



Health and Wellbeing of 15 year olds in England – What About YOUth? Survey 2014

Technical Report

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This report may be of interest to members of the public, policy officials and other stakeholders to make local and national comparisons and to monitor the quality and effectiveness of services.

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1. Introduction

1.1 Survey background

What About YOUTH? (WAY) 2014 is a newly commissioned survey, designed to provide robust estimates on a range of health and wellbeing topics of 15 year olds at Local Authority (LA) level across England. This survey addresses gaps identified by the Public Health Outcomes Framework (PHOF) in the health of 15 year olds so new data generated from this survey can be used by local authority (LA) commissioners, policy makers, service providers and third-sector organisations to target resources effectively and improve services for this age group.

WAY is a postal survey (including reminder mailings) with the option to complete the survey online. A website was created for the survey (www.whataboutyouth.com) on which young people could access the online version of the questionnaire; this could also be accessed via a QR code printed on the questionnaire. The website also contained information about the research for young people, parents and teachers.

A Steering Group was set up to provide direction and recommendations on the development of the survey. Membership included representatives from a range of stakeholders including representatives from the Department of Health, Public Health England (including the former Child and Maternal Health Observatory ChiMat), the Children and Young People's Health Outcomes Forum (CYPHOF), the Health Behaviour in School-aged Children (HBSC) research network, the Association of Directors of Children's Services (ADCS) as well as young people, charities, ethical boards and academic colleagues. The project teams at HSCIC and Ipsos MORI also formed part of the Steering Group.

1.2 Summary of the survey

Extensive development work, cognitive testing, a pilot survey and a trial survey were conducted before the actual main survey itself was carried out. The timetable for the WAY 2014 survey can be found below:

Table 1.1 Survey Timetable

Task	Date
Residential workshop	28 th -29 th August 2013
Cognitive testing	29 th , 30 th July, 2 nd August 2013
Pilot survey	22 nd August – 18 th September 2013
Trial survey fieldwork	31 st October 2013 – 14 th February 2014
Main survey fieldwork	22 nd September 2014 – 9 th January 2015
Smoking prevalence publication	4 th August 2015
Main findings publication	8 th December 2015
Data in the UK data archive	January 2016

The primary focus of the trial survey was to investigate whether it would be possible to achieve the high response rates, and therefore the sample sizes needed to deliver robust data at a local authority (LA) level.

During the development stage of the trial survey, various incentive types were considered. It was decided to use vouchers for high street stores as the incentive for the survey due to practical considerations regarding the use of money and because it was thought that these would appeal to a broad range of young people. It was not clear what value the voucher should be and whether it should be unconditional or conditional on completing the survey. Therefore, the trial survey became an experiment to test which incentive offered the best response rate against costs. Therefore, the sample was sub-divided into different groups who received a different incentive.

Also, a number of young people were invited and took part in a residential workshop to help with the development of the branding and materials needed for the survey. Further details on the survey development and trial survey can be found in the Trial Survey report (Appendix A.9).

Key decisions and changes following the trial survey

Lessons learnt from the trial survey were used to guide the development of the main survey:

Incentive

As a result of the incentive experiment in the trial, it was decided that the main survey would offer a conditional £5 shopping voucher as the incentive. This incentive strategy was chosen because the value of the voucher was deemed to be high enough to yield a decent response, and provided better value for money compared to the unconditional incentives.

Sampling frame

During development of the trial, two potential sampling frames were identified from which to draw a random sample of 15 year olds in England. These were the MIDAS¹ database and the National Pupil Database (NPD)². The MIDAS database was used for the trial survey as it has better coverage than the NPD but approval to use this for the main survey was not obtained so the sampling frame was switched to NPD, specifically the 2014 School and Alternative Provision Censuses. Even though this excludes pupils in independent schools, the NPD was deemed a good alternative sampling frame as it contains a broad range of variables that could be used in the stratification of the sample. In order to ensure that the NPD would produce representative estimates, the HSCIC compared survey estimates between children from independent schools and non-independent schools from other school surveys, i.e., the Smoking Drinking and Drug Use Survey (SDD)³ and the Health Behaviour of School Children survey (HBSC)⁴, and it was found there was no significant difference between the two groups. It was concluded that the WAY survey would not be significantly impacted as a result of independent schools not being included in the sample (just under 7 per cent of all school children). A random sample of 298,080 15 year olds across England was selected from the NPD.

Survey materials and questionnaire

A small number of changes were made following the pilot and trial survey:

- Improvements were made to the survey materials such as clearer instructions on how to complete the survey, better sign-posting and more information provided on whom to speak to if the participant had any concerns or questions raised by the survey.
- Minor wording and content changes to the questionnaire.
- The functionality of the online survey was improved in terms of accessibility, e.g. options to increase the font size and background colour were added. Following feedback on the

questionnaire itself, some changes were made to the instructions, placement of questions and refinement of how some of the questions were worded.

- It was decided that response rates would be closely monitored at LA level in order to determine the timing of the reminder mailout and the number of reminders needed to achieve the target sample sizes. Reminder mailouts could then be targeted by gender within under-achieving LAs to boost response rates where needed. Reminders were not sent where target sample sizes had already been met.

1.3 Survey stages

Fieldwork for the main survey took place between 23rd September 2014 and 9th January 2015. Prior to this, on 8th September 2014, parents or carers of the selected sample were sent a separate pre-notification letter at the same time as the selected respondents, giving them the opportunity to opt their child out of the survey (see Appendices A.1 and A.2). Those who opted out were removed prior to the initial mailing (see Appendix A.3) for the survey and were not sent a copy of the questionnaire (see Appendix A.4 for a copy of the final questionnaire).

The survey mode consisted of a postal survey, including reminders, with the option to complete the survey online. The percentage increase in response following each reminder mailout during the trial was used to estimate the impact of each reminder in the main survey; it was deemed that these reminders would sufficiently benefit response rates.

The survey was based on Dillman's *Tailored Design Method*⁵, which consists of:

Table 1.2: Survey stages

Task	Date
Advance mailing to full sample (pre-notification mailing)	8 th September 2014
Full questionnaire mailing to eligible sample (mailing 1)	23 rd -26 th September 2014
Postcard reminder to eligible sample	1 st October 2014
Reminder (including questionnaire) to eligible sample (mailing 2)	13 th -15 th October 2014
Second reminder (including questionnaire) to a targeted sample of non-responders (mailing 3) within LAs	14 th November 2014
Additional reminder (including questionnaires) to a targeted sample of non-responders (mailing 4) within LAs	12 th December 2014

Endnotes

¹ The Medical Research Information Service Integrated Database and Administration System (MIDAS) based on health records and controlled by HSCIC.

² The National Pupil Database based on data for pupils attending schools and colleges in England, and controlled by the Department for Education.

³ [Smoking, drinking and drug use among young people in England in 2014, HSCIC, 2015](http://www.hscic.gov.uk/pubs/sdd14)
<http://www.hscic.gov.uk/pubs/sdd14>.

⁴ Health Behaviour in School-aged Children (HBSC) England National Report (2015)
<http://www.hbscen.org/wp-content/uploads/2015/10/National-Report-2015.pdf>

⁵ *Internet, Mail and Mixed-Mode Surveys: The Tailored Design Method*, Dillman, D.A., Smyth, J.D., and Christian, L.M. (2008)

2. Questionnaire Development and Piloting

2.1 Initial development

The Children and Young People's Health Outcomes Forum made a number of recommendations which they felt were necessary in order to improve outcomes for children and young people. The chief concern for young people was the gaps in the Public Health Outcomes Framework (PHOF) relating to key health behaviour measures such as smoking, physical activity and substance misuse. Thus, the WAY survey topics and questions were chosen with these gaps in mind and with the intention to detect changes over time should the survey be repeated.

The questionnaire topics at the trial stage were agreed in collaboration with the Steering Group. The initial version of the questionnaire was then developed which was made up of a combination of different questions from established surveys proven to work well with young people, and some new questions were developed specifically for the purpose of the WAY survey. The established surveys used included:

- Health Behaviour in School-aged Children (HBSC)¹;
- Health Survey for England (HSE)²;
- Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS)³
- Survey of Smoking, Drinking and Drug Use Among Young People' (SDD)⁴.

Table 2.1 details the source surveys used for each of the questions.

The questions used in the main *What About YOuth?* survey were largely consistent with those included in the trial survey.

Table 2.1: Source survey for the WAY 2014 questionnaire

Questionnaire Section	Question No.	Subject	Source survey
What about you and what you eat?	Q1	General health	HSE
	Q2, 4, 5, 6	Diet	Food & You
	Q3	Portions of pulses	New
	Q7	Take-away food, breakfast, sleep	TELLUS3
What about free time?	Q8-10	Television; Computer games; Social media	HBSC
	Q11, 12	Smart phone; Reading	New
What about physical activity?	Q13-15	Physical activity	HBSC
	Q16-18	Smoking habits	SDD 2011
What about smoking?	Q19, 20	e-Cigarettes; Other tobacco	Adapted from SDD 2014
	Q21	Attitudes to smoking	SALSUS 2010
What about drinking?	Q22-26	Drinking habits	SDD 2011
	Q27, 28	Drunkenness	SALSUS 2010 / New
What about drugs?	Q29-38	Cannabis and other drug taking	SDD 2011
	Q39	Attitudes to drugs	SALSUS 2010
What about how you feel?	Q40	Body image	HBSC
	Q41	Mental wellbeing scale	WEMWBS
	Q42-45	Wellbeing	ONS
What about bullying?	Q46, 47	Bullying	HBSC
What about family?	Q48	Family members	SALSUS 2010
	Q49	Number of siblings	N/A
What about how you live?	Q50-56	Family affluence scale	HBSC
What about you?	Q57-60	Demographics	HBSC
	Q61	Postcode	N/A
	Q62	Ethnicity	SDD 2011
	Q63, 64	Sexuality; Religion	HSE
	Q65	Learning disability	Tellus3
	Q66	Long-term disability or illness	HBSC
	Q67	Physical impact of disability or illness	ONS
	Q68, 69	Medication; School attendance	HBSC
	Q70-72	General questions	N/A

It was decided not to include some questions such as asking about a young person's weight, as this was a self-completion survey and self-reported weight measurements are known to be unreliable. Also, teenage pregnancy data and data on sexually transmitted infections (STIs) were already available from elsewhere to provide outcomes on sexual health.

The final topics chosen for use in the trial and main WAY surveys were:

- General health
- Diet;
- Free time;
- Physical activity;

-
- Smoking including e-cigarettes and use of other tobacco products;
 - Drinking;
 - Drugs;
 - Emotional and mental wellbeing; and
 - Bullying.

Demographic questions were also included in the survey in order to aid analysis of the data which covered family/household situation, gender, ethnicity, sexuality and socio-economic status. The ultimate aim of these questions was to allow health professionals within LAs to target health services in a more effective and specific way.

2.2 Testing the questions

Questions were extensively tested before the trial survey, and where necessary were revised before fieldwork began for the main survey. Details of the testing stages and revisions follow.

Stage 1: Cognitive testing

A total of 11 cognitive interviews with young people aged 14 – 16 were carried out during the questionnaire development phase of the trial survey. The cognitive interviews were primarily designed to test the questions, but were also used to gather opinions on various examples of survey branding and options for incentivising the survey and to help inform the wider design of the survey. Some of the key findings from the cognitive testing at the trial stage were:

- the questionnaire, on the whole, was working well;
- young people did not feel uncomfortable answering any of the questions;
- there was some concern about parent(s)/guardian(s) seeing responses;
- placement of some questions should be reconsidered; and
- question wording and instructions could be amended in some cases to improve comprehension and clarity.

Stage 2: Workshop

As part of the development work before the trial survey, the National Children's Bureau (NCB) held a two day residential workshop with a group of 14 young people recruited from 'Young NCB', and 'Young Research Advisors'. The aim of this workshop was to further develop the content and branding of the survey materials. NCB outlined recommendations from the workshop which heavily influenced the design of the branding for the trial survey and subsequent main survey. Some of the key findings included:

- a suggested name for the survey – 'Understanding YOuth';
- that information provided to young people about the survey should focus on:
 - the importance of young people taking part;
 - how to take part;
 - confidentiality; and

- how the survey will help other young people.
- that the branding should be colourful, but simple, and crucially, consistent across all materials.

Stage 3: Pilot survey

Prior to carrying out the trial survey, a small-scale pilot survey was conducted by Ipsos MORI, with fieldwork taking place in August and September 2013. The main purpose of this was to test the materials and processes involved in the survey and further their development.

The pilot survey consisted of two core elements:

- 1 Small-scale postal survey of 250 young people (in Solihull LA); and
- 2 Five telephone in-depth interviews with non-responders.

Overall, the pilot survey proved to be successful, and the findings from both of these elements were used to finalise the materials used for the trial survey itself, as well as to iron out any issues with the processes involved (e.g. sampling, printing, scanning, data processing). Some of the key changes made as a result of the pilot survey included:

- moving to using C4 envelopes for outgoing and return mail to improve the printing, fulfilment and return mail processes;
- refining questionnaire layout and instructions to reduce completion error; and
- improving the visibility of the option for participating in the survey online, following feedback from the in-depth interviews with non-responders.

Stage 4: Graphic design

Following the workshop, Ipsos MORI's Multimedia and Graphics Department worked to develop the branding for the trial survey materials to ensure it was consistent across all of these. The final branding was decided upon by HSCIC and DH, with further input from the young people recruited by NCB, who provided comments on the look and feel of draft materials. Specifically, they were keen to ensure that the branding reflected their desire for it to look colourful, simple and professional.

Telephone helpline and email address

During the pilot fieldwork, a website provided information about the survey. In addition to this, after the pilot stage was completed, a telephone helpline was established for participants and their families to call if they had queries about the research during the trial and main surveys. This phone number was publicised on the website and was printed on the materials sent to participants and their parents. The telephone team at Ipsos MORI kept a log of queries, to which they had pre-written responses. The telephone team also kept a record of opt-outs which was sent to the main project team at Ipsos MORI.

As well as the telephone helpline number, participants were also given an email address to contact if they had any queries about the survey: whataboutyouth@ipsos.com. Any queries received at this email address were sorted by the project team, and any participants who emailed to opt out of the survey were removed from future mailings about the survey.

2.3 Final questionnaire – paper and online

Most of the questionnaire for the main survey stayed the same as the trial survey, with only minimal changes to the questionnaire as stated earlier. Beyond these, an additional question (no. 72) was included as the final question for the main survey, asking whether participants would be willing to be re-contacted if HSCIC wanted to conduct research in the future.

Both the paper and online versions of the survey were designed to take around 15 minutes to complete. There were unavoidable aesthetic differences between the online version and the paper version, although questions in each section remained identical. There was, however, a difference between the paper and online surveys in terms of routing. For the online version of the survey, participants were asked at the start whether they were receiving any help (for example from a friend or parent) in completing the questions. If participants completing the survey online were receiving help, they were routed around some questions so they did not have to answer them. These questions were ones that covered sensitive issues, i.e. questions about alcohol consumption, smoking, drug use and bullying, as well as the question on sexuality. These questions were bypassed because it was felt that participants completing the survey with someone else might feel uncomfortable in answering these sensitive questions, and might give untruthful answers out of pressure to appease whoever they were completing the survey with. It was considered that making those receiving help answer these sensitive questions may skew the data by underestimating the actual levels of such behaviour. As it would have been much more difficult to replicate this approach in the paper version of the survey, these questions were asked of all participants regardless of whether they were receiving help to respond to the survey. Throughout the report ‘all those not observed’ indicates those who were not observed online and all those who completed a paper questionnaire regardless of whether they were observed or not.

2.4 Consideration of mode issues

There are a number of issues to consider in managing a multi-mode survey, though the impact of these on WAY 2014 is minimal as both the paper and online versions are self-completion. They include managing the sample, issuing reminders, logging refusals, and monitoring response rates.

The questionnaire design took account of the different modes used in the survey. It was important to ensure comparability between the modes (e.g. similar size free text boxes on the paper and online versions, so that respondents provided the same level of detail whichever mode they used).

The routing for the online version could be controlled and so there were fewer inconsistent answers, such as the participant saying they did not drink alcohol but then going on to answer the question on how often they drink. In order to help reduce inconsistent answers in the paper questionnaire, the routing instructions had to be very clear. Inconsistent answers are not totally unavoidable – please see Appendix A.6- Edit specification to see how these were dealt with.

Endnotes

¹ <http://www.hscicengland.com/wp-content/uploads/2013/10/HBSC-England-report2011.pdf>

² Health Survey for England 2013. <http://www.hscic.gov.uk/catalogue/PUB16076>

³ The Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS), NHS National Services Scotland, 2014. <http://www.isdscotland.org/Health-Topics/Public-Health/SALSUS/Latest-Report/>.

⁴ Smoking, drinking and drug use among young people in England in 2014, HSCIC, 2015
<http://www.hscic.gov.uk/pubs/sdd14>.

3. Sampling

3.1 Sample Design

The objective of the sample design was to enable robust analysis of results at LA level within England. This design was informed by the WAY trial survey. A random sampling methodology was used in order to ensure that no bias was introduced into the sample selection and that the survey sample reflected the population.

A random sample of all those pupils who turned 15 in academic year 2013/14, that is, whose dates of birth ranged between 01/09/1998 and 31/08/1999, was selected. A target margin of error of +/-3 per cent at the 95 per cent Confidence Interval (CI)¹ was aimed for in each LA. The results of the trial indicated that the response rate achieved varied by gender, ACORN² category and region. These variables were used to calculate projected response rates by gender for each LA individually³. It was therefore possible to calculate the starting sample needed for the main stage to achieve a given number of responses in an LA. The total sample size needed came to 298,080.

This resulted in three different scenarios:

- Scenario 1 – LAs where the total number of 15 year olds for both genders was greater than the target number of achieved interviews required;
- Scenario 2 – LAs where the total number of 15 year olds for one of the genders was greater than the target number of achieved interviews required, and equal to or less than the target number of achieved interviews for the other gender;
- Scenario 3 – LAs where the total number of 15 year olds for both genders was equal to or less than the target number of achieved interviews.

As a result, the process for selecting the sample also varied across LAs (and within LAs by gender) as outlined in the following table.

Two LAs were merged with their nearest neighbour due to small populations; Isles of Scilly were merged with Cornwall, and City of London were merged with Hackney.

Table 3.1: Sample selection

Situation	Gender 1	Gender 2	No. of LAs
1	1 in n sample selected	1 in n sample selected	103
2	1 in n sample selected	Census	36
3	Census	Census	11

The second and additional reminders were targeted to specific genders within specific LAs in order to maximise response rates and meet the +/- 3 percentage point CI predicted target for all young people in each LA. Reminders were not sent to specific genders within LAs where the targets had been met.

3.2 Sample Frame

The NPD provided a robust and good quality sample frame. However, there were some variables that were not complete for all records. Of the 566,154 records in the NPD sampling frame, 1,268 (0.2 per cent) were excluded. Reasons for exclusion were:

- 982 records were duplicates.
- 248 records were non-English home addresses.

-
- 9 records where the address was flagged as protected.
 - 29 records where the address was missing.

The final, eligible population for selection was 564,886 records.

3.3 Coverage

The selection of the sample from the NPD covered all 152 LAs in England.

After exclusions the sampling frame covered 99.8 per cent of 15 year olds in England not in independent schools (i.e. after approximately 0.2 per cent had been excluded, as described in the previous section).

3.4 Sample Selection

The sampling frame was explicitly stratified by gender within LA, and within each of these groups it was ordered by postcode, output area, lower super output area, and rurality.

The trial showed that response rates were much lower for boys in most LAs and so in LAs where it was possible⁴ a required sample size for each gender within LA was calculated, using modelled predicted response rates, expected design effects⁵, and finite population correction⁶.

The sample frame was ordered by the stratification variables and a systematic (1 in N) sample⁷ was selected.

A sample was drawn from the NPD with a sample size of 298,080.

Endnotes

¹ This is for a survey estimate of 50 per cent and estimates higher or lower than this will have a smaller CI.

² Acorn segments postcodes and neighborhoods into 6 Categories, 18 Groups and 62 types. By analysing significant social factors and population behaviour, it provides an understanding of the different types of people who live in these areas.

³ This was achieved by calculating a predicted response rate for every ACORN category in the population and then applying these response rates across the ACORN categories present in each of the LAs.

⁴ i.e. all LAs where a census was not being drawn.

⁵ Adjustments used to determine the effective sample size.

⁶ A finite population correction is used to define both the standard error of the mean and the standard error of the proportion. This is generally used when the sample size is more than 5 per cent of the population size.

⁷ i.e. starting at a random point, every nth individual within each population strata is selected for the sample.

4. Fieldwork – Main Survey

4.1 Survey materials

Once the previous stages had been completed, fieldwork for the main survey could begin.

As previously mentioned, the implementation of the main survey was based on Dillman's *Tailored Design Method*, which was adjusted in the main survey to include an additional reminder. The survey materials to participants were mailed out in this order:

- advance mailing to full sample (pre-notification mailing);
- full questionnaire mailing to eligible sample (mailing 1);
- postcard reminder to eligible sample;
- reminder (including questionnaire) to eligible sample (mailing 2);
- second reminder (including questionnaire) to a targeted sample of non-responders (mailing 3) within LAs; and
- additional reminder (including questionnaires) to a targeted sample of non-responders (mailing 4) within LAs.

Questionnaires were posted out with a freepost envelope for participants to return their questionnaires which were sent to TNT Business Solutions for processing.

Ipsos MORI assigned each sample case a unique 8 digit reference number. This reference number was attached to any materials that were posted out to participants. A 9th digit was added to the mailed questionnaires, with this final digit indicating which mailout the questionnaire had been sent in. Any response without a 9th digit was an online response.

4.2 Additional languages

The survey was not available in languages other than English. This was because the ability to speak English amongst this age group is generally very good, and is too high to warrant the resources needed to create questionnaires in additional languages. Participants who asked about this were informed that they could get someone they trust to help them translate the survey. Over the fieldwork period, only one person contacted Ipsos MORI with a query about being able to complete the survey in another language.

