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## 1 Introduction

Compared with health objective indicators provided by the mortality study, the perception of health, obtained from individual impressions, provides an essential element for the measurement of health. The perception of each individual reflects the contribution of different factors, social, environmental and lifestyles that go well beyond the health system.

The framework of health strategies that are carried out in our country, whose objective is to improve the population's health, requires this type of subjective information as another essential element for the planning and adoption of public health measures.

The National Health Survey 2003 (NHS) is an investigation on the state of health and determinant factors of same from a citizens' perspective; in other words, it offers the vision that people have of their state of health and primary and specialised health care. Therefore, it also facilitates completing the health information system by contributing data from people who do not make use of the health services. It provides information on aspects such as perceived morbidity, life habits, behaviour related to risk factors, the use of health services and preventive practices.

The NHS is a statistical operation included in the National Statistical Plan promoted by the Ministry of Health and Consumption until the year 2001. By virtue of the Framework collaboration agreement between the Ministry of Health and Consumption and the National Statistical Institute for the realisation of this survey, signed on the 11<sup>th</sup> of March 2002, the INE will subsequently be responsible for the execution of the technical project, the sample design, the preparation of the questionnaires, interviewer training, collection of data and computerised treatment until the final survey files are obtained. The NHS has a biannual periodicity.

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## 2 Objectives

The National Health Survey 2003 has the general objective of providing the necessary information on the health of the population in order to be able to plan and evaluate health action and provide the appropriate care to health service users.

### Specific objectives

1. To provide information on the evaluation of the general state of health and to identify the main problems that citizens feel (chronic diseases, ailments, activity limitations, assistance, accidents).
2. To ascertain the degree of use of the health services and their characteristics.
3. To ascertain the use of certain preventive practices.

4. To ascertain the frequency and distribution of life habits that are a risk for health.

5. To relate the previous information with the socio-demographic characteristics of the population.

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### **3 Fundamental characteristics object of study**

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#### **3.1 MORBIDITY PERCEIVED BY THE POPULATION**

– General state of health, chronic diseases, ailments, discomforts, limitations as they are lived and expressed by citizens. This involves measuring the incidence of each one of these shortcomings or health limitations and their repercussion on people's lives.

– Similarly, it involves measuring the repercussion and importance of any type of accident suffered by the population surveyed: where it occurred, effects produced and the type of medical consultation caused.

– With respect to the physical characteristics of the population, measuring their degree of sensory function is sought, specifically sight and hearing, as well as other physical characteristics such as weight, size and the relationship between the two.

– Finally, buccodental conditions are investigated.

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#### **3.2 CHARACTERISTICS AND CONDITIONS OF USE OF HEALTH SERVICES**

– Medical consultation, with the details of place, reason, speciality, distance or journey, waiting time and type of care received.

– Hospitalisations detailing frequency, duration, type of care or treatment, form of admission, paying institution and where necessary, waiting list.

– Use of emergency services with detail of type and frequency.

– Vaccination against flu with specification of the motivating agent.

Consulting habits and gynaecological care in women over 16.

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#### **3.3 LIFE HABITS**

– Consumption of alcoholic beverages detailing frequency, quantity consumed by type of beverage (persons 16 and over).

- Consumption of tobacco detailing the frequency, modality of consumption, quantity and history of tobacco consumption habit (persons 16 and over).

- Daily hours of sleep.
- Physical activity required by the main activity and the one carried out in free time.
- Nutrition habits.

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#### 3.4 SPECIFIC CHARACTERISTICS OF THE CHILD POPULATION

- Type of breast-feeding in the first weeks and months of life.
- Knowledge of determined vaccines.
- Time employed watching TV.

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### 4 Phases of the survey

Once the components of the health concept that will be investigated have been ascertained, which is the starting point of the investigation, and having established the criteria of which variables are of interest to study, it has been planned to carry out the study in two phases, the first phase being identified with the Household Questionnaire and the second with the Adults Questionnaire (persons 16 years old and over) and the Minors Questionnaire (persons from 0 to 15 years old).

#### First phase

In the first phase it is sought to capture all persons resident in the household, requesting information from all members on certain socio-demographic variables. They are also asked on who deals with childcare and housework.

#### Second phase

In the second phase information is collected from only one person 16 and over, selected randomly from within the household through the Adults Questionnaire, and from only one minor (persons from 0 to 15 years old) of each household, should they exist, selected randomly from within the household through the Minors Questionnaire. A battery of questions referring to the subjects object of the study are passed on to these persons: Measure of the use of health and social services, self evaluation of the state of health, anthropometric characteristics, temporal limitations of daily activities, life habits, accidents, prevalence of chronic diseases, preventive practices and nutrition habits.

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## 5 Survey's scope

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### 5.1 POPULATION SCOPE

The investigation is directed at the set of persons who reside in main family dwellings. When one same dwelling is made up of two or more households, the study extends to all of them, but independently for each household.

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### 5.2 GEOGRAPHICAL SCOPE

The survey is carried out for the totality of national territory.

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### 5.3 TEMPORAL SCOPE

The period for the information collection covers the second, third and fourth quarter of 2003 and the first of 2004. The temporal scope corresponds to each quarterly cycle as of the second quarter of 2003.

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## 6 Sample design

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### 6.1 TYPE OF SAMPLE

The type of sample used is a stratified multi stage sample.

The first stage units are the census sections. The second stage units are main family dwellings. Within these no sub-sampling is carried out, all dwellings that are their usual residence are investigated. Within each household an adult (16 years old or over) is selected to complete the adults questionnaire and if there are minors (0 to 15 years old), one of these is selected as well to complete the minors questionnaire.

The framework used for the selection of the sample is a framework of areas made up of the list of census sections used in the municipal inhabitants register for 2002. For second stage units the list of main family dwellings has been used in each one of the sections selected for the sample.

The first stage units are grouped into **strata** in agreement with the size of the municipality to which the section belongs.

The following strata are considered:

**Stratum 0:** Municipalities with less than 500,000 inhabitants.

**Stratum 1:** Municipality province capital (except the previous ones).

**Stratum 2:** Municipalities with more than 100,000 inhabitants (except the previous ones).

**Stratum 3:** Municipalities from 50,000 to 100,000 inhabitants (except the previous ones).

**Stratum 4:** Municipalities from 20,000 to 50,000 inhabitants (except the previous ones).

**Stratum 5:** Municipalities with 10,000 to 20,000 inhabitants.

**Stratum 6:** Municipalities with less than 10,000 inhabitants.

For each autonomous community a sample independent from that represented is designed due to one of the survey objectives being to facilitate data with this level of breakdown.

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## 6.2 SAMPLE SIZE. FIXATION

To meet the survey objectives of being able to facilitate estimates with a certain degree of reliability on a national and autonomous community level, a sample of approximately 22,000 dwellings has been selected distributed over 1,844 census sections.

The sample is distributed among autonomous communities assigning one part uniformly and another proportional to the size of the community.

The number of dwellings selected in each census section is 12.

The distribution of the sample sections by Autonomous Community is:

**Table I. Distribution of the sample by autonomous communities**

<b>Autonomous Community</b>	<b>Number of census sections</b>
Andalucía	168
Aragón	124
Asturias (Principado de )	64
Baleares (Islas)	60
Canarias	76
Cantabria	56
Castilla y León	368
Castilla-La Mancha	76
Cataluña	152
Comunidad Valenciana	116
Extremadura	64
Galicia	96
Madrid (Comunidad de )	132

Murcia (Región de )	68
Navarra (Comunidad Foral de)	56
País Vasco	84
Rioja (La)	48
Ceuta y Melilla (Ciudades Aut.)	36
<b>Total</b>	<b>1,844</b>

### 6.3 SAMPLE SELECTION

The sections are selected within each stratum with probability proportional to their size. The dwellings are selected in each section with equal probability by means of a systematic sample with random start. This procedure leads to autoweighted samples in each stratum.

In order to determine the selection of the person who should complete the adults questionnaire and the person under 16 years old (should there be minors in the dwelling) who should complete the minors questionnaire a random procedure is used which assigns equal probability to all adults (in the first case) and to all minors (in the second case).

### 6.4 DISTRIBUTION OVER TIME

The sample has been distributed uniformly over the four quarters that make up the temporal scope of the survey. Within each quarter it has also been attempted to distribute the sample by reference week to make things as homogeneous as possible.

**TABLE II. DISTRIBUTION OF THE TOTAL SAMPLE SECTIONS BY WEEKS**

Weeks	01	02	03	04	05	06	07	08	09	10	11	12	13	Total
<b>Quarters</b>														
2nd / 2003	37	36	33	37	38	36	34	35	32	36	35	36	36	461
3rd / 2003	40	36	34	38	35	36	36	34	33	34	35	34	36	461
4th / 2003	34	35	38	34	36	35	36	35	37	35	36	35	35	461
1st / 2004	33	37	36	35	36	35	37	37	34	35	36	36	34	461

### 6.5 ESTIMATORS

To estimate all the population characteristics ratio estimators have been used for those that apply reweighting techniques taking age groups and the sex of the autonomous community population as auxiliary variables.

For this the following steps have been followed:

## A. Estimates from households and all people:

### 1.- Obtaining the estimator based on design.

$$\hat{Y}_d = \sum_h \sum_{i,j \in h} \frac{1}{K_h \cdot \frac{12}{V_h^{(02)}}} \cdot y_{hij} = \sum_h \sum_{i,j \in h} \frac{V_h^{(02)}}{v_h^t} \cdot y_{hij}$$

where:

h: Stratum

i: Section

j: Household

$K_h$ : Number of sample sections in stratum h

$V_h^{(02)}$ : Number of dwellings from stratum h according to 2002 framework

Y: Objective variable

$v_h^t$ : number of theoretical dwellings from stratum h. It is clear that:  $v_h^t = K_h * 12$ .

Therefore  $K_h \cdot \frac{12}{V_h^{(02)}}$  is the probability of selection of a dwelling from stratum h.

2.- **Correction of the lack of response.** This is corrected on a stratum level by multiplying the previous elevation factor  $\frac{V_h^{(02)}}{v_h^t}$  by the inverse of the probability of response, in other words

$$\hat{Y}_2 = \sum_h \sum_{i,j \in h} \frac{V_h^{(02)}}{v_h^t} \cdot \frac{v_h^t}{v_h^e} y_{hij} = \sum_h \sum_{i,j \in h} \frac{V_h^{(02)}}{v_h^e} \cdot y_{hij}$$

where  $v_h^e$  is the effective sample of persons in stratum h.

3.- **Ratio estimator**, using the population projection at the time of the survey as an auxiliary variable. Its main objective is to improve the estimator obtained in the previous steps by updating the population used when the sample is selected when the survey is carried out. Its expression is:

$$\hat{Y}_3 = \sum_h \frac{\sum_{i,j \in h} \frac{V_h^{(02)}}{v_h^e} \cdot y_{hij}}{\sum_{i,j \in h} \frac{V_h^{(02)}}{v_h^e} \cdot p_{hij}} \cdot P_h = \sum_h \sum_{i,j \in h} \frac{P_h}{p_h^e} \cdot y_{hij}$$

where  $P_h$  is the population projection for halfway through the survey period (1 October 2003) for stratum  $h$ .

The previous factor is denoted by  $F_j^{(1)}$ :

$$F_j^{(1)} = \frac{P_h}{p_h^e}$$

where  $j$  is a household from stratum  $h$ .

4. Finally the previous factor is reweighted to adjust the estimated population distribution by autonomous community and age groups and sex provided by the demographic projections unit. This calibration has been carried out by means of the CALMAR framework of the French National Statistics and Economic Studies Institute (INSEE). The adjustment was: 14 age and sex groups that were: 0-15, 16-24, 25-34, 45-54, 65 and over for men and women; and households by size: 1, 2, 3, 4 or more members.

After applying the previous steps, a final elevation factor is obtained  $F_j^{(2)}$  for each one of the households from the effective sample.

Therefore the total estimator  $\hat{Y}$  of a characteristic  $Y$  takes the following form:

$$\hat{Y} = \sum F_j^{(2)} y_j$$

where the sum is extended to all sample households,  $y_j$  is the value of characteristic  $Y$  observed in household  $j$ , and  $F_j^{(2)}$  is the final elevation factor for said household.

The estimators of proportions  $P = \frac{X}{Y}$  are of the form  $\hat{P} = \frac{\hat{X}}{\hat{Y}}$  where the estimates  $\hat{X}$  and  $\hat{Y}$  are obtained by means of the previous formula.

The previous household factor is also assigned to all its members for estimates of characteristics for all persons.

## B. Factor for adults and minors selected.

Apart from the estimates of household characteristics and all members, the characteristics of adults and minors selected who have filled in the individual questionnaire have to be considered.

1.- **Estimators based on design:** Starting with the previous household  $F_j^{(1)}$  factor, we have:

Adult factor by selecting household j:  $F_{jk}^{(3A)} = F_j^{(1)} \frac{1}{A_j}$ , where jk represents the person (adult) k from household j who should fill in the individual adults questionnaire and where  $A_j$  is the number of adults from household j.

