

ID Number	A1-2005-0015-Eng
Title	Survey on the Living Conditions of the Poor in Busan, Ulsan, and Gyeongnam Areas, 2nd Wave

1. Please tell us about your family.

1) Number assigned to family member	2) Relationship with the respondent	3) Gender	4) Age	5) Education and graduation	
The respondent should answer in line 1	1. Self 2. Spouse 3. Child 4. Parent 5. Sibling 6. Grandchild 7. Other	1. Male 2. Female	Birth year, month, date	1. Preschool or younger 2. No formal education 3. Elementary school 4. Middle school 5. High school 6. Junior college 7. College 8. Graduate school	0. Not applicable 1. Currently attending 2. Graduated 3. On leave 4. Dropped out 5. Completed
01					
02					
03					
04					
05					
06					
07					

* Please list the family members currently not living with you (married or unmarried children).

08				
09				
10				
11				

6) Marital status	7) Main activities	8) Occupation	9) Disability
0. Not applicable 1. Single 2. Married 3. Divorced 4. Widowed 5. Separated	0. Not applicable (Younger than 15 years of age, serving in the military)	0. Not applicable	0. Not applicable
	1. Regularly employed paid worker	1. Legislator, senior official, manager	1. Disabled (grade 1)
	2. Temporarily employed paid worker	2. Technician, semi professional	2. Disabled (grade 2)
	3. Daily employed paid worker	3. Clerical worker	3. Disabled (grade 3)
	4. Employer	4. Service worker	4. Disabled (grade 4)
	5. Self employed	5. Sales worker	5. Disabled (grade 5)
	6. Unpaid family worker	6. Agriculture, forestry and fisheries worker	6. Disabled (grade 6)
	7. Unemployed, conducting job-seeking activities	7. Skilled worker and workers in related field	7. Disabled (unregistered)
	8. Unemployed, gave up on job-seeking activities	8. Machine operation, installation, and assembly worker	
	9. In charge of household affairs (no intention of searching for a job)	9. Simple laborer	
	10. Unable to work due to childrearing responsibilities	10. Professional soldier	
	11. Unable to work due to caring for someone ill		
	12. Unable to work due to old age		
	13. Unable to work due to disability/illness etc.		
14. Student or preparing for further studies			
01			
02			
03			
04			
05			
06			
07			

* Please list the family members currently not living with you (married or unmarried children).

08			
09			
10			
11			

10) Number of household members	11) Type of household	1. General household (grandparents + parents + children, parents + children) 2. Married-couple household 3. Mother with child(ren) household 4. Father with child(ren) household 5. One-person household 6. A child head of household 7. Grandparent with grandchild(ren) household 8. Other
_____ Persons		

12) Type of residence	1. Single family house 2. Apartment 3. Townhouse (including multiplex housing and multi-household homes) 4. Public rental housing (permanent lease/national rental housing etc.) 5. Deteriorated residence in a redevelopment area 6. Vinyl house 7. Other non-residential building	13) Type of ownership of residence	1. Self owned 2. Lease on a deposit basis 3. Rent 4. Rent with a deposit 5. Permanent lease 6. Free of charge

■ Move of household members and panel management

※ Questions 2 ~ 6 should be answered by all respondents.

2. Among the household members who have been living with you for the past year, are there any who are no longer living with you?

- 1) Yes ⇒ Go to question 3.
- 2) No ⇒ Go to question 4.

3. Those no longer living with you (for more than 3 months)?

Name	Relationship with the respondent*	Gender**	Age	Reason for no longer living together***

* 1) Spouse 2) Child 3) Parent 4) Sibling 5) Grandchild 6) Parent of spouse 7) Other (specify_____)

** 1) Male 2) Female

*** 1) Marriage 2) Employment 3) College entrance 4) Moved out for independent living
5) Had to entrust to someone else due to the lack of a caregiver 6) Hospitalization
7) Entered into a facility 8) Death 9) Ran away from home 10) Divorce 11) Other (specify_____)

4. Are there any household members who have started living together with you since last year?
- 1) Yes ⇒ Go to question 5.
 - 2) No ⇒ Go to question 6.

5. Household member who have started living together with you

Name	Relationship with the respondent*	Gender**	Age	Reason for living together***

* 1) Spouse 2) Child 3) Parent 4) Sibling 5) Grandchild 6) Parent of spouse 7) Other (specify_____)

** 1) Male 2) Female

*** 1) Birth 2) Marriage 3) Moved back to parent's home after divorce 4) Child rearing
5) Discharged from military service 6) Graduated from school 7) Other (specify_____)

6. If the questionnaire cannot be completed due to the refusal of the designated respondent(panel) please answer the following questions.

6-1. Panel ID#: _____

6-2. Number of attempts made to encourage respondent to answer: _____ times

6-3. Reason for refusing to answer

- 1) Was unable to meet with the respondent because he/she did not show up at the time agreed upon
- 2) Respondent was unable to take part in the survey due to personal difficulties
- 3) It was difficult to set up a time to meet with the respondent because of the respondent's job
- 4) The respondent felt the contents of the survey were too personal and didn't want to respond
- 5) The respondent showed reluctance because it's a serial survey
- 6) The objection of his/her spouse or family
- 7) Difficult to respond due to deterioration of health
- 8) Other: _____

7. Please answer the following questions if you were unable to locate respondents (panel) who have relocated.

7-1. Panel ID#: _____

7-2. Process of tracking respondents (panel): Please check all that apply.

- 1) Confirmed at place of residence
- 2) Confirmed through neighbor
- 3) Confirmed through the dong-office
- 4) Confirmed through visitation of new residence
- 5) Where is the new place of residence?

7-3. What is the reason for failing to track the respondent (panel)?

- 1) Unable to track because the respondent relocated to a location too far away
- 2) Don't know the place of new residence (address unknown)
- 3) Visited place of new residence but respondent did not live there
- 4) Visited place of new residence or place of extended stay but was unable to meet respondent
- 5) Visited place of new residence but was unable to respond due to health problems
- 6) Other: _____

7-4. Failure to track panel and replacement authorization

Supervisor: Date: _____

Name: _____ (signature)

7-5. Panel replacement differentiation table

Respondent characteristics	1st wave	2nd wave
Panel ID#		
Sample type		
Sex		
Age		
Place of residence		
Type of household		
Date of replacement		
Name of interviewer		

■ Health, medical treatment

8. Have you been exercising regularly for the past month?

- 1) Yes ⇒ Go to question 8-1.
- 2) No ⇒ Go to question 8-3.

8-1. If you exercise regularly, on a weekly average how many days do you exercise?

_____ days

8-2. If you exercise regularly, how many minutes do you exercise at a time?

_____ minutes ⇒ Go to question 9.

8-3. If you cannot exercise regularly, what is the reason for not being able to exercise regularly?

- 1) Don't have time
- 2) Disability or health issue
- 3) Don't like exercise
- 4) Too lazy
- 5) Lack of facility or space
- 6) Don't feel the need to exercise

9. Do you currently smoke cigarettes?

- 1) Yes ⇒ Go to question 9-1.
- 2) No ⇒ Go to question 10.

9-1. On average, how many cigarettes do you smoke in a day?

_____ cigarettes

9-2. At what age did you start smoking?

_____ years old

10. Do you currently drink alcohol?

- 1) Yes ⇒ Go to question 10-1.
- 2) No ⇒ Go to question 11.

10-1. How many times do you drink in a week?

_____ times

10-2. How much and how many different types of alcohol do you drink at a time?

(ex. 1 bottle of soju) _____

10-3. At what age did you start drinking alcohol?

_____ years old

11. In your opinion, what is your state of health in comparison to others your age?

- 1) Very healthy
- 2) Somewhat healthy
- 3) Neither healthy nor unhealthy
- 4) Somewhat unhealthy
- 5) Very unhealthy

12. In the past year, have you gotten a physical or a health examination? (excluding pregnancy related checkups)

- 1) Yes ⇒ Go to question 12-1.
- 2) No ⇒ Go to question 13.

12-1. How did you get the health examination?

- 1) Health examination through work
- 2) Health examination through school
- 3) Health examination received privately
- 4) Free health examination (community health center etc.)
- 5) Other: _____

13. Are the members of your family receiving health examinations on a regular basis?

- 1) Yes
- 2) No

14. Please state if you have had the following illnesses during the past year, or have such symptoms.

	Symptoms	Yes	No
Cancer	1) Stomach cancer		
	2) Liver cancer		
	3) Lung cancer, bronchial cancer		
	4) Intestinal cancer		
	5) Breast cancer		
	6) Cervical cancer		
	7) Other cancer		
Musculo-skeletal disease	8) Arthritis, rheumatoid arthritis		
	9) Gout		
	10) Backache, ischiadynia		
	11) Disc (disc herniation)		
Digestive disease	12) Peptic ulcer (gastritis, gastric ulcer, duodenal ulcer)		
	13) Chronic hepatitis, liver cirrhosis		
Endocrine and metabolic immune disorders	14) Diabetes		
	15) Thyroid disease		
Circulatory diseases	16) Hypertension		
	17) Stroke, cerebrovascular disease		
	18) Myocardial infarction, angina		
	19) Hemorrhoids, hemorrhoid		

Respiratory diseases	20) TB, tuberculosis		
	21) Chronic bronchitis (severe cough and phlegm)		
	22) Asthma		
	23) Bronchiectasis		
Disorders of the eyes and ears	24) Sinusitis (chronic sinusitis)		
	25) Cataracts, glaucoma		
Psychiatric disorders	26) Chronic otitis media (ear pain and secretion of discharges)		
	27) Neuroticism (anxiety, OCD)		
	28) Depression, mood disorders		
	29) Schizophrenia, psychosis		
Diseases of oral cavity	30) Dementia (senility, Alzheimer's)		
	31) Tooth decay (dental caries)		
	32) Chronic periodontal disease (gum disease)		
	33) Chronic renal failure, kidney disease		
	34) Skin disorders (Athlete's foot)		
	35) Aftereffects of accident or poisoning		
Other	36) Other chronic diseases		

15. Has a member of your household been hospitalized or received surgery during the past year?

1) Yes ⇒ Go to question 15-1.

