
**NHS Greater Glasgow and Clyde
2008 Health and Wellbeing Survey**

West Dunbartonshire Report

Final

Prepared for

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1 Introduction

1.1 Introduction

This report contains the findings for West 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.

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 experience of health and wellbeing in our most deprived communities¹ 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 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 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. Trends are available for the area administered by the former NHSGG area. All the reports will be posted on <http://www.phru.net> as they become available.

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

Allan Boyd
Norma Greenwood

Senior Analyst
Head of Public Health Resource Unit

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.

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

Nichola Brown	Glasgow South East, CHCP
Lara Calder	South Lanarkshire CHP (formerly)
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
Liz Holms	East Renfrewshire CHCP
Russell Jones	Glasgow Centre for Population Health
Irene Mackenzie	Corporate Inequalities Team
Kathleen McGill	East Dunbartonshire CHP
Clare McGinley	West Dunbartonshire CHP
Karen McNiven	Glasgow South West CHCP
David Radford	East Dunbartonshire CHP
Uzma Rehman	Glasgow West CHCP
Janice Scouller	Glasgow East CHCP (formerly)
John Thomson	Glasgow North, CHCP
Greg Usrey	Glasgow South West CHCP (formerly)
Clare Walker	Renfrewshire CHP
Helen Watson	Inverclyde CHP

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 NHSGGC 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 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 589 interviews conducted in West 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 589 West 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: 589

Age	Men (% of sample)	Women (% of sample)	Total (% of sample)	West Dunbartonshire % of population (aged 16+)
16-24	8.0%	7.1%	15.1%	15.2%
25-34	7.0%	7.4%	14.4%	14.2%
35-44	8.5%	9.4%	17.9%	17.9%
45-54	8.7%	9.5%	18.2%	18.1%
55-64	7.2%	7.7%	14.9%	15.0%
65-74	4.6%	5.8%	10.4%	10.5%
75+	3.1%	6.0%	9.0%	9.1%

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.

Table 1.2: Most Deprived 15% Datazones Versus Other Datazones

Base: All (589)

Group	% in sample	West Dunbartonshire % of population (aged 16+)
Most deprived 15% datazones	27.4%	27.0%
Other datazones	72.6%	73.0%

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 West Dunbartonshire compared to the NHSGGC area as a whole.

Chapter 8 provides information on trends across the last three health and wellbeing surveys in West 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 (West Dunbartonshire)

Indicator	% of sample	Unweighted base (n)
Self-perceived health excellent or good (Q1)	75.9%	573
Positive perception of general physical wellbeing (Q53b)	80.7%	589
Positive perception of general mental or emotional wellbeing (Q53c)	90.1%	589
Positive perception of happiness (Q77)	90.6%	589
Feel definitely in control of decisions affecting daily life (Q78)	62.2%	578
Positive perception of quality of life (Q53a)	89.5%	589
Has long term illness/condition that interferes with daily life (Q3)	17.2%	552
Receiving treatment for at least one condition (Q2)	32.1%	580
Total number of conditions receiving treatment for (Q2):		
0	67.9%	580
1	25.6%	
2 or more	6.4%	
GHQ12 score of 4 or above (indicating poor mental health) (Q15)	13.1%	589
Have some/all of own teeth (Q12)	86.5%	589
Brushes teeth twice or more per day – based on those with some/all of own teeth	73.9%	451

Three in four (76%) respondents had a positive view of their general health. Those aged 65 or over were less likely to have a positive view of their general health.

Four in five (81%) had a positive view of their physical wellbeing. Those aged 45 or over were less likely to do so.

Nine in ten (90%) had a positive perception of their mental or emotional wellbeing and 91% had a positive perception of their happiness.

Three in five (62%) definitely felt in control of the decisions affecting their life.

Nine in ten (89%) had a positive perception of their quality of life. Those aged 65 or over were the least likely to do so.

One in six (17%) respondents had a long-term limiting condition or illness. Those aged 65 or over were the most likely to have a limiting condition/illness.

A third (32%) of respondents were receiving treatment for at least one illness or condition. Those aged 65 or over and women were more likely to be in receipt of treatment.

One in eight (13%) respondents had a GHQ12 score of four or more, indicating poor mental health. Those aged 65 or over were the most likely to have a high GHQ12 score.

Just under nine in ten (87%) had all or some of their natural teeth. Those aged 65 or over were least likely to have any of their natural teeth.

Three in four (74%) of those who had any of their natural teeth brushed their teeth at least twice per day. Those aged 65 or over and men were less likely to do so.

2.2 Self-Perceived Health and Wellbeing

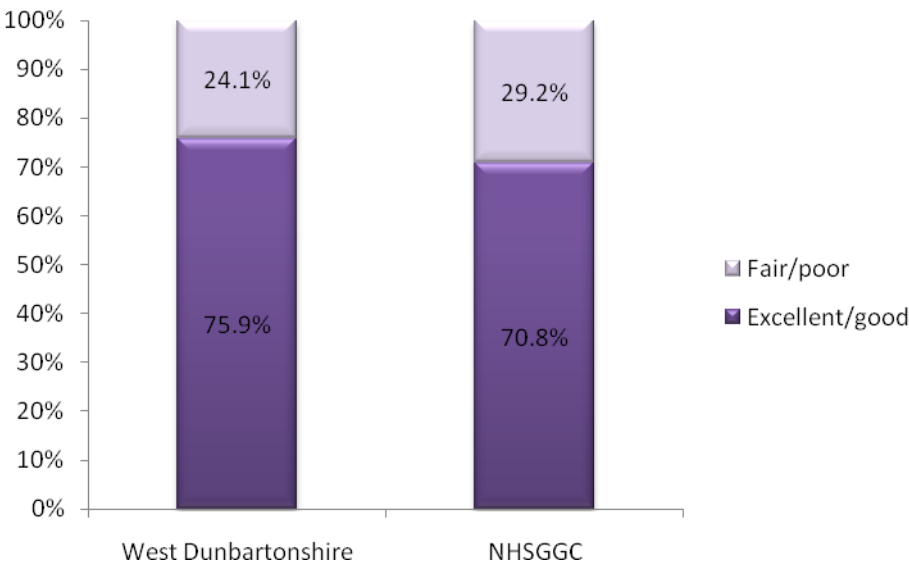
General Health

Respondents were asked to describe their general health over the last year on a four point scale (excellent, good, fair or poor). Overall, three in four (76%) gave a positive view of their health, with 14% saying their health was excellent and 62% saying their health was good. However, 24% gave a negative view of their health, with 16% saying their health was fair and 8% saying it was poor.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to have a positive perception of their general health (76% West Dunbartonshire; 71% NHSGGC)

Figure 2.1: Self-Perceived General Health: West Dunbartonshire and NHSGGC



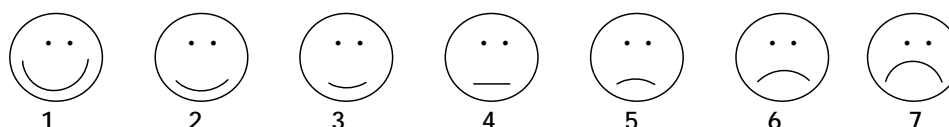
As Table 2.2 shows, those aged 65 or over were less likely to have positive views of their general health, and those aged under 45 were the most likely to do so.

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

	Excellent	Good	Fair	Poor	Excellent/ Good	Fair/ Poor	Unweighted base (n)
Age:							
16-44	23%	64%	11%	2%	88%	12%	204
45-64	8%	61%	18%	3%	69%	31%	169
65+	1%	59%	24%	16%	60%	40%	199
All	14%	62%	16%	8%	76%	24%	573

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 (81%) 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.

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

	Positive Perception	Unweighted base (n)
Age:		
16-44	90%	211
45-64	73%	173
65+	72%	204
All	81%	589

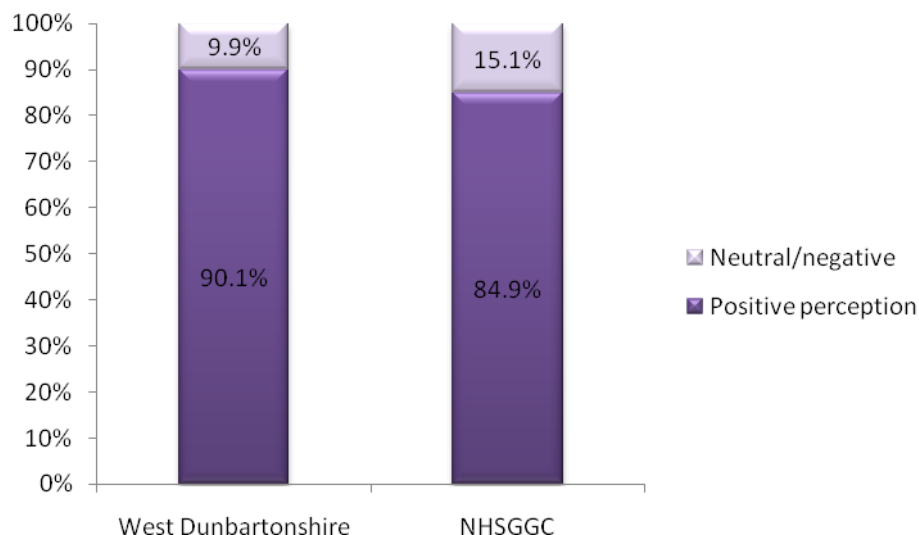
Mental or Emotional Wellbeing and Happiness

Using the 'faces' scale, nine in ten (90%) respondents gave a positive view of their mental or emotional wellbeing.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to have a positive view of their mental or emotional wellbeing.

Figure 2.2: Perceptions of Mental and Emotional Wellbeing: West Dunbartonshire and NHSGGC

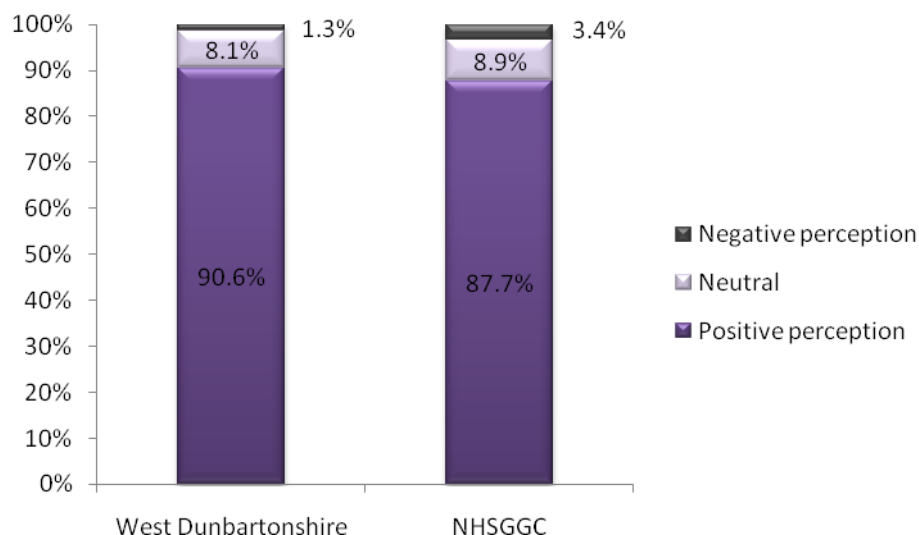


Respondents were also asked to use the 'faces' scale to indicate how happy they are, taking everything into account. Nine in ten (91%) respondents gave a positive view of their happiness.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to have a positive perception of their happiness (91% West Dunbartonshire; 88% NHSGGC).

Figure 2.3: Perceptions of Happiness: West Dunbartonshire and NHSGGC



Feeling in Control of Decisions Affecting Life

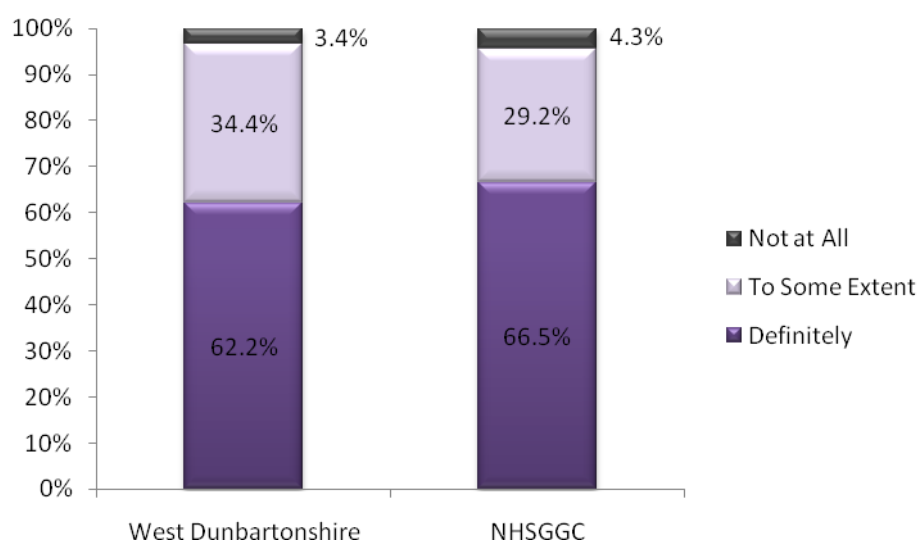
Respondents were asked whether they feel in control of decisions that affect their life, such as planning their budget, moving house or changing job. Three in five (62%) said that

they 'definitely' feel in control of these decisions, while 34% said that they felt in control 'to some extent' and 3% did not feel in control of these decisions.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to definitely feel in control of the decisions affecting their life.

Figure 2.4: Whether Feel in Control of Decisions Affecting Life: West Dunbartonshire and NHSGGC



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.

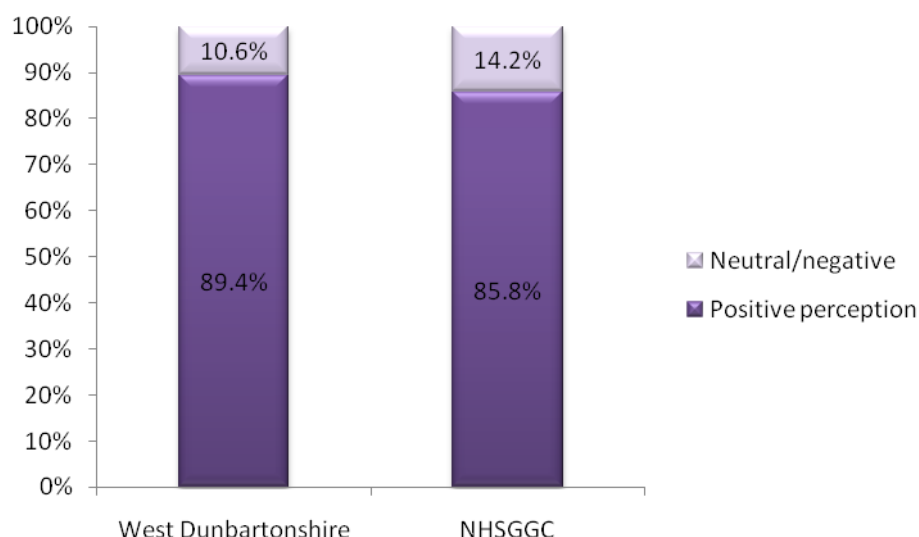
2.3 Self Perceived Quality of Life

Using the 'faces' scale, respondents were asked to rate their overall quality of life. Overall, 89% of respondents gave a positive rating of their quality of life.

Comparison with NHS Greater Glasgow & Clyde

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to have a positive rating of their quality of life (89% West Dunbartonshire; 86% NHSGGC).

Figure 2.5: Perceptions of Quality of Life: West Dunbartonshire and NHSGGC



Those aged under 45 were the most likely to have a positive perception of their quality of life and those aged 65 or over were the least likely.

Table 2.4: Positive Perception of Quality of Life (Q53a) by Age

	Positive Perception	Unweighted base (n)
Age:		
16-44	94%	211
45-64	87%	173
65+	83%	204
All	89%	589

2.4 Illness

One in six (17%) 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 7% of those aged 16-44 to 32% 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	7%	211
45-64	24%	173
65+	32%	204
All	17%	552

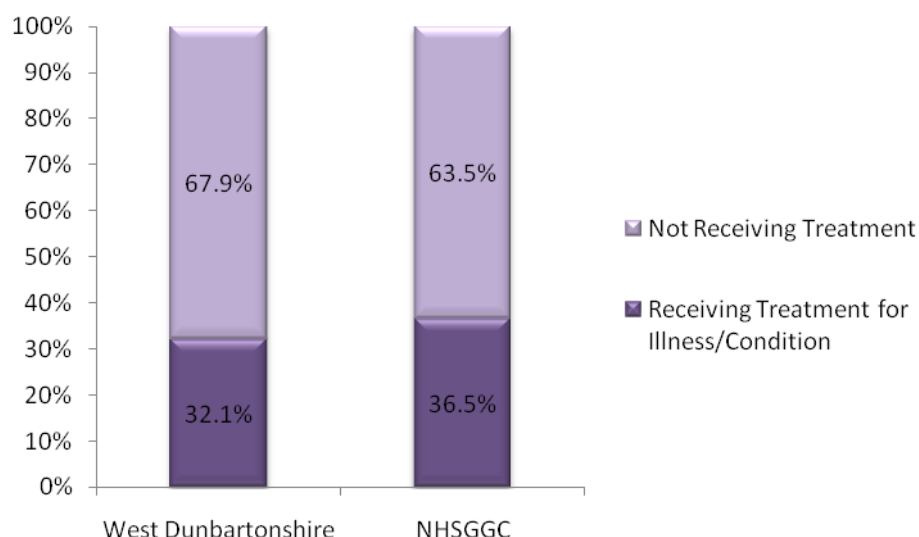
Illnesses/Conditions for Which Treatment is Being Received

A third (32%) of respondents 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 West Dunbartonshire were less likely to be receiving treatment for an illness or condition.

Figure 2.6: Whether Have at Least one Illness/Condition Being Treated: West Dunbartonshire and NHSGGC



The likelihood of being in receipt of treatment for at least one illness/condition rose with age – from 10% 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.

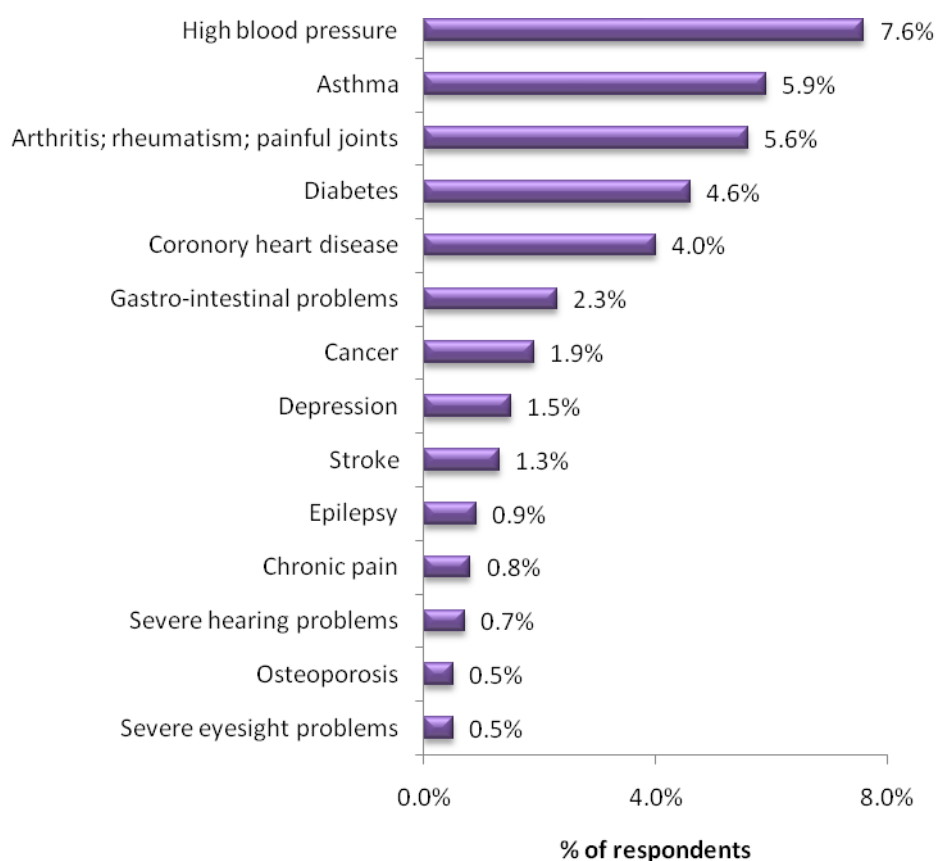
Table 2.6: At Least One Illness/Condition Being Treated (Q2) by Age and Gender

	Being Treated for Condition/Illness	Unweighted base (n)
Age:		
16-44	10%	209
45-64	39%	169
65+	74%	201
Men	26%	244
Women	37%	336
All	32%	580

Figure 2.7 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 arthritis/rheumatism/painful joints, for which 10% of respondents were being treated. Also, 8% of respondents were being treated for high blood pressure.

Figure 2.7: Conditions/Illnesses for Which Treatment is Being Received (Q2)



Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to be receiving treatment for:

- Arthritis/rheumatism/painful joints (5.6% West Dunbartonshire; 10.7% NHSGGC);
- Depression (1.5% West Dunbartonshire; 3.4% NHSGGC);
- Chronic pain (0.8% West Dunbartonshire; 3.2% NHSGGC);
- Osteoporosis (0.5% West Dunbartonshire; 1.7% NHSGGC); and
- Stress related conditions (0.2% West Dunbartonshire; 3.0% NHSGGC).

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, 13% of respondents had a GHQ12 score of four or more, indicating poor mental health.

Those aged 65 or over were the most likely to have a high GHQ12 score and those aged under 45 were the least likely.

Table 2.7: High GHQ12 Score (Q15) by Age

	GHQ12 score of 4 or more	Unweighted base (n)
Age:		
16-44	10%	211
45-64	14%	173
65+	20%	204
All	13%	589

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 West Dunbartonshire was 46.1.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire had lower mean WEMWBS scores than those in the NHS Greater Glasgow and Clyde area as a whole (46.1 West Dunbartonshire; 50.4 NHSGGC).

Those under the age of 45 tended to have higher WEMWBS scores, indicating better mental wellbeing. Those aged 65 or over tended to have the lowest WEMWBS scores. Men tended to have higher WEMWBS scores than women.

Table 2.8: Mean WEMWBS Score (Q16) by Age and Gender

	Mean WEMWBS Score	Unweighted base (n)
Age:		
16-44	48.3	211
45-64	45.0	173
65+	42.7	204
Men	47.0	247
Women	45.3	342
All	46.1	589

2.6 Oral Health

Proportion of Own Teeth

Respondents were asked what proportion of their teeth were their own. Just under nine in ten (87%) respondents said that they had all (49%) or some (38%) of their own teeth, while 13% 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 not yet being met in West Dunbartonshire, with 8% of 45-54 year olds having no natural teeth.

The proportion who had all or some of their natural teeth ranged from 50% of those aged 65 or over to 99% of those aged under 45.

Table 2.9: Proportion of Own Teeth (Q12) by Age

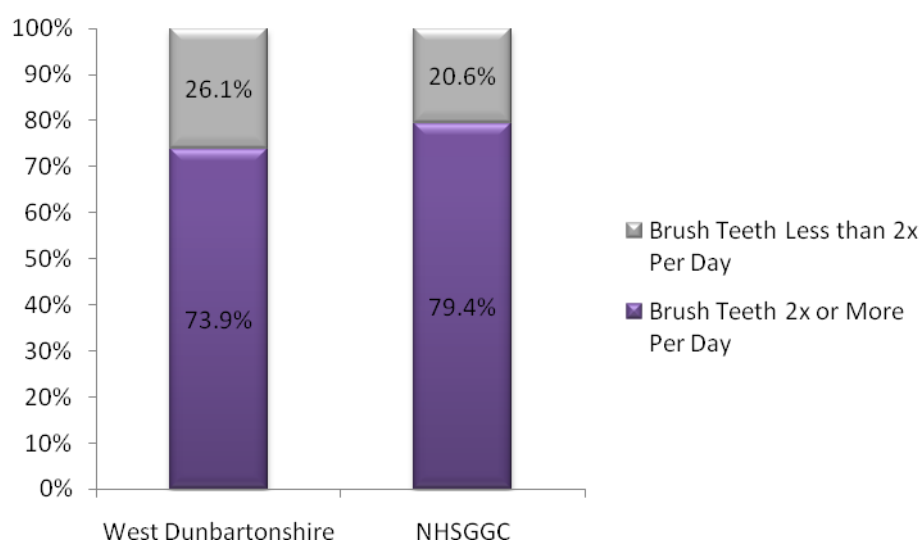
	All	Some	None	All/some	Unweighted base (n)
Age:					
16-44	82%	17%	1%	99%	211
45-64	26%	63%	11%	89%	173
65+	7%	43%	50%	50%	204
All	49%	38%	13%	87%	589

Frequency of Brushing Teeth

Those with at least some of their own teeth were asked how often they brushed their teeth. In total 74% said they brushed their teeth at least twice a day.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to brush their teeth twice or more per day (74% West Dunbartonshire; 79% NHSGGC).

Figure 2.8: Frequency Brush Teeth: West Dunbartonshire and NHSGGC

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 2.10.

Table 2.10: 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	81%	209
45-64	67%	153
65+	58%	88
Men	68%	187
Women	80%	264
All	74%	451

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)	74.1%	576
Outpatient to see doctor at least once in last year (Q7d)	21.7%	588
Accident and emergency at least once in last year (Q7c)	5.0%	588
Hospital stay in last year (q7e)	13.3%	588
Seen Pharmacist for health advice in last year (Q7a)	5.4%	589
Contacted NHS24 in last year (Q7b)	9.4%	588
Used GP out of hours service (GEMS) in last year (q7f)	2.9%	588
Been to the dentist within past six months (Q11)	63.1%	404
Registered with a dentist (Q9)	67.0%	573
Difficulty reaching hospital for an appointment (Q14d)	4.1%	555
Difficulty getting GP appointment (Q14a)	10.8%	581
Difficulty getting hospital appointment (Q14c)	4.8%	491
Difficulty getting GP consultation within 48 hours (Q14f)	4.0%	517
Difficulty accessing health services in an emergency (Q14b)	4.3%	532
Difficulty getting dentist appointment (Q14e)	2.9%	363
Someone in home suffered accidental injury in last year (Q17)	3.6%	589

Three in four (74%) respondents had seen a GP in the last year. Those aged 65 or over and women were more likely to have done so.

