

Appendix D Interviewer (stage 1) overview of elements and documents

D1 Overview of information collected during the interview stage

Table D.1 summarises the information collected during the interviewer stage of Year 3 fieldwork. Some of the information collected by interviewers was limited to a particular age group, as described.

Table D.1: Information collected during interviewer stage	
CAPI questionnaire	Participant
Household information	Main Food Provider (MFP)/aged 19 years and over
Information on the circumstances, habits that could affect dietary intake	All ages
Employment status, educational background, household income	Aged 16 years and over
Wearing of an ActiGraph (physical activity monitor)	
ActiGraph	Aged 4-15 years
Physical measurements	
Height	Aged 2 years and over
Weight	All ages
Collection of dietary data	
Four day food and drink diary	All ages
Self completion	
Smoking and drinking	Aged 8-17 years ¹
Recent Physical Activity	Aged 16 years and over
Doubly Labelled Water (DLW) sub-study	Aged 4 and over (quota sample)

Interviewer stage documents are provided later in this Appendix.

D2 Overview of Computer Assisted Personal Interview (CAPI) questionnaires

The CAPI questionnaire had three main elements: household composition/structure interview, MFP interview and individual interview.

The MFP questionnaire was divided into the following sections:

- Cooking facilities (e.g. access to a working freezer, oven, microwave).
- Shopping for food (e.g. main type of shop used, distance from home).
- Food preparation (e.g. boil, steam, roast, fry, grill).

The individual questionnaire had two parts: Part I, which was asked at the first main interviewer visit; and Part II, which was asked at the third main visit after the interviewer collected the diary. Parts I and II were both divided into a number of sections. These sections are shown in order in Table D.2, and the intended participants are indicated.

Table D.2: Content of Part I and II of the individual questionnaires	
Part I sections	Participant
Access to food at school	Aged under 1.5-15 years (or aged 16/17 years and in full-time education)
Eating habits	All ages
General health	All ages
Dental health	All ages
Drinking	Aged 8 years and over (those aged 8-17 years given a self-completion booklet)
Smoking	Aged 8 years and over (those aged 8-17 years given a self-completion booklet) ¹
Education	Aged 16 years and over
Job and income	Asked of MFP or selected participant about the 'Household Reference Person' (HRP)
ActiGraph introduction	Aged 4-15 years
Part II sections	Participant
Dietary supplements	All ages
ActiGraph collection	Aged 4-15 years
Sun exposure	All ages
Nurse introduction	All ages
DLW introduction	Aged 4 and over (quota sample)

¹ Participants aged 18 to 24 years were given the option of using a self-completion booklet for the questions on smoking and drinking in order to provide more privacy and to avoid disclosing their answers to other household members.

National Diet and Nutrition Survey (NDNS)

P2752 Year 3

Program Documentation

Interviewer Schedule

This 'paper version of the program' has been created to indicate the wording and content of the interviewer questionnaire.

PART 1: Interviewer Schedule

- Instructions for the interviewer are given in capital letters, and questions the interviewer is to ask the respondent are given as normal text.
- Items which appear in the actual program but which have been excluded here for clarity include: Repetition of respondent's name on each question; Checks on the accuracy of answer codes in relation to each other; Prompts for back-coding during the edit process.

Contents:

HOUSEHOLD GRID	2
MAIN FOOD PROVIDER QUESTIONNAIRE	9
DEMOGRAPHICS	19
SCHOOL PROVISION.....	22
EATING OUT AND OTHER PROVISION	26
EATING HABITS.....	28
FOOD AVOIDANCE	32
GENERAL HEALTH.....	37
ORAL HEALTH	39
SELF-COMPLETIONS	42
SMOKING	43
DRINKING.....	45
ACTIGRAPH PLACEMENT	51
HEIGHT & WEIGHT MEASUREMENTS.....	55
DIETARY SUPPLEMENTS	60
SUN EXPOSURE MODULE.....	62
DIARY COLLECTION & PHYSICAL ACTIVITY QUESTIONNAIRE PLACEMENT	69
NHS CENTRAL REGISTER & CANCER REGISTRY CONSENT FORM	74
RECONTACT QUESTIONS	75
ACTIGRAPH COLLECTION.....	77
DOUBLY LABELLED WATER (DLW)	80
NURSE INTRODUCTION.....	84

HOUSEHOLD GRID

Name

RECORD THE NAME (OR A UNIQUE IDENTIFIER) FOR EACH MEMBER OF THE CATERING UNIT. WHEN ALL HOUSEHOLD MEMBERS HAVE BEEN ENTERED, PRESS PgDn.

SHGInt

I'd like to know a little about the members of your household **who shop and cook as a group**. Can you tell me the names of everyone in your household (who shop and cook as a group).

INTERVIEWER: Press '1' to continue and record (adult respondent / child's parent and/or MFP) as first person in household

PRESS <ENTER> TO CONTINUE

1 continue

(The following questions are asked about each household member. "You / X" is substituted with the appropriate name for X).

Sex

INTERVIEWER: Ask or record sex of X

1 Male

2 Female

DoB

What is your / X's date of birth?

INTERVIEWER: If day not given....enter 15 for day.

If month not given....enter 6 for month.

IF (DOB = Don't know / Refusal) THEN

Agelf

What was your / X's age last birthday?

ENTER 0 FOR A CHILD UNDER 12 MONTHS.

98 or more = CODE 97

INTERVIEWER: If year of birth not given: 'What was your / X's age last birthday?'

INTERVIEWER: If respondents refuse to give their age, or cannot, then give your best estimate.

Range: 0..97

DVAge

Age, computed

DvAgeM

Age in months, computed

IF (DVAge ≥ 16) THEN

MarSt2

ASK OR RECORD MARITAL STATUS.

CODE FIRST THAT APPLIES.

Are you / is X ...

INTERVIEWER The aim is to obtain legal marital status, irrespective of any de facto arrangement. The only qualification to this aim is that you should not probe the answer 'separated'.

INTERVIEWER Should a respondent query the term, explain that it covers any person whose spouse is living elsewhere because of estrangement (whether the separation is legal or not). Ignore temporary absences, e.g. on oil rig.

INTERVIEWER A person whose spouse has been working away from home for over 6 months, e.g. on a contract overseas or in the armed forces, should still be coded as married and living with husband/wife if the separation is not permanent.

- | | | |
|---|-----------|--|
| 1 | NevMarr | "single, that is, never married" |
| 2 | MarrLiv | "married and living with your husband/wife" |
| 3 | Civil | "civil partner in a legally recognised Civil Partnership" |
| 4 | Separated | "married and separated from your husband/wife" |
| 5 | Divorced | "divorced" |
| 6 | Widowed | "or widowed?" |
| 7 | CivilSep | " Spontaneous only - formerly in a legally recognised civil partnership and separated from civil partner" |
| 8 | CivilDis | " Spontaneous only - formerly in a legally recognised civil partnership and civil partnership is now legally dissolved" |
| 9 | CivWid | " Spontaneous only - a surviving civil partner (his/her partner has since died)" |

IF (more than 1 person aged 16+ in household) AND (MarStat = NevMar OR Separated OR Divorced OR Widowed OR CivilSep OR CivilDis OR CivWid) THEN LiveW2

May I just check, are you / is X living with someone in the household as a couple?

ASK OR RECORD.

INTERVIEWER: Only respondents who are living with their partner in this household should be coded as living together as a couple.

INTERVIEWER: You may code No without asking the question ONLY if all members of the household are too closely related for any to be living together in a de facto marital relationship.

- | | | |
|---|---------|---|
| 1 | Yes | "Yes" |
| 2 | No | "No" |
| 3 | SameSex | " Spontaneous only : Same sex couple (but not in a formal registered civil partnership)" |

DVMarDF

De facto marital status, computed

- | | | |
|---|----------|---|
| 1 | Married | "Married" |
| 2 | DFCivil | "Civil partnered" |
| 3 | Cohab | "Cohabiting" |
| 4 | DFSingle | "Single" |
| 5 | DFSepar | "Separated" |
| 6 | DFDivor | "Divorced" |
| 7 | DFWidow | "Widowed" |
| 8 | DFCivDis | "Formerly in same-sex civil partnership, now legally dissolved" |
| 9 | DFCivWid | "A surviving civil partner" |

IF (DvAge ≥ 16) THEN

WrkStat

Is X / Are you ...READ OUT...

INTERVIEWER: CODE FIRST TO APPLY.

- | | | |
|---|---------|---|
| 1 | FTEduc | "...going to school or college full-time (including on vacation)" |
| 2 | Working | "...in full or part-time employment, or" |
| 3 | NWork | "...not working at present?" |

IF (WrkStat = FTEduc) THEN

PTWork

Does X / Do you do any paid or voluntary work as well as studying?

- 1 Yes
- 2 No

IF (WrkStat = FTEduc OR NWork) AND (PTWork = No) THEN

IF (WrkStat = NWork) THEN

EverWk

Has X / Have you ever had a paid job, apart from casual or holiday work?

- 1 Yes
- 2 No

NatID

SHOW CARD A

What do you consider your / X's **national identity** to be? Please choose your answer from this card.

- 1 English
- 2 Scottish
- 3 Welsh
- 4 Irish
- 5 British
- 6 Other "Other answer"

IF (NatID = Other) THEN

NatOth

How would you describe your / X's national identity?

INTERVIEWER: IF SOMEONE DESCRIBES THEMSELVES AS HALF ENGLISH AND HALF IRISH OR ANY OTHER COMBINATION OF WELSH/SCOTTISH/IRISH/ENGLISH CODE THEM AS 'Mixed British'.

- 1 Mixed "Mixed British - SPECIFY AT NEXT QUESTION"
- 2 Describe "Other - SPECIFY AT NEXT QUESTION"

IF (NatOth = Describe) THEN

XNatOth

INTERVIEWER: ENTER DESCRIPTION OF NATIONAL IDENTITY.

: STRING [100]

EthGrp

SHOW CARD B

To which of these ethnic groups do you consider you / X belong(s)?

INTERVIEWER: THIS IS A QUESTION OF RESPONDENT'S (OR PROXY'S) OPINION.

- 1 WhtBrit "White - British"
- 2 WhtOth "Any other white background (please describe)"
- 3 MixedWBC "Mixed - White and Black Caribbean"
- 4 MixedWBA "Mixed - White and Black African"
- 5 MixedWAs "Mixed - White and Asian"
- 6 MixedOth "Any other mixed background (please describe)"
- 7 Indian "Asian or Asian British - Indian"
- 8 Pakistan "Asian or Asian British - Pakistani"
- 9 Bngldesh "Asian or Asian British - Bangladeshi"
- 10 AsianOth "Any other Asian/Asian British background (please describe)"
- 11 BlackCrb "Black or Black British - Caribbean"
- 12 BlackAfr "Black or Black British - African"
- 13 BlackOth "Any other Black/Black British background (please describe)"

- | | | |
|----|---------|-------------------------------|
| 14 | Chinese | "Chinese" |
| 15 | Other | "Any other (please describe)" |

IF (EthGrp = 2, 6, 10, 13 OR 15) THEN

EthOth

Please can you describe your / X's ethnic group?

INTERVIEWER: ENTER DESCRIPTION OF ETHNIC GROUP.

: STRING [100]

IF (Person > 1) THEN

Rel

SHOW CARD C

INTERVIEWER: CODE RELATIONSHIP OF EACH HOUSEHOLD MEMBER TO THE OTHERS - X is Y'S...

SOME CODES MAY NOT BE VISIBLE ON THE SCREEN.

INTERVIEWER YOU MAY WISH TO INTRODUCE THIS SECTION. ONE POSSIBLE INTRODUCTION IS: 'There are a lot of changes taking place in the make-up of households/families and this section is to help find out what those changes are. I'd like you to tell me the relationship of each member of the household to every other member.'

INTERVIEWER: THIS SECTION MUST BE ASKED FOR ALL HOUSEHOLDS CONSISTING OF MORE THAN ONE PERSON. PLEASE ASK IN EVERY CASE. YOU SHOULD NOT MAKE ASSUMPTIONS ABOUT ANY RELATIONSHIP.

TREAT RELATIVES OF COHABITING MEMBERS OF THE HOUSEHOLD AS THOUGH THE COHABITING COUPLE WERE MARRIED, UNLESS THE COUPLE ARE A SAME SEX COUPLE.

HALF-BROTHERS/SISTERS SHOULD BE CODED WITH STEP-BROTHERS/SISTERS. ASK RESPONDENT TO GIVE THE CODE NUMBER ON THE CARD RATHER THAN THE RELATIONSHIP.

- | | | |
|----|-----------|------------------------------|
| 1 | Spouse | "Husband/Wife" |
| 2 | CivilP | "Civil partner" |
| 3 | Cohabitee | "Partner/Cohabitee" |
| 4 | Child | "Natural son/daughter" |
| 5 | AChild | "Adopted son/daughter" |
| 6 | FChild | "Foster child" |
| 7 | StChild | "Stepson/stepdaughter" |
| 8 | ILChild | "Son-in-law/daughter-in-law" |
| 9 | Parent2 | "Natural Parent" |
| 10 | AdParent | "Adoptive parent" |
| 11 | FParent | "Foster parent" |
| 12 | StParent | "Step-parent" |
| 13 | ILParent | "Parent-in-law" |
| 14 | Sib | "Natural brother/sister" |
| 15 | HSib | "Half-brother/sister" |
| 16 | StSib | "Step-brother/sister" |
| 17 | ASib | "Adopted brother/sister" |
| 18 | FSib | "Foster brother/sister" |
| 19 | ILSib | "Brother/sister-in-law" |
| 20 | GChild | "Grand-child" |
| 21 | GParent | "Grand-parent" |
| 22 | OthRel | "Other relative" |
| 23 | NonRel | "Other non-relative" |

HRP SELECTION

HHldr

In whose name is the accommodation owned or rented?

INTERVIEWER: IF THE RENT OR MORTGAGE FOR THIS ACCOMMODATION IS PAID FOR BY SOMEONE OUTSIDE THE HOUSEHOLD, CODE THE PERSON IN THE HOUSEHOLD WHO IS RESPONSIBLE FOR THE ACCOMMODATION. ANYONE ELSE? CODE ALL THAT APPLY.

IF (more than one person coded as being the householder at HHldr) THEN

HiHNum

You have told me that X and X jointly own or rent the accommodation. Who has the highest income (from earnings, benefits, pensions and any other sources)?

INTERVIEWER: THESE ARE THE JOINT HOUSEHOLDERS:

(Names of joint householders)

ENTER PERSON NUMBER. IF TWO OR MORE HAVE SAME INCOME, ENTER 11.

IF RESPONDENT ASKS FOR PERIOD TO AVERAGE OVER - ONE YEAR.

PROMPT AS NECESSARY FOR JOINT HOUSEHOLDERS: IS ONE OF THEM THE SOLE PERSON WITH PAID WORK OR OCCUPATIONAL PENSION.

Range: 1..11

IF (HiHNum=11) THEN

JntEldA

ENTER PERSON NUMBER OF THE **ELDEST** JOINT HOUSEHOLDER FROM THOSE WITH THE SAME HIGHEST INCOME.

ASK OR RECORD.

IF (HiHNum=DONTKNOW OR REFUSAL) THEN

JntEldB

ENTER PERSON NUMBER OF THE ELDEST JOINT HOUSEHOLDER.

ASK OR RECORD.

HRPNum {Computed from responses above}

Person number of household reference person:

AdNum1

ENTER PERSON NUMBER OF ADULT RESPONDENT (NAME RECORDED ON FIRST PAGE OF THE ARF)

Range: 1..11

IF (Female adult aged ≤ 49) THEN

AdChk

INTERVIEWER: When doing the selection you should have checked to ensure that **(Name of selected adult respondent)** is not currently pregnant or breastfeeding. Please type '1' to confirm that this is the case

- | | | |
|---|------|-----------------------------------|
| 1 | NotP | "X not pregnant or breastfeeding" |
| 2 | Preg | "X is pregnant or breastfeeding" |

ChNum

ENTER THE PERSON NUMBER OF 'RESPONDENT 2' AGED 18 MONTHS TO 18 YEARS. (NAME RECORDED ON FIRST PAGE OF THE ARF)

Range: 1..11

Par1

Which of the people in this household are **(Name of selected child respondent)**'s parents or have legal parental responsibility for him/her on a permanent basis?

INTERVIEWER: Code first person at this question.

Range: 1..11

IF (Par1 = 1..10) THEN**Par2**

Which other person in this household is **(Name of selected child respondent)**'s parent or has legal parental responsibility for him/her on a permanent basis?

INTERVIEWER: Code second person at this question.

Range : 1..11

IF (Female child and aged 13-18) THEN**ChChk**

INTERVIEWER: When doing the selection you should have checked to ensure that **(Name of selected child respondent)** is not currently pregnant or breastfeeding. Please type '1' to confirm that this is the case"

- 1 NotP "X not pregnant or breastfeeding"
- 2 Preg "X is pregnant or breastfeeding"

ChResp

SOME OF THE QUESTIONS ABOUT **(Name of selected child respondent)** WILL NEED TO BE ASKED OF AN ADULT.

Enter person number of adult who will answer questions on behalf of **(Name of selected child respondent)**

INTERVIEWER: Only an adult household member can act as a proxy when collecting information about children.

Range: 1..10

MFPNum

Enter the person number of the **MAIN FOOD PROVIDER** (NAME RECORDED ON ARF).

Range: 1..10

TENURE**Ten1**

SHOW CARD D

In which of these ways do you/does your household occupy this accommodation?

INTERVIEWER: CODE FIRST THAT APPLIES.

NOTE: QUESTIONS ABOUT TENURE ARE ASKED ABOUT THE HOUSEHOLD REFERENCE PERSON

- 1 Own "Own outright"
- 2 Morg "Buying it with the help of a mortgage or loan"
- 3 Share "Pay part rent and part mortgage (shared ownership)"
- 4 Rent "Rent it"
- 5 RentF "Live here rent-free (including rent-free in relative's/friend's property; excluding squatting)"
- 6 Squat "Squatting"

IF (Ten1 = Rent OR RentF) THEN**LLord**

Who is your landlord?

INTERVIEWER: IF PROPERTY IS LET THROUGH AN AGENT, THE QUESTION REFERS TO THE OWNER NOT THE AGENT.

CODE 1 (LOCAL AUTHORITY) INCLUDES PEOPLE RENTING FROM HOUSING ACTION TRUSTS.

CODE 2 (HOUSING ASSOCIATION) INCLUDES REGISTERED SOCIAL LANDLORDS AND LOCAL HOUSING COMPANIES.

USE CODE 5 ONLY IF THE RESPONDENT AND LANDLORD WERE FRIENDS BEFORE THEY WERE TENANT AND LANDLORD, NOT IF THEY HAVE ONLY BECOME FRIENDLY SINCE THEN.

1	LA	"The local authority/council/New Town Development/Scottish Homes"
2	HA	"A housing association or co-operative or charitable trust or Local Housing company"
3	Comp	"Employer (organisation) of a household member"
4	OthOrg	"Another organisation"
5	RelFrnd	"Relative/friend (before you lived here) of a household member"
6	EmpIndiv	"Employer (individual) of a household member"
7	OthIndiv	"Another individual private landlord"

IF (Ten1 = Rent OR RentF) THEN

Furn

Is the accommodation provided...

...RUNNING PROMPT...

1	Furnd	"...furnished"
2	PFurn	"...partly furnished (eg carpets and curtains only)"
3	UnFurn	"...or, unfurnished?"

MAIN FOOD PROVIDER QUESTIONNAIRE

THIS IS A HOUSEHOLD LEVEL QUESTIONNAIRE ASKED ONCE AT ALL ELIGIBLE HOUSEHOLDS. EITHER THE MAIN FOOD PROVIDER / MFP (AGED 16 YEARS OR OVER), IDENTIFIED IN THE HOUSEHOLD COMPOSITION QUESTIONNAIRE, ANSWERS THE FOLLOWING QUESTIONS OR A PROXY MFP INTERVIEW IS CONDUCTED WITH RESPONDENT 1 (AGED 19 YEARS OR OVER).

MFPProx

IS THIS A PERSONAL OR A PROXY INTERVIEW WITH THE MAIN FOOD PROVIDER?

- 1 WithMFP "PERSONAL INTERVIEW WITH MFP"
- 2 WithProx "PROXY INTERVIEW"

IF (MFPProx = WithProx) THEN

MProxWho

ENTER THE PERSON NUMBER OF PROXY RESPONDENT

list of household members

ENTER CODE 11 IF NON-HOUSEHOLD MEMBER

Range: 1..11

COOKING AND STORAGE FACILITIES

KitchInt

Firstly, I'd like to ask you some questions about the place where you live.

PRESS <ENTER> TO CONTINUE

- 1 Continue

Kitch

Do you / Does your household have a kitchen or a dedicated food preparation or cooking area?

- 1 Yes
- 2 No

IF (Kitch = Yes) THEN

HotMeal

Are you able to cook a hot meal in this accommodation?

INTERVIEWER: 'YOU' REFERS TO THE CATERING UNIT.

- 1 Yes
- 2 No

IF (Kitch = Yes OR No) THEN

Equip

Which, if any, of these items do you have regular access to?

INTERVIEWER: INDIVIDUAL PROMPT. Do you have (access to) ...

CODE ALL THAT APPLY

'YOU' REFERS TO THE CATERING UNIT.

- 1 Fridge "...a refrigerator?"
- 2 Freeze "a freezer (excluding freezer compartment at top of fridge)?"
- 3 Moven "a microwave oven?"
- 4 Hob "a gas or electric hob (ring)?"
- 5 Oven "an oven?"
- 6 None "SPONTANEOUS ONLY - None of these"

IF (Kitch = Yes) THEN

ShareKit

Do you share the kitchen/food preparation or cooking area with any other household or any other members of your household who shop and cook separately from you?

INTERVIEWER: ASK OR RECORD. DO NOT INCLUDE MEMBERS OF THE CATERING UNIT. 'YOU' REFERS TO THE CATERING UNIT.

