

New Zealand Health Survey

Adult Questionnaire (Year 10)

1 July 2020 – 30 June 2021

In field August 2020

[26 March 2021 – two vaccine questions were included in Adult Questionnaire (Preventing spread of COVID-19)]

**Table of Contents**

Overview and programming information 4

Initial demographics 6

Long-term health conditions 7

Heart disease 7

Stroke 8

Diabetes 9

Asthma 9

Arthritis 10

Mental health conditions 11

Chronic pain 13

Hysterectomy 13

Oral health 13

Interviewer observations 14

Health service utilisation and patient experience 15

Usual primary health care provider 15

General practitioners 17

Nurses at GP clinics and medical centres 20

After-hours medical care 22

Hospitals 23

Emergency department 24

Medical specialists 27

Dental health care workers 29

Other health care workers 30

Health behaviours and risk factors 31

High blood pressure 31

High cholesterol 31

Physical activity 32

Sleep 34

Tooth brushing 34

Preventing spread of COVID-19 35

Tobacco 36

Electronic cigarettes 38

Dietary habits 39

Alcohol 39

Drugs 43

Health status 46

SF-12v2® Health Survey (Four-week Recall) 46

Functional difficulties – Washington Group Short Set 50

Mental health – K10 51

COVID-19 information 54

Socio-demographics 56

Date of birth 56

Ethnic group 56

Racial discrimination 58

Education 60

Income sources 61

Income 62

Employment 63

Medical insurance 64

Housing 65

Identity self-complete section 67

Sexual identity 67

Household composition 68

Sex and age 68

Relationships 68

Exit 69

Recontact information for quality control 69

Recontact information for follow-up research 69

Consent for data linkage 70

Christchurch residency 72

Interviewer observations 72

Respondent burden assessment 72

Health measurements 74

Blood pressure 74

Height 76

Weight 76

Waist 76

Thank you 77

Child health component 77

# Overview and programming information

|  |
| --- |
| **Design** |
| Approximately 14,000 adults are interviewed face-to-face each year for the New Zealand Health Survey. Interviews are administered using a combination of computer-assisted personal interviewing (CAPI) and computer-assisted self-interviewing (CASI). Key topics include long-term health conditions, heath status and behaviours, health service utilisation and patient experience. Anthropometric measurements (height, weight and waist circumference) and blood pressure are also taken. NZHS collects information that cannot be obtained more effectively or efficiently through other means, such as by analyses of hospital administrative records, disease registries or epidemiological research.  |

|  |  |
| --- | --- |
| **Text Format**  | **Examples** |
| Black  | Text read by interviewer or respondent: introductions, questions / question options | The next set of questions is about nurses who work at GP clinics and medical centres  |
| Blue  | Showcard note positioned above a question  | [Showcard] |
|  | Multiple response allowed for a question  | [Select all that apply]  |
|  | Instructional text specifically for interviewers  | 🛈 Record to nearest hourOther [Specify] |
|  | Text read verbatim to respondents | 🛈 If respondent asks “what is a green prescription?”, give the following definition: “A green prescription is a health professional’s written advice to be physically active and eat healthily, as part of the patient’s health management” |
|  | Interviewer observations: section completed unobtrusively (solely) by interviewer  | Complete following observations without asking the respondent |
|  | Tool tips or Showcards with a ⚐ symbol, contain information that only appears if the mouse pointer hovers over the underlined words, or if underlined words are touched with a finger | 🛈 Only code as 'Other' if respondent has seen a specialist in this list ⚐, otherwise code ‘None’  |
| Green | Copyright / attribution, displayed on screen as a requirement of usage | SF-12® is a registered trademark of Medical Outcomes Trust |
| Purple | Text specifically for questionnaire readers, not displayed on screen | The toothpaste picture showcard needs updating if there are any major changes in the market |
| Red | Programmer information, instructions, alerts and headings, not displayed on screen | 🛈 Calculated age must be ≥15 years |

|  |  |  |
| --- | --- | --- |
| **Key Edit Checks**  | **Description** | **Type** |
| Single and multiple-choice responses | For each question, only one answer can be selected, except for multiple-choice questions, represented by the instruction [Select all that apply]. | Hard edit |
| Exclusive answer options | Don't know, Refused / I don’t want to answer, Doesn’t apply, None of the above, None, and No treatment are all exclusive responses, i.e. they cannot be selected in conjunction with other responses. | Hard edit |
| Range checks | For numeric response questions, the data entered must fall within a certain range. Range checks prompt interviewers to change an answer falling outside the pre-set range parameters. For example, a person cannot enter an amount more than $199.00 for the cost of GP visits.  | Hard edit |
| Confirmation checks | For some questions, the survey prompts the interviewer to check a response which may be unlikely, or which may be incompatible with previous answers. For example, a person is unlikely to usually sleep for less than 4 hours in a 24 hour period.  | Soft edit |
| Consistency checks | Some checks enforce consistency of responses between questions. When edit checks are triggered, the surveyor or respondent must go back and change their answer to ensure response consistency. For example, if a person reports that they have used an emergency department (ED) in the past 12 months, when they are later asked to report the number of times they have used an ED, this response must be greater than zero.  | Hard edit |
| Completeness checks | For grid-style questions, where multiple items / statements are combined into a table, each row must contain a response. For example, relationship information is captured for every pair of occupants in a household. This is recorded in a grid format and each row must be completed.  | Hard edit |
| Hard edit checks require the interviewer / respondent to change the data they have entered before continuing. Soft edit checks provide an opportunity to check a response, and if applicable, change the data entered before continuing; however, the original response entered can also be retained. |
| **Showcards** |
| Showcard tablet | Answer options are visible for some questions on a separate tablet device which the respondent views during the survey. |
| Response option numbering | Selected options are allocated numbers allowing respondents to discretely provide a response; i.e. to call out a number opposed to the descriptive text. |
| **Year 10 Modules** |  |
| COVID-19 information | A focus on 2019 coronavirus disease, and information related to the crisis. |
| Racial discrimination  | Questions centre on how respondents may be viewed by others in terms of their ethnicity, how often respondents may think about their ethnicity, and whether they have experienced discrimination because of their ethnicity.  |

# Initial demographics

Before we begin, I just need to enter some information so that I only ask questions applicable to your gender and age group.

AD.01 You are male / female…?

🛈 Check aloud with respondent.

1 Male

2 Female

[Showcard]

AD.02 Which of these age groups do you belong to?

1 15–19 years

2 20–24 years

3 25–34 years

4 35–44 years

5 45–54 years

6 55–64 years

7 65–74 years

8 75+ years

# Long-term health conditions

The first section of the Health Survey is about **long-term** **health conditions** you may have. A long-term health condition is a **physical or mental** illness that has lasted, or is expected to last, for **more than six months**. The symptoms may come and go, or be present all the time.

Heart disease

The first few questions are about heart disease. Please **do not** include high blood pressure or high blood cholesterol here, as I will ask you about those later.

A1.01 Have you ever been told by a doctor that you have had a heart attack?

1 Yes

2 No [go to angina A1.04]

.K Don’t know [go to A1.04]

.R Refused [go to A1.04]

A1.02 Have you ever been admitted to hospital with a heart attack?

1 Yes

2 No [go to angina A1.04]

.K Don’t know [go to A1.04]

.R Refused [go to A1.04]

A1.03 Was this in the last 12 months?

1 Yes

2 No

.K Don’t know

.R Refused

A1.04 Have you ever been told by a doctor that you have angina?

 🛈 If clarification is required, angina is typically chest pain when you walk or do exercise.

1 Yes

2 No

.K Don’t know

.R Refused

A1.05 Have you ever been told by a doctor that you have heart failure? That is,

inadequate heart pumping, or a build-up of fluid in the lungs or legs.

1 Yes

2 No

.K Don’t know

.R Refused

A1.06 Have you ever been told by a doctor that you have any other heart disease? Please include problems with heart rhythm and heart valves, but not high blood pressure or high cholesterol.

1 Yes

2 No

.K Don’t know

.R Refused

🛈 Ask A1.07 if respondent answered ‘Yes’ to one or more of A1.01, A1.04, A1.05 or A1.06. Everyone else go to Stroke A1.10.

[Showcard]

A1.07 What treatments do you **now** have for your heart condition(s)?

 [Select all that apply]

🛈 Probe “Any others?” until no other treatment mentioned.

🛈 Don’t include surgery the respondent has had or is scheduled to have in the future.

1 No treatment

2 Aspirin

3 Other medicines, tablets or pills (including spray under the tongue, patches on the skin and blood thinners)

4 Diet

5 Exercise

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 .K Don’t know

 .R Refused

A1.09 Have you ever had bypass surgery or angioplasty for your heart condition(s)?

 🛈 If asked: Angioplasty is a procedure that helps improve your blood supply to the heart muscle. A tube is inserted into one of your arteries through an incision in your groin, wrist or arm. The doctor then directs the tube into a blocked or narrow heart artery, which expands the artery and allows the blood to flow more easily to the muscle. Often, a stent will be inserted at this time.

 1 Yes

 2 No

.K Don’t know

.R Refused

Stroke

A1.10 Have you ever been told by a doctor that you have had a **stroke**? Please do not include “mini-stroke” or transient ischaemic attack (or TIA).

 1 Yes

 2 No [go to Diabetes A1.12]

.K Don’t know [go to A1.12]

.R Refused [go to A1.12]

[Showcard]

A1.11 What treatments do you **now** have for your stroke?

[Select all that apply]

1 No treatment

2 Aspirin

3 Other medicines, tablets or pills

4 Diet

5 Exercise or rehabilitation (include speech therapy, occupational therapy, physiotherapy)

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

Diabetes

A1.12 Have you ever been told by a doctor that you have diabetes?

🛈 If respondent is female, insert: Please do **not**include diabetes during pregnancy.

1 Yes

2 No [go to Asthma A1.15]

.K Don’t know [go to A1.15]

.R Refused [go to A1.15]

A1.13 How old were you when you were first told by a doctor that you had diabetes?

 🛈 If from birth record 0.

 \_\_\_\_\_ years (range 0–120)

 .K Don’t know

 .R Refused

[Showcard]

A1.14 What treatments do you **now** have for your diabetes?

[Select all that apply]

1 No treatment

2 Insulin injections

3 Medicines, tablets or pills

4 Diet

5 Exercise

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

Asthma

A1.15 Have you ever been told by a doctor that you have asthma?

1 Yes

2 No [go to Arthritis A1.18]

.K Don’t know [go to A1.18]

.R Refused [go to A1.18]

A1.16 In the last 12 months, have you had an attack of asthma?

1 Yes

2 No

.K Don’t know

.R Refused

[Showcard]

A1.17 What treatments do you **now** have for asthma?

[Select all that apply]

1 No treatment

2 Inhalers

3 Medicines, tablets or pills

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

Arthritis

A1.18 Have you ever been told by a doctor that you have arthritis? Please include gout, lupus and psoriatic arthritis.

1 Yes

2 No [go to Mental health conditions introduction before A1.23]

.K Don’t know [go to introduction before A1.23]

.R Refused [go to introduction before A1.23]

[Showcard]

A1.19 What kind of arthritis was that?

 [Select all that apply]

1 Rheumatoid

2 Osteoarthritis

3 Gout

4 Psoriatic

5 Systemic lupus erythematosus (SLE)

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know [go to treatments A1.21]

.R Refused [go to A1.21]

🛈 Ask A1.20 if respondent has more than one kind of arthritis in A1.19.

[Showcard]

A1.20 Which kind of arthritis affects you most?

1 Rheumatoid

2 Osteoarthritis

3 Gout

4 Psoriatic

5 Systemic lupus erythematosus (SLE)

77 Other ([pipe through response from A1.19=77])

.K Don’t know

.R Refused

[Showcard]

A1.21 What treatments do you **now** have for arthritis?

[Select all that apply]

🛈 Don’t include surgery the respondent has had or is scheduled to have in the future.

1 No treatment

2 Medicines, tablets or pills (including painkillers)

3 Exercise or physiotherapy

4 Injections

5 Diet

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

A1.22 Have you ever had an operation or surgery because of your arthritis?

1 Yes

2 No

.K Don’t know

.R Refused

[Showcard]

A1.22a Are you now limited in any way, in your usual activities, because of arthritis symptoms?

1. Yes, limited a lot
2. Yes, limited a little
3. No, not limited at all

.K Don’t know

.R Refused

Mental health conditions

The next few questions are about long-term mental health conditions that have lasted, or are expected to last, for **more than 6 months**. The symptoms may come and go, or be present all the time.

A1.23 Have you ever been told by a doctor that you have depression?

 1 Yes

 2 No [go to bipolar A1.25]

.K Don’t know [go to A1.25]

.R Refused [go to A1.25]

[Showcard]

A1.24 What treatments do you **now** have for depression?

