

# Living Conditions Survey ECV(21). 2024

## Individual Questionnaire

### ID

#### 1. Household identification

Province	_____			
Home/Dwelling	_____			
Branch/Household Order Number	_____			

**Interviewer:** Before starting to fill in this questionnaire, please read the informant the following introduction : "Next I am going to ask you some questions regarding your work, income, health, studies, etc. " .

#### 2. Identification of the person to whom the information refers

Name, surnames and order number of the person to whom the information refers

Mr./Mrs.....  
 .....  
 .....  
 .....| | |

#### Nature, characteristics and purpose

The **Living Conditions Survey** is a source of statistical information for the countries of the European Union, designed with the aim of obtaining comparative data on income and living conditions of private households.

The importance of these objectives has led us to request your important and valuable collaboration.

#### Legislation

##### Statistical Secrecy

Personal data obtained by the statistical services will be subject to protection and will be covered by statistical secrecy (Article 13.1 of the Law on Public Statistical Function [LFEP, for its acronym in Spanish] of May 9, 1989). All statistical personnel will have the obligation to preserve statistical secrecy (article 17.1 of the LFEP).

##### Obligation of providing data

Laws 4/1990 and 13/1996 establish **the obligation to provide data requested** for the compilation of this statistic.

The statistical services may request data from individuals and legal entities, domestic or foreign, resident in Spain (art. 10.1 of the LPSF).

All natural and legal persons that provide data must answer the questions required by statistical services in due form and **truthfully, accurately, completely and within the deadlines** (art. 10.2 of the LFEP).

To ensure compliance with these regulations, the LFEP (art. 48) grants sanctioning capacity to the INE.

## A,B,C,D,E. Activity

### A. Current main activity

(PL032, PL145) PA1. In what of the following situations are you currently? (If you were in several, indicate only the one that you consider to be the principal.)

Working (salaried, employer, independent worker or family help):

Full time \_\_\_\_\_ ☐ 1

Part time \_\_\_\_\_ ☐ 2

Unemployed \_\_\_\_\_ ☐ 3

Retired, Retired, Early Retirement or have closed a business \_\_\_\_\_ ☐ 4

Permanently unable to work \_\_\_\_\_ ☐ 5

Student, school, or in training \_\_\_\_\_ ☐ 6

Dedicated to housework, caring for children or other people \_\_\_\_\_ ☐ 7

Other kind of economic inactivity \_\_\_\_\_ ☐ 8

go to section C

### B. Characteristics of the last main job

(PL016) PB1. Have you ever done any work, either as an employee, on your own or as a family aid? (If you have ever worked, refer to your last job.)

Yes, in a job that lasted less than three months \_\_\_\_\_ ☐ 1

Yes, in a job that lasted three months or more \_\_\_\_\_ ☐ 2

No \_\_\_\_\_ ☐ 3 → go to section E

(PL051B) PB2. What was your occupation, profession or trade in your main job?

(Need as much as possible, for example: trade dependent, auto mechanic, turner, construction pawn, crane operator, etc.)

.....  
.....  
.....(Code) | | |

(PL111B) PB3. From the following types of activity which I shall now list, please tell me which one corresponds to the workplace where you worked in your main job.

(Show the interviewee the NACE list of Economic Activities, so that they can choose and note down the code).

.....  
.....  
..... (Code) | | |

(PL040B) PB4. What was your professional situation in your main job?

Employer \_\_\_\_\_ ☐ 1

Entrepreneur without employees or independent worker \_\_\_\_\_ ☐ 2

→ go to section E

Salaried \_\_\_\_\_ ☐ 3

Familiar help \_\_\_\_\_ ☐ 4 → go to section E

### C. Characteristics of current main job

**Interviewer**, read to the interviewee: 'Next I am going to ask you questions that refer only to your current main job. (It is considered 'main': the job that takes up the most time).

(PL051A) **PC1. What was your occupation, profession or trade in your main job?**  
(Need as much as possible, for example: trade dependent, auto mechanic, turner, construction pawn, crane operator, etc.)

.....  
.....  
..... (Code) I \_ I \_ I

(PL111A) **PC2. Of the following types of activity that I am going to list, tell me which one corresponds to the establishment on which you depend. (Show the interviewee the NACE list of Economic Activities, so that they can choose and note down the code).**

**Interviewer:** it is important that this question is coded during the field interview if the answer is code 97 'Activities of households as employers of domestic staff' because it influences the flow of the questionnaire)

.....  
.....  
..... (Code) I \_ I \_ I

(PL040A) **PC3. Which of the following describes your professional status?**

Employer \_\_\_\_\_ ☐ 1 } → go to  
question PC6  
Business person without workers or independent worker \_\_\_\_\_ ☐ 2  
Salaried \_\_\_\_\_ ☐ 3  
Familiar help \_\_\_\_\_ ☐ 4 → go to question PC6

