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Chapter 1
Methodology and Response
CHAPTER 1: METHODOLOGY AND RESPONSE

Ben Cook, Isla Dougall, Lucy Dean and Xanthippi Gounari

1.1 INTRODUCTION

1.1.1 The Scottish Health Survey series

The Scottish Health Survey (SHeS) series was established in 1995 to provide data about the health of the population living in private households in Scotland. It was repeated in 1998 and 2003 and has been carried out annually since 2008.

The 2018-2021 surveys are being conducted by ScotCen Social Research in collaboration with the Office for National statistics (ONS), the Social and Public Health Sciences Unit (MRC/CSO SPHSU) at the University of Glasgow, the Centre for Population Health Sciences at the University of Edinburgh and the Public Health Nutrition Research Group at the University of Aberdeen.

1.1.2 Aims of the Scottish Health Survey

The purpose of SHeS is to provide information at the national level about the health of the population and the ways in which lifestyle factors are associated with health. This level of information is not available from administrative or operational databases, as hospitals and GPs are not able to collect detailed information about peoples’ lifestyles and health-related behaviours. In addition, it is crucial that the Scottish Government has information about the health of the population, including people who do not access health services regularly.

The specific aims of SHeS are:

- To estimate the prevalence of particular health conditions in Scotland.
- To estimate the prevalence of certain risk factors associated with these health conditions and to document the pattern of related health behaviours.
- To look at differences between regions and between subgroups of the population in the extent of their having these particular health conditions or risk factors, and to make comparisons with other national statistics for Scotland and the rest of Britain.
- To monitor trends in the population’s health and health related behaviour over time.
- To make a major contribution to monitoring progress towards health targets.

Each year, the survey consists of a set of core questions and measurements (height and weight measurements and, if applicable, a measure of blood pressure and waist circumference, and analysis of a saliva sample), plus modules of questions on specific health conditions.
As with the earlier surveys in the series, the principal focus of the 2018-2021 surveys remains cardiovascular disease (CVD) and related risk factors. CVD is one of the leading contributors to the global disease burden. Its main components are ischaemic heart disease (IHD) and stroke. Although the number of deaths by IHD has reduced over recent years, it remains one of the most common causes of death in Scotland².

The SHeS series now has trend data going back 23 years and providing this time series is an important function of the survey.

1.1.3 Key changes to the survey methodology in 2012

A number of changes to the survey methodology were introduced following the 2011 Scottish Government review of Scotland’s major household surveys. The key changes to SHeS introduced in 2012 for the 2012-2017 surveys were:

- Sample of addresses drawn by the Scottish Government.
- Inclusion of a set of harmonised core questions asked across the three major Scottish Government household surveys³.
- Reduction in the achieved sample size.
- Discontinuation of a module of questions on Knowledge, Attitudes and Motivations (KAM) to health.
- Introduction of interviewer administered biological samples and measurements to replace the nurse interview.

These changes are discussed in greater detail in the Scottish Health Survey 2012: Volume 2 Technical Report⁴ and in the Scottish Health Survey Questionnaire Review Report 2012-2015⁵.

1.1.4 Key changes to the survey methodology in 2018

A number of changes were introduced in light of the 2017 Scottish Government review of the Scottish Surveys Core Questions⁶, and following the 2016 Scottish Government consultation on the Scottish Health Survey questionnaire content⁷ which was published in Spring 2017. The key changes implemented in 2018 for the 2018-2021 surveys include:

- Increased sample size allowing for analysis at Local Authority level by 2021.
- Removal of local police force, contraception and cosmetic procedures questions.
- Removal of urine sample from the biological module.
- A number of modules will no longer appear in the questionnaire each year, but will appear approximately every 2 years: gambling, problem drinking, dental health services, parental history, respiratory health, CPR training and use of health services.
- New questions introduced asked about satisfaction with key public services, Nicotine Replacement Therapy (NRT), asthma, type of diabetes and gender identity.
These changes are discussed in greater detail in section 1.3 below and also in the Scottish Health Survey Report of Questionnaire Changes from 2018. The final questionnaire documentation for 2018 can be found in Appendix A of the Scottish Health Survey 2018 Technical Report.

1.1.5 The 2018 survey

The 2018 Scottish Health Survey was designed to provide data at national level about the population living in private households in Scotland. The survey covered all ages.

The sample size for the 2018 survey increased by approximately 30% compared with the 2012-2017 surveys. ScotCen Social Research enlisted the Office for National Statistics (ONS) to assist with the interviewing for the duration of the 2018-2021 contract. As a result, ONS were allocated approximately 30% of the sampled addresses.

A sample of 11,801 addresses was drawn from the Postcode Address File (PAF) in 2018. These addresses comprised four sample types: main (core) sample with biological measures, main (core) sample without biological measures, Child Boost screening sample, and Health Board Boost sample. Fife opted to boost the number of adults (16+) interviewed in their area in 2018. The table below shows the number of addresses drawn for each sample type and the people eligible for interview within each sample type.

The 11,801 addresses were grouped into 563 interviewer assignments, with around 47 assignments being issued to interviewers each month between January and December 2018.

<table>
<thead>
<tr>
<th>Sample type</th>
<th>Number of addresses issued in 2018</th>
<th>Eligible for interview</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main (core non-bio)</td>
<td>4,053</td>
<td>Max of 10 adults (age 16+) and 2 children (age 0-15)</td>
</tr>
<tr>
<td>Main (core bio)</td>
<td>2,027</td>
<td>Max of 10 adults (age 16+) and 2 children (age 0-15) with only adults eligible to take part in the bio module</td>
</tr>
<tr>
<td>Child Boost</td>
<td>5,448</td>
<td>Only households containing children aged 0-15 were eligible to participate (up to two children at these households were eligible to be interviewed)</td>
</tr>
<tr>
<td>Health Board Boost</td>
<td>273</td>
<td>Adults only (age 16+) (Max of 10)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>11,801</td>
<td></td>
</tr>
</tbody>
</table>
Data collection involved a main computer assisted interview (CAI), a paper self-completion questionnaire, height and weight measurements and, if applicable, adults also completed the biological module. The main core sample consisted of 6,080 addresses, 2,027 of which were allocated to the biological module sample. At the biological module addresses, all adults (16+) that participated in the main interview were eligible to take part in the biological module. Only interviewers that were specially trained in administering biological measures and samples were allocated to work on these addresses.

1.1.6 The 2018 SHeS annual report

The 2018 report consists of two volumes, published as a set under ‘The Scottish Health Survey 2018’. Volume 1 presents results for adults and children on a variety of health topics. This report (Volume 2) provides methodological information and survey documentation. Both volumes are available on the Scottish Government’s website along with a short summary report of the key findings from the 2018 survey (https://www2.gov.scot/scottishhealthsurvey) Supplementary web tables are also available on this website. These provide a large number of breakdowns by age group, deprivation, income and limiting long-term conditions.

1.1.7 Comparisons with previous surveys in the SHeS series

In the 2018 report comparisons are made with data collected earlier in the series (1998-2017 for children and 2003-2017 for adults). Having such an extensive trend period makes it possible to comment on whether any changes in health behaviours identified between years were real or an instance of sample fluctuation.

In addition, this report includes analysis from a number of combined datasets: one for the years 2015 to 2018 combined, one for the years 2017 and 2018 combined to aid analysis of small subsamples of the population, and one for the years 2016 and 2018 for the analysis of questions which are included in the survey every second year. Combining data across years in this way allows for a more detailed analysis of subgroups in the sample and allows for analysis of questions with small sample sizes in one survey year. For example, questions on anxiety and depression are only asked as part of the biological sample and so result in a small sample size annually. Tables in the report indicate whether the figures presented are based on a single year’s data or combined data across survey years.

1.1.8 Health Board level analysis

Since 2008, the SHeS sample has been designed to be representative of adults at Health Board level (for all Health Boards) following four years of data collection. Analysis of the 2015 to 2018 data by NHS Health Board and by local authority for those authorities where the sample size is large enough is published at the same time as this report, and is available on the SHeS website (https://www2.gov.scot/scottishhealthsurvey). Health Boards with larger
samples may be able to analyse data at their Health Board level based on fewer years of data collection and users should consult the SHeS website for further guidance on sub-geographies analysis.

Changes in the sample design for the 2012 survey mean that users are not advised to combine data for periods spanning 2011 and 2012. Going forwards, however, the sample has been designed to be representative of the population of Scotland at Health Board level for every four-year period. Hence the survey can be analysed using combined data from 2012 to 2015, 2013 to 2016, 2014 to 2017 or 2015 to 2018.

1.1.9 Local Authority level analysis
From 2018 onwards, the SHeS sample has been designed to be representative of adults at Local Authority level following four years of data collection. Thus, the data will be representative of adults at Local Authority level from 2021. Until then, the data remains representative at Health Board level as discussed above. The exception to this are those Local Authorities where the sample size is large enough before four years of data have been collected.

1.1.10 Access to SHeS data
Data from the 2018 survey will be deposited at the UK Data Service along with a combined 2015-2018 dataset, a combined 2016/2018 dataset and a combined 2017/2018 dataset. Datasets from earlier years in the series are also deposited here (www.ukdataservice.ac.uk).

1.2 SAMPLE DESIGN

1.2.1 Requirements
The sample specification for the 2018 SHeS was designed by the Scottish Government. The design was coordinated with the designs for the Scottish Household Survey (SHS) and the Scottish Crime and Justice Survey (SCJS) as part of a survey efficiency project and to allow the samples of the three surveys to be pooled for further analysis.

There were three elements to the SHeS sample in 2018:

1) Main adult sample - to allow annual reporting of Scotland level results and results at Health Board level at the end of four-year cycles (e.g. 2015-2018). This required an annual interview target of 5,112 adults for Scotland as a whole and a minimum of 125 for each Local Authority. There was an additional requirement for a minimum of 1,000 adults to complete each biological measure each year.

2) Child sample boost – overall there was a requirement for 2,031 child interviews for Scotland. As the main sample was only
expected to yield 1,026 child interviews, a further 1,005 interviews were required from a separate boost sample.

3) Health Board Boosts – in 2018, Fife Health Board commissioned a boost to increase the number of adult interviews in their Board area. Fife Health Board specified a target of 241 additional interviews.

1.2.2 Sample design and assumptions
For all three elements a two-stage clustered sample design with intermediate geographies randomly selected at the first stage and address points at the second stage, was used. With the exception of Orkney, Shetland and Na h-Eileanan Siar councils, the sample was clustered by intermediate geographies (IG) with one quarter of IGs selected for each year of fieldwork. This means that over four years of fieldwork all IGs are included in the sample and the combined 2015-2018 sample will be un-clustered. In Orkney, Shetland and Na h-Eileanan Siar the sample was clustered by data zone.

1.2.3 Main sample
As stated above, the annual sample size for Scotland was 5,112 adults with a minimum Local Authority sample size of 125 adults. These sample sizes were the minimum required to allow effective reporting of Scotland-level results annually and Health Board results at the end of the four-year cycle. An iterative approach was taken to efficiently allocate the sample across all Health Boards. For the first iteration 4,000 adult interviews were allocated across Local Authorities in proportion to the adult population. Any Local Authorities allocated fewer than 125 adult interviews had their allocation increased to 125.

The remaining sample was then allocated over the remaining Local Authorities. Where allocations were not whole numbers the number was rounded up. This resulted in a total target of 5,112 adult interviews. The results of the allocation are shown in Figure 1A.
To allow for reporting at Local Authority level over a four-year period and coordination with the sample selection of the SHS and SCJS, the required sample sizes were set at Local Authority level. This was done by allocating the target Health Board samples to Local Authorities proportionate to population.

The number of addresses selected in order to provide the target number of interviews was calculated by:

1) Estimating the number of productive adult interviews per cooperating household. Based on response data from the surveys between 2012 and 2015, it was estimated that for Greater Glasgow and Clyde there would be 1.45 interviews per cooperating household, with 1.5 interviews in all other Health Boards.

2) Allocation of the target interviews and associated estimate of cooperating households to Local Authority strata proportionate to population.

3) The response rate assumptions for Local Authorities for 2018 were then based on the weighted average of responses for 2015, 2016 and 2017.

4) The final step was to estimate the level of ineligible addresses. The estimates were calculated at Local Authority level and based on the average level of ineligible addresses from SHeS, SHS, SCJS, and the Scottish House Condition Survey.

Figure 1E shows the number of selected addresses for the main sample in 2018.
1.2.4 Child boost sample

For the 2018 survey, 2,031 child interviews were required. It was estimated that the main sample would provide 1,026 child interviews, therefore, to reach the target number of child interviews, a child boost sample was required to yield a further 1,005 interviews.

The process for calculating the number of addresses to select for the child boost sample was as follows:

1) The child boost sample of 1,005 child interviews was allocated proportionally to local authorities based on the child (under 16) population. If the number expected from the child boost was less than 10, then the Local Authority boost target was set to zero. The following table shows the target sample sizes for the main sample and child boost sample by Health Board.

<table>
<thead>
<tr>
<th>Health Board</th>
<th>Expected child interviews from main sample</th>
<th>Child interviews from boost</th>
<th>Total child interviews</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ayrshire and Arran</td>
<td>75</td>
<td>70</td>
<td>145</td>
</tr>
<tr>
<td>Borders</td>
<td>25</td>
<td>21</td>
<td>46</td>
</tr>
<tr>
<td>Dumfries and Galloway</td>
<td>25</td>
<td>27</td>
<td>52</td>
</tr>
<tr>
<td>Fife</td>
<td>54</td>
<td>71</td>
<td>125</td>
</tr>
<tr>
<td>Forth Valley</td>
<td>75</td>
<td>60</td>
<td>135</td>
</tr>
<tr>
<td>Grampian</td>
<td>97</td>
<td>110</td>
<td>207</td>
</tr>
<tr>
<td>Greater Glasgow and Clyde</td>
<td>219</td>
<td>216</td>
<td>435</td>
</tr>
<tr>
<td>Highland</td>
<td>60</td>
<td>59</td>
<td>119</td>
</tr>
<tr>
<td>Lanarkshire</td>
<td>97</td>
<td>131</td>
<td>228</td>
</tr>
<tr>
<td>Lothian</td>
<td>149</td>
<td>163</td>
<td>312</td>
</tr>
<tr>
<td>Orkney</td>
<td>25</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td>Shetland</td>
<td>25</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td>Tayside</td>
<td>75</td>
<td>77</td>
<td>152</td>
</tr>
<tr>
<td>Western Isles</td>
<td>25</td>
<td>0</td>
<td>25</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,026</strong></td>
<td><strong>1,005</strong></td>
<td><strong>2,031</strong></td>
</tr>
</tbody>
</table>

2) The number of co-operating households with children required in each Health Board for the child boost sample was estimated using the performance of the child boost samples in the surveys between 2013 and 2015.

3) To estimate the proportion of child-less households, data from child boost samples between 2012 and 2015 was used. As there was little variation across different areas a Scotland level estimate of households without children (80%) was used.
4) Analysis of survey response to the child boost samples in the 2008 and 2009 surveys found that the response rate was consistently higher for the child boost than the main sample. Therefore, for each Local Authority area, the estimated response rates for the child boost sample were set at 6% higher than the main sample response rate.

5) The assumptions made on ineligible addresses for the main sample were applied to the address calculations for the Child Boost sample.

The total numbers of addresses selected for the Child Boost sample are shown in Figure 1E.

1.2.5 **Health Board Boost samples**

Each year individual Health Boards are given the opportunity to fund a boost sample to enable them to boost the number of adult interviews in their Board area. For the 2018 survey, Fife opted to boost the main sample in their areas. The following table shows the target sample size for each of the boosts.

**Figure 1D: Target sample for Health Board Boosts in 2018**

<table>
<thead>
<tr>
<th>Health Board</th>
<th>Target interviews for boost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fife</td>
<td>241</td>
</tr>
</tbody>
</table>

As the main sample was selected before boost areas were confirmed, boost samples were supplementary to the main sample. Fife Health Board requested that the combined main sample and boost sample was equally distributed across its three Community Health Partnership areas. This required an extra level of stratification for Fife before the process above could be followed. For the boost samples, and for samples drawn to addresses shortfalls over the four-year period, the same active PSUs as the main sample were used.
### Figure 1E: Selected addresses by strata in 2018

<table>
<thead>
<tr>
<th>Sample strata</th>
<th>Main sample</th>
<th>Health Board Boost</th>
<th>Child Boost</th>
<th>Total sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aberdeen City</td>
<td>222</td>
<td>-</td>
<td>217</td>
<td>439</td>
</tr>
<tr>
<td>Aberdeenshire</td>
<td>206</td>
<td>-</td>
<td>264</td>
<td>470</td>
</tr>
<tr>
<td>Angus</td>
<td>125</td>
<td>-</td>
<td>101</td>
<td>226</td>
</tr>
<tr>
<td>Argyll &amp; Bute</td>
<td>152</td>
<td>-</td>
<td>81</td>
<td>233</td>
</tr>
<tr>
<td>Clackmannanshire</td>
<td>153</td>
<td>-</td>
<td>55</td>
<td>208</td>
</tr>
<tr>
<td>Dumfries &amp; Galloway</td>
<td>137</td>
<td>-</td>
<td>135</td>
<td>272</td>
</tr>
<tr>
<td>Dundee City</td>
<td>141</td>
<td>-</td>
<td>138</td>
<td>279</td>
</tr>
<tr>
<td>East Ayrshire</td>
<td>129</td>
<td>-</td>
<td>113</td>
<td>242</td>
</tr>
<tr>
<td>East Dunbartonshire</td>
<td>136</td>
<td>-</td>
<td>104</td>
<td>240</td>
</tr>
<tr>
<td>East Lothian</td>
<td>159</td>
<td>-</td>
<td>120</td>
<td>279</td>
</tr>
<tr>
<td>East Renfrewshire</td>
<td>146</td>
<td>-</td>
<td>110</td>
<td>256</td>
</tr>
<tr>
<td>Edinburgh, City of</td>
<td>492</td>
<td>-</td>
<td>507</td>
<td>999</td>
</tr>
<tr>
<td>Eilean Siar</td>
<td>131</td>
<td>-</td>
<td>-</td>
<td>131</td>
</tr>
<tr>
<td>Falkirk</td>
<td>142</td>
<td>-</td>
<td>164</td>
<td>306</td>
</tr>
<tr>
<td>Fife</td>
<td>308</td>
<td>273</td>
<td>368</td>
<td>949</td>
</tr>
<tr>
<td>Glasgow City</td>
<td>584</td>
<td>-</td>
<td>619</td>
<td>1203</td>
</tr>
<tr>
<td>Highland</td>
<td>199</td>
<td>-</td>
<td>232</td>
<td>431</td>
</tr>
<tr>
<td>Inverclyde</td>
<td>149</td>
<td>-</td>
<td>81</td>
<td>230</td>
</tr>
<tr>
<td>Midlothian</td>
<td>161</td>
<td>-</td>
<td>110</td>
<td>271</td>
</tr>
<tr>
<td>Moray</td>
<td>128</td>
<td>-</td>
<td>89</td>
<td>217</td>
</tr>
<tr>
<td>North Ayrshire</td>
<td>136</td>
<td>-</td>
<td>129</td>
<td>265</td>
</tr>
<tr>
<td>North Lanarkshire</td>
<td>331</td>
<td>-</td>
<td>405</td>
<td>736</td>
</tr>
<tr>
<td>Orkney Islands</td>
<td>130</td>
<td>-</td>
<td>-</td>
<td>130</td>
</tr>
<tr>
<td>Perth &amp; Kinross</td>
<td>132</td>
<td>-</td>
<td>136</td>
<td>268</td>
</tr>
<tr>
<td>Renfrewshire</td>
<td>175</td>
<td>-</td>
<td>195</td>
<td>370</td>
</tr>
<tr>
<td>Scottish Borders</td>
<td>146</td>
<td>-</td>
<td>111</td>
<td>257</td>
</tr>
<tr>
<td>Shetland Islands</td>
<td>131</td>
<td>-</td>
<td>-</td>
<td>131</td>
</tr>
<tr>
<td>South Ayrshire</td>
<td>127</td>
<td>-</td>
<td>93</td>
<td>220</td>
</tr>
<tr>
<td>South Lanarkshire</td>
<td>299</td>
<td>-</td>
<td>352</td>
<td>651</td>
</tr>
<tr>
<td>Stirling</td>
<td>134</td>
<td>-</td>
<td>88</td>
<td>222</td>
</tr>
<tr>
<td>West Dunbartonshire</td>
<td>169</td>
<td>-</td>
<td>105</td>
<td>274</td>
</tr>
<tr>
<td>West Lothian</td>
<td>170</td>
<td>-</td>
<td>226</td>
<td>396</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6080</strong></td>
<td><strong>273</strong></td>
<td><strong>5448</strong></td>
<td><strong>11801</strong></td>
</tr>
</tbody>
</table>
1.2.6 Sample Selection

The Royal Mail’s small user Postcode Address File (PAF) was used as the sample frame for the address selection. The advantages of using the PAF are as follows:

- It has previously been used as the sample frame for Scottish Government surveys so previously recorded levels of ineligible addresses can be used to inform assumptions for 2018 sample design.
- It has excellent coverage of addresses in Scotland.
- The small user version excludes the majority of businesses.

The Assessor’s Portal, the council tax list of all dwellings in Scotland, was considered as an alternative sample frame but since it had not previously been used as a sample frame for large scale surveys in Scotland there would have been a greater risk attached to assumptions for response rates and ineligible addresses.

The PAF does still include a number of ineligible addresses, such as small businesses, second homes, holiday rental accommodation and vacant properties. A review of the previous performance of individual surveys found that they each recorded fairly consistent levels of ineligible address for each Local Authority. This meant that robust assumptions could be made for the expected levels of ineligible addresses in the sample size calculations.

As the samples for the SHS, SHeS and SCJS have all been selected by the Scottish Government since 2012, addresses selected for any of the surveys are removed from the sample frame so that they cannot be re-sampled for another survey. This helps to reduce respondent burden. The addresses are removed from the sample frame for a minimum of 4 years.

The sample design specified in Section 1.2 was implemented in three stages:

1. All primary sampling units (data zones on the islands, intermediate geographies elsewhere) were randomly allocated to one of the four years of fieldwork. This meant that the sample was drawn from one quarter of PSUs each year and ensured that over four years (2015 to 2018) of fieldwork all addresses had a non-zero probability of selection. One quarter of target adult sample was required to complete the biological module. To make fieldwork more efficient, rather than randomly allocating addresses from the entire survey to the module, each year PSUs were allocated to the biological module and all selected addresses within those PSUs were eligible for the biological interview. To guard against a lower response rate to the different elements of the biological module, and to correct for inaccurate response assumptions in previous years, a proportion higher
than the required one quarter of PSUs (37% in 2016) were allocated to the biological module.

### Figure 1F: Primary sampling units selected in 2018

<table>
<thead>
<tr>
<th>Health Board</th>
<th>PSUs in 2018 Sample</th>
<th>Total PSUs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ayrshire and Arran</td>
<td>23</td>
<td>92</td>
</tr>
<tr>
<td>Borders</td>
<td>7</td>
<td>29</td>
</tr>
<tr>
<td>Dumfries and Galloway</td>
<td>9</td>
<td>35</td>
</tr>
<tr>
<td>Fife</td>
<td>25</td>
<td>103</td>
</tr>
<tr>
<td>Forth Valley</td>
<td>18</td>
<td>74</td>
</tr>
<tr>
<td>Grampian</td>
<td>32</td>
<td>128</td>
</tr>
<tr>
<td>Greater Glasgow and Clyde</td>
<td>69</td>
<td>273</td>
</tr>
<tr>
<td>Highland</td>
<td>19</td>
<td>76</td>
</tr>
<tr>
<td>Lanarkshire</td>
<td>34</td>
<td>137</td>
</tr>
<tr>
<td>Lothian</td>
<td>44</td>
<td>177</td>
</tr>
<tr>
<td>Orkney</td>
<td>7</td>
<td>27</td>
</tr>
<tr>
<td>Shetland</td>
<td>7</td>
<td>30</td>
</tr>
<tr>
<td>Tayside</td>
<td>22</td>
<td>90</td>
</tr>
<tr>
<td>Western Isles</td>
<td>9</td>
<td>36</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>325</strong></td>
<td><strong>1,307</strong></td>
</tr>
</tbody>
</table>

2. The required numbers of addresses for the main sample and Child Boost sample were combined to give an overall total of addresses to sample for each stratum (local authorities plus Lanarkshire’s split). The overall number of addresses for each stratum was then sampled from the sample frame of addresses in active PSUs. Systematic random sampling was used with addresses within PSUs ordered by urban-rural classification, SIMD rank and postcode.

3. Once the overall sample was selected, each address was randomly allocated to the main sample or the Child Boost sample.

### 1.2.7 Selecting households at addresses with multiple dwellings

A small number of addresses have only one entry in the Postcode Address File (PAF) but contain multiple dwelling units. Such addresses are identified in the PAF by the Multiple Occupancy Indicator (MOI). To ensure that households within MOI addresses had the same probability of selection as other households, the likelihood of selecting the addresses was increased in proportion to the MOI. At addresses with more than one dwelling unit fieldworkers have a programme to randomly select the household at which interviews should be sought. There are generally a few cases where the MOI on the PAF is inconsistent with the actual number of dwelling units. When this
occurred, the fieldworkers recorded the information and a correction was made through the survey weighting.

1.2.8 Selecting individuals within households
For both the main and Health Board Boost samples all adults aged 16 and over in responding households were selected for interview. To ease respondent burden, for child interviews for both the main sample and the Child Boost sample a maximum of two children were interviewed at each household. If a household contained more than two children, then two were randomly selected for interview.

1.3 TOPIC COVERAGE

1.3.1 Introduction
Topics covered in the 2018 to 2021 surveys were agreed following a consultation carried out in 2017. Many of the topics and questions included in earlier years of the survey were included again to continue the time series. The 2018 survey included the same rotating topics as the 2016 and 2014 surveys, though in 2018 a number of questions were removed, or were made less frequent to shorten the survey and thus reduce respondent burden. A small number of questions were added to the 2018 questionnaire (see sections 1.3.3 and 1.3.4). As with previous years, the 2018 survey had a focus on cardiovascular disease (CVD) and its associated risk factors.

The outcome of a public consultation about the content of the survey from 2018 is available from http://www.gov.scot/Resource/0053/00537370.pdf. This report outlines the key changes that have been made or will be made to the 2018-2021 surveys.

1.3.2 Documentation
Copies of all the documents used in data collection are included in Appendix A. Full copies of the questionnaire documentation used in the main interview and biological module are also included in Appendix A. Protocols for taking measurements (height, weight, waist circumference and blood pressure) and collecting biological samples (saliva) are available on request from ScotCen Social Research. A summary of the main interview content and the content of the biological module is provided below.

1.3.3 Main interview
Information was collected at both the household and individual level. The table that follows (Figure 1G) summarises the content of the individual level interviews for all participants. The topics a participant was asked depended both on their age and the sample type to which their address had been allocated. The age criteria for each topic are included in brackets following the topic name.
Version A households accounted for 67% of the main (core) sample. At these households the questionnaire included the core questions and the questions included in the Version A rotating module. In 2018, the topics included in the Version A rotating module were: respiratory symptoms, additional asthma questions, additional physical activity questions and questions about eating habits for adults (children are asked these questions every year).

<table>
<thead>
<tr>
<th>CORE SAMPLE – Main interview outline</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Version A</strong></td>
</tr>
<tr>
<td>Household questionnaire including household composition</td>
</tr>
<tr>
<td>General health (0+) including caring (4+)</td>
</tr>
<tr>
<td>Respiratory symptoms 16+</td>
</tr>
<tr>
<td>General CVD (16+)</td>
</tr>
<tr>
<td>Use of health services (0+)</td>
</tr>
<tr>
<td>Asthma (0+)</td>
</tr>
<tr>
<td>Asthma additional 16+</td>
</tr>
<tr>
<td>Physical activity adults (16+) and children (2-15)</td>
</tr>
<tr>
<td>Sedentary activity adults (16+) and children (2-15)</td>
</tr>
<tr>
<td>Additional physical activity questions 2+</td>
</tr>
<tr>
<td>Eating habits adults 16+</td>
</tr>
<tr>
<td>Eating habits children (2-15)</td>
</tr>
<tr>
<td>Fruit and veg consumption (2+)</td>
</tr>
<tr>
<td>Smoking and Drinking (16+) [16-19 in a self-completion]</td>
</tr>
<tr>
<td>Dental health (16+)</td>
</tr>
<tr>
<td>Economic activity (16+)</td>
</tr>
<tr>
<td>Education (16+)</td>
</tr>
<tr>
<td>Ethnic background, religion and country of birth (0+)</td>
</tr>
<tr>
<td>Self-completions (13+ &amp; parents of 4-12 yr olds)</td>
</tr>
<tr>
<td>Height (2+) and Weight (2+)</td>
</tr>
<tr>
<td>Data linkage &amp; follow-up research consents (0+)</td>
</tr>
<tr>
<td>-</td>
</tr>
</tbody>
</table>
Version B households accounted for the remaining 33% of the main (core) sample. At these addresses, participants were only asked the core questions during the main interview, with participating adults (aged 16+) also eligible to complete the biological measures module.

A significant number of changes were made to the questionnaire content in advance of the 2018 survey based on the consultation that took place in Autumn 2016 and was published in Spring 2017. These changes are discussed below and in the Scottish Health Survey: Report of Questionnaire Changes from 2018.

In 2018 a number of modules were made less frequent and will no longer be asked on an annual basis in the main interview but will be asked biennially instead. These questions include those on family health and parental history, CPR training and use of health services.

There were also a few new questions added to the main interview in 2018. These include a question for those who have used a form of Nicotine Replacement Therapy (NRT) to aid smoking cessation, two questions concerning asthma; firstly, school absence due to asthma and secondly, treatment received for asthma, a question establishing whether respondents with diabetes have Type 1 or Type 2, and finally questions on respondents’ satisfaction with local services (for example local health services, local schools, refuse collection, public transport, council libraries, etc).

A number of small amendments were also made to survey questions in 2018 (for example, updates to education qualifications). For full details of these please see the Scottish Health Survey: Report of Questionnaire Changes from 2018.

Significant changes were made to the child physical activity questions in 2017. These changes were designed to measure the activity guidelines of being physically active for at least 60 minutes per day for each day of the week (children aged 5 and over). This involved amending the questions. Previously, children were asked for the number of days on which they did physical activity and for the average amount of time this was for overall. The revised questions ask which days they did physical activity and the amount of time spent on each of those days (more information is provided in the Physical Activity chapter of the Main Report). These questions remained as they were for 2018.

Analysis of the 2017 data showed that it was not possible to derive a variable which would allow comparison between 2017 data (using the revised questions) and previous years of data (using the previous questions). For this reason, there is no trend analysis for children’s physical activity in 2017 or 2018. The question module used prior to 2017 has been reinstated in the 2019 survey and will be reported in 2020.
The full question wording of all the questions used in 2018 can be found in Appendix A.

1.3.4 **Self-completion questionnaire**

Participants aged 13 and over and parents of participants aged between 4 and 12 were asked to fill in a self-completion booklet during the interview. In all, four different booklets were administered. The version completed was dependent on the age of the participant.

The booklet for young adults aged 16-17 included questions on smoking and drinking behaviour (instead of these being asked as part of the CAPI interview). Interviewers also had the option of using this young adults booklet for those aged 18-19 if they felt that it would be more appropriate for them to answer the questions in this format rather than face to face (e.g. they might be more likely to give more honest answers than in the face to face interview when other household members including parents may be present).

For 2018, a number of questions were removed from the self-completion booklet and will occur less frequently from 2018 onwards. Questions on contraception and cosmetic procedures were removed indefinitely from both the young adult and adult self-completion. Questions on problem drinking and gambling will be asked less frequently, with problem drinking questions asked biennially and gambling questions asked every few years.

For 2018, one new question was added to the self-completion booklet. This question concerned gender identity and allowed for the expression of non-binary gender identities. This question was added to both the young adult and adult self-completion booklets. For the wording of the questions in full, see the adult or young adult self-completion booklet listed in Appendix A.

Paper questionnaire booklets contained the following topics in the 2018 survey:

**Adults**
- General Health Questionnaire (GHQ12), Warwick Edinburgh Mental Well-being scale (WEMWBS),
- food insecurity, knowledge of the physical activity recommendations, sexual orientation, and gender identity.

**Young adults**
- Smoking (including use of e-cigarettes), drinking, GHQ12, WEMWBS, food insecurity, knowledge of physical activity recommendations, sexual orientation and gender identity.

**13-15 year olds**
- GHQ12, WEMWBS, and knowledge of the physical activity recommendations.
Parents of 4-12 year olds Strengths and Difficulties questionnaire (SDQ) (designed to detect behavioural, emotional and relationship difficulties in children) and knowledge of the physical activity recommendations.

1.3.5 Height and weight

Interviewers measured the height and weight of all participants aged 2 and over, with their consent. Protocols for taking height and weight measures are available on request from ScotCen Social Research.

1.3.6 Biological module

As highlighted previously, at a sub-sample (around 33%) of main core sample addresses, adults (aged 16 and over) were selected to complete the biological module. Since 2012, specially trained interviewers have been collecting the measurements and samples which were collected by nurses in previous years (1995 to 2011).

Since the same interviewer administered the main interview and the biological module, the latter could be completed either immediately after the main interview or on a separate occasion.

From 2018, urine was no longer collected as part of the biological module. The rest of the biological remained the same as previous years. See Figure 1H below, for a complete outline of the biological module in 2018.

As part of the biological module, participants were asked whether they used any medicines, pills, syrups, ointments, puffers or injections prescribed to them by a doctor or nurse. If participants had answered yes to questions in the main interview about taking medication for high blood pressure, a heart condition or stroke then they would be asked to give the names of the drugs to the interviewer. This information is used to interpret blood pressure readings. Following these questions, interviewers took blood pressure and waist circumference measurements from participants taking part in the biological module.

