

11. QUESTION MODULES

The survey questions used in New South Wales Population Health Survey in 2004 are available as individual question modules. This includes modules on alcohol, asthma, cancer screening (breast and cervical), cancer screening (colorectal), community health centres, demographics, diabetes, difficulties getting health care, emergency departments, hearing, hospitals, immunisation, injury (youth violence), injury prevention, mental health, nutrition, oral health, overweight and obesity, physical activity, public dental services, self-rated health, sexual health, smoking, sun protection, and vision.

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 4 weeks have you had more than [4 if male/2 if female] drinks in a day? [PROMPT IF NECESSARY]
1. Yes
 2. No → END OF MODULE
- X Don't know → END OF MODULE
R Refused → END OF MODULE
- Q4. In the past 4 weeks how often have you had [one or more if male/7 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 4 weeks how often have you had [7–10 if male/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 → END OF MODULE
- X Don't know → END OF MODULE
R Refused → END OF MODULE
- Q2. Have you had symptoms of asthma or taken treatment for asthma in the last 12 months?
1. Yes
 2. No → END OF MODULE
- X Don't know → END OF MODULE
R Refused → END OF MODULE
- Q3. Have you had symptoms of asthma or taken treatment for asthma in the last 4 weeks?
1. Yes
 2. No → END OF MODULE
- X Don't know → END OF MODULE
R Refused → END OF MODULE
- Q4. 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
- Q5. Have you visited your general practitioner or local doctor for an attack of asthma in the last 4 weeks?
1. Yes
 2. No
- X Don't know
R Refused
- Q6. Have you visited a hospital emergency department for an attack of asthma in the last 4 weeks?
1. Yes
 2. No
- X Don't know
R Refused

Cancer screening (breast and cervical) question module

I would now like to ask you some questions about women's health matters.

- Q1. A mammogram is an x-ray taken of the breasts by a machine that presses against the breast while the picture is taken. It is a means of detecting breast cancer in the early stages. Have you ever had a mammogram?
1. Yes
 2. No → Q6
 - X Don't know → Q6
 - R Refused → Q6
- Q2. When did you last have a mammogram?
1. Less than year ago
 2. 1 year to less than 2 years ago
 3. 2 years to less than 3 years ago
 4. 3 years to less than 4 years ago
 5. 4 years to less than 5 years ago
 6. 5 or more years ago
 - X Don't know
 - R Refused
- Q3. Can you tell me all the reasons why you had your last mammogram? [MULTIPLE RESPONSE]
1. Breast problem (lump, discharge, pain)
 2. Family history
 3. Had breast cancer in the past
 4. Regular check up
 5. Due for screening mammogram
 6. Doctor recommended it
 7. An invitation from the BreastScreen or Breast Screening and Assessment Unit
 8. Publicity about breast cancer and screening
 9. Urged by a friend–relative to go
 10. Other [SPECIFY] _____
 - X Don't know
 - R Refused
- Q4. Do you have mammograms regularly?
1. Yes
 2. No → Q6
 - X Don't know → Q6
 - R Refused → Q6
- Q5. What is the usual time period between your mammograms?
1. ___ Number of years
 2. Only had one
 - X Don't know
 - R Refused

- Q6. A Pap test is a routine test carried out by a doctor. It is recommended for all women for early detection of cancer of the cervix. Have you ever had a Pap test?
1. Yes
 2. No → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- Q7. When did you last have a Pap test?
1. Less than one year ago
 2. 1 year to less than 2 years ago
 3. 2 years to less than 3 years ago
 4. 3 years to less than 4 years ago
 5. 4 years to less than 5 years ago
 6. 5 or more years ago
 - X Don't know
 - R Refused
- Q8. Do you have a Pap test regularly?
1. Yes
 2. No → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- Q9. What is the usual time period between your Pap tests?
1. Only had one Pap test
 2. Less than one year ago
 3. ___ number of years
 - X Don't know
 - R Refused

Cancer screening (colorectal) question module

Bowel cancer is a common cancer that, if found, can be treated at an early stage. Bowel cancer may be detected by means of an x-ray of the bowel, or by a test that involves a doctor passing a long tube-like instrument through your back passage to examine the inside of your bowel, or by examining a sample of faeces.