(PL141) **PC4. How long is your contract on that main job of yours?**

Written contract of indefinite duration (permanent or fixed discontinuous) \_\_\_\_\_ ☐ 1  
Verbal contract of indefinite duration (permanent or fixed discontinuous) \_\_\_\_\_ ☐ 2  
Eventual or temporary written contract \_\_\_\_\_ ☐ 3  
Occasional or temporary verbal contract \_\_\_\_\_ ☐ 4  
Without contract \_\_\_\_\_ ☐ 5

(PL150) **PC5. Do you supervise or coordinate the work of any employee of the company or organization where you work?**

YES \_\_\_\_\_ ☐ 1  
NO \_\_\_\_\_ ☐ 6

(PL060) **PC6. How many hours per week do you usually spend on that job?** (If you are an employee, include the extra hours you usually do. (If the work is irregular, indicate the average number of weekly hours worked in the last four weeks.

(If you do not know, due to the work being very irregular and therefore impossible to determine the average number of hours, fill in box 1).

Number of hours \_\_\_\_\_ | \_ | \_ | \_ |

You do not know the number of weekly hours because it is a very irregular job ☐ 1

## D. Other job

(PL100) PD1. Do you have any other job, other than your main job?

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → go to section E

(PL100) PD2. How many hours per week do you usually dedicate to these additional jobs? (If you have done several additional jobs, compute the hours worked on all of them, if the job is irregular, indicate the average figure for the last four weeks)

Number of hours per week in additional jobs \_\_\_\_\_ | \_ | \_ |

## E. Activity situation in 2023 and previous years

**Interviewer, read to the interviewee:** 'Next I'm going to ask you about where you were in 2023 and where you are this year. The situations considered are:

Status codes in the activity

Salaried full-time \_\_\_\_\_ 1

Salaried part-time \_\_\_\_\_ 2

Full-time self-employed (including family help) \_\_\_\_\_ 3

Part-time freelance worker (including helping the family) \_\_\_\_\_ 4

Standing \_\_\_\_\_ 5

Student, student, or in training \_\_\_\_\_ 6

Retired or Early Retired \_\_\_\_\_ 7

Permanently unable to work \_\_\_\_\_ 8

Dedicated to housework, caring for children or others \_\_\_\_\_ 9

Other type of economic inactivity \_\_\_\_\_ 10

(PL073-76, PL080, PL085-90, PL211A-L) PE1. Out of these situations, were you always in the same one in 2023?

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → pasar a pregunta PE3

(PL073-76, PL080, PL085-90, PL211A-L) PE2. What was this situation?

.....  
.....

| \_ | \_ | → go to question PE4

(PL073-76, PL080, PL085-90, PL211A-L) PE3. If you did not always have the same, tell me the situation for each month:

1.	January 2023	_____	_ _
2.	February 2023	_____	_ _
3.	March 2023	_____	_ _
4.	April 2023	_____	_ _
5.	May 2023	_____	_ _
6.	June 2023	_____	_ _
7.	July 2023	_____	_ _
8.	August 2023	_____	_ _
9.	September 2023	_____	_ _
10.	October 2023	_____	_ _
11.	November 2023	_____	_ _
12.	December 2023	_____	_ _

If the interviewee is between 16 and 74 years old, both included, continue with the filter. Otherwise, go to section F.

a) If you answered 3 in question PA1, you go on to question PE6.

b) Otherwise, and if in question PE2 a 5 has been answered or in question PE3 a 5 has been answered in some month, go to question PE5.

c) If none of the cases above apply, answer this question:

(PL271) PE4. During the last 5 years, have you ever been unemployed?

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → go to section F

(PL271) PE5. Regarding the last time, how long were you in that situation?

|\_|\_| Years |\_|\_| Months → go to section F

(PL271) PE6. How long have you been unemployed for?

|\_|\_| Years |\_|\_| Months

## F,G,H,I,J,K,L,N. Personal income in 2023

### F. General income

PF1. During 2023, have you received any income from work?

YES NO

1. Employed (salaries, salaries, etc.)? (Consider all work, even temporary or casual, or as a paid apprentice or worker under a public employment program).

☐ 1 ☐ 6

2. On your own, as an entrepreneur or independent worker? (For example: agricultural entrepreneur, subcontractor, liberal professional, etc.) ( *Interviewer* : If the

informant has a liberal profession read "Copyright is included") \_\_\_\_\_ ☐ 1 ☐ 6

**PF2. During 2023, did you receive any of the following pensions or social benefits?** (This question covers the benefits you received personally during the past year, such as Social Security benefits from SEPE–formerly INEM, professional mutual funds, etc., excluding dwelling subsidies, which are collected in the Household Questionnaire)

YES NO

1. Unemployment, ERTE, COVID-19 measures, employment stimulus or professional training

\_\_\_\_\_ ☐ 1 ☐ 6

2. Retirement, pension or benefits, or other benefits for the elderly (public pensions, private pension plans, etc.) \_\_\_\_\_  
etc.) \_\_\_\_\_ ☐ 1 ☐ 6

