# Scottish Health Survey 2022

## Questionnaire documentation

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# Notes

1.  This is an edited documentation of the computer programmes used in the SHeS household and individual interviews. Instead of being numbered each question has a variable name; these are identified here in square brackets, e.g.: [varname].
2.  Not all variables that appear here will be on the final data file (those that are not are marked with a '*'). Similarly, not all derived variables that will be on the data file are mentioned here. There will be a separate documentation of derived variables when the data is released.
3.  Routing instructions appear above the questions. A routing instruction should be considered to stay in force until the next routing instruction.
4.  Sections of text in brackets and italics were filled in as appropriate on the interviewers' computers.
5.  Individual codes marked 'EDIT ONLY' were used by the editors to reclassify 'other' answers and are not visible during the main interviews.
6.  For some questions respondents could give a different answer to the main options they were presented with. Such answers are recorded verbatim and were examined during the editing process to see whether they could be 'back-coded' to one of the existing answer categories. These will not be available on the data file and have been indicated within this documentation with a '*'.
7.  Some questions allowed respondents to give more than one answer (indicated within this documentation with the instruction: 'CODE ALL THAT APPLY'). In these cases each individual answer option will have its own variable name which is shown in square brackets to the right of the answer.
8.  The symbol '$' has been used to flag CAPI questions which have been used in conjunction with Self-Complete questions to combine the answers into a separate derived variable.

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**Important note for data users: You are advised to use the documentation accompanying the final dataset released by the UK Data Archive as there may be updates or corrections to the documentation between the publication of the annual report and the release of the final dataset.**

# Scottish Health Survey 2022 – Survey outline

- A **household** interview with the household reference person (HRP) or their spouse or partner
- An **individual** interview with eligible participants. Eligibility criteria for each of the **two** sample types were as follows:
    - *Main sample* -up to ten adults and two children per household
    - *Child boost sample* - up to two children (0-15) per household

**Questionnaire content**

*Household questionnaire*

There was only one version of the household questionnaire across both sample types in 2022. The household questionnaire documentation begins on page 6 of this documentation.

*Individual questionnaire*

The questionnaire content varied depending firstly on the sample type, and then the age of the participants being interviewed. The questionnaire documentation details exactly who was eligible to answer particular modules and questions within these modules.

- *Main sample* - there were two versions of the individual interview questionnaire for the main sample: version A and version B. The content and order of the individual interview differed depending on which version a household was selected to go through. Some topics were asked in both versions of the questionnaire, e.g. *'general health including caring'* and *'eating habits for children'* while other topics are only asked in one of the versions, e.g. *'respiratory symptoms'* 'in version A. The below on the following page outlines which topics are asked in which version of the questionnaire.
- *Child Boost sample* – The individual questionnaire at child boost households followed the same format as a main version A individual questionnaire (see table on following page).

Points to note:
- There are three versions of the questionnaire in the mainstage: Core Version A; Core Version B (biological module); and Child Boost.
- Children are not eligible for the biological module in Core Version B.
- Children are not eligible for the biological module in Core Version B. / The biological module content only includes anxiety, depression and self-harm (no physical measurements or sample are being collected in the telephone version of the questionnaire.
- The tables below indicates what should be in each version and the order of the interview. The associated CAPI block names are in [] after the topic.

**Table 1: Overview of topics included in the main interview**

| Main interview (asked of everyone) | |
|---|---|
| Household questionnaire including household composition | |
| | |
| General health (0+) | |
| Unpaid Caring (4+) | |
| Respiratory (16+) | |
| General cardiovascular disease (16+) | |
| Asthma (0+) | |
| COVID-19 (0+) | |
| Chronic Pain (0+) | |
| Physical activity adults (16+) and children (2-15) | |
| Sedentary activity adults (16+) and children (2-15) | |
| Eating habits children (2-15) | |
| Fruit and vegetables consumption (2-15) | |
| Smoking (18+) | |
| Passive smoking (0+) | |
| Drinking (18+) | |
| Dental health (16+) | |
| Employment and economic activity (16+) | |
| Education (16+) | |
| Ethnic background, religion and country of birth (0+) | |
| Motivation and barriers to physical activity (16+) | Asked in version A of two thirds of the sample only |
| Additional respiratory questions about phlegm (16+) | Asked in version A of two thirds of the sample only |
| Additional asthma questions about wheezing (0+) | Asked in version A of two thirds of the sample only |
| Biological measures | Asked in version B of one third of the sample only |

**Table 2. Overview of topics included in SHeS adult self-completions**

| Self-completion – Adults aged 18+ |
|---|
| **Annual topics** |
| Mental wellbeing |
| Loneliness |
| Sexual orientation |
| Sex/trans status |

| Veterans |
|---|
| Depression, anxiety, self-Harm and suicide (only asked of those assigned to Version B – approximately a third of adults) |

**Table 3. Overview of topics included in SHeS young adult self-completion booklets**

| Self-completion - Young adults |
|---|
| **Annual topics** |
| Mental wellbeing |
| Alcohol |
| Smoking |
| Loneliness |
| Sexual orientation |
| Sex/trans status |
| Depression, anxiety, self-harm and suicide (only asked of those assigned to Version B – approximately a third of adults) |
| Veterans |

**Table 4. Overview of topics included in 13–15-year-olds self-completion booklets**

| Self-completion - 13–15-year-olds |
|---|
| **Annual topic** |
| Mental wellbeing |

**Table 5. Overview of topics included in 4–12-year-olds self-completion booklets**

| Self-completion - Parents of 4–12-year-olds |
|---|
| **Annual topic** |
| Strengths and difficulties questionnaire (SDQ) |

# Household Interview

**Point]***
SAMPLE POINT NUMBER:
Range:  1..997

**[Address]***
ADDRESS NUMBER:
Range:  1..97

**[Hhold]***
HOUSEHOLD NUMBER:
Range:  1..3

**[AdrField]***
PLEASE ENTER THE FIRST TEN CHARACTERS OF THE FIRST LINE OF THE ADDRESS
TAKEN FROM A.R.F. ADDRESS LABEL. MAKE SURE TO TYPE IT EXACTLY AS IT IS
PRINTED.
Text: Maximum 10 characters

**[First]***
INTERVIEWER: For information, you are in the questionnaire for:
Org: *(ScotCen=3)*
Sample: *(sample type indicator – 1=Version A, 2=Version B and 4=child boost )*
Point no:    *(Point number)*
Address no:    *(Address number)*
Household no:    *(Household number)*
Strand:   *(Core version A or version B)*

- TO COMPLETE A STARTED INDIVIDUAL SESSION, PRESS <CTRL, ENTER>.
- TO OPEN A NEW INDIVIDUAL SESSION, PRESS <CTRL, ENTER>.
- TO GO DIRECTLY TO 'ADMIN,' PRESS <CTRL, ENTER>.
- OTHERWISE PRESS 1 AND <ENTER> TO CONTINUE.


**InfoLeaf]**
BEFORE COMMENCING THE INTERVIEW, PLEASE ENSURE THAT YOU PROVIDE
ALL RESPONDENTS WITH THE AGE-APPROPRIATE INFORMATION LEAFLET AND

ASK THEM TO READ THIS. RESPONDENTS SHOULD BE LEFT WITH A COPY EACH.

Press 1 and enter to continue

[*HHMode and IndMode brought back on route Apr 2022 for Version A and Version B*]

[IF HHMode=2(telephone)]

**[BEFDIAL]**
The named adult in this household is <FIR_NAME> <SUR_NAME>

Have you already interviewed this adult?
1  Yes (Go to PerOTav)
2  No (Go to Per1AV)

**ASK IF BEFDIAL = 2/DK/REF**
　　**[Per1av]**
　　Good morning/afternoon/evening. My name is….
　　and I am calling from ScotCen Social Research [/the Office for National Statistics] about the Scottish Health Survey.

　　Please could I speak with <FIR_NAME> <SUR_NAME>?
1  Speaking (Go to IntroA)
2  Yes, did not answer phone but available now (Go to IntroA)
3  No / not available now (Go to CallbackA)

**ASK IF BEFDIAL = 1**
　　**[PerOTav]**
　　Good morning/afternoon/evening. My name is [NAME] and I am calling from ScotCen Social Research [/the Office for National Statistics] about the Scottish Health Survey.

　　Some people in the household have already taken part in the Scottish Health Survey. I'm hoping to speak with anyone else who lives at {Interviewer read address}, and who have not yet taken part.

　　If there is anyone under the age of 16 who would like to take part then their parent or guardian will need to be present if the child is aged 13 to 15 and will need to answer on their behalf if they are aged 0 to 12.

1  Yes, speaking (Go to IntroA)
2  Yes, did not answer phone but available now (Go to IntroA)
3  No-one else available right now (Go to CallbackA)
4  No-one else living here/ No-one else wants to take part. (Go to CallEndA)

**ASK IF [Per1av] = 3/DK/REF or [PerOTav] = 3/DK/REF**
　　　　**[CAllBackA]**
　　　　No problem. When is a good day and time to call back {*Textfill if* [**Per1av**] = 3/DK/REF: And speak to <FIR_NAME>}?
　　　　1 Time given – INTERVIEWER RECORD MANUALLY
　　　　2 No specific day/time given

**ASK IF [CAllBackA] = 1, 2**

Readprompt

Before I call back please could you {*Textfill if* [**Per1av]** = 3/DK/REF: ask <FIR_NAME> to / if Perotav = 3: ask those aged 16 or over to} read the letter and information leaflet sent your address? It is important that anyone who takes part has read these before doing so. If you don't still have the letter and leaflet that's fine, you can also read the information at [www.scotcen.org.uk/scottishhealthsurvey](www.scotcen.org.uk/scottishhealthsurvey).

INTERVIEWER – IF RESPONDENT WISHES TO RECORD THE WEBSITE ADDRESS PLEASE MAKE SURE THEY DO SO CORRECTLY BEFORE MOVING ON.

1        Continue

**ASK IF BEFDIAL=1 AND [Per1av] = 3/DK/REF**

**[OthAdA]**

Is there anyone else who lives at this address that I can speak to just now about taking part in the Scottish Health Survey?

If there is anyone under the age of 16 who would like to take part then their parent or guardian will need to be present if the child is aged 13 to 15 and will need to answer on their behalf if they are aged 0 to 12.

1        Speaking
2        Yes, did not answer phone but available now
3        No-one else aged 16+ available right now (Go to CallEndA)
4        No-one else aged 16+ living there/ No-one else wants to take part.

**ASK IF [OthAdA] = 3/4/DK/REF OR PeroTav = 4**

**[CallEndA]**

No problem. {*text fill if OthAdA=3 AND* CAllBackA = 1 "I will call back as arranged" / *if* CAllBackA = 2 "I will call back another time". Thanks for your time.

**ASK IF Per1av = (1 or 2) OR PeroTav = (1 or 2) or OthAdA = (1 or 2)**

**[INTROA]**

{*Textfill if* **Per1Av**=2 *or* **PeroTav**=2 *or* **OthAdA = 2**} - *Good morning/afternoon/evening. My name is…*
*I am calling from ScotCen social research [/the Office for National Statistics] about the Scottish Health Survey.*}

We sent your household a letter recently about taking part in the survey. It can be completed now or at another time depending on what is convenient for you.

1        Complete now
2        Complete another time (go to CallBackA)
3        Does not wish to take part (code as individual refusal and LOOP BACK TO OthAdA)

**ASK IF INTROA=1**

**[INTROC]**

Have you had a chance to read the letter and information leaflet about the Survey that we sent to your address recently?

1        Yes, have read (Go to CarryOn)
2        No, not read (Go to IntroLeaf)

**ASK IF [INTROC]=2**

**[IntroLeaf]**
The letter and leaflet outline some key things you might like to know about the survey before you take part. It is important that you are aware of this information in advance so you fully understand what taking part involves.
1 and enter

**[FindLeaf]**
Are you able to find the letter and leaflet just now? I am happy to wait while you locate it.
1        Yes – found and has letter and leaflet to hand (Go to ReadNow)
2        No – looked but couldn't find (Go to IntRead)
3        Didn't look for it (Go to IntRead)

**If FindLeaf=1**
[ReadNow]
Could you read the letter and leaflet now and let me know when you've finished? Again, I'm happy to wait while you do this.
INTERVIEWER: CODE BELOW IF HAPPY TO READ NOW
1        Participant reads letter and leaflet now while you wait (then go to CarryOn)
2        Participant prefers to go away and read it and get a call back.(loop back to CallBackB)
2        Participant decides does not want to read now or later as no longer wants to take part (code as individual refusal and LOOP BACK TO OthAdA)

**If [FindLeaf]=2,3,DK,REF**

**[IntRead]**
I can summarise the key information on the letter and leaflet for you now if you prefer. Shall I begin?
Yes (go to ReadOut)
No - prefer to go away and read for self (loop back to CallBackA)
No – no longer want to take part (code as individual refusal and LOOP BACK TO OthAdA)

**If IntRead=yes**
[ReadOut]
I have quite a lot to read out to you so do please bear with me and listen carefully. At the end I will ask you if you are happy to proceed.

The Scottish Health Survey is an annual survey carried out to gather information used to help develop ways to improve people's health across Scotland. It is carried out for the Scottish Government by ScotCen Social Research, an independent research institute, and academics from the Universities of Glasgow, Aberdeen and Edinburgh. Each year around 7000 people take part.

Your address was chosen at random from the publicly available Postcode Address File, a list of every address in Scotland, held by the Post Office.

**There will be questions about your general health, physical activity, smoking and drinking. There are some questions about diseases of the heart, lungs and chest, and questions about  Covid-19 and the vaccination programme.**

You will also be asked to provide some personal details such as age, sex, employment, height and weight to help interpret the answers you give. If you do not wish to answer any questions you do not have to.

**You will receive a £10 high street voucher as a thank you for taking part.**

The Scottish Government and ScotCen guarantee that the survey results will not be published in a form that can reveal your identity and that they will make no attempt to identify you from your answers. The information collected is used for statistical and research purposes only and will be dealt with in accordance with data protection legislation. The information collected in the survey (but no information that would allow you to be identified) is made available via the UK Data Service for use by researchers and academics.

The study has been approved by an independent Research Ethics Committee to protect your safety, rights, wellbeing and dignity. It has been given a favourable opinion by Wales Research Ethics Committee on behalf of the NHS.

Further details on privacy and how the information you provide will be used can be found in the 'Asked to take part?' section of the Scottish Government's survey website: https://www.gov.scot/collections/scottish-health-survey/ . If you have any concerns about how your information is being used, you can contact the Scottish Government's Data Protection Officer by emailing: **DataProtectionOfficer@gov.scot**

If you have any questions about the survey, you can ask me or call the freephone number 0800 652 2704. Alternatively, you can email Scottishhealthsurvey@scotcen.org.uk or visit https://www.gov.scot/collections/scottish-health-survey/ .

1 and enter

**If IntroC=1 or ReadNow=1 or INTREAD = 1**
    **[CarryOn]**
    {TEXTFILL if IntroC=1 or ReadNow=1 textfill=read the information. If INTREAD = 1 textfill=heard this}
    Having {*read the information/heard this*} are happy to proceed?
    1     Yes (go to SurveyPk)
    2     No (Go TO CallbackC)

**If carryon=2**
    **[callbackc]**
    Shall I call back another time?
    1     Yes (loop back to CallBackB)
    2     No – don't want to take part (code as individual refusal and LOOP back to OthAdA)

**If CarryOn=1**
    **[SurveyPk]**
    Can I check that you received a pack after you opted in which included a set of showcards?
    INTERVIEWER: These are the showcards that the interviewer would usually provide to participants in the face-to-face interview and contain the response options for a large number of questions in Scottish Health.
    1     Yes
    2     No

**If SurveyPk=yes**
    **[GetPack]**
    Do you have the showcards to hand or are you able to get them please?
    1     Yes
    2     No

**If SurveyPk=no OR GetPack=no**
    **[SendShCard]**
    I would like to send you a link to the online showcards so you can use these for selecting a response for questions as we go through the interview. Are you happy for me to email you this link?
    1     Yes
    2     No

**If SendShCard=yes**
    INTERVIEWER: Please send email to participant with a link to the showcards. An email template has been provided for this purpose.

1  Continue

**If SendShCard=yes**
    **ViewShCard**
    Can I just check that you are able to access the showcards online?
    1     Yes
    2     No

1   Continue

**If GetPack=yes OR ViewShCard=yes**
   **[BeginY]**
   Great, we can now start the interview.

**If ViewShCard=no OR SendShCard=no**
   **[BeginN]**
   That's not a problem. I can send the showcards out to you by post as you will need these to takepart in the interview. I will arrange to call you back in 5-7 days as you should have received them by then.
   1      Continue


**ASK IF ViewShCard=no**
         **[CAllBackN]**
         No problem. When is a good day and time to call back?
         1    Time given – INTERVIEWER RECORD MANUALLY
         2    No specific day/time given [LOOP BACK TO OthAdA]

[*Variables from here included for both HHMode=1 (face-to-face) and HHMode=2 (telephone) indicated otherwise*]


**[IntDate]***
         PLEASE ENTER THE DATE OF THIS INTERVIEW.
         Date:


         **[WhoHere]***
         INTERVIEWER: COLLECT THE NAMES OF THE PEOPLE IN THIS HOUSEHOLD.
1   Continue

**IF First person in household OR More=Yes THEN**
         **[Name]***
         What is the name of *(person number)?*

         **[More]***
         Is there anyone else in this household?
1   Yes
2   No

*(Name and More repeated for up to 12 household members)*

         **[SizeConf]***
         So, can I check, altogether there are *( (x) number)* people in your household?
1   Yes
2   No, more than *(x)*
3   No, less than *(x)*


**HOUSEHOLD COMPOSITION GRID FOR ALL HOUSEHOLD MEMBERS (MAXIMUM 12)**

         **[Person]**
         *Person number in Household Grid.*

*Range: 0..12*

**[Name]***
*First name from WhoHere*

**[Sex22]**
ASK: What is the sex of *(name of respondent)?*
1    Female
2    Male
3    Prefer not to say

**[DoB]***
What is (*name of respondent's*) date of birth?

**Enter Day of month in numbers, Name of month in numbers, Year in numbers, eg. 02/01/1972.**

**[Age] AgeOf**
Can I check, what was *(name of respondent's)* age last birthday?
Range: 0..120

**IF AgeOf=Dk/Ref THEN**
**[AgeEst]***
INTERVIEWER CODE: ASK IF NECESSARY ARE YOU (IS HE/SHE), AGED UNDER 2 YEARS, AT LEAST 2 UP TO 15 YEARS, OR 16 YEARS OR OLDER? IF NOT KNOWN OR NO TERMINATE INTERVIEW.
1    Under 2 years
2    2 to 15 years
3    16-64 years
4    65 years or older

**IF Age of Respondent is 16 or over THEN**
**[Marital12] Marital**
SHOW CARD A1
Please look at this card and tell me your legal marital or same-sex civil partnership status
INTERVIEWER: CODE FIRST THAT APPLIES.
1    Never married and never registered a same-sex civil partnership
2    Married
3    In a registered same-sex civil partnership
4    Separated, but still legally married
5    Separated, but still legally in a same-sex civil partnership
6    Divorced
7    Formerly in a same-sex civil partnership which is now legally dissolved
8    Widowed
9    Surviving partner from a same-sex civil partnership

**IF more than one person aged 16+ in household AND marital status=code 1, 4, 5, 6, 7, 8 or 9 THEN**
**[Couple]**
May I just check, *(are you/is he)* living with someone in this household as a couple?
1Yes
2    No
3    SPONTANEOUS ONLY - same sex couple

**IF (Age of Respondent is 16-17) THEN**
> **[LegPar]**
> Can I check, do either of *(name of respondent's)* parents, or someone who has legal parental responsibility for him/her, live in this household?

1 Yes
2 No

> **[Par1]**
> Which of the people in this household are *(name of respondent's)* parents or have legal parental responsibility for *(him/her)* on a permanent basis?
> INTERVIEWER: CODE FIRST PERSON AT THIS QUESTION. IF Not a household member/dead, CODE 97
> Range: 1..12, 97

**IF Par1 IN [1..12] THEN**
> **[Par2]**
> Which other person in this household is *(name of respondent's)* parent or have legal parental responsibility for him/her on a permanent basis?
> CODE SECOND PERSON AT THIS QUESTION. IF No-one else in the household, CODE 97
> Range: 1..14, 97

**[SelCh]**
> INTERVIEWER: Is this child selected for an individual interview?

1 Yes
2 No

**RELATIONSHIP BETWEEN HOUSEHOLD MEMBERS COLLECTED FOR ALL**

**IF Person > 1 THEN**
> **[R]**
> SHOW CARD A2
> How is *(name of respondent)* related to *(name)*? Just tell me the number on this card.

| | |
|---|---|
| 1 | husband/wife/spouse |
| 2 | legally recognised civil partner |
| 3 | partner/cohabitee |
| 4 | natural child |
| 5 | adopted child |
| 6 | foster child |
| 7 | step-child |
| 8 | child's spouse/civil partner (in law) |
| 9 | natural parent |
| 10 | adoptive parent |
| 11 | foster parent |
| 12 | step-parent/parent's partner |
| 13 | parent-in-law |
| 14 | natural sibling (ie. both natural parents the same) |
| 15 | half-sibling (ie. one natural parent the same) |
| 16 | step-sibling (ie. no natural parents the same) |
| 17 | adopted sibling |
| 18 | foster sibling |
| 19 | sibling-in-law |
| 20 | grandchild |
| 21 | grandparent |
| 22 | other relative |
| 23 | other non-relative |

**END OF HOUSEHOLD COMPOSITION GRID**

Child selection

> **ASK IF CHILD UNDER THE AGE OF 16**
> **[ChCons]**
> As [child name] is under the age of 16 we require your verbal consent for them to take part. Please also show them and read through the Leaflet for Children so that they are able to decide if they would like to take part themselves.
> We require you to be present and in earshot of your child taking part in the interview.
> [IF HHMode=2] In order to do this the phone will need to be on speakerphone.
> INTERVIEWER: CODE
> 1 I consent to my child taking part
> 2 I do not consent for my child to take part

**ASK ALL**

> **[HHldr]**
> Although this survey is about health, the first few questions are about your household in general. As everyone's health is related to their life circumstances, we will ask about the area and circumstances you live in.
>
> In whose name is the accommodation owned or rented? Anyone else?

CODE ALL THAT APPLY.
*(Codeframe of all household members)*
1-12    Person numbers of household members
97      Not a household member

**[HHResp]**
INTERVIEWER CODE: WHO WAS THE PERSON RESPONSIBLE FOR ANSWERING
THE GRIDS IN THIS QUESTIONNAIRE?
*(Codeframe of adult household members)*
1-12    Person numbers of household members
97      Not a household member

**IF More than one person coded at HHldr THEN**
**[HiHNum]**
You have told me that *(name)* and *(name)* jointly own or rent the accommodation. Which of you /who has the highest income (from earnings, benefits, pensions and any other sources)?
ENTER PERSON NUMBER – IF TWO PEOPLE HAVE THE SAME INCOME, ENTER 13
*(Codeframe of joint householders)*
1-12    Person numbers of household members
13      Two people have the same income

**IF HiHNum=13 THEN**
**[JntEldA]**
ENTER PERSON NUMBER OF THE *ELDEST* JOINT HOUSEHOLDER FROM THOSE
WITH THE HIGHEST INCOME.
ASK OR RECORD.
*(Codeframe of joint householders)*
1-12    Person numbers of household members

**IF HiHNum=Don't know or Refused**
**[JntEldB]**
ENTER PERSON NUMBER OF THE ELDEST JOINT HOUSEHOLDER.
ASK OR RECORD.
*(Codeframe of joint householders)*
1-12    Person numbers of household members

**[HRP]***
INTERVIEWER: THE HOUSEHOLD REFERENCE PERSON IS:
*(Displays name of Household Reference Person)*
PRESS <1> AND <Enter> TO CONTINUE.

**[Eligible]***
INTERVIEWER: FOR YOUR INFORMATION THE PEOPLE IN THIS HOUSEHOLD
ELIGIBLE FOR AN INDIVIDUAL INTERVIEW ARE:
*(List of eligible respondents)*
PRESS <1> AND <Enter> TO CONTINUE.

**END OF HOUSEHOLD COMPOSITION GRID**

**[HRP]***
INTERVIEWER: THE HOUSEHOLD REFERENCE PERSON IS:
*(Displays name of Household Reference Person)*
PRESS <1> AND <Enter> TO CONTINUE.


**ASK ALL AGED 16+**
**[OwnORent08] OwnORent**
SHOW CARD A3
In which of these ways do you occupy this accommodation?
PROBE FOR DETAILS
1    Buying it with mortgage or loan
2    Own it outright
3    Pay part rent/part mortgage
4    Rent (including rents paid by housing benefit)
5    Live here rent free


**IF OwnRnt08= Rent OR Free THEN**
**[LandLord]**
Who is your landlord?
INTERVIEWER: Code first that applies.
If property is rented through an agent code in relation to the property owner NOT the agent.
1    **Organisations:** the local authority / council / Scottish Homes
2    **Organisations:** housing association, charitable trust or Local Housing Company
3    **Organisations:** employer (organisation) of a household member
4    Another organisation
5    **Individuals:** relative/friend (before you lived here) of a household member
6    **Individuals:** employer (individual) of a household member
7    Another individual private landlord

**ASK ALL**
**[Car12]**
In total, how many cars or vans are owned, or are available for private use,
by members of your household? Include any company cars or vans available for private use
Range  : 0..100.


**ASK ALL**
**[PasSm]**
Does anyone smoke **inside** this (house/flat) on most days?
INTERVIEWER: IF ASKED, RESPONDENT SHOULD INCLUDE THEMSELVES AND
NON-HOUSEHOLD MEMBERS WHO SMOKE IN THE HOUSE/FLAT, BUT EXCLUDE
ANY HOUSEHOLD MEMBERS WHO ONLY SMOKE OUTSIDE OF THE HOUSE/FLAT.

INTERVIEWER: DO NOT INCLUDE VAPING OR USE OF E-CIGARETTES.

1    Yes
2    No

**[SmokHm]**
SHOW CARD A4
Regardless of whether you smoke or not, using this card, what best describes the smoking rules in this (house/flat)? Please think about the people who live with you as well as visitors to your home?

INTERVIEWER: IF RESPONDENT DOES NOT HAVE ANY SMOKING RULES, ASK THEM TO THINK WHAT RULES THEY WOULD APPLY TO SMOKERS IN THEIR HOME.

INTERVIEWER: DO NOT INCLUDE VAPING OR USE OF E-CIGARETTES.

1    People can smoke anywhere inside this house/flat
2    People can only smoke in certain areas or rooms inside this house/flat (include smoking out of the window and at an open back door)
3    People can only smoke in outdoor areas (e.g. gardens/balconies) of this house/flat
4    People cannot smoke indoors or in outdoor areas of this house/flat


**IF >1 person in household**
  **[EatTog]**
  How many times in the last week, that is the seven days ending *(date last Sunday)*, did all or most of the people who live in this household eat a main meal together not including breakfast?
1    Never
2    One or two times
3    Three or four times
4    Five or six times
5    Seven times
6    More than often than this


**ASK ALL IN VERSION A, B AND HEALTH BOARD BOOST (NOT CHILD BOOST)**
**INTERVIEWER: I'm now going to ask you some questions about your local area**
  **[LiveArea]**
  First, how many years have you lived in your local area? By this I mean the area within about a 15 minute walk from your home?
1    Less than 1 year
2    1 year but less than 2
3    2 years but less than 5
4    5 years but less than 10
5    10 years or more


**IF lived in area 2 years or more (LiveArea >= 3)**
  **[CrimArea]**
  How much would you say the crime rate in your local area has changed since two years ago?  Would you say there is more, less or about the same?
  INTERVIEWER: IF ANSWER IS 'MORE' ASK: Is that a lot more or a little more?
   IF ANSWER IS 'LESS' ASK: Is that a lot less or a little less?
  INTERVIEWER: IF ASKED: There is an interest in finding out if there is a relationship between people's experience of crime and their health and wellbeing:
1    A lot more
2    A little more
3    About the same
4    A little less

5    A lot less

**ASK ALL IN VERSION A, B AND HEALTH BOARD BOOST (NOT CHILD BOOST)**

**ASK ALL**
    **[PrevCrim]**
    SHOW CARD A5
    How confident are you in the ability of police in your local area to prevent crime?
1    Very confident
2    Fairly confident
3    Not very confident
4    Not at all confident

    **[ActQuick]**
    SHOW CARD A5
  How confident are you in the ability of police in your local area to respond quickly to appropriate calls and information from the public?
1    Very confident
2    Fairly confident
3    Not very confident
4    Not at all confident

    **[DealInc]**
    SHOW CARD A5
  How confident are you in the ability of police in your local area to deal with incidents as they occur?
1    Very confident
2    Fairly confident
3    Not very confident
4    Not at all confident

    **[Investig]**
    SHOW CARD A5
  How confident are you in the ability of police in your local area to investigate incidents after they occur?
1    Very confident
2    Fairly confident
3    Not very confident
4    Not at all confident

    **[SolvCrim]**
    SHOW CARD A5
    How confident are you in the ability of police in your local area to solve crimes?
1    Very confident
2    Fairly confident
3    Not very confident
4    Not at all confident

**[CatchCri]**
SHOW CARD A5
How confident are you in the ability of police in your local area to catch criminals?
1    Very confident
2    Fairly confident
3    Not very confident
4    Not at all confident


**[SuppCr]**
SHOW CARD A5
How confident are you in the ability of police in your local area to support victims of crime?

INTERVIEWER READ OUT: For example, providing them with appropriate guidance and information, or referring them to other support services – such as psychological or medical support.

