Living in Australia
Introduction Card and Showcard set

Project NG6295
Good morning/afternoon/evening, my name is………………………….from ACNielsen, the research company.

Recently we sent to you a letter and this brochure (show brochure) explaining that we are conducting a very important study for Melbourne University. The study is called Living in Australia and I and would greatly appreciate your views. The first part will only take a few minutes while I just check some details about your household.
SHOWCARD HF7

DISABILITIES/ HEALTH CONDITIONS WHICH:
• Have lasted 6 months or more,
• Restrict everyday activity, and
• Can not be corrected by medication or medical aids

• Sight problems not corrected by glasses or contact lenses
• Hearing problems
• Speech problems
• Blackouts, fits or loss of consciousness
• Slow at learning or understanding things
• Limited use of arms or fingers
• Difficulty gripping things
• Limited use of feet or legs
• Nerves or emotional conditions which require treatment
• Any restriction on physical activity or physical work
• Any disfigurement or deformity
• Any mental illness which requires help or supervision
• Long term effects as a result of a head injury, stroke or other brain damage
• A long term condition or ailment which is still restrictive even though it is being treated or medication is being taken for it
• Any restriction caused by Arthritis, Asthma, Heart Disease, Alzheimer’s Disease, Dementia or any other long term condition
 SHOWCARD HF8

- Legally married and living with spouse ........ 1
- Living with someone in a relationship but not legally married to them ......................... 2
- Not presently living with someone in a relationship, and:
  - separated ................................................. 3
  - divorced ................................................. 4
  - widowed .................................................. 5
  - never legally married ................................. 6
  - legally married (not living with spouse) ..... 7
SHOWCARD HF9

• Employed (including self employed and working students):
  usually work 35 hours or more per week.......1
  usually work less than 35 hours per week ....2

• Not employed, but are looking for work ........3

• Neither employed nor looking for work:
  retired.................................................................4
  home duties.......................................................5
  non-working student .......................................6
Types of childcare you might have considered so you can undertake paid work:

• Family Day Care, Long Day Care, any other care at a Child Care Centre

• Out of Hours or Vacation Care

• Someone paid to come to your home to care for your child

• Someone paid to care for your child in their home

• A friend, relative or neighbour caring for your child for free or for payment in kind
a Finding good quality childcare
b Finding the right person to take care of my child
c Getting care for the hours you need
d Finding care for a sick child
e Finding care during school holidays
f The cost of child care
g Juggling multiple childcare arrangements
h Finding care for a difficult or special needs child
j Finding a place at the childcare centre of your choice
k Finding a child care centre in the right location
m Finding care my (child is /children are) happy with
SHOWCARD Q7

Me or my partner (for example, you arrange working hours so one of you is always able to care for your child) ................................................................. 1

The child’s brother or sister ............................................................. 2

Child looks after self .................................................................... 3

Child comes to my (or my partner’s) workplace ................. 4

Out of hours care at child’s school ........................................... 5

Out of hours care elsewhere ...................................................... 6

A relative who lives with us.......................................................... 7

A relative who lives elsewhere ................................................... 8

A friend or neighbour coming to our home ...................... 9

A friend or neighbour in their home ..................................... 10

A paid sitter or nanny ................................................................. 11

Family day care ........................................................................ 12

Other (please specify) ...................................................................
SHOWCARD Q8

Me or my partner (for example, you arrange working hours so one of you is always able to care for your child) ................................................................. 1

The child’s brother or sister .................................................. 2

Child looks after self ........................................................... 3

Child comes to my (or my partner’s) workplace .... 4

Vacation care at child’s school ........................................... 5

Vacation care elsewhere .................................................... 6

A relative who lives with us ................................................ 7

A relative who lives elsewhere ......................................... 8

A friend or neighbour coming to our home .............. 9

A friend or neighbour in their home ......................... 10

A paid sitter or nanny ....................................................... 11

Family day care .................................................................. 12

Other (please specify) ...........................................................
SHOWCARD Q10

Me or my partner (for example, you arrange working hours so one of you is always able to care for your child) ................................................................. 1

The child’s brother or sister ............................................................... 2

A relative who lives with us ......................................................... 3

A relative who lives elsewhere ..................................................... 4