- | | | |
|---|----------|---|
| 1 | YesHH | "Yes, shares with other household members
OUTSIDE OF CATERING UNIT)" |
| 2 | YesNonHH | "Yes, shares with others OUTSIDE OF HOUSEHOLD" |
| 3 | NoShare | "No, doesn't share" |

IF (ShareKit = YesHH) THEN

SharWhoH

Who do you share the kitchen with?

INTERVIEWER: RECORD RELATIONSHIP TO MFP OF OTHER HOUSEHOLD MEMBER(S).

DO NOT INCLUDE MEMBERS OF THIS CATERING UNIT.

- | | | |
|---|----------|------------------------|
| 1 | Family | "Family/relatives" |
| 2 | Friend | "Friend" |
| 3 | Flatmate | "Flat mate/House mate" |
| 4 | Lodger | "Lodger" |
| 5 | Other | "Other" |

ASK ALL

DinTab

Do you/ Does your household have a table at which you/ your household can sit and eat a meal?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

ASK ALL

StoreOK

Thinking now about food storage...

Do you feel that your food storage facilities are adequate?

'YOUR' REFERS TO THE CATERING UNIT.

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (StoreOK = No) THEN

StoreOK2

SHOW CARD E

In what way are they not adequate?

INTERVIEWER: CODE ALL THAT APPLY

- | | | |
|---|----------|--|
| 1 | Cupboard | "Not enough cupboard space" |
| 2 | Fridge | "Fridge is too small (or no fridge available)" |
| 3 | Freezer | "Freezer is too small (or no freezer available)" |
| 4 | Damp | "Damp/mouldy" |
| 5 | Infest | "Infested with rodents or insects" |
| 6 | NSecure | "Not secure" |
| 7 | Other | "Other" |

IF (StoreOK = No) THEN

StoreOK3

Does the fact that your storage facilities are inadequate influence your food shopping?

- | | |
|---|-----|
| 1 | Yes |
|---|-----|

2 No

IF (StoreOK3 = Yes) THEN

StoreOK4

How does this influence your food shopping?

INTERVIEWER: CODE ALL THAT APPLY

'YOUR' REFERS TO SHOPPING FOR THE CATERING UNIT.

- | | | |
|---|----------|--|
| 1 | NoBulk | "Cannot buy in bulk" |
| 2 | ShopOft | "Have to shop more often" |
| 3 | StorFres | "Inadequate storage space for FRESH food" |
| 4 | StorFroz | "Inadequate storage space for FROZEN food" |
| 5 | Other | "Other" |

ASK ALL

StoreShr

Do you share your **food storage** facilities with anyone who does not cook or eat with you?

INTERVIEWER: DO NOT INCLUDE MEMBERS OF THE CATERING UNIT.

'YOU' REFERS TO THE CATERING UNIT.

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (StoreShr = Yes) THEN

SShrInf

Does the fact that you share storage facilities with someone outside your household influence your food shopping?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

SHOPPING HABITS

ASK ALL

ShopIntr

Now I would like to ask you about shopping.

INTERVIEWER: PROMPT WHENEVER NECESSARY.

IF RESPONDENT DOESN'T KNOW ANSWERS, TRY TO SPEAK TO PERSON WHO DOES SHOPPING.

PRESS <ENTER> TO CONTINUE

- | | |
|---|----------|
| 1 | Continue |
|---|----------|

Shop

SHOW CARD F

Where do you/ does your household shop for food? Please include all shopping, including your main shopping, top-up shopping in between your main shopping trips, meat and fish, fruit and vegetables, and any other food shopping.

INTERVIEWER: CODE ALL THAT APPLY.

INTERVIEWER: IF SHOPPING ORDERED FROM LARGE SUPERMARKET OVER INTERNET AND DELIVERED CODE AS LARGE SUPERMARKET.

- | | | |
|---|---------|---|
| 1 | LSuper | "Large supermarket, including home delivery from supermarket" |
| 2 | SSuper | "Mini supermarket (e.g. Tesco Metro)" |
| 3 | CornerS | "Local/corner shop (including newsagents)" |
| 4 | Garage | "Garage forecourt" |
| 5 | Greeng | "Independent greengrocer" |
| 6 | Butcher | "Independent butcher" |
| 7 | Baker | "Independent baker" |

8	FishM	"Independent fishmonger"
9	Market	"Market (including stalls or farmer's markets)"
10	Farm	"Farm"
11	HomeDel	"Home delivery (including vegetable boxes) - not from a supermarket"
12	Other	"Other"

NumShop

Number of different types of shop used

Range: 1..12

IF (MainShp = LSuper..Farm OR Other) OR (Shop = ONLY LSuper OR SSuper) THEN MainShp

Which of these is used for your 'main' shopping trip?

INTERVIEWER: ENCOURAGE RESPONDENT TO SELECT ONE TRIP EVEN IF SEVERAL ARE CONSIDERED 'MAIN'.

IF MAIN SHOPPING ORDERED FROM SUPERMARKET OVER INTERNET AND DELIVERED CODE AS SUPERMARKET.

1	LSuper	"Large supermarket, including home delivery from supermarket"
2	SSuper	"Mini supermarket (e.g. Tesco Metro)"
3	CornerS	"Local/corner shop (including newsagents)"
4	Garage	"Garage forecourt"
5	Greeng	"Independent greengrocer"
6	Butcher	"Independent butcher"
7	Baker	"Independent baker"
8	FishM	"Independent fishmonger"
9	Market	"Market (including stalls or farmer's markets)"
10	Farm	"Farm"
11	HomeDel	"Home delivery (including vegetable boxes) - not from a supermarket"
12	Other	"Other"
13	Several	"Use more than one of these for main shop (SPONTANEOUS ONLY)"

IF (MainShp IN [LSuper..Farm, Other] OR Shop = ONLY Large supermarket or ONLY Mini supermarket) THEN

ShopOff

SHOW CARD G

How often do you/ does your household go there to do a main shop?

INTERVIEWER: CODE FIRST THAT APPLIES. IF HAS SUPERMARKET DELIVERY CODE HOW OFTEN DELIVERED FROM SUPERMARKET.

1	MOnceD	"More than once a day"
2	OnceD	"Once a day"
3	TThWk	"2 or 3 times a week"
4	Weekly	"Weekly"
5	TThMth	"2 or 3 times a month"
6	Monthly	"Monthly"
7	TwoMths	"Every 2 months"
8	LTwoMths	"Less often than every 2 months"

ASK ALL

ShopFV

Where do you/ does your household mainly buy fresh fruit and vegetables from?

INTERVIEWER: CODE ONE ONLY. IF MORE THAN ONE, CODE WHERE **MOST** FRUIT AND VEG BOUGHT FROM.

DO NOT INCLUDE FRUIT AND VEGETABLES THAT ARE GROWN BY THE RESPONDENT. SUCH FOOD SHOULD BE INCLUDED UNDER THE FOLLOWING QUESTIONS ABOUT FREE FOOD.

1	LSuper	"Large supermarket, including home delivery from supermarket"
2	SSuper	"Mini supermarket (e.g. Tesco Metro)"
3	CornerS	"Local/corner shop (including newsagents)"
4	Garage	"Garage forecourt"
5	Greeng	"Independent greengrocer"
6	Butcher	"Independent butcher"
7	Baker	"Independent baker"
8	FishM	"Independent fishmonger"
9	Market	"Market (including stalls or farmer's markets)"
10	Farm	"Farm"
11	HomeDel	"Home delivery (including vegetable boxes) - not from a supermarket"
12	Other	"Other"
13	Several	"Use more than one of these for main shop (SPONTANEOUS ONLY)"

FVOft

SHOW CARD G

How often do you buy fresh fruit and vegetables?

INTERVIEWER: CODE FIRST THAT APPLIES

1	MOnceD	"More than once a day"
2	OnceD	"Once a day"
3	TThWk	"2 or 3 times a week"
4	Weekly	"Weekly"
5	TThMth	"2 or 3 times a month"
6	Monthly	"Monthly"
7	TwoMths	"Every 2 months"
8	LTwoMths	"Less often than every 2 months"

FruitAv

How often do you usually have FRESH FRUIT available in your home?

Would you say ...

1	MTime	"Most of the time"
2	SomeT	"Sometimes"
3	Never	"Or, never?"

OrgBuy

Do you ever buy any organic foods for your household or does anyone ever buy them for your household?

INTERVIEWER: IF ASKED FOR A DEFINITION OF ORGANIC, SAY :

'When we say organic we mean anything labelled organic, or anything that you know is grown without pesticides and without artificial (or chemical) fertilisers'

IN OTHER EU COUNTRIES ORGANIC PRODUCTS ARE KNOWN AS BIOLOGIC PRODUCTS

- 1 Yes
- 2 No

IF (OrgBuy = Yes) THEN

OrgWhat

SHOW CARD H

I'd like you to look at the foods listed on this card. Which of them do you buy or do you have bought for you as organic products?

INTERVIEWER: CODE ALL THAT APPLY.

IN OTHER EU COUNTRIES ORGANIC PRODUCTS ARE KNOWN AS BIOLOGIC PRODUCTS.

CODE ORGANIC SMOOTHIES OR WINE AS CODE 16 - OTHER ORGANIC PRODUCTS.

- 1 FreFru "Fresh fruit or fruit juice"

2	DriFru	"Dried fruit"
3	Nuts	"Nuts"
4	Pots	"Potatoes"
5	Veget	"Vegetables or salad (including celery), dried beans or lentils"
6	Cereal	"Breakfast cereals"
7	OthCer	"Other cereal products, eg bread, rice and pasta"
8	Meat	"Meat (including chicken)"
9	Eggs	"Eggs"
10	Milk	"Milk"
11	Dairy	"Other dairy products"
12	Crisps	"Crisps or savoury snacks"
13	Biscuit	"Biscuits and cakes (including organic cereal bars)"
14	Confect	"Confectionery"
15	BabyW	"Baby/weaning foods"
16	Other	"Other organic products"
17	None	"None of these"

ASK ALL

MoreOrg

Would you like to eat (more) organic foods?

- 1 Yes
- 2 No

IF (MoreOrg=Yes) THEN

WhyMOrg

Can you tell me why you don't currently eat as much organic foods as you'd like?

INTERVIEWER: CODE ALL THAT APPLY.

- 1 NAfford "Can't afford it/it's too expensive"
- 2 NAccess "Don't know where to buy it/the shops don't sell (enough) of it."
- 3 Other "Other"
- 4 NoReas "No particular reason"

FOOD PREPARATION

ASK ALL

Preplntr

I am now going to ask you about how you usually prepare some food items.

PRESS <ENTER> TO CONTINUE

- 1 Continue

ASK ALL

MincF1

When you buy mince, do you choose mince with fat or mince without much fat?

INTERVIEWER: PROMPT IF NECESSARY, 'MINCE' MEANS ANY GROUND ANIMAL PRODUCT (BEEF, CHICKEN, PORK ETC.)

- 1 MinFat "Mince with fat"
- 2 MinNoFat "Mince without much fat"
- 3 NoEat "Do not prepare/eat this food"

IF (MinceF1 = MinFat OR MinNoFat) THEN

MincF2

When you are cooking mince, do you strain off the fat or do you not strain off the fat?

- 1 Strain "Strain off the fat"

2 NoStrain "Do not strain off the fat"

ASK ALL

ChipHow

SHOW CARD I

Please describe how you usually prepare **chips**, that is if you or anyone in your household eat(s) them?

INTERVIEWER: IF 'VARIES', CODE HOW PREPARED MOST OFTEN. DO NOT INCLUDE CHIPS PURCHASED FROM TAKEAWAY OUTLET.

- | | | |
|---|--------|--|
| 1 | FrOld | "Freshly made from old potatoes" |
| 2 | FrNew | "Freshly made from new potatoes" |
| 3 | Frozen | "Frozen, fried" |
| 4 | OvenC | "Oven ready chips" |
| 5 | MicroC | "Microwave chips (eg McCain Microchips)" |
| 6 | Other | "Make chips another way" |
| 7 | NoEat | "Do not prepare/eat this food" |

SaltChk

Do you add salt or salt substitute to your food during cooking, such as salt in water for cooking potatoes?

INTERVIEWER: IF USE BOTH SALT AND SALT SUBSTITUTE, CODE WHICH USED MOST OFTEN.

- | | | |
|---|---------|-------------------|
| 1 | Salt | "Salt" |
| 2 | Subst | "Salt substitute" |
| 3 | Neither | "Neither" |

IF (SaltChk = Salt) THEN

SalHowC

Is that always, usually or sometimes (that you add salt to your food during cooking)?

- | | | |
|---|---------|-------------|
| 1 | Always | "Always" |
| 2 | Usually | "Usually" |
| 3 | Somet | "Sometimes" |

IF (SaltChk = Subst) THEN

SltShow

Is that always, usually or sometimes (that you add salt substitute to your food during cooking)?

- | | | |
|---|---------|-------------|
| 1 | Always | "Always" |
| 2 | Usually | "Usually" |
| 3 | Somet | "Sometimes" |

ASK ALL

Ingred

SHOW CARD J

Which of the following do you usually have available in your food store?

- | | | |
|----|--------|--|
| 1 | Flour | "Flour (self-raising and/or plain and/or bread)" |
| 2 | Sugar | "Sugar (caster, granulated, brown)" |
| 3 | CFlour | "Cornflour" |
| 4 | Pasta | "Dried pasta (spaghetti, noodles)" |
| 5 | Rice | "Rice (long grain, basmati)" |
| 6 | TomTin | "Tomatoes in tins or cartons" |
| 7 | TomPur | "Tomato paste/puree" |
| 8 | Oil | "Olive oil or other vegetable oil" |
| 9 | Vin | "Vinegar (wine, balsamic)" |
| 10 | Pulse | "Dried or tinned pulses (canellini or borlotti beans, chickpeas etc.)" |

11	Bean	"Baked beans"
12	Herb	"Dried herbs, spices or curry powder"
13	Stock	"Stock cubes"
14	Soy	"Soy sauce"
15	TinFish	"Tinned fish (sardines, anchovies)"
16	None	"None of these"
17	All	"SPONTANEOUS ONLY: All of these"

EMPLOYMENT OF HOUSEHOLD REFERENCE PERSON

IF (HRP = respondent) THEN questions asked in person, ELSE questions asked of MFP about HRP:

JHRPIIntr

Now I would like to ask a few questions about the job that you do/ HRP does.

IF ASKED SAY 'because the accommodation is in your/ HRP's name'.

PRESS <ENTER> TO CONTINUE

1 Continue

IndD

CURRENT/ MOST RECENT JOB OF HRP

What does/did the firm or organisation you/HRP work(s)/worked for mainly make or do (at the place where you/HRP work(s)/worked)?

INTERVIEWER: DESCRIBE FULLY - PROBE MANUFACTURING or PROCESSING or DISTRIBUTING ETC. AND MAIN GOODS PRODUCED, MATERIALS USED, WHOLESALE or RETAIL ETC.

: STRING [80]

OccT

JOB TITLE OF CURRENT / MOST RECENT JOB

What is/was your/ HRP main job?"

: STRING [30]

OccD

CURRENT / MOST RECENT JOB OF HRP

What do/does/did you/HRP mainly do in this job?

INTERVIEWER: CHECK SPECIAL QUALIFICATIONS/TRAINING NEEDED TO DO THE JOB

: STRING [80]

Stat

Are/does/did you/HRP working as an employee or are/does/did you/HRP self-employed?

- | | | |
|---|----------|-----------------|
| 1 | Employee | "Employed" |
| 2 | SelfEmp | "Self-employed" |

Manage

In this job, do/did you/HRP have any formal responsibility for supervising the work of other employees?

INTERVIEWER: CODE 1 ('YES') INCLUDES PEOPLE WHO SAY THEY ARE MANAGERS. DO NOT INCLUDE IN CODE 1 (I.E. CODE AS 'NO'):

SUPERVISORS OF CHILDREN (E.G. TEACHERS, NANNIES, CHILDMINDERS)

SUPERVISORS OF ANIMALS

PEOPLE WHO SUPERVISE SECURITY OR BUILDINGS ONLY (E.G. CARETAKERS, SECURITY GUARDS)

- 1 Yes
- 2 No

EmpNo

How many people work(ed) for your/HRP's employer at that place?
Are/were there ... (RUNNING PROMPT)...

- 1 n1_24 "1-24"
- 2 n25_499 "25 to 499, or"
- 3 n500plus "500 or more employees?"

Solo

Are/does/did you/HRP working alone or do/does/did you/HRP have employees?

- 1 OnOwn "on own/with partner(s) but no employees"
- 2 WithEmp "with employees"

SENo

How many people do/does/did you/HRP employ at the place where you/HRP work(s)?
Were there ... (RUNNING PROMPT)...

- 1 n1_24 "1-24"
- 2 n25_499 "25 to 499, or"
- 3 n500plus "500 or more employees?"

BENEFITS

Benefits

SHOW CARD K

Please could you tell me which of these benefits, if any, you or anyone in your household currently claim?

INTERVIEWER: CODE ALL THAT APPLY

- 1 WorkCred "Working families tax credit (replace with working tax credits and child tax credits)"
- 2 IncSupp "Income support"
- 3 JSA "Income-based job seekers allowance"
- 4 NoBen "None of these"

INCOME

Income

SHOW CARD L

Thank you for answering the questions so far. Before we move on, please could you take a look at this card and tell me the letter of the group which represents your household's total income in the last 12 months, before any deductions for tax etc. Please include income from earnings, self-employment, benefits, pensions, and interest from savings.

INTERVIEWER: CARD SHOWS ANNUAL AMOUNTS.

THIS MEANS CATERING UNIT INCOME (NOT HOUSEHOLD INCOME).

HOUSING BENEFITS AND CHILD ALLOWANCE SHOULD BE INCLUDED.

PROBE TO MAKE SURE RESPONDENT HAS INCLUDED THIS: 'Can I just check, do you receive any housing benefits and/or child allowance?'

- 1 IncA "A - £15,000 - £19,999"
- 2 IncB "B - £30,000 - £34,999"
- 3 IncC "C - Under £5,000"
- 4 IncD "D - £45,000 - £49,999"
- 5 IncE "E - £25,000 - £29,999"
- 6 IncF "F - £5,000 - £9,999"

7	IncG	"G - £20,000 - £24,999"
8	IncH	"H - £10,000 - £14,999"
9	Incl	"I - £75,000 - £99,999"
10	IncJ	"J - £35,000 - £39,999"
11	IncK	"K - £50,000 - £74,999"
12	IncL	"L - £100,000 or more"
13	IncM	"M - £40,000 - £44,999"

MFPEnd

INTERVIEWER: End of Main Food Provider interview with (name of MFP) / on behalf of (name of MFP).

PRESS <ENTER> TO CONTINUE

1 Continue

DEMOGRAPHICS

EDUCATION – ASKED IF (Age ≥ 16) AND (WrkStat = Working OR NWork)

Educ

I'd now like to ask you a couple of questions about education and work-related training.
PRESS <ENTER> TO CONTINUE

1 Continue

EducFin

At what age did you / X finish your/his/her continuous full-time education at school or college?

INTERVIEWER: PLEASE NOTE THIS IS '**CONTINUOUS**' FULL-TIME EDUCATION. I.E. MATURE STUDENTS MAY CURRENTLY BE IN FULL-TIME EDUCATION BUT MAY HAVE FINISHED THEIR **CONTINUOUS EDUCATION** SEVERAL YEARS AGO.

- | | | |
|---|--------|------------------------|
| 1 | Notyet | "Not yet finished" |
| 2 | Never | "Never went to school" |
| 3 | und14 | "14 or under" |
| 4 | at15 | "15" |
| 5 | at16 | "16" |
| 6 | at17 | "17" |
| 7 | at18 | "18" |
| 8 | ov19 | "19 or over" |

IF (EducFin IN [Never..ov19]) THEN

QualCh

Do you have any qualifications from school, college or university, or any qualifications connected with work or from government schemes?

- 1 Yes
2 No

IF (QualCh = Yes) THEN

Qual

SHOW CARD CC - 2 PAGES

Please look at this card and tell me whether you have any of the qualifications listed. Start at the top of the list and tell me the first one you come to that you have passed.

- | | | |
|----|---------|---|
| 1 | HiDeg | "Higher degree, e.g. MSc, MA, MBA, PGCE, PhD" |
| 2 | L5NVQ | "Level 5 NVQ / SVQ" |
| 3 | BTECAPr | "BTEC Advanced Professional Diploma/Certificate" |
| 4 | Deg | "First degree, e.g. BSc, BA, BEd, MA at first degree level" |
| 5 | L4NVQ | "Level 4 NVQ / SVQ" |
| 6 | HNC | "HNC / HND" |
| 7 | BTEChi | "BTEC Higher National or Professional Diploma/Certificate" |
| 8 | RSAHi | "RSA or OCR Higher" |
| 9 | Alevel | "GCE 'A'-level" |
| 10 | A2 | "A2" |
| 11 | AVCE | "AVCE" |
| 12 | SCEAdv | "SCE Advanced Higher Grades" |
| 13 | SCEHi | "SCE Higher Grades (A-C)" |
| 14 | CSYS | "CSYS" |
| 15 | KSkL3 | "Key Skills Level 3" |
| 16 | L3NVQ | "Level 3 NVQ / SVQ" |

17	ONC	"ONC / OND"
18	BTECA	"BTEC Advanced or National Diploma/Certificate"
19	RSAAAdv	"RSA or OCR Advanced Diploma"
20	CityG3	"City & Guilds Advanced Craft / Part 3"
21	AdvGNVQ	"Advanced GNVQ; Vocational A Level"
22	AdvMAp	"Advanced Modern Apprenticeship"
23	GCSEAC	"GCSE grade A*-C"
24	Olevel	"GCE 'O'-level passes"
25	CSE1	"CSE grade 1"
26	SCEAC	"SCE O Grades (A-C)"
27	SCEStd13	"SCE Standard Grades (1-3)"
28	SchCert	"School Certificate / Matriculation"
29	KSkL2	"Key Skills Level 2"
30	BTECInt	"BTEC Intermediate or First Diploma/Certificate"
32	RSADip	"RSA Diploma"
33	CityG2	"City & Guilds Craft / Part 2"
34	IntGNVQ	"Intermediate GNVQ"
35	FounMAp	"Foundation Modern Apprenticeship"
36	GCSEdG	"GCSE grade D-G"
37	CSE25	"CSE grade 2-5"
38	SCOTVEC	"SCOTVEC National Certificate Modules"
41	KSkL1	"Key Skills Level 1"
42	L1NVQ	"Level 1 NVQ / SVQ"
43	BTECFoun	"BTEC Foundation or Introductory Diploma/Certificate"
44	RSA13	"RSA Stage 1-3"
45	CityG1	"City & Guilds Part 1"
46	FounGNVQ	"Foundation GNVQ; Foundation VCE"
47	Other	"Other qualifications"

EMPLOYMENT

IF (respondent is in employment) THEN

JobInt

You've told me that you are in work. I would like to ask you some questions about your work.