3. Widowhood, orphanhood or other survivor benefits \_\_\_\_\_ ☐ 1 ☐ 6

4. Family protection (maternity, childcare, elderly care, etc.) \_\_\_\_\_ ☐ 1 ☐ 6

5. Illness \_\_\_\_\_ ☐ 1 ☐ 6

6. Disability \_\_\_\_\_ ☐ 1 ☐ 6

7. Scholarships \_\_\_\_\_ ☐ 1 ☐ 6

8. Social assistance aid, minimum vital income, minimum placement income, etc. \_\_\_\_\_ ☐ 1 ☐ 6

6

9. Other benefits or aid \_\_\_\_\_ ☐ 1 ☐ 6

**If in question PF1.1 the answer is different from 1, go to section J**

**G, H, I. Income from working for others**

**G. Monetary income from working for others**

**FA Flow Control Income Account for Others: If the condition is met, go to the next block H**

**Interviewer, read to the interviewee before you start asking the following questions: 'Next I am going to ask you some questions in relation to your work as an employee.'**

**PG1. Do you know what your gross or net income was from your paid employment during the year 2023?** (The gross amount refers to the amount obtained before deducting the withholdings for taxes, social contributions -Social Security, General Civil Servants Mutual Insurance, etc.- and other similar payments.

The net amount refers to the amount received after discounting the withholdings on account for taxes, social contributions -Social Security, General Civil Servant Mutual Insurance, etc.- and other similar payments).

YES \_\_\_\_\_ ☐ 1

You do not know the amount of either \_\_\_\_\_ ☐ 6 → go to question PG3

**PG2. Indicate the annual gross, and net amount of all such work.** (If you had more than one, you can give the sum of the amounts of all of them or separately, as you find it easier)

Data	Gross Annual Amount €	Net Annual Amount €
1.1 YES/NO 1.2	_ _ _ _ _ _ _	1.3.  _ _ _ _ _ _ _
2.1 YES/NO 2.2	_ _ _ _ _ _ _	2.3.  _ _ _ _ _ _ _
3.1 YES/NO 3.2	_ _ _ _ _ _ _	3.3.  _ _ _ _ _ _ _

} go to PG4

**PG3. If you don't know this income (gross and net), could you tell me, at least approximately, what the average income from your work for others was (monthly, fortnightly...)?**

**(If you had several jobs, please, estimate an average of the income perceived for all of them).** (If you had several jobs, please estimate the average income received by all of them).

1. How often did you receive this income?

- Biweekly \_\_\_\_\_ ☐ 1
- Monthly \_\_\_\_\_ ☐ 2
- Annual \_\_\_\_\_ ☐ 3
- Other \_\_\_\_\_ ☐ 4

2. What is the gross amount for each period? \_\_\_\_\_ |\_|\_|\_|\_|\_|\_|\_| €

3. What is the net amount for each period? \_\_\_\_\_ |\_|\_|\_|\_|\_|\_|\_| €

4. How many times did the household receive this in 2023? \_\_\_\_\_ |\_|\_|

**PG4. During 2023, did you receive any of the extraordinary payments listed below:**

	YES	NO
1. Overtime hours _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
2. Commissions? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
3. Tips? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
4. Profit sharing of the company? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
5. Benefits for accepting a job in a different city from your place of residence? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
6. Payments or subsidies for holidays? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
7. Extra payments (13 or 14 monthly payments, etc.)? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
8. Other payments? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6

**If in the previous question any option has a cross in YES, continue with question PG5. Otherwise, go to section H**

**PG5. Are all these payments included in the income you provided previously?**

No, there is additional income \_\_\_\_\_ ☐ 1

Yes, they are all included \_\_\_\_\_ ☐ 6 → go to section H

**PG6. What were the gross and net annual amounts of that additional income?** (If you do not know them, indicate approximate values and, if you had more than one, you can give the sum of the amounts of all of them or separately, as it is easier)

Gross Annual Amount €	Net Annual Amount €
1.1	1.2.
2.1	2.2.
3.1	3.2.

**H. Use of company vehicles in 2023**

**PH1. During the year 2023, did your company put a vehicle (car, van, motorbike, etc.) at your disposal for private purposes?**

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → go to section I

**PH2. How did you make the vehicle available to you:**

It became your property? \_\_\_\_\_ ☐ 1 → go to question PH5

It was transferred? \_\_\_\_\_ ☐ 6

**PH3. How many months of the year 2023 was it transferred?**

Number of months \_\_\_\_\_ | | |

**PH4. Evaluate the percentage of availability of the vehicle for private purposes, during the months it was assigned that year** (If there is no restriction on use, write down 100. If there was a restriction on availability -only weekends, etc.- calculate the percentage of days in which you could dispose of the vehicle for private purposes).

