



1505
BOOKNOP

PARENTAL INTERVIEW cohort 15 - vi

SERIAL NUMBER; ____/____/____/____/____/____

INTERVIEWER NUMBER; ____/____/____/____/____/____/____/____/____INTNOP

STHRSP

STMINSP

TIME INTERVIEW STARTED; ____/____HR____/____MINS

First of all I'd like to ask you a bit about everyone who lives here. This will help me to know what further questions to ask about the other people in N's family or household. So could you please tell me who lives here, and what their relationship is to N?

(Exclude N. Use the grid on opposite page to record the answers to the following questions for each person listed)

(if not obvious from the category listed eg only name given)

1a How is he/she related to N?

(If not implied in relationship category eg lodger)

1b Is X Male of Female?

male.....1
female.....2

1c How old is X?

(record years. If only knows decade, give midpoint, eg 45 for '40s')

1d How would you describe X's health; for someone their age, would you describe their health in general as being excellent, good, fair or poor?

excellent.....1
good.....2
fair.....3
poor.....4
don't know.....&

(for person over 16 only)

1e Is X in paid employment, looking for work, or doing something else?

(if in paid employment probe to see whether full or part time and whether on a government training scheme)

in work full time (more than 30 hrs
per week).....01
in work part time (less than 30 hrs
per week).....02
waiting to start a job already
obtained.....03
unemployed and looking for work.....04
out of work and temporarily sick.....05
permanently sick or disabled.....06
wholly retired from work.....07
full time student (at college,
University etc).....08
still at school.....09
in YTS.....10
other government training scheme.....11
keeping house.....12
other (please specify.....13
.....)
don't know.....&&



2 Does anyone in this household have any longstanding illness, disability or infirmity? (by longstanding I mean anything that has troubled him/her over a long period of time, or that is likely to affect him/her over a period of time) (exclude N; explain that we ask this about him/her in more detail later on. Enter against person in grid below)

ANYCHRON yes.....1
 no.....2
 d/k.....&

(if yes; for each person ask;)

2a What is the matter with him/her?
 (write name of condition in grid below)

2b Does this illness or disability limit his/her activities in any way?
 (record on grid below)

yes.....1
 no.....2
 d/k.....&

2c How long has he/she had this condition?
 (record in years and decimals):

*=1 TO 9

REL* Relationship to N	SEXREL* 1b	AGEREL* 1c	HEAREL* 1d	ECOREL* 1e	CHRREL* 2	Condition 2a	LIMREL* 2b	YRSREL* 2c
1.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
2.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
3.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
4.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
5.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
6.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
7.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
8.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
9.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
10.....	1 2	___/___	___	___|___	1 2 &	.....	1 2 &	___/___
REL*10	SEXREL*10	AGEREL*10	HEAREL*10	ECOREL*10	CHRREL*10		LIMREL*10	YRSREL*10

3 Does n. have any brothers or sisters who have left home?

SIBSLFTP yes..... 1
 no..... 2
 d/k..... &] -----4->

3a I'd like to ask a bit about each of them.
 (record sex in grid below)

male.....1
 female.....2

3b How old is X?
 (record in grid in years)

3c When did (s)he leave home?
 (record last two digits of year)

3d Does s(he) have any children? If so, how many?
 (record number)

3e Is he/she married?
 single..... 1
 married..... 2
 cohabiting..... 3
 divorced..... 4
 separated..... 5
 widowed..... 6
 don't know..... &

3f Where does he/she live?
 (record name of place; area, estate, town etc)

3g Is he/she in paid employment, looking for work, or doing something else? (code as for page 1)

*=1 TO 6

	SEXSiB*	AGESiB*	WHENSiB*	KIDSSiB*	MSSiB*	place	EMPLSiB*
	sex	age	when	kids	m/s	place	empl
	3a	3b	3c	3d	3e	3f	3g
1	1 2	__/_	__/_	__/_			|
2	1 2	__/_	__/_	__/_			|
3	1 2	__/_	__/_	__/_			|
4	1 2	__/_	__/_	__/_			|
5	1 2	__/_	__/_	__/_			|
6	1 2	__/_	__/_	__/_			|

4 Can I just check, are you N's real mother, or are you his/her adoptive mother, stepmother, or something like that?.; (alternatively, say from list below what you think n's mother figure is; repeat for father figure. If there is any doubt as to whether the person is regarded as a parent figure, ask the respondent whether so regarded and code no parent figure if not)

MOTHER.....		FATHER
natural mother....1	---6→	natural father.....1 →6-
mother by legal adoption.....2		adoptive father.....2
stepmother.....3		stepfather.....3
foster mother....4		foster father.....4
grandmother.....5		grandfather.....5
elder sister.....6		elder brother.....6
cohabitee of father.....7		cohabitee of mother....7
other mother figure.....8		other father figure....8
(specify.....)		(specify.....)
no mother figure..9		no father figure.....9

If N is not living with his/her natural mother or father (if s/he is, go to 6).

5a What age was N when he/she last lived with his/her natural mother or father?

	mother;		father;	
LASTMA	___/___yrs &&		___/___yrs &&	LASTPA

5b What age was N when you (or current mother figure or father figure) took up responsibility for N?

	mother figure;		father figure;	
NEWMA	___/___yrs &&		___/___yrs &&	NEWPA

5c What happened to N's own mother/father, that N isn't living with her/him? How old was N when this happened? (record first main reason, eg separation if this preceded parental death)

		Y	N	DK	age	cause	
DEADMA	death of mother	1	2	...	AGEMAD		CAUSEMAD
					___/___ &&		
DEADPA	death of father	1	2	...	AGEPAD		CAUSEPAD
					___/___ &&		
SEPDIV	separation/divorce	1	2	...	AGESEP		
					___/___ &&		
NEVERMA	N never lived with mother ..	1	2	...			
NEVERPA	N never lived with father ..	1	2	...			
NOPAROTH	other (specify)	1	2	...	AGENOPAR		
					___/___ &&		

If the parents are natural parents residing in the household please ask the following.

