

Australia
ISSP 2007 – Leisure Time and Sports
Questionnaire



HOW TO FILL OUT THIS QUESTIONNAIRE

1. To answer most of the questions you only need to put a cross in the box that is closest to your view - there are no right or wrong answers. We just want your opinions.

Here is an example:

Do you think the government should spend more or less on education?

Spend more on education

Spend less on education

Can't choose

If you think the government should spend more on education, you would cross the first box as shown.

2. Sometimes you are asked to write in an answer - in that case, simply put your answer in the space provided.

Here is an example:

How long have you lived in this area?

Number of years

3. ① Sometimes additional information that will help you answer the question will appear next to this symbol.

Please read each question carefully. Remember, there are no right or wrong answers - we just want to know your own personal opinions.



A8. In the last 12 months, how many nights altogether did you stay away from home for holidays or social visits?

I was not away

1 - 5 nights

6 - 10 nights

11 - 20 nights

21 - 30 nights

More than 30 nights

Can't choose

A9. In the last 12 months, how many days of leave from your work, if any, did you take altogether?

ⓐ Do not include maternity or sick leave or similar types of leave

None

1 - 5 days

6 - 10 days

11 - 20 days

21 - 30 days

More than 30 days

Can't choose

I do not work

A10. What sport or physical activity do you take part in most frequently?

ⓐ If you do not take part in any sport or physical activity, please cross the box provided below

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

I do not take part in any sport or physical activity



Now, some questions about your social involvement.

A17. In the last 12 months, how often have you participated in the activities of one of the following associations or groups?

	At least once a week	At least once a month	Several times	Once or twice	Never
A sports association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A cultural association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A church or other religious organisation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A community-service or civic association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A political party or organisation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A18. Generally speaking, would you say that people can be trusted or that you can't be too careful in dealing with people?

Please cross one box only

People can almost always be trusted

People can usually be trusted

You usually can't be too careful in dealing with people

You almost always can't be too careful in dealing with people

Can't choose

A19. How interested would you say you personally are in politics?

Please cross one box only

Very interested

Fairly interested

Not very interested

Not at all interested

Can't choose

Now, some questions about your personal situation.

A20. To what extent do the following conditions prevent you from doing the free time activities you would like to do?

	Very much	To a large extent	To some extent	Not at all	Can't choose
Lack of facilities nearby	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of money	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal health, age or disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Need to take care of someone (elderly, children ...)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Section B - Crime and Criminal Justice

B1. How important are the following in informing your views of crime trends and the criminal justice system?

	Very important	Fairly important	Not very important	Not at all important
TV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newspapers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B2. How would you rate the following problems in your local area?

	A very big problem	A fairly big problem	Not a very big problem	Not a problem at all
Rubbish and litter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Graffiti on footpaths and walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsupervised groups of young people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People drunk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People dealing illicit drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B3. How worried are you that the following will occur to you?

	Very worried	Fairly worried	Not very worried	Not worried at all
Being physically attacked at home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being physically attacked on the street or other public space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Being sexually assaulted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having your home/place of residence being broken into	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having your identity stolen via the Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having your credit card stolen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having your credit card details used illegally via the Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B4. How much confidence do you have in the police...

	A great deal of confidence	Quite a lot of confidence	Not very much confidence	None at all
to solve crime?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
to prevent crime?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
to respond quickly to crime?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
to act fairly when dealing with people?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



B5. Have you had any contact with the police in the past year?

Yes

No **Skip to B7**

B6. If yes, what kind of contact?

Cross all that apply

Random breath test

Reporting a crime

Traffic infringement

Being a suspect in a crime

Being a victim of a crime

Calling police for assistance

Other

B7. Have you had any contact with the criminal courts (magistrates, district or higher courts) in the past year?

Yes

No

B8. How much confidence do you have in the criminal courts...

	A great deal of confidence	-----	Quite a lot of confidence	-----	Not very much confidence	-----	None at all
to have regard for defendants' rights?	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>
to have regard for victims' rights?	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>
to deal with matters quickly?	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>
to deal with matters fairly?	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>

B9. How much confidence do you have in prisons...