Minor factor selected from household j (if there are minors in said household):

$F_{jk}^{(3M)} = F_j^{(1)} \frac{1}{M_j}$ , where jk now represents the person (minor) k from household j

who should fill in an individual minors questionnaire and  $M_j$  is the number of minors from household j.

2.- **Correction of the lack of response.** Due to the lack of partial response from individual questionnaires there are adults and minors who, although they should fill in the corresponding individual questionnaires, do not do so because they have to correct the previous factors, as shown below:

In the case of the adults:

$$F_{jk}^{(4A)} = F_{jk}^{(3A)} \frac{\sum_{lm \in CIAT_G} F_{lm}^{(3A)}}{\sum_{lm \in CIAE_G} F_{lm}^{(3A)}}$$

where k is the adult from household j who fills in an adult questionnaire  $CIAT_G$  is a set of theoretical individual questionnaires and  $CIAE_G$  is the set of effective individual questionnaires from the same group G. The subindex lm represents the adult m from household l.

In the case of minors:

$$F_{jk}^{(4M)} = F_{jk}^{(3M)} \frac{\sum_{lm \in CIMT_G} F_{lm}^{(3M)}}{\sum_{lm \in CIME_G} F_{lm}^{(3M)}}$$

where k is the minor from household j who fills in an adult questionnaire  $CIMT_G$  is a set of theoretical individual questionnaires and  $CIME_G$  is the set of effective individual minors questionnaires from the same group G. The subindex lm represents the minor m from household l.

Groups G have been considered both in the case of adults as well as minors were by autonomous community and groups by sex and five year age intervals up to 65 and over.

3. Finally the previous individual factors have been reweighted by autonomous community, age groups and sex by using CALMAR again.

They have been adjusted to external sources (demographic projections) within each autonomous community by age groups and sex:

Men and women 0-15, 16-24, 25-34, 35-44, 45-54, 55-64, 65 and over.

These factors are those used in the estimates of characteristics of individual questionnaires.

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## 6.6 SAMPLE ERRORS

For the estimate of sample errors the **Jackknife method** has been used which facilitates obtaining the estimate of the variance of the estimator of a characteristic X by means of the expression:

$$\hat{v}(\hat{Y}) = \sum_h \frac{A_h - 1}{A_h} \sum_{i \in h} (\hat{Y}_{(ih)} - \hat{Y})^2$$

where  $\hat{Y}_{(ih)}$  the estimate of characteristic Y obtained by taking away the group of sections i from stratum h and  $A_h$  are the random groups of sections made up in stratum h.

To obtain the estimator and for simplicity, instead of recalculating the elevation factors the stratum factors where the sections have been taken away are multiplied by the factor:  $\frac{n_h}{n_h - \#(lh)}$ .

In agreement with the above:

$$\hat{Y}_{(lh)} = \sum_{j \in h} F_j y_j + \sum_{\substack{j \in h \\ j \notin lh}} F_j \frac{n_h}{n_h - \#(lh)} y_j$$

where:

lh is a group of sections from stratum h

$n_h$  is the total sections from stratum h

$A_h$  are the groups of sections from stratum h

#(l) is the number of sections from group l

The relative sample error is published in the tables as a percentage, variation coefficient, whose expression is:

$$cv(\hat{X}) = \frac{\sqrt{\hat{V}(\hat{X})}}{\hat{X}}$$

The sample error facilitates obtaining the confidence interval within which, the real value of the estimated characteristic is found with a determined probability.

The sample theory determines that for the interval included between

$$\left( \hat{X} - 1,96\sqrt{\hat{V}(\hat{X})} , \hat{X} + 1,96\sqrt{\hat{V}(\hat{X})} \right)$$

there is 95% confidence of finding the real value of parameter .

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## 7 Collection of the information

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### 7.1 COLLECTION SYSTEM

The INEs Data Collection Unit will develop in the corresponding manuals, with the required detail, the full aspects of the information collection.

The information collection method used will be **personal interview**, which may be complemented, when necessary and in exceptional cases, with a telephone interview.

If the informant were unable to facilitate some data at the time of the interview, nor on the following visits to the household, or should some inconsistency or erroneous data be detected in its content, the omitted, erroneous or incomplete information can be completed by means of a telephone interview.

The interviewers will visit the dwellings to carry out the interviews and complete the questionnaires in accordance with the workload previously assigned to them. The necessary visits should be carried out at each dwelling in order to obtain the required information.

The visits will be distributed over one year and their size will be approximately 1844 sections including some 22,000 family units.

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## 7.2 BASIC UNITS

### Family dwelling

A family dwelling is considered to be any room or set of rooms and their outbuildings which occupy a building or a structurally separated part of the same and that, due to the manner in which they have been constructed, reconstructed or transformed, are destined to be inhabited by one or several households, and on the date of the interview are not used totally for other purposes. Included in this definition are:

- Fixed lodgings: areas which do not respond totally to the definition of family dwelling due to them being semi-permanent (huts or cabins), improvised with waste material such as cans and boxes (huts or shacks), or not having been conceived initially for residential purposes nor reformed to be used for these purposes (stables, barns, mills, garages, warehouses, caves, natural refuges), but which however constitute the main and normal residence of one or various households.
- Existing family dwellings within collective dwellings, as long as they are destined for management, administrative or service personnel from the group establishment.

### Household

The household is defined as a person or set of persons who occupy in common a main family dwelling or part of it and consume and/or share food and other goods through the same budget.

Included in this definition are private households that exist within collective dwellings, provided they have autonomy in spending with respect to the group household.

This survey is directed to all **residents in the household**, and it is considered that two sets of persons reside in the household:

- Members of the household
- Other persons residents in the household (resident employees and fixed guests)

In accordance with the household definition given above, to determine if one or more households reside in the dwelling, and in some cases to identify the members of the household, the criteria of cohabitation (habitually occupying the household) and common economy (consuming and sharing food and other goods with the same budget) must be used.

### **Members of the household**

The conditions which are established to determine whether or not a person is a member of the household tries to avoid the possibility that the same individual may be classified in more than one household or, conversely cannot be classified in any.

For the purposes of this Survey, all those persons who reside habitually (reside or consider residing the majority of the year) in the dwelling surveyed with the household and participate in the household budget are considered household members.

The persons who fulfil the two general requirements established to be a household member, habitual residence and participation in the common budget, are always household members.

Persons who fulfil the requirement of habitual residence, but who do not participate in the household budget, are not members of the household, given that, they either form part of another household within the same dwelling or are employed resident persons in the household or fixed guests.

Persons who fulfil the requirement of participating in the household budget, but who do not fulfil the habitual residence requirement, are members of the household if they reside in another family dwelling and they are considering returning to the household (as they consider it to be their main residence), or if they reside in a group establishment and consider returning to the household within a year. For example, students temporarily absent from the household who reside during the school period, in other words, the majority of the year, in another family dwelling, and who participate in the household budget, are members of this household.

In this same manner, persons who fulfil the requirement of participating in the household budget but do not fulfil the habitual residence requirement, are not household members if they reside in one group establishment and they do not consider returning to the household at least within a year. For example, elderly people resident in a nursing home who depend on the household budget but do not consider returning to the same, at least within a year.

– The persons who do not fulfil either of the two general requirements are not members of the household.

– As a special case, those persons who reside in various households, but in none of them the majority of the year, are considered members of the household in which they are residing at the moment of the survey (for example, elderly people who alternate their residence), living with different children and other relations during the year).

### **Other persons resident in the household**

Included under this denomination are the employees resident in the household and the fixed guests.

- If the persons employed or guest resides habitually or considers residing in the household the majority of the year, they are considered an employee resident in the household or a fixed guest.
- If the employee or guest does not reside habitually nor considered residing in the household the majority of the time, the person must not be taken into consideration as part of the household for the purposes of this Survey.

***Employed persons resident in the household***

A person employed in the household is considered to be any person who without being considered a household member provides domestic or health services to the household in exchange for previously stipulated remuneration in cash or in kind (such as chauffeurs, maids, nannies, household assistants, care givers...).

***Fixed guest***

A guest is considered to be any person who, without being considered a household member, shares food with the same and/or lives in the dwelling contributing to the household a previously stipulated monetary consideration, with their stay the household consequently seeking financial objectives.

With respect to guests two different situations must be distinguished:

- If a household as well as five or less guests live normally in the dwelling, each one of the guests is included.
- If a household and more than five guests live normally in the dwelling, these are not considered as persons belonging to the household being interviewed. Therefore the survey is not conducted for any of these guests.

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**7.3 THE BASIC DOCUMENTATION COLLECTED: THE QUESTIONNAIRES**

Questionnaires are the main elements in the collection of the information of the NHS, and constitute the basic instruments that the interviewer uses to carry out their missions.

The National Health Survey questionnaire includes a set of questions which must be formulated to all those interviewed in the same way, facilitating the collection of data necessary for the investigation and guaranteeing that the answers to the questions may be comparable.

**Household questionnaire**

The Household Questionnaire is a document designed with the intention of capturing the persons in the household in order to collect information on the socio-demographic characteristics of its members and of determined aspects relative to the surveyed household (economic situation, child care and domestic work), with the household therefore being the observation unit.

The method of information collection for this questionnaire will always be the **personal interview**, complemented when necessary by a telephone interview.

As a general norm, the informant of the household questionnaire must be the main breadwinner, except when there exist circumstances which prevents the carrying out of the interview with the said person for reasons of temporary absence, incapacity or illness, lack of knowledge of the language, ... . In these cases another household member may provide the information, said informant having to be selected in accordance with the following order of preference: spouse or partner, father or mother, brother or child (always bearing in mind the age of the subject) of the reference person, another family member or another household member not linked to the reference person through blood relationship. In the latter case the household member who has lived there for a greater period of time is to be chosen.

In this questionnaire information is requested on the type of household and the composition of same, as well as the regular monthly income level, extraordinary social services received by its members, child care and domestic work data.

Information is also collected from all the household residents (household members and other persons resident in the household) about age, sex, nationality, civil status, relationship to the main person and other basic issues like the level of studies completed; relation to the economic activity, professional situation, occupation, activity of the establishment; health coverage; limitations for daily life; assistance to carry them out.

Finally it permits the determination of which persons 16 years old and over reside in the household, in order to select the subject of the interview for the Adults Questionnaire and which persons 15 years old and under to select as the subject of the interview for the Minors Questionnaire.

### **Adults Questionnaire**

The Adults Questionnaire is a document designed with the intention of collecting information related to persons 16 years old and over about four basic objectives:

- To study the health and accident problems that can affect the population in a significant manner.
- Determine the use of health services.
- The implementation of preventative practices among the population.
- Identify the life habits that affect the populations general state of health, as well as the personal characteristics, and if the subject is 65 years old or over, provide information on their capacity to carry out determined daily living activities.

The Adults Questionnaire should be completed in all the households, interviewing only one person, selected randomly from among all the persons residing in the household.

The information collection method for this questionnaire will always be the personal interview, complimented when necessary, in exceptional cases, by means of a telephone interview. The ideal informant for this questionnaire is the subject of the interview, selected from among all the persons resident in the

household in accordance with the established rules. Should the person selected not be able to facilitate the interview data, be it due to problems of age, illness or repetitive absence, the questionnaire information will be requested from another person resident in the household that is sufficiently informed about the data requested of the subject to be interviewed and capacitated to do so.

### **Minors Questionnaire**

The Minors Questionnaire is a document designed to collect information relative to persons from 0 to 15 years old on three basic objectives:

- Study the health and accident problems that can affect the child population in a significant manner.
- Determine the social-health situation of children
- Identifying risk factors, which influence the general state of health of the population, comprised in those ages.

The Minors Questionnaire should be completed in all households where there are persons from 0 to 15 years old, interviewing only one of them selected randomly among the minors resident in the household.

The information collection method for this questionnaire will always be the personal interview, complimented when necessary, in exceptional cases, by means of a telephone interview. The ideal informant for this questionnaire is the subject of the interview, selected from among all the persons resident in the household in accordance with the established rules. Should the person selected not be able to facilitate the interview data, be it due to problems of age, illness or repetitive absence, the questionnaire information will be requested from another person resident in the household that is sufficiently informed about the data requested of the subject to be interviewed and capacitated to do so.

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## **8 Concepts and definitions**

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### **8.1 FUNDAMENTAL CHARACTERISTICS OBJECT OF THE STUDY**

- **State of health and accidents**

- General state of health**

- This characteristic attempts to measure the perception the person has of his or her own state of health.

- Five levels are distinguished in the self-evaluation of the state of health:

- Very good
    - Good
    - Regular

- Poor
- Very poor

### **Diseases or ailments**

It is about investigating the types of illnesses or ailments the population suffers from and which are chronic.