Participants were also asked about current smoking behaviours and whether they currently used Nicotine Replacement Therapies (NRT). This information is used to interpret the analysis of salivary cotinine. Written agreement was sought to take samples of saliva for the analysis of cotinine (a derivative of nicotine and indicative of passive smoking).

Finally, participants were asked a set of questions about depression, anxiety, suicide attempts and self-harm (taken from the Adult Psychiatric Morbidity Survey) in computer assisted self-interviewing (CASI) format whereby the participant answered the questions themselves using the interviewer’s laptop. See Figure 1H below for a complete outline of the biological module.
### Figure 1H: Content of the 2018 Biological Module

<table>
<thead>
<tr>
<th>Outline of the Biological Module (age 16+)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prescribed medicines (if has heart condition, high blood pressure or has had stroke)</td>
</tr>
<tr>
<td>Blood pressure</td>
</tr>
<tr>
<td>Waist measurement</td>
</tr>
<tr>
<td>Smoking status and use of Nicotine Replacement Therapy</td>
</tr>
<tr>
<td>Saliva sample</td>
</tr>
<tr>
<td>Depression, anxiety, suicide attempts and self-harm</td>
</tr>
</tbody>
</table>

### 1.4 FIELDWORK PROCEDURES

#### 1.4.1 Advance letters

Each sampled address was sent an advance letter that introduced the survey and let the resident know that an interviewer would be calling to seek permission to interview. A number of versions of the advance letter were used in 2018; one for the core version A and Health Board Boost addresses, one for core version B addresses (with the biological module), and one for Child Boost addresses. There was a version of each of these letters for each organisation conducting interviews (ScotCen Social Research and ONS). A copy of the survey leaflet was included with every advance letter. The survey leaflet introduced the survey, described its purpose in more detail and included some summary findings from previous surveys.

For copies of the advance letters and survey leaflet, see the documents listed in Appendix A.

#### 1.4.2 Making contact

At initial contact, the interviewer established the number of dwelling units (DUs) and/or households (HHs) at an address and made any necessary selections (see Section 1.2).

The interviewer then attempted to make contact with each household. In the main sample they attempted to interview all adults (up to a maximum of ten) and up to two children aged 0-15 (see Section 1.2) from the household. At Child Boost sample households, interviewers first screened for children aged 0-15. In those households where children were present up to two children were randomly selected for interview. Interviewers obtained the verbal consent of both the parent/guardian and the child before commencing the interview. For Health Board Boost sample households, interviewers attempted to
interview a maximum of ten adults. Children were not eligible for interview at Health Board Boost addresses.

1.4.3 Collecting data

Interviewers used computer assisted interviewing (CAI).

At each co-operating eligible household (across all sample types), the interviewer first completed a household questionnaire, with information collected from the household reference person\textsuperscript{13} or their partner wherever possible. This questionnaire obtained basic information (including date of birth and relationship to other household members) about all members of the household, regardless of age and whether they were eligible to take part in the interview. The CAPI program then created individual questionnaires for each eligible participant in the household.

Where possible an individual interview was then conducted with all eligible adults and children in a household. In order to reduce the amount of time spent in the home, interviews could be carried out concurrently, with the program allowing up to four participants to be interviewed in a single session.

Height and weight measurements were usually obtained towards the end of the interview, although could be conducted at any time during the last half of the interview.

In addition to an advance letter and general survey leaflet, participants were also given a more detailed leaflet describing the contents and purpose of the interview, and what will happen to information they provide (including a link to the Privacy Notice on the Scottish Government’s website). Adults in households eligible for the biological module were given a longer version of this leaflet, providing information about the measurements and samples being taken.

A separate version of this leaflet was used for children in both main and Child Boost households. Parents at Child Boost addresses were also provided with a leaflet containing background information on the survey. Adults at Health Board Boost addresses received an amended version of the adult leaflet. Copies of all the participant leaflets used in the survey are included in Appendix A.

1.4.4 Introducing the biological module

Only a sub-sample of adults in the main sample were selected to take part in the biological module. At the end of the individual interview, adult participants in Version B addresses were given a Measurement Record Card which included additional information about the measurements and samples collected in the biological module. Wherever possible, interviewers would complete the module directly after the main interview to minimise attrition. If this was not possible then the interviewer would arrange to go back at a convenient time to complete the module and
take the measurements and samples. The module included the measurements described in Section 1.3.6. Written consent was obtained from participants before the saliva sample was taken. The consent statement is included in Appendix A.

1.4.5 Interviewing and measuring children
Children aged 13-15 were interviewed directly by interviewers, after verbal consent had been obtained from both the child and their parent or guardian. Interviewers were instructed to ensure that the child’s parent or guardian was present in the home throughout the interview. Information about younger children (aged 0-12) was collected directly from a parent or guardian. Whenever possible, younger children were present while their parent or guardian answered questions about their health. This was partly because the interviewer had to take the child’s height and weight measurements, but it also ensured that the child could contribute information where appropriate (for example, about physical activity done during school time).

1.4.6 Feedback to participants
If participants wished, interviewers recorded their height and weight measurements within their information leaflet. Participants kept the information leaflet and thus had a record of their height and weight, if they wished.

Participants eligible for the biological module were given an additional document; the Biological Measurement Record Card. If participants had their waist measurement and blood pressure taken, then interviewers recorded their results on this card (if the participant wished). As before, participants could keep this measurement record card and thus had a note of their measurements.

For the biological module, interviewers were issued with a set of guidelines to follow when commenting on participants’ blood pressure readings. If the participant’s blood pressure was mildly raised, they were instructed to advise the participant to contact their GP within 2 months. If the participant’s blood pressure was moderately raised, they were instructed to advise the participant to contact their GP within 2 weeks. Finally, if the participant’s blood pressure reading was considerably raised, interviewers advised the participant to visit their GP within 5 days and interviewers were instructed to contact the Survey Doctor at the earliest opportunity. The Survey Doctor would then phone the participant and advise them to contact their GP as soon as possible.

1.5 FIELDWORK QUALITY CONTROL AND ETHICAL CLEARANCE

1.5.1 Training interviewers
Interviewers new to SHeS were fully briefed on the survey’s content and procedures. They were also trained and accredited in taking height and weight measurements. Interviewers were accompanied by an
interviewer supervisor during the early stages of their work to ensure that interviews were administered correctly, and protocols were followed. Interviewers are supervised in field every year following a successful launch.

Interviewers that had worked on SHeS in previous years attended a refresher briefing ahead of the launch of the new survey year. This refresher briefing informed participants of changes to survey content and procedures for 2018. Interviewers were also re-accredited to take height and weight measurements by the research team.

Interviewers interested in administering the biological module were initially screened for suitability. Minimum competency levels were set and only interviewers that met the set criteria were invited to training and accreditation sessions.

Training to administer the biological module took place over two days. At the end of the training session interviewers were accredited in administering each of the measurements and samples and were only able to work on the module if they passed this accreditation process.

Interviewers were accompanied by a nurse supervisor (with previous experience working on the survey) on their initial biological module visit. They are also supervised in the field annually by an experienced survey nurse to ensure they are administering the measurements and samples in line with SHeS protocols. Interviewers are reaccredited annually for the biological module by the research team and survey nurses at the refresher briefings.

Full sets of written instructions, covering both survey procedures and measurement protocols, were provided to interviewers (measurement protocols are available on request from ScotCen Social Research).

1.5.2 Checking interviewer and measurement quality

A large number of quality control measures were built into the survey at the data collection stage and thereafter, to monitor the quality of interviewer performance.

Recalls were carried out at 10% of productive households. These recalls checked with the participants that interviewers had followed the correct survey procedures when conducting the interview.

In addition to the recall procedure, the computer program used by interviewers had in-built soft checks (which can be suppressed) and hard checks (which cannot be suppressed) associated with particular interview questions. When uncommon or unlikely answers were entered, or answers outside a predetermined range, these checks were triggered and appear as a warning message on the interviewers’ laptop. The interviewer is either encouraged to double-check the entered response (a soft-check) or asked to change it (a hard-check). For example, when young children were weighed by having an adult hold
them; the weight of the adult on their own was entered into the computer followed by the combined weight of the infant and adult. A hard check was used to ensure that the weight entered for the adult alone did not exceed the weight of the infant and adult combined.

Soft-checks were similar to hard-checks, however they could be suppressed. For example, soft-checks were applied to height measurements; if an interviewer entered a respondent’s height to be in excess of 1.93 metres (6 feet 3 inches), a message appeared asking the interviewer to confirm that this entry was correct. The interviewer could suppress the soft-check once they had confirmed that the height entry was not a mistake.

1.5.3 Ethical clearance

Ethical approval for the 2018 survey was obtained from the Health and Care Research Ethics Committee for Wales (REC reference number: 17/WA/0371).

1.6 SURVEY RESPONSE

1.6.1 Introduction

This section presents the fieldwork outcomes for the sampled addresses. Survey response is an important indicator of survey quality as non-response can introduce bias into survey estimates. Standardised outcome codes (based on an updated version of those published in Lynn et al, 200114) for survey fieldwork were applied across the SHeS, SHS and SCJS. This enables consistent reporting of fieldwork performance and effective comparison of performance between the surveys.

1.6.2 Household response

Table 1.1 shows a detailed breakdown of the SHeS response for all sampled addresses in 2018. Addresses with unknown eligibility have been allocated as eligible and ineligible proportional to the levels of eligibility for the remainder of the sample. This approach provides a conservative estimate of the response rate as it estimates a high proportion of eligible cases amongst addresses with unknown eligibility.

At each selected household in the main sample, all adults and a maximum of two children were eligible for interview. When considering the household response rate, households classed as “responding” were those where at least one eligible person was interviewed. The table shows that for the combined main and Health Board Boost sample, 56.7% of eligible households were classed as responding, and with all individual interviews complete at 45.0% of households.

For the Child Boost sample around three-quarters of households were ineligible as they did not contain any children under the age of 16. For
eligible households 63.7% were classed as responding, with all individual interviews complete at 63.5% of households.

Table 1.2 shows that across Heath Boards, the percentage of households where at least one eligible person was interviewed ranged from 50% (Greater Glasgow and Clyde) to 74% (Orkney Islands). Fully cooperating households were those where all eligible individuals were interviewed, all height and weight measured and, if eligible, completed the biological module. This varied between 29% in Lanarkshire to 57% in the Orkney Islands. The definition of a fully cooperating household changed in 2012 and is therefore not comparable with fully cooperating figures prior to this.

Table 1.2b shows that across Local Authorities, the percentage of households where at least one eligible person was interviewed ranged from 46% (West Dunbartonshire) to 74% (Orkney Islands). Fully cooperating households varied between 26% (Argyll & Bute) and 57% (Orkney Islands).

Table 1.3 shows the household response rate for eligible addresses in the Child Boost sample by NHS board. This varied from 56% (Dumfries and Galloway and Lanarkshire) to 76% (Ayrshire and Arran and in the Borders). Note that some of the bases for Child Boost response rates were low (for example 21 eligible households in the Borders).

Table 1.3b shows the household response rate for eligible addresses in the Child Boost sample by Local Authority. This varied from 43% (Inverclyde) to 81% (East Lothian). Note that some of the bases for Child Boost response rates were particularly low (for example 9 eligible households in Inverclyde, 11 in Argyle and Bute and 12 in South Ayrshire).

1.6.3 Individual response for adults

Overall there were 4,810 adult responses to SHeS 2018 with 1,204 responses to the biological module, detailed in Table 1.4.

In order to calculate the adult response rate, since all adults in households were eligible for interview, the number of adults in non-responding households had to be estimated to calculate the total number of adults in all households. This was undertaken by calculating the average number of men and women per household for responding households and non-responding households (where information on the composition is known) and applying this to the households where nothing is known. The total estimated number of adults from sampled addresses eligible for interview is referred to as the “set” sample. For 2018, the set sample for men was 4,458 and for women was 5,148.

Table 1.4 shows the adult response rate broken down by gender. The adult response rate was 47% for men, 53% for women and 50% overall. In responding households (those households where at least one
interview was completed) additional information on respondents allowed the consideration of response to stages of the survey by gender and age group. This is shown in Tables 1.5 and 1.6. For both men and women the younger age groups were found to have a lower response rate (51% for men aged 16 to 24 and 71% for women aged 16 to 24) than older age groups (92% or higher response rate for men over 65 and 95% or higher for women over 65).

As part of the biological module, respondents were asked to have their waist and blood pressure measured and to provide a saliva sample. Almost all individuals completing the biological module interview allowed the waist and blood pressure measurements to be taken and provided a saliva sample. Of those eligible for the biological module (including non-responders to the main interview in participating households), 36% of men participated in the module (34% provided waist measurements, 34% blood pressure measurements and 32% a saliva sample), as did 43% of women (39% with waist measurements, 39% blood pressure and 38% saliva).

Table 1.9 shows that men are under-represented in the SHeS sample compared to NRS population estimates as they made up 43% of the sample but 48% of the population. Younger age groups were also under-represented in the SHeS sample when compared to NRS population estimates. In particular, men and women under 35 were under-represented. Conversely, men and women over 55 were over-represented in the sample.

### 1.6.4 Individual response for children (0-15)

Interviews were undertaken with 1,980 children aged 0 to 15, with 949 interviews taking place as part of the main sample and 1,031 as part of the Child Boost.

As was the case with the adult sample, in order to calculate the response rate for children, the number of eligible children in selected households (the “set” sample) had to be estimated. This was done by assuming that, for both the main sample and the Child Boost sample, the non-responding and responding households contained the same average number of children.

Table 1.7 shows that overall response rates for the main sample and Child Boost sample were similar for boys and girls (53% and 52% respectively in the main sample, and 64% for both in the Child Boost sample).

Child response rates have also been calculated for children in responding households. Table 1.8 shows that response rates were highest among children aged under 11 years (93-99% for boys and 95-99% for girls), however, the response rate for children aged 11 to 15 was slightly lower at 92% for boys and 91% for girls.
1.7 WEIGHTING THE DATA

1.7.1 Introduction

This section presents information on the weighting procedures applied to the survey data. Since 2012 the weighting for SHeS has been undertaken by the Scottish Government rather than the survey contractor (as had previously been the case), but the methodology applied was largely consistent with that of the 2008 to 2011 sweeps of the survey. The procedures for the implementation of the weighting methodology were developed by the Scottish Government working with the Methodology Advisory Service at the Office for National Statistics^15.

To undertake the calibration weighting the ReGeneseses Package for R was used and within this to execute the calibration a raking function was implemented.

1.7.2 Main adult weights

The main adult weight is applicable for all adults interviewed as part of the main sample and the Health Board Boosts. There were six steps to calculating the overall adult weights. These were as follows:

1) Address selection weights (w1)

The address selection weights were calculated to compensate for unequal probabilities of selection of addresses in different survey strata. For the main sample with the Health Board Boost there were 36 strata overall (one for each local authority, an extra stratum for the Lanarkshires and two extra strata in Fife as a result of the boost). The address selection weight for each stratum was calculated as:

\[ w_1 = \frac{\text{Number of PAF addresses in the stratum}}{\text{Number of addresses selected for the stratum}} \]

2) Dwelling unit selection weights (w2)

As stated in Section 1.2.7, the MOI for the PAF was used to ensure that if there were multiple dwelling units at a single address point then they would have the same selection probability as individual addresses. However, there were some cases where the MOI was incorrect. The following correction was applied where this was the case:

\[ w_2 = \frac{\text{Recorded dwelling units at the address}}{\text{PAF MOI for the address}} \]

With \( w_2 \) trimmed to a maximum of 3.
3) Household selection weights (w3)
Similarly, within a very small number of dwelling units fieldworkers found multiple households, of which only one was selected for participation in the SHeS. The following correction was applied for multiple households:

\[ w_3 = \text{Number of households within dwelling unit} \]

With \( w_3 \) trimmed to a maximum of 3.

4) Calibrated household weights (w4)
The three selection weights were combined \((w_1 \times w_2 \times w_3)\) before the household calibration stage. This combined weight was applied to the survey data to act as entry weights for the calibration. The execution of the calibration step then modified the entry weights so that the weighted total of all members of responding households matched the population totals for Health Boards, Scotland-level population totals for age/sex breakdown, and the population within SIMD15 areas. The population totals that were used were the National Records of Scotland’s (NRS) mid-2017 estimates for private households.

5) Adult non-response weights (w5)
All adults within selected households were eligible for interview, but within responding households not all individuals completed an interview. The profiles of household members that did not complete the interview were different from those that did. Information on all individuals within responding households was available through information gathered as part of the household interview. This allowed the differential response rates for individuals within households to be modelled using logistic regression to calculate a probability of responding based on their profiles. The logistic regression was only applicable for households containing more than one adult since households consisting of only one adult either responded to the household and individual interviews or did not respond at all.

The following variables were considered for inclusion in the model:

- Health Board
- Age/sex
- Number of adults in the household
- Employment status of household reference person
- Presence of a smoker in the household
- Marital status
- Tenure
- Urban/rural classification
- Access to a car
- Located within SIMD15 area
- Frequency of eating meals together
Through running backwards and forwards selection procedures for the logistic regression the following variables were included in the final model:

- Health Board
- Age/sex
- Number of adults in the household
- Located within SIMD15 area
- Marital status
- Access to a car
- Frequency of eating meals together

The final logistic regression model was then used to calculate the probability of response for all individuals that did respond. The adult non-response weight \( w_5 \) was then calculated as the reciprocal of this probability:

\[
 w_5 = \frac{1}{\text{Probability of individual's response}}
\]

For households of only one adult the non-response weight was one.

6) Individual calibration and final adult weight (int18wt)

The household \( w_4 \) and non-response \( w_5 \) were combined \( w_4 \times w_5 \) and applied to the survey data prior to the final stage of calibration weighting which matched weighted totals for the survey data to the NRS 2017 mid-year population estimates for Health Boards, age/sex distribution at Scotland level and age/sex distribution for the Glasgow and Greater Clyde Health Board.
### Figure 1I: 2017 Mid-year population estimates for private households in Scotland by Health Board

<table>
<thead>
<tr>
<th>Health Board</th>
<th>Adults</th>
<th>Children</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ayrshire &amp; Arran</td>
<td>304,825</td>
<td>61,642</td>
<td>366,467</td>
</tr>
<tr>
<td>Borders</td>
<td>94,915</td>
<td>18,974</td>
<td>113,889</td>
</tr>
<tr>
<td>Dumfries &amp; Galloway</td>
<td>123,945</td>
<td>23,421</td>
<td>147,366</td>
</tr>
<tr>
<td>Fife</td>
<td>299,286</td>
<td>64,187</td>
<td>363,473</td>
</tr>
<tr>
<td>Forth Valley</td>
<td>246,261</td>
<td>52,493</td>
<td>298,754</td>
</tr>
<tr>
<td>Grampian</td>
<td>473,822</td>
<td>99,428</td>
<td>573,250</td>
</tr>
<tr>
<td>Greater Glasgow &amp; Clyde</td>
<td>949,292</td>
<td>195,442</td>
<td>1,144,734</td>
</tr>
<tr>
<td>Highland</td>
<td>262,433</td>
<td>52,384</td>
<td>314,817</td>
</tr>
<tr>
<td>Lanarkshire</td>
<td>534,679</td>
<td>118,078</td>
<td>652,757</td>
</tr>
<tr>
<td>Lothian</td>
<td>720,118</td>
<td>148,297</td>
<td>869,415</td>
</tr>
<tr>
<td>Orkney</td>
<td>18,268</td>
<td>3,500</td>
<td>21,768</td>
</tr>
<tr>
<td>Shetland</td>
<td>18,732</td>
<td>4,186</td>
<td>22,918</td>
</tr>
<tr>
<td>Tayside</td>
<td>337,621</td>
<td>67,304</td>
<td>404,925</td>
</tr>
<tr>
<td>Western Isles</td>
<td>22,246</td>
<td>4,356</td>
<td>26,602</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4,406,443</strong></td>
<td><strong>914,502</strong></td>
<td><strong>5,320,945</strong></td>
</tr>
</tbody>
</table>

*Total figures might not be exact due to rounding*

### Figure 1J: 2017 Mid-year population estimates for private households in Scotland by SIMD15 indicator

<table>
<thead>
<tr>
<th>SIMD15</th>
<th>Total population</th>
</tr>
</thead>
<tbody>
<tr>
<td>15% most deprived data zones</td>
<td>780,157</td>
</tr>
<tr>
<td>All other data zones</td>
<td>4,540,788</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>5,320,945</strong></td>
</tr>
</tbody>
</table>

*Total figures might not be exact due to rounding*

### Figure 1K: 2017 Mid-year population estimates for private households in Scotland by age group

<table>
<thead>
<tr>
<th>Age group</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>144,566</td>
<td>136,636</td>
<td>281,202</td>
</tr>
<tr>
<td>5-9</td>
<td>153,540</td>
<td>147,445</td>
<td>300,985</td>
</tr>
<tr>
<td>10-15</td>
<td>170,004</td>
<td>162,311</td>
<td>332,315</td>
</tr>
<tr>
<td>16-24</td>
<td>280,828</td>
<td>272,679</td>
<td>553,507</td>
</tr>
<tr>
<td>25-34</td>
<td>355,003</td>
<td>368,110</td>
<td>723,113</td>
</tr>
<tr>
<td>35-44</td>
<td>320,885</td>
<td>336,923</td>
<td>657,808</td>
</tr>
<tr>
<td>45-54</td>
<td>379,694</td>
<td>407,767</td>
<td>787,461</td>
</tr>
<tr>
<td>55-64</td>
<td>342,271</td>
<td>361,830</td>
<td>704,101</td>
</tr>
<tr>
<td>65-74</td>
<td>267,281</td>
<td>292,754</td>
<td>560,035</td>
</tr>
<tr>
<td>75+</td>
<td>176,068</td>
<td>245,350</td>
<td>421,418</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2,589,140</strong></td>
<td><strong>2,731,805</strong></td>
<td><strong>5,320,945</strong></td>
</tr>
</tbody>
</table>
1.7.3 Biological module weights

A similar process was applied to derive the weights for the biological module. This is outlined below.

1) Address selection weight (bw1)
New address selection weights were calculated using the same process as described for w1 but with the Health Board Boost addresses excluded.

2) Dwelling unit (w2) and household selection weights (w3)
The dwelling unit and household selection weights from the main adult weight were applied as above.

3) Calibrated household weight (bw4)
The three selection weights were combined (bw1*w2*w3) and applied to the survey data before the household calibration was run so that survey data matched the population totals for Health Boards, Scotland-level age/sex breakdown, and the population within SIMD15 areas.

4) Adjustment for biological module selection (bw5)
35.8% of the main sample was allocated to the biological module. To incorporate this probability of selection a correction was applied to the calibrated household weight (bw4). The correction was:

\[ bw5 = \frac{\text{Number of PAF addresses in the stratum}}{\text{(Stratum selected addresses for bio mod)}} / bw4 \]

5) Application of adult non-response (w5)
For within household non-response, the non-response weight (w5) calculated for all households was also applicable for the biological module.

6) Non-response weight for biological module interview
Not all the adults that responded to the main section of the interview responded to the biological module. Using the information collected for the respondent in the main interview and household interview the likelihood of responding to the biological module was modelled with logistic regression.
The following variables were considered for inclusion in the model:

- Health Board
- Age/sex
- Number of adults in the household
- Employment status of Household reference person
- Presence of a smoker in the household
- Frequency of eating meals together
- Self-assessed general health
- Gardening/DIY/building work in past 4 weeks
- Any physical activity in past 4 weeks
- Any housework in past 4 weeks
- Economic activity (working/retired/sick)
- Marital status
- Tenure
- Urban/rural classification
- Access to a car
- Located within SIMD15 area
- Long-term illness or disability
- Highest qualification held
- Ever had high blood pressure
- Current smoker
- Currently drink alcohol
- Number of natural teeth

Through running backwards and forwards selection procedures for the logistic regression the following variables were included in the final model for response to the biological module:

- Health Board
- Age/sex
- Number of adults in the household
- Located within SIMD15 area
- Frequency of eating meals together
- Tenure
- Presence of a smoker in the household
- Marital status
- Gardening/DIY/building work in past 4 weeks

The final logistic regression model was then used to estimate the probability of response for all individuals that did respond to the biological module. The biological module non-response weight (bw6) was then calculated as the reciprocal of this probability:

\[ bw6 = \frac{1}{\text{Probability of individual's response to bio module}} \]
7) Final calibration for biological module (bio18_wt)

The household (bw4), biological sample correction (bw5), adult non-response (w5), and biological non-response (bw6) weights were combined (bw4*bw5*w5 bw6) and applied to the survey data.

For the final stage of biological module weighting the weighted totals for the survey data were calibrated to match the NRS 2017 mid-year population estimates for private households for Health Boards, age/sex distribution at Scotland level. However, due to the low sample size for the module a number of the categories had to be collapsed. In terms of Health Boards, all areas except for Grampian, Greater Glasgow and Clyde, Highland, and Lanarkshire were grouped together. For the age groups, the lowest two age groups were combined as were the highest two age groups.

1.7.4 Non-biological module weights (Version A)

A weight titled “Version A” was calculated for the individual respondents in the main sample that were not selected for the biological module. This consisted of the main sample without the Health Board Boost sample. The following steps were followed to derive the weight:

1) Address selection weight (bw1)
   As derived in the first step of the biological module weight.

2) Dwelling unit (w2) and household selection weights (w3)
   The dwelling unit and household selection weights from the main adult weight were applied as above.

3) Calibrated household weight (bw4)
   As derived for the biological module.

4) Adult non-response weight (w5)
   For within household non-response, the non-response weight (w5) calculated for all households was also applicable for the biological module.

5) Final calibration for Version A weight (verA1618wt)
   The household (bw4) and adult non-response (w5) weights were combined (bw4*w5) and applied to the survey data. As was the case with the main adult weight and biological module weight, the weighted totals for the survey data were calibrated to match the NRS 2017 mid-year population estimates for private households for Health Boards, age/sex distribution at Scotland level.

1.7.5 Overall child weights

An overall child weight was derived for child responses from the main sample and from the child boost combined. Separate logistic regression
non-response weights were not required for the child samples as the response rate for children within cooperating households was sufficiently high. The weighting steps are shown below. Steps (1) and (2) followed the same process as described in 3.2 above.

1) Address selection weight for main sample and child boost combined (cw1)

2) Dwelling unit (cw2) and household (cw3) selection weights

3) Selection of children within each household (cw4)

A maximum of two children were eligible for interview in each household. To ensure that children in larger households were not under-represented in the final sample the following child selection weight was calculated for households with more than two children to compensate for the probability of selection:

$$cw_4 = \frac{\text{Number of children in the household}}{2}$$

For households with two or fewer children cw4=1.

4) Calibration for child interview weight (cint18wt)

The address selection (cw1), dwelling unit (cw2), household (cw3) and child selection weights (cw4) were combined (cw1*cw2*cw3*cw4) and applied to the survey data. The weighted totals for the survey data were calibrated to match the NRS 2017 mid-year population estimates for private households for Health Boards, age/sex distribution at Scotland level.

Weights were also created specifically for within household analysis, comparing children’s characteristics with those of their parents. As data were only collected with respect to both children and adults in the core sample, these weights were only created for children at core sample addresses. They were created in a similar fashion to that described for the whole of the overall child weights.

1.7.6 Combined weights

A number of different combinations of annual sweeps have been produced to allow the analysis of combined datasets.
The weights provided for combined years of data are:

<table>
<thead>
<tr>
<th>Weight name</th>
<th>Purpose of combined weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>int15161718wt</td>
<td>For analysis of 2015, 2016, 2017 and 2018 combined adult data</td>
</tr>
<tr>
<td>cint15161718wt</td>
<td>For analysis of 2015, 2016, 2017 and 2018 combined child data</td>
</tr>
<tr>
<td>cmint15161718wt</td>
<td>For analysis of 2015, 2016, 2017 and 2018 combined child data core sample only (for within household analysis)</td>
</tr>
<tr>
<td>bio15161718wt</td>
<td>For analysis of 2015, 2016, 2017 and 2018 combined biological data (not urine)</td>
</tr>
<tr>
<td>int1718wt</td>
<td>For analysis of 2017 and 2018 combined adult data</td>
</tr>
<tr>
<td>cint1718wt</td>
<td>For analysis of 2017 and 2018 combined child data</td>
</tr>
<tr>
<td>cmint1718wt</td>
<td>For analysis of 2017 and 2018 combined child data core sample only (for within household analysis)</td>
</tr>
<tr>
<td>bio1718wt</td>
<td>For analysis of 2017 and 2018 combined biological data (not urine)</td>
</tr>
<tr>
<td>int1618wt</td>
<td>For analysis of 2016 and 2018 combined adult data</td>
</tr>
<tr>
<td>vera1618wt</td>
<td>For analysis of 2016 and 2018 combined version A adult module data</td>
</tr>
<tr>
<td>cvera1618wt</td>
<td>For analysis of 2016 and 2018 combined version A child module data</td>
</tr>
</tbody>
</table>

In each case, the calculation of the weights followed the same procedure. The pre-calibration weights which had already been calculated for the individual years (which take into account selection weighting and (except for the child weights) non-response weighting) were combined and calibrated to Health Board and age/sex 2017 population totals for private households.

1.8 DATA ANALYSIS AND REPORTING

SHeS is a cross-sectional survey of the population. It examines associations between health status, personal characteristics and behaviour. However, such associations do not necessarily imply causality. In particular, associations between current health status and current behaviour need careful interpretation, as current health may reflect past, rather than present, behaviour. Similarly, current behaviour may be influenced by advice or treatment for particular health conditions.
1.8.1 Reporting age variables

Defining age for data collection
A considerable part of the data collected in SHeS 2018 is age specific, with different questions directed to different age groups. During the interview the participant’s date of birth was ascertained. For data collection purposes, a participant’s age was defined as their age on their last birthday before the interview.

Age as an analysis variable
Age is a continuous variable, and an exact age variable on the data file expresses it as such (so that, for example, someone whose 24th birthday was on January 1, 2018 and was interviewed on October 1, 2018 would be classified as being aged 24.75).

The presentation of tabular data involves classifying the sample into year bands. This can be done in two ways, age at last birthday and ‘rounded age’, that is, rounded to the nearest integer. In this report all references to age are age at last birthday.

Age standardisation
Some of the adult data included in the 2018 report have been age-standardised to allow comparisons between groups after adjusting for the effects of any differences in their age distributions. If data reported have been age-standardised this is highlighted in the title to the table or chart. When different sub-groups are compared in respect of a variable on which age has an important influence, any differences in age distributions between these sub-groups are likely to affect the observed differences in the proportions of interest.

It should be noted that all analyses in the report are presented separately for men and women and on most occasions data for all adults are also presented. All age standardisation has been undertaken separately within each sex, expressing male data to the overall male population and female data to the overall female population. When comparing data for the two sexes, it should be remembered that no age standardisation has been introduced to remove the effects of the sexes’ different age distributions.

Age standardisation was carried out using the direct standardisation method. The standard population to which the age distribution of sub-groups was adjusted was the mid-year 2017 household population estimates for Scotland. The age-standardised proportion \( p' \) was calculated as follows, where \( p_i \) is the age specific proportion in age group \( i \) and \( N_i \) is the standard population size in age group \( i \):

\[
p' = \frac{\sum_i N_i p_i}{\sum_i N_i}
\]

Therefore \( p' \) can be viewed as a weighted mean of \( p_i \) using the weights \( N_i \). Age standardisation was carried out using the age groups: 16-24,
25-34, 35-44, 45-54, 55-64, 65-74 and 75 and over. The variance of the standardised proportion can be estimated by:

\[ \text{var}(p) = \frac{\sum_i (N_i \cdot p_i \cdot q_i) / n_i}{(\sum_i N_i)^2} \]

where \( q_i = 1 - p_i \).

1.8.2 Standard analysis breakdowns

Scottish Index of Multiple Deprivation (SIMD)

The analysis of 2018 data was based on the most recent version of the Scottish Index of Multiple Deprivation (SIMD), published in 2016\(^{16}\). It is based on 38 indicators in seven individual domains of current income, employment, housing, health, education, skills and training, geographic access to services and crime. SIMD is calculated at data zone level, enabling small pockets of deprivation to be identified. The data zones are ranked from most deprived (1) to least deprived (6,976) on the overall SIMD index. The result is a comprehensive picture of relative area deprivation across Scotland. The index was divided into quintiles for the presentation of analysis within this report. The full index is not available on the archived dataset due to concerns about its potential for identifying individual respondents or households.

1.8.3 Design effects and true standard errors

SHeS 2018 used a clustered, stratified multi-stage sample design. In addition, weights were applied when obtaining survey estimates. One of the effects of using the complex design and weighting is that standard errors for survey estimates are generally higher than the standard errors that would be derived from an unweighted simple random sample of the same size. The calculations of standard errors shown in tables, and comments on statistical significance throughout the report, have taken the clustering, stratification and weighting into account. The ratio of the standard error of the complex sample to that of a simple random sample of the same size is known as the design factor. Put another way, the design factor (or ‘deft’) is the factor by which the standard error of an estimate from a simple random sample has to be multiplied to give the true standard error of the complex design. The true standard errors and defts for SHeS 2018 have been calculated using a Taylor Series expansion method. The deft values and true standard errors (which are themselves estimates subject to random sampling error) are shown in Tables 1.10 to 1.19 for selected survey estimates presented in the main report.

Tables 1.10 - 1.17
References and notes

1 The 1995 and 1998 surveys were carried out by the Joint Health Surveys Unit of the National Centre for Social Research (NatCen Social Research) and the Department of Epidemiology and Public Health University College London Medical School (UCL). The MRC Social and Public Health Sciences Unit at the University of Glasgow (MRC SPHSU) joined the consortium in 2003. ScotCen Social Research (a branch of NatCen Social Research), UCL and MRC SPHSU conducted the 2008-2011 surveys after a decision was made to carry out the survey annually.