INTERVIEWER: PRESS <ENTER> TO CONTINUE

1 continue

RegCas

Can I just check, are you in a regular job or an occasional job?

- 1 RegJob "Regular job"
- 2 OccasJob "Occasional job"
- 3 Both "Both regular job AND occasional job"

IF (RegCas = RegJob OR Both) THEN

RegHrs

How many hours do you work per week in your regular job?

INTERVIEWER: RECORD TYPICAL NUMBER OF HOURS.

IF 97 HOURS OR MORE THEN ENTER 97.

Range: 0..97

IF (RegCas = RegJob OR Both) THEN

WTypHrs

Is this the typical number of hours you work?

1 Yes

2 No

IF (WTypHrs = No) THEN

NTypHrs

INTERVIEWER: RECORD TYPICAL NUMBER OF HOURS WORKED PER WEEK.

INTERVIEWER: IF 97 HOURS OR MORE THEN ENTER 97.

Range: 1..97

IF (RegCas = OccasJob OR Both) THEN

Cashrs

How many hours did you work in this occasional job in the seven days ending last Sunday?

INTERVIEWER: IF 97 HOURS OR MORE THEN ENTER 97.

Range: 1..97

IF (RegCas= OccasJob OR Both) THEN

TypCas

Is this the typical number of hours you work in your occasional job?

1 Yes

2 No

IF (Typcas = No) THEN

NCasHrs

INTERVIEWER: RECORD TYPICAL NUMBER OF HOURS WORKED PER WEEK IN
OCCASIONAL JOB(S)

IF 97 HOURS OR MORE THEN ENTER 97.

Range: 1..97

SCHOOL PROVISION

FOR 18 MONTHS-15 YEARS & 16-18 YEARS IN FULL-TIME EDUCATION

WHERE RESPONDENT 10 OR YOUNGER - ASK THROUGH GUARDIAN; WHERE RESPONDENT 11-18, ASK DIRECTLY.

IF (aged 18 months-15 years OR 16-18 in FT education) THEN

SchType

SHOW CARD FF

Please look at this card and tell me which of these best describes the school you/ (child's name) attend(s).

INTERVIEWER: IF SPECIFIC TYPE OF COLLEGE (E.G. MUSIC COLLEGE), CODE AS '5, A SIXTH FORM COLLEGE/HIGHER EDUCATION COLLEGE'.

- | | | |
|---|--------|---|
| 1 | Nurs | "a nursery school" |
| 2 | Prim | "a primary school (including infant school, junior school)" |
| 3 | Sec | "a secondary school (including sixth form in a school)/High school" |
| 4 | Mid | "a middle school" |
| 5 | SixthF | "a sixth form college/Higher Education college" |
| 6 | Other | "Other" |
| 7 | HomEd | "Home-educated" |
| 8 | NoSch | "SPONTANEOUS ONLY: Hasn't started school yet" |

IF (SchType = Nurs..Other) THEN

SchIntr

Now I would like to ask some questions about food and meals you / (child's name) may have whilst at school/college.

PRESS <ENTER> TO CONTINUE

- 1 Continue

SchProv

Does your / (child's name)'s school/college provide food?

INTERVIEWER: **INCLUDE** SANDWICHES AND SALADS.

DO NOT INCLUDE SNACKS SUCH AS CONFECTIONERY, CRISPS, FRUIT.

- 1 Yes
2 No

IF (SchProv = Yes) THEN

SchName

Please could you tell me the name and address of your / child's name school/college. We only need this information in case we need to ask them questions about how the school/college prepares food.

Please tell me the name of the school first.

INTERVIEWER: PLEASE ENTER NAME OF SCHOOL IN FULL.

: STRING [40]

SchAdd1

And what is the first line of the address?

: STRING [30]

SchAdd2

INTERVIEWER: Enter next line of address or press the <Enter> key if no more. Do not enter postcode here

: STRING [30]

SchAdd3

INTERVIEWER: Enter next line of address or press the <Enter> key if no more to enter. Do not enter postcode here.

: STRING [30]

SchAdd4

INTERVIEWER: Enter next line of address or press the <Enter> key if no more to enter. Do not enter postcode here.

: STRING [30]

SchPCode

INTERVIEWER: Enter postcode here if known. Use <CTRL K> if not known.

: STRING [8]

IF (SchProv = Yes) THEN**SchMeal**

Does the food provided include a cooked meal?

- 1 Yes
- 2 No

IF (SchMeal = Yes) THEN**SchProv2**

Do you / Does (child's name) ever have this cooked meal?

- 1 Yes
- 2 No

IF (SchType = Prim..Other) THEN**SchLun**

SHOW CARD GG

On a school/college day, what do you / does (child's name) usually have for lunch?

INTERVIEWER: CODE ONE ONLY.

INCLUDE SANDWICHES AND SALADS.

DO NOT INCLUDE SNACKS SUCH AS CONFECTIONERY, CRISPS, FRUIT.

WE ARE INTERESTED IN THE **MEAL** EATEN RATHER THAN THE TIME AT WHICH IT WAS EATEN.

- | | | |
|---|---------|---|
| 1 | HSMeal | "Cooked school meal" |
| 2 | CSMeal | "Cold school meal (including sandwiches, salads)" |
| 3 | PackedL | "Packed lunch (from home)" |
| 4 | BuyL | "Buy lunch from shop/cafe" |
| 5 | Home | "Go home" |
| 6 | NoLunch | "Do not eat lunch" |

IF (SchType = Prim..Other) THEN**SchSn**

Is there an outlet in your / (child's name)'s school where pupils can buy snacks or drinks?

INTERVIEWER: 'SNACKS' INCLUDE CONFECTIONERY, CRISPS, FRUIT.

DO NOT INCLUDE SANDWICHES, SALADS AS 'SNACKS'.

- 1 Yes
- 2 No

IF (SchSn = Yes) THEN**SchSn2**

Do you / Does (child's name) ever buy snacks or drinks from this outlet?

- 1 Yes
- 2 No

IF (SchTyp = (Prim...Other) OR (SchTyp = NoSch) THEN

SchSub

SHOW CARD HH

Do you / Does (child's name) receive any of the following?

INTERVIEWER: CODE ALL THAT APPLY.

INTERVIEWER: THE HEALTHY START PROGRAM ENTITLES ELIGIBLE HOUSEHOLDS WITH CHILDREN AGED 0-3 YEARS TO VOUCHERS THAT CAN BE EXCHANGED FOR MILK, FRESH FRUIT, FRESH VEGETABLES AND INFANT FORMULA. IN ADDITION, CHILDREN ARE ENTITLED TO FREE VITAMIN DROPS FROM 6 MONTHS OF AGE UNTIL THEIR 4th BIRTHDAY.

- | | | |
|---|----------|--|
| 1 | FreeMeal | "Free school meal (at lunchtime)" |
| 2 | RedMeal | "Reduced price or subsidised school meal (at lunchtime)" |
| 3 | FreeMilk | "Free school milk" |
| 4 | RedMilk | "Subsidised school milk" |
| 5 | FreFruit | "Free fruit" |
| 6 | PreSch | "Free food BEFORE school" |
| 7 | PostSch | "Free food AFTER school" |
| 8 | Other | "Other" |
| 9 | None | "None of these - SPONTANEOUSLY ONLY" |

IF (SchSub NOT = FreeMeal) THEN

School2

Are you / Is (child's name) entitled to free school meals at lunchtime?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (School2 = Yes) THEN

School2i

Why do you / does (child name) not take up your/his/her free school meals?

- | | | |
|---|----------|------------------------------|
| 1 | Prefhome | "Prefers to come home" |
| 2 | Nlike | "Doesn't like school meals" |
| 3 | PackedL | "Prefers packed lunch" |
| 4 | Diet | "Dietary reasons" |
| 5 | Cultural | "Cultural/religious reasons" |
| 6 | PeerP | "Peer pressure/stigma" |
| 7 | Other | "Other" |

IF (SchSub = FreeMeal) THEN

SchOf

On average, how many times per week do you/ does (child's name) have free school meals at lunchtime?

Range: 1..5

IF (SchOf = 1- 5) THEN

SchOf2

Why do you/ does (child's name) not take up all your/his/her free school meals at lunchtime?

INTERVIEWER: CODE MAIN REASON.

- | | | |
|---|----------|------------------------------|
| 1 | Prefhome | "Prefers to come home" |
| 2 | Nlike | "Doesn't like school meals" |
| 3 | PackedL | "Prefers packed lunch" |
| 4 | Diet | "Dietary reasons" |
| 5 | Cultural | "Cultural/religious reasons" |
| 6 | PeerP | "Peer pressure/stigma" |
| 7 | Other | "Other" |

IF (SchSub = PreSch) THEN

PrScOf

On average, how many times per week do you/ does (child's name) have free food before school?

Range: 1..5

IF (SchSub = PostSch) THEN

PoScOf

On average, how many times per week do you/ does (child's name) have free food after school?

Range: 1..5

EATING OUT AND OTHER PROVISION

IF (Age = 65+) THEN

HeClub

Have you ever used the following services ...

INTERVIEWER: READ OUT AND CODE ALL THAT APPLY...

- | | | |
|---|-------|--------------------|
| 1 | LClub | "Lunch club?" |
| 2 | DCare | "Day care centre?" |
| 3 | MoW | "Meals on wheels?" |
| 4 | None | "None of these?" |

IF (Age = 65+ AND HeClub = LClub) THEN

HeLC

SHOW CARD M

How often do you attend a lunch club?

- | | | |
|---|-------|--|
| 1 | Every | "Every day or nearly every day" |
| 2 | TwoW | "Two or three times a week" |
| 3 | OnceW | "Once a week" |
| 4 | TwoM | "Two or three times a month" |
| 5 | OnceM | "Once a month or less" |
| 6 | Never | "(Do not currently use - SPONTANEOUS CODE ONLY)" |

IF (Age = 65+ AND HeClub = DCare) THEN

HeDCC

SHOW CARD M

How often do you attend a day care centre?

- | | | |
|---|-------|--|
| 1 | Every | "Every day or nearly every day" |
| 2 | TwoW | "Two or three times a week" |
| 3 | OnceW | "Once a week" |
| 4 | TwoM | "Two or three times a month" |
| 5 | OnceM | "Once a month or less" |
| 6 | Never | "(Do not currently use - SPONTANEOUS CODE ONLY)" |

IF (Age = 65+ AND HeClub = MoW) THEN

HeMW

SHOW CARD M

How often do you eat a meal provided by Meals on Wheels?

- | | | |
|---|-------|--|
| 1 | Every | "Every day or nearly every day" |
| 2 | TwoW | "Two or three times a week" |
| 3 | OnceW | "Once a week" |
| 4 | TwoM | "Two or three times a month" |
| 5 | OnceM | "Once a month or less" |
| 6 | Never | "(Do not currently use - SPONTANEOUS CODE ONLY)" |

IF (HeMW = Every) THEN

MWHow

How do you receive your meals on wheels?

- | | | |
|---|--------|--|
| 1 | Hot | "As a hot meal delivered on the day" |
| 2 | Frozen | "As frozen meals delivered weekly / fortnightly" |

ASK ALL**MealOut**

SHOW CARD N

On average, how often do you / does (child's name) eat meals out in a restaurant or cafe?

INTERVIEWER: 'MEALS' MEANS MORE THAN A BEVERAGE OR BAG OF CHIPS.

- | | | |
|---|---------|----------------------------|
| 1 | Five | "5 or more times per week" |
| 2 | ThrFour | "3-4 times per week" |
| 3 | OneTwoW | "1-2 times per week" |
| 4 | OneTwoM | "1-2 times per month" |
| 5 | Rarely | "Rarely or never?" |

TAMeal

SHOW CARD N

On average, how often do you / does (child's name) eat takeaway meals at home?

INTERVIEWER: 'MEALS' MEANS MORE THAN A BEVERAGE OR BAG OF CHIPS.

INCLUDE PIZZA, FISH AND CHIPS, INDIAN, CHINESE, BURGERS, KEBAB ETC.

INTERVIEWER: THIS QUESTION IS ABOUT TAKE AWAY MEALS IN THE RESPONDENT'S HOME ONLY.

- | | | |
|---|---------|----------------------------|
| 1 | Five | "5 or more times per week" |
| 2 | ThrFour | "3-4 times per week" |
| 3 | OneTwoW | "1-2 times per week" |
| 4 | OneTwoM | "1-2 times per month" |
| 5 | Rarely | "Rarely or never?" |

FOLLOWING QUESTIONS ARE ASKED OF ALL RESPONDENTS AGED 16+ AND IN EMPLOYMENT - (WrkStat = Working) OR (PTWork = Yes)**IF (respondent is aged 16+ AND (WrkStat = Working) OR (PTWork = Yes)) THEN Canteen**

Does your place of work have a staff canteen?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (Canteen = Yes) THEN**CantSub**

Do you know if the canteen food is subsidised in any way? By subsidised I mean that your employer meets some of the cost of providing the food.

- | | | |
|---|--------|--------------------------|
| 1 | Sub | "Yes it is subsidised" |
| 2 | NotSub | "No it isn't subsidised" |
| 3 | DKnow | "Don't Know" |

IF (Age ≥ 16) AND (WrkStat = Working) OR (PTWork = Yes) THEN**LunchWk**

What do you usually do about meals (e.g. lunch) when you are at work?

INTERVIEWER: INCLUDE HOT MEALS, SANDWICHES AND SALADS.

DO NOT INCLUDE SNACKS SUCH AS CONFECTIONERY, CRISPS, FRUIT.

INTERVIEWER: THIS QUESTION IS STILL RELEVANT EVEN IF RESPONDENT WORKS NIGHT SHIFTS. WE WANT TO KNOW ABOUT ANYTHING THEY EAT, REGARDLESS OF WHETHER IT IS BREAKFAST, LUNCH OR DINNER.

- | | | |
|---|----------|-----------------------------------|
| 1 | Canteen | "Eat at the staff canteen" |
| 2 | PackedL | "Take a packed lunch (from home)" |
| 3 | ShopCafe | "Buy lunch from shop / cafe" |
| 4 | Other | "Other" |
| 5 | NoLunch | "Do not have lunch" |

EATING HABITS

ASK ALL (WHERE RESPONDENT 10 OR YOUNGER ASK THROUGH PARENT / GUARDIAN)

YrIntr

The next few questions are about your / (child's name)'s eating habits over the last year
PRESS <ENTER> TO CONTINUE

1 Continue

ASK ALL

OilFish

SHOW CARD O

Other than tinned tuna, in the last 12 months how often have you/ has (child's name) eaten **tinned oily fish**, such as salmon, sardines, mackerel, kippers, herrings, pilchards, anchovies? Please **do not** include tinned tuna.

INTERVIEWER: TINNED TUNA DOES NOT COUNT AS OILY FISH BECAUSE THE CANNING PROCESS REDUCES THE OMEGA-3 FATTY ACID CONTENT.

- | | | |
|---|--------|-------------------------------|
| 1 | Never | "Never" |
| 2 | OneMth | "Less than once per month" |
| 3 | OneDM | "On 1-3 days per month" |
| 4 | OneDW | "On 1-2 days per week" |
| 5 | ThrDW | "On 3-4 days per week" |
| 6 | FivDW | "On 5-6 days per week" |
| 7 | Daily | "Every day in the last month" |

ASK ALL

FrOFsh

SHOW CARD O

In the last 12 months how often have you/ has (child's name) **eaten fresh or frozen Oily fish** (e.g. salmon, sardines, mackerel, kippers, anchovies, pilchards, trout or tuna)?

- | | | |
|---|--------|-------------------------------|
| 1 | Never | "Never" |
| 2 | OneMth | "Less than once per month" |
| 3 | OneDM | "On 1-3 days per month" |
| 4 | OneDW | "On 1-2 days per week" |
| 5 | ThrDW | "On 3-4 days per week" |
| 6 | FivDW | "On 5-6 days per week" |
| 7 | Daily | "Every day in the last month" |

ASK ALL

ShFish

SHOW CARD O

In the last 12 months how often have you/ has (child's name) eaten **Shellfish** (e.g. prawns, shrimps, crab)?

- | | | |
|---|--------|-------------------------------|
| 1 | Never | "Never" |
| 2 | OneMth | "Less than once per month" |
| 3 | OneDM | "On 1-3 days per month" |
| 4 | OneDW | "On 1-2 days per week" |
| 5 | ThrDW | "On 3-4 days per week" |
| 6 | FivDW | "On 5-6 days per week" |
| 7 | Daily | "Every day in the last month" |

ASK ALL**Offal**

SHOW CARD O

In the last 12 months how often have you/ has (child's name) eaten **Offal (e.g. liver, kidney)**?

INTERVIEWER: INCLUDE FAGGOTS, STEAK AND KIDNEY PIE AND OTHER DISHES CONTAINING OFFAL.

- | | | |
|---|--------|-------------------------------|
| 1 | Never | "Never" |
| 2 | OneMth | "Less than once per month" |
| 3 | OneDM | "On 1-3 days per month" |
| 4 | OneDW | "On 1-2 days per week" |
| 5 | ThrDW | "On 3-4 days per week" |
| 6 | FivDW | "On 5-6 days per week" |
| 7 | Daily | "Every day in the last month" |

ASK ALL**RarEatX**

SHOW CARD P

In the last 12 months have you/ has (child's name) eaten any of the foods on this card?

INTERVIEWER: DO NOT INCLUDE NUTS IN CODE 2 (SEEDS).

- | | | |
|----|----------|---|
| 0 | None | "None of these" |
| 1 | Sprats | "Sprats" |
| 2 | Seeds | "Seeds as a snack (e.g. sunflower seeds, pumpkin seeds, sesame seeds, melon seeds (also known as egusi))" |
| 3 | Cassava | "Cassava chips/cassavacrisps" |
| 4 | Seaweed | "Seaweed (includes hijiki, wakame)" |
| 5 | Sushi | "Sushi (including purchased sushi)" |
| 6 | FrPap | "Papaya (include fresh and canned)" |
| 7 | DrPap | "Dried papaya" |
| 8 | Game | "Game (includes venison, rabbit, pheasant, partridge, wood pigeon, hare or wild boar)" |
| 9 | NCowMilk | "Non cow's milk (includes rice milk, soya milk, sheep's milk or goat's milk)" |
| 10 | FishEggs | "Fish eggs, for example caviar, cod's roe" |
| 11 | SmkSaus | "Smoked sausages" |
| 12 | GojiBer | "Goji berries" |
| 13 | FishLiv | "Fish liver (not oil)" |
| 14 | DarkChoc | "Dark chocolate, i.e. 50% or higher cocoa solids" |
| 15 | Okra | "Okra" |

(Ask for each response at RareEat)

RarOf

SHOW CARD Q

How often have you / has (child's name) eaten (food from RarEat)?

- | | | |
|---|--------|------------------------------|
| 1 | OneMth | "Less than once per month" |
| 2 | OneDM | "On 1-3 days per month" |
| 3 | OneDW | "On 1-2 days per week" |
| 4 | ThrDW | "On 3 or more days per week" |

IF (RarEatX = Game) THEN

GameTyp

SHOW CARD R

Please look at this card and tell me which types of game you have / (child's name) has eaten.

INTERVIEWER: CODE ALL THAT APPLY.

1	Pheasant	"Pheasant"
2	Partridg	"Partridge"
3	Quail	"Quail"
4	WdPigeon	"Wood pigeon"
5	Rabbit	"Rabbit"
6	Venison	"Venison"
7	Hare	"Hare"
8	Grouse	"Grouse"
9	Other	"Other, please specify at next question"

IF (GameTyp = Other) THEN

GameOth

INTERVIEWER: PLEASE ASK OR RECORD OTHER TYPE OF GAME EATEN.

: STRING [50]

IF (RarEatX = NCowMilk) THEN

NCowMTyp

SHOW CARD S

Please look at this card and tell me which types of non-cow's milk you have / (child's name) has eaten or drunk.

INTERVIEWER: CODE ALL THAT APPLY.

1	RiceMilk	"Rice milk"
2	SoyaMilk	"Soya milk"
3	SheepMlk	"Sheep's milk"
4	GoatMilk	"Goat's milk"
5	Other	"Other, please specify at next question"

IF (NCowMTyp = Other) THEN

NCowMOth

INTERVIEWER: PLEASE ASK OR RECORD OTHER TYPE OF NON-COW'S MILK CONSUMED.

: STRING [50]

IF (RarEatX = SmkSaus) THEN

SausTyp

SHOW CARD T

Please look at this card and tell me which types of smoked sausages you have / (child's name) has eaten.

INTERVIEWER: CODE ALL THAT APPLY.

1	Kabanos	"Kabanos"
2	Kielbasa	"Kielbasa"
3	BratWurst	"Bratwurst"
4	SummSaus	"Cervelat or Summer Sausage"
5	Andouil	"Andouille"
6	KnkWurst	"Knackwurst"
7	Linguica	"Linguica"
8	Chorizo	"Chorizo"
9	Mrtadella	"Mortadella"
10	HotDog	"Hot Dogs"
11	Bologna	"Bologna"
12	Other	"Other, please specify at next question"

IF (SausTyp = Other) THEN

SausOth

INTERVIEWER: PLEASE ASK OR RECORD OTHER TYPE OF SMOKED SAUSAGE
EATEN.

: STRING [50]

FOOD AVOIDANCE

ASK ALL

WashIntr

The next few questions are about fruit and vegetables. We are interested in whether you / (child's name) eat(s) them with the skins left on.

