



# International Social Survey Programme New Zealand

**New Zealand  
ISSP 2008 – Religion III  
Questionnaire**

## First, some general questions about social issues

1. If you were to consider your life in general these days, how happy or unhappy would you say you are, on the whole...

Very happy	<input type="text" value="1"/>
Fairly happy	<input type="text" value="2"/>
Not very happy	<input type="text" value="3"/>
Not at all happy	<input type="text" value="4"/>
Can't choose	<input type="text" value="8"/>

2. Do you agree or disagree...

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
A husband's job is to earn money; a wife's job is to look after the home and family	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>

3. Generally speaking, would you say that people can be trusted or that you can't be too careful in dealing with people?

People can almost always be trusted	<input type="text" value="1"/>
People can usually be trusted	<input type="text" value="2"/>
You usually can't be too careful in dealing with people	<input type="text" value="3"/>
You almost always can't be too careful in dealing with people	<input type="text" value="4"/>
Can't choose	<input type="text" value="8"/>

4. How much confidence do you have in...

	Complete confidence	A great deal of confidence	Some confidence	Very little confidence	No confidence at all	Can't choose
a. Parliament	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
b. Business and industry	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
c. Churches and religious organisations	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
d. Courts and the legal system	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
e. Schools and the educational system	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>

5. Do you think it is wrong or not wrong if a man and a woman have sexual relations before marriage?

- |                      |                          |
|----------------------|--------------------------|
| Always wrong         | <input type="checkbox"/> |
| Almost always wrong  | <input type="checkbox"/> |
| Wrong only sometimes | <input type="checkbox"/> |
| Not wrong at all     | <input type="checkbox"/> |
| Can't choose         | <input type="checkbox"/> |

6. What about a married person having sexual relations with someone other than his or her husband or wife, is it...

- |                      |                          |
|----------------------|--------------------------|
| Always wrong         | <input type="checkbox"/> |
| Almost always wrong  | <input type="checkbox"/> |
| Wrong only sometimes | <input type="checkbox"/> |
| Not wrong at all     | <input type="checkbox"/> |
| Can't choose         | <input type="checkbox"/> |

7. And what about sexual relations between two adults of the same sex, is it...

- |                      |                          |
|----------------------|--------------------------|
| Always wrong         | <input type="checkbox"/> |
| Almost always wrong  | <input type="checkbox"/> |
| Wrong only sometimes | <input type="checkbox"/> |
| Not wrong at all     | <input type="checkbox"/> |
| Can't choose         | <input type="checkbox"/> |

**8. Do you personally think it is wrong or not wrong for a woman to have an abortion...**

	<b>Always Wrong</b>	<b>Almost Always Wrong</b>	<b>Wrong Only Sometimes</b>	<b>Not wrong at all</b>	<b>Can't choose</b>
a. If there is a strong chance of serious defect in the baby	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8
b. If the family has a very low income and cannot afford any more children	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8
c. If the woman's health is seriously endangered by the pregnancy	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8
d. If the woman became pregnant as a result of rape	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8

**9. We are interested in the extent to which you have moved from one kind of place to another. Which do you think is most like your experience of life?**

I have lived in different countries	<input type="checkbox"/> 1
I have lived in different places in the same country	<input type="checkbox"/> 2
I have lived in different neighbourhoods in the same place	<input type="checkbox"/> 3
I have always lived in the same neighbourhood	<input type="checkbox"/> 4

**10. How much do you agree or disagree with each of the following...**

	<b>Strongly agree</b>	<b>Agree</b>	<b>Neither agree nor disagree</b>	<b>Disagree</b>	<b>Strongly disagree</b>	<b>Can't choose</b>
a. Religious leaders should not try to influence how people vote in elections	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
b. Religious leaders should not try to influence government decisions	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

**11. Please consider the following statements and tell me whether you agree or disagree.**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. Overall, modern science does more harm than good	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
b. We trust too much in science and not enough in religious faith	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
c. Looking around the world, religions bring more conflict than peace	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
d. People with very strong religious beliefs are often too intolerant of others	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

**12. Do you think that churches and religious organisations in this country have too much power or too little power?**

Far too much power	<input type="checkbox"/> 1
Too much power	<input type="checkbox"/> 2
About the right amount of power	<input type="checkbox"/> 3
Too little power	<input type="checkbox"/> 4
Far too little power	<input type="checkbox"/> 5
Can't choose	<input type="checkbox"/> 8

