Traci Leven
Research

NHS Greater Glasgow and Clyde 2008 Health and Wellbeing Survey

East Dunbartonshire Report

Final

Prepared for

NHS Greater Glasgow and Clyde

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Contents

1   Introduction

1.1   Introduction

This report contains the findings for East Dunbartonshire from a research study on health and wellbeing carried out in 2008 on behalf of NHS Greater Glasgow and Clyde. The fieldwork and data entry was performed by MRUK. Analysis and reporting was performed by Traci Leven Research. It is the fourth in a series of studies conducted by the former NHS Greater Glasgow and the first to include the area administered by the newly formed NHS Greater Glasgow and Clyde which emerged following the dissolution of NHS Argyll and Clyde.

Background

The health and wellbeing study started in 1999. At that time the aim of the study was:

- to provide intelligence to inform the health promotion directorate;
- to explore the different experiences of health and wellbeing in our most deprived communities[1] compared to other areas; and
- to provide information that would be useful for monitoring health promotion interventions.

There have been many policy changes over the decade that the health and wellbeing study has been in operation. For example, the dissolution of social inclusion partnership areas (SIPs) as a focus of tackling area based deprivation and the emergence of using the Scottish Index of Multiple Deprivation (SIMD) as the main tool for measuring area based deprivation and focusing of resources; the emergence of Community Health (and Care) Partnerships as a vehicle for integrated planning and delivery of health (and social) care services at a local level and changes to the performance assessment framework have led to an increased focus on some health behaviours such as breastfeeding; use of alcohol; diet and exercise.

The health and wellbeing survey was formed around core questions which have remained the same and allow the monitoring of trends over time. However, the survey has also been adapted over time to take into account emerging health and wellbeing issues and adaptations to new geographies.

The survey provides a snapshot in time of the views and experience of the resident adult population. Whilst we cannot attribute causal relationships between the findings and the changing policy context we can explore our findings alongside wider changes in NHS Greater Glasgow and Clyde (NHSGGC)

Our local survey has provided flexible options to explore health and wellbeing at a local level. In 2008 each of the CH(C)Ps bought into the survey. Separate reports are available for each of the CH(C)Ps that comprise NHSGGC. In addition, Glasgow South West, Inverclyde and Renfrewshire bought into the survey at enhanced levels to allow for local exploration between the most deprived areas and other areas. All the reports will be posted on http://www.phru.net as they become available.

Trends are available for the area administered by the former NHSGG area; these are available in a separate report which will be placed on http://www.phru.net

Thanks are due to the working group that led the survey:

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[1] In 1999, our most deprived communities were given additional resources with the aim of reducing the gap between deprived and least deprived areas. The initiative was part of an umbrella programme of support which focused on Social Inclusion Partnership areas.

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In addition the project benefited from the support and advice of the advisory group:

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Susan Coull	Glasgow South West CHCP (formerly)
Heather Cunningham	Renfrewshire CHP
Linda de Caestecker	NHS Greater Glasgow and Clyde
James Egan	Glasgow East, CHCP
Suzanne Glennie	Glasgow North, CHCP
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Irene Mackenzie	Corporate Inequalities Team
Kathleen McGill	East Dunbartonshire CHP
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Objectives

The objectives of the study are:

- to continue to monitor the core health indicators
- to determine whether the changes found in the first two follow-ups were the beginning of a trend in the NHSGG area
- to compare attitudes and behaviour of those living in the bottom 15% SIMD areas and other areas and address whether changes in attitudes and behaviour apply across the board or just in the most deprived/other areas, thereby tracking progress towards reducing health inequalities
- to form a baseline of health and wellbeing measures for NHSGGC
- to provide intelligence for health improvement policy, programmes and information to enhance performance management.

Summary of Methodology

In total, 8,278 face-to-face, in-home interviews were conducted with adults (aged 16 or over) in the NHSGGC area. The fieldwork was carried out by MRUK. The data analysis and reporting was conducted by Traci Leven Research.

The fieldwork was conducted between mid August and mid December 2008. The response rate for all in-scope attempted contacts was 70%.

The sample was stratified proportionately by local authority and SIMD quintile (for definition of SIMD see section 1.2), with addresses selected at random from the residential postcode address file within each stratum. Adults were randomly selected within each sampled household using the last birthday technique.

A full account of the sampling procedures, fieldwork and survey response can be found in Appendix A. The annotated survey questionnaire is in Appendix D.

1.2   Sample Profile

There were 628 interviews conducted in East Dunbartonshire as part of the survey.

The 8,278 completed interviews across the NHS Greater Glasgow and Clyde area were weighted to account for under/over representation of groups within the sample to ensure the 2008 sample was as representative as possible of the adult population in the Greater Glasgow & Clyde NHS Board area. A full explanation of the weighting method and the data sources used can be found in Appendix B. The breakdown of the final weighted dataset for the 628 East Dunbartonshire interviews - and how this compares with the known population profile - is shown in Table 1.1.

Table 1.1: Age and Gender Breakdown
Base: 628

Age	Men (% of sample)	Women (% of sample)	Total (% of sample)	East Dunbartonshire % of population (aged 16+)
16-24	7.4%	6.6%	13.9%	13.9%
25-34	5.5%	5.3%	10.8%	10.8%
35-44	7.7%	9.2%	16.8%	16.8%
45-54	9.4%	10.4%	19.8%	19.8%
55-64	7.9%	8.5%	16.4%	16.4%
65-74	5.5%	6.6%	12.4%	12.2%
75+	3.8%	6.1%	9.9%	10.1%

The Scottish Index of Multiple Deprivation (SIMD) 2006 is a relative measure of deprivation used to identify the most deprived areas in Scotland. It is constructed using 37 indicators within 7 'domains' (Income, Employment, Health, Education, Skills & Training, Geographic Access, Housing and Crime) each of which describes a specific aspect of deprivation. The SIMD is a weighted combination of these domains.

The SIMD is based on small geographical areas called datazones. The average population of a datazone is 750 and unlike previous deprivation measures, which were based on much larger geographies (e.g. postcode sectors, average population 5,000), they enable the identification of small pockets of deprivation. In order to compare the most deprived small areas with other cut-off points, the most deprived 15% datazones are used. There are 6,505 datazones in Scotland. They are ranked from 1 (most deprived) to 6,505 (least deprived). The NHSGGC area contains the most deprived datazone in Scotland and in total 48% of the most deprived 15% datazones in Scotland lie within it.

There are, however, no datazones within East Dunbartonshire which are in the most deprived 15% areas.

1.3   This Report

Chapters 2-6 report on all the survey findings, with each subject chapter containing its own summary. For each indicator, tables are presented showing the proportion of the sample which met the criteria, with comparisons with the NHS Greater Glasgow & Clyde (NHSGGC) area as a whole, and break-downs by demographic (independent) variables. Only comparisons with NHSGGC and independent variables which were found to be significantly different (p<0.05) are reported. The independent variables which were tested were:

- Gender; and
- Age group (16-44; 45-64; 65+).

Chapter 7 provides a summary of the differences for the findings for East Dunbartonshire compared to the NHSGGC area as a whole.

Chapter 8 provides information on trends across the last three health and wellbeing surveys in East Dunbartonshire (2002, 2005 and 2008).

2 People's Perceptions of Their Health & Illness

2.1 Chapter Summary

Table 2.1 below shows the indicators relating to perceptions of health and illness.

Table 2.1: Indicators for Perceptions of Health and Illness (East Dunbartonshire)

Indicator	% of sample	Unweighted base (n)
Self-perceived health excellent or good (Q1)	71.7%	627
Positive perception of general physical wellbeing (Q53b)	82.4%	628
Positive perception of general mental or emotional wellbeing (Q53c)	86.2%	628
Positive perception of happiness (Q77)	91.9%	628
Feel definitely in control of decisions affecting daily life (Q78)	64.9%	626
Positive perception of quality of life (Q53a)	87.6%	628
Has long term illness/condition that interferes with daily life (Q3)	20.5%	623
Receiving treatment for at least one condition (Q2)	43.1%	623
Total number of conditions receiving treatment for (Q2): 0 / 1 / 2 or more	56.9% / 22.6% / 20.5%	623
GHQ12 score of 4 or above (indicating poor mental health) (Q15)	17.6%	628
Have some/all of own teeth (Q12)	87.7%	626
Brushes teeth twice or more per day – based on those with some/all of own teeth	81.3%	498

Seven in ten (72%) respondents had a positive view of their general health. Those aged 65 or over and women were less likely to have positive views of their health.

Four in five (82%) had a positive view of their physical wellbeing. Those aged 65 or over were the least likely to do so.

Just under nine in ten (86%) had a positive perception of their mental or emotional wellbeing and 92% had a positive perception of their happiness.

Two in three (65%) respondents felt definitely in control of the decisions affecting their daily life. Those aged 45-64 were more likely to feel in control of decisions.

Nearly nine in ten (88%) had a positive perception of their quality of life.

One in five (20%) had a long-term limiting condition or illness. Those aged 65 or over were more likely to have a limiting condition or illness.

Two in five (43%) respondents were receiving treatment for at least one condition or illness. Older people and women were more likely to be in receipt of treatment.

One in six (18%) respondents had a GHQ12 score of four or more, indicating poor mental health.

Nine in ten (88%) had all or some of their natural teeth. Those aged 65 or over were least likely to have any of their natural teeth.

Of those with any of their natural teeth, 81% brushed their teeth twice or more per day. Those aged 65 or over and men were less likely to meet this target.

2.2   Self-Perceived Health and Wellbeing

General Health

Respondents were asked to describe their general health over the last year on a four point scale (excellent, good, fair or poor). Overall, seven in ten (72%) gave a positive view of their health, with 15% saying their health was excellent and 56% saying their health was good. However, 28% gave a negative view of their health, with 15% saying their health was fair and 13% saying it was poor.

As Table 2.2 shows, those aged 65 or over were less likely to have positive views of their general health. Men were more likely than women to have a positive view of their general health.

Table 2.2: Self-Perceived General Health (Q1) by Age and Gender

	Excellent	Good	Fair	Poor	Excellent/ Good	Fair/ Poor	Unweighted base (n)
Age:							
16-44	25%	61%	8%	6%	86%	14%	162
45-64	12%	57%	16%	15%	70%	30%	204
65+	3%	47%	28%	22%	50%	50%	251
Men	18%	58%	13%	11%	76%	23%	254
Women	13%	55%	18%	14%	68%	32%	367
All	15%	56%	15%	13%	72%	28%	627

Physical Wellbeing

Respondents were presented with a 7-point 'faces' scale, with the expressions on the faces ranging from very happy to very unhappy:
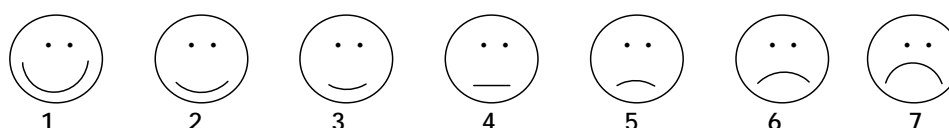
Using this scale, they were asked to rate their general physical well-being and general mental or emotional well-being. Those selecting any of the three 'smiling' faces (1-3) were categorised as having a positive perception.

Four in five (82%) respondents gave a positive view of their physical wellbeing, using this scale.

Table 2.3 shows those under the age of 45 were more likely to have a positive perception of their physical wellbeing and those aged 65 or over were less likely to do so.

Table 2.3: Positive Perception of Physical Wellbeing (Q53b) by Age

	Positive Perception	Unweighted base (n)
Age:		
16-44	88%	164
45-64	83%	204
65+	71%	251
All	82%	628

Mental or Emotional Wellbeing and Happiness

Using the 'faces' scale, 86% of respondents gave a positive view of their mental or emotional wellbeing.

Respondents were also asked to use the 'faces' scale to indicate how happy they are, taking everything into account. Nine in ten (92%) respondents gave a positive view of their happiness.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to have a positive perception of their happiness (92% East Dunbartonshire; 88% NHSGGC).

Figure 2.1: Perceptions of Happiness: East Dunbartonshire and NHSGGC
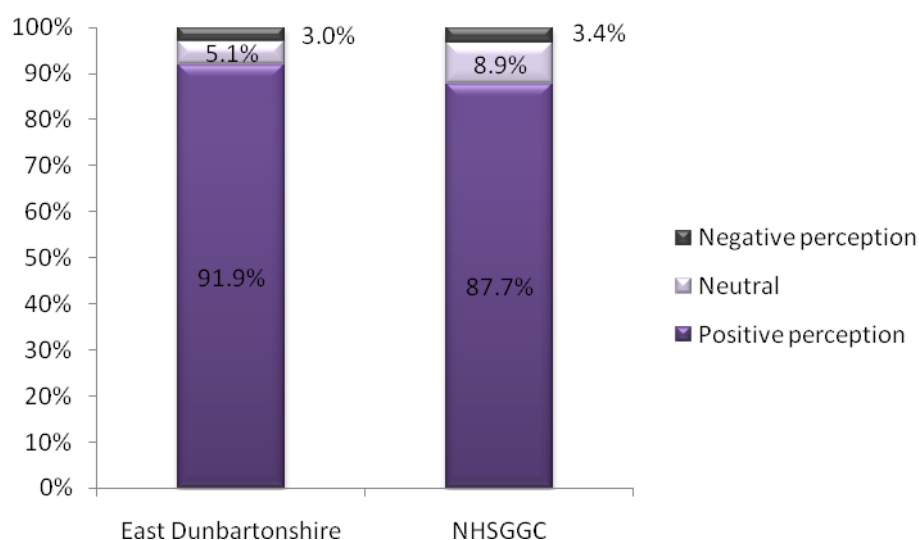
Feeling in Control of Decisions Affecting Life

Respondents were asked whether they feel in control of decisions that affect their life, such as planning their budget, moving house or changing job. Two thirds (65%) said that they 'definitely' feel in control of these decisions, while 32% said that they felt in control 'to some extent' and 3% did not feel in control of these decisions.

Those aged 45-64 or over were more likely than younger or older respondents to definitely feel in control of the decisions affecting their life. This is shown in Table 2.4.

Table 2.4: 'Definitely' Feel in Control of Decisions Affecting Life (Q78) by Age

	Definitely in Control	Unweighted base (n)
Age:		
16-44	60%	164
45-64	73%	204
65+	61%	250
All	65%	626

2.3　Self Perceived Quality of Life

Using the 'faces' scale, respondents were asked to rate their overall quality of life. Overall, 88% of respondents gave a positive rating of their quality of life.

2.4　Illness

One in five (20%) respondents said that they had a long-term condition or illness that substantially interfered with their day to day activities.

The likelihood of having a limiting condition or illness increased with age from 12% of those aged 16-44 to 37% of those aged 65 or over.

Table 2.5: Limiting Long-Term Condition or Illness (Q3) by Age

	Long-Term Condition/Illness	Unweighted base (n)
Age:		
16-44	12%	164
45-64	20%	204
65+	37%	251
All	20%	623

Illnesses/Conditions for Which Treatment is Being Received

Two in five respondents (43%) were receiving treatment for at least one illness or condition.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHSGGC area as a whole, those in East Dunbartonshire were more likely to be receiving treatment for an illness or condition.

Figure 2.2: Whether Have at Least one Illness/Condition Being Treated: East Dunbartonshire and NHSGGC
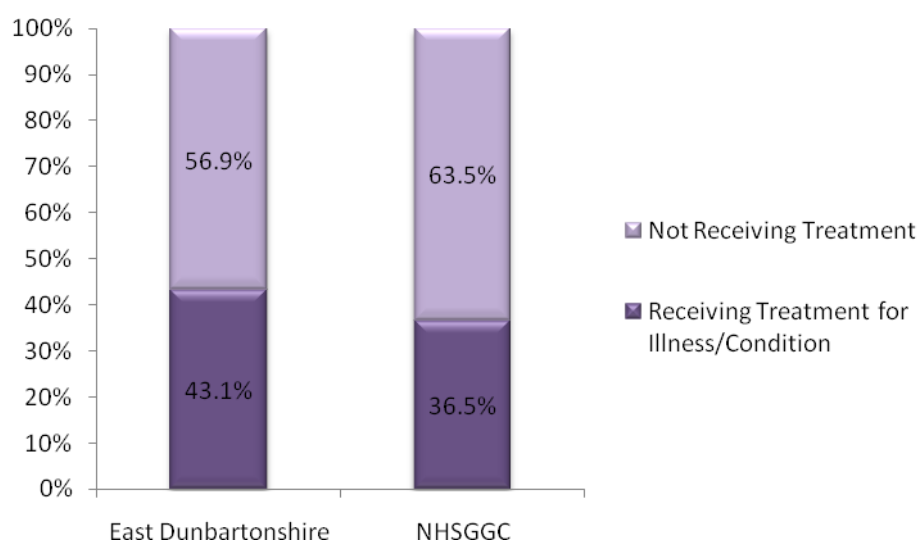
The likelihood of being in receipt of treatment for at least one illness/condition rose with age – from 20% of those aged 16-44 to 74% of those aged 65 or over. Women were more likely than men to be receiving treatment. This is shown in Table 2.6.

Table 2.6: At Least One Illness/Condition Being Treated (Q2) by Age and Gender

	Being Treated for Condition/Illness	Unweighted base (n)
Age:		
16-44	20%	163
45-64	51%	201
65+	74%	250
Men	38%	252
Women	47%	365
All	43%	623

Figure 2.3 below shows the proportion of respondents who were being treated for each type of illness/condition (for all those with a proportion of 0.5% or more).

The most common condition being treated was high blood pressure, for which 14% of respondents were being treated. Also, 13% were being treated for arthritis/rheumatism/painful joints,

Figure 2.3: Conditions/Illnesses for Which Treatment is Being Received (Q2)
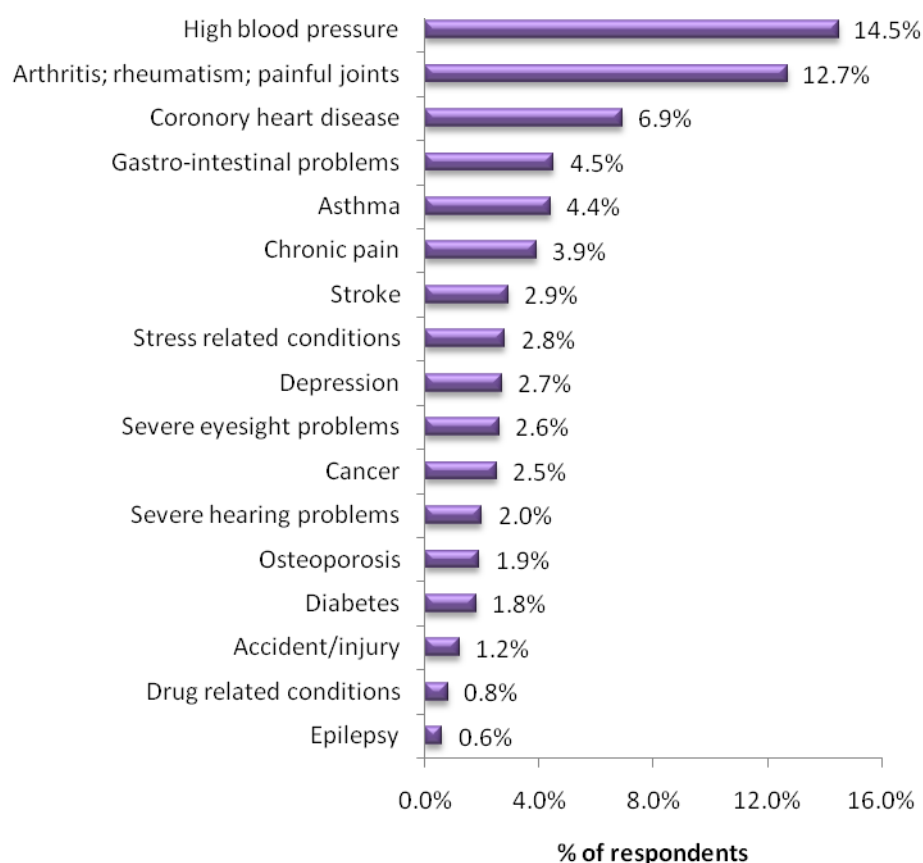
Comparison with NHS Greater Glasgow & Clyde Area

Figure 2.4 shows that those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to be receiving treatment for:

- High blood pressure;
- Coronory heart disease;
- Gastro-intestinal problems;
- Stroke; and
- Severe eyesight problems.

However, those in East Dunbartonshire were less likely than those in the NHSGGC area as a whole to be receiving treatment for diabetes.

Figure 2.4: Conditions/Illnesses for Which Treatment is Being Received (Q2): East Dunbartonshire and NHSGGC (all showing significant difference)
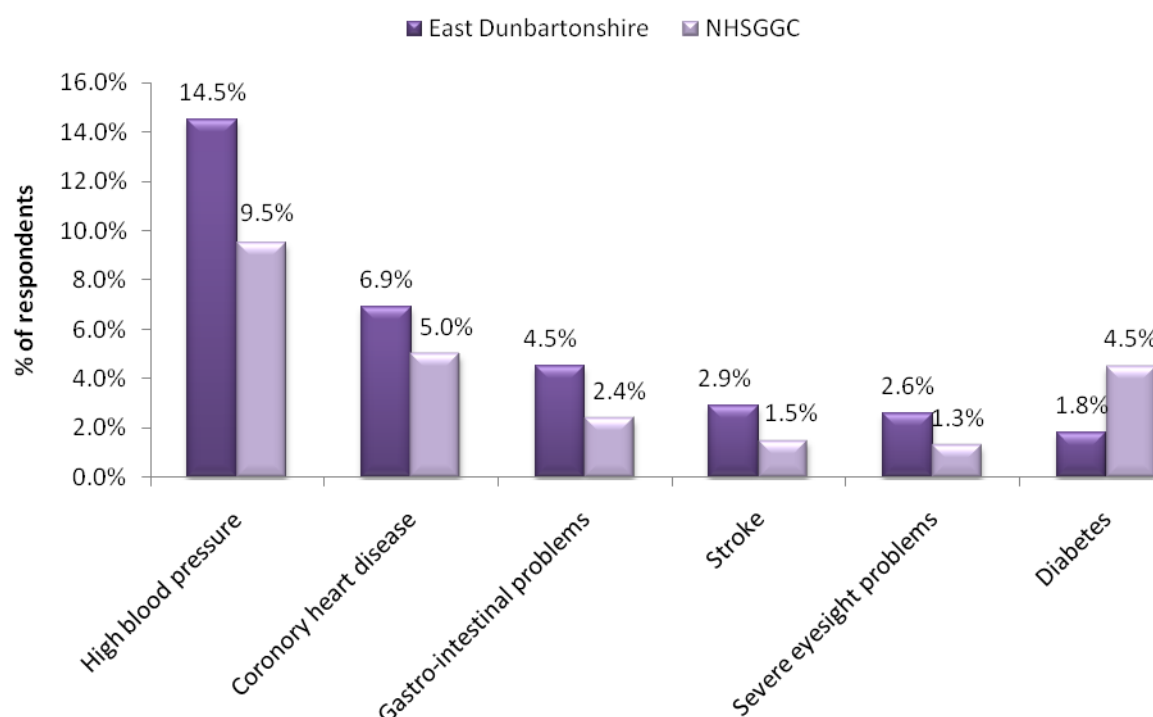
2.5   Mental Health

GHQ12 Scores

The survey used the General Health Questionnaire (GHQ) to assess the mental health of respondents. The GHQ was designed to be a self-administered questionnaire which could be used to detect psychiatric disorders in the general population. The version used for this survey is based on twelve questions (GHQ12) which ask respondents about their general level of happiness, depression, anxiety, self-confidence, and stress in the few weeks before the interview. Respondents were asked to complete the responses themselves. Interviewers recorded whether they actually did so, or whether they asked the interviewer to help.

Each respondent was given a score between 0 and 12, based on his/her responses to the 12 questions. The number of questions for which the respondent claimed to have experienced a particular symptom or type of behaviour 'more than usual' or 'much more than usual' over the past few weeks is counted, and the total is the score for that person. The higher the score, the greater the likelihood that the respondent has a psychiatric disorder.

The questions on the GHQ12 ask about changes from normal functioning but not about how long those changes have persisted. As a result, the GHQ detects psychiatric disorders of a range of durations, including those that may be of very short duration. This should be borne in mind when interpreting the results. The prevalence figures presented in this chapter estimate the percentages of the population with a possible psychiatric disorder at a particular point in time and are most useful for comparing sub-groups within the population. It is not possible to deduce the incidence of psychiatric disorders from these data.

A score of four or more on the GHQ12 has been used to identify those with a potential psychiatric disorder (and references to respondents with a 'high' GHQ12 score refer to those with scores at this level). This is the same method of scoring that is used in the Scottish Health Survey series.

Overall, 18% of respondents had a GHQ12 score of four or more, indicating poor mental health.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to the NHSGGC area as a whole, respondents in East Dunbartonshire were more likely to have a GHQ12 score of four or more, indicating poor mental health. This is shown in Figure 2.5.

Figure 2.5: Proportion with a High GHQ12 Score (4 or more): East Dunbartonshire and NHSGGC
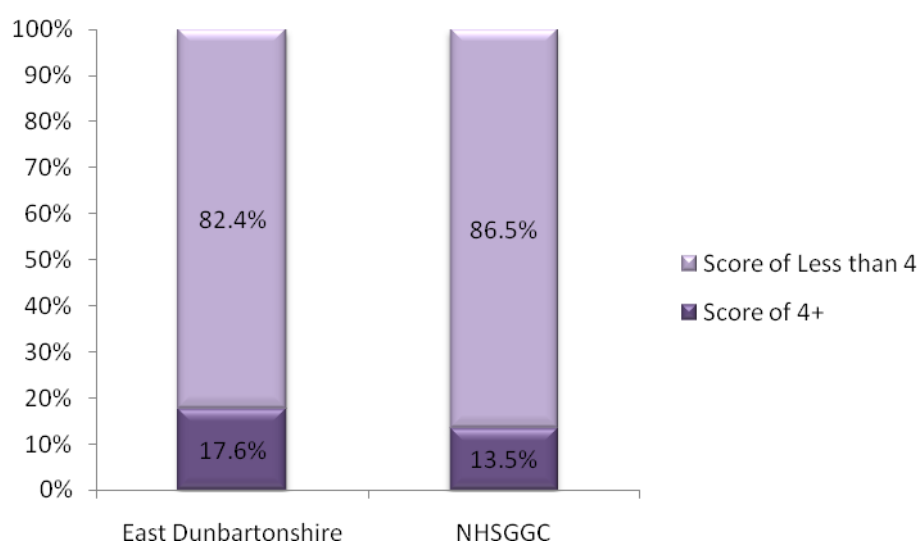
Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) Scores

The survey also used the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) to assess positive mental health (mental wellbeing). This uses 14 positively worded questions. Scores are derived by summing responses to each of the 14 questions on a 1-5 likert scale. Thus, the maximum score is 70 and the minimum score is 14. The scale is designed to allow the measurement of mean scores in population samples. The provisional mean score for the Scottish population is 50.7.

The overall mean WEMWBS score for respondents in East Dunbartonshire was 51.2.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire had higher mean WEMWBS scores than those in the NHS Greater Glasgow and Clyde area as a whole (51.2 East Dunbartonshire; 50.4 NHSGGC).

Those under the age of 45 tended to have higher WEMWBS scores, indicating better mental wellbeing.

Table 2.7: Mean WEMWBS Score (Q16) by Age

	Mean WEMWBS Score	Unweighted base (n)
Age:		
16-44	52.7	164
45-64	50.8	204
65+	50.0	251
All	51.2	628

2.6   Oral Health

Proportion of Own Teeth

Respondents were asked what proportion of their teeth were their own. Nine in ten (88%) respondents said that they had all (58%) or some (30%) of their own teeth, while 12% had none of their own teeth.

The national target is for no more than 5% of 45-54 year olds to have none of their natural teeth by 2010. Responses indicate that this target is already being met in East Dunbartonshire, with 5% of 45-54 year olds having no natural teeth.

The proportion who had all or some of their natural teeth ranged from 62% of those aged 65 or over to 99% of those aged under 45.

Table 2.8: Proportion of Own Teeth (Q12) by Age

	All	Some	None	All/some	Unweighted base (n)
Age:					
16-44	80%	18%	1%	99%	164
45-64	57%	34%	9%	91%	203
65+	17%	46%	38%	62%	250
All	58%	30%	12%	88%	626

Frequency of Brushing Teeth

Those with at least some of their own teeth were asked how often they brushed their teeth. In total 81% said they brushed their teeth at least twice a day.

Those aged 65 or over were less likely to brush their teeth at least twice a day. Women were more likely than men to brush their teeth at least twice a day. This is shown in Table 2.9.

Table 2.9: Brushes Teeth Twice or More Per Day (Q13) by Age and Gender

	Brushes Teeth 2x or more per day	Unweighted base (n)
Age:		
16-44	83%	162
45-64	84%	182
65+	70%	148
Men	77%	207
Women	85%	286
All	81%	498

3 The Use of Health Services

3.1 Chapter Summary

Table 3.1 provides the indicators relating to use of health services.

Table 3.1: Indicators for Use of Health Services

Indicator	% of sample	Unweighted base (n)
Seen a GP at least once in last year (Q6a)	79.1%	623
Outpatient to see doctor at least once in last year (Q7d)	25.4%	627
Accident and emergency at least once in last year (Q7c)	13.6%	627
Hospital stay in last year (q7e)	10.9%	628
Seen Pharmacist for health advice in last year (Q7a)	15.9%	627
Contacted NHS24 in last year (Q7b)	14.6%	627
Used GP out of hours service (GEMS) in last year (q7f)	1.9%	627
Been to the dentist within past six months (Q11)	62.1%	580
Registered with a dentist (Q9)	81.0%	627
Difficulty reaching hospital for an appointment (Q14d)	5.6%	590
Difficulty getting GP appointment (Q14a)	19.8%	610
Difficulty getting hospital appointment (Q14c)	11.9%	460
Difficulty getting GP consultation within 48 hours (Q14f)	9.8%	569
Difficulty accessing health services in an emergency (Q14b)	5.1%	503
Difficulty getting dentist appointment (Q14e)	8.3%	521
Someone in home suffered accidental injury in last year (Q17)	5.4%	628

Four in five (79%) respondents had seen a GP at least once in the last year. Those aged 65 or over and women were more likely to have seen a GP.

One in four (25%) respondents had visited hospital as an outpatient in the last year. Those aged 65 or over and women were more likely to have done so.

One in seven (14%) had visited accident and emergency in the last year and one in nine (11%) had been admitted to hospital in the last year.

One in nine (11%) had been admitted to hospital in the last year.

One in six (16%) respondents had visited a pharmacist for health advice in the last year. Men were less likely to have done so than women.

One in seven (15%) respondents had contacted NHS24 in the last year. Those aged 45-64 and men were less likely to have done so.

A small proportion (2%) of respondents had used the GP out of hours service in the last year.

Three in five (62%) had visited the dentist within the last six months. Those aged 65 or over were less likely to have done so.

Four in five (80%) respondents were registered with a dentist. Those aged 65 or over and men were less likely to be registered.

One in 18 (6%) respondents said it was difficult to reach hospital for an appointment; one in five (20%) said it was difficult to get a GP appointment and 12% said that it was difficult to get a hospital appointment.

One in ten (10%) said that it was difficult to get a GP consultation within 48 hours when needed. Those under the age of 65 and women were more likely to find this difficult.

One in 20 (5%) said that it was difficult to access health services in an emergency.

One in 12 (8%) found it difficult to get a dentist appointment. Women were more likely to find this difficult.

One in 18 (5%) said that someone in their household had suffered an accidental injury at home in the last year.

3.2   Use of Specific Health Services

General Practitioners (GPs)

Four in five (79%) respondents had seen a GP at least once in the last year. Of those who had visited a GP, half (47%) had visited the GP either once (25%) or twice (21%) in the last year. The mean number of GP visits was 4.53.

Table 3.2 shows that those aged 65 or over were more likely to have seen a GP in the last year.   Women were more likely than men to have seen a GP in the last year.