1    Very confident
2    Fairly confident
3    Not very confident
4    Not at all confident


**[GenHHRe]**
INTERVIEWER CODE:
Who was the person responsible for answering the household questionnaire?
(list of names from household grid)
: 1..97, NODONTKNOW, NOREFUSAL

**IF GenHHRe = Head of Household OR Spouse/ partner of Head of household**
   **[SrcInc]**
   SHOW CARD A6
   Please look at this card. There has been a lot of talk about health and income. We would like to get some idea of your household's income. This card shows various possible sources of income. Can you please tell me which of these you *(and your husband/wife/partner)* receive?
   INTERVIEWER: PROBE FOR ALL SOURCES. CODE ALL THAT APPLY

| | | |
|---|---|---|
| 1 | Earnings from employment or self-employment (incl. overtime, tips, bonuses) | [SrcInc1] |
| 2 | State retirement pension | [SrcInc2] |
| 3 | Pension from former employer | [SrcInc3] |
| 4 | Personal pensions | [SrcInc4] |
| 5 | Pension Credit | [SrcInc5] |
| 6 | Child Benefit | [SrcInc6] |
| 7 | Universal Credit | [SrcInc7] |
| 8 | Job-Seekers Allowance | [SrcInc8] |
| 9 | Income Support | [SrcInc9] |
| 10 | Working Tax Credit, Child Tax Credit or any other Tax Credit | [SrcInc10] |
| 11 | Housing Benefit | [SrcInc11] |
| 12 | Employment and Support Allowance | [SrcInc12] |
| 13 | Personal Independence Payments | [SrcInc13 |
| 14 | Disability Living Allowance | [SrcInc14] |
| 15 | Attendance Allowance | [SrcInc15] |
| 16 | Carer's Allowance | [SrcInc16] |
| 17 | Other state benefits | [SrcInc17] |
| 18 | Student grants and bursaries (but not loans) | [SrcInc18] |
| 19 | Interest from savings and investments (eg stocks & shares) | [SrcInc19] |
| 20 | Rent from property (after expenses) | [SrcInc20] |
| 21 | Other kinds of regular income (e.g. maintenance or grants) | [SrcInc21] |
| 22 | No source of income | [SrcInc22] |

   **[JntInc]**
   SHOW CARD A7
   This card shows incomes in weekly, monthly and annual amounts. Which of the groups on this card represents *(your/you and your husband/wife/partner's combined)* income from all these sources over the last 12 months, before any deductions for income tax, National Insurance contributions, health insurance payments, superannuation payments, etc? Just tell me the number beside the row that applies to *(you/your joint incomes).*
   INTERVIEWER: THIS QUESTION REFERS TO INCOME FROM ALL THE SOURCESLISTED IN CARD A6. PLEASE REFER RESPONDENT BACK TO CARD A6 IF NECESSARY.
   INTERVIEWER: ENTER BAND NUMBER. DON'T KNOW = 96, REFUSED = 97.
   Range:1..97

**IF 2 Adults in household who are not spouse/partner, or 3 or more adults in household THEN**
   **[OthInc]**
   Can I check, does anyone else in the household have an income from any source?
1    Yes
2    No

**IF OthInc = Yes THEN**

    **[HHInc]**

    SHOW CARD A7

    Thinking of the income of your household as a whole, which of the groups on this card represents the household's total income from all these sources over the last 12 months before any deductions for taxes, National Insurance contributions, health insurance payments, superannuation payments etc? Just tell me the number beside the row that applies.

    INTERVIEWER: THIS QUESTION REFERS TO INCOME FROM ALL THE SOURCES LISTED IN CARD A6.  PLEASE REFER RESPONDENT BACK TO CARD A6 IF NECESSARY.

    ENTER BAND NUMBER. DON'T KNOW = 96, REFUSED = 97.


    Range:1..97

## EMPLOYMENT DETAILS OF HOUSEHOLD REFERENCE PERSON

**IF GenHHRe NE HRP THEN**

    **[EConIntro]**

  The next section is about employment, I'll ask about [HRP]'s now and I'll ask about [NAME(S) OF OTHER ADULTS IN HH] later on.


    **[EconAc12]**

    SHOW CARD A8

    In the last week (that is the 7 days ending *date last Sunday*) were you doing any of the following, even if only for one hour?

    INTERVIEWER: 'Temporarily away' includes away from work ill, on maternity leave, on holiday leave and temporarily laid off (as long as there is still an employment contract). It does not include those who are laid off and no longer have an employment contract.

    INTERVIEWER:  If currently on furlough, please code based on employment status pre-furlough.

    INTERVIEWER: Code **all that apply**.


| | | |
|---|---|---|
| 1 | Working as an employee (or temporarily away) | [HWrkEmp] |
| 2 | On a Government sponsored training scheme (or temporarily away) | [HGvtSchm] |
| 3 | Self-employed or freelance (or temporarily away) | [HSelfEmp] |
| 4 | Working unpaid for your own family's business (or temporarily away) | [HWrkFam] |
| 5 | Doing any other kind of paid work | [HOthWrk] |
| 6 | None of the above | [HNoneabv] |



**IF (HRP Age 16 to 64) AND NOT (HGvtSchm) THEN**

    **[HEducCour] EducCour**

    Are you at present (at school) or enrolled on any **full-time** education course excluding leisure classes? (Include correspondence courses and open learning as well as other forms of full-time education course).

    INTERVIEWER: CODE **YES** IF FULL-TIME STUDENT ON HOLIDAY AND WILL BE STUDYING FULL-TIME WHEN NEXT TERM STARTS. IF RESPONDENT IS STUDYING PART-TIME CODE **NO** HERE.

1    Yes

2      No

**IF ((HWrkFam) OR (HNoneabv)) AND NOT ((HWrkEmp) OR (HGvtSchm) OR (HSelfEmp) OR (HOthWrk)) THEN**
    **[HWk4Look12] Wk4Look12**
    Thinking of the 4 weeks ending (date last Sunday), were you looking for any paid work or Government training scheme at any time in those 4 weeks?
1      Yes
2      No


**IF HWk4Look12 = No THEN**
    **[HWaitJb12] WaitJb12**
    Are you waiting to take up a job that you have already obtained?
1      Yes
2      No

**IF (HWk4Look12 = Yes OR HWaitJb12 = Yes) THEN**
    **[HWk2Star12] Wk2Star12**
    If a job or a place on a government scheme had been available in the week ending (*date last Sunday*), would you have been able to start within 2 weeks?
1      Yes
2      No


**IF (HNoneabv) AND (HWk4Look12 = No) AND (HWaitJb12 = No) THEN**
    **[HYNotWrk] YNotWrk**
    May I just check, what was the main reason you did not look for work in the last 4 weeks?
    INTERVIEWER: CODE ONE ONLY
1      Waiting for the results of an application for a job/being assessed by a training agent
2      Student
3      Looking after family/home
4      Temporarily sick or injured
5      Long-term sick or disabled
6      Believes no job available
7      Not yet started looking
8      Doesn't need employment
9      Retired from paid work
10     Any other reason

**IF (HNoneabv) AND (HWaitJb12 <> Yes) THEN**
    **[HEverJob] EverJob**
   Have/has *you/name* (Household Reference Person) ever been in paid employment or self-
      employed?
1      Yes
2      No


**IF (HWaitJb12 = Yes) THEN**
    **[HOthPaid] OthPaid**
   Apart from the job *you/name* are waiting to take up, have *you/name* (Household Reference Person) ever been in paid employment or self-employed?
   1 Yes
   2 No

**IF (HEverJob = Yes) OR (HOthPaid = Yes) THEN**

**[HPayLast] PayLast**

Which year did *you/name* (Household Reference Person) leave *your/his/her* last paid job?

**WRITE IN.**

Numeric: 1920..2001 Decimals: 0

**IF HPayLast <= 8 years ago THEN**

**[HPayMon] PayMon**

Which month in that year did *you/he/she* leave?

1 January
2 February
3 March
4 April
5 May
6 June
7 July
8 August
9 September
10 October
11 November
12 December
13 Can't remember

**IF (HEverJob = Yes) OR (HWaitJb12 = Yes) OR (Hwrkemp AND NOT Hnoneabv) THEN**
**IF NOT (Hnoneabv) THEN**

**[HJobTitl]* JobTitle**

I'd like to ask you some details about (the job you were doing last week/your most recent job/the main job you had/the job you are waiting to take up). What (is/was/will be) the name or title of the job?

INTERVIEWER: IF RESPONDENT HAS MORE THAN ONE JOB/ACTIVITY ASK THEM ABOUT THE ONE THEY SPEND THE MOST TIME DOING.

Text: Maximum 60 characters

**[HFtPtime] FtPrime**

*Is/Were/Are/Will  you/name* (Household Reference Person) *be* working full-time or part-time?

(FULL-TIME = MORE THAN 30 HOURS, PART-TIME = 30 HOURS OR LESS)

1 Full-time
2 Part-time

**[HWtWork]* WtWork**

What kind of work *do/did/does/will you/name* (Household Reference Person) do most of the time?

Text: Maximum 50 characters

**[HMatUsed]* MatUsed**

IF RELEVANT: What materials or machinery *do/did/will you/name* (Household Reference Person) use?

IF NONE USED, WRITE IN 'NONE'.

Text: Maximum 50 characters

**[HSkilNee]* SkilNee**

What skills or qualifications are *(were)* needed for the job?

Text: Maximum 120 characters

**[HEmploye] Employe**
*Is/Were/Are/Will you/name* (Household Reference Person) *be…READ OUT…*
1   an employee
2   or, self-employed?
    IF IN DOUBT, CHECK HOW THIS EMPLOYMENT IS TREATED FOR TAX & NI
    PURPOSES.

**IF HEmploye = self employed THEN**
**[HDirctr] Dirctr**
Can I just check, in this job *are/were/will you/name* (Household Reference Person) *be* a
Director of a limited company?
1   Yes
2   No

**IF (HEmploye = Employee) OR (HDirctr = Yes) THEN**
**[HEmpStat] EmpStat**
*Are/Were/Will you/name* (Household Reference Person) *be* a ...READ OUT...
1   manager
2   foreman or supervisor
3   or other employee?

**[HNEmplee] NEmplee**
Including *yourself/name* (Household Reference Person), about how many people
*are/were/will be* employed at the place where *you/name usually work(s)/(usually worked/will
work)*?
1   1 or 2
2   3-24
3   25-499
4   500+

**ELSEIF (HEmploye = SelfEmp) AND (HDirctr = No) THEN**
**[HSNEmple] SNEmple**
*Do/Did/Will you/name* (Household Reference Person) have any employees?
1   None
2   1-24
3   25-499
4   500+

**IF HEmploye = Employee THEN**
**[HInd]\* Ind**
What *does/did your/ his/her* employer make or do at the place where *you/name* (Household
Reference Person) (*usually work/usually worked/will work*)?
Text: Maximum 100 characters

**IF HEmploye = Self Employed THEN**
**[HSlfWtMa]\* SlfWtMad**
What *do/did/will you/name* (Household Reference Person) make or do in your business?
Text: Maximum 100 characters

**ASK ALL**

**[HRPOcc]**

INTERVIEWER: Did *(name of HRP)* answer the occupation questions (*himself/herself)*?
**If you code 2 here you will also need to ask *(name of HRP)* about (*their)* job details when you interview *(them)* in person.**

1   Yes
**2**   No

# Individual Interview

**[IndMode]**

"@/INTERVIEWER CODE: Is this individual session to be conducted via face-to-face or telephone?"
: YMode
{ @/@/INTERVIEWER: If the participant opts to complete the interview via telephone it will only be possible to include 1 adult and 2 children aged 0-12 in the session.
This is because concurrent interviewing is not possible in the telephone mode."}

**[IF PHONE]**
In the telephone mode it is possible to conduct concurrent interviewing with up to three household members at any one time as long as the participants are able to listen to the interviewer asking the question (e.g. participants are able to use the speakerphone facility). As parents/carers answer on behalf of 0-12 year olds they can complete the interview for themselves and their child(ren) aged 0-12 without speakerphone capabilities.

**If PHONE: [SpeakPh]**
Can I just check, is it possible for you to use the speakerphone facility on your phone so that other people in your household can take part at the same time?
1    Yes, this is possible and other household members are present
2    Yes, it's possible, but other household members are not available
3    No

**ASK ALL If PHONE**
**READCON**
INTERVIEWER DO NOT READ OUT:
Please confirm that the respondent has informed you that they have read the letter and leaflet themselves, or that you have read out the key survey information from your screen to the respondent.

1    Respondent confirmed read materials themselves
2    Respondent listened to me read out key information
3    Respondent neither read themselves or had read out to them

**Ask if readcon = 3**
**Reread**
'The letter and leaflet we sent to your address outlined some key things you might like to know about the survey before you take part. It is important that you are aware of this information so you fully understand what taking part involves so I will read this out to you now.

I have quite a lot to read out to you so do please bear with me and listen carefully.

The Scottish Health Survey is an annual survey carried out to gather information used to help develop ways to improve people's health across Scotland. It is carried out for the Scottish Government by ScotCen Social Research, an independent research institute, and academics from the Universities of Glasgow, Aberdeen and Edinburgh. Each year around 7000 people took part.

Your address was chosen at random from the publicly available Postcode Address File, a list of every address in Scotland, held by the Post Office.

**There will be questions about your general health, physical activity, smoking and drinking. There are some questions about diseases of the heart, lungs and chest, and questions about Covid-19 and the vaccination programme.**

You will also be asked to provide some personal details such as age, sex, employment, height and weight to help interpret the answers you give. If you do not wish to answer any questions you do not have to.

**You will receive a £10high street voucher as a thank you for taking part.**

The Scottish Government and ScotCen guarantee that the survey results will not be published in a form that can reveal your identity and that they will make no attempt to identify you from your answers. The information collected is used for statistical and research purposes only and will be dealt with in accordance with data protection legislation. The information collected in the survey (but no information that would allow you to be identified) is made available via the UK Data Service for use by researchers and academics.

The study has been approved by an independent Research Ethics Committee to protect your safety, rights, wellbeing and dignity. It has been given a favourable opinion by Wales Research Ethics Committee on behalf of the NHS.

Further details on privacy and how the information you provide will be used can be found in the 'Asked to take part?' section of the Scottish Government's survey website: Scottish Health Survey: interviewee FAQs - gov.scot (www.gov.scot)If you have any concerns about how your information is being used, you can contact the Scottish Government's Data Protection Officer by emailing: **DataProtectionOfficer@gov.scot**

If you have any questions about the survey, you can ask me or call the freephone number 0800 652 2704. Alternatively, you can email Scottishhealthsurvey@scotcen.org.uk or visit Scottish Health Survey: interviewee FAQs - gov.scot (www.gov.scot).

1 and continue


**Ask if readcon = 3**
If PHONE: **[CarryOnB]**
Having heard this are happy to proceed?
    1       Yes (go to IntDate)
    2       No (Go TO CallbackA)

[*Should be included for/asked of both modes*]

**[PersDisp]**
INTERVIEWER: For your information …
… the person(s) allocated to this session are:
    1   Continue

**[IIntDate]**
INTERVIEWER: Please enter the date of this interview

**[1 Jump[2]]**
INTERVIEWER: Now follows the General Health module …
  1   Continue


**ASK ALL (0+)**
  **[DBCheck]***
  Can I just check that (your/name of child's) date of birth is: (date of birth from HHGrid)
  INTERVIEWER:
  Code 1 if the date of birth is correct.
  Code 2 if it is wrong.
  Code 3 if the date of birth was not collected at the household grid.
  1   Date of birth is correct
  2   Date of birth is wrong
  3   No date of birth has been collected yet

**IF DBCheck = Code 2, 3 THEN**
  **[ODoBD]***
  What is *(your/name of child's)* date of birth?
  INTERVIEWER: Enter day, month and year of *(name/child's name)'s* date of birth
  separately.
  Enter the **day** here.
  If *(name)* does not know (*his/her)* date of birth, enter Don't know <Ctrl K> and get an
  estimate.
  Range: 1..31

  **[ODoBM]***
  INTERVIEWER: Code the **month** of *(name/child's name)'s* date of birth.
    1     January
    2     February
    3     March
    4     April
    5     May
    6     June
    7     July
    8     August
    9     September
    10    October
    11    November
    12    December

  **[ODoBY]***
  INTERVIEWER: Enter **year** of *(name/child's name)*'s date of birth.
  Range: 1890..2100

**ASK ALL**
  **[OwnAge]*[1]**
  Can I just check, is your age:  (age from HHGrid)?1     Yes
  1   No

---

[1] In the final dataset the participant's age can be found in the variable [age]

**IF RESPONDENT'S AGE HAS CHANGED SINCE THE HOUSEHOLD QUESTIONNAIRE (DUE TO A BIRTHDAY)**

**[Birthday]***

INTERVIEWER FOR YOUR INFORMATION:

This respondent has had a birthday since you started the household questionnaire *(date of HH Questionnaire).*

For survey reasons the age used in this individual session is based on that date, not today's date. That is, this person will be treated as being *(age at HH Questionnaire)* years old and not *(current age)* years old.

 Now press <Enter> to continue.

**IF 'DON'T KNOW' at ODobD,  THEN**

**[OwnAgeE]***

Can you tell me *(your/name of child)'s* age last birthday?

IF NECESSARY: What do you estimate *(your/name of child)'s* age to be?

**IF 'DON'T KNOW' at OwnAgeE AND AGE 0-15**

**[AgeCEst]***

INTERVIEWER: Estimate nearest age:

| | |
|---|---|
| 1 | 1 |
| 2 | 3 |
| 3 | 5 |
| 4 | 7 |
| 5 | 9 |
| 6 | 11 |
| 7 | 13 |
| 8 | 15 |

**IF 'DON'T KNOW' at OwnAgeE AND AGE 16+**

**[AgeAEst]***

INTERVIEWER: Estimate nearest age:

| | |
|---|---|
| 1 | 18. (ie between 16 - 19) |
| 2 | 25. (ie between 20 - 29) |
| 3 | 35. (ie between 30 - 39) |
| 4 | 45. (ie between 40 - 49) |
| 5 | 55. (ie between 50 - 59) |
| 6 | 65. (ie between 60 - 69) |
| 7 | 75. (ie between 70 - 79) |
| 8 | 85. (ie 80+) |

# General Health module – (ALL)

**ASK ALL (0+)**
**[GenHelf]**
How is your health in general? Would you say it was ...READ OUT…
1   ...very good,
2   good,
3   fair,
4   bad, or
5   very bad?

**[LongIl12] LongIll**
Do you have a physical or mental health condition or illness lasting, or expected to last, 12 months or more?
1   Yes
2   No

**(Up to six long-standing illnesses are recorded in the program).**

**IF  LongIl12=Yes OR More=Yes THEN**
**[IllCode]\*** *(variable names IllCode1 to IllCode6)[1]* **IllsM [1] to [6]**
 What *(other)* condition(s) or illness(es) do you have?
INTERVIEWER: RECORD FULLY. PROBE FOR DETAIL.
1   Cancer (neoplasm) including lumps, masses, tumours and growths and benign (non-malignant) lumps and cysts
2   Diabetes
3   Other endocrine/metabolic
4   Mental illness/anxiety/depression/nerves (nes)
5   Learning disabilities
6   Epilepsy/fits
7   Migraine/headache
8   Other problems of nervous system
9   Cataract/poor eye sight/blindness
10   Other eye complaints
11   Poor hearing/deafness
12   Tinnitus/noises in the ear
13   Meniere's disease/ear complaints causing balance problems
14   Other ear complaints
15   Stroke/cerebral haemorrhage/cerebral thrombosis
16   Heart attack/angina
17   Hypertension/high blood pressure/blood pressure (nes)
18   Other heart problems
19   Piles/haemorrhoids incl. Varicose Veins in anus
20   Varicose veins/phlebitis in lower extremities
21   Other blood vessels/embolic
22   Bronchitis/emphysema
23   Asthma
24   Hayfever
25   Other respiratory complaints
26   Stomach ulcer/ulcer (nes)/abdominal hernia/rupture

---

[1] Note – the verbatim illness given by the respondent is coded in the office after interview.

27     Other digestive complaints (stomach, liver, pancreas, bile ducts, small intestine - duodenum, jejunum and ileum)
28     Complaints of bowel/colon (large intestine, caecum, bowel, colon, rectum
29     Complaints of teeth/mouth/tongue
30     Kidney complaints
31     Urinary tract infection
32     Other bladder problems/incontinence
33     Reproductive system disorders
34     Arthritis/rheumatism/fibrositis
35     Back problems/slipped disc/spine/neck
36     Other problems of bones/joints/muscles
37     Infectious and parasitic disease
38     Disorders of blood and blood forming organs and immunity disorders
39     Skin complaints
40     Other complaints
41     Unclassifiable
42     Complaint no longer present
99     Not answered/Refusal


*(LimAct12 and More repeated for each illness mentioned at IllsM)*

**[LimAct12] LimAct** *(variable names LimitAc1-LimitAc6)*
Does *(name of condition)* limit your activities in any way?
INTERVIEWER: IF YES, PROBE: Is that a little or a lot?
1     Yes, a lot
3     Yes, a little
2     Not at all


**[More]*** *(variable names More1-More6)*
(Can I check) do you have any other physical or mental health condition or illness?
1     Yes
2     No

**ASK 4+**
**[RG15New]**
Apart from anything you do as part of paid employment, do you look after, or give any regular help or support to family members, friends, neighbours or others because of either long-term physical, mental ill-health, disability; or problems related to old age?
1     Yes
2     No

**IF RG15New = Yes THEN**
>**[RG16a]**
>Who is it that you provide regular help or care for?
>INTERVIEWER: Code up to two people cared for.
>Code the **first** person here.

1-12    Person numbers of household members
97      Someone outside the household

**IF RG16a=1-12 or 97 THEN**
>**[RG16b]**
>Who else do you provide regular help or care for?
>INTERVIEWER: Code the **second** person here.

1-12    Person numbers of household members
97      Someone outside the household
98      No one else

**IF CARING FOR SOMEONE OUTSIDE THE HOUSEHOLD (IF RG16a = 97 OR RG16b = 97)**
>**[RG16c]**
>Who is it that you provide regular help or care for outside your household?
>INTERVIEWER: Code all that apply

| | | |
|---|---|---|
| 1 | Parent/parent-in-law | [RG16c1] |
| 2 | Other relative | [RG16c2] |
| 3 | Friend/neighbour | [RG16c3] |
| 4 | Other person | [RG16c4] |

>**[RG17New]**
>SHOW CARD A9
>In total, how many hours each week approximately do you spend providing any regular help or support?
>INTERVIEWER: Include care provided both inside and outside the household.
>INTERVIEWER: EXCLUDE ANY CARING THAT IS DONE AS PART OF PAID EMPLOYMENT
>INTERVIEWER: Show showcard

1      Up to 4 hours a week
2      5 - 19 hours a week
3      20 - 34 hours a week
4      35 - 49 hours a week
5      50 or more hours a week
6      Varies (spontaneous - not on SHOW CARD

>**[RG18]**
>SHOW CARD A10
>How long have you been providing this care for (him/her/them)?
>INTERVIEWER: Please code the longest period of care if caring for more than one person.

1      Less than one year
2      One year but less than 5 years
3      5 years but less than 10 years
4      10 years but less than 20 years
5      20 years or more

**ASK ALL 16-70 who are carers (IF RG15New=Yes) THEN**
  **[RG19]**
  SHOW CARD A11
  Has your employment been affected by the help or support you give the (person/people) that you currently care for in any of these ways? Please read out the numbers that apply from the card.
  INTERVIEWER: CODE ALL THAT APPLY
  INTERVIEWER: The question relates to the impact of caring on **present** employment. If unsure of how to code a particular answer code as 'other' and write in details

| | | |
|---|---|---|
| 1 | Been unable to take up employment | [RG191] |
| 2 | Worked fewer hours | [RG192] |
| 3 | Reduced responsibility at work | [RG193] |
| 4 | Flexible employment agreed | [RG194] |
| 5 | Changed to work at home | [RG195] |
| 6 | Reduced opportunities for promotion | [RG196] |
| 7 | Took new job | [RG197] |
| 8 | Left employment altogether | [RG198] |
| 9 | Took early retirement | [RG199] |
| 10 | Other (SPECIFY) | [RG1910] |
| 11 | Employment not affected/never had a job | [RG1911] |

  **[RG19O]\***
  **INTERVIEWER: WRITE IN OTHER ANSWER**

**ASK ALL 16+ who are carers (IF RG15new=Yes) THEN**
  **[RG20]**
  SHOW CARD A12
  What kind of support, if any, do you personally receive as a carer to help with the care that you provide?
  INTERVIEWER: CODE ALL THAT APPLY

| | | |
|---|---|---|
| 1 | Short breaks or respite e.g. day time breaks, overnight breaks or emergency respite | [RG201] |
| 2 | Advice and information | [RG202] |
| 3 | Practical support (e.g. transport, equipment/adaptations) | [RG203] |
| 4 | Counselling or emotional support | [RG204] |
| 5 | Training and learning | [RG205] |
| 6 | Advocacy services | [RG206] |
| 7 | Personal assistant/ support worker/ community nurse/ home help | [RG207] |
| 8 | Help from family, friends or neighbours | [RG208] |
| 9 | Carer's allowance | [RG209] |
| 10 | Other (SPECIFY) | [RG2010] |
| 11 | Receive no help or support | [RG2011] |

**ASK ALL aged 4-15 who are carers (IF RG15New=Yes THEN)**
**[RG20b]**
SHOW CARD A13
What kind of support, if any, do you personally receive as a carer to help with the care that you provide?
INTERVIEWER: CODE ALL THAT APPLY

| | | |
|---|---|---|
| 1 | Short breaks or respite e.g. day time breaks, overnight breaks or emergency respite | [RG20b1] |
| 2 | Advice and information | [RG20b2] |
| 3 | Practical things, e.g. putting hand rails in the bathroom, transport to a day centre | [RG20b3] |
| 4 | Talking to someone for support, e.g. family member, friend, counsellor | [RG20b4] |
| 5 | Having a befriender or a peer mentor | [RG20b5] |
| 6 | Advocacy services | [RG20b6] |
| 7 | Personal assistant/ support worker/ community nurse/ home help | [RG20b7] |
| 8 | Help from family, friends or neighbours | [RG20b8] |
| 9 | Help from teachers at school, e.g. talking or extra help with homework | [RG20b9] |
| 10 | Social activities and support, e.g. young carers' groups or day trips | [RG20b10] |
| 11 | Other (SPECIFY) | [RG20b11] |
| 12 | Receive no help or support | [RG20b12] |

**IF (Other IN RG20) OR (Other in RG20b)**
**[RG20O]***
INTERVIEWER: WRITE IN OTHER ANSWER

**ASK ALL 16+**
**[LifeSat]**
SHOW CARD A14
All things considered, how satisfied are you with your life as a whole nowadays?

| | |
|---|---|
| 0 | 0 – Extremely dissatisfied |
| 1 | 1 |
| 2 | 2 |
| 3 | 3 |
| 4 | 4 |
| 5 | 5 |
| 6 | 6 |
| 7 | 7 |
| 8 | 8 |
| 9 | 9 |
| 10 | 10 – Extremely satisfied |

# Respiratory symptoms and Cardiovascular Disease –

**INTERVIEWER READ OUT: The next few questions are about phlegm and your breathing. I will then go on to ask you about other health conditions.**

**ASK ALL AGED 16+ - version A**
>**[Flemwint] Flegm**
>Do you **usually** bring up any phlegm from your chest, first thing in the morning in winter?

1     Yes
2     No

**ASK ALL AGED 16+ - version A**
>**[Flemdawn] FleDa**
>Do you **usually** bring up any phlegm from your chest, during the day or at night in the winter?

1     Yes
2     No

**ASK ALL AGED 16+ - version A**
**IF Flemwint=Yes OR FlemDawn=Yes THEN**
>**[Flemreg] FreFl**
>Do you bring up phlegm like this on most days for as much as three months each year?

1     Yes
2     No

**ASK ALL AGED 16+ - version A**
**IF Uphillw <> Cannot walk THEN**
>**[Windhila] SoBUp**
>Are you troubled by shortness of breath when hurrying on level ground or walking up a slight hill?

1     Yes
2     No
3     Never walks uphill or hurries
4     Cannot walk

**ASK ALL AGED 16+ - version A**
**IF Windhila = Yes, Never walks uphill or hurries or cannot walk THEN**
>**[WindPeer] SoBAg**
>Do you get short of breath walking with other people of your own age on level ground?

1     Yes
2     No
3     Never walks with people of own age on level ground

**ASK ALL AGED 16+ - version A**
**IF Windpeer = Yes or No THEN**
>**[Windpace] SoLev**
>Do you have to stop for breath when walking at your own pace on level ground?

1     Yes
2     No

**REST OF CVD ASKED ALL AGED 16+ (SOME FILTERING MAY APPLY TO SPECIFIC QUESTIONS) - ALL VERSIONS**

**INTERVIEWER READ OUT: I would now like to talk in more detail about some particular conditions. (They may include some of the things you have already mentioned.)**

**[EverBp] CVD1**
Do you have, or have you ever had high blood pressure (sometimes called hypertension)?
1    Yes
2    No

**[Everangi] CVD2**
Have you ever had angina?
1    Yes
2    No

**[Everhart] CVD3**
Have you ever had a heart attack (including myocardial infarction or coronary thrombosis)?
1    Yes
2    No

**[Evermur] CVD4**
And do you now have, or have you ever had a heart murmur?
1    Yes
2    No

**[Everireg] CVD5**
...abnormal heart rhythm?
1    Yes
2    No

**[Everoht] CVD6**
...any other heart trouble?
1    Yes
2    No

**IF Everoht = Yes THEN**
**[CVDOth]***
What is that condition? INTERVIEWER: RECORD FULLY. PROBE FOR DETAIL.
Text: Maximum 50 characters
INTERVIEWER: Note that any mentions of TIAs (transient ischemic attacks) should be coded under stroke at the next question.

