

# Mental Health of Children and Young People in England, 2017

## Appendix B: Questionnaire

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This document presents the questionnaire used for the 2017 Mental Health of Children and Young People survey. It comprises of a:

- **Parent Questionnaire:** This was asked of the nominated parent in all households with the sampled child aged 2 to 16 years old. For households where the sampled child / young person was aged 17 to 19 years old, this questionnaire was asked of the parent (if present). If a parent was not present for 17 to 19 year olds, then a reduced version of the parent questionnaire was asked of the young person.
- **Child and Young Person questionnaire:** This was asked of children aged 11 to 16 years old, and young people aged 17 to 19 years old.

The questionnaire also made use of the Development and Well-Being Assessment (DAWBA) to enable identification of mental disorders in children and young people. The questions asked as part of the DAWBA are not presented in this document, and instead can be found at [www.DAWBA.info](http://www.DAWBA.info).

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## Parent Questionnaire

The entire parent interview requires that transSDQ<sup>1</sup>=2 and Adltint<sup>2</sup>=1

### Sign In

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#### ASK ALL

##### ConsentChk

Ask respondent whether they have read the information leaflet (information for participants). If the respondent is unable to read the leaflet, please ensure that you have covered the information in it.

1. Respondent has read leaflet
2. Respondent has not read leaflet but interviewer has explained the information

##### StartDat

Enter date interview with this household was started.

##### DateChk

Is this:

1. the first time you've opened this questionnaire
2. or the second or later time?
5. Emergency code if computer's date is wrong at later check

##### WhoHere

Who normally lives at this address?

Please enter the parent you will be interviewing first on the next screen if a parent is present

1. Press <1> to continue

---

<sup>1</sup> Interviewer: Code 'YES' if the parent will only be completing a translated version of the strengths and difficulties questionnaire. If you will be proceeding with a full interview code 'NO'. Response options for this question were (1) Yes, translation only (2) No, full interview

<sup>2</sup> This is where you start recording answers for individuals. do you want to record answers for <parent name> now or later? if parent is completing translated sdq only, code as later. Response options for this question were (1) Yes, now/already interviewed (2) Later

## Demographics and Household composition

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In loop FOR QBNames<sup>3</sup> := 1 TO 16

### Sex

Code first that applies

1. Male
2. Female

### DteofBth

What is your date of birth?

### HallRes

Is this person living in halls of residence or at a boarding school? Student nurses living in NHS accommodation elsewhere in Great Britain should not be included in this household.

1. Yes
2. No

### xMarSta

Are you...

1. single, that is never married?
2. married and living with your husband/wife?
3. a civil partner in a legally recognised Civil Partnership?
4. married and separated from your husband/wife?
5. divorced?
6. or Widowed?
7. Spontaneous only – In a legally-recognised Civil Partnership?
8. Spontaneous only – Formerly a civil partner, the Civil Partnership now dissolved?
9. Spontaneous only – A surviving civil partner: his/her partner having since died?

**ASK IF: xMarSta = 2, 3**

### MarChk

Is your or <Name>'s spouse a member of the household

**ASK IF xMarSta = 1, 4, 5, 6, 7, 8, 9**

### LivWth12

May I just check, are you living with someone in this household as a couple?

1. Yes
2. No

---

<sup>3</sup> Household member names (up to a maximum of 16)

### **HRPId**

Record if <name> is the person in whose name this accommodation is owned or rented

1. Yes
2. No

## **Accommodation, Ethnicity and Tenure**

---

**ASK ALL PARENTS AND loop FOR Household := 1 TO DMHSIZE<sup>4</sup>**

### **EthE**

What is your ethnic group?

Choose one option that best describes your ethnic group or background.

1. English/ Welsh/ Scottish/ Northern Irish/ British
2. Irish
3. Gypsy or Irish Traveller
4. Any other White background
5. White and Black Caribbean
6. White and Black African
7. White and Asian
8. Any other Mixed/ multiple ethnic background
9. Indian
10. Pakistani
11. Bangladeshi
12. Chinese
13. Any other Asian background
14. African
15. Caribbean
16. Any other Black/ African/ Caribbean background
17. Arab
18. Any other ethnic group

**IF EthE = 4, 8, 13, 16, 18**

### **Ethoth**

Please can you describe your ethnic group?

### **Accom**

Please code the household's accommodation

Is the accommodation...

INTERVIEWER INSTRUCTION: Must be space used by household

1. a house or bungalow
2. a flat or maisonette
3. a room/rooms
4. Other

---

<sup>4</sup> Number of household members

**ASK IF Accom = 1**

**HseType**

Is it (the house or bungalow):

1. Detached
2. Semi-detached
3. Terraced/end of terrace

**ASK IF: Accom = 2**

**FltTyp**

Is it (the flat/maisonette):

1. A purpose-built block
2. A converted house/some other kind of building?

**ASK IF: Accom = 4**

**AccOth**

Is it (the accommodation):

1. A caravan, mobile home or houseboat
2. Some other kind of accommodation?

**Ten1**

In which of these ways is the accommodation occupied?

1. Own it outright
2. Buying it with the help of a mortgage or loan
3. Pay part rent and part mortgage (shared ownership)
4. Rent it
5. Live here rent-free (including rent-free in relative's/friend's property; excluding squatting)
6. Squatting

**IF Ten1 = 4, 5**

**Tied**

Does the accommodation go with the job of anyone in the household?

1. Yes
2. No

**LLord**

Who is your landlord...

1. The local authority/council/Scottish Homes
2. A housing association, charitable trust or Local Housing Company
3. Employer (organisation) of a household member
4. Another organisation
5. Relative/friend (before you lived here) of a household member
6. Employer (individual) of a household member
7. Another individual private landlord



## **Furn**

Is the accommodation provided...

1. Furnished
2. Partly furnished (e.g. carpets and curtains only)
3. Unfurnished

## **Strengths and Difficulties Questionnaire**

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### **SDQIntr1**

I'd like to ask you some questions to give me an overall picture of his/her strengths and difficulties.

Please answer every item even if you are not 100% sure that your answer is right.

### **SDQ1**

How well does each statement describe how your child has been over the last 6 months?

Considerate of other people's feelings

5. Not true
6. Somewhat true
7. Certainly true

### **SDQ2**

How well does each statement describe how your child has been over the last 6 months?

Restless, overactive, cannot stay still for long

5. Not true
6. Somewhat true
7. Certainly true

### **SDQ3**

How well does each statement describe how your child has been over the last 6 months?

Often complains of headaches, stomach aches or sickness

5. Not true
6. Somewhat true
7. Certainly true

### **SDQ4**

How well does each statement describe how your child has been over the last 6 months?

Shares readily with other children, for example toys, treats, pencils

5. Not true
6. Somewhat true
7. Certainly true

**SDQ5**

How well does each statement describe how your child has been over the last 6 months?

Often loses his/her temper

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ6**

How well does each statement describe how your child has been over the last 6 months?

Rather solitary, prefers to play alone

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ7**

How well does each statement describe how your child has been over the last 6 months?

Generally well behaved, usually does what adults request

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ8**

How well does each statement describe how your child has been over the last 6 months?

Many worries or often seems worried

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ9**

How well does each statement describe how your child has been over the last 6 months?

Helpful if someone is hurt, upset or feeling ill

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ10**

How well does each statement describe how your child has been over the last 6 months?

Constantly fidgeting or squirming

- 5. Not true

- 6. Somewhat true
- 7. Certainly true

**SDQ11**

How well does each statement describe how your child has been over the last 6 months?

Has at least one good friend

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ12**

How well does each statement describe how your child has been over the last 6 months?

Often fights with other children or bullies them

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ13**

How well does each statement describe how your child has been over the last 6 months?

Often unhappy, depressed or tearful

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ14**

How well does each statement describe how your child has been over the last 6 months?

Generally liked by other children

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ15**

How well does each statement describe how your child has been over the last 6 months?

Easily distracted, his/her concentration wanders

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ16**

How well does each statement describe how your child has been over the last 6 months?

Nervous in new situations, easily loses confidence

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ17**

How well does each statement describe how your child has been over the last 6 months?

Kind to younger children

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ18**

How well does each statement describe how your child has been over the last 6 months?

Often lies or cheats

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ18early**

How well does each statement describe how your child has been over the last 6 months?

Often argues with adults

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ19**

How well does each statement describe how your child has been over the last 6 months?

Picked on or bullied by other children

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ20**

How well does each statement describe how your child has been over the last 6 months?

Often offers to help others (parents, teachers, children)

- 5. Not true

- 6. Somewhat true
- 7. Certainly true

**SDQ21**

How well does each statement describe how your child has been over the last 6 months?

Think things out before acting

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ22**

How well does each statement describe how your child has been over the last 6 months?

Steals from home, school or elsewhere

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ22early**

How well does each statement describe how your child has been over the last 6 months?

Can be spiteful to others

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ23**

How well does each statement describe how your child has been over the last 6 months?

Gets on better with adults than with other children

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ24**

How well does each statement describe how your child has been over the last 6 months?

Many fears, easily scared

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ25**

How well does each statement describe how your child has been over the last 6 months?

Good attention span, sees chores or homework through to the end

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ26**

Overall, do you think that your child has difficulties in one or more of the following areas:

Emotions, concentration, behaviour or getting on with other people?

- 5. No
- 6. Yes – minor difficulties
- 7. Yes – definite difficulties
- 8. Yes – severe difficulties

**ASK IF: SDQ26  $\geq$  6**

**SDQ27**

How long have these difficulties been present?

- 5. Less than a month
- 6. One to five months
- 7. Six to eleven months
- 8. A year or more

**ASK IF SDQ26  $\geq$  6**

**SDQ28**

Do the difficulties upset or distress him/her.

- 5. Not at all
- 6. Only a little
- 7. Quite a lot
- 8. Or a great deal?

**ASK IF: SDQ26  $\geq$  6**

**SDQ29**

Do the difficulties interfere with his/her everyday life in the following areas...

Home life?

- 5. not at all
- 6. only a little
- 7. a medium amount
- 8. a great deal

**ASK IF: SDQ26 >= 6**

**SDQ30**

Do the difficulties interfere with his/her everyday life in the following areas...

Friendships?

5. not at all
6. only a little
7. a medium amount
8. a great deal

**ASK IF: SDQ26 >= 6**

**SDQ31**

Do the difficulties interfere with his/her everyday life in the following areas...

Classroom learning?

5. not at all
6. only a little
7. a medium amount
8. a great deal

**ASK IF: SDQ26 >= 6**

**SDQ32**

Do the difficulties interfere with his/her everyday life in the following areas...

Leisure activities?

5. not at all
6. only a little
7. a medium amount
8. a great deal

**ASK IF SDQ26 >= 6**

**SDQ33**

Do the difficulties put a burden on you or the family as a whole?

5. not at all
6. only a little
7. a medium amount
8. a great deal

## Development and Well-Being Assessment (DAWBA)

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The following sections of the Development and Well-Being Assessment were asked of parents. The disorder name is indicated in blue while the name of the DAWBA module is indicated underneath in bold.

### **Eating, sleeping & toilet training disorders**

These questions were asked of parents of children aged 2 to 4 years old. For information on these questions, visit <http://dawba.info/>

### **Separation anxiety disorder**

#### **Attachment and worries about separation**

Most young people are particularly attached to a few key adults, looking to them for security and comfort, and turning to them when upset or hurt.

These questions were asked of parents of children aged 2 to 17 years old. For information on these questions, visit <http://dawba.info/>

### **Specific phobia**

#### **Fears of specific things or situations**

This section of the interview is about some things or situations that young people are often scared of, even though they aren't really a danger to them.

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

### **Social phobia**

#### **Fear of social situations**

This section is interested in things the child is particularly afraid of social situations. This is as compared with other young people of their age, and is not counting the occasional 'off day' or ordinary shyness.

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

### **Panic disorder, agoraphobia**

#### **Panic attacks or fears of crowds, public places, open spaces etc**

Many young people have times when they get very anxious or worked up about silly little things, but some young people get severe panics that come out of the blue - they just don't seem to have any trigger at all.

These questions were asked of parents of children aged 5 to 19 years old. For information on these questions, visit <http://dawba.info/>



## **Post-traumatic stress disorder**

### **Stress after a very frightening event**

The section is about events or situations that are exceptionally stressful, and that would really upset almost anyone. For example; being caught in a burning house, being abused, seeing you being mugged at gunpoint or hearing that a best friend had died in a car crash.

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Obsessive compulsive disorder**

### **Obsessions and compulsions**

Many children and young people have some rituals or superstitions, e.g. not stepping on the cracks in the pavement, having to go through a special goodnight ritual, having to wear lucky clothes for exams, or needing a lucky mascot for school sports matches. It is also common for young people to go through phases when they seem obsessed by one particular subject or activity, e.g. cars, a pop group, a football team. But what we want to know is whether the child has any rituals or obsessions that go beyond this.

These questions were asked of parents of children aged 5 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Body dysmorphic disorder**

### **Worry about physical appearance**

Most people are concerned about how they look. This typically varies from time to time, e.g. being worse if they develop a bad spot or are about to star in the school play. Some people have worries about their appearance that go beyond this, filling their thoughts, taking up a lot of their time and really upsetting them.

These questions were asked of parents of children aged 5 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Generalised anxiety disorder**

### **Worrying a lot about many different things**

This section is about a general tendency to worry. Some specific types of worry are covered in another section, e.g. worries about being separated from key 'attachment figures' such as parents.

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Depressive disorder

### Depression

This section is about mood. Questions were also asked about suicide and self-harm:

- In the last 4 weeks, has your child talked about harming themselves or killing themselves?
- In the last 4 weeks, has your child tried to harm themselves or kill themselves?
- Over the whole of their lifetime, has your child ever tried to harm themselves or kill themselves?

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Attachment Disorder

### Attachment and worries about separation

These questions were asked of parents of children aged 2 to 4 years old. For information on these questions, visit <http://dawba.info/>

## Disruptive mood dysregulation disorder

### Irritability, temper & anger control

These questions were asked of parents of children aged 5 to 17 years old. For information on these questions, visit <http://dawba.info/>

## Hyperactivity disorder

### Hyperactivity and attention problems

This section of the interview is about the child's level of activity and concentration over the last 6 months. Nearly all young people are overactive or lose concentration at times, but what we would like to know is how the child compares with other young people of their own age. We are interested in how they are usually – not on the occasional 'off day'.

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Behavioural Disorder

### Difficult and troublesome behaviour

This next section of the interview is about behaviour. Nearly all young people are difficult or troublesome at times – not doing what they are told, being irritable or annoying, having temper outbursts, and so on. What we want to know is how the child compares with other young people of the same age. We are interested in how they are usually and not just on occasional 'off days'.

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Pervasive developmental disorders**

### **Development of language, routines, play, and social ability**

This section is about the child's language, routines, play, and social ability. Some of the questions in this section are about how the child is now, and we are sure you will be able to answer them. Other questions are about how they developed in the first few years of their life.

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Eating disorders**

### **Dieting, bingeing and concern about body shape**

These questions were asked of parents of children aged 5 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Tic disorder**

### **Tics**

These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Other less common disorders**

### **Other concerns**

This next section is about a variety of different aspects of the child's behaviour and development. These questions were asked of parents of children aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## School Exclusion and Social Services

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### ASK IF ChldAg = 5 to 16

The next few questions are about school attendance and exclusion, and service use.

#### ParentQ1

How many different primary and secondary schools has your child ever attended, please include your child's current school?

INTERVIEWER INSTRUCTION: Parents should include the child's current school but should NOT include nurseries or pre-schools.

#### ParentQ2

Is your child in full time education?

1. Yes
2. No

### ASK IF ParentQ2 = 1

#### ParentQ3

Over the last year has s/he had one or more teachers that s/he found very difficult to work with?

1. Yes
2. No

### ASK IF ParentQ3 = 1

#### ParentQ4a

Did your child's difficult relationship with this/these teacher(s) interfere with their learning?

5. No
6. Only a little
7. Quite a lot
8. A great deal

### ASK IF ParentQ3 = 1

#### ParentQ4b

Did your child's difficult relationship with this/these teacher(s) interfere with their attendance at school?

5. No
6. Only a little
7. Quite a lot
8. A great deal

**ASK IF: ParentQ3 = 1**

**ParentQ4c**

Did your child's difficult relationship with this/these teacher(s) upset or distress your child?

5. No
6. Only a little
7. Quite a lot
8. A great deal

**ParentQ5**

Has your child ever been home schooled?

1. Yes
2. No

**ASK IF ParentQ5 = 1**

**ParentQ6s**

Between what ages were they home schooled?

RECORD START AGE IN YEARS

**ASK IF ParentQ5 = 1**

**ParentQ6E**

Between what ages were they home schooled?

RECORD END AGE IN YEARS

**ASK IF ChldAg >= 4**

**ParentQ7**

Has your child ever been excluded from primary school?

1. Yes
2. No

**ASK IF ParentQ7 = 1**

**ParentQ8**

How many times did your child have a permanent exclusion / expulsion from primary school?

**ASK IF ParentQ7 = 1**

**ParentQ9**

How many times did your child have a fixed term / temporary exclusion / suspension from primary school?

**ParentQ10**

Has your child ever had a managed move (where the school insists and organises the change) between primary schools?

1. Yes
2. No

**ASK IF ParentQ10 = 1**

**ParentQ11**

How many times did your child have a managed move between primary school?

**ParentQ12**

Has your child ever been sent home for behaviour from primary school without being excluded?

1. Yes
2. No

**ASK IF: ParentQ12 = 1**

**ParentQ13**

How many times was your child sent home from primary school without being excluded?

**ASK IF: ChldAg >= 12**

**ParentQ14**

Has your child ever been excluded from secondary / middle or high school or college?

1. Yes
2. No

**ASK IF ParentQ14 = 1**

**ParentQ15**

How many times did your child have a permanent exclusion / expulsion from secondary / middle/ high school or college?

**ASK IF ParentQ14 = 1**

**ParentQ16**

How many times did your child have a fixed term / temporary exclusion / suspension from secondary / middle/ high school or college?

**ParentQ17**

Has your child ever had a managed move (where the school insists and organises the change) between secondary / middle/ high schools or sixth form colleges?

1. Yes
2. No

**ParentQ18**

Has your child ever been sent home for behaviour from secondary / middle, high school or college without being excluded?

1. Yes
2. No

**ASK IF ParentQ14 = 1**

**ParentQ19**

Was any support from school or educational specialist offered to your child as a result of their exclusion(s) from school?

1. Yes
2. No

**ASK IF ParentQ19 = 1**

**ParentQ20**

Was your child offered any of the following:

1. Assessment by the Additional Support Needs Coordinator
2. Assessment by an educational specialist from outside school like an educational psychologist or behavioural support teacher
3. Referral to Child and Adolescent Mental Health Services
4. Time with a member of school staff in the same school
5. Time in a special unit within the same school
6. Attend a new special school or special unit outside school
7. Home tutoring
8. Other (please specify)
9. No additional support was provided

**ASK IF ParentQ20 = 8**

**ParentQ20Ot**

Please specify other support offered

**ParentQ21**

Has your child ever spent any time being “looked after” by social services?

1. Yes
2. No

**ASK IF ParentQ21 = 1**

**ParentQ22**

How many times has your child been looked after?

**ASK IF ParentQ21 = 1**

**ParentQ23**

Did your child move schools as a result of being looked after?

1. Yes
2. No

**ASK IF ParentQ23 = 1**

**ParentQ24**

How often did they move schools as a result of being looked after?

## Stressful Life Event

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### StrsIntr

I would now like to ask about things that may have happened or problems that you or your child may have faced.

#### K1

Since your child was born, have you had a separation due to marital difficulties or broken off a steady relationship?

1. Yes
2. No

#### K2

Since your child was born, have you (or your partner) had a major financial crisis, such as losing the equivalent of 3 months income?

1. Yes
2. No

#### K3

Since your child was born, have you (or your partner) had a problem with the police involving a court appearance?

1. Yes
2. No

#### K8

Since your child was born, have you (or your partner) had a serious physical illness such as cancer or a major heart attack?

1. Yes
2. No

#### K9

Since your child was born, have you (or your partner) had a serious mental illness such as schizophrenia or major depression?

1. Yes
2. No

#### K6

Now turning to things that have happened to your child. At any stage in their life, has a parent of his/hers died?

1. Yes
2. No



**K6Sibling**

Now turning to things that have happened to your child. In the last three years has a brother or sister of his/hers died?

1. Yes
2. No

**K7**

At any stage in their life, has a close friend of his/hers died?