	A great deal of confidence	-----	Quite a lot of confidence	-----	Not very much confidence	-----	None at all
to rehabilitate prisoners?	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>
to act as a form of punishment?	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>
to deter future offending?	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>
to teach practical skills to prisoners?	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>	-----	<input type="checkbox"/>



B10. Do you think that the level of crime in Australia has changed over the past 2 years?

A lot more crime

A little more crime

About the same

A little less crime

A lot less crime

Don't know

The following questions ask you to give an answer out of 100. If you are not sure about the number, please give your best guess.

B11. Of every 100 crimes recorded by the police, roughly what number do you think involve VIOLENCE or the THREAT of violence? (0-100)

B12. Of every 100 people charged with a violent crime and brought to court, roughly what number do you think end up convicted? (0-100)

B13. Now I would like you to think about the kinds of sentence that are imposed for assault. Out of every 100 men aged 18 or over who are CONVICTED of ASSAULT, how many do you think are sent to prison? (0-100)

B14. Now turning to home burglary. Out of every 100 MEN aged 18 or over who are convicted of HOME BURGLARY, how many do you think are sent to prison? (0-100)



Section D - Magistrates Court

D1. Have you been present at a court proceeding in any capacity within the past decade or so?

Yes, only once

Yes, more than once

No

Don't know

D2. Please say whether you agree or disagree with each of these statements.

Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree

The work of judges and magistrates is important to the community ----- ----- ----- -----

Courts should emphasise solving social problems more than punishing offenders ----- ----- ----- -----

D3. How important do you think the following qualities/skills are for the work of judges and magistrates?

Essential Very important Important Somewhat important Not important

Impartiality ----- ----- ----- -----

Legal knowledge ----- ----- ----- -----

Diligence/hard work ----- ----- ----- -----

Compassion ----- ----- ----- -----

General life experience ----- ----- ----- -----

Section E - Industrial Relations

E1. In 2006, the Federal government introduced a new Industrial Relations system called WorkChoices. How much do you feel you know about this workplace relations system?

I know a lot about the changes

I know something about the changes

I don't know much about the changes

I don't know anything about the changes



E2. Still thinking about this workplace relations system, do you approve or disapprove of the reforms?

Strongly approve

Approve

Neither approve nor disapprove

Disapprove

Strongly disapprove

Can't choose

E3. Here are some statements about economic policy in Australia today. Please tell us how much you agree or disagree with each of the following statements.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
Award wages are the best way of paying workers and setting conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There should be a law to protect all workers in Australia against unfair dismissal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A lower minimum wage is the best way to solve unemployment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unions should have less say in how wages and conditions are set	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E4. How much do you agree or disagree with each of the following statements?

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
Unions are active in my workplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employees and employers should be able to negotiate pay and conditions directly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individual contracts favour the employer over the employee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section F - Place of Residence

Here is a list of questions about your place of residence.

F1. Do you live in a residential housing development...

	Yes	No
to which public access is restricted by walls or fences?	<input type="checkbox"/>	<input type="checkbox"/>
that has a special entry system such as entry codes or key cards?	<input type="checkbox"/>	<input type="checkbox"/>
that is guarded by security personnel?	<input type="checkbox"/>	<input type="checkbox"/>
that legally requires residents to abide by a common code of conduct?	<input type="checkbox"/>	<input type="checkbox"/>



F2. In addition to your primary place of residence, do you own an additional residence?

①Please include second homes, rental or investment properties, holiday homes or shacks, but NOT farms, business premises, caravans, mobile homes, park homes or house boats.

No Skip to G1
Yes

F3. How many additional residences do you own?

Additional residences

F4. For your primary additional residence, is it...

owned outright
mortgaged and negatively geared
mortgaged but not negatively geared
other financial arrangement

F5. For your secondary additional residence, is it...

I do not own a secondary additional residence
owned outright
mortgaged and negatively geared
mortgaged but not negatively geared
other financial arrangement



Section H - Government Regulation

H1. How important is it for governments to regulate the following:

	Very important	Fairly important	Not very important	Not at all important
Advertising aimed at selling unhealthy food to children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Product placement in TV shows (where advertisers pay to have their products used in TV shows)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone marketing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone surveys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using children in sexually suggestive advertisements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section I - Homelessness

I1. Thinking about homelessness, please say whether you strongly agree, agree, disagree or strongly disagree with each of these statements.

