

# **Interview**

- 1) Ensure that the respondent has read and signed the consent sheet
- 2) Please complete the following information

### 1. Enter the ID of the interviewee

3 chiffres (c.f. liste au dos de la tablette).

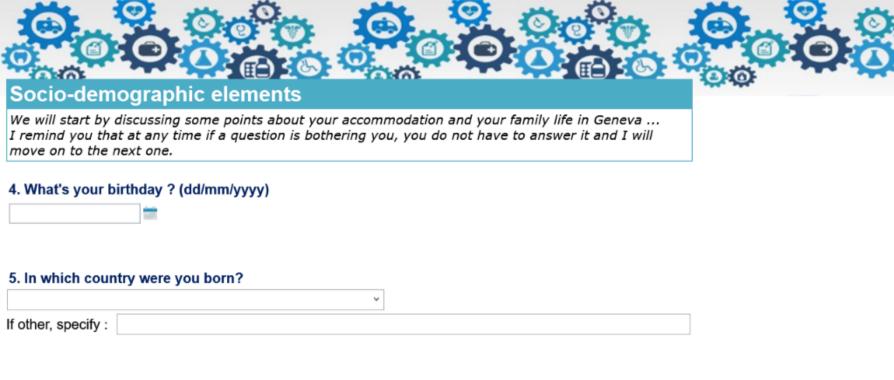
En cas de perte/oubli attribuez 999.

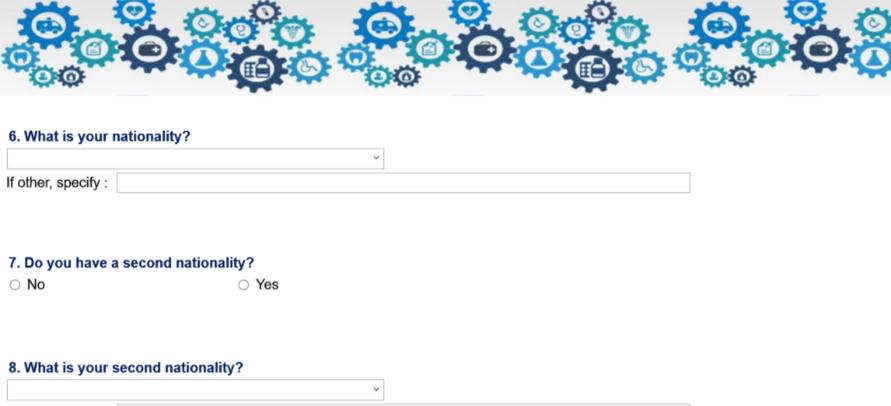
Reportez cet identifiant sur le feuillet d'entretien (en haut à droite) et sur la feuille de consentement

### 2. Indicate the date of the interview

3. Is the interviewee ...

A man A woman





If other, specify :

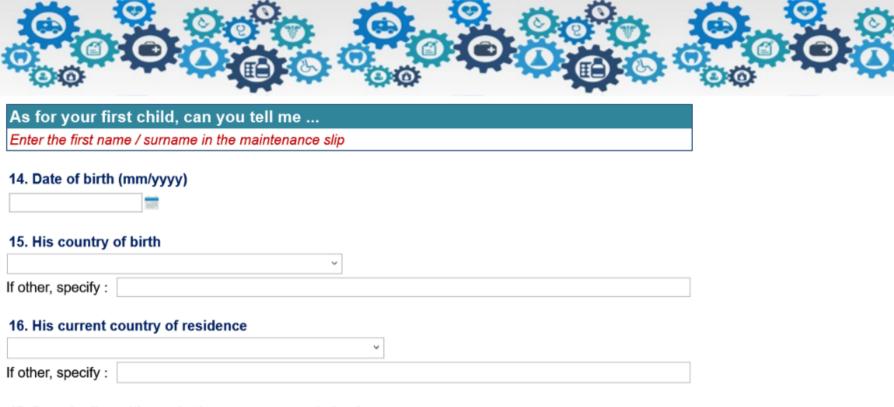


If other, specify:



13. How many children do you have ? (regardless of their current residence)

Any children of the partner are not considered here.

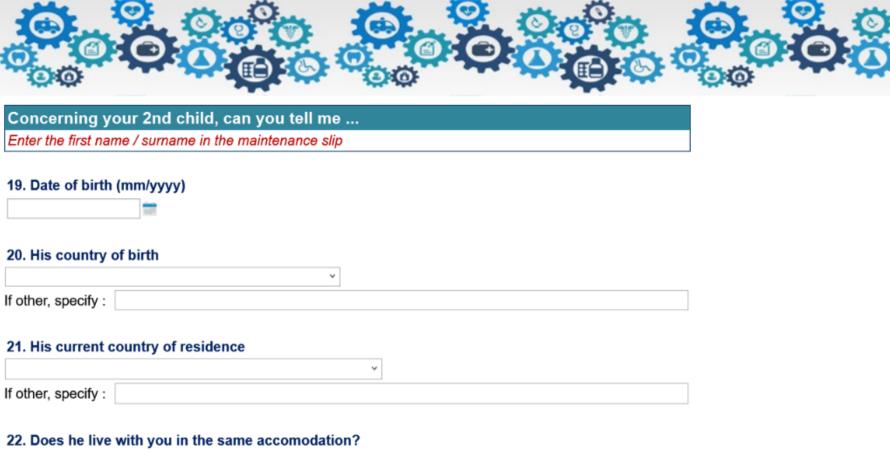


17. Does he live with you in the same accomodation?

○ No ○ Yes

18. Currently, is he attending school in Geneva?

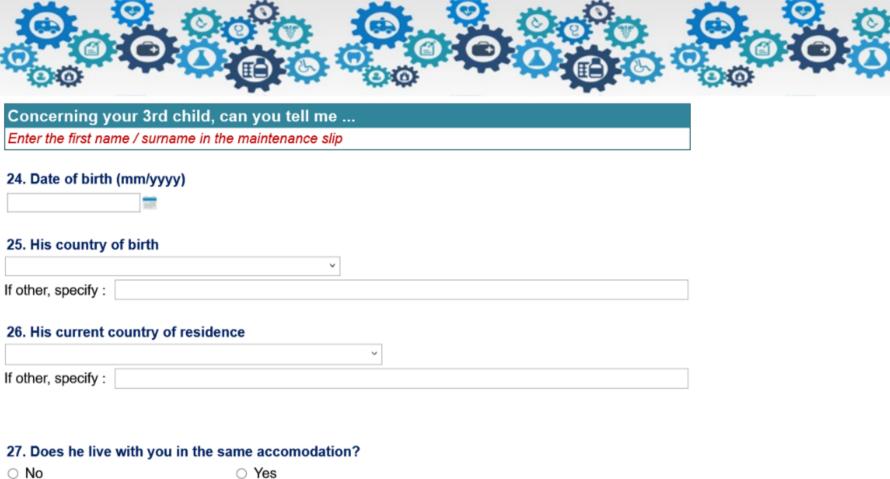
○ No ○ Yes



O No O Yes

23. Currently, is he attending school in Geneva?

O No O Yes



○ No

# 28. Currently, is he attending school in Geneva?

○ No ○ Yes



31. His current country of residence

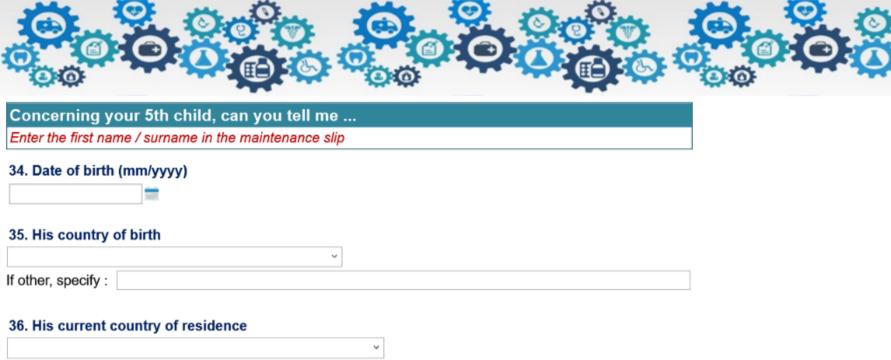
If other, specify:

32. Does he live with you in the same accomodation?

○ No ○ Yes

33. Currently, is he attending school in Geneva?

 $\bigcirc$  No ○ Yes



If other, specify:

37. Does he live with you in the same accomodation?

○ No ○ Yes

38. Currently, is he attending school in Geneva?

○ No ○ Yes



If other, specify:

41. His current country of residence If other, specify:

42. Does he live with you in the same accomodation? ○ No ○ Yes

43. Currently, is he attending school in Geneva?

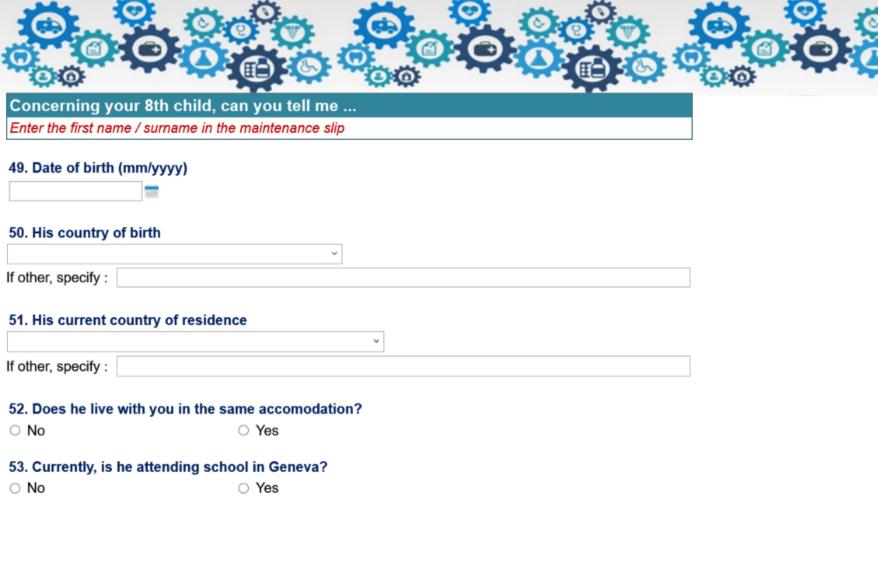
O No ○ Yes

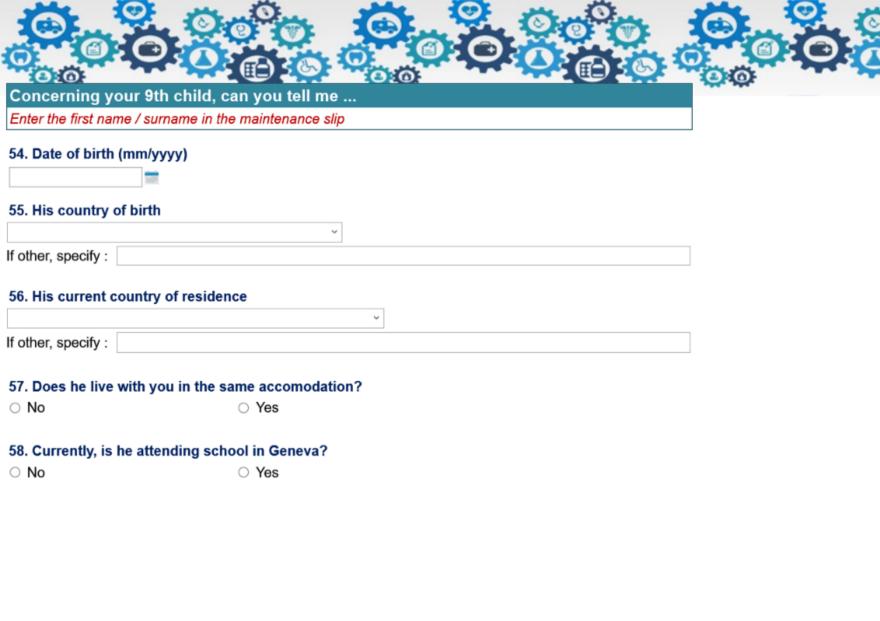


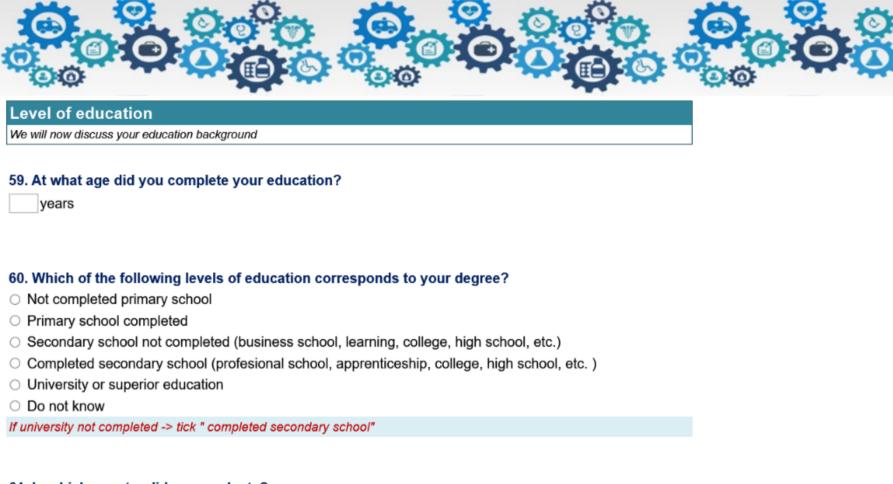
# ### Enter the first name / surname in the maintenance slip 44. Date of birth (mm/yyyy) 45. His country of birth If other, specify: 46. His current country of residence If other, specify: 47. Does he live with you in the same accomodation? No Yes

48. Currently, is he attending school in Geneva?

○ No ○ Yes







If other, specify :

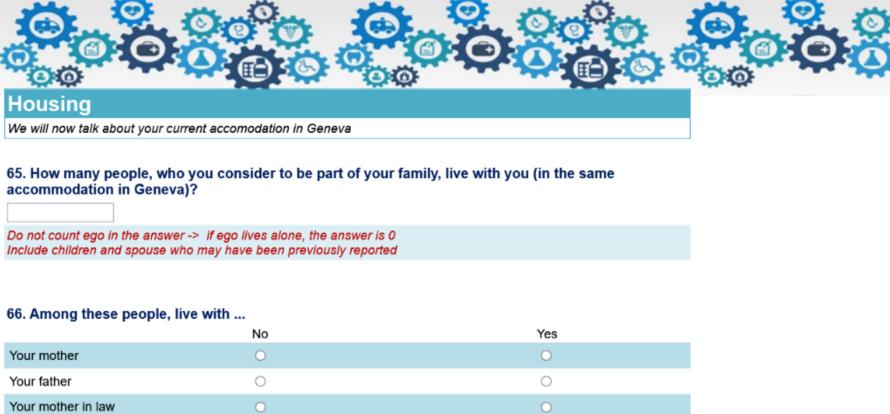


○ Yes ○ No

# 63. What was your last job in your country of origin?

# 64. What was your situation in this paid activity?

- Employed
- Independent(e)
- Employed in family business
- Other
- Do not know





67. How many years have you been living in your current home?		
years		
f for less than a year -> enter 0		
88. Your last move was either a choice or constrained by external factors (overpriced housing, limited		



- In average condition
- O In good condition
- New

71. How many rooms do you have (not including the kitchen, bathroom and toilet)?



# 72. Are you facing any of the following problems with your accommodation?

	No	Yes
Accommodation too small	0	0
Accommodation not heated well enough	0	0
Accommodation too hot (eg. under the roof during the summer)	0	0
Too much noise from neighbors or outside (road traffic, businesses, factories, etc.).	0	0
Pollution problems (related to traffic or industry, for example)	0	0

# 73. If 0 means 'not at all satisfied' and 10 'completely satisfied'? (Investigator), present the answer modalities A):

# What is your overall level of satisfaction with your current housing?

0 1 2 3 4 5 6 7 8 9 10



- accommodation provided by your employer (= at home or elsewhere, but included in the employment contract)
- O lease at your own name or that of your spouse

75. What is the total rent of the dwelling? (Distinguish what ego pays and the total amount)

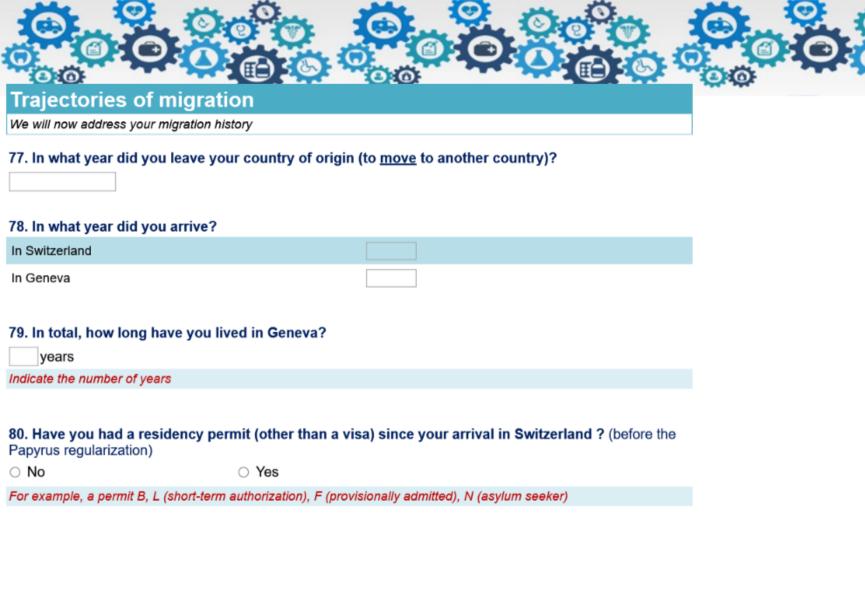
CHF

If ego does not know, indicate -1

76. How much do you pay per month for your rent (including charges)?

CHF

If ego does not know, indicate -1





# 81. For what reason(s) did you leave your country of origin (starting with the most important) (Investigator), present the terms and conditions ( B )

MAXIMUM 3 answers (4 if the respondent insists)		
Economic reasons	0	
Political, religious, ethnic, sexual orientation	0	Drag and drop your answers here, and them
Family conflicts	0	
To ensure a better future for my loved ones	0	
For health reasons	0	
To follow or join someone	0	
To study	0	
Other	0	



82. Have you returned to your country of origin since settling in Switzerland?

 $\bigcirc$  No  $\bigcirc$  Yes

83. How many times ?



 $\bigcirc$  No ○ Yes

Si le répondant a été régularisé avant février 2017, indiquez "oui" (même si cela ne s'appelait pas encore Papyrus)

# 85. At what stage is the regularization procedure?

- In preparation
- File submitted to the authorities
- Answer received

### 86. What is the answer?

Negative

Positive



# 87. What is the date of your B permit ? (mm/yyyy)

# 88. Enquêteur(trice): ego a-t-il(elle) obtenu son permis B au cours des 3 derniers mois ? (Faire le calcul au jour exact)

Aide-mémoire:

Aujourd'hui = XX.11.2017 -> date d'obtention du permis B >= XX.08.2017 ->oui

Aujourd'hui = XX.12.2017 -> date d'obtention du permis B >= XX.09.2017 ->oui

Aujourd'hui = XX.01.2018 -> date d'obtention du permis B >= XX.10.2017 ->oui

Aujourd'hui = XX.02.2018 -> date d'obtention du permis B >= XX.11.2017 ->oui

Aujourd'hui = XX.03.2018 -> date d'obtention du permis B >= XX.12.2017 ->oui

Aujourd'hui = XX.04.2018 -> date d'obtention du permis B >= XX.01.2018 ->oui

- Oui
- Non (obtention du permis B plus ancienne)



# Health

We will now discuss in more detail some points concerning your health

# 89. What is your size?

meters

If ego does not know and you are not in a public place, use the meter Estimate the height of shoes (soles, heels) and subtract this value from the answer

# 90. What is your weight?

kilos

If ego does not know and you are not in a public place, use the balance Weigh ego with the shoes without the jacket



I will tell you a series of health problems.

Can you tell me if they are of concern to you or if someone working in the medical field told you that you are suffering from these diseases (even if they do not bother you right now).