3 See www.gov.scot/Topics/Statistics/About/Surveys/SSCQ/SSCQ2014


9 Further information on the sample designs and the methodology used is available here: www.gov.scot/Topics/Statistics/About/Surveys/WeightingProjectReport

10 Further information on the 2011 Scottish Health Survey questionnaire review for the 2012-2015 surveys can be found on the Scottish Government SHeS website: www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/questionnairereviewreport


13 The household reference person (HRP) is defined as the householder (a person in whose name the property is owned or rented) with the highest income. If there is more than one householder and they have equal income, then the household reference person is the eldest.


15 A report on the development of the weighting procedures is available here: www.gov.scot/Topics/Statistics/About/Surveys/WeightingProjectReport

16 Where time series SIMD data are presented, the appropriate version of the SIMD is used for each year. More details are provided within the main report and at www.gov.scot/Topics/Statistics/SIMD/Publications
**Chapter 1: Table list**

<table>
<thead>
<tr>
<th>Table 1.1</th>
<th>Detailed fieldwork outcomes</th>
</tr>
</thead>
<tbody>
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<td>Table 1.2</td>
<td>Main sample household response, by Health Board</td>
</tr>
<tr>
<td>Table 1.2b</td>
<td>Main Sample household response, by Local Authority</td>
</tr>
<tr>
<td>Table 1.3</td>
<td>Child boost sample household response, by Health Board</td>
</tr>
<tr>
<td>Table 1.3b</td>
<td>Child boost sample household response, by Local Authority</td>
</tr>
<tr>
<td>Table 1.4</td>
<td>Summary of adults' individual response to the survey, by sex</td>
</tr>
<tr>
<td>Table 1.5</td>
<td>Men in responding households, response to the stages of the survey, by age</td>
</tr>
<tr>
<td>Table 1.6</td>
<td>Women in responding households, response to the stages of the survey, by age</td>
</tr>
<tr>
<td>Table 1.7</td>
<td>Summary of children's individual response to the survey, by sample type and sex</td>
</tr>
<tr>
<td>Table 1.8</td>
<td>Children in responding households, response to the stages of the survey by age and sex</td>
</tr>
<tr>
<td>Table 1.9</td>
<td>Age distribution of responding adult sample compared with 2017 mid-year population estimates for Scotland, by sex</td>
</tr>
</tbody>
</table>

| Table 1.10 | True standard errors and 95% confidence intervals for mental wellbeing variables |
| Table 1.11a| True standard errors and 95% confidence intervals for general health, cardiovascular conditions and caring variables |
| Table 1.11b| True standard errors and 95% confidence intervals for general health, cardiovascular conditions and caring variables |
| Table 1.11c| True standard errors and 95% confidence intervals for general health, cardiovascular conditions and caring variables |
| Table 1.12 | True standard errors and 95% confidence intervals for alcohol variables |
| Table 1.13 | True standard errors and 95% confidence intervals for smoking variables |
| Table 1.14 | True standard errors and 95% confidence intervals for diet variables |
| Table 1.15 | True standard errors and 95% confidence intervals for physical activity variables |
| Table 1.16 | True standard errors and 95% confidence intervals for obesity variables |
| Table 1.17 | True standard errors and 95% confidence intervals for respiratory variables |
### Table 1.1 Detailed fieldwork outcomes

<table>
<thead>
<tr>
<th>Fieldwork Outcome</th>
<th>Main sample and HB boost</th>
<th>Child boost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sample</td>
<td>% issued</td>
</tr>
<tr>
<td>All eligible individuals interviewed</td>
<td>2551</td>
<td>40.2</td>
</tr>
<tr>
<td>Responding</td>
<td>3216</td>
<td>50.6</td>
</tr>
<tr>
<td><strong>Refused</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sampling unit information refused</td>
<td>188</td>
<td>3.0</td>
</tr>
<tr>
<td>Office refusal</td>
<td>363</td>
<td>5.7</td>
</tr>
<tr>
<td>Refusal at introduction / before interview</td>
<td>1168</td>
<td>18.4</td>
</tr>
<tr>
<td>Refusal during the interview</td>
<td>6</td>
<td>0.1</td>
</tr>
<tr>
<td>Broken appointment - no re-contact</td>
<td>173</td>
<td>2.7</td>
</tr>
<tr>
<td><strong>Total refused</strong></td>
<td>1898</td>
<td>29.9</td>
</tr>
<tr>
<td><strong>Non-contact</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No contact with anyone at the address</td>
<td>204</td>
<td>3.2</td>
</tr>
<tr>
<td>Contact made at address, but not with target respondent</td>
<td>25</td>
<td>0.4</td>
</tr>
<tr>
<td><strong>Total non-contact</strong></td>
<td>229</td>
<td>3.6</td>
</tr>
<tr>
<td><strong>Other non-response</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ill at home during field period</td>
<td>33</td>
<td>0.5</td>
</tr>
<tr>
<td>Away or in hospital throughout field period</td>
<td>48</td>
<td>0.8</td>
</tr>
<tr>
<td>Physically or mentally unable/incompetent</td>
<td>102</td>
<td>1.6</td>
</tr>
<tr>
<td>Language barrier</td>
<td>11</td>
<td>0.2</td>
</tr>
<tr>
<td>Other non-response (not covered by categories above)</td>
<td>98</td>
<td>1.5</td>
</tr>
<tr>
<td><strong>Total other non-response</strong></td>
<td>292</td>
<td>4.6</td>
</tr>
</tbody>
</table>

*Continued…*
Table 1.1 - Continued

<table>
<thead>
<tr>
<th>Fieldwork Outcome</th>
<th>Main sample and HB boost</th>
<th>Child boost</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sample</td>
<td>% issued</td>
</tr>
<tr>
<td><strong>Unknown eligibility</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not attempted</td>
<td>1</td>
<td>0.0</td>
</tr>
<tr>
<td>Inaccessible</td>
<td>3</td>
<td>0.0</td>
</tr>
<tr>
<td>Unable to locate address</td>
<td>6</td>
<td>0.1</td>
</tr>
<tr>
<td>Other unknown eligibility</td>
<td>26</td>
<td>0.4</td>
</tr>
<tr>
<td>Total unknown eligibility</td>
<td>36</td>
<td>0.6</td>
</tr>
<tr>
<td>Estimated eligible addresses in set of unknown eligibility addresses</td>
<td>32</td>
<td>0.5</td>
</tr>
<tr>
<td><strong>Total eligible addresses</strong></td>
<td>5667</td>
<td>89.2</td>
</tr>
<tr>
<td><strong>Not eligible</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No children 0-15 in household</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>Not yet built / under construction</td>
<td>5</td>
<td>0.1</td>
</tr>
<tr>
<td>Demolished / derelict</td>
<td>21</td>
<td>0.3</td>
</tr>
<tr>
<td>Vacant / empty</td>
<td>377</td>
<td>5.9</td>
</tr>
<tr>
<td>Non-residential</td>
<td>69</td>
<td>1.1</td>
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Table 1.2  Main sample household response, by Health Board

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<th>Fife</th>
<th>Forth Valley</th>
<th>Grampian</th>
<th>Greater Glasgow &amp; Clyde</th>
<th>Highland</th>
<th>Lanarkshire</th>
<th>Lothian</th>
<th>Orkney Islands</th>
<th>Shetland Islands</th>
<th>Tayside</th>
<th>Western Isles</th>
<th>Total</th>
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Continued…
Table 1.2  - Continued

Selected addresses/eligible households

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<th>Fife</th>
<th>Forth Valley</th>
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<th>Greater Glasgow &amp; Clyde</th>
<th>Highland</th>
<th>Lanarkshire</th>
<th>Lothian</th>
<th>Orkney Islands</th>
<th>Shetland Islands</th>
<th>Tayside</th>
<th>Western Isles</th>
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<tr>
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<td>83</td>
<td>65</td>
<td>71</td>
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<td>279</td>
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<td>244</td>
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<td>292</td>
<td>62</td>
<td>279</td>
<td>54</td>
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<tr>
<td>Fully co-operating</td>
<td>183</td>
<td>64</td>
<td>83</td>
<td>65</td>
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<td>52</td>
<td>221</td>
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<td>35</td>
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<td>234</td>
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<td>182</td>
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<td>234</td>
<td>46</td>
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- This includes the Health Board boost household response
- Households where at least one person was interviewed
- All eligible household members were interviewed, but not all had height and weight measured or agreed to take part in the biological module if eligible
- All eligible household members were interviewed, had height and weight measured and completed to take part in the biological module if eligible
Table 1.2b  Main sample household response, by Local Authority

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<thead>
<tr>
<th>Address and household outcome</th>
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<th>Aberdeen City</th>
<th>Aberdeenshire</th>
<th>Angus</th>
<th>Argyll and Bute</th>
<th>Clackmannanshire</th>
<th>Dumfries and Galloway</th>
<th>Dundee City</th>
<th>East Ayshire</th>
<th>East Dunbartonshire</th>
<th>East Lothian</th>
<th>East Renfrewshire</th>
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<td>%</td>
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<td>%</td>
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<td>71</td>
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<td>52</td>
<td>86</td>
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<td>33</td>
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</tbody>
</table>

Responding households<sup>b</sup>

| All interviewed<sup>c</sup>   | 42 | 23 | 50 | 28 | 30 | 29 | 46 | 38 | 47 | 32 | 43 | 36 | 48 | 36 | 40 | 34 | 54 | 43 | 53 | 35 | 48 | 34 |
| Fully cooperating<sup>d</sup> | 12 | 7 | 19 | 11 | 7 | 7 | 4 | 3 | 9 | 6 | 3 | 3 | 7 | 5 | 4 | 3 | 4 | 3 | 7 | 5 | 4 | 3 |

Continued...
<table>
<thead>
<tr>
<th>Address and household outcome</th>
<th>Local Authority</th>
</tr>
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<tbody>
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<td>Responding households&lt;sup&gt;b&lt;/sup&gt;</td>
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<td>5</td>
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<tr>
<td>Responding households&lt;sup&gt;b&lt;/sup&gt;</td>
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<td>All interviewed&lt;sup&gt;c&lt;/sup&gt;</td>
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<td>Fully cooperating&lt;sup&gt;d&lt;/sup&gt;</td>
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</table>

<sup>a</sup> 2018

Continued...
Table 1.2b - Continued

Select addresses/eligible households

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<td>Total all interviewed</td>
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<td><strong>Fully cooperating</strong></td>
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</tr>
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<tr>
<td>Total fully cooperating</td>
<td>62</td>
</tr>
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</table>

a This includes the Health Board boost and additional sample household response.
b Households where at least one person was interviewed.
c All eligible household members were interviewed, but not all had height and weight measured or agreed to take part in the biological module if eligible.
d All eligible household members were interviewed, had height and weight measured and completed to take part in the biological module if eligible.
Table 1.3 Child boost sample household response, by Health Boarda

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<tr>
<td>Responding householdsc</td>
<td>48</td>
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<tr>
<td>All interviewedd</td>
<td>48</td>
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<tr>
<td>Fully co-operatinge</td>
<td>43</td>
</tr>
<tr>
<td>Non-responding households</td>
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</tr>
<tr>
<td>Non-contact - eligible</td>
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<td>Non-contact - unknown eligibility</td>
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<td>Refusal</td>
<td>13</td>
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<tr>
<td>Other non-response - eligible</td>
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</table>

a There were no child boost addresses issue in the following Health Boards: Orkney, Shetland, Western Isles
b Child boost sample addresses where no persons aged 0-15 were found
c Households where at least one person was interviewed
d All eligible household members were interviewed, but not all had height and weight measured
e All eligible household members were interviewed, had height and weight measured
| Local Authority                  | Aberdeen | Aberdeenshire | Angus      | Argyll and Bute | Clackmannanshire | Dumfries and Galloway | Dundee City | East Ayrshire | East Dunbartonshire | East Lothian | East Renfrewshire | Total Addressed | Total Interviewed | Fully Cooperating | Responding households | Responding households | All Interviewed | Fully Cooperating | Responding households | All Interviewed | Fully Cooperating | Responding households |
|--------------------------------|----------|---------------|------------|----------------|-----------------|--------------------|-------------|--------------|----------------------|--------------|---------------------|-----------------|-------------------|---------------------|-------------------|-------------------|---------------------|-------------------|-------------------|---------------------|-------------------|
| Selected addresses             |          |               |            |                |                 |                    |             |              |                      |              |                     | 217 264          | 101 81            | 147 214           | 49 51            | 32 44            | 203 271           | 18 37            | 15 29            | 14 29              | 2 4              | 0 0                | 12 14             |
| Ineligible addresses           | 21 19    | 7 4           | 66 41      | 98 135         | 9 12            | 8 3                | 6 1         | 30 104        | 87 120               | 81 49         |                     |                  |                   |                     |                  |                  |                     |                  |                  |                     |                  |                  |
| Total eligible households       | 147 194  | 78 66         | 113 98     | 27 135         | 13 25           | 27 15              | 103 95      | 110 104       | 81 120               | 81 110        |                     |                  |                   |                     |                  |                  |                     |                  |                  |                     |                  |                  |
| Responding households b        |          |               |            |                |                 |                    |             |              |                      |              |                     | 31 63            | 36 71            | 14 26             | 18 37            | 12 20            | 18 31             | 14 29            | 12 27            | 14 29              | 2 4              | 0 0                | 12 14             |
| All interviewed c              | 31 63    | 36 71         | 14 26      | 18 31          | 12 20           | 14 29              | 14 29       | 12 27         | 14 29               | 12 27         |                     |                  |                   |                     |                  |                  |                     |                  |                  |                     |                  |                  |
| Fully cooperating d            | 31 63    | 36 71         | 14 26      | 18 31          | 12 20           | 14 29              | 14 29       | 12 27         | 14 29               | 12 27         |                     |                  |                   |                     |                  |                  |                     |                  |                  |                     |                  |                  |
| Responding households b        |          |               |            |                |                 |                    |             |              |                      |              |                     | 26 53            | 33 65            | 10 26             | 17 48            | 10 27            | 10 27             | 17 48            | 7 4              | 0 0                | 12 14             |
| All interviewed c              | 26 53    | 33 65         | 10 26      | 17 48          | 10 27           | 10 27              | 17 48       | 7 4           | 12 14               | 12 14         |                     |                  |                   |                     |                  |                  |                     |                  |                  |                     |                  |                  |
| Fully cooperating d            | 26 53    | 33 65         | 10 26      | 17 48          | 10 27           | 10 27              | 17 48       | 7 4           | 12 14               | 12 14         |                     |                  |                   |                     |                  |                  |                     |                  |                  |                     |                  |                  |
Table 1.3b - Continued

Selected addresses/eligible households

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Continued...
Table 1.3b - Continued

Selected addresses/eligible households 2018

<table>
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<th>Address and household outcome</th>
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<th>Scottish Borders</th>
<th>South Ayrshire</th>
<th>South Lanarkshire</th>
<th>Stirling</th>
<th>West Dunbartonshire</th>
<th>West Lothian</th>
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<td>N %</td>
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<td>N %</td>
<td>N %</td>
<td>N %</td>
<td>N %</td>
<td>N %</td>
<td>N %</td>
<td>N %</td>
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<td>Selected addresses</td>
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<td>Total eligible households</td>
<td>156</td>
<td>79</td>
<td>72</td>
<td>255</td>
<td>69</td>
<td>77</td>
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<td>34</td>
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<td>12</td>
<td>81</td>
<td>19</td>
<td>23</td>
<td>48</td>
<td>1071</td>
</tr>
<tr>
<td>All interviewedc</td>
<td>20</td>
<td>59</td>
<td>16</td>
<td>76</td>
<td>9</td>
<td>75</td>
<td>11</td>
<td>58</td>
</tr>
<tr>
<td>Fully cooperatingd</td>
<td>20</td>
<td>59</td>
<td>16</td>
<td>76</td>
<td>9</td>
<td>75</td>
<td>11</td>
<td>58</td>
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<tr>
<td>All interviewedc</td>
<td>12</td>
<td>36</td>
<td>5</td>
<td>24</td>
<td>2</td>
<td>17</td>
<td>2</td>
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<tr>
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<td>0</td>
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<td>0</td>
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<td>0</td>
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<tr>
<td>Responding householdsb</td>
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<td>36</td>
<td>5</td>
<td>24</td>
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<td>17</td>
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<tr>
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<td>3</td>
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<td>Fully cooperatingd</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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</tr>
</tbody>
</table>

a There were no child boost addresses issue in the following Local Authorities: Eilean Siar, Orkney Islands, Shetland Islands.
b Child boost sample addresses where no persons aged 0-15 were found.
c Households where at least one person was interviewed.
d All eligible household members were interviewed, but not all had height and weight measured.
e All eligible household members were interviewed, had height and weight measured.
Table 1.4 Summary of adults' individual response to the survey, by sex

*Estimated adult sample ('set' of adults aged 16 and over)*

<table>
<thead>
<tr>
<th>Individual response</th>
<th>Men</th>
<th>Women</th>
<th>All adults</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>Interviewed</td>
<td>2074</td>
<td>47</td>
<td>2736</td>
</tr>
<tr>
<td>Non responding</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>In co-operating households</td>
<td>529</td>
<td>12</td>
<td>270</td>
</tr>
<tr>
<td>In non-responding households</td>
<td>1855</td>
<td>42</td>
<td>2142</td>
</tr>
<tr>
<td>Measurements</td>
<td></td>
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<tr>
<td>Height</td>
<td>1723</td>
<td>39</td>
<td>2187</td>
</tr>
<tr>
<td>Weight</td>
<td>1700</td>
<td>38</td>
<td>2130</td>
</tr>
<tr>
<td>Eligible for biological module</td>
<td>842</td>
<td>59</td>
<td>955</td>
</tr>
<tr>
<td>Completed biological module</td>
<td>510</td>
<td>36</td>
<td>694</td>
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<tr>
<td>Waist</td>
<td>479</td>
<td>34</td>
<td>634</td>
</tr>
<tr>
<td>Blood pressure</td>
<td>483</td>
<td>34</td>
<td>629</td>
</tr>
<tr>
<td>saliva</td>
<td>463</td>
<td>32</td>
<td>611</td>
</tr>
<tr>
<td>Urine</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Base:

- *Set sample: all main and boost adults* 4458 5148 9606
- *Set sample: biological module* 1425 1619 3044

a For the method of estimating the adult 'set' sample, see Section 1.6.3. Estimated bases have been rounded
b A sub-sample of main sample addresses was flagged as biological module addresses. At these addresses all adults who participated in the stage 1 interview were eligible to take part in the biological module. There were no biological modules in the Health Board boost sample
c Percentages are calculated as a proportion of those in the biological set sample. This is a change from previous years
d 2 valid measurements obtained
e 3 valid readings obtained
<table>
<thead>
<tr>
<th>Individual response</th>
<th>Age</th>
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<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
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<td>16-24</td>
<td>25-34</td>
<td>35-44</td>
<td>45-54</td>
<td>55-64</td>
<td>65-74</td>
<td>75+</td>
<td></td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
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</tr>
<tr>
<td>Interviewed</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<td>74</td>
<td>81</td>
<td>85</td>
<td>92</td>
<td>94</td>
<td>80</td>
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<tr>
<td>Not contacted/refused</td>
<td>49</td>
<td>24</td>
<td>26</td>
<td>19</td>
<td>15</td>
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<td>76</td>
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<td>3</td>
<td>6</td>
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<tr>
<td>Measurement not obtained</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>0</td>
<td></td>
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<tr>
<td>Not contacted</td>
<td>49</td>
<td>24</td>
<td>26</td>
<td>19</td>
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<td>8</td>
<td>6</td>
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<tr>
<td>Weight</td>
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<td>9</td>
<td>12</td>
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<tr>
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<td>4</td>
<td>7</td>
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<td>0</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Not contacted</td>
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<td>24</td>
<td>26</td>
<td>19</td>
<td>15</td>
<td>8</td>
<td>6</td>
<td>20</td>
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</tbody>
</table>

Of those eligible for biological module

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</thead>
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<td>69</td>
<td>79</td>
<td>84</td>
<td>90</td>
<td>91</td>
<td>77</td>
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<tr>
<td>Completed bio module</td>
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<td>63</td>
<td>63</td>
<td>75</td>
<td>75</td>
<td>61</td>
</tr>
<tr>
<td>Bio interview not complete</td>
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<td>49</td>
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Continued…
Table 1.5 - Continued

Men aged 16 and over in responding households

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<tbody>
<tr>
<td></td>
<td>16-24</td>
<td>25-34</td>
<td>35-44</td>
<td>45-54</td>
<td>55-64</td>
<td>65-74</td>
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<tr>
<td></td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Waist</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 valid measurements</td>
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<td>53</td>
<td>47</td>
<td>60</td>
<td>59</td>
<td>71</td>
<td>70</td>
<td>57</td>
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</tr>
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<td>25</td>
<td>25</td>
<td>39</td>
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<td>4</td>
<td>4</td>
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<td>4</td>
<td>4</td>
<td>4</td>
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</tr>
<tr>
<td>Blood pressure</td>
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<td></td>
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<td>61</td>
<td>71</td>
<td>70</td>
<td>57</td>
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<td>37</td>
<td>25</td>
<td>25</td>
<td>39</td>
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<td>70</td>
<td>67</td>
<td>55</td>
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<td>49</td>
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<td>37</td>
<td>25</td>
<td>25</td>
<td>39</td>
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<td>Refused/not obtained</td>
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</table>

**Bases:**

Men aged 16+ in responding households

<table>
<thead>
<tr>
<th>Men aged 16+ in responding households</th>
<th>308</th>
<th>299</th>
<th>378</th>
<th>468</th>
<th>440</th>
<th>429</th>
<th>281</th>
<th>2603</th>
</tr>
</thead>
</table>

Men aged 16+ in responding households eligible for biological module

| Men aged 16+ in responding households | 113 | 80  | 118 | 156 | 148 | 136 | 91  | 842  |

\(^a\) e.g. because respondent is too shaky on feet, too stooped (height), or too heavy (weight)

\(^b\) Measurement attempted but not obtained

\(^c\) Includes non-responders to interview
Table 1.6  Women in responding households, response to the stages of the survey, by age

Women aged 16 and over in responding households

<table>
<thead>
<tr>
<th>Individual response</th>
<th>Age</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>16-24</td>
<td>25-34</td>
</tr>
<tr>
<td>Interviewed</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>Interviewed</td>
<td>71</td>
<td>89</td>
</tr>
<tr>
<td>Not contacted/refused</td>
<td>29</td>
<td>11</td>
</tr>
<tr>
<td>Height</td>
<td></td>
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<tr>
<td>Measured</td>
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<td>71</td>
</tr>
<tr>
<td>Refused</td>
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<td>10</td>
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<td>Measurement not attempted(a)</td>
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<td>8</td>
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<tr>
<td>Measurement not obtained(b)</td>
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<td>0</td>
</tr>
<tr>
<td>Not contacted(c)</td>
<td>29</td>
<td>11</td>
</tr>
<tr>
<td>Weight</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measured</td>
<td>53</td>
<td>69</td>
</tr>
<tr>
<td>Refused</td>
<td>13</td>
<td>11</td>
</tr>
<tr>
<td>Measurement not attempted(a)</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Measurement not obtained(b)</td>
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<td>0</td>
</tr>
<tr>
<td>Not contacted(c)</td>
<td>29</td>
<td>11</td>
</tr>
<tr>
<td>Of those eligible for biological module</td>
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<td></td>
</tr>
<tr>
<td>Completed main interview</td>
<td>66</td>
<td>87</td>
</tr>
<tr>
<td>Completed bio module</td>
<td>57</td>
<td>68</td>
</tr>
<tr>
<td>Bio interview not complete(c)</td>
<td>43</td>
<td>32</td>
</tr>
</tbody>
</table>

Continued…
Table 1.6 - Continued

Women aged 16 and over in responding households 2018

<table>
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<tr>
<td></td>
<td>16-24</td>
<td>25-34</td>
<td>35-44</td>
<td>45-54</td>
<td>55-64</td>
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<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>2 valid measurements</td>
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<td>31</td>
<td>26</td>
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<tr>
<td>Refused/not obtained</td>
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<td>Saliva sample</td>
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<td>7</td>
<td>10</td>
<td>10</td>
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</tbody>
</table>

Bases:

Women aged 16+ in responding households: 288 407 434 512 529 496 340 3006

Women aged 16+ in responding households eligible for biological module: 86 126 143 156 176 164 106 957

a e.g. because respondent is pregnant, too shaky on feet, too stooped (height), or too heavy (weight)
b Measurement attempted but not obtained
c Includes non-responders to interview
Table 1.7  Summary of children's individual response to the survey, by sample type and sex

<table>
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<tr>
<th>Individual response</th>
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<th>Girls</th>
<th></th>
<th>All children</th>
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<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
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<td>%</td>
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<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td><strong>Main sample</strong></td>
<td></td>
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</tr>
<tr>
<td>Interviewed</td>
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<td>53</td>
<td>431</td>
<td>52</td>
<td>949</td>
<td>52</td>
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<tr>
<td>Eligible non-responders:</td>
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<tr>
<td>In responding households</td>
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<td>6</td>
<td>49</td>
<td>6</td>
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<tr>
<td>In non-responding households</td>
<td>405</td>
<td>41</td>
<td>356</td>
<td>43</td>
<td>761</td>
<td>42</td>
</tr>
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<td>Measurements obtained:</td>
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<tr>
<td>Height <strong>c</strong></td>
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<td>34</td>
<td>276</td>
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<td>605</td>
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<td>Weight <strong>c</strong></td>
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<td>0</td>
<td>0</td>
<td>0</td>
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<tr>
<td>In non-responding households</td>
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<tr>
<td>Height <strong>c</strong></td>
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<td>57</td>
<td>1980</td>
<td>58</td>
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</tr>
<tr>
<td>Height <strong>c</strong></td>
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<td>40</td>
<td>637</td>
<td>40</td>
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<tr>
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<td>627</td>
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<td><strong>Base: set sample</strong></td>
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<tr>
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<td>836</td>
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<td>835</td>
<td></td>
<td>774</td>
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<td>1609</td>
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<tr>
<td>All children</td>
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<td>1611</td>
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<td>3425</td>
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</tr>
</tbody>
</table>

a For the method of estimating the child 'set' sample, see Section 1.6.4. Estimated bases have been rounded
b Only 2 children per household were eligible for interview so if more than 2 children were in the household the additional ones were not interviewed
c Height and weight measurements were only taken from children aged 2+. As the set sample is based on children aged 0 to 15 the figures shown will underestimated the height and weight response rates
Table 1.8 Children in responding households, response to the stages of the survey, by age and sex

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<th>Individual response</th>
<th>Age</th>
<th>Total</th>
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<tr>
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<td>0-1</td>
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<tr>
<td></td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td><strong>Boys</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interviewed (0 to 15)</td>
<td>99</td>
<td>98</td>
</tr>
<tr>
<td>Not contacted/refused</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td><strong>Height (2-15)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measured</td>
<td>n/a</td>
<td>72</td>
</tr>
<tr>
<td>Refused</td>
<td></td>
<td>15</td>
</tr>
<tr>
<td>Measurement not attempted</td>
<td>9</td>
<td>7</td>
</tr>
<tr>
<td>Measurement not obtained</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Not contacted</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td><strong>Weight (2-15)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measured</td>
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<td>72</td>
</tr>
<tr>
<td>Refused</td>
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<td>17</td>
</tr>
<tr>
<td>Measurement not attempted</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Measurement not obtained</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Not contacted</td>
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<td>2</td>
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<tr>
<td><strong>Girls</strong></td>
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<td></td>
</tr>
<tr>
<td>Interviewed (0 to 15)</td>
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<td>98</td>
</tr>
<tr>
<td>Not contacted/refused</td>
<td>1</td>
<td>2</td>
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<tr>
<td><strong>Height (2-15)</strong></td>
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<td></td>
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<tr>
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<tr>
<td>Measurement not attempted</td>
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<td>5</td>
</tr>
<tr>
<td>Measurement not obtained</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Not contacted</td>
<td></td>
<td>2</td>
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<tr>
<td><strong>Weight (2-15)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measured</td>
<td>n/a</td>
<td>73</td>
</tr>
<tr>
<td>Refused</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>Measurement not attempted</td>
<td>9</td>
<td>6</td>
</tr>
<tr>
<td>Measurement not obtained</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Not contacted</td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>

**Bases:**
- All eligible boys in co-operating households: 126 223 131 296 337 1113
- All eligible boys aged 2-15 in co-operating households: 223 131 296 337 987
- All eligible girls in co-operating households: 134 202 129 242 267 974
- All eligible girls aged 2-15 in co-operating households: 202 129 242 267 840

a e.g. because child chairbound or will not stand still.
b Measurement attempted but not obtained.
c Includes non-responders to interview.
Table 1.9  Age distribution of responding adult sample compared with 2017 mid-year population estimates for Scotland, by sex

<table>
<thead>
<tr>
<th>Age</th>
<th>Health survey responding adult sample</th>
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<td>Responding adults</td>
<td>At interview</td>
<td>Biological module(^a)</td>
<td>Mid-2017 population estimate(^b)</td>
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<tr>
<td></td>
<td></td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td><strong>Men</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 to 24</td>
<td></td>
<td>8</td>
<td>8</td>
<td>13</td>
</tr>
<tr>
<td>25 to 34</td>
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<td>11</td>
<td>9</td>
<td>17</td>
</tr>
<tr>
<td>35 to 44</td>
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<td>12</td>
<td>15</td>
</tr>
<tr>
<td>45 to 54</td>
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<td>18</td>
<td>19</td>
<td>18</td>
</tr>
<tr>
<td>55 to 64</td>
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<td>18</td>
<td>18</td>
<td>16</td>
</tr>
<tr>
<td>65 to 74</td>
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<td>19</td>
<td>20</td>
<td>13</td>
</tr>
<tr>
<td>75 plus</td>
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<td>13</td>
<td>8</td>
</tr>
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<td>43</td>
<td>42</td>
<td>48</td>
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<td><strong>Women</strong></td>
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<tr>
<td>16 to 24</td>
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<td>12</td>
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<td>16</td>
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<td>65 to 74</td>
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<td>13</td>
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<td>75 plus</td>
<td></td>
<td>12</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td><strong>All women</strong></td>
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<td>57</td>
<td>58</td>
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*Bases:

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<tr>
<td><strong>Men</strong></td>
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<tr>
<td><strong>Women</strong></td>
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</table>

\(^a\) Only a sub-sample of adults were eligible to take part in the biological module. There was no biological module for the Health Board boost sample
\(^b\) 2016 private household population for Scotland (Source: National Records of Scotland), base shown in thousands
Table 1.10 True standard errors and 95% confidence intervals for mental wellbeing variables

<table>
<thead>
<tr>
<th></th>
<th>% (p) / Mean</th>
<th>Sample size (unweighted)</th>
<th>True standard error</th>
<th>95% confidence interval</th>
<th>Design factor</th>
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<td><strong>Men</strong></td>
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<td>True standard error</td>
<td>95% confidence interval</td>
<td>Design factor</td>
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<tr>
<td>Men</td>
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<td></td>
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<td>6.4</td>
<td>9.0</td>
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<tr>
<td>Women</td>
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<td>Very good/good</td>
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<td>Boys</td>
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<td></td>
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<td>Very good/good</td>
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<td>91.3</td>
<td>94.7</td>
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<td>0.8</td>
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<td>7.4</td>
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Table 1.11b True standard errors and 95% confidence intervals for general health, cardiovascular conditions and caring variables

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Table 1.11c True standard errors and 95% confidence intervals for general health, cardiovascular conditions and caring variables

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<td>Provides regular care</td>
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<td>Men</td>
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<td>50 or more hours a week</td>
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Table 1.12 True standard errors and 95% confidence intervals for alcohol variables

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<th>Estimated usual weekly alcohol consumption level</th>
<th>% (p) / Mean</th>
<th>Sample size (unweighted)</th>
<th>True standard error</th>
<th>95% confidence interval</th>
<th>Design factor</th>
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<tbody>
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<tr>
<td><strong>Men</strong></td>
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<tr>
<td>Non-drinker</td>
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<td>57.9</td>
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**Estimated usual weekly alcohol consumption level (mean units per adult drinker)**

<table>
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<th>Mean number of alcohol units usually consumed per week</th>
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<th>True standard error</th>
<th>95% confidence interval</th>
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<tbody>
<tr>
<td><strong>Men</strong></td>
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**Mean units per adult drinker on heaviest drinking day**

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<th>% (p) / Mean</th>
<th>Sample size (unweighted)</th>
<th>True standard error</th>
<th>95% confidence interval</th>
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Table 1.12 - *Continued*

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<td><strong>Women</strong> Drinks more than 6 units on heaviest drinking day</td>
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Table 1.13 True standard errors and 95% confidence intervals for smoking variables

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Table 1.14 True standard errors and 95% confidence intervals for diet variables

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Adult mean adult fruit and vegetable consumption

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Table 1.15 True standard errors and 95% confidence intervals for physical activity variables

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<td></td>
<td>% in third quartile (5.01-7.00)</td>
<td>29</td>
<td>871</td>
<td>2.0</td>
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<tr>
<td></td>
<td>% in top quartile (≥7.01)</td>
<td>20</td>
<td>871</td>
<td>1.6</td>
<td>16.8</td>
</tr>
<tr>
<td><strong>Girls</strong></td>
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<td>31</td>
<td>740</td>
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<td>27.4</td>
</tr>
<tr>
<td></td>
<td>% in second quartile (3.51-5.00)</td>
<td>19</td>
<td>740</td>
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</tr>
<tr>
<td></td>
<td>% in third quartile (5.01-7.00)</td>
<td>32</td>
<td>740</td>
<td>2.2</td>
<td>27.7</td>
</tr>
<tr>
<td></td>
<td>% in top quartile (≥7.01)</td>
<td>18</td>
<td>740</td>
<td>1.6</td>
<td>15.2</td>
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Table 1.16 True standard errors and 95% confidence intervals for obesity variables

