Living in Australia
Introduction Card and Showcard Set
Wave 5M

Project NG60185
Good morning/afternoon/evening, my name is………………………….from ACNielsen, the research company.

Recently we sent to you a letter and this Newsletter (show Newsletter) explaining that we are continuing the Living in Australia Study and we are seeking your continued support for its next phase. As the study is about changes within society over time, we would like to interview you again this year. Every individual and family provides unique information that no-one else can give. The first part will only take a few minutes while I just confirm some details about your household.
SHOWCARD HF16

• Employed (including self employed and working students):

  usually works 35 hours or more per week ........................................... 1

  usually works less than 35 hours per week ........................................... 2

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

• Neither employed nor looking for work:

  retired ..................................................................................................... 4

  home duties .......................................................................................... 5

  non-working student ............................................................................. 6
SHOWCARD HF17

Please Answer Yes or No

DISABILITIES/ HEALTH CONDITIONS WHICH:
• Have lasted, or are likely to last, 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
• Difficulty learning or understanding things
• Limited use of arms or fingers
• Difficulty gripping things
• Limited use of feet or legs
• A nervous or emotional condition which requires treatment
• Any condition that restricts physical activity or physical work (e.g., back problems, migraines)
• Any disfigurement or deformity
• Any mental illness which requires help or supervision
• Shortness of breath or difficulty breathing
• Chronic or recurring pain
• 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 other long-term condition such as arthritis, asthma, heart disease, Alzheimer’s disease, dementia etc
SHOWCARD Q4

Types of child care you might have considered so you (or your partner) can undertake paid work:

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

• Outside of school 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
SHOWCARD Q5

Not a problem at all  ________________________________  Very much a problem

0 1 2 3 4 5 6 7 8 9 10

a  Finding good quality child care
b  Finding the right person to take care of your 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 child care arrangements
h  Finding care for a difficult or special needs child
i  Finding a place at the child care centre of your choice
j  Finding a child care centre in the right location
k  Finding care your (child is / your children are) happy with
l  Finding care at short notice
SHOWCARD Q6a

- Family Day Care, Long Day Care, any other care at a Child Care Centre
- Outside of school hours or Vacation Care
- Someone paid to come to your home (nanny/baby-sitter)
- Someone paid to care for your child in their home
- A relative who lives with you (paid or unpaid)
- A relative who doesn’t live with you (paid or unpaid)
- A friend or neighbour (caring for the child either at your home or in their home; paid or unpaid)
- The child’s brother or sister
- The child goes to your (or your partner’s) work
- Child looks after his or her self
- Some other form of child care
SHOWCARD Q6b

- Family Day Care, Long Day Care, any other care at a Child Care Centre
- Outside of school hours or Vacation Care
- Someone paid to come to your home to care for your child (nanny/baby-sitter)
- Someone paid to care for your child in their home
- A relative who lives with you (whether paid or unpaid)
- A relative who doesn’t live with you (whether paid or unpaid)
- A friend or neighbour (caring for the child either at your home or in their home, whether paid or unpaid)
- The child’s brother or sister (whether paid or unpaid)
- Some other form of child care
SHOWCARD Q8

Me or my partner (e.g., you arrange working hours so one of you is able to care for your child/ren) ................................................................. 01

The child’s brother or sister ....................................................... 02

Child looks after self.................................................................. 03

Child comes to my (or my partner’s) workplace............................ 04

Child’s grandparent who lives with us .................................. 05

Child’s grandparent who lives elsewhere ................................ 06

Other relative who lives with us ............................................ 07

Other relative who lives elsewhere ........................................ 08

A friend or neighbour coming to our home............................ 09

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

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

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

Formal outside of school hours care ....................................... 13

Other (please specify) ............................................................. 21
SHOWCARD Q9

Me or my partner (e.g., taking paid or unpaid leave, you arrange working hours so one of you is able to care for your child/ren) .............01

The child’s brother or sister ........................................02

Child looks after self................................................03

Child comes to my (or my partner’s) workplace 04

Child’s grandparent who lives with us ...............05

Child’s grandparent who lives elsewhere ..........06

Other relative who lives with us .........................07

Other relative who lives elsewhere .....................08

A friend or neighbour coming to our home........09

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

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

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

Vacation care .......................................................13

Other (please specify) ..........................................21
SHOWCARD Q11

Me or my partner (e.g., you arrange working hours so one of you is able to care for your child/ren).......01