2) No ⇒ Go to question 16.

*Household member ID should be used for child ID *Other: (1) Sibling (2) Grandson granddaughter	Self	Spouse	Child*	Parent	Other**
15-1. Please list all medical facilities where a member of your household has received surgery or has been hospitalized. 0) None 1) University hospital 2) General hospital 3) Hospital 4) Clinic 5) Community health center 6) Public health care center 7) Oriental medicine clinic/hospital 8) Pharmacy 9) Dentist 10) Other _____					

<p>15-2. For what reason was he/she hospitalized or receive surgery?</p> <ol style="list-style-type: none"> 1) Respiratory disease 2) Circulatory disease 3) Digestive disease 4) Musculoskeletal disease 5) Neurological disease 6) Genitourinary disease 7) Ophthalmological disease 8) Ear-nose-throat disease 9) Dental issue 10) Dermatological disease 11) Obstetrics and gynecology 12) Cancer 					
<p>15-3. How long was he/she hospitalized for? _____ days</p>					
<p>15-4. What insurance did you receive assistance from in using this facility?</p> <ol style="list-style-type: none"> 1) Health insurance 2) Car insurance 3) Occupational health and safety insurance 4) Medical care assistance 5) Private insurance 6) Own expenses 7) Treatment free of charge 8) Other 					
<p>15-5. In using this facility, what was your out-of-pocket cost (including transportation costs)? _____ won</p>					
<p>15-6. What is the weight of the burden put on your household finances due to the cost of using this facility?</p> <ol style="list-style-type: none"> 1) Not at all burdensome 2) Somewhat burdensome 3) Very burdensome 					
<p>15-7. How satisfied are you with the treatment or medical procedure received at the medical facility?</p> <ol style="list-style-type: none"> 1) Very satisfied 2) Satisfied 3) Neither satisfied nor dissatisfied 4) Dissatisfied 5) Very dissatisfied 					

16. During the past 2 weeks, has a member of your household currently living with you visited a hospital or pharmacy due to an illness?

- 1) Yes ⇒ Go to question 16-1.
- 2) No ⇒ Go to question 17.

*Household member ID should be used for child ID *Other: (1) Sibling (2) Grandson granddaughter	Self	Spouse	Child*	Parent	Other**
16-1. Please name all facilities visited by the member of your household during the past 2 weeks due to an illness. 1) University hospital, General hospital 2) Hospital 3) Clinic 4) Community health center 5) Oriental medicine clinic/hospital 6) Pharmacy 7) Other					
16-2. For what reason did he/she receive treatment? 1) Respiratory disease 2) Circulatory disease 3) Digestive disease 4) Musculoskeletal disease 5) Neurological disease 6) Genitourinary disease 7) Ophthalmological disease 8) Ear-nose-throat disease 9) Dental issue 10) Dermatological disease 11) Obstetrics and gynecology					
16-3. How many times has he/she visited during the past 2 weeks? _____ times					
16-4. For how many days out of the number of days visited did he/she receive a prescription? _____ days					
16-5. What insurance did you receive assistance from in using this facility? 1) Health insurance 2) Car insurance 3) Occupational health and safety insurance 4) Medical care assistance 5) Private insurance 6) Own expenses 7) Treatment free of charge 8) Other					
16-6. In using this facility, what was your out-of-pocket cost (including transportation costs)? _____ won					

16-7. What is the total amount of transportation costs spent on using this facility? _____ won					
16-8. What is the amount of other expenses spent on using this facility? _____ won					
16-9. What is the weight of the burden put on your household finances due to the cost of using this facility? 1) Not at all burdensome 2) Somewhat burdensome 3) Very burdensome					
16-10. How satisfied are you with the overall services you received in this facility? 1) Very satisfied 2) Satisfied 3) Neither satisfied nor dissatisfied 4) Dissatisfied 5) Very dissatisfied					

17. During the past year, did any of your household members (including those not living with you) require continuous caregiving or nursing due to health problems?

- 1) Yes ⇒ Go to question 17-1.
- 2) No ⇒ Go to question 22.

17-1. Who were they?

_____, _____

17-2. What was the specific health problem?

17-3. How long has it been since the health problem began?

_____ years _____ months

18. In relation to the respondent, who is(was) the caregiver?

_____, _____ (If there were two please enter both.)

- 1) Self
- 2) Parent
- 3) Spouse
- 4) Parent of spouse

- 5) Child
- 6) Other _____

19. Specifically, what types of caregiving were provided? (Please select all applicable answers.)

- 1) Meal time assistance
- 2) Assistance with dressing
- 3) Assistance with bathing
- 4) Clearing the house
- 5) Cooking, preparing side dishes
- 6) Errands
- 7) Assistance with treatment (picking up medication, assisting hospital visit)
- 8) Companionship
- 9) Errands
- 10) Grocery shopping
- 11) Providing care during period of hospitalization
- 12) Other: _____

20. Are you using any of the following nursing care facilities or services? (Day hospital, day care for the elderly)

- 1) Sanatorium
- 2) Specialized hospital
- 3) Weekday care facility
- 4) Clinic for the elderly
- 5) Home visiting nursing service
- 6) In-home helper dispatch service (nursing care worker)
- 7) Other: _____
- 8) Not using any facilities or services ⇒ Go to question 20-1.

20-1. If you have not used nursing care facilities or services (nursing home, specialized hospital, visiting nursing service, and nursing caregiver) what is the reason for it?

- 1) Due to the weight of financial burden
- 2) Due to the belief that a member of my family or a relative can provide better care than a stranger
- 3) Lack of facilities in the near vicinity
- 4) Didn't like the facilities
- 5) Time period didn't work out
- 6) The household member who needed care didn't want to
- 7) Transportation was inconvenient
- 8) Lack of information
- 9) Other: _____
- 0) Not applicable (using facility)

21. What is the average monthly cost related to caregiving and nursing?

- 1) Average monthly hospital costs: _____ won
- 2) Average monthly medication costs: _____ won
- 3) Average monthly cost of hiring a caregiver: _____ won
- 4) Medical devices and supplies (ex. Syringes, diapers, bandages etc.): _____ won

22. Please mark how often you have experienced the following problems during the past week.

	Questions	Strongly agree	Agree	Disagree	Strongly disagree
1)	I have no desire for life	1	2	3	4
2)	I feel lonely	1	2	3	4
3)	I am unable to fall asleep	1	2	3	4
4)	I feel depressed	1	2	3	4
5)	I feel that there is no hope for the future	1	2	3	4
6)	Many times I easily became excited	1	2	3	4
7)	I had an argument with someone	1	2	3	4
8)	I yelled or threw an object	1	2	3	4
9)	I got angry beyond control	1	2	3	4
10)	I get tense for no reason	1	2	3	4
11)	I get anxious for no reason	1	2	3	4
12)	I have been restless	1	2	3	4
13)	I was extremely anxious about something minor	1	2	3	4

23. Please mark the applicable answer to the following questions.

	Questions	Strongly agree	Agree	Disagree	Strongly disagree
1)	I have often had to go to the hospital regularly for health issues	1	2	3	4
2)	I have a feeling my health will deteriorate	1	2	3	4
3)	I am very healthy	1	2	3	4
4)	I easily get sick and am more susceptible to contracting diseases than others	1	2	3	4

24. Please mark the applicable answer to the following questions.

	Questions	Strongly agree	Agree	Disagree	Strongly disagree
1)	There are a lot of issues that are difficult for me to handle on my own	1	2	3	4
2)	My life sometimes seems to be being pushed along by something	1	2	3	4
3)	It is difficult for me to control the things that happen to me	1	2	3	4

4)	I can do anything I put my mind to	1	2	3	4
5)	There is nothing in my life I can decide on my own	1	2	3	4

25. How often did the following take place during the past year?

	Questions	Never	Once	Twice	Three times	More than four times
1)	I have severely beaten someone (family, friend, neighbor)	1	2	3	4	5
2)	I spent too much money on gambling or the lottery	1	2	3	4	5
3)	I had to pay a fine for a traffic violation or minor infraction	1	2	3	4	5
4)	I have been arrested by the police	1	2	3	4	5

26. Please answer if the following important changes have taken place during the past year.

	Important change	Yes	No
1)	A new member of the family has come to live with us (parent, child, grandchild, relative)		
2)	The conflict in our family has worsened		
3)	I had a serious accident or acquired a serious illness		
4)	My family had a serious accident or acquired a serious illness		
5)	A member of our family has passed away		
6)	A married child(ren) has divorced or separated		
7)	Son or daughter had an unwanted pregnancy		
8)	I (my wife) had an unwanted pregnancy		
9)	I (my wife) had a miscarriage		
10)	My income or the income of my spouse has decreased		
11)	I lost my job or my spouse has lost his/her job		
12)	A child has lost his/her job		
13)	I have suffered from financial losses		
14)	My children have suffered from financial losses		
15)	My children have become delinquent borrowers		
16)	Had to move to a place with worse living conditions		
17)	Was victimized by crime such as fraud, theft, etc.		
18)	A child or member of the family was victimized by crime		

■ Family

27. Please list all those you consider as a member of your family. (The answer should be entered by the interviewer after the response is given.)

_____, _____, _____, _____, _____, _____, _____, _____

- 0) I don't consider anyone other than myself as family
- 1) Spouse
- 2) Father
- 3) Mother
- 4) Unmarried child living together with me
- 5) Married child and his/her spouse living together with me
- 6) Unmarried child not living together with me
- 7) Married son and daughter-in-law not living together with me
- 8) Married daughter and son-in-law not living together with me
- 9) Grandson and granddaughter living together with me
- 10) Grandson and granddaughter not living together with me
- 11) Husband's father/ father-in-law
- 12) Husband's mother/ mother-in-law
- 13) Wife's father/ father-in-law
- 14) Wife's mother/ mother-in-law
- 15) Siblings and their families
- 16) Uncle and his family
- 17) Other (specify _____)

28. Considering the total amount of house work in a household as 100%, what percentage of the housework are the following people responsible for?

