

LABOUR FORCE SURVEY 2023

Unitcode	<input type="text"/>	Prefecture	<input type="text"/>	Quarter	<input type="text"/>
Catalogue id	<input type="text"/>	Municipality	<input type="text"/>	Reference week	<input type="text"/>
Address <input type="text"/>					
Head of Household <input type="text"/>					
Telephone nr <input type="text"/>					

PART I: HOUSEHOLD COMPOSITION (All members of the household should be included, irrespectively of their age)

Serial number	Name	Relationship with the reference person	Ser. Num of the partner of person	Ser. Num of the father of person	Ser. Num of the mother of person	Sex (1= Male, 2= Female)	Year of birth	Month and date of birth	Do all those you have indicated share a common budget for food and accommodation expenses? (1=	IF Column 9 = 2: Does this person lives in another household?
1	2	3	4	5	6	7	8	9	10	11
01		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
02		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
03		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
04		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
05		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
06		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
07		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
08		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

IF Column 11 = 1-> end of interview  
  
IF Column 11 = 2 -> personal questionnaire (as member of another household)

- Codes for Column 3:
- 01 Reference person
  - 02 Partner of reference perso
  - 03 Son/daughter of reference person
  - 04 Son/daughter-in-law of reference person
  - 05 Grand-child of reference person
  - 06 Parent of reference person
  - 07 Parent-in-law of reference person
  - 08 Grand-parent of reference person
  - 09 Brother/sister of reference person
  - 10 Other relative
  - 11 Other non-relative

Codes for Columns 4, 5, 6:

Use the corresponding serial number of person (or 99 if the relative does not live in the household

Yes = 1  
No = 2

Yes = 1  
No = 2

Sequence number of household member 

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

**Q\_P1.Q\_P1. Who answered the questions?**

The person surveyed ..... ☐ 1 → Q\_A1  
 Proxy..... ☐ 2 → Q\_A1

**SECTION A: COUNTRY OF BIRTH, CITIZENSHIP, DURATION OF RESIDENCY IN GREECE AND DATA FOR THE PARENTS OF THE RESPONDENT. IT IS COMPLETED FOR ALL THE MEMBERS OF THE HOUSEHOLD REGARDLESS OF AGE.**

**Q\_A1. Were you born in Greece or in another country?**

In Greece ..... ☐ 1 → Q\_A3  
 In another country..... ☐ 2 → Q\_A2  
 Does not know / Not answered..... ☐ -1 → Q\_A3

**Q\_A2. In which country were you born?**

Country of Birth 

--	--	--

 → Q\_A5  
 Does not know / Not answered..... -1 → Q\_A5

**Q\_A3. Have you ever lived abroad for more than a year?**

Yes ..... ☐ 1 → Q\_A4  
 No..... ☐ 2 → Q\_A7  
 Does not know / Not answered..... ☐ -1 → Q\_A7

**Q\_A4. How many years have passed since you were permanently re-established in Greece?**

Less than a year..... ☐ 00 → If ≤ 10 → Q\_A6  
 More than 1 year (write the exact number)..... 

--	--

 → If > 10 → Q\_A7  
 Does not know / Not answered ..... ☐ -1 → Q\_A9

**Q\_A5. How many years have passed since you settled permanently in Greece?**

Less than a year ..... ☐ 00  
 More than 1 year (write the exact number) ..... 

--	--

  
 Does not know / Not answered..... ☐ -1

**Q\_A6. In which country did you live before you settled in Greece?**

Country 

--	--	--

  
 Does not know / Not answered..... -1 → Q\_A7

**FILTER 1**

If the respondent was born in another country (Question Q\_A1 = 2), continue with QUESTION B\_A6\_1, otherwise continue with QUESTION Q\_A7

**B\_A6\_1. What was the main reason you came to Greece?**

Work..... ☐ 1 → B\_A6\_2  
 Family reasons ..... ☐ 2 → Q\_A7  
 Education or training ..... ☐ 3 → Q\_A7  
 Asylum or international protection..... ☐ 4 → Q\_A7  
 Retirement..... ☐ 5 → Q\_A7  
 Other reason ..... ☐ 6 → Q\_A7  
 Does not know / Not answered..... ☐ 7 → Q\_A7

1st wave:  
2021,2023

**B\_A6\_2. Had you already found a job in Greece before you imigrate to the country?**

Yes..... ☐ 1  
 No..... ☐ 2  
 Does not know / Not answered ..... ☐ -1

1st wave:  
2021,2023

**Q\_A7. Was your father born in Greece or in another Country?**

In Greece ..... ☐ 1 → Q\_A9  
 In another country ..... ☐ 2 → Q\_A8  
 Does not know / Not answered..... ☐ -1 → Q\_A9

**Q\_A8. In which Country was your father born?(If the respondent doesn't know, write in the scallops 000)**

Country of birth     → Q\_A9

Does not know / Not answered..... -1

**Q\_A9. Was your mother born in Greece or in another Country?**

In Greece ..... ☐ 1 → Q\_A11

In another country ..... ☐ 2 → Q\_A10

Does not know / Not answered..... ☐ -1 → Q\_A11

**Q\_A10. In which Country was your mother born? (If the respondent doesn't know, write in the scallops 000)**

Country of Birth

Does not know / Not answered..... -1

**Q\_A11. Do you have Greek citizenship?**

Yes..... ☐ 1 → FILTER 2

No..... ☐ 2 → Q\_A12

Does not know / Not answered..... ☐ -1 → FILTER 2

**Q\_A12. What is your citizenship?**

Citizenship     ↓

Does not know / Not answered..... -1

**FILTER 2**

*The rest of the questionnaire is completed only for persons aged 15-89 years old (Question B1)*

**SECTION B: EMPLOYMENT IN THE REFERENCE WEEK**

**ALL PERSONS 15 TO 89 YEARS OLD SHOULD RESPOND**

**Q\_B1. In the week from Monday the [date] to Sunday the [date], have you done any work for pay or profit, even if it was only for one hour?**

Yes ..... ☐ 1 → Q\_B9

No..... ☐ 2 → Q\_B2

**Q\_B2. From Monday the [date] to Sunday the [date], have you done any unpaid work for a business owned by a family/household member?**

Yes ..... ☐ 1 → Q\_B9

No..... ☐ 2 → Q\_B3

**Q\_B3. You did not worked even for one hour In that week (from Monday the [date] to Sunday the [date]). Did you have a job or a business from which you were absent?**

Yes ..... ☐ 1 → Q\_B5

No..... ☐ 2 → Q\_B4

**Q\_B4. From Monday the [date] to Sunday the [date], have you done any casual or small work for payment, such as babysitting, providing contents for web based platform, harvesting fruits and/or vegetables, etc?**