[Select all that apply]

1 No treatment

2 Medicines, tablets or pills

3 Counselling

4 Exercise

77 Other treatment [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

A1.25 Have you ever been told by a doctor that you have bipolar disorder, which is sometimes called manic depression?

1 Yes

2 No [go to anxiety A1.27]

.K Don’t know [go to A1.27]

.R Refused [go to A1.27]

[Showcard]

A1.26 What treatments do you **now** have for bipolar disorder?

[Select all that apply]

1 No treatment

2 Medicines, tablets or pills

3 Counselling

4 Exercise

77 Other treatment [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

A1.27 Have you ever been told by a doctor that you have anxiety disorder? This includes panic attacks, phobia, post-traumatic stress disorder, and obsessive compulsive disorder?

1 Yes

2 No [go to Chronic pain A1.29]

.K Don’t know [go to A1.29]

.R Refused [go to A1.29]

[Showcard]

A1.28 What treatments do you **now** have for anxiety disorder?

[Select all that apply]

1 No treatment

2 Medicines, tablets or pills

3 Counselling

4 Exercise

77 Other treatment [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

Chronic pain

A1.29 Do you experience chronic pain? This is pain that is present almost every day, but the intensity of the pain may vary. Please only include pain that has lasted, or is expected to last, for **more than six months**.

🛈 This includes chronic pain that is reduced by treatment.

1 Yes

2 No

.K Don’t know

.R Refused

Hysterectomy

🛈 Ask next question if respondent is female and aged 20 years and over.

L1.29t Have you ever had a hysterectomy, that is, when your uterus or womb is removed?

1 Yes

2 No

.K Don’t know

.R Refused

Oral health

The next questions are about your teeth, gums and mouth. When I say dental health care worker, I mean dentists, dental therapists (formerly known as dental nurses), as well as any dental health specialists such as orthodontists.

A1.30 How many of your teeth have been removed by a dental health care worker because of **tooth decay, an abscess, infection or gum disease**? Do not include teeth lost for other reasons such as injury, crowded mouth or orthodontics.

🛈 Includes teeth that were removed while overseas (as well as in New Zealand).

🛈 Includes baby teeth and wisdom teeth **ONLY** if removed because of tooth decay, an abscess, infection or gum disease.

🛈 Most adults grow 32 teeth in total.

\_\_\_\_\_ teeth (range 0–32) [if 0 teeth removed, go to health of mouth A1.31a]

99 All of my teeth have been removed because of tooth decay or gum disease

.K Don’t know [go to A1.31a]

.R Refused [go to A1.31a]

A1.31 Were any of these teeth removed in the last 12 months?

1 Yes

2 No

.K Don’t know

.R Refused

🛈 Ask all respondents following question, A1.31a.

[Showcard]

A1.31a How would you describe the health of your teeth or mouth?

 1 Excellent

 2 Very good

 3 Good

 4 Fair

 5 Poor

 .K Don’t know

 .R Refused

## Interviewer observations

Complete following observations without asking the respondent:

A6.13 Interview is being conducted with **language** assistance from a **family member / friend** of respondent.

  Only code ‘Yes’ if the respondent has required more than a couple of questions to be interpreted.

1 Yes

2 No

A6.12 Interview is being conducted with **cognitive** assistance from a **family member / caregiver.**

 Only code ‘Yes’ if the respondent has required more than a couple of questions to be answered completely on their behalf.

1 Yes

2 No

A6.14 Interview is being conducted with **language** assistance from a **professional translator**.

1 Yes

2 No

# Health service utilisation and patient experience

The next set of questions is about your use of health care services in **New Zealand**. I’ll begin by asking you about the **place** you usually go to when you are feeling unwell or are injured. Then I will ask about the different **people** you have seen or talked to, about your health in the past 12 months, which is from [insert period based on date of interview, i.e. insert: [current month] last year to now]. I will also ask about your experiences with accessing and receiving health care – these types of questions often relate to your last visit, including any video or phone appointments. All these questions are about your use of health services, for your **own** health.

Usual primary health care provider

A2.01 Do you have a **GP clinic or medical centre** that you **usually** go to when you are feeling unwell or are injured?

1 Yes

2 No [go to General practitioners introduction before A2.12a]

.K Don’t know [go to introduction before A2.12a]

.R Refused [go to introduction before A2.12a]

[Showcard]

A2.02 What sort of health care service is this?
🛈 Student / youth health services, Māori or Pacific health clinics, Accident and Medical Centres, GP clinics located within a hospital, and air force / army / navy GPs should be coded as ‘A GP clinic, medical centre or family practice’.

🛈 If respondent says two places (e.g. GP clinic for illness and after-hours for injury), ask which one they “usually” go to.

🛈 When using the ‘Other’ option, first check all interviewer notes. If respondent says ED, prison GPs, company GPs or rest home GPs, specify in ‘Other’.

1 A GP clinic, medical centre or family practice

2 A clinic that is after-hours **only** – **not** an Emergency Department at a public hospital

77 Other [Specify] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [go to General practitioners introduction before A2.12a]

.K Don’t know [go to introduction before A2.12a]

.R Refused [go to introduction before A2.12a]

From now on, we’ll call this place your **usual medical centre**. The next questions are about some of the things that happen when you contact or go to your usual medical centre.

A2.03a Have you been to your usual medical centre, for your **own** health, in the past 12 months? Please include any appointments you may have had by video or phone call.

1 Yes

2 No

.K Don’t know

.R Refused

A2.06a In the past 12 months, has there been a time when you wanted to see or talk to a GP, nurse or other health care worker at your usual medical centre, within the next 24 hours, but they were unable to see or talk to you?

1 Yes

2 No [go to A2.04]

.K Don’t know [go to A2.04]

.R Refused [go to A2.04]

[Showcard]

A2.07a The **last** time you couldn’t be seen or talked to within 24 hours, why was that?

🛈 If the reason that the person could not see the GP was because it was a weekend, the response should be coded as ‘another reason’.

1 There weren’t any appointments

2 The time offered didn’t suit me

3 The appointment was with a doctor I didn’t want to see

4 I could have seen a nurse but I wanted to see a doctor

5 Another reason [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

🛈 Ask next questions (A2.04 and A2.05) if respondent has visited their usual medical centre in the last 12 months (A2.03a=1), otherwise go to General practitioners introduction before A2.12a.

[Showcard]

A2.04 Over the past 12 months, has someone at your usual medical centre either carried out or arranged for you to have any of the following?

 [Select all that apply]

🛈 If respondent asks “what is a green prescription?”, give the following definition: “A green prescription is a health professional’s written advice to be physically active and eat healthily, as part of the patient’s health management”.

1 Weight and/or height measurement

2 Blood pressure test

3 Cholesterol test

4 Diabetes test

5 Flu vaccination

6 Other immunisation or vaccination

7 “Green prescription”

8 COVID-19 test

0 None of the above

.K Don’t know

.R Refused

[Showcard]

A2.05 Over the past 12 months, has someone at your usual medical centre talked with you, or arranged for someone else to talk with you, about any of these subjects? Please include talks that you started.

 [Select all that apply]

1 Smoking

2 Healthy food or nutrition

3 Weight

4 Exercise or physical activity

5 Teeth or oral health

6 Alcohol

7 Illegal drug use

8 Mental or emotional health

0 None of the above

.K Don’t know

.R Refused

General practitioners

These next questions are about seeing or talking to general practitioners (GPs) or family doctors. This can be at your **usual medical centre** or **somewhere else**. Some questions may sound similar to questions you have already answered.

### GP – utilisation

A2.12a In the past 12 months, have you seen or talked to a GP, or been visited by a GP, about your own health? By health, I mean your mental and emotional health as well as your physical health.

1 Yes

2 No [go to GP – barriers to access A2.33a]

.K Don’t know [go to A2.33a]

.R Refused [go to A2.33a]

A2.13a How many times did you see or talk to a GP in the past 12 months?

 \_\_\_\_\_ times (range 1–99)

.K Don’t know

.R Refused

[Showcard]

A2.14a When was the **last** time you saw or talked to a GP about your **own** health?

1 Within the last month

2 More than 1 month ago and less than 3 months

3 More than 3 months ago and less than 6 months

4 More than 6 months ago and less than 12 months ago

.K Don’t know

.R Refused

[Showcard]

A2.15a Thinking back to the last time you saw or talked to a GP about your own health, what type of medical centre was it?

 🛈 Student / youth health services, Māori or Pacific health clinics, Accident and Medical Centres, GP clinics located within a hospital, and air force / army / navy GPs should be coded as ‘A GP clinic, medical centre or family practice’.

🛈 If respondent says two places (e.g. GP clinic for illness and after-hours for injury), ask which one they “usually” go to.

🛈 When using the ‘Other’ option, first check all interviewer notes. If respondent says “ED”, prison GPs, company GPs or rest home GPs, specify in ‘Other’.

1 A GP clinic, medical centre or family practice

2 A clinic that is after-hours **only** – **not** an Emergency Department at a public hospital

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

A2.16 Thinking about your last visit or call with a GP, what were you charged for that visit or call?

🛈 Record amount in dollars and cents, e.g. $60=60.00.

🛈 If respondent says between two amounts, record the average in dollars and cents (e.g. between $40 and $50: record 45.00).

🛈 If free enter 0.00.

🛈 If respondent says an amount greater than $199, record as $199.00.

$\_\_\_.\_\_\_ (range 0.00–199.00)

.K Don’t know

.R Refused

### GP – patient experience

🛈 Ask next patient experience questions (A2.22a–A2.28a) if the respondent’s last visit to a GP was within the last 3 months (A2.14a=1 or 2), otherwise go to A2.33a (GP – barriers to access).

The next set of questions is about your **last** visit to a GP. Please include any appointments you may have had by video or phone call. Not all questions may apply to your last visit or call – if this is the case please select “Doesn’t apply”.

[Showcard]

A2.22a Still thinking about your last visit or talk with a GP, how good was the doctor at explaining your health conditions and treatments in a way that you could understand?

1 Very good

2 Good

3 Neither good or bad

4 Poor

5 Very poor

6 Doesn’t apply

.K Don’t know

.R Refused

[Showcard]

A2.23 How good was the doctor at involving you in decisions about your care, such as discussing different treatment options?

1 Very good

2 Good

3 Neither good or bad

4 Poor

5 Very poor

6 Doesn’t apply

.K Don’t know

.R Refused

[Showcard]

A2.28a Did you have confidence and trust in the GP you saw or talked to?

1 Yes, definitely

2 Yes, to some extent

3 No, not at all

.K Don’t know

.R Refused

### GP – barriers to access

A2.33a In the past 12 months, was there a time when you had a medical problem but did not visit or talk to a GP because of cost?

1 Yes

2 No

.K Don’t know

.R Refused

A2.34a In the past 12 months, was there a time when you had a medical problem but did not visit or talk to a GP because you had no transport to get there?

1 Yes

2 No

.K Don’t know

.R Refused

A2.34b In the past 12 months, was there a time when you had a medical problem but did not visit or talk to a GP because of COVID-19?

1 Yes [go to A2.34c]

2 No [go to A2.35a]

.K Don’t know [go to A2.35a]

.R Refused [go to A2.35a]

A2.34c Can you tell me a bit more about how COVID-19 prevented you from visiting or talking to a GP when you had a medical problem?

1 [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

A2.35a In the past 12 months, was there a time when you got a prescription for yourself, but did not collect one or more prescription items from the pharmacy or chemist because of cost?

1 Yes

2 No

.K Don’t know

.R Refused

A2.35b In the past 12 months, was there a time when you got a prescription for yourself, but did not collect one or more prescription items from the pharmacy or chemist because of COVID-19?

1 Yes

2 No [go to Nurses introduction before A2.41a]

.K Don’t know [go to introduction before A2.41a]

.R Refused [go to introduction before A2.41a]

A2.35c Can you tell me a bit more about how COVID-19 prevented you from collecting one or more prescription items from the pharmacy or chemist?

1 [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

Nurses at GP clinics and medical centres

The next set of questions is about nurses who work at GP clinics and medical centres. You may have seen or talked to a nurse as part of a consultation with your GP, or you may have had an appointment with a nurse without seeing a GP at the same time.

Please do **not** include nurses who may have visited you at home or seen you in a hospital. Also, don’t include midwives or dental nurses.

### Nurses – utilisation

A2.41a In the past 12 months, have you seen or talked to a nurse at a GP clinic or medical centre, about your own health?

🛈 A GP clinic or medical centre can include student / youth health services, Māori or Pacific health clinics, Accident and Medical Centres, and GP clinics located within a hospital, and air force / army / navy GPs.

