH / IMPACT OF COVID-19 CRISIS ON HOUSEHOLDS AND LIFE CONDITIONS**

Ordinal number	Is COVID-19 crisis the main reason why you did not have a medical examination or treatment in the last 12 months?  1 = Yes 2 = No	Was there any time during the last 12 months when you needed a dental examination or treatment?  1 = Yes 2 = No	Did you have a dental examination or treatment each time you really needed?  1 = Yes, I had a dental examination or treatment each time I needed 2 = No, there was at least one occasion when I did not have a dental examination or treatment	What is the main reason why you did not have a dental examination or treatment?	Is COVID-19 crisis the main reason why you did not have a dental examination or treatment?  1 = Yes 2 = No	Has your mental health/well-being been affected by the Covid-19 crisis during 2020? 1 = Yes, has been negatively affected 2 = Yes, has been positively affected 3 = No, has not been affected
	<b>219</b>	<b>220</b>	<b>221</b>	<b>222</b>	<b>223</b>	<b>224</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

- 1 could not afford to (too expensive)
- 2 long waiting list
- 3 being too busy, lacking time
- 4 too far to travel/no means of transportation
- 5 fear of dentist/hospitals/examination/treatment
- 6 wanted to wait and see if problem will get better on its own
- 7 did not know any good dentist
- 8 other reasons

<b>MATERIAL DEPRIVATION</b>						
Ordinal number	Can you replace your worn-out clothes by some new (not second-hand) ones?	Have you got two pairs of properly fitting shoes, of which one pair is daily life shoes with the exception of sandals and boots?	Do you get-together with friends, family or relatives for a drink/meal at least once a month?	Do you regularly participate in a leisure activity?	Do you spend a small amount of money every week on yourself, for your own pleasure (buying/doing something for yourself)?	Do you have an internet connection at home for personal use when needed?
	<b>225</b>	<b>226</b>	<b>227</b>	<b>228</b>	<b>229</b>	<b>230</b>
<b>01</b>						
<b>02</b>						
<b>03</b>						
<b>04</b>						
<b>05</b>						
<b>06</b>						
<b>07</b>						

**AD-HOC MODUL 2021: LIVING ARRANGEMENTS AND CONDITIONS OF CHILDREN IN SEPARATED AND RECOMPOSED FAMILIES  
(QUESTIONS FOR PERSONS)**


Ordinal number	Do you think that you spend enough time with your children? (if not, please state the main reason why not)  <i>(refers to children who are household members)</i>	Have you got child/children aged up to 17 years who live outside this household?	How many children who live <b>outside</b> this household have you got?	Do you think that you spend enough time with this child? (if not, please state the main reason why not)
	<b>231</b>	<b>232</b>	<b>233</b>	<b>234</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				

- 1 My work (paid work or unpaid work)
- 2 My studies
- 3 Being separated
- 4 For health reasons
- 5 Distance
- 6 Child does not want/has other priorities
- 7 Other reason
- 8 I spend enough time with children

- 1 My work (paid work or unpaid work)
- 2 My studies
- 3 Being separated
- 4 For health reasons
- 5 Distance
- 6 Child does not want/has other priorities
- 7 Other reason
- 8 Nothing prevents me from spending

**AD-HOC MODUL 2021: LIVING ARRANGEMENTS AND CONDITIONS OF CHILDREN IN SEPARATED AND RECOMPOSED FAMILIES  
(QUESTIONS FOR PERSONS)**

Ordinal number	Please tell me the name of the child who is not a household member.	What age is (name and surname of the child)?	How long does it usually take you to get from your household to (name and surname of the child), from door to door?	How often during last 12 months were you normally in contact with (name and surname of the child) via phone, social media etc.?
	<b>235</b>	<b>236</b>	<b>237</b>	<b>238</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				

- 
- 1 Daily
  - 2 Every week (not every day)
  - 3 Several times a month (not every week)
  - 4 Once a month
  - 5 Less than once a month
  - 6 Never

**AD-HOC MODUL 2021: LIVING ARRANGEMENTS AND CONDITIONS OF CHILDREN IN SEPARATED AND RECOMPOSED FAMILIES  
(QUESTIONS FOR PERSONS)**