The reason people become homeless is...

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
poor decision making, lack of effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
shortage of affordable housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
mental illness, substance/alcohol abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
government failure to provide for people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
economic problems (i.e. financial hardship, unemployment)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
family breakdown (i.e. marital discord, relationship difficulties, domestic violence)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I2. How much responsibility do you think each of the following groups should have for solving homelessness?

	All responsibility	Most responsibility	Some responsibility	A little responsibility	No responsibility
Government and public services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Charities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homeless individuals and/or their families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All members of the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Section J - Loneliness

Now, a few questions about loneliness...

J1. How often do you personally experience loneliness in your life?

At least once a day	At least once a week	At least once a month	At least once a year	Less often / Never
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

J2. Loneliness has been a serious problem for me at times

Strongly agree	<input type="checkbox"/>
Agree	<input type="checkbox"/>
Disagree	<input type="checkbox"/>
Strongly disagree	<input type="checkbox"/>

J3. When you last felt lonely, how long did the feeling last?

Less than one day	<input type="checkbox"/>
At least one day	<input type="checkbox"/>
At least one week	<input type="checkbox"/>
At least one month	<input type="checkbox"/>
More than one month	<input type="checkbox"/>
Don't know	<input type="checkbox"/>
Not applicable	<input type="checkbox"/>

J4. When you last felt lonely, what was the main cause?

Relationship breakdown	<input type="checkbox"/>
Death of a loved one	<input type="checkbox"/>
Moved to a new place	<input type="checkbox"/>
Friend moved away	<input type="checkbox"/>
Other	<input type="checkbox"/>
Don't know	<input type="checkbox"/>
Not applicable	<input type="checkbox"/>



J5. I have found telephone communication to be useful during times of loneliness

Strongly agree

Agree

Disagree

Strongly disagree

Do not own a telephone

Not applicable

J6. I have found email communication to be useful during times of loneliness

Strongly agree

Agree

Disagree

Strongly disagree

Do not use email

Not applicable

J7. When you last felt lonely, which one of the following best describes how you felt?

Cross one only

A sense of loss

Isolated

Rejected

Alone

A failure

Other

Don't know

Not applicable



J8. Who have you most often turned to for help when feeling lonely?

Cross one only

Nobody

A friend

Your General Practitioner

A family member

A counsellor

Other

Not applicable

Section K - Politics and Society

K1. Which social class would you say you belong to?

Upper

Upper Middle

Lower Middle

Working

None



K4. Generally speaking, do you usually think of yourself as Labor, Liberal, National or what?

- Liberal
- Labor (ALP)
- National
- Australian Democrat
- Green
- One Nation
- Family First
- No Party ► Skip to K6
- Other party

Please specify

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K5. Would you call yourself a very strong, fairly strong or not very strong supporter of that party?

- Very strong supporter
- Fairly strong supporter
- Not very strong supporter

K6. Did you vote in the Federal Election held on October 9, 2004?

- Yes
- No



Section L - Personal Background

Now, we would like to finish up by asking you some questions about your background.

L1. Firstly, are you...

Female

Male

L2. When were you born? Just the year will do.

Year of birth

L3. All up, how many years of education have you completed?

①Please include all primary and secondary schooling, and studies you've undertaken after high school (i.e. TAFE and university)

②If your study was part-time, give the number of years of equivalent full-time study

Number of years

L4. What is the highest level of high school education you have completed?

Did NOT go to school

Did NOT complete High School to Year 10

Completed High School to Year 10

Completed High School to Year 12

Still at High School **Skip to L6**

L5. What is the highest level of education you have completed since leaving high school?

None

Trade qualification or apprenticeship

Certificate or Diploma (TAFE or business college)

Bachelor Degree (including Honours)

Postgraduate Degree or Postgraduate Diploma



L9. And what industry do you (or did you) work in?