1 Yes

2 No [go to After-hours medical care introduction before A2.52]

.K Don’t know [go to introduction before A2.52]

.R Refused [go to introduction before A2.52]

A2.42a How many times in the past 12 months did you see or talk to a nurse **as part of a GP consultation**? This includes before or after seeing the GP.

🛈 If none enter 0.

­­ \_\_\_\_\_ times (range 0–99)

.K Don’t know

.R Refused

A2.43a How many times in the past 12 months did you see or talk to a nurse **without** seeing a GP at the same visit?

 🛈 If none enter 0.

­­

 \_\_\_\_\_ times (range 0–99)

.K Don’t know

.R Refused

[Showcard]

A2.44a When was the **last** time you saw or talked to a nurse at a GP clinic or medical centre?

1 Within the last month

2 More than 1 month ago and less than 3 months

3 More than 3 months ago and less than 6 months

4 More than 6 months ago and less than 12 months ago

.K Don’t know

.R Refused

If A2.42a≥1 AND A2.43a=0 automatically code A2.45aa=1 and go to A2.52.

If A2.42a=0 AND A2.43a≥1 automatically code A2.45aa=2 and go to A2.45ab.

The next question is similar to an earlier question, but is now asking about the **last** time you saw or talked to a nurse at a GP clinic or medical centre.

A2.45aa Thinking back to the **last** time you saw or talked to a nurse, did you see the nurse **as part of a GP consultation?** This includes before or after seeing or talking to the GP.

 🛈 If the nurse was seen or spoken to without a GP at the same visit, code as “No”.

1 Yes [go to After-hours medical care introduction before A2.52]

2 No

.K Don’t know [go to introduction before A2.52]

.R Refused [go to introduction before A2.52]

A2.45ab What were you charged the **last** time you saw or talked to a nurse at a GP clinic?

🛈 Record amount in dollars and cents, e.g. $60=60.00.

🛈 If respondent says between two amounts, record the average in dollars and cents (e.g. between $40 and $50: record 45.00).

🛈 If free enter 0.00.

🛈 If respondent says an amount greater than $199, record as $199.00.

 $\_\_\_.\_\_\_ (range 0.00–199.00)

 .K Don’t know

 .R Refused

After-hours medical care

The next set of questions is on after-hours medical care, such as during evenings, weekends or holidays when most GP clinics or medical centres are closed.

### After-hours – utilisation

A2.52 In the past 12 months, how many times did you go to an after-hours medical centre about your own health? Do not include visits to an emergency department at a public hospital – we will ask about those later.

🛈If A2.15a=2 and A2.52=0, display message: Consistency check 🛈 If respondent answered A2.15a=2 then number of visits should be >=1. Go back to A2.15a. Go back to A2.52.

 \_\_\_\_\_ times (range 0–99)

[if 0 go to After-hours – barriers to access A2.59]

[if 1–99 go to A2.53]

.K Don’t know [go to A2.59]

.R Refused [go to A2.59]

[Showcard]

A2.53 When was the **last** time you used an after-hours medical centre for your own health?

1 Within the last month

2 More than 1 month ago and less than 3 months

3 More than 3 months ago and less than 6 months

4 More than 6 months ago and less than 12 months ago

.K Don’t know

.R Refused

A2.54 What were you charged for your last after-hours visit?

🛈 Record amount in dollars and cents, e.g. $60=60.00.

🛈 If respondent says between two amounts, record the average in dollars and cents (e.g. between $40 and $50: record 45.00).

🛈 If free enter 0.00.

🛈 If respondent says an amount greater than $199, record as $199.00.

$\_\_\_.\_\_\_ (range 0.00–199.00)

.K Don’t know

.R Refused

### After-hours – barriers to access

[Showcard]

A2.59 In the past 12 months, was there a time when you had a medical problem outside regular office hours, but did not visit an after-hours medical centre because of cost?

1 Didn’t have a medical problem outside regular office hours [go to Hospitals introduction before A2.61]

2 Yes, didn’t go because of cost

3 No

.K Don’t know

.R Refused

A2.60 In the past 12 months, was there a time when you had a medical problem outside regular office hours but did not visit an after-hours medical centre because you had no transport to get there?

1 Yes, didn’t go because I had no transport to get there

2 No

.K Don’t know

.R Refused

A2.60a In the past 12 months, was there a time when you had a medical problem outside regular office hours but did not visit an after-hours medical centre because of COVID-19?

1 Yes, because of COVID-19

2 No [go to Hospitals introduction before A2.61]

.K Don’t know [go to introduction before A2.61]

.R Refused [go to introduction before A2.61]

A2.60b Can you tell me a bit more about how COVID-19 prevented you from visiting an after-hours medical centre when you had a medical problem?

1 [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

Hospitals

The next few questions in this section are about your use of hospitals over the past 12 months. I’ll begin by asking you about **public** hospitals.

A2.61 In the last 12 months, have you yourself used a service at, or been admitted to, a **public** hospitalas a patient? This could have been for a physical or a mental health condition.

1 Yes

2 No [go to private hospitals introduction before A2.65]

.K Don’t know [go to introduction before A2.65]

.R Refused [go to introduction before A2.65]

[Showcard]

A2.62 In the last 12 months, at a **public** hospital, which of the following happened?

 [Select all that apply]

1 You used the **emergency** department

2 You used an **outpatients** department

3 You were admitted for **day treatment**, but did not stay overnight

4 You were admitted as an **inpatient** and stayed at least one night

5 None of the above

.K Don’t know

.R Refused

Now I’ll ask about private hospitals.

A2.65 In the last 12 months, have you yourself used a service at, or been admitted to, a **private**hospital?

1 Yes

2 No [go to Emergency department introduction before A2.69]

.K Don’t know [go to introduction before A2.69]

.R Refused [go to introduction before A2.69]

[Showcard]

A2.66 In the last 12 months, at a **private** hospital, which of the following happened?

 [Select all that apply]

1 You were admitted as an **inpatient** and stayed at least one night

2 You were admitted for **day treatment** but did not stay overnight

3 You had a **specialist** appointment

4 None of the above

.K Don’t know

.R Refused

Emergency department

The next questions are about your use and experience of emergency departments at public hospitals for your **own** health.

### ED – utilisation

A2.69 In the past 12 months, how many times did you go to an emergency department at a public hospital about your own health?

­­ \_\_\_\_\_ times (range 0–99) [if 0 go to Medical specialists introduction before A2.82b]

🛈 If A2.62=1 and A2.69=0 OR if A2.69=>1 and A2.62=2, 3, 4, 5, display message: Consistency check 🛈 If A2.62=1 (used an ED), then number of times should be >=1. If number of times =>1 then A2.62 should =1 (used an ED) or .K or .R. Go back to A2.62. Go back to A2.69.

.K Don’t know [go to introduction before A2.82b]

.R Refused [go to introduction before A2.82b]

[Showcard]

A2.70 When was the last time you went to an emergency department about your own health?

1 Within the last month

2 More than 1 month ago and less than 3 months

3 More than 3 months ago and less than 6 months

4 More than 6 months ago and less than 12 months ago

.K Don’t know

.R Refused

A2.71 Was your **last** visit to the emergency department for a condition you thought could have been treated by the doctors or staff at a medical centre, if they had been available?

1 Yes

2 No

.K Don’t know

.R Refused

[Showcard]

A2.72 Still thinking about your last visit to an emergency department for your own health, what were **all** the reasons you went to a hospital emergency department?

 [Select all that apply]

1 Thought the condition was serious / life threatening

2 Time of day / day of week (e.g. after-hours)

3 Sent by GP

4 Sent by Healthline (or another telephone helpline)

5 Taken by ambulance or helicopter

6 Cheaper

7 More confident about hospital than GP

8 Hospital knows me

9 ED recommended by someone else

10 Waiting time at GP too long

11 Do not have regular GP

77 Another reason [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know [go to Medical specialists introduction before A2.82b]

.R Refused [go to introduction before A2.82b]

🛈 Ask next question if more than one of the Options 1–11/77 selected in A2.72.

[Showcard]

A2.73 What was the **main** reason you went to a hospital emergency department?

1 Thought the condition was serious / life threatening

2 Time of day / day of week (e.g. after-hours)

3 Sent by GP

4 Sent by Healthline (or another telephone helpline)

5 Taken by ambulance or helicopter

6 Cheaper

7 More confident about hospital than GP

8 Hospital knows me

9 ED recommended by someone else

10 Waiting time at GP too long

11 Do not have regular GP

77 Another reason ([pipe through response from A2.72=77])

.K Don’t know

.R Refused

Medical specialists

The next few questions are about medical specialists. By medical specialist I mean the kind of doctor that people go to for a particular health condition, problem or service, not a GP. You may have seen the medical specialist as an outpatient in a hospital or at their private rooms or clinic, or had a video or phone appointment. Please do **not** include medical specialists you may have seen if you were admitted to hospital overnight.

### Specialists – utilisation

[Showcard]

A2.82b In the last 12 months, have you seen or talked to any of the following medical specialists about your **own** health?

 [Select all that apply]

🛈 A medical specialist is a doctor who has completed advanced training in a specific area of medicine. People are sometimes referred to a specialist by their GP.

🛈 Only code as 'Other' if respondent has seen a specialist in this list ⚐, otherwise code ‘None’.

🛈 If A2.66=3 then response option ‘None’ should not show.

|  |  |
| --- | --- |
| ⚐ Tool tip:  |  |
| Rheumatologist | Infectious disease physician |
| Gastroenterologist | Occupational health physician |
| Plastic surgeon | Sports physician |
| Oral and maxillofacial surgeon | Sexual and reproductive health specialist |
| Vascular surgeon | Anaesthetist |
| Other specialist surgeon |  |

1 Dermatologist

2 Neurologist

3 Cardiologist

4 Haematologist

5 Endocrinologist

6 Respiratory Physician

7 Immunologist (allergy specialist)

8 Oncologist

9 General surgeon

10 Orthopaedic surgeon

11 Ophthalmologist (eye specialist)

12 Ear, nose and throat specialist

13 Urologist

14 Obstetrician or Gynaecologist

15 Geriatrician

16 General or Internal Medical specialist

17 Psychiatrist

77 Other

0 None [go to Dental health care workers introduction before A2.91]

.K Don’t know [go to introduction before A2.91]

.R Refused [go to introduction before A2.91]

[Showcard]

A2.84 The **last** time you saw or talked to a medical specialist about your own health, where was this? Remember, this does not include medical specialists you may have seen if you were in hospital overnight.

1 Public hospital as an outpatient

2 Private hospital as an outpatient

3 Specialist’s private rooms or clinic

4 GP clinic or medical centre with a visiting medical specialist

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

### Specialists – patient experience

The next set of questions is about your **last** visit to a medical specialist. Please include any appointments you may have had by video or phone call. Not all questions may apply to your last visit – if this is the case, please select “Doesn’t apply”.

[Showcard]

A2.85a Thinking about your **last** visit or talk to a medical specialist, how good was the specialist at explaining your health conditions and treatments in a way that you could understand?

1 Very good

2 Good

3 Neither good or bad

4 Poor

5 Very poor

6 Doesn’t apply

.K Don’t know

.R Refused

[Showcard]

A2.86 How good was the medical specialist at involving you in decisions about your care, such as discussing different treatment options?

1 Very good

2 Good

3 Neither good or bad

4 Poor

5 Very poor

6 Doesn’t apply

.K Don’t know

.R Refused

[Showcard]

A2.89a Did you have confidence and trust in the medical specialist you saw or talked to?

1 Yes, definitely

2 Yes, to some extent

3 No, not at all

.K Don’t know

.R Refused

Dental health care workers

These next questions are about dental health care services you have used in **New Zealand**. When I say “dental health care worker”, I mean dentists, dental therapists (formerly known as dental nurses), dental hygienists, as well as any dental health specialists such as orthodontists.

### Dental health care workers – utilisation

[Showcard]

A2.91 How long has it been since you last visited a dental health care worker about your **own** dental health, for any reason?

1 Within the past year (less than 12 months ago)

2 Within the past two years (more than 1 year but less than 2 years ago)

3 Within the past five years (more than 2 years but less than 5 years ago)

4 Five or more years ago

5 Have never seen a dental health care worker

.K Don’t know

.R Refused

[Showcard]

A2.95 Which of the following statements best describes the regularity of your consultations with a dental health care worker?

1 I visit a dental health care worker at least every two years for a check up

2 I visit a dental health care worker for check-ups regularly, but with intervals of more than two years

3 I only visit a dental health care worker when I have a toothache or other similar trouble

4 I never visit a dental health care worker

.K Don’t know

.R Refused

### Dental health care workers – barriers to access

A2.95a In the last 12 months, have you avoided going to a dental health care worker because of the cost?

