



Social Survey 2025

Public Opinion About

Government Services

&

Civilian Defence

Chapter 1 : Details Of Household Members

1.10 Is your permanent address _____ (the address which appears in the Population Registry)?

1. Yes
2. No.

1.20.2 What is your permanent address?

Name of locality: _____

1.20 Street name: _____

1.20.1 House number: _____

1.20.3 Apartment number: _____

1.30 I will now ask you regarding the people who live in this dwelling on a permanent basis.

Respondent only:

1.40 What is your name? First name _____

1.50 Last name _____

For all HH members except Respondent:

1.40 Other than you, who else lives in the dwelling on a permanent basis?

The dwelling referred to is the one at _____. It includes soldiers in compulsory army service, as well as children studying at boarding schools, including Grade 12.

First name _____.

Last name _____.

1.60 ID number including zeros on the left and the check digit on the right _____

1.70 Relationship to respondent:

1. [Respondent]
2. Spouse
3. Child
4. Spouse of Child
5. Grandchild
6. Parent
7. Spouse's parent
8. Sibling
9. Brother/sister-in-law
10. Grandparent
11. Aunt/uncle
12. Niece/nephew
13. Other relative
14. Foster child
15. Roommate
16. Caregiver or cleaning person
17. Other non-relative

1.80 Do all those living in the dwelling have a common expense budget for food?

1. Yes
2. No

1.90 Who of those living in the dwelling has a joint expense budget for food with you <names of HH members>?

1. Yes
2. No

For all HH members:

1.100 Sex:

1. Male
2. Female

1.110 Year of birth: _____

1.110.1 If year of birth is unknown: Age _____

Respondent only:

1.120 Country of birth (according to current borders):

1. Israel

2. Other: specify country _____

For Israeli born:

1.130 Father's country of birth (according to current borders):

1. Israel
2. Other: specify country _____

For Israeli born:

1.140 Mother's country of birth (according to current borders):

1. Israel
2. Other: specify country _____

For foreign born:

1.150 Year of immigration _____

1.150.1 If year of immigration is unknown: No. of years in Israel

1.160 Are you:

1. Married
2. Separated
3. Divorced
4. Widowed
5. Single

For married or separated:

1.170 Year of marriage _____

1.170.1 If year of marriage is unknown: No. of years married _____

For divorced:

1.170 Year of divorce _____

1.170.1 If year of divorce is unknown: No. of years divorced _____

For widowed:

1.170 Year widowed _____

1.170.1 *If year of being widowed is unknown:* **No. of years of being widowed** _____

Respondent only:

1.180 **How many times have you been married (including current marriage)?**

For all HH members except Respondent:

1.190 **Is** < name of household member > **employed?**

[Not including housework at home or voluntary labor]

[National Service ("Sherut Le'umi") is considered civilian labor]

1. Yes, employed.
2. In the permanent army
3. In compulsory army service
4. Not employed

1.210 **Has** <name of household member-1.40> **<studied or does he or she study> at an educational institution?**

1. <Studies or studied> only in the past.
2. Currently studying (including on vacation) *Continue to*
1.220
3. Never studied in an educational institution. *Continue to the next*
person in the household for 1.100

Not known, refuses to answer *Continue to 1.220*

The question is asked only about household members aged 17 and over

1.220 What is the highest diploma or degree that <name of household member-1.40> has received?

1. Primary school / intermediate school diploma (including someone who studied in secondary school but did not graduate)
2. Secondary school diploma – no matriculation
3. Matriculation certificate
4. Post-secondary school diploma (non-academic track)
5. First academic degree, B.A., or similar degree
6. Second academic degree, M.A., or similar degree (including M.D., medical doctor)
7. Third academic degree, Ph.D, or similar degree
8. Other diploma / degree
9. No diploma / degree

Chapter 2: Details of Dwelling, Automobile and Help

2.10 I will now ask you regarding housing, cars and household help.

2.20 Is the dwelling in which you live:

1. A dwelling you own
2. A rented dwelling
3. Sheltered housing
4. Dwelling owned by others and you do not pay rent. Includes kibbutzim.
5. Dwelling with key-money arrangement
6. Other

2.20.1 Other, specify: _____

2.30 From whom did you rent the apartment?

1. A private individual
2. A public company, (such as *Amidar, Halamish, Prazot, Shikmona*)
3. A institution of learning, (such as student dormitories or *yeshivot*)
4. The government, local authorities, *kibbutz* or cooperative *moshav*, etc.
5. Other

2.30.1 Other, specify: _____

For those who own the dwelling in which they live:

2.60 Do you own another dwelling?

1. Yes
2. No

For those renting, or with some other arrangement:

2.70 Do you own a dwelling?

1. Yes
2. No

2.50.1 What is the number of rooms in the dwelling used by the household for living purposes? Include the living room. Do not include a storage room or a room used solely for business purposes.

2.51 Does your dwelling have a Mamad (protected residential space)?

1. **Yes**

2. **No**

DK, R (Don't Know, Refuses to answer)

Flow: If the answer is "Yes" - go to 2.80; if the answer is "No" or DK/R - proceed to 2.52

2.52 Is there an accessible migunit (mobile shelter) or miklat (shelter) near your home for your safety when needed?

1. **Yes**

2. **No**

2.80 Does your household have the use of an automobile or a commercial vehicle?

[Including under 4 tons gross weight. Not including a mini-tractor or two-wheeled motorized vehicles: scooters, motorcycles, etc.]

1. **Yes**

2. **No**

2.90 How many vehicles does your household have the use of? _____

2.90.1 Is the car owned by you?

1. **Yes**

2. **No**

2.90.2 Of those, how many cars are owned by you? _____

2.100 In the last twelve months, have you had use of a private or Commercial vehicle?

1. Yes
2. No

2.110 Do you employ in your house a cleaning person or caregiver?

1. Yes
2. No

2.111 How many hours a week does the cleaning person or caregiver work? _____

2.112 Does the cleaning person or caregiver –

1. Do housework, such as cleaning or cooking
2. *Provide nursing care*

3. *Supervise and care for children*

2.120 I will now read to you a list of financing elements; please relate to each of them, whether they pay for the domestic help or caregiver.

2.120.1	<i>You yourselves</i> [the household]	1-Yes	2-No
2.120.2	A public institution, such as the National Insurance Institute, the welfare office	1-Yes	2-No
2.120.3	<i>Some other person</i> [who isn't a member of the household]	1-Yes	2-No

Chapter 3: Positions Regarding Dwelling

3.10. The following questions refer to you and to your views about various topics.

I'll start with some questions about your dwelling and the locality in which you live.

3.110 From what year have you lived in < locality name >? _____

3.110.1 If “Don’t know”, how many years have you lived in < locality name>? _____

3.120 Are you satisfied, in general, with the area in which you live?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

3.130 Are you satisfied with the public transportation in your area of residence?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

3.140 Are you satisfied with the amount of parks, public gardens or greenery in the area in which you live?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

3.150 Are you satisfied with the cleanliness of the area in which you live?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

3.150.1 Are you satisfied with the garbage collection service in your area of residence?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

3.160 Does air pollution in your area of residence bother you? e.g. emissions from cars or from an industrial zone, sewage smells, and waste?

1. Bothers me very much
2. Bothers me
3. Doesn't bother me so much
4. Doesn't bother me at all

3.170 Do you feel safe walking alone at night in your neighborhood?

1. Very safe
2. Safe
3. Not so safe
4. Not safe at all

3.180 Are there enough parking places in the area where you live?

1. Yes
2. No
3. [There is private parking]

3.200 Are you satisfied with the state of the roads and sidewalks in your area of residence? e.g., the width of the roads and sidewalks, lighting, signage, etc.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

3.20 In what year did you begin living in this dwelling? _____

3.20.1 How long have you lived in this dwelling? _____

3.30 Are you satisfied, in general, with the dwelling you live in?

1. Very satisfied.
2. Satisfied.
3. Not so satisfied.
4. Not satisfied at all.

3.90 Does noise outside of your dwelling bother you?

1. Bothers me very much
2. Bothers me
3. Doesn't bother me so much
4. Doesn't bother me at all

3.80 Are you satisfied with your relations with your neighbors?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

3.100 Do people in your neighborhood cooperate to improve the neighborhood?

1. Yes, to a great extent
 2. Yes, to some extent
 3. Not so much
 4. Not at all
 5. [No need for improvement]
- Don't know, Refuses to answer

3.330 If you lost your wallet with identifying details and it was found by a resident of the area, do you think it would be returned to you without anything missing?

