

Introduction:

Ask to speak to an adult responsible for the family (father, mother, ...). Give your name and explain that you are calling on behalf of the Municipality. Ask the person if they will participate in the survey.

(If they agree, click 'New interview')

New interview

Credits & disclaimer

ID-code: Dwelling code Interviewer code Spatial unit (e.g. City quarter or neighbourhood) 1st Question ☐ Automatically save all entries

1. Are you male or female?

□ Male (1) □ Female (2)

■ Missing data

Previous

2.	How many people permanently dwelling in total ?	live in the
En	ter number of people:	
	☐ Missing data	
	Previous	Next

3.	How old are you	old are you (and the others living			
	in the dwelling)?	(Be sure the person being interviewed is 18 or over. Ask for			
		the age of each inhabitant. Less than one year of age $= 0$)			

3_1 Interviewed person:	3_6 Person 6:	
3_2 Person 2:	3_7 Person 7:	
3_3 Person 3:	3_8 Person 8:	
3_4 Person 4:	3_9 Person 9:	
3_5 Person 5:	3_10 Person 10:	

☐ Missing data

Previous

4. How many years have you lived in this dwelling?

(Enter a year. Round down. Less than one year = 0; 2.5 years = 2; "Don't know" = Missing data)

Years

Missing data

Previous

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5. Which option describes your housing type?

(Read the options)

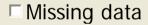
- □ Detached single-family house (1)
- □ Semi-detached house or duplex (2)
- □ Terraced housing unit (3)
- □ Apartment building with up to 3 storeys (4)
- □ Apartment building with 4 to 8 storeys (5)
- □ Apartment building with 9 or more storeys (6)

■ Missing data

Previous

6. What floor do you live on?

(Ground floor = 0; Basement = -1. If living in a house ask on what level the main access to the dwelling is located)



Previous

7.	What is the name of the neighbourhood where your dwelling is located?			
	□ Missing data			
	Previous	Next		

(Read the options. Services include banks, post office, markets, grocery stores, shops, etc.)

- □ In an urban center with many services and comercial establishments (1)
- In a suburban or residential area with some services and comercial establishments (2)
- □ In a suburban neighbourhood that is entirely residential
- □ In a rural area (4)
- Missing data

Previous

8. Which comes closest to describing the dwelling circumstances? (Read the options)

□On a busy street (1)

□On a less-busy street (2)

■ Missing data

Previous



9. In square meters, how big is your dwelling in total?

□ less than 30 m 2 (1) □ 60-79 m 2 (5)

 $\square 30-39 \text{ m}^2 (2) \qquad \square 80-99 \text{ m}^2 (6)$

□ 40-49 m² (3) □ 100-119 m² (7)

 $\square 50-59 \text{ m}^2$ (4) $\square 120 \text{ m}^2 \text{ or more (8)}$

■ Missing data

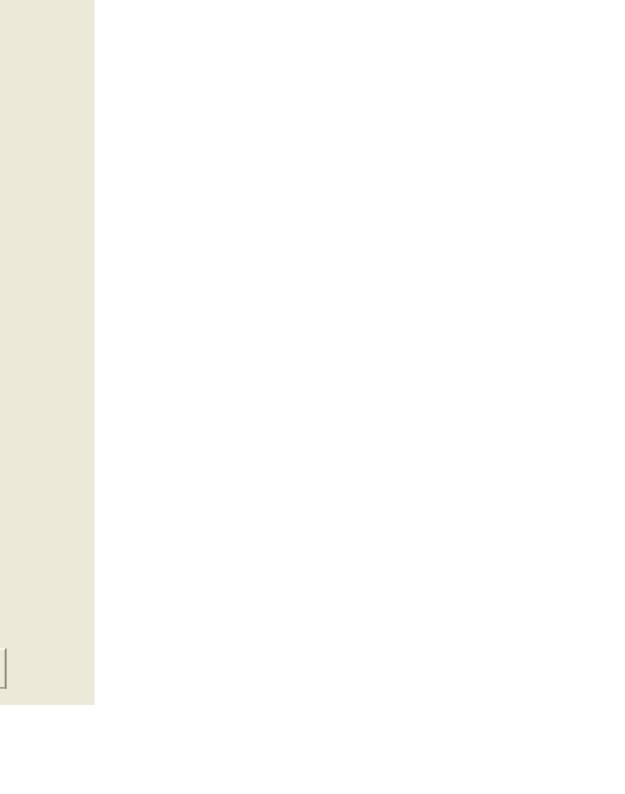
Previous

10. What is the age of your building or dwelling?

- □ Under 10 years (1)
- □ 10-19 years (2)
- □ 20-29 years (3)
- □ 30-39 years (4)
- □ 40-49 years (5)
- □ 50-59 years (6)
- □ 60-74 years (7)
- □ 75-99 years (8)
- □ 100 and more (9)