1 Yes

2 No

.K Don’t know

.R Refused

Other health care workers

The next question is about other health care workers you may have seen or talked to in the last 12 months. Do not include anyone that you may have seen if you were admitted to hospital overnight. **Please do not include any health care workers that we have already talked about.**

[Showcard]

A2.96a In the last 12 months, have you seen or talked to any of the following health care workers about your **own** health?

 [Select all that apply]

🛈 Only code ‘Pharmacist’ if the respondent has consulted with a pharmacist about their own health, not just collected a prescription.

🛈 The ‘Other’ category could include alternative therapists, audiologists, radiographers and nurses seen somewhere other than a GP clinic or medical centre, etc.

1 Pharmacist

2 Physiotherapist

3 Chiropractor

4 Osteopath

5 Dietitian

6 Optician or optometrist

7 Occupational therapist

8 Speech-language therapist

9 Midwife

10 Social worker

11 Psychologist or counsellor

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

0 None of the above

.K Don’t know

.R Refused

# Health behaviours and risk factors

The next section is about things that can influence your health.

High blood pressure

A3.01 Have you ever been told by a doctor that you have high blood pressure?

🛈 If respondent is female, insert: Please do not include high blood pressure you may have had during pregnancy.

1 Yes

2 No [go to High cholesterol A3.03]

.K Don’t know [go to A3.03]

.R Refused [go to A3.03]

A3.02 Are you currently taking pills regularly for high blood pressure?

1 Yes

2 No

.K Don’t know

.R Refused

High cholesterol

A3.03 Have you ever been told by a doctor that you have high cholesterol levels in your blood?

1 Yes

2 No [go to Physical activity introduction before A3.06]

.K Don’t know [go to introduction before A3.06]

.R Refused [go to introduction before A3.06]

A3.04 Are you currently taking pills regularly for high cholesterol?

1 Yes

2 No

.K Don’t know

.R Refused

Physical activity

I’m now going to ask you about the time you spent being **physically active** in the last 7 days, from last [enter day] to yesterday. Do not include activity undertaken today.

By ‘active’ I mean doing anything using your muscles. Think about activities at work, school or home, getting from place to place, and any activities you did for exercise, sport, recreation or leisure.

I will ask you separately about brisk walking, moderate activities, and vigorous activities.

A3.06 During the last 7 days, on how many days did you **walk at a brisk pace**– a brisk pace is a pace at which you are breathing harder than normal? This includes walking at work, walking to travel from place to place, and any other walking that you did solely for recreation, sport, exercise or leisure.

Think **only** about walking done for at least 10 minutes at a time.

 \_\_\_\_\_ days per week (range 0–7) [if A3.06=0 go to moderate activity A3.08]

.K Don’t know [go to A3.08]

.R Refused [go to A3.08]

A3.07 How much time did you typically spend walking at a brisk pace on **each**of those days?

🛈 If respondent cannot provide a typical duration, record the average time per day.

🛈 All fields (hours and minutes) must be completed.

 \_\_\_\_\_hours (range 0–24) \_\_\_\_\_ minutes (range 0–59) 🛈 If under 10 minutes, display message: Total time must be >=10 mins.

.K Don’t know

.R Refused

🛈 If A3.07>=8 hours, display message: A person is unlikely to walk at a brisk pace (breathe harder than normal) for 8 or more hours per day. Verify answer with respondent. Click ‘OK’ to go back and change answer or ‘Cancel’ to continue.

[Picture showcard]

A3.08 During the last 7 days, on how many days did you do **moderate** physical activities? ‘Moderate’ activities make you breathe harder than normal, but only a little – like carrying light loads, bicycling at a regular pace, or other activities like those on the Showcard. Do not include walking of any kind.

Think **only** about those physical activities done for at least 10 minutes at a time.

🛈 Activities shown on the Showcard are examples of moderate activity. Many other activities may fall into this category.

🛈 Activities on the Moderate Activity Showcard and Vigorous Activity Showcard can be interchangeable. If a respondent defines an activity as being moderate, even though it is on the Vigorous Activity Showcard, it should be included here.

 \_\_\_\_\_ days per week (range 0–7) [if A3.08=0 go to vigorous activity A3.10]

.K Don’t know [go to A3.10]

.R Refused [go to A3.10]

A3.09 How much time did you typically spend on **each** of those days doing moderate physical activities?

🛈 If respondent cannot provide a typical duration, record the average time per day.

🛈 All fields (hours and minutes) must be completed.

 \_\_\_\_\_ hours (range 0–24) \_\_\_\_\_ minutes (range 0–59) 🛈 If under 10 minutes, display message: Total time must be >=10 mins.

.K Don’t know

.R Refused

🛈 If A3.09>=8 hours, display message: A person is unlikely to do moderate physical activity (breathe harder than normal) for 8 or more hours per day. Verify answer with respondent. Click ‘OK’ to go back and change answer or ‘Cancel’ to continue.

🛈 If A3.09=A3.07, display message: A person is unlikely to spend exactly the same amount of time brisk walking as they do moderate activity each day. Verify answer with respondent. Go back to A3.07. Go back to A3.09. Go to next question.

[Picture showcard]

A3.10 During the last 7 days, on how many days did you do **vigorous** physical activities? ‘Vigorous’ activities make you breathe a lot harder than normal (‘huff and puff’) – like heavy lifting, digging, aerobics, fast bicycling, or other activities like those shown on the Showcard.

Think **only** about those physical activities done for at least 10 minutes at a time.

🛈 Activities shown on the Showcard are examples of vigorous activity. Many other activities may fall into this category.

🛈 Activities on the Vigorous Activity Showcard and Moderate Activity Showcard can be interchangeable. If a respondent defines an activity as being vigorous, even though it is on the Moderate Activity Showcard, it should be included here.

 \_\_\_\_\_ days per week (range 0–7) [if A3.10=0 go to all activities A3.12]

.K Don’t know [go to A3.12]

.R Refused [go to A3.12]

A3.11 How much time did you typically spend on **each** of those days doing vigorous physical activities?

🛈 If respondent cannot provide a typical duration, record the average time per day.

🛈 All fields (hours and minutes) must be completed.

 \_\_\_\_\_ hours (range 0–24) \_\_\_\_\_ minutes (range 0–59) 🛈 If under 10 minutes, display message: Total time must be >=10 mins.

.K Don’t know

.R Refused

🛈 If A3.11>=4 hours, display message: A person is unlikely to do vigorous activity (huff and puff) for 4 or more hours per day. Verify answer with respondent. Click ‘OK’ to go back and change answer or ‘Cancel’ to continue.

A3.12 Thinking about all your activities over the last 7 days (including brisk walking), on how many days did you engage in:

* + - * + at least 30 minutes of moderate activity (including brisk walking) that made you breathe a little harder than normal, OR
				+ at least 15 minutes of vigorous activity that made you breathe a lot harder than normal (‘huff and puff’)?

 \_\_\_\_\_ days per week (range 0–7)

.K Don’t know

.R Refused

Sleep

Now, a question about sleep.

A3.12a How many hours of sleep do you usually get in a 24 hour period, including **all naps** and sleeps?

🛈 Enter whole numbers. Round 30 minutes or more up to the next whole hour and round 29 or fewer minutes down.

\_\_\_\_\_ hours (range 1–24)

 .K Don’t know

 .R Refused

🛈 If A3.12a<4 hours, display message: A person is unlikely to usually sleep less than 4 hours in a 24 hour period. Verify answer with respondent. Click ‘OK’ to go back and change answer or ‘Cancel’ to continue.

🛈 If A3.12a>12 hours, display message: A person is unlikely to usually sleep more than 12 hours in a 24 hour period. Verify answer with respondent. Click ‘OK’ to go back and change answer or ‘Cancel’ to continue.

🛈 Ask next two tooth brushing questions, A3.12b and A3.12c, only if respondent has natural teeth, that is, A1.30 not equal to 99.

Tooth brushing

Now, a couple of questions about tooth brushing.

[Showcard]

A3.12b How often do you brush your teeth?

0 Never [go to COVID-19 introduction before COV1.01–1.04]

1 Less than once a day

2 Once a day

3 Twice a day

4 More than twice a day

5 No natural teeth [go to introduction before COV1.01–1.04]

.K Don’t know

.R Refused

[Picture showcard]

A3.12c Looking at the Showcard, what type of toothpaste do you usually use?

🛈 If respondent is unsure about what type of toothpaste is used, and give their permission, you could ask to see the toothpaste that is currently used.

* Standard fluoride packaging might include: “0.221% sodium fluoride”, “0.76% sodium monofluorophosphate”, “1000–1450 ppm” and/or “fluoride toothpaste”.
* Low fluoride packaging might include: “0.117% sodium fluoride”, “0.304% sodium monofluorophosphate”, “400–500 ppm” and/or “low fluoride”.

🛈 Homemade toothpaste or baking soda should be coded as ‘Don’t use toothpaste / no toothpaste available in the house’.

1 Standard fluoride toothpaste

2 Low fluoride toothpaste

3 Non-fluoridated toothpaste

4 Don’t use toothpaste / no toothpaste available in house

.K Don’t know

.R Refused

The toothpaste picture showcard needs updating if there are any major changes in the market. This should be reviewed annually, in consultation with the Ministry’s oral health team, during questionnaire development.

Preventing spread of COVID-19

Now, a few questions about hygiene habits.

[Showcard]

COV1.01–1.04 Over the past **7 days**, how often have you done the following?

🛈 Select ‘Not applicable’ if respondent hasn’t, for example, coughed or sneezed in the past 7 days.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1 Every time | 2Most times | 3 Some-times | 4 A little of the time | 5 None of the time | 6 Not appli-cable | .K Don’t know | .R Ref-used |
| Washed your hands for at least 20 seconds with water and soap, and dried them, or used hand sanitiser, **before eating or handling food** |  |  |  |  |  |  |  |  |
| Washed your hands for at least 20 seconds with water and soap, and dried them, or used hand sanitiser, **after touching surfaces outside of the home** |  |  |  |  |  |  |  |  |
| Covered your mouth and nose with a tissue, your sleeve or elbow when you’ve coughed or sneezed |  |  |  |  |  |  |  |  |
| Recorded the places you’ve been and who you were with (e.g. in a diary or app) |  |  |  |  |  |  |  |  |

COV1.04a Over the past **7 days**, have you used a public bus, train or ferry?

🛈 Do not include school buses.

1 Yes

2 No [go to COV1.13]

.K Don’t know [go to COV1.13]

.R Refused [go to COV1.13]

[Showcard]

COV1.04b Over the past **7 days**, how often have you worn a face covering or face mask when on a public bus, train or ferry?

🛈 Do not include school buses.

1 Every time

2 Most times

3 Sometimes

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

COV1.13 Have you received a COVID-19 vaccine?

1. Yes [go to Tobacco introduction before A3.13]
2. No
3. Don’t know
4. Refused

[Showcard]

COV1.13a When a COVID-19 vaccine is offered to you, how likely would you be to get vaccinated?

1. Very likely
2. Likely
3. Neither likely nor unlikely
4. Unlikely
5. Very unlikely
6. Don’t know
7. Refused

Tobacco

Now, some questions on tobacco smoking. For these questions, please do not include use of electronic cigarettes or vaping devices. We will ask about those later.

A3.13 Have you ever smoked cigarettes or tobacco at all, even just a few puffs? Please include pipes and cigars.

🛈 If asked, this does **not** include marijuana / cannabis or electronic cigarettes.

1 Yes

2 No [go to Electronic cigarettes introduction before A3.21a]

.K Don’t know

.R Refused

A3.14 Have you ever smoked a total of more than **100** cigarettes in your whole life?

1 Yes

2 No [go to Electronic cigarettes introduction before A3.21a]

.K Don’t know

.R Refused

[Showcard]

A3.15 How often do you now smoke?

 🛈 Read response options. If more than one frequency given, code the highest one.

1 I don’t smoke now

2 At least once a day [go to tobacco products A3.17]

3 At least once a week [go to A3.17]

4 At least once a month [go to A3.17]

5 Less often than once a month [go to A3.17]

.K Don’t know [go to A3.17]

.R Refused [go to A3.17]

🛈 Ask next question, A3.16, if respondents are ex-smokers (A3.13=1 and A3.14=1 and A3.15=1).

[Showcard]

A3.16 How long ago did you stop smoking?

1 Within the last month [go to number of quit attempts A3.21]

2 1 month to 3 months ago [go to A3.21]

3 4 months to 6 months ago [go to A3.21]

4 7 to 12 months ago [go to A3.21]

5 1 to 2 years ago [go to Electronic cigarettes introduction before A3.21a]

6 2 to 5 years ago [go to introduction before A3.21a]

7 Longer than 5 years ago [go to introduction before A3.21a]

.K Don’t know [go to introduction before A3.21a]

.R Refused [go to introduction before A3.21a]

🛈 Ask next questions, A3.17 and A3.18, if respondents are current smokers (A3.15=2, 3, 4, 5) or didn’t answer the current smoker question (A3.15=.K, .R).