6a How tall are you? (record to nearest half inch below)

mother		father
MAHTFT	MAHTINS	PAHTFT PAHTINS
___ft___/___ins&&&		___ft___/___ins&&&

6b How much do you weigh? (record to nearest pound below)

mother		father
MAWTST	MAWTLBS	PAWTST PAWTLBS
___/___stone	___/___lbs&&&&	___/___stone ___/___lbs&&&&

If the parents are natural parents

Can I ask you about your own parents? (If necessary check that these are the biological parents)

7 First I'd like to ask you about your mother(s).

7a Is your mother still alive?
(record on grid)

MGRMA

	grandmothers	
	maternal	paternal
	yes.....1	yes.....1
	no.....2	no.....2
	dk.....&	dk.....&
		PGRMA
		---7d->
		---8-->

7b How old is she now?

(record in years) MGRMAYRS ___/___&& ___/___&& PGRMAYRS

7c Where does she live?

(record place) _____ |

or

7d How old was she when she died?

(record in years) MGRMADD ___/___&& ___/___&& PGRMADD

7e What did she die of?

(record name of condition.)..... MGRMADC PGRMADC

8 Now I'd like to ask about your fathers.

8a Is your father still alive?
(record on grid)

MGRPA

	grandfathers	
	maternal	paternal
	yes.....1	yes.....1
	no.....2	no.....2
	dk.....&	dk.....&
		PGRPA
		---8d->
		---9-->

8b How old is he now?

(record in years) MGRPAYRS ___/___&& ___/___&& PGRPAYRS

8c Where does he live

(record place) _____ |

or

8d How old was he when he died?

(record in years) MGRPADD ___/___&& ___/___&& PGRPADD

8e What did he die of?

(record name of condition.)..... MGRPADC PGRPADC

If natural mother is present (if only natural father is present ask him)

9 I'd like to ask about N's early life;

9a How much did N weigh at birth?

(record to the nearest oz below; if can't remember weight, use codes below)

BWTLBS _____/_____/_____lbs_____/_____oz BWTOZ

small baby.....1
 average baby.....2
 large baby.....3 GENBWT
 don't know/can't remember.....&

9b Did you breast feed N? (or, Was N breast fed?)

BREASTFD yes..... 1 -----9c→
 no..... 2 -----9d→
 can't remember/DK..... &

9c If yes For how long?

(record in weeks)

_____/_____ wks && WKSFED

9d Were there any complications of the pregnancy, labour, delivery or immediate post-birth period?

BRTHCOMP yes..... 1
 no..... 2 -----9e→
 d/k..... &

9e If yes; what were they?

1 _____
 2 _____
 3 _____

all parents

I'd like to ask you now about N's history of health and illness.

10 What vaccinations or immunisations has N had; has he/she had

(read out)

	yes	no	d/k	
triple (diphtheria, whooping cough... and tetanus)	1.....	2.....	&	VACTRIP
triple without whooping cough.....	1.....	2.....	&	VACNOPER
measles.....	1.....	2.....	&	VACMEAS
polio.....	1.....	2.....	&	VACPOLIO
B.C.G. (T.B.).....	1.....	2.....	&	VACBCG
rubella (girls only).....	1.....	2.....	&	VACRUB

11. Has N had any of the following common childhood infectious diseases? (read out)

	yes	no	d/k	
german measles.....	1.....	2.....	&	RUBELLA
measles.....	1.....	2.....	&	MEASLES
mumps.....	1.....	2.....	&	MUMPS
whooping cough.....	1.....	2.....	&	WHOOPC
chicken pox.....	1.....	2.....	&	CHICKPOX
And what about;				
meningitis.....	1.....	2.....	&	MENING
glandular fever.....	1.....	2.....	&	GLANDFEV

12. Does N have any longstanding illness, disability or infirmity?
 (by longstanding I mean anything that has troubled him/her over a long period of time or that is likely to affect him/her over a period of time).

yes	1	LSTANDP
no	2	] -----13→
d/k	&	

12a If yes; What is the matter with him/her?

LSTANDP1

1. _____

LSTANDP2

2. _____

12b Does this illness or disability limit his/her activities in any way?

LSiLiM1 LSiLiM2

	1	2
yes.....	1.....	1
no.....	2.....	2
d/k.....	&.....	&

12c In what ways does it limit his/her activities (or, what activities does it limit)?

1. _____

2. _____

12d How long has he/she had this condition?

LSiYRS1 1 ____/____/.____yrs && 2 ____/____/.____yrs && LSiYRS2

13 How would you describe N's health; for someone his/her age would you describe his/her health as being in general excellent, good, fair or poor?

- excellent.....1
- good.....2 PAHAGEN
- fair.....3
- poor.....4
- d/k.....&

14a Now I'd like to ask you about N's history of health and illness. Firstly, can you tell me of any serious illnesses that N has had during his/her lifetime? By serious illness I mean anything that might have involved being in hospital, in bed, or off school, for over a month at a time. Perhaps you could start when N was very young. (record name of illness, age at which it occurred, length of time off school (in weeks), and treatment/management)

condition	age	weeks off	treatment/management			
			home/operation/other gp only	in pt	in pt	out d/k only
ILL1P	AGEiILL1P	OFFiILL1P				TREATiL1
1.			1.....2.....3.....4....&			
2.			1.....2.....3.....4....&			TREATiL2
3.			1.....2.....3.....4....&			TREATiL3
4.			1.....2.....3.....4....&			TREATiL4
5.			1.....2.....3.....4....&			
6.			1.....2.....3.....4....&			

14b What about any (other) accidents or injuries that might have required medical or surgical attention. Can you tell me about those? (code treatment/management as above)

type of accident	age	weeks off	place	treatment/management	
INJACC1	AGEACC1P	OFFACC1P	PLACACC1		TREATAC1
1.				1....2....3....4....&	
2.				1....2....3....4....&	TREATAC2
3.				1....2....3....4....&	TREATAC3
4.				1....2....3....4....&	TREATAC4
5.				1....2....3....4....&	
6.				1....2....3....4....&	

14c And what about any other times N has been in hospital at all? What was that for?

condition	age	weeks off	
HOSP1P 1.	AGEHOSP1	off	OFFHOSP1
HOSP2P 2.	AGEHOSP2		OFFHOSP2
HOSP3P 3.	AGEHOSP3		OFFHOSP3
4.			

14d And has N had any other operations you haven't mentioned?

operation	age	weeks off	
1	AGEOPS1	off	OFFOPS1
2	AGEOPS2		OFFOPS2
3	AGEOPS3		OFFOPS3
4			

*

Now I'd like to ask you a bit about N's contacts with the health and welfare services.

15 Is N registered with a general practitioner?

yes.....1
 no.....2---15d-->
 GPREG d/k.....&---19---->

15a What's the name and address of the general practitioner (or surgery) with whom N is registered?

name of doctor/practice:

.....

