**SUSESO / ISTAS21 Questionnaire**

**Long Version**

Please answer ALL the questions. Remember that there are no good or wrong answers. Your answers will be treated with absolute confidentiality.

**General Section**

**Demographic data**

Gender

1. Male

2. Female.

How old are you?

1. Less than 26 years old

2. Between 26 and 35 years old

3. Between 36 and 45 years old

4. Between 46 and 55 years old

5. More than 55 years old

**General Health**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| N | Question | Excellent | Very good | Good | Fair | Poor |
| SG1 | In general, would you say your health is |  |  |  |  |  |

**How true or false is each of the following statements for you?**

Please answer ALL questions and choose ONE RESPONSE for EACH ONE.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Nº | Question | Definitely true | Mostly true | Don’t know | Mostly false | Definitely false |
| SG2 | I seem to get sick a little easier than other people |  |  |  |  |  |
| SG3 | I am as healthy as anybody I know |  |  |  |  |  |
| SG4 | I expect my health to get worse |  |  |  |  |  |
| SG5 | My health is excellent |  |  |  |  |  |

The following 9 questions are about how did you feel and how things have been for you DURING THE LAST 4 WEEKS. For each question, please give the answer that comes closest to the way you have been feeling.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Nº | Question | All of the time | Most of the time | A good bit of the time | A little bit of the time | None of the time |
| SM1 | Have you been a very nervous person? |  |  |  |  |  |
| SM2 | Have you felt so down in the dumps that nothing could cheer you up? |  |  |  |  |  |
| SM3 | Have you felt calm and peaceful? |  |  |  |  |  |
| SM4 | Have you felt downhearted and blue? |  |  |  |  |  |
| SM5 | Have you been a happy person? |  |  |  |  |  |
| VT1 | Did you feel full of pep? |  |  |  |  |  |
| VT2 | Did you have a lot of energy? |  |  |  |  |  |
| VT3 | Did you feel worn out? |  |  |  |  |  |
| VT4 | Did you feel tired? |  |  |  |  |  |

### AT1. In the past 12 months, have you ever had a work accident such as a blow, fall, injury, cut, fracture, burn or poisoning? (Exclude commuting accidents)

No

Yes

### EP1. Do you have or have you had any diagnosed illness that has been provoked and / or aggravated by work?

No

Yes

**DURING THE LAST FOUR WEEKS, how often have you had the following problems?**

Please choose ONE ANSWER for EACH statement.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Nº | Question | **Always** | **Often** | **Sometimes** | **Seldom** | **Never/ hardly ever** |
| SR1 | I have not wanted to speak with anyone/have been withdrawn. |  |  |  |  |  |
| SR2 | I have not been able to sleep well |  |  |  |  |  |
| SR3 | I have been irritable |  |  |  |  |  |
| SR4 | I have felt overwhelmed |  |  |  |  |  |
| SR5 | Have you felt a tight chest or chest pain? |  |  |  |  |  |
| SR6 | Have you been short of breath? |  |  |  |  |  |
| SR7 | Have you felt tension in various muscles? |  |  |  |  |  |
| SR8 | Have you had headaches? |  |  |  |  |  |
| SR9 | Have you had problems in concentrating? |  |  |  |  |  |
| SR10 | Have you had difficulty in taking decisions? |  |  |  |  |  |
| SR11 | Have you had difficulty with remembering? |  |  |  |  |  |
| SR12 | Have you found it difficult to think clearly? |  |  |  |  |  |

**Current Work and Employment**

TE1. In what geographical unit (branch, floor, region, etc.) do you work? (List of units considered)

TE2. What status, profession or position are you in? (List of estates, professions, offices, etc.)

TE3. In which department, unit or section do you work? (List of departments, units, etc.)

TE4. In the past year, have you worked in two or more sections or departments at the same time?

No

Yes

### TE5. In the past year, have you had two or more bosses or supervisors at the same time?

0. No

1. Sí

### TE6. Does the work you do match your salary?

0. Yes

1. No, the work I do is above what is recognized in the salary

2. No, the work I do is below what is recognized in the salary

3. I don’t know

### TE7. How long have you been working in this company or institution?

0. From 0 to 6 months

1. More than 6 months and up to 2 years

2. More than 2 years and up to 5 years

3. More than 5 years and up to 10 years

4. More than 10 years

### TE8. Do you consider that the promotions you have had are in harmony with the time you have been in the company or institution?

