

# COVID-19 Online Survey Questionnaire

## Wave 2 - September 2020

**Studies covered:**

- Millennium Cohort Study (born 2000-02)
- Millennium Cohort Study members parents
- Next Steps (born 1989-90)
- 1970 British Cohort Study
- 1958 National Child Development Study
- MRC National Survey of Health and Development (1946 British birth cohort)

**Topics covered**

- Intro
- Health
- Family
- Finance, Employment, and Education
- MCS Contact Information
- Other
- Outro

## Contents

Individual Group Intro	5
Physical Health	6
Health - Medication	10
Health - Healthcare	12
Health – Physical Health	14
Family – Household Grid	14
Family – Relationships	16
Other – Family conflict change	17
Family – Pregnancy	18
Family – Children and childcare	18
Family – Child loop	18
Family – Children and childcare	19
Family – Caring	19
Family – Housing	22
Finance, employment and education – Financial Situation	24
Finance, employment and education – Benefits claimed	25
Finance, employment and education – Financial transfers	26
Finance, employment and education – Employment circumstances: prior outbreak	28
Finance, employment and education – Education: prior outbreak	29
Finance, employment and education – Economic activity: during outbreak - if in education or non-job apprenticeship	33
Finance, employment and education – Education and employment MCS only	33
Finance, employment and education – Employment circumstances: now	34
Finance, employment and education – Employment circumstances: during outbreak	35
Finance, employment and education – Employment circumstances: prior outbreak – partner	36
Finance, employment and education – Economic activity: since outbreak - partner	38
Health – Health behaviours	39
Other – Contact	43
COVID, Social, and Mental health – Social provision	44
COVID, Social, and Mental health – Loneliness	45
COVID, Social, and Mental health – Life satisfaction	45
COVID, Social, and Mental health – Mental health scale	46
COVID, Social, and Mental health – MCS Mental health scale	46
COVID, Social, and Mental health – NCDS & BCS70 Mental health scale	48
COVID, Social, and Mental health – NS & NSHD Mental health scale	48
COVID, Social, and Mental health – Mental health scale	51
COVID, Social, and Mental health – Optimism	51

COVID, Social, and Mental health – Risk and patience	51
Other - Trust	52
Other – Trust in government	53
Other – Time use	53
Other – Life events	54
Family – Children and childcare	55
Outro – Outro block	61
MCS Contact information – Contact information block	62
Outro – Outro block	73

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Start of Block: Individual Group Intro

**IF GROUP=1**

NCDSINTRO | Welcome to the 2nd National Child Development Study COVID-19 Survey. The survey should take about 20 to 30 minutes to complete. As always, answering these questions is voluntary and you can skip over any questions that you cannot or would prefer not to answer. The 'Privacy and data protection' FAQs on the study website provide details about how we protect the information you provide and how it will be used for research. If you have any problems, queries or concerns, you can contact Kantar Freephone 0800 051 0889 or cohortcovidsurvey@kantar.com.

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**IF GROUP=2**

BCS70INTRO | Welcome to the 2nd 1970 British Cohort Study COVID-19 Survey. The survey should take about 20 to 30 minutes to complete. As always, answering these questions is voluntary and you can skip over any questions that you cannot or would prefer not to answer. The 'Privacy and data protection' FAQs on the study website provide details about how we protect the information you provide and how it will be used for research. If you have any problems, queries or concerns, you can contact Kantar Freephone 0800 051 0889 or cohortcovidsurvey@kantar.com.

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**IF GROUP=3**

NEXTSTEPSINTRO | Welcome to the 2nd Next Steps COVID-19 Survey. The survey should take about 20 to 30 minutes to complete. As always, answering these questions is voluntary and you can skip over any questions that you cannot or would prefer not to answer. The 'Privacy and data protection' FAQs on the study website provide details about how we protect the information you provide and how it will be used for research. If you have any problems, queries or concerns, you can contact Kantar Freephone 0800 051 0889 or cohortcovidsurvey@kantar.com.

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**IF GROUP=4**

MCSINTRO | Welcome to the 2nd Child of the New Century COVID-19 Survey. The survey should take about 20 to 30 minutes to complete. As always, answering these questions is voluntary and you can skip over any questions that you cannot or would prefer not to answer. The 'Privacy and data protection' FAQs on the study website provide details about how we protect the information you provide and how it will be used for research. If you have any problems, queries or concerns, you can contact Kantar Freephone 0800 051 0889 or cohortcovidsurvey@kantar.com.

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**IF GROUP=5**

MCSPINTRO | Welcome to the 2nd Child of the New Century COVID-19 Survey. The survey should take about 20 to 30 minutes to complete. As always, answering these questions is voluntary and you can skip over any questions that you cannot or would prefer not to answer. The 'Privacy and data protection' FAQs on the study website provide details about how we protect the information you provide and how it will be used for research. If you have any problems, queries or concerns, you can contact Kantar Freephone 0800 051 0889 or cohortcovidsurvey@kantar.com.

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**IF GROUP=6**

NSHD1946INTRO | Welcome to the 2nd MRC National Survey of Health and Development COVID-19 Survey. The survey should take about 20 to 30 minutes to complete. As always, answering these questions is voluntary and you can skip over any questions that you cannot

or would prefer not to answer. The 'Privacy and data protection' FAQs on the study website provide details about how we protect the information you provide and how it will be used for research. If you have any problems, queries or concerns, you can contact Kantar Freephone 0800 051 0889 or cohortcovidsurvey@kantar.com.

End of Block: Individual Group Intro

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Start of Block: Health – Physical Health

COVID19 | The next few questions will ask about your health Do you think that you have or have had Coronavirus?

1. Yes, confirmed by a positive test
2. Yes, based on strong personal suspicion or medical advice
3. Unsure
4. No
-8. Don't Know
-9. Don't want to answer

---

**IF COVID19 = 1,2,3**

COVID19POS | When do you think you got (or might have got) Coronavirus? *If you have thought you have had Coronavirus on more than one occasion please select the month in which you most recently think you got it.*

1. February or earlier
2. March
3. April
4. May
5. June
6. July
7. August
8. September
9. October
-8. Don't Know
-9. Don't want to answer

---

**IF COVID19 = 1,2,3**

COVIDADV | Have you sought medical advice in relation to any symptoms you have had, which you think may have been caused by Coronavirus?  
*Please select all that apply.*

1. Yes - discussed symptoms with doctor/GP/practice nurse
2. Yes - discussed symptoms with NHS 111 in England, Wales and Northern Ireland or NHS 24 in Scotland
3. Yes – accessed online advice at NHS 111 in England, Wales and Northern Ireland or NHS 24 in Scotland
4. Yes - visited pharmacist
5. Yes - visited A&E or walk in centre
6. No

-8. Don't Know
----------------

-9. Don't want to answer
--------------------------

---

**IF COVID19 = 1,2,3**

COVID\_HOSPAD | Have you been in hospital because of Coronavirus symptoms?

1. Yes
--------

2. No
-------

-8. Don't Know
----------------

-9. Don't want to answer
--------------------------

---

COVIDTEST | Have you been tested for Coronavirus?

*Please select all that apply.*

1. Yes – a throat swab or nasal swab or saliva test or nasal mucus test for current infection
---

2. Yes – a finger stick or blood test or serology test or antibody test for past infection
--

3. Yes – but I -8. Don't Know which type
--

4. No
-------

-8. Don't Know
----------------

-9. Don't want to answer
--------------------------

---

**IF COVIDTEST=1**

COVIDCURRESULT | What was the result of your throat swab or nasal swab or saliva test or nasal mucus test for current infection? If you had more than one test please report the findings of the latest test.

1. Positive - it showed I had coronavirus
---

2. Negative - it showed I did not have coronavirus
--

3. Inconclusive
-----------------

4. Waiting for results
------------------------

-8. Don't Know
----------------

-9. Don't want to answer
--------------------------

---

**IF COVIDTEST=1**

COVIDCURWHEN | When did you have this test?

1. February or earlier
------------------------

2. March
----------

3. April
----------

4. May
--------

5. June
---------

6. July
---------

7. August
-----------

8. September
--------------

9. October
------------

-8. Don't Know
----------------

-9. Don't want to answer
--------------------------

**IF COVIDTEST=2**

COVIDPASRESULT | What was the result of your finger stick or blood test or serology test or antibody test for past infection? If you had more than one test please report the findings of the latest test.

1. Positive - it showed I've had coronavirus
2. Negative - it showed I've not had coronavirus
3. Inconclusive
4. Waiting for results
-8. Don't Know
-9. Don't want to answer

---

**IF COVIDTEST=2**

COVIDPASWHEN | When did you have this test?

1. February or earlier
2. March
3. April
4. May
5. June
6. July
7. August
8. September
9. October
-8. Don't Know
-9. Don't want to answer

---

**IF COVIDTEST=3**

COVIDINCRESULT | What was the result of your coronavirus test? If you had more than one test please report the findings of the latest test.

1. Positive - it showed I had coronavirus
2. Negative - it showed I did not have coronavirus
3. Inconclusive
4. Waiting for results
-8. Don't Know
-9. Don't want to answer

---

**IF COVIDTEST=3**

COVIDINCWHEN | When did you have this test?

1. February or earlier
2. March
3. April
4. May
5. June
6. July
7. August
8. September
9. October
-8. Don't Know
-9. Don't want to answer



---

COVIDSYMPT | Have you experienced any of the following symptoms **in the past 2 weeks?**  
*Please select all that apply.*

1. Fever
2. Cough - dry
3. Cough - mucus or phlegm
4. Sore throat
5. Chest tightness
6. Shortness of breath
7. Runny nose
8. Nasal congestion
9. Sneezing
10. Muscle or body aches
11. Fatigue
12. Unusual loose motions or diarrhoea
13. Vomiting
14. Loss of smell
15. Loss of taste
16. Skin rash
17. Headaches
18. Other
19. No - none of these
-8. Don't Know
-9. Don't want to answer

---

**IF COVIDSYMPT = 18**

COVIDSYMPTO | What were the other symptoms you experienced?

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GHQ | In general, would you say your health is...

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2**

GHQPRECOVID | In general, in the **3 months before the Coronavirus outbreak in March**, would you say your health was...

1. Excellent
2. Very good
3. Good
4. Fair

5. Poor
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2**

LLI | Do you **currently** have any of the following?

*Please select all that apply.*

1. Cancer
2. Cystic fibrosis
3. Asthma
4. Chronic Obstructive Pulmonary Disease
5. Wheezy bronchitis
6. Diabetes
7. Recurrent backache, prolapsed disc, sciatica or other back problem
8. Problems with hearing
9. High blood pressure
10. Heart disease, congenital or acquired
11. None of these
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2**

LLI2 | And do you **currently** have any of the following?

*Please select all that apply.*

1. Depression or other emotional, nervous or psychiatric problems
2. Obesity
3. Infection
4. HIV / Immunodeficiency
5. Condition affecting the brain and nerves (e.g. Parkinson's, Multiple Sclerosis)
6. None of these
-8. Don't Know
-9. Don't want to answer

End of Block: Health – Physical Health

---

Start of Block: Health - Medication

PMED | **At the time of the Coronavirus outbreak in March**, were you taking any prescribed medication?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**IF PMED = 1**

PMEDTYP | Which type of prescribed medication were you taking at that time?

*Please select all that apply.*

1. Asthma medication
2. Oral contraceptive or hormone replacement therapy
3. Anti-depressant or anxiety medication
4. Diabetes medication
5. Hypertension or cardiovascular disease medication
6. Cancer chemotherapy
7. Other
-8. Don't Know
-9. Don't want to answer

---

**IF PMEDTYP = 5**

CARDMED | Were you taking any of the following medications for hypertension or cardiovascular disease at that time?

*Please select all that apply.*

1. ACE-inhibitor (e.g. Ramipril, Lisinopril)
2. Sartan (e.g. Losartan, Valsartan, Candesartan)
3. Entresto (sucubitril/valsartan)
4. None of these
-8. Don't Know
-9. Don't want to answer

---

**IF PMED = 1**

PMEDDIF | **Since the Coronavirus outbreak in March**, have you had any difficulty obtaining any of your prescribed medication?

1. Yes
2. No/Not applicable
-8. Don't Know
-9. Don't want to answer

---

**IF PMEDDIF = 1 AND MULTIPLE RESPONSES AT PMEDTYP**

PMEDDIFTYP | Which type of medication did you have difficulty obtaining?

*Please select all that apply.*

1. Asthma medication
2. Oral contraceptive or hormone replacement therapy
3. Anti-depressant or anxiety medication
4. Diabetes medication
5. Hypertension or cardiovascular disease medication
6. Cancer chemotherapy
7. Other
-8. Don't Know
-9. Don't want to answer

---

**IF PMEDDIF = 1**

PMEDDIFB | Are you still having any difficulty obtaining any of your prescribed medication?

1. Yes
2. No
3. Not applicable - no longer require this medication

- |                          |
|--------------------------|
| -8. Don't Know           |
| -9. Don't want to answer |

End of Block: Health - Medication

---

Start of Block: Health - Healthcare

APPHOSP | **At the time of the Coronavirus outbreak in March**, did you have an in-patient or out-patient appointment booked at a hospital for a consultation, investigation, treatment or surgery? *Please select all that apply.*

- |   |
|---|
| 1. Yes - for a consultation, investigation or treatment |
| 2. Yes - for surgery                                    |
| 3. No   |
| -8. Don't Know  |
| -9. Don't want to answer                                |

---

**IF APPHOSP = 1**

APPHAD | Have you now **had** your in-patient or out-patient hospital appointment for a consultation, investigation or treatment?

*If you have had more than one appointment booked, and if there are any which you have not yet had, please select 'No'.*

- |                          |
|--------------------------|
| 1. Yes                   |
| 2. No                    |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF APPHAD = 1**

APPHADH | Did your (last) appointment take place on the planned date or was it delayed?

- |   |
|---|
| 1. Appointment took place on the planned date |
| 2. Appointment was delayed                    |
| -8. Don't Know                                |
| -9. Don't want to answer                      |

---

**IF APPHAD = 1**

APPHADT | Did your (last) appointment take place in-person or by phone/video?

