12. QUESTION MODULES

The survey questions used in the *New South Wales Adult Health Survey 2003* are available as individual question modules. This includes modules on alcohol, asthma, community health centres, demographics, diabetes, difficulties in getting health care, emergency departments, environmental health, food handling, hospitals, immunisation, incontinence, injury prevention (falls), mental health, nutrition, oral health, overweight or obesity, physical activity, public dental services, self-rated health, smoking, and social capital.

Alcohol question module

Now I would like to ask you some questions about alcohol.

- Q1. How often do you usually drink alcohol? [PROMPT IF NECESSARY]
 - 1. ___ Number of days
 - 2. Less than once per week
 - 3. I don't drink alcohol
 - →END OF MODULE
 - X Don't know
 - R Refused
- Q2. Alcoholic drinks are measured in terms of a 'standard drink'. A standard drink is equal to one middy of full-strength beer, one schooner of light beer, one small glass of wine, or one pub-sized nip of spirits.

On a day when you drink alcohol, how many standard drinks do you usually have? [PROMPT IF NECESSARY]

- 1. Number of drinks
- X Don't know
- R Refused
- Q3. In the past four weeks have you had more than [four if male–two if female] drinks in a day? [PROMPT IF NECESSARY]
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE
 - R Refused \rightarrow END OF MODULE
- Q4. In the past four weeks how often have you had [11 or more if male–seven or more if female] drinks in a day?
 - 1. Number of times
 - 2. Not at all
 - X Don't know
 - R Refused

- Q5. In the past four weeks how often have you had [7–10 if male or 5–6 if female] drinks in a day?
 - 1. Number of times
 - 2. Not at all
 - X Don't know
 - R Refused

Asthma question module

The next few questions are about asthma.

- Q1. Have you ever been told by a doctor or at a hospital that you have asthma?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE
 - R Refused \rightarrow END OF MODULE
- Q2. Have you had symptoms of asthma or taken treatment for asthma in the last 12 months?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE
 - R Refused \rightarrow END OF MODULE
- Q3. Have you had symptoms of asthma or taken treatment for asthma in the last four weeks?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE
 - R Refused \rightarrow END OF MODULE
- Q4. Do you use reliever medication (puffer or nebulizer) such as Ventolin, Respolin, Asmol, Airomir, or Bricanyl?
 - 1. Yes
 - 2. No \rightarrow Q6
 - $X \quad Don't know \rightarrow Q6$
 - R Refused \rightarrow Q6
- Q5. In the last four weeks how often have you used reliever medication? [READ OUT]
 - 1. Every day
 - 2. Most days
 - 3. About half the days
 - 4. Less than half the days
 - 5. Not at all
 - X Don't know
 - R Refused

- Q6. Do you use Serevent or Foradile? (PROMPT: These medications are inhaled and their effects last for 12 hours)
 - 1. Yes
 - 2. No \rightarrow Q8
 - X Don't know \rightarrow Q8
 - R Refused \rightarrow Q8
- Q7. In the last four weeks, how often have you used Serevent or Foradile?(READ OPTIONS 1–5: SINGLE RESPONSE)
 - 1. Every day
 - 2. Most days
 - 3. About half the days
 - 4. Less than half the days
 - 5. Not at all
 - X Don't know
 - R Refused
- Q8. Do you use preventer medication such as Becotide, Aldecin, Pulmicort, Flixotide, Intal, Intalforte, Cromogen or Tilade?
 - 1. Yes
 - 2. No \rightarrow Q10
 - X Don't know \rightarrow Q10
 - R Refused \rightarrow Q10
- Q9. In the last four weeks how often have you used preventer medication?[READ OUT]
 - 1. Every day
 - 2. Most days
 - 3. About half the days
 - 4. Less than half the days
 - 5. Not at all
 - X Don't know
 - R Refused
- Q10. Do you have a written asthma management plan from your doctor on how to treat your asthma?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused
- Q11. Have you visited your GP or local doctor for an attack of asthma in the last four weeks?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused
- Q12. Have you visited a hospital emergency department for an attack of asthma in the last four weeks?

- 1. Yes
- 2. No
- X Don't know
- R Refused
- Q13. During the past four weeks, did your asthma interfere with your ability to manage your day to day activities?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused
- Q14. Did it interfere with these activities [READ OUT]:
 - 1. A little bit
 - 2. Moderately
 - 3. Quite a lot
 - 4. Extremely
 - X Don't know
 - R Refused

Community health centre question module

The next questions are about your use of health services.