The child’s brother or sister........................................02

Child’s grandparent who lives with us.................................03

Child’s grandparent who lives elsewhere.............................04

Other relative who lives with us........................................05

Other relative who lives elsewhere.....................................06

A friend or neighbour coming to our home ......................07

A friend or neighbour in their home.................................08

A paid sitter or nanny ..................................................09

Family day care ..................................................................10

Long day care centre at workplace .................................11

Private or community long day care centre......................12

Kindergarten / pre-school...............................................13

Other (please specify)......................................................21
SHOWCARD Q12

- Family Day Care, Long Day Care, any other care at a Child Care Centre
- Out of school hours or Vacation Care
- Someone paid to come to your home to care for your child (nanny/baby-sitter)
- Someone paid to care for your child in their home
- A relative who lives with you (whether paid or unpaid)
- A relative who doesn’t live with you (whether paid or unpaid)
- A friend or neighbour (caring for the child either at your home or in their home, whether paid or unpaid)
- The child’s brother or sister (whether paid or unpaid)
- Some other form of child care
SHOWCARD Q14

The child’s brother or sister ........................................ 01
Child’s grandparent who lives with us .................... 02
Child’s grandparent who lives elsewhere ............. 03
Other relative who lives with us .......................... 04
Other relative who lives elsewhere ..................... 05
A friend or neighbour coming to our home......... 06
A friend or neighbour in their home.................. 07
A paid sitter or nanny ........................................... 08
Family day care .................................................... 09
Private or community long day care centre ...... 10
Formal outside of school hours care ............... 11
Other (please specify) ......................................... 21
<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>The child’s brother or sister</td>
<td>01</td>
</tr>
<tr>
<td>Child’s grandparent who lives with us</td>
<td>02</td>
</tr>
<tr>
<td>Child’s grandparent who lives elsewhere</td>
<td>03</td>
</tr>
<tr>
<td>Other relative who lives with us</td>
<td>04</td>
</tr>
<tr>
<td>Other relative who lives elsewhere</td>
<td>05</td>
</tr>
<tr>
<td>A friend or neighbour coming to our home</td>
<td>06</td>
</tr>
<tr>
<td>A friend or neighbour in their home</td>
<td>07</td>
</tr>
<tr>
<td>A paid sitter or nanny</td>
<td>08</td>
</tr>
<tr>
<td>Family day care</td>
<td>09</td>
</tr>
<tr>
<td>Private or community long day care centre</td>
<td>10</td>
</tr>
<tr>
<td>Kindergarten / pre-school</td>
<td>12</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>21</td>
</tr>
</tbody>
</table>
SHOWCARD R23

Include food, supermarket and convenience store shopping.

LIST A
All groceries 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

LIST B
Food and drink only
For example,

- Meat and fish
- Bread and milk
- Fruit and vegetables
- Tinned and packaged food
- Drinks (but not alcohol)
TOTAL GROSS INCOME OF EVERYONE LIVING IN THIS HOUSEHOLD

LAST FINANCIAL YEAR (1 July 2004 to 30 June 2005), BEFORE TAX OR ANYTHING ELSE IS DEDUCTED
Include income from wages, investments and government pensions and benefits.

<table>
<thead>
<tr>
<th>Per Year</th>
<th>Weekly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Negative or zero income</td>
<td>01</td>
</tr>
<tr>
<td>$1 - $9,999</td>
<td>($1 - $189)</td>
</tr>
<tr>
<td>$10,000 - $19,999</td>
<td>($190 - $379)</td>
</tr>
<tr>
<td>$20,000 - $29,999</td>
<td>($380 - $579)</td>
</tr>
<tr>
<td>$30,000 - $39,999</td>
<td>($580 - $769)</td>
</tr>
<tr>
<td>$40,000 - $49,999</td>
<td>($770 - $959)</td>
</tr>
<tr>
<td>$50,000 - $59,999</td>
<td>($960 - $1149)</td>
</tr>
<tr>
<td>$60,000 - $79,999</td>
<td>($1150 - $1529)</td>
</tr>
<tr>
<td>$80,000 - $99,999</td>
<td>($1530 - $1919)</td>
</tr>
<tr>
<td>$100,000 - $124,999</td>
<td>($1920 - $2399)</td>
</tr>
<tr>
<td>$125,000 or more</td>
<td>($2400 or more)</td>
</tr>
</tbody>
</table>
SHOWCARD AA11