- |   |
|---|
| 1. In-person appointment                  |
| 2. Appointment took place via phone/video |
| -8. Don't Know                            |
| -9. Don't want to answer                  |

---

**IF APPHAD = 2**

APPNOT | Why has your in-patient or out-patient hospital appointment for a consultation, investigation or treatment not taken place?

- |   |
|---|
| 1. My appointment was postponed and has not yet happened        |
| 2. My appointment was not postponed, but it hasn't happened yet |
| 3. My appointment was cancelled                                 |

- |                          |
|--------------------------|
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF APPHOSP = 2**

APPHADS | Have you now **had** your surgery?

*If you have had more than one surgery booked, and if there are any which have you have not yet had, please select 'No'.*

- |                          |
|--------------------------|
| 1. Yes                   |
| 2. No                    |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF APPHADS = 1**

APPHADSH | Did your (last) surgery take place on the planned date or was it delayed?

- |   |
|---|
| 1. Surgery took place on the planned date |
| 2. Surgery was delayed                    |
| -8. Don't Know                            |
| -9. Don't want to answer                  |

---

**IF APPHADS= 2**

APPNOTS | Why has your surgery not taken place?

- |   |
|---|
| 1. My surgery was postponed and has not yet happened        |
| 2. My surgery was not postponed, but it hasn't happened yet |
| 3. My surgery was cancelled                                 |
| -8. Don't Know  |
| -9. Don't want to answer                                    |

---

APPMEN | **At the time of the Coronavirus outbreak in March**, did you have an appointment booked for cognitive behaviour therapy, counselling or psychological therapy?

- |                          |
|--------------------------|
| 1. Yes                   |
| 2. No                    |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF APPMEN = 1**

APPMENHAD | Have you **now** had your appointment for cognitive behaviour therapy, counselling or psychological therapy?

*If you have had more than one appointment booked, and if there are any which you have not yet had, please select 'No'.*

- |                          |
|--------------------------|
| 1. Yes                   |
| 2. No                    |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF APPMENHAD = 1**

APPMENHADH | Did your (last) appointment take place on the planned date or was it delayed?

1. Appointment took place on the planned date
2. Appointment was delayed
-8. Don't Know
-9. Don't want to answer

---

**IF APPMENHAD = 1**

APPHADTH | Did your (last) appointment take place in-person or by phone/video?

1. In-person appointment
2. Appointment took place via phone/video
-8. Don't Know
-9. Don't want to answer

---

**IF APPMENHAD = 2**

APPNOTH | Why has your appointment for cognitive behaviour therapy, counselling or psychological therapy not taken place?

1. My appointment was postponed and has not yet happened
2. My appointment was not postponed, but it hasn't happened yet
3. My appointment was cancelled
-8. Don't Know
-9. Don't want to answer

End of Block: Health - Healthcare

---

Start of Block: Health – Physical Health

**IF FFCOVIDW1 = 2**

SHIELD | Did you **at any time** receive a letter or text message from the NHS or Chief Medical Officer saying that you have been identified as someone at risk of severe illness if you catch Coronavirus, because you have an underlying disease or health condition?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

End of Block: Health – Physical Health

---

Start of Block: Family – Household Grid

HHNUM | The next questions are about who you are currently living with. How many people do you currently live with? Please include yourself.

---

**IF HHNUM > 1**

HHNUMWH | Who do you **currently** live with?

Please select all that apply.

1. Husband/Wife/Cohabiting Partner
2. Children (including adult children, step-children, adopted children, foster children or any other children you consider yourself parent to)
3. Parent or Parent-in-law (including step-parent or adoptive parent)
4. Grandparent
5. Grandchild
6. Sibling
7. Other relative
8. Friend / unrelated sharer
9. Other
-8. Don't Know
-9. Don't want to answer

---

ANYCHNL | Do you have any children who you do not live with? Please include adult children, step-children, adopted children, foster children or any other children you consider yourself parent to.

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2**

COVCHAN | Have there been any changes to the people you are living with **since the Coronavirus outbreak in March**? In other words has anyone different moved in, has someone moved out, or have you moved out to live with someone else or to be on your own?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2 AND HHNUMWH = 1 AND COVCHAN = 1**

COVPART | Have you started living with your partner **since the Coronavirus outbreak in March**?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2 AND (ANYCHNL = 1 OR HHNUMWH = 2) AND COVCHAN = 1**

COVCHIL | Have any of the following occurred **since the Coronavirus outbreak in March**? When thinking about your children please include adult children, step-children, adopted children, foster children or any other children you consider yourself parent to.

Please select all that apply.

1. At least one of my children has moved into my home
2. At least one of my children has moved out of my home
3. I have moved into one of my children's homes
4. None of these
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2 AND HHNUMWH = 3 AND COVCHAN = 1**

COVPER | Have any of the following occurred since the Coronavirus outbreak in March?

Please select all that apply.

1. At least one of my parents (or in-laws) has moved in with me
2. I have moved in with at least one of my parents (or in-laws)
3. None of these
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2 AND HHNUMWH = 4,5,6,7,8,9 AND COVCHAN = 1**

COVOTH | Have any of the following occurred since the Coronavirus outbreak in March?

Please select all that apply.

1. Someone other than a partner, parent (or in-law) or child has moved in to my home
2. I have moved in to someone other than a partner, parent (or in-law) or child's home
3. None of these
-8. Don't Know
-9. Don't want to answer

End of Block: Family – Household grid

---

Start of Block: Family – Relationships

**IF HHNUMWH <> 1**

OTHRELA | Are you in a relationship with someone at the moment?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**IF HHNUMWH = 1 OR OTHRELA = 1**

RELSAT | On a scale from 1 to 7, where '1' means that you are 'very unhappy' and '7' means that you are 'very happy', how happy is your relationship with your partner at the moment, all things considered?

1. 1: Very unhappy
2. 2
3. 3
4. 4
5. 5
6. 6
7. 7: Very happy



- |                          |
|--------------------------|
| -8. Don't Know           |
| -9. Don't want to answer |

**IF FFCOVIDW1 = 2 AND (HHNUMWH = 1 OR OTHRELA = 1)**

RELCONFL1 | **During the period between March and May**, when the lockdown restrictions were strictest, did the amount you argued with your partner change, compared to before the Coronavirus outbreak?

- |   |
|---|
| 1. My partner and I argued <b>more often</b> between March and May, compared to before the Coronavirus outbreak |
| 2. No change - same as before the Coronavirus outbreak  |
| 3. My partner and I argued <b>less often</b> between March and May, compared to before the Coronavirus outbreak |
| -8. Don't Know  |
| -9. Don't want to answer  |

**IF HHNUMWH = 1 OR OTHRELA = 1**

RELCONFL2 | **Since the national lockdown restrictions started to be eased in June**, has the amount you have argued with your partner changed, compared to when the lockdown restrictions were strictest?

- |   |
|---|
| 1. My partner and I have argued <b>more often</b> since June, compared to when the lockdown restrictions were strictest |
| 2. No change - same as during the period when lockdown restrictions were strictest                                      |
| 3. My partner and I have argued <b>less often</b> since June, compared to when the lockdown restrictions were strictest |
| -8. Don't Know  |
| -9. Don't want to answer  |

End of Block: Family – Relationships

Start of Block: Other – Family conflict change

**IF HHNUMWH = 2,3,4,5,6,7,8,9 AND FFCOVIDW1 = 1**

FAMCONFL1 | **During the period between March and May**, when the lockdown restrictions were strictest, did the amount you argued with the people you live with change compared to before the Coronavirus outbreak?

- |  |
|--|
| 1. I argued with the people I live with <b>more often</b> between March and May, compared to before the Coronavirus outbreak |
| 2. No change - same as before the Coronavirus outbreak   |
| 3. I argued with the people I live with <b>less often</b> between March and May, compared to before the Coronavirus outbreak |
| -8. Don't Know   |
| -9. Don't want to answer   |

**IF HHNUMWH = 2,3,4,5,6,7,8,9 AND FFCOVIDW1 = 1**

FAMCONFL2 | **Since the national lockdown restrictions started to be eased in June**, has the amount you have argued with the people you live with changed compared to when the lockdown restrictions were strictest?

- |  |
|--|
| 1. I have argued with the people I live with <b>more often</b> since June, compared to when the lockdown restrictions were strictest |
| 2. No change - same as during the period when lockdown restrictions were strictest   |

3. I have argued with the people I live with **less often** since June, compared to when the lockdown restrictions were strictest

-8. Don't Know

-9. Don't want to answer

End of Block: Other – Family conflict change

Start of Block: Family – Pregnancy

**IF (FFSEX = 1 AND (HHNUMWH = 1 OR OTHRELA = 1)) OR FFSEX = 2 AND COHORTID=1,2,3,4**

CURPREG | Are you or your partner (if you have one) currently pregnant?

1. Yes

2. No

-8. Don't Know

-9. Don't want to answer

**IF CUREPREG = 1**

PREDUE | How many weeks pregnant are you/is she?

End of Block: Family – Pregnancy

Start of Block: Family – Children and childcare

**IF HHNUMWH = 2**

NUMCHIL | How many of your children do you currently live with?

*Please include adult children, step-children, adopted children, foster children or any other children you consider yourself parent to.*

End of Block: Family – Children and childcare

Start of Block: Family – Child loop

**IF HHNUMWH = 2**

CHILNAME\_N | Please enter the names of the **children you live with** below. If you prefer, you can just give their first initial(s).

We only need this information to help ask questions later in the survey.

a	First child
b	Second child
c	Third child
d	Fourth child
e	Fifth child
f	Sixth child
g	Seventh child
h	Eighth child
i	Ninth child

j | Tenth child

---

**IF HHNUMWH = 2, LOOP FOR EACH CHILD**

CHILAGE | What is {CHILNAME}'s date of birth?

Please click below and record the date in the calendar.

--

---

**IF CHILAGE = DK OR REF**

CHILAGEY | How old is {CHILNAME}?

If {CHILNAME} is less than 1 year old please enter '0'

--	--

End of Block: Family – Child loop

---

Start of Block: Family – Children and childcare

**IF HHNUMWH = 2 AND FFCOVIDW1 = 1, LOOP FOR EACH CHILD**

LOOP\_CHILD\_SEX | Please record the sex of the children you live with below.

CHSEX\_N | CHSEX\_N :

1. Male
2. Female
3. Prefer not to say
-8. Don't Know

End of Block: Family – Children and childcare

---

Start of Block: Family – Caring

CAREB | **In the month before the Coronavirus outbreak in March**, did you or someone you lived with need help with personal tasks (washing, dressing), or domestic tasks (shopping, providing meals) because you (or they) could not manage them alone?  
Please select all that apply.

1. Yes - I needed help
2. Yes - someone I lived with needed help
3. No
-8. Don't Know
-9. Don't want to answer

---

**IF CAREB = 1**

WHOCAREB | **In the month before the Coronavirus outbreak in March**, who provided **you** with the help you needed?

Please code all that apply.

1. Nobody - needs were not met
2. Husband/wife/partner
3. Son or daughter or other family member (include even if not blood related)
4. Friend or neighbour
5. Voluntary helper
6. Paid/professional help
7. Other

-8. Don't Know
-9. Don't want to answer

**IF WHOCAREB = 2,3,4,5,6,7**

CAREHOURLSB | **In the month before the Coronavirus outbreak in March**, how many hours of help did **you** usually get each week?

1. Up to 4 hours
2. 5-9 hours
3. 10-19 hours
4. 20-34 hours
5. 35 hours or more
-8. Don't Know
-9. Don't want to answer

**IF CAREB = 2**

WHOCAREPB | **In the month before the Coronavirus outbreak in March**, who provided **the person you live** with the help they needed?

*Please select all that apply.*

1. Nobody - needs were not met
2. Me
3. My husband/ wife/ partner
4. Son or daughter or other family member (include even if not blood related)
5. Friend or neighbour
6. Voluntary helper
7. Paid/ professional help
8. Other
-8. Don't Know
-9. Don't want to answer

**IF WHOCAREPB = 2,3,4,5,6,7,8**

CAREHOURLSPB | **In the month before the Coronavirus outbreak in March**, how many hours of help did **the person you live** with usually get each week?

1. Up to 4 hours	<input type="checkbox"/>	<input type="checkbox"/>
2. 5-9 hours	<input type="checkbox"/>	<input type="checkbox"/>
3. 10-19 hours	<input type="checkbox"/>	<input type="checkbox"/>
4. 20-34 hours	<input type="checkbox"/>	<input type="checkbox"/>
5. 35 hours or more	<input type="checkbox"/>	<input type="checkbox"/>
-8. Don't Know	DK	<input type="checkbox"/>
-9. Don't want to answer	REF	<input type="checkbox"/>

CAREA | **In the last four weeks**, have you or someone you lived with needed help with personal tasks (washing, dressing), or domestic tasks (shopping, providing meals) because you (or they) could not manage them alone?

*Please select all that apply.*

1. Yes - I needed help
2. Yes - someone I lived with needed help
3. No
-8. Don't Know
-9. Don't want to answer

---

**IF CAREB = 1 AND CAREA = 1**

CARECHAN | Compared to **before the Coronavirus outbreak**, has the amount of help that **you** now need changed?

1. Amount of help needed has increased
2. Amount of help needed has decreased
3. Amount of help needed has stayed the same
-8. Don't Know
-9. Don't want to answer

---

**IF CAREA = 1**

CAREWHOA | **In the last four weeks**, who has provided **you** with the help you have needed?

*Please select all that apply.*

1. Nobody - needs were not met
2. Husband/ wife/ partner
3. Son or daughter or other family member (include even if not blood related)
4. Friend or neighbour
5. Voluntary helper
6. Paid/ professional help
7. Other
-8. Don't Know
-9. Don't want to answer

---

**IF CAREWHOA = 2,3,4,5,6,7**

CAREHOURSA | **In the last four weeks**, how many hours of help have you usually received each week?