PRESS <ENTER> TO CONTINUE

1 Continue

AvIntr

INTERVIEWER: QUESTIONS ABOUT **FOOD ALLERGIES/AVOIDANCES**

PRESS <ENTER> TO CONTINUE

1 Continue

ASK ALL (WHERE RESPONDENT 10 OR YOUNGER ASK THROUGH PARENT / GUARDIAN)

Appet

How would you describe your/ (child's name) appetite? Do you /Does he or she have ...

INTERVIEWER: RUNNING PROMPT ...

- | | | |
|---|---------|---|
| 1 | Good | "... a good appetite" |
| 2 | Average | "... an average appetite or " |
| 3 | Poor | "... a poor appetite for someone of your/ his/her age?" |

ASK ALL

AvoidYN

Are there any types of foods that you/ (child's name) never eat(s)?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (AvoidYN = Yes) THEN

Avoid

SHOW CARD U

Can you tell me what types of foods you/ (child's name) never eat(s)?

INTERVIEWER: CODE ALL THAT APPLY

- | | | |
|----|---------|---|
| 1 | Meat | "Meat or meat products (not including poultry)" |
| 2 | Poultry | "Chicken or other poultry and dishes containing them" |
| 3 | Fish | "Fish or seafood and fish and seafood dishes" |
| 4 | Eggs | "Eggs" |
| 5 | Milk | "Milk (including yoghurt)" |
| 6 | Cheese | "Cheese" |
| 7 | Salad | "Salad vegetables (e.g. lettuce, cucumber, tomato)" |
| 9 | Green | "Cooked green vegetables (e.g. spinach, cabbage, peas, broccoli)" |
| 10 | RootV | "Root vegetables (e.g. carrots, parsnips)" |
| 11 | Fruit | "Fresh fruit" |
| 12 | Nuts | "Nuts" |
| 13 | Offal | "Offal" |
| 14 | Other | "Other" |

IF (P2Age ≥ 10) THEN

DietWL

Are you / Is (child's name) **currently** dieting to lose weight?

- | | |
|---|-----|
| 1 | Yes |
|---|-----|

2 No

ASK ALL

Diet

Are you / Is (child's name) on any special diet at the moment?

INTERVIEWER: A 'SPECIAL' DIET IS WHATEVER THE RESPONDENT CONSIDERS A SPECIAL DIET TO BE.

1 Yes

2 No

IF (Diet = Yes) THEN

DietT

What type of diet are you / is (child's name) on?

INTERVIEWER: DO NOT PROMPT.

CODE ALL THAT APPLY.

- | | | |
|---|---------|-----------------------------------|
| 1 | Diab | "Diabetic diet" |
| 2 | Loss | "Weight reducing diet" |
| 3 | Gain | "Weight gaining diet" |
| 4 | LowFt | "Low fat diet" |
| 5 | CholLow | "Cholesterol lowering diet" |
| 6 | LowAll | "Low allergy diet, Additive free" |
| 7 | OthMed | "Other medical diet" |
| 8 | Kosher | "Kosher or halal diet" |
| 9 | Other | "Other" |

IF (Diet = Yes) THEN

DrDiet

Was this diet recommended or prescribed to you/ (child's names) by a doctor, nurse, dietician or other medical practitioner?

INTERVIEWER: IF ANY PART OF DIET PRESCRIBED, CODE YES.

1 Yes

2 No

IF (Diet = Yes) THEN

DietEase

Do you/ does (child's name) find this diet easy to follow?

INTERVIEWER: MEANS THE WHOLE REGIMEN, EVEN IF YOU HAVE CODED MORE THAN ONE TYPE OF DIET.

1 Yes

2 No

IF (DietEase = No) THEN

DietHow

Why do you/ does (child's name) not find the diet easy to follow?

: STRING [30]

ASK ALL

Veg

Can I just check, would you describe yourself / (child's name) as vegetarian or vegan?

1 Veggie "Vegetarian"

2 Vegan "Vegan"

3 Neither "Neither"

IF (Veg = Veggie) THEN

VegeChk

Can I just check, do you / does (child's name) eat any meat, fish, poultry or dishes that contain these?

- 1 Yes
- 2 No

IF (Veg = Vegan) THEN

VeganChk

Can I just check, do you / does (child's name) eat any foods of animal origin. That is meat, fish, poultry, milk, milk products, eggs or any dishes that contain these?

- 1 Yes
- 2 No

IF (Resp aged < 16) THEN

Fuss

How would you describe the variety of foods that you / (child's name) generally eat(s)?

Do you/ Does he or she ...RUNNING PROMPT...

- 1 Most "... eat most things,"
- 2 Reason "... eat a reasonable variety of things"
- 3 Limit "... or, do you/does (Child's name) only eat a limited number of different foods?"

ASK ALL

WashIntr

The next few questions are about fruit and vegetables. We are interested in whether you / (child's name) eat(s) them with the skins left on.

PRESS <ENTER> TO CONTINUE

- 1 continue

ASK ALL

WshNPot

Firstly, do you / does (child's name) eat **new potatoes** with the skins on?

INTERVIEWER: IF 'YES' PROMPT WHETHER ALWAYS, USUALLY OR SOMETIMES.

- 1 Always "Yes, ALWAYS eat the skin/peel"
- 2 Usual "Yes, USUALLY eat the skin/peel"
- 3 STimes "Yes, SOMETIMES eat the skin/peel"
- 4 Never "No, NEVER eat the skin/peel"
- 5 NoEat "Don't eat this type of fruit/veg at all"

ASK ALL

WshPot

And do you / does (child's name) eat **other potatoes** cooked in any way with the skins on?

INTERVIEWER: IF 'YES' PROMPT WHETHER ALWAYS, USUALLY OR SOMETIMES.

- 1 Always "Yes, ALWAYS eat the skin/peel"
- 2 Usual "Yes, USUALLY eat the skin/peel"
- 3 STimes "Yes, SOMETIMES eat the skin/peel"
- 4 Never "No, NEVER eat the skin/peel"
- 5 NoEat "Don't eat this type of fruit/veg at all"

ASK ALL

EatPeel

SHOW CARD V

Do you / does (child's name) eat the peel or skin of any of the fruits listed on this card in...

INTERVIEWER: CODE ALL THAT APPLY

- | | | |
|---|-------|--|
| 1 | Marm | "... marmalade, jams or chutneys?" |
| 2 | Cake | "... cakes, biscuits etc?" |
| 3 | HMade | "... home made food/drink e.g. purees, soups, blended drinks etc?" |
| 4 | None | "SPONTANEOUS ONLY - None of these" |

ASK ALL

Peel

SHOW CARD V

Do you / does (child's name) ever eat the peel or skin (outer layer) of the following fruits?

INTERVIEWER: **INCLUDES** EATING THE WHOLE FRUIT INCLUDING THE PEEL OR BLENDING THE PEEL/SKIN TO MAKE A SMOOTHIE. **EXCLUDES** EATING PEEL/SKIN IN FRUIT CAKES, MARMALADE, CHUTNEYS ETC.

- | | | |
|----|---------|--|
| 0 | None | "None of these" |
| 1 | Orange | "Orange" |
| 2 | Lemon | "Lemon" |
| 3 | Kiwi | "Kiwi fruit" |
| 4 | Grapef | "Grapefruit" |
| 5 | Mango | "Mango" |
| 6 | Banana | "Banana" |
| 7 | Lime | "Lime" |
| 8 | Papple | "Pineapple" |
| 9 | SoftCit | "Soft citrus fruit (satsumas/mandarins/clementines)" |
| 10 | Melon | "Melon" |

(Asked for each response at Peel)

PeelOf

SHOW CARD W

How often do you / does (child's name) eat(s) the peel or skin of (fruit from Peel)?

- | | | |
|---|--------|--------------------------|
| 1 | Daily | "Every day/most days" |
| 2 | Week1 | "Once or twice a week" |
| 3 | Month1 | "Once or twice a month" |
| 4 | Less | "Less than once a month" |

(Asked for each response at Peel)

PeelAmt

SHOW CARD X

When you / (child's name) eat(s) the peel or skin of (fruit from Peel), how much of it do you / does (child's name) usually eat?

- | | | |
|---|-------|---|
| 1 | All | "All of the peel or skin" |
| 2 | Most | "Most of the peel or skin" |
| 3 | Half | "Around half of the peel or skin" |
| 4 | Quart | "Around a quarter of the peel or skin" |
| 5 | Less | "Less than a quarter of the peel or skin" |

ASK ALL

WashFru

If you / (child's name) eat(s) your/his/her fruit with the skin or peel on do you / does he or she wash it before eating/cooking?

- | | | |
|---|--------|---------------------------------|
| 1 | Always | "Yes, ALWAYS wash" |
| 2 | Usual | "Yes, USUALLY wash" |
| 3 | STimes | "Yes, SOMETIMES wash" |
| 4 | Never | "No, NEVER washes" |
| 5 | NoEat | "Does not eat with peel on/raw" |

WashVeg

If you/ (child's name) eat(s) raw vegetables (e.g. tomatoes, carrots, cucumbers), do you /does he or she wash them before eating?

- | | | |
|---|--------|---------------------------------|
| 1 | Always | "Yes, ALWAYS wash" |
| 2 | Usual | "Yes, USUALLY wash" |
| 3 | STimes | "Yes, SOMETIMES wash" |
| 4 | Never | "No, NEVER washes" |
| 5 | NoEat | "Does not eat with peel on/raw" |

GENERAL HEALTH

FOR RESPONDENTS AGED 18 MONTHS-15 YEARS & 16-18 YEARS IN FULL-TIME EDUCATION

ASK ALL

HealIntr

I'd now like to ask you some questions about your (child's) general health.

PRESS <ENTER> TO CONTINUE

1 Continue

GenHelf

How is your (child's) health in general?

Would you say it was ...READ OUT...

- | | | |
|---|---------|-----------------|
| 1 | Vergood | "...very good," |
| 2 | Good | "good," |
| 3 | Fair | "fair," |
| 4 | Bad | "bad, or" |
| 5 | Verbad | "very bad?" |

Heal

Do you / Does (child's name) have any long-standing illness, disability or infirmity? By long-standing I mean anything that has troubled you/him/her over a period of time, or that is likely to affect you/him/her over a period of time?

- 1 Yes
2 No

IF (Heal = Yes) THEN

HealT

What is the matter with you/ (child's name)?

: STRING [80]

IF (Heal = Yes) THEN

Limit

Does this illness or disability (Do these illnesses or disabilities) limit your / (child's name) activities in any way?

- 1 Yes
2 No

IF (Limit = Yes) AND (Age ≥ 16) THEN

LimitShp

Does this illness or disability (Do these illnesses or disabilities) limit you or prevent you from shopping?

- | | | |
|---|----------|--|
| 1 | Limits | "Limits" |
| 2 | Prevents | "Prevents" |
| 3 | Neither | "Illness does not limit/prevent from shopping" |

IF (LimitShp = Limits OR Prevents) AND (Age ≥ 16) THEN

LShpHow

Can you tell me how you are limited/prevented from shopping?

INTERVIEWER: CODE ALL THAT APPLY

- | | | |
|---|----------|-----------------------------|
| 1 | DiffWalk | "Difficulties with walking" |
| 2 | Sight | "Problems with sight" |

- | | | |
|---|--------|---------------------------------|
| 3 | Ncarry | "Cannot carry (heavy) shopping" |
| 4 | Tire | "Gets tired easily" |
| 5 | Other | "Other difficulties" |

IF (Limit = Yes) AND (Age ≥ 16) THEN

LimiPrep

Does this illness or disability (Do these illnesses or disabilities) limit you or prevent you from preparing food?

- | | | |
|---|----------|--|
| 1 | Limits | "Limits" |
| 2 | Prevents | "Prevents" |
| 3 | Neither | "Illness does not limit/prevent from preparing food" |

IF (LimiPrep = Limits OR Prevents) AND (Age ≥ 16) THEN

LPrepHow

Can you tell me how you are limited/prevented from preparing food?

INTERVIEWER: CODE ALL THAT APPLY

- | | | |
|---|----------|---|
| 1 | DiffHand | "Difficulties with hands (e.g. chopping, peeling, lifting)" |
| 2 | DiffWalk | "Difficulties with walking" |
| 3 | DifStand | "Difficulties with standing" |
| 4 | Sight | "Problems with sight" |
| 5 | IllHlth | "Chronic ill-health (e.g. MS, depression)" |
| 6 | Tire | "Gets tired easily" |
| 7 | Other | "Other difficulties" |

ASK ALL

CutDown

Now I'd like you to think about the two weeks ending yesterday.

During those two weeks, did you / (child's name) have to cut down on any of the things you/he/she usually do/does about the house, (or at work/college) or in your/his/her free time because of (a condition you have just told me about or any other) illness or injury?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (CutDown = Yes) THEN

NDayCutD

How many days was this in all during these last two weeks, including Saturdays and Sundays?

Range: 1..14

IF (CutDown = Yes) THEN

CutMatt

What was the matter with you / (child's name)?

: STRING [80]

ORAL HEALTH

FOR RESPONDENTS AGED 16 AND OVER

IF (Age ≥ 16) THEN

OralIntr

INTERVIEWER: YOU ARE ABOUT TO ENTER THE ORAL/DENTAL HEALTH SECTION.
The next questions are about your oral and dental health.

PRESS <ENTER> TO CONTINUE

1 Continue

AnyOwn

INTERVIEWER: ASK OR RECORD

Do you have any of your own, natural, teeth?

1 Yes

2 No

DentUse

Do you use a denture at all?

1 Yes

2 No

Chew

SHOW CARD Y

In general, how well are you able to CHEW food that you eat nowadays?

Please take your answer from the card.

1 NoDiff "No difficulty"

2 LitDiff "A little difficulty"

3 FairDiff "A fair amount of difficulty"

4 GreDiff "A great amount of difficulty"

IF (Age ≥ 45 OR wears dentures) THEN

CardL

SHOW CARD Z

Now I will read out a list of food items. Please tell me how well you could eat each one,
taking your answer from the card.

It doesn't matter whether or not you like the types of food or ever choose to eat it nowadays.

We are interested in how well you could eat it if you wanted to.

INTERVIEWER: 'EAT' MEANS BITE, CHEW AND SWALLOW.

THIS IS **NOT** ASKING HOW WELL PEOPLE CAN DIGEST THESE FOODS.

PRESS <ENTER> TO CONTINUE

1 Continue

SliceB

SHOW CARD Z

How well could you eat **sliced bread**?

1 EatEas "Could eat easily"

2 EatDif "Could eat with some difficulty"

3 NotEat "Could not eat at all"

CrustyB

SHOW CARD Z

(And how well could you eat) ...**crusty bread**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Cheese

SHOW CARD Z

(And how well could you eat) ...**cheese**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Tomat

SHOW CARD Z

(And how well could you eat) ...**tomatoes**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Carrot

SHOW CARD Z

(And how well could you eat) ...**raw carrots**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Greens

SHOW CARD Z

(And how well could you eat) ...**cooked green vegetables**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Lettuce

SHOW CARD Z

(And how well could you eat) ...**lettuce**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Meats

SHOW CARD Z

(And how well could you eat) ...**sliced cooked meats**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Steak

SHOW CARD Z

(And how well could you eat) ...**well-done steaks**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Apples

SHOW CARD Z

(And how well could you eat) ...**apples**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Orange

SHOW CARD Z

(And how well could you eat) ...**oranges**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

Nuts

SHOW CARD Z

(And how well could you eat) ...**nuts**?

- | | | |
|---|--------|----------------------------------|
| 1 | EatEas | "Could eat easily" |
| 2 | EatDif | "Could eat with some difficulty" |
| 3 | NotEat | "Could not eat at all" |

IF (Age ≥ 45 OR wears dentures) AND (ANY OF (SliceB..Nuts = NotEat)) THEN Eatfod

Can you only eat soft or mashed foods or can you eat other foods as well?

- | | | |
|---|--------|--|
| 1 | Soft | "Only soft or mashed foods" |
| 2 | Other | "Other foods as well" |
| 3 | Liquid | "Can only take liquids/cannot eat even soft or mashed foods" |

SELF-COMPLETIONS

FOR RESPONDENTS AGED 8-24

IF (Age = 18-24) THEN

DrinIntr

INTERVIEWER: SMOKING AND DRINKING SELF-COMPLETION BOOKLET.

The next set of questions are about smoking cigarettes and drinking alcohol. We can either continue using the laptop to answer the questions, or you can fill in your answers in this booklet. Which would you prefer to do?

IS THE YOUNG PERSON TO CONTINUE WITH QUESTIONS IN CAPI OR ARE THEY TO BE GIVEN A BOOKLET (PEACH COVER)?

- | | | |
|---|-------|-----------------------------------|
| 1 | Asked | "Continue with questions in CAPI" |
| 2 | Given | "Given self completion booklet" |

IF (Age = 11-24) THEN

SCIntro

INTERVIEWER: Prepare self completion booklet for ages (8-12: GREEN cover) / (13-15: PALE BLUE cover) / (16-24: PEACH cover) by entering serial numbers.

Check that you have the correct person number.

Name.....Point..Address..Check letter..Person number

- 1 Continue

IF (Age = 8-10) THEN

SCIntCh

Here is a little booklet which I would like to ask (child's name) to complete for him/herself. It asks children if they have ever tried cigarettes or alcohol. May I explain it to you/him/her?

INTERVIEWER: If asked, show **green** booklet to (Respondent's name).

If agrees, prepare green booklet.

Name.....Point..Address..Check letter..Person number

INTERVIEWER: Explain to child how to complete and show example in booklet.

- 1 Continue

SComp2

I would now like you to answer some questions by completing this booklet on your own. The questions cover smoking and drinking.

INTERVIEWER: Explain how to complete booklet and show example in booklet.

- 1 Continue

IntDemog

INTERVIEWER: Wait until (respondent's name) has completed the self-completion booklet, then thank them for completing it and ask them to return it to you.

Press <1> and <Enter> to continue.

SMOKING

FOR RESPONDENTS AGED 18 AND OVER

IF (no self completion AND Age = 16-24) OR (Age ≥ 25) THEN

SmokIntr

INTERVIEWER: YOU ARE ENTERING THE SMOKING SECTION

This next section is about smoking.

1 Continue

SmokEver

Have you ever smoked a cigarette, cigar, pipe or anything with tobacco in it?

1 Yes

2 No

IF (SmokEver = Yes) THEN

CigEver

Have you ever smoked a cigarette?

1 Yes

2 No

IF (CigEver = Yes) THEN

CigAge

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

Range: 3..97

SmokNow

Do you smoke cigarettes at all nowadays?

1 Yes

2 No

IF (SmokNow = Yes) THEN

CigWDay

About how many cigarettes **a day** do you usually smoke on a weekday?

INTERVIEWER: IF LESS THAN ONE A DAY, CODE 0.

IF RANGE GIVEN AND CAN'T ESTIMATE, ENTER MID POINT.

IF RESPONDENT SMOKES ROLL UPS AND CANNOT GIVE NUMBER OF CIGARETTES, CODE 97.

Range: 0..97

CigWEnd

About how many cigarettes **a day** do you usually smoke at the weekend?

INTERVIEWER: IF LESS THAN ONE A DAY, CODE 0.

IF RANGE GIVEN AND CAN'T ESTIMATE, ENTER MID POINT.

IF RESPONDENT SMOKES ROLL UPS AND CANNOT GIVE NUMBER OF CIGARETTES, CODE 97.

Range: 0..97

CigType

Do you mainly smoke filter-tipped cigarettes, plain or untipped cigarettes, or hand-rolled cigarettes?

1 Tipped "Filter-tipped cigarettes"

2 Plain "Plain or untipped cigarettes"

3 Rolled "Hand-rolled cigarettes"

IF (SmokNow = No) THEN

CigReg

Have you ever smoked cigarettes regularly?

INTERVIEWER: ...READ OUT...

- | | | |
|---|-------|--|
| 1 | Reg | "Yes, regularly, that is at least one cigarette a day" |
| 2 | Occ | "No, only occasionally" |
| 3 | Never | "Or no, never really smoked cigarettes, just tried them once or twice" |

IF (CigReg = Reg) THEN

CigUsed

About how many cigarettes did you smoke IN A DAY when you smoked them regularly?

INTERVIEWER: IF LESS THAN ONE A DAY, CODE 0.

IF RANGE GIVEN AND CAN'T ESTIMATE, ENTER MID POINT.

IF RESPONDENT SMOKES ROLL UPS AND CANNOT GIVE NUMBER OF CIGARETTES,
CODE 97.

Range: 0..97

CigStop

How long ago did you stop smoking cigarettes regularly?

- | | | |
|---|---------|--------------------------|
| 1 | LessSix | "Less than 6 months ago" |
| 2 | SixMth | "6 months to 1 year ago" |
| 3 | OneTwo | "1 to 2 years ago" |
| 4 | TwoFve | "2 to 5 years ago" |
| 5 | FivTen | "5 to 10 years ago" |
| 6 | MoreTen | "More than 10 years ago" |

DRINKING

FOR RESPONDENTS AGED 18 AND OVER

IF (no self completion AND Age = 16-24) OR (Age ≥ 25) THEN

Drink

I am now going to ask you a few questions about what you drink - that is if you drink.
Do you ever drink alcohol nowadays, including drinks you brew or make at home?

- 1 Yes
- 2 No

IF (Drink = No) THEN

DrinkAny

Could I just check, does that mean you never have an alcoholic drink nowadays, or do you have an alcoholic drink very occasionally, perhaps for medicinal purposes or on special occasions like Christmas and New Year?

- 1 Occ "Very occasionally"
- 2 Never "Never"

IF (DrinkAny = Never) THEN

AlwaysTT

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

- 1 Always "Always a non-drinker"
- 2 Stopped "Used to drink but stopped"

IF (Drink = Yes) OR (DrinkAny = Occ) THEN

DrinAge

How old were you the first time you ever had a proper alcoholic drink?

Range: 3..97

DrinkOft

SHOW CARD AA

Thinking now about all kinds of drinks, how often have you had an alcoholic drink of any kind during the last 12 months?