**13. How much do you agree or disagree with the following statements?**

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. All religious groups in New Zealand should have equal rights	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8
b. We must respect all religions	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 8

**14. People have different religions and different religious views. Would you accept a person from a different religion or with a very different religious view from yours...**

	Definitely accept	Probably accept	Probably not accept	Definitely not accept	Can't choose
a. Marrying a relative of yours	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8
b. Being a candidate of the political party you prefer	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8

**15. There are some people whose views are considered extreme by the majority. Consider religious extremists, that is people who believe that their religion is the only true faith and all other religions should be considered as enemies. Do you think such people should be allowed to...**

	Yes, definitely	Yes, probably	No, probably not	No, definitely not	Can't choose
a. Hold public meetings to express their views	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8
b. Publish books expressing their views	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8

**16. Please indicate which statement below comes closest to expressing what you believe about God.**

I don't believe in God	<input type="checkbox"/> 1
I don't know whether there is a God and I don't believe there is any way to find out	<input type="checkbox"/> 2
I don't believe in a personal God, but I do believe in a Higher Power of some kind	<input type="checkbox"/> 3
I find myself believing in God some of the time, but not at others	<input type="checkbox"/> 4
While I have doubts, I feel that I do believe in God	<input type="checkbox"/> 5
I know God really exists and I have no doubts about it	<input type="checkbox"/> 6

### 17. Which best describes your belief about God?

I don't believe in God now, and I never have	<input type="checkbox"/>
I don't believe in God now, but I used to	<input type="checkbox"/>
I believe in God now, but I didn't used to	<input type="checkbox"/>
I believe in God now and I always have	<input type="checkbox"/>
Can't choose	<input type="checkbox"/>

### 18. Do you believe in...

	Yes, definitely	Yes, probably	No, probably not	No, definitely not	Can't choose
a. Life after death	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Heaven	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Religious miracles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Reincarnation – being reborn in this world again and again	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Nirvana	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The supernatural powers of deceased ancestors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 19. Do you agree or disagree with the following...

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Can't choose
a. There is a God who concerns Himself with every human being personally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. There is little that people can do to change the course of their lives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. To me, life is meaningful only because God exists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. In my opinion, life does not serve any purpose	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Life is only meaningful if you provide the meaning yourself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I have my own way of connecting with God without churches or religious services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**20. What was your mother's religious preference when you were a child? Was it Protestant, Catholic, Jewish, some other religion, or no religion?**

- |  |                          |   |
|--|--------------------------|---|
| Protestant                                   | <input type="checkbox"/> | 1 |
| Catholic                                     | <input type="checkbox"/> | 2 |
| Jewish                                       | <input type="checkbox"/> | 3 |
| Orthodox (such as Greek or Russian Orthodox) | <input type="checkbox"/> | 4 |
| Muslim                                       | <input type="checkbox"/> | 5 |
| Other (Please specify) _____                 | <input type="checkbox"/> | 6 |
| No religion                                  | <input type="checkbox"/> | 7 |
| Don't know                                   | <input type="checkbox"/> | 8 |

**If Protestant: What specific denomination was that?**

\_\_\_\_\_

**21. What was your father's religious preference when you were a child? Was it Protestant, Catholic, Jewish, some other religion, or no religion?**

- |  |                          |   |
|--|--------------------------|---|
| Protestant                                   | <input type="checkbox"/> | 1 |
| Catholic                                     | <input type="checkbox"/> | 2 |
| Jewish                                       | <input type="checkbox"/> | 3 |
| Orthodox (such as Greek or Russian Orthodox) | <input type="checkbox"/> | 4 |
| Muslim                                       | <input type="checkbox"/> | 5 |
| Other (Please specify) _____                 | <input type="checkbox"/> | 6 |
| No religion                                  | <input type="checkbox"/> | 7 |
| Don't know                                   | <input type="checkbox"/> | 8 |

**If Protestant: What specific denomination was that?**

\_\_\_\_\_

**22. What religion, if any, were you raised in? Was it Protestant, Catholic, Jewish, some other religion, or no religion?**

- |  |                          |   |
|--|--------------------------|---|
| Protestant                                   | <input type="checkbox"/> | 1 |
| Catholic                                     | <input type="checkbox"/> | 2 |
| Jewish                                       | <input type="checkbox"/> | 3 |
| Orthodox (such as Greek or Russian Orthodox) | <input type="checkbox"/> | 4 |
| Muslim                                       | <input type="checkbox"/> | 5 |
| Other (Please specify) _____                 | <input type="checkbox"/> | 6 |
| No religion                                  | <input type="checkbox"/> | 7 |
| Don't know                                   | <input type="checkbox"/> | 8 |