Yes ..... ☐ 1 → Q\_B9

No..... ☐ 2 → Q\_D1

Does not know / Not answered..... ☐ -1 → Q\_D1

**Q\_B5. What was the main reason for not working from Monday the [date] to Sunday the [date]?**

Holidays ..... ☐ 01 → Q\_B9

Working time arrangements or compensation of overtime ..... ☐ 02 → Q\_B9

Sick leave ..... ☐ 03 → Q\_B9

Maternity or paternity leave..... ☐ 04 → Q\_B9

Job related training ..... ☐ 05 → Q\_B9

Parental leave ..... ☐ 06 → Q\_B6

Off season..... ☐ 07 → Q\_B7

Temporary layoff / suspension of employment contract..... ☐ 07a → Q\_B9

Other reason ..... ☐ 08 → Q\_B9

Having a job not started yet ..... ☐ 09 → Q\_D1

Does not know / Not answered..... ☐ 10 → Q\_B9

**Q\_B6. During this leave, do you continue to receive any job related income or benefit?**

Yes ..... ☐ 1 → Q\_B9

No..... ☐ 2 → Q\_B8

Does not know / Not answered..... ☐ -1 → Q\_B8

**Q\_B7. Do you continue to perform some tasks or duties for the job or business during the off-season?**

Yes ..... ☐ 1 → Q\_B9

No..... ☐ 2 → Q\_D2\_1

Does not know / Not answered..... ☐ -1 → Q\_D1

**Q\_B8. In total, how long do you expect to be absent from work?**

3 months or less ..... ☐ 1 → Q\_B9

More than 3 months ..... ☐ 2 → Q\_D2\_1

Does not know / Not answered..... ☐ -1 → Q\_D1

**Q\_B9. Besides the job or work that you just referred to, do you have any other job as employee, self-employed or family worker?**

No, it is my only job ..... ☐ 1

Yes, one more job ..... ☐ 2

Yes, several other jobs ..... ☐ 3

Does not know / Not answered..... ☐ -1

↓

**SECTION C: EMPLOYMENT CHARACTERISTICS OF THE MAIN JOB. FOR ALL PERSONS 15 TO 89 YEARS OLD WHO HAD A JOB DURING THE REFERENCE WEEK**

**Q\_C1. In what kind of enterprise do you work in your main or unique job?**

\_\_\_\_\_ activity of the local unit

NACE 2 (3-dlgit number) ↓

**Y\_C1. What is the ownership status of the above enterprise?**

Public sector..... ☐ 1

Legal Entities of Public or Private Law or Public Organizations..... ☐ 2

Municipal or communal enterprises..... ☐ 3

Public Utilities ..... ☐ 4

Enterprises managed by the government..... ☐ 6

Private enterprises..... ☐ 7

Does not know / Not answered..... ☐ -1

↓

1st wave

**Q\_C2. What kind of work do you perform in this enterprise?**

\_\_\_\_\_ description of work

ISCO- 08 (4-dlgit number) ↓

**Q\_C3. What is your professional status in this enterprise?**

Self-employed with employees..... ☐ 1

Self-employed without employees..... ☐ 2

Employee..... ☐ 3

Family worker..... ☐ 4

↓

**Y\_C3A1. Are you insured in your current main job?**

Yes ..... ☐ 1

No..... ☐ 2

↓

1st wave

**Y\_C3A2. Number of persons that are working at the local unit of the enterprise**

1 to 10 persons (write the exact number of persons)..... ☐ 11

11 to 19 persons ..... ☐ 12

20 to 49 persons ..... ☐ 13

50 persons or more..... ☐ 14

Do not know but less than 11 persons ..... ☐ 15

Do not know but more than 10 persons ..... ☐ 15

↓

1st wave

**Q\_C4. In which municipality do you work? ( If you do not have a usual place of work, please consider the one where you work**

In the municipality in which s/he lives..... ☐ 1 → Q\_C7

In another municipality in Greece..... ☐ 2 → Q\_C5

Abroad..... ☐ 4 → Q\_C6

**Q\_C5. In which municipality?**

\_\_\_\_\_ Municipality of work

\_\_\_\_\_ Municipality Code → **Q\_C7**

**Q\_C6. In which country?**

\_\_\_\_\_ Country of work

\_\_\_\_\_ Country Code →

**Q\_C7. Which year did you start working for your current employer or as self-employed?**

Year.....       2 years or less -> Y\_C8A1

Does not know / Not answered..... 0000 more than 2 years -> Q\_C8

**Q\_C8. Which month did you start working for this employer or as self-employed?**

\_\_\_\_\_

\_\_\_\_\_ Month Code →

**Y\_C8A1. Which was the most effective method you used to find your current main job?**

Job advertisements (printed or on the Internet)..... ☐ 01 → Y\_C5

Friends, relatives or acquaintances..... ☐ 02 → Y\_C5

Public employment office..... ☐ 03 → Q\_C9

Private employment agency..... ☐ 04 → Y\_C5

Education or training institution, internship or previous work experience..... ☐ 05 → Y\_C5

Contacted employer directly ..... ☐ 06 → Y\_C5

Employer contacted person directly..... ☐ 07 → Y\_C5

Applying for a public competition..... ☐ 08 → Y\_C5

Other method..... ☐ 09 → Y\_C5

Does not know / Not answered..... ☐ 10 → Y\_C5

1st wave

**Y\_C8A2. Did public employment office help you to find this job? (only for persons who started working during the last 12 months)**

Yes ..... ☐ 1

No..... ☐ 2

Does not know / Not answered..... ☐ -1

1st wave

**Q\_C9. Do you have a full-time or a part time job?**

Full time ..... ☐ 1 → Y\_C10B

Part time ..... ☐ 2 → Q\_C10

**Q\_C10. Which is the main reason you work part time?**

He/she is undergoing school education or training ..... ☐ 1 → Y\_C7\_2

Of own illness or disability ..... ☐ 2 → Y\_C7\_2

He/she is looking after children or incapacitated adults ..... ☐ 3 → Y\_C10a

Other family reasons ..... ☐ 4 → Y\_C7\_2

Other personal reasons..... ☐ 5 → Y\_C7\_2

He/she could not find a full-time job..... ☐ 6 → Y\_C7\_2

Other reasons ..... ☐ 7 → Y\_C7\_2

No reason given..... ☐ 8 → Y\_C7\_2

1st wave

**Y\_C10A. What is the main reason for not using (or use to a greater extent), care services for children or incapacitated adults?**

