

***WORLD
VALUES
SURVEY
2000***

Methodological questionnaire

PLEASE WRITE IN THE NAME OF YOUR COUNTRY: PHILIPPINES

Section 1: the questionnaire

1. Was the WVS questionnaire translated or adapted in any way from the English master questionnaire?

Yes ☒ → **ANSWER Q2**
No ☐ → **GO TO Q3**

IF QUESTIONNAIRE TRANSLATED/ADAPTED

2a. Who carried out the translation of the questionnaire?

A specialist translator ☐

A member of the research team ☐

Other (PLEASE WRITE DETAILS BELOW) ☒

~~SEE ATTACHMENT A FOR DETAILS~~

b. Was the translated questionnaire then back-translated into English?

Yes ☒
No ☐

c. Was the translated questionnaire pre-tested?

Yes ☒ → **ANSWER d**
No ☐ → **GO TO e**

d. **IF 'YES'**

How was the questionnaire pre-tested? How many pre-tests were carried out?

PLEASE WRITE IN:

There was a cognitive pre-test among the project's core research non-field staff and senior field staff (the field director, the asst. field managers and field coordinators.) It was the field coordinators who pre-tested the translated instrument on 12 randomly selected voting-age adults. The pre-test basically focused on whether the Tagalog translation was accurate.

e. Were there any questions or concepts that caused particular problems when being translated into your language?

Yes ☐ → **ANSWER f**
No ☒ → **GO TO Q3**

IF 'YES'

f. Which questions or concepts caused particular problems?

PLEASE WRITE IN:

- g. How were these problems solved?
PLEASE WRITE IN:

EVERYONE PLEASE ANSWER

3. Did you use other questionnaires to make the WVS questionnaire

the German questionnaire ☐

the French questionnaire ☐

Other (PLEASE WRITE IN BELOW) ☐

NOT APPLICABLE _____

4. Have any optional WVS questions and/or items been included?

No ☐

Yes (PLEASE WRITE IN QUESTION AND/OR ITEMNUMBERS BELOW) ☒

V181a-c

5. Were country-specific questions, and/or items i. e. neither compulsory nor optional WVS questions, or questions included in the survey?

No country-specific questions included ☐

→ **GO TO Q7**

Country-specific questions were included ☒

→ **ANSWER Q6**

IF THERE WERE COUNTRY-SPECIFIC QUESTIONS

6. Were country specific questions included at the end of the questionnaire, just before the demographics?

Yes ☐

→ **GO TO Q7**

No ☒

→ **GO TO Q6a**

6a Please indicate the location of the country-specific questions which were not at the end of the questionnaire
WRITE IN BELOW

Asked at the end of WVS demographics

EVERYONE PLEASE ANSWER

7. Were all questions asked in the prescribed order?

Yes ☒

No ☐

8. Were all core WVS questions included in your questionnaire (by core we mean all items except those that were optional)?

No - some question(s) from WVS questionnaire not included ☐ → **ANSWER Q9**

No - some demographic question(s) not included ☐ → **ANSWER Q9**

Yes - all questions included ☒ → **SECTION 2**

IF ANY CORE WVS QUESTIONS WERE NOT INCLUDED

9. Please write in details of the items and the reasons why they were not included.

WVS question number or description of question:

Reason(s) not included:

Section 2: Sampling

10. Was your sample designed to be representative of the entire adult population, i. e. 18 years and older, of your country?

Please see Attachment A for qualifications of YES answer

Yes ☒ → **GO TO Q12**
No ☐ → **ANSWER Q11**

IF NOT DESIGNED TO BE REPRESENTATIVE

11. Which groups were excluded from, under-represented or over-represented in your sample design?

Excluded (PLEASE SPECIFY):

Over-represented: (PLEASE SPECIFY):

Under-represented (PLEASE SPECIFY):

EVERYONE PLEASE ANSWER

12. What was the lower age cut-off for your sample?

Yes - please write in cut-off

No cut-off

13. Was there any upper age cut-off for your sample?

Yes - please write in cut-off

No cut-off ☒

14. What were the different stages in your sampling procedure?

PLEASE WRITE IN:

Please see Attachment B

15. What was the final number of clusters or sampling points?

No clusters

WRITE IN:

| | | |
|---|---|---|
| 2 | 4 | 0 |
|---|---|---|

16. What was the sampled unit you got from office sampling?

Address → **ANSWER Q17**

Household → **ANSWER Q17**

Named individual → **GO TO Q18**

Other (PLEASE WRITE IN DETAILS BELOW) ☒ → **ANSWER Q17**
Electoral precincts (for urban) areas) and barangays or villages (for rural areas)

IF NAMED INDIVIDUAL WAS NOT THE SAMPLED UNIT

17. What selection method was used to identify a respondent?
PLEASE SPECIFY:

See Attachment B for details of random walk procedure

18. Were there any quota-controls on the type of individual selected to take part in the survey (for example, age or sex controls)?

Yes ☒ → **ANSWER Q19**

No ☐ → **GO TO Q20**

IF QUOTA CONTROLS

19. In what way were quota controls used?
PLEASE WRITE IN:

50% males, 50% females by alternating between male and female respondents

EVERYONE PLEASE ANSWER

20. Was substitution permitted at any stage of your selection process or during fieldwork?

Yes ☒ → **ANSWER Q21**

No ☐ → **GO TO Q22**

IF 'YES'

21. In what way was substitution permitted?
PLEASE WRITE IN:

See Attachment C

EVERYONE PLEASE ANSWER

22. Did you use any stratification factors when drawing your sample?

Yes ☒ → **ANSWER Q23**

No ☐ → **GO TO Q24**

IF STRATIFICATION FACTORS USED

23. What stratification factors were used, and at what stage(s) of selection?
PLEASE WRITE IN:

Geographical stratification as detailed out in Attachment B

EVERYONE PLEASE ANSWER

24. All in all, what are the known limitations of your realized sample?

For example: non-response rate; is there differential coverage of particular groups, either because of sample design or response differences?