Ordinal number	How often do you spend time with (name and surname of the child) when he/she is physically present? <i>(question refers to the child/children who are <b>not</b> household members)</i>	How many nights does (name and surname of the child) stay in your household during a typical month?	Could you tell me who has custody over (name and surname of the child)?	Have each of your children bedroom in which to sleep? 1 = Yes 2 = No, could not afford 3 = No, other reason
	<b>239</b>	<b>240</b>	<b>241</b>	<b>242</b>
<b>01</b>				
<b>02</b>				
<b>03</b>				
<b>04</b>				
<b>05</b>				
<b>06</b>				
<b>07</b>				

- 1 Various times a day
- 2 Once a day
- 3 Every week (not every day)
- 4 Several times a month (not every week)
- 5 Once a month
- 6 Less than once a month
- 7 Never

- 1 Exclusively the mother
- 2 Exclusively the father
- 3 Both parents together
- 4 Other (e.g. grandparents, other relatives. etc.)

**AD-HOC MODUL 2021: LIVING ARRANGEMENTS AND CONDITIONS OF CHILDREN IN SEPARATED AND RECOMPOSED FAMILIES (QUESTIONS FOR PERSONS)**

Ordinal number	How often do you spend time with (name and surname of the child) when he/she is physically present? <i>(question refers to the child/children who are household members)</i>	Are you the parent of a child who is a household member whose other parent lives outside the household?  1 = YES 2 = NO	Which child/children is it?	How many nights a month does (name and surname of the child) stay in your household?  (connected to previous two questions)	Could you tell me who has custody over (name and surname of the child)?  (connected to previous three questions)
	<b>243</b>	<b>244</b>	<b>245</b>	<b>246</b>	<b>247</b>
<b>01</b>					
<b>02</b>					
<b>03</b>					
<b>04</b>					
<b>05</b>					
<b>06</b>					
<b>07</b>					

- ↑
- 1 Various times a day
  - 2 Once a day
  - 3 Every week (not every day)
  - 4 Several times a month (not every week)
  - 5 Once a month
  - 6 Less than once a month
  - 7 Never

- ↑
- 1 Exclusively the mother
  - 2 Exclusively the father
  - 3 Both parents together
  - 4 Other (e.g. grandparents, other relatives, etc.)

QUALITY OF LIFE		
Ordinal number	Overall, how satisfied are you with your life these days? (Please answer (circle) on a scale of 0 to 10, where 0 means not at all satisfied and 10 means completely satisfied)	To what extent do you trust other people? (Please answer (circle) on a scale from 0 to 10, where 0 means that in general you do not trust any other person and 10 that you feel most people can be trusted)
	<b>248</b>	<b>249</b>
01		
02		
03		
04		
05		
06		
07		

CO-RESIDENTS AND FORMER HOUSEHOLD MEMBERS					
Ordinal number	State the name and surname of the person interviewed last year who is not the household member any longer	The person is not the household member any longer due to:  1 = moving out of the household 2 = death	Where has (name and surname) moved to?  1 = to a private household in the Republic of Croatia 2 = to a collective household or institution in the Republic of Croatia 3 = abroad 4 = unknown	THE END	
				Enter hour and minute	
	<b>250</b>	<b>251</b>	<b>252</b>	<i>hr</i>	<i>min</i>
01					
02					
03					
04					
05					
06					
07					

**B – INFORMATION ON THE DWELLING TYPE AND HOUSING CHARACTERISTICS (LIVING CONDITIONS)**

(to be answered by circling and filling in)

Enter the starting time of this part of the survey

Hour:

Minute:

**1**

State the type of building where your dwelling is located:

1)	Detached house
2)	Semi-detached or terraced house
3)	Residential building with less than 10 dwellings
4)	Residential building with 10 or more dwellings
5)	Some other kind of accommodation

**2**

Which of your household members is the owner of the dwelling/rented the dwelling in which you live?

\_\_\_\_\_ (name and surname)

**3**

In this household, you are

1)	Owner without outstanding mortgage
2)	Owner with outstanding mortgage
3)	Tenant, rent at market price
4)	Tenant, rent at reduced price
5)	Tenant, rent free
6)	Owner with the obligation to purchase the dwelling

**4**

Did you rent a furnished or unfurnished dwelling?

1)	Furnished
2)	Unfurnished

**5**

How many rooms are there in your dwelling?

**6**Do you share any rooms with the other household that lives in this dwelling?  
(to be answered by households living in multi-household dwellings)

1)	Yes
2)	No

**7**

How many rooms do you share with the other household that lives in this dwelling?