0. No

1. Yes

### TE9. Your working day is:

0. part time

1. full time

2. not subject to schedule compliance

### TE10. Your work schedule is:

1. daytime (morning and afternoon)

2. fixed morning shift

3. fixed afternoon shift

4. fixed night shift

5. rotating shifts

### TE11. Your working week is:

1. from Monday to Friday

2. from Monday to Saturday

3. only on week-ends or holidays

4. from Monday to Friday, sometimes on Saturday, Sunday or holidays

5. full week, including Saturday, Sunday, and holidays

### TE12. If in your work they change your schedule (shift, starting time, finishing time, days of the week), how far in advance are you informed?

0. They do not change my schedule or work days

1. I am usually informed with several days in advance and it does not cause me major problems.

2. I am usually informed a few days in advance, but it causes me difficulties in other aspects of my life.

3. I am usually informed from one day to another.

4. I am usually informed on the same day.

### TE13. Indicate how many hours per week you worked for the company or institution last week:

\_\_\_\_ hours per week

### TE14. If in the previous question you scored less than 45 (44 public sector) hours, state the reason. If you scored more than 45 (44 public sector) hours, check the first alternative.

0. Last week I worked 45 (44) hours or more

1. I work part-time for this company or institution.

2. I have an irregular distribution of my working day (I do not always work the same hours)

3. I've been on vacation, sick or with permission

4. Other motives.

### TE15. What type of employment relationship do you have with the company or institution?

1. I have an indefinite contract or my position is permanent

2. I have a temporary contract

3. I work by tasks or projects

4. I am hired by an external company

5. I have a fee contract

6. I'm a student in practice

7. I do not have a contract

### TE16. Approximately how much is your monthly net salary?

1. CL$200,000 or less

2. from CL$200,001 to CL$500,000

3. from CL$500,001 to CL$800,000

4. from CL$800,001 to CL$1,000,000

5. from CL$1,000,001 to CL$1,000,000

6. more than CL$2,000,000

### TE17. Your salary is:

1. Fix

2. Basic salary plus bonus, commissions or variable

3. Only variable

### TE18. What part of your salary do you use to pay debts (consider debts of commercial houses, bank cards, debts for education and health, mortgage debts)?

0. I have no debts.

1. I destine up to 10% of my salary to pay my debts

2. I destine up to 25% (one fourth) of my salary to pay my debts

3. I destine up to 50% (one half) of my salary to pay my debts

4. I destine more than 50% (more than a half) of my salary to pay my debts

### TE19. If you have debts, indicate how difficult it is to pay them

0. I have no debts

1. I have debts, but I have no difficulty paying them

2. I have debts, and I have occasional difficulties to pay them

3. I have debts, and I always have difficulties paying them

4. I have debts, and I have permanent and serious difficulties to pay them

### TE20. What part of family and / or domestic work do you have to do? (Cleaning, shopping, cooking, taking care of children and older persons.)

0. I do none or almost none of household chores

1. I only do occasional household chores

2. I do about a quarter of the household chores

3. I do about half the household chores

4. I am the primary responsible and do most of the household chores.

### TE21. If you are absent one day from home, the household chores you do, are left undone?

0. None of the time

1. A little bit of the time

2. A good bit of the time

3. Most of the time

4. All of the time

### Sick Leaves

### LM1. In the last 12 months, how many sick leaves have you had? (Excepting maternity leaves and leaves due to serious illness of an infant under 1 year of age)

0. I have had no sick leave in the last year

1. Approximately, I have had \_\_\_\_\_ sick leaves in the last year

### LM3. In the last 12 months, how many days have you been on sick leave? (Excepting maternity leaves, and leaves due to serious illness of an infant under 1 year of age)

0. I have had no sick leave in the last year.

1. I have had approximately \_\_\_\_\_\_\_\_ days of sick leave in the last year.

**Psychosocial risk section**

Please answer ALL questions and choose ONE ANSWER for each question.  
Remember that there are no good or bad answers. What we are interested in is your opinion on the contents and demands of your work. Thank you very much.