1. Up to 4 hours
2. 5-9 hours
3. 10-19 hours
4. 20-34 hours
5. 35 hours or more
-8. Don't Know
-9. Don't want to answer

---

**IF CAREB = 2 AND CAREA = 2**

CARECHANP | Compared to **before the Coronavirus outbreak**, has the amount of help that **the person you live with** now needs changed?

1. Amount of help needed has increased
2. Amount of help needed has decreased
3. Amount of help needed has stayed the same
-8. Don't Know
-9. Don't want to answer

---

**IF CAREA = 2**

CAREWHOAP | **In the last four week**, who has provided **the person you live with** the help they have needed?

Please select all that apply.

1. Nobody - needs were not met
2. Me
3. My husband/ wife/ partner
4. Son or daughter or other family member (include even if not blood related)
5. Friend or neighbour
6. Voluntary helper
7. Paid/ professional help
8. Other
-8. Don't Know
-9. Don't want to answer

---

**IF CAREWHOAP = 2,3,4,5,6,7,8**

CAREHOURSAP | **In the last four week**, how many hours of help did **the person you live with** usually get each week?

1. Up to 4 hours
2. 5-9 hours
3. 10-19 hours
4. 20-34 hours
5. 35 hours or more
-8. Don't Know
-9. Don't want to answer

End of Block: Family – Children and childcare

---

Start of Block: Family – Housing

HINTRO | The next few questions are about where you are currently living.

---

COUNTRES | Which country do you live in?

1. England
2. Wales
3. Scotland
4. Northern Ireland
5. Other (specify)
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 1**

MOVE | Have you moved to a new address **since the beginning of June**?

1. Yes
2. No
-8. Don't Know

-9. Don't want to answer

---

**IF ((FFCOVIDW1 = 1 AND MOVE = 1) OR FFCOVIDW1 = 2) AND COUNTRES = 1,2,3,4**  
CMPOST | Please enter the postcode of the address at which you are currently living, even if this is a temporary address. Use capitalised letters and leave a space between the two parts of the postcode. For example WC1H 0AL.

---

**IF (FFCOVIDW1 = 1 AND MOVE = 1) OR FFCOVIDW1 = 2**  
NUMROOMS | How many rooms are there in the home where you are currently living, not counting kitchens, bathrooms, toilets, {**IF GROUP=5**: utility rooms,} halls and garages?

---

**IF NUMROOMS > 20**

NUMROOMSSC | You have said the number of rooms in your home is more than 20. If this is correct, press 'Continue'. Otherwise, please go back and amend your answer.

Continue

---

**IF MOVE=1 OR FFCOVIDW1= 2**

OUTDOORS | Do you have a garden, a patio or yard, a roof terrace or large balcony?  
*Please select all that apply.*

1. A garden
2. A patio or yard
3. A roof terrace or large balcony
4. None of the above
-8. Don't Know
-9. Don't want to answer

---

TENURE | Do you (or your household) own or rent your home or have some other arrangement?

1. Own - outright
2. Own - buying with help of a mortgage / loan
3. Pay part rent and part mortgage (shared / equity ownership)
4. Rent it
5. Live here rent-free, including rent-free in relative's / friend's / employer's property; exclude squatting
6. Squatting
7. Other arrangement
-8. Don't Know
-9. Don't want to answer

---

**IF TENURE = 1,2,3,4,5,6,7**

TENCHANGE | Has your tenure changed **since the start of the Coronavirus outbreak in March?**

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**IF TENCHANGE = 1**

TENUREBC | **At the start of the Coronavirus outbreak in March,** did you (or your household) own or rent your home or have some other arrangement?

1. Own - outright
2. Own - buying with help of a mortgage / loan
3. Pay part rent and part mortgage (shared / equity ownership)
4. Rent it
5. Live here rent-free, including rent-free in relative's / friend's / employer's property; exclude squatting
6. Squatting
7. Other arrangement
-8. Don't Know
-9. Don't want to answer

End of Block: Family – Housing

---

Start of Block: Finance, employment and education – Financial Situation

FININTRO | The following questions are about your financial situation, your job, or any other things that you have been doing.

---

**IF FFCOVIDW1 = 2**

FINANCIALMANB | **In the 3 months before the Coronavirus outbreak in March,** how well would you say you personally were managing financially?

1. Living comfortably
2. Doing all right
3. Just about getting by
4. Finding it quite difficult
5. Finding it very difficult
-8. Don't Know
-9. Don't want to answer

---

FINANCIALMAND | Overall, how do you feel your **current** financial situation compares to **before the Coronavirus outbreak?**

1. I'm much worse off
2. I'm a little worse off
3. I'm about the same
4. I'm a little better off
5. I'm much better off
-8. Don't Know



-9. Don't want to answer

---

FINEXP | In **12 months' time**, how do you expect your financial situation will compare to **before the Coronavirus outbreak**?

- |                                  |
|----------------------------------|
| 1. I will be much worse off      |
| 2. I will be a little worse off  |
| 3. I will be about the same      |
| 4. I will be a little better off |
| 5. I will be much better off     |
| -8. Don't Know                   |
| -9. Don't want to answer         |

---

**IF FFCOVIDW1 = 1 AND FINANCIALMAND = 1,2**

FINHTY | You said that you are worse off now compared to before the Coronavirus outbreak. Have you {if living with a partner: or your partner} done any of the following as a result of this?

*Please select all that apply.*

- |   |
|---|
| 1. Reduced spending                       |
| 2. Used savings                           |
| 3. New borrowing from bank or credit card |
| 4. New borrowing from family and friends  |
| 5. None of these                          |
| -8. Don't Know                            |
| -9. Don't want to answer                  |

End of Block: Finance, employment and education – Financial Situation

---

Start of Block: Finance, employment and education – Benefits claimed

**IF FFCOVIDW1 = 2**

BENEFITB | In the **three months before the Coronavirus outbreak in March**, did you (or your partner if you have one) receive any of the following?

*Please select all that apply.*

- |  |
|--|
| 1. Free school meals for children  |
| 2. Universal credit  |
| 3. Pension credit  |
| 4. Income support or Job Seeker's Allowance  |
| 5. Working Tax Credit or Child Tax credit  |
| 6. Employment and Support Allowance  |
| 7. Statutory sick pay  |
| 8. Housing benefit   |
| 9. Council tax support or reduction  |
| 11. Carers allowance, Personal independence payments, or Disability Living Allowance |
| 12. No - none of these   |
| -8. Don't Know   |
| -9. Don't want to answer   |
-

BENEFITD | **Since the Coronavirus outbreak in March**, have you (or your partner if you have one) made any **new** claims for the following?

*Please select all that apply.*

1. Free school meals for children
2. Universal credit
3. Employment and Support Allowance
4. Statutory sick pay
5. Council tax support or reduction
6. Carers allowance, Personal independence payments, or Disability Living Allowance
7. New government financial support for self employed people
8. No - none of these
-8. Don't Know
-9. Don't want to answer

---

BENEFITOTH | **Since the Coronavirus outbreak in March**, have you used any of the following?

*Please select all that apply.*

1. Mortgage or rent payment holidays
2. Council tax payment holiday
3. Other debt repayment or interest payment holidays
4. No - none of these
-8. Don't Know
-9. Don't want to answer

End of Block: Finance, employment and education – Benefits claimed

---

Start of Block: Finance, employment and education – Financial transfers

FINGIVB | **Between March 2019 and March 2020**, did you **give** financial help, in the form of money or by paying for goods (for example groceries, medicines) to any of the following?

*Please select all that apply.*

1. Adult children, including in-laws
2. Parents or grandparents, including in-laws
3. Siblings
4. Former spouse or partner
5. Friends or Neighbours
6. Someone else
7. No - did not give financial help to anyone
-8. Don't Know
-9. Don't want to answer

---

FINGIVD | **Since the Coronavirus outbreak in March**, have you **given** financial help, in the form of money or by paying for goods (for example groceries, medicines) to any of the following?

*Please select all that apply.*

1. Adult children, including in-laws
--------------------------------------

2. Parents or grandparents, including in-laws
3. Siblings
4. Former spouse or partner
5. Friends or Neighbours
6. Someone else
7. No - did not give financial help to anyone
-8. Don't Know
-9. Don't want to answer

---

**IF FINGIVB = 1,2,3,4,5,6 AND FINGIVD = 1,2,3,4,5,6**

FINGIVCHAN | **Compared with before the Coronavirus outbreak in March**, has the amount of financial help you have been giving since then ....?

1. Increased
2. Decreased
3. Stayed the same
-8. Don't Know
-9. Don't want to answer

---

FINRECB | **Between March 2019 and March 2020**, did you **receive** financial help, in the form of money or by paying for goods (for example groceries, medicines) from any of the following?

*Please select all that apply.*

1. Adult children, including in-laws
2. Parents or grandparents, including in-laws
3. Siblings
4. Former spouse or partner
5. Friends or Neighbours
6. Someone else
7. No - did not receive help from anyone
-8. Don't Know
-9. Don't want to answer

---

FINRECD | **Since the Coronavirus outbreak in March**, have you **received** financial help, in the form of money or by paying for goods (for example groceries, medicines) from any of the following?

*Please select all that apply.*

1. Adult children, including in-laws
2. Parents or grandparents, including in-laws
3. Siblings
4. Former spouse or partner
5. Friends or Neighbours
6. Someone else
7. No - did not receive help from anyone
-8. Don't Know
-9. Don't want to answer

---

**IF FINRECB = 1,2,3,4,5,6 AND FINRECD = 1,2,3,4,5,6**

FINRCHAN | **Compared with before the Coronavirus outbreak in March**, has the amount of financial help you have been receiving since then ....?

- |                          |
|--------------------------|
| 1. Increased             |
| 2. Decreased             |
| 3. Stayed the same       |
| -8. Don't Know           |
| -9. Don't want to answer |

End of Block: Finance, employment and education – Financial transfers

Start of Block: Finance, employment and education – Employment circumstances: prior outbreak

**IF FFCOVIDW1 = 2**

ECONACTIVITYB | Which of these best describes what you were doing just **before the Coronavirus outbreak in March**?

*If you were doing more than one activity, please choose the activity that you spent most time doing.*

- |  |
|--|
| 1. Employed                                  |
| 2. Self-employed                             |
| 3. In unpaid/ voluntary work                 |
| 4. Apprenticeship                            |
| 5. Unemployed                                |
| 6. Permanently sick or disabled              |
| 7. Looking after home or family              |
| 8. In education at school/college/university |
| 9. Retired                                   |
| 10. Doing something else                     |
| -8. Don't Know                               |
| -9. Don't want to answer                     |

**IF FFCOVIDW1 = 2 AND ECONACTIVITYB = 1,2,3,4**

WRKHOURSB | Still thinking about the job you were doing **just before the Coronavirus outbreak in March**, how many hours per week did you usually work, not including meal breaks but including overtime?

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

**IF WRKHOURSB >= 100**

WRKHOURSBCHK | You have said you worked for 100 or more hours a week. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue
----------

**IF FFCOVIDW1 = 2 AND ECONACTIVITYB = 1,2,3,4**

JTITLBLEB | What was your job title at that time?

<input type="text"/>
----------------------

**IF FFCOVIDW1 = 2 AND ECONACTIVITYB = 1,2,3,4**

JDOB | Please describe in your own words what you mainly did in this job.  
Please describe in detail (for example job title and the type of work).

**IF NUMBER OF CHARACTERS AT JDOB < 15**

JDOBCHK | The answer you've given is quite short. Before continuing, please go back and check your answer to make sure you have fully described what you did in this job.

Continue

**IF FFCOVIDW1 = 2 AND ECONACTIVITYB = 1,3,4**

JMAKEB | What did the firm or organisation you worked for mainly make or do?

**IF NUMBER OF CHARACTERS AT JMAKEB < 15**

JMAKEBCHK | The answer you've given is quite short. Before continuing, please go back and check your answer to make sure you have fully described the firm or organisation you worked for.

Continue

**IF FFCOVIDW1 = 2 AND ECONACTIVITYB = 2**

JMAKESEB | What did your firm or organisation mainly make or do?

**IF NUMBER OF CHARACTERS AT JMAKESEB < 15**

JMAKESEBCHK | The answer you've given is quite short. Before continuing, please go back and check your answer to make sure you have fully described your firm or organisation.

Continue

**IF FFCOVIDW1 = 2 AND ECONACTIVITYB = 1**

ZEROHB | In this job, did you have a zero hours contract?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

End of Block: Finance, employment and education – Employment circumstances: prior outbreak

Start of Block: Finance, employment and education – Education: prior outbreak

**IF FFCOVIDW1 = 2 AND ECONACTIVITYB = 8**

STUDYORG | Where were you studying at that time?

1. School (including school 6th Form)
2. College (including 6th Form College)
3. University
4. Other
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 =2 AND ECONACTIVITYB = 8**

STUDYHRS | Were you studying full or part time?

1. Full-time
2. Part time
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 =2 AND ECONACTIVITYB = 8**

COURSLEVL | Still thinking about the education you were doing **just before the Coronavirus outbreak in March**, what level of qualification were you studying for at that time?

1. University Higher Degree – Doctorate (PhD), Masters Degree (MA, MSc, Mphil)
2. University Degree (e.g. BA, BSc)
3. Foundation degree
4. Other postgraduate or equivalent professional qualifications
5. A Level/A2 Level (GCE Advanced Level)/ Advanced Highers
6. AS Level (not complete A Level)/Highers
7. GCSE/Standard Grade or equivalent
8. Other academic qualification
9. BTEC
10. GNVQ/NVQ/HNC/or equivalent
11. SQA
12. Modern apprenticeship/trade apprenticeship
13. City and Guilds Certificate
14. Vocational driving licence e.g. HGV
15. Other qualification
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 =2 AND ECONACTIVITYB = 8**

STUDYORGNAME\_NEW | In the boxes below please write the full name of the school, college, university or other organisation at which you were studying, and the town in which it is in:

1. Name	
2. Town	

---

**IF FFCOVIDW1 =2 AND ECONACTIVITYB = 8**

COURSE DUR | What was the duration of the course?