1. Yes
2. No

**K4**

Has s/he ever had a serious illness which required a stay in hospital?

1. Yes
2. No

**K5**

Has s/he ever been in a serious accident or badly hurt in an accident?

1. Yes
2. No

**ASK IF: ChldAg<sup>5</sup> >= 13**

**K10**

In the past year has one of the child's close friendship ended, for example, permanently falling out with a best friend or breaking off a steady relationship with a boy or girl friend?

1. Yes
2. No

**IF ChldAg < 13**

**K11**

In the past year has one of your child's close friendship ended, for example, permanently falling out with a best friend?

1. Yes
2. No

---

<sup>5</sup> Child age

## Strengths of the child

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While other sections of the interview focus mainly on possible difficulties and problems, this section allows us to find out more about the child's strengths and good points.

These questions were part of the DAWBA, and were asked of a parent of the sampled child aged 2 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Special educational needs

---

### **ASK IF: ChldAg > 5**

#### **Lrndifa**

Compared with an average child of the same age, is his/her READING....

1. Above average
2. Average
3. has some difficulty
4. or marked difficulty

#### **Lrndifb**

Compared with an average child of the same age, is his/her MATHEMATICS....

1. Above average
2. Average
3. has some difficulty
4. or marked difficulty

#### **Lrndifc**

Compared with an average child of the same age, is his/her READING....

1. Above average
2. Average
3. has some difficulty
4. or marked difficulty

### **ASK ALL PARENTS**

#### **ParentSN**

Does RESP have special educational needs?

1. Yes
2. No

**ASK IF: ParentSN = 1**

**ParentEHC**

Does RESP have an Education, Health and Care (EHC) Needs plan?

1. Yes
2. No

**SNArea**

Which areas are these special needs related to?

CODE ALL THAT APPLY

1. Difficulties with speech, language and/or communication (difficulties that make it hard for them to understand language or communicate effectively)
2. Learning difficulties (learning at a slower pace, which may be for everything or just for some skills such as reading/writing/maths, and/or difficulties with memory and/or organisation)
3. Social emotional and mental health (difficulties with emotions, behaviour, concentration or getting along with people that get in the way of learning or coping at school)
4. Sensory and / or physical (difficulties with vision or hearing and / or physical ill health that gets in the way of learning or coping at school)

## Service use

---

**ASK ALL PARENTS**

**ParentQ25**

Here is a list of people who parents and young people often turn to when they want advice and treatment about a young person's emotions, behaviour, concentration or difficulties in getting along with people.

In the past year have you or <Name> been in contact with any of these people because of worries about his/her emotions, behaviour, concentration or difficulties in getting along with people?

CODE ALL THAT APPLY

1. Someone in your family or a close friend
2. Telephone help line
3. Self-help group
4. Internet
5. A teacher (including form tutor, head of year, head teacher or coordinator)?
6. Someone working in additional support services (for example an educational psychologist, educational social worker or specialist teacher from outside school)
7. Someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse
8. Someone specialising in mental health care, such as a mental health nurse, psychiatrist, psychologist or counsellor

9. Someone specialising in children's physical health, such as a hospital or community paediatrician, or occupational therapist
10. Someone from social care, such as a social worker
11. Someone from youth justice, such as a probation officer or someone working in a Youth Offending Team
12. None of these, I am not worried about his / her emotions, behaviour, concentration or difficulties in getting along with people
13. I have not contacted any of these people but I am worried about his / her emotions, behaviour, concentration or difficulties in getting along with people
14. Other – please describe

**ASK IF ParentQ25 = 1**

**FamDesc**

Now talking about someone in your family or a close friend...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF ParentQ25 = 1**

**FamAdv**

Still talking about someone in your family or a close friend...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

RUNNING PROMPT

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF ParentQ25 = 2**

**TelDesc**

Now talking about the telephone help line...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF ParentQ25 = 2**

**TelAdv**

Still talking about the telephone help line...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

**RUNNING PROMPT**

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF ParentQ25 = 3**

**SelDesc**

Now talking about the self-help group...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF ParentQ25 = 3**

**SelAdv**

Still talking about the self-help group...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

**RUNNING PROMPT**

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF ParentQ25 = 4**

**NetDesc**

Now talking about the internet...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF ParentQ25 = 4**

**NetAdv**

Still talking about the internet...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

RUNNING PROMPT

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF ParentQ25 = 5**

**TeacDesc**

Now talking about a teacher (including Head of Year Head-teacher or Special educational Needs Co-ordinator)...

Can you describe what they did?

Prompts:

Who did they see?

What did they do?

**ASK IF ParentQ25 = 5**

**TeacAdv**

Still talking about a teacher (including Head of Year Head-teacher or Special educational Needs Co-ordinator)...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

RUNNING PROMPT

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF ParentQ25 = 6**

**SpecDesc**

Now talking about someone working in special educational services (for example educational psychologist, Educational Social Worker or School Counsellor) ...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF ParentQ25 = 6**

**SpecAdv**

Still talking about someone working in special educational services (for example educational psychologist, Educational Social Worker or School Counsellor) ...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

**RUNNING PROMPT**

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF: ParentQ25 = 7**

**GPDesc**

Now talking about your GP, family doctor or practice nurse...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF: ParentQ25 = 7**

**GPAAdv**

Still talking about your GP, family doctor or practice nurse...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

**RUNNING PROMPT**

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF: ParentQ25 = 8**

**MHCDesc**

Now talking about someone specialising in mental health (for example mental health nurse, psychiatrist, psychologist or counsellor)...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF: ParentQ25 = 8**

**MHCAdv**

Still talking about someone specialising in mental health (for example mental health nurse, psychiatrist, psychologist or counsellor)...

Was the advice or help offered for <Name> 's emotional, behavioural or concentration difficulties...

**RUNNING PROMPT**

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF: ParentQ25 = 9**

**CPhyDesc**

Now talking about someone specialising in children's physical health (for example a hospital or community paediatrician)...

Can you describe what they did?

Prompts:

- Who did they see
- What did they do

**ASK IF: ParentQ25 = 9**

**CPhyAdv**

Still talking about someone specialising in children's physical health (for example a hospital or community paediatrician)...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

**RUNNING PROMPT**

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF: ParentQ25 = 10**

**LinkDesc**

Now talking about the social worker...

Can you describe what they did?

Prompts:

- Who did they see
- What did they do



**ASK IF: ParentQ25 = 10**

**LinkAdv**

Still talking about the social worker...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

RUNNING PROMPT

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF: ParentQ25 = 11**

**JustDesc**

Now talking about someone from youth justice, such as a probation officer or someone working in a Youth Offending Team...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF: ParentQ25 = 11**

**JustAdv**

Still talking about someone from youth justice such as a probation officer or someone working in a Youth Offending Team...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

RUNNING PROMPT

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**ASK IF: ParentQ25 = 14**

**WhhelpO**

Who else have you sought advice from?

**ASK IF: ParentQ25 = 14**

**OthSDesc**

Now talking about the other type of help you mentioned...

Can you describe what they did?

Prompts:

Who did they see

What did they do

**ASK IF: ParentQ25 = 14**

**OthSAdv**

Still talking about the other type of help you mentioned...

Was the advice or help offered for <Name>'s emotional, behavioural or concentration difficulties...

**RUNNING PROMPT**

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful
5. Very unhelpful

**READ IF: ParentQ25 = 13**

**SpecIntr1**

You have said that you were worried about your child's emotions, behaviour or concentration, and you haven't seen a specialist about your worries. There are many good reasons for not seeing specialist services about your concerns as they are often not needed, but sometimes people don't get to specialist services because there are barriers in their way.

**ASK IF: ParentQ25 = 13**

**NoSpec**

I am going to show you a list of statements. Please say whether any of the following apply to you.

**CODE ALL THAT APPLY**

1. Didn't know of any services for these types of problems
2. Hard to persuade GP, teacher or other professional to refer me
3. Was referred but specialist services were reluctant to see us
4. Didn't like what the specialist services offered us
5. Didn't think that specialists would be able to help
6. Worried about what other people may think of us
7. Worried that my child might be taken away from me
8. Had a bad experience with specialist services in the past
9. Difficult to arrange appointments for times we could manage
10. The specialist was too far away or too hard to get to
11. Did not have time to see a specialist because of school, college, work or family demands
12. Could not afford to take time off work or pay for the travel to get to see a specialist
13. Took so long for appointment to come through that by the time it arrived there seemed little point in going
14. Worried about privacy, confidentiality or my child being left with permanent record
15. Other reason

**ASK IF: ParentQ25 = 13 AND NoSpec = 15**

**OthSpec**

Please specify other reasons you did not see a specialist.

**READ IF: ParentQ25 = 6 OR ParentQ25 = 8 OR ParentQ25 = 9 OR ParentQ25 = 10  
SpecIntr2**

You are seeing/have seen specialist services about your child's emotions, behaviour or concentration. Some families get to see a specialist without any difficulty, but other families do meet some obstacles and we are interested in finding out about these.

**ASK IF: ParentQ25 = 6 OR ParentQ25 = 8 OR ParentQ25 = 9 OR ParentQ25 = 10<sup>6</sup>  
SeenSpec**

I am going to show you a list of statements. Please say whether any of the following apply to you.

CODE ALL THAT APPLY

1. Didn't know of any services for these types of problems
2. Hard to persuade GP, teacher or other professional to refer me
3. Was referred but specialist services were reluctant to see us
4. Didn't like what the specialist services offered us
5. Didn't think that specialists would be able to help
6. Worried about what other people may think of us
7. Worried that my child might be taken away from me
8. Had a bad experience with specialist services in the past
9. Difficult to arrange appointments for times we could manage
10. The specialist was too far away or too hard to get to
11. Did not have time to see a specialist because of school, college, work or family demands
12. Could not afford to take time off work or pay for the travel to get to see a specialist
13. Took so long for appointment to come through that by the time it arrived there seemed little point in going
14. Worried about privacy, confidentiality or my child being left with permanent record
15. Other reason

---

<sup>6</sup> An error was made in the routing for this question - routing should have also included 'OR ParentQ25 = 7'. This means that parents who responded to question ParentQ25 that they had been in contact with someone from primary health care were not asked this question.

**ASK IF: ParentQ25 = 6 OR ParentQ25 = 8 OR ParentQ25 = 9 OR ParentQ25 = 10<sup>7</sup>  
AND SeenSpec = 15**

**OthSpec2**

Please describe any other obstacles you encountered.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 5**

**TeaWait**

Now talking about:

A teacher (including form tutor, head of year, head teacher or special educational needs coordinator)

How long did you wait to see the specialist

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 5**

**TeaAcpt**

Still talking about a teacher including form tutor head of year head teacher or [special educational needs/additional support needs] coordinator

Was this length of time acceptable?

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

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 5**

**TeaStop**

Did you or <Name> decide to stop seeing a teacher (including form tutor, head of year, head teacher or special educational needs coordinator) about your concerns for your child's emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 5 AND TeaStop = 1**

**TeaWhy**

Please describe your reasons for deciding to stop seeing the specialist.

---

<sup>7</sup> An error was made in the routing for this question - routing should have also included 'OR ParentQ25 = 7'. This means that parents who responded to question ParentQ25 that they had been in contact with someone from primary health care were not asked this question.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 6**

**SpecWait**

Now talking about someone working in special educational services (for example educational psychologist, educational social worker or school counsellor.)

How long did you wait to see the specialist

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 6**

**SpecAcpt**

Still talking about someone working in special educational services (for example educational psychologist, educational social worker, or school counsellor.)

Was this length of time acceptable

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

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 6**

**SpecStop**

Did you or <Name> decide to stop seeing someone working in special educational services (for example educational psychologist, educational social worker, or school counsellor) (about your concerns for your child's emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 6 AND SpecStop = 1**

**SpecWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 7**

**PriWait**

Now talking about someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse?

How long did you wait to see the specialist

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 7**

**PriAcpt**

Still talking about someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse?

Was this length of time acceptable?

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

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 7**

**PriStop**

Did you or <Name> decide to stop seeing someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse? (about your concerns for your child's emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 7 AND PriStop = 1**

**PriWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 8**

**MHCWait**

Now talking about someone specialising in mental health for example mental health nurse, psychiatrist, psychologist or counsellor.

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 8**

**MHCAct**

Still talking about someone specialising in mental health for example mental health nurse, psychiatrist, psychologist or counsellor

Was this length of time acceptable?

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

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 8**

**MHCStop**

Did you or <Name> decide to stop seeing someone specialising in mental health for example mental health nurse, psychiatrist, psychologist or counsellor about your concerns for your child's emotions behaviour or concentration while they were still sending you appointments?

1. Yes
2. No

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 8 AND MHCStop = 1**

**MHCWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 9**

**CPhyWait**

Now talking about someone specialising in children's physical health, for example a hospital or community paediatrician.

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 9**

**CPhyAcpt**

Still talking about someone specialising in children's physical health for example a hospital or community paediatrician.

Was this length of time acceptable?

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

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 9**

**CPhyStop**

Did you or <Name> decide to stop seeing someone specialising in children's physical health, for example a hospital or community paediatrician (about your concerns for your child's emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 9 AND  
CPhyStop=1  
CPhyWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 10  
LinkWait**

Now talking about Social Worker.

How long did you wait to see the specialist

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 10  
LinkAcpt**

Still talking about: Social Worker

Was this length of time acceptable?

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

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 10  
LinkStop**

Did you or <Name> decide to stop seeing a Social Worker about your concerns for your child's emotions, behaviour or concentration while they were still sending you appointments?

1. Yes
2. No

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 10 AND LinkStop  
= 1**

**LinkWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 11  
JustWait**

Now talking about someone from youth justice, such as a probation officer or someone working in a Youth Offending Team.

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months



**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 11**

**JustAcpt**

Still talking about someone from youth justice, such as a probation officer or someone working in a Youth Offending Team.

Was this length of time acceptable?

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

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 11**

**JustStop**

Did you or <Name> decide to stop seeing someone from youth justice, such as a probation officer or someone working in a Youth Offending Team about your concerns for your child's emotions, behaviour or concentration while they were still sending you appointments?

1. Yes
2. No

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 11 AND JustStop = 1**

**JustWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 14**

**OthWait**

Now talking about [other].

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 14**

**OthAcpt**

Still talking about [other].

Was this length of time acceptable?

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

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 14**

**OthStop**

Did you or <Name> decide to stop seeing [other] about your concerns for your child's emotions, behaviour or concentration while they were still sending you appointments?

1. Yes
2. No

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13 AND ParentQ25 = 14 AND OthStop = 1**

**OthWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: ParentQ25 ≠ 12 AND ParentQ25 ≠ 13**

**Better**

However pleased you have been with specialist services, there is usually room for some improvement. What do you think could be done to make them better?

**ASK IF: ChldAg = 10 to 16**

**SeenYth**

Has <Name> been seen by a youth justice worker/probation worker/someone working on a youth offending team?

5. Yes
6. No
7. SPONTANEOUS ONLY – Don't know

**ASK IF: ChldAg= 10 to 16 AND SeenYth = 5**

**TrtYth**

What sort of help advice or treatment did they give?

PLEASE ENTER A BRIEF DESCRIPTION

ENTER ALT+S to SAVE

**YthSHlp**

Was it helpful?

PLEASE ENTER A BRIEF EXPLANATION

ENTER ALT+S to SAVE

**YthConv**

In the past year has <Name> received a caution or conviction?

5. Yes
6. No
7. SPONTANEOUS ONLY – Don't know

**ASK IF: YthConv = 5**

**ParentQ29**

How many cautions/reprimands?

**ASK IF: YthConv = 5**

**ParentQ30**

How many convictions?

**WhyConv**

When did <Name>receive this caution/reprimand or conviction?

IF MORE THAN ONE PLEASE ENTER THE MOST RECENT

ENTER THE MONTH AND YEAR IF POSSIBLE

**WhatConv**

What was this caution or conviction for?

IF MORE THAN ONE ENTER DETAILS OF ALL CONVICTIONS

WITH THE MOST RECENT FIRST

**ASK ALL PARENTS**

**ParentQ26**

In the past year has <Name>been to a clinic, unit or hospital for several hours each day over a period of time due to his / her emotions, behaviour, concentration or difficulties getting along with people?

1. Yes
2. No

**ParentQ27**

In the past year has <Name>stayed in hospital over one or more nights due to his / her emotions, behaviour, concentration or difficulties in getting along with people?

1. Yes
2. No

**ParentQ31**

Have you been so worried about your child's emotions concentration behaviour or difficulties getting along with other people at any time before the past year that you talked to any of these people about it?

CODE ALL THAT APPLY

1. Someone in your family or a close friend
2. Telephone help line
3. Self-help group
4. Internet
5. A teacher (including form tutor, head of year, head teacher or coordinator)?
6. Someone working in additional support services (for example an educational psychologist, educational social worker or specialist teacher from outside school)?
7. Someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse?
8. Someone specialising in mental health care, such as a mental health nurse, psychiatrist, psychologist or counsellor?

9. Someone specialising in children's physical health, such as a hospital or community paediatrician, or occupational therapist?
10. Someone from social care, such as a social worker
11. Someone from youth justice, such as a probation officer or someone working in a Youth Offending Team
12. None of these, I am not worried about his / her emotions, behaviour, concentration or difficulties in getting along with people
13. I have not contacted any of these people but I am worried about his / her emotions, behaviour, concentration or difficulties in getting along with people
14. Other – please describe

**ASK IF: ParentQ31 = 14**

**ParentQ31Oth**

Who else have you sought advice from?

**ASK ALL PARENTS**

**PCarer**

Apart from anything <Name>does as part of paid employment, does he/she look after, or give any regular help or support to family members, friends, neighbours or others because of either long-term physical, mental ill-health, disability; or problems related to old age?

1. Yes
2. No

## Educational Attainment

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### ASK OF: PARENTS AND PARTNERS ONLY AND DVAGE= 15 to 70

#### QualChCr

The next section is about education, learning and training. Please think about ALL qualifications you ever gained, even if it was a long time ago or you are not using them now.

Do you have any qualifications...

CODE ALL THAT APPLY

1. From school or home schooling
2. From college or university
3. Related to work
4. From government schemes
5. From an apprenticeship
6. Gained in your leisure or by teaching yourself
7. Obtained in some other way
8. No qualifications
9. Don't know

### ASK IF: QualChCr ≠ 8

#### HiQuals

Which of the qualifications on this card do you have?

1. Degree/degree level qualification (including higher degree)
2. Teaching qualification
3. Nursing qualifications SRN, SCM, SEN, RGN, RM, RHV, Midwife
4. HNC / HND, BEC / TEC Higher, BTEC Higher / SCOTTECH Higher
5. ONC / OND / BEC / TEC / BTEC not higher
6. City and Guilds Full Technological Certificate
7. City and Guilds Advanced/Final Level
8. City and Guilds Craft/Ordinary Level
9. A-levels
10. AS level
11. SLC / SCE / SUPE at Higher Grade or Certificate of Sixth Year Studies
12. O-level passes taken in 1975 or earlier
13. O-level passes taken after 1975 GRADES A to C
14. O-level passes taken after 1975 GRADES D to E
15. GCSE GRADES A\* to C
16. GCSE GRADES D to G
17. CSE GRADE 1 / SCE BANDS A to C / Standard Grade LEVEL 1 to 3
18. CSE GRADES 2 to 5 / SCE Ordinary BANDS D to E
19. CSE Ungraded
20. SLC Lower
21. SUPE Lower or Ordinary
22. School Certificate or Matric
23. NVQ Level 5

24. NVQ Level 4
25. NVQ Level 3 / Advanced level GNVQ
26. NVQ Level 2 / Intermediate level GNVQ
27. NVQ Level 1 / Foundation level GNVQ
28. Recognised Trade Apprenticeship completed
29. Clerical or Commercial Qualification (e.g. typing / book-keeping / commerce)

### **EnrolCor**

Are you enrolled on any on any full-time or part-time education course, excluding leisure classes? (Include correspondence courses and open learning as well as other forms of full-time or part-time education)?

1. Yes
2. No

### **ASK IF: EnrolCor = 1**

#### **AttenCor**

And are you...

1. still attending
2. waiting for term to (re) start
3. or stopped going?

### **ASK IF: AttenCor = 1, 2**

#### **CoursCor**

Are you on a full or part-time course, a medical or nursing course, a sandwich course or some other kind of course?