Percentage \_\_\_\_\_ | | | | %

**PH5. Assess the cost, at market price, that the vehicle would currently have if it were new (including expenses and taxes).**

Amount \_\_\_\_\_ | | | | | | | €

**PH6. How old is the vehicle?**

*(Interviewer: Write 0 if seniority is less than 1 year)*

Years \_\_\_\_\_ | | |

**PH7. What is the make and model?**

1. Brand \_\_\_\_\_ | | | | | | | | | | | | | | | |

2. Model \_\_\_\_\_ | | | | | | | | | | | | | | | |



## I. Other non-monetary income from paid employment

**PI1.a. During 2023 did your company give you food vouchers, restaurant coupons or similar documents to pay for all or part of food expenses?** (Do not include diets or other reimbursements from the company for work-related expenses such as displacement due to work.)

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6→ skip to PI2a question

**PI1.b. How many vouchers did you use and what was their mean value?**

Number of vouchers in 2023 \_\_\_\_\_ | \_ | \_ | \_ |

Average value of the voucher \_\_\_\_\_ | \_ | \_ | \_ | €

**PI2.a. Did you have meals at the workplace during 2023 for free or at a reduced price?** (Do not include meal vouchers from the previous question or diets or other reimbursements from the company for work-related expenses such as displacement due to work.)

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6→ skip to PI3a question

**PI2.b. How many times did you have these meals and what is the average value covered by the company?**

Number of times in 2023 \_\_\_\_\_ | \_ | \_ | \_ |

Average value of each meal \_\_\_\_\_ | \_ | \_ | \_ | €

**PI3.a. During the year 2023 did your company provide you with services related to housing, such as gas, electricity, water, telephone or mobile phone bills, etc. at a reduced price or free of charge?** (Do not include dwelling rental costs.)

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6→ skip to PI4a question

**PI3.b. How much did it cost, approximately, the amount of these services related to dwelling?**

Amount in 2023 \_\_\_\_\_ | \_ | \_ | \_ | \_ | \_ | €

**PI4.a. During 2023 did your company provide you with other remunerations in kind, that is, non-cash (company products, low-interest loans, etc.)?** (Answer NO if they do not exceed 10 % of the total remuneration. (Do not include dwelling rental costs.)

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → go to section J

**PI4.b. What was the value of these payments in kind?**

Amount in 2023 \_\_\_\_\_ | | | | | €

**J. Income from self-employment**

***If in question PF1.2 the answer is different from 1, go to section K***

***Interviewer, read to the interviewee before you start asking the following questions: 'Now, we are going to ask you some questions about your self employment work or as an independent worker.'***

**PJ1. Did any other household member work in the same business or activity from which you received income from working for yourself?**

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → go to question PJ4

**PJ2. Who is the main person in charge that can report in the most appropriate way about that business or activity:**

Yourself? \_\_\_\_\_ ☐ 1 → go to question PJ4

Other household member? \_\_\_\_\_ ☐ 6

**PJ3. Tell me the name of the person in charge ( a menu will appear with the people in the household and the order number will be recorded).**

Order number of the main person in charge \_\_\_\_\_ | | | → go to section K

**PJ4. Do you share the business or activity with other people who aren't household members?**

No \_\_\_\_\_ ☐ 1 → go to question PJ5

Share \_\_\_\_\_ ☐ 6  
↓ go on to read the box INTERVIEWER

***Interviewer: read to the interviewee 'If you share the business or activity with other people who are not members of this household, in the following questions you must indicate only the part of the benefit received by your household'.***

**PJ5. Indicate the last annual period for which you have information on the financial results - gains or losses - of your business or activity? (If possible referred from January to December 2023).**

1. Initial month of the period \_\_\_\_\_ | | |

2. Initial year of the period \_\_\_\_\_ | | | | |

3. End month of the period \_\_\_\_\_ | | |

4. Ending year of the period \_\_\_\_\_ | | | | |

***Interviewer, reads to interviewee: 'The questions I am going to ask you next refer to that period.'***

**PJ6. Do you know the number of the benefits you obtained?** (Note that you must consider the benefits before you withdraw your money from your business that is assigned as a salary, as well as the one that you spend for personal or household expenses or savings, or for saving your business or activity, and before withdrawing goods for private consumption of your home or to give away to other households). *Benefits: Gross monthly income from the period (sales made, or charges for services rendered, operating subsidies and other income) less deductible expenses for the period (employee expenses, purchase of materials and raw materials, current expenses - rent, electricity, telephone, etc.-, financial expenses, provisions for armaments, taxes linked to productive activity).*

YES \_\_\_\_\_ ☐ 1  
NO \_\_\_\_\_ ☐ 2 → pasar a pregunta PJ8  
DIDN'T GET ANY BENEFITS. LOSSES \_\_\_\_\_ ☐ 3  
HE MADE NO PROFIT OR LOSS \_\_\_\_\_ ☐ 4 → go to question PJ9

**PJ7. What was the profit or loss before taxes and own contributions to Social Security?**

*If in question PJ4 answered that he shares the business with another person, the text appears:*  
**Interviewer:** Read to the interviewee 'If you share the business or activity with other people who are not members of this household, tell me only the part of the benefit or loss perceived by your household'

Gross profit (or loss) \_\_\_\_\_ | | | | | | | € → If there is data, go to question PJ9