One in five (22%) had visited hospital as an outpatient to see a doctor in the last year; 5% had visited accident and emergency; 13% had been admitted to hospital; 5% had visited a pharmacist for health advice; 9% had contacted NHS 24 and 3% had used the GP out of hours service.

Three in five (63%) respondents had been to the dentist within the last six months.

Two in three (67%) respondents were registered with a dentist. Those aged 65 or over and men were less likely to be registered.

One in 25 (4%) had difficulty reaching hospital for an appointment; 11% had difficulty getting a GP appointment and 5% had difficulty getting a hospital appointment.

One in 25 (4%) had difficulty getting a GP consultation within 48 hours when needed. Women were more likely than men to find this difficult.

One in 25 (4%) had difficulty accessing health services in an emergency. Those aged 45-64 were the most likely to find this difficult.

One in 35 (3%) had difficulty getting a dentist appointment. Women were more likely than men to do so.

One in 28 (4%) 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)

Three in four (74%) respondents had seen a GP at least once in the last year. Of those who had visited a GP, half (51%) had visited the GP either once (22%) or twice (29%) in the last year. The mean number of GP visits was 3.78.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to have seen a GP in the last year.

Figure 3.1: Whether Seen a GP in the Last Year: West Dunbartonshire and NHSGGC

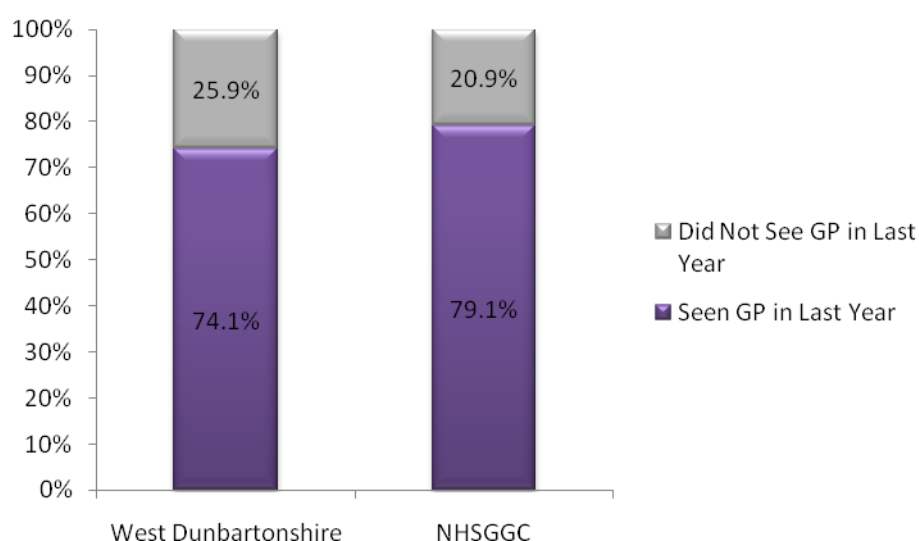


Table 3.2 shows that those aged 65 or over were more likely to have seen a GP in the last year. Women were more likely than men to have seen a GP in the last year.

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

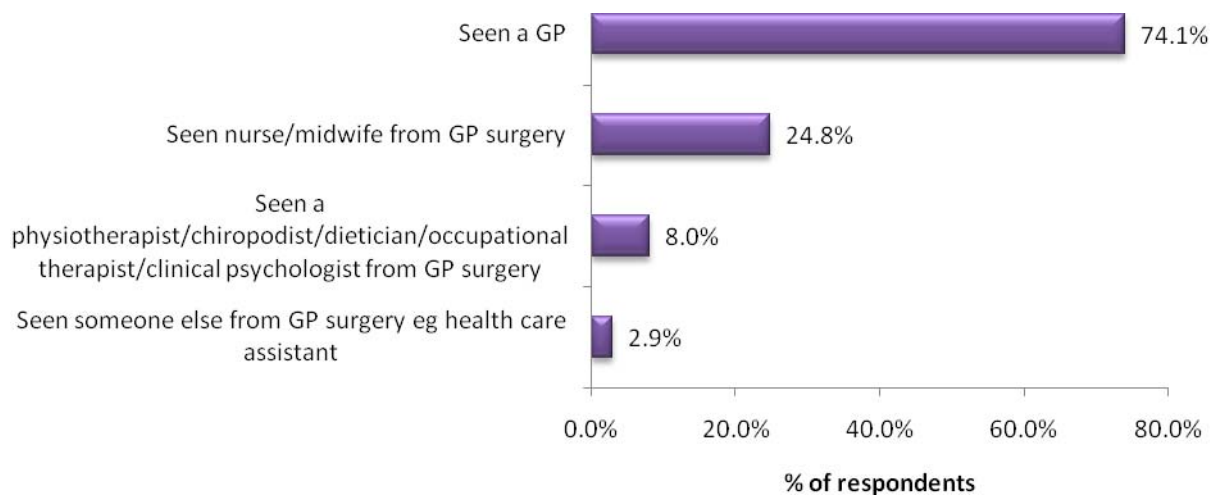
	% seen GP at least once	Unweighted base (n)
Age:		
16-44	67%	211
45-64	74%	171
65+	91%	193
Men	63%	245
Women	84%	331
All	74%	576

Other Uses of GP Surgery

Figure 3.2 shows the extent of other uses of GP surgeries in the last year. In addition to the 74% of respondents who had seen a GP in the last year, 25% had seen a nurse or midwife from the GP surgery (mean number of visits was 3.86) and 8% had seen staff such as physiotherapist, chiropodist, dietician, occupational therapist or clinical psychologist

(mean number of visits was 1.96). Also, 3% had seen some other type of staff at a GP surgery (mean number of visits was 2.24).

Figure 3.2: Seen Specific GP Practice Staff in Last Year (Q6)



Outpatients

One in five (22%) 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 2.33.

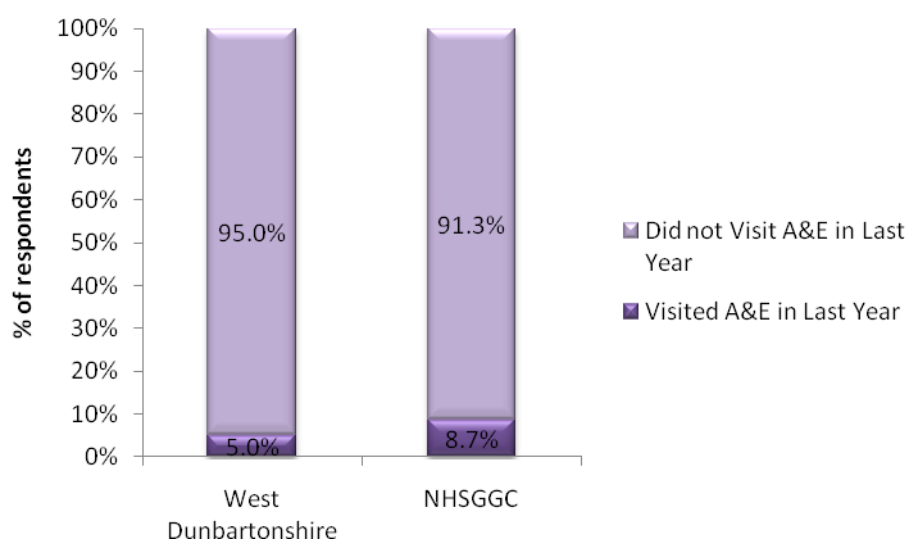
Accident and Emergency

One in 20 (5%) respondents had been to accident and emergency in the last year. Of those who had visited accident and emergency, 77% had been once in the last year and the mean number of visits was 1.23.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less 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: West Dunbartonshire and NHSGGC



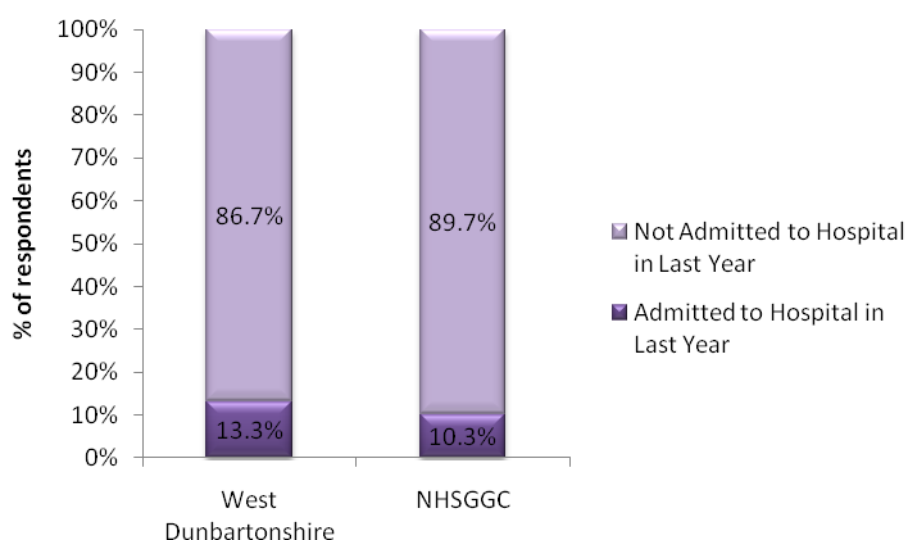
Hospital Admissions

One in eight (13%) respondents had been admitted to hospital at least once in the last year. Of those who had been admitted to hospital, 71% had been admitted once in the last year, and the mean number of admissions was 1.50.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to have been admitted to hospital in the last year (13% West Dunbartonshire; 10% NHSGGC).

Figure 3.4: Admitted to Hospital in the Last Year: West Dunbartonshire and NHSGGC



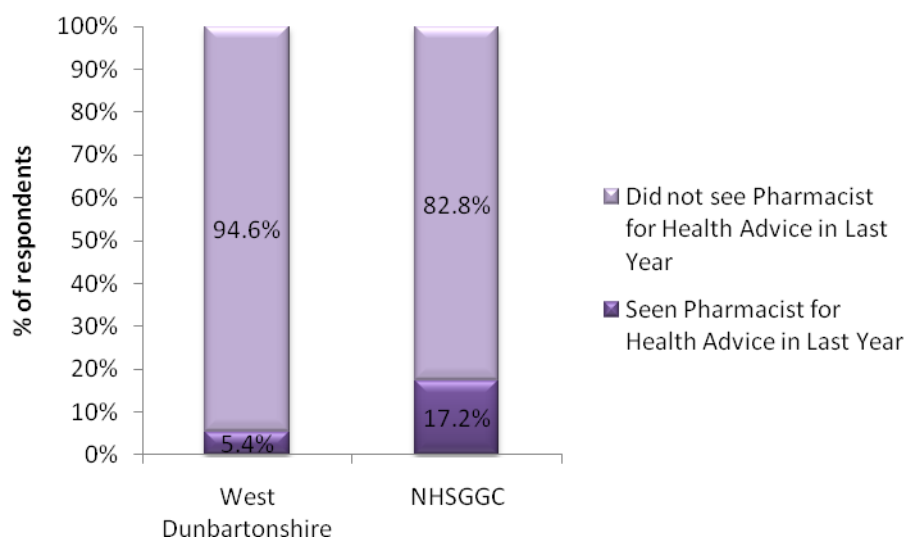
Use of Pharmacy for Health Advice

One in 19 (5%) 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 1.78.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to have visited a pharmacist for health advice in the last year (5% West Dunbartonshire; 17% NHSGGC).

Figure 3.5: Seen Pharmacist of Health Advice in Last Year: West Dunbartonshire and NHSGGC



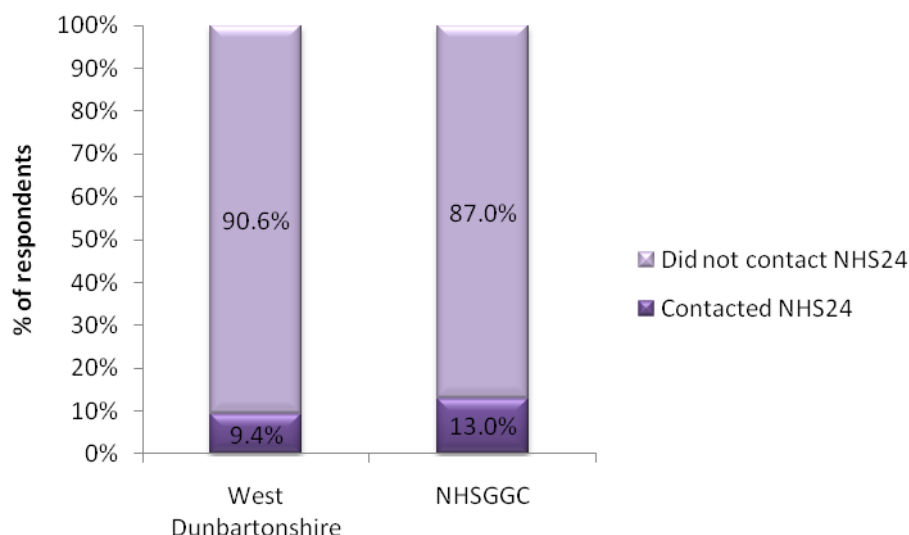
Contacting NHS24

One in 11 (9%) respondents had contacted NHS24 at least once in the last year. Of those who had contacted NHS24, 64% had done so just once, and the mean number of contacts was 1.67.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to have contacted NHS24 in the last year.

Figure 3.6: Contacted NHS24 in the Last Year: West Dunbartonshire and NHSGGC



Use of GP Out of Hours Service

A small proportion (3%) 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 1.38.

3.3 Dental Services

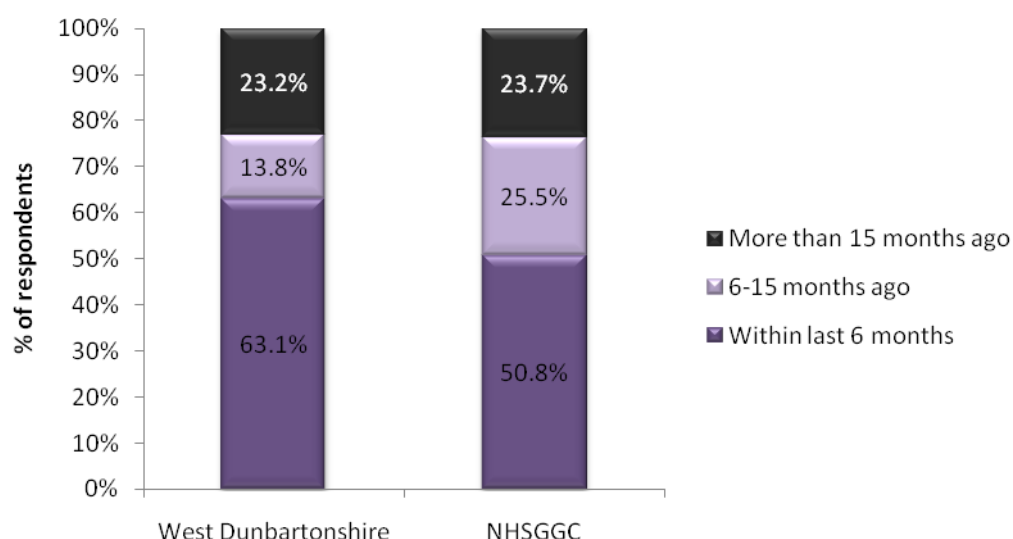
Frequency of Visits to the Dentist

Of those who were able to say when they last visited the dentist, 63% said that they had visited the dentist within the last six months, 14% had visited the dentist between six and 15 months ago, and 23% had last visited the dentist over 15 months ago.

Comparison with NHS Greater Glasgow & Clyde Area

As Figure 3.7 shows, those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to have visited the dentist within the last six months.

Figure 3.7: When Last Visited Dentist: West Dunbartonshire and NHSGGC



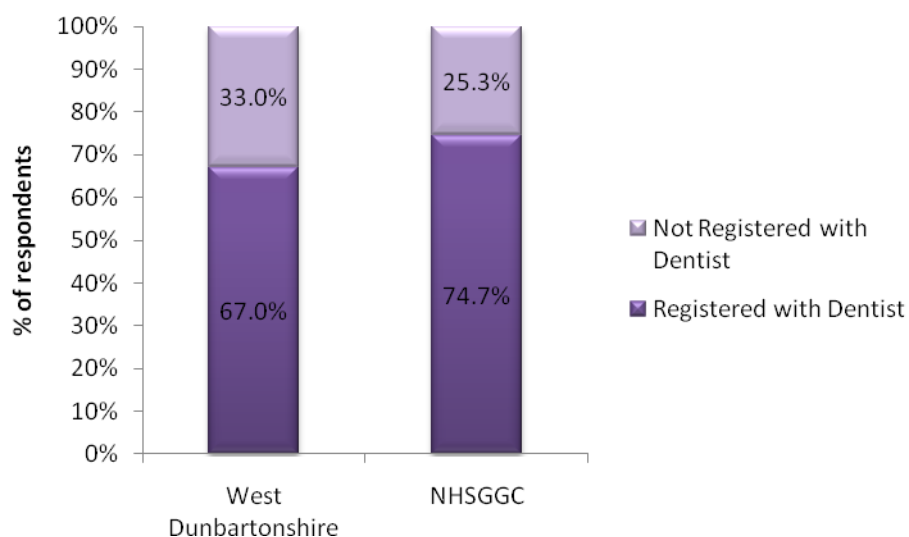
Registration with a Dentist

Two in three (67%) respondents said they were registered with a dentist. Of those who were registered with a dentist, 90% received NHS treatment while 10% received private treatment.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHS Greater Glasgow and Clyde area as a whole to be registered with a dentist (67% West Dunbartonshire; 75% NHSGGC).

Figure 3.8: Whether Registered with a Dentist: West 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 3.3.

Table 3.3: Registered with a Dentist (Q9) by Age and Gender

	Registered with a dentist	Unweighted base (n)
Age:		
16-44	74%	209
45-64	71%	167
65+	43%	196
Men	61%	240
Women	72%	333
All	67%	573

3.4 Involvement in Decisions Affecting Health Service Delivery

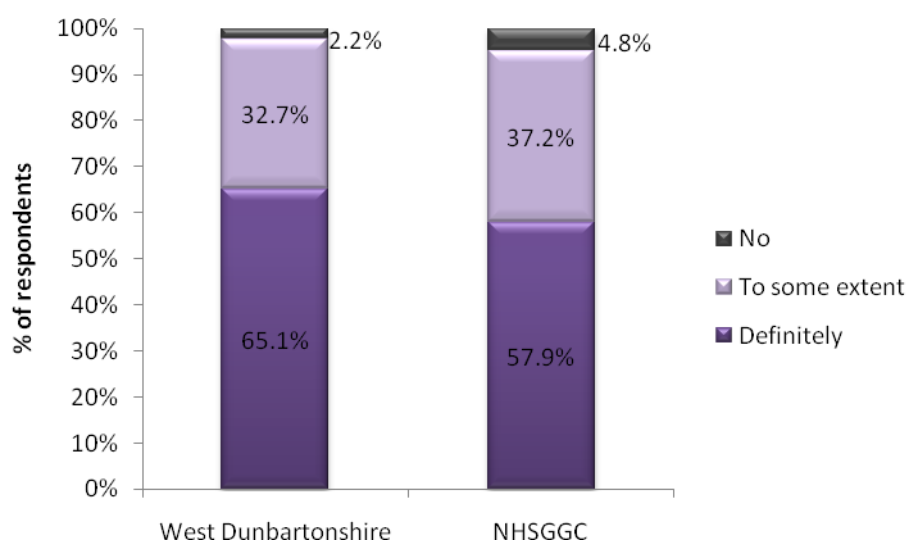
Information about Condition or Treatment

Of those who had accessed any health services over the last year, 65% felt that they had 'definitely' been given adequate information about their condition or treatment, 33% felt that they had 'to some extent', and 2% felt that they had not.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West 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 3.9.

Figure 3.9: Whether Given Adequate Information about Condition or Treatment: West Dunbartonshire and NHSGGC



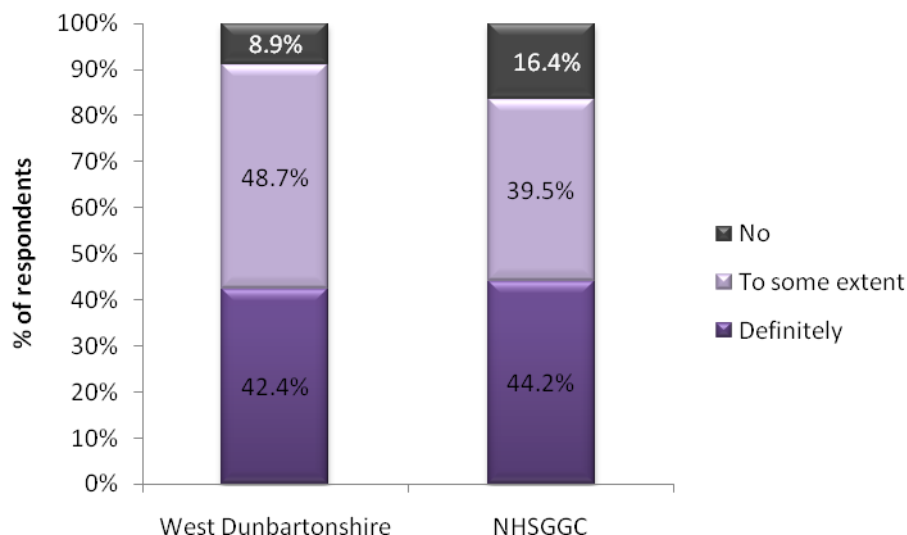
Encouragement to Participate in Decisions Affecting Health or Treatment

Nine in ten (91%) 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 (42%) or to some extent (49%).

Comparison with NHS Greater Glasgow & Clyde Area

Figure 3.10 shows that those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to feel that they were encouraged to participate in decisions affecting their health or treatment, at least to some extent.

Figure 3.10: Whether Encouraged to Participate in Decisions Affecting Health or Treatment: West Dunbartonshire and NHSGGC



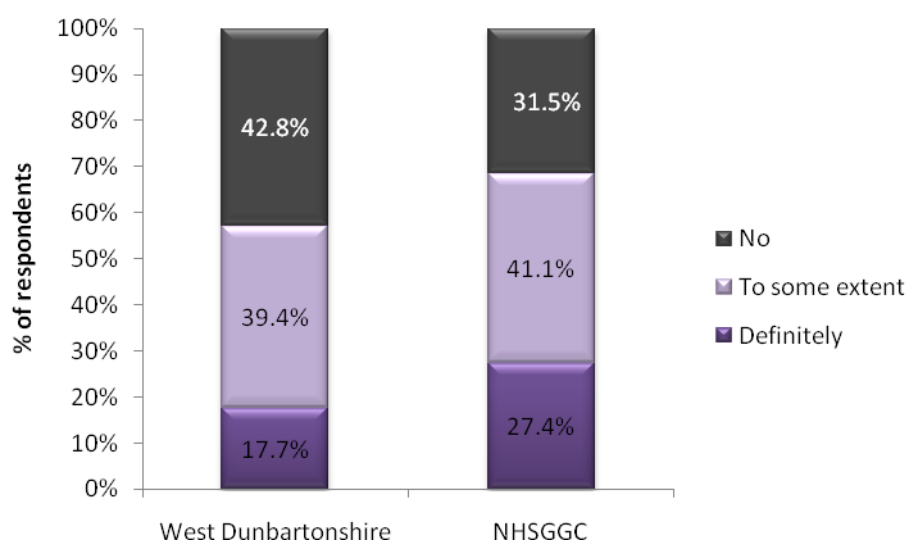
Having a Say in How Health Services are Delivered

Three in five (57%) 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 (18%) or to some extent (39%).

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to feel that they had a say in how health services are delivered.

Figure 3.11: Have a Say in How Health Services are Delivered: West Dunbartonshire and NHSGGC



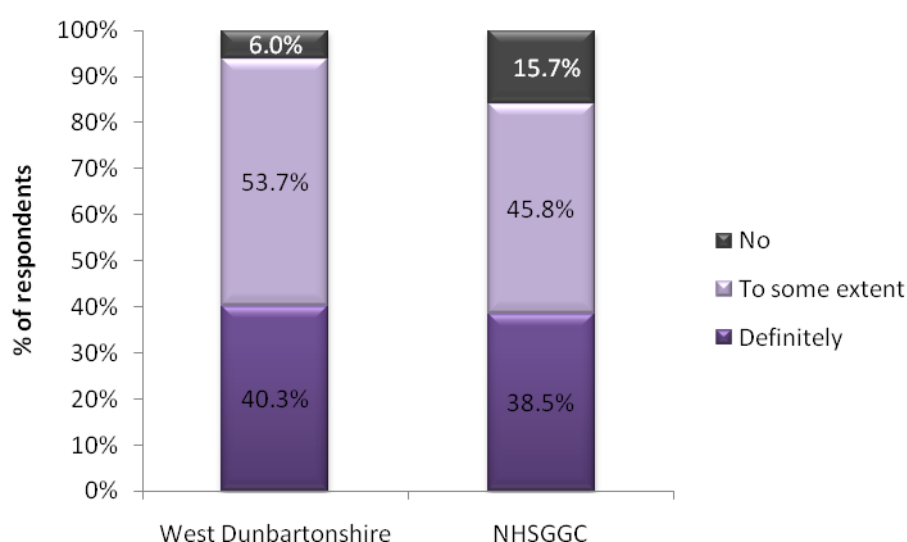
Feel that Views and Circumstances are Understood and Valued

Of those who had used health services in the last year, 94% felt that their views and circumstances were understood and valued, either definitely (40%) or to some extent (54%).

Comparison with NHS Greater Glasgow & Clyde Area

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

Figure 3.12: Whether Feel that Views and Circumstances are Understood and Valued: West 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'.