1. Yes
 2. No.
- Don't know
- Refuses to answer

Chapter 4: Health and Fertility

4.10 I will now ask you some questions regarding your health and daily functioning:

4.20 How is your health, overall?

1. Very good
2. Good
3. Not so good
4. Not good at all

4.30 Do you have any health or physical problem, of any kind that has lasted six months or more?

1. Yes.
2. No.

4.40 Does this problem interfere with your day-to-day functioning?

1. Greatly interferes
2. Interferes
3. Doesn't interfere so much
4. Does not interfere at all

4.50 Do you have difficulty walking or climbing stairs?

1. No difficulty
2. Slight difficulty
3. Significant difficulty
4. Completely incapable

4.60 Do you have difficulty in getting dressed or washing?

1. No difficulty
2. Slight difficulty
3. Significant difficulty
4. Completely incapable

4.90 Do you have difficulty in carrying out activities related to the household? for example: cleaning, shopping, errands outside the house, etc.

1. No difficulty
2. Slight difficulty
3. Significant difficulty
4. Completely incapable

4.80 Do you have problems with memory or with concentration?

1. No difficulty
2. Slight difficulty
3. Significant difficulty
4. Completely incapable

4.20.1 Do you have vision problems – even when you wear glasses?

1. No difficulty.
2. Slight difficulty.
3. Significant difficulty.
4. Cannot see at all

4.20.2 Do you have difficulty hearing?

[If the interviewee wears a hearing aid, this refers to having difficulty hearing also when wearing the aid]

1. No difficulty.
2. Slight difficulty.
3. Significant difficulty.
4. Cannot hear at all.

4.100 Have you given birth to children?

Interviewer: Include all live births, even if they are no longer living.

1. Yes *Continue to 4.110*
2. No *Continue to 5.10*

4.110 To how many children have you given birth?

Interviewer: Include all live births, even if they are no longer living.

(Range 1-30)

Chapter 5: Religion

5.10 Now I will ask you some questions about religion:

5.20 Are you:

1. Jewish
2. Moslem
3. Christian
4. Druze
5. Another religion
6. Without any religion; an atheist

5.20.2 Which religion? _____

5.30 Do you consider yourself as being:

1. Very religious
2. Religious
3. Not so religious
4. Not religious at all

5.30.1 When you were 15, was the house in which you grew up -

1. Very religious
2. Religious

3. Not so religious
4. Not religious

5.40 Do you consider yourself as being:

1. Ultra-Orthodox (“*Haredi*”)
2. Religious
3. Traditional but religious
4. Traditional but not so religious
5. Non-religious, secular

5.50 When you were 15, was the house in which you grew up -

1. Ultra-Orthodox
2. Religious
3. Traditional, religious
4. Traditional, not so religious
5. Not religious, secular

Chapter 6: Skills, Studies, Languages, Courses, Army Service and Driving License

6.10 I will now ask you regarding your studies:

Text for male Jews:

6.20 Did/do you study in any kind of educational institution? Including a ‘Yeshiva’ or professional training courses.

Text for male non-Jews and women:

6.20 Did/do you study in any kind of educational institution? Including professional training courses.

1. Only studied in the past ***Continue with Question 6.30 Years of Study***
2. Is currently studying, including on vacation ***Continue with Question 6.30 Years of Study***
3. Did not study at all

Skip to Question 6.71

Not known, refuses to answer

Text for someone who answered that he or she studied only in the past (6.20 = 1) or on Question 6.20 answered "Not known / refuses to answer"

6.30 How many years did you study in all educational institutions?

Years of study _____

Not known, refuses to answer

Text for someone who answered that he or she studies now

6.30 How many years did you study in all educational institutions including the present year?

__ (Range 1-98)

Not known, refuses to answer

Text for someone who answered that he or she studied only in the past (6.20 = 1) or on Question 6.20 answered "Not known / refuses to answer"

6.50 What is the highest diploma / degree that you received?

1. Primary school / intermediate school diploma (including someone who studied in secondary school but did not graduate)
2. Secondary school diploma – no matriculation
3. Matriculation certificate
4. Post-secondary school diploma (non-academic track)
5. First academic degree, B.A., or similar degree
6. Second academic degree, M.A., or similar degree (including M.D., medical doctor)
7. Third academic degree, Ph.D, or similar degree
8. Other diploma / degree

Continue with Question 6.50.1

9. No diploma / degree Skip to Question 6.71

Not known, refuses to answer Skip to Question 6.71

If 6.50 = 1-4, 9 or “Not known, refuses to answer”, skip to Question 6.71,

If 6.50 = 5-7, skip to Question 6.61, if 6.50 = 8, continue to Question

6.50.1

6.50.1 Specify which diploma

Other diploma / degree _____ **Continue with Question 6.31.11**

Not known, refuses to answer

Version 1: For someone who answered on Question 6.20 that they currently study (option 2) and also answered Question 6.40 = 8 that they studied in an academic degree granting program

6.61 What is the main subject (major) you studied or that you currently study at the academic institution?

Interviewer: Type the three letters of the main subject. If the name of the subject does not appear, type “other”, press “Enter” and record the name of the subject.

List of subject names

Version 2: For someone who answered on Question 6.20 that they studied only in the past (option 1) and also answered Question 6.40 = 8 that they studied in an academic degree granting program

6.61 What is the main subject (major) you studied at the academic institution?

Interviewer: Type the three letters of the main subject. If the name of the subject does not appear, type “other”, press “Enter” and record the name of the subject.

List of subject names

If “other”, go to Question 6.61.1, otherwise, skip to Question 6.71

Language of Interview

6.61.1 What was the main subject of study? _____

List of subject names

SAMPLE

If the answer is “currently studying” (6.20 = 2), continue to Question 6.21, otherwise, skip to 6.71

6.21 What type of educational institution are you attending?

Interviewer: Special education should be classified according to the school's classification: lower secondary/upper secondary.

1. Primary or lower secondary school
2. Academic track in upper secondary school
3. Vocational/technological or agricultural track in upper secondary school
4. Short-cycle tertiary institution or study program of at least two full years
5. Other short-cycle tertiary institution or program
6. Institution of learning for an academic degree
7. Yeshiva, including: *Gedola* (advanced), *gevoha* (“higher”), *hesder*, or *kollel* (Option 7 appears only if the respondent is a Jewish male)
8. Other educational institution or program

6.71 Interviewer: Indicate in which language you are interviewing

1. Hebrew
2. Russian
3. Arabic

6.99 What is your level of knowledge of the Hebrew language?

Interviewer: Press “Enter”

Number of Question	1. Very good	2. Good	3. Average	4. Weak	5. Don't know at all
6.100 Speech	1	2	3	4	5
6.110 Reading	1	2	3	4	5
6.120 Writing	1	2	3	4	5

6.200 Did you serve in the army?

1. Yes
2. No

6.210 Did you do National Service (“*Sherut Le’umi*”)?

1. Yes
2. No

6.220 Do you have a driving license?

[including license for cars, motorcycles, motor-scooters, etc.]

1. Yes
2. No

6.230 How many days a week do you drive a car?

[Including a car, motorcycle, motor-scooter, etc.]

1. 5 – 7 days
2. 3 – 4 days
3. 1 - 2 days
4. less than once a week
5. do not drive at all

Chapter 7: Use of Computers and Internet.