A friend or neighbour coming to our home .............................. 5

A friend or neighbour in their home ......................................... 6

A paid sitter or nanny ................................................................. 7

Family day care ........................................................................... 8

Long day care centre at workplace ......................................... 9

Private or community long day care centre ...................... 10

Kindergarten / preschool ............................................................ 11

Other (please specify) ......................................................................
SHOWCARD R27

HOUSEHOLD’S WEEKLY SPEND ON GROCERIES

Include food, supermarket and convenience store shopping such as:

- Meat and fish
- Bread and milk
- Fruit and vegetables
- Tinned and packaged food
- Drinks (but not alcohol)
- Pet food
- Cleaning products
- Toilet paper
- Soap, shampoo etc
SHOWCARD R28

HOUSEHOLD’S WEEKLY SPEND ON FOOD AND DRINK

Include food from the supermarket and convenience store shopping:

- Meat and fish
- Bread and milk
- Fruit and vegetables
- Tinned and packaged food
- Drinks (but not alcohol)
SHOWCARD R30

Considering your total household income, is your household able to make ends meet....

   With great difficulty ............1
   With difficulty ...................2
   With some difficulty .............3
   Fairly easily .......................4
   Easily ................................5
   Very easily .........................6
SHOWCARD C2

Year 12 or equivalent (Senior Secondary).................................1

- 6th form
- Matriculation
- Leaving Honours Certificate (SA)
- Leaving Certificate (NSW, WA)
- Certificate of Secondary Education (WA)
- General Certificate of Education (GCE) A levels (UK)
- International Baccalaureate
- Higher School Certificate (NSW, Vic, Tas, ACT)
- Senior Certificate (Qld)
- Northern Territory Certificate of Education (NTCE)
- South Australian Certificate of Education (SACE)
- Tasmanian Certificate of Education (TCE)
- Victorian Certificate of Education (VCE)
- Western Australian Certificate of Education (WSCE)
- Year 12 Certificate (ACT)

Year 11 or equivalent....................................................................................2

- 5th form
- School Leaving Certificate (Vic)
- Technical Leaving Certificate (Vic)
- Leaving Certificate (SA)
- Leaving (Vic, SA)

Year 10 or equivalent (Junior Secondary)..............................3

- 4th form
- Intermediate (Vic, SA, NSW)
- School Certificate (NSW, Tas)
- Junior Certificate (Qld, WA)
- Achievement Certificate (WA)
- General Certificate of Education (GCE) O levels (UK)
- General Certificate of Secondary Education (UK)
- Junior Secondary Studies Certificate (NT)
- Certificate of Lower Secondary Studies (WA)
- Year 10 Certificate (ACT, NSW)

Year 9 or equivalent..........................................................................................4

Year 8 or equivalent..........................................................................................5

Year 7 or equivalent..........................................................................................6

Did not attend secondary school but finished primary school........................7

Attended primary school but did not finish.................................................8
SHOWCARD C3

Government school ........................................... 1
Catholic non-government school......................... 2
Other non-government school ........................ 3
Other, not included above (please specify) .... 8
SHOWCARD C7a

Secondary school qualification – lower level......1
Secondary school qualification – highest level ..2
Nursing qualification .............................................3
Teaching qualification ...........................................4
Trade certificate or apprenticeship .................5
Technicians certificate / Advanced certificate ....6
Other certificate – level I........................................7
Other certificate – level II.................................8
Other certificate – level III..............................9
Other certificate – level IV ..............................10
Other certificate – don’t know level .............11
Associate diploma ............................................12
Undergraduate diploma .....................................13
Bachelor degree but not honours ..................14
Honours bachelor degree ..............................15
Post-graduate diploma ......................................16
Masters degree ...............................................17
Doctorate .......................................................18
Other (specify) ...............................................98

Did not complete qualification .........................91
Still studying .................................................92
SHOWCARD C7c

Mothercraft nurse .......................................................... 1

Enrolled nurse .............................................................. 2

Nursing Aide, Auxiliary nurse, Psychiatric nurse ...................... 3

Associate diploma .......................................................... 4

Undergraduate diploma, Registered Nurse, Sister ....................... 5

Bachelor degree (including Honours) ................................. 6

Triple, Double Certificate Nurse, Theatre Nurse, Registered Midwife ................................. 7