**8**

What is the useful floor area of your dwelling in square meters?

<input type="text"/>	m <sup>2</sup>
----------------------	----------------

**9**

Does your household use, for its purposes only, a garage or a permanent parking spot, which came with your dwelling (permanent parking spot in underground parking lot, permanent parking spot outside the building)?

1)	Yes
2)	No

**10** User/owner of a garage/permanent parking spot

1)	Owner of a garage/permanent parking spot
2)	User of a garage/permanent parking spot for a rent
3)	Rent-free user of a garage/permanent parking spot

**11** Floor area of the garage/permanent parking spot in square meters

	m2
--	----

**12** What installations have you got in your dwelling?

1)	Electrical
2)	Water supply
3)	Sewage
4)	Gas supply
5)	No installations

**13** Have you got a bathroom with a bath tub or shower in your dwelling?

1)	Yes, the bathroom is used only by your household
2)	Yes, the bathroom is shared with another household
3)	No

**14** Have you got toilet inside your dwelling?

1)	Yes, the toilet is used only by your household
2)	Yes, the toilet is shared with another household
3)	No

**MATERIAL DEPRIVATION**

**15** Do you replace worn-out furniture with a new one in your dwelling?

1)	Yes
2)	No, cannot afford for financial reason
3)	No, other reason

### DURABLE GOODS

**16** Do you have a car?

- |    |  |
|----|--|
| 1) | Yes                                    |
| 2) | No, cannot afford for financial reason |
| 3) | No, other reason                       |

**17** Does the household have a computer?

- |    |  |
|----|--|
| 1) | Yes                                    |
| 2) | No, cannot afford for financial reason |
| 3) | No, other reason                       |

### HOUSING-RELATED EXPENSES AND HOUSEHOLD FINANCIAL SITUATION

**To be answered only by tenants paying either full or reduced rent**

**18** What is the amount of the monthly rent you pay for the dwelling in which you live?

kuna

**19** Are utility costs or some other housing costs included in the amount you stated?

- |    |     |
|----|-----|
| 1) | Yes |
| 2) | No  |

**20** In the past 12 months, have you been in arrears with rent payments due to financial reason?

- |    |                    |
|----|--------------------|
| 1) | Yes, once          |
| 2) | Yes, twice or more |
| 3) | No                 |

**To be answered only by owners and rent-free tenants**

**21** Would you please assess what would be the amount of a monthly rent for the dwelling in which you live if you paid rent at a reduced market price?

kuna

**22** Which of the listed utility costs did your household pay for in the last 12 months solely for the housing needs of the dwelling in which you live?

- |    |  |
|----|--|
| 1) | Electricity  |
| 2) | Water (hot and cold)   |
| 3) | Gas  |
| 4) | Other energy products used for heating (fuelwood, fuel oil, coal, etc.)                                    |
| 5) | Utility services (sewage, waste management, shared funds, water contribution, municipal utility fee, etc.) |

6) No, the household does not pay utility costs

23 What was an average monthly amount you paid for electricity in the last 12 months? kuna

24 What was an average monthly amount you paid for water supply in the last 12 months? kuna

25 What was an average monthly amount you paid for gas supply in the last 12 months? kuna

26 How many annual expenses of your household refer to fuel costs, that is, purchase of fuelwood, fuel oil, coal, etc.? kuna

27 What was an average monthly amount you paid for municipal utility services in the last 12 months? kuna

28 In the last 12 months, did the municipality or state subsidise, fully or partly, household expenditures for electricity, water, gas, utility services or other municipal utility costs?

1)	Yes
2)	No

29 In the past 12 months, have you been unable to pay any utility bill on time due to financial difficulties?

1)	Yes, once
2)	Yes, twice or more
3)	No

30 Does your household have regular expenses for maintenance and repairs in the dwelling?

1)	Yes
2)	No

31 How much do you spend on regular maintenance and repairs in the dwelling per year? kuna

32 Have you got other housing-related expenses such as real estate insurance costs for the dwelling in which you live, etc.?