**ASK ALL AGED 16+**
**[Everstro] CVD7**
Have you ever had a stroke?
INTERVIEWER: If the respondent mentions any instances of TIAs (transient ischemic attacks) , these should be coded as 'yes' at this question.
1    Yes
2    No

**[Everdi] CVD8**
Do you now have, or have you ever had diabetes?
1    Yes
2    No

**[COPD]**
Have you ever had COPD, chronic bronchitis or emphysema?
INTERVIEWER: If asked, COPD stands for Chronic Obstructive Pulmonary Disease
1    Yes
2    No

**IF Everangi/CVD2 = Yes THEN**
   **[DocAngi] DocTold2**
   You said that you had angina. Were you told by a doctor that you had angina?
1    Yes
2    No

**IF DocAngi = Yes THEN**
   **[RecAngi] PastYr2**
   Have you had angina during the past 12 months?
1    Yes
2    No

**IF Everhart/CVD3= Yes THEN**
   **[Docheart] DocTold3**
   Were you told by a doctor that you had a heart attack (including myocardial infarction or coronary thrombosis)?
1    Yes
2    No

**IF Docheart = Yes THEN**
   **[RecHeart] PastYr3**
   Have you had a heart attack (including myocardial infarction and coronary thrombosis) during the past 12 months?
1    Yes
2    No

**IF Everireg/CVD5 = Yes THEN**
   **[DocIreg] DocTold5**
   Were you told by a doctor that you had abnormal heart rhythm?
1    Yes
2    No

**IF DocIreg = Yes THEN**
   **[RecIreg] PastYr5**
   Have you had abnormal heart rhythm during the past 12 months?
1    Yes
2    No

**IF EverOht= Yes THEN**
    **[DocOht] DocTold6**
    Were you told by a doctor that you had *(name of 'other heart condition')*?
1    Yes
2    No

**IF DocOht = Yes THEN**
    **[RecOht] PastYr6**
    Have you had *(name of 'other heart condition')* during the past 12 months?
1    Yes
2    No

**IF Everstro = Yes THEN**
    **[Docstro] DocTold7**
    Were you told by a doctor that you had a stroke?
1    Yes
2    No

**IF DocStro = Yes THEN**
    **[RecStro] PastYr7**
    Have you had a stroke during the past 12 months?
1    Yes
2    No

**ASK ALL 16+ WITH A HEART CONDITION OR WHO HAS HAD A STROKE  (IF Everangi / Everhart / EverIreg/ Everoht / EverStro= Yes) THEN**
    **[MedHeart] Medicin**
    Are you currently taking any medicines, tablets or pills because of your *(heart condition or stroke)*?
1    Yes
2    No

**IF Everbp = Yes THEN**
    **[DocNurBp] DocBP**
    You mentioned that you have had high blood pressure. Were you told **by a doctor or nurse** that you had high blood pressure?
1    Yes
2    No

**IF (DocNurBp= Yes) AND (Sex22= Female) THEN**
    **[PregBP]**
    Can I just check, were you pregnant when you were told that you had high blood pressure?
1    Yes
2    No

**IF PregBP  = Yes THEN**
    **[NoPregBp] OthBP**
    Have you ever had high blood pressure apart from when you were pregnant?
1    Yes
2    No

**ASK ALL 16+ WITH DOCTOR-DIAGNOSED HIGH BLOOD PRESSURE [EXCEPT WHEN PREGNANT] (IF docnurbp = Yes AND nopregbb <> No)**
    **[medcinbp] MedBP**
    Are you currently taking any medicines, tablets or pills for high blood pressure?
1    Yes
2    No

**IF medcinbp = No, Don't know or refused THEN**
    **[stillbp] BPStill**
    ASK OR RECORD: Do you still have high blood pressure?
1    Yes
2    No

    **[pastabbp] EverMed**
    Have you **ever** taken medicines, tablets, or pills for high blood pressure in the past?
1    Yes
2    No

**IF pastabbp = Yes THEN**
    **[fintabc]* StopMed**
    Why did you stop taking (medicines/tablets/pills) for high blood pressure? PROBE: What other reason? TAKE LAST OCCASION. CODE ALL THAT APPLY

| | | |
|---|---|---|
| 1 | **Doctor advised me to stop due to:** improvement | [fintabc1] |
| 2 | lack of improvement | [fintabc2] |
| 3 | other problem | [fintabc3] |
| 4 | **Respondent decided to stop:** because felt better | [fintabc4] |
| 5 | ... for other reason | [fintabc5] |
| 6 | **Other reason** | [fintabc6] |

**ASK ALL 16+ WITH DIABETES (IF Everdi = Yes THEN)**
    **[DocInfo1] Diabetes**
    Were you told by a doctor that you had diabetes?
1    Yes
2    No

**ASK ALL 16+ WITH DIABETES (IF Everdi = Yes AND DocInfo1=Yes THEN)**
    **[TypeD]**
    Have you been told whether you have Type 1 or Type 2 diabetes?
1    Yes, Type 1 diabetes
2    Yes, Type 2 diabetes
3    Not been told
4    Not sure which type

**IF (DocInfo1= Yes) AND (Sex22 = Female) THEN**
    **[PregDi] DiPreg**
    Can I just check, were you pregnant when you were told that you had diabetes?
1    Yes
2    No

**IF PregDi= Yes THEN**
**[NoPregDi] DiOth**
Have you ever had diabetes apart from when you were pregnant?
1    Yes
2    No

**ASK ALL 16+ WITH DOCTOR-DIAGNOSED DIABETES [EXCEPT WHEN PREGNANT]**
**(IF DocInfo1= Yes AND NoPregDi<> No)**
**[AgeInfo1] DiAge**
*(Apart from when you were pregnant, approximately/Approximately)* how old were you when you were first told by a doctor that you had diabetes? ENTER AGE IN YEARS
Range: 0..110

**[Insulin]**
Do you currently inject insulin for diabetes?
1    Yes
2    No

**[MedcinDi] DiMed**
Are you currently taking any medicines, tablets or pills *(other than insulin injections)* for diabetes?
1    Yes
2    No

**ASK ALL 16+ WITH A HEART MURMUR (IF Evermur = Yes)**
**[Murdoc] Murmur**
You mentioned that you have had a heart murmur. Were you told by a **doctor** that you had a heart murmur?
1    Yes
2    No

**IF (Murdoc = Yes) AND (Sex 22= Female) THEN**
**[PregMur]**
Can I just check, were you pregnant when you were told that you had a heart murmur?
1    Yes
2    No

**IF PregMur = Yes THEN**
**[PregMur1] NoPregM**
Have you ever had a heart murmur **apart** from when you were pregnant?
1    Yes
2    No

**ASK ALL 16+ WITH DOCTOR-DIAGNOSED HEART MURMUR [EXCEPT WHEN PREGNANT]**
**(IF MurDoc= Yes AND PregMur1 <> No)**
**[Murrec] MurYr**
Have you had a heart murmur during the past twelve months?
1    Yes
2    No

**[Murpill] MedMur**
Are you currently taking any medicines, tablets or pills because of your heart murmur?
1    Yes

2    No

**ASK ALL 16+ WITH COPD (IF COPD= Yes)**
    **[COPDDoct]**
    You mentioned that you had COPD, chronic bronchitis or emphysema. Did a doctor tell you that you had this?
    INTERVIEWER: If asked, COPD stands for Chronic Obstructive Pulmonary Disease.
1    Yes
2    No

**IF COPDDoct = Yes**
    **[COPDSpir]**
    Did your doctor do a spirometry test (a test measuring how much air you could blow into a machine)?
1    Yes
2    No

**IF COPDDoct=YES**
    **[COPDTrt]**
    Are you currently receiving any treatment or advice because of your COPD, chronic bronchitis or emphysema? Please include regular check-ups.
1    Yes
2    No

**IF COPDTrt = Yes**
    **[COPDOth]**
    SHOW CARD B2
    What treatment or advice are you currently receiving because of your COPD, chronic bronchitis or emphysema?
    CODE ALL THAT APPLY.

| | | |
|---|---|---|
| 1 | Regular check-up with GP / hospital / clinic | [COPDOth1] |
| 2 | Taking medication (tablets / inhalers) | [COPDOth2] |
| 3 | Advice or treatment to stop smoking | [COPDOth3] |
| 4 | Using oxygen | [COPDOth4] |
| 5 | Immunisations against flu / pneumococcus | [COPDOth5] |
| 6 | Exercise or physical activity | [COPDOth6] |
| 7 | Advice or treatment to lose weight | [COPDOth7] |
| 8 | Other | [COPDOth8] |

**IF COPDOth = Other (COPDOth8)**
    **[COPDOthO]** *
    INTERVIEWER: Please enter other treatment or advice.

**ASK ALL 16+**
    **[HNotAsk]**
    Can I check, do you have any other health problems that I have not asked you about?
1    Yes
2    No

**IF HNotAsk=Yes THEN**
    **[HNoTWhat]** *
    What are these health problems?
    DO NOT PROBE

Text: 100 characters
# Asthma Module

**ASK ALL AGED 0+**
### [EverW]
I am now going to ask you some questions about your breathing.
Have you/[child's name] ever had wheezing or whistling in the chest at any time, either now or in the past?
1    Yes
2    No

**VERSION A ONLY 0+ WHO HAVE EVER WHEEZED (IF EverW = Yes)**
### [NoCol]
Have you ever had this wheezing or whistling when you did not have a cold?
1    Yes
2    No

**ALL 0+ WHO HAVE EVER WHEEZED (IF EverW = Yes)**
### [TweWz]
Have you had wheezing or whistling in the chest in the last 12 months?
1    Yes
2    No

**VERSION A ONLY AGED 0+ WHO'VE WHEEZED IN THE LAST 12 MONTHS (IF TweWz=Yes)**
### [Attak]
How many attacks of wheezing/whistling have you had **in the last 12 months?**
IF DON'T KNOW, OBTAIN ESTIMATE.
PROMPT IF REQUIRED:
1    1 to 3
2    4 to 12
3    More than 12 attacks

**VERSION A ONLY (0+)**
### [SleTw]
In the last 12 months, how often on average has your
sleep been disturbed due to wheezing/whistling?
READ OUT...
1    Never woken with wheezing,
2    Woken less than 1 night per week,
3    Woken one or more nights per week,

**INTERVIEWER: If Don't know, obtain estimate.**

**VERSION A ONLY (0+)**
### [NaDLi]
In the last 12 months, how much did wheezing/whistling interfere
with your normal daily activities...
READ OUT…
1    Not at all,
2    A little,
3    Quite a bit,
4    or a lot?

**VERSION A ONLY 0+ WHO HAVE EVER WHEEZED (IF EverW = Yes)**
 **[RecAtW]**
 When was your most recent attack of wheezing/whistling?
 PROMPT IF NECESSARY.
1 Less than 4 weeks ago
2 More than 4 weeks but within the last 12 months
3 One to five years ago
4 More than 5 years ago

**ASK ALL 0+**
 **[ConDr]**
 Did a doctor ever tell you that you had asthma?
 PLEASE EXCLUDE ADVICE FROM HOMEOPATHS, ETC.
1 Yes
2 No

 **IF (EverW = Yes or ConDR = Yes)**
 **[TrtWze]**
 **SHOW CARD C1**
 Have you received any treatment or advice for asthma/wheezing from any of the people on
 this card in the last 12 months?
1 Yes
2 No

**IF TrtWze=Yes THEN**
 **[TrtWh]**
 **Which ones? PROBE: Any others?**
1 A general practitioner (GP)
2 Nurse at GP surgery/Health centre
3 Community, School or District Nurse
4 Hospital casualty/Accident and Emergency department
5 Consultant/Specialist or other doctor at hospital outpatients
6 Consultant/Specialist or other doctor elsewhere
7 Homeopath
8 Acupuncturist
9 Other alternative medicine professional

**[Temporary Question]**
**IF Age=4 or Age =5 THEN ASK**
**[StartSch]**
Can I check, has (*name of child*) started school?
1 Yes
2 No

**IF StartSch = Yes AND (TweWz = Yes OR ConDR = Yes). OR IF Age IN [6-16] (TweWz = Yes**
 **OR ConDR = Yes) THEN**
 **[SchAb]**
 Over the last 12 months, how many days has (asthma/wheezing/whistling in their chest)
 caused [child's name] to be absent from school?

  1 None
  2 Less than 5

| | |
|---|---|
| 3 | 5-9 |
| 4 | 10-14 |
| 5 | 15-19 |
| 6 | 20-29 |
| 7 | 30 or more |
| 8 | Don't know / can't remember this |

# Chronic Pain

**ASK ALL (0+)**
    **[AnyPain]**
Are you currently troubled by pain or discomfort, either all the time or on and off?
    1   Yes
    2   No

**IF AnyPain=YES**
    **[More3m]**
Have you had this pain or discomfort for more than 3 months?
    1   Yes
    2   No

**IFMore3m=YES**
**[SitePain] SiteP**
Where is this pain or discomfort?
CODE ALL THAT APPLY
PROBE: Where else?

    1       Back pain
    2       Neck or shoulder pain
    3       Headache, facial or dental pain
    4       Stomach ache or abdominal pain
    5       Pain in your arms, hands, hips, legs or feet
    6        Chest pain
    7       Other pain

**IF More3m=YES**
**[ImPain]**
Over the past 3 months, how often did your pain limit your life or work activities?
INTERVIEWER READ OUT
1       A lot
3       A little
2       Not at all

**IF More3m=YES**
**[SeenP]**
Have you used any of the support or people on this card to get help or advice to manage your pain?
SHOW CARD C2
CODE ALL THAT APPLY
1 NHS or charity information about managing pain including online resources
2 Your GP
3 Nurse or other health worker at GP surgery/Health centre
4 Physiotherapist
5 Chemist or pharmacist
6 Specialist pain services at a hospital such as a doctor, nurse or physiotherapist
7 Residential pain service where you have stayed away from home
8 Psychologist
9 Osteopath, chiropractor or acupuncturist
10 Homeopath or other alternative medicine professional
11 Other – please specify- GO TO OPEN RESPONSE
             13    None of these


**IF SeenP=Other**
**[SeenPx]**
OPEN RESPONSE: Can you please describe who or what type of support you used?_____

# COVID-19 Module

**{ASK ALL 0+}**
**[HdCv19]**
**<Have you/has[name]> had, or do you think <you/[name]> <have/has> had COVID-19?**

1   I have/they had COVID-19 and it was confirmed by a test
2   I think I/they have had COVID-19, but it was not confirmed by a test
3   I don't think I/they have had COVID-19
4   Don't know/can't recall
5   Refuse


**IF HADCOVID19 = YES 1 OR 2**
**[Recv1]**
**Have/has <you/has[name]> fully recovered from COVID-19 and returned to <your/their> previous level of health?**

1   Yes
2   No


**IF Recovered1= 1 or 2**

**[Recv2]**

**For how long since your initial infection have/did you experienced/experience any COVID-19 symptoms that have not been explained by something else?**

1   Up to 4 weeks
2   4 – 12 weeks
3   12 weeks or longer


**IF Recovered2 = 2 or 3**
**[LCSymB]**
**Do/does/did <you[name]> have any of the following symptoms which are/were not explained by something else? Please include any pre-existing symptoms which COVID has made worse.**

INTERVIEWER: IF YES, WHICH SYMPTOMS FROM THE SHOWCARD

SHOWCARD C3

CODE ALL THAT APPLY

1   Fever
2   Weakness/tiredness
3   Diarrhoea
4   Loss of smell
5   Shortness of breath
6   Vertigo/dizziness
7   Trouble sleeping

8    Headache
9    Nausea/vomiting
10   Loss of appetite
11   Sore throat
12   Chest pain
13   Worry/anxiety
14   Memory loss or confusion
15   Muscle ache
16   Abdominal pain
17   Loss of taste
18   Cough
19   Palpitations
20   Low mood/not enjoying anything
21   Difficulty concentrating
22   Other

**IF Recovered2 = 2 or 3**
**[LCAct]**
**Do/did &lt;your/[name's]&gt; symptoms  limit &lt;your/[name's]&gt; ability to carry-out day-to-day activities compared with the time before &lt;you/[name]&gt; had COVID-19?**

INTERVIEWER: IF YES, PROBE: Is that a little or a lot?

1    Yes, a lot
2    Yes, a little
3    Not at all

**{ASK ALL}**
**[CvShld]**
**Have/has you/your child received a letter from Scotland's Chief Medical Officer advising you/them that you/they are in the highest risk group (previously known as the shielding group)?**

1    Yes
2    No

**{ASK ALL 13+}**
**[RecVaccB]**
**Have you ever been vaccinated against COVID-19?**

1    Yes
2    No
3    Don't know (unprompted by interviewer)
4    Refuse (unprompted by interviewer)

Ask if **RecVaccB** = 2,

**[VcnRec]**

**Why have you not received a COVID-19 vaccine?**

SHOWCARD C4

1   I was advised by a clinician that I should not be vaccinated
2   I need more information about the safety of the vaccines
3   I have heard that some people don't feel well after being vaccinated
4   I don't think COVID-19 would be a serious illness for me
5   I don't think I'm at risk of catching COVID-19
6   I'm concerned about how quickly the vaccines have been developed
7   I'm concerned about how quickly the vaccines have been approved
8   I have a medical history of allergic reactions and am concerned about my reaction to being vaccinated
9   I am concerned about having an allergic reaction, even though I do not have a medical history of allergies
10  I would worry about the risk of catching COVID-19 at the place where the vaccines are given
11  I worry about how I will travel to the place where the vaccines are being given
12  I usually choose not to get any vaccines
13  I'm unlikely to have time to get vaccinated
14  I don't trust vaccines
15  Other (please specify)
16  Don't know (not on showcard)
17  Prefer not to say (not on showcard)

# Adult physical activity module (16+)

**ASK ALL AGED 16+**

**[Work]**

I'd like to ask you about some of the things you have done in the past **four** weeks that involve physical activity, this could be at work *(school)* college or in your free time. (Can I just check) were you in paid employment or self-employed in the past **four** weeks?

1    Yes
2    No

**IF Work = Yes THEN**

**[Active]**

Thinking about your job in general would you say that you are ...READ OUT..

1    ...very physically active,
2    ...fairly physically active,
3    ...not very physically active,
4    ...or, not at all physically active in your job?

**[MainSit]**

When you are at work are you mainly sitting down, standing up or walking about?

1    Sitting down
2    Standing up,
3    Walking about,
4    Equal time spent doing 2 or more of these

On an average work day in the last **four** weeks, how much time did you usually spend sitting down?

INTERVIEWER: IF RESPONDENT WAS ON HOLIDAY OR UNABLE TO WORK ON ANY DAYS IN THE LAST FOUR WEEKS, ASK THEM TO REPORT THE AVERAGE NUMBER OF HOURS ON THOSE DAYS THEY WORKED.

**[WrkAct3H]**

RECORD HOURS SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR. RECORD MINUTES AT NEXT QUESTION

**[WrkAct3M]**

ENTER NUMBER OF MINUTES. IF AN EXACT HOUR, ENTER 0 FOR MINUTES (0..59)

**ASK ALL AGED 16+**

**[Housewrk]**

I'd like you to think about the physical activities you have done in the last few weeks *(when you were **not** doing your paid job.)* Have you done any housework in the past **four** weeks, that is from *(date four weeks ago)* up to yesterday?

1    Yes
2    No

**IF Housewrk = Yes THEN**

**[HWrkList]**
SHOW CARD E1
Have you done any housework listed on this card?
1    Yes
2    No

**[HevyHWrk]**
SHOW CARD E2
Some kinds of housework are heavier than others. This card gives some examples of heavy housework. It does not include everything, these are just examples. Was any of the housework you did in the last **four** weeks this kind of heavy housework?
1    Yes
2    No

**IF HevyHWrk = Yes THEN**

**[HeavyDay]**
During the past **four** weeks on how many **days** have you done this kind of **heavy** housework?
Range: 1..28

**[HrsHHW]**
On the days you did heavy housework, how long did you usually spend?
RECORD HOURS SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR. RECORD MINUTES AT NEXT QUESTION; Range: 0..12

**[MinHHW]**
RECORD MINUTES SPENT ON HEAVY HOUSEWORK.
Range: 0..59

**ASK ALL AGED 16+**

**[Garden]**
Have you done any gardening, DIY or building work in the past **four** weeks, that is since
*(date four weeks ago)*?
1    Yes
2    No

**IF Garden = Yes THEN**

**[GardList]**
SHOW CARD E3
Have you done any gardening, DIY or building work listed on this card?
1    Yes
2    No

**[ManWork]**
SHOW CARD E4
Have you done any gardening, DIY or building work from this other card, or any similar heavy manual work?
1    Yes
2    No

**IF ManWork = Yes THEN**

**[ManDays]**

During the past **four** weeks on how many **days** have you done this kind of **heavy** manual gardening or DIY?

Range: 1..28

**[HrsDIY]**

On the days you did heavy manual gardening or DIY, how long did you usually spend?

RECORD HOURS SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR. RECORD MINUTES AT NEXT QUESTION.

Range: 0..12

**[MinDIY]**

RECORD MINUTES SPENT ON GARDENING OR DIY.

Range: 0..59

**ASK ALL AGED 16+**

**[Wlk5Int]**

I'd like you to think about **all** the **walking** you have done in the past **four** weeks either locally or away from here. Please include any country walks, walking to and from work and any other walks that you have done. In the past **four** weeks, that is since *(date four weeks ago)*, have you done a **continuous** walk that lasted **at least** 5 minutes?

1    Yes
2    No
3    Can't walk at all

**IF Wlk5Int = Yes THEN**

**[Wlk10M] Wlk15M**

In the past **four** weeks, have you done a **continuous** walk that lasted **at least** 10 minutes? (That is since *(date four weeks ago))*

1    Yes
2    No

**IF Wlk10M = Yes THEN**

**[DayWlk10] DayWlk**

During the past **four** weeks, on how **many days** did you do a **continuous** walk of at least 10 minutes? (That is since *(date four weeks ago))*

*IF THEY WALKED EVERYDAY ENTER 28*

Range:   1..28

**[Day1Wk10] Day1Wlk**

On that day (any of those days) did you do **more than one continuous** walk lasting at least 10 minutes?

1    Yes, more than one walk of 10+ mins (on at least one day)
2    No, only one walk of 10+ mins a day

**IF (DayWlk10 in 2..28) AND (Day1Wk10 = Yes) THEN**
    **[Day2Wk10] Day2Wlk**
On how many days in the last **four** weeks did you do **more than one** walk that lasted at least 10 minutes?
Range: 1..28

**IF Wlk10M = Yes THEN**
    **[HrsWlk10] HrsWlk**
How long did you usually spend walking each time you did a **continuous** walk for 10 minutes or more?
INTERVIEWER: IF VERY DIFFERENT LENGTHS, PROBE FOR MOST REGULAR.
RECORD HOURS SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR.
RECORD MINUTES AT NEXT QUESTION.
Range: 0..12

    **[MinWlk10] MinWlk**
INTERVIEWER: RECORD HERE MINUTES SPENT WALKING.
Range: 0..59

**IF Wlk5Int = Yes THEN**
    **[WalkPace]**
Which of the following best describes your **usual** walking pace ...READ OUT...
1 ...a slow pace,
2 ...a steady average pace,
3 ...a fairly brisk pace,
4 ...or, a fast pace - at least 4 mph?
5 (none of these)

**IF (Wlk15M = Yes) AND (Age>= 65) THEN**
    **[WalkEff]**
During the past four weeks, was the effort of walking for 10 minutes or more usually enough to make you breathe faster, feel warmer, or sweat?
1 Yes
2 No

**ASK ALL AGED 16+**
    **[ActPhy]**
SHOW CARD E5
Can you tell me if you have done any activities on this card during the last **four** weeks, that is since (date four weeks ago)? Include teaching, coaching, training and practice sessions, but exclude any activities done as part of your main job.
1 Yes
2 No

**IF ActPhy = Yes THEN**

    **[WhtAct]**

    Which have you done in the last **four** weeks? PROBE: Any others?

    CODE ALL THAT APPLY.

| | | |
|---|---|---|
| 1 | Swimming | [WhtAct01] |
| 2 | Cycling | [WhtAct02] |
| 3 | Workout at a gym/Exercise bike/ Weight training | [WhtAct03] |
| 4 | Aerobics/Keep fit/Gymnastics/ Dance for fitness | [WhtAct04] |
| 5 | Any other type of dancing | [WhtAct05] |
| 6 | Running/ Jogging | [WhtAct06] |
| 7 | Football/ Rugby | [WhtAct07] |
| 8 | Badminton/ Tennis | [WhtAct08] |
| 9 | Squash | [WhtAct09] |
| 10 | Exercises (e.g. press-ups, sit ups) | [WhtAct10] |

**[WhtAcB]**

SHOW CARD E6

And have you done any of the activities on this card in the last **four** weeks? Please just tell me the numbers.

PROBE: ANY OTHERS?

| | | |
|---|---|---|
| 0 | No - none of these | [WhtAcB0] |
| 1 | Bowls | [WhtAcB01] |
| 2 | Fishing/angling | [WhtAcB02] |
| 3 | Golf | [WhtAcB03] |
| 4 | Hillwalking/rambling | [WhtAcB04] |
| 5 | Snooker/billiards/pool | [WhtAcB05] |
| 6 | Aqua-robics/aquafit/exercise class in water | [WhtAcB06] |
| 7 | Yoga/pilates | [WhtAcB07] |
| 8 | Athletics | [WhtAcB08] |
| 9 | Basketball | [WhtAcB09] |
| 10 | Canoeing/Kayaking | [WhtAcB10] |
| 11 | Climbing | [WhtAcB11] |
| 12 | Cricket | [WhtAcB12] |
| 13 | Curling | [WhtAcB13] |
| 14 | Hockey | [WhtAcB14] |
| 15 | Horse riding | [WhtAcB15] |
| 16 | Ice skating | [WhtAcB16] |
| 17 | Martial arts including Tai Chi | [WhtAcB17] |
| 18 | Netball | [WhtAcB18] |
| 19 | Powerboating/jet skiing | [WhtAcB19] |
| 20 | Rowing | [WhtAcB20] |
| 21 | Sailing/windsurfing | [WhtAcB21] |
| 22 | Shinty | [WhtAcB22] |
| 23 | Skateboarding/inline skating | [WhtAcB23] |
| 24 | Skiing/snowboarding | [WhtAcB24] |
| 25 | Subaqua | [WhtAcB25] |
| 26 | Surfing/body boarding | [WhtAcB26] |
| 27 | Table tennis | [WhtAcB27] |
| 28 | Tenpin bowling | [WhtAcB28] |
| 29 | Volleyball | [WhtAcB29] |
| 30 | Waterskiing | [WhtAcB30] |

**ASK ALL AGED 16+**
**REPEAT FOR UP TO 6 ADDITIONAL SPORTS, WHEN ANSWER YES AT EACH SUCCESSIVE 'OTHER ACTIVITY' VARIABLE OActQ11 to OActQ16**
**[OactQ]*** *(Variable names: OActQ11-OActQ16)*
Have you done any other sport or exercise not listed on the cards?
INTERVIEWER: PROBE FOR NAME OF SPORT OR EXERCISE AND WRITE IN.
1 Yes
2 No

**IF OActQ = Yes THEN**
**[WHTACT11 – WHT16[1]]**
*For each activity, a set of questions about number of days/hours/minute and effort was asked:*
**[swimocc to wskiocc] DayExc**
Can you tell me on how many separate days did you do *(name of activity)* for at least 10 minutes at a time during the past **four** weeks, that is since *(date four weeks ago)?*
IF ONLY DONE FOR LESS THAN 10 MINUTES ENTER 0.
Range: 0..28

**[swimhrs to wskihrs] ExcHrs**
How much time did you usually spend doing *(name of activity)* on each day? (Only count times you did it for at least 10 minutes).
RECORD HOURS SPENT BELOW.
ENTER 0 IF LESS THAN 1 HOUR.
RECORD MINUTES AT NEXT QUESTION.
Range: 0..12

**[swimmin to wskimin] ExcMin**
INTERVIEWER: RECORD MINUTES HERE.
Range: 0..59

**[swimeff to wskieff] ExcSwt**
During the past **four** weeks, was the effort of (name of activity) usually enough to make you out of breath or sweaty?
1 Yes
2 No

**[ExcMus]**
*For certain activities an additional question was asked to identify whether the activity could be classed as muscle strengthening.*

**IF WhtAct, WhtAcB or OactQ = cycling, workout at a gym, aerobics, any other type of dancing, running/jogging, football/rugby, badminton/tennis, squash, exercises, ten pin bowling, yoga/pliates, aquarobics/aquafit, martial arts/Tai Chi, basketball, netball, lawn bowls, golf, hill walking/rambling, cricket, hockey, curling, ice skating, shinty, surf/body boarding, volleyball THEN**
**[cyclemus to Vollmus]**
During the past **four** weeks, was the effort of (name of activity) usually enough to make your muscles feel some tension, shake or feel warm?
1 Yes
2 No

---

[1] Up to 6 other activities can be recorded. These are then assigned a code in the office.

**IF WhtAct = Exercises (e.g. press-ups, sit-ups) AND (Age>=65) THEN**

    **[ExMov]**

    Did these exercises involve you standing up and moving about?

1    Yes

2    No

# VERSION A ONLY

    **[REASSPRT]**

    SHOW CARD E7

    I would like to ask you some more detail about the last time you did (activity/activities).

    What were your reasons for doing it/them?