**If Protestant: What specific denomination was that?**

\_\_\_\_\_

**23. What is your husband's/wife's religious preference? Is it Protestant, Catholic, Jewish, some other religion, or no religion?**

- |  |                          |   |
|--|--------------------------|---|
| Protestant                                   | <input type="checkbox"/> | 1 |
| Catholic                                     | <input type="checkbox"/> | 2 |
| Jewish                                       | <input type="checkbox"/> | 3 |
| Orthodox (such as Greek or Russian Orthodox) | <input type="checkbox"/> | 4 |
| Muslim                                       | <input type="checkbox"/> | 5 |
| Other (Please specify) _____                 | <input type="checkbox"/> | 6 |
| No religion                                  | <input type="checkbox"/> | 7 |
| Don't know                                   | <input type="checkbox"/> | 8 |
| Not married or living as married             | <input type="checkbox"/> | 9 |

**If Protestant: What specific denomination was that?**

\_\_\_\_\_

**24. When you were a child, how often did your mother attend religious services?**

- |                              |                          |    |
|------------------------------|--------------------------|----|
| Never                        | <input type="checkbox"/> | 1  |
| Less than once a year        | <input type="checkbox"/> | 2  |
| About once or twice a year   | <input type="checkbox"/> | 3  |
| Several times a year         | <input type="checkbox"/> | 4  |
| About once a month           | <input type="checkbox"/> | 5  |
| 2-3 times a month            | <input type="checkbox"/> | 6  |
| Nearly every week            | <input type="checkbox"/> | 7  |
| Every week                   | <input type="checkbox"/> | 8  |
| Several times a week         | <input type="checkbox"/> | 9  |
| No mother/mother not present | <input type="checkbox"/> | 10 |
| Can't say/Can't remember     | <input type="checkbox"/> | 99 |

**25. When you were a child, how often did your father attend religious services?**

- |                              |                          |    |
|------------------------------|--------------------------|----|
| Never                        | <input type="checkbox"/> | 1  |
| Less than once a year        | <input type="checkbox"/> | 2  |
| About once or twice a year   | <input type="checkbox"/> | 3  |
| Several times a year         | <input type="checkbox"/> | 4  |
| About once a month           | <input type="checkbox"/> | 5  |
| Two or three times a month   | <input type="checkbox"/> | 6  |
| Nearly every week            | <input type="checkbox"/> | 7  |
| Every week                   | <input type="checkbox"/> | 8  |
| Several times a week         | <input type="checkbox"/> | 9  |
| No father/father not present | <input type="checkbox"/> | 10 |
| Can't say/Can't remember     | <input type="checkbox"/> | 99 |

**26. And what about when you were around 11 or 12, how often did you attend religious services then?**

- |                            |                          |    |
|----------------------------|--------------------------|----|
| Never                      | <input type="checkbox"/> | 1  |
| Less than once a year      | <input type="checkbox"/> | 2  |
| About once or twice a year | <input type="checkbox"/> | 3  |
| Several times a year       | <input type="checkbox"/> | 4  |
| About once a month         | <input type="checkbox"/> | 5  |
| Two or three times a month | <input type="checkbox"/> | 6  |
| Nearly every week          | <input type="checkbox"/> | 7  |
| Every week                 | <input type="checkbox"/> | 8  |
| Several times a week       | <input type="checkbox"/> | 9  |
| Can't say/Can't remember   | <input type="checkbox"/> | 99 |

**Now thinking about the present...**

**27. About how often do you pray?**

- |                            |                          |    |
|----------------------------|--------------------------|----|
| Never                      | <input type="checkbox"/> | 1  |
| Less than once a year      | <input type="checkbox"/> | 2  |
| About once or twice a year | <input type="checkbox"/> | 3  |
| Several times a year       | <input type="checkbox"/> | 4  |
| About once a month         | <input type="checkbox"/> | 5  |
| Two or three times a month | <input type="checkbox"/> | 6  |
| Nearly every week          | <input type="checkbox"/> | 7  |
| Every week                 | <input type="checkbox"/> | 8  |
| Several times a week       | <input type="checkbox"/> | 9  |
| Once a day                 | <input type="checkbox"/> | 10 |
| Several times a day        | <input type="checkbox"/> | 11 |