■ Missing data

Previous



11. Your dwelling has how many...

(For 'Don't Know' responses, mark 'DK' in blank. Living areas and bedrooms are all rooms that can be used as a bedroom regardless of current use or function. E.g. Sewing room, dining room, game room, home study are considered living/bedrooms)

11_1 Kitchens	11_4 Indoor staircases or flights of stairs	
11_2 Bathrooms	11_5 Pantry or utility	
11_3 Living and bedrooms	11_6 Enclosed balconies, porches or terraces	
☐ Missing data		
Previous	Next	

12.	In the current situation, does your
	dwelling need more rooms or fewer?

□ Number of rooms is sufficient (1)

■ More rooms needed (2)

□ Fewer rooms needed (3)

■ Missing data

Previous



13. What is the maximum number of children, 17 years or younger, sleeping in the same room?

children

☐ Missing data

Previous

Environmental Tobacco Smoke

14. Do any children sleep in the same room where people smoke? (Verify. If yes, read 'yes' options)

- No, never (1)
- ■Yes, sometimes (2)
- Yes, often (3)

■ Missing data

Previous

15. What is the maximum number of adults, 18 and older, sleeping in the same room? (Verify)AdultsMissing dataPreviousNext

Environmental Tobacco Smoke

16. Do any adults sleep in the same room where people smoke? (Verify. If yes, read 'yes' options)

■ No, never (1)

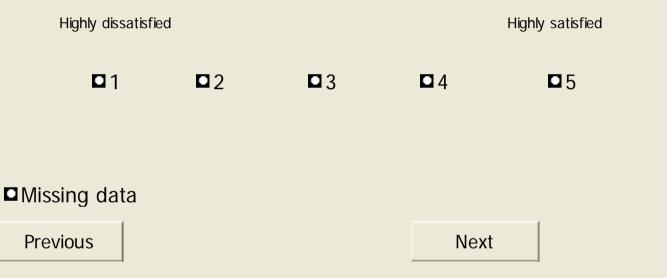
■ Yes, sometimes (2)

■ Yes, often (3)

■ Missing data

Previous

17. On a scale from 1 to 5, how satisfied are you with the dwelling? 1 being highly dissatisfied and 5 being highly satisfied. (Probe for NUMBER)



18. Do you perceive the temperature in the dwelling during the summer season as a problem?

(If yes, read 'yes' options)

- No, never (1)
- Yes, sometimes (2)
- Yes, often (3)

■ Missing data

Previous

- □ Too warm (1)
- □ Too cold (2)

At times the dwelling is too warm but at other times it is too cold OR some rooms in the dwelling are warm at the same time that other rooms are cold (3)

■ Missing data

Previous

19. If it is too warm inside the dwelling during summer, what are the reasons?

(Read all options and ask for an answer for each option. If no reason is identified, choose option 8. Multicode)

□ 19_1 Dwelling, building, or windows are oriented toward the sun				
□ 19_2 Inadequate protection from sun (shutters, shades, trees, other buildings, etc.)				
□ 19_3 Inadequate or no cooling system in the dwelling (air conditioning, fans, etc.)				
□ 19_4 Insufficient insulation (roof, walls, windows, etc.)				
□ 19_5 Not possible to open windows or cross ventilate				
□ 19_6 Not affordable				
19_7 Other				
	(Ask then specify)	□ 19_8 No reason identified		
□ Missing data		(After reading options, if no reasons are identified, mark here)		
Previous		Next		

20. Other than opening windows, how is the dwelling kept cool? (Read all options and ask for an answer for each option. Multicode)

□ 20_1 Fixed or Installed air conditioning

□ 20_2 Mobile air conditioning unit(s)

□ 20_3 Installed or ceiling fans

□ 20_4 Mobile fans

□ 20_5 No cooling system

☐ Missing data

Previous

20a. On a scale from 1 to 5, how do you evaluate the overall quality of the cooling system in your dwelling? 1 being highly dissatisfied and 5 being highly satisfied. (Probe for NUMBER)

20b. Do you perceive the temperature in the dwelling during the transient seasons, meaning spring or fall, as a problem? (If yes, read 'yes' options)

- No, never (1)
- Yes, sometimes (2)
- Yes, often (3)

■ Missing data

Previous

21. Is it because it is too warm or too cold?

- Too warm (1)
- Too cold (2)

At times the dwelling is too warm but at other times it is too cold OR some rooms in the dwelling are warm at the same time that other rooms are cold (3)

■ Missing data

Previous

22. Do you perceive the temperature in the dwelling during the winter season as a problem?

(If yes, read 'yes' options)

■ No, never (1)

■ Yes, sometimes (2)

■ Yes, often (3)