Suitable care services are not available ..... ☐ 1

Suitable care services are not affordable..... ☐ 2

I want to take care my people by myself ..... ☐ 3

Other reason..... ☐ 4

Do not know / Do not answer..... ☐ -1

<b>Y_C10B1. Can you decide on the start and end of your working time? (employees only)</b> Yes, I fully decide myself..... <input type="checkbox"/> 1 Yes, in the context of a flexible working schedule..... <input type="checkbox"/> 2 → <b>Filter 3</b> My working time is fully determined by the employer ..... <input type="checkbox"/> 3	1st wave
<b>Y_C10B2. Can you decide on the start and end of your working time? (for self-employed and family workers)</b> I determine myself my working time ..... <input type="checkbox"/> 1 My working time is determined by clients ..... <input type="checkbox"/> 2 My working time is determined by others..... <input type="checkbox"/> 3	1st wave
<b>FILTER 3</b> If the respondent is self-employed (Question Q_C3 = 1, 2), continue with QUESTION Y_C10B3, otherwise continue with QUESTION Y_C10c	
<b>Y_C10B3. How many clients did you have during the last 12 months?</b> One ..... <input type="checkbox"/> 1 → Y_C10c Two to nine ..... <input type="checkbox"/> 2 → Y_C10b4 Ten or more ..... <input type="checkbox"/> 3 → Y_C10b4 None ..... <input type="checkbox"/> 4 → Y_C10c Did not answer..... <input type="checkbox"/> -1 → Y_C10	1st wave
<b>Y_C10B4. During the last 12 months, did at least 75% of your business income came from only one client;</b> Yes ..... <input type="checkbox"/> 1 No ..... <input type="checkbox"/> 2 Did not answer ..... <input type="checkbox"/> -1	1st wave
<b>Y_C10c. Were you looking for a different or additional paid job or business in the</b> Yes ..... <input type="checkbox"/> 1 No..... <input type="checkbox"/> 2 Did not answer ..... <input type="checkbox"/> -1	1st wave
<b>FILTER 4</b> If the respondent is an employee(Question Q_C3=3), continue with QUESTION Q_C11, otherwise continue with QUESTION Q_C14_2	
<b>Q_C11. Is your working activity regulated by a contract or by a verbal agreement with your employer?</b> Yes..... <input type="checkbox"/> 1 → Q_C12 No, but I am covered by a collective/union agreement ..... <input type="checkbox"/> 2 → Q_C12 No..... <input type="checkbox"/> 3 → Q_C14_2 Did not answer ..... <input type="checkbox"/> -1 → Q_C14_2	
<b>Q_C12. Does this contract (or agreement) specify your working hours?</b> Yes ..... <input type="checkbox"/> 1 → Q_C13 No..... <input type="checkbox"/> 2 → Q_C14_2 Did not answer ..... <input type="checkbox"/> -1 → Q_C14_2	
<b>Q_C13. How many working hours per week are specified in the contract ?</b> Hours specified in the contract (01 - 95)..... <input type="text"/> <input type="text"/> → Q_C14_1 Did not answer..... <input type="checkbox"/> 99 → Q_C14_2	
<b>Q_C14_1. Do you usually work these hours work per week?</b> Yes ..... <input type="checkbox"/> 1 → FILTER 5 No..... <input type="checkbox"/> 2 → Q_C14_2 Did not answer ..... <input type="checkbox"/> -1 → Q_C14_2	

**Q\_C14\_2. How many hours do you usually work per week?**

Number of hours he/she usually works (01 - 95).....   → **FILTER 5**

Hours vary from week to week ..... ☐ 97 → **FILTER 5**

Did not answer ..... ☐ 99 → **Q\_C15**

**Q\_C15. During the last 4 - 12 weeks, how many hours per week did you work on average ?**

Hours worked on average (01 - 95).....

He/she cannot estimate ..... 97 → **FILTER 5**

Did not answer ..... 99

**FILTER 5**

*If the respondent worked during the reference week, continue with Question Q\_C16 otherwise with Question Q\_C29*

**Q\_C16. In the week from Monday [DATE\_1] to Sunday [DATE\_2] were you absent from work for one or more days due to vacation, leave, or public holidays?**

Yes ..... ☐ 1

No ..... ☐ 2

Did not answer ..... ☐ -1

↓

**Q\_C16. In the week from Monday [DATE\_1] to Sunday [DATE\_2] were you absent from work for one or more days due to vacation, leave, or public holidays?**

Yes ..... ☐ 1

No ..... ☐ 2

Did not answer ..... ☐ -1

↓

**Q\_C17. In the week from Monday [DATE\_1] to Sunday [DATE\_2] did you happen to be half-day off your work for one or more days due to vacation, leave, or public holidays?**

Yes ..... ☐ 1

No ..... ☐ 2

Did not answer ..... ☐ -1

↓

**FILTER 6**

*If the respondent answered in the affirmative to one of Questions Q\_C16 or Q\_C17, continue with Question Q\_C18, otherwise continue with Question Q\_C19*

**Q\_C18. How many days have you been away in total? (please include any half-days)**

Days of absence (0.5 - 6.5).....

Did not answer ..... 99

↓

**Q\_C19. In the week from Monday [DATE\_1] to Sunday [DATE\_2] were there any days or half days you were absent from work because of your illness or injury?**

Yes ..... ☐ 1 → **Q\_C20**

No ..... ☐ 2 → **Q\_C21**

Did not answer ..... ☐ -1 → **Q\_C21**

**Q\_C20.. How many days have you been absent in total due to your illness or injury? (please include any half days due to health reasons)**

Days of absence (0,5 - 6,5).....

Did not answer ..... 99

↓

**Q\_C21. In the week from Monday [DATE\_1] to Sunday [DATE\_2] were there any days or half days you were absent from work because of any other reason?**

Yes ..... ☐ 1

No ..... ☐ 2

Did not answer ..... ☐ -1

↓

**Q\_C22. How many days in total have you been away from work due to other reasons? (please include any half days you have been absent for other reasons)**

Days of absence (0.5 - 6.5).....

Did not answer .....

99



**FILTER 7**

*If the respondent is an employee (Question Q\_C3 = 3), continue with Question Q\_C23, otherwise continue with Question Q\_C24*

**Q\_C23. In the week from Monday [DATE\_1] to Sunday [DATE\_2] did you work overtime (i.e. more than the hours specified in your contract)? Please take into account all your overtime work regardless of whether you will be compensated in the future with extra money or with extra days/hours off work.**

Yes ..... ☐ 1 → Q\_C25

No ..... ☐ 2 → Q\_C26

Did not answer ..... ☐ -1 → Q\_C26

**Q\_C24. In the week from Monday [DATE\_1] to Sunday [DATE\_2] did you work more hours than your usual hours?**

Yes ..... ☐ 1 → Q\_C25

No ..... ☐ 2 → Q\_C26

Did not answer ..... ☐ -1 → Q\_C26

**Q\_C25. How many hours did you work overtime during the reference week?**

Hours worked overtime (0.5 - 95).....

Did not answer .....

97



**Q\_C26. In the week from Monday [DATE\_1] to Sunday [DATE\_2], how many hours per week did you work in the above job ?**

Hours worked in total (01 - 95).....

Did not answer .....

97



**FILTER 8**

*If the respondent holds a second job (Question Q\_B9 = 2, 3), continue with Question Q\_C27, otherwise continue with Question Q\_C29.*

**Q\_C27. How many hours per week do you usually work in your second job?**

Usual hours (01 - 95).....

Hours vary from week to week .....

Did not answer.....

97

-1



**Q\_C28. In the week from Monday [DATE\_1] to Sunday [DATE\_2], how many hours did you work in your second job ?**

Hours worked in total (01 - 95).....