**28. How often do you take part in the activities or organisations of a church or place of worship other than attending services?**

- |                            |                          |   |
|----------------------------|--------------------------|---|
| Never                      | <input type="checkbox"/> | 1 |
| Less than once a year      | <input type="checkbox"/> | 2 |
| About once or twice a year | <input type="checkbox"/> | 3 |
| Several times a year       | <input type="checkbox"/> | 4 |
| About once a month         | <input type="checkbox"/> | 5 |
| Two or three times a month | <input type="checkbox"/> | 6 |
| Nearly every week          | <input type="checkbox"/> | 7 |
| Every week                 | <input type="checkbox"/> | 8 |
| Several times a week       | <input type="checkbox"/> | 9 |

**29. For religious reasons do you have in your home a shrine, altar, or a religious object on display such as an icon, retablos, mezuzah, menorah, or crucifix?**

Yes ☐ 1  
No ☐ 2

**30. How often do you visit a holy place for religious reasons, such as going to a shrine, temple, church or mosque?**

**PLEASE DO NOT COUNT ATTENDING REGULAR RELIGIOUS SERVICES AT YOUR USUAL PLACE OF WORSHIP**

Never ☐ 1  
Less than once a year ☐ 2  
About once or twice a year ☐ 3  
Several times a year ☐ 4  
About once a month or more ☐ 5

**31. Would you describe yourself as ...**

Extremely religious ☐ 1  
Very religious ☐ 2  
Somewhat religious ☐ 3  
Neither religious nor non-religious ☐ 4  
Somewhat non-religious ☐ 5  
Very non-religious ☐ 6  
Extremely non-religious ☐ 7  
Can't choose ☐ 8

**32. What best describes you:**

I follow a religion and consider myself to be a spiritual person interested in the sacred or the supernatural ☐ 1  
I follow a religion, but don't consider myself to be a spiritual person interested in the sacred or the supernatural ☐ 2  
I don't follow a religion, but consider myself to be a spiritual person interested in the sacred or the supernatural ☐ 3  
I don't follow a religion and don't consider myself to be a spiritual person interested in the sacred or the supernatural ☐ 4  
Can't choose ☐ 8

**33. Which of the following statements come closest to your own views?**

- |  |                            |
|--|----------------------------|
| There is very little truth in any religion | <input type="checkbox"/> 1 |
| There are basic truths in many religions   | <input type="checkbox"/> 2 |
| There is truth only in one religion        | <input type="checkbox"/> 3 |
| Can't choose                               | <input type="checkbox"/> 8 |

**34. Do you agree or disagree that practising a religion helps people to ...**

- |   | <b>Strongly<br/>Agree</b>  | <b>Agree</b>               | <b>Neither<br/>agree nor<br/>disagree</b> | <b>Disagree</b>            | <b>Strongly<br/>Disagree</b> | <b>Can't<br/>choose</b>    |
|---|----------------------------|----------------------------|---|----------------------------|------------------------------|----------------------------|
| a. Find inner peace and happiness             | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3                | <input type="checkbox"/> 4 | <input type="checkbox"/> 5   | <input type="checkbox"/> 8 |
| b. Make friends                               | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3                | <input type="checkbox"/> 4 | <input type="checkbox"/> 5   | <input type="checkbox"/> 8 |
| c. Gain comfort in times of trouble or sorrow | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3                | <input type="checkbox"/> 4 | <input type="checkbox"/> 5   | <input type="checkbox"/> 8 |
| d. Meet the right kind of people              | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3                | <input type="checkbox"/> 4 | <input type="checkbox"/> 5   | <input type="checkbox"/> 8 |

**35. Would you say that you have been “born again” or have had a “born again” experience; i.e., a turning point in your life when you committed yourself to Christ?**

- |     |                            |
|-----|----------------------------|
| Yes | <input type="checkbox"/> 1 |
| No  | <input type="checkbox"/> 2 |

**36. Which of these statements comes closest to describing your feelings about the Bible?**

- |   |                            |
|---|----------------------------|
| The Bible is the actual word of God and it is to be taken literally, word for word                | <input type="checkbox"/> 1 |
| The Bible is the inspired word of God but not everything should be taken literally, word for word | <input type="checkbox"/> 2 |
| The Bible is an ancient book of fables, legends, history, and moral precepts recorded by man      | <input type="checkbox"/> 3 |
| This does not apply to me   | <input type="checkbox"/> 4 |
| Can't choose  | <input type="checkbox"/> 8 |