    CODE ALL THAT APPLY

| | | |
|---|---|---|
| 1 | To keep fit (not just to lose weight) | [REASSPRT] |
| 2 | To lose weight | [REASSPR2] |
| 3 | To take children | [REASSPR3] |
| 4 | To socialise | [REASSPR4] |
| 5 | To train/take part in a competition | [REASSPR5] |
| 6 | To improve my performance | [REASSPR6] |
| 7 | Just enjoy it | [REASSPR7] |
| 8 | To help with my injury or disability | [REASSPR8] |
| 9 | Part of my voluntary work | [REASSPR9] |
| 10 | To walk the dog | [REASSP10] |
| 11 | For health reasons/to improve health | [REASSP11] |
| 12 | For peace and quiet | [REASSP12] |
| 13 | To de-stress, relax and unwind | [REASSP13] |
| 14 | To feel closer to nature | [REASSP14] |
| 15 | Other (RECORD AT NEXT QUESTION) | [REASSP15] |

    **[REASSPRTO]**

    INTERVIEWER: WRITE IN OTHER ANSWER GIVEN

    **[MREASSPRT]** SHOW CARD E7

    And which of these was your main reason?

1    To keep fit (not just to lose weight)

2    To lose weight

3    To take children

4    To socialise

5    To train/take part in a competition

6    To improve my performance

7    Just enjoy it

8    To help with my injury or disability

9    Part of my voluntary work

10    To walk the dog

11    For health reasons/to improve health

12    For peace and quiet

13    To de-stress, relax and unwind

14    To feel closer to nature

15    Other (RECORD AT NEXT QUESTION)

**[MREASSPRTO]**\*
INTERVIEWER: WRITE IN OTHER ANSWER GIVEN

# VERSION A ONLY

**[Barsprt]**
SHOW CARD E8
Looking at this card, are there any particular reasons why you haven't done any/more sport in the last 4 weeks?
CODE ALL THAT APPLY

| | | | |
|---|---|---|---|
| 1 | It costs too much | ` | [Barsprt1] |
| 2 | No one to do it with | | [Barsprt2] |
| 3 | Never occurred to me | | [Barsprt3] |
| 4 | Not really interested | | [Barsprt4] |
| 5 | Fear of injury/making current injury worse | | [Barsprt5] |
| 6 | I wouldn't enjoy it | | [Barsprt6] |
| 7 | Health isn't good enough | | [Barsprt7] |
| 8 | I might feel uncomfortable or out of place | | [Barsprt8] |
| 9 | Facilities are too far away | | [Barsprt9] |
| 10 | Not enough information on what is available | | [Barspr10] |
| 11 | It's difficult to find the time | | [Barspr11] |
| 12 | I already do enough | | [Barspr12] |
| 13 | Other (RECORD AT NEXT QUESTION) | | [Barspr13] |
| 14 | No reason | | [Barspr14] |

**[BarsprtO]**\*
INTERVIEWER: WRITE IN OTHER ANSWER GIVEN.

**[Barspmai]**
SHOW CARD E8
And which of these was your main reason?

1     It costs too much
2     No one to do it with
3     Never occurred to me
4     Not really interested
5     Fear of injury/making current injury worse
6     I wouldn't enjoy it
7     Health isn't good enough
8     I might feel uncomfortable or out of place
9     Facilities are too far away
10    Not enough information on what is available
11    It's difficult to find the time
12    I already do enough
13    Other

**[BarspmaO]**\*
INTERVIEWER: WRITE IN OTHER ANSWER GIVEN.

**ASK ALL AGE 16+ - ALL VERSIONS**

**[TVWeek]**

Thinking first of weekdays, that is Monday to Friday, how much time on **an average day** do you spend **sitting** watching TV or another type of screen such as a computer, tablet, phone, games console or handheld gaming device? Please do **not** include any time spent in front of a screen while at school, work or college.

INTERVIEWER: Reading a 'kindle' or reading on an iPad should not be included here.  If the main activity is reading then code under sitting doing other activity such as eating, reading etc.
RECORD **HOURS** SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR OR NEVER WATCHES SCREEN. RECORD MINUTES AT NEXT QUESTION.
Range: 0..12

**[MinTVWk]**
RECORD MINUTES HERE.
Range: 0..59

**[WkSit2H]**
And how much time on an average **weekday** do you spend sitting down doing any other activity, such as eating a meal, reading, or listening to music or napping in a chair
Please do not include time spent doing these activities while at work**.**
INTERVIEWER: OTHER EXAMPLES OF THESE ACTIVITIES INCLUDE SNACKING, STUDYING, DRAWING, DOING PUZZLES/CROSSWORDS ETC. DO NOT COUNT TIME TWICE E.G. IF THEY WATCH TV AND EAT, INCLUDE THAT HERE OR AT PREVIOUS QUESTION - NOT BOTH.
INTERVIEWER:  Time spent reading using a screen (e.g. a kindle or iPad) can be included here is the respondent says reading is the main activity
RECORD HOURS SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR OR NEVER. RECORD MINUTES AT NEXT QUESTION.
Range: 0..12

**[WkSit2M]**
RECORD MINUTES HERE: Range: 0..59

**[TVWkEnd]**
Now thinking of the **weekend**, that is Saturday and Sunday, how much time on **an average day** do you spend **sitting** watching TV or another type of screen (such as a computer, tablet, phone, games console or handheld gaming device)? Again, please do **not** include any time spent in front of a screen while at school, college or work.
INTERVIEWER: Reading a 'kindle' or reading on an iPad should not be included here.  If the main activity is reading then code under sitting doing other activity such as eating, reading etc.
RECORD **HOURS** SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR OR NEVER WATCHES SCREEN. RECORD MINUTES AT NEXT QUESTION.
Range: 0..12

**[MinTvWe]**
RECORD MINUTES HERE.
Range:  :0..59

**[WESit2H]**
And how much time on an average **weekend** day (that is Saturday and Sunday) do you spend sitting down doing any other activity, such as eating a meal, reading, or listening to music or [napping in a chair. Please do not include time spent doing these activities while at work.
INTERVIEWER: OTHER EXAMPLES OF THESE ACTIVITIES INCLUDE SNACKING, STUDYING, DRAWING, DOING PUZZLES/CROSSWORDS ETC. DO NOT COUNT TIME TWICE E.G. IF THEY WATCH TV AND EAT, INCLUDE THAT HERE OR AT PREVIOUS QUESTION - NOT BOTH.
INTERVIEWER:  Time spent reading using a screen (e.g. a kindle or iPad) can be included here is the respondent says reading is the main activity
RECORD HOURS SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR. RECORD MINUTES AT NEXT QUESTION.: 0..24

**[WESit2M]**
RECORD MINUTES HERE. 0..59

# Child physical activity module (2-15)

**ASK IF RESPONDENT IS 4 or 5 YEARS OLD**

**[ChSch]**

Can I just check, is *(name of child)* at school in Primary 1 yet?
1    Yes
2    No

**ASK ALL AGED 2-15**

**[Wlk5Ch]**

Now I'd like to ask you about some of the things *(you/name of child) (have/has)* done **in the last week**. By last week I mean last *(day seven days ago)* up to yesterday. In the last week, *(have you/*has [child's name]*)* done a **continuous** walk that lasted **at least** 5 minutes, not counting things done as part of school lessons?
1    Yes
2    No

**IF Wlk5Ch = Yes THEN**

**[DwlkChb] DaysWlk**

On how many **days** in the last week did *(you/name of child)* do a continuous walk that lasted at least 5 minutes *(not counting things done as part of school lessons)*?
1    One day
2    Two days
3    Three days
4    Four days
5    Five days
6    Six days
7    Every day

**[DayWlkT]**

SHOW CARD F1

On each day that *(you/name of child)* did a walk like this for at least 5 minutes, how long did (*you/they*) spend walking altogether? Please give an answer from this card
INTERVIEWER NOTE: COUNT TOTAL TIME SPENT WALKING. SO TWO WALKS OF 10 MINUTES EACH = 20 MINUTES WALKING
*(1    Less than five minutes)*
2    5 minutes, less than 15 minutes
3    15 minutes, less than 30 minutes
4    30 minutes, less than 1 hour
5    1 hour, less than 1½ hours
6    1½ hours, less than 2 hours
7    2 hours, less than 2½ hours
8    2½ hours, less than 3 hours
9    3 hours, less than 3½ hours
10    3½ hours, less than 4 hours
11    4 hours or more (please specify how long)

**IF DayWlkT = 4 hours or more THEN**
**[WlkHrs]**
How long did *(you/name of child)* spend walking on each day?
RECORD HOURS SPENT BELOW. RECORD MINUTES AT NEXT QUESTION
Range: 4..12

**[WlkMin]**
RECORD HERE MINUTES SPENT WALKING.
Range: 0..59

**ASK ALL AGED 5-15**
**[ChPace]**
Which of the following describes your/[child's name]'s **usual** walking pace ... READ OUT ...
1 ... a slow pace,
2 ... a steady average pace,
3 ... a fairly brisk pace,
4 ... or, a fast pace – at least 4 mph?
5 (None of these)

**ASK ALL AGED 8-15**
**[HWkCh]**
In the last week *(have you/has name of child)* done any housework or gardening which involved pulling or pushing, like hoovering, cleaning a car, mowing grass or sweeping up leaves for at least 15 minutes a time?
1 Yes
2 No

**IF HWkCh = Yes THEN**
**[DHWkCh]**
On how many days in the last week *(have you/has name of child)* done any housework or gardening of this type for at least 15 minutes a time?
1 One day
2 Two days
3 Three days
4 Four days
5 Five days
6 Six days
7 Every day

**[THWk]** *(See question [DayWlkT] for full listing of answer options on card F1)*
SHOW CARD F1 AGAIN
On each day that *(you/name of child)* did any housework or gardening of this type for at least 15 minutes a time, how long did *(you/they)* spend?
Please give an answer from this card.

**IF THWk = 4 hours or more THEN**
**[HWkHrs]**
How long did *(you/name of child)* spend doing housework or gardening on each day?
RECORD HOURS SPEND BELOW. RECORD MINUTES AT NEXT QUESTION. Range: 4..12

**[HwkMin]**
RECORD HERE MINUTES SPENT DOING HOUSEWORK/GARDENING.
Range: 0..59

**ASK ALL AGED 2-15**
**[Sport]\***
I would now like to ask *you* about any sports or exercise activities that (*you/child's name*) have/has done. I will then go on to ask about other active things (*you/they*) may have done. Showcard F2 shows what we would like you to include for sports and exercises, and Showcard F3 shows what we would like you to include for other active things.
INTERVIEWER: Please ask respondent to look at Showcards F2 and F3.
For the following questions please include any activities done at a nursery or playgroup, but don't count any activities done as part of school lessons. Activities associated with their school should be counted here as long as they are not part of a mandatory lesson (e.g. football practice on a Saturday for the school team).
1      Continue

**[Spt1ch] SportDo**
SHOW CARD F2
In the last week, that is last *(day 7 days ago)* up to yesterday, have/has *(you/name of child)* done any sports or exercise activities *(not counting things done as part of school lessons)*? This card shows some of the things *(you/they)* might have done; please also include any other sports or exercise activities like these.
INTERVIEWER: DO NOT COUNT ANYTHING DONE TODAY.
1      Yes
2      No

**ASK ALL AGED 2-15 WHO DID SOME SPORT IN THE PAST 7 DAYS (IF Spt1ch = Yes)**
**[WESpDo]**
Did *(you/[child's name])* do any of these sports or exercise activities at the weekend, that is last Saturday and Sunday *(yesterday and last Sunday)*?
1      Yes
2      No

**IF WEspDo = Yes THEN**
**[DWeSpCh] DWeSp**
Was that on Saturday or Sunday or on both days?
1      Saturday only
2      Sunday only
3      Both Saturday and Sunday

**[LweSp] WeSpor**
*(See question [DayWlkT] for full listing of answer options on card F1)*
SHOW CARD F1
On *(Saturday/Sunday/Saturday and Sunday)* when *(you/name of child)* did these sports or exercise activities, how long did *(you/they)* spend *(on each day)*? Please give an answer from this card.
INTERVIEWER: IF IT VARIED, TAKE AVERAGE

**IF WeSpor = 4 hours or more THEN**

**[WeSpH]**

How long did *(you/name of child)* spend doing these sports or exercise activities?
RECORD HOURS SPENT BELOW. RECORD MINUTES AT NEXT QUESTION.
Range: 4..12

**[WeSpM]**

RECORD HERE MINUTES SPEND DOING SPORTS OR EXERCISE ACTIVITIES.
Range: 0..59

**ASK ALL AGED 2-15 WHO DID SOME SPORT IN THE PAST 7 DAYS (IF SportDo = Yes)**

**[DaySpCh] DaySp**

Still thinking about last week. On how many of the **weekdays** did *(you/name of child)* do any of these sports or exercise activities? Please remember not to count things done as part of school lessons

0    None in last week
1    1 day
2    2 days
3    3 days
4    4 days
5    5 days

**IF DaySpCh = 1 day to 5 days THEN**

**[LWkSp] WkSpor**

*(See question [DayWlkT] for full listing of answer options on card F1)*
SHOW CARD F1 AGAIN
On each weekday that *(you/[child's name])* did these sports or exercise activities, how long did *(you/they)* spend? Please give an answer from this card.

**IF LWkSp = 4 hours or more THEN**

**[WkSpH]**

How long did you/[child's name] spend doing these sports or exercise activities on each weekday?
RECORD HOURS SPENT BELOW. RECORD MINUTES AT NEXT QUESTION
Range: 4..12

**[WkSpM]**

RECORD HERE MINUTES SPENT DOING SPORTS OR EXERCISE ACTIVITIES
Range: 0..59

**ASK ALL AGE 2-15**

**[WeActCh] WeActDo**

SHOW CARD F3
Now I would like to know about when *(you/name of child)* do/does active things, like the things on this card or other activities like these. Did *(you/they)* do any active things like these at the weekend, that is last Saturday and Sunday *(yesterday and last Sunday)*?
INTERVIEWER NOTE: DO NOT INCLUDE ANY ACTIVITIES ALREADY COVERED UNDER SPORTS AND EXERCISE ACTIVITIES

1    Yes
2    No

**IF WeActCh = Yes THEN**
    **[DWEAct]**
    Was that on Saturday or Sunday or on both days?
1    Saturday only
2    Sunday only
3    Both Saturday and Sunday

    **[LWeAct] WeAct**
    *(See question [DayWlkT] for full listing of answer options on card F1)*
    SHOW CARD F1 AGAIN
    On *(Saturday/Sunday/Saturday and Sunday)* when *(you/name of child)* did active things like these, how long did *(you/they)* spend *(on each day)*?  Please give an answer from this card.
    INTERVIEWER: IF IT VARIED, TAKE AVERAGE

**IF LWeAct = 4 hours or more THEN**
    **[WeActH]**
    How long did *(you/name of child)* spend doing active things like these?
    RECORD HOURS SPENT BELOW. RECORD MINUTES AT NEXT QUESTION.
    Range: 4..12

    **[WeActM]**
    RECORD HERE MINUTES SPENT DOING ACTIVE THINGS LIKE THESE
    Range: 0..59

**ASK ALL AGE 2-15**
    **[WkActCh] WkActDo**
    SHOW CARD F3 AGAIN
    Still thinking about last week. On how many of the **weekdays** did *(you/name of child)* do active things, like the things on this card or other activities like these *(not counting things done as part of school lessons)*?
    INTERVIEWER NOTE: DO NOT INCLUDE ANY ACTIVITIES ALREADY COVERED UNDER SPORTS AND EXERCISE ACTIVITIES
0    None in last week
1    1 day
2    2 days
3    3 days
4    4 days
5    5 days

**IF WkActCh = 1 day to 5 days THEN**
    **[LWkAct] WkAct**
    *(See question [DayWlkT] for full listing of answer options on card F1)*
    SHOW CARD F1AGAIN
    On each **weekday** that *(you/name of child)* did active things like these, how long did *(you/they)* spend? Please give an answer from this card.

**IF LWkAct = 4 hours or more THEN**
    **[WkActH]**
    How long did *(you/name of child)* spend doing active things like these on each weekday?
    RECORD HOURS SPENT BELOW. RECORD MINUTES AT NEXT QUESTION
    Range: 4..12

**[WkActM]**
RECORD HERE MINUTES SPENT DOING ACTIVE THINGS LIKE THESE.
Range: 0..59

## ASK ALL AGE 2-15
**[DaysTot]**
Now thinking about all the activities during the past week you have just told me about including any walking, *(gardening, housework,)* sports or other active things. On how many **days** in the last week **in total** did *(you/name of child)* do any of these activities *(not counting things done as part of school lessons)*?
0 None
1 One day
2 Two days
3 Three days
4 Four days
5 Five days
6 Six days
7 Every day

## SCHOOL BASED PHYSICAL ACTIVITY

## ASK IF AGED 5-15 OR IF AGED 4 AND IS AT SCHOOL
**[SchAct]**
I would now like to ask about any activities such as walking, sports, exercise or other active things that *(you/child's name)* have/has done in the last week whilst in a lesson at school. Did *(you/child's name)* do any activities (walking, sports, exercise or other active things) in any lessons whilst at school last week?
1 Yes
2 No

## IF SchAct=Yes THEN

**[SchDays]**
On how many days in the last week did *(you/child's name)* do any activities (walking, sports, exercise or other active things) in lessons at school?
1 1 day
2 2 days
3 3 days
4 4 days
5 5 days
6 6 days
7 7 days

**[SchTime]**
SHOW CARD F1 AGAIN
On each day that *(you/child's name)* did something active (walking, sports, exercise or other active things) in lessons at school, how long did *(you/they)* spend doing it?
Please give an answer from this card.
1 Less than 5 minutes
2 5 minutes, less than 15 minutes
3 15 minutes, less than 30 minutes
4 30 minutes, less than 1 hour
5 1 hour, less than 1 ½ hours
6 1 ½ hours, less than 2 hours
7 2 hours, less than 2 ½ hours
8 2 ½ hours, less than 3 hours
9 3 hours, less than 3 ½ hours
10 3 ½ hours, less than 4 hours
11 4 hours or more (please say how long)

**IF SchTime = 4 hours or more THEN**
  **[SchTmH]**
  How long did *(you/child's name)* spend doing active things in lessons at school on each day?
  INTERVIEWER: RECORD HOURS SPENT BELOW
  RECORD MINUTES AT THE NEXT QUESTION
  Range: 4..12

  **[SchTmM]**
  INTERVIEWER: RECORD MINUTES SPENT DOING ACTIVE THINGS IN LESSONS AT SCHOOL
  Range: 0..59

**ASK ALL 2-15**
  **[Usual]**
  Were the activities *(you/child's name)* did last week different from what *(you/they)* would usually do for any reason?
  IF YES PROBE: Would *(you/child's name)* usually do **more** physical activity or **less**?
1 NO - same as usual
2 YES DIFFERENT - usually do MORE
3 YES DIFFERENT - usually do LESS

**ASK ALL AGED 2-15**
  **[TVWeek]**
  Thinking first of **weekdays**, that is Monday to Friday, how much time on **an average day** do/does *(you/child's name)* spend **sitting** watching TV or another type of screen such as a computer, tablet, phone, games console or handheld gaming device? Please do **not** include any time spent in front of a screen while at nursery or school.
  INTERVIEWER: Reading a 'kindle' or reading on an iPad should not be included here. If the main activity is reading then code under sitting doing other activity such as eating, reading etc.
  RECORD **HOURS** SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR OR NEVER WATCHES SCREEN. RECORD MINUTES AT NEXT QUESTION.
  Range: 0..12

**[MinTVWk]**
RECORD MINUTES HERE.
Range: 0..59

**[WkSit2H2][1]**
And how much time on an **average weekday** do/does *(you/your child)* spend sitting down doing any other activity, such as eating a meal, reading, or listening to music? Please do not include time spent doing these activities while at nursery or school.
INTERVIEWER: OTHER EXAMPLES OF THESE ACTIVITIES INCLUDE SNACKING, STUDYING, DRAWING, DOING PUZZLES/CROSSWORDS ETC.
DO NOT COUNT TIME TWICE E.G. IF THEY WATCH TV AND EAT, INCLUDE THAT HERE OR AT PREVIOUS QUESTION - NOT BOTH.
INTERVIEWER:  Time spent reading using a screen (e.g. a kindle or iPad) can be included here is the respondent says reading is the main activity
RECORD HOURS SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR. RECORD MINUTES AT NEXT QUESTION:0..24

**[WkSit2M2]**
RECORD MINUTES HERE
Range: 0..59

**[TVWkEnd]**
Now thinking of the **weekend**, that is Saturday and Sunday, how much time on **an average day** do/does *(you/child's name)* spend sitting watching TV or another type of screen (such as a computer, tablet, phone, game console or handheld gaming device)? Again, please do **not** include any time spent in front of a screen while at nursery or school.
INTERVIEWER: Reading a 'kindle' or reading on an iPad should not be included here.  If the main activity is reading then code under sitting doing other activity such as eating, reading etc.
RECORD **HOURS** SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR OR NEVER WATCHES SCREEN. RECORD MINUTES AT NEXT QUESTION.
Range: 0..12

**[MinTvWe2]**
RECORD MINUTES HERE.
Range::0..59

**[WESit2H2]**
And how much time on an average **weekend** day (that is Saturday and Sunday) do/does *(you/your child)* spend sitting down doing any other activity, such as eating a meal, reading, or listening to music? Please do not include time spent doing these activities while at nursery or school.
INTERVIEWER: OTHER EXAMPLES OF THESE ACTIVITIES INCLUDE SNACKING, STUDYING, DRAWING, DOING PUZZLES/CROSSWORDS ETC. DO NOT COUNT TIME TWICE E.G. IF THEY WATCH TV AND EAT, INCLUDE THAT HERE OR AT PREVIOUS QUESTION - NOT BOTH.
INTERVIEWER:  Time spent reading using a screen (e.g. a kindle or iPad) can be included here is the respondent says reading is the main activity
RECORD HOURS SPENT BELOW. ENTER 0 IF LESS THAN 1 HOUR. RECORD MINUTES AT NEXT QUESTION: Range 0..24

---

**[WESit2M2]**
RECORD MINUTES HERE.
Range:0..59

# Eating habits module (all age 2-15)

**Note that the eating habits module is now only being asked of adults through Intake24. It will be included in SHeS every four years (included in 2021 and 2025).**

**ASK ALL AGED 2-15**
 **[UsBread][1]**
 What kind of bread do you usually eat? Is it ... READ OUT…
 CODE ONE ONLY
 INTERVIEWER: Soda Bread, Chollah = CODE 1;
 Wheatgerm, Wheatmeal, Granary, Rye, German, Highbran = CODE 2
1 white
2 brown, granary, wheatmeal,
3 wholemeal
4 SPONTANEOUS: (Wholemeal/white mixture e.g. 'Best of Both')
5 SPONTANEOUS: (Does not have usual type)
6 (Does not eat any type of bread)
7 (Other type of bread that does not fit above codes)

**If UsBred08 =Other type of bread**
 **[BreadOth]***
 INTERVIEWER: PLEASE SPECIFY…
 Text: Maximum [90] characters

**ASK ALL WHO EAT BREAD (AT UsBread08)**
 **[BrSlice]**
 SHOW CARD G1
 Now looking at this card, how many **slices of bread**, or how many **rolls**, do you usually eat on any **one day**?
 INTERVIEWER: If varies, ask for an average
1 6 a day or more
2 4-5 a day
3 2-3 a day
4 One a day
5 Less than one per day

**ASK ALL AGED 2-15**
 **[Milk08][1] Milk**
 What kind of milk do you usually use for drinks, in tea or coffee and on cereals?
 Is it ... READ OUT…
 CODE ONE ONLY
1 whole milk,
2 semi-skimmed,
3 skimmed,
4 or, some other kind of milk? (TRY TO USE CODES BELOW)
5 (Soya/Rice/Oat-based milk)
6 (Goat's milk)
7 (Infant formula milk)

---

[1] The question wording and answer categories changed in 2008.

8       (Does not have usual type)
9       (Does not drink milk)

**[Cereal08][1] Cereal**
Which type of breakfast cereal, including porridge, do you normally eat?
CODE ONE ONLY FROM CODING LIST 1
1       High fibre & high sugar
2       High fibre & low or no sugar
3       Low fibre & high sugar
4       Low fibre & low or no sugar
5       Other cereal **not** on coding list
6       SPONTANEOUS: (Does not have usual type)
7       (Does not eat breakfast cereal)

**IF Cereal08 = Other THEN**
       **[CerOth]**\*
       PLEASE SPECIFY

**IF Cereal08=1 to 6 OR DON'T KNOW**
       **[Cereals]**
       SHOW CARD G2
       How often do you eat **breakfast cereals, including porridge**?
       DO NOT COUNT BREAKFAST CEREAL BARS
1       6 or more times a day
2       4 or 5 times a day
3       2 to 3 times a day
4       Once a day
5       5 or 6 times a week
6       2 to 4 times a week
7       Once a week
8       1 to 3 times per month
9       Less often or never

*(The answer options used at Cereals, on show card G2, are used repeatedly in the eating habits module. Further mentions of show card G2 will not, therefore, list out the options in full).*

**ASK ALL AGED 2-15**
       **[Chips]**
       SHOW CARD G2
       How often do you eat **chips**?
1       6 or more times a day
2       4 or 5 times a day
3       2 to 3 times a day
4       Once a day
5       5 or 6 times a week
6       2 to 4 times a week
7       Once a week
8       1 to 3 times per month
9       Less often or never

---

[1] The question wording and answer categories changed in 2008.

**[Potatoes]**
SHOW CARD G2
Other than chips, how often do you eat **potatoes, pasta or rice**?

**[Meat03] Meat**
SHOW CARD G2
How often do you eat **meat such as beef, lamb, pork etc**, not including poultry?

**[MeatProd]**
SHOW CARD G2
How often do you eat **meat products** such as sausages, meat pies, bridies, corned beef, or burgers?
INTERVIEWER: INCLUDE LORNE, SLICED, AND LINKS SAUSAGES

**[TFish]**
SHOW CARD G2
How often do you eat **canned tuna fish**? Please don't count fresh or frozen tuna.

**[WFish03] WFish**
SHOW CARD G2
How often do you eat **white fish** such as cod, haddock, whiting, sole or plaice, including fresh or frozen fish?

**[FshOil03] FishOil**
SHOW CARD G2
How often do you eat **other types of fish** such as herring, mackerel, salmon or kippers, including fresh, frozen or canned fish?
INTERVIEWER: If asked, include fresh or frozen tuna here.

**[Cheese]**
SHOW CARD G2
How often do you eat **cheese** not including cottage cheese and other reduced fat cheeses?

**[Confec]**
SHOW CARD G2
How often do you eat **sweets or chocolates**?

**[IceCream]**
SHOW CARD G2
How often do you eat **ice cream**?

**[Crisps]**
SHOW CARD G2
How often do you eat **crisps or other savoury snacks**?

**[DietDr]**
SHOW CARD G2
How often do you drink diet, low-calorie or no-added sugar **soft drinks**?
Include diet fizzy drinks, low-cal flavoured water and no-added sugar diluting juice. *(adults only)* Include diet or low-calorie soft drinks added to alcohol.   Do **not** include fresh fruit juice or plain water

**[SoftDr]**
SHOW CARD G2
How often do you drink **sugary soft drinks**?
Include fizzy drinks, energy drinks and diluting juice with added sugar.
 *(adults only)* Include sugary soft drinks added to alcohol.

INTERVIEWER:  Do **not** include diet, low-calorie or no-added sugar drinks or fresh fruit juice.

**IF (Age<=15) THEN**
**[MilkDr]**
SHOW CARD G2
How often does (child's name) drink milk, **not** including milk used for tea, coffee and cereals, or in milkshakes and other flavoured milks?
INTERVIEWER: include soya / goat's milk.

**ASK ALL AGED 2-15**
**[CakesEtc]**
SHOW CARD G2
How often do you eat **cakes, scones, sweet pies or pastries**?

**[Biscuits]**
SHOW CARD G2
How often do you eat **biscuits?**

**ASK ALL WHO EAT BISCUITS AT LEAST ONCE A DAY (IF [Biscuits] in [1..4])**
**[Biscuit]**
SHOW CARD G1 AGAIN
How many **biscuits** do you usually eat on any one day?
INTERVIEWER: If varies, ask for an average
1 6 a day or more
2 4-5 a day
3 2-3 a day
4 One a day
5 Less than one per day

**ASK ALL WHO EAT CAKES / SCONES / PIES ETC AT LEAST ONCE A DAY**
**[CakeScon]**
SHOW CARD G1 AGAIN
How many **cakes, scones, sweet pies or pastries** do you usually eat on any one day?
INTERVIEWER: If varies, ask for an average
1 6 a day or more
2 4-5 a day
3 2-3 a day
4 One a day
5 Less than one per day

# Fruit and vegetable module (2-15)

**Note that the fruit and veg module is now only being asked of adults through Intake24. It will be included in SHeS every four years (included in 2021 and 2025).**

**ASK ALL AGED 2-15**
**[VFInt]\***
I'd like to ask you a few questions about some of the things you ate and drank yesterday. By yesterday I mean 24 hours from midnight to midnight. First I'd like to ask you some questions about the amount of fruit and vegetables you have eaten.
1     Continue

**[VegSal]**
Did you eat any salad yesterday? Don't count potato, pasta or rice salad or salad in a sandwich.
INTERVIEWER: Salads made mainly from beans can **either** be included here **or** at the next question.
1     Yes
2     No

**IF VegSal = Yes THEN**
**[VegSalQ]**
How many cereal bowlsful of salad did you eat yesterday?
IF ASKED: 'Think about an average-sized cereal bowl'.
Range: 0.5 ..50.0

**ASK ALL AGED 2-15**
**[VegPul]**
Did you eat any pulses yesterday? By pulses I mean lentils and all kinds of peas and beans, including chickpeas and baked beans. Don't count pulses in foods like Chilli con carne.
1     Yes
2     No

**IF VegPul = Yes THEN**
**[VegPulQ]**
SHOW CARD G3
How many tablespoons of pulses did you eat yesterday?
IF ASKED: 'Think about a heaped or full tablespoon'.
FOR INFO: An average sized can of baked beans = 10 tablespoons.
Range: 0.5.. 50.0

**ASK ALL AGED 2-15**
**[VegVeg]**
Not counting potatoes, did you eat any vegetables yesterday?
Include fresh, raw, tinned and frozen vegetables.
1     Yes
2     No

**IF VegVeg = Yes THEN**
**[VegVegQ]**
SHOW CARD G3
How many tablespoons of vegetables did you eat yesterday?

IF ASKED: 'Think about a heaped or full tablespoon'.
Range: 0.5...50.0

## ASK ALL AGED 2-15
**[VegDish]**
*(Apart from anything you have already told me about, did /Did)* you eat any (*other*) dishes made **mainly** from vegetables or pulses yesterday, such as vegetable lasagne or vegetable curry?
Don't count vegetable soup, or dishes made mainly from potatoes.
1	Yes
2	No

## IF VegDish = Yes THEN
**[VegDishQ]**
SHOW CARD G3
How many tablespoons of vegetables or pulses did you eat (*in these kinds of dishes)* yesterday?
IF ASKED: 'Think about a heaped or full tablespoon'.
Range: 0.5 - 50.0

## ASK ALL AGED 2-15
**[VegUsual]**
Compared with the amount of vegetables, salads and pulses you usually eat, would you say that yesterday you ate...
...READ OUT...
1	less than usual,
2	more than usual,
3	or about the same as usual?