Did not answer .....

97



**Q\_C29. Do you wish to work more hours? (provided that this would result in an increase of your income)**

Yes ..... ☐ 1

No ..... ☐ 2

Did not answer ..... ☐ -1

☐☐☐

**Y\_C29A1. How many hours do you wish to work in total per week?**

Hours he/she wishes to work in total (01 - 98) .....

Did not answer .....

97



1st wave



**FILTER 9**

If the respondent wishes to work more hours (Question Q\_C29 = 1) , continue with Question Q\_C30, otherwise continue with Question Q\_C32

**Q\_C30. If you had the ability to work more hours (at your present job or at another job) would you be able to start working more hours within two weeks?**

- Yes ..... ☐ 1 → **FILTER 10**  
 No ..... ☐ 2 → **Q\_C: Q\_C31**

**Q\_C31. Why couldn't you?**

- To complete his/her training ..... ☐ 1  
 Own illness or dissability ..... ☐ 2  
 Care responsibilities ..... ☐ 3 → **Y\_C31A**  
 Other family reasons ..... ☐ 4 → **FILTER 10**  
 Other personal reasons ..... ☐ 5  
 Other reasons ..... ☐ 6  
 Not stated ..... ☐ 7

1st wave

**Y\_C31A. What is the main reason for not using (or use to a greater extent), care services for children or incapacitated adults?**

- Suitable care services are not available ..... ☐ 1  
 Suitable care services are not affordable..... ☐ 2  
 I want to take care my people by myself ..... ☐ 3  
 For another reason..... ☐ 4  
 Do not know / Do not answer..... ☐ -1

**FILTER 10**

If the respondent is an employee (Question Q\_C3 = 3, continue with Question Q\_C32, otherwise continue with Question Y\_C33C

**Q\_C32. Is this job permanent or temporary?**

- Permanent (civil servants) ..... ☐ 1 → **Y\_C33a1**  
 Work contract of unlimited duration ..... ☐ 2 → **Y\_C33a1**  
 Temporary ..... ☐ 3 → **Y\_C32a**

1st wave

**Y\_C32A . Which is the main reason you have a temporary job?**

- He/She is apprentice in EPAL or ATEL..... ☐ 0  
 He/She is in training..... ☐ 1  
 He/She could not find a permanent job..... ☐ 2  
 He/She did not want a permanent job..... ☐ 3  
 It is a contract for a probationary period..... ☐ 4  
 It is temporary but no reason is given ..... ☐ 5  
 Other reason..... ☐ 6  
 Does not know / Not answered ..... ☐ -1



**Q\_C33. Total duration of work contract of limited duration**

- Less than a month ..... ☐ 1  
 From 1 to less than 3 months ..... ☐ 2  
 From 3 to less than 6 months ..... ☐ 3  
 From 6 to less than 12 months ..... ☐ 4  
 From 12 to less than 18 months ..... ☐ 5  
 From 18 to less than 24 months ..... ☐ 6  
 From 24 to less than 36 months ..... ☐ 7  
 36 months or more ..... ☐ 8



1st wave

<b>Y_C33A1. Do you supervise or co-ordinate other employees?</b>			
Yes .....	<input type="checkbox"/> 1	↓	1st wave
No .....	<input type="checkbox"/> 2		
Did not answer .....	<input type="checkbox"/> -1		
<b>Y_C33A2. Do you have contract with a temporary employment agency?</b>			
Yes .....	<input type="checkbox"/> 1	↓	1st wave
No .....	<input type="checkbox"/> 2		
Did not answer .....	<input type="checkbox"/> -1		
<b>Y_C33B1. Which is the Organization of your principal insurance?</b>			
Social Insurance Organization (IKA) .....	<input type="checkbox"/> 01 → Y_C33b2	↓	1st wave
National Agricultural Insurance Institute (OGA) .....	<input type="checkbox"/> 02 → Y_C33b2		
Civil Servants' Fund .....	<input type="checkbox"/> 03 → Y_C33b2		
TSMEDE (Engineers insurance fund) .....	<input type="checkbox"/> 04 → Y_C33b2		
TSAY (Medics insurance fund) .....	<input type="checkbox"/> 05 → Y_C33b2		
ETAA-TAN (Lawyers insurance fund) .....	<input type="checkbox"/> 06 → Y_C33b2		
ETAA-TAN (Lawyers insurance fund) .....	<input type="checkbox"/> 07 → Y_C33b2		
Other Insurance Funds .....	<input type="checkbox"/> 09 → Y_C33b2		
Does not know / Not answered .....	<input type="checkbox"/> -1 → Y_C33b2		
<b>Y_C33B2. When did you first work with insurance?</b>			
Year.....		↓	1st wave
<b>Y_C33B3. Are you insured for heavy and arduous professions?</b>			
Yes .....	<input type="checkbox"/> 1	↓	1st wave
No .....	<input type="checkbox"/> 2		
<b>Y_C33B4. Are you fully covered by social security in your main job?</b>			
Yes, I am insured for all my work hours (full insurance) .....	<input type="checkbox"/> 1	↓	1st wave
No, I am insured for some of my working hours (partial insurance) .....	<input type="checkbox"/> 2		
Did not answer .....	<input type="checkbox"/> -1		
<b>Y_C33B5. What is the reason you are not covered by social security for all your working hours (or no insured at all) in your main job?</b>			
The employer demanded it .....	<input type="checkbox"/> 1	↓	1st wave: 2021,2023
Due to an agreement with the employer .....	<input type="checkbox"/> 2		
Did not answer .....	<input type="checkbox"/> -1		
<b>B_C33_1. Are you doing shift work?</b>			
Usually .....	<input type="checkbox"/> 1	↓	1st wave: 2021,2023
Sometimes .....	<input type="checkbox"/> 2		
Never.....	<input type="checkbox"/> 3		
Did not answer .....	<input type="checkbox"/> 4		
<b>B_C33_2. How often did you work in the evening during the last 4 weeks? (before the end of the reference week)</b>			
At least half of the working days .....	<input type="checkbox"/> 1	↓	1st wave: 2021,2023
Less often than half of the working days .....	<input type="checkbox"/> 2		
Never .....	<input type="checkbox"/> 3		
Did not answer .....	<input type="checkbox"/> 4		
<b>B_C33_3. How often did you work in the night during the last 4 weeks? (before the end of the reference week)</b>			
At least half of the working days .....	<input type="checkbox"/> 1	↓	1st wave: 2021,2023
Less often than half of the working days .....	<input type="checkbox"/> 2		
Never .....	<input type="checkbox"/> 3		
Did not answer .....	<input type="checkbox"/> 4		

**B\_C33\_4. How often did you work on Sunday during the last 4 weeks? (before the end of the reference week)**

- At least twice ..... ☐ 1
- Once ..... ☐ 2
- Never ..... ☐ 3
- Did not answer ..... ☐ 4