7.10 I will now ask you questions regarding the use of computers and the internet.

7.20 Do you have a computer at home? Including a laptop computer or tablet. Not including a cell phone.

- 1. Yes
- 2. No
- Not known, refuses to answer

7.50 Do you have an internet connection at home? Including infrastructure and internet service provider (ISP).

- 1. Yes
- 2. No
- Not known, refuses to answer

7.142 During the last three months, did you use the internet, including email?

- 1. Yes
- 2. No
- Not known, refuses to answer

7.245 Generally, how many times a week do you use the internet, including the use of internet for work?

- 1. Every day
- 2. Almost every day
- 3. once or twice a week
- 4. Less than once a week
- Not known, refuses to answer

7.160 During the last three months, for what purpose did you use the internet?

Interviewer: Press "Enter" and for each response press 1 – Yes 2 – No

7.160.1	Did you use the internet for work?	1. Yes	2. No
7.160.2	Did you use the internet for studying?	1. Yes	2. No
7.160.3	Did you use the internet for obtaining information, such as bank statements, news, information and service centers or meeting people?	1. Yes	2. No
7.160.4	Did you use the internet for email?	1. Yes	2. No
7.160.4.1	Did you use the internet for WhatsApp?	1. Yes	2. No
7.160.5	Did you use the internet for discussion groups and social networks? Such as: chats, forums, Facebook, Instagram, Twitter, Tik-Tok?	1. Yes	2. No
7.160.6	Did you use the internet for playing games online or downloading games?	1. Yes	2. No
7.160.7	Did you use the internet for bank transactions and paying bills, such as gas, electricity and telephone bills?	1. Yes	2. No
7.160.7.1	Did you use the internet for digital banking services?	1. Yes	2. No
7.160.8	Did you use the internet for watching or downloading music files, movies, Netflix, series, software, apps?	1. Yes	2. No
7.160.9	Did you use the internet for purchasing goods or services, such as clothing, electrical appliances, vacations, airline tickets, tickets for cultural or sports events?	1. Yes	2. No
7.160.10	Did you use the internet for obtaining services online from government offices, such as downloading or filling out forms, receipt of permits and certificates?	1. Yes	2. No
7.160.10.1	Did you use the internet for selling products or services?	1. Yes	2. No
7.160.11	Did you use the internet for telephone or video calls, such as: Skype, Zoom, WhatsApp video calls, or video conferencing calls?	1. Yes	2. No
7.160.12	Did you use the internet for searching for information about health issues?	1. Yes	2. No

7.160.13 In the past 12 months, have you used the internet to access healthcare services from your Health Fund, such as scheduling an appointment, receiving test results or making an online request to a doctor or clinic?

1. Yes - *Proceed to 7.160.13.1*
2. No - *Skip to 8.10*
3. [Do not use the internet] - *Go to 8.10*

7.160.13.1 To what extent do the online services of your Health Fund meet your needs?

1. A great extent
2. Some extent
3. Not so much
4. Not at all

Chapter 8: Occupation /Employment

8.10 *I will now ask you questions regarding your activities and employment.*

8.30 Last week, did you work at least one hour for pay, not including volunteer work?

Interviewer: National Service ("Sherut Le'umi") and Service Year are considered work. Not including the work of a housewife in her home.

Interviewer: The week that ended last week.

1. Yes, you worked last week.
2. You were doing permanent army service
3. You were doing compulsory army service
4. You did not work last week

8.40 Do you have a job from which you were temporarily absent last week, including a business?

Interviewer: Including an absence of up to a year, at the end of which the return to the workplace is guaranteed.

Interviewer: Teachers on a sabbatical year are considered absent from the workplace – if their return to work is not guaranteed or not known, enter “no”

1. Yes
2. No

8.50 Did you actively seek work in the last 4 weeks (including the attempt to start a business)?

1. Yes
2. No
3. Was promised work within 30 days

8.630 If you had been offered an appropriate job, could you have started working last week?

1. Yes
2. No

8. 640 What is the main reason you couldn't begin to work last week?

1. You were studying
2. You were ill
3. You were on Army Reserves duty
4. There was no alternate arrangement for caring for the children
5. Other reason. What? _____

Working: PRESENT SITUATION (WP)

8.wp.60 In how many places do you work? _____

8.wp.70 I'd like to ask questions regarding your main place of work:

8.wp.80 What is the name of the workplace:

**8.wp.90 What is the main activity of the workplace? Such as:
Manufacture, repair, wholesale sales, retail sales**

8.wp.100 Section or department in which you work: _____

8.wp.110 Main activity of the section or department in which you work:

8.wp.120 *What work do you do there? Such as:* Insurance agent,
electrical appliance technician

? _____

8.wp.130 What are your main activities on your job? _____

8.wp.140 What is your job title or position? _____

8.wp.145 Do you manage or are you in charge of other workers?

1. Yes
2. No

8.wp.145.1 At <name of workplace>, do you manage:

1. Workers
2. Managers
3. Workers and managers

8.wp.150 At this workplace, are you:

1. Employee
2. Employee, owner of a limited company (Ltd.)
3. Self-employed, business owner, freelancer
4. Cooperative member
5. Kibbutz member
6. Family member working without pay

For those who are employees or members of cooperatives only:

8.wp.160 Who pays you?

1. Workplace
2. Contractor company: software house, security company, cleaning company, etc.
3. Manpower agency

4. Other

Don't know/Refuses to answer

8.wp.160.1 From whom do you receive your salary? _____

8.wp.160.2

Do you have employees?

1. Yes
2. No

Flow instruction:

If answered "1" (Yes), proceed to 8.wp.160.3

If answered "2" (No), proceed to 8.wp.165

8.wp.160.3

How many employees do you have?

_____ (Range: 1-1000)

8.wp.165

How many days per week do you usually work?

8.615 How many days a week do you usually work from home? _____

8.wp.170

Version 1 - One Workplace:

How many hours per week do you work, including overtime, at your workplace? (For teachers and artists – include preparation hours as well.)

Version 2 - More Than One Workplace:

How many hours per week do you work, including overtime, across all your workplaces? (For teachers and artists – include preparation hours as well.)

For those who work an unknown or irregular number of hours:

8.wp.190 Do you usually work 35 hours a week or more?

1. Yes

2. No

8.wp.200 Is this job considered a full-time job?

1. Yes
2. No

8.wp.201 Are you interested in working more hours?

1. Yes
2. No

8.wp.230 In general, how satisfied are you with your job?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

Ask only sampled persons who studied in a post-secondary school or academic institution – Question 6.50=4, 5,6,7,8

The text is for someone who gave the name of their place of work in Question 8.wp.80

8.wp.231 Is your work at your present (main) workplace related to the field of your academic or post-secondary studies?

1. Yes, to a great extent
2. Yes, to a certain extent
3. Not so much
4. Not at all
5. [There is no field of studies]

8.wp.415 Where is your place of work?

Interviewer: Most of the work hours or most of the days

1. At your employer or in your business, such as an office, factory, store, school, and the like
2. At the clients or people's houses
3. In a car or other vehicle

4. Outdoors, in a place like a construction site, archaeological excavation, street, or city
5. In your house
6. Both at the employer and at home
7. Other

If 8.wp.415≠7 go to the flow after 8.wp.415.1, if 8.wp.415=7 continue with question 8.wp.415.1

8.wp.415.1 Other, specify:_____

8.wp.240 In which locality do you work? *To those working in a number of places: Please relate to your main workplace*

1. In <locality of residence>
2. In another locality (Name of locality: _____)
3. In different localities
4. Abroad

8.wp.240.1 What is the name of the locality in which you work?_____

8.wp.240.2 How do you reach your workplace most of the week?

1. Private or commercial vehicle, including a motorcycle, etc.
2. Public bus or taxi
3. Train
4. Transportation organized by the workplace
5. Bicycle
6. Walking
7. Other
8. [Works at home]

8.wp.250 How long does it usually take you to get to your workplace?

1. Less than 15 minutes
2. 15-29 minutes
3. 30-44 minutes
4. 45-59 minutes
5. 60-89 minutes

6. 90 minutes or more
7. [Irregular]

8.wp.260 Are you bothered by the length of time it takes you to get to work?

1. Greatly bothered
2. Bothered
3. Not very bothered
4. Not bothered at all

8.wp.270 In your opinion, is there a suspicion that you will lose your job in the coming year?