- Q1. Have you ever had any of these types of investigation?
1. Yes
 2. No → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- Q2. Which of these investigations have you had?
1. X-ray → Q3
 2. Tube-like instrument → Q4
 3. Sample of faeces → Q5
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE

- Q3. When did you have your last x-ray?
1. Within the last 12 months
 2. 12 months to 5 years
 3. More than 5 years ago
 4. Never had a bowel x-ray
 - X Don't know
 - R Refused
- Q4. When did you have your last test with the long tube-like instrument?
1. Within the last 12 months
 2. 12 months to 5 years
 3. More than 5 years ago
 4. Never had test with a long tube-like instrument
 - X Don't know
 - R Refused
- Q5. When did you have your last faeces sample examined?
1. Within the last 12 months
 2. 12 months to 5 years
 3. More than 5 years ago
 4. Never had a faeces sample examined
 - X Don't know
 - R Refused
- Q6. Can you tell me all the reasons why you had [this–these] investigations for bowel cancer?
1. Blood in the toilet bowl–stool–on toilet paper
 2. Other bowel problem such as pain, polyps, or inflammatory bowel disease
 3. One close relative (father, mother, brother, sister) had bowel cancer
 4. More than one close relative (father, mother, brother, sister) had bowel cancer
 5. One other relative had bowel cancer (grandmother, grandfather, aunt, uncle)
 6. More than one other relative had bowel cancer (grandmother, grandfather, aunt, uncle)
 7. I have had bowel cancer in the past
 8. Regular check up (seeing doctor)
 9. Due for screening test for bowel cancer
 10. Doctor recommended it
 11. Publicity about bowel cancer and screening
 12. Urged by a friend–relative to go
 13. Other [SPECIFY] _____
 - X Don't know
 - R Refused

- Q7. Can you tell me how old this relative was when they were diagnosed with bowel cancer?
1. _____ age
 - X Don't know
 - R Refused
- Q8. Were the relatives diagnosed with bowel cancer on the same side of your family?
1. Yes: all on same side of family
 2. No: on both sides of family
 - 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 → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- Q2. Overall, what do you think of the care you received at the community health centre? [READ OUT]
1. Excellent → Q4
 2. Very good → Q4
 3. Good → Q4
 4. Fair
 5. Poor
 - X Don't know → Q4
 - R Refused → Q4
- Q3. Could you briefly describe why you rated the care you received as fair or 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 → END OF MODULE
 3. Not applicable → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → 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

Demographics

- Q1. [RECORD LANGUAGE SURVEY RECORDED IN]
1. English
 2. Arabic
 3. Chinese
 4. Greek
 5. Italian
 6. Vietnamese
- Q2. A letter was sent to your household recently about this study. Do you remember receiving this letter?
1. Yes
 2. No
 - X Don't know
 - R Refused
- Q3. How many people, including yourself, live in your household?
1. ___ number of people
 - X Don't know
 - R Refused
- Q4. How many children under 6 years of age live in this household?
1. ___ number of people
 - X Don't know
 - R Refused
- Q5. How many people aged 65 years old or over live in this household?
1. ___ number of people
 - X Don't know
 - R Refused
- Q6. Could you please tell me how old you are today?
1. ___ age in years
 - X Don't know
 - R Refused
- Q7. Are you male or female? [ONLY ASK IF UNSURE]
1. Male
 2. Female
- Q8. Besides yourself, who else lives in your household? [MULTIPLE RESPONSE]
1. No one else: lives alone
 2. Mother
 3. Father
 4. Respondent's partner
 5. Stepmother
 6. Stepfather
 7. Grandparents
 8. Sons-daughters
 9. Brothers-sisters
 10. Stepbrothers-stepsisters
 11. Other relatives
 12. Non-family members
 13. Other [SPECIFY] _____
 - X Don't know
 - R Refused
- Q9. What is your current formal marital status?
1. Married
 2. Widowed
 3. Separated but not divorced
 4. Divorced
 5. Never married
 - X Don't know
 - R Refused
- Q10. In which country were you born?
1. Australia
 2. _____ other country [SPECIFY]
 - X Don't know
 - R Refused
- Q11. When did you first arrive in Australia to live here for one year or more?
1. ___ year
 - X Don't know
 - R Refused
- Q12. Do you usually speak a language other than English at home?
1. Yes
 2. No
 - X Don't know
 - R Refused
- Q13. What language do you usually speak at home?
1. _____ language [SPECIFY]
 - X Don't know
 - R Refused
- Q14. What is the highest level of primary or high school that you have completed? [PROMPT IF NECESSARY]
1. Never attended school
 2. Currently still at school
 3. Year 8 or below
 4. Year 9 or equivalent
 5. Year 10 or equivalent
 6. Year 11 or equivalent
 7. Year 12 or equivalent (Matriculation-Leaving)
 - X Don't know
 - R Refused
- Q15. What is the level of the highest qualification you have completed?
1. Completed School Certificate-Intermediate-Year 10-4th Form
 2. Completed Higher School Certificate-Leaving-Year 12-6th Form