91.	Dis	ease	For how many years?	Do you take	medication?
	No	Yes		No	Yes
Asthma	0	0		0	0
Chronic lung disease (bronchitis_emphysema)	0	0		0	0
Heart disease (infarction or angina, heart failure)	0	0		0	0
High blood pressure (hypertension)	0	0		0	0
Stroke	0	0		0	0
Joint pain (osteoarthritis, arthritis)	0	0		0	0
Chronic back pain and lumbar region	0	0		0	0
Chronic pain in the neck	0	0		$\circ$	0
Diabetes	0	0		0	0
High cholesterol	0	0		0	0
Osteoporosis	0	0		0	0
Allergy (hay fever, conjunctivitis, eczema)	0	0		0	0
Chronic liver disease	0	0		0	0
Chronic kidney disease (do not include urinary tract infection / cystitis)	0	0		0	0
Depression or anxiety	0	0		0	0



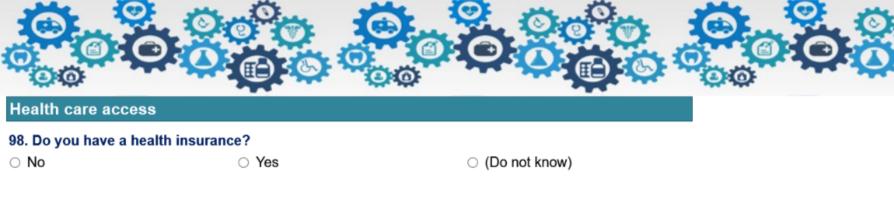
93. On average, how many days per week?

days

The answer must be between 1 and 7



				•	
<b>Quality of Sleep</b>					
94. During the last month, how many hours did you <u>sleep</u> on average per night?  (This number may be different from the number of hours you spent in bed)  hours per night					
95. During the last	month, how do you ev	aluate the overall qu	ality of your sleep?		
Very good	Fairly good	Bad ○	Very bad ○		
96. During the past month, how many times did you take medications to sleep? (prescribed by your doctor or purchased without a prescription)					
Never	Less than once a week	1-2 times a week	3-4 times a week		
0	0	0	0		
97. During the past month, how many times did you fall asleep unintentionally during the day?					
Never	Less than once a week	1-2 times a week	3-4 times a week		
0	0	0	0		



99. What is the monthly premium for your health insurance? (how much do you pay per month for this insurance?)

CHF

Si ego ne sait pas, indiquez -1



- O 500 CHF
- O 1000 CHF
- O 1500 CHF
- O 2000 CHF
- O 2500 CHF
- O (Do not know)

# 101. Are you currently receiving subsidies for your basic health insurance premiums (LAMal)?

 $\bigcirc$  No

○ Yes

O (Do not know)



CHF

Si ego ne sait pas, indiquez -1



104. Child 1:	What is the amount of his health insurance of	deductible (basic LAMal)	each month?
O CHF			
○ 100 CHF			
O 200 CHF			
○ 300 CHF			
○ 400 CHF			
○ 500 CHF			
○ 1000 CHF			
O 1500 CHF			
O 2000 CHF			

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF)
If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

○ 2500 CHF○ Do not know

105. Child 1: Are you currently receiving subsidies for basic health insurance premiums (LAMal)?

○ No	○ Yes	<ul> <li>Do not know</li> </ul>



107. Child 2: What is the monthly premium for his health insurance?

CHF

Si ego ne sait pas, indiquez -1



108.	Child 2:	What is the	amount of his	/ her annual	health insurance	deductible	(basic LAMal)?
------	----------	-------------	---------------	--------------	------------------	------------	----------------

- O CHF
- 100 CHF
- O 200 CHF
- O 300 CHF
- O 400 CHF
- O 500 CHF
- O 1000 CHF
- O 1500 CHF
- O 2000 CHF
- O 2500 CHF
- O Do not know

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF) If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

### 109. Child 2: Are you currently receiving subsidies for basic health insurance premiums (LAMal)?

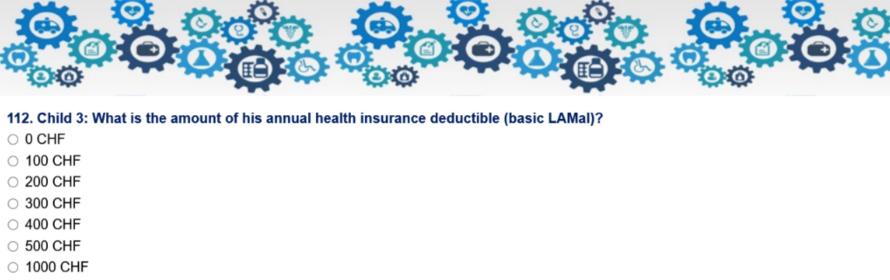
O No

○ Yes

O Do not know



111. Child 3: What is the monthly premium for her health insurance? CHF



500 CHF
1000 CHF
1500 CHF
2000 CHF
2500 CHF

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF)
If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

Do not know

113. Child 3: Do you currently receive subsidies for basic health insurance premiums (LAMal)?

O No O Yes O Do not know



445 Child 4: What is the manthly mannism for her hardth income

115. Child 4: What is the monthly premium for her health insurance?

CHF



# 116. Child 4: What is the amount of his annual health insurance deductible (basic LAMal)? 0 CHF 100 CHF 300 CHF 400 CHF 1000 CHF 1000 CHF 2000 CHF

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF)
If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

2500 CHFDo not know

117. Child 4: Are you currently receiving subsidies for basic health insurance premiums (LAMal)?

○ No ○ Yes ○ Do not know



119. Child 5: What is the monthly premium for her health insurance?

CHF



120. Child 5: What is the amount of his annual health insurance deductible (basic LAMal)?	
O O CHF	
○ 100 CHF	
○ 200 CHF	
○ 300 CHF	
○ 400 CHF	
○ 500 CHF	
○ 1000 CHF	
○ 1500 CHF	
○ 2000 CHF	

2500 CHFDo not know

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF)
If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

### 121. Child 5: Are you currently receiving subsidies for basic health insurance premiums (LAMal)?

O No O Yes O Do not know



123. Child 6: What is the monthly premium for her health insurance?

CHF



### 124. Child 6: What is the amount of his annual health insurance deductible (basic LAMal)?

- O 0 CHF
- 100 CHF
- 200 CHF
- 300 CHF
- 400 CHF
- 500 CHF
- O 1000 CHF
- O 1500 CHF
- 2000 CHF
- O 2500 CHF
- Do not know

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF)

If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

### 125. Child 6: Are you currently receiving subsidies for basic health insurance premiums (LAMal)?

 $\bigcirc$  No

○ Yes

Do not know



127. Child 7: What is the monthly premium for her health insurance?

CHF



128. Child 7: What is	s the amount of his annual health insurance dedu	ıctible (basic LAMal)?
O 0 CHF		
○ 100 CHF		
○ 200 CHF		
○ 300 CHF		
○ 400 CHF		
○ 500 CHF		
○ 1000 CHF		
O 1500 CHF		

2000 CHF2500 CHF

Do not know

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF)
If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

129. Child 7: Are you currently receiving subsidies for basic health insurance premiums (LAMal)?

○ No ○ Yes ○ Do not know



131. Child 8: What is the monthly premium for her health insurance?

CHF



### 132. Child 8: What is the amount of his annual health insurance deductible (basic LAMal)?

- O CHF
- 100 CHF
- 200 CHF
- 300 CHF
- 400 CHF
- O 500 CHF
- O 1000 CHF
- O 1500 CHF
- O 2000 CHF
- O 2500 CHF
- Do not know

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF)
If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

### 133. Child 8: Are you currently receiving subsidies for basic health insurance premiums (LAMal)?

 $\bigcirc$  No

○ Yes

Do not know



135. Child 9: What is the monthly premium for her health insurance?

CHF



136. Child 9:	What is the amount of h	is annual health i	nsurance deductil	ole (basic LAMal)?
O 0 CHF				
○ 100 CHF				
O 200 CHF				
○ 300 CHF				
○ 400 CHF				
○ 500 CHF				
O 1000 CHF				
O 1500 CHF				

2000 CHF2500 CHF

O Do not know

If the child is a minor, deductibles may be: 0, 100, 200, 300, 500 (CHF)
If the child is of age, the deductibles may be 300, 500, 1000, 1500, 2500 (CHF)

### 137. Child 9: Are you currently receiving subsidies for basic health insurance premiums (LAMal)?

○ No ○ Yes ○ Do not know



## Basic illness insurance (LAmal) of other members of the household

138. Does your	spouse have basic health insurance	(LAmal)?
$\circ$ No	○ Yes	O (Do not know)
139. Spouse: W	/hat is the amount of his / her monthl	y health insurance premium?
	CHF per month	
If ego does not kn	ow, indicate -1	



### 140. Spouse: What is the annual amount of the insurance deductible?

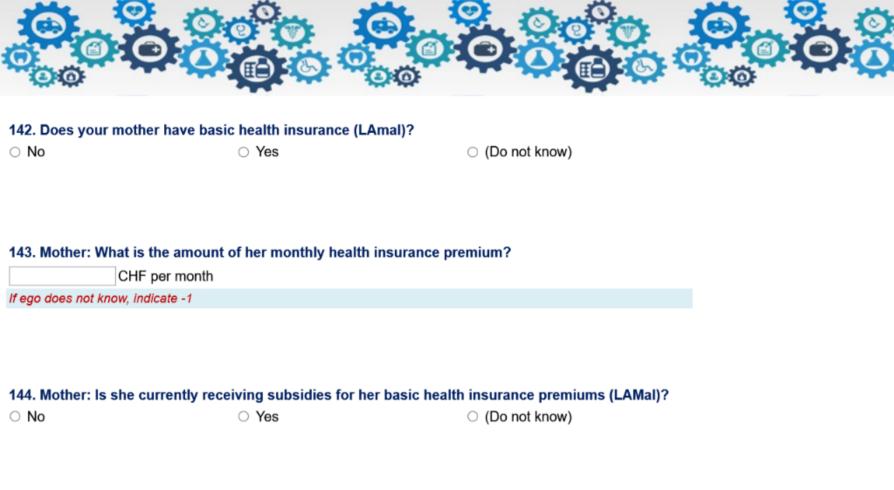
- 300 CHF
- O 500 CHF
- O 1000 CHF
- O 1500 CHF
- O 2000 CHF
- O 2500 CHF
- O (Do not know)

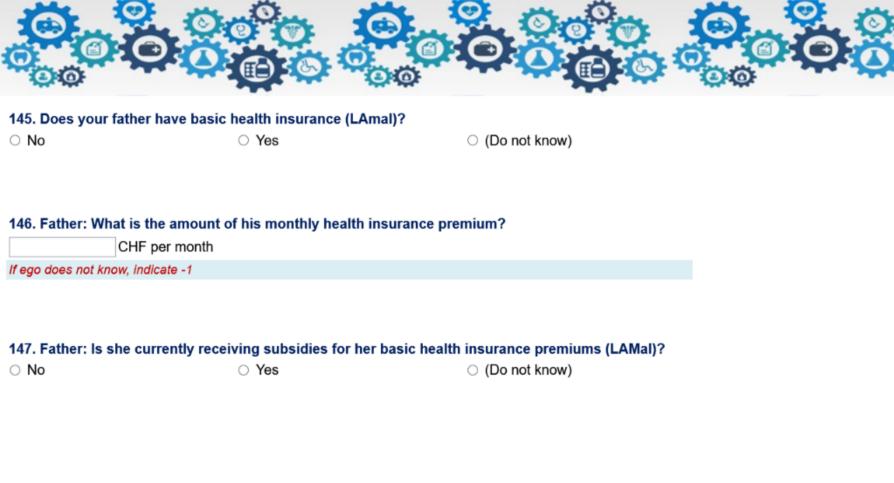
### 141. Spouse: Is he currently receiving subsidies for his basic health insurance premiums (LAMal)?

