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Report from research
carried out on behalf of
**GREATER GLASGOW
NHS BOARD**
Summary Report for East Dunbartonshire
August 2002 - February 2003

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1.0 Introduction

This report contains the findings of a research study carried out between the 13th August 2002 and 7th February 2003 by RBA Research Ltd on behalf of Greater Glasgow NHS Board (GGNHSB).

Between August and December 2002, RBA carried out 1,802 face-to-face, in-home interviews with adults (aged 16+) across the entire GGNHSB area. The breakdown of this sample by local authority area can be seen in table 1.0.

Table 1.0 Local Authority Breakdown
(n=1,802)

Local Authority	% of sample	GG NHSB % of population
Glasgow City	63.8	67.4
East Dunbartonshire	14.7	12.2
South Lanarkshire	7.3	6.3
West Dunbartonshire	6.2	5.1
East Renfrewshire	4.9	7.2
North Lanarkshire	3.1	1.8

GGNHSB wished to be able to produce analysis based solely on East Dunbartonshire residents. There were insufficient East Dunbartonshire respondents in the main sample to allow reliable separate analysis (only 232), so RBA carried out a further 165 interviews in January/February 2004 to bring the total up to 397.

This report specifically examines the differences between the findings of the 1,802 interviews across the whole GGNHSB area, and the 397 interviews in the East Dunbartonshire (ED) area [1]. The response rate for all in-scope attempted contacts was 67% in GGNHSB and 65% in ED.

A full account of the background objectives for the larger GGNHSB study can be found in Appendix A. An explanation of sampling procedures, fieldwork and survey response can be found in Appendix B. The survey questionnaire together with the response frequencies (weighted) is in Appendix D.

1.1 The sample

The completed interviews were weighted to account for under / over representation of groups within the sample to ensure the 2002 sample was as representative as possible of the adult population in the GGNHSB and ED areas. A full explanation of the weighting method and the data sources used can be found in Appendix C.

The breakdown of the final weighted dataset is shown in Tables 1.1-1.3.

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[1] Please note that the 'original' 232 ED respondents are also classified as belonging to the GGNHSB area. Consequently their answers are included as part of the GGNHSB data, but are also examined individually against this larger sample within this report.

Table 1.1 Breakdown of GGNHSB Sample by Age

Age	Total % of GGNHSB sample (n=1802)	Total % of ED sample (n=393)	GGNHSB % of population	ED % of population
16-24	15.3	14.4	15.5	14.3
25-34	20.0	16.5	20.2	17.1
35-44	19.2	18.3	19.5	18.5
45-54	14.4	17.1	14.5	17.5
55-64	11.7	14.2	11.9	14.3
65-74	10.2	11.0	10.4	11.1
75+	8.0	7.1	8.1	7.2
Not given	1.1	1.4	N/A	N/A

Table 1.2 Breakdown of ED Sample by Gender

Gender	Total % of GGNHSB sample (n=1802)	Total % of ED sample (n=393)	GGNHSB % of population	ED % of population
Male	47.0	48.2	47.2	48.5
Female	52.9	51.8	52.8	51.5

Table 1.3 Breakdown of Sample by Carstairs Deprivation Index (DEPCAT)

DEPCAT	Total % of GGNHSB sample (n=1802)	Total % of ED sample (n=393)	GGNHSB % of population	ED % of population
1& 2	18.8	71.0	18.5	69.6
3 & 4 & 5	31.5	29.0	31.6	29.2
6 & 7	49.7	0	49.9	1.3

2.0 Main Findings

2.1 Perceptions of Health and Illness

Table 2.1: Core indicators relating to perceptions of health

Indicator	% GGNHSB	% East Dunbartonshire
Self-perceived health excellent or good (n= GGNHSB=1798, ED=392)	66.9	73.9
Positive perception of general physical well-being (n= GGNHSB=1790, ED=390)	77.0	85.1
Positive perception of general mental or emotional well-being (n= GGNHSB=1792, ED=392)	81.9	89.0
Positive perception of quality of life (n= GGNHSB=1790, ED=390)	85.1	92.4
Have long-term illness or condition affecting daily life (n= GGNHSB=1799, ED=392)	23.4	13.8
Total number of conditions currently receiving treatment for: 0 / 1 / 2 / 3 or more. Mean number of conditions for which currently receiving treatment for = 0.8 in GGNHSB and 0.52 in ED (n= GGNHSB=1798, ED=392)	56.0 / 25.1 / 9.2 / 9.7	65.2 / 23.5 / 6.8 / 4.5
HAD score of 11 or above (indicating depression) (n= GGNHSB=1794, ED=391)	5.4	1.2
Have some/all of own teeth (n= GGNHSB=1792, ED=393)	84.1	88.1
Registered with a dentist (n= GGNHSB=1798, ED=393)	73.6	86.4

Table 1.1 shows that in general, most people are positive about their general health, their physical well-being, their mental well-being and their quality of life. On all these measures, however, more of those in ED respond positively than those in the GGNHSB area as a whole.

- Two-thirds (67%) of those in GGNHSB rate their general health as 'excellent' or 'good'. In ED this figure is 74%.

- Just over three-quarters (77%) in GGNHSB rate their general physical well-being positively, this figure is higher in ED (85%).

- In GGNHSB over four in five (82%) rate their general mental or emotional well-being positively, this compares with 89% in ED.

- In GGNHSB 85% rate their quality of life positively compared with 92% in ED.

Across GGNHSB as a whole, just under a quarter (23%) report having a long-term condition or illness that interferes with day-to-day activities. In ED one in seven (14%) say this.

Among those reporting a long-term condition, those in ED are less likely than GGNHSB residents as a whole to report having a physical disability (46% compared with 61% of those in GGNHSB) and/or a mental or emotional health problem (7% compared with 18% in GGNHSB). Correspondingly, respondents in ED are more likely to report having a long-term illness (51% compared with 37% in GGNHSB).

Just over two-fifths (44%) of those in GGNHSB say they are being treated for at least one illness or condition, compared with 35% in ED. The mean number of conditions for which respondents are currently being treated is 0.8 across the whole GGNHSB sample and 0.52 in ED.

In GGNHSB, one in twenty (5%) have a Hospital Anxiety and Depression (HAD) score of 11 or above, indicating clinical depression, compared with 1% in ED. GGNHSB has an overall mean score of 2.99, the mean score in ED is 1.66.

In GGNHSB 84% of residents say they have all (60%) or some (25%) of their own teeth. In ED the proportion with 'all or some' of their own teeth is 88% reflecting a higher proportion of those with 'some' of their own teeth (28%).

In GGNHSB three-quarters (74%) of respondents say they are registered with a dentist; compared with 86% of the residents in ED.

Residents express mixed opinions regarding whether fluoride should be added to the water supply. Responses in ED are similar to GGNHSB as a whole, with 37% agreeing '*yes*' it should be added (compared with 35% of those in GGNHSB), and 24% saying 'no' (compared with 28% in GGNHSB).

2.2 The Use of Health Services

2.2.1 Use of Specific Services

Eight out of ten (80% in both samples) say they have used some form of health service in the past year.

Table 2.2: Use of specific health services

Indicator	% saying at least once GGNHSB	% East Dunbartonshire	Mean frequency of visits (in the last year) GGNHSB	Mean frequency of visits (in the last year) East Dunbartonshire
Seen a GP at least once (for mean: 'No of times seen a GP') (n= GGNHSB=1789, ED=393)	80.0	80.1	4.29	3.14
Out-patient to see a doctor (n= GGNHSB=1762, ED=390)	24.6	17.7	0.94	0.99
Accident & Emergency (n= GGNHSB=1762, ED=390)	14.9	11.4	0.26	0.19
Hospital stay of two nights or more (n= GGNHSB=1761, ED=391)	11.0	7.5	0.20	0.14
Day surgery or overnight stay (n= GGNHSB=1762, ED=390)	11.7	9.3	0.19	0.15

In the complete GGNHSB sample eight in ten (80%) say they have seen a GP in the last year, with an average of 4.29 visits over the year. In ED, the proportion saying they have seen a GP is the same (80%), but the average number of visits is lower at 3.14.

Over a quarter of respondents (28%) in GGNHSB and 18% of those in ED say they have seen a doctor at an out-patients clinic in the last year. The mean number of such contacts is, however, similar (0.94 in GGNHSB and 0.99 in ED).

One in seven (15%) say they have used A & E services in the last year; this figure is 11% in ED.

One in nine (11%) in GGNHSB say they have had a hospital stay of two nights or longer and one in eight (12%) say have had surgery or an overnight stay in hospital compared with 8% and 9% respectively in ED.

Half (50%) of GGNHSB residents say they have been to a dentist within the past six months; in ED this is almost two thirds (64%). One in three (33%) in GGNHSB and one in five (21%) in ED say it has been over fifteen months since their last visit.

2.2.2 Involvement in Decisions Affecting Health Service Delivery

The majority of respondents are positive about the extent to which they are involved in decisions about health service delivery; they tend to feel they have been involved at least to some extent.

Table 2.3: Residents' involvement in decisions affecting health service delivery

Indicator	% saying definitely or to some extent GGNHSB	% saying definitely or to some extent East Dunbartonshire
Given adequate information about your condition or treatment (n= GGNHSB=1796, ED=393)	82.0	83.6
Encouraged to participate in decisions affecting your health or treatment (n= GGNHSB=1795, ED=393)	71.5	73.7
Have a say in how services are delivered (n= GGNHSB=1795, ED=393)	75.4	69.9
Feel that your views and circumstances are understood and valued (n= GGNHSB=1794, ED=392)	75.4	79.1

On three of the four measures, residents from ED have a more positive perception of their involvement in decision affecting service delivery. Looking beyond the headline figures, however, we can see that ED residents are less likely than GGNHSB residents to feel 'definitely' involved, but more likely to feel they have been involved to 'some extent'. Furthermore, ED residents are less likely to feel they have a say in how services are delivered' (70%, compared with 75% across GGNHSB as a whole).

2.2.3 Accessing Health Services

Most respondents do not report difficulty accessing health services. The most difficulty reported relates to obtaining an appointment at the hospital (45% of ED residents say they have at least some difficulty with this, as do 28% of GGNHSB residents).

In comparison with GGNHSB as a whole, respondents in ED report greater difficulty in obtaining appointments at hospitals, getting to hospitals and accessing emergency health services. However they tend to report slightly less difficulty in getting GP appointments and getting to the GP's surgery.

Table 2.4: Access to Health Services

Indicator	% saying 'some' or 'great' difficulty' GGNHSB	% saying 'some' or 'great' difficulty' East Dunbartonshire
Getting an appointment to see your GP (n= GGNHSB =1798, ED =393)	36.0	32.2
Obtaining an appointment at the hospital (n= GGNHSB =1797, ED =393)	28.3	44.9
Arranging for a home visit from your GP (n= GGNHSB =1798, ED =393)	17.9	14.0
Reaching the hospital for an appointment (n= GGNHSB =1797, ED =391)	11.8	17.1
Getting to the GP's surgery / Health Centre (n= GGNHSB =1798, ED =393)	9.1	6.2
Accessing health services in an emergency (n= GGNHSB =1797, ED =393)	8.8	15.1
Visiting others in hospital (n= GGNHSB =1797, ED =393)	6.8	8.6
Obtaining physiotherapy or chiropody (n= GGNHSB =1795, ED =393)	6.7	10.6
Getting an appointment to see the dentist (n= GGNHSB =1792, ED =393)	6.4	5.3
Getting a prescription made up (n= GGNHSB =1794, ED =391)	3.6	1.7
Obtaining other health services such as optometry (optician), stress relief, addiction services, etc (n= GGNHSB =1792, ED =393)	3.6	4.5

2.2.4 Accidents in the Home

One in sixteen (6%) say they or someone living in the household has had an accident in the past 12 months that has required medical treatment. This figure is comparable in GGNHSB and ED. However in GGNHSB 5% report one person as being involved and 0.4% report two people as being involved in the accident(s); in ED, 6% report one person as being involved.

Of the accidents that residents say they have had in the past 12 months, the main causes across GGNHSB have been falls or sharp edges; in ED the main causes have been garden equipment and slippery floors. Across GGNHSB as a whole, accidents are most likely to occur in the kitchen (26%, compared to 12% in the living room or bathroom, 11% in the hall, 10% in the garden, 10% in the bedroom or garden and 6% in the garage). For ED residents, accidents are most likely to occur in the garden (38%), followed by the bathroom (27%). These results should be interpreted with caution due to the small number of people reporting accidents in ED within the past year.

2.3   Health Behaviours

The main 'negatives' in terms of health behaviours relate to diet, where a minority of residents meet the recommended targets. For other behaviours, a majority meets the recommendations.