#### ***Types of illnesses and diseases***

- Arthrosis, rheumatism (including gout, back pain, lumbago), disc hernia
- Flu, colds, angina.
- Head aches
- Allergies
- Varicose veins
- Haemorrhoids
- Fractures, traumas, dislocations: ligaments, bones
- Eye diseases and illnesses
- Ear diseases and illnesses
- Heart and circulatory apparatus diseases and illnesses, including apoplexy, thrombosis, hypertension
- Respiratory apparatus diseases (which are not flu or colds), including tumours (lung, trachea, larynx, ... cancer), asthma and bronchitis.
- Digestive apparatus diseases: oesophagus, stomach and intestine, hernia, constipation, diarrhoea, appendicitis
- Digestive apparatus diseases: liver, gall bladder and pancreas including biliary colic, stones, hepatitis, and cirrhosis)
- Genito-urinary diseases: prostate, kidney, urinary calculus, urinary infections, cystitis, gynaecological and venereal infections. Breast cancer.
- Skin diseases: herpes, boils, fungi, infections, skin tumours. (If it is a skin allergy it is listed as an allergy)
- Neurological diseases: Parkinson, shakes
- Delivery, pregnancy, abortion and haemorrhages or delivery problems, pregnancy and abortion
- Metabolic and endocrinological diseases: Uric acid, diabetes (sugar), thyroids, cholesterol
- Psychological problems: depression, nerves, alcoholism, drugs

- Buccodental diseases
- Lymphatic ganglia and blood diseases: anaemia, leukaemia, lymphoma
- Others

**Definitions:**

*Disease:* an alteration that has a varying effect on health.

*Pain:* Symptom of a disease manifested as an uncomfortable sensory perception, generally localised, said to be suffered by the person who complains of it.

***Chronic diseases***

- Arterial hypertension
- High cholesterol
- Diabetes
- Asthma, chronic bronchitis or emphysema
- Heart diseases
- Stomach ulcer
- Allergy
- Depression
- Other mental disorders
- Migraines or headaches
- Poor circulation
- Hernias
- Arthrosis and rheumatic problems
- Osteoporosis
- Menopausal problems (except osteoporosis)
- Prostate problems.

**Definitions:**

*Chronic diagnosed disease:* It is considered that a disease is chronic when it is long lasting, it is not due to isolated acute processes and has been diagnosed by a doctor.

**Accidents**

It is about studying if the person has had an accident of any type, including an aggression, intoxication or burn, in the last twelve months.

Definitions:

*Accident:* An accident is defined as that fortuitous and unforeseen event that occurs to an individual and causes recognisable bodily harm.

*Aggression:* An aggression is defined as any act or incidence of physical violence to a person that is not accidental.

*Intoxication and poisoning:* Is an alteration to the state of health of a person produced by the ingestion of drugs and/or medicines (includes alcohol induced intoxication), ingestion of food products in a poor state, ingestion of corrosive products, caustic products, paints, varnishes and other toxic substances, irrespective of whether they are in solid, liquid or gaseous form, or ingestion of other toxic products: mushrooms and/or poisonous plants, ....

The following characteristics of accidents are investigated:

***Place where the last accident took place***

- At home, stairs, foyer, etc.
- In the street or road and was a traffic accident
- In the street, but was not a traffic accident
- In the place of work or study
- In another place

***Consequences of the last accident:***

- Consulted a doctor, nurse
- Went to an emergency room
- Admitted to a hospital
- No consultation or intervention was necessary

***Effect or damage caused by the last accident:***

- Contusions, haematomas, sprains-dislocations or superficial wounds
- Poisoning or intoxication
- Burns
- Other effects

## **Restriction of the activity**

The restriction of activity over the last two weeks, due to one or various pains or symptoms, is analysed, both in the main activity as well as in free time.

Definitions:

*Main activity:* Refers to the activity at work, domestic work, assisting school, or training centres, carried out by those interviewed. The limitation of the activity should be of at least of a half day.

*Activity in free time:* Refers to the activity usually carried out by the population in their free time, and which covers entertainment, games, strolls and other recreational activities, friends and family relationships, ...

*Symptom:* Any type of manifestation of a disease that affects a person.

*Pain:* Symptom of a disease manifested as an uncomfortable sensory perception, generally localised, said to be suffered by the person who complains of it.

### ***Type of pains or symptoms***

- Pains of the bones, vertebral column or joints
- Nerves, depression or difficulty in sleeping
- Throat, cough, cold or flu problems
- Head ache
- Contusion, lesion or wound
- Earaches, otitis
- Diarrhoea or intestinal problems
- Rashes, itching, allergies
- Urinary or kidney illnesses
- Stomach, digestive, liver or gall bladder problems
- Fever
- Tooth or gum problems
- Dizziness and dizzy spells
- Chest pains
- Swollen ankles
- Choking, difficulty in breathing
- Tired without apparent reason
- Other pains or symptoms

## ***Number of days in bed for health reasons***

### **Consumption of drugs**

This section investigates if the person has consumed medications and if a doctor prescribed them at some time.

Drugs investigated are the following:

- Medicine for colds, flu, throat infection, bronchitis.
- Medicine for pain and/or to lower fever
- Vitalisers such as vitamins, minerals, tonics.
- Laxatives.
- Antibiotics.
- Tranquillisers, relaxants, sleeping pills.
- Drugs for allergies.
- Drugs for diarrhoea.
- Drugs for rheumatism
- Drugs for the heart
- Drugs for arterial blood pressure.
- Drugs for digestive disorders.
- Anti depressives, stimulants.
- Contraceptive pills.
- Hormone replacement drugs.
- Slimming drugs.
- Drugs to lower cholesterol levels.
- Drugs for diabetes.
- Other.

Questions are asked about the consumption of homeopathic and natural medications.

Definitions:

***Medication:*** All medicinal substance and its associations or combinations destined for their use on persons, which are presented as having properties to prevent, diagnose, treat, relieve or heal diseases or ailments, or which affect body functions or mental state.

Only considered medications are pharmaceutical specialities, magisterial formulas, official preparations or formulas and pre-manufactured medication. Excluded are personal hygiene products, bandages and other dressings, food products, cosmetics, candy, gum, ...

– *Medicinal substance*: All substance, regardless of origin, human, animal, vegetable, chemical or of another type, which can be attributed an appropriate activity so as to constitute a medication.

– *Pharmaceutical specialities*: The composition drug and information defined in a pharmaceutical manner and with determined dosages, prepared for their immediate medicinal use, available and conditioned for public use with a uniform denomination, storage and labels to which the State Administration grants health authorisation and registers in the pharmaceutical speciality Register.

– *Magisterial formula*: A medicinal product destined for an individual patient, prepared by a pharmacist, or under orders, to expressly comply with a detailed doctor's prescription of the medicinal substances that are included according to the technical and scientific regulations of the pharmaceutical art, dispensed in their pharmacy or pharmaceutical department and with the user being duly informed pursuant to the terms set out in article 35.4.

– *Official preparation or formula*: The medication elaborated and guaranteed by a pharmacist or under their orders, dispensed in their pharmacy or pharmaceutical department, listed and described by the national formulary, for direct admission to patients who are supplied by said pharmacy or pharmaceutical department.

– *Pre manufactured medication*: The medication that does not adjust to the definition of pharmaceutical speciality and which is commercialised in a pharmaceutical manner that may be used without the need for industrial treatment and which the State Administration grants health authorisation for and registers in the corresponding Register.

– *Personal hygiene product*: A product which applied directly on healthy skin or mucus has the objective of combating the growth of micro-organisms as well as foreseeing or eliminating ectoparasites from the human body or eliminating the health risks from the use of a therapeutic prostheses applied to the human body.

*Homeopathic treatment*: This is a therapeutic method based on administrative dosages of drugs to activate our defences and slowly improve or cure diseases.

In the state of Spain, like in the remaining European Union countries, homeopathic products are medically regulated by the Ministry of Health and Consumption: (Royal Decree 2.208/94, dated the 16<sup>th</sup> of November 1994 published in the Official State Bulletin of the 28<sup>th</sup> of November 1994).

Homeopathic drugs, like any other drug are prescribed by doctors and dispensed by pharmacists.

*Natural treatment*: This is based on administering medications based on plants, in other words whose medicinal substance is vegetal.

## • Use of health services

This section covers information on the type of health services that have been received: medical consultations, hospitalisations and use of emergency services. These services will be classified by the place of consultation, type of centre, medical specialities, functional dependence of health personnel and waiting times. Similarly, the need for medical care will be investigated which will be classified according to the main cause for this not being received.

It also covers information on the state of dentures and the frequency of visits to the dentist classified by type of care and functional dependence of the professional who cared for you.

### **Medical consultations**

This involves investigating the frequency of doctors visits, place of consultation, functional dependence of doctor, speciality, reason for consultation, waiting time and total time elapsed.

Definitions:

*Medical consultation:* It is understood to include any action which involves a consultation to a qualified professional doctor, in person or via the telephone, for an examination, diagnosis, treatment, follow-up, advice or any other action. It excludes any consultation to a dentist, given that they are the objects of a separate investigation.

Not considered a medical consultation: simple prior contact to set the appointment, collective medical examinations (labour, school, ...), visits that are exclusively motivated by the realisation of diagnosis tests or therapeutic procedures indicated by a health professional, nor contact with pharmacists and opticians for the acquisition of medical prescriptions.

The following characteristics of the consultations carried out are investigated:

#### ***The last time they consulted a doctor***

- In the last two weeks
- More of two weeks ago and less than a month
- A month or more and less than a year
- A year or more
- Never visited the doctor

#### ***Place of the last consultation, carried out within the last 2 weeks***

- Health Centre/Surgery
- Outpatient Centre/Specialists centre
- Outpatient hospital visit

- Emergency service of an outpatient centre
- Emergency service of a hospital
- Private doctor surgery
- Private health insurance doctor surgery
- Company or place of work (16 years old and over)
- School, college, institute (under 16 years old)
- Residence of the subject being interviewed
- Telephone consultation
- Another place

Definitions:

*Health centre/Consultancy:* Centres in which primary care is provided to social security beneficiaries. Care is provided by general practitioners, paediatricians and nursing personnel. Moreover, there exists a series of support services: family planning units, mental health, physiotherapy, buccodental health, in which other professionals are integrated (gynaecologists, odontologists, psychiatrists, psychologists and pharmacists) who manage problems related to their specific training.

*Outpatient Centre/Specialists centre:* *Centres that provide specialised care to Social Security beneficiaries. In its outpatient care modality it covers all the legally recognised medical and surgical specialities. Patient access to the outpatient centre generally occurs by referral from the primary care physician.*

*Outpatient hospital visit:* Consultations made in the hospital itself for those patients who need diagnostic measures, treatments and/or rehabilitation that cannot be provided at the primary care level, including carrying out minor surgical measures. They do not require admission into hospital but are carried out in outpatients.

*Emergency service of an outpatient centre:* A service offered in an outpatient centre with professionals to provide emergency care outside of the normal timetable.

*Hospital emergency services:* Hospital service, understood to be a service that counts with a group of professionals who provide emergency care for 24 hours a day.

*Primary care:*

Generally primary care includes:

Health care in health services and centres.

Health care at the patient's home.

The indication or prescription, and possible provision of primary care, tests and basic diagnostic methods by the physician.

The activities programmed by health services on health education subjects, vaccinations, health examinations, activities or methods programmed for the prevention of diseases, promotion or rehabilitation.

The administration of parenteral treatments and cures, and minor surgery.

Other care, provisions and services that are highlighted or specified below:

***Reason for consultation***

- Diagnosis and/or treatment: When the reason for consultation is a health problem that requires a medical examination for its diagnosis and treatment.
- Revision: When the reason for the consultation is continued controls and follow up of diseases or processes already diagnosed and in treatment.
- Dispensing prescriptions: When the reason for the consultation is exclusively to request a pharmaceutical prescription.
- Absence: Obtaining leave for disease, confirmation or obtaining a discharge.
- Other (Obtaining reports, certificates or other documents).

***Doctor speciality***

- General medicine
- Allergology
- Digestive system
- Cardiology
- General and digestive surgery
- Cardiovascular surgery
- Vascular surgery
- Dermatology
- Endocrinology and nutrition
- Geriatrics
- Obstetrics-gynaecology
- Internist
- Nephrology
- Pneumology
- Neurosurgery

- Neurology
- Ophthalmology
- Oncology
- Ear, nose and throat
- Psychiatry
- Rehabilitation
- Rheumatology
- Traumatology
- Urology
- Another speciality

***Functional dependency on the doctor***

Defined by the care and protection system in which the care work is carried out.

- Social security
- Medical company:
- Private consultation
- Locum, company doctor...

Definitions:

*Social Security:* A doctor is considered a Social Security doctor when he/she is dependent on the National Health System, which comprises INSALUD, the Autonomous Communities health services and those of the rest of public institutions such as local delegations, town halls, corporations.

*Medical Company:* It includes companies offering private medical services (ASISA, ADESLAS, SANITAS, PREVIASA, ...)

*Private consultation:* These are consultations made to private professionals.

*Private doctor:* The doctor who receives remuneration when freely exercising their profession.

*Medical contract, company doctor, professional illness and work private insurance companies, traffic accident insurance companies, NGOs.)*

**Need for medical assistance**

This is about measuring whether the person has needed medical assistance and not obtained it during the last twelve months. The main reason for not having obtained the care is investigated.