Housework/Member of household	Self	Spouse	Daughters	Sons	Parents	Parents of spouse	Grand-parents	Other	Total
Cleaning									100%
Laundry									100%
Cooking									100%
Childrearing									100%
Shopping for necessities									100%
Grocery shopping									100%

29. In your household, who holds the financial decision making power (purchasing a home, asset management, taking out loans, underwriting someone's debt etc.)?

- 1) I decide on my own
- 2) My spouse mostly makes the decision
- 3) My spouse and I make decisions together
- 4) My parents (in laws) mostly make the decisions
- 5) I consult with my siblings and we make decisions together
- 6) I consult with my children and make decisions
- 7) Other: _____

30. Has your marital status changed since the last interview?
- 1) Yes
 - 2) No

31. What is your current marital status?
- 1) Married (including live-in boyfriend/girlfriend)
 - 2) Divorced
 - 3) Widowed
 - 4) Separated
 - 5) Single

※ Question 32 ~ 34 should be answered only by those who currently have a spouse (including those with live-in girlfriend/boyfriend).

32. How do you feel about your current relationship with your spouse?
- 1) Very satisfied
 - 2) Satisfied
 - 3) Neither satisfied nor dissatisfied
 - 4) Dissatisfied
 - 5) Very dissatisfied

33. How do you feel about the participation of your spouse in doing housework (cleaning, cooking, help with shopping, caring for children etc.)?
- 1) Very satisfied
 - 2) Satisfied
 - 3) Neither satisfied nor dissatisfied
 - 4) Dissatisfied
 - 5) Very dissatisfied

34. How do you feel about your communication (conversation) with your spouse?
- 1) Very satisfied
 - 2) Satisfied
 - 3) Neither satisfied nor dissatisfied
 - 4) Dissatisfied
 - 5) Very dissatisfied

※ Questions 35 ~ 38 should be answered only by those who currently do not have a spouse (divorced, widowed, separated).

35. If there were difficulties you faced after you became single, what were those difficulties?
(Please list 2 in order of importance)

1st: _____ 2nd: _____

- 1) Problems related to children (problems such as misbehavior, dropping school grades, running away from home, disobedience etc.)
- 2) Physical health deteriorated
- 3) Mental health deteriorated (ex. Insomnia, depression, nervousness, excessive stress etc.)
- 4) Social relations deteriorate such as being unable to meet with friends or relatives as often as one used to
- 5) Greater financial difficulty such as inability to meet cost of living
- 6) Suffered from social prejudices viewing divorcees as problematic people
- 7) No special difficulties
- 8) Other: _____

36. What are the things that improved since you became single?

- 1) Less stress caused by spouse
- 2) Improved relationship with children
- 3) No more problems or conflicts with in-laws
- 4) Decrease in financial problems (debt, insufficient funds to meet cost of living) caused by spouse
- 5) Was able to get a job
- 6) Other: _____

37. Are you currently in a relationship with someone of the opposite sex?

- 1) Yes
- 2) No

38. If there is an opportunity in the future do you want to get remarried?

- 1) Yes
- 2) No
- 3) I have not yet made a decision

39. How many children have you given birth to? (Include children who died at time of birth)

Son _____, Daughter _____, Total _____ child(ren)

40. Were there any children who died from an illness or an accident after birth?

Son _____, Daughter _____, Total _____ child(ren)

※ Questions 41 ~ 47 should be answered by only those with younger than school-age children (grandchildren).

41. Who is currently caring for your younger than school-age child (grandchild)?

Person (institution) caring for the child	Child (number)_____*	Child (number)_____*	Child (number)_____*
1) Self			
2) Spouse			
3) Parents			
4) Parents of spouse			
5) Grown up child			
6) Relative (specify _____)			
7) Relative of spouse (specify _____)	Grandchild 1 (number)_____*	Grandchild 2 (number)_____*	Grandchild 3 (number)_____*
8) Neighbor			
9) Housekeeper			
10) Kindergarten, preschool, or nursery school			
11) No specific caregiver			
12) Babysitter (someone paid to care for the child)			
13) Other: _____			

* The number assigned to the child (grandchild) is the same as the number assigned in the chart of household members.

42. Do you have someone who can provide you with advice or counseling regarding childrearing? (Please enter all applicable persons and institutions from the <example> below.)

_____, _____, _____, _____, _____, _____, _____, _____

43. In case you are unable to care for your child (grandchild), do you have someone who can temporarily take care of the child? (Please enter all applicable persons and institutions from the <example> below.)

_____, _____, _____, _____, _____, _____, _____, _____

Person (institution) caring for the child
1) Self
2) Spouse
3) Parents
4) Parents of spouse
5) Grown up child
6) Relative (specify _____)
7) Relative of spouse (specify _____)
8) Neighbor
9) Friend
10) Kindergarten, preschool, or nursery school
11) Professional
12) Babysitter (someone paid to care for the child)
13) There is no one
14) Other (specify _____)

44. Is your younger than school-age child (grandchild) attending a childcare facility? (Please mark all applicable persons and institutions)

Childcare facility	Child (number)____*	Child (number)____*	Child (number)____*
1) Public kindergarten			
2) Private kindergarten			
3) Nursery school	Grandchild 1 (number)____*	Grandchild 2 (number)____*	Grandchild 3 (number)____*
4) Babysitter			
5) Private educational institute			
6) Day care			
7) Other: _____			

*Please enter the child ID from question 41.

45. What is the average monthly amount spent on childrearing?

Type of childrearing expenses	Child____	Child____	Child____	Grandchild1	Grandchild2
Childcare cost (nursery school, kindergarten, babysitter etc.)					
Private educational institute					
Supplies (books, school supplies, toys etc.)					
Snack					
Medical costs					
Other (specify: _____)					
Total cost					

46. Please mark the answer which best represents your thoughts on raising your child (grandchild).

Questions	Strongly agree	Agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree
1) I am unable to rest even for a short time because of my child	1	2	3	4	5
2) I am unable to spend enough time with my child	1	2	3	4	5
3) I feel that I am maturing through raising my child	1	2	3	4	5
4) I am able to endure difficult times because of my child	1	2	3	4	5
5) I feel that things are working out well because of my child	1	2	3	4	5
6) My child brings hope	1	2	3	4	5
7) My family becomes closer and happier because of my child	1	2	3	4	5
8) I am very sensitive because of my child	1	2	3	4	5
9) My spouse and I often clash because of our child	1	2	3	4	5
10) My child doesn't seem to like me	1	2	3	4	5

47. In raising a younger than school age child, what are some improvements you would like to see or support you would like to receive? Please list 2 in order of priority.

1st priority: _____ 2nd priority: _____

- 1) Increase in pay during maternity leave (providing childcare support according to the childcare leave system)
- 2) Expansion of medical coverage for pregnancy related issues
- 3) Childcare facilities at actual cost or for free (day care center, nursery)
- 4) Children's allowance (cash grant for children of low income families)
- 5) Expansion of free immunization
- 6) Expansion of maternity benefits and maternity support services
- 7) Other: _____

※ Please answer questions 48 ~ 51 if you have children aged 18 or older living with you or living independently (including both married and single).

48. Have you been upset by the following? Please mark the applicable answer.

Questions	Very often	Often	Sometimes	Never	Not applicable
1) Negligent about childrearing responsibilities and often don't show up after entrusting grandchildren	1	2	3	4	5
2) Disability, chronic illness of grown up child	1	2	3	4	5
3) Squandered all possessions or incurred large amounts of debt	1	2	3	4	5
4) Unable to get in contact	1	2	3	4	5
5) Involved in accidents or misbehavior (ex. traffic accident, violence)	1	2	3	4	5
6) Frequent consumption of alcohol	1	2	3	4	5
7) Gambling	1	2	3	4	5
8) Extramarital affair	1	2	3	4	5
9) Does not provide financial help to parents	1	2	3	4	5
10) Issues of child's marriage	1	2	3	4	5
11) Other: _____	1	2	3	4	5

48-1. How is your relationship with your children?

- 1) I have a very good relationship with all of my children
- 2) Overall, I have a good relationship with all of my children
- 3) I have a good relationship with some children and not with others
- 4) Overall, I have a bad relationship with all of my children
- 5) I have a very bad relationship with all of my children

49. Please tell us about your financial support of your child.

49-1. Are you providing living expenses or an allowance for your child?

- 1) Yes ⇒ Go to question 49-2.
- 2) No ⇒ Go to question 49-3.

49-2. If you are providing living expenses or an allowance for your child, how much is the average monthly amount?

_____ won

49-3. Is your child providing you with living expenses or giving you an allowance?

- 1) Yes ⇒ Go to question 49-4.
- 2) No ⇒ Go to question 50.

49-4. If your child is providing you with living expenses or giving you an allowance, how much is the average monthly amount?

_____ won

50. Please tell us about your non-financial relationship with your child who is currently not living with you.

50-1. Are you providing assistance to that child such as cleaning/cooking/care during illness/food, etc.?

- 1) Yes
- 2) No

50-2. Is that child providing you with assistance such as cleaning/cooking/caring during illness/food, etc.?

- 1) Yes
- 2) No

51. How often do you have contact with the children you are currently not living with?

- 1) Once every 2-3 days
- 2) About once a week
- 3) About once every 2 weeks
- 4) About once a month
- 5) About once every 2-3 months
- 6) About once every 6 months
- 7) About once every few years
- 8) Do not keep in contact at all

※ Questions 52 ~ 59 are regarding your relationship with your parents. Please answer each question.

52. Are both of your parents living?

- 1) Both parents are living ⇒ Go to question 52-1.
- 2) Only one parent is living ⇒ Go to question 52-1.
- 3) Both parents are deceased ⇒ Go to question 52-2.

52-1. What is the age of the parent who is living?