3. TAFE certificate or diploma
4. University, College of Advanced Education, or some other tertiary institute degree or higher
5. Other [SPECIFY] _____
6. Completed primary school
7. Completed Years 7–9
- X Don't know
- R Refused

Q16. In the last week, which of the following best describes your employment status?
[READ OUT]

1. Worked for payment or profit → Q18
2. Worked for payment or profit, but absent on paid leave, holidays, on strike—stood down → Q18
3. Unpaid work in a family business → Q4
4. Other unpaid work
5. Other unpaid work
6. Did not have a job
- X Don't know → Q21
- R Refused → Q21

Q17. Were you actively looking for work in the last week?

1. Yes: looked for full-time work
2. Yes: looked for part-time work
3. No: did not look for work
- X Don't know
- R Refused

Q18. In the main job held in the last week, were you:

1. A wage or salary earner
2. Conducting own business with employees
3. Conducting own business without employees
4. A helper not receiving wages
- X Don't know
- R Refused

Q19. In the last week, how many hours did you work in all jobs?

1. _____ no. of hours [SPECIFY]
- X Don't know
- R Refused

Q20. How do you usually get to work? [MULTIPLE RESPONSE]

1. Train
2. Bus
3. Ferry
4. Tram (including light rail)
5. Taxi
6. Car: as driver
7. Car: as passenger
8. Truck

9. Motorbike or motor scooter
10. Bicycle
11. Walk only
12. Work at home
13. Other
- X Don't know
- R Refused

Q21. Do you currently receive a government pension, allowance or benefit?

1. Yes
2. No
- X Don't know
- R Refused

Q22. I would like to ask you some questions about your housing arrangements. Are you: [READ OUT]

1. Paying rent or board
2. Paying off this dwelling
3. Outright owner—fully owned
4. Living rent-free
5. Purchasing under a rent-buy scheme
6. Occupying your dwelling under a life tenure scheme
7. Other [SPECIFY] _____
- X Don't know
- R Refused

Q23. What type of accommodation do you live in?
[PROMPT IF NECESSARY]

1. Separate house
2. Semi-detached—town house—terraced house—villa
3. Unit, flat or apartment—granny flat
4. Caravan, cabin, houseboat
5. Improvised home, tent, sleep out
6. House—flat attached to a shop—office
7. Other [SPECIFY] _____ (for example, hotel, retirement village)
- X Don't know
- R Refused

Q24. I would now like to ask you about your household's income. What is your annual household income before tax? Would it be:

1. Less than \$10,000
2. \$10,000–\$20,000
3. \$20,000–\$40,000
4. \$40,000–\$60,000
5. \$60,000–\$80,000
6. More than \$80,000
- X Don't know
- R Refused

Q25. How long have you lived in your local area?

1. ____ years
- X Don't know
- R Refused

Q26. What is the name of your local council or shire?

1. _____
- X Don't know
- R Refused

Q27. What is the name of the town or suburb where you live?

1. _____
- X Don't know
- R Refused

Q28. Could you tell me your postcode?

1. ____
- X Don't know
- R Refused

Q29. Do you have more than one telephone number in your household?

1. Yes
2. No
- X Don't know
- R Refused

Q30. How many residential telephone numbers do you have? Do not include mobile phone numbers, dedicated fax numbers or modems.

1. ____ number of phone numbers
- X Don't know
- R Refused

Diabetes question module

The next few questions are about diabetes and high blood sugar. Diabetes is a disease where there is too much sugar in the blood.

Q1. Have you ever been told by a doctor or at a hospital that you have diabetes?

1. Yes [IF FEMALE → Q3; IF MALE → Q5]
2. No
3. Only during pregnancy → END OF MODULE
- X Don't know
- R Refused

Q2. Have you ever been told by a doctor or at a hospital that you have high sugar levels in your blood or urine?