15b Why is N registered with that doctor or at that practice?
 (If more than one reason given, push for main reason)

GPWHY nearest practice.....1
 one or both parents attend.....2
 recommended.....3
 other (specify.....4

 d/k.....&

15c Is that the same practice as yours' (his/her parents?)

mother's father's
 yes..... 1..... 1
 GPSAMEMA no..... 2..... 2 GPSAMEPA
 DK..... &..... &

15d Why is N not registered with a doctor or practice at the moment?

.....
.....

16a How does N usually get to the doctor's surgery

- walk.....1
- bus.....2
- underground.....3
- car.....4 GPGETTO
- more than one of above.....5
- (specify.....)
-)
- other (specify.....6
-)
- d/k.....&

16b How long does it take N to get there?

- 5 mins or less.....1
- 6-15 mins.....2 GPDiST
- 16-30 mins.....3
- 31-60 mins.....4
- > one hour.....5
- d/k.....&

16c How easy is it to make an appointment for N to see his/her doctor (other than in an emergency)? Can you usually get an appointment;

- on the same day.....1
- the next day.....2
- within 2-3 days.....3 GPAPPT
- within 4-5 days.....4
- usually have to wait
- longer than 5 days.....5
- no appointments system.....6
- d/k.....&

17a How happy are you with the practice N goes to ?
(SHOW CARD A) .

- very happy.....1
- quite happy.....2
- neither happy nor unhappy.....3
- quite unhappy.....4 GPSATIS
- very happy.....5
- d/k.....&

17b What makes you say that?

.....
.....

18a When N goes to the family doctor/GP, do you, or does someone else in the family or household, usually accompany him/her, either just to the surgery or into the consulting room as well?

GPACCOMP

yes, someone accompanies to premises and consultation 1
 yes, someone accompanies to premises but not consultation ... 2
 no, usually goes on own 3
 d/k & -----19→

(If coded 1 or 2 above;)

18b Who is it that usually goes with him/her?

.....
 GPACCWHO

19 In the last 12 months, have you asked for a home visit from your family doctor for anyone in this household?

yes..... 1 GPHOMEYR
 no..... 2
 d/k..... & -----20→

19a Who was that for?
 (record in grid below)

19b And what was that for?

19c Did you have any difficulties getting a GP to pay a home visit?

	For whom 18a	Why 18b	trouble 18c			
			Y	N	D/K	
GPYRWHO1	1		1	2	&	GPTROUB1
GPYRWHO2	2		1	2	&	GPTROUB2
GPYRWHO3	3		1	2	&	GPTROUB3
GPYRWHO4	4		1	2	&	GPTROUB4

20a Has N ever used any of the following services?,
(read out each one, code use in grid below);

20b How old was he/she at the time?
(record age in years in grid below)

20c What was the reason for that?
(record brief details, trying to get at severity of episode)

	used 20a Y N D/K	age 20b	reason 20c
SPUSED speech therapist.....	1..2...&	AGESP _____/_____ &&	_____
ORTHUSED orthodontist.....	1..2...&	AGEORTH _____/_____ &&	_____
HYGUSED dental hygienist.....	1..2...&	AGEHYG _____/_____ &&	_____
ALLUSED allergy testing service.....	1..2...&	AGEALL _____/_____ &&	_____
CARUSED careers/employment service outside school.....	1.2...&	AGECAR _____/_____ &&	_____
PSYUSED child guidance/ psychiatry.....	1..2...&	AGEPSY _____/_____ &&	_____
COMPUSED complementary/ alternative medicine.	1..2...&	AGECOMP _____/_____ &&	_____
SOCUSED social work (local authority or voluntary).....	1..2...&	AGESOC _____/_____ &&	_____
POLUSED police/childrens hearing.....	1..2...&	AGEPOL _____/_____ &&	_____

21 About how many times in the last 12 months have you consulted a GP or family doctor on your own behalf?

	mother	father
NGPYRMA	_____/_____ &&	_____/_____ && NGPYRPA

22 And about how long ago was your last visit to the dentist?

	DNTLSTMA mother	DNTLSTPA father
less than 6 months.....	1.....	1
less than a year.....	2.....	2
less than 2 years.....	3.....	3
less than 5 years.....	4.....	4
less than 10 years.....	5.....	5
ten years ago or more.....	6.....	6
false teeth, not applicable..	7.....	7
d/k.....	&.....	&

-----23-->

if has been to the dentist in last five years (coded 1-4 above)

22a In general, do you go to the dentist for a regular check up, an occasional check up, or only when you're having trouble with your teeth?

	DNTREGMA	DNTREGPA
	mother	father
regular check up.....	.....1.....	..... 1
occasional check up.....	.....2.....	..... 2
only when troubled.....	.....3.....	..... 3
false teeth, n/a.....	.....4.....	..... 4
d/k.....&..... &

23 (You've mentioned people currently in this household with longstanding illnesses or disabilities). At any (other) stage of N's life, has s/he lived in a household containing anyone with a prolonged or serious mental or physical illness or disability or handicap?

(please include illness in mother, father, other adults and children in household; exclude n)

	yes.....	1	
HLSi	no.....	2	-----24-->
	d/k.....	&	

if yes ie coded 1 above

23a Who was that?	recovered.....	1
23b What was wrong with him/her?	died.....	2
23c When did that start?	left the household.....	3
23d What happened to X?	n left household.....	4
23e When was that?	institutionalised.....	5
	still present.....	6

	relationship to N 23a	name of condition 23b	year of onset HLSi1YST	outcome 23d HLSi1OUT	year of outcome HLSi1YF
HLSi1	1		|		|
HLSi2	2		HLSi2YST	HLSi2OUT	HLSi2YF
HLSi3	3		|		|
HLSi4	4		HLSi4YST	HLSi4OUT	HLSi4YF

*

We're interested in knowing a few details about the schools N has been to in his/her life. Can we start right back at the beginning;

24 Did N attend any nursery schools or playgroups before he/she went to primary or preparatory school?

	yes.....	1
NURSERY	no.....	2
	d/k.....	&

25a How old was N when he/she first went to primary/preparatory school?(record age in years;)

_____/____ yrs&& AGEPRIM

25b How many primary/preparatory schools did N attend?

_____/____ && NPRIM

25c Can you tell me what type of school(s) it was/they were?