Father: _____ years old Mother: _____ years old

(⇒ If both parent is living please go to question 52-3, if only one parent is living please go to question 52-2)

52-2. If your parents are deceased, when did they pass away?

Father: _____ years old Mother: _____ years old

(⇒ If both parents are deceased please go to question 60, if only one parent is deceased please go to question 52-3)

52-3. Are you living together with your parents?

- 1) Yes, currently living together ⇒ Go to question 55.
- 2) No, we have lived together in the past but not anymore ⇒ Go to question 53.
- 3) No, I have never lived with them since I became an adult ⇒ Go to question 53.

53. If you are not living with your parents, who are your parents living with?

- 1) Parents are living independently
- 2) With other siblings
- 3) With relatives
- 4) In a paid facility
- 5) In a facility free of charge
- 6) Don't know
- 7) Other: _____

54. How often do you talk to your parents on the phone?

- 1) Almost everyday
- 2) Once or twice a week
- 3) More than once a month
- 4) Once or twice a year
- 5) Almost never

55. How is your relationship with your parents in general?

- 1) Very good ⇒ Go to question 56.
- 2) Good ⇒ Go to question 56.
- 3) Neither good nor bad ⇒ Go to question 56.
- 4) Bad ⇒ Go to question 55-1.
- 5) Very bad ⇒ Go to question 55-1.

55-1. If you have a bad relationship with your parents what is the reason?

- 1) Financial support (assisting with cost of living etc.)
- 2) Problem of supporting and living with elderly parents
- 3) Differences in personality
- 4) Due to problems with other siblings
- 5) One's own problems (causing financial damages, cannot take care of oneself)
- 6) Incompetence of parents, extramarital affair, gambling, violence
- 7) Other: _____ (specify)

56. Are you currently providing financial assistance (living expenses, allowance etc.) to your parents?

- 1) Yes ⇒ Go to question 56-1.
- 2) No ⇒ Go to question 57.

56-1. If you are providing financial assistance to your parents, what is the average monthly amount?

_____ won

57. Are your parents currently providing financial assistance (ex. Living expenses,) to you?

- 1) Yes ⇒ Go to question 57-1.
- 2) No ⇒ Go to question 58.

57-1. What is the average monthly amount of the financial assistance provided to you by your parents?

_____ won

58. Are your parents providing you with assistance such as cleaning/cooking/childrearing/food etc.?

- 1) They are providing me with a lot of help everyday
- 2) They are providing some help
- 3) They are not providing much helping
- 4) They are not providing any help at all

59. Are you providing your parents with assistance such as cleaning/cooking/caretaking/food etc.?
- 1) I am providing my parents with a lot of help everyday
 - 2) I am providing some help
 - 3) I am not providing much helping
 - 4) I am not providing any help at all

※ Questions 60 ~ 67 are regarding your relationship with the parents of your spouse. Please answer each question.

60. Are both of your spouse's parents living?
- 1) Both spouse's parents are living ⇒ Go to question 60-1.
 - 2) Only one parent is living ⇒ Go to question 60-1.
 - 3) Both spouse's parents are deceased ⇒ Go to question 60-2.

60-1. What is the age of your spouse's parent who is living?

Spouse's father: _____ years old Spouse's mother: _____ years old
(⇒ If both your spouse's parent are living please go to question 60-3, if only one parent of spouse is living please go to question 60-2)

60-2. If your spouse's parents are deceased, when did they pass away?

Spouse's father: _____ years old Spouse's mother: _____ years old
(⇒ If both your spouse's parents are deceased please go to question 68, if only one parent of spouse is deceased please go to question 60-3)

60-3. Are you living together with your spouse's parents?

- 1) Yes, currently living together ⇒ Go to question 63.
- 2) No, we have lived together in the past but not anymore ⇒ Go to question 61.
- 3) No, I have never lived with them ⇒ Go to question 61.

61. If you are not living with your spouse's parents, who are your spouse's parents living with?

- 1) Spouse's parents are living independently
- 2) With other siblings
- 3) With relatives
- 4) In a paid facility
- 5) In a facility free of charge
- 6) Don't know
- 7) Other: _____

62. How often do you talk to your spouse's parents on the phone?

- 1) Almost everyday
- 2) Once or twice a week
- 3) More than once a month
- 4) Once or twice a year
- 5) Almost never
- 6) Not applicable (Living with parents)

63. How is your relationship with your spouse's parents in general?

- 1) Very good ⇒ Go to question 64.
- 2) Good ⇒ Go to question 64.
- 3) Neither good nor bad ⇒ Go to question 64.
- 4) Bad ⇒ Go to question 63-1.
- 5) Very bad ⇒ Go to question 63-1.

63-1. If you have a bad relationship with your spouse's parents what is the reason?

- 1) Financial support (assisting with cost of living etc.)
- 2) Problem of supporting and living with elderly parents
- 3) Differences in personality
- 4) Due to problems with other siblings
- 5) One's own problems (causing financial damages, cannot take care of oneself)
- 6) Incompetence of parents, extramarital affair, gambling, violence
- 7) Other: _____ (specify)

64. Are you currently providing financial assistance (living expenses, allowance etc.) to your spouse's parents?

- 1) Yes ⇒ Go to question 64-1.
- 2) No ⇒ Go to question 65.

64-1. If you are providing financial assistance to your spouse's parents, what is the average monthly amount?

_____ won

65. Are your spouse's parents currently providing financial assistance (ex. Living expenses,) to you?

- 1) Yes ⇒ Go to question 65-1.
- 2) No ⇒ Go to question 66.

65-1. What is the average monthly amount of the financial assistance provided to you by your spouse's parents?

_____ won

66. Are your spouse's parents providing you with assistance such as cleaning, cooking, childrearing, food etc.?

- 1) They are providing me with a lot of help everyday
- 2) They are providing some help
- 3) They are not providing much helping
- 4) They are not providing any help at all

67. Are you providing your spouse's parents with assistance such as cleaning, cooking, caretaking, food etc.?

- 1) I am providing my spouse's parents with a lot of help everyday
- 2) I am providing some help
- 3) I am not providing much helping
- 4) I am not providing any help at all

※ From question 68 on will ask your opinion on family and marriage. Please answer each question.

68. What is your opinion about the following questions? Please mark the applicable answer.

Questions	Strongly agree	Agree	Disagree	Strongly disagree
1) Even if it's a bad marriage it is better than not marrying at all	1	2	3	4
2) A couple can live together without getting married	1	2	3	4
3) If you want a child you must get married	1	2	3	4
4) The responsibility of making a living primarily lies with the husband	1	2	3	4
5) The husband should also equally partake in childrearing and housework	1	2	3	4
6) If there are unsolvable problems between a married couple divorce is possible	1	2	3	4
7) A father or mother alone can do a good job raising a child	1	2	3	4
8) If a child grows up to be problematic, it is the responsibility of the parents	1	2	3	4
9) I feel uneasy about entrusting a young child to a childcare facility	1	2	3	4
10) The academic performance of a child depends on the efforts of the parents	1	2	3	4
11) It is the responsibility of the children to financially support their elderly parents	1	2	3	4
12) It is the responsibility of the children to provide long term care for elderly parents in poor health	1	2	3	4
13) It is the responsibility of the children to make sure their elderly parents have a peace of mind	1	2	3	4

69. Do you feel that your family is amicable?

- 1) Very amicable
- 2) Somewhat amicable
- 3) Neither amicable nor not amicable
- 4) Not amicable
- 5) Not at all amicable
- 0) Not applicable

■ **Education**

※ Questions 70 ~ 75 should be answered by all respondents.

70. Do you think that people become poor because they did not receive proper education?

- 1) Strongly agree
- 2) Agree
- 3) Disagree
- 4) Strongly disagree

71. Do you think that education is definitely necessary in order to escape from poverty?

- 1) Strongly agree
- 2) Agree
- 3) Disagree
- 4) Strongly disagree

72. Why do you think it is important to educate your child?

- 1) Greater opportunities for choosing secure jobs
- 2) As not to be looked down upon by others
- 3) To be successful and get ahead in the world
- 4) Because it is the duty of the parents to their children
- 5) Because other people send their children to school
- 6) Other (specify: _____)

73. What do you stress the most in educating your child?

- 1) The development of good character
- 2) Good grades for entering good schools
- 3) Amicable relations with friends
- 4) Graduation
- 5) Other (specify: _____)

74. Do you think that your current area of residence is suitable for educating your child (grandchild)?

- 1) Strongly agree
- 2) Agree
- 3) Disagree
- 4) Strongly disagree

75. What do you think about the level of the elementary school your child (grandchild) or the children of your neighbors are attending?

- 1) Very high
- 2) Somewhat high
- 3) Average
- 4) Somewhat low
- 5) Very low

※ Please answer questions 76 ~ 84 if you have an elementary/middle/high school age child (grandchild).

76. How are your child's (grandchild's) grades? (Please use the numbers assigned to household members)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) Very good ⇒ Go to question 77.
- 2) Good ⇒ Go to question 77.
- 3) Average ⇒ Go to question 77.
- 4) Bad ⇒ Go to question 76-1.
- 5) Very bad ⇒ Go to question 76-1.

76-1. If his/her grades are bad, what do you think is the reason? (Please use the numbers assigned to household members)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) Indifference of parents
- 2) Parents' don't have the time to look after them
- 3) In ability to support costs of private educational institutions
- 4) Not enough effort by the child
- 5) Unhealthy peer relations
- 6) Domestic trouble
- 7) Poor health
- 8) Other (specify: _____)

77. Do you have a child (grandchild) who dropped out of school? (Please enter the household member ID)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) Yes ⇒ Go to question 77-1.
- 2) No ⇒ Go to question 78.