- 1 AED "Almost every day"
- 2 Five "Five or six days a week"
- 3 Three "Three or four days a week"
- 4 OneWk "Once or twice a week"
- 5 OneMth "Once or twice a month"
- 6 CupMth "Once every couple of months"
- 7 OneYr "Once or twice a year"
- 8 NotYr "Not at all in the last 12 months"

IF (DrinkOft <> NotYr) THEN

DrinkL7

Did you have an alcoholic drink in the last seven days, that is since (date 7 days ago) until 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?

- | | | |
|---|--------|---|
| 1 | Varied | "Drank more on one/some day(s) than other(s)" |
| 2 | Same | "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 |
| 3 | Tuesday |
| 4 | Wednesday |
| 5 | Thursday |
| 6 | Friday |
| 7 | Saturday |

DrnkType

SHOW CARD BB

Thinking about last (day from WhichDay), what types of drink did you have that day?

CODE ALL THAT APPLY.

- | | | |
|---|---------|---|
| 1 | NBeer | "Normal strength beer/lager/cider/shandy" |
| 2 | SBeer | "Strong beer/lager/cider" |
| 3 | Spirits | "Spirits or liqueurs" |
| 4 | Sherry | "Sherry or martini" |
| 5 | Wine | "Wine" |
| 6 | Pops | "Alcopops/pre-mixed alcoholic drink" |
| 7 | Other | "Other alcoholic drinks" |
| 8 | Low | "Low alcohol drinks only" |

NBrL7

Still thinking about last (day from 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 | HPints | "Half pints" |
| 2 | SmCans | "Small cans" |
| 3 | LgCans | "Large cans" |
| 4 | Bottles | "Bottles" |

IF (NBRL7 = HPints) THEN

NBrL7Q(1)

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 = SmCans) THEN

NBrL7Q(2)

ASK OR CODE: How many small cans 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 = LgCans) THEN

NBrL7Q(3)

ASK OR CODE: How many large cans 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 = Bottles) THEN

NBrL7Q(4)

ASK OR CODE: How many bottles 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 = Bottles) THEN

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.

: STRING [21]

IF (Drnktype = SBeer) THEN

SBrL7

Still thinking about last (day from WhichDay), how much **strong beer, lager, stout or cider** did you drink that day?

INTERVIEWER: Code measures that you are going to use

- | | | |
|---|---------|--------------|
| 1 | HPints | "Half pints" |
| 2 | SmCans | "Small cans" |
| 3 | LgCans | "Large cans" |
| 4 | Bottles | "Bottles" |

IF (SBRL7 = Hpints) THEN

SBrL7Q(1)

How many half pints of **strong beer, lager, stout or cider** did you drink on that day?

Range: 1..97

IF (SBRL7 = SmCans) THEN

SBrL7Q(2)

How many small cans of **strong beer, lager, stout or cider** did you drink on that day?

Range: 1..97

IF (SBRL7 = LgCans) THEN

SBrL7Q(3)

How many large cans of **strong beer, lager, stout or cider** did you drink on that day?

Range: 1..97

IF (SBRL7 = Bottles) THEN

SBrL7Q(4)

How many bottles of **strong beer, lager, stout or cider** did you drink on that day?

Range: 1..97

IF (SBRL7 = Bottles) THEN

SBotL7

ASK OR CODE: What make of **strong beer, lager, stout or cider** did you drink from bottles on that day?

INTERVIEWER: If respondent drank different makes code which they drank most.

: STRING [21]

IF (DrnkType = Spirits) THEN
SpirL7

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

INTERVIEWER: Code the number of singles - count doubles as two singles

Range: 1..97

IF (DrnkType = Sherry) THEN
ShryL7

Still thinking about last (day from WhichDay), how much sherry or martini, including port, vermouth, Cinzano and Dubonnet did you drink on that day?

INTERVIEWER: Code the number of glasses

Range: 1..97

IF (DrnkType = Wine) THEN
WineL7

Still thinking about last (day from WhichDay), 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.

Please code the relevant option.

- | | | |
|---|---------|--|
| 1 | Bottle | "Bottle or parts of bottle" |
| 2 | Glasses | "Glasses" |
| 3 | Both | "Both bottles or parts of bottle, and glasses" |

IF (WineL7 = Bottle) THEN
WL7Bt

INTERVIEWER: Code the number of 125ml glasses drunk **from the bottle** by the respondent.

E.g. If they drank half a bottle, code 3 glasses.

1 bottle	=	6 glasses
1/2 bottle	=	3 glasses
1/3 bottle	=	2 glasses
1/4 bottle	=	1.5 glasses
1 litre	=	8 glasses
1/2 litre	=	4 glasses
1/3 litre	=	2.5 glasses
1/4 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 shared a bottle with one other person and they shared it equally, code 3 glasses.

Range: 1.0..97.9

IF (WineL7 = Glasses) THEN
WL7GI

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

Range: 1.0..97.9

WL7Giz

Were you drinking from a large, standard, or small glass?

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.

- | | | |
|---|----------|--------------------------|
| 1 | Large | "Large glass (250ml)" |
| 2 | Standard | "Standard glass (175ml)" |
| 3 | Small | "Small glass (125ml)" |

IF (WL7Glz = 1) THEN

MI250Glz

How many large glasses (250ml) did you drink?

Range: 1.0..97.9

IF (WL7Glz = 2) THEN

MI175Glz

How many standard glasses (175ml) did you drink?

Range: 1.0..97.9

IF (WL7Glz = 3) THEN

MI125Glz

How many small glasses (125ml) did you drink?

Range: 1.0..97.9

IF (DrnkType = Pops) THEN

PopsL7

Still thinking about last (day from WhichDay), how much **alcoholic soft drink** ('alcopop') did you drink on that day?

INTERVIEWER: Code measures that you are going to use.

- | | | |
|---|---------|--------------|
| 1 | SmCans | "Small cans" |
| 2 | Bottles | "Bottles" |

PopsL7Q

ASK OR CODE: How many (answer from PopsL7) of **alcoholic soft drink** ('alcopop') did you drink on that day?

Range: 1..97

IF (DrnkType = Other) THEN

OthL7TA

Still thinking about last (day from WhichDay), what other type of alcoholic drink did you drink on that day?

INTERVIEWER: Code first mentioned only.

: STRING [30]

OthL7QA

How much (answer from OthL7TA) did you drink on that day?

INTERVIEWER: Write in how much. Remember to specify half pints/ singles/ glasses/ bottles.

: STRING [30]

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 (day from WhichDay), what other type of alcoholic drink did you drink on that day?

INTERVIEWER: Code first mentioned only.

: STRING [30]

OthL7QB

How much (answer from OthL7TB) did you drink on that day?

INTERVIEWER: Write in how much. Remember to specify half pints/ singles/ glasses/ bottles.

: STRING [30]

OthL7C

Did you drink any other type of alcoholic drink on that day?

- 1 Yes
- 2 No

IF (OthL7C = Yes) THEN

OthL7TC

Still thinking about last (day from WhichDay), what other type of alcoholic drink did you drink on that day?

INTERVIEWER: Code first mentioned only.

: STRING [30]

OthL7QC

How much (answer from OthL7TC) did you drink on that day?

INTERVIEWER: Write in how much. Remember to specify half pints/ singles/ glasses/ bottles.

: STRING [30]

IF (current age is 5 or more years greater than age first had alcoholic drink) THEN

DrAmount

Compared to five years ago, would you say that on the whole you drink more, about the same or less nowadays?

- 1 More "More nowadays"
- 2 Same "About the same"
- 3 Less "Less nowadays"

ACTIGRAPH PLACEMENT

FOR RESPONDENTS AGED 4-15

AGIntro

As part of this study, we are asking children aged 4 to 15 to wear an activity monitor called an 'Actigraph'. The activity monitor is like a pedometer and records different types of movement.

Before I go into more detail about the Actigraph, I would first like to ask you a few background questions to check whether you / X would be able to take part.

PRESS <ENTER> TO CONTINUE

1 Continue

Abdom

Have you / has X recently had abdominal surgery, or do you /does he/she have any health problems which mean that you/he/she could not wear a belt round your/his/her waist?

INTERVIEWER: If necessary, explain that the activity monitor will need to be worn on an elastic belt around the waist.

1 Yes "Had abdominal surgery or health problems"

2 No "No"

IF (Abdom = No, Refused or Don't know) THEN

Latex

Do you / does X have an allergy to latex?

1 Yes

2 No

Bed

INTERVIEWER: Are you / is X confined to bed or wheelchair?

1 Yes

2 No

IF (Abdom = Yes) OR (Latex = Yes) OR (Bed = Yes) THEN

NoPart

INTERVIEWER: Thank the respondent and explain that they will not be able to participate in this part of the survey.

INTERVIEWER: PRESS <ENTER> TO CONTINUE

1 continue

IF (Abdom = No) AND (Latex = No) AND (Bed = No) THEN

Intro2

We would like you / X to wear the actigraph for 7 days. As a thank you for participating, you/X will receive a £10 voucher.

Please read this leaflet, it explains more about what's involved.

PRESS <ENTER> TO CONTINUE

1 Continue

AGCons

Are you willing (for X) to take part in the study?

1 Yes "Agreed to take part and consent given"

2 No "No, not willing to take part"

IF (AGCons = Yes) THEN

Place

I will now help fit the actigraph on you/ X so that you/he/she can see how it feels.

PRESS <ENTER> TO CONTINUE

1 Continue

Fit

INTERVIEWER: Fit the actigraph and suggest to the respondent that it is worn for the remainder of the day to allow you / X to get used to it. Remember to note down the Actigraph serial number on the actigraph record card before you fit the actigraph.

Demonstrate and explain:

- The monitor is worn on the waist using the elastic belt provided.
- Attach the belt snugly around the waist so that the monitor rests on the right side of the body, above the right hip.
- You / X should wear the monitor over a thin layer of clothing.
- Keep the monitor fastened on the belt to reduce the risk of losing it.
- The monitor should be put on X when you/he/she wake(s) up and taken off before you/he/she go(es) to bed on each day.
- Please remove the monitor before you / X shower(s), bathe(s) or go(es) swimming, as if it is wet it may be damaged.
- (If you/he/she forget(s) to take the monitor off before bathing or swimming, you/he/she will not be harmed.)

INTERVIEWER: PRESS <ENTER> TO CONTINUE

1 continue

ActFit

INTERVIEWER: How was the fit of the actigraph against the body?

- | | | |
|---|-------|---|
| 1 | Flat | "Snug fit, flat against the body" |
| 2 | NFlat | "Snug fit, not flat because of body shape" |
| 3 | Ref | "Not snug fit (respondent refused to wear it tight around the waist)" |
| 4 | Other | "Other" |

ActNo

INTERVIEWER: Record the serial number of the actigraph, e.g. for ACT9999T, enter 9999T for ACT9048K, enter 9048K

: STRING [5]

ActSDate

Suggested start of actigraph wear (day after interview).

: DATATYPE

ActEDate

Suggested end of actigraph wear (interview + 7 days).

: DATATYPE

Act7D

You / X should start wearing the actigraph when you/he/she get up tomorrow morning and wear it every day until you/he/she go to bed on (date in 7days).

PRESS <ENTER> TO CONTINUE

1 Continue

SlpWkC

Over the last seven days, that is since last (seven days), how long did you / X **usually** sleep for on week nights. That is **Sunday to Thursday** nights?

INTERVIEWER. Enter hours followed by ':' followed by the minutes. If under an hour you must enter 0 for the hour before ':'. Examples:

7:30 - 7 hours and 30 minutes

0:55 - 55 minutes

6:5 - 6 hours and 5 minutes

INTERVIEWER: ONLY INCLUDE TIME RESPONDENT IS ASLEEP. AN AVERAGE TIME PER NIGHT IS BEING SOUGHT. IF RESPONDENT CANNOT ANSWER BECAUSE THE PATTERN OF TIME SPENT VARIES WIDELY FROM NIGHT TO NIGHT, CODE 'DON'T KNOW'.

IF RESPONDENT WORKED ON NIGHT SHIFTS DURING THE LAST TWO WEEKS ENTER AVERAGE TIME SLEPT DURING THE DAY.

: TIMETYPE

SlpWkCH

Over the last seven days, that is since last (seven days), how long did you / X **usually** sleep for on week nights. That is **Sunday to Thursday** nights?

INTERVIEWER. Enter hours in this question followed by minutes in the next question (SlpWkCM)

INTERVIEWER: ONLY INCLUDE TIME RESPONDENT IS ASLEEP. AN AVERAGE TIME PER NIGHT IS BEING SOUGHT. IF RESPONDENT CANNOT ANSWER BECAUSE THE PATTERN OF TIME SPENT VARIES WIDELY FROM NIGHT TO NIGHT, CODE 'DON'T KNOW'.

IF RESPONDENT WORKED ON NIGHT SHIFTS DURING THE LAST TWO WEEKS ENTER AVERAGE TIME SLEPT DURING THE DAY.

: 0..24

SlpWkCM

... and enter minutes

: 0..59

SlpWkEC

And over the last seven days, how long did you/ X **usually** sleep for on weekend nights. That is Friday and Saturday nights?

INTERVIEWER. Enter hours followed by ':' followed by the minutes. If under an hour you must enter 0 for the hour before the ':'. Examples:

7:30 - 7 hours and 30 minutes

0:55 - 55 minutes

6:5 - 6 hours and 5 minutes

INTERVIEWER: ONLY INCLUDE TIME RESPONDENT IS ASLEEP. AN AVERAGE TIME PER NIGHT IS BEING SOUGHT. IF RESPONDENT CANNOT ANSWER BECAUSE THE PATTERN OF TIME SPENT VARIES WIDELY FROM NIGHT TO NIGHT, CODE 'DON'T KNOW'.

IF RESPONDENT WORKED ON NIGHT SHIFTS DURING THE LAST TWO WEEKS ENTER AVERAGE TIME SLEPT DURING THE DAY.

: TIMETYPE

SlpWkECH

And over the last seven days, how long did you / X **usually** sleep for on weekend nights. That is Friday and Saturday nights?

INTERVIEWER. Enter hours in this question followed by minutes in the next question (SlpWkECM)

INTERVIEWER: ONLY INCLUDE TIME RESPONDENT IS ASLEEP. AN AVERAGE TIME PER NIGHT IS BEING SOUGHT. IF RESPONDENT CANNOT ANSWER BECAUSE THE PATTERN OF TIME SPENT VARIES WIDELY FROM NIGHT TO NIGHT, CODE 'DON'T KNOW'.

IF RESPONDENT WORKED ON NIGHT SHIFTS DURING THE LAST TWO WEEKS
ENTER AVERAGE TIME SLEPT DURING THE DAY.

: 0..24

SlpWkECM

... and enter minutes

: 0..59

RecSht

INTERVIEWER: Give X the violet actigraph record card.

Explain that the record card will remind the respondent when they should start and finish wearing the actigraph.

If X cannot begin wearing the actigraph the next day, then write in the **actual start and finish date** on the record card.

Remind the respondent that if they forget to start wearing the actigraph on the recorded date then they should make a note of this on the actigraph record card.

Serial number: ^IndSer

Date of birth: ^PDOB[2]

Actigraph serial number: ^ActNo

Date from: ^LDateFrom

Date to: ^LDateTo

INTERVIEWER: PRESS <ENTER> TO CONTINUE

1 continue

ActPlcd

INTERVIEWER: Did you place the actigraph and actigraph record card with X?

1 Yes

2 No

IF (ActPlcd = No) THEN

WhyActNo

INTERVIEWER: Please record why the actigraph and actigraph record card were not placed.

: STRING [60]

ActInt

INTERVIEWER ASK X: 'Please start wearing the actigraph when you get up tomorrow morning and wear it every day until you go to bed on (the seventh day).'

PLEASE ASK ALL: 'Please could I arrange a convenient time to come back to collect the actigraph and actigraph record card?'

INTERVIEWER: Ask the actigraph respondent(s) to keep the actigraph and actigraph record card in a safe place until you come to collect it.

Make an appointment to collect the actigraph.

INTERVIEWER: PRESS <ENTER> TO CONTINUE

1 continue

HEIGHT & WEIGHT MEASUREMENTS

ALL RESPONDENTS

Intro

INTERVIEWER: CODE AS 'Later' IF YOU DO NOT WISH TO DO THE MEASUREMENTS FOR (respondent's name) NOW.

PREAMBLE: I would now like to measure your / (child's name)'s height and weight. There is interest in how people's weight, given their height, is associated with their health.

INTERVIEWER: MAKE OUT MRC FOR (respondent's name), IF MEASUREMENTS WILL BE TAKEN.

1 Continue

IF (Sex = Female) AND (Age = 16 – 49) THEN

PregNowB

MEASUREMENTS FOR (respondent's name)

May I check, are you pregnant or breastfeeding now?

1 Yes

2 No

IF (Age >= 2) AND (PregNowB <> Yes) THEN

RespHts

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: MEASURE HEIGHT AND CODE.

INCLUDE 'DISGUISED' REFUSALS SUCH AS 'IT WILL TAKE TOO LONG', 'I HAVE TO GO OUT' ETC. AT CODE 2: HEIGHT REFUSED.

1 Meas "Height measured"

2 Ref "Height refused"

3 Attmp "Height attempted, not obtained"

4 NotAt "Height not attempted"

Height1

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: ENTER HEIGHT, IN CENTIMETRES.

: 60.0..244.0

Height2

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: PLEASE MEASURE HEIGHT AGAIN AND ENTER HEIGHT, IN CENTIMETRES.

: 60.0..244.0

IF (difference between height1 and height2 is greater than 0.5 centimetres) THEN

Height3

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: THE PREVIOUS HEIGHTS DIFFER BY MORE THAN .5cm.

PLEASE MEASURE HEIGHT AGAIN AND ENTER HEIGHT, IN CENTIMETRES

: 60.0..244.0

IF (RespHts = Meas) THEN

Height

MEASUREMENTS FOR (respondent's name)

HEIGHT IN CENTIMETRES

: 60.0..244.0

StadNo

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: PLEASE RECORD THE ASSET NUMBER OF THE **STADIOMETER** USED FOR THIS INTERVIEW.

THE ASSET NUMBER IS USUALLY IN ONE OF THE FOLLOWING FORMS:

CST+digits	e.g. CST123
NS+digits+L	e.g. NS123L
NS+digits+NC	e.g. NS123NC
LST+digits	e.g. LST123
EST+digits	e.g. EST123
: STRING [7]	

RelHite

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: CODE ONE ONLY.

1	NoProb	"No problems experienced, reliable height measurement obtained"
2	Rel	"Problems experienced, measurement likely to be: Reliable"
3	UnRel	"Problems experienced, measurement likely to be: Unreliable"

IF (RelHite = UnRel) THEN**HiNRel**

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: WHAT CAUSED THE HEIGHT MEASUREMENT TO BE UNRELIABLE?

1	Hair	"Hairstyle or wig"
2	Hat	"Turban or other religious headgear"
3	Stoop	"Respondent stooped"
4	Stretch	"Child respondent refused stretching"
5	Fidget	"Respondent would not stand still"
6	Shoes	"Respondent wore shoes"
7	Other	"Other, please specify"

IF (HiNRel = Other) THEN**OHiNRel**

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: PLEASE SPECIFY WHAT CAUSED UNRELIABLE HEIGHT MEASUREMENT.

: STRING [60]

IF (RespHts = Meas) THEN**MBookHt**

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: CHECK HEIGHT RECORDED ON MEASUREMENT RECORD CARD IF WANTED.

HEIGHT: ^Height cm OR ^Foot feet ^Inch inches.

PRESS <ENTER> TO CONTINUE

1	Continue
---	----------

IF (RespHts = Ref) THEN**ResNHi**

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: GIVE REASONS FOR REFUSAL.

1	NoPoint	"Cannot see point/Height already known/Doctor has measurement"
2	Busy	"Too busy/Taken too long already/ No time"
3	TooIll	"Respondent too ill/frail/tired"
4	Intrusiv	"Considered intrusive information"

5	Anxious	"Respondent too anxious/nervous/shy/embarrassed"
6	Refused	"Refused (no other reason given)"
7	Other	"Other"

IF (RespHts = Attmpt..NotAt) THEN

NoHtBC

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: CODE REASON FOR NOT OBTAINING HEIGHT.

CODE ALL THAT APPLY.

1	Away	"Child: away from home during fieldwork period (specify in a Note)"
2	Unsted	"Respondent is unsteady on feet"
3	CantStan	"Respondent cannot stand upright/too stooped"
4	Chair	"Respondent is chairbound"
5	Bed	"Confined to bed"
6	Shoes	"Respondent unable to remove shoes"
7	NotStl	"Child:subject would not stand still"
8	Ill	"Ill or in pain"
9	NotWrk	"Stadiometer faulty or not available"
10	ASleep	"Child asleep"
11	Other	"Other - specify"

IF (NoHtBC = Other) THEN

NoHitCO

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: Please specify other reason.

: STRING [60]

IF (Age >= 2) AND (PregNowB <> Yes) THEN

RespWts

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: MEASURE WEIGHT AND CODE.

INCLUDE 'DISGUISED' REFUSALS SUCH AS 'IT WILL TAKE TOO LONG', 'I HAVE TO GO OUT' ETC. AT CODE 2: WEIGHT REFUSED.

0	Held	"Weight obtained - Child held" (<i>only use if child 5 or under</i>)
1	Meas	"Weight obtained"
2	Ref	"Weight refused"
3	Attmpt	"Weight attempted, not obtained"
4	NotAt	"Weight not attempted"

IF (RespWts = Meas) THEN

XWt1

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: RECORD WEIGHT IN KILOGRAMS.

Range: 5.0..130.0

IF (RespWts = Held) THEN

WtAd1

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: ENTER WEIGHT OF ADULT ON HIS/HER OWN AND ENTER WEIGHT IN KILOGRAMS.

Range: 30.0..130.0

WtChA1

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: ENTER WEIGHT OF ADULT HOLDING CHILD AND ENTER WEIGHT IN KILOGRAMS.

Range: 30.0..130.0

Wght

MEASUREMENTS FOR (respondent's name)

Weight in Kilograms. Computed

Range: 0.0..130.0

IF (Weight obtained) THEN

FloorC

MEASUREMENTS FOR (respondent's name)

INTERVIEWER CODE: SCALES PLACED ON?"