(prompt; state/private; catholic/non-catholic; ordinary/special etc) (record in grid below)

PRiM1 PRiM2 PRiM3 PRiM4 PRiM5

25d Was that boarding or day?

(record in grid below)

PRiM1DAY PRiM2DAY PRiM3DAY PRiM4DAY PRiM5DAY

26a How many secondary schools has N attended?

_____/____ && NSEC

26b What type of school is that/are they?

(prompt; state, private; catholic/non catholic; ordinary/special etc, and record in grid below)

SEC1 SEC2 SEC3 SEC4 SEC5

26c Was that boarding or day?

(record in grid below)

SEC1DAY	SEC2DAY	SEC3DAY	SEC4DAY			SEC5DAY					
		1480	1482	1484	1486	1488	1490	1492	1494	1496	1498
		primary school				secondary school					
		1	2	3	4	5	1	2	3	4	5
L.A. non denominational.....		01	01	01	01	01	01	01	01	01	01
L.A. Roman Catholic.....		02	02	02	02	02	02	02	02	02	02
private non denominational		03	03	03	03	03	03	03	03	03	03
private Roman Catholic		04	04	04	04	04	04	04	04	04	04
private other denomination		05	05	05	05	05	05	05	05	05	05
list 'D' school.....		06	06	06	06	06	06	06	06	06	06
special tuition in											
hospital		07	07	07	07	07	07	07	07	07	07
home tuition.....		08	08	08	08	08	08	08	08	08	08
local authority special.....		09	09	09	09	09	09	09	09	09	09
other special.....		10	10	10	10	10	10	10	10	10	10
other.....		11	11	11	11	11	11	11	11	11	11
d/k.....		&&	&&	&&	&&	&&	&&	&&	&&	&&	&&
		1481	148	148	148	148	149	149	149	149	149
			3	5	7	9	1	3	5	7	9
day.....		1	1	1	1	1	1	1	1	1	1
boarding (termly).....		2	2	2	2	2	2	2	2	2	2
boarding (weekly).....		3	3	3	3	3	3	3	3	3	3
other (specify).		4	4	4	4	4	4	4	4	4	4
d/k.....		&	&	&	&	&	&	&	&	&	&

27a if moved between categories of primary schools;Why did N move between X type of school and Y type of school?

.....

27b if moved between categories of secondary schools;Why did N move between X type of school and Y type of school?

.....

28a What is the name of the school N attends now?

.....

28b How happy are you with that school?

Small?-> (USE CARD A AGAIN)

- very happy.....1
- quite happy.....2
- neither happy nor unhappy.....3
- quite unhappy.....4 SCHHAPPY
- very happy.....5
- d/k.....&

28c What makes you say that?

.....

29 Some people think it's very important that their children do well at school, and other people don't think it's too important. What do you think? Would you say N's doing well at school is very important, fairly important, a bit important, or not important?

- very important.....1
- fairly important.....2
- a bit important.....3 SCHiMP
- not important.....4
- DK.....&

30 Thinking about all the subjects N does at school, can you say roughly how good (s)he is at them compared to other people of the same age? Is (s)he average, above average, below average?

(if says above or below average, prompt to get whether very much so)

- very much above average..... 1
- above average..... 2
- average..... 3
- below average..... 4 SCHWELL
- very much below average..... 5
- DK..... &

31a What would you like N to be doing this time next year? **LiKE88**
(prompt if necessary from the list below and record in first column)

31b What do you think N is in fact likely to be doing this time next year?
(prompt with same categories if necessary, and record in second column below)

- | | | | |
|-------------------------------------|------|-------|----------------|
| | like | think | |
| still at school.....1.....1 | | | |
| have a job.....2.....2 | | | THINK88 |
| be on YTS.....3.....3 | | | |
| be unemployed.....4.....4 | | | |
| depends on exam results.....5.....5 | | | |
| don't mind.....6.....6 | | | |
| other (specify.....7.....7 | | | |
|) | | | |
| don't know.....&.....& | | | |

32a What type of work would you like N to do?
(record job title or more general description)

.....

32b What type of work do you think N in fact is likely to do?
(record job title or more general description)

.....

*

We're interested in finding out whether or not young people take after their parents in habits that might affect their health. I'd therefore like to ask you a few questions about things you (and your husband/wife/partner) do.

33 First of all I'd like to ask you about smoking. Which of these statements describes you best? (read out).

	CiGSMA	CiGSPA	
	M	F	
I have never smoked.....	1...	1	]-----34->
I only tried smoking once or twice..	2.....	2	
I used to smoke but have given up.....	3.....	3	
I smoke occasionally (sometimes).....	4.....	4	
I smoke regularly.....	5.....	5	

If smokes now, i.e. coded 4 or 5 above.

33a How many cigarettes do you usually smoke in a week?
(if respondent finds it difficult to answer, work from number per day and multiply up to get weekly total)

	mother	father
	NCiGSMA	NCiGSPA
number of cigs per week:	___/___/___&&&	___/___/___&&&
or	TOBACMA	TOBACPA
number of ounces of tobacco		
per week:	___/___/___&&&	___/___/___&&&
or	CiGARMA	CiGARPA
number of cigars per week:	___/___/___&&&	___/___/___&&&

33b What brand of cigarettes, cigars or tobacco do you usually smoke?

mother	father
.....

34 I'd like to turn now to drinking alcohol. Which of these statements describes you best?

	DRiNKMA	DRiNKPA	
I have never drunk alcohol			
or have only tried it a few times.....	1.....	1	]-----35->
I used to drink but have given it up.....	2.....	2	
I only drink on special occasions.....	3.....	3	
I drink occasionally.....	4.....	4	
I drink regularly.....	5.....	5	
d/k.....	&.....	&	

34a Thinking of last week; how much of the following did you drink?
 (read out each type of drink and complete frequency in grid below. Prompt for wine with meals)

		mother	father	
LAGERMA	lager (pints).....	_____ &&	_____ &&	LAGERPA
BEERMA	beer (pints).....	_____ &&	_____ &&	BEERPA
STOUTMA	stout (pints).....	_____ &&	_____ &&	STOUTPA
SHANDYMA	shandy (pints).....	_____ &&	_____ &&	SHANDYPA
CIDERMA	cider (pints).....	_____ &&	_____ &&	CIDERPA
SPIRITMA	spirits (singles)..	_____ &&	_____ &&	SPIRITPA
LIQUMA	liqueurs (glass)...	_____ &&	_____ &&	LIQUPA
SHERRYMA	sherry/.....	_____ &&	_____ &&	SHERRYPA
	martini (glass)			
WINEMA	wine (glass).....	_____ &&	_____ &&	WINEPA

34b And would you say that the amount you drank last week was fairly typical of what you would usually drink in a week, or would you say that it was more or less than you would usually drink?
 (if says more or less, probe for how much more or less)

	DRiNKAVM	DRiNKAVP
	M.	F.
drank much less than usual ..1		
drank about half as much		
as usual .....2		
.....3		
drank about the same as		
usual .....4		
.....5		
drank about twice as usual ..6		
drank much more than usual ..7		
d/k&		

35. Do you take part in any physically active sports or recreations; anything that would get you out of breath and sweat, and that you'd do for at least 20 minutes at a time?