■ Missing data

Previous

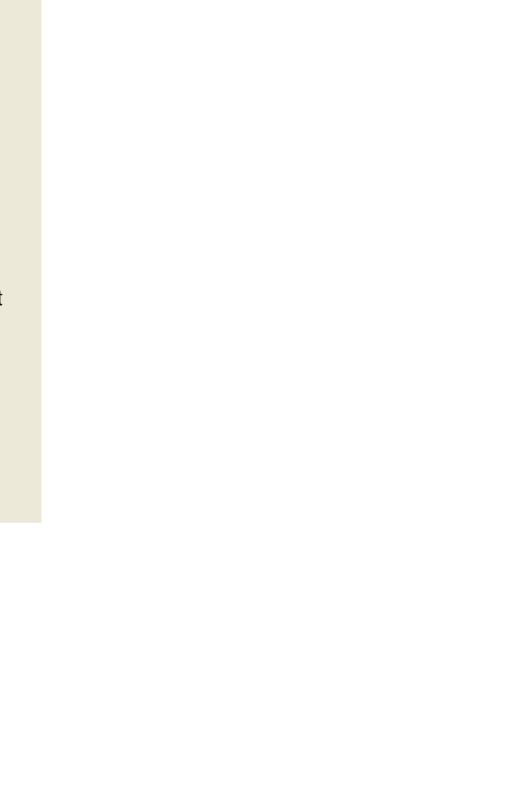
23. Is it because it is too warm or too cold?

- □ Too warm (1)
- Too cold (2)

At times the dwelling is too warm but at other times it

- □ is too cold OR some rooms in the dwelling are warm at the same time that other rooms are cold (3)
- Missing data

Previous



Previous

24. If it is cold inside the dwelling during winter or the transient season, what are the reasons?

(Read all options and ask for an answer for each option. If no reason is identified, choose option 13. Multicode)

□ 24_1 Dwelling is too big for efficient heating		□ 24_7 Low efficiency or standard of heating system	
□ 24_2 Heating does not function		□ 24_8 Household cannot afford heating	
□ 24_3 Lack of heating system in some rooms		□ 24_9 Insufficient thermal insulation of the building	
□ 24_4 Lack of control of heating		□ 24_10 Do not want to use or turn on heating	
24_4 Lack of Control of Heating		□ 24_11 No obvious reason	
□ 24_5 Windows not tight or single-glazed		24 12 Other	
□ 24_6 Wrong placement of heating		(Ask then specify)	
□ 24_13 No reason identified (After reading options, if no reasons are			
□ Missing data		identified, mark here)	
1			,

25. Does the dwelling have a fixed or installed heating system? (If yes, read 'yes' options)

- □ No heating system (1)
- Yes, with thermostat regulation (2)
- Yes, without thermostat regulation (3)

■ Missing data

Previous

Energy consumption & heating

26. Do you use heating devices and heat sources such as fireplaces, salamandras, electrical devices, etc.?

(If yes, read 'yes' options)

- No use of additional heating devices (1)
- ■Yes, sometimes (2)
- Yes, often (3)
- Missing Data

Previous

Energy consumption & heating

27. What energy sources do they use?

(Read all options and ask for an answer for each option. Multicode)

□ 27_1 Solid fuel (coal, wood)

□ 27_2 Gas

□ 27_3 Electricity

27_4 Other:

(Ask then specify)

☐ Missing data

Previous

Energy consumption & heating

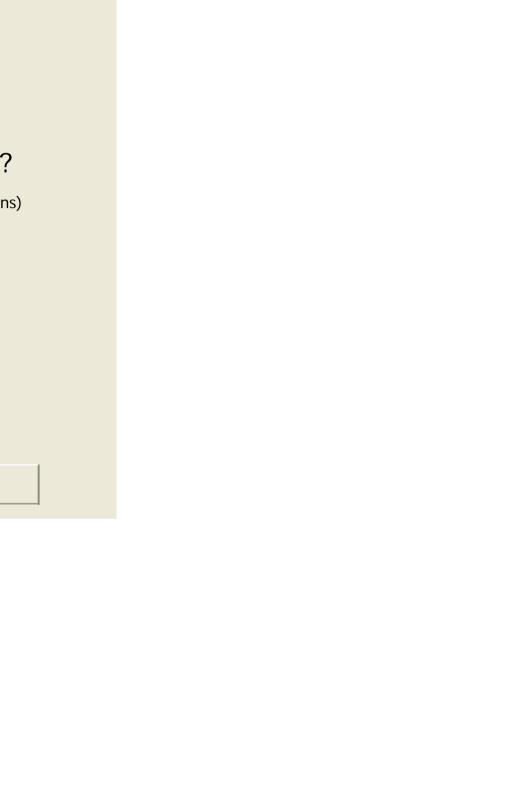
28. In the past 2 years, have there been difficulties paying the heating expenses?