1. At school full-time
2. At school part-time
3. Sandwich course
4. Studying at a university or college including 6<sup>th</sup> Form college full-time
5. Training for a qualification in nursing, physiotherapy or a similar medical subject
6. A part time course at university or college, including day release and block release
7. An Open college course
8. An Open University course
9. Any other correspondence course
10. Any other self / open learning method

### **ASK IF: CoursCor ≠ 4, 1**

#### **EdAgeCor**

How old were you when you finished your continuous full-time education?

## Employment

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**ASK OF: PARENTS AND PARTNERS ONLY**

**ASK IF: TranSDQ = 2 AND AdltInt = 1 AND EntRat = 1 OR EntRat = 3**

### Schm12

Last week, that is in the seven days ending Sunday [insert date of Sunday before interview], were you on any of the following training schemes...

1. Work club or enterprise club
2. New Enterprise Allowance
3. Work Experience
4. Work Trial
5. Work Programme
50. Any other government training scheme
66. None of these?

**ASK IF: Schm12 = 1, 5, 50**

### Fund12

May I just check, was that...

1. A scheme or programme in England funded by the Skills Funding Agency or the Education Funding Agency?
2. A programme in Wales funded by the Welsh Government?
3. A programme in Scotland run by Skills Development Scotland?
4. Or was it some other scheme?

**ASK IF: Schm12 = RESPONSE and Schm12 ≠ 66**

### TypSch12

In the week ending Sunday [insert date of Sunday before interview], on that government scheme were you mainly...

1. working for an employer,
2. temporarily away from an employer,
3. working for a voluntary organisation / charity,
4. undertaking some other form of voluntary or community work,
5. working for an environmental or task force,
6. in full-time or part-time study,
7. temporarily away from full-time or part-time study,
8. receiving help setting up as self-employed,
9. on a project providing work experience or practical training,
10. undertaking some other form of employment training,
11. or some other situation not listed?
97. Don't know

**ASK IF: TypeSch12 = 4, 6, 7, 9, 10, 11, 97**

**YTEtJb**

In the week ending Sunday the [insert date of Sunday before interview], did you do any paid work or have any other paid job or business in addition to the government scheme you have just told me about?

1. Yes
2. No

**ASK IF: Schm12 = 66 OR (DVAge > 64 AND DVAge <= 99)**

**Wrking**

Did you do any paid work in the 7 days ending Sunday the [insert date of Sunday before interview], either as an employee or as self-employed?

1. Yes
2. No

**ASK IF: Wrking = 2**

**JbAway**

Even though you were not doing paid work, did you have a job or business that you were away from in the week ending [insert date of Sunday before interview]? (and that you expect to return to)

1. Yes
2. No
3. Waiting to take up a new job/business already obtained

**ASK IF: JBAway = 2, 3**

**OwnBus**

Did you do any unpaid work in that week [insert date of Sunday before interview] for any business that you own?

1. Yes
2. No

**ASK IF: OwnBus = 2**

**RelBus**

...or that a relative owns?

1. Yes
2. No

**ASK IF: RelBus = 2 OR YTEtJb = 2**

**Everwk**

(And) Have you ever (in your life) had paid work, apart from casual or holiday work (or the job you are waiting to begin). Please include self-employment or a government scheme.

1. Yes
2. No



**ASK IF: Everwk = 1**

**LeftYr**

Which year did you leave your last paid job?

**ASK IF: Everwk = 1 AND LeftYr >= 2009**

**LeftM**

Which month in that year did you leave your last paid job?

**ASK IF: Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9**

**IndD**

What did the firm/organisation you worked for mainly make or do (at the place where you worked)?

**IndT**

Enter a title for the industry

**ASK IF: Wrking = 1 OR JbAway = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9**  
**Sector**

And was that...

1. a private firm or business, a limited company
2. or some other kind of organisation?

**ASK IF: Sector = 2**

**Sectro03**

What kind of non-private organisation was it...

1. a public limited company (plc)?
2. a nationalised industry/state corporation?
3. central government or civil service?
4. local government or council (including police, fire services and local authority controlled schools/colleges)?
5. a university, or other grant funded education establishment (include opted-out schools)?
6. a health authority or NHS Trust?
7. a charity, voluntary organisation or trust?
8. the armed forces?
9. some other kind of organisation?

**ASK IF: Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9**

**OccT**

What was your (main) job in the week ending Sunday the [insert date of Sunday before interview]?

**ASK IF: Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9**

**OccD**

What did you mainly do in your job?

**ASK IF: Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9**

**Stat**

(And) were you working as an employee or were you self-employed?

1. Employee
2. Self-employed
3. Government scheme
4. Unpaid family worker

**ASK IF: (Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9) AND Stat = 2**

**Self**

May I just check were you...

**MULTIPLE CODE**

1. paid a salary or wage by an agency
2. a sole director of your own limited business
3. running a business or professional practice
4. a partner in a business or professional practice
5. working for yourself
6. a sub-contractor
7. or doing free-lance work
8. None of the above

**ASK IF: (Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9) AND Stat = 1**

**Supervis**

In your job do you have formal responsibility for supervising the work of other employees?

Do not include people who only supervise: children e.g. teacher, nannies, childminders; animals; security or buildings e.g. care takers, security guards

1. Yes
2. No

**ASK IF: (Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9) AND Stat = 1**

**Manage**

Do you have any managerial duties, or were you supervising any other employees?

1. Manager
2. Foreman/supervisor
3. Not manager/supervisor

**ASK IF: (Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR YTEtJb = 1 OR TypSch12 = 1, 2, 3, 5, 8, 9) AND Stat = 1**

**MpnE02**

How many employees were there at the place where you worked?

1. 1 to 10
2. 11 to 19
3. 20 to 24
4. Don't know but under 25
5. 25 to 49
6. 50 to 249
7. 250 to 499
8. Don't know between 50 and 499
9. 500 or more

**ASK IF: Everwk = 1 AND Stat = 2**

**Solo**

(And) were you working on your own or did you have employees?

1. On own/with partners but no employees
2. With employees

**ASK IF: Solo = 2**

**MpnS02**

How many people did you employ at the place where you worked?

1. 1 to 10
2. 11 to 19
3. 20 to 24
4. Don't know but under 25
5. 25 to 49
6. 50 to 249
7. 250 to 499
8. Don't know between 50 and 499
9. 500 or more

**ASK IF: Wrking = 1 OR JBAway = 1 OR OwnBus = 1 OR RelBus = 1 OR EverWk = 1**

**FtPtWk**

In your main job were you working...

1. Full-time
2. Part-time

**ASK IF: Wrking = 2 AND JBAway = 2, 3**

**Look4**

Thinking of the 4 weeks ending Sunday the [insert date of Sunday before interview], were you looking for any kind of paid work at any time in those 4 weeks?

1. Yes

2. No

**ASK IF: Look4 = 2**

**LkYt4**

...Or were you looking in those 4 weeks for a place on a government scheme?

1. Yes
2. No

**ASK IF: LkYt4 = 2**

**Wait**

...(And) were you waiting to take up a job that you had already obtained?

1. Yes
2. No

**ASK IF: Wait = 2**

**LikeWk**

Even though you were not looking for work in the 4 weeks ending on the Sunday on or before the end of the interview, would you like to have a regular paid job at the moment, either a full or part-time job?

1. Yes
2. No

**NoLoWa**

May I just check... what were the reasons you did not look for work in the last 4 weeks?

1. Waiting for the results of an application for a job/being assessed by a training agent
2. Student
3. Looking after the family home
4. Temporarily sick or injured
5. Long-term sick or disabled
6. Believe no jobs available
7. Not yet started looking
8. Doesn't need employment
9. Retired from paid work
10. Any other reason

**ASK IF: NoLoWa >= 1 response**

**NoLWM**

May I just check, ...what was the MAIN reason you did not look for work in the last 4 weeks?

## Armed Forces

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**ASK IF: ChildAg < 16<sup>8</sup>**

**ArmFEv**

Have you (or has the other parent/guardian of ^textfill selected child) ever served in the UK Regular Armed Forces or in the UK Reserve Armed Forces?

1. Yes – as a Regular
2. Yes – as a Reservist
3. No

**ASK IF: ArmFEv ≠ 3**

**ArmFCur**

Are you (or is the other parent/guardian of ^textfill selected child) currently serving in the UK Regular Armed Forces or in the UK Reserve Armed Forces?

1. Yes – as a Regular
2. Yes – as a Reservist
3. No

## Benefits and Income

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**ASK IF: LivingArr<sup>9</sup> = 1**

**Intro**

The next section is about benefits.

1. Continue
7. Refuse benefits section

**ASK IF: Intro = 1**

**WAgeBen**

Are you at present receiving any of these state benefits in your own right: that is, where you are the named recipient?

1. Universal Credit
2. Housing Benefit
3. Working Tax Credit (excluding any childcare element of Working Tax Credit)
4. Child Tax Credit (including any childcare element of Working Tax Credit)
5. Income support
6. Jobseeker's Allowance
7. Employment and Support Allowance
8. Carer's Allowance
9. None of these

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<sup>8</sup> An error was made in the routing for this question – routing should have been 'ChildAg <= 16'. This means that parents of children aged 16 were not asked this question. This also impacts questions ArmFCur.

<sup>9</sup> Ask young person: Are you living with your parent(s)/legal guardians? Response options for this question were (1) Yes (2) No.

97. Spontaneous only – One of these/more than one of these, but I don't know which

**ASK IF: Intro = 1**

**DisBen**

Looking at this card, are you at present receiving any of these state benefits in your own right, or on behalf of another person?

1. Personal Independence Payment (including the car allowance known as Motability)
2. Disability Living Allowance (including the car allowance known as Motability)
3. Attendance Allowance
4. Severe Disablement Allowance
5. Incapacity Benefit
6. Industrial Injuries Disablement Benefit
7. None of these

97. SPONTANEOUS ONLY – One of these/more than one of these, but I don't know which

**ASK IF: Intro = 1 AND DisBen = 1**

**PIPType**

There are two types of Personal Independence Payment. Is your allowance...

1. Daily living only
2. Mobility only
3. Both – daily living and mobility

**ASK IF: Intro = 1 AND PIPType = 2, 3**

**PIPMota**

Is your Personal Independence Payment the car allowance known as Motability?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

**ASK IF: Intro = 1 AND DisBen = 2**

**DLAType**

There are two types of Disability Living Allowance. Is your allowance...

1. Care component only,
2. Mobility component
3. Both – care and mobility components

**ASK IF: Intro = 1 AND DLAType = 2, 3**

**DLAMota**

Is your Disability Living Allowance the car allowance known as Motability?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

**ASK IF: Intro = 1**

**PenBen**

Are you at present receiving any of these state benefits in your own right: that is where you are the named recipient?

1. Pension Credit
2. State Retirement Pension
3. Widow's Pension, Bereavement Allowance, Widowed Parent's Allowance (formerly Widowed Mother's Allowance)
4. Armed Forces Compensation Scheme (formerly War Disablement Pension), including Guaranteed Income Payments
5. War Widow's/ Widower's Pension (and any related allowances)
6. None of these
97. SPONTANEOUS ONLY – One of these/ more than one of these, but I don't know which

**ASK IF: Intro = 1 AND PenBen = 3**

**Wid**

Which one was received?

1. Widow's Pension
2. Widowed mother's Allowance
3. Bereavement Allowance
4. Widowed Parent's Allowance

**ASK IF: Intro = 1 AND DisBen=3 AND PenBen = 2, 3**

**AA**

Is this Attendance Allowance paid as part of your Widow's Pension, or do you receive a separate payment?

1. Paid as part of pension
2. Separate payment

**ASK IF: Intro = 1 AND DLAType = 1, 3 AND PenBen= 2, 3**

**DC**

Is this care component of DLA paid as part of your Retirement Pension, or do you receive a separate payment?

1. Paid as part of pension
2. Separate payment

**ASK IF: Intro = 1 AND DLAType = 1, 3 AND PenBen= 2, 3**

**DM**

Is this mobility component of DLA paid as part of your Widow's Pension, or do you receive a separate payment?

1. Paid as part of pension
2. Separate payment

**ASK IF: Intro = 1 AND PenBen ≠ 2, 3**

**DefrPen**

Have you deferred taking up your State Pension?

1. Yes
2. No

**ASK IF: DefrPen = 2**

**DefrPEX**

It appears that the respondent is not claiming Retirement Pension and has not deferred their State Pension. Please check the reason for this and explain in a note.

**ASK IF: Intro = 1**

**KidBen**

Are you at present receiving any of these state benefits in your own right: that is, where you are the named recipient?

1. Child Benefit
2. Guardian's Allowance
3. Maternity Allowance
4. None of these
97. SPONTANEOUS ONLY – One of these/ more than one of these, but I don't know which

**ASK IF: Intro = 1 AND KidBen ≠ 1 AND Number of dependent children > 0**

**CBChk**

You didn't report receipt of Child Benefit – is this because...

1. Someone else in the household receives Child benefit
2. You have chosen to stop receiving Child Benefit payments due to having a high income
3. You have not applied for Child Benefit
4. Other

**ASK IF: Intro = 1**

**SocFund**

Have you, in the last 12 months, received any of these state benefits in your own right: that is, where you are the named recipient?

1. A grant from the Social Fund for funeral expenses
2. A grant from the Social Fund for maternity expenses/ Sure Start Maternity Grant
3. A budgeting loan from DWP (exclude Universal Credit Budgeting Advances)
4. None of these
97. SPONTANEOUS ONLY – One of these/ more than one of these, but I don't know which



**ASK IF: Intro = 1**

**OtherBen**

Have you, in the last 6 months, received any of these state benefits in your own right: that is, where you are the named recipient?

1. 'Extended Payment' of Housing Benefit/ rent rebate (4 weeks payment only)
2. Bereavement Payment
3. Universal Credit Budgeting Advance
4. A loan or grant from your Local Authority
5. Any National Insurance or State Benefit not mentioned earlier
6. None of these
97. SPONTANEOUS ONLY – One of these/ more than one of these, but I don't know which

**ASK IF: Intro = 1 AND OtherBen = 5**

**OthName**

What is the name of the other benefit you receive?

**Intro**

The next set of questions are about income.

1. Continue

**SrcInc08**

This care shows various possible sources of income. Can you please tell me which kinds of income you personally receive?

1. Earnings from employment
2. Earnings from self-employment
3. Pension from former employer
4. Personal pension
5. State pension
6. Child Benefit
7. Income Support
8. Tax Credits
9. Other state benefits
10. Interest from savings
11. Interest from investments
12. Other kinds of regular allowance from outside the household
13. Income from rent
14. Other sources
15. No source of income

## GrossInc

Could you please look at this card and tell me which group represents your own personal annual gross income from all sources mention? By gross income, I mean income from all sources before deductions for income tax, National Insurance etc.

1. Group 1 (Weekly – Less than £10, Monthly – Less than £40, Annual – Less than £520)
2. Group 2 (Weekly – £10 less than £30, Monthly – £40 less than £130, Annual – £520 less than £1,600)
3. Group 3 (Weekly – £30 less than £50, Monthly – £130 less than £220, Annual – £1,600 less than £2,600)
4. Group 4 (Weekly – £50 less than £70, Monthly – £220 less than £300, £2,600 less than £3,600)
5. Group 5 (Weekly – £70 less than £100, Monthly – £300 less than £430, Annual – £3,600 less than £5,200)
6. Group 6 (Weekly – £100 less than £150, Monthly – £430 less than £650, Annual – £5,200 less than £7,800)
7. Group 7 (Weekly – £150 less than £200, Monthly – £650 less than £870, Annual – £7,800 less than £10,400)
8. Group 8 (Weekly – £200 less than £250, Monthly – £870 less than £1,100, Annual – £10,400 less than £13,000)
9. Group 9 (Weekly – £250 less than £300, Monthly – £1,100 less than £1,300, Annual – £13,000 less than £15,600)
10. Group 10 (Weekly – £300 less than £350, Monthly – £1,300 less than £1,500, Annual – £15,600 less than £18,200)
11. Group 11 (Weekly – £350 less than £400, Monthly – £1,500 less than £1,700, Annual – £18,200 less than £20,800)
12. Group 12 (Weekly – £400 less than £450, Monthly – £1,700 less than £2,000, Annual – £20,800 less than £23,400)
13. Group 13 (Weekly – £450 less than £500, Monthly – £2,000 less than £2,200, Annual – £23,400 less than £26,000)
14. Group 14 (Weekly – £500 less than £550, Monthly – £2,200 less than £2,400, Annual – £26,000 less than £28,600)
15. Group 15 (Weekly – £550 less than £600, Monthly – £2,400 less than £2,600, Annual – £28,600 less than £31,200)
16. Group 16 (Weekly – £600 less than £650, Monthly – £2,600 less than £2,800, Annual – £31,200 less than £33,800)
17. Group 17 (Weekly – £650 less than £700, Monthly – £2,800 less than £3,000, Annual – £33,800 less than £36,400)
18. Group 18 (Weekly – £700 less than £800, Monthly – £3,000 less than £3,500, Annual – £36,400 less than £41,600)
19. Group 19 (Weekly – £800 less than £900, Monthly – £3,500 less than £3,900, Annual – £41,600 less than £46,800)
20. Group 20 (Weekly – £900 less than £1,000, Monthly – £3,900 less than £4,300, Annual – £46,800 less than £52,000)

21. Group 21 (Weekly – £1,000 less than £1,150, Monthly – £4,300 less than £5,000, Annual – £52,000 less than £60,000)
22. Group 22 (Weekly – £1,150 less than £1,350, Monthly – £5,000 less than £5,800, Annual – £60,000 less than £70,000)
23. Group 23 (Weekly – £1,350 less than £1,550, Monthly – £5,800 less than £6,700, Annual – £70,000 less than £80,000)
24. Group 24 (Weekly – £1,550 less than £1,750, Monthly – £6,700 less than £7,500, Annual – £80,000 less than £90,000)
25. Group 25 (Weekly – £1,750 less than £1,900, Monthly – £7,500 less than £8,300, Annual – £90,000 less than £100,000)
26. Group 26 (Weekly – £1,900 less than £2,100, Monthly – £8,300 less than £9,200, Annual – £100,000 less than £110,000)
27. Group 27 (Weekly – £2,100 less than £2,300, Monthly – £9,200 less than £10,000, Annual – £110,000 less than £120,000)
28. Group 28 (Weekly – £2,300 less than £2,500, Monthly – £10,000 less than £10,800, Annual – £120,000 less than £130,000)
29. Group 29 (Weekly – £2,500 less than £2,700, Monthly – £10,800 less than £11,700, Annual – £130,000 less than £140,000)
30. Group 30 (Weekly – £2,700 less than £2,900, Monthly – £11,700 less than £12,500, Annual – £140,000 less than £150,000)
31. Group 31 (Weekly – £2,900 or more, Monthly – £12,500 or more, Annual – £150,000 or more)
99. Refusal

### **HHIdInc**

Could you look at this card again and tell me which group represents your household's annual gross income from all sources mentioned.