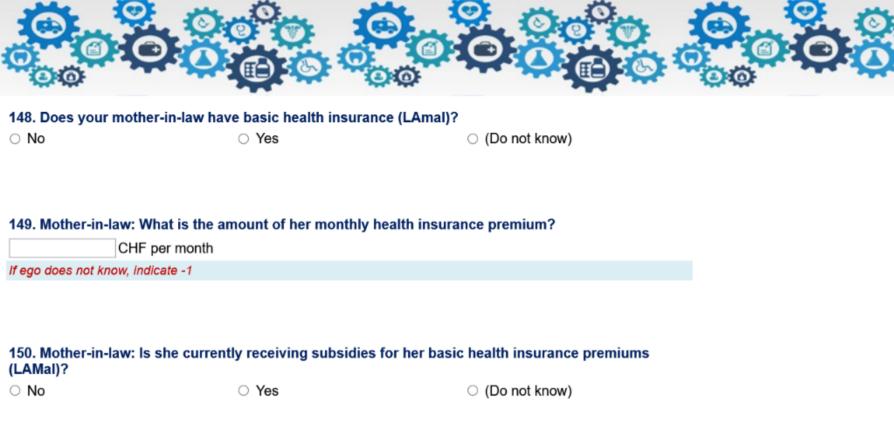
 $\bigcirc$  No

○ Yes

O (Do not know)



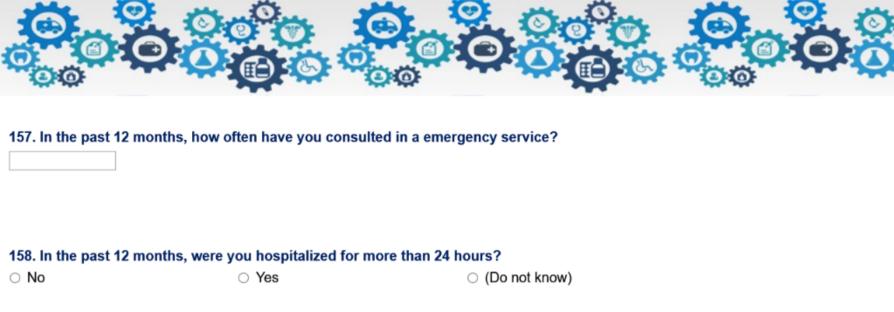








the state		
Access to care, continued		
154. Do you have a family docto	or?	
(That is, a doctor to whom you can g	o for most of your health problems)	
○ No	○ Yes	
155. Is it a doctor		
<ul> <li>private, outside the hospital</li> </ul>	<ul> <li>at CAMSCO (Hugo) or HUG</li> </ul>	O (Do not know)
	, how often have you visited a doct	tor (general practitioner, specialist,
psychiatrist or gynecologist), not i	ncluding a dentist?	



159. How many times ?



160. During the past 6 months, did you have an accident that prevented you from working?

○ No ○ Yes

### 161. In what context?

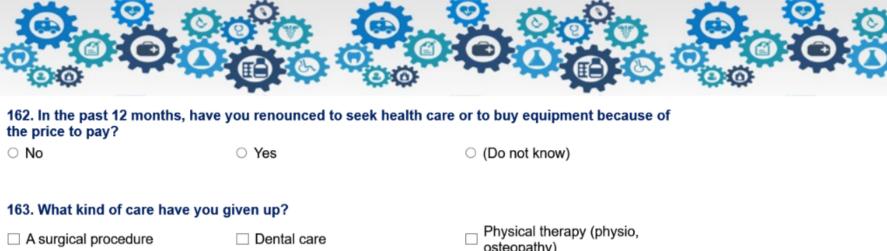
At work

O At home

O During your leisure time, sport

Outside your home

Other



○ No	○ Yes	○ (Do not know)
163. What kind of care have you g	iven up?	
☐ A surgical procedure	☐ Dental care	Physical therapy (physio, osteopathy)
Medical care with a general practitioner	Radiology (x-ray, scanner, ultrsound)	Buyng glasses, hearing aid device, crutches, etc.
☐ Medical care with a gynecologist	Buying medicine / prescription drugs	☐ Home care with nurses
Medical care with a specialist (cardiologist, pneumologist, etc.)	☐ Rehabilitation at hospital	☐ Other
f other, specify :		
Make sure that the motivation to give ur	n this care has been financial	

Make sure that the motivation to give up this care has been financial.

MULTIPLE ANSWERS POSSIBLE



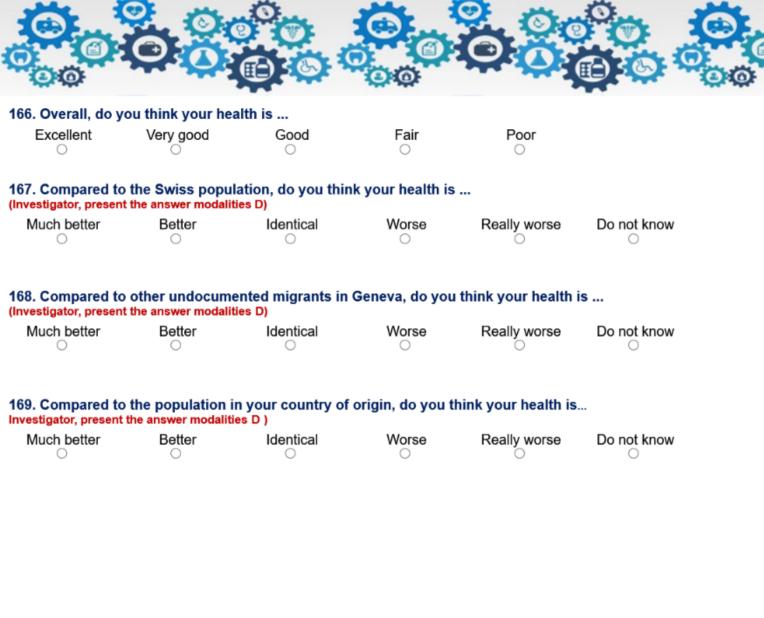
# 164. In the past $\underline{\text{two weeks}}$ , how often have you been disturbed by the following problems? (Investigator, present the answer modalities C )

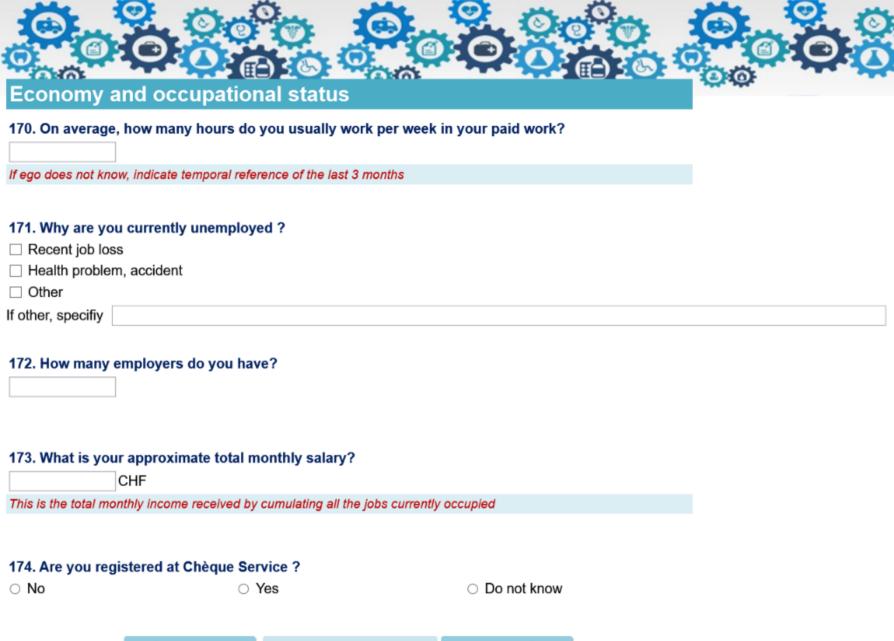
	Never	Rarely	Often	Almost every day
Little interest or pleasure in doing things	0	0	0	0
You feel sad, depressed or desperate	$\circ$	0	$\circ$	$\circ$
Having difficulty falling asleep or staying asleep, or sleeping too much	0	0	0	0
Feeling tired or having little energy	$\circ$	0	$\circ$	$\circ$
Have little appetite or overeating	0	0	0	0
Having low self-esteem	0	0	0	0
Having difficulty concentrating	0	0	0	0
Your loved ones tell you that you are particularly agitated or slowed down	0	0	0	0
You thought you'd hurt yourself or you'd be better off dead	0	0	0	0



165. In the past  $\underline{two}$  weeks, how often have you been disturbed by the following problems? (Investigator, present the answer modalities C )

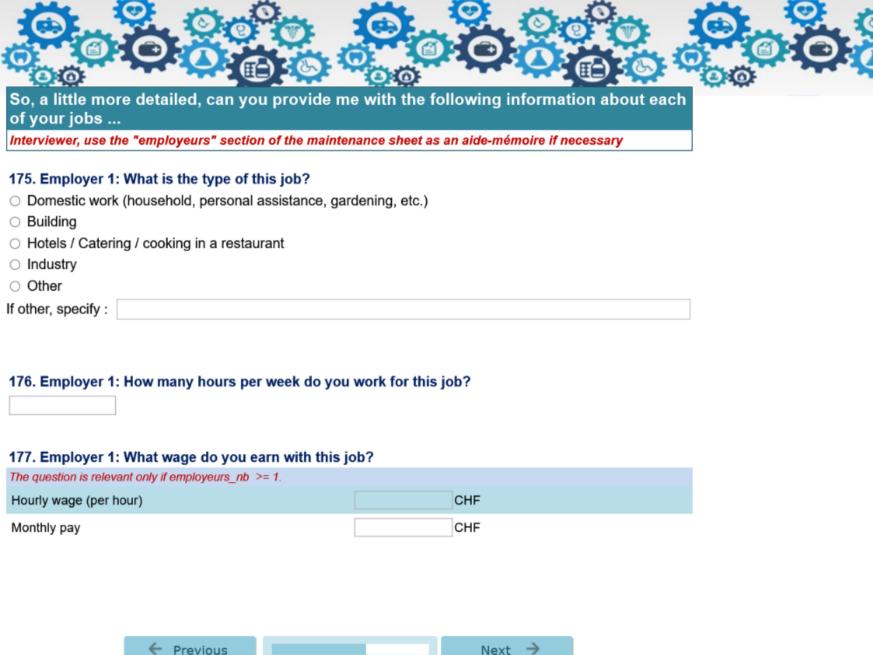
	Never	Rarely	Often	Almost every day
Feelings of nervousness, anxiety or tension	0	0	0	0
Being unable to control your concerns	$\circ$	0	0	0
Worrying about everything	0	0	0	0
Difficulty to relax	0	0	0	0
Restlessness such that it is difficult to remain quiet	0	0	0	0
Becoming easily angry or irritable	0	0	0	0
Be afraid that something terrible may happen	0	0	0	0

