



Ipsos MRBI

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I.D. No.
(1-4)

Healthy Ireland

Wave 3
FINAL

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Interviewer No.
(5-8)

5 - 0
6 - 1

Ass. No. _____

Q'aire No. _____

Ipsos MRBI/16-048825

Interviewer note: Show the respondent the participant information sheet and then ask:

Consent Q. Can you please confirm that you have read and understood the information sheet I have shown you and are happy to proceed?

Yes 1
No..... 2 **CLOSE**

**ASK ALL
SINGLE CODE
SHOWCARD Q.58**

Q.58 How would you define your current situation with regard to work?

Working for payment or profit
Looking for first regular job
Unemployed, having lost or given up previous job
Actively looking for work after voluntary interruption of working life (for 12 months or more) for personal or domestic reasons
Student or pupil
Engaged on home duties
Retired from employment
Unable to work due to permanent sickness or disability.
Other (please specify)

SINGLE CODE

Q.52 Code Gender

Male..... 1
Female 2



GENERAL HEALTH

ASK ALL

Firstly, I would like to ask you a few questions about your general health...

ASK ALL

SINGLE CODE

SHOW CARD Q.1

Q.1 How is your health in general?

- Very Good 1
- Good..... 2
- Fair 3
- Bad 4
- Very Bad 5
- Don't Know (DNRO)..... 6
- Refused (DNRO)..... 7

SINGLE CODE

Q.2 Do you have any long standing illness or health problem i.e. problems which have lasted or will last for at least 6 months or more?

- Yes 1
- No..... 2
- Don't Know (DNRO)..... 3
- Refused (DNRO)..... 4

SINGLE CODE

SHOW CARD Q.3

Q.3 For at least the past six months to what extent have you been limited in everyday activities because of health problems i.e. an on-going physical or mental health problem, illness or disability?

- Severely Limited..... 1
- Limited but not severely 2
- Not limited at all..... 3
- Don't Know (DNRO)..... 4
- Refused (DNRO)..... 5



MULTI CODE

Q.4 Do you currently have any of the following conditions that has been confirmed by a medical diagnosis?

[SHOWCARD Q.4](#)

Chronic lung disease such as chronic bronchitis or emphysema	
Asthma	
Arthritis (including osteoarthritis, or rheumatism)	
Osteoporosis, sometimes called thin or brittle bones	
Cancer or a malignant tumour (including leukaemia or lymphoma but excluding minor skin cancers)	
Parkinson's disease	
Any emotional, nervous or psychiatric problems, such as depression or anxiety	
Alcohol or substance abuse	
Alzheimer's disease	
Dementia, organic brain syndrome, senility	
Serious memory impairment	
Stomach ulcers	
Varicose Ulcers (an ulcer due to varicose veins)	
Cirrhosis, or serious liver damage	
High blood pressure or hypertension	
Angina	
A heart attack (including myocardial infarction or coronary thrombosis)	
Congestive heart failure	
Diabetes or high blood sugar	
A stroke (cerebral vascular disease)	
Ministroke or TIA	
High cholesterol	
A heart murmur	
An abnormal heart rhythm	
Any other heart trouble (specify)	
DK	
RF	
None of these	

SINGLE CODE

ASK ALL

[SHOW CARD Q.201](#)

Q.201 When was the last time you visited a dentist on your own behalf?

- Less than 12 months ago..... 1
- More than 12 months ago 2
- Never Visited..... 3
- Don't Know (DNRO)..... 4
- Refused (DNRO)..... 5

ASK Q.202 IF CODE 1 AT Q.201

Q.202 How often in the last four weeks did you visit a dentist on your own behalf?

RECORD OCCASIONS.

- Have not visited in the past 4 weeks.....CTRL + 1
- Don't Know (DNRO)..... CTRL + 2
- Refused (DNRO)..... CTRL + 3



ASK ALL

SHOW CARD Q.203

Q.203 When was the last time you attended an Emergency Department on your own behalf ?

- Less than 12 months ago..... 1
- More than 12 months ago 2
- Never Attended 3
- Don't Know (DNRO)..... 4
- Refused (DNRO)..... 5

ASK Q.204 IF CODE 1 AT Q.203

Q.204 How often in the last four weeks did you attend an Emergency Department on your own behalf?