**Main cause for not seeking medical care**

- Could not get an appointment
- Could not leave work
- It was too expensive/did not have money
- No means of transport
- Was too nervous and scared
- Not covered by insurance
- Did not have insurance
- Had to wait too long
- Another cause

### **Hospitalisations**

This characteristic intends to study whether the patient has been hospitalised at least one night during the last twelve months, the frequency, reason for hospitalisation, type of hospitalisation, waiting list and service provider.

#### Definitions

##### *Hospitalisation:*

A hospitalisation is considered as all admissions into a hospital to receive medical-surgical or medical assistance in which there is an overnight stay or a bed assigned. Any stay under 24 hours in the emergency room services or in a department for diagnostic tests or therapeutic service is not considered a hospitalisation. Those persons who accompany the patient, even if they occupy a bed and are there more than one day, nor healthy new-borns who occupy a crib for more than one day, are also not considered hospitalisations.

*Hospital:* Health care facility with inpatient regime that, independently of its name, has as its main purpose the provision of surgical-medical or medical care to the patients admitted in it. Elderly persons homes, orphanages, day-care centres, boarding houses, etc. are not included.

#### **Reason for admission**

- Surgical intervention
- Medical study for diagnosis
- Medical treatment without surgical intervention
- Delivery (includes caesarean)
- Other reasons

### ***Form of admission***

- Emergency room admission
- Ordinary admission

Definitions:

*Emergency room admission:* All non-scheduled hospital admissions that, occur after being attended to by the emergency room services of a hospital and those others of an urgent nature that are admitted directly to the hospital.

*Ordinary admission:* All those hospital admissions programmed for a date, after medical prescription.

### ***Waiting list***

Number of months on the waiting list.

### ***Hospitalisation expenses covered by:***

- Social Security
- Mutual Insurance Society (MUFACE, ISFAS, ...)
- Private medical insurance
- Covered by self or by their own household
- Paid for by other persons, organisms or institutions

### **Emergency room services**

It is studied whether the person has used some emergency room service due to some problem or disease, frequency, location, type of service and reason.

Definitions:

*Emergency room service:* These are those services that deal with clinical processes, whatever their character, which require urgent diagnostic and therapeutic orientation. The assistance is rendered during afternoon or evening shift and holidays.

### ***Place where attended***

- In an emergency room service or centre
- Where they were found (residence, place of work, ...)
- In a mobile unit

### ***Type of emergency room service***

- Social Security Hospital
- Social Security non-hospital emergency room service

- Non-hospital Social Security centre (health centre, ...)
- Private emergency room service
- Health centre, private hospital or clinic
- Emergency centre or town council casualty department
- Other type of service

Definitions:

*Social Security Non-hospital emergency care centre:* Constituted emergency care service centre, all emergency care services that have a staff of professionals who supply emergency care are understood as such. These services are located in care centres dedicated to emergency care (continuous service points) and they work outside of usual primary care centre schedules.

Also includes the medical emergency co-ordination centres (061, 112,..) that operate 24 hours a day and have specialised health care equipment for urgent assistance at home or on the street.

*Social Security Non-hospital Centre: Primary Care Centres:* (Health centres, outpatients department,..) in which the primary care services care professionals take care of emergencies during the centres usual hours.

***Reason for attending emergency room services***

- Doctor's orders
- Because the person, their family members or other persons considered it necessary

**Visits to the dentist, stomatologist or the dental hygienist**

This deals with measuring the frequency with which the person visits the dentist, stomatologist or dental hygienist in the last three months, frequency, type of assistance, functional dependency on the dentist. The state of the persons teeth is also questioned.

Definitions:

Dentists visit: Any visit to a qualified professional, odontologist, stomatologist, dental or prosthesis hygienists, for advice, examination, revision, diagnosis or treatment of buccodental problems or afflictions.

***Frequency***

- More than 3 months ago and less than 1 year
- A year ago or more
- Never been

### ***Type of attendance***

- Revision or check-up
- Oral cleaning
- Fillings (plugs), endodontics
- Extraction of a tooth/molar
- Jackets, bridges or other types of prosthesis
- Treatment of gum diseases
- Orthodontia
- Fluoride application
- Other types of assistance

Definitions:

*Filling:* Consists of filling in a tooth or molar affected by a cavity with paste.

*Endodontics:* Is considered as the therapeutic techniques for dental nerve conditions.

*Treatment of gum diseases:* Is considered as the treatment of bleeding gums, teeth that move or the secretion of puss (colloquially known as 'pyorrhoea') or any other gum disease.

*Orthodontics:* Placement of apparatus in the mouth to correct inadequate positions of the teeth or molars.

*Fluoride application:* Fluoride is solely understood as that applied by an odontologist or hygienist (does not refer to the fluoride contained in toothpaste).

### ***Functional dependence of the dentist, stomatologist or dental hygienist***

Includes the same assistance as defined for the doctor, as well as including the Town Halls, which is not included in the Social Security.

### ***State of teeth and molars:***

- Has cavities
- Has had teeth/molars extracted
- Has fillings in teeth/molars (plugs)
- Has bleeding gums from brushing or spontaneously
- Has teeth/molars that move
- Has jackets (crowns), bridges, other type of prosthesis or false dentures

- Teeth/molars missing that have not been replaced by prosthesis
- Possesses or conserves all their original teeth/molar

- **Life habits**

This section intends to investigate determined life habits that are considered of risk for health, such as tobacco and alcohol consumption and which are related to the morbidity rate indices. Nutritional habits and physical activity habits are also investigated.

**Consumption of tobacco**

This is about investigating the prevalence of tobacco consumption in persons 16 years old or over in the last 12 months, type of smoker (daily, non-daily or ex-smoker), type of tobacco, frequency of consumption, starting age and evolution of the consumption.

Definitions:

*Smoker:* Person who currently consumes cigarettes, cigars and/or pipes.

***Type of smoker***

There are two subcategories:

- Smokes daily.
- Smokes, but not daily.
- Doesn't smoke currently, but has smoked before.
- Doesn't smoke, and has never smoked habitually

***Type of tobacco***

- Cigarettes
- Cigars
- Pipe tobacco

***Age when consumption commenced***

***Evolution of consumption***

- More than two years ago
- Less than two years ago
- Same as two years ago
- How often do they smoke

(For persons who smoke daily)

Number of units a day of each type of tobacco.

(For persons who smoke, but not daily)

- Three or four times per week
- One or two times per week
- Less frequently

***Reasons for stopping smoking***

(For persons who do not smoke currently, but have smoked before)

- Advised by the doctor
- Felt discomfort caused by tobacco
- Their degree of preoccupation about the harmful effects of tobacco (health risks) increased
- Felt that their psychological and/or physical performance was decreasing, in general
- Decided it alone, of their own will
- Other reasons

***Time passed since stopping smoking***

(For persons who do not smoke currently, but have smoked before)

- Number of months and years.

***Consumption of alcoholic beverages***

This is about measuring the prevalence of alcohol consumption in persons 16 years old and over in the last 12 months. This will be classified by type of drinker, starting age and development of consumption.

***Age when consumption commenced***

***Frequency of consumption***

(for people who have consumed in the last year):

- Daily
- From 4 to 6 days a week
- From 2 to 3 days a week
- 1 day a week
- 1 day of every 2 weeks
- 1 day a month
- Less than 1 day a month

(for persons who have not consumed beverages with alcohol during the last 12 months but have consumed previously):

- Daily
- One or various times per week
- Less than once per week

***Types of alcoholic beverages***

- Glasses of wine or champagne
- Glasses of beer (with alcohol), cider
- Glasses of sherry, vermouth, or aperitif with alcohol
- Glasses of liquor (aniseed, cognac, rum, gin, sloe gin, ...)
- Glasses or cups of whisky
- Mixed drinks (rum and coke, gin tonic, ...)

***Amount of glasses or cups of alcohol***

(during the last weekend and the last work day)

- Number of glasses of wine, glasses of champagne
- Number of glasses of beer (with alcohol), cider
- Number of glasses of sherry, vermouth or aperitif with alcohol
- Number of glasses of liquor (aniseed, cognac, rum, gin, sloe gin, ...)
- Number of glasses or cups of whisky
- Number of mixed drinks (rum and coke, gin tonic, ...)

***Age at which they stopped consuming alcohol***

For persons who have not consumed beverages with alcohol during the last 12 months but have consumed previously.

**Rest**

Information is sought about the number of hours slept normally per day.

Definitions:

*Rest:* Total number of hours usually slept per day, independently of whether this occurs in one period or during various periods throughout the day, hence it is necessary to include the hours of the siesta in the event of sleeping same.

### ***Number of hours slept per day***

#### **Physical exercise**

This is about getting to know the normal amount of physical activity carried out. It is classified according to whether the activity is carried out during the main activity or in free time, by type of activity and frequency.

Definitions:

*Physical activity:* Is defined as any body movement produced by the skeletal muscles that results in the use of calories, which must possess certain characteristics of intensity, duration and frequency.

The intensity should at least be moderate, understanding as such that which increases breathing rate more than normal and includes for example, lifting light loads, riding a bicycle at a normal cadence, ...

#### ***Kind of physical activity***

(In the main activity at the place of work, study, household,...):

- Sitting for most of the work day
- Standing for most of the workday without major movements or efforts.
- Walking carrying some weight, carrying out frequent movements.
- Carrying out tasks that require great physical effort.

(In free time activities):

- Does not carry out any physical activity.
- Carries out some physical or sporting activity less than once per month.
- Carries out some physical or sporting activity one or various times per month but less than once per week.
- Carries out some physical or sporting activity one or various times per week.

#### **Food**

In this section the eating habits are investigated, studying the type of food normally consumed and frequency of consumption, taking special note of the food that form the usual breakfast.

### ***Frequency of consumption of the listed food***

Food	Frequency
– Fresh fruit	– Daily
– Meat	– Three or more times per week, but not daily
– Eggs	– One or two times per week
– Fish	– Less than once per week
– Pasta, rice and potatoes	– Never or almost never
– Bread, cereals	
– Vegetables	
– Vegetables	
– Cold meats and cold cuts	
– Dairy products	
– Sweets	

### ***Breakfast***

Definitions:

*Breakfast:* Is considered as that food ingested in the morning after waking up and before commencing the main activity

Those persons who carry out night jobs should consider as breakfast the food they ingest before their main meal.

### ***Type of breakfast***

- Coffee, milk, tea, chocolate, cacao, yoghurt, etc.
- Bread, toast, cookies, cereals, pastries, with or without butter, oil, ...
- Fruit, juice, ...
- Eggs, cheese, cold meats, bacon, sausages, ...
- Other types of food and/or beverages
- Nothing, does not usually eat breakfast

### **• Preventative practices**

#### **Flu vaccination campaign**

It is about getting to know the characteristics of the population that was vaccinated in the last campaign and it is classified by who prescribed the vaccine.

#### ***Prescription of flu vaccine and reason***

- The doctor, due to age
- The doctor, due to diseases
- The doctor, for other reasons

- The vaccination is offered at work or at the place of study
- Requested a vaccination because they prefer to be vaccinated
- Other reasons

#### **Female preventative care**

Information about visits to the gynaecologist is obtained. These are classified according to frequency, the reason and the type of preventative tests that have been carried out (mammography, cytologies).

#### ***Last visit to the gynaecologist for a reason other than pregnancy or birth***

- Less than 6 months ago
- Between 6 months and 1 year
- Between 1 and 3 years
- More than 3 years ago
- Has never gone for reasons other than pregnancy or birth

#### ***Reason for consultation***

- Some gynaecological problem (disease, discomfort, ..)
- Orientation, family planning
- Periodical revision
- Other reason

#### ***Last mammography***

- Less than 6 months ago
- Between 6 months and 1 year
- Between 1 and 3 years
- More than 3 years ago

#### ***Last vaginal cytology***

Definition:

Vaginal cytology: Means of diagnosis for cancer of the neck of the uterus and vagina and of determined infections. Also facilitates information on female hormonal activity. It consists of taking a cell sample which are then analysed in a laboratory.

#### ***Last mammography***

- Less than 6 months ago
- Between 6 months and 1 year

- Between 1 and 3 years
- More than 3 years ago

- **Personal characteristics**

**Physical characteristics**

***Weight and height***

**Auditory characteristics**

Refers to the sound volume with which they usually listen to the TV or radio.

In case of using an auditory prosthesis or a hearing aide, this characteristic will be measured in the situations when it is used.

***Volume at which you usually listen to the TV or radio***

- Much louder than normal
- Somewhat louder than normal
- Normal
- Lower than normal

**Visual characteristics**

It is about the capacity to visually recognise a person sufficiently well, at a distance of four metres across the street, or at least recognise them at a distance of one metre.

***Visual recognition of a person at a distance of one metre***

- **Personal and affectionate support**

This is about studying the degree of personal and affectionate support received in various daily life situations.

**Various daily life situations and degree of support received in each of them:**

<i>Daily life situations</i>	<i>Degree of support</i>
– Receives invitations for recreation and to go out with other persons	– More than desired
– Receives care and affection	– As much as desired
– Has the possibility to speak with someone about their problems (personal problems, family problems, ...) be it with friends, at work, at home, ...	– Enough, but less than desired
– Counts with persons who worry about what occurs to them	– Much less than desired
– Receives useful advice when some important event occurs in their life	– None
– Receives help when ill in bed	

- **Common life activities**

The ability of persons 65 years old and over to carry out or not, with or without help, daily activities is the focus of the study.