- Q1. In the last 12 months, have you attended a government run community health centre?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - $X \longrightarrow Don't know \rightarrow END OF MODULE$
 - R Refused \rightarrow END OF MODULE
- Q2. Overall, what do you think of the care you received at the community health centre? [READ OUT]
 - 1. Excellent \rightarrow Q4
 - 2. Very good \rightarrow Q4
 - 3. $Good \rightarrow Q4$
 - 4. Fair
 - 5. Poor
 - $X \quad Don't know \rightarrow Q4$
 - R Refused \rightarrow Q4
- Q3. Could you briefly describe why you rated the care you received as fair–poor?
 - 1. Description____
- Q4. Did someone at this community health centre tell you how to cope with your condition when you returned home?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - 3. Not applicable \rightarrow END OF MODULE
 - $X Don't know \rightarrow END OF MODULE$
 - R Refused \rightarrow END OF MODULE

Q5. How adequate was this information once you 5. Stepmother went home? [READ OUT] 6. Stepfather 1. Very adequate 7. Grandparents 2. Adequate 8. Sons-daughters 3. Inadequate 9. Brothers and sisters 4. Completely inadequate 10. Stepbrothers-stepsisters X Don't know Other relatives R Refused Non-family members 12. 13. Other [SPECIFY] X Don't know R Refused **Demographics question module** What is your current formal marital status? O9. Q1. [RECORDLANGUAGE SURVEY RECORDED IN] 1. Married 1. **English** 2. Widowed 2. Arabic 3. Separated but not divorced Chinese 3. 4. Divorced 4. Greek Never married 5. 5. Italian X Don't know 6. Vietnamese R Refused Q2. A letter was sent to your household recently about this study. Do you remember receiving In which country were you born? O10. this letter? 1. Australia 1. Yes 2. Other country [SPECIFY] 2. $No \rightarrow Q6$ X Don't know X Don't know \rightarrow Q6 R Refused Refused → Q6 Q11. When did you first arrive in Australia to live Q3. How many people, including yourself, live in here for one year or more? your household? 1. Year 1. ___ Number of people X Don't know How many children under six years of age live Q4. R Refused in this household? Q12. Do you usually speak a language other than 1. ___ Number of people English at home? Q5. How many people aged 65 years old or over, 1. Yes live in this household? 2. No _ Number of people X Don't know Q6. Could you please tell me how old you are R Refused today? 1. Age in years O13. What langauge do you usually speak at home? X Don't know 1. _Language [SPECIFY] R Refused X Don't know Are you male or female? [ONLY ASK IF R Refused O7. **UNSURE** O14. What is the highest level of primary or high 1. Male school that you have completed? [PROMPT IF Female **NECESSARY**] Besides yourself, who else lives in your Q8. Never attended school 1. household? [MULTIPLE RESPONSE] 2. Currently still at school 1. No-one-lives alone 3. Year 8 or below 2. Mother 4. Year 9 or equivalent 3. Father 5. Year 10 or equivalent 4. Respondent's partner Year 11 or equivalent

7. Year 12 or equivalent O20. In the last week, how many hours did you work (Matriculation–Leaving) in all jobs? X Don't know Number of hours[SPECIFY] 1 R Refused Q21. How do you usually get to work? [MULTIPLE **RESPONSE**1 What is the level of the highest qualification 1. Train you have completed? 2. Rus Completed School Certificate-3. Ferry Intermediate-Year 10-4th Form 4. Tram (including light rail) 2. Completed HSC-Leaving-Year 12-5. 6th Form 6. Car-as driver 3. TAFE Certificate or Diploma 7. Car—as passenger University, CAE or some other 4. 8. Truck tertiary institute degree or higher 9. Motorbike or motor scooter 5. Other 10. Bicycle [SPECIFY] Walk only 11. Completed Primary School 6. Work at home 12. 7. Completed Years 7–9 13. Other X Don't know X Don't know Refused R R Refused In the last week, which of the following best O22. Do you currently recieve a government describes your employment status? pension, allowance, or benefit? [READ OUT] Yes 1 1. Worked for payment or profit 2. No Worked for payment or profit, but 2. X Don't know absent on paid leave, holidays, on R Refused strike or stood down Q23. I would like to ask you some questions about 3. Unpaid work in a family business your housing arrangments. Are you: [READ 4. Other unpaid work OUT 5. Other unpaid work 1. Paying rent or board 6. Did not have a job 2. Paying off this dwelling X Don't know 3. Outright owner-fully owned R Refused 4. Living rent free 5. Purchasing under a rent-buy scheme Were you actively looking for work in the last Occupying your dwelling under a 6. week? life tenure scheme 1. Yes—looked for full-time work 7. Other [SPECIFY] 2. Yes—looked for part-time work X Don't know 3. No-did not look for work Refused X Don't know Q24. What type of accommodation do you live in? R Refused [PROMPT IF NECESSARY] In the main job held in the last week, were 1. Separate house you: 2. Semi-detached-townhouse-1. A wage or salary earner terraced house-villa Conducting own business with 2. 3. Unit, flat or apartment–granny flat employees 4. Caravan, cabin, houseboat

Q15.