77-1. What is the reason for dropping out of school? (Please enter the household member ID)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) Due to financial reasons
- 2) Due to health issues
- 3) It didn't fit his/her aptitude
- 4) He/she ran away from home
- 5) He/she violated school regulations
- 6) Other (specify: _____)

77-2. What is the child (grandchild) currently doing since dropping out of school? (Please enter the household member ID)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) Preparing to take the school qualification exam (self-education)
- 2) Seeking employment
- 3) Uncertain of his/her whereabouts
- 4) Not doing anything special
- 5) Other (specify: _____)

78. Are you distressed by your child (grandchild)? (Please enter the household member ID)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) Often
- 2) Sometimes
- 3) Rarely
- 4) Never

79. Do you have a child (grandchild) who has run away from home during the past year or has recently run away from home? (Please enter the household member ID)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) Yes
- 2) No

80. How often do you consult with your child's teacher regarding your child's (grandchild's) life in general including school work and relationships with friends? (Please use the numbers assigned to household members)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) More than twice a month
- 2) Once a month
- 3) Once every semester
- 4) Once a year
- 5) Almost never

81. What is the highest level of education you would like your child (grandchild) to attain? (Please use the numbers assigned to household members)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) Middle school ⇒ Go to question 82.
- 2) High school ⇒ Go to question 82.
- 3) Junior college ⇒ Go to question 81-1.
- 4) College ⇒ Go to question 81-1.
- 5) College or more ⇒ Go to question 81-1.
- 6) Other (specify: _____)

81-1. If you plan on educating your child beyond college, what is your reason for it? (Please use the numbers assigned to household members)

(Grand)Child _____*	(Grand)Child _____*	(Grand)Child _____*

- 1) I don't want them to live like I did (to escape from poverty)
- 2) So he/she can contribute as a necessary member of society
- 3) Because everyone goes to college nowadays
- 4) Because the child (grandchild) wants to
- 5) To get a good job
- 6) Because the child (grandchild) is academically talented
- 7) Other (specify: _____)

82. Does your child (grandchild) have a room to study in the home you are currently residing in?

- 1) Yes
- 2) No

83. Is your child (grandchild) receiving extracurricular lessons (English, math, piano, art etc.) in addition to school work? (Please select all applicable answers)

- 1) Receives supplementary lessons through afterschool program at school
- 2) Attends private educational institution
- 3) Receives private tutoring
- 4) Older sibling helps out with studies
- 5) Utilizes local study room (or facilities offering free lessons) etc.
- 6) Utilizes home-study materials
- 7) No, not at all
- 8) Other (specify: _____)

84. What kind of difficulties are you experiencing in your relationship with your children (grandchildren)? Please select from the following. (Please select 2 applicable answers in order of importance). (Please enter the household member ID)

Category	Order of importance
Child (grandchild) _____	1st: _____ 2nd: _____
Child (grandchild) _____	1st: _____ 2nd: _____
Child (grandchild) _____	1st: _____ 2nd: _____

- 1) Doesn't concentrate on his/her studies
- 2) Disobedient or causes trouble
- 3) Spends too much money
- 4) Comes home late or stays out overnight
- 5) Child (grandchild) has health problems
- 6) Inability to provide for child (grandchild) as well as others do
- 7) Insufficient funds to meet education costs
- 8) Bad relationship between siblings
- 9) Other (specify)
- 0) No difficulties

Income and expenditure

85. What is the average monthly income of your household including earned income, business income, and secondary income? (Please answer using disposable income excluding personal and business income taxes) (Unit: ___ won)

Household member	Earned income	Business income	Secondary income	Property income	Total
Total					

* Property income includes income from interests, rent, personal and private pension.

* If is difficult to classify income for each household member and income source, please provide the total household income.

86. What is the monthly average amount of monetary or material provisions (food, clothes, daily necessities etc.) provided to your household by parents, children, relatives, friends, or social organizations?

Source	Type	Quantity	Amount (won)
Family, relatives, friends			
Institutions and organizations (welfare, religious)			
Total			

87. What is the monthly average of pension payments, worker's compensation insurance benefits, unemployment benefits, and insurance payments regularly received by your household?

Category	Content	Amount (won)
National Pension		
Worker's compensation insurance benefits		
Unemployment benefits		
Private insurance (including personal pension and corporate pension)		
Other		
Total		

88. What is the average monthly public transfer income of your household?

Category	Amount (won)
National Basic Livelihood Security benefits	
Single-parent household subsidy	
Disabled household subsidy	
Child head of household subsidy	
Pension for senior citizens	
Transportation subsidy	
Veteran related subsidy	
Other (specify: _____)	
Total	

89. What is the total monthly income of your household including earned income, business income and sideline income, property income, private and public transfer income?
 (* The interviewer should enter the total amount by combining the income from questions 85, 86, 87, and 88)

_____ Won per month

90. In comparison to that of last year, how has your household income changed this year?

- 1) Increased ⇒ Go to question 90-1.
- 2) Decreased ⇒ Go to question 90-2.
- 3) Similar or has not changed ⇒ Go to question 91.

90-1. If your household income has increased in comparison to that of last year, what is the reason for the increase? (⇒ Please go to question 91 after answering this question)

- 1) Got a new job
- 2) Got a higher paying job
- 3) Same job but got a raise
- 4) Business did better than last year
- 5) Worked more days than last year
- 6) Other: _____

90-2. If your household income has decreased in comparison to that of last year, what is the reason for the decrease?

- 1) Laid off or retired
- 2) Changed to a lower paying job
- 3) Same job but experienced a pay cut
- 4) Business did worse than last year
- 5) Worked less days than last year
- 6) Other: _____

91. How do you think your household income will change in 5 years compared to that of today?

- 1) It will increase dramatically ⇒ Go to question 91-1.
- 2) It will increase somewhat ⇒ Go to question 91-1.
- 3) It will be similar to what it is now ⇒ Go to question 92.
- 4) It will decrease somewhat ⇒ Go to question 92.
- 5) It will decrease dramatically ⇒ Go to question 92.

91-1. If your household income will increase in 5 years, what is the reason for the increase?

- 1) Employment of respondent or a family member
- 2) Increase in savings
- 3) Repayment of debt
- 4) Pension income
- 5) Government subsidy income
- 6) Increase in the income of the respondent or a family member
- 7) Other: _____

92. Please state your average monthly household expenses for each category.

Category	Amount (won)
Groceries	
Dining out	
Housing (rent)	
Health and medical expenses	
Apartment maintenance, water, electricity, and heating	
Culture and communication expenses (Cellular phone, internet, newspaper, books and magazines, costs of using cultural facilities)	
Public education (admission, tuition fees)	
Private education (kindergarten, private educational institutions, tutoring, supply fees etc.)	
Special occasions, family events	
Transportation	
Other: _____	
Total	

93. What is your household's monthly average expenditure?

_____ Won per month

94. Is your household putting away money for saving each month?

- 1) Yes ⇒ Go to question 94-1.
- 2) No ⇒ Go to question 95.

94-1. If you are putting away money for saving each month, how much do you save each month?

_____ Won per month

95. The following questions are regarding the financial situation of your household during the past month. Please mark the applicable answers.

Questions	Strongly agree	Agree	Disagree	Strongly disagree
1) Did not have enough money to buy groceries	1	2	3	4
2) Did not have enough money to pay housing costs (rent, maintenance fees)	1	2	3	4
3) Did not have enough money for health and medical (treatment, medication) expenses	1	2	3	4
4) Did not have enough money to pay for electricity, water, and heating	1	2	3	4
5) Did not have enough money to buy clothes	1	2	3	4
6) Did not have enough money to pay for children's private educational institution costs	1	2	3	4

96. Please tell us about the real-estate and moveable assets of your household.

Category	Amount (won)
Building	
Land	
Automobile	
Other moveable assets (livestock, timber, machinery etc.)	
Other: _____	
Total	

97. Please tell us about your financial assets. (Please enter the cumulative amount)

Category	Amount (won)
Savings and installment savings	
Refundable insurance and pension payments	
Security deposit for rent/lease on a deposit basis	
Stocks, bonds, promissory note, gye money (traditional private fund payment)	
Total	

98. Have your household assets increased compared to this time last year?

- 1) Increased ⇒ Go to question 98-1.
- 2) Decreased ⇒ Go to question 98-1.
- 3) Similar ⇒ Go to question 99.

98-1. If your household assets changed compared to this time last year, what is the reason for the change?

(_____)

99. Does your household currently have a debt?

- 1) Yes ⇒ Go to question 99-1.
- 2) No ⇒ Go to question 105.

99-1. Please tell us about your household debt situation.

Indebted to	Amount (won)
Family or relative	
Neighbor or coworker	
Financial institution	
Private moneylender	
Credit card	
Other	
Total	

100. Has the above debt increased or decreased compared to this time last year?

- 1) Increased ⇒ Go to question 100-1.
- 2) Decreased ⇒ Go to question 101.
- 3) No change ⇒ Go to question 101.

100-1. If debt has increased compared to this time last year, what is the reason for the increase?

- 1) Additional interest incurred due to inability to repay existing debt
- 2) New debt incurred for daily household expenses
- 3) New debt incurred due to sudden demand for funds due to illness, business etc.
- 4) Other: _____

101. How much does your household spend on repaying debt (including the principal and interest) each month?

_____ Won per month

102. If you currently have debt, how many years do you think it will take to repay it? (The period it will take to repay a debt if one makes the effort, even if it is a long term debt)

- 1) Within a year
- 2) Within 3 years
- 3) Within 5 years
- 4) Within 10 years
- 5) More than 10 years
- 6) Unable to repay debt

103. Are you currently wanting to take out another loan but unable to do so?

- 1) Yes ⇒ Go to question 103-1.
- 2) No ⇒ Go to question 104.

103-1. What is your reason for wanting to take out another loan?

- 1) Household expenses
- 2) Educational expenses
- 3) Business expenses
- 4) Purchasing a home
- 5) Medical expenses
- 6) Repayment of an outstanding loan
- 7) Other: _____

104. Is there a delinquent borrower among the members of your household?

- 1) Yes
- 2) No

105. Are you currently using a credit card?

- 1) Yes ⇒ Go to question 105-1.
- 2) No ⇒ Go to question 105-2.

105-1. If you are using a credit card, for what purposes do you mostly use your credit card?