1. Yes [IF FEMALE → Q3; IF MALE → Q6]
2. No → END OF MODULE
3. Borderline → Q6
4. Only during pregnancy → END OF MODULE
- X Don't know → END OF MODULE
- R Refused → END OF MODULE

Q3. [IF FEMALE THEN ASK] Were you pregnant when you were first told you had diabetes–high blood sugar?

1. Yes
2. No → Q5
- X Don't know → Q5
- R Refused → Q5

Q4. [IF FEMALE THEN ASK] Have you ever had diabetes–high blood sugar apart from when you were pregnant?

1. Yes
2. No → END OF MODULE
- X Don't know
- R Refused

Q5. What type of diabetes were you told you had?

1. Type 1
2. Type 2
3. Gestational
4. Other [SPECIFY] _____
- X Don't know
- R Refused

Q6. How old were you when you were first told you had diabetes–high blood sugar? [IF ONGOING DIABETES SINCE PREGNANCY, THEN AGE OF DIAGNOSIS DURING PREGNANCY]

1. ____ years
- X Don't know
- R Refused

Q7. What are you doing now to manage your diabetes–high blood sugar? [MULTIPLE RESPONSE]

1. Having insulin injections
2. On tablets for diabetes or high blood sugar
3. Following a special diet [for 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

Difficulties getting health care question module

- Q1. Do you have any difficulties getting health care when you need it?
1. Yes
 2. No → Q3
 3. Don't need health care → Q3
 - X Don't know
 - R Refused
- Q2. Please describe the difficulties you have.
1. Description _____
→ END OF MODULE
- Q3. Do you have any comments on the health services in your local area?
1. Comments _____

Emergency department question module

The next questions are about your use of health services.

- Q1. In the last 12 months, have you attended a hospital emergency department (or casualty) for your own medical care?
1. Yes
 2. No → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- Q2. Which hospital's emergency department did you last attend?
1. Name of hospital _____
- Q3. Overall, what do you think of the care you received at this emergency department? [READ OUT]
1. Excellent → END OF MODULE
 2. Very good → END OF MODULE
 3. Good → END OF MODULE
 4. Fair
 5. Poor
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- Q4. Could you briefly describe why you rated the care you received as fair or poor?
1. Reasons _____

Hearing question module

The following questions are about your hearing.

- Q1. Have you ever had your hearing tested?
1. Yes
 2. No
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE

- Q2. As far as you know do you have normal hearing in both ears?
1. Yes → END OF MODULE
 2. No
 - X Don't know
 - R Refused
- Q3. Do you currently use a hearing aid?
1. Yes
 2. No → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- Q4. How serious is your hearing loss?
1. Mild
 2. Moderate
 3. Severe
 4. Profound
 - 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 → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → 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 → Q7
 2. Very good → Q7
 3. Good → Q7

- 4. Fair
- 5. Poor
- X Don't know → Q7
- R Refused → Q7

Q6. Could you briefly describe why you rated the care you received as fair or 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 → END OF MODULE
- 3. Not applicable → END OF MODULE
- X Don't know → END OF MODULE
- R Refused → 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 5 years ago
- 3. More than 5 years ago
- 4. Never vaccinated
- X Don't know
- R Refused

Injury (youth violence) question module

The following questions are about your personal safety.

Q1. In the last 12 months has someone been physically violent toward you? By physically violent I mean being hit, slapped, pushed, kicked, or attacked with a weapon by someone to cause harm.

- 1. Yes
- 2. No → END OF MODULE
- X Don't know → END OF MODULE
- R Refused → END OF MODULE

Q2. In the last 12 months how many times has someone been physically violent toward you? By physically violent I mean being hit, slapped, pushed, kicked, or attacked with a weapon by someone to cause harm.

- 1. ___ times
- X Don't know
- R Refused

Q3. Thinking about the most recent time someone was physically violent toward you: Where were you when the violence occurred? [MULTIPLE RESPONSE]

- 1. My home
- 2. My workplace
- 3. Pub-bar-licensed club-nightclub and surrounding area (including carpark)
- 4. Outdoor space (for example: street, outdoor carpark, beach, park, etc.) (SPECIFY) _____
- 5. Indoor place (for example: cinema, shops, hospital, enclosed carpark) (SPECIFY) _____
- 6. Other(SPECIFY) _____
- X Don't know
- R Refused

Q4. Approximately, how many people were involved in the violent act against you?