1. Group 1 (Weekly – Less than £10, Monthly – Less than £40, Annual – Less than £520)
2. Group 2 (Weekly – £10 less than £30, Monthly – £40 less than £130, Annual – £520 less than £1,600)
3. Group 3 (Weekly – £30 less than £50, Monthly – £130 less than £220, Annual – £1,600 less than £2,600)
4. Group 4 (Weekly – £50 less than £70, Monthly – £220 less than £300, £2,600 less than £3,600)
5. Group 5 (Weekly – £70 less than £100, Monthly – £300 less than £430, Annual – £3,600 less than £5,200)
6. Group 6 (Weekly – £100 less than £150, Monthly – £430 less than £650, Annual – £5,200 less than £7,800)
7. Group 7 (Weekly – £150 less than £200, Monthly – £650 less than £870, Annual – £7,800 less than £10,400)
8. Group 8 (Weekly – £200 less than £250, Monthly – £870 less than £1,100, Annual – £10,400 less than £13,000)
9. Group 9 (Weekly – £250 less than £300, Monthly – £1,100 less than £1,300, Annual – £13,000 less than £15,600)

10. Group 10 (Weekly – £300 less than £350, Monthly – £1,300 less than £1,500, Annual – £15,600 less than £18,200)
11. Group 11 (Weekly – £350 less than £400, Monthly – £1,500 less than £1,700, Annual – £18,200 less than £20,800)
12. Group 12 (Weekly – £400 less than £450, Monthly – £1,700 less than £2,000, Annual – £20,800 less than £23,400)
13. Group 13 (Weekly – £450 less than £500, Monthly – £2,000 less than £2,200, Annual – £23,400 less than £26,000)
14. Group 14 (Weekly – £500 less than £550, Monthly – £2,200 less than £2,400, Annual – £26,000 less than £28,600)
15. Group 15 (Weekly – £550 less than £600, Monthly – £2,400 less than £2,600, Annual – £28,600 less than £31,200)
16. Group 16 (Weekly – £600 less than £650, Monthly – £2,600 less than £2,800, Annual – £31,200 less than £33,800)
17. Group 17 (Weekly – £650 less than £700, Monthly – £2,800 less than £3,000, Annual – £33,800 less than £36,400)
18. Group 18 (Weekly – £700 less than £800, Monthly – £3,000 less than £3,500, Annual – £36,400 less than £41,600)
19. Group 19 (Weekly – £800 less than £900, Monthly – £3,500 less than £3,900, Annual – £41,600 less than £46,800)
20. Group 20 (Weekly – £900 less than £1,000, Monthly – £3,900 less than £4,300, Annual – £46,800 less than £52,000)
21. Group 21 (Weekly – £1,000 less than £1,150, Monthly – £4,300 less than £5,000, Annual – £52,000 less than £60,000)
22. Group 22 (Weekly – £1,150 less than £1,350, Monthly – £5,000 less than £5,800, Annual – £60,000 less than £70,000)
23. Group 23 (Weekly – £1,350 less than £1,550, Monthly – £5,800 less than £6,700, Annual – £70,000 less than £80,000)
24. Group 24 (Weekly – £1,550 less than £1,750, Monthly – £6,700 less than £7,500, Annual – £80,000 less than £90,000)
25. Group 25 (Weekly – £1,750 less than £1,900, Monthly – £7,500 less than £8,300, Annual – £90,000 less than £100,000)
26. Group 26 (Weekly – £1,900 less than £2,100, Monthly – £8,300 less than £9,200, Annual – £100,000 less than £110,000)
27. Group 27 (Weekly – £2,100 less than £2,300, Monthly – £9,200 less than £10,000, Annual – £110,000 less than £120,000)
28. Group 28 (Weekly – £2,300 less than £2,500, Monthly – £10,000 less than £10,800, Annual – £120,000 less than £130,000)
29. Group 29 (Weekly – £2,500 less than £2,700, Monthly – £10,800 less than £11,700, Annual – £130,000 less than £140,000)
30. Group 30 (Weekly – £2,700 less than £2,900, Monthly – £11,700 less than £12,500, Annual – £140,000 less than £150,000)
31. Group 31 (Weekly – £2,900 or more, Monthly – £12,500 or more, Annual – £150,000 or more)
99. Refusal

## General Health Module

---

**ASK IF: ChIdAg <= 16 OR LivingArr = 2**

### GenHlth

How is <child's name>'s health in general? / How is your health in general? / Would you say it was ...

1. very good
2. good
3. fair
4. bad
5. or is it very bad?

### B2

Is <child's name> registered with a GP?

1. Yes
2. No

### B4

Here is a list of health problems or conditions which some children or young people may have. Please can you tell me whether <child's name> has...

1. Asthma
2. Eczema
3. Hay fever
4. Glue ear or otitis media, or having grommets
5. Bed wetting
6. Soiling pants
7. Stomach/digestive problems or abdominal/tummy pains
8. A heart problem
9. Any blood disorder
10. Epilepsy
11. Food allergy
12. Food intolerance
13. Some other allergy
14. None of these

#### **B4a**

Here is another list of health problems or conditions which some children or young people may have.

Please can you tell me whether <child's name> has...

1. Hyperactivity
2. Behavioural problems
3. Emotional problems
4. Learning difficulties
5. Dyslexia
6. Cerebral palsy
7. Migraine or severe headaches
8. The Chronic Fatigue Syndrome or M.E
9. Eye/Sight problems
10. Speech/or language problems
11. Hearing problems
12. None of these

#### **B5**

And finally, another list of health problems or conditions which some children or young people may have. Please can you tell me whether <child's name> has...

1. Diabetes
2. Obesity
3. Cystic fibrosis
4. Spina Bifida
5. Kidney, urinary tract problems
6. Missing fingers, hands, arms, toes, feet or legs
7. Any stiffness or deformity of the foot, leg, fingers, arms or back
8. Any muscle disease or weakness
9. Any difficulty with co-ordination
10. A condition present since birth such as club foot or cleft palate
11. Cancer
12. None of these

#### **AnyElse**

Does <child's name> have any other health problems?

1. Yes
2. No

**ASK IF: AnyElse = 1**

#### **ElseSpec**

What are these other health problems?

**B12**

May I just check, is <child's name> taking any pills or tablets listed here?

1. Yes
2. No

**ASK IF: B12 = 1**

**B12a**

1. Methylphenidate, Equasym, Ritalin
2. Concerta XL, Equasym XL, Medikinet XL
3. Atomoxetine, Strattera
4. Dexamphetamine, Dexedrine, Elvanse, Lisdexamphetamine
5. Imipramine, Tofranil
6. Clonidine, Catepres, Dixarit
7. Fluoxetine, Prozac
8. Sertraline, Lustral
9. Escitalopram, Cipralex
10. Paroxetine, Seroxat
11. Fluvoxamine, Faverin
12. Citalopram, Cimpramil
13. Mirtazapine, Zispin, Venlafaxine
14. Amitryptaline, Lentizol, Triptafen
15. Clomipramine, Anafranil
16. Sulpirade, Dolmatil, Sulparex, Sulptil
17. Aripiprazole, Olanzapine, Quetiapine
18. Risperidone, Riperadal
19. Haloperidol, Dozic, Haldol, Serenace
20. Melatonin
21. Lithium, Valproate, Lamotrigine
22. Valium
23. Clonazepam, Lorazepam
24. Sedative antihistamines such as Chlorphenamine or Promethazine
25. Other

**ASK IF: B12a = 25**

**B120th**

What is the other pill or tablet that <child's name> is taking?

**ASK IF: B12 = 1**

**B12b**

Who prescribed this medication?

**ASK IF: B12 = 1**

**B12c**

How long has <child's name> been taking it?

## General Health and Family Questions

---

### SCIntr

I would now like you to take the computer and answer the next set of questions yourself. There are some questions about your general health, and about your family.

### PCGSc

INTERVIEWER INSTRUCTION: respondents should self-complete. Offer to read the questions for them but the respondents should still type the answers into the laptop themselves if at all possible press f2 before passing laptop to the respondent

1. Complete self-completion by respondent
2. Questions read from script by the interviewer
3. Section read and entered by interviewer

### SCTest

This question is just to help you to get used to answering the questions in this section.

Do you enjoy watching television?

1. No
2. A little
3. A lot

### HthIntr

We would like to know how your health has been in general, over the past few weeks. Please answer ALL the questions by entering the number next to the answer which describes how you have been feeling recently

### GH1

Have you recently been able to concentrate on whatever you're doing?

1. Better than usual
2. Same as usual
3. Less than usual
4. Much less than usual

### GH2

Have you recently lost much sleep over worry?

1. Not at all
2. No more than usual
3. Rather more than usual
4. Much more than usual

### GH3

Have you recently felt that you are playing a useful part in things?

1. More so than usual
2. Same as usual
3. Less so than usual



4. Much less usual

**GH4**

Have you recently felt capable of making decisions about things?

1. More so than usual
2. Same as usual
3. Less so than usual
4. Much less usual

**GH5**

Have you recently felt constantly under strain?

1. Not at all
2. No more than usual
3. Rather more than usual
4. Much more than usual

**GH6**

Have you recently felt you couldn't overcome your difficulties?

1. Not at all
2. No more than usual
3. Rather more than usual
4. Much more than usual

**GH7**

Have you recently been able to enjoy your normal day-to-day activities?

1. More so than usual
2. Same as usual
3. Less able than usual
4. Much less able

**GH8**

Have you recently been able to face up to your problems?

1. More so than usual
2. Same as usual
3. Less able than usual
4. Much less able

**GH9**

Have you recently been feeling unhappy and depressed?

1. Not at all
2. No more than usual
3. Rather more than usual
4. Much more than usual

**GH10**

Have you recently been losing confidence in yourself?

1. Not at all
2. No more than usual
3. Rather more than usual
4. Much more than usual

**GH11**

Have you recently been thinking of yourself as a worthless person?

1. Not at all
2. No more than usual
3. Rather more than usual
4. Much more than usual

**GH12**

Have you recently been feeling reasonably happy, all things considered?

1. More so than usual
2. Same as usual
3. Less so than usual
4. Much less than usual

**FamIntr**

We would like to know how your family gets on together.

**FF1**

Planning family activities is difficult because we misunderstand each other

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF2**

In times of crisis we can turn to each other for support

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF3**

We cannot talk to each other about the sadness we feel

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF4**

Individuals are accepted for what they are

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF5**

We avoid discussing our fears and concerns

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF6**

We can express feelings to each other

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF7**

There is lots of bad feeling in the family

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF8**

We feel accepted for what we are

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF9**

Making decisions is a problem for our family

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF10**

We are able to make decisions on how to solve problems

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF11**

We don't get along well together

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**FF12**

We confide in each other

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree

**Argue1**

When the adults in the house get into arguments with one another, the children may see or hear what is going on.

Has <child's name> witnessed one of these arguments?

1. Yes
2. No

**ASK IF: Argue1 = 1**

**Argue2**

Were the arguments between the adults...

1. Without verbal or physical aggression
2. With verbal aggression
3. With physical aggression

**SCExit**

Thank you. That is the end of this section.

Please pass the computer back to the interviewer

**ASK IF: PCGSc = SCAccept**

**PHowCmp**

Did the parent complete the whole of this section as a self-completion?

1. Yes
2. No

## **ParEnd**

This is the end of the parent interview.

## **Teacher Consent, Data Linkage Consent and Re-Contact Consent**

---

**ASK IF: ChldAg = <17**

**ASK IF: ChldAg = 5 to 16**

### **TConsent**

We would now like to ask for your consent to us contacting a teacher of your or your child's choice who knows your child the best. We'll send them an email with a secure link to a short online questionnaire that we'll ask them to fill out and we'll also send them a paper copy in the post. Their participation is invaluable and helps create a fuller picture of <child name>'s health and wellbeing. All information will remain confidential...

Do you consent for the teacher to be contacted?

1. Yes
2. No

**ASK IF: TConsent = 1**

### **TCntCard**

Please hand over the teacher contact card to the parent. The parent needs to sign it and give it to their child so that their child can give it to their teacher

**ASK IF: TConsent = 1**

### **TName**

What is the name of the teacher you (or your child) would like to be contacted?

**ASK IF: TConsent = 1**

### **TEmailKn**

Do you know their email address?

1. Yes
2. No

**ASK IF: TEmailKn = 1**

### **TEmail2**

What is their email address?

**ASK IF: TEmailKn = 1**

### **TEmailConf**

Please confirm this email address by typing it in the box below again.

**ASK IF: TEmailKn = 2**

**SEmailKn**

Do you know the email address of the school?

1. Yes
2. No

**ASK IF: SEmailKn = 1**

**SEmail2**

What is this email address?

**ASK IF: SEmailKn = 1**

**SEmailConf**

Please confirm this email address by typing it in the box below again

**ASK IF: TConsent = 1**

**SchName**

What is the name of the school?

**ASK IF: TConsent = 1**

**URN**

If the school doesn't appear in the lookup, please search ""Not Found"" and select the ""Not Found"" entry

**ASK IF: TConsent = 1 AND URN = ≠ 999997**

**SchNameConf**

Can I confirm the name of the school is:<Name>. If no information is present, please code 2 and ask parent for information.

1. Yes
2. No

**ASK IF: URN = 999997**

**SchNameW**

What is the name of the school?

**ASK IF: URN = ≠ 999997**

**SchAddressC**

Can I confirm the address of the school is:

- AddLine1
- Street1
- Street2
- Town
- Country
- Postcode

If no information is present, please code 2 and ask parent for information

1. Yes

2. No

**ASK IF: SchAddressC = 2 OR URN = 999997**

**SchAdd**

What is the address of the school?

AddLine1

Street1

Street2

Town

Country

Postcode

**HTNameConf**

Can I confirm the name of the head teacher is <Name>. If no information is present, please code 2 and ask parent for information.

1. Yes

2. No

**ASK IF: HTNameConf = 2**

**HTnameW**

What is the name of the headteacher of the school?

**ASK IF: ChldAg = <17**

**NHSCan**

We would like to ask for your consent to link some of your/your child's NHS health records and education records with your survey answers. To do this we would need to send your name, address and date of birth to NHS Digital. Please read this form, it explains more about what is involved.

INTERVIEWER INSTRUCTION: Give the respondent the (colour) consent form (linking survey answers to other information) and allow them time to read the information. Use the "Linking survey answers to other information" showcard to explain the process, if required.

1. Consent given to both health records and education records

2. Consent given only to health

3. Consent given only to education

4. Consent not given to either

**ASK IF: NHSCAN = 1, 2, 3**

**NHSSig**

Before I can pass your details on, I have to obtain written consent from you.

INTERVIEWER INSTRUCTION: Enter the respondent's serial number on the top of the consent form.

Ask the respondent to initial the box and sign the form.

Give the white copy of the form to the respondent.

Code whether signed consent obtained.

1. Consent signed
2. No consent obtained (or only one box initialled)

### **Thank**

Thank you for your help. Before we end the interview, I need to collect a little more information for our records.

### **ASK IF: Org = 1**

#### **TPhone**

Some interviews in a survey are checked to make sure that people like yourself are satisfied with the way the interview was carried out. Just in case yours is one of the interviews that is checked, it would be helpful if we could have your telephone number.

1. Number given
2. Number refused
3. No telephone
4. Number unknown

### **ASK IF: Org = 1**

#### **PhoneNum**

Enter phone number

### **ReCall**

May I just check...

We may want to contact you again in future, would this be alright?

1. Yes (unconditional)
2. No (unconditional)
3. Yes (in certain circumstances)

### **ASK IF: ReCall = 1, 3**

#### **GivTel2**

Please may I have a telephone number, so we can contact you?

1. Yes
2. No
3. No phone

### **ASK IF: ReCall = 1, 3 AND GivTel2 = 1**

#### **TelNo2**

INTERVIEWER INSTRUCTION: record telephone number



**ASK IF: ReCall = 3**

**Onlylf**

Main conditions for follow-up interview.

1. Contact household beforehand
2. Only at a convenient time
3. Someone else (e.g. carer) needs to be there
4. Don't want to answer other types of question

**ASK IF: ReCall = 3 AND Onlylf = 4**

**OnIfO**

INTERVIEWER INSTRUCTION: type in types of question the respondent doesn't wish to answer

**ASK IF: ReCall = 1, 3**

**Name**

INTERVIEWER INSTRUCTION:

it is helpful to have a contact name to ask for or to address letters to: title/initial/surname. record as much of this as respondent will allow. if respondent refuses name, enter 0

**ASK IF: ReCall = 1, 3**

**Moved**

INTERVIEWER INSTRUCTION:

Is this respondent now living at a different address to the one on the address list?

1. Yes
2. No

**ASK IF: ReCall = 1, 3 AND Moved = 1**

**PAdd1**

INTERVIEWER INSTRUCTION:

Enter first line of present address

**ASK IF: ReCall = 1, 3 AND Moved = 1**

**PADD2**

INTERVIEWER INSTRUCTION:

Enter second line of present address

**ASK IF: ReCall = 1, 3 AND Moved = 1**

**PADD3**

INTERVIEWER INSTRUCTION:

Enter third line of present address

**ASK IF: ReCall = 1, 3 AND Moved = 1**  
**POSTCOD**

INTERVIEWER INSTRUCTION:

Enter postcode of present address

**Moving**

May I just check, are you likely to be moving from this address in the near future?

1. Yes
2. No

**ASK IF: Moving = 1**

**MAddX**

Do you know where you will be moving to?

1. Yes
2. No

**ASK IF: MAddX = 1**

**MAdd1**

INTERVIEWER INSTRUCTION:

Enter first line of new address

**ASK IF: MAddX = 1**

**MAdd2**

INTERVIEWER INSTRUCTION:

Enter second line of new address

**ASK IF: MAddX = 1**

**MAdd3**

INTERVIEWER INSTRUCTION:

Enter third line of new address

**ASK IF: MAddX = 1**

**MPostCd**

INTERVIEWER INSTRUCTION:

Enter post code of new address

**ASK IF: MAddX = 1**

**MNwTel**

INTERVIEWER INSTRUCTION: Collect new or contact telephone number or enter '0' for 'none'

**ASK IF: Recall = 1, 3**

**Contad**

Is there a friend or relative we could contact who would be able to give a forwarding address (if you were to move somewhere else)?

1. Yes
2. No

**ASK IF: Contad = 1**

**ConName**

INTERVIEWER INSTRUCTION: Enter the name of the person

**ASK IF: Contad = 1**

**CRelat**

INTERVIEWER INSTRUCTION: Enter relationship

**ASK IF: Contad = 1**

**CAdd**

Is contact living at sampled address

1. Yes
2. No

**ASK IF: Contad = 1 AND CAdd = 2**

**CAdd1**

INTERVIEWER INSTRUCTION:  
Enter first line of contact address

**ASK IF: Contad = 1 AND CAdd = 2**

**CAdd2**

INTERVIEWER INSTRUCTION:  
Enter second line of contact address

**ASK IF: Contad = 1 AND CAdd = 2**

**CAdd3**

INTERVIEWER INSTRUCTION:  
Enter third line of contact address

**ASK IF: Contad = 1 AND CAdd = 2**

**CPstCd**

INTERVIEWER INSTRUCTION:  
Enter postcode of contact address

**ASK IF: Contad = 1 AND CAdd = 2**

**CNwTel**

INTERVIEWER INSTRUCTION:  
Collect contact telephone number or enter '0' for 'none'

**ASK IF: Recall = 2**

**RfReas**

INTERVIEWER INSTRUCTION: code main reason(s) for refusal to the follow-up interview.

1. Not interested
2. Taken too much time
3. Have done it once/once is enough
4. Questions are too repetitive
5. Current survey is too intrusive, objected to subject matter
6. Other

## Child and Young Person Questionnaire

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For children aged 11 to 16, the entire child interview required that ChldAg<sup>10</sup> >10, ChldNow<sup>11</sup> = 1, DK AND EntRat<sup>12</sup> = 1,3, EMPTY

For young people aged 17 to 19, the entire young person interview required that, ChldAg > 10, Chld17Now = 1, DK AND EntRat = 1,3, EMPTY

## Strengths and Difficulties Questionnaire

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### SDQIntr1

The full assessment covers many topics in detail, but before I zoom in on these details, I'd like you to fill in a brief questionnaire to give me an overall picture of your strengths and difficulties.

Please answer every item even if you are not 100% sure that your answer is right

### SDQ1

How well does each statement describe how you have been over the last 6 months?

I try to be nice to other people, I care about their feelings

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

### SDQ2

I am restless, I cannot stay still for long

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

### SDQ3

I get a lot of headaches, stomach aches or sickness

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

---

<sup>10</sup> Child age

<sup>11</sup> Do you want to interview the child or young person now? Response options for this question were (1) Yes (2) No – parent does not consent (3) No – child unavailable.

<sup>12</sup> INTERVIEWER - Thinking about <child name's> responses to the SDQ, will you continue with the whole interview? YOU SHOULD ONLY SAY 'NO' IF CHILD IS TOO DISABLED FOR INTERVIEW TO MAKE SENSE. IF YOU ARE UNSURE WHETHER THE REST OF THE INTERVIEW WILL APPLY YOU SHOULD SAY 'NOT SURE' AND CONTINUE. Response options for this question were (1) Yes, will do the whole interview (2) No, will only do a short interview (3) Not sure

**SDQ4**

I usually share with others (food, games, pens etc.)