- 1) Mostly for shopping
- 2) Mostly for cash services
- 3) Both for shopping and cash services
- 4) Other: _____

105-2. If you are currently not using a credit card, what is the reason for not using a credit card?

- 1) I have never owned a credit card
- 2) My credit card was suspended
- 3) I canceled my credit card because I seemed to overspend due to the credit card
- 4) I don't have a need for a credit card
- 5) Other: _____

106. What role do you think the credit card plays in your consumption activities?

- 1) I am able to meet emergency expenses because of my credit card
- 2) There was an increase in unnecessary expenditures due to the credit card
- 3) A credit card is convenient as a means of payment
- 4) Don't know
- 5) Other: _____

■ Labor

※ Questions 107 and 108 should be answered by all respondents.

107. Have there been changes to your employment status or job in comparison to the time of interview a year ago?

- 1) Yes
- 2) No

108. Please fill in the blanks below for each category regarding your job or employment status for the past year. (*The interviewer should refer to the industrial classification table and reason for unemployment in entering the codes and contents.)

Order	From ~ To	Business content (Industry)	Type of work (occupation)	Type of employment	Wage and business income	Reason for unemployment or suspension of business
1						
2						
3						
4						

※ Please answer questions 109 ~ 121-2 only if you are a paid worker (permanent, temporary, daily worker).

109. What is the content of business conducted at your primary place of work?

(※ The interviewer should ask in detail and enter the response)

The content of business conducted at your place of work (type of business):

110. What is the work you do at this workplace?

(※ The interviewer should ask in detail and enter the response)

Type of work you do (occupation):

111. How many employees are there at your current place of work?

- 1) I work alone
- 2) 2-5 employees
- 3) 6-10 employees
- 4) 11-20 employees
- 5) 21-30 employees
- 6) More than 30 employees

112. What is your current type of employment out of the following?

- 1) Regular employee
- 2) Temporary employee
- 3) Day laborer

[Definition]

- 1) Regular employee: A worker with a permanent employment contract without a set period of termination guaranteed periodic promotions and dismissal protection under labor laws. (includes contract workers with contracts longer than a year)
- 2) Temporary employee: A worker with an employment contract longer than one month but less than a year and being paid to work employed by a person or a company
- 3) Day laborer: A worker with an employment contract of less than one month or employed and paid on a day to day basis, or paid for working from place to place without a consistent location of work

113. Where does your current work belong among the following types of work?

- 1) Full-time
- 2) Part-time
- 3) Shift system
- 4) Other

113-1. In general, what are you hours of work?

- 1) Main job from _____ to _____
- 2) Secondary job from _____ to _____
- 3) Other from _____ to _____

113-2. If you are working under a shift system which type of shift system are you working under?

- 1) Two shift system
- 2) Three shift system
- 3) Other
- 0) Not applicable

114. On average, how many days do you work in a week?

Weekly average, _____ days worked

Weekly average, _____ hours worked

115. On average, how many days did you work in a month?

Monthly average, _____ days worked

116. How is your wage paid at this place of work?

- 1) Once a month
- 2) Once every two weeks or once a week
- 3) Daily
- 4) Frequently without a set period
- 5) Other: _____

117. What is your wage at your current place of work? (Calculate for main job only)

Monthly average, _____ won (after tax amount)

118. How did you get employed at your current place of work?

(* Please select one answer from the [examples] below.)

[Examples]

- 1) Through family
- 2) Introduction by a friend
- 3) Introduction by relative
- 4) Through a neighbor
- 5) Through the advertisement in a newspaper, TV, internet, classifieds etc.
- 6) By visiting the desired place of employment in person
- 7) Through a private employment agency
- 8) Through a public employment agency (employment security center, Job center, dong office, head of a tong, etc.)
- 9) Religious institution (church, Catholic Church, temple, etc.)
- 10) Other

119. How has your wage changed since the last survey?

- 1) Increased ⇒ Go to question 119-1.
- 2) No change ⇒ Go to question 120.
- 3) Decreased ⇒ Go to question 119-2.

119-1. If your wage has increased, how much has it increased?

Increased by a monthly average of _____ won

119-2. If your wage has decreased, how much has it decreased?

Decreased by a monthly average of _____ won

120. In terms of job security how have things changed since the last survey?

- 1) Secure
- 2) No change
- 3) Became unsecure

121. In terms of hours of work how have things changed since the last survey?

- 1) Increased ⇒ Go to question 121-1.
- 2) No change ⇒ Go to question 126.
- 3) Decreased ⇒ Go to question 121-2.

121-1. If your hours of work has increased, how much has it increased?

Increased by a monthly average of _____ hours

121-2. If your hours of work has decreased, how much has it decreased?

Decreased by a monthly average of _____ hours

※ Please answer questions 122 ~ 125 only if you are an unpaid worker (employer, self-employed, unpaid family worker).

122. What is the work you currently do to make a living?

(* example: enter specifically such as fruit stand, cart bar, farming etc.)

123. On average, how many days did you work in a week?

Weekly average, _____ days worked

Weekly average, _____ hours worked

124. On average, how many days did you work in a month?

Monthly average, _____ days worked

125. From the total income you have earned while working during the past year what is your net income excluding expenses (transportation costs, food costs, supply fees etc.)? (* The interviewer should enter the monthly average amount by dividing the annual income by 12)

Monthly average, _____ won

※ Questions 126 ~ 128 should be answered by all employed (wage, non-wage) respondents.

126. Are you enrolled in the following social insurance programs through your current employer?

National pension	1) Enrolled 2) Not enrolled 3) Don't know
Company health plan	1) Enrolled 2) Not enrolled 3) Don't know
Employment insurance	1) Enrolled 2) Not enrolled 3) Don't know
Occupational health and safety insurance	1) Enrolled 2) Not enrolled 3) Don't know

127. How satisfied are you at your current workplace regarding the following?

Work satisfaction	Very satisfied	Satisfied	Neither satisfied nor dissatisfied	Dissatisfied	Very dissatisfied
Wage or income	1	2	3	4	5
Job security	1	2	3	4	5
Content of work	1	2	3	4	5
Work environment	1	2	3	4	5
Hours of work	1	2	3	4	5
Possibility for personal development	1	2	3	4	5
Communication and human relations	1	2	3	4	5

128. Do you have a side job or extra work you do in addition to your main job? (*Only include work which produces income)

- 1) Yes ⇒ Go to question 128-1.
- 2) No ⇒ Go to question 134.

128-1. Please list all side jobs or extra work activities you are currently conducting.

Type of secondary job	Hours of work (Weekly total hours)	Reason for secondary job *

* Please select your reason for having a secondary job from the [examples] below.

<p>[Examples]</p> <ol style="list-style-type: none"> 1) Spouse or someone in the family lost his/her job 2) Insufficient funds for education costs 3) To purchase a home or for deposit money to lease an apartment/house 4) In order to raise business funds 5) In order to pay private insurance costs 6) To prepare for unemployment 7) To prepare for old age 8) Have a lot of debt to repay 9) Insufficient funds to meet cost of living 10) Other

※ Please answer questions 129 ~ 133 only if you are unemployed (job seeker, economically inactive population).

129. When did you last leave a job (business)? (*If you have never worked please do not answer and go to question 130.)

Worked (for _____ years) until, year _____ month _____

129-1. What was the content of the business (industry)? (*The interviewer should fill in the answer by referring to the attached industrial classification table)

129-2. What was the type of work (occupation)? (*The interviewer should fill in the answer by referring to the attached industrial classification table)

129-3. What was the status of your employment? (*The interviewer should fill in the answer by referring to the attached industrial classification table)

129-4. What was your monthly average wage or business income?

_____ won

129-5. What was the reason for losing your job or suspending your business? (*The interviewer should fill in the answer by referring to the reason for job loss in the attachment.)

130. Have you conducted job seeking activities during the past year?

- 1) Yes
- 2) No

131. If there is a suitable job, would you work?

- 1) Yes ⇒ Go to question 131-1.
- 2) No ⇒ Go to question 132.

131-1. If yes, what is your desired level of income?

Monthly average, _____ won

131-2. If you want to work but have not yet “searched for a job”, what is the main reason for it? (Please go to question 133 after answering)

- 1) Due to illness or disability
- 2) I have decided to retire
- 3) Limited opportunities due to old age
- 4) Had to take full responsibility for taking care of the home (childrearing, caring for the sick etc.)
- 5) Didn't feel the need to work
- 6) Couldn't find a job that I liked
- 7) There were no jobs available
- 8) Because I am a delinquent borrower
- 9) Due to the lack of education, skills
- 10) Other: _____

132. If no, what is your main reason for not wanting to work?

- 1) Due to studies
- 2) Due to childrearing
- 3) Due to housework
- 4) Due to old age
- 5) Due to illness/disability
- 6) Desire to rest for a while
- 7) Other: _____

※ Questions 133 and on should be answered by all respondents.

133. The following are difficulties often faced in searching for employment (or business). Which of these have you experienced? (Please select two only.)

_____, _____

- 1) Insufficient job openings
- 2) Insufficient information
- 3) Sexual discrimination
- 4) Illness or disability
- 5) Old age
- 6) Housework
- 7) Insufficient education, skills
- 8) Extremely poor working conditions
- 9) Due to delinquent borrower status
- 10) Insufficient funds to run a business
- 0) Not applicable

134. How necessary do you feel are in-depth consultations which may be helpful in finding employment?

- 1) Very necessary
- 2) Somewhat necessary
- 3) Neither necessary nor unnecessary
- 4) Unnecessary
- 5) Very unnecessary

135. If you were given the opportunity to receive job training, would you receive the training?

- 1) I will receive the training ⇒ Go to question 135-1.
- 2) I will receive the training if employment is guaranteed ⇒ Go to question 135-1.
- 3) I will receive the training if it is for a preferred type of occupation
⇒ Go to question 135-1.
- 4) I will not receive the training ⇒ Go to question 135-4.

135-1. If you were to receive job training what type of training would you like to receive?