RECORD OCCASIONS.

GO TO Q.204A

- Have not attended in the past 4 weeks.....CTRL + 1 **GO TO Q205**
- Don't Know (DNRO)..... CTRL + 2 **GO TO Q205**
- Refused (DNRO)..... CTRL + 3 **GO TO Q205**

ASK IF ANSWERED 1 OR MORE OCCASIONS at Q.204

Q. 204A Were you admitted to hospital on any of these occasions?

- Yes 1 **GO TO Q.206**
- No..... 2 **GO TO Q.205**

ASK IF ANSWERED MORE THAN 1 OCCASION at Q.204 and YES at Q.204A

Q.204B How many of these occasions were you admitted to hospital?

RECORD OCCASIONS

LOGIC CHECK- ANSWER AT 204 SHOULD BE SMALLER THAN OR EQUAL TO ANSWER AT 204.

ASK ALL

Q.205 During the past 12 months, have you been admitted to a hospital as an in-patient?

- Yes 1
- No..... 2

ASK Q.206 IF CODE 1 AT Q.204A or CODE 1 at Q.205

Q.206 In total over the past 12 months, how many nights did you spend in a private hospital?

_____ NIGHTS

ASK Q.207 IF CODE 1 AT Q.204A or CODE 1 at Q.205

Q. 207 In total over the past 12 months, how many nights did you spend in a public hospital?

_____ NIGHTS

ASK ALL

Q.208 During the past 12 months have you been admitted to hospital as as day-patient?

- Yes 1
- No..... 2

ASK Q.209 IF CODE 1 AT Q.208

Q.209 How many admissions were in a private hospital?

_____ ADMISSIONS

ASK Q.210 IF CODE 1 AT Q.208

Q. 210 How many admissions were in a public hospital?

_____ ADMISSIONS

The following questions are about antibiotics, which are a group of medicines used to treat certain illnesses.

ASK ALL

- Q.211** In the past 12 months, have you been prescribed an antibiotic?
- Yes 1
 - No..... 2
 - Don't know 3

ASK ALL

- Q.212** In the past 12 months, have you taken an antibiotic?
- Yes 1
 - No..... 2
 - Don't know 3

Q.213 Please indicate whether you agree or disagree with the following statements:

	AGREE	DISAGREE	DON'T KNOW
a. When I get a cold, I will take antibiotics to help me get better more quickly			
b. Antibiotics can kill bacteria			
c. Antibiotics can kill viruses			
d. Antibiotics work on most coughs and colds			
e. Resistance to antibiotics is a problem in hospitals			
f. If taken too often or when you don't need them, antibiotics might not work in the future			
g. I am happy to trust my GP's advice as to whether I need antibiotics or not			
h. I am happy to trust my pharmacist's advice as to whether I need antibiotics or not			
i. A course of antibiotics should always be completed			
j. Once you start to feel better, you should stop taking the antibiotic			



TOBACCO

Moving on, I would now like to ask you a few questions relating to tobacco consumption.....

ASK ALL
SINGLE CODE
SHOW CARD Q.6

Q.6 Do you smoke tobacco products?

- Yes, daily..... 1 [GO TO Q9a](#)
- Yes, occasionally 2 [GO TO Q9b](#)
- No..... 3 [GO TO Q7](#)
- Don't Know (DNRO)..... 4 [GO TO Q10](#)
- Refused (DNRO)..... 5 [GO TO Q10](#)

ASK Q.7 IF CODE 3 SELECTED AT Q.6
SINGLE CODE
SHOW CARD Q.7

Q.7 Did you ever smoke tobacco products (in the past)?

- Yes, daily..... 1 [GO TO Q8](#)
- Yes, occasionally 2 [GO TO Q8](#)
- No..... 3 [GO TO Q10](#)
- Don't Know (DNRO)..... 3 [GO TO Q10](#)
- Refused (DNRO)..... 3 [GO TO Q10](#)

ASK Q.8 IF CODE 1 OR 2 SELECTED AT Q.7
SINGLE CODE
SHOWCARD Q.8

Q.8 About how long has it been since you last smoked tobacco products?