1. One year
2. Two years
3. Three years
4. Four years
5. Other (please specify)
-8. Don't Know
-9. Don't want to answer

---

**IF COURSDUR=5 (OTHER)**

COURSE DUR\_5\_TEXT | Course duration - Other (please specify) - Text

---

**IF FFCOVIDW1 =2 AND ECONACTIVITYB = 8 AND COURSEDUR 2,3,4,5**

STUDY YEAR | Which year of the course were you in during the Summer term, that is between the end of the Easter holiday and the start of the summer holiday?

1. First year
2. Second year
3. Third year
4. Fourth year
5. Other
-8. Don't Know
-9. Don't want to answer

---

**IF STUDY YEAR=5 (OTHER)**

STUDY YEAR\_TEXT | Current year of study - Other (please specify)- Text

---

**IF FFCOVIDW1 = 1 AND FFGROUP = 4**

PREV STUD | Were you in education at a school, college or University at the time of the Coronavirus outbreak in March 2020?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**IF PREVSTUD = 1**

PRCOURSLEVEL | What level of qualification were you studying for at that time?

1. University Higher Degree (e.g. PhD, Masters)
2. University Degree (e.g. BA, BSc)
3. Foundation degree
4. Other postgraduate or equivalent professional qualifications

5. A Level/ Advanced Highers or equivalent
6. AS Level (not complete A Level)/ Highers
7. GCSE/Standard Grade or equivalent
8. Other academic qualification
9. BTEC
10. GNVQ/ NVQ/ HNC/ or equivalent
11. SQA
12. Modern apprenticeship/trade apprenticeship
13. City and Guilds Certificate
14. Vocational driving licence e.g. HGV
15. Other qualification
-8. Don't Know
-9. Don't want to answer

**IF (FFCOVIDW1 =2 AND ECONACTIVITYB = 8) OR PREVSTUD = 1**

LEARNACTIVITYCHNG | Which of the following applied to your learning activity during the Summer term?

1. There was no interruption to learning activities
2. I took a break from learning activities
3. I was studying at home with online resources provided by my learning establishment
4. I was studying at home with no online resources provided by my learning establishment
5. My course finished earlier than planned
6. I dropped out from learning activities
7. Other (please specify)
-8. Don't Know
-9. Don't want to answer

**IF LEARNACTIVITYCHNG = 3,4**

LEARNSATISFACTION | Using a scale of 0 to 10, where 0 means 'completely disagree' and 10 means 'completely agree', please indicate the extent to which you agree or disagree with each of the statements below.

a	<i>I was satisfied with the learning resources provided by my learning establishment during the Summer term</i>
b	<i>I was able to continue my studies effectively whilst being at home during the Summer term</i>

1. 0: Completely disagree	_1	<input type="radio"/>
2. 1	_2	<input type="radio"/>
3. 2	_3	<input type="radio"/>
4. 3	_4	<input type="radio"/>
5. 4	_5	<input type="radio"/>
6. 5	_6	<input type="radio"/>
7. 6	_7	<input type="radio"/>
8. 7	_8	<input type="radio"/>
9. 8	_9	<input type="radio"/>
10. 9	_10	<input type="radio"/>
11. 10: Completely agree	_11	<input type="radio"/>
-8. Don't Know	DK	<input type="radio"/>
-9. Don't want to answer	REF	<input type="radio"/>



End of Block: Finance, employment and education – Education: prior outbreak

Start of Block: Finance, employment and education – Economic activity: during outbreak - if in education or non-job apprenticeship

**IF (FFCOVIDW1 =2 AND ECONACTIVITYB = 8) OR PREVSTUD = 1**

COURSERET | Have you returned (or will you be returning) to your course in the autumn term?

1. Yes
2. No - I have completed the course
3. No - I will be returning to the course at a later point
4. No - I have dropped out from the course
-8. Don't Know
-9. Don't want to answer

End of Block: Finance, employment and education – Economic activity: during outbreak - if in education or non-job apprenticeship

Start of Block: Finance, employment and education – Education and employment MCS only

**IF FFGROUP = 4 AND (NOT(COURSERET = 1,3))**

EDUOFFER | Have you, at any stage, formally accepted an offer for a place on a new college or university course or apprenticeship programme which will start (or has just started) in the Autumn term?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

**EDUOFFER = 1**

EDUORNAME\_GR | In the boxes below please write the full name of the college, university or other organisation at which you have been offered a place, and the town in which it is in:

1. Name	
2. Town	

**EDUOFFER = 1**

EDUOFFLEV | What level is the course on which you have been offered a place?

1. University Higher Degree – Doctorate (PhD), Masters Degree (MA, MSc, MPhil)
2. University Degree (e.g. BA, BSc)
3. Foundation degree
4. Other postgraduate or equivalent professional qualifications
5. A Level/A2 Level (GCE Advanced Level)/Advanced Highers
6. AS Level (not complete A Level)/Highers
7. GCSE/Standard Grade or equivalent
8. Other academic qualification
9. BTEC
10. GNVQ/NVQ/HNC/or equivalent
11. SQA

12. Modern apprenticeship/trade apprenticeship
13. City and Guilds Certificate
14. Vocational driving licence e.g. HGV
15. Other qualification
-8. Don't Know
-9. Don't want to answer

**EDUOFFER = 1**

EDUOFFERINTENT | Have you started, or will you be starting this course or apprenticeship?

1. Yes - I have started this course or apprenticeship
2. Yes - I will be starting this course or apprenticeship
3. No - I have deferred entry to this course or apprenticeship
4. No - I do not plan to do the course or apprenticeship anymore
5. Not sure / Still deciding
-8. Don't Know
-9. Don't want to answer

End of Block: Finance, employment and education – Education and employment MCS only

Start of Block: Finance, employment and education – Employment circumstances: now

**IF FFCOVIDW1 = 1 AND GROUP <> 4**

**IF FFCOVIDW1 = 1 AND GROUP = 4 AND PREVSTUD = 2 AND (EDUOFFER = 2 OR EDUOFFERINTENT = 3, 4, 5, DK or REF)**

**IF FFCOVIDW1 = 2 AND GROUP <> 4 AND ECONACTIVITYB <> 8**

**IF FFCOVIDW1 = 2 AND GROUP <> 4 AND (COURSESET = 2, 3, 4, DK or REF)**

**IF FFCOVIDW1 = 2 AND GROUP = 4 AND ECONACTIVITYB <> 8 AND (EDUOFFER = 2 OR EDUOFFERINTENT = 3, 4, 5, DK or REF).**

**IF GROUP <> 4 AND COURSESET = 2, 3, 4, DK or REF**

**IF GROUP = 4 AND COURSESET = 2, 4, DK or REF AND (EDUOFFER = 2 OR EDUOFFERINTENT = 3, 4, 5, DK or REF)**

ECONACTIVITYD | Which of these would you say best describes your situation **now**?

1. Employed and currently working (or on annual leave/holiday)
2. Employed but on paid leave (including furlough)
3. Employed and on unpaid leave
4. Apprenticeship
5. In unpaid/voluntary work
6. Self-employed and currently working (or on holiday)
7. Self-employed but not currently working
8. Unemployed
9. Permanently sick or disabled
10. Looking after home or family
11. In education at school/college/university
12. Retired
13. Doing something else
-8. Don't Know
-9. Don't want to answer

**IF ECONACTIVITYD = 1,4,5,6**

WRKHOURSD | And how many hours per week do you usually work **now**, not including meal breaks but including overtime?

--	--	--

---

**IF WRKHOURSD > 100**

WRKHOURSDCHK | You have said that you work for 100 or more hours a week. If this is correct, please select 'Continue'. Otherwise please go back and amend your answer.

Continue

End of Block: Finance, employment and education – Employment circumstances: now

---

Start of Block: Finance, employment and education – Employment circumstances: during outbreak

**IF ECONACTIVITYD = 1,4,5,6**

WRKLOCATIOND | Which of the following best describes your work location?

1. Work from your own home
2. Work at employer's premises
3. Work some days at home and some days at employer's premises
4. Other
-8. Don't Know
-9. Don't want to answer

---

**IF WRKLOCATIOND = 1,3**

HWRKSAT\_N | Using a scale of 0 to 10, where 0 means 'completely disagree' and 10 means 'completely agree', please indicate the extent to which you agree or disagree with the statement below.

I am able to work effectively whilst being at home

1. 0 Completely disagree
2. 1
3. 2
4. 3
5. 4
6. 5
7. 6
8. 7
9. 8
10. 9
11. 10 Completely agree
-8. Don't Know
-9. Don't want to answer

---

**IF ECONACTIVITYD = 1,4,5,6**

KEYWORKERD | Are you a Key worker, or has your work been classified as critical to the Covid-19 response?

1. Yes
2. No

- 8. Don't Know
- 9. Don't want to answer

**IF ECONACTIVITYD = 1,2,3,4,5,6,7**

JOBSTATIS | All things considered, how satisfied or dissatisfied are you with your present job overall?

- 1. Very satisfied
- 2. Somewhat satisfied
- 3. Neither satisfied nor dissatisfied
- 4. Dissatisfied
- 5. Very dissatisfied
- 8. Don't Know
- 9. Don't want to answer

**IF FFCOVIDW1 = 2 AND HHNUMWH = 1**

PECONACTIVITYB | Which of these best describes what **your partner** was doing **just before the Coronavirus outbreak in March**? If they were doing more than one activity, please choose the activity that they spent most time doing.

- 1. Employed
- 2. Self-employed
- 3. In unpaid/ voluntary work
- 4. Apprenticeship
- 5. Unemployed
- 6. Permanently sick or disabled
- 7. Looking after home or family
- 8. In education at school/college/university
- 9. Retired
- 10. Doing something else
- 8. Don't Know
- 9. Don't want to answer

End of Block: Finance, employment and education – Employment circumstances: during outbreak

Start of Block: Finance, employment and education – Employment circumstances: prior outbreak - partner

**IF FFCOVIDW1 = 2 AND PECONACTIVITYB = 1,2,3,4**

PWRKHOURSB | How many hours per week did **your partner** usually work, not including meal breaks but including overtime?

--	--	--

**IF PWRKHOURSB > 100**

PWRKHOURSBCHK | You have said that your partner worked for 100 or more hours a week. If this is correct, please select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFCOVIDW1 = 2 AND PECONACTIVITYB = 1,2,3,4**

PJTITLEB | What was your partner's job title?

---

**IF FFCOVIDW1 = 2 AND PECONACTIVITYB = 1,2,3,4**

PJDOB | Please describe in your own words what your partner mainly did in this job. Please describe in detail (for example job title and the type of work).

---

**IF PJDOBCHK < 15**

PJDOBCHK | The answer you've given is quite short. Before continuing, please go back and check your answer to make sure you have fully described what your partner did in this job.

Continue

---

**IF FFCOVIDW1 = 2 AND PECONACTIVITYB = 1,3,4**

PJMAKEB | What did the firm or organisation your partner worked for mainly make or do? Please describe in detail (for example manufacturing, processing or distribution, goods produced, materials used, wholesale or retail).

---

**IF PJMAKEB < 15**

PJMAKEBCHK | The answer you've given is quite short. Before continuing, please go back and check your answer to make sure you have fully described the firm or organisation your partner worked for.

Continue

---

**IF FFCOVIDW1 = 2 AND PECONACTIVITYB = 2**

PJMAKESEB | What did your partner's firm or organisation mainly make or do? Please describe in detail (for example manufacturing, processing or distribution, goods produced, materials used, wholesale or retail).

---

**IF PJMAKESEB < 15**

PJMAKESEBCHK | The answer you've given is quite short. Before continuing, please go back and check your answer to make sure you have fully described your partner's firm or organisation.

Continue

---

**IF FFCOVIDW1 = 2 AND PECONACTIVITYB = 1**

PZEROHB | In this job, did your partner have a zero hours contract?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

End of Block: Finance, employment and education – Employment circumstances: during outbreak

Start of Block: Finance, employment and education – Economic activity: since outbreak - partner

**IF HHNUMWH = 1**

PECONACTIVITYD | Which of these would you say best describes **your partner's** situation **now**?

1. Employed and currently working (or on annual leave/holiday)
2. Employed but on paid leave (including furlough)
3. Employed and on unpaid leave
4. Apprenticeship
5. In unpaid/voluntary work
6. Self-employed and currently working (or on holiday)
7. Self-employed but not currently working
8. Unemployed
9. Permanently sick or disabled
10. Looking after home or family
11. In education at school/college/university
12. Retired
13. Doing something else
-8. Don't Know
-9. Don't want to answer

**IF PECONACTIVITYD = 1,4,5,6**

PWRKHOURSD | And how many hours per week does **your partner** usually work **now**, not including meal breaks?

--	--	--

**IF PWRKHOURSD > 100**

PWRKHOURSDCHK | You have said that your partner works for 100 or more hours a week. If this is correct, select 'Continue'. Otherwise, please go back and amend your answer.

Continue
----------

**IF PECONACTIVITYD = 1,4,5,6**

PKEYWORKER | Is **your partner** a Key worker, or has their work been classified as critical to the Covid-19 response?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

End of Block: Finance, employment and education – Economic activity: since outbreak - partner

---

Start of Block: Health – Health behaviours

SMOKING | The next set of questions are about smoking, drinking alcohol, exercise, diet and sleep. Which of these statements applies to you?

- |  |
|--|
| 1. I've never smoked cigarettes                          |
| 2. I used to smoke cigarettes but don't at all now       |
| 3. I now smoke cigarettes occasionally but not every day |
| 4. I smoke cigarettes every day                          |
| -8. Don't Know   |
| -9. Don't want to answer                                 |
- 

**IF FFCOVIDW1 = 2 SMOKING = 3,4**

NUMCIGSPP | In the **month before** the Coronavirus outbreak in March, how many cigarettes a day did you usually smoke?

**IF NUMCIGSPP > 60**

NUMCIGSPPCHK | You have said that you smoked more than 60 cigarettes a day. If this is correct, please select 'Continue'. Otherwise, please go back and amend your answer.

Continue

---

**IF SMOKING = 3,4**

NUMCIGSSP | **In the last four weeks**, how many cigarettes a day have you typically smoked?