**37. Has there ever been a turning point in your life when you made a new and personal commitment to religion?**

Yes ☐ 1  
No ☐ 2

**38. During the last year, did you make some personal sacrifice as an expression of your faith such as by fasting, following a special diet, or giving up some activity during a holy season such as Lent or Ramadan?**

Yes ☐ 1  
No ☐ 2

**39. Now please think about something different. Please tick one box on each line below to show whether you think each statement is true or false.**

	Definitely true	Probably true	Probably false	Definitely false	Can't choose
a. Good luck charms sometimes do bring good luck	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8
b. Some fortune tellers really can foresee the future	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8
c. Some faith healers do have God-given healing powers	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8
d. A person's star sign at birth, or horoscope, can affect the course of their future	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 8

**40. Suppose a law was passed which conflicted with your religious principles and teachings. Would you ...**

Definitely follow the law ☐ 1  
Probably follow the law ☐ 2  
Probably follow your religious principles ☐ 3  
Definitely follow your religious principles ☐ 4  
I have no religious principles ☐ 5  
Can't choose ☐ 8

**41. What is your personal attitude towards members of the following groups?**

	<b>Very positive</b>	<b>Somewhat positive</b>	<b>Neither positive nor negative</b>	<b>Somewhat negative</b>	<b>Very negative</b>	<b>Can't choose</b>
a. Christians	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
b. Muslims	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
c. Hindus	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
d. Buddhists	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
e. Jews	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>
f. Atheists or non-believers	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="3"/>	<input type="text" value="4"/>	<input type="text" value="5"/>	<input type="text" value="8"/>

## About Yourself

So that we can be sure we have a good cross section of people in our survey, would you please answer the following questions about yourself. Remember that all responses remain *STRICTLY CONFIDENTIAL*.

56. Please indicate the year in which you were born: Year: 19 \_\_\_\_\_

57. What is your gender? Male ☐\_1\_ Female ☐\_2\_

58. Which of these categories best describes your *current* marital status?

Married	<input type="checkbox"/> _1_
Widowed	<input type="checkbox"/> _2_
Divorced	<input type="checkbox"/> _3_
Separated	<input type="checkbox"/> _4_
Single, never married	<input type="checkbox"/> _5_

59. Do you live together with a partner?

Yes ☐\_1\_ No ☐\_2\_

60. INCLUDING YOURSELF, how many people are there in your household?

Number in household : \_\_\_\_\_

How many children under the age of 18 are in your household?

Children under 18 years \_\_\_\_\_



**61. Which of the following categories describe your ethnic origin?**

**PLEASE TICK AS MANY AS YOU NEED TO SHOW WHICH ETHNIC GROUP(S) YOU BELONG TO**

- |                                |                          |   |
|--------------------------------|--------------------------|---|
| N Z Maori                      | <input type="checkbox"/> | 1 |
| N Z European or Pakeha         | <input type="checkbox"/> | 1 |
| Other European                 | <input type="checkbox"/> | 1 |
| Samoan                         | <input type="checkbox"/> | 1 |
| Cook Island Maori              | <input type="checkbox"/> | 1 |
| Tongan                         | <input type="checkbox"/> | 1 |
| Niuean                         | <input type="checkbox"/> | 1 |
| Chinese                        | <input type="checkbox"/> | 1 |
| Indian                         | <input type="checkbox"/> | 1 |
| Other (such as Fijian, Korean) | <input type="checkbox"/> | 1 |

**62. What is your current religion or religious denomination?**

- |                            |                          |    |                       |                          |    |
|----------------------------|--------------------------|----|-----------------------|--------------------------|----|
| Anglican                   | <input type="checkbox"/> | 1  | Methodist             | <input type="checkbox"/> | 13 |
| Assemblies of God          | <input type="checkbox"/> | 2  | Muslim                | <input type="checkbox"/> | 14 |
| Baptist                    | <input type="checkbox"/> | 3  | Orthodox              | <input type="checkbox"/> | 15 |
| Brethren                   | <input type="checkbox"/> | 4  | Pentecostal           | <input type="checkbox"/> | 16 |
| Buddhist                   | <input type="checkbox"/> | 5  | Presbyterian          | <input type="checkbox"/> | 17 |
| Catholic                   | <input type="checkbox"/> | 6  | Protestant            | <input type="checkbox"/> | 18 |
| Christian                  | <input type="checkbox"/> | 7  | Ratana                | <input type="checkbox"/> | 19 |
| Jehovah's Witness          | <input type="checkbox"/> | 8  | Ringatu               | <input type="checkbox"/> | 20 |
| Jewish                     | <input type="checkbox"/> | 9  | Salvation Army        | <input type="checkbox"/> | 21 |
| Hindu                      | <input type="checkbox"/> | 10 | Seventh Day Adventist | <input type="checkbox"/> | 22 |
| Lutheran                   | <input type="checkbox"/> | 11 | Other                 | <input type="checkbox"/> | 23 |
| Mormon (Latter Day Saints) | <input type="checkbox"/> | 12 | No religion           | <input type="checkbox"/> | 24 |