1)	Yes
2)	No

33 How much do you spend on real estate insurance and other housing-related expenses per year? kuna

**To be answered by owners with outstanding mortgage on the dwelling in which they live**

34 What is the amount of your regular monthly housing loan installment? kuna

35 How many loan installments did you settle in 2020?

36 What is the interest rate on the housing loan you are settling?

**37** In what year did you take the housing loan?

**38** What is the amount of the taken housing loan in kuna?

 kuna

**39** What is the payment period for the housing loan, number of years?

**40** In the past 12 months, have you been unable to pay any installment of the housing loan on time due to financial difficulties?

1)	Yes, once
2)	Yes, twice or more
3)	No

**To be answered only by owners with the obligation to purchase the dwelling**

**41** What is the amount of the monthly installment that your household pays to purchase the dwelling?

 kuna

**To be answered by all respondents:**

**42** Do you or anyone in your household have to repay debts from any credit card, hire purchase or other loans (e.g., for a car, durable goods, make-overs or repairs in the dwelling, travelling, etc.), excluding mortgage repayments or other loans connected with the purchase of main dwelling in which the household lives?

1)	Yes
2)	No

**43** In the past 12 months, have you been unable to pay any installment of this/these loans on time?

1)	Yes, once
2)	Yes, twice or more
3)	No

**44** to what extent is the repayment of such loans a financial burden for your household?

1)	Repayment is a heavy burden
2)	Repayment is somewhat a burden
3)	Repayment is not a burden at all

**45** If you would like to, would you be able to afford paying for one-week annual holiday away from home for all your household members, including staying in the household's second dwelling or at friends' dwelling?

1)	Yes
2)	No

**46** If you would like to, would you be able to afford a meal with meat, chicken, fish or vegetarian equivalent every second day?

1)	Yes
2)	No

<b>47</b>	Does your financial situation enable you to ensure adequate heating in the coldest months	1)	Yes
		2)	No

<b>48</b>	Would you be able, on your own, without incurring a debt, to settle an outstanding cost amounting to 2 750 kuna within a month, without affecting the payment of other, regular expenditures of your household?	1)	Yes
		2)	No

<b>49</b>	If you consider a total monthly income of all members of your household and their usual total expenses, your household makes ends meet:	1)	With great difficulty
		2)	With difficulty
		3)	With some difficulty
		4)	Fairly easily
		5)	Easily
		6)	Very easily

**SOCIAL TRANSFERS**

<b>50</b>	Did you, in 2020, receive a social benefit or allowance, or compensation for housing costs (e.g., for rent, utility payment, gas supply, electricity vouchers, etc.)?	1)	Yes
		2)	No

<b>51</b>	What is the total amount of social benefits or allowances for housing costs did you receive in 2020?	kuna
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<b>52</b>	Did you receive the support for a newborn child in 2020?	1)	Yes
		2)	No

<b>53</b>	What was the annual amount of the support for a newborn child you received in 2020?	kuna
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<b>54</b>	Did you or another member of your household receive a child allowance in 2020?	1)	Yes
		2)	No

<b>55</b>	What was the annual amount of the child allowance you received in 2020?	kuna
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<b>56</b>	Did you receive, in 2020, a guaranteed minimal support based on the decision of the Social Welfare Centre?	1)	Yes
		2)	No

**57** What was the amount of the cash support you received in 2020?

kuna

**58** Did you receive a lump-sum cash benefit for current material difficulties caused by birth of a child, death of a family member, illness, natural disasters, etc. in 2020?

1) Yes

2) No

**59** What was the amount of the lump-sum cash benefit you received in 2020?

kuna

**60** Did your household provide foster care of children and/or adults in 2020?

1) Yes

2) No

**61** What was the annual amount of the payment for fostering you received in 2020?

kuna

**62** What was the annual amount of the allowance for accommodation services and other needs of a fostered beneficiary in 2020?

kuna

**63** Which person in the household is a holder of a foster agreement?

\_\_\_\_\_ (name and surname)

### INCOME RECEIVED BY PEOPLE AGED UNDER 16

Questions 64 - 67 are to be answered by households with children aged under 16

**64** Did any of your children under 16 receive, in 2020, any gift in cash from natural persons that are not household members?

1) Yes

2) No

**65** Please, state the total annual amount of these receipts in 2020

kuna

**66** Did any of children under 16 living in your household receive, in 2020, any social transfers, such as family (military) or disability pension?