Skilled migrant ................................................................. 1
Business migrant .............................................................. 2
Family migrant .................................................................. 3
Refugee or special humanitarian migrant ..................... 4
New Zealand citizen .......................................................... 5
None of the above ............................................................... 8
SHOWCARD BB3

None ......................................................................................... 1

Primary school only ................................................................. 2

Some secondary school,  
but no more than Year 10 ..................................................... 3

Year 11 or equivalent  
(e.g, 5th form, Leaving Certificate) ................................. 4

Year 12 or equivalent  
(e.g, 6th form, Matriculation) ........................................... 5
SHOWCARD BB5

University ................................................................. 1

Teachers college / College of Advanced
   Education...................................................................... 2

Institute of Technology .............................................. 3

Technical college / TAFE /
   College of Technical & Further Education............ 4

Employer ......................................................................... 5

Other (please specify) ...................................................... 8
SHOWCARD 1

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 2

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

<table>
<thead>
<tr>
<th>Qualification</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary school qualification – lower level</td>
<td>600</td>
</tr>
<tr>
<td>Secondary school qualification – highest level</td>
<td>611</td>
</tr>
<tr>
<td>Nursing qualification</td>
<td>001</td>
</tr>
<tr>
<td>Teaching qualification</td>
<td>002</td>
</tr>
<tr>
<td>Trade certificate or apprenticeship</td>
<td>514</td>
</tr>
<tr>
<td>Technicians certificate / Advanced certificate</td>
<td>511</td>
</tr>
<tr>
<td>Other certificate – level I</td>
<td>524</td>
</tr>
<tr>
<td>Other certificate – level II</td>
<td>521</td>
</tr>
<tr>
<td>Other certificate – level III</td>
<td>598</td>
</tr>
<tr>
<td>Other certificate – level IV</td>
<td>599</td>
</tr>
<tr>
<td>Other certificate – don’t know level</td>
<td>500</td>
</tr>
<tr>
<td>Associate diploma/Diploma (2 yrs f/t or equivalent)</td>
<td>421</td>
</tr>
<tr>
<td>Associate degree</td>
<td>413</td>
</tr>
<tr>
<td>Undergraduate diploma/ Advanced diploma (3 yrs f/t or equivalent)</td>
<td>411</td>
</tr>
<tr>
<td>Bachelor degree but not honours</td>
<td>312</td>
</tr>
<tr>
<td>Honours bachelor degree</td>
<td>311</td>
</tr>
<tr>
<td>Graduate certificate</td>
<td>221</td>
</tr>
<tr>
<td>Post-graduate diploma /graduate diploma</td>
<td>211</td>
</tr>
<tr>
<td>Masters degree</td>
<td>120</td>
</tr>
<tr>
<td>Doctorate</td>
<td>110</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>998</td>
</tr>
<tr>
<td>Did not complete qualification</td>
<td>993</td>
</tr>
<tr>
<td>Still studying</td>
<td>994</td>
</tr>
</tbody>
</table>
Enrolled nurse...............................................................511

Associate diploma / Diploma  
(2 years full-time or equivalent).................................421

Undergraduate diploma / Advanced diploma  
(3 years full-time or equivalent).................................411

Bachelor degree but not honours .................................312

Honours bachelor degree ............................................311

Triple, Double Certificate Nurse ..................................310

Registered Nurse, Sister ..............................................310

Post-graduate diploma / Graduate diploma ...............211

Masters degree .............................................................120

Doctorate .......................................................................110

Other (please specify) ..................................................998
SHOWCARD 5