4.3 Website development

The Multimedia and Graphics Department at Ipsos MORI worked to create a website which reflected the design of the questionnaire. The WAY website (www.whataboutyouth.com) was initially developed during the trial survey and was kept live throughout the main survey fieldwork period and beyond. Recommendations from the NCB workshop during the trial survey were incorporated into the design of the website, ensuring that it was simple and easy to use. The website included:

- FAQs for young people explaining about the survey and providing practical information about how young people complete the survey;
- FAQs for parents explaining about the survey and how and why their children were selected as participants;
- FAQs for teachers for promoting the survey to their students;

-
- a teacher pack containing resources and information that teachers could use to promote the survey to pupils. This was found to be useful by most of those who had used the resources who responded to a follow-up survey by NCB;
 - information detailing what the survey is and what it is being used for;
 - information on the roles of HSCIC, Ipsos MORI, DH and NCB in the survey;
 - a video explaining the survey;
 - information and advice about the health and lifestyle of young people;
 - links to health-related websites should the participants have any concerns after completing the survey;
 - a link to complete the survey online.

The website could be adapted as needed and traffic to the survey website was monitored throughout the fieldwork period. After fieldwork for the main survey closed, participants could no longer complete the survey online, but they could still access information about the survey and links to health-related websites.

4.4 Consent

The Market Research Society (MRS) Code of Conduct, which Ipsos MORI abides by, defines a person aged under 16 as a child and any research requires that consent is given by a parent/guardian (or a teacher *in loco parentis* for research conducted in school). Prior to the trial survey, Ipsos MORI was granted a waiver by the MRS Standards Board based on the approach of providing advance information about the survey to parents, but without seeking their consent. Most 15 year olds have the ability to provide informed consent and understand the implications of participating in a survey of this nature. It was felt this approach would give appropriate emphasis to the young person's right to participate, while ensuring those in need of support could obtain it. It was also deemed to be desirable to avoid seeking consent from parents/guardians due to the sensitive nature of some of the topics covered on the questionnaire. It was considered important to avoid restricting the young person's right to choose whether or not to participate. Obtaining a waiver for parental consent was intended to help avoid both over-protective parents denying children the right to participate in research, or parents 'coercing' their children to participate against their wishes. In this respect, the same approach used in the trial survey was taken forward in the main survey. However, the separate pre-notification letter sent to parents or carers at the same time as the selected participants gave them the opportunity to opt their child out of the survey.

4.5 Re-issues

All participants received pre-notification letters on 8th September 2014, and then (if they did not opt out of the survey) all participants were sent a questionnaire between the 23rd – 26th September, then a reminder postcard on the 1st October 2014, then three subsequent reminder questionnaires at regular intervals:

- first reminder (including questionnaire) to eligible sample (mailing 2 – sent 13th-15th October 2014);
- second reminder (including questionnaire) to some non-responders (mailing 3) sent 14th November 2014 – this was targeted to specific genders within specific LAs. In total reminders were sent to 168,945 young people, broken down by:
 - males in 148 LAs

- females in 74 LAs.
- additional reminder (including questionnaire) to some non-responders (mailing 4) sent on 12th December 2014 – again this was targeted to specific genders within specific LAs. In total, reminders were sent to 105,847 young people as follows:
 - Males in 115 LAs.
 - Females in 51 LAs.

4.6 The use of incentives

Incentives were used to encourage participants to take part and boost response rates. £5 shopping voucher incentives were posted out to participants who took part in the survey by post or online. This was done in three waves (wave one in November 2014, wave two in December 2014, and wave three in January 2015).

5. Fieldwork Monitoring

5.1 Progress reports

During fieldwork, it was important to monitor what data was being collated. Ipsos MORI received daily reports from TNT Business Solutions, who were responsible for scanning returned questionnaires and data processing.

TNT sent daily reports to Ipsos MORI containing information about the number of scanned questionnaires and the reference numbers of participants who had opted out of the survey. The daily progress reports were in Excel format and contained a breakdown monthly, weekly and daily of the numbers of questionnaires scanned, the number of blank questionnaires received and the amount of white and spoiled mail received. The HSCIC and DH received weekly progress reports.

TNT uploaded a list of returned questionnaires post-scanning to the Ipsos Exchange data sharing system on a daily basis. This was eventually changed to a list of completed questionnaires sent weekly via a password protected external hard-drive; this adaptation occurred because it was deemed to be a more efficient method of sharing data than the Ipsos Exchange online system. The list of completed questionnaires consisted of text files and image files of the completed questionnaires that had been scanned. These were then sent through to the data processing team at Ipsos MORI.

TNT also kept a log of ‘Gone Aways’, which were questionnaires that were returned to TNT Business Solutions because the addressee had moved away – these were effectively treated as opt-outs. Ipsos MORI collated the list of reference numbers of opted-out participants and these reference numbers were removed from the next mailing of survey materials.

5.2 Fieldwork queries

Ipsos MORI received a significant number of queries on the telephone helpline, via email, and by post from participants, parents and others. The majority of these were similar in nature – participants asking to opt out, queries about receiving multiple questionnaires, notifications of change of address and questions regarding the voucher incentive were common queries received.

There was a list of set responses for the telephone team to use as a guideline when responding to telephone queries. Each telephone query received was logged in an Excel spreadsheet along with a query code which identified what the call was about. Calls from participants opting out were identified and logged so they could be removed from future mailings.

Queries received in the WAY email inbox were received by the core project team. Automated replies were set up which sent automatic responses to participants with answers to the most common queries asked. More unique queries were dealt with individually and responded to by members of the project team. Opt-outs were recorded and these reference numbers were removed from further mail-outs.

Post about the survey was received by TNT Business Solutions, who forwarded it to Ipsos MORI for sorting. This post was divided into two types – spoiled mail and white mail. Spoiled mail consisted of questionnaires that had been damaged and were unusable. White mail included any letters written about the survey. Any opt-outs in the white mail were logged and reference numbers were removed from further mailings.

Sixteen complaints about the survey from participants or parents were forwarded to HSCIC, who responded to these directly. Participants who brought up particularly sensitive topics in their queries (such as being bullied or victims of domestic violence) were provided with details of helplines such as ChildLine¹.

5.3 Respondents having help to complete the questionnaire

As part of the survey, respondents were asked whether they had received help from someone such as a parent or friend in completing the questionnaire. There were 2,713 (2.2%) participants who had help and completed the questionnaire online who were routed past some of the more sensitive questions. It was felt that having help might influence how participants responded to the survey – for example, they might be less inclined to say that they had ever smoked, drunk, tried drugs or bullied others if they were completing the questionnaire with another person present. Analysis was carried out to look at the impact of this by comparing answers to the survey questions for those who had help with those who did not (including online responses of those who did not have help). This determined how the final data would be analysed for the Smoking prevalence findings (published in August 2015) and the Main Report, i.e. whether those who had assistance would be excluded or analysed separately for certain variables.

People were able to indicate if they had someone helping them at the outset at Question A (QA) in the online version, but 99.9% of those who coded ‘Yes’ at this question also coded ‘Yes’ at Q71, so Q71 was far more helpful than QA to ascertain whether participants had help or not. On the basis of the analysis in Appendix A.8, it was decided that the differences were not great enough to analyse the results separately when writing the reports. There were significant differences when comparing results on questions regarding risky activity between the two groups; but this does not necessarily mean that the person assisting had influenced the answers, as the differences in response may just be due to the different types of people who have had assistance compared to those who filled in the questionnaire unaided.

In the majority of cases, those who had assistance were less likely to say they had ever engaged in any risky activity, as they may not have wanted the person helping them to complete the survey to know. For example, those who had assistance were:

- More likely to say they had never smoked (80% who had assistance compared with 75% who did not).
- Less likely to say they had ever had an alcohol drink (58% who had assistance compared with 64% who did not).
- Less likely to say they had ever tried cannabis (8% who had assistance compared with 12% who did not).
- Among those who had ever tried cannabis, those who had assistance were less likely to say they had ever tried cannabis in the last month than those who did not have any assistance (37% who had assistance said they had tried cannabis compared with 45% who did not).
- Among those who had ever tried other drugs, those who had assistance were less likely to say they had ever tried other drugs in the last month than those who did not have any assistance
 - 31 per cent of those who had assistance reported having tried any other drugs in the last month, compared with 37 per cent who did not.
 - 23 per cent of those who had assistance said they had tried other drugs more than a year ago, compared to 17 per cent of those who did not.

Further details can be found in Appendix A.8.

5.4 Opt-outs

Participants could opt out of the survey in multiple ways. Parents of participants were also able to opt their children out of the survey.

Participants who opted out via email were asked to give their reference numbers, which were logged. For participants wanting to opt-out that did not state their reference number in their email, their reference number could often be found in the sample by using their name and/or address details. The reference numbers were collated with the references from the other opt-out sources and those participants were removed from future mailings.

Participants or parents that called the WAY helpline requesting to be removed from the survey were also asked to provide their reference number. These calls were logged as opt-outs and their reference numbers were removed from future postings.

Participants that sent white mail with requests to be opted-out had their reference numbers logged. These were also opted out. Spoiled mail (such as torn up questionnaires) was also taken as a refusal and treated in the same way.

Any mail that was marked as ‘return to sender’ from the initial mailing of the pre-notification letters was sent back to TNT Business Solutions and was logged as a ‘Gone Away’. These were effectively treated as opt-outs so they were removed from further mailings.

Endnotes

¹ <https://www.childline.org.uk/Pages/Home.aspx>

6. Response rates

6.1 Introduction

The following section discusses the survey response rates achieved overall and by individual LA.

The original file contained 566,154 NPD records where it was possible to match the postcode for the address to an LA. A total of 1,268 (0.2 per cent) were excluded (as detailed in the Sampling section). The sample of 298,080 individuals was drawn from the remaining 564,886 records.

Of the 298,080 sampled individuals, 2,835 opted-out prior to the questionnaire mailout. The full questionnaire mailing to eligible sample was sent to a total of 295,245 young people of whom 120,115 responded. The overall unadjusted response rate for the survey was 40 per cent (based on the issued sample) while the adjusted response rate for those sent the questionnaire was 41 per cent (this excludes any undeliverables and opt-outs from the issued sample). The final sample for analysis was 120,115, of these, 19,265 (16 per cent) responded online and 100,850 (84 per cent) on paper.

Response rates varied by gender, with adjusted response rates of 35 per cent for boys and 49 per cent for girls. Response rates also varied across LAs, with the lowest adjusted rates recorded in the London Boroughs of Kensington and Chelsea and Hammersmith and Fulham (both 27.8%). The highest response rates were recorded in Devon (49.6%), Wiltshire (49.7%), Poole (49.7%) and Somerset (50.1%).

The following table outlines the response rates overall. Please see Appendix A.7 for the response rates by Local Authority.

Table 6.1: Overall summary and categorised outcomes

	Total sample	Valid sample
Issued sample	298,080	
Opt out prior to survey	2,835	
Total valid sample		295,245
Completed questionnaires		120,115
Online		19,265
Postal		100,850
Refusals		619
White mail / spoiled mail		70
Email		105
Telephone		444
Gone away		4,530
Non-response		169,981
Total URR		40%
Total ARR		41%

7. Data entry, validation and outputs

7.1 Coding

Coding of ‘other’ responses was conducted by Ipsos MORI’s in-house coding team using the Ascribe programme. A detailed code frame was set up and agreed with the HSCIC team.

Five per cent of all coding was quality checked. Cases were randomly selected for quality checking, and any individual coder was only able to validate codes originally allocated by another coder.

7.2 Validation and editing

The online and paper questionnaires matched each other in terms of question wording and routing, apart from the sensitive questions which could be routed out in the online version if the respondent ticked that they received help in completing the questionnaire. However, because they are both self-completion modes, it was decided that very little editing would be carried out, to ensure the true responses of the participants are included.

The data capture company, TNT Business Solutions, sent through weekly updates via a secure portal, which included text files containing the data captured from hand written answers¹ (such as age and number of portions of food).

The responses from each mode were merged and then checked together. This resulted in a range of changes such as amending question answer labels.

Any queries relating to reference numbers were referred to TNT Business Solutions to check or amend within the raw data. This dealt with duplicates and blank questionnaires.

All data validation and editing was conducted in accordance with ISO 9001: 2008, the international standard for Quality Management Systems, and ISO 27001:2005, the international standard for Information Security Management.

The edit specification is in Appendix A.6.

7.3 WEMWBS imputation

The Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS) is formed of 14 statements covering a range of feelings and attitudes towards life². Participants were asked to rate how often they felt like each of the 14 statements, ranging from ‘None of the time’ to ‘All of the time’, which are scored from 1 to 5. Each participant is given a single score based on their responses to the 14 statements which ranges from 14–70 (a sum of their scores to the individual statements). 70 is the highest possible score of wellbeing, while 14 is the lowest.

If participants had missed four or more questions in the series no WEMWBS score was calculated. Where answers for between one and three statements were missing for a participant, a WEMWBS score was calculated by imputing the participant’s mean score on the statements they did give answers for to replace any missing values. This has increased the number of participants who can be included in the WEMWBS analysis³. 117,842 participants answered at least 11 of the statements. 102,580 participants answered all 14 statements. The effect of imputation on WEMWBS scores was minimal, with the mean score decreasing by 0.01 as a result - from 47.59 before to 47.58 after imputation.

7.4 Data outputs

The HSCIC published a report specifically focusing on the Smoking prevalence findings from the WAY survey in August 2015⁴. This Technical Report is part of a larger comprehensive report analysing all the key indicators from the survey. Specifically, this larger report includes:

- An Executive Summary, highlighting all the main findings across all the survey topics.
- A main report, covering commentary on the key indicators including charts, figures and tables.
- This detailed Technical Report and Appendix, incorporating details of the survey methodology, trial survey, survey documents and statistical information (e.g. standard errors, confidence intervals).
- Excel data tables for each key indicator broken down by LA (see Appendix A.5 for the Variables specification). The key indicators will also be published on the PHE Fingertips tool available on the PHE website⁵.
- A full survey dataset incorporating all the data collected from the survey (this will become available on the UK data service website⁶.)

Additional variables were added onto the full survey dataset, such as further geographical area codes, economic codes and health codes (such as Index of Multiple Deprivation), NHS team, etc.). These were used for analysis and weighting. Access to the data with these variables is restricted to protect anonymity. Data are weighted and details of the procedure used can be found in the Weighting and Grossing Section.

7.5 Summary of data issues

Discrepancies in Local Authority data:

In order to ensure the estimates at LA level are as accurate as possible, it was necessary to compare the postcode of the participant on the sampling frame with that actually provided on the completed questionnaire. The results showed that where young people had moved most had done so within the same LA. Those who had not stayed in the same LA, only make up a relatively small number of cases, meaning the estimates at LA level are not affected and therefore no adjustments are necessary.

In summary, 120,115 questionnaires were received and 116,744 submitted a response for the postcode question (97%). Of these, 99,651 completely match the written postcode against the sample postcode (85% of those who answered the postcode question, i.e. of the 97%). Of the 17,093 (15%) that do not match, the details are as follows:

- 755 (1%) were written in the wrong format;
- 7,180 (6%) cases matched the first half of the postcode so it has been assumed they have not moved LA;
- 5,984 (5%) cases matched the second half of the postcode so it has been assumed they have not moved LA;
- 3,174 (3%) didn't match either the full, first half or second half of the postcode, so they were possible movers.

However, on manually reviewing a selection of these 3,174 cases, the vast majority appeared to be small discrepancies between the sample and written postcode – for example, one letter or number

different; these could be as a result of incorrect entry of the postcode by the participant or poor hand writing rather than different postcodes. A check on the first letter of the postcode (which could indicate the potential number of actual moves) shows there were 721 cases (0.6% of the valid cases) of the 3,174 cases where the first letters did not match.

Therefore, the vast majority of participants had not moved (i.e. those cases where the postcode matched entirely or either the first or last parts of the postcode matched entirely), and suggests that in the minority of cases where young people had moved, that they had tended to do so within the same LA, with only a small proportion (less than 1%) looking like they may have moved further afield. As there was such a small number, their results have remained within their sampled LA as these cases will have a negligible impact on the results and not change the prevalence rates overall or within an LA.

Discrepancies in data capture of written in responses:

The text files were checked for unusual responses – there were 165 reference numbers that had answers where changes were needed as the data capture had not been correct (largely due to poor handwriting or not writing responses within the boxes correctly). Amendments were made and the corrected answers merged into the data file.

Endnotes

¹ The scanned images of hand written responses were analysed by a computer programme which then converted the image into data.

² <http://www2.warwick.ac.uk/fac/med/research/platform/wemwbs/>

³ <http://www.healthscotland.com/uploads/documents/7551-WEMWBS%20User%20Guide%20Version%201%20June%202008.pdf>

⁴ <http://www.hscic.gov.uk/pubs/healthwellbeing15yo>

⁵ <http://www.phoutcomes.info/>

⁶ <http://www.data-archive.ac.uk/>

8. Weighting and grossing

The following summarises the approach to weighting the data for the main stage of the WAY survey. The weighting approach is a two stage process, applied within each LA separately.

8.1 Design weights

The sampling approach undertaken for the main stage was informed by the response to the trial survey. The results of the trial indicated that the response rate achieved varied across the following factors:

- Gender
- ACORN
- Region

As mentioned in the Sampling Section, the response rates achieved in the trial were used to calculate projected response rates (by gender) for each local authority individually¹, and calculate the starting sample needed to achieve a given number of responses in a LA. For the main stage, target sample sizes for each LA were set at the levels necessary to be able to achieve a +/-3 percentage point margin of error at the 95 per cent Confidence Interval². Using differential response rates for males and females within each local authority to select a disproportionate sample would achieve a more representative achieved sample.

However, sampling in this way means that different members of the population have a different chance of being selected in the sample. To correct for this, a design weight is needed. The design weight evens out the selection probabilities so that each selected member of the sample has the correct importance, relative to the size of the sub-group of the population from which they come.

Design weights were therefore applied to the selected sample to control for differences in selection probabilities. This was done by gender within local authority. The design weight, *DW*, is calculated as one over the selection probability, that is:

$$DW = \frac{1}{p}$$

Where *p* is the selected sample over the population, that is:

$$p = \frac{n_{sel}}{N}$$

A local authority*gender cell (i.e. the specific calculation for each gender category within a LA) where a census was conducted (as in situations 2 (for one gender) and 3 (for both genders)) will therefore have a design weight of 1.

8.2 Non-Response weights

Even when disproportionate sampling is undertaken, it is very unlikely that the achieved sample exactly matches the population profile of the total population. In order to correct for any differences in the levels of non-response by different groups of the population, a non-response weight is required. Non-response weights even out the unbalanced response rates of different sub-groups so that each participant has the correct importance, relative to the size of the sub-group of the issued sample from which they come.

Stage 1 – Analysis

The first step in applying non-response weighting is to analyse the key demographics to see how closely the achieved sample matches that of the total population (in this case the National Pupil Database (NPD)). It is only possible to compare the achieved sample and total population on variables that are available for all records.

For the WAY survey, the achieved sample and total population were therefore compared on the following variables:

- From the NPD
 - Gender
 - Ethnicity
 - Free school meal (FSM) eligibility
 - Sample source (i.e. School or Alternative Provider (AP) census)
- Attached to the sample, based on postcode of the respondent³:
 - Rurality
 - IMD quintile

This analysis showed there were differences between the achieved sample and total population on most of the above variables. The exception to this was sample source, for which the proportion split between the School and AP census records was very similar⁴. As a result it was not necessary to include sample source in the weighting approach as it did not require correction.

In addition, as gender was used in the sampling stratification, it was also removed at this point.

This left the following as potential weighting variables:

- Ethnicity
- Free school meal (FSM) eligibility
- Rurality
- IMD quintile.

Stage 2 – Checking variable suitability

The second stage in the process is to check the extent to which it is possible to weight by the variables where the achieved sample and total population differ.

The levels for each of the variables were collapsed and merged with one another to reduce the number of interactions between the variables. This was done to minimise the chance of a “zero cell”. This is where, for example, the interaction between rurality and ethnicity produces zero achieved responses but a non-zero population. This can happen for small populations or outliers, or for groups with abnormally low response rates (e.g. those in institutions).

As FSM eligibility is a binary variable it did not need amending; however the other variables were collapsed as follows:

- Ethnicity: white / non-white
- Rurality: urban / not urban
- IMD quintile: quintiles 1 & 2 / quintiles 3, 4 & 5

Despite combining groups, the rurality variable still had a large number of zero response cells and was therefore not included in the weighting approach. As such, the variables it was possible to include in the weighting were:

-
- Ethnicity;
 - FSM eligibility; and
 - IMD quintile.

Stage 3 – Choosing cell or Random Iterative Method (RIM) weighting

Cell weighting was considered first as it allows the use of individual level interactions. It requires that each cell of the weighting table in both the population *and* sample have at least one person. The sample was such that certain cells had zero respondents, and therefore it was not possible to do robust cell weighting. As a result, it was more appropriate to use RIM weighting for this survey.

Stage 4 – Calculating the weights

RIM weighting is an iterative approach whereby the weights are calculated by taking the design weighted achieved sample divided by the population for each level of each variable. The variables are looked at one after another and the process is repeated until the sum of the weights is equal to the total population. This can sometimes be referred to as a “grossing weight” as the figures gross up the sample figures to the total population.

To check the quality of the weights it is more convenient to standardise the final weights to have a mean of 1, either across the whole sample or within some stratum – so in the case of WAY the weights were standardised within local authority. To do this the weights are divided by the mean weight to standardise them.

Encouragingly the standardised weights for WAY are relatively small (see Table 8.1 below).

Table 8.1: Standardised weighting for WAY 2014

Weighting	Number of cases	Per cent of cases
Up to 0.49	6	0
0.5-0.99	77,400	64
1.0-1.49	39,711	33
1.5-1.99	2,781	2
2.00-2.49	200	0
2.5+	17	0

The highest weight value is 3.73 (to 2 decimal places), although most are significantly lower than this. It is standard practice to treat any standardised weight higher than around 8 with extreme caution and investigate further. As a rule of thumb, values between 4 and 8 indicate that there could be some abnormal response patterns in the data. As such, the weighting for WAY 2014 calculated by this method is well within the bounds of a reasonable and robust weighting scheme.

Endnotes

¹ This was achieved by calculating a predicted response rate for every ACORN category in the population and then averaging these response rates across the ACORN categories present in each of the LAs.

² This is based on 50 per cent estimate and estimates bigger or smaller than this will have a smaller CI.

³ These variables are linked to location (either postcode or LSOA) rather than individual household.

⁴ i.e. less than 0.5 per cent difference between the two samples.