	SPORTMA	SPORTPA
	M	F
yes.....	1	1
no.....	2	2
d/k.....	&	&

-----36→

If yes, i.e. coded 1 above

35a How often do you take part in any physically active sports or recreation?

	SPORTMAF	SPORTPAF
	M	F
more than once a day	01	01
once a day	02	02
4-6 days a week	03	03
2-3 days a week	04	04
once a week	05	05
at least once a fortnight ...	06	06
at least once a month	07	07
at least once every 3 months	08	08
at least once every 6 months	09	09
at least once a year	10	10
less than once a year	11	11
never	12	12
varies	13	13
d/k	&&	&&

35b What sports/recreations do you take part in?
(if more than 3, record main three)

	mother	father	
SPMATYP1	1.....	1.....	SPPATYP1
SPMATYP2	2.....	2.....	SPPATYP2
SPMATYP3	3.....	3.....	SPPATYP3

*

I'd like now to ask a bit about N's family circumstances.

having checked back to grid on p2; if currently in work;

36 Can you tell me what your current job is? (try to get as detailed a description as possible)	mother	father	CLASSMC
	.....	.....	SEGMC
36a What trade, industry or profession is that in? (or, what does your firm/company/you make/do?)			CLASSFC
	.....	.....	SEGFC
36b Are you self employed? how many employees do you have?	family only 1	1	
	1-24 emps 2	2	
	25 or more 3	3	
	dk 4	4	
or an employee?	manager 5	5	
	foreman /super 6	6	
	other emp 7	7	
	dk 8	8	
or unemployed	unempl 9	9	

if not currently in work

	mother	father	
37 Can you tell me what your last regular job was? (try to get as detailed a description as possible)	.....	.....	CLASSML
	.....	.....	SEGML
37a What trade, industry or profession was that in? (or, what does your firm/company/you make/do?)	.....	.....	CLASSFL
	.....	.....	SEGFL
37b Were you self employed? how many employees did you have?	family only 1	1	
	1-24 emps 2	2	
	25 or more 3	3	
	dk 4	4	
or an employee?	manager 5	5	
	foreman/		
	super 6	6	
	other emp 7	7	
	dk 8	8	
or never employed	not emp 9	9	
37c When did that job finish?	.....	.....
37d Why did that job end?	.....	.....
38) Can you tell me; (mother)what job you had before you had children ? (father) at around the time N was born? (try to get as detailed a description as possible)	mother	father	CLASSMO
	.....	.....	SEGMO
	
38a What trade, industry or profession was that in? (or, what does your firm/company/you make/do?)	.....	.....	CLASSFO
	.....	.....	SEGFO
38b Were you self employed? how many employees did you have?	family only 1	1	
	1-24 emps 2	2	
	25 or more 3	3	
	dk 4	4	
or an employee?	manager 5	5	
	foreman		
	/super 6	6	
	other emp 7	7	
	dk 8	8	
or unemployed	unempl 9	9	

if yes,
41b Which one(s)?

- 1 _____ DPAPER1
- 2 _____ DPAPER2
- 3 _____ DPAPER3

41c) And what about a Sunday newspaper; do you usually have a sunday newspaper in the household?

- yes..... 1 SPAPER
- no..... 2
- d/k..... & -----42→

if yes;
41d Which one(s)?

- 1 _____ SPAPER1
- 2 _____ SPAPER2
- 3 _____ SPAPER3

42 I'm going to read out a list of things which some people have in their homes. Do you have any of these in this home?

- | | Y | N | DK | |
|---------------------------|--------|--------|----|----------|
| telephone | 1..... | 2..... | & | PHONE |
| TV set..... | 1..... | 2..... | & | TVSET |
| freezer/ deep freeze..... | 1..... | 2..... | & | FREEZER |
| washing machine..... | 1..... | 2..... | & | WASHMACH |
| dishwasher..... | 1..... | 2..... | & | DiSHWASH |
| video recorder..... | 1..... | 2..... | & | ViDEO |
| home computer..... | 1..... | 2..... | & | COMPUTER |
| microwave oven..... | 1..... | 2..... | & | MicWAVE |
| central heating..... | 1..... | 2..... | & | CHEATING |

43 How often does N sit down together with the rest of the family - for a meal?

- more than once a day01
- once a day02
- 4-6 days a week03
- 2-3 days a week04
- once a week05 SITDOWNNF
- at least once a fortnight ...06
- at least once a month07
- at least once every 3 months 08
- at least once every 6 months 09
- at least once a year10
- less than once a year11
- never12
- varies13
- d/k&&

44 Now I'd like to ask you about various things that have to be done about the house, and who does them in this household. I'm going to read out a list of tasks and I'd like you to tell me who MAINLY does each one; yourself, your husband/wife/spouse/partner, the children, or some other arrangement? (read out each activity and record below, using the coding given below)

	activity	M	F	N	sibs	paid help	welf are	var ies	not done
DLSHOP	food shopping.....	1	2	3	4	5	6	7	8
DLCOOK	planning and cooking								
	meals.....	1	2	3	4	5	6	7	8
DLDECOR	painting/decorating....	1	2	3	4	5	6	7	8
DLREPAIR	minor household								
	repairs.....	1	2	3	4	5	6	7	8
DLBiLLS	handling/paying bills.	1	2	3	4	5	6	7	8
DLVACUUM	vacuuming.....	1	2	3	4	5	6	7	8
DLCLEAN	cleaning the house.....	1	2	3	4	5	6	7	8
DLDiSHES	washing dishes.....	1	2	3	4	5	6	7	8
DLIRON	washing / ironing								
	clothes.....	1	2	3	4	5	6	7	8
DLKiDS	taking care of the								
	children.....	1	2	3	4	5	6	7	8
DLDiSCiP	disciplining the								
	children.....	1	2	3	4	5	6	7	8