1st wave:  
2021,2023

**B\_C33\_5. How often did you work on Sunday during the last 4 weeks? (before the end of the reference week)**

- At least twice ..... ☐ 1
- Once ..... ☐ 2
- Never ..... ☐ 3
- Did not answer ..... ☐ 4

**Y\_C33C. How often did you work at home during the last 4 weeks? (before the end of the reference week)**

- At least half of the working days ..... ☐ 1
- Less often than half of the working days ..... ☐ 2
- Never ..... ☐ 3
- Did not answer ..... ☐ 4

#### **FILTER 11**

*If the respondent has a 2nd job (Question Q\_B9 = 2, 3), continue with Question Q\_C34.  
If he/she is under 75 years old and has only one job, continue with Question Q\_E19, otherwise continue with Question Q\_F19*

**Q\_C34. In what kind of enterprise (local unit) do you work in your second job?**

\_\_\_\_\_ activity of the local unit

\_\_\_\_\_ NACE 2 (2 digit number)

**Q\_C35. What is your professional status in this enterprise?**

- Self-employed with employees ..... ☐ 1
- Self-employed without employees ..... ☐ 2
- Employee ..... ☐ 3
- Family worker ..... ☐ 4

#### **SECTION D**

#### **PREVIOUS WORK EXPERIENCE FOR PERSONS NOT IN EMPLOYMENT, 15-89 YEARS OLD**

**Q\_D1. Though you are not in employment now, have you ever worked in the past in a regular job? (for pay or profit, or helping in a family business)**

- No ..... ☐ 1 If AGE < 75 -> E1
- Only occasional jobs ..... ☐ 2 → Q\_D2
- Yes ..... ☐ 3 → Q\_D2

**Q\_D2. When did you work for the last time?**

Year \_\_\_\_\_

Did not answer ..... 0000

**Q\_D2\_1. When did you start being absent from work? (for people who are absent from work, Q\_B7, Q\_B8)**

- This year ..... ☐ 1
- Last year ..... ☐ 2
- Two years or more ..... ☐ 3

**Q\_D2\_2. Which year ?**

Year \_\_\_\_\_

Did not answer ..... 0000

**Q\_D3\_3. Which month did you stop working?**

Month \_\_\_\_\_

Did not answer ..... 

--	--

 00**FILTER 12***Question Q\_D3 is addressed only to persons concerns only to persons that stopped working during the last three years***D3. Which month did you work for the last time?**

Month \_\_\_\_\_

Did not answer ..... 

--	--

 99**FILTER 13***Questions Q\_D4 - Y\_D3 are addressed only to persons that stopped working during the last 8 years***Q\_D4. Why did you stop your last job?**

- Dismissed or the enterprise closed ..... ☐ 0
- Because his/her job was of limited duration and ended ..... ☐ 1
- He/She is looking after children or incapacitated adults ..... ☐ 2
- For other family reasons ..... ☐ 3
- Because of training or education ..... ☐ 4
- Because of own illness or disability to work ..... ☐ 5
- Retirement ..... ☐ 6
- Other personal reasons ..... ☐ 7
- Due to compulsory military service ..... ☐ 8
- For other reasons..... ☐ 9



1st wave

**Y\_D1. In what kind of enterprise (local unit) did you work in your last job?**

\_\_\_\_\_

Activity of the local unit

NACE 2 (3-digit code)



1st wave

**Y\_D2 What kind of work did you perform in this enterprise?**

\_\_\_\_\_

Description of work

ISCO- 08 (3-digit code)



1st wave

**Y\_D3.. What is your professional status in this enterprise?**

- Self-employed with employees ..... ☐ 1
- Employee ..... ☐ 3
- Family worker ..... ☐ 4

**SECTION E: SEARCH FOR EMPLOYMENT***(For persons 15 to 74 years old not working the reference week)***Q\_E1. In the 4 weeks ending Sunday the [DATE\_2], have you done anything to find work? Please take into account also any**

- Yes ..... ☐ 1 → Q\_E7
- No ..... ☐ 2 → Q\_E2

**Q\_E2. Have you perhaps already found a job?**

- Yes ..... ☐ 1 → Q\_E3
- No ..... ☐ 2 → Q\_E4
- Did not answer ..... ☐ -1 → Q\_E4

**Q\_E3. When will you start this job?**

- Within the next 3 months ..... ☐ 1 → Q\_E16b
- In more than 3 months ..... ☐ 2 → Q\_E16b
- Already started (between the reference week and the interview)..... ☐ 3 → Q\_E18
- Did not answer ..... ☐ -1 → Q\_E16b

**Q\_E4. Even though you were not looking for work, do you want to work?**

- Yes ..... ☐ 1 → Q\_E5
- No ..... ☐ 2 → Q\_E6
- Did not answer ..... ☐ -1 → Q\_E19

**Q\_E5. What is the main reason you were not looking for work in that period?**

- No suitable job is available..... ☐ 1 → Q\_E16b
- Education or training..... ☐ 2 → Q\_E16b
- Own illness or disability..... ☐ 3 → Q\_E16b
- Care responsibilities..... ☐ 4 → Y\_E5A
- Other family reasons..... ☐ 5 → Q\_E16b
- Other personal reasons..... ☐ 6 → Q\_E16b
- Awaiting recall to work (person on lay-off)..... ☐ 7 → Q\_E16b
- Any other reason..... ☐ 8 → Q\_E16b
- Cannot say..... ☐ 9 → Q\_E16b

1st wave

**Y\_E5A. What is the main reason for not using (or use to a greater extent), care services for children or incapacitated adults?\***

- Suitable care services are not available ..... ☐ 1 → Q\_E16b
- Suitable care services are not affordable..... ☐ 2 → Q\_E16b
- I want to take care my people by myself ..... ☐ 3 → Q\_E16b
- For another reason..... ☐ 4 → Q\_E16b
- Do not know / Do not answer..... ☐ -1 → Q\_E16b

**Q\_E6. What is the main reason you do not want work?**

- Education or training..... ☐ 1 → Q\_E19
- Own illness or disability..... ☐ 2 → Q\_E19
- Care responsibilities ..... ☐ 3 → Y\_E6A
- Other family reasons ..... ☐ 4 → Q\_E19
- Other personal reasons..... ☐ 5 → Q\_E19
- Retirement ..... ☐ 6 → Q\_E19
- Any other reason..... ☐ 7 → Q\_E19
- Cannot say ..... ☐ 8 → Q\_E19

1st wave

**Y\_E6A. What is the main reason for not using (or use to a greater extent), care services for children or incapacitated adults?\***

- Suitable care services are not available ..... ☐ 1 → Q\_E19
- Suitable care services are not affordable..... ☐ 2 → Q\_E19
- I want to take care my people by myself ..... ☐ 3 → Q\_E19
- For another reason..... ☐ 4 → Q\_E19
- Do not know / Do not answer..... ☐ -1 → Q\_E19