A.1 Parent pre-notification letter

Reference number: [REFERENCE NUMBER]

Parent or Carer of [child name]

[Address 1]

[Address 2]

[Address 3]

[Address 4]

[Postcode]

September 2014

Dear Parent or Carer

Your child is being invited to take part in *What About YOuth?*, an important new research study of young people in their year group across England. I am writing to provide you with information on the study so that you know what your child is being asked to do.

The *What About YOuth?* study is being undertaken by the Health and Social Care Information Centre on behalf of the Department of Health. They have asked Ipsos MORI, an independent research agency, to run the study.

Young people who are selected to take part in the study will be sent a questionnaire in the post. The questionnaire will ask your child about important subjects including their health, what they eat, what they do in their free time, bullying and whether they smoke or drink alcohol. The aim of the study is to make it easier for doctors, nurses and local authorities to improve the health services that are available for young people.

For more information about the study and what we'll do with your child's answers, take a look at the FAQs on the back of this letter. You can also visit the parent's page on www.whataboutyouth.com to see the questions your child will be invited to answer.

In about two weeks your child will receive the *What About YOuth?* questionnaire in the post. Participation is voluntary and it will be up to the young person to decide if they would like to take part. If they choose to take part, they can fill in the questionnaire and post it back to us or, if they prefer, they can complete the questionnaire online. They may ask for your help or assistance to complete the questionnaire and this is fine. All those who send back a completed questionnaire will be sent a £5 shopping voucher as a thank you for their help with this study.

However, if you would like to speak to someone about the study or do not wish for your child to take part, please contact **Ipsos MORI** by **19th September 2014** by calling **Freephone 0800 2600526** or emailing whataboutyouth@ipsos.com mentioning your child's name and the reference number at the top of this letter.

Kind regards,



Anna Quigley
Head of Health Research, Ipsos MORI



What is it? The *What About YOuth?* study has been launched as part of a new Government pledge to make improvements to the health of young people. It's the first in what we hope will be a series of studies of young people across England. By spending just a short time answering questions about their life, your child will be helping to make a difference to other young people.

What's it for? The *What About YOuth?* study asks about important subjects including your child's health, what your child eats, what they do in their free time, bullying and whether or not they smoke, have taken drugs or drink alcohol. More information will make it easier for doctors, nurses and local authorities to understand young people's health needs and understand which services could be improved; however, this can only be done if we get as much accurate information as possible. For this reason it's important that your child answers the questions honestly and doesn't feel pressurised to change their answers in any way.

Where did you get my child's contact details from? Your child's contact details were taken from the Department for Education's National Pupil Database (NPD), which contains details of every pupil in England. The NPD has been used as it is a reliable source of details such as name, address and date of birth.

We have received approval to use your child's contact details only for this study. We won't be using them for any other purpose, nor will we share them with anyone else. Information about the NPD can be found at www.gov.uk/national-pupil-database-apply-for-a-data-extract.

What will happen to my child's answers? Your child's answers will be kept in the strictest confidence and stored securely and will be used for this research project only. Your child's name and address will not be written on their questionnaire so they cannot be identified in the results. Your child's answers to the questions will be looked at alongside those of thousands of other young people.

Should I talk to my child about the study? It's really important that young people feel able to answer the questions honestly, without feeling pressurised to change their answers in any way. For this reason, **your child should be allowed to answer the questions confidentially, without having to show their answers to you or any other family member, unless they wish to do so.**

However, you may wish to discuss the study, and the topics that it covers, with your child. Links to information for parents about drugs, alcohol, bullying and the other subjects the questionnaire asks about can be found at www.whataboutyouth.com.

Your child's school may also discuss the survey with your child and the benefits of taking part.



A.2 Young person pre-notification letter

[First name] [Surname]

[Address 1]

[Address 2]

[Address 3]

[Address 4]

[Postcode]

Reference number: [REFERENCE NUMBER]

September 2014

Dear [First name]

What About YOuth? is a brand new study of young people in your year group across England that's being carried out by the Health and Social Care Information Centre on behalf of the Department of Health - and we want you to be involved! By spending just a short time answering questions about your life, you will be helping to make a difference to other young people.

Our study asks you about important subjects including your health, what you eat, what you do in your free time, bullying and whether you smoke or drink alcohol. The aim of the study is to make it easier for doctors, nurses and local authorities to improve the health services that are available for young people in your local area. Your school may also discuss the survey with you and the benefits of taking part.

In the next couple of weeks you will receive the *What About YOuth?* questionnaire in the post. You can fill in the questionnaire and post it back to us or, if you would prefer, you can complete the questionnaire online. Filling in the questionnaire should take you around 15 minutes but, depending on your answers, it may be quicker than this. If you send back a completed questionnaire we will send you a £5 shopping voucher as a thank you for your help with this study.

For more information about the study and what we'll do with your answers, take a look at the leaflet included with this letter. You can also visit www.whataboutyouth.com. Whether or not you take part in the study is completely up to you. If you do not wish to take part, if you would like to speak to someone about the study or if you need help filling in the questionnaire, please contact **Ipsos MORI** by calling **Freephone 0800 2600526** or emailing whataboutyouth@ipsos.com.

Thank you for taking the time to read this letter.

Anna Quigley – Head of Health Research, Ipsos MORI

If you would like to request the questionnaire in large print call Freephone 0800 2600526 or email whataboutyouth@ipsos.com.



A.3 Cover letter

[First name] [Surname]
[Address 1]
[Address 2]
[Address 3], [Address 4]
[Postcode]

Reference number: [REFERENCE NO]

September 2014

Dear [First name]

A couple of weeks ago we wrote to you about the *What About YOuth?* study which is being conducted by the Health and Social Care Information Centre on behalf of the Department of Health - we'd now like to invite you to complete the questionnaire. There are two ways to complete the *What About YOuth?* questionnaire:

1. **Fill in the questionnaire** and post it back to us in the enclosed freepost envelope. Remember – you don't need a stamp.
2. **Complete the questionnaire online** by visiting www.whataboutyouth.com and clicking on the 'Complete the Questionnaire' button. You can also go directly to the questionnaire on a smart phone by scanning the QR code at the bottom of this letter. Either way, you'll need to enter your username **[USERNAME]** to access the questionnaire.

Please return your completed questionnaire as soon as possible.

Completing the questionnaire should take around 15 minutes and you don't have to complete it all at once. If you complete the questionnaire online, your answers will be saved so, if you run out of time, you can come back to finish completing the questionnaire later.

To thank you for your time, if we receive your completed questionnaire by 10th October 2014, either by post or online, **we will send you a £5 Love2shop voucher** which can be used in a wide range of high street shops.

If you would like more information, please read the Frequently Asked Questions on the back of this letter. If you do not wish to take part, if you would like to speak to someone about the study or if you need help filling in the questionnaire, please contact **Ipsos MORI** by calling **Freephone 0800 2600526** or emailing **whataboutyouth@ipsos.com**.

Many thanks for your help.



Anna Quigley – Head of Health Research, Ipsos MORI



WHAT ABOUT YOUTH ?

What is it? The *What About YOuth?* study has been launched as part of a new Government pledge to make improvements to the health of young people. It's the first in what we hope will be a series of studies of young people across England. By spending just a short time answering questions about your life, you can make a difference to other young people.

What's it for? The *What About YOuth?* study asks you about important subjects including your health, what you eat, what you do in your free time, bullying and whether you smoke, take drugs or drink alcohol. More information will make it easier for doctors, nurses and local authorities to understand young people's health needs and understand which services need to be improved; however, this can only be done if we get as much accurate information as possible. **For this reason it's important that you answer the questions honestly and don't feel pressurised to change your answers in any way.**

Where did you get my contact details from? Your contact details were taken from the Department for Education's National Pupil Database (NPD) which contains details of every pupil in England. The NPD has been used as it is a reliable source of details such as name, address and date of birth.

We have received approval to use the contact details only for this study. We won't be using them for any other purposes, nor will we share them with anyone else. Information about the NPD can be found at www.gov.uk/national-pupil-database-apply-for-a-data-extract.

What will happen to my answers? When you put your questionnaire in the post, or complete the questions online, your answers will be received by Ipsos MORI, the company carrying out the study. Your answers will not have your name and address on, so no-one who sees them will know whose they are. The answers from your questionnaire will then be put together with the answers collected from thousands of other young people. Together they will be used to find out about young people of your age. Your answers will be completely confidential. So don't be afraid to answer the questions truthfully – you won't get into trouble!

What if I want to talk to someone about the things in the study? We hope you will enjoy taking part in the study. But if you are worried, upset or have any questions about anything in the study or anything else in your life, then we suggest the first person to talk to is your parent or carer. If you can't or don't want to speak to your parent or carer, then perhaps you can talk to an older brother or sister, teacher or any other adult you trust.

If you would like to request the questionnaire in large print call Freephone 0800 2600526 or email whataboutyouth@ipsos.com.



A.4 Copy of the questionnaire



WHAT ABOUT YOUTH



If you would like to complete this questionnaire online, please go to www.whataboutyouth.com and enter your online username found on the back of this questionnaire. You can also go directly to the questionnaire on a smart phone by scanning the QR code to the left.

Instructions

1. Most of the questions can be answered by putting a tick in the box next to the answer that you want to give. Please use black or blue pen and make sure that your tick is inside the box.
2. If you make a mistake, fill in the box that was wrong and tick the box for the right answer.
3. The box you tick may instruct you to miss out a few questions. If there is no instruction, please continue to the next question.
4. Note that you may be asked to tick more than one box (as many boxes as are needed). Some of the questions will ask you to tick one box only.

Examples

QA Have you ever been to a live sports event, such as a football or tennis match?

PLEASE TICK ONE BOX ONLY.

Yes GO TO QB

No GO TO QC

Sometimes you will be asked to write a number into boxes, like this.

QB How old were you when you first went to a live sports event?

PLEASE WRITE THE NUMBERS IN THE BOXES IN NUMBERS NOT WORDS.

PLEASE WRITE CLEARLY AND AVOID GOING OVER THE BORDERS. IF YOU WERE YOUNGER THAN 10, PLEASE PUT A ZERO IN THE FIRST BOX.

Age (in years) **0 9**

Some of the questions will ask you to tick one box for each statement, like this.

QC How much do you agree or disagree with the following statements?

PLEASE TICK ONE BOX ON EACH LINE.

	Strongly agree	Agree	Disagree	Strongly disagree
--	-------------------	-------	----------	----------------------

- | | | | | |
|--|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| I enjoy watching live sport events | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| I watch live sports events regularly | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| My family enjoy watching live
sports events | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please answer truthfully, and remember that anything you say will be completely confidential. You will not get into trouble, whatever answers you give to these questions. All answers will be mixed together and your name will not be included in the results. Where you are asked to write any comments, please only do so within the comment boxes provided. Any other comments that you write outside these boxes will not be seen.

What about you and what you eat?

Q1 How is your health in general? Would you say it was ...

PLEASE TICK ONE BOX ONLY.

- | | |
|-----------------|--------------------------|
| Excellent | <input type="checkbox"/> |
| Good | <input type="checkbox"/> |
| Fair | <input type="checkbox"/> |
| Poor | <input type="checkbox"/> |

Q2 Overall, in your opinion, would you say that what you usually eat at home, at school and out with friends is...

PLEASE TICK ONE BOX FOR HOME, ONE BOX FOR SCHOOL AND ONE BOX FOR WITH FRIENDS.

	At home	At school	Out with friends
Very healthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fairly healthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neither healthy nor unhealthy.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fairly unhealthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Very unhealthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It varies too much to say.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q3 Thinking just about YESTERDAY can you tell me how many portions of beans or pulses (baked beans, haricot beans, kidney beans, cannellini beans, butter beans, lentils or chickpeas) you ate?

NOTE: A PORTION IS 3 HEAPED TABLESPOONS AND CAN INCLUDE FRESH, FROZEN, TINNED OR DRIED BEANS OR PULSES.

PLEASE WRITE THE NUMBER IN THE BOXES, IN NUMBERS NOT WORDS.

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

Number of portions.....

Q4 Thinking just about YESTERDAY can you tell me how many portions of vegetables – including salad, fresh, frozen or tinned vegetables you ate?

NOTE: A PORTION IS 3 HEAPED TABLESPOONS OF VEGETABLES OR A HANDFUL OF CHERRY TOMATOES OR A SMALL BOWL OF SALAD. IT DOES NOT INCLUDE POTATOES.

PLEASE WRITE THE NUMBER IN THE BOXES, IN NUMBERS NOT WORDS.

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

Number of portions.....

Q5 Thinking just about YESTERDAY can you tell me how many portions of fruit juice (pure juice / 100% freshly squeezed / fruit smoothies / juice from concentrate BUT NOT juice based drinks such as squash) you had?

NOTE: A PORTION IS A MEDIUM SIZED GLASS.

PLEASE WRITE THE NUMBER IN THE BOXES, IN NUMBERS NOT WORDS.

--	--

Number of portions.....

Q6 Thinking just about YESTERDAY can you tell me how many portions of fruit - fresh, frozen, tinned or dried you ate?

NOTE: A PORTION IS A MEDIUM SIZED PIECE OF FRUIT SUCH AS AN APPLE OR A BANANA, OR TWO SMALL PIECES OF FRUIT SUCH AS SATSUMAS OR PLUMS, A HANDFUL OF GRAPES, 1 TABLESPOON OF DRIED FRUIT.

PLEASE WRITE THE NUMBER IN THE BOXES, IN NUMBERS NOT WORDS.

--	--

Number of portions.....

Q7 Over the past 7 days, how often did you eat take-away food, eat breakfast and sleep for 8 hours or more?

PLEASE TICK ONE BOX FOR EAT TAKE-AWAY FOOD, ONE BOX FOR EAT BREAKFAST AND ONE BOX FOR SLEEP FOR 8+ HOURS.

	Eat take-away food	Eat breakfast	Sleep for 8 hours or more a night
Everyday.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most days.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Some days.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not in the past 7 days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



What about free time?

Q8 About how many hours a day do you usually spend watching television programmes or films (including DVDs) in your free time? This includes time spent watching TV on a computer, laptop, iPad or smartphone as well as other electronic devices.

PLEASE TICK ONE BOX FOR WEEKDAYS AND ONE BOX FOR WEEKENDS.

Weekdays

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Weekend

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Q9 About how many hours a day do you usually play games on a computer or games console (PlayStation, Xbox, Nintendo Wii, etc.) in your free time? Please do not include time spent playing games on your phone.

PLEASE TICK ONE BOX FOR WEEKDAYS AND ONE BOX FOR WEEKENDS.

Weekdays

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Weekend

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Q10 **About how many hours a day do you usually use a computer for chatting on-line, internet, emailing, homework, etc. in your free time? Please do not include time spent on your phone.**

PLEASE TICK ONE BOX FOR WEEKDAYS AND ONE BOX FOR WEEKENDS.

Weekdays

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Weekend

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Q11 **About how many hours a day do you usually use a smartphone for messaging, chatting, social networking, internet, emailing and playing games, etc. in your free time?**

PLEASE TICK ONE BOX FOR WEEKDAYS AND ONE BOX FOR WEEKENDS.

Weekdays

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Weekend

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Q12 **About how many hours a day do you usually spend sitting down reading books, magazines or newspapers (including e-readers, online newspapers and magazines) and studying when you are not at school?**

PLEASE TICK ONE BOX FOR WEEKDAYS AND ONE BOX FOR WEEKENDS.

Weekdays

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

Weekend

- None at all
- About half an hour a day
- About 1 hour a day
- About 2 hours a day
- About 3 hours a day
- About 4 hours a day
- About 5 hours a day
- About 6 hours a day
- About 7 or more hours a day

What about physical activity?

Physical activity is any activity that increases your heart rate and makes you get out of breath some of the time.

Physical activity can be done in sports, school activities, playing with friends, or walking to school. Some examples of physical activity are running, brisk walking, rollerblading, biking, dancing, skateboarding, swimming, football, basketball & surfing.

For this next question, add up all the time you spent in physical activity each day.

Q13 **Over the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day?**

PLEASE TICK ONE BOX ONLY.

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7

Q14 **Outside school hours: How often do you usually exercise in your free time so much that you get out of breath or sweat?**

PLEASE TICK ONE BOX ONLY.

- Every day
- 4 to 6 times a week
- 2 to 3 times a week
- Once a week

- Once a month
- Less than once a month
- Never

Q15 **Outside school hours:** How many hours a week do you usually exercise in your free time so much that you get out of breath or sweat?

PLEASE TICK ONE BOX ONLY.

- None
- About half an hour
- About an hour
- About 2 to 3 hours
- About 4 to 6 hours
- About 7 hours or more

What about smoking?

Please answer truthfully, and remember that all your answers will be completely confidential.

Q16 **Do you smoke cigarettes at all?**

PLEASE TICK ONE BOX ONLY.

- Yes
- No

Q17 Now read the following statements carefully, and tick the box next to the one which best describes you.

PLEASE TICK ONE BOX ONLY.

- I have never smoked
- I have only ever tried smoking once
- I used to smoke sometimes but I never smoke cigarettes now
- I sometimes smoke cigarettes now but I don't smoke as many as one a week
- I usually smoke between one and six cigarettes a week
- I usually smoke more than six cigarettes a week

GO TO Q19

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER SMOKED

Q18 How old were you when you first tried smoking a cigarette, even if it was only a puff or two?

PLEASE WRITE YOUR AGE IN THE BOXES, IN NUMBERS NOT WORDS.

I was years old

EVERYONE SHOULD ANSWER THIS QUESTION

Q19 Have you ever used / tried electronic cigarettes (e-cigarettes)?

PLEASE TICK ONE BOX ONLY.

- I have never tried electronic cigarettes
- I have used electronic cigarettes only once or twice
- I used to use electronic cigarettes but I don't now
- I sometimes use electronic cigarettes, but don't use them every week
- I use electronic cigarettes regularly, once a week or more

Q20 Have you ever used / tried other tobacco products (i.e. shisha pipe, hookah, bubble-bubble, waterpipe, etc.)?

PLEASE TICK ONE BOX ONLY.

- I have never tried other tobacco products
- I have used other tobacco products only once or twice
- I used to use other tobacco products but I don't now
- I sometimes use other tobacco products, but don't use them every week
- I use other tobacco products regularly, once a week or more

Q21 Please read the following statements about smoking and say if you agree or disagree with each one.

PLEASE TICK ONE BOX ON EACH LINE.

	Agree	Disagree	Don't know
Smoking gives people confidence.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smoking makes people worse at sports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smokers stay slimmer than non-smokers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a woman smokes when she is pregnant, it can harm her unborn baby.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smoking helps people relax if they feel nervous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smoking can cause heart disease.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smoking is not really dangerous, it only harms people who smoke a lot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smokers get more coughs and colds than non-smokers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other people's smoking can harm the health of non-smokers.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smoking helps people cope better with life.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Agree Disagree Don't know

- Smoking makes your clothes smell
- Smokers are more fun than non-smokers
- Smoking can cause lung cancer

What about drinking?

Please answer truthfully, and remember that all your answers will be completely confidential.

Q22 Have you ever had an alcoholic drink – a whole drink, not just a sip?

PLEASE TICK ONE BOX ONLY.

- Yes **GO TO Q23**
- No **GO TO Q29**

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER HAD AN ALCOHOLIC DRINK

Q23 How old were you when you had your first alcoholic drink?

PLEASE WRITE YOUR AGE IN THE BOXES, IN NUMBERS NOT WORDS.

I was years old

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER HAD AN ALCOHOLIC DRINK

Q24 How often do you usually have an alcoholic drink?

PLEASE TICK ONE BOX ONLY.

- Every day, or almost every day
- About twice a week
- About once a week
- About once a fortnight
- About once a month
- Only a few times a year
- I never drink alcohol now

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER HAD AN ALCOHOLIC DRINK

Q25 Have you been drunk in the last 4 weeks?

PLEASE TICK ONE BOX ONLY.

- Yes **GO TO Q26**
- No **GO TO Q29**

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE BEEN DRUNK IN THE LAST 4 WEEKS

Q26 How many times have you been drunk in the last 4 weeks?

PLEASE WRITE THE NUMBER IN THE BOXES, IN NUMBERS NOT WORDS.

Number of times

--	--

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE BEEN DRUNK IN THE LAST 4 WEEKS

Q27 Have you deliberately tried to get drunk in the last 4 weeks?

PLEASE TICK ONE BOX ONLY.

Yes

--

No

--

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE BEEN DRUNK IN THE LAST 4 WEEKS

Q28 Did any of the following happen to you when you drank alcohol in the last 4 weeks?

PLEASE TICK AS MANY BOXES AS NEEDED.

- I got into an argument
- I got into a fight
- I felt ill or sick at the time I was drinking
- I felt ill or sick the next day
- I vomited at the time I was drinking
- I vomited the next day
- I had to go to hospital
- I lost some money or other items
- My clothes or other items got damaged
- I got into trouble with the police
- I stayed off school
- I was attacked / assaulted
- I did something I later regretted.
- I hurt myself
- None of these things happened to me

What about drugs?

Please answer truthfully, and remember all your answers will be completely confidential.

The next questions are about Cannabis, also called Marijuana, Hashish, Dope, Pot, Blow, Hash, Skunk, Puff, Grass, Draw, Ganja, Spliff, Smoke, Weed, Wacky Backy.

Q29 **Have you ever been offered Cannabis? Please include any times that someone has tried to sell you Cannabis and any times when someone has offered to share Cannabis with you.**

PLEASE TICK ONE BOX ONLY.

Yes

No

Q30 **Have you ever tried Cannabis (even if only once)?**

PLEASE TICK ONE BOX ONLY.

Yes **GO TO Q31**

No **GO TO Q34**

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER TRIED CANNABIS

Q31 **How old were you when you first tried Cannabis?**

PLEASE WRITE YOUR AGE IN THE BOXES, IN NUMBERS NOT WORDS.

I was years old

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER TRIED CANNABIS

Q32 **When did you last use or take Cannabis?**

PLEASE TICK ONE BOX ONLY.

In the last month

In the last year

More than a year ago

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER TRIED CANNABIS

Q33 On how many occasions have you used or taken Cannabis?

PLEASE TICK ONE BOX ONLY.

- Once.
- 2-5 occasions.
- 6-10 occasions.
- More than 10 occasions.