45 Where are the following sorts of food mainly bought for this household?
(SHOW CARD B and read out list of foods)

		del	van	spec	loc	super	var	not	dk
				ial	al	mart	ies	bt	
BUYBREAD	bread.....	1	2	3	4	5	6	7	&
BUYMEAT	meat.....	1	2	3	4	5	6	7	&
BUYFiSH	fish.....	1	2	3	4	5	6	7	&
BUYVEG	vegetables								
	/fruit.....	1	2	3	4	5	6	7	&
BUYGROC	groceries...1.....	1	2	3	4	5	6	7	&
BUYMiLK	milk.....	1	2	3	4	5	6	7	&

46) Money is often a worry when bringing up children and trying to do your best for them by keeping them healthy and happy. Can I ask what have been the sources of income of this household during the last 12 months?

(SHOW CARD C and ask respondent to read out all that apply; ring the appropriate numbers below.)

=1 TO 10 ,SINCOME, CODED 11 TO 71 from list below.

- | | | | |
|---------------------------------------|--|--|--|
| <u>Employment;</u> | | <u>Housing;</u> | |
| 11 father's employment | | 41 rent or rates rebates | |
| 12 mother's employment | | 42 housing benefit | |
| 13 brothers'/sisters' employment | | | |
| 14 other adult's employment | | <u>Non contributory benefits;</u> | |
| 15 casual earnings | | 51 family income supplement | |
| 16 maintenance from ex spouse | | 52 supplementary benefit | |
| | | 53 one parent benefit | |
| | | 54 child benefit | |
| <u>Investment etc;</u> | | | |
| 21 investment/private income | | | |
| 22 annuities/pensions from Employment | | | |
| <u>Contributory benefits;</u> | | <u>Disability;</u> | |
| 31 unemployment benefit | | 61 attendance allowance | |
| 32 sickness benefit | | 62 mobility allowance | |
| 33 retirement pension | | 63 disability pension | |
| 34 widows' pension/allowance | | 64 invalid care allowance | |
| 35 maternity allowance | | 65 industrial injury benefit | |
| | | 71. any other sources (please specify;.....) | |

-
- 47 Does N have free school meals?
- | | |
|----------|----------------------------|
| FREEMEAL | yes.....1 |
| | no.....2 |
| | in the past, not now.....3 |
| | d/k.....& |

48 And I also have here a list of ranges of income. In which of these ranges does your household income fall? I mean what comes in to the household to spend, after deductions for tax, national insurance, pensions and so on. Please remember to include social security benefits, pensions, and any unearned income.
(HAND CARD D. Allow the interviewee to use the weekly or monthly figure, whichever is the easiest for him/her. Ring the numeral.)

weekly		monthly	
£		£	
<50.....A.....01.....		<214	
50-99.....B.....02.....		215-434	
100-149.....C.....03.....		435-649	
150-199.....D.....04.....		650-864	
200-249.....E.....05.....		865-1,084	HINCOME
250-299.....F.....06.....		1,085-1,299	
300-349.....G.....07.....		1,300-1,514	
350-399.....H.....08.....		1,515-1,729	
400-449.....I.....09.....		1,730-1,949	
450-499.....J.....10.....		1,950-2,164	
500 and over.....K.....11.....		2,165 and over	
d/k.....L.....&&.....		d/k	

49 How difficult is it as a household to make ends meet? If I asked you to put this household on a scale from 1-5, with 1 being very easy to make ends meet and 5 being impossible, where would you put this household?

	very easy.....	1
	.....	2
ENDSMEET	.....	3
	.....	4
	impossible.....	5

50 Do you own this house/flat, rent it, does it come with someone's job, or are you staying with relatives?

	owned.....	1-----	50a-→
	rented.....	2-----	50b-→
HTENURE	tied house.....	3-----	50c-→
	relative's house.....	4-----	50e-→
	d/k.....	&-----	51--→

if owned (coded 1 above)

50a Do you own it outright, or do you have some sort of loan agreement?

MORGAGE

	owned outright.....	1
	building society mortgage.....	2
	local authority mortgage.....	3
	bought from council as sitting tenant.....	4
	other loan arrangement.....	5
	(specify.....)	
)	
	d/k.....	&

if rented (coded 2 above)

50b Who is it rented from?

HRENTAL

	local authority/council;	
	Glasgow.....	01
	Renfrew.....	02
	Eastwood.....	03
	East Kilbride.....	04
	Hamilton.....	05
	Motherwell.....	06
	Monklands.....	07
	Cumbernauld and Kilsyth.....	08
	Strathkelvin.....	09
	Bearsden and Milngavie.....	10
	Clydebank.....	11
	Scottish Special H.A.....	12
	Other housing association.....	13
	New Town Corporation.....	14
	Employer.....	15
	Property company.....	16
	Private individual.....	17
	Other (specify.....)	18
)	
	d/k.....	&&

if tied house (coded 3 above)

50c Who owns it (or who is the employer who supplies it?)

.....

50d Do you pay. . . . ?

	Y	N	DK	
rent.....	1.....	2.....	&	HPAYRENT
rates.....	1.....	2.....	&	HPAYRATE
heating/ lighting....	1.....	2.....	&	HPAYHEAT

If relatives (coded 4 above)

50e Which relatives are you staying with?

N's mother's parent(s)..	1	
N's father's parents(s)..	2	RELHOME
other (specify).....		
.....	3	

50f Do they own this accommodation, rent it, or what?

owner occupied.....	1	
council tenant.....	2	RELTENUR
private tenant.....	3	
goes with someone's job.	4	
other (specify).....	5	
.....		

51 What rooms do you have?

(enter number of rooms for exclusive use by the household. If they don't have this room, code 0. If room used for more than one purpose, enter against main purpose)

LIVERM	living room	<input type="checkbox"/>	other public	<input type="checkbox"/>	PUBROOM
BEDRM	bedroom	<input type="checkbox"/>	kitchen	<input type="checkbox"/>	KITCH
BATHRM	bathroom	<input type="checkbox"/>	separate w.c	<input type="checkbox"/>	TOILET
BEDSiT	bedsit	<input type="checkbox"/>	other	<input type="checkbox"/>	OTHERRM

51a Are any of these rooms unusable because of poor state of repair, dampness, or anything like that?

	yes.....	1	
	no.....	2	
DAMPRM	d/k.....	&	-----51c→

if yes

51b Which ones are unusable?