O16.

O18.

Q19.

3.

4.

X

R

employees

Don't know

Refused

Conducting own business without

A helper not recieving wages

Vol. 15 No. S-4 105

5.

6.

Improvised home, tent, sleepout

(for example: hotel, retirement

Other [SPECIFY]

village)

House–flat attached to a shop–office

X Don't know Q1. Have you ever been told by a doctor or at a hospital that you have diabetes? R Refused Yes [If female adult \rightarrow Q3; If child Q25. I would now like to ask you about your or male \rightarrow Q5] household's income. What is your annual 2. household income before tax? Would it be: 3. Only during pregnancy \rightarrow END OF 1. Less than \$10,000 2. \$10,000-\$20,000 Don't know X 3. \$20,000-\$40,000 R Refused 4. \$40,000-\$60,000 Have you ever been told by a doctor or at a Q2. 5. \$60,000-\$80,000 hospital that you have high sugar levels in 6. More than \$80,000 your blood or urine? X Don't know 1. Yes—[If female adult \rightarrow Q3; If child R Refused or male \rightarrow Q6] Q26. How long have you lived in your local area? 2. No → END OF MODULE 1. __ years 3. Borderline—If male → Q6 X Don't know 4. Only during pregnancy → END OF R Refused **MODULE** O27. What is the name of your Local Council or X Don't know → END OF MODULE Shire? Refused → END OF MODULE R 1. Q3. [If female then ask] Were you pregnant when X Don't know you were first told you had diabetes-high Refused R blood sugar? 1. Yes Q27. What is the name of the town or suburb where you live? 2. $No \rightarrow Q5$ X Don't know \rightarrow Q5 1. X R Refused \rightarrow Q5 Don't know R Refused O4. [If female then ask] Have you ever had diabetes-high blood sugar apart from when Q28. Could you tell me your postcode? you were pregnant? 1. 1. X Don't know 2. No → END OF MODULE R Refused X Don't know Q29. Do you have more than one telephone number R Refused in your household? Q5. What type of diabetes were you told you had? 1. Yes 1. Type 1 2. No 2. Type 2 X Don't know 3. Gestational R Refused Other [SPECIFY] 4. How many residential telephone numbers do Q30. X Don't know you have? Do not include mobile phone Refused R numbers, dedicated FAX numbers or modems. Q6. How old were you when you were first told 1. number of phone numbers you had diabetes-high blood sugar? [If X Don't know ongoing diabetes since pregnancy, then age of R Refused diagnosis during pregnancy] 1. ___ years X Don't know **Diabetes question module** Refused The next few questions are about diabetes and high blood Q7. What are you doing now to manage your sugar. Diabetes is a disease where there is too much sugar diabetes-high blood sugar? [MULTIPLE in the blood. **RESPONSE**]

- 1. Having insulin injections
- 2. On tablets for diabetes or high blood
- Following a special diet [for 3. example: reducing sugar and or fat in the diet]
- 4. Losing weight
- 5. Exercising most days
- 6. Doing anything else to manage your diabetes-high blood sugar
- 7. Other [SPECIFY]
- 8. Not doing anything to control diabetes
- X Don't know
- R Refused
- Q8. Have you been given a blue and orange card about managing your diabetes?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused

- 1. Yes
- 2. No → END OF MODULE
- X Don't know → END OF MODULE
- Refused → END OF MODULE
- Q2. Which hospital's emergency department did you last attend?
 - Name of hospital
- Q3. Overall, what do you think of the care you received at this emergency department? [READ OUT]
 - 1. Excellent \rightarrow END OF MODULE
 - 2. Very good \rightarrow END OF MODULE
 - 3. Good → END OF MODULE
 - 4. Fair
 - 5. Poor
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- O4. Could you briefly describe why you rated the care you received as fair-poor?
 - Reasons

Difficulties getting health care question module

- Q1. Do you have any difficulties getting health care when you need it?
 - 1. $Yes \rightarrow O2$
 - $No \rightarrow END OF MODULE$ 2.
 - 3. Don't need health care \rightarrow END OF **MODULE**
 - Don't know → END OF MODULE X
 - R Refused → END OF MODULE
- Please describe the difficulties you have. Q2.
 - Description

 - \rightarrow END OF MODULE
- O3. Do you have any comments on the health services in your local area?
 - 1. Comments

Environmental health question module

Now I have some questions about water usage.