<table>
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<tr>
<th></th>
<th>% (p) / Mean</th>
<th>Sample size (unweighted)</th>
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<th>95% confidence interval lower</th>
<th>95% confidence interval upper</th>
<th>Design factor</th>
</tr>
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<td><strong>Mean adult BMI</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men</td>
<td>Mean</td>
<td>27.6</td>
<td>1649</td>
<td>0.17</td>
<td>27.3</td>
<td>28.0</td>
</tr>
<tr>
<td>Women</td>
<td>Mean</td>
<td>27.8</td>
<td>2076</td>
<td>0.17</td>
<td>27.4</td>
<td>28.1</td>
</tr>
<tr>
<td><strong>BMI 25 and over</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men</td>
<td>25 and over</td>
<td>68</td>
<td>1649</td>
<td>1.6</td>
<td>64.8</td>
<td>70.9</td>
</tr>
<tr>
<td>Women</td>
<td>25 and over</td>
<td>63</td>
<td>2076</td>
<td>1.4</td>
<td>60.0</td>
<td>65.4</td>
</tr>
<tr>
<td><strong>BMI 30 and over</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men</td>
<td>30 and over</td>
<td>27</td>
<td>1649</td>
<td>1.4</td>
<td>24.3</td>
<td>29.6</td>
</tr>
<tr>
<td>Women</td>
<td>30 and over</td>
<td>30</td>
<td>2076</td>
<td>1.2</td>
<td>27.3</td>
<td>31.9</td>
</tr>
<tr>
<td><strong>BMI 40 and over</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Men</td>
<td>40 and over</td>
<td>2</td>
<td>1649</td>
<td>0.4</td>
<td>1.7</td>
<td>3.4</td>
</tr>
<tr>
<td>Women</td>
<td>40 and over</td>
<td>5</td>
<td>2076</td>
<td>0.5</td>
<td>3.6</td>
<td>5.6</td>
</tr>
<tr>
<td><strong>Child BMI, within / outwith healthy range</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys</td>
<td>Within healthy range</td>
<td>69</td>
<td>690</td>
<td>1.9</td>
<td>64.8</td>
<td>72.3</td>
</tr>
<tr>
<td></td>
<td>Outwith healthy range</td>
<td>31</td>
<td>690</td>
<td>1.9</td>
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<td>35.2</td>
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<tr>
<td>Girls</td>
<td>Within healthy range</td>
<td>71</td>
<td>602</td>
<td>2.2</td>
<td>66.1</td>
<td>74.6</td>
</tr>
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<td></td>
<td>Outwith healthy range</td>
<td>29</td>
<td>602</td>
<td>2.2</td>
<td>25.4</td>
<td>33.9</td>
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<tr>
<td><strong>Child BMI, at risk of overweight (including obese)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boys</td>
<td>At risk of overweight (including obese)</td>
<td>30</td>
<td>690</td>
<td>1.9</td>
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<tr>
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<td>27</td>
<td>602</td>
<td>2.1</td>
<td>23.5</td>
<td>31.9</td>
</tr>
<tr>
<td><strong>Child BMI, at risk of obesity</strong></td>
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<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Boys</td>
<td>At risk of obesity</td>
<td>17</td>
<td>690</td>
<td>1.7</td>
<td>14.1</td>
<td>20.6</td>
</tr>
<tr>
<td>Girls</td>
<td>At risk of obesity</td>
<td>15</td>
<td>602</td>
<td>1.7</td>
<td>11.9</td>
<td>18.7</td>
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Table 1.17 True standard errors and 95% confidence intervals for respiratory variables

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>% (p) / Mean</th>
<th>Sample size (un-weighted)</th>
<th>True standard error</th>
<th>95% confidence interval</th>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>lower</td>
<td>upper</td>
</tr>
<tr>
<td><strong>Adult respiratory symptoms</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Men</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Ever Wheezed</td>
<td>28</td>
<td>2073</td>
<td>1.3</td>
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<td>2073</td>
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<tr>
<td><strong>Women</strong></td>
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<td></td>
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<td>1.15</td>
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<td>2732</td>
<td>0.8</td>
<td>15.6</td>
<td>18.8</td>
<td>1.06</td>
</tr>
<tr>
<td><strong>Child respiratory symptoms</strong></td>
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<td></td>
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</tr>
<tr>
<td><strong>Boys</strong></td>
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<td>1055</td>
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<td>1.13</td>
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<td>1055</td>
<td>1.0</td>
<td>8.7</td>
<td>12.7</td>
<td>1.06</td>
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<td>1055</td>
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<td>925</td>
<td>1.5</td>
<td>14.7</td>
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<td>1.22</td>
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<tr>
<td>Wheezed in last 12 months</td>
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<td>925</td>
<td>1.0</td>
<td>7.1</td>
<td>10.9</td>
<td>1.06</td>
</tr>
<tr>
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<td>925</td>
<td>1.0</td>
<td>5.5</td>
<td>9.6</td>
<td>1.24</td>
</tr>
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<td><strong>Doctor diagnosed COPD</strong></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Men</strong></td>
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<td></td>
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<td></td>
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</tr>
<tr>
<td>COPD</td>
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Chapter 2
Quality control of urine and saliva analytes
CHAPTER 2: QUALITY CONTROL OF SALIVA ANALYTES

Julie Day, Mira Doig & Isla Dougall

2.1 INTRODUCTION AND KEY CONCLUSIONS

This section describes the assay of analytes for the 2018 Scottish Health Survey (SHeS) biological samples and the quality control and quality assessment procedures that were carried out during the survey period. Details of procedures used in the collection, processing and transportation of the specimens are available on request from ScotCen Social Research.

The overall conclusion for the data provided in this chapter is that methods and equipment used for the measurement of saliva analytes produced internal quality control (IQC) and external quality assessment (EQA) results within expected limits. The results of the analyses for the saliva cotinine levels were acceptable for SHeS 2018.

2.2 ANALYSING LABORATORIES

As in previous years, the saliva samples were initially sent to the Royal Victoria Infirmary (RVI) in Newcastle upon Tyne where they were checked for correct identification and stored prior to dispatch to ABS Laboratories in Welwyn Garden City, Hertfordshire. ABS Laboratories conducted the analysis of salivary cotinine.

2.3 SAMPLES COLLECTED

2.3.1 Urine samples

In previous years a mid-flow spot urine sample was obtained from participants. Following the Scottish Government’s consultation on the questionnaire content of SHeS, it was decided that urine sampling should be removed from the survey. As a result, no urine samples were collected in 2018.

See the Scottish Health Survey 2017: Volume 2 Technical Report for further details on urine sampling.

2.3.2 Saliva samples

A saliva sample was obtained from participants aged 16 and over. Saliva samples were collected for analysis of cotinine (a metabolite of nicotine that shows recent exposure to tobacco smoke). A saliva collection tube was used for this purpose. Participants were also offered the option to provide the saliva sample using a dental roll that they could saturate with their saliva before it was placed in the tube. The saliva tube was then labelled and packaged ready for dispatch.
2.4 METHODOLOGY

2.4.1 Laboratory procedures for saliva sample analyses

All analyses were carried out according to Standard Operating Procedures by analysts in a MHRA Good Laboratory and Good Clinical Practice (GLP & GCP) accredited laboratory. All work is reviewed by the Laboratory & QA Manager.

A schedule of Planned Preventative Maintenance was used for each item of analytical equipment. These plans were carried out jointly by the manufacturers and the laboratories’ staff. Records were kept of when maintenance was due and carried out.

2.4.2 Saliva sample analytical methods and equipment

Saliva samples received at the RVI were checked for correct identification, assigned a laboratory accession number, and stored at 4°C. Samples were checked for details and despatched fortnightly in polythene bags (20 samples per bag) by courier for overnight delivery to ABS Laboratories, where cotinine analysis was carried out. This laboratory specialises in accurate measurement of low levels of cotinine and therefore takes special precautions to ensure no contamination by environmental tobacco smoke occurs.

The method of analysis used since the 2009 SHeS study is high performance liquid chromatography coupled to tandem mass spectrometry with multiple reaction monitoring (LC-MS/MS), replacing the gas chromatography nitrogen phosphorous detection (GC-NPD) method used in earlier SHeS studies. The sample preparation prior to LC-MS/MS was liquid / liquid extraction. Samples were divided for analysis into batches of self-reported smokers and non-smokers and analysed either using a method with a high calibration range, 1 to 750 ng/mL for the self-reported smokers, or low calibration range 0.1 to 50 ng/mL for the non-smokers. A Tomtec Quadra was used to allow for the automation of some of the sample preparation. All methods were validated before use. If any of the samples from self-reported smokers gave a result below 1 ng/mL on initial analysis they were repeated in a low range batch. Similarly if any of the non-smoker samples gave a result above 50 ng/mL then they were repeated in a high range batch.

2.5 INTERNAL QUALITY CONTROL (IQC)

2.5.1 Explanation of IQC

The purpose of internal quality control (IQC) is to ensure reliability of an analytical run. IQC also helps to identify, and prevent the release of, any errors in an analytical run. IQC is also used to monitor trends over time.

For each analyte or group of analytes, the laboratory obtains a supply of quality control materials, usually at more than one concentration of analyte. Target (mean) values and target standard deviations (SD) are
assigned for each analyte. Target assignment includes evaluation of values obtained by the laboratory from replicate measurements (over several runs) in conjunction with target values provided by manufacturers of IQC materials, if available. The standard deviation and the coefficient of variation (CV) are measures of imprecision and are presented in the tables. IQC values are assessed against an acceptable range and samples are re-analysed if any of the Westgard rules have been violated\cite{4,5,6}. Internal quality assessment results are available from ScotCen Social Research upon request.

### 2.5.2 Saliva samples

ABS laboratories ran 16 non-zero calibration standards for each batch of the low range assay (0.1-50 ng/mL) or high range assays (1-750 ng/mL). Six quality control (QC) samples, two each at a set concentration to represent Low, Medium and High levels for the calibration range being used, were also analysed with each analytical batch. For the results from any analytical batch to be acceptable, four out of the six QCs must have a bias of no greater than ±15% with at least one from each QC level being within these acceptance criteria, and 75% of the calibration standards must have a bias of no greater than ±15% except at the lower limit of quantification where the bias must be no greater than ±20%.

### 2.6 EXTERNAL QUALITY ASSESSMENT (EQA)

External quality assessment (EQA) permits comparison of results between laboratories measuring the same analyte. An EQA scheme for an analyte or group of analytes distributes aliquots of the same samples to participating laboratories, which are blind to the concentration of the analytes. The usual practice is to participate in a scheme for a full year during which samples are distributed at regular frequency (monthly or bimonthly for example); the number of samples in each distribution and the frequency differ between schemes.

There was no external quality control scheme available in 2018 for saliva cotinine analysis but ABS Laboratories participates in inter-laboratory split analyses to ensure comparable results. The latest International inter-laboratory study was published in 2009\cite{3}. 
References and notes


4 Westgard rules are a statistical approach to evaluation of day-to-day analytical performance. The Westgard multirule quality control procedure uses five different control rules to judge the acceptability of an analytical run (rather than the single criterion or single set of control limits used by single-rule quality control systems, such as a Levey-Jennings chart with control limits set as either the mean plus or minus 2 standard deviations or the mean plus or minus 3 standard deviations). Westgard rules are generally used with two or four control measurements per run. This means they are appropriate when two different control materials are measured once or twice per material, which is the case in many chemistry applications. Some alternative control rules are more suitable when three control materials are analyzed, which is common for applications in haematology. More detail is available at <www.westgard.com/mlirule.htm#westgard>


APPENDIX A: FIELDWORK DOCUMENTS

1. Advance Letter (Child Boost sample) - ONS
2. Advance Letter (Child Boost sample) - ScotCen
3. Advance Letter (Version A & Health Board boost sample) - ONS
4. Advance Letter (Version A & Health Board boost sample) - ScotCen
5. Advance Letter (Version B sample)
6. Biological Measurements Record Card
7. Biological module consent booklet
8. Information Leaflet for Adults (Version A sample – no biological module)
9. Information Leaflet for Adults (Version B sample – biological module)
10. Information Leaflet for Adults (Health Board Boost)
12. Information Leaflet for Parents (Child Boost only)
13. Language translations card
14. NHS linkage consent form (Adult)
15. NHS linkage consent form (Child)
16. Questionnaire documentation (inc. household, individual and biological module)
17. Self-completion booklet (13-15 year olds)
18. Self-completion booklet (Adults)
19. Self-completion booklet (Parents of 4-12 year olds)
20. Self-completion booklet (Young Adults)
21. Scottish Government Follow-up Research consent form (Adult)
22. Scottish Government Follow-up Research consent form (Child)
23. Show cards
24. Survey Leaflet
25. Useful Contact Leaflet
Your chance to help improve health services in your local healthboard

Dear Sir or Madam,

Your household has been chosen to take part in the Scottish Health Survey (Child Interviews), an important study of the health and lifestyles of people across Scotland. We are particularly interested in understanding the health of children and young people aged 0-15. An interviewer will arrive to do the interview, but if there is no-one aged 0-15 in your household then let them know when they arrive.

By taking part, your answers can help improve health services in your local area. Last year more than 6,000 people took part – now you have an opportunity to join in as well. Many found it to be interesting and we’re sure you will too.

What’s next
An interviewer from ONS will call at your address (showing you their photo ID card). If the timing is not suitable for an interview we can arrange one for a different time.

Thank you
We rely on the goodwill of the people who take part to make the study a success and need to speak to as many different people as possible. To say thank-you for your help, each household that takes part will receive a £10 Gift Card that can be used at high street shops like Argos, Boots and Marks & Spencer.

Further info
Answers to some questions you may have are on the back of this letter. You can also look at the enclosed leaflet or visit www.scottishhealthsurvey.org. If you would like to talk to someone about the study or don’t want to take part, please phone 0800 298 5313.

Julie Landsberg
Survey Manager, Scottish Government
The survey has been reviewed by an independent Research Ethics Committee to protect your safety, rights, wellbeing and dignity.

**How did you choose my address?**

We chose your address at random from the Postcode Address File. This file is held by the Post Office and is available to the public.

**What will happen to any information I give?**

We will handle your data in accordance with data protection legislation. The results collected are used for statistical and research purposes only and your confidentiality will be protected in the publication of any results. For further information on how the information you provide will be used please see the Privacy Notice on the Scottish Government’s website here: www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/faqs.

**What will the results be used for?**

The information you provide will help the survey team understand more about health conditions and behaviours which will in turn help policy-makers to develop policies aimed at improving people’s health.

**Who is carrying out the survey?**

The Scottish Government has asked ScotCen Social Research, in collaboration with the Office for National Statistics (ONS), the Medical Research Council Social and Public Health Sciences Unit (MRC SPHSU) at the University of Glasgow, and academics from the Universities of Aberdeen and Edinburgh, to carry out the survey. ScotCen, the MRC SPHSU and the Universities of Aberdeen and Edinburgh are independent of all government departments and political parties. ONS is the UK’s independent producer of official statistics. For more information about Scotcen Social Research visit www.scotcen.org.uk. For more information about ONS visit www.ons.gov.uk/surveys.

**What is the interview about?**

The interview covers a range of health topics, including general health and lifestyles. If you agree, the interviewer will also take some measurements, such as height and weight.

**Where can I find out more?**

See the enclosed leaflet, visit www.scottishhealthsurvey.org or phone us free on 0800 298 5313. Hear more about the real difference the study makes at www.scotcen.org.uk/healthvideo
Your chance to help improve health services in your local healthboard

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Further info
Answers to some questions you may have are on the back of this letter. You can also look at the enclosed leaflet or visit www.scottishhealthsurvey.org. If you would like to talk to someone about the study or don’t want to take part, please phone 0800 652 4569.

Julie Landsberg
Survey Manager, Scottish Government

ScotCen Social Research, Scotiabank House, 2nd Floor, 6 South Charlotte Street, Edinburgh, EH2 4AW. Tel. 0800 652 4569.
A Company Limited by Guarantee, Charity No. SC038454
ONS, NSHW Field Office, Room 4100W, Office for National Statistics, Segensworth Road, Titchfield, Hampshire, PO15 5RR
The survey has been reviewed by an independent Research Ethics Committee to protect your safety, rights, wellbeing and dignity.

---

**How did you choose my address?**

We chose your address at random from the Postcode Address File. This file is held by the Post Office and is available to the public.

**What will happen to any information I give?**

We will handle your data in accordance with data protection legislation. The results collected are used for statistical and research purposes only and your confidentiality will be protected in the publication of any results. For further information on how the information you provide will be used please see the Privacy Notice on the Scottish Government's website here: [www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/faqs](http://www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/faqs).

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**What is the interview about?**

The interview covers a range of health topics, including general health and lifestyles. If you agree, the interviewer will also take some measurements, such as height and weight.

**Where can I find out more?**

See the enclosed leaflet, visit [www.scottishhealthsurvey.org](http://www.scottishhealthsurvey.org) or phone us free on 0800 652 4569. Hear more about the real difference the study makes at [www.scotcen.org.uk/healthvideo](http://www.scotcen.org.uk/healthvideo).
Dear Sir or Madam,
Your household has been chosen to take part in the Scottish Health Survey, an important annual study of the health and lifestyles of people across Scotland.
By taking part, your answers can help improve health services in your local area. Last year more than 6,000 people took part – now you have an opportunity to join in as well. Many found it to be interesting and we’re sure you will too.

What’s next
An interviewer from ONS will call at your address (showing you their photo ID card). If the timing is not suitable for an interview we can arrange one for a different time.

Thank you
We rely on the goodwill of the people who take part to make the study a success and need to speak to as many different people as possible. To say thank you in advance for your help, please take this letter to your local post office to receive £10.

Further info
Answers to some questions you may have are on the back of this letter. You can also look at the enclosed leaflet or visit www.scottishhealthsurvey.org. If you would like to talk to someone about the study or don’t want to take part, please phone free on 0800 298 5313.

Julie Landsberg
Survey Manager, Scottish Government

Collect your £10 today!
You can redeem this voucher at any Post Office branch. Counter staff will make your payment in cash. See back for more information.

Voucher number: 
Expiry date: 

£10 
Scottish Health Survey 
www.scottishhealthsurvey.org
The survey has been reviewed by an independent Research Ethics Committee to protect your safety, rights, wellbeing and dignity.

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What will happen to any information I give?
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What will the results be used for?
The information you provide will help the survey team understand more about health conditions and behaviours which will in turn help policy-makers to develop policies aimed at improving people’s health.

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Find your nearest branch:
Call: 08457 22 33 44 | Web: www.postoffice.co.uk
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Your chance to help improve health services in your local healthboard

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Thank you
We rely on the goodwill of the people who take part to make the study a success and need to speak to as many different people as possible. To say thank-you for your help, each adult that takes part will receive a £10 Gift Card that can be used at high street shops like Argos, Boots and Marks & Spencer.

Further info
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Survey Manager, Scottish Government
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What is the interview about?

The interview covers a range of health topics, including general health and lifestyles. If you agree, the interviewer will also take some measurements, such as height, weight and blood pressure.

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Hear more about the real difference the study makes at www.scotcen.org.uk/healthvideo

The survey has been reviewed by an independent Research Ethics Committee to protect your safety, rights, wellbeing and dignity.
Participant name_______________________________________

The Measurements

Height and Weight
Lately there has been much discussion about the relationship between weight and health and we are looking at weight in relation to height.

<table>
<thead>
<tr>
<th>Height:</th>
<th>cm</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>ft/ins</td>
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</table>

<table>
<thead>
<tr>
<th>Weight:</th>
<th>kg</th>
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<tbody>
<tr>
<td></td>
<td>st/lbs</td>
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</tbody>
</table>

For adults, height and weight information can be used to calculate Body Mass Index (BMI). Further information on this calculation and guidance on BMI can be found on this website: www.nhs.uk/Tools/Pages/Healthyweightcalculator.aspx

Waist measurement
Your waist measurement is useful for assessing distribution of weight over the body. The interviewer will ask you to pass the tape measure around your waist, over your clothes.

<table>
<thead>
<tr>
<th>Waist measurement:</th>
<th>cm</th>
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<tbody>
<tr>
<td>First Measurement:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ins</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Second Measurement:</th>
<th>cm</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ins</td>
</tr>
</tbody>
</table>

Blood Pressure
Blood pressure is measured using an inflatable cuff that goes around your upper arm. High blood pressure can be a health problem. A person’s blood pressure is influenced by age and can vary from day to day with emotion, meals, tobacco, alcohol, medication, temperature and pain. The interviewer will tell you your blood pressure along with an indication of its meaning. However, a diagnosis cannot be made on measurements taken on a single occasion.

<table>
<thead>
<tr>
<th>Systolic (mmHg)</th>
<th>Diastolic (mmHg)</th>
<th>Pulse (bpm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(i)         |             |             |
(ii)        |             |             |
(iii)       |             |             |

Blood pressure interpretation:
Summary of advice given by interviewer:

- Normal
- Raised
- Mildly raised
- Considerably raised

Visit your GP to have your blood pressure checked within:
**Saliva Sample**

We would like to take a sample of saliva (spit). This simply involves dribbling saliva into a tube, or sucking on a piece of cotton wool. The interviewer will ask you to sign a consent form before any sample is taken. The sample will be analysed for cotinine. Cotinine is related to the intake of cigarette smoke and is of particular interest to see whether non-smokers may have raised levels as a result of ‘passive’ smoking. The saliva will only be tested for cotinine. It will not be tested for other substances, like drugs or alcohol.

**What will happen to the saliva sample I give?**

Your saliva sample will be sent to a laboratory, and analysed as outlined in the previous section. Your name and address will not be attached to the sample and so your sample will remain confidential. The anonymous saliva sample will be destroyed after the analysis is carried out. No genetic (DNA) tests will be conducted, only the analysis outlined above.

As your results will be presented anonymously and cannot be linked to you, it would not be possible to remove your results from any published reports.

**Physical and Health Measurements**

The 2018 Scottish Health Survey
Information for Participants

This leaflet provides extra information about the measurements and samples collected as part of the Scottish Health Survey.

If you would like anything to be explained, or if you have any questions, please just ask the interviewer, or contact ScotCen directly (email scottishhealthsurvey@scotcen.org.uk or phone 0131 240 0210). The NHS Inform website (www.nhsinform.scot) and phoneline (0800 224488) can also provide information about health conditions.
Scottish Health Survey 2018

CONSENT BOOKLET
Please use capital letters and write with a ballpoint pen

SERIAL NO. [ ] [ ] [ ] [ ] [ ] [ ] Month ________

House / flat number (or name): ___________________________________________
Postcode: [ ] [ ] [ ] [ ]

1. Interviewer number [ ] [ ] [ ] [ ] [ ]

2. Date of birth DD [ ] [ ] MM [ ] [ ] YYYY [ ] [ ] [ ]

3. Full name (of person interviewed) _______________________________________

4. Sex Male 1
   Female 2

5. Date interview completed DD [ ] [ ] MM [ ] [ ] YYYY [ ] [ ] [ ]

6. Full name of parent/guardian (if person under 18) _________________________

7. SUMMARY OF CONSENTS - RING CODE FOR EACH ITEM | YES | NO

Sample of saliva to be taken 01 02

8. SALIVA SAMPLE COLLECTED: Yes 1
   No 2

9. SALIVA DISPATCHED (if applicable):
   DD [ ] [ ] MM [ ] [ ] YYYY [ ] [ ] [ ]
I consent to a trained ScotCen Social Research interviewer collecting a sample of my saliva on behalf of the Scottish Government

a) I have read and understood the Information for Participants leaflet and understand that I will be asked to provide a saliva sample collected by either dribbling into a small container or by chewing on a dental roll. These samples will then be sealed and packaged. This measurement will take approximately three (3) minutes to complete.

b) The saliva sample will be sent to a secure storage facility where it will be analysed for cotinine. I understand that:
   i. The sample and related information will be coded to ensure that my personal identity is not revealed to researchers carrying out scientific analysis
   ii. Links to my name and/or contact details will not be made at any time
   iii. No personal test results from my saliva sample will be given to me
   iv. The saliva sample will only be tested for cotinine, a derivative of nicotine. It will not be tested for other substances like drugs or alcohol or for DNA testing
   v. The sample will be destroyed after the analysis has been carried out

c) The interviewer has explained the procedure, and I have had an opportunity to discuss this with him/her.

Print name (participant): ____________________________________________________________

Sign name (participant): ____________________________________________________________

Date: __________________________________________________________________________

Print name (interviewer): __________________________________________________________

Sign name (interviewer): __________________________________________________________

Date: __________________________________________________________________________

You can cancel this permission at any time in the future by writing to us at the following address:
Scottish Health Survey, ScotCen Social Research, Scotiabank House, 2nd Floor, 6 South Charlotte Street, Edinburgh, EH2 4AW.

If you would like more information on the survey please visit the Scottish Health Survey website: www.scottishhealthsurvey.org
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SCOTTISH HEALTH SURVEY 2018

DISPATCH NOTE FOR SALIVA SAMPLES

Complete all sections CLEARLY and LEGIBLY.

1. SEX:  
   - Male:  
   - Female: 

2. DATE OF BIRTH: DD MM YYYY

3. SMOKING STATUS:
   - Current smoker: 
   - Non smoker / NA: 

4. SALIVA SAMPLE COLLECTED
   - Yes: 
   - No: 

5. DATE SAMPLE TAKEN: DD MM YYYY

6. INTERVIEWER NO: 

LABELLING ON SAMPLE TUBES AND THIS FORM MUST CORRESPOND
CHECK ALL DETAILS ABOVE ARE CORRECT BEFORE POSTING

STORAGE FACILITY USE ONLY

<table>
<thead>
<tr>
<th>TUBES ENCLOSED:</th>
<th>✓ if rec’d</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saliva</td>
<td></td>
</tr>
</tbody>
</table>
Your measurements:

With your permission we will measure your height and weight. We can use the space below to record this information if you wish.

NAME: ________________________________

HEIGHT: __________________________ cm
_________________________ ft/ins

WEIGHT: __________________________ kg
_________________________ st/lbs

For further information and advice on healthy living please see the Healthier Scotland website:
www.takelifeon.co.uk

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This leaflet tells you more about the survey and why it is being done.

What is it about?

The first Scottish Health Survey was commissioned in 1995 by the Scottish Office because it was concerned about the lack of information about the health of people in Scotland. The survey was repeated again in 1998 and 2003 and has been conducted annually since 2008. The detailed information provided by these surveys has proved very valuable and is used to help develop ways of improving people’s health and to plan the services people need at times of ill health. The 2018 survey will update the information collected in previous surveys.

The survey also collects, if you agree, height and weight measurements. Some personal details such as age, sex and employment are also included to help interpret this information.
Why have we come to your household?
To visit every household in Scotland is expensive and time consuming. Instead we select a sample of addresses in such a way that all addresses in the country have a chance of being chosen. Yours is one of those chosen for the 2018 survey.

Who will we want to speak to?
We would like to interview every adult (aged 16 and over) who lives in your household. If there are any children aged 0-15 we would like to interview two of them. Parents or guardians will answer questions on behalf of children aged under 13.

What happens to the information I provide?
Your answers are treated with care and with full respect for your privacy. The information collected is used for statistical and research purposes only and will be dealt with in accordance with data protection legislation. The Scottish Government, ScotCen and ONS guarantee that the survey results will not be published in a form that can reveal your identity and that no attempts will be made to identify individuals from their answers.

If you agree and give us your written consent, your NHS health records, including information about in-patient or out-patient visits or diagnosis, will be linked with your survey answers. This increases the value of the information you provide. This is done in such a way that no data which can identify you or any other individual will be released.

For further information on how the information you provide will be used please see the Privacy Notice on the Scottish Government’s website here: [http://www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/faqs](http://www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/faqs)

If you were to decide at a later date that you no longer wanted the information collected about you to be used in the survey then it would be deleted.

Is the survey compulsory?
No. In all our surveys we rely on voluntary co-operation. The success of the survey depends on the goodwill and co-operation of those asked to take part. The more people who do take part, the more useful the results will be. You are free to withdraw from any part of the survey at any time, and you do not have to answer all the questions.

Do I get anything from the survey?
If you wish, you may have a record of your measurements. Other benefits from the survey will be indirect and in due course will come from any improvements in health and in health services which result from the survey.

What if I have any other questions?
We hope this leaflet answers the questions you may have, and that it shows the importance of the survey. If you have any other questions about the survey, please do not hesitate to ring one of the contacts listed below.

Your co-operation is very much appreciated.

Thank you very much for your help with this survey.

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Edinburgh
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Tel: 0131 240 0210

[www.scottishhealthsurvey.org](http://www.scottishhealthsurvey.org)
Who has reviewed the study?
The study has been looked at by an independent group of people called a Research Ethics Committee, to protect your safety, rights, wellbeing and dignity. This study has been given a favourable opinion by Wales REC 3 on behalf of the NHS.

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The 2018 survey has questions about your general health, and about behaviour that can affect your health such as eating habits, physical activity, smoking and drinking. There are also some questions about diseases of the heart, lungs and chest. The Scottish Government are particularly interested in having this information because at present the rates of heart disease in Scotland are among the highest in the world.

The survey also collects, if you agree, some physical measurements such as height, weight and blood pressure. Some
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**What measurements are included in the survey?**
Adults aged 16 and over will be asked to have their height, weight, waist circumference and blood pressure measured, and to provide a saliva sample. The interviewer has been given specialist training to conduct these measurements and to handle the sample. Taking part in the measurements and providing sample is voluntary – you can answer the questions in the rest of the survey and choose to miss out the measurements and sample if you prefer. The interviewer will give you a leaflet that explains more about the measurements and sample.

Any children aged 2-15 in your household that take part in the survey will be asked to have their height and weight measured. Children will not be asked to take part in any other measurements or to provide samples.
Your measurements:

With your permission we will measure your height and weight. We can use the space below to record this information if you wish.

NAME: ____________________________

HEIGHT: _________________________ cm
_______________________________ ft/ins

WEIGHT: _________________________ kg
_______________________________ st/lbs

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www.nhs.uk/Tools/Pages/Healthyweightcalculator.aspx

For further information and advice on healthy living please see the Healthier Scotland website:

www.takelifeon.co.uk

Information about common health conditions is available here:

www.nhsinform.scot

The 2018 Scottish Health Survey

This survey is being carried out for the Scottish Government and your local NHS Health Board by ScotCen Social Research, an independent research institute, the Office for National Statistics (ONS), the MRC Social and Public Health Sciences Unit at the University of Glasgow, and academics from the Universities of Aberdeen and Edinburgh.

This leaflet tells you more about the survey and why it is being done.

What is it about?

The first Scottish Health Survey was commissioned in 1995 by the Scottish Office because it was concerned about the lack of information about the health of people in Scotland. The survey was repeated again in 1998 and 2003 and has been conducted annually since 2008. The detailed information provided by these surveys has proved very valuable and is used to help develop ways of improving people’s health and to plan the services people need at times of ill health. The 2018 survey will update the information collected in previous surveys.

The survey also collects, if you agree, height and weight measurements. Some personal details such as age, sex and employment are also included to help interpret this information.
Why have we come to your household?
To visit every household in Scotland is expensive and time consuming. Instead we select a sample of addresses in such a way that all addresses in the country have a chance of being chosen. Yours is one of those chosen for the 2018 survey.

Who will we want to speak to?
We would like to interview every adult (aged 16 and over) who lives in your household.

What happens to the information I provide?
Your answers are treated with care and with full respect for your privacy. The information collected is used for statistical and research purposes only and will be dealt with in accordance with data protection legislation. The Scottish Government, ScotCen and ONS guarantee that the survey results will not be published in a form that can reveal your identity and that no attempts will be made to identify individuals from their answers.

If you agree and give us your written consent, your NHS health records, including information about in-patient or out-patients visits or diagnosis, will be linked with your survey answers. This increases the value of the information you provide. This is done in such a way that no data which can identify you or any other individual will be released.

For further information on how the information you provide will be used please see the Privacy Notice on the Scottish Government's website here: [http://www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/faqs](http://www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/faqs)

If you were to decide at a later date that you no longer wanted the information collected about you to be used in the survey then it would be deleted.

Is the survey compulsory?
No. In all our surveys we rely on voluntary co-operation. The success of the survey depends on the goodwill and co-operation of those asked to take part. The more people who do take part, the more useful the results will be. You are free to withdraw from any part of the survey at any time, and you do not have to answer all the questions.

Do I get anything from the survey?
If you wish, you may have a record of your measurements. Other benefits from the survey will be indirect and in due course will come from any improvements in health and in health services which result from the survey.

What if I have any other questions?
We hope this leaflet answers the questions you may have, and that it shows the importance of the survey. If you have any other questions about the survey, please do not hesitate to ring one of the contacts listed below.

Your co-operation is very much appreciated.

Thank you very much for your help with this survey.

Joanne McLean or Shanna Christie
ScotCen Social Research
Scotiabank House
2nd Floor
6 South Charlotte Street
Edinburgh, EH2 4AW
Tel: 0131 240 0210
www.scottishhealthsurvey.org
Your measurements:

If you want us to we will measure how tall you are and what you weigh. You can use the space below to keep a copy of this if you wish. If you do not want this written down, please just say.

Name: ____________________________

HEIGHT: __________________________ cm
________________________ ft/ins

WEIGHT: __________________________ kg
________________________ st/lbs

The Scottish Health Survey 2018

Information for Children

The Scottish Health Survey is a survey to find out about the health of people in Scotland.

Every year around 1,700 children and 4,000 adults take part in the study.

This leaflet tells you more about the study and why it is being done.
Do I have to answer the questions?
No, not if you don’t want to. If you only want to answer some of the questions this is okay too. If you are aged 12 or under your mum, dad or the person who looks after you will answer the questions with your help. If you don’t want them to answer a question about you this is okay, just tell them not to.

Do I have to be measured and weighed?
No, not if you don’t want to. The interviewer will ask you if it’s okay to measure your height and weight before he or she takes your measurements.