- Within the past month (anytime < than 1 month ago) 1
- Within the past 3 months (1 month but < than 3 months ago) 2
- Within the past 6 months (3 months but < than 6 months ago) 3
- Within the past year (6 months but < than 1 year ago).. 4
- Within the past 5 years (1 year but < than 5 years ago) 5
- Within the past 10 years (5 years but < than 10 years ago) 6
- 10 or more years ago 7
- Don't Know (DNRO)..... 8
- Refused (DNRO)..... 9

ASK Q.9a IF CODE 1 AT Q.6. LIMIT RANGE TO 0-199.
INTERVIEWER NOTE: IF RESPONDENT HAS DIFFICULTY ASK THEM TO ESTIMATE THE AMOUNT THEY SMOKE FOR THE PRODUCT THEY SMOKE MOST OFTEN.
SHOWCARD Q.9a

Q.9a On average how many of the following tobacco products do you smoke each day?

RECORD NO. OF CIGARETTES ETC. SMOKED DAILY

Manufactured cigarettes	
Hand-rolled cigarettes	
Pipes full of tobacco	
Cigars	
Any others (please specify)	



ASK Q.9b IF CODE 2 AT Q.6. LIMIT RANGE TO 0-499.

INTERVIEWER NOTE: IF RESPONDENT HAS DIFFICULTY, ASK THEM TO ESTIMATE THE AMOUNT THEY SMOKE FOR THE PRODUCT THEY SMOKE MOST OFTEN.

SHOWCARD Q9b

Q.9b On average how many of the following tobacco products do you smoke each week?

Manufactured cigarettes	
Hand-rolled cigarettes	
Pipes full of tobacco	
Cigars	
Any others (please specify)	
Smokes less often than once a week	

ASK ALL SINGLE CODE

SHOWCARD Q.10

Q.10 Which of the following statements BEST applies to you?

- I have never heard of e-cigarettes and have never tried them 1
- I have heard of e-cigarettes but have never tried them 2
- I have tried e-cigarettes but do not use them (anymore) 3
- I have tried e-cigarettes and still use them 4
- Don't know (DNRO) 5
- Refused (DNRO) 6

ASK Q.11 IF CODE 1 OR 2 AT Q.6 OR IF CODE 1, 2, 3 OR 4 AT Q.8 SINGLE CODE

Q.11 During the past 12 months, have you stopped smoking for one day or longer because you were trying to quit smoking?

- Yes 1
- No 2
- Don't Know (DNRO) 3
- Refused (DNRO) 4

ASK Q.12 IF CODE 1 AT Q.11 MULTICODE

SHOWCARD Q.12

Q.12 During your last attempt to give up, did you use any help?

- Nicotine patches, gum, lozenges, spray 1
- Varenicline/Champix or Bupropion/Zyban (prescribed medication) 2
- Acupuncture 3
- Smokers telephone Quitline/Helpline 4
- www.quit.ie 5
- www.facebook.com/HSEquit 6
- E-cigarettes 7
- Other aid, help, support (please specify) 8
- No help used 9
- Don't Know (DNRO) 10
- Refused (DNRO) 11



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ASK Q.13 IF CODE 1 OR 2 AT Q.6

SINGLE CODE

SHOWCARD Q.13

Q.13 Are you currently...?

- Trying to quit 1
- Actively planning to quit 2
- Thinking about quitting but not planning to 3
- Not thinking about quitting 4
- Don't Know (DNRO) 5
- Refused (DNRO) 6

ASK Q. IF CODE 1 OR 2 AT Q.6

SINGLE CODE

SHOW CARD Q.115

READ OUT STATEMENTS.

Q.115 In the last 12 months did any of the following health professionals discuss ways of giving up smoking with you?

	Saw this health professional in the last 12 months and discussed ways of giving up smoking	Saw this health professional in the last 12 months but did not discuss ways of giving up smoking	Did not see this health professional in the last 12 months	Don't Know (DNRO)
GP/family doctor	1	2	3	4
Dentist	1	2	3	4
Pharmacist	1	2	3	4
Hospital doctor	1	2	3	4
Nurse	1	2	3	4
Other health professional	1	2	3	4

ASK ALL

SINGLE CODE

SHOW CARD Q.116

INTERVIEWER NOTE: By indoors we mean at home, at work, at public places, at restaurants etc.