TPTC (Trained Primary Teaching Cert.) ......................... 421
TSTC (Trained Secondary Teaching Cert)
  TITC (Trained Infants Teaching Cert) ...................... 411
Associate Diploma /Diploma
  (1-2 years full-time or equivalent) ...................... 498
Undergraduate Diploma of Teaching (Dip T)
  (3 years full-time or equivalent) ...................... 499
Bachelor Degree but not honours ......................... 312
Honours Bachelor Degree ................................... 311
Graduate Certificate ........................................... 221
Postgraduate Diploma, Graduate Diploma,
  Diploma of Education (Dip Ed)
  (after Bachelor Degree or Undergrad Diploma) ....... 211
Masters Degree .................................................. 120
Doctorate ...................................................... 110
Other (please specify) ........................................ 998
SHOWCARD 6

Secondary school qualification – lower level .....................600
Secondary school qualification – highest level .................611
Certificate level I ................................................................524
Certificate level II .................................................................521
Certificate level III .................................................................514
Certificate level IV .................................................................511
Certificate – don’t know level ..................................................500
Diploma (2 years full time or equivalent) .........................421
Associate Degree .................................................................413
Advanced Diploma
  (3 years full time or equivalent) .........................................411
Bachelor degree but not honours .......................................312
Honours bachelor degree ...................................................311
Graduate certificate ...............................................................221
Graduate diploma .................................................................211
Masters degree .....................................................................120
Doctorate ..............................................................................110
Other (please specify) ..........................................................998
SHOWCARD 7

Retired / Voluntarily Inactive.............................01
Home duties / Child care.....................................02
Study / Went to school, TAFE or university ...03
Own disability or handicap..................................04
Own injury or illness........................................05
Looking after ill or disabled person....................06
Travel / On holiday / Leisure activities..............07
Working in an unpaid voluntary job...............08
Other activity (please specify).........................98
Government school ........................................... 1
Catholic non-government school ....................... 2
Other non-government school .......................... 3
Other, not included above (please specify) .......... 8
SHOWCARD A7

Certificate – level I .......................................................... 524
Certificate – level II ......................................................... 521
Certificate – level III ....................................................... 514
Certificate – level IV ...................................................... 511
Certificate – don’t know level ...................................... 500
Diploma (2 yrs full-time or equivalent) .......................... 421
Associate Degree .......................................................... 413
Advanced Diploma (3 yrs full-time or equivalent) .......... 411
Bachelor Degree but not Honours ............................... 312
Honours Bachelor Degree ............................................. 311
Graduate Certificate ..................................................... 221
Graduate Diploma ......................................................... 211
Masters degree ............................................................ 120
Doctorate .................................................................... 110
Other (please specify) .................................................. 998
Incorporated business

- has a registered business name with the Australian Securities and Investments Commission (ASIC);
- has “Incorporated”; “limited”; “proprietary limited” or “no liability” in the name (abbreviated as “Ltd”, “Pty Ltd” or “N.L.”); and
- the company may be sued to recover the company’s debts, but the directors or shareholders may not.

Unincorporated business

- if the above criteria is not met, the business is NOT incorporated – that is, it’s un-incorporated.
SHOWCARD C10

A regular daytime schedule............................... 01
A regular evening shift....................................... 02
A regular night shift ........................................... 03
A rotating shift (changes from days to evenings to nights) ........................................... 04
Split shift (two distinct periods each day)........ 05
On call.................................................................. 06
Irregular schedule .............................................. 07
Other (please specify) ........................................ 08
SHOWCARD C22

Employed on a fixed-term contract.....................1
Employed on a casual basis................................2
Employed on a permanent or ongoing basis.....3
Other (please specify) ........................................8
SHOWCARD C27b

To help you get started in your job..................... 1

To improve your skills in your current job........... 2

To maintain professional status and/or meet occupational standards..................................... 3

To prepare you for a job you might do in the future or to facilitate promotion..................... 4

To develop your skills generally ......................... 5

Because of health / safety concerns..................... 6

Other aims (please specify).................................. 8
SHOWCARD C27c

- Pay course fees
- Purchase materials, books etc.
- Pay for travel, accommodation while attending course
- Take unpaid time off to attend training course
Commercial

Private sector “for profit” organisation ............ 1

Government business enterprise or commercial statutory authority ............................................. 2

Other commercial (please specify) ..................... 3

- By ‘commercial’ we mean businesses that undertake activity for profit. It should not include businesses which, in the course of providing a public service, may happen to make a profit.