[Showcard]

A3.17 Which of these products do you smoke the **most**?

 🛈 Read answers and code.

1 Tailor-made cigarettes – that is, manufactured cigarettes in a packet

2 Roll your owns using loose tobacco

3 Both tailor-mades and roll your owns

4 Pipes [go to times quit smoking A3.20]

5 Cigars [go to A3.20]

.K Don’t know

.R Refused

A3.18 On average, how many cigarettes do you smoke a day?

🛈 Response option numbers are not displayed on CAPI screen.

🛈 Don’t initially prompt answer. Wait and code.

 🛈 If respondent is unable to suggest an average, ask for the typical number of cigarettes smoked in a week and divide by 7.

 🛈 Round answer to nearest number if necessary, e.g. 2.5 cigarettes a day should be rounded up to 3, that is, option ‘1–5 per day’. 10.4 cigarettes would be rounded down to 10, that is, option ‘6–10 per day’.

1 Less than 1 per day

2 1–5 per day

3 6–10 per day

4 11–15 per day

5 16–20 per day

6 21–25 per day

7 26–30 per day

8 31 or more a day

 .K Don’t know

 .R Refused

🛈 Ask A3.20 if respondents are current smokers (A3.15=2, 3, 4, 5) or didn’t answer the current smoker question (A3.15=.K or .R).

A3.20 In the last 12 months, how many times did you quit smoking for more than one week?

­­\_\_\_\_\_ times (range 0–51) [go to Electronic cigarettes introduction before A3.21a]

.K Don’t know [go to introduction before A3.21a]

.R Refused [go to introduction before A3.21a]

🛈 Ask A3.21 if respondents are ex-smokers (A3.15=1) and quit smoking in the last 12 months (A3.16=1, 2, 3, 4).

A3.21 In the last 12 months, how many times did you quit smoking for more than one week? Please include the time when you stopped smoking.

­­\_\_\_\_\_ times (range 1–51)

.K Don’t know

.R Refused

Electronic cigarettes

🛈 Ask everyone A3.21a regardless of their smoking status.

Now I’ll ask you about electronic cigarettes and vaping devices.

A3.21a Have you ever tried an electronic cigarette or vaping device, even just a puff or ‘vape’?

🛈 Electronic cigarettes or vaping devices, also known as e-cigs, vapes or personal vaporizers, are battery-powered devices that heat a liquid to release vapour as people inhale from them. The vapour may contain nicotine and may be flavoured.

1 Yes

2 No [go to Dietary habits introduction before A3.22]

.K Don't know [go to introduction before A3.22]

.R Refused [go to introduction before A3.22]

[Showcard]

A3.21b How often do you now use electronic cigarettes or vaping devices?

🛈 Read response options. If more than one frequency given, code the highest one.

1. I don’t use them now

2 At least once a day

3 At least once a week

4 At least once a month

5 Less often than once a month

.K Don’t know

.R Refused

Dietary habits

Now, a couple of questions about eating fruit and vegetables.

🛈 Response option numbers are not displayed on the CAPI screen or showcards

for questions A3.22 and A3.23.

[Picture showcard]

A3.22 On **average**, how many **servings** of fruit do you eat per day? Please include all fresh, frozen, canned and stewed fruit. Do **not** include fruit juice or dried fruit. A ‘**serving**’ = 1 medium piece **or** 2 small pieces of fruit **or** ½ cup of stewed fruit. For example, 1 apple + 2 small apricots = 2 servings.

1 I don’t eat fruit

2 Less than 1 serving per day

3 1 serving per day

4 2 servings per day

5 3 servings per day

6 4 or more servings per day

.K Don’t know

.R Refused

[Picture showcard]

A3.23 On **average**, how many **servings** of vegetables do you eat per day? Please include all fresh, frozen and canned vegetables. Do **not** include vegetable juices. A ‘**serving**’ = 1 medium potato / kumara **or** ½ cup cooked vegetables **or** 1 cup of salad vegetables. For example, 2 medium potatoes + ½ cup of peas = 3 servings.

Remember to think about all meals and snacks.

1 I don’t eat vegetables

2 Less than 1 serving per day

3 1 serving per day

4 2 servings per day

5 3 servings per day

6 4 or more servings per day

.K Don’t know

.R Refused

Alcohol

I will now ask you some questions about your use of alcoholic drinks.

A3.24 Have you had a drink containing alcohol in the last year?

1 Yes

2 No [go to alcohol harm A3.33]

.K Don’t know [go to A3.33]

.R Refused [go to A3.33]

A3.25 How often do you have a drink containing alcohol?

🛈 Don’t initially prompt answer. Wait and code.

1 Monthly or less

2 Up to 4 times a month

3 Up to 3 times a week

4 4 or more times a week

.K Don’t know

.R Refused

[Showcard]

[Picture showcard]

A3.26a Looking at the Showcard, how many drinks containing alcohol do you have on a typical day when you are drinking?

🛈 Response option numbers are not displayed on CAPI screen or showcards.

**By one drink, I now mean one standard drink**, that is, one can or stubbie of beer, half a large bottle of beer, one small glass of wine or one shot of spirits.

This picture Showcard [show picture showcard] can help you estimate the number of standard drinks you have drunk. It shows some examples of the number of standard drinks in different alcoholic drinks.

🛈 Take average and round to nearest whole number if necessary, e.g. if respondent says 4 or 5, average is 4.5, round to nearest whole number = 5, that is, option ‘5 or 6’.

1 1 or 2

2 3 or 4

3 5 or 6

4 7 to 9

5 10 or 11

6 12 or more

.K Don’t know

.R Refused

The standard drinks picture showcard is reviewed annually in case there are any changes in the market.

Picture showcard for A3.26a and A3.27a:



[Showcard]

[Picture showcard]

A3.27a Looking at the Showcard, and the picture Showcard, how often do you have six or more standard drinks on one occasion?

1 Never

2 Less than monthly

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.28 How often during the last year have you found that you were not able to stop drinking once you had started?

1 Never

2 Less than monthly

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.29 How often during the last year have you failed to do what was normally expected from you because of drinking?

1 Never

2 Less than monthly

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.30 How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?

1 Never

2 Less than monthly

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.31 How often during the last year have you had a feeling of guilt or remorse after drinking?

1 Never

2 Less than monthly

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.32 How often during the last year have you been unable to remember what happened the night before because you had been drinking?

1 Never

2 Less than monthly

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

🛈 The next two questions are about lifetime harm from drinking, so ask all respondents even if they have not had a drink containing alcohol in the last year.

[Showcard]

A3.33 Have you or someone else been injured as a result of your drinking?

1 Yes, but not in the last year

2 Yes, during the last year

3 No

.K Don’t know

.R Refused

[Showcard]

A3.34 Has a relative or friend, or a doctor or other health worker, been concerned about your drinking or suggested you cut down?

1 Yes, but not in the last year

2 Yes, during the last year

3 No

.K Don’t know

.R Refused

## Drugs

The next questions are about your experience of using drugs. These substances can be smoked, swallowed, snorted, inhaled, injected or taken in the form of pills.

Please do not include medicine that you have used for the purpose it was prescribed for, by your doctor or nurse. Please **include** prescribed medicine that you have taken for other reasons, such as to get high, or taken more frequently or at a higher dose than specified.

Remember that everything you tell us will remain confidential.

[Showcard]

A3.37 Looking at the Showcard, in the **past 12 months**, have you used any of the following substances? Please just read out the number next to the words.

 [Select all that apply]

 🛈 Prompt: “any others?”

🛈 Please do not include medication, such as medicinal cannabis, that is taken for the purpose it was prescribed for and is taken as prescribed.

 1 Cannabis (marijuana, hash, weed) [go to A3.39]

2 Cocaine

3 Ecstasy / MDMA

4 Amphetamine type stimulants, for example, ‘P’, speed, ice, Ritalin®

5 Inhalants, for example, NOS, glue, petrol, poppers

6 Sedatives or sleeping pills, for example, Valium, diazepam

7 Hallucinogens, for example, LSD, mushrooms, ketamine

8 Opioids, for example, heroin, morphine, methadone, codeine

77 Other substances – please specify (for example, synthetic cannabinoids, ‘synnies’, GHB, GBL etc.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

0 No, none of the above [cannot be selected with other options]

.K Don’t know

.R Refused

A3.38 In your **life**, have you **ever used cannabis**?

🛈 Do not include synthetic cannabinoids.

🛈 Do not include cannabis that has been prescribed by your doctor or nurse and is taken as prescribed.

1 Yes [go to A3.43]

2 No [go to A4.01]

.K Don’t know [go to A4.01]

.R Refused [go to A4.01]

[Showcard]

A3.39 In the **past three months**, how often have you used cannabis?

🛈 Do not include synthetic cannabinoids.

🛈 Do not include cannabis that has been prescribed by your doctor or nurse and is taken as prescribed.

1 Never [go to A3.43]

2 Once or twice

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.40 During the **past three months**, how often have you had a strong desire or urge to use cannabis?

🛈 Do not include mild or fleeting desire to use cannabis, or a desire to use because an opportunity arose (for example, **do not include** if a respondent was offered cannabis and experienced a desire to use cannabis as a result, but did not have a desire to use beforehand).

1 Never

2 Once or twice

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.41 During the **past three months**, how often has your use of cannabis led to health, social, legal or financial problems?

🛈 This may include problems such as forgetting to do things, difficulty paying attention or getting motivated, problems getting organised, feeling depressed or anxious.

1 Never

2 Once or twice

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.42 During the **past three months**, how often have you failed to do what was

normally expected of you because of your use of cannabis?

🛈 This may include situations such as problems keeping up at work, missing or falling behind at school or university or failing to maintain usual family or relationship commitments (e.g. house cleaning or paying bills).

1 Never

2 Once or twice

3 Monthly

4 Weekly

5 Daily or almost daily

.K Don’t know

.R Refused

[Showcard]

A3.43 Has a friend or relative or anyone else **ever** expressed concern about your use of cannabis?

🛈 Concern can include things such as discussion, questioning, nagging, advice, worry or anger expressed by someone towards the respondent.

🛈 This question is asked of everyone who has ever used cannabis, even if only used occasionally.

1 No, never

2 Yes, in the past 3 months

3 Yes, but not in the past 3 months

.K Don’t know

.R Refused

[Showcard]

A3.44 Have you ever **tried** and **failed** to control, cut down or stop using cannabis?

🛈 This question is about serious unsuccessful attempts to control, cut down or stop, rather than just passing thoughts of cutting down or half-hearted efforts. Successful attempts to cut down should **not** be recorded.

🛈 If a respondent has made several attempts to cut down and was successful eventually, record the last unsuccessful attempt (e.g. someone that successfully stopped using cannabis 3 months ago, but had several failed attempts prior to that would be recorded as ‘Yes, but not in the past 3 months’).

🛈 This question is asked of everyone who has ever used cannabis, even if only used occasionally.

1 No, never

2 Yes, in the past 3 months

3 Yes, but not in the past 3 months

.K Don’t know

.R Refused

# Health status

Now some more questions about your health. Some of these questions may appear similar but we need to ask them.

## SF-12v2® Health Survey (Four-week Recall)

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This first question is about your health **now**.

Please try to answer as accurately as you can.

[Showcard]

A4.01 In general, would you say your health is:

🛈 Read response options.

1 Excellent

2 Very good

3 Good

4 Fair

5 Poor

.K Don’t know

.R Refused

🛈 If respondent used a family or professional translator (A6.13=1 OR A6.14=1), skip to FD1.01. Everyone else (A6.13=2 AND A6.14=2) go to introduction before A4.02.

Now I’m going to read a list of activities that you might do during a typical day.

As I read each item, please tell me if your health **now** limits you a lot, limits you a little, or does not limit you at all in these activities.

🛈 If respondent says he/she does not do these activities, then ask how limited they think they would be if they tried to do them.

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[Showcard]

A4.02 Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling or playing golf. Does your health now limit you a lot, limit you a little, or not limit you at all?

🛈 Read response options only if necessary.

1 Yes, limited a lot

2 Yes, limited a little

3 No, not limited at all

.K Don’t know

.R Refused

[Showcard]

A4.03 Climbing several flights of stairs. Does your health now limit you a lot, limit you a little, or not limit you at all?

🛈 Read response options only if necessary.

1 Yes, limited a lot

2 Yes, limited a little

3 No, not limited at all

.K Don’t know

.R Refused

The following two questions ask about your physical health and your daily activities.

[Showcard]

A4.04 During the **past four weeks**, how much of the time have you accomplished less than you would like as a result of your physical health?