EVERYONE SHOULD ANSWER THIS QUESTION

The next questions are about other drugs, such as Cocaine, Ecstasy, Poppers, Magic Mushrooms, Ketamine, etc. Please think about all types of drugs when answering these questions including glue, gas, aerosols, steroids or solvents.

Q34 Have you ever been offered any drugs other than Cannabis? Please include any times that someone has tried to sell you drugs and any times when someone has offered to share drugs with you.

PLEASE TICK ONE BOX ONLY.

- Yes
- No

Q35 Have you ever tried any drugs other than Cannabis (even if only once)?

PLEASE TICK ONE BOX ONLY.

- Yes **GO TO Q36**
- No **GO TO Q39**

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER TRIED ANY DRUGS OTHER THAN CANNABIS

Q36 How old were you when you first tried any drugs other than Cannabis?

PLEASE WRITE YOUR AGE IN THE BOXES, IN NUMBERS NOT WORDS.

I was years old

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER TRIED ANY DRUGS
OTHER THAN CANNABIS

Q37 When did you last use or take any drugs other than Cannabis?

PLEASE TICK ONE BOX ONLY.

- In the last month
- In the last year
- More than a year ago

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE EVER TRIED ANY DRUGS
OTHER THAN CANNABIS

Q38 On how many occasions have you used or taken any drugs other than Cannabis?

PLEASE TICK ONE BOX ONLY.

- Once
- 2-5 occasions
- 6-10 occasions
- More than 10 occasions

EVERYONE SHOULD ANSWER THIS QUESTION

Q39 Please read the following statements about drugs and say if you agree or disagree.

PLEASE TICK ONE BOX ON EACH LINE.

	Agree	Disagree	Don't know
Taking drugs is exciting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People my age who take drugs need help and advice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who take drugs are stupid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All people who sell drugs should be punished	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What about how you feel?

Q40 Do you think your body is ...?

PLEASE TICK ONE BOX ONLY.

- Much too thin
- A bit too thin
- About the right size
- A bit too fat
- Much too fat

Q41 Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks.

PLEASE TICK ONE BOX ON EACH LINE.

	None of the time	Rarely	Some of the time	Often	All of the time
	1	2	3	4	5
I've been feeling optimistic about the future . . .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling useful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling relaxed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling interested in other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've had energy to spare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been dealing with problems well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been thinking clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling good about myself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling close to other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling confident	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been able to make up my own mind about things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling loved	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been interested in new things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I've been feeling cheerful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Warwick-Edinburgh Mental Well-Being Scale (WEMWBS)

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+

Here are four questions about your feelings on aspects of your life. There are no right or wrong answers. For each of these questions I'd like you to give an answer on a scale of 0 to 10, where 0 is 'not at all' and 10 is 'completely'.

Q42 Overall, how satisfied are you with your life nowadays, where 0 is 'not at all satisfied' and 10 is 'completely satisfied'?

PLEASE TICK ONE BOX ONLY.

Not at all Completely

0 1 2 3 4 5 6 7 8 9 10

[] [] [] [] [] [] [] [] [] [] []

Q43 Overall, to what extent do you feel that the things you do in your life are worthwhile, where 0 is 'not at all worthwhile' and 10 is 'completely worthwhile'?

PLEASE TICK ONE BOX ONLY

A horizontal scale with numerical labels from 0 to 10. The scale is divided into 10 equal segments. A yellow shaded area covers the first 6 segments (from 0 to 5.5), indicating a range of 0 to approximately 5.5. The label "Not at all" is positioned above the first segment (0), and the label "Completely" is positioned above the last segment (10).

Q44 Overall, how happy did you feel yesterday, where 0 is 'not at all happy' and 10 is 'completely happy'?

PLEASE TICK ONE BOX ONLY

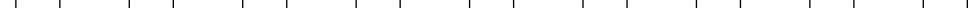
A horizontal scale with 10 numbered boxes from 0 to 10. The first box is labeled 'Not at all' and the last box is labeled 'Completely'. The scale is divided into five segments by diagonal lines.

Q45 On a scale where 0 is 'not at all anxious' and 10 is 'completely anxious', overall, how anxious did you feel yesterday?

PLEASE TICK ONE BOX ONLY

Not at all Completely

0 1 2 3 4 5 6 7 8 9 10



What about bullying?

Here are some questions about bullying. We say a person is being bullied when another person, or a group of people, say or do nasty and unpleasant things to him or her.

It is also bullying when a person is teased repeatedly in a way he or she does not like or when he or she is deliberately left out of things. Bullying may happen over the internet or by text or phone messages. It is not bullying when a person is teased in a friendly and playful way.

Q46 How often have you been bullied in the past couple of months in the ways listed below?

PLEASE TICK ONE BOX ON EACH LINE.

	I haven't been bullied in this way in the past couple of months	It has happened once or twice	2 or 3 times a month	2 or 3 times a week	Several times a week
I was called mean names, was made fun of, or teased in a hurtful way	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other people left me out of things on purpose, excluded me from their group of friends, or completely ignored me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was hit, kicked, pushed, shoved around, or locked indoors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other people told lies or spread false rumours about me and tried to make others dislike me.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other people made fun of me because of my body weight.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other people made sexual jokes, comments, or gestures to me.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Someone sent mean instant messages, wall postings, emails and text messages, or created a website that made fun of me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Someone took unflattering or inappropriate pictures of me without permission and posted them online.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q47 How often have you taken part in bullying another person (or other people) in the past couple of months?

PLEASE TICK ONE BOX ONLY.

- I have never bullied another person
- I have not bullied another person / other people in the past couple of months
- It has happened once or twice
- 2 or 3 times a month
- About once a week
- Several times a week

What about family?

Sometimes people live in two different homes; this may be because their parents live in different places, and they spend time in both homes. If this applies to you please answer for the home you live in most of the time.

Q48 Who lives in your home?

PLEASE TICK AS MANY BOXES AS NEEDED.

- Mother
- Father
- Father's partner
- Mother's partner
- Grandmother
- Grandfather
- Foster mother
- Foster father
- Brother(s) (include half / step / foster)
- Sister(s) (include half / step / foster)
- I live in a care home
- Someone or somewhere else, please tick box
and write in below

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**Q49 Please say how many brothers and sisters live here
(including half, step or foster brothers and sisters).**

USING THE BOXES PROVIDED, PLEASE WRITE IN THE NUMBER. IF THERE ARE NONE PLEASE WRITE 0.

--	--

Number of brothers

Number of sisters

--	--

What about how you live?

The next few questions are about your life and where you live. These questions will help us see how experiences vary between different groups of young people.

Sometimes people live in two different homes; this may be because their parents live in different places, and they spend time in both homes. If this applies to you please answer for the home you live in most of the time.

Q50 Does your family own a car, van or truck?

PLEASE TICK ONE BOX ONLY.

- Yes, one
- Yes, two or more
- No

Q51 Do you have your own bedroom for yourself?

PLEASE TICK ONE BOX ONLY.

- Yes
- No

Q52 How many computers (PC, laptop, MAC, iPad or tablet) does your family own?

PLEASE TICK ONE BOX ONLY.

- None
- One
- Two
- More than two

Q53 Do you have a computer (PC, laptop, MAC, iPad or tablet) that is only for your personal use (i.e. you don't have to share it with anyone else in your family)?

PLEASE TICK ONE BOX ONLY.

- Yes
- No

Q54 How many bathrooms (room with a bath / shower or both) are in your home?

PLEASE TICK ONE BOX ONLY.

- None
- One
- Two
- More than two

Q55 Does your family have a dishwasher at home?

PLEASE TICK ONE BOX ONLY.

Yes No **Q56 How many times did you and members of your family travel out of the UK for a holiday, vacation or to visit family last year?**

PLEASE TICK ONE BOX ONLY.

None One Twice More than twice **What about you?****Q57 Are you a boy or a girl?**

PLEASE TICK ONE BOX ONLY.

Boy Girl **Q58 What month were you born in?**

PLEASE TICK ONE BOX ONLY.

Jan

Feb

Mar

Apr

May

Jun

Jul

Aug

Sep

Oct

Nov

Dec

Q59 What year were you born in?

PLEASE TICK ONE BOX ONLY.

1998 1999 **Q60 Were you born in the UK?**

PLEASE TICK ONE BOX ONLY.

Yes No **Q61 Please can you confirm to us what your postcode is?**

PLEASE WRITE IN THE BOXES BELOW.

Q62**How would you describe your ethnic origin?**

OUR ETHNIC BACKGROUND DESCRIBES HOW WE THINK OF OURSELVES. THIS MAY BE BASED ON MANY THINGS, INCLUDING FOR EXAMPLE, OUR SKIN COLOUR, LANGUAGE, CULTURE, ANCESTRY OR FAMILY HISTORY. ETHNIC BACKGROUND IS NOT THE SAME AS NATIONALITY OR COUNTRY OF BIRTH.

CHOOSE ONE SECTION FROM A TO E, THEN TICK ONE BOX TO BEST DESCRIBE YOUR ETHNIC GROUP OR BACKGROUND.

A – White

English / Welsh / Scottish / Northern Irish / British.....

Irish.....

Traveller of Irish Heritage

Gypsy / Roma

Any other White background, please tick box and write in below.....

B - Mixed / multiple ethnic groups

White and Black Caribbean.....

White and Black African.....

White and Asian

Any other Mixed / multiple ethnic background, please tick box and write in below

C - Asian / Asian British

Indian

Pakistani.....

Bangladeshi.....

Chinese

Any other Asian background, please tick box and write in below.....

D - Black / African / Caribbean / Black British

African

Caribbean

Any other Black / African / Caribbean background, please tick box and write in below

E - Other ethnic group

Arab

Any other ethnic group, please tick box and write in below

Q63 Which of the following options best describes how you think of yourself?

PLEASE TICK ONE BOX ONLY.

- Heterosexual or Straight
- Gay or Lesbian
- Bisexual
- Other
- Prefer not to say

Q64 What is your religion?

PLEASE TICK ONE BOX ONLY.

- No religion
- Christian (including Church of England, Catholic, Protestant and all other Christian denominations)
- Buddhist
- Hindu
- Jewish
- Muslim
- Sikh
- Any other religion, please tick box and write in below.
-

Q65 Do you have a learning disability?

A LEARNING DISABILITY (OR IMPAIRMENT) AFFECTS THE WAY A PERSON LEARNS NEW THINGS IN ANY AREA OF LIFE, NOT JUST AT SCHOOL. IT MEANS THEY COULD HAVE DIFFICULTY UNDERSTANDING NEW OR COMPLEX INFORMATION, LEARNING NEW SKILLS OR COPING INDEPENDENTLY.

PLEASE TICK ONE BOX ONLY.

- Yes
- No
- Don't know

Q66 Do you have a long-term illness, disability or medical condition (like diabetes, arthritis, allergy or cerebral palsy) that has been diagnosed by a doctor?

PLEASE TICK ONE BOX ONLY.

- Yes **GO TO Q67**
- No **GO TO Q70**

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE A LONG-TERM ILLNESS, DISABILITY OR MEDICAL CONDITION

Q67 Do any of these conditions or illnesses affect you in any of the following areas?

PLEASE TICK AS MANY BOXES AS NEEDED.

- Vision (for example blindness or partial sight).
This does not include having to wear glasses
- Hearing (for example, deafness or partial hearing)
- Mobility (for example, walking short distances or climbing stairs)
- Dexterity (for example, lifting and carrying objects, using a keyboard)
- Learning or understanding or concentrating
- Memory
- Mental health
- Stamina or breathing or fatigue
- Socially or behaviourally (for example associated with autism, attention deficit disorder or Asperger's syndrome)
- None of the above
- Prefer not to say
- Other, please tick box and write in below

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE A LONG-TERM ILLNESS, DISABILITY OR MEDICAL CONDITION

Q68 Do you take medicine for your long term illness, disability or medical condition?

PLEASE TICK ONE BOX ONLY.

- Yes
- No

YOU ONLY NEED TO ANSWER THIS QUESTION IF YOU HAVE A LONG-TERM ILLNESS, DISABILITY OR MEDICAL CONDITION

Q69 Does your long-term illness, disability or medical condition affect your attendance and participation at school?

PLEASE TICK ONE BOX ONLY.

- Yes
- No

Q70 Now thinking about health services, what would you say needs improvement in your local area?

PLEASE WRITE CLEARLY IN THE BOX BELOW.

Q71 Did you have help from any of the following people when completing this questionnaire?

PLEASE TICK AS MANY BOXES AS NEEDED.

- Parent or guardian
- Brother or sister (including half, step or foster brothers and sisters) ..
- Another member of my family
- Teacher or another member of staff at school ..
- Friend ..
- I had no help completing this questionnaire ..
- Other, please tick box and write in below ..

Q72 The Health and Social Care Information Centre may want to carry out some further research over the next 12 months with people who have taken part in this study. Would you be happy to be contacted again as part of this research?

PLEASE TICK ONE BOX ONLY.

- Yes ..
- No ..

What do I do now?

Now that you have completed the questionnaire, please send it back in the freepost envelope provided. If you have misplaced the envelope, please send the questionnaire back to **Freepost RTEY-ASHA-CRAA, What About Youth?, TNT, 120 Fifty Pitches Road, Glasgow, G51 4EB**. Remember, you don't need a stamp.

If you have any other questions about the survey, you can get in touch with the Ipsos MORI team using the details below:

Email: whataboutyouth@ipsos.com

Telephone: 0800 2600526

Study website: www.whataboutyouth.com

Thank you for taking part in the study

Ref:

Online username:

We hope you enjoyed taking part in the study. But if you are worried, upset or have any questions about anything in the study or anything else in your life, then we suggest the first person to talk to is your parent or carer. If you can't or don't want to speak to your parent or carer, then perhaps you can talk to an older brother or sister, teacher or any other adult you trust.

If you want to find out more about the effects of smoking, alcohol, drugs, diet and exercise or bullying please take a look at the *What About YOuth?* website www.whataboutyouth.com where we provide contact details for a number of organisations that can tell you more.

You can also contact **ChildLine** about anything. No problem is too big or too small. This is a special helpline for children and young people to ring if they want to talk about something or need help. You can phone them on **0800 1111**.

WHAT ABOUT YOUTH



Health & Social Care
Information Centre

Ipsos MORI



NHS

A.5 Variables specification

Key Variables Specification for variables included in report tables

The purpose of this document is to show how the analysis categories used in the report tables were derived from the questionnaire response categories.

* = not derived (i.e. is just the question as it is with no recoding).

	Topic	Indicator	Base	Definition
1.*	General Health (Q1)	% with excellent/good/fair/poor health (self-reported)	All	Excellent health (code 1) Good health (code 2) Fair health (code 3) Poor health (code 4)
2.	Diet (Q3-6 combined)	Daily fruit and vegetable consumption	All	Calculate total ¹ : Q3= 1 or more = 1 maximum. Q4= as stated. Q5= 1 or more = 1 maximum. Q6= as stated. Q3-6 categories: None 1 portion 2 portions

¹ <http://www.nhs.uk/Livewell/5ADAY/Pages/Whatcounts.aspx>

				<p>3 portions 4 portions 5 or more portions Less than 5 a day Mean Median (Table 5.1 only)</p> <p>7 or more portions Less than 7 a day</p>
3.	Free time (Q8-12 combined)	Average sedentary behaviour (hours) per day in last week (weekdays/ weekend days)	All	<p>Add up total for weekdays and weekends separately across Q8,9,10,11,12 using the following coding.</p> <p>Code 1=0 Code 2=0.5 Code 3=1 Code 4=2 Code 5=3 Code 6=4 Code 7=5 Code 8=6</p>

				<p>Code 9=7</p> <p>Categories to be presented:</p> <p>Weekdays:</p> <p>Sedentary for up to 1 hour a day</p> <p>Sedentary for 2-3 hours a day</p> <p>Sedentary for 4-6 hours a day</p> <p>Sedentary for 7-9 hours a day</p> <p>Sedentary for 10 or more hours a day</p> <p>Weekends:</p> <p>Sedentary for up to 1 hour a day</p> <p>Sedentary for 2-3 hours a day</p> <p>Sedentary for 4-6- hours a day</p> <p>Sedentary for 7-9 hours a day</p> <p>Sedentary for 10 or more hours a day</p>	
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4.*	Physical activity (Q13)	Number of days met MVPA guidelines in last week (moderate or vigorous physical activity for 60 minutes)	All	Active for 60+ mins on 0 days (code 1) Active for 60+ mins on 1 day (code 2) Active for 60+ mins on 2 days (code 3) Active for 60+ mins on 3 days (code 4) Active for 60+ mins on 4 days (code 5) Active for 60+ mins on 5 days (code 6) Active for 60+ mins on 6 days (code 7) Active for 60+ mins on 7 days (code 8) Mean number of days	
5.	Smoking (Q17)	Smoking prevalence	All those not observed ²	Regular smoker (1-6 a week or more than 6 a week) (code 5-6) Occasional smoker (less than 1 a week) (code 4) Current smoker (code 4-6) Used to smoke (code 3) Tried smoking (code 2) Ever smoked (codes 2-6) Never smoked (code 1)	
6.	Smoking (Q18)	Age first tried smoking	All those	Age groups as follows:	

² All those not observed are those who completed a paper questionnaire (under any conditions) or who completed an online questionnaire and reported that they were completing it alone).

			who have ever smoked (Q17=2 to 6)	6 or less Individual age categories from 7 to 15 16 year category is only relevant for a very small number of young people who had reached age 16 by the survey. Most participants were aged 15 when they completed the survey so this category was not relevant to them. Under the age of 10 Under the age of 12	
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7.	Smoking (Q19)	Use of e-cigarettes	All those not observed	Regularly use e-cigs (once a week or more) (code 5) Occasionally use e-cigs (don't use them every week) (code 4) Currently use e-cigs (codes 4-5) Used to use e-cigs (code 3) Tried using e-cigs (code 2) Ever used e-cigs (codes 2-5) Never tried e-cigs (codes 1)	
8.	Smoking (Q20)	Use of other tobacco products e.g. shisha	All those not observed	Regularly use other tobacco products (once a week or more) (codes 5) Occasionally use other tobacco products (don't use them every week) (code 4) Currently use other tobacco products (codes 4-5) Used to use other tobacco products (code 3) Tried other tobacco products (code 2) Ever used other tobacco products (codes 2-5) Never tried other tobacco products (codes 1)	

9.*	Smoking (Q21a to m)	Attitudes to smoking (proportion agreeing/disagreeing with statements about smoking)	All those not observed	For each of the ten statements: Agree Disagree Don't know	
10.*	Drinking (Q22)	% ever had an alcoholic drink	All those not observed	Ever had an alcoholic drink (code 1) Never had an alcoholic drink (code 2)	

11.	Drinking (Q23)	Age first tried an alcoholic drink	All those who have had an alcoholic drink (Q22=1)	Age groups as follows: 6 or less Individual age categories from 7 to 15 16 year category is only relevant for a very small number of young people who had reached age 16 by the survey. Most participants were aged 15 when they completed the survey so this category was not relevant to them. Under the age of 10 Under the age of 12	
12.	Drinking (Q24)	Frequency of drinking alcohol	All those not observed (including those who have never had a drink)	At least once a week (codes 1- 3) About once a fortnight (code 4) About once a month (code 5) A few times a year (code 6) Doesn't drink alcohol now (code 7) Currently drinks alcohol (codes 1-6) Non-drinker (code 7 at q24 and code 2 at Q22)	
13.*	Drinking (Q25)	% been drunk in last four weeks	All who have ever had an alcoholic	Not been drunk in last four weeks (code 2) Been drunk in last 4 weeks (code 1)	

			drink (Q22=1)	
14.	Drinking (Q25 and Q26)	Frequency of drunkenness in the last 4 weeks	All who have ever had an alcoholic drink (Q22=1)	None (Q25=2) Once (Q26) 2-3 times (Q26) 4-10 times (Q26) More than 10 times (Q26)

15.*	Drugs (Q29)	% ever been offered cannabis	All those not observed	Yes (code 1) No (code 2)	
16.*	Drugs (Q30)	% ever tried Cannabis	All those not observed	Ever tried Cannabis (code 1) Never tried Cannabis (code 2)	
17.	Drugs (Q31)	Age first tried cannabis	All those who have ever tried cannabis (Q30=1)	6 or less Individual age categories from 7 to 15 16 year category is only relevant for a very small number of young people who had reached age 16 by the survey. Most participants were aged 15 when they completed the survey so this category was not relevant to them. Under the age of 10 Under the age of 12	
18.	Drugs (Q32)	Frequency of cannabis use	All those who have ever taken cannabis (Q30=1) and All those not observed	Used in the last month (code 1) Used in the last year (code 2 or code 1) Used more than a year ago (code 3) Not used at all (Q30 =2)	
19.*	Drugs (Q33)	Number of occasions of cannabis use	All those who have ever taken cannabis (Q30=1) and	Once (code 1) 2-5 occasions (code 2) 6-10 occasions (code3) More than 10 occasions (code 4)	

			All those not observed	Not used at all (Q30 =2)	
20.	Drugs (Q34)	% ever been offered any other drugs	All those not observed	Yes (code 1) No (code 2)	
21.	Drugs (Q35)	% ever tried other drugs (excluding cannabis)	All those not observed	Ever tried other drugs(code 1) Never tried other drugs(code 2)	

22.*	Drugs (Q37)	Frequency of other drug usage (excluding cannabis)	All those who have ever taken other drugs (Q35=1) and All those not observed	Used in the last month (code 1) Used in the last year (code 2 or code 1) Used more than a year ago (code 3) Not used at all (Q35=2)	
23.*	Drugs (Q39a to d)	Attitudes towards drugs	All those not observed	For each of the four statements: Agree Disagree Don't know	
24.*	Well-being (Q40)	Perception of own body weight	All those not observed	Five categories*: Much too thin (code 1) A bit too thin (code 2) About the right size (code 3) A bit too fat (code 4) Much too fat (code 5) Three categories: Too thin (codes 1-2) About right (code 3) Too fat (codes 4-5)	

25.	Well-being (Q41)	WEMWBS mean score	All	<p>Definition:</p> <p>1=none of the time 2=rarely 3=some 4=often 5=all of the time</p> <p>Sum the total of all 14 statements. Calculate the mean score.</p> <p>For those who left 1-3 of the statements blank, impute missing responses using the mean score from all of the statements that that individual participant has provided answers for.</p> <p>For those with 4 or more statements blank, do not calculate a WEMWBS mean score.</p>	
26.	Well-being (Q42)	Life satisfaction score	All	<p>Definition of scores:</p> <p>0-4 = low 5-6 = medium 7-8 = high 9-10 = very high</p>	

27.*	Bullying (Q46)	Experience of being bullied in the last couple of months	All	<p>Q46 (a-h individually)*:</p> <p>Not been bullied this way (code 1)</p> <p>Bullied once or twice (code 2)</p> <p>Bullied 2 or 3 times a month (code 3)</p> <p>Bullied 2 or 3 times a week (code 4)</p> <p>Bullied several times a week (code 5)</p> <p>Q46a-h combined all types</p> <p>Not been bullied (All Q46a-h=1)</p> <p>Has been bullied (Any Q46a-h=2,3,4,5)</p>	
28.	Cyber -bullying (Q46)	% cyber bullied in the last couple of months for each type of bullying	All	<p>Q46 (g-h individually):</p> <p>Bullied in last 2 months (codes 2-5)</p> <p>Not bullied in last 2 months (code 1)</p> <p>Bullied at least 2 or 3 times a month (codes 3–5)³</p> <p>Q46g-h combined cyber bullying</p> <p>Not been cyber-bullied (All Q46g-h=1)</p> <p>Has been cyber-bullied (Any Q46g-h=2,3,4,5)</p>	

³ The HBSC report looks at data using this group.