Non-commercial

Private sector “not-for-profit” organisation ...... 4

Other government organisation, such as a public service department, local councils, schools and universities ......................................................... 5

Other non-commercial (please specify) .......... 6
SHOWCARD C31a

- One person (self)
- 2 to 4
- 5 to 9
- 10 to 19
- 20 to 49
- 50 to 99
- 100 to 199
- 200 to 499
- 500 or more
Mostly men............................................................1

Some men, some women,
but a majority of men........................................2

About the same numbers of men and women ...3

Some men, some women,
but a majority of women....................................4

Mostly women.......................................................5
SHOWCARD C33

- 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 C34

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?
SHOWCARD C45

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 D2

Written, phoned or applied in person to an employer for work.................................01

Answered an advertisement for a job..................02

Checked factory notice boards, or used the touch-screens at Centrelink offices ...........03

Been registered with Centrelink as a jobseeker......................................................04

Checked or registered with an employment agency..................................................05

Anything else (please specify) .................................98
Because of your own ill health or disability ............... 01
Employers thought you were too young or too old ...... 02
The hours were unsuitable ........................................ 03
You had transport problems or it was too far to travel ................................................... 04
You did not have the required education, training or skills .................................................. 05
You did not have enough work experience .............. 06
Because of language difficulties ............................... 07
Because there were no jobs in your line of work ...... 08
Because there were too many applicants for the available jobs ........................................... 09
Because there were just no jobs at all ....................... 10
Because of difficulties in finding child care ............. 11
Any other difficulties (please specify) ...................... 98
SHOWCARD D10

Retired / Voluntarily Inactive.............................01
Home duties / Child care.....................................02
Study / Went to school, TAFE or university ..........03
Own illness, injury or disability..............................04
Looking after ill or disabled person .....................05
Travel / On holiday / Leisure activities...............06
Working in an unpaid voluntary job....................07
Other activity (please specify)............................08
SHOWCARD D16

Very unlikely                       Very likely

0  1  2  3  4  5  6  7  8  9  10

a. You gain suitable qualifications
b. Suitable jobs become available
c. Suitable part-time jobs become available
d. Youngest child reaches an age old enough for care
e. Youngest child starts at primary school
f. You gain access to appropriate child care
SHOWCARD D32

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 D36

To help you get started in your job...................... 1

To improve your skills in your current job........... 2

To maintain professional status and/or meet occupational standards.................................................. 3

To prepare you for a job you might do in the future or to facilitate promotion................................. 4

To develop your skills generally............................ 5

Because of health / safety concerns........................ 6

Other aims (please specify).................................. 8
SHOWCARD D37

- Pay course fees
- Purchase materials, books etc.
- Pay for travel, accommodation while attending course
- Take unpaid time off to attend training course
SHOWCARD E6a

- Maternity leave
- Paternity leave
- Parental leave
- Long-service leave
- Bereavement leave
- Family leave
- Carers leave
- **Other form of paid leave**
  
  But NOT
  
  ° annual leave
  ° sick leave, or
  ° worker’s compensation
<table>
<thead>
<tr>
<th>SHOWCARD E9</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Part-time study</td>
<td>01</td>
</tr>
<tr>
<td>Part-time paid work</td>
<td>02</td>
</tr>
<tr>
<td>Voluntary unpaid work</td>
<td>03</td>
</tr>
<tr>
<td>Community Work organised by a Community Work Coordinator</td>
<td>04</td>
</tr>
<tr>
<td>Work for the Dole</td>
<td>05</td>
</tr>
<tr>
<td>Job Search Training (training to search for jobs, write applications and prepare for interviews)</td>
<td>06</td>
</tr>
<tr>
<td>Approved literacy/numeracy training</td>
<td>07</td>
</tr>
<tr>
<td>Green Corps</td>
<td>08</td>
</tr>
<tr>
<td>Job Placement Employment and Training (JPET)</td>
<td>09</td>
</tr>
<tr>
<td>Intensive Assistance (one-to-one help to plan your return to work and find and keep a job)</td>
<td>10</td>
</tr>
<tr>
<td>Community Development Employment Projects</td>
<td>11</td>
</tr>
<tr>
<td>Relocating to an area of better employment prospects</td>
<td>12</td>
</tr>
<tr>
<td>New Apprenticeship Access Program (training to get you into a new apprenticeship)</td>
<td>13</td>
</tr>
<tr>
<td>Advanced English for Migrants</td>
<td>14</td>
</tr>
<tr>
<td>Job Pathway Program</td>
<td>15</td>
</tr>
<tr>
<td>Defence Force Reserve</td>
<td>16</td>
</tr>
</tbody>
</table>
SHOWCARD F14