If I have any other questions?
We hope this leaflet answers the questions you may have. If you have any other questions about the study, please ask the interviewer. You can also send an email with any questions to: scottishhealthsurvey@scotcen.org.uk

Thank you for your help with this study.
What if I have any questions?

We hope this leaflet answers the questions you may have, and that it shows the importance of the survey. A separate information sheet for children is also available.

If you have any other questions about the survey, please do not hesitate to ring one of the contacts listed below.

Your co-operation is very much appreciated.

Thank you very much for your help with this survey.

Joanne McLean or Shanna Christie
ScotCen Social Research
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2nd Floor
6 South Charlotte Street
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For further information and advice on healthy living please see the Healthier Scotland website:
www.takelifeon.co.uk

Information about common health conditions is available here:
www.nhsinform.scot

The 2018 Scottish Health Survey

Information for Parents

This survey is being carried out for the Scottish Government by ScotCen Social Research, an independent research institute, the Office for National Statistics (ONS), the MRC Social and Public Health Sciences Unit at the University of Glasgow and academics from the Universities of Aberdeen and Edinburgh.

This leaflet tells you more about the survey and why it is being done.

What is it about?

The first Scottish Health Survey was commissioned in 1995 by the Scottish Office because it was concerned about the lack of information about the health of people in Scotland. The survey was repeated again in 1998 and 2003 and has been conducted annually since 2008. The detailed information provided by these surveys has proved very valuable and is used to help develop ways of improving people’s health and to plan the services people need at times of ill health. The 2018 survey will update the information collected in previous surveys.

The 2018 survey will collect information about a range of health conditions and about behaviour that can affect health such as eating habits and physical activity. The Scottish Government and NHS Health Scotland would like better information about the health of children and so each year extra children are interviewed.
What is involved?
For children, the survey has questions about general health and about behaviour that can affect health such as eating habits and physical activity. Parents or guardians will be asked to answer on behalf of children up to the age of 12 – with help from the child when possible. Children aged 13-15 will be interviewed in person – with their parent or guardian present in the home.

The interviewer will also ask permission to collect some physical measurements like height and weight.

Parents are asked some personal details such as age, sex and employment which are needed to interpret the information about children’s health.

Why have we come to your household?
To visit every household in Scotland is expensive and time consuming. Instead we select a sample of addresses and ask the people at each address to take part in the Scottish Health Survey.

For this part of the survey we would like to invite up to two children aged 0-15 to take part.

What happens to the information I provide?
Your answers are treated with care and with full respect for your privacy. The information collected is used for statistical and research purposes only and will be dealt with in accordance with data protection legislation. The Scottish Government, ScotCen and ONS guarantee that the survey results will not be published in a form that can reveal your child’s identity and that no attempts will be made to identify individuals from their answers.

If you agree and give us your written consent, the information provided in this survey about your child’s NHS health records, including information about in-patient or out-patient visits or diagnosis, will be linked to your survey answers. This increases the value of the information provided. This is done in such a way that no data which can identify you, your child or any other individual will be released.

For further information on how the information you provide will be used please see the Privacy Notice on the Scottish Government’s website here: http://www.gov.scot/Topics/Statistics/Browse/Health/scottish-health-survey/faqs

If you were to decide at a later date that you no longer wanted the information collected about your child to be used in the survey then it would be deleted.

Is the survey compulsory?
No. In all our surveys we rely on voluntary co-operation. The success of the survey depends on the goodwill and co-operation of those asked to take part. The more people who do take part, the more useful the results will be. You and your child are free to withdraw from any part of the survey at any time, and you do not have to answer all the questions.

Do I get anything from the survey?
If you wish, your child may have a record of their height and weight measurements. Other benefits from the survey will be indirect and in due course will come from any improvements in health and in health services which result from the survey.
Scottish Health Survey

British Sign Language

Your household has been selected to take part in the Scottish Health Survey. This important study collects information on behalf of the Scottish Government and the National Health Service about the health and lifestyles of people who live in Scotland. If you would you like us to arrange for a BSL interpreter to help conduct the interview, or to explain more about what is involved, please give the person who has called at your address your telephone number so we can arrange this.

Gaelic / Gàidhlig

Chaidh an dachaigh agaibhse a thaghadh airson pàirt a ghabhail ann an Suirbhidh Slàinte na h-Alba. Tha an sgùrdadh cudromach seo a’ cruinneachadh fiosrachadh airson Riaghaltas na h-Alba agus Seirbhéis Nàiseanta na Slàinte mu dheidhinn slàinte agus caithreamh-beatha muinntir na h-Alba. Ma tha sibh ag iarraidh eadar-theangair a chuidicheas leis an agallamh, no a mhinicheas dè bhios na lùib, comharraich an cànan a thà a sibh a’ bruidhinn agus thoiribh an àireamh fòn agaibh don neach a thàinig don taigh gus am faigh sinn air sin a chur air dòigh dhuibh.

Bengali / বাংলা

ব্রিটিশ হেলথ সার্ব (Scottish Health Survey) -তে অংশগ্রহণ করার জন্য আপনার পরিবার নির্বাচিত হয়েছে। এই গুরুত্বপূর্ণ অধ্যয়নটি স্কটিশ সরকার (Scottish Government) এবং ন্যাশনাল হেলথ সার্বিস (National Health Service)-এর পক্ষে কর্মজীবনের ব্যক্তির ব্যাখ্যা এবং কর্মজীবনের সংক্রান্ত বিষয়ে তথ্য সংগ্রহ করে। আপনি যদি চান যে সম্পর্কে সহায়তা করতে, তাহলে আপনি যে ভাষায় কথা বলেন সেটি নির্দেশ করুন এবং যদি আপনার ঠিকানায় জানান নেই তাহলে আমরা এটির বন্ধের বাংলা বক্তার পরিবার পরিবার।

Chinese (Cantonese) /中文 (廣東話)

府上已獲選參與《蘇格蘭健康問卷調查》(Scottish Health Survey)。這是一項由蘇格蘭政府及國民保健服務 (National Health Service) 收集有關居住在蘇格蘭的人士的健康及生活形式的資料的重要研究。如你希望我們為你安排口譯員以協助進行訪問，或更詳細地解釋當中最涉及的過程，請向到訪府上的問卷調查員指出你所講的語言，並提供你的電話號碼，以便我們作出此安排。

French / Français

Votre foyer a été sélectionné pour participer à l’étude sur la santé en Écosse. Cette importante étude réunit des informations au nom du Gouvernement écossais et du ministère national de la Santé à propos de la santé et du style de vie des habitants de l’Écosse. Si vous aimeriez que nous organisions la présence d’un interprète pour faciliter la conduite de cet entretien ou vous expliquer plus en détail ce qui est impliqué, veuillez indiquer la langue que vous parlez et donner votre numéro de téléphone à la personne qui s’est présentée chez vous pour que nous puissions l’organiser.

Hindi / हिन्दी

आपके परिवार को स्कॉटलैंड स्वास्थ्य सर्वेक्षण में हिस्सा लेने के लिए चुना गया है। इस महत्त्वपूर्ण अध्ययन में स्कॉटलैंड सरकार और राज्य स्वास्थ्य सेवा की ओर से स्कॉटलैंड में रहने वाले लोगों के स्वास्थ्य और जीवनशैली के संबंध में जानकारी एकत्र की जाती है। साक्षात्कार के आयोजन अथवा इसमें शामिल किसी अन्य जानकारी को स्पष्ट करने के लिए यदि आप दुमासिए (इन्टरप्रेटर) की व्यवस्था चाहते हैं तो आप जो भाषा बोलते हैं उस पर निशान लगाएं तथा आपसे समर्पक करने वाले व्यक्ति को अपना टेलीफोन नंबर दे दें ताकि हम इसका प्रबन्ध कर सकें।
Uprzejmie informujemy, że Pana/i gospodarstwo domowe wybrano do wzięcia udziału w ankcie na temat zdrowia (Scottish Health Survey). Celem tego ważnego badania jest zebranie informacji na temat zdrowia i trybu życia mieszkańców Szkocji. Sondaż przeprowadzamy w imieniu szkockiego rządu i państwowej służby zdrowia (National Health Service). Jeżeli chciał(a)by Pan/i wziąć udział w ankcie korzystając z pomocy tłumacza bądź uzyskać bliższe informacje na temat badania, proszę wskazać na karcie swój język ojczysty i podać urzędnikowi numer swojego telefonu, by można było umówić spotkanie, podczas którego obecny będzie tłumacz.

Punjabi / ਪੰਜਾਬੀ

ਅੱਠਾ ਪਠਨਚਾ ਹੁੰਦੇ ਹੋਏ ਸੇਸਟੈਟਸ ਦੇ ਮੇਡ ਮਹੰਡੀ ਵਿਚ ਕਲਾ ਨੇੜੀ ਦੀ ਲਗਤਾ ਲਈ ਸੀ ਨਾਲਾ ਸੀ। ਇਹ ਭਾਸ਼ਕੁਰਤ ਅਜੀਨਾਟੀ ਸੇਸਟੈਟਸ ਦੀ ਸਾਬਕ ਨੌਚਾਦੇਖਾ ਵੰਡੀ ਦੀ ਇਕ ਦੋਹੀ ਦੀ ਮੇਡੀਕ ਦੁਆਰਾ ਤਿਆਰ ਹੋਈ ਵਾਰਤਾ ਸਨ। ਇਹ ਮੁੱਝੀ ਹਰਾਮੀ ਵਿੱਚ ਹੈ ਜਦੋਂ ਜਰਨੇ ਨਹੀਂ ਤਨਾ ਦੀ ਲਗਤਾ ਨੇੜੀ ਦੀ ਲਗਤਾ ਲਈ ਸੀ ਨਾਲਾ ਮੇਡ ਮਹੰਡੀ ਵਿਚ ਕਲਾ ਨੇੜੀ ਦੀ ਲਗਤਾ ਲੈ ਸੀ। ਅਜੀਨਾਟੀ ਵਿੱਚ ਭਾਵੁਕ ਵਿਸ਼ੇਸ਼ ਕਾਰਾਦਾ ਜਾਗਰੂਕ ਹੋਈ ਸੀ।

Turkish / Türkçe
Aileniz İskoç Sağlık Anketi’ne katılmak üzere seçilmiştir. Bu önemli çalışmada, İskoçya Hükümeti ve Ulusal Sağlık Hizmetleri adına, İskoçya’daki yaşıayan kişilerin sağlık durumları ve yaşam tarzları ile ilgili önemli bilgiler toplanmaktadır ve yaşam tarzları ile ilgili önemli bilgiler toplanmaktadır. Görüşmelerin yapılabilmesi veya bu süreçte dahil olan diğer noktaları açıklaması için bir tercüman ayarlamamızı istiyorsanız, lütfen konuştuğunuz dili belirtin ve sizi ziyaret eden kişiye telefon numaranız verin; sizin için gerekli ayarlamaları yapacağız.
Scottish Health Records

(Adults 16+)

- The National Health Service (NHS) maintains routine medical and other health records on all patients who use their services. We would like to ask for your consent to link your survey answers to your NHS health records on the following:
  - Visits to hospital and length of stay.
  - Information about diagnosis, treatments and hospital stays for cancer, heart disease, stroke, diabetes and psychiatric episodes.
  - Details about registration with a general practitioner and, if you pass away, the date and cause of death.
- To link this information we need to send your name, address and date of birth to the Information Services Division (ISD) of NHS Scotland so they can identify your health records.
- By linking this information with the interview data the research is more useful as we can look at how people’s lifestyle and circumstances can have an impact on their future health and use of hospital services.
- This information will be confidential and used for statistical and research purposes only. The information will not identify you so it cannot be used by anyone treating you as a patient.
- By signing this form you are only giving permission for the linking of this information to routine administrative data and nothing else. Your data will be handled in accordance with Data Protection Legislation.
- You can cancel this permission at any time in the future by writing to: ScotCen Social Research, Scotiabank House, 2nd Floor, 6 South Charlotte Street, Edinburgh, EH2 4AW. You do not need to give a reason to cancel this.

Your consent
I, (name) ________________________________ consent to ScotCen Social Research /Office for National Statistics passing my name, address and date of birth to:

the Information Services Division of NHS Scotland

Signed ________________________________ Date ____________________

I understand that these details will be used for statistical and research purposes only.
THE SCOTTISH HEALTH SURVEY 2018
Scottish Health Records
(Children 0-15)

- The National Health Service (NHS) maintains routine medical and other health records on all patients who use their services. We would like to ask for your consent to link your survey answers to your NHS health records on the following:
  - Visits to hospital and length of stay.
  - Information about diagnosis, treatments and hospital stays for cancer, heart disease, stroke, diabetes and psychiatric episodes.
  - Details about registration with a general practitioner and, if you pass away, the date and cause of death.
- To link this information we need to send your name, address and date of birth to the Information Services Division (ISD) of NHS Scotland so they can identify your health records.
- By linking this information with the interview data the research is more useful as we can look at how people's lifestyle and circumstances can have an impact on their future health and use of hospital services.
- This information will be confidential and used for statistical and research purposes only. The information will not identify you so it cannot be used by anyone treating you as a patient.
- By signing this form you are only giving permission for the linking of this information to routine administrative data and nothing else. Your data will be handled in accordance with Data Protection Legislation.
- You can cancel this permission at any time in the future by writing to: ScotCen Social Research, Scotiabank House, 2nd Floor, 6 South Charlotte Street, Edinburgh, EH2 4AW. You do not need to give a reason to cancel this.

Your consents
I, (name) ___________________________________________
I am the parent/guardian of
(child’s name) ___________________________________________
I consent to ScotCen Social Research / Office for National Statistics passing his/her name, address and date of birth to:
the Information Services Division of NHS Scotland.

Signed _______________________________________ Date _______________________

I understand that these details will be used for statistical and research purposes only.
Scottish Health Survey 2018

Questionnaire documentation

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* = not on the datafile
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.

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.

* = not on the datafile
Scottish Health Survey 2018 – 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 **three** 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
  - **Health Board boost sample** - up to ten adults per household

**Questionnaire content**

*Household questionnaire*

There was only one version of the household questionnaire across all three sample types in 2018. 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’ 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).

- **Health Board Boost sample** – Adults in the Health Board boost sample were only asked questions on those topics that appeared in both version A and version B of the individual interview, for example, *general health.*
Points to note:

- There are four versions of the questionnaire in the mainstage: Core Version A; Core Version B (biological module); Child Boost; and Health Board Boost.
- Children are not eligible for the biological module in Core Version B or at Health Board Boost sampled addresses.
- The below table indicates what should be in each version and the order of the interview. The associated CAPI block names are in [] after the topic.

<table>
<thead>
<tr>
<th>Core Version A</th>
<th>Both A&amp;B</th>
<th>Core Version B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household questionnaire [HHgrid]+[GenHHHold]</td>
<td>General health including caring [GenHlth]</td>
<td></td>
</tr>
<tr>
<td>Respiratory symptoms [CVD] 16+</td>
<td></td>
<td>General CVD (16+) and use of services [CVD] 0+</td>
</tr>
<tr>
<td>Asthma additional [Asthma] 0+</td>
<td>Physical activity adults - including Qs on activity at work, time spent at screens and other sedentary activity [AdPhysic] 16+</td>
<td>Asthma core [Asthma] 0+</td>
</tr>
<tr>
<td>Additional physical activity questions [AdPhysic] [ChPhysic] 2+</td>
<td>Physical activity kids – inc Qs on time spent at screens and other sedentary activity [ChPhysic] 2+</td>
<td></td>
</tr>
<tr>
<td>Eating habits adults [Eating] 16+</td>
<td>Fruit and Veg [Fruitveg] 2+</td>
<td></td>
</tr>
<tr>
<td>Smoking [Smoking] 18+ (16-17 year olds do self-comp/18-19 yr olds optional)</td>
<td>Passive Smoking [Smoking] 0+</td>
<td></td>
</tr>
<tr>
<td>Drinking [Drinking] 18+ (16-17 year olds do self-comp/18-19 yr olds optional)</td>
<td>Dental health [Dental] 16+</td>
<td></td>
</tr>
<tr>
<td>Education and employment details 16+</td>
<td>Ethnicity (0+) place of birth (0+) and religion (16+) [Ethnic]</td>
<td></td>
</tr>
<tr>
<td>Self-completions [Selfcomp] 4+</td>
<td>Height and weight [Measure] 2+</td>
<td></td>
</tr>
<tr>
<td>Consents [Consents] 0+</td>
<td>Biological module (16+) includes:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Prescription drugs</td>
<td></td>
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### Child Boost
- Household questionnaire [HHgrid]+[GenHHold]
- General health including caring [GenHlth]
- Asthma core [Asthma] 0+
- Additional asthma [Asthma] 0+
- Physical activity kids – inc Qs on time spent at screens and other sedentary activity [ChPhysic] 2+
- Eating habits kids [Eating] 2+
- Fruit and Veg [Fruitveg] 2+
- Passive Smoking [Smoking] 0+
- Ethnicity [Ethnic] 0+
- Self-completions [Selfcomp] 4+
- Height and weight [Measure] 2+
- Consents [Consents] 0+

### Health Board Boost
- Household questionnaire [HHgrid]+[GenHHold]
- General health including caring [GenHlth]
- General CVD [CVD] 16+
- Asthma core [Asthma] 16
- Physical activity adults
- Fruit and Veg [Fruitveg] 16+
- Smoking [Smoking] 16+ 18/20+ in CAPI
- Passive Smoking [Smoking] 16+
- Drinking [Drinking] 16+ 18/20+ in CAPI
- Dental health [Dental] 16+
- Ethnicity and religion [Ethnic] 0+
- Self-completions [Selfcomp] 16+
- Height and weight [Measure] 16+
- Consents [Consents] 16+

* = not on the datafile
[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, ONS=7)
Sample: (sample type indicator)
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.

[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?

* = not on the datafile
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

[Sex]
ASK: Is (name of respondent) male or female?
1 Male
2 Female

[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]
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, TRY TO GET BEST ESTIMATE.
1 Under 2 years
2 2 to 15 years
3 16-64 years
4 65 years or older

* = not on the datafile
IF Age of Respondent is 16 or over THEN

[Marital12]
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?
1 Yes
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

* = not on the datafile
RELATIONSHIP BETWEEN HOUSEHOLD MEMBERS COLLECTED FOR ALL

IF Person > 1 THEN

[R]
SHOW CARD A2
How is (name of respondent’s) related to (name)? Just tell me the number on this card.
1 husband/wife
2 legally recognised civil partner
3 partner/cohabitee
4 natural son/daughter
5 adopted son/daughter
6 Foster son / daughter
7 stepson/daughter/child of partner
8 son-in-law /daughter-in-law
9 natural parent
10 adoptive parent
11 foster parent
12 step-parent/parent's partner
13 parent-in-law
14 natural brother/sister (ie. both natural parents the same)
15 Half-brother / Half-sister (ie. one natural parent the same)
16 Step-brother / Step-sister (ie. no natural parents the same)
17 adopted brother/sister
18 foster brother/sister
19 brother/sister-in-law
20 grandchild
21 grandparent
22 other relative
23 other non-relative

END OF HOUSEHOLD COMPOSITION GRID

ASK ALL

[HHldr]
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

* = not on the datafile
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.

ASK ALL AGED 16+

[OwnORent08]
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

* = not on the datafile
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.
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:
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

* = not on the datafile
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

INTERVIEWER: I'm now going to ask you some questions about your local area
ASK ALL

[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?
INTERVIEWER: 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

Overall, how satisfied or dissatisfied are you with each of these services?

[LocHealth]
SHOW CARD A5
Local health services
1 Very satisfied
2 Fairly satisfied
3 Neither satisfied nor dissatisfied
4 Fairly dissatisfied
5 Very dissatisfied
6 No opinion

[RefColl]
SHOW CARD A5
Refuse collection

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**[LocSchol]**

SHOW CARD A5

Local schools

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**[SocWork]**

SHOW CARD A5

Social care or social work services

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**[Transprt]**

Public transport

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**[StrtCln]**

Street cleaning

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**[SportLei]**

SHOW CARD A5

Council sports and leisure facilities

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**[Librar]**
SHOW CARD A5
Council libraries

**[MusGall]**
SHOW CARD A5
Council museums and galleries

**[ParkSpa]**
SHOW CARD A5
Council parks and open spaces

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

*: 1..97, NODONTKNOW, NOREFUSAL
IF HQResp = 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 (your/your joint incomes).
INTERVIEWER: THIS QUESTION REFERS TO INCOME FROM ALL THE SOURCES LISTED 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

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: 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]
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]
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

* = not on the datafile
IF HWk4Look12 = No THEN
[HWaitJb12]
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]
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]
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 (HWWaitJb12 <> Yes) THEN
[HEverJob]
Have/has you/name (Household Reference Person) ever been in paid employment or self-employed?
1  Yes
2  No

IF (HWaitJb12 = Yes) THEN
[HOtherPaid]
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 (HOtherPaid = Yes) THEN
[HPayLast]
Which year did you/name (Household Reference Person) leave your/his/her last paid job?
WRITE IN.
Numeric: 1920..2001 Decimals: 0

* = not on the datafile
IF HPayLast <= 8 years ago THEN

[HPayMon]
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]*
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]
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]*
What kind of work do/did/does/will you/name (Household Reference Person) do most of the time?
Text: Maximum 50 characters

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

* = not on the datafile
[HEmploye]
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]
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]
Are/Were/Will you/name (Household Reference Person) be a ...READ OUT...
1 manager
2 foreman or supervisor
3 or other employee?

[HNEmplee]
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]
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]*
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
[HSifWtMa]*
What do/did/will you/name (Household Reference Person) make or do in your business?
Text: Maximum 100 characters

* = not on the datafile
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 (his/her) job
details when you interview (him/her) in person.

1  Yes
2  No
Individual Interview

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]*
Can I just check, is your age: (age from HHGrid)?
1 Yes
2 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+)

* = not on the datafile
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**]

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)

What (else) is the matter with you?
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 Mental handicap
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

---

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

* = not on the datafile
26 Stomach ulcer/ulcer (nes)/abdominal hernia/rupture
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] (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

* = not on the datafile
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

* = not on the datafile
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

* = not on the datafile
Respiratory symptoms and Cardiovascular Disease– All Versions

ASK ALL AGED 16+

[Flemwint]
Do you **usually** bring up any phlegm from your chest, first thing in the morning in winter?
1 Yes
2 No

[Flemdawn]
Do you **usually** bring up any phlegm from your chest, during the day or at night in the winter?
1 Yes
2 No

IF Flemwint=Yes OR FlemDawn=Yes THEN

[Flemreg]
Do you bring up phlegm like this on most days for as much as three months each year?
1 Yes
2 No

IF Uphillw <> Cannot walk THEN

[Windhila]
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

IF Windhila = Yes, Never walks uphill or hurries or Don't know THEN

[WindPeer]
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

IF Windpeer = Yes or No THEN

[Windpace]
Do you have to stop for breath when walking at your own pace on level ground?
1 Yes
2 No

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

[Everangi]
Have you ever had angina?
1 Yes

* = not on the datafile
2 No

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

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

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

[Everoht]
...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

ASK ALL AGED 16+
[Everstro]
Have you ever had a stroke?
1 Yes
2 No

[Everdi]
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 = Yes THEN
[DocAngi]
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]
Have you had angina during the past 12 months?
1  Yes
2  No

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

IF Everireg = Yes THEN
[Docireg]
Were you told by a doctor that you had abnormal heart rhythm?
1  Yes
2  No

IF Docireg = Yes THEN
[Recireg]
Have you had abnormal heart rhythm during the past 12 months?
1  Yes
2  No

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

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

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

IF Docstro = Yes THEN
[Recstro]
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]
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]
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 (Sex = 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]
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]
Are you currently taking any medicines, tablets or pills for high blood pressure?
1 Yes
2 No

IF medicinbp = No, Don’t know or refused THEN

[stillbp]
ASK OR RECORD: Do you still have high blood pressure?
1 Yes
2 No

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

IF pastabbp = Yes THEN

[fintabc]*

* = not on the datafile
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
2  lack of improvement
3  other problem
4  Respondent decided to stop: because felt better
5  ... for other reason
6  Other reason

ASK ALL 16+ WITH DIABETES (IF Everdi = Yes THEN)
[DocInfo1]
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 (Sex = Female) THEN
[PregDi]
Can I just check, were you pregnant when you were told that you had diabetes?
1  Yes
2  No

IF PregDi= Yes THEN
[NoPregDi]
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]
(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]
Are you currently taking any medicines, tablets or pills (other than insulin injections) for diabetes?
1  Yes
2  No

* = not on the datafile
ASK ALL 16+ WITH A HEART MURMUR (IF Evermur = Yes)

[Murdoc]
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 = 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]
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]
Have you had a heart murmur during the past twelve months?
1 Yes
2 No

[Murpill]
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 COPDTTrt = 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

* = not on the datafile
Asthma Module

ASK ALL AGED 0+
[EverW]
I am now going to ask you some questions about your breathing.
Have you 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

[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.

[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?

* = not on the datafile
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) AND RecAtW < 4

[TrtWze]
SHOW CARD C1
Have you received any treatment or advice for asthma/wheezing from any of the people on this card?
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 >5 and (TweWz = Yes OR ConDR = Yes) THEN

[SchAb]
Over the last 12 months, how many days has (asthma/wheezing/whistling) caused (him/her) to be absent from school?
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
**Adult physical activity module (16+)**

[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  

* = not on the datafile
**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**
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**
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**
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**
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**
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]
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
2  Cycling
3  Workout at a gym/Exercise bike/ Weight training
4  Aerobics/Keep fit/Gymnastics/ Dance for fitness
5  Any other type of dancing
6  Running/ Jogging
7  Football/ Rugby
8  Badminton/ Tennis
9  Squash
10 Exercises (e.g. press-ups, sit ups)

* = not on the datafile
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
1 Bowls
2 Fishing/angling
3 Golf
4 Hillwalking/rambling
5 Snooker/billiards/pool
6 Aqua-robics / aquafit / exercise class in water
7 Yoga/pilates
8 Athletics
9 Basketball
10 Canoeing/Kayaking
11 Climbing
12 Cricket
13 Curling
14 Hockey
15 Horse riding
16 Ice skating
17 Martial arts including Tai Chi
18 Netball
19 Powerboating/jet skiing
20 Rowing
21 Sailing/windsurfing
22 Shinty
23 Skateboarding/inline skating
24 Skiing/snowboarding
25 Subaqua
26 Surfing/body boarding
27 Table tennis
28 Tenpin bowling
29 Volleyball
30 Waterskiing

ASK ALL AGED 16+
REPEAT FOR UP TO 6 ADDITIONAL SPORTS, WHEN ANSWER YES AT EACH SUCCESSIVE 'OTHER ACTIVITY' VARIABLE OActQ11 to 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

Up to 6 other activities can be recorded. These are then assigned a code in the office.
For each activity, a set of questions about number of days/hours/minute and effort was asked:

[swimocc to wskiocc]
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]
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]
INTERVIEWER: RECORD MINUTES HERE.
Range: 0..59

[swimeff to wskieff]
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/plates, 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

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

* = not on the datafile
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) [REASSPR3]
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 [REASSPR10]
11. For health reasons / to improve health [REASSPR11]
12. For peace and quiet [REASSPR12]
13. To de-stress, relax and unwind [REASSPR13]
14. To feel closer to nature [REASSPR14]
15. Other (RECORD AT NEXT QUESTION) [REASSPR15]

[REASSPRTO]
INTERVIEWER: WRITE IN OTHER ANSWER GIVEN

[MREASSPR3] 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)

[MREASSPR3]
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]

* = not on the datafile
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 [Barsprt10]
11 It's difficult to find the time [Barsprt11]
12 I already do enough [Barsprt12]
13 Other (RECORD AT NEXT QUESTION) [Barsprt13]
14 No reason [Barsprt14]

[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+
[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

* = not on the datafile
[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 [if over 65] 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..24

[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 he/she) done a continuous walk that lasted at least 5 minutes
1 Yes
2 No

IF Wlk5Ch = Yes THEN
[Wlk5Day]
On which 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 Monday
2 Tuesday
3 Wednesday
4 Thursday
5 Friday
6 Saturday
7 Sunday
8 Every day

[DayWlkT]
SHOW CARD F1
On (day(s) mentioned in Wlk5Day), how long did (you/he/she) 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 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 2-15

[Sport]*
I would now like to ask (you/name of child) about any sports or exercise activities that (he/she/you) have/has done. I will then go on to ask about other active things (he/she/you) 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
1 Continue

[Spt1ch]
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/he/she) 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)

[DaySprt]
On which days did (you/name of child) do any of these sports or exercise activities? Sports and exercise activities are shown on Showcard F2. (Please remember not to count things done as part of school lessons)
1 Monday
2 Tuesday
3 Wednesday

* = not on the datafile
4 Thursday
5 Friday
6 Saturday
7 Sunday
8 Everyday

Show Card F1
On (Insert day in the last week selected at DaySprt ), how long did (you/he/she) spend doing sports or exercise activities?
Please give an answer from Showcard F1.

(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 LWkSp = 4 hours or more then
WkSpH
How long did you 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
OatDay
Show Card F3 again
On which days in the last week did (you/name of child) do any of these active things? Other active things are shown on Showcard F3. (Please remember not to count things done as part of school lessons)

Interviewer note: Do not include any activities already covered under sports and exercise activities
1 Monday
2 Tuesday
3 Wednesday
4 Thursday
5 Friday
6 Saturday
7 Sunday
8 Everyday
9 Did not do these active things on any day last week.

* = not on the datafile
[OatTm]
On [Insert day in the last week selected at DayAct] how long did (you/he/she) spend doing these types of activities?
Please give an answer from Showcard F1.

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 LWkSp = 4 hours or more THEN
[OAT4Hrs]
How long did you spend doing these sports or exercise activities on each weekday?
RECORD HOURS SPENT BELOW. RECORD MINUTES AT NEXT QUESTION
Range: 4..12

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

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
[SchADays]
On which 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  Monday
2  Tuesday
3  Wednesday
4  Thursday
5  Friday
6  Saturday
7  Sunday
8  Everyday

* = not on the datafile
**SchATm**

SHOW CARD F1 AGAIN

On {Insert day in the last week selected at SchDays}, how long did (you/he/she) spend being active in lessons at school?

Please give an answer from Showcard F1.

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 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 say how long)

IF SchTime = 4 hours or more THEN

**SchATmH**

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

**SchATmM**

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/he/she) 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

* = not on the datafile
[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 if 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]²
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 if 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

¹ New question for 2012
² New question for 2012

* = not on the datafile
[WESit2M2]
RECORD MINUTES HERE.
Range: 0..59

* = not on the datafile
Eating habits module (2-15) (Version A – all age 2+)

ASK ALL AGED 2-15 AND AGED 16+ VERSION A ONLY
[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 AND AGED 16+ VERSION A ONLY
[Milk08]¹
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)
8 (Does not have usual type)
9 (Does not drink milk)

¹ The question wording and answer categories changed in 2008.

*= not on the datafile
[Cereal08]\(^1\)
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 AND AGED 16+ VERSION A ONLY**
[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

[Potatoes]
SHOW CARD G2

\(^1\) The question wording and answer categories changed in 2008.
Other than chips, how often do you eat **potatoes, pasta or rice**?

**[Meat03]**
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]**
SHOW CARD G2
How often do you eat **white fish** such as cod, haddock, whiting, sole or plaice, including fresh or frozen fish?

**[FshOil03]**
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

* = not on the datafile
[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 (he/she/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 AND AGED 16+ VERSION A ONLY  
[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 ALL VERSIONS (2+)

ASK ALL AGED 2+
[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+
[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+
[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+

*= not on the datafile
[VegDish]
(Apart from anything you have already told me about, 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+
[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]
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+
[Frt]
Did you eat any fresh fruit yesterday? Don't count fruit salads, fruit pies, etc.
1 Yes
2 No
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)

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)

What was the name of this fruit?
Text: Maximum 50 characters

How much of this fruit did you eat?
Text: Maximum 50 characters

REPEAT FOR UP TO 15 ADDITIONAL FRUITS

Did you eat any other fresh fruit yesterday?

1 Yes
2 No

ASK ALL AGED 2+

Did you eat any dried fruit yesterday? Don't count dried fruit in cereal, cakes, etc.

1 Yes
2 No

IF FrtDry = Yes THEN

SHOW CARD WITH SPOON PICTURES

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+
[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+
[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 2+
[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 LILAC SELF-COMPLETION BOOKLET FOR YOUNG ADULTS

**ASK ALL AGED 20+ (OR AGED 18-19 IF BEING ASKED IN MAIN INTERVIEW)**

[SmokPreAm]$\^{5}$

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]$^{6}$

May I just check, have you ever smoked a cigarette, a cigar or a pipe?

CODE ALL THAT APPLY.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes: cigarette</td>
</tr>
<tr>
<td>2</td>
<td>Yes: cigars</td>
</tr>
<tr>
<td>3</td>
<td>Yes: pipe</td>
</tr>
<tr>
<td>4</td>
<td>No</td>
</tr>
</tbody>
</table>

**IF** ANY SmokEv08 to Smokev10 = yes **THEN** SmokEver = Yes; **IF** SmokEv08 = 4 **THEN** SmokEver = N

**IF** SmokEver = Yes **THEN**

[SmokNow15]$^{6}$

Do you smoke cigarettes nowadays?

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>2</td>
<td>No</td>
</tr>
</tbody>
</table>

**IF** SmokeNow = Yes **THEN**

[DlySmoke]$^{6}$

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]$^{6}$

*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.*

* = not on the datafile
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]$  
ENTER AMOUNT IN GRAMS  
Range: 0..100

IF DlyEst = Ounces OR Don’t know THEN
[DlyOz]  
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]$  
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]$  
ENTER AMOUNT IN GRAMS  
Range: 0..100

IF WkndEst = Ounces THEN
[WkndOz]$  
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.