29.	Bullying (Q47)	Taken part in bullying (%)	All	Never bullied (code 1) Not bullied in the past couple of months (code 2) Have bullied once or twice in past couple of months (code 3) Have bullied 2 or 3 times a month (code 4) Have bullied once a week or more (codes 5 and 6) Has not bullied another person/people (never or not in the past couple of months) (code 1 and 2) Has bullied another person/people in the past couple of months (codes 3-6)	
30.*	Long term disability (Q66)	% with long-term illness, disability or medical condition	All	Long-term illness, disability or medical condition (code 1) No long-term illness, disability or medical condition (code 2)	

31.	Dichotomous risk behaviour variables	<p>% with each risk behaviour (in last month or currently)</p> <p>Smoking risk (at risk if says smokes cigarettes now)</p> <p>Drinking risk (at risk if drinks at all now)</p> <p>Cannabis risk (at risk if taken cannabis in last month)</p> <p>Drug risk (at risk if taken other drugs in last month)</p> <p>Diet risk (at risk if eat fewer than 5 portions a day)</p> <p>Activity risk (at risk if take less than 60 mins exercise 7 days a week)</p>	All those not observed	<p><i>Smoking risk</i> – If Q17= codes 4-6 then=1 If Q17= codes 1-3 then= 0</p> <p><i>Drinking risk</i> –If Q24 code 1-5 (drink once a month or more) then =1 If Q24 code 6 or 7 or Q22 code 2 then = 0</p> <p><i>Cannabis risk</i> – If Q32 = 1 (taken in last month) then = 1 If Q32 = code 2 or 3 or Q30 code 2 then = 0</p> <p><i>Drug risk</i> – If Q37 = code 1 (taken in last month then = 1 If Q37 = code 2 or 3 or Q35 code 2 then = 0</p> <p><i>Diet risk</i>- If combined Q3-8 <5 portions then = 1 If combined Q3-8>=5 then = 0</p> <p><i>Physical activity risk</i> If Q13 = code 0-6 then = 1 If Q13 = code 7 then = 0</p>	
32.	Combined risky behaviour all	% With each number of risky behaviours	All those not observed	<p>Sum 6 variables above. Max = 6 Set as missing if any of risk variables are missing</p>	

				0	
				1	
				2	
				3	
				4	
				5	
				6	
				3 or more risky behaviours	

33.	Patterns of unhealthy and illegal risky behaviours	% engaging in different types of risky behaviour	All those not observed	<p>Engages in illegal and health related risky behaviour (code 1 on drugs or cannabis or smoking or drinking and code 1 on diet or activity)</p> <p>Engages in illegal risky behaviour but no health related risky behaviour (code 1 on drugs or cannabis or smoking or drinking and code 0 on diet and activity)</p> <p>No illegal risky behaviour but has health related risky behaviour (code 0 on drugs and cannabis and smoking and drinking and code 1 on diet or activity)</p> <p>No risky behaviours (code 0 on drugs and cannabis and smoking and drinking and code 0 on diet and activity)</p> <p>Set as missing if any of risk variables are missing</p>	
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A.6 Edit specification

The purpose of this document is to provide rules used for editing the data in situations where no answer was given or where the format or nature of response was inconsistent with other variables or the expected response patterns.

Below is the key to the edit specification

Code	Description
-99	missing (left blank)
-98	missing (not answered question due to routing)
-97	incorrectly multicoded
-96	impossible age recorded
-95	multi-coded but have tried smoking
-94	multi-coded but have tried e-cigarettes
-93	multi-coded but have tried other tobacco products
-92	missing (answer less than minimum age (four))
-91	Impossible value recorded
-90	Inconsistent (has sibling but recorded 0 as number)

WAY Qu No.	Question text	Base	Final edit rules
Q1	How is your health in general? Would you say it was ...	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q2a	Overall, in your opinion, would you say that what you usually eat at home is...	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q2b	Overall, in your opinion, would you say that what you usually eat at school is...	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q2c	Overall, in your opinion, would you say that what you usually eat out with friends is...	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q3	Thinking just about YESTERDAY can you tell me how many portions of beans or pulses (baked beans, haricot beans, kidney beans, cannellini beans, butter beans, lentils or chickpeas) you ate?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); INTRODUCE CAP AT 20 PORTIONS (i.e. those coding 21+ will be converted to 20). See section A5 for details of how total consumption of fruit and vegetables is calculated.
Q4	Thinking just about YESTERDAY can you tell me how many portions of vegetables – including salad, fresh, frozen or tinned vegetables you ate?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); INTRODUCE CAP AT 20 PORTIONS (i.e. those coding 21+ will be converted to 20). See section A5 for details of how total consumption of fruit and vegetables is calculated.
Q5	Thinking just about YESTERDAY can you tell me how many portions of fruit juice (pure juice / 100% freshly squeezed / fruit smoothies / juice from concentrate BUT NOT juice based drinks such as squash) you had?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); INTRODUCE CAP AT 20 PORTIONS (i.e. those coding 21+ will be converted to 20). See section A5 for details of how total consumption of fruit and vegetables is calculated.
Q6	Thinking just about YESTERDAY can you tell me how many portions of fruit - fresh, frozen, tinned or dried you ate?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); INTRODUCE CAP AT 20 PORTIONS (i.e. those coding 21+ will be converted to 20). See section A5 for details of how total consumption of fruit and vegetables is calculated.
Q7a	Over the past 7 days, how often did you eat take-away food?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q7b	Over the past 7 days, how often did you eat breakfast?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q7c	Over the past 7 days, how often did you sleep for 8 hours or more?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q8a	About how many hours a day do you usually spend watching television programmes or films (including DVDs) in your free time? This includes time spent watching TV on a computer, laptop, iPad or smartphone as well as other electronic devices - weekdays	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q8b	About how many hours a day do you usually spend watching television programmes or films (including DVDs) in your free time? This includes time spent watching TV on a computer, laptop, iPad or smartphone as well as other electronic devices - weekends	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q9a	About how many hours a day do you usually play games on a computer or games console (PlayStation, Xbox, Nintendo Wii, etc.) in your free time? Please do not include time spent playing games on your phone - weekdays	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q9b	About how many hours a day do you usually play games on a computer or games console (PlayStation, Xbox, Nintendo Wii, etc.) in your free time? Please do not include time spent playing games on your phone - weekends	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q10a	About how many hours a day do you usually use a computer for chatting on-line, internet, emailing, homework, etc. in your free time? Please do not include time spent on your phone - weekdays	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q10b	About how many hours a day do you usually use a computer for chatting on-line, internet, emailing, homework, etc. in your free time? Please do not include time spent on your phone - weekends	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q11a	About how many hours a day do you usually use a smartphone for messaging, chatting, social networking, internet, emailing and playing games, etc. in your free time? - weekdays	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q11b	About how many hours a day do you usually use a smartphone for messaging, chatting, social networking, internet, emailing and playing games, etc. in your free time? - weekends	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q12a	About how many hours a day do you usually spend sitting down reading books, magazines or newspapers (including e-readers, online newspapers and magazines) and studying when you are not at school? - weekdays	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q12b	About how many hours a day do you usually spend sitting down reading books, magazines or newspapers (including e-readers, online newspapers and magazines) and studying when you are not at school? - weekends	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.

Q13	Over the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q14	Outside school hours: How often do you usually exercise in your free time so much that you get out of breath or sweat?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q15	Outside school hours: How many hours a week do you usually exercise in your free time so much that you get out of breath or sweat?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q16	Do you smoke cigarettes at all?	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.
Q17	Now read the following statements carefully, and tick the box next to the one which best describes you.	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded only code 2 and code 3, then code 3; If multi-coded only code 3 and code 4, then code 4; If multi-coded only code 5 and code 6, then code 6; If multi-coded code 2 and either code 4, or code 5 or code 6 OR if multi-coded code 3 and either code 5 or code 6 OR if multi-coded code 4 and code 6 then code as -95 (i.e. multi-coded but have tried smoking); If multi-coded any other combinations aside from these, then code as -97 Responses to Q17 will override any inconsistent responses to Q16 for the indicators on smoking prevalence, but no edits have been made to the data where inconsistent between Q16 and Q17 (e.g. Q16 = code 1 AND Q17 = code 1)
Q18	How old were you when you first tried smoking a cigarette, even if it was only a puff or two?	Q17=2-6	IF NOT ANSWERED (or answered 00), code as -99 OR -98 (if did not answer and should not have answered due to routing). Range = min 4 to max age of respondent at time of completing survey. If answer is < 4 then code as -92; if answer is > respondent's age when completing the survey then code as -96.
Q19	Have you ever used / tried electronic cigarettes (e-cigarettes)?	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded only code 2 and code 3, then code 3; If multi-coded only code 3 and code 4, then code 4; If multi-coded code 2 and either code 4, or code 5 OR if multi-coded code 3 and code 5 then code as -94 (multi-coded but have tried e-cigarettes); If multi-coded any other combinations aside from these, then code as -97
Q20	Have you ever used / tried other tobacco products (i.e. shisha pipe, hookah, hubble-bubble, waterpipe, etc.)?	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded only code 2 and code 3, then code 3; If multi-coded only code 3 and code 4, then code 4; If multi-coded code 2 and either code 4, or code 5 OR if multi-coded code 3 and code 5 then code as -94 (multi-coded but have tried e-cigarettes); If multi-coded any other combinations aside from these, then code as -97
Q21a	Please read the following statements about smoking and say if you agree or disagree with each one: Smoking gives people confidence	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21b	Please read the following statements about smoking and say if you agree or disagree with each one: Smoking makes people worse at sports	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21c	Please read the following statements about smoking and say if you agree or disagree with each one: Smokers stay slimmer than non-smokers	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21d	Please read the following statements about smoking and say if you agree or disagree with each one: If a woman smokes when she is pregnant, it can harm her unborn baby	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21e	Please read the following statements about smoking and say if you agree or disagree with each one: Smoking helps people relax if they feel nervous	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21f	Please read the following statements about smoking and say if you agree or disagree with each one: Smoking can cause heart disease	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21g	Please read the following statements about smoking and say if you agree or disagree with each one: Smoking is not really dangerous, it only harms people who smoke a lot	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21h	Please read the following statements about smoking and say if you agree or disagree with each one: Smokers get more coughs and colds than non-smokers	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21i	Please read the following statements about smoking and say if you agree or disagree with each one: Other people's smoking can harm the health of non-smokers	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21j	Please read the following statements about smoking and say if you agree or disagree with each one: Smoking helps people cope better with life	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21k	Please read the following statements about smoking and say if you agree or disagree with each one: Smoking makes your clothes smell	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21l	Please read the following statements about smoking and say if you agree or disagree with each one: Smokers are more fun than non-smokers	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q21m	Please read the following statements about smoking and say if you agree or disagree with each one: Smoking can cause lung cancer	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q22	Have you ever had an alcoholic drink – a whole drink, not just a sip?	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded then code as -97.

Q23	How old were you when you had your first alcoholic drink?	Q22=1	IF NOT ANSWERED (or answered 00), code as -99 OR -98 (if did not answer and should not have answered due to routing). Range = min 4 to max age of respondent at time of completing survey. If answer is < 4 then code as -92; if answer is > respondent's age when completing the survey then code as -96.
Q24	How often do you usually have an alcoholic drink?	Q22=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.
Q25	Have you been drunk in the last 4 weeks?	Q22=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.
Q26	How many times have you been drunk in the last 4 weeks?	Q25=1	IF NOT ANSWERED (or answered 00), code as -99 OR -98 (if did not answer and should not have answered due to routing). Range = 28 max. If answer is >28 then code as -91.
Q27	Have you deliberately tried to get drunk in the last 4 weeks?	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded then code as -97.
Q28a	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I got into an argument	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28b	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I got into a fight	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28c	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I felt ill or sick at the time I was drinking	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28d	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I felt ill or sick the next day	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28e	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I vomited at the time I was drinking	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28f	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I vomited the next day	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28g	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I had to go to hospital	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28h	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I lost some money or other items	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28i	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: My clothes or other items got damaged	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28j	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I got into trouble with the police	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28k	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I stayed off school	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28l	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I was attacked / assaulted	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28m	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I did something I later regretted	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28n	Did any of the following happen to you when you drank alcohol in the last 4 weeks?: I hurt myself	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q28o	Did any of the following happen to you when you drank alcohol in the last 4 weeks? None of these things happened to me	Q25=1	IF NOT ANSWERED, code as -99 (should have answered but did not tick any box) OR -98 (if did not tick any box and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q29	Have you ever been offered Cannabis? Please include any times that someone has tried to sell you Cannabis and any times when someone has offered to share Cannabis with you.	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.
Q30	Have you ever tried Cannabis (even if only once)?	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.
Q31	How old were you when you first tried Cannabis?	Q30=1	IF NOT ANSWERED (or answered 00), code as -99 OR -98 (if did not answer and should not have answered due to routing). Range = min 4 to max age of respondent at time of completing survey. If answer is < 4 then code as -92; if answer is > respondent's age when completing the survey then code as -96.
Q32	When did you last use or take Cannabis?	Q30=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, then select and keep one response using the priority order: code 1,2,3.
Q33	On how many occasions have you used or taken Cannabis?	Q30=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, then select and keep one response using the priority order code: 4,3,2,1.
Q34	Have you ever been offered any drugs other than Cannabis? Please include any times that someone has tried to sell you drugs and any times when someone has offered to share drugs with you.	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.

Q35	Have you ever tried any drugs other than Cannabis (even if only once)?	Ask all those not observed online and all postal (including observed)	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.
Q36	How old were you when you first tried any drugs other than Cannabis?	Q35=1	IF NOT ANSWERED (or answered 00), code as -99 OR -98 (if did not answer and should not have answered due to routing). Range = min 4 to max age of respondent at time of completing survey. If answer is < 4 then code as -92; if answer is > respondents age when completing the survey then code as -96.
Q37	When did you last use or take any drugs other than Cannabis?	Q35=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, then select and keep one response using the priority order: code 1,2,3.
Q38	On how many occasions have you used or taken any drugs other than Cannabis?	Q35=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, then select and keep one response using the priority order: code 4,3,2,1.
Q39a	Please read the following statements about drugs and say if you agree or disagree: Taking drugs is exciting	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q39b	Please read the following statements about drugs and say if you agree or disagree: People my age who take drugs need help and advice	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q39c	Please read the following statements about drugs and say if you agree or disagree: People who take drugs are stupid	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q39d	Please read the following statements about drugs and say if you agree or disagree: All people who sell drugs should be punished	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q40	Do you think your body is ...much too thin, a bit too thin, about right, a bit too fat, much too fat?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q41a	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling optimistic about the future	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41b	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling useful	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41c	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling relaxed	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41d	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling interested in other people	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41e	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've had energy to spare	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41f	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been dealing with problems well	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41g	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been thinking clearly	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41h	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling good about myself	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.

Q41i	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling close to other people	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41j	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling confident	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41k	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been able to make up my own mind about things	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41l	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling loved	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41m	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been interested in new things	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q41n	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks: I've been feeling cheerful	Ask All	If multi-coded, code as -97. If not answered 4 or more of the statements then code as -99. For those who have not answered 1 to 3 of the statements, answers for these statements have been imputed for the missing cases. In each case imputation is based on the mean for the respondent from all the statements that they themselves have provided answers for.
Q42	Overall, how satisfied are you with your life nowadays, where 0 is 'not at all satisfied' and 10 is 'completely satisfied'?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q43	Overall, to what extent do you feel that the things you do in your life are worthwhile, where 0 is 'not at all worthwhile' and 10 is 'completely worthwhile'?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q44	Overall, how happy did you feel yesterday, where 0 is 'not at all happy' and 10 is 'completely happy'?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q45	On a scale where 0 is 'not at all anxious' and 10 is 'completely anxious', overall, how anxious did you feel yesterday?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q46a	How often have you been bullied in the past couple of months in the ways listed below?: I was called mean names, was made fun of, or teased in a hurtful way	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q46b	How often have you been bullied in the past couple of months in the ways listed below?: Other people left me out of things on purpose, excluded me from their group of friends, or completely ignored me	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q46c	How often have you been bullied in the past couple of months in the ways listed below?: I was hit, kicked, pushed, shoved around, or locked indoors	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q46d	How often have you been bullied in the past couple of months in the ways listed below? : Other people told lies or spread false rumours about me and tried to make others dislike me	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q46e	How often have you been bullied in the past couple of months in the ways listed below?: Other people made fun of me because of my body weight	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.

Q46f	How often have you been bullied in the past couple of months in the ways listed below?: Other people made sexual jokes, comments, or gestures to me	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q46g	How often have you been bullied in the past couple of months in the ways listed below?: Someone sent mean instant messages, wall postings, emails and text messages, or created a website that made fun of me	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q46h	How often have you been bullied in the past couple of months in the ways listed below?: Someone took unflattering or inappropriate pictures of me without permission and posted them online	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q47	How often have you taken part in bullying another person (or other people) in the past couple of months?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q48a	Who lives in your home?: Mother	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48b	Who lives in your home?: Father	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48c	Who lives in your home?: Father's partner	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48d	Who lives in your home?: Mother's partner	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48e	Who lives in your home?: Grandmother	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48f	Who lives in your home?: Grandfather	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48g	Who lives in your home?: Foster mother	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48h	Who lives in your home?: Foster father	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48i	Who lives in your home?: Brother(s) (include half / step / foster)	Ask All	IF NOT ANSWERED (not ticked any items in the list) and Q49a is missing or 0, code Q48i as -99 (should have answered but did not). If not ticked this item but has ticked other items in list and Q49a is missing or 0, code Q48i as 0 (no). IF NOT ANSWERED/NO TICK but if a positive value is entered at Q49a then impute answer for Q48i with code = 1 (A TICK).
Q48j	Who lives in your home?: Sister(s) (include half / step / foster)	Ask All	IF NOT ANSWERED (not ticked any items in the list) and Q49b is missing or 0, code Q48j as -99 (should have answered but did not). If not ticked this item but has ticked other items in list and Q49b is missing or 0, code Q48j as 0 (no). IF NOT ANSWERED/NO TICK but if a positive value is entered at Q49b then impute answer for Q48j with code = 1 (A TICK).
Q48k	Who lives in your home?: I live in a care home	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q48l	Who lives in your home?: Someone or somewhere else, please tick box and write in below	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q49a	Please say how many brothers live here (including half, step or foster brothers and sisters).	Ask All	IF NOT ANSWERED and Q48i=0 (NO TICK), code Q49a as 0. IF Q49a=0 and Q48i=1 (A TICK) code Q49a as -90 (inconsistent - has sibling but recorded 0 as number) IF NOT ANSWERED and Q48i=1 (A TICK) code Q49a as -99 (should have answered but did not) Range = 20 max (i.e. those coding 21+ will be converted to 20)
Q49b	Please say how many sisters live here (including half, step or foster brothers and sisters).	Ask All	IF NOT ANSWERED and Q48j=0 (NO TICK), code Q49b as 0. IF Q49b=0 and Q48j=1 (A TICK) code Q49b as -90 (inconsistent - has sibling but recorded 0 as number) IF NOT ANSWERED and Q48j=1 (A TICK) code Q49b as -99 (should have answered but did not) Range = 20 max (i.e. those coding 21+ will be converted to 20)
Q50	Does your family own a car, van or truck?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q51	Do you have your own bedroom for yourself?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q52	How many computers (PC, laptop, MAC, iPad or tablet) does your family own?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q53	Do you have a computer (PC, laptop, MAC, iPad or tablet) that is only for your personal use (i.e. you don't have to share it with anyone else in your family)?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.