1) Yes

2) No

**67** Please, state the total annual amount of these receipts in 2020

kuna

**CASH TRANSFERS BETWEEN HOUSEHOLDS**

**68** Did you or any of your household members regularly receive money in 2020 from natural persons living in the country or abroad, who are not your household members, such as receipts from relatives, cash benefits from parents to children who are no longer their household members, etc.?

1)	Yes
2)	No

**69** Please, state the total annual amount of these receipts in 2020

kuna
------

**70** Did you or any of your household members regularly receive any alimonies, voluntary or compulsory, from the country or abroad in 2020?

1)	Yes
2)	No

**71** Please, state the total annual amount of the alimony you received in 2020

kuna
------

**72** You received the stated amount of the alimony from:

1)	Natural person who is obligated to pay alimony
2)	Social Welfare Centre

**73** Did you or any of your household members regularly give money to persons in another household, such as cash support to relatives and other persons in 2020?

1)	Yes
2)	No

**74** Please, state the total annual amount of these expenditures in 2020

kuna
------

**75** Did you or any of your household members regularly pay alimonies, voluntary or compulsory in 2020?

1)	Yes
2)	No

**76** Please, state the total annual amount of these payments for alimonies in 2020

kuna
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### INCOME FROM RENTAL OF A PROPERTY OR LAND

**77** Did your household rent a dwelling, apartments, rooms or land in 2020?

- |    |   |
|----|---|
| 1) | Yes, the property was rented for a fee    |
| 2) | No, the property was rented without a fee |
| 3) | No  |

**78** If you subtract all renting-related costs, such as maintenance, repairs etc., what was the annual amount of the property income you generated in 2020?

kuna

**79** Did you pay property income tax in 2020?

- |    |     |
|----|-----|
| 1) | Yes |
| 2) | No  |

**80** Please, state the amount of paid property income tax

kuna

**81** Did you or your household members rent business premises, vehicles or equipment in 2020?

- |    |     |
|----|-----|
| 1) | Yes |
| 2) | No  |

**82** If you subtract all renting-related costs, such as maintenance, repairs, tax payments etc., what was the annual amount of the property income you generated by renting of business premises, vehicles or equipment in 2020?

kuna

**83** Did you pay property income tax for this kind of renting in 2020?

- |    |     |
|----|-----|
| 1) | Yes |
| 2) | No  |

**84** What was the annual amount of paid property income tax for renting business premises, vehicles or equipment in 2020?

kuna

**85** Did you pay a tax for renting summer houses in 2020?

- |    |     |
|----|-----|
| 1) | Yes |
| 2) | No  |

**86** What was the annual amount of paid property income tax for renting summer houses in 2020?

kuna

**87** Did you pay a tax for renting road motor vehicles in 2020?

- |    |     |
|----|-----|
| 1) | Yes |
| 2) | No  |

**88** What was the annual amount of paid property income tax for renting road motor vehicles in 2020?

kuna

**89** Did you pay a tax for renting vessels in 2020?

- |    |     |
|----|-----|
| 1) | Yes |
| 2) | No  |

**90** What was the annual amount of paid property income tax for renting vessels in 2020?

kuna

**AGRICULTURAL INCOME**

<b>91</b>	Was your household engaged in agriculture, fisheries or forestry for commercial purposes in 2020?	1)	Yes
		2)	No

<b>92</b>	How many household members aged over 16 worked or helped on agricultural holding (fisheries, hunting, forestry) in 2020?	
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<b>93</b>	What was the annual amount of agricultural income (fisheries, hunting or forestry) generated by the household in 2020?	kuna
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<b>94</b>	What was the value of food and beverages you produced on your house plot, in your garden or on agricultural holding that you consumed on a weekly basis in your household?	kuna
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<b>95</b>	Did you pay a tax for generated agricultural income (fisheries, hunting or forestry)?	1)	Yes
		2)	No

<b>96</b>	What was the annual amount of paid agricultural income tax in 2020?	kuna
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<b>97</b>	Did you pay any social contributions for your household members in 2020?	1)	Yes
		2)	No

<b>98</b>	Which of the listed contributions did you pay for your household members engaged in agricultural activities in 2020? Please circle the number in front of the answer (you can circle more than one answer).	1)	Legal/mandatory contributions paid by the employer covering health insurance, employment, injuries at workplace and occupational diseases
		2)	Pension insurance
		3)	Private, voluntary health insurance
		4)	Life insurance
		5)	Other contributions