(If yes, read 'yes' options)

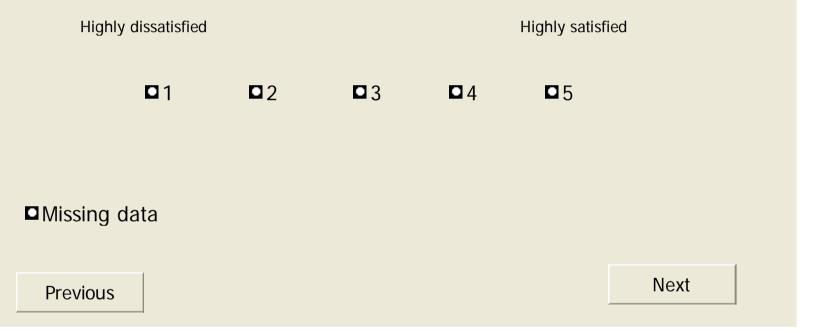
- No, never (1)
- Yes, sometimes (2)
- Yes, often (3)

■ Missing data

Previous



29. On a scale from 1 to 5, how do you evaluate the overall quality of the heating system in your dwelling? 1 being highly dissatisfied and 5 being highly satisfied. (Probe for NUMBER)



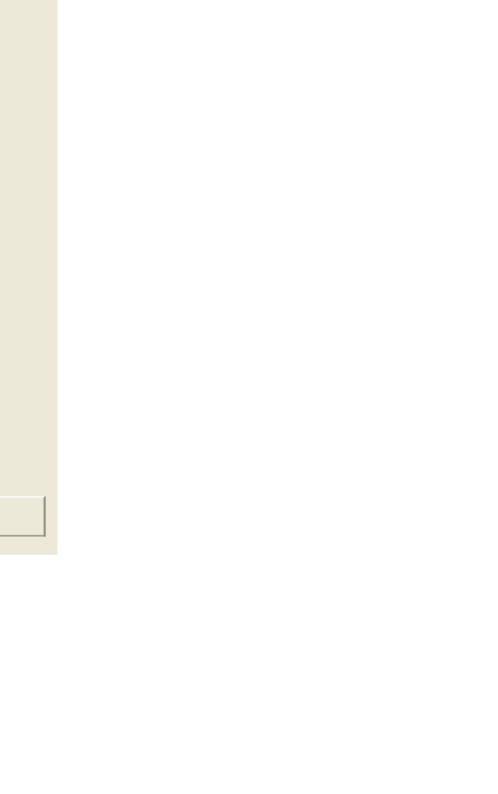
Window Quality

30. Does your dwelling have single-glazed or double-glazed windows?

- □ Single-glazed (1)
- □ Double-glazed or better (2)
- Some are single-glazed and others are double-glazed (3)
- □ Other type of window option (4)

■ Missing data

Previous



Light/Window view

31. Are you generally satisfied with the amount of natural light you get through the windows, or do you miss the daylight?

■ Miss the daylight (1)

□ Satisfied with amount of natural light (2)

□ Too much light or glaring (3)

■ Missing data

Previous

Lighting



(If yes, read 'yes' options)

- **□** No (1)
- Yes, and it works everywhere (2)
- Yes, but it is not sufficient OR it does not work everywhere (3)

■ Missing data

Previous

Air humidity

33. Do you have dampness or condensation in your dwelling, including in the attic and basement?

(If yes, read 'yes' options)

- No, never (1)
- ☐ Yes, sometimes (2)
- Yes, often (3)

■ Missing data

Previous

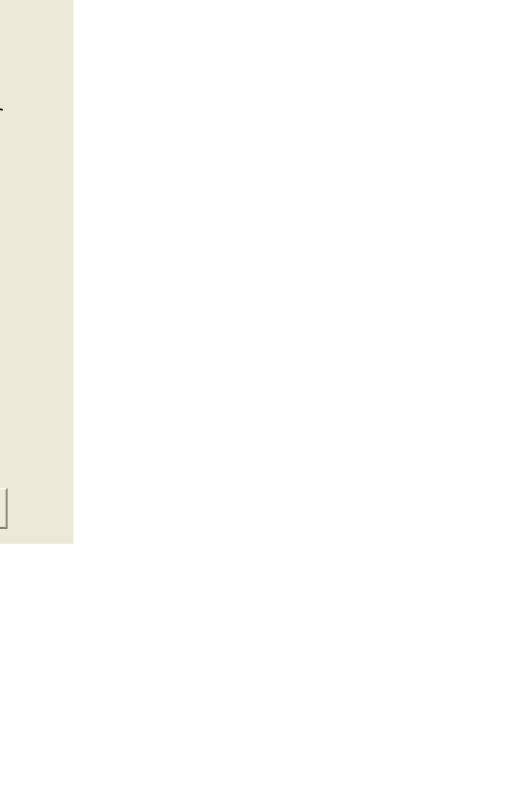
Air humidity

34. Do you have visible mould growth in your dwelling? (If yes, read 'yes' options)

- No, never (1)
- ■Yes, sometimes (2)
- ☐ Yes, often (3)

■ Missing data

Previous



Air humidity

34a. Is there an air dehumidifier anywhere in the dwelling?