- O1. What is your normal source of drinking water?
 - Public water supply
 - 2. Bottled water
 - Rainwater 3.
 - 4. Private bore, spring or well
 - Other private supply [for example: 5. creek or farm daml
 - 6. Combination of different water sources
 - 7. Other [SPECIFY]
 - X Don't know
 - Refused
- Q2. Do you treat your water before drinking? [If Yes, how?]
 - 1.
 - 2. Sometimes
 - 3. Yes—Boiling
 - Yes—Filtering 4.
 - 5. Yes—Boil and filter
 - Yes—Other [SPECIFY] 6.
 - X Don't know
 - R Refused

Emergency department question module

The next questions are about your use of health services.

01. In the last 12 months, have you attended a hospital emergency department (or casualty) for your own medical care?

Food handling question module

Q1. Thinking about the last time that you prepared raw meat or chicken when cooking, after preparing it did you ...

[READ OUT 1-3 ONLY]

- 1. Wipe your hands or rinse them WITHOUT using soap OR
- 2. Wash your hands with soap OR
- 3. Continue cooking without cleaning your hands
- 4. Don't handle raw meat-don't cook
- X Don't know
- R Refused

Hospital question module

The next questions are about your use of health services.

- Q1. In the last 12 months, have you stayed for at least one night in hospital?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE
 - R Refused \rightarrow END OF MODULE
- Q2. In which hospital was your most recent overnight stay?
 - 1. Name of hospital
- Q3. Can you tell me if that is a public or private hospital?
 - 1. Public hospital
 - 2. Private hospital
 - 3. Private hospital attached to a public hospital
 - X Don't know
 - R Refused
- Q4. During your overnight hospital admission were you admitted as a private or public patient?
 - 1. Private patient [that is, private health insurance]
 - 2. Public patient
 - X Don't know
 - R Refused
- Q5. Overall, what do you think of the care you received at this hospital? [READ OUT]
 - 1. Excellent \rightarrow Q7
 - 2. Very good \rightarrow Q7
 - 3. Good \rightarrow Q7
 - 4. Fair

- 5. Poor
- X Don't know \rightarrow Q7
- R Refused \rightarrow Q7
- Q6. Could you briefly describe why you rated the care you received as fair–poor?
 - 1. Description
- Q7. Did someone at this hospital tell you how to cope with your condition when you returned home?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - 3. Not applicable \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE
 - R Refused \rightarrow END OF MODULE
- Q8. How adequate was this information once you went home? [READ OUT]
 - 1. Very adequate
 - 2. Adequate
 - 3. Inadequate
 - 4. Completely inadequate
 - X Don't know
 - R Refused

Immunisation question module

I now have a few questions about immunisation.

- Q1. Has a health professional ever advised you to be vaccinated against flu?
 - 1. Yes
 - 2. No.
 - X Don't know
 - R Refused
- Q2. Were you vaccinated or immunised against flu in the past 12 months?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused
- Q3. Has a health professional ever advised you to be vaccinated against pneumonia?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused
- Q4. When were you last vaccinated or immunised against pneumonia?
 - 1. Within the last 12 months

- 2. 12 months to five years ago
- 3. More than five years ago
- 4. Never vaccinated
- X Don't know
- R Refused

Adult incontinence question module

- Q1. In the last four weeks how often have you had a urine leak when you were physically active, exerted yourself, coughed or sneezed during the day or night?
 - 1. Most of the time
 - 2. Some of the time
 - 3. None of the time
 - X Don't know
 - R Refused

Injury: Falls in older people question module

- Q1. In the last 12 months have you had a fall?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE
 - R Refused → END OF MODULE
- Q2. How many times did you fall in the last 12 months?
 - 1. Once
 - 2. Twice
 - 3. Three times or more
 - X Don't know
 - R Refused
- Q3. In the last 12 months have you had a fall which required medical treatment for injuries?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - $X \quad Don't know \rightarrow END OF MODULE$
 - R Refused \rightarrow END OF MODULE
- Q4. Were you ADMITTED to hospital as a result of any of your falls in the last 12 months?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused

Injury prevention question module

The next few questions are about safety issues.

Q1. Do you have any of the following fire safety measures in your home? [READ OUT]

[External water supply refers to water tankers, swimming pools, dams, storm water retention pits, garden hoses, and fixed sprinklers].

[Hard wired smoke alarms are wired into your electricity supply and have battery back up].