**PJ8. Could you indicate, at least approximately, in which interval of the following is that benefit or that lose located?**

*If in question PJ4 answered that he shares the business with another person, the text appears:*  
**Interviewer:** Read to the interviewee 'If you share the business or activity with other people who are not members of this household, tell me only the part of the benefit or loss perceived by your household'

Up to € 5,000? \_\_\_\_\_ ☐ 1  
From 5,001 up to 10,000 euros \_\_\_\_\_ ☐ 2  
From 10,001 up to 15,000 euros \_\_\_\_\_ ☐ 3  
From 15,001 up to 20,000 euros \_\_\_\_\_ ☐ 4  
From 20,001 up to 30,000 euros \_\_\_\_\_ ☐ 5  
From 30,001 up to 50,000 euros \_\_\_\_\_ ☐ 6  
From 50,001 up to 75,000 euros \_\_\_\_\_ ☐ 7  
From 75,001 up to 100,000 euros \_\_\_\_\_ ☐ 8  
More than € 100,000? \_\_\_\_\_ ☐ 9

**PJ9. Did you make split payments?**

*(Split payments: refer to quarterly statements).*

YES \_\_\_\_\_ ☐ 1  
NO \_\_\_\_\_ ☐ 6 → pasar a pregunta PJ11

**PJ10. What was the total amount of those payments?**

Amount \_\_\_\_\_ | | | | | | | €

**PJ11. Were you hold to withholding on account of the IRPF?** (Includes withholdings from other household members who share the business or activity for which you are responsible.)

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → go to question PJ13

**PJ12. What was the total amount of these withholdings?**

Importe \_\_\_\_\_ | | | | | | | €

**PJ13. Did you contribute to Social Security or assimilated?** (The contributions of other members of the household who share the business or activity are included, as well as the amounts paid, by virtue of insurance contracts arranged with social security mutual societies, by professionals not integrated into the special Social Security regime).

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → go to section K

**PJ14. What was the total amount of these prices?**

Amount \_\_\_\_\_ | | | | | | | €

## K. Income from social benefits

*If in question PF2 any option has a cross in YES, continue with question PK1  
Otherwise, go to section L*

**Interviewer, read to the interviewee before you start asking the following questions: 'Next I am going to ask you some questions in relation to the pensions and social benefits received.'**

**PK1. Tell me for each benefit received during 2023:**

*(For each type of benefit with an affirmative answer in question PF2, a menu will appear with the specific benefits of this type. Selecting one automatically saves the code.)*

**FA Flow Control Features:** In each line after loading the feature code, if the condition is met, go to the end of the line.

CODE (Flow Control FA Performance)	Description of the benefit	How often did you preceive it? 1. Fortnightly 2. Monthly 3. Annual 4. Other	What was the usual amount in that period? €	How many times did you see it?	This amount was: 1. Before withholding? 2. After withholding? 3. No withholdings?	What was the retention? €
	..... .....	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 →Finish	
	..... .....	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 →Finish	

I _ _ _	..... .....	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	I _ _ _ I _ _ _ I	I _ _ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 →Finish	I _ _ _ I _ _ _
I _ _ _	..... .....	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	I _ _ _ I _ _ _ I	I _ _ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 →Finish	I _ _ _ I _ _ _
I _ _ _	..... .....	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	I _ _ _ I _ _ _ I	I _ _ _	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 →Finish	I _ _ _ I _ _ _

## L. Private pension schemes not related to work

**PL1. During 2023, did you personally make any contributions to private pension schemes not related to work or occupation?** (Includes private pension plans that recover the invested capital in one go, at the time the requirements of the contract are met).

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6 → go to section I

**PL2. What was the annual amount of those expenses?** (If you made contributions to more than one scheme, indicate the sum of the amounts of all of them or separately, as it is easier)

1. Amount 1 \_\_\_\_\_ I \_ \_ \_ I \_ \_ \_ I €

2. Amount 2 \_\_\_\_\_ I \_ \_ \_ I \_ \_ \_ I €

## No. Personal income tax in 2023

**PN1. In terms of personal income tax, please indicate if during 2023 you made any payments or received any rebates in relation to declarations of income for the year 2022 or previous years:**

Had to make payment \_\_\_\_\_ ☐ 1

Obtained return \_\_\_\_\_ ☐ 2

Did not make payment or return \_\_\_\_\_ ☐ 3 → go to section O

**Flow Control FA IRPF in 20xx: If the condition is met, go to section O**

**PN2. Indicate whether you made the declaration individually or jointly:**

Individual statement ☐ 1 → Tell me the amount of the payment or refund I \_ \_ \_ I \_ \_ \_ I \_ \_ \_ I € pass to O

Joint declaration ☐ 6

**PN3. Tell me the name of the person with whom you made the joint return** (A menu will come out with the people in the household and the order number will be recorded)

Order number \_\_\_\_\_ | | |

**PN4. Tell me the amount of the payment or return** *(Interviewer: enter 0 if the amount has been entered in another questionnaire)*