**[FrtDrk09] FrtDrnk**
Did you drink any pure fruit juice yesterday? Don't count diluting juice, squashes, cordials or fruit-drinks.
INTERVIEWER: Include pure fruit juice from concentrate.
1	Yes
2	No

## IF FrtDrk09 = Yes THEN
**[FrtDrnkQ]**
How many small glasses of pure fruit juice did you drink yesterday?
IF ASKED: 'A small glass is about a quarter of a pint'.
Range: 0.5.-.50.0

## ASK ALL AGED 2-15
**[Frt]**
Did you eat any fresh fruit yesterday? Don't count fruit salads, fruit pies, etc.
1	Yes
2	No

**FrtC TO FrtMor REPEATED FOR EACH FRUIT CODED AT FrtC OR MENTIONED AT FrtOth**
**IF Frt = Yes (OR FrtMor = Yes)**
> **[FrtC]*** *(Variable names: FrtC01-FrtC08)*
> What kind of fresh fruit did you eat yesterday?
> INTERVIEWER: Use the **Fresh Fruit Size list** in the coding booklet to code the size of this fruit (common examples listed below, **if in doubt** use the coding booklet).
> INTERVIEWER: IF MORE THAN ONE KIND OF FRUIT MENTIONED AND IF SAME SIZE, CODE EACH KIND OF FRUIT SEPARATELY.
> For example:  If respondent ate 2 apples and 1 banana code size of apple first (in this case 3 – medium fruit) then enter quantity of apples (in this case 2).  Next code size of banana (3 – medium fruit) then quantity of bananas (in this case 1).

1    Very large fruit (e.g. melon (all types), pineapple)
2    Large fruit (e.g. grapefruit, mango)
3    Medium-sized fruit (e.g. apple, banana, orange, peach)
4    Small fruit (e.g. kiwi, plum, apricot)
5    Very small fruit (e.g. strawberry, grapes (all types))
6    Not on coding list

**IF (FrtC = Very large fruit ... Very small fruit)**
> **[FrtQ]** *(Variable names: FrtQ01-FrtQ08)*
> IF FrtC= 'Very large fruit': How many average slices of this fruit did you eat yesterday?
> IF FrtC= 'Large / Medium / Small fruit': How much of this fruit did you eat yesterday?
> IF FrtC= 'Very small fruit': How many average handfuls of this fruit did you eat yesterday?
> Range: 0.5.-.50.0

**IF (FrtC = Not on coding list)**
> **[FrtOth]** *(Variable names: FrtOth01-FrtOth15)*
> What was the name of this fruit?
> Text: Maximum 50 characters
>
> **[FrtNotQ]** *(Variable names:FrtNot01-FrtNot15)*
> How much of this fruit did you eat?
> Text: Maximum 50 characters

**REPEAT FOR UP TO 15 ADDITIONAL FRUITS**
> **[FrtMor]** *(Variable names: FrtMor01-FrtMor15)*
> Did you eat any other fresh fruit yesterday?
1    Yes
2    No

**ASK ALL AGED 2+**
> **[FrtDry]**
> Did you eat any dried fruit yesterday? Don't count dried fruit in cereal, cakes, etc.
1    Yes
2    No

**IF FrtDry = Yes THEN**
> **[FrtDryQ] SHOW CARD WITH SPOON PICTURES)**
> SHOW CARD G3
> How many tablespoons of dried fruit did you eat yesterday?
> IF ASKED: 'Think about a heaped or full tablespoon'.
> Range: 0.5.-.50.0

**ASK ALL AGED 2-15**
**[FrtFroz]**
Did you eat any frozen or tinned fruit yesterday?
1    Yes
2    No

**IF FrtFroz = Yes THEN**
**[FrtFrozQ] (SHOW CARD WITH SPOON PICTURES)**
SHOW CARD G3
How many tablespoons of frozen or tinned fruit did you eat yesterday?
IF ASKED: 'Think about a heaped or full tablespoon'.
Range: 0.5.-.50.0

**ASK ALL AGED 2-15**
**[FrtDish]**
*(Apart from anything you have already told me about,*) Did you eat any (*other)* dishes made **mainly** from fruit yesterday, such as fruit salad or fruit pie? Don't count fruit in yoghurts.
1    Yes
2    No

**IF FrtDish = Yes THEN**
**[FrtDishQ]**
SHOW CARD G3
How many tablespoons of fruit did you eat (*in these kinds of dishes)* yesterday?
IF ASKED: 'Think about a heaped or full tablespoon'.
Range: 0.5.-.50.0

**ASK ALL AGED 215**
**[FrtUsual]**
Compared with the amount of fruit and fruit juice you usually eat and drink, would you say that yesterday you ate and drank...
...READ OUT...
1    less than usual,
2    more than usual,
3    or about the same as usual?

# Smoking module

**IF Age of Respondent is 18 or 19 years THEN**
> **[BookChk]**
> INTERVIEWER CHECK: (*Name of respondent*) IS AGED (*age of respondent*).
> RESPONDENT TO BE...
1    Asked Smoking/Drinking questions
2    Given SELF-COMPLETION BOOKLET FOR YOUNG ADULTS

**ASK ALL AGED 20+ (OR AGED 18-19 IF BEING ASKED IN MAIN INTERVIEW)**
> **[SmokPreAm]$**
> The next few questions ask about whether you smoke tobacco products. This means tobacco products which you light and smoke, and include, for example, cigarettes or hand-rolling tobacco.
> When answering these questions please do **NOT** include:
> -cigarettes that include no tobacco, or
> electronic cigarettes
> INTERVIEWER: PRESS 1 AND ENTER TO CONTINUE

> **[SmokEv]$ SmokEv08**
> May I just check, have you ever smoked a cigarette, a cigar or a pipe?
> CODE ALL THAT APPLY.

| | | |
|---|---|---|
| 1 | Yes: cigarette | [SmokEv08] |
| 2 | Yes: cigars | [SmokEv09] |
| 3 | Yes: pipe | [SmokEv10] |
| 4 | No | [SmokEv11] |

**IF ANY SmokEv08 to Smokev10 = yes THEN SmokEver = Yes; IF SmokEv08 = 4 THEN SmokEver = N**
**IF SmokEver = Yes THEN**
> **[SmokNow15]$ SmokeNow**
> Do you smoke cigarettes nowadays?
1    Yes
2    No

**IF SmokeNow = Yes THEN**
> **[DlySmoke]$**
> About how many cigarettes a day do you usually smoke on weekdays?
> IF RESPONDENT CAN ONLY GIVE RANGE, TAKE THE MID-POINT.
> IF LESS THAN ONE A DAY, ENTER 0
> IF SMOKES ROLL-UPS AND CANNOT GIVE CIGARETTE NO., CODE 97.
> Range: 0..97

**IF DlySmoke = 97 THEN**
> **[DlyEst]$ RolDly**

---

How much tobacco do you usually smoke on weekdays?
CODE HERE WHETHER THE AMOUNT IS TO BE CODED IN GRAMS OR OUNCES.
ENTER THE AMOUNT AT THE NEXT QUESTION:
1    Grams
2    Ounces

**IF DlyEst = Grams THEN**
**[DlyG]$ GramRol**
ENTER AMOUNT IN GRAMS
Range: 0..100

**IF DlyEst = Ounces OR Don't know THEN**
**[DlyOz] OuncRol**
ENTER AMOUNT IN OUNCES
Range: 0.00..100.00

**IF SmokeNow = Yes THEN**
**[WkndSmok]$**
And about how many cigarettes a day do you usually smoke at weekends?
IF RESPONDENT CAN ONLY GIVE RANGE, TAKE THE MID-POINT.
IF LESS THAN ONE A DAY, ENTER 0
IF SMOKES ROLL-UPS AND CANNOT GIVE CIGARETTE NO., CODE 97.
Range : 0..97

**IF WkndSmok = 97 THEN**
**[WkndEst]$ RolWknd**
How much tobacco do you usually smoke on weekends?
CODE HERE WHETHER THE AMOUNT IS TO BE CODED IN GRAMS OR OUNCES.
ENTER THE AMOUNT AT THE NEXT QUESTION
1    Grams
2    Ounces

**IF WkndEst = Grams THEN**
**[WkndG]$ GramWknd**
ENTER AMOUNT IN GRAMS
Range: 0..100

**IF WkndEst = Ounces THEN**
**[WkndOz]$ OuncWknd**
ENTER AMOUNT IN OUNCES
Range: 0.00..100.00

**IF SmokeEv08=Yes AND SmokeNow= No THEN**
**[SmokeReg]$**
Did you smoke cigarettes regularly, that is at least one cigarette a day, or did you smoke
them only occasionally?
1    Smoked cigarettes regularly, at least 1 per day
2    Smoked them only occasionally

---

$ 18 and 19 year olds were either asked the smoking and drinking questions in the main interview, or in the
self-completion booklet for young people, at the interviewers' discretion. Variables marked here with '$' are
combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+.
See the separate derived variable listing for details of these combined variable names.

3      SPONTANEOUS: Never really smoked cigarettes, just tried them once or twice

**IF SmokeReg = Smoked cigarettes regularly THEN**
    **[NumSmok]$**
    About how many cigarettes did you smoke in a day?
    IF RESPONDENT CAN ONLY GIVE RANGE, TAKE THE MID-POINT.
    IF LESS THAN ONE A DAY, ENTER 0
    IF SMOKES ROLL-UPS, AND CANNOT GIVE CIGARETTE NO., CODE 97
    Range: 0..97

**IF NumSmok = 97 THEN**
    **[NumEst]$ RolNum**
    About how much tobacco did you smoke a day?
    CODE HERE WHETHER THE AMOUNT IS TO BE CODED IN GRAMS OR OUNCES.
    ENTER THE AMOUNT AT THE NEXT QUESTION
1    Grams
2    Ounces

**IF NumEst= Grams THEN**
    **[NumG]$ GramExS**
    ENTER AMOUNT IN GRAMS
    Range: 0..100

**IF NumEst = Ounces THEN**
    **[NumOz]$ OuncExS**
    ENTER AMOUNT IN OUNCES
    Range: 0.00..100.00

**IF SmokeReg = Smoked cigarettes regularly THEN**
    **[SmokYrs]**
    And for approximately how many years did you smoke regularly?
    INTERVIEWER: IF LESS THAN ONE YEAR, CODE 0.
    Range: 0..64

**IF SmokeReg = Smoked cigarettes regularly OR Smoked them only occasionally THEN**
    **[EndSmoke]**
    How long ago did you stop smoking cigarettes (regularly/occasionally)?
    INTERVIEWER: ENTER NO. OF YEARS. IF LESS THAN ONE YEAR AGO, CODE 0.
    Range: 0..64

**IF EndSmoke  >= 0 THEN**
    **[LongEnd]**
    How many months ago was that?
1    Less than six months ago
2    Six months, but less than one year

---

$ 18 and 19 year olds were either asked the smoking and drinking questions in the main interview, or in the self-completion booklet for young people, at the interviewers' discretion. Variables marked here with '$' are combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+. See the separate derived variable listing for details of these combined variable names.

**IF (SmokeNow = Yes) OR (SmokeReg = Smoked cigarettes regularly) THEN**
**[StartSmk]$**
How old were you when you started to smoke cigarettes regularly?
INTERVIEWER: IF 'Never smoked regularly', CODE 97.
Range: 0..97

**IF (SmokeNow = Yes) OR (SmokeReg = Smoked cigarettes regularly OR Smoked them only occasionally) THEN**
**[DrSmoke] AdSmoke**
Has a medical person (e.g. doctor/nurse) ever advised you to stop smoking altogether because of your health?
1    Yes
2    No

**IF DrSmoke= Yes THEN**
**[DrSmoke1] AdGiven**
How long ago was that?
1    Within the last twelve months
2    Over twelve months ago

**ASK ALL 20+ (OR AGED 18-19 IF BEING ASKED IN MAIN INTERVIEW) WHO CURRENTLY SMOKE (IF SmokeNow = Yes)**
**[SmokStop] LongStop**
Can I check, how many times, **if any**, have you tried to give up smoking?
1    Never tried to stop smoking
2    Once or twice
3    Three times or more

**ASK ALL 20+ (OR AGED 18-19 IF BEING ASKED IN MAIN INTERVIEW) WHO HAVE GIVEN UP SMOKING IF (SmokStop= once or twice OR three times or more) THEN**
**[StopLong]**
SHOW CARD H1
And what is the longest period of time you have ever managed to stop smoking?:
1    Less than a week
2    At least a week but less than a month
3    1 – 3 months
4    4 – 6 months
5    Over 6 months

**[StopWant]**
Would you like to give up smoking?
1    Yes
2    No

---

$ 18 and 19 year olds were either asked the smoking and drinking questions in the main interview, or in the self-completion booklet for young people, at the interviewers' discretion. Variables marked here with '$' are combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+. See the separate derived variable listing for details of these combined variable names.

**ASK ALL 20+ (OR AGED 18-19 IF BEING ASKED IN MAIN INTERVIEW)**
[ECigEv16][1]
Have you ever used an electronic cigarette (e-cigarette), or any other vaping device?
INTERVIEWER NOTE: AN ELECTRONIC CIGARETTE IS A DEVICE THAT CAN LOOK LIKE A NORMAL CIGARETTE (THOUGH SOME CAN LOOK DIFFERENT) AND THAT USES A BATTERY TO CREATE A VAPOUR THAT CAN LOOK LIKE SMOKE. UNLIKE NORMAL CIGARETTES, THEY DO NOT BURN, NOR CONTAIN TOBACCO, THEY SHOULD NOT BE CONFUSED WITH NICOTINE INHALERS/INHALATORS, WHICH ARE LICENSED NICOTINE REPLACEMENT THERAPY (NRT) PRODUCTS. E-CIGARETTES ARE SOLD AS AN ALTERNATIVE TO SMOKING.
1     Yes
2     No

**IF ECigEv16=1 THEN**
[ECigNw16][2]
Do you use an e-cigarette or vaping device at all nowadays?
1     Yes
2     No

**IF ECigNw16=1 (yes)**
[OftECigC]
SHOW CARD H2
How often in the last **four weeks** have you used an e-cigarette or vaping device?
1     Every day
2     4-6 days a week
3     2-3 days a week
4     Once a week
5     2-3 times in the last 4 weeks
6     Once in the last 4 weeks
7     Not at all in last 4 weeks

**IF ECigNw16=no**
[EcigReg]
Did you use an e-cigarette or vaping device regularly or did you only try them once or twice?
1     Used e-cigarettes/vaping devices regularly
2     SPONTANEOUS:  Used e-cigarettes/vaping devices occasionally
3     Never really used e-cigarettes/vaping devices, just tried them once or twice

**IF EcigReg =regular or occasional**
[OftECigX ]
SHOW CARD H3
How often did you use an e-cigarette or vaping device in a typical **four week** period?
1     Every day
2     4-6 days a week
3     2-3 days a week
4     Once a week
5     2-3 times in a 4 week period
6     Once in a 4 week period
7     Less than once in a 4 week period

---

[1] New question in 2014, revised in 2016
[2] New question in 2014, revised in 2016

**IF ECigNw16=yes OR EcigReg= Used e-cigarettes regularly/occasionally**
**[StrtEcig]**
Can I just check, how old were you when you first tried an e-cigarette or vaping device?

**IF ECigNw16=yes**
**[EcigYrC]**
And for approximately how long have you been using an e-cigarette or vaping device?

INTERVIEWER: Record **years** below and **months** at next question.

INTERVIEWER:  Enter 0 if less than 1 year.

**[EcigMthC]**
INTERVIEWER:  Record **months** here.

INTERVIEWER:  Enter 0 if less than 1 month.

**IF ECigReg=used e-cigarettes regularly or occasionally**
**[EcigYrX]**
And for approximately how long did you use an e-cigarette or vaping device?

INTERVIEWER: Record **years** below and **months** at next question.

INTERVIEWER:  Enter 0 if less than 1 year.

**[EcigMthX]**
INTERVIEWER:  Record **months** here.

INTERVIEWER:  Enter 0 if less than 1 month.

**IF StrtEcig AND StartSmk=SAME**
**[WhchFrst]**
Can I just check, did you start **regularly** smoking tobacco cigarettes before **first trying** e-cigarettes/vaping devices?”
1    Yes, started **regularly smoking** tobacco cigarettes *before* **first trying** e-cigarettes/vaping devices, or
2    No, **started regularly** smoking tobacco cigarettes *after* **first trying** e-cigarettes/vaping devices first”)

**IF (SmokStop >1 OR (EndSmoke >= 0) THEN**
**[UseNRT…]**
SHOW CARD H4
We are also interested in whether people use any nicotine replacement or other products. Have you used any of the following products as part of your most recent attempt to stop smoking?
CODE ALL THAT APPLY
| | | |
|---|---|---|
| 1 | Yes, nicotine gum | [UseNRT1a] |
| 2 | Yes, nicotine patches that you stick on your skin | [UseNRT2a] |
| 3 | Yes, nasal spray/nicotine inhaler | [UseNRT3a] |
| 4 | Yes, lozenge/microtab | [UseNRT4a] |
| 5 | Yes, Champix/Varenicline | [UseNRT5a] |

| | | |
|---|---|---|
| 6 | Yes, Zyban/Bupropion | [UseNRT6a] |
| 7 | Yes, electronic cigarette/Vaping devices | [UseNRT7a] |
| 8 | Yes, other | [UseNRT8a] |
| 9 | No | [UseNRT9a] |

**[NRTOth]***
What other products did you use?

**ASK IF ([SmokStop]/LongStop > 2 OR EndSmoke = RESPONSE) AND response given at UseNRT**
**Loop for each product mentioned at UseNRT ASK**
**[ScQtNRT] NRTHelp**
Did using (product) help you to successfully stop smoking for a month or more?
1    Yes
2    No

**[NRTpresc]**
Did you buy these products yourself or did you get them on prescription?
1    Bought them myself
2    Got them on prescription
3    Mixture of both

**IF NOT 'NO' in USENRT**
**[NRTSupp…]**
Was this accompanied by smoking cessation support?
INTERVIEWER: IF YES: From Whom?

| | | |
|---|---|---|
| 1 | Yes, pharmacy | [NRTSupp1] |
| 2 | Yes, GP practice nurse | [NRTSupp2] |
| 3 | Yes, GP | [NRTSupp3a] |
| 4 | Yes, specialist smoking cessation advisor | [NRTSupp4a] |
| 5 | Yes, other | [NRTSupp5] |
| 6 | No | [NRTSupp6] |

**[SuppOth]***
What other type of support did you receive?

**ASK ALL – age range extended to all (0+) in 2012**
**[Passive…]$ -**
SHOW CARD H5
Are you regularly exposed to other people's tobacco smoke in any of these places?
PROBE: Where else?
INTERVIEWER: If asked: only include current exposure to other people's tobacco.
CODE ALL THAT APPLY

| | | |
|---|---|---|
| 1 | At own home | [Passive1] |
| 2 | At work | [Passive2] |
| 3 | In other people's homes | [Passive3] |
| 4 | In cars, vans etc | [Passive4a] |
| 5 | Outside of buildings (e.g. pubs, shops, hospitals) | [Passive5a] |
| 6 | In other public places | [Passive6a] |
| 7 | No, none of these | [Passive7a] |

**IF EXPOSED TO SMOKE IN ANY PLACES (IF Passive7=0 OR Don't know AND Age>=13)**
**[Bother]$**
  Does this bother you at all?
1   Yes
2   No

---

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# Drinking module (All Versions)

**IF (Age of Respondent is 18 years or over) OR (BookChk = Asked)**
    **[Drink]$**
    I am now going to ask you a few questions about what you drink – that is if you drink. Do you ever drink alcohol nowadays, including drinks you brew or make at home?
1    Yes
2    No

**IF Drink = No THEN**
    **[DrinkAny]$**
    Could I just check, does that mean you never have an alcoholic drink nowadays, or do you have an alcoholic drink very occasionally, perhaps for medicinal purposes or on special occasions like Christmas and New Year?
1    Very occasionally
2    Never

**ASK ALL 18/20+ WHO NEVER DRINK ALCOHOL (IF DrinkAny = Never)**
    **[AlwaysTT]$**
    Have you always been a non-drinker or did you stop drinking for some reason?
1    Always a non-drinker
2    Used to drink but stopped

**ASK ALL 18/20+ WHO DRINK ALCOHOL (IF (Drink = Yes) OR (DrinkAny = Very occasionally))**
    **[Intro]***
    INTERVIEWER – READ OUT: I'd like to ask you (all) whether you have drunk different types of alcoholic drink in the last 12 months. I do not need to know about non-alcoholic or low alcohol drinks.

---

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**[Nbeer]$**
SHOW CARD J1
I'd like to ask you first about **normal strength** beer or cider which has less than 6% alcohol. How often have you had a drink of **normal strength** BEER, LAGER, STOUT, CIDER or SHANDY (excluding cans and bottles of shandy) during the last 12 months? (NORMAL = less than 6% Alcohol by volume)
INTERVIEWER: IF RESPONDENT DOES NOT KNOW WHETHER BEER ETC DRUNK IS STRONG OR NORMAL, INCLUDE HERE AS NORMAL.
1    Almost every day
2    Five or six days a week
3    Three or four days a week
4    Once or twice a week
5    Once or twice a month
6    Once every couple of months
7    Once or twice a year
8    Not at all in the last 12 months

*(The answer options used at Nbeer, on show card J1, are used repeatedly in the drinking module. Further mentions of show card J1 will not, therefore, list out the options in full).*

**IF (Nbeer =Almost every day...Once or twice a year) THEN**
**[NbeerM…]$**
How much NORMAL STRENGTH BEER, LAGER, STOUT, CIDER or SHANDY (excluding cans and bottles of shandy) have you usually drunk on any one day?
INTERVIEWER: CODE MEASURES THAT YOU ARE GOING TO USE.
1    Half pints                                                             [NbeerM1]
2    Small cans                                                           [NbeerM2]
3    Large cans                                                           [NbeerM3]
4    Bottles                                                                 [NbeerM4][1]

**IF NbeerM = Half pints (IF NbeerM1=1) THEN**
**[NbeerQ1]$**
ASK OR CODE: How many half pints of NORMAL STRENGTH BEER, LAGER, STOUT, CIDER OR SHANDY (excluding cans and bottles of shandy) have you usually drunk on any one day?
Range: 1..97

**IF NbeerM = Small cans (IF NbeerM2=1) THEN**
**[NbeerQ2]$**
ASK OR CODE: How many small cans of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER have you usually drunk on any one day?
Range: 1..97

**IF NbeerM = Large cans (IF NbeerM3=1) THEN**
**[NbeerQ3]$**
ASK OR CODE: How many large cans of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER have you usually drunk on any one day?

---

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[1] No equivalent in self-completion questionnaire

Range: 1..97

**IF NbeerM = Bottles (IF NbeerM4=1) THEN**

[nberqbt]$ NBeerQ4

ASK OR CODE: How many bottles of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER  have you usually drunk on any one day?

Range: 1..97

[Nbottle]*

ASK OR CODE: What make of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER do you usually drink from bottles?

INTERVIEWER: IF RESPONDENT DOES NOT KNOW WHAT MAKE, OR RESPONDENT DRINKS DIFFERENT MAKES OF NORMAL STRENGTH BEER, LAGER, STOUT OR CIDER,

PROBE: What make have you drunk most frequently or most recently?

Text: Maximum 21 characters

[NcodeEq]

EDIT ONLY:

PLEASE LOOK UP AND ENTER PINT EQUIVALENT OF A BOTTLE OF *(Name of Bottle)*

VALID ENTRIES ARE 0.00, 0.32, 0.35, 0.44, 0.48, 0.50, 0.58, 0.77, 0.88, 0.97 AND 1.00.

ENTER 9.99 IF CANNOT CODE

**ASK ALL 18/20+ WHO DRINK ALCOHOL (IF (Drink = Yes) OR (DrinkAny = Very occasionally))**

[Sbeer]$

SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*

Now I'd like to ask you about **strong** beer or cider which has 6% or more alcohol (e.g. Tennent's Super, Special Brew).

How often have you had a drink of **strong** BEER, LAGER, STOUT or CIDER during the last 12 months? (STRONG=6% and over Alcohol by volume)

INTERVIEWER: IF RESPONDENT DOES NOT KNOW WHETHER BEER ETC DRUNK IS STRONG OR NORMAL, INCLUDE AS NORMAL STRENGTH AT [Nbeer] ABOVE.

**IF (Sbeer =Almost every day…Once or twice a year) THEN**

[SbeerM…]$

How much STRONG BEER, LAGER, STOUT or CIDER have you usually drunk on any one day? INTERVIEWER: CODE MEASURES THAT YOU ARE GOING TO USE.

| | | |
|---|---|---|
| 1 | Half pints | [SbeerM1] |
| 2 | Small cans | [SbeerM2] |
| 3 | Large cans | [SbeerM3] |
| 4 | Bottles | [SbeerM4][1] |

**IF SbeerM = Half pints THEN**

[SbeerQ1]$

ASK OR CODE: How many half pints of STRONG BEER, LAGER, STOUT or CIDER have you usually drunk on any one day?

Range: 1..97

---

[1] No equivalent in self-completion questionnaire

**IF SbeerM = Small cans THEN**
**[SbeerQ2]$**
ASK OR CODE: How many small cans of STRONG BEER, LAGER, STOUT or CIDER have you usually drunk on any one day?
Range: 1..97

**IF SbeerM = Large cans THEN**
**[SbeerQ3]$**
ASK OR CODE: How many large cans of STRONG BEER, LAGER, STOUT or CIDER have you usually drunk on any one day?
Range: 1..97

**IF SbeerM = Bottles THEN**
**[sberqbt]$ SBeerQ4**
ASK OR CODE: How many bottles of STRONG BEER, LAGER, STOUT or CIDER have you usually drunk on any one day?
Range: 1..97

**[Sbottle]\***
ASK OR CODE: What make of STRONG BEER, LAGER, STOUT or CIDER do you usually drink from bottles?
INTERVIEWER: IF RESPONDENT DOES KNOW MAKE, OR RESPONDENT DRINKS DIFFERENT MAKES OF STRONG BEER, LAGER, STOUT OR CIDER.
PROBE: What make have you drunk most frequently or most recently?
Text: Maximum 21 characters

**[ScodeEq]$**
EDIT ONLY:
PLEASE LOOK UP AND ENTER PINT EQUIVALENT OF A BOTTLE OF *(Name of Bottle)*
VALID ENTRIES ARE 0.00, 0.32, 0.35, 0.44, 0.48, 0.50, 0.58, 0.77, 0.88, 0.97 AND 1.00.
ENTER 9.99 IF CANNOT CODE

**ASK ALL 18/20+ WHO DRINK ALCOHOL (IF (Drink = Yes) OR (DrinkAny = Very occasionally))**
**[Spirits]$**
SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*
How often have you had a drink of spirits or liqueurs, such as gin, whisky, brandy, rum, vodka, or cocktails during the last 12 months?

**IF (Spirits =Almost every day…Once or twice a year) THEN**
**[SpiritsQ]$**
How much spirits or liqueurs (such as gin, whisky, brandy, rum, vodka, or cocktails) have you usually drunk on any one day?
CODE THE NUMBER OF **SINGLES** – COUNT DOUBLES AS TWO SINGLES.

25ml = 1 shot/single
1/5 70cl bottle = 5.5 singles
1/4 70cl bottle = 7 singles

---

1/3 70cl bottle = 9.5 singles
1/2 70cl bottle = 14 singles
70cl bottle = 28 singles
1L bottle = 40 singles

Range: 1..97

**ASK ALL 18/20+ WHO DRINK ALCOHOL (IF (Drink = Yes) OR (DrinkAny = Very occasionally))**
**[Sherry]$ [1]**
SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*
How often have you had a drink of sherry or martini including port, vermouth, Cinzano, t or Buckfast during the last 12 months?

**IF (Sherry =Almost every day...Once or twice a year) THEN**
**[SherryQ]$ [1]**
How much sherry or martini, including port, vermouth, Cinzano, or Buckfast have you usually drunk on any one day?
CODE THE NUMBER OF GLASSES
Range: 1..97

**ASK ALL 18/20+ WHO DRINK ALCOHOL (IF (Drink = Yes) OR (DrinkAny = Very occasionally))**
**[Wine]$**
SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*
How often have you had a drink of wine, including Babycham, champagne and prosecco, during the last 12 months?

**IF (Wine=Almost every day...Once or twice a year) THEN**
**[WineQ]$ [2]**
How much wine, including Babycham, champagne and prosecco, have you usually drunk on any one day?
INTERVIEWER: Code the measure the respondent used.
Please note that respondent may give answer in bottles and glasses.
Code **small** bottles (eg. 250ml, 175ml) as glasses, not bottles.
Please code the relevant option.
1    Bottle or parts of bottle
2    Glasses
3    Both bottles or parts of bottle, and glasses

---

[1] Buckfast was added to this question in 2008
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See the separate derived variable listing for details of these combined variable names.
[2] Question wording was revised in 2008.