**63. How often do you attend a religious service?**

- |                            |                          |
|----------------------------|--------------------------|
| Never                      | <input type="checkbox"/> |
| Less than once a year      | <input type="checkbox"/> |
| Once a year                | <input type="checkbox"/> |
| Several times a year       | <input type="checkbox"/> |
| Once a month               | <input type="checkbox"/> |
| Two or three times a month | <input type="checkbox"/> |
| Once a week                | <input type="checkbox"/> |
| Several times a week       | <input type="checkbox"/> |
| Can't choose/Don't know    | <input type="checkbox"/> |

**64. Which one of these categories best describes the amount of formal education you have had?**

- |   |                          |
|---|--------------------------|
| No formal schooling                             | <input type="checkbox"/> |
| A few years of primary school                   | <input type="checkbox"/> |
| Primary/Intermediate up to Standard 6 or Form 2 | <input type="checkbox"/> |
| Secondary school for up to 3 years              | <input type="checkbox"/> |
| Secondary school for 4 years or more            | <input type="checkbox"/> |
| University/polytechnic for up to 3 years        | <input type="checkbox"/> |
| University/polytechnic for 4 years or more      | <input type="checkbox"/> |

**65. Which of these categories best describes your highest formal qualification?**

- |   |                          |
|---|--------------------------|
| No formal qualification   | <input type="checkbox"/> |
| Proficiency   | <input type="checkbox"/> |
| School C, Nat Cert Level 1, NCEA Level 1                                | <input type="checkbox"/> |
| Sixth Form Cert, Nat Cert Level 2, UE, NCEA Level 2                     | <input type="checkbox"/> |
| Higher Sch Cert, Higher Leaving Cert, Bursary/Scholarship, NCEA Level 3 | <input type="checkbox"/> |
| Trade or Professional certificate                                       | <input type="checkbox"/> |
| Diploma below degree level  | <input type="checkbox"/> |
| University degree   | <input type="checkbox"/> |
| Post-graduate or higher qualification                                   | <input type="checkbox"/> |

66. Which one of these categories best describes your current employment status?

PLEASE TICK *ONE* BOX ONLY

**CURRENTLY WORKING**

- Employed – full time (35+ hours weekly) ☐ 1
- Employed - part time (15-35 hours weekly) ☐ 2
- Employed - less than 15 hours/temporarily out of work ☐ 3
- Helping family member ☐ 4

**NOT CURRENTLY WORKING**

- Unemployed or beneficiary ☐ 5
- Student ☐ 6
- Retired ☐ 7
- Housewife/husband - home duties ☐ 8
- Permanently disabled ☐ 9

67. How many hours, on average, do you *usually* work in a normal week?

Number of hours: \_\_\_\_\_ OR: Doesn't apply to me ☐ 99

68. What is your *main* occupation?

- If you have more than one job, business or professional practice, please give the occupation for the job you spend the most time at.
- Please describe fully, using two words or more; for example, builders' labourer *not* labourer, accounts clerk *not* clerk, deer farmer *not* farmer.

Main occupation: \_\_\_\_\_ OR: not applicable ☐ 99

69. Do you supervise, or are you responsible for, the work of any other people?

Yes ☐ 1 No ☐ 2

If yes, how many people do you supervise?