**IF NUMCIGSP > 60**

NUMCIGSSPCHK | You have said that you smoke more than 60 cigarettes a day. If this is correct, please select 'Continue'. Otherwise, please go back and amend your answer.

Continue

---

VAPE | Now thinking about electronic cigarettes or vaping devices, which of these statements applies to you?

- |  |
|--|
| 1. I've never used an electronic cigarette or vaping device                            |
| 2. I used to use an electronic cigarette or a vaping device but don't at all now       |
| 3. I now use an electronic cigarette or a vaping device occasionally but not every day |
| 4. I use electronic cigarettes or vaping devices every day                             |
| -8. Don't Know   |
| -9. Don't want to answer   |

---

**IF VAPE = 3,4**

VAPESP | **In the last four weeks**, has the amount you have been using an electronic cigarette or vaping device changed?

1. Yes - I have used an electronic cigarette or vaping device more often
2. Yes - I have used an electronic cigarette or vaping device less often
3. No
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2**

ALDRPP | **In the month before the Coronavirus outbreak in March**, how often did you have a drink containing alcohol?

1. 4 or more times a week
2. 2-3 times a week
3. Once a week
4. Less than once a week
5. Never
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 2 AND ALDRPP = 1,2,3,4**

AUNDPP | In the **month before the Coronavirus outbreak in March**, how many standard alcoholic drinks have you had on a typical day when you were drinking?

1. 1-2
2. 3-4
3. 5-6
4. 7-9
5. 10+
-8. Don't Know
-9. Don't want to answer

---

ALDRSP | **In the last four weeks**, how often have you had a drink containing alcohol?

1. 4 or more times a week
2. 2-3 times a week
3. Once a week
4. Less than once a week
5. Never
-8. Don't Know
-9. Don't want to answer

---

**IF ALDRSP = 1,2,3,4**

AUNDSP | **In the last four weeks**, how many standard alcoholic drinks did you have on a typical day when you were drinking?

1. 1-2
2. 3-4



3. 5-6
4. 7-9
5. 10+
-8. Don't Know
-9. Don't want to answer

**IF ALDRSP = 1,2,3,4**

AUSDSP | Since the national lockdown restrictions started to be eased in June, how often have you found you were not able to stop drinking once you had started?

1. Never
2. Less than monthly
3. Monthly
4. Weekly
5. Daily or almost daily
-8. Don't Know
-9. Don't want to answer

**IF FFCOVIDW1 = 2**

EXCISEPP | In the month before the Coronavirus outbreak in March, on how many days in a typical week did you do 30 minutes or more of exercise where you are working hard enough to raise your heart rate and break into a sweat?

EXCISESP | In the last four weeks, on how many days in a typical week did you do 30 minutes or more of exercise where you are working hard enough to raise your heart rate and break into a sweat?

**IF FFCOVIDW1 = 2**

FRTVEGPP | In the month before the Coronavirus outbreak, how many portions of fresh fruit and vegetables did you eat in a typical day?

*A portion of fruit could be a whole piece of fruit, like an apple or banana or 80g of fruit (like in a fruit salad). A portion of vegetables is 3 heaped tablespoons of cooked vegetables or beans /pulses or a handful of cherry tomatoes or a small bowl of salad. It does not include potatoes. Juice/smoothies can count as 1 portion per day.*

 

FRTVEGSP | In the last four weeks, how many portions of fresh fruit and vegetables have you eaten in a typical day?

*A portion of fruit could be a whole piece of fruit, like an apple or banana or 80g of fruit (like in a fruit salad). A portion of vegetables is 3 heaped tablespoons of cooked vegetables or beans /pulses or a handful of cherry tomatoes or a small bowl of salad. It does not include potatoes. Juice/smoothies can count as 1 portion per day.*

---

**IF FFCOVIDW1 = 2**

HSLEEPPP\_N | In the **month before the Coronavirus outbreak in March**, how many hours did you sleep each night on average?

You can enter whole hours (e.g. 1) or half hours (e.g. 1.5). Please round to the nearest half an hour.

---

HSLEEPSP\_N | **In the last four weeks**, how many hours have you slept each night on average?

You can enter whole hours (e.g. 1) or half hours (e.g. 1.5). Please round to the nearest half an hour.

---

WEIGHT | The next question is about your weight.

Would you prefer to report your weight in kilograms or stones and pounds?

- |                                      |
|--------------------------------------|
| 1. Kilograms                         |
| 2. Stones and Pounds                 |
| 3. I do not wish to report my weight |

---

**IF WEIGHT = 1**

WGHTKG | What is your weight in kilograms?

---

**IF WGHTKG < 35 OR WGHTKG > 150**

WGHTKGCHK | You have said that you weigh {ANSWER AT WGHTKG} kilograms. If this weight is correct, please select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF WEIGHT = 2**

WGHTSTP\_1 | Please enter your weight in stones and pounds.

First, in the box below, enter stones. Then on the next screen, enter pounds.

---

**IF WEIGHT = 2**

WGHTSTP\_2 | Please enter your weight in stones and pounds.

Please enter pounds.



---

**IF WGHTSTP\_ < 6 OR WGHTSTP > 25**

WGHTSTPCHK | You have said that you weigh {ANSWER AT WGHTSTP\_} stones. If this weight is correct, please select 'Continue'. Otherwise please go back and amend your answer.

Continue

End of Block: Health – Health behaviours

---

Start of Block: Other – Contact

---

SCON1 | The next few questions are about the contact you have had with people you do not live with in the last seven days.

**In the last seven days**, on how many days did you meet up in person with any of your family or friends who do not live with you?

1. Every day	<u>_1</u>	<input type="radio"/>
2. 4-6 days	<u>_2</u>	<input type="radio"/>
3. 2-3 days	<u>_3</u>	<input type="radio"/>
4. 1 day	<u>_4</u>	<input type="radio"/>
5. Never	<u>_5</u>	<input type="radio"/>
-8. Don't Know	DK	<input type="radio"/>
-9. Don't want to answer	REF	<input type="radio"/>

---

SCON2 | **In the last seven days**, on how many days did you talk to family or friends you do not live with via phone or video calls?

1. Every day	<u>_1</u>	<input type="radio"/>
2. 4-6 days	<u>_2</u>	<input type="radio"/>
3. 2-3 days	<u>_3</u>	<input type="radio"/>
4. 1 day	<u>_4</u>	<input type="radio"/>
5. Never	<u>_5</u>	<input type="radio"/>
-8. Don't Know	DK	<input type="radio"/>
-9. Don't want to answer	REF	<input type="radio"/>

---

SCON3 | **In the last seven days**, on how many days did you keep in contact with family or friends you do not live with by email or text or other electronic messaging?

1. Every day	<u>_1</u>	<input type="radio"/>
2. 4-6 days	<u>_2</u>	<input type="radio"/>
3. 2-3 days	<u>_3</u>	<input type="radio"/>
4. 1 day	<u>_4</u>	<input type="radio"/>
5. Never	<u>_5</u>	<input type="radio"/>
-8. Don't Know	DK	<input type="radio"/>
-9. Don't want to answer	REF	<input type="radio"/>

---

SCON4 | **In the last seven days**, on how many days did you take part in an online community activity, e.g. an online community group, online chat group, street or neighbourhood social media group?

1. Every day	_1	o
2. 4-6 days	_2	o
3. 2-3 days	_3	o
4. 1 day	_4	o
5. Never	_5	o
-8. Don't Know	DK	o
-9. Don't want to answer	REF	o

SCON5 | **In the last seven days**, on how many days did you give help to people outside of your household affected by Coronavirus or the current restrictions?

1. Every day
2. 4-6 days
3. 2-3 days
4. 1 day
5. Never
-8. Don't Know
-9. Don't want to answer

End of Block: Other – Contact

Start of Block: COVID, Social, and Mental health – Social provision

**IF COHORTID = 3 OR COHORTID = 4**

SOCPROV\_ | In answering the following questions, think about your current relationships with friends, family members, community members, and so on. Please indicate to what extent each statement describes your current relationships with other people.

a	<i>I have family and friends who help me feel safe, secure and happy</i>
b	<i>There is someone I trust whom I would turn to for advice if I were having problems</i>
c	<i>There is no one I feel close to</i>

1. Very true
2. Partly true
3. Not true at all
-8. Don't Know
-9. Don't want to answer

SICK | If you were sick in bed how much could you count on the people around you to help out?

1. Not at all
2. A little
3. Somewhat
4. A great deal
-8. Don't Know
-9. Don't want to answer

---

LISTEN | If you needed to talk about your problems and private feelings, how much would the people around you be willing to listen?

1. Not at all
2. A little
3. Somewhat
4. A great deal
-8. Don't Know
-9. Don't want to answer

End of Block: COVID, Social, and Mental health – Social provision

---

Start of Block: COVID, Social, and Mental health – Loneliness

LONELY\_ | LONELY\_ :

a	<i>How often do you feel that you lack companionship?</i>
b	<i>How often do you feel left out?</i>
c	<i>How often do you feel isolated from others?</i>
d	<i>How often do you feel lonely?</i>

1. Hardly ever
2. Some of the time
3. Often
-8. Don't Know
-9. Don't want to answer

End of Block: COVID, Social, and Mental health – Loneliness

---

Start of Block: COVID, Social, and Mental health – Life satisfaction

SATN | Overall, how satisfied are you with your life nowadays, where 0 means 'not at all' and 10 means 'completely'?

1. 0: Not at all satisfied
2. 1
3. 2
4. 3
5. 4
6. 5
7. 6
8. 7
9. 8
10. 9
11. 10: Completely satisfied
-8. Don't Know
-9. Don't want to answer

End of Block: COVID, Social, and Mental health – Life satisfaction

---

Start of Block: COVID, Social, and Mental health – Mental health scale

**IF FFCOVIDW1 = 1**

MHBEF | In the 3 months before the Coronavirus outbreak in March, in general would you say your mental health was...

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
-8. Don't Know
-9. Don't want to answer

---

**IFFFCOVIDW1 = 1**

MHNOW | Thinking about now, in general would you say your mental health is...

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 1**

CONTRL | Which of these statements is more true for you?

1. I usually have a free choice and control over my life
2. Whatever I do has no real effect on what happens to me
-8. Don't Know
-9. Don't want to answer

End of Block: COVID, Social, and Mental health – Mental health scale

---

Start of Block: COVID, Social, and Mental health – MCS Mental health scale

**IF FFCOHORTID = 4**

PHDE | The next few questions are about how you have felt over the last 30 days.

During the last 30 days, about how often did you feel so depressed that nothing could cheer you up?

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOHORTID = 4**

PHHO | During the last 30 days, about how often did you feel hopeless?

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOHORTID = 4**

PHRF | **During the last 30 days**, about how often did you feel restless or fidgety?

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOHORTID = 4**

PHEE | **During the last 30 days**, about how often did you feel that everything was an effort?

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOHORTID = 4**

PHWO | **During the last 30 days**, about how often did you feel worthless?

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOHORTID = 4**

PHNE | **During the last 30 days**, about how often did you feel nervous?

1. All of the time
2. Most of the time
3. Some of the time
4. A little of the time
5. None of the time
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOHORTID = 4,5**

WEMWBS\_GRID | Please select the answer that best describes your experience of each **over the last two weeks**.

a	<i>I've been feeling optimistic about the future</i>
b	<i>I've been feeling useful</i>
c	<i>I've been feeling relaxed</i>
d	<i>I've been dealing with problems well</i>
e	<i>I've been thinking clearly</i>
f	<i>I've been feeling close to other people</i>
g	<i>I've been able to make up my own mind about things</i>

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
-8. Don't Know
-9. Don't want to answer

End of Block: COVID, Social, and Mental health – MCS Mental health scale

---

Start of Block: COVID, Social, and Mental health – NCDS & BCS70 Mental health scale

**IF FFCOHORTID = 1,2**

MALAISE\_N | The next questions are concerned with how you are feeling generally.

a	<i>Do you feel tired most of the time?</i>
b	<i>Do you often feel miserable or depressed?</i>
c	<i>Do you often get worried about things?</i>
d	<i>Do you often get in a violent rage?</i>
e	<i>Do you often suddenly become scared for no good reason?</i>
f	<i>Are you easily upset or irritated?</i>
g	<i>Are you constantly keyed up and jittery?</i>
h	<i>Does every little thing get on your nerves and wear you out?</i>
i	<i>Does your heart often race like mad?</i>

1. Yes	_1	<input type="radio"/>
2. No	_2	<input type="radio"/>
-8. Don't Know	DK	<input type="radio"/>
-9. Don't want to answer	REF	<input type="radio"/>

End of Block: COVID, Social, and Mental health – NCDS & BCS70 Mental health scale

---

Start of Block: COVID, Social, and Mental health – NS & NSHD Mental health scale

**IF FFCOHORTID = 3,5**

GHQ121 | Have you recently been able to concentrate on what you're doing?

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



- |                          |
|--------------------------|
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFCOHORTID = 3,5**

GHQ122 | 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   |
| -8. Don't Know            |
| -9. Don't want to answer  |

---

**IF FFCOHORTID = 3,5**

GHQ123 | 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 capable     |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFCOHORTID = 3,5**

GHQ124 | 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 capable     |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFCOHORTID = 3,5**

GHQ125 | 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   |
| -8. Don't Know            |
| -9. Don't want to answer  |

---

**IF FFCOHORTID = 3,5**

GHQ126 | 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   |

- |                          |
|--------------------------|
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFCOHORTID = 3,5**

GHQ127 | Have you recently been able to enjoy your normal day to day activities?

- |                           |
|---------------------------|
| 1. Not at all             |
| 2. No more than usual     |
| 3. Rather more than usual |
| 4. Much more than usual   |
| -8. Don't Know            |
| -9. Don't want to answer  |

---

**IF FFCOHORTID = 3,5**

GHQ128 | Have you recently been able to face up to your problems?

- |                          |
|--------------------------|
| 1. More so than usual    |
| 2. Same as usual         |
| 3. Less so than usual    |
| 4. Much less able        |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFCOHORTID = 3,5**

GHQ129 | Have you recently been feeling unhappy or depressed?