Q.116 How often are you exposed to the tobacco smoke of other people indoors?

- Never or almost never 1
- Less than 1 hour per day 2
- 1 hour or more per day 3
- Don't know 4
- Refused 5



ALCOHOL

I would now like to ask you a few questions relating to alcohol consumption.....

ASK ALL
SINGLE CODE
SHOWCARD Q.14

Q.14 Have you ever drunk any of these types of alcoholic beverages?

- Yes 1 [GO TO Q.15](#)
- Never..... 2 [GO TO Q.20](#)
- Have only had a few sips of alcohol in my lifetime 3 [GO TO Q.20](#)
- Don't Know (DNRO)..... 4 [GO TO Q.20](#)
- Refused (DNRO)..... 5 [GO TO Q.20](#)

ASK IF CODE 1 AT Q.14
SINGLE CODE
SHOWCARD Q.15

Q.15 How often have you consumed alcohol in the last 12 months?

- Daily 1
- 5-6 times a week 2
- 4 times a week 3
- 3 times a week 4
- Twice a week 5
- Once a week 6
- 2-3 times a month 7
- Once a month..... 8
- 6-11 times a year 9
- 2-5 times a year 10
- Once a year..... 11
- I did not drink in the last year but I drank longer ago 12 [GO TO Q.20](#)
- Dramatically changed drinking in the last 12 months (DNRO) 13 [GO TO Q.19](#)
-
- Don't know (DNRO)..... 14
- Refused (DNRO)..... 15

NO QUESTION 16

ASK Q.17 IF CODE 1 AT Q.14 (AND NOT CODE 12 OR 13 AT Q.15)
SHOWCARD Q.17

Q.17 Thinking of a typical day in the last 12 months on which you had an alcoholic drink, how many standard drinks would you drink?

RECORD NUMBER OF STANDARD DRINKS
Don't know
Refused



ASK Q.18 IF CODE 1 AT Q.14 (AND NOT CODE 12 OR 13 AT Q.15)

SINGLE CODE

SHOWCARD Q.18

Q.18 During the last 12 months, how often have you consumed (drunk) the equivalent of 6 standard drinks on one drinking occasion?

- Daily 1
- 5-6 times a week 2
- 4 times a week 3
- 3 times a week 4
- 2 times a week 5
- Once a week 6
- 2-3 times a month 7
- Once a month 8
- 6-11 times a year 9
- 2-5 times a year 10
- Once-a year 11
- Never 12
- Don't know (DNRO) 14
- Refused (DNRO) 15

ASK Q.18 IF CODE 1 AT Q.14 (AND NOT CODE 12 OR 13 AT Q.15)

SINGLE CODE

SHOWCARD Q.142 (with standard drink amounts)

Validate: if someone answers code 1 to 11 at Q18, only accept 6 or higher at Q142

Q.142 What is the highest number of standard drinks that you have drank on a single day in the last year?

RECORD NUMBER OF STANDARD DRINKS

- Don't know
- Refused

ASK IF CODE 1 AT Q.14 (AND NOT CODE 12 OR 13 AT Q.15)

SINGLE CODE

READ OUT STATEMENTS

Q.144 During the last 12 months, have you ...

	Yes	No	Don't know (DNRO)
Had feelings of guilt or remorse after drinking	1	2	3
Had a friend or family member tell you about things you said or did while drinking that you did not remember	1	2	3
Failed to do what was normally expected from you because of drinking, for example missed days and poor performance at work or school/college; or been suspended or expelled from school/college; or neglected children and/or other family members	1	2	3
Needed a first drink in the morning to get yourself going after a heavy drinking session	1	2	3



**ASK ALL
SINGLE CODE**

Q.20 During the last 12 months, have you?