Table 3.2: Seen GP at Least Once (Q6a) by Age and Gender

	% seen GP at least once	Unweighted base (n)
Age:		
16-44	75%	163
45-64	77%	204
65+	89%	247
Men	75%	253
Women	82%	364
All	79%	623

Other Uses of GP Surgery

Figure 3.1 shows the extent of other uses of GP surgeries in the last year. In addition to the 79% of respondents who had seen a GP in the last year, 53% had seen a nurse or midwife from the GP surgery (mean number of visits was 2.80) and 13% had seen staff such as physiotherapist, chiropodist, dietician, occupational therapist or clinical psychologist (mean number of visits was 3.63). Also, 3% had seen some other type of staff at a GP surgery (mean number of visits was 3.39).

Figure 3.1: Seen Specific GP Practice Staff in Last Year (Q6)
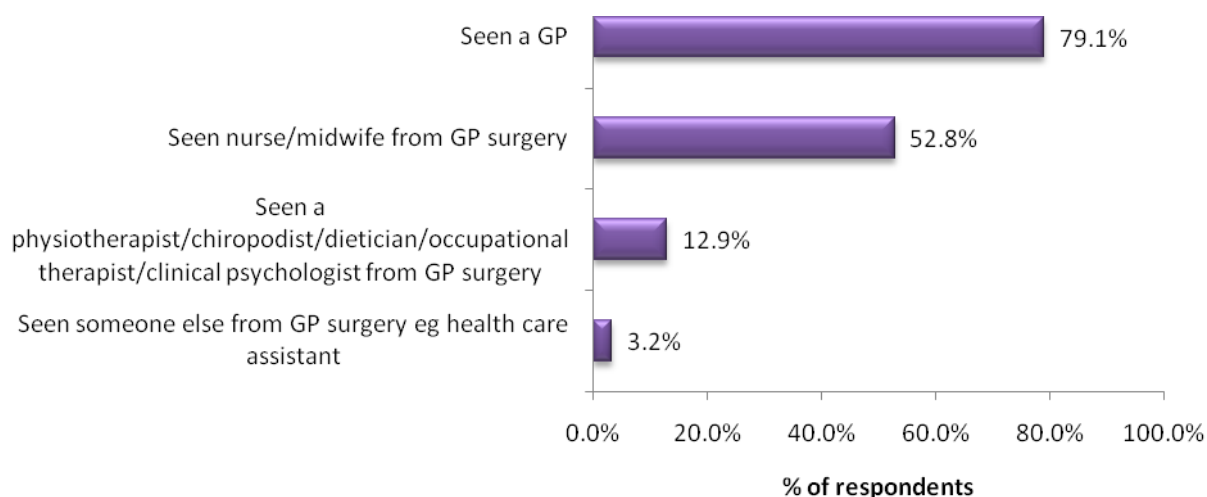
Outpatients

One in four (25%) respondents had visited a hospital outpatient department to see a doctor at least once in the last year. Of those who had made such a visit, the average number of outpatient visits in the last year was 2.95.

Comparison with NHS Greater Glasgow & Clyde Area

Respondents in East Dunbartonshire were more likely than those in the NHS Greater Glasgow and Clyde area as a whole to have visited hospital as an outpatient in the last year. This is shown in Figure 3.2.

Figure 3.2: Whether Visited Hospital as an Outpatient in Last Year: East Dunbartonshire and NHSGGC
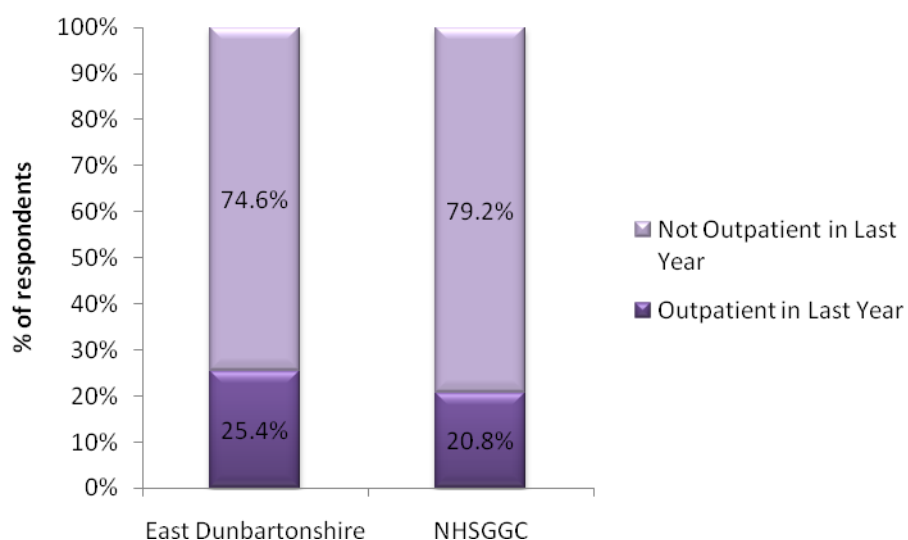
Those aged 65 or over were more likely than younger respondents to have visited hospital as an outpatient in the last year. Women were more likely than men to have done so.

Table 3.3: Visited Hospital as an Outpatient at Least Once (Q7d) by Age and Gender

	% at least once	Unweighted base (n)
Age:		
16-44	18%	163
45-64	28%	204
65+	34%	251
Men	22%	254
Women	29%	367
All	25%	627

Accident and Emergency

One in seven (14%) respondents had been to accident and emergency in the last year. Of those who had visited accident and emergency, 80% had been once in the last year and the mean number of visits was 1.31.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to have visited A&E in the last year.

Figure 3.3: Visited Accident & Emergency in Last Year: East Dunbartonshire and NHSGGC
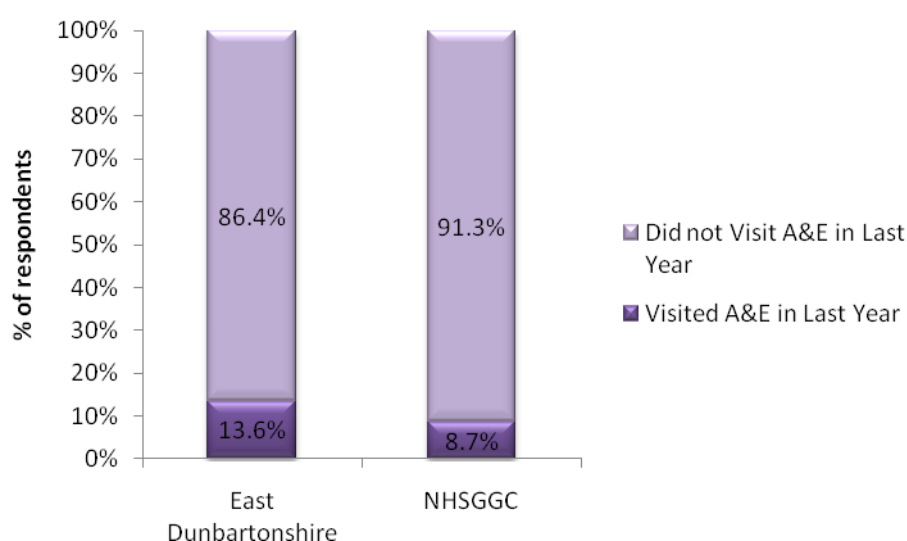
Hospital Admissions

One in nine (11%) respondents had been admitted to hospital at least once in the last year. Of those who had been admitted to hospital, 70% had been admitted once in the last year, and the mean number of admissions was 1.46.

Use of Pharmacy for Health Advice

One in six (16%) respondents had seen a pharmacist for health advice in the last year. Of those who had done so, 59% had done so only once, and the mean number of visits to the pharmacist was 1.76.

Women were more likely than men to have seen a pharmacist for health advice in the last year.

Table 3.4: Seen Pharmacist for Health Advice at Least Once (Q7a) by Gender

	% at least once	Unweighted base (n)
Men	13%	253
Women	19%	368
All	16%	627

Contacting NHS24

One in seven (15%) respondents had contacted NHS24 at least once in the last year. Of those who had contacted NHS24, 70% had done so just once, and the mean number of contacts was 1.43.

Those aged 45-64 were the least likely to have contacted NHS24, and women were more likely than men to have done so.

Table 3.5: Contacted NHS24 at Least Once (Q7b) by Age and Gender

	% at least once	Unweighted base (n)
Age:		
16-44	18%	163
45-64	10%	204
65+	16%	251
Men	6%	254
Women	21%	367
All	15%	627

Use of GP Out of Hours Service

A small proportion (2%) of respondents had used the GP out of hours service (GEMS) in the last year. Of those who had used the service, the mean number of visits was 2.15.

3.3   Dental Services

Frequency of Visits to the Dentist

Of those who were able to say when they last visited the dentist, 62% said that they had visited the dentist within the last six months, 17% had visited the dentist between six and 15 months ago, and 21% had last visited the dentist over 15 months ago.

Comparison with NHS Greater Glasgow & Clyde Area

As Figure 3.4 shows, those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to have visited the dentist within the last six months.

Figure 3.4: When Last Visited Dentist: East Dunbartonshire and NHSGGC
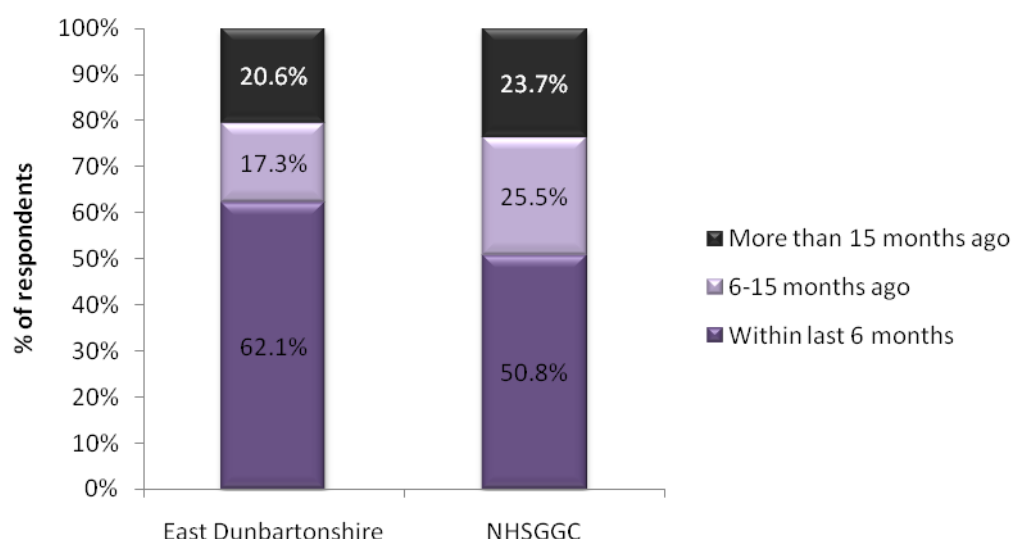
Table 3.6 shows that those aged under 45 were most likely to have visited the dentist within the last six months, and those aged 65 or over were the least likely to have done so.

Table 3.6: When Last Visited Dentist (Q11) by Age and Gender

	Within Last 6 Months	6-15 months ago	Over 15 months ago	Unweighted base (n)
Age:				
16-44	73%	15%	11%	152
45-64	60%	19%	21%	192
65+	45%	18%	37%	227
All	62%	17%	21%	580

Registration with a Dentist

Four in five (81%) respondents said they were registered with a dentist. Of those who were registered with a dentist, 72% received NHS treatment while 28% received private treatment.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHS Greater Glasgow and Clyde area as a whole to be registered with a dentist (81% East Dunbartonshire; 75% NHSGGC).

Figure 3.5: Whether Registered with a Dentist: East Dunbartonshire and NHSGGC
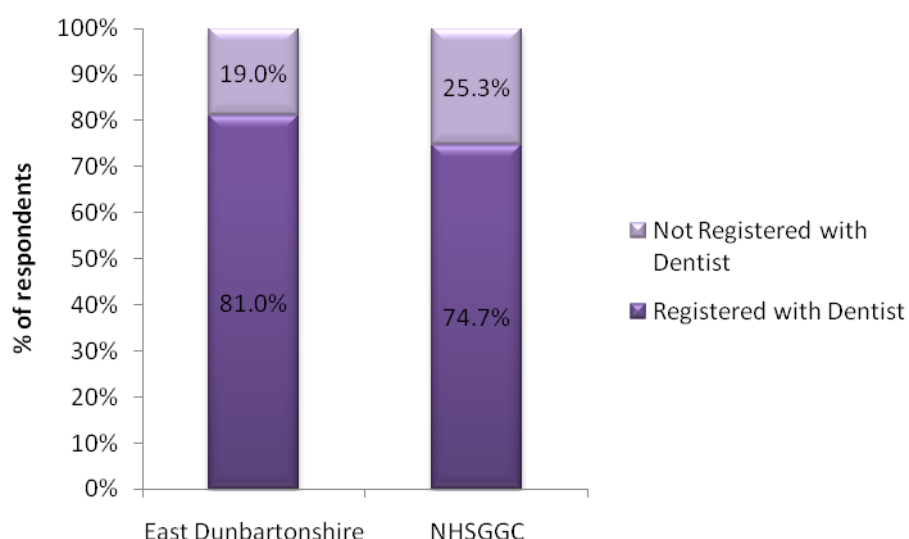
Older respondents were less likely to be registered with a dentist, and women were more likely than men to be registered. This is shown in Table 3.7.

Table 3.7: Registered with a Dentist (Q9) by Age and Gender

	Registered with a dentist	Unweighted base (n)
Age:		
16-44	86%	164
45-64	84%	204
65+	68%	250
Men	77%	253
Women	85%	368
All	81%	627

3.4   Involvement in Decisions Affecting Health Service Delivery

Information about Condition or Treatment

Of those who had accessed any health services over the last year, 70% felt that they had 'definitely' been given adequate information about their condition or treatment, 26% felt that they had 'to some extent', and 4% felt that they had not.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to feel they had definitely been given adequate information about their condition or treatment. This is shown in Figure 3.6.

Figure 3.6: Whether Given Adequate Information about Condition or Treatment: East Dunbartonshire and NHSGGC
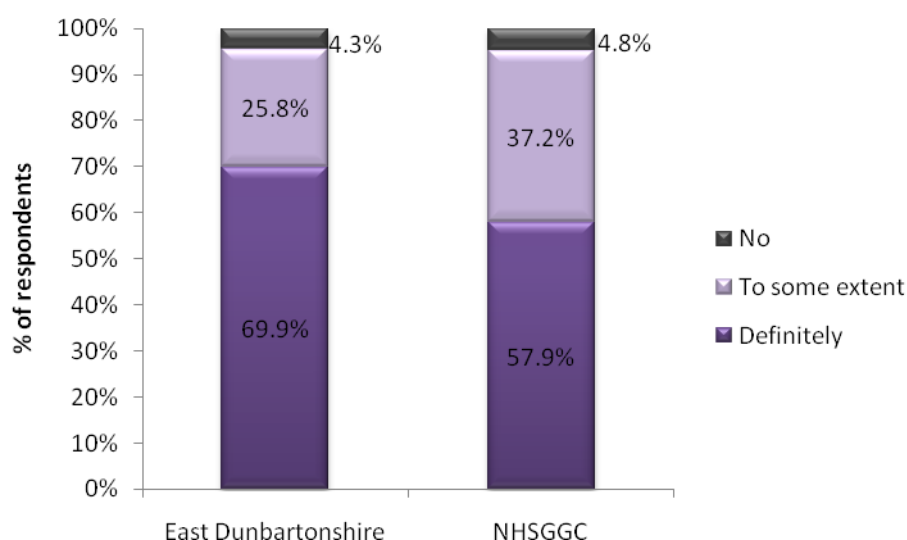
Encouragement to Participate in Decisions Affecting Health or Treatment

Four in five (84%) of those who had used health services in the last year felt that they had been encouraged to participate in decisions affecting their health or treatment either definitely (53%) or to some extent (32%).

Comparison with NHS Greater Glasgow & Clyde Area

Figure 3.7 shows that those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to feel that they were definitely encouraged to participate in decisions affecting their health or treatment.

Figure 3.7: Whether Encouraged to Participate in Decisions Affecting Health or Treatment: East Dunbartonshire and NHSGGC
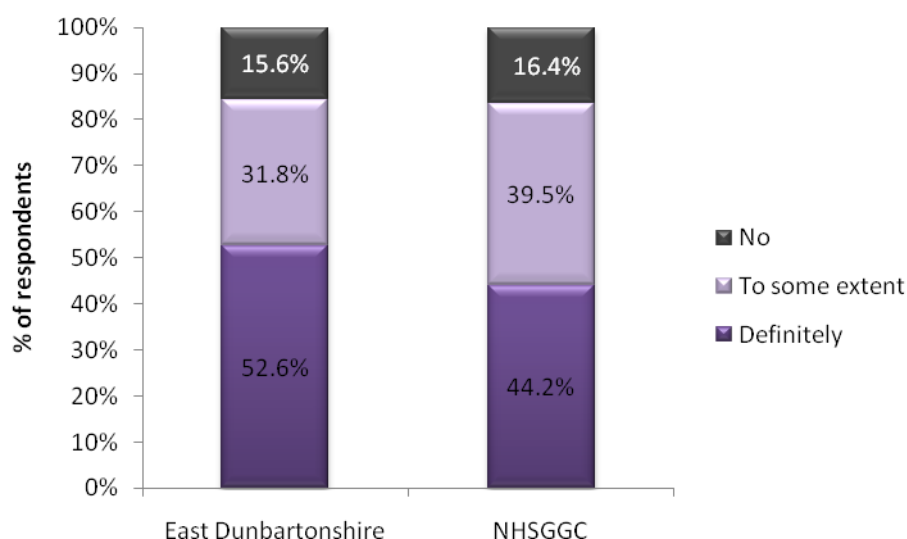
Having a Say in How Health Services are Delivered

Three in five (64%) of those who had used health services in the last year felt that they had had a say in how these services are delivered, either definitely (33%) or to some extent (30%).

Feel that Views and Circumstances are Understood and Valued

Of those who had used health services in the last year, 85% felt that their views and circumstances were understood and valued, either definitely (46%) or to some extent (38%).

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to definitely feel that their views and circumstances were understood and valued.

Figure 3.8: Whether Feel that Views and Circumstances are Understood and Valued: East Dunbartonshire and NHSGGC
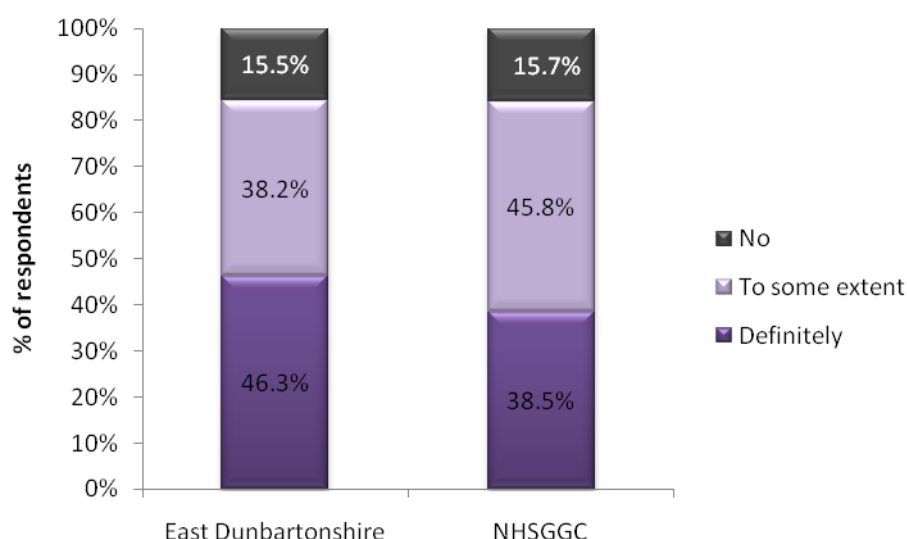
3.5   Accessing Health Services

Respondents were asked on a scale of 1 to 5, (1 being 'very difficult' and 5 being 'very easy') how easy or difficult it was to access a number of specific health services. The tables in this section have categorised responses so that 1 and 2 are 'difficult', 3 is 'neither difficult nor easy', and 4 and 5 are 'easy'.

Traveling to Hospital for an Appointment

In total, 85% of respondents indicated that they found it easy to travel to hospital for an appointment, while 9% found it neither difficult nor easy and 6% found it difficult.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to find it easy to travel to hospital for an appointment.

Figure 3.9: Difficulty/Ease of Traveling to Hospital for an Appointment: East Dunbartonshire and NHSGGC
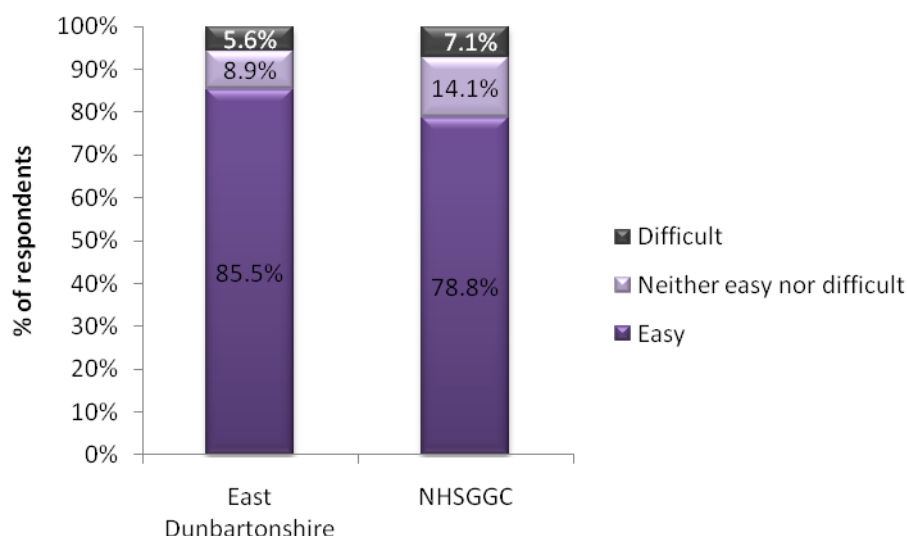
Getting a GP appointment

One in five (20%) respondents said that it was difficult to obtain an appointment to see their GP, 15% said that it was neither easy nor difficult and 65% said that it was easy.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHSGGC area as a whole, those in East Dunbartonshire were more likely to find it difficult to get a GP appointment (20% East Dunbartonshire; 11% NHSGGC).

Figure 3.10: Difficulty/Ease of Getting Appointment to see GP: East Dunbartonshire and NHSGGC
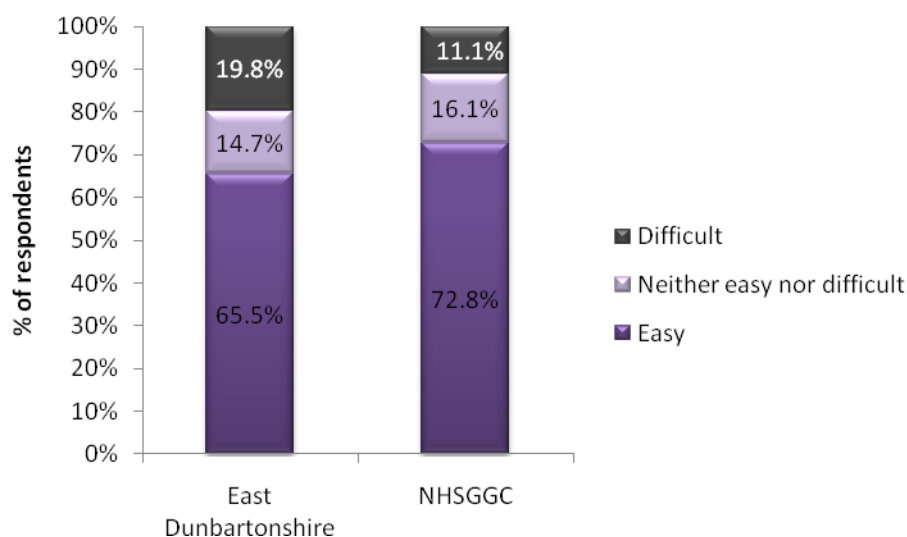
Obtaining an Appointment at the Hospital

One in nine (12%) respondents said that it was difficult to obtain a hospital appointment, 23% said that it was neither easy nor difficult and 65% said that it was easy.

Getting a Consultation at GP Surgery within 48 Hours

Respondents were asked how easy or difficult it was to get a consultation with someone at their GP surgery within 48 hours when needed. Four in five (78%) said that it was easy, 12% said that it was neither easy nor difficult and 10% said that it was difficult.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHS Greater Glasgow and Clyde area as a whole, those in East Dunbartonshire were more likely to say that it was easy to get a consultation with a GP within 48 hours when needed.

Figure 3.11: Difficulty/Ease of Getting a Consultation at GP Surgery within 48 Hours: East Dunbartonshire and NHSGGC
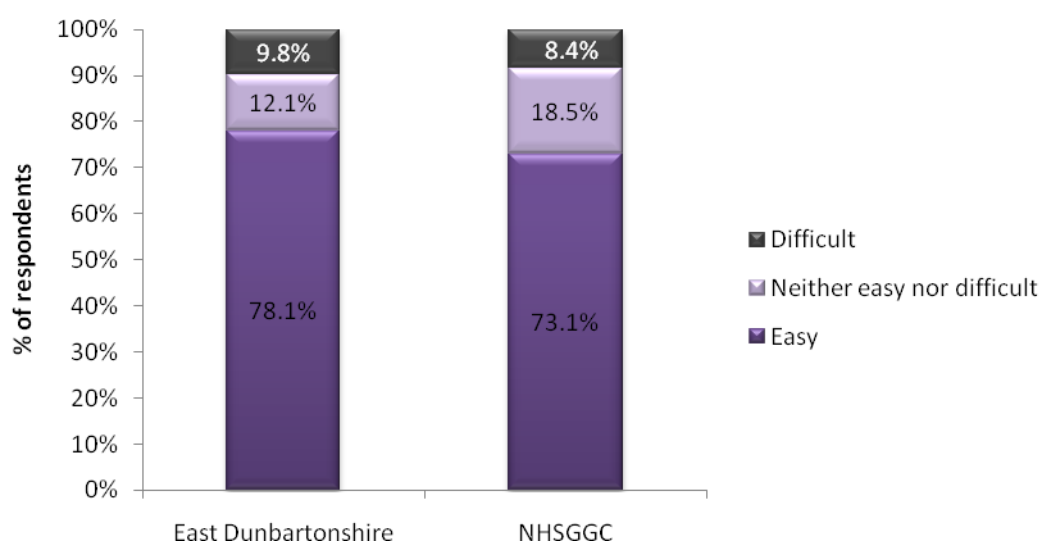
Those aged 65 or over were less likely to find it difficult to get a GP consultation within 48 hours, and women were more likely than men to find this difficult. This is shown in Table 3.8.

Table 3.8: Difficulty/Ease of Getting a Consultation at GP Surgery within 48 Hours by Age and Gender

	Difficult	Neither/nor	Easy	Unweighted base (n)
Age:				
16-44	11%	14%	75%	137
45-64	11%	13%	76%	185
65+	5%	8%	88%	240
Men	7%	11%	83%	217
Women	12%	13%	75%	346
All	10%	12%	78%	569

Accessing Health Services in an Emergency

Four in five (84%) respondents said that it was easy to access health services in an emergency, while 11% said that it was neither easy nor difficult and 5% said that it was difficult.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to say that it was easy to access health services in an emergency.

Figure 3.12: Difficulty/Ease of Accessing Health Services in an Emergency: East Dunbartonshire and NHSGGC
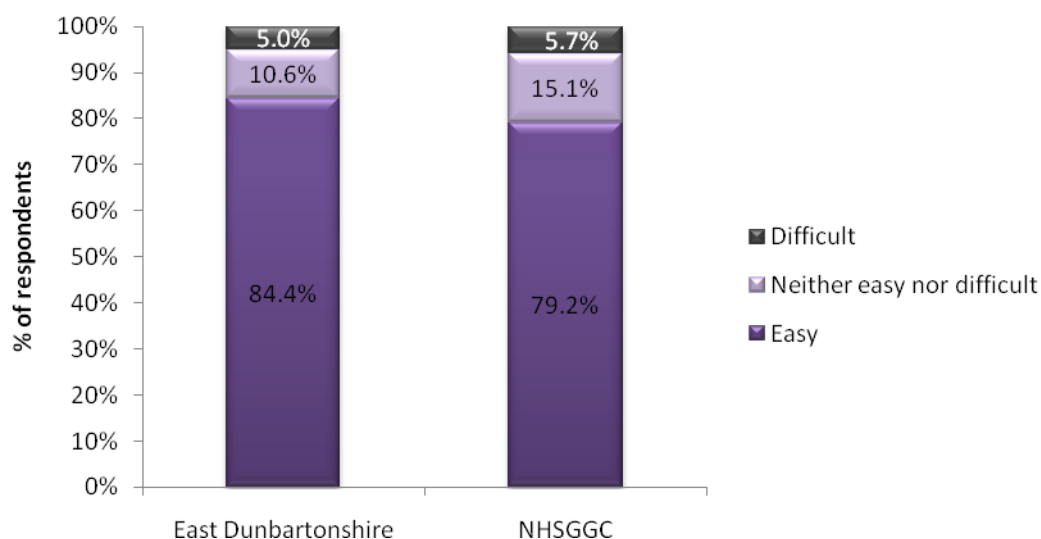
Getting an Appointment to See the Dentist

Four in five (82%) respondents said that it was easy to get an appointment to see the dentist, while 10% said that it was neither easy nor difficult and 8% said that it was difficult.

Comparison with NHS Greater Glasgow & Clyde Area

Respondents in East Dunbartonshire were more likely than those in the NHS Greater Glasgow and Clyde area as a whole to say that it was easy to get an appointment to see the dentist. This is shown in Figure 3.13.

Figure 3.13: Difficulty/Ease of Getting an Appointment to See the Dentist: East Dunbartonshire and NHSGGC
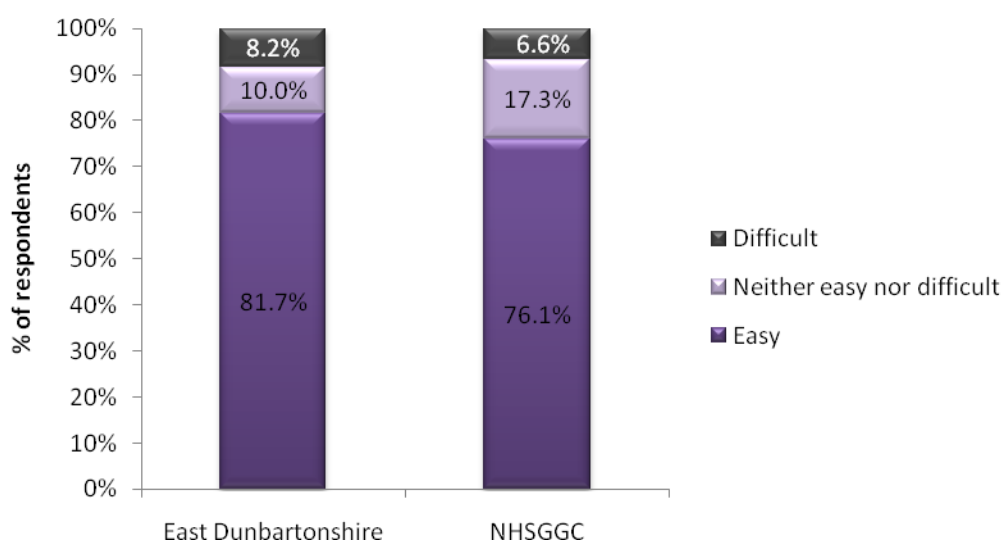
Women were more likely than men to find it difficult to get a dentist appointment, as shown in Table 3.9.

Table 3.9: Difficulty/Ease of Getting a Dentist Appointment by Gender

	Difficult	Neither/nor	Easy	Unweighted base (n)
Men	5%	11%	84%	204
Women	11%	9%	80%	312
All	8%	10%	82%	521

3.6   Accidents in the Home

Respondents were asked whether in the past year anyone in their household had suffered an accidental injury in the home. One in eighteen (5%) said that this had happened in the last year.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to say that someone in their household had suffered an accidental injury at home in the last year (5% East Dunbartonshire; 4% NHSGGC).

4   Health Behaviours

4.1   Chapter Summary

Table 4.1 shows the core indicators relating to health behaviours.

