



## Questionnaire for Immigrant Women in the European Union

We are a group of researchers working on a study to understand the opportunities and challenges that immigrant women face to access the labor market in the European Union. Your participation will help organizations to improve the services available for immigrant women and improve their employment opportunities in the region. The questionnaire is anonymous.



**CIS**

**CENTER FOR INFORMATION & SOCIETY**  
UNIVERSITY of WASHINGTON  
The Information School

In question A.3. "Contact NGO" refers to the organization who contacted you to make this interview and/or where you are being interviewed

## A. INTERVIEW DETAILS

A.1 Date questionnaire was completed: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (day/month/year)

A.2 Country: \_\_\_\_\_ A.3 Contact NGO: \_\_\_\_\_

A.4 City of residence: \_\_\_\_\_

A.5 Province: \_\_\_\_\_ A.6 Region: \_\_\_\_\_

## B. STANDARD DATA

B.1 Age:   B.2 Nationality: \_\_\_\_\_

B.3 Country of birth: \_\_\_\_\_ B.4 City: \_\_\_\_\_

B.5 Religion practiced: \_\_\_\_\_ B.6 Year of arrival in Italy: \_\_\_\_

B.7 Are you married and/or do you cohabitate? Yes, I am married ☐ Yes, I cohabitate ☐ Widow ☐ No ☐

B.8 If yes, does your husband/partner live: In my home country ☐ In Italy ☐ Elsewhere ☐

B.9 If yes, is he: The same nationality as you ☐ Italian ☐ A different nationality ☐

B.10 Do you have children? Yes ☐ No ☐

B.11 If yes, do they live with you? Yes ☐ No, they live in my home country ☐ No, other ☐

B.12 If yes, are any of your children under 5 years old? Yes ☐ No ☐

B.13 Why did you come to **Italy** / to the European Union? (*give up to two reasons*)

1. To study	<input type="checkbox"/>
2. To join my family	<input type="checkbox"/>
3. To work	<input type="checkbox"/>
4. For medical care/health reasons	<input type="checkbox"/>
5. For political or humanitarian reasons	<input type="checkbox"/>
6. Other (specify):	<input type="checkbox"/>

B.14 Do you intend to apply for **Italian** citizenship?

Yes, I have already applied ☐ Yes, as soon as I meet the requirements ☐ Don't know, the requirements are difficult ☐ No, I am not interested ☐

## C. EMPLOYABILITY: LONGLIFE LEARNING

**C.1** Most recent educational qualification obtained in your home country:

- |                               |                          |   |                          |
|-------------------------------|--------------------------|---|--------------------------|
| 1. No qualification           | <input type="checkbox"/> | 5. Vocational training diploma                | <input type="checkbox"/> |
| 2. Primary school certificate | <input type="checkbox"/> | 6. Level 1 (three-year) university degree     | <input type="checkbox"/> |
| 3. Middle school certificate  | <input type="checkbox"/> | 7. Level 2 (specialization) university degree | <input type="checkbox"/> |
| 4. High school diploma        | <input type="checkbox"/> | 8. Master's and/or specialization             | <input type="checkbox"/> |