% response or % non-response: PLEASE WRITE IN:

PLEASE SEE ATTACHMENT A FOR DETAILS

25. Please fill in the following details about your sample. If some categories do not apply, please complete to the highest level of detail possible and use the 'other' box to give more information.

| | | | | |
|---|----------------------|----------------------|----------------------|----------------------|
| Total number of <u>starting</u> names/addresses | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - addresses which could not be traced at all | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - addresses established as empty, demolished or containing no private dwellings | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - selected respondent too sick/incapacitated to participate | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - selected respondent away during survey period | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - selected respondent had inadequate understanding of language of survey | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - no contact at selected address | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - no contact with selected person | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - refusal at selected address | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - proxy refusal (on behalf of selected respondent) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - personal refusal by selected respondent | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - other type of unproductive (please write in full details in the box below) | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - full productive interview | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| - partial productive interview | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

IF 'OTHER' CATEGORY USED

26. Please specify

SEE ATTACHMENT C

Section 3: Fieldwork

27.If interviews were not face-to-face, please specify the way of interviewing:

NOT APPLICABLE

28. The next group of questions are about interviewers.

If no interviewers were used at any point in the WVS survey, please go to Q32.

IF INTERVIEWERS USED

- a. Were interviewers paid according to performance (for example, according to the number of interviews they obtained)?

Yes ☒

SEE ATTACHEMTN A FOR DETAILS

No ☐

- b. Which, if any, of these rules governed how an interviewer approached an address/household?

PLEASE TICK THOSE THAT APPLY

Calls must be made at different times of day ☒

Calls must be made on different days of week ☒

Neither of the above ☐

- c. Were interviewers required to make a certain number of re-calls before they stopped approaching an address or household?

Minimum number of re-calls required - please write in number

No minimum re-call requirement ☐

- d. Were any interviews supervised?

Yes - please write in approximate proportion %

No ☐

- e. Were any interviews back-checked?

Yes - please write in approximate proportion %

NOTE: OF THE UNSUPERVISED INTERVIEWS, 20% ARE BACKCHECKED No ☐

EVERYONE PLEASE ANSWER

29. Please write in the approximate start and end dates of fieldwork.

D D M M Y Y

Start date

| | | | | | |
|---|---|---|---|---|---|
| 0 | 9 | 0 | 7 | 0 | 1 |
|---|---|---|---|---|---|

End date

| | | | | | |
|---|---|---|---|---|---|
| 2 | 7 | 0 | 7 | 0 | 1 |
|---|---|---|---|---|---|

30. Please write in the name of the institute which has done the fieldwork.

TRENDS-MBL

Section 4: Data

31. Were any measures of coding reliability employed?

Yes ☒ → **ANSWER Q31a**
No ☐

31a. Which one? Please specify

20% RANDOM SPOT-CHECKING OF CODING SHEETS

32. Were the data from the questionnaire keyed subsequent to the interview (that is, non-CAPI surveys)?

Yes ☒ → **ANSWER Q33**
No ☐ → **GO TO Q34**

IF DATA KEYED

33. Was keying verified?

Yes - please write in approximate level of verification %

SEE ATTACHMENT A FOR DETAILS

No ☐

EVERYONE PLEASE ANSWER

34. Were any reliability checks made on derived variables?

Yes ☒
No ☐

35. Were data checked/edited to ensure that filter instructions were followed correctly?

Yes ☒
No ☐

36. Were data checked/edited for logic or consistency?

Yes ☒
No ☐

37. Were data checked/edited to ensure they fell within permitted coding ranges?

Yes ☒
No ☐

38. Have you answered 'yes' on any or all of questions 32 to 34 above?

Yes ☒ → **ANSWER Q39**
No ☐ → **GO TO Q40**

IF DATA CHECKED/EDITED

39. Were errors corrected individually or automatically (through, for example, a 'forced' edit)?

Yes - individual correction ☒

Yes - automatic correction ☐

No - not corrected ☐

EVERYONE PLEASE ANSWER

40. Did you add a weight variable?

Yes ☒ → **ANSWER Q.41**

No ☐ → **SECTION 5**

IF WEIGHT VARIABLE ADDED

41. Please describe the weighting or post-stratification strategy used.

SEE ATTACHMENT D

Section 5: Characteristics of National Population

45. Each WVS member is asked to provide information on known characteristics of its national population, from census or the best available estimates from government surveys or other high-quality data-sources:

PLEASE SEE SEPARTE EXCEL TABLE

- sex distribution of the population
- age distribution of the population
- education (years of schooling) of the population
- other characteristics (PLEASE SPECIFY)

Please specify also the sources which have been used. Please note that the number of characteristics is what is minimal required. You can add as many characteristics as you like, but do not forget to specify them.

In the table below please present the information from census or from other government surveys or other high-quality data (column SOURCE 1) and the proportions obtained in your data, before and after weighting

| | Source: | Unweighted data | Weighted data |
|--|---------|-----------------|---------------|
| Gender | | | |
| Female | % | % | |
| Male | % | % | |
| Age Groups | | | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| Years/Schooling Groups | | | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |
| Other characteristics Please specify | | | |
| | % | % | |
| | % | % | |
| | % | % | |
| | % | % | |

THANK YOU VERY MUCH !

PLEASE RETURN THE QUESTIONNAIRE TO JAIME DIEZ MEDRANO jdiezmed@terra.es