[If self-employed]

8.wp.270 In your opinion, is there a suspicion that you will not have work in the coming year?

1. Not concerned at all
2. Slightly concerned
3. Greatly concerned
4. Very greatly concerned

8.wp.280 If you did lose your job, what are the chances you could find another one paying about what you earn today?

1. A very good chance
2. A good chance
3. A small chance
4. No chance at all
5. [Would not look for a job]

8.wp.281 If you could afford financially not to work at all, would you work?

1. Yes
2. No

8.wp.290 How many years have you been working at your present main workplace ? _____

8.wp.320 Are you satisfied with the income from your work?

[If working in more than one workplace]

8.wp.320 Are you satisfied with the income from all your workplaces?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

8.wp.800 Some employers give their employees various benefits, in addition to their wages. Please reply regarding each one of following benefits, whether your work conditions include them:

8.wp.800.1 Participation in life insurance payments	Yes	No
8.wp.800.2 Full payment for sick leave from the first day	Yes	No
8.wp.800.4 Participation in study fund	Yes	No
8.wp.800.5 Participation in profits or share options	Yes	No
8.wp.800.6 Vehicle the employer provides for your use	Yes	No
8.wp.800.7 Participation in car expenses	Yes	No
8.wp.800.8 Other benefits: meals, participation in children's education expenses, daily newspaper, cellphone, etc.	Yes	No
8.wp.800.11 Payment for courses or studies	Yes	No
8.wp.800.9 Full payment for vacation leave	Yes	No

8.wp.800.10 How many vacation days at full pay are you entitled to in a year? _____

8.wp.800.20 Do your work conditions include the participation of your employer in a pension plan, including managers insurance provident fund?

1. Yes
2. No

8.wp.402 In the last 4 weeks, have you actively looked for another job?

1. Yes
2. No

Refuses to answer, not known

Intended for all employed persons: excludes soldiers in compulsory service.

8.wp.424 To what extent are you satisfied with the balance between the time you devote to work for pay and the time you devote to other areas of your life?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not at all satisfied

8.wp.432.14 Do you experience tension, mental stress at your job?

1. Always, often
 2. Sometimes, from time to time
 3. Infrequently
 4. Never
- Refuses to answer, not known

Chapter 9: Vacations And Travel Abroad

9.10 Now I'll ask you about vacations in Israel or abroad:

9.20 In the last 12 months, did you take a vacation in Israel during which you slept away from home?

1. Yes.
2. No

9.30 In the last twelve months, have you gone on a vacation or trip abroad?

1. Yes
 2. No
- Not known, refuses to answer

Chapter 10: Relations with Family and Friends

10.10 I will now ask you regarding your connection with relatives and friends

10.20 Are you satisfied with your relationships with family members?

1. Very satisfied
2. Satisfied
3. Not very satisfied
4. Not satisfied at all
5. [Has no family]

10.120 Do you have friends you meet or talk to on the phone?

1. Yes
2. No

Interviewer: Includes conversations on Skype. Not including SMS or messaging.

10.130 How often do you meet friends, or talk to them on the phone?

1. Daily, or almost daily
2. Once or twice a week
3. Once or twice a month
4. Less than once a month

10.150 Do you ever feel lonely?

1. Frequently
2. Sometimes
3. Seldom
4. Never

10.160 If you were in trouble, are there people whose help you could count on?

1. Yes.
2. No

10.155 To what extent do you feel that the members of your family appreciate you?

1. A great extent
 2. Some extent
 3. Not so much
 4. Not at all
- Not known, refuses to answer

10.170 In general, can you trust most people or do you have to be wary of them?

1. Most people you can trust.
2. You have to be wary of people.

Chapter 12: Volunteering

12.10 I will now ask you regarding voluntary activity.

12.20.1 During the last twelve months, did you engage in volunteer activities?

[Including: unpaid help (to new immigrants, to the elderly, to children, etc.; privately or within an organization or movement, e.g., WIZO, Neighborhood Watch, P.T.A. Not including: donations, helping a family member or friends.]

1. Yes
2. No

12.30 Was your volunteering done -

1. In the framework of an organization or organizations , such as:
Yad Sarah Red Shield of David, Neighborhood Watch, police.
2. Privately, on your own
3. Both as part of an organization, and privately on your own

12.50 What is the name of the organization where you volunteer?

12.51 In what field of volunteer activities did you engage?

1. Health, such as: the Red Shield of David (Red Cross), Hospitals.
2. Helping the needy, such as: elderly, persons with disabilities etc.
3. Education
4. Culture
5. The protection and preservation of nature and wildlife.
6. Public order - e.g., police, army and civil guard.
7. Religious activity
8. Other field

12.51.1 What field? _____

12.70 How many hours per month in total, did you engage in volunteer activities? _____

12.71

Was the volunteering a result of the Iron Swords War?

1. Yes
2. No

Don't know/Refuses to answer

12.80 During the last twelve months, did you contribute money to social organizations or private individuals, not including family members or friends?

1. Yes
2. No

12.90 To whom did you donate money?

1. To organizations and institutions
2. To private people
3. To organizations and institutions and to private people

12.100 During the last twelve months, how much did you donate?

1. Up to NIS 100
2. Between NIS 101 – 500
3. Between NIS 501 – 1,000
4. Over NIS 1,000

Chapter 13: Satisfaction In General

13.10 I will now ask you regarding your satisfaction in various fields.

13.20 Overall, how satisfied are you with your life?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

13.30 In the near future, do you think that compared to today, your life will be:

1. Better
2. Unchanged
3. Worse

13.40 How satisfied are you with your financial situation?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

13.50 In the near future, do you think that compared to today, your financial situation will be:

1. Better
2. Unchanged
3. Worse

Chapter 14: Financial Situation

14.01 *In the following questions I will ask about gross and net income from work*

14.10 What was your gross salary last month, before deductions, from all places of work? *(including wages and income from a business)*

1. NIS 2,000 or less
2. NIS 2,001-3,000
3. NIS 3,001-4,000
4. NIS 4,001-5,000
5. NIS 5,001-6,000
6. NIS 6,001-7,500
7. NIS 7,501-10,000
8. NIS 10,001-14,000
9. NIS 14,001-21,000
10. More than NIS 21,000

14.11 What was your net income, after deductions such as: income tax, managers' insurance, provident funds? *(including wages and income from a business)*

1. NIS 2,000 or less
2. NIS 2,001-3,000
3. NIS 3,001-4,000
4. NIS 4,001-5,000
5. NIS 5,001-6,000
6. NIS 6,001-7,500
7. NIS 7,501-10,000
8. NIS 10,001-14,000
9. NIS 14,001-21,000
10. More than NIS 21,000

14.80 The following questions relate to all members of the household.

Do you manage to cover all your monthly household expenses for food, electricity, telephone, etc.?

1. Yes, without any difficulty.
2. Yes, [but with some difficulty].
3. No, not so well
4. No, not at all

14.105 I will now ask about gross and net income of the household.

14.110 Last month, what was the total gross income of all members of the household, from all sources: work, pensions, support payments, rents.

1. NIS 2,500 or less
2. NIS 2,501-4,000
3. NIS 4,001-5,000
4. NIS 5,001-6,500
5. NIS 6,501-8,000
6. NIS 8,001-10,000
7. NIS 10,001-13,000
8. NIS 13,001-17,000
9. NIS 17,001-24,000
10. More than NIS 24,000

14.111 What was the net income of the entire household, after deductions, from all income sources: work, pension, allowances, rent etc.