<b>99</b>	What were the other contributions you paid in 2020? (enter the title)	
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<b>100</b>	What was the total annual amount of legal/mandatory contributions for health insurance, employment, injuries at working place and occupational diseases that you paid in 2020 for your household members engaged in agricultural activity?	kuna
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<b>101</b>	What was the total annual amount of pension insurance contributions that you paid in 2020 for your household members engaged in agricultural activity?	kuna
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<b>102</b>	What was the total annual amount of the mentioned voluntary contributions (answers 3, 4, 5 to question 98) that you paid in 2020 for your household members engaged in agricultural activity?	kuna
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<b>103</b>	If in the previous questions about contributions you did not know the individual amounts of contributions paid, could you state the total annual amount of all contributions you paid in 2020 for all members of your household engaged in agriculture (fisheries, hunting and forestry)?	kuna
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**104** For how many household members engaged in the agricultural activity did you pay contributions in 2020?


**105** In 2020, did you use food and beverages that you produced yourself on your household plot, garden, orchard, vineyard or collected and caught in the sea, river or forest?

1)	Yes
2)	No

**106** Assess, according to market prices, what is the average monthly value of the food and drinks you consumed in your household in 2020

	kuna
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### CHANGE IN THE HOUSEHOLD INCOME

**107** Did the amount of your income change in the past 12 months in your household?

1)	Income increased
2)	Income remained more or less the same
3)	Income decreased

**108** What was the main reason for the increase in your household's income?

1)	Indexation/re-evaluation of wages in your company
2)	Increased working time, wage or salary (same job)
3)	Returning to job market after illness, parenthood, parental leave, unpaid leave, etc.
4)	Starting job or transfer to a higher paying job
5)	Change in household composition (arrival of a new household member who contributes with his income or departure of an existing household member who had no income)
6)	Increase in social benefits
7)	Other

**109** What was the main reason for the decrease in your household's income?

1)	Reduced working time, wage or salary (same job), including self-employment (involuntary)
2)	Going on sick leave, maternity/parental leave, etc.
3)	Change of job, transfer to a lower paying job
4)	Job loss or termination of employment due to company closure
5)	Became unable to work because of illness or disability
6)	Divorce or termination of partnership or other changes in household composition
7)	Retirement
8)	Decrease in social benefits
9)	Other

**110** Do you expect changes in your household's income in the next 12 months?

1)	Income will be increased
2)	Income will remain more or less the same
3)	Income will be decreased

**COVID-19 MODUL: IMPACT OF THE COVID-19 CRISIS ON HOUSEHOLDS AND LIVING CONDITIONS**

**111** Was a change in income an outcome of the COVID-19 crisis?

1)	Yes
2)	No

**112** Did your household receive any kind of financial support (government funded) as a form of support for the COVID-19 related crisis during 2020?

1)	Yes
2)	No

**113** Did your household receive a certain type of financial support for overcoming the COVID-19 crisis, such as financial compensation for housing or financial compensation for families with children, etc.?

1)	Yes
2)	No

**114** What was the amount of that support in 2020?

kuna

**115** Did your household receive cash support received by employed persons in companies or crafts whose work was temporary suspended or working time shortened, or cash support if there was a dismissal of workers in companies or trades, all as an outcome of the COVID-19 crisis?

1)	Yes
2)	No

**116** What was the amount of that support in 2020?

kuna

**117** Did your household receive any type of cash support for the self-employed (company owners, craftsmen, owners of family farms, free lances) during the COVID-19 crisis?

1)	Yes
2)	No

**118** What was the amount of that support in 2020?

kuna

**119** Did your household receive any cash support that was not mentioned?

1)	Yes
2)	No

**120** What was the amount of that support in 2020?

kuna

## HOUSEHOLD INTERVIEWING METHOD

**121** Mark household interviewing method

- |    |   |
|----|---|
| 1) | Computer-assisted personal interviewing (CAPI)  |
| 2) | Computer-assisted telephone interviewing (CATI) |

**THE END**

**A16** THE END OF THE INTERVIEW:

**Date:**    *day*         *month*   

**Time:**    *hour*         *minute*   

**A17** Telephone number of the interviewed household

- 1 \_\_\_\_\_ (enter the telephone number)
- 2 The household refuses to give the telephone number
- 3 The household does not have a telephone

**IP1** INTERVIEWER'S CODE:

**IP2** CONTROLLER'S CODE:

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>