Importe \_\_\_\_\_ | | | | | | | €

## **O,P,Q,R,S,T,U. Other personal data**

### **O. Health**

*(PH010)* **PO1. How is his or her health in general? It is: (read the options):**

Very good \_\_\_\_\_ ☐ 1

Good \_\_\_\_\_ ☐ 2

Regular \_\_\_\_\_ ☐ 3

Bad \_\_\_\_\_ ☐ 4

Very bad \_\_\_\_\_ ☐ 5

*(PH020)* **PO2. Do you have a chronic disease or health problems? Chronic refers to diseases or health problems that have lasted or are expected to last at least 6 months.**

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6

*(PH030)* **PO3.a. Are you limited, due to a health problem, in doing activities that people usually do? Would you say you are... (read the options)**

Severely limited \_\_\_\_\_ ☐ 1

Limited but not severely \_\_\_\_\_ ☐ 2

Not limited \_\_\_\_\_ ☐ 3 → go to question PP1.a

*(PH030)* **PO3.b. Have you felt constrained for at least the last six months?**

YES \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 6

### **P. Access to health care**

**(PH040) PP1.a. During the last 12 months, have you ever really needed medical care (except dentist) for yourself?**

---

Yes, at least on one occasion you have needed medical assistance ☐ 1

No, on no occasion have you needed medical assistance ☐ 6 → go to question PP2a

---

**(PH040) PP1.b. Have you received such medical assistance every time you really needed it?**

---

Yes, I have always received medical assistance whenever I have needed it ☐ 1 → go to question PP2a

No, on at least one occasion you have not received medical assistance ☐ 6

---

**(PH050) PP1.c. What was the main cause for not receiving said assistance? (read the options):**

---

I couldn't afford it (too expensive or not covered by insurance) ☐ 1

I was on the waiting list or did not have the flyer ☐ 2

They did not have time due to work, taking care of other children or other people ☐ 3

Too far to travel or no means of transportation ☐ 4

Fear of doctors, hospitals, medical examinations or treatment ☐ 5

I wanted to wait and see if the problem got better on its own ☐ 6

I didn't know any good doctors ☐ 7

Other reasons ☐ 8

---

**(PH060) PP2.a. During the past 12 months, have you ever really needed dental care for yourself?**

---

Yes, at least once you have needed dental assistance ☐ 1

No, I have never needed dental assistance ☐ 6 → go to section Q

---

**(PH060) PP2.b. Have you received such dental care every time you really needed it?**

---

Yes, I have always received dental assistance whenever I have needed it ☐ 1 → go to Q

No, on at least one occasion you have not received dental care ☐ 6

---

**(PH070) PP2.c. What was the main cause for not receiving said dental assistance? (read the options):**

---

I could not afford it (too expensive or not covered by insurance) ☐ 1

I was on the waiting list or did not have the flyer ☐ 2

They did not have time due to work, taking care of other children or other people ☐ 3

Too far to travel or no means of transportation ☐ 4

- Fear of the dentist, hospitals, medical examinations or treatment \_\_\_\_\_ ☐ 5
- I wanted to wait and see if the problem got better on its own \_\_\_\_\_ ☐ 6
- I did not know any good dentist \_\_\_\_\_ ☐ 7
- Other reasons \_\_\_\_\_ ☐ 8
- 

## Q. Biographical data

**(PB230) PQ1. Was your father born in Spain?**

---

- YES \_\_\_\_\_ ☐ 1 → go to question PQ3
- NO \_\_\_\_\_ ☐ 6
- 

**(PB230) PQ2. In which country was your father born?**

---

.....  
 ..... (Code) | \_ | \_ | \_ |

---

**(PB240) PQ3. Was your mother born in Spain?**

---

- YES \_\_\_\_\_ ☐ 1 → go to question PQ5
- NO \_\_\_\_\_ ☐ 6
- 

**(PB240) PQ4. In which country was your mother born?**

---

.....  
 ..... (Code) | \_ | \_ | \_ |

---

**(PB190) PQ5. What is your current legal marital status?** (Refers to the current legal situation and not to the factual one. If, for example, you are separated only in fact, you must indicate married).

---

- Single \_\_\_\_\_ ☐ 1
- Married \_\_\_\_\_ ☐ 2
- Separate \_\_\_\_\_ ☐ 3
- Widower \_\_\_\_\_ ☐ 4
- Divorced \_\_\_\_\_ ☐ 5
- 

## R. Education

**(PE010) PR1. Are you currently taking any type of studies or training included in the official curricula?**

---

- YES \_\_\_\_\_ ☐ 1



NO \_\_\_\_\_ ☐ 6→ go to question PR3

(PE021) **PR2. What kind of official studies are you doing?** (If you make more than one, please indicate the most important one)

*(Interviewer, if necessary, tell him to specify as much as possible, for example: 4th year of GCSE, 3rd year of Degree in Physics, 1st course of University Master in Business Administration and Management, 1st year of a training cycle of Professional Training of Medium Degree, etc.)*