- | | | |
|---|---------|----------------|
| 1 | Uneven | "Uneven floor" |
| 2 | Carpet | "Carpet" |
| 3 | Neither | "Neither" |

IF (weight measurement taken) THEN

RelWaitB

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: CODE ONE ONLY

- | | | |
|---|--------|---|
| 1 | NoProb | "No problems experienced, reliable weight measurement obtained" |
| 2 | Rel | "Problems experienced, measurement likely to be: Reliable" |
| 3 | UnRel | "Problems experienced, measurement likely to be: Unreliable" |

IF (Age ≥ 16) AND (Height = response) AND (RelHite = NoProb OR Rel) AND (Weight = response) AND (RelWaitB = NoProb OR Rel) THEN

BMI

MEASUREMENTS FOR (respondent's name)

Measured Body Mass Index (BMI).

Range: 5.0..50.0

IF (RespWts = Meas OR Held) THEN

MBookWt

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: CHECK WEIGHT RECORDED ON MEASUREMENT RECORD CARD IF WANTED.

Weight: ^Wght kg OR ^Stone stones ^Pound pounds.

BMI : ^BMI

If weight looks wrong, go back to 'XWt1' or 'WtAd1' and reweigh.

PRESS <ENTER> TO CONTINUE

- | | |
|---|----------|
| 1 | Continue |
|---|----------|

IF (RespWts = Meas OR Held) THEN

SciNo

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: PLEASE RECORD THE ASSET NUMBER OF THE **SCALES** USED FOR THIS INTERVIEW.

THE ASSET NUMBER IS USUALLY IN ONE OF THE FOLLOWING FORMS:

- | | |
|--------------|--------------|
| CSC+digits | e.g. CSC123 |
| SC+digits+TA | e.g. SC123TA |
| SC+digits+TL | e.g. SC123TL |
| SC+digits+NC | e.g. SC123NC |
| LSC+digits | e.g. LSC123 |
| ESC+digits | e.g. ESC123 |

: STRING [7]

IF (RespWts = ref) THEN

ResNWt

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: GIVE REASONS FOR REFUSAL.

1	NoPoint	"Cannot see point/Weight already known/Doctor has measurement"
2	Busy	"Too busy/Taken long enough already/No time"
3	TooIll	"Respondent too ill/frail/tired"
4	Intrusiv	"Considered intrusive information"
5	Anxious	"Respondent too anxious/nervous/shy/embarrassed"
6	ChildRef	"Child refused to be held by parent"
7	ParRef	"Parent refused to hold child"
8	Refused	"Refused (no other reason given)"
9	Other	"Other"

IF (RespWts = Attmpt OR NotAt) THEN

NoWtBC

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: CODE REASON FOR NOT OBTAINING WEIGHT.

CODE ALL THAT APPLY.

1	Away	"Child: away from home during fieldwork period (specify in a Note)"
2	Unsted	"Respondent is unsteady on feet"
3	CantStan	"Respondent cannot stand upright"
4	Chair	"Respondent is chairbound"
5	Bed	"Confined to bed"
6	Shoes	"Respondent unable to remove shoes"
7	More130	"Respondent weighs more than 130kg"
8	Ill	"Ill or in pain"
9	NotWrk	"Scales not working"
10	NoHold	"Parent unable to hold child"
11	ASleep	"Child asleep"
12	Other	"Other - specify"

IF (NoWtBC = Other) THEN

NoWatCO

MEASUREMENTS FOR (respondent's name)

INTERVIEWER: Please specify other reason.

: STRING [60]

MoveOK

INTERVIEWER: RECORD WHETHER THIS RESPONDENT IS ABLE TO WALK WITHOUT THE USE OF A WHEELCHAIR.

CODE '1' FOR ANY PERSON WHO CAN MOVE WITHOUT A WHEELCHAIR FOR AT LEAST 5 MINUTES, E.G. EVEN IF HAVE TO USE A WALKING STICK OR ZIMMER FRAME.

1	Yes	"CAN move without wheelchair for at least 5 minutes"
2	No	"CANNOT move without wheelchair for at least 5 minutes"

EndOfM

MEASUREMENTS FOR (respondent's name).

INTERVIEWER: YOU HAVE NOW COMPLETED ALL THE MEASUREMENTS FOR (respondent's name).

1	Continue
---	----------

DIETARY SUPPLEMENTS

ALL RESPONDENTS

Supplnt

I would now like to ask some questions about your/ (child's name)'s use of dietary supplements over the last year. A dietary supplement is a product intended to provide additional nutrients or give health benefits and may be taken in liquid, capsule, tablet, pastille or powder forms. What I will ask you is in addition to the information you / (child's name) provided for the days already recorded when you completed the food diary.

PRESS <ENTER> TO CONTINUE

1 Continue

SuppYr

SHOW CARD DD

Have you / Has (child's name) taken any vitamins, minerals, fish oil, fibre or other dietary supplements of the type listed on this card in the past year, including prescription and non-prescription supplements?

INTERVIEWER: GIVE FURTHER EXAMPLES - VITAMIN C, IRON, FOLIC ACID, GLUCOSAMINE, EVENING PRIMROSE, GARLIC, GINSENG, OMEGA 3, COMPLAN, HEALTHY START VITAMINS ETC.

1 Yes

2 No

IF (SuppYr = Yes) THEN

SDet

Now I would like to collect some details about the vitamins, minerals and other dietary supplements that you / (child's name) have / has taken in the past year.

It will be easiest if you show me the bottles or containers and I can copy down the information.

PRESS <ENTER> TO CONTINUE

1 Continue

{Following questions asked as a loop}

SRec

INTERVIEWER: CODE WHETHER (First/Next) BOTTLE/CONTAINER CHECKED BY YOURSELF, THE RESPONDENT OR NOT AT ALL.

1 Inte "Checked by myself"

2 Resp "Checked by respondent"

3 NoCon "Not checked"

SName

INTERVIEWER: RECORD FULL NAME, INCLUDING BRAND AND STRENGTH.

INTERVIEWER: IT IS VERY IMPORTANT TO RECORD THE **NAME, BRAND AND STRENGTH** ACCURATELY SO THAT WE KNOW WE HAVE INFORMATION ON EXACTLY THE RIGHT SUPPLEMENT.

: STRING [60]

SForm

INTERVIEWER: RECORD FORM.

1 Tablets "Tablets"

2 Capsules "Capsules"

- | | | |
|---|--------|----------------|
| 3 | Drops | "Drops" |
| 4 | Liqu | "Liquid/Syrup" |
| 5 | Powder | "Powder" |

SDose

INTERVIEWER: RECORD DOSE - NUMBER OF **TABLETS, DROPS, 5ml SPOONS**.

CHECK WITH RESPONDENT THE DOSE ACTUALLY TAKEN AND RECORD THIS IF IT IS DIFFERENT TO THE ADVICE GIVEN ON CONTAINER.

: 1..20

SFreq

SHOW CARD EE

How often did you / (child's name) take this supplement?

INTERVIEWER: Use <CTRL K> if does not know.

- | | | |
|---|----------|--------------------------|
| 1 | LessMth | "Less than once a month" |
| 2 | OneThMth | "1-3 times a month" |
| 3 | OnceWk | "Once a week" |
| 4 | TwoFrWk | "2-4 times a week" |
| 5 | OnceDay | "Once a day" |
| 6 | TwoThDay | "2-3 times a day" |
| 7 | FrMrDay | "4 or more times a day" |

SPres

Was the supplement prescribed by your / (child's name) GP/other healthcare professional?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

SMore

INTERVIEWER: RECORD WHETHER THERE ARE ANY MORE VITAMINS OR SUPPLEMENTS TO CODE.

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (P2Age ≥ 4) THEN

HSVits

Have you ever given Healthy Start vitamins to (Child's name)?

- | | | |
|---|--------|--|
| 1 | Yes | |
| 2 | No | |
| 3 | NoneAv | "SPONTANEOUS ONLY: Tried to claim, but none available" |

IF (HSVits=Yes) THEN

HSVoft

And how often do you give these vitamins to (Child's name)?

- | | | |
|---|--------|-------------------------------|
| 1 | Daily | |
| 2 | Occ | "...Occasionally" |
| 3 | VRare | "Very rarely" |
| 4 | Never | |
| 5 | UsedTo | "Used to give, but now don't" |

SUN EXPOSURE MODULE

ALL RESPONDENTS

SunInt

Now I'd like to ask you some questions about some of the things you / (child's name) have/has done in the last seven days, that is since (*day / date*) up until yesterday, that involve exposure to sunlight.

Exposure to sunlight could mean working outdoors, doing some kind of physical activity outside or sunbathing.

Unless otherwise stated, please think of the last seven days only when answering these questions.

PRESS <ENTER> TO CONTINUE

1 Continue

{Ask all children aged < 16}

Sch7D

Can I just check, in the last seven days, that is since last (*day / date*), did you/ X go to school?

- | | | |
|---|--------|--|
| 1 | Yes | "Yes" |
| 2 | NoHol | "No, I was on holiday" |
| 3 | NoSick | "No, I was sick" |
| 4 | NoHome | "No, I don't go to school (home-educated)" |
| 5 | NoOth | "No, any other reason" |

IF (Sch7D = Yes) THEN

SchDays

In the last seven days, that is since (*day / date*), how many days have you / X been to school?

INTERVIEWER: ENTER NUMBER OF DAYS

Range: 1..6

WalkDay

In the last seven days, that is from last (*day / date*) to yesterday, **on how many days** did you/he/she walk to school?

Range: 0..6

WalkSch

In terms of walking to and from school in the last seven days, would you say that you/he/she...

...READ OUT AND CODE ONE ONLY...

- | | | |
|---|--------|--|
| 1 | Same | "Walked the same number of days as usual" |
| 2 | Less | "Walked less days than usual" |
| 3 | More | "Walked more days than usual" |
| 4 | NoWalk | "Or do/does you/he/she never walk to school" |

IF (WalkSch > 0) THEN

WearSch

SHOW CARD II

When you/he/she go/goes to school, what do/does you/he/she usually wear this time of year while on the way there or back?

... READ OUT AND CODE ALL THAT APPLY...

- | | | |
|---|--------|--|
| 1 | Trous | "Trousers?" |
| 2 | Shorts | "Shorts?" |
| 3 | ShSISh | "Short sleeved shirt or long sleeves rolled up?" |
| 4 | LSISh | "Long sleeved shirt / jumper / blazer?" |

{ASK GIRLS ONLY}:

- | | | |
|---|--------|------------|
| 5 | LSkirt | "^WearSkl" |
| 6 | SSkirt | "^WearSks" |
| 7 | Tights | "^WearTig" |

IF (Sch7D = Yes) THEN

MBreakO

On the days when you/he/she was/were at school in the last seven days, did you/he/she usually spend the morning break outside?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

LBreakO

On the days when you/he/she were at school in the last seven days, for how much of your/ X's lunch break was/were you/he/she usually outside?

...READ OUT AND CODE ONE ONLY...

- | | | |
|---|------|----------------------------------|
| 1 | All | "All or most of it" |
| 2 | Half | "About half of it" |
| 3 | None | "Or, very little or none of it?" |

IF (SchDays>0) THEN

PEDay

In the last seven days, that is from (day / date) to yesterday, **on how many days** did you/ X go to P.E. classes?

Range: 0..6

IF (PEDay > 0) THEN

PEOutS

Thinking of the physical education classes you/he/she had in school in the last seven days. In how many of these classes was/were you/he/she outdoors at all?

Range: 0..12

IF (PEOutS > 0) THEN

PEOutST

For how long was/were you/he/she outdoors each time?

Would you say...

- | | | |
|---|------|---|
| 1 | All | "All or most of the class except when changing clothes" |
| 2 | Half | "About half the class" |
| 3 | Less | "Or less than half the class?" |

PEOUnc

When you/he/she was/were outside during these classes, were the following parts of your/ X body usually uncovered?

...READ OUT AND CODE ALL THAT APPLY...

- | | | |
|---|--------|--------------|
| 1 | Face | "Face?" |
| 2 | Head | "Head?" |
| 3 | Hands | "Hands?" |
| 4 | Arms | "Arms?" |
| 5 | Should | "Shoulders?" |
| 6 | Legs | "Legs?" |

IF (PEDay > 0) THEN

PEOTyp

How typical were the last seven days in terms of the number of PE classes you/he/she had outside for this time of year?

Would you say the number of classes outside was

...READ OUT...

- | | | |
|---|------|--------------------------------|
| 1 | Same | "The same as usual" |
| 2 | Less | "Less classes than usual" |
| 3 | More | "Or, more classes than usual?" |

{End of specific questions for children aged < 16}

ASK ALL

OutS

In the last seven days, on how many days have/has you/he/she spent time sitting, standing or lying outside (for example at a sports event)?

INTERVIEWER: IF NONE CODE ZERO

EXCLUDE ANY OUTDOOR PHYSICAL ACTIVITIES, SPORTS, WALKING AND CYCLING

Range: 0..7

IF (OutS > 0) THEN

TimeOH

Approximately how many hours did you/he/she usually spend on each one of those days sitting, standing or lying outside?

INTERVIEWER. Enter hours in this question followed by minutes in the next question (TimeOM)

Range: 0..24

TimeOM

... and enter minutes

Range: 0..59

TOUnc

When you/he/she was/were sitting, standing or lying outside, were the following parts of your/ X's body uncovered?

READ OUT AND CODE ALL THAT APPLY.

- | | | |
|---|--------|-----------------------------------|
| 1 | Face | "Face?" |
| 2 | Head | "Head?" |
| 3 | Hands | "Hands?" |
| 4 | Arms | "Arms?" |
| 5 | Should | "Shoulders?" |
| 6 | Legs | "Legs?" |
| 7 | UppBod | "Most or all of upper body?" |
| 8 | None | "DO NOT READ OUT - None of these" |

ASK ALL ≥16

TOTyp

In terms of the amount of time you spent outside, either at work, while doing physical activities or sitting, standing or lying outside, were the last seven days typical for this time of year?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (TOTyp = No) THEN

TOTypW

Why not?
: STRING [50]

ASK ALL

SunC

In the last seven days, have/has you/he/she used sun cream?

- 1 Yes
- 2 No

IF (SunC = Yes) THEN

SPF

What SPF factor was this sun cream?

INTERVIEWER: IF NECESSARY, READ OUT...

CODE ALL THAT APPLY.

- 1 SPF17 "1-7"
- 2 SPF815 "8-15"
- 3 SPF1625 "16-25"
- 4 SPF2630 "26-30"
- 5 SPF31MO "31+"

IF (SunC = Yes) Then

SunCD

On how many days in the last seven days did you/he/she apply sun cream?

Range: 1..7

IF (SunCD > 0) THEN

SCAp

And how many times each day did you/he/she apply it.

Was it...READ OUT...

INTERVIEWER: For young children, a parent/guardian may have applied the sun cream.

This should be included in the answer.

- 1 Morn "Morning only"
- 2 Once "Once at another time of day"
- 3 Sev "Or, twice or more times during the day?"

IF (respondent is FEMALE) THEN

Mois

In the last seven days, have you/ has she used moisturiser containing SPF factor?

- 1 Yes
- 2 No

IF (respondent is FEMALE) AND (Mois = Yes) THEN

MoSPF

What SPF factor did this moisturiser contain?

INTERVIEWER: IF NECESSARY, READ OUT...

- 1 SPF17 "1-7"
- 2 SPF815 "8-15"
- 3 SPF1625 "16-25"
- 4 SPF2630 "26-30"
- 5 SPF31plus "31+"
- 6 DontK "Don't Know"

IF (MoSPF = DontK) THEN

MoName

What is the name of the moisturiser?

: STRING [30]

EDMoCode

Moisturiser code - EDIT

Range: 1..99

EDMoName

Moisturiser name: **MoName**

EDITOR: Press **Spacebar** to start computer-assisted coding of moisturiser.

: STRING [130]

EDMoProd

Moisturiser name - EDIT

: STRING [100]

EDMoBrnd

Moisturiser brand - EDIT

: STRING [30]

EDMoSPF

Moisturiser SPF - EDIT

: STRING [10]

IF (respondent is FEMALE) AND (Mois = Yes) THEN

MoDs

On how many days in the last seven days did you/she use this moisturiser?

Range: 1..7

IF (MoDs > 0) THEN

MoAp

And how many times each day did you/he/she apply it. Was it...

...READ OUT...

INTERVIEWER: For young children, a parent/guardian may have applied the moisturiser.

This should be included in the answer.

- | | | |
|---|------|---|
| 1 | Morn | "Morning only" |
| 2 | Once | "Once at another time of day" |
| 3 | Sev | "Or, twice or more times during the day?" |

ASK ALL

CovSk

Do/does you/he/she ever cover your/his/her skin for religious reasons?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (CovSk = Yes) THEN

HMCov

To what extent do/does you/he/she cover your/his/her body.

Do/does you/he/she cover your/his/her ...

READ OUT AND CODE ALL THAT APPLY ...

- | | | |
|---|--------|--------------|
| 1 | Face | "Face?" |
| 2 | Head | "Head?" |
| 3 | Hands | "Hands?" |
| 4 | Arms | "Arms?" |
| 5 | Should | "Shoulders?" |
| 6 | Legs | "Legs?" |

7 UppBod "Most or all of upper body?"

ASK ALL

Hair

What is your/his/her natural (undyed) hair colour?

INTERVIEWER: IF RESPONDENT ANSWERS 'GREY', ASK 'What was it before becoming grey?'

IF RESPONDENT ANSWERS 'BALD', ASK 'What was it before becoming bald?'

INTERVIEWER: IF ASKED, WE ARE INTERESTED IN HAIR AND SKIN COLOUR BECAUSE WE GET MOST OF OUR VITAMIN D THROUGH EXPOSURE TO SUNLIGHT (ONLY SOME COMES FROM OUR DIET). BY KNOWING HAIR AND SKIN COLOUR, THE AMOUNT OF TIME SPENT OUTSIDE, AND ALSO DIETARY DETAILS, WE CAN WORK OUT HOW MUCH VITAMIN D IS FORMED IN THE SKIN.

- | | | |
|---|--------|-----------------------|
| 1 | Black | "Black" |
| 2 | Red | "Red / Ginger" |
| 3 | Blond | "Blond / Fair" |
| 4 | LBrown | "Light brown / Mouse" |
| 5 | DBrown | "Dark brown" |
| 6 | Auburn | "Auburn" |
| 7 | None | "None of these" |

Skin

Which of the following best describes your/his/her natural skin colour. By natural colour I mean before exposure to the sun.

Is it...READ OUT...

INTERVIEWER: IF ASKED, WE ARE INTERESTED IN HAIR AND SKIN COLOUR BECAUSE WE GET MOST OF OUR VITAMIN D THROUGH EXPOSURE TO SUNLIGHT (ONLY SOME COMES FROM OUR DIET). BY KNOWING HAIR AND SKIN COLOUR, THE AMOUNT OF TIME SPENT OUTSIDE, AND ALSO DIETARY DETAILS, WE CAN WORK OUT HOW MUCH VITAMIN D IS FORMED IN THE SKIN.

- | | | |
|---|-------|--------------|
| 1 | White | "White" |
| 2 | Brown | "Brown" |
| 3 | Black | "Black" |
| 4 | Olive | "Or, olive?" |
| 5 | Other | "Other" |

IF (Skin = White OR Olive) THEN

SkTyp

Would you say your/his/her type of skin...

...READ OUT...

- | | | |
|---|--------|-------------------------------|
| 1 | NeverT | "Never tans" |
| 2 | DiffT | "Tans with difficulty" |
| 3 | EasyT | "Or tans easily?" |
| 4 | NotKno | "DO NOT READ OUT - Not known" |

ASK ALL

Holi12m

In the past year, have / has you / (child's name) been on a sun holiday or trip to a sunny place for two days or more? This could be a sun holiday abroad or in the UK.

INTERVIEWER: IT NEEDS TO HAVE BEEN SUNNY FOR TWO DAYS OR MORE WHILE RESPONDENT WAS AWAY.

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

IF (Respondent 2 within 'Core Address') THEN

SameHols

Were any of these holidays the same as the ones (**Respondent one's name**) has already told me about? That is to the same place at the same time as (**Respondent one's name**).

INTERVIEWER: IF YES: PROBE AND CODE ALL THAT APPLY FROM LIST BELOW

IF (Holi12m = Yes) THEN

SunHM

Thinking of the {first/second/third/ fourth} sun holiday you/he/she took in the last year, in which month was this holiday?

INTERVIEWER: IF HOLIDAY SPANS MORE THAN ONE MONTH, RECORD THE MONTH IN WHICH THE HOLIDAY BEGAN.

- | | | |
|----|----------|-------------|
| 1 | January | |
| 2 | February | |
| 3 | March | |
| 4 | April | |
| 5 | May | |
| 6 | June | |
| 7 | July | |
| 8 | August | |
| 9 | Sept | "September" |
| 10 | October | |
| 11 | November | |
| 12 | December | |

HolC

What country did you/he/she visit on this trip?

INTERVIEWER: IF UK / GREAT BRITAIN, CHECK IF ENGLAND, SCOTLAND, WALES OR NORTHERN IRELAND.

INTERVIEWER: RECORD NAME OF COUNTRY.

INTERVIEWER: IF MORE THAN ONE, CODE THE COUNTRY WHERE RESPONDENT SPENT THE MOST TIME.

INTERVIEWER: INCLUDE VISITS TO FRIENDS AND FAMILY.

: STRING [30]

AnyMore

INTERVIEWER: ARE THERE ANY MORE SUN HOLIDAYS TO RECORD?

- | | |
|---|-----|
| 1 | Yes |
| 2 | No |

DIARY COLLECTION & PHYSICAL ACTIVITY QUESTIONNAIRE PLACEMENT

**DIARY COLLECTION: ALL RESPONDENTS
RPAQ PLACEMENT: RESPONDENTS AGED 16 AND OVER**

IF (Age≥16) AND (Respondent number = 1) THEN

DiaryDA

INTERVIEWER: BRIEFLY GO THROUGH THE DIARY JUST TO CHECK HOW MANY DIARY DAYS (respondent **one's** name) COMPLETED AND RECORD NUMBER OF DIARY DAYS COMPLETED HERE.