□ No (1)

□ Yes (2)

■ Missing Data

Previous

Air quality

35. Do you have any of the following problems with the quality of air in your dwelling? (Read all options and ask for an answer for each option. If no problem is identified, choose option 10. Multicode)

□ 35_1 Dampness □ 35_6 Not enough air exchange, stale or stuffy air

□ 35_2 Dryness □ 35_7 Too much air exchange, draft

□ 35_3 Dust and particles □ 35_8 Outside air pollution

□ 35_4 Smell 35_9 Other

□ 35_5 Smoke (Ask then specify)

☐ 35_10 No such problem (After reading options, if no problems are identified, mark here)

Missing data

Previous Next

Ventilation/Air exchange

36. Other than windows, do you have an installed ventilation system in at least one room of your dwelling?

(If yes, read 'yes' options. The question refers to a ventilation system for air circulation not a cooling system)

- **□** No (1)
- Yes, forced ventilation based on electric power (2)
- Yes, free ventilation that does not use electric power (3)

■ Missing data

Previous

Ventilation/Air exchange

37. Particularly in wintertime, do you have problems with moving air and draft in your dwelling because doors or windows cannot be tightly closed or are of insufficient quality? (If yes, read 'yes' options)

- No, never (1)
- Yes, sometimes (2)
- Yes, often (3)

■ Missing data

Previous

Noise

38. Do you feel disturbed by noise in your dwelling even if the windows are closed?

(If yes, read 'yes' options)

- No, never (1)
- ■Yes, sometimes (2)
- ☐ Yes, often (3)

■ Missing data

Previous



Noise

39. In the past 2 years, have any inhabitants of the dwelling discussed or mentioned noise as a reason for sleep problems or regular sleep disturbance?

□ No (1)

□ Yes (2)

■ Missing data

Previous

Noise

Previous

40. Are there any disturbances by one or more of the following sources?

(Read all options and ask for an answer for each option. If no disturbance is identified, choose option 16. Multicode)

40_1 Traffic noise	□ 40_9 Noise within own dwelling		
□ 40_2 Airplane noise	□ 40_10 Playgrounds, schools, recreational facilities		
□ 40_3 Train noise	□ 40_11 Noise from surrounding area such as bars, discos, events		
□ 40_4 Elevator or lift	□ 40_12 Neighbour's talking, music, TV, repairs, animals, etc.		
□ 40_5 Parking & parking lots	■ 40_13 Noise from commercial, industrial or construction		
□ 40_6 Animals or birds	□ 40_14 Ventilation or heating system, waste chute		
□ 40_7 Staircase	40_15 Other		
□ 40_8 Playing children in the building	(Ask then specify)		
	□ 40_16 None of the above (After reading options, if no disturbances are		
☐ Missing data	identified, mark here)		

Pests and insects

41. Currently, which of the following pests are present in your dwelling? (Read all options and ask for a response between options. Multicode)

□ 41_1 Ants □ 41_5 Rats or mice

□ 41_2 Flies □ 41_6 Cockroaches

□ 41_3 Fleas 41_7 Other

□ 41_4 Bedbugs (Ask then specify)

□ 41_8 None of the above

(After reading options, if no pests are identified, mark here)

☐ Missing data

Previous

Pests and insects

- 42. In the last 2 years, has there been any pest control treatment in your dwelling? (If yes, read 'yes' options. Multicode)
 - □ 42_1 Yes, non-chemical physical traps with or without bait
 - □ 42_2 Yes, bait for ingestion by pest (poisoned or not)
 - □ 42_3 Yes, insecticidal spray or contact poison
 - □ 42_4 Yes, but I do not know what type
 - □ 42_5 No

☐ Missing data

Previous

43. During the last 2 years, did you at any time experience trouble with the quantity or pressure of the water supply? (If yes, read 'yes' options)

- No, never (1)
- Yes, sometimes (2)
- Yes, often (3)

■ Missing data

Previous



44. Do you have trouble with the hot or cold water?

□ Hot water (1)

□ Cold water (2)

□ Both hot and cold water (3)

■ Missing data

Previous



45. In the past 2 years, have you experienced any trouble with the quality of the water supply, such as discolored water, bad smell, bad taste, etc.?

(If yes, read 'yes' options)

- No, never (1)
- Yes, sometimes (2)
- ■Yes, often (3)

■ Missing data

Previous

46. Is it necessary to treat the water that is provided to your dwelling before drinking?

(Boiling, cleaning, filtering, etc.)