Post-graduate diploma .................................................... 8

Masters degree / Doctorate ............................................. 9
SHOWCARD C7d

Teaching certificate
TPTC (Trained Primary Teaching Cert)
TSTC (Trained Secondary Teaching Cert)
TITC (Trained Infants Teaching Cert) ....................... 1

Associate Diploma
(1-2 years full-time or equivalent) ............................. 2

Undergraduate Diploma of Teaching (Dip T)
(3 years full-time or equivalent) ................................. 3

Bachelor Degree (incl. Honours) ................................. 4

Postgraduate Diploma, Graduate Certificate,
Diploma of Education (Dip Ed)
(after Bachelor Degree or Undergrad Diploma) .......... 5

Masters Degree / Doctorate ........................................ 6
<table>
<thead>
<tr>
<th>Qualification</th>
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<tbody>
<tr>
<td>Secondary school qualification – lower level</td>
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<tr>
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<tr>
<td>Nursing qualification</td>
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<tr>
<td>Honours bachelor degree</td>
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<tr>
<td>Post-graduate diploma</td>
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<tr>
<td>Masters degree</td>
<td>17</td>
</tr>
<tr>
<td>Doctorate</td>
<td>18</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>98</td>
</tr>
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</table>
SHOWCARD C11c

Mothercraft nurse................................................................. 1

Enrolled nurse ........................................................................ 2

Nursing Aide, Auxiliary nurse, Psychiatric nurse................................. 3

Associate diploma........................................................................ 4

Undergraduate diploma, Registered Nurse, Sister ................................ 5

Bachelor degree (including Honours) ........................................ 6

Triple, Double Certificate Nurse, Theatre Nurse, Registered Midwife......................................................... 7

Post-graduate diploma ................................................................... 8

Masters degree / Doctorate .......................................................... 9
Teaching certificate
  TPTC (Trained Primary Teaching Cert)
  TSTC (Trained Secondary Teaching Cert)
  TITC (Trained Infants Teaching Cert) .......................... 1

Associate Diploma
(1-2 years full-time or equivalent) .................................. 2

Undergraduate Diploma of Teaching (Dip T)
(3 years full-time or equivalent) ......................................... 3

Bachelor Degree (incl. Honours) ............................... 4

Postgraduate Diploma, Graduate Certificate,
Diploma of Education (Dip Ed)
(after Bachelor Degree or Undergrad Diploma) ............... 5

Masters Degree / Doctorate ........................................ 6
SHOWCARD D5

Retired / Voluntarily inactive .......................... 1
Homeduties / Childcare .................................... 2
Study / Went to school, TAFE or university ...... 3
Own disability or handicap ......................... 4
Own illness or injury ........................................ 5
Looking after ill or disabled person .............. 6
Travelling / On holiday / Leisure activities ........ 7
Working in an unpaid voluntary job .............. 8
Other activity (please specify) ..................... 98
SHOWCARD D17

Self-employed..............................................................1
Employed on a fixed-term contract ......................2
Employed on a casual basis.................................3
Employed on a permanent or ongoing basis....4
Other (please specify) ..............................................8
SHOWCARD E12

A regular daytime schedule ........................................ 1
A regular evening shift ............................................. 2
A regular night shift .............................................. 3
A rotating shift (changes from days to evenings to nights) ......................................................... 4
Split shift (two distinct periods each day) ........ 5
On call ........................................................................ 6
Irregular schedule ...................................................... 7
Other (please specify) ................................................. 8
SHOWCARD E24

Commercial

Private sector “for profit” organisation.............. 1
Private sector “not-for-profit” organisation...... 2
Government business enterprise or commercial statutory authority............................. 3
Other commercial (please specify) .................. 4

Non-commercial

Other government organisation, such as a public service department, local councils, schools and universities................................. 5
Other non-commercial (please specify) .......... 6
SHOWCARD E25

Employed on a fixed-term contract .............. 1

Employed on a casual basis .......................... 2

Employed on a permanent or ongoing basis ......................................................... 3

Other (please specify) ................................ 4
SHOWCARD E33

- Less than 5
- 5 to 9
- 10 to 19
- 20 to 49
- 50 to 99
- 100 to 199
- 200 to 499
- 500 or more
SHOWCARD E35