- 1. _____ Enter number of people
- X Don't know
- R Refused

Q5. What relationship do you have with the person(s) who was-were violent toward you? [MULTIPLE RESPONSE]

- 1. Husband-wife-partner
- 2. Parent
- 3. Sibling-cousin-other relative
- 4. Friend-acquaintance
- 5. Unknown assailant
- 6. Other (SPECIFY)
- X Don't know
- R Refused

Q6. In your opinion was/were the person(s) who was/were violent toward you under the influence of alcohol or drugs at the time of the act?

- 1. No
- 2. Yes, alcohol
- 3. Yes, drugs
- 4. Yes, alcohol and drugs
- X Don't know
- R Refused

Q7. Were you injured as a result of the most recent violence?

- 1. Yes
- 2. No
- X Don't know
- R Refused

Q8. What type of injury did you have? [PROBE FULLY]

Q9. What medical treatment or professional health care (for example: general practitioner or hospital) did you have as a result of the violence? [MULTIPLE RESPONSE]

- 1. None
- 2. General practitioner visit
- 3. Emergency department visit
- 4. Admitted to hospital
- 5. Other [SPECIFY]
- X Don't know
- R Refused

Q10. Was the violent act reported to the police or other authorities?

- 1 No
- 2 Yes, police
- 3 Yes, other authorities
- 4 Yes, other person
- 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
- X Don't know
- R Refused

Q2. Are you aware of the NSW Fire Brigades' program to change or install battery-operated fire alarms in homes?

- 1. Yes
- 2. No → END OF MODULE
- X Don't know → END OF MODULE
- R Refused → 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 questions are about how you have been feeling in the past 4 weeks

Q1. In the past 4 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 4 weeks, about how often did you feel nervous? [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 → Q4
- X Don't know → Q4
- R Refused → Q4

Q3. In the past 4 weeks, about how often did you feel so nervous that nothing could calm you down? [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

Q4. In the past 4 weeks, about how often did you feel hopeless? [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

Q5. In the past 4 weeks, about how often did you feel restless or fidgety? [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 → Q7
- X Don't know → Q7
- R Refused → Q7

Q6. In the past 4 weeks, about how often did you feel so restless you could not sit still? [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

Q7. In the past 4 weeks, about how often did you feel depressed? [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

Q8. In the past 4 weeks, about how often did you feel that everything was an effort? [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

Q9. In the past 4 weeks, about how often did you feel so sad that nothing could cheer you up? [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

Q10. In the past 4 weeks, about how often did you feel worthless? [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

Q11. In the last 4 weeks, how many days were you totally unable to work, study or manage your day-to-day activities because of these feelings?

- 1. ___ number of days
- X Don't know
- R Refused

Q12. Aside from [that day–those days], in the last 4 weeks, how many days were you able to work, study or manage your day-to-day activities, but had to cut down on what you did because of these feelings?

- 1. ___ number of days
- X Don't know
- R Refused

Q13. In the last 4 weeks, how many times have you seen a doctor or other health professional about these feelings?

- 1. ___ number of consultations
- X Don't know
- R Refused

Q14. In the last 4 weeks, how often have physical health problems been the main cause of these feelings? [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

Nutrition question module

The next few questions are about food. I'm going to read you a list of different food and drinks. Please tell me how much of these foods and drinks you usually consume per day or per week.

Q1. How many serves of vegetables do you usually eat each day? [one serve = 1/2 cup cooked or one cup of salad vegetables]