**Q\_E7. In order to find a job, have you placed or answered job advertisements?**

- Yes ..... ☐ 1 → Q\_E16b
- No..... ☐ 2 → Q\_E8

**Q\_E8. Studied job advertisements?**

- Yes ..... ☐ 1 → Q\_E16b
- No..... ☐ 2 → Q\_E9

**Q\_E9. Placed or updated a Curriculum Vita online?**

- Yes ..... ☐ 1 → Q\_E16b
- No..... ☐ 2 → Q\_E10

<b>Q_E10. Contacted employers directly?</b>		
Yes .....	<input type="checkbox"/> 1 →	Q_E16b
No.....	<input type="checkbox"/> 2 →	Q_E11

<b>Q_E11. Asked friends or relatives?</b>		
Yes .....	<input type="checkbox"/> 1 →	Q_E16b
No.....	<input type="checkbox"/> 2 →	Q_E12

<b>Q_E12. Contacted a public employment centre?</b>		
Yes .....	<input type="checkbox"/> 1 →	Q_E16b
No.....	<input type="checkbox"/> 2 →	Q_E13

<b>Q_E13. Contacted a private employment agency?</b>		
Yes .....	<input type="checkbox"/> 1 →	Q_E16b
No.....	<input type="checkbox"/> 2 →	Q_E14

<b>Q_E14. Taken a test, interview or examination?</b>		
Yes .....	<input type="checkbox"/> 1 →	Q_E16b
No.....	<input type="checkbox"/> 2 →	Q_E15

<b>Q_E15. Made preparations to set up a business?</b>		
Yes .....	<input type="checkbox"/> 1	↓
No.....	<input type="checkbox"/> 2	

<b>Q_E16. If you had found a job in the week ending Sunday the [date], could you have started it within two weeks following that date?</b>		
Yes .....	<input type="checkbox"/> 1 →	Q_E18
No.....	<input type="checkbox"/> 2 →	Q_E17

<b>Q_E16α. If you had found a job a week ago, could you start it by the end of next week;</b>		
Yes .....	<input type="checkbox"/> 1 →	Q_E18
No.....	<input type="checkbox"/> 2 →	Q_E17


<b>Q_E17. What is the main reason for which you cannot start in this period?</b>		
Education or training.....	<input type="checkbox"/> 1 →	Q_E18
Own illness or disability.....	<input type="checkbox"/> 2 →	Q_E18
Care responsibilities .....	<input type="checkbox"/> 3 →	Y_E17A
Other family reasons .....	<input type="checkbox"/> 4 →	Q_E18
Other personal reasons.....	<input type="checkbox"/> 5 →	Q_E18
Any other reason.....	<input type="checkbox"/> 6 →	Q_E18
Cannot say .....	<input type="checkbox"/> 7 →	Q_E18

<b>Y_E17A. What is the main reason for not using (or use to a greater extent), care services for children or incapacitated adults?☒</b>		
Suitable care services are not available .....	<input type="checkbox"/> 1	↓
Suitable care services are not affordable.....	<input type="checkbox"/> 2	
I want to take care my people by myself .....	<input type="checkbox"/> 3	
For another reason.....	<input type="checkbox"/> 4	
Do not know / Do not answer.....	<input type="checkbox"/> -1	

1st wave

**Q\_E18. How long were you searching for employment (in months)?**

Less than one month .....	<input type="checkbox"/> 1	
1– 2 months.....	<input type="checkbox"/> 2	
3– 5 >> .....	<input type="checkbox"/> 3	
6–11 >> .....	<input type="checkbox"/> 4	
12–17 >> .....	<input type="checkbox"/> 5	
18–23 >> .....	<input type="checkbox"/> 6	
24–47 >> .....	<input type="checkbox"/> 7	
4 years or longer .....	<input type="checkbox"/> 8	
Does not know / Not answered.....	<input type="checkbox"/> 9	

**Q\_E19. Q\_E19. Are you registered at a public employment office? ( It concerns all persons)**

Yes .....	<input type="checkbox"/> 1	→ Q_E20
No .....	<input type="checkbox"/> 2	→ FILTER ADHOC_1
Did not answer .....	<input type="checkbox"/> -1	

**Q\_E20. Are you registered as a job seeker?**

Yes .....	<input type="checkbox"/> 1	→ Q_E21
No .....	<input type="checkbox"/> 2	→ FILTER ADHOC_1
Did not answer .....	<input type="checkbox"/> -1	

**Q\_E21. Do you receive any allowance from the public employment office?**

Yes .....	<input type="checkbox"/> 1	
No .....	<input type="checkbox"/> 2	→ FILTER ADHOC_1
Did not answer .....	<input type="checkbox"/> -1	

adhoc 2023

**FILTER ADHOC\_1**  
Question A D23\_1 is answered by people aged 50 to 75. Otherwise, continue with Question Q\_F1

**AD23\_1. Do you receive an old-age pension? (EFKA, OGA, Legal Fund, etc., which came from your insurance during your years of work as an employee or self-employed)**

Yes .....	<input type="checkbox"/> 1	→ AD23_2
No .....	<input type="checkbox"/> 2	→ AD23_5

adhoc 2023

**AD23\_2 From what year did you start receiving this pension?**

Year .....	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	→ AD23_3
Did not answer .....	0000	→ AD23_4


adhoc 2023

**AD23\_3. What month did you start receiving this pension?**

Month .....	<input type="text" value=""/> <input type="text" value=""/>	↓
Did not answer .....	00	

adhoc 2023

**AD23\_4. When you started receiving your old-age pension, was it reduced or increased compared to normal pension?**

Reduced due to early retirement .....	<input type="checkbox"/> 1	
Increased due to longer stay in work .....	<input type="checkbox"/> 2	
Normal .....	<input type="checkbox"/> 3	
Did not answer .....	<input type="checkbox"/> -1	

adhoc 2023

**AD23\_5. Do you receive an old-age pension from private insurance?**

Yes .....	<input type="checkbox"/> 1	→ -IF AD23_1=1 -> A23_8 - IF AD23_1 ≠1 -> A23_6
No .....	<input type="checkbox"/> 2	→ AD23_8
Did not answer .....	<input type="checkbox"/> -1	

adhoc 2023

**AD23\_6. From what year did you start receiving this pension?**

Year .....	<input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>	→ AD23_7
Did not answer .....	0000	→ AD23_8

adhoc 2023

**AD23\_7. What month did you start receiving this pension?**

Month .....	<input type="text" value=""/> <input type="text" value=""/>	↓
Did not answer .....	00	