Table 2.5: Health behaviours

Indicator	% of sample GGNHSB	% of sample East Dunbartonshire
Currently smoking (n= GGNHSB =1793, ED =393)	33.2	16.4
Exceeding recommended weekly units of alcohol – all (n= GGNHSB =1802, ED =393)	13.1	10.1
Exceeding recommended weekly units of alcohol - those who drank in the past week (n= GGNHSB =861, ED =205)	27.4	19.3
Taking at least 30 minutes of moderate exercise 5+ times per week (n= GGNHSB =1798, ED =392)	52.4	48.8
Taking at least 20 minutes of vigorous exercise 3+ times per week (n= GGNHSB =1798, ED =390)	22.7	19.7
Taking at least 30 minutes of moderate exercise 5+ times per week OR at least 20 minutes of vigorous exercise 3+ times per week (n= GGNHSB =1798, ED =393)	58.0	53.7
Consume at least 5 portions of fruit and/or vegetables per day (n= GGNHSB =1798, ED =393)	34.1	40.0
Consume at least 5 slices of bread per day (n= GGNHSB =1797, ED =393)	12.2	9.2
Consume at least 5 portions of cereal per week (n= GGNHSB =1794, ED =393)	46.1	58.5
Consume at least 7 portions of cereal per week (n= GGNHSB =1794, ED =393)	40.4	52.3
Consume at least 2 portions of oily fish per week (n= GGNHSB =1787, ED =388)	29.4	25.6
Consume at least 2 high-fat snacks per day (n= GGNHSB =1791, ED =393)	32.3	29.1
Body Mass Index 25 or over (n= GGNHSB =1758, ED =387)	42.9	43.8
Brush teeth twice or more per day (n= GGNHSB =1759, ED =387)	66.8	75.4

Respondents in ED are less likely than GGNHSB residents as a whole to smoke and/or drink to excess. Conversely ED residents are slightly less likely than GGNHSB residents to take the recommended amount of exercise in a week. In terms of diet, ED residents are more likely than GGNHSB residents as a whole to meet the targets relating to fruit/vegetable and cereal consumption. With respect to bread and oily fish consumption, however, ED residents are slightly less likely to meet the targets. ED residents are just as likely as GGNHSB residents as a whole to be overweight.

ED residents are more likely than GGNHSB residents as a whole to say they brush their teeth at least twice a day (75% compared with 67% in GGNHSB).

2.4   Social Health

2.4.1 Social Connectedness

One in seven (15%) in GGNHSB say they sometimes feel isolated from family and friends, this figure is lower in ED where 7% report sometimes feeling isolated. Additionally in ED a greater proportion say they belong to a social club, association or something similar (27% compared with 20% in GGNHSB).

ED residents are also more likely than GGNHSB residents as a whole to agree with the following statements:

- 'I feel I belong to this local area' (87% in ED agree, compared with 72% across GGNHSB as a whole)

- 'I feel valued as a member of my community' (67% in ED agree, compared with 55% in GGNHSB)

- 'By working together, people in my neighbourhood can influence decisions that affect my neighbourhood' (77% in ED agree compared with 58% in GGNHSB)

2.4.2 The Social and Physical Environment

The majority of residents say they feel safe in their own homes, using public transport and/or walking around their local area. Of these three areas, walking alone around their local area even after dark causes the most concern (22% of GGNHSB residents say they do not feel safe doing this). ED residents tend to feel safer than GGNHSB residents as a whole on all three measures.

Table 2.6: Residents' feelings of safety

Indicator	% agreeing GGNHSB	% agreeing East Dunbartonshire
Feel safe in their own home (n= GGNHSB=1,800, ED=393)	93.1	98.9
Feel safe using public transport in their area (n= GGNHSB=1,791, ED=389)	79.2	89.7
Feel safe walking around their area alone even after dark (n= GGNHSB=1,796, ED=392)	62.2	80.2

When asked how common a problem a range of crime-related issues are in the area, young people hanging around, drug activity, excessive drinking, vandalism / graffiti are mentioned by at least half of GGNHSB residents as being very common / fairly common problems. While the 'rank order' of problems is similar in ED, ED residents are much less likely to mention each of these problems.

Table 2.7: Perceived crime-related problems in local area

	% saying fairly / very common problem	
	GGNHSB	**East Dunbartonshire**
Young people hanging around (n= GGNHSB=1800, ED=393)	62.3	40.2
Drug activity (n= GGNHSB=1798, ED=393)	53.2	34.0
Excessive drinking (n= GGNHSB=1800, ED=393)	52.5	31.4
Vandalism / graffiti (n= GGNHSB=1800, ED=393)	48.9	24.7
Unemployment (n= GGNHSB=1798, ED=392)	43.8	17.2
Car crime (n= GGNHSB=1800, ED=393)	37.9	16.8
Burglaries (n= GGNHSB=1796, ED=393)	27.4	19.2
Assaults / muggings (n= GGNHSB=1794, ED=392)	23.4	6.5
Bullying in schools (n= GGNHSB=1794, ED=393)	20.5	13.9
Domestic violence (n= GGNHSB=1797, ED=393)	18.1	4.4

Respondents were asked how common a problem a range of environmental issues are in the local area. ED residents are less likely than GGNHSB residents as a whole to consider all of the listed issues as a common problem. In common with GGNHSB as a whole, ED residents identify 'dog dirt', 'traffic' and 'rubbish lying about' as the 'top three' environmental problems.

Table: 2.8: Perceptions of environmental problems

	% saying fairly common / very common problem	
	GGNHSB	**ED**
Dog dirt (n= GGNHSB=1797 ED=393)	48.9	31.3
Traffic (n= GGNHSB =1796, ED=393)	41.6	26.3
Rubbish lying about (n= GGNHSB=1799, ED=393)	34.0	12.8
Noise and disturbance (n= GGNHSB=1799, ED=393)	22.9	8.6
Air pollution (n= GGNHSB=1799, ED=393)	15.1	1.0
Contaminated drinking water (n= GGNHSB=1799, ED=393)	14.1	9.0
Vacant / derelict buildings (n= GGNHSB=1794, ED=393)	12.9	3.4
Vacant / derelict land (n= GGNHSB=1794, ED=393)	12.9	3.0
Abandoned cars (n= GGNHSB=1800, ED=393)	12.6	4.1
Poor street lighting (n= GGNHSB=1798, ED=393)	9.7	3.3

2.4.3 Perceptions of Local Services

Ratings of local services are generally poor; for four of the seven services listed in Table 1.9, fewer than half of GGNHSB residents give a positive rating. Public transport is the most highly rated service, but even for this service only 57% are positive. Residents in ED are considerably more likely than GGNHSB residents to rate local schools and childcare provision positively. Ratings of leisure / sports facilities, on the other hand, are significantly lower in ED than in GGNHSB as a whole.

Table 2.9: Perceptions of local services

	% saying excellent / good	
	GGNHSB	**ED**
Public transport (n= GGNHSB=1799, ED=392)	56.6	55.9
Local schools (n= GGNHSB=1799, ED=393)	50.8	72.0
Food shops (n= GGNHSB=1798, ED=393)	49.7	50.4
Police (n= GGNHSB=1798,ED=393)	28.8	31.8
Leisure/sports facilities (n= GGNHSB=1798, ED=393)	19.5	14.8
Childcare provision (n= GGNHSB=1799, ED=393)	17.2	37.4
Activities for young people (n= GGNHSB=1799, ED=393)	12.2	7.9

2.4.4 Individual Circumstances

Over nine out of ten residents who completed this study are white (95% in GGNHSB and 98% in ED). ED residents are far less likely than GGNHSB residents as a whole to live alone (10% and 20% respectively), and hence tend to live in slightly larger households:

Table 2.10: Household Size

	%	
	GGNHSB n=1801	**East Dunbartonshire n=393**
Live alone	20.3	9.7
Live with one other person	30.6	36.8
Live with two other people	22.9	23.7
Live with three or more people	26.0	30.0

Just under half (47%) of GGNHSB residents say they are married and 7% are cohabiting; in ED two thirds (67%) say they are married and 3% are cohabiting.

A quarter (24%) of GGNHSB residents say they have children under fourteen in the household for whom they are responsible, this proportion is similar in ED (25%). Of those that do have children 35% and 51% respectively use some form of childcare.

One in twenty of the sample in GGNHSB (5%) is classified as being a 'lone parent'[2], in ED this figure is similar at 3%.

Nine out of ten residents (91%) in GGNHSB say they have a telephone in their home, in the ED area this figure is 99.9%.

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[2] A lone parent is identified as neither married, nor co-habiting and having at least one child under the age of 14 for whom they are responsible

Just over four out of ten GGNHSB residents (43%) say they have access to the Internet. In ED, this figure is much higher at 64%. Of those who do have access to the Internet, six out of ten (58%) in GGNHSB and over four in ten (44%) in ED say they have access at home. One in seven (14%) in GGNHSB and 7% in ED only have access elsewhere. Three out of ten (28%) in GGNHSB and 49% in ED have access both at home and elsewhere.

Residents in ED are more likely to say they own a car (88% compared with 60% in GGNHSB).

One in twenty respondents in GGNHSB (5%) say they are responsible for caring for someone on a day-to-day basis (excluding children). In ED, this figure is similar at 3%.

Across GGNHSB as a whole, one in four (26%) say they have no educational qualifications; in ED this figure is notably lower at one in seven (14%). This proportion increases among each subsequent age group (from 8% of those aged 16-24 to around a half of those age 65+ in GGNHSB area and from 4% of those aged 16-24 to 36% of those aged 65+ in ED). Table 1.11 shows that residents in ED tend to have higher qualification levels compared with GGNHSB residents.

Table 2.11: Highest educational qualification

	%	
	GGNHSB	**ED**
	n=1778	N=386
School leaving certificate	13.9	10.6
'O' Grade, Standard Grade, GCSE, CSE, Senior Cert or equivalent	14.4	18.0
Higher Grade, CSYS, 'A' Level, AS Level, Advanced Senior Certificate or equivalent	9.0	13.4
GSVQ/SVQ Level 1 or 2, Scotvec Module, BTEC First Diploma, City & Guilds Craft, RSA or equivalent	2.4	1.6
GSVQ/SVQ Level 3, ONC, OND, Scotvec National Diploma, City & Guilds Advanced Craft, RSA Advanced Diploma or equivalent	5.2	2.7
Apprenticeship / trade qualification	5.2	4.3
HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma or equivalent	6.9	7.8
First Degree, Higher Degree	13.8	23.0
Professional qualifications	3.0	4.7
None	26.2	13.8

Half of GGNHSB residents say they receive some form of benefits (52%); in ED this figure is much lower at 33%. Three out of ten (28%) of GGNHSB residents and one in seven (14%) is ED say that *all* their income comes from benefits.

Almost two in three respondents in GGNHSB (65%) have a positive perception of the adequacy of their income compared with three in four (74%) respondents in ED.

Respondents were asked how often they found it difficult to meet the payments for a number of scenarios. The proportion of residents saying they have some form of difficulty is notably lower in ED than in GGNHSB as a whole (see Table 1.12).

Table 2.12: Difficulty of meeting payments

	% saying 'quite often' or 'very often' difficult to meet the cost	
	GGNHSB	ED
Treats/holidays (n= GGNHSB=1774, ED=391)	14.8	4.8
Clothes and shoes (n= GGNHSB=1776, ED=391)	10.0	2.0
Council tax, insurance (n= GGNHSB=1776, ED=391)	5.6	1.6
Telephone bill (n= GGNHSB=1773, ED=391)	4.5	1.2
Gas, electricity and other fuel bills (n= GGNHSB=1772, ED=391)	4.0	0.5
Food (n= GGNHSB=1772, ED=391)	3.4	0.2
Rent/mortgage (n= GGNHSB=1772, ED=391)	3.0	0.5

Respondents were also asked how difficult it would be to find a sum of money to meet an unexpected expense. The proportion of residents saying they would have difficulty finding the sums is consistently lower within ED than within GGNHSB as a whole.

Table 2.13: Difficulty of finding money for unexpected expenses

	% saying impossible / a big problem to find…	
Amount	GGNHSB	ED
£20 (n= GGNHSB=1776,ED=391)	3.8	0.2
£100 (n= GGNHSB=1775,ED=391)	17.7	3.9
£1,000 (n= GGNHSB=1775,ED=390)	47.4	18.6

2.5 Social Capital

Most respondents have a positive view of their local area, more so in ED than in GGNHSB as a whole:

- Nine in ten (90%) of those in ED and almost three-quarters (73%) in GGNHSB have a positive perception of their area as a place to live.

- Almost two-thirds of residents in GGNHSB (64%) and nine in ten (90%) in ED have a positive perception of their area as a place to bring up children.

Small minorities indicate a level of civic engagement in both GGNHSB and ED:

- One in fourteen (7%) respondents in GGNHSB and one in eleven (9%) in ED say they have civic responsibilities e.g. committee member, fundraising, organising events, administrative work within a social club, association, church groups or similar.

- Respondents were presented with a list of actions, that could be taken in an attempt to solve a problem (e.g. write to a newspaper, contact an organisation, attend a protest meeting and join an action group) and asked which they had personally done in the last three years. One in nine (11%) have done at least one (this is the same in ED as in GGNHSB as a whole).

- One in fourteen (7%) of GGNHSB residents say that they currently act as a volunteer, this proportion is similar in ED at 6%.

Most have a positive view of reciprocity and trust, much more so in ED than GGNHSB as a whole:

- Two-thirds in GGNHSB (66%) are of the view that "*this is a neighbourhood where neighbours look out for each other*", this compares with over four in five (84%) of those in ED.