* = not on the datafile
3 SPONTANEOUS: Never really smoked cigarettes, just tried them once or twice

IF SmokeReg = Smoked cigarettes regularly THEN

[NumSmok]$^6$
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]$^6$
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]$^6$
Enter amount in grams
Range: 0..100

IF NumEst = Ounces THEN

[NumOz]$^6$
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

IF (SmokeNow = Yes) OR (SmokeReg = Smoked cigarettes regularly) THEN

[StartSmk]$^6$

$^6$ 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 "$^6$" 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.
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]
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]
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]
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

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

¹ New question in 2014, revised in 2016
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]¹
Do you use an e-cigarette or vaping device at all nowadays?
1 Yes
2 No

IF ECigNw16=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

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

¹ New question in 2014, revised in 2016
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.

INTERVIEWER: Record *months* here.

INTERVIEWER: Enter 0 if less than 1 month.

IF ECigReg=used e-cigarettes regularly or occasionally

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.

INTERVIEWER: Record *months* here.

INTERVIEWER: Enter 0 if less than 1 month.

IF ECigReg AND StartSmk=SAME

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

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
2 Yes, nicotine patches that you stick on your skin
3 Yes, nasal spray/nicotine inhaler
4 Yes, lozenge/microtab
5 Yes, Champix/Varenicline
6 Yes, Zyban/Bupropion
7 Yes, electronic cigarette/Vaping devices
8 Yes, other
9 No

* = not on the datafile
[NRTOth]*
What other products did you use?

ASK IF (StopLong > 2 OR EndSmoke = RESPONSE) AND response given at UseNRT
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
2 Yes, GP practice nurse
3 Yes, GP
4 Yes, specialist smoking cessation advisor
5 Yes, other
6 No

[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
2 At work
3 In other people’s homes
4 In cars, vans etc
5 Outside of buildings (e.g. pubs, shops, hospitals)
6 In other public places
7 No, none of these

IF EXPOSED TO SMOKE IN ANY PLACES (IF Passive7=0 OR Don’t know AND Age>=13)
[Bother]§

§ 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

* = not on the datafile
Does this bother you at all?
1   Yes
2   No

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.

* = not on the datafile
Drinking module (All Versions)

IF (Age of Respondent is 18 years or over) OR (BookChk = Asked)
[Drink]$^8$
   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]$^8$
   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]$^8$
   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.

$^8$ 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.

$^*$ = not on the datafile
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

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
2. Small cans
3. Large cans
4. Bottles

IF NbeerM = Half pints (IF NbeerM1=1) THEN

ASK OR CODE: How many half pints of NORMAL STRENGTH BEER, LAGER, STOUT, CIDER or SHANDY have you usually drunk on any one day?
Range: 1..97

IF NbeerM = Small cans (IF NbeerM2=1) THEN

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

ASK OR CODE: How many large cans of NORMAL STRENGTH BEER, LAGER, STOUT or CIDER have you usually drunk on any one day?
IF NbeerM = Bottles (IF NbeerM4=1) THEN

[ nb ergbt ] 2
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
2 Small cans
3 Large cans
4 Bottles

IF Sbeer = 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

* = not on the datafile

72
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]§  
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.  
Range: 1..97

§ 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 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]$^2$
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 and champagne, during the last 12 months?

IF (Wine=Almost every day...Once or twice a year) THEN
[WineQ]$^2$
How much wine, including Babycham and champagne, 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
$^2$ 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.
$^2$ Question wording was revised in 2008.
IF WineQ = Bottle or parts of bottle OR Both bottles and glasses  

[WQBt]$^5$

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]$^5$

INTERVIEWER: Code the number of glasses (*drunk as glasses*).  
Range: 1.0..97.9

[WQGlz]$^5$

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] |

$^5$ 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 ‘$’ are combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+. See the separate derived variable listing for details of these combined variable names.
IF WQGlz1 = mentioned THEN  
   [Q250Glz]$ \{ 
   How many large glasses (250ml) have you usually drunk?  
   Range: 1.0..97.9
   
IF WQGlz2 = mentioned THEN  
   [Q75Glz]$ \{ 
   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]$ \{  
   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  
   2 Standard Bottles (275ml)  
   3 Large Bottles (700ml)  

   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).  
$2 18 and 19 year olds were either asked the smoking and drinking questions in the main interview, or in the self-completion booklet for young people, at the interviewers’ discretion. Variables marked here with ‘$’ 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.  

* = not on the datafile
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: Maximum 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

* = not on the datafile
How often have you had a drink of (name of ‘other’ alcoholic drink) in the last 12 months?

IF FreqB IN [Almost 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))
[DrinkOf]*
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 to 7 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
2 Monday

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* = not on the datafile
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
2 Strong beer/lager/cider
3 Spirits or liqueurs
4 Sherry, martini or buckfast
5 Wine
6 Alcopops/Pre-mixed alcoholic drinks
7 Other alcoholic drinks
8 Low alcohol drinks

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
2 Small cans
3 Large cans
4 Bottles

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

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

^ 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 'S' 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=Bottles (IF NBrL74 mentioned) THEN
[Nberqbt7]$ ¹
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]$ ⁶
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] $ ²
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
2 Small cans
3 Large cans
4 Bottles

IF SBrL7=Half pints (IF SBrL71 mentioned) THEN
[SBrL7Q1]$ ³
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]$ ⁴
ASK OR CODE: How many small cans of STRONG BEER, LAGER, STOUT or CIDER did you drink on that day?
Range: 1..97

IF SBrL7=Large cans (IF SBrL73 mentioned) THEN
[SBrL7Q3]$ ⁵
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

¹ No equivalent in self-completion questionnaire
² 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 'S' are combined with data from the self-completion booklet in the final dataset to allow analysis of all aged 16+.
³ See the separate derived variable listing for details of these combined variable names.
ASK OR CODE: How many bottles of STRONG BEER, LAGER, STOUT or CIDER did you drink on that day?
Range: 1..97

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

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
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.
Range: 1..97

IF DrnkTy=Sherry (IF DrnkTy04 mentioned) THEN
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

IF DrnkTy=Wine (IF DrnkTy05 mentioned) THEN
Still thinking about last (name of day) how much wine, including Babycham and champagne, 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

1 No equivalent in self-completion questionnaire
2 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
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.
¼ 750ml bottle = 2 glasses.
⅛ 750ml bottle = 1.5 glasses.
1 litre = 8 glasses.
½ litre = 4 glasses.
¼ litre = 2.5 glasses.
⅛ 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
[WL7Gi]8
INTERVIEWER: Code the number of glasses (drunk as glasses).
Range: 1.0..97.9

8 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 'S' 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.

* = not on the datafile
**[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)  
2. Standard glass (175ml)  
3. Small glass (125ml)

**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  
2. Standard bottles (275ml)  
3. Large bottles (700ml)

**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

---

* 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

* = not on the datafile
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

* = not on the datafile
**Dental Health**<sup>1</sup> (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 QUESTIONNAIRE¹

[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]
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]
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

IF (Wk4Lk12 = Yes OR WaitJb12 = Yes) THEN

[Wk2Str12]
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

¹ Economic activity questions changed in 2012

* = not on the datafile
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

* = not on the datafile
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

* = not on the datafile
**[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

* = not on the datafile
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 ] *

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]

* = not on the datafile

92
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

[Ethnic12]*  
SHOW CARD Q2  
What is your ethnic group?  
INTERVIEWER READ OUT: Choose ONE from A to E 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: Gypsy/Traveller  
5 A - White: Polish  
9 A - White: Other (WRITE IN)  
10 B - Mixed: Any mixed or multiple ethnic groups (WRITE IN)  
11 C - Asian: Pakistani, Pakistani Scottish or Pakistani British  
12 C - Asian: Indian, Indian Scottish or Indian British  
13 C - Asian: Bangladeshi, Bangladeshi Scottish or Bangladeshi British  
14 C - Asian: Chinese, Chinese Scottish or Chinese British  
15 C - Asian: Other (WRITE IN)  
16 D - African: African, African Scottish or African British  
17 D – African: Other (WRITE IN)  
17 E – Caribbean or Black: Caribbean, Caribbean Scottish or Caribbean British  
18 E – Caribbean or Black: Black, Black Scottish or Black British  
19 E – Caribbean or Black: Other (WRITE IN)  
20 F – Other ethnic group: Arab, Arab Scottish or Arab British  
21 F – Other ethnic group: other (WRITE IN)

IF Ethnic12=Other white background

[Othwhit]*  
WRITE IN ETHNIC GROUP  
Text: Maximum 60 characters

IF Ethnic12=Mixed background

[Othmix]*  
WRITE IN ETHNIC GROUP  
Text: Maximum 60 characters

* = not on the datafile
IF Ethnic12=Other Asian background
[OthAsi]*
WRITE IN ETHNIC GROUP
INTERVIEWER: Write in.
Text: Maximum 60 characters

IF Ethnic12=Other African background
[OthAfr]*
WRITE IN ETHNIC GROUP
INTERVIEWER: Write in.
Text: Maximum 60 characters

IF Ethnic12=Other Caribbean or Black background
[OthBlk]
WRITE IN ETHNIC GROUP
INTERVIEWER: Write in.
Text: Maximum 60 characters

IF Ethnic12=Other [Otheth]*
WRITE IN ETHNIC GROUP
Text: Maximum 60 characters

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

ASK ALL AGED 16+
[Religi09]
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]*
How would you describe your religion?
INTERVIEWER: Write in

IF Religi09=10 ‘another religion’ THEN
[Religio3]*
What is the name of the religion, religious denomination or body you belong to?

* = not on the datafile
INTERVIEWER: Write in

*Note: All other religion answers recorded under Religio2-Religio3 backcoded into Religio9*
Self-completion booklets admin

IF Age of Respondent is 13 years or over THEN
[SCIntro]*
PREPARE (PINK/BLUE/BURGANDY/GREEN) SELF-COMPLETION BOOKLET BY 
ENTERING SERIAL NUMBERS. CHECK YOU HAVE CORRECT PERSON NUMBER.

IF Age of Respondent is 18 or over AND IF (DrinkAny = Never) OR (DrinkOft=Once or twice a 
year OR Not at all in the last twelve months) (From Drinking module) THEN
[PagEx]*
INTERVIEWER NOTE: This respondent does not drink (or drinks once or twice a year or 
less). Cross out the Drinking Experiences questions before handing over the self-completion 
booklet.

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 green 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 (pink/blue.burgandy) booklet (for 13-15 year olds/for 
young adults/for adults) completed? 
1 Fully completed
2 Partially completed
3 Not completed

* = not on the datafile
IF SComp3=Partially completed OR Not completed THEN

[SComp6]
INTERVIEWER: Record why booklet not completed / partially completed.
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 booklet (no other reason given)
8 Other (SPECIFY)

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 pale yellow 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
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 booklet (no other reason given)
8 Other (SPECIFY)

IF SDQComp= Other THEN

[SDQComp0]*
PLEASE SPECIFY OTHER REASON:
Text: Maximum 60 characters

* = not on the datafile
Measurements module (All Versions) 
(Height 2+ & Weight 2+)

ASK ALL AGED 2+ 
[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 
[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

[RelHite]
INTERVIEWER CODE ONE ONLY
1 No problems experienced reliable height measurement obtained

Problems experienced - measurement likely to be:
2 Reliable
3 Unreliable

* = not on the datafile
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)
   2  Respondent is unsteady on feet
   3  Respondent cannot stand upright/too stooped
   4  Respondent is chairbound
   5  Child: subject would not stand still
   6  Ill or in pain
   7  Stadiometer faulty or not available
   8  Other – specify

IF (NoHitM = Other) THEN
   [NoHitMO]*
   PLEASE SPECIFY OTHER REASON.
   Text: Maximum 60 characters

* = not on the datafile
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.
(INTERVIEWER1: If respondent weighs more than 130kg (20 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

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.

1 This interviewer instruction only appears if the person being weighed is aged 6 or above.

* = not on the datafile
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,
2 carpet,
3 or neither?

**[RelWaitB]**
INTERVIEWER: Code one only.
1 No problems experienced, reliable weight measurement obtained
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)
2 Respondent is unsteady on feet
3 Respondent cannot stand upright
4 Respondent is chairbound
5 Respondent weighs more than 130 kg
6 Ill or in pain
7 Scales not working
8 Parent unable to hold child
9 Other – specify

IF NoWaitM = Other THEN

**[NoWaitMO]**
PLEASE SPECIFY OTHER REASON.
Text: Maximum 60 characters

* = not on the datafile
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

* = not on the datafile
Consents

ASK ALL AGED 16 +
[NHSCanA]*
We would like your consent for us to send your name, address and date of birth to the Information Services Division of NHS Scotland so they can link it with your NHS health records. These records hold data on you about medical diagnoses and in-patient and out-patient visits to hospital. They are linked with other information about cancer registration, GP registration and mortality. Please read this form, it explains more about what is involved.
INTERVIEWER: Give the respondent/s the pale green consent form (Scottish health records) and allow them time to read the information.

ASK ALL AGED 13-15
[NHSCanY]*
We would like your consent for us to send your name, address and date of birth to the Information Services Division of NHS Scotland so they can link it with your NHS health records. These records hold data on you about medical diagnoses and in-patient and out-patient visits to hospital. They are linked with other information about cancer registration, GP registration and mortality. Please read this form, it explains more about what is involved.
Please read this form, it explains more about what is involved.
INTERVIEWER: Give the child the lemon consent form (Scottish Health Records) and allow them time to read the information.

ASK PARENT/GUARDIAN OF CHILD AGED 0-13
[NHSCanC]*
We would like your consent for us to send (child’s) name, address and date of birth to the Information Services Division of NHS Scotland so they can link it with your NHS health records. These records hold data on you about medical diagnoses and in-patient and out-patient visits to hospital. They are linked with other information about cancer registration, GP registration and mortality. Please read this form, it explains more about what is involved.
Please read this form, it explains more about what is involved.
INTERVIEWER: Give the parent/guardian the lemon consent form (Scottish Health Records) and allow them time to read the information.

ASK ALL
[NHSCon]
INTERVIEWER: Did respondent give consent (on behalf of child’s name/children’s names)?
1 Consent given
2 Consent not given
IF NHSCo = Consent given THEN
   [NHSSig]
   Before I can pass on (your /name of child's) details, I have to obtain written consent from you.
   INTERVIEWER: Enter the respondent's serial number on the top of the consent form.
   Ask the (respondent/parent/guardian) to sign and date the form. Give the (respondent/parent/guardian) the top copy of the form to keep, you keep the white copy.
   Code whether signed consents obtained.
   1  Signed consents obtained
   2  No signed consents

ASK ALL AGED 16+
   [RelInterA]*
   In the future, the Scottish Government or other organisations may want to commission follow-up research among particular groups of the public 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 and carried out by reputable research organisations and that your privacy will be protected in the publication of any results given.
   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 with the permission of the Scottish Government for this purpose?
   Please read this form, it explains more about what is involved.
   INTERVIEWER: Give the respondent the pale blue consent form (Scottish Government follow up research) and allow them time to read the information.

ASK ALL AGED 13-15
   [RelInterY]*
   In the future, the Scottish Government or other organisations may want to commission follow-up research among particular groups of the public 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 and carried out by reputable research organisations and that your privacy will be protected in the publication of any results given.
   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 with the permission of the Scottish Government for this purpose?
   Please read this form, it explains more about what is involved.
   INTERVIEWER: Give the child the pink consent form (Scottish Government follow up research) and allow them time to read the information.

* = not on the datafile
ASK PARENT/GUARDIAN OF CHILD AGED 0-13
[ReInterC]*
In the future, the Scottish Government or other organisations may want to commission follow-up research among particular groups of the public 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 and carried out by reputable research organisations and that your privacy will be protected in the publication of any results given. Would you be willing to have (child’s name) name, contact details and relevant answers you have given during the interview passed on to the Scottish Government or other research agencies with the permission of the Scottish Government for this purpose? Please read this form, it explains more about what is involved.
INTERVIEWER: Give the parent/guardian the pink consent form (Scottish Government follow up research) and allow them time to read the information.

ASK ALL
[ReIntCon]
INTERVIEWER: Did respondent give consent (on behalf of child’s name/children’s names)?
1 Consent given
2 Consent not given

IF ReIntCon = Consent given THEN
[ReIntSig]
Before I can pass on (your /name of child’s/children’s) details, I have to obtain written consent from you.
INTERVIEWER: Enter the respondent's serial number on the top of the consent form. Ask (respondent / parent / guardian) to sign and date the form. Give the top copy of the form to the respondent. Code whether signed consents obtained.
1 Signed consents obtained
3 No signed consents

* The brackets around the text in this question only appear in main sample households where adults are also asked the preceding consent question.
Health Measurements and Samples
ALL 16+ IN SAMPLE B HOUSEHOLDS

[BimodInt]*
I am now going to ask you a few more questions and take some more measurements. Some people find these sensitive and prefer them to be carried out in private
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
2 High blood pressure
3 Other reason

[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
Blood Pressure

ALL SAMPLE B Age 16+ (EXCEPT PREGNANT WOMEN)

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

[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
2 Smoked
3 Drunk alcohol
4 Done vigorous exercise
5 (None of these)

[OMRONNo]
INTERVIEWER RECORD BLOOD PRESSURE EQUIPMENT SERIAL NUMBER:
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.

* = not on the datafile
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

* = not on the datafile
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

<table>
<thead>
<tr>
<th>Systolic</th>
<th>Diastolic</th>
<th>Pulse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avg</td>
<td>(Average Systolic reading)</td>
<td>(Average Diastolic reading)</td>
</tr>
<tr>
<td>i)</td>
<td>(First Systolic reading)</td>
<td>(First Diastolic reading)</td>
</tr>
<tr>
<td>ii)</td>
<td>(Second Systolic reading)</td>
<td>(Second Diastolic reading)</td>
</tr>
<tr>
<td>iii)</td>
<td>(Third Systolic reading)</td>
<td>(Third Diastolic reading)</td>
</tr>
</tbody>
</table>

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.

* = not on the datafile
Waist Circumference

ASK ALL SAMPLE B 16+ (EXCEPT PREGNANT WOMEN)

[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]
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]
ENTER REASON FOR NOT GETTING BOTH MEASUREMENTS
1 Both measurements refused
2 Attempted but not obtained
3 Measurement not attempted

* = not on the datafile
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
2. Respondent is confined to bed
3. Respondent is too stooped
4. Respondent did not understand the procedure
5. Respondent is embarrassed/sensitive about their size
6. No time/busy/already spent enough time on this survey
7. Other (SPECIFY AT NEXT QUESTION)

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)

[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 [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, which 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
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

* = not on the datafile
**IF SalIntr1=Agree THEN**

[SalWrit]*

INTERVIEWER CHECKLIST FOR CONSENT BOOKLET:
1. Enter Serial No at top of page 1 and 3.
2. Obtain respondent signature on page 3.
3. Sign and date page 3 yourself.
5. Circle code 01 at question 7 on page 1 of the Consent Booklet.
6. Turn to lab dispatch note and at Smoking status code 1 (or 2 depending on smoking status)

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 8 IN 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
4 Other (SPECIFY AT NEXT QUESTION)
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
ASK ALL SAMPLE B 16+
[CASIInst]*
I now have some questions for you to answer yourself, on the computer. The questions cover topics to do with depression, anxiety and self-harm. When you have finished the computer will lock away your answers and no one else will be able to see them, including me. Instructions about which keys to press will be shown on the computer screen. If you press the wrong key I can tell you how to change the answer. When you get to the end, please tell me and we will complete the rest of the interview with me asking you questions again.

INTERVIEWER: Only where necessary, ask respondent if they would like you to read the questions out to them.
Please code whether the self-completion is accepted or not:
1 Self-completion accepted by respondent
2 Self-completion to be read out by interviewer
3 Self-completion refused

If CASIInt=3 (refused)
[SCompNH]
INTERVIEWER: Record why the computer self-completion was not completed.
CODE ALL THAT APPLY
1 Eyesight problems [SCompNH1]
2 Language problems [SCompNH2]
3 Reading/writing/comprehension problems [SCompNH3]
4 Doesn't like computers [SCompNH4]
5 Respondent bored/fed up/tired [SCompNH5]
6 Questions too sensitive/invasion of privacy [SCompNH6]
7 Too long/too busy/taken long enough already [SCompNH7]
8 Refused to complete self-completion (no other reason given) [SCompNH8]
9 Other (SPECIFY) [SCompNH9]

{If CASI NOT REFUSED}
[CASIInst]*
INTERVIEWER: If the respondent is happy to do the self-completion themselves - hand over the computer now. Otherwise keep interviewing.

[DashInt]*
The next questions are for you to answer yourself. They all ask you to choose an answer from those listed on the screen. Please choose your answer by pressing the number next to the answer you want to give and then press the large key with the red sticker (the enter key). You don't have to answer every question - if you want to skip one the interviewer will tell you how to do this. Please ask the interviewer if you want any help. Now press 1 and then the key with the red sticker to continue.

[AnxInt]*
The next few questions ask about how you've been feeling lately and if you've been feeling depressed, worried or anxious.
Press 1 and then the key with the red sticker to continue.
Anxiety

[J1SC]
Have you been feeling anxious or nervous in the past month?
1 Yes, anxious or nervous
2 No

IF J1SC = No THEN

[J2SC]
In the past month, did you ever find your muscles felt tense or that you couldn't relax?
1 Yes
2 No

ALL

[J3SC]
Some people have phobias; they get nervous or uncomfortable about specific things or situations when there is no real danger. For instance they may get extremely anxious when in confined spaces, or they may have a fear of heights. Others become nervous at the sight of things like blood or spiders.
In the past month have you felt anxious, nervous or tense about any specific things when there was no real danger?
1 Yes
2 No

IF RESPONDENT HAS EXPERIENCED ANXIETY AND PHOBLA ((IF J1SC=Yes AND J3SC=Yes) OR (J2SC=Yes AND J3SC=Yes)) THEN

[J5SC]
In the past month, when you felt anxious/nervous/tense, was this always brought on by the phobia about some specific situation or thing or did you sometimes feel generally anxious/nervous/tense?
1 Always brought on by phobia
2 Sometimes generally anxious

IF J5SC = Sometimes generally anxious THEN

[J6SC]
The next questions are concerned with general anxiety/nervousness/tension only.
On how many of the past seven days have you felt generally anxious/nervous/tense?
1 4 days or more
2 1 to 3 days
3 None

IF RESPONDENT HAS EXPERIENCED GENERAL ANXIETY ONLY (IF (J1SC=Yes AND J3SC=No) OR (J2SC=Yes AND J3SC=No)) THEN

[J7SC]
On how many of the past seven days have you felt generally anxious/nervous/tense?
1 4 days or more
2 1 to 3 days
3 None

* = not on the datafile
IF RESPONDENT HAS EXPERIENCED ANXIETY FOR AT LEAST 1 DAY (IF J6SC IN [1..2] OR J7SC IN [1..2]) THEN

[J8SC]
In the past week, has your anxiety/nervousness/tension been:
RUNNING PROMPT
1 ...very unpleasant
2 ...a little unpleasant
3 ...or not unpleasant?

[J9SC]
In the past week, when you've been anxious/nervous/tense, have you had any of the symptoms shown below?
1 Heart racing or pounding
2 Hands sweating or shaking
3 Feeling dizzy
4 Difficulty getting your breath
5 Butterflies in stomach
6 Dry mouth
7 Nausea or feeling as though you wanted to vomit

IF RESPONDENT HAS EXPERIENCED ANY OF THE SYMPTOMS LISTED IF J9SC=Yes) THEN

[J9A...]
Which of these symptoms did you have when you felt anxious/nervous/tense?
CODE ALL THAT APPLY
1 Heart racing or pounding [J9A1SC]
2 Hands sweating or shaking [J9A2SC]
3 Feeling dizzy [J9A3SC]
4 Difficulty getting your breath [J9A4SC]
5 Butterflies in stomach [J9A5SC]
6 Dry mouth [J9A6SC]
7 Nausea or feeling as though you wanted to vomit [J9A7SC]

IF RESPONDENT HAS EXPERIENCED ANXIETY FOR AT LEAST 1 DAY (IF J6SC IN [1..2] OR J7SC IN [1..2]) THEN

[J10SC]
Have you felt anxious/nervous/tense for more than 3 hours in total on any one of the past seven days?
1 Yes
2 No

[J11SC]
How long have you had these feelings of general anxiety/nervousness/tension as you described?
1 Less than 2 weeks
2 2 weeks but less than 6 months
3 6 months but less than 1 year
4 1 year but less than 2 years
5 2 years or more

* = not on the datafile
Depression

[G1SC]
Almost everyone becomes sad, miserable or depressed at times.
Have you had a spell of feeling sad, miserable or depressed in the past month?
1 Yes
2 No

[G2SC]
During the past month, have you been able to enjoy or take an interest in things as much as you usually do?
1 Yes
2 No/no enjoyment or interest

IF G1SC = Yes THEN

[G4SC]
In the past week have you had a spell of feeling sad, miserable or depressed?
1 Yes
2 No

IF G2SC = No THEN

[G5SC]
In the past week have you been able to enjoy or take an interest in things as much as usual?
1 Yes
2 No/no enjoyment or interest

IF (G4SC = Yes) OR (G5SC = No/no enjoyment or interest) THEN

[G6SC]
Since last [Sunday / Monday / Tuesday / Wednesday / Thursday / Friday / Saturday] on how many days have you felt [depressed or unable to take an interest in things / sad, miserable or depressed / unable to enjoy or take an interest in things]?
1 4 days or more
2 1 to 3 days
3 None

[G7SC]
Have you felt [depressed or unable to take an interest in things / sad, miserable or depressed / unable to enjoy or take an interest in things] for more than 3 hours in total (on any day in the past week)?
1 Yes
2 No

[G9SC]
In the past week when you felt sad, miserable or depressed/unable to enjoy or take an interest in things, did you ever become happier when something nice happened, or when you were in company?
1 Yes, at least once
2 No

* = not on the datafile
[G10SC]
How long have you been feeling sad, miserable or depressed/unable to enjoy or take an interest in things as you have described?
1  Less than 2 weeks
2  2 weeks but less than 6 months
3  6 months but less than 1 year
4  1 year but less than 2 years
5  2 years but less than 5 years
6  5 years but less than 10 years
7  10 years or more
Self Harm

[DSHIntro]*
There may be times in everyone’s life when they become very miserable and depressed and may feel like taking drastic action because of these feelings
1 Continue

[DSH4SC]
Have you ever made an attempt to take your life, by taking an overdose of tablets or in some other way?
1 Yes
2 No

IF DSH4SC = Yes THEN
[DSH4aSC]
When was this? Please tell us about the most recent time
1 In the last week?
2 In the last year?
3 Some other time?

ALL
[DSH5SC]
Have you ever deliberately harmed yourself in any way but not with the intention of killing yourself?
1 Yes
2 No

IF DSH5SC = Yes THEN
[DSH5aSC]
When was this? Please tell us about the most recent time
1 In the last week?
2 In the last year?
3 Some other time?

DISPLAY IF DSH4aSC = ‘in the last week’ OR ‘in the last year’ THEN
[DSHExit]*
The sorts of thoughts and feelings we have talked about here are very serious and it is important that you talk to someone, for example a doctor or The Samaritans, if you find yourself thinking them.

ASK ALL
[DashLeaf]*
INTERVIEWER: PLEASE HAND OVER THE USEFUL CONTACTS LEAFLET TO RESPONDENTS BEFORE CONTINUING. IF THE RESPONDENT APPEARS UPSET OR DISTRESSED THEN YOU MIGHT NEED TO GIVE THEM SOME TIME TO COMPOSE THEMSELVES BEFORE CARRYING ON WITH THE REST OF THE INTERVIEW.
Final

[BioEnd]*
Those are all the questions I wanted to ask you.
INTERVIEWER: MAKE SURE THE RESPONDENT HAS:
- COPIES OF THEIR CONSENT FORMS
- MEASUREMENT RECORD CARD
- USEFUL CONTACTS LEAFLET

[BioEnd2]*
INTERVIEWER: Before you leave make sure you have:
1. Office copies of consent forms
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

* = not on the datafile
Here are some questions for you to answer on your own.

We are interested in your honest answers.

We will not tell anyone what your answers are.

You do not have to answer all the questions. If you want to miss a question, please just leave it out and move to the next one.

Look at the instructions on the next page and read what to do.

Ask the interviewer for help if you do not understand a question or are not sure what to do.

Thank you for taking part in this survey

Scottish Health Survey 2018

Booklet for 13-15 year olds
How to answer these questions

- Please read each question carefully
- All of the questions can be answered by putting a tick in the box next to the answer that applies to you like this

Yes

No
General health over the last few weeks

Please read this carefully:
We should like to know how your health has been in general over the past few weeks. Please answer ALL the questions by ticking the box under the answer which you think most applies to you.

 HAVE YOU RECENTLY:

<table>
<thead>
<tr>
<th>Question</th>
<th>Tick ONE box</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1. Been able to concentrate on whatever you’re doing?</td>
<td>Better than usual</td>
</tr>
<tr>
<td>Q2. Lost much sleep over worry?</td>
<td>Not at all</td>
</tr>
<tr>
<td>Q3. Felt you were playing a useful part in things?</td>
<td>More so than usual</td>
</tr>
<tr>
<td>Q4. Felt capable of making decisions about things?</td>
<td>More so than usual</td>
</tr>
<tr>
<td>Q5. Felt constantly under strain?</td>
<td>Not at all</td>
</tr>
<tr>
<td>Q6. Felt you couldn’t overcome your difficulties?</td>
<td>Not at all</td>
</tr>
</tbody>
</table>
HAVE YOU RECENTLY:

<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Options</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q7.</td>
<td>Been able to enjoy your normal day-to-day activities?</td>
<td>More so than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Same as usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Less so than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Much less than usual</td>
<td></td>
</tr>
<tr>
<td>Q8.</td>
<td>Been able to face up to your problems?</td>
<td>More so than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Same as usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Less able than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Much less able</td>
<td></td>
</tr>
<tr>
<td>Q9.</td>
<td>Been feeling unhappy and depressed?</td>
<td>Not at all</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>No more than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rather more than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Much more than usual</td>
<td></td>
</tr>
<tr>
<td>Q10.</td>
<td>Been losing confidence in yourself?</td>
<td>Not at all</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>No more than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rather more than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Much more than usual</td>
<td></td>
</tr>
<tr>
<td>Q11.</td>
<td>Been thinking of yourself as a worthless person?</td>
<td>Not at all</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>No more than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rather more than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Much more than usual</td>
<td></td>
</tr>
<tr>
<td>Q12.</td>
<td>Been feeling reasonably happy, all things considered?</td>
<td>More so than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>About same as usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Less so than usual</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Much less than usual</td>
<td></td>
</tr>
</tbody>
</table>

General Health Questionnaire (GHQ-12)
©David Goldberg 1978; reproduced by permission of NFER-NELSON. All rights reserved.
Please read this carefully:
Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks.

**Q13** I've been feeling optimistic about the future

<table>
<thead>
<tr>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Q14** I've been feeling useful

<table>
<thead>
<tr>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Q15** I've been feeling relaxed

<table>
<thead>
<tr>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Q16** I've been feeling interested in other people

<table>
<thead>
<tr>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Q17** I've had energy to spare

<table>
<thead>
<tr>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Q18** I've been dealing with problems well

<table>
<thead>
<tr>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

**Q19** I've been thinking clearly

<table>
<thead>
<tr>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>
Please read this carefully:
Below are some statements about feelings and thoughts.
Please tick the box that best describes your experience of each over the last 2 weeks.

Tick ONE box

<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q20</td>
<td>I've been feeling good about myself</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q21</td>
<td>I've been feeling close to other people</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q22</td>
<td>I've been feeling confident</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q23</td>
<td>I've been able to make up my own mind about things</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q24</td>
<td>I've been feeling loved</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q25</td>
<td>I've been interested in new things</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q26</td>
<td>I've been feeling cheerful</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Now go to Q27 on page 5 ▼
And now a question about physical activity.

Q27 The government advises people to spend a certain amount of time doing moderate physical activity to help them stay healthy. This includes bike riding, swimming, playing tennis or any other activity that makes them breathe slightly faster.

How much time per day do you think people your age are advised to spend doing this?

Please write in time (you can either write your answer in minutes, hours or both).

Thank you for answering these questions. Please give the booklet back to the interviewer.
How to fill in this questionnaire

A Most of the questions on the following pages can be answered by simply ticking the box below or alongside the answer that applies to you. You do not have to answer every question.

Example:

Do you feel that you lead a
- Very healthy life
- Fairly healthy life
- Not very healthy life
- An unhealthy life

Tick ONE box

B On most pages you should answer ALL the questions but sometimes you will find an instruction next to the box you have ticked telling you to go to another question.

By following the instructions carefully you will miss out questions which do not apply to you.

Example:

Tick ONE box

Yes → Go to Q4
No → Go to Q5
GENERAL HEALTH OVER THE LAST FEW WEEKS

Please read this carefully:
We should like to know how your health has been in general over the past few weeks. Please answer ALL the questions by ticking the box below the answer which you think most applies to you.

HAVE YOU RECENTLY:

<table>
<thead>
<tr>
<th>Question</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Q1 Been able to concentrate on whatever you’re doing?</td>
<td>Better than usual 1</td>
</tr>
<tr>
<td>Q2 Lost much sleep over worry?</td>
<td>Not at all 1</td>
</tr>
<tr>
<td>Q3 Felt you were playing a useful part in things?</td>
<td>More so than usual 1</td>
</tr>
<tr>
<td>Q4 Felt capable of making decisions about things?</td>
<td>More so than usual 1</td>
</tr>
<tr>
<td>Q5 Felt constantly under strain?</td>
<td>Not at all 1</td>
</tr>
<tr>
<td>Q6 Felt you couldn’t overcome your difficulties?</td>
<td>Not at all 1</td>
</tr>
</tbody>
</table>
HAVE YOU RECENTLY:

Q7  Been able to enjoy your normal day-to-day activities?