**C.1a** Main are of study  
(please describe)

\_\_\_\_\_

**C.2** What educational qualification have you had recognized in Italy? \_\_\_\_\_

**C.3** If you have had an educational qualification recognized, after how many years did this happen? \_\_\_\_

**C.4** In **Italy**, have you taken/are you taking any training courses/seminars? **(select all that apply)**

- |                             |                          |                                    |                          |
|-----------------------------|--------------------------|------------------------------------|--------------------------|
| 1. None                     | <input type="checkbox"/> | 9. Home care assistant             | <input type="checkbox"/> |
| 2. <b>Italian</b> language  | <input type="checkbox"/> | 10. Cleaning services technician   | <input type="checkbox"/> |
| 3. Other official languages | <input type="checkbox"/> | 11. Practitioner of trade or craft | <input type="checkbox"/> |
| 4. Other languages          | <input type="checkbox"/> | 12. Enterprise creation expert     | <input type="checkbox"/> |
| 5. Language teaching        | <input type="checkbox"/> | 13. Computer skills basic/         | <input type="checkbox"/> |
| 6. Translation/interpreting | <input type="checkbox"/> | 14. Computer skills Advanced       | <input type="checkbox"/> |
| 7. Cultural Mediation       | <input type="checkbox"/> | 15. Other (specify)                | <input type="checkbox"/> |
| 8. Social worker            | <input type="checkbox"/> |                                    |                          |

**C.5** If you have obtained qualifications in Italy, what are they? **(select all that apply)** \_\_\_\_\_

**C.6** If not, for what reason? **(please specify the two main reasons)**

- |   |                          |
|---|--------------------------|
| 1. Problems with the location where the course was held | <input type="checkbox"/> |
| 2. High cost of enrolling and attending                 | <input type="checkbox"/> |
| 3. Unable to attend because of the hours                | <input type="checkbox"/> |
| 4. Problems with the language                           | <input type="checkbox"/> |
| 5. Problems connected with my residence permit          | <input type="checkbox"/> |
| 6. Lack of time   | <input type="checkbox"/> |
| 7. Other  | <input type="checkbox"/> |

**C.7** If you have taken courses,  
were some of them Internet  
based?

Yes ☐ No ☐

**C.8** Number of languages spoken **(including mother-tongue language(s))** ☐☐

**C.9** Mother-tongue: \_\_\_\_\_

Other Languages: \_\_\_\_\_

**C.10** Level of knowledge of **Italian LANGUAGE**:

COMPREHENSION		SPOKEN		WRITTEN	
Basic level	<input type="checkbox"/>	Basic level	<input type="checkbox"/>	Basic level	<input type="checkbox"/>
Medium level	<input type="checkbox"/>	Medium level	<input type="checkbox"/>	Medium level	<input type="checkbox"/>
High level	<input type="checkbox"/>	High level	<input type="checkbox"/>	High level	<input type="checkbox"/>

**C.11** Did you speak Italian before entering the European Union? Yes ☐ No ☐

**C.12** If you have taken courses to learn **Italian**, why did you do so? *(give up to two reasons)*

- |                                  |                          |                                |                          |
|----------------------------------|--------------------------|--------------------------------|--------------------------|
| 1. To obtain my residence permit | <input type="checkbox"/> | 4. To become better integrated | <input type="checkbox"/> |
| 2. For work reasons              | <input type="checkbox"/> | 5. Other: _____                | <input type="checkbox"/> |
| 3. For family reasons            | <input type="checkbox"/> |                                |                          |

**C.13** If yes, what is the most recent Italian language certification gained? *(specify the level)* \_\_\_\_\_



## D. INCLUSION AND DIGITAL SKILLS

**D.1** How often do you use: *(please choose one answer for each of the three listed items)*

	Never	Occasionally	1 – 2 times per week	3 -5 times per week	Daily, 2 hours or less	Daily, more than 2 hours
1. Computer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Cell Phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**D.2** If you don't use the Internet, why not? \_\_\_\_\_

**D.3** If you do, which are the **3 places where you most often** use a computer/access the Internet?

- |   |                          |  |                          |
|---|--------------------------|--|--------------------------|
| 1. At work                                    | <input type="checkbox"/> | 4. At a non profit center (association, foundation, cooperative, etc.) | <input type="checkbox"/> |
| 2. At home                                    | <input type="checkbox"/> | 5. At a public location (job center, library, etc.)                    | <input type="checkbox"/> |
| 3. At the home of friends and/or relatives    | <input type="checkbox"/> | 7. At a university   | <input type="checkbox"/> |
| 6. At a private center (Internet point, etc.) | <input type="checkbox"/> | 8. Other (specify): _____  | <input type="checkbox"/> |