Number of people: \_\_\_\_\_

**70. Which of these categories best describes your current employment status?**

Public sector (i.e. local government, Government) ☐ <sub>1</sub>

Publicly-owned private sector organisation ☐ <sub>2</sub>

Privately-owned private sector organisation ☐ <sub>3</sub>

Non-profit/Charity/Welfare organisation ☐ <sub>4</sub>

Self-employed ☐ <sub>5</sub>

Not working ☐ <sub>6</sub>

**71. If you are self-employed, how many employees do you currently have?**

Number of employees: \_\_\_\_\_

**72. Have you ever been a member of a Trade Union?**

Currently a member ☐ <sub>1</sub>

Once a member, but not now ☐ <sub>2</sub>

Never a member ☐ <sub>3</sub>

**IF YOU ARE MARRIED OR LIVING WITH A PARTNER, PLEASE ANSWER QUESTION 73. OTHERWISE, PLEASE GO TO QUESTION 77.**

**73. Which one of the following categories best describes your partner's or spouse's current employment status?**

**PLEASE TICK *ONE* BOX ONLY**

**CURRENTLY WORKING**

- Employed – full time (35+ hours weekly) ☐ <sub>1</sub>
- Employed - part time (15-35 hours weekly) ☐ <sub>2</sub>
- Employed - less than 15 hours/temporarily out of work ☐ <sub>3</sub>
- Helping family member ☐ <sub>4</sub>

**NOT CURRENTLY WORKING**

- Unemployed or beneficiary ☐ <sub>5</sub>
- Student ☐ <sub>6</sub>
- Retired ☐ <sub>7</sub>
- Housewife/husband - home duties ☐ <sub>8</sub>
- Permanently disabled ☐ <sub>9</sub>

**74. How many hours, on average, does your partner or spouse *usually* work in a normal week?**

Number of hours: \_\_\_\_\_ OR: Doesn't apply to me ☐ <sub>99</sub>

**75. What is your *partner's* or *spouse's* main occupation?**

- If your partner or spouse has more than one job, business or professional practice, please give the occupation for the job he or she spends the most time at.
- Please describe fully, using two words or more; for example, builders' labourer *not* labourer, accounts clerk *not* clerk, deer farmer *not* farmer.

Main occupation: \_\_\_\_\_ OR: not applicable ☐ <sub>99</sub>

**76. Which of these categories best describes who your partner or spouse works for (or who they worked for most recently)?**

- |   |                            |
|---|----------------------------|
| Public sector (i.e. local government, Government) | <input type="checkbox"/> 1 |
| Publicly-owned private sector organisation        | <input type="checkbox"/> 2 |
| Privately-owned private sector organisation       | <input type="checkbox"/> 3 |
| Non-profit/Charity/Welfare organisation           | <input type="checkbox"/> 4 |
| Self-employed                                     | <input type="checkbox"/> 5 |
| Not working                                       | <input type="checkbox"/> 6 |

**77. At the 2005 General Election, who did you vote for?**

- |                                  | <b>Electorate<br/>candidate</b> | <b>Party list</b>           |
|----------------------------------|---------------------------------|-----------------------------|
| Didn't vote/not eligible to vote | <input type="checkbox"/> 1      | <input type="checkbox"/> 1  |
| Act                              | <input type="checkbox"/> 2      | <input type="checkbox"/> 2  |
| Alliance                         | <input type="checkbox"/> 3      | <input type="checkbox"/> 3  |
| Destiny                          | <input type="checkbox"/> 4      | <input type="checkbox"/> 4  |
| Green                            | <input type="checkbox"/> 5      | <input type="checkbox"/> 5  |
| Labour                           | <input type="checkbox"/> 6      | <input type="checkbox"/> 6  |
| Maori Party                      | <input type="checkbox"/> 7      | <input type="checkbox"/> 7  |
| National                         | <input type="checkbox"/> 8      | <input type="checkbox"/> 8  |
| New Zealand First                | <input type="checkbox"/> 9      | <input type="checkbox"/> 9  |
| Progressive Coalition            | <input type="checkbox"/> 10     | <input type="checkbox"/> 10 |
| United Future                    | <input type="checkbox"/> 11     | <input type="checkbox"/> 11 |
| Other                            | <input type="checkbox"/> 12     | <input type="checkbox"/> 12 |
| Don't know                       | <input type="checkbox"/> 13     | <input type="checkbox"/> 13 |

**78. Where on the following scale would you say your political views lie?**

- |                    |                            |
|--------------------|----------------------------|
| Far left           | <input type="checkbox"/> 1 |
| Left/centre left   | <input type="checkbox"/> 2 |
| Centre/liberal     | <input type="checkbox"/> 3 |
| Right/conservative | <input type="checkbox"/> 4 |
| Far right          | <input type="checkbox"/> 5 |
| Other              | <input type="checkbox"/> 6 |
| Have no preference | <input type="checkbox"/> 7 |
| Don't know         | <input type="checkbox"/> 8 |