Table 4.1: Indicators for Health Behaviours

Indicator	% of sample	Unweighted base (n)
Exposed to second hand smoke most or some of the time (Q21)	28.9%	626
Current smoker (Q22)	22.6%	628
Heavily addicted smoker (smoking 20 or more cigarettes per day), based on all smokers	59.3%	141
Exceeds recommended limits for weekly units of alcohol (based on all respondents) (Q29)	17.1%	574
Exceeds recommended limits for weekly units of alcohol (based on all those who drank at all in the past week) (Q29)	35.1%	247
Binge drinker in the past week (based on all respondents) (Q29)	29.0%	585
Binge drinker in the past week (based on all those who drank at all in the past week) (Q29)	58.0%	258
Takes at least 30 minutes of moderate exercise 5 or more times per week OR takes at least 20 minutes or vigorous exercise 3 or more times per week (Q43-Q47)	57.3%	628
Participated in at least one sport in the last week (Q48 & Q49)	47.4%	627
Consumes 5 or more portions of fruit/vegetables per day (Q32 & Q33)	41.3%	627
Consumes breakfast every day (Q38)	75.0%	627
Consumes at least 2 portions of oily fish per week (Q36)	28.5%	628
Consumes at least 2 portions of high fat snacks per day (Q34)	36.1%	623
Consumes at least 5 slices of bread per day (Q35)	8.5%	625
Eat takeaway food every week (Q37)	22.1%	628
Body Mass Index of 25 or over (Q41 & Q42)	42.8%	569
More than 1 of the following 5 'unhealthy' behaviours: smoking, BMI of 25+, not meeting recommended levels of physical activity, not meeting the recommended fruit/veg consumption, binge drinking	69.2%	526
More than 1 of the following 5 'healthy' behaviours: non-smoker, within normal BMI range (18.5-24.99), meet the physical activity recommendations, eat 5 or more portions of fruit/veg per day, drink within safe limits/not at all	94.5%	449

Three in ten (29%) respondents were exposed to second hand smoke most or some of the time. Those aged 16-44 were more likely to be exposed to second hand smoke.

Just under a quarter (23%) of respondents were smokers. Those aged under 65 and men were more likely to be smokers.

Three in five (59%) of those who smoked were heavily addicted – i.e. smoked 20 or more cigarettes per day.

One in six (17%) exceeded the recommended weekly limit for alcohol. This equates to 35% of those who had drunk alcohol in the previous week. Those aged under 65 and men were more likely to exceed this limit.

Three in ten (29%) respondents had been binge drinkers in the previous week. This equates to 58% of those who had drunk alcohol in the previous week. Those aged under 65 were more likely to be binge drinkers.

Just under three in five (57%) respondents met the target for physical activity. Those aged 65 or over and men were less likely to meet the target.

Just under half (47%) of respondents had participated in at least one sport in the previous week. Those aged 65 or over were less likely to have participated in sport.

Two in five (41%) met the target of consuming five or more portions of fruit/vegetables per day. Those aged under 45 and men were less likely to do so.

Three in four (75%) ate breakfast every day. Those aged under 65 and men were less likely to do so.

Three in ten (29%) respondents met the target of consuming two or more portions of oily fish per week. Those aged under 45 and men were less likely to meet this target.

Just over a third (36%) of respondents exceeded the recommended limit of consuming one high fat and sugary snack per day. Those aged 65 or over were most likely to do so.

One in 12 (9%) met the target of consuming five or more slices (or equivalent) of bread per day. Those aged 65 or over and women were less likely to do so.

Just over one in five (22%) respondents said that they ate fast food takeaways every week. Those aged under 45 and men were more likely to do so.

More than two in five (43%) respondents had a body mass index which indicated that they were overweight/obese. Those aged 45 or over were more likely to be overweight/obese.

4.2   Smoking

Exposure to Second Hand Smoke

Respondents were asked how often they were in places where there is smoke from other people smoking tobacco. Three in ten (29%) said that this happened most of the time (20%) or some of the time (9%). A further 31% said that they were seldom exposed to second hand smoke and 40% said that they never were.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were less likely than those in the NHSGGC area as a whole to be exposed to second hand smoke most or some of the time.

Figure 4.1: Exposure to Second Hand Smoke: East Dunbartonshire and NHSGGC
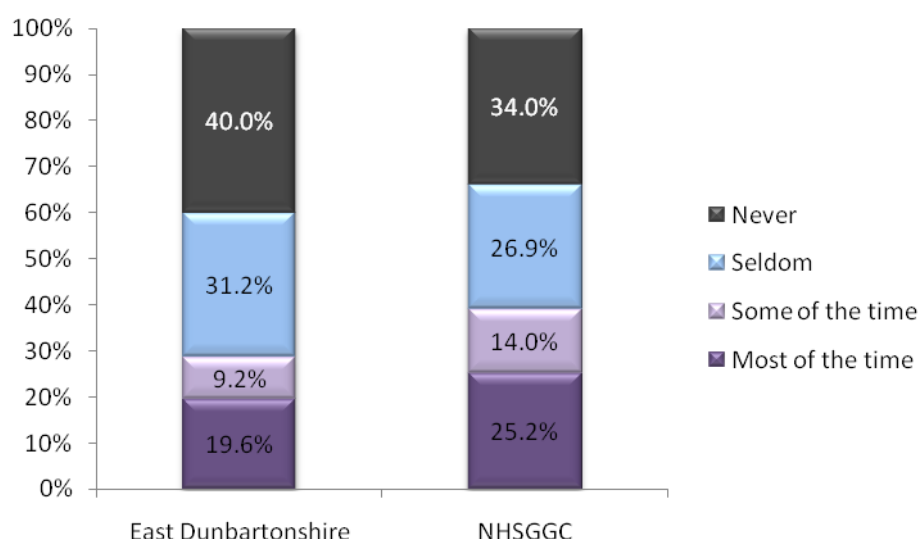
Those aged 65 or over were less likely to be exposed to second hand smoke most or some of the time. Those aged 16-44 were the most likely to be exposed to second hand smoke.

Table 4.2: Exposure to Second Hand Smoke (Q21) by Age

	Most of the time	Some of the time	Seldom	Never	Most/some of the time	Unweighted base (n)
Age:						
16-44	21%	13%	31%	34%	34%	164
45-64	22%	7%	32%	39%	29%	203
65+	12%	6%	30%	51%	19%	250
All	20%	9%	31%	40%	29%	626

Smokers

Just under a quarter (23%) of respondents were smokers, smoking either every day (21%) or some days (1%).

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were less likely than those in the NHS Greater Glasgow area as a whole to be smokers (23% East Dunbartonshire; 33% NHSGGC).

Figure 4.2: Smoking Status: East Dunbartonshire and NHSGGC
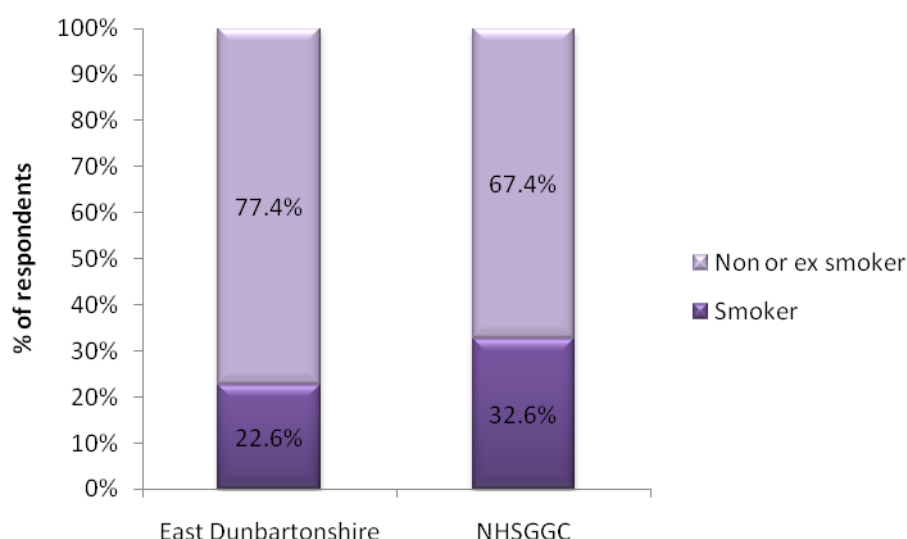
Those aged under 65 were more likely to be smokers, and men were more likely than women to be smokers. This is shown in Table 4.3.

Table 4.3: Proportion of Current Smokers (Q22) by Age and Gender

	Current smoker	Unweighted base (n)
Age: 16-44	25%	164
45-64	26%	204
65+	12%	251
Men	28%	254
Women	18%	368
All	23%	628

Heavily Addicted Smokers

Among smokers, the mean number of cigarettes smoked per day was 31.8. Three in five (59%) of smokers were 'heavily addicted smokers' i.e. smoking 20 or more cigarettes per day.

Among smokers, those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to be heavily addicted (59% East Dunbartonshire; 47% NHSGGC).

Intentention to Stop Smoking

Less than half (44%) of smokers said that they indend to stop smoking.

4.3   Drinking

Frequency of Drinking Alcohol

One in four (23%) respondents said that they never drank alcohol, 24% drank alcohol sometimes (but less than weekly) and 53% drank alcohol at least once a week (including 6% who drank alcohol on three or more days per week).

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHS Greater Glasgow & Clyde area as a whole to drink alcohol at least once a week and less likely to say that they never drank alcohol.

Figure 4.3: Frequency Drink Alcohol: East Dunbartonshire and NHSGGC
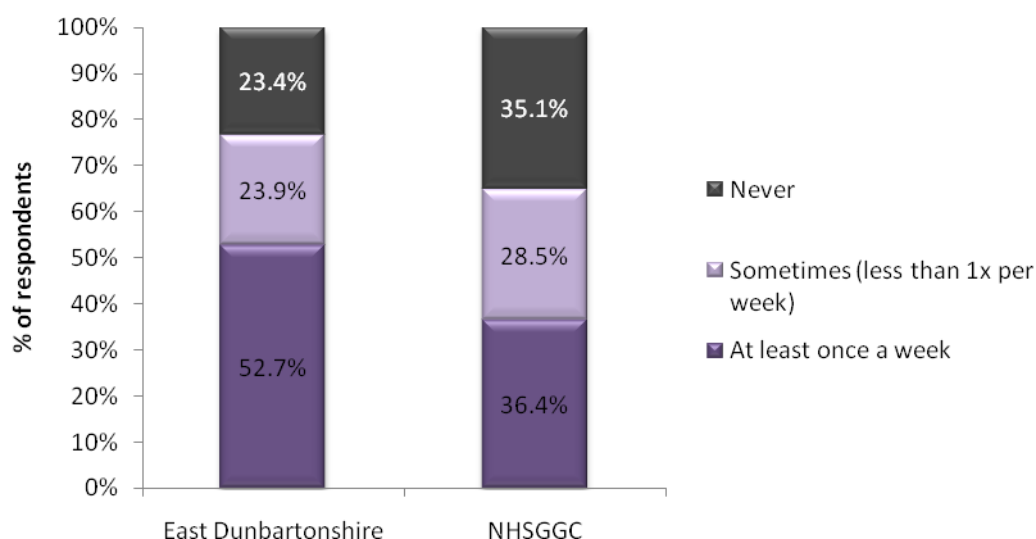
Those aged 45-64 were the most likely to drink alcohol at least once a week. Men were more likely than women to drink alcohol weekly.

Table 4.4: Frequency Drink Alcohol (Q27) by Age and Gender

	Never	Less than weekly	At least once a week	Unweighted base (n)
Age:				
16-44	20%	30%	49%	163
45-64	16%	20%	64%	204
65+	40%	19%	41%	249
Men	19%	22%	59%	253
Women	27%	26%	47%	366
All	23%	24%	53%	625

Alcohol Consumption in Previous Week

Respondents were asked whether they had had a drink containing alcohol in the past seven days. A third (66%) of all respondents said they had drunk alcohol in the past week (therefore higher than the 53% who had said they drank alcohol weekly).

Respondents were asked how many of each type of drink they had consumed on each of the past seven days. Responses were used to calculate the total units of alcohol consumed on each day, and a total number of units for the week. For the 2008 survey, in calculating the number of units, new assumptions were applied for the number of units in each type of drink. Appendix D shows the assumptions of units in each type of drink for both the current survey and for the 2005 survey. The data presented here show indicators for both the new unit measures and the old unit measures for comparison.

The recommended weekly limit for alcohol consumption is 21 units per week for men and 14 units per week for women. Using the new unit measures, 17% of all respondents

exceeded their weekly limit. This equates to 35% of all those who had drunk alcohol in the last week.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to exceed the recommended weekly limit for alcohol.

Figure 4.4: Whether Exceeded Recommended Weekly Limits for Alcohol (new unit measures): East Dunbartonshire and NHSGGC
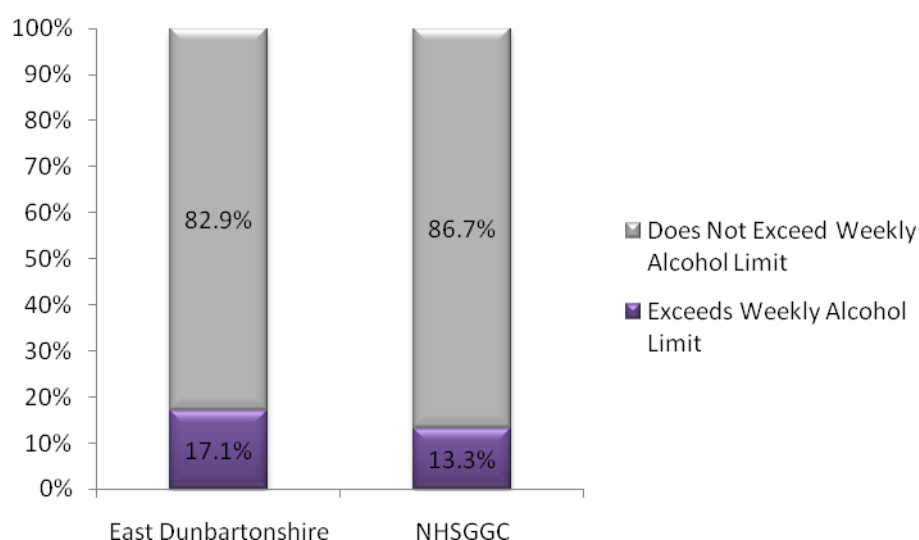
Those aged 65 or over were less likely to exceed the recommended weekly limit for alcohol consumption. Men were more likely than women to exceed their recommended limit (23% of men; 12% of women).

Table 4.5: Proportion Exceeding Recommended Weekly Limits for Alcohol (old new and old unit measures) (Q29) by Age and Gender

	Exceeds Weekly Limit (new measures)	Exceeds Weekly Limit (old measures)	Unweighted base (n)
Age: 16-44 45-64 65+	19% 21% 7%	14% 16% 4%	149 184 236
Men Women	23% 12%	18% 8%	233 341
All	17%	12%	574

Binge Drinking

Binge drinkers were defined as:

- Men who consumed eight or more units of alcohol on at least one day in the previous week;
- Women who consumed six or more units of alcohol on at least one day in the previous week.

Using the new measures for calculating unit totals, 29% of all respondents had been binge drinkers during the previous week. This equates to 58% of all those who had consumed alcohol in the previous week.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHS Greater Glasgow and Clyde area as a whole to have been binge drinkers in the previous week.

Figure 4.5: Whether Binge Drinker in Past Week (new unit measures): East Dunbartonshire and NHSGGC
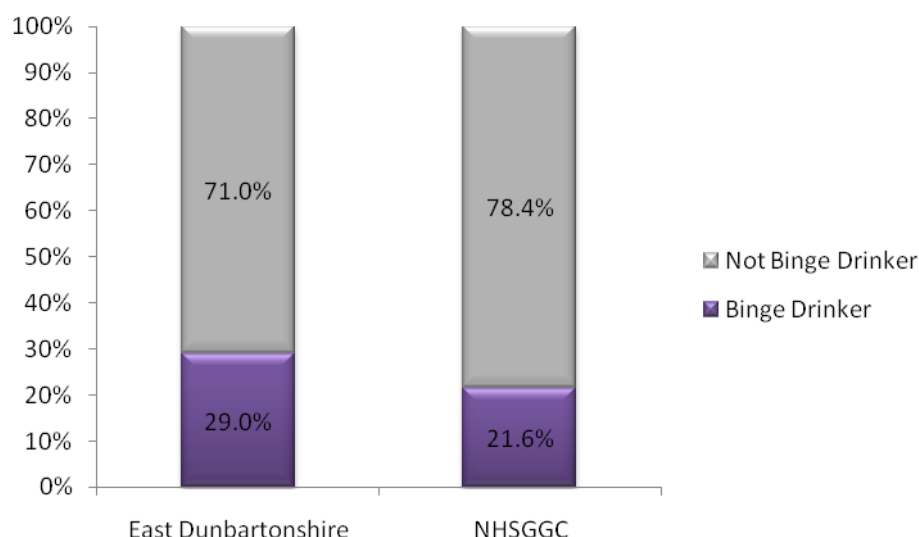
Those aged under 65 were most likely to be binge drinkers. This is shown in Table 4.6.

Table 4.6: Proportion Binge Drinking During Previous Week (old new and old unit measures) (Q29) by Age

	Binge Drinker (new measures)	Binge Drinker (old measures)	Unweighted base (n)
Age: 16-44 45-64 65+	35% 34% 11%	30% 23% 9%	152 190 238
All	29%	23%	585

Where People Drink Alcohol

Those who ever drank alcohol were asked where they had drunk alcohol in the last six months. Responses are shown in Figure 4.6. The most common places to have drunk alcohol in the last six months were at home and at a pub.

Figure 4.6: Where Consumed Alcohol in the Last Six Months (Based on All Those who Ever Drank Alcohol)

% of all those who ever drank (unweighted base=448)
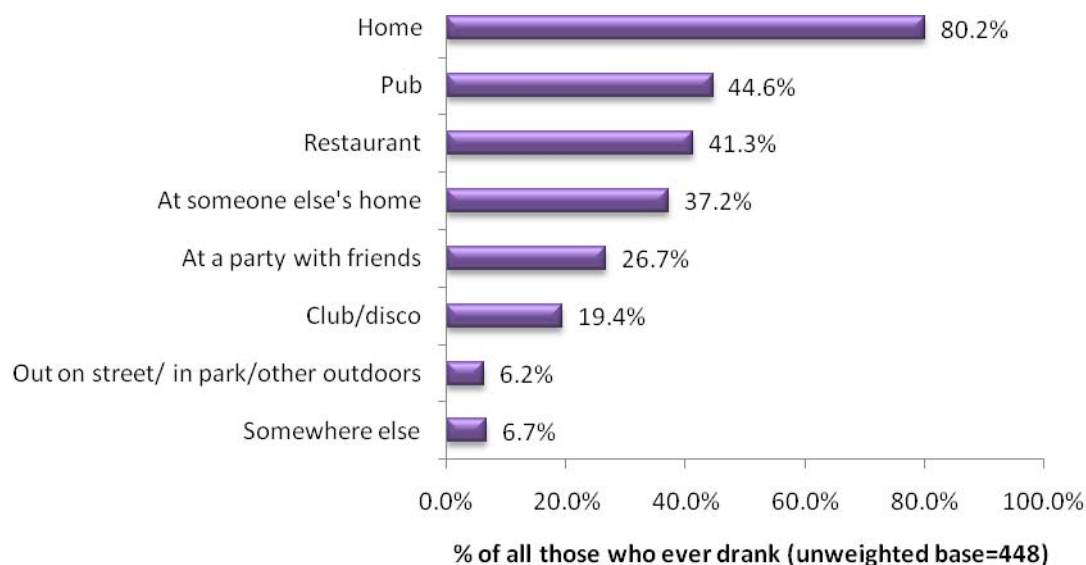
Comparison with NHS Greater Glasgow & Clyde Area

Figure 4.7 shows that compared to the NHSGGC area as a whole, those in East Dunbartonshire who drank alcohol were more likely to have drunk alcohol at home, in a restaurant, at someone else's home, at a party with friends, at a club/disco or outside. However, they were less likely to have drunk alcohol in a pub.

Figure 4.7: Where Consumed Alcohol in the Last Six Months: East Dunbartonshire and NHSGGC (Based on All Those who Ever Drank Alcohol; All Places Showing Significant Difference).

% of those who ever drank alcohol
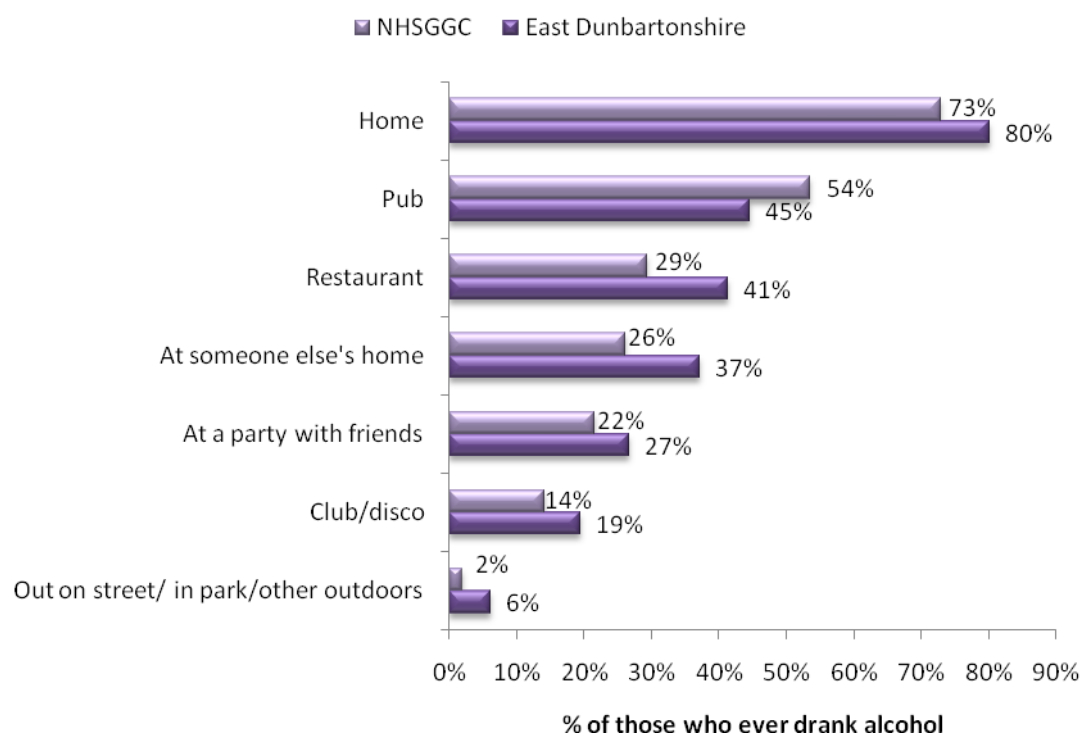
4.4   Physical Activity

Frequency of Physical Activity

Respondents were asked on how many days per week they take at least 30 minutes of moderate physical exercise such as brisk walking. They were also prompted to ensure that they included all physical activity that they do in their job, housework, DIY and gardening. In total, 53% of respondents said that they took at least 30 minutes of moderate activity on five or more days per week.

Respondents were also asked on how many days they took at least 20 minutes of vigorous activity (enough to make them sweaty and out of breath). This also included a prompt to ensure that all activity done in work, housework, DIY and gardening were included. In total, 19% said that they took at least 20 minutes of vigorous activity on three or more days per week.

The target for physical activity is to take 30 minutes or more of moderate physical activity on five or more days per week OR 20 minutes of vigorous activity on three or more days per week. In total, 57% of respondents met this target.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHSGGC area as a whole, those in East Dunbartonshire were more likely to meet the target for physical activity.

Figure 4.8:   Whether Meet Physical Activity Target: East Dunbartonshire and NHSGGC
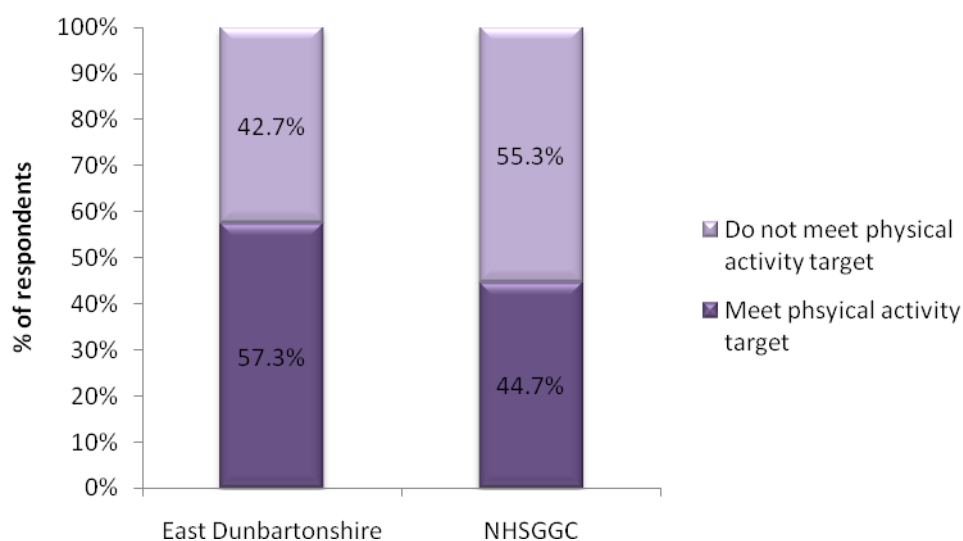
Those aged 65 or over were least likely to meet the target for physical activity and those aged 45-64 were most likely to do so. Women were more likely than men to meet the target.

Table 4.7: Proportion Who Take 30 Minutes or More of Moderate Activity 5 or More Times Per Week or 20 Minutes or More of Vigorous Activity 3 or More Times Per Week (Q43-47) by Age and Gender

	Meet Physical Activity Target	Unweighted base (n)
Age:		
16-44	56%	164
45-64	66%	204
65+	45%	251
Men	53%	254
Women	61%	368
All	57%	628

Participation in Sport in the Last Week

Respondents were asked whether they had participated in specific sports in the last week. Responses are shown in Figure 4.9. Just under half (47%) of respondents had participated in at least one sport in the last week. The most common sports were gym workouts (16%) and exercises (14%).

Figure 4.9: Proportion Participating in Sports in the Last Week
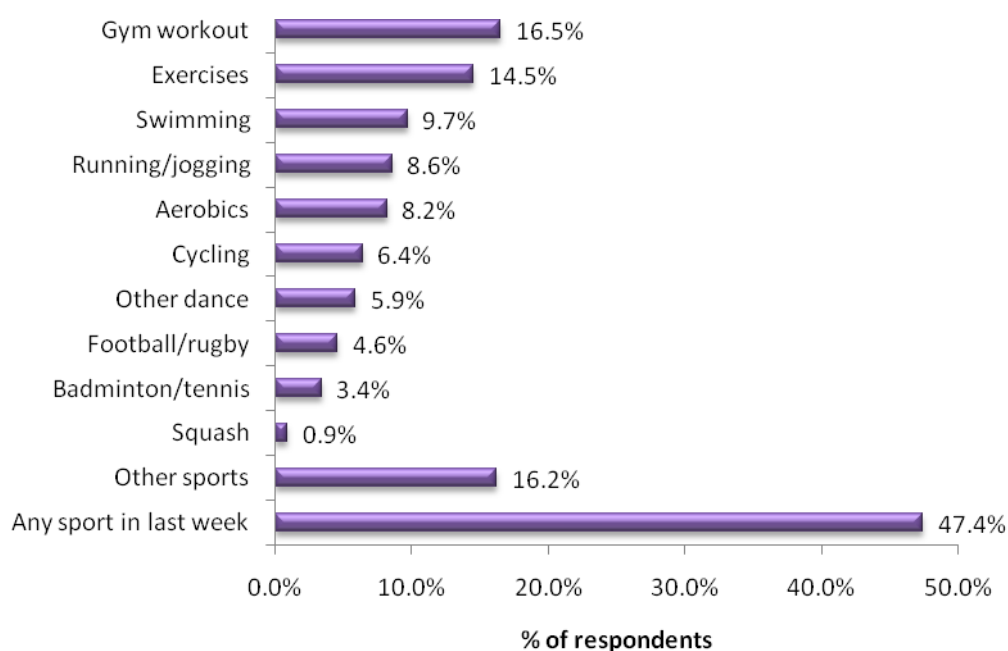
Of those who said that they participated in 'other sports', the most common types of other sport were walking (31%), golf (27%), bowling (5%) and boxing (5%).

Comparison with NHS Greater Glasgow & Clyde Area

As Figure 4.10 shows, those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to have participated in a sport in the last week. Specifically, those in East Dunbartonshire were more likely to have participated in exercises, aerobics, other dance or badminton/tennis. However, they were less likely to have participated in football/rugby.

Figure 4.10: Proportion Participating in Sports in the Last Week: East Dunbartonshire and NHSGGC (all sports showing a significant difference)
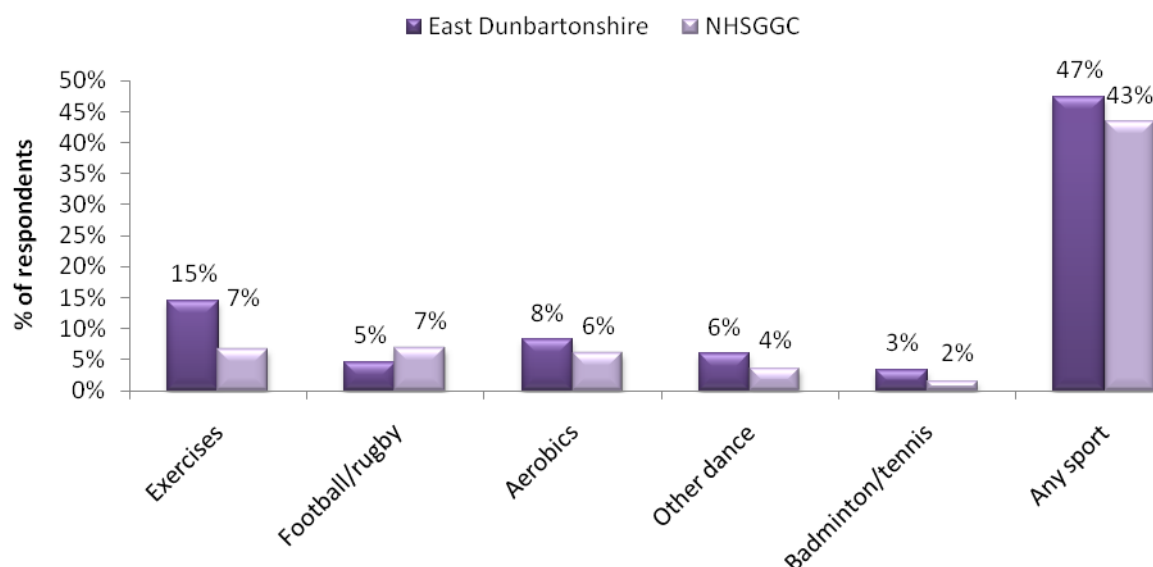
The likelihood of having participated in at least one sport in the last week decreased with age, ranging from 53% of those aged 16-44 to 37% of those aged 65 and over.

Table 4.8: Proportion Who Participated in at Least One Sport in the Last Week (Q48/Q49) by Age

	Participated in Sport	Unweighted base (n)
Age: 16-44 45-64 65+	53% 48% 37%	164 203 251
All	47%	627

4.5   Diet

Fruit and Vegetables

The national target for fruit and vegetable consumption is to have at least five portions of fruit and/or vegetables per day. Responses indicate that 41% of respondents met this target and 6% had no fruit or vegetables in a day.

Table 4.9 shows that those aged 45-64 were most likely to meet this target and those aged 16-44 were least likely to do so. Women were more likely than men to meet the target for fruit/vegetable consumption.

Table 4.9:   Proportion Who Consume Target Amount of Fruit/Vegetables (Q32/Q33) by Age and Gender

	Meet Fruit/Veg Target	No fruit/veg	Unweighted base (n)
Age:			
16-44	35%	10%	164
45-64	49%	2%	204
65+	40%	4%	250
Men	37%	7%	253
Women	45%	5%	368
All	41%	6%	627

Breakfast

Respondents were asked on how many days of the week they ate breakfast. Three in four (75%) ate breakfast every day, 10% never ate breakfast, with the remaining 15% eating breakfast between one and six days per week.

