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 → END OF MODULE
   X Don’t know → END OF MODULE
   R Refused → 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 → 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 four weeks?
   1. Yes
   2. No → END OF MODULE
   X Don’t know → END OF MODULE
   R Refused → END OF MODULE

Q4. Do you use reliever medication (puffer or nebulizer) such as Ventolin, Respolin, Asmol, Airomir, or Bricanyl?
   1. Yes
   2. No → Q6
   X Don’t know → Q6
   R Refused → 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 → Q8
X Don’t know → Q8
R Refused → 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 → Q10
X Don’t know → Q10
R Refused → 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 → 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–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 question module
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 → Q6
   X Don’t know → Q6
   R Refused → Q6

Q3. How many people, including yourself, live in your household?
   1. ___ Number of people

Q4. How many children under six years of age live in this household?
   1. ___ Number of people

Q5. How many people aged 65 years old or over, live in this household?
   1. ___ Number of people

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–lives alone
   2. Mother
   3. Father
   4. Respondent’s partner

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?
   2. Completed HSC–Leaving–Year 12–6th Form
   3. TAFE Certificate or Diploma
   4. University, CAE 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
   2. Worked for payment or profit, but absent on paid leave, holidays, on strike or stood down
   3. Unpaid work in a family business
   4. Other unpaid work
   5. Other unpaid work
   6. Did not have a job
   X Don’t know
   R Refused

Q17. Did you look 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

Q20. In the last week, how many hours did you work in all jobs?
   1. _____ Number of hours[SPECIFY]

Q21. 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

Q22. Do you currently receive a government pension, allowance, or benefit?
   1. Yes
   2. No
   X Don’t know
   R Refused

Q23. 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

Q24. What type of accommodation do you live in? [PROMPT IF NECESSARY]
   1. Separate house
   2. Semi-detached–townhouse–terraced house–villa
   3. Unit, flat or apartment–granny flat
   4. Caravan, cabin, houseboat
   5. Improvised home, tent, sleepout
   6. House–flat attached to a shop–office
   7. Other [SPECIFY]______________________ (for example: hotel, retirement village)
Q25. 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

Q26. How long have you lived in your local area?
1. ____ years
X Don’t know
R Refused

Q27. 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 adult → Q3; If child or 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 adult → Q3; If child or male → Q6]
2. No → END OF MODULE
3. Borderline—If male → 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 manage your diabetes–high blood sugar
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 → Q2
2. No → END OF MODULE
3. Don’t need health care → END OF MODULE
X Don’t know → END OF MODULE
R Refused → END OF MODULE

Q2. Please describe the difficulties you have.
1. Description

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–poor?
1. Reasons

Environmental health question module

Now I have some questions about water usage.

Q1. What is your normal source of drinking water?
1. Public water supply
2. Bottled water
3. Rainwater
4. Private bore, spring or well
5. Other private supply [for example: creek or farm dam]
6. Combination of different water sources
7. Other [SPECIFY]
X Don’t know
R Refused

Q2. Do you treat your water before drinking?
[If Yes, how?]
1. No
2. Sometimes
3. Yes—Boiling
4. Yes—Filtering
5. Yes—Boil and filter
6. Yes—Other [SPECIFY]
X Don’t know
R Refused
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 → 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–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
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 → END OF MODULE
   X Don’t know → 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 → END OF MODULE
   X Don’t know → END OF MODULE
   R Refused → 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 → 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 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 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 four 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 four 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 four 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
   X Don’t know
   R Refused

Q6. In the past four 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 → Q7
   X Don’t know → Q7
   R Refused → Q7

Q7. In the past four 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 four 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 four 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 four 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 four 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

Q12. Aside from [that day–those (#) days], in the last four 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

Q13. In the last four weeks, how many times have you seen a doctor or other health professional about these feelings?
   1. ___ Number of consultations

Q14. In the last four weeks, how often have physical health problems been the main cause of these feelings? [READ OUT]
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 two 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–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 twelve 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 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 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—braces → Q8
   10. New or replacement dentures → Q8
   11. Teeth cleaned → Q8
   12. Fissure sealant → Q8
   13. Whitening—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 two years ago → Q9
   3. Two to less than five years ago → Q9
   4. Five to less than 10 years ago → Q9
   5. 10 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 hospital → END OF MODULE
   2. School dental service (SOKS) → 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 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 → 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 which 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
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–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 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 → Q3
   4. I’ve tried it a few times but never smoked regularly → Q3
   5. I’ve never smoked → Q3
   X Don’t know
   R Refused

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
4. 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