Q54	How many bathrooms (room with a bath / shower or both) are in your home?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q55	Does your family have a dishwasher at home?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q56	How many times did you and members of your family travel out of the UK for a holiday, vacation or to visit family last year?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q57	Are you a boy or a girl?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q58	What month were you born in?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q59	What year were you born in?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q60	Were you born in the UK?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q61	Please can you confirm to us what your postcode is?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not). (NOT INCLUDED IN DATASET AS IT IS DISCLOSIVE)
Q62	How would you describe your ethnic origin?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q63	Which of the following options best describes how you think of yourself?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q64	What is your religion?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q65	Do you have a learning disability?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q66	Do you have a long-term illness, disability or medical condition (like diabetes, arthritis, allergy or cerebral palsy) that has been diagnosed by a doctor?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.
Q67a	Do any of these conditions or illnesses affect you in any of the following areas?: Vision (for example blindness or partial sight). This does not include having to wear glasses	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67b	Do any of these conditions or illnesses affect you in any of the following areas?: Hearing (for example, deafness or partial hearing)	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67c	Do any of these conditions or illnesses affect you in any of the following areas?: Mobility (for example, walking short distances or climbing stairs)	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67d	Do any of these conditions or illnesses affect you in any of the following areas?: Dexterity (for example, lifting and carrying objects, using a keyboard)	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67e	Do any of these conditions or illnesses affect you in any of the following areas?: Learning or understanding or concentrating	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67f	Do any of these conditions or illnesses affect you in any of the following areas?: Memory	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67g	Do any of these conditions or illnesses affect you in any of the following areas?: Mental health	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67h	Do any of these conditions or illnesses affect you in any of the following areas?: Stamina or breathing or fatigue	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67i	Do any of these conditions or illnesses affect you in any of the following areas?: Socially or behaviourally (for example associated with autism, attention deficit disorder or Asperger's syndrome)	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67j	Do any of these conditions or illnesses affect you in any of the following areas?: None of the above	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67k	Do any of these conditions or illnesses affect you in any of the following areas?: Prefer not to say	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q67l	Do any of these conditions or illnesses affect you in any of the following areas?: Other, please tick box and write in below	Q66=1	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing). If not ticked this item but has ticked other items in list code as 0 (no).
Q68	Do you take medicine for your long term illness, disability or medical condition?	Q66=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.
Q69	Does your long-term illness, disability or medical condition affect your attendance and participation at school?	Q66=1	IF NOT ANSWERED, code as -99 (should have answered but did not) OR -98 (if did not answer and should not have answered due to routing); If multi-coded, code as -97.
Q70	Now thinking about health services, what would you say needs improvement in your local area?	Ask All	IF NOT ANSWERED (nothing written in text box), code as -99 (should have answered but did not). If answer written then coded to a series of yes (1)/ no (0) variables.
Q71a	Did you have help from any of the following people when completing this questionnaire?: Parent or guardian	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q71b	Did you have help from any of the following people when completing this questionnaire?: Brother or sister (including half, step or foster brothers and sisters)	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q71c	Did you have help from any of the following people when completing this questionnaire?: Another member of my family	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q71d	Did you have help from any of the following people when completing this questionnaire?: Teacher or another member of staff at school	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q71e	Did you have help from any of the following people when completing this questionnaire?: Friend	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).

Q71f	Did you have help from any of the following people when completing this questionnaire?: I had no help completing this questionnaire	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q71g	Did you have help from any of the following people when completing this questionnaire? Other, please tick box and write in below	Ask All	IF NOT ANSWERED (not ticked any items in the list), code as -99 (should have answered but did not). If not ticked this item but has ticked other items in list code as 0 (no).
Q72	The Health and Social Care Information Centre may want to carry out some further research over the next 12 months with people who have taken part in this study. Would you be happy to be contacted again as part of this research?	Ask All	IF NOT ANSWERED, code as -99 (should have answered but did not); If multi-coded, code as -97.

A.7 Response rates

Refer to the Excel Table A.7

A.8 Respondents having help to complete the questionnaire
Refer to the Excel Table A.8

A.9 Trial Survey report

14 May 2014

What About YOuth?

Local Health and Wellbeing of Younger People Survey: Trial Study Report

Anna Quigley, Anna Carluccio, Josh Keith and Alex McCallum

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Executive Summary

Background and objectives

The “*What about YOuth?*” study was undertaken by Ipsos MORI on behalf of the Department of Health and Health and Social Care Information Centre to explore the feasibility of conducting a large scale health survey of 15 year olds in England. The “*What About YOuth?*” survey in 2014 is the first population based survey developed as part of a direct response to gaps relating to teenagers identified by the Children and Young People’s Outcome Forum in the Public Health Outcomes Framework (PHOF). The primary focus of the trial was to investigate whether it would be possible to achieve the high response rates, and therefore the sample sizes, needed to deliver robust data at a local authority level.

The trial study delivered this by focussing on four secondary objectives.

- 1** Testing of incentive strategy
- 2** Testing of fieldwork methodology
- 3** Testing of questions
- 4** Testing of materials & resources

Approach and methodology

Development

The trial study involved a significant amount of development work in order to refine all aspects of the survey. A key element of this development work was the involvement of a steering group of stakeholders, put together by the Department of Health, and young people themselves (via the National Children’s Bureau) throughout the development of the brand and materials for the survey.

The development work encompassed a range of aspects, as described more fully in Chapter 2 of this report. In summary, some of the important features included: cognitive testing of the questionnaire, a residential workshop with young people to develop the branding of the survey, a small-scale pilot study (involving sending out questionnaires to 250 young people), and graphic design of survey brand and materials.

Fieldwork approach

The fieldwork approach consisted of a postal survey based on Dillman's *Tailored Design Method*¹. This comprises an advance mailing, three questionnaire mailings, and a postcard reminder. In addition, young people were also provided with the option to complete the survey online.

It had initially been hoped that it would be possible to test the impact of face-to-face and telephone reminders and/or interviews as methods for boosting response rates. However, permission was not granted to use the sample in this way. Therefore, an additional reminder was sent out to all non-responders, in a further effort to boost response rates.

Fieldwork for the trial survey was conducted between 31 October 2013 and 14 February 2014.

Incentive Experiment

As outlined earlier, one of the objectives of the trial study was to test the impact of different incentive strategies on response rates. In order to do this, a four-way incentive experiment was designed, and built in to the sample design. It was decided to test four different incentive strategies:

- 1** No incentive
- 2** £2 unconditional voucher incentive
- 3** £5 unconditional voucher incentive
- 4** £5 conditional voucher incentive

In addition, a further incentive test was built into the additional reminder, comprising three further incentive groups:

- 1** No incentive
- 2** £5 conditional voucher incentive
- 3** £10 conditional voucher incentive

The maximum, cumulative, incentive any one respondent could receive was £15, if they received a £5 unconditional incentive at the first stage, and a £10 conditional incentive as part of the additional incentive test (Table 2.2).

¹ *Internet, Mail and Mixed-Mode Surveys: The Tailored Design Method*, Dillman, D.A., Smyth, J.D., and Christian, L.M. (2008)

Key findings

Following the completion of fieldwork, an analysis of response rates and patterns, both at an overall level, and at individual questions, was conducted. In addition, a response rate model was produced, to estimate the likely response rate at a local authority level, if the survey was rolled out nationally.

Overall response rates

Overall, the trial study can be considered successful, in that it has shown that it is possible, using the sample frame and methodology discussed later in this report, to deliver high response rates with the desired audience (15 year olds), regardless of the incentive type used.

While a number of factors were determined to be influential in determining likelihood to respond, one of the most important differences was seen by gender, with girls much more likely to respond than boys, to all incentives (Table 3.11).

Furthermore, the overall response rate was found to vary geographically², with the North West achieving the lowest response rate, and the South West the highest (Table 3.7). The regional variation is likely to result from the different demographic profiles of the regions (i.e. gender split and level of deprivation).

Impact of incentives

The differential impact of the incentives was quite clear cut, with high value incentives having a greater impact on response rates than low value incentives (or no incentive at all), and unconditional incentives (sent with the initial questionnaire mailing) achieving a higher response rate than conditional incentives, as was expected at the outset of the study.

The responses rates observed across the four incentive groups varied as follows:

- No incentive – 34.2%
- £2 unconditional voucher incentive – 38.5%
- £5 unconditional voucher incentive – 47.0%
- £5 conditional voucher incentive - 43.0%

The four incentive strategies tested also had a differential impact based on the demographic characteristics of respondents. Response to the different

² When analysed by Government Office Region (GOR).

incentives varied by gender, with the £2 unconditional incentive producing the largest difference between males and females, and using no incentive the smallest difference.

Response to different incentives also differed by level of deprivation (based on area characteristics). Respondents in areas with lower levels of deprivation were more likely to respond, to all incentives. The £5 conditional incentive produced the widest range of response rates, and the £5 unconditional incentive and no incentive resulted in the least variation.

The incentives also had a differential impact on response across the regions. The greatest regional variation was seen amongst the group receiving no incentive. In contrast to the differences seen by level of deprivation, the £5 conditional incentive group produced the smallest variation between regions.

The implications of the response rate analysis and recommendations for a main stage are discussed in Chapter 6 of this report.

1 Introduction

This report presents the findings from the *What About YOuth?* Trial Study. The *What About YOuth?* 2014 survey is the first population-based survey collecting self-reported information on the health and wellbeing of young people.

1.1 Background

The Children and Young People's Outcome Forum identified gaps relating to teenagers in the Public Health Outcomes Framework (PHOF). As part of a direct response to this, the Health and Social Care Information Centre (HSCIC) was commissioned by the Department of Health (DH) to develop the *What About YOuth?* survey (formerly known as the *Local Health and Wellbeing Survey for Younger People*).

This large-scale survey would provide valuable information on the health and wellbeing of teenagers and the findings would help a range of agencies and professionals who work with young people to understand their needs better. The large sample size planned would allow the breakdown of results at a local authority level to allow tracking of progress against PHOF measures relating to 15 year olds.

HSCIC contracted Ipsos MORI to undertake a trial study in order to assess the viability of conducting a large-scale health and wellbeing survey of 15 year olds in England. Ipsos MORI was assisted by the National Children's Bureau (NCB) in the development work for the study.

1.2 Objectives of the trial study

The primary objective of the trial study was to provide clear evidence as to whether it would be possible to achieve high response rates, and therefore a sufficiently large sample size, to provide robust data at local authority³ level for 15 year olds. This central objective can be broken down into a number of secondary for the trial study:

- 1 Testing of incentive strategy** – the experimental testing of various incentive strategies was incorporated into the design of the trial study. This included testing: Conditional vs. unconditional incentives and high value (£5) vs. low value (£2) incentives.
- 2 Testing of fieldwork methodology** – it was necessary to test the fieldwork methodology, and the impact of reminders, to ensure response rates were being maximised.

³ When the term 'local authority' is used in this report, we are referring to the 152 Upper Tier local authorities in England.

- 3 Testing of questions** – a trial of this scale allowed investigation of question level response rates and response error and therefore would help refine questions and instructions prior to a full survey.
- 4 Testing of materials & resources** – the study also involved testing a number of materials & resources that were used to try to encourage and facilitate responses.

The rationale behind the design of the sampling, incentive experiment and fieldwork methodology for the trial study is discussed in detail in the following chapter.

1.3 Acknowledgements

Ipsos MORI would like to thank colleagues at the HSCIC and DH for their help throughout the trial study. In addition, we would also like to thank the members of the steering group, for their advice and guidance at all stages of the study and NCB for all of their input throughout the project. The organisations represented on the steering group were:

HSCIC
Ipsos MORI
DH
PHE
NHSE
Academic representation (both public health and surveys)
Local Authority representation
Association of Directors of Children's Services

Finally, we also extend our thanks to all those young people who took part at any stage in the trial study; without their cooperation this project would not have been possible.

2 Methodology

This chapter outlines the methodology used for the trial, providing details of the design, development, sampling, fieldwork, data processing and analysis.

2.1 Fieldwork process

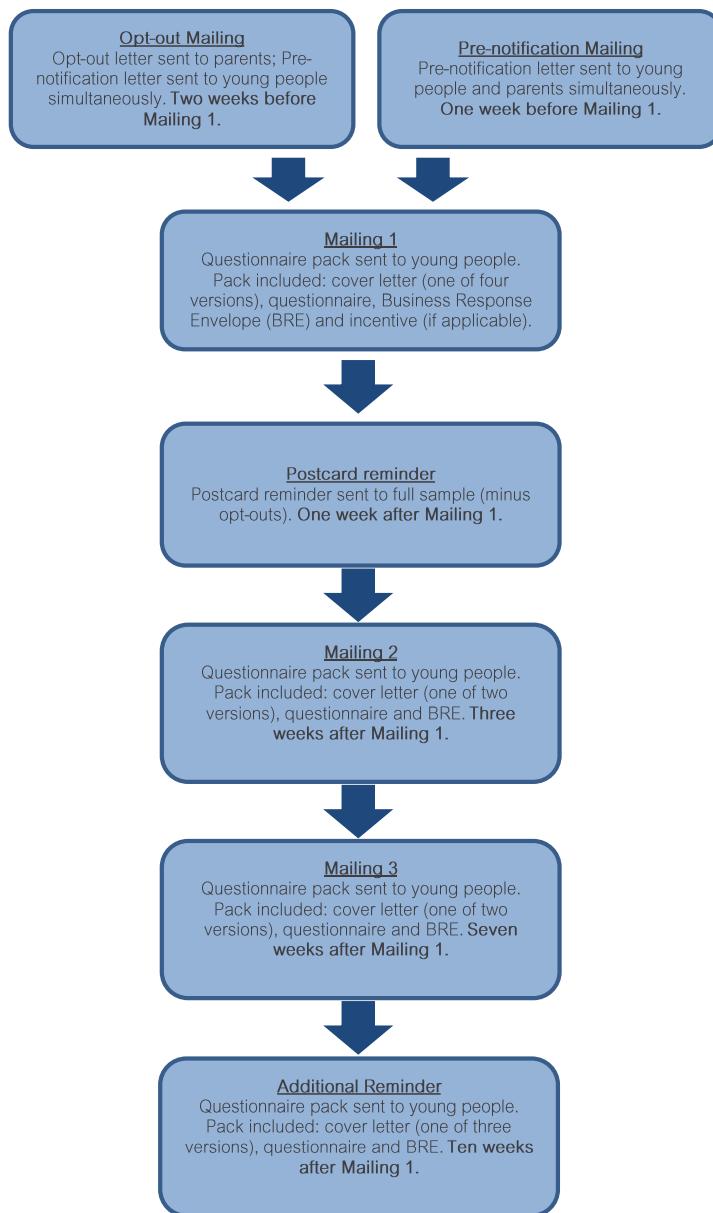
The fieldwork process is outlined in Figure 2.1. Between each of the full reminders all young people who had completed the survey (by post or online), opted out, or for whom a mailing had been returned as undeliverable, were removed from the sample.

The earliest advance mailing took place on 31 October 2013, with the first full questionnaire mailing being released on 18 November 2013. Fieldwork was closed on 14 February 2014⁴.

As can be seen in Figure 2.1, two different advance mailings were used, with parents in one half of the sample receiving opt-out letters and the other half receiving pre-notification letters. This was designed to test the fact that parents were not being asked for their consent for the child to take part in the study. Parental consent would usually be required for children under the age of 16. However, due to the trial nature of this survey and the topics included in the questionnaire, a waiver was requested and obtained from the Market Research Society (MRS) Standards Board. Parents were notified at the same time as their children to provide them with the necessary information about the study but consent was not directly requested. However, in order to test this approach, the sample was split into two groups, one where the parent was given an explicit invitation to opt-out on behalf of their child and one where they were simply informed about the survey.

⁴ Postal responses received up until Monday 17 February were accepted and included in the data set.

Figure 2.1 – Fieldwork process



The cover letters were tailored for each mailing. There were four versions for the initial mailing, one for each of the incentive experiment groups. Cover letters for mailings 2 and 3 consisted of two versions, one for the £5 conditional incentive, and one to cover the other three experiment groups. The additional reminder had three cover letters, one for each of the additional experiment groups.

2.2 Overall study design and development

At the start of the study, two potential sample frames were available from which to draw a sample of 15 year olds in England. These were MIDAS⁵ and the National Pupil Database (NPD)⁶. The nature of these sample frames meant that only postal addresses would be available. Therefore, the trial study was designed to be conducted primarily using a postal survey methodology, for the following reasons:

- only postal addresses would be available, so online only and telephone surveys would not be possible; and
- a face-to-face survey of this scale would be prohibitively expensive.

The implementation of the postal survey was based on Dillman's *Tailored Design Method*⁷, which consists of:

- advance mailing to full sample;
- full questionnaire mailing to full sample (mailing 1);
- postcard reminder to full sample;
- reminder (including questionnaire) to all non-responders (mailing 2); and
- second reminder (including questionnaire) to all non-responders (mailing 3).

In addition, it was decided that young people would have the opportunity to complete the survey online should they wish.

Beyond this, there were two further options for attempting to increase response rates, Scenarios A and B below:

Scenario A: Following mailing 3, a mixture of face-to-face and telephone reminders and interviews would be conducted, to test the impact of each of these on boosting response rates.

Scenario B: Following mailing 3, an additional reminder would be sent out, with three new incentive strategies (no incentive, a £5 conditional incentive and a £10 conditional incentive), to test the impact of further incentives on boosting response rates.

⁵ The Medical Research Information Service Integrated Database and Administration System (MIDAS) based on health records and controlled by HSCIC.

⁶ The National Pupil Database based on data for pupils attending schools and colleges in England, and controlled by the Department for Education.

⁷ *Internet, Mail and Mixed-Mode Surveys: The Tailored Design Method*, Dillman, D.A., Smyth, J.D., and Christian, L.M. (2008)

Permission to use the sample for the purposes of contacting respondents by telephone or face-to-face was not granted, and therefore the trial study followed Scenario B.

2.2.1 Development of survey materials

The initial selection of topics and questions for the study was made by HSCIC, DH and the steering group. Ipsos MORI then worked with HSCIC and DH to develop an initial version of the questionnaire. The initial questionnaire was made up of a combination of tried and tested questions from other similar surveys⁸, along with new questions developed specifically for the purpose of this survey.

The Children and Young People's Health Outcome Forum made a number of recommendations which they felt were necessary to improve outcomes for Children and Young People. The chief concern for young people was the gaps in the Public Health Outcomes Framework (PHOF) concerning key health behaviour measures such as physical activity and substance misuse. As such, they made a specific recommendation that a survey be established to collect data on a range of measures.

It was decided not to include some variables, e.g. weight status, as this was a self-completion survey and self-reported weight status is unreliable.

Mental health was also excluded as a specialist survey would be more appropriate. The questions covered the following areas:

- Diet;
- Free time;
- Physical activity;
- Smoking;
- Drinking;
- Cannabis;
- Other drugs;
- Emotional and mental wellbeing;
- Bullying; and
- Family/household situation.

This questionnaire and other fieldwork materials were then developed, prior to, and during, the pilot, as described below.

⁸ Such as Health and Behaviour of School-aged Children (HBSC); Survey of Smoking, Drinking and Drug Use among Young People in England (SDD); Scottish Schools Adolescent Lifestyle and Substance Use Survey (SALSUS); and the ONS measures of subjective well-being.

Stage 1: Cognitive testing

A total of 11 cognitive interviews with young people aged 14-16 were carried out in two rounds during the questionnaire development. The questionnaire was revised between rounds to allow the testing of any changes. The cognitive interviews were primarily designed to test the questions, but were also used to gather opinions on various examples of survey branding and options for incentivising the survey, to help inform the wider design of the study. Following the completion of the cognitive testing, a report on the findings, in the form of a marked-up questionnaire, was produced, and this is included in the appendices of this report (Appendix A). Some of the key findings from the cognitive testing were:

- the questionnaire, on the whole, was working well;
- young people did not feel uncomfortable answering any of the questions;
- there was some concern expressed by participants about parent(s)/guardian(s) seeing responses;
- placement of some questions should be reconsidered (e.g. '*How is your health in general?*'); and
- question wording and instructions could be amended in some cases to improve comprehension and clarity.

Stage 2a: Workshop

As part of the development work, NCB held a two-day residential workshop with a group of 14 young people recruited from Young NCB, and Young Research Advisors. The aim of this workshop was to further develop the content and branding of the survey materials. NCB produced a report with recommendations on the branding, and this report is included in full in the appendices to this report (Appendix B). The findings from the workshop heavily influenced the design of the branding for the study. Some of the key findings included:

- a suggested name for the study – '*Understanding YOuth*'⁹;
- that information provided to young people about the survey should focus on:
 - the importance of young people taking part;

⁹ Concerns about the similarity with the '*Understanding Society*' study, which also includes a young person's survey meant that the name was changed to 'What about YOuth?'

- confidentiality;
 - that the survey will help other young people; and
 - how to take part.
- that the brand should be colourful, but simple, and crucially, consistent across all materials.

Stage 2b: Pilot study

Prior to carrying out the trial study, a small-scale pilot study was conducted by Ipsos MORI, with fieldwork taking place in August and September 2013. The main purpose of this was to test the materials and processes involved in the study and further their development.

The pilot study consisted of two core elements:

- 1 Small-scale postal survey of 250 young people (in one local authority area); and
- 2 Telephone in-depth interviews with non-responders.

Overall the pilot study proved to be successful, and the findings from both of these elements proved useful in finalising the materials used for the trial survey itself, as well as ironing out any issues with the processes involved (e.g. sampling, printing, scanning, data processing). Some of the key changes made as a result of the pilot study included:

- moving to using C4 envelopes for outgoing and return mail to improve the printing, fulfilment, and return mail process;
- refinement of questionnaire layout and instructions to reduce completion error; and
- improve the visibility of the option for participating in the survey online, following feedback from the in-depth interviews with non-responders.

For full details of, and findings from, the pilot study, please refer to the report included in the appendices (Appendix C).

Stage 3: Graphic design

Following the workshop, Ipsos MORI's Multimedia & Graphics Department worked to develop the branding for the survey materials, to ensure consistent branding across all of these. The final branding was decided upon by HSCIC and DH, with further input from the young people recruited by NCB, who provided comments on the look and feel of draft materials.

Specifically they were keen to ensure that the branding reflected their desire for it to look colourful, simple and professional.

Examples of the final materials used in the trial study, along with details of the development are included in the appendices to this report (Appendix D).

2.2.2 Development of study website

Once the branding of the survey was decided, the Multimedia & Graphics Department worked to create a website design reflecting this.

Recommendations from the NCB workshop were also incorporated, focusing on:

- keeping the website simple and easy to use, with information for parents so that young people could direct them to it if they had any queries;
- having a video explaining the survey;
- providing links to health-related websites should the respondents have any concerns after completing the survey;
- providing practical information about how young people complete the survey; and
- providing a link to complete the survey online.

Traffic to the study website (www.whataboutyouth.com) was monitored throughout the fieldwork period, and this is discussed in more detail in Chapter 5.

2.2.3 Choice of incentive type

During the development stage of the study various incentive types were considered. It was decided to use vouchers for high-street stores as the incentive for the trial study due to practical considerations regarding the use of money and because it was thought that these would appeal to a broad range of young people.

2.3 Ethical review and consent considerations

As part of the preparation for this study, the National Research Ethics Service (NRES) was approached to discuss whether or not ethical approval would be required. While NRES confirmed that ethical approval would not be required in order for the trial study to go ahead, it was decided that it was highly desirable for an ethical review of the approach to be conducted. Doing so would ensure that due consideration was being given to any potential ethical issues. NCB was deemed to be best placed to do this, based on their experience of research with the age group in question.