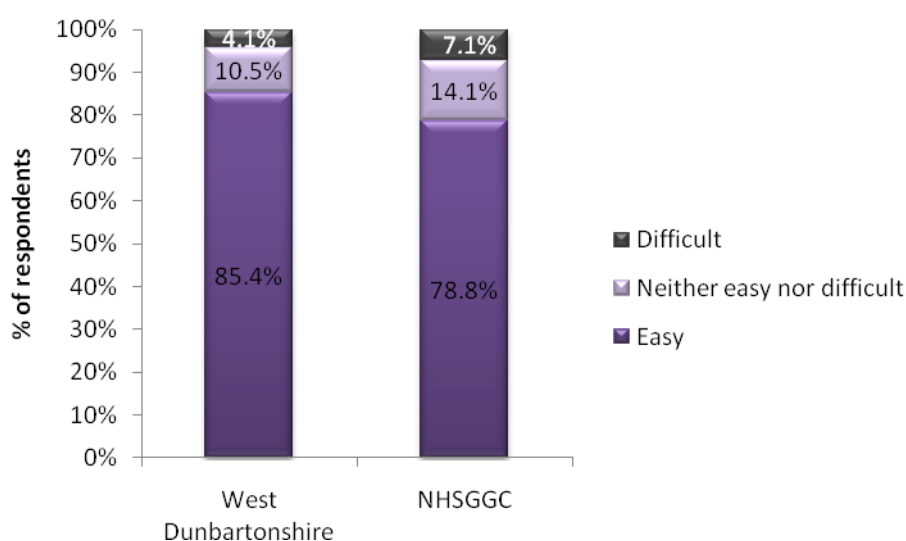
Traveling to Hospital for an Appointment

In total, 85% of respondents indicated that they found it easy to travel to hospital for an appointment, while 11% found it neither difficult nor easy and 4% found it difficult.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West 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 3.13: Difficulty/Ease of Traveling to Hospital for an Appointment: West Dunbartonshire and NHSGGC



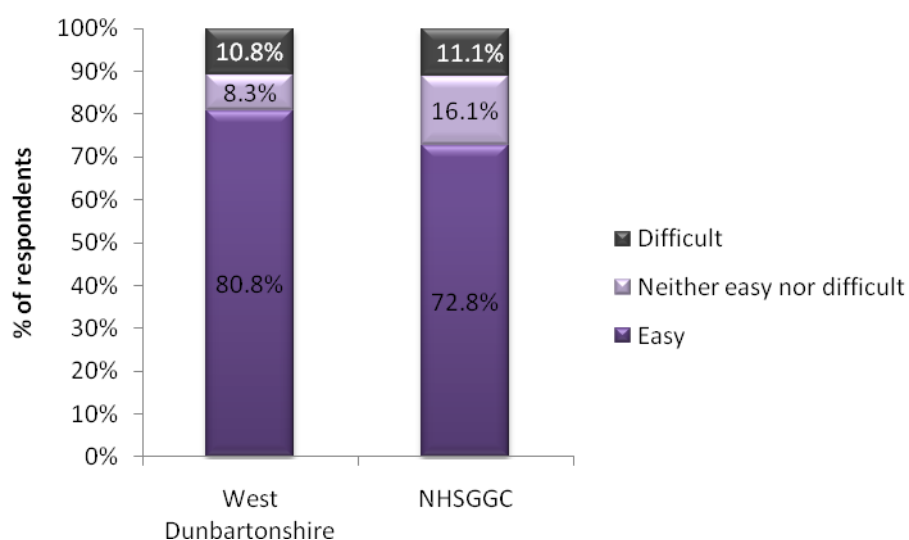
Getting a GP appointment

One in nine (11%) respondents said that it was difficult to obtain an appointment to see their GP, 8% said that it was neither easy nor difficult and 81% said that it was easy.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHSGGC area as a whole, those in West Dunbartonshire were more likely to find it easy to get a GP appointment.

Figure 3.14: Difficulty/Ease of Getting Appointment to see GP: West Dunbartonshire and NHSGGC



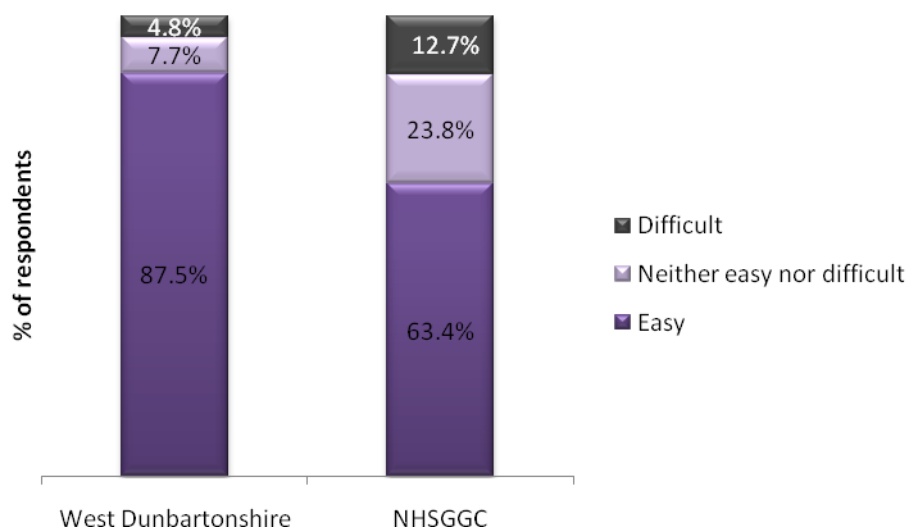
Obtaining an Appointment at the Hospital

One in 20 (5%) respondents said that it was difficult to obtain a hospital appointment, 8% said that it was neither easy nor difficult and 87% said that it was easy.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to say it was easy to obtain a hospital appointment (87% West Dunbartonshire; 63% NHSGGC).

Figure 3.15: Difficulty/Ease of Getting Appointment at the Hospital: West Dunbartonshire and NHSGGC



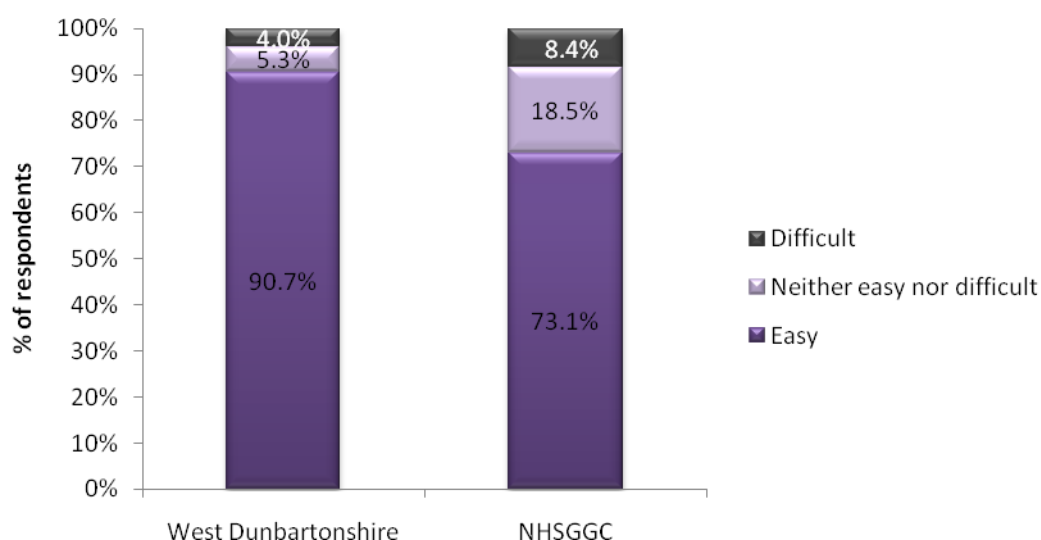
Getting a Consultation at GP Surgery within 48 Hours

Respondents were asked how easy or difficult it was to get a consultation with someone at their GP surgery within 48 hours when needed. Nine in ten (91%) said that it was easy, 5% said that it was neither easy nor difficult and 4% 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 West Dunbartonshire were more likely to say that it was easy to get a consultation with a GP within 48 hours when needed.

Figure 3.16: Difficulty/Ease of Getting a Consultation at GP Surgery within 48 Hours: West Dunbartonshire and NHSGGC



Men were more likely than women to say that it was easy to get consultation at their GP surgery within 48 hours.

Table 3.4: Difficulty/Ease of Getting a Consultation at GP Surgery within 48 Hours by Gender

	Difficult	Neither/nor	Easy	Unweighted base (n)
Men	3%	2%	95%	223
Women	5%	8%	86%	294
All	4%	5%	91%	517

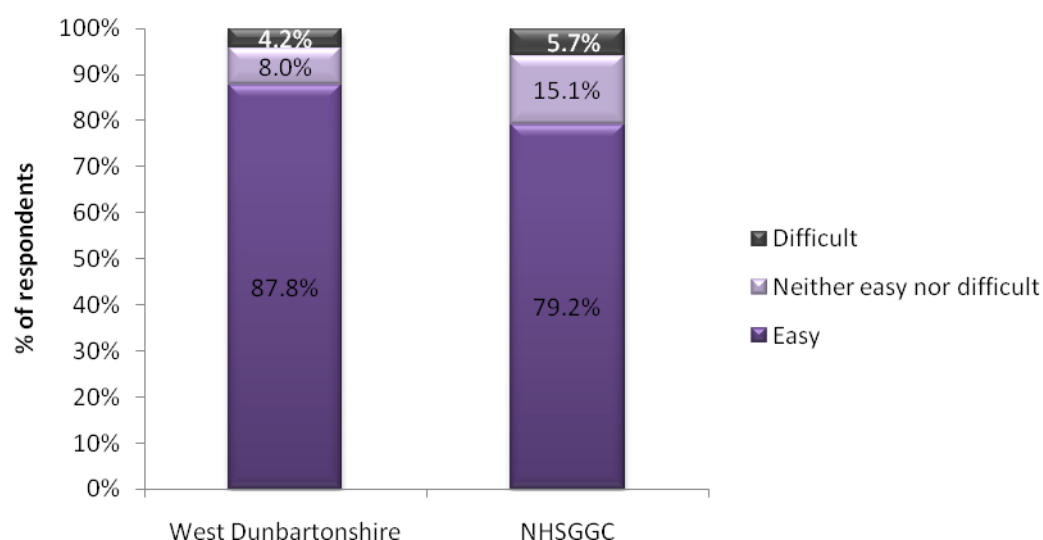
Accessing Health Services in an Emergency

One in 25 (4%) said it was difficult to access health services in an emergency; 8% said it was neither easy nor difficult and 88% said it was easy.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West 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 3.17: Difficulty/Ease of Accessing Health Services in an Emergency: West Dunbartonshire and NHSGGC



Those aged 45-64 were the most likely to say that it was difficult to access health services in an emergency.

Table 3.5: Difficulty/Ease of Accessing Health Services in an Emergency by Age

	Difficult	Neither/nor	Easy	Unweighted base (n)
Age:				
16-44	3%	8%	90%	192
45-64	9%	10%	81%	152
65+	1%	5%	94%	187
All	4%	8%	88%	532

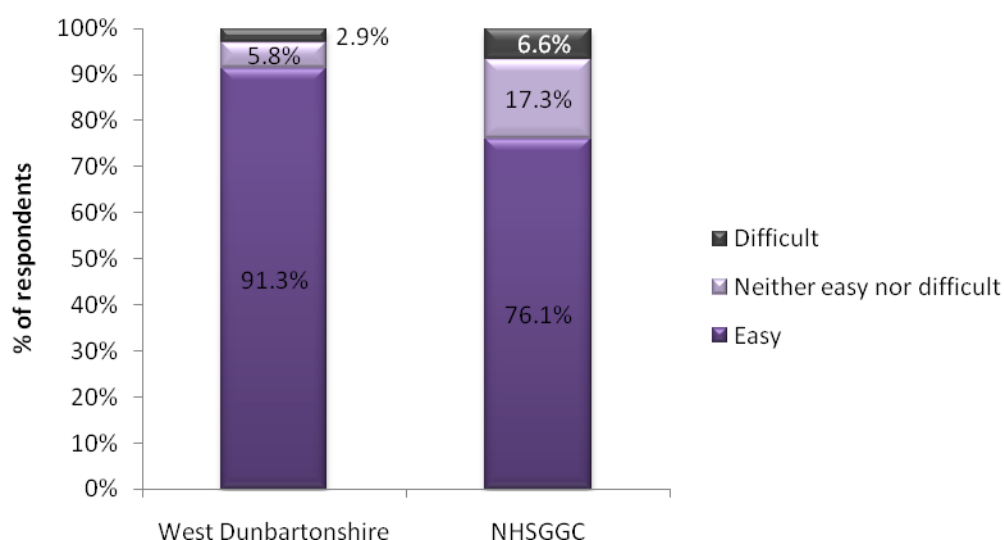
Getting an Appointment to See the Dentist

Nine in ten (91%) respondents said that it was easy to get an appointment to see the dentist, while 6% said that it was neither easy nor difficult and 3% said that it was difficult.

Comparison with NHS Greater Glasgow & Clyde Area

Respondents in West 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 3.18.

Figure 3.18: Difficulty/Ease of Getting an Appointment to See the Dentist: West Dunbartonshire and NHSGGC



Women were more likely than men to find it difficult to get a dentist appointment, as shown in Table 3.6.

Table 3.6: Difficulty/Ease of Getting a Dentist Appointment by Gender

	Difficult	Neither/nor	Easy	Unweighted base (n)
Men	1%	5%	95%	137
Women	5%	7%	89%	226
All	3%	6%	91%	363

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 28 (4%) said that this had happened in the last year.

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)	38.7%	589
Current smoker (Q22)	34.2%	589
Heavily addicted smoker (smoking 20 or more cigarettes per day), based on all smokers	37.0%	189
Exceeds recommended limits for weekly units of alcohol (based on all respondents) (Q29)	9.5%	567
Exceeds recommended limits for weekly units of alcohol (based on all those who drank at all in the past week) (Q29)	32.4%	158
Binge drinker in the past week (based on all respondents) (Q29)	16.5%	568
Binge drinker in the past week (based on all those who drank at all in the past week) (Q29)	55.4%	159
Takes at least 30 minutes of moderate exercise 5 or more times per week OR takes at least 20 minutes of vigorous exercise 3 or more times per week (Q43-Q47)	66.9%	589
Participated in at least one sport in the last week (Q48 & Q49)	49.0%	513
Consumes 5 or more portions of fruit/vegetables per day (Q32 & Q33)	47.5%	586
Consumes breakfast every day (Q38)	76.6%	581
Consumes at least 2 portions of oily fish per week (Q36)	27.5%	589
Consumes at least 2 portions of high fat snacks per day (Q34)	25.8%	585
Consumes at least 5 slices of bread per day (Q35)	4.4%	585
Eat takeaway food every week (Q37)	14.0%	589
Body Mass Index of 25 or over (Q41 & Q42)	42.3%	528
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	52.2%	506
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	93.6%	465

Two in five (39%) respondents were exposed to second hand smoke most or some of the time. Those aged 45-64 were the most likely to be exposed to second hand smoke.

A third (34%) of respondents were smokers. Those aged 45-64 were the most likely to be smokers.

Just under two in five (37%) smokers were heavily addicted (i.e. smoked 20 or more cigarettes per day).

One in ten (10%) exceeded the recommended weekly limit for alcohol consumption. This equates to 32% of those who had drunk alcohol in the previous week. Those aged under 45 and men were more likely to do so.

One in six (16%) of respondents had been binge drinkers in the previous week. This equates to 55% of those who had drunk alcohol in the previous week. Those aged under 45 and men were more likely to be binge drinkers.

Two in three (67%) respondents met the target for physical activity. Those aged 65 or over and women were less likely to meet this target.

Half (49%) had participated in at least one sport in the previous week. Those aged 65 or over and women were less likely to have participated in sport.

Just under half (47%) of respondents met the target of consuming five or more portions of fruit/vegetables per day. Those aged under 65 and men were less likely to meet this target.

More than three in four (77%) ate breakfast every day. Those aged under 65 were less likely to do so.

Just under three in ten (28%) met the target of eating at least two portions of oily fish per week. Those aged under 65 were less likely to meet this target.

One in four (26%) respondents exceeded the recommended daily limit of one high fat and sugary snack per day. Those aged under 45 and men were more likely to exceed this limit.

One in 23 (4%) respondents met the target of consuming at least five slices (or equivalent) of bread per day. Men were more likely than women to do so.

One in seven (14%) respondents ate fast food takeaways at least once a week. Those aged 16-44 were more likely to do so.

Two in five (42%) had a body mass index indicating that they were overweight or obese. Men were more likely than women to be overweight.

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. Two in five (39%) said that this happened most of the time (30%) or some of the time (8%). A further 38% said that they were seldom exposed to second hand smoke and 24% said that they never were.

Those aged 65 or over were less likely to be exposed to second hand smoke most or some of the time. Those aged 45-64 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	25%	8%	42%	24%	34%	211
45-64	43%	12%	28%	17%	55%	173
65+	19%	3%	43%	35%	22%	204
All	30%	8%	38%	24%	39%	589

Smokers

A third (34%) of respondents were smokers, smoking either every day (31%) or some days (4%).

Those aged 45-64 were most likely to be smokers. This is shown in Table 4.3.

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

	Current smoker	Unweighted base (n)
Age:		
16-44	28%	211
45-64	51%	173
65+	19%	204
All	34%	589

Heavily Addicted Smokers

Among smokers, the mean number of cigarettes smoked per day was 14.9. Just under two in five (37%) of smokers were 'heavily addicted smokers' i.e. smoking 20 or more cigarettes per day.

Among smokers, those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to be heavily addicted (37% West Dunbartonshire; 47% NHSGGC).

Intention to Stop Smoking

Two in five (40%) smokers said that they intend to stop smoking. Heavy smokers were less likely than other smokers to say that they intend to stop smoking (29% heavy smokers; 45% other smokers).

4.3 Drinking

Frequency of Drinking Alcohol

More than a third (37%) of respondents said that they never drank alcohol, 28% drank alcohol sometimes (but less than weekly) and 35% drank alcohol at least once a week (including 5% who drank alcohol on three or more days per week).

Those aged under 65 were more 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	29%	33%	38%	211
45-64	35%	27%	38%	172
65+	61%	20%	20%	204
Men	28%	31%	41%	247
Women	45%	26%	29%	341
All	37%	28%	35%	588

Alcohol Consumption in Previous Week

Respondents were asked whether they had had a drink containing alcohol in the past seven days. Three in ten (31%) of all respondents said they had drunk alcohol in the past week (therefore slightly lower than the 35% who had said they drank alcohol weekly).

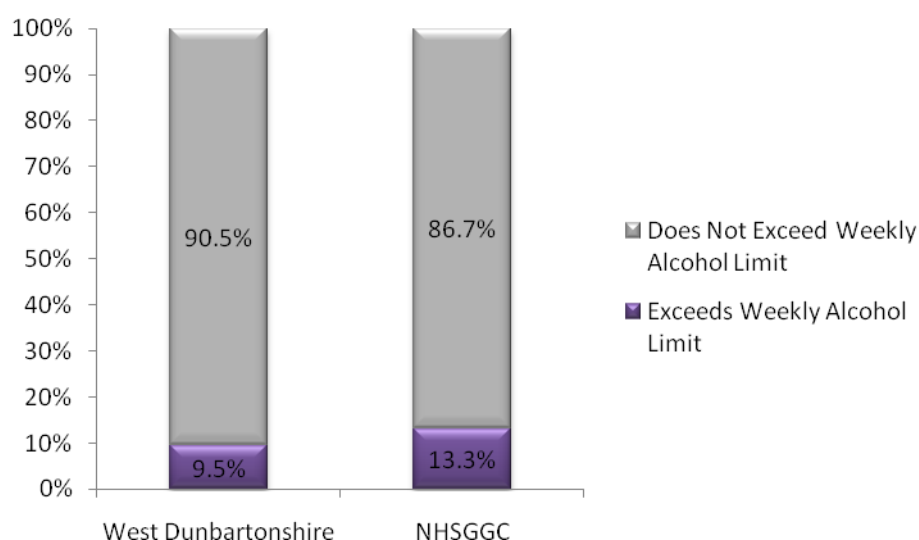
Respondents were asked how many of each type of drink they had consumed on each of the past seven days. Responses were used to calculate the total units of alcohol consumed on each day, and a total number of units for the week. For the 2008 survey, in calculating the number of units, new assumptions 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, 10% of all respondents exceeded their weekly limit. This equates to 32% of all those who had drunk alcohol in the last week.

Comparison with NHS Greater Glasgow & Clyde Area

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

Figure 4.1: Whether Exceeded Recommended Weekly Limits for Alcohol (new unit measures): West Dunbartonshire and NHSGGC



Those aged 65 or over were the least likely to exceed the recommended weekly limit for alcohol consumption and those aged under 45 were the most likely. Men were more likely than women to exceed their recommended limit (16% of men; 3% 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	13%	9%	199
45-64	8%	8%	166
65+	4%	4%	201
Men	16%	13%	236
Women	3%	3%	331
All	10%	8%	567

Binge Drinking

Binge drinkers were defined as:

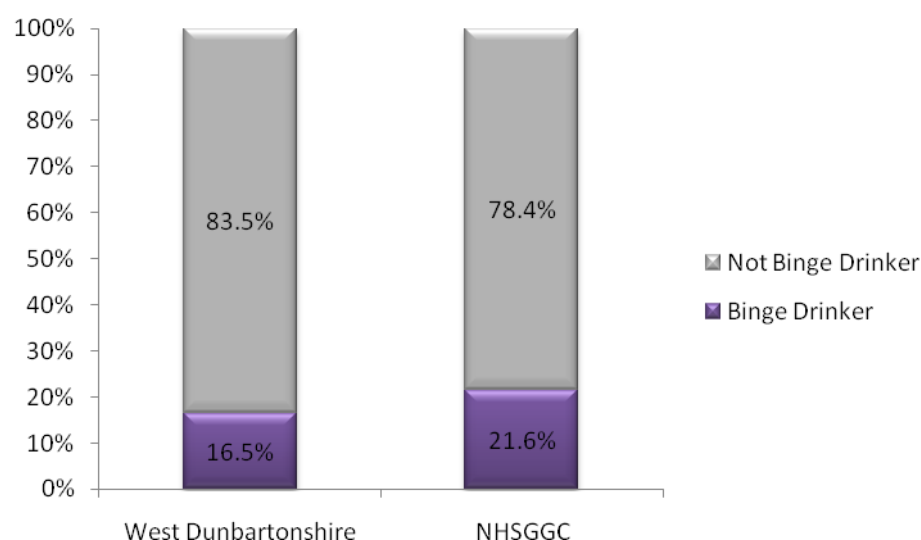
- Men who consumed eight or more units of alcohol on at least one day in the previous week;
- Women who consumed six or more units of alcohol on at least one day in the previous week.

Using the new measures for calculating unit totals, 16% of all respondents had been binge drinkers during the previous week. This equates to 55% of all those who had consumed alcohol in the previous week.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHS Greater Glasgow and Clyde area as a whole to have been binge drinkers in the previous week. This is shown in Figure 4.2.

Figure 4.2: Whether Binge Drinker in Past Week (new unit measures): West Dunbartonshire and NHSGGC



Those aged under 45 were most likely to be binge drinkers and those aged 65 or over were the least likely. Men were more likely than women to be binge drinkers. This is shown in Table 4.6.

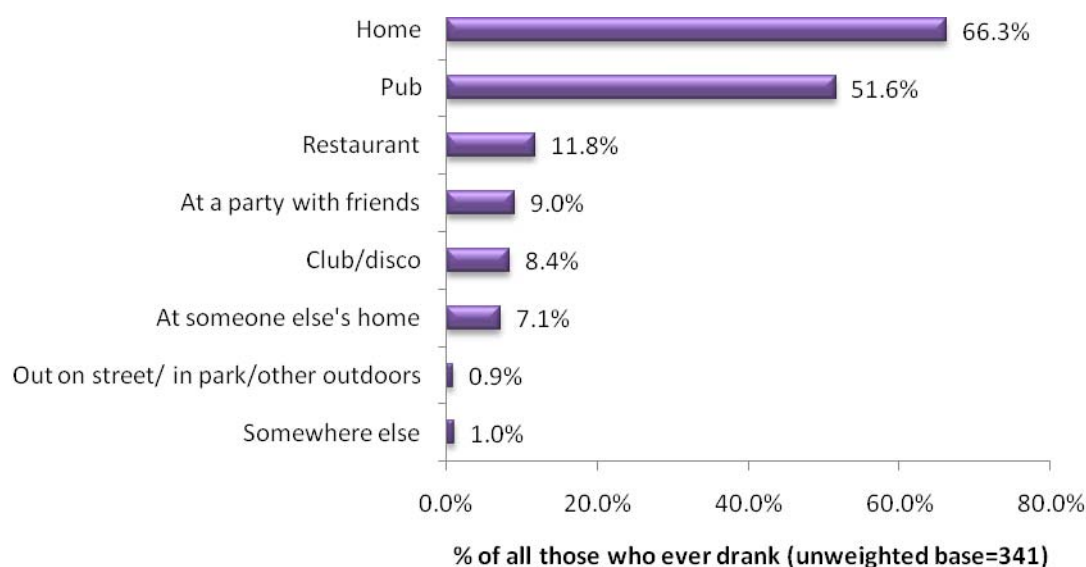
Table 4.6: Proportion Binge Drinking During Previous Week (old new and old unit measures) (Q29) by Age and Gender

	Binge Drinker (new measures)	Binge Drinker (old measures)	Unweighted base (n)
Age:			
16-44	22%	19%	199
45-64	16%	12%	167
65+	3%	3%	201
Men	23%	20%	236
Women	11%	8%	332
All	16%	13%	568

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 4.3. The most common places to have drunk alcohol in the last six months were at home and at a pub.

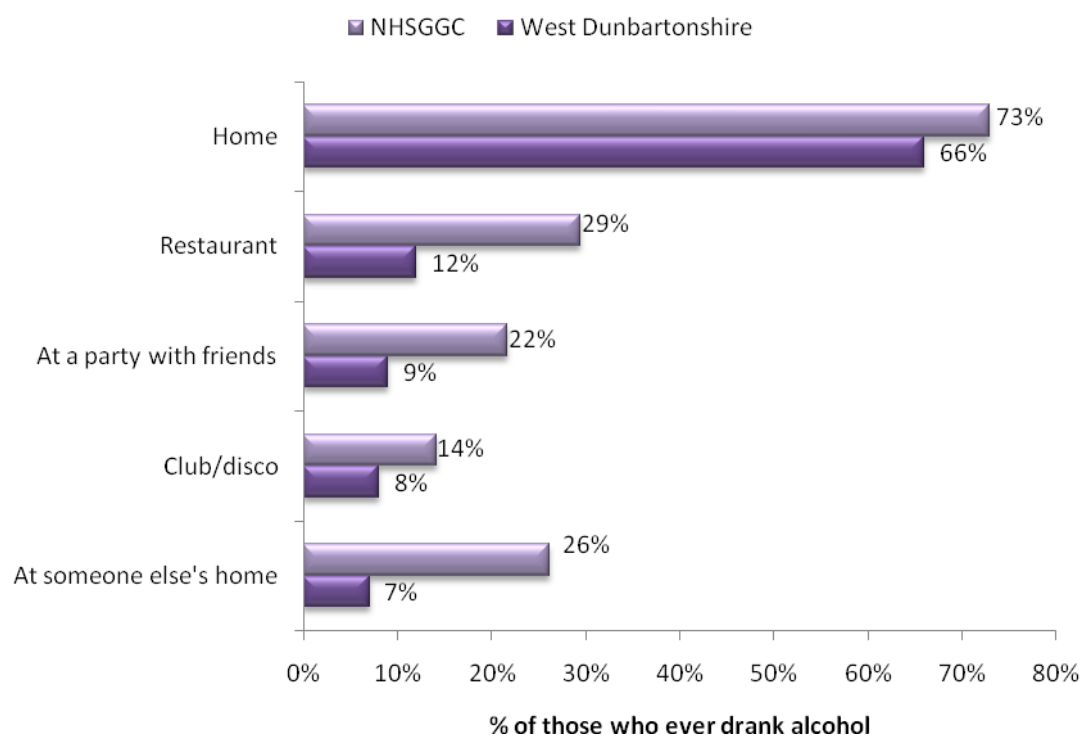
Figure 4.3: Where Consumed Alcohol in the Last Six Months (Based on All Those who Ever Drank Alcohol)



Comparison with NHS Greater Glasgow & Clyde Area

Figure 4.4 shows that compared to the NHSGGC area as a whole, those in West Dunbartonshire who drank alcohol were less likely to have drunk at home, in a restaurant, at a party with friends, in a club/disco or at someone else's home.