■ No, never (1)

□ Yes (2)

□ Don't drink the water (3)

■ Missing data

Previous

47. Have you ever experienced any trouble with the water drainage or sewage system?

(If yes, read 'yes' options. Multicode)

□ 47_1 Yes, in the dwelling

□ 47_2 Yes, in the building

□ 47_3 Yes, on our street

□ 47_4 No

☐ Missing Data

Previous

48. Is hot water available in the kitchen?

■ No (1)

□ Yes (2)

■ Missing data

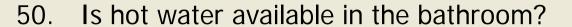
Previous

49. Is piped water available in the kitchen?

- **□** No (1)
- **□** Yes (2)

■ Missing Data

Previous



■ No (1)

□ Yes (2)

■ Missing data

Previous

51. Is piped water available in the bathroom?

- **□** No (1)
- **□** Yes (2)

■ Missing data

Previous

52. If there are gas water heaters, are they connected to the outside?

(Probe to determine if all gas water heaters are connected to outside)

■ No gas water heater (1)

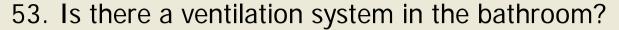
■Yes, (all) connected to the outside (2)

■ No, not (all) connected to the outside (3)

□ Do not know if it is/they are connected to the outside (4)

■ Missing data

Previous



(Not the same as a cooling system. If yes, read 'yes' options)

- **□** No (1)
- Yes, only a window that opens (2)
- ■Yes, an installed ventilation system to conduct air outside (3)
- ■Yes, an installed ventilation system and a window that opens (4)

■ Missing data

Previous

54. Is there enough workspace in the kitchen to prepare food?

□ No (1)

□ Yes (2)

■ Missing data

Previous

55.	What is the energy	source in the kitchen for the
	stove or cook-top?	(For stoves of both electricity and gas, mark 'gas')

- No cooking place (1)
- □ Solid fuel (coal, wood) (2)
- **□** Gas (3)
- □ Electricity (4)
- **□** Other (5)
- Missing data

Previous

56. What is the energy source in the kitchen for the oven?

(For ovens of both electricity and gas, mark 'gas')

■ No oven (1)

□ Solid fuel (coal, wood) (2)

□ Gas (3)

□ Electricity (4)

Other (5)

■ Missing data

Previous

57.	Is there	an exhaust system	above	the	cooking
	place?	(If yes, read 'yes' options)			

- **□** No (1)
- Yes, it is connected to the outside and leads air out of the dwelling (2)
- ■Yes, but it is not connected to the outside (3)
- ■Yes, but I do not know what type (4)

■ Missing data

Previous

58. Is there a toilet inside the dwelling?

(If yes, read 'yes' options. Verify)

- No toilet inside the dwelling (1)
- Yes, a toilet is inside the dwelling AND it is in separate room or a bathroom (2)
- Yes, a toilet is inside the dwelling BUT it is NOT in a separate room or a bathroom (3)

■ Missing data

Previous



59. Is there a shower or bath inside the dwelling?

(If yes, read 'yes' options. Verify)

- No bath or shower inside the dwelling (1)
- Yes, the shower or bath is inside the dwelling AND it is in a separate room or a bathroom (2)
- The shower or bath is inside the dwelling BUT it is NOT in a separate room or a bathroom (3)

■ Missing data

Previous

Building quality and maintenance

6 0.	Is the roof to your dwelling or building
	waterproof? (Mark 'No' for all answers other than a direct 'Yes')

■ No, the roof is not waterproof or the roof leaks (1)

■ Yes, the roof is waterproof (2)

■ Missing data

Previous



61. Are your electrical installations earthed?

(If yes, read 'yes' options)

□ No (1)

■Yes, all of them (2)

■Yes, but not all (3)

■ Yes, but I do not know if they are ALL earthed (4)

■ Missing data

Previous

62. Are any unvented gas appliances ever used inside the dwelling? (If yes, read 'yes' options)

- No, never (1)
- Yes, sometimes (2)
- Yes, often (3)

■ Missing data

Previous



63. Is there a fire extinguisher in your building or dwelling?

□ No (1)

■ Yes (2)

■ Missing data

Previous

64. Is there fire detection equipment in the building or dwelling?

□ No (1)

☐ Yes (2)

■ Missing data

Previous

65. In the event of a fire, can all inhabitants of your dwelling easily escape from the dwelling and building to the outside?

□ No (1)

☐ Yes (2)

■ Missing data

Previous

66. Which of the following accidents or injuries, big or small, occurred in the building in the last 2 years?

(Read all options and ask for an answer for each option. If no accident or injury is identified, choose option 10. Multicode)

□ 66_1 Falls or stumbles	□ 66_6 Poisoning
□ 66_2 Burns	□ 66_7 Gas intoxication
□ 66_3 Cuts or puncture wound	s 56_8 Electrical shock or accident
□ 66_4 Choking, suffocating or o	drowning 66_9 Other
□ 66_5 Collisions or strikings	(Ask, then specify)
□ 66_	10 None of the above (After reading options, if nothing is identified, mark here)
☐ Missing data	
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67. Which items were involved in these accidents or injuries?