Those aged under 65 were less likely to eat breakfast every day. Women were more likely than men to eat breakfast every day (77% of women; 72% of men).

Table 4.10: Frequency Eat Breakfast (Q38) by Age and Gender

	Every Day	Some Days	Never	Unweighted base (n)
Age:				
16-44	71%	19%	10%	163
45-64	70%	17%	13%	204
65+	90%	5%	5%	251
Men	72%	19%	9%	254
Women	77%	12%	11%	367
All	75%	15%	10%	627

Respondents were asked what they had eaten for breakfast that morning. On the morning of the survey, 15% of respondents had not eaten breakfast. The most commonly consumed items were cereal and bread/toast, as shown in Figure 4.11.

Figure 4.11: Items Consumed for Breakfast That Morning (Q39)
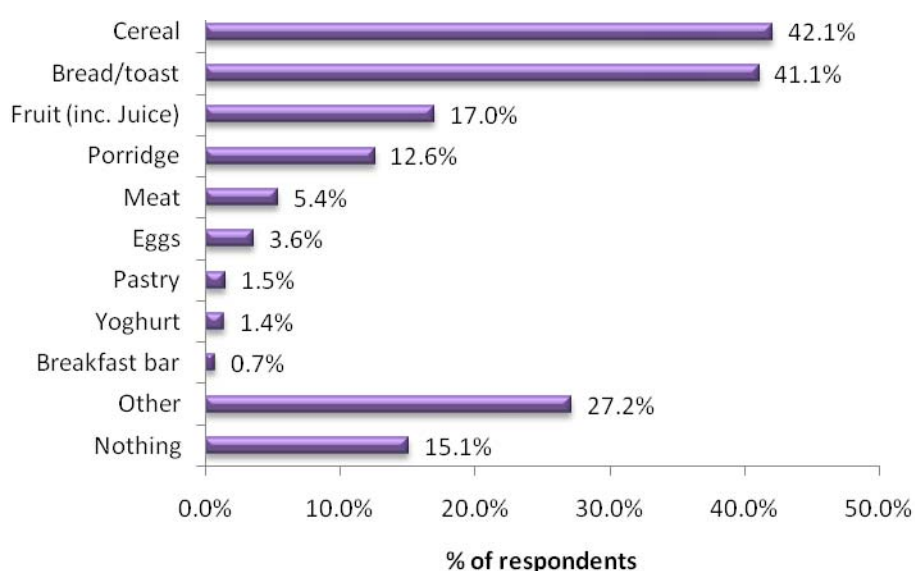
Oily Fish

The recommended target is to consume two or more portions of oily fish per week. Three in ten (29%) respondents met this target.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to meet the target for oily fish consumption. This is shown in Figure 4.12.

Figure 4.12: Whether Meet Target for Oily Fish Consumption: East Dunbartonshire and NHSGGC
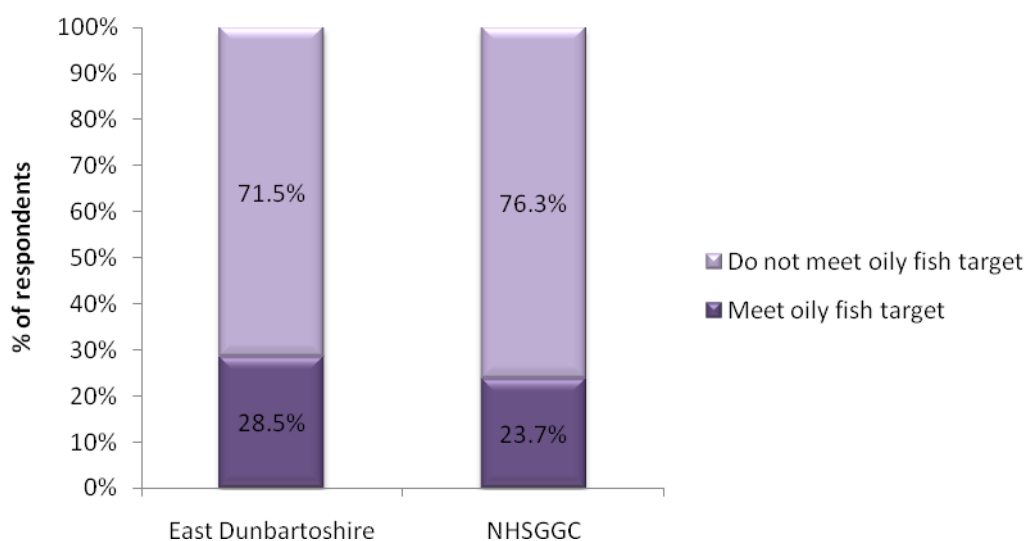
Those aged 45-64 were the most likely to meet the target for oily fish consumption and those aged 16-44 were the least likely. Women were more likely to meet this target than men. This is shown in Table 4.11.

Table 4.11: Proportion Who Consume Target Amount of Oily Fish (Q36) by Age and Gender

	Meet Oily Fish Target	Unweighted base (n)
Age:		
16-44	20%	164
45-64	37%	204
65+	29%	251
Men	24%	254
Women	32%	368
All	29%	628

High Fat and Sugary Snacks

Just over a third (36%) of respondents exceeded the recommended daily limit of one high fat and sugary snack (e.g. cakes, pasties, chocolate, biscuits, crisps).

Those aged 65 or over were most likely to exceed the recommended limit for high fat/sugary snacks and those aged 45-64 were least likely. This is shown in Table 4.12.

Table 4.12: Proportion Who Exceeded Recommended Daily Limit of 2 Portions of High Fat/Sugary Snacks (Q34) by Age

	Two or More High Fat/Sugary Snacks Per Day	Unweighted base (n)
Age:		
16-44	36%	161
45-64	29%	203
65+	48%	250
All	36%	623

Bread

Respondents were asked how many slices of bread (or equivalent rolls, chapattis, naan etc) they consumed on an average day. Responses showed that 7% ate fewer than one slice per day, 12% had one slice, 39% had two slices, 10% had three slices and 23% had four slices. In total, 9% met the target of consuming five or more slices (or equivalent) of bread per day. The mean number of slices per day was 2.61.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to meet the target for bread consumption (9% East Dunbartonshire; 6% NHSGGC).

Men were considerably more likely than women to meet the target for bread consumption (15% of men; 3% of women). Also, those aged 16-44 were the most likely to meet this target and those aged 65 or over were the least likely to do so. This is shown in Table 4.13.

Table 4.13: **Proportion Who Met Recommended Daily Target for Bread Consumption (Q35) by Age and Gender**

	Five or More Slices Per Day	Unweighted base (n)
Age:		
16-44	13%	163
45-64	6%	204
65+	3%	250
Men	15%	253
Women	3%	367
All	9%	625

Fast Food Takeaways

Just over one in five (22%) respondents said that they ate fast food takeaways once a week or more, while 27% said they never did and 51% did sometimes (less often than once a week).

The likelihood of having takeaways every week declined with age – ranging from 33% of those aged 16-44 to 6% of those aged 65 or over. Men were more likely than women to eat fast food takeaways.

Table 4.14: Frequency Have Takeaways (Q37) by Age and Gender

	Never	Less than weekly	At least once a week	Unweighted base (n)
Age:				
16-44	12%	55%	33%	164
45-64	21%	60%	19%	204
65+	64%	30%	6%	251
Men	22%	55%	24%	254
Women	32%	47%	20%	368
All	27%	51%	22%	628

4.6   Body Mass Index (BMI)

Respondents were asked to state their height and weight, from which their Body Mass Index (BMI) was calculated.

BMI classification points are defined as follows:

Underweight	BMI below 18.5
Ideal weight	BMI between 18.5 and 24.99
Overweight	BMI between 25 and 29.99
Obese	BMI between 30 and 39.99
Very obese	BMI 40 or over

However, due to a recognised tendency for people to over-report height and under-report weight, a revised cut off for obesity has been applied at 29.2. The table in this section shows both measures of obesity.

Altogether, 43% of respondents had a BMI of 25 or over, indicating that they are overweight or obese. Using the new definition obesity (BMI of 29.2), 16% of respondents were classified as obese.

Those aged 45 or over were more likely than younger respondents to be overweight/obese. The age group most likely to be obese was 45-64 year olds. This is shown in Table 4.15

Table 4.15: Body Mass Index (Q41/Q42) by Age

	Under-weight	Ideal	Over-weight	Obese	Very obese	Revised obese (29.2+)	Unweighted base (n)
Age: 16-44	2%	65%	25%	7%	1%	11%	158
45-64	2%	48%	31%	18%	1%	22%	188
65+	4%	45%	37%	12%	2%	16%	216
All	3%	54%	30%	12%	1%	16%	569

4.7   Unhealthy and Healthy Behaviour Indices

An Unhealthy Behaviour Index

This section examines the extent to which multiple 'unhealthy' behaviours are exhibited by the same people. An 'unhealthy' behaviour index has been derived from the following five unhealthy behaviours:

- Smoking;
- Having a BMI of 25 or over;
- Not meeting the recommended levels of physical activity;
- Not meeting the recommended level of fruit and vegetable consumption; and
- Binge drinking.

Figure 4.13 shows that most respondents (92%) exhibited at least one of these behaviours, but less than 1% exhibited all five. The mean number of unhealthy behaviours was 1.98.

Figure 4.13: Number of Unhealthy Behaviours Exhibited
Unweighted N=526
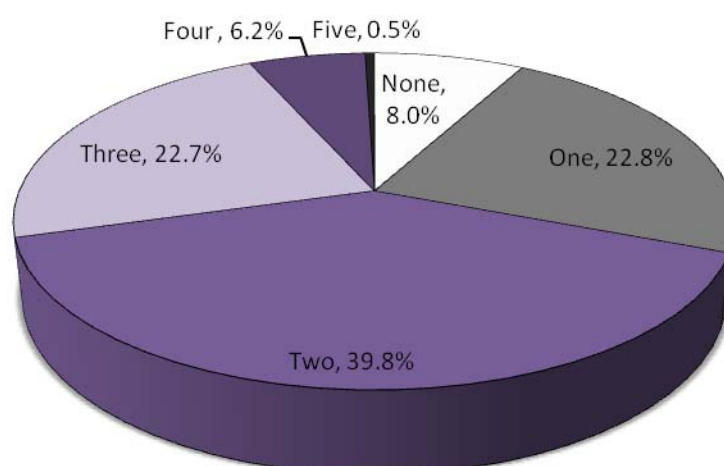
Comparison with NHS Greater Glasgow & Clyde

Those in East Dunbartonshire tended to exhibit fewer unhealthy behaviours than those in the NHSGGC area as a whole (means: 1.98 East Dunbartonshire; 2.14 NHSGGC).

Men tended to exhibit more unhealthy behaviours than women. This is shown in Table 4.16.

Table 4.16: Mean Number of Unhealthy Behaviours by Gender

	Mean No. of Unhealthy Behaviours	Unweighted base (n)
Men	2.13	219
Women	1.84	307
All	1.98	526

A Healthy Behaviour Index

A 'healthy behaviour index' was also developed, which examined the extent to which respondents exhibited multiple healthy behaviours. The five healthy behaviours used in the index were:

- Not smoking;
- Having a BMI within the ideal range (18.5 to 24.99);
- Meeting the physical activity recommendations;
- Consuming five or more portions of fruit/vegetables per day; and
- Either not drinking or drinking within safe limits (i.e. not binging to drinking too much in a week).

Figure 4.14 shows that nearly all respondents exhibited at least one healthy behaviour, and 9% of respondents exhibited all five. The mean number of healthy behaviours was 3.10.

Figure 4.14: Number of Healthy Behaviours Exhibited
Unweighted base=449
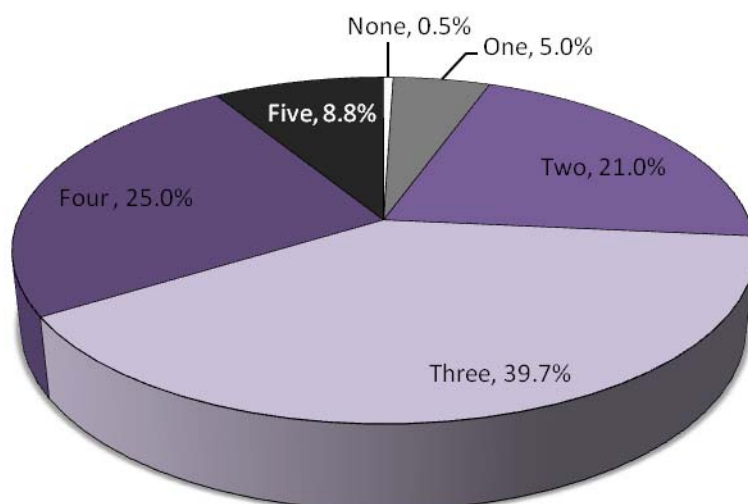
Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire tended to exhibit more healthy behaviours than those in the NHSGGC area as a whole (means= 3.10 East Dunbartonshire; 2.93 NHSGGC).

Women tended to exhibit more healthy behaviours than men, as shown in Table 4.17.

Table 4.17: Mean Number of Healthy Behaviours by Gender

	Mean No. of Healthy Behaviours	Unweighted base (n)
Men	2.94	188
Women	3.26	261
All	3.10	449

4.8 Attitudes to Breastfeeding

Respondents were given three statements relating to breastfeeding in public and asked to state the extent to which they agreed or disagreed with each. The first statement was:

Women should be made to feel comfortable breastfeeding their babies in public.

Nine in ten (89%) respondents agreed with this (48% strongly agreed and 42% tended to agree) and 11% disagreed (7% tended to disagree and 4% strongly disagreed).

The second statement was:

Women should only breastfeed their babies at home or in private.

One in six (17%) agreed with this (4% strongly agreed and 13% tended to agree) and 83% disagreed (27% tended to disagree and 56% strongly disagreed).

The third statement was:

I would feel embarrassed seeing a woman breastfeeding her baby.

One in five (22%) respondents agreed with this (5% strongly agreed and 17% tended to agree) and 78% disagreed with this statement (25% tended to disagree and 53% strongly disagreed).

Those aged 65 or over were the least likely to agree with the positive statement about breastfeeding and the most likely to agree with the two negative statements. Men were more likely than women to agree with the two negative statements about breastfeeding. This is shown in Table 4.18.

Table 4.18: Agree with Statements Relating to Breastfeeding (Q40) by Age and Gender

	Women should be made to feel comfortable breastfeeding in public	Women should only breastfeed at home or in private	I would feel embarrassed seeing a woman breastfeeding	Unweighted base (n)
Age:				
16-44	94%	12%	20%	151
45-64	92%	11%	15%	199
65+	74%	37%	38%	230
Men	87%*	23%	31%	231
Women	91%*	12%	14%	356
All	89%	17%	22%	592

 * denotes non-significant result.

5   Social Health

5.1   Chapter Summary

Table 5.1 summarises the indicators relating to social health.

Table 5.1: Indicators for Social Health

Indicator	% of sample	Unweighted base (n)
Feel isolated from family and friends (Q73)	14.5%	628
Belong to a club or organisation (Q58)	20.7%	628
Feel I belong to the local area (Q71b)	77.3%	623
Feel valued as a member of the community (Q71d)	55.8%	617
People in my neighbourhood can influence decisions (Q71f)	80.7%	594
Exchange small favours with people living nearby (Q72)	65.6%	625
Identify with a religion (Q98)	73.6%	612
Experienced at least one form of discrimination over last year (Q100)	5.6%	628
Feel safe in own home (Q76c)	97.7%	625
Feel safe using public transport (Q76b)	88.3%	565
Feel safe walking alone even after dark (Q76a)	71.9%	603

One in seven (14%) felt isolated from family and friends. Those aged under 45 were more likely to do so.

One in five (21%) belonged to a club/association etc. Those aged under 45 were less likely to do so.

More than three in four (77%) respondents felt that they belonged to the local area. Those aged under 45 and men were less likely to feel that they belonged to the local area.

Under three in five (56%) respondents felt valued as members of their community. Those aged under 45 and men were less likely to do so.

Four in five (81%) respondents felt that local people could influence local decisions. Those aged under 45 and men were less likely to agree with this.

Two in three (66%) respondents exchanged small favours with neighbours. Those aged under 45 were less likely to do so.

Three in four (74%) identified with a religion. Those aged under 45 and men were less likely to do so.

One in 18 (5.6%) respondents had experienced discrimination of some form over the last year.

Most (98%) respondents felt safe in their own home.

Nine in ten (88%) respondents felt safe using public transport in their area. Those aged 65 or over were less likely to feel safe using public transport.

Seven in ten (72%) respondents felt safe walking alone in their area, even after dark. Those aged 65 or over and women were less likely to feel safe walking alone.

5.2   Social Connectedness

Isolation from Family and Friends

When asked whether they ever felt isolated from family and friends, 14% said yes.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to feel isolated from family and friends.

Figure 5.1: Whether Feel Isolated from Family and Friends: East Dunbartonshire and NHSGGC
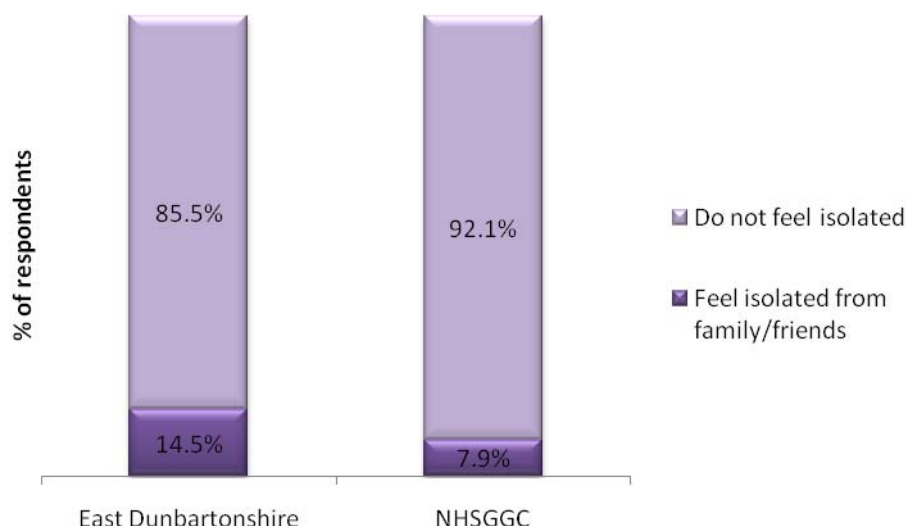
Those aged under 45 were more likely than older respondents to feel isolated from family and friends.

Table 5.2: Feel Isolated from Family and Friends (Q73) by Age

	Feel Isolated	Unweighted base (n)
Age:		
16-44	20%	164
45-64	11%	204
65+	10%	251
All	14%	628

Club Membership

One in five (21%) respondents said that they attended any social clubs, associations, church groups or anything similar. Of those who said they attended clubs or associations, 91% attended at least one club locally and 26% attended at least one club elsewhere.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHS Greater Glasgow and Clyde area as a whole to belong to a club, association, etc.

Figure 5.2: Belong to Social Club, Association Etc: East Dunbartonshire and NHSGGC
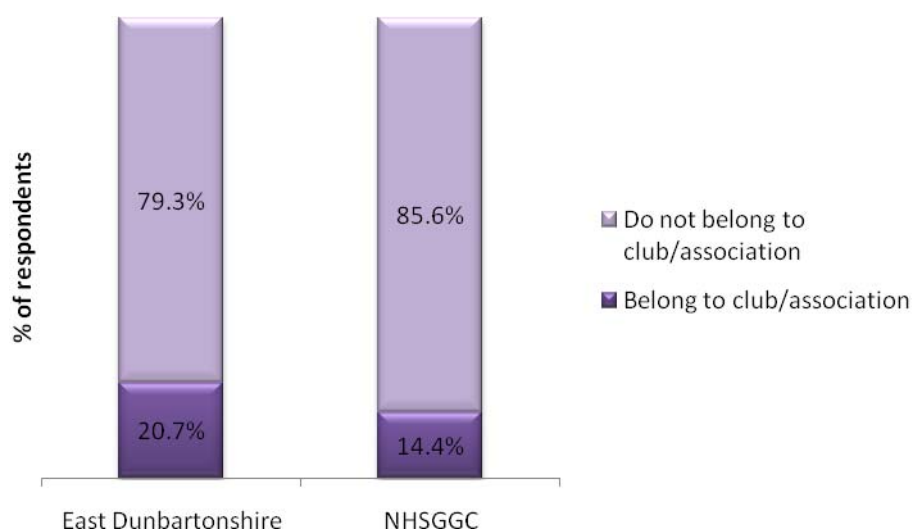
Those aged 45-64 were the most likely to belong to a club, association etc, and those aged under 45 were the least likely. This is shown in Table 5.3.

Table 5.3: Belong to Social Club, Association Etc. (Q58) by Age

	Belong to club etc.	Unweighted base (n)
Age: 16-44 45-64 65+	16% 26% 21%	164 204 251
All	21%	628

Sense of Belonging to the Community

Respondents were asked to indicate the extent to which they agreed or disagreed with the statement "I feel I belong to this local area". More than three in four (77%) respondents agreed with this statement (37% strongly agreed and 40% agreed), 11% disagreed and 12% neither agreed nor disagreed.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to agree that they belonged to the local area.

Figure 5.3: Belong to the Local Area: East Dunbartonshire and NHSGGC
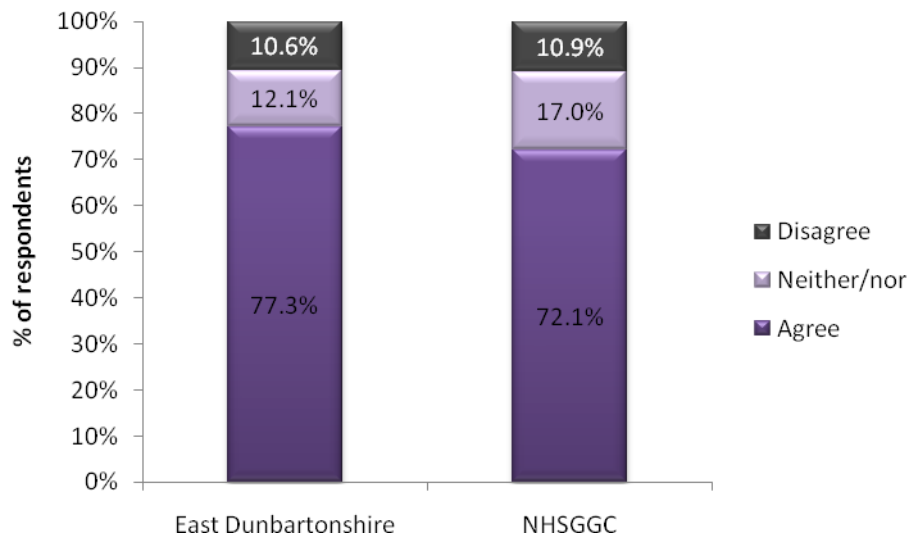
Those aged under 45 were least likely to feel that they belonged to the local area. Women were more likely than men to feel they belonged to the local area.

Table 5.4: Belong to the Local Area (Q71b) by Age and Gender

	Agree	Neither/ Nor	Disagree	Unweighted base (n)
Age:				
16-44	63%	19%	18%	159
45-64	85%	10%	5%	204
65+	90%	3%	7%	251
Men	75%	15%	10%	252
Women	80%	9%	11%	365
All	77%	12%	11%	623

Feeling Valued as a Member of the Community

Respondents were asked to indicate the extent to which they agreed or disagreed with the statement "I feel valued as a member of my community". Just under three in five (56%) agreed with this statement (22% strongly agreed and 34% agreed); 23% disagreed and 21% neither agreed nor disagreed.

Those aged 16-44 were the least likely to feel they were valued as a member of the community and those aged 65 or over were the most likely to feel this. Women were more likely than men to feel valued as members of the community. This is shown in Table 5.5.

Table 5.5: Feel Valued as a Member of the Community (Q71d) by Age and Gender

	Agree	Neither/ Nor	Disagree	Unweighted base (n)
Age:				
16-44	38%	26%	36%	160
45-64	65%	20%	15%	202
65+	72%	13%	14%	246
Men	51%	19%	30%	247
Women	59%	23%	17%	364
All	56%	21%	23%	617

Influence in the Neighbourhood

Respondents were asked the extent to which they agreed or disagreed with the statement, "By working together people in my neighbourhood can influence decisions that affect my neighbourhood". In total, 81% agreed with this statement (24% strongly agreed and 56% agreed), while 8% disagreed and 11% neither agreed nor disagreed.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were considerably more likely than those in the NHSGGC area as a whole to feel that local people can influence local decisions (81% East Dunbartonshire; 64% NHSGGC).

Figure 5.4:   Can Influence Decisions that Affect Neighbourhood: East Dunbartonshire and NHSGGC
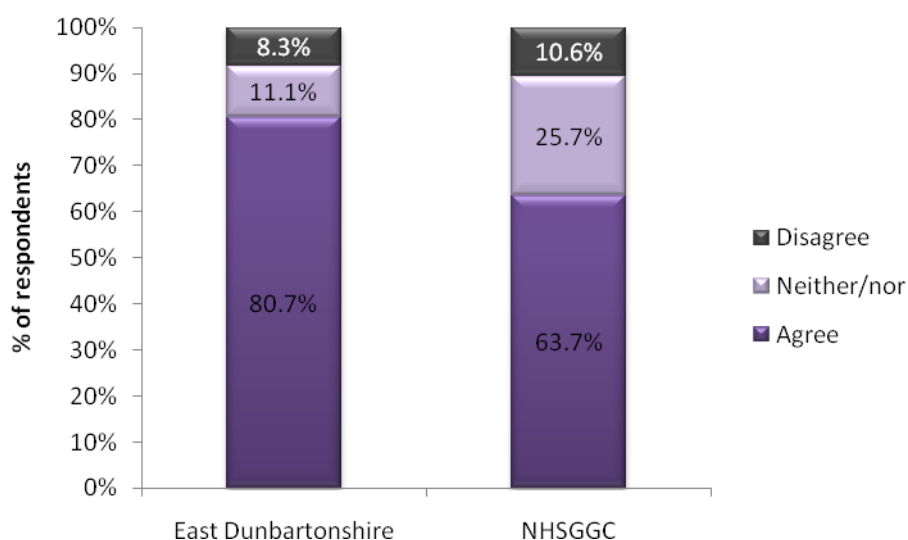
Those aged under 44 were least likely to agree that local people could influence local decisions, and women were more likely than men to do so.

Table 5.6: Can Influence Decisions that Affect Neighbourhood (Q71f) by Age and Gender

	Agree	Neither/ Nor	Disagree	Unweighted base (n)
Age:				
16-44	74%	16%	10%	152
45-64	84%	8%	8%	195
65+	88%	6%	5%	240
Men	76%	13%	11%	237
Women	85%	9%	6%	351
All	81%	11%	8%	594

Exchanging Small Favours with Neighbours

Respondents were asked whether they ever exchange small favours with the people who live near them (e.g. leaving a key to let in a repair man, feeding pets while you are away or picking up things from the shops for each other). Two in three (66%) said that they did (34% did so with one neighbour, 25% did so with two neighbours and 7% did so with three or more neighbours).

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to exchange small favours with neighbours (66% East Dunbartonshire; 58% NHSGGC).

Figure 5.5: Whether Exchange Small Favours With Neighbours: East Dunbartonshire and NHSGGC
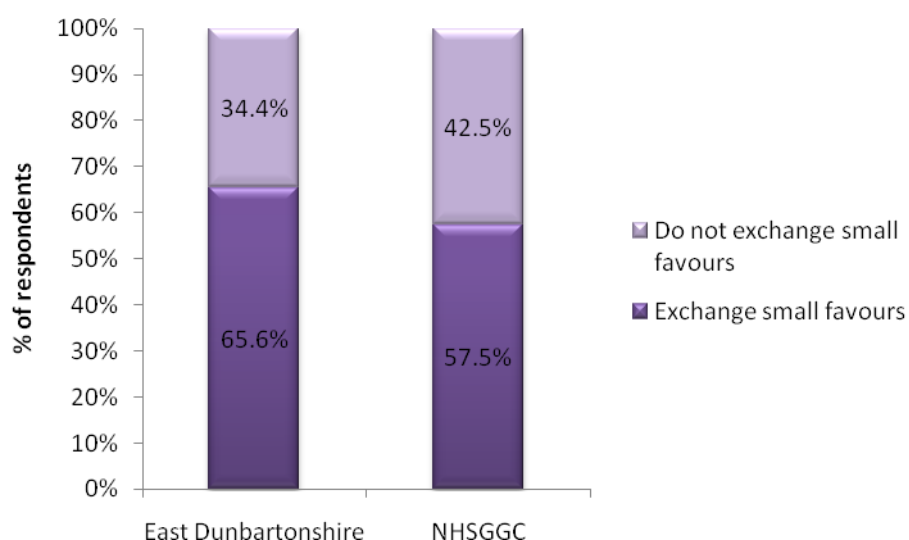
Those aged 16-44 were the least likely to exchange small favours with neighbours. This is shown in Table 5.7.

Table 5.7: Exchange Small Favours with Neighbours (Q72) by Age

	Exchange Small Favours	Unweighted base (n)
Age: 16-44 45-64 65+	52% 75% 78%	164 202 250
All	66%	625

Religious Identity

Three in four (74%) respondents identified with a religion.

Comparison with NHS Greater Glasgow & Clyde

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to identify with a religion.

Figure 5.6: Whether Identify with Religion: East Dunbartonshire and NHSGGC
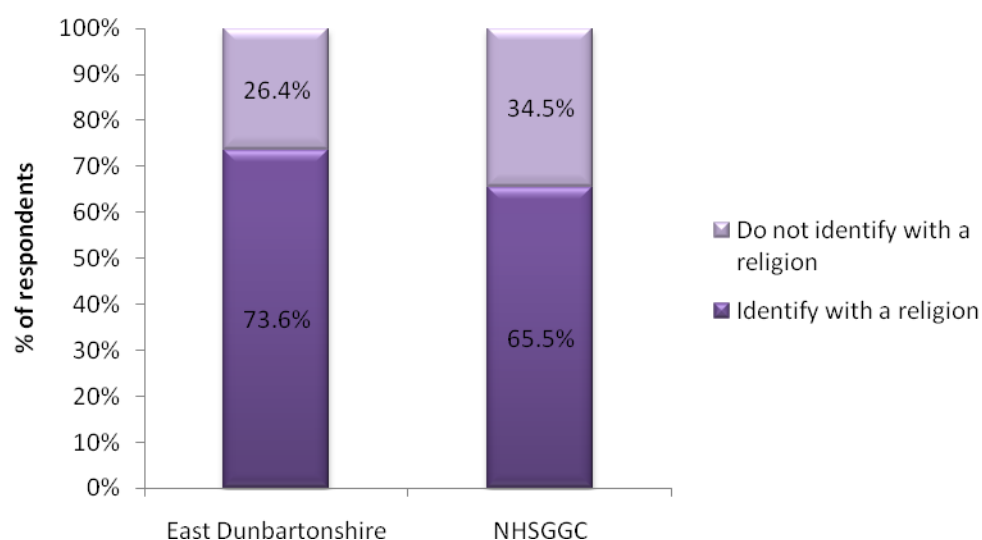
The likelihood of identifying with a religion increased with age, ranging from 66% of those aged 16-44 to 89% of those aged 65 or over. Women were more likely than men to identify with a religion (77% of women; 70% of men).

Table 5.8: Religious Identity (Q98) by Age and Gender

	Have Religious Identity	Unweighted base (n)
Age: 16-44 45-64 65+	66% 73% 89%	161 199 248
Men Women	77% 70%	249 360
All	74%	612

Experience of Discrimination

Respondents were asked whether they had experienced discrimination in the last 12 months on any grounds including accent, age, disability, ethnicity, language, nationality, religion, sex, sexual orientation, skin colour or anything else. In total 5.6% of respondents had experienced at least one form of discrimination in the last year.

5.3 Length of Residency – Neighbourhood and Current Home

Across all respondents, the mean length of residency in the neighbourhood was 20.7 years, and the mean length of residency in the current home was 15.1 years.