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ5**

I get very angry and often lose my temper

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ6**

I am usually on my own, I generally play alone or keep to myself

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ7**

I usually do as I am told

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ8**

I worry a lot

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ9**

I am helpful if someone is hurt, upset or feeling ill

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ10**

I am constantly fidgeting or squirming

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ11**

I have one good friend or more

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ12**

I fight a lot. I can make other people do what I want

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ13**

I am often unhappy, down-hearted or tearful

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ14**

Other people my age generally like me

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ15**

I am easily distracted, I find it difficult to concentrate

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ16**

I am nervous in new situations. I easily lose confidence

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ17**

I am kind to younger children

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ18**

I am often accused of lying or cheating

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ19**

Other children or young people pick on me or bully me

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ20**

I often volunteer to help others (parents, teachers, children)

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ21**

I think before I do things

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ22**

I take things that are not mine from home, school or elsewhere

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ23**

I get on better with adults than with people of my own age

- 5. Not true
- 6. Somewhat true
- 7. Certainly true

**SDQ24**

I have many fears, I am easily scared

- 5. Not true
- 6. Somewhat true
- 7. Certainly true



**SDQ25**

I finish the work I'm doing, my attention is good

5. Not true
6. Somewhat true
7. Certainly true

**SDQ26**

Overall, do you think that you have difficulties in one or more of the following areas: emotions, concentration, behaviour or getting on with other people?

5. No
6. Yes: minor difficulties
7. Yes: definite difficulties
8. Yes: severe difficulties

**ASK IF: SDQ26 = 6, 7, 8**

**SDQ27**

How long have these difficulties been present?

5. Less than a month
6. One to five months
7. Six to eleven months
8. A year or more

**SDQ28**

Do the difficulties upset or distress you?

5. not at all
6. a little
7. a medium amount
8. or a great deal

**SDQ29**

Do the difficulties interfere with your everyday life in terms of ...your home life?

5. not at all
6. a little
7. a medium amount
8. or a great deal

**SDQ30**

Do the difficulties interfere with your everyday life in terms of ... your friendships?

5. not at all
6. a little
7. a medium amount
8. or a great deal

### **SDQ31**

Do the difficulties interfere with your everyday life in terms of your ...classroom learning?

5. not at all
6. a little
7. a medium amount
8. or a great deal

### **SDQ32**

Do the difficulties interfere with your everyday life in terms of your ...leisure activities?

5. not at all
6. a little
7. a medium amount
8. or a great deal

### **SDQ33**

Do the difficulties make it harder for those around you such as your family, friends and teachers?

5. not at all
6. a little
7. a medium amount
8. or a great deal

## **Development and Well-Being Assessment (DAWBA) Sections**

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The following sections of the Development and Well-Being Assessment were asked of children and young people. The disorder name is indicated in blue while the name of the DAWBA module is indicated underneath in bold.

### **Separation anxiety disorder**

#### **Attachment and worries about separation**

Most young people are particularly attached to a few key adults, looking to them for security and comfort, and turning to them when upset or hurt.

These questions were asked of children and young people aged 11 to 17 years old. For information on these questions, visit <http://dawba.info/>

### **Specific phobia**

#### **Fear of specific things or situations**

This section of the interview is about some things or situations that young people are often scared of, even though they aren't really a danger to them.

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Social phobia**

### **Fear of social situations**

This section is interested in things the child is particularly afraid of social situations. This is as compared with other young people of their age, and is not counting the occasional 'off day' or ordinary shyness.

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Panic disorder, agoraphobia**

### **Panic attacks or fears of crowds, public places, open spaces etc**

Many young people have times when they get very anxious or worked up about silly little things, but some young people get severe panics that come out of the blue - they just don't seem to have any trigger at all.

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Post-traumatic stress disorder**

### **Stress after a very frightening event**

The section is about events or situations that are exceptionally stressful, and that would really upset almost anyone. For example, being caught in a burning house, being abused, seeing you being mugged at gunpoint or hearing that a best friend had died in a car crash.

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Obsessive compulsive disorder**

### **Obsessions and compulsions**

Many children and young people have some rituals or superstitions, e.g. not stepping on the cracks in the pavement, having to go through a special goodnight ritual, having to wear lucky clothes for exams, or needing a lucky mascot for school sports matches. It is also common for young people to go through phases when they seem obsessed by one particular subject or activity, e.g. cars, a pop group, a football team. But what we want to know is whether the child has any rituals or obsessions that go beyond this.

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Body dysmorphic disorder

### Worry about physical appearance

Most people are concerned about how they look. This typically varies from time to time, e.g. being worse if they develop a bad spot or are about to star in the school play. Some people have worries about their appearance that go beyond this, filling their thoughts, taking up a lot of their time and really upsetting them.

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Generalised anxiety disorder

### Worrying a lot about many different things

This section is about a general tendency to worry. Some specific types of worry are covered in another section, e.g. worries about being separated from key 'attachment figures' such as parents.

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Depressive disorder

### Depression

This section is about mood. Questions were also asked about suicide and self-harm:

- In the last 4 weeks, did you talk about harming yourself or killing yourself?
- In the last 4 weeks, did you try to harm yourself or kill yourself?
- Over the whole of their lifetime, has you ever tried to harm yourself or kill yourself?

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Disruptive mood dysregulation disorder

### Irritability, temper & anger control

These questions were asked of children and young people aged 11 to 17 years old. For information on these questions, visit <http://dawba.info/>

## Hyperactivity disorder

### Hyperactivity and attention problems

This section of the interview is about the child's level of activity and concentration over the last 6 months. Nearly all young people are overactive or lose concentration at times, but what we would like to know is how the child compares with other young people of their own age. We are interested in how they are usually - not on the occasional 'off day'.

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Eating disorders

### Dieting, bingeing and concern about body shape

These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Tic disorder

### Tics

These questions were asked of children and young people aged 17 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Other less common disorders

### Other concerns

This next section is about a variety of different aspects of the child's behaviour and development. These questions were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Social Support

---

### Closet

The next few questions are about people you feel close to, including relatives and friends

### Numrel

How many relatives do you live with?

PLEASE INCLUDE CHILD AND ADULT RELATIVES

Enter a numeric value between 0 and 20

### ASK IF: Numrel > 0

### Liverel

How many relatives who live with you do you feel close to?

1. None
2. One
3. Two or more

### Othrel

How many relatives who do not live with you do you feel close to?

1. None
2. One
3. Two or more

### Friend

How many friends would you describe as close, or good, friends?

1. None
2. One

3. Two or more

**ThinkInt**

I would now like you to think about your family and friends (by family I mean those who live elsewhere as well as those who live with you). Here are some comments that people have made about their family and friends. Please say how true you think they are for you.

**Happy**

There are people I know who do things to make me happy.

- 5. Not true
- 6. Partly true
- 7. Certainly true

**Loved**

There are people I know who make me feel loved.

- 5. Not true
- 6. Partly true
- 7. Certainly true

**Rely**

There are people I know who can be relied on no matter what happens.

- 5. Not true
- 6. Partly true
- 7. Certainly true

**Care**

There are people I know who would see that I am taken care of if I need to be.

- 5. Not true
- 6. Partly true
- 7. Certainly true

**Accept**

There are people I know who accept me just as I am.

- 5. Not true
- 6. Partly true
- 7. Certainly true

**Feellmp**

There are people I know who make me feel an important part of their lives.

- 5. Not true
- 6. Partly true
- 7. Certainly true

## Support

There are people I know who give me support and encouragement.

5. Not true
6. Partly true
7. Certainly true

## Social Life

---

### YIntro

I am now going to ask you some questions about your social life, social media and your experience of the internet. As before there are NO right or wrong answers to ANY of the questions.

All of the young people we talk to will give different answers and I am only interested in knowing what YOU think about these things?

### YPartA

In the last year, that is, since <DATE>, have you taken part in any of these clubs or groups AT YOUR SCHOOL? This could mean in school hours or after school or in the school holidays.

INCLUDES PREVIOUS SCHOOL IF CHANGED SCHOOLS WITHIN THE LAST YEAR

CODE ALL THAT APPLY

1. School holiday playschemes
2. Environmental clubs/groups
3. Sports clubs/teams
4. Political clubs/groups
5. Debating clubs/groups
6. School/student councils
7. Computer clubs/groups
8. Art, drama, dance or music clubs/groups
9. Human rights groups
10. Religious groups or organisations
11. Youth clubs
12. Student Union
13. After-school clubs
14. Groups for extra teaching or special lessons
15. Animal (welfare) groups
16. Voluntary groups helping people
17. Safety, First Aid groups
18. Local community or neighbourhood groups
19. NONE Of THESE
20. Not applicable – not at school

### **YIntro7B**

Now I'd like you to think about any groups, clubs or organisations that you've been involved with OUTSIDE OF SCHOOL during the last 12 months. I mean things you've done in the evenings, or at weekends or in the school holidays.

CHECK THAT THEY DON'T REPEAT ANYTHING DONE AT THEIR SCHOOL

### **YPartB**

In the last year, that is, since <DATE>, have you taken part in any of these clubs or groups DURING THE EVENINGS OR WEEKENDS OR SCHOOL HOLIDAYS (apart from the things you told me you had done at your school).

Remember, if there are any that you don't understand I can help you with some examples.

CODE ALL THAT APPLY

1. School holiday playschemes
2. Environmental clubs/groups
3. Sports clubs/teams
4. Political clubs/groups
5. Debating clubs/groups
6. Computer clubs/groups
7. Art, drama, dance or music clubs/groups
8. Human rights groups
9. Religious groups or organisations
10. Youth clubs
11. Animal (welfare) groups
12. Voluntary groups helping people
13. Safety, First Aid groups
14. Local community or neighbourhood groups
15. OTHER CLUBS/GROUPS
16. NONE OF THESE

**ASK IF: YPartA = 19 or YPartA = 20 or YPartB = 16**

### **YDomor**

Do any of these things stop you from taking part in groups IN YOUR FREE TIME?

CODE ALL THAT APPLY

1. I have no way of getting to the clubs or groups
2. There are no good groups or clubs locally
3. I can't afford to join clubs
4. I wouldn't feel safe travelling to and from clubs
5. There are no clubs or groups that I am interested in
6. I'm too busy
7. I don't want to
8. I don't have time after my homework
9. I am not allowed
10. OTHER REASONS
11. None of these



**ASK IF: ChldAg = 11 to 15**

**Carer**

Do you regularly look after or help others, such as family members, friends, or neighbours, because of their long-term physical or mental health problems or because of their old age?

1. Yes
2. No

**ASK IF: ChldAg >=16**

**Carer16**

Apart from anything you do as part of paid employment; do you regularly look after or help others, such as family members, friends, or neighbours, because of their long-term physical or mental health problems or because of their old age?

1. Yes
2. No

## Social Media

---

**ASK IF: ChldAg <= 19**

**SMIntro**

Now I would like to ask a few questions about Social Media

**SMUse**

Do you use any of the following social media sites or apps?

1. Ask .FM
2. Bebo
3. Blogger
4. Facebook
5. Flickr
6. Google Hangouts and/or Google Plus (Google+)
7. Hi5
8. Instagram
9. Jabble
10. MySpace
11. Piczo
12. Pinterest
13. SnapChat
14. Tumblr
15. Twitter
16. Vimeo
17. Vine
18. WhatsApp
19. YouTube
20. Skype

21. Musical.ly<sup>13</sup>
22. Other
23. I do not use social media apps or sites

**ASK IF: SMUse = 22**

**SmUseOth**

Please describe what this other social media site or app is

**ASK IF: SMUse = 1 to 20 OR SmUseOth = TRUE**

**SMAct**

Which of the following activities do you use social media sites and apps for?

1. Sending messages to people
2. Sharing photos or videos of yourself
3. Sharing photos or videos of other things
4. Sharing quizzes and polls
5. Looking at photos or videos posted by other people
6. Listening to music
7. Playing games
8. Finding out about things you are interested in
9. Expressing your views about things (e.g. by blogging or posting content)
10. Arranging to meet friends
11. Creating events
12. Meeting new people online
13. Meeting new people face to face

**ASK IF: SMUse = 1 to 20, 22 AND SMAct ≠ 7**

**SMFreqofUse**

How often do you use social media sites or apps?

1. Daily or most days
2. A few times a week
3. Once a week
4. A few times a month
5. Once a month
6. Less often than once a month

**ASK IF: SMUse = 1 to 20, 22 AND SMAct = 7**

**SMFreqofUseG**

Now thinking only about playing games, how often do you use social media sites or apps?

1. Daily or most days
2. A few times a week

---

<sup>13</sup> An error was made in the routing for the rest of the questions in the social media block - routing should have also included 'SMUse = 21'. This means that children and young people who responded to question SMUse that they only used Musical.ly were not asked the rest of the social media questions.

3. Once a week
4. A few times a month
5. Once a month
6. Less often than once a month

**ASK IF: SMUse = 1 to 20, 22 AND SMAct ≠ 7 AND SMFREQofUse = 1**

**SMTimesaDayWeekend**

How many times a day do you use or check social media sites or apps at weekends?

1. Once or twice a day
2. Three or four times a day
3. Five or six times a day
4. Seven or more times a day

**ASK IF: SMUse = 1 to 20, 22 AND SMAct = 7 AND SMFREQofUseG = 1**

**SMTimesaDayWeekendG**

Now thinking only about playing games, how many times a day do you use or check social media sites or apps at weekends?

1. Once or twice a day
2. Three or four times a day
3. Five or six times a day
4. Seven or more times a day

**ASK IF: SMUse = 1 to 20, 22 AND SMAct ≠ 7 AND SMFREQofUse = 1**

**SMTimesaDayWeekday**

How many times a day do you use or check social media sites or apps on weekdays?

1. Once or twice a day
2. Three or four times a day
3. Five or six times a day
4. Seven or more times a day

**ASK IF: SMUse = 1 to 20, 22 AND SMAct = 7 AND SMFREQofUseG = 1**

**SMTimesaDayWeekdayG**

Now thinking only about playing games, how many times a day do you use or check social media sites or apps on weekdays?

1. Once or twice a day
2. Three or four times a day
3. Five or six times a day
4. Seven or more times a day

**ASK IF: SMUse = 1 to 20, 22 AND SMAct ≠ 7 AND SMFreqofUse = 1<sup>14</sup>**

**SMTIMEspentS**

When you use social media sites or apps how much time in total do you spend using them on a typical school day?

1. Less than 30 minutes
2. More than 30 minutes but less than an hour
3. One to two hours
4. Two to three hours
5. Three to four hours
6. Four to five hours
7. Five to six hours
8. Six to seven hours
9. More than seven hours

**ASK IF: SMUse = 1 to 20, 22 AND SMAct = 7 AND SMFreqofUseG = 1<sup>15</sup>**

**SMTIMEspentSG**

Now thinking only about playing games, when you use social media sites or apps how much time in total do you spend using them on a typical school day?

1. Less than 30 minutes
2. More than 30 minutes but less than an hour
3. One to two hours
4. Two to three hours
5. Three to four hours
6. Four to five hours
7. Five to six hours
8. Six to seven hours
9. More than seven hours

**ASK IF: SMUse = 1 to 20, 22 AND SMAct ≠ 7 AND SMFreqofUse = 1<sup>16</sup>**

**SMTIMEspentW**

When you use social media sites or apps how much time in total do you spend using them on a typical weekend or holiday day?

1. Less than 30 minutes
2. More than 30 minutes but less than an hour
3. One to two hours

---

<sup>14</sup> An error was made in the routing for this question - routing should not have included 'SMFreqofUse = 1'. This means that this question was only asked of children and young people who responded to question SMFreqofUse that they used social media sites daily or most days instead of all children and young people who reported using social media sites.

<sup>15</sup> An error was made in the routing for this question - routing should not have included 'SMFreqofUseG = 1'. This means that this question was only asked of children and young people who responded to question SMFreqofUseG that they played games on social media sites daily or most days instead of all children and young people who reported using social media sites to play games.

<sup>16</sup> An error was made in the routing for this question - routing should not have included 'SMFreqofUse = 1'. This means that this question was only asked of children and young people who responded to question SMFreqofUse that they used social media sites daily or most days instead of all children and young people who reported using social media sites.

4. Two to three hours
5. Three to four hours
6. Four to five hours
7. Five to six hours
8. Six to seven hours
9. More than seven hours

**ASK IF: SMUse = 1 to 20, 22 AND SMAct = 7 AND SMFreqofUseG = 1<sup>17</sup>**

**SMTIMEspentWG**

Now thinking only about playing games, when you use social media sites or apps how much time in total do you spend using them on a typical weekend or holiday day?

1. Less than 30 minutes
2. More than 30 minutes but less than an hour
3. One to two hours
4. Two to three hours
5. Three to four hours
6. Four to five hours
7. Five to six hours
8. Six to seven hours
9. More than seven hours

**ASK IF: SMUse = 1 to 20, 22 AND SMAct ≠ 7 AND SMFreqofUse = 1<sup>18</sup>**

**SMWhenUse**

When do you use social media sites or apps?

1. Before school or college
2. During school or college
3. After school or college before 8pm
4. After school or college after 8pm
5. At weekends
6. During school holidays

---

<sup>17</sup> An error was made in the routing for this question - routing should not have included 'SMFreqofUseG = 1'. This means that this question was only asked of children and young people who responded to question SMFreqofUseG that they played games on social media sites daily or most days instead of all children and young people who reported using social media sites to play games.

<sup>18</sup> An error was made in the routing for this question - routing should not have included 'SMFreqofUse = 1'. This means that this question was only asked of children and young people who responded to question SMFreqofUse that they used social media sites daily or most days instead of all children and young people who reported using social media sites.

**ASK IF: SMUse = 1 to 20, 22 AND SMAct = 7 AND SMFreqofUseG = 1<sup>19</sup>**

**SMWhenUseG**

Now thinking only about playing games, when do you use social media sites or apps?

1. Before school or college
2. During school or college
3. After school or college before 8pm
4. After school or college after 8pm
5. At weekends
6. During school holidays

**ASK IF: SMUse = 1 to 20, 22 OR SMUseoth = FALSE**

**OfcomQC19**

Thinking about the social media sites and apps you use do you have your own profile or account?

1. Yes
2. No

**ASK IF: SMUse = 1 to 20, 22 AND OfcomQC19 = 1**

**SMConnect**

Thinking across all the social media sites or apps you use who do you share your profile with?

1. Friends that I have met in person
2. Family
3. Friends of friends that I have met in person
4. Friends of friends that I have only spoken to online
5. People I have not met in person and my friends do not know
6. Work colleagues
7. Other people
8. None of these

**ASK IF: SMAct = 1 AND SMUse = 1 to 20, 22**

**SMMsg**

Thinking across all the social media sites or apps you use who do you message?

1. Friends that I have met in person
2. Family
3. Friends of friends that I have met in person
4. Friends of friends that I have only spoken to online
5. People I have not met in person and my friends do not know
6. Work colleagues
7. Other people
8. None of these

---

<sup>19</sup> An error was made in the routing for this question - routing should not have included 'SMFreqofUseG = 1'. This means that this question was only asked of children and young people who responded to question SMFreqofUseG that they played games on social media sites daily or most days instead of all children and young people who reported using social media sites to play games.

**ASK IF: SMAct = 2 AND SMUse = 1 to 20, 22**

**SMPhto**

Thinking across all the social media sites or apps who do you share photos or yourself with?

1. Friends that I have met in person
2. Family
3. Friends of friends that I have met in person
4. Friends of friends that I have only spoken to online
5. People I have not met in person and my friends do not know
6. Work colleagues
7. Other people
8. None of these

**ASK IF: SMUse = 1 to 20, 22**

Intro: To what extent do you agree or disagree with the following statements

**SMTrueReflec**

My social media accounts are a true reflection of myself...

1. Disagree a lot
2. Disagree a little
3. Neither agree nor disagree
4. Agree a little
5. Agree a lot
6. Don't know

**SMCompOthers**

I compare myself to others on social media sites and apps...

1. Disagree a lot
2. Disagree a little
3. Neither agree nor disagree
4. Agree a little
5. Agree a lot
6. Don't know

**SMHonest**

I can be honest with people on social media sites and apps about how I am feeling...

1. Disagree a lot
2. Disagree a little
3. Neither agree nor disagree
4. Agree a little
5. Agree a lot
6. Don't know

### **SMFriends**

I am happy with the number of friends I have on social media...

1. Disagree a lot
2. Disagree a little
3. Neither agree nor disagree
4. Agree a little
5. Agree a lot
6. Don't know

### **SMLikes**

I monitor the amount of likes, comments or shares I get on social media...

1. Disagree a lot
2. Disagree a little
3. Neither agree nor disagree
4. Agree a little
5. Agree a lot
6. Don't know

### **SMFriendMood**

The number of likes, comments or shares I get on social media has an impact on my mood.

1. Disagree a lot
2. Disagree a little
3. Neither agree nor disagree
4. Agree a little
5. Agree a lot
6. Don't know

### **SMoreTime**

In general, I spend more time on social media than I mean to...