- |                           |
|---------------------------|
| 1. Not at all             |
| 2. No more than usual     |
| 3. Rather more than usual |
| 4. Much more than usual   |
| -8. Don't Know            |
| -9. Don't want to answer  |

---

**IF FFCOHORTID = 3,5**

GHQ1210 | 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   |
| -8. Don't Know            |
| -9. Don't want to answer  |

---

**IF FFCOHORTID = 3,5**

GHQ1211 | 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   |

- 8. Don't Know
- 9. Don't want to answer

**IF FFCOHORTID = 3,5**

GHQ1212 | 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
- 8. Don't Know
- 9. Don't want to answer

End of Block: COVID, Social, and Mental health – NS & NSHD Mental health scale

Start of Block: COVID, Social, and Mental health – Mental health scale

GAD2PHQ2\_ | Over the **last 2 weeks**, how often have you been bothered by the following problems?

- |   |  |
|---|--|
| a | <i>Feeling nervous, anxious or on edge</i>         |
| b | <i>Not being able to stop or control worrying</i>  |
| c | <i>Little interest or pleasure in doing things</i> |
| d | <i>Feeling down, depressed or hopeless</i>         |

- 1. Not at all
- 2. Several days
- 3. More than half the days
- 4. Nearly every day
- 8. Don't Know
- 9. Don't want to answer

End of Block: COVID, Social, and Mental health – Mental health scale

Start of Block: COVID, Social, and Mental health – Optimism

OPTMSM1\_3 | How much do you agree or disagree with each of the following statements?

- |   |  |
|---|--|
| a | <i>In uncertain times, I usually expect the best</i>               |
| b | <i>I'm always optimistic about my future</i>                       |
| c | <i>Overall, I expect more good things to happen to me than bad</i> |

- 1. Strongly disagree
- 2. Disagree
- 3. Neutral
- 4. Agree
- 5. Strongly agree
- 8. Don't Know
- 9. Don't want to answer

End of Block: COVID, Social, and Mental health – Optimism

Start of Block: COVID, Social, and Mental health – Risk and patience

RISK | On a scale from 0-10, where 0 is 'never' and 10 is 'always', how **willing to take risks** would say you are?

1. 0: Never
2. 1
3. 2
4. 3
5. 4
6. 5
7. 6
8. 7
9. 8
10. 9
11. 10: Always
-8. Don't Know
-9. Don't want to answer

---

PATIENCE | On a scale from 0-10, where 0 is 'never' and 10 is 'always', how **patient** would you say you are?

1. 0: Never
2. 1
3. 2
4. 3
5. 4
6. 5
7. 6
8. 7
9. 8
10. 9
11. 10: Always
-8. Don't Know
-9. Don't want to answer

End of Block: COVID, Social, and Mental Health – Risk and patience

---

Start of Block: Other - Trust

TRUST | On a scale from 0-10 where 0 means you are 'not at all trusting' **of other people** and 10 means you are 'extremely trusting' of other people, how trusting of other people would you say you are?

1. 0: Not at all trusting
2. 1
3. 2
4. 3
5. 4
6. 5
7. 6
8. 7
9. 8
10. 9
11. 10: Extremely trusting

-8. Don't Know
-9. Don't want to answer

End of Block: Other - Trust

Start of Block: Other – Trust in government

TRUSTPOLP | On a scale from 0-10 where 0 means you are 'not at all trusting' and 10 means you are 'extremely trusting', how trusting are you that British Governments, of any party, place the needs of the nation above the needs of their own political party?

1. 0: Not at all trusting
2. 1
3. 2
4. 3
5. 4
6. 5
7. 6
8. 7
9. 8
10. 9
11. 10: Extremely trusting
-8. Don't Know
-9. Don't want to answer

End of Block: Other – Trust in government

Start of Block: Other – Time use

TIMEUSE\_NEW | We would like to know about how you have been spending your time recently. How many hours have you been spending doing each of the following activities on a typical week day in the **last two weeks**? You can enter whole hours (e.g. 1) or half hours (e.g. 1.5). Please round to the nearest half an hour. If you are not sure of the exact amount of time, please give your best estimate. If you have not typically spent any time doing an activity, or you have typically spent less than half an hour doing an activity please enter 0.

1. Paid work		
2. Volunteering / unpaid work (not for your household)		
3. Home schooling your children (if you have any)		
4. Other interactive activities with children (e.g. reading to them, playing games with them, painting/drawing with them, doing puzzles together).		
5. Caring for someone other than a child		
6. Housework (e.g. cleaning, laundry, cooking, DIY)		
7. Studying		
8. Physical activity / exercise		
9. Other leisure activities and hobbies (e.g. TV, gaming, reading, news, listening to music, gardening, online shopping, mealtime, relaxing)		
10. Socialising with non-household members via telephone, video-calling or messaging		
11. Socialising with non-household members in person		
12. Travelling for work		
13. Shopping or essential appointments		
14. Personal care (e.g. taking a shower/bath, grooming, getting dressed etc.)		
15. Ill in bed		
16. Other		

---

**IF NUMBER OF HOURS ENTERED AT TIMEUSE >16**

TIMEUSE\_CHK | At the previous question, the total amount of time you've entered is more than 16 hours. If this is correct, please select 'Continue'. Otherwise, please go back and review your responses.

Continue

---

TIMEUSE2\_N | How many hours in total have you been spending outside of your home on a typical week day in the **last two weeks**?

Please do not include time spent in your garden or any other outdoor space which is part of your home

End of Block: Other – Time use

---

Start of Block: Other – Life events

---

LIFEEVENTS1 | The next questions will ask about a number of events. Please read each item carefully and then indicate whether or not each event has happened to you **in the 12 months prior to the Coronavirus outbreak - --e. between March 2019 and March 2020** or **since the Coronavirus outbreak**.

Please select all that apply.

a	Have any of your immediate family died?
b	Have any of your other close relatives or close friends died?
c	Have you separated from your partner (not including death)?
d	Have you or your partner been sacked from your job or made redundant?
e	{IF COHORTID <> 5} Have you or your partner given birth?
f	Have you had any serious housing difficulties such as being evicted?

Please read each item carefully and then indicate whether or not each event has happened to you **in the 12 months prior to the Coronavirus outbreak - --e. between March 2019 and March 2020** or **since the Coronavirus outbreak**.

Please select all that apply.

1. Yes - --n the 12 months before Coronavirus outbreak
2. Yes - --ince the Coronavirus outbreak
3. No
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 1**

LIFEEVENTS2 | The next questions will ask about a number of events. Please read each item carefully and then indicate whether or not each event has happened to you **in the 12 months prior to the Coronavirus outbreak - --e. between March 2019 and March 2020** or **since the Coronavirus outbreak**.

Please select all that apply.

a	Have you had a serious illness or been seriously injured?
---	---

b	Has one of your immediate family been seriously ill or injured?
c	Have any of your close friends or other close relatives been seriously ill or injured?
d	Have you, or an immediate family member been subject to any abuse, attack or threat because of race?
e	Have you, or an immediate family member been subject to any abuse, attack or threat for another reason?
f	Have you or your partner been unemployed or seeking work for more than one month?
g	Have you had any major financial difficulties (e.g. debts, difficulty paying bills)?
h	Have you or an immediate member of your family been a victim of crime?
i	{IF COHORTID <> 5} Have you or your partner suffered from a miscarriage or had a stillbirth?
j	{IF COHORTID <> 5} Have you or your partner had a termination?

Please read each item carefully and then indicate whether or not each event has happened to you **in the 12 months prior to the Coronavirus outbreak - --e. between March 2019 and March 2020** or **since the Coronavirus outbreak**.

Please select all that apply.

1. Yes - --n the 12 months before Coronavirus outbreak
2. Yes - --ince the Coronavirus outbreak
3. No
-8. Don't Know
-9. Don't want to answer

End of Block: Other – Life events

Start of Block: Family – Children and childcare

MAJIMP | Have you experienced any other events that have had a major impact on your life **since the outbreak of the Coronavirus in March?**

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

**IF MAJIMP=1**

MAJIMPOTH | Please describe what has happened to you.

--

**IF (COVIDW1 = 2 AND AT LEAST ONE CHILD AGED 4-18) OR (COVIDW1 = 1 AND (AT LEAST ONE CHILD AGED 3-18) OR (GROUP = 5 AND AT LEAST ONE CHILD AGED 3-20)**

CHILDLOOPINTRO1 | The Coronavirus outbreak has had a significant impact on lots of children. In this last set of questions we would like to ask about how your children have been affected. We will ask you some questions about each of your children who you live with in turn.

**IF (COVIDW1 = 2 AND AT LEAST ONE CHILD AGED 4-18) OR (COVIDW1 = 1 AND (AT LEAST ONE CHILD AGED 3-18) OR (GROUP = 5 AND AT LEAST ONE CHILD AGED 3-20)**

VBB | For the next few questions I would like to ask you about the child you recorded as {@CHILDNAME}

**LOOP FOR EACH CHILD AGED 4-18**

SCENROL | Thinking about the summer term, that is between the end of the Easter holiday and the start of the summer holiday. Were they enrolled in school or college?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**LOOP FOR EACH CHILD AGED 4-18 IF SCENROL = 1 AND COUNTRES=1 OR COUNTRES=2**

SCYEAREW | What year were they in during the summer term?

1. Reception
2. Year 1
3. Year 2
4. Year 3
5. Year 4
6. Year 5
7. Year 6
8. Year 7
9. Year 8
10. Year 9
11. Year 10
12. Year 11
13. Year 12
14. Year 13
-8. Don't Know
-9. Don't want to answer

---

**LOOP FOR EACH CHILD AGED 4-18 IF SCENROL = 1 AND COUNTRES=3**

SCYEARS CO | What year were they in during the summer term?

1. P1
2. P2
3. P3
4. P4
5. P5
6. P6
7. P7
8. S1
9. S2
10. S3
11. S4
12. S5
13. S6
-8. Don't Know
-9. Don't want to answer



---

**LOOP FOR EACH CHILD AGED 4-18 IF SCENROL = 1 AND COUNTRES=4**  
SCYEARNI | What year were they in during the summer term?

1. P1
2. P2
3. P3
4. P4
5. P5
6. P6
7. P7
8. Year 8
9. Year 9
10. Year 10
11. Year 11
12. Year 12
13. Year 13
14. Year 14
-8. Don't Know
-9. Don't want to answer

---

**LOOP FOR EACH CHILD AGED 4-18 IF SCENROL=1 AND (SCYEAREW=1-7 OR SCYEARSICO=1-7 OR SCYEARNI=1-7)**  
SCTYPE2 | Still thinking about the summer term, what type of school or college was this?

1. A state school, including local authority maintained, academy or free school
2. An independent or private school (fee-paying)
3. Other
-8. Don't Know
-9. Don't want to answer

---

**LOOP FOR EACH CHILD AGED 4-18 IF SCENROL= 1 AND (SCYEAREW = 8-14 OR SCYEARSICO = 8-13 OR SCYEARNI = 8-14)**  
SCTYPE | Still thinking about the summer term, what type of school or college were they attending?

1. A state school, including local authority maintained school or 6th form college, academy or free school
2. A state grammar school
3. An independent or private school or 6th form college (fee-paying)
4. Other
-8. Don't Know
-9. Don't want to answer

---

**LOOP FOR EACH CHILD AGED 4-18 IF SCENROL = 1**  
SCATT | During the summer term, that is between the Easter holiday and the start of the summer holiday, how many days in total did your child attend school or college in person?

1. They did not attend school in person at all during the summer term
2. 1-5 days
3. 6-10 days

4. 11-20 days
5. 21-30 days
6. More than 30 days but not the whole summer term
7. They went to school in person for the whole of the summer term
-8. Don't Know
-9. Don't want to answer

**IF FFCOVIDW1 = 1 LOOP FOR EACH CHILD AGED 4-18 IF SCATT = 1-6**

STUHRHS | On a typical day in the summer term (when they were not attending school in person), how many hours on average did they spend doing schoolwork/studying?

**IF FFCOVIDW1 = 1 LOOP FOR EACH CHILD AGED 4-18 IF STUHRHS > 0**

STUONL | And on a typical day in the summer term (when they were not attending school in person), how many hours on average did they spend having live online lessons or meetings that the school provided for them?

**IF FFCOVIDW1 = 1 LOOP FOR EACH CHILD AGED 4-18 IF STUHRHS > 0**

STUHEL | On a typical day in the summer term (when they were not attending school in person), how many hours on average did you spend helping them with their school work or studies?

**IF FFCOVIDW1 = 1 LOOP FOR EACH CHILD AGED 4-18 IF STUHRHS > 0 AND HHNUMWH = 1**

STUHELP | On a typical day in the summer term (when they were not attending school in person), how many hours on average did your partner spend helping them with their school work or studies?

**IF FFCOVIDW1 = 1 LOOP FOR EACH CHILD AGED 4-18 IF SCATT = 1-6**

LEARNR | Did they have any additional learning resources which were not provided by the school, such as online tutoring, educational apps, website subscriptions or exercise books during the summer term? *Please select all that apply.*

1. Yes, they used freely available resources
2. Yes, we paid for additional resources
3. No
-8. Don't Know
-9. Don't want to answer

**IF FFCOVIDW1 = 1 LOOP FOR EACH CHILD AGED 4-18 IF SCATT = 1-6**

STUSPA | Which of the following did they have available to them to study or do schoolwork? *Please select all that apply.*

1. Exclusive use of a PC/Laptop/Tablet
2. Shared PC/Laptop/Tablet
3. Desk/table in bedroom

4. Desk/table in communal area of home (e.g. dining room or kitchen)
5. None of these
-8. Don't Know
-9. Don't want to answer

**LOOP FOR EACH CHILD AGED 4-18 IF SCATT = 1-6**

ACAPER | Do you think their overall academic progress has been affected by the closure of schools?