- 1) Training longer than 6 months with a higher possibility for employment
- 2) Training of less than 3 months for obtaining basic skills for employment
- 3) Training for opening one's own business with a small amount of capital
- 4) Training that can be received while working even if it means getting a job or opening one's own business a little later
- 5) Other: _____

135-2. The following questions are regarding your opinion on job training. Please mark the answer which most closely represents your own opinion.

Question	Strongly agree	Agree	Neither agree nor disagree	Somewhat disagree	Strongly disagree
1) It should be possible to receive training while working	1	2	3	4	5
2) In order to get a job one needs to become certified or licensed	1	2	3	4	5
3) If possibilities for employment are high I will receive long term training	1	2	3	4	5
4) Regardless of employment, a short training period is preferred	1	2	3	4	5
5) I may quit in the middle of training if there is a job opportunity	1	2	3	4	5

135-3. What is the greatest difficulty you expect in receiving training? (Please go to question 136 after answering this question)

- 1) Difficulty in living without an income during the training period
- 2) Inability to fully understand the content of training
- 3) Lack of help in caring for housework (childrearing, caring for the sick) while receiving training
- 4) The institution offering training is too far away from current place of residence

5) Other: _____

135-4. What is your greatest reason for not wanting to receive training?

- 1) Inability to take care of issues of livelihood
- 2) Small chance of employment following the training
- 3) Do not feel the need to receive training
- 4) The content of training may be too difficult
- 5) Due to health issues or disability
- 6) Other: _____

136. Programs for fostering self-sufficiency are programs through which the government provides secure jobs for those with the ability to work to become self-reliant and to foster the growth of self-reliance. How aware are you of such self-sufficiency fostering programs?

- 1) Very aware
- 2) Have heard of it but don't know much about it
- 3) Not at all aware

137. During the past year, have you participated in the following programs for fostering self-sufficiency?

- 1) Yes ⇒ Go to question 137-1.
- 2) No ⇒ Go to question 138.

(Example) Type of Self-sufficiency program

- 1) Community service (Caring for the elderly and disabled, repairing dilapidated dwellings, housekeeping support, childcare etc.)
- 2) Work programs run by the dong-office to foster self-sufficiency (mowing grass, taking care of flowerbeds, cleaning the streets etc.)
- 3) Work programs run by institutions supporting self-sufficiency (working as a helper at a public institution or welfare facility)
- 4) Community for the fostering of self-sufficiency (Recycling business, collective car wash business etc.)
- 5) Support for job seeking activities (Employment counseling and job placement)
- 6) Job training for fostering self-sufficiency
- 7) Internship for fostering self-sufficiency
- 8) Assistance for start-up businesses
- 9) Job seeking sales project (public works project for job seekers)
- 10) Other

137-1. If you have participated in programs for fostering self-sufficiency, please list all programs you have participated in from the above examples.

137-2. Why did you participate in programs for fostering self-sufficiency?

- 1) Because if I don't participate I can't receive the cost-of-living allowance (mandatory participant)

- 2) It's financially helpful
- 3) To start up a business or get a job in the future
- 4) Because I can be with others in the same predicament as myself
- 5) Other: _____

137-3. How helpful do you think the government sponsored programs for fostering self-sufficiency are to you? (Please go to question 141 after answering this question)

- 1) Very helpful
- 2) Somewhat helpful
- 3) Neither helpful nor unhelpful
- 4) Not very helpful
- 5) Not at all helpful

138. Would you like to participate in programs fostering self-sufficiency in the future?

- 1) Yes ⇒ Go to question 139.
- 2) No ⇒ Go to question 140.

139. If you would like to participate in a self-sufficiency fostering program in the future, which program would you like to participate in the most? (Please select one from the examples in question 137) _____

140. If you would not like to participate in a program fostering self-sufficiency, what is the reason for not wanting to participate?

- 1) It seems it would be better to continue with my current work
- 2) Inability to work due to old age, disability, or illness
- 3) I have family members to look after (child, elderly, someone suffering from an illness)
- 4) Currently a student or in the middle of undergoing job training
- 5) It doesn't seem like it will be financially helpful
- 6) The work done by self-sufficiency fostering programs don't seem very promising
- 7) Other: _____

■ Community welfare

141. Is your household currently a recipient of medical care assistance?

- 1) Yes ⇒ Go to question 142.
- 2) No ⇒ Go to question 141-1.

141-1. Is your household currently receiving national healthcare insurance benefits?

- 1) Yes
- 2) No

142. Are you currently a recipient of basic livelihood security?

- 1) Yes ⇒ Go to question 142-1.
- 2) No ⇒ Go to question 147.

142-1. If you are a recipient how long have you been receiving the benefits? (If you received basic livelihood security benefits in the past please include that period as well)

Total _____ Years _____ Months

143. If you are currently a recipient of basic livelihood security, how is your livelihood benefit level?

- 1) More than sufficient ⇒ Go to question 144.
- 2) Sufficient ⇒ Go to question 144.
- 3) Appropriate ⇒ Go to question 144.
- 4) Insufficient ⇒ Go to question 143-1.
- 5) Very insufficient ⇒ Go to question 143-1.
- 0) I am not a recipient of basic livelihood security ⇒ Go to question 144.

143-1. If insufficient, how much do you feel is an appropriate amount?

Monthly average, _____ won

143-2. Why is it insufficient?

- 1) Food expenses
- 2) Medical expenses
- 3) Education expenses
- 4) Housing expenses
- 5) Debt
- 6) Other: _____

144. Aside from the livelihood benefits and medical benefits provided by basic livelihood security, what other benefits are you receiving? Please mark all benefits you are currently receiving.

- 1) Housing benefit (Residing in public rental housing, rental costs necessary for housing stability, repair costs provided)
- 2) Education benefits (Tuition and admissions fee waiver for middle school and high school students, cost of books, and free lunch provided)
- 3) Funeral benefits (Cash payment in case of the death of a household member)
- 4) Childbirth benefits (Cash payment in case of childbirth by a household member)
- 5) Waiver of utility bills (television subscription fee etc.)
- 6) Daily necessities
- 0) No other benefits are received

145. How do you feel about receiving basic livelihood security benefits?

- 1) I feel that it is a natural right
- 2) I am thankful to the government
- 3) I feel one can receive such benefits if necessary
- 4) I have not thought about it
- 5) I am embarrassed

146. Would you like to continue receiving basic livelihood security benefits?

- 1) Yes ⇒ Go to question 146-1.
- 2) No ⇒ Go to question 146-2.

146-1. If you would like to continue receiving benefits, what is the reason? (Please go to question 152 after answering this question)

- 1) Because of medical benefits
- 2) Because of permanent rental housing benefits
- 3) Because of childcare and education benefits
- 4) Unable to live without cost-of-living assistance
- 5) Because there is no possibility of my circumstances improving in the future
- 6) Other: _____

146-2. If you would not like to continue receiving benefits, what is the reason? (Please go to question 152 after answering this question)

- 1) Because I am embarrassed by it
- 2) Because it will have an adverse effect on my children (change)
- 3) Because it's not very helpful
- 4) Because I don't like the feeling of being controlled
- 5) Because my circumstances will improve in the future
- 6) Other: _____

147. Are you currently receiving any assistance from the government even though you are not a current beneficiary? Please mark all assistance you are receiving.

- 1) Medical assistance
- 2) Education and childcare assistance
- 3) Disability related assistance
- 4) Lone-parent household related assistance
- 5) Old-age pension
- 6) Child head of household assistance
- 7) Permanent rental housing
- 8) Daily necessities
- 0) No assistance received

148. If there is assistance you would like to receive from the government, please list the most necessary assistance.

- 1) Medical assistance
- 2) Education and childcare assistance
- 3) Various benefits (disability benefits, lone-parent household benefits, old-age pension etc.)
- 4) Permanent rental housing
- 5) Daily necessities
- 6) Other: _____
- 0) No other assistance necessary

149. If you are currently not a beneficiary, have you received assistance in the past?

- 1) Yes ⇒ Go to question 149-1.
- 2) No ⇒ Go to question 151.

149-1. If you have received assistance in the past, how long was the period during which you have received assistance? (If you have received basic livelihood security benefits in the past please include that period as well)

Total _____ Years _____ Months

150. If you were a beneficiary in the past but were no longer eligible (or chose to discontinue receiving assistance), what is the reason? (Please go to question 152 after answering this question)

- 1) Income exceeded eligibility requirements
- 2) Assets exceeded eligibility requirements
- 3) Eligibility requirements for person under obligation to support
- 4) Don't know
- 5) Other: _____

151. Please answer regarding your experience of applying for basic livelihood security benefits.

- 1) Applied but was ineligible
- 2) Applied but withdrew application
- 3) Didn't apply

152. If your household has received welfare service assistance from local public institutions or private organizations during the past year, please tell us about the type of services received (no more than two types), frequency of use, level of satisfaction etc.

Type of welfare service	Frequency of use	Level of satisfaction	Reason for dissatisfaction
1) Food related services (delivery of lunchboxes and side dishes, free lunch etc.)	1) Almost everyday	1) Very satisfied	1) The length of service is too short or the quantity of service is too small
2) Housekeeping assistance services (cleaning, grocery shopping, laundry, bath, errands etc.)	2) 1-2 times a week 3) 1-2 times a month	2) Satisfied 3) Neither satisfied nor dissatisfied	2) The service quality is poor

3) Housing services (repairs, wall papering etc.) 4) Nursing/medical house call services 5) Emergency bell service 6) Childcare service (nursery, kindergarten etc.) 7) Learning support (after school program, after school study room etc.) 8) Weekday care for the elderly and short and long term care 9) Counseling and treatment program 10) Ride services 11) Other 0) None	4) Less than once every few months	4) Dissatisfied 5) Very dissatisfied	3) The process for applying to receive assistance is too complicated 4) The staff or employees are disoblging 5) Other
1.			
2.			

153. Among the above listed types of welfare services, which service does your household need the most? (If the service is not listed, please specify the type of service.)

■ Social awareness

154. Please state how important you think each of the following are in becoming successful and advancing in society in this country.