.....  
 ..... (Code) | | |

(PE041) **PR3. What is the highest level of studies that you have completed?**

*(Interviewer, if necessary, please specify as much as possible, for example: you have attended school for less than five years; Sixth course of High schooling and Revalidation, old system; three complete courses in Economics and Business Studies; Doctorate in Social Sciences; FPI industrial officer, etc.)*

.....  
 ..... (Code) | | |

## S. Professional experience

**PS1. Excluding temporary work such as the one made during vacation time or very occasional when you were young, have you ever worked on a regular basis?** *(This question will be filled in automatically if sufficient information is available.)*

YES \_\_\_\_\_ ☐ 1  
 NO \_\_\_\_\_ ☐ 6→ go to section N

(PL200) **PS2. Since then, how many years have you been working?** (Also include periods spent as an apprentice or in training under a public employment or family assistance program.) *(Interviewer, write 0 if it is less than a year).*

Years \_\_\_\_\_ | | |

## T. Basic needs, social and leisure activities and durable goods

(PD020, PD030, PD050, PD060, PD070, PD080) **PT1. At present,**

No, for other reasons	Not because		
	can	not	
	Yes	afford	it
1. Can you replace damaged clothes with new ones? (other than second hand)? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
2. Do you have two pairs of shoes in good condition suitable for daily activities (or a suitable pair for any time of the year)? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

3. Do you get together with friends and/or family to eat or drink something at least once a month? \_\_\_\_\_ ☐1 ☐2 ☐3
4. Do you regularly participate in leisure activities such as such as sports, movies, concerts, etc.? \_\_\_\_\_ ☐1 ☐2 ☐3
5. Do you spend a small amount of money on yourself same every week? \_\_\_\_\_ ☐1 ☐2 ☐3
6. Do you have an internet connection (fixed or mobile) for personal home use? \_\_\_\_\_ ☐1 ☐2 ☐3
- 

## U.Wellness

*(PW010)* **PU1. What is your overall level of satisfaction with your life, at present?** (Use the scale from 0 to 10, where 0 means not at all satisfied and 10 means completely satisfied).

---

Not at all Fully  
satisfied satisfied

☐0 ☐1 ☐2 ☐3 ☐4 ☐5 ☐6 ☐7 ☐8 ☐9  
☐10

---

*(PW191)* **PU2. Would you say you can trust most people?** (Use the scale from 0 to 10, where 0 means that you generally don't trust anyone and 10 means that you think you can trust most people.)

---

Don't trust anyone Trust the majority of persons

☐0 ☐1 ☐2 ☐3 ☐4 ☐5 ☐6 ☐7 ☐8 ☐9  
☐10

---

## MA. Additional module: Access to services

*(PC280)* **PMA1. During the last 12 months, how often did you use public transport (bus, metro, train, tram, etc.)?:**

---

Daily \_\_\_\_\_ ☐1

Every week, but not every day \_\_\_\_\_ ☐2 → go to FILTER PMA3

Every month, but not every week \_\_\_\_\_ ☐3

Less than once per month \_\_\_\_\_ ☐4

Never \_\_\_\_\_ ☐5

---

*(PC290)* **PMA2. What is the main reason you have not used public transport or have not used it more often?:**

---

It is too expensive \_\_\_\_\_ ☐1

There is no public transport in the area \_\_\_\_\_ ☐2

Bus station or bus stop is difficult to access \_\_\_\_\_ ☐3

Frequency is too low or there is an inadequate schedule \_\_\_\_\_ ☐4

Travel time too long \_\_\_\_\_ ☐5

Safety worries \_\_\_\_\_ ☐6

Other reasons \_\_\_\_\_ ☐7

**FILTER PMA3:**

- If in question PA1 (PL032) the answer is 1 or 2, → go to question PMA3
- Otherwise →, go to question PMA5.a

**(PC310) PMA3. If you lost your main current job, would you be entitled to unemployment benefits or an allowance?:**

Yes \_\_\_\_\_ ☐1

No \_\_\_\_\_ ☐2

Does not know \_\_\_\_\_ ☐3

**(PC320) PMA4. If you were ill or injured and unable to work, would you be entitled to sickness benefits?:**

Yes \_\_\_\_\_ ☐1

No \_\_\_\_\_ ☐2

Does not know \_\_\_\_\_ ☐3

**Interviewer, read to the interviewee: 'Next I am going to ask you some questions about whether you have felt that you have been discriminated in certain situations because you have not been allowed to do something, or have been mistreated, or have been made to feel inferior'.**

**(PC330) PMA5.a. During the last 12 months, have you felt discriminated against when contacting (in person, by phone or by email) any government office or public service (including health centres, social services and employment offices)?:**

Yes \_\_\_\_\_ ☐1

No \_\_\_\_\_ ☐2

question PMA6.a  
I have not been in contact with any administrative office  
or public service \_\_\_\_\_ ☐3