**D.4** How often do you use a computer for each of the following? *(give one response for each item)*

	Never	Occasionally	1-2 times per week	3-5 times per week	Daily
1. Games, Leisure, recreation, entertainment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Hobbies/creative projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Managing household/family matters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**D.5** Which of the following have you already done on a computer? *(select all that apply)*

1. Copying and/or moving a document/folder	<input type="checkbox"/>
2. Using the "copy" and "paste" command to copy information	<input type="checkbox"/>
3. Using arithmetical commands (add, subtract, multiply, divide)	<input type="checkbox"/>
4. Compressing documents	<input type="checkbox"/>
5. Connecting/installing new peripherals (e.g. printers, modems, etc.)	<input type="checkbox"/>
6. Writing a program using specialist programming languages	<input type="checkbox"/>
7. None of the above	<input type="checkbox"/>

**D.6** In the past 12 months, for which of these activities have you used the Internet? (*select all that apply*)

- |   |                          |   |                          |
|---|--------------------------|---|--------------------------|
| 1. Communication ( <i>e-mail</i> )                                | <input type="checkbox"/> | 8. Looking for a job                                      | <input type="checkbox"/> |
| 2. Communication ( <i>VOIP calls, chatting, blogging</i> )        | <input type="checkbox"/> | 9. Work   | <input type="checkbox"/> |
| 3. Information ( <i>online newspapers and/or magazines, etc</i> ) | <input type="checkbox"/> | 10. Public services ( <i>certificates, appointments</i> ) | <input type="checkbox"/> |
| 4. Information ( <i>web TV, web radio</i> )                       | <input type="checkbox"/> | 11. Online purchases of products/services                 | <input type="checkbox"/> |
| 5. Travel ( <i>reservations, ticket purchases, etc.</i> )         | <input type="checkbox"/> | 12. Selling items online                                  | <input type="checkbox"/> |
| 6. Children's schoolwork  | <input type="checkbox"/> | 13. Online banking services                               | <input type="checkbox"/> |
| 7. Study, personal development                                    | <input type="checkbox"/> | 14. Other (specify):                                      | <input type="checkbox"/> |

**D.7** Which of the following do you know how to do on the Internet? (*select all that apply*)

- |  |                          |
|--|--------------------------|
| 1. Use a search engine ( <i>Google, Yahoo, etc.</i> )                    | <input type="checkbox"/> |
| 2. Send e-mails with files/documents attached                            | <input type="checkbox"/> |
| 3. Send messages using IM chats, newsgroups, or online forums            | <input type="checkbox"/> |
| 4. Make voice calls ( <i>using Skype, Messenger, ooVoo, etc.</i> )       | <input type="checkbox"/> |
| 5. Use shared files/documents and/or exchange music, videos, films, etc. | <input type="checkbox"/> |
| 6. Create a web page   | <input type="checkbox"/> |
| 7. None of the above   | <input type="checkbox"/> |

**D.8** Do you have a personal BLOG? Yes ☐ No ☐ I don't know what a blog is ☐

**D.9** Are you part of an online social network? (*Facebook, Myspace, etc.*) Yes ☐ No ☐ I don't know ☐

**D.10** Do you write for or contribute to online newspapers/ web radios/ web TVs / portals? Yes ☐ No ☐

**D.11** How did you learn what you know with new technologies? (*select all that apply*)

- |  |                          |
|--|--------------------------|
| 1. From relatives, friends and/or acquaintances  | <input type="checkbox"/> |
| 2. At school   | <input type="checkbox"/> |
| 3. At an upper secondary institution   | <input type="checkbox"/> |
| 4. At university   | <input type="checkbox"/> |
| 5. At a non-profit facility (association, foundation, cooperative, civic center, etc.) | <input type="checkbox"/> |
| 6. At a public facility (job center, library, etc.)                                    | <input type="checkbox"/> |
| 7. At a private facility (commercial Internet point, etc.)                             | <input type="checkbox"/> |
| 8. Self-taught (alone)   | <input type="checkbox"/> |