- 1. ___ serves per day
- 2. ___ serves per week

3. Don't eat vegetables
 X Don't know
 R Refused
- Q2. How many serves of fruit do you usually eat each day? [one serve = one medium piece or 2 small pieces of fruit or one cup of diced pieces]
1. ___ serves per day
 2. ___ serves per week
 3. Don't eat fruit
 - X Don't know
 - R Refused
- Q3. How often do you usually eat bread? (Include bread rolls, flat breads, crumpets, bagels, English or bread-type muffins).
1. _____ times per day
 2. _____ times per week
 3. _____ times per month
 4. Rarely or never
 - X Don't know
 - R Refused
- Q4. How often do you usually eat breakfast cereal? [Ready made, home made or cooked]
1. ___ times per day
 2. ___ times per week
 3. ___ times per month
 4. Rarely or never
 - X Don't know
 - R Refused
- Q5. How often do you eat pasta, rice, noodles or other cooked cereals (not including cooked breakfast cereals)?
1. ___ times per day
 2. ___ times per week
 3. ___ times per month
 4. Rarely or never
 - X Don't know
 - R Refused
- Q6. What type of milk do you usually have?
1. Regular milk (whole or full cream)
 2. Low or reduced fat milk
 3. Skim milk
 4. Evaporated or sweetened milk
 5. Other [SPECIFY] _____
 6. Don't have milk
 - X Don't know
 - R Refused
- Q7. How often do you eat processed meat products such as sausages, frankfurts, devon, salami, meat pies, bacon or ham?
1. ___ times per day
 2. ___ times per week
 3. ___ times per month
 4. Rarely or never

- X Don't know
 R Refused
- Q8. How often do you eat chips, french fries, wedges, fried potatoes or crisps?
1. ___ times per day
 2. ___ times per week
 3. ___ times per month
 4. Rarely or never
 - X Don't know
 - R Refused
- Q9. In the last 12 months, were there any times that you ran out of food and couldn't afford to buy more?
1. Yes
 2. No
 - X Don't know
 - R Refused

Oral health question module

The next questions are about your teeth and dental health.

- Q1. Are any of your natural teeth missing?
1. Yes: have some natural teeth missing
 2. Yes: have all natural teeth missing
 3. No: have no natural teeth missing → Q3
 - X Don't know → Q3
 - R Refused → 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) → Q7
 - X Don't know → Q7
 - R Refused → Q7
- Q4. In the last 4 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 4 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 Don't know → Q7
R Refused → Q7

- Q6. What treatment did you receive for [problem in Q5]? [MULTIPLE RESPONSE]
1. Check up → Q8
 2. Dental filling → Q8
 3. Amalgam replacement → Q8
 4. Root canal filling → Q8
 5. Crown → Q8
 6. Tooth extracted → Q8
 7. Fluoride treatment → Q8
 8. Gum treatment → Q8
 9. Teeth straightened or braces → Q8
 10. New or replacement dentures → Q8
 11. Teeth cleaned → Q8
 12. Fissure sealant → Q8
 13. Whitening or bleaching → Q8
 14. Denture repair → Q8
 15. None: did not visit dentist
 16. Other treatment [SPECIFY] _____ → Q8
- X Don't know → Q8
R Refused → 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 2 years ago → Q9
 3. Two to less than 5 years ago → Q9
 4. Five to less than 10 years ago → Q9
 5. Ten years ago or more → Q9
 6. Never → Q9
- X Don't know → Q9
R Refused → END OF MODULE

- Q8. Where was your last dental visit made? [READ OUT]
1. Government dental clinic or public hospital → END OF MODULE
 2. School dental service → END OF MODULE

3. Dental technician (includes dental mechanic and denturist practising independently of a dentist) → END OF MODULE
 4. Other [SPECIFY] _____ → END OF MODULE
- X Don't know → END OF MODULE
R Refused → 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 and 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

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 → Q3]
- X Don't know → Q3

R Refused → 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 that made you breathe harder or puff and pant?

1. ___ Number of times [If = 0 → Q5]
- X Don't know → Q5
R Refused → 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 → END OF MODULE]
- X Don't know → 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 → END OF MODULE
- X Don't know → END OF MODULE
R Refused → END OF MODULE

Q2. Overall, what do you think of the care you received at the public dental service? [READ OUT]

1. Excellent → Q4
2. Very good → Q4
3. Good → Q4
4. Fair
5. Poor

X Don't know → Q4

R Refused → Q4

Q3. Could you briefly describe why you rated the care you received as fair or 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 → END OF MODULE
 3. Not applicable → END OF MODULE
- X Don't know → END OF MODULE
R Refused → 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 4 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 4 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 4 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

Sexual health question module

The next questions are about your sexual health.