- Similar proportions agree with the statement "*generally speaking, you can trust people in my local area*" (69% in GGNHSB and 87% in ED).

With respect to social networks:

- Respondents were asked if they belong to any social clubs, associations, church groups or similar. One in five in GGNHSB (20%) say they do, compared with 27% in ED.

- Three-quarters (75%) in GGNHSB and 85% in ED are of the view that "*the friendships and associations I have with other people in my local area mean a lot to me*".

- With regards to social support, three-quarters of respondents in GGNHSB (75%) are of the view that "*if I have a problem, there is always someone to help me*", 84% of those in ED agree with this statement.

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Appendix A:

Background

GGNHSB is operating to the NHS clinical priorities of cancer, coronary heart disease and stroke, mental health and services to children and young people. However, underpinning its work is its strong commitment to promote positive health and to reduce inequalities in health by developing initiatives that will:

- Strengthen individuals,
- Strengthen communities and encourage them to participate in decision-making on health services and budgets,
- Improve access to services and facilities, and ensure equity of access, particularly in deprived circumstances, and
- Encourage macro-economic and cultural change by addressing the underlying determinants of health and effecting policy change.

A number of recent strategic developments also have influenced Health Board action. They include:

a. *Towards a Healthier Scotland*, the government's White Paper on public health which established a national strategy for improving Scotland's health. The White Paper calls for a reduction in health inequalities, a focus on children and young people, and initiatives to reduce cancer and heart disease rates. It advocates improving the life circumstances that impact on health, such as social inclusion, jobs, income, housing and education. In addition, lifestyles that lead to illness and premature death need to be addressed, such as lack of exercise, poor diet, smoking, and alcohol and drug misuse. It also calls for work to prevent accidents and to enhance oral, mental and sexual health. The white paper stresses the importance of having appropriate monitoring and evaluation mechanisms in place to assess the effectiveness of interventions and to provide the indicators and targets that will inform and assess progress in specific areas, as well as the progress towards the reduction of health inequalities between different socio-economic groups.

b. The subsequent health plan *Our National Health: a plan for action, a plan for change* underlined the need to tackle poverty and the root causes of ill-health, with particular focus on SIP areas. The Scottish White Paper *Partnership for Care* (2003) and the associated Health Improvement Challenge restates the objective to improve health and tackle health inequalities, linking health with other areas of public policy.

c. *Creating Tomorrow's Glasgow*, the strategy of the Glasgow Alliance of which GGNHSB is a partner, sets forward a plan to re-establish Glasgow as a competitive city attracting and retaining jobs, people and opportunities. GGNHSB has taken the lead role in ensuring that the health and well-being objective - that Glasgow will be a city where all citizens have the knowledge, services and support to live a safe, active and healthy life by 2010 - is met. The initial health priorities for the Alliance are: children's health, mental health, tobacco, physical activity, and drug and alcohol misuse.

d. Both *Better Communities in Scotland - Closing the Gap* (the Scottish Executive's community regeneration statement) and *Partnership for Care* identify community planning (and their associated Joint Health Improvement Plans) as the means by which all the relevant partners can become engaged in improving health. GGNHSB is a partner in the Glasgow Alliance and in the community planning partnerships in North and South Lanarkshire, East and West Dunbartonshire and East Renfrewshire.

e. *Social Inclusion* has become a major strand of government policy, a key component of which is the creation of Social Inclusion Partnerships (SIPs). The Executive's strategy, *Social Justice: a Scotland where everyone matters* (1999), outlines a framework for tackling poverty and injustice and establishes a number of milestones relevant to SIP strategies. SIPs either work in a geographical area or with a particular issue or population group to prevent social exclusion through innovative partnership approaches. Eleven area-based SIPs (9 in Glasgow City, 1 in Cambuslang/Rutherglen and 1 in Clydebank) and three population-based SIPs had been designated in Greater Glasgow in 1999. Since the baseline survey was conducted, a Small Areas SIP operating in the areas of Toryglen, Penilee and Dumbarton Road Corridor has been designated under the direction of Glasgow City Council. A further partnership Castlemilk, is managed by Glasgow Alliance and is in receipt of SIP funding.

Strategic themes of the above developments are:

- A focus on children and young people,
- An emphasis on local working within communities to address local needs and issues,
- Increased attention to the prevention of problems, particularly through working with those at highest risk, and
- A need to establish and maintain strong partnerships with other agencies.

The impact of these policy initiatives on the health and well-being of the GGNHSB population requires careful and systematic monitoring over time. A study was commissioned in 1999 to provide a baseline of core health indicators. Interviews were conducted with 1,693 GGNHSB residents aged 16 and over. The primary aim of the study was to provide baseline data in order to monitor change over time.

As a result of findings from the baseline study, GGNHSB set priorities to ensure investment is in place to meet the greatest need.

Some of the indicators established during the baseline study were those required to assess progress towards the Public Health White Paper's targets. Examples include:

- % of 45-54 year olds with no natural teeth,
- % current smokers, aged 16-64,
- % exceeding the recommended weekly alcohol limits,
- % aged 16-64 who achieved recommended moderate exercise level,
- % meeting 'Scottish Diet Action Plan' target on daily fruit and vegetable consumption.

Other indicators were developed to inform local service delivery. Examples include:

- % reporting a long-standing illness/condition that interferes with daily living,
- % perceiving health as excellent or good,
- % classified as 'cases' on the depression score of the Hospital Anxiety and Depression Scale.

The researcher contracted to carry out the baseline study was asked to identify baseline measures on the core indicators and to explore the relationship between different aspects of life and various measures of the physical and mental health and quality of life of the population. In addition, further statistical analysis was commissioned from the Information and Statistics Division to identify the relative influence of the different aspects of life on perceived physical health, perceived mental health and quality of life.

Objectives

The study reported here is the first follow-up of the 1999 baseline Health and Well-being Study. It provides the opportunity to monitor the core indicators and assess changes over time. (This will be the first of several follow-up studies to be conducted approximately every three years.) A working group established to facilitate this study has members who have extensive experience with survey research and includes Senior Research Officers from Health Promotion and Information Services, a Principal Health Promotion Officer, the Acting Director of Health Promotion, and a representative from both the Glasgow Alliance and the Public Health Institute of Scotland.

The identified objectives of the study are:

- To describe the health and well-being of the GGNHSB population in 2002

- To explore the relationships between different aspects of life and health (measured as perceived physical health, perceived mental health and perceived quality of life),

- To explore the influence of the different components of social capital on health and quality of life.

- To monitor change in the health indicators over the three years since the baseline study in the total GGNHSB population, as well as changes among those living in SIP and non-SIP areas, and

- To compare changes in SIP and non-SIP areas,

APPENDIX B: SURVEY METHODOLOGY & RESPONSE

Sampling

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

- representative of the population of the Board's area as a whole in terms of age, sex, geographical distribution and index of deprivation;

- comparable with the system used in 1999, to allow results to be compared across the two surveys;

- replicable, so that future surveys can track indicators over time.

The sample was stratified by local authority (six authorities) and by DEPCAT (seven categories, grouped into three – 1/2, 3/4/5 and 6/7). The sample size was set at 2000 individuals. To achieve this, 200 clusters were sampled in proportion to the population in each stratum, with a view to achieving an average of 10 interviews per cluster. The table below shows the number of clusters in each of the 13 strata.

Table A.1: Sample Stratification

Stratum	Local Authority	DEPCAT Group	Number of Clusters
1	West Dunbartonshire	3/4/5	4
2	West Dunbartonshire	6/7	6
3	East Dunbartonshire	1/2	17
4	East Dunbartonshire	3/4/5	7
5	East Dunbartonshire	6/7	1
6	East Renfrewshire	1/2	12
7	East Renfrewshire	3/4/5	1
8	Glasgow City	1/2	5
9	Glasgow City	3/4/5	36
10	Glasgow City	6/7	94
11	North Lanarkshire	3/4/5	4
12	South Lanarkshire	3/4/5	10
13	South Lanarkshire	6/7	3

The sample was drawn from the Postal Address File (PAF). The PAF was sorted into the 13 strata above. Within each stratum, the PAF was then sorted in alphanumeric order by postcode and house number/name. Interval samples of groups of 150 addresses were then taken, with the number of groups being the number of clusters required in the stratum. This was done as follows:

- the interval was calculated by taking the number of addresses in the stratum and dividing by the number of clusters required. Eg, if there were 1000 addresses in a stratum and four clusters were required, the interval x would be 1000/4=250;

- a random number was selected between 1 and x and then the group of 150 addresses started at this point on the address list. Eg, if the random number between 1 and 250 was 50, the 150 addresses began at the 50th address in the

stratum. The second group of 150 addresses started at address 300, and so on.

- Eighteen addresses were randomly sampled from each group of 150 addresses to form each cluster. Interviewers were required to obtain as many interviews as possible in each cluster, with the assumption that on average, 10 per cluster would be achieved.

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

Questionnaire Design and Pilot

The survey questionnaire was based on the questionnaire used in 1999, but had been revised by GGNHSB to counteract some of the problems encountered in 1999. For example, the questionnaire had been shortened, and the question order re-arranged so that the questions that did not obviously relate to health came later in the interview[3].

Once a draft questionnaire had been agreed, a pilot survey was conducted. Three interviewers conducted ten interviews each. Pilot interviews were carried out to the following quotas:

Table A.2: Pilot Quotas

	Male		Female	
	Under 45 years	45+ years	Under 45 years	45+ years
DEPCAT 1,2	1	1	1	1
DEPCAT 3,4,5	3	2	3	3
DEPCAT 6,7	4	3	4	4

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 1999.

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[3] Changing question order can impact on the reliability of trend data. There is, however, no evidence to suggest that the changes made have invalidated any individual items of trend data in this case.

Fieldwork

A team of 22 interviewers attended a briefing session which was conducted by RBA professional staff and the fieldwork supervisor and which was attended by GGNHSB staff. The briefing session involved full instructions in the conduct of the survey interview. Written instructions were given to all interviewers. A copy of these can be found in Appendix F.

Interviewers were assigned a number of clusters. A list of 18 addresses was issued per cluster, with interviewers being instructed to obtain as many interviews as possible from each list. Their instructions were to make at least four calls at an address at different times of the day/days of the week before classifying the address 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. In cases where the next birthday was not known, a Kish grid was used to make a random selection. An example grid can be found in Appendix G.

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

Each interviewer was also provided with a 'letter of authorisation' to show on the doorstep. Interviewers were also instructed to carry their RBA 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 any why participation is important. A leaflet was left with every respondent. Copies of the letters and leaflet can be found in Appendix H.

Response

Fieldwork began immediately after the briefing session on 13 August, and the original target was to have all 2,000 interviews completed by the end of October. However, the fieldwork took longer than anticipated, so the fieldwork period was extended to 20 December. Despite this, total number of interviews completed was short of the target, at 1,802.

The main reason for the difficulty reaching the target 2,000 interviews was that we misjudged how long it would take interviewers to complete their allocation of work. Interviewers work for RBA on a freelance basis, and most were already 'booked up' for the period November-December, which reduced the number of interviewers available to work after the original fieldwork period ended. To help overcome this difficulty, during the last month of the survey period, a separate fieldwork company, which operated to RBA's quality standards, was sub-contracted to assist with the fieldwork.

The table below shows the outcome of attempted contacts:

Table A.3: Outcome of Attempts to Interview

Outcome	n	% of in-scope	% of all contacts
In-scope (interview possible)			
Interview obtained	1802	66.8	49.4
Office refusal (telephone/letter)	15	0.6	0.4
Number of people in household information refused	28	1.0	0.8
No contact after 4+ calls	330	12.2	9.0
No contact with selected person after 1+ visits	107	4.0	2.9
Personal refusal by selected person	336	12.5	9.2
Proxy refusal on behalf of selected person	26	1.0	0.7
Broken appointment, no recontact	18	0.7	0.5
Ill at home during survey period	10	0.4	0.3
Away/in hospital during survey period	12	0.4	0.3
Selected person has dementia	8	0.3	0.2
Inadequate English (not possible to use interpreter)	5	0.2	0.1
Incomplete interview	1	0.0	0.0
Total in-scope	*2698*	*100.0*	*73.9*
Out of scope (no interview possible)			
Insufficient address	11		0.3
Not traced	26		0.7
Not yet built / not yet ready for occupation	16		0.4
Derelict/demolished	67		1.8
Empty/vacant	62		1.7
Business/industrial only (not private)	41		1.1
Institution only	1		0.0
Other	11		0.3
Total out-of-scope	*235*		*6.4*
Unresolved attempts (cluster quotas were achieved so the address was untried) – treated as 'out of scope'	*513*		
Total contacts	*3651*		

In a minority of cases, where batches of unusable addresses were identified within a cluster, additional contacts were released, hence a total base of 3,651 (3,600 originally selected).

Data Coding and Input

Data from open questions were coded using the same code frames as were used in 1999, for comparability. GGNHSB was involved in re-coding some of the lists of codes, which referred to medical conditions.

A specially devised data entry programme was set up to allow data to be entered directly onto computer. The programme included route, range and logic checks at the time of data entry to ensure that the data were valid.