## E. SOCIAL INCLUSION AND SOCIAL SKILLS

**E.1** What problems have you encountered in **Italy**?

---



---



---

**E.2** Do you use the public health service?

Yes, I have a health card ☐ Yes, but only emergency services ☐ No, I cannot access them ☐ No, I don't need them ☐

**E.3** Do you deal with bureaucratic and/or administrative matters by yourself? Yes ☐ No ☐

**E.4** Do you attend: *(multiple answers allowed)*

1. Parent-teacher conferences	<input type="checkbox"/>
2. Building residents' meetings	<input type="checkbox"/>
3. Trade unions and/or trade association meetings (e.g. <b>Confartigianato</b> , etc.)	<input type="checkbox"/>
4. Public libraries	<input type="checkbox"/>
5. Neighborhood assemblies/meetings	<input type="checkbox"/>
6. Your ethnic and/or language and/or religious community, on a regular basis	<input type="checkbox"/>
7. Italian friends, on a regular basis	<input type="checkbox"/>
8. Community centers, associations, foundations and/or volunteer organizations	<input type="checkbox"/>
9. Multicultural groups	<input type="checkbox"/>
10. Other (specify):	<input type="checkbox"/>

**E.5** Do you have any group leadership roles? *(e.g. parent representative and/or leader of a group)*

Yes ☐ No ☐ | If yes, specify what **Role(s)**: \_\_\_\_\_

**E.6** If you frequent non profit bodies/associations, are these: *(select all that apply)*

1. Immigrant associations/foundations	<input type="checkbox"/>
2. National associations (e.g. ARCI, ACLI, CNCA, CGIL, CISL, etc.)	<input type="checkbox"/>
3. Cultural associations/foundations	<input type="checkbox"/>
4. Women's associations	<input type="checkbox"/>
5. Religious associations/foundations	<input type="checkbox"/>
6. Open universities (e.g. UPTER, etc.)	<input type="checkbox"/>
7. Other (specify):	<input type="checkbox"/>

**E.7** Are you a member of any non profit bodies/associations? Yes ☐ No, never have been ☐ No, not now ☐

In questions E8 – E11 “This organization” refers to the organization who contacted you to make this interview and/or where you are being interviewed

**E.8** How did you come into contact with this organization: *(select all that apply)*

1. By taking part in initiatives, seminars, etc.	<input type="checkbox"/>
2. Through a contact in my community	<input type="checkbox"/>
3. Through family contacts and/or friends	<input type="checkbox"/>
4. Through the Internet	<input type="checkbox"/>
5. Through radio and/or TV	<input type="checkbox"/>
6. Through leaflets, information brochures in public places, doctor's offices, etc.	<input type="checkbox"/>
7. Through advertisements in newspapers, magazines, etc.	<input type="checkbox"/>
8. On the street	<input type="checkbox"/>
9. Other (specify):	<input type="checkbox"/>

**E.9** Year of first contact with the chosen organization:

— — — —

**E.10** What do/did you most appreciate about the services offered by this organization: *(select all that apply)*

1. Its open, friendly atmosphere	<input type="checkbox"/>
2. The network of contacts offered by the association	<input type="checkbox"/>
3. The clear information I received	<input type="checkbox"/>
4. Assistance in dealings with public institutions and private bodies	<input type="checkbox"/>
5. The competence of its operators	<input type="checkbox"/>
6. The ability to access free and/or low cost services	<input type="checkbox"/>
7. Other (specify):	<input type="checkbox"/>

**E.11** How do you rate the services that you access through this organization? *(please choose one response for each listed service)*

	Not used/ Not available	Unsatisfactory	Not very satisfactory	Fairly satisfactory	Very satisfactory
1. Immigrant assistance, information, social inclusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Orientation: strategies and tools for finding work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Help with: Resumes, written applications and job interviews	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Assistance with legal matters and residence permits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Psychological support, care homes, housing, childcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Computer skills training / Internet access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Language training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Vocational training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Assistance with starting a business, microcredit, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**E.12** What could the European/Italian authorities do to improve the life of immigrant women?