- Less than 20
- 20 to 99
- 100 to 499
- 500 to 999
- 1,000 to 4,999
- 5,000 to 19,999
- 20,000 or more
SHOWCARD E36

Totally dissatisfied 0 1 2 3 4 5 6 7 8 9 10 Totally satisfied

a  Your total pay
b  Your job security
c  The work itself (what you do)
d  The hours you work
e  The flexibility available to balance work and non-work commitments

f  All things considered, how satisfied are you with your job?
Written, phoned or applied in person to an employer for work? ................................................................. 1

Answered an advertisement for a job? ......................... 2

Checked factory noticeboards, or used the touchscreens at Centrelink offices? ........................................... 3

Been registered with Centrelink as a jobseeker? ........ 4

Checked or registered with an employment agency? .......................................................................................... 5

Anything else? (please specify) ................................................. 98
Because of your own ill health or disability .................. 1
Employers thought you were too young or too old........ 2
The hours were unsuitable.............................................. 3
You had transport problems or it was too far to travel                                           4
You did not have the required education, training or skills .......................................................... 5
You did not have enough work experience............... 6
Because of language difficulties .................................. 7
Because there were no jobs in your line of work ........ 8
Because there were too many applicants for the available jobs....................................................... 9
Because there were just no jobs at all...................... 10
Any other difficulties (please specify) ....................... 98
SHOWCARD F10

Retired / Voluntarily Inactive ........................................ 1
Home duties / Childcare .................................................. 2
Study / Went to school, TAFE or university ............. 3
Own illness, injury or disability ................................. 4
Looking after ill or disabled person ....................... 5
Travel / On holiday / Leisure activities ............... 6
Working in an unpaid voluntary job ..................... 7
Other activity (please specify) ................................. 8
SHOWCARD FG3

Part-time study ................................................................. 1
Part-time paid work .......................................................... 2
Voluntary unpaid work ..................................................... 3
Work for the Dole ............................................................. 4
Job Search Training (training to search for jobs, write applications and prepare for interviews) ............. 5
Approved literacy/numeracy training .............................. 6
Green Corps ..................................................................... 7
Job Placement Employment and Training (JPET) .......... 8
Intensive Assistance (one-to-one help to plan your return to work and find and keep a job) ................. 9
Community Development Employment Projects ........ 10
Relocating to an area of better employment prospects ......................................................... 11
New Apprenticeship Access Program (training to get you into a new apprenticeship) ......................... 12
Advanced English for Migrants ..................................... 13
Job Pathway Program .................................................... 14
Defence Force Reserve .................................................. 15
<table>
<thead>
<tr>
<th>Benefit Description</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newstart Allowance</td>
<td>1</td>
</tr>
<tr>
<td>Mature Age Allowance</td>
<td>2</td>
</tr>
<tr>
<td>Mature Age Partner Allowance</td>
<td>3</td>
</tr>
<tr>
<td>Service Pension (paid by Dept of Veteran Affairs)</td>
<td>4</td>
</tr>
<tr>
<td>Disability Support Pension (paid by Centrelink)</td>
<td>5</td>
</tr>
<tr>
<td>Wife Pension</td>
<td>6</td>
</tr>
<tr>
<td>Carer Payment</td>
<td>7</td>
</tr>
<tr>
<td>Sickness Allowance</td>
<td>8</td>
</tr>
<tr>
<td>Widow Allowance (Widow B Pension, paid by Centrelink)</td>
<td>9</td>
</tr>
<tr>
<td>Special Benefit</td>
<td>10</td>
</tr>
<tr>
<td>Partner Allowance</td>
<td>11</td>
</tr>
<tr>
<td>Parenting Payment (NOT Family Allowance or Family Tax Benefit)</td>
<td>12</td>
</tr>
<tr>
<td>Youth Allowance</td>
<td>13</td>
</tr>
<tr>
<td>Austudy / Abstudy payment</td>
<td>14</td>
</tr>
</tbody>
</table>
SHOWCARD G17

War Widow’s Pension (paid by Dept of Veterans Affairs).......................... 1

Disability Pension (paid by Dept of Veterans Affairs).............................. 2

Carer Allowance (Child Disability Allowance)........................................ 3