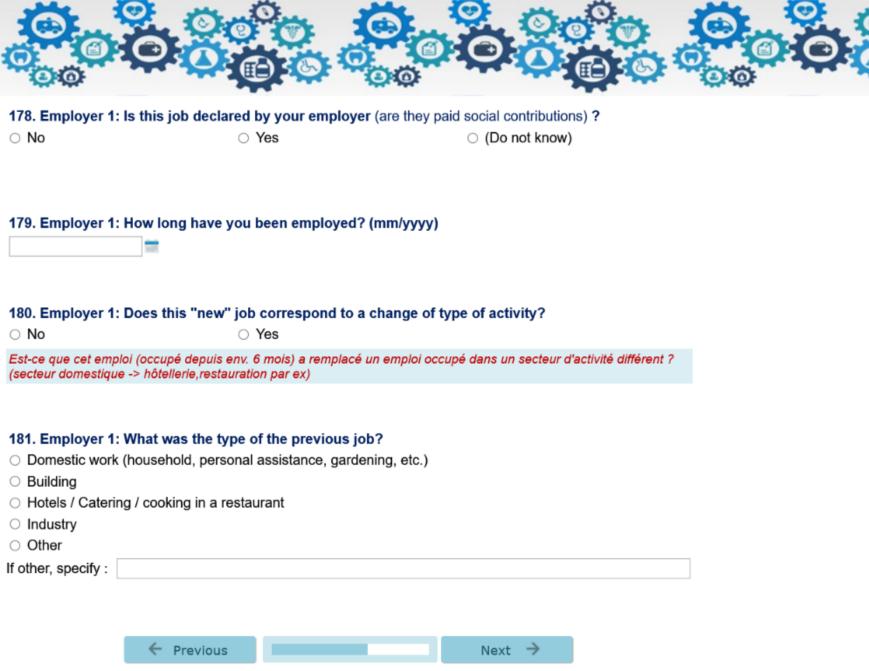


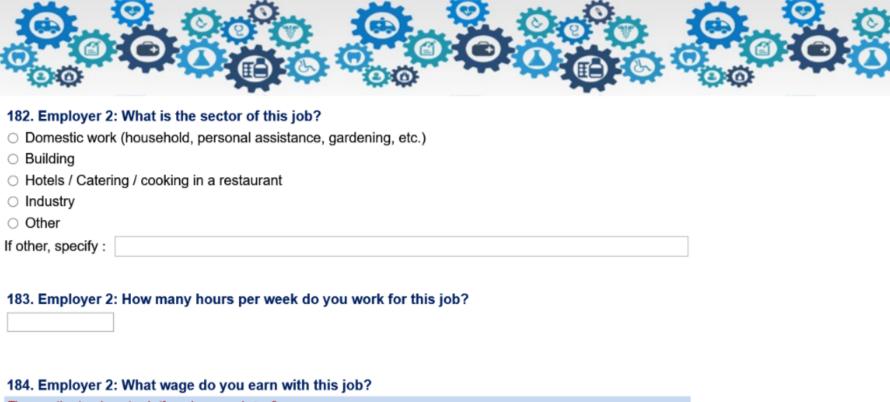


Previous

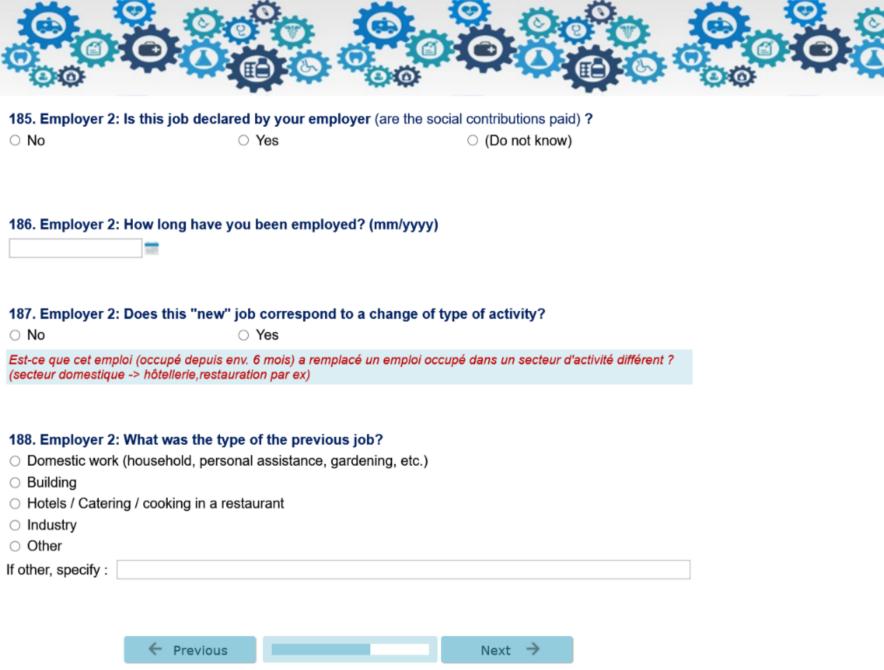
Next







The question is relevant only if employeurs_nb >= 2.	
Hourly wage (per hour)	CHF
Monthly pay	CHF



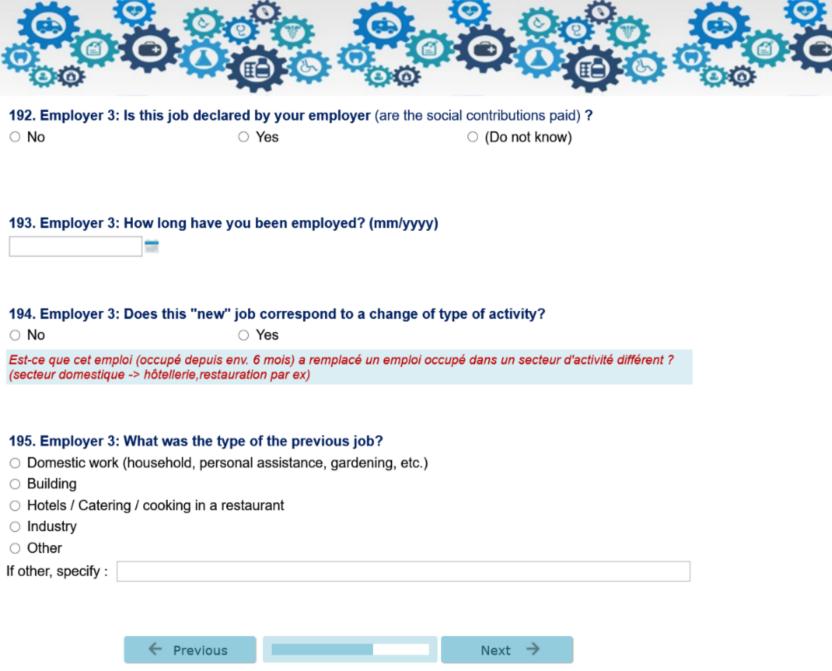


The question is relevant only if employeurs\_nb >= 3.

Hourly wage (per hour)

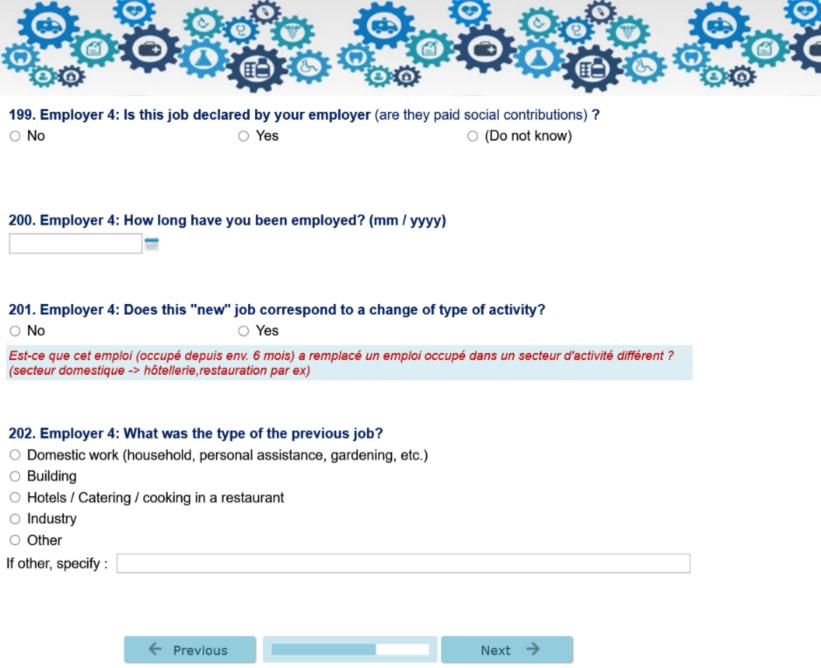
CHF

Monthly pay



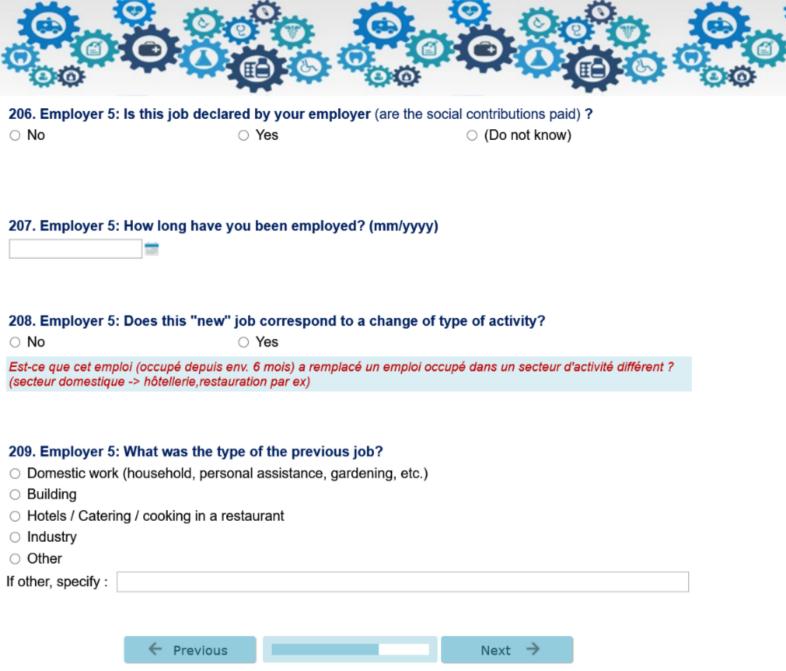


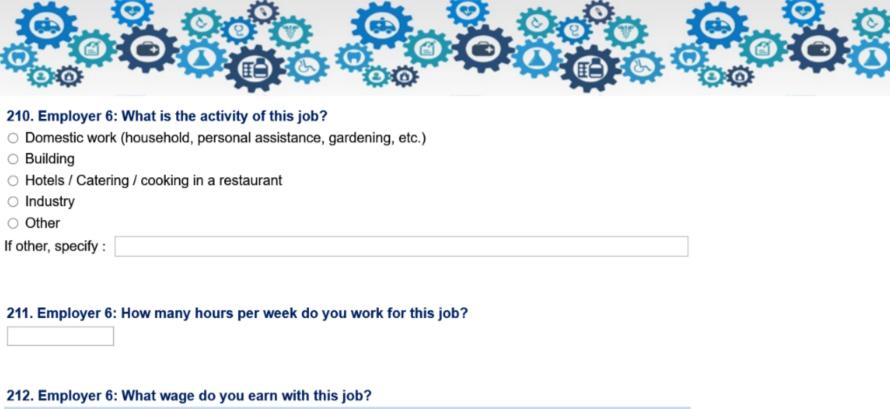
	•				
The question is relevant only if employeurs_nb >= 4.					
Hourly wage (per hour)	CHF				
Monthly pay	CHF				