**The following questions deal with the demands of your job**

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| --- | --- | --- | --- | --- | --- | --- |
| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| CU1 | Do you have to work very fast to deliver requested tasks in a short time? |  |  |  |  |  |
| CU2 | Is your workload unevenly distributed so it piles up? |  |  |  |  |  |
| CU3 | Do you have enough time for keeping your tasks up-to-date? |  |  |  |  |  |
| CU4 | Do you get behind your work? |  |  |  |  |  |
| CU5 | How often can you take it easy and still do your work? |  |  |  |  |  |
| CU6 | Do you have enough time for your work tasks? |  |  |  |  |  |
| CU7 | Do you have to do overtime to complete your work tasks? |  |  |  |  |  |
| CO1 | Do you have to keep your eyes on lots of things while you work? |  |  |  |  |  |
| CO2 | Does your work require that you remember a lot of things? |  |  |  |  |  |
| CO3 | Does your work demand that you are good at coming up with new ideas? |  |  |  |  |  |
| CO4 | Does your work require you to make quick decisions? |  |  |  |  |  |
| CO5 | Does your work require you to make difficult decisions? |  |  |  |  |  |
| CO6 | Do you have to make decisions of great importance to your place of work? |  |  |  |  |  |
| CO7 | Does your work have significant repercussions on your peers, clients, users, machines or facilities? |  |  |  |  |  |
| CO8 | Does your work require a wide knowledge? |  |  |  |  |  |

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| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| EM1 | Are there moments and / or situations in your work that cause you emotional exhaustion? |  |  |  |  |  |
| EM2 | In general, do you consider that your work causes you emotional exhaustion? |  |  |  |  |  |
| EE1 | Does your work require that you do not state your opinion? |  |  |  |  |  |
| EE2 | Does your work require that you hide your feelings? |  |  |  |  |  |
| ES1 | Does your work demand a great deal of concentration? |  |  |  |  |  |
| ES2 | Does your work require that you have very clear and precise eyesight? |  |  |  |  |  |
| ES3 | Does your work demand your constant attention? |  |  |  |  |  |
| ES4 | Does your work require a high level of precision? |  |  |  |  |  |

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| **The following questions are about the margin of autonomy you have in your current job.** | | | | | | |
| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| IN1 | Do other people make decisions concerning your work? |  |  |  |  |  |
| IN2 | Can you influence how quickly you work? |  |  |  |  |  |
| IN3 | Do you have a say in choosing who you work with? |  |  |  |  |  |
| IN4 | Can you influence the amount of work assigned to you? |  |  |  |  |  |
| IN5 | Do you have any influence on when you work? |  |  |  |  |  |
| IN6 | Can you influence the quality of your work? |  |  |  |  |  |
| IN7 | Can you decide the order in which you perform your tasks? |  |  |  |  |  |

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| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| CT1 | Can you decide when to take a break? |  |  |  |  |  |
| CT2 | Can you take holidays more or less when you wish? |  |  |  |  |  |
| CT3 | Can you leave your work to have a chat with a colleague? |  |  |  |  |  |
| CT4 | If you have some private business, is it possible for you to leave your place of work for half an hour without special permission? |  |  |  |  |  |

**The following questions concern the possibilities of development, the sense of work and the integration within the company or institution.**

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| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| PD1 | Is your work varied (different and diverse tasks)? |  |  |  |  |  |
| PD2 | Does your work demand a high level of skill or expertise? |  |  |  |  |  |
| PD3 | Do you have to do the same thing over and over again? |  |  |  |  |  |
| PD4 | Does your work require you to take the initiative? |  |  |  |  |  |
| PD5 | Do you have the possibility of learning new things through your work? |  |  |  |  |  |
| PD6 | Can you use your skills or expertise in your work? |  |  |  |  |  |
| PD7 | Does your work give you the opportunity to develop your skills? |  |  |  |  |  |
| ST1 | Is your work meaningful? |  |  |  |  |  |
| ST2 | Do you feel that the work you do is important? |  |  |  |  |  |
| ST3 | Do you feel committed to your profession or craft? |  |  |  |  |  |
| IE1 | Would you like to stay at your current place of work, equal conditions, for the rest of your working life? |  |  |  |  |  |
| IE2 | Do you enjoy telling others about your place of work? |  |  |  |  |  |
| IE3 | Do you feel that the problems at your place of work are yours too? |  |  |  |  |  |
| IE4 | Do you feel that your place of work is of great personal importance to you? |  |  |  |  |  |