- 1. Fire alarm (hard wired)
- 2. Fire alarm (battery operated only)
- 3. Fire sprinkler system
- 4. Safety switch-circuit breaker
- 5. Fire extinguisher
- 6. Fire evacuation plan
- 7. External water supply
- 8. External sprinkler
- 9. Other [SPECIFY]
- 10. None of the above
- Q2. Are you aware of the NSW Fire Brigades program to change or install battery operated fire alarms in homes?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - $X \quad Don't know \rightarrow END OF MODULE$
 - R Refused \rightarrow END OF MODULE
- Q3. Have you had one installed through this program?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused

Mental health question module

The next 10 questions are about how you have been feeling in the past four weeks

- Q1. In the past four weeks, about how often did you feel tired out for no good reason? [READ OUT]
 - 1. All of the time
 - 2. Most of the time
 - 3. Some of the time
 - 4. A little of the time
 - 5. None of the time
 - X Don't know
 - R Refused

Q2. In the past four weeks, about how often did 4. A little of the time you feel nervous? [READ OUT] 5. None of the time All of the time X Don't know 1. 2. Most of the time R Refused 3. Some of the time Q8. In the past four weeks, about how often did 4. A little of the time you feel that everything was an effort? 5. None of the time \rightarrow Q4 [READ OUT] X Don't know \rightarrow Q4 1. All of the time Refused → Q4 R 2. Most of the time 3. Some of the time Q3. In the past four weeks, about how often did you feel so nervous that nothing could calm A little of the time 4 you down? [READ OUT] 5. None of the time 1. All of the time X Don't know Refused 2. Most of the time R 3. Some of the time O9. In the past four weeks, about how often did 4. A little of the time you feel so sad that nothing could cheer you 5. None of the time up? [READ OUT] X Don't know 1. All of the time Refused Most of the time 2. In the past four weeks, about how often did 3. Some of the time Q4. you feel hopeless? [READ OUT] 4. A little of the time 1. All of the time 5. None of the time 2. Most of the time X Don't know 3. Some of the time R Refused 4. A little of the time O10. In the past four weeks, about how often did 5. None of the time you feel worthless? [READ OUT] X Don't know 1. All of the time Refused R 2. Most of the time O5. In the past four weeks, about how often did 3. Some of the time you feel restless or fidgety? [READ OUT] 4. A little of the time All of the time 1. 5. None of the time 2. Most of the time X Don't know 3. Some of the time Refused R 4. A little of the time In the last four weeks, how many days were Q11. 5. None of the time \rightarrow Q7 you TOTALLY UNABLE to work, study or X Don't know \rightarrow O7 manage your day-to-day activities because of R Refused \rightarrow Q7 these feelings? In the past four weeks, about how often did ___ Number of days Q6. 1. you feel so restless you could not sit still? Aside from [that day-those (#) days], in the Q12. [READ OUT] last four weeks, how many days were you All of the time 1. ABLE to work, study or manage your day-to-2. Most of the time day activities, but had to CUT DOWN on what 3. Some of the time you did because of these feelings? 4. A little of the time ___ Number of days 5. None of the time O13. In the last four weeks, how many times have X Don't know you seen a doctor or other health professional

110 Vol. 15 No. S-4

O14.

about these feelings?

feelings? [READ OUT]

___ Number of consultations

In the last four weeks, how often have physical

health problems been the main cause of these

R

1.

2.

3.

O7.

Refused

you feel depressed? [READ OUT]

All of the time

Most of the time

Some of the time

In the past four weeks, about how often did

	1.	All of the time		1.	Times per day		
	2.	Most of the time		2.	Times per week		
	3.	Some of the time		3.	Times per month		
	4.	A little of the time		4.	Rarely or never		
	5.	None of the time		X	Don't know		
	X	Don't know		R	Refused		
	R	Refused					
			Q6.	What type of milk do you usually have?			
				1.	Regular milk (whole or full cream)		
Nutrition question module				2.	Low-reduced fat milk		
Nutrition question module				3.	Skim milk		
The next few questions are about food. I'm going to read				4.	Evaporated or sweetened milk		
you a list of different food and drinks. Please tell me how				5.	Other [SPECIFY]		
much of these foods and drinks you usually consume per				6.	Don't have milk		
day or per week.				X	Don't know		
Q1.	How many	y serves of vegetables do you usually		R	Refused		
		ay? [One serve = $1/2$ cup cooked or	Q7.	How ofter	n do vou est processed mest products		
	one cup of salad vegetables]		Q7.	How often do you eat processed meat products such as sausages, frankfurts, devon, salami,			
	1.	Serves per day			, bacon or ham?		
	2.	Serves per week		1.	Times per day		
	3.	Don't eat vegetables		2.	Times per day Times per week		
	X	Don't know		3.	Times per week Times per month		
	R	Refused		4.	Rarely or never		
Q2.	How many	serves of fruit do you usually eat each		X	Don't know		
Q2.		serve = one medium piece or two		R	Refused		
	small pieces of fruit or one cup of diced pieces]						
	1 Serves per day		Q8.	How often do you eat chips, french fries,			
	2.	Serves per day Serves per week		wedges, fi	ried potatoes or crisps?		
	3.	Don't eat fruit		1.	Times per day		
	X	Don't know		2.	Times per week		
	R	Refused		3.	Times per month		
0.0				4.	Rarely or never		
Q3.		do you usually eat bread? (Include		X	Don't know		
		s, flat breads, crumpets, bagels,		R	Refused		
	English or bread-type muffins).		Q9.	In the last twelve months, were there any times			
	1.	Times per day	ζ,	that you ran out of food and couldn't afford to			
	2.	Times per week		buy more			
	3.	Times per month		1.	Yes		
	4.	Rarely or never		2.	No		
	X	Don't know		X	Don't know		
	R	Refused		R	Refused		
Q4.		do you usually eat breakfast cereal? ade, home made or cooked]					
	1.	Times per day					
	2.	Times per week					
	3.	Times per month	Oral health question module				
	4.	Rarely or never					
	X	Don't know	The ne	The next questions are about your teeth and dental heal			
	R Refused		O1	Q1. Are any of your natural teeth missing?			
05	How often	do vou est pasta rice poodles or	Q1.				
Q5.	How often do you eat pasta, rice, noodles or other cooked cereals?(not including cooked			1.	Yes—have some natural teeth missing		
	breakfast			2.	Yes—have all natural teeth missing		
				۷.	103 have an natural teem missing		