***Capacity to carry out, with or without help, or not able to in any way, some common life activities.***

<i>Common activities</i>	<i>Capacity to carry them out</i>
– Use the telephone (find the number and dial)	– Can do it without help
– Purchase food or clothes, ...	– Can do it with the help of another person
– Take the bus, metro, taxi, ....	– Cannot do it in any way
– Prepare their own breakfast	
– Prepare their own food	
– Take their medicines (remember the quantity and the moment when they must take same)	
– Administer their own money (pay receipts, deal with the bank, sign cheques, ...)	
– Cut a slice of bread	
– Wash the dishes	
– Make the bed	
– Change the bed sheets	
– Wash light clothes by hand	
– Use the washing machine	
– Clean the house or flat (mop the floor, sweep)	
– Clean a spot on the floor by leaning down	
– Eat (cut the food and put it into their mouth)	
– Get dressed or undressed and select the clothes that should be worn	
– Comb their hair, shave, ...	
– Walk (with or without a cane, crutches or zimmerframes)	
– Get out of bed and lay down	
– Cut their toe nails	
– Sew a button	
– Wash their face and body from the waist up.	
– Shower or bathe	
– Climb ten steps	
– Walk for one hour continuously	
– Remain alone for an entire night	

- **Information exclusively collected for minors under 16 years of age**

**Time dedicated to watching TV**

- Less than 1 hour
- 1 hour to 2 hours
- 2 to 3 hours
- More than 3 hours

## **Food**

***Type of lactation during the first 6 weeks, until 3 months and until 6 months:***

- Natural
- Mixed
- Artificial

## **Preventative practices for children**

### ***Information about vaccinations***

Whether the minors questionnaire informant is informed about the illnesses for which child vaccination is recommended, is investigated.

- Diphtheria
- Tetanus
- Whooping cough
- Hepatitis B
- Measles
- Mumps (Parotiditis)
- Rubella
- Poliomyelitis
- Chicken pox
- Meningitis C

### **• Child care**

This characteristic refers to the person/s who usually are in charge of caring for those 14 years old or under who reside in the household and their parental relationship with the child.

### ***Persons who take care of children in the household***

- a. Persons resident in the household who:
  - a.1. Do not charge for that care
  - a.2. Charge for that care
- b. Persons not resident in the household who:
  - b.1. Do not charge for that care
  - b.2. Charge for that care

***Parental relationship of the care giver with the child they care for***

- Mother
- Father
- Grandmother
- Grandfather
- Brother/sister
- Other family members
- Persons employed in the household mainly dedicated to childcare
- Persons employed in the household mainly dedicated to other tasks.
- Neighbours and friends.
- Another type of relationship.

• **Housework**

This characteristic refers to the person that usually and principally takes care of the house and their relationship with the main breadwinner.

***Person/s primarily responsible for the household chores***

- a. Persons resident in the household
  - a.1. Do not charge for that care
  - a.2. Charge for that care
- b. Persons not resident in the household
  - b.1. Do not charge for that care
  - b.2. Charge for that care

***Relationship with the main breadwinner***

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8.2 IDENTIFICATION VARIABLES

**Province**

The 52 provinces in which state territory is divided are considered.

**Municipality**

The municipality to which the selected dwellings belong is considered.

**Section**

The census section to which the selected dwelling belongs is considered.

### **Order number of the dwelling**

The selection number that corresponds to each one of the sample dwellings is considered.

### **Number of households within the dwelling**

The number assigned to each of the households within the dwelling is considered, assuming there is more than one household in the dwelling.

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## 8.3 CLASSIFICATION VARIABLES

### • **Geographical characteristics**

#### **Current Autonomous Community of residence**

The 17 Autonomous Communities and the Autonomous Cities of Ceuta and Melilla are considered

- Andalucía.
- Aragón
- Asturias (Principado de)
- Balears (Illes)
- Canarias
- Cantabria
- Castilla y León
- Castilla - La Mancha
- Cataluña
- Comunidad Valenciana
- Extremadura
- Galicia
- Madrid (Comunidad de)
- Murcia (Región de)
- Navarra (Comunidad Foral de)
- País Vasco
- Rioja (La)
- Autonomous Cities of Ceuta and Melilla.

**Size of the Municipality of residence**

- Municipalities with up to 10.000 inhabitants.
- Municipalities of 20,001 to 50,000 inhabitants.
- Municipalities of 20,001 to 50,000 inhabitants (except provincial capitals).
- Municipalities of more than 500,000 inhabitants (except provincial capitals).

**• Characteristics relative to the household****Type of Household**

- A 65 year old adult, without children
- An adult under 65 years old, without children
- An adult with 1 or more children
- Couples without children
- Couple with 1 or 2 children
- Couple with 3 or more children
- Other households with 2 adults, without children
- Other households

**Size of household.**

- Households with one member
- Households with two members
- Households with three members
- Households with four members
- Households with five members
- Households with six members and more

**Age****Sex****Nationality**

In this category it will be necessary to record the country of nationality or citizenship of each person in the household. In the event of dual nationality, where one is Spanish, the Spanish nationality will be considered for the purposes of the survey.

- Spanish
- Foreigner:

1. An EU country
2. Another European country
3. Canada or U.S.A
4. Other American country
5. An Asian country
6. An African country
7. An Oceania country

### **Marital status**

This characteristic specifically refers to the legal situation and not to the actual situation.

- Single
- Married
- Widower
- Legally separated
- Divorced

In the event of not being married, it will be ascertained whether they are currently living with anybody.

### **Relationship of the household members with the main breadwinner.**

For each household member, their relationship with main breadwinner is included

- Main breadwinner.
- Spouse or partner of the main breadwinner.
- Child of the main breadwinner and/or of their spouse or partner.
- Main breadwinner's daughter or son in-law and/or the main breadwinner's spouse or partner.
- Main breadwinners father or mother.
- Main breadwinners spouse and/or partner's father or mother.
- Main breadwinners brother/sister.
- Main breadwinners spouse or partner's brother/sister.
- Main breadwinners and/or main breadwinners spouse or partner's grandson/daughter.
- Main breadwinners and/or main breadwinners spouse or partner's grandfather/mother

- Other relationship related to the main breadwinner.
- Other relationship related to the main breadwinners spouse or partner.
- Resident persons employed in the household.
- Guests
- Another type of relationship.

### **Health coverage**

For all the household residents, it will be necessary to record the health coverage regime to which they have access to, as the holder or beneficiary.

Definition:

Health coverage: Health care system to which the person has access, as holder or beneficiary.

Health care can be offered by the National Health Care System (INSALUD group, Autonomous Communities health services and the rest of the public institutions, such as local delegations, town halls, private health care company corporations (ASISA, ADESLAS, SANITAS, PREVIASA, etc.), by private professionals and by non-governmental organisations.

### ***Contribution Regime.***

- Social Security Regime with health care provided by the National Health Care System.
- Public Mutual Insurance Regime (MUFACE, ISFAS, MUNPAL) with health care provided by the National Health Care System.
- Public Mutual Insurance Regime (MUFACE, ISFAS, MUNPAL, ...) with health care provided by this entity or by contract with private companies (ADESLAS, ASISA, ...).
- Compulsory Group Affiliation Mutual Insurance Regime (ONCE -Nat. Spanish Blind persons Assoc.- , Telefónica, ...).
- Private affiliation benefit society plan or free health service institutions, of voluntary, individual or collective affiliation.
- Other forms of Coverage by means of periodic payments which, facilitate access to some type of health care (medical contract, ...).
- Without any contribution regime at all, but with care supplied by the National Health System.
- Without any contribution regime, but with health care provided by some NGO.

Definitions:

*Social Security.* General Social Security Plan; special regimes of household employees, agrarian, mine and coal, sea and freelance workers. Also includes school insurance.

*Public Mutual Insurance:* General State Civil Servants Mutual (MUFACE), Armed Forces Social Institute (ISFAS), General Judicial Mutual (MUGEJU), National Local Administration Mutual (MUNPAL).

*Compulsory Group Affiliation Mutual Insurance Regime:* Social Security Law covers the possibility of companies collaborating in the management of Social Security. This formula of collaborating companies is regulated, and is used by companies like Telefónica, NOBS, la Caixa, Iberdrola, ..., as well as the Community of Madrid.

*Private affiliation benefit societies or collective or individual voluntary affiliation free health care (ASISA, SANITAS, ADESLAS, ...):* Includes free insurance health care institutions, including road accident mutuels.

*Other forms of coverage by means of periodic payments:* Includes the medical contract and other types of coverage with periodic payment of quotas not included in the previous sections.

### **Difficulties in carrying out activities of daily living.**

Whether the person has difficulties in carrying out activities of daily living, degree of difficulty, if they need some assistance, if they receive the assistance they need, the problem that caused the difficulties and the time they have suffered this problem are investigated.

Definitions:

*Difficulty in carrying out everyday activities:* Those limitations that one person may have in carrying out activities within their real environment as a result of a health problem.

The effort expected of a determined activity is that which the general population that does not have any specific health condition carries out. Therefore, whether the person knows how to perform determined activities or not should not be taken into account (for example: carrying out households chores), but rather if they can or cannot carry them out.

An activity is limited when it is considered as such by the subject himself/herself.

If the person highlights that he/she has difficulty in some of the steps that lead to the complete execution of a certain activity, it is considered that yes they have difficulty. For example, if a person has sight problems that prevent him or her from making a meal although they do not have any limitation for eating if someone prepares it for them, it is considered that the person has difficulty in carrying out activities of daily living.

*A person is considered as having difficulties in carrying out activities of daily living even if they have overcome them with the use of some assistance, be it technical or personal.*

*Aid from another person:* Any direct support offered by another person for carrying out activities of daily living. Personal aids should not be confused with professional support, for example physiotherapy, psychotherapy, rehabilitation, special education, ...

***Degrees of difficulty***

- Without any difficulty.
- With moderate difficulty.
- With severe difficulty.
- With absolute difficulty.

***Person/s that render help***

- a. Persons resident in the household
  - a.1. Do not charge for that care
  - a.2. Charge for that care
- b. Persons not resident in the household
  - b.1. Do not charge for that care
  - b.2. Charge for that care

***Relation of carer with the person cared for***

- Spouse or partner of the main breadwinner.
- Daughter
- Son
- Daughter-in-law
- Mother
- Father
- Grandparents.
- Another family member (brother/sister, son-in-law, uncle/aunt, ...)
- Persons employed in the household mainly dedicated to other persons
- Persons employed in the household mainly dedicated to other tasks.
- Neighbours and friends.
- Social Services

- Volunteers (church, Red Cross, ...)
- Another type of relationship.

***Problem that caused the difficulty in carrying out the activities of daily living***

- Physical exercise
- Mental illness
- Both types

***Duration of the problem that caused the difficulty in carrying out the activities of daily living***

- Less than 6 months
- Between 6 months and 1 year
- Between one and five years
- More than five years.

**Level of studies completed**

This characteristic refers to the highest level of studies completed by persons ten years old or over who reside in the household. Therefore, given the case of a person who has attended studies of a certain level but has not completed that level, these persons will be considered as included in the previous level.

***Classification of finished studies***

- Illiterate due to physical or psychological problems
- Illiterate For Other Reasons
- Uneducated
- Primary education or equivalent
- General secondary education, 1<sup>st</sup> year
- 2nd degree Professional education, 2nd year
- General secondary education, 2nd year
- Higher professional education
- University studies or equivalent to 1st year
- University studies or equivalent of 2nd and 3<sup>rd</sup> year

***Description of the levels of studies:***

1. Illiterate due to physical or psychic problems.
2. Illiterate For Other Reasons.

### 3. Without studies

Included in this section are those persons that have assisted less than five years of school (without considering pre-school and infant school years) and who are not illiterate.

### 4. Primary education or equivalent.

It includes the studies that generally commence at the age of five or six and conclude at eleven or twelve years of age.

– Attending school for at least five years, -Primary studies certificate-, General Culture, -E.G.B., having passed five academic years-, E.G.B. first phase, -Primary education (new system)-, Basic Education in Special Education Centres (included are all those persons who receive education in a Special Centre or in a Special Education Classroom in ordinary school facilities, or those who receive any type of special support in ordinary school facilities.), -Professional Initiation, industrial pre-learning-, Teaching of basic literacy to adults.

### 5. General secondary education, 1<sup>st</sup> year

It is the education that broadens the primary level. It provides a general education to persons that are normally between the ages of 11 or 12 and 13 or 14, respectively in the previous and current system, and 15 or 16 years of age in the new system approved in the Education System General Order (ESGO) Law, given over three or four academic years.

#### – *Old system:*

Fourth academic years completed of any of the previous General Education Law plans: Elementary school leaving exam (general, work or technical), Ecclesiastic studies (Humanities).

#### – *Current system:*

– B.G.E. (advanced degree or second stage), - School Graduate, - Apprenticeship in Special Education tasks.