1. Disagree a lot
2. Disagree a little
3. Neither agree nor disagree
4. Agree a little
5. Agree a lot
6. Don't know



## Cyber Bullying

---

### ASK ALL

READ OUT: Now I will ask you a few questions about some unpleasant experiences you might have had online, including on social media sites or apps. Please remember that everything we talk about in this interview is confidential, that is, I will not discuss it with anybody else.

Have you experienced any of the following things in the past year...

### CyberbullyQ1

Have you received unwanted or nasty emails, texts or messages which were meant to hurt you?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

### CyberbullyQ2

Has someone posted nasty things about you on social media sites or apps in order to hurt you?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

### CyberbullyQ3

Have you been ignored or left out of things on social media on purpose?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

### CyberbullyQ4

Has someone posted inappropriate pictures of you on a social media site or app without permission with the intention of hurting you?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

**ASK IF: CyberbullyQ1 = 1 OR CyberbullyQ2 = 1 OR CyberbullyQ3 = 1 OR CyberbullyQ4 = 1**

### CyberbullyWhoQ5

You said that you had experienced something unpleasant on a social media app or site in the last year. Who has done this to you?

1. My sibling(s)
2. Friends
3. People in my school, college or work place

4. People I don't know personally
5. Other people I know that are not in my school, college or work place
6. Others (please specify)

**ASK IF: CyberbullyWhoQ5 = 6**

**CBQ5WhoOthr**

INTERVIEWER INSTRUCTION – Record specified people

**ASK IF: CyberbullyQ1 = 1 OR CyberbullyQ2 = 1 OR CyberbullyQ3 = 1 OR**

**Cyberbully Q4 = 1**

**CyberbullyFreqQ6**

In the past year how often have you experienced unpleasant things on a social media app or site?

1. It has happened once or twice over the last year
2. 2 or 3 times in the past three months
3. 2 or 3 times a month
4. 2 or 3 times a week
5. Several times a week
6. Several times a day

**ASK ALL**

**CyberOther**

In the past year have you done any of the following things to other people?

1. Sent unwanted or nasty emails, texts or messages to someone in order to hurt them
2. Posted nasty things about someone on a social media app or site in order to hurt them
3. Ignored or left someone out on purpose on social media
4. Posted inappropriate pictures of someone online without their permission with the intention of hurting them
5. None of these

## **Bullying**

---

**BullyIntro**

INTERVIEWER INSTRUCTION – READ OUT: Now I will ask you a few questions about some unpleasant experiences you might have had at school, college, work or at home.

Please remember that everything we talk about in this interview is confidential, that is, I will not discuss it with anybody else.

Have you experienced any of the following things in the past year?

**ASK ALL**

**BullyQ1**

Were you hit, kicked or pushed?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

**BullyQ2**

Have you had your belongings stolen or destroyed by others in order to hurt you?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

**BullyQ3**

Were you called mean names, made fun of or teased in a hurtful way?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

**BullyQ4**

Were you ignored or left out of things on purpose?

1. Yes
2. No
3. SPONTANEOUS ONLY – Don't know

**ASK IF: BullyQ1 = 1 OR Bully Q2 = 1 OR BullyQ3 = 1 OR BullyQ4 = 1**

**BullyWhoQ5**

You said that you had unpleasant experiences at school, college, work or at home in the last year. Who has done this to you?

1. My sibling(s)
2. Friends
3. People in my school, college or work place
4. People I don't know personally
5. Other people I know that are not in my school, college or work place
6. Others (please specify)

**ASK IF: BullyWhoQ5 = 6**

**BOWhoOthr**

Record specified people

**ASK IF: BullyQ1 = 1 OR Bully Q2 = 1 OR BullyQ3 = 1 OR BullyQ4 = 1  
BullyFreqQ6**

In the past year how often did you experience unpleasant things at school, college, work or at home?

1. It has happened once or twice over the last year
2. 2 or 3 times in the past three months
3. 2 or 3 times a month
4. 2 or 3 times a week
5. Several times a week
6. Several times a day

**ASK ALL  
BullyOther**

In the past year have you done any of the following things to other people at school, college, work or at home?

1. Hit, kicked or pushed someone
2. Stolen or destroyed the belongings of someone in order to hurt them
3. Called someone mean names, made fun or teased someone in a hurtful way
4. Ignored or left someone out of things on purpose
5. None of these

## School attendance and exclusion

---

**ASK IF: TranSDQ = 2 AND ((ChldNow=1 or DK) or (Chld17Now=1 or DK) and (tranSDQ=2, DK) and EntRat = 1 or 3**

**YPQIntr**

The next few questions are about school attendance and exclusion, and service use.  
PRESS <ENTER> TO CONTINUE

**YPQ1**

How many different primary and secondary schools have you ever attended, please include your current school? (Not including nurseries or pre-school).  
Enter a numeric value between 0 and 50

**YPQ2**

Are you in full time education?

1. Yes
2. No

**ASK IF: YPQ2 = 1**

**YPQ3**

Over the last year have you had one or more teachers that you found very difficult to work with?

1. Yes
2. No

**ASK IF: YPQ2 = 1 and YPQ3 = 1**

**YPQ4a**

Did your difficult relationship with this/these teacher(s) interfere with:  
Your learning?

Interviewer instructions: If asked, attendance at school also relates to avoiding/walking out of lessons at school due to difficult relationship with this/these teacher(s).

5. No
6. Only a little
7. Quite a lot
8. A great deal

**ASK IF: YPQ2 = 1 and YPQ3 = 1**

**YPQ4b**

Did your difficult relationship with this/these teacher (s) interfere with: Your attendance at school?

Interviewer instructions: If asked, attendance at school also relates to avoiding/walking out of lessons at school due to difficult relationship with this/these teacher(s).

5. No
6. Only a little
7. Quite a lot
8. A great deal

**ASK IF: YPQ2 = 1 and YPQ3 = 1**

**YPQ4c**

Did your difficult relationship with this/these teacher(s) interfere with: Did it upset or distress you?

Interviewer instructions: If asked, attendance at school also relates to avoiding/walking out of lessons at school due to difficult relationship with this/these teacher(s).

1. No
2. Only a little
3. Quite a lot
4. A great deal

**YPQ5**

Have you ever been home schooled?

1. Yes
2. No

**ASK IF: YPQ5 = 1**

**YPQ6s**

Between what ages were you home schooled? (Record age started)

Enter a numeric value between 0 and 30

**ASK IF: YPQ5 = 1**

**YPQ6e**

Between what ages were you home schooled? (Record age ended)

Enter a numeric value between 0 and 30

**YPQ7**

Have you ever been excluded from primary school?

1. Yes
2. No

**ASK IF: YPQ7 = 1**

**YPQ8**

How many times did you have a permanent exclusion / expulsion from primary school?

Interviewer instructions: permanent exclusion = a child is removed from the school roll and asked to leave the school as a result of their behaviour

Enter a numeric value between 0 and 50

**ASK IF: YPQ7 = 1**

**YPQ9**

How many times did you have a fixed term / temporary exclusion / suspension from primary school?

Enter a numeric value between 0 and 50

**YPQ10**

Have you ever had a managed move (where the school insists and organises the change) between primary schools?

Interviewer instructions: Managed move = a child is moved from one school to another as a result of their behaviour – their parents may be involved but have no choice about their child leaving the school – the school initiates and insists on the move

1. Yes
2. No

**ASK IF: YPQ10 = 1**

**YPQ11**

How many times did you have a managed move between primary school?

Enter a numeric value between 0 and 50

**YPQ12**

Have you ever been sent home for behaviour from primary school without being excluded?

1. Yes
2. No

**ASK IF: YPQ12 = 1**

**YPQ13**

How many times were you sent home from primary school without being excluded?  
Enter a numeric value between 0 and 50

**YPQ14**

Have you ever been excluded from secondary / middle or high school or college?

1. Yes
2. No

**ASK IF: YPQ14 = 1**

**YPQ15**

How many times did you have a permanent exclusion / expulsion from secondary / middle/ high school or college?

Interviewer instructions: Permanent exclusion = a child is removed from the school roll and asked to leave the school as a result of their behaviour

Enter a numeric value between 0 and 50

**ASK IF: YPQ14 = 1**

**YPQ16**

How many times did you have a fixed term / temporary exclusion / suspension from secondary / middle/ high school or college?

Interviewer instructions: Fixed term exclusions = a child is asked to remain away from the school for a specified number of time (usually a few days) as a punishment for their behaviour but they remain on the school roll.

Enter a numeric value between 0 and 50

**YPQ17**

Have you ever had a managed move (where the school insists and organises the change) between secondary / middle/ high schools or sixth form colleges?

Interviewer instructions: Managed move = a child is moved from one school to another as a result of their behaviour – their parents may be involved but have no choice about their child leaving the school – the school initiates and insists on the move

1. Yes
2. No

**YPQ18**

Have you ever been sent home for behaviour from secondary / middle, high school or college without being excluded?

1. Yes
2. No

**ASK IF: YPQ7 = 1 OR YPQ14 = 1**

**YPQ19**

Was any support from school or educational specialist offered to you as a result of their exclusion(s) from school?

1. Yes
2. No

**ASK IF: YPQ19 = 1**

**YPQ20**

Were you offered any of the following:

CODE ALL THAT APPLY

1. Assessment by the Special Educational Needs Coordinator
2. Assessment by an educational specialist from outside school like an educational psychologist or behavioural support teacher
3. Referral to Child and Adolescent Mental Health Services
4. Time with a member of school staff in the same school
5. Time in a special unit within the same school
6. Attend a new special school or special unit outside school
7. Home tutoring
8. No additional support was provided

**YPQ21**

Have you ever spent any time being “looked after” by social services?

1. Yes
2. No

**ASK IF: YPQ21 = 1**

**YPQ22**

How many times have you been looked after?

Enter a numeric value between 0 and 50

**ASK IF: YPQ21 = 1**

**YPQ23**

Did you move schools as a result of being looked after?

1. Yes
2. No



**ASK IF: YPQ23 = 1**

**YPQ24**

How often did you move schools as a result of being looked after?

Enter a numeric value between 0 and 50

## **Educational Attainment**

---

**ASK IF: ChldAg >= 15**

**EduIntr**

I am now going to ask you about qualifications that you have or are currently studying for.

**CAnyQual**

Have you got any qualifications of any sort?

1. Yes
2. No

**ASK IF: CAnyQual = 1**

**CHiQuals**

Please look at this card and tell me whether you have passed any of the qualifications listed.

RECORD ALL THAT APPLY

1. NVQ Level 1/Foundation level GNVQ
2. NVQ Level 2/Intermediate level GNVQ
3. NVQ Level 3/Advanced level GNVQ
4. NVQ Level 4
5. NVQ Level 5
6. City and Guilds Full Technological Certificate
7. City and Guilds Advanced/Final Level
8. City and Guilds Craft/Ordinary Level
9. ONC/OND/BEC/TEC/BTEC not higher
10. HNC/HND, BEC/TEC Higher, BTEC Higher
11. GCSEs
12. A-levels or equivalent
13. AS level
14. Scottish Higher grade, Scottish Advanced Higher, CSYS, A level, AS Level, Advanced Senior Certificate or equivalent
15. SCOTEC Higher
16. Basic Skills in literacy or numeracy
17. No qualifications

**cChkQuals**

Do you have any qualifications not listed on this card?

1. Yes
2. No

**ASK IF: CChkQuals = 1**

**cOthQual**

What other qualification do you have?

INTERVIEWER INSTRUCTIONS: Check that this qualification cannot be coded at chiquals – if not please enter a short description or title

Enter a text of at most 80 characters

**ASK IF: CAnyQual = 1 AND CHiQuals ≠ NoQuals**

**AgeQual**

How old were you when you gained your most recent qualification?

INTERVIEWER INSTRUCTIONS: Please enter age in years

Enter a numeric value between 11 and 19

**ASK IF: ChldAg >= 15**

**QualStudy**

Are you currently studying for any of these qualifications?

RECORD ALL THAT APPLY

1. Degree (e.g. BA, BSc, MA)
2. Higher Education but below degree level (e.g. HND, HNC etc)
3. A-levels or equivalent
4. AS level
5. NVQ Level 1/Foundation level GNVQ
6. NVQ Level 2/Intermediate level GNVQ
7. NVQ Level 3/Advanced level GNVQ
8. NVQ Level 4
9. NVQ Level 5
10. City and Guilds Full Technological Certificate
11. City and Guilds Advanced/Final Level
12. City and Guilds Craft/Ordinary Level
13. ONC/OND/BEC/TEC/BTEC not higher
14. HNC/HND, BEC/TEC Higher, BTEC Higher
15. GCSEs
16. Basic Skills in literacy or numeracy
17. Other qualifications
18. Not studying for any qualifications at the moment

**ASK IF: QualStudy = 17**

**QualStudyO**

What other qualification(s) are you currently studying for?

Interviewer instructions: CHECK THAT THIS QUALIFICATION CANNOT BE CODED AT QualStudy – IF NOT PLEASE ENTER A SHORT DESCRIPTION OR TITLE

Enter a text of at most 80 characters

### **CSchLeft**

Are you still in continuous full-time education at school, college or university?

1. Yes
2. No

**ASK IF: CSchLeft = 2 OR YPQ2 = 2**

### **WhyLeft**

You said you are no longer in full time education. Why did you leave school?

Interviewer instructions: PLEASE ENTER A BRIEF DESCRIPTION

Press INSERT to insert text

### **WhenLeft**

How old were you when you left full-time education?

Enter a numeric value between 1 and 19

### **WhatNowB**

What do you do now?

1. Part-time university
2. Part-time college
3. Working
4. Apprenticeship
5. NEET (not in education, employment or training)
6. Other

**ASK IF: WhatNow = 6**

### **OthNow**

What are you doing now?

Press INSERT to insert text

### **HowSch1**

Have you ever changed schools (excluding the normal transitions e.g. from infant to junior school or primary to secondary school)?

1. Yes
2. No

**ASK IF: HowSch1 = 1**

### **HowSch2**

How many times have you changed school, other than the normal transitions?

DO NOT COUNT PRE-SCHOOL i.e. EDUCATION BEFORE THE AGE OF FIVE YEARS.

DO NOT COUNT SCHOOL CHANGES DUE TO HOUSE MOVES.

Enter a numeric value between 1 and 50

**ASK IF: Chldag > 16**

**ArmFYPEv**

Has either of your parents/legal guardians ever served in the UK Regular Armed Forces or in the UK Reserve Armed Forces?

1. Yes – as a Regular
2. Yes – as a Reservist
3. No

**ASK IF: ArmFYPEv ≠ 3**

**ArmFYPCur**

Is either you your parents/legal guardians currently serving in the UK Regular Armed Forces or in the UK Reserve Armed Forces

1. Yes – as a Regular
2. Yes – as a Reservist
3. No

## Self-Esteem

---

**CSCIntr**

I would now like you to take the computer and answer the next set of questions yourself

**ChldSc**

Interviewer instructions: Respondents should self-complete. Encourage the child to complete this section themselves. If absolutely necessary administer as an interview

1. Complete self-completion by respondent
2. Section read and entered by interviewer
3. LAST RESORT ONLY: child does not want to complete section

**ASK IF: ChldSc = 1, 2**

**SEIntro**

The next few statements are dealing with your general feelings about yourself.

**SE1**

On the whole I am satisfied with myself

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

**SE2**

At times, I think I am no good at all

1. Strongly Agree
2. Agree
3. Disagree

4. Strongly Disagree

**SE3**

I feel that I have a number of good qualities

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

**SE4**

I am able to do things as well as most other people

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

**SE5**

I feel I do not have much to be proud of

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

**SE6**

I certainly feel useless at times

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

**SE7**

I feel that I'm a person of worth, at least on an equal plane with others

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

**SE8**

I wish I could have more respect for myself

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

### **SE9**

All in all, I am inclined to feel that I am a failure

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

### **SE10**

I take a positive attitude toward myself

1. Strongly Agree
2. Agree
3. Disagree
4. Strongly Disagree

## **Strengths**

---

While other sections of the interview focus mainly on possible difficulties and problems, this section allows us to find out more about the child's strengths and good points.

These questions were part of the DAWBA, and were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## **Difficult and Troublesome Behaviours**

---

This next section of the interview is about behaviour. Nearly all young people are difficult or troublesome at times – not doing what they are told, being irritable or annoying, having temper outbursts, and so on. What we want to know is how the child compares with other young people of the same age. We are interested in how they are usually and not just on occasional 'off days'.

These questions were part of the DAWBA, and were asked of children and young people aged 11 to 19 years old. For information on these questions, visit <http://dawba.info/>

## Smoking

---

### SmkIntro

Here are some questions about smoking

#### C3E1

Have you ever tried smoking a cigarette, even if it was only a puff or two?

PRESS 1 FOR 'NO' AND 2 FOR 'YES'

1. No
2. Yes

#### C3E2

Now read all the following statements carefully and type in the number next to the one which best describes you.

1. I have never smoked a cigarette
2. I have only smoked a cigarette once or twice
3. I used to smoke sometimes but I never smoke a cigarette now
4. I sometimes smoke cigarettes but I don't smoke every week
5. I usually smoke between –one and six cigarettes a week
6. I usually smoke more than six cigarettes a week

**ASK IF: C3E2 = 5, 6**

#### C3E3b

How old were you when you started smoking at least one cigarette a week?

PLEASE TYPE IN YOUR AGE IN YEARS AND THEN <ENTER>

Enter a numeric value between 0 and 19

#### ECigUse

Have you ever used/tried electronic cigarettes (e-cigarettes)?

1. I have never tried electronic cigarettes
2. I have used electronic cigarettes only once or twice
3. I used to use electronic cigarettes but I don't now
4. I sometimes use electronic cigarettes, but don't use them every week
5. I use electronic cigarettes regularly, once a week or more

#### ToBProds

Have you ever used/tried other tobacco products (i.e. Shisha pipe, hookah, hubble-bubble, waterpipe, etc.)?

1. I have never tried other tobacco products
2. I have used other tobacco products only once or twice
3. I used to use other tobacco products but don't now
4. I sometimes use other tobacco products, but don't use them every week
5. I use other tobacco products regularly, once a week or more

**ASK IF: C3E2 = 6**

**C3E6**

Is smoking (cigarettes, e-cigarettes or other tobacco products) getting in the way of things you would really like to do? (e.g. by using money you'd rather have for other things)

PRESS 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

**ASK IF: C3E2 = 6**

**C3E7**

Do you have a really strong need for cigarettes/e-cigarettes/other tobacco products to get through the day?

PRESS 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

**ASK IF: C3E2 = 6**

**C3E8**

Do you get into trouble as a result of smoking (cigarettes, e-cigarettes or other tobacco products)?

(e.g. trouble at school, at home, starting fires)

PRESS 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

## Drinking

---

**DrnkIntr**

Now there are some questions about drinking

**C3F1**

Have you ever had a proper alcoholic drink – a whole drink not just a sip?

PLEASE DO NOT INCLUDE DRINKS LABELLED LOW ALCOHOL

PRESS 1 for 'NO' or 2 for 'YES'

1. No
2. Yes

**ASK IF: C3F1 = 2**

**C3Fage**

How old were you when you had your first proper alcoholic drink?

PLEASE TYPE IN YOUR AGE IN YEARS AND THEN PRESS <ENTER>

Enter a numeric value between 1 and 20



**ASK IF: C3F1 = 2**

**C3F2**

How often do you usually have an alcoholic drink?

READ THROUGH THE ANSWERS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. Almost every day
2. About twice a week
3. About once a week
4. About once a fortnight
5. About once a month
6. Only a few times a year
7. I never drink alcohol

**ASK IF: C3F1 = 2**

**EvDrunk**

Have you ever been drunk?

1. No
2. Yes

**ASK IF: C3F1 = 2 AND EvDrunk = 2**

**AgeDrunk**

How old were when you first got drunk?

Enter a numeric value between 0 and 19

**Drunk4wks**

Have you been drunk in the last 4 weeks?

1. No
2. Yes

**ASK IF: C3F1 = 2 AND EvDrunk = 2 AND Drunk4wks = 2**

**Times4wks**

How many times have you been drunk in the last 4 weeks?

Enter a numeric value between 1 and 28

**ASK IF: C3F1 = 2 AND C3F2 < 4**

**C3F9**

Is drinking getting in the way of things you would really like to do? (e.g. by using money you'd rather have for other things, stopping you get a qualification or job)

PRESS 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

### **C3F10**

Do you have a really strong need for alcoholic drinks to get through the day?