- 3. No—have no natural teeth missing \rightarrow O3
- X Don't know \rightarrow Q3
- R Refused \rightarrow Q3
- Q2. Do you have dentures or false teeth?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused
- Q3. In the last 12 months, how often have you had a toothache or other problem with your mouth or dentures? [READ OUT]
 - 1. Very often
 - 2. Often
 - 3. Sometimes
 - 4. Hardly ever
 - 5. Never (during the last 12 months) \rightarrow Q7
 - X Don't know \rightarrow O7
 - R Refused \rightarrow Q7
- Q4. In the last four weeks, how often have you had a toothache or other problem with your mouth or dentures? [READ OUT]
 - 1. Very often
 - 2. Often
 - 3. Sometimes
 - 4. Never (during the last four weeks)
 - X Don't know
 - R Refused
- Q5. What was the most recent problem you had?
 - 1. Toothache
 - 2. Bleeding gums
 - 3. Loose or broken tooth or other problem as a result of an injury
 - 4. Loose or broken tooth—not due to injury
 - 5. Lost a filling
 - 6. Problem with jaw or bite
 - 7. Other [SPECIFY]
 - $X \quad Don't know \rightarrow Q7$
 - R Refused \rightarrow Q7
- Q6. What treatment did you receive for [problem in Q5]? [MULTIPLE RESPONSE]
 - 1. Check up \rightarrow Q8
 - 2. Dental filling \rightarrow Q8
 - 3. Amalgam replacement \rightarrow Q8
 - 4. Root canal filling \rightarrow Q8
 - 5. Crown \rightarrow Q8
 - 6. Tooth extracted \rightarrow Q8
 - 7. Fluoride treatment \rightarrow Q8

- 8. Gum treatment \rightarrow Q8
- 9. Teeth straightened-braces \rightarrow Q8
- 10. New or replacement dentures \rightarrow Q8
- 11. Teeth cleaned \rightarrow Q8
- 12. Fissure sealant \rightarrow Q8
- 13. Whitening-bleaching \rightarrow Q8
- 14. Denture repair \rightarrow Q8
- 15. None—did not visit Dentist
- 16. Other treatment [SPECIFY] \rightarrow Q8
- $X \quad Don't know \rightarrow Q8$
- R Refused \rightarrow Q8
- Q7. When did you last visit a dental professional about your teeth, dentures or gums? [A dental professional includes dentist, dental specialist, dental hygienist, dental technician, dental mechanic, denturist, or dental therapist]
 [READ OUT]
 - 1. Less than 12 months ago
 - 2. One year to less than two years ago \rightarrow Q9
 - 3. Two to less than five years ago \rightarrow Q9
 - 4. Five to less than 10 years ago \rightarrow Q9
 - 5. 10 years ago or more \rightarrow Q9
 - 6. Never \rightarrow Q9
 - X Don't know \rightarrow Q9
 - R Refused → END OF MODULE
- Q8. Where was your last dental visit made? [READ OUT]
 - Government dental clinic or hospital
 → END OF MODULE
 - 2. School dental service (SOKS) \rightarrow END OF MODULE
 - Dental technician (includes dental mechanic and denturist practising independently of a dentist) → END OF MODULE
 - 4. Other [SPECIFY] \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE
 - R Refused \rightarrow END OF MODULE
- Q9. What are the main reasons for you not visiting the dentist in the last 12 months? [MULTIPLE RESPONSE]
 - 1. Respondent has dentures
 - 2. Worried or afraid of going; don't like going
 - 3. Don't need to
 - 4. Hard to find time
 - 5. Can't find a dentist I like
 - 6. Too expensive
 - 7. Too far to go
 - 8. Long waiting lists

- 9. Dentist has moved or retired
- 10. Other [SPECIFY]
- X Don't know
- R Refused

Overweight or obesity question module

Now a few questions about height and weight.