Tick ONE box

- More so than usual
- Same as usual
- Less so than usual
- Much less than usual

Q8  Been able to face up to your problems?

Tick ONE box

- More so than usual
- Same as usual
- Less able than usual
- Much less able

Q9  Been feeling unhappy and depressed?

Tick ONE box

- Not at all
- No more than usual
- Rather more than usual
- Much more than usual

Q10 Been losing confidence in yourself?

Tick ONE box

- Not at all
- No more than usual
- Rather more than usual
- Much more than usual

Q11 Been thinking of yourself as a worthless person?

Tick ONE box

- Not at all
- No more than usual
- Rather more than usual
- Much more than usual

Q12 Been feeling reasonably happy, all things considered?

Tick ONE box

- More so than usual
- About same as usual
- Less so than usual
- Much less than usual
Please read this carefully:
Below are some statements about feelings and thoughts.
Please tick the box that best describes your experience of each over the last 2 weeks.

<table>
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<tr>
<th>Question</th>
<th>Statement</th>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
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<td>Q13</td>
<td>I've been feeling optimistic about the future</td>
<td>1</td>
<td>2</td>
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<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q14</td>
<td>I've been feeling useful</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q15</td>
<td>I've been feeling relaxed</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q16</td>
<td>I've been feeling interested in other people</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q17</td>
<td>I've had energy to spare</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q18</td>
<td>I've been dealing with problems well</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q19</td>
<td>I've been thinking clearly</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
Please read this carefully:
Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks.

<table>
<thead>
<tr>
<th>Q</th>
<th>Statement</th>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q20</td>
<td>I've been feeling good about myself</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Q24</td>
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<tr>
<td>Q25</td>
<td>I've been interested in new things</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q26</td>
<td>I've been feeling cheerful</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)
© NHS Health Scotland, University of Warwick and University of Edinburgh, 2006, all rights reserved.
Please read this carefully:
The next questions ask about whether you, or anyone in your household, worry about being able to buy enough food. They ask whether you have enough money to buy the quantity of food your household needs, rather than whether you have enough money to eat a nutritious or balanced diet.

During the last 12 months, was there a time when:

Q27 You were worried you would run out of food because of a lack of money or other resources?

Tick ONE box

Yes [ ] Go to Q28  
No [ ] Go to Q30

Q28 You ate less that you thought you should because of a lack of money or other resources?

Tick ONE box

Yes [ ] Go to Q29  
No [ ] Go to Q30

Q29 Your household ran out of food because of lack of money or other resources?

Tick ONE box

Yes [ ]  
No [ ]

EVERYONE PLEASE ANSWER

Q30 And now a question about physical activity.
The government advises people to spend a certain amount of time doing moderate physical activity to help them stay healthy. This includes brisk walking, heavy gardening or any other activity that makes you breathe slightly faster than usual.

How much time per week do you think people your age are advised to spend doing this?

Please write in time (You can either write your answers in minutes, hours or both).

Hours
Minutes

Q31 Which of the following options best describes how you think of yourself?

Tick ONE box

Heterosexual or Straight [ ]
Gay or Lesbian [ ]  
Bisexual [ ]
Other [ ]

Q32 How would you describe your gender identity?

Tick ONE box

Man / Boy [ ]
Woman / Girl [ ]
In another way [ ]

If you would like to, please write in the other words you would use below:

THANK YOU FOR TAKING PART
Scottish Health Survey 2018

Booklet for parents of 4-12 year olds

How to fill in this questionnaire.

The questions in this booklet can be answered by ticking the box below the answer that applies. You do not have to answer every question.

Example:

Tick ONE box on each row

<table>
<thead>
<tr>
<th>Very healthy life</th>
<th>Fairly healthy life</th>
<th>Not very healthy life</th>
<th>An unhealthy life</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Do you feel that you lead a...
Strengths and Difficulties Questionnaire

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft!

Please give your answers on the basis of the child’s behaviour over the last six months.

<table>
<thead>
<tr>
<th>Item</th>
<th>1 Not true</th>
<th>2 Somewhat true</th>
<th>3 Certainly true</th>
</tr>
</thead>
<tbody>
<tr>
<td>Considerate of other people’s feelings</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restless, overactive, cannot stay still for long</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Often complains of headaches, stomach-aches or sickness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shares readily with other children (treats, toys, pencils etc.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Often has temper tantrums or hot tempers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rather solitary, tends to play alone</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Generally obedient, usually does what adults request</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Many worries, often seems worried</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Helpful if someone is hurt, upset or feeling ill</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Constantly fidgeting or squirming</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has at least one good friend</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Often fights with other children or bullies them</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Often unhappy, down-hearted or tearful</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Generally liked by other children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Easily distracted, concentration wanders</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nervous or clingy in new situations, easily loses confidence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kind to younger children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Often lies or cheats</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Picked on or bullied by other children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Often volunteers to help others (parents, teachers, other children)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Thinks things out before acting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Steals from home, school or elsewhere</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gets on better with adults than with other children</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Many fears, easily scared</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sees tasks through to the end, good attention span</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Overall, do you think that your child has difficulties in one or more of the following areas: emotions, concentration, behaviour or being able to get on with other people?

- No [ ] 1 Go to questions on page 3
- Yes – minor difficulties [ ] 2
- Yes – definite difficulties [ ] 3 Go to next question
- Yes – severe difficulties [ ] 4

If you have answered “Yes”, please answer the following questions about these difficulties:

How long have these difficulties been present?

- Less than a month [ ] 1
- 1-5 months [ ] 2
- 6-12 months [ ] 3
- Over a year [ ] 4

Do the difficulties upset or distress your child?

- Not at all [ ] 1
- Only a little [ ] 2
- Quite a lot [ ] 3
- A great deal [ ] 4

Do the difficulties interfere with your child's everyday life in the following areas?

- Home life
  - Not at all [ ] 1
  - Only a little [ ] 2
  - Quite a lot [ ] 3
  - A great deal [ ] 4
- Friendships
  - Not at all [ ] 1
  - Only a little [ ] 2
  - Quite a lot [ ] 3
  - A great deal [ ] 4
- Classroom learning
  - Not at all [ ] 1
  - Only a little [ ] 2
  - Quite a lot [ ] 3
  - A great deal [ ] 4
- Leisure activities
  - Not at all [ ] 1
  - Only a little [ ] 2
  - Quite a lot [ ] 3
  - A great deal [ ] 4

Do the difficulties put a burden on you or the family as a whole?

- Not at all [ ] 1
- Only a little [ ] 2
- Quite a lot [ ] 3
- A great deal [ ] 4

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And now some questions about physical activity

The government advises that young children of pre-school age who are capable of walking without help should spend a certain amount of time being physically active. This includes light or more energetic activities such as walking or skipping, riding a bike, and running and chasing games.

How much time per day do you think under fives who are able to walk are advised to spend doing this?

Please write in time (You can either write your answer in minutes, hours or both)

<table>
<thead>
<tr>
<th>Hours</th>
<th>Minutes</th>
<th>Do not have a child this age</th>
</tr>
</thead>
<tbody>
<tr>
<td>608-609</td>
<td>610-611</td>
<td>607</td>
</tr>
</tbody>
</table>

The government also advises that children and young people (aged 5 – 18) should spend a certain amount of time doing moderate physical activity to help them stay healthy. This includes bike riding, playground activities, swimming, playing tennis or any other activity that makes them breathe slightly faster than usual.

How much time per day do you think those aged 5-18 are advised to spend doing this?

Please write in time (You can either write your answer in minutes, hours or both)

<table>
<thead>
<tr>
<th>Hours</th>
<th>Minutes</th>
<th>Do not have a child this age</th>
</tr>
</thead>
<tbody>
<tr>
<td>613-614</td>
<td>615-616</td>
<td>612</td>
</tr>
</tbody>
</table>

Thank you for answering these questions.
Please give the booklet back to the interviewer.
Scottish Health Survey 2018

Booklet for Young Adults

How to fill in this questionnaire

A Most of the questions on the following pages can be answered by simply ticking the box below or alongside the answer that applies to you. You do not have to answer every question.

Example:

Do you feel that you lead a

- Very healthy life
- Fairly healthy life
- Not very healthy life
- An unhealthy life

Tick ONE box


B Sometimes you are asked to write in a number or the answer in your own words. Please enter numbers as figures rather than words.

Example:

Write in no. 6

C On most pages you should answer ALL the questions but sometimes you will find an instruction next to the box you have ticked telling you to go to another question. By following the instructions carefully you will miss out questions which do not apply to you.

Example:

Tick ONE box

- Yes  [ ]  ➔ Go to Q4
- No [ ]  ➔ Go to Q5
SMOKING

The first few questions in the booklet ask about whether you smoke tobacco products.

This means tobacco products which you light and smoke and can include, for example, cigarettes or hand-rolling tobacco.

When answering these questions please do NOT include:
- cigarettes that contain no tobacco
- electronic cigarettes

Q1 Have you ever smoked a cigar or a pipe?

Tick ALL that apply

Yes – cigar

Yes – pipe

No

Go to Q2

Q2 Have you ever smoked a cigarette?

Tick ONE box

Yes

Go to Q3

No

Go to Q7 on page 2

Q3 How old were you when you first tried smoking a cigarette, even if it was only a puff or two?

Write in how old you were then

Go to Q4

Q4 Do you smoke cigarettes nowadays?

Tick ONE box

Yes

Go to Q6a

No

Go to Q5

Q5 Did you smoke cigarettes regularly or occasionally?

Tick ONE box

Regularly, that is at least one cigarette a day

Occasionally

I never really smoked cigarettes, just tried them once or twice

Go to Q7 on page 2

CURRENT SMOKERS

Q6a About how many cigarettes a day do you usually smoke on weekdays?

Write in number smoked a day

Go to Q6b

Q6b And about how many cigarettes a day do you usually smoke at weekends?

Write in number smoked a day

Go to Q7 on page 2
EVERYONE PLEASE ANSWER

Q7 Have you ever used an electronic cigarette (e-cigarette), or any other vaping device?

Tick ONE box

Yes 1 → Go to Q8

No 2 → Go to Q15 on page 3

Q8 Do you use an e-cigarette or vaping device at all nowadays?

Tick ONE box

Yes 1 → Go to Q10

No 2 → Go to Q9

Q9 Did you use an e-cigarette or vaping device regularly or did you only try them once or twice?

Tick ONE box

Used e-cigarettes/vaping devices regularly 1 → Go to Q11

Used e-cigarettes/vaping devices occasionally 2 → Go to Q11

Never really used e-cigarettes/vaping devices, just tried them once or twice 3 → Go to Q15 on page 3

Q10 How often in the last four weeks have you used an e-cigarette or vaping device?

Tick ONE box

Every day 1 → Go to Q12 on page 3

4-6 days a week 2

2-3 days a week 3

Once a week 4

2-3 times in the last 4 weeks 5

Once in the last 4 weeks 6

Not at all in the last 4 weeks 7

Q11 How often did you use an e-cigarette or vaping device in a typical four week period?

Tick ONE box

Every day 1 → Go to Q12 on page 3

4-6 days a week 2

2-3 days a week 3

Once a week 4

2-3 times in a 4 week period 5

Once in a 4 week period 6

Less than once in a 4 week period 7
Q12 Can I just check, how old were you when you first tried an e-cigarette or vaping device?
Write in how old you were then

Q13 And for approximately how long have you been using/did you use an e-cigarette or vaping device?
Please write in number of years and months. For example if 1 year and 4 months enter ‘1’ in years box and ‘4’ in months box. If less than 1 month enter ‘0’ in months box.

Q14 Can I just check, did you start regularly smoking tobacco cigarettes before first trying e-cigarettes/vaping devices?
Tick ONE box

Q15 Are you regularly exposed to other people’s tobacco smoke in any of these places?
Please tick all boxes that apply

Q16 Does this bother you at all?
Tick ONE box

NOW GO TO THE QUESTIONS ON THE NEXT PAGE ➤
DRINKING

Q17  Do you ever drink alcohol nowadays, including drinks you brew or make at home?  

Tick ONE box

- Yes  
  Go to Q20  
- No  
  Go to Q18

Q18  Just to 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?

Tick ONE box

- Very occasionally  
  Go to Q20  
- Never  
  Go to Q19

Q19  Have you always been a non-drinker or did you stop drinking for some reason?

Tick ONE box

- Always a non-drinker  
  Go to Q33 on page 12  
- Used to drink but stopped

Q20  How old were you the first time you ever had a proper alcoholic drink – a whole drink, not just a sip?

Write in how old you were then  

Go to the next page
The next few questions are concerned with different types of alcoholic drink. Please tick the box underneath the answer that best describes how often you usually drank each of them in the last 12 months. For the ones you drank, write in how much you usually drank on any one day. **EXCLUDE ANY NON-ALCOHOLIC OR LOW-ALCOHOL DRINKS, EXCEPT SHANDY.**

**EXAMPLE**

A. How often have you had this type of drink in the past year?

<table>
<thead>
<tr>
<th>Tick ONE box</th>
</tr>
</thead>
<tbody>
<tr>
<td>Almost every day</td>
</tr>
<tr>
<td>1</td>
</tr>
</tbody>
</table>

How much did you usually drink on any one day? WRITE IN NUMBER

- **Half-pints**
- **Large cans or bottles**
- **Small cans or bottles**

**NOW PLEASE ANSWER Q21-Q28**

Q21. **Normal strength beer, lager, stout, cider or shandy (less than 6% alcohol) - exclude bottles/cans of shandy.**

How often have you had this type of drink in the past year?

<table>
<thead>
<tr>
<th>Tick ONE box</th>
</tr>
</thead>
<tbody>
<tr>
<td>Almost every day</td>
</tr>
<tr>
<td>1</td>
</tr>
</tbody>
</table>

How much did you usually drink on any one day? WRITE IN NUMBER

- **Half-pints**
- **Large cans or bottles**
- **Small cans or bottles**
Q22  Strong beer, lager, stout, cider (6% alcohol or more, such as Tennant’s Super, Special Brew)

How often have you had this type of drink in the past year?

Tick **ONE** box

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Almost every day</td>
<td>1</td>
</tr>
<tr>
<td>Five or six days a week</td>
<td>2</td>
</tr>
<tr>
<td>Three or four days a week</td>
<td>3</td>
</tr>
<tr>
<td>Once or twice a week</td>
<td>4</td>
</tr>
<tr>
<td>Once or twice a month</td>
<td>5</td>
</tr>
<tr>
<td>Once every couple of months</td>
<td>6</td>
</tr>
<tr>
<td>Once or twice in the last 12 months</td>
<td>7</td>
</tr>
<tr>
<td>Never in the last 12 months</td>
<td>8</td>
</tr>
</tbody>
</table>

How much did you usually drink on any one day? WRITE IN NUMBER

- Half-pints
- Large cans or bottles
- Small cans or bottles

Go to Q23

---

Q23  Spirits or liqueurs, such as gin, whisky, rum, brandy, vodka, or cocktails

How often have you had this type of drink in the past year?

Tick **ONE** box

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Almost every day</td>
<td>1</td>
</tr>
<tr>
<td>Five or six days a week</td>
<td>2</td>
</tr>
<tr>
<td>Three or four days a week</td>
<td>3</td>
</tr>
<tr>
<td>Once or twice a week</td>
<td>4</td>
</tr>
<tr>
<td>Once or twice a month</td>
<td>5</td>
</tr>
<tr>
<td>Once every couple of months</td>
<td>6</td>
</tr>
<tr>
<td>Once or twice in the last 12 months</td>
<td>7</td>
</tr>
<tr>
<td>Never in the last 12 months</td>
<td>8</td>
</tr>
</tbody>
</table>

How much did you usually drink on any one day? WRITE IN NUMBER

- Glasses (count doubles as 2 singles)

Go to Q24 on page 7
Q24  Sherry or martini (including port, vermouth, cinzano) or Buckfast

How often have you had this type of drink in the past year?

Tick ONE box

- Almost every day
- Five or six days a week
- Three or four days a week
- Once or twice a week
- Once or twice a month
- Once every couple of months
- Once or twice in the last 12 months
- Never in the last 12 months

How much did you usually drink on any one day? WRITE IN NUMBER

Glasses (count doubles as 2 singles)

Go to Q25

Q25  Wine (including babycham and champagne)

How often have you had this type of drink in the past year?

Tick ONE box

- Almost every day
- Five or six days a week
- Three or four days a week
- Once or twice a week
- Once or twice a month
- Once every couple of months
- Once or twice in the last 12 months
- Never in the last 12 months

How much did you usually drink on any one day? WRITE IN NUMBER

You can write in parts of a bottle, e.g. half a bottle

If you drink small bottles (e.g. 250ml or 175ml) enter the number of glasses you drank from the bottle

Large Glasses (250ml)

Standard Glasses (175ml)

Small Glasses (125ml)

Bottles (750ml)
Q26  Alcoholic soft drinks or ‘alcopops’ (such as WKD, Smirnoff Ice, Bacardi Breezer etc)
How often have you had this type of drink in the past year?

Tick ONE box

- Almost every day
- Five or six days a week
- Three or four days a week
- Once or twice a week
- Once or twice a month
- Once every couple of months
- Once or twice in the last 12 months
- Never in the last 12 months

(Answers: 1, 2, 3, 4, 5, 6, 7, 8)

Go to Q27

Q27  Have you had any other kinds of alcoholic drink in the last 12 months?

Tick ONE box

- No
- Yes

(Answers: 1, 2)

WRITE IN NAME OF DRINK

How often have you had this type of drink in the past year?

Tick ONE box

- Almost every day
- Five or six days a week
- Three or four days a week
- Once or twice a week
- Once or twice a month
- Once every couple of months
- Once or twice in the last 12 months

(Answers: 1, 2, 3, 4, 5, 6, 7)

How much did you usually drink on any one day? WRITE IN NUMBER

- Small cans
- Standard bottles (275ml)
- Large bottles (700ml)

(Answers: 180-181, 182-183, 184-185)

Go to Q28 on page 9

Go to Q27

Go to Q29 on page 10
Q28 Have you had any other kinds of alcoholic drink in the last 12 months?

Tick ONE box

<table>
<thead>
<tr>
<th>No</th>
<th>Go to Q29 on page 10 ➩</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

WRITE IN NAME OF DRINK

How often have you had this type of drink in the past year?

Tick ONE box

<table>
<thead>
<tr>
<th>Almost every day</th>
<th>Five or six days a week</th>
<th>Three or four days a week</th>
<th>Once or twice a week</th>
<th>Once or twice a month</th>
<th>Once every couple of months</th>
<th>Once or twice in the last 12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
</table>

How much did you usually drink on any one day? WRITE IN NUMBER

Glasses (count doubles as 2 singles)

AND/OR Half-pints

AND/OR Large cans or bottles

AND/OR Small cans or bottles

Go to Q29 on page 10 ➩
Thinking now about all kinds of drinks, how often have you had an alcoholic drink of any kind during the last 12 months?

Tick ONE box

- Almost every day
- Five or six days a week
- Three or four days a week
- Once or twice a week
- Once or twice a month
- Once every couple of months
- Once or twice a year
- Not at all in the last 12 months

Did you have an alcoholic drink in the seven days ending yesterday?

Tick ONE box

- Yes
- No

On how many days out of the last seven did you have an alcoholic drink?

Tick ONE box

- One
- Two
- Three
- Four
- Five
- Six
- Seven
Q32 Please think about the day in the last week on which you drank the most. (If you drank the same amount on more than one day, please answer about the most recent of those days.)

From this list, please tick all the types of alcoholic drink which you drank on that day. For the ones you drank, write in how much you drank on that day. EXCLUDE NON-ALCOHOLIC OR LOW-ALCOHOL DRINKS, EXCEPT SHANDY.

<table>
<thead>
<tr>
<th>TICK ALL DRINKS DRUNK ON THAT DAY</th>
<th>WRITE IN HOW MUCH DRUNK ON THAT DAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal strength beer, lager, stout, cider or shandy (less than 6% alcohol)—exclude bottles/cans of shandy</td>
<td>Glasses (count doubles as 2 singles)</td>
</tr>
<tr>
<td>Strong beer, lager, stout or cider (6% alcohol or more, such as Tennent’s Super, Special Brew)</td>
<td></td>
</tr>
<tr>
<td>Spirits or liqueurs, such as gin, whisky, rum, brandy, vodka, or cocktails</td>
<td></td>
</tr>
<tr>
<td>Sherry or martini (including port, vermouth, cinzano) or Buckfast</td>
<td></td>
</tr>
<tr>
<td>Wine (including babycham and champagne) You can write in parts of a bottle, e.g. half a bottle. If you drank small bottles (e.g. 250ml or 175ml) enter the number of glasses drunk from the bottle</td>
<td></td>
</tr>
<tr>
<td>Alcoholic soft drinks or ‘alcopops’ (such as WKD, Smirnoff Ice, Bacardi Breezer)</td>
<td></td>
</tr>
<tr>
<td>Other kinds of alcoholic drink WRITE IN NAME OF DRINK</td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
</tr>
</tbody>
</table>

Go to next page ➤

SPARE 315-368
Everyone please answer

Please read this carefully:
We should like to know how your health has been in general over the past few weeks. Please answer ALL the questions by ticking the box below the answer which you think most applies to you.

Have you recently:

<table>
<thead>
<tr>
<th>Question</th>
<th>Description</th>
<th>Tick One box</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q33</td>
<td>Been able to concentrate on whatever you’re doing?</td>
<td></td>
<td>369</td>
</tr>
<tr>
<td>Q34</td>
<td>Lost much sleep over worry?</td>
<td></td>
<td>370</td>
</tr>
<tr>
<td>Q35</td>
<td>Felt you were playing a useful part in things?</td>
<td></td>
<td>371</td>
</tr>
<tr>
<td>Q36</td>
<td>Felt capable of making decisions about things?</td>
<td></td>
<td>372</td>
</tr>
<tr>
<td>Q37</td>
<td>Felt constantly under strain?</td>
<td></td>
<td>373</td>
</tr>
<tr>
<td>Q38</td>
<td>Felt you couldn’t overcome your difficulties?</td>
<td></td>
<td>374</td>
</tr>
</tbody>
</table>
HAVE YOU RECENTLY:

Q39 Been able to enjoy your normal day-to-day activities?

Tick ONE box

More so than usual

Same as usual

Less so than usual

Much less than usual

1 2 3 4

Q40 Been able to face up to your problems?

Tick ONE box

More so than usual

Same as usual

Less able than usual

Much less able

1 2 3 4

Q41 Been feeling unhappy and depressed?

Tick ONE box

Not at all

No more than usual

Rather more than usual

Much more than usual

1 2 3 4

Q42 Been losing confidence in yourself?

Tick ONE box

Not at all

No more than usual

Rather more than usual

Much more than usual

1 2 3 4

Q43 Been thinking of yourself as a worthless person?

Tick ONE box

Not at all

No more than usual

Rather more than usual

Much more than usual

1 2 3 4

Q44 Been feeling reasonably happy, all things considered?

Tick ONE box

More so than usual

About same as usual

Less so than usual

Much less than usual

1 2 3 4

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GL Assessment is part of the Granada Learning Group
Please read this carefully:
Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks.

<table>
<thead>
<tr>
<th>Question</th>
<th>Statement</th>
<th>None of the time</th>
<th>Rarely</th>
<th>Some of the time</th>
<th>Often</th>
<th>All of the time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q45</td>
<td>I've been feeling optimistic about the future</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q46</td>
<td>I've been feeling useful</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q47</td>
<td>I've been feeling relaxed</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q48</td>
<td>I've been feeling interested in other people</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q49</td>
<td>I've had energy to spare</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q50</td>
<td>I've been dealing with problems well</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Q51</td>
<td>I've been thinking clearly</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
Please read this carefully:
Below are some statements about feelings and thoughts.
Please tick the box that best describes your experience of each over the last 2 weeks.

Tick ONE box

Q52 I’ve been feeling good about myself

None of the time | Rarely | Some of the time | Often | All of the time
---|---|---|---|---
1 | 2 | 3 | 4 | 5

Q53 I’ve been feeling close to other people

None of the time | Rarely | Some of the time | Often | All of the time
---|---|---|---|---
1 | 2 | 3 | 4 | 5

Q54 I’ve been feeling confident

None of the time | Rarely | Some of the time | Often | All of the time
---|---|---|---|---
1 | 2 | 3 | 4 | 5

Q55 I’ve been able to make up my own mind about things

None of the time | Rarely | Some of the time | Often | All of the time
---|---|---|---|---
1 | 2 | 3 | 4 | 5

Q56 I’ve been feeling loved

None of the time | Rarely | Some of the time | Often | All of the time
---|---|---|---|---
1 | 2 | 3 | 4 | 5

Q57 I’ve been interested in new things

None of the time | Rarely | Some of the time | Often | All of the time
---|---|---|---|---
1 | 2 | 3 | 4 | 5

Q58 I’ve been feeling cheerful

None of the time | Rarely | Some of the time | Often | All of the time
---|---|---|---|---
1 | 2 | 3 | 4 | 5

Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)
© NHS Health Scotland, University of Warwick and University of Edinburgh, 2006, all rights reserved.
Please read this carefully:
The next questions ask about whether you, or anyone in your household, worry about being able to buy enough food. They ask whether you have enough money to buy the quantity of food your household needs, rather than whether you have enough money to eat a nutritious or balanced diet.

During the last 12 months, was there a time when:

Q59 You were worried you would run out of food because of a lack of money or other resources?

Tick ONE box

Yes [ ] Go to Q60 [ ]
No [ ] Go to Q62 [ ]

Q60 You ate less that you thought you should because of a lack of money or other resources?

Tick ONE box

Yes [ ] Go to Q61 [ ]
No [ ] Go to Q62 [ ]

Q61 Your household ran out of food because of lack of money or other resources?

Tick ONE box

Yes [ ]
No [ ]

EVERYONE PLEASE ANSWER

Q62 And now a question about physical activity.
The government advises people to spend a certain amount of time doing moderate physical activity to help them stay healthy. This includes bike riding, swimming, playing tennis or any other activity that makes them breathe slightly faster. How much time per day do you think people your age are advised to spend doing this?

Please write in time (You can either write your answer in minutes, hours or both).

[ ] Hours [ ] Minutes

550-551 [ ] 552-553 [ ]

NOW GO TO THE QUESTIONS ON THE NEXT PAGE ➔
Q63 Which of the following options best describes how you think of yourself?

Tick ONE box

Heterosexual or Straight

Gay or Lesbian

Bisexual

Other

Q64 How would you describe your gender identity?

Tick ONE box

Man / Boy

Woman / Girl

In another way

If you would like to, please write in the other words you would use below:

----------------------------------------------------------------------------------------------------------------------------------

THANK YOU FOR TAKING PART
THE SCOTTISH HEALTH SURVEY 2018

Follow-up Research

(Adults 16+)

- In the future, the Scottish Government may want follow-up research to be conducted among particular groups of the public to improve health or health services.
- If you are willing, your name, contact details and relevant answers you have given during the interview will be passed on to the Scottish Government or research agencies, with the permission of the Scottish Government, for this purpose.
- Please be assured that if you sign this statement, any information you provide as part of the survey will only be released for statistical and research purposes 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 future research about health or health services.
- Researchers are not interested in your individual answers but instead are interested in the combined answers of all the people interviewed.
- 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 writing to: ScotCen Social Research, Scotiabank House, 2nd Floor, 6 South Charlotte Street, Edinburgh, EH2 4AW.

Your consent

I, (name) ___________________________________________ consent to ScotCen Social Research / Office for National Statistics passing my name, address and answers I have given in this interview to:

the Scottish Government or research agencies with the permission of the Scottish Government.

Signed _______________________________ Date ___________________

I understand that these details will be used for the purpose of follow-up research only and that I am free to decline to take part in any future studies if asked.
THE SCOTTISH HEALTH SURVEY 2018

Follow-up Research

(Children 0-15)

- In the future, the Scottish Government may want follow-up research to be conducted among particular groups of the public to improve health or health services.

- If you are willing, your name, contact details and relevant answers you have given during the interview will be passed on to the Scottish Government or research agencies, with the permission of the Scottish Government, for this purpose.

- Please be assured that if you sign this statement, any information you provide as part of the survey will only be released for statistical and research purposes 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 future research about health or health services.

- Researchers are not interested in your individual answers but instead are interested in the combined answers of all the people interviewed.

- 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 writing to: ScotCen Social Research, Scotiabank House, 2nd Floor, 6 South Charlotte Street, Edinburgh, EH2 4AW.

---

Your consents

I, (name) ___________________________________________

am the parent/guardian of

(child's name) ___________________________________________

I consent to ScotCen Social Research / Office for National Statistics passing his/her name, address and the answers given in this interview to:

the Scottish Government or research agencies with the permission of the Scottish Government.

Signed________________________________________ Date_____________________

I understand that these details will be used for statistical and research purposes only and that I am free to decline to take part in any future studies if asked.
SCOTTISH HEALTH SURVEY 2018

SHOWCARDS
CARD A1

MARITAL STATUS

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
CARD A2

RELATIONSHIP

1 Husband / Wife / Spouse
2 Legally recognised civil partner
3 Partner / Cohabitee

4 Natural son / daughter / child
5 Adopted son / daughter / child
6 Foster son / daughter / child
7 Stepson / Stepdaughter / Child of partner
8 Son-in-law / Daughter-in-law
9 Natural parent
10 Adoptive parent
11 Foster parent
12 Step-parent / Parent’s partner
13 Parent-in-law

14 Natural brother / Natural sister / Natural sibling (ie. both natural parents the same)
15 Half-brother / Half-sister / Half-sibling (ie. one natural parent the same)
16 Step-brother / Step-sister / Step-sibling (ie. no natural parents the same)
17 Adopted brother / Adopted sister / Adopted sibling
18 Foster brother / Foster sister / Foster sibling
19 Brother-in-law / Sister-in-law / Sibling through marriage or civil partnership

20 Grandchild
21 Grandparent

22 Other relative
23 Other non-relative
1 Buying with mortgage / loan
2 Own it outright
3 Part rent / part mortgage
4 Rent (including rents paid by housing benefit)
5 Living here rent free
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
CARD A5

1 Very satisfied
2 Fairly satisfied
3 Neither satisfied nor dissatisfied
4 Fairly dissatisfied
5 Very dissatisfied
6 No opinion
1. Earnings from employment or self-employment (including overtime, tips, bonuses)
2. State retirement pension
3. Pension from former employer
4. Personal pensions
5. Pension Credit
6. Child Benefit
7. Universal Credit
8. Job-Seekers Allowance
9. Income Support
10. Working Tax Credit, Child Tax Credit or any other Tax Credit
11. Housing Benefit
12. Employment and Support Allowance
13. Personal Independence Payments
14. Disability Living Allowance
15. Attendance Allowance
16. Carer’s Allowance
17. Other state benefits
18. Student grants and bursaries (but not loans)
19. Interest from savings and investments (eg. stocks and shares)
20. Rent from property (after expenses)
21. Other kinds of regular income (eg. maintenance or grants)
22. No source of income
# GROSS INCOME FROM ALL SOURCES

(before any deductions for taxes, National Insurance contributions, health insurance payments, superannuation payments etc.)