Figure 4.4: Where Consumed Alcohol in the Last Six Months: West Dunbartonshire and NHSGGC (Based on All Those who Ever Drank Alcohol; All Places Showing Significant Difference).



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, 61% of respondents said that they took at least 30 minutes of moderate activity on five or more days per week.

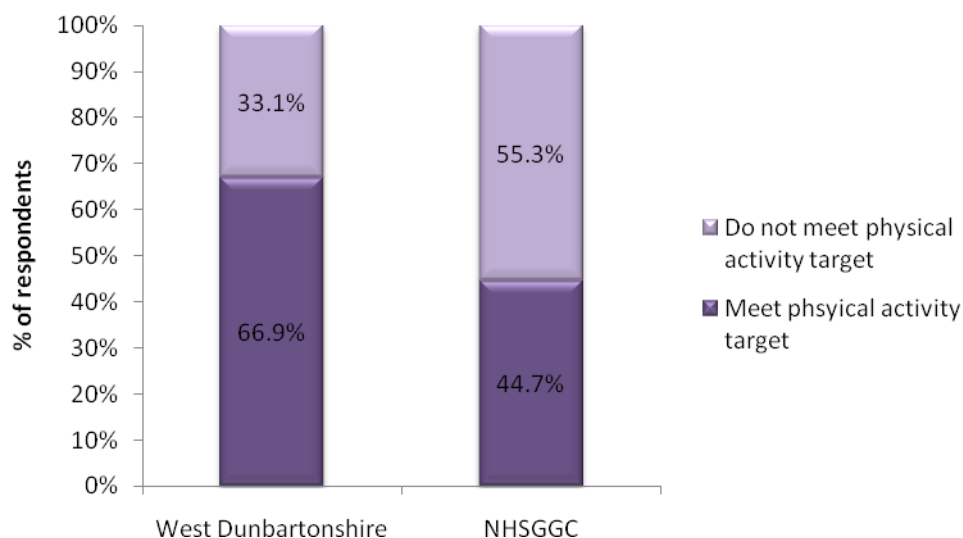
Respondents were also asked on how many days they took at least 20 minutes of vigorous activity (enough to make them sweaty and out of breath). This also included a prompt to ensure that all activity done in work, housework, DIY and gardening were included. In total, 19% said that they took at least 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, 67% of respondents met this target.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHSGGC area as a whole, those in West Dunbartonshire were more likely to meet the target for physical activity (67% West Dunbartonshire; 45% NHSGGC).

Figure 4.5: Whether Meet Physical Activity Target: West Dunbartonshire and NHSGGC



Those aged 65 or over were least likely to meet the target for physical activity and those aged 16-44 were most likely to do so. Men were more likely than women to meet the target.

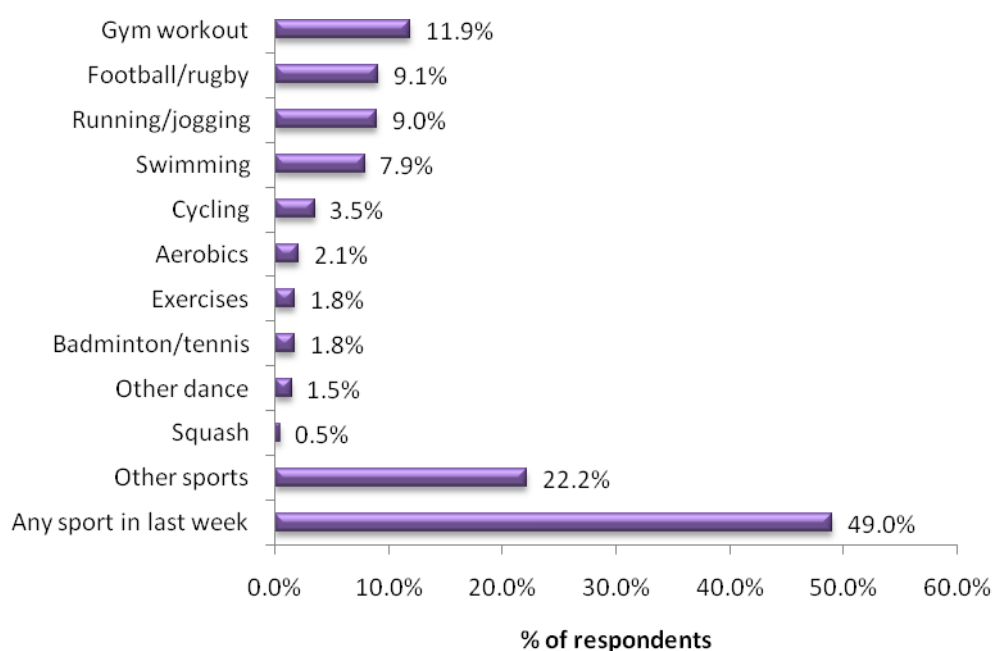
Table 4.7: Proportion Who Take 30 Minutes or More of Moderate Activity 5 or More Times Per Week or 20 Minutes or More of Vigorous Activity 3 or More Times Per Week (Q43-47) by Age and Gender

	Meet Physical Activity Target	Unweighted base (n)
Age:		
16-44	72%	211
45-64	64%	173
65+	59%	204
Men	73%	247
Women	61%	342
All	67%	589

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 4.6. Half (49%) of respondents had participated in at least one sport in the last week. The most common sports were gym workouts (12%), football/rugby (9%) and running/jogging (9%).

Figure 4.6: Proportion Participating in Sports in the Last Week

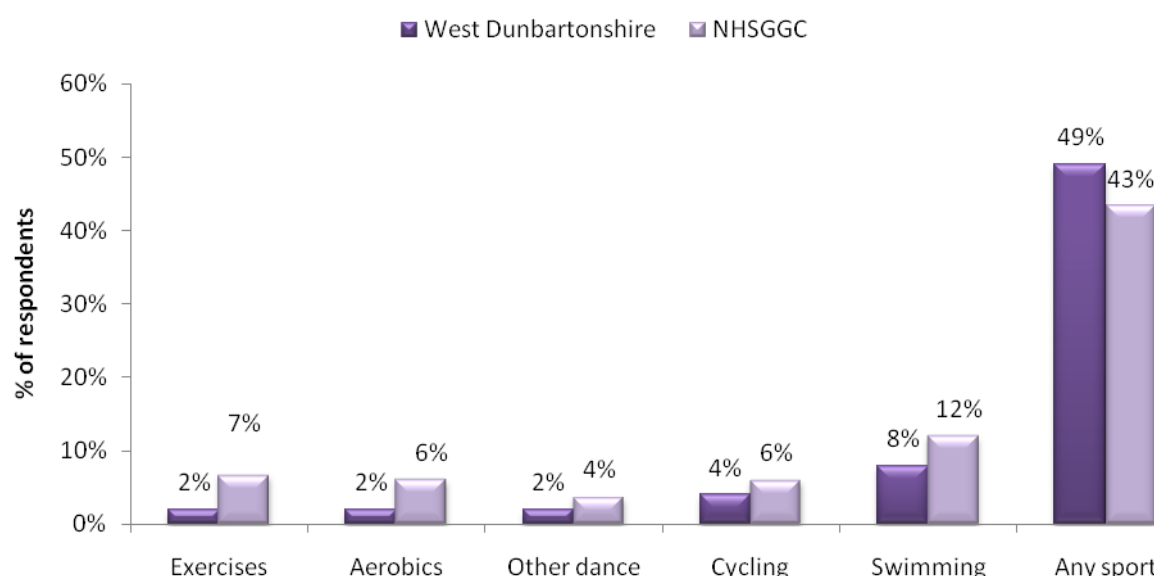


Of those who said that they participated in 'other sports', these were walking (95%), golf (5%) and horse riding (1%).

Comparison with NHS Greater Glasgow & Clyde Area

As Figure 4.7 shows, those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to have participated in a sport in the last week. However, those in West Dunbartonshire were less likely to have participated in swimming, cycling, aerobics, other dance or exercises.

Figure 4.7: Proportion Participating in Sports in the Last Week: West 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 60% of those aged 16-44 to 34% of those aged 65 and over. Men were more likely than women to have participated in a sport.

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

	Participated in Sport	Unweighted base (n)
Age:		
16-44	60%	204
45-64	39%	148
65+	34%	161
Men	57%	216
Women	42%	297
All	49%	513

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 47% of respondents met this target and 3% had no fruit or vegetables in a day.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHS Greater Glasgow & Clyde area as a whole to consume five or more portions of fruit/vegetables per day.

Figure 4.8: Number of Portions of Fruit/Vegetables Consumed Per Day: West Dunbartonshire and NHSGGC

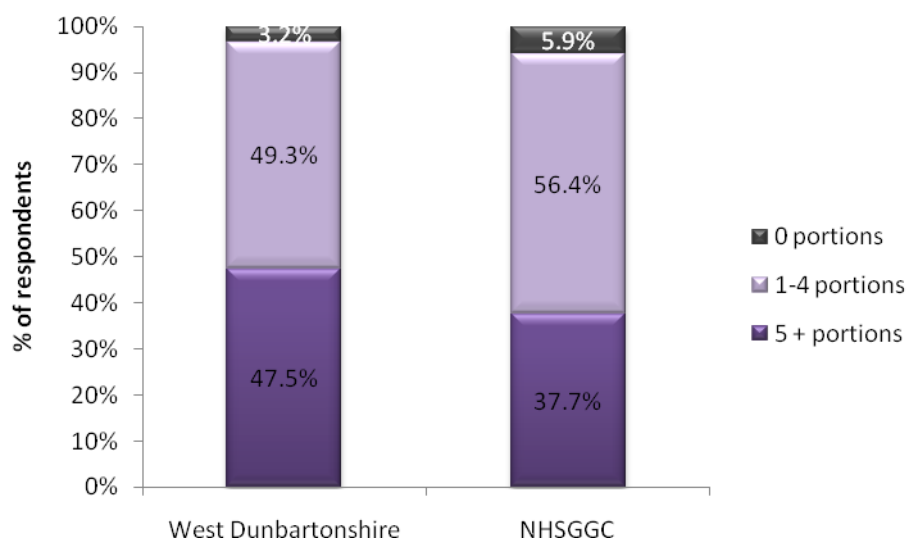


Table 4.9 shows that those aged over 65 were most likely to meet the target for fruit/vegetable consumption. Also, women were more likely than men to meet the target for fruit/vegetable consumption.

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	44%	4%	208
45-64	44%	2%	173
65+	62%	2%	204
Men	42%	3%	244
Women	53%	3%	342
All	47%	3%	586

Breakfast

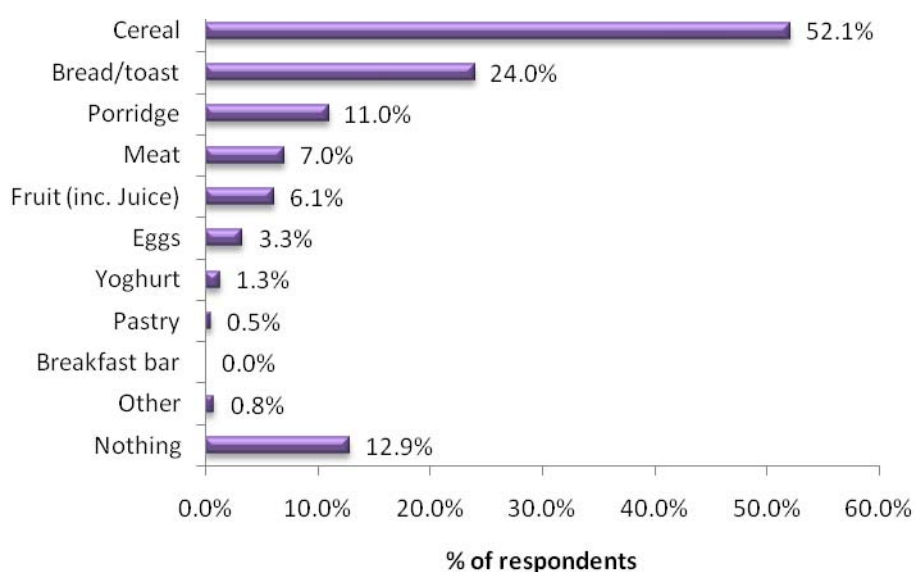
Respondents were asked on how many days of the week they ate breakfast. More than three in four (77%) ate breakfast every day, 10% never ate breakfast, with the remaining 13% eating breakfast between one and six days per week.

Those aged under 65 were less likely to eat breakfast every day.

Table 4.10: Frequency Eat Breakfast (Q38) by Age

	Every Day	Some Days	Never	Unweighted base (n)
Age:				
16-44	77%	15%	8%	204
45-64	70%	15%	15%	172
65+	86%	7%	7%	204
All	77%	13%	10%	581

Respondents were asked what they had eaten for breakfast that morning. On the morning of the survey, 13% of respondents had not eaten breakfast. The most commonly consumed items were cereal and bread/toast, as shown in Figure 4.9.

Figure 4.9: Items Consumed for Breakfast That Morning (Q39)

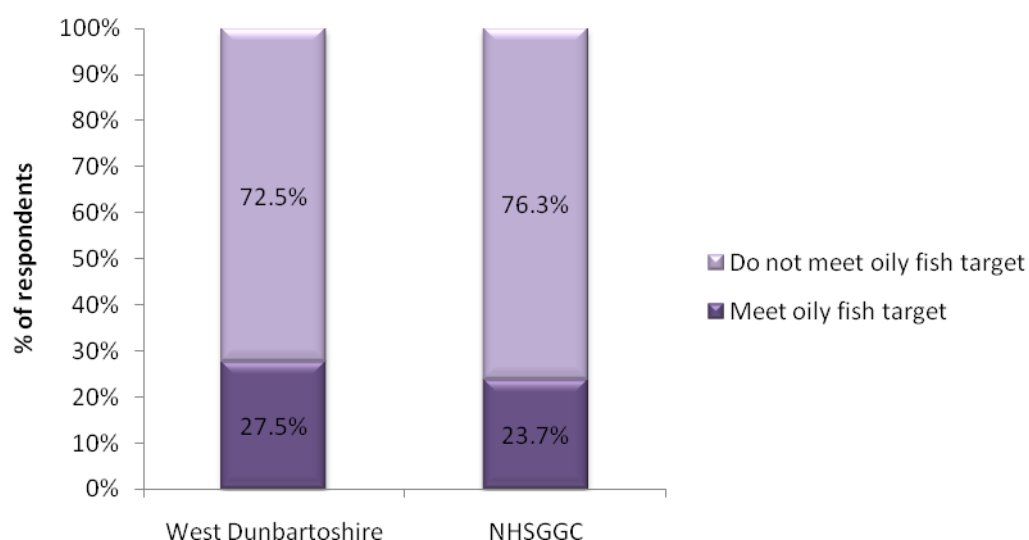
Oily Fish

The recommended target is to consume two or more portions of oily fish per week. Just under three in ten (28%) respondents met this target.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West 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 4.10.

Figure 4.10: Whether Meet Target for Oily Fish Consumption: West Dunbartonshire and NHSGGC



Those aged 65 or over were the most likely to meet the target for oily fish consumption. This is shown in Table 4.11.

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

	Meet Oily Fish Target	Unweighted base (n)
Age:		
16-44	20%	211
45-64	25%	173
65+	51%	204
All	28%	589

High Fat and Sugary Snacks

One in four (26%) respondents exceeded the recommended daily limit of one high fat and sugary snack (e.g. cakes, pasties, chocolate, biscuits, crisps).

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to exceed the recommended daily limit for high fat and sugary snacks (26% West Dunbartonshire; 36% NHSGGC).

Figure 4.11: Whether Exceed Recommended Daily Limit of 2 Portions of High Fat/Sugary Snacks: West Dunbartonshire and NHSGGC



Those aged 65 or over were least likely to exceed the recommended limit for high fat/sugary snacks and those aged under 45 were most likely. Men were more likely than women to consume two or more high fat/sugary snacks per day. 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 and Gender

	Two or More High Fat/Sugary Snacks Per Day	Unweighted base (n)
Age:		
16-44	32%	208
45-64	22%	172
65+	16%	204
Men	35%	245
Women	18%	340
All	26%	585

Bread

Respondents were asked how many slices of bread (or equivalent rolls, chapattis, naan etc) they consumed on an average day. Responses showed that 5% ate fewer than one slice per day, 26% had one slice, 40% had two slices, 10% had three slices and 14% had four slices. In total, 4% met the target of consuming five or more slices (or equivalent) of bread per day. The mean number of slices per day was 2.20.

Men were more likely than women to meet the target for bread consumption. This is shown in Table 4.13.

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

	Five or More Slices Per Day	Unweighted base (n)
Men	7%	245
Women	2%	340
All	4%	585

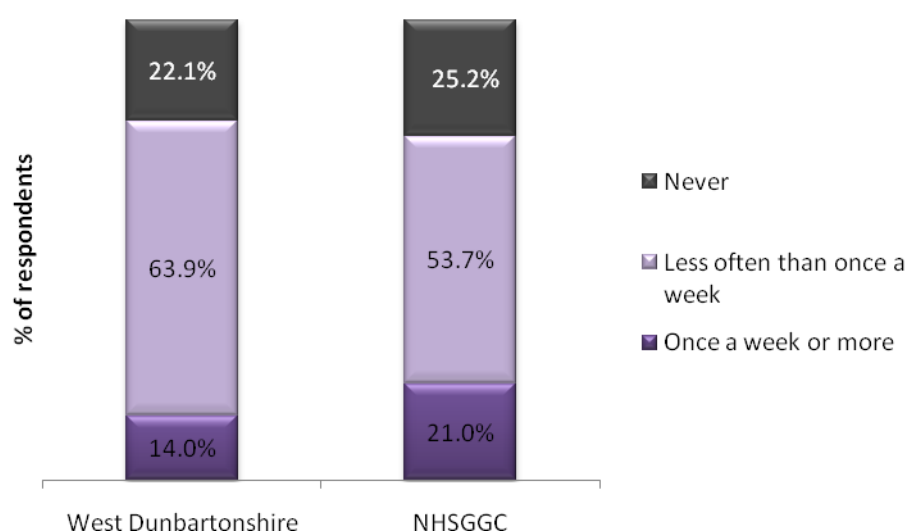
Fast Food Takeaways

One in seven (14%) respondents said that they ate fast food takeaways once a week or more, while 22% said they never did and 64% did sometimes (less often than once a week).

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to have takeaways weekly.

Figure 4.12: Frequency Have Takeaways: West Dunbartonshire and NHSGGC



The likelihood of having takeaways every week declined with age – ranging from 24% of those aged 16-44 to 4% of those aged 65 or over.

Table 4.14: Frequency Have Takeaways (Q37) by Age

	Never	Less than weekly	At least once a week	Unweighted base (n)
Age:				
16-44	4%	72%	24%	211
45-64	22%	72%	6%	173
65+	66%	30%	4%	204
All	22%	64%	14%	589

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, 42% 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), 13% of respondents were classified as obese.

Men were more likely than women to be overweight.

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

	Under-weight	Ideal	Over-weight	Obese	Very obese	Revised obese (29.2+)	Unweighted base (n)
Men	2%	50%	39%	9%	1%	12%	229
Women	6%	57%	28%	9%	<1%	13%	299
All	4%	54%	33%	9%	1%	13%	528

4.7 Unhealthy and Healthy Behaviour Indices

An Unhealthy Behaviour Index

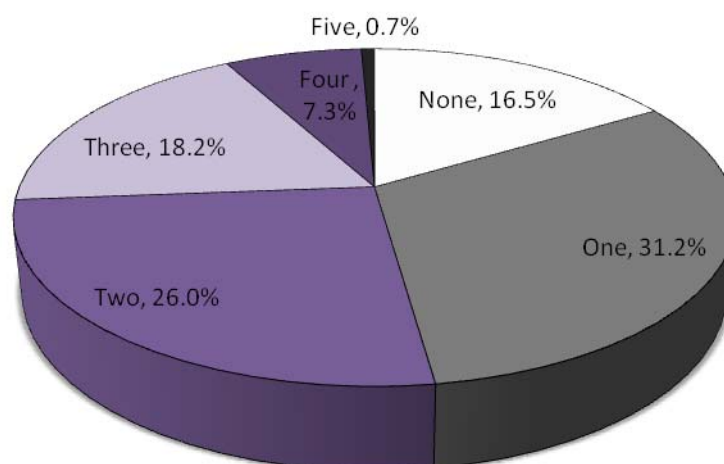
This section examines the extent to which multiple 'unhealthy' behaviours are exhibited by the same people. An 'unhealthy' behaviour index has been derived from the following five unhealthy behaviours:

- 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 83% of respondents exhibited at least one of these behaviours, but just 1% exhibited all five. The mean number of unhealthy behaviours was 1.71.

Figure 4.13: Number of Unhealthy Behaviours Exhibited

Unweighted N=506



Comparison with NHS Greater Glasgow & Clyde

Those in West Dunbartonshire tended to exhibit fewer unhealthy behaviours than those in the NHSGGC area as a whole (means: 1.71 West Dunbartonshire; 2.14 NHSGGC).

Those aged 45-64 tended to exhibit the most unhealthy behaviours. 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 Age and Gender

	Mean No. of Unhealthy Behaviours	Unweighted base (n)
Age:		
16-44	1.62	177
45-64	1.99	150
65+	1.43	178
Men	1.87	217
Women	1.55	289
All	1.71	506

A Healthy Behaviour Index

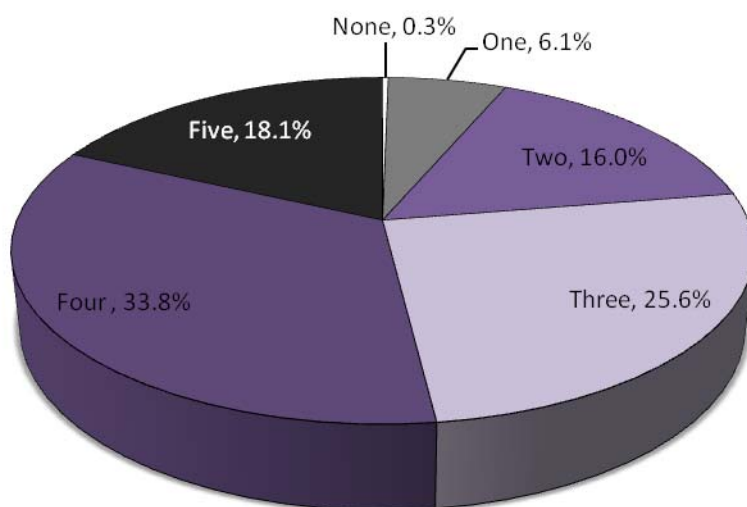
A 'healthy behaviour index' was also developed, which examined the extent to which respondents exhibited multiple healthy behaviours. The five healthy behaviours used in the index were:

- 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 bingeing to drinking too much in a week).

Figure 4.14 shows that nearly all respondents exhibited at least one healthy behaviour, and 18% of respondents exhibited all five. The mean number of healthy behaviours was 3.41.

Figure 4.14: Number of Healthy Behaviours Exhibited

Unweighted base=465



Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire tended to exhibit more healthy behaviours than those in the NHSGGC area as a whole (means= 3.41 West Dunbartonshire; 2.93 NHSGGC).

Those aged 45-64 tended to exhibit the fewest unhealthy behaviours. Women tended to exhibit more healthy behaviours than men, as shown in Table 4.17.

Table 4.17: Mean Number of Healthy Behaviours by Age and Gender

	Mean No. of Healthy Behaviours	Unweighted base (n)
Age:		
16-44	3.50	157
45-64	3.16	134
65+	3.59	173
Men	3.25	196
Women	3.55	269
All	3.41	465

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 (90%) respondents agreed with this (30% strongly agreed and 61% tended to agree) and 10% disagreed (all of whom tended to disagree and none strongly disagreed).

The second statement was:

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

One in five (22%) agreed with this (1% strongly agreed and 21% tended to agree) and 78% disagreed (61% tended to disagree and 16% strongly disagreed).

The third statement was:

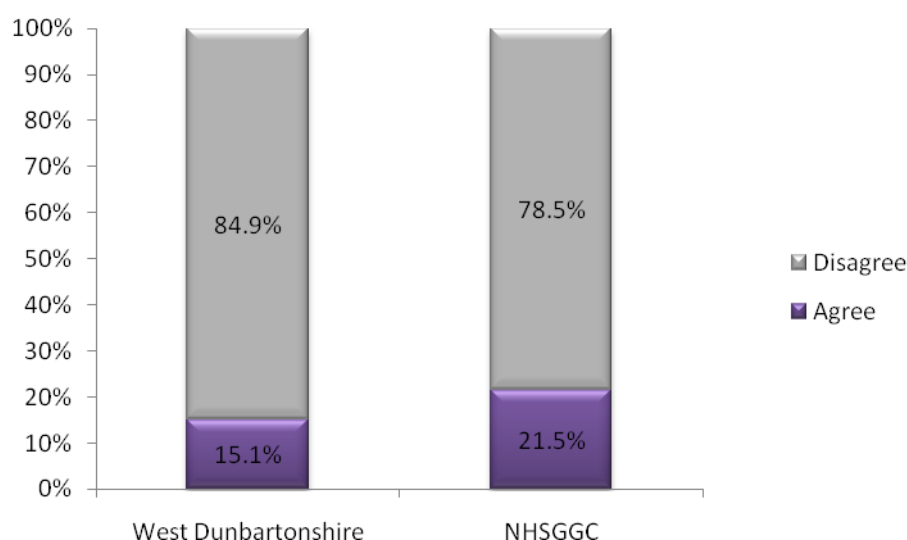
I would feel embarrassed seeing a woman breastfeeding her baby.

