

**Studie-ID:** \_\_\_\_\_

**Additional background questions (baseline)**

Your age: \_\_\_\_\_

Your gender: Male  Female  Other/do not want to answer

Your marital status: Single  Widow/er  Married or living in a relationship

Do you have children? Yes  No

If Yes, how many children do you have? \_\_\_\_\_

If Yes, how many of your children are under the age of 18? \_\_\_\_\_

Do you work? Yes  No

If No, are you:

- retired
- unemployed/out of work
- studying
- other

Are you currently on sick leave? No

If Yes, what proportion of full time? 25%  50%  75%  100%

What is your highest acquired educational level? No school  Primary school  Secondary school  Senior secondary school  University/higher education  Other

Do you suffer from any illnesses? No  If Yes, which:

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Do you take any regular medications? No  If Yes, which and and since when:

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Do you smoke? Never smoked  Smoked previously  Yes, I smoke