(Read all options and ask for an answer for each option. If nothing is identified, choose option 15. Multicode)

□ 67_1 Animals and pets □ 67_8 Construction features like walls, floors, doors, windows and stairs

□ 67_9 Do-it-yourself tools or equipment

□ 67_10 Heating or cooling equipment, stove, oven

□ 67_11 Electrical equipment or installations

□ 67_12 Washing or cleaning products, detergents, liquids

□ 67_13 Furniture or furnishings like carpets, curtains, etc.

Next

67_14 Other

(Ask, then specify)

☐ 67_15 None of the above (After reading options, if nothing is identified, mark here)

□ 67 6 Food items

silverware

□ 67 7 Toys

☐ Missing data

□ 67_2 Stairs, staircase

□ 67_3 Kitchen equipment

_ 67_4 Kitchen knives and

□ 67_5 Gasses and fumes

Previous

68. Is there a place or item in the dwelling, involved in at least two accidents or injuries?

□ No (1)

□ Yes (2)

■ Missing data

Previous

69. Are there any installations or locations in the dwelling that you see as potentially harmful?

(If Yes, fill-in keywords! If No, write 'No' in blank)

☐ Missing data

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70. Are there any stairs or steps leading from the outside to the inside of your dwelling?

□ No (1)

☐ Yes (2)

■ Missing data

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- 71. Do ALL the stairs and steps, inside and outside the building have adequate lighting equipment? (If no, read 'no' options)
- No, none of the stairs have adequate lighting (1)
- ☐ Yes, they all have adequate lighting (2)
- No, some stairs INSIDE do not have adequate lighting (3)
- No, some stairs OUTSIDE do not have adequate lighting (4)

■ Missing data

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72. Do the stairs and staircases have handrails?

- **□** No (1)
- **□** Yes (2)
- □ Not ALL have handrails (3)
- Missing data

Previous

General health and constraints

73. How many inhabitants of your dwelling have difficulty using stairs? (This does not include children under 4. If none, write '0' in blank)

Missing data

Previous

Next

74. Is there a lift or elevator in the building?

(If yes, read 'yes' options)

- **□** No (1)
- Yes, and it works (2)
- ■Yes, but it does not work (3)

■ Missing data

Previous

Housing accessibility

75. Do you think people with disabilities and physical constraints have difficulty getting from the outside to the inside of your dwelling?

□ No (1)

□ Yes (2)

■ Missing data

Previous

Housing accessibility

76. Do you think people with disabilities and physical constraints have difficulty accessing the different parts of your dwelling once they are inside?

□ No (1)

☐ Yes (2)

■ Missing data

Previous

Housing accessibility

77. Does anyone in the household have any kind of disability or physical constraint?

□ No (1)

□Yes (2)

■ Missing data

Previous

General health

78. How many inhabitants are not in good general health?

(If none, write '0' in blank)

☐ Missing data

Previous

General health

In the past 2 years, has a doctor diagnosed anyone in the dwelling with... (If 'yes' to any, verify the condition has been doctor diagnosed. If 'no' to all, choose option 12)

□ 79 1 Asthma □ 79 6 Diarrheal disease

□ 79_2 Allergies (excluding asthma) □ 79_7 Hypertension or cardiovascular effects

□ 79 3 Bronchitis □ 79_8 Chronic headaches or migraines

□ 79 9 Tuberculosis □ 79 4 Pneumonia

□ 79_10 Depression or anxiety □ 79 5 Cold or throat illness

□ 79_13 Overweight or obesity

79_11 Other

(Ask then specify)

□ 79 12 No (After reading options, if no conditions are

identified, mark here)

Previous

☐ Missing data

Accidents, air quality and maintenance

80. In the last 2 years, did the household do any do-it-yourself activities, such as repairs, new paint or bring in new furniture? (Read all options and ask for an answer for each option. If nothing is identified, choose option 5. Multicode)

□ 80_1 Yes, new furniture

□ 80_2 Yes, do-it-yourself work

□ 80_3 Yes, work done by professionals

■ 80_4 Yes, activities due to moving in

□ 80_5 No such work done

☐ Missing data

Previous

Building quality and maintenance

81. Thinking about the overall condition, inside the dwelling and outside the building, do you have any structural concerns such as broken windows or cracks, or holes in the walls, ceiling, roof or floor?