One in seven (15%) respondents agreed with this (1% strongly agreed and 14% tended to agree) and 85% disagreed with this statement (47% tended to disagree and 38% strongly disagreed).

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to agree that they would feel embarrassed seeing a woman breastfeeding (15% West Dunbartonshire; 21% NHSGGC).

Figure 4.15: “I would feel embarrassed seeing a woman breastfeeding her baby”: West Dunbartonshire and NHSGGC



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 and less likely to agree with the positive statement. 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	96%	18%	15%	202
45-64	92%	17%	9%	164
65+	71%	44%	27%	186
Men	84%	30%	28%	226
Women	95%	16%	4%	327
All	90%	22%	15%	559

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)	6.3%	588
Belong to a club or organisation (Q58)	10.0%	589
Feel I belong to the local area (Q71b)	88.1%	576
Feel valued as a member of the community (Q71d)	76.6%	571
People in my neighbourhood can influence decisions (Q71f)	76.1%	517
Exchange small favours with people living nearby (Q72)	72.5%	588
Identify with a religion (Q98)	81.7%	585
Experienced at least one form of discrimination over last year (Q100)	5.0%	589
Feel safe in own home (Q76c)	97.8%	587
Feel safe using public transport (Q76b)	90.9%	557
Feel safe walking alone even after dark (Q76a)	76.4%	575

One in sixteen (6%) respondents felt isolated from family and friends. Those aged under 45 were more likely to do so.

One in ten (10%) belonged to a club, association etc. Those aged under 65 were less likely to do so.

Just under nine in ten (88%) felt that they belonged to their local area. Those aged under 45 were less likely to do so.

Three in four (77%) felt valued as members of their community. Those aged under 45 were less likely to do so.

Three in four (76%) felt that local people could influence local decisions.

Seven in ten (72%) respondents exchanged small favours with neighbours. Those aged under 45 and men were less likely to do so.

Four in five (82%) identified with a religion. Those aged under 45 and men were less likely to do so.

One in 20 (5%) had experienced discrimination over the last year.

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

Nine in ten (91%) respondents felt safe using public transport in their area. Those aged under 65 were less likely to do so.

Three in four (76%) felt safe walking alone in their area even after dark. Women were less likely than men 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, 6% said yes.

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	9%	211
45-64	3%	173
65+	5%	203
All	6%	588

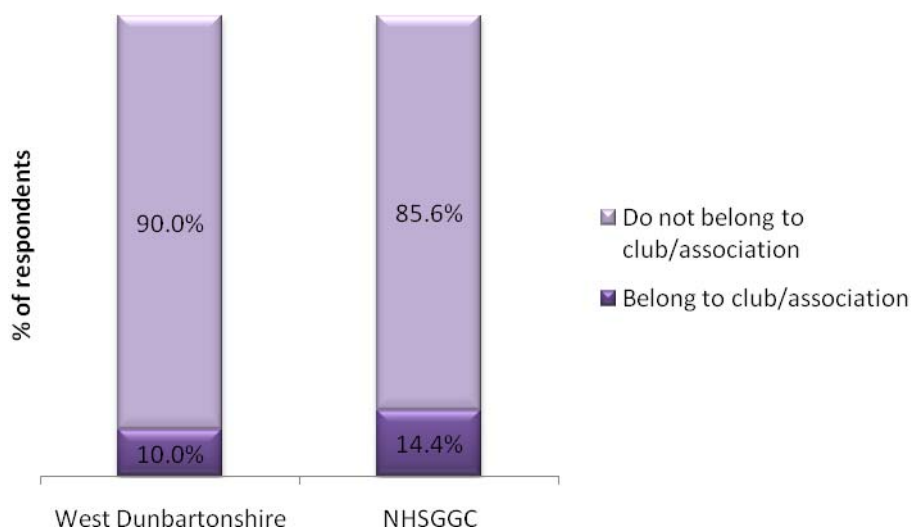
Club Membership

One in ten (10%) respondents said that they attended any social clubs, associations, church groups or anything similar. Of those who said they attended clubs or associations, all attended at least one club locally and there were none who attended any clubs elsewhere.

Comparison with NHS Greater Glasgow & Clyde Area

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

Figure 5.1: Belong to Social Club, Association Etc: West Dunbartonshire and NHSGGC



Those aged 65 or over were more likely to belong to a club, association etc. 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	4%	211
45-64	5%	173
65+	34%	204
All	10%	589

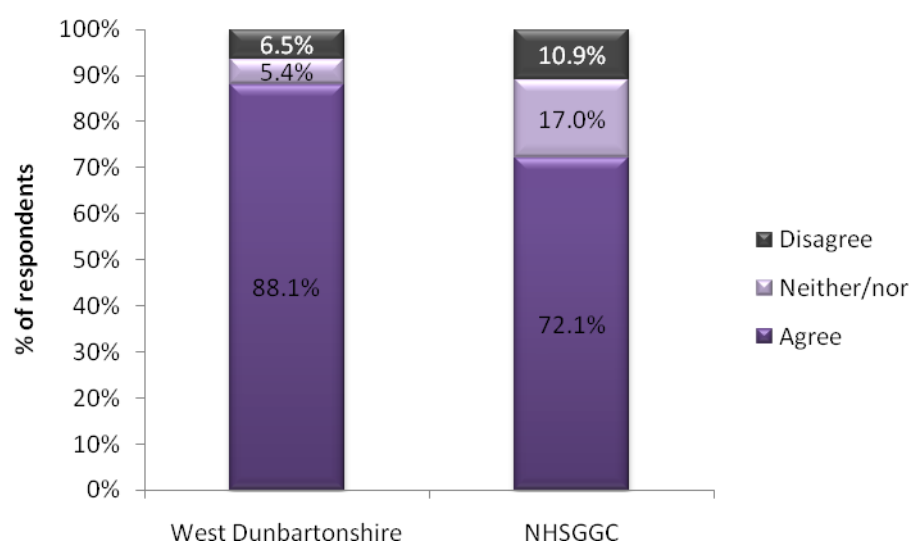
Sense of Belonging to the Community

Respondents were asked to indicate the extent to which they agreed or disagreed with the statement "I feel I belong to this local area". Just under nine in ten (88%) respondents agreed with this statement (10% strongly agreed and 78% agreed), 7% disagreed and 5% neither agreed nor disagreed.

Comparison with NHS Greater Glasgow & Clyde Area

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

Figure 5.2: Belong to the Local Area: West Dunbartonshire and NHSGGC



Those aged under 45 were least likely to feel that they belonged to the local area.

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

	Agree	Neither/ Nor	Disagree	Unweighted base (n)
Age:				
16-44	83%	6%	11%	205
45-64	92%	5%	3%	168
65+	94%	4%	2%	202
All	88%	5%	7%	576

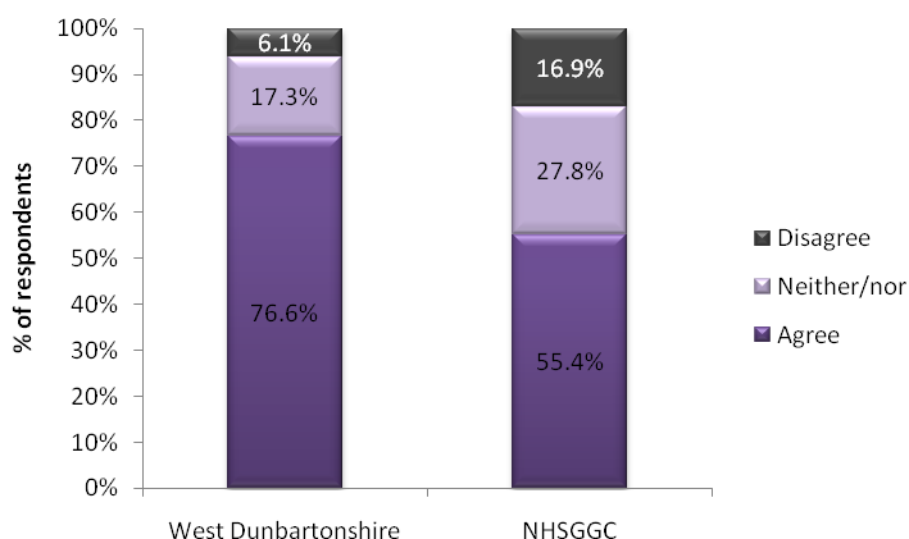
Feeling Valued as a Member of the Community

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”. Three in four (77%) agreed with this statement (5% strongly agreed and 71% agreed); 6% disagreed and 17% neither agreed nor disagreed.

Comparison with NHS Greater Glasgow and Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to agree that they felt valued as members of the community.

Figure 5.3: Feel Valued as a Member of the Community: West Dunbartonshire and NHSGGC



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. This is shown in Table 5.5.

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

	Agree	Neither/ Nor	Disagree	Unweighted base (n)
Age:				
16-44	67%	23%	10%	202
45-64	82%	15%	3%	167
65+	90%	9%	15	201
All	77%	17%	6%	571

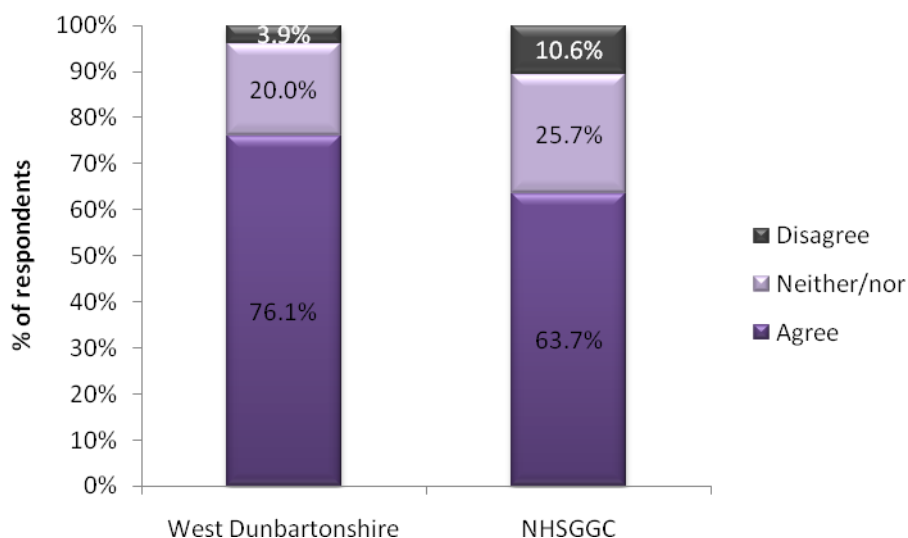
Influence in the Neighbourhood

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, 76% agreed with this statement (3% strongly agreed and 73% agreed), while 4% disagreed and 20% neither agreed nor disagreed.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to feel that local people can influence local decisions (76% West Dunbartonshire; 64% NHSGGC).

Figure 5.4: Can Influence Decisions that Affect Neighbourhood: West Dunbartonshire and NHSGGC



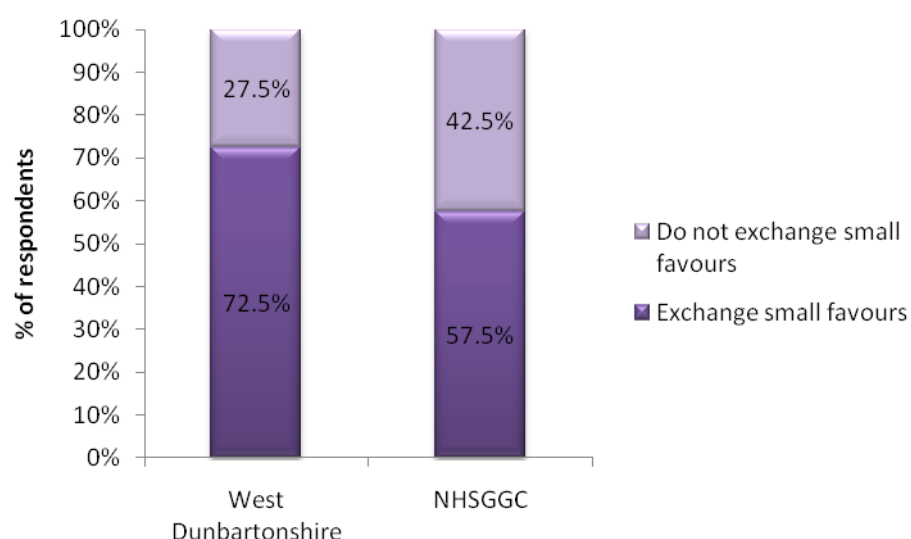
Exchanging Small Favours with Neighbours

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). Seven in ten (72%) said that they did (30% did so with one neighbour, 28% did so with two neighbours and 15% did so with three or more neighbours).

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to exchange small favours with neighbours (72% West Dunbartonshire; 58% NHSGGC).

Figure 5.5: Whether Exchange Small Favours With Neighbours: West Dunbartonshire and NHSGGC



Those aged 16-44 were the least likely to exchange small favours with neighbours, and those aged 65 or over were the most likely. This is shown in Table 5.6.

Table 5.6: Exchange Small Favours with Neighbours (Q72) by Age

	Exchange Small Favours	Unweighted base (n)
Age:		
16-44	67%	211
45-64	75%	172
65+	83%	204
Men	68%	247
Women	76%	341
All	72%	588

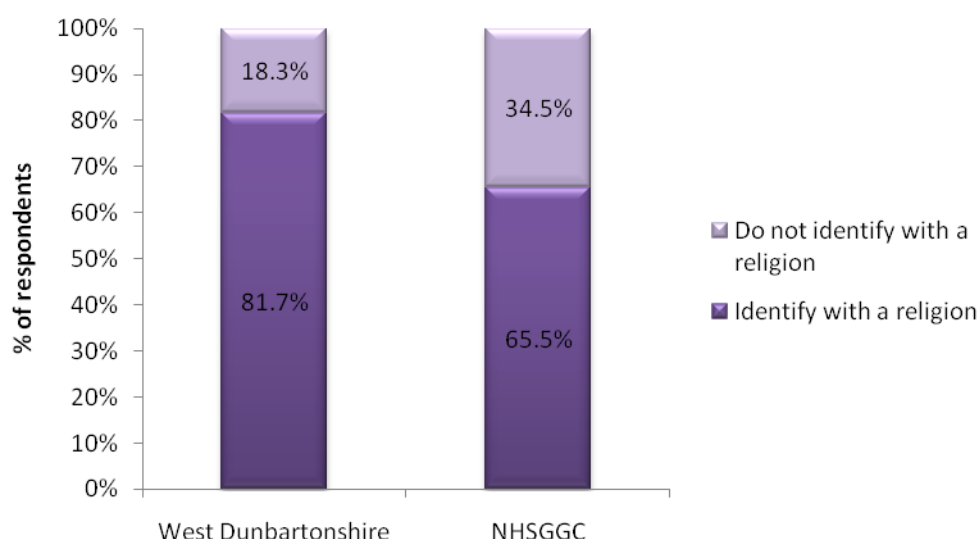
Religious Identity

Four in five (82%) respondents identified with a religion.

Comparison with NHS Greater Glasgow & Clyde

Those in West 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: West Dunbartonshire and NHSGGC



Those aged under 45 were less likely than older respondents to identify with a religion. Women were more likely than men to identify with a religion (87% of women; 75% of men).

Table 5.7: Religious Identity (Q98) by Age and Gender

	Have Religious Identity	Unweighted base (n)
Age:		
16-44	70%	208
45-64	93%	172
65+	93%	204
Men	75%	246
Women	87%	339
All	82%	585

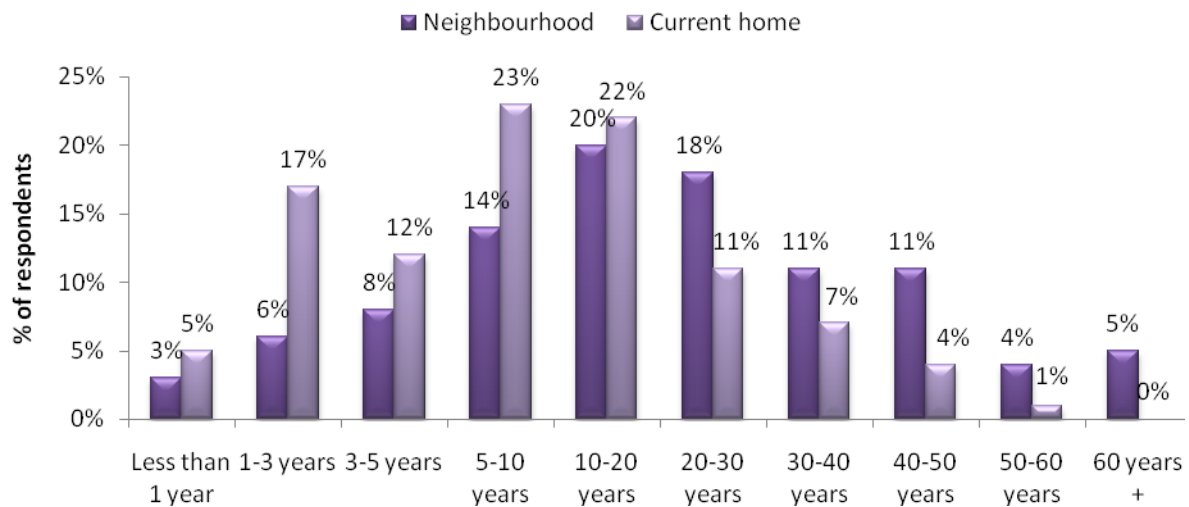
Experience of Discrimination

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% 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 22.5 years, and the mean length of residency in the current home was 12.0 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 (31% strongly agreed and 67% agreed), while 1% disagreed and less than 1% neither agreed nor disagreed.

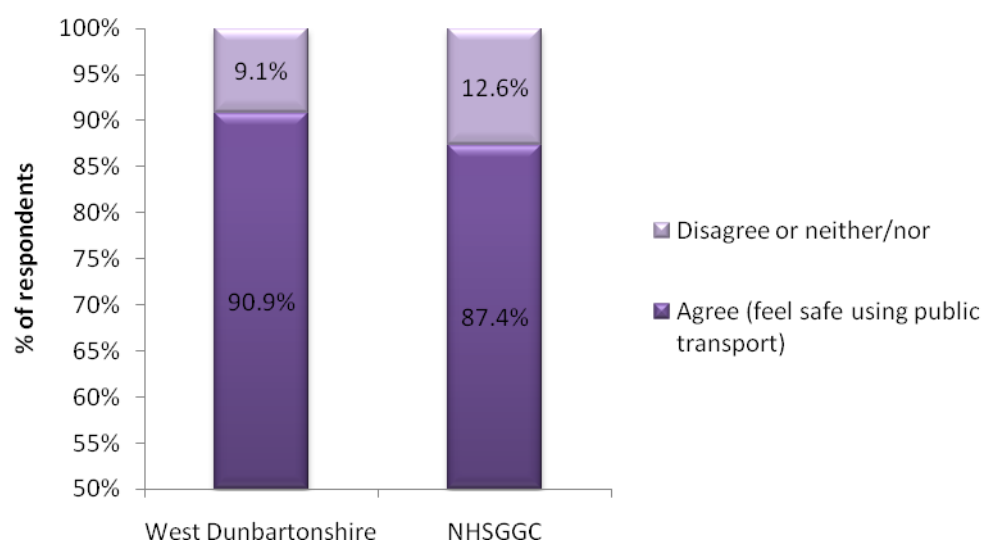
Feeling Safe Using Public Transport

Respondents were asked the extent to which they agreed or disagreed with the statement "I feel safe using public transport in this local area". Nine in ten (91%) agreed with this (5% strongly agreed and 86% agreed), while 4% disagreed and 6% neither agreed nor disagreed.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to feel safe using public transport in their local area.

Figure 5.8: Feel Safe Using Public Transport in Local Area: West Dunbartonshire and NHSGGC



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

Table 5.8: Feel Safe Using Public Transport (Q76a) by Age

	Agree	Neither/ Nor	Disagree	Unweighted base (n)
Age:				
16-44	89%	5%	6%	197
45-64	90%	8	1%	168
65+	97%	3%	1%	191
All	91%	6%	4%	557

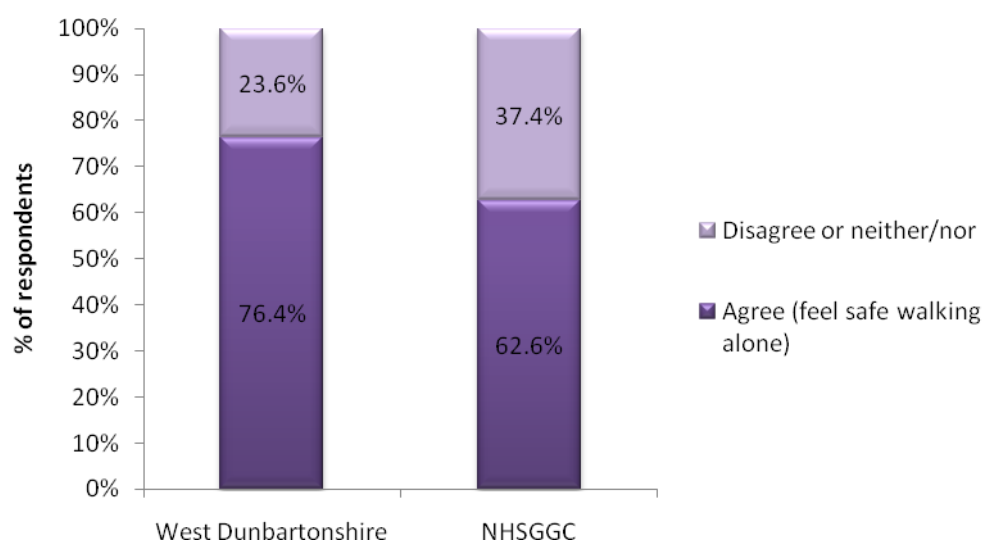
Feeling Safe Walking Alone in Local Area Even After Dark

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". Three in four (76%) agreed with this statement (3% strongly agreed and 73% agreed), 18% disagreed and 6% neither agreed nor disagreed.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHSGGC area as a whole, those in West Dunbartonshire were more likely to feel safe walking alone in their area even after dark (76% West Dunbartonshire; 63% NHSGGC).

Figure: 5.9: Feel Safe Walking Alone Even After Dark: West Dunbartonshire and NHSGGC



Women were less likely than men to feel safe walking alone. This is shown in Table 5.9.

Table 5.9: Feel Safe Walking Alone Even After Dark (Q76b) by Gender

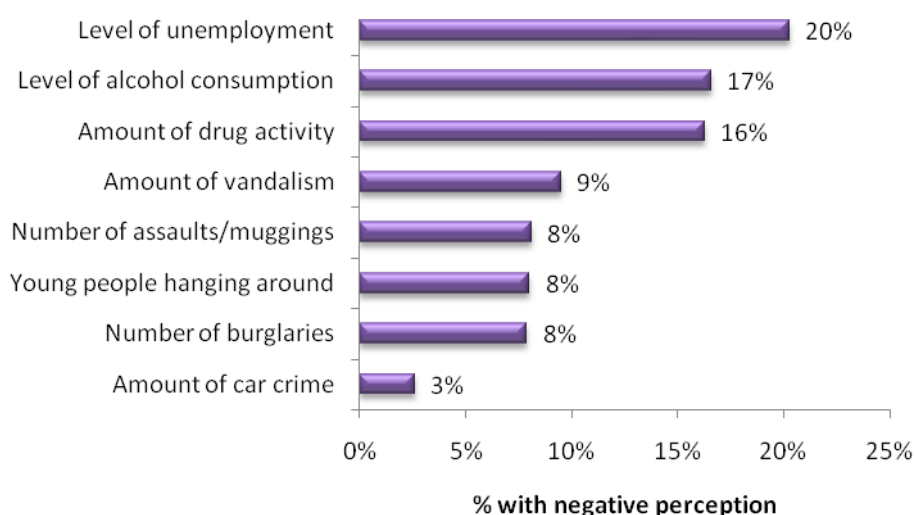
	Agree	Neither/ Nor	Disagree	Unweighted base (n)
Men	83%	5%	12%	243
Women	71%	6%	23%	332
All	76%	6%	18%	575

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 level of unemployment, level of alcohol consumption and amount of drug activity.

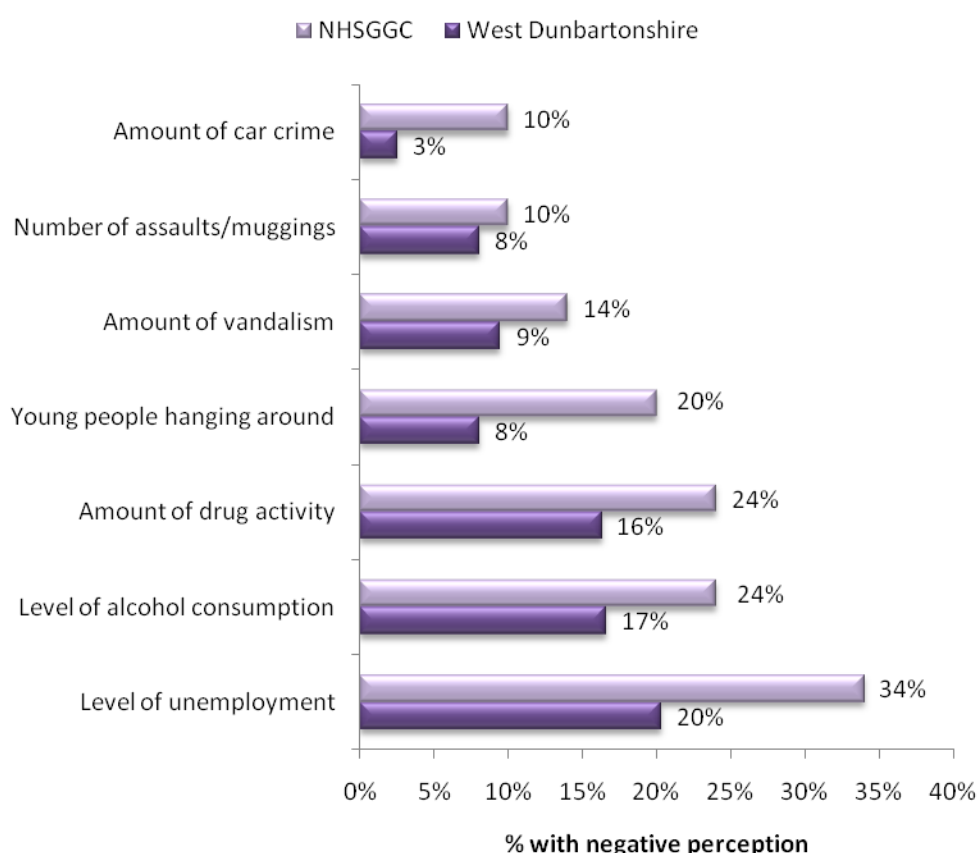
Figure 5.10: Negative Perception of Social Issues in the Local Area (Q56a-h)



Comparison with NHS Greater Glasgow & Clyde Area

As Figure 5.11 shows, those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to have negative perceptions of the amount of car crime, number of assaults/muggings, amount of vandalism, young people hanging around, amount of drug activity, level of alcohol consumption and level of unemployment.