Figure 5.7: Length of Residency (Neighbourhood and Current Home)
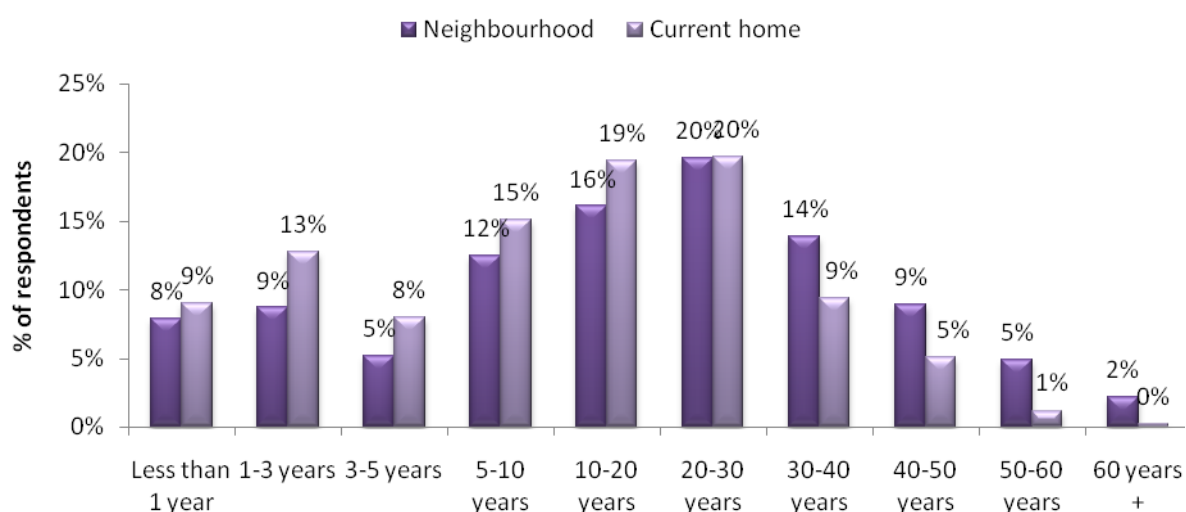
5.4 Feelings of Safety

Feeling Safe in Own Home

Most (98%) respondents agreed that they felt safe in their own home (32% strongly agreed and 65% agreed), while 1% disagreed and 1% neither agreed nor disagreed.

Feeling Safe Using Public Transport

Respondents were asked the extent to which they agreed or disagreed with the statement "I feel safe using public transport in this local area". Just under nine in ten (88%) agreed

with this (18% strongly agreed and 70% agreed), while 6% disagreed and 5% neither agreed nor disagreed.

Those aged 65 or over were less likely to feel safe using public transport in their area.

Table 5.9: Feel Safe Using Public Transport (Q76a) by Age

	Agree	Neither/ Nor	Disagree	Unweighted base (n)
Age: 16-44	91%	7%	2%	149
45-64	90%	3%	7%	190
65+	81%	6%	12%	218
All	88%	5%	6%	565

Feeling Safe Walking Alone in Local Area Even After Dark

Respondents were asked the extent to which they agreed or disagreed with the statement "I feel safe walking alone around this local area even after dark". Seven in ten (72%) agreed with this statement (16% strongly agreed and 56% agreed), 19% disagreed and 9% neither agreed nor disagreed.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHSGGC area as a whole, those in East Dunbartonshire were more likely to feel safe walking alone in their area even after dark (72% East Dunbartonshire; 63% NHSGGC).

Figure: 5.8: Feel Safe Walking Alone Even After Dark: East Dunbartonshire and NHSGGC
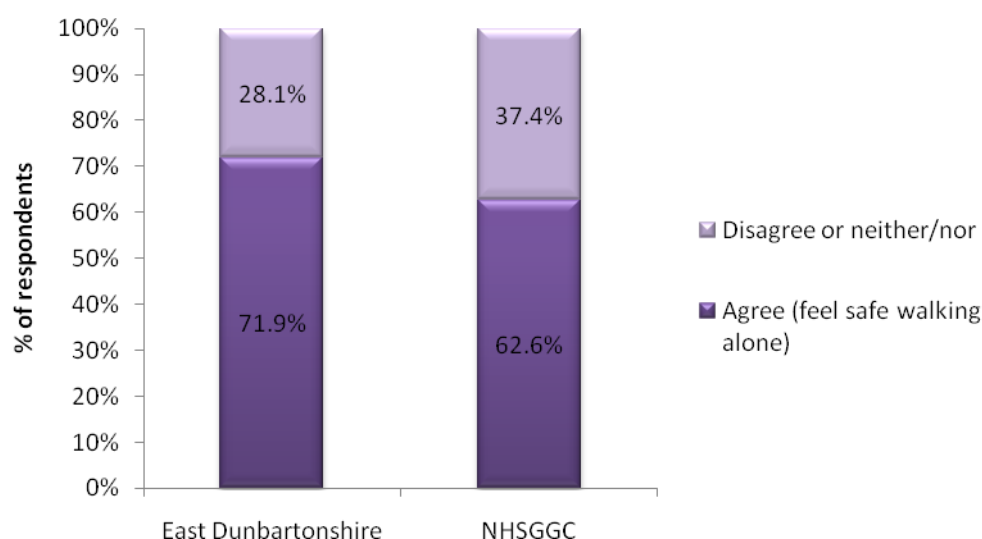
Older respondents were less likely to feel safe walking alone in their neighbourhood after dark, and women were less likely than men to feel safe walking alone. This is shown in Table 5.10.

Table 5.10: Feel Safe Walking Alone Even After Dark (Q76b) by Age and Gender

	Agree	Neither/Nor	Disagree	Unweighted base (n)
Age:				
16-44	81%	9%	10%	162
45-64	74%	8%	18%	200
65+	51%	9%	40%	233
Men	81%	9%	10%	249
Women	63%	8%	29%	349
All	72%	9%	19%	603

5.5   Social Issues in the Local Area

Using the 'faces' scale, respondent were asked to indicate how they felt about a range of perceived social problems. Faces 5 to 7 are classified as negative perceptions and indicate that respondents are concerned about these issues.

The social issues which most frequently caused concern were level of alcohol consumption and level of unemployment.

Figure 5.9: Negative Perception of Social Issues in the Local Area (Q56a-h)
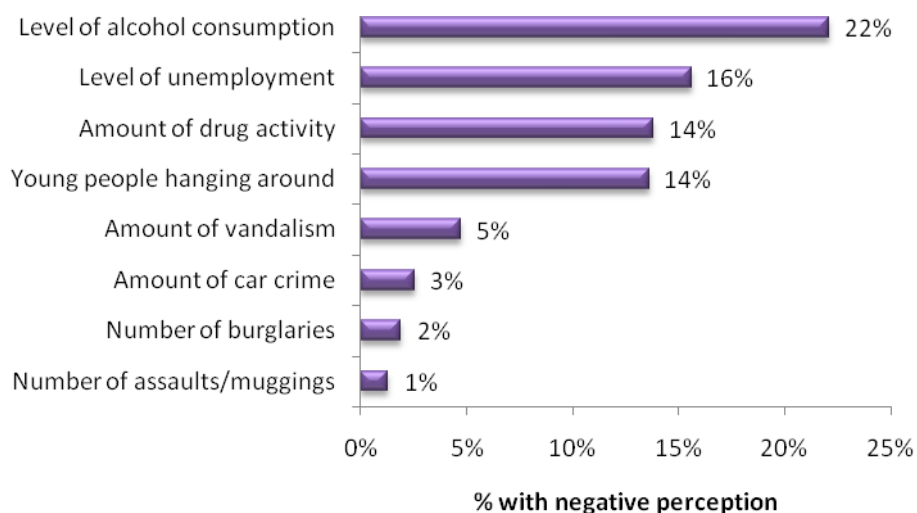
Comparison with NHS Greater Glasgow & Clyde Area

As Figure 5.10 shows, those in East Dunbartonshire were less likely than those in the NHSGGC area as a whole to be concerned about the level of unemployment, amount of drug activity, young people hanging around, amount of vandalism, amount of car crime, number of burglaries and the number of assaults/muggings in their area.

Figure 5.10: Negative Perception of Social Issues in the Local Area: East Dunbartonshire and NHSGGC (all issues showing a significant difference)
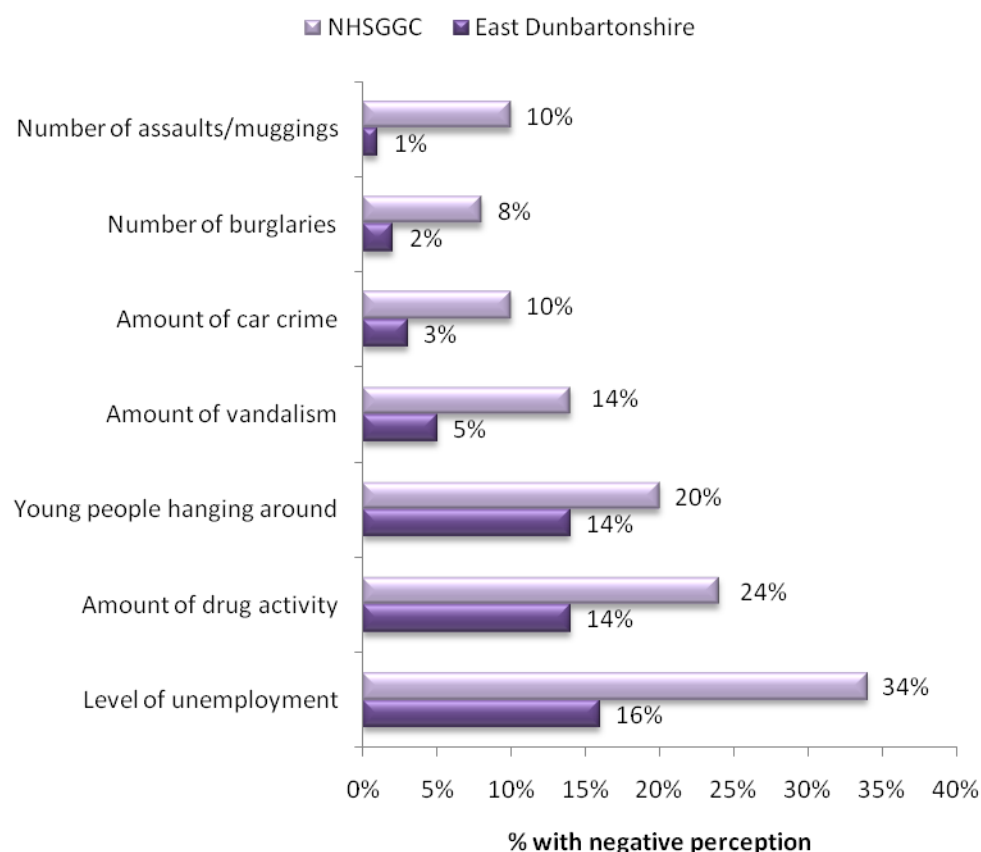
5.6 Environmental Issues in the Local Area

Again using the 'faces' scale, respondents were asked to indicate how they felt about a range of perceived environmental problems. Faces 5 to 7 are classified as negative perceptions and indicate that respondents are concerned about these issues.

The environmental issues which most frequently caused concern were the number of uneven pavements and the amount of traffic. This is shown in Figure 5.11.

Figure 5.11: Negative Perception of Environmental Issues in the Local Area (Q57a-m)
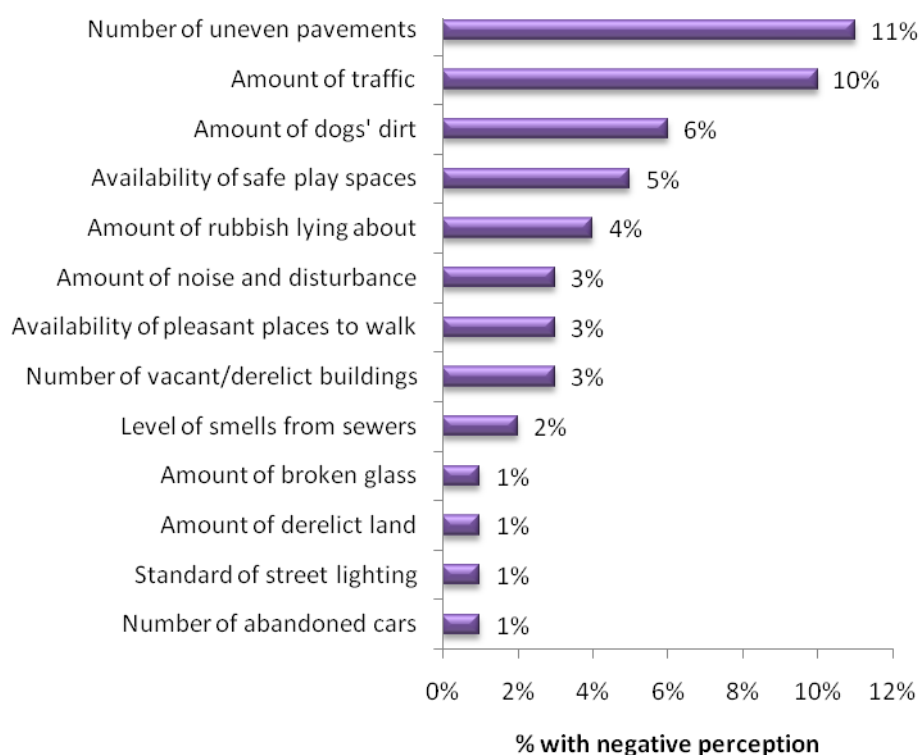
Comparison with NHS Greater Glasgow & Clyde Area

As Figure 5.12 shows, those in East Dunbartonshire were less likely than those in the NHSGGC area as a whole to be concerned about 12 of the 13 environmental issues.

Figure 5.12: Negative Perception of Environmental Issues in the Local Area: East Dunbartonshire and NHSGGC (all issues showing a significant difference)
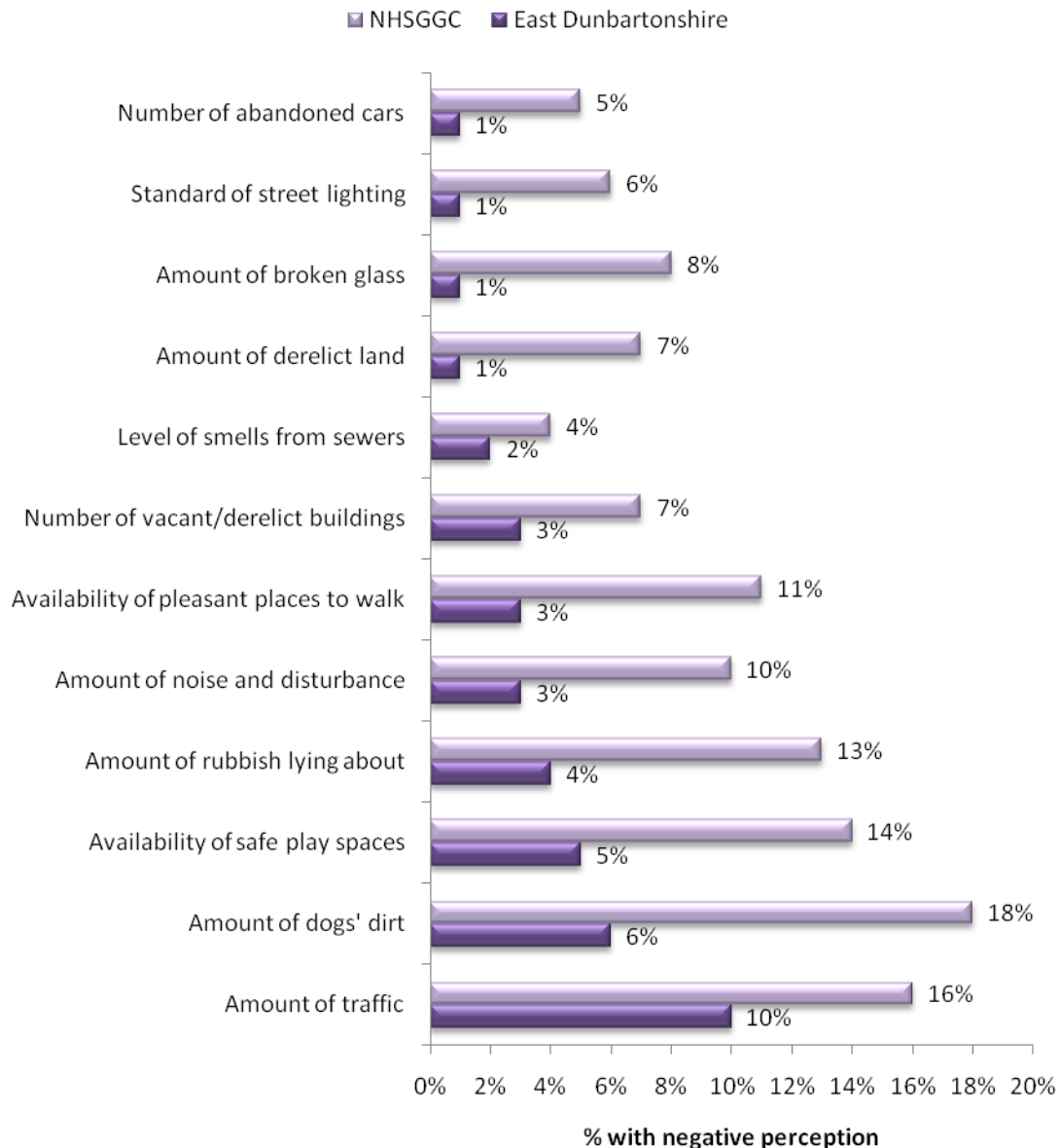
5.7 Perceived Quality of Services in the Area

Respondents were given a list of seven local services and asked to rate each (excellent, good, adequate, poor or very poor). Figure 5.13 shows the responses to each type of service. The number of respondents answering 'don't know' varied for different types of service reflecting the level of use. 'Don't know' responses have been excluded from analysis, and Figure 5.13 shows the number of respondents who gave a rating response for each service.

The services for which the largest proportion of respondents gave a positive rating were local schools and public transport. Activities for young people had the lowest proportion of respondents giving a positive rating.

Figure 5.13: Perceived Quality of Local Services
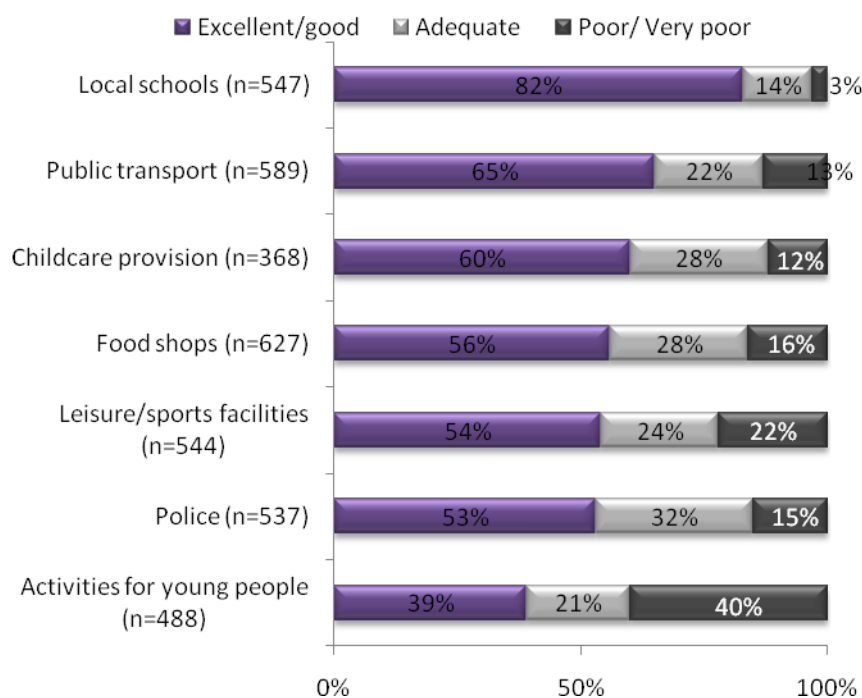
Comparison with NHS Greater Glasgow and Clyde Area

Figure 5.14 shows that compared to the NHSGGC area as a whole, those in East Dunbartonshire were more likely to have a positive perception of local schools, childcare provision and leisure/sports facilities. However, those in East Dunbartonshire were less likely to have a positive perception of public transport or food shops.

Figure 5.14: Positive Perceptions of Quality of Local Services: East Dunbartonshire and NHSGGC (all services showing a significant difference).
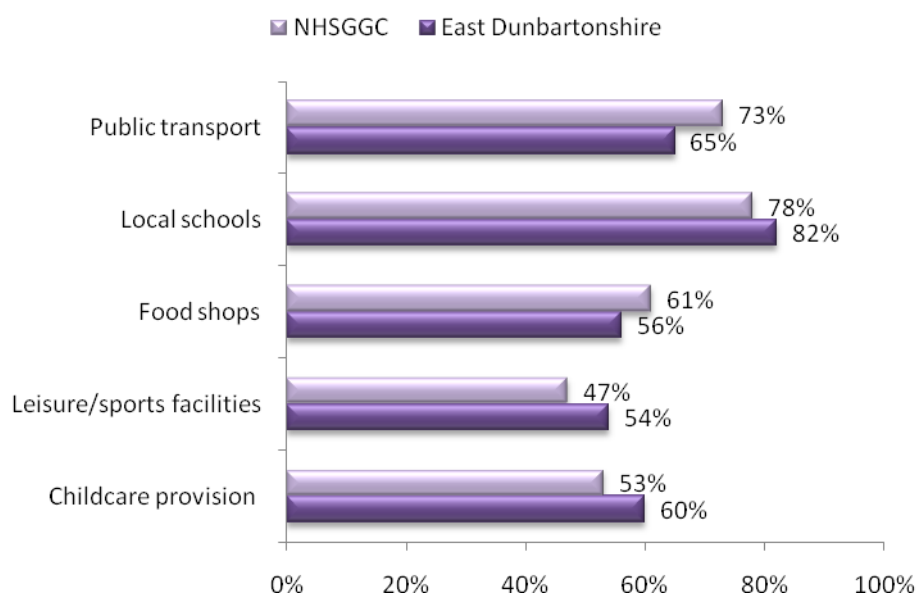
5.8   Individual Circumstances

Household Size

One in seven (15%) respondents lived alone.   Figure 5.15 shows the breakdown of household size.

Figure 5.15: Household Size
(Base: 625)
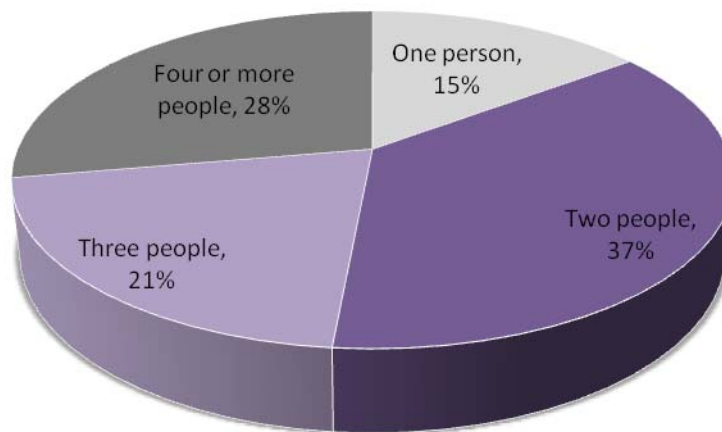
Ethnicity

Respondents were asked their ethnicity. Most (99%) identified themselves as White, and 1% were from other ethnic backgrounds.

Marital Status

Two in three (65%) respondents were married or living with their partner. Figure 5.16 shows the breakdown of marital status.

Figure 5.16: Marital Status
(Base: 619)
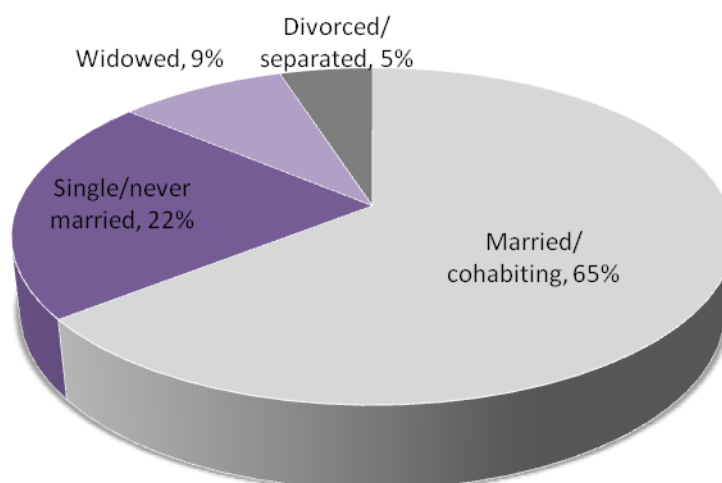
The age group most likely to describe themselves as married or cohabiting was 45-64 year olds, of whom 81% were married or living with their partner.

Internet Access

Three in four (73%) respondents had access to the internet, and 69% had access to the internet in their home. Those aged 16-44 were the most likely to have internet access at their home (88% in this age group did), while those aged 65 and over were the least likely to have internet access at home (32% did).

Overall, those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to have access to the internet at home (69% East Dunbartonshire; 56% NHSGGC).

Car Ownership

Four in five (79%) respondents said that they or someone in their household owned a car. Car ownership was highest among those aged 45-64 (89% of whom owned a car).

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to own a car (79% East Dunbartonshire; 58% NHSGGC).

Main Form of Transport

Respondents were asked which mode of transport they normally use for most journeys they make. One in 11 (9%) said their usual mode was active travel (walking, cycling); 70% said it was private personal travel (car, motorcycle) and 21% said that it was public travel (bus, train, underground, taxi).

Those aged 45-64 were the least likely to report active travel modes and the most likely to use private personal travel.

Caring Responsibilities

One in 17 (6%) respondents said that they were responsible for caring for someone on a day to day basis (excluding regular childcare). Of these, the mean number of hours per day spent caring was 10.8. Those aged 45 or over were the most likely to have caring responsibilities.

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to have caring responsibilities (5.8% East Dunbartonshire; 3.2% NHSGGC).

Educational Qualifications

One in 13 (8%) had no educational qualifications. Those aged 65 or over were more likely to have no qualifications (18% in this age group had no qualifications). Women were more likely than men to have no qualifications (12% women; 3% men).

Those in East Dunbartonshire were less likely than those in the NHSGGC area as a whole to have no qualifications (8% East Dunbartonshire; 21% NHSGGC).

Proportion of Household Income from State Benefits

Just under three in five (57%) respondents said that at least some of their household income came from state benefits, and 12% said that all their household income came from state benefits.

Those in East Dunbartonshire were less likely than those in the NHSGGC area as a whole to say that all their household income came from state benefits (12% East Dunbartonshire; 24% NHSGGC).

Difficulty Meeting the Cost of Specific Expenses

Figure 5.17 shows the proportion of respondents who said they had difficulty meeting specific expenses often, occasionally and never.

Figure 5.17: How Often Have Difficulty Meeting the Costs of Specific Expenses (Q89)
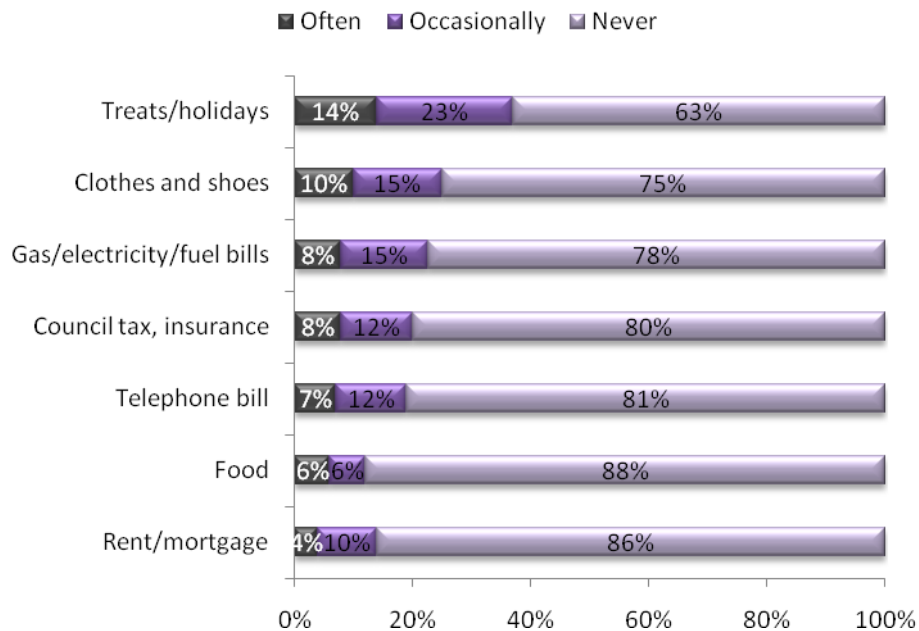
All together, 30% said that they ever had difficulty meeting the costs of rent/mortgage, fuel bills, telephone bills, council tax/insurance, food or clothes/shoes.

Those aged 16-44 were the most likely to say that they ever had difficulty meeting these costs (41% in this age group did).

Overall, those in East Dunbartonshire were less likely than those in the NHSGGC area as a whole to ever have difficulty meeting these costs (30% East Dunbartonshire; 47% NHSGGC).

Difficulty Finding Unexpected Sums

One in 14 (7%) said that they would have a problem meeting an unexpected expense of £20; one in three (34%) said they would have a problem meeting an unexpected expense of £100 and two in three (68%) would had a problem finding £1,000 for an unexpected expense.

Those in East Dunbartonshire were less likely than those in the NHSGGC area as a whole to have a problem finding £20 (7% East Dunbartonshire; 18% NHSGGC), £100 (34% East Dunbartonshire; 49% NHSGGC) or £1,000 (68% East Dunbartonshire; 80% NHSGGC).

Factors about the Home that Affect Health

Six percent of respondents said that there was something about their home that affected their health. The most common factors that affected health were stairs and inadequate heating.

Economic Activity

Half (51%) of respondents were in employment (44% were employed full time and 7% were employed part time). Of those aged under 75, 74% lived in households where the main wage earner was economically active.

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to live in an economically active household (74% East Dunbartonshire; 69% NHSGGC).

Social Class

Social class classifications were derived from information about the occupation of the main wage earner (or former occupation if retired). In total, 35% comprised class A/B, 48% comprised C1/C2 and 17% comprised class D/E.

Migrant Workers

A small proportion (1.3%) of respondents described themselves as migrant workers.

Sexual Orientation

Most (99.8%) of respondents described their sexual orientation as heterosexual.

6   Social Capital

6.1   Chapter Summary

Table 6.1 summarises the indicator data for social capital.

Table 6.1: Indicators for Social Capital

Indicator	% of sample	Unweighted base (n)
Positive perception of local area as a place to live (Q54)	93.7%	628
Positive perception of local area as a place to bring up children (Q55)	93.3%	628
Currently act as a volunteer (Q62)	10.5%	628
Positive perception of reciprocity (Q71a)	76.9%	609
Positive perception of trust (Q71e)	82.0%	615
Value local friendships (Q71c)	72.3%	622
Positive perception of social support (Q71g)	75.1%	611

Most (94%) respondents had a positive perception of their area as a place to live and most (93%) had a positive perception of their area as a place to bring up children.

One in 10 (10%) acted as a volunteer. Women were more likely than men to be volunteers.

More than three in four (77%) had a positive view of reciprocity and four in five (82%) had a positive few of trust in their area. Men were less likely to have positive views of reciprocity. Those aged under 45 were less likely to have positive views of trust.

Seven in ten (72%) valued local friendships. Those aged under 45 were less likely to do so.

Three in four (75%) had a positive perception of social support in their area.

6.2   View of Local Area

Respondents were presented with the seven 'faces' scale and asked to indicate how they felt about their area a) as a place to live; and b) as a place to bring up children. Those choosing any of the three 'smiley' faces (1-3) were categorised as having a positive perception. Overall, 94% had a positive view of their area as a place to live and 93% had a positive view of the area as a place to bring up children.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHS Greater Glasgow and Clyde area as a whole, those in East Dunbartonshire were more likely to have a positive view of their area as a place to live or to bring up children. This is shown in Figure 6.1.