- Q1. How tall are you without shoes?
 - 1. centimetres
 - X Don't know
 - R Refused

OR

- 1. ____ feet ____ inches
- X Don't know
- R Refused
- Q2. How much do you weigh without clothes or shoes?
 - 1. ___ kilograms
 - X Don't know
 - R Refused

OR

- 1. ___ stones ___ lbs
- X Don't know
- R Refused
- Q3. Do you consider yourself to be: [READ OUT]
 - 1. Acceptable weight
 - 2. Underweight
 - 3. Overweight
 - X Don't know
 - R Refused
- Q4. How often do you weigh yourself?
 - 1. At least once a day
 - 2. Several times a week
 - 3. About once a week
 - 4. About once or twice a month
 - 5. A few times a year
 - 6. I never weigh myself
 - X Don't know
 - R Refused

Physical activity question module

Now I'm going to ask some questions about the physical activity you did in the last week.

Q1. In the last week, how many times have you walked continuously for at least 10 minutes for

recreation or exercise or to get to or from places?

- 1. Number of times [If = $0 \rightarrow Q3$]
- X Don't know \rightarrow Q3
- R Refused \rightarrow Q3
- Q2. What do you estimate was the total time you spent walking in this way in the last week? [In hours and minutes]
 - 1. ___ hours ___ minutes
 - X Don't know
 - R Refused
- Q3. The next question excludes household chores or gardening. In the last week, how many times did you do any vigorous physical activity which made you breathe harder or puff and pant?
 - 1. Number of times [If = $0 \rightarrow Q5$]
 - X Don't know \rightarrow Q5
 - R Refused \rightarrow Q5
- Q4. What do you estimate was the total time you spent doing this vigorous physical activity in the last week? [In hours and minutes]
 - 1. ___ hours ___ minutes
 - X Don't know
 - R Refused
- Q5. This next question does not include household chores or gardening. In the last week, how many times did you do any other more moderate physical activity that you haven't already mentioned?
 - 1. Number of times $[If = 0 \rightarrow END OF MODULE]$
 - $X \quad Don't know \rightarrow END OF MODULE$
 - R Refused → END OF MODULE
- Q6. What do you estimate was the total time that you spent doing these activities in the last week? [In hours and minutes]
 - 1. hours minutes
 - X Don't know
 - R Refused

Public dental service question module

The next questions are about your use of health services.

- Q1. In the last 12 months have you attended a public (government run) dental service or dental hospital?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - X Don't know \rightarrow END OF MODULE

- R Refused \rightarrow END OF MODULE
- Q2. Overall, what do you think of the care you received at the public dental service? [READ OUT]
 - 1. Excellent \rightarrow Q4
 - 2. Very good \rightarrow Q4
 - 3. Good \rightarrow Q4
 - 4. Fair
 - 5. Poor
 - $X \quad Don't know \rightarrow Q4$
 - R Refused \rightarrow Q4
- Q3. Could you briefly describe why you rated the care you received as fair–poor?
 - 1. Description
- Q4. Did someone at this public dental service tell you how to cope with your condition when you returned home?
 - 1. Yes
 - 2. No \rightarrow END OF MODULE
 - 3. Not applicable \rightarrow END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused \rightarrow END OF MODULE
- Q5. How adequate was this information once you went home? [READ OUT]
 - 1. Very adequate
 - 2. Adequate
 - 3. Inadequate
 - 4. Completely inadequate
 - X Don't know
 - R Refused

Self-rated health status question module

Now I am going to read some statements about aspects of your health.

- Q1. Overall, how would you rate your health during the past four weeks? [READ OUT]
 - 1. Excellent
 - 2. Very good
 - 3. Good
 - 4. Fair
 - 5. Poor
 - 6. Very poor
 - X Don't know
 - R Refused
- Q2. During the past four weeks how much difficulty did you have doing your daily work or activities? [READ OUT]

- 1. No difficulty at all
- 2. A little bit of difficulty
- 3. Some difficulty
- 4. Much difficulty
- 5. Could not do work-activities
- X Don't know
- R Refused
- Q3. During the past four weeks how much bodily pain have you generally had? [READ OUT]
 - 1. No pain
 - 2. Very mild pain
 - 3. Mild pain
 - 4. Moderate pain
 - 5. Severe pain
 - X Don't know
 - R Refused

Smoking question module

The following questions are about tobacco smoking. This includes cigarettes, cigars and pipes.