---



---



---



---

## F. CULTURAL INCLUSION AND CULTURAL SKILLS

**F.1** Which of the following activities do you enjoy? (*select all that apply*)

ATTIVITÀ SVOLTE	In your first language	In Italian	In another language
1. Television programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Radio programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Print newspapers and/or online news	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Reading and/or studying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Cinema/home viewing of DVD films/videos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Concerts, musical events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Festivals, folk events, dancing, singing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**F.2** Do you take part in artistic-cultural activities: (*select all that apply*)

1. I don't participate ☐      2. Privately ☐      3. In a group ☐      4. In public ☐

**F.3** If you participate in artistic-cultural activities, what is your role? (*select all that apply*)

- |  |   |
|--|---|
| 1. Artist/creator <input type="checkbox"/> | 5. Technician <input type="checkbox"/>              |
| 2. Promoter <input type="checkbox"/>       | 6. Translator <input type="checkbox"/>              |
| 3. Organizer <input type="checkbox"/>      | 7. Communicator/journalist <input type="checkbox"/> |
| 4. Teacher <input type="checkbox"/>        | 8. Other <input type="checkbox"/>                   |

**F.4** Do you use multimedia technologies in your artistic/cultural work?      Yes ☐ No ☐

**F.5** Do you use different languages in your artistic/cultural work?      Yes ☐ No ☐



## G. EMPLOYABILITY: CURRICULUM VITAE AND WORK EXPECTATIONS

**G.1** Did you work before emigrating?    Yes ☐    No ☐

**G.2** If yes, what occupations did you engage in? (list the two that you consider most significant):

1.	2.
----	----

**G.3** If no, why not? (*please choose up to two main reasons*)

- |  |   |
|--|---|
| 1. Not permitted to do so for religious reasons <input type="checkbox"/> | 5. Was underage <input type="checkbox"/>                  |
| 2. Did not need to <input type="checkbox"/>                              | 6. Couldn't find work <input type="checkbox"/>            |
| 3. Looked after the family <input type="checkbox"/>                      | 7. Political reasons (war, etc.) <input type="checkbox"/> |
| 4. Other family reasons <input type="checkbox"/>                         | 8. Other <input type="checkbox"/>                         |



**G.4** Jobs held in **Italy** (list up to three):

CURRENT JOB:
PAST JOB:
PAST JOB:

**G.5** Are you currently working? Yes ☐ No, but I am looking for work ☐ No, I am not seeking work ☐

**G.6** Who has helped you, or could help you, find, keep or improve your work? (*please list the three channels you consider most useful*)

- |   |                          |  |                          |
|---|--------------------------|--|--------------------------|
| 1. Channels/networks of the associations that assisted you on arrival | <input type="checkbox"/> | 5. Contacts at public centers for employment | <input type="checkbox"/> |
| 2. Recommendations from family and/or friends                         | <input type="checkbox"/> | 6. Support given by immigrant associations   | <input type="checkbox"/> |
| 3. Informal channels of the community you belong to                   | <input type="checkbox"/> | 7. Support given by women's associations     | <input type="checkbox"/> |
| 4. Trade union channels   | <input type="checkbox"/> | 8. Other (describe) _____                    | <input type="checkbox"/> |

**G.7** Main occupation: I am an employee ☐ Independent (consultant, interpreter, etc.) ☐ Entrepreneurial (SME, cooperative, etc.) ☐  
(in terms of time)

**G.8** Economic sector: Agriculture ☐ Industry (*manufacturing of goods*) ☐ Services sector (*commerce, tourism, etc.*) ☐