🛈 Read response options.

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.05 During the **past four weeks**, how much of the time were you limited in the kind of work or other regular daily activities you do as a result of your physical health?

🛈 Read response options.

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

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The following two questions ask about your emotions and your daily activities.

[Showcard]

A4.06 During the **past four weeks**, how much of the time have you accomplished less than you would like as a result of any emotional problems, such as feeling depressed or anxious?

🛈 Read response options.

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.07 During the **past four weeks**, how much of the time did you do work or other regular daily activities less carefully than usual as a result of any emotional problems, such as feeling depressed or anxious?

🛈 Read response options.

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.08 During the **past four weeks**, how much did **pain** interfere with your normal work, including both work outside the home and housework? Did it interfere …

🛈 Read response options.

1 Not at all

2 A little bit

3 Moderately

4 Quite a bit

5 Extremely

.K Don’t know

.R Refused

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The next questions are about how you feel and how things have been with you during the past four weeks.

As I read each statement, please give the one answer that comes closest to the way you have been feeling; is it all the time, most of the time, some of the time, a little of the time, or none of the time?

[Showcard]

A4.09 How much of the time during the **past four weeks,** have you felt calm and peaceful?

🛈 Read response options only if necessary.

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.10 How much of the time during the **past four weeks**, did you have a lot of energy?

🛈 Read response options only if necessary.

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.11 How much of the time during the **past four weeks**, have you felt downhearted and depressed?

🛈 Read response options only if necessary.

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

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[Showcard]

A4.12 During the **past four weeks**, how much of the time has your physical health or emotional problems interfered with your social activities like visiting with friends or relatives? Has it interfered …

🛈 Read response options.

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

Functional difficulties – Washington Group Short Set

The next questions ask about difficulties you may have doing certain activities because of a health problem.

[Showcard]

FD1.01 Do you have difficulty seeing, even if wearing glasses?

1 No – no difficulty

2 Yes – some difficulty

3 Yes – a lot of difficulty

4 Cannot do at all

.K Don’t know

.R Refused

[Showcard]

FD1.02 Do you have difficulty hearing, even if using a hearing aid?

1 No – no difficulty

2 Yes – some difficulty

3 Yes – a lot of difficulty

4 Cannot do at all

.K Don’t know

.R Refused

[Showcard]

FD1.03 Do you have difficulty walking or climbing steps?

1 No – no difficulty

2 Yes – some difficulty

3 Yes – a lot of difficulty

4 Cannot do at all

.K Don’t know

.R Refused

[Showcard]

FD1.04 Do you have difficulty remembering or concentrating?

1 No – no difficulty

2 Yes – some difficulty

3 Yes – a lot of difficulty

4 Cannot do at all

.K Don’t know

.R Refused

[Showcard]

FD1.05 Do you have difficulty washing all over or dressing?

1 No – no difficulty

2 Yes – some difficulty

3 Yes – a lot of difficulty

4 Cannot do at all

.K Don’t know

.R Refused

[Showcard]

FD1.06 Using your usual language, do you have difficulty communicating, for example, understanding or being understood?

1 No – no difficulty

2 Yes – some difficulty

3 Yes – a lot of difficulty

4 Cannot do at all

.K Don’t know

.R Refused

## Mental health – K10

The next questions are again about how you have been feeling during the **past four weeks**. Some questions may sound similar to questions you have already answered.

[Showcard]

A4.13 During the past four weeks, how often did you feel tired out for no good reason – would you say all of the time, most of the time, some of the time, a little of the time, or none of the time?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.14 During the past four weeks, how often did you feel nervous – all of the time, most of the time, some of the time, a little of the time, or none of the time?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time [go to feeling hopeless A4.16]

.K Don’t know [go to A4.16]

.R Refused [go to A4.16]

[Showcard]

A4.15 During the past four weeks, how often did you feel so nervous that nothing could calm you down?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.16 During the past four weeks, how often did you feel hopeless?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.17 During the past four weeks, how often did you feel restless or fidgety?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time [go to feeling depressed A4.19]

.K Don’t know [go to A4.19]

.R Refused [go to A4.19]

[Showcard]

A4.18 During the past four weeks, how often did you feel so restless you could not sit still?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.19 During the past four weeks, how often did you feel depressed?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time [go to effort A4.21]

.K Don’t know [go to A4.21]

.R Refused [go to A4.21]

[Showcard]

A4.20 How often did you feel so depressed that nothing could cheer you up?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.21 During the past four weeks, how often did you feel that everything was an effort?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

A4.22 During the past four weeks, how often did you feel worthless?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

[Showcard]

AMH1.01a During the past four weeks, how often did you feel lonely?

1 All of the time

2 Most of the time

3 Some of the time

4 A little of the time

5 None of the time

.K Don’t know

.R Refused

# COVID-19 information

I will now ask some questions about information on COVID-19.

🛈 If asked, COVID-19 is an acronym for **co**rona**vi**rus **d**isease of 20**19**.

[Showcard]

COV1.05 Over the past **7 days**, what has been your **main** source of information on COVID-19?

1 TV news

2 Online news websites (e.g. NZ Herald, Stuff)

3 NZ Government COVID-19 website (www.covid19.govt.nz or www.uniteforrecovery.govt.nz)

4 Ministry of Health website (www.health.govt.nz)

5 Social media (e.g. Facebook, Twitter)

6 Search engines (e.g. Google)

7 Radio

8 Printed newspapers or magazines

9 Family, whānau or friends

10 GP, nurse, pharmacist or other health care worker

11 Workplace

12 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

13 Nowhere – I haven’t tried to get any information on COVID-19

.K Don’t know

.R Refused

🛈 If COV1.05=1–12 go to COV1.06, otherwise go to COV1.07.

[Showcard]

COV1.06 How worried has the information from this source made you feel?

1 Not at all worried

2 Slightly worried

3 Very worried

.K Don’t know

.R Refused

[Showcard]

COV1.07–1.08 To what extent do you agree or disagree with the following statements?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1Strongly agree | 2Agree | 3Neither agree nor disagree | 4Disagree | 5Strongly disagree | .KDon’t know | .RRef-used |
| I can get information about COVID-19 in words I understand |  |  |  |  |  |  |  |
| I feel I have good information about COVID-19 |  |  |  |  |  |  |  |

 [Showcard]

COV1.09–1.11 To what extent do the following statements, relating to COVID-19, apply to you **right now**?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | 1Strongly applies | 2Some-what applies | 3Neither applies nor does not apply | 4Some-what does not apply | 5Does not apply at all | .KDon’t know | .RRef-used |
| I am worried about the risk of getting COVID-19 |  |  |  |  |  |  |  |
| I am worried about the health of my family members |  |  |  |  |  |  |  |
| I feel stressed about leaving home  |  |  |  |  |  |  |  |

# Socio-demographics

Now, I am going to ask you some general questions about you and your household. The answers to these questions help us to check that we have selected a representative sample of New Zealanders to participate in this survey, and sometimes these things can affect our health.

## Date of birth

A5.01 Firstly, what is your date of birth?

🛈 Interviewer read back date of birth to check it is correct.

🛈 To update a previously-recorded date, click on the date picker, select the month and year from the drop-down lists, then **click on the correct day**.

🛈 Display message: This means you are X years old.

\_\_\_\_\_ Day (range 1–31)

\_\_\_\_\_ Month (range Jan–Dec)

\_\_\_\_\_ Year (range [current year minus 120]–[current year minus 15]) [go to Ethnic group A5.03]

.R Refused

🛈 Calculated age must be ≥15 years. If less than 15, display message: Age cannot be less than 15.

🛈 Ask next question if date of birth refused (A5.01=.R).

A5.02 Would you mind telling me your age?

 \_\_\_\_\_ years (range 15–120)

.R Refused

## Ethnic group

[Showcard]

A5.03 Which ethnic group or groups do you belong to?

[Select all that apply]

🛈 If ‘Other – Specify’ is selected you will be asked to specify the other ethnic groups on the next screen.

1 New Zealand European

2 Māori

3 Samoan

4 Cook Island Māori

5 Tongan

6 Niuean

7 Chinese

8 Indian

77 Other [Specify] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Three “Other” ethnic groups to be asked about on a new screen and programmed from the codefile from StatsNZ]

.K Don’t know

.R Refused

[Showcard]

A5.05 Which country were you born in?

🛈 When selecting ‘Other’ you are able to enter a historic name of the country. The codefile will recognise this and assign it to the same category as the country’s present name.

1 New Zealand [go to language A5.07]

2 Australia

3 England

4 China (People’s Republic of)

5 India

6 South Africa

7 Samoa

8 Cook Islands

77 Other [Specify the name of the country]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 [Programme from the codefile from StatsNZ. Can only specify one country]

.K Don’t know [go to language A5.07]

.R Refused [go to language A5.07]

A5.06 In what year did you arrive to live in New Zealand?

🛈 Record 4 digit date e.g. 1967.

🛈 If year is earlier than year of birth, display message: Consistency check 🛈 Answer must be ≥ year of birth. Go back to A5.01 (Date of birth). Go back to A5.06.

 \_\_\_\_\_ (range [current year minus 120]–[current year])

.K Don’t know

.R Refused

[Showcard]

A5.07 In which languages could you have a conversation about a lot of everyday things?

 [Select all that apply]

🛈 If ‘Other language – Specify’ is selected, the respondent will be asked to specify the other languages on the next screen.

1 English

2 Māori

3 Samoan

4 NZ sign language

77 Other language, e.g. Gujarati, Cantonese, Greek – please specify

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Three “Other” languages possible]

[Programme from the codefile from StatsNZ]

.K Don’t know

.R Refused

## Racial discrimination

[Showcard]

R5.08 Now I will ask you some questions about **reactions** to your ethnicity. How do **other people** usually classify you in New Zealand?

 [Select all that apply]

1 New Zealand European

2 Māori

3 Samoan

4 Cook Island Māori

5 Tongan

6 Niuean

7 Chinese

8 Indian

77 Other [Specify] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Three “Other” ethnic groups possible]

[Programme from the codefile from StatsNZ]

.K Don’t know

.R Refused

[Showcard]

R5.09 How often do you think about your ethnicity? Would you say never, once a year, once a month, once a week, once a day, once an hour, or constantly?

1 Never

2 At least once a year

3 At least once a month

4 At least once a week

5 At least once a day

6 At least once an hour

7 Constantly

.K Don’t know

.R Refused

[Showcard]

R5.10 Have you ever been a victim of an ethnically motivated attack (verbal or physical abuse to you or your property) **in New Zealand**?

 [Select all that apply]

🛈 If respondent selects option 1 only, probe to see if option 2 also applies (and vice versa if only option 2 is selected).

🛈 If respondent selects option 3 only, probe to see if option 4 also applies (and vice versa if only option 4 is selected).

1 Yes, verbal – within the past 12 months

2 Yes, verbal – more than 12 months ago

3 Yes, physical – within the past 12 months

4 Yes, physical – more than 12 months ago

5 No

.K Don’t know

.R Refused

[Showcard]

R5.11 Have you ever been treated unfairly (for example, kept waiting or treated differently) by a health professional (that is, a doctor, nurse, dentist etc.) **because of your ethnicity** in New Zealand?

[Select all that apply]

🛈 If respondent selects option 1 only, probe to see if option 2 also applies (and vice versa if only option 2 is selected).

1 Yes, within the past 12 months

2 Yes, more than 12 months ago

3 No

4 Not applicable – have never tried to visit a health professional in New Zealand

.K Don’t know

.R Refused

[Showcard]

R5.12 Have you ever been treated unfairly at work or been refused a job **because of your ethnicity** in New Zealand?

[Select all that apply]

🛈 If respondent selects option 1 only, probe to see if option 2 also applies (and vice versa if only option 2 is selected).

1 Yes, within the past 12 months

2 Yes, more than 12 months ago

3 No

4 Not applicable – have never had a job or tried to find a job in New Zealand

.K Don’t know

.R Refused

[Showcard]

R5.13 Have you ever been treated unfairly when renting or buying housing **because of your ethnicity** in New Zealand?

[Select all that apply]

🛈 If respondent selects option 1 only, probe to see if option 2 also applies (and vice versa if only option 2 is selected).

1 Yes, within the past 12 months

2 Yes, more than 12 months ago

3 No

4 Not applicable – have never tried to rent or buy a house in New Zealand

.K Don’t know

.R Refused

## Education

Now some questions about your education.

[Showcard]

A5.14 What is your highest secondary school qualification?