The question is relevant only	if employeurs_nb >= 5	Ĺ	
Hourly wage (per hour)		CHF	
Monthly pay		CHF	



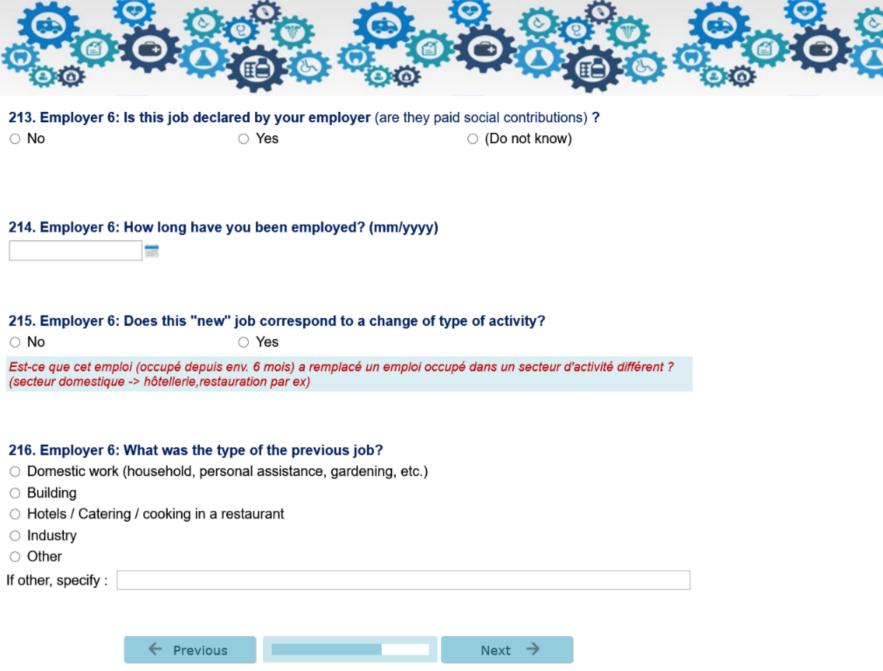


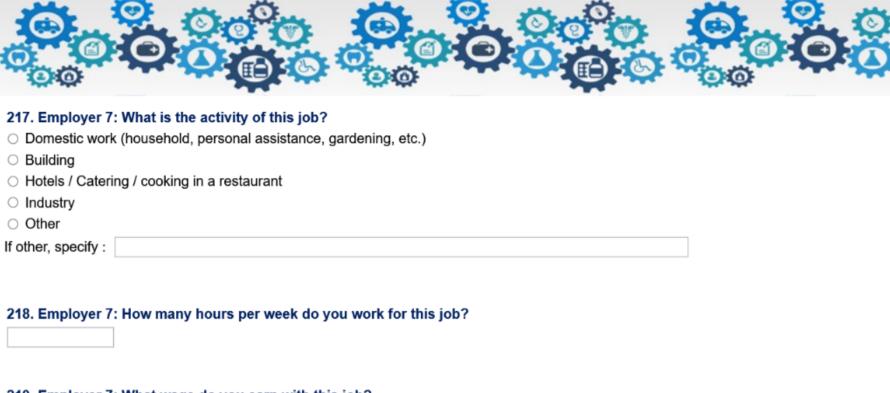
The question is relevant only if employeurs\_nb >= 6.

Hourly wage (per hour)

CHF

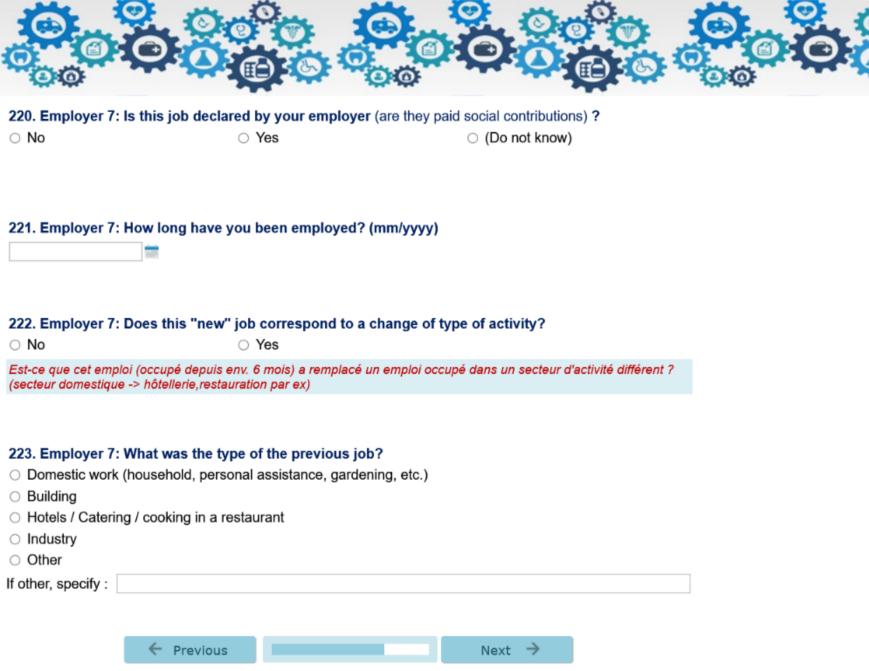
CHF

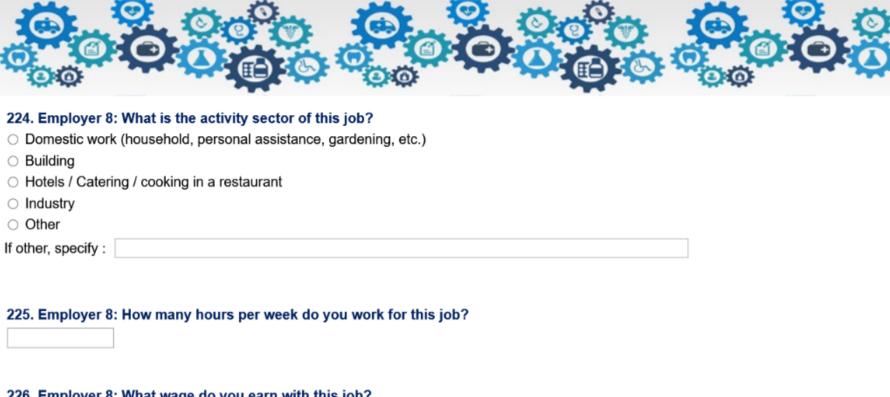




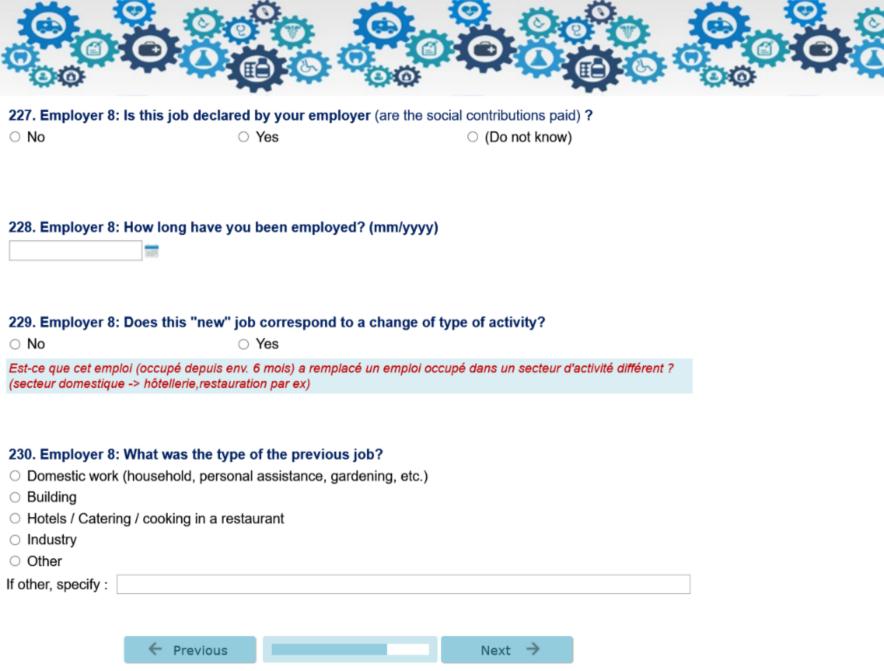
#### 219. Employer 7: What wage do you earn with this job?

	210. Employer 7. What wage do you carr with this job.						
The question is relevant only if employeurs_nb >= 7.							
	Hourly wage (per hour)	CHF					
	Monthly pay	CHF					





220. Employer 6. What wage do you earn with this job?							
The question is relevant only if employeurs_nb >= 8.							
Hourly wage (per hour)	CHF						
Monthly pay	CHF						



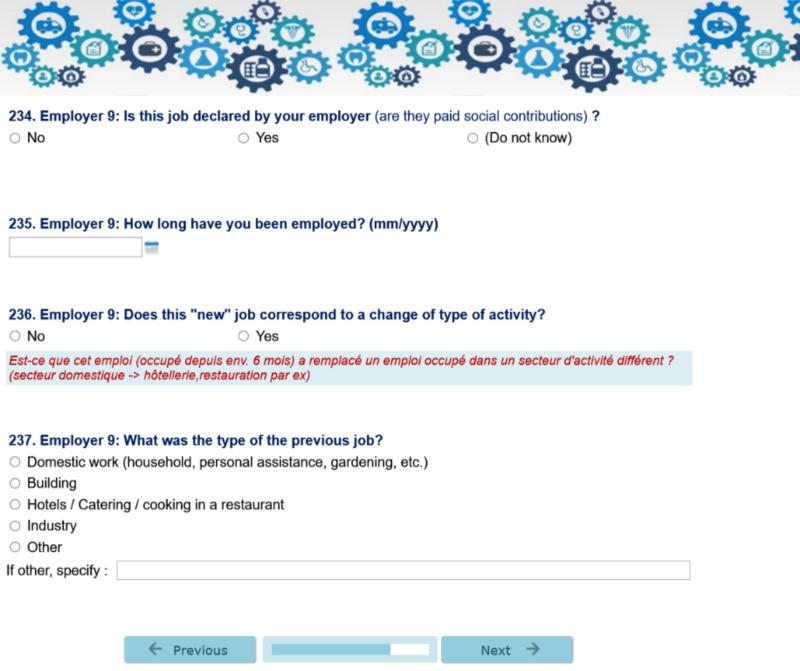


The question is relevant only if employeurs\_nb >= 9.