A second-stage cleaning process was conducted after all the data had been entered. This involved examining frequency counts for all variables and checking extreme values.

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

Data were weighted before analysis. Appendix B details the weighting processes, which replicates that used in 1999 to aid comparability.

APPENDIX C: DATA WEIGHTING

Data were weighted to ensure that they were as representative as possible of the adult population in the Greater Glasgow Health Board area. This Appendix describes the weighting processes.

Registrar General for Scotland (GRO(S)) 2000 Mid Year population estimates were used in the weighting process.

In order to ensure the weighting of the dataset is as accurate as possible, the population source chosen for this needed to be more current than the 1991 Census. However, several factors have had to be considered when selecting this source.   On 30th September 2002 (GRO(S)) released population estimates for Scotland. These estimates were based on the 2001 Census and showed that previous estimates were too high. GRO(S) believes two factors have contributed to this; firstly emigration during the last 20 years have been underestimated and secondly, an undercount adjustment applied to the 1991 population estimates was too large. The GRO(S) plans to issue a revised set of estimates however they are not yet available by postcode sector which is required in order to attach depcat for weighting. The decision was therefore taken to use the 2000 estimate, as it is more representative of the population in 2001 than the 1991 Census.

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 (1802)

      A   is the total number of adults in all households where a successful interview took place (3,178).

Weighting by Age/Sex/DEPCAT

Firstly the household size weighting was applied to the dataset. This produced the new 'actual' counts (column H in the table below) to which we applied the age/sex/DEPCAT weighting frame to produce the final weighting factors. Column W below shows the final weighted counts. All the results in this report are based on the combined weighting of household size, age, sex and DEPCAT.

	DEPCAT 1/2			DEPCAT 3/4/5			DEPCAT 6/7		
	A	H	W	A	H	W	A	H	W
Male:									
16-24	13	20	23	19	29	39	37	57	72
25-34	12	13	28	43	45	54	55	47	99
35-44	16	19	31	38	46	54	61	58	88
45-54	16	22	29	34	44	41	46	42	57
55-64	12	14	21	36	38	31	52	48	47
65-74	21	21	16	54	53	25	50	40	39
75+	19	18	10	27	23	16	37	26	22
Female:									
16-24	9	15	25	31	43	40	53	73	76
25-34	15	14	27	60	65	56	85	73	96
35-44	26	30	31	72	78	58	90	96	85
45-54	19	28	29	43	52	45	74	83	57
54-64	18	19	23	45	48	36	68	61	52
65-74	37	32	19	49	41	35	98	81	51
75+	36	26	18	72	49	33	83	55	46

A= Actual (unweighted)
H= Weighted by household size
W = Final weighted figures (by age/sex/DEPCAT and household size)

Weighting for East Dunbartonshire

The same process was followed when weighting the two booster areas. East Dunbartonshire and South Lanarkshire were both treated in isolation and the respondents from each area were the only ones taken into account when weighting.

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 (397)

A   is the total number of adults in all households where a successful interview took place (757).

Weighting by Age/Sex/DEPCAT

Firstly the household size weighting was applied to the dataset. This produced the new 'actual' counts (column H in the table below) to which we applied the age/sex/DEPCAT weighting frame to produce the final weighting factors. Column W below shows the final weighted counts. All the results in this report are based on the combined weighting of household size, age, sex and DEPCAT.

	DEPCAT 1/2			DEPCAT 3/4/5			DEPCAT 6/7		
	A	H	W	A	H	W	A	H	W
Male:									
16-24	6	10	19	2	3	9	0	0	0
25-34	16	16	24	3	4	10	0	0	0
35-44	12	13	23	6	6	12	0	0	0
45-54	15	21	24	11	14	10	0	0	0
55-64	14	15	19	6	6	7	0	0	0
65-74	30	30	15	11	10	5	0	0	0
75+	18	16	8	4	4	3	0	0	0
Female:									
16-24	6	10	19	5	6	9	0	0	0
25-34	20	20	21	7	6	10	0	0	0
35-44	26	29	25	16	16	12	0	0	0
45-54	18	22	25	6	6	9	0	0	0
54-64	25	24	21	12	14	8	0	0	0
65-74	30	26	17	16	12	6	0	0	0
75+	37	23	13	13	10	4	0	0	0

A= Actual (unweighted)
H= Weighted by household size
W = Final weighted figures (by age/sex/DEPCAT and household size)

APPENDIX D: 2002 SURVEY QUESTIONNAIRE WITH RESPONSE FREQUENCIES
GREATER GLASGOW NHS BOARD

FINAL RESULTS

Based on 397 Self Completion surveys completed between 14th August and 7th February 2003

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)

	%	
	GGNHSB	ED
	Base = 1798	Base = 392
Excellent	24.2	32.1
Good	42.8	41.8
Fair	18.2	18.7
Poor	14.9	7.4

Q2 **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)

	%	
	GGNHSB	ED
	Base = 1787	Base = 392
Coronary heart disease	5.3	2.3
Stroke	1.8	0.7
Arthritis or rheumatism or painful joints	15.1	11.3
Clinical depression	4.4	2.6
Diabetes	4.0	1.1
Cancer	1.5	0.8
Asthma, bronchitis, or persistent cough	7.5	5.9
Epilepsy	1.2	0.5
Stress related conditions, eg difficulty sleeping or concentrating	6.4	1.6
Severe hearing problems	2.4	2.0
Severe eyesight problems	3.1	1.4
Accident / injury	2.6	1.6
Gastro-intestinal problems, eg peptic ulcer disease, irritable bowel syndrome	4.9	3.0
High blood pressure	10.9	10.0
Drug or alcohol related conditions	1.3	0
Sexually transmitted infections, eg. gonorrhea, syphilis, chlamydia	0.4	1.3
Disease of Nervous System (CNS)	0.4	1.0
Diseases of skin	0.2	0.8
Vascular Disease	0.1	0
Disease of Digestive System	0.3	0.2
Mental Health Problems	0.6	0.2
Respiratory	0.3	0.2
Genito-urinary	0.2	0
Other signs, symptoms and unspecified diagnoses	5.1	3.7
None	56.2	65.2

Q3   **Do you have any long term condition or illness that substantially interferes with your day to day activities?**

	%	
	GGNHSB	ED
	Base = 1799	Base = 390
Yes	23.4	13.8
No	76.6	86.2

Q3a   **Thinking of these conditions and/or illnesses, would you describe yourself as having...?**
(read out and code all that apply)

	%	
	GGNHSB	ED
	Base = 413	Base = 53
A physical disability	61.3	45.8
A mental or emotional health problem	17.8	6.6
A long-term illness	37.0	50.7
Other/s (please specify)	3.3	7.0

Q3b   **How much does it (do they) interfere with the following activities (seriously, moderately, or doesn't)?**
(read out and code one for each)

a) Looking after yourself and your home

	%	
	GGNHSB	ED
	Base = 409	Base =49
Seriously interferes	26.6	15.5
Moderately interferes	45.6	50.8
Does not interfere	27.0	33.7
N/A	0.8	0

b) Looking after your family

	%	
	GGNHSB	ED
	Base = 407	Base = 49
Seriously interferes	20.8	5.7
Moderately interferes	27.8	25.9
Does not interfere	32.4	51.7
N/A	19.0	16.7

c) Shopping

	%	
	GGNHSB	ED
	Base = 409	Base = 49
Seriously interferes	35.5	29.9
Moderately interferes	41.5	42.0
Does not interfere	21.6	28.1
N/A	1.4	0

d) Holding down or obtaining a job

	%	
	GGNHSB	ED
	Base = 410	Base = 49
Seriously interferes	42.8	24.3
Moderately interferes	18.9	25.7
Does not interfere	14.6	17.3
N/A	23.7	32.7

e) Relationships with others

	%	
	GGNHSB	ED
	Base = 408	Base = 49
Seriously interferes	17.0	3.5
Moderately interferes	30.7	19.7
Does not interfere	45.2	70.4
N/A	7.2	6.4

f) Engaging in sports

	%	
	GGNHSB	ED
	Base = 408	Base = 47
Seriously interferes	44.1	47.5
Moderately interferes	17.6	17.4
Does not interfere	10.8	15.3
N/A	27.5	19.9

g) Engaging in social activities

	%	
	GGNHSB	ED
	Base = 408	Base = 49
Seriously interferes	29.9	23.6
Moderately interferes	32.8	37.5
Does not interfere	19.3	25.5
N/A	18.0	13.4

Q4   **Thinking about the past year and your own health:**

a) How many times have you seen a GP?

	%	
	GGNHSB	ED
	Base = 1789	Base = 393
Never	19.9	19.9
One	17.2	19.7
2 – 5	39.5	43.6
6 – 10	12.4	11.2
11 – 20	8.5	5.2
20+	2.4	0.4

b) How many times have you been to accident and emergency?

	%	
	GGNHSB	ED
	Base = 1762	Base = 390
Never	85.1	88.6
One	10.0	8.7
2 – 5	4.4	2.3
6 – 10	0.3	0.2
11 – 20	0.2	0.2
20+	0	0

c) How many times have you visited a hospital out-patient department to see a doctor? (Do not include visits for an X-ray or other tests)

	%	
	GGNHSB	ED
	Base = 1762	Base = 390
Never	75.4	82.3
One	8.5	6.7
2 – 5	11.7	8.6
6 – 10	2.5	1.7
11 – 20	1.3	0.2
20+	0.6	0.5

d) How many times have you been admitted to hospital for either day surgery or an overnight stay?

	%	
	GGNHSB	ED
	Base = 1761	Base = 390
Never	88.2	90.7
One	8.2	7.0
2 – 5	3.3	2.2
6 – 10	0.2	0
11 – 20	0.1	0.1
20+	0	0

e) How many times have you been admitted to hospital for a stay of two nights or more?

	%	
	GGNHSB	ED
	Base = 1762	Base = 391
Never	88.9	92.5
One	7.0	5.5
2 – 5	3.5	1.1
6 – 10	0.4	0.7
11 – 20	0.1	0.1
20+	0	0.1

Q5 **Thinking about your recent use and experience of the Health Services such as GP, dentist, or hospital:**
(read out and code one for each)

a) Were you given adequate information about your condition or treatment?

	%	
	GGNHSB	ED
	Base = 1796	Base = 393
Definitely	40.6	31.1
To some extent	39.2	52.5
No	9.7	6.5
Don't know	3.7	0.3
Not applicable	6.8	9.6

b) Have you been encouraged to participate in decisions affecting your health or treatment?

	%	
	GGNHSB	ED
	Base = 1795	Base = 393
Definitely	29.2	19.2
To some extent	40.1	54.5
No	17.9	16.5
Don't know	4.5	0.3
Not applicable	8.2	9.5

c) Do you feel that you have a say in how these services are delivered?

	%	
	GGNHSB	ED
	Base = 1795	Base = 393
Definitely	23.4	16.5
To some extent	40.8	53.5
No	23.6	20.2
Don't know	5.2	2.0
Not applicable	7.1	7.9

d) Do you feel that your views and circumstances are understood and valued?

	%	
	GGNHSB	ED
	Base = 1794	Base = 392
Definitely	30.2	20.3
To some extent	43.5	58.8
No	13.9	12.0
Don't know	5.1	1.4
Not applicable	7.2	7.5

Q6 **Are you registered with a dentist?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Yes	73.6	86.4
No	26.4	13.6

Q6a **Is this an NHS or private dentist?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1297	Base = 339
NHS	87.3	81.4
Private	12.7	18.6

Q7 **What proportion of your teeth are your own?**
(crowns are regarded as 'own teeth'. read out. code one only)

	%	
	GGNHSB	ED
	Base = 1794	Base = 393
All of them	59.6	59.7
Some of them	24.5	28.4
None of them	15.9	11.9

Q8 **When was the last time you went to the dentist?**
(read out. code one only)

	%	
	GGNHSB	ED
	Base = 1792	Base = 393
Within the last 6 months	49.6	64.4
Within 6 months to 15 months	17.4	14.5
Over 15 months	33.0	21.1

Q9 Do you think that fluoride should be added to the water supply to reduce the level of tooth decay in the population?
(code one only)

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Yes	34.8	37.0
Yes, but with some concerns	4.2	4.4
I would want more information before I could decide	7.4	6.9
No	28.4	24.2
Don't know	25.2	27.5

Q9a   What are your concerns?
(Write in. Probe fully)

	%	
	GGNHSB	ED
	Base = 76	Base =17
Change in taste	1.9	0
Not required, should have choice	0	0
Cost	0	0
Not too much, limit on amount	16.7	10.8
Side effects/dangers	47.2	58.3
Public should be consulted	1.1	4.3
Don't know anything about it	12.2	4.8
Long term effects	18.0	5.8
Not fully understood/lack of research	2.5	3.5
Allergy problems	3.5	0
Don't like additives in water	1.8	0
Discolouring of water	0	0
Monitoring needed	4.0	11.3
Other	1.6	1.3

Q9b   What kind of information would you want?
(Write in. Probe fully)