1. Their progress has suffered a lot
2. Their progress has suffered a little
3. Their progress has remained the same as it would have done if schools had remained fully open
4. Their progress has improved a bit
5. Their progress has improved a lot
-8. Don't Know
-9. Don't want to answer

**LOOP FOR EACH CHILD AGED 4-18**

SCENROL2 | Are they enrolled in a school or college for the **autumn term**, that is the term beginning in September?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

**LOOP FOR EACH CHILD AGED 4-18 IF SCENROL = 1 AND IF SCENROL2 = 1**

SAMSCH | Is this the same school or college they were enrolled in last year in the summer term?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

**LOOP FOR EACH CHILD AGED 4-18 IF (SCENROL=2 AND SENROL2=1) OR (SAMSCH=2 AND (SCYEAREW=1-6 OR SCYEARS CO=1-6 OR SCYEARNI=1-6))**

SCTYPE2A | What type of school will they be going to?

1. A state school, including local authority maintained, academy or free school
2. An independent or private school (fee-paying)
3. Other
-8. Don't Know
-9. Don't want to answer

**LOOP FOR EACH CHILD AGED 4-18 IF SAMSCH = 2 AND (SCYEAREW = 7-14 OR SCYEARS CO = 7-13 OR SCYEARNI = 7-14)**

SCTYPE2B | What type of school or college will they be going to?

1. A state school, including local authority maintained school or 6th form college, academy or free school
2. A state grammar school
3. An independent or private school or 6th form college (fee-paying)
4. Other
-8. Don't Know
-9. Don't want to answer

**LOOP FOR EACH CHILD AGED 4-18 IF SCENROL2 = 1**

SCAUTT | Has the Autumn term started in your child's school or college?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

**IF SCAUTT = 1**

SCATT2A | Which of the following currently applies to your child?

1. They will be going to school or college in person full-time
2. They will be going to school or college in person part-time
3. They will not be attending school or college in person at all
-8. Don't Know
-9. Don't want to answer

**IF SCATT2A = 2**

SCATT2AD | How many days a week are they attending school or college in person?

1. 1 day	_1	<input type="radio"/>
2. 2 days	_2	<input type="radio"/>
3. 3 days	_3	<input type="radio"/>
4. 4 days	_4	<input type="radio"/>
5. 5 days	_5	<input type="radio"/>
-8. Don't Know	DK	<input type="radio"/>
-9. Don't want to answer	REF	<input type="radio"/>

**IF SCAUTT = 2**

SCATT2B | Which of the following will apply to your child when the Autumn term starts?

1. They will be going to school or college in person full-time
2. They will be going to school or college in person part-time
3. They will not be attending school or college in person at all
-8. Don't Know
-9. Don't want to answer

**IF SCATT2B = 2**

SCATT2BD | How many days a week will they be attending school or college in person?

1. 1 day
----------

2. 2 days
3. 3 days
4. 4 days
5. 5 days
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 1 LOOP FOR EACH CHILD AGED 3-18 (OR 3-20 IF FFGROUP = 5)**  
 CMHBEF | In the **3 months before the Coronavirus outbreak in March**, in general would you say their mental health was...

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOVIDW1 = 1 LOOP FOR EACH CHILD AGED 3-18 (OR 3-20 IF FFGROUP = 5)**  
 CMHAFT | Thinking about **now**, in general would you say their mental health is...

1. Excellent
2. Very good
3. Good
4. Fair
5. Poor
-8. Don't Know
-9. Don't want to answer

End of Block: Family – Children and childcare

---

Start of Block: Outro – Outro block

**IF FFEMAIL IN SAMPLE FILE**

EMOK | Thank you. We would like to make sure that we hold the best email address to use to contact you. The email address we currently hold for you is {#EMAIL}. Is this the best email address to use to contact you?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**EMOK = 2 OR NO FFEMAIL IN SAMPLE FILE**

EMUPDAT | {IF NO EMAIL IN SAMPLE FILE: Thank you. We would like to make sure that we hold the best email address to use to contact you.}

Please enter below the best email address to use to contact you in the future.

--

EMUPDATSC | You have said {#EMUPDAT} is your email address. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

End of Block: Outro – Outro block

Start of Block: MCS Contact information – Contact information block

**IF FFGROUP=4**

CIINTROCM | We'd also like to check we've got all of your other contact details correct and up to date so we can make sure you don't miss out on study news and to invite you to take part in future surveys.

**IF FFGROUP=5**

CIINTROPAR | We'd also like to check we've got all of your other contact details correct and up to date so we can make sure you don't miss out on updates about the study. We are interested in your details even if your child is no longer living with you.

**IF FFCOHORTID=4**

NAMECHK | Is {#FFNAME1} {#FFNAME2} {#FFNAME4} {#FFNAME3} your full name?

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

**IF FFCOHORTID=4 AND NAMECHK=2**

NAMECHK\_NEW | Please enter your full name - title, first name, middle name and surname.

a	Title
b	First name
c	Middle name
d	Surname

**IF FFCOHORTID=4 AND IF FFADDRESS IS NOT EMPTY**

ADDCHK | The address we have on record for you is:

{#ADDRESSLINE1}

{#ADDRESSLINE2}

{#ADDRESSLINE3}

{#TOWN}

{#COUNTY}

{#POSTCODE}

Is that correct and complete? If not, please select 'No' to update address or add any missing information.

{IF GROUP=5: TEXTFILL: "Please provide your address, even if your child does not live with you. We are collecting their details separately"}

{**IF GROUP=4:** TEXTFILL: "Please provide your permanent address, not your university or college address"}

1. Yes
2. No
-8. Don't Know
-9. Don't want to answer

---

**IF FFCOHORTID=4 AND IF ADDCHK=2**

ADDCHKL\_N | Please could you enter your full postal address. Please provide at least the first line of the address, the postcode and the town.

**IF FFCOHORTID=4 AND IF ADDCHK=2**

ADDCHKL1 | Address line 1

---

**IF FFCOHORTID=4 AND IF ADDCHK=2**

ADDCHKL2 | Address line 2

---

**IF FFCOHORTID=4 AND IF ADDCHK=2**

ADDCHKL3 | Address line 3

---

ADDCHKTN | Town

**IF FFCOHORTID=4 AND IF ADDCHK=2**

---

**IF FFCOHORTID=4 AND IF ADDCHK=2**

ADDCHKCNTY | County

---

**IF FFCOHORTID=4 AND IF ADDCHK=2**

ADDCHKPC | Pincode

---

**IF FFCOHORTID=4 AND IF ADDCHK=2**

ADDCHKCNTRY | Country

---

**IF ANSWER AT ADDCHKPC**





---

**IF FFCOHORTID=4 AND IF HMTLCHKUK=2**

HOMETELNUK\_N | Please enter your home telephone number including area code. For international numbers enter 00 at the start instead of "+". Your phone number should not have more than 15 digits.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

---

**IF ANSWER AT HOMETELNUK\_N**

HOMETELNUKSC | You have said {ANSWER AT HOMETELNUK\_N} is your home telephone number. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFCOHORTID=4 AND IF FFMOBILETEL IS NOT EMPTY**

MOBTELCHK | The mobile telephone number we hold for you is: {#FFMOBILETEL} Is that correct?

{IF GROUP=5: TEXTFILL: "Please provide your number, not your child's. We are collecting their details separately"}

- |                          |
|--------------------------|
| 1. Yes                   |
| 2. No                    |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFCOHORTID=4 AND IF MOBTELCHK=2 OR FFMOBILETEL IS EMPTY**

MOBTELCHKUK | Please enter your mobile telephone number (if you have one). First select either UK or non-UK phone number below.

- |                             |
|-----------------------------|
| 1. UK mobile number         |
| 2. Non-UK mobile number     |
| 3. Have no mobile telephone |
| -8. Don't Know              |
| -9. Don't want to answer    |

---

**IF FFCOHORTID=4 AND IF MOBTELCHKUK=1**

MOBTELUK\_N | Please enter your mobile number. UK phone numbers start with 0 and are 10 or 11 digits

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

---

**IF ANSWER AT MOBTELUK\_N**

MOBTELUKSC | You have said {ANSWER AT MOBTELUK\_N} is your mobile telephone number. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFCOHORTID=4 AND IF MOBTELCHKUK=2**

MOBTELNUK\_N | Please enter your mobile number. For international numbers enter 00 at the start instead of "+". Your phone number should not have more than 15 digits.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

---

**IF ANSWER AT MOBTELNUK\_N**

MOBTELNUKSC | You have said {ANSWER AT MOBTELNUK\_N} is your telephone number. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFCOHORTID=4 AND IF FFWORKTEL IS NOT EMPTY**

WORKTELCHK | The work telephone number we hold for you is: {#FFWORKTEL} Is that correct?

{IF FFGROUP=5: TEXTFILL: "Please provide your number, not your child's. We are collecting their details separately"}

- |                          |
|--------------------------|
| 1. Yes                   |
| 2. No                    |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFCOHORTID=4 AND IF WORKTELCHK=2 OR FFWORKTEL IS EMPTY**

WRKTELCHKUK | What is your work telephone number (if you have one)? We will only ever contact you about Child of the New century. First select either UK or non-UK phone number below.

- |                          |
|--------------------------|
| 1. UK work number        |
| 2. Non-UK work number    |
| 3. No work number        |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFCOHORTID=4 AND IF WRKTELCHKUK=1**

WRKTELUK\_N | Please enter your work number including area code. UK phone numbers start with 0 and are 10 or 11 digits

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

---

**IF ANSWER AT WRKTELUK\_N**

WRKTELUKSC | You have said {ANSWER AT WRKTELUK\_N} is your work telephone number. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFCOHORTID=4 AND IF WRKTELCHKNUK=2**

WRKTELNUK\_N | Please enter your work telephone number including area code. For international numbers enter 00 at the start instead of "+". Your phone number should not have more than 15 digits.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

---

**IF ANSWER AT WRKTELNUK\_N**

WRKTELNUKSC | You have said {ANSWER AT WRKTELNUK\_N} is your telephone number. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFGROUP=4**

CCST1N | Is there someone else (other than your parents) who we could contact if you were to move so that we could find out where you are? We will only ever contact them if we are trying to contact you about Child of the New Century. We will never pass on their contact details to anyone else.

- |                          |
|--------------------------|
| 1. Yes                   |
| 2. No                    |
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1\_GR | What is their full name - title, first name, middle name and surname?

SC1T | Title

**IF FFGROUP=4 AND IF CCSTIN = 1**

--

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1FN | First name

--

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1MN | Middle name

--

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1SN | Surname

--

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1RELA | How is this person related to you?

- |            |
|------------|
| 1. Sibling |
|------------|

2. Other relative (please describe)
3. Friend
4. Other (please describe)
-8. Don't Know
-9. Don't want to answer

---

**IF FFGROUP=4 AND IF SCRELA=2**

SC1RELOR | Please describe other relative

---

**IF CHARACTERS AT SC1RELOR =< 5**

SC1RELOR\_SFT\_CHK\_1 | This is a short answer, if you would like to add more information you can go back, otherwise please click 'Continue

Continue

---

**IF FFGROUP=4 AND IF SCRELA=4**

SC1RELOTH | Please describe other relationship

---

**IF CHARACTERS AT SC1RELOTH =< 5**

SC1RELOR\_SFT\_CHK\_2 | This is a short answer, if you would like to add more information you can go back, otherwise please click 'Continue

Continue

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1A\_GR | What is their full address?

SC1A1 | Address line 1

**IF FFGROUP=4 AND IF CCSTIN = 1**

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**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1A2 | Address line 2

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**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1A3 | Address line 3

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1A4 | Town

---

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1A5 | County

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1PC | Postcode

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SC1COUNTRY | Country

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**IF ANSWER AT SC1PC**

SC1A\_SC | You have said {ANSWER AT SC1PC} is your postcode. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFGROUP=4 AND IF CCSTIN = 1**

SCTEL1N | Please enter their telephone number (if they have one). First select either UK or non-UK phone number below.

- |                               |
|-------------------------------|
| 1. UK telephone number        |
| 2. Non-UK telephone number    |
| 3. No second telephone number |
| -8. Don't Know                |
| -9. Don't want to answer      |

---

**IF FFGROUP=4 AND IF SCTEL1N=1**

SCTEL1NUK\_N | Please enter their telephone number including area code. UK phone numbers start with 0 and are 10 or 11 digits.

---

**IF ANSWER AT SCTEL1NUK\_N**

SCTEL1NUKSC | You have said {ANSWER AT SCTEL1NUK\_N} is their telephone number. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFGROUP=4 AND IF SCTEL1N=2**

SCTEL1NNUK\_N | Please enter their telephone number including area code. For international numbers enter 00 at the start instead of "+". Your phone number should not have more than 15 digits.



SC1TEMAN | What is their e-mail address (if they have one)? We will only ever contact them if we are trying to contact you. We will never pass on their e-mail address to anyone else.

---

**IF ANSWER AT SC1TEMAN**

SC1TEMANSC | You have said {ANSWER AT SC1TEMAN} is their e-mail address. If this is correct, select 'Continue'. Otherwise please go back and amend your answer.

Continue

---

**IF FFGROUP=4 AND IF CCST1N = 1 AND (SC1A1=RESPONSE OR SCTEL1N = RESPONSE OR SCTEL2N = RESPONSE OR SC1TEMAN =1**

SCREM | Thank you – please could you tell this person that you have provided us with their contact details and make sure they are willing for someone to contact them if we cannot reach you. If they request that we do not contact them or they do not want us to hold their contact details, please let us know. Our contact details are on our website: [childnc.info/contact](http://childnc.info/contact).

---

**IF FFGROUP=4**

TWITR | We would like to collect some information from you about your social media accounts that may allow us to get in touch with you in the future, in case you move from the address we have on record for you. We will only use your social media accounts as a way to get in contact with you about the study. We will contact you privately (e.g. via direct messages), so nobody else will know you are in the study. Your social media account information will not be shared with anyone outside of the study team. Are you willing to tell us the username of your personal Twitter account, so that we can use it to contact you in the future?