Hourly wage (per hour)

CHF

CHF





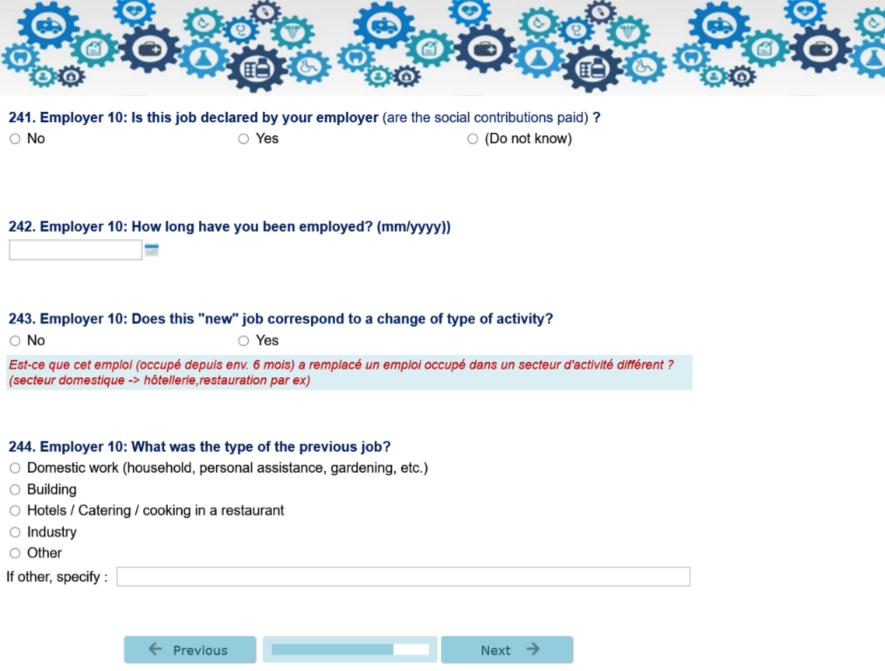
#### 240. Employer 10: What wage do you earn with this job?

The question is relevant only if employeurs\_nb >= 10.

Hourly wage (per hour)

CHF

CHF



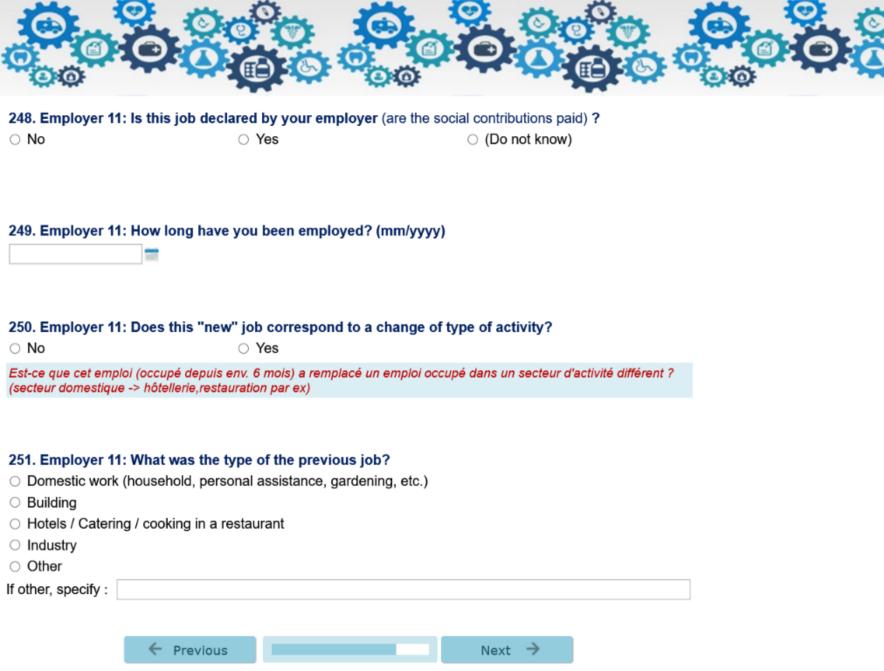


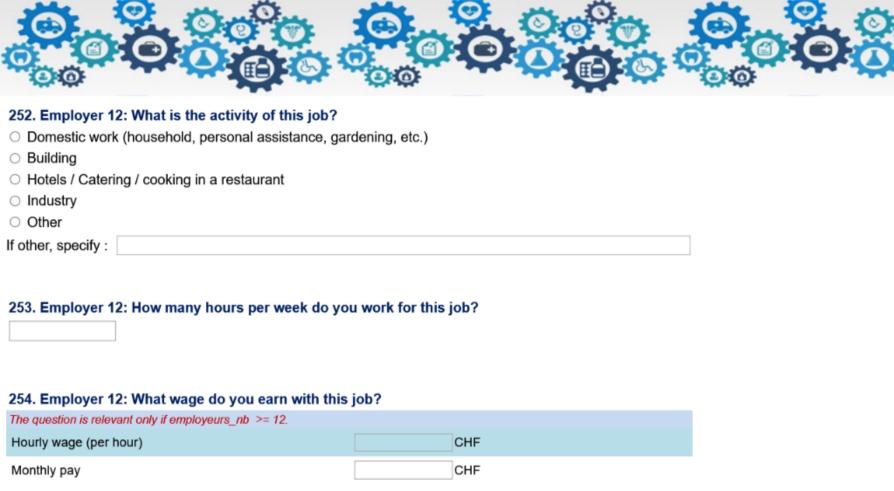
The question is relevant only if employeurs\_nb >= 11.

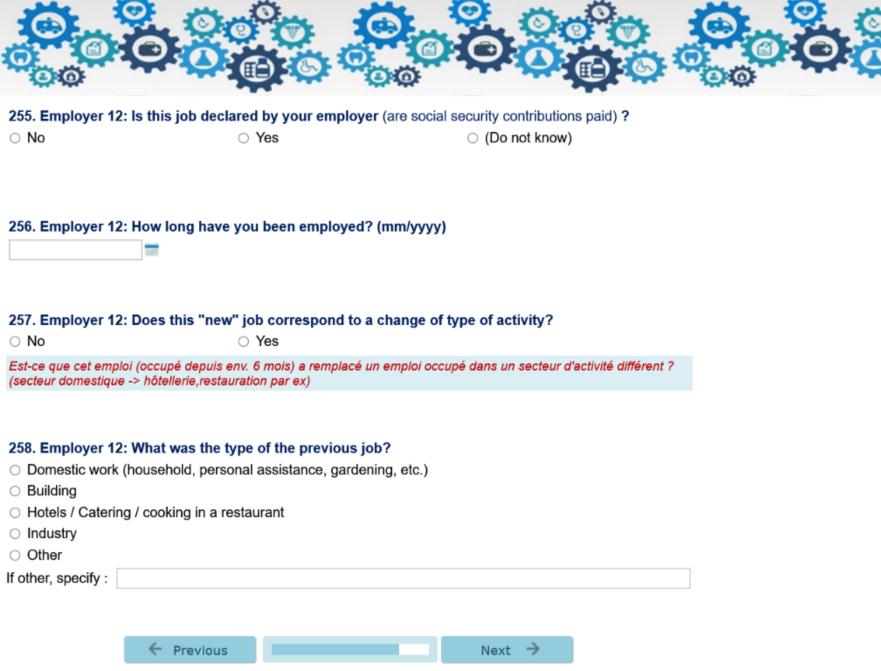
Hourly wage (per hour)