- Q1. Which of the following best describes your smoking status? [READ OUT]
 - 1. I smoke daily
 - 2. I smoke occasionally
 - 3. I don't smoke now, but I used to \rightarrow O3
 - 4. I've tried it a few times but never smoked regularly \rightarrow Q3
 - 5. I've never smoked \rightarrow Q3
 - X Don't know \rightarrow Q3
 - R Refused \rightarrow Q3
- Q2. Which of the following best describes how you feel about your smoking? [READ OUT]
 - 1. I am not planning on quitting within the next six months
 - 2. I am planning on quitting within the next six months
 - 3. I am planning on quitting within the next month
 - 4. I have not smoked in the past 24 hours but was smoking six months ago
 - 5. I have not been smoking in the past six months
 - X Don't know
 - R Refused
- Q3. Which of the following best describes your home situation? [READ OUT]
 - 1. My home is smoke-free (includes smoking is allowed outside only)

- 2. People occasionally smoke in the house
- 3. People frequently smoke in the house
- X Don't know
- R Refused
- Q4. Are people allowed to smoke in your car?
 - 1. Yes
 - 2. No
 - 3. Don't have a car
 - X Don't know
 - R Refused
- Q5. In registered clubs, such as leagues clubs and bowling clubs, do you think smoking should be allowed? [READ OUT]
 - 1. Anywhere
 - 2. Only in special areas
 - 3. Nowhere
 - X Don't know
 - R Refused
- Q6. And in hotels, bars, and pubs, do you think smoking should be allowed [READ OUT]
 - 1. Anywhere
 - 2. Only in special areas
 - 3. Nowhere
 - X Don't know
 - R Refused
- Q7. If there was a total ban on smoking in hotels and licensed bars, would you be likely to go
 - 1. More often
 - 2. Less often
 - 3. It would make no difference
 - X Don't know
 - R Refused

Social capital question module

The next questions are about your involvement in your local community and neighbourhood.

- Q1. In the past three months, how often have you helped out any local group or organisation such as a school, scouts and brownies, a sporting club, or hospital as a volunteer, or other organisation? [READ OUT]
 - 1. About once a week
 - 2. Once every 2–3 weeks
 - 3. Once a month or less
 - 4. No, not at all
 - X Don't know
 - R Refused

- Q2. In the past six months, how often have you attended a local community event such as a church or school fete, school concert, or a street fair? [READ OUT]
 - 1. Three times or more
 - 2. Twice
 - 3. Once
 - 4. Never
 - X Don't know
 - R Refused
- Q3. Are you an active member of a local organisation, church or club, such as a sport, craft, or social club? [READ OUT]
 - 1. Yes, very active
 - 2. Yes, somewhat active
 - 3. Yes, a little active
 - 4. No, not an active member
 - X Don't know
 - R Refused
- Q4. I'm now going to read you some statements about safety in your local area. Can you please tell me if you agree or disagree with these statements. I feel safe walking down my street after dark. Do you agree or disagree?
 - 1. Strongly agree
 - 2. Agree
 - 3. Disagree
 - 4. Strongly disagree
 - X Don't know
 - R Refused
- Q5. Most people can be trusted. Do you agree or disagree?
 - 1. Strongly agree
 - 2. Agree
 - 3. Disagree
 - 4. Strongly disagree
 - X Don't know
 - R Refused
- Q6. My area has a reputation for being a safe place. Do you agree or disagree?
 - 1. Strongly agree
 - 2. Agree
 - 3. Disagree
 - 4. Strongly disagree
 - X Don't know
 - R Refused
- Q7. If you were caring for a child and needed to go out for a while, and could not take the child with you, would you ask someone in your neighbourhood for help? [READ OUT]

- 1. Yes, definitely
- 2. Yes, possibly
- 3. No, probably not
- 4. No, definitely not
- X Don't know
- R Refused
- Q8. How often have you visited someone in your neighbourhood in the past week? [READ OUT]
 - 1. Frequently
 - 2. A few times
 - 3. At least once
 - 4. Never (in the last week)
 - X Don't know
 - R Refused
- Q9. When you go shopping in your local area how often are you likely to run into friends and acquaintances? [READ OUT]
 - 1. Nearly always
 - 2. Most of the time
 - 3. Some of the time
 - 4. Rarely or never
 - X Don't know
 - R Refused
- Q10. Would you be sad if you had to leave this neighbourhood?
 - 1. Yes
 - 2. No
 - X Don't know
 - R Refused