<table>
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<th>MONTHLY or</th>
<th>ANNUAL</th>
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<td>£100,000 less than £110,000 ..........26</td>
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<td>£11,700 less than £12,500 ..........30</td>
<td>£140,000 less than £150,000 ..........30</td>
</tr>
<tr>
<td>£2,900 or more ..................31</td>
<td>£12,500 or more ..................31</td>
<td>£150,000 or more ..................31</td>
</tr>
</tbody>
</table>
1. Working as an employee (or temporarily away)
2. On a Government sponsored training scheme (or temporarily away)
3. Self employed or freelance (or temporarily away)
4. Working unpaid for your own family’s business (or temporarily away)
5. Doing any other kind of paid work
6. None of the above
HOURS SPENT PROVIDING CARE

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
CARD A10

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
CARD A11

1. Been unable to take up employment
2. Worked fewer hours
3. Reduced responsibility at work
4. Flexible employment agreed
5. Changed to work at home
6. Reduced opportunities for promotion
7. Took new job
8. Left employment altogether
9. Took early retirement
10. Other (Please say what)
11. Employment not affected/never had a job
<table>
<thead>
<tr>
<th></th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Short breaks or respite e.g. day time breaks, overnight breaks or emergency respite</td>
</tr>
<tr>
<td>2</td>
<td>Advice and information</td>
</tr>
<tr>
<td>3</td>
<td>Practical support (e.g. transport, equipment/adaptations)</td>
</tr>
<tr>
<td>4</td>
<td>Counselling or emotional support</td>
</tr>
<tr>
<td>5</td>
<td>Training and learning</td>
</tr>
<tr>
<td>6</td>
<td>Advocacy services</td>
</tr>
<tr>
<td>7</td>
<td>Personal assistant/ support worker/ community nurse/ home help</td>
</tr>
<tr>
<td>8</td>
<td>Help from family, friends or neighbours</td>
</tr>
<tr>
<td>9</td>
<td>Carer’s allowance</td>
</tr>
<tr>
<td>10</td>
<td>Other (Please say what)</td>
</tr>
<tr>
<td>11</td>
<td>Receive no help or support</td>
</tr>
</tbody>
</table>
1. Short breaks or respite e.g. day time breaks, overnight breaks or emergency respite
2. Advice and information
3. Practical things, e.g. putting hand rails in the bathroom, transport to a day centre
4. Talking to someone for support, e.g. family member, friend, counsellor
5. Having a befriender or a peer mentor
6. Advocacy services
7. Personal assistant/ support worker/ community nurse/ home help
8. Help from family, friends or neighbours
9. Help from teachers at school, e.g. talking or extra help with homework
10. Social activities and support, e.g. young carers' groups or day trips
11. Other (Please say what)
12. Receive no help or support
<table>
<thead>
<tr>
<th>Extremely dissatisfied</th>
<th>Extremely satisfied</th>
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</thead>
<tbody>
<tr>
<td>0</td>
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<td>2</td>
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<td>9</td>
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<td>9</td>
<td>10</td>
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</tbody>
</table>
CARD B2

1. Regular check-up with GP / hospital / clinic
2. Taking medication (tablets / inhalers)
3. Advice or treatment to stop smoking
4. Using oxygen
5. Immunisations against flu / pneumococcus
6. Exercise or physical activity
7. Advice or treatment to lose weight
8. Other (Please say what)
CARD C1

A general practitioner (GP)

Nurse at GP surgery/Health centre

Community, School or District Nurse

Hospital casualty/Accident and Emergency department

Consultant/Specialist or other doctor at hospital outpatients

Consultant/Specialist or other doctor elsewhere

Homeopath

Acupuncturist

Other alternative medicine professional
CARD E1

HOUSEWORK

Done during the last 4 weeks -

Hoovering

Dusting

Ironing

General tidying

Washing floors and paintwork
HEAVY HOUSEWORK

Done during the last 4 weeks -

Moving heavy furniture

Spring cleaning

Walking with heavy shopping
(for more than 5 minutes)

Cleaning windows

Scrubbing floors with a scrubbing brush
GARDENING, DIY AND BUILDING WORK

Done during the last 4 weeks -

Hoeing, weeding, pruning
Mowing with a power mower
Planting flowers/seeds
Decorating
Minor household repairs
Car washing and polishing
Car repairs and maintenance
HEAVY MANUAL WORK

Done during the last 4 weeks -

- Digging, clearing rough ground
- Building in stone/bricklaying
- Mowing large areas with a hand mower
- Felling trees, chopping wood
- Mixing/laying concrete
- Moving heavy loads
- Refitting a kitchen or bathroom
CARD E5

Done during the last 4 weeks -

1. Swimming
2. Cycling
3. Workout at a gym / Exercise bike / Weight training
4. Aerobics / Keep fit / Gymnastics / Dance for Fitness
5. Any other type of dancing
6. Running / Jogging
7. Football / Rugby
8. Badminton / Tennis
9. Squash
10. Exercises (e.g. press-ups, sit-ups)

Please also include teaching, coaching and training/practice sessions
<table>
<thead>
<tr>
<th></th>
<th>Activity</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Bowls</td>
</tr>
<tr>
<td>2</td>
<td>Fishing / angling</td>
</tr>
<tr>
<td>3</td>
<td>Golf</td>
</tr>
<tr>
<td>4</td>
<td>Hillwalking / rambling</td>
</tr>
<tr>
<td>5</td>
<td>Snooker / billiards / pool</td>
</tr>
<tr>
<td>6</td>
<td>Aqua-robics / aquafit / exercise class in water</td>
</tr>
<tr>
<td>7</td>
<td>Yoga / pilates</td>
</tr>
<tr>
<td>8</td>
<td>Athletics</td>
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<tr>
<td>9</td>
<td>Basketball</td>
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<td>10</td>
<td>Canoeing / Kayaking</td>
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<td>Climbing</td>
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<td>Netball</td>
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<td>Powerboating / jet skiing</td>
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<td>20</td>
<td>Rowing</td>
</tr>
<tr>
<td>21</td>
<td>Sailing / windsurfing</td>
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<td>22</td>
<td>Shinty</td>
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<tr>
<td>23</td>
<td>Skateboarding / inline skating</td>
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<tr>
<td>24</td>
<td>Skiing / snowboarding</td>
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<td>25</td>
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<td>Surfing / body boarding</td>
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<td>Table tennis</td>
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<tr>
<td>28</td>
<td>Tenpin bowling</td>
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<tr>
<td>29</td>
<td>Volleyball</td>
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<tr>
<td>30</td>
<td>Waterskiing</td>
</tr>
<tr>
<td>0</td>
<td>No – none of these</td>
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</table>

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 (Please say what)
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
14. No reason
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<td>3</td>
<td>15 minutes, less than 30 minutes</td>
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<td>4</td>
<td>30 minutes, less than 1 hour</td>
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<td>1 hour, less than 1 ½ hours</td>
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<td>9</td>
<td>3 hours, less than 3 ½ hours</td>
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<td>10</td>
<td>3 ½ hours, less than 4 hours</td>
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<tr>
<td>11</td>
<td>4 hours or more (please say how long)</td>
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SPORTS AND EXERCISE ACTIVITIES

INCLUDE any sports and exercise activities like:

- Playing football, rugby or netball in a team or any other organised team games
- Playing tennis, squash or badminton
- Going swimming or swimming lessons
- Gymnastics (include Toddler Gym, Tumble Tots etc)
- Dance lessons, ballet lessons, ice skating
- Horse riding
- Disco dancing
- Any other organised sports, team sports or exercise activities

include playing in:
- a practice session
- a match
- a club
- out-of-school lesson
Other active things like:

- Ride a bike
- Kick a ball around
- Run about (outdoors or indoors)
- Play active games
- Jump around

Any other things like these
CARD G1

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>6 a day or more</td>
</tr>
<tr>
<td>2</td>
<td>4 or 5 a day</td>
</tr>
<tr>
<td>3</td>
<td>2 or 3 a day</td>
</tr>
<tr>
<td>4</td>
<td>One a day</td>
</tr>
<tr>
<td>5</td>
<td>Less than one a day</td>
</tr>
<tr>
<td></td>
<td>Description</td>
</tr>
<tr>
<td>---</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>1</td>
<td>6 or more times a day</td>
</tr>
<tr>
<td>2</td>
<td>4 or 5 times a day</td>
</tr>
<tr>
<td>3</td>
<td>2 or 3 times a day</td>
</tr>
<tr>
<td>4</td>
<td>Once a day</td>
</tr>
<tr>
<td>5</td>
<td>5 or 6 times a week</td>
</tr>
<tr>
<td>6</td>
<td>2 to 4 times a week</td>
</tr>
<tr>
<td>7</td>
<td>Once a week</td>
</tr>
<tr>
<td>8</td>
<td>1 to 3 times a month</td>
</tr>
<tr>
<td>9</td>
<td>Less often or never</td>
</tr>
<tr>
<td></td>
<td>Description</td>
</tr>
<tr>
<td>---</td>
<td>-------------------------------------------------</td>
</tr>
<tr>
<td>1</td>
<td>Less than a week</td>
</tr>
<tr>
<td>2</td>
<td>At least a week but less than a month</td>
</tr>
<tr>
<td>3</td>
<td>1 - 3 months</td>
</tr>
<tr>
<td>4</td>
<td>4 - 6 months</td>
</tr>
<tr>
<td>5</td>
<td>Over 6 months</td>
</tr>
</tbody>
</table>
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
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Every day</td>
</tr>
<tr>
<td>2</td>
<td>4 - 6 days a week</td>
</tr>
<tr>
<td>3</td>
<td>2 – 3 days a week</td>
</tr>
<tr>
<td>4</td>
<td>Once a week</td>
</tr>
<tr>
<td>5</td>
<td>2 – 3 times in a 4 week period</td>
</tr>
<tr>
<td>6</td>
<td>Once in a 4 week period</td>
</tr>
<tr>
<td>7</td>
<td>Less than once in a 4 week period</td>
</tr>
</tbody>
</table>
1 Nicotine gum
2 Nicotine patches that you stick on your skin
3 Nasal spray/nicotine inhaler
4 Lozenge / microtab
5 Champix / Varenicline
6 Zyban / Bupropion
7 Electronic cigarette / vaping device
8 Other (Please say what)
9 No products used
CARD H5

1  At own home
2  At work
3  In other people’s homes
4  In cars, vans etc
5  Outside of buildings (e.g. pubs, shops, hospitals)
6  In other public places
CARD J1

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
250ml wine glass
1 Normal strength beer / lager / cider / shandy
2 Strong beer / lager / cider
3 Spirits or Liqueurs
4 Sherry, Martini or Buckfast
5 Wine
6 Alcopops / pre-mixed drinks
7 Other alcoholic drinks
8 Low alcohol drinks only
CARD K1

1  No natural teeth
2  Fewer than 10 natural teeth
3  Between 10 and 19 natural teeth
4  20 or more natural teeth
1. Eating food

2. Speaking clearly

3. Smiling, laughing and showing teeth without embarrassment

4. Emotional stability, for example, becoming more easily upset than usual

5. Enjoying the company of other people such as family, friends, or neighbours

6. None of these
CARD K3

1 Yes, often
2 Yes, occasionally
3 No, never
1. Working as an employee (or temporarily away)
2. On a Government sponsored training scheme (or temporarily away)
3. Self employed or freelance (or temporarily away)
4. Working unpaid for your own family’s business (or temporarily away)
5. Doing any other kind of paid work
6. None of the above
CARD Q1

1 School Leaving Certificate, National Qualification Access Unit

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

3 GNVQ/GSVQ Foundation or Intermediate, SVQ Level 1 or 2, SCOTVEC / National Certificate Module, City and Guilds Craft, RSA Diploma or equivalent

4 Higher Grade, Advanced Higher, CSYS, A level, AS level, Advanced Senior Certificate or equivalent

5 GNVQ/GSVQ Advanced, SVQ Level 3, ONC, OND, SCOTVEC National Diploma, City and Guilds Advanced Craft, RSA Advanced Diploma or equivalent

6 HNC, HND, SVQ Level 4, RSA Higher Diploma or equivalent

7 First Degree, Higher Degree, SVQ Level 5 or equivalent

8 Professional qualifications e.g. teaching, accountancy

9 Other school examinations not already mentioned

10 Other post-school but pre Higher education examinations not already mentioned

11 Other Higher education qualifications not already mentioned

12 No qualifications
Choose **ONE** section from A to F, then choose **ONE** option which best describes your ethnic group or background.

**A  White**
Scottish
Other British
Irish
Gypsy/Traveller
Polish
Other white ethnic group (please say what)

**B  Mixed or multiple ethnic group**
Any mixed or multiple ethnic groups (please say what)

**C  Asian, Asian Scottish or Asian British**
Pakistani, Pakistani Scottish or Pakistani British
Indian, Indian Scottish or Indian British
Bangladeshi, Bangladeshi Scottish or Bangladeshi British
Chinese, Chinese Scottish or Chinese British
Other (please say what)

**D  African**
African, African Scottish or African British
Other (please say what)

**E  Caribbean or Black**
Caribbean, Caribbean Scottish or Caribbean British
Black, Black Scottish or Black British
Other (please say what)

**F  Other ethnic group**
Arab, Arab Scottish or Arab British
Other, (please say what)
<table>
<thead>
<tr>
<th></th>
<th>Product</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Nicotine gum</td>
</tr>
<tr>
<td>2</td>
<td>Nicotine patches that you stick on your skin</td>
</tr>
<tr>
<td>3</td>
<td>Nasal spray/nicotine inhaler</td>
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<td>4</td>
<td>Lozenge / microtab</td>
</tr>
<tr>
<td>5</td>
<td>Champix / Varenicline</td>
</tr>
<tr>
<td>6</td>
<td>Zyban / Bupropion</td>
</tr>
<tr>
<td>7</td>
<td>Electronic cigarette / vaping device</td>
</tr>
<tr>
<td>8</td>
<td>Other (Please say what)</td>
</tr>
<tr>
<td>9</td>
<td>No products used</td>
</tr>
</tbody>
</table>
We need your help with the Scottish Health Survey.

An interviewer from ScotCen will call at your address and will be able to explain more about the study. In the meantime, you can find out more at: www.scottishhealthsurvey.org

Who is carrying out the study and why?

The Scottish Government has asked ScotCen Social Research to carry out the survey. The Scottish Government will use this information to help plan services and to identify inequalities in health.

The survey is used by other organisations, including:
- **NHS Health Scotland** have used the survey data to inform their work on monitoring and evaluating the measures taken to tackle problem drinking in Scotland.
- **The British Heart Foundation** have used the findings to help raise awareness of heart disease risk in Scotland.

How will you change the picture this year?

The information we collect provides an important picture of the health of the nation and helps the Scottish Government and others to plan more effective health services for the future. We rely on the goodwill of people like you to make the study a success. Please take part and help us to make a difference to the health of people in Scotland. Thank you.

Contact

**ScotCen**, 0800 652 4569.
ScotCen Social Research, Scotiabank House, 2nd Floor, 6 South Charlotte Street, Edinburgh, EH2 4AW
Email: scottishhealthsurvey@scotcen.org.uk

**Scottish Health Survey Team**, Scottish Government
St Andrew’s House, Regent Road, Edinburgh, EH1 3DG
Email: scottishhealthsurvey@scotland.gsi.gov.uk

A Company Limited by Guarantee Registered in England No. 4392418. A Charity In England and Wales (1091768) and Scotland (SC038454)
We interview around 6,000 people each year as part of the Scottish Health Survey. It’s an annual study that looks into the changing health and lifestyles of people living in Scotland.

Everything is done with voluntary co-operation and with full respect for your privacy (in accordance with the Data Protection Act 1998).

In recent years we found out that...

The average man is about 5 foot 9 inches and roughly 13 stone and 6 pounds.

The average woman is about 5 foot 4 inches and weighs around 11 stone and 5 pounds.

Around 1 in 4 adults drink more than 14 units per week.

Adults aged 16-24 are least likely to eat the recommended daily intake of fruit and veg.

Around 3 in 5 adults meet the recommended weekly level of moderate or vigorous physical activity.

Around 7 in 10 children are active at the recommended level.

Around 3/4 of men and women have some form of cardiovascular disease.

1 in 6 men and women say their health is ‘good’ or ‘very good’.

Around 1 in 4 adults drink more than 14 units per week.

Around a fifth of adults currently smoke.

Children eat just under 3 portions of fruit and veg a day on average.

Around 2 in 3 adults are overweight.

Key aspects of the survey include height and weight measurements, plus questions on topics such as physical activity, fruit and vegetable intake, and general health.
Cruse Bereavement Care Scotland
Offers help, including a free counselling service, for bereaved people whatever their age, nationality or beliefs.
Phone: 0845 600 2227
www.crusescotland.org.uk

Parentline Scotland: Children 1st
Provides information and advice to anyone concerned about a child’s safety and to anyone caring for a child in Scotland.
Phone: 08000 28 22 33 - free
www.children1st.org.uk

Citizens Advice Scotland
Helps people resolve their legal, money and other problems by providing them with free information and advice.
For local offices see the listings in your local phonebook or on the website.
Phone: 0808 800 9060 free from landline
www.cas.org.uk

Carers Scotland
Provides advice, information and support to carers.
Phone: 0808 808 7777
www.carersuk.org/scotland

The Scottish Health Survey 2018
Useful Contacts

Local contacts:
A GP (General Practitioner): Your GP will be able to provide help and advice and can provide access to appropriate specialist services and local organisations.

There are also many local organisations providing a range of services including support groups, helplines and information. Details can be obtained from your GP, your local library, or they may be listed in the telephone directory.

The national organisations listed below may also be able to put you in touch with local groups:

NHS 24
Provides help and advice from a qualified nurse on a wide range of health problems and issues.
Phone: 111 - 24 hours a day, 7 days a week
www.nhs24.com

www.nhsinform.scot (phone: 0800 22 44 88) also provides information about health and conditions in Scotland.

For more information about healthy eating or physical exercise please see the Healthier Scotland website:
www.takelifeon.co.uk

For more information about stopping smoking please see the NHS Smokefree website:
www.smokefree.nhs.uk
Alzheimer Scotland
Provides support for people with dementia and for the people who care for them.
Phone: 0808 808 3000 - free 24 hour helpline
www.alzscot.org

Alcoholics Anonymous
A fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others recover from alcoholism.
Phone: 0800 9177 650 – free
www.alcoholics-anonymous.org.uk

Narcotics Anonymous
A fellowship of men and women for whom drugs have become a major problem. The only requirement for membership is the desire to stop using drugs.
Phone: 0300 999 1212 (10am – midnight)
www.ukna.org

Victim Support line
Provides help and information to anyone who has been affected by a crime, including domestic violence and sexual assault.
Scottish helpline 0345 603 9213 (8am-8pm Mon-Fri)
www.victimsupportsco.org.uk
UK support line 0808 16 89 111 (24 hours)
www.victimsupport.org.uk

Scotland Domestic Abuse and Forced Marriage Helpline
Information and support service for those affected by domestic abuse and/or forced marriage
Phone: 0800 027 1234 (24 hours)
http://natdomesticabuseforcedmarriagehelpline.org.uk/

Refuge (domestic abuse helpline)
Provides access to 24-hour emergency refuge accommodation as well as an information service.
Phone: 0808 2000 247 (free 24 hours)
www.refuge.org.uk

LGBT Helpline Scotland
Helpline provides information and emotional support to lesbian, gay, bisexual and transgender people - or their friends or family.
Phone: 0300 123 2523 (Tuesday and Wednesday 12–9pm)
www.lgbthealth.org.uk

The Samaritans
The Samaritans provide a confidential service for people in despair and who feel suicidal.
116 123 – free (24 hour) phone line
www.samaritans.org

Breathing Space Scotland
Breathing Space is a confidential phoneline service for any individual who is experiencing low mood or depression or who is unusually worried and in need of someone to talk to.
Phone: 0800 83 85 87 – free (6pm-2am Mon-Thurs; 6pm Friday–6am Monday)
www.breathingspacescotland.co.uk

NHS Living Life
Free telephone service available to anyone over the age of 16 who is suffering from low mood, mild to moderate depression and/or anxiety.
Phone: 0800 328 9655 (10am–9pm Mon-Thurs 10am-6pm Fri)
www.nhs24.com/usefulresources/livinglife

SANE
Provides information and support to people who suffer from all forms of mental illness and their friends and families.
Phone: 0300 304 7000 (4.30-10.30pm every day)
www.sane.org.uk

Supportline
Confidential telephone helpline offering emotional support to any individual on any issue including child abuse, bullying, eating disorders, domestic violence, rape, mental health, depression, anxiety and addictions.
Phone: 01708 765 200
www.supportline.org.uk
Appendix B:
NHS Health Board Areas
NHS Health Board Areas

1, Ayrshire and Arran  8, Highland
2, Borders  9, Lanarkshire
3, Dumfries and Galloway  10, Lothian
4, Fife  11, Orkney
5, Forth Valley  12, Shetland
6, Grampian  13, Tayside
7, Greater Glasgow and Clyde  14, Western Isles
Appendix C: Glossary
This glossary explains terms used in the report, other than those fully described in particular chapters.

**Age Standardisation**

Age standardisation has been used in order to enable groups to be compared after adjusting for the effects of any differences in their age distributions.

When different sub-groups are compared in respect of a variable on which age has an important influence, any differences in age distributions between these sub-groups are likely to affect the observed differences in the proportions of interest.

Age standardisation was carried out, using the direct standardisation method. The standard population to which the age distribution of sub-groups was adjusted was the mid-2017 population estimates for Scotland. All age standardisation has been undertaken separately within each sex.

The age-standardised proportion \( p' \) was calculated as follows, where \( p_i \) is the age specific proportion in age group \( i \) and \( N_i \) is the standard population size in age group \( i \):

\[
p' = \frac{\sum_i N_i p_i}{\sum_i N_i}
\]

Therefore \( p' \) can be viewed as a weighted mean of \( p_i \) using the weights \( N_i \). Age standardisation was carried out using the age groups: 16-24, 25-34, 35-44, 45-54, 55-64, 65-74 and 75 and over. The variance of the standardised proportion can be estimated by:

\[
var(p') = \frac{\sum_i (N_i^2 p_i q_i / n_i)}{(\sum_i N_i)^2}
\]

where \( q_i = 1 - p_i \).

**Anthropometric measurement**

See Body mass index.

**Arithmetic mean**

See Mean.

**Bases**

See Unweighted bases, Weighted bases.

**Blood pressure**

Systolic (SBP) and diastolic (DBP) blood pressure were measured using a standard method. In adults, high blood
pressure is defined as SBP ≥140 mmHg or DBP ≥90 mmHg or on antihypertensive drugs.

**Body mass index**

Weight in kg divided by the square of height in metres. Adults (aged 16 and over) can be classified into the following BMI groups:

<table>
<thead>
<tr>
<th>BMI (kg/m²)</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 18.5</td>
<td>Underweight</td>
</tr>
<tr>
<td>18.5 to less than 25</td>
<td>Normal</td>
</tr>
<tr>
<td>25 to less than 30</td>
<td>Overweight</td>
</tr>
<tr>
<td>30 to less than 40</td>
<td>Obese</td>
</tr>
<tr>
<td>40 and above</td>
<td>Morbidly obese</td>
</tr>
</tbody>
</table>

Although the BMI calculation method is the same, there are no fixed BMI cut-off points defining overweight and obesity in children. Instead, overweight and obesity are defined using several other methods including age and sex specific BMI cut-off points or BMI percentiles cut-offs based on reference populations. Children can be classified into the following groups:

<table>
<thead>
<tr>
<th>Percentile cut-off</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>At or below 2nd percentile</td>
<td>At risk of underweight</td>
</tr>
<tr>
<td>Above 2nd percentile and below 85th percentile</td>
<td>Healthy weight</td>
</tr>
<tr>
<td>At or above 85th percentile and below 95th percentile</td>
<td>At risk of overweight</td>
</tr>
<tr>
<td>At or above 95th percentile</td>
<td>At risk of obesity</td>
</tr>
</tbody>
</table>

**Cardiovascular Disease**

Participants were classified as having cardiovascular disease (CVD) if they reported ever having any of the following conditions diagnosed by a doctor: angina, heart attack, stroke, heart murmur, irregular heart rhythm, ‘other heart trouble’. For the purpose of this report, participants were classified as having a particular condition only if they reported that the diagnosis was confirmed by a doctor. No attempt was made to assess these self-reported diagnoses objectively. There is therefore the possibility that some misclassification may have occurred, because some participants may not have remembered (or not remembered correctly) the diagnosis made by their doctor.

**Chronic Obstructive Pulmonary Disease (COPD)**

COPD is defined by the World Health Organisation (WHO) as ‘a pulmonary disease characterised by chronic obstruction lung airflow that interferes with normal breathing and is not fully reversible.’ It is associated with symptoms and clinical signs that in the past have been called ‘chronic bronchitis’ and ‘emphysema,’ including regular cough (at least three consecutive months of the year) and production of phlegm.
Cotinine

CIS-R See Revised Clinical Interview Schedule.

Diastolic blood When measuring blood pressure the diastolic arterial pressure is the lowest pressure at the resting phase of the cardiac cycle. See also Blood pressure, Systolic blood pressure.

Electronic cigarettes or e-cigarettes are battery-powered handheld devices which heat a liquid that delivers a vapour. The vapour is then inhaled by the user, which is known as ‘vaping’. E-cigarettes typically consist of a battery, an atomiser and a cartridge containing the liquid. Earlier models, often referred to as ‘cigalikes’, were designed to closely resemble cigarettes but there is now a wide variety of product types on the market. The liquid is usually flavoured and may not contain nicotine, although in most cases e-cigarettes are used with nicotine. Unlike conventional or traditional cigarettes, they do not contain tobacco and do not involve combustion (i.e. they are not lit). The questions about e-cigarettes were amended in 2016 to include the term ‘vaping devices’.

Food insecurity Food insecurity is ‘the inability to acquire or consume an adequate quality or sufficient quantity of food in socially acceptable ways, or the uncertainty that one will be able to do so’. Respondents answered three routed questions on food insecurity asking whether they had worried about running out of food, had eaten less than they should have or had actually run out of food in the last 12 months.

Frankfort plane The Frankfort Plane is an imaginary line passing through the external ear canal and across the top of the lower bone of the eye socket, immediately under the eye. Informants’ heads are positioned with the Frankfort Plane in a horizontal position when height is measured using a stadiometer as a means of ensuring that, as far as possible, the measurements taken are standardised.

Geometric mean The geometric mean is a measure of central tendency. It is sometimes preferable to the arithmetic mean, since it takes account of positive skewness in a distribution. An arithmetic mean is calculated by summing the values for all cases and dividing by the number of cases in the set. The geometric mean is instead calculated by multiplying the values for all cases and taking the \( n \)th root, where \( n \) is the number of cases in the set. For example, a dataset with two cases would use the square root, for three cases the cube root would be used, and so on. The geometric mean of 2 and 10 is 4.5 (\( 2 \times 10 = 20 \), \( \sqrt[2]{20} = 4.5 \)). Geometric means can only be calculated for positive numbers so zero values need to be handled before geometric means are calculated. See also mean.
The General Health Questionnaire (GHQ12) is a scale designed to detect possible psychiatric morbidity in the general population. It was administered to informants aged 13 and above. The questionnaire contains 12 questions about the informant’s general level of happiness, depression, anxiety and sleep disturbance over the past four weeks. Responses to these items are scored, with one point given each time a particular feeling or type of behaviour was reported to have been experienced ‘more than usual’ or ‘much more than usual’ over the past few weeks. These scores are combined to create an overall score of between zero and twelve. A score of four or more (referred to as a ‘high’ GHQ12 score) has been used in this report to indicate the presence of a possible psychiatric disorder.


Health risk category

Health risk category is derived from BMI and waist circumference. BMI is derived from height and weight data collected in the main interview and waist circumference measurements are collected in the biological module. These measures are used in combination to estimate the proportion of adults who fall into each of the risk categories listed in the table below.

<table>
<thead>
<tr>
<th>BMI Classification</th>
<th>'High' WC Men WC 94-102cm</th>
<th>Women WC 80-88cm</th>
<th>'Very high' WC Men WC &gt;102cm</th>
<th>Women WC &gt;88cm</th>
</tr>
</thead>
<tbody>
<tr>
<td>Normal weight (BMI 18.5 - &lt;25(kg/m²))</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Overweight (BMI 25 - &lt;30(kg/m²))</td>
<td>Increased</td>
<td></td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Obese</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I - Mild (BMI 30 - &lt;35(kg/m²))</td>
<td>High</td>
<td></td>
<td>Very high</td>
<td></td>
</tr>
<tr>
<td>II - Moderate (BMI 35 - &lt;40(kg/m²))</td>
<td>Very high</td>
<td></td>
<td>Very high</td>
<td></td>
</tr>
<tr>
<td>III - Extreme (BMI 40+(kg/m²))</td>
<td>Extremely high</td>
<td></td>
<td>Extremely high</td>
<td></td>
</tr>
</tbody>
</table>

**Household**

A household was defined as one person or a group of people who have the accommodation as their only or main residence and who either share at least one meal a day or share the living accommodation.

**Household Reference Person**

The household reference person (HRP) is defined as the householder (a person in whose name the property is owned or rented) with the highest income. If there is more than one householder and they have equal income, then the household reference person is the oldest.

**Hypertension + long-term conditions**

Ischaemic heart disease (IHD) is also known as coronary heart disease. Participants were classified as having IHD if they reported ever having angina, a heart attack or heart failure diagnosed by a doctor.

**Mean**

Most means in this report are arithmetic means (the sum of the values for cases divided by the number of cases).

**Median**

The value of a distribution which divides it into two equal parts such that half the cases have values below the median and half the cases have values above the median.

**Morbid obesity**

See Body mass index.

**NHS Health Board**

The National Health Service (NHS) in Scotland is divided up into 14 geographically-based local NHS Boards and a number of National Special Health Boards. Health Boards in this report refers to the 14 local NHS Boards (See Volume 2: Appendix B).

**Nicotine Replacement Therapy (NRT)**

The remedial administration of nicotine to the body by means other than tobacco, usually as part of smoking cessation. Common forms of nicotine replacement therapy are nicotine patches and nicotine gum.

**Obesity**

See Body mass index.

**Overweight**

See Body mass index.

**Percentile**

The value of a distribution which partitions the cases into groups of a specified size. For example, the 20th percentile is the value of the distribution where 20 percent of the cases have values below the 20th percentile and 80 percent have values above it. The 50th percentile is the median.

**p value**

A p value is the probability of the observed result occurring due to chance alone. A p value of less than 5% is conventionally taken to indicate a statistically significant result (p<0.05). It should be noted that the p value is dependent on the sample size, so that
with large samples differences or associations which are very small may still be statistically significant. Results should therefore be assessed on the magnitude of the differences or associations as well as on the p value itself. The p values given in this report take into account the clustered sampling design of the survey. See also **Significance testing**.

**Quintile**

Quintiles are percentiles which divide a distribution into fifths, i.e., the 20th, 40th, 60th and 80th percentiles.

**Raised waist circumference**

See **Waist circumference**.

**Revised Clinical Interview Schedule**

Details on symptoms of depression and anxiety are collected via a standardised instrument, the Revised Clinical Interview Schedule (CIS-R). The CIS-R is a well-established tool for measuring the prevalence of mental disorders. The complete CIS-R comprises 14 sections, each covering a type of mental health symptom and asks about presence of symptoms in the week preceding the interview. Prevalence of two of these mental illnesses - depression and anxiety - were introduced to the survey in 2008. Given the potentially sensitive nature of these topics, they were included in the nurse interview part of the survey prior to 2012, and in the computer-assisted self-completion part of the biological module from 2012 to 2018.

Questions on depression cover a range of symptoms, including feelings of being sad, miserable or depressed, and taking less of an interest and getting less enjoyment out of things than usual. Questions on anxiety cover feelings of anxiety, nervousness and tension, as well as phobias, and the symptoms associated with these.

References:

**Scottish Index of Multiple Deprivation**

The Scottish Index of Multiple Deprivation (SIMD) is the Scottish Government’s official measure of area based multiple deprivation. It is based on 37 indicators across 7 individual domains of current income, employment, housing, health, education, skills and training and geographic access to services and telecommunications. SIMD is calculated at data zone level, enabling small pockets of deprivation to be identified. The data zones are ranked from most deprived (1) to least deprived (6505) on the overall SIMD index. The result is a
comprehensive picture of relative area deprivation across Scotland.

This report uses the SIMD 2016. [https://www2.gov.scot/Topics/Statistics/SIMD](https://www2.gov.scot/Topics/Statistics/SIMD)

| Significance testing | Where differences in relation to a particular outcome between two subgroups, such as men and women, are highlighted in volume 1 of this report, the differences can be considered statistically significant, unless otherwise stated.

Statistical significance is calculated using logistic regression to provide a **p-value** based on a two-tailed significance test. One tailed-tests are used when the difference can only be in one direction. Two-tailed tests should always be used when the difference can theoretically be in either direction. For example, even though previous research has shown a higher prevalence of hazardous levels of alcohol consumption among men than among women, and we may expect this to be true in the most recent survey, a two-tailed test is used to confirm the difference.

| Standard deviation | The standard deviation is a measure of the extent to which the values within a set of data are dispersed from, or close to, the mean value. In a normally distributed set of data 68% of the cases will lie within one standard deviation of the mean, 95% within two standard deviations and 99% will be within 3 standard deviations. For example, for a mean value of 50 with a standard deviation of 5, 95% of values will lie within the range 40-60.

| Standard error | The standard error is a variance estimate that measures the amount of uncertainty (as a result of sampling error) associated with a survey statistic. All data presented in this report in the form of means are presented with their associated standard errors (with the exception of the WEMWBS scores which are also presented with their standard deviations). Confidence intervals are calculated from the standard error; therefore the larger the standard error, the wider the confidence interval will be.

| Standard error of the mean | See **Standard Error**.

| Standardisation | In this report, standardisation refers to standardisation (or 'adjustment') by age (see **Age standardisation**).

| Systolic blood Pressure | When measuring blood pressure, the systolic arterial pressure is pressure defined as the peak pressure in the arteries, which occurs near the beginning of the cardiac cycle. See also **Blood pressure, Diastolic blood pressure**.
Alcohol consumption is reported in terms of units of alcohol. A unit of alcohol is 8 gms or 10ml of ethanol (pure alcohol). See Chapter 3 of volume 1 of this Report for a full explanation of how reported volumes of different alcoholic drinks were converted into units.

The unweighted bases presented in the report tables provide the number of individuals upon which the data in the table is based. This is the number of people that were interviewed as part of the SHeS and provided a valid answer to the particular question or set of questions. The unweighted bases show the number of people interviewed in various subgroups including gender, age and SIMD.

Waist circumference is a measure of deposition of abdominal fat. It was measured during the biological module. A raised waist circumference has been defined as more than 102cm in men and more than 88cm in women.

See also Unweighted bases. The weighted bases are adjusted versions of the unweighted bases which involves calculating a weight for each individual so that their representation in the sample reflects their representation in the general population of Scotland living in private households. Categories within the table can be combined by using the weighted bases to calculate weighted averages of the relevant categories.

The Warwick-Edinburgh Mental Well-being Scale (WEMWBS) was developed by researchers at the Universities of Warwick and Edinburgh, with funding provided by NHS Health Scotland, to enable the measurement of mental well-being of adults in the UK. It was adapted from a 40 item scale originally developed in New Zealand, the Affectometer 2. The WEMWBS scale comprises 14 positively worded statements with a five item scale ranging from ‘1 - None of the time’ to ‘5 - All of the time’. The lowest score possible is therefore 14 and the highest is 70. The 14 items are designed to assess positive affect (optimism, cheerfulness, relaxation); and satisfying interpersonal relationships and positive functioning (energy, clear thinking, self-acceptance, personal development, mastery and autonomy).

References:
Information on measuring mental wellbeing using WEMWBS is available online from: https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs
A NATIONAL STATISTICS PUBLICATION FOR SCOTLAND

The United Kingdom Statistics Authority has designated the Scottish Health Survey as National Statistics in January 2010, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics.

Designation can be interpreted to mean that the statistics: meet identified user needs; are produced, managed and disseminated to high standards; and are explained well.

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How to access background or source data

The data collected for the Scottish Health Survey:
☒ are made available via the UK Data Service

☒ may be made available on request, subject to consideration of legal and ethical factors. Please contact scottishealthsurvey@gov.scot for further information.

Further breakdowns of the data:
☒ are available via the Scottish Health Survey website

Complaints and suggestions
If you are not satisfied with our service or have any comments or suggestions, please write to the Chief Statistician, 3WR, St Andrew’s House, Edinburgh, EH1 3DG, Telephone: (0131) 244 0302, e-mail statistics.enquiries@gov.scot.

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