1. Up to NIS 2,500
2. NIS 2,501 – 4,000
3. NIS 4,001 – 5,000
4. NIS 5,001 – 6,500
5. NIS 6,501 – 8,000
6. NIS 8,001 – 10,000
7. NIS 10,001 – 13,000
8. NIS 13,001 – 17,000
9. NIS 17,001 – 24,000
10. NIS 24,001 and over

Chapter 15: Well-Being of the Population in Israel

15.10 I will now ask you about your financial situation during various periods of your life.

15.20 From age 15 until now, were there periods which you felt poor?

1. Yes
2. No

15.30 When was the last time you felt poor?

1. In the past year
2. Over one year ago and up to five years ago
3. More than five years ago

15.60 The questions I will now ask you refer to the consumption of products and services in the last twelve months.

15.70. During the last 12 months, were you in need of medical treatment?

1. Yes
2. No

15.80. During the last 12 months, did you forgo medical treatment due to financial difficulties?

1. Yes
2. No

15.110 In the last 12 months, were you in need of prescription medicine?

1. Yes
2. No

15.120 In the last 12 months, did you forgo prescription medicine because of financial difficulties?

1. Yes
2. No

15.120.1 In the last 12 months, were you in need of dental care?

1. Yes
2. No

15.120.2 In the last 12 months, did you forgo dental care due to financial difficulties?

1. Yes
2. No

15.170 In the last twelve months, did you ever forgo food because of financial difficulties?

1. Yes
2. No

15.250 In the last 12 months, did you forgo a hot meal, at least once in a two-day period, because of financial difficulties?

1. Yes
2. No

15.230 I will now ask questions about your different emotional states over the last 12 months. The possible answers are: 1 – Always or often, 2 – Sometimes, 3 – Infrequently, 4 – Never.

Question		1- Always or often	2- Sometimes	3- Infrequently	4- Never
15.240.1	In the last 12 months, have you felt pressured?	1	2	3	4
15.240.2	In the last 12 months, have you felt depressed?	1	2	3	4
15.240.3	In the last 12 months, have you felt that <u>you are able</u> to deal with your problems?	1	2	3	4
15.240.4	In the last 12 months, have you felt full of energy?	1	2	3	4
15.240.5	In the last 12 months, have <u>worries</u> prevented you from sleeping?	1	2	3	4

15.265 In the coming years, what do you think is the main risk to you and your immediate family?

1. Illness or disability
8. Security risk
2. Difficulty in prolonged care of elderly family members
3. Loss of place of work or income
4. Difficulty covering expenses
7. Crime or violence
9. Another risk
10. There is no risk

Don't know / Refuses to answer

Chapter 16: Health Services

16.10 The following section deals with satisfaction from public institutions. We will begin with the public health services.

16a. Hospitalization

16.20 In the last 12 months, were you hospitalized in a general hospital?

Hospitalization: Refers to a stay in the hospital lasting more than one day and including overnight hours.

1. Yes
2. No

1

16.30 During the past twelve months, has a first-degree family member been hospitalized in a general hospital? For example: a parent, son, daughter, or sibling.

Hospitalization: Refers to a stay in the hospital lasting more than one day and including overnight hours.

- 1 .Yes
- 2 .No

Don't Know, Refuses to answer

16.40 Who paid for the hospitalization?

- 16.40.1.1. Health Fund
- 16.40.1.2. Private financing, including private insurance
- 16.40.1.3. Another framework [including the IDF]

16.40.1 Specify, who paid for the hospitalization? _____

16.50 Were you generally satisfied with the medical care during the hospitalization?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

16.60 Did the length of the wait for hospitalization bother you? This includes receiving a doctor's referral, Health Fund commitment, etc.

1. Bothered me very much
2. Bothered me
3. Did not bother me so much
4. Did not bother me at all

16.70 Were you generally satisfied with the physical conditions of the hospitalization? For example: the number of persons in a room, ventilation, food, cleanliness.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

16.80 Were you generally satisfied with the way the medical staff dealt with you during your hospitalization?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

16.80.1 In general, what is your opinion about the care provided by general hospitals in Israel?

1. Very good
2. Good
3. Not so good

4. Not good at all

16b. Emergency Rooms

16.210 In the last 12 months, have you sought treatment in an emergency room? Not including Terem (emergency medical center).

1. Yes
2. No

16.215 In the last 12 months, have you accompanied someone to the emergency room? Not including Terem (emergency medical center).

1. Yes
2. No

16.220 Did the length of the wait in the emergency room bother you?

1. Bothered me very much
2. Bothered me
3. Did not bother me so much
4. Did not bother me at all

16.230 Were you generally satisfied with the way the medical staff dealt with you in the emergency room?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

16.230.1 In general, how would you evaluate the care provided by the emergency room?

1. Very good
2. Good
3. Not so good
4. Not good at all

16.240 Were you generally satisfied with the physical conditions of the emergency room? For example: the number of persons in a room, ventilation, cleanliness.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

16.260 Are the emergency medical services in your residential area readily available, in terms of distance, opening hours, and cost? This refers to Terem (emergency care centers), medical clinics of the Health Funds, emergency rooms, etc.

1. Yes, to a great extent.
2. Yes, to some extent.
3. Not so much
4. Not at all

16c. Family Doctor Visits

16.90 In the last 12 months, have you visited a family doctor?

1. Yes
2. No

16.101 The following questions relate to your last visit at your family doctor:

16.120 In your last visit at your family doctor, were you satisfied about the following things? Possible answers are: 1 – Very satisfied, 2 – Satisfied, 3 – Not so satisfied, 4 – Not at all satisfied.

		1 – Very satisfied	2 – Satisfied	3 – Not so satisfied	4 – Not at all satisfied
16.120.1	Location of the clinic that you visited, such as: Close proximity to your area of	1	2	3	4

	residence, accessibility, safe neighbourhood.				
16.120.3	The physical conditions of the clinic where the visit took place, such as: the number of people in the waiting room, ventilation, lighting, cleanliness.				

16.130 During your last visit, did the length of time you had to wait from scheduling the appointment until the visit at the family doctor bother you?

1. Bothered me very much
2. Bothered me
3. Did not bother me so much
4. Did not bother me at all

16.140 How would you evaluate the care provided by the family doctor?

1. Very good
2. Good
3. Not so good
4. Not good at all

16.150 In your last visit at your family doctor, did you feel you were a partner in the decisions about your care?

1. Yes, to a great extent.
2. Yes, to some extent.
3. Not so much
4. Not at all

16.160 Were you satisfied with the way the doctor dealt with you during your visit?

1. Very satisfied
2. Satisfied
3. Not so satisfied

4. Not satisfied at all

16.170 Did the medical staff at the clinic you visited deal with you in a dignified way? This refers to your family doctor and the nurse.

1. Yes, to a great extent.
2. Yes, to some extent.
3. Not so much
4. Not at all

16d. Visit to a Specialist

16.300 In the last 12 months, have you visited a specialist doctor? Not including dental care or the emergency room.

1. Yes
2. No

16.310 The following questions relate to your last visit at a specialist:

16.320 Was your last visit to a specialist:

1. In the clinic of a Health Fund or by a doctor who works with a Health Fund.
2. Private clinic.
3. Hospital clinic.
4. Another type of clinic.

16.320.1 The last visit was in: _____

16.330 What type of doctor did you visit?

1. Ear, Nose and Throat (Otolaryngologist)
2. Eye (Ophthalmologist)
3. Skin (Dermatologist)
4. Gynecologist (*Women only*)
5. Orthopedist
6. Surgeon
7. Gastroenterologist

8. Urologist
9. Cardiologist
10. Neurologist
11. Other

16.330.1 Other: _____

16.340 In your last visit at a specialist, were you satisfied about the following things? Possible answers are: 1 – Very satisfied, 2 – Satisfied, 3 – Not so satisfied, 4 – Not at all satisfied.

		1 – Very satisfied	2 – Satisfied	3 – Not so satisfied	4 – Not at all satisfied
16.340.1	Location of the clinic that you visited, such as: Close proximity to your area of residence, accessibility, safe neighborhood.	1	2	3	4
16.340.3	Were you generally satisfied with the physical conditions of the clinic in which the visit took place? For example, number of persons waiting in the waiting room, ventilation, lighting, cleanliness.	1	2	3	4

16.350 In your last visit, did the length of time you had to wait from scheduling the appointment until the visit at the specialist's clinic bother you?

1. Bothered me very much
2. Bothered me
3. Did not bother me so much
4. Did not bother me at all

16.360 How would you rate the care you received from the specialist?
Interviewer: If asked, refer to the most recent visit.