Figure 6.1: Positive Perception of Area as a Place to Live and as a Place to Bring Up Children: East Dunbartonshire and NHSGGC
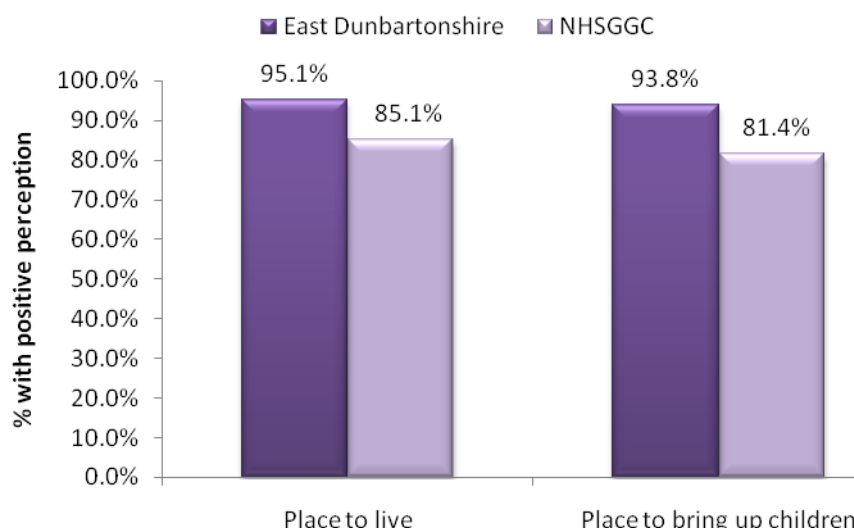
6.3 Volunteering

One in ten (10.5%) respondents were volunteers. Those who volunteered did so for a mean of 4.66 hours per week.

Comparison with NHS Greater Glasgow & Clyde Area

Those in East Dunbartonshire were more likely than those in the NHSGGC area as a whole to be a volunteer (10.5% East Dunbartonshire; 3.8% NHSGGC).

Table 6.2: Whether Act as Volunteer by Gender

	Act as Volunteer	Unweighted base (n)
Men	6%	254
Women	15%	368
All	10%	628

6.4 Reciprocity and Trust

Respondents were asked to indicate the extent to which they agree or disagree with the following statements:

"This is a neighbourhood where neighbours look out for each other", and
"Generally speaking, you can trust people in my local area".

Those agreeing with the first statement were categorised as having a positive view of reciprocity, and those agreeing with the second were categorised as having a positive view of trust. Overall, 77% were positive about reciprocity and 82% were positive about trust.

Comparison with NHS Greater Glasgow & Clyde Area

Compared with those in the NHSGGC area as a whole, those in East Dunbartonshire were more likely to have positive views of reciprocity and trust. This is shown in Figure 6.2.

Figure 6.2: Positive Perceptions of Reciprocity and Trust: East Dunbartonshire and NHSGGC
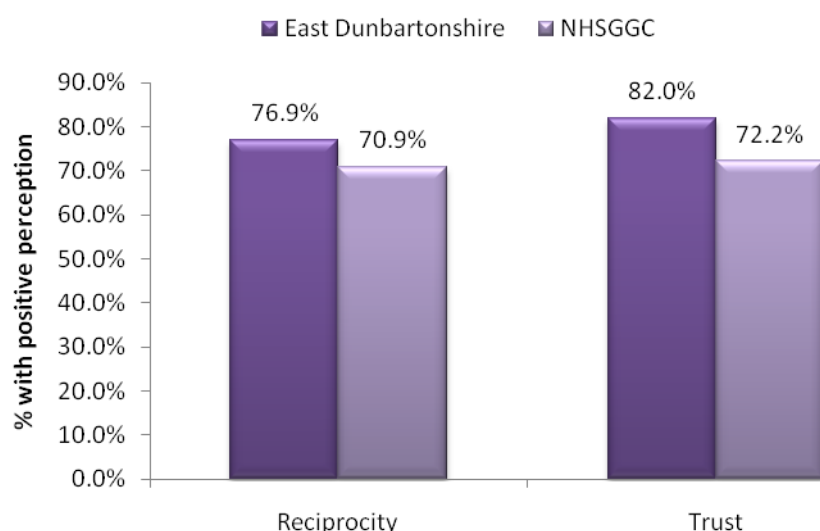
Those aged 16-44 were the least likely to have positive views of trust. Women were more likely than men to have positive views of reciprocity. This is shown in Table 6.3.

Table 6.3: Positive Perceptions of Reciprocity (Q71a) and Trust (Q71e) by Age and Gender

	Positive Perception of Reciprocity	Unweighted base (n)	Positive Perception of Trust	Unweighted base (n)
Age:				
16-44	73%*	155	72%	156
45-64	79%*	198	84%	201
65+	82%*	247	96%	249
Men	73%	247	81%*	250
Women	80%	356	82%*	359
All	77%	609	82%	615

* denotes non-significant result.

6.5   Local Friendships

Respondents were asked to indicate the extent to which they agree or disagree with the statement: "*The friendships and associations I have with other people in my local area mean a lot to me*". Overall, 72% agreed with this statement.

Those aged under 45 were less likely to value local friendships and those aged 65 or over were more likely to do so. This is shown in Table 6.4.

Table 6.4: Proportion Value Local Friendships (Q71c) by Age

	Value Local Friendships	Unweighted base (n)
Age: 16-44	60%	159
45-64	77%	204
65+	86%	250
All	72%	622

6.6   Social Support

Respondents were asked to indicate the extent to which they agree or disagree with the statement: "*If I have a problem, there is always someone to help me*". Those agreeing with this statement were categorised as having a positive view of social support. According to this definition, three in four (75%) were positive about social support.

Those aged 65 or over were the most likely to have a positive view of social support and those aged 16-44 were the least likely to do so. Also, women were more likely than men to have a positive view of social support.

Table 6.5: Positive View of Social Support (Q71g) by Age and Gender

	Positive View	Unweighted base (n)
Age: 16-44	62%	156
45-65	80%	199
65+	92%	247
Men	71%	245
Women	79%	360
All	75%	611

7 Summary of Comparisons with NHS Greater Glasgow & Clyde Area

This chapter presents a summary of the comparisons of indicator data from East Dunbartonshire to those for the NHS Greater Glasgow & Clyde area as a whole.

7.1 Indicators showing More Favourable Findings

Compared to those in the NHS Greater Glasgow & Clyde area as a whole, those in East Dunbartonshire were:

- More likely to have a positive perception of their happiness;
- Less likely to be receiving treatment for diabetes;
- More likely to have visited the dentist within the last six months;
- More likely to be registered with a dentist;
- (Of those who had used health services in the last year) more likely to feel they had definitely been given adequate information about their condition or treatment;
- (Of those who had used health services in the last year) more likely to feel that they were definitely encouraged to participate in decisions affecting their health or treatment;
- (Of those who had used health services in the last year) more likely to definitely feel that their views and circumstances were understood and valued;
- More likely to find it easy to travel to hospital for an appointment;
- More likely to say that it was easy to get a consultation with a GP within 48 hours when needed;
- More likely to say that it was easy to access health services in an emergency;
- More likely to say that it was easy to get an appointment to see the dentist;
- Less likely to be exposed to second hand smoke most or some of the time;
- Less likely to be a smoker;
- More likely to meet the target for physical activity;
- More likely to have participated in sport in the last week, and specifically more likely to have participated in exercises, aerobics, other dance or badminton/tennis;
- More likely to meet the target for oily fish consumption;
- More likely to meet the target for bread consumption;
- More likely to belong to a club/association, etc;
- More likely to feel that they belong to the local area;
- More likely to feel that local people could influence local decisions;
- More likely to exchange small favours with neighbours;
- More likely to identify with a religion;
- More likely to feel safe walking alone in their area even after dark;
- Less likely to be concerned about the level of unemployment, amount of drug activity, young people hanging around, amount of vandalism, amount of car crime, number of burglaries and the number of assaults/muggings in their area;
- Less likely to be concerned about the number of abandoned cars, standard of street lighting, amount of broken glass, amount of derelict land, level of smells from sewers, number of vacant/derelict buildings, availability of pleasant places to walk, amount of noise and disturbance, amount of rubbish lying about, availability of safe play spaces, amount of dogs' dirt and amount of traffic;
- More likely to have a positive perception of local schools, childcare provision and leisure/sports facilities;
- More likely to have internet access at home;
- More likely to own a car;
- Less likely to say they had no qualifications;
- Less likely to receive all household income from benefits;
- Less likely to have difficulty meeting the cost of bills etc;
- Less likely to have a problem finding unexpected sums of £20, £100 and £1,000;
- More likely to live in an economically active household;

- More likely to have positive views of their area as a place to live;
- More likely to have positive views of their area as a place to bring up children;
- More likely to be a volunteer;
- More likely to have positive views of reciprocity in their area; and
- More likely to have positive views of trust in their area.

7.2 Indicators showing Less Favourable Findings

Compared to those in the NHS Greater Glasgow & Clyde area as a whole, those in East Dunbartonshire were:

- More likely to be receiving treatment for an illness or condition, and specifically more likely to be receiving treatment for
  - o High blood pressure;
  - o Coronory heart disease;
  - o Gastro-intestinal problems;
  - o Stroke;
  - o Severe eyesight problems;
- More likely to have a high GHQ12 score, indicating poor mental health;
- More likely to find it difficult to get a GP appointment;
- More likely to say that someone in their household had suffered an accidental injury at home in the last year;
- (Among smokers) more likely to smoke 20 or more cigarettes per day;
- More likely to drink alcohol at least once a week;
- More likely to exceed the recommended weekly limit for alcohol;
- More likely to have been a binge drinker in the previous week;
- Less likely to have participated in football/rugby in the last week;
- More likely to feel isolated from family and friends;
- Less likely to have a positive perception of local food shops; and
- More likely to have caring responsibilities.

7.3 Other Significant Differences

Compared to those in the NHS Greater Glasgow & Clyde area as a whole, those in East Dunbartonshire were:

- More likely to have visited hospital as an outpatient in the last year; and
- More likely to have visited accident and emergency in the last year.

8   Trend Data

In this chapter, results from all indicator questions that represent a statistically significant change between 2008 and 2005 or 2008 and 2002 are shown.

The formula used to test for significant change is a hypothesis test for two proportions. The 'null hypothesis' is that there is no change since 2002 or since 2005. The following formula yields a 'test statistic' (z):

$$z = \frac{\hat{p}_1 - \hat{p}_2}{\sqrt{\hat{p}_p (1 - \hat{p}_p)} \sqrt{\left(\frac{1}{n_1}\right) + \left(\frac{1}{n_2}\right)}}$$

p_1 = proportion observed in 2008
p_2 = proportion observed in 2005/2005
n_1 = sample size in 2008
n_2 = sample size in 2002/2005

$$\hat{p}_p = \frac{x_1 + x_2}{n_1 + n_2} = \frac{n_1 p_1 + n_2 p_2}{n_1 + n_2}$$

If the value of z falls outside of the range (-1.96 to 1.96), we reject the null hypothesis and conclude that there has been significant change since 1999 (at the 95% confidence level).

For those results that show significant change, we have also calculated a confidence interval for the difference between any two sets of results.

$$\left(\hat{p}_1 - \hat{p}_2\right) \pm 1.96 \sqrt{\frac{\hat{p}_1\left(1 - \hat{p}_1\right)}{n_1} + \frac{\hat{p}_2\left(1 - \hat{p}_2\right)}{n_2}}$$

For example, the confidence interval for the first result shown in Table 8.1 is (1.0 to 5.8). This means that we can be 95% confident that, had we interviewed the entire population of East Dunbartonshire in the surveys, the actual difference between the two sets of results would be between 1.0 and 5.8 percentage points.

The tables show the results, and also show p values. Where p is less than 0.05, the change is considered to be significant. P values are reported as one of three levels of significance: <0.05, <0.01 and <0.001. A p value of <0.05 means that we can be 95% confident that a 'real' change has taken place. A p value of <0.01 means that we can be 99% confident, and a p value of <0.001 means that we can be 99.9% confident.

Only significant changes over time have been mentioned in the text. Where a change is not significant, the size of the change is not shown in the table, and no p value is shown.

It should be noted that the formulae used in this chapter only strictly apply to simple random samples, whereas this survey uses a complex multi-stage sample design. For this reason, results of tests should be interpreted with caution, particularly if the result is on the margins of statistical significance.

8.1 People's Perceptions of their Health and Illness

Tables 8.1 to 8.3 show that there were no significant changed in perceptions of health and wellbeing across the three surveys.

Table 8.1: Positive Perceptions of General Health
Base: All

	East Dunbartonshire
2002	73.9%
2005	76.7%
2008	71.7%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

Table 8.2: Positive Perceptions of Physical Wellbeing
Base: All

	East Dunbartonshire
2002	85.1%
2005	86.8%
2008	82.4%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

Table 8.3: Positive Perceptions of Mental or Emotional Wellbeing
Base: All

	East Dunbartonshire
2002	89.0%
2005	89.1%
2008	86.2%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

The proportion of respondents who felt definitely in control of the decisions affecting their daily life fell between 2005 and 2008.

Table 8.4: Feeling Definitely in Control of Decisions Affecting Daily Life
Base: All

	East Dunbartonshire
2002	90.1%
2005	84.0%
2008	64.9%
Change (2005-2008)	-19.1%
P	<0.001
Confidence Interval	-24.1 to -14.1

The proportion who had a positive perception of their quality of life fell between 2002 and 2008.

Table 8.5: Positive Perception of Overall Quality of Life
Base: All

	East Dunbartonshire
2002	92.4%
2005	89.3%
2008	87.6%
Change (2002-2008)	-4.8%
P	<0.05
Confidence Interval	-8.4 to -1.2

The proportion who had a limiting condition or illness rose between 2002 and 2008. This is shown in Table 8.6.

Table 8.6: Illness/Condition Affecting Daily Life
Base: All

	East Dunbartonshire
2002	13.8%
2005	18.3%
2008	20.5%
Change (2002-2008)	+6.7%
P	<0.01
Confidence Interval	+2.2 to +11.2

The proportion of respondents who were receiving treatment for at least one condition rose between 2002 and 2008.

Table 8.7: Receiving Treatment for One or More Condition
Base: All

	East Dunbartonshire
2002	34.8%
2005	39.9%
2008	43.1%
Change (2002-2008)	+8.3%
P	<0.01
Confidence Interval	+2.4 to +14.2

There was no significant change in the proportion of respondents with some or all of their own teeth or the proportion who brushed their teeth twice or more per day.

Table 8.8: Proportion with Some/All of their Own Teeth
Base: All

	East Dunbartonshire
2002	88.1%
2005	85.4%
2008	87.7%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

Table 8.9: Proportion Brushing Teeth at Least Twice a Day
Base: Those with at least some of their own teeth

	East Dunbartonshire
2002	80.9%
2005	77.6%
2008	81.3%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

8.2   The Use of Health Services

As Tables 8.10 and 8.11 show, the proportion of respondents who had seen a GP in the last year and the proportion who had visited A&E in the last year did not change significantly over the three surveys.

Table 8.10: Proportion Seen a GP in the Last Year
Base: All

	East Dunbartonshire
2002	80.1%
2005	76.2%
2008	79.1%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

Table 8.11: Proportion Been to A&E in the Last Year
Base: All

	East Dunbartonshire
2002	11.4%
2005	10.7%
2008	13.6%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

The proportion of respondents who had visited hospital as an outpatient rose between 2002 and 2008.

Table 8.12: Proportion Been to Hospital as an Outpatient to see a Doctor in the Last Year
Base: All

	East Dunbartonshire
2002	17.7%
2005	24.2%
2008	25.4%
Change (2002-2008)	+7.7
P	<0.01
Confidence Interval	+2.8 to +12.6

The proportion of respondents who were registered with a dentist fell between 2002 and 2008. However, the proportion who had been to the dentist within the last six months did not change significantly.

Table 8.13: Registered with a Dentist
Base: All

	East Dunbartonshire
2002	86.4%
2005	80.0%
2008	81.0%
Change (2002-2008)	-5.4%
P	<0.05
Confidence Interval	-9.8 to -1.0

Table 8.14: Been to a Dentist in the Last Six Months
Base: All

	East Dunbartonshire
2002	64.4%
2005	60.4%
2008	62.1%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

8.3   Health Behaviours

The proportion of respondents who were current smokers rose between 2002 and 2008, as shown in Table 8.15.

Table 8.15: Proportion Currently Smoking (On Some or Every Day)
Base: All

	East Dunbartonshire
2002	16.4%
2005	24.0%
2008	22.6%
Change (2002-2008)	+6.2%
P	<0.05
Confidence Interval	+1.4 to +11.0

There was a sizeable decrease in the proportion of respondents who were exposed to second hand smoke some or all of the time between 2005 and 2008. (The ban on smoking in public places was introduced in Scotland in 2006).

Table 8.16: Proportion Exposed to Smoke (Some or All the Time)
Base: All

	East Dunbartonshire
2002	37.0%
2005	45.5%
2008	28.9%
Change (2005-2008)	-16.6%
P	<0.001
Confidence Interval	-22.4 to -10.8

There were no significant changes in the proportion of respondents who exceeded the recommended weekly limit for alcohol or who binge drank in the preceding week, as Tables 8.17 and 8.18 show.

Table 8.17: Proportion Exceeding Recommended Alcohol Limit in Preceding Week (Based on old estimates of units)
Base: All

	East Dunbartonshire
2002	10.1%
2005	14.1%
2008	12.4%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

Table 8.18: Proportion Binge Drinking in the Preceding Week (Based on old estimates of units)
Base: All

	East Dunbartonshire
2002	18.0%
2005	24.3%
2008	22.6%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

The proportion who met the target for physical activity rose between 2005 and 2008.

Table 8.19: Proportion Meeting the Physical Activity Target
Base: All

	East Dunbartonshire
2002	53.7%
2005	49.0%
2008	57.3%
Change (2005-2008)	+8.3%
P	<0.001
Confidence Interval	+3.3 to +13.3

Proportionately more respondents met the target for fruit and vegetable consumption in 2008 than in 2005.

Table 8.20: Proportion Meeting the Fruit and Vegetable Consumption Target
Base: All

	East Dunbartonshire
2002	40.0%
2005	34.4%
2008	41.3%
Change (2005-2008)	+6.9%
P	<0.05
Confidence Interval	+1.1 to +12.7

The proportion who met the target for oily fish consumption did not change significantly across the three surveys.

Table 8.21: Proportion Eating the Recommended Amount of Oily Fish
Base: All

	East Dunbartonshire
2002	25.6%
2005	33.4%
2008	28.5%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

The proportion of respondents who ate two or more high fat and sugary snacks per day rose between 2005 and 2008.

Table 8.22: Proportion Eating More than the Recommended Amount of High Fat and Sugary Snacks
Base: All

	East Dunbartonshire
2002	29.1%
2005	25.8%
2008	36.1%
Change (2005-2008)	+10.3%
P	<0.001
Confidence Interval	+4.8 to +15.8

There were no significant changes to the profile of respondents in terms of BMI across the three surveys.

Table 8.23: Body Mass Index
Base: All

	East Dunbartonshire
BMI of 25 or over	
2002	43.8%
2005	40.9%
2008	42.8%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a
BMI of 35 or over	
2002	1.1%
2005	3.2%
2008	3.3%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a
BMI indicting obese/extremely obese	
2002	9.9%
2005	14.9%
2008	13.1%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

8.4   Social Health

Between 2005 and 2008 there was a rise in the proportion of respondents who said they felt isolated from family and friends.

Table 8.24: Proportion Isolated from Family and Friends
Base: All

	East Dunbartonshire
2002	7.4%
2005	9.5%
2008	14.5%
Change (2005-2008)	+5.0%
P	<0.05
Confidence Interval	+1.2 to +8.8

The proportion of respondents who felt that they belonged to the area fell between 2002 and 2008.

Table 8.25: Proportion Feeling they Belong to Local Area
Base: All

	East Dunbartonshire
2002	86.6%
2005	78.6%
2008	77.3%
Change (2002-2008)	-9.3%
P	<0.001
Confidence Interval	-13.8 to -4.8

Between 2002 and 2008, there was a drop in the proportion of respondents who felt valued as members of their community. This is shown in Table 8.26.

Table 8.26: Proportion Feeling Valued as Member of their Community
Base: All

	East Dunbartonshire
2002	66.6%
2005	59.1%
2008	55.8%
Change (2002-2008)	-10.8%
P	<0.001
Confidence Interval	-16.7 to -4.9

There was a considerable rise between 2005 and 2008 in the proportion of respondents who felt that local people could influence local decisions.

Table 8.27: Proportion Feeling Local People Can Influence Decisions
Base: All

	East Dunbartonshire
2002	77.4%
2005	62.2%
2008	80.7%
Change (2005-2008)	+18.5%
P	<0.001
Confidence Interval	+13.0 to +24.0

The proportion of respondents who felt safe in their own home and on public transport rose between 2005 and 2008. This is shown in Tables 8.28 and 8.29.

Table 8.28: Proportion Feeling Safe in Their Own Home
Base: All

	East Dunbartonshire
2002	98.9%
2005	93.9%
2008	97.7%
Change (2005-2008)	+3.8%
P	<0.01
Confidence Interval	+1.2 to +6.4

Table 8.29: Proportion Feeling Safe Using Public Transport
Base: All

	East Dunbartonshire
2002	89.7%
2005	76.9%
2008	88.3%
Change (2005-2008)	+11.4%
P	<0.001
Confidence Interval	+6.7 to +16.1

The proportion of respondents who felt safe walking alone after dark fell between 2002 and 2008.

Table 8.30: Proportion Feeling Safe Walking Alone After Dark
Base: All

	East Dunbartonshire
2002	80.2%
2005	66.4%
2008	71.9%
Change (2002-2008)	-8.3%
P	<0.01
Confidence Interval	-13.4 to -3.2

8.5   Individual Circumstances

The proportion who were married or living as married did not vary significantly over the three surveys.

Table 8.31: Proportion Cohabiting/Married etc
Base: All

	East Dunbartonshire
2002	70.0%
2005	71.5%
2008	64.7%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

The proportion of respondents with children aged under 14 and the proportion who were single parents fell between 2005 and 2008.

Table 8.32: Proportion with Children Under 14
Base: All

	East Dunbartonshire
2002	41.0%
2005	34.4%
2008	25.0%
Change (2005-2008)	-9.4%
P	<0.001
Confidence Interval	-15.0 to -3.8

Table 8.33: Proportion who Are Lone Parents of Children Under 14
Base: All

	East Dunbartonshire
2002	3.4%
2005	6.7%
2008	1.9%
Change (2005-2008)	-4.8%
P	<0.001
Confidence Interval	-7.4 to -2.2

There was a rise between 2005 and 2008 in the proportion of respondents who had internet access at home.

Table 8.34: Proportion with Internet Access at Home
Base: All

	East Dunbartonshire
2002	59.7%
2005	54.0%
2008	69.5%
Change (2005-2008)	+15.5%
P	<0.001
Confidence Interval	+9.6 to +21.4

Table 8.35 shows there was a drop between 2002 and 2008 in the proportion who had a car.

Table 8.35: Proportion with a Car
Base: All

	East Dunbartonshire
2002	87.9%
2005	79.2%
2008	79.0%
Change (2002-2008)	-8.9%
P	<0.001
Confidence Interval	-13.2 to -4.6

There was a considerable drop between 2005 and 2008 in the proportion of respondents who had no qualifications.

Table 8.36: Proportion with No Qualifications
Base: All

	East Dunbartonshire
2002	13.8%
2005	24.8%
2008	7.7%
Change (2005-2008)	-17.1%
P	<0.001
Confidence Interval	-21.7 to -12.5

There was no significant change in the proportion of respondents who received all household income from state benefits.

Table 8.37: Proportion with all Income from State Benefits
Base: All

	East Dunbartonshire
2002	14.4%
2005	12.6%
2008	11.5%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

The proportion of respondents who had a positive perception of their household income fell between 2005 and 2008.

Table 8.38: Proportion with a Positive Perception of Household Income
Base: All

	East Dunbartonshire
2002	74.2%
2005	86.3%
2008	75.7%
Change (2005-2008)	-10.6%
P	<0.001
Confidence Interval	-15.2 to -6.0

The proportion of respondents who would find it impossible or a big problem to find unexpected expenses of £100 or £1,000 increased between 2005 and 2008.

Table 8.39: Proportion Having Difficulties Finding Unexpected Expenses

	East Dunbartonshire
Difficulty finding £20	
2002	0.2%
2005	0.6%
2008	1.8%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a
Difficulty finding £100	
2002	3.9%
2005	2.5%
2008	10.2%
Change (2005-2008)	+7.7%
P	<0.001
Confidence Interval	+5.0 to +10.4
Difficulty finding £1,000	
2002	18.6%
2005	26.4%
2008	35.3%
Change (2005-2008)	+8.9%
P	<0.01
Confidence Interval	+3.4 to +14.4

The proportion of main wage earners in full time employment fell between 2005 and 2008.

Table 8.40: Proportion of Main Wage Earners Employed Full Time
Base: All

	East Dunbartonshire
2002	69.3%
2005	70.9%
2008	61.4%
Change (2005-2008)	-9.5%
P	<0.01
Confidence Interval	-15.1 to -3.9

Between 2002 and 2008 there was a rise in the proportion of households with no employed adults.

Table 8.41: Proportion of Households with No Adults in Employment
Base: All

	East Dunbartonshire
2002	23.3%
2005	29.3%
2008	31.5%
Change (2002-2008)	+8.2%
P	<0.01
Confidence Interval	+2.8 to +13.6

8.6   Social Capital

There was a rise between 2002 and 2008 in the proportion of respondents who had a positive perception of their area as a place to live. However, there was no significant change in the proportion with a positive perception of their area as a place to bring up children.

Table 8.42: Proportion with a Positive Perception of Local Area as a Place to Live
Base: All

	East Dunbartonshire
2002	90.4%
2005	93.4%
2008	93.7%
Change (2002-2008)	+3.3%
P	<0.05
Confidence Interval	+0.1 to +6.7

Table 8.43: Proportion with Positive Perception of Local Area as a Place to Bring Up Children
Base: All

	East Dunbartonshire
2002	90.0%
2005	91.8%
2008	93.3%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

Tables 8.44 and 8.45 show that between 2002 and 2008 there was a drop in the proportion of respondents with positive perceptions of reciprocity and trust.

Table 8.44: Proportion with Positive Perception of Reciprocity
Base: All

	East Dunbartonshire
2002	83.8%
2005	74.8%
2008	76.9%
Change (2002-2008)	-6.9%
P	<0.01
Confidence Interval	-11.7 to -2.1

Table 8.45: Proportion with Positive Perception of Trust
Base: All

	East Dunbartonshire
2002	87.5%
2005	81.3%
2008	82.0%
Change (2002-2008)	-5.5%
P	<0.05
Confidence Interval	-9.8 to -1.2

The proportion of respondents who valued local friendships fell between 2002 and 2008.

Table 8.46: Proportion Valuing Local Friendships
Base: All

	East Dunbartonshire
2002	85.1%
2005	72.3%
2008	72.3%
Change (2002-2008)	-12.8%
P	<0.001
Confidence Interval	-17.6 to -8.0

Between 2002 and 2008 there was a drop in the proportion of respondents who had a positive perception of social support.

Table 8.47: Proportion with a Positive Perception of Social Support
Base: All

	East Dunbartonshire
2002	84.1%
2005	78.5%
2008	75.1%
Change (2005-2008)	-9.0%
P	<0.001
Confidence Interval	-13.8 to -4.2

APPENDIX A: SURVEY METHODOLOGY & RESPONSE

Sampling

It was necessary to adopt a sampling system which would be:

- Representative of the population of NHSGGC (and the former NHSGG) as a whole in terms of age, sex and geographical distribution and SIMD
- Comparable with the survey used in 1999, 2002 AND 2005, to allow results to be compared across the surveys
- Replicable, so that future surveys can track indicators over time.

The sample was stratified by local authority (8 authorities) and by SIMD quintile (5 categories). The target sample size was set at 8,253. To achieve this, clusters were sampled in proportion to the population in each stratum. In addition, 3 areas we over sampled to allow comparison between the bottom 15% SIMD areas and other areas within the CH(C)P.

The sample was drawn from the Postal Address File (PAF) by CACI, to a specification provided by MRUK. The PAF was sorted into the strata above. Within each stratum, the PAF was then sorted in alphanumeric order by postcode and house number/name. Interval samples were then taken.

Before the addresses were issued to interviewers, NHSGGC and Inverclyde CHP screened the sample to identify areas containing high levels of "deadwood" (eg business addresses, derelict buildings). Where they were found, they were replaced with other addresses that were a match in terms of the sample strata.

Questionnaire design and pilot

The questionnaire was based on the questionnaire used in 2005 in NHSGG, but some new questions have been added. It was felt that the questionnaire had reached its maximum practicable length, so the addition of new questions had to be balanced by commensurate cuts elsewhere in the questionnaire. Questions for which data were deemed to be least useful in 2005 were selected for deletion in 2008.

In turn, the 2008 questionnaire had been based on the one used in 1999, with some changes and order to make the interview run more smoothly. Thus, most of the questions in the 2008 questionnaire can be tracked back to 1999 and/or 2002; 2005.

Once a draft questionnaire had been agreed, a pilot survey was conducted.

The pilot ensured that:

The questionnaire structure flowed easily, thereby maintaining the interest of the respondent over the duration of the interview which was not considered to be onerous;
The routing of questions was complete;
The questions were understood by a range of respondents. It was recognised that the questions had to be coherent and meaningful to people of difference levels of ability.

Following the pilot, a few minor changes were made to the questionnaire, but question wording largely remained as it was in 2005.

Fieldwork

MRUK were responsible for the fieldwork element of the project. A team of interviewers attended a briefing session which was conducted by MRUK and representatives from NHSGGC health and wellbeing working group. The briefing session involved full instructions in the conduct of the survey interview. The questionnaire was administered through computer based software with instructions included on the computer screens.

Interviewers were assigned a number of clusters. Their instructions were to make at least six calls at an address at different times of the day/days of the week before classifying the addresses as a non-response.

Respondents were randomly selected within households using the "next birthday rule". The person aged 16 or over who would next have a birthday was chosen for interview.

Each sample address was sent an advance letter from NHSGGC explaining the purpose of the survey and requesting co-operation. As a result of this letter, a number of residents contacted NHSGGC to "opt out" of the survey. These addresses were removed from the lists given to interviewers and these households were not contacted further by MRUK.

Each interviewer was provided with a letter of authorisation to show on the doorstep. Interviewers were also instructed to carry their MRUK photo-identity card at all times and to display this to all potential respondents. Each interviewer also carried a stock of leaflets that explained more about the survey and why participation was important. A leaflet was left with every respondent.

Fieldwork began immediately after the briefing session in mid August 2008 and was completed by mid December 2008. A total of 8,278 interviews were completed. The average interview length was 30 minutes.

Response Rate

A total of 8,278 interviews were achieved from a starting sample of 16,658 addresses. Therefore a successful interview was achieved with 49.69% of all contact addresses. A number of interviews were considered out of scope for the following reasons:

The address could not be traced
The address had not been built or was not ready for occupation
The address had been demolished
The address was vacant or empty
The address was for business or industrial use only (ie not residential)
The address was an institution

Once the out of scope addresses had been removed, 11, 889 addresses were remaining. This equated to a response rate of 69.64% which compares well to the 2005 survey where are 71% response rate was achieved.

Date coding

Data from the open questions were coded using the same code frames as were used in each of the earlier surveys. NHSGGC were involved in re-coding some of the lists of codes, which referred to medical conditions.

The interviews were conducted with computer based software, this removed the requirement to enter the data separately.

Additional core indicator variables were computed and added to the data set. These were specified by NHSGGC.

Data were weighted before analysis. This replicated the approach taken in earlier surveys.

APPENDIX B: DATA WEIGHTING

Introduction

Data were weighted to ensure that they were as representative as possible of the adult population in the GGNHSB area. This appendix describes the weighting processes.