	%	
	GGNHSB	ED
	Base = 130	Base = 27
Proof of benefits	6.3	0
Explanations	6.4	2.0
Information about safety/health effects/side effects	36.0	34.8
What the side effects would be	36.8	32.9
Overdose limits	1.7	4.1
Impact on teeth	2.7	0
More information in general	12.9	16.2
How much is added	2.4	0
BMA report/sufficient research	5.1	8.9
Cost to tax payer	0	0
What chemicals are used	0	0
Other	3.5	6.3

33

Q10 **Would you say that you have great difficulty, some difficulty, or no difficulty in...**
(read out and code one for each)

a) Arranging for a home visit from your GP

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Great difficulty	6.7	4.5
Some difficulty	11.2	9.5
No difficulty	43.7	48.9
Don't know	28.8	31.5
Not applicable	9.6	5.7

b) Getting an appointment to see your GP

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Great difficulty	9.1	8.4
Some difficulty	26.9	23.8
No difficulty	57.8	67.4
Don't know	4.5	0.4
Not applicable	1.7	0

c) Getting to the GP's surgery/Health Centre

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Great difficulty	2.0	0.9
Some difficulty	7.1	5.3
No difficulty	84.8	92.5
Don't know	4.0	1.3
Not applicable	2.1	0

d) Accessing health services in an emergency

	%	
	GGNHSB	ED
	Base = 1797	Base = 393
Great difficulty	1.7	1.5
Some difficulty	7.1	13.7
No difficulty	54.6	41.5
Don't know	29.4	39.7
Not applicable	7.2	3.6

e) Obtaining an appointment at the hospital

	%	
	GGNHSB	ED
	Base = 1797	Base = 393
Great difficulty	10.6	10.1
Some difficulty	17.7	34.9
No difficulty	45.8	38.7
Don't know	16.4	11.1
Not applicable	9.4	5.3

f) Reaching the hospital for an appointment

	%	
	GGNHSB	ED
	Base = 1797	Base = 391
Great difficulty	2.6	6.3
Some difficulty	9.3	10.8
No difficulty	73.4	78.7
Don't know	7.9	1.9
Not applicable	6.9	2.4

g) Getting an appointment to see the dentist

	%	
	GGNHSB	ED
	Base = 1792	Base = 393
Great difficulty	1.0	0.1
Some difficulty	5.4	5.2
No difficulty	76.5	87.3
Don't know	6.7	2.6
Not applicable	10.5	4.8

h) Getting a prescription made up

	%	
	GGNHSB	ED
	Base = 1794	Base = 391
Great difficulty	0.8	0.7
Some difficulty	2.7	1.0
No difficulty	90.4	98.1
Don't know	3.6	0.2
Not applicable	2.4	0.1

i) Obtaining physiotherapy or chiropody

	%	
	GGNHSB	ED
	Base = 1795	Base = 393
Great difficulty	2.1	3.5
Some difficulty	4.6	7.1
No difficulty	32.1	29.1
Don't know	37.6	49.6
Not applicable	23.6	10.8

j) Obtaining other health services such as optometry (optician), stress relief, addiction services, etc

	%	
	GGNHSB	ED
	Base = 1792	Base = 393
Great difficulty	0.7	0.6
Some difficulty	2.9	3.8
No difficulty	39.3	36.9
Don't know	38.2	49.3
Not applicable	18.9	9.3

k) Visiting others in hospital

	%	
	GGNHSB	ED
	Base = 1797	Base = 393
Great difficulty	1.8	4.2
Some difficulty	5.0	4.4
No difficulty	81.6	89.1
Don't know	4.3	0.5
Not applicable	7.3	1.7

Q11 **I am going to show you a series of statements that describe emotion and feelings. Please tick the box that applies to you.**

a) I still enjoy the things I used to enjoy.

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Definitely as much (0)	66.4	76.7
Not quite so much (1)	24.3	20.6
Only a little (2)	5.1	1.3
Hardly at all (3)	4.2	1.4

b) I can laugh and see the funny side of things

	%	
	GGNHSB	ED
	Base = 1797	Base = 391
As much as I always could (0)	82.0	93.4
Not quite so much now (1)	14.4	5.3
Definitely not so much now (2)	2.9	0.8
Not at all (3)	0.8	0.5

c) I feel cheerful

	%	
	GGNHSB	ED
	Base = 1793	Base = 393
Not at all (3)	2.3	1.3
Not often (2)	4.3	0.8
Sometimes (1)	25.2	13.6
Most of the time (0)	68.3	84.3

d) I feel as if I am slowed down

	%	
	GGNHSB	ED
	Base = 1793	Base = 393
Nearly all the time (3)	9.3	4.3
Very often (2)	11.5	6.7
Sometimes (1)	41.2	40.2
Not at all (0)	38.0	48.8

e) I have lost interest in my appearance

	%	
	GGNHSB	ED
	Base = 1795	Base = 393
Definitely (3)	2.5	1.6
I don't take as much care as I should (2)	8.2	3.9
I may not take quite as much care (1)	15.0	7.1
I take just as much care as ever (0)	74.3	87.4

f) I look forward with enjoyment to things

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
As much as I ever did (0)	76.5	90.0
Rather less than I used to (1)	15.6	8.3
Definitely less than I used to (2)	6.3	1.1
Hardly at all (3)	1.7	0.6

g) I can enjoy a good book or radio or TV programme

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Often (0)	80.7	88.7
Sometimes (1)	14.3	9.9
Not often (2)	3.5	1.1
Very seldom (3)	1.5	0.3

Q12 – Refer to data file for in-depth breakdown.

Q13 **How often are you usually 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? (code one only)**

	%	
	GGNHSB	ED
	Base = 1797	Base = 393
Most of the time	36.2	16.6
Some of the time	21.1	20.4
Seldom	31.6	46.4
Never	11.1	16.5

Q14 **Which of the following statements best describes you at present? (code one only)**

	%	
	GGNHSB	ED
	Base = 1793	Base = 393
I have never smoked tobacco	47.3	62.6
I have only tried smoking once or twice	4.4	3.6
I have given up smoking	15.1	17.4
I smoke some days	3.8	2.3
I smoke every day	29.4	14.1

Q14a/b **On average, how many cigarettes a week do you smoke? (write number of cigarettes in the box)**

	%	
	GGNHSB	ED
	Base = 595	Base = 63
0-10 a week	6.1	8.1
11-20 a week	3.7	1.8
21-40 a week	5.0	4.1
41-60 a week	4.8	1.9
More than 60 a week	18.6	8.0
More than 100 a week	39.3	49.8
More than 150 a week	15.8	16.7
More than 300 a week	2.5	0
Not known – smokes loose tobacco	4.2	9.5

Q15 **How often do you drink alcohol?**

	%	
	GGNHSB	ED
	Base = 1801	Base = 392
Never	30.5	26.1
Less than once a month	13.6	11.8
More than once a month but not weekly	12.0	11.3
1-2 days per week	29.0	31.1
3-5 days per week	9.5	10.3
6-7 days per week	5.3	9.3

Q16 **Have you had a drink containing alcohol in the past 7 days?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1246	Base = 290
Yes	69.1	70.9
No	30.9	29.1

Q17 **Using the card, please tell me how much you drank on each day in the past week.**
(Total base)

	%	
	GGNHSB	ED
	Base = 1802	Base = 393
Does not exceed recommended amount of alcohol	86.9	89.9
Exceeds recommended amount of alcohol	13.1	10.1

Q17 **Using the card, please tell me how much you drank on each day in the past week.**
(Over week)

	%	
	GGNHSB	ED
	Base = 861	Base = 205
Does not exceed recommended amount of alcohol	72.6	80.7
Exceeds recommended amount of alcohol	27.4	19.3

Q17 **Using the card, please tell me how much you drank on each day in the past week.**
(Total base)

	%	
	GGNHSB	ED
	Base = 1802	Base = 393
Non binge drinkers	77.0	82.0
Binge drinkers	23.0	18.0

Q17 **Using the card, please tell me how much you drank on each day in the past week.**
(Over week)

	%	
	GGNHSB	ED
	Base = 860	Base = 205
Non binge drinkers	51.9	65.5
Binge drinkers	48.1	34.5

Q18 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 fruit juice. (write number in box. if less than one, write '0')

	%	
	GGNHSB	ED
	Base = 1795	Base = 393
None	24.2	13.4
1	22.6	25.1
2	21.9	30.0
3	15.2	17.4
4	9.6	8.7
5 and over	6.5	5.5

Q19 On average, how many portions of vegetables or salad (not counting potatoes) do you eat each day? A portion of vegetables is 2 tablespoons.

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
None	13.5	7.3
1	26.6	23.5
2	31.6	40.9
3	13.7	15.8
4	9.1	9.8
5 and over	5.5	2.6

Q20 How many slices of bread or rolls do you usually eat per day? (Please include the bread taken in sandwiches) (write number in box)

	%	
	GGNHSB	ED
	Base = 1797	Base =
None	6.1	4.6
1	10.7	15.0
2	35.9	33.3
3	12.0	14.2
4	23.1	23.8
5 and over	12.3	9.2

Q21 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')

	%	
	GGNHSB	ED
	Base = 1791	Base = 393
None	32.6	25.3
1	34.9	45.6
2	19.0	18.9
3	7.3	8.5
4	3.9	1.2
5 and over	2.3	0.4

Q22 How many times per week do you usually eat breakfast cereal?

	%	
	GGNHSB	ED
	Base = 1794	Base = 393
None	31.5	18.0
1	4.9	2.4
2	5.9	8.6
3	7.1	5.6
4	4.5	6.9

	%	
5	4.4	4.9
6	1.3	1.3
7	40.2	51.9
8 and over	0.2	0.3

Q23   How many times per week do you usually eat oily fish, taken in sandwiches or as part of a meal?

	%	
	GGNHSB	ED
	Base = 1787	Base = 388
None	41.1	34.0
1	29.5	40.4
2	19.3	19.9
3	5.8	4.5
4	1.9	0.5
5 and over	2.4	0.8

Q24   How often do you brush your teeth?
(code one only)

	%	
	GGNHSB	ED
	Base = 1759	Base = 387
Twice or more a day	66.8	75.4
About once a day	26.1	23.0
Less than once a day	2.3	0.3
Seldom or never	4.9	1.3

Q25a/b   Body Mass Index

	%	
	GGNHSB	ED
	Base = 1758	Base = 387
Underweight	2.9	1.0
Normal	54.3	55.3
Overweight	31.7	33.8
Obese	10.6	9.8
Extremely obese	0.6	0.2

Q26   Thinking now of the exercise 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.

	%	
	GGNHSB	ED
	Base = 1798	Base = 392
None	20.6	19.4
1	4.0	4.6
2	8.9	8.9
3	8.3	11.7
4	8.1	10.0
5	9.8	14.7
6	5.9	3.7
7	34.5	27.0

Q27 In an average week, on how many days do you take at least 20 minutes of vigorous physical exercise such as brisk walking? It doesn't have to be 20 minutes all at once.

	%	
	GGNHSB	ED
	Base = 1785	Base = 390
None	66.3	65.8
1	4.8	5.4
2	9.7	9.7
3	5.4	6.4
4	3.7	0.9
5	2.5	2.0
6	1.8	1.6
7	5.8	8.3

Q27a 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)

	%	
	GGNHSB	ED
	Base = 1774	Base = 392
Yes - all activities have been included	86.7	88.8
No - there are more activities to add	13.3	11.2

Q27b 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 the total number of days in box)

	%	
	GGNHSB	ED
	Base = 219	Base = 43
None	13.2	20.2
1	10.0	5.1
2	8.5	1.2
3	8.1	13.6
4	5.8	3.8
5	4.3	0.6
6	9.0	12.0
7	41.0	43.4

Q27c 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 number of days in box)

	%	
	GGNHSB	ED
	Base = 221	Base = 42
None	48.7	74.1
1	6.6	8.5
2	6.3	4.4
3	7.0	2.2
4	9.7	1.8
5	10.8	3.6
6	3.1	0
7	7.9	5.5

Q28   **Looking at the faces on the card:**

a) Which face best rates your overall quality of life?
(write number in box)

	%	
	GGNHSB	ED
	Base = 1790	Base = 390
1 - Very happy	20.6	17.0
2	39.3	55.7
3	25.2	19.8
4	8.4	5.6
5	4.3	1.9
6	1.4	0
7 - Very sad	0.8	0.1

b) Which face best rates your general physical well being? (write number in box)

	%	
	GGNHSB	ED
	Base = 1790	Base = 390
1 - Very happy	14.2	11.7
2	36.6	50.6
3	26.2	22.8
4	12.1	8.2
5	6.1	4.9
6	2.8	1.3
7 - Very sad	2.0	0.5

c) Which face best rates your general mental or emotional well being? (write number in box)

	%	
	GGNHSB	ED
	Base = 1792	Base = 392
1 - Very happy	18.9	17.1
2	39.0	53.8
3	24.0	18.2
4	10.0	7.2
5	4.3	2.4
6	2.2	1.0
7 - Very sad	1.7	0.4

Q29   **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. (write number in box)**

	%	
	GGNHSB	ED
	Base = 1790	Base = 392
1 - Very happy	17.2	20.2
2	33.9	56.5
3	21.7	13.7
4	12.0	5.8
5	4.8	0.4
6	4.3	1.6
7 - Very sad	6.2	1.8