SHOWCARD 20. READ OUT STATEMENTS

	No, Never	Yes, once	Yes, more than once	Don't Know (DNRO)
Had property vandalized by someone who had been drinking	1	2	3	4
Been a passenger in a vehicle with a driver who had too much to drink	1	2	3	4
Been hit or assaulted by someone who had been drinking	1	2	3	4
Had financial trouble because of someone else's drinking	1	2	3	4
Had family problems or relationship difficulties as a result of someone else's drinking	1	2	3	4

()
()
()
()

I would now like to ask you a few questions relating to food consumption...

ASK ALL

SINGLE CODE

Q.229 Firstly looking at the types of foods shown on this showcard. These include chocolate, sweets and ice-cream. How often do you eat foods like these?

SHOWCARD Q.229

Once or more a day	1
4 to 6 times a week	2
1 to 3 times a week	3
Less than once a week.....	4
Never.....	5
Don't Know (DNRO).....	6
Refused (DNRO).....	7

Q.230 Now looking at the types of foods shown on this showcard. These include cakes, muffins and biscuits. How often do you eat foods like these?

SHOWCARD Q.230

Once or more a day	1
4 to 6 times a week	2
1 to 3 times a week	3
Less than once a week.....	4
Never.....	5
Don't Know (DNRO).....	6
Refused (DNRO).....	7

Q.231 Now looking at the types of foods shown on this showcard. These include popcorn, salted nuts and crisps. How often do you eat foods like these?

SHOWCARD Q.231

Once or more a day	1
4 to 6 times a week	2
1 to 3 times a week	3
Less than once a week.....	4
Never.....	5
Don't Know (DNRO).....	6
Refused (DNRO).....	7

Q.232 Now looking at the types of foods shown on this showcard. These include pasteries such as meat pies, sausage rolls, croissants and danish pasteries. How often do you eat foods like these?

SHOWCARD Q.232

Once or more a day	1
4 to 6 times a week	2
1 to 3 times a week	3
Less than once a week.....	4
Never.....	5
Don't Know (DNRO).....	6
Refused (DNRO).....	7



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Q.233 Now looking at the types of foods shown on this showcard. These include takeaways, ready meals and chips. How often do you eat foods like these?

SHOWCARD Q.233

Once or more a day	1
4 to 6 times a week	2
1 to 3 times a week	3
Less than once a week.....	4
Never.....	5
Don't Know (DNRO).....	6
Refused (DNRO).....	7

SINGLE CODE

Q.22 How often do you eat fruit, including fruit juice?

SHOWCARD Q.22

Once or more a day	1
4 to 6 times a week	2
1 to 3 times a week	3
Less than once a week.....	4
Never.....	5
Don't Know (DNRO).....	6
Refused (DNRO).....	7

ASK IF CODE 1 AT Q.22

Q.23 How many portions a day on average do you eat? A portion is an apple, a pear, orange or similar sized fruit.

RECORD NUMBER OF PORTIONS DAILY

Don't Know (DNRO)
Refused (DNRO)

ASK ALL

SINGLE CODE

Q.24 How often do you eat vegetables or salad, including juice?

SHOWCARD Q.24

Once or more a day	1
4 to 6 times a week	2
1 to 3 times a week	3
Less than once a week.....	4
Never.....	5
Don't Know (DNRO).....	6
Refused (DNRO).....	7

ASK IF CODE 1 AT Q.24

Q.25 How many portions a day on average do you eat? A portion is one medium tomato or onion, 3 heaped tablespoons of peas, mixed vegetables

RECORD NUMBER OF PORTIONS DAILY

Don't Know (DNRO)
Refused (DNRO)



ASK ALL

SINGLE CODE

Q.27 How often do you drink sugar-sweetened drinks?

SHOWCARD Q.27

INTERVIEWER READ OUT: This includes sugary fizzy drinks, energy drinks, sports drinks, sugar sweetened cordials and squashes and sugar sweetened fruit juices

- Once or more a day 1
- 4 to 6 times a week 2
- 1 to 3 times a week 3
- Less than once a week..... 4
- Never..... 5
- Don't Know (DNRO)..... 6
- Refused (DNRO)..... 7



BREASTFEEDING

ASK ALL

Q.215 I would now like to ask you a few questions relating to breastfeeding. For each of the following statements, can you tell me whether you agree or disagree.