**G.9** Do you work in a nonprofit organization? (*association, foundation, cooperative, etc*) Yes ☐ No ☐

**G.10** Is your work: Occasional/seasonal ☐ On a fixed-term contract ☐ On a permanent contract ☐

**G.11** Is your work: Part-time ☐ Full-time ☐

**G.12** Hours worked per week (average): \_\_\_\_\_

**G.13** Is your income sufficient to cover the basic needs of your family? Yes ☐ No ☐

**G.14** Are there other sources of income in the family aside from yours? Yes ☐ No ☐

**G.14a** If YES, which is the source of this income? (select all that apply)

- |  |                          |  |                          |
|--|--------------------------|--|--------------------------|
| 1. Subsidy for unemployment                              | <input type="checkbox"/> | 5. Pension for invalidity              | <input type="checkbox"/> |
| 2. Salary from another member of your family             | <input type="checkbox"/> | 6. Support from a women's organization | <input type="checkbox"/> |
| 3. Subsidy for self-employment/creation of your business | <input type="checkbox"/> | 7. Other (describe): _____             | <input type="checkbox"/> |
| 4. Widower's pension                                     | <input type="checkbox"/> |  |                          |

**G.15** Do you consider your occupation related to your training / field of study?

Not at all ☐ A little ☐ Partly ☐ Completely ☐

**G.16** On the whole, are you satisfied with your work situation?

Not at all ☐ A little ☐ Partly ☐ Completely ☐

**G.17** If it were possible, which of the following would you like in your job? (**choose up to two**)

- |                          |                          |   |                          |
|--------------------------|--------------------------|---|--------------------------|
| 1. A fixed-term contract | <input type="checkbox"/> | 4. A full-time contract                   | <input type="checkbox"/> |
| 2. A permanent contract  | <input type="checkbox"/> | 5. Nothing: the existing contract is fine | <input type="checkbox"/> |
| 3. A part-time contract  | <input type="checkbox"/> | 6. Other _____                            | <input type="checkbox"/> |

**G.18** If you could choose, what type of work would you like to do? \_\_\_\_\_

**G.19** How satisfied are you with the following aspects of your work? (**choose one response for each item**)

	Not at all	Somewhat	Fairly	Very
1. The opportunity to learn new things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The chance to obtain a long-term residence permit and citizenship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The respect of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The prospects for improving your position	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The ability to reconcile family and work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. The benefits (maternity leave, pension, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. The services offered by the Public Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Access to forms of subsidized credit, microcredit, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Opportunities provided by Internet and by e-commerce	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**G.20** Have new technologies helped you and/or can they help you to improve your work situation? (**Please choose one response for each item**)

	Don't use them	Not at all	Somewhat	Fairly	A lot
1. Looking for/finding a job using the Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Taking on-line training courses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Obtaining information from specialist websites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Presenting/selling products/services on the web	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Acquiring specific skills in the programs learned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**G.21** How much do you think that the following skills have helped you / can help you to improve your work situation?  
(assign a score from 0 = minimum to 5 = maximum to each item in the list)

1. Language (Mother tongue)	0	1	2	3	4	5
2. Language (Italian)	0	1	2	3	4	5
3. Language (Other)	0	1	2	3	4	5
4. Basic mathematics and science and technology	0	1	2	3	4	5
5. Digital (use of new technology, computer and internet)	0	1	2	3	4	5
6. Ability to learn ( Learning to learn )	0	1	2	3	4	5
7. Social and civic (understanding/adapting to the Italian customs/way of life)	0	1	2	3	4	5
8. Sense of initiative and entrepreneurship	0	1	2	3	4	5
9. Cultural (understanding/expression through music, dance, singing, etc.)	0	1	2	3	4	5

**G.22** Do you have your own website? Yes ☐ No ☐

**Thank you very much for your participation**

Center for Information & Society [www.cis.washington.edu](http://www.cis.washington.edu)

Dynamic Organization Thinking [www.d-o-t.eu](http://www.d-o-t.eu)

ARCI - L'Apis [www.arci.it](http://www.arci.it)