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| **The following questions deal with the degree of definition of your tasks and the conflicts that may be involved in the performance of your current work.** | | | | | | |
| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| RL1 | Do you know exactly how much say you have at work? |  |  |  |  |  |
| RL2 | Does your work have clear objectives? |  |  |  |  |  |
| RL3 | Do you know exactly which areas are of your responsibility? |  |  |  |  |  |
| RL4 | Do you know exactly what is expected of you at work? |  |  |  |  |  |
| CR1 | Do you do things at work, which are accepted by some people but not by others? |  |  |  |  |  |
| CR2 | Are contradictory demands placed on you at work? |  |  |  |  |  |
| CR3 | Do you sometimes have to do things which ought to have been done in a different way? |  |  |  |  |  |
| CR4 | Do you sometimes have to do things, which seem to you to be unnecessary? |  |  |  |  |  |
| CR5 | Do you have to do things against your principles and values at work? |  |  |  |  |  |

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| **The following questions deal with the relationship with your bosses or direct supervisors in your current job** | | | | | | |
| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| CL1 | Do your immediate superiors ensure that each worker has good career development opportunities? (skills training, education) |  |  |  |  |  |
| CL2 | Are your immediate superiors good at work planning? |  |  |  |  |  |
| CL3 | Are your immediate superiors good at solving conflicts? |  |  |  |  |  |
| CL4 | Are your immediate superiors good at communicating with the staff? |  |  |  |  |  |
| CL5 | Do your immediate superiors give importance to workers being comfortable at work? |  |  |  |  |  |
| CL6 | Are your immediate superiors good at allocating the work? |  |  |  |  |  |

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| **The next questions have to do with the support that you receive to carry out your work.** | | | | | | |
| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| RS1 | At your place of work, are you informed well in advance of changes that may affect your future, both work and personal? |  |  |  |  |  |
| RS2 | Do you receive all the information you need in order to do your work well? |  |  |  |  |  |
| RS3 | Does your supervisor talk to you about how you do your job? |  |  |  |  |  |
| RS4 | How often is your immediate superior willing to listen to your work related problems? |  |  |  |  |  |
| RS5 | Do you get help and support from your direct superior? |  |  |  |  |  |
| RC1 | How often do you talk to your peers about how you do your job? |  |  |  |  |  |
| RC2 | How often are your peers willing to listen to your problems at work? |  |  |  |  |  |
| RC3 | How often do you get help and support for your tasks from your colleagues? |  |  |  |  |  |
| RC4 | Is there a good atmosphere between you and your co-workers? |  |  |  |  |  |
| RC5 | Do you help each other at work with colleagues? |  |  |  |  |  |
| RC6 | In your work, do you feel that you are part of a group or team? |  |  |  |  |  |

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| **The following questions have to do with the recognition of your work.** | | | | | | |
| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| ET1 | My superiors give me the recognition I deserve |  |  |  |  |  |
| ET2 | My peers give me the recognition I deserve |  |  |  |  |  |
| ET3 | In difficult situations at work I receive the necessary support |  |  |  |  |  |
| ET4 | In my work they treat me unfairly |  |  |  |  |  |
| ET5 | If I think of all the work and effort I have done, the recognition I receive in my work seems appropriate |  |  |  |  |  |

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| **The following questions have to do with your concern about possible changes in your current working conditions.** | | | | | | |
| Code | Questions | **I am extremely concerned** | **I am very concerned** | **I am more or less concerned** | **I am a little bit concerned** | **I am not concerned** |
| IC1 | Are you worried if you are fired or not renewed? |  |  |  |  |  |
| IC2 | Are you worried about how difficult it would be to find another job in the event that you become unemployed? |  |  |  |  |  |
| IC3 | Are you worried if your salary varies (they do not readjust it, have it lowered, they introduce variable salary, get paid in kind)? |  |  |  |  |  |
| IC4 | Are you worried if they do not make you a permanent contract? |  |  |  |  |  |
| IC5 | Are you worried about not being promoted? |  |  |  |  |  |
| IT1 | Are you worried if you are moved against your will to another place of work, functions, unit, department or section? |  |  |  |  |  |
| IT2 | Are you worried if they change your tasks against your will? |  |  |  |  |  |
| IT3 | Are you worried if they change your schedule (shifts, days of the week, times of entry and exit) against your will? |  |  |  |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
| **The following questions have to do with your concern about family responsibilities** | | | | | | |
| Code | Question | **Always** | **Often** | **Some times** | **Seldom** | **Never/ hardly ever** |
| DP1 | When you are at work, do you think about domestic and family demands? |  |  |  |  |  |
| DP2 | Are there situations where you should be at work and at home at the same time? (To care for a sick child, for an accident of a relative, for the care of old persons, etc.) |  |  |  |  |  |