**IF WineQ = Bottle or parts of bottle OR Both bottles and glasses**
 **[WQBt]$**
 INTERVIEWER: Code the number of 125ml glasses usually drunk **from the bottle** by the respondent.
 E.g. If they usually drank half a bottle, code 3 glasses.
 Press <F9> for more information.

---

Interviewer information screen:

 1 750ml bottle = 6 glasses.
 ½ 750ml bottle = 3 glasses.
 1/3 750ml bottle = 2 glasses.
 ¼ 750ml bottle = 1.5 glasses.

 1 litre   = 8 glasses.
 ½ litre   = 4 glasses.
 1/3 litre   = 2.5 glasses.
 ¼ litre   = 2 glasses.

If respondent has answered in bottles or litres, convert to glasses using the information provided on the screen.

For example, if a respondent said they usually share a bottle with one other person and they share it equally, code 3 glasses.

Small bottles (e.g. 250ml, 175ml) should **not** be coded here – record them as glasses.
Press <Esc> to close.

---

  Range: 1.0..97.9

**IF WineQ = Glasses OR Both bottles and glasses**
 **[WQGl]$**
 INTERVIEWER: Code the number of glasses (**drunk as glasses**).
 Range: 1.0..97.9

 **[WQGlz]$**
 Do you usually drink from a large, standard, or small glass?
 INTERVIEWER: Show wine glass cards.
 INTERVIEWER: If respondent drinks from two or three different size glasses, please code all that apply.
 Please note that if respondent usually drinks in a pub or wine bar and had a small glass, this would usually be 175ml. Also record the size of small bottles here.
1 Large glass (250ml)          [WQGlz1]
2 Standard glass (175ml)         [WQGlz2]
3 Small glass (125ml)          [WQGlz3]

---

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**IF WQGlz1 = mentioned THEN**
> **[Q250Glz]$**
> How many large glasses (250ml) have you usually drunk?
> Range: 1.0..97.9

**IF WQGlz2 = mentioned THEN**
> **[Ql75Glz]$**
> How many standard glasses (175ml) have you usually drunk?
> Range: 1.0..97.9

**IF WQGlz3 = mentioned THEN**
> **[Q125Glz]$**
> How many small glasses (125ml) have you usually drunk?
> Range: 1.0..97.9

**ASK ALL 18/20+ WHO DRINK ALCOHOL (IF (Drink = Yes) OR (DrinkAny = Very occasionally))**
> **[Pops03]$**
> SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*
> How often have you had a drink of alcoholic soft drink ('alcopop'), or a pre-mixed alcoholic drink such as WKD, Smirnoff Ice, Bacardi Breezer etc, in the last 12 months?

**IF (Pops03=Almost every day...Once or twice a year) THEN**
> **[PopsM03] $ [1]**
> How much alcopops or pre-mixed alcoholic drinks have you usually drunk on any one day?
> INTERVIEWER CODE THE MEASURE(S) THAT YOU ARE GOING TO USE.

| | | |
|---|---|---|
| 1 | Small cans | [PopsM031] |
| 2 | Standard Bottles (275ml) | [PopsM032] |
| 3 | Large Bottles (700ml) | [PopsM033] |

**IF PopsM03 = Small cans THEN**
> **[PopsQ031]$**
> ASK OR CODE: How many small cans of alcopops or pre-mixed alcoholic drinks have you usually drunk on any one day?
> Range: 1..97

**IF PopsM03 = Standard Bottles THEN**
> **[PopsQ032]$**
> ASK OR CODE: How many standard bottles of alcopops or pre-mixed alcoholic drinks have you usually drunk on any one day?
> Range: 1..97

**IF PopsM03 = Large Bottles THEN**
> **[PopsQ033]$**
> ASK OR CODE: How many large bottles of alcopops or pre-mixed alcoholic drinks have you usually drunk on any one day?

---

[1] Prior to 2008 the alcopops measures were small cans or bottles. In 2008 the measures were changed to small cans, standard bottles (275ml) or large bottles (700ml).

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Range: 1..97

**ASK ALL 18/20+ WHO DRINK ALCOHOL (IF (Drink = Yes) OR (DrinkAny = Very occasionally))**

**[AlcotA]\***
Have you drunk any other types of alcoholic drink in the last 12 months?
1    Yes
2    No

**IF AlcotA = Yes THEN**

**[OthDrnkA]\***
What other type of alcoholic drink have you drunk in the last 12 months?
CODE FIRST MENTIONED ONLY.
Text: Maximun 30 characters

**[FreqA]\***
SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*
How often have you had a drink of *(name of 'other' alcoholic drink)* in the last 12 months?

**IF FreqA IN [Almost every day...Once or twice a year] THEN**

**[OthQMA]\***
How much *(name of 'other' alcoholic drink)* have you usually drunk on any one day?
INTERVIEWER: CODE MEASURES THAT YOU ARE GOING TO USE.
1    Half pints
2    Singles
3    Glasses
4    Bottles
5    Other

**IF OthQMA = Other THEN**

**[OthQOA]\***
WHAT OTHER MEASURE?
Text: Maximum 12 characters

**[OthQA]\***
ASK OR CODE: How many *(half pints/singles/glasses/bottles/'other'measures)* of *(name of 'other' alcoholic drink)* have you usually drunk on any one day?
Range: 0..97

*Note: All drinks recorded under OthDrnkA backcoded into Nbeer-Pops03*

**[AlcotB]\***
Have you drunk any other types of alcoholic drink in the last 12 months?
1    Yes
2    No

**IF AlcotB = Yes THEN**

**[OthDrnkB]\***
What other type of alcoholic drink have you drunk in the last 12 months?
CODE FIRST MENTIONED ONLY.
Text: Maximum 30 characters

**[FreqB]***
SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*
How often have you had a drink of *(name of 'other' alcoholic drink)* in the last 12 months?

**IF FreqB IN [Amost every day...Once or twice a year] THEN**
**[OthQMB]***
How much *(name of 'other' alcoholic drink)* have you usually drunk on any one day?
INTERVIEWER: CODE MEASURES THAT YOU ARE GOING TO USE.
1    Half pints
2    Singles
3    Glasses
4    Bottles
5    Other

**IF OthQMB = Other THEN**
**[OthQOB]***
WHAT OTHER MEASURE?
Text: Maximum 12 characters

**[OthQB]***
ASK OR CODE: How many *(half pints/singles/glasses/bottles/'other' measure)* of *(name of 'other' alcoholic drink)* have you usually drunk on any one day?
Range: 0..97

*Note: All drinks recorded under OthDrnkB backcoded into Nbeer- Pops03*

**[AlcotC]***
Have you drunk any other types of alcoholic drink in the last 12 months?
1    Yes
2    No

**IF AlcotC = Yes THEN**
**[OthDrnkC]***
What other type of alcoholic drink have you drunk in the last 12 months?
CODE FIRST MENTIONED ONLY.
Text: Maximum 30 characters

**[FreqC]***
SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*
How often have you had a drink of *(name of 'other' alcoholic drink)* in the last 12 months?

**IF FreqC IN [Almost every day...Once or twice a year] THEN**
**[OthQMC]***
How much *(name of 'other' alcoholic drink)* have you usually drunk on any one day?
INTERVIEWER: CODE MEASURES THAT YOU ARE GOING TO USE.
1    Half pints
2    Singles
3    Glasses
4    Bottles
5    Other

**IF OthQMC = Other THEN**
    **[OthQOC]***
    WHAT OTHER MEASURE?
    Text: Maximum 12 characters

    **[OthQC]***
    ASK OR CODE: How many *(half pints/singles/glasses/bottles/'other' measures)* of *(name of 'other' alcoholic drink)* have you usually drunk on any one day?
    Range: 0..97

***Note: All drinks recorded under OthDrnkC backcoded into Nbeer- Pops03***

**ASK ALL 18/20+ WHO DRINK ALCOHOL (IF (Drink = Yes) OR (DrinkAny = Very occasionally))**
    **[DrinkOft]$**
    SHOW CARD J1 *(See question [Nbeer] for full listing of answer options on card J1)*
    Thinking now about all kinds of drinks, how often have you had an alcoholic drink of any kind during the last 12 months?

**ASK ALL 18/20+ WHO DRANK ALCOHOL IN THE PAST YEAR**
**(IF Drink = Yes AND DrinkOft <> Not at all in the last 12 months)**
    **[DrinkL7]$**
    You have told me what you have drunk over the last 12 months, but we know that what people drink can vary a lot from week to week, so I'd like to ask you a few questions about last week. Did you have an alcoholic drink in the seven days ending yesterday?
1    Yes
2    No

**IF DrinkL7=Yes THEN**
    **[DrnkDay]$**
    On how many days out of the last seven did you have an alcoholic drink?
    Range: 1..7

**IF DrnkDay = 2 to7 days THEN**
    **[DrnkSame]$**
    Did you drink more on one of the days *(some days than others)*, or did you drink about the same on both *(each of those)* days?
1    Drank more on one/some day(s) than other(s)
2    Same each day

**IF DrinkL7=Yes THEN**
    **[WhichDay]$**
    Which day *(last week)* did you *(last have an alcoholic drink/ have the **most** to drink)*?
1    Sunday

---

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* = not on the datafile        95

2       Monday
3       Tuesday
4       Wednesday
5       Thursday
6       Friday
7       Saturday

### [DrnkTy] $ ¹ DrnkType
SHOW CARD J2
Thinking about last *(answer to WhichDay)*, what types of drink did you have that day?
CODE ALL THAT APPLY.

| | | |
|---|---|---|
| 1 | Normal strength beer/lager/cider/shandy | [DrnkTy01] |
| 2 | Strong beer/lager/cider | [DrnkTy02] |
| 3 | Spirits or liqueurs | [DrnkTy03] |
| 4 | Sherry, martini or buckfast | [DrnkTy04] |
| 5 | Wine, babycham, champagne or prosecco | [DrnkTy05] |
| 6 | Alcopops/Pre-mixed alcoholic drinks | [DrnkTy06] |
| 7 | Other alcoholic drinks | [DrnkTy07] |
| 8 | Low alcohol drinks | [DrnkTy08] |

### IF DrnkTy=Normal strength beer/lager/cider/shandy (IF DrnkTy01 mentioned) THEN
#### [NBrL7] $
Still thinking about last *(answer to WhichDay)*, how much NORMAL STRENGTH BEER, LAGER, STOUT, CIDER or SHANDY (excluding cans and bottles of shandy) did you drink that day?
INTERVIEWER: CODE MEASURES THAT YOU ARE GOING TO USE.

| | | |
|---|---|---|
| 1 | Half pints | [NBrL71] |
| 2 | Small cans | [NBrL72] |
| 3 | Large cans | [NBrL73] |
| 4 | Bottles | [NBrL74] |

### IF NBrL7=Half pints (IF NBrL71 mentioned) THEN
#### [NBrL7Q1]$
ASK OR CODE: How many half pints of NORMAL STRENGTH BEER, LAGER, STOUT, CIDER or SHANDY (excluding cans and bottles of shandy) did you drink that day?
Range: 1..97

### IF NBrL7=Small cans (IF NBrL72 mentioned) THEN
#### [NBrL7Q2]$
ASK OR CODE: How many small cans of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER did you drink that day?
Range: 1..97

---

¹ Buckfast added to DrnkTy04 in 2008
$ 18 and 19 year olds were either asked the smoking and drinking questions in the main interview, or in the self-completion booklet for young people, at the interviewers' discretion. Variables marked here with '$' are combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+. See the separate derived variable listing for details of these combined variable names.

**IF NBrL7=Large cans (IF NBrL73 mentioned) THEN**
    **[NBrL7Q3]$**
    ASK OR CODE: How many large cans of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER did you drink that day?
    Range: 1..97

**IF NBrL7=Bottles (IF NBrL74 mentioned) THEN**
    **[Nberqbt7]$ [1] NBrL7Q4**
    ASK OR CODE: How many bottles of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER did you drink that day?
    Range: 1..97

    **[Nbotl7]***
    ASK OR CODE: What make of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER did you drink from bottles on that day?
    INTERVIEWER: IF RESPONDENT DRANK DIFFERENT MAKES CODE WHICH THEY DRANK MOST.
    Text: Maximum 21 characters

    **[L7NcodEq]$**
    EDIT ONLY:
    PLEASE LOOK UP AND ENTER PINT EQUIVALENT OF A BOTTLE OF *(Name of Bottle)*
    VALID ENTRIES ARE 0.00, 0.32, 0.35, 0.44, 0.48, 0.50, 0.58, 0.77, 0.88, 0.97 AND 1.00.
    ENTER 9.99 IF CANNOT CODE

**IF DrnkTy=Strong beer/lager/cider (IF DrnkTy02 mentioned) THEN**
    **[SBrL7] $**
    Still thinking about last *(answer to WhichDay)*, how much STRONG BEER, LAGER, STOUT or CIDER did you drink that day?
    INTERVIEWER: CODE MEASURES THAT YOU ARE GOING TO USE.

| | | |
|---|---|---|
| 1 | Half pints | [SBrL71] |
| 2 | Small cans | [SBrL72] |
| 3 | Large cans | [SBrL73] |
| 4 | Bottles | [SBrL74] |

**IF SBrL7=Half pints (IF SBrL71 mentioned) THEN**
    **[SBrL7Q1]$**
    ASK OR CODE: How many half pints of STRONG BEER, LAGER, STOUT or CIDER did you drink on that day?
    Range: 1..97

**IF SBrL7=Small cans (IF SBrL72 mentioned) THEN**
    **[SBrL7Q2]$**
    ASK OR CODE: How many small cans of STRONG BEER, LAGER, STOUT or CIDER did you drink on that day?
    Range: 1..97

---

[1] No equivalent in self-completion questionnaire
$ 18 and 19 year olds were either asked the smoking and drinking questions in the main interview, or in the self-completion booklet for young people, at the interviewers' discretion. Variables marked here with '$' are combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+. See the separate derived variable listing for details of these combined variable names.

**IF SBrL7=Large cans (IF SBrL73 mentioned) THEN**

[SBrL7Q3]$

ASK OR CODE: How many large cans of STRONG BEER, LAGER, STOUT or CIDER did you drink on that day?

Range: 1..97

**IF SBrL7=Bottles (IF SBrL74 mentioned) THEN**

[sberqbt7]$ [1] SBrL7Q4

ASK OR CODE: How many bottles of STRONG BEER, LAGER, STOUT or CIDER did you drink on that day?

Range: 1..97

[Sbotl7]*

ASK OR CODE: What make of STRONG BEER, LAGER, STOUT or CIDER did you drink from bottles on that day?

INTERVIEWER: IF RESPONDENT DRANK DIFFERENT MAKES CODE WHICH THEY DRANK MOST.

Text: Maximum 21 characters

[L7ScodEq]$

PLEASE LOOK UP AND ENTER PINT EQUIVALENT OF A BOTTLE OF *(Name of Bottle)*

VALID ENTRIES ARE 0.00, 0.32, 0.35, 0.44, 0.48, 0.50, 0.58, 0.77, 0.88, 0.97 AND 1.00.

ENTER 9.99 IF CANNOT CODE

**IF DrnkTy=Spirits (IF DrnkTy03 mentioned) THEN**

[SpirL7]$

Still thinking about last *(answer to WhichDay)*, how much spirits or liqueurs (such as gin, whisky, brandy, rum, vodka, or cocktails) did you drink on that day?

CODE THE NUMBER OF SINGLES – COUNT DOUBLES AS TWO SINGLES.

25ml = 1 shot/single

1/5 70cl bottle = 5.5 singles

1/4 70cl bottle = 7 singles

1/3 70cl bottle = 9.5 singles

1/2 70cl bottle = 14 singles

70cl bottle = 28 singles

1L bottle = 40 singles

Range: 1..97

**IF DrnkTy=Sherry (IF DrnkTy04 mentioned) THEN**

[ShryL7]$ [2]

Still thinking about last *(answer to WhichDay)*, how much sherry or martini, including port, vermouth, Cinzano, or Buckfast did you drink on that day?

CODE THE NUMBER OF GLASSES.

Range: 1..97

---

[1] No equivalent in self-completion questionnaire

$ 18 and 19 year olds were either asked the smoking and drinking questions in the main interview, or in the self-completion booklet for young people, at the interviewers' discretion. Variables marked here with '$' are combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+. See the separate derived variable listing for details of these combined variable names.

[2] Buckfast added in 2008

**IF DrnkTy=Wine (IF DrnkTy05 mentioned) THEN**
    **[WineL7]$**
Still thinking about last (*name of day*) how much wine, including Babycham, champagne and prosecco, did you drink on that day?
INTERVIEWER: Code the measure the respondent used.
Please note that respondent may give answer in bottles and glasses.
Code **small** bottles (eg. 250ml, 175ml) as glasses, not bottles.
Please code the relevant option.
1     Bottle or parts of bottle
2     Glasses
3     Both bottles or parts of bottle, and glasses

**F WineL7 = Bottle or parts of bottle OR Both bottles and glasses**
    **[WL7Bt]**
INTERVIEWER: Code the number of 125ml glasses drunk **from the bottle** by the respondent.
e.g. If they drank half a bottle, code 3 glasses.
Press <F9> for more information.
Range: 1.0..97.9

---

Interviewer information screen:

  1 750ml bottle = 6 glasses.
  ½ 750ml bottle     = 3 glasses.
  ⅓ 750ml bottle     = 2 glasses.
  ¼ 750ml bottle     = 1.5 glasses.
  1 litre   = 8 glasses.
  ½ litre  = 4 glasses.
  ⅓ litre  = 2.5 glasses.
  ¼ litre  = 2 glasses.

If respondent has answered in bottles or litres, convert to glasses using the information provided on the screen.

For example, if a respondent said they usually share a bottle with one other person and they share it equally, code 3 glasses.

Small bottles (e.g. 250ml, 175ml) should **not** be coded here – record them as glasses.
Press <Esc> to close.

---

**IF WineL7 = Glasses OR Both bottles and glasses**
    **[WL7Gl]$**
INTERVIEWER: Code the number of glasses (**drunk as glasses**).
Range: 1.0..97.9

---

**[WL7Glz]$**
Were you drinking from a large, standard, or small glass?
INTERVIEWER SHOW WINE GLASS CARDS
INTERVIEWER: If respondent drank from two or three different size glasses, please code all that apply.
Please note that if respondent was drinking in a pub or wine bar and had a small glass, this would usually be 175ml.  Also record the size of small bottles here.
1    Large glass (250ml)                                                              [WL7Glz1]
2    Standard glass (175ml)                                                         [WL7Glz2]
3    Small glass (125ml)                                                             [WL7Glz3]

**IF WL7Glz1=mentioned THEN**
**[ml250Glz]$**
How many large glasses (250ml) did you drink?
Range: 1.0..97.9

**IF WL7Glz2=mentioned THEN**
**[ml175Glz]$**
How many standard glasses (175ml) did you drink?
Range: 1.0..97.9

**IF WL7Glz3=mentioned THEN**
**[ml125Glz]$**
How many small glasses (125ml) did you drink?
Range: 1.0..97.9

**IF DrnkTy=Alcoholic lemonades/colas  (IF DrnkTy06 mentioned) THEN**
**[PopsL7] $ [1]**
Still thinking about last *(answer to Which Day)*, how much alcopops or pre-mixed alcoholic drinks such as WKD, Smirnoff Ice, Bacardi Breezer etc. did you drink on that day?
INTERVIEWER: CODE MEASURES THAT YOU ARE GOING TO USE.
1    Small cans                                                                           [PopsL71]
2    Standard bottles (275ml)                                                       [PopsL72]
2    Large bottles (700ml)                                                            [PopsL73]

**IF PopsL7=Small cans (IF PopsL71 mentioned) THEN**
**[PopsL7Q1]$**
ASK OR CODE: How many small cans of alcopops or pre-mixed alcoholic drinks did you drink on that day?
Range: 1..97

**IF PopsL703=Standard Bottles (IF PopsL72 mentioned) THEN**
**[PopsL7Q2]$**
ASK OR CODE: How many standard bottles of alcopops or pre-mixed alcoholic drinks did you drink on that day?
Range: 1..97

---

[1] Prior to 2008 the alcopops measures were small cans or bottles. In 2008 the measures were changed to small cans, standard bottles (275ml) or large bottles (700ml).
$ 18 and 19 year olds were either asked the smoking and drinking questions in the main interview, or in the self-completion booklet for young people, at the interviewers' discretion. Variables marked here with '$' are combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+. See the separate derived variable listing for details of these combined variable names.

**IF PopsL703=Large Bottles (IF PopsL73 mentioned) THEN**
**[PopsL7Q3]$**
ASK OR CODE: How many large bottles of alcopops or pre-mixed alcoholic drinks did you drink on that day?
Range: 1..97

**IF DrnkType=Other  (IF DrnkTy07 mentioned) THEN**
**[OthL7TA]***
Still thinking about last *(answer to WhichDay)*, what other type of alcoholic drink did you drink on that day?
CODE FIRST MENTIONED ONLY
Text: Maximum 30 characters

**[OthL7QA]***
How much *(name of 'other' alcoholic drink)* did you drink on that day?
WRITE IN HOW MUCH. REMEMBER TO SPECIFY HALF PINTS/ SINGLES/GLASSES/ BOTTLES.
Text: Maximum 30 characters

**[OthL7B]***
Did you drink any other type of alcoholic drink on that day?
1    Yes
2    No

**IF OthL7B=Yes THEN**
**[OthL7TB]***
Still thinking about last *(answer to WhichDay)*, what other type of alcoholic drink did you drink on that day?
CODE FIRST MENTIONED ONLY.
Text: Maximum 30 characters

**[OthL7QB]***
How much *(name of 'other' alcoholic drink)* did you drink on that day?
WRITE IN HOW MUCH. REMEMBER TO SPECIFY HALF PINTS/ SINGLES/GLASSES/ BOTTLES.
Text: Maximum 30 characters

**[OthL7C]***
Did you drink any other type of alcoholic drink on that day?
1    Yes
2    No

**IF OthL7C=Yes THEN**
    **[OthL7TC]\***
    Still thinking about last *(answer to WhichDay)*, what other type of alcoholic drink did you drink on that day?
    CODE FIRST MENTIONED ONLY.
    Text: Maximum 30 characters

**[OthL7QC]\***
    How much *(name of 'other' alcoholic drink)* did you drink on that day?
    WRITE IN HOW MUCH. REMEMBER TO SPECIFY HALF PINTS/ SINGLES/GLASSES/ BOTTLES.
    Text: Maximum 30 characters

***Note: All drinks recorded under OthL7A- OthL7C backcoded into NBrL7- PopsL703***

# Dental Health[1] (16+)

**ASK ALL AGED 16+**
    **[NatTeeth]**
SHOW CARD K1
Adults can have up to **32** natural teeth but over time people lose some of them.  How many natural teeth, including crowns have you got?
1    No natural teeth
2    Fewer than 10 natural teeth
3    Between 10 and 19 natural teeth
4    20 or more natural teeth


    **[TthPain]**
Have you had any toothache or pain in your mouth within the last month, or are you having any at present?
1    Yes
2    No


    **[MthIssue]**
    **SHOW CARD K2**
Do you currently have any problems with your mouth, teeth or dentures that cause you difficulty with any of the following listed on show card K2?  If you prefer please just tell me the number or numbers on the card that apply to you.

INTERVIEWER:  PLEASE CODE ALL THAT APPLY.

1    Yes, eating food
2    Yes, speaking clearly
3    Yes, smiling, laughing and showing teeth without embarrassment
4    Yes, emotional stability, for example, becoming more easily upset than usual
5    Yes, enjoying the company of other people such as family, friends, or neighbours
6    No, none of these


    **[GumBld]**
SHOW CARD K3
Do your gums bleed when you eat, brush your teeth or floss?
1    Yes, often
2    Yes, occasionally
3    No, never

    **[DenTreat]**
If you went to the dentist tomorrow, do you think you would need treatment?
1    Yes
2    No

---

[1] The questions in this module were introduced to SHeS in 2008.

# Employment Classification Module

**IF RESPONDENT IS AGED 16+ AND NOT HOUSEHOLD REFERENCE PERSON or IF RESPONDENT IS HOUSEHOLD REFERENCE PERSON BUT DID NOT ANSWER OCCUPATION QUESTIONS IN HOUSEHOLD QUESTIONNAIRE[1]**

**[EconAc12]**

**(IF (Age of Respondent is >=16) AND NOT (PerNum=PHRPNo AND PHRPOcc=Yes))**

In the last week (that is the 7 days ending *date last Sunday*) were you doing any of the following, even if only for one hour?

INTERVIEWER: 'Temporarily away' includes away from work ill, on maternity leave, on holiday leave and temporarily laid off (as long as there is still an employment contract). It does not include those who are laid off and no longer have an employment contract.

INTERVIEWER: Code **all that apply**.

| | | |
|---|---|---|
| 1 | Working as an employee (or temporarily away) | [NWrkemp] |
| 2 | On a Government sponsored training scheme (or temporarily away) | [NGvtSchm] |
| 3 | Self employed or freelance (or temporarily away) | [NSelfEmp] |
| 4 | Working unpaid for your own family's business (or temporarily away) | [NWrkFam] |
| 5 | Doing any other kind of paid work | [NOthWrk] |
| 6 | None of the above | [NNoneabv] |

**IF (HRP Age 16 to 64]) AND NOT (NGvtSchm=1) THEN**

**[EducCou] Educour**

Are you at presently at school or enrolled on any **full-time** education course excluding leisure classes? (Include correspondence courses and open learning as well as other forms of full-time education course).

INTERVIEWER: CODE **YES** IF FULL-TIME STUDENT ON HOLIDAY AND WILL BE STUDYING FULL-TIME WHEN NEXT TERM STARTS.

IF RESPONDENT IS STUDYING PART-TIME CODE **NO** HERE.

1    Yes
2    No

**IF ((NWrkFam=1) OR (NNoneabv=1))**
**AND NOT ((NWrkemp=1) OR (NGvtSchm=1) OR (NSelfEmp=1) OR (NOthWrk=1)) THEN**

**[Wk4Lk12] Wk4Look12**

Thinking of the 4 weeks ending (date last Sunday), were you actively looking for any paid work or Government training scheme at any time in those 4 weeks?

1    Yes
2    No

**IF [Wk4Lk12] = No THEN**

**[WaitJb12]**

Are you waiting to take up a job that you have already obtained?

1    Yes
2    No

---

[1] Economic activity questions changed in 2012

**IF (Wk4Lk12 = Yes OR WaitJb12 = Yes) THEN**
    **[Wk2Str12] Wk2Star12**
    If a job or a place on a government scheme had been available in the week ending (*date last Sunday*), would you have been able to start within 2 weeks?
1    Yes
2    No

**IF (NNoneabv =1) AND (Wk4Lk12 = No) AND (WaitJb12 = No) THEN**
    **[YNotWrk]**
    May I just check, what was the main reason you did not look for work in the last 4 weeks?
    INTERVIEWER: CODE ONE ONLY
1    Waiting for the results of an application for a job/being assessed by a training agent
2    Student
3    Looking after family/home
4    Temporarily sick or injured
5    Long-term sick or disabled
6    Believes no job available
7    Not yet started looking
8    Doesn't need employment
9    Retired from paid work
10    Any other reason

**IF (NNoneabv =1) AND (WaitJb12 <> Yes) THEN**
    **[EverJob]**
    Have you ever been in paid employment or self-employed?
1    Yes
2    No

**IF (WaitJb12 = Yes) THEN**
    **[OthPaid]**
  Apart from the job you are waiting to take up, have you ever been in paid employment or self-employed?
1    Yes
2    No

**IF (Everjob=Yes) THEN**
    **[PayLast]**
    Which year did you leave your last paid job?
    WRITE IN.
    Range: 1920..2017

**IF Last paid job less than or equal to 8 years ago (from PayLast) THEN**

**[PayMon]**

Which month in that year did you leave?

1    January
2    February
3    March
4    April
5    May
6    June
7    July
8    August
9    September
10   October
11   November
12   December
98   Can't remember

*[PayAge]*
*Computed: Age when last had a paid job.*

**ASK ALL WHO HAVE EVER WORKED (EverJob=Yes), OR CURRENTLY IN PAID WORK / SELF-EMPLOYED / ON A GOVERNMENT SCHEME / WORKING UNPAID IN OWN OR RELATIVE'S BUSINESS / WAITING TO TAKE UP PAID WORK ALREADY OBTAINED (Nactiv09=3 to 6), OR WORKED IN PAST WEEK (StWork=Yes)**

**[JobTitle]***

I'd like to ask you some details about *your most recent job/the main job you had/the job you are waiting to take up)*. What is *(was/will be)* the name or title of the job?
Text: Maximum 60 characters

**[FtPTime]**

Are you *(were you/will you be)* working full-time or part-time?
(FULL-TIME = MORE THAN 30 HOURS, PART-TIME = 30 HOURS OR LESS)

1    Full-time
2    Part-time

**[WtWork]***

What kind of work do *(did/will)* you do most of the time?
Text: Maximum 50 characters

**[MatUsed]***

IF RELEVANT: What materials or machinery do *(did/will)* you use?
IF NONE USED, WRITE IN `NONE'.
Text: Maximum 50 characters

**[SkilNee]***

What skills or qualifications are *(were)* needed for the job?
Text: Maximum 120 characters

**[Employe]**
Are you *(were you/will you be)* ...READ OUT...
1 an employee,
2 or, self-employed
IF IN DOUBT, CHECK HOW THIS EMPLOYMENT IS TREATED FOR TAX & NI PURPOSES.