		Agree	Disagree	Don't Know
1	Infant formula is as good as breast milk			
2	Feeding a baby formula instead of breast milk increases the chances the baby will get sick			
3	Breast milk meets a baby's nutritional needs for the first 6 months			
4	Babies can continue to be breastfed after the introduction of solid food			
5	If a child is not breastfed she/he will be more likely to become overweight			
6	Women should be encouraged to breastfeed			
7	A mother needs lots of support to breastfeed her baby			
8	I am comfortable when mothers breastfeed their babies near me in a public place, such as a shopping centre, train station, etc.			
9	Women have the right to breastfeed in public places			

ASK ALL

Q.216 Do you have any children?

- Yes 1
- No..... 2

ASK IF ANSWERED CODE 1 at Q. 216

Q. 217 Were any of your children breastfed?

- Yes 1
- No..... 2

ASK ALL IF ANSWERED CODE 1 or 5 at Q.58

I am now going to ask you a few questions relating to travel to work/college/wherever it is you usually spend the day

SINGLE CODE

SHOWCARD Q.218

Q.218 How do you usually travel from home to your regular place of work or college? Please pick one only.

- On foot.....1
- Bicycle.....2
- Bus, minibus or coach.....3
- Luas.....4
- Train or DART.....5
- Motorcycle or scooter.....6
- Driving a car.....7
- Passenger in a car with driver going to same destination 8
- Passenger in a car with driver going to different destination 9
- Taxi.....10
- Lorry or van.....11
- Other (specify: _____).....12
- Work mainly at or from home.....13 **GO TO NEXT SECTION**
- No regular place of work.....14 **GO TO NEXT SECTION**
- Job is spent travelling (taxi driver etc.).....15 **GO TO NEXT SECTION**

Q. 219 If you ever use a different mode of travel from home to your regular place of work or college, which of these modes of travel do you use? Please choose all modes that apply.

- On foot.....1
- Bicycle.....2
- Bus, minibus or coach.....3
- Luas.....4
- Train or DART.....5
- Motorcycle or scooter.....6
- Driving a car.....7
- Passenger in a car with driver going to same destination 8
- Passenger in a car with driver going to different destination 9
- Taxi.....10
- Lorry or van.....11
- Other (specify: _____).....12
- Do not occasionally use a different mode of transport...14

Q.220 How far do you travel to work/college (approximately)?

SHOWCARD Q.220

- Less than 1km/0.6 miles.....1
- Between 1 and 3km/0.6 and 2 miles.....2
- Between 3 and 5km/2 and 3 miles.....3
- Between 5 and 10km/3 and 6 miles.....4
- More than 10km/More than 6 miles.....5

Q.221 How long does your usual journey to work/college etc take?

_____ minutes



Q.222 Over the past two years, have you changed the mode of transport you use to travel between home and work?

- Yes 1
- No..... 2
- Don't know 3

ASK IF ANSWERED CODE 1 at Q.222

SINGLE CODE

Q.223 And what was the main reason for this change? (choose one only):

- Financial reasons 1
- Health or fitness reasons 2
- Workplace travel initiatives in your workplace
e.g. Cycle to Work promotion, Tax Saver sales. 3
- The infrastructure available to you changed
(buses introduced/ removed, cycle lanes installed etc) 4
- You changed job or the nature of your work changed ... 5
- You moved house 6
- Time restraints (due to child minding, caring etc.) 7
- Other (please specify) 8

WEIGHT MANAGEMENT

Moving on, I would like to ask some questions relating to weight management.....

ASK ALL

SINGLE CODE

SHOWCARD Q.38

Q.38 Which of the following statements best describes you?

I am trying to lose weight	1
I am trying to maintain weight	2
I am trying to gain weight	3
None of the above	4

ASK IF CODE 1, 2 AT Q.38

MULTICODE

SHOWCARD Q.39

Q.39 Are you trying to lose weight (IF CODE 1 AT Q.38) or maintain your weight (IF CODE 2 AT Q.38) by doing any of the following?