Household Size Weighting

In this survey, households were selected at random and therefore had equal probability of selection. However within the household the probability of an individual's selection is not necessarily equal to that of others, since it is inversely proportional to the number of people available to be selected. For example, in a single-person household the probability of selection is exactly 1 whereas in a four-person household the probability of selection is 1/4. The logic of this implies that the respondent from the single-person household represents one person (him/herself) while the respondent from the four-person household is in fact representing four people. It is normal to allow for this bias by 'weighting' the sample to give the respondent from the four-person household four times the 'weight' of the respondent from the one-person household. It is usual to calculate this weighting in such a way that the sum of the weights matches the sample size.

The formula for calculating the household size weight was:

$$Wf = F \times \frac{T}{A}$$

Where:
- Wf is the household size weighting factor for a respondent living in a household size F.
- F is the household size
- T is the total number of respondents
- A is the total number of adults in all households where a successful interview took place (4,339).

Weighting by Age/Gender/Bottom 15%/CH(C)P

Firstly the household size weighting was applied to the dataset. This produced the new 'actual' counts to which we applied the age/sex/bottom15%/CH(C)P weighting frame to produce the final weighting factors.   This ensured that the weighted data would reflect the overall Greater Glasgow and Clyde population in terms age, gender, bottom 15%/other areas and CH(C)P areas. The formula for this stage of the weighting process was:

$$Wi = \frac{ci}{C} \times \frac{T}{ti}$$

Where:

W_i is the individual weighting factor for a respondent in age/gender/bottom15% versus other areas/CH(C)P area group i

c_i is the known population in age/gender/bottom15% versus other areas/CH(C)P area group i

C is the total adult population in the NHS Greater Glasgow and Clyde area

T   is the total number of interviews

t_i is the number of interviews (weighted by the household size weighting factor) for age/gender/bottom15% versus other areas/CH(C)P area group i

Appendix C: ASSUMPTIONS OF NUMBER OF UNITS OF ALCOHOL IN EACH TYPE OF DRINK (2005 and 2008)

The table below shows the assumed number of units of alcohol in each type of drink that were used for the calculation of unit consumption in 2005, and the new assumptions that have been applied in 2008.

	UNIT ASSUMPTION USED FOR ANALYSIS 2005	UNIT ASSUMPTION USED FOR ANALYSIS 2008
Normal strength beer - pints	2.30	2.80
Normal strength beer - cans	1.80	2.20
Normal strength beer bottles	1.00	1.70
Strong beer - pints	2.80	3.40
Strong beer - cans	2.25	2.60
Strong beer - bottles	1.80	2.00
Extra strong beer - pints	5.00	5.10
Extra strong beer - cans	4.00	4.00
Extra strong beer - bottles	3.00	3.00
Single measures spirits	1.00	1.00
Single measure martini/sherry/buckfast etc	1.00	1.00
Small glass wine	1.00	1.75
Large glass wine	2.00	3.50
1/2 bottle wine	4.50	5.25
Full bottle wine	8.75	10.50
Small bottle of alcopops	1.50	1.40
Large bottle of alcopops	n/a	5.45

APPENDIX D: ANNOTATED SURVEY QUESTIONNAIRE

The survey questionnaire is presented here. Where relevant, questions show:

- The number of respondents who answered the question (with "don't know", refused and missing responses removed). These are **unweighted** and shown as "(n=)" after the question;

- The percentage of respondents who gave each response. These are **weighted**.

In some cases, the mean response rather than the percentage giving individual responses is given. These are also weighted.

APPROVED BY:	Executive		Field		Computing		DATE APPROVED:	

Main FINAL

NHS Greater Glasgow & Clyde Health and Wellbeing Survey 2008 Questionnaire (IK20408)	**OFFICE USE** Serial Number

NAME

ADDRESS

	INTERVIEWER ID NUMBER				

	QUESTIONNAIRE NUMBER				

POSTCODE

AGE

TELEPHONE

Social class	AB	1	Occupation of Chief Wage Earner:
	C1	2	
	C2	3	
	DE	4	

Good morning/afternoon/evening. My name is .... from an independent research agency called **mruk** research. We are carrying out a research study on behalf of the NHS Greater Glasgow and Clyde. I wonder if I could ask you some questions? The survey is about your health including issues such as diet, exercise and the area you live in

(IF REQUIRED): ***(It should take about half an hour.)***

This interview has been conducted within the Code of Conduct of the Market Research Society.

INTERVIEWER SIGN _____

INTERVIEWER PRINT _____

DATE OF INTERVIEW _____

OFFICE USE Serial Number				

JOB NUMBER

INTERVIEWER ID NUMBER

QUESTIONNAIRE NUMBER

DO NOT FILL IN
RESPONDENT DETAILS ON THIS PAGE

START TIME

FILL IN ALL OTHER INFO

THANKS

FINISH TIME

This interview has been conducted within the Code of Conduct of the Market Research Society.

INTERVIEWER SIGN _____

INTERVIEWER PRINT _____

DATE OF INTERVIEW _____

EDITED BY _____
DATE _____

CODED BY _____
DATE _____

Q1   I'd like to start by asking you some questions about your health. How would you describe your health over the past year? **(READ OUT AND CODE ONE ONLY) (N=627)**

Excellent	15.5	
Good	56.2	
Fair	15.5	**GO TO Q2**
Poor	12.8	
Don't know	n/a	

Q2   **SHOWCARD 1.** Can you tell me all the illnesses or conditions for which you are currently being treated, by indicating the numbers on the card. **(CODE ALL THAT APPLY) (N=623)**

1	Coronary heart disease	6.9	
2	Stroke	2.9	
3	Arthritis; rheumatism ; painful joints	12.7	
4	Osteoporosis	1.9	
5	Chronic pain	3.9	
6	Clinical depression	2.7	
7	Diabetes	1.8	
8	Cancer	2.5	
9	Asthma, bronchitis, or persistent cough	4.4	
10	Epilepsy	0.6	
11	Acquired brain injury	0.2	**GO TO Q3**
12	Stress related conditions, e.g. difficulty sleeping or concentrating	2.8	
13	Severe hearing problems	2.0	
14	Severe eyesight problems	2.6	
15	Accident / injury	1.2	
16	Gastro-intestinal problems, e.g. peptic ulcer disease, irritable bowel syndrome	4.5	
17	High blood pressure	14.5	
18	Drug or alcohol related conditions	0.8	
19	Sexually transmitted infections, e.g. gonorrhoea, syphilis, chlamydia	0.0	
	None	57.4	
	Refused	n/a	
	Other	9.2	**GO TO Q2A**

IF CODED 'OTHER' AT Q2 GO TO Q2A, OTHERWISE GO TO Q3

Q2a   Other (please specify) – **RECORD VERBATIM (120 Responses)**

_____   **GO TO Q3**

Q3   Do you have any long-term condition or illness that substantially interferes with your day to day activities? **SINGLE CODE (N=623)**

Yes	20.5	**GO TO Q4**
No	79.5	**GO TO Q6**
Refused	n/a	

Q4   Thinking of these conditions and/or illnesses, would you describe yourself as having…? **(READ OUT AND CODE ALL THAT APPLY) (N=149)**

A physical disability	53.8	
A mental or emotional health problem	15.6	
A long-term illness	54.6	**GO TO Q5**
Don't know	1.3	
Other	0.0	**GO TO Q4A**

IF CODED OTHER AT Q4 GO TO Q4A, OTHERWISE GO TO Q5

Q4a   Other (please specify) – **RECORD VERBATIM (2 Responses)**

GO TO Q5

Q5   **SHOWCARD 2.** How much does it (do they) interfere with the following activities (seriously, moderately, or doesn't)? **(READ OUT and code one for each)**

		Seriously Interferes	Moderately Interferes	Does not Interfere	N/A
A	Taking up training **(N=119)**	59.8	27.0	13.1	n/a
B	Holding down or obtaining a job **(N=118)**	62.4	27.0	10.6	n/a
C	Taking exercise/physical activity **(N=144)**	73.6	17.6	8.7	n/a
D	Socialising **(N=146)**	51.7	31.7	16.5	n/a

GO TO Q6

Q6   Thinking about the past year and your own health and your use of the GP surgery how many times have you:
(PUT A NUMBER IN EACH BOX. IF 'NEVER', WRITE IN '0'. IF DON'T KNOW, PROBE FOR ESTIMATE. IF CAN'T GIVE ESTIMATE, ENTER 99 FOR DON'T KNOW)

% at least once

a. Seen a GP? **(N=623)**   79.1

b. Seen a nurse/midwife from your surgery? **(N=625)**   52.8   **GO TO Q7**

c. Seen a physiotherapist/chiropodist/dietician/occupational therapist/clinical psychologist from your surgery? **(N=628)**   12.9

d. Seen someone else from your surgery e.g. health care assistant? **(N=628)**   3.2

Q7   Now thinking about other places, over the past year and your own health how many times have you……..
(PUT A NUMBER IN EACH BOX. IF 'NEVER', WRITE IN '0'. IF DON'T KNOW, PROBE FOR ESTIMATE. IF CAN'T GIVE ESTIMATE, ENTER 99 FOR DON'T KNOW)

	% at least once	
a. Seen a pharmacist for health advice e.g. minor ailments or smoking cessation advice? **(N=627)**	15.9	
b. Contacted NHS24? **(N=627)**	14.6	**GO TO Q8**
c. Been to accident and emergency? **(N=627)**	13.6	
d. Visited a hospital out-patient department to see a doctor? (Do not include visits for an X-ray or other tests) **(N=627)**	25.4	
e. Been admitted to hospital (either as a day case or for a longer stay)? **(N=628)**	10.9	
f. Used GP out of hours service (GEMS) **(N=627)**	1.9	

Q8   **SHOWCARD 3.** Thinking about your recent use and experience of the health services such as GP, dentist, or hospital: **READ OUT AND CODE FOR EACH ONE**

		Definitely	**To Some Extent**	**No**	**Don't know**	**N/A**
A	Were you given adequate information about your condition or treatment? **(N=549)**	69.9	25.8	4.3	n/a	n/a
B	Have you been encouraged to participate in decisions affecting your health or treatment? **(N=535)**	52.6	31.8	15.6	n/a	n/a
C	Do you feel that you have a say in how these services are delivered? **(N=536)**	33.1	30.4	36.4	n/a	n/a
D	Do you feel that your views and circumstances are understood and valued? **(N=534)**	46.3	38.2	15.5	n/a	n/a

GO TO Q9

Q9   Are you registered with a dentist? **SINGLE CODE (N=627)**

Yes	81.0	**GO TO Q10**
No	19.0	**GO TO Q11**
Refused	n/a	

Q10   Do you receive NHS or private dental treatment? **SINGLE CODE (N=479)**

NHS	72.3	**GO TO Q11**
Private	27.7	
Refused	n/a	
Don't know	n/a	

Q11   When was the last time you went to the dentist? **(READ OUT. CODE ONE ONLY)**
       (N=580)

Within last 6 months	62.1	
Within 6 months to 15 months	17.3	**GO TO Q12**
Over 15 months	20.6	
Don't know / can't remember	n/a	

Q12   What proportion of your teeth are your own? (Crowns are regarded as 'own teeth'.)
       (READ OUT. CODE ONE ONLY) (N=626)

All of them	57.6	**GO TO Q13**
Some of them	30.1	
None of them	12.3	**GO TO Q14**
Refused	n/a	

Q13   How often do you brush your teeth? **SINGLE CODE (N=498)**

Twice or more a day	81.3	
About once a day	17.9	**GO TO Q14**
Less than once a day	0.8	
Seldom or never	0.0	
Refused	n/a	

Q14   **SHOWCARD 4.** On a scale of 1 to 5, where 1 is 'very difficult' and 5 is 'very easy', how
       easy or difficult is it to …
       (READ OUT AND CODE ONE FOR EACH)

		Very Difficult 1	2	3	4	Very Easy 5	Don't know 6
A	Get an appointment to see your GP? **(N=610)**	10.8	9.1	14.7	23.9	41.6	n/a
B	Access health services in an emergency? **(N=503)**	1.5	3.6	10.5	25.2	59.2	n/a
C	Obtain an appointment at the hospital? **(N=460)**	4.6	7.3	22.9	22.1	43.1	n/a
D	Travel to the hospital for an appointment? **(N=590)**	3.1	2.6	8.9	15.6	69.9	n/a
E	Get an appointment to see the dentist? **(N=521)**	1.6	6.6	10.0	26.0	55.8	n/a
F	When needed, get a consultation with someone at your GP surgery within 48 hours? **(N=569)**	4.2	5.6	12.1	16.7	61.5	n/a

I am going to show you a series of questions about emotion and feelings. For each question, please tick the box which applies to you.

PASS QUESTIONNAIRE TO RESPONDENT FOR SELF-COMPLETION OF Q15 & Q16. ENCOURAGE THE RESPONDENT TO SELF-COMPLETE, BUT DON'T INSIST ON IT IF THEY WOULD PREFER YOU TO COMPLETE IT ON THEIR BEHALF

Q15   We should like to know if you have had any medical complaints, and how your health has been in general, over the past few weeks. Please answer ALL the questions on this page simply by ticking the answer which you think most closely applies to you. Remember that we want to know about present and recent complaints, not those you had in the past.
It is important that you try to answer ALL the questions.

Have you recently...

(Please tick one box for each statement) (N=628)

a) ...been able to concentrate on whatever you're doing?	Better than usual 3.1	Same as usual 82.6	Less than usual 11.3	Much less than usual 2.9
b) ...lost much sleep over worry?	Not at all 48.2	No more than usual 33.1	Rather more than usual 14.3	Much more than usual 4.4
c) ...felt that you are playing a useful part in things?	More so than usual 7.6	Same as usual 78.1	Less useful than usual 10.7	Much less useful 3.6
d) ...felt capable of making decisions about things?	More so than usual 5.1	Same as usual 84.3	Less so than usual 8.4	Much less capable 2.3
e) ...felt constantly under strain?	Not at all 43.5	No more than usual 34.6	Rather more than usual 16.5	Much more than usual 5.3
f) ...felt you couldn't overcome your difficulties?	Not at all 50.7	No more than usual 35.6	Rather more than usual 9.5	Much more than usual 4.2
g) ...been able to enjoy your normal day-to-day activities?	More so than usual 6.4	Same as usual 75.6	Less so than usual 12.4	Much less than usual 5.6
h) ...been able to face up to your problems?	More so than usual 5.5	Same as usual 81.4	Less able than usual 9.6	Much less able 3.4
i) ...been feeling unhappy and depressed?	Not at all 54.5	No more than usual 29.5	Rather more than usual 11.0	Much more than usual 5.0
j) ...been losing confidence in yourself?	Not at all 55.4	No more than usual 29.9	Rather more than usual 9.9	Much more than usual 4.8
k) ...been thinking of yourself as a worthless person?	Not at all 66.6	No more than usual 25.1	Rather more than usual 4.7	Much more than usual 3.6
l) ...been feeling reasonably happy, all things considered?	More so than usual 9.1	About same as usual 77.7	Less so than usual 9.9	Much less than usual 3.4

Q16   Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks **(N=628)**

	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	3.0	13.1	28.9	37.8	17.3
I've been feeling useful	2.2	9.7	26.2	40.9	21.1
I've been feeling relaxed	2.7	11.2	34.5	36.7	14.9
I've been interested in other people	2.1	5.7	26.5	45.9	19.8
I've had energy to spare	4.7	15.9	33.7	32.9	12.7
I've been dealing with problems well	3.4	6.7	28.6	43.4	17.8
I've been thinking clearly	1.9	6.5	25.6	45.8	20.2
I've been feeling good about myself	3.6	9.5	26.2	40.0	20.7
I've been feeling close to other people	2.0	4.6	29.4	42.7	21.3
I've been feeling confident	4.0	11.0	24.8	38.1	22.2
I've been able to make up my own mind about things	1.4	3.9	25.9	43.9	24.9
I've been feeling loved	2.1	5.5	28.4	38.8	25.1
I've been interested in new things	3.5	12.4	26.2	38.6	19.3
I've been feeling cheerful	3.5	9.0	22.1	46.6	18.8

GO TO Q17

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Q17   In the past year, has anyone in your household suffered an accidental injury in the home? Please include any injuries – no matter how small – for which the sufferer was treated at home.
(CODE ONE ONLY) (N=628)

Yes	5.4	**GO TO Q18**
No	94.6	**GO TO Q21**

Q18   How many people had an accidental injury in the home in the past year? **(N=35)**

   WRITE IN NUMBER OF PEOPLE IN THE BOX: **GO TO Q19**

      1: 100.0

Q19   How many of the people who had an accidental injury in the past year were aged under 16 at the time? **(N=35)**

   WRITE NUMBER OF UNDER 16's IN THE BOX: **GO TO Q20**

      0: 73.9   1: 26.1

Number of people cannot exceed amount recorded at Q18 please re-enter

Q20 For each person, how many accidents did they have that required treatment from a doctor or a nurse (without attending hospital)? How many of these were treated at the hospital?
(ENTER THE NUMBER OF ACCIDENTS FOR EACH PERSON, THEN ENTER THE NUMBER OF THESE THAT WERE TREATED IN HOSPITAL – <u>INCLUDING</u> THOSE AGED 16 AND OVER)

	DR or Nurse (Not at Hospital)		**At Hospital**	
Person 1 **(N=35)**	0 1	57.8 42.2	0 1 3	20.6 78.3 1.1
Person 2				
Person 3				
Person 4				
Person 5				
Person 6				
Person 7				
Person 8				

GO TO Q21

Now I would like to ask you some questions about your lifestyle.

Q21 How often are you in places where there is smoke from other people smoking tobacco? Would you say most of the time, some of the time, seldom or never?
SINGLE CODE (N=626)

Most of the time	19.6
Some of the time	9.2
Seldom	31.2
Never	40.0
Don't know	n/a

GO TO Q22

Q22   **SHOWCARD 5.** Which of the following statements best describes you at present?
        SINGLE CODE (N=628)

a.	I have never smoked tobacco	59.8	**GO TO**
b.	I have only tried smoking once or twice	0.3	**INSTRUCTION**
c.	I have given up smoking	17.3	**BEFORE Q25**
d.	I smoke some days	1.2	**GO TO Q23**
e.	I smoke every day	21.4	

Q23   On average, how many cigarettes a day do you smoke? **(N=141)**
        (WRITE NUMBER OF CIGARETTES IN THE BOX)
        **(CODE AS '995' IF THE PERSON ONLY SMOKES CIGARS / PIPE / LOOSE
        TOBACCO. CODE AS 999 FOR DON'T KNOW)**

        WRITE NUMBER IN THE BOX: | mean | 31.77 | **GO TO Q24**

Q24   Do you intend to stop smoking? **SINGLE CODE (N=142)**

Yes	43.9	**GO TO INSTRUCTION**
No	56.1	**BEFORE Q25**

ASK Q25 OF THOSE RESPONDING C, D OR E AT Q22. OTHERWISE GO TO Q27

Q25   We are interested in whether people use any of the nicotine replacement products that
        are now available, such as nicotine chewing gum or patches. Have you used any of
        the following nicotine replacements products in the last year? **READ OUT**
        (N=269)

Nicotine gum e.g. Nicorette, NiQuitin, Nicotinelle	6.6	
Nicotine patches that you stick on your skin e.g. Nicorette, Nicoderm, Nicotinelle	11.7	**GO TO INSTRUCTION AFTER Q25**
Nasal spray / nicotine inhaler e.g. Nicorette, Nicotrol	4.0	
No	77.7	
Other	6.8	

**IF CODED 'OTHER' AT Q25 GO TO Q25A, OTHERWISE GO TO INSTRUCTION
BEFORE Q26**

Q25A   Other (please specify) – **RECORD VERBATIM (11 Responses)**

                                                                    **GO TO INSTRUCTION
                                                                        BEFORE Q26**

**IF YES USED GUM, PATCHES OR NASAL SPRAY / INHALERS AT Q25 ASK Q26
OTHERWISE GO TO Q27**

Q26   Was your use of these products accompanied by stop smoking support? **(N=46)**

Yes	31.3	**GO TO Q26A**
No	68.7	**GO TO Q27**

Q26a   Which of these NHS Smokefree services did you use? **READ OUT (N=12)**

Community Group	62.0
Pharmacy Service	25.8
Hospital Service	12.2
Pregnancy service	0.0
Other	0.0

IF CODED 'OTHER' AT Q26A GO TO Q26B OTHERWISE GO TO Q27

Q26b   Other (please specify) – **RECORD VERBATIM (0 Responses)**

GO TO Q27

Q27   How often do you drink alcohol? **PROBE TO PRECODE – SINGLE CODE (N=625)**

Never	23.4	**GO TO Q32**
Less than once a month	13.0	
More than once a month but not weekly	10.9	
1-2 days per week	34.9	**GO TO Q28**
3-5 days per week	10.3	
6-7 days per week	7.5	
Refused		

Q28   Have you had a drink containing alcohol in the past 7 days? **SINGLE CODE (N=448)**

Yes	68.9	**GO TO Q28A**
No	31.1	**GO TO Q30**

Q28a   **SHOWCARD 6.** Have you had any of the following in the past 7 days? **(N=297)**

Normal strength beer/lager/stout/cider (e.g. McEwan's lager, heavy) – Pints	20.7
Normal strength beer/lager/stout/cider (e.g. McEwan's lager, heavy) – Cans	10.8
Normal strength beer/lager/stout/cider (e.g. McEwan's lager, heavy) – Bottles	11.9
Strong beer/lager/cider (e.g. Guinness, Murphy's, Budweiser) – Pints	0.4
Strong beer/lager/cider (e.g. Guinness, Murphy's, Budweiser) – Cans	0.6
Strong beer/lager/cider (e.g. Guinness, Murphy's, Budweiser) – Bottles	3.2
Extra strong beer/lager/ cider (e.g. Tennant's super lager) – Pints	0.4
Extra strong beer/lager/ cider (e.g. Tennant's super lager) – Cans	1.1
Extra strong beer/lager/ cider (e.g. Tennant's super lager) – Bottles	1.7
Single measures of spirits (e.g. whisky, gin, vodka) (a bottle contains 28 measures)	29.4
Single measures of Martini/sherry/buckfast/Mad Dog 20/20 (a bottle contains 14 measures)	3.5
Glasses of wine – Small Glass	14.3
Glasses of wine – Large Glass	30.2
½ bottle of wine	4.0
Full bottle of wine	5.6
Small bottles (300ml) of alcoholic carbonate (alcopops, such as Smirnoff Ice and Bacardi Breezer)	2.5
Large bottles (1.5litre) of alcoholic carbonate (alcopops, such as Smirnoff Ice and Bacardi Breezer)	0.0
Other	0.7

IF CODED 'OTHER' AT Q28A GO TO Q28B OTHERWISE GO TO Q29

Q28b   Please specify other alcoholic drink consumed in the past 7 days

Specify – RECORD VERBATIM (2 Responses)

Q29   **SHOWCARD 6.** Using the card, please tell me how much you drank on each day in the past week.
(START WITH THE PREVIOUS DAY AND WORK BACK THROUGH THE WEEK)
(IF REFUSED ENTER 98; IF DON'T KNOW ENTER AS 99)

	MON		TUES		WED		THURS		FRI		SAT		SUN	
Normal strength beer/lager/stout/cider (e.g. McEwan's lager, heavy)														
Pints														
Cans														
Bottles														
Strong beer/lager/cider (e.g. Guinness, Murphy's, Budweiser)														
Pints														
Cans														
Bottles														
Extra strong beer/lager/ cider (e.g. Tennant's super lager)														
Pints														
Cans														
Bottles														
Single measures of spirits (e.g. whisky, gin, vodka) (a bottle contains 28 measures)														
Single measures of Martini/sherry/buckfast/Mad Dog 20/20 (a bottle contains 14 measures)														
Glasses of wine														
Small Glass														
Large Glass														
½ bottle														
Full bottle														
Small bottles (300ml) of alcoholic carbonate (alcopops, such as Smirnoff Ice and Bacardi Breezer)														
Large bottles (1.5litre) of alcoholic carbonate (alcopops, such as Smirnoff Ice and Bacardi Breezer)														
Please tell me how much you drink on each day in the past week of <%Q28b>														

GO TO Q30

Q30   Where have you had a drink in the last 6 months? **READ OUT AND CODE ALL THAT APPLY (N=448)**

In a pub	44.6
In a restaurant	41.3
In a club or disco	19.4
At a party with friends	26.7
At my home	80.2
At someone else's home	37.2
Out on the street, in a park or other outdoor area	6.2
Somewhere else	6.7

IF CODED 'SOMEWHERE ELSE' AT Q30 GO TO Q30A, OTHERWISE GO TO Q31

Q30a   Somewhere else (write in) – **RECORD VERBATIM (27 Responses)**

_____   **GO TO Q31**

Q31   In which place did you drink the most alcohol (again in the last 6 months)? **(N=448)**

In a pub	23.4	
In a restaurant	5.1	
In a club or disco	4.3	**GO TO Q32**
At a party with friends	7.1	
At my home	51.6	
At someone else's home	6.5	
Out on the street, in a park or other outdoor area	0.0	
Somewhere else	1.9	**GO TO Q31A**

IF CODED 'SOMEWHERE ELSE' AT Q31 GO TO Q31A, OTHERWISE GO TO Q32

Q31a   Somewhere else (write in) – **RECORD VERBATIM (8 Responses)**

_____   **GO TO Q32**

Q32   Now I'd like to ask you some questions about the food you eat. On average, how many portions of fruit do you eat <u>EACH DAY</u>? Examples of a portion are one apple, one tomato, 2 tablespoons canned fruit, one small glass of fruit juice.
(WRITE NUMBER IN BOX. IF LESS THAN ONE, WRITE '0'; IF DON'T KNOW CODE AS 99) (N=627)

WRITE NUMBER IN THE BOX: | mean | 2.13 | **GO TO Q33**

Q33   On average, how many portions of vegetables or salad (not counting potatoes) do you eat <u>each day</u>? A portion of vegetables is 2 tablespoons.
(WRITE NUMBER IN BOX. IF LESS THAN ONE, WRITE '0'; IF DON'T KNOW CODE AS 99) (N=628)

WRITE NUMBER IN THE BOX: | mean | 1.86 | **GO TO Q34**

Q34 How often <u>per day</u> do you usually eat items such as cakes, pastries, chocolate, biscuits and crisps?
(WRITE NUMBER IN BOX. IF LESS THAN ONE, WRITE '0'; IF DON'T KNOW CODE AS 99) (N=623)

WRITE NUMBER IN THE BOX: | mean | 1.56 | **GO TO Q35**

Q35 How many slices of bread (include bread rolls as one slice; chapattis as one slice; naan as one slice) do you eat per average day?
(WRITE NUMBER IN BOX. IF LESS THAN ONE, WRITE '0'; IF DON'T KNOW CODE AS 99) (N=625)

WRITE NUMBER IN THE BOX: | mean | 2.61 | **GO TO Q36**

Note Q36-Q38 refers to the number of times <u>per week</u>

Q36 How often <u>PER WEEK</u> do you usually eat oily fish (e.g. kipper, herring, salmon, trout, mackerel, tuna, sardines or pilchards) taken in sandwiches or as part of a meal?
Include oily fish taken as part of a meal, e.g. tuna pasta, salmon fishcakes
(WRITE NUMBER IN BOX. IF LESS THAN ONE, WRITE '0'; IF DON'T KNOW CODE AS 99) (N=628)

WRITE NUMBER IN THE BOX: | mean | 1.08 | **GO TO Q37**

Q37 How frequently do you eat fast food takeaways? **PROBE TO PRECODE (N=628)**

Never	27.0
Less than once a month	26.6
More than once a month but not weekly	24.3
1-2 days a week	20.0
3-5 days a week	1.2
6-7 days a week	0.8

GO TO Q38

Q38 On how many days per week do you usually eat breakfast?
(WRITE NUMBER BETWEEN 0 AND 7 IN BOX, IF VARIES ENTER AS '8' IF DON'T KNOW ENTER AS '9') (N=627)

WRITE NUMBER IN THE BOX: | | **GO TO Q39**

0	1	2	3	4	5	6	7
10.2	2.8	5.6	1.3	0.5	3.9	0.7	75.0

Q39 What, if anything, did you eat for breakfast <u>this morning</u>?
(code as many as apply) (N=628)

Nothing	15.1
Breakfast cereal	42.1
Porridge/rice porridge	12.6
Bread / toast	41.1
Fruit (incl. fresh fruit juice/smoothie, but not fruit squash/cordial)	17.0
Yoghurt	1.4
Meat (e.g. bacon, sausage, black pudding)	5.4
Egg(s)	3.6
Breakfast bar, e.g. Nutrigrain	0.7
Pastry, e.g. croissant, pain au chocolat, pie	1.5
Other	27.2

IF CODED 'OTHER' AT Q39 GO TO Q39A, OTHERWISE GO TO Q40

Q39a Other (please specify) – **RECORD VERBATIM (201 Responses)**

GO TO Q40

Now I'd like to ask you some questions about breastfeeding

Q40 **SHOWCARD 7.** The following statements are things some people have said about breastfeeding. How much do you agree or disagree with each one. **READ OUT**

		Strongly Agree	Tend to Agree	Tend to Disagree	Strongly Disagree	Don't know
a.	Women should be made to feel comfortable breastfeeding their babies in public **(N=574)**	47.8	41.5	6.7	4.0	n/a
b.	Women should only breastfeed their babies at home or in private (**N=589**)	4.2	12.7	27.3	55.8	n/a
c.	I would feel embarrassed seeing a women breastfeeding her baby **(N=592)**	4.9	17.1	25.5	52.5	n/a

GO TO Q41

Moving on, we're now going to discuss issues relating to physical activity.

Q41 What is your weight?
(WRITE WEIGHT IN STONES/POUNDS <u>OR</u> KILOGRAMS. IF UNSURE, ASK FOR ESTIMATE.) IF DON'T KNOW CODE AS 0, IF REFUSED CODE AS -1. INTERVIEWER PLEASE NOTE THAT IF RESPONDENT STATES WEIGHT IN STONES AND POUNDS THEY WILL AUTOMATICALLY SKIP KILOGRAMS. IF RESPONDENT RESPONDS DON'T KNOW OR REFUSED IT WILL PROCEED TO ASK ALL PARTS OF THE QUESTION. IF RESPONDENT RESPONDS IN KILOGRAMS ENTER '99' AT STONES/POUNDS.

a. Stones / pounds **(N=548)** ☐☐☐ **Stone** ☐☐☐ **Pounds**
Or **GO TO Q42**
b. Kilograms **(N=23)** ☐☐☐

Q42   What is your height?
        **(WRITE IN HEIGHT IN FEET/INCHES <u>OR</u> CENTIMETRES. IF UNSURE, ASK FOR
        ESTIMATE.) IF DON'T KNOW CODE AS 0, IF REFUSED CODE AS -1. IF RESPONDENT
        STATES HEIGHT AT FEET/INCHES THEY WILL AUTOMATICALLY SKIP CENTIMETERS. IF
        RESPONDENT RESPONDS DON'T KNOW OR REFUSED IT WILL PROCEED TO ASK ALL
        PARTS OF THE QUESTION. IF RESPONDENT RESPONDS IN CENTIMETERS ENTER '99'
        AT FEET/INCHES.**

        a. Feet / inches **(N=603)**   **Feet**   **Inches**
        Or   **GO TO Q43**
        b. Centimeters **(N=7)**

Q43   Thinking now of the exercise and physical activity you take. In an average week, on
        how many days do you take at least 30 minutes of moderate physical exercise such as
        brisk walking? It doesn't have to be 30 minutes all at once.
        (WRITE NUMBER OF DAYS IN BOX, IF DON'T KNOW CODE AS -1)
        (N=628)

        WRITE NUMBER IN THE BOX: **GO TO Q44**

0	1	2	3	4	5	6	7
28.4	4.9	9.0	8.3	4.3	4.7	2.1	38.3

Q44   In an average week, on how many days do you spend at least 20 continuous minutes
        doing vigorous exercise (enough to make you sweaty and out of breath)?
        (WRITE NUMBER OF DAYS IN BOX, IF DON'T KNOW CODE AS -1)
        (N=628)

        WRITE NUMBER IN THE BOX: **GO TO Q45**

0	1	2	3	4	5	6	7
62.0	8.9	12.2	7.0	2.3	0.8	1.4	5.4

Q45   Can I just check, when you answered the last two questions, did you include physical
        activity that you do in your job, housework, DIY and gardening?
        (CODE ONE ONLY) (N=628)

        Yes – all activities have been included   86.2   **GO TO Q48**
        No – there are more activities to add   13.8   **GO TO Q46**

Q46   Including **ALL** types of exercise and activity you take. In an average week, on how
        many days do you take at least 30 minutes of moderate physical exercise such as
        brisk walking? It doesn't have to be 30 minutes all at once
        (WRITE IN TOTAL NUMBER OF DAYS IN BOX, IF DON'T KNOW CODE AS 9)
        (N=83)

        WRITE NUMBER IN THE BOX: **GO TO Q47**

0	1	2	3	4	5	6	7
0.0	2.4	6.0	4.7	5.8	8.5	5.1	67.6

Q47   And including **ALL** types of exercise and activity. In an average week, on how many days do you spend at least 20 continuous minutes doing vigorous exercise (enough to make you sweaty and out of breath)?
(WRITE IN TOTAL NUMBER OF DAYS IN BOX, IF DON'T KNOW CODE AS 9)
(N=83)

WRITE NUMBER IN THE BOX: ☐ **GO TO Q48**

0	1	2	3	4	5	6	7
41.4	4.3	19.4	8.9	13.9	6.9	0.7	4.6

Q48   **SHOWCARD 8.** I am now going to read out a list of activities, and I'd like you to tell me which you have done in the last **4 WEEKS** and how many days a week you did them? Include teaching, coaching, training and practice sessions.