Newstart Allowance ........................................................01
Mature Age Allowance ....................................................02
Service Pension (paid by Dept of Veterans’ Affairs) ....03
Disability Support Pension (paid by Centrelink) .........04
Wife Pension ....................................................................05
Carer Payment ..................................................................06
Sickness Allowance ........................................................07
Widow Allowance (including Widow B Pension, paid by Centrelink) .........................................................08
Special Benefit ..................................................................09
Partner Allowance ..........................................................10
Parenting Payment (NOT Family Allowance or Family Tax Benefit) .................................................................11
Youth Allowance .............................................................12
Austudy / Abstudy payment ..........................................13
None of these ..................................................................97
SHOWCARD F14 NPQ

Newstart Allowance .......................................................... 01
Mature Age Allowance ........................................................ 02
Service Pension (paid by Dept of Veterans’ Affairs) ........ 04
Disability Support Pension (paid by Centrelink) .......... 05
Wife Pension ........................................................................ 06
Carer Payment .................................................................... 07
Sickness Allowance ............................................................. 08
Widow Allowance (including Widow B Pension, paid by Centrelink) .................................................. 09
Special Benefit ................................................................. 10
Partner Allowance ............................................................. 11
Parenting Payment (NOT Family Allowance or Family Tax Benefit) .................................................. 12
Youth Allowance ............................................................... 13
Austudy / Abstudy payment ............................................. 14
None of these ..................................................................... 97
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

Any other government pensions/ benefits (please specify) ...................... 8

Do not include:
- Family Allowance Payments
- Family Tax Benefit (Child Endowment)
- Superannuation payments
SHOWCARD F17

LAST FINANCIAL YEAR

1st July 2004 to 30th June 2005
Incorporated business

• has a registered business name with the Australian Securities and Investments Commission (ASIC);

• has “Incorporated”; “limited”; “proprietary limited” or “no liability” in the name (abbreviated as “Ltd”, “Pty Ltd” or “N.L.”); and

• the company may be sued to recover the company’s debts, but the directors or shareholders may not.

Unincorporated business

• if the above criteria is not met, the business is NOT incorporated – that is, it’s un-incorporated.
SHOWCARD F27a

Interest from:

- banks
- other financial institution
- bonds
- debentures
- cash management trusts
- family or other private trust funds, or
- interest from loans to other persons not in this household
SHOWCARD F28c

- Company shares
- Managed funds
- Property trusts (listed and unlisted)
SHOWCARD F30

Age Pension (from Australian Government) ............................................. 01
Newstart Allowance ........................................................................... 02
Mature Age Allowance ..................................................................... 03
Service Pension (paid by Dept of Veterans’ Affairs) .................... 04
Disability Support Pension (paid by Centrelink) ......................... 05
Disability Pension (paid by Dept of Veterans’ Affairs) ............. 06
Wife Pension ..................................................................................... 07
Carer Payment .................................................................................. 08
Carer Allowance (Child Disability Allowance) ......................... 09
Sickness Allowance ......................................................................... 10
Widow Allowance (incl. Widow B Pension, paid by Centrelink) . 11
War Widow’s Pension (paid by Dept of Veterans’ Affairs) ....... 12
Special Benefit .................................................................................... 13
Partner Allowance ............................................................................ 14
Youth Allowance .............................................................................. 15
Austudy / Abstudy ........................................................................... 16
Parenting Payment ............................................................................ 17
Pensions / benefits from overseas governments ..................... 18
Other government pensions / allowances
(please specify) ................................................................................ 98

Do not include:

- Family Allowance Payments
- Family Tax Benefit (Child Endowment)
SHOWCARD F32

Superannuation / Roll-over Fund / Annuity / Life Insurance / Allocated Pension Fund ........ 01

Child Support / Maintenance ........................................ 02

Workers’ Compensation / Accident or Sickness Insurance / Personal Accident Claims ......................... 03

Redundancy and severance payments .................. 04

Inheritance / Bequests .................................................. 05

Parents ........................................................................ 06

Other persons not in this household (but excluding any income already reported) ... 07

Any other source (please specify) ...................... 98

- Include cash gifts

- Do not include:
  - Family Allowance Payments
  - Family Tax Benefit (Child Endowment)
SHOWCARD F34

Hardly ever or never ........................................... 1
Not very often ...................................................... 2
About half of the time .......................................... 3
Most months ......................................................... 4
Always or almost always ....................................... 5
SHOWCARD G5d

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
SHOWCARD G11

Daily .........................................................................................1
At least once a week .................................................................2
At least once a fortnight ............................................................3
At least once a month ...............................................................4
Once every 3 months ...............................................................5
Once every six months ............................................................6
Once a year ..............................................................................7
Less than once a year ..............................................................8
Never .......................................................................................9
SHOWCARD G12

Nowhere near enough .................................................. 1
Not quite enough ...................................................... 2
About right .............................................................. 3
A little too much ....................................................... 4
Way too much ............................................................ 5
SHOWCARD G13b

Employed full-time - usually 35 hours or more per week.................................................. 1

Employed part-time - usually less than 35 hours per week................................................ 2

Not employed BUT is looking for work............. 3

Neither employed NOR looking for work:

  Retired ......................................................................................... 4

  Home duties ................................................................................ 5

  Non-working student .................................................................. 6

  Other ........................................................................................... 8
SHOWCARD G17g

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
<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily</td>
<td>1</td>
</tr>
<tr>
<td>At least once a week</td>
<td>2</td>
</tr>
<tr>
<td>At least once a fortnight</td>
<td>3</td>
</tr>
<tr>
<td>At least once a month</td>
<td>4</td>
</tr>
<tr>
<td>Once every 3 months</td>
<td>5</td>
</tr>
<tr>
<td>Once every 6 months</td>
<td>6</td>
</tr>
<tr>
<td>Once a year</td>
<td>7</td>
</tr>
<tr>
<td>Less than once a year</td>
<td>8</td>
</tr>
<tr>
<td>Never</td>
<td>9</td>
</tr>
</tbody>
</table>
SHOWCARD G25

Nowhere near enough ........................................2
Not quite enough ..............................................4
About right ......................................................6
A little too much ................................................8
Way too much ....................................................10
SHOWCARD G26

Employed – usually works 35 hours or more per week........................................1

Employed – usually works less than 35 hours per week........................................2

Not employed BUT is looking for work.............3

Neither employed NOR looking for work:

   Retired ..................................................................................4

   Home duties ........................................................................5

   Non-working student..................................................6

   Other .............................................................................8
SHOWCARD G28

Always me ............................................................1
Usually me ............................................................2
Me and my partner about equally .........................3
Usually my partner ...............................................4
Always my partner .................................................5
Always or usually another person(s) in the household............................................................................6
Always or usually someone not living in the household............................................................................7
SHOWCARD G56

Condoms .................................................................01
Contraception pill (“the pill”).................................02
Intra-uterine device (coil, loop).................................03
Diaphragm / cervical cap .........................................04
Foam / cream / jelly / suppository .............................05
Injectables (e.g., Depo-Provera) ..............................06
Implants (e.g., Norplant) ...........................................07
Persona ........................................................................08

Hormonal emergency contraception afterwards (“morning-after pill”) ........09
Withdrawal ....................................................................10
Safe period method (rhythm method) .......................11
Other ...........................................................................98
SHOWCARD G61

Would definitely not like to have a child / more children

Would very much like to have a child / more children

0 1 2 3 4 5 6 7 8 9 10
SHOWCARD G62

Very unlikely

Very likely

0 1 2 3 4 5 6 7 8 9 10
Using the scale below, pick a number between 1 and 4 to indicate how important each of these statements are to you at present, when thinking about whether or not to have a child/another child.