Figure 5.11: Negative Perception of Social Issues in the Local Area: West Dunbartonshire and NHSGGC (all issues showing a significant difference)

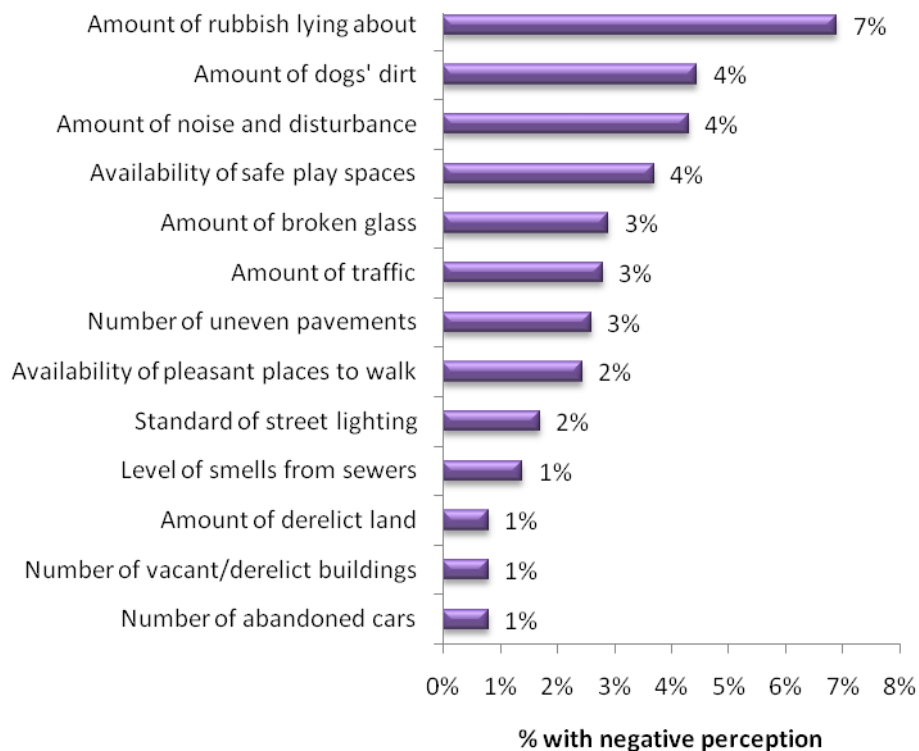


5.6 Environmental Issues in the Local Area

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 issue which most frequently caused concern was the amount of rubbish lying about. This is shown in Figure 5.12.

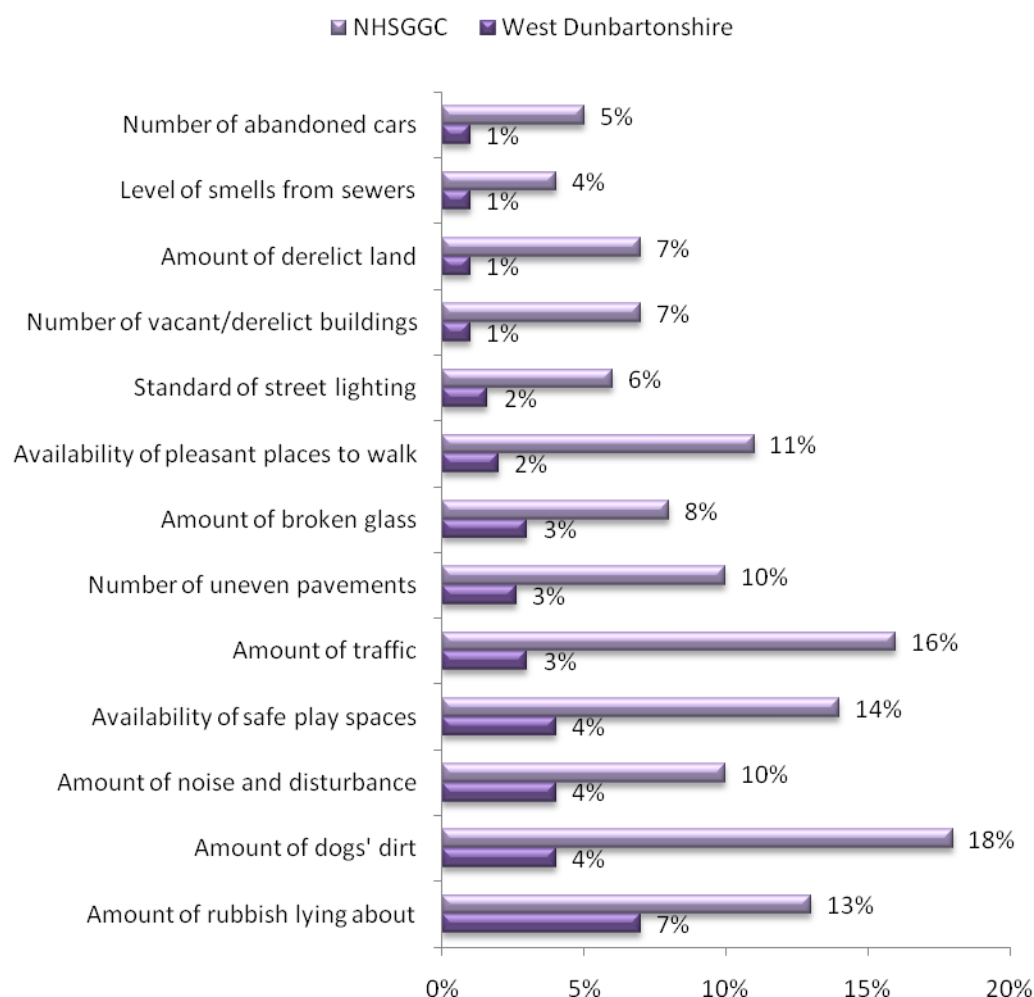
Figure 5.12: Negative Perception of Environmental Issues in the Local Area (Q57a-m)



Comparison with NHS Greater Glasgow & Clyde Area

As Figure 5.13 shows, those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to be concerned each of the 13 environmental issues.

Figure 5.13: Negative Perception of Environmental Issues in the Local Area: West Dunbartonshire and NHSGGC (all issues showing a significant difference)

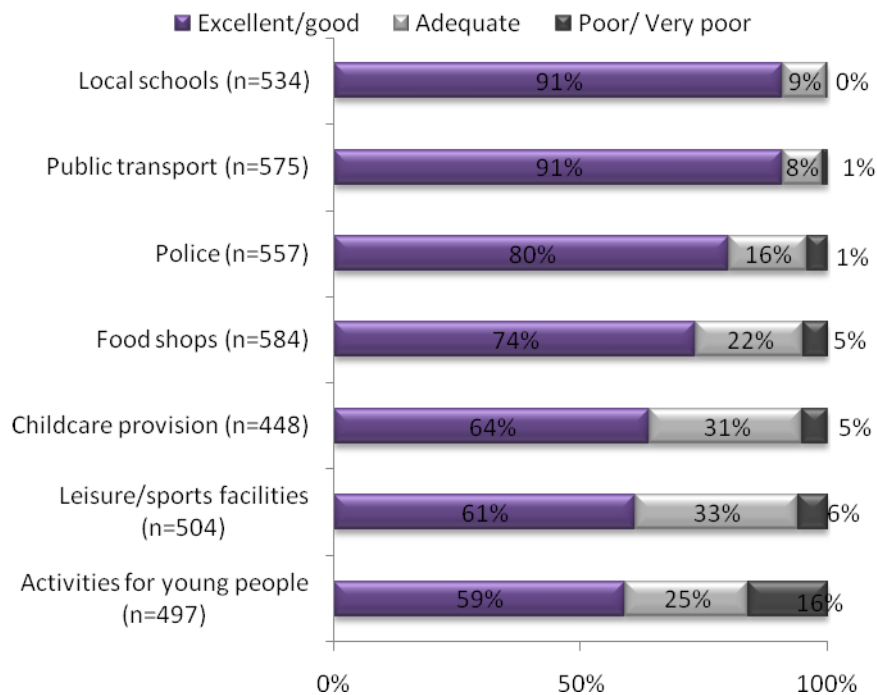


5.7 Perceived Quality of Services in the Area

Respondents were given a list of seven local services and asked to rate each (excellent, good, adequate, poor or very poor). Figure 5.14 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 5.14 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 and leisure/sports facilities had the lowest proportion of respondents giving a positive rating.

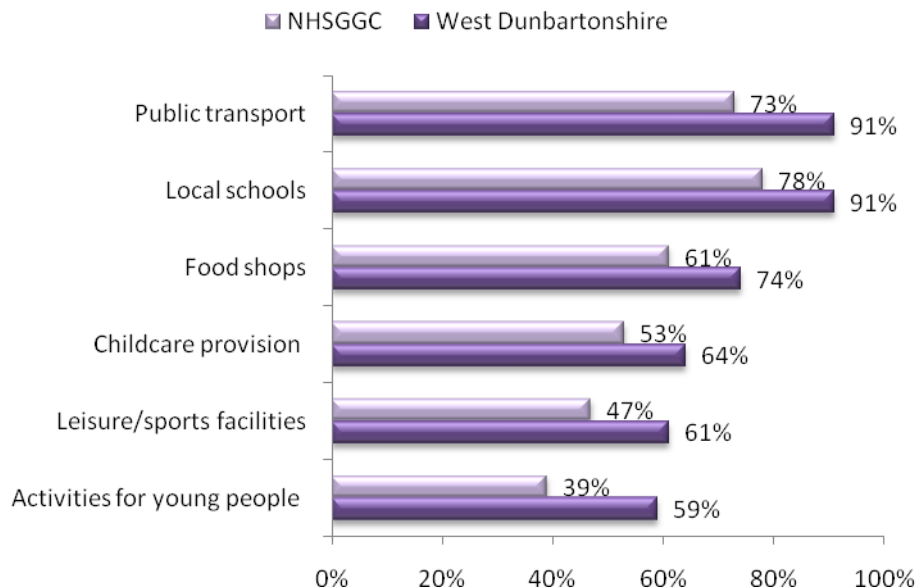
Figure 5.14: Perceived Quality of Local Services



Comparison with NHS Greater Glasgow and Clyde Area

Figure 5.15 shows that compared to the NHSGGC area as a whole, those in West Dunbartonshire were more likely to have positive ratings of each of the six local services.

Figure 5.15: Positive Perceptions of Quality of Local Services: West Dunbartonshire and NHSGGC (all services showing a significant difference).

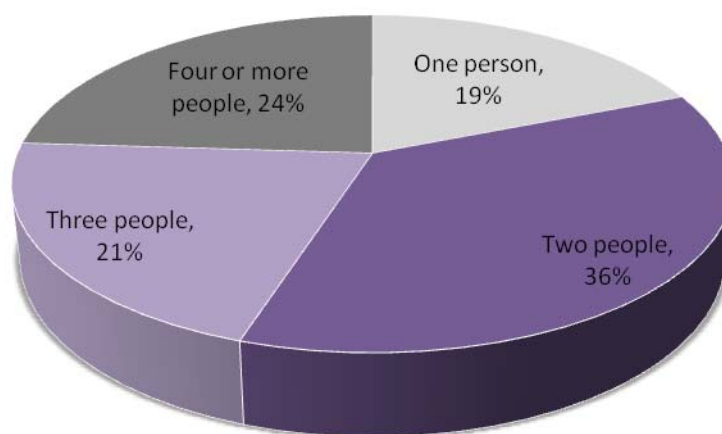


5.8 Individual Circumstances

Household Size

One in five (19%) respondents lived alone. Figure 5.16 shows the breakdown of household size.

Figure 5.16: Household Size
(Base: 589)



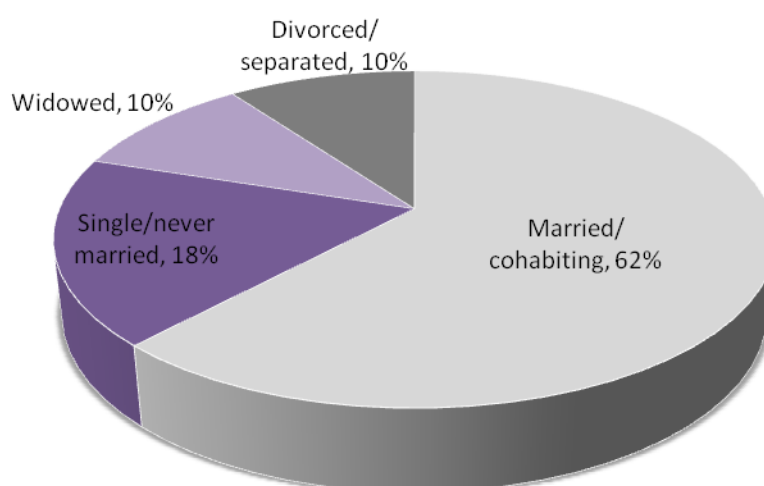
Ethnicity

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

Marital Status

Three in five (62%) respondents were married or living with their partner. Figure 5.17 shows the breakdown of marital status.

Figure 5.17: Marital Status
(Base: 578)



The age group most likely to describe themselves as married or cohabiting was 45-64 year olds, of whom 72% were married or living with their partner. Half (49%) of those aged 65 or over were widowed.

Internet Access

Three in five (60%) respondents had access to the internet, and 60% had access to the internet in their home. Those aged 16-44 were the most likely to have internet access at their home (80% in this age group did), while those aged 65 and over were the least likely to have internet access at home (15% did).

Car Ownership

Three in four (75%) respondents said that they or someone in their household owned a car. Car ownership was highest among those aged under 45 (81% of whom owned a car).

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to own a car (75% West Dunbartonshire; 58% NHSGGC).

Main Form of Transport

Respondents were asked which mode of transport they normally use for most journeys they make. One in 14 (7%) said their usual mode was active travel (walking, cycling); 67% said it was private personal travel (car, motorcycle) and 26% said that it was public travel (bus, train, underground, taxi).

Those aged 65 or over were the most likely to use public transport (46% in this age group did).

Caring Responsibilities

A small proportion (1.7%) of 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 12.5.

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to have caring responsibilities (1.7% West Dunbartonshire; 3.2% NHSGGC).

Educational Qualifications

One in 14 (7%) had no educational qualifications. Those aged under 45 were less likely to have no qualifications (4% in this age group had no qualifications).

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to have no qualifications (7% West Dunbartonshire; 21% NHSGGC).

Proportion of Household Income from State Benefits

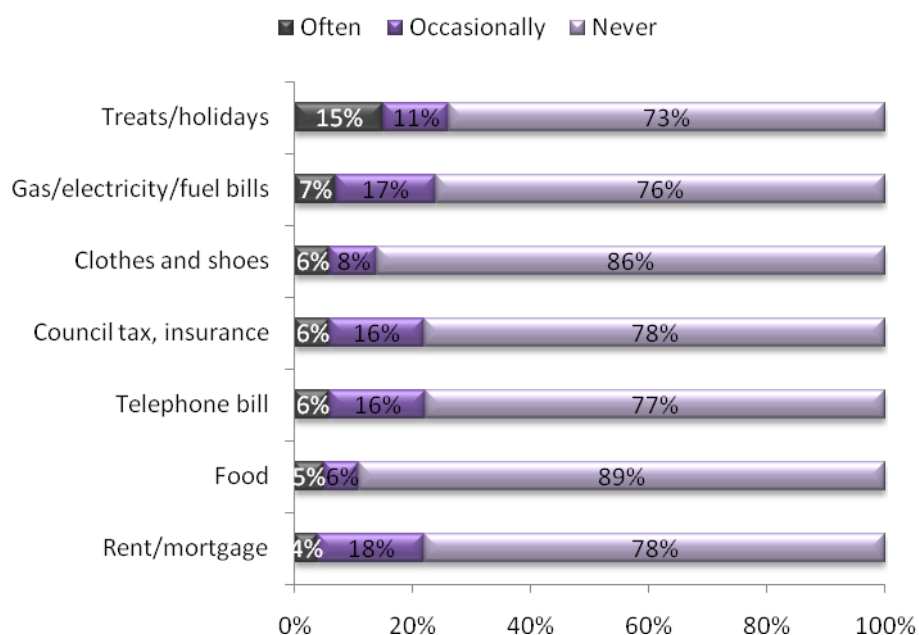
Three in five (61%) respondents said that at least some of their household income came from state benefits, and 17% said that all their household income came from state benefits.

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to say that all their household income came from state benefits (17% West Dunbartonshire; 24% NHSGGC).

Difficulty Meeting the Cost of Specific Expenses

Figure 5.18 shows the proportion of respondents who said they had difficulty meeting specific expenses often, occasionally and never.

Figure 5.18: How Often Have Difficulty Meeting the Costs of Specific Expenses (Q89)



All together, 31% 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 65 or over were less likely to say that they ever had difficulty meeting these costs (20% in this age group did).

Overall, those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to ever have difficulty meeting these costs (31% West Dunbartonshire; 47% NHSGGC).

Difficulty Finding Unexpected Sums

One in 11 (9%) said that they would have a problem meeting an unexpected expense of £20; three in ten (29%) said they would have a problem meeting an unexpected expense of £100 and three in four (76%) would have a problem finding £1,000 for an unexpected expense.

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to have a problem finding £20 (9% West Dunbartonshire; 18% NHSGGC), £100 (29% West Dunbartonshire; 49% NHSGGC) or £1,000 (76% West Dunbartonshire; 80% NHSGGC).

Factors about the Home that Affect Health

Less than 1% of respondents said that there was something about their home that affected their health.

Economic Activity

Half (53%) of respondents were in employment (50% were employed full time and 3% were employed part time). Of those aged under 75, 72% lived in households where the main wage earner was economically active.

Social Class

Social class classifications were derived from information about the occupation of the main wage earner (or former occupation if retired). In total, 6% comprised class A/B, 49% comprised C1/C2 and 45% comprised class D/E.

Migrant Workers

A small proportion (0.7%) of respondents described themselves as migrant workers.

Sexual Orientation

Most (99%) 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)	88.5%	589
Positive perception of local area as a place to bring up children (Q55)	88.0%	589
Currently act as a volunteer (Q62)	1.9%	589
Positive perception of reciprocity (Q71a)	84.3%	555
Positive perception of trust (Q71e)	87.8%	575
Value local friendships (Q71c)	87.5%	580
Positive perception of social support (Q71g)	90.0%	577

Nine in ten (89%) had a positive view of their area as a place to live and 88% had a positive view of their area as a place to bring up children. Those aged under 45 were less likely to have positive views of their area as a place to live or to bring up children.

A small proportion (2%) of respondents were volunteers.

More than four in five (84%) respondents had a positive view of reciprocity in their area and 88% had a positive view of trust in their area. Those aged under 45 were less likely to have positive views of reciprocity or trust.

Just under nine in ten (88%) valued local friendships. Those under the age of 45 were less likely to do so.

Nine in ten (90%) had a positive perception of social support in their area. Those aged under 65 were less likely to do so.

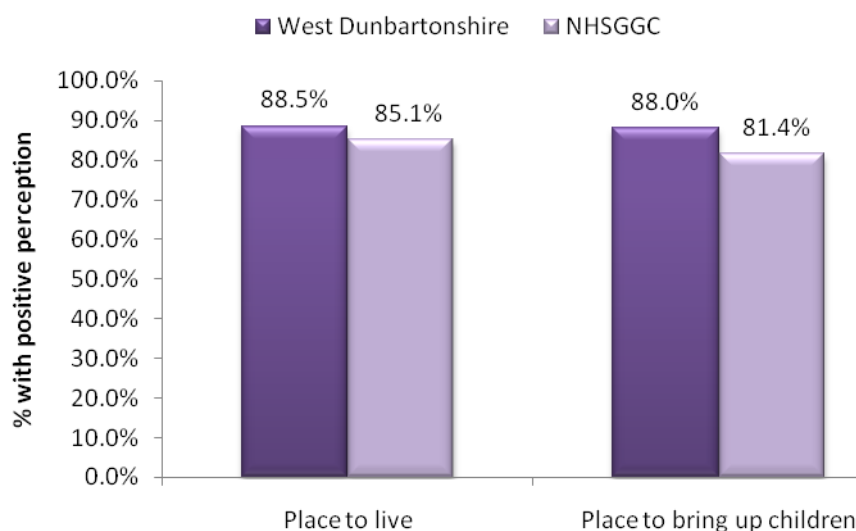
6.2 View of Local Area

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, 89% had a positive view of their area as a place to live and 88% 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 West 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: West Dunbartonshire and NHSGGC



Those aged under 45 were the least likely to have a positive view of their area as a place to live or to bring up children.

Table 6.2: Positive Perception of Area as a Place to Live (Q54) and as a Place to Bring Up Children (Q55) by Age

	Place to Live	Place to Bring Up Children	Unweighted base (n)
Age:			
16-44	84%	83%	211
45-64	92%	91%	173
65+	93%	94%	204
All	89%	90%	589

6.3 Volunteering

A small proportion (2%) of respondents were volunteers. Those who volunteered did so for a mean of 5.65 hours per week.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were less likely than those in the NHSGGC area as a whole to be a volunteer (1.9% West Dunbartonshire; 3.8% NHSGGC).

6.4 Reciprocity and Trust

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

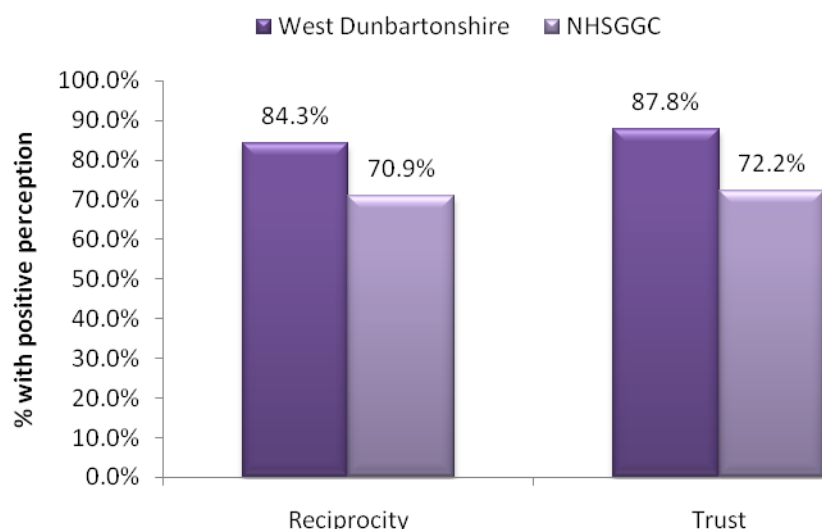
"This is a neighbourhood where neighbours look out for each other", and
 "Generally speaking, you can trust people in my local area".

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, 84% were positive about reciprocity and 88% were positive about trust.

Comparison with NHS Greater Glasgow & Clyde Area

Compared with those in the NHSGGC area as a whole, those in West 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: West Dunbartonshire and NHSGGC



Those aged 16-44 were the least likely to have positive views of reciprocity or trust. This is shown in Table 6.3.

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

	Positive Perception of Reciprocity	Unweighted base (n)	Positive Perception of Trust	Unweighted base (n)
Age:				
16-44	78%	193	84%	203
45-64	88%	165	89%	170
65+	92%	196	96%	201
All	84%	555	88%	575

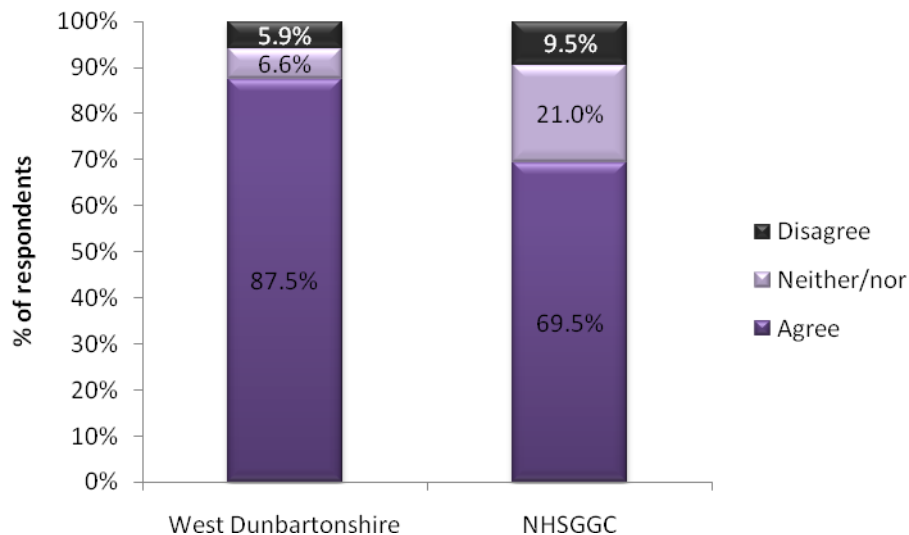
6.5 Local Friendships

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, 88% agreed with this statement.

Comparison with NHS Greater Glasgow & Clyde Area

Those in West Dunbartonshire were more likely than those in the NHSGGC area as a whole to value local friendships (88% West Dunbartonshire; 70% NHSGGC).

Figure 6.3: Value Local Friendships: West Dunbartonshire and NHSGGC



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	80%	207
45-64	92%	170
65+	98%	202
All	88%	580

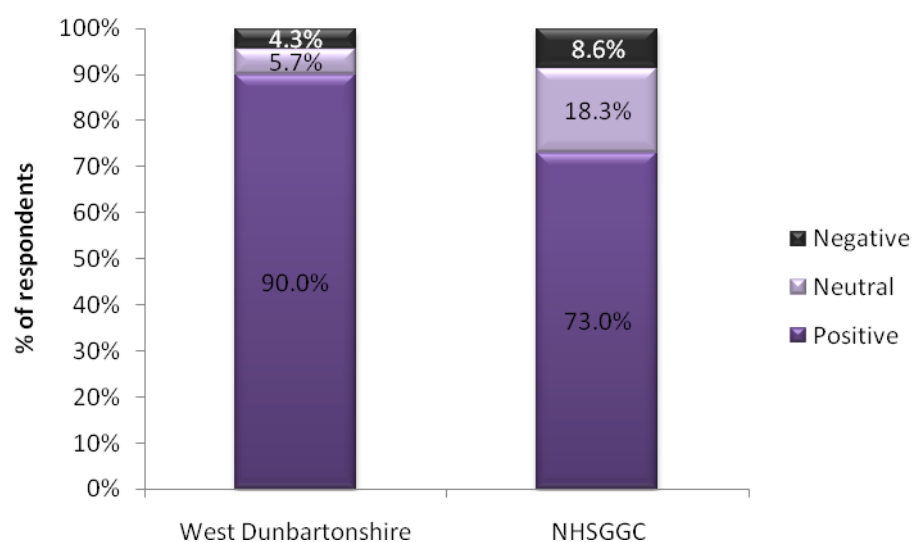
6.6 Social Support

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, nine in ten (90%) were positive about social support.