51c Does N have his/her own bedroom, or does (s)he share it?

	own bedroom.....	1
	shared bedroom.....	2
OWNRM	sleeps in other room.....	3
	(eg sitting room)	
	d.k.....	&

52 Does N have his/her own key to the house?

yes , all the time.....1
 yes, when necessary.....2 OWNKEY
 no.....3
 d/k.....&

53 Do you have any pets in the household?

yes..... 1 ANYPETS
 no..... 2
 d/k..... & -----54->

if yes;

53a What are the pets, and how many of them are there?
 (enter number against each category)

dog.....& DOGS
 cat.....& CATS
 bird.....& BIRDS
 rabbit.....& RABBITS
 small
 rodent.....& RODENTS
 fish.....& FiSH
 other.....& PETOTHER
 (specify;

54 Do you have a garden or yard? If yes, do you have sole use of it, or is it shared?

sole use..... 1
 shared use..... 2 GARDEN
 none..... 3
 d/k..... & -----55->

54a What do you use it for?

(prompt from list if necessary; code all that apply)

	Y	N	DK	
children play there.....	1	2	&	GKiDS
gardening.....	1	2	&	GGARDEN
family sit there.....	1	2	&	GSiT
drying green.....	1	2	&	GDRY
pets use it.....	1	2	&	GPETS
nothing/put rubbish out	1	2	&	GNOTHiNG
other (specify.....	1	2	&	GOTHER

55 Is dampness or condensation a problem here? I don't mean just the sort of condensation that leaves water on your window panes, but on the walls and so on. (if yes, ask whether it is a minor or major problem)

- major problem..... 1
- minor problem..... 2 DAMPCOND
- not a problem..... 3
- d/k..... &

56 Is there anything about this accommodation which you feel is hazardous to your family's safety or mental or physical health?

56a Think first of the inside of your house/flat;

- yes..... 1 HSAFEiN
- no..... 2 -----56c→
- d/k..... &

if yes,

56b What is that?

.....

56c Now what about the outside of the building, including parts you share with neighbours, or in the immediate vicinity; is there anything there that you think is hazardous to safety or mental or physical health?

- yes..... 1 HSAFEOUT
- no..... 2 -----57→
- d/k..... &

56d if yes What is that?

.....

57 How happy are you with this accommodation for your household? (REFER TO CARD A AGAIN).

- very happy..... 1
- quite happy..... 2
- neither happy nor unhappy..... 3
- quite unhappy..... 4 LIKEHOME
- very happy..... 5
- d/k..... &

57b What makes you say that?

.....

Until now we've been talking about the actual building you live in, but we're also interested in your views about the local area.

58 Can I just check, what do you call this local area?

58a How happy are you with this local area as a place in which to live and bring up children ?

(USE CARD A AGAIN)

very happy.....1
 quite happy.....2
 neither happy nor unhappy.....3
 quite unhappy.....4 LIKEAREA
 very happy.....5
 DK.....&

(note two very happy)

58b What makes you say that?

&

59a How would you rate this local area as far as the following amenities are concerned?

(HAND CARD E. Read out each in turn and code in first section of grid below)

59b How important is that to your household? Is it /are they very important, fairly important, a little bit important, or not important?

(record in second half of grid below)

		rating							importance					
		vg	g	av	b	vb	na	du	dk	v	f	l	n	
RATEPLAY	safe places for children to play.....	1	2	3	4	5	6	7	&	1	2	3	4	IMPPLAY
RATESHOP	food shops.....	1	2	3	4	5	6	7	&	1	2	3	4	IMPSHOP
RATEPRCE	shop prices.....	1	2	3	4	5	6	7	&	1	2	3	4	IMPPRCE
RATETRAN	public transport.....	1	2	3	4	5	6	7	&	1	2	3	4	IMPTRANS
RATESERV	access to health services	1	2	3	4	5	6	7	&	1	2	3	4	IMPSEV
RATEENTS	entertainment facilities.	1	2	3	4	5	6	7	&	1	2	3	4	IMPENTS
RATESPOR	sports facilities...	1	2	3	4	5	6	7	&	1	2	3	4	IMPSPOR
RATEEMPL	employment opportunities.	1	2	3	4	5	6	7	&	1	2	3	4	IMPEMPL
RATESCHL	secondary schools...	1	2	3	4	5	6	7	&	1	2	3	4	IMPSCHL
RATEHOUS	housing.....	1	2	3	4	5	6	7	&	1	2	3	4	IMPHOUS
RATEYPEM	jobs for young people leaving school	1	2	3	4	5	6	7	&	1	2	3	4	IMPYPEM

59c Do you think any of the following are problems in this area? (establish whether considered a major or minor problem and code in grid below)

59d Has that ever affected you personally?

(code in second half of grid below)

		problem				personal				
		Maj	Min	No	DK	Y	N	DK		
AVANDALS	vandalism.....	1	2	3	&	1	2	&	RVANDALS	
ALITTER	litter/rubbish.....	1	2	3	&	1	2	&	RLITTER	
ASMELLS	obnoxious smells/fumes...	1	2	3	&	1	2	&	RSMELLS	
AASSAULT	muggings/assaults.....	1	2	3	&	1	2	&	RASSAULT	
	disturbances from									
ASTREET	youngsters in the street.....	1	2	3	&	1	2	&	RSTREET	
ABURGL	burglaries.....	1	2	3	&	1	2	&	RBURGL	

60) How many different addresses has N lived at since birth?

- 1..... 1 ----61->
- 2..... 2
- 3..... 3 ADDRESS
- 4..... 4
- 5 or more..... 5
- dk..... & -----61->

60a Where were you (his/her parents) living when he/she was born?
 (record name of area, estate, or town)

60b When did you (or s/he) come to live at this address?
 (record last two digits of year)

_____/_____ && WHENMOVE

60c Where did you (or s/he) live before you moved to this address?
 (ring either 1 or 2 and write in write/ in/ either street address or city/county/country as indicated)

within study region,
 street address and area..1 PREVA

.....

outside study region,
 city/county/country.....2

.....

60d Have you ever moved house, or moved from one area to another, because of your child(ren)s health or education.

- yes..... 1 KIDSMOVE
- no..... 2]
- d/k..... &] -----61->

60e if yes; why was that?