PRESS 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

### **C3F11**

Do you get into trouble as a result of drinking? (e.g. trouble at school, at home, with the police, accidents, fights)

PRESS 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

## **Drugs**

---

### **CanIntr**

The next set of questions is about drugs

The first few questions are about cannabis and marijuana.

Cannabis is also called Weed, Marijuana, Dope, Pot, Blow, Hash, Skunk, Puff, Grass, Draw, Ganja, Spliff, Smoke, Wacky Backy

Cannabis is usually smoked either in cigarettes, called joints, or in a pipe.

### **C3c2**

Have you ever, even once, used cannabis?

PRESS 1 for NO, 2 for YES, 3 for DON'T KNOW

1. No
2. Yes
3. Never heard of cannabis/don't know

**ASK IF: C3c2 = 2**

### **C3c3**

On how many occasions have you used or taken cannabis?

PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 occasions
3. 6 to 10 occasions
4. More than 10 occasions

### **C3C4**

About how old were you the first time you used cannabis, even once?

PLEASE TYPE IN THE AGE AT WHICH YOU FIRST TRIED CANNABIS IN YEARS

Enter a numeric value between 0 and 20

**C3C5**

About how often have you used cannabis in the past year?

PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. About daily
2. 2 or 3 times a week
3. about once a week
4. about once a month
5. only once or twice in past year
6. not at all in past year

**C3C9**

Do you feel like cutting down or stopping your use of cannabis?

PLEASE READ THE ANSWERS CAREFULLY AND TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. I feel like stopping using cannabis
2. I feel like cutting down my cannabis use
3. I don't feel like cutting down or stopping using cannabis

**C3C11**

Is using cannabis getting in the way of things you would really like to do?

(e.g. by using money you'd rather have for other things or stopping you get a qualification or job)

TYPE 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

**C3C12**

Do you have a really strong need for cannabis to get through the day?

TYPE 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

**C3C13**

Do you get into trouble as a result of using cannabis?

(e.g. trouble at school, at home, with police, accidents)

TYPE 1 FOR 'NO' OR 2 FOR 'YES'

1. No
2. Yes

**C3G3**

Have you ever used inhalants (these are liquids or sprays that people sniff or inhale to get high or make them feel good such as glue, solvents, gas (butane, lighter refills), aerosols)?

PRESS 1 for NO, 2 for YES, 3 for DON'T KNOW

1. No
2. Yes
3. Never heard of inhalants/don't know

**ASK IF: C3G3 = 2**

**C3G3year**

Have you used inhalants in the past year?

PRESS 1 for NO, 2 for YES

1. No
2. Yes

**ASK IF: C3G3 = 2 AND C3G3year = 2**

**C3G3a**

How many times have you used inhalants in the last year?

PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 times
3. 6 to 10 times
4. More than 10 times

**C3G3b**

Have you ever used poppers (also called amyl nitrite)?

PRESS 1 for NO, 2 for YES, 3 for DON'T KNOW

1. No
2. Yes
3. Never heard of poppers/don't know

**ASK IF: C3G3b = 2**

**C3G3byear**

Have you used poppers (also called amyl nitrite) in the past year?

PRESS 1 for NO, 2 for YES

1. No
2. Yes

**ASK IF: C3G3b = 2 AND C3G3b = 2**

**C3G3times**

How many times have you used poppers (also called amyl nitrite) in the last year?  
PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE  
NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 times
3. 6 to 10 times
4. More than 10 times

**C3G4**

Have you ever used ECSTASY (also called 'E', MDMA)?  
PRESS 1 FOR NO, 2 FOR YES, 3 FOR DON'T KNOW

1. No
2. Yes
3. Never heard of ecstasy/don't know

**ASK IF: C3G4 = 2**

**C3G4year**

Have you used ecstasy (also called 'E', MDMA) in the past year?  
PRESS 1 for NO, 2 for YES

1. No
2. Yes

**ASK IF: C3G4 = 2 AND C3G4year = 2**

**C3G4a**

How many times have you used ecstasy (also called 'E', MDMA) in the last year?  
PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE  
NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 times
3. 6 to 10 times
4. More than 10 times

**C3G5**

Have you ever used AMPHETAMINES (also called Crystal Meth, Whizz, Speed)  
PRESS 1 FOR NO, 2 FOR YES, 3 FOR DON'T KNOW

1. No
2. Yes
3. Never heard of amphetamines/don't know

**ASK IF: C3G5 = 2**

**C3G5year**

Have you used amphetamines (also called Crystal Meth, Whizz , Speed) in the past year?

PRESS 1 for NO, 2 for YES

1. No
2. Yes

**ASK IF: C3G5 = 2 AND C3G5year = 2**

**C3G5a**

How many times have you used amphetamines (also called Crystal Meth, Whizz, Speed) in the last year?

PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 times
3. 6 to 10 times
4. More than 10 times

**LegalHi**

The next questions are about new substances that have the same effects as other drugs. These are sometimes called 'legal highs' and can come in different forms such as herbal mixtures, powders, crystals or tablets. Have you ever tried these substances?

1. No
2. Yes

**ASK IF: LegalHi = 2**

**LegalHiYear**

Have you used legal highs in the last year?

PRESS 1 for NO, 2 for YES

1. No
2. Yes

**ASK IF: LegalHi = 2 AND LegalHiYear = 2**

**LegalHia**

How many times have you used legal highs in the last year?

PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 times
3. 6 to 10 times
4. More than 10 times

**ASK IF: LegalHi = 2**

**LegHiType**

1. Herbal smoking mixtures
2. Powders, crystals or tablets
3. Liquids
4. Some other type of substance
5. Don't know

**C3G8**

Have you ever used COCAINE (also called Snow, Charlie)?

PRESS 1 FOR NO, 2 FOR YES, 3 FOR DON'T KNOW

1. No
2. Yes
3. Never heard of cocaine/don't know

**ASK IF: C3G8 = 2**

**C3G8year**

Have you used cocaine (also called Snow, Charlie) in the last year?

PRESS 1 for NO, 2 for YES

1. No
2. Yes

**ASK IF: C3G8 = 2 AND C3G8year = 2**

**C3G8a**

How many times have you used cocaine (also called Snow, Charlie) in the last year?

PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 times
3. 6 to 10 times
4. More than 10 times

**C3G9**

Have you ever used CRACK (also called Base, Rocks, Stones)?

PRESS 1 FOR NO, 2 FOR YES, 3 FOR DON'T KNOW

1. No
2. Yes
3. Never heard of crack/don't know

**ASK IF: C3G9 = 2**

**C3G9year**

Have you used crack (also called Base, Rocks, Stones ) in the last year?

PRESS 1 for NO, 2 for YES

1. No
2. Yes

**ASK IF: C3G8cr = 2 AND C3G8cryear = 2**

**C3G9a**

How many times have you used crack (also called Base, Rocks, Stones) in the last year?

PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 times
3. 6 to 10 times
4. More than 10 times

**C3G10**

Have you ever used any other drugs other than those already mentioned?

DO NOT INCLUDE THOSE YOU WOULD GET FROM A DOCTOR OR CHEMIST

Enter at most 7 values

1. No
2. Yes – Heroin, also called Brown, Smack, ‘H’
3. Yes – Magic Mushrooms
4. Yes – Methadone, also called Physeptone
5. Yes – Ketamine, also called ‘K’
6. Yes – Mephedrone, also called M-Cat, Meow, Bubble, Drone, 4MMC
7. Yes – Nitrous Oxide, also called laughing gas, balloons, hippie crack
8. Yes – Other drugs that would not be given to you by a doctor or chemist

**ASK IF: C3G10 = 8**

**OtherDrug**

What other drug(s) have you used?

Enter a text of at most 255 characters

**ASK IF: C3G10 = 2, 3, 4, 5, 6, 7, 8**

**C3G10yea**

Have you used these other drugs in the last year?

PRESS 1 for NO, 2 for YES

1. No
2. Yes

**ASK IF: C3G10 = 2, 3, 4, 5, 6, 7, 8 AND C3G10yea = 2**

**C3G10a**

How many times have you used these other drugs in the last year?

PLEASE READ THROUGH THE OPTIONS CAREFULLY AND THEN TYPE IN THE NUMBER THAT IS NEXT TO YOUR ANSWER

1. Once
2. 2 to 5 times
3. 6 to 10 times
4. More than 10 times



**ASK IF: C3C2 = 2 OR C3G3 = 2 OR C3G3b = 2 OR C3G4 = 2 OR C3G5 = 2 OR C3G8 = 2 OR C3G9 = 2 OR C3G10 = 2, 3, 4, 5, 6, 7, 8**

**LastTime**

Last time you used or took drugs, which of the following drugs did you use or take? If you used or took more than one drug at the same time, please select all those you used or took.

1. **Cannabis**, also called Weed, Marijuana, Dope, Pot, Blow, Hash, Skunk, Puff, Grass, Draw, Ganja, Spliff, Smoke, Wacky Backy
2. **Methamphetamine, Speed** and other **Amphetamines**, also called Crystal Meth, Whizz
3. **LSD**, also called Acid, Trips
4. **Ecstasy**, also called 'E', MDMA
5. **Poppers**, also called Amyl nitrite
6. **Tranquilisers**, also called Temazepam, Valium, Jellies, Roofies
7. **Heroin**, also called Brown, Smack, 'H'
8. **Magic Mushrooms**
9. **Methadone**, also called Physeptone
10. **Crack**, also called Base, Rocks, Stones
11. **Cocaine**, also called Snow, Charlie
12. **Ketamine**, also called 'K'
13. **Mephedrone**, also called M-Cat, Meow Meow, Bubble, Drone, 4MMC
14. **Glue, gas (butane, lighter refills), aerosols or solvents** (to inhale or sniff)
15. **Nitrous Oxide**, also called laughing gas, balloons, hippie crack
16. **So-called 'legal highs'** – herbal or synthetic substances you take to get high, which may or may not be illegal to buy.
17. **Other drugs** that would not be given to you by a doctor or chemist

**ASK IF: LastTime = 17**

**OtherLastTime**

What other drug(s) did you use or take the last time you used or took drugs?

**WHYDRUGS**

Why did you use or take drugs that day? SELECT ALL THAT APPLY

Enter at most 11 values

1. I wanted to get high or feel good
2. Because my friends were doing it
3. Because it's cool
4. It was a dare
5. I had nothing better to do
6. I wanted to see what it was like
7. I wanted to forget my problems
8. Just because I was offered it
9. Other reasons
10. I don't remember
11. I don't know

**ASK IF: WhyDrugs = 9**

**WHYOTHER**

WHAT WERE THE OTHER REASONS YOU USED OR TOOK DRUGS THAT DAY?

Enter a text of at most 255 characters

**HOWOFTEN**

How often do you usually take drugs (including sniffing glue or other solvents but not including cigarettes or alcohol)?

1. I take drugs most days
2. I take drugs at least once a week
3. I take drugs once or twice a month
4. I take drugs a few times a year
5. I take drugs about once a year or less often

**ASK IF: C3C2 = 2 OR C3G3 = 2 OR C3G3b = 2 OR C3G4 = 2 OR C3G5 = 2 OR C3G8 = 2 OR C3G9 = 2 OR C3G10 = 2, 3, 4, 5, 6, 7, 8**

**C3DgHlp3**

Have you ever had help or treatment because you were taking drugs?

PRESS 1 FOR NO, 2 FOR YES

1. No
2. Yes

**ASK IF: C3DgHlp3 = 2**

**C3DgWho**

Who did you get help from?

1. FRANK
2. Internet forums
3. Recovery service
4. Rehab centre
5. GP
6. Teacher
7. Family member
8. Community centre
9. Youth Worker
10. Other

**ASK IF: C3DgWho = 10**

**CDgwo**

Who else did you get help or treatment from (because you were taking drugs)?

Press INSERT to insert a text

**ASK IF: C3DgHlp3 = 1**

**C3DgHlp2**

If you felt that you needed help or treatment because you were using drugs, where would you go?

1. FRANK
2. Internet forums
3. Recovery service
4. Rehab centre
5. GP
6. Teacher
7. Family member
8. Community centre
9. Youth Worker
10. Other

**Ask IF C3DgHlp2 = 10**

**C3Dgho**

Where else would you go if you felt you needed help or treatment (because you were using drugs)?

Press INSERT to insert text

**ASK IF: C3DgHlp3 = 1**

**C3DgHlp1**

Have you ever felt that you needed to get help or treatment because you were using drugs?

PRESS 1 FOR NO, 2 FOR YES

1. No
2. Yes

**C3DrgInf**

Where would you go if you wanted to get more information about drugs?

1. GP
2. Teacher
3. Family member
4. Internet
5. FRANK
6. Pharmacy
7. Library
8. Youth Worker
9. Community centre
10. Other

**ASK IF: C3DrgInf = 10**

**C3DrgOth**

What is the other source of information you would access to get more information about drugs?

Press INSERT to insert a text

## Relationships with teachers

---

**ASK IF: CSchLeft = 1**

**TRelation**

Earlier you said you that you are still in full time education. Over the last year have you had a teacher / tutor or lecturer that you found very difficult to work with?

1. Yes
2. No

**ASK IF: TRelation = 1**

**TLearn**

Did this difficult relationship with your teacher/lecturer interfere with your learning?

1. No
2. A little
3. Quite a lot
4. A great deal

**TAttend**

Did this difficult relationship with your teacher/lecturer interfere with your attendance at school/college/university?

1. No
2. A little
3. Quite a lot
4. A great deal

**TUpset**

Did this difficult relationship with your teacher/lecturer upset you?

1. No
2. A little
3. Quite a lot
4. A great deal

**ASK IF: ChIdAg = 16 AND CSchLeft = 1<sup>20</sup>**

**YPSen**

Do you have special education needs?

1. Yes
2. No

**ASK IF: YPSen = 1**

**YpEHC**

Do you have an Education, Health and Care (EHC) Needs Plan?

1. Yes
2. No

**ASK IF: YPSen = 1**

**YPSenArea**

Which areas are these special needs related to? Please select all that apply. (MULTI CODE)

1. Difficulties with speech, language and/or communication (difficulties that make it hard for you to understand language or communicate effectively)
2. Learning difficulties (learning at a slower pace, which may be for everything or just for some skills such as reading/writing/maths, and/or difficulties with memory and/or organisation)
3. Social emotional and mental health (difficulties with emotions, behaviour, concentration or getting along with people that get in the way of learning or coping at school)
4. Sensory and / or physical (difficulties with vision or hearing and / or physical ill health that gets in the way of learning or coping at school)

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<sup>20</sup> An error was made in the routing for this question - routing should have been 'ChIdAg = 17-19 AND YpQ2 = 1'. This means that this question was not asked of young people aged 17 to 19 who were in full time education. This also affects questions YpEHC and EPSenArea.

## Services

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### ASK IF: ChIdAg >= 13 AND ChIdAg <= 16

#### ServiceC

Here is a list of people who parents and young people often turn to when they want advice and treatment about a young person's emotions, behaviour, concentration or difficulties in getting along with people.

In the past year have you been in contact with any of these people because of worries about your emotions, behaviour, concentration or difficulties in getting along with people?

1. Someone in your family or a close friend
2. Telephone help line
3. Self-help group
4. Internet
5. A teacher (including form tutor, head of year, head teacher or coordinator)?
6. Someone working in additional support services (for example an educational psychologist, educational social worker or specialist teacher from outside school)?
7. Someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse?
8. Someone specialising in mental health care, such as a mental health nurse, psychiatrist, psychologist or counsellor?
9. Someone specialising in children's physical health, such as a hospital or community paediatrician, or occupational therapist?
10. Someone from social care, such as a social worker
11. Someone from youth justice, such as a probation officer or someone working in a Youth Offending Team
12. None of these, I am not worried about my emotions, behaviour, concentration or difficulties in getting along with people
13. I have not contacted any of these people but I am worried about my emotions, behaviour, concentration or difficulties in getting along with people
14. Other – please describe

**ASK IF: ChIdAg >= 17 AND ChIdAg <= 19**

**YPQ25**

Here is a list of people who parents and young people often turn to when they want advice and treatment about a young person's emotions, behaviour, concentration or difficulties in getting along with people.

**In the past year**, have you been in contact with any of these people because of worries about your emotions, behaviour, concentration or difficulties in getting along with people?

1. Someone in your family or a close friend
2. Telephone help line
3. Self-help group
4. Internet
5. A teacher (including form tutor, head of year, head teacher or special educational needs coordinator)?
6. Someone working in additional support services (for example an educational psychologist, educational social worker or specialist teacher from outside school)?
7. Someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse?
8. Someone specialising in mental health care, such as a mental health nurse, psychiatrist, psychologist or counsellor?
9. Someone specialising in children's physical health, such as a hospital or community paediatrician, or occupational therapist?
10. Someone from social care, such as a social worker
11. Someone from youth justice, such as a probation officer or someone working in a Youth Offending Team
12. None of these, I am not worried about my emotions, behaviour, concentration or difficulties in getting along with people
13. I have not contacted any of these people but I am worried about my emotions, behaviour, concentration or difficulties in getting along with people
14. Other – please describe

**ASK IF: YPQ25 = 1**

**YPFamDesc**

Now talking about **someone in your family or a close friend...**

Can you describe what they did?

PROMPTS:

Who did they see

What did they do

**YPFamAdv**

Still talking about **someone in your family or a close friend...** Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful

3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

**ASK IF: YPQ25 = 2**

**YPTelDesc**

Now talking about **the telephone help line...**

Can you describe what they did?

PROMPTS:

Who did they see

What did they do

**YPTelAdv**

Still talking about **the telephone help line...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

**ASK IF: YPQ25 = 3**

**YPSelDesc**

Now talking about **the self-help group...**

Can you describe what they did?

PROMPTS:

Who did they see

What did they do

**YPSelAdv**

Still talking about **the self-help group...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?



**ASK IF: YPQ25 = 4**

**YPNetDesc**

Now talking about **the internet...**

Can you describe what they did?

PROMPTS:

Who did they see

What did they do

**YPNetAdv**

Still talking about **the internet...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

**ASK IF: YPQ25 = 5**

**YPTeachDesc**

Now talking about **a teacher (including Head of Year, Head-teacher or Special educational Needs Co-ordinator)...**

Can you describe what they did?

Prompts:

Who did they see

What did they do

**YPTeacAdv**

Still talking about **a teacher (including Head of Year, Head-teacher or Special educational Needs Co-ordinator)...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

**YPTeaWait**

Now talking about:

A teacher (including form tutor, head of year, head teacher or special educational needs coordinator).

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks

3. 10 weeks to six months
4. More than 6 months

### **YPTeaAcpt**

Still talking about:

A teacher (including form tutor, head of year, head teacher or special educational needs coordinator).

Was this length of time acceptable?

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

### **YPTeaStop**

Did you decide to stop seeing a teacher (including form tutor, head of year, head teacher or special educational needs coordinator) (about your concerns for your emotions, behaviour or concentration) while they were still sending you appointments?

- 1 Yes
- 2 No

**ASK IF: YPTeaStop = 1**

### **YPTeaWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: YPQ25 = 6**

### **YPSpecDesc**

Now talking about **someone working in special educational services (for example educational psychologist, Educational Social Worker or School Counsellor)...**

Can you describe what they did?

Prompts:

- Who did they see
- What did they do

### **YPSpecAdv**

Still talking about **someone working in special educational services (for example educational psychologist, Educational Social Worker or School Counsellor)...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

### **YPSpecWait**

Now talking about:

**Someone working in special educational services (for example educational psychologist, educational social worker, or school counsellor).**

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

### **YPSpecAcpt**

Still talking about:

**Someone working in special educational services (for example educational psychologist, educational social worker, or school counsellor).**

Was this length of time acceptable?

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

### **YPSpecStop**

Did you decide to stop seeing someone working in special educational services (for example educational psychologist, educational social worker, or school counsellor) (about your concerns for your emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: YPSpecStop = 1**

### **YPSpecWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: YPQ25 = 7**

### **YPGPDesc**

Now talking about **your GP, family doctor or practice nurse...**

Can you describe what they did?

Prompts:

- Who did they see
- What did they do

### **YGPAdv**

Still talking about **your GP, family doctor or practice nurse...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful

3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

### **YPPriWait**

Now talking about:

Someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse.

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

### **YPPriAcpt**

Still talking about:

Someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse.

Was this length of time acceptable?