1. Very good
2. Good
3. Not so good

4. Not good at all

16.370 In your last visit to a specialist, how much time passed from the time you made the appointment until your visit with him?

1. Up to two weeks
2. More than two weeks, up to a month
3. More than a month, up to three months
4. More than three months
5. Not relevant, I am under regular observation or regular check-ups by a specialist.

16.380 In your last visit at a specialist, did you feel you were a partner in the decisions about your care?

1. Yes, to a great extent.
2. Yes, to some extent.
3. Not so much
4. Not at all

16.400 Were you satisfied with the way the specialist dealt with you during the visit?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

16.410.1 Do you have one doctor who coordinates your health care?

1. Yes
2. No

16.420 In general, do you have difficulty receiving medical care because of language problems? For example, at a doctor visit, hospital, or medical examinations.

1. Yes
2. No

16.450 Do you have difficulty in obtaining information about your rights in the medical system?

1. Yes
2. No

16.430 In your opinion, in case of a difficult illness, does the health system in Israel provide the best and most beneficial care, including medicines and diagnostic examinations?

1. Yes, to a great extent.
2. Yes, to some extent.
3. Not so much
4. Not at all

16.180 In your opinion, does the health system in Israel provide equal care, without regard to gender, age or sector, to all population groups?

1. Yes, to a great extent.
2. Yes, to some extent.
3. Not so much
4. Not at all

16.180.1 In the healthcare system, staff members from various sectors are employed. Would you feel hesitant, avoid, or refuse to receive medical service from someone of a different nationality than your own?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

16.190 In general, what is your opinion about the functioning of the Israeli health system?

1. Very good
2. Good

3. Not so good
4. Not good at all

16.200 In the past 12 months, have you used private health services? These include: supplementary insurance, private insurance, or services for payment without insurance, or additional health services.

1. Yes
2. No

16.250 What is the main reason you sought out private health services?

1. Ability to choose the doctor
2. Earlier waiting time
3. More accommodating service and treatment
4. To obtain service not available under the Health Fund

Chapter 17: Education System

17.420 Do you have children in a publicly owned kindergarten, such as: Ministry of Education or Local Authority (municipal)? This excludes a private framework. More than one response is possible.

- 17.420.1 Pre-preschool or preschool
- 17.420.2 Obligatory kindergarten
- 17.420.3 I have no children in the indicated frameworks

17.420.1 *The following questions deal with your satisfaction from the preschool kindergarten attended by your child.*

Text for sampled persons who have more than one child aged 2-5 in the household.

17.420.1 *The following questions deal with your satisfaction from the preschool kindergarten attended by your child, if you have more than one child in preschool, respond in regards to the oldest child.*

17.430 Are you generally satisfied with the kindergarten attended by your child?

1. Very satisfied
2. Satisfied

3. Not so satisfied
4. Not satisfied at all

17.440 Are you satisfied with the location of the kindergarten? For example: Closeness to your place of residence, accessibility, safe neighborhood.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.460 Are you satisfied with the kindergarten's hours of activity? That is, the opening and closing times, excluding an afternoon program with additional charge.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.480 Are you generally satisfied with the kindergarten's physical conditions? For example, space, cleanliness, heating or air conditioning, equipment in the classroom or playground, maintenance.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.490 Are you satisfied with the way the kindergarten teacher and assistants treat your child? For example: personal attention, warmth, taking into account personal background.

1. Very satisfied
2. Satisfied
3. Not so satisfied

4. Not satisfied at all

17.500 In general, are you satisfied with the variety of activities available in the kindergarten? For example, games, hobbies, educational activities.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.510 Does the kindergarten attended by your child answer to his needs?

1. Yes, to a great extent.
2. Yes, to some extent.
3. Not so much
4. Not at all

17b. Obligatory Kindergarten

Text for sampled persons who have one child aged 4-6 in the household.

17.20.1 The following questions deal with your satisfaction from the obligatory kindergarten attended by your child.

Text for sampled persons who have more than one child aged 4-6 in the household.

17.20.1 The following questions deal with your satisfaction from the kindergarten attended by your child, if you have more than one child in obligatory kindergarten, respond in regards to the oldest child.

17.30 Are you generally satisfied with the kindergarten attended by your child?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.40 Are you satisfied with the location of the kindergarten? For

example: Closeness to your place of residence, accessibility, safe neighbourhood.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.60 Are you satisfied with the kindergarten's hours of activity? That is, the opening and closing times, excluding an afternoon program with additional charge.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.80 Are you generally satisfied with the kindergarten's physical conditions? For example, space, cleanliness, heating or air conditioning, equipment in the classroom or playground, maintenance.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.90 In general, are you satisfied with the way the kindergarten teacher and assistants treat your child? For example: personal attention, warmth, taking into account personal background.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.100 Are you satisfied with the variety of activities available in the kindergarten? For example, games, hobbies, educational activities.

1. Very satisfied

2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.110 Does the kindergarten attended by your child answer to his needs?

1. Yes, to a great extent.
2. Yes, to some extent.
3. Not so much
4. Not at all

17c. Primary School

17.120 Do you have children in primary school? This refers to grades 1 – 6.

1. Yes
2. No

17.120.1 *The following questions deal with your satisfaction from the school attended by your child.*

Text for sampled persons who have more than one child aged 5-12 in the household.

17.120.1 *The following questions deal with your satisfaction from the kindergarten attended by your child, if you have more than one child in school, respond in regards to the oldest child.*

17.130 Are you generally satisfied with the school attended by your child?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.140 Are you satisfied with the location of the school attended by your child? For example: Closeness to your place of residence, accessibility,

safe neighbourhood.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.170 Are you generally satisfied with the kindergarten's physical conditions? For example, space, cleanliness, heating or air conditioning, playground, maintenance, equipment, learning resources.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.180 Are you generally satisfied with the way the teacher at the school treats your child?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.190 Are you generally satisfied with the level of teaching at the school attended by your child?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.200 Does the school attended by your child answer to his needs?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

17.210 In the past 12 months, did your child receive private lessons? Not including those in the school's framework.

1. Yes
2. No

17.210.3 If your child participated in remote learning classes, do you think this learning was effective?

- 1 .Yes
2. No
- 3 .Did not participate

17d. Upper and Lower Secondary School

(To be asked of sampled persons with children aged 12-18 in the household)

17.220 Do you have children that learn in lower secondary school (middle school) and/or upper secondary school (high school)? This refers to grades 7-12.

1. Lower secondary school
2. Upper secondary school
3. In both lower and upper secondary school
4. No children in lower or upper secondary school

Text for sampled persons who have one child aged 12-18 in the household.

17.220.1 *The following questions deal with your satisfaction from the school attended by your child.*

Text for sampled persons who have more than one child aged 12-18 in the household.

17.220.1 *The following questions deal with your satisfaction from the school attended by your child, if you have more than one child in lower or upper secondary school, respond in regards to the oldest child.*

17.230 Are you generally satisfied with the school attended by your child?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.240 Are you satisfied with the location of the school attended by your child? For example: Closeness to your place of residence, accessibility, safe neighbourhood.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.250 Are you satisfied with the hours of activity of the school attended by your child? That is, the start and end of the studies.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.260 Are you generally satisfied with the school's physical conditions? For example, cleanliness, ventilation, maintenance, equipment, learning resources.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.270 Are you generally satisfied with the way the teachers at the school treat your child?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.280 Are you generally satisfied with the level of teaching at the school attended by your child?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

17.290 Does the school attended by your child answer to his needs?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

17.300 In the past 12 months, did your child receive private lessons or participate in a privately organized matriculation exam preparation course? Does not include within the school framework.

