Understanding Society

ADULT SELF-COMPLETION QUESTIONNAIRE (AGED 16+)

INTERVIEWER: WRITE IN FROM CAPI SCREEN

Serial	Address	HH.No	ChkL	P.No

First name	Int No	F/Area	F/Month

Example Question

Did you have breakfast this morning?

Yes  1 → Q1

No 2

Returning the questionnaire

If the interviewer is still in your home when you have completed the questionnaire, please hand it back to them. If not, please return the completed questionnaire in the pre-paid envelope as soon as you possibly can.

Now please go to Q1 and start filling in your answers →

Q1

Please write in your date of birth:

DD MM YYYY 1 9

SCDOBD SCDOBM SCDOBY

Q2

Are you male or female? SCSEX

Male

Female

For each of the following questions, please tick the one box that best describes your answer.

Q3

In general, would you say your health is? SCSFI

Excellent | Very good | Good | Fair | Poor

Q4

The following questions are about activities you might do during a typical day. Does **your health now limit you** in these activities? If so, how much?

		Yes, limited a lot	Yes, limited a little	No, not limited at all
SCSF2a	**Moderate activities**, such as moving a table, pushing a vacuum cleaner, bowling or playing golf			
SCSF2b	Climbing **several** flights of stairs			

Q5

During the **past 4 weeks**, how much of the time have you had any of the following problems with your work or other regular daily activities **as a result of your physical health**?

	All of the time	Most of the time	Some of the time	A little of the time	None of the time
SCSF3a **Accomplished less** than you would like					
Were limited in the **kind** of work or other activities SCSF3b					

Q6

During the **past 4 weeks**, how much of the time have you had any of the following problems with your work or other regular daily activities **as a result of any emotional problems** (such as feeling depressed or anxious)?

	All of the time	Most of the time	Some of the time	A little of the time	None of the time
SCSF4a **Accomplished less** than you would like					
Did work or other activities **less carefully than usual** SCSF4b					

Q7

During the **past 4 weeks**, how much did pain interfere with your normal work (including both work outside the home and housework)?

	Not at all	A little bit	Moderately	Quite a bit	Extremely
SCSF5					

Q8

These questions are about how you feel and how things have been with you **during the past 4 weeks**. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the **past 4 weeks**...

	All of the time	Most of the time	Some of the time	A little of the time	None of the time
SCSF6a Have you felt calm and peaceful?					
SCSF6b Did you have a lot of energy?					
Have you felt downhearted and depressed? SCSF6c					

Q9

During the **past 4 weeks**, how much of the time has your **physical health or emotional problems** interfered with your social activities (like visiting with friends, relatives, etc.)?

	All of the time	Most of the time	Some of the time	A little of the time	None of the time
SCSF7	☐	☐	☐	☐	☐

Here are some questions regarding the way you have been feeling over the last few weeks. For each question please tick the box next to the answer that best describes the way you have felt.

Have you recently...

Q10

...been able to concentrate on whatever you're doing?

SCGHQA

- Better than usual ☐
- Same as usual ☐
- Less than usual ☐
- Much less than usual ☐

Q11

...lost much sleep over worry?

SCGHQB

- Not at all ☐
- No more than usual ☐
- Rather more than usual ☐
- Much more than usual ☐

Q12

...felt that you were playing a useful part in things?

SCGHQC

- More so than usual ☐
- Same as usual ☐
- Less so than usual ☐
- Much less than usual ☐

Have you recently...

Q13

...felt capable of making decisions about things?

SCGHQD

- More so than usual ☐
- Same as usual ☐
- Less so than usual ☐
- Much less capable ☐

Q14

...felt constantly under strain?

SCGHQE

- Not at all ☐
- No more than usual ☐
- Rather more than usual ☐
- Much more than usual ☐

Q15

...felt you couldn't overcome your difficulties?

SCGHQF

- Not at all ☐
- No more than usual ☐
- Rather more than usual ☐
- Much more than usual ☐

Q16

...been able to enjoy your normal day-to-day activities?

SCGHQG

- More so than usual ☐
- Same as usual ☐
- Less so than usual ☐
- Much less than usual ☐

Q17

...been able to face up to problems?

SCGHQH

- More so than usual ☐
- Same as usual ☐
- Less able than usual ☐
- Much less able ☐

Have you recently...

Q18

...been feeling unhappy or depressed?

SCGHQI

- Not at all
- No more than usual
- Rather more than usual
- Much more than usual

Q19

...been losing confidence in yourself?

SCGHQJ

- Not at all
- Not more than usual
- Rather more than usual
- Much more than usual

Q20

...been thinking of yourself as a worthless person?

SCGHQK

- Not at all
- No more than usual
- Rather more than usual
- Much more than usual

Q21

...been feeling reasonably happy, all things considered?

SCGHQL

- More so than usual
- About the same as usual
- Less so than usual
- Much less than usual

Q22

Are you married or living with a partner?

Yes ☐ → Q23

No ☐ → END

SCMOLWP

Q23

Please indicate on each question the box which best describes your relationship with your partner at the moment. Please tick one box only for each question.

	Never	Less than once a month	Once or twice a month	Once or twice a week	Once a day	More often
Have a stimulating exchange of ideas	☐	☐	☐	☐	☐	☐
	SCRELPAREI					
Calmly discuss something	☐	☐	☐	☐	☐	☐
	SCRELPARCD					
Work together on a project	☐	☐	☐	☐	☐	☐
	SCRELPARWT					

Q24

Please indicate on each question the box which best describes your relationship with your partner at the moment. Please tick one box only for each question.

	All of the time	Most of the time	More often than not	Occasionally	Rarely	Never
How often do you discuss or have you considered divorce, separation or terminating your relationship? SCRELPARDS	☐	☐	☐	☐	☐	☐
Do you ever regret that you married or lived together? SCRELPARRG	☐	☐	☐	☐	☐	☐
How often do you and your partner quarrel? SCRELPARAR	☐	☐	☐	☐	☐	☐
How often do you and your partner "get on each other's nerves"? SCRELPARIR	☐	☐	☐	☐	☐	☐
Do you kiss your partner? SCRELPARKS	☐	☐	☐	☐	☐	☐

Q25

Do you and your partner engage in outside interests together?

SCPAROUTINT

- All of them ☐
- Most of them ☐
- Some of them ☐
- Very few of them ☐
- None of them ☐

Q26

The boxes on the following line represent different degrees of happiness in your relationship. The middle point, "happy", represents the degree of happiness of most relationships. Please tick the box which best describes the degree of happiness, all things considered, of your relationship.

Extremely unhappy	Fairly unhappy	A little unhappy	Happy	Very Happy	Extremely happy	Perfect
☐	☐	☐	☐	☐	☐	☐

SCRELHAPPY

Understanding Society

Thank you very much for taking the time to answer our questions.

Thank you for your help.

Please place the questionnaire in the envelope provided and hand it back to your interviewer.

Or, please return it to the following address:

NatCen Social Research
Unit B2, Admiralty Park, Station Road, Holton Heath,
Poole, BH16 6HX