Questions	Very important	Somewhat important	Not very important	Not at all important
1) Being born into a wealthy family and receiving financial and educational support from parents	1	2	3	4
2) Inheritance from parents	1	2	3	4
3) Receiving a good education	1	2	3	4
4) Having high ideals	1	2	3	4
5) One's innate abilities	1	2	3	4
6) Your own efforts	1	2	3	4
7) Ability to build good relationships (networks)	1	2	3	4
8) Good ideas for earning money	1	2	3	4
9) Place of origin	1	2	3	4
10) Being born a male	1	2	3	4
11) Being healthy	1	2	3	4
12) Using all means necessary to earn money and become successful (corruption, deceiving others, exploitation, corruption using one's position etc.)	1	2	3	4
13) Connections with people in high places (ex. Patrons)	1	2	3	4

14) Luck befitting the times	1	2	3	4
------------------------------	---	---	---	---

155. What do you think “poverty” is?

156. What were some issues that made you feel hurt and heartbroken due to financial difficulties and poverty?

157. If there was a decisive turning point which led to your poverty what was it?

158. Do you think you can overcome poverty in the future?

- 1) Strongly agree
- 2) Agree
- 3) Disagree
- 4) Strongly disagree
- 5) Don't know

■ Neighborhood environment and social assistance

159. Have you moved since the last interview?

- 1) Yes
- 2) No

160. Please select two reasons for moving to your current place of residence.

_____, _____

- 1) Because it's close to my place of work or close to the workplace of another family member
- 2) Because the rent/ lease was cheap
- 3) Bought an apartment or a house
- 4) Was allotted a permanent rental apartment
- 5) Because there are high quality medical and social welfare facilities
- 6) Convenient transportation/ shopping facilities
- 7) Favorable residential environment
- 8) Because of friends or relatives

- 9) Positive conditions for education
- 10) Because it is my hometown
- 11) Safe from crime and calamities
- 12) There was no other choice

161. What do you think the residents of other areas think about your neighborhood?

- 1) Very favorably
- 2) Favorably
- 3) Neither favorably nor unfavorably
- 4) Unfavorably
- 5) Very unfavorably

162. What do you think about the neighborhood you are currently living in?

- 1) I will live here my entire life
- 2) I would like to continue to live here
- 3) I have not thought about it
- 4) I would like to move to a different neighborhood if possible
- 5) I am going to move to a different neighborhood at all cost

163. What are some problems you are experiencing in regards to your residential environment?

- 1) Improvements and repairs are necessary
- 2) Noise and foul odor
- 3) Lack of sunlight
- 4) Insufficient amenities
- 5) Inconvenient transportation
- 6) Poor education conditions
- 7) Apprehensive about public safety
- 8) Insufficient medical facilities
- 0) No special problems

164. How many years ago was your place of residence built?

_____ years

165. How many rooms does your household use?

_____ rooms

166. Under which of the following categories does your kitchen belong?

- 1) Standalone, used exclusively
- 2) Standalone, shared
- 3) Traditional, used exclusively
- 4) Traditional, shared
- 5) None

167. Under which of the following categories does the bathroom used by your household belong?

- 1) Flush toilet, used exclusively
- 2) Flush toilet, shared
- 3) Traditional toilet, used exclusively
- 4) Traditional toilet, shared
- 5) Public bathroom

168. Under which of the following categories does the bathing facility of your household belong?

- 1) Hot water, used exclusively
- 2) Hot water, shared
- 3) No hot water, used exclusively
- 4) No hot water, shared
- 5) None

169. Is your household supplied with city gas?

- 1) Yes
- 2) No

170. How are the conditions of the houses and apartments in the neighborhood of your residence?

- 1) Very worn out
- 2) Worn out
- 3) Average
- 4) In good condition
- 5) In very good condition

171. How convenient is your neighborhood in using the following facilities?

Facility and services	Very convenient	Convenient	Neither convenient nor inconvenient	Inconvenient	Very inconvenient	Don't know
Childcare facility	1	2	3	4	5	6
Educational facility	1	2	3	4	5	6
Facility for the elderly	1	2	3	4	5	6
Sports facility	1	2	3	4	5	6
Cultural facility (movie theater, performance hall, art museum etc.)	1	2	3	4	5	6
Medical facility	1	2	3	4	5	6
Social welfare facility	1	2	3	4	5	6
Financial institution	1	2	3	4	5	6
Shopping amenities	1	2	3	4	5	6
Eup/myeon/dong office	1	2	3	4	5	6
Parking facilities	1	2	3	4	5	6

172. How convenient is it to use the following modes of transportation when travelling from your current area of residence to a different area?

Mode of transportation	Very convenient	Convenient	Neither convenient nor inconvenient	Inconvenient	Very inconvenient	No service
Town bus	1	2	3	4	5	6
Bus	1	2	3	4	5	6
Subway	1	2	3	4	5	6
Taxi	1	2	3	4	5	6

173. When you are travelling from your place of residence to another area, what mode of transportation do you most often use?

- 1) Walk
- 2) Town bus
- 3) Bus
- 4) Subway
- 5) Taxi
- 6) Car
- 7) Motorcycle
- 8) Bicycle

174. Does your household own a car?

- 1) Yes
- 2) No

175. How often do you think various incidents and accidents occur in this area?

Type of crime	Very often	Often	Average	Not often	Almost never	Don't know
Minor arguments	1	2	3	4	5	6
Violence (including sexual violence)	1	2	3	4	5	6
Minor theft	1	2	3	4	5	6
Robbery	1	2	3	4	5	6
Murder	1	2	3	4	5	6
Juvenile delinquency	1	2	3	4	5	6

176. How far of a walking distance are police stations such as police substations and patrol divisions from your place of residence?

_____ Minutes

177. What is the state of environmental problems in your current area of residence due to noise/dust/exhaust fumes etc.?

- 1) Very serious
- 2) Somewhat serious
- 3) Average
- 4) Not serious
- 5) Not at all serious

178. How satisfied are you with the overall living conditions of your current area of residence including the environment, transportation, education, culture, and basic amenities?

- 1) Very satisfied
- 2) Somewhat satisfied
- 3) Neither satisfied nor unsatisfied
- 4) Somewhat unsatisfied
- 5) Very unsatisfied

179. Do the people living in your neighborhood share a similar standard of living?

- 1) Strongly agree
- 2) Somewhat agree
- 3) Disagree
- 4) Strongly disagree

180. Please mark the applicable answer to the following questions.

Questions	Strongly agree	Agree	Somewhat disagree	Strongly disagree	Don't know
1) My neighbors are helpful to each other	1	2	3	4	5
2) My neighbors have a close relationship with each other	1	2	3	4	5
3) I can trust my neighbors	1	2	3	4	5
4) My neighbors don't get along very well	1	2	3	4	5
5) When I am sick, my neighbors can get the groceries for me	1	2	3	4	5
6) If a conflict arises or a fight breaks out around their homes my neighbors try to mediate or break up the fight	1	2	3	4	5

181. In your neighborhood, are there gatherings of local residents such as the following? Please mark the applicable answer.

Type of gathering	Yes, there is such a gathering and I am participating in it	Yes, there is such a gathering but I am not participating in it	No	Don't know
Gye group	1	2	3	4
Residents' association	1	2	3	4
Neighborhood association	1	2	3	4

Women's association/ Youth association	1	2	3	4
Religious group	1	2	3	4
Club*	1	2	3	4
Other _____	1	2	3	4

*Ex: Soccer club, Go club, alpine club, etc.

182. Do you have a religion?

- 1) Yes ⇒ Go to question 182-1.
- 2) No ⇒ Go to question 183.

182-1. If you have a religion, what is your religion?

- 1) Buddhist
- 2) Protestant
- 3) Catholic
- 4) Cheondogyo
- 5) Daesoonjinrihoe
- 6) Other: _____

182-2. How often do you participate in religious activities?

- 1) Almost everyday
- 2) 1-2 times a week
- 3) 1-2 times a month
- 4) 1-2 times every few months
- 5) Less than 1-2 times a year

182-3. What is your reason for believing in a religion?

- 1) To have a peace of mind
- 2) To meet people
- 3) To receive material support
- 4) Because it is helpful for guiding and educating children
- 5) Because they take care of important events such as funerals
- 6) To go to a good place after death
- 7) Other: _____

183. Are you using the following media in your household?

1) Television	1. We watch television	2. We do not watch television
2) Cable television	1. We watch cable television	2. We do not watch cable television
3) Newspaper subscription	1. We subscribe to a newspaper	2. We do not subscribe to a newspaper
4) Internet	1. We use the internet	2. We do not use the internet
5) Radio	1. We listen to the radio	2. We do not listen to the radio

184. Which of the above listed media do you use the most often?
- 1) Television
 - 2) Cable television
 - 3) Newspaper
 - 4) Internet
 - 5) Radio
185. What is the main reason for using the above media?
- 1) General information (politics, society, culture in general)
 - 2) Information about living (employment, shopping, information regarding life in general)
 - 3) Entertainment
 - 4) Out of habit
 - 5) Other: _____
186. How often do you use the internet?
- 1) Almost everyday
 - 2) 1-2 times a week
 - 3) 1-2 times a month
 - 4) Don't use the internet ⇒ Go to question 189.
 - 5) Don't know how to use the internet ⇒ Go to question 189.
187. If you are using the internet, where do you mostly use the internet?
- 1) Home
 - 2) Work
 - 3) Social welfare center
 - 4) Community hall or eup/meyon/dong office
 - 5) Post office or bank
 - 6) PC room
 - 7) Other: _____
188. If you are using the internet, for what purpose do you mostly use the internet?
- 1) Chatting
 - 2) Computer games
 - 3) Internet newspaper
 - 4) Employment, business start-up information
 - 5) Email
 - 6) Internet banking
 - 7) Children's education
 - 8) Other: _____

	<ul style="list-style-type: none">7. Disqualified (eligibility requirements)8. Disqualified (income requirements)9. Non-applicant10. General low-income bracket
--	--