1. Yes
2. No

17.300.1 If your child participated in remote learning classes, do you think this learning was effective?

1. Yes
2. No
3. Did not participate

17.320 In your opinion, does the education system in Israel provide equal services to all population groups without regard to sex, age or sector?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

17.330 In general, what is your opinion about the functioning of the education system in Israel?

1. Very good
2. Good
3. Not so good
4. Not good at all

Chapter 18: Government Ministry Services

18a. Israel Police

18.110.1 *The following questions deal with your opinion about the Israel Police.*

18.110.2 In your opinion, does the Israel Police relate equally to all citizens without regard to sex, age or sector?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

18.111 In general, what is your opinion about the functioning of the Israel Police?

1. Very good
2. Good

3. Not so good
4. Not good at all

18b. Courts

18.10 *I will now ask you about the Israeli court system.*

18.20 In the past 12 months, were you a litigant in a civilian or administrative proceeding in court? This refers to being a petitioner or defendant, and excludes giving testimony or a criminal proceeding.

1. Yes
2. No

18.25 Was the proceeding in a religious, military or traffic court?

1. Yes
2. No

18.20.1 What type of litigant were you in court?

1. Plaintiff or petitioner
2. Defendant
3. Both
4. Third side or other

18.30 Did the treatment of your case come to a conclusion?

1. Yes
2. No

18.40 What was the type of court that dealt with or is dealing with your case?

1. Magistrate Court, including Small Claims Court
2. District Court
3. Supreme Court, Appeals Court or High Court of Justice
4. Labour Tribunal
5. Family Court
6. Other court

18.40.1 What type of court? _____

18.50 Are you generally satisfied with the way the administrative staff of the court dealt with or is dealing with your case? The administrative staff includes the secretary, clerk and reception.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.60 Did you use or are you using the services of a lawyer to deal with your case?

1. Yes
2. No

18.70 Did or does the length of the wait for your case to be dealt with bother you?

1. Bothered me/bothers me very much
2. Bothered me/bothers me
3. Did/does not bother me so much
4. Did/does not bother me at all

18.90 Are you satisfied with the way the court staff is dealing with your case, such as the judges and lawyers?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.110 In your opinion, do the courts in Israel treat all population groups equally without regard to sex, age and sector?

1. Yes, to a great extent

2. Yes, to some extent
3. Not so much
4. Not at all

18.110.2.2 To what extent do the online services of the court system meet your needs? For example, the Justice Internet (Net Mishpat) system, obtaining information, and submitting requests.

1. To a great extent
2. To some extent
3. Not so much
4. Not at all

18.120 In general, what is your opinion about the functioning of the courts in Israel?

1. Very good
2. Good
3. Not so good
4. Not good at all

18c. Tax Authority

18.140 I will now ask you about Tax Authority services.

18.150 In the past 12 months, did you use the services of the Tax Authority? This refers to income tax, land taxes, Value Added Tax, or customs.

1. Yes
2. No

18.151 Did you use the services of an accountant, lawyer or tax advisor in your case with the Tax Authority?

1. Yes
2. No

18.160 How did you receive services at the Tax Authority? More than one response is possible.

- 18.160.1 Personal meeting with a clerk
- 18.160.2 Telephone call
- 18.160.3 Internet, including email
- 18.160.5 Another way

18.170 Were you generally satisfied with the service you received?

- 1. Very satisfied
- 2. Satisfied
- 3. Not so satisfied
- 4. Not satisfied at all

18.180 In general, did you receive clear and exact information about the procedure for receiving services at the Tax Authority? This refers to prerequisite conditions for receiving services, the necessary paperwork, length of waiting time to receive services, etc.

- 1. Yes, to a great extent
- 2. Yes, to some extent
- 3. Not so much
- 4. Not at all

18.190 Did the length of the wait for receiving services bother you?

- 1. Bothered me very much
- 2. Bothered me
- 3. Did not bother me so much
- 4. Did not bother me at all

18.200 Are you satisfied with the way the employees at the Tax Authority dealt with you?

- 1. Very satisfied
- 2. Satisfied
- 3. Not so satisfied

4. Not satisfied at all
5. I did not receive service from an employee

18.210 Are you satisfied with the hours of activity of the Tax Authority's offices?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.220 Are you satisfied with the location of the office in which you received services? For example, closeness to your place of residence, accessibility, safe neighbourhood.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.220.1 To what extent do the online services of the Tax Authority meet your needs? For example: tax coordination, submission of annual reports, and withholding tax at source.

1. To a great extent
2. To some extent
3. Not so much
4. Not at all
5. [Not relevant, did not use]

18.240 In general, what is your opinion about the functioning of the Tax Authority in providing services to a citizen? This refers to income tax, land taxes, Value Added Tax, or customs.

1. Very good
2. Good

3. Not so good
4. Not good at all

18d. National Insurance Institute

18.260 *I will now ask you about National Insurance services*

18.270 In the past 12 months, did you use the services of the National Insurance Institute? For example, obtaining confirmation forms of eligibility, receiving benefits, medical committees. Excluding benefits paid automatically.

1. Yes
2. No

18.280 How did you receive the service at the National Insurance Institute? More than one response is possible.

Not including scheduling an appointment.

- 18.280.1 Personal meeting with a clerk
- 18.280.2 Telephone call
- 18.280.3 Internet, including email
- 18.280.6 Another way

18.290 Were you generally satisfied with the service you received?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.300 In general, did you receive clear and exact information about the procedure for receiving services at the National Insurance Institute?

This refers to prerequisite conditions for receiving services, the necessary paperwork, length of waiting time to receive services, etc.

1. Yes, to a great extent

2. Yes, to some extent
3. Not so much
4. Not at all

18.310 Did the length of the wait for receiving services bother you?

1. Bothered me very much
2. Bothered me
3. Did not bother me so much
4. Did not bother me at all

18.320 Are you satisfied with the way the employees at the National Insurance Institute dealt with you?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.330 Are you satisfied with the hours of activity of the National Insurance Institute's offices?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.340 Are you satisfied with the location of the National Insurance Institute in which you received services? For example, closeness to your place of residence, accessibility, safe neighbourhood.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.360 In your opinion, does the National Insurance Institute provide services equally to all groups in the population without regard to sex, age or sector?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

18.370 In general, what is your opinion about the functioning of the National Insurance Institute?

1. Very good
2. Good
3. Not so good
4. Not good at all

18

18.370.1 To what extent do the online internet services of the National Insurance Institute meet your needs? For example: scheduling appointments, filling out and downloading forms.

1. To a great extent
2. To some extent
3. Not so much
4. Not at all
5. Not relevant, did not use

18e. Population and Immigration Authority

18.390 I will now ask you about the Ministry of the Interior, Population and Immigration Authority services.

18.400 In the past 12 months, did you use the services of the Population Authority? For example, issuing an identity card or passport, obtaining

approval forms.

1. Yes
2. No

18.405 Why did you approach the Population Authority Bureau – Ministry of the Interior? More than one response is possible.

18.405.1

1. Change of details, such as marital status or address, in an identity card or passport

18.405.2

2. Issuance or renewal of an identity card - replacement of a worn, stolen, or lost identity card

18.405.3

3. Issuance or renewal of a passport

18.405.4

4. Receipt, extension, or change of a residency visa

18.405.5

5. Employment of a foreign worker in the household or in the nursing field

18.405.6

6. Birth certificate or death certificate

18.410 How did you receive the service at the Population Authority? More than one response is possible.

18.410.1 Personal meeting with a clerk

18.410.2 Telephone call

18.410.3 Internet, including email

18.410.5 Another way

18.420 Were you generally satisfied with the service you received?

1. Very satisfied
2. Satisfied

3. Not so satisfied
4. Not satisfied at all

18.430 In general, did you receive clear and exact information about the procedure for receiving services at the Population Authority? This refers to prerequisite conditions for receiving services, the necessary paperwork, length of waiting time to receive services, etc.

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

18.440 Did the length of the wait for receiving services bother you?

1. Bothered me very much
2. Bothered me
3. Did not bother me so much
4. Did not bother me at all

18.450 Are you satisfied with the way the employees at the Population Authority dealt with you?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.490 In your opinion, does the Population Authority provide services equally to all groups in the population without regard to sex, age or sector?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much

4. Not at all

18.490.1 To what extent do the online internet services of the Population Authority meet your needs? For example: scheduling an appointment, requesting a passport, and activating an identity card.

