

P16448

Serial Number

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1-8

CKL

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9

Person no

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10-11

SPARE 12-13

Interviewer number

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22-25

First name

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Card

Batch

3	1	2
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14-16

17-21

Survey month

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SPARE 26-389

Scottish Health Survey 2022 Booklet for Adults – Version A

How to fill in this questionnaire

A Most of the questions on the following pages can be answered by simply ticking the box below or alongside the answer that applies to you. You do not have to answer every question.

Example:

Tick ONE box

	Very healthy life	Fairly healthy life	Not very healthy life	An unhealthy life
Do you feel that you lead a	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B On most pages you should answer ALL the questions but sometimes you will find an instruction next to the box you have ticked telling you to go to another question. By following the instructions carefully you will miss out questions which do not apply to you.

Example:

Tick ONE box

Yes	<input checked="" type="checkbox"/>	→	Go to Q4
No	<input type="checkbox"/>	→	Go to Q5

Please check that you have completed all the questions relevant to you and that none of the pages have stuck together

GENERAL HEALTH OVER THE LAST FEW WEEKS

Please read this carefully:

We would like to know how your health has been in general over **the past few weeks**. Please answer **ALL** the questions by ticking the box below the answer which you think most applies to you.

HAVE YOU RECENTLY:

Tick **ONE** box

	Better than usual	Same as usual	Less than usual	Much less than usual	
Q1 Been able to concentrate on whatever you're doing?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	390

Tick **ONE** box

	Not at all	No more than usual	Rather more than usual	Much more than usual	
Q2 Lost much sleep over worry?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	391

Tick **ONE** box

	More so than usual	Same as usual	Less useful than usual	Much less useful	
Q3 Felt you were playing a useful part in things?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	392

Tick **ONE** box

	More so than usual	Same as usual	Less so than usual	Much less capable	
Q4 Felt capable of making decisions about things?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	393

Tick **ONE** box

	Not at all	No more than usual	Rather more than usual	Much more than usual	
Q5 Felt constantly under strain?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	394

Tick **ONE** box

	Not at all	No more than usual	Rather more than usual	Much more than usual	
Q6 Felt you couldn't overcome your difficulties?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	395

HAVE YOU RECENTLY:

Tick ONE box

	More so than usual	Same as usual	Less so than usual	Much less than usual	
Q7 Been able to enjoy your normal day-to-day activities?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	396

Tick ONE box

	More so than usual	Same as usual	Less able than usual	Much less able	
Q8 Been able to face up to your problems?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	397

Tick ONE box

	Not at all	No more than usual	Rather more than usual	Much more than usual	
Q9 Been feeling unhappy and depressed?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	398

Tick ONE box

	Not at all	No more than usual	Rather more than usual	Much more than usual	
Q10 Been losing confidence in yourself?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	399

Tick ONE box

	Not at all	No more than usual	Rather more than usual	Much more than usual	
Q11 Been thinking of yourself as a worthless person?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	400

Tick ONE box

	More so than usual	About same as usual	Less so than usual	Much less than usual	
Q12 Been feeling reasonably happy, all things considered?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	401

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Please read this carefully:

Below are some statements about feelings and thoughts.

Please tick the box that best describes your experience of each over the last **2 weeks**

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q13 I've been feeling optimistic about the future	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	402

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q14 I've been feeling useful	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	403

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q15 I've been feeling relaxed	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	404

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q16 I've been feeling interested in other people	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	405

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q17 I've had energy to spare	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	406

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q18 I've been dealing with problems well	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	407

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q19 I've been thinking clearly	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	408

Please read this carefully:

Below are some statements about feelings and thoughts.

Please tick the box that best describes your experience of each over the last **2 weeks**

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q20 I've been feeling good about myself	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	409

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q21 I've been feeling close to other people	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	410

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q22 I've been feeling confident	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	411

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q23 I've been able to make up my own mind about things	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	412

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q24 I've been feeling loved	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	413

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q25 I've been interested in new things	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	414

Tick ONE box

	None of the time	Rarely	Some of the time	Often	All of the time	
Q26 I've been feeling cheerful	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	415

EVERYONE PLEASE ANSWER

Q27 How much of the time during the past week have you felt lonely? **Tick ONE box**

- None or almost none of the time 1
- Some of the time 2
- Most of the time 3
- All or almost all of the time 4

469

SPARE 470-472

Q28 Which of the following options best describes your sexual orientation? Tick one box only.

Tick ONE box

- Straight/Heterosexual 1
- Gay or Lesbian 2
- Bisexual 3
- Other sexual orientation, please write in 4

473

If you would like to, please write in the other words you would use in the space below:

.....

474

Q29 What is your sex?
Tick ONE box only

Tick ONE box only

- Female 1
- Male 2
- Prefer not to say 3

475

Q30 Do you consider yourself to be trans, or have a trans history?
Tick ONE box only

Tick ONE box only

- No 1 **Go to Q32 on page 6 →**
- Yes 2 **Go to Q31 on page 6 →**
- Prefer not to say 3 **Go to Q32 on page 6 →**

476

Q31 If you would like to, please describe your trans status (for example non-binary, trans man, trans woman):

.....

477

Q32 Have you previously served in the UK Armed Forces?
Current serving members should only tick 'No'.

Tick ALL that apply

No

 1

Yes, previously served in regular armed forces

 2

Yes, previously served in reserve armed forces

 3

478-479

THANK YOU FOR TAKING PART

PLEASE REMEMBER TO RETURN THE BOOKLET USING THE ENVELOPE PROVIDED

A USEFUL CONTACTS LEAFLET HAS BEEN INCLUDED IN THE ENVELOPE IF YOU WOULD LIKE TO TALK TO SOMEONE ABOUT ANY OF THE TOPICS COVERED IN THE QUESTIONNAIRE