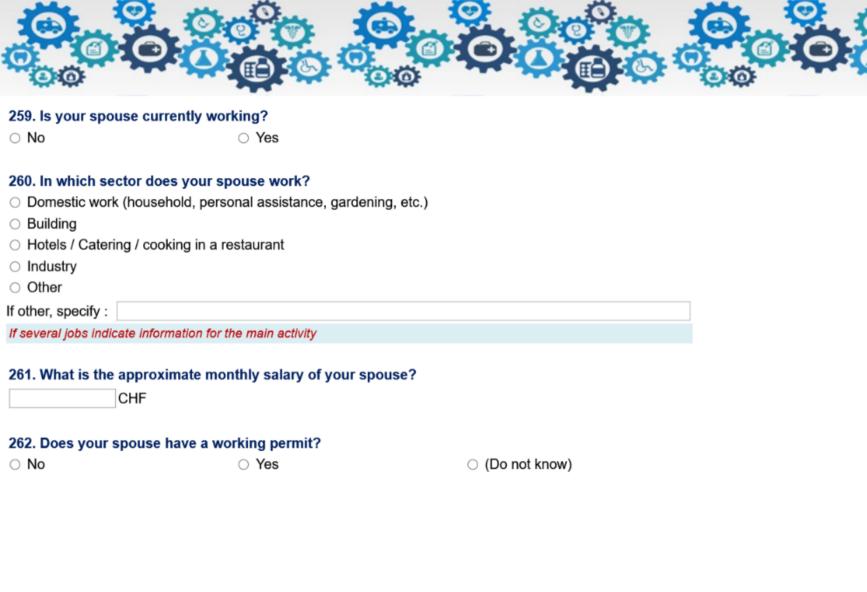
CHF

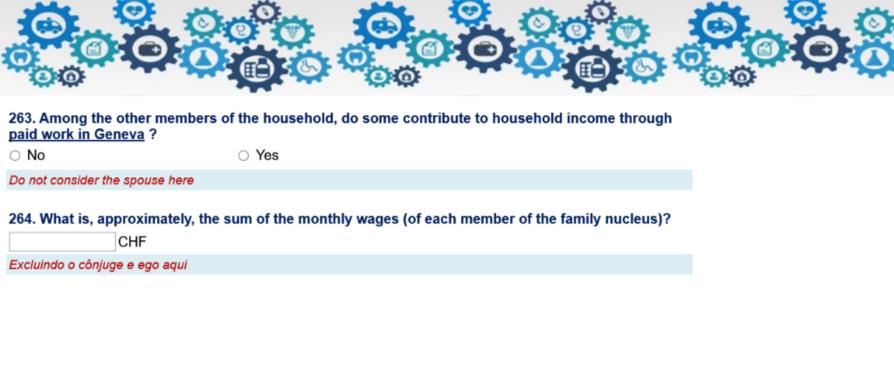
CHF







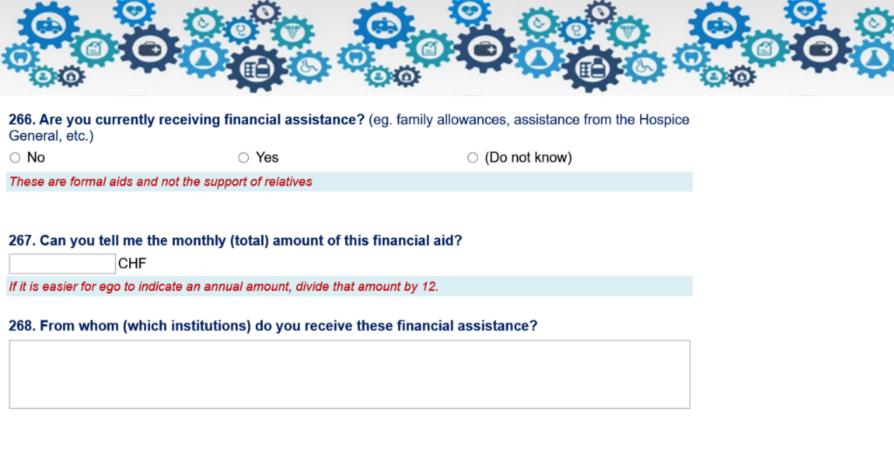


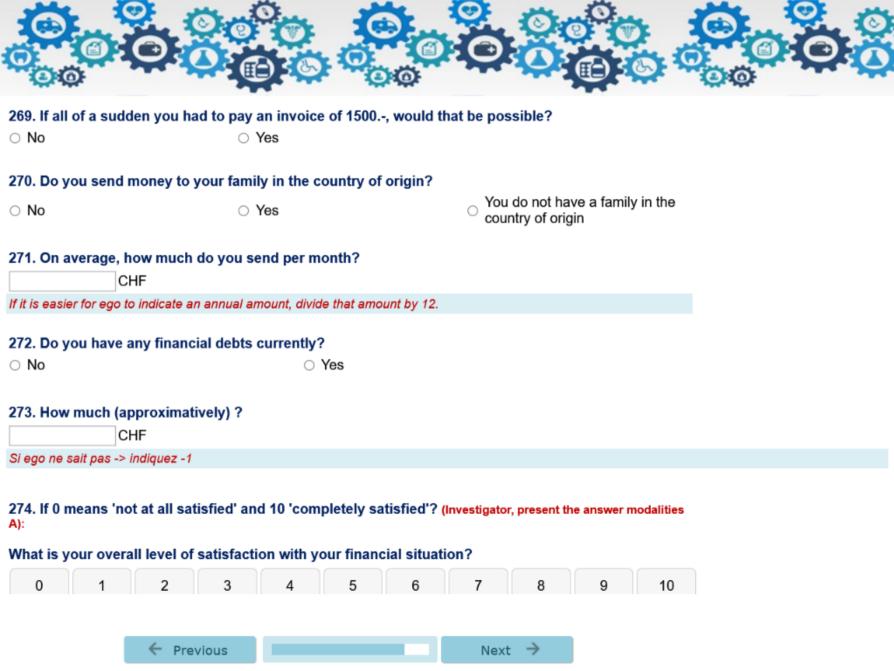


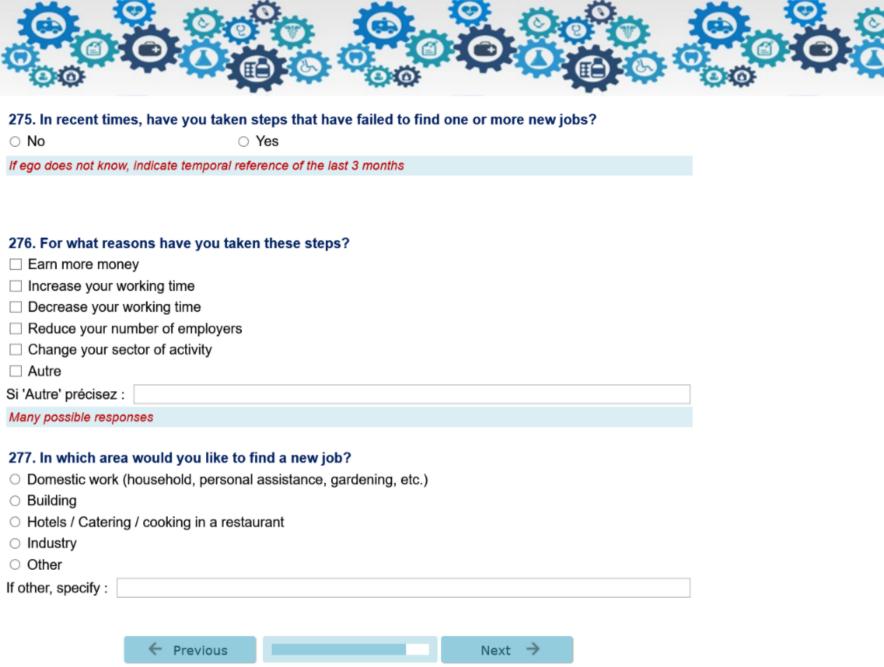
265. The total monthly salary of the family is therefore approximately ...

CHF

Make a balance sheet by summing the income of ego, his spouse and other family members







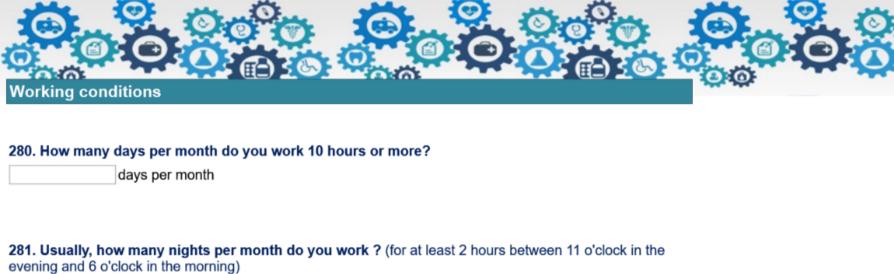


278. Did you lose a job because of your regularization?

○ No ○ Yes

# 279. If you were to lose your current position, would you find it easy or difficult to find a new comparable position?

Very easily Fairly easily Rather difficult Very difficult



Next →

nights per month

← Previous



#### 282. In the past 12 months, did you ever work while you were sick?

I was sick and I continued to over I was sick and I stopped working I was not sick

#### 283. For how many days did it happen?

days per year



#### 284. Please indicate each time, using the following scale (Investigator), present the answer modalities ( C):

#### How often your work involves

	Never	Rarely	Often	Almost all the time
Painful or tiring positions	0	0	0	0
Lifting or moving heavy loads	0	0	0	0
To remain standing	0	0	0	0
Repetitive movements of the hand or arm	0	0	0	0



#### 285. Please indicate each time, using the following scale (Investigator, present the answer modalities C):

#### How often you are exposed to your work at:

	Never	Rarely	Often	Almost all the time
Vibrations caused by hand tools, machines, etc.	0	0	0	0
Noises so strong that you need to raise your voice to talk to people	0	0	0	0
High temperatures that make you sweat even if you do not work	0	0	0	0
Low temperatures either indoors or outdoors	$\circ$	0	0	$\circ$
Harmful or toxic products (or substances): dust, industrial smoke, microbes, chemicals, etc.	0	0	0	0
Passive smoking: Inhalation of cigarette smoke from nearby smokers	0	0	0	0



#### 286. Does your work affect your health? (indicate the best answer)

□ No

☐ Yes, mostly negative

☐ (Do not know)



287. In relation to your work, how often do the following statements apply to your personal situation? If 0 means 'never' and 6 'almost every day'.

	0 Never	1	2	3	4	5	6 Almost every day
You feel emotionally exhausted by your work	0	0	0	0	0	0	0
You feel very annoyed at the end of your working day	0	0	0	0	0	0	0
You feel tired when you get up in the morning and you have to face another day of work	0	0	0	0	0	0	0
Working with people throughout the day requires a lot of effort	0	$\circ$	0	0	0	0	0
You feel you may breakdown because of your work	0	0	0	0	0	0	0
You feel frustrated by your work	0	0	0	0	0	0	0
You feel that you are working 'too hard' in your work	0	0	0	0	0	0	0
Working in direct contact with people will stress you too	0	0	0	0	0	0	0
Your work exhausts you	0	0	0	0	0	0	0



288. Can you tell me on a scale from 0 'not at all satisfied' to 10 'completely satisfied' (Investigator, present the answer modalities A):

#### Your satisfaction with each of the following?

	0	1	2	3	4	5	6	7	8	9	10
Your working conditions	0	0	0	0	0	0	0	0	0	0	0
The income you earn from your work	$\circ$	$\circ$	$\circ$	$\circ$	0	0	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$
The atmosphere with co-workers	0	0	0	0	0	0	0	0	0	0	0
The interest of tasks	$\circ$	0	0	0	0	0	0	0	0	$\circ$	$\circ$
Your amount of work	0	0	0	0	0	0	0	0	0	0	0



### 289. In the past 12 months, have you been the subject of ...

Tick a maximum of 4 boxes.					
	No	Yes, at work or in the labor market context	Yes, on the street or in a public place	Yes, in the hospital or at your doctor	Yes, in another place
discrimination related to your age					
discrimination related to your gender					
discrimination related to your nationality, ethnic origin or color					
discrimination linked to disability					
verbal abuse					
Threats and Humiliating Behaviors					
physical violence					
intimidation, harassment, mobbing					
sexual harassment					



0 1 2 3 4 5 6 7 8 9 10

291. To what extent are you satisfied with living together in your household, if 0 is "not at all satisfied" and 10 "completely satisfied"? (Investigator, present the answer modalities A)

0 1 2 3 4 5 6 7 8 9 10

292. How satisfied are you with living alone in your household, if 0 is "not at all satisfied" and 10 "completely satisfied"? (Investigator, present the answer modalities A)

0 1 2 3 4 5 6 7 8 9 10



294. How many people are close enough for you to rely on them for serious personal problems?

○ Yes

 $\circ$  0

 $\bigcirc$  No

- 0 1-2
- 0 3-4
- 0 5-6
- 7 or more



95. Is there anybody among your loved ones who can really talk to you at any time	e about very
personal problems?	

No	○ Yes, one person	0	Yes, several people

#### 296. In general, you would say that you feel ...

Rather connected to Very connected to other Very lonely Rather lonely other people people

#### 297. How often do you participate in the activities of a society, a sports club, a political party, a cultural association, a religious community or other groups?

About 1 to 3 Almost every About once a A few times a More rarely Never day week times a month year 0



#### 298. In your opinion, what is your level of oral proficiency in French?

Very good Good Sufficient Bad Very bad (Do not know)

#### 299. In your opinion, what is your level of mastery of written French?

Very good Good Sufficient Bad Very bad (Do not know)



## Satisfaction with quality of life

Regarding your current life ...

300. In general, if 0 means 'not at all satisfied' and 10 'completely satisfied'? (Investigator, present the answer modalities A):

How satisfied are you with your life?

0 1 2 3 4 5 6 7 8 9 10



Much better Better Identical Worse Really worse (Do not know)



#### End of interview

The interview is now over. We thank you for your participation which is very valuable ...

#### 304. Enquêteur(trice): A quel groupe de l'étude le répondant correspond-il ?

- O Contrôle (aucun dossier constitué / critères incomplets / dossier refusé)
- Indéterminé (dossier en constitution auprès d'une association / dossier transmis aux autorités, en attente de réponse)
- O Papyrus (obtention d'un permis B via l'opération Papyrus au cours des 3 derniers mois)
- Mandat (obtention d'un permis B AVANT la période des 3 derniers mois)

INVESTIGATOR, please click on "save" and fill in the "reprise de contact" section of the maintenance sheet.