#### – *New system:*

– Obligatory Secondary Education (O.S.E.), -Education certificate or any other certificate which in the future accredits school attendance during the obligatory education period (having passed a minimum number of academic years)-. Global social guarantee (these are established for students between 16 and 21 years old who do not meet the Obligatory Secondary Education requirements).

– Social guarantee in Special Education and Apprenticeship of Special Education tasks (included in these 2 headings are all persons who are educated in a special centre or in a special education class within an normal regime schools, or those who receive some special assistance in normal regime schools).

## 6. 2nd degree Professional education, 2nd year:

### – *Current system:*

– First degree or equivalent professional training: -PT1: Auxiliary technician or industrial official, -Nautical fishing professional training-, Other equivalent regulated studies leading to a PT1 (which grant this degree).

– Other first degree technical-professional education: -Agricultural capability, -Rural instructor, -Corporate auxiliary or mercantile office interpreter (previously Commerce Schools), -First level of intermediate commands, -Music conservatories (elementary degree), -specialised seamen and petty officers, -Other regulated equivalent PT1 studies for trades.

### – *New system:*

– Technical-professional intermediate degree education (training cycle), -Module 2 of Professional Training (included are intermediate degree training cycles covered in the Education System General Order (ESGO), both for professional training as well as for plastic arts and design education), -Specialised or adapted professional training.

## 7. Secondary general education, 2nd year

– Advanced school leaving exam (General, work, or technical) with or without pre university - B.U.P. (with or without U.O.C.), - M.E.R. (Medium education reform), - ecclesiastical studies (Six Academic years of Humanities with Two of Philosophy), - School leaving exam (EGSO).

## 8. Higher professional education

### – *Current system:*

In this section the PT2 studies, those equivalent academically or in work, and other similar ones, are included. -Second degree professional training or academically equivalent: -PT2 specialist technician or industrial masters, Mercantile technicians, Intermediate commands, second level, -Operator (studied in the Information Technology Institute which is part of the Ministry of Education and Science), -Other equivalent regulated studies to PT2 (which grant access to that degree).

– Plastic Arts Education, medium degree Music and Dance: -medium degree Singing: Singers Diploma, -medium degree Music, -medium degree in Applied arts and artistic trades, -Ceramics: Graduated from the Madrid School of Ceramics, Manises ceramic arts expert and Manises ceramic art technique technician.

– Other regulated education equivalent in work or similar to PT2: Language schools aptitude certificate, -Armed Forces non-commissioned officer, -Home education teachers, -Dramatic arts and dance, Classic ballet and Spanish dance, -Draughtsmen, Other regulated studies equivalent in work to PT2.

### – *New system:*

- Technical-professional higher degree education (training cycle), -Module 3 of Professional Training. Higher degree training cycles covered by the EGSO are included in this code, both for Professional Training as well as for Plastic arts and design education.

#### 9. University studies or equivalent first year studies.

It includes the university studies of 1 sole cycle.

Classified in this group are the persons whose completed highest level educational program has provided them with the following degree:

- University Diplomas.
- Technical engineering studies
- Technical architecture
- Other qualifications equivalent to a university diploma.

This group also covers:

- Persons who have passed three academic years of a university degree or equivalent credit
- Components of the Officer's Rank of the Armed Forces.
- Components of the Officer's Rank of the Civil Guard.

#### 10. University studies or equivalent 2<sup>nd</sup> and 3<sup>rd</sup> cycle studies

It includes the following university studies and postgraduate studies:

- *First and second year university education, only second year and equivalent*

Classified in this group are the persons whose completed highest level educational program has provided them with the following degree:

- University graduates.
- Engineers (advanced)
- Architects

This group also covers:

- Components of the Upper level of the Officer's Rank of the Armed Forces
- Components of the Upper level of the Officer's Rank of the Civil Guard
- Other qualifications equivalent to a university degree

– *Official professional specialisation studies*

In this group are classified people whose highest level educational program finished has provided them one of the following degrees:

- Majors in medicine, pharmacy, biology, chemistry, ... (MIR, FIR, BIR, QUIR)
- Post Graduate Certificate of Education, PGCE
- Psychologist, Specialist in Clinical Psychology
- Hospital radio-physics specialist
- *Third year university education*

In this group are classified people whose highest level educational program finished has provided them one of the following degrees:

- University doctorates

This group does not cover:

- Those persons who have completed doctorate studies, but have not received the Doctorate degree
- Those persons who have obtained the investigation sufficiency certificate, but have not received the Doctorate degree.

**Relation with economic activity.**

These financial characteristics are investigated for all residents in the household who are 16 years old or over.

***Relation with the current economic activity***

- Working.
- With employment but temporarily absent.
- Unemployed who has worked previously.
- Retired by age or receiving a contributory retirement pension.
- Receiving a contributory disability pension.
- Pensioner (who has worked previously) receiving a pension other than a retirement or disability pension (widowers, orphaned, .....)
- Pensioner (who has not worked previously) receiving a pension other than a retirement or disability pension (widowers, orphaned, .....)
- Receiving a non-contributory old age/retirement pension.
- Receiving a non-contributory disability pension.
- Studying.

- Dedicated to household tasks (non economic activity)
- Dedicated to volunteer work (NGO, parish church, etc.).
- Without carrying out any economic activity whatsoever: (independently wealthy, receiving some assistance, public or private, ...).
- Unemployed seeking first employment.

Definitions:

The following criteria used in the Active Population Survey are generally followed for the determination of these and other characteristics related to economic activity:

*A. Economically active population.* This is the set of persons, who in a given reference period, supply labour for the production of economic goods and services or are available and carry out actions to incorporate themselves into the said production.

*A.1 Employed.* (or persons with employment). Those persons which, during the reference week, have had employment or have been self-employed, in accordance with the definitions outlined below, not including those persons using the Occupational Workshops, which are for all effects the economically inactive population.

Those persons in the following categories are considered as employed:

- *Working:* Persons that during the reference week have worked at least one hour, for a wage, salary or another form of associated retribution, in cash or in kind, and persons that during the reference period have worked at least one hour in exchange for the benefit of a family earning, in cash or in kind.

Those apprentices who have received retribution in cash or in kind and those students who have worked full or part time for remuneration, are considered employees. Those persons fulfilling military service, who simultaneously carry out remunerated work for others, are considered employees. Active members of the Armed Forces are also counted as employees.

The normal workday can be full time or part time. The distinction is based on the interviewee's opinion, though it must be taken into account that part time work can never exceed 35 hours a week and full time work cannot be less than 30 hours a week.

Businesspersons, freelance workers and members of production co-operatives who work in them, are considered employed with freelance work. Those persons fulfilling military service, who simultaneously carry out remunerated freelance work, are considered freelance employees.

- *With employment, but without work:* Persons who, having worked in their current job are absent from the same during the reference week due to illness or accident, work conflict disciplinary suspension from work and salary, holidays, public holidays, study leaves, maternity leaves and any other classes of leaves,

voluntary leave, temporary disorganisation of work for reasons such as bad weather, mechanical faults and other analogous reasons, as long as these are formally linked to their job. Those suspended or separated from their job as a consequence of employment regulation will be considered employed employees only in the event that they expect to be able to return to the company.

The following persons are not considered occupied:

- Those persons absent from their work, with permission or suspended and weakly linked to their employment.
- Seasonal employees, occasional or discontinuous working for others in the season of least activity, who have not worked during the reference week.
- Persons who take care of the household without remuneration, those who provide non remunerated or volunteer social services, and other non remunerated persons who carry out activities outside of the scope of economic activities.
- Seasonal freelance employees and seasonal employees or occasional family members not remunerated during the lowest activity season, who have not worked in the reference week.

*A.2 Unemployed.* Unemployed are those persons that during the reference week have been without work, who are available for work and who seek employment.

Although this definition includes the criteria of the effective search for employment, also considered unemployed are those persons that during the reference week have been without work, are available for work, and waiting to begin a new job on a date subsequent to the reference week.

Similarly, persons absent from their job as a consequence of a suspension due to employment regulation, who do not believe they will be able to return to the company, who have looked for work and are available to work, are similarly unemployed.

Students, those who take care of their household without remuneration and other persons mainly dedicated to non-economic activities that satisfy the conditions for the definition of unemployment, are also considered unemployed. Those seeking work as apprentices are likewise considered as such, if they satisfy the remaining criteria of said definition of unemployment.

*B. Inactive population.* The inactive population includes all those persons of one sex or another, not classified as occupied or unemployed during the reference week. Includes the following functional categories:

*B.1 Receiving a contributory pension for disability.* Persons that had a previous economic activity and due to permanent disability have abandoned it, and their means of support are the pensions obtained from their previous activity, are considered in this situation.

The degrees of permanent disability depend on the anatomic or functional reductions suffered by workers, provided they reduce or eliminate their capacity to work.

- Partial permanent disability for the usual profession.
- Total permanent disability for the usual profession.
- Absolute permanent disability for all work.
- Major disability.

*Permanent partial disability for the usual profession* is understood as that incapacity which, without reaching the level of total incapacity, occasions in the worker a reduction of no less than 33% of the normal performance for said profession, without preventing him/her from carrying out the basic tasks of same.

*Permanent total disability for the usual profession* is understood as that disability which prohibits the worker from carrying out all or the main tasks of said profession as long as they can practice a different one.

*Permanent absolute disability for all work* is understood as that which completely prohibits the worker from any profession or trade.

*Major Disability* is understood as a situation where an affected worker who, as a result of anatomic or functional losses, needs the assistance of another person to carry out the most essential activities of daily living.

*Receiving a non-contributory invalidity pension.* Persons who receive a health invalidity pension that does not come from a previous economic activity are considered in this situation.

Those persons that suffer from impairments, foreseen as permanent, of a physical or psychological nature, congenital or not, which eliminate or modify their physical, psychological or sensorial capacities are beneficiaries.

The requirements are:

Have Spanish nationality, or a determined foreign nationality.

Be over 18 and under 65 years of age.

Legally reside in Spanish territory and have done so during the last 5 years, of which 2 must be consecutive and immediately prior to the pension request. For Europeans the periods resided within European Union Member States is totalled.

Be affected by a disability or chronic disease, to a degree equal to or greater than 65 percent.

Lacking in sufficient income or revenues.

The beneficiaries of this pension who are working for others or on a freelance basis, automatically recover said pension, when their contract terminates or they stop carrying out their work activity respectively. In the annual calculation of their income, that received for their work activity, for others or on a freelance basis, in the financial year during which the contract termination or the cessation of the work activity takes place, will not be taken into account.

*B.3 Retired by age or receiving a contributory retirement pension.* Persons who have a previous economic activity and who due to age or other causes (different from invalidity) have abandoned it, are considered to be in this situation, their income being the pensions obtained as a result of their previous activity.

Persons who due to the regulation of staff retire early (with a reduction of their normal pension) without fulfilling the general requirements marked by the law to receive a retirement pension, will be classified in this heading.

*B.4 Studying something.* The person who receives instruction in any degree of training will be considered in this situation.

*B.5 Dedicated to Household Tasks (non-economic activity).* Persons, regardless of sex, dedicated to caring for their own households without remuneration are considered in this situation (care of the household, of the children, ...).

*B.6 Dedicated to volunteer work.* Persons who altruistically, and showing solidarity, freely and gratuitously carry out an activity of a civic and social character by means of a public or private organisation for social services.

*B.7 Persons in another situation.* Those persons that receive some type of public or private assistance without carrying out any economic activity and all those persons that are not included in the previous categories (independently wealthy, persons temporarily deprived of freedom, receiving a pension other than retirement or disability, fulfilling military service, ...) are included in this category.

*B.8 Pensioner (who has worked previously) receiving a pension other than a retirement or disability pension (widower, orphans, ...).*

Widower pension.

Beneficiaries are:

- The surviving spouse.
- Those separated, divorced and whose marriages have been annulled by judicial sentence. In the cases of annulment, the one pretending to be beneficiary will be required to not have been considered a person getting married in bad faith.

Orphans pension.

Beneficiaries are:

- Children of the causing party under the age of 18 or older disabled persons (who have a reduced capacity to work in a percentage considered as an absolute and permanent degree of disability or major disability) on the date of death, whatever their affiliation.
- Children of causing party under twenty one or twenty three if neither of the parents survived, on the date of death of the former, when they do not carry out any lucrative work on a freelance basis or for others, or when doing so the income obtained, calculated annually, is less than 75 percent of the amount of the minimum wage updated regularly, also calculated annually.

- Children of the surviving spouse contributed to the marriage, when together with the general requisites, there is concurrence of the condition whereby the marriage was celebrated two years before the death of the causing party, they had cohabited at their expense and moreover they have no right to another Social Security pension, and when there are no family members with the obligation and possibility of feeding them, in accordance with civil legislation.

B.9 Pensioner (who has not worked previously) receiving a pension other than a retirement or disability pension (widower, orphans, ...).

B.10 Receiving a non-contributory old age/retirement pension.

Periodical benefit granted due to age and which is not derived from a previous economic activity.

Beneficiaries are:

Those over the age of 65 who are in a state of need, who lack their own financial resources for subsistence, even when they have never contributed or have not contributed enough time to obtain contributory benefits for carrying out professional activities.