- Q1. Have you had sexual intercourse in the last 12 months?
- 1. Yes
 - 2. No → END OF MODULE
 - X Don't know → END OF MODULE
 - R Refused → END OF MODULE
- Q2. Have you had sexual intercourse with more than one person in the last 12 months?
- 1. Yes
 - 2. No → Q4
 - X Don't know → Q4
 - R Refused → Q4
- Q3. Do you use condoms every time you have sexual intercourse?
- 1. Yes
 - 2. No
 - X Don't know
 - R Refused
- Q4. Have you been diagnosed with a sexually transmitted infection in the last 12 months?
- 1. Yes
 - 2. No
 - X Don't know
 - R Refused
- Q5. What sexually transmitted infection were you diagnosed with? [MULTIPLE RESPONSE]
- 1. Gonorrhoea
 - 2. Syphilis
 - 3. Chlamydia
 - 4. Herpes
 - 5. HIV-AIDS
 - 6. Genital warts
 - 7. Other
 - 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 → Q3
 - 4. I've tried it a few times but never smoked regularly → Q3
 - 5. I've never smoked → Q3

- X Don't know → Q3
- R Refused → 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 6 months
 - 2. I am planning on quitting within the next 6 months
 - 3. I am planning on quitting within the next month
 - 4. I have not smoked in the past 24 hours but was smoking 6 months ago
 - 5. I have not been smoking in the past 6 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

Sun protection question module

The next few questions are about occasions last summer when you were outside in the sun for at least 15 minutes. Please think about actions you usually took for sun protection on these occasions.

- Q1. Last summer, how often did you go out in the sun for more than 15 minutes between 11.00 a.m. and 3.00 p.m.? [READ OUT]
- 1. Always
 - 2. Often
 - 3. Sometimes
 - 4. Rarely
 - 5. Never in the sun for more than 15 minutes → Q6
 - X Don't know → Q6
 - R Refused → Q6
- Q2. Last summer, when you were out in the sun for more than 15 minutes, how often did you wear a broad brimmed hat or cap with a back flap? [READ OUT]

- 1. Always
- 2. Often
- 3. Sometimes
- 4. Rarely or never
- X Don't know
- R Refused

Q3. Still thinking about last summer, how often did you apply a broad-spectrum sunscreen with a skin protection factor (SPF) of 15 or more to exposed skin?
[READ OUT]

- 1. Always
- 2. Often
- 3. Sometimes
- 4. Rarely or never
- X Don't know
- R Refused

Q4. Still thinking about last summer, how often were you deliberately dressed in clothing to protect you from the sun?
[READ OUT]

- 1. Always
- 2. Often
- 3. Sometimes
- 4. Rarely or never
- X Don't know
- R Refused

Q5. Still thinking about last summer, how often did you get sunburnt, so that your skin was still sore or tender the next day?

- 1. Not at all
- 2. Once
- 3. Twice
- 4. 3 or 4 times
- 5. 5 or more times
- X Don't know or don't recall
- R Refused

Q6. In your local area, when you are outside do you find it easy to find shade in sporting areas?
[INTERVIEWER NOTE: Shade can be natural; for example, trees or purpose-built clubhouse, shade awnings, etc.]

- 1. Yes
- 2. No
- 3. Not applicable
- X Don't know
- R Refused

Q7. In your local area, when you are outside do you find it easy to find shade at the outdoor public swimming pool?
[INTERVIEWER NOTE: Shade can be natural; for example, trees or purpose-built clubhouse, shade awnings, etc.]

- 1. Yes

- 2. No
- 3. Not applicable
- X Don't know
- R Refused

Q8. In your local area, when you are outside do you find it easy to find shade at the public park?
[INTERVIEWER NOTE: Shade can be natural; for example, trees or purpose-built clubhouse, shade awnings, etc.]

- 1. Yes
- 2. No
- 3. Not applicable
- X Don't know
- R Refused

Vision question module

The following questions are about your eyesight.

Q1. When did you last have your eyesight checked?

- 1. Less than one year ago.
- 2. 1 year ago to less than 2 years ago.
- 3. 2 years ago to less than 5 years ago.
- 4. 5 or more years ago.
- 5. Never
- X Don't know
- R Refused

Q2. As far as you know, do you have normal vision in both eyes?

- 1. Yes
- 2. No
- X Don't know
- R Refused

Q3. Do you currently wear glasses or contact lenses?

- 1. Yes
- 2. No → Q5
- X Don't know → Q5
- R Refused → Q5

Q4. Are you wearing glasses for reading or close work, distance or both?

- 1. Reading
- 2. Distance vision
- 3. Both
- X Don't know
- R Refused

Q5. (Even when wearing glasses or contact lenses) do you have any difficulty reading or doing close work?

- 1. Yes
- 2. No
- X Don't know
- R Refused