Comparison with NHS Greater Glasgow & Clyde Area

Compared to those in the NHSGGC area as a whole, those in West Dunbartonshire were more likely to have a positive view of social support (90% West Dunbartonshire; 73% NHSGGC).

Figure 6.4: Views of Social Support: West Dunbartonshire and NHSGGC



Those aged 65 or over were the most likely to have a positive view of social support.

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

	Positive View	Unweighted base (n)
Age:		
16-44	88%	206
45-65	89%	170
65+	97%	200
All	90%	577

7 Summary of Comparisons with NHS Greater Glasgow & Clyde Area

This chapter presents a summary of the comparisons of indicator data from West 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 West Dunbartonshire were:

- More likely to have a positive view of their general health;
- More likely to have a positive view of their mental/emotional wellbeing;
- More likely to have a positive view of their happiness;
- More likely to have a positive view of their quality of life;
- Less likely to be receiving treatment for an illness or condition, and specifically less likely to be receiving treatment for:
 - Arthritis/rheumatism/painful joints;
 - Depression;
 - Chronic pain;
 - Osteoporosis;
 - Stress related conditions;
- More likely to have visited a dentist in the last six months;
- (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 encouraged to participate in decisions affecting their health or treatment;
- (Of those who had used health services in the last year) more likely to feel that they had a say in how health services are delivered;
- (Of those who had used health services in the last year) more likely to 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 find it easy to get a GP appointment;
- More likely to find it easy to get a hospital appointment;
- More likely to find it easy to get a GP consultation within 48 hours;
- More likely to find it easy to access health services in an emergency;
- More likely to find it easy to get an appointment to see the dentist;
- Less likely to exceed the recommended weekly limit for alcohol;
- Less likely to have been a binge drinker in the previous week;
- More likely to meet the target for levels of physical activity;
- More likely to have participated in a sport in the last week;
- More likely to meet the target for fruit/vegetable consumption;
- More likely to meet the target for oily fish consumption;
- Less likely to exceed the recommended daily limit for high fat and sugary snacks;
- Less likely to have fast food takeaways once a week or more;
- Less likely to agree that they would feel embarrassed seeing a woman breastfeeding;
- More likely to feel that they belonged to the local area;
- More likely to feel valued as members of the community;
- More likely to agree that local people can influence local decisions;
- More likely to exchange small favours with neighbours;
- More likely to identify with a religion;
- More likely to feel safe using public transport;
- More likely to feel safe walking alone in their area, even after dark;
- Less likely to have negative perceptions of the amount of car crime, number of assaults/muggings, amount of vandalism, young people hanging around, amount of drug activity, level of alcohol consumption and level of unemployment in their area;

- Less likely to have negative perceptions of all 13 environmental issues in their area;
- More likely to have positive perceptions of all six local services;
- More likely to own a car;
- Less likely to have caring responsibilities;
- Less likely to have no qualifications;
- Less likely to receive all household income from state benefits;
- Less likely to have difficulty meeting the cost of bills, etc;
- Less likely to have a problem finding unexpected sums of £20, £100 or £1,000;
- More likely to have a positive view of their area as a place to live;
- More likely to have a positive view of their area as a place to bring up children;
- More likely to have a positive view of reciprocity;
- More likely to have a positive view of trust;
- More likely to value local friendships; and
- More likely to have a positive view of social support.

7.2 Indicators showing Less Favourable Findings

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

- Less likely to definitely feel in control of the decisions affecting their life;
- Less likely to brush their teeth twice or more per day;
- Less likely to be registered with a dentist;
- Less likely to belong to a club, association, etc; and
- Less likely to be a volunteer.

7.3 Other Significant Differences

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

- Less likely to have seen a GP in the last year;
- Less likely to have visited accident and emergency in the last year;
- More likely to have been admitted to hospital in the last year;
- Less likely to have seen a pharmacist for health advice in the last year;
- Less likely to have contacted NHS24 in the last year; and
- (Of those who ever drank alcohol) less likely to have drunk at home, in a restaurant, at a party with friends, in a club/disco or at someone else's home.

8 Trend Data

In this chapter, results from all indicator questions that represent a statistically significant change between 2008 and 2005 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 2005. The following formula yields a 'test statistic' (z):

$z = \frac{\hat{p}_1 - \hat{p}_2}{\sqrt{\hat{p}_p(1 - \hat{p}_p) \left(\frac{1}{n_1} + \frac{1}{n_2} \right)}}$	<p>p₁ = proportion observed in 2008 p₂ = proportion observed in 2005 n₁ = sample size in 2008 n₂ = sample size in 2005</p>
$\hat{p}_p = \frac{x_1 + x_2}{n_1 + n_2} = \frac{n_1 p_1 + n_2 p_2}{n_1 + n_2}$	

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.

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

For example, the confidence interval for the first result shown in Table 8.1 is (6.5 to 16.7). This means that we can be 95% confident that, had we interviewed the entire population of West Dunbartonshire in the surveys, the actual difference between the two sets of results would be between 6.5 and 16.7 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.

It should also be noted that in West Dunbartonshire the stratification weighting process in 2005 was based on the definition of Regeneration Outcome Agreement areas, defined as those in the bottom 17.5% most deprived areas (rather than bottom 15% used in other areas in 2005 and in all areas in 2008).

8.1 People's Perceptions of their Health and Illness

Tables 8.1 to 8.3 show that there was a considerable increase in the proportion who had positive perceptions of health and wellbeing across the two surveys.

Table 8.1: Positive Perceptions of General Health

Base: All

	West Dunbartonshire
2005	64.3%
2008	75.9%
Change (2005-2008)	+11.6%
P	<0.001
Confidence Interval	+6.5 to +16.7

Table 8.2: Positive Perceptions of Physical Wellbeing

Base: All

	West Dunbartonshire
2005	68.7%
2008	80.7%
Change (2005-2008)	+12.0%
P	<0.001
Confidence Interval	+7.1 to +16.9

Table 8.3: Positive Perceptions of Mental or Emotional Wellbeing

Base: All

	West Dunbartonshire
2005	75.0%
2008	90.1%
Change (2005-2008)	+15.1%
P	<0.001
Confidence Interval	+10.9 to +19.3

There was no significant change in the proportion who felt definitely in control of the decisions affecting their daily life.

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

Base: All

	West Dunbartonshire
2005	63.9%
2008	62.2%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

The proportion who had a positive perception of their quality of life rose considerably between 2005 and 2008.

Table 8.5: Positive Perception of Overall Quality of Life

Base: All

	West Dunbartonshire
2005	74.9%
2008	89.5%
Change (2005-2008)	+14.6
P	<0.001
Confidence Interval	+10.4 to +18.8

The proportion who had a limiting condition or illness fell between 2005 and 2008. This is shown in Table 8.6.

Table 8.6: Illness/Condition Affecting Daily Life

Base: All

	West Dunbartonshire
2005	26.3%
2008	17.2%
Change (2005-2008)	-9.1%
P	<0.001
Confidence Interval	-13.7 to -4.5

There was a considerable drop in the proportion of respondents who were receiving treatment for at least one condition between 2005 and 2008.

Table 8.7: Receiving Treatment for One or More Condition

Base: All

	West Dunbartonshire
2005	47.4%
2008	32.1%
Change (2005-2008)	-15.3%
P	<0.001
Confidence Interval	-20.8 to -9.8

There was an increase in the proportion of respondents with some or all of their own teeth.

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

Base: All

	West Dunbartonshire
2005	82.2%
2008	86.5%
Change (2005-2008)	+4.3%
P	<0.05
Confidence Interval	+0.2 to +8.4

There was an increase in the proportion of respondents who brushed their teeth twice or more per day.

Table 8.9: Proportion Brushing Teeth at Least Twice a Day

Base: Those with at least some of their own teeth

	West Dunbartonshire
2005	64.2%
2008	73.9%
Change (2005-2008)	+9.7%
P	<0.001
Confidence Interval	+4.5 to +14.9

8.2 The Use of Health Services

There was a decrease between 2005 and 2008 in the proportion who had seen a GP in the last year.

Table 8.10: Proportion Seen a GP in the Last Year

Base: All

	West Dunbartonshire
2005	84.0%
2008	74.1%
Change (2005-2008)	-9.9%
P	<0.001
Confidence Interval	-14.5 to -5.3

There was a decrease in the proportion who had been to accident and emergency in the last year.

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

Base: All

	West Dunbartonshire
2005	19.9%
2008	5.0%
Change (2005-2008)	-14.9%
P	<0.001
Confidence Interval	-18.5 to -11.3

The proportion of respondents who had visited hospital as an outpatient did not change significantly between 2005 and 2008.

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

Base: All

	West Dunbartonshire
2005	26.2%
2008	21.7%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

The proportion of respondents who were registered with a dentist fell between 2005 and 2008. However, the proportion who had been to the dentist within the last six months increased considerably. This is shown in Tables 8.13 and 8.14.

Table 8.13: Registered with a Dentist

Base: All

	West Dunbartonshire
2005	76.3%
2008	67.0%
Change (2005-2008)	-9.3%
P	<0.001
Confidence Interval	-14.4 to -4.2

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

Base: All

	West Dunbartonshire
2005	46.3%
2008	63.1%
Change (2005-2008)	+16.8%
P	<0.001
Confidence Interval	+11.3 to +22.3

8.3 Health Behaviours

The proportion of respondents who were current smokers fell between 2005 and 2008, as shown in Table 8.15.

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

Base: All

	West Dunbartonshire
2005	39.9%
2008	34.2%
Change (2005-2008)	-5.7%
P	<0.05
Confidence Interval	-11.1 to -0.3

There was a considerable 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

	West Dunbartonshire
2005	62.5%
2008	38.7%
Change (2005-2008)	-23.8%
P	<0.001
Confidence Interval	-29.3 to -18.3

There were considerable reductions 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

	West Dunbartonshire
2005	24.4%
2008	7.5%
Change (2005-2008)	-16.9%
P	<0.001
Confidence Interval	-20.9 to -12.9

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

Base: All

	West Dunbartonshire
2005	35.1%
2008	13.4%
Change (2005-2008)	-21.7%
P	<0.001
Confidence Interval	-26.4 to -17.0

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

Table 8.19: Proportion Meeting the Physical Activity Target

Base: All

	West Dunbartonshire
2005	47.8%
2008	66.9%
Change (2005-2008)	+19.1%
P	<0.001
Confidence Interval	+13.6 to +24.6

Proportionately many 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

	West Dunbartonshire
2005	23.3%
2008	47.5%
Change (2005-2008)	+24.2%
P	<0.001
Confidence Interval	+19.0 to +29.4

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

Table 8.21: Proportion Eating the Recommended Amount of Oily Fish

Base: All

	West Dunbartonshire
2005	32.2%
2008	27.5%
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 fell considerably between 2005 and 2008.

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

Base: All

	West Dunbartonshire
2005	46.1%
2008	25.8%
Change (2005-2008)	-20.3%
P	<0.001
Confidence Interval	-25.6 to -15.0

The proportion of respondents with a body mass of 25 or over (indicating overweight/obese) fell between 2005 and 2008. The proportion who were obese also fell.

Table 8.23: Body Mass Index

Base: All

	West Dunbartonshire
BMI of 25 or over	
2005	51.9%
2008	42.3%
Change (2005-2008)	-9.6%
P	<0.001
Confidence Interval	-15.2 to -4.0
BMI of 35 or over	
2005	2.8%
2008	2.5%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a
BMI indicting obese/extremely obese	
2005	16.6%
2008	9.2%
Change (2005-2008)	-7.4%
P	<0.001
Confidence Interval	-11.2 to -3.6

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

	West Dunbartonshire
2005	15.3%
2008	6.3%
Change (2005-2008)	-9.0%
P	<0.001
Confidence Interval	-12.5 to -5.5

The proportion of respondents who felt that they belonged to the area rose between 2005 and 2008.

Table 8.25: Proportion Feeling they Belong to Local Area

Base: All

	West Dunbartonshire
2005	74.5%
2008	88.1%
Change (2005-2008)	+13.6%
P	<0.001
Confidence Interval	+9.3 to +17.9

Between 2005 and 2008, there was a considerable rise 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

	West Dunbartonshire
2005	52.7%
2008	76.6%
Change (2005-2008)	+23.9%
P	<0.001
Confidence Interval	+18.7 to +29.1

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

	West Dunbartonshire
2005	56.6%
2008	76.1%
Change (2005-2008)	+19.5%
P	<0.001
Confidence Interval	+14.3 to +24.7

The proportion of respondents who felt safe in their own home, on public transport and walking alone in their area, rose between 2005 and 2008. This is shown in Tables 8.28 to 8.30.

Table 8.28: Proportion Feeling Safe in Their Own Home

Base: All

	West Dunbartonshire
2005	87.8%
2008	97.8%
Change (2005-2008)	+10.0%
P	<0.001
Confidence Interval	+7.2 to +12.8

Table 8.29: Proportion Feeling Safe Using Public Transport

Base: All

	West Dunbartonshire
2005	70.8%
2008	90.9%
Change (2005-2008)	+20.1%
P	<0.001
Confidence Interval	+15.8 to +24.4

Table 8.30: Proportion Feeling Safe Walking Alone After Dark

Base: All

	West Dunbartonshire
2005	54.1%
2008	76.4%
Change (2005-2008)	+22.3%
P	<0.001
Confidence Interval	+17.1 to +27.5

8.5 Individual Circumstances

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

Table 8.31: Proportion Cohabiting/Married etc

Base: All

	West Dunbartonshire
2005	65.7%
2008	61.9%
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

	West Dunbartonshire
2005	34.0%
2008	25.7%
Change (2005-2008)	-8.3%
P	<0.01
Confidence Interval	-13.4 to -3.2

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

Base: All

	West Dunbartonshire
2005	9.3%
2008	2.1%
Change (2005-2008)	-7.2%
P	<0.001
Confidence Interval	-9.8 to -4.6

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

	West Dunbartonshire
2005	40.9%
2008	59.6%
Change (2005-2008)	+18.7%
P	<0.001
Confidence Interval	+13.2 to +24.2

Table 8.35 shows there was a rise between 2005 and 2008 in the proportion who had a car.

Table 8.35: Proportion with a Car

Base: All

	West Dunbartonshire
2005	58.8%
2008	75.1%
Change (2005-2008)	+16.3%
P	<0.001
Confidence Interval	+11.1 to +21.5

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

Table 8.36: Proportion with No Qualifications

Base: All

	West Dunbartonshire
2005	40.3%
2008	7.4%
Change (2005-2008)	-32.9%
P	<0.001
Confidence Interval	-37.3 to -28.5

There was a decrease 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

	West Dunbartonshire
2005	23.7%
2008	17.3%
Change (2005-2008)	-6.4%
P	<0.01
Confidence Interval	-10.9 to -1.9

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

Table 8.38: Proportion with a Positive Perception of Household Income

Base: All

	West Dunbartonshire
2005	62.8%
2008	76.6%
Change (2005-2008)	+13.8%
P	<0.001
Confidence Interval	+8.7 to +18.9

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

Table 8.39: Proportion Having Difficulties Finding Unexpected Expenses

	West Dunbartonshire
Difficulty finding £20	
2005	2.4%
2008	1.2%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a
Difficulty finding £100	
2005	21.9%
2008	9.0%
Change (2005-2008)	-12.9%
P	<0.001
Confidence Interval	-16.9 to -8.9
Difficulty finding £1,000	
2005	54.3%
2008	36.6%
Change (2005-2008)	-17.7
P	<0.001
Confidence Interval	-23.2 to -12.2

The proportion of main wage earners in full time employment did not change significantly between 2005 and 2008.

Table 8.40: Proportion of Main Wage Earners Employed Full Time

Base: All

	West Dunbartonshire
2005	58.2%
2008	62.2%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

Between 2005 and 2008 there was no significant change in the proportion of households with no adults in employment.

Table 8.41: Proportion of Households with No Adults in Employment

Base: All

	West Dunbartonshire
2005	36.7%
2008	34.9%
Change (2005-2008)	n/a
P	n/a
Confidence Interval	n/a

8.6 Social Capital

There was a rise between 2005 and 2008 in the proportion of respondents who had a positive perception of their area as a place to live and as a place to bring up children. This is shown in Tables 8.42 and 8.43.

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

Base: All

	West Dunbartonshire
2005	72.4%
2008	88.5%
Change (2005-2008)	+16.1%
P	<0.001
Confidence Interval	+11.7 to +20.5

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

Base: All

	West Dunbartonshire
2005	65.3%
2008	88.0%
Change (2005-2008)	+22.7%
P	<0.001
Confidence Interval	+18.1 to +27.3

Tables 8.44 and 8.45 show that between 2005 and 2008 there was a rise in the proportion of respondents with positive perceptions of reciprocity and trust.

Table 8.44: Proportion with Positive Perception of Reciprocity

Base: All

	West Dunbartonshire
2005	69.5%
2008	84.3%
Change (2005-2008)	+14.8%
P	<0.001
Confidence Interval	+10.1 to +19.5

Table 8.45: Proportion with Positive Perception of Trust

Base: All

	West Dunbartonshire
2005	66.9%
2008	87.8%
Change (2005-2008)	+20.9%
P	<0.001
Confidence Interval	+16.3 to +25.5

The proportion of respondents who valued local friendships rose between 2005 and 2008.

Table 8.46: Proportion Valuing Local Friendships

Base: All

	West Dunbartonshire
2005	75.4%
2008	87.5%
Change (2005-2008)	+12.1%
P	<0.001
Confidence Interval	+7.8 to +16.4

Between 2005 and 2008 there was a rise 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

	West Dunbartonshire
2005	74.9%
2008	90.0%
Change (2005-2008)	+15.1%
P	<0.001
Confidence Interval	+10.9 to +19.3

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 were 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 different 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 a 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.

As 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

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:

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

ci 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:	
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Main FINAL

NHS Greater Glasgow & Clyde Health and Wellbeing Survey 2008
Questionnaire
(IK20408)

OFFICE USE

Serial Number

NAME

INTERVIEWER
ID NUMBER

--	--	--	--

ADDRESS

QUESTIONNAIRE
NUMBER

--	--	--	--

POSTCODE

AGE

--	--

TELEPHONE

Social class

AB 1
C1 2
C2 3
DE 4

Occupation of Chief Wage Earner:

Good morning/afternoon/evening. My name is from an independent research agency called **mrak** 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				
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QUESTIONNAIRE NUMBER				
-------------------------	--	--	--	--

**DO NOT FILL IN
RESPONDENT DETAILS ON THIS PAGE**

FILL IN ALL OTHER INFO

START TIME				
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THANKS

FINISH TIME				
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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=573)**

Excellent	13.7
Good	62.1
Fair	15.9
Poor	8.3
Don't know	n/a

GO TO Q2

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=580)**

1	Coronary heart disease	4.0
2	Stroke	1.3
3	Arthritis; rheumatism ; painful joints	5.6
4	Osteoporosis	0.5
5	Chronic pain	0.8
6	Clinical depression	1.5
7	Diabetes	4.6
8	Cancer	1.9
9	Asthma, bronchitis, or persistent cough	5.9
10	Epilepsy	0.9
11	Acquired brain injury	0.2
12	Stress related conditions, e.g. difficulty sleeping or concentrating	0.2
13	Severe hearing problems	0.7
14	Severe eyesight problems	0.5
15	Accident / injury	0.4
16	Gastro-intestinal problems, e.g. peptic ulcer disease, irritable bowel syndrome	2.3
17	High blood pressure	7.6
18	Drug or alcohol related conditions	0.4
19	Sexually transmitted infections, e.g. gonorrhoea, syphilis, chlamydia	0.2
	None	67.9
	Refused	n/a
	Other	1.1

GO TO Q3

GO TO Q2A

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

Q2a Other (please specify) – **RECORD VERBATIM (47 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=552)**

Yes	17.2	GO TO Q4
No	82.8	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=129)		
	A physical disability	51.1	
	A mental or emotional health problem	13.4	
	A long-term illness	67.8	GO TO Q5
	Don't know	1.1	
	Other	0.0	GO TO Q4A

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

Q4a Other (please specify) – **RECORD VERBATIM (1 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=74)	67.0	30.2	2.8	n/a
B	Holding down or obtaining a job (N=75)	68.0	21.7	10.3	n/a
C	Taking exercise/physical activity (N=129)	75.6	21.7	2.7	n/a
D	Socialising (N=129)	19.3	50.7	30.1	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=576)	74.1
b. Seen a nurse/midwife from your surgery? (N=578)	24.8
c. Seen a physiotherapist/chiroprapist/dietician/occupational therapist/clinical psychologist from your surgery? (N=588)	8.0
d. Seen someone else from your surgery e.g. health care assistant? (N=588)	2.9

GO TO Q7

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=589)	5.4
b. Contacted NHS24? (N=588)	9.4
c. Been to accident and emergency? (N=588)	5.0
d. Visited a hospital out-patient department to see a doctor? (Do not include visits for an X-ray or other tests) (N=588)	21.7
e. Been admitted to hospital (either as a day case or for a longer stay)? (N=588)	13.3
f. Used GP out of hours service (GEMS) (N=588)	2.9

GO TO Q8

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=316)	65.1	32.7	2.2	n/a	n/a
B	Have you been encouraged to participate in decisions affecting your health or treatment? (N=307)	42.4	48.7	8.9	n/a	n/a
C	Do you feel that you have a say in how these services are delivered? (N=264)	17.7	39.4	42.8	n/a	n/a
D	Do you feel that your views and circumstances are understood and valued? (N=290)	40.3	53.7	6.0	n/a	n/a

GO TO Q9

Q9 Are you registered with a dentist? **SINGLE CODE (N=573)**

Yes	67.0	GO TO Q10
No	33.0	GO TO Q11
Refused	n/a	

Q10 Do you receive NHS or private dental treatment? **SINGLE CODE (N=341)**

NHS	89.5	GO TO Q11
Private	10.5	
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=404)**

Within last 6 months	63.1	GO TO Q12
Within 6 months to 15 months	13.8	
Over 15 months	23.2	
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=589)

All of them	49.0	GO TO Q13
Some of them	37.6	
None of them	13.5	GO TO Q14
Refused	n/a	

Q13 How often do you brush your teeth? **SINGLE CODE (N=451)**

Twice or more a day	73.9	GO TO Q14
About once a day	23.8	
Less than once a day	1.2	
Seldom or never	1.2	
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=581)	1.4	9.5	8.3	30.4	50.5	n/a
B	Access health services in an emergency? (N=532)	0.5	3.8	8.0	34.4	53.3	n/a
C	Obtain an appointment at the hospital? (N=491)	0.4	4.4	7.7	35.8	51.6	n/a
D	Travel to the hospital for an appointment? (N=555)	0.8	3.3	10.5	37.7	47.7	n/a
E	Get an appointment to see the dentist? (N=363)	0.8	2.1	5.8	39.4	52.0	n/a
F	When needed, get a consultation with someone at your GP surgery within 48 hours? (N=517)	1.3	2.6	5.3	40.1	50.5	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=589)

a) ...been able to concentrate on whatever you're doing?	Better than usual 1.6	Same as usual 85.7	Less than usual 11.3	Much less than usual 1.4
b) ...lost much sleep over worry?	Not at all 70.7	No more than usual 21.7	Rather more than usual 7.4	Much more than usual 0.2
c) ...felt that you are playing a useful part in things?	More so than usual 2.1	Same as usual 84.8	Less useful than usual 11.9	Much less useful 1.2
d) ...felt capable of making decisions about things?	More so than usual 1.8	Same as usual 85.7	Less so than usual 11.5	Much less capable 1.0
e) ...felt constantly under strain?	Not at all 73.9	No more than usual 20.8	Rather more than usual 5.1	Much more than usual 0.2
f) ...felt you couldn't overcome your difficulties?	Not at all 74.1	No more than usual 21.0	Rather more than usual 4.5	Much more than usual 0.3
g) ...been able to enjoy your normal day-to-day activities?	More so than usual 4.7	Same as usual 83.4	Less so than usual 10.9	Much less than usual 1.0
h) ...been able to face up to your problems?	More so than usual 1.2	Same as usual 88.1	Less able than usual 10.4	Much less able 0.4
i) ...been feeling unhappy and depressed?	Not at all 72.6	No more than usual 21.1	Rather more than usual 5.9	Much more than usual 0.5
j) ...been losing confidence in yourself?	Not at all 74.5	No more than usual 20.5	Rather more than usual 4.9	Much more than usual 0.1
k) ...been thinking of yourself as a worthless person?	Not at all 74.7	No more than usual 21.1	Rather more than usual 3.8	Much more than usual 0.4
l) ...been feeling reasonably happy, all things considered?	More so than usual 1.0	About same as usual 88.0	Less so than usual 10.4	Much less than usual 0.6

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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=589)

	None of the time	Rarely	Some of the time	Often	All of the time
I've been feeling optimistic about the future	3.1	10.0	62.3	21.7	2.9
I've been feeling useful	1.6	5.5	62.6	27.0	3.3
I've been feeling relaxed	0.5	7.1	61.8	24.5	6.2
I've been interested in other people	1.0	4.1	61.0	29.6	4.2
I've had energy to spare	5.5	14.1	63.2	15.4	1.9
I've been dealing with problems well	1.1	3.4	60.7	28.8	6.0
I've been thinking clearly	0.3	3.8	56.9	28.9	10.2
I've been feeling good about myself	1.3	4.3	61.2	23.6	9.8
I've been feeling close to other people	0.6	2.4	61.3	26.6	9.1
I've been feeling confident	0.5	5.2	62.7	26.6	5.1
I've been able to make up my own mind about things	1.0	3.6	58.9	27.6	8.9
I've been feeling loved	0.7	3.3	58.2	25.7	12.1
I've been interested in new things	1.8	5.6	64.0	26.4	2.2
I've been feeling cheerful	1.0	5.5	62.1	28.9	2.4

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=589)

Yes	3.6	GO TO Q18
No	96.4	GO TO Q21

Q18 How many people had an accidental injury in the home in the past year? (N=18)

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=18)

WRITE NUMBER OF UNDER 16's IN THE BOX:

GO TO Q20

0: 60.7

1: 39.3

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 – INCLUDING THOSE AGED 16 AND OVER)

	DR or Nurse (Not at Hospital)		At Hospital	
Person 1 (N=18)	0 1	22.6 77.4	0 1	71.5 28.5
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=589)

Most of the time	30.3
Some of the time	8.4
Seldom	37.5
Never	23.8
Don't know	n/a

GO TO Q22

Q22 **SHOWCARD 5.** Which of the following statements best describes you at present?
SINGLE CODE (N=589)

a.	I have never smoked tobacco	50.6	GO TO INSTRUCTION BEFORE Q25
b.	I have only tried smoking once or twice	0.6	
c.	I have given up smoking	14.6	
d.	I smoke some days	3.5	GO TO Q23
e.	I smoke every day	30.6	

Q23 On average, how many cigarettes a day do you smoke? **(N=189)**
(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	14.89
------	-------

GO TO Q24

Q24 Do you intend to stop smoking? **SINGLE CODE (N=192)**

Yes	39.9	GO TO INSTRUCTION BEFORE Q25
No	60.1	

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=291)**

Nicotine gum e.g. Nicorette, NiQuitin, Nicotinelle	0.9	GO TO INSTRUCTION AFTER Q25
Nicotine patches that you stick on your skin e.g. Nicorette, Nicoderm, Nicotinelle	16.3	
Nasal spray / nicotine inhaler e.g. Nicorette, Nicotrol	1.9	
No	76.7	
Other	5.3	

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

Q25A Other (please specify) – **RECORD VERBATIM (13 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=41)**

Yes	30.6	GO TO Q26A
No	69.4	GO TO Q27

Q26a Which of these NHS Smokefree services did you use? **READ OUT (N=13)**

Community Group	34.4
Pharmacy Service	78.4
Hospital Service	66.4
Pregnancy service	0.0
Other	13.8

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

Q26b Other (please specify) – **RECORD VERBATIM (3 Responses)**

GO TO Q27

Q27 How often do you drink alcohol? **PROBE TO PRECODE – SINGLE CODE (N=588)**

Never	37.1	GO TO Q32
Less than once a month	14.3	
More than once a month but not weekly	13.9	
1-2 days per week	29.4	GO TO Q28
3-5 days per week	3.9	
6-7 days per week	1.4	
Refused		

Q28 Have you had a drink containing alcohol in the past 7 days? **SINGLE CODE (N=341)**

Yes	52.1	GO TO Q28A
No	47.9	GO TO Q30

Q28a **SHOWCARD 6.** Have you had any of the following in the past 7 days? **(N=180)**

Normal strength beer/lager/stout/cider (e.g. McEwan's lager, heavy) – Pints	27.8
Normal strength beer/lager/stout/cider (e.g. McEwan's lager, heavy) – Cans	13.1
Normal strength beer/lager/stout/cider (e.g. McEwan's lager, heavy) – Bottles	7.0
Strong beer/lager/cider (e.g. Guinness, Murphy's, Budweiser) – Pints	1.3
Strong beer/lager/cider (e.g. Guinness, Murphy's, Budweiser) – Cans	0.0
Strong beer/lager/cider (e.g. Guinness, Murphy's, Budweiser) – Bottles	0.7
Extra strong beer/lager/ cider (e.g. Tennant's super lager) – Pints	0.0
Extra strong beer/lager/ cider (e.g. Tennant's super lager) – Cans	0.0
Extra strong beer/lager/ cider (e.g. Tennant's super lager) – Bottles	0.0
Single measures of spirits (e.g. whisky, gin, vodka) (a bottle contains 28 measures)	33.3
Single measures of Martini/sherry/buckfast/Mad Dog 20/20 (a bottle contains 14 measures)	3.0
Glasses of wine – Small Glass	11.9
Glasses of wine – Large Glass	9.5
½ bottle of wine	3.9
Full bottle of wine	6.3
Small bottles (300ml) of alcoholic carbonate (alcopops, such as Smirnoff Ice and Bacardi Breezer)	0.0
Large bottles (1.5litre) of alcoholic carbonate (alcopops, such as Smirnoff Ice and Bacardi Breezer)	0.0
Other	0.6

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 (1 Response)

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=341)**

In a pub	51.6
In a restaurant	11.8
In a club or disco	8.4
At a party with friends	9.0
At my home	66.3
At someone else's home	7.1
Out on the street, in a park or other outdoor area	0.9
Somewhere else	1.0

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

Q30a Somewhere else (write in) – **RECORD VERBATIM (4 Responses)**

GO TO Q31

Q31 In which place did you drink the most alcohol (again in the last 6 months)? **(N=341)**

In a pub	39.3
In a restaurant	3.5
In a club or disco	2.0
At a party with friends	2.7
At my home	51.6
At someone else's home	0.5
Out on the street, in a park or other outdoor area	0.0
Somewhere else	0.3

GO TO Q32

GO TO Q31A

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

Q31a Somewhere else (write in) – **RECORD VERBATIM (2 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 EACH DAY? 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=587)

WRITE NUMBER IN THE BOX:

mean	2.27
------	------

GO TO Q33

Q33 On average, how many portions of vegetables or salad (not counting potatoes) do you eat each day? 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=587)

WRITE NUMBER IN THE BOX:

mean	2.34
------	------

GO TO Q34

- Q34 How often per day 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=585)

WRITE NUMBER IN THE BOX:

mean	1.07
------	------

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=585)

WRITE NUMBER IN THE BOX:

mean	2.20
------	------

GO TO Q36

Note Q36-Q38 refers to the number of times per week

- Q36 How often PER WEEK 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=589)

WRITE NUMBER IN THE BOX:

mean	1.12
------	------

GO TO Q37

- Q37 How frequently do you eat fast food takeaways? **PROBE TO PRECODE (N=589)**

Never	22.1
Less than once a month	46.2
More than once a month but not weekly	17.7
1-2 days a week	12.6
3-5 days a week	1.0
6-7 days a week	0.5

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=581)

WRITE NUMBER IN THE BOX:

GO TO Q39

0	1	2	3	4	5	6	7
10.0	0.8	2.4	1.2	2.9	3.9	2.2	76.6

Q39 What, if anything, did you eat for breakfast this morning?
(code as many as apply) (N=589)

Nothing	12.9
Breakfast cereal	52.1
Porridge/rice porridge	11.0
Bread / toast	24.0
Fruit (incl. fresh fruit juice/smoothie, but not fruit squash/cordial)	6.1
Yoghurt	1.3
Meat (e.g. bacon, sausage, black pudding)	7.0
Egg(s)	3.3
Breakfast bar, e.g. Nutrigrain	0.0
Pastry, e.g. croissant, pain au chocolat, pie	0.5
Other	0.8

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

Q39a Other (please specify) – **RECORD VERBATIM (18 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=553)	29.6	60.7	9.8	0.0	n/a
b.	Women should only breastfeed their babies at home or in private (N=533)	1.4	21.0	61.2	16.5	n/a
c.	I would feel embarrassed seeing a women breastfeeding her baby (N=559)	1.0	14.1	46.7	38.2	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 OR 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=510) Stone Pounds
Or
b. Kilograms (N=20)

GO TO Q42

Q42 What is your height?
(WRITE IN HEIGHT IN FEET/INCHES OR 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=539)

--	--	--

 Feet

--	--	--

 Inches

--	--	--

GO TO Q43
 Or
 b. Centimeters (N=3)

--	--	--

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=589)

WRITE NUMBER IN THE BOX:

--

GO TO Q44

0	1	2	3	4	5	6	7
21.7	2.0	4.0	7.1	3.9	13.9	7.2	40.2

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=589)

WRITE NUMBER IN THE BOX:

--

GO TO Q45

0	1	2	3	4	5	6	7
65.4	4.3	10.8	7.8	4.3	3.5	1.4	2.6

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=589)

Yes – all activities have been included	96.5	GO TO Q48
No – there are more activities to add	3.5	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=18)

WRITE NUMBER IN THE BOX:

--

GO TO Q47

0	1	2	3	4	5	6	7
0.0	19.6	22.4	35.4	11.0	5.0	6.7	0.0

- 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=18)

WRITE NUMBER IN THE BOX:

GO TO Q48

0	1	2	3	4	5	6	7
33.9	6.8	26.8	25.9	0.0	0.0	6.7	0.0

- 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=466)	4.8	1.0	1.7	0.2	0.1	0.0	0.1	92.1	n/a
Cycling (N=466)	1.7	0.3	0.2	0.3	0.4	0.0	0.6	96.5	n/a
Workout at a gym / exercise bike / weight training (N=468)	2.1	4.3	4.0	1.4	0.0	0.0	0.1	88.1	n/a
Aerobics / Keep Fit / Gymnastics / Dance for Fitness (N=467)	0.2	1.0	0.6	0.3	0.0	0.0	0.1	97.8	n/a
Any other type of dancing (N=467)	1.1	0.3	0.2	0.0	0.0	0.1	0.1	98.3	n/a
Running / jogging (N=467)	2.2	2.8	1.8	0.7	1.4	0.2	0.1	91.0	n/a
Football / rugby (N=467)	3.8	4.3	0.3	0.3	0.3	0.0	0.1	90.9	n/a
Badminton / Tennis (N=463)	0.9	0.8	0.0	0.0	0.0	0.0	0.1	98.2	n/a
Squash (N=462)	0.4	0.	0.0	0.0	0.0	0.0	0.1	99.5	n/a
Exercises (e.g. press-up, sit ups) (N=462)	0.7	0.6	0.3	0.0	0.1	0.0	0.1	98.2	n/a

GO TO Q49

- Q49 Have you done any other sport or exercise not listed on the card? (N=589)

Yes	22.2	GO TO Q50
No	77.8	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.
(117 responses)

a.

b. Ask frequency as above (N=117)

1 day a week	6.5
2 days a week	1.5
3 days a week	1.7
4 days a week	4.0
5 days a week	13.4
6 days a week	0.0
7 days a week	72.8

GO TO Q51

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=589)**

**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=589)**

**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=589)

1	2	3	4	5	6	7
9.0	23.5	56.9	8.2	1.4	0.4	0.6

GO TO Q54

b. Which face best rates your general physical well being?
(WRITE NUMBER IN BOX) (N=589)

1	2	3	4	5	6	7
6.0	15.1	59.6	14.0	2.8	1.6	0.9

c. Which face best rates your general mental or emotional well being?
(WRITE NUMBER IN BOX) (N=589)

1	2	3	4	5	6	7
7.2	22.1	60.8	7.0	1.6	0.6	0.8

- 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=589)**

WRITE NUMBER IN THE BOX:

GO TO Q55

1	2	3	4	5	6	7
9.6	22.6	56.3	8.9	1.2	0.1	1.2

- Q55 **SHOWCARD 9.** And how do you feel about this area as a place in which to bring up children? **(N=589)**

WRITE NUMBER IN THE BOX:

GO TO Q56

1	2	3	4	5	6	7
8.3	23.8	56.0	8.0	1.4	0.6	2.0

- 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=500)	3.6	7.4	30.5	38.2	6.6	7.5	6.2	n/a
B	The number of burglaries in your area (N=546)	6.8	17.4	62.5	5.4	3.7	2.8	1.4	n/a
C	The amount of vandalism / graffiti in your area (N=574)	6.2	17.2	59.3	7.7	3.9	3.2	2.4	n/a
D	The number of assaults / muggings in your area (N=559)	9.3	16.2	60.7	5.7	3.5	2.9	1.8	n/a
E	The amount of drug activity in your area (N=527)	5.5	8.5	61.6	8.1	7.0	5.1	4.2	n/a
F	The level of alcohol consumption in your area (N=551)	4.1	6.5	61.7	11.2	4.6	8.2	3.8	n/a
G	Young people hanging around in your area (N=577)	6.6	18.1	58.8	8.5	2.7	3.2	2.0	n/a
H	The amount of car crime in your area (N=552)	11.5	19.7	60.3	5.9	0.6	1.4	0.6	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=582)	9.0	21.8	57.1	5.2	1.7	2.6	2.6	n/a
B	The amount of noise and disturbance in your area (N=578)	15.9	21.6	55.6	2.6	1.0	1.6	1.7	n/a
C	The standard of street lighting in your area (N=577)	15.5	26.5	55.0	1.2	0.8	0.6	0.3	n/a
D	The amount of vacant/derelict land in your area (N=576)	20.1	21.3	55.3	2.5	0.6	0.2	0.0	n/a
E	The number of vacant/derelict buildings in your area (N=575)	23.0	20.4	53.8	2.0	0.7	0.1	0.0	n/a
F	The amount of dog's dirt in your area (N=571)	7.7	13.3	63.8	10.7	2.7	1.1	0.6	n/a
G	The number of abandoned cars in your area (N=569)	22.0	19.5	54.7	2.9	0.7	0.0	0.2	n/a
H	The amount of traffic in your area (N=574)	11.0	17.0	61.0	8.2	1.8	0.7	0.3	n/a
I	The level of smells from sewers in your area (N=579)	21.9	20.7	53.7	2.2	0.6	0.7	0.1	n/a
J	The amount of broken glass lying around in your area (N=577)	11.4	20.7	57.5	7.4	1.6	0.9	0.4	n/a
K	The number of uneven pavements in your area (N=583)	12.1	24.8	57.5	3.0	1.8	0.4	0.4	n/a
L	The availability of safe play spaces in your area (N=570)	14.6	20.7	56.9	4.0	2.3	0.8	0.6	n/a
M	The availability of pleasant places to walk etc in your area (N=573)	16.7	20.8	56.5	3.5	1.5	0.9	0.1	n/a

GO TO Q58

Q58 Do you belong to any social clubs, associations, church groups or anything similar?
SINGLE CODE (N=589)

Yes	10.0	GO TO Q59
No	90.0	GO TO Q61

Q59 How many do you attend regularly in your local area? And elsewhere? **(N=96)**
(Write number in each box. If 'none' write in '0'.)

a. Your local area
(WRITE NUMBER IN BOX)

mean	1.12
------	------

GO TO Q60

b. Elsewhere
(WRITE NUMBER IN BOX)

mean	0.00
------	------

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=96)**

Yes	7.4
No	92.6

GO TO Q61

Q61 **X**

Q62 Do you act as a volunteer? **SINGLE CODE (N=589)**

Yes	1.9	GO TO Q63
No	98.1	GO TO Q64

Q63 How many hours (approximately) do you volunteer per week? **(N=15)**

WRITE NUMBER IN THE BOX:

mean	5.65
------	------

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=589)

GO TO Q65

<input type="text"/>	<input type="text"/>	Years	<input type="text"/>	<input type="text"/>	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=589)

GO TO Q66

<input type="text"/>	<input type="text"/>	Years	<input type="text"/>	<input type="text"/>	Months
----------------------	----------------------	-------	----------------------	----------------------	--------

Q66 Do you have access to the internet? **SINGLE CODE (N=589)**

Yes	59.8	GO TO Q67
No	40.2	GO TO Q68

Q67	Is this at home, elsewhere or both? SINGLE CODE (N=269)		
	Home	81.0	
	Elsewhere	0.3	GO TO Q68
	Both	18.7	
Q68	Is there anything about your home that affects your health? SINGLE CODE (N=589)		
	Yes	0.5	GO TO Q69
	No	99.5	GO TO Q70
Q69	What would that be? – RECORD VERBATIM (3 Responses)		
			GO TO Q70
Q70	Is your home bought or rented? SINGLE CODE (N=587)		
	Owner occupied/being bought	63.1	
	Rented from private owner	6.0	
	Rented from local housing association or Glasgow Housing Association	30.9	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=555)	7.0	77.3	12.5	2.4	0.8	n/a
B	I feel I belong to this local area (N=576)	10.3	77.8	5.4	5.7	0.9	n/a
C	The friendships and associations I have with other people in my local area mean a lot to me (N=580)	11.1	76.4	6.6	3.6	2.3	n/a
D	I feel valued as a member of my community (N=571)	5.2	71.4	17.3	3.8	2.3	n/a
E	Generally speaking, you can trust people in my local area (N=575)	6.5	81.3	7.1	2.6	2.5	n/a
F	By working together, people in my neighbourhood can influence decisions that affect my neighbourhood (N=517)	3.2	72.9	20.0	3.0	0.9	n/a
G	If I have a problem, there is always someone to help me (N=577)	10.7	79.3	5.7	3.4	0.9	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=588)

WRITE NUMBER IN THE BOX:

mean	1.43
------	------

GO TO Q73

Q73 Do you ever feel isolated from family and friends? **SINGLE CODE (N=588)**

Yes	6.3
No	93.7
Refused	n/a

GO TO Q74

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=584)	0.0	4.5	21.8	65.9	7.8	n/a
B	Local schools (N=534)	0.0	0.1	8.6	79.1	12.2	n/a
C	Public transport (N=575)	0.2	0.9	7.5	84.2	7.2	n/a
D	Activities for young people (N=497)	2.1	13.7	25.3	56.5	2.4	n/a
E	Leisure / sports facilities (N=504)	1.2	4.6	33.0	58.6	2.7	n/a
F	Childcare provision (N=448)	0.3	4.3	31.5	62.4	1.5	n/a
G	Police (N=557)	0.5	3.4	16.1	66.7	13.2	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=589)

Walking	7.0
Driver car / van	61.2
Passenger car / van	5.5
Motorcycle / moped	0.2
Bicycle	0.1
School bus	0.0
Works bus	0.0
Ordinary (service) bus	18.6
Taxi / minicab	2.3
Train	5.1
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=557)	5.3	85.5	5.7	2.9	0.6	n/a
B	I feel safe walking alone around this local area even after dark (N=575)	3.4	72.9	5.9	14.5	3.2	n/a
C	I feel safe in my own home (N=587)	30.7	67.1	1.2	0.6	0.3	n/a

GO TO Q77

Q77 SHOWCARD 15. Taking all things into account, which face best indicates how happy you are in general? **(N=589)**

WRITE NUMBER IN THE BOX:

GO TO Q78

1	2	3	4	5	6	7
4.5	24.6	61.5	8.1	0.7	0.3	0.3

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=578)**

Definitely	62.2
To some extent	34.4
No	3.4
Don't know	n/a

GO TO Q79

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=589)

WRITE NUMBER IN THE BOX:

--	--

1	2	3	4	5	6	7	8	9	10
19.0	36.3	21.1	17.4	4.8	1.0	0.4	0.1	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			AGE				WORK STATUS		
	1 = Male	2 = Female	3 = Transsexual	Write in age last birthday				1 = Employed	2 = Education	3 = Unemployed
			4 = Refused					4 = Other / Retired / under 16	5 = Refused	
1 = Respondent	Q79a (N=589)			Q79ab (N=588)				Q79ac (N=589)		
2	Q79b (N=364)			Q79ba (N=364)				Q79bb (N=354)		
3	Q79c (N=173)			Q79ca (N=173)				Q79cb (N=171)		
4	Q79d (N=90)			Q79da (N=91)				Q79db (N=91)		
5	Q79e (N=20)			Q79ea (N=20)				Q79eb (N=20)		
6	Q79f (N=5)			Q79fa (N=5)				Q79fb (N=5)		
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=580)**

Bisexual	0.5	
Gay or lesbian (same sex relationship)	0.7	
Heterosexual (opposite sex relationships)	98.9	GO TO Q81
Other	0.0	
Prefer not to answer	n/a	

Q81 SHOWCARD 16. What is the highest level of educational qualifications you've obtained? **SINGLE CODE (N=589)**

A	School leaving certificate	10.5	
B	'O' Grade, Standard Grade, GCSE, CSE, Senior Cert or equivalent	35.9	
C	Higher Grade, CSYS, 'A' Level, AS Level, Advanced Senior Cert or equivalent	17.2	
D	GSVQ/SVQ Level 1 or 2, Scotvec Module, BTEC First Diploma, City and Guilds Craft, RSA or equivalent	5.5	
E	GSVQ/SVQ Level 3, ONC, OND, Scotvec National Diploma, City and Guilds Advanced Craft, RSA Advanced Diploma or equivalent	3.3	GO TO Q82
F	Apprenticeship / trade qualification	4.2	
G	HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma or equivalent	8.0	
H	First Degree, Higher Degree	7.6	
I	None	7.4	
	Other Professional qualification	0.3	GO TO Q81A

IF CODED 'OTHER' AT Q81 GO TO Q81A, OTHERWISE GO TO Q82

Q81a Other Professional qualification (specify) – RECORD VERBATIM (5 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=589)**

Yes	71.8	
No	28.2	GO TO Q83

ASK Q83 OF ALL RESPONDENTS

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=589)	Q83a Main Wage Earner (N=120)
Employed full-time	50.0	77.8
Employed part-time	2.7	0.0
Unemployed and seeking work	7.7	2.0
Unable to work due to illness or disability	6.1	6.5
Retired	23.5	12.4
Looking after home/family	5.4	1.2
In full-time education/training	4.6	0.0
In part-time education/training	0.0	0.0

GO TO Q84

- 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 (449 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 (577 Responses)

WRITE IN NUMBER:

mean	1.82
------	------

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=589)**

Manufacturing and mining	6.2
Construction	23.1
Transport	5.7
Health service	9.2
Local or national government	7.2
Service industries (e.g. banking, insurance, travel, entertainment)	16.0
Retail services	12.8
Catering/food preparation	2.4
Professional services (e.g. teaching, legal, surveying services)	2.9
Voluntary or community sector	0.0
Other	14.5

IF CODED 'OTHER' AT Q86 GO TO Q86A, OTHERWISE GO TO Q87

Other (please specify) – **RECORD VERBATIM (88 Responses)**

Q86a

GO TO Q87

Q87 SEG (N=589)

A	0.6
B	5.6
C1	25.9
C2	23.0
D	21.7
E	23.2

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=17)

Years Months
 Never GO TO Q89

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=525)	1.0	2.6	18.3	78.1	n/a	n/a	n/a
B	Gas, electricity and other fuel bills (N=566)	2.2	4.6	17.1	76.1	n/a	n/a	n/a
C	Telephone bill (N=564)	1.2	5.0	16.4	77.4	n/a	n/a	n/a
D	Council tax, insurance (N=565)	2.1	3.9	16.2	77.8	n/a	n/a	n/a
E	Food (N=569)	1.8	3.0	6.3	88.9	n/a	n/a	n/a
F	Treats / holidays (N=552)	6.0	9.3	11.3	73.4	n/a	n/a	n/a
G	Clothes and shoes (N=567)	1.9	4.4	8.1	85.6	n/a	n/a	n/a

GO TO Q90

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=581)	0.3	0.9	7.8	91.0	n/a
B	£100 (N=579)	0.9	8.1	20.0	71.0	n/a
C	£1,000 (N=572)	9.3	27.3	38.9	24.5	n/a

GO TO Q91

Q91 **SHOWCARD 21.** What proportion of your household income comes from state benefits? **SINGLE CODE (N=550)**

None	38.7
Very little	18.9
About a quarter	8.2
About a half	6.6
About three quarters	10.3
All	17.3
Don't know	n/a
Refused	n/a

GO TO Q92

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=574)**

WRITE NUMBER IN THE BOX:

GO TO Q93

1	2	3	4	5	6	7
2.3	17.5	56.9	17.4	3.5	1.6	0.9

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=589)**

Yes	1.7
No	98.3

GO TO Q94

GO TO Q95

Q94 On average, how many hours per day do you spend looking after this person(s)? **(N=10)**

WRITE NUMBER IN THE BOX:

mean	12.52
------	-------

GO TO Q95

Q95 Do you, or any member of your household, own a car? **SINGLE CODE (N=589)**

Yes	75.1
No	24.9

GO TO Q96

Q96 **SHOWCARD 23.** Can you tell me which of these descriptions applies to you? **SINGLE CODE (N=578)**

Married / civil partnership	49.7
Cohabiting / living with partner	12.1
Single / never married	18.1
Widowed	10.4
Divorced / civil partnership dissolved	7.0
Separated / civil partnership separated	2.7
Refused	n/a

GO TO Q97

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=589)

	White	
A	Scottish	94.6
B	Other British	3.3
C	Irish	0.1
D	Other White British	0.4
	Mixed	
E	Any mixed background	0.0
	Asian, Asian Scottish, Asian English, Asian Welsh or other Asian British	
F	Indian	1.4
G	Pakistani	0.0
H	Bangladeshi	0.0
I	Chinese	0.0
J	Any other Asian background	0.0
	Black, Black Scottish, Black English, Black Welsh or other Black British	
K	Caribbean	0.0
L	African	0.0
M	Any other Black background	0.0
	Other Ethnic background	
N	Any other background	0.2
	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=585)**

None	18.3
Christianity, Church of Scotland	43.6
Christianity, Roman Catholic	33.5
Christianity, Other	3.9
Buddhism	0.0
Hinduism	0.4
Judaish	0.0
Islam	0.0
Sikhism	0.2
Refused	n/a
Other religion	0.0

IF CODED 'OTHER' AT Q98, GO TO Q98A, OTHERWISE GOT TO Q99.

Q98A Other religion group – **RECORD VERBATIM (0 Responses)**

GO TO Q99

Q99 What month were you born in? **PROBE TO PRECODE (N=584)**

January	10.6
February	11.8
March	12.3
April	6.7
May	6.2
June	10.4
July	8.3
August	7.5
September	9.9
October	4.7
November	6.6
December	4.9
Refused	n/a

GO TO Q100

Q100 **SHOWCARD 25.** Have you experienced discrimination on any of the following grounds in the last twelve months? **CODE ALL THAT APPLY (N=589)**

Accent	0.5
Age	1.2
Disability	0.5
Ethnicity	0.2
Language	0.7
Nationality	1.9
Religion / faith / belief	1.9
Sex	0.1
Sexual orientation	0.0
Skin colour	0.2
None	95.0
Other	0.8

IF CODED 'OTHER' AT Q100 GO TO Q100A, OTHERWISE GO TO Q101

Q100a Other (please specify) – **RECORD VERBATIM (4 responses)**

GO TO Q101

Q101 Do you consider yourself to be a migrant worker? **(N=589)**

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	0.7	GO TO Q102
No	99.3	GO TO Q103

Q102 What is your country of origin? **SINGLE CODE (N=3)**

One of the new accession 10 countries (Poland, Lithuania, Estonia, Latvia, Slovenia, Slovakia, Hungary, Czech Republic, Romania, Bulgaria)	27.7
One of the other member states of the European Union (Austria, Belgium, Cyprus, Denmark, Finland, Greece, Germany, Ireland, Italy, Luxembourg, Malta, Netherlands, Portugal, Spain, Sweden)	0.0
A country from outside the European Union	72.3

GO TO Q103

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**

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Q103b Could you repeat that please, just to ensure I have recorded it correctly.
PLEASE RECORD POSTCODE

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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 **mrug** 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