Q30   **And how do you feel about this area as a place in which to bring up children? (write number in box)**

	%	
	GGNHSB	ED
	Base = 1781	Base = 392
1 - Very happy	16.4	22.0
2	29.1	53.6
3	18.9	14.3
4	14.0	4.9
5	6.2	2.0
6	5.4	1.1
7 - Very sad	10.0	2.0

Q31   **Please look at the card I have given you. How common a problem do you think.........is in your area? (read out (a) - (j) and code one for each)**

a) Unemployment

	%	
	GGNHSB	ED
	Base = 1798	Base = 392
Very common	20.5	3.1
Fairly common	23.3	14.1
Not very common	33.2	47.9
Not common at all	7.1	25.7
DK/unsure	15.9	9.1

b) Domestic violence

	%	
	GGNHSB	ED
	Base = 1797	Base = 393
Very common	5.6	0.3
Fairly common	12.5	4.1
Not very common	29.7	30.6
Not common at all	10.5	25.7
DK/unsure	41.7	39.2

c) Burglaries

	%	
	GGNHSB	ED
	Base = 1796	Base = 393
Very common	7.3	0.6
Fairly common	22.2	18.5
Not very common	45.9	48.9
Not common at all	13.2	25.8
DK/unsure	11.4	6.1

d) Vandalism / Graffiti

	%	
	GGNHSB	ED
	Base = 1800	Base = 393
Very common	20.1	5.3
Fairly common	28.8	19.4
Not very common	36.6	47.1
Not common at all	9.7	26.1
DK/unsure	4.8	2.2

e) Assaults / Muggings

	%	
	GGNHSB	ED
	Base = 1796	Base = 392
Very common	7.7	0.7
Fairly common	15.7	5.9
Not very common	47.3	54.8
Not common at all	16.4	31.0
DK/unsure	12.9	7.7

f) Bullying in schools

	%	
	GGNHSB	ED
	Base = 1794	Base = 393
Very common	6.2	1.6
Fairly common	14.3	12.3
Not very common	22.9	22.2
Not common at all	7.4	20.2
DK/unsure	49.3	43.7

g) Drug activity

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Very common	23.9	6.7
Fairly common	29.3	27.3
Not very common	23.4	29.2
Not common at all	7.1	22.9
DK/unsure	16.4	14.0

h) Excessive drinking

	%	
	GGNHSB	ED
	Base = 1796	Base = 393
Very common	23.9	6.7
Fairly common	28.6	24.6
Not very common	26.3	31.5
Not common at all	8.1	25.7
DK/unsure	13.1	11.4

i) Young people hanging around

	%	
	GGNHSB	ED
	Base = 1800	Base = 393
Very common	30.1	11.6
Fairly common	32.2	28.6
Not very common	26.3	36.1
Not common at all	7.6	22.8
DK/unsure	3.8	0.9

j) Car crime

	%	
	GGNHSB	ED
	Base = 1800	Base = 393
Very common	11.8	0.9
Fairly common	26.1	15.9
Not very common	38.3	47.7
Not common at all	11.3	27.9

DK/unsure	12.5	7.6

Q32 **Now I'd like to ask you about some environmental problems in your area. How common a problem do you think...............is in your area? (read out (k) - (t) and code one for each)**

k) Contaminated drinking water

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Very common	3.4	1.1
Fairly common	10.7	7.9
Not very common	47.7	41.1
Not common at all	29.7	40.8
DK/unsure	8.5	9.0

l) Rubbish lying about

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Very common	13.6	2.7
Fairly common	20.4	10.1
Not very common	47.5	18.6
Not common at all	17.3	38.1
DK/unsure	1.2	0.5

m) Noise and disturbance

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Very common	7.9	1.8
Fairly common	15.0	6.8
Not very common	55.6	53.6
Not common at all	20.3	37.3
DK/unsure	1.3	0.5

n) Poor street lighting

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Very common	2.6	1.1
Fairly common	7.1	2.2
Not very common	53.7	51.8
Not common at all	35.0	44.4
DK/unsure	1.6	0.5

o) Air pollution

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Very common	4.3	0.2
Fairly common	10.8	0.8
Not very common	52.3	50.1
Not common at all	26.0	43.4
DK/unsure	6.6	5.5

p) Vacant / derelict land

	%	
	GGNHSB	ED
	Base = 1794	Base = 393
Very common	3.8	0.3
Fairly common	9.2	2.7
Not very common	52.1	50.0
Not common at all	31.5	46.1
DK/unsure	3.5	0.9

q) Vacant / derelict buildings

	%	
	GGNHSB	ED
	Base = 1794	Base = 393
Very common	3.6	0
Fairly common	9.3	3.4
Not very common	51.7	48.7
Not common at all	31.9	47.0
DK/unsure	3.5	0.9

r) Dog's dirt

	%	
	GGNHSB	ED
	Base = 1797	Base = 393
Very common	17.5	9.8
Fairly common	31.4	21.5
Not very common	35.8	41.0
Not common at all	13.9	27.4
DK/unsure	1.4	0.2

s) Abandoned cars

	%	
	GGNHSB	ED
	Base = 1800	Base = 393
Very common	3.9	0.1
Fairly common	8.7	4.0
Not very common	51.4	45.7
Not common at all	32.5	49.8
DK/unsure	3.6	0.4

t) Traffic

	%	
	GGNHSB	ED
	Base = 1796	Base = 393
Very common	15.5	8.3
Fairly common	26.2	18.0
Not very common	40.7	38.2
Not common at all	16.1	35.0
DK/unsure	1.5	0.5

Q33   **Do you belong to any social clubs, associations, church groups or anything similar?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1787	Base = 393
Yes	20.2	26.6
No	79.8	73.4

Q33a   **How many do you attend regularly in your local area?**
(write number in each box. if none write in '0')

	%	
	GGNHSB	ED
	Base = 350	Base = 102
None	8.0	7.3
1	60.7	73.5
2	22.8	15.4
3	5.3	2.0
4+	3.1	1.8

How many do you attend regularly elsewhere? (write number in each box. if none write in '0')

	%	
	GGNHSB	ED
	Base = 250	Base = 53
None	71.1	66.8
1	17.7	24.9
2	9.6	7.6
3	1.4	0
4+	0.2	0.7

Q34   **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?**
(code one only)

	%	
	GGNHSB	ED
	Base = 353	Base = 105
Yes	35.9	34.8
No	64.1	65.2

Q35   **In the past 3 years, have you taken any of the following actions in an attempt to solve a particular problem or local problems in general?**
(code all that apply)

	%	
	GGNHSB	ED
	Base = 1794	Base = 392
Written to local newspaper	1.1	0.6
Contacted an organisation, eg the Council	5.5	5.3
Contacted a local councilor or MSP	3.8	2.9
Attended a protest meeting	2.9	1.0
Joined an action group	1.4	0.2
Joined a decision-making group, eg community council or school board	1.7	0.8
Thought about it, but did not do it	5.2	1.8
None of the above	84.3	89.8
Other action (specify)	0.8	0.1

Q36   **Do you act as a volunteer?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1748	Base = 387
Yes	7.3	6.2
No	92.7	93.8

Q36a   **How many hours (approximately) do you volunteer per week? (write number of hours in box)**

	%	
	GGNHSB	ED
	Base = 114	Base = 22
0	1.5	1.2
1	20.9	26.2
2	24.8	25.9
3	17.1	9.5
4	9.3	11.3
5	5.1	2.4
6	6.5	8.5
7	1.0	0
8	3.0	3.1
9	0.7	0
10	2.8	5.1
11-20	7.0	4.2
21 and over	0	2.8

Q37   **How long have you lived in this neighbourhood/local area? (years)**

	GGNHSB	ED
	Base = 1793	Base = 391
Less than 1 year	9.3	7.1
1-2 years	4.7	1.8
3-5 years	12.7	8.1
5-10 years	12.1	12.4
10-20 years	20.9	21.5
20-30 years	15.0	17.0
30-40 years	12.0	14.6
40-50 years	6.0	8.4
50-60 years	3.8	4.7
Over 60 years	3.7	4.4

Q38   **How long have you lived in your present home? (years)**

	%	
	GGNHSB	ED
	Base = 1793	Base = 390
Less than 1 year	13.5	9.4
1-2 years	6.5	3.7
3-5 years	19.5	14.6
5-10 years	18.6	16.4
10-20 years	21.8	25.1
20-30 years	10.2	16.9
30-40 years	6.3	8.5
40-50 years	2.0	4.7
50-60 years	1.0	0.6
Over 60 years	0.6	0.1

Q39   **Do you have a telephone in your home?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1796	Base = 393
Yes	91.3	99.9
No	8.7	0.1

Q40   **Do you have access to the Internet?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1795	Base = 391
Yes	43.1	64.3
No	56.9	35.7

Q40a   **Is this at home, elsewhere, or both?**
(code one only)

	%	
	GGNHSB	ED
	Base = 766	Base = 251
Home	58.3	43.5
Elsewhere	13.6	7.1
Both	28.1	49.4

Q41   **Is there anything about your home that affects your health?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1786	Base = 393
Yes	8.1	2.1
No	91.9	97.9

Q41a

	%	
	GGNHSB	ED
	Base = 136	Base = 8
Noisy/difficult neighbours	6.6	12.3
Damp	20.6	0
Overcrowding	3.6	0
Location	1.5	0
Physical access to the building	1.3	15.8
Difficult to move around my home	0	0
Lack of daylight	0	0
Dust	3.1	0
Pests/Vermin	2.2	0
Drugs/Alcohol	0.4	0
Roof	0	0
Stairs	21.0	23.6
Refuse collection	0	0
Cold/draughty	7.3	0
Lack of downstairs toilet	1.5	0
Lack of central heating	8.1	0
Water supply	1.6	0
Lead piping	0.4	0
Difficult to heat	1.5	0

Sewage/pluming	1.8	0
Insecure tenure	0	0
Steep hill	1.3	0
Passive smoking	4.2	21.2
Lots of children in the garden	0	0
Lack of garden	0.6	0
Unsuitable for disabled	1.1	0
Central heating - allergy eg asthma	0.7	0
Windows (eg not double glazed)	2.9	0
Prefer not to be on ground floor	0	0
Too high up	1.2	0
Fear of burglary/insecurity	0.6	0
Allergic to animals (in close proximity)	1.8	18.1
Pollution (eg traffic)	3.8	0
No bath	0	0
Traffic	0	0
Disability - bath/shower	1.9	5.4
Damage knees/legs	0	0
Gangs in area	0.7	4.4
Messy common stair	0.6	0
Council do not conduct repairs	3.1	0
Causes asthma	0	0
Poor quality of building	1.3	0
Heating is too hot	5.0	0
Other	0.7	3.6

Q42 **How much do you agree or disagree with the following statements about living in this local area? (read out and code one for each)**

a) This is a neighbourhood where neighbours look out for each other

	%	
	GGNHSB	ED
	Base = 1795	Base = 392
Strongly Agree	12.7	13.9
Agree	53.8	69.9
Neither / nor	18.0	9.0
Disagree	14.0	6.0
Strongly disagree	1.4	1.2

b) I feel I belong to this local area

	%	
	GGNHSB	ED
	Base = 1795	Base = 393
Strongly Agree	15.6	15.1
Agree	56.6	71.5
Neither / nor	15.3	6.6
Disagree	10.2	6.3
Strongly disagree	2.4	0.5

c) The friendships and associations I have with other people in my local area mean a lot to me

	%	
	GGNHSB	ED
	Base = 1797	Base = 393
Strongly Agree	15.6	14.4
Agree	59.6	70.8
Neither / nor	16.9	10.3
Disagree	6.5	4.5
Strongly disagree	1.4	0

d) I feel valued as a member of my community

	%	
	GGNHSB	ED
	Base = 1797	Base = 393
Strongly Agree	10.7	11.2
Agree	44.1	55.4
Neither / nor	25.5	20.5
Disagree	18.0	12.9
Strongly disagree	1.8	0

e) Generally speaking, you can trust people in my local area

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Strongly Agree	11.2	12.4
Agree	57.4	75.0
Neither / nor	19.4	10.9
Disagree	9.3	1.7
Strongly disagree	2.7	0

f) By working together, people in my neighborhood can influence decisions that affect my neighborhood

	%	
	GGNHSB	ED
	Base = 1796	Base =393
Strongly Agree	10.4	8.2
Agree	47.7	69.2
Neither / nor	26.2	14.3
Disagree	14.3	8.2
Strongly disagree	1.4	0.1

g) If I have a problem, there is always someone to help me

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Strongly Agree	14.5	13.1
Agree	60.3	70.9
Neither / nor	17.2	10.4
Disagree	6.4	5.0
Strongly disagree	1.5	0.5