Pensions or benefits paid by Overseas governments ............................ 4

Other government pensions/benefits (please specify) .............................. 8
SHOWCARD G19

LAST FINANCIAL YEAR

1st July 2000 to 30th June 2001
SHOWCARD G27a

- Interest from banks
- Interest from any other financial institution
- Interest from debentures
- Interest from bonds
- Interest from trusts e.g. property management trusts, cash management trusts, other trusts
- Interest from personal loans to persons not in this household
SHOWCARD G30

Age Pension (from Australian Government).................................1
Newstart Allowance........................................................................2
Mature Age Allowance....................................................................3
Mature Age Partner Allowance......................................................4
Service Pension (paid by Dept of Veterans Affairs)......................5
Disability Support Pension (paid by Centrelink).........................6
Disability Pension (paid by Dept of Veterans Affairs)...............7
Wife Pension..................................................................................8
Carer Payment................................................................................9
Carer Allowance (Child Disability Allowance).............................10
Sickness Allowance.......................................................................11
Wife Allowance (Widow B Pension, paid by Centrelink).............12
War Widow’s Pension (paid by Dept of Veterans Affairs).............13
Special Benefit...............................................................................14
Partner Allowance.........................................................................15
Youth Allowance..........................................................................16
Austudy / Abstudy.........................................................................17
Parenting Payment.........................................................................18
Pensions / benefits from overseas governments.........................19
Other government pensions / allowances
(please specify)...........................................................................98
SHOWCARD G33

Superannuation / Annuity ..............................................1

Child support / maintenance ........................................2

Workers’ Compensation / Accident or Sickness Insurance .........................................................3

Parents ........................................................................4

Other persons not in this household (but excluding any income already reported) ....5

Any other source? (please specify).................................8
SHOWCARD G34b

Hardly ever or never............................ 1
Not very often ...................................... 2
About half of the time.......................... 3
Most months ........................................ 4
Always or almost always .................... 5
SHOWCARD H3d/H15d

Less than 5 kilometres .................... A1
5-9 kms ......................................... B2
10-19 kms ..................................... C3
20-49 kms ..................................... D4
50-99 kms ..................................... E5
100-499 kms .................................. F6
500 kms or more .............................. G7
Overseas .................................... H8
Would definitely not like to have a child/more children

Would very much like to have a child/more children
SHOWCARD H27

Very unlikely

0 1 2 3 4 5 6 7 8 9 10

Very likely
SHOWCARD J5

Very likely............................................. 1
Likely .................................................... 2
Not sure ................................................ 3
Unlikely ................................................. 4
Very unlikely ........................................ 5
SHOWCARD K2

DISABILITIES/ HEALTH CONDITIONS WHICH:

• Have lasted 6 months or more,
• Restrict everyday activity, and
• Can not be corrected by medication or medical aids

• Sight problems not corrected by glasses or contact lenses
• Hearing problems
• Speech problems
• Blackouts, fits or loss of consciousness
• Slow at learning or understanding things
• Limited use of arms or fingers
• Difficulty gripping things
• Limited use of feet or legs
• Nerves or emotional conditions which require treatment
• Any restriction on physical activity or physical work
• Any disfiguration or deformity
• Any mental illness which requires help or supervision
• Long term effects as a result of a head injury, stroke or other brain damage
• A long term condition or ailment which is still restrictive even though it is being treated or medication is being taken for it
• Any restriction caused by Arthritis, Asthma, Heart Disease, Alzheimer’s Disease, Dementia or any other long term condition
SHOWCARD K4

Not at all

Can do nothing

0 1 2 3 4 5 6 7 8 9 10
SHOWCARD K6/K7

- a The home in which you live
- b Your employment opportunities
- c Your financial situation
- d How safe you feel
- e Feeling part of your local community
- f Your health
- g The neighbourhood in which you live
- h The amount of free time you have
One of the least important things in my life

The most important thing in my life

a. The home in which you live
b. Your employment and work situation
c. Your financial situation
d. Involvement in your local community
e. Your health
f. Your family
g. Leisure activities, such as hobbies, sports and contact with friends
h. Religion
SHOWCARD K9

Strongly Disagree ................................ 1
Disagree ............................................. 2
Neither Agree nor Disagree .................. 3
Agree .................................................. 4
Strongly Agree .................................... 5