*

61 Do you currently belong to any religious group or church?

- | | RELMEMMA | RELMEMPA | |
|----------|----------|----------|-----------|
| | M | F | |
| yes..... | 1 | 1 | |
| no..... | 2 | 2 | ---> |
| d/k..... | & | & | -----62-> |

if yes for either

61a What religious group or church do you belong to?
(code religion/denomination on grid below)

	CHURCHMA	CHURCHPA
	M	F
Protestant;		
Church of Scotland.....	01.....	01
Episcopalian/Anglican.....	02.....	02
Free Church.....	03.....	03
Free Presbyterian.....	04.....	04
Methodist.....	05.....	05
Baptist.....	06.....	06
Other prot. (specify).....	07.....	07
Prot unspecified.....	08.....	08
Roman Catholic.....	09.....	09
Other Christian (specify).....	10.....	10
Christian unspecified.....	11.....	11
Jewish.....	12.....	12
Muslim/Islam.....	13.....	13
Hindu.....	14.....	14
Buddhist.....	15.....	15
Sikh.....	16.....	16
Other (specify).....	17.....	17
None/atheist/agnostic.....	18.....	18
d/k.....	&&.....	&&

61b How often do you attend religious services or activities organised by your religious group?

	RELFREMA	RELFREPA
	M	F
more than once a day	01..	..01
once a day.....	02	.... 02
4-6 days a week.....	03..	03
2-3 days a week.....	04..	.....04
once a week.....	05	05
at least once a fortnight.....	06	..... 06
at least once a month.....	07	07
at least once every 3 months.....	08	08
at least once every 6 months.....	09	09
at least once a year.....	10	10
less than once a year.....	11	11
never.....	12	12
varies.....	13	13
dk.....	&&	&&

61c How important is religion in your life? Is it very important, quite important, a little bit important, or not at all important?

	RELiMPMA	RELiMPPA
	M	F
very important.....	1.....	1
quite important.....	2.....	2
a little bit important.....	3.....	3
not at all important.....	4.....	4
d/k.....	5.....	5

62 Sometimes people describe themselves by their origins; they call themselves Scots, or Irish, or English, or Pakistani or Indian and so on. How would you describe yourselves?

mother

father

ETHNICMA

ETHNICPA

63 I'd like to look at the things on this card and tell me which you think have the most important influence on people's health. Start with the most important, then tell me which is the next most important and so on.

(hand respondent sort cards and rank in order of importance; equal rankings allowed)

- | | | | | | | | |
|----------|--|----------------------|--------------|----------------------|----------------------|--------------|----------|
| LUCKMA | luck..... | <input type="text"/> | ^M | . | <input type="text"/> | ^F | LUCKPA |
| CONSMA | the constitution you're born with..... | <input type="text"/> | . | <input type="text"/> | | | CONSPA |
| ENVIRMA | the environment (housing, climate pollution)... | <input type="text"/> | . | <input type="text"/> | | | ENVIRPA |
| HABITSMA | habits (smoking, what you eat or drink)..... | <input type="text"/> | . | <input type="text"/> | | | HABITSPA |
| CAREMA | looking after yourself (taking vitamins, getting plenty of sleep, keeping warm etc)..... | <input type="text"/> | . | <input type="text"/> | | | CAREPA |
| SERVEMA | health services (medicine, nurses, hospitals, doctors) | <input type="text"/> | . | <input type="text"/> | | | SERVEPA |
| OTHERMA | something else (specify)..... | <input type="text"/> | . | <input type="text"/> | | | OTHERPA |

64 Most parents worry about their children from time to time. Looking ahead over the next 5 years, what are the main worries you have about or for N?

- 1 _____
- 2 _____
- 3 _____
- 4 _____

Number of worries given: _____

65	TIME INTERVIEW FINISHED;	ENDHRSP	ENDMiNSP
		_____/_____/HRS	_____/_____/MINS
66	TOTAL TIME FOR INTERVIEW;	TOTHRSP	TOTMiNSP
		_____/_____/HRS	_____/_____/MINS

*

Interviewer Questionnaire

1 What type accommodation does the respondent occupy?
of?

- house;detached (bungalow, villa etc)1
- house;semi detached.....2
- house;terraced.....3
- flat; 4 in a block.....4 HOMETYPE
- flat; in tenement (sandstone).....5
- flat; low rise (<5 floors).....6
- flat ; high rise (5 or more floors).7
- flat; villa/terrace conversion.....8
- other (specify).....9

2 What is the level of household's accommodation?

- | | | | |
|-----------------------------------|---|------------|--|
| all on ground floor, or ground | | HLEVEL | |
| & others..... | 1 |] -----3-> | |
| all in basement..... | 2 | | |
| all on first or higher floor..... | 3 | | |

(if on first or of higher floor, i.e. coded 3 above)

2A State actual floor of entry to household's accommodation HFLOOR

____/____

3 Are there any of the following means of access to the household's accommodation?

- | | | | |
|----------------------|---|---|--------|
| | Y | N | |
| deck..... | 1 | 2 | DECK |
| external stairs with | | | |
| 6 or more steps..... | 1 | 2 | EXSTEP |
| internal stairs with | | | |
| 6 or more steps..... | 1 | 2 | INSTEP |
| lift..... | 1 | 2 | LIFT |

4 Who was interviewed?

- | | | | |
|-----------------------|---|---|----------|
| | Y | N | |
| mother..... | 1 | 2 | INTMA |
| father..... | 1 | 2 | INTPA |
| someone else (specify | 1 | 2 | INTOTHER |
| _____) | | | |

5 Were people other than the interviewee(s) present during all or part of the interview?

- yes..... 1 ANYPRES
- no..... 2 -----6-->

5a if yes, who were they?

	Y	N	
N.....	1.....	2.....	& PRESN
brother(s).....	1.....	2.....	& PRESBRO
sister(s).....	1.....	2.....	& PRESSiS
other household members.....`.....	1.....	2.....	& PRESHM
others.....	1.....	2.....	& PRESOTH

5b How many in total other than the interviewee(s)? ____ / ____ NPRES

6 Was there a language/comprehension problem during the interview?

yes.....	1 LANGP
no.....	2 -----7→

6a if yes; describe;

7 Do you feel that the information provided by the respondent was satisfactory?

yes.....	1 -----8--→
no.....	2 SATiNP

7a if no, describe;

8 Please record any further comments about the interview which may be helpful.