IF RESPONDENT HAS COMPLETED 3 OR 4 DIARY DAYS THEN GIVE THEM £30 IN HIGH STREET VOUCHERS AND ASK THEM TO SIGN THE RECEIPT.

ENTER '0' IF NONE.

INTERVIEWER: BRIEFLY GO THROUGH THE DIARY AND CHECK HOW MANY DIARY DAYS (respondent one's name) COMPLETED.

RECORD NUMBER OF DIARY DAYS COMPLETED HERE.

ENTER '0' IF NO DIARY DAYS WERE COMPLETED.

Range: 0..4

IF (Respondent number = 1) AND (DiaryDA < 3) THEN

NoCAPI2A

INTERVIEWER: (Respondent **one's**) Name has not completed at least 3 days of the food diary so the physical activity self-completion, the rest of CAPI2 and introduction to the Nurse visit are not necessary for this respondent.

PRESS <ENTER> TO CONTINUE

1 Continue

IF (Age≥16) AND (Respondent number = 2) THEN

DiaryDC

INTERVIEWER: BRIEFLY GO THROUGH THE DIARY JUST TO CHECK HOW MANY DIARY DAYS (respondent **two's** name) COMPLETED AND RECORD NUMBER OF DIARY DAYS COMPLETED HERE.

IF RESPONDENT HAS COMPLETED 3 OR 4 DIARY DAYS THEN GIVE THEM £30 IN HIGH STREET VOUCHERS AND ASK THEM TO SIGN THE RECEIPT.

ENTER '0' IF NONE

INTERVIEWER: BRIEFLY GO THROUGH THE DIARY AND CHECK HOW MANY DIARY DAYS (respondent two's name) COMPLETED.

RECORD NUMBER OF DIARY DAYS COMPLETED HERE.

ENTER '0' IF NO DIARY DAYS WERE COMPLETED.

Range: 0..4

IF (IF (Person Respondent = 2) AND (DiaryDA < 3) THEN

NoCAPI2C

INTERVIEWER: (respondent **two's**) Name has not completed at least 3 days of the food diary so the rest of CAPI2 and introduction to the Nurse visit are not necessary for this respondent.

PRESS <ENTER> TO CONTINUE

1 Continue

IF (Age≥16) AND (Respondent number = 1) THEN

DiarChkA

(Respondent one's name), I would like you to answer some questions by completing this booklet. The questions cover physical activity in your everyday life in the last 4 weeks.

INTERVIEWER: Complete the front page of the booklet for (respondent one's name).

AName.....Point..Address..Check letter..Person number..FROM.....TO

INTERVIEWER:

- Give (respondent one's name) the Physical Activity self-completion booklet and explain how to fill it in.
- While the respondent completes the Physical Activity self-completion booklet, check their diary and decide what extra detail you will need to prompt for.
- When the respondent has completed the Physical Activity self-completion, go through the **diary** with the respondent and probe for any missing information.

PRESS <ENTER> TO CONTINUE

1 Continue

IF (Age ≥16) AND (Respondent Number = 2) THEN

DiarChkC

(Respondent two's name), I would like you to answer some questions by completing this booklet. The questions cover physical activity in your everyday life in the last 4 weeks.

INTERVIEWER: Complete the front page of the booklet for (Respondent two's name).

AName.....Point..Address..Check letter..Person number..FROM.....TO

INTERVIEWER:

- Give (**Respondent two's name**) the Physical Activity self-completion booklet and explain how to fill it in.
- While the respondent completes the Physical Activity self-completion booklet, check their diary and decide what extra detail you will need to prompt for.
- When the respondent has completed the Physical Activity self-completion, go through the **diary** with the respondent and probe for any missing information.

PRESS <ENTER> TO CONTINUE

1 Continue

IF (Respondent number = 1) AND (DiaryDA ≥ 3) THEN

RPAQChkA

INTERVIEWER: RECORD WHETHER (respondent one's name) COMPLETED THE PHYSICAL ACTIVITY SELF-COMPLETION.

INTERVIEWER: IF COMPLETED THEN GO THROUGH THE COMPLETED PHYSICAL ACTIVITY SELF-COMPLETION WITH (respondent one's name) AND PROBE FOR ANY MISSING INFORMATION.

1 Yes

2 No

3 Missing

IF (Respondent number = 1) THEN

SlpWkAH

Over the last seven days, that is since (date), how long did you **usually** sleep for on week nights. That is **Sunday to Thursday** nights?

INTERVIEWER. Enter hours in this question followed by minutes in the next question (SlpWkAM)

INTERVIEWER: ONLY INCLUDE TIME RESPONDENT IS ASLEEP. AN AVERAGE TIME PER NIGHT IS BEING SOUGHT. IF RESPONDENT CANNOT ANSWER BECAUSE THE PATTERN OF TIME SPENT VARIES WIDELY FROM NIGHT TO NIGHT, CODE 'DON'T KNOW '.

IF RESPONDENT WORKED ON NIGHT SHIFTS DURING THE LAST TWO WEEKS ENTER AVERAGE TIME SLEPT DURING THE DAY.

Range: 0..24

SlpWkAM

... and enter minutes

Range: 0..59

SlpWkEAH

And over the last seven days, how long did you **usually** sleep for on weekend nights. That is Friday and Saturday nights?

INTERVIEWER. Enter hours in this question followed by minutes in the next question (SlpWkEAM)

INTERVIEWER: ONLY INCLUDE TIME RESPONDENT IS ASLEEP. AN AVERAGE TIME PER NIGHT IS BEING SOUGHT. IF RESPONDENT CANNOT ANSWER BECAUSE THE PATTERN OF TIME SPENT VARIES WIDELY FROM NIGHT TO NIGHT, CODE 'DON'T KNOW'.

IF RESPONDENT WORKED ON NIGHT SHIFTS DURING THE LAST TWO WEEK ENDS ENTER AVERAGE TIME SLEPT DURING THE DAY.

Range: 0..24

SlpWkEAM

... and enter minutes

Range: 0..59

IF (Respondent number = 2) AND (DiaryDA ≥ 3) THEN

RPAQChkC

INTERVIEWER: RECORD WHETHER (*Respondent two*) COMPLETED THE PHYSICAL ACTIVITY SELF-COMPLETION.

INTERVIEWER: IF COMPLETED THEN GO THROUGH THE COMPLETED PHYSICAL ACTIVITY SELF-COMPLETION WITH (*Respondent two*) AND PROBE FOR ANY MISSING INFORMATION.

- 1 Yes
- 2 No
- 3 Missing

IF (Respondent number = 2) THEN

SlpWkCH

Over the last seven days, that is since (date), how long did you (*Respondent two*) **usually** sleep for on week nights. That is **Sunday to Thursday** nights?

INTERVIEWER. Enter hours in this question followed by minutes in the next question (SlpWkCM)

INTERVIEWER: ONLY INCLUDE TIME RESPONDENT IS ASLEEP. AN AVERAGE TIME PER NIGHT IS BEING SOUGHT. IF RESPONDENT CANNOT ANSWER BECAUSE THE PATTERN OF TIME SPENT VARIES WIDELY FROM NIGHT TO NIGHT, CODE 'DON'T KNOW'.

IF RESPONDENT WORKED ON NIGHT SHIFTS DURING THE LAST TWO WEEKS ENTER AVERAGE TIME SLEPT DURING THE DAY.

Range: 0..24

SlpWkCM

... and enter minutes

Range: 0..59

SlpWkECH

And over the last seven days, how long did you (*Respondent two*) **usually** sleep for on weekend nights. That is Friday and Saturday nights?

INTERVIEWER. Enter hours in this question followed by minutes in the next question (SlpWkCM)

INTERVIEWER: ONLY INCLUDE TIME RESPONDENT IS ASLEEP. AN AVERAGE TIME PER NIGHT IS BEING SOUGHT. IF RESPONDENT CANNOT ANSWER BECAUSE THE PATTERN OF TIME SPENT VARIES WIDELY FROM NIGHT TO NIGHT, CODE 'DON'T KNOW'.

IF RESPONDENT WORKED ON NIGHT SHIFTS DURING THE LAST TWO WEEK ENDS ENTER AVERAGE TIME SLEPT DURING THE DAY.

: 0..24

SlpWkECM

... and enter minutes

Range: 0..59

IF (AGE <16 and DiaryDC ≥ 3) THEN

DiarChk2

INTERVIEWER: Now go through the diary with (*Respondent two*) and probe for any missing information

PRESS <ENTER> TO CONTINUE

1 Continue

DietFBA

(Respondent one), would you like to be sent some information about some of the major foods and nutrients in your diet based on the information you have provided during the interviews? The information will tell you how you compare with current consumption in the UK and how your intake of nutrients fits with UK recommendations for a healthy diet. It will also provide some useful resources for finding out more about eating a healthy diet.

INTERVIEWER: INFORMATION WILL BE SENT FROM THE OFFICE WITHIN 6 MONTHS.

1 Yes "Yes, feedback required"

2 No "No, feedback not required"

AddrChkA

We have this name for you ...

Title:

Forename:

Surname:

Is this correct?

INTERVIEWER: THIS IS TO ENSURE THAT ANY LETTERS, REQUESTED BY RESPONDENTS (SUCH AS DIETARY FEEDBACK FORMS), ARE SENT TO THE CORRECT RESPONDENTS.

1 Yes

2 No

TtlA

Firstly, what is your / X's title?

1 Mr

2 Mrs

3 Ms

4 Miss

5 Other "Other title"

TtlTxtA

INTERVIEWER: Enter the other **title**

: STRING [15]

ForNameA

And your / X's **first name**?

: STRING [20]

SurNameA

And your / X's **surname**?

: STRING [20]

DietFBC

(Respondent two), would you like to be sent some information about some of the major foods and nutrients in your / X's diet based on the information you have provided during the interviews? The information will tell you how your / X's compare(s) with current consumption in the UK and how your / X's intake of nutrients fits with UK recommendations for a healthy diet. It will also provide some useful resources for finding out more about eating a healthy diet.

INTERVIEWER: INFORMATION WILL BE SENT FROM THE OFFICE WITHIN 6 MONTHS.

1 Yes "Yes, feedback required"

2 No "No, feedback not required"

AddrChkC

We have this name for you ...

Title:

Forename:

Surname:

Is this correct?

INTERVIEWER: THIS IS TO ENSURE THAT ANY LETTERS, REQUESTED BY RESPONDENTS (SUCH AS DIETARY FEEDBACK FORMS), ARE SENT TO THE CORRECT RESPONDENTS.

1 Yes

2 No

TtlC

Firstly, what is your / X's title?

1 Mr

2 Mrs

3 Ms

4 Miss

5 Other "Other title"

TtlTxtC

INTERVIEWER: Enter the other **title**

: STRING [15]

ForNameC

And your / X's **first name**?

: STRING [20]

SurNameC

And your / X's **surname**?

: STRING [20]

NHS CENTRAL REGISTER & CANCER REGISTRY CONSENT FORM

FOR RESPONDENTS AGED 16 AND OVER

IF (Age ≥ 19) THEN

NHSCanA

We would like your consent for us to send your name, address and date of birth to two National Health Service registers. These are the NHS Central Register and the NHS Cancer Registry.

Please read this form, it explains more about what is involved.

INTERVIEWER: GIVE THE RESPONDENT THE NHSCR CONSENT FORM AND ALLOW THEM TIME TO READ THE INFORMATION.

- | | | |
|---|-------|---------------------|
| 1 | Con | "Consent given" |
| 2 | NoCon | "Consent not given" |

IF (NHSCanA = Con) THEN

NHSSigA

Before I can pass on your details, I have to obtain written consent from you.

INTERVIEWER: Enter the respondent's serial number, check letter, and respondent number on the top of the consent form.

Serial: Check Letter: Person Number: 1

Ask the respondent to sign and date the form.

Give the **bottom** copy of the form to the respondent.

Code whether signed consents obtained.

- | | | |
|---|---------|---|
| 1 | Central | "NHS Central Register and Cancer Registry consent obtained" |
| 2 | None | "No signed consents" |

IF (Age = 16-18) THEN

NHSCanC

We would like your consent for us to send your name, address and date of birth to two National Health Service registers. These are the NHS Central Register and the NHS Cancer Registry.

Please read this form, it explains more about what is involved.

INTERVIEWER: GIVE THE RESPONDENT THE NHSCR CONSENT FORM AND ALLOW THEM TIME TO READ THE INFORMATION.

- | | | |
|---|-------|---------------------|
| 1 | Con | "Consent given" |
| 2 | NoCon | "Consent not given" |

IF (NHSCanC = Con) THEN

NHSSigC

Before I can pass on your details, I have to obtain written consent from you.

INTERVIEWER: Enter the respondent's serial number, check letter, and respondent number on the top of the consent form.

Serial: Check Letter: Person Number: 2

Ask the respondent to sign and date the form.

Give the **bottom** copy of the form to the respondent.

Code whether signed consents obtained.

- | | | |
|---|---------|---|
| 1 | Central | "NHS Central Register and Cancer Registry consent obtained" |
| 2 | None | "No signed consents" |

RECONTACT QUESTIONS

FOR ALL RESPONDENTS

IF (Age ≥ 19) THEN

ReConA

If at some future date the FSA wanted to conduct a further study from the results of this survey, would you be willing to be recontacted to help again?

INTERVIEWER: IF ASKED, THERE ARE NO **CURRENT** PLANS FOR FURTHER STUDIES, BUT THERE MAY BE IN THE FUTURE.

- 1 Yes
- 2 No

IF (ReconA = Yes) THEN

StabAdd

ASK ADULT

Just in case we have difficulty in getting in touch with you - could you give us the name and/or phone number of someone who knows you well?

INTERVIEWER: IF NECESSARY, PROMPT: Perhaps a relative or friend who is unlikely to move?

COLLECT **ADDRESS** DETAILS IF POSSIBLE AND RECORD IN THE FOLLOWING QUESTIONS.

- 1 Agreed "Agreed to provide stable contact"
- 2 Refused "Refused to provide stable contact"

StName

INTERVIEWER: Please enter the name of the contact person.

: STRING [30]

StRel

INTERVIEWER: Please enter the relationship to the respondent.

PROBE FULLY.

: STRING [30]

StTelNum

INTERVIEWER: Please enter the stable/contact address.

Telephone Number

Include standard code.

: STRING [20]

StAdd

Could we also take down an address for them?

- 1 Yes
- 2 No

StAdd1

INTERVIEWER: Please enter the stable/contact address.

Address line 1:

: STRING [30]

StAdd2

INTERVIEWER: Please enter the stable/contact address.

Address line 2:

: STRING [30]

StAdd3

INTERVIEWER: Please enter the stable/contact address.

Address line 3:

: STRING [30]

StAdd4

INTERVIEWER: Please enter the stable/contact address.

Address line 4:

: STRING [30]

StAdd5

INTERVIEWER: Please enter the stable/contact address.

Address line 5:

: STRING [30]

StAddPC

INTERVIEWER: Please enter the stable/contact address.

Postcode:

: STRING [8]

StInfo

INTERVIEWER: Please enter **any other information** about the stable/contact address.

: STRING [100]

ConSt

INTERVIEWER: Please read the stable contact below, and confirm whether correct.

Name : StName

Relationship : StRel

Address : StAdd1

Postcode : tAddPc

Telephone : StTelNum

Other info:

- | | | |
|---|---------|------------------------------|
| 1 | Correct | "Details correct" |
| 2 | NotCorr | "Details not correct" |

StabDisp

INTERVIEWER: Give the respondent the Stage 1 survey leaflet and read out:

If we needed to contact this person in order to find your new contact details, it would be helpful if they knew about the National Diet and Nutrition Survey.

Please could you pass this leaflet onto them, and let them know that you have given permission for us to contact them, and for them to pass your new contact details on to us.

PRESS <ENTER> TO CONTINUE

- | | |
|---|----------|
| 1 | Continue |
|---|----------|

ACTIGRAPH COLLECTION

FOR RESPONDENTS AGED 4-15 WHO AGREED TO WEAR THE ACTIGRAPH

AgIntro

Thank you for taking part in this stage of the study.

During this visit, I would like to collect the actigraph and ask you about (your / X's) experiences of wearing it.

PRESS <ENTER> TO CONTINUE

1 Continue

Wear

Firstly, can I check, did you/he/she wear it for all seven days?

- | | | |
|---|---------|-------------------------------------|
| 1 | Day7 | "Actigraph worn for 7 days" |
| 2 | Day56 | "Actigraph worn for 5 or 6 days" |
| 3 | Day34 | "Actigraph worn for 3 or 4 days" |
| 4 | Day2 | "Actigraph worn for 2 days or less" |
| 5 | NotWorn | "Actigraph not worn at all" |

IF (Wear <> Day7) THEN

NoWear

Why was/were you / X unable to wear the actigraph for all 7 days?

- | | | |
|---|--------|-------------------------|
| 1 | Lost | "Actigraph lost/stolen" |
| 2 | Broken | "Actigraph broken" |
| 3 | Ill | "Respondent ill" |
| 4 | Forgot | "Respondent forgot" |
| 5 | Other | "Other" |

IF (NoWear = other) THEN

NWearoth

INTERVIEWER: Record why respondent did not wear the actigraph for all 7 days.

: STRING [100]

IF (Wear = Day7) THEN

AGSDate

INTERVIEWER: Record from the actigraph record sheet the actual **start** date of wearing the actigraph.

INTERVIEWER: IF THE RESPONDENT DID NOT START WEARING THE ACTIGRAPH ON PROPOSED DATE, PLEASE RECORD HERE THE DATE THEY ACTUALLY STARTED WEARING THE ACTIGRAPH.

: DATATYPE

AGEDate

INTERVIEWER: Record from the actigraph record sheet the actual **end** date of wearing the actigraph.

INTERVIEWER: IF THE RESPONDENT DID NOT FINISH WEARING THE ACTIGRAPH ON PROPOSED DATE, PLEASE RECORD HERE THE DATE THEY ACTUALLY FINISHED WEARING THE ACTIGRAPH.

: DATATYPE

ASK ALL

Collect

INTERVIEWER: Did you collect the actigraph?

1 Yes

- 2 No
- 3 Missing

IF (Collect = No) THEN

YNoAct

INTERVIEWER: Why did you not collect the actigraph?

- 1 Lost "Actigraph lost/stolen"
- 2 Other "Other"

IF (YNOACT = Other) THEN

NOActOth

INTERVIEWER: Record why you didn't collect the actigraph.

: STRING [100]

AGDesp

INTERVIEWER: Prepare the despatch note for the respondent.

Wrap the despatch note around the actigraph and send back to Brentwood (**one** actigraph per jiffy bag).

Serial number:

Actigraph serial number:

PRESS <ENTER> TO CONTINUE

- 1 Continue

IF (Wear = (Day7..Day34) OR (NoWear = Lost..Broken) THEN

Voucher

Thank you for taking part in this stage of the study. Here is a promissory note saying that NatCen will send you £10 in High Street vouchers as a token of our appreciation.

INTERVIEWER: Hand over the pale violet £10 voucher promissory note.

PRESS <ENTER> TO CONTINUE

- 1 Continue

AddrChk

We have this name for you ...

Title:

Forename:

Surname:

Is this correct?

INTERVIEWER: THIS IS TO ENSURE THAT ANY LETTERS, REQUESTED BY RESPONDENTS (SUCH AS HIGH STREET VOUCHERS), ARE SENT TO THE CORRECT RESPONDENTS.

- 1 Yes
- 2 No

IF (AddrChk = No) THEN

Ttl

Firstly, what is your / X's title?

- 1 Mr
- 2 Mrs
- 3 Ms
- 4 Miss
- 5 Other "Other title"

TtlTxt

INTERVIEWER: Enter the other **title**

: STRING [15]

ForName

And your / X's **first name**?

: STRING [20]

SurName

And your / X's **surname**?

: STRING [20]

IF (Wear = Day2) THEN**NoVouch**

Thank you for taking part in this stage of the study.

INTERVIEWER: For your information, this respondent is not eligible for a voucher.

PRESS <ENTER> TO CONTINUE

1 Continue

CollEnd

INTERVIEWER: The actigraph collection for X has now been completed.

NOTE: You have to press <1> and <Enter> here, otherwise this section will not be counted as complete and you will not be paid the fee for this section.

1 Continue

DOUBLY LABELLED WATER (DLW)

(ALL RESPONDENTS IN REQUIRE AGE/SEX CELLS WITH VALID HEIGHT & WEIGHT MEASUREMENTS)

DispDLW

INTERVIEWER: This is the point where a decision is made about whether respondents are eligible for the DLW follow ups. To be eligible for DLW we must have reliable height and weight measurements and still need people in the right age and sex groups to fill our quotas (Quota look up file last updated on **(Date)**).

SUMMARY OF CAPI MODULES COMPLETED AND DLW STATUS

Press 1 and <ENTER> to continue OR

USE <Ctrl + Enter> IF YOU WANT TO SELECT ONE OF THE OUTSTANDING CAPI MODULES BEFORE A DECISION ABOUT DLW IS MADE.

- | | | |
|---|--------|---|
| 1 | Cont | "Press 1 and ENTER to decide eligibility now" |
| 2 | Code88 | "Do not use unless agreed by office" |

P1SetDLW

INTERVIEWER: YOU SHOULD ONLY HAVE ENTERED '88' AT THE PREVIOUS QUESTION BECAUSE ADVISED TO DO THIS BY THE OFFICE OR A SUPERVISOR.

Do you want to make this person eligible to take part in the DLW follow up?

(This question allows you to choose whether someone is to be asked to take part in the DLW study or not. This is normally done automatically but on a few occasions it is necessary to override the automatic selection.)

- | | | |
|---|-----|-----------------------------------|
| 1 | Yes | "Make eligible for the DLW study" |
| 2 | No | "Do not make eligible" |

P2SetDLW

INTERVIEWER: YOU SHOULD ONLY HAVE ENTERED '88' AT THE PREVIOUS QUESTION BECAUSE ADVISED TO DO THIS BY THE OFFICE OR A SUPERVISOR.

Do you want to make this person eligible to take part in the DLW follow up?

(This question allows you to choose whether someone is to be asked to take part in the DLW study or not. This is normally done automatically but on a few occasions it is necessary to override the automatic selection.)