**79. Which of the following categories best describes your own yearly income from all sources before tax?**

- |                      |                             |
|----------------------|-----------------------------|
| \$10,000 or less     | <input type="checkbox"/> 1  |
| \$10,001 - \$15,000  | <input type="checkbox"/> 2  |
| \$15,001 - \$20,000  | <input type="checkbox"/> 3  |
| \$20,001 - \$25,000  | <input type="checkbox"/> 4  |
| \$25,001 - \$30,000  | <input type="checkbox"/> 5  |
| \$30,001 - \$40,000  | <input type="checkbox"/> 6  |
| \$40,001 - \$50,000  | <input type="checkbox"/> 7  |
| \$50,001 - \$70,000  | <input type="checkbox"/> 8  |
| \$70,001 - \$100,000 | <input type="checkbox"/> 9  |
| \$101,000 or more    | <input type="checkbox"/> 10 |

**80. Which of the following categories best describes the total yearly income of everyone in your household from all sources before tax?**

- |                      |                             |
|----------------------|-----------------------------|
| \$15,000 or less     | <input type="checkbox"/> 1  |
| \$15,001 - \$20,000  | <input type="checkbox"/> 2  |
| \$20,001 - \$30,000  | <input type="checkbox"/> 3  |
| \$30,001 - \$40,000  | <input type="checkbox"/> 4  |
| \$40,001 - \$50,000  | <input type="checkbox"/> 5  |
| \$50,001 - \$60,000  | <input type="checkbox"/> 6  |
| \$60,001 - \$70,000  | <input type="checkbox"/> 7  |
| \$70,001 - \$80,000  | <input type="checkbox"/> 8  |
| \$80,001 - \$100,000 | <input type="checkbox"/> 9  |
| \$100,001 or more    | <input type="checkbox"/> 10 |

81. In terms of your social status, which *one* of the following categories do you think you fit into?

Highest social class	<input type="text" value="10"/>
	<input type="text" value="9"/>
	<input type="text" value="8"/>
	<input type="text" value="7"/>
	<input type="text" value="6"/>
	<input type="text" value="5"/>
	<input type="text" value="4"/>
	<input type="text" value="3"/>
	<input type="text" value="2"/>
Lowest social class	<input type="text" value="1"/>

82. And in which area do you live?

Northland	<input type="text" value="1"/>	Horowhenua	<input type="text" value="12"/>
Auckland	<input type="text" value="2"/>	Wellington	<input type="text" value="13"/>
Thames Valley	<input type="text" value="3"/>	Wairarapa	<input type="text" value="14"/>
Bay of Plenty	<input type="text" value="4"/>	Nelson Bays	<input type="text" value="15"/>
Waikato	<input type="text" value="5"/>	Marlborough	<input type="text" value="16"/>
Tongariro	<input type="text" value="6"/>	West Coast	<input type="text" value="17"/>
East Cape	<input type="text" value="7"/>	Canterbury	<input type="text" value="18"/>
Hawkes Bay	<input type="text" value="8"/>	Aorangi	<input type="text" value="19"/>
Taranaki	<input type="text" value="9"/>	Clutha-Central Otago	<input type="text" value="20"/>
Wanganui	<input type="text" value="10"/>	Coastal-North Otago	<input type="text" value="21"/>
Manawatu-Rangitikei	<input type="text" value="11"/>	Southland	<input type="text" value="22"/>

83. Do you live in a rural or urban area?

Rural	<input type="text" value="1"/>
Urban	<input type="text" value="2"/>



**84. Would you describe the place where you live as...**

- |  |                          |
|--|--------------------------|
| A big city                             | <input type="checkbox"/> |
| The suburbs or outskirts of a big city | <input type="checkbox"/> |
| A small city or town                   | <input type="checkbox"/> |
| A country village                      | <input type="checkbox"/> |
| A farm or home in the country          | <input type="checkbox"/> |

**85. What is the population of place where you live?**

- |                        |                          |
|------------------------|--------------------------|
| 100,000 or more        | <input type="checkbox"/> |
| 50,000 – 99,000        | <input type="checkbox"/> |
| 30,000 – 49,999        | <input type="checkbox"/> |
| 10,000 – 29,999        | <input type="checkbox"/> |
| 1,000 – 9,999          | <input type="checkbox"/> |
| Less than 1,000        | <input type="checkbox"/> |
| Farm or rural property | <input type="checkbox"/> |

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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