1 None

2 NZ School Certificate in one or more subjects

 **or** National Certificate level 1
**or** NCEA level 1

3 NZ Sixth Form Certificate in one or more subjects
**or** National Certificate level 2
**or** NZ UE before 1986 in one or more subjects
**or** NCEA level 2

4 NZ Higher School Certificate
**or** Higher Leaving Certificate
**or** NZ University Bursary / Scholarship
**or** National Certificate level 3
**or** NCEA level 3
**or** NZ Scholarship level 4

5 Other secondary school qualification **gained in New Zealand**
[Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6 Other secondary school qualification **gained overseas**

.K Don’t know

.R Refused

[Showcard]

A5.15 What is your highest completed qualification?

0 None

1 National Certificate level 1

2 National Certificate level 2

3 National Certificate level 3

4 National Certificate level 4

5 Trade Certificate

6 Diploma or Certificate level 5

7 Advanced Trade Certificate

8 Diploma or Certificate level 6

9 Teachers Certificate / Diploma

10 Nursing Diploma

11 Bachelor

12 Bachelor Hons

13 Postgraduate Certificate / Diploma

14 Masters Degree

15 PhD

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

🛈 If A5.14=2, 3, 4, 5, 6 (secondary school qualification completed) AND A5.15=0 (no highest completed qualification), display message: Consistency check 🛈 In question A5.14 you recorded that the respondent had completed a secondary school qualification, but in A5.15 you recorded that they haven’t completed a qualification. Verify answers with respondent. Go back to A5.14. Go back to A5.15.

## Income sources

 The next few questions ask about your sources of income.

[Showcard]

A5.16 In the last 12 months, what are all the ways that you yourself got income? Please do not count loans because they are not income.

 [Select all that apply]

🛈 Probe “any other?” until no other type of income support mentioned.

🛈 All loans, including student loans, should not be counted.

1 Wages, salaries, commissions, bonuses etc, paid by an employer

2 Self-employment, or business you own and work in

3 Interest, dividends, rent, other investments

4 Regular payments from ACC or a private work accident insurer

5 NZ Superannuation or Veterans Pension

6 Other superannuation, pensions, annuities (other than NZ Superannuation, Veterans Pension or War Pension)

7 Jobseeker Support

8 Sole Parent Support

9 Supported Living Payment

10 Student allowance

11 Other government benefits, government income support payments, war pensions, or paid parental leave

12 Other sources of income

17 No source of income during that time

.K Don’t know

.R Refused

Income

[Showcard]

A5.23 Looking at the Showcard, what is the total income that **you yourself** got from **all sources**, before tax or anything was taken out of it, in the last 12 months? Please read out the number next to the income group.

 If you know your weekly or fortnightly income **after tax**, I have a Showcard ⚐ that can help you work out your annual income **before tax**.

1 Loss

2 Zero income

3 $1 – $5,000

4 $5,001 – $10,000

5 $10,001 – $15,000

6 $15,001 – $20,000

7 $20,001 – $25,000

8 $25,001 – $30,000

9 $30,001 – $35,000

10 $35,001 – $40,000

11 $40,001 – $50,000

12 $50,001 – $60,000

13 $60,001 – $70,000

14 $70,001 – $100,000

15 $100,001 – $150,000 [programme A5.24=8 and go to COV1.12]

16 $150,001 or more [programme A5.24=8 and go to COV1.12]

.K Don’t know

.R Refused

The showcard, to calculate annual income (before tax), will need updating if there are any changes to the tax rates. This should be reviewed annually during questionnaire development.

[Showcard]

A5.24 Looking at the Showcard, what is the total income that **your household** got from all sources, before tax or anything was taken out of it, in the last 12 months? Please read out the number next to the income group.

1 Loss

2 Zero income

3 $1 – $20,000

4 $20,001 – $30,000

5 $30,001 – $50,000

6 $50,001 – $70,000

7 $70,001 – $100,000

8 $100,001 or more

.K Don’t know

.R Refused

[Showcard]

COV1.12 To what extent do you agree or disagree with the following statement:

Over the past **7 days**, my household has struggled to pay for basic living costs, such as food or accommodation.

1 Strongly agree

2 Agree

3 Neither agree nor disagree

4 Disagree

5 Strongly disagree

.K Don’t know

.R Refused

Employment

[Showcard]

A5.17 Which of these statements best describes your **current** work situation:

1 Working in paid employment (includes self-employment)

2 Not in paid work, and looking for a job [go to work without pay A5.19]

3 Not in paid work, and not looking for a job (for any reason, such as

 being retired, a homemaker, caregiver, or full-time student) [go to A5.19]

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [go to A5.19]

.K Don’t know [go to A5.19]

.R Refused [go to A5.19]

A5.18 How many hours a week do you **usually** work?

🛈 Record to nearest hour.

 \_\_\_\_\_ hours (range 1–120)

.K Don’t know

.R Refused

[Showcard]

A5.19 In the last 4 weeks, which of these have you done, **without pay**?

 [Select all that apply]

1 Household work, cooking, repairs, gardening, etc, for **my own household**

2 Looked after a child who is a member of **my household**

3 Looked after a member of **my household** who is ill or has a disability

4 Looked after a child (who does **not** live in my household)

5 Helped someone who is ill or has a disability (who does **not** live in my household)

6 Other voluntary work for or through any organisation, group or marae

7 Studied for 20 hours or more per week at school or any other place

8 Studied for less than 20 hours per week at school or any other place

9 None of these

.K Don’t know

.R Refused

## Medical insurance

 Now, I’ll ask you about medical insurance.

A5.20 Are you covered by any health or medical insurance?

1 Yes

2 No [go to Housing introduction before A5.28a]

.K Don’t know [go to introduction before A5.28a]

.R Refused [go to introduction before A5.28a]

[Showcard]

A5.21 What type of health or medical insurance is that?

 🛈 If hospital **plus** one or two other services, e.g. 4 free GP visits per year, code as Other and record details of policy.

1 Comprehensive, covering day-to-day costs such as GP fees and pharmacy charges, as well as private hospital care

2 Hospital only

77 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

.K Don’t know

.R Refused

[Showcard]

A5.22 And who pays for this health or medical insurance?

🛈 Please ensure respondent reads all response options before choosing.

1 Self or family members

2 Partly self or family and partly employer

3 Paid for by employer or employer of family member

4 Paid for by some other person or agency

.K Don’t know

.R Refused

Housing

Now, some questions about housing.

A5.28a Do you, or anyone else who lives here, hold this house / flat in a family trust?

🛈 Help Text: What is a family trust?

A family trust is a legal way to protect and hold family assets. In the context

of this question, a house could be a family asset. The house is owned by a

group of people, not an individual (this group of people are the nominated

trustees. These may or may not be family members).

The aim of the trust is to preserve the assets (such as a house) in the

interests of present and/or future family members (or nominated

beneficiaries). The family trust arrangement will be set out in a legal

document, usually called a trust deed.

Either the nominated beneficiary or nominated trustee of the family trust

can ‘hold’ the house / flat in a family trust.

Charitable trusts should not be included, only family trusts and other types

of private trusts.

If a house is owned by a company or business, select “No” for this

question.

1 Yes [go to bedrooms A5.30]

2 No

.K Don’t know

.R Refused

A5.29 Do you, or anyone else who lives here, own or partly own this dwelling, with or without a mortgage?

1 Yes [go to bedrooms A5.30]

2 No

.K Don’t know

.R Refused

[Showcard]

A5.29a Who owns this house / flat?

1 Private person, trust or business

2 Local Authority or City Council

3 Housing New Zealand Corporation

4 Other state-owned corporation or state-owned enterprise, or government department or ministry

.K Don’t know

.R Refused

A5.30 How many bedrooms are there in this dwelling? Please include rooms or sleepouts that are furnished as bedrooms and any caravans that this household uses as a bedroom.

🛈 Count: Any room furnished as a bedroom even if no one is using it.

Sleepouts or caravans if they are next to the house / flat, and are furnished as a bedroom.

🛈 Don't count: Any other room (e.g. living room) used as a bedroom UNLESS the only bedroom facilities are in that room.

\_\_\_\_\_bedrooms (range 1–20)

.K Don’t know

.R Refused

[Showcard]

A5.30a Counting those bedrooms, how many rooms are there in this dwelling? Please include all the rooms listed under ‘Count’ on the Showcard. Do not include the rooms listed under ‘DON’T count’.

🛈 If necessary, help the respondent to identify the rooms that should be counted. If they are uncertain about a particular room, and give their permission, you could view that room in order to help them.

🛈 If a dwelling is built in an open-plan style, then room equivalents should be counted as if they had walls between them.

🛈 Room equivalents should not be counted for one-roomed dwellings (i.e. bed-sitting rooms). A one-roomed dwelling should be counted as having one room only.

🛈 If number of rooms is fewer than number given in A5.30, display message: Consistency check 🛈 Answer must be ≥ number of bedrooms given at A5.30. Go back to A5.30. Go back to A5.30a.

\_\_\_\_\_ rooms (range 1–100)

.K Don’t know

.R Refused

Identity self-complete section

🛈 If the interview is being conducted with cognitive or language assistance from a family member / caregiver / friend of the respondent (A6.12=1 OR A6.13=1), skip to Household composition (A5.31). Everyone else (A6.12=2 AND A6.13=2) go to A5.30bIntro.

🛈 START OF SELF-COMPLETE SECTION.

A5.30bIntro

Now, I’m going to hand the computer to you, so that you can answer the next question privately.

🛈 The interviewer can administer this section using showcards but only if privacy can be ensured (i.e. no one other than a professional translator can see or hear the answers).

1. **Continue with this section** [go to A5.30b]
2. Skip this section because privacy isn’t ensured[go to A5.31]

🛈 If A5.30bIntro=2, display the following message: You have chosen to skip this section. Click ‘OK’ to go back, or ‘Cancel’ to skip the section.

🛈 New screen.

Sexual identity

[Showcard]

A5.30b Which of the following options best describes how you think of yourself?

1 Heterosexual or straight

2 Gay or lesbian

3 Bisexual

4 Other

.K I don’t know

.R I don’t want to answer

🛈 END OF SELF-COMPLETE SECTION.

🛈 New screen.

Thank you for completing that question.

Please return the computer to the surveyor and they will ask you the last group of questions.

# Household composition

🛈 Ask next questions, A5.31 and A5.35, if there is more than 1 person in household (Occupants in household screener>1).

Sex and age

A5.31 I would now like to enter some information about the **other** people who live with you, as this can impact on your health. Please confirm the initials, ages and genders of all the people who usually live in this household.

🛈 The following questions cover the initials, age, sex and relationship of **every** member of the household.

🛈 Update fields or add / delete occupants below as required.

🛈 Occupant grid pre-populated with information from household screener.

|  |  |  |  |
| --- | --- | --- | --- |
| Occupant Name | ID | Age | Gender |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Relationships

The next questions are about relationships in your household.

🛈 The following questions cover the relationships between **every** member of the household.

🛈 Ask the relationships between every household member one-way. E.g. if a father Matt is asked the relationship to his son James, there’s no need to also ask James his relationship to his father as it will be derived.

[Showcard]

A5.35

🛈 If dealing with respondent’s relationships, insert:

What is [Name’s] relationship to you?

🛈 Include natural, step, adopted and foster relationships.

🛈 Otherwise insert:

What is [Name’s] relationship to [Name]?

🛈 Include natural, step, adopted and foster relationships.

1 Spouse or partner

2 Son or daughter

3 Father or mother

4 Brother or sister

5 Grandchild

6 Grandparent

7 Great-grandchild

8 Great-grandparent

9 Nephew or niece

10 Uncle or aunt

11 Other relative

12 Unrelated

.K Don’t know

.R Refused

# Exit

Thank you for participating in this survey. The Ministry of Health is very grateful that you have given your time to provide this important information to them. Before we finish, I would like to ask you a few more questions. Please note that any information you give me from now on will not be stored with your answers to the survey.

## Recontact information for quality control

I would now like to collect some recontact information from you. This is so that my Supervisor can call you in the next few weeks if there are any queries about the completion of this survey, or to check that you are happy with the way the interview was conducted.

A6.01 Is there a landline phone that my Supervisor can call you on?

1. Yes [Specify] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [only accept landline number format]
2. No

A6.02 Do you have a cell phone number we could reach you on?

1. Yes [Specify] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [only accept cell number format]
2. No

A6.03 Do you have an email address, in case we cannot contact you by telephone?

1. Yes [Specify] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [only accept email format]
2. No

## Recontact information for follow-up research

A6.04 I would now like to ask if you would be happy to be contacted within the next five years about the possibility of answering other health questions of importance to the Ministry of Health? Saying yes to this question won’t commit you to taking part in any further research; it just means we can contact you to ask.

1 Yes, you can contact me and ask if I want to help again

2 No, don’t contact me to help again [go to Data linkage introduction before A6.08]

🛈 If A6.01, A6.02 and A6.03 all = 2 go to A6.06, otherwise go to A6.05.