①By industry, we mean the type of business or service performed where you work or worked (e.g. Commonwealth government, hairdressing, construction, hospitality)

Industry

Two rows of 15 dashed boxes each for entering industry information.

L10. How many hours do you usually work each week in all jobs? Please include regular overtime.

Hours per week

L11. Which of the following best describes the main position that you hold (or held)?

- Managerial
- Supervisory
- Non-supervisory

L12. Who do (or did) you work for in your main job?

- A private company or business
- Federal/State/Local government
- A government owned business or enterprise
- A family business or farm
- Self-employed - without employees
- Self-employed - with employees
- A non-government organisation including charities

L13. If you are (or were) self-employed, please tell us how many staff you employ (or did employ).

Number of employees

L14. Do you belong to a union?

- Yes, currently a member
- Once a member but no longer
- Never a member



L15. What country were you born in?

Australia
 Overseas

Please specify country:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

L16. What country was your mother born in?

Australia
 Overseas

Please specify country:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

L17. What country was your father born in?

Australia
 Overseas

Please specify country:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

L18. If you were born overseas, in what year did you come to Australia?

--	--	--

 Year



L19. Do you speak a language other than English at home?

- No, English only
- Yes, Italian
- Yes, Greek
- Yes, Cantonese
- Yes, Mandarin
- Yes, Arabic
- Yes, Vietnamese
- Yes, other

Please specify:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

L20. What is your ancestry? (Provide up to 2 ancestries only.)

- English
- Irish
- Italian
- German
- Chinese
- Scottish
- Australian
- Other

Please specify:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

L21. Do you identify yourself as Aboriginal or Torres Strait Islander?

- Yes
- No



L22. Would you say you now live in...

- A rural area or village
- A small country town (under 10,000 people)
- A larger country town (over 10,000 people)
- A large town (over 25,000 people)
- Outer metropolitan area of a major city (over 100,000 people)
- Inner metropolitan area of a major city (over 100,000 people)

L23. What is your current marital status?

- Single, never married
- De facto
- Married
- Divorced
- Separated but not divorced
- Widowed

L24. Do you live together with a partner?

- Yes
- No

L25. Are you...

- Heterosexual or straight
- Bisexual
- Gay
- Lesbian
- Transgendered
- Can't choose

L26. How many people live in your house (including yourself)?



L27. Thinking about the people OTHER THAN YOURSELF who live in your house, please tell us how old each person is and cross the option that describes your relationship with each of them.

	Person 2	Person 3	Person 4	Person 5	Person 6	Person 7	Person 8	Person 9
Age	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Child or step-child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Father/step-father/ father-in-law	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mother/step-mother/ mother-in-law	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brother/step-brother/ brother-in-law	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sister/step-sister/ sister-in-law	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandfather	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandmother	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grandson	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Granddaughter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other male relative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other female relative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other male (i.e. friend or flatmate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other female (i.e. friend or flatmate)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

L28. Do you have a religion?

Yes

No Skip to L30



L29. If you have a religion, please tell us what it is.

- Catholic
- Anglican/Church of England
- Uniting Church/Methodist
- Presbyterian and Reformed
- Orthodox
- Buddhist
- Baptist
- Islam
- Lutheran
- Pentecostal
- Hinduism
- Judaism
- Other

Please specify:

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L30. How often do you attend religious services?

- Several times a week
- Once a week
- 2 or 3 times a month
- Once a month
- Several times a year
- Once a year
- Less frequently
- Never



L31. What is your gross annual income, before tax or other deductions, from all sources?

ⓐPlease include any pensions and allowances, and income from interest or dividends.