} → go to

**(PC330) PMA5.b. What was the main reason you felt you were discriminated?:**

Age \_\_\_\_\_ ☐1

Sex \_\_\_\_\_ ☐ 2  
Disability or long-term health problem \_\_\_\_\_ ☐ 3  
Country of origin \_\_\_\_\_ ☐ 4  
Ethnic origin \_\_\_\_\_ ☐ 5  
Religion \_\_\_\_\_ ☐ 6  
Sexual orientation (lesbian, gay, bisexual...) \_\_\_\_\_ ☐ 7  
Gender identity (transsexual, non-binary...) \_\_\_\_\_ ☐ 8  
Other reasons (income level, profession, level of education, physical appearance, etc.) \_\_\_\_\_ ☐ 9

---

**(PC340) PMA6.a. In the last 5 years, have you felt discriminated against when trying to rent or buy a house?:**

---

Yes \_\_\_\_\_ ☐ 1  
No \_\_\_\_\_ ☐ 2 } → go to  
question PMA7.a  
I have not tried to rent or buy a house in the last 5 years \_\_\_\_\_ ☐ 3

---

**(PC340) PMA6.b. What was the main reason you felt you were discriminated?:**

---

Age \_\_\_\_\_ ☐ 1  
Sex \_\_\_\_\_ ☐ 2  
Disability or long-term health problem \_\_\_\_\_ ☐ 3  
Country of origin \_\_\_\_\_ ☐ 4  
Ethnic origin \_\_\_\_\_ ☐ 5  
Religion \_\_\_\_\_ ☐ 6  
Sexual orientation (lesbian, gay, bisexual...) \_\_\_\_\_ ☐ 7  
Gender identity (transsexual, non-binary...) \_\_\_\_\_ ☐ 8  
Other reasons (income level, profession, level of education, physical appearance, etc.) \_\_\_\_\_ ☐ 9

---

**(PC350) PMA7.a. During the last 12 months, have you felt discriminated against when in contact with someone in an educational institution (school, college, university), either as a parent/guardian or as a student?:**

---

Yes \_\_\_\_\_ ☐ 1  
No \_\_\_\_\_ ☐ 2 } → go to  
question PMA8.a  
I have not been in contact with anyone from an educational institution \_\_\_\_\_ ☐ 3

---

**(PC350) PMA7.b. What was the main reason you felt you were discriminated?:**

Age \_\_\_\_\_ ☐ 1

Sex \_\_\_\_\_ ☐ 2

Disability or long-term health problem \_\_\_\_\_ ☐ 3

Country of origin \_\_\_\_\_ ☐ 4

Ethnic origin \_\_\_\_\_ ☐ 5

Religion \_\_\_\_\_ ☐ 6

Sexual orientation (lesbian, gay, bisexual...) \_\_\_\_\_ ☐ 7

Gender identity (transsexual, non-binary...) \_\_\_\_\_ ☐ 8

Other reasons (income level, profession, level of education, physical appearance, etc.) \_\_\_\_\_ ☐ 9

**(PC360) PMA8.a. During the last 12 months, have you felt discriminated against in any public space, e.g. in a shop, café or restaurant, in the use of leisure or sports facilities, etc.?:**

Yes \_\_\_\_\_ ☐ 1

NO \_\_\_\_\_ ☐ 2 → END

**(PC360) PMA8.b. What was the main reason you felt you were discriminated?:**

Age \_\_\_\_\_ ☐ 1

Sex \_\_\_\_\_ ☐ 2

Disability or long-term health problem \_\_\_\_\_ ☐ 3

Country of origin \_\_\_\_\_ ☐ 4

Ethnic origin \_\_\_\_\_ ☐ 5

Religion \_\_\_\_\_ ☐ 6

Sexual orientation (lesbian, gay, bisexual...) \_\_\_\_\_ ☐ 7

Gender identity (transsexual, non-binary...) \_\_\_\_\_ ☐ 8

Other reasons (income level, profession, level of education, physical appearance, etc.) \_\_\_\_\_ ☐ 9

**(PB270) 'Interviewer: write down the type of interview for this Individual Questionnaire'**

1.- Personal interview with the subject (PAPI) \_\_\_\_\_ ☐ 1

2.- Personal interview with the informant assisted by computer (CAPI) \_\_\_\_\_ ☐ 2

- 3.- Telephone interview with the informant (CATI) \_\_\_\_\_ ☐ 3
- 4.- Interview conducted by the subject over the internet (CAWI) \_\_\_\_\_ ☐ 4
- 5.- Other \_\_\_\_\_ ☐ 5

**(PB260) 'Interviewer: write down if the information has been provided by the person to whom said information refers or by a different one'**

- 1.- Information provided by the person to whom the information refers \_\_\_\_\_ ☐ 1
- 2.- Information provided by another person ("proxy") \_\_\_\_\_ ☐ 2

**(PB265) Interviewer:** *If option 2 is checked, confirm it and write down the order number of the household member who provided the information on this individual questionnaire I I I. If you are a non-household member, enter 99.*