1. Yes
2. No
3. I do not have a personal Twitter account
-8. Don't Know
-9. Don't want to answer

---

**IF FFGROUP=4 AND TWITR=1**

TWITRNM | What is your Twitter username (e.g. @childnc)? To find your Twitter username from a web browser, go to [www.twitter.com](http://www.twitter.com), log in, and your username will be displayed in the side panel on the left hand side of the screen, starting with the "@" symbol. From the Twitter app, click on your profile icon and your username will be displayed in the side panel on the left hand side of the screen, starting with the "@" symbol.

---

**IF ANSWER AT TWITRNM**

TWTR\_SFT\_CHK | You've put {#TWITRNM} as your Twitter username, is this correct?

---

**IF FFGROUP=4 AND TWITRNM=NOT EMPTY**

TWITRCHK | To ensure we have your correct Twitter username please could you re-enter your Twitter username again.

---

**IF TWITRNM != TWITRCHK**

TWITRCHKSC | Your Twitter usernames do not match. Please go back and amend your answers.

---

**IF FFGROUP=4**

FACEBK | Are you willing to tell us the username of your personal Facebook account, so that we can use it to contact you in the future?

1. Yes
2. No
3. I do not have a personal Facebook account
-8. Don't Know
-9. Don't want to answer

---

**IF FFGROUP=4 AND FACEBK=1**

FACEBKNM | What is your Facebook username (e.g. childnc)? To find your Facebook username from a web browser, go to [www.facebook.com](http://www.facebook.com), log in, click on your profile icon at the top right hand side of the screen, then copy the text that appears after "https://www.facebook.com/" in the URL bar. From the Facebook app, go to your profile, click on the "settings" icon, which you can find by clicking on the 3 dots (...), and your username will be displayed in the box titled "Your profile link".

---

**IF ANSWER AT FACEBKNM**

FACEBKNM\_SFT\_CHK | You've put {#FACEBKNM} as your Facebook username, is this correct?

---

**IF FFGROUP=4 AND FACEBKNM=NOT EMPTY**

FACEBKCHK | To ensure we have your correct Facebook username please could you re-enter your Facebook username again.

---

**IF FACEBKNM != FACEBKCHK**

FACEBKCHKSC | Your Facebook usernames do not match. Please go back and amend your answers.

---

**IF FFGROUP=4**

INSTAGRM | Are you willing to tell us the username of your personal Instagram account, so that we can use it to contact you in the future?

1. Yes
2. No
3. I do not have a personal Instagram account



- |                          |
|--------------------------|
| -8. Don't Know           |
| -9. Don't want to answer |

---

**IF FFGROUP=4 AND INSTAGRM=1**

INSTAGRMNM | What is your Instagram username (e.g. nextstepsstudy)? To find your Instagram username in the app, click on your profile icon at the bottom right hand side of the screen, and your username will then be displayed at the top middle of the screen.

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---

**IF ANSWER AT INSTAGRNM**

INSTAGRMNM\_SFT\_CHK | You've put {#INSTAGRMNM} as your Instagram username, is this correct?

---

**IF FFGROUP=4 AND INSTAGRMNM=NOT EMPTY**

INSTAGRMCHK | To ensure we have your correct Instagram username please could you re-enter your Instagram username again.

--

---

**IF INSTAGRMNM != INSTAGRMCHK**

INSTAGRMCHKSC | Your Instagram usernames do not match. Please go back and amend your answers.

End of Block: MCS Contact information – Contact information block

---

Start of Block: Outro – Outro block

**IF FFCOVIDW1=1**

COVIDAPP | Finally, in the last COVID-19 Survey we asked if you could download the COVID-19 Symptoms Tracker app on your mobile device and use it to record your symptoms. Have you downloaded and used the app?

- |   |
|---|
| 1. Yes                                    |
| 2. No                                     |
| 3. I do not have a suitable mobile device |
| -8. Don't Know                            |
| -9. Don't want to answer                  |

---

**IF COVIDAPP=1**

COVIDAPP2 | Thank you. Please continue to use the app to record your symptoms. Doing so will help researchers understand the spread of the virus and identify high risk areas in the UK. We have teamed up with the organisations running the COVID-19 symptom tracker, designed by Kings College London, to allow the results from the symptoms tracker app to be combined with the information held by {**IF COHORTID=1:** NCDS; **IF COHORTID=2:** BCS70; **IF COHORTID=3:** Next Steps; **IF COHORTID=4:** Child of the New Century; **IF COHORTID=5:** the National Survey of Health and Development}

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**IF FFCOHORTID=1 AND ((FFCOVIDW1=1 AND COVIDAPP=2) OR FFCOVIDW1=2)**

NCDSAPP\_N | {**IF FFCOVIDW1=1:** It is not too late to download the app so please do so if you are able.} {**IF FFCOVIDW1=2:** Finally – we’d like to ask you to download a COVID-19 Symptoms Tracker app onto your smartphone.} Many people are recording symptoms of COVID-19 using specially designed symptom tracker apps. These are helping researchers to understand the spread of the virus, by recording which symptoms are most common, and identifying high risk areas in the UK. As a member of NCDS you can play a special role. We have teamed up with the organisations running the COVID-19 symptom tracker, designed by Kings College London, to allow the results from the symptoms tracker app to be combined with the information held by NCDS. All you need to do is to download the app on your mobile device, and record your symptoms every day. If you have already been recording your symptoms using this app, the symptoms you have already recorded can also be linked. If you are completing the survey on a mobile device please click [HERE](#) to download the app. You can also find the link to download the symptoms tracker app on our study [WEBSITE](#). You can download the symptoms tracker and start recording your symptoms at any time. If you **DO NOT** wish your information held by NCDS to be linked to information collected by the COVID-19 symptom tracker app please tick the first box below. Otherwise, select ‘Continue’. For further information about how your symptoms tracker data will be securely linked, and how it will be used for research, please see our [FAQs](#), here. You can also opt out of linking your NCDS information to the symptoms tracker at any time by calling us for free on 0800 0355761 or email us at [ncds@ucl.ac.uk](mailto:ncds@ucl.ac.uk).

- |  |
|--|
| 1. I DO NOT wish my NCDS information to be linked with information collected by the COVID-19 tracker app |
| 2. Continue  |

**IF FFCOHORTID=2 AND ((FFCOVIDW1=1 AND COVIDAPP=2) OR FFCOVIDW1=2)**

BCSAPP\_N | {**IF FFCOVIDW1=1:** It is not too late to download the app so please do so if you are able.} {**IF FFCOVIDW1=2:** Finally – we’d like to ask you to download a COVID-19 Symptoms Tracker app onto your smartphone.} Many people are recording symptoms of COVID-19 using specially designed symptom tracker apps. These are helping researchers to understand the spread of the virus, by recording which symptoms are most common, and identifying high risk areas in the UK. As a member of BCS70 you can play a special role. We have teamed up with the organisations running the COVID-19 symptom tracker, designed by Kings College London, to allow the results from the symptoms tracker app to be combined with the information held by BCS70. All you need to do is to download the app on your mobile device, and record your symptoms every day. If you have already been recording your symptoms using this app, the symptoms you have already recorded can also be linked. If you are completing the survey on a mobile device please click [HERE](#) to download the app. You can also find the link to download the symptoms tracker app on our study [WEBSITE](#). You can download the symptoms tracker and start recording your symptoms at any time. If you **DO NOT** wish your information held by BCS70 to be linked to information collected by the COVID-19 symptom tracker app please tick the first box below. Otherwise, select ‘Continue’. For further information about how your symptoms tracker data will be securely linked, and how it will be used for research, please see our [FAQs](#), here. You can also opt out of linking your BCS70 information to the symptoms tracker at any time by calling us for free on 0800 0355761 or email us at [bcs70@ucl.ac.uk](mailto:bcs70@ucl.ac.uk).

- |   |
|---|
| 1. I DO NOT wish my BCS70 information to be linked with information collected by the COVID-19 tracker app |
| 2. Continue   |

**IF FFCOHORTID=3 AND ((FFCOVIDW1=1 AND COVIDAPP=2) OR FFCOVIDW1=2)**

NSAPP\_N | {**IF FFCOVIDW1=1:** It is not too late to download the app so please do so if you are able.} {**IF FFCOVIDW1=2:** Finally – we’d like to ask you to download a COVID-19

Symptoms Tracker app onto your smarthphone.} Many people are recording symptoms of COVID-19 using specially designed symptom tracker apps. These are helping researchers to understand the spread of the virus, by recording which symptoms are most common, and identifying high risk areas in the UK. As a member of Next Steps you can play a special role. We have teamed up with the organisations running the COVID-19 symptom tracker, designed by Kings College London, to allow the results from the symptoms tracker app to be combined with the information held by Next Steps. All you need to do is to download the app on your mobile device, and record your symptoms every day. If you have already been recording your symptoms using this app, the symptoms you have already recorded can also be linked. If you are completing the survey on a mobile device please click [HERE](#) to download the app. You can also find the link to download the symptoms tracker app on our study [WEBSITE](#). You can download the symptoms tracker and start recording your symptoms at any time. If you DO NOT wish your information held by Next Steps to be linked to information collected by the COVID-19 symptom tracker app please tick the first box below. Otherwise, select 'Continue' to receive your voucher for taking part. For further information about how your symptoms tracker data will be securely linked, and how it will be used for research, please see our FAQs, [here](#). You can also opt out of linking your Next Steps information to the symptoms tracker at any time by calling us for free on 0800 977 4566 or email us at [nextsteps@ucl.ac.uk](mailto:nextsteps@ucl.ac.uk).

- |  |
|--|
| 1. I DO NOT wish my Next Steps information to be linked with information collected by the COVID-19 tracker app |
| 2. Continue  |

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**IF FFCOHORTID=4 AND ((FFCOVIDW1=1 AND COVIDAPP=2) OR FFCOVIDW1=2)**  
MCSAPP\_N | {**IF FFCOVIDW1=1:** It is not too late to download the app so please do so if you are able.} {**IF FFCOVIDW1=2:** Finally – we’d like to ask you to download a COVID-19 Symptoms Tracker app onto your smarthphone.} Many people are recording symptoms of COVID-19 using specially designed symptom tracker apps. These are helping researchers to understand the spread of the virus, by recording which symptoms are most common, and identifying high risk areas in the UK. As a member of Child of the New Century you can play a special role. We have teamed up with the organisations running the COVID-19 symptom tracker, designed by Kings College London, to allow the results from the symptoms tracker app to be combined with the information held by Child of the New Century. All you need to do is to download the app on your mobile device, and record your symptoms every day. If you have already been recording your symptoms using this app, the symptoms you have already recorded can also be linked. If you are completing the survey on a mobile device please click [HERE](#) to download the app. You can also find the link to download the symptoms tracker app on our study [WEBSITE](#). You can download the symptoms tracker and start recording your symptoms at any time. If you DO NOT wish your information held by Child of the New Century to be linked to information collected by the COVID-19 symptom tracker app please tick the first box below. Otherwise, select 'Continue'. For further information about how your symptoms tracker data will be securely linked, and how it will be used for research, please see our FAQs, [here](#). You can also opt out of linking your Child of the New Century information to the symptoms tracker at any time by calling us for free on 0800 0921250 or email us at [childnc@ucl.ac.uk](mailto:childnc@ucl.ac.uk).

- |  |
|--|
| 1. I DO NOT wish my Child of the New Century information to be linked with information collected by the COVID-19 tracker app |
| 2. Continue  |

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**IF FFCOHORTID=5 AND ((FFCOVIDW1=1 AND COVIDAPP=2) OR FFCOVIDW1=2)**  
NHSDAPP\_N | {**IF FFCOVIDW1=1:** It is not too late to download the app so please do so if you are able.} {**IF FFCOVIDW1=2:** Finally – we’d like to ask you to download a COVID-19

Symptoms Tracker app onto your smartphone.} Many people are recording symptoms of COVID-19 using specially designed symptom tracker apps. These are helping researchers to understand the spread of the virus, by recording which symptoms are most common, and identifying high risk areas in the UK. As a member of the National Survey of Health and Development you can play a special role. We have teamed up with the organisations running the COVID-19 symptom tracker, designed by Kings College London, to allow the results from the symptoms tracker app to be combined with the information held by NSHD. All you need to do is to download the app on your mobile device, and record your symptoms every day. If you have already been recording your symptoms using this app, the symptoms you have already recorded can also be linked. If you are completing the survey on a mobile device please click [HERE](#) to download the app. You can also find the link to download the symptoms tracker app on our study [WEBSITE](#). You can download the symptoms tracker and start recording your symptoms at any time. If you **DO NOT** wish your information held by NSHD to be linked to information collected by the COVID-19 symptom tracker app please tick the first box below. Otherwise, select 'Continue'. For further information about how your symptoms tracker data will be securely linked, and how it will be used for research, please see our [FAQs](#), here. You can also opt out of linking your NSHD information to the symptoms tracker at any time by calling us for free on 0800 952 0249 or email us at [mrclha.enquiries@ucl.ac.uk](mailto:mrclha.enquiries@ucl.ac.uk).

- |  |
|--|
| 1. I DO NOT wish my NSHD information to be linked with information collected by the COVID-19 tracker app |
| 2. Continue  |

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OUTRO\_FINAL | You have come to the end of the questions. If you'd like to go back to check or change any of your answers you should do so now.

{*IF FFGROUP=1,2,4,5*: Once you've clicked to go to the next screen you won't be able to go back.}

{*IF FFGROUP=3*: To claim your gift voucher, please go to the next screen. You won't be able to go back.}

Thank you for your help!

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***IF FFGROUP=3***

INCENTIVE | As a thank you for taking part, please click [HERE](#)

{<https://kantarincentives.perksplus.com/>}to be transferred to the next screen in order to redeem your { *IF FFCOVIDW1=1 AND GROUP=3*: £5 gift voucher.} {*IF FFCOVIDW1=2 AND FFGROUP=3*: £10 gift voucher.}

Please make a note of the code below to use in order to redeem your gift voucher.

{#FFVOUCHER}

We will also send you this information to your email address after you close this survey if you wish to redeem the voucher later.

To end the survey now without redeeming your voucher, please click the forward arrow below.

End of Block: Outro – Outro block

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