Requirements

- Be of Spanish nationality, or a determined foreign nationality.
- Having turned 65 years old
- Legally reside in Spanish territory and have done so during 10 years between the ages of 16 and the age of receiving the pension, of which two must be consecutive and immediately prior to the request. For Europeans the periods resided within European Union Member States are totalled.
- Lacking in sufficient income or revenues.

Lacking in income or revenues

- It will be considered that there is insufficient income or revenues when the sum, annually, of that possessed by the interested party, is less than the annual benefit. For the year 2001, 586,740 euros (3,526.46 euros).
- If the applicant lacks sufficient income or revenues, but cohabits with other persons in one same economic unit, they will only be considered as complying with said requisite, when the sum of all those stemming from the unit is less than the cumulative limit of resources equivalent to the annual sum of the pension plus the result of multiplying 70 percent of said figure by the number of cohabitants minus one.

In the case of cohabiting with first degree descendants or ascendants, by blood, or by adoption, the previous limit described will be multiplied by 2,5.

Any goods and rights derived both from work as well as from capital, as well as benefits, except those financial allowances for children being cared for, irrespective of whether or not they are disabled, in their different modalities,

granted by the Social Security system, as well as transport subsidies and transportation expense compensation, and those derived from the occupation of the usual residence, are considered computable income or revenues.

An economic unit will exist in all cases of cohabitation of a beneficiary with other persons, irrespective of whether or not they are beneficiaries, united with the beneficiary by marriage or by family ties due to blood relationship or adoption up to the second degree.

### **Work day**

Definitions:

The workday is the time each worker dedicates to carrying out the work for which they are contracted. It is calculated by the number of hours that the employee has to work to carry out their work activity within the time period being considered.

#### ***Type of workday***

- Continuous work day
- Split workday:
- Reduced work day
- Work in shifts
- Another type

Definitions:

*Continuous work day:* When the work day is carried out in a continuous manner exceeding 6 hours and it includes a break period of no less than 15 minutes which are counted as worked time.

When this work is performed between ten at night and six in the morning, it is considered night work. It cannot exceed the average of eight hours a day, during a reference period of fifteen days.

Considered a night worker is that employee who normally performs more than 3 hours of their daily work day within the night shift, or if they carry out one third of their annual work at night.

*Split workday:* Is the workday that includes at least 1 hour for break that is not counted as worked time.

*Reduced workday:* When the workday is less as a consequence of the particular physical characteristics under which the work is carried out:

- Work with health hazards
- Work in refrigerators and freezers
- Work inside mines
- Construction and public work

- Other work day reductions (maternity, children’s legal guardian,...)

*Work in shifts:* Work in shifts is considered as any form of work organisation in teams according to which the workers successively occupy the same job posts, following a certain continuous or discontinuous rhythm, implying that the worker must provide their services at different hours within a determined period of days or weeks.

### Occupancy

This financial characteristic is investigated for all residents in the household who are **16 years old or over**.

Definitions:

The occupation level is covered in the framework of the National Classification of Occupations of 1994 (NCO 94), which defines *occupations* as a set of jobs whose tasks are very similar.

The structural design of the 1994 NOC is based on the concept of qualification, which is studied in two aspects:

- The qualification level: degree of complexity of the tasks realised.
- The specialisation of the qualification; subordinated to the areas being dealt with, and is used for occupational differences with the same level of qualification.

This *occupational qualification* can be obtained by means of a formal apprenticeship (especially for the sub-groups of the Large Groups 2 and 3), or by means of a non-regulated training and through experience.

The following categories are considered at the level of Subgroups:

Subgroup	Title
001	Upper level
002	Middle level
003	Basic level
101	Executive and legislative power and General Council of Judicial Power
102	Executive personnel from the Public Administrations
103	Local Government
104	Administration of organisations of interest
111	General Administration and executive presidency
112	Administration of the production department
113	Administration of specialised areas and departments
121	Management of wholesale commerce companies with less than 10 employees
122	Management of retail commerce companies with less than 10 employees
131	Management of accommodation companies with less than 10 employees
132	Management of catering companies with less than 10 employees
140	Management of other companies with less than 10 employees
151	Management of wholesale commerce companies without employees
152	Management of retail commerce companies without employees
161	Management of accommodation companies without employees

Subgroup	Title
162	Management of catering companies without employees
170	Management of other companies without employees
201	Physicists, chemists and the like
202	Mathematicians, actuaries, statisticians and the like
203	Upper level information technology professionals
204	Architects, town planners and traffic planning engineers
205	Upper level engineers
211	Professional in natural sciences
212	Doctors and odontologists
213	Veterinarians
214	Pharmacists
219	Other upper level health professionals
221	University professors and teachers from other higher education centres
222	Secondary education teachers
223	Other teaching professionals
231	Lawyers and public prosecutors
232	Judges and magistrates
239	Other legal professionals
241	Professionals in the field of company administration and management
242	Economists
243	Sociologists, historians, philosophers, philologists, psychologists and the like
251	Writers and creative artists or actors/actresses
252	Archivist, librarians and similar professionals
253	Diverse professionals of the Public Administrations that cannot be classified in previous sections
261	Professionals associated with a 1st year university degree in physical sciences, chemistry and similar studies
262	Professionals associated with a 1st year university degree in mathematics, statistics and similar studies
263	Middle level information technology professionals
264	Technical architects
265	Technical engineers
271	Professionals associated with a 1st year university degree in natural sciences
272	Nurses
281	Primary and infant school teachers
282	Special education teachers
283	Professional training technical teaching body
291	Holders of a diploma in accounting and social graduates, and management of companies and tourism activities
292	Archive and library assistants, and the like
293	Holders of a diploma in Social Work
294	Priests of different religions
295	Other public administrations professionals which cannot be classified in previous sections
301	Draftsman and technical designers
302	Technicians of physical sciences, chemistry, and engineering
303	Information technology technical professionals
304	Operators of optical and electronic equipment
305	Maritime navigation professionals
306	Aeronautical navigation professionals

Subgroup	Title
307	Technicians in construction, work safety and quality control
311	Technicians of natural sciences and similar professional assistants
312	Health technicians
313	Diverse health experts that cannot be classified in previous headings
321	Infant and special education technicians
322	Flight, navigation and vehicle driving instructors
331	Management support personnel, with general administrative tasks
332	Commerce representatives and sales technicians
341	Management support personnel, with general administrative tasks
342	Customs, excise and similar administrative professionals that work in Public Administration tasks
351	Consignees and agents in the contracting of labour
352	Specialised Security Forces technicians and private detectives
353	Social welfare support professionals
354	Arts, show business and sports professionals
355	Secular assistants for religious bodies
401	Accounting and financial assistants
402	Employees dedicated to the registration of materials, support services to production and transport
410	Library employees, mail service employees and the like
421	Stenographers and typists
422	Data recorders
430	Assistant clerks (without customer service tasks) not classified previously
440	Assistants clerks (with customer service tasks) not classified previously
451	Employees dedicated to providing information and office receptionists
452	Travel agency employees, receptionists in different office establishments and Receptionists
460	Cash register handlers, box office workers and other similar employees with direct public contact
501	Chefs and other food preparation personnel
502	Waiters, barman and the like
503	Head chefs, headwaiters and the like
511	Nursing assistants and the like
512	Workers dedicated to the care of people and the like (except nursing assistants)
513	Hairdressers, beauty treatment specialists and similar employees
514	Employees who attend to passengers and the like
515	Butlers, administrators and the like
519	Other personal services workers
521	Civil Guards
522	Police
523	Fire-fighters
524	Prison civil servants
525	Security guards and private security personnel
529	Other workers in the protection and security fields
531	Fashion models, art and advertising
532	Section heads in a retail commerce establishment and the like
533	Shop assistants and window dressers in stores, department stores, kiosks and markets
601	Self-employed skilled workers in agricultural activities
602	Skilled employees in agricultural activities
611	Self-employed skilled workers in stock breeding activities

Subgroup	Title
612	Skilled employees in agricultural activities
621	Self-employed skilled workers in agricultural and livestock activities
622	Self-employed skilled workers in forestry activities and the like
623	Skilled workers in agricultural and livestock activities
624	Skilled workers in forestry activities and the like
631	Self-employed fishermen and skilled workers in fish farming activities
632	Fishermen and skilled workers in fish farming activities
701	Foreman and team leaders in structural construction works
702	Shop bosses and employee supervisors for building finishers
703	Supervisors of painters, wall papering and the like
711	Bricklayers and masonry workers
712	Reinforced concrete workers, rough cast workers, ironworkers and the like
713	Carpenters (except metallic structure carpenters)
714	Other workers within the structural construction works sector
721	Plasterers, casters and stuccoists
722	Plumbers and piping installers
723	Construction electricians and the like
724	Painters, varnishers, wall paper hangers and similar
725	Building facade cleaning personnel and chimney sweeps
729	Other construction finishing and similar employees
731	Shop bosses and managers of shapers, solders, fitters of metallic and similar structures
732	Motor vehicle shop bosses
733	Agricultural and industrial machine and aeroplane engines shop bosses
734	Mechanical equipment bosses and electrical and electronic equipment adjusters
741	Supervisors and foreman in mining
742	Miners, quarry workers, stone workers
751	Shapers, welders, car body workers, metallic structure fitters and similar Employees
752	Blacksmiths, toolmakers and the like
761	Mechanics and machinery adjusters
762	Mechanics and adjusters of machinery, electrical and electronic equipment
771	Precision mechanics for metals and similar materials
772	Graphic arts employees and the like
773	Ceramists, glaziers and the like
774	Wood, textile, leather and similar materials craftsman
780	Workers in the foodstuff, beverage and tobacco industries
791	Wood treatment workers and the like
792	Cabinet makers and similar workers
793	Textile industry workers, tailors and the like
794	Employees working in the fur, leather and footwear industries
801	Supervisors in mining installations
802	Supervisors in metal processing installations
803	Supervisors in glaziers', ceramic and similar workshops
804	Supervisors in carpenters' workshops and team leaders in paper manufacturing workshops
805	Team leaders in chemical treatment installations
806	Team leaders in energy production installations and the like
807	Team leaders of industrial robot operators
811	Operators in mineral extraction and exploitation installations
812	Operators in installations dedicated to obtaining and transforming metals

Subgroup	Title
813	Installations operators for the obtaining, transformation and manipulation of glass, ceramics and similar materials
814	Operators in facilities for processing wood and the manufacture of paper
815	Chemical industry plant operators
816	Energy production and similar plant operators
817	Industrial robot operators
821	Supervisors of machine operators for working metals
822	Supervisors of machine operators for manufacturing chemical products
823	Supervisors of machine operators for manufacturing rubber and plastic products
824	Supervisors of machine operators for manufacturing wood products
825	Shop bosses of printing, binding and manufacture of paper products
826	Supervisors of machine operators for manufacturing textile products and fur and leather articles
827	Supervisors of machine operators for elaborating foodstuff products, beverages and tobacco
828	Supervisors of fitters
831	Machine operators for processing metals and other mineral products
832	Operators of machinery for manufacturing chemical products
833	Machine operators for manufacturing rubber and plastic products
834	Operators of machinery for manufacturing wood products
835	Machine operators for printing, binding and manufacturing paper and cardboard products
836	Machine operators for manufacture of textile, fur and leather articles
837	Machine operators for manufacture of food, beverage and tobacco products
841	Fitters and assemblers
849	Other fitters and assemblers
851	Locomotive machinists and similar
852	Supervisors of machine operators for the movement of earth and materials
853	Operators of mobile agricultural machinery
854	Operators of other mobile machines
855	On deck seamen and similar
861	Taxi drivers and automobile and van drivers
862	Bus drivers
863	Lorry drivers
864	Motorcycle and moped drivers
900	Travelling sales persons and similar
911	Household employees
912	Office, hotel and other similar cleaning personnel workers
921	Building concierge, window cleaners and the like
922	Security guards, guards and similar
931	Shoe shiners and other street trade workers
932	Porters
933	Baggage handlers and similar
934	Metre readers (water...) and coin operated machine money collectors
935	Garbage collectors and similar workers
941	Agricultural workers
942	Cattle farm workers
943	Agricultural and livestock workers
944	Forestry workers
945	Fishing workers
950	Mining workers

Subgroup	Title
960	Construction workers
970	Manufacturing industry workers
980	Transport workers and unloading workers

### Professional Situation

This characteristic is investigated for all household residents 16 years of age or older.

- Employer
- Businessman without employees or independent worker
- Family Assistance
- Fixed employee
- Temporary employee
- Member of a co-operative
- Another Situation

Definitions:

*1. Employer.* Is that person who operates their own company or carries out a freelance profession, trade, industry or commerce and that due to this, contracts one or more employees or workers whom they remunerate by means of a salary, daily rate, commission, ...

Therefore this section includes the bosses, businesspersons and the professionals who employ salaried personnel. Members of production co-operatives are not included, even if they have employees.