- Nil income
- \$1 - \$119 per week (\$1 - \$6,239 per year)
- \$120 - \$159 per week (\$6,240 - \$8,319 per year)
- \$160 - \$199 per week (\$8,320 - \$10,399 per year)
- \$200 - \$299 per week (\$10,400 - \$15,599 per year)
- \$300 - \$399 per week (\$15,600 - \$20,799 per year)
- \$400 - \$499 per week (\$20,800 - \$25,999 per year)
- \$500 - \$599 per week (\$26,000 - \$31,199 per year)
- \$600 - \$699 per week (\$31,200 - \$36,399 per year)
- \$700 - \$799 per week (\$36,400 - \$41,599 per year)
- \$800 - \$999 per week (\$41,600 - \$51,999 per year)
- \$1,000 - \$1,499 per week (\$52,000 - \$77,999 per year)
- \$1,500 - \$1,999 per week (\$78,000 - \$103,999 per year)
- \$2,000 or more per week (\$104,000 or more per year)



L32. What is your gross household income, before tax or other deductions, from all sources?

ⓐPlease include any pensions and allowances, and income from interest or dividends.

ⓑIf you are the only income earner in your household, please cross SAME AS ABOVE

- SAME AS ABOVE
- \$1 - \$199 per week (\$1- \$10,399 per year)
- \$200 - \$299 per week (\$10,400 - \$15,599 per year)
- \$300 - \$399 per week (\$15,600 - \$20,799 per year)
- \$400 - \$499 per week (\$20,800 - \$25,999 per year)
- \$500 - \$599 per week (\$26,000 - \$31,199 per year)
- \$600 - \$699 per week (\$31,200 - \$36,399 per year)
- \$700 - \$799 per week (\$36,400 - \$41,599 per year)
- \$800 - \$999 per week (\$41,600 - \$51,999 per year)
- \$1,000 - \$1,499 per week (\$52,000 - \$77,999 per year)
- \$1,500 - \$1,999 per week (\$78,000 - \$103,999 per year)
- \$2,000 - \$2,499 per week (\$104,000 - \$129,999 per year)
- \$2,500 - \$3,499 per week (\$130,000 - \$181,999 per year)
- \$3,500 or more per week (\$182,000 or more per year)

If you do not have a partner, this is the end of the questionnaire. Please put the questionnaire in the pre-paid reply envelope and post it back to us. We really appreciate your cooperation and effort!

If you have a partner, please continue



M4. And what industry do they (or did they) work in?

①By industry, we mean the type of business or service performed where they work or worked (i.e. Commonwealth government, hairdressing, construction, hospitality)

Industry

M5. Which of the following best describes the position that your partner holds (or held)?

- Managerial
- Supervisory
- Non-supervisory

M6. Who does (or did) your partner work for in their main job?

- A private company or business
- Federal/State/Local government
- A government owned business or enterprise
- A family business or farm
- Self-employed - without employees
- Self-employed - with employees
- A non-government organisation including charities

M7. What is the highest level of high school education your partner has completed?

- Did NOT go to school
- Did NOT complete High School to Year 10
- Completed High School to Year 10
- Completed High School to Year 12



M8. What is the highest level of education your partner has completed since leaving high school?

None

Trade qualification or apprenticeship

Certificate or Diploma (TAFE or business college)

Bachelor Degree (including Honours)

Postgraduate Degree or Postgraduate Diploma

M9. What is your partner's gross annual income, before tax or other deductions, from all sources?

①Please include any pensions and allowances, and income from interest or dividends.

Nil income

\$1 - \$119 per week (\$1 - \$6,239 per year)

\$120 - \$159 per week (\$6,240 - \$8,319 per year)

\$160 - \$199 per week (\$8,320 - \$10,399 per year)

\$200 - \$299 per week (\$10,400 - \$15,599 per year)

\$300 - \$399 per week (\$15,600 - \$20,799 per year)

\$400 - \$499 per week (\$20,800 - \$25,999 per year)

\$500 - \$599 per week (\$26,000 - \$31,199 per year)

\$600 - \$699 per week (\$31,200 - \$36,399 per year)

\$700 - \$799 per week (\$36,400 - \$41,599 per year)

\$800 - \$999 per week (\$41,600 - \$51,999 per year)

\$1,000 - \$1,499 per week (\$52,000 - \$77,999 per year)

\$1,500 - \$1,999 per week (\$78,000 - \$103,999 per year)

\$2,000 or more per week (\$104,000 or more per year)

That is the end of the questionnaire.
Please put the questionnaire in the pre-paid reply envelope and post it back to us.

We really appreciate your cooperation and effort!