- | | | |
|---|-----|-----------------------------------|
| 1 | Yes | "Make eligible for the DLW study" |
| 2 | No | "Do not make eligible" |

NeedFUp

INTERVIEWER: THE FOLLOWING RESPONDENTS ARE CURRENTLY ELIGIBLE FOR THE DLW FOLLOW UP STUDY:

(Names of respondents)

THE DLW FOLLOW-UP STUDY TO ALL ELIGIBLE RESPONDENTS AND HAND THEM THE APPROPRIATE LEAFLETS. ALLOW THEM TIME TO READ THE LEAFLETS.

(INTERVIEWER: Note that eligibilty may change when updates of the numbers needed are received from the office. Eligibility at the time when DLW first introduced is what matters so don't worry if it looks different if you happen to return to this section later.

PRESS <ENTER> TO CONTINUE

- | | |
|---|----------|
| 1 | Continue |
|---|----------|

P1DLWAggr

INTERVIEWER: IS (**respondent one's name**) WILLING TO TAKE PART IN THE DLW FOLLOW-UP?

IF 'YES' THEN RESPONDENT MUST SIGN THE (Colour1) DLW CONSENT FORM WHEN YOU RETURN TO ADMINISTER THE DOSE.

YOU WILL NEED TO LEAVE THE BOTTOM COPY WITH THE RESPONDENT AND **KEEP THE TOP COPY** TO SEND TO BRENTWOOD.

- 1 Yes
- 2 No
- 3 NotAsked "Interviewer code only: Did not ask respondent if they would take part"

P2DLWAg

INTERVIEWER: IS (**respondent two's name**) WILLING TO TAKE PART IN THE DLW FOLLOW-UP?

IF 'YES' THEN RESPONDENT MUST SIGN THE (Colour2) DLW CONSENT FORM WHEN YOU RETURN TO ADMINISTER THE DOSE.

YOU WILL NEED TO LEAVE THE BOTTOM COPY WITH THE RESPONDENT AND **KEEP THE TOP COPY** TO SEND TO BRENTWOOD.

- 1 Yes
- 2 No
- 3 NotAsked "Interviewer code only: Did not ask respondent if they would take part"

IF (P1DLWAg = NotAsked) THEN

P1DLWNAY

INTERVIEWER: PLEASE RECORD HERE WHY YOU DID NOT ASK THE RESPONDENT TO TAKE PART IN THE DLW SUBSTUDY.

PLEASE NOTE THAT UNLESS THIS RESPONDENT TAKING PART IN DLW WILL TAKE YOU OVER YOUR DEADLINE, YOU **MUST** ASK THE RESPONDENT IF THEY WILL TAKE PART IN THE DLW SUBSTUDY. GO BACK TO PREVIOUS QUESTION AND ASK RESPONDENT IF NECESSARY.

: STRING [60]

IF (P2DLWAg = NotAsked) THEN

P2DLWNAY

INTERVIEWER: PLEASE RECORD HERE WHY YOU DID NOT ASK THE RESPONDENT TO TAKE PART IN THE DLW SUBSTUDY.

PLEASE NOTE THAT UNLESS THIS RESPONDENT TAKING PART IN DLW WILL TAKE YOU OVER YOUR DEADLINE, YOU **MUST** ASK THE RESPONDENT IF THEY WILL TAKE PART IN THE DLW SUBSTUDY. GO BACK TO PREVIOUS QUESTION AND ASK RESPONDENT IF NECESSARY.

: STRING [60]

IF (P1DLWAg = No) THEN

P1DLWRef

INTERVIEWER: PLEASE RECORD REASON WHY RESPONDENT REFUSED TO TAKE PART IN DLW SUBSTUDY.

: STRING [60]

IF (P2DLWAg = No) THEN

P2DLWRef

INTERVIEWER: PLEASE RECORD REASON WHY RESPONDENT REFUSED TO TAKE PART IN DLW SUBSTUDY.

: STRING [60]

FUpReview

INTERVIEWER: MAKE A PROVISIONAL APPOINTMENT TO RETURN FOR THE FOLLOW UP.

REMEMBER TO LEAVE AT LEAST 3 WORKING DAYS FOR DELIVERY OF DLW DOSES. YOU WILL NEED TO CALL HNR AS SOON AS POSSIBLE, TO CONFIRM THAT THE RESPONDENT(S) (IS/ ARE) STILL NEEDED FOR THE DLW FOLLOW-UP.

When you call HNR they will need to be given the information displayed at question

HNRInfo in the **DLW_Admin parallel** block.

USE THE DLW_Admin PARALLEL BLOCK TO RECORD THE OUTCOME OF YOUR CALL TO HNR AND TO RECORD PROGRESS WITH THE DLW FOLLOW UP.

PRESS <ENTER> TO CONTINUE

1 Continue

DLW Admin

DLWVis

INTERVIEWER: DID YOU VISIT (**Respondent's Name**) TO ADMINISTER THE DLW DOSE?

1 Yes

2 No

IF (DLWVis = Yes) THEN

DLWDose

INTERVIEWER: HAS (**Respondent's Name**) TAKEN THE DLW DOSE?

IF NOT TAKEN DOSE - EXPLAIN WHY AT NEXT QUESTION.

IF BOTTLE NOT OPENED, CALL HNR TO ARRANGE FOR RETURN OF DLW DOSING KIT.

1 Yes "Yes, respondent drank DLW dose"

2 No "No, respondent did not drink DLW dose"

IF (DLWDose = NO) THEN

DLWNDose

INTERVIEWER: PLEASE EXPLAIN WHY (**Respondent's Name**) DID NOT DRINK THE DLW DOSE

: String [40]

IF (DLWVis = Yes) THEN

DLWChk

INTERVIEWER: RECORD WHETHER MIDWEEK TELEPHONE CHECK HAS BEEN DONE.

1 Yes

2 No

IF (DLWChk = Yes) THEN

DLWChKY

INTERVIEWER: RECORD DATE OF MIDWEEK CHECK

: DATATYPE

DLWFin

INTERVIEWER: RECORD WHETHER CHECKED AND COLLECTED DLW SAMPLES.

1 Yes

2 No

IF (DLWFin = No) THEN

DLWFinN

INTERVIEWER: RECORD WHY SAMPLES NOT CHECKED AND COLLECTED.

: String [40]

IF (DLWFin = Yes) THEN

DLWFinY

INTERVIEWER: RECORD DATE SAMPLES CHECKED AND COLLECTED.

: DATETYPE

DLWPost

INTERVIEWER: RECORD WHETHER DLW SAMPLES HAVE BEEN SENT BACK TO HNR.
REMEMBER TO SEAL SAMPLES SECURELY, FOLLOWING PROTOCOL.

- 1 Yes
- 2 No

IF (DLWPost = Yes) THEN

DLWPostY

INTERVIEWER: RECORD DATE SAMPLES SENT BACK TO HNR
: DATETYPE

DLWProm

INTERVIEWER: DID YOU GIVE THE RESPONDENT A PROMISSORY NOTE SAYING
THAT NatCen WILL SEND THEM £30 IN HIGH STREET VOUCHERS AS A TOKEN OF
OUR APPRECIATION?
REMEMBER TO SEND THE TOP COPY TO BRENTWOOD.

- 1 PROMISSORY NOTE GIVEN
- 2 PROMISSORY NOTE NOT GIVEN

DLWCon

INTERVIEWER: DID YOU COLLECT THE BLUE DLW CONSENT FORM, SIGNED BY
THE RESPONDENT?
REMEMBER TO SEND THE TOP COPY TO BRENTWOOD

- 1 Yes
- 2 No

NURSE INTRODUCTION

ALL RESPONDENTS

ASK ALL

NursInt

We would like you to help us with the second stage of this study. This is a visit by a qualified nurse to collect some medical information and, if you agree, carry out some measurements. The nurse would like to come round in a couple of months and explain some more about what is involved and answer any questions you have. May I get him/her to contact you in a couple of months?

INTERVIEWER: REMEMBER TO GIVE THE RESPONDENT THE STAGE 2 LEAFLET, APPROPRIATE FOR THEIR AGE.

INTERVIEWER: IF ASKED FOR DETAILS: For example, the nurse, with your agreement, will take some general measurements such as blood pressure, ask about prescribed medications and so on. The information the nurse collects is information we can not get from any other source.

INTERVIEWER: IF ASKED: The nurse will contact the respondent within 2-4 months.

INTERVIEWER: **Always** mention the nurse by name (if known).

INTERVIEWER: If respondent is **unsure** then code '3 Unsure' here. The nurse will still contact the respondent but will be aware that the respondent was unsure about the nurse visit.

Press <F9> for help explaining about the nurse visit.

- | | | |
|---|--------|------------------------------|
| 1 | Agree | "Agreed nurse could contact" |
| 2 | Refuse | "Refused nurse contact" |
| 3 | Unsure | "Unsure" |

NurseRef

RECORD REASON WHY RESPONDENT REFUSED NURSE CONTACT.

- | | | |
|---|---------|---|
| 0 | Avail | Own doctor already has information" |
| 1 | Time | "Given enough time already to this survey/expecting too much" |
| 2 | Busy | "Too busy, cannot spare the time (if Code 1 does not apply)" |
| 3 | Enough | "Had enough of medical tests/medical profession" |
| 4 | Worried | "Worried about what nurse may find out/'might tempt fate" |
| 5 | Scared | "Scared of medical profession/ particular medical procedures (e.g. blood sample)" |
| 6 | NoReas | "Not interested/Can't be bothered/No particular reason" |
| 7 | Other | "Other reason (specify)" |

NsRefO

INTERVIEWER: PLEASE SPECIFY OTHER REASON FOR REFUSAL.

: STRING [30]

NATIONAL DIET AND NUTRITION SURVEY

PROMPT CARDS

CARD A

- | | |
|---|----------|
| 1 | English |
| 2 | Scottish |
| 3 | Welsh |
| 4 | Irish |
| 5 | British |
| 6 | Other |

CARD B

- 1 White – British
- 2 Any other white background
- 3 Mixed – White and Black Caribbean
- 4 Mixed – White and Black African
- 5 Mixed – White and Asian
- 6 Any other mixed background
- 7 Asian or Asian British – Indian
- 8 Asian or Asian British – Pakistani
- 9 Asian or Asian British – Bangladeshi
- 10 Any other Asian/Asian British background
- 11 Black or Black British – Caribbean
- 12 Black or Black British – African
- 13 Any other Black/Black British background
- 14 Chinese
- 15 Any other

CARD C

- | | |
|----|----------------------------|
| 1 | Husband/Wife |
| 2 | Civil partner |
| 3 | Partner/Cohabitee |
| 4 | Natural son/daughter |
| 5 | Adopted son/daughter |
| 6 | Foster child |
| 7 | Stepson/stepdaughter |
| 8 | Son-in-law/daughter-in-law |
| 9 | Natural parent |
| 10 | Adoptive parent |
| 11 | Foster parent |
| 12 | Step-parent |
| 13 | Parent-in-law |
| 14 | Natural brother/sister |
| 15 | Half-brother/sister |
| 16 | Step-brother/sister |
| 17 | Adopted brother/sister |
| 18 | Foster brother/sister |
| 19 | Brother/sister-in-law |
| 20 | Grand-child |
| 21 | Grand-parent |
| 22 | Other relative |
| 23 | Other non-relative |

CARD D

- 1 Own outright
- 2 Buying it with the help of a mortgage or loan
- 3 Pay part rent and part mortgage (shared ownership)
- 4 Rent it
- 5 Live here rent-free (including rent-free in
relative's/friend's property)
- 6 Squatting

CARD E

- 1 Not enough cupboard space
- 2 Fridge is too small (or no fridge available)
- 3 Freezer is too small (or no freezer available)
- 4 Damp / mouldy
- 5 Infested with rodents / insects
- 6 Not secure
- 7 Other

CARD F

- 1 Large supermarket, including home delivery from supermarket
- 2 Mini supermarket, e.g. Tesco Metro
- 3 Local/Corner shop (including newsagents)
- 4 Garage forecourt
- 5 Independent greengrocer
- 6 Independent butcher
- 7 Independent baker
- 8 Independent fishmonger
- 9 Market (including stalls or farmer's market)
- 10 Farm
- 11 Home delivery (including vegetable boxes – not from a supermarket)
- 12 Other

CARD G

- 1 More than once a day
- 2 Once a day
- 3 Two or three times a week
- 4 Weekly
- 5 Two or three times a month
- 6 Monthly
- 7 Every two months
- 8 Less often than every two months

CARD H

- 1 Fresh fruit or fruit juice
- 2 Dried fruit
- 3 Nuts
- 4 Potatoes
- 5 Vegetables or salad (Including celery), dried beans or lentils
- 6 Breakfast cereals
- 7 Other cereal products, e.g. bread, rice and pasta
- 8 Meat (including chicken)
- 9 Eggs
- 10 Milk
- 11 Other dairy products
- 12 Crisps or savoury snacks
- 13 Biscuits and cakes (including organic cereal bars)
- 14 Confectionery
- 15 Baby / weaning foods
- 16 Other organic products
- 17 None of these

CARD I

- 1 Freshly made from old potatoes
- 2 Freshly made from new potatoes
- 3 Frozen, fried
- 4 Oven ready chips
- 5 Microwave chips (e.g. McCain Microchips)
- 6 Make chips another way
- 7 Do not prepare chips

CARD J

- 1 Flour (Self-raising / plain / bread)
- 2 Sugar (Caster / Granulated / Brown)
- 3 Cornflour
- 4 Dried pasta (Spaghetti, Noodles)
- 5 Rice (Long grain, Basmati)
- 6 Tomatoes in tins or cartons
- 7 Tomato paste / puree
- 8 Olive oil or other vegetable oil
- 9 Vinegar (Wine, Balsamic)
- 10 Dried or tinned pulses (Canellini or Borlotti beans,
Chickpeas etc.)
- 11 Baked beans
- 12 Dried herbs, spices or curry powder
- 13 Stock cubes
- 14 Soy sauce
- 15 Tinned fish (Sardines, Anchovies)
- 16 None of these

CARD K

- 1 Working Families Tax Credit (now replaced with
Working Tax Credit and Child Tax Credit)
- 2 Income Support
- 3 Income-based Jobseekers Allowance
- 4 None of these

CARD L

A	£15,000 - £19,999
B	£30,000 - £34,999
C	Under £5,000
D	£45,000 - £49,999
E	£25,000 - £29,999
F	£5,000 - £9,999
G	£20,000 - £24,999
H	£10,000 - £14,999
I	£75,000 - £99,999
J	£35,000 - £39,999
K	£50,000 - £74,999
L	£100,000 or more
M	£40,000 - £44,999

CARD M

- 1 Every day or nearly every day
- 2 Two or three times a week
- 3 Once a week
- 4 Two or three times a month
- 5 Once a month or less

CARD N

- 1 Five or more times per week
- 2 Three to four times per week
- 3 One to two times per week
- 4 One to two times per month
- 5 Rarely or never

CARD O

- 1 Never
- 2 Less than once per month
- 3 On one to three days per month
- 4 On one to two days per week
- 5 On three to four days per week
- 6 On five to six days per week
- 7 Every day in the last month

CARD P

- 1 Sprats
- 2 Seeds as a snack (e.g. sunflower seeds, pumpkin seeds, sesame seeds, melon seeds (also known as egusi))
- 3 Cassava chips/Cassava crisps
- 4 Seaweed (includes hijiki, wakame)
- 5 Sushi (includes purchased sushi)
- 6 Papaya (includes fresh and canned)
- 7 Dried papaya
- 8 Game (includes venison, rabbit, pheasant, partridge, wood pigeon, hare or wild boar)
- 9 Non cow's milk (includes rice milk, soya milk, sheep's milk or goat's milk)
- 10 Fish eggs (e.g. caviar, cod's roe)
- 11 Smoked sausages
- 12 Goji berries
- 13 Fish liver (not oil)
- 14 Dark chocolate i.e. 50% or higher cocoa solids
- 15 Okra

CARD Q

- 1 Less than once per month
- 2 On one to three days per month
- 3 On one to two days per week
- 4 On three or more days per week

CARD R

- | | |
|---|-------------|
| 1 | Pheasant |
| 2 | Partridge |
| 3 | Quail |
| 4 | Wood pigeon |
| 5 | Rabbit |
| 6 | Venison |
| 7 | Hare |
| 8 | Grouse |
| 9 | Other |

CARD S

- 1 Rice milk
- 2 Soya milk
- 3 Sheep's milk
- 4 Goat's milk
- 5 Other

CARD T

- 1 Kabanos
- 2 Kielbasa
- 3 Bratwurst
- 4 Cervelat or Summer Sausage
- 5 Andouille
- 6 Knackwurst
- 7 Linguica
- 8 Chorizo
- 9 Mortadella
- 10 Hot Dogs
- 11 Bologna
- 12 Other

CARD U

- 1 Meat or meat products (not including poultry)
- 2 Chicken or other poultry and dishes containing them
- 3 Fish or seafood and fish and seafood dishes
- 4 Eggs
- 5 Milk (including yoghurt)
- 6 Cheese
- 7 Salad vegetables (e.g. lettuce, cucumber, tomato)
- 8 Cooked green vegetables (e.g. spinach, cabbage, peas, broccoli)
- 9 Root vegetables (e.g. carrots, parsnips)
- 10 Fresh fruit
- 11 Nuts
- 12 Offal
- 13 Other

CARD V

- 1 Orange
- 2 Lemon
- 3 Kiwi fruit
- 4 Grapefruit
- 5 Mango
- 6 Banana
- 7 Lime
- 8 Pineapple
- 9 Soft citrus fruit (satsumas / mandarins / clementines)
- 10 Melon

CARD W

- 1 Every day / most days
- 2 Once or twice a week
- 3 Once or twice a month
- 4 Less than once a month

CARD X

- 1 All of the peel or skin
- 2 Most of the peel or skin
- 3 Around half of the peel or skin
- 4 Around a quarter of the peel or skin
- 5 Less than a quarter of the peel or skin

CARD Y

- 1 No difficulty
- 2 A little difficulty
- 3 A fair amount of difficulty
- 4 A great amount of difficulty

CARD Z

- 1 Could eat easily
- 2 Could eat with some difficulty
- 3 Could not eat at all

CARD AA

- 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

CARD BB

- 1 Normal strength beer / lager / cider / shandy
- 2 Strong beer / lager / cider
- 3 Spirits or liqueurs
- 4 Sherry or martini
- 5 Wine
- 6 Alcopops / pre-mixed alcoholic drink
- 7 Other alcoholic drinks
- 8 Low alcohol drinks only

CARD CC

1	Higher degree, e.g. MSc, MA, MBA, PGCE, PhD
2	Level 5 NVQ / SVQ
3	BTEC Advanced Professional Diploma/Certificate
4	First degree, e.g. BSc, BA, BEd, MA at first degree level
5	Level 4 NVQ / SVQ
6	HNC / HND
7	BTEC Higher National or Professional Diploma/Certificate
8	RSA or OCR Higher
9	GCE 'A'-level
10	A2
11	AVCE
12	SCE Advanced Higher Grades
13	SCE Higher Grades (A-C)
14	CSYS
15	Key Skills Level 3
16	Level 3 NVQ / SVQ
17	ONC / OND
18	BTEC Advanced or National Diploma/Certificate
19	RSA or OCR Advanced Diploma
20	City & Guilds Advanced Craft / Part 3
21	Advanced GNVQ; Vocational A Level
22	Advanced Modern Apprenticeship
23	GCSE grade A*-C

see over for more codes

24	GCE 'O'-level passes
25	CSE grade 1
26	SCE O Grades (A-C)
27	SCE Standard Grades (1-3)
28	School Certificate / Matriculation
29	Key Skills Level 2
30	Level 2 NVQ / SVQ
31	BTEC Intermediate or First Diploma/Certificate
32	RSA Diploma
33	City & Guilds Craft / Part 2
34	Intermediate GNVQ
35	Foundation Modern Apprenticeship
36	GCSE grade D-G
37	CSE grade 2-5
38	SCE O Grades (D-E)
39	SCE Standard Grades (4-7)
40	SCOTVEC National Certificate Modules
41	Key Skills Level 1
42	Level 1 NVQ / SVQ
43	BTEC Foundation or Introductory Diploma/Certificate
44	RSA Stage 1-3
45	City & Guilds Part 1
46	Foundation GNVQ; Foundation VCE
47	Other qualifications

Supplement examples

- Multivitamins with/without Iron or other Minerals
- Vitamin C
- Vitamin B complex
- Folic Acid
- Selenium
- Calcium + Vitamin D
- Cod liver oil
- Omega 3 fish oil
- Flaxseed oil
- Oil of Evening Primrose
- Menopause formulas
- Echinacea
- L – Arginine capsules
- Glucosamine with/without chondroitin
- Garlic
- Ginkgo Biloba
- Healthy Start women's vitamin tablets

CARD EE

- | | |
|---|----------------------------|
| 1 | Less than once a month |
| 2 | One to three times a month |
| 3 | Once a week |
| 4 | Two to four times a week |
| 5 | Once a day |
| 6 | Two to three times a day |
| 7 | Four or more times a day |

CARD FF

- 1 A nursery school
- 2 A primary school (including infant school, junior school)
- 3 A secondary school (including sixth form in a school) / High school
- 4 A middle school
- 5 A sixth form college / Higher Education college
- 6 Other
- 7 Home-educated

CARD GG

- 1 Cooked school meal
- 2 Cold school meal (including sandwiches, salads)
- 3 Packed lunch (from home)
- 4 Buy lunch from shop / café
- 5 Go home
- 6 Do not eat lunch

CARD HH

- 1 Free school meal (at lunchtime)
- 2 Reduced price or subsidised school meal (at lunchtime)
- 3 Free school milk
- 4 Subsidised school milk
- 5 Free fruit
- 6 Free food BEFORE school
- 7 Free food AFTER school
- 8 Other

CARD II

Boys and Girls:

- 1 Trousers
- 2 Shorts
- 3 Short sleeved shirt or long sleeves rolled up
- 4 Long sleeved shirt / jumper / blazer

Girls only:

- 5 Long skirt (below the knee)
- 6 Short skirt (above the knee)
- 7 Tights