**AD23\_8. Do you receive a pension from a professional insurance fund?**

Yes ..... ☐ 1 → - IF AD23\_1=1 -> A23\_11  
 No ..... ☐ 2 → - IF AD23\_1 ≠1 -> A23\_9  
 Did not answer ..... ☐ -1 → AD23\_11

ad hoc 2023

**AD23\_9. From what year did you start receiving this pension?**

Year .....     → AD23\_10  
 Did not answer ..... 0000 → AD23\_11

ad hoc 2023

**AD23\_10. What month did you start receiving this pension?**

Month .....   ↓  
 Did not answer ..... 00

**AD23\_11. Do you receive a disability pension or allowance?**

Yes ..... ☐ 1 → AD23\_12  
 No ..... ☐ 2 → FILTER ADHOC\_2  
 Did not answer ..... ☐ -1

ad hoc 2023

**AD23\_12. From what year did you start receiving this pension?**

Year .....     → AD23\_13  
 Did not answer ..... 0000 → FILTER ADHOC\_2

ad hoc 2023

**AD23\_13. What month did you start receiving this pension?**

Month .....   → FILTER ADHOC\_2  
 Did not answer ..... 00

ad hoc 2023

**ΦΙΛΤΡΟ ADHOC\_2**

- If he/she receives of an old-age pension or occupational or private (AD23\_1 ή AD23\_5 ή AD23\_8=1) -> AD23\_15  
 - If he/she receives of neither an old-age pension nor an occupational pension (AD23\_1≠1 & AD23\_8≠1) -> AD23\_14

**AD23\_14. How do you plan to secure a pension right? (Multiple replies accepted)**

Through public insurance (EFKA, etc.) ..... ☐ 1 If he/she receives a private  
 Through parallel pension by the employer ..... ☐ 2 pension (AD23\_5 = 1) ->  
 Through private insurance ..... ☐ 3 AD23\_15  
 He/she does not seek to establish a pension right ..... ☐ 4 Otherwise -> Q\_F1

ad hoc 2023

**AD23\_15. You told us that you are receiving a pension (old-age or occupational or private). What did you do 6 months after**

I stopped working ..... ☐ 1 → AD23\_16  
 I continued to work without any change ..... ☐ 2 → AD23\_17  
 I continued to work with some changes (e.g., part-time) ..... ☐ 3  
 I wasn't working before I retired ..... ☐ 4 → AD23\_18

ad hoc 2023

**AD23\_16. What was the main reason you stopped working?**

He/she was offered economic benefits ..... ☐ 1  
 Reached mandatory retirement age ..... ☐ 2  
 He was entitled to a pension and preferred to stop working ..... ☐ 3  
 Other, work-related reasons ..... ☐ 4 → AD23\_18  
 Health problems /incapacity for work ..... ☐ 5  
 Family reasons/obligation to care for others ..... ☐ 6  
 Other reason ..... ☐ 7  
 Did not answer ..... ☐ -1

ad hoc 2023



**AD23\_17. Why did you continue to work after you retired?**

- It was necessary for economic reasons ..... ☐ 1
- It was particularly advantageous for economic reasons ..... ☐ 2
- My spouse was still an employee ..... ☐ 3
- I loved my work/being active ..... ☐ 4 → Q\_F1
- To stay sociable ..... ☐ 5
- For other reasons ..... ☐ 6
- Did not answer ..... ☐ -1

ad hoc 2023

**AD23\_18. After your retirement, did you work again even for just once?**

- Yes, in a job that lasted at least 3 months ..... ☐ 1 → AD23\_19
- Yes, but less than 3 months ..... ☐ 2
- No, never ..... ☐ 3 → Q\_F1
- Did not answer ..... ☐ -1

ad hoc 2023

**AD23\_19. What was the main reason you went back to work after retiring?**

- It was necessary for economic reasons ..... ☐ 1
- It was particularly advantageous for economic reasons ..... ☐ 2
- My spouse was still an employee ..... ☐ 3
- I loved my work/being active ..... ☐ 4
- To stay sociable ..... ☐ 5
- For other reasons ..... ☐ 6
- Did not answer ..... ☐ -1

**SECTION F: EMPLOYMENT STATUS (VIEW OF THE RESPONDENT)**

RESPOND ALL PERSONS 15 TO 89 YEARS OLD

**Q\_F1. What do you mainly consider yourself?**

- Employed ..... ☐ 1
- Unemployed ..... ☐ 2
- Retired ..... ☐ 3
- Not in employment due to permanent healthy problems..... ☐ 4
- Pupil, student ..... ☐ 5
- Housekeeper ..... ☐ 6
- Provide social services ..... ☐ 7
- Other..... ☐ 8

**SECTION G: EDUCATION**

FOR ALL PERSONS 15 TO 89 YEARS OLD

**Q\_G1. Which is the highest level of education you have successfully completed?**

- Less than Primary School ..... ☐ 01 → ΦΙΑΤΡΟ 14
- Primary education (6 years-demotiko)..... ☐ 02 → Y\_G2A2
- Gymnasio (3-years) - "second chance" school is included..... ☐ 03 → Y\_G2A2
- Gymnasio (6-years), General Lyceum..... ☐ 04 → Y\_G2A2
- Lower Technical School (For elementary school graduates- old TES) ..... ☐ 05 → Y\_G2A1
- Technical Vocational Training (1st cycle) ..... ☐ 06 → Y\_G2A1
- Technical Vocational Training (2nd cycle) ..... ☐ 07 → Y\_G2A1
- Professional school (EPAS) ..... ☐ 08 → Y\_G2A1
- Professional Lyceum (old TEL or EPAL)..... ☐ 09 → Y\_G2A1
- Public or private vocational institute (IEK, IIEK) ..... ☐ 10 → Y\_G2A1
- College..... ☐ 11 → Y\_G2A1
- Upper secondary level Technical-Vocational Schools ..... ☐ 12 → Y\_G2A1
- Pedagogical Academies ..... ☐ 13 → Y\_G2A1
- SELETE ..... ☐ 14 → Y\_G2A1
- Technological Education Institutions (ATEI/TEI/KATEE)..... ☐ 15 → Y\_G2A1
- University degree (4 years duration)..... ☐ 16 → Y\_G2A1
- University degree (5 years duration)..... ☐ 17 → Y\_G2A1
- Postgraduate studies ..... ☐ 18 → Y\_G2A1
- Ph.D ..... ☐ 19 → Y\_G2A1
- Other ..... ☐ 20 → Q\_G2

<b>Q_G2. Can you describe which school or program you have completed?</b> <div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	↓	Educational Level Code	1st wave
<b>Y_G2A1. Field of your highest level of education or training succesfully completed</b> <div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	↓	Study Field Code	1st wave
<b>Y_G2A2. Year when highest level of education or training was succesfully completed</b> Year of completion of studies <div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	↓		1st wave

**FILTER 14**  
 If the respondent is 20 to 34 years old and has continued his studies after Gymnasium, continue with Question Y\_G2B1.  
 Otherwise continue with Question Q\_G3

<b>Y_G2B1. During your studies( at the moment,the highest completed level) have you worked even 1 month?</b>				1st wave
Yes .....	<input type="checkbox"/> 1	→ Y_G2b2		
No.....	<input type="checkbox"/> 2	→ FILTER 16		
Did not answer .....	<input type="checkbox"/> -1			