Eating fewer calories	1
Eating less fat	2
Eating/drinking fewer sugar sweetened foods/drinks	3
Taking more exercise	4
Other (please specify)	5

RECORD WEIGHT MEASUREMENTS



DEMOGRAPHICS

Moving on, I would now like to ask you some general questions about you.....

ASK ALL

Q.51 Age in years

RECORD AGE IN YEARS

SINGLE CODE

SHOWCARD Q.53

Q.53 What is your current marital status?

- Single, never married and never in a civil partnership ... 1
- Married (first marriage)..... 2
- Re-married 3
- In a registered same-sex civil partnership 4
- Separated..... 5
- Divorced 6
- Widowed 7

SINGLE CODE

Q.54a Do you have a full medical card?

- Yes 1
- No..... 2

ASK IF CODE 2 AT Q.54a

Q.54b Do you have a GP visit card?

- Yes 1
- No..... 2

DUMMY VARIABLE

If code 2 at 54a and 54b, force into “No medical card”

SINGLE CODE

Q.55 Do you have private health insurance?

- Yes 1
- No..... 2



SINGLE CODE

Q.57 What is the highest level of education/training (full-time or part-time) which you have completed to date?

SHOWCARD Q.57

No formal education or training
Primary education (FETAC Level 1 or 2 Cert. or equivalent). NFQ levels 1 or 2
Lower secondary education (Junior/Inter/Group Cert, Fetac Level 3 Cert, FÁS Introductory Skills, NCVA Foundation Cert. or equivalent. NFQ level 3
Upper secondary education (Leaving Cert. (including Applied and Vocational programmes) or equivalent. NFQ levels 4 or 5
Technical or Vocational, FETAC Level 4/5 Cert., NCVA Level 1/2, FÁS National Craft Cert., Teagasc Farming Cert., CERT Professional Cookery Cert. or equivalent. NFQ levels 4 or 5
Advanced Certificate / Completed Apprenticeship, FETAC Advance Cert., NCVA Level 3, FÁS National Craft Cert., Teagasc Farming Cert., CERT Professional Cookery Cert. or equivalent. NFQ level 5
Higher Certificate, NCEA/HETAC National Cert. or equivalent. NFQ level 6
Ordinary Bachelor Degree or National Diploma. NFQ Level 7
Honours Bachelor Degree/Professional qualification or both. NFQ Level 8
Postgraduate diploma, Masters Degree or equivalent. NFQ Level 9
Doctorate (Ph.D) or higher. NFQ level 10

SINGLE CODE

Q.59a Do you provide regular unpaid personal help for a friend or family member with a long-term illness, health problem or disability? Include problems which are due to old age. Personal help includes help with basic tasks such as feeding or dressing.

- Yes 1
- No..... 2

ASK IF CODE 1 AT Q.59a

Q.59b How many hours per week?

RECORD HOURS

Around the clock care for someone you live with 1

I would now like to ask you a few questions about your working situation. Earlier you said that you are <ANSWER AT Q.58>.

ASK IF CODE 3 AT Q.58

Q.60a How long is it since you had a job?

RECORD MONTHS

ASK IF CODE 2 AT Q.58

Q.60B How long have you been looking for your first regular job?

RECORD MONTHS



ASK IF CODE 1, 3, 4 OR 7 AT Q.58

SINGLE CODE

SHOWCARD Q.61

Q.61 Do (if code 1 at q.58)/did (if code 3,4,7 at q.58) you work as an employee or are/were you self-employed in your main job?

- Employee 1
- Self-employed, with paid employees 2
- Self-employed, without paid employees 3
- Assisting relative (not receiving a fixed wage or salary) 4

ASK IF CODE 1, 3, 4 OR 7 AT Q.58

Interviewer Note: You need a full description. Probe for ‘manufacturing’, ‘processing’, ‘distributing’, etc and main goods produced, materials used, wholesale or retail etc.

Q.62a ‘What does (if code 1 at q.58)/ did (if code 3,4,7 at q.58) the firm/organisation you work/ (if code 1 at q.58)/ worked (if code 3,4,7 at q.58) for mainly make or do (at the place where you work if code 1 at q.58)/ worked (if code 3,4,7 at q.58)?’