■ No (1)

□ Yes (2)

■ Missing data

Previous

Dwelling Satisfaction

82.	What is the first renovation you would us in your dwelling? (If none, write 'none' in blank)	ndertake
□ Missi	ng data	
Prev	vious	Next

Dwelling Satisfaction

83. Are you happy with your current living conditions or would you move if you had the chance?

(For all answers other than 'happy', mark 'would move')

■ Am happy (1)

■ Would move (2)

■ Missing data

Previous

84.	Can all household members easily get to the city
	center?

□ No (1)

■Yes, ALL inhabitants (2)

□ Some inhabitants have difficulty (3)

■ Missing data

Previous

85. Is it reasonable to go to the city center using any of the following?

(They do not have to use the means, it just has to be a possible option. Read all options and ask for an answer for each option. Multicode. If they live in the city center, select "walking")

□ 85_1 Public transport

■85_2 Walking

□ 85_3 Bicycle

□ 85_4 Private car or taxi

□ 85_5 None of the above

☐ Missing data

Previous

86. If there is public transportation, at what time is the last ride home from the city center during the work week?

(Please write time: 23.30, 0.45, etc. If dwelling is in city center or if no public transportation exits, write this information in the blank. Don't know = Missing data)



Previous

87. On a scale from 1 to 5, how annoyed are you by litter and trash in your immediate environment? 1 being not annoyed at all and 5 being very annoyed. (Probe for NUMBER)

88. On a scale from 1 to 5, how do you evaluate the amount of dog and animal droppings in the immediate housing environment? 1 being not dirty at all and 5 being very dirty. (Probe for NUMBER)

Next

89. Is there any open or green space that belongs to the building or dwelling, which can be used by the household residents? (If yes, read all 'yes' options. This does not include streets, parking lots, etc.)

□ No (1)

■ Yes, a private yard or garden owned by the household (2)

■ Yes, common area belonging to the building (3)

■Yes, both a private yard or garden and a common area (4)

Yes, but I do not know who owns it (5)

■ Missing data

Previous

90. How do you evaluate the general condition and impression of these spaces? (Read all options)

- Well maintained and cared for (1)
- □ Not well maintained but not run-down (2)
- Run-down and not maintained (3)
- Mix of all options (4)

■ Missing data

Previous

91. Is there a public park or an open green space within 100 meters of the dwelling?

■ No (1)

□ Yes (2)

■ Missing data

Previous

92. Are there places in the immediate housing environment, including private and public spaces, where you can sit and relax, have a coffee, or talk peacefully to neighbours and friends?

■ No (1)

□Yes (2)

■ Missing data

Previous

93. In your immediate housing environment, are there enough recreational spaces, public and private, for... (Read for each of the three population groups)

	No, not really (1)	Yes (2)	To some extent (3)	Missing data
93.1 Children			D	D
93.2 Teenagers				D
93.3 Elderly			D	D
Previous				Next

93_b Is there a place close to your dwelling where you can buy fresh fruits & vegetables?

□ No (1)

□Yes (2)

■ Missing data

Previous

93_c Are there any public facilities close to your dwelling where you can practice physical activity (such as playgrounds, parks, sport centers, swimming pools, etc.)?

□ No (1)

□ Yes (2)

■ Missing data

Previous

94. Do you feel safe returning to your home when it is dark?

■ No, not at all (1)

□ Yes (2)

□ To some extent (3)

■ Missing data

Previous

95.	5. What is the first thing you would change at your immediate housing environment? (If nothing, write 'nothing' in b			
□Mi	issing data			
P	Previous	Next		

96. On a scale from 1 to 5, how do you rate your neighbourhood overall as a place to live? 1 being very bad to 5 being very good? (Probe for NUMBER)

Very bad			Very good
11 🗖 2	□ 3	4	D 5
a			
			Next
	11 🚨 2	11 □ 2 □ 3	11 □2 □3 □4

97. Does your household own or rent the dwelling?

□ Own (1)

□ Rent (2)

■ Missing data

Previous

98. Does your household qualify for state assistance?

□No (1)

□Yes (2)

■ Missing data

Previous



99. On yearly average, approximately how many euros per month does the household spend on...

(For 'don't know' answers, mark 'DK' in blank)

99_1 Water	99_7 Insurance	
99_2 Electricity	99_8 Taxes	
99_3 Gas	99_9 Rent or morgage	
99_4 Land telephone		
99_5 Service charges	99_10 If not already included in another household expense, how	
99_6 Cleaning and maintainance	much is spent on heating costs (Verify cost of heating has not been included in another expense)	
	99_11 Other costs	
☐ Missing data		,
Previous	Next	

100. In the past 2 years, have there been difficulties paying the housing expenses?

(If yes, read 'yes' options)

- No, never (1)
- Yes, sometimes (2)
- Yes, often (3)
- Missing data

Previous

101. Does your family receive a housing allowance?

□ No (1)

■ Yes (2)

■ Missing data

Previous

Conclusion

102. Your dwelling has been identified for follow-up investigation. Is it possible for a team of experts to visit your dwelling in person?

□ No (1)

□ Yes (2)

■ Missing data

Previous

Conclusion

103. This concludes the interview. Thank you very much for participating. Do you have any additional comments or concerns regarding your dwelling?

103_2 Addtional comments from Interviewer

Previous

Finish Interview

Row number:		Pre	vious interview		
	Go to this row	N	lext interview		
Continue with ques	tion:				
			Continue to se	lected interview	
Verify interview sele	ected below				
Dwelling code					
Interviewer Code					
Start time					

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