The workers who have an employment in an incorporated company (public limited company, except working public limited company, private limited company, ...) in which:

- a. Alone or with other members of the family or one or various partners, they have a significant share in the company and
- b. they have the authority to act in the companies name with regards to signing contracts with other companies or organisations and to hire and fire company employees are considered as managing-owners of the company and will be coded as employers if the company has employees. This coding will remain even in cases where the managing-owner has a contract as an employee of their own company.

The share in the company shall be considered significant when the managing-owner has a work place as a result of that share.

The Board Members of an incorporated company are not considered employees of the company merely because they are part of the Board. To be considered company workers they must be managing owners, family members or employees of the company, encoding the appropriate professional situation that corresponds.

*2. Businessperson without employees or freelance workers.* These are all persons who operate their own company or practices a freelance profession, trade, industry or commerce without having employees whom depend on them.

Also considered in this section are those who manage their own businesses exclusively with non-remunerated family members.

*3. Family assistance.* Persons who work without regulated remuneration in the business of a family member with whom they live are considered as being in this situation.

*4 and 5 Employees.* Those persons that work for a public or private businessperson and that receive a wage, salary, commission, bonus or any other form of remuneration in cash or in kind for it are included in this group.

Within each section there are two groups:

*4 Fixed employee.* Employees who fulfil this condition are any of those that have an indefinite contract for an approved job, under which the employee is obliged to provide determined services for the business person, without a set time limit.

*5. Temporary employee or intern.* They are employees who independently of their type of contract, are defined as:

*a. Temporary employee:* employees who are contracted as a result of circumstantial market demands, the accumulation of tasks or excess orders, even when we are dealing with the normal activity of the company.

By collective agreement the activities for which these contracts can be carried out and their volume with respect to the total workforce of the company can be determined.

Also included in this category are the employees under contract to carry out work or provide a determined service on a freelance basis within the companies activities which although limited in time is, in principle, of an uncertain duration.

*b. Interim Employee:* employees whose contracting has the objective of substituting a worker with the right to retain their job post, based on the regulation, group or individual agreement, or simply to temporarily cover a job post during the selection process or promotion for its definitive coverage.

*6. Member of a co-operative.* These are those partners of production co-operatives, who work for the same co-operative. The working partners of public limited working companies are not included in this section since they are considered employees. Those employees who work in co-operatives are also not included in this code. Those working partners of associated work co-operatives, community land exploitation co-operatives, etc. are included.

**7. Other situation.** In those cases where the interviewee cannot be placed in any of the above sections, this one will be marked.

There is a marked tendency to consider personal and corporate services workers (especially handling agencies, insurance agencies...) and domestic service as another professional situation, when in the majority of the cases these are private sector and freelance employees.

Those persons who teach classes in academies, with or without a contract, and receive compensation for it, are also employees.

Priests, parish priests, etc., are private sector employees.

Code 7 must be reserved exclusively for very specific cases:

- Employees hired by foreign embassies. (they are Public sector employees of another country).
- Persons who co-operate in the work of an employee and cannot be coded as *family assistance* (since, for this there must be a businessperson or freelance worker in the family unit of which, they would be considered family assistance). For example: those textile sector employees, who receive a salary for this and are assisted by other members of the family unit. The latter may not be considered as family assistance.

**Current or previous employment place of work**

- Public administration
- Public company
- Private company
- Non profit private organisation
- Domestic service
- Others

## Definitions:

*Public company:* State owned company, normally directed at rendering services that are considered of high interest to the country, or destined to collective or social purposes.

*Private company:* Company belonging to private individuals that have the objective of obtaining a distributable profit.

*Private non-profit organisation:* Legal person borne of the desire of the associates by virtue of the constitutional right to free association (Art. 38 of N.C.P.C.), or by the freedom of private persons goods for attaining altruistic goals or a community benefit. Their main character arises from the absence of interest in profit generation, which signifies that there is no distribution of utilities or remnants generated in the carrying out of their objectives. The non-profit institutions are classified in three major categories: foundations, corporations and solidarity sector entities.

## Company activity

This financial characteristic is investigated for all residents in the household who are 16 years old or over and are or have been working.

The following codes for branches of activity are considered:

Branch of Activity	NACE 1993 Texts
01	Agriculture, livestock, hunting and related service activities
02	Forestry, logging and activities of services related with mines
05	Fishing, aquaculture; service activities incidental to fishing
10	Extraction and agglomeration of anthracite, coke, lignite and peat
11	Extraction of crude petroleum and natural gas; service activities incidental to oil and gas extraction, excluding surveying
12	Extraction of Uranium and Thorium Ores
13	Extraction of Metallic Ores
14	Extraction of non-metallic and non-energetic ores
15	Food and beverages products industry
16	Tobacco industry
17	Textile industry
18	Clothing and Furs Industry
19	Preparation, tanning and finishing of leather; manufacture of luggage and travel articles; saddlery, harness and footwear articles
20	Manufacture of wood and of products of wood and cork, except furniture; manufacture of articles of straw and plaiting materials
21	Paper Industry
22	Publishing, graphic arts and reproduction of recorded mediums
23	Coke oven products, petroleum refinement and treatment of nuclear fuels
24	Chemical Industry
25	Manufacture of rubber and plastic products
26	Manufacture of other non-metallic ore products
27	Metallurgy
28	Manufacture of metal products, except machinery and equipment
29	Construction of Machinery and Mechanical Equipment Industry

Branch of Activity	NACE 1993 Texts
30	Manufacture of office machines and computers
31	Manufacture of electrical machinery and material
32	Manufacture of electronic material; manufacture of radio, television and communication equipment and apparatus
33	Manufacture of precision, optical and clockwork medico-surgical equipment and instruments
34	Manufacture of motor vehicles, trailers and semi-trailers
35	Manufacture of other transport material
36	Manufacture of Furniture; other manufacturing industries
37	Recycling
40	Electricity, gas, steam and water production and distribution
41	Collection, treatment and distribution of water
45	Construction
50	Sales, maintenance and repair of motor vehicles, motorcycles and mopeds; retail sales of motor vehicle fuel
51	Wholesale commerce and intermediary commerce, except for motor vehicles and motorcycles
52	Retail commerce, except the commerce of motor vehicles, motorcycles and mopeds; personal effects and household belongings repair services
55	Accommodation
60	Land transport; transport via pipelines
61	Maritime, cabotage and in-land waterway transport
62	Air and space transport
63	Supporting and auxiliary transport activities; activities of travel agencies
64	Mail and telecommunications
65	Financial intermediation, except insurance and pension plans
66	Insurance and Pension Funds, except Compulsory Social Security
67	Activities auxiliary to financial intermediation
70	Real estate activities
71	Renting of machinery and equipment without operator and of personal and household goods
72	Computer activities
73	Research and development
74	Other business activities
75	Public Administration, defence and obligatory social security
80	Education
85	Health and veterinary activities, social services
90	Public Sewage Activities
91	Activities of membership organisations n.e.c.
92	Recreational, cultural and sporting activities
93	Various personal services activities
95	Households which employ household personnel
99	Extra-territorial organisations and bodies

### Household income

The main source and amount of household income is investigated.

#### ***Current regular net monthly income***

Definitions:

Monetary income is considered to be that received regularly by the household and/or by members of the household, except current guests and domestic personnel whatever their origin, once payments are discounted for the following, payments met as account retentions (income tax), payments to social security (contributions), other assimilated payments, deductible costs and account retentions.

In the case of regular income which is not monthly (bonuses, regular social services, .....), the calculation of this monthly income is carried out by monthly pro rata of the total regular income received each year.

In the case of a recent substantial change in the level of income (change of relation with economic activity, change of job, ...) the monthly pro rata is carried out on income received in the new situation.

Not included are the extraordinary social services (compensation, aid for sanitary payments such as: disabled vehicles, aid for different study grants, nor extraordinary transfers (lottery prizes, study grants, monetary inheritances, cash gifts, ...) nor any other type of income considered non-periodical.

The following are considered as regular net household income:

*1. Income from freelance work.* This is the income obtained as an independent worker, businessman or employer by exercising their business, professional and artistic activities independent of the income coming from jobs carried out in previous periods or being advances for future work.

Includes income for the sale of goods or the rendering of services, subsidies and transfers, indemnities for insurance and accounting for VAT paid.

*2. Income from work for others.* This is the income received as the consideration of a regular or sporadic activity carried out by other physical or legal persons.

Includes: wages, salaries and seniority; overtime hours, night work, on-call, ...; bonuses, complements, gratifications, profit sharing, transport to work bonus, commissions, gratuities, assistance premiums paid to employees and cash assignments for housing paid by employers. Income received for the sale of products as wages in kind is also included.

– Does not include: Food and travel, work clothes, doctors examinations, payments made by private insurance or by employers when the employee is absence due to illness, maternity, work accident, disability, dismissal, ...

*3. Pensions.* These are income received for periodic benefits for life or for an undetermined amount of time. Also included are some time-limited benefits, such as an orphaned pension.

a. *Contributory pensions.* These are those pensions in which the right to the benefit comes from having worked previously either for others or freelance, which has facilitated fulfilling the minimal requirements for contribution (retirement pension, permanent disability, orphaned, widowhood and in favour of family members).

b. Non-contributory pensions. These are those care pensions that do not derive from work nor prior contribution (pension for old age, permanent disability...).

#### *4. Unemployment subsidies and benefits.*

\* Unemployment benefits. This is the income received by the unemployed for a certain time, after having covered a certain contribution period by working.

\* Unemployment subsidies. This is income received by the unemployed after having exhausted their unemployment benefits for one of the following circumstances: having exhausted unemployment benefits of over one year, being over 45 years old and without family responsibilities; having exhausted the unemployment benefit and having family responsibilities; having left prison after a serving a sentence of over 6 months; returning from abroad after having worked there for over 6 months; being 52 years old or over having contributed to unemployment benefit a minimum of 6 years and fulfilling all the requirements (except of age) for obtaining a retirement pension from Social Security; having been a seasonal agricultural worker and receiving a subsidy or having been declared partially disabled as a consequence of a revision report due to an improvement in the previous situation of disability.

\* Aid or grants for attending a Professional Training occupational course.

\* Other aid or unemployment benefits. (Employment promotion services, aid for accepting employment outside of residence locality, community employment services and other services destined to promoting employment).

*5. Services per child in their care.* This is the income received as economic assignments for each child under the age of 18, or over and affected by a disability to a degree equal to or greater than 35 percent, while in the charge of the beneficiary. The beneficiaries may also be the disabled person, as long as they are orphaned of mother and father, as can children abandoned by their parents, irrespective of whether or not they are under a family welcome plan.

*6. Other regular subsidies and social services.* This is income received as regular subsidies or social services other than unemployment or dependant child pensions, subsidies and services (grants, family aid, temporary disability, salary maintenance in the case of illness or accident.).

*7. Rental income from property and capital.* This is income received as interest on cash-flow accounts, savings accounts, time deposits and loans granted; interest and dividends on shares, bonds, public debt, investment funds, ...; share of corporate profits and other return on liquid capital; corporate income paid to members of the board of directors; rental of dwellings, plots and premises; rental of assets, businesses, mines; income from intellectual or industrial property (when the author is not the recipient of the profits, since in this case it is considered as income from freelance work) and other capital or property income.

In the case of income for property and capital rental, the deductible expenses should be accounted for in a prorated manner. The following are considered deductible expenses: for IBI real estate rentals, the expenses for repair and

maintenance of the dwelling and the community expenses; for capital rentals the administration and custody of shares and other expenses (bank interest paid for loans in default, ...).

*8. Other regular income.* This is income received by the household without providing any work, such as regular transfers, transfers from other households (family contributions...), emigrant shipments, and other regular income other than from social services.

***Monthly level of net regular household income***

- Less than 360 €
- From 361 to 600 €
- From 601 to 900 €
- From 901 to 1.200 €
- From 1.201 to 1.800 €
- From 1.801 to 3.600 €
- From 3.600 to 6.000 €
- More than 6.000 €

**Definitions:**

The monthly amount of income is obtained adding all the sources of income (if there are more than one) and deducting the retentions for taxes, social contributions and other similar payments.

In other words, the sum of the regular income currently received by all household members should be accounted for, irrespective of whether or not they contribute it in part or completely to covering the household expenses.

In the calculation of this monthly income, the following will be taken into account:

- For income from work for others, the prorata of regular income that is not monthly should be added to the monthly amount (bonuses and other extraordinary income received regularly).
- For income from freelance work, the amount of deductible expenses should be discounted from the monthly amount of income.

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## **9 Dissemination of results**

The following types of publications will be available:

### **Results Preview**

Obtaining quarterly national results that provide statistical tables for the main sections of the individual questionnaires (adults and minors questionnaires) is

foreseen. They will be carried out in an electronic format with the usual software used in INE electronic publications and will be disseminated via the INE web page.

### **Standard publications**

They will provide statistical tables that cover the different sections investigated in the questionnaires. Autonomous tables will be included. Its dissemination will be carried out on paper format and electronic publication and will be incorporated into the INE web tabulation.

### **Public use files**

The final microdata files will be the base for attending to requests for information which require specific and detailed operations. The content of these files will comply with that established by the Public Statistical Function Law with respect to the confidentiality of individuals, and the regulations for the dissemination of INE microdata.