- Not important .......................................................... 1
- Of limited importance .............................................. 2
- Important ..................................................................... 3
- Very important ......................................................... 4
SHOWCARD H2a

Got married (in a registered marriage) ..................1

Separated (from a registered marriage)..............2

Got divorced (finalised a divorce) ....................3

Reunited with spouse.....................................4

Was widowed ................................................5

None of the above.......................................7
SHOWCARD H3

Married (in a registered marriage) .........................1

Separated (but not divorced) ................................2

Divorced ................................................................3

Widowed ................................................................4

Never married but living with someone in a relationship.................................................................5

Never married and not living with someone in a relationship.............................................................6
SHOWCARD H5

Married and living with spouse .......................... 1

Married but spouse is in an institution
(e.g., nursing home, gaol).............................. 2

Married, but living with spouse
less than half the time owing to
work/other commitments ............................ 3
SHOWCARD H8

Very likely....................................................1
Likely ................................................................2
Not sure..........................................................3
Unlikely............................................................4
Very unlikely ...................................................5
Prefer not to disclose......................................9
SHOWCARD H14

Never went to school ........................................01
Still at school.....................................................02
Year 9 or below.................................................03
Year 10 or equivalent .......................................04
Year 11 or equivalent .......................................05
Year 12 or equivalent .......................................06
Certificate / Trade certificate .........................07
Diploma / Advanced diploma .........................08
Bachelor degree ..............................................09
Graduate diploma / Graduate certificate ........10
Post-graduate degree .......................................11
SHOWCARD H15

Employed or self-employed........................................01

Helping family member in a family business or farm........................................02

Looking for work........................................................................03

Study / Attending school, TAFE, university........04

Retired / Voluntarily inactive ........................................05

Home duties / Child care.......................................................06

Long-term or permanent illness, injury or disability ................................................07

Looking after ill or disabled person..........................08

Travel / On holiday / Leisure activities ......................09

Working in an unpaid voluntary job.......................10

Other (please specify) ..........................................................98
SHOWCARD H16a

In the same town or city as me ..................1

In the same State in a different town or city from me ........................................2

In a different State ........................................3

Overseas .....................................................4
SHOWCARD H19

Very likely...............................................................1
Likely ........................................................................2
Not sure .....................................................................3
Unlikely ......................................................................4
Very unlikely ............................................................5
Prefer not to disclose .................................................9
SHOWCARD K1

DISABILITIES/ HEALTH CONDITIONS WHICH:
• Have lasted, or are likely to last, 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 .......... 01
Hearing problems ................................................................................. 02
Speech problems .................................................................................. 03
Blackouts, fits or loss of consciousness ........................................... 04
Difficulty learning or understanding things ........................................... 05
Limited use of arms or fingers ............................................................ 06
Difficulty gripping things ..................................................................... 07
Limited use of feet or legs ................................................................. 08
A nervous or emotional condition which requires treatment ............ 09
Any condition that restricts physical activity or physical work (e.g., back problems, migraines) .................................................... 10
Any disfigurement or deformity .............................................................. 11
Any mental illness which requires help or supervision ....................... 12
Shortness of breath or difficulty breathing ........................................ 13
Chronic or recurring pain ..................................................................... 14
Long term effects as a result of a head injury, stroke or other brain damage ........................................................................... 15
A long term condition or ailment which is still restrictive even though it is being treated or medication is being taken for it ...... 16
Any other long-term condition such as arthritis, asthma, heart disease, Alzheimer’s disease, dementia etc ................................ 17
SHOWCARD K4

Not at all

Unable to do any work

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

Self-care
For example:
• Bathing / showering
• Dressing / undressing
• Eating / feeding
• Going to toilet
• Bladder / bowel control

Mobility
For example:
• Moving around away from home
• Moving around at home
• Getting in or out of a bed or chair

Communication in own language
For example:
• Understanding / being understood by strangers, friends or family, including use of sign language or lip reading
SHOWCARD K13

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
SHOWCARD L1b

Within present city or town .........................1
To a (another) capital city .........................2
To a place on the coast ...............................3
Somewhere else in Australia .......................4
To another country ....................................5