1. To a great extent
2. To some extent
3. Not so much
4. Not at all
5. Not relevant, did not use

18.500 In general, what is your opinion about the functioning of the Population Authority?

1. Very good
2. Good
3. Not so good
4. Not good at all

18f. Social Services Departments

18.520 I will now ask you about the Social Services Departments, Public Welfare Services in the local authority.

18.530 In the past twelve months, did you use the public welfare services of the local authority? Yes

1. No
2. [Not relevant - the matter was handled through another person]

18.540 Were you generally satisfied with the service you received at the Welfare Bureau?

1. Very satisfied
2. Satisfied
3. Not so satisfied

4. Not satisfied at all

18.540.1 Did the services you received help you deal with the problem for which you turned to the Welfare Bureau?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

18.550 In general, did you receive clear and exact information about the procedure for receiving services at the Welfare Bureau? This refers to prerequisite conditions for receiving services, the planned procedure, the necessary paperwork, length of waiting time to receive services, etc.

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

18.560 Did the length of the wait for receiving services at the Welfare Bureau bother you?

1. Bothered me very much
2. Bothered me
3. Did not bother me so much
4. Did not bother me at all

18.570 Are you satisfied with the way the employees at the Welfare Bureau dealt with you?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.590.1 In what way would you prefer to receive the service you actually received?

1. By telephone conversation
2. Through an online request via a website or email
3. By physically visiting the department
4. A combination of a telephone conversation with a remote online request

18.600 Are you satisfied with the location of the Welfare Bureau in which you received services? For example, closeness to your place of residence, accessibility, safe neighbourhood.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

18.620 In your opinion, do the Welfare Services provide services equally to all groups in the population without regard to sex, age or sector?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

18.630 In general, what is your opinion about the functioning of the Welfare Services in Israel?

1. Very good
2. Good
3. Not so good
4. Not good at all

Chapter 19 The Ministry of Transport and Road Safety

19a. Public Transportation Services – Buses

19.20 In the past 12 months, have you travelled on public transportation buses?

1. Yes
2. No

19.30 In the past 12 months, how often did you travel on buses?

1. Every day or almost every day
2. Once or twice a week
3. Once or twice a month
4. Less than once a month

19.40 Are you satisfied with how close the bus stop is to your place of residence?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

19.50 Do you agree with the following sentence: "Usually, I can travel from my place of residence to my destination in a reasonable amount of time on public transportation"?

1. Agree very much
2. Agree
3. Not so much agree
4. Do not agree at all

19.60 In general, do you receive clear and exact information about the schedule of public transportation?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

19.90 Are you satisfied with the maintenance of the buses? For example, cleanliness, ventilation, and comfort.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

19.100 In general, are you satisfied with the level of safety when travelling on public transportation in terms of your sense of security and safety during the trip?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

19.120 In general, are you satisfied with the frequency of the inter-city bus lines of your city of residence?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all
5. [Doesn't travel on inter-city bus]

19.130 In general, what is your opinion about the functioning of public transportation buses in Israel?

1. Very good
2. Good
3. Not so good
4. Not good at all

19.131 To what extent do the light rail services meet your needs?

1. To a great extent
2. To some extent

3. Not so much
4. Not at all
5. [Not relevant, did not use]

19b. Israel Railways

19.140 *I will now ask you about Israel Railways.*

19.150 In the past 12 months, have you travelled on Israel Railways?

1. Yes
2. No

19.160 In the past 12 months, how often did you travel on Israel Railways?

1. Every day or almost every day
2. Once or twice a week
3. Once or twice a month
4. Three times or more per year
5. Less than three times per year

19.170 Are you satisfied with the location of the train station? For example, accessibility, good parking.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

19.180 In general, do you receive clear and exact information about the train's schedule?

1. Yes, to a great extent
2. Yes, to some extent

3. Not so much
4. Not at all

19.190 In general, are you satisfied with the frequency of the train lines that you used?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

19.210 Are you satisfied with the maintenance of the train cars? For example, cleanliness, ventilation, and comfort.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

19.230.1 To what extent do the online internet services of public transportation for buses and trains meet your needs? For example, schedules, payment.

1. To a great extent
2. To some extent
3. Not really
4. Not at all
5. [Not relevant, did not use]

19.230 In general, what is your opinion about the functioning of Israel Railways?

1. Very good
2. Good
3. Not so good
4. Not good at all

20b. Local Authority Services for Citizens

20.90 *I will now ask you about the services of the < local or regional authority / municipality > in your locality.*

20.100 In the past 12 months, have you used the services of the < local or regional authority / municipality >? For example, receiving approval forms, collection services, dealing with parking tickets, information.

1. Yes
2. No

20.110 How did you receive the service at the < local or regional authority / municipality >? More than one response is possible.

- 20.110.1 Personal meeting with a clerk
- 20.110.2 Telephone call
- 20.110.3 Internet, including email
- 20.110.5 Another way

20.120 In general, are you satisfied with the services you received?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

20.130 In general, are you able to receive clear and exact information about the procedure for receiving services at the < local or regional authority / municipality >? This refers to prerequisite conditions for receiving services, the necessary paperwork, length of waiting time to receive services, etc.

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

20.140 Did the length of the wait for receiving services bother you?

1. Bothered me very much
2. Bothered me
3. Did not bother me so much
4. Did not bother me at all

20.150 Are you satisfied with the way the employees at the < local or regional authority / municipality > dealt with you?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

20.160 Are you generally satisfied with the hours of activity of the offices of the < local or regional authority / municipality >?

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

20.170 Are you satisfied with the location of the office in which you received services? For example, closeness to your place of residence, accessibility, safe neighbourhood.

1. Very satisfied
2. Satisfied
3. Not so satisfied
4. Not satisfied at all

20.130.1 To what extent do the online internet services of the local authority meet your needs? For example: municipal hotline, payments, and cultural events.

1. To a great extent
2. To some extent

3. Not so much
4. Not at all
5. Not relevant, did not use

20.190 In your opinion, does the < local or regional authority / municipality > in your locality provide services equally to all groups in the population without regard to sex, age or sector?

1. Yes, to a great extent
2. Yes, to some extent
3. Not so much
4. Not at all

20.200 In general, what is your opinion about the functioning of the < local or regional authority / municipality > in your locality?

1. Very good
2. Good
3. Not so good
4. Not good at all

20.210 If you were among the decision makers in Israel, in which institution or public service would you initiate improvements?

1. Health services
2. Education system
3. Courts
4. Tax Authority
5. National Insurance Institute
6. Population and Immigration Authority
7. Welfare services
8. Ministry of Transport and Road Safety
9. Local authority services
10. Israel Police

Chapter 21. Trust in the State Institutions

21.130 I will read to you a list of various bodies, organizations and institutions. For each of them, say how much you place your trust in them.

The answer options are: 1-Yes, to a great extent, 2-Yes, to some extent, 3-Not so much, 4-Not at all

Interviewer: Show Page 23 in the booklet

	1-Yes, to a great extent	2-Yes, to some extent	3-Not so much	4-Not at all
21.130.1 The Knesset				
21.130.2 The Government	1	2	3	4
21.130.3 The Justice system	1	2	3	4
21.130.13 The Health system: hospitals and HMOs	1	2	3	4
21.130.6 Israel Police	1	2	3	4
21.130.10 Local authority of your place of residence				
21.130.9 The Media				
21.130.11 IDF				

Don't know; Refuses to answer

21.140 I will now ask you about discrimination in all areas of life:

Discrimination is a different, negative way of dealing with people due to their origin, age, religion, etc.

In the last twelve months, have you felt discrimination because of your:

Question		1 – Yes	2 – No
21.140.1	Age?	1 – Yes	2 – No
21.140.2	Nationality?	1 – Yes	2 – No
21.140.3	Origin or ethnicity?	1 – Yes	2 – No
21.140.4	Religion or belief?	1 – Yes	2 – No
21.140.5	Gender?	1 – Yes	2 – No
21.140.6	Sexual orientation?	1 – Yes	2 – No
21.140.7	Disability, physical or mental?	1 – Yes	2 – No
21.140.8	Skin color?	1 – Yes	2 – No

SAMPLE