	Yes, done 1 day a week	Yes, done 2 days a week	Yes, done 3 days a week	Yes, done 4 days a week	Yes, done 5 days a week	Yes, done 6 days a week	Yes, done 7 days a week	No, have not done in last 4 weeks	Don't know
Swimming **(N=627)**	5.1	2.1	0.4	0.2	0.0	0.3	1.7	90.3	n/a
Cycling **(N=627)**	2.9	2.2	0.2	0.4	0.0	0.0	0.7	93.6	n/a
Workout at a gym / exercise bike / weight training **(N=626)**	2.5	6.4	4.1	0.9	0.1	0.4	2.1	83.5	n/a
Aerobics / Keep Fit / Gymnastics / Dance for Fitness **(N=626)**	4.9	1.6	0.8	0.3	0.0	0.3	0.5	91.8	n/a
Any other type of dancing **(N=624)**	3.9	0.7	0.3	0.0	0.3	0.0	0.7	94.1	n/a
Running / jogging **(N=627)**	2.2	3.1	0.7	1.2	0.2	0.5	0.7	91.4	n/a
Football / rugby **(N=623)**	2.7	0.7	0.4	0.0	0.0	0.0	0.8	95.4	n/a
Badminton / Tennis **(N=623)**	2.0	0.6	0.3	0.0	0.0	0.0	0.5	96.6	n/a
Squash **(N=623)**	0.3	0.0	0.1	0.0	0.0	0.0	0.5	99.1	n/a
Exercises (e.g. press-up, sit ups) **(N=625)**	3.7	3.5	2.0	0.7	1.6	0.0	3.0	85.5	n/a

GO TO Q49

Q49   Have you done any other sport or exercise not listed on the card? **(N=628)**

Yes	16.2	**GO TO Q50**
No	83.8	**GO TO Q51**

Q50   Probe for name of sport or exercise and write in – **RECORD VERBATIM.**
       Note to Interviewer: If done more than 1, prompt for most recent.
       (94 responses)

a.   _____

b.   Ask frequency as above **(N=94)**

       1 day a week   32.2
       2 days a week   11.9
       3 days a week   21.6   **GO TO Q51**
       4 days a week   7.3
       5 days a week   4.7
       6 days a week   1.3
       7 days a week   21.0

Q51   Thinking first of weekdays, that is Monday to Friday, how much time on an average day do
       you spend watching TV or another type of screen such as a computer, game boy, or video
       game. Please do not include any time spend in front of a screen while at school, college or
       work. **ENTER NUMBER BELOW. IF DON'T KNOW ENTER '99' AT HOURS (N=628)**

                   _____   **GO TO
                                                    Q52**

Q52   Now thinking of the weekend, that is Saturday and Sunday, how much time on an average
       day do you spend watching TV or another type of screen such as a computer, game boy, or
       video game. Again, please do not include any time spend in front of a screen while at school,
       college or work. **ENTER NUMBER BELOW. IF DON'T KNOW ENTER '99' AT HOURS
       (N=621)**

                   _____   **GO TO
                                                    Q53**

I'd now like to ask you some questions about yourself and your local area.

Q53   **SHOWCARD 9.** Looking at the faces on the card:

       a. Which face best rates your overall quality of life?
       (WRITE NUMBER IN BOX) (N=628)

1	2	3	4	5	6	7
35.4	36.9	15.2	6.9	2.9	0.9	1.7

       b. Which face best rates your general physical well being?
       (WRITE NUMBER IN BOX) (N=628)

1	2	3	4	5	6	7
31.9	31.2	19.3	9.4	4.4	1.6	2.1

       c. Which face best rates your general mental or emotional well being?
       (WRITE NUMBER IN BOX) (N=628)

1	2	3	4	5	6	7
37.2	34.1	15.0	7.6	3.6	1.3	1.4

GO TO Q54

Q54 **SHOWCARD 9.** Now I would like to ask you some questions regarding your local area and community. Please look at the card and could you tell me which face on the scale indicates how you feel about your local area as a place to live. **(N=628)**

WRITE NUMBER IN THE BOX: [ ] **GO TO Q55**

1	2	3	4	5	6	7
49.8	32.8	11.2	3.8	1.1	0.7	0.6

Q55 **SHOWCARD 9.** And how do you feel about this area as a place in which to bring up children? **(N=628)**

WRITE NUMBER IN THE BOX: [ ] **GO TO Q56**

1	2	3	4	5	6	7
51.2	32.9	9.2	3.3	2.1	0.4	0.9

Q56 **SHOWCARD 9.** I'm going to ask you some questions about various things that may or may not be a problem in your local area. Which face best describes how you feel about …

(READ OUT (A) –(H) AND CODE ONE FOR EACH)

		1	2	3	4	5	6	7	Don't Know
A	The level of unemployment in your area **(N=452)**	30.5	25.1	16.0	12.9	4.9	4.6	6.0	n/a
B	The number of burglaries in your area **(N=511)**	46.5	33.2	13.1	5.3	1.3	0.6	0.0	n/a
C	The amount of vandalism / graffiti in your area **(N=575)**	47.9	31.5	12.9	3.0	2.7	1.4	0.6	n/a
D	The number of assaults / muggings in your area **(N=542)**	50.8	35.4	9.4	3.1	1.0	0.3	0.0	n/a
E	The amount of drug activity in your area **(N=485)**	42.6	21.5	14.3	7.7	6.1	4.0	3.7	n/a
F	The level of alcohol consumption in your area **(N=509)**	37.8	16.2	12.1	11.9	10.0	6.6	5.5	n/a
G	Young people hanging around in your area **(N=587)**	40.9	21.6	15.6	8.3	7.4	3.8	2.4	n/a
H	The amount of car crime in your area **(N=547)**	55.6	28.8	8.2	5.0	1.7	0.4	0.3	n/a

GO TO Q57

Q57 **SHOWCARD 10.** Now I'd like to ask you about some environmental issues that may or may not be a problem in your area. Which face best describes how you feel about …
(READ OUT (A) –(M) AND CODE ONE FOR EACH)

		1	2	3	4	5	6	7	Don't know
A	The amount of rubbish lying about in your area **(N=625)**	47.4	34.1	10.8	3.5	2.4	0.5	1.3	n/a
B	The amount of noise and disturbance in your area **(N=627)**	49.4	29.0	13.2	5.8	1.1	1.1	0.4	n/a
C	The standard of street lighting in your area **(N=627)**	53.9	38.0	6.3	1.2	0.5	0.3	0.0	n/a
D	The amount of vacant/derelict land in your area **(N=623)**	74.4	18.2	4.7	2.1	0.3	0.3	0.0	n/a
E	The number of vacant/derelict buildings in your area **(N=617)**	72.8	19.4	3.6	1.8	0.4	0.5	1.6	n/a
F	The amount of dog's dirt in your area **(N=618)**	39.6	34.8	14.3	5.6	3.3	1.6	0.9	n/a
G	The number of abandoned cars in your area **(N=594)**	85.0	12.8	1.3	0.8	0.0	0.0	0.0	n/a
H	The amount of traffic in your area **(N=625)**	38.1	19.5	17.2	15.0	6.3	2.6	1.4	n/a
I	The level of smells from sewers in your area **(N=622)**	83.3	11.9	3.0	0.4	0.4	0.7	0.4	n/a
J	The amount of broken glass lying around in your area **(N=624)**	62.6	22.3	9.4	4.5	0.8	0.0	0.4	n/a
K	The number of uneven pavements in your area **(N=624)**	36.4	22.0	20.1	10.4	6.8	3.0	1.3	n/a
L	The availability of safe play spaces in your area **(N=603)**	49.4	26.6	12.7	6.0	2.5	1.4	1.4	n/a
M	The availability of pleasant places to walk etc in your area **(N=620)**	59.1	26.5	8.0	3.5	1.6	0.9	0.4	n/a

GO TO Q58

Q58 Do you belong to any social clubs, associations, church groups or anything similar?
SINGLE CODE (N=628)

Yes	20.7	**GO TO Q59**
No	79.3	**GO TO Q61**

Q59 How many do you attend regularly in your local area? And elsewhere? **(N=131)**
(Write number in each box. If 'none' write in '0'.)

a. Your local area
(WRITE NUMBER IN BOX)

mean	1.23

GO TO Q60

b. Elsewhere
(WRITE NUMBER IN BOX)

mean	0.49

Q60 In the past 3 years, have you had any responsibilities in the groups you belong to, such as being a committee member, raising funds, organising events, or doing administrative or clerical work? **SINGLE CODE (N=131)**

Yes	49.8	
No	50.2	**GO TO Q61**

Q61 **X**

Q62 Do you act as a volunteer? **SINGLE CODE (N=628)**

Yes	10.5	**GO TO Q63**
No	89.5	**GO TO Q64**

Q63 How many hours (approximately) do you volunteer per week? **(N=63)**

WRITE NUMBER IN THE BOX:

mean	4.66

GO TO Q64

Q64 How long have you lived in this neighbourhood/local area?
(WRITE IN YEARS AND/OR MONTHS. USE RESPONDENT'S OWN DEFINITION OF NEIGHBOURHOOD/LOCAL AREA). IF DON'T KNOW OR REFUSED ENTER 99 IN YEARS (N=628)

GO TO Q65

		Years			Months

Q65 How long have you lived in your present home?
(WRITE IN YEARS AND/OR MONTHS). INTERVIEWER PLEASE ENSURE THAT THE LENGTH OF TIME RESPONDENT HAS LIVED IN THEIR PRESENT HOME DOES NOT EXCEED LENGTH OF TIME THEY HAVE LIVED IN THEIR NEIGHBOURHOOD/LOCAL AREA (Q64). IF DON'T KNOW OR REFUSED ENTER 99 IN YEARS (N=628)

GO TO Q66

		Years			Months

Q66 Do you have access to the internet? **SINGLE CODE (N=628)**

Yes	72.8	**GO TO Q67**
No	27.2	**GO TO Q68**

Q67   Is this at home, elsewhere or both? **SINGLE CODE (N=359)**

Home	61.0	
Elsewhere	4.6	**GO TO Q68**
Both	34.4	

Q68   Is there anything about your home that affects your health? **SINGLE CODE (N=628)**

Yes	6.1	**GO TO Q69**
No	93.9	**GO TO Q70**

Q69   What would that be? – **RECORD VERBATIM (39 Responses)**

GO TO Q70

Q70   Is your home bought or rented? **SINGLE CODE (N=627)**

Owner occupied/being bought	76.8	
Rented from private owner	7.6	
Rented from local housing association or Glasgow Housing Association	15.6	**GO TO Q71**
B&B/Hostel	0.0	
Refused	n/a	
Other	0.0	**GO TO Q70A**

IF CODED 'OTHER' AT Q70 GO TO Q70A, OTHERWISE GO TO Q71

Q70a   Other (please specify) – **RECORD VERBATIM (0 Responses)**

GO TO Q71

Q71   **SHOWCARD 12.** How much do you agree or disagree with the following statements

about living in this local area?

(READ OUT AND CODE ONE FOR EACH)

		Strongly Agree	Agree	Neither / nor	Disagree	Strongly Disagree	Don't know
A	This is a neighbourhood where neighbours look out for each other **(N=609)**	22.4	54.5	13.8	7.4	1.9	n/a
B	I feel I belong to this local area **(N=623)**	37.1	40.2	12.1	8.6	2.1	n/a
C	The friendships and associations I have with other people in my local area mean a lot to me **(N=622)**	28.1	44.2	18.5	7.3	1.9	n/a
D	I feel valued as a member of my community **(N=617)**	22.0	33.8	21.1	18.8	4.4	n/a
E	Generally speaking, you can trust people in my local area **(N=615)**	27.6	54.5	11.6	4.7	1.7	n/a
F	By working together, people in my neighbourhood can influence decisions that affect my neighbourhood **(N=594)**	24.3	56.4	11.1	6.0	2.3	n/a
G	If I have a problem, there is always someone to help me **(N=611)**	24.1	51.0	16.9	6.0	2.0	n/a

GO TO Q72

Q72   Do you ever exchange small favours with the people who live near you? I'm thinking about things like leaving a key to let in a repair man, feeding pets while you are away or picking up things from the shop for each other. IF YES: How many people do you exchange favours with?
WRITE NUMBER IN THE BOX. IF 'NONE' WRITE IN '0', IF MORE THAN 98 WRITE IN '98'. IF DON'T KNOW, WRITE IN '99'. (N=625)

WRITE NUMBER IN THE BOX: | mean | 1.48 | **GO TO Q73**

Q73   Do you ever feel isolated from family and friends? **SINGLE CODE (N=628)**

Yes   14.5
No   85.5   **GO TO Q74**
Refused   n/a

Q74   **SHOWCARD 13.** Please look at the card I've given you and tell me what you think of the quality of services in your area.

(READ OUT AND CODE ONE FOR EACH)

		Very Poor	Poor	Adequate	Good	Excellent	Don't know
A	Food shops **(N=627)**	4.1	12.2	27.8	49.4	6.5	n/a
B	Local schools **(N=547)**	0.7	2.6	14.3	69.9	12.6	n/a
C	Public transport **(N=589)**	2.5	10.2	21.8	58.6	6.8	n/a
D	Activities for young people **(N=488)**	8.0	31.9	21.3	38.0	0.8	n/a
E	Leisure / sports facilities **(N=544)**	6.6	15.7	24.1	49.3	4.3	n/a
F	Childcare provision **(N=368)**	2.6	9.7	28.1	58.1	1.5	n/a
G	Police **(N=537)**	1.7	13.4	32.3	50.6	2.1	n/a

GO TO Q75

Q75   What mode of transport do you normally use for most of the journeys you make?
INTERVIEWER:PROBE FOR MAIN MODE – THE ONE USED TO TRAVEL FURTHEST SINGLE CODE (N=628)

Walking	8.8
Driver car / van	65.2
Passenger car / van	4.2
Motorcycle / moped	0.2
Bicycle	0.2
School bus	0.0
Works bus	0.5
Ordinary (service) bus	14.8
Taxi / minicab	3.2
Train	2.8
Underground	0.0
Ferry	0.0
Aeroplane	0.0
Horse-riding	0.0
Other	0.0

GO TO Q76

GO TO Q75A

IF CODED 'OTHER' AT Q75 GO TO Q75A, OTHERWISE GO TO Q76

Q75a   Other (write in) – **RECORD VERBATIM (0 Responses)**

GO TO Q76

Q76   **SHOWCARD 14.** How much do you agree or disagree with the following statements about safety in this local area?

(READ OUT AND CODE ONE FOR EACH)

		Strongly Agree	Agree	Neither / nor	Disagree	Strongly Disagree	Don't know
A	I feel safe using public transport in this local area **(N=565)**	18.4	69.9	5.4	5.0	1.3	n/a
B	I feel safe walking alone around this local area even after dark **(N=603)**	15.9	56.0	8.6	15.8	3.7	n/a
C	I feel safe in my own home **(N=625)**	32.3	65.4	1.2	0.7	0.4	n/a

GO TO Q77

Q77   **SHOWCARD 15.** Taking all things into account, which face best indicates how happy you are in general? **(N=628)**

WRITE NUMBER IN THE BOX: [   ]   **GO TO Q78**

1	2	3	4	5	6	7
42.3	38.0	11.6	5.1	1.5	0.9	0.6

Q78   Do you feel in control of decisions that affect your life, such as planning your budget, moving house or changing job? **SINGLE CODE (N=626)**

Definitely	64.9	
To some extent	32.0	**GO TO Q79**
No	3.1	
Don't know	n/a	

Q79   Now I'd like to ask you about the members of your household.

A: How many people are there in this household (including yourself)? **(N=625)**

WRITE NUMBER IN THE BOX:

1	2	3	4	5	6	7	8	9	10
14.6	37.0	20.8	18.7	7.0	1.6	0.2	0.0	0.0	0.0

B: What gender are they? **(enter below)**.
C: Please tell me their ages **(enter below)**. **If child under 1 years enter as
'0'. IF REFUSED CODE AS 98**
D: FOR EACH: Is he/she employed or in education? **(enter below)**.
Make sure respondent is person number 1.
**Record as employed only if this is primary occupation (e.g. Full-time students with a
part-time job should be classed as 'education'. If child under 16 record as 'other').
Enter numbers in grid below.**

PERSON	GENDER 1 = Male 2 = Female 3 = Transsexual 4 = Refused			AGE Write in age last birthday				WORK STATUS 1 = Employed 2 = Education 3 = Unemployed 4 = Other / Retired / under 16 5 = Refused		
1 = Respondent	Q79a **(N=623)**			Q79ab (**N=619**)				Q79ac **(N=628)**		
2	Q79b **(N=423)**			Q79ba **(N=422)**				Q79bb **(N=420)**		
3	Q79c **(N=175)**			Q79ca **(N=177)**				Q79cb **(N=177)**		
4	Q79d **(N=93)**			Q79da **(N=94)**				Q79db **(N=94)**		
5	Q79e **(N=31)**			Q79ea **(N=31)**				Q79eb **(N=31)**		
6	Q79f **(N=7)**			Q79fa **(N=7)**				Q79fb **(N=7)**		
7	Q79g **(N=1)**			Q79ga **(N=1)**				Q79gb **(N=1)**		
8	Q79h			Q79ha				Q79hb		
9	Q79i			Q79ia				Q79ib		
10	Q79j			Q79ja				Q79jb		
11	Q79k			Q79ka				Q79kb		
12	Q79l			Q79la				Q79lb		

Q80	**INTERVIEWER: PASS Q80 TO RESPONDENT FOR SELF COMPLETION. DO NOT READ OUT QUESTION OR RESPONSES. ASK RESPONDENTS NOT TO READ OUT ANSWER.**
Which of the following best describes your sexual orientation? **SINGLE CODE (N=620)**

Bisexual	0.0
Gay or lesbian (same sex relationship)	0.1
Heterosexual (opposite sex relationships)	99.8 **GO TO Q81**
Other	0.1
Prefer not to answer	n/a

Q81	**SHOWCARD 16.** What is the highest level of educational qualifications you've obtained? **SINGLE CODE (N=628)**

A	School leaving certificate	19.3	
B	'O' Grade, Standard Grade, GCSE, CSE, Senior Cert or equivalent	17.1	
C	Higher Grade, CSYS, 'A' Level, AS Level, Advanced Senior Cert or equivalent	13.0	
D	GSVQ/SVQ Level 1 or 2, Scotvec Module, BTEC First Diploma, City and Guilds Craft, RSA or equivalent	3.0	
E	GSVQ/SVQ Level 3, ONC, OND, Scotvec National Diploma, City and Guilds Advanced Craft, RSA Advanced Diploma or equivalent	4.8	**GO TO Q82**
F	Apprenticeship / trade qualification	2.9	
G	HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma or equivalent	10.8	
H	First Degree, Higher Degree	18.4	
I	None	7.7	
	Other Professional qualification	2.9	**GO TO Q81A**

IF CODED 'OTHER' AT Q81 GO TO Q81A, OTHERWISE GO TO Q82

Q81a	Other Professional qualification (specify) – **RECORD VERBATIM (22 Responses)**

_____	**GO TO Q82**

Q82	I'd like to ask about the main wage earner in the household. If there is no wage earner, this could be the person who draws a pension or simply brings in most of the household's income. Are you the main wage earner in the household? **SINGLE CODE (N=628)**

Yes	59.3
No	40.7 **GO TO Q83**

Q83   **SHOWCARD 17.** Which one of these describes you best?   **GO TO INSTRUCTIONS BEFORE Q83A.**

IF CURRENTLY OFF WORK OR ON MATERNITY LEAVE, CODE AS EMPLOYED FULL- OR PART-TIME.
IF RESPONDENT IS NOT MAIN WAGE EARNER ('NO' AT Q82), ASK Q83A: OTHERS GO TO Q84.

Q83a   Which of these applies to the main wage earner?
IF RESPONDENT IS NOT MAIN WAGE EARNER (NO' AT Q82) ASK Q83A, OTHERWISE GO TO Q84. CODE ONE ONLY.
IF CURRENTLY OFF WORK OR ON MATERNITY LEAVE, CODE AS EMPLOYED FULL- OR PART-TIME.

	Q83 Respondent (N=628)	Q83a Main Wage Earner (N=187)	
Employed full-time	44.0	80.5	
Employed part-time	6.8	0.5	
Unemployed and seeking work	4.7	2.3	**GO TO Q84**
Unable to work due to illness or disability	5.6	0.0	
Retired	29.3	15.4	
Looking after home/family	4.8	1.4	
In full-time education/training	4.6	0.0	
In part-time education/training	0.2	0.0	

Q84   What is or was the main wage earner's occupation?
Job (write in verbatim). IF 'NEVER WORKED' CODE AS N/A. IF RETIRED ENTER PREVIOUS OCCUPATION (560 Responses)

GO TO Q85

Q85   How many people is/was he/she responsible for?
If none, write in '0'. If Don't know, code as 99 (602 Responses)

WRITE IN NUMBER: | mean | 3.59 | **GO TO Q86**

Q86   **SHOWCARD 18.** What industry do/did he/she work in? What is/was made or done at the place where he/she work(ed)? **CODE ONE ONLY (N=628)**

Manufacturing and mining	14.2
Construction	9.2
Transport	6.1
Health service	11.8
Local or national government	5.7
Service industries (e.g. banking, insurance, travel, entertainment)	14.4
Retail services	6.3
Catering/food preparation	1.9
Professional services (e.g. teaching, legal, surveying services)	14.9
Voluntary or community sector	1.0
Other	14.5

IF CODED 'OTHER' AT Q86 GO TO Q86A, OTHERWISE GO TO Q87

Q86a   Other (please specify) – **RECORD VERBATIM (102 Responses)**

_____

Q87   SEG **(N=628)**

A	6.7
B	28.2
C1	23.6
C2	24.1
D	12.1
E	5.2

IF RESPONDENT IS UNEMPLOYED AND SEEKING WORK (CODE 3 AT Q83) ASK Q88 OTHERS GO TO Q89)

Q88   How long has it been since you were last in paid employment?
WRITE IN YEARS AND/OR MONTHS. IF NEVER WORKED, CODE AS '98' (N=20)

		Years			Months

Never

Q89   **SHOWCARD 19.** How often do you find it difficult to meet the cost of:

		Very Often	Quite Often	Occasionally	Never	Don't know	N/A	Refused
A	Rent/mortgage **(N=600)**	1.2	3.0	9.7	86.1	n/a	n/a	n/a
B	Gas, electricity and other fuel bills **(N=608)**	1.6	6.0	14.6	77.8	n/a	n/a	n/a
C	Telephone bill **(N=602)**	1.6	5.3	12.1	81.0	n/a	n/a	n/a
D	Council tax, insurance **(N=609)**	1.9	5.8	12.5	79.8	n/a	n/a	n/a
E	Food **(N=614)**	1.4	4.2	6.2	88.2	n/a	n/a	n/a
F	Treats / holidays **(N=611)**	5.6	8.0	23.1	63.3	n/a	n/a	n/a
G	Clothes and shoes **(N=615)**	3.5	6.9	14.9	74.7	n/a	n/a	n/a

Q90   **SHOWCARD 20.** How would your household be placed if you suddenly had to find a sum of money to meet an unexpected expense such as a repair or new washing machine? How much of a problem would it be if it was £20 ..? or £100? Or £1000?

		Impossible to Find	A big Problem	A bit of a Problem	No Problem	Don't know
A	£20 **(N=617)**	0.6	1.2	5.7	92.5	n/a
B	£100 **(N=610)**	2.1	8.1	23.4	66.4	n/a
C	£1,000 **(N=608)**	13.3	22.0	32.6	32.1	n/a

Q91   **SHOWCARD 21.** What proportion of your household income comes from state benefits? **SINGLE CODE (N=590)**

None	43.5	
Very little	24.2	
About a quarter	8.3	
About a half	9.0	**GO TO Q92**
About three quarters	3.6	
All	11.5	
Don't know	n/a	
Refused	n/a	

Q92   **SHOWCARD 22.** Thinking of the total income of your household, which face on the scale indicates how you feel about the adequacy of that income? **IF DON'T KNOW PLEASE ENTER 9 (N=606)**

WRITE NUMBER IN THE BOX: **GO TO Q93**

1	2	3	4	5	6	7
22.5	25.9	27.3	12.8	4.1	4.1	3.4

Q93   Outwith work, are you responsible for caring for someone on a day to day basis? – e.g. a disabled child, elderly person, etc. (Do not include 'ordinary' childcare.) **(N=628)**

Yes	5.8	**GO TO Q94**
No	94.2	**GO TO Q95**

Q94   On average, how many hours per day do you spend looking after this person(s)? **(N=34)**

WRITE NUMBER IN THE BOX: | mean | 10.76 | **GO TO Q95**

Q95   Do you, or any member of your household, own a car? **SINGLE CODE (N=628)**

Yes	79.0	
No	21.0	**GO TO Q96**

Q96   **SHOWCARD 23.** Can you tell me which of these descriptions applies to you? **SINGLE CODE (N=619)**

Married / civil partnership	59.6	
Cohabiting / living with partner	5.1	
Single / never married	21.7	
Widowed	8.9	**GO TO Q97**
Divorced / civil partnership dissolved	3.2	
Separated / civil partnership separated	1.5	
Refused	n/a	

Q97 **SHOWCARD 24.** Which of the groups on this card best describes you?
SINGLE CODE
* Gypsy/Travellers should be encouraged to record their ethnic group under 'Other White – specify' **(N=619)**

	White	
A	Scottish	95.2
B	Other British	3.2
C	Irish	0.2
D	Other White British	0.0
	Mixed	
E	Any mixed background	0.0
	Asian, Asian Scottish, Asian English, Asian Welsh or other Asian British	
F	Indian	0.0
G	Pakistani	0.3
H	Bangladeshi	0.0
I	Chinese	0.3
J	Any other Asian background	0.0
	Black, Black Scottish, Black English, Black Welsh or other Black British	
K	Caribbean	0.0
L	African	0.3
M	Any other Black background	0.0
	Other Ethnic background	
N	Any other background	0.6
	Refused	n/a

IF CODED '4', '5, '10', '13' OR '14' AT Q97 GO TO Q97A, ALL OTHERS GO TO Q98

Q97A Other ethnic group **– RECORD VERBATIM (3 Responses)**

                                                                    GO TO Q98

Q98 What religion, if any, do you identify with? **SINGLE CODE (N=612)**

None	26.4
Christianity, Church of Scotland	50.4
Christianity, Roman Catholic	19.9
Christianity, Other	2.2
Buddhism	0.5
Hinduism	0.0
Judaish	0.0
Islam	0.2
Sikhism	0.2
Refused	n/a
Other religion	0.1

IF CODED 'OTHER' AT Q98, GO TO Q98A, OTHERWISE GOT TO Q99.

Q98A   Other religion group – **RECORD VERBATIM (1 Responses)**

GO TO Q99

Q99   What month were you born in? **PROBE TO PRECODE (N=606)**

January	8.4	**GO TO Q100**
February	6.9	
March	11.4	
April	7.4	
May	8.1	
June	7.6	
July	9.5	
August	8.6	
September	8.2	
October	8.7	
November	6.9	
December	8.2	
Refused	n/a	

Q100   **SHOWCARD 25.** Have you experienced discrimination on any of the following grounds in the last twelve months? **CODE ALL THAT APPLY (N=628)**

Accent	0.6
Age	1.5
Disability	0.2
Ethnicity	0.6
Language	0.1
Nationality	0.9
Religion / faith / belief	0.3
Sex	1.2
Sexual orientation	0.0
Skin colour	0.5
None	94.4
Other	0.4

IF CODED 'OTHER' AT Q100 GO TO Q100A, OTHERWISE GO TO Q101

Q100a   Other (please specify) – **RECORD VERBATIM (2 responses)**

GO TO Q101

Q101   Do you consider yourself to be a migrant worker? **(N=628)**

Prompt: A migrant worker is someone who has come to Scotland over the past few years from outside the UK for the purpose of employment. This question is asked to allow the health service to improve understanding of the health needs of these new communities….it will be used for no other purposes

Yes	1.3	**GO TO Q102**
No	98.7	**GO TO Q103**

Q102   What is your country of origin? **SINGLE CODE (N=5)**

One of the new accession 10 countries (Poland, Lithuania, Estonia,
Latvia, Slovenia, Slovakia, Hungary, Czech Republic, Romania,   20.2
Bulgaria)

One of the other member states of the European Union (Austria,
Belgium, Cyprus, Denmark, Finland, Greece, Germany, Ireland, Italy,   **GO TO Q103**
Luxemberg, Malta, Netherlands, Portugal, Spain, Sweden)   34.6

A country from outside the European Union   45.2

Q103   NHSGG&C are keen to look at health and wellbeing of residents across the health
board area. For this reason, may I record your postcode? This will be passed with
responses to this questionnaire to NHSGG&C, and will only be used for planning and
monitoring health across the area.

Yes	1	**GO TO Q103A**
No	2	**GO TO Q104**

Q103a   What is your postcode? **PLEASE RECORD POSTCODE**

Q103b   Could you repeat that please, just to ensure I have recorded it correctly.
PLEASE RECORD POSTCODE

GO TO Q104

**IF Q103A DOES NOT EQUAL Q103B, DISPLAY VALUES ARE NOT THE SAME PLEASE
RE-ENTER**

Q104   May we have your permission to give NHS Greater Glasgow & Clyde or its partners
your name and address so they can contact you in the future about similar research
studies in relation to health? The partners are the Glasgow Centre for Population
Health and the community health partnerships. We would not give them any of your
answers to this interview – just your name and address. Should you agree, this follow-
up research could take the form of a self completion questionnaire, telephone or face
to face interview, over the course of the next 2 years.

Yes, permission given	1	**ENSURE PERMISSION SHEET SIGNED AND GO TO Q104A**
No, permission not given	2	**GO TO Q105**

Q105   When reviewing the results of the survey, it is possible that **mruk** research may want to recontact you to clarify one or two of your answers. Would you be happy for us to call you if necessary following our analysis stage (likely to be during next 4 months)? We would not take up more than 2 or 3 minutes of your time. Please note that should you agree your contact details will not be passed to our client (unless previous permission given) and will only be used for the purpose of recontacting you should any clarification be required.

Please also note that it is not definite that you will be contacted and your details will only be held for this purpose a maximum of 6 months.

Yes	1	
No	2	**GO TO Q106**

Q106   Please record how Q15 and Q16 were completed.
SINGLE CODE

Self completion	1
Read out for the respondent	2

Q104a   Record respondent details?
Name:

GO TO Q104B

You must enter the full name with whom the survey was completed.

Q104b   Record respondent details?
Address

GO TO Q104C

You must enter the full address

Q104c   Record respondent details?
Postcode:

GO TO Q104D

You must enter the full postcode

Q104d   Record respondent details?
Telephone Number

You must enter the telephone number.

THANK AND CLOSE
MAKE SURE POSTCODE IS COMPLETE & CORRECTLY RECORDED FROM SAMPLE FOR ALL RESPONDENTS WHO AGREE
HAND OUT "THANK YOU" LEAFLET