RECORD VERBATIM

Q.62b ‘What is (if code 1 at q.58)/was (if code 3,4,7 at q.58) your (main) job?’

RECORD VERBATIM

Interviewer Note: Check for any special qualifications, training, etc needed to do the job

Q.62c ‘What do (if code 1 at q.58)/did (if code 3,4,7 at q.58) you mainly do in your job?’

RECORD VERBATIM

INTERVIEWER NOTE: IF RESPONDENT IS A FARMER, PLEASE ASK THE FOLLOWING QUESTION. IF NOT, CODE AS ‘NOT A FARMER’. There are 2.5 acres in a hectare.

Q.62d What is the size of the area farmed to the nearest hectare?

Don't Know CTRL + 1

ASK IF CODE 1, 3, 4 OR 7 AT Q.58

SINGLE CODE

INTERVIEWER NOTE: DO NOT INCLUDE SUPERVISORS OF CHILDREN, E.G. TEACHERS, NANNIES, CHILDMINDERS, SUPERVISORS OF ANIMALS, OR PEOPLE WHO SUPERVISE SECURITY OR BUILDINGS ONLY, E.G. CARETAKERS, SECURITY GUARDS/

Q.63a In your job, do (if code 1 at q.58) did (if code 3,4,7 at q.58) you have any formal responsibility for supervising the work of other employees?

- Yes 1
- No..... 2

Q.63b Are you the Chief Income Earner in your household?

- Yes 1 **GO TO Q.64**
- No..... 2 **Repeat questions 58, 61, 62a, 62b, 62c, 62d, 63a with “CHIEF INCOME EARNER” instead of “YOUR/YOU”**

**ASK ALL
SINGLE CODE**

Q.64 To which one of the following groups do you consider you belong?

SHOWCARD Q.64

White	Irish	1
	Irish Traveller	2
	Any other White background (specify) _____	3
Black or Black Irish	African	4
	Any other black background (specify) _____	5
Asian or Asian Irish	Chinese	6
	Any other Asian background (specify) _____	7
Other including mixed background	Specify _____	8



SINGLE CODE

Q.65a Were you born in the Republic of Ireland?

Yes	1
No.....	2

ASK IF CODE 2 AT Q.65a

SINGLE CODE

Q.65b In what country were you born?

Select from list..... 1

(If UK, select England, Scotland, Wales, NI, IOM, Jersey, Guernsey, Other (specify))

- Poland
- UK
- Lithuania
- Latvia
- Nigeria
- Romania
- India
- Philippines
- Germany
- USA
- China
- Slovakia
- France
- Brazil
- Hungary
- Italy
- Pakistan
- Spain
- Czech Republic
- South Africa
- Other (please specify)

Interviewer No. _____ Sheet No. _____

Ass. No. _____ Add No. _____

Many thanks for taking part in this interview. This short questionnaire will take just a minute to complete and includes some questions in relation to sexual health. Upon completion, please return this questionnaire to the interviewer in the envelope provided. Your participation is greatly appreciated.

Q.67 Was the person you last had sexual intercourse with female or male?

- 1 Female
- 2 Male.....
- 3 I'd rather not say/refuse to answer.....
- 4 Have never had sexual intercourse

Please place questionnaire into envelope provided and return to interviewer

Q.224 Have you had sexual intercourse with more than one person in the past 12 months?

- 01 Yes
- 02 No.....

Q.225 When was your most recent HIV test?

- 01 In the last 12 months.....
- 02 In the last 1-5 years.....
- 03 More than 5 years ago
- 04 Never had a HIV test.....

IF YOU HAVE EVER HAD A HIV TEST:

Q.226 Do you know the result of the test?

- 01 Yes
- 02 No.....

Q.227 When was your most recent STI/STD (Sexually Transmitted Infections/Diseases) test (other than HIV)?

- 01 In the last 12 months.....
- 02 In the last 1-5 years.....
- 03 More than 5 years ago
- 04 Never had a STI/STD test.....

IF YOU HAVE EVER HAD AN STI/STD TEST:

Q.228 Do you know the result of the test?

- 01 Yes
- 02 No.....

Thank you for completing this section. Please place this questionnaire into the envelope provided and return to the interviewer.