Therefore, during preparations for the trial study, the NCB Ethics Board worked closely with the Ipsos MORI research team to conduct an ethics review of the trial study. This involved reviewing the approach, and all fieldwork materials in detail. The NCB Ethics Board provided feedback on the materials, and these were amended where necessary before approval was given, and the trial study fieldwork began. Full details of this ethics review process, and the feedback from the NCB Ethics Board are included in the appendices to this report (see Appendix E). It is recommended that the NCB Ethics Board would conduct a further review of the approach ahead of the main stage.

All research studies conducted by Ipsos MORI are governed by the Market Research Society (MRS) Code of Conduct. For research involving children under 16, it is usually a pre-requisite that consent is obtained from a parent/guardian (or a teacher *in loco parentis* for research conducted in school). However, this study was granted a waiver by the MRS Standards Board based on the approach of providing advance information about the study to parents, but without seeking their consent. It was felt that this approach would give appropriate emphasis to the young person's right to participate (as most 15 year olds would have the ability to provide informed consent and understand the implications of participating in a study of this nature), while ensuring that those in need of support could obtain it. It was also deemed to be desirable to avoid seeking consent from parents/guardians due to the sensitive nature of some of the topics covered on the questionnaire. It was considered important to avoid restricting the young person's right to choose whether or not to participate. Obtaining a waiver for parental consent was intended to help avoid both over-protective parents denying children the right to participate in research, or parents 'coercing' their children to participate against their wishes.

It was decided that an opt-out approach would be trialled; further detail on how this was done is included in section 2.4.3.

2.4 Sample Design

2.4.1 Sample frame

The MIDAS database which is based on health records, was chosen as the most viable sample frame for this trial study as its coverage is better, given the fact that NPD excludes those young people in independent schools. Ipsos MORI asked the HSCIC MIDAS team to create a sample frame for the trial phase of the survey comprising all those registered on MIDAS resident in England, born in the period 1 September 1997 to 31 August 1998, meaning participants were aged between 15 years and 2 months and 16 years and 6 months during the fieldwork period for the trial study. This age range was chosen to ensure that trial study participants were of an equivalent age to the main survey participants, without drawing from the same cohort. In practice this means that the average age of those selected

to take part in the trial survey will be slightly older than those who will be eligible for the main survey.

The total size of the sample frame provided by the MIDAS team was 658,300 young people. This sample frame contained a unique identifier, month of birth, gender, postcode, and an indicator of whether or not the young person had been flagged as deceased since the initial sample was drawn from MIDAS.

Exclusions

Following an initial review of the sample frame, a small proportion of the cases were excluded for the purposes of the trial because:

- 1 they would be ineligible for the study (registered at addresses outside England, flagged as deceased, or where the postcode was a Post Office box)
- OR
- 2 they were deemed to be ineligible for the purposes of the trial (e.g. those with no postcode, and therefore couldn't be assigned to a cluster).

For the vast majority of the 38,509 cases excluded, this was because they were registered at addresses outside England (35,730).

Clustering

The remaining 619,791 cases on the sampling frame were then assigned to clusters. Clustering of the sample would not be necessary for a study based solely on a postal methodology. However, in this instance, the possibility of conducting face-to-face reminders/interviews necessitated the sample being clustered.

Each cluster comprised a group of neighbouring Output Areas (OAs): They were grouped with the intention being that each cluster had around 80 eligible cases, no fewer than 60 cases and no more than 163 cases. The average OA had 3-4 eligible cases. The mean cluster size was 21 OAs and had an average of 82.3 eligible cases, with the minimum number of cases being 60 and the maximum being 163.

Clustering was then undertaken using the following steps:

- **Step 1:** within the geographical boundary of interest (i.e. England), the OA furthest from the centre of the geographical area in a straight line was determined. This OA is called the most remote OA;

- **Step 2:** the nearest OA to the most remote OA was then determined and the measure of size summed to create a cluster measure of size. This cluster became the most remote Primary Sampling Unit (PSU);
- **Step 3:** step 2 was repeated until the most remote PSU had a measure of size greater than the pre-determined threshold (i.e. more than 85 eligible 15 year olds);
- **Step 4:** all clustered OAs removed from the clustering frame;
- **Step 5:** steps 1 through 4 were repeated until all OAs within the geographic boundary had been assigned to a cluster; and
- **Step 6:** steps 1 through 5 were repeated until all geographic areas were clustered.

Stratification

In the main stage of the survey, the intention is to use matched NPD variables for stratification of the sample. This is because NPD has a broader range of background variables than MIDAS. Access to, and matching in to the sample frame of, the relevant variables from the NPD was not possible in time for the trial study sampling. Proportionate stratification as part of the sampling process for surveys helps to maximise the precision of survey estimates. Stratification is effective to the extent that stratifying variables correlate with key survey variables. The aim is, therefore, to select variables for stratification that will likely be key discriminators of survey estimates. Other similar surveys, such as the Health Behaviour in School Children, have shown that a range of variables are important factors in influencing key survey estimates, for example, prevalence of smoking. Therefore, based on a review of other datasets the intended stratification variables were:

- gender;
- ethnic group;
- educational attainment;
- special educational needs (SEN); and
- free school meal status (as a measure of deprivation/affluence)

In the absence of these NPD variables, clusters were stratified proportionately based on the following census-derived variables, chosen to act as proxies for the NPD variables:

- Government Office Region (GOR) (with North East combined with Yorkshire and the Humber);

- % ABs¹⁰ (the highest social grade) within GOR (3 groups, defined so that had an approximately equal number of individuals within each band);
- % BME within AB classes within GOR (2 groups, defined so that we had an approximately equal number of individuals per band); and
- population density.

Sample selection

Following cleaning, clustering, and stratification a nationally representative sample of around 6,940 eligible cases for the trial was selected. A two-stage sampling process was employed:

- **Stage 1:** Following stratification of the clusters described above, 84 clusters were selected using a 1 in N selection (i.e. a ‘systematic random sample’ of clusters); and
- **Stage 2:** All eligible cases within the selected clusters were sampled. With 84 clusters and an average of 82.7 eligible cases per cluster, this produced a starting sample of 6,918 cases.

Following this, the unique identifiers of the selected individuals were provided to the MIDAS team, who then provided full details for these records (full name, gender, full address and date of birth).

2.4.2 Design of incentive experiment

An average of 82.7 young people from each cluster were sampled, with 20 or 21 randomly assigned to each incentive condition. This matched sample design, where each cluster contained individuals assigned to each of the four conditions, is more powerful than a design assigning clusters of 20 each to a single condition.

The clusters created were relatively large by the standards of most surveys, with an average of 82.7 15 year olds per cluster. However, this can be considered acceptable for two reasons:

- 1** The members of each cluster were allocated across four conditions in the trial experiment – this means that each cluster was effectively composed of four clusters of 20/21; and
- 2** The clusters still covered geographically large areas and so the risks of clustering effects (of the type that might exist if a large number of

¹⁰ Social grade is a classification system based on occupation and it enables a household and all its members to be classified according to the occupation of the Chief Income Earner (CIE) into grades A, B, C1, C2, D or E.

adults in a small geographical area were sampled) can be considered minimal.

2.4.3 Design of opt-out vs pre-notification test

Following discussion between the MRS and NCB, as discussed earlier in this report, it was agreed that it was necessary to test an opt-out approach as part of the trial study. Sampled young people were randomly assigned to one of two opt-out groups as follows:

Group 1: Parent received an opt-out letter at the same time as their child received a pre-notification letter.

Group 2: Parent received a pre-notification letter at the same time as their child.

This added two further experiment conditions to the study. Results from this element of the experiment are also discussed in Chapter 3.

2.4.4 Assigning selected young people to experimental conditions

The study involved eight initial experimental conditions, as outlined in Table 2.1 below, combining the incentive experiment with the opt-out vs. pre-notification experiment.

Table 2.1 – Test Groups

Test Group	Parental contact condition	Incentive condition	Sample allocated ('n')
1	Opt-out	No incentive	865
2	Pre-notification	No incentive	865
3	Opt-out	£2 unconditional	865
4	Pre-notification	£2 unconditional	865
5	Opt-out	£5 unconditional	865
6	Pre-notification	£5 unconditional	865
7	Opt-out	£5 conditional	864
8	Pre-notification	£5 conditional	864

In order to assign young people to the test groups, the selected sample was ordered by sampling strata within each cluster and then numbered 1-8

all the way down the sample. The profiles (gender, BME, region) were then checked to ensure a fairly even distribution.

It was then necessary to edit this allocation to account for the fact that multiple people within a household (e.g. twins, care homes, boarding schools) could be allocated to different incentive groups. Therefore all members of the same household were allocated to the same test group as the first member of the household. This led to an uneven spread of young people across the groups. This uneven spread was corrected for by removing cases randomly from all test groups until all were the size of the smallest group. The removed cases were then randomly allocated to each group to even out the allocation. While this will have had some impact on the stratification, it was vital to ensure parents didn't receive an opt-out letter for one child and a pre-notification letter for another, to avoid causing confusion to respondents and their parents, and possibly giving rise to complaints. This issue only affected a total of 283 cases, and therefore did not have a significant impact on the stratification.

2.4.5 Additional reminder

During fieldwork, when it became apparent that permission to use the MIDAS sample to conduct face-to-face and telephone reminders and/or interviews would not be granted, it was decided to make use of an additional reminder.

Table 2.2 – Test groups for the additional reminder

Additional group	Original group	Maximum cumulative incentive	Sample allocated ('n')
No Incentive	No incentives	£0	363
	Unconditional £2	£2	337
	Unconditional £5	£5	290
	Conditional £5	£5	319
Conditional £5	No incentives	£5	369
	Unconditional £2	£7	337
	Unconditional £5	£10	289
	Conditional £5	£10	313
Conditional £10	No incentives	£0	366
	Unconditional £2	£12	338
	Unconditional £5	£15	291
	Conditional £5	£15	311

This additional reminder was divided into three further incentive tests: no incentive; £5 conditional incentive; £10 conditional incentive.

All non-responders following the third mailing were randomly allocated to one of these groups. This allocation was done within each of the original four incentive experiment groups, in effect creating 12 groups. The reason for this was to enable the measurement of the differential impact of these secondary incentives depending on the initial incentive condition.

2.5 Data processing and editing

Postal returns were scanned and processed, and data cleaned before being merged with the data from the online survey. Data cleaning took into account:

- that it was possible for sampled young people to complete a survey both online and on paper, or complete two paper based questionnaires, in which case the first completed survey was used;
- that some blank questionnaires would be returned; and
- that there would be some completion error encountered on the postal survey.

Further details of the editing that took place are included in Chapter 4.

2.6 Analysis

The *What About YOuth?* trial study was designed as an experimental test of the impact of incentive strategies on response rates. Therefore, the priority for analysis of the data collected was to establish the response rates, both at an overall level (unit response), and at a question level (item response), by a number of respondent characteristics (e.g. gender, level of deprivation). For the question level analysis, the priority was to establish response rates in terms of the proportion of respondents answering each question, and answering it without error. This analysis also included examination of unusual response patterns, for example, unexpectedly high proportions selecting one answer at any question. Analysis of open-ended questions was also conducted, to enable recommendations to be made on any further amendments to the survey questionnaire.

Further notes on the methodology used for calculating and modelling response rates follow below, and the findings from this analysis are discussed in detail in the following chapter of this report.

2.6.1 Observed response rates

All adjusted response rates discussed in Chapter 3 were calculated on the basis of the total eligible sample. To calculate the total eligible sample, any non-contactable records are excluded. In this case that meant anybody for whom the address details proved to be out of date or incorrect¹¹. In addition, one record for which it was not possible to append any geo-demographic data was excluded from the eligible sample.

2.6.2 Predicted response rates

In addition to analysis of observed response rates, a three stage response rate modelling process was undertaken. This followed the steps as outlined below:

- **Step 1:** a logistic regression model was used to determine what the factors were that influenced response rates for **mailings 1-3** (e.g. incentive)
- **Step 2:** estimate what response rate would have been obtained had one incentive been used throughout the whole sample.
- **Step 3:** steps 1 and 2 were repeated for the **additional reminder**.
- **Step 4:** the estimated response rates were extrapolated to the population.
- **Step 5:** use a further logistic regression model to project response rates throughout the population, at a local authority level¹².

The results from this modelling are discussed in detail in Chapter 3.

¹¹ i.e. any records for which an 'undeliverable' postal response was received or a telephone call to inform Ipsos MORI that the selected young person no longer resided at the address.

¹² Response rates were calculated for 150 upper tier local authorities in England. Response rates were not modelled for City of London and Isles of Scilly due to their very small population size.

3 Analysis of unit response

This chapter considers opt-outs and unit response to provide an understanding of the success of each incentive strategy and the feasibility of the study.

3.1 Opt-outs

As described in the previous chapter of this report, the advance mailing to the young people selected for this study and their parents was split into two groups. For half of the sample, parent(s)/guardian(s) received a letter informing them of their child's selection for the study and explicitly giving them the opportunity to opt-out. In the other half of the sample, parent(s)/guardian(s) received a notification letter simply informing them of their child's selection, without explicitly mentioning the opportunity to opt-out.

The table below details the number of opt-out requests received, and compares opt out rates across the two groups. As would be expected, those whose parents received the letter asking them if they wanted to opt out were more likely to opt out, or be opted out by their parents, than those whose parents received the pre-notification letter. However, the opt-out rate amongst both groups remained very low, accounting for only 0.5% of the issued sample. It should also be noted that this table contains opt-outs received throughout the fieldwork period, not just following the advance mailing.

Table 3.1 – Opt-outs requested

		People who opted out		Total Issued Sample
		n	%	n
Initial Condition	Opt-out Letter	23	0.7	3360
	Pre-notification Letter	9	0.3	3362
	Overall	32	0.5	6722

Source: Ipsos MORI.

Base: All young people invited to take part in the WAY Trial Study.

3.2 Unit response

The first element of the response pattern to be analysed is unit response, i.e. the proportion of issued sample cases who completed the survey. In this section, we examine a number of different elements of unit response, beginning with the chosen mode of completion. Due to the experimental nature of the trial study, response rates are always analysed by incentive condition, and responses divided into two lots, those received in response to **mailings 1-3** and those received in response to the **additional reminder**. Responses to the **additional reminder** were analysed separately to allow consideration of this as an additional option for boosting response rates.

As is normally the case with any postal survey, a small number (around 20) of blank surveys were also returned, and these were removed from the data during the cleaning. These cases were counted as non-responses.

3.2.1 Mode of response

Young people invited to take part in the survey could do so via two modes. They could either complete the paper questionnaire sent out to them, or they could complete the questionnaire online, using the survey web address¹³, and log-in details, provided on the paper questionnaire. The vast majority of responses were received via paper questionnaire. However, a total of 328 unique responses¹⁴ were received to the online survey, representing 11.1% of total responses to the survey (Table 3.2 below). Of these, approximately one-quarter chose to do so using a mobile device¹⁵.

Table 3.2 – Mode of response

	n	%
Online Response	328	11.1%
Postal Response	2626	88.9%
Total	2954	100%

Source: Ipsos MORI.

Base: All young people responding at any stage.

¹³ This web site is not the www.whataboutyouth.com, but the online survey itself hosted at www.ipsos-mori.com/whataboutyouth

¹⁴ Excluding those who had already completed and returned the paper questionnaire.

¹⁵ Mobile devices include smartphones and tablets.

Looking at responses to the first three mailings, overall, 10.6% of total successful surveys were completed online. This ranged from 8.3% amongst the £2 unconditional incentive group, to 13.5% in the £5 conditional incentive group (Table 3.3). The two groups receiving an unconditional incentive with their paper questionnaire were more likely to complete the survey using the paper copy, rather than going online.

Table 3.3 – Mode of response for mailings 1-3

		Response Mode				Total responses	
		Online Responses		Postal Responses			
		n	%	n	%		
Initial Incentive Condition	No incentive	67	11.6%	511	88.4%	578	
	£2 unconditional	54	8.3%	594	91.7%	648	
	£5 unconditional	73	9.3%	715	90.7%	788	
	£5 conditional	97	13.5%	623	86.5%	720	
Total		291	10.6%	2443	89.4%	2734	

Source: Ipsos MORI.

Base: All young people responding to mailings 1-3.

Young people responding to the additional reminder were more likely to respond via the online survey than those responding to the earlier mailings. A total of 16.8% did so (ranging from 15.5% - 19.2%), compared to 10.6% for the first three mailings.

Table 3.4 – Mode of response for additional reminder

		Response Mode				Total Responses	
		Online Responses		Postal Responses			
		n	%	n	%		
Secondary Incentive Condition	No incentive	8	16.0 %	42	84.0%	50	
	£5 conditional	14	19.2%	59	80.8%	73	
	£10 conditional	15	15.5%	82	84.5%	97	
Total		37	16.8%	183	83.2%	220	

Source: Ipsos MORI.

Base: All young people responding to additional reminder.

3.2.2 Response rates by initial incentive – overall

As was expected based on the literature¹⁶, response rates varied significantly depending on the initial incentive condition (Table 3.5). However, even amongst the group that did not receive any incentive, a response rate of 34.2% was achieved. This rose to 47% amongst those who had received the highest value incentive (£5) and who did not have to do anything in order to claim this incentive.

¹⁶ A meta-analysis of 38 studies by Church found that prepaid monetary incentives yielded, on average, a 65% increase in response rates (Church, A. H. (1993). Estimating the effect of incentives on mail survey response rates: A meta-analysis.

Public Opinion Quarterly 57 (1): 62–79 cited in Singer, E and Ye, C. (2013). The Use and Effects of Incentives in Surveys. *The Annals of the American Academy of Political and Social Science*. 645 (1), 112-141.).

Table 3.5 – Response rates by initial incentive – overall

		Total Sample	Response Rate	
		n	n	%
Initial Incentive Condition	No incentive	1688	578	34.2%
	£2 unconditional	1682	648	38.5%
	£5 unconditional	1678	788	47.0%
	£5 conditional	1674	720	43.0%

Source: Ipsos MORI.

Base: All young people responding to Mailings 1-3.

3.2.3 Initial response rates by pre-notification and opt-out (by incentive)

While the incentives had a significant impact on response rates, these did not vary significantly when factoring in the opt-out vs. pre-notification experiment, as illustrated in Table 3.6.

Table 3.6 – Initial response rates by pre-notification vs opt-out

		Starting Sample (n)	Responses (n)	Response Rate (%)
No incentive	Opt-out	841	282	33.5%
	Pre-notification	847	296	34.9%
£2 unconditional	Opt-out	844	334	39.6%
	Pre-notification	838	314	37.5%
£5 unconditional	Opt-out	838	405	48.3%
	Pre-notification	840	383	45.6%
£5 conditional	Opt-out	837	360	43.0%
	Pre-notification	837	360	43.0%

Source: Ipsos MORI. Base: All young people responding to Mailings 1-3

3.2.4 Response rates by initial incentive – geographic

It is also possible to analyse response rates by GOR¹⁷. Response rates did vary geographically, ranging from 36.6% overall in the North West, to 47.0% overall in the South West. The greatest regional variation was seen in the group receiving no incentive. Here observed response rates ranged from 26.7% in the North West to 49.2% in the South West, a range of 22.5 percentage points. The £5 conditional incentive group produced the smallest range of 10.6 percentage points, with observed response rates from 37.7% in the East Midlands to 48.3% in the East of England. This regional variation is likely to reflect demographic differences between the regions, such as the variation in gender split that is observed across different local authorities and differing levels of deprivation, which in turn are associated with differing response rates.

Table 3.7 – Initial response rates by GOR

	Lowest Response Rate	Highest Response Rate		
No incentive	North West	26.7%	South West	49.2%
£2 unconditional	North East & Yorkshire	31.9%	East Midlands	46.2%
£5 unconditional	West Midlands	42.1%	East of England	53.4%
£5 conditional	East Midlands	37.7%	East of England	48.3%

Source: Ipsos MORI

Base: All young people responding to Mailings 1-3

3.2.5 Response rates to additional reminder—overall

As described in Chapter 2, following the final planned reminder (mailing 3), a further reminder, with three further incentive conditions was sent. Overall, this had a small, but significant, impact on the response rates. Returned questionnaires or online surveys completed in response to this mailing accounted for 7.4% of the total returns (220 out of 2,954). This accounts for 3.3% of the total response rate overall; however caution must be exercised in comparing this with the initial incentive structures due to differing circumstances for both groups (i.e. increasing incentivisation, previous knowledge of study; earlier refusal/non-participation etc.).

¹⁷ For the purposes of analysis, Yorkshire and the Humber has been combined with the North East, to mirror the regions used for sampling.

The total issued sample for this additional reminder was 3,923, and with 220 surveys being completed. The overall response rate to the initial reminder was 5.6%. Response rates across the three incentive conditions ranged from 3.8% among the group not offered a further incentive, to 7.4% amongst those offered a £10 conditional incentive.

Table 3.8 – Response rates to additional reminder—overall

		Reminders mailed out	Total Responses		
			N	n	%
Additional Incentive Condition	No incentive	1309	50	3.8%	
	£5 conditional	1308	73	5.6%	
	£10 conditional	1306	97	7.4%	
	Total	3923	220	5.6%	

Source: Ipsos MORI.

Base: All young people responding to Additional reminder.

It is also important to consider how the impact of the additional reminder varied depending on the incentive condition the respondents had been subject to during the initial mailings. As Table 3.9 illustrates, the highest response rate was observed when non-responders who had previously been offered no incentive, were offered a £10 conditional incentive as part of the additional reminder (8.5%). On the other hand, the lowest impact of the additional reminder was observed to be where no incentive was offered to those who had previously been offered/received an incentive (e.g. 3.1% among the £5 unconditional group). However, most of these differences are not significant.

Table 3.9 – Response rates to additional reminder – original condition

		Total Sample	Total Responses	
		n	n	%
No incentive	No incentive	363	19	5.2%
	£5 conditional	369	19	5.1%
	£10 conditional	366	31	8.5%
£2 unconditional	No incentive	337	12	3.6%
	£5 conditional	337	22	6.5%
	£10 conditional	338	22	6.5%
£5 unconditional	No incentive	290	9	3.1%
	£5 conditional	289	16	5.5%
	£10 conditional	291	24	8.2%
£5 conditional	No incentive	319	10	3.1%
	£5 conditional	313	16	5.1%
	£10 conditional	311	20	6.4%
Total		3923	220	5.6%

Source: Ipsos MORI.