**IF Employe = Self-employed THEN**
**[Dirctr]**
Can I just check, in this job are you *(were you/will you be)* a Director of a limited company?
1 Yes
2 No

**IF Employe=an employee OR Dirctr=Yes THEN**
**[EmpStat]**
Are you *(were you/will you be)* a ...READ OUT...
1 manager,
2 foreman or supervisor,
3 or other employee?

**[NEmplee]**
Including yourself, about how many people are *(were)* employed at the place where you usually work *(usually worked/will work)*?
1 1 or 2
2 3-24
3 25-499
4 500+

**IF Employe = Self-employed AND Dirctr=No THEN**
**[SNEmplee]**
Do *(did/will)* you have any employees?
1 None
2 1-24
3 25-499
4 500+

**IF Employe=Employee THEN**
**[Ind]***
What does *(did)* your employer make or do at the place where you *(usually worked/will work)*?
Text: Maximum 100 characters

**IF Employe=Self-employed THEN**
**[SlfWtMad]***
What *(did/will)* you make or do in your business?
Text: Maximum 100 characters

# Education module

**ASK ALL AGED 16+**
  **[EducEnd]**
  At what age did you finish your continuous full-time education at school or college?
1    Not yet finished
2    Never went to school
3    14 or under
4    15
5    16
6    17
7    18
8    19 or over


  **[TopQua] * TopQua03**
  SHOW CARD Q1
  Please look at this card and tell me which, if any, of the following educational qualifications you have.
  CODE ALL THAT APPLY.
  **None of these qualifications = Code 12**
1    School Leaving Certificate, National Qualification Access Unit            [TopQua1]
2    O Grade, Standard Grade, GCSE, GCE O Level, CSE, National
     Qualification Access 3 Cluster, Intermediate 1 or 2, National 4 or 5,
     Senior Certificate or equivalent                                          [TopQua2]
3    GNVQ/GSVQ Foundation or Intermediate, SVQ Level 1 or 2,
     SCOTVEC/National Certificate Module, City and Guilds Craft,
     RSA Diploma or equivalent                                                 [TopQua3]
4    Higher grade, Advanced Higher, CSYS, A level, AS Level, Advanced
     Senior Certificate or equivalent                                          [TopQua4]
5    GNVQ/GSVQ Advanced, SVQ Level 3, ONC, OND, SCOTVEC National
     Diploma, City and Guilds Advanced Craft, RSA Advanced Diploma
     or equivalent                                                             [TopQua5]
6    HNC, HND, SVQ Level 4, RSA Higher Diploma or equivalent         [TopQua6]
7    First Degree, Higher degree, SVQ Level 5 or equivalent                    [TopQua7]
8    Professional qualifications e.g. teaching, accountancy                    [TopQua8]
9    Other school examinations not already mentioned                          [TopQua9]
10   Other post-school but pre Higher education examinations
     not already mentioned                                                    [TopQua10]
11   Other Higher education qualifications not already mentioned               [TopQua11]
12   No qualifications                                                        [TopQua12]

# National Identity, ethnic background and religion module (All)

**ASK ALL (0+)**
> **[BirthPla]**
> What is your country of birth?

1 Scotland
2 England
3 Wales
4 Northern Ireland
5 Republic of Ireland
6 Elsewhere (write in)

> **[BirthPlaO]\***
> INTERVIEWER: Write in place of birth

> **[Ethnic22]\* Ethnic09**
> SHOW CARD Q2
> What is your ethnic group?
> INTERVIEWER READ OUT: Choose **ONE** from A to F on the card, then tell me which of the options in that section **best describes** your ethnic group or background.
> CODE ONE ONLY

1 A - White: Scottish
2 A - White: Other British
3 A - White: Irish
4 A - White: Polish
5 A - White: Gypsy/Traveller
6 A – White: Roma
7 A – White: Showman / Showwoman
8 A - White: Other (WRITE IN)
9 B - Mixed: Any mixed or multiple ethnic groups (WRITE IN)
10 C - Asian: Pakistani, Scottish Pakistani or British Pakistani
11 C - Asian: Indian, Scottish Indian or British Indian
12 C - Asian: Bangladeshi, Scottish Bangladeshi or British Bangladeshi
13 C - Asian: Chinese, Scottish Chinese or British Chinese
14 C - Asian: Other (WRITE IN)
15 D - African, Scottish African or British African (WRITE IN) (for example, NIGERIAN, SOMALI)
16 E – Caribbean or Black (WRITE IN)
     (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH)
17 F – Other ethnic group: Arab, Scottish Arab or British Arab
18 F – Other ethnic group: other (WRITE IN) (for example, SIKH, JEWISH)

**IF Ethnic22=Other white background**
> **[Othwhit]\***
> WRITE IN ETHNIC GROUP
> Text: Maximum 60 characters

**IF Ethnic22=Mixed background**
**[Othmix]***
WRITE IN ETHNIC GROUP
Text: Maximum 60 characters

**IF Ethnic22=Other Asian background**
**[OthAsi]***
WRITE IN ETHNIC GROUP
INTERVIEWER: Write in.
Text: Maximum 60 characters

**IF Ethnic22= African background**
**[AfrW]***
WRITE IN (for example, NIGERIAN, SOMALI)
INTERVIEWER: Write in.
Text: Maximum 60 characters

**IF Ethnic22= Caribbean or Black background**
**[BlkW]**
WRITE IN ETHNIC GROUP (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH)
INTERVIEWER: Write in.
Text: Maximum 60 characters

**IF Ethnic22=Other**
**[Otheth]***
WRITE IN ETHNIC GROUP (for example, SIKH, JEWISH)
Text: Maximum 60 characters

*Note: All other ethnic group answers recorded under Othwhit- Otheth backcoded into Ethnic12*

**ASK ALL AGED 16+**
**[Religi09] ReligioS**
What religion, religious denomination or body do you belong to?
INTERVIEWER: DO NOT PROMPT
0       None
1       Church of Scotland
2       Roman Catholic
3       Other Christian,
4       Muslim,
5       Buddhist
6       Sikh
7       Jewish
8       Hindu
9       Pagan
10      Another religion (SPECIFY)
97      Refused

**IF Religi09=3 'Other Christian' THEN**
**[Religio2]\* ReligioSC**
How would you describe your religion?
INTERVIEWER: Write in

**IF Religi09=10 'another religion' THEN**
**[Religio3]\* ReligioSO**
What is the name of the religion, religious denomination or body you belong to?
INTERVIEWER: Write in

IF Religio09=4 'Muslim' THEN

**[ReligioM] \*ReligioM**

What is the name of the denomination or school that you belong to?
INTERVIEWER: Write in

***Note: All other religion answers recorded under Religio2-Religio3 back coded into Religio9***

# Self-completion booklets admin (All modes)

**IF Age of Respondent is 16 years or over THEN**

**[SCIntAd]**
The next part of the interview involves you answering some questions on your own as part of a self-completion questionnaire.  I would like you to complete this after we have finished this part of the interview if possible, or as soon as you can after the interview.

The questions cover general health and wellbeing, and social issues, it should take you around 15-25 minutes to complete.

Some of the questions are sensitive, we have provided you with a list of useful contacts which you might find helpful if you want to speak to someone about any of the topics asked about.

Are you happy for me to send you the self-completion via email and/or text for you to complete online?

INTERVIEWER: A paper version is available for participants who do not want/can't take part in online option. However, please reassure participants that the online version is simple to complete and encourage them to take that option if they possibly can.

Yes
No, would prefer/need paper version
No, does not want to take part

**ASK IF SCIntAd = 3. No, does not want to take part**
**[SCRef]**
INTERVIEWER: Record why does not want to take part.
CODE ALL THAT APPLY.
1. Eyesight problems
2. Language problems
3. Reading/writing/comprehension problems
4. Respondent bored/fed up/tired
5. Questions too sensitive/invasion of privacy
6. Too long/too busy/taken long enough already
7. Refused to complete (no other reason given)
8. Other (SPECIFY)

**IF SCRef = 8,**

**[SCRefO]**

INTERVIEWER: PLEASE SPECIFY OTHER REASON

**IF Age of Respondent is 13-15 years THEN**
**[SCInt13]**
The next part of the interview involves <child name> answering some questions on their own as part of a self-completion questionnaire.  I would like <child name> to complete this after we have finished this part of the interview if possible or as soon as they can after the interview.

The questions cover general health and wellbeing and should take around 15 minutes to complete.

Some of the questions are sensitive and we have provided you with a list of useful contacts which you might find helpful if you or <child name> wants to speak to someone about any of the topics asked about.

Are you happy for me to send you the self-completion via email and/or text for <child name> to complete online?

INTERVIEWER: A paper version is available for participants who do not want/can't take part in online option.

1. Yes
2. No, would prefer/need paper version
3. No, does not want to take part

**ASK IF SCInt13 = 3. No, does not want to take part**
**[SCRef]**
INTERVIEWER: Record why does not want to take part.
CODE ALL THAT APPLY.
1. Eyesight problems
2. Language problems
3. Reading/writing/comprehension problems
4. Respondent bored/fed up/tired
5. Questions too sensitive/invasion of privacy
6. Too long/too busy/taken long enough already
7. Refused to complete (no other reason given)
8. Other (SPECIFY)

**IF SCRef = 8,**

**[SCRefO]**

INTERVIEWER: PLEASE SPECIFY OTHER REASON

**IF Age of Respondent is 4-12 years THEN**
**[SCInt412]**
The next part of the interview involves you answering some questions on behalf of <child name> as part of a self-completion questionnaire.  I would like you to complete this after we have finished this part of the interview if possible.  or as soon as you can after the interview.

The questions cover strengths and difficulties.

We have provided you with a list of useful contacts which you might find helpful if you want to speak to someone about any of the topics asked about.

Are you happy for me to send you the self-completion via email and/or text for you to complete online?

INTERVIEWER: A paper version is available for participants who do not want/can't take part in online option.

Yes
No, would prefer/need paper version
No, does not want to take part

**ASK IF SCInt412 =  3. No, does not want to take part**
**[SCRef]**
INTERVIEWER: Record why does not want to take part.
CODE ALL THAT APPLY.
1. Eyesight problems
2. Language problems
3. Reading/writing/comprehension problems
4. Respondent bored/fed up/tired
5. Questions too sensitive/invasion of privacy
6. Too long/too busy/taken long enough already
7. Refused to complete (no other reason given)
8. Other (SPECIFY)

**IF SCRef = 8,**

**[SCRefO]**
INTERVIEWER: PLEASE SPECIFY OTHER REASON

**If resp aged 16+**
**SCContact**
"^SCContactList
@/@/If you have a smartphone or an email address I can send you a link to access the self-completion questionnaire.
@/@/ADD IF NECESSARY: We will not share your contact details with anyone else or use them to contact you about
anything else or store them once the project is completed.
@/@/ADD IF NECESSARY AND IF MORE THAN ONE PERSON IN HOUSEHOLD: If you don't have an email or a mobile phone
yourself, I can send the link to someone else in the household, if they're also happy with this."

**SCMobiA**
**"@/^tfSCMobiA**
@/@/ADD IF NECESSARY: A smartphone is a mobile phone which can access the internet.
@/@/IF YES: And can I just check, is that your own mobile number or someone else in your household's?

@/@/INTERVIEWER: IF TWO OR MORE PEOPLE SHARE A MOBILE, CODE THE FIRST PERSON AS 'OWN' MOBILE NUMBER
AND THE REMAINDER AS 'PROXY' MOBILE NUMBERS." /
"Mobile number direct or proxy or no mobile"
: (Direct      "Yes - respondent's own mobile number",
  Proxy       "Yes - proxy / someone else's mobile number",
  RefMob     "Mobile number refused",
  NoMobile   "No one in household has mobile number"), NODK

## ASK IF RESPONDENT GIVES A DIRECT OR PROXY MOBILE NUMBER
## [SCMobiB]
What is the mobile number?
INTERVIEWER: TYPE IN MOBILE NUMBER. READ OUT TO RESPONDENT TO CHECK NUMBER IS CORRECT.
[Mobile number format with standard checks (must be 11 digits, beginning 07)]
Soft check if two 'direct' mobile numbers are identical (*if InMobiA=Direct for two identical phone numbers)*:
'You have entered two identical mobile numbers as 'own' mobile numbers. Please change one of these to a 'proxy' mobile number. Select the question you want to change from the list below or use the arrows on the keyboard.'
*Route in the order of the concurrent interviewing session.*
*If all respondents who agreed to take part in Intake24 without support (InAdCon=1) have been asked InEmailA, go to InSubDeP*

## SCEmailA
"@/^tfSCEmailA
@/@/IF YES: And can I just check, is that your own email address or someone else's?
@/@/INTERVIEWER: IF TWO OR MORE PEOPLE SHARE AN EMAIL ADDRESS, CODE THE FIRST PERSON AS 'OWN' EMAIL ADDRESS AND THE REMAINDER AS 'PROXY' EMAIL ADDRESSES." /
"Email address direct or proxy or no email"
: (Direct      "Yes - respondent's own email address",
  Proxy       "Yes - proxy / someone else's email address",
  RefEmail   "Email address refused",
  NoEmail    "No one in household has email address"), NODK

## SCEmailB
"@/What is the email address?
@/@/INTERVIEWER: ^SCEmailBTxt"
: STRING[100], NODK, NORF

## IF RESPONDENT GIVES A DIRECT OR PROXY MOBILE NUMBER
## [SCSubDeS]
INTERVIEWER: ENSURE YOUR LAPTOP IS CONNECTED TO THE INTERNET
INTERVIEWER: PRESS 1 AND <ENTER> TO SEND A TEXT MESSAGE
1 Send text message

## IF RESPONDENT GIVES A DIRECT OR PROXY EMAIL ADDRESS
## [SCSubDeP]
INTERVIEWER: ENSURE YOUR LAPTOP IS CONNECTED TO THE INTERNET
INTERVIEWER: PRESS 1 AND <ENTER> TO SEND AN EMAIL TO JOHN

1 Send email

**ASK IF RESPONDENT IS UNDER 16 YEARS OF AGE**
**[SCLinkCH]**
*Child Name, please can you check, is your parent or guardian happy for you to be sent a link?*
*1 Yes*
*2 No*

**IF SCInt412 OR SCInt13 OR SCIntAd=No, would prefer/need paper version THEN**
**[SCPost]**
   INTERVIEWER: Please make sure you are using the 2021 self-
   completion booklet
   INTERVIEWER Prepare @I^Colour@I self-completion booklet^AgeTxt
   by entering serial number.
   Check that you have the correct person number

   @/@/@AName············Year··Sample··Point···Address···Hhold···Check
letter···Person
        @/^SCLine@A
   INTERVIEWER: Please make sure you record your interviewer number
   on front cover of self-completion.
      1   Continue

**[SCAdd]**
INTERVIEWER: Once all the self-completions have been prepared for the household enter the householders name and address on the envelope (see below).  Then place all the prepared self-completions, a blank envelope per self-complete, a useful contact leaflet and a cover letter in the envelope.

Name: [main contact]
Address: [feed forward address]

 INTERVIEWER: Notify them that they will receive the self-complete(S) in the post in the next few days.  Instruct them to complete it (them) and return it (them) in the freepost envelope.

   1 Continue

**IF COMPLETEING PAPER SELF-COMP and being sent by post (IndMode=2 (telephone)**
**[ConfPost]**
Thank you for agreeing to complete a paper version of the self-completion questionnaire. I will send it/them to your address in the next day or so but it may take a few days to arrive. You will be provided with instructions which are included with the questionnaire and a useful contact leaflet with the contact details of some organisations that you might find helpful. A pre-paid return envelope will also be included. Please post it back as soon as you can. You can also call me with any queries you have.
1    Continue

# Self-completion booklets admin (IF PAPER)

[*Module asked if SCIntAd = 2 AND/OR ScInt13=2 AND/OR SCInt412=2*]

**IF Age of Respondent is 13 years or over THEN**
**[SCIntro]***
PREPARE *(Orange/Yellow/Pink/Grey/Green/Maroon)* SELF-COMPLETION BOOKLET BY
ENTERING SERIAL NUMBERS. CHECK YOU HAVE CORRECT PERSON NUMBER.

**IF Age of Respondent is 13 years or over THEN**
**[SComp2]***
I would now like you to answer some questions by completing this booklet on your own. The
questions cover *(smoking, drinking and general health / general health).*
INTERVIEWER: Explain how to complete booklet.
(*If asked, show booklet to parent(s)*).

**IF Age of any respondent in household = 4-12 years THEN**
**[ParSDQ]**
INTERVIEWER: Ask parent to complete orange booklet for parents of children 4-12.
This child's parent(s) are: *(Names of parents)*
Code person number of the parent who is completing the booklet, or enter code:
95 = Parent not present at time of interview
96 = Booklet refused

**IF (ParSDQ IN [1..10]) THEN**
**[PrepSDQ]***
INTERVIEWER: Prepare booklet for parents of children 4-12 by entering serial numbers.
Check you have the correct person number.
Explain how to complete the booklet.
Press <1> and <Enter> to continue.

**IF Age of respondent is 13 years or over THEN**
**[SCCheck]***
INTERVIEWER: Wait until respondent(s) have finished and then ask respondent to check
booklet is fully completed (do not check booklet yourself)
If not, ask if questions missed in error.
If in error, ask respondent to complete.

**[SComp3]**
INTERVIEWER CHECK: Was the *yellow* booklet *(for 13-15 year olds/for young adults/for
adults)* completed?
1     Fully completed
2     Partially completed
3     Not completed

**IF SComp3=Partially completed OR Not completed THEN**
    **[SComp6]**
    INTERVIEWER: Record why booklet not completed / partially completed.
    CODE ALL THAT APPLY

| | | |
|---|---|---|
| 1 | Eyesight problems | [SComp61] |
| 2 | Language problems | [SComp62] |
| 3 | Reading/writing/comprehension problems | [SComp63] |
| 4 | Respondent bored/fed up/tired | [SComp64] |
| 5 | Questions too sensitive/invasion of privacy | [SComp65] |
| 6 | Too long/too busy/taken long enough already | [SComp66] |
| 7 | Refused to complete booklet (no other reason given) | [SComp67] |
| 8 | Other (SPECIFY) | [SComp68] |

**IF SComp6=Other THEN**
    **[SComp6O]\***
    PLEASE SPECIFY OTHER REASON:
    Text: Maximum 60 characters

**IF Age of any respondent in household = 4-12 years AND IF (ParSDQ IN [1..10]) THEN**
    **[SDQChk]**
    INTERVIEWER: Was the orange booklet for parents completed?
1    Fully completed
2    Partially completed
3    Not completed

**IF SDQChk =Partially completed OR Not completed THEN**
    **[SDQComp]**
    INTERVIEWER: Record why booklet not completed / partially completed.
    CODE ALL THAT APPLY

| | | |
|---|---|---|
| 0 | Child away from home during fieldwork period | [SDQComp0] |
| 1 | Eyesight problems | [SDQComp1] |
| 2 | Language problems | [SDQComp2] |
| 3 | Reading/writing/comprehension problems | [SDQComp3] |
| 4 | Respondent bored/fed up/tired | [SDQComp4] |
| 5 | Questions too sensitive/invasion of privacy | [SDQComp5] |
| 6 | Too long/too busy/taken long enough already | [SDQComp6] |
| 7 | Refused to complete booklet (no other reason given) | [SDQComp7] |
| 8 | Other (SPECIFY) | [SDQComp8] |

**IF SDQComp= Other THEN**
    **[SDQCompO]\***
    PLEASE SPECIFY OTHER REASON:
    Text: Maximum 60 characters

**ASK ALL**
    **[SCPrompt]**
    IMPORTANT: MAKE SURE ALL RESPONDENTS WHO COMPLETED THE ADULT OR
    YOUNG ADULT SELF-COMPLETION BOOKLET ARE PROVIDED THE USEFUL
    CONTACTS LEAFLET

# Measurements module (All Versions) (Height 2+ & Weight 2+)

[*Brought back on route April 2022*]

**ASK ALL AGED 2+**
> **[Accred]**
>   Have you been accredited for height and weight measurements?'
> 1- Yes
> 2- No
>
> If No/DK take to [PregNowB] (self-reported height and weights)

**ASK IF ACCRED=1**
> **[Equip]**
> 'Do you have equipment for taking height and weight measurements?'
> 1- Yes
> 2- No
>
> If No/DK take to [PregNowB] (self-reported height and weights)

If Yes take to physical measurement questions

**ASK IF EQUIP=1**
> **[Intro]***
> PREAMBLE: I would now like to measure height and weight. There is interest in how people's weight, given their height, is associated with their health.
> INTERVIEWER: Select appropriate information leaflet and fill in:
> INTERVIEWER: Remember to wipe the head plate and base plate of the stadiometer as well as the scales with milton wipes between households.
>
>   Press <1> to continue

**ASK ALL WOMEN AGED 16-49 and HHmode=1 (face to face)**
> **[PregNowB]**
> May I check, are you pregnant now?
1    Yes
2    No

**ASK ALL AGED 2+**
> **[RespHts]**
> INTERVIEWER: Measure height and code.
> Include 'disguised' refusals such as 'it will take too long', 'I have to go out' etc. as code 2: height refused.
1    Height measured
2    Height refused
3    Height attempted, not obtained
4    Height not attempted

**IF RespHts = Height measured THEN**
**[Height]**
INTERVIEWER: Enter height.
Range: 60.0..244.0

**[RelHiteB]**
INTERVIEWER CODE ONE ONLY
1   No problems experienced reliable height measurement obtained

Problems experienced - measurement likely to be:
2   Reliable
3   Unreliable

**IF RelHiteB = Unreliable THEN**
**[HiNRel]**
INTERVIEWER: What caused the height measurement to be unreliable?
1   Hairstyle or wig
2   Turban or other religious headgear
3   Respondent stooped
4   Child respondent refused stretching
5   Respondent would not stand still
6   Respondent wore shoes
7   Other, please specify
8   Difficulty standing

**IF HiNRel = Other THEN**
**[OHiNRel]***
PLEASE SPECIFY WHAT CAUSED UNRELIABLE HEIGHT MEASUREMENT.
Text: Maximum 49 characters

**IF RespHts = Height refused THEN**
**[ResNHi]**
GIVE REASONS FOR REFUSAL.
1   Cannot see point/Height already known/Doctor has measurement
2   Too busy/Taken too long already/ No time
3   Respondent too ill/frail/tired
4   Considered intrusive information
5   Respondent too anxious/nervous/ shy/embarrassed
6   Refused (no other reason given)
7   Other

**IF RespHts = Height attempted, not obtained OR Height not attempted THEN**
**[NoHitM]***
**INTERVIEWER: Code reason for not obtaining height**
CODE ALL THAT APPLY
1   Away from home during fieldwork period (specify in a Note)          [NoHitM0]
2   Respondent is unsteady on feet                                      [NoHitM1]
3   Respondent cannot stand upright/too stooped                         [NoHitM2]
4   Respondent is chairbound                                            [NoHitM3]
5   Child: subject would not stand still                                [NoHitM4]
6   Ill or in pain                                                      [NoHitM5]
7   Stadiometer faulty or not available                                 [NoHitM6]
8   Other – specify                                                     [NoHitM7]

**IF (NoHitM = Other) THEN**

    **[NoHitMO]***

    PLEASE SPECIFY OTHER REASON.

    Text: Maximum 60 characters

**IF RespHts=Height refused, Height attempted, not obtained OR Height not attempted THEN**

    **[EHtCh]**

    INTERVIEWER: Ask *(respondent)* for an estimated height. Will it be given in metres or in feet and inches?

    If respondent doesn't know height use <Ctrl K>, if respondent isn't willing to give height use <Ctrl R>.

1    Metres
2    Feet and inches

**IF EHtCh = Metres THEN**

    **[EHtm]**

    INTERVIEWER: Please record estimated height in metres.

    Range: 0.01..2.44

**IF EHtCh = Feet and inches THEN**

    **[EHtFt]**

    INTERVIEWER: Please record estimated height. Enter feet.

    Range: 0..7

    **[EHtIn]**

    INTERVIEWER: Please record estimated height. Enter inches.

    Range: 0..11

    ***[EMHeight] Final measured or estimated height (cm).***

**ASK ALL AGED 2+ UNLESS AGED 16-49 AND PREGNANT (IF PregNowB<>Yes)**

    **[RespWts]**

    INTERVIEWER: Measure weight and code.

    *(INTERVIEWER[1]: If respondent weighs more than 200kg (31 ½ stones) do not weigh. Code as 'weight not attempted)*

    INCLUDE 'DISGUISED' REFUSALS SUCH AS 'IT WILL TAKE TOO LONG', 'I HAVE TO GO OUT' ETC. AT CODE 2: WEIGHT REFUSED.

0    *If Age 0-5 years: Weight obtained (child held by adult)/If Age over 5 years: DO NOT USE THIS CODE*
1    Weight obtained
2    Weight refused
3    Weight attempted, not obtained
4    Weight not attempted

**IF RespWts=Weight obtained (subject on own)**

    **[Weight]**

    INTERVIEWER: Record weight.

    Range: 10.0..130.0

---

[1] This interviewer instruction only appears if the person being weighed is aged 6 or above.

**IF RespWts = Weight obtained (child held by adult) THEN**
　　　　**[WtAdult]**
INTERVIEWER: Enter weight of adult on his/her own.
Range: 15.0..130.0

　　　　**[WtChAd]**
INTERVIEWER: Enter weight of adult holding child.
Range: 15.0..130.0

　　　　*[FWeight] Measured weight, either Weight or WtChAd-WtAdult*
　　　　*Range: 0.0..140.0*

**IF RespWts=Weight obtained (subject on own) OR Weight obtained (child held by adult)**
　　　　**[FloorM]**
INTERVIEWER: Were the scales placed on..."

| | | |
|---|---|---|
| 1 | …uneven floor, | [FloorM1] |
| 2 | carpet, | [FloorM2] |
| 3 | or neither? | [FloorM3] |

　　　　**[RelWaitB]**
INTERVIEWER: Code one only.
1　　　No problems experienced, reliable weight measurement obtained

　　　　Problems experienced - measurement likely to be:
2　　　Reliable
3　　　Unreliable

**IF RespWts = Weight refused THEN**
　　　　**[ResNWt]**
INTERVIEWER: Give reasons for refusal.
1　　　Cannot see point/Weight already known/Doctor has measurement
2　　　Too busy/Taken long enough already/No time
3　　　Respondent too ill/frail/tired
4　　　Considered intrusive information
5　　　Respondent too anxious/nervous/shy/embarrassed
6　　　Child refused to be held by parent
7　　　Parent refused to hold child
8　　　Refused (no other reason given)
9　　　Other

**IF RespWts = Weight attempted, not obtained OR Weight not attempted THEN**
**[NoWaitM]***
INTERVIEWER: Code reason for not obtaining weight.
CODE ALL THAT APPLY.

| | | |
|---|---|---|
| 1 | Child: away from home during fieldwork period (specify in a Note) | [NoWaitM0] |
| 2 | Respondent is unsteady on feet | [NoWaitM1] |
| 3 | Respondent cannot stand upright | [NoWaitM2] |
| 4 | Respondent is chairbound | [NoWaitM3] |
| 5 | Respondent weighs more than 130 kg | [NoWaitM4] |
| 6 | Ill or in pain | [NoWaitM5] |
| 7 | Scales not working | [NoWaitM6] |
| 8 | Parent unable to hold child | [NoWaitM7] |
| 9 | Other – specify | [NoWaitM8] |

**IF NoWaitM = Other THEN**
**[NoWaitMO]***
PLEASE SPECIFY OTHER REASON.
Text: Maximum 60 characters

**IF RespWts = Weight refused OR Weight attempted, not obtained OR Weight not attempted THEN**
**[EWtCh]**
INTERVIEWER: Ask *(respondent)* for an estimated weight. Will it be given in kilograms or in stones and pounds?
If respondent doesn't know weight use <Ctrl K>, if respondent isn't willing to give weight use <Ctrl R>.
1    Kilograms
2    Stones and pounds

**IF EWtCh = Kilograms THEN**
**[EWtkg]**
INTERVIEWER: Please record estimated weight in kilograms.
Range: 1.0..210.0

**IF EWtCh = Stones and pounds THEN**
**[EWtSt]**
INTERVIEWER: Please record estimated weight. Enter stones.
Range: 1..32

**[EWtL]**
INTERVIEWER: Please record estimated weight. Enter pounds.
Range: 0..13

***[EMweight] Final measured or estimated weight (kg), computed***

**[StadNo]**
INTERVIEWER: Please record serial number of **stadiometer** used for this interview.

**[SclNo]**
Please record serial number of **scales** used for this interview.

**[MeasComp]**
INTERVIEWER: The measurements section is now complete.

Press 1 and Entre to continue.

**[Return]**
INTERVIEWER: Now return to the individual session to complete this interview.

Press 1 and Enter to bring up the parallel block selection.