A6.05 To recontact you for other health questions of importance to the Ministry of Health, can we use the same phone number and email address you provided before?

1. Yes [go to name and address A6.07]
2. No

A6.06 What phone number(s) and email address can we use to recontact you?

1. Landline number: [only accept landline number format]
2. Cell phone number: [only accept cell number format]
3. Email address: [only accept email format]
4. Do not record phone number(s) or email / Refused

A6.07 Could I please also record your name and address? Remember that these details will never be stored with your survey answers, to ensure that your survey results will always be anonymous.

1 Yes, record my name and address

 a. First name: [mandatory field]

 b. Middle name:

 c. Surname:

 d. Street number and name: [mandatory field]

 e. Suburb: [mandatory field]

 f. City: [mandatory field]

 g. Postcode:

2 No, do **not** record my name and address / Refused

## Consent for data linkage

The Ministry of Health would like to ask for your permission to combine the valuable information you have provided in this survey, with other information routinely collected by government agencies. Combining the answers you have just given with other information, will help researchers learn more about the things that affect our nation’s health, and will help to develop ways to improve the wellbeing of all New Zealanders.

To combine the information, the Ministry of Health needs your permission to use your name, address, gender and date of birth details. The Ministry is bound by the Privacy Act, and these details will be kept secure and only used by approved staff for data linking. Your name, address and date of birth will be removed before the combined information is made available to approved researchers. The combined information will only be used for research and statistical purposes.

A6.08 Are you willing for your survey results to be linked with other information routinely collected by government agencies?

🛈 If the answer is Yes, the participant **must** also read and agree to the data linkage consent form. They must also be given a hard copy of the consent form, or have it emailed to them, for their future information.

1 Yes

2 No [go to Christchurch residency introduction before A6.11]

A6.09 Data linkage consent

🛈 Following to appear on electronic consent form.

I [Full Name] authorise my name, address, gender, and date of birth, to be used to combine my New Zealand Health Survey responses with other information held by government agencies, for research and statistical purposes.

I understand that:

(Please read each bullet point carefully)

* The combined information will be used only for research and statistical purposes by government-approved researchers
* My name, address, and date of birth will remain confidential and can only be accessed by approved staff at the Ministry of Health or Statistics New Zealand, for the purpose of linking data held by government agencies
* My name, address and date of birth will be removed when the data has been linked (only the month and year of birth will be retained)
* I have the right to change or access my personal details (i.e. name, address and date of birth).
1. Signature / Full name:

A6.10 Can I please record your name, address, date of birth and gender for data linking?

🛈 To update a previously-recorded date, click on the date picker, select the month and year from the drop-down lists, then **click on the correct day**.

1 Yes

 a. First name: [mandatory field]

 b. Middle name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 c. Surname: [mandatory field]

 d. Street number and name: [mandatory field]

 e. Suburb: [mandatory field]

 f. City: [mandatory field]

 g. Postcode:

h. Date of birth: (range [current year minus 120]–[current year minus 15]) [mandatory field]

 i. Gender: [mandatory field]

2 No, don’t record any of these details

🛈 If first name, surname, address, date of birth, or gender not provided, display the following message: In order to help us link your data, would you mind providing your full name, address, date of birth and gender?

🛈 If only one initial provided for either first or last name, display the following message: In order to help us link your data, would you mind providing your full first and last name, rather than initials?

🛈 If two or more names entered into first or last name field, display the following message: Two or more names entered into a single field, please check and use the middle name field if applicable.

🛈 If date of birth recorded at A6.10≠A5.01, display the following message: Data linkage date of birth (dd/mm/yyyy) does not match date of birth recorded earlier in the survey (dd/mm/yyyy). Please check with respondent.

## Christchurch residency

The Ministry of Health would like to use Health Survey data to monitor the long-term health impacts of the 22 February 2011 Christchurch earthquake. To do this they need to know who was living in Christchurch at the time.

A6.11 Were you a resident of Christchurch at the time of the 22 February 2011 earthquake?

🛈 Clarifications if required:

Christchurch residents away on 22 February (e.g. business / holiday) should answer Yes.

Visitors to Christchurch on 22 February should answer No.

1 Yes

2 No

3 Don’t know

4 Refused

## Interviewer observations

Complete following observations without asking the respondent:

A6.16 Record if other people were in the room during any part of the questionnaire.

[Select all that apply]

1. Spouse / partner
2. Parent(s)
3. Other adult(s)
4. Child(ren)
5. Completed alone in room

🛈 START OF SELF-COMPLETE SECTION.

## Respondent burden assessment

The next questions will ask you about your experience of the survey process. I will turn the computer towards you, so you can answer the questions privately. Please click the ‘Next’ button when you are done.

AR1.01 Please rate on a scale of 1–5, where 1 is Absolutely NOT Acceptable and 5 is Highly Acceptable**.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | 1 | 2 | 3 | 4 | 5 |
| Survey length |  |  |  |  |  |
| The number of questions |  |  |  |  |  |
| Complexity of questions |  |  |  |  |  |
| Intrusiveness of questions |  |  |  |  |  |

AR1.02 Would you take part in the New Zealand Health Survey again?

1 Yes [go to AR1.04]

2 No [go to AR1.03]

AR1.03 Please indicate why you would not take part again?

 [Select all that apply]

1 Took too long

2 Too many questions

3 Questions were too personal

4 Questions were not relevant

5 Survey was too repetitive

6 Lost interest

7 Other [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AR1.04 Are there any other comments you would like to make about taking part in the survey?

1 Yes [Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2 No

Thank you, please hand the computer back.

🛈 END OF SELF-COMPLETE SECTION.

🛈 The rest of the questionnaire is collected in the Sample Manager tool.

# Health measurements

## Blood pressure

Now I would like to take your blood pressure.

🛈 For female respondents aged 15–54 years, ask the following question.

AM.1 Firstly, I need to ask if you are pregnant at the moment?

1 Yes, respondent is pregnant [skip to Thank you section]

🛈 Say “We can skip this section then”.

2 No, respondent not pregnant [Continue]

.K Don’t know [go to first blood pressure measurement]

 .R Refused [go to first blood pressure measurement]

I will now take your blood pressure using an automated blood pressure monitor.

Before we take the blood pressure measurement you need to have been sitting quietly for five minutes. You cannot have eaten, drunk or smoked during this time. You will need to sit with your feet flat on the floor and with your back against the back of the chair, and have your left arm straight on the table.

🛈 Select the cuff size and attach to the respondent’s left arm.

During the measurement the cuff will inflate three times, once every minute. You will feel some pressure on your arm while this is happening. You should not move or talk during the test and it is important to stay relaxed.

Do you have any questions before we begin?

Now I will start the machine.

**First reading**

ABP\_1A \_\_/\_\_/\_\_ Systolic blood pressure (mmHG) (range 30–300)

ABP\_1B \_\_/\_\_/\_\_ Diastolic blood pressure (mmHG) (range 30–200)

🛈 Hard edit: Systolic1 must be >Diastolic1

🛈 Soft edit: Systolic1 minus Diastolic2 is <20 or >100

ABP\_1C \_\_/\_\_/\_\_ Heart Rate (in beats per minute) (range 30–200)

**Second reading**

ABP\_2A \_\_/\_\_/\_\_ Systolic blood pressure (mmHG) (range 30–300)

ABP\_2B \_\_/\_\_/\_\_ Diastolic blood pressure (mmHG) (range 30–200)

🛈 Hard edit: Systolic2 must be >Diastolic2

🛈 Soft edit: Systolic2 minus Diastolic2 is <20 or >100

ABP\_2C \_\_/\_\_/\_\_ Heart Rate (in beats per minute) (range 30–200)

**Third reading**

ABP\_3A \_\_/\_\_/\_\_ Systolic blood pressure (mmHG) (range 30–300)

🛈 Soft edit: Systolic1=Systolic2=Systolic3

ABP\_3B \_\_/\_\_/\_\_ Diastolic blood pressure (mmHG) (range 30–200)

🛈 Hard edit: Systolic3 must be >Diastolic3

🛈 Soft edit: Systolic3 minus Diastolic3 is <20 or >100

🛈 Soft edit: Diastolic3=Diastolic2=Diastolic1

ABP\_3C \_\_/\_\_/\_\_ Heart Rate (in beats per minute) (range 30–200)

778 Right arm used

779 Not obtained – cuff too small or toolarge

780 Not obtained – error reading

781 Not obtained – other problem with equipment

782 Not obtained – respondent anxious / nervous

783 Not obtained – medical exclusion e.g. paralysis

.R Respondent refused to have blood pressure recorded

I will write your blood pressure results on a measurement card for you to keep.

🛈 Tablet automatically generates the blood pressure results and script based on lowest systolic and lowest diastolic reading from the last two readings.

|  |  |  |  |
| --- | --- | --- | --- |
| Results | Systolic |  | Diastolic |
| 1: Ideal  | <130 | and | <80 |
| 2: Raised | 130–169 | or | 80–99 |
| 3: Very raised | 170 or more | or | 100 or more |

🛈 **Read the exact script** about the respondent’s blood pressure results from the tablet screen. If they have any questions about their results, advise them to consult their doctor.

**Your Blood Pressure reading is \_\_\_\_/\_\_\_\_ (mmHg)**

1:“Your blood pressure is within the ideal range”.

2:“Your blood pressure is a **bit high** today”.

“Some people will have results that are higher than ideal but this may not mean you have a health problem. Your blood pressure results can vary from day-to-day and are influenced by many things. We recommend you discuss these results with your usual doctor or health professional”.

3: “Your blood pressure is **high** today”.

“Some people will have results that are higher than ideal but this may not mean you have a health problem. Your blood pressure results can vary from day-to-day and are influenced by many things. We recommend you discuss these results with your usual doctor or health professional **in the next few days**”.

I am now going to take three measurements from you – height, weight, and waist – in that order. I’m then going to take those measurements again, and if any of the second measures are not close enough to the first ones, I’ll measure you for a third time. While I’m setting up the equipment, could you please remove your shoes and all heavy outer clothing so we can obtain accurate measurements… Thank you.

## Height

Now, I would like to measure your height.

Please stand with your back to the door / wall. Put your feet together and move them back until your heels touch the door / wall. Stand up straight and look straight ahead.

🛈 If head is not in Frankfort Plane say…

Please raise / lower your chin. Take a deep breath and hold it.

🛈 Take measurement when breath is held and say it aloud.

That’s fine, you can breathe normally now and step away from the door / wall.

**AM.2 1st reading 0.000 (m)** (range 0.600m–2.300m)

.R Respondent refused to have height recorded

777 Respondent unable to have height recorded (e.g. chairbound, too unsteady on feet, in pain etc.)

🛈 Check any measurements that fall below the 1st percentile or above the 99th percentile.

## Weight

Wait until it turns zero. Please step onto the centre of the scale with your weight on both feet. Relax [take reading]. Thank you. You can step off now.

**AM.3 1st reading 000.0 (kg)** (range 10.0kg–210.0kg)

.R Respondent refused to have weight recorded

777 Respondent unable to have weight recorded (e.g. chairbound, too unsteady on feet, in pain etc.)

🛈 Check any measurements that fall below the 1st percentile or above the 99th percentile.

## Waist

Please stand in a relaxed position. Take the end of the tape, pass it around your waist and hand it back to me. Please help me to position the tape at the level of your waist. Good, now just breathe normally [take measurement at end of breath out]. Thank you.

**AM.4 1st reading 000.0 (cm)** (range 10.0cm–200.0cm)

.R Respondent refused to have waist circumference recorded

997 Respondent unable to have waist circumference recorded

🛈 Check any measurements that fall below the 1st percentile or above the 99th percentile.

🛈 Computer to repeat prompts as above and automatically does calculation to indicate if third reading is required. If more than 1% difference between first and second reading, a third reading is required.

# Thank you

On behalf of the Ministry of Health, thank you once again for talking with me about your health. Here is a small gift from the Ministry in recognition of your time.

🛈 Give Thank You card and koha.

Inside the card is a list of phone numbers you can call if you would like more information or advice. If you’d prefer, I can arrange for this to be emailed to you along with the consent form(s) you signed today. If you’d rather not receive these items, that’s completely fine.

1. Yes, please email to me[Specify]\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [only accept email format]
2. No, don’t email

🛈 End survey for households with no persons aged under 15 years.

## Child health component

🛈 For households with child aged 0 to 14 years.

As we discussed at the beginning of this survey, we would also like to interview the legal guardian of [randomly selected child’s name], that is the person who has day-to-day responsibility for the care of [Name]. Is that you?

1 Yes [go to child health questionnaire]

2 No 🛈 ask to speak to legal guardian.

Please record following details:

1 Child health questionnaire completed

2 Child health questionnaire still to be completed