Q43   **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)**

a) Food shops

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Very Poor	4.1	2.3
Poor	14.5	11.0
Adequate	30.7	36.1
Good	41.6	39.2
Excellent	8.1	11.2
D/K	1.0	0.3

b) Local schools

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Very Poor	1.2	0.1
Poor	4.6	1.1
Adequate	20.8	17.4
Good	42.9	56.0
Excellent	7.9	16.1
D/K	22.6	9.3

c) Public transport

	%	
	GGNHSB	ED
	Base = 1799	Base = 392
Very Poor	4.2	1.7
Poor	8.9	8.2
Adequate	22.6	26.7
Good	48.1	46.7
Excellent	8.6	9.0
D/K	7.6	7.7

d) Activities for young people

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Very Poor	22.8	24.8
Poor	31.7	42.2
Adequate	13.1	12.8
Good	10.0	7.1
Excellent	2.2	0.7
D/K	20.2	12.3

e) Leisure / sports facilities

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Very Poor	18.1	25.4
Poor	28.0	31.7
Adequate	18.7	17.4
Good	17.0	14.5
Excellent	2.5	0.2
D/K	15.7	10.8

f) Childcare provision

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Very Poor	4.0	0.9
Poor	7.2	2.1
Adequate	12.5	13.4
Good	15.1	32.5
Excellent	2.0	4.8
D/K	59.2	46.2

g) Police

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Very Poor	8.9	7.0
Poor	24.1	24.5
Adequate	29.4	32.8
Good	24.8	24.7
Excellent	4.0	7.2
D/K	8.7	3.8

Q44 **What is your main form of transport?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1798	Base = 393
Car/motorcycle/moped	51.8	76.5
Public transport (buses and trains)	36.6	21.6
Cycling	1.2	0.4
Walking	6.8	0.6
Never go out	1.1	0.6
Other (please specify)	2.4	0.3

Q45 **Do you feel in control of decisions that affect your life, such as planning your budget, moving house or changing job? (code one only)**

	%	
	GGNHSB	ED
	Base = 1800	Base = 393
Definitely	81.6	90.1
To some extent	13.2	9.0
No	5.2	0.9

Q46 **How much do you agree or disagree with the following statements about safety in this local area? (read out and code one for each)**

a) I feel safe using public transport in this local area

	%	
	GGNHSB	ED
	Base = 1791	Base = 389
Strongly Agree	13.0	17.0
Agree	66.2	72.7
Neither / nor	15.6	9.4
Disagree	3.6	0.4
Strongly Disagree	1.6	0.5

b) I feel safe walking alone around this local area even after dark

	%	
	GGNHSB	ED
	Base = 1796	Base = 392
Strongly Agree	10.1	15.6
Agree	52.0	64.6
Neither / nor	16.3	9.3
Disagree	14.9	7.6
Strongly Disagree	6.6	2.9

c) I feel safe in my own home

	%	
	GGNHSB	ED
	Base = 1800	Base = 393
Strongly Agree	36.8	35.6
Agree	56.3	63.3
Neither / nor	5.2	0.5
Disagree	1.3	0.3
Strongly Disagree	0.5	0.2

Total number of people in household (including respondent)

	%	
	GGNHSB	ED
	Base = 1801	Base = 393
1	20.3	9.7
2	30.6	36.8
3	22.9	23.7
4	16.4	21.8
5	6.4	6.3
6	2.4	1.7
7	0.5	0
8	0.4	0

Refer to datafile for more in-depth breakdown

Q48   **Are you responsible for the children under 14 in your household?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1173	Base = 161
Yes	36.3	61.1
No	63.7	38.9

Q48a   **Do you use any form of childcare (paid or unpaid)?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1385	Base = 98
Yes	35.1	51.0
No	64.9	49.0

Q49   **What is the highest level of educational qualification you've obtained?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1778	Base = 386
School leaving certificate	13.9	10.6
'O' Grade, Standard Grade, GCSE, CSE, Senior Cert or equivalent	14.4	18.0
Higher Grade, CSYS, 'A' Level, AS Level, Advanced Senior Cert or equivalent	9.0	13.4
GSVQ/SVQ Level 1 or 2, Scotvec Module, BTEC First Diploma, City & Guilds Craft, RSA or equivalent	2.4	1.6
GSVQ/SVQ Level 3, ONC, OND, Scotvec National Diploma, City & Guilds Advanced Craft, RSA Advanced Di	5.2	2.7
Apprenticeship / trade qualification	5.2	4.3
HNC, HND, SVQ Level 4 or 5, RSA Higher Diploma or equivalent	6.9	7.8
First Degree, Higher Degree	13.8	23.0
None	26.2	13.8
Professional qualifications (specify)	3.0	4.7

Q50 **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?**

	%	
	GGNHSB	ED
	Base = 1776	Base = 393
Yes	61.9	46.6
No	38.1	53.4

Q51   **Which one of these describes you best?**

a) Respondent

	%	
	GGNHSB	ED
	Base = 1094	Base = 181
Employed full-time	39.9	55.5
Employed part-time	4.2	4.8
Unemployed and seeking work	5.5	0.2
Unable to work due to illness or disability	14.1	6.1
Retired	25.3	31.2
Looking after home/family	4.8	1.3
In full-time education/training	6.0	0.8
In part-time education/training	0.1	0

b) Main Wage Earner

	%	
	GGNHSB	ED
	Base = 653	Base = 204
Employed full-time	72.9	81.5
Employed part-time	4.1	1.9
Unemployed and seeking work	2.0	0
Unable to work due to illness or disability	3.3	0.5
Retired	16.0	16.1
Looking after home/family	1.5	0
In full-time education/training	0.2	0
In part-time education/training	0	0

What is or was your occupation?

c) Respondent

	%	
	GGNHSB	ED
	Base = 752	Base = 129
Manufacturing and mining	19.2	16.0
Construction	15.5	8.5
Transport	7.9	10.2
Health service	12.4	21.5
Local or national government	12.9	12.0
Service industries (eg banking, insurance, travel, entertainment)	13.6	12.9
Retail services	12.4	15.8
Catering/food preparation	6.1	3.2
Professional services (eg teaching, legal, surveying services)	0	0
Voluntary or community sector	0	0
Other (please write in)	0	0

d) Main Wage Earner

	%	
	GGNHSB	ED
	Base = 617	Base = 198
Manufacturing and mining	11.4	12.1
Construction	12.4	12.5
Transport	10.2	8.7
Health service	9.1	7.3
Local or national government	12.7	22.0
Service industries (eg banking, insurance, travel, entertainment)	8.4	6.0
Retail services	10.8	7.5
Catering/food preparation	2.2	0.6
Professional services (eg teaching, legal, surveying services)	17.2	18.2
Voluntary or community sector	0.9	0.9
Other (please write in)	4.6	4.3

Socio-Economic Group

	%	
	GGNHSB	ED
	Base = 1763	Base = 393
A	0.6	0.5
B	10.6	18.3
C1	32.5	43.1
C2	23.6	24.9
D	24.8	9.7
E	7.9	3.6

Q53 **How often do you find it difficult to meet the cost of: (read out and code one for each)**

a) Rent/mortgage

	%	
	GGNHSB	ED
	Base = 1772	Base = 391
Very Often	1.1	0.3
Quite Often	1.9	0.3
Occasionally	8.3	4.6
Never	80.1	89.3
D/K	2.5	1.1
N/A	6.1	4.5

b) Gas, electricity and other fuel bills

	%	
	GGNHSB	ED
	Base = 1772	Base = 391
Very Often	1.2	0.3
Quite Often	2.8	0.3
Occasionally	10.5	3.3
Never	78.5	90.1
D/K	2.4	2.3
N/A	4.5	3.7

c) Telephone bill

	%	
	GGNHSB	ED
	Base = 1773	Base = 391
Very Often	1.2	0.5
Quite Often	3.3	0.8
Occasionally	10.7	4.8

	%	
	GGNHSB	ED
Never	74.8	89.7
D/K	2.5	1.1
N/A	7.5	3.2

d) Council tax, insurance

	%	
	GGNHSB	ED
	Base = 1761	Base = 391
Very Often	1.5	0.8
Quite Often	4.1	0.7
Occasionally	11.1	6.1
Never	75.7	88.3
D/K	2.7	1.1
N/A	5.0	2.9

e) Food

	%	
	GGNHSB	ED
	Base = 1772	Base = 391
Very Often	0.9	0.2
Quite Often	2.6	0
Occasionally	8.2	2.0
Never	81.6	92.9
D/K	2.3	1.1
N/A	4.4	3.7

f) Treats/holidays

	%	
	GGNHSB	ED
	Base = 1774	Base = 391
Very Often	7.1	1.7
Quite Often	7.7	3.1
Occasionally	14.7	10.6
Never	61.9	83.0
D/K	2.8	1.1
N/A	5.8	0.5

g) Clothes and shoes

	%	
	GGNHSB	ED
	Base = 1776	Base = 391
Very Often	2.8	0.7
Quite Often	7.2	1.3
Occasionally	14.3	7.9
Never	70.8	88.9
D/K	2.4	1.1
N/A	2.5	0

Q54 **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?**

a) £20

	%	
	GGNHSB	ED
	Base = 1776	Base = 391
Impossible to find	0.8	0
A big problem	3.0	0.2

	%	
	GGNHSB	ED
A bit of a problem	10.5	1.1
No problem	82.0	98.8
D/K	3.6	0

b) £100

	%	
	GGNHSB	ED
	Base = 1775	Base = 391
Impossible to find	4.4	0
A big problem	13.3	3.9
A bit of a problem	19.9	10.2
No problem	59.0	85.9
D/K	3.5	0

c) £1,000

	%	
	GGNHSB	ED
	Base = 1775	Base = 390
Impossible to find	29.3	9.0
A big problem	18.1	9.6
A bit of a problem	23.6	26.8
No problem	24.3	50.7
D/K	4.7	3.9

Q55   Could you tell me the number on this card for the group in which you would place your total household income from all sources after tax. Please include benefits as well as earnings.

	%	
	GGNHSB	ED
	Base = 1783	Base = 392
Less than £50...Less than £200	0.6	0
£50 up to £74...£200 up to £299	2.3	0.2
£75 up to £99...£300 up to £399	5.7	0.7
£100 up to £149...£400 up to £599	7.9	2.6
£150 up to £199...£600 up to £799	5.3	1.8
£200 up to £249...£800 up to £999	5.5	3.8
£250 up to £299...£1000 up to £1199	4.0	2.0
£300 up to £349...£1200 up to £1399	3.8	3.8
£350 up to £499...£1400 up to £1999	6.2	8.5
£500 up to £749...£2000 up to £2999	6.7	16.0
£750 and over...£3000 and over	5.9	12.1
Don't know	20.6	24.1
Refused	25.6	24.3

Q56   What proportion of your household income comes from state benefits?
(read out. code one only)

	%	
	GGNHSB	ED
	Base = 1763	Base = 389
None	43.4	65.1
Very little	11.7	11.6
About a quarter	2.8	2.2
About a half	4.9	3.5
About three quarters	3.8	1.4
All	28.4	14.4
Don't know	4.9	1.8

Q57 **Are you or any member of your household in receipt of the following?**
(read out. code all that apply)

	%	
	GGNHSB	ED
	Base = 940	Base = 129
Job seekers allowance (JSA)	5.2	3.9
Income support	30.6	10.0
Disability-related benefits	26.9	12.5
Housing benefits	26.8	5.4
Family tax credit	5.3	3.8
Disabled person's tax credit	0.8	0.6
Retirement pension	40.5	64.2
Attendance allowance	5.4	3.5
Other pension	14.8	50.4
Other (please write in)	13.4	13.2

Q58 **Thinking of the total income of your household, which face on the scale indicates how you feel about the adequacy of that income? (write number in box)**

	%	
	GGNHSB	ED
	Base = 1712	Base = 377
1 - Very happy	7.7	5.6
2	21.9	28.5
3	35.2	40.1
4	18.7	18.3
5	9.7	5.7
6	3.4	0.6
7 - Very sad	3.5	1.1

Q59 **Do you ever feel isolated from family and friends?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1787	Base = 393
Yes	14.7	7.4
No	85.3	92.6

Q60 **Outwith work, are you responsible for caring for someone on a day to day basis? - eg a disabled child, elderly person, etc.**
(do not include 'ordinary' childcare)

	%	
	GGNHSB	ED
	Base = 1729	Base = 393
Yes	5.2	3.1
No	94.8	96.9

Q60a **On average, how many hours per day do you spend looking after this person(s)? (write number of hours in box)**

	%	
	GGNHSB	ED
	Base = 1720	Base = 392
No caring responsibilities	95.3	97.1
1-8 hours	2.0	1.7
9-24 hours	2.8	1.3

Q61   **Do you, or any member of your household, own a car?**

	%	
	GGNHSB	ED
	Base = 1769	Base = 389
Yes	59.9	87.9
No	40.1	12.1

Q62   **Can you tell me your age? (write age in the box)**

	%	
	GGNHSB	ED
	Base = 1782	Base = 387
16-24	15.4	14.6
25-34	20.3	16.8
35-44	19.5	18.5
45-54	14.5	17.4
55-64	11.9	14.4
65-74	10.4	11.2
75+	8.1	7.2

Q63   **Gender of respondent?**

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
Man	47.0	48.2
Woman	53.0	51.8

Q64   **Can you tell me which of these descriptions applies to you?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1800	Base = 393
Married	47.1	67.2
Cohabiting/living with partner	7.0	2.8
Single/never married	27.2	18.1
Widowed	9.3	6.5
Divorced	5.4	3.4
Separated	4.0	2.0

Q65   **Could you please tell me which of the groups on this card best describes you?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1799	Base = 393
White	94.7	98.4
Chinese	0.3	0.2
Indian	0.5	0.6
Pakistani	3.4	0.3
Bangladeshi	0	0
Black - Caribbean	0.1	0.5
Black - African	0.4	0
Other ethnic group (please write in)	0.4	0

Q66   **Length of Interview:**

	%	
	GGNHSB	ED
	Base = 1774	Base = 382
10-20 minutes	8.9	7.0
21-25 minutes	31.0	33.0
26-30 minutes	48.2	57.8
31-35 minutes	6.0	0.9

	GGNHSB	ED
36-40 minutes	3.7	0.8
41 + minutes	2.1	0.4

Q67   **Please record how Q11 was completed?**
(code one only)

	%	
	GGNHSB	ED
	Base = 1779	Base = 389
Self completion	61.2	53.9
Read out for the respondent	38.8	46.1

APPENDIX E: INTERVIEWERWER INSTRUCTIONS

Background and Objectives

Greater Glasgow NHS Board (GGNHSB) has commissioned RBA to do a survey of residents across the Greater Glasgow area.