# Self-reported measurements module (Telephone)

**ASK ALL WOMEN AGED 16-49 and HHmode=2 (telephone)**
**[PregNowC]**
May I check, are you pregnant now?
1    Yes
2    No

**ASK ALL if HHmode=2 (telephone)**
**[SlfHt]**
INTERVIEWER: Ask (respondent) for an estimated height. Will it be given in metres or in feet and inches?
    If respondent doesn't know height use <Ctrl K>, if respondent isn't willing to give height use <Ctrl R>.
1    Metres
2    Feet and inches

**[SlfWt] if HHmode=2 (telephone)**
INTERVIEWER: Ask (respondent) for an estimated weight. Will it be given in kilograms or in stones and pounds?
    If respondent doesn't know weight use <Ctrl K>, if respondent isn't willing to give weight use <Ctrl R>.
1    Kilograms
2    Stones and pounds

# Health Measurements and Samples
## ALL 16+ IN SAMPLE B HOUSEHOLDS

[*Brought back on route from July 2022 onwards*]

**[Baccred]**
Have you been accredited to collect biological measurements?
1- Yes
2- No

If No, biological module ends

ASK IF BACCRED=1
**[Bequip]**
Do you have equipment for taking biological measurements?
1- Yes
2- No

If No biological module ends

**ASK IF BEQUIP=1**
 **[BioIntro]**

INTERVIEWER: THIS IS THE HEALTH MEASUREMENTS AND SAMPLES MODULE FOR [RESPONDENT NAME / RESPONDENT DOB]

PRESS <1> AND <ENTER> TO CONTINUE

1. Continue

 **[BioDat]**

INTERVIEWER: Please enter the date of this interview

XX/XX/XXXX

 **PregNTJB**
 "@/Can I check, are you pregnant at the moment?"
 : YesNo

# Prescribed Medicines and Drug Coding

**ASK ALL SAMPLE B 16+**
**[MedCNJD]**
Are you taking or using any medicines, pills, syrups, ointments, puffers or injections prescribed for you by a doctor or a nurse?
1    Yes
2    No

**IF (MedCNJD = Yes) AND ([MEDCINBP=yes] OR [MedHeart=yes]) THEN**
**[MedIntro]***
Could I take down the names of the medicines, including pills, syrups, ointments, puffers or injections, prescribed for you by a doctor?
INTERVIEWER: Include the contraceptive pill
1    Continue

*Questions MedBI-MedBIC repeated for up to 22 drugs*

**IF (MedCNJD = Yes) AND ([MEDCINBP=yes] OR [MedHeart=yes]) THEN**
**[MedBI]** (Variable names: Medbi01 – Medbi22)
Enter name of drug number (*number*).
Ask if you can see the containers for all prescribed medicines currently being taken.
If Aspirin, record dosage as well as name.
Text: maximum 50 characters

**[YTake] (Variable names: MedBIA-MedBIA22)**
Do you take (name of drug) because of a heart problem, high blood pressure or for some other reason?
1    Heart problem                                              [YTake011-YTake221]
2    High blood pressure                                        [YTake012-YTake222]
3    Other reason                                               [YTake013-YTake223]

**[MedBIA]** (Variable names: MedBIAB-MedBIA22B)
Have you taken or used (name of drug) in the last 7 days?
1    Yes
2    No

**[MedBIC]***
INTERVIEWER CHECK: Any more drugs to enter?
1    Yes
2    No

* = not on the datafile                          127

# Blood Pressure

**ALL SAMPLE B Age 16+ (EXCEPT PREGNANT WOMEN)**
**[BPIntro]**
I would now like to measure your blood pressure, which is an important indicator of cardiovascular health.
Blood pressure is measured using a monitor and a cuff which I will secure around your right arm. When we are ready to begin I'll press the start button and the cuff will inflate and deflate automatically three times. You will feel some pressure on your arm when the cuff inflates.

Once I have completed the recordings I will tell you what they are.

Are you willing to have your blood pressure measured?

    **[BPConst]**
    INTERVIEWER Does the respondent agree to blood pressure measurement?
1    Yes, agrees
2    No, refuses
3    Unable to measure BP for reason other than refusal

**IF BPConst = Yes, agrees THEN**
    **[ConSubX]**
    May I just check, have you eaten, smoked, drunk alcohol or done any vigorous exercise in the past 30 minutes?
    CODE ALL THAT APPLY.
1    Eaten                [ConSubX1]
2    Smoked          [ConSubX2]
3    Drunk alcohol        [ConSubX3]
4    Done vigorous exercise    [ConSubX4]
5    (None of these)        [ConSubX5]

    **[OMRONNo] OMRON**
    INTERVIEWER RECORD BLOOD PRESSURE EQUIPMENT TYPE AND SERIAL NUMBER (E.g. OM123, LOM123, SOM123):
    Enter OM, LOM or SOM followed by 3 digits (Range:001..999)

    **[CufSize]**
    SELECT CUFF AND ATTACH TO THE  RESPONDENT'S RIGHT ARM.  ASK THE RESPONDENT TO SIT STILL FOR FIVE MINUTES.
    RECORD CUFF SIZE CHOSEN.
1    Small adult (17-25 cm)
2    Adult (22-32 cm)
3    Large adult (32-42 cm)

    **[BPReady]***
    INTERVIEWER: ONCE RESPONDENT HAS SAT STILL FOR 5 MINUTES YOU ARE READY TO TAKE THE MEASUREMENTS.
    Check that the MODE selector is set to AVG (average) and P-SET Volume (pressure setting) is set to auto
    ENSURE THE [READY TO MEASURE] SYMBOL IS SHOWING BEFORE PRESSING THE [START] BUTTON TO START THE MEASUREMENTS.

*Sys to BPWait repeated for up to 3 blood pressure measurements and average is also recorded*

**[Sys]** *(variable names sys1om – sys4om)*
INTERVIEWER: Take three measurements from right arm.
ENTER (AVERAGE/FIRST/SECOND/THIRD) SYSTOLIC READING (mmHg).
IF READING NOT OBTAINED, ENTER 999.
IF YOU ARE NOT GOING TO GET ANY BP READINGS AT ALL, ENTER 996
Range:001..999

**[Dias]** *(variable names dias1om – dias4om)*
ENTER (AVERAGE/FIRST/SECOND/THIRD) DIASTOLIC READING (mmHg).
IF READING NOT OBTAINED, ENTER 999.
Range:001..999

**[Pulse]** *(variable names pulse1om –pulse4om)*
ENTER (AVERAGE/FIRST/SECOND/THIRD) PULSE READING (bpm).
IF READING NOT OBTAINED, ENTER 999.
Range:001..999

**[MAP]** *(variable names map1om –map4om)*

**IF NO FULL MEASUREMENT OBTAINED (at least one '999' reading in all 3 sets of 3 readings) THEN**
**[YNoBP]**
ENTER REASON FOR NOT RECORDING ANY FULL BP READINGS
1    Blood pressure measurement attempted but not obtained
2    Blood pressure measurement not attempted
3    Blood pressure measurement refused

**ALL SAMPLE B Age 16+ (EXCEPT PREGNANT WOMEN)**
**[RespBPS]**
Response to Blood Pressure measurements:
1    Three Blood pressure measurements
2    Two Blood pressure measurements
3    One Blood pressure measurements
4    Tried
5    Not tried
6    Refused

**IF BLOOD PRESSURE MEASUREMENT REFUSED OR NOT ATTEMPTED, OR FEWER THAN THREE FULL READINGS OBTAINED (IF RespBPS in [Two … Refused]) THEN**
**[NAttBPD]**
RECORD WHY (ONLY TWO READINGS OBTAINED/ONLY ONE READING OBTAINED/READING NOT OBTAINED/READING NOT ATTEMPTED/READING REFUSED/UNABLE TO TAKE READING).
CODE ALL THAT APPLY.

| | | |
|---|---|---|
| 0 | Problems with PC | [NAttBPD0] |
| 1 | Respondent upset/anxious/nervous | [NAttBPD1] |
| 2 | Error reading | [NAttBPD2] |
| 5 | Other reason(s) (specify at next question) | [NAttBPD5] |
| 6 | Problems with cuff fitting/painful | [NAttBPD6] |
| 7 | Problems with equipment (not error reading) | [NAttBPD7] |

**IF NattBP = Other THEN**
    **[OthNBP]***
    ENTER FULL DETAILS OF OTHER REASON(S) FOR NOT OBTAINING/ATTEMPTING
    THREE BP READINGS:
    Text: Maximum 140 characters

**IF ONE, TWO OR THREE FULL BLOOD PRESSURE READINGS OBTAINED (IF RespBPS in [Three … One]) THEN**
    **[DifBPC]**
    RECORD ANY PROBLEMS TAKING READINGS. CODE ALL THAT APPLY.

| | | |
|---|---|---|
| 1 | No problems taking blood pressure | [DifBPC1] |
| 2 | Reading taken on left arm because right arm not suitable | [DifBPC2] |
| 3 | Respondent was upset/anxious/nervous | [DifBPC3] |
| 4 | Other problems (SPECIFY AT NEXT QUESTION) | [DifBPC4] |
| 5 | Problems with cuff fitting/painful | [DifBPC5] |
| 6 | Problems with equipment (not error reading) | [DifBPC6] |
| 7 | Error reading | [DifBPC7] |

**IF DifBP=Other THEN**
    **[OthDifBP]***
    RECORD FULL DETAILS OF OTHER PROBLEM(S) TAKING READINGS.
    Text: Maximum 140 characters

    **[BPOffer]***
    OFFER BLOOD PRESSURE RESULTS TO RESPONDENT

| | Systolic | Diastolic | Pulse |
|---|---|---|---|
| Avg) | (Average Systolic reading) | (Average Diastolic reading) | (Average Pulse reading) |
| i) | (First Systolic reading) | (First Diastolic reading) | (First Pulse reading) |
| ii) | (Second Systolic reading) | (Second Diastolic reading) | (Second Pulse reading) |
| iii) | (Third Systolic reading) | (Third Diastolic reading) | (Third Pulse reading) |

    ENTER THESE ON RESPONDENT'S MEASUREMENT RECORD CARD (COMPLETE NEW RECORD CARD IF REQUIRED).

ADVICE TO RESPONDENTS ON BLOOD PRESSURE READING:

**IF Systolic reading >179 OR Diastolic reading >114 THEN**
    TICK THE CONSIDERABLY RAISED BOX AND READ OUT TO RESPONDENT: Your blood pressure is high today. Blood pressure can vary from day to day and throughout the day so that one high reading does not necessarily mean that you suffer from high blood pressure. You are strongly advised to visit your GP within 5 days to have a further blood pressure reading to see whether this is a once-off finding or not.

**IF Systolic reading 160-179 OR Diastolic reading 100-114 THEN**
    TICK THE RAISED BOX AND READ OUT TO RESPONDENT: Your blood pressure is a bit high today. Blood pressure can vary from day to day and throughout the day so that one high reading does not necessarily mean that you suffer from high blood pressure. You are advised to visit your GP within 2-3 weeks to have a further blood pressure reading to see whether this is a once-off finding or not.

**IF Systolic reading 140-159 OR Diastolic reading 85-99 THEN**
TICK THE MILDLY RAISED BOX AND READ OUT TO RESPONDENT: Your blood pressure is a bit high today. Blood pressure can vary from day to day and throughout the day so that one high reading does not necessarily mean that you suffer from high blood pressure. You are advised to visit your GP within 3 months to have a further blood pressure reading to see whether this is a once-off finding or not.

**IF Systolic reading <140 AND Diastolic reading <85 THEN**
TICK THE NORMAL BOX AND READ OUT TO RESPONDENT: Your blood pressure is normal.

# Waist Circumference

**ASK ALL SAMPLE B 16+ (EXCEPT PREGNANT WOMEN) where HHMode=1**
**[WHMod]***
INTERVIEWER: NOW FOLLOWS THE WAIST CIRCUMFERENCE MEASUREMENT.
ENTER '1' TO CONTINUE
1    Continue

**[WIntro]**
Now I would like to measure the circumference of your waist. The waist circumference is a measure of the distribution of body fat, provides important additional information and is a predictor of health risk.

You will need to be standing for this measurement. I will ask you to identify where on your body your tummy button is, and I will then ask you to place this measuring tape around your waist, over your clothing, at the level of your tummy button. Once the tape measure is level around your waist I will ask you to take a normal breath and then breathe out. I will then record the measurement. I will take at least two measurements.
Are you willing for me to take this measurement?

INTERVIEWER CODE:
1    Respondent agrees to have waist measured
2    Respondent refuses to have waist measured
3    Unable to measure waist for reason other than refusal

**IF (WIntro=Agree) THEN**
**Repeat for up to three waist measurements.**
**Third measurement taken only if difference between first two measurements is greater than 3cm.**

**[Waist]** *(variable names Waist1 to Waist3)*
INTERVIEWER: MEASURE THE WAIST CIRCUMFERENCES TO THE NEAREST MM.
ENTER (FIRST/SECOND/THIRD) WAIST MEASUREMENT IN CENTIMETRES (Remember to include the decimal point).
IF MEASUREMENT NOT OBTAINED, ENTER '999.9'.
Range: 45.0..1000.0

**IF WIntro in [1..3] THEN**
*(computed from WIntro, Waist)*
**[RespW] RespWH**
Response to waist measurements:
1    Both measurements obtained
2    One measurement obtained
3    Refused
4    Not tried

**IF (Waist1 = 999.9) OR (Waist2 = 999.9) THEN**
    **[YNoW] YNoWH**
    **ENTER REASON FOR NOT GETTING BOTH MEASUREMENTS**
1    Both measurements refused
2    Attempted but not obtained
3    Measurement not attempted

**IF NO OR ONE MEASUREMENT OBTAINED ((WHIntro=Refuse OR Unable) OR Only one waist measurement obtained) THEN**
    **[WPNABM]**
    GIVE REASON(S) (FOR REFUSAL/WHY UNABLE/FOR NOT OBTAINING MEASUREMENT/FOR NOT ATTEMPTING/WHY ONLY ONE MEASUREMENT OBTAINED).CODE ALL THAT APPLY.
1    Respondent is in a wheelchair        [WPNABM1]
2    Respondent is confined to bed        [WPNABM2]
3    Respondent is too stooped        [WPNABM3]
4    Respondent did not understand the procedure    [WPNABM4]
5    Respondent is embarrassed/sensitive about their size    [WPNABM5]
6    No time/busy/already spent enough time on this survey    [WPNABM6]
7    Other (SPECIFY AT NEXT QUESTION)    [WPNABM7]

**IF WHPNABM = Other THEN**
    **[OthWH]***
    GIVE FULL DETAILS OF 'OTHER' REASON(S) FOR NOT GETTING FULL WAIST MEASUREMENT:
    Text: Maximum 140 characters

**IF AT LEAST ONE WAIST MEASUREMENT OBTAINED (IF (Waist1 <> 999.9 AND Waist1 <> EMPTY) OR (Waist2 <> 999.9 AND Waist2 <> EMPTY)) THEN**
    **[WJRel]**
    RECORD ANY PROBLEMS WITH WAIST MEASUREMENT:
1    No problems experienced, RELIABLE waist measurement
2    Problems experienced - waist measurement likely to be RELIABLE
3    Problems experienced - waist measurement likely to be SLIGHTLY UNRELIABLE
4    Problems experienced - waist measurement likely to be UNRELIABLE

**IF WJRel = Problems experienced THEN**
    **[ProbWJ]**
    RECORD WHETHER PROBLEMS EXPERIENCED ARE LIKELY TO INCREASE OR DECREASE THE WAIST MEASUREMENT.
1    Increases measurement (e.g. bulky clothing)
2    Decreases measurement (e.g. very tight clothing)
3    Measurement not affected

**IF ONE OR TWO WAIST/HIP MEASUREMENTS OBTAINED THEN**
    **[WHRes]***
    OFFER TO WRITE RESULTS OF WAIST MEASUREMENTS, WHERE APPLICABLE, ONTO RESPONDENT'S MEASUREMENT RECORD CARD.
    Waist: (Write in waist measurements 1 and 2)
1    Continue

# Saliva sample

**ASK ALL SAMPLE B 16+ (EXCEPT PREGNANT WOMEN) where HHMode=1**

**[SalInt1]***
INTERVIEWER: NOW FOLLOWS THE SALIVA SAMPLE.
1    Continue

**[Smoke]**
Can I just check, do you smoke cigarettes, cigars or a pipe at all these days?
CODE ALL THAT APPLY
INTERVIEWER: If respondent used to smoke but does not any more, code 'No'.
1    Yes, cigarettes                                                  [Smoke1]
2    Yes, cigars                                                      [Smoke2]
3    Yes, pipe                                                        [Smoke3]
4    No                                                               [Smoke4]

**IF Smoke = No THEN**
**[SmokeYr]**
Have you smoked in the last 12 months?
1    Yes
2    No

**ASK ALL SAMPLE B 16+ (EXCEPT PREGNANT WOMEN)**
**[UseNRTB]**
SHOW CARD R1
Have you used any of the following products in the **last seven days**?
CODE ALL THAT APPLY
1    Yes, nicotine gum                                                [UseNRTB1]
2    Yes, nicotine patches that you stick on your skin                [UseNRTB2]
3    Yes, nasal spray/nicotine inhaler                                [UseNRTB3]
4    Yes, lozenge/microtab                                            [UseNRTB4]
5    Yes, Champix/Varenicline                                         [UseNRTB5]
6    Yes, Zyban/Bupropion                                             [UseNRTB6]
7    Yes, electronic cigarette/vaping device                         [UseNRTB7]
8    Yes, other                                                       [UseNRTB8]
9    No                                                               [UseNRTB9]

**IF UseNRTB = Yes, other THEN**
**[NRTOthB]***
What other products did you use?
Text: Maximum 140 characters

**[SalIntr1]**
INTERVIEWER: ASK RESPONDENT FOR A SALIVA SAMPLE.
READ OUT: I would like to take a sample of saliva (spit). This simply involves chewing on some dental roll.  The sample will be analysed for cotinine and anabasine. Cotinine is related to the intake of tobacco smoke and is of particular interest to see if non-smokers may have raised levels as a result of 'passive' smoking. Anabasine can help to differentiate between whether cotinine has come from tobacco or other sources, as anabasine is only present in tobacco and not in Nicotine Replacement Therapies or E-Cigarettes.

IF ASKED: It is useful to know about the levels of cotinine and anabasine in both smokers and non-smokers in order to provide national data on the presence of these.

1     Respondent agrees to give saliva sample
2     Respondent refuses to give saliva sample
3     Unable to obtain saliva sample for reason other than refusal

**IF SalIntr1=Agree THEN**
      **[SalWrit]***

Serial number: XXXXX
Person number: XX
Date of Birth: XX/XX/XX

INTERVIEWER CHECKLIST FOR CONSENT BOOKLET:
1. Enter Serial No at top of page 1 and page 3
2. Obtain respondent signature on page 3.
3. Sign and date page 3 yourself.
4. Complete interviewer and respondent details on page 1.
5. Circle code XX at question 7 on page 1 of the Consent Booklet.
6. Turn to lab dispatch note (on Page 4) and circle each of the following:
      At Q3 - Code X at smoking status [Routing as has always been based on variable Smoke]
      At Q4 - Code X at e-cigarette use [DISPLAY 1 IF UseNRTB7 = 1, OTHERWISE DISPLAY 2]
      At Q5 Code X at nicotine replacement therapy [DISPLAY 1 IF UseNRTB1-6 = 1 or NRTB8 = 1, OTHERWISE DISPLAY 2]

1     Continue

**[SalInst]***
ASK RESONDENT TO CHEW ON DENTAL ROLL (DRIBBLE INTO TUBE)
WRITE THE SERIAL NUMBER AND DATE OF BIRTH ON THE BLUE LABEL USING A BLUE BIRO
SERIAL NO (Displays serial number)
PERSON NO (Displays person number)
DATE OF BIRTH (Displays date of birth)
INTERVIEWER: The saliva label goes around the outer tube (not lengthways)
1     Continue

**[SalObt1]**
INTERVIEWER CHECK
1    Saliva sample obtained
2    Saliva sample refused
3    Saliva sample not attempted
4    Attempted but not obtained

**IF SalObt1 = Obtained THEN**
    **[SalCod1]\***
    **INTERVIEWER: PLEASE CIRCLE CODE 1 'YES' AT QUESTION 6 IN THE DISPATCH NOTE (PAGE 4 OF THE CONSENT BOOKLET)**

    **[SalHow]**
    INTERVIEWER: Code the method used to obtain the saliva sample.
1    Dribbled into tube
2    Dental Roll

**IF (SalObt1= Not attempted or Attempted, not obtained) OR (SalIntr1=Unable) THEN**
    **[SalNObt]**
    RECORD WHY SALIVA SAMPLE NOT OBTAINED. CODE ALL THAT APPLY.
3    Respondent not able to produce any saliva    [SalNObt3]
4    Other (SPECIFY AT NEXT QUESTION)    [SalNObt4]

**IF SalNObt = Other THEN**

    **[OthNObt]***

    GIVE FULL DETAILS OF REASON(S) WHY SALIVA SAMPLE NOT OBTAINED.

    Text: Maximum 140 characters

    **[SalCode]**

    INTERVIEWER: Circle 02 at question 7 on page 1 of the Consent Booklet.

    INTERVIEWER: Please ensure you complete all of page 1 in the Consent Booklet.

    The respondent's date of birth is (displays DOB)

1    Continue

**IF SalIntr1=Refused THEN**

    **[SalYRef]**

| | | |
|---|---|---|
| 1 | Embarrassed/sensitive about providing a samples | [SalYRef1] |
| 2 | Knows they would have difficulty providing a sample | [SalYRef2] |
| 3 | No time/busy/already spent enough time on this survey | [SalYRef3] |
| 4 | Doesn't like the thought of doing it | [SalYRef4] |
| 5 | Concerns about how sample will be used/store | [SalYRef5] |
| 6 | Respondent did not understand the procedure | [SalYRef6] |
| 9 | Other (SPECIFY AT NEXT QUESTION) | [SalYRef9] |

**IF SalYRef = other THEN**

    **INTERVIEWER: WRITE IN OTHER REASON FOR REFUSAL**

    **Text: Maximum 140 characters**

    **[SalCode]***

    INTERVIEWER: Circle code 02 at question 7 on page 1 of the Consent Booklet.

    INTERVIEWER: Please ensure you complete all of page 1 in the consent booklet.

    The respondent's date of birth is (displays DOB)

1    Continue

# Final

**[BioEnd]***
Those are all the questions I wanted to ask you.
INTERVIEWER: MAKE SURE THE RESPONDENT HAS:
- COPIES OF THEIR CONSENT FORM
- MEASUREMENT RECORD CARD
- USEFUL CONTACTS LEAFLET

**[BioEnd2]***
INTERVIEWER: Before you leave make sure you have:
    1. Office copies of consent form
    2. Labeled the samples
    3. Completed the dispatch note
    4. Included dispatch note in envelope with samples

INTERVIEWER: PRESS <Ctrl Enter> RETURN TO THE INDIVIDUAL SESSION TO COLLECT PHONE NUMBER BEFORE FINISHING OR TO OPEN ANOTHER BIOMODULE SESSION FOR THE NEXT RESPONDENT.

**[EndReach]***
INTERVIEWER: End of questionnaire reached.
Press <1> and <Enter> to continue.
1     Continue

**[Thank]***
INTERVIEWER: Thank respondent for his/her co-operation.
Then press <1> and <Enter> to finish.
1     Continue

# Consents

**ASK ALL**

**[InfoLeaf]**

IMPORTANT: PLEASE MAKE SURE THAT ALL RESPONDENTS HAVE RECEIVED A COPY OF THE SHES INFORMATION LEAFLET PLEASE REMIND RESPONDENTS AT THIS POINT THAT THIS CONTAINS MORE INFORMATION ABOUT HOW THEIR INFORMATION IS USED AND GIVE THEM A CHANCE IF THEY WANT TO READ IT AGAIN OR ASK ANY QUESTIONS.

**[LinkOp]**

Please select the first names of any household members that opted themselves out of NHS data linkage after reading the information leaflet.

AS PER THE INSTRUCTIONS PLEASE NOTE YOU WERE NOT EXPECTED TO ASK THEM ABOUT THIS SO YOU ONLY NEED TO RECORD HERE IF ANY RESPONDENTS MENTIONED TO YOU THAT THEY WANT TO BE OPTED OUT.

INTERVIEWER: If a parent/guardian has opted out of data linkage on behalf of their child, the name of the child should be selected below.

**Health Record linkage**

**Ask if READCON=2,3**

**[LinkInf]**

Survey answers will be linked to some information from NHS health records on:

- any visits to hospital and length of stays.

-COVID-19 positive test results (subject to Public Benefit and Privacy Panel approval)

- Information about diagnosis, treatments and hospital stays for cancer, heart disease, stroke, diabetes and psychiatric episodes.

- Details about registration with a general practitioner and, when someone passes away, the date and cause of death.

This is done in such a way that no data which can identify you or any other individual is released, and really increases the value of the information you provide. If you do not want your survey results to be linked to your health records in this way, please tell me.

The Public Benefit and Privacy Panel will review the process for linkage of the survey data with information from the NHS health records.

Press 1 and enter to continue

**ASK ALL**

INSERT THE QUESTION FROM ADMIN BLOCK HERE ON OPT-OUTS

SG consent

**ASK ALL**

**Add {textfills} if asked [ReadOut]**

**[FolRes]**

In the future, the Scottish Government may want to commission follow-up research among particular groups of the public to improve public policies and services. {More information about this can be found in the letter and leaflet sent to your address and on the survey website.}

If you give your permission, your name, contact details and relevant survey answers may be passed on to the Scottish Government or research agencies for the purpose of further research among particular groups of people to improve health or health services.

Please be assured that any information you provide for this purpose will be released for statistical and research purposes only carried out by reputable research organisations and that your confidentiality will be protected in the publication of any results given.

{Any information passed to any other organisation will be treated in accordance with data protection legislation and will not be used for any purposes other than further research about health or health services.}

If you are invited to take part in any future studies you will be free to refuse if you do not want to take part.

You can cancel this permission at any time in the future by contacting the researchers at ScotCen, using the details provided in the Information Leaflet or on the survey website: www.scottishhealthsurvey.org

**ASK ALL**
**[FolResA]**
Would you be willing to have your name, contact details and relevant answers you have given during the interview passed on to the Scottish Government or other research agencies acting on behalf of, or in collaboration with, the Scottish Government for this purpose?

1      Consent given
2      Consent refused

**ASK ALL AGED 16+ (IF FolResA = 1)**
**[ReIntEmA]**
In addition to the other contact details provided during this interview, would you be willing to provide us with your email address so that we can pass this on to the Scottish Government or other research agencies with the permission of the Scottish Government to contact you about taking part in follow-up research? This will only be used for research purposes as previously explained.

IF YES: Please note that we can only accept an email address that is yours and not someone else's? It is fine if both yourself and someone else use the same email address.

INTERVIEWER: IF TWO OR MORE PEOPLE SHARE AN EMAIL ADDRESS, CODE THE AS 'OWN' EMAIL ADDRESS.

1. Yes – respondent's own email address,
2. Email address refused
3. No one in household has email address

**ASK IF ReIntEmA = 1**
> **[EmailA]**
> What is the email address?
> INTERVIEWER: TYPE IN EMAIL ADDRESS.
> : STRING[60]
>
> **[EmailChk]**
> INTERVIEWER: Read out the emali below to check that it is correct.
>
> **[Display email address entered at *EmailA*]**
>
> 1. Email address correct
> 2. Email address not correct
>
> IF EmailChk=2, HARD CHECK: INTERVIEWER: RETURN TO EMAILA AND RE-ENTER THE EMAIL ADDRESS

# Thank you section

**[ASK ALL]**

**[Thankyou]**
As a thank you, everyone that takes part receives a £10 high street voucher. We'd like to email this to you.
> 1      Respondent happy to have voucher emailed
> 2      Respondent asks for voucher to be posted (INTERVIEWER - do not read out as an option)
> 3      Respondent refuses voucher

**Ask if ThankYou=1 AND ReIntEmA=1 and EmailChk=1**
**[EmailThk]**
> Is it okay to send it to the email address you just provided?

**[Display email address entered at *EmailA*]**
> 1      Yes
> 2      No

**Ask if ThankYou=1 AND ReIntEA=2,3**
**ReIntEmb**
Do you have an email address we can email your £10 voucher to?
> 1.  Yes – respondent's own email address,
> 2.  Email address refused
> 3.  No one in household has email address

**Ask if <16**
**VDeConA**
"@/^IName[PNo], please can you check, is your parent or guardian happy for you to be sent the voucher directly?"
: YesNo, NODK

**ASK IF ReIntEmB = 1**
**[EmailB]**
What is the email address?
INTERVIEWER: TYPE IN EMAIL ADDRESS.
: STRING[60]

**[EmailChkB]**
INTERVIEWER: Read out the email below to check that it is correct.

**[Display email address entered at *EmailB*]**

1. Email address correct
2. Email address not correct

IF EmailChkB=2, HARD CHECK: INTERVIEWER: RETURN TO EMAILB AND RE-ENTER THE EMAIL ADDRESS

**ASK IF ReIntEmB=2,3 OR ThankYou=2**
**[PostVouch]**
That's okay. We will post the voucher to your address.
1       Respondent happy to have voucher posted
2       Respondent doesn't want a voucher

**ASK (if ThankYou=1 and EmailChk=1) OR (ThankYou=1 and EmailChkB=1) OR (PostVouch=1)**
**[ThankSoon]**
It can take up to three weeks for your voucher to arrive, but it may come quicker than this.
INTERVIEWER: Press 1 and Enter

**Name checks**
**[ASK ALL]**

**[FstNm]**
INTERVIEWER: At the Household Grid you recorded the first name of this person as:
    <person name>
Is this the respondents full, complete, first name (i.e. not initials, not abbreviated, not a nickname)?
ASK IF NECESSARY: Can I check, is <person name> your complete first name?
    1   Yes, complete first name recorded at Household Gird
    2   No, complete first name not yet recorded

**ASK IF FstNm = No**
**[NewNm]**
INTERVIEWER: Please type in the complete first name of this person

**[Ttl]**
INTERVIEWER: Code the title of <person name>
    1   Mr
    2   Mrs
    3   Miss
    4   Ms
    5   Mx (gender neutral – pronounced 'mix' or 'mex'
    6   Dr
    7   Prof
    8   Rev
    9   None of the above

**[Initl]**
INTERVIEWER: Enter the initials (up to two) of <person name>

**[Surname]**
INTERVIEWER: Enter the surname of <person name>

**[TPhoneN]**
Some interviews in a survey are checked to make sure that people like yourself are satisfied with the way the interview was carried out. Just in case yours is one of the interviews that is checked, it would be helpful if we could use the phone number(s) that you provided when you opted in for this purpose. This telephone number will also be used to contact those that consented to be contacted for follow-up research.
    1   Agree for number to be used for these purposes
    2   Don't agree for number to be used for these purposes

**[Thank]**
That is the end of the interview. Thank you for your help.
    1    Continue