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

### **YPPriStop**

Did you decide to stop seeing someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse (about your concerns for your emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: YPPriStop = 1**

### **YPPriWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: YPQ25 = 8**

### **YPMHCDesc**

Now talking about **someone specialising in mental health (for example mental health nurse, psychiatrist, psychologist or counsellor)**...

Can you describe what they did?

Prompts:

- Who did they see
- What did they do

### **YPMHCAadv**

Still talking about **someone specialising in mental health (for example mental health nurse, psychiatrist, psychologist or counsellor)**...

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

### **YPMHCWait**

Now talking about:

Someone specialising in mental health care, such as a mental health nurse, psychiatrist, psychologist or counsellor.

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

### **YPMHCAcpt**

Still talking about:

Someone specialising in mental health care, such as a mental health nurse, psychiatrist, psychologist or counsellor.

Was this length of time acceptable?

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

### **YPMHCStop**

Did you decide to stop seeing someone specialising in mental health care, such as a mental health nurse, psychiatrist, psychologist or counsellor (about your concerns for your emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: YPMHCStop = 1**

### **YPMHCWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: YPQ25 = 9**

**YPCPhysDesc**

Now talking about **someone specialising in children's physical health (for example a hospital or community paediatrician)**

Can you describe what they did?

Prompts:

Who did they see

What did they do

**YPCPhyAdv**

Still talking about **someone specialising in children's physical health (for example a hospital or community paediatrician)**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

**YPCPhyWait**

Now talking about:

Someone specialising in children's physical health, such as a hospital or community paediatrician, or occupational therapist.

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**YPCPhyAcpt**

Still talking about:

Someone specialising in children's physical health, such as a hospital or community paediatrician, or occupational therapist.

Was this length of time acceptable?

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

### **YPCPhyStop**

Did you decide to stop seeing someone specialising in children's physical health, such as a hospital or community paediatrician, or occupational therapist (about your concerns for your emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

### **ASK IF: YPCPhyStop = 1**

#### **YPCPhyWhy**

Please describe your reasons for deciding to stop seeing the specialist.

### **ASK IF: YPQ25 = 10**

#### **YPLinkDesc**

Now talking about **the social worker...**

Can you describe what they did?

Prompts:

- Who did they see
- What did they do

#### **YPLinkAdv**

Still talking about **the social worker...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

#### **YPLinkWait**

Now talking about:

Someone from social care, such as a social worker.

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

### **YPLinkAcpt**

Still talking about:

Someone from social care, such as a social worker.

Was this length of time acceptable?

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

### **YPLinkStop**

Did you decide to stop seeing someone from social care, such as a social worker (about your concerns for your emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: YPLinkStop = 1**

### **YPLinkWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: YPQ25 = 6, 8, 9, 10**

### **YPSpecIntr2**

You are seeing specialist services about your emotions, behaviour or concentration. Some families get to see a specialist without any difficulty but other families do meet some obstacles and we are interested in finding out about these.

### **YPSeenSpec**

I am going to show you a list of statements. Please say whether any of the following apply to you.

1. Didn't know of any services for these types of problems
2. Hard to persuade GP, teacher or other professional to refer me
3. Was referred but specialist services were reluctant to see me
4. Didn't like what the specialist services offered me
5. Didn't think that specialists would be able to help
6. Worried about what other people may think of me
7. Worried that I might be taken away from my family
8. Had a bad experience with specialist services in the past
9. Difficult to arrange appointments for times I could manage
10. The specialist was too far away or too hard to get to
11. Did not have time to see a specialist because of school, college, work or family demands
12. Could not afford to take time off work or to pay for travel to get to see a specialist
13. Took so long for appointment to come through that by the time it arrived there seemed little point in going
14. Worried about privacy, confidentiality or being left with permanent record



15. Other reason

16. Spontaneous only – None of these apply to me

**ASK IF: YPQ25 = 6, 7, 8, 9, 10 AND YPSeenSpec = 15**

**YPOthSpec2**

Please describe any other obstacle(s) you encountered.

**ASK IF: YPQ25 = 11**

**YPJustDesc**

Now talking about **someone from youth justice, such as a probation officer or someone working in a Youth Offending Team...**

Can you describe what they did?

Prompts:

Who did they see

What did they do

**YPJustAdv**

Still talking about **someone from youth justice, such as a probation officer or someone working in a Youth Offending Team...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

**YPJustWait**

Now talking about:

Someone from youth justice, such as a probation officer or someone working in a Youth Offending Team. How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**YPJustAcpt**

Still talking about:

Someone from youth justice, such as a probation officer or someone working in a Youth Offending Team. Was this length of time acceptable?

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

### **YPJustStop**

Did you decide to stop seeing someone from youth justice, such as a probation officer or someone working in a Youth Offending Team (about your concerns for your emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: YPJustStop = 1**

### **YPJustWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: YPQ25 = 13**

### **YPSpecIntr1**

You have said that you were worried about your emotions, behaviour or concentration, and you haven't seen a specialist about your worries. There are many good reasons for not seeing specialist services about your concerns as they are often not needed, but sometimes people don't get to specialist services because there are barriers in their way.

### **YPNoSpec**

I am going to show you a list of statements. Please say whether any of the following apply to you.

CODE ALL THAT APPLY.

1. Didn't know of any services for these types of problems
2. Hard to persuade GP, teacher or other professional to refer me
3. Was referred but specialist services were reluctant to see me
4. Didn't like what the specialist services offered me
5. Didn't think that specialists would be able to help
6. Worried about what other people may think of me
7. Worried that I might be taken away from my family
8. Had a bad experience with specialist services in the past
9. Difficult to arrange appointments for times I could manage
10. The specialist was too far away or too hard to get to
11. Did not have time to see a specialist because of school, college, work or family demands
12. Could not afford to take time off work or to pay for travel to get to see a specialist
13. Took so long for appointment to come through that by the time it arrived there seemed little point in going
14. Worried about privacy, confidentiality or being left with permanent record
15. Other reason

**ASK IF: YPQ25 = 13 AND YPNoSpec = 15**

**YPOthSpec**

Please specify other reason(s) you did not see a specialist.

**ASK IF: YPQ25 = 14**

**YPWhhelpO**

Who else have you sought advice from?

**ASK IF: ServiceC = 14**

**ServYPOth**

Who else have you sought advice from?

**YPOthSDesc**

Now talking about **the other type of help you mentioned...**

Can you describe what they did?

Prompts:

Who did they see

What did they do

**YPOthSAdv**

Still talking about **the other type of help you mentioned...**

Was the advice or help offered for your emotional, behavioural or concentration difficulties...

1. Very helpful
2. Helpful
3. Made no difference
4. Unhelpful, or
5. Very unhelpful?

**YPOthWait**

Now talking about: <OTHER HELP>.

How long did you wait to see the specialist?

1. Less than 6 weeks
2. Six to nine weeks
3. 10 weeks to six months
4. More than 6 months

**YPOthAcpt**

Still talking about: <OTHER HELP>.

Was this length of time acceptable?

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

**YPOthStop**

Did you decide to stop seeing <OTHER HELP> (about your concerns for your emotions, behaviour or concentration) while they were still sending you appointments?

1. Yes
2. No

**ASK IF: YPOthStop = 1**

**YPOthWhy**

Please describe your reasons for deciding to stop seeing the specialist.

**ASK IF: YPQ25 = 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 14**

**YPBetter**

However pleased you have been with specialist services, there is usually room for some improvement. What do you think could be done to make them better?

INTERVIEWER: Please ask the participant about all the specialist services they may have seen.

**Ask All**

**YPSeenYth**

Have you been seen by ...youth justice worker/probation worker/someone working on a Youth Offending Team?

1. Yes
2. No
3. Don't know (SPONTANEOUS ONLY)

**ASK IF: YPSeenYth = 1**

**YPTrtYth**

What sort of help, advice or treatment did they give?

PLEASE ENTER A BRIEF DESCRIPTION

**YPYthSHlp**

Was it helpful?

PLEASE ENTER A BRIEF DESCRIPTION

**YPYthConv**

In the past year have you received a police caution/reprimand or conviction?

1. Yes
2. No
3. Don't know (SPONTANEOUS ONLY)

**ASK IF: YPYthConv = 1**

**YPQ29**

How many cautions/reprimands?

**YPQ30**

How many convictions?

**ASK IF: YPSeenYth = 1 AND YPYthConv = 1**

**WhyConv**

When did you receive this caution/reprimand or conviction (most recent)?

**YPWhatConv**

What was this caution/reprimand or conviction for (most recent)?

**ASK IF: ChldAg >= 13 AND ChldAg <= 16**

**HospC**

In the past year have you been to a clinic, unit or hospital for several hours each day over a period of time due to your emotions, behaviour, concentration or difficulties getting along with people?

1. Yes
2. No

**ASK IF: ChldAg >= 17 AND ChldAg <= 19**

**YPQ26**

In the past year have you been to a clinic, unit or hospital for several hours each day over a period of time due to your emotions, behaviour, concentration or difficulties getting along with people?

1. Yes
2. No

**ASK IF: ChldAg >= 13 AND ChldAg <= 16**

**HospNight**

In the past year have you stayed in hospital over one or more nights due to your emotions, behaviour, concentration or difficulties in getting along with people?

1. Yes
2. No

**ASK IF: ChldAg >= 17 AND ChldAg <= 19**

**YPQ27**

In the past year have you stayed in hospital over one or more nights due to your emotions, behaviour, concentration or difficulties in getting along with people?

1. Yes
2. No

**Ask all**

**YPQ31**

Have you been so worried about your emotions, concentration, behaviour or difficulties getting along with other people at any time **before the past year** that you talked to any of these people about it?

1. Someone in your family or a close friend
2. Telephone help line
3. Self-help group
4. Internet
5. A teacher (including form tutor, head of year, head teacher or special educational needs coordinator)?
6. Someone working in special educational services (for example an educational psychologist, educational social worker or specialist teacher from outside school)?
7. Someone from primary health care such as your GP, family doctor, health visitor, practice nurse or school nurse?
8. Someone specialising in mental health care, such as a mental health nurse, psychiatrist, psychologist or counsellor?
9. Someone specialising in children's physical health, such as a hospital or community paediatrician, or occupational therapist?
10. Someone from social care, such as a social worker
11. Someone from youth justice, such as a probation officer or someone working in a Youth Offending Team
12. None of these, I have not been worried about my emotions, behaviour, concentration or difficulties in getting along with people before the past year
13. I have not contacted any of these people but I am worried about my emotions, behaviour, concentration or difficulties in getting along with people before the past year
14. Other – please describe

**ASK IF: YPQ31 = 14**

**YPQ31Oth**

Who else have you sought advice from?

## Wellbeing (feelings and thoughts)

---

**ASK IF: ChIdAg > 10**

### **WEMWBS**

The next few statements are about feelings and thoughts. Please select the answer that best describes your experience of each over the last 2 weeks.

#### **WEMWBS1**

I've been feeling optimistic about the future

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

#### **WEMWBS2**

I've been feeling useful

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

#### **WEMWBS3**

I've been feeling relaxed

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

#### **WEMWBS4**

I've been feeling interested in other people

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS5**

I've had energy to spare

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS6**

I've been dealing with problems well

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS7**

I've been thinking clearly

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS8**

I've been feeling good about myself

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS9**

I've been feeling close to other people

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time



**WEMWBS10**

I've been feeling confident

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS11**

I've been able to make up my own mind about things

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS12**

I've been feeling loved

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS13**

I've been interested in new things

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

**WEMWBS14**

I've been feeling cheerful

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time

## Illness / impairments

---

**ASK IF: ChIdAg >= 11**

**ONS2**

This question is about any health conditions, illnesses or impairments you may have. Do you have any physical or mental health conditions or illnesses lasting or expected to last for 12 months or more?

1. No
2. Yes

**ASK IF: ONS2 = 2**

**ONS3**

The purpose of this question is to establish the type of impairment(s) you experience currently as a result of your health condition or illness. In answer to this question, you should consider whether you are affected in any of these areas whilst receiving any treatment or medication or using devices to help you such as a hearing aid for example.

Do any of these conditions or illnesses affect you in any of the following areas?

**SELECT ALL THAT APPLY**

1. Vision (for example blindness or partial sight)
2. Hearing (for example deafness or partial hearing)
3. Mobility (for example walking short distances or climbing stairs)
4. Dexterity (for example being able to lift and carry objects, or use a keyboard)
5. Learning or understanding or concentrating
6. Memory
7. Mental health
8. Stamina or breathing or fatigue
9. Socially or behaviourally (for example associated with autism, attention deficit disorder or Asperger's syndrome)
10. Other
11. None of the above

**ASK IF: ONS3 = 10**

**ONS30th**

What other area does your health condition affect you in?

#### **ONS4**

This question asks about whether your health condition or illness currently affects your ability to carry-out normal day-to-day activities, either a lot or a little or not at all. In answering this question, you should consider whether you are affected whilst receiving any treatment or medication for your condition or illness and / or using any devices such as a hearing aid for example.

Does your condition or illness / do any of your conditions or illnesses reduce your ability to carry out day-to-day activities?

1. Yes, a lot
2. Yes, a little
3. Not at all

#### **ASK IF: ONS4 = 1, 2**

For how long has your ability to carry-out day-to-day activities been reduced?

1. Less than six months
2. Between six months and 12 months
3. 12 months or more

## **National identity, religion, ethnicity, and sexual orientation**

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#### **ASK IF: ChIdAg >= 14**

##### **ONS1**

Which of the following options best describes how you think of yourself?

1. Heterosexual / Straight
2. Gay / Lesbian
3. Bisexual
4. Other sexual preference

#### **ASK ALL**

##### **cEthnic**

What is your ethnic group? Choose one option that best describes your ethnic group or background. Ethnicity is a social group that has a common culture or tradition.

1. English / Welsh / Scottish / Northern Irish / British
2. Irish
3. Gypsy or Irish Traveller
4. Any other White background, please describe
5. White and Black Caribbean
6. White and Black African
7. White and Asian
8. Any other Mixed / Multiple ethnic background, please describe
9. Indian
10. Pakistani
11. Bangladeshi
12. Chinese

13. Any other Asian background, please describe
14. African
15. Caribbean
16. Any other Black / African / Caribbean background, please describe
17. Arab
18. Any other ethnic group, please describe

**ASK IF: cEthnic = 18**

**EthnicOth**

What is your ethnic group?

**ASK ALL**

**NatIden**

How would you describe your national identity? National identity is the country or nation that you feel most connected to. It can be represented by traditions, culture and language.

Please choose all that apply.

1. English
2. Welsh
3. Scottish
4. Northern Irish
5. British
6. Other

**ASK IF: NatIden = 6**

**NatIdenOth**

What is your national identity?

**ASK ALL**

**Relig**

What is your religion?

1. No religion
2. Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
3. Buddhist
4. Hindu
5. Jewish
6. Muslim
7. Sikh
8. Any other religion, please describe

**ASK IF: Relig = 8**

**ReligOth**

What is your religion?

## Data Linkage Consent and Re-Contact Consent

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### **ASK IF: Chldag >= 17**

#### **NHSCan**

We would like to ask for your consent to link some of your NHS health records and education records with your survey answers. To do this we would need to send your name, address and date of birth to NHS Digital. Please read this form, it explains more about what is involved.

INTERVIEWER INSTRUCTION: Give the respondent the (colour) consent form (linking survey answers to other information) and allow them time to read the information.

5. Consent given to both health records and education records
6. Consent given only to health
7. Consent given only to education
8. Consent not given to either

### **ASK IF: NHSCan = 5, 6, 7**

#### **NHSSig**

Before I can pass your details on, I have to obtain written consent from you.

INTERVIEWER INSTRUCTION: Enter the respondent's serial number on the top of the consent form.

Ask the respondent to initial the box and sign the form.

Give the white copy of the form to the respondent.

Code whether signed consent obtained.

3. Consent signed
4. No consent obtained (or only one box initialled)

#### **Thank**

Thank you for your help. Before we end the interview, I need to collect a little more information for our records.

#### **ReCall**

Would you be willing for us (ONS or our study partner NatCen) to contact you in the future for similar or other research purposes? If you are invited to take part in any future studies you will be free to refuse if you do not want to take part.

4. Yes (unconditional)
5. No (unconditional)
6. Yes (in certain circumstances)

**ASK IF: ReCall = 4, 6**

**GivTel2**

Please may I have a telephone number, so we can contact you?

4. Yes
5. No
6. No phone

**ASK IF: ReCall = 4, 6 AND GivTel2 = 4**

**TelNo2**

INTERVIEWER INSTRUCTION: record telephone number

**ASK IF: ReCall = 6**

**Onlylf**

Main conditions for follow-up interview.

5. Contact household beforehand
6. Only at a convenient time
7. Someone else (e.g. carer) needs to be there
8. Don't want to answer other types of question

**ASK IF: ReCall = 6 and Onlylf = 8**

**OnIfO**

INTERVIEWER INSTRUCTION: type in types of question the respondent doesn't wish to answer

**ASK IF: ReCall = 4, 6**

**Name**

INTERVIEWER INSTRUCTION:

it is helpful to have a contact name to ask for or to address letters to: title/initial/surname. record as much of this as respondent will allow. if respondent refuses name, enter 0

**ASK IF: ReCall = 4, 6**

**Moved**

INTERVIEWER INSTRUCTION:

Is this respondent now living at a different address to the one on the address list?

3. Yes
4. No

**ASK IF: ReCall = 4, 6 AND Moved = 3**

**PAdd1**

INTERVIEWER INSTRUCTION:

Enter first line of present address

**ASK IF: ReCall = 4, 6 AND Moved = 3**

**PADD2**

INTERVIEWER INSTRUCTION:

Enter second line of present address

**ASK IF: ReCall = 4, 6 AND Moved = 3**

**PADD3**

INTERVIEWER INSTRUCTION:

Enter third line of present address

**ASK IF: ReCall = 4, 6 AND Moved = 3**

**POSTCOD**

INTERVIEWER INSTRUCTION:

Enter postcode of present address

**Moving**

May I just check, are you likely to be moving from this address in the near future?

- 3. Yes
- 4. No

**ASK IF: Moving = 3**

**MAddX**

Do you know where you will be moving to?

- 3. Yes
- 4. No

**ASK IF: MAddX = 3**

**MAdd1**

INTERVIEWER INSTRUCTION:

Enter first line of new address

**ASK IF: MAddX = 3**

**MAdd2**

INTERVIEWER INSTRUCTION:

Enter second line of new address

**ASK IF: MAddX = 3**

**MAdd3**

INTERVIEWER INSTRUCTION:

Enter third line of new address

**ASK IF: MAddX = 3**

**MPostCd**

INTERVIEWER INSTRUCTION:

Enter postcode of new address

**ASK IF: MAddX = 3**

**MNwTel**

INTERVIEWER INSTRUCTION: Collect new or contact telephone number or enter '0' for 'none'

**ASK IF: Recall = 4, 6**

**Contad**

Is there a friend or relative we could contact who would be able to give a forwarding address (if you were to move somewhere else)?

3. Yes
4. No

**ASK IF: Contad = 3**

**ConName**

INTERVIEWER INSTRUCTION: Enter the name of the person

**ASK IF: Contad = 3**

**CRelat**

INTERVIEWER INSTRUCTION: Enter relationship

**ASK IF: Contad = 3**

**CAdd**

Is contact living at sampled address

1. Yes
2. No

**ASK IF: Contad = 3 AND CAdd = 4**

**CAdd1**

INTERVIEWER INSTRUCTION:

Enter first line of contact address

**ASK IF: Contad = 3 AND CAdd = 4**

**CAdd2**

INTERVIEWER INSTRUCTION:

Enter second line of contact address



**ASK IF: Contad = 3 AND CAdd = 4**

**CAdd3**

INTERVIEWER INSTRUCTION:

Enter third line of contact address

**ASK IF: Contad = 3 AND CAdd = 4**

**CPstCd**

INTERVIEWER INSTRUCTION:

Enter postcode of contact address

**ASK IF: Contad = 3 AND CAdd = 4**

**CNwTel**

INTERVIEWER INSTRUCTION:

Collect contact telephone number or enter '0' for 'none'

**ASK IF: Recall = 5**

**RfReas**

INTERVIEWER INSTRUCTION: code main reason(s) for refusal to the follow-up interview.

7. Not interested
8. Taken too much time
9. Have done it once/once is enough
10. Questions are too repetitive
11. Current survey is too intrusive, objected to subject matter
12. Other

# Information and technology for better health and care

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