GGNHSB, along with other partner organisations, are committed to improving the health and well-being of Greater Glasgow residents. They are also involved in Social Inclusion Partnerships (SIPs) that have been established in Greater Glasgow to develop initiatives which aim to remove social exclusion from selected areas.

The survey questions not only focus on health issues but on different issues related to people's health, eg the community they live in and their lifestyle.

The Health Board has various targets to meet in terms of improvements to the population's health and lifestyle. A similar survey was carried out in 1999, and the results of this survey will be compared to the 1999 results to see how much progress has been made towards these targets over the last three years. It is likely that the survey will be repeated again in the future.

When the Health Board knows which of its targets have been met and which have not, it will know how best to direct its resources over the coming years. We will also be analysing the results by area and by SIP, to see if there are differences according to where residents live.

Methodology
Face-to-face, in-home interviews with people living in the Greater Glasgow area. In total we will be doing 2,000 in-home interviews at pre-selected addresses.

In addition, there is a self-completion element to the questionnaire (Q11) that should be passed to the respondent to complete before proceeding with the interview. This sheet should be filled in by the person whom you have interviewed. If they need help from you to complete this question, please help by reading out the questions/answer categories and/or ticking the boxes for them as appropriate. Remember to code at Q67 whether you gave any help or not.

Registration with the Police

Please ensure that you check in at the local police station before you start work. Complete the Police Registration Form in your work Pack, then take it along to the police station and ask the Desk Sergeant to make a note of your visit in the log book. Ask them to put an official stamp on your copy for you to show to anyone who is concerned.

Your Address List

You have been allocated a number of 'clusters'. Each cluster contains 18 addresses, from

which you must achieve *as many interviews as you can*. We expect at least 10 interviews per

cluster, but if you can get more than 10, please do so. If you do not think you are going to be

able to get 10 interviews in your cluster, please advise the office (or your supervisor) before returning your work.

For each address on your list, you have been given a **Contact Record**. You must complete and return a contact record sheet for every address that you have been given, whether or not you achieve an interview there.

The following information is already on the contact record:

- Your ID number
- Address number
- Address & postcode
- Expected number of dwellings
- Dwelling number at which to interview

You must complete the remainder of the sheet as follows:

Visit Record

Record the date and time of each visit you make to that address.

Actual Number of Dwellings

If there is more than one dwelling at the address, you must interview at a randomly-selected dwelling. For most addresses, as far as we know there is only one dwelling. For many addresses, we are aware that there is more than one dwelling, so we have selected one at random for you, and this is printed on the contact sheet. If you have an address that has more dwellings than expected, use the Kish Grid on the back of the contact record to select one at random – instructions are printed above the Grid.

Number of Adults in Household

Write in the number of people in the household aged 16 or over. If you are unable to establish this, use outcome code 13 or 14 as appropriate.

Respondent's Full Name

If you achieve an interview, write in the respondent's first name and surname in block capitals.

Interview Outcome

Circle an outcome code between 1 and 23 for every address in your allocation. Code 1 is for use if an interview is achieved. Otherwise, use a code in the first column if the address is not traceable/residential/occupied. Use a code in the second column if you are unable to gain an interview despite the address being traceable, residential and occupied.

If you are not able to conduct an interview at the selected address, *do not* substitute another address.

You must make at least three attempts to establish contact with someone at each address. Once you have made contact, you must make at least one call to try to interview the selected respondent.

It is vital that we receive a completed contact record sheet for <u>every</u> address in the sample, whatever the outcome.

<u>Who To Interview</u>

If there is only one adult (16+) resident at the address, try to interview that person. If there are 2 or more residents, try to interview the person **aged 16 or over** who will next have a birthday. In the unlikely event that it is not known who will next have a birthday, use the Kish Grid on the back of the Contact Record to select someone at random.

Only those people normally resident at that address are eligible for interview. If, however, someone is away on holiday, in hospital or away working, they *are* eligible. Students are also eligible as long as they live at that address during school/college/university holidays. If the selected respondent is away, try to arrange to return when they will be at home. Only if they are away for the full fieldwork period should you code them as non-contacts.

If the selected person does not speak very good English, try to find a friend or relative to act as an interpreter. If you cannot, please contact the office and we will try to provide an interpreter. Only code 'inadequate English' if it is not possible to find an interpreter.

If the selected person is senile or incapacitated, do not try to interview them – use outcome code 22.

If you are not able to conduct an interview with the selected person, *do not* substitute another household member.

Where to Interview

Interviews must be completed in the respondents' homes if possible. If, however, it is more appropriate to conduct the interview elsewhere (eg at the respondent's place of work or at their partner's house), this is permitted as long as there is somewhere private to do the interview.

Interview in private wherever possible. If another person is present, (s)he may try to put words into the respondent's mouth. An exception to this rule is in cases where a carer needs to be present to help the respondent, eg an elderly person with hearing problems or an interpreter for someone who does not speak very good English.

Preparation

Before you go out to interview, please ensure that you have studied the questionnaire and you understand all the questions and the routing.

The pilot showed that the questionnaire is quite straightforward but please be aware that there is quite a lot of routing. It is advisable therefore, that you have a run through the questionnaire with the Showcards before venturing out to work, and but please call RBA should you have any queries.

Introducing Yourself and the Survey

You will find in your Job Pack a new **RBA Research MRS Identity Card 2002** (where applicable). Please attach a recent photograph to the identification card and show it to all respondents that you speak to as a further way of authenticating the research.

Each selected address has been sent a letter from GGNHSB, informing them that the survey will be taking place and that you will be calling. You have also been given a letter to show to people when you knock on the door. The letter mentions your ID card, so make sure you show your card at every household.

Do your best to get the message across that RBA is an independent research agency and that you are not a representative of the Health Board!

If someone is concerned about why they have been selected, explain that the address was selected at random from Post Office address lists. We do not know anything about the people living at that address. Reassure them that nothing in the interview will identify them, and that we will be doing thousands of interviews, which will be grouped together for analysis.

If someone suggests you 'go next door' (or some other address), explain that you cannot do this because it is a random sample, and their address is the one that came up in the sample.

If you come across flats/tenement blocks with entryphones, avoid getting drawn into long explanations through the entryphone. Use a very short introduction, and ask if you can come up to explain more about the research. Call it a 'research study' rather than a 'survey' and you will probably have more success! Resist the temptation to 'sneak in' if someone comes out of the block and does not shut the door behind them.

Elderly people living alone are often concerned about letting strangers into their homes. If you

encounter this situation, suggest that you return at a time when a friend or relative will be

visiting.

Each respondent interviewed must be given a Thank you leaflet that details the MRS information telephone number (these have been enclosed in your work pack). They should also be given an NHS leaflet, which gives them a contact point if they have any queries about their health. You must never try to give advice about respondents' health – if they ask you any medical questions, refer them to the telephone number in the leaflet.

The Questionnaire

Please make sure when completing a questionnaire you obtain the correct name and address

details of the respondent including postcode & telephone number. Please also check spellings

where you are unsure.

The pilot showed that the interview lasts between 25 and 40 minutes, the average being about

30 minutes. Please note the following:

- Any text in ***bold italics*** should be read out. Do not read out any text that is not in bold italics.

- Q2: 'Treatment' includes things other than drugs, eg physiotherapy

- Q4: There is an out-of-hours GP service in the West End of Glasgow known as 'GEMS' (Glasgow Emergency Medical Service) – if the respondent has used this service, it should be counted as seeing a GP rather than as going to Accident & Emergency.

- Q11 is a self-completion element to be completed by the respondent unless they are

unable to do so (see earlier).

- Q26: if the respondent asks you if they should include physical activity at work, gardening, DIY or housework, say 'yes', but do not prompt for this – a later question will do this.

- Q33: only include activities that involve some kind of social contact with other people.

- Q41: code 'yes' if there is anything good **or** bad that affects health.

- Q51: if the respondent is the main wage earner, you only need to code the first column. If the respondent is not the main wage earner, you must code **both** columns.

- Q54/55: if respondents are not sure why we want this information, explain that other research shows a strong link between income and health, and we are going to analyse the data to see how the two are related.

Pay Rates and Return of Work

We will pay £10.00 for each completed interview, plus 24p per mile expenses. Please note that we do not pay travel time (unless agreed prior to interviewing).

Please note that the above pay rates only apply if we receive all 18 completed contact records from each of your clusters.
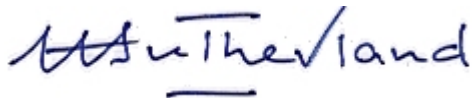
Please check that all questionnaires are fully completed before you return them to us. Please also check you have written your individual interviewer identification number in the box provided.

Please only return completed questionnaires by recorded delivery, which gives RBA a chance to track missing packs. *The charge for postage is 63p per pack, please add this cost to your pay-claim and we will reimburse you. RBA cannot be held responsible for any packs lost in the post.*

Any Questions?

We hope this work will be enjoyable. If you have any questions or problems, please contact your Supervisor George White on 01890 818 234 or Iain Sutherland (or Lucy Winder in Iain's absence) on 0113 28 56 300. Thank you.

Good luck with this project.

Iain Sutherland
Field Controller

APPENDIX F: CONTACT SHEET AND KISH GRID

Issued with each sampled address and returned to RBA Research.

Interviewer ID: ....

Visit Record & Appointments		
	Date	Time
First visit	_____	_____
Second visit	_____	_____
Third visit	_____	_____
Fourth visit	_____	_____
Fifth visit	_____	_____
Sixth visit	_____	_____

[Address ID]

[Address details]
[   ]
[   ]
[   ]
[   ]
[   ]
[   ]

Expected number of dwellings **[   ]**   **Interview to be completed with number**   **[   ]**

If there are more dwellings than expected, please refer to the grid overleaf to identify which dwelling to interview

Actual number of dwellings	**[ ]**	**Interview completed with number**	**[ ]**

Number of people living in the house aged 16 and over	

If only one person lives at the address, write their name in the space below. Where more than one resident lives at the address, please select the one who will be having their birthday next and write their name below. If the person who answers the door refuses to tell us how many adults live in the household, please write 'ref' in the box next to 'number of people aged 16+' and code as 15.

Respondents full name		**Telno**	

Interview Outcome	**Fully Completed**	**1**	
	Not completed	**MUST BE CODED BELOW**	

Reason for not obtaining the interview

Address not traceable / non-residential or unoccupied

Person Selection

Office refusal (telephone / letter	3	No contact made with a responsible adult after 3 visits	14
Insufficient address	4	Number of people in household information refused	15
Not traced	5	No contact with **selected** person after 1+ visits	16
Not yet built/not yet ready for occupation	6	Personal refusal by selected person	17
Derelict/demolished	7	Proxy refusal on behalf of selected person	18
Empty/vacant	8	Broken appointment, no re-contact	19
Business/industrial only (not private)	9	Ill at home during survey period	20
Institution only (not private)	10	Away/in hospital during survey period	21
Weekend or holiday home	11	Selected person senile/incapacitated	22
Unable to establish the number of dwelling units	12	Inadequate English (not possible to use interpreter)	23
Other (specify below)	13	Interview incomplete	24
Other: Please specify			

Completed contact sheets MUST be returned to RBA

The Kish grid was printed on the back of the contact sheet and used to randomly select households where appropriate.

Eligible Dwellings	Interview in the Cluster																	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2
3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	2
4	2	4	3	4	1	2	3	4	1	2	3	4	1	2	3	4	2	3
5	1	2	3	4	5	1	2	3	4	5	1	2	3	1	2	3	4	5
6	4	4	3	4	5	1	2	3	4	5	6	5	6	2	3	4	5	6
7	1	2	3	4	5	6	7	4	1	2	3	4	5	6	7	5	2	3
8	5	6	3	4	5	6	1	2	3	4	5	6	7	8	2	3	4	5
9	1	7	3	4	5	6	7	8	9	8	3	4	5	6	7	8	9	9
10+	3	8	3	4	5	6	7	8	9	9	4	5	6	7	8	9	10	10