<b>Y_G2B2. Was this work part of your studies?</b>				1st wave
Yes .....	<input type="checkbox"/> 1	→ Y_G5		
No.....	<input type="checkbox"/> 2	→ FILTER 16		
Did not answer .....	<input type="checkbox"/> -1			


<b>Y_G2B3. How long did this last? (in total)</b>				1st wave
Less than 1 month .....	<input type="checkbox"/> 1	→ FILTER 16		
1 to 6 months.....	<input type="checkbox"/> 2	→ Y_G2b4		
7 months or more.....	<input type="checkbox"/> 3	→ Y_G2b4		
Did not answer .....	<input type="checkbox"/> -1	→ FILTER 16		

<b>Y_G2B4 .Were you paid for this job?</b>				
Yes .....	<input type="checkbox"/> 1	↓		
No.....	<input type="checkbox"/> 2			
Did not answer .....	<input type="checkbox"/> -1			

<b>Q_G3. Did you attend any learning activity inside the regular education system within the last four weeks?</b>				
Yes, .....	<input type="checkbox"/> 1	→ Q_G4		
No, because of holidays .....	<input type="checkbox"/> 2	→ Q_G4		
No, because I do not attend any studies .....	<input type="checkbox"/> 3	→ B_G3		
Did not answer .....	<input type="checkbox"/> -1	→ B_G3		

<b>Q_G4..What school or institution did you attend or what training course did you receive?</b>				
Primary education (6 years-demotiko) .....	<input type="checkbox"/> 01	→ Q_G5		
Gymnasio (3-years) .....	<input type="checkbox"/> 02	→ Q_G5		
Proffecional school (EPAS, EPAL)) .....	<input type="checkbox"/> 03	→ Q_G5		
General Lyceum .....	<input type="checkbox"/> 04	→ Q_G5		
Public or private vocational institute (IEK, IIEK).....	<input type="checkbox"/> 05	→ Q_G5		
Upper secondary level Technical-Vocational Schools .....	<input type="checkbox"/> 06	→ Q_G5		
Technological Education Institutions (ATEI) .....	<input type="checkbox"/> 07	→ Q_G5		
Univesity (AEI) .....	<input type="checkbox"/> 08	→ Q_G5		
Postgraduate student after completing ATEI. ....	<input type="checkbox"/> 09	→ Q_G5		
Postgraduate student after completing AEI. ....	<input type="checkbox"/> 10	→ Q_G5		
Ph.D student .....	<input type="checkbox"/> 11	→ Q_G5		
Other .....	<input type="checkbox"/> 12	→ Q_G5		


**Q\_G5. During the last four weeks, did you participated in study or training program outside the formal education system? (We are interested in any kind of program either in your job or in your leisure time). In particular, did you attend any of the**

Group lessons ( for example, in tutoring schools, cosnervatories, dancing or	<input type="checkbox"/>	1	
Seminar, workshop, conference (vocational training, psychology, photography, first aid, etc).....	<input type="checkbox"/>	2	
Distance learning (via internet or email, e-learning).....	<input type="checkbox"/>	3	
Private lessons and tutoring ((for example, mathematics, foreign languages, driving, piano lessons, dog training, etc).....	<input type="checkbox"/>	4	
I didn't attend any program.....	<input type="checkbox"/>	5	
Did not answer.....	<input type="checkbox"/>	6	

**FILTER 15**

If the respondent attended even one educational activity (Question Q\_G5 =1-4) continue with Question Q\_G6, otherwise continue with B\_G6\_1

**Q\_G6. Did you attend any of these activities for professional (job related) reasons?**

- |   |                          |    |   |
|---|--------------------------|----|---|
| All educational activities were only for professional reasons ..... | <input type="checkbox"/> | 1  |  |
| Personal and professional reasons .....                             | <input type="checkbox"/> | 2  |   |
| All activities were only for personal reasons .....                 | <input type="checkbox"/> | 3  |   |
| Did not answer .....  | <input type="checkbox"/> | -1 |   |

1st wave

**SECTION I: INCOME**

**RESPOND ALL PERSONS 15-89 YEARS OLD (only 1st wave)**

**Y\_I1. What were your income sources during the previous quarter?**

- |  |                          |   |  |
|--|--------------------------|---|--|
| Work .....   | <input type="checkbox"/> | 1 | <p>If employees (Y_C3=3) -&gt; Y_I2</p> <p>Otherwise -&gt; END</p> |
| Old age pension.....                               | <input type="checkbox"/> | 2 |  |
| Survivors pension .....                            | <input type="checkbox"/> | 3 |  |
| Disability pension.....                            | <input type="checkbox"/> | 4 |  |
| Income from property.....                          | <input type="checkbox"/> | 5 |  |
| From other household members .....                 | <input type="checkbox"/> | 6 |  |
| From persons which are not household members ..... | <input type="checkbox"/> | 7 |  |
| Benefits or allowances.....                        | <input type="checkbox"/> | 8 |  |
| Did not answer .....                               | <input type="checkbox"/> | 9 |  |

1st wave

**THE FOLLOWING QUESTIONS ARE ANSWERED ONLY BY EMPLOYEES**

**Y\_I2.What was you total net salary from your main job (please refer to the last month)?**

Amount in euro	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	→ Y_I4
Don't know /Don't answer .....	9999					→ Y_I3

1st wave

**Y\_I3. Could you tell us which of the following categories your net monthly salary fall under?**

- |                          |                          |   |   |
|--------------------------|--------------------------|---|---|
| Up to 500€.....          | <input type="checkbox"/> | 1 |  |
| From 501€ to 1000€.....  | <input type="checkbox"/> | 2 |   |
| From 1001€ to 1500€..... | <input type="checkbox"/> | 3 |   |
| From 1501€ to 2000€..... | <input type="checkbox"/> | 4 |   |
| From 2001€ to 6000€..... | <input type="checkbox"/> | 5 |   |
| Over 6000€ .....         | <input type="checkbox"/> | 6 |   |
| Do not answer .....      | <input type="checkbox"/> | 9 |   |

1st wave

**Y\_I4. Do you occasionally receive extra allowances or payments (for example, leave allowance, balance sheet allowance, etc.)?**

- |                      |                          |    |       |
|----------------------|--------------------------|----|-------|
| Yes .....            | <input type="checkbox"/> | 1  | → END |
| No.....              | <input type="checkbox"/> | 2  |       |
| Did not answer ..... | <input type="checkbox"/> | -1 |       |

1st wave

**Y\_I5. What is the amount of these extra allowances per year?**

	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	→ Y_I6
Did not answer .....	9999					→ END

1st wave

**Y\_I6. Did the last month saraly you mentioned before contain any additional payment?**

- |                      |                          |    |        |
|----------------------|--------------------------|----|--------|
| Yes .....            | <input type="checkbox"/> | 1  | → Y_I7 |
| No.....              | <input type="checkbox"/> | 2  | → END  |
| Did not answer ..... | <input type="checkbox"/> | -1 |        |

1st wave

**Y\_I7. How much was that payment?**

	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Did not answer .....	9999					