Base: All young people responding to additional reminder.

3.2.6 Responses over time – impact of mailings on response rates (mailings 1 – 3)

During the initial fieldwork period, three questionnaire mailings took place, an initial mailing 1, and two reminder mailings (mailings 2 and 3). These were observed to have a broadly similar impact on the response rates across the incentive groups. The impact of the mailings 2 ranged from + 7 percentage points for the No incentive group, to +10.3 percentage points among the £5 unconditional group. The impact of mailings 3 was greatest among the £5 conditional group, perhaps because non-responders in this group still had the opportunity to receive an incentive by returning their completed questionnaire, or completing the survey online.

Table 3.10 – Response rates by mailing

		Total Sample	Response Rate After Mailings 1		Response Rate After Mailings 2		<i>Impact</i>	Response Rate After Mailings 3		<i>Impact</i>
			n	n	%	n		n	%	
Initial Incentive Condition	No incentive	1688	370	21.9%	487	28.9%	+7.0 pp	578	34.2%	+5.3 pp
	£2 unconditional	1682	433	25.7%	579	34.4%	+8.7 pp	648	38.5%	+4.1 pp
	£5 unconditional	1678	533	31.8%	706	42.1%	+10.3 pp	788	47.0%	+4.9 pp
	£5 conditional	1674	478	28.6%	607	36.3%	+7.7 pp	720	43.0%	+ 6.7 pp
Total		6722	1814	27.0%	2379	35.4%	+8.4 pp	2734	40.7%	+5.3 pp

Source: Ipsos MORI.

Base: All young people responding to Mailings 1-3.

3.2.7 Response rates – by gender and initial incentive

Given the nature of the audience for this survey, 15 year olds in England, a differential response rate by gender would be expected. Response rates for other studies highlight that 14-15 year old boys are less likely to participate than 14-15 year old girls. For example, on the British Household Panel Youth Survey response rates for 14 year old boys were 69%, compared with 79% for 14 year old girls.

Response rates for this survey were found to vary significantly by gender overall and within the incentive groups as shown in Table 3.11. Response rates for boys varied from 29.9% among the No Incentive group, to 41.3% among the £5 unconditional group. For girls, observed response rates were higher, ranging from 38.4% among the No incentive group, to 53.3% among the £5 unconditional group.

The difference between the male and female response rates is greatest within the £2 unconditional group and smallest in the group receiving no incentive.

Table 3.11 – Response rates by gender and incentive

		Starting Sample (n)	Responses (n)	Response Rate (%)
No incentive	Male	827	247	29.9%
	Female	861	331	38.4%
£2 unconditional	Male	839	254	30.3%
	Female	843	394	46.7%
£5 unconditional	Male	884	365	41.3%
	Female	794	423	53.3%
£5 conditional	Male	877	335	38.2%
	Female	797	385	48.3%
Total		6722	2734	40.7%

Source: Ipsos MORI.

Base: All young people responding to Mailings 1-3.

3.2.8 Response rates by Index of Multiple Deprivation and initial incentive

The relationship between response rates and deprivation, through the Index of Multiple Deprivation (IMD), can also be examined. IMD is an internationally recognised method of generating a comparative statistic on the level of poverty and deprivation in a geographical area. In total, the UK uses¹⁸ 38 sources of data, covering seven domains (income, employment, health, housing, crime, living environment and education) to generate a numerical value for comparison.

Table 3.12 presents response rates within the four initial incentive conditions, broken down by the Index of Multiple Deprivation rank¹⁹. A pattern of higher response at lower levels of deprivation is clearly evident. This gap is most pronounced among both the £5 conditional incentive group, where the response rate ranges from 31.8% among the highest levels of deprivation, to 48.0% for the lowest levels of deprivation, and the no incentive group, where the response rate ranges from 23.8% to 40.2%.

Table 3.12 – Response by IMD and initial incentive

	IMD Rank (Quartiles)	Starting Sample (n)	Responses (n)	Response Rate (%)
No incentive	Quartile 1: Most deprived 25% (Ranking 1 - 8,120)	433	103	23.8%
	Quartile 2: (Ranking 8121 - 16241)	422	142	33.6%
	Quartile 3: (Ranking 16242 - 24362)	355	141	39.7%
	Quartile 4: Least Deprived 25% (Ranking 24363 - 32482)	478	192	40.2%
£2 unconditional	Quartile 1: Most deprived 25% (Ranking 1 - 8,120)	448	143	31.9%

¹⁸ Full details can be found in DCLG's technical report on IMD (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/6320/1870718.pdf)

¹⁹ The IMD rank has been analysed according by assigning the 32,482 LSOAs in England into quartiles based on their IMD rank, from the most deprived 25% to the least deprived 25%.

	Quartile 2: (Ranking 8121 - 16241)	417	156	37.4%
	Quartile 3: (Ranking 16242 - 24362)	340	146	42.9%
	Quartile 4: Least Deprived 25% (Ranking 24363 - 32482)	477	203	42.6%
£5 unconditional	Quartile 1: Most Deprived 25% (Ranking 1 - 8,120)	421	175	41.6%
	Quartile 2: (Ranking 8121 - 16241)	415	188	45.3%
	Quartile 3: (Ranking 16242 - 24362)	343	174	50.7%
	Quartile 4: Least Deprived 25% (Ranking 24363 - 32482)	499	251	50.3%
£5 conditional	Quartile 1: Most Deprived 25% (Ranking 1 - 8,120)	409	130	31.8%
	Quartile 2: (Ranking 8121 - 16241)	405	178	44.0%
	Quartile 3: (Ranking 16242 - 24362)	372	178	47.8%
	Quartile 4: Least Deprived 25% (Ranking 24363 - 32482)	488	234	48.0%
Total		6722	2734	40.7%

Source: Ipsos MORI.

Base: All young people responding to Mailings 1-3.

3.2.9 Predicting response rates

Following on from the analysis of observed response rates presented earlier in this chapter, further statistical analysis of response rates was also conducted. As before, this analysis was divided across an analysis of responses to the initial mailings, and to the additional mailing. The intention was to establish the main predictors of response/non-response were during the trial study. This then enables a prediction of response rates that would have been achieved at a population level and which can feed into a predictive model of response rates at a local authority level.

Initial incentive condition

A logistic regression model was used to determine the main factors influencing response up to and including the first three mailings. Results are reported at the 95% confidence interval²⁰.

The respondent's gender and the incentive type were both large factors, though other geographical factors²¹ were also used in the model. The estimated response rates shown below are based on the logistic regression model and estimate the response that would have been obtained if one incentive had been used throughout the whole sample (all 6722 records), with three mailings. Figure 3.1 displays estimates of response rates for each of the four groups, broken down by gender. Table 3.13 illustrates the overall estimated response rate for each incentive, along with the range within which the true value could fall.

²⁰ When reporting a statistical estimation, a confidence interval is used to express the degree of uncertainty associated with the estimation. With a 95% confidence interval, it would be expected that if a study was repeated 100 times using the same sampling and fieldwork methodology, then in 95 of those studies the "true" value (which would have been obtained if the whole population had been interviewed) would fall within a specified range. For example, with a sample size of 1,000 where 30% of respondents give a particular answer, the chances are that 95 times out of 100, that the "true" value will fall within ± 3 percentage points of the survey result (i.e. between 27% and 33%).

²¹ The other variables were: ACORN category (generated by segmenting areas using income, education and lifestyle data), IMD, proportion, proportion of output area in occupation class 1 or 2 (managers, directors and senior officials; and professional occupations), proportion in output area of ethnic group White British, and proportion born in the UK excluding England.

Figure 3.1 – Predictive margins of initial incentive by gender

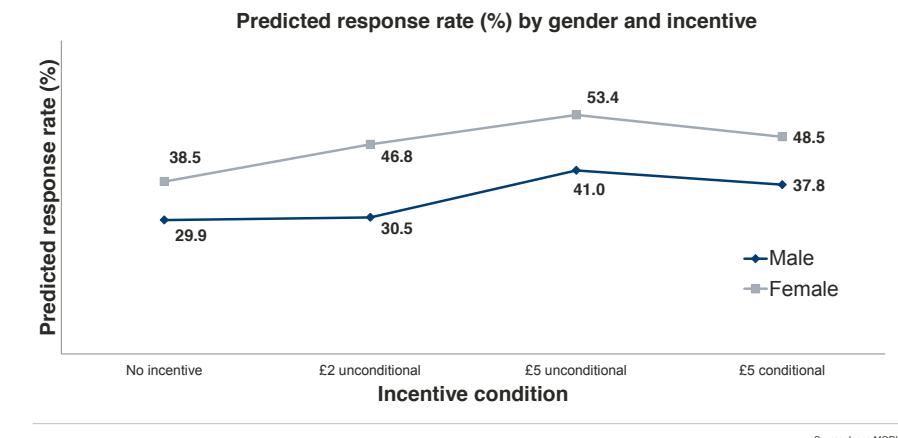


Table 3.13 – Estimated response rates

	Estimated response rate	Range
No incentive	34.1%	(31.9 to 36.4)
£2 unconditional	38.5%	(36.2 to 40.7)
£5 unconditional	47.1%	(44.7 to 49.4)
£5 conditional	43.0%	(40.7 to 45.4)

Source: Ipsos MORI.

Base: All those responding to mailings 1-3.

As with the observed response rates, the predicted response rate for girls is higher than that for boys. In fact, for each of the incentive categories girls' response rates are several percentage points higher than boys'. For the purpose of the analysis of the overall response rate the most important differences are that the response rates vary among the different incentive groups, with the £5 unconditional incentive predicted to yield the highest response rate, and the no incentive group the lowest.

Additional reminder

As described in Chapter 2, the additional reminder, with one of three new incentive conditions, was issued to those who had not responded to any of the first three mailings. A second logistic regression model was used to estimate the probability of response to the second incentive. The sample size was reasonably large (3,923), but the small number of responses received (220) meant a reasonably simple model had to be used. The explanatory variables for this model consisted of variables for both first and second incentive and a variable for the respondent's gender. Geographical variables were not included. The fourth mailout would yield only a small

number of additional cases, but the higher incentives would achieve the highest responses, as can be seen in Table 3.14.

Table 3.14 – Estimated response rates to additional reminder

	Estimated response rate	Range
None	3.8%	(2.8 to 4.9)
£5 conditional incentive	5.6%	(4.3 to 6.8)
£10 conditional incentive	7.4%	(6.0 to 8.8)

Source: Ipsos MORI.

Base: All those responding to additional reminder.

Extrapolation to the population

Based on the results of the regression modelling described above, a simple extrapolation to the population, i.e. an estimate of the likely response rates achieved if the whole population had been sampled, can be obtained by using three parameters, as described in Table 3.15.

Table 3.15 – Parameters and estimates used

	Estimates used
Parameter A: Proportion opting out	Assumed to be 0.5%
Parameter B: Initial response rate	Taken from Table 3.12
Parameter C: Secondary response rate	Taken from Table 3.13

Source: Ipsos MORI.

An extrapolation to the population gives the following model. The overall proportion of people who respond equals the proportion who respond to the first incentive, plus the proportion who respond to the second.

Point estimates for the best- and worst-case strategies (£5 unconditional incentive followed by £10 conditional incentive; and no incentive at all) are:

Best-case strategy: $0.471 + (1 - 0.471 - 0.005)*0.074 = 51.0\%$ overall

Worst-case strategy: $0.341 + (1 - 0.341 - 0.005)*0.038 = 36.6\%$ overall

Assumptions

In order to conduct this modelling, it was necessary to make a number of assumptions. It was assumed that the trial sample is representative of the main sample. If this is not true then the individual estimates of the best and

worst response rate will be slightly biased, but the difference between best and worst should still be reliable.

Note also this analysis assumes the classification of the incentive for **additional reminder**, and of response to the correct mailing is correct. There might be a few small errors in classifying which mailing a survey was received in response to.

3.2.10 Local authority response rate modelling

Based on the predictive modelling of response rates described above, it is also possible to predict response rates at a local authority level, even for local authorities not sampled as part of the trial study, to aid with the planning for the possible main stage. As previously discussed, the initial analysis and modelling illustrated that response rates varied by gender and incentive type. Response rate was also found to vary by ACORN²² category. Using the findings from this analysis it was possible to fit a logistic regression using responses from the first three mailings as the binary outcome variable, and explanatory variables consisting of: Region²³, ACORN category and an incentive/gender interaction. This therefore allowed for projected response rates (by gender and incentive type) to be calculated for every ACORN category in the population. It was then possible to calculate a projected response rate for each local authority²⁴ based on an averaging of the response rates across its ACORN categories.

Using these projected response rates, it is possible to calculate the starting sample needed to achieve any given number of responses in any local authority. Target sample sizes for each local authority have been set at the levels necessary to be able to achieve a +/-3 percentage point margin of error at the 95% Confidence Interval (where the local authority is sufficiently large).

The calculations that this model is based on make a number of assumptions that it is important to caveat here. First of all, it is assumed that for any given incentive/gender combination the response rate can be adequately modelled by the two variables: i. ACORN category and ii. Government Office Region. The inclusion of additional variables would have been possible, but would have provided additional difficulties when projecting from the sampled local authorities to the non-sampled local authorities.

²² ACORN (<http://acorn.caci.co.uk/>) is a geo-demographic segmentation that combines a wide range of data sources to classify postcodes into 6 categories, 18 groups and 62 types.

²³ To mirror the process followed for sampling, the region variable consisted of Government Office Region, with Yorkshire and the Humber combined into the North East.

²⁴ Due to their small size, predicted response rates were not calculated for either the City of London or the Isles of Scilly. It is anticipated that during the main stage young people from these LAs would be grouped with those from Hackney and Cornwall respectively.

In addition, while all estimates of necessary starting samples at a local authority level have been adjusted for ineligible addresses, the figures do not take into account either modelling or estimation error. These issues require inclusion of a design effect. Design effects occur when the sample used is known to be not fully representative of the population being studied (as a result of clustered sampling and/or post-survey data weighting).

The design effect variable is the ratio of the standard error seen in the sample collected and the standard error expected in the overall population of interest. This is then multiplied with the data and acts as a scalar; impacting on the effective size of the sample collected.

For the purposes of calculating the total effective sample sizes²⁵, a design effect of 1.05 has been assumed. This assumption is based on an analysis of the likely design effect as part of the trial study.

The model itself is provided as an appendix to this report (Appendix F), and a summary of the key findings from the model is presented below.

Table 3.16 – Summary of local authority response rate modelling

	Total starting sample size	Total responses	Total effective sample size ²⁶	LAs achieving enough responses for 3% CI
No incentive	371,730	117,247	111,664	73
£2 unconditional	342,483	118,857	113,197	77
£5 unconditional	283,812	123,576	117,692	129
£5 conditional	308,4122	122,751	116,906	118

Source: Ipsos MORI.

As Table 3.16 illustrates, the £5 unconditional incentive strategy results in the highest number of local authorities (129) achieving sufficient responses for a 3% confidence interval. However, the £5 conditional incentive is predicted to be successful in 118 local authorities.

²⁵ The design effect expresses the statistical cost of the design of the sample, and any post-fieldwork adjustments we make to the sample (i.e. through weighting). For example, sample designs that would introduce design effects include using a clustered sample (as with a face-to-face survey), disproportionately stratifying a sample (i.e. boosting a particular group, and then weighting the achieved sample to reflect the true population profile), and using non-response weights.

²⁶ In calculating the number of 'effective' responses we have attempted to account for the likely impact of weighting schemes. For the purposes of this modelling, the Design Effect has been assumed to be 1.05.

The implications of this modelling in relation to determining sample sizes for the main stage of the survey and decisions related to this are discussed in Chapter 7.

4 Analysis of item response and response error

This chapter considers responses to individual questions and any errors in the way respondents completed the survey in order to understand how the questionnaire may be improved.

4.1 Item level response

As well as analysing response rates at a unit level, it is also necessary to examine item level response, i.e. the proportion of the eligible respondents (those who have returned a completed survey) who answered a given question. In addition, we have also conducted an analysis of the incidence of incorrect responses amongst the completed postal surveys²⁷ (i.e. multi-coding at a single-code question). Such analysis helps assess the completeness of the data gained, as well as helping to identify any issues with questionnaire length, comprehension of questions/completion instructions/routing, and also possibly sensitivity.

Postal survey data often includes a higher degree of completion error than online surveys, due to the inability to force any routing, which instead relies on respondent comprehension and following of said routing. Two of the most common errors, which are applicable to the *What About YOUTH?* questionnaire are:

- multi-coding at single-code questions; and
- routing instructions being overlooked/misinterpreted.

Standard processing would be to deal with such responses by clearing the answers and forcing the respondent into ‘not stated’. However, for the purpose of the analysis of response to this questionnaire ‘incorrect’ responses were retained.

This section discusses overall item response levels, error levels, routing non-compliance. It lists the questions where this was most prevalent.

²⁷ Due to the ability to enforce routing, and restrict answers, incorrect completion of this nature was not possible on the online survey.

4.2 Item level response rates

Overall, item non-response does not appear to cause significant issues in the case of this survey. The average level of item non-response²⁸ observed in this survey was 1.7% across non-filtered questions; this compares favourably with other studies, for example for the MCS Age 11 Survey, the average percentage of missing data across 111 non-filtered questions was 2.7%. The standard error for unanswered questions was used to highlight outlying questions. There was a low level of variance within the data. Some question groupings in particular do show consistently higher than average levels of non-response; and these are discussed below.

- **Questions 2.1 – 2.3 - Overall, in your opinion, would you say that what you usually eat at home, at school and out with friends is...**

The incidence of non-response for this bank of questions increased progressively, (0.9%, 2.7% and 3.4% respectively). This may indicate confusion with the layout of this question. It is, however, worth noting that Q7.1-7.3, which had a very similar layout (requiring one answer to be selected per column), displayed a lower, and reducing, level of non-response. This may be due to respondents becoming familiar with the question layout.

- **Questions 34 & 35 - Have you ever been offered any drugs other than Cannabis? & Have you ever tried any drugs other than Cannabis?**

The level of non-response at both of these questions was 2.6% Although this response level may indicate concerns about anonymity by respondents, the data show that of the 76 who did not respond to question 34, 64 had previously answered 'No' to question 30 – *Have you ever tried cannabis?* – this may suggest that these non-responses result from issues with comprehension; the word cannabis is included in both questions, so respondents possibly assumed, erroneously, that the question was not relevant to them, and therefore failed to answer. This pattern was also evident at question 35. Here, 63 of the 77 non-responders answered 'No' at question 30.

- **Questions 39.1-39.4 - Please read the following statements about drugs and say if you agree or disagree...**

This sequence of statements about drug use and drug users consistently had a relatively high level of non-response compared with other questions on the survey; ranging from 3.3% to 3.6%. As with the apparent relationship between question 30 response and

²⁸ The % of respondents who failed to answer a given question, either by leaving it blank on the postal survey, or clicking through the online survey without leaving a response.

non-response at questions 34 and 35 outlined above, there is a high proportion of non-response from those who have answered 'No' to question 30, and again may indicate errors in comprehension of routing.

- Questions 46.1 - 46.8 - *How often have you been bullied in the past couple of months in the ways listed below?*

There was a higher level of non-response from this sequence of questions ranging from 2.1% at Q46.1 to 3.5% at Q46.8. As illustrated in Table 4.1, non-response increased steadily over the sequence of questions. Given this sequence includes eight statements, with five possible answer codes for each, this may indicate some level of fatigue.

Table 4.1 – Non-response at question 46

Non-response Rate (%)	
Question 46_1	2.1%
Question 46_2	2.7%
Question 46_3	3.0%
Question 46_4	2.8%
Question 46_5	3.0%
Question 46_6	3.0%
Question 46_7	3.2%
Question 46_8	3.5%

Source: Ipsos MORI

Base: All responses.

-
- Question 60 - *Were you born in the UK?*

In comparison to other questions in the survey, a high level of non-response was evident here (3.5%). Given the straightforward nature of the question, this level of non-response would not be expected. Therefore, it is likely that this was driven by other factors. Possible factors include:

- Question positioning – question 60 is positioned to the side of question 59 on the paper questionnaire, which is out of sync with the vertical progression of the rest of the questions in this section. Further weight is added to this by the fact that this question had a 100% response rate on the online survey.

4.3 Item level response error

As described in Chapter 2, data cleaning and editing was conducted in a manner which allowed for analysis of error in completion of the survey.

Overall, a very low level of error in answering questions was observed. The average number of incorrect answers by respondents per question was less than one percent (0.4%) indicating that overall respondents did not experience any difficulty in following the instructions for completing the survey.

Questions where an unusually high level of error was observed were isolated for further analysis²⁹, and are discussed below. Where possible, response error has been analysed by gender.

4.3.1 Multiple-response error

- **Question 2.1 – 2.3 - Overall, in your opinion, would you say that what you usually eat at home, at school and out with friends is...**

The average error for this question grouping was 1.8%. This varied somewhat by gender, with an average error rate of 1.3% for boys compared with girls 2.2%. As discussed earlier in this chapter, this set of three questions also displayed an above average level of non-response. It is possible that the layout of these questions, with answers required across the columns, caused some difficulty for respondents. Questions 7.1 - 7.3, with a very similar layout, also had an above average rate of completion error.

- **Question 13 - Over the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day?**

This question required a numerical response, chosen from a scale. The overall error rate for this question was 1.6%, with no significant variation by gender.

- **Question 45 - On a scale [from 0-10], overall, how anxious did you feel yesterday?**

The observed rate of completion error at this question was out of sync with the previous three questions, which are the other ONS subjective wellbeing questions (1.8% compared to an average of 0.5% for the preceding three questions). It is possible that the level of completion error seen here was related to the switch between 0-10 being an incrementally positive scale (i.e. 10 indicating ‘completely satisfied’, ‘completely worthwhile’, and ‘completely happy’) for the preceding

²⁹ This was done by taking the standard deviation of this average as a guideline and taking questions where the level of error fell more than two standard deviations from the average.

questions, to 0-10 being an incrementally negative scale for this question (i.e. 10 indicating 'completely anxious').

- **Question 62 - How would you describe your ethnic origin?**

The level of error that was observed for this question, although higher than the questionnaire average (1.7%) is not troubling for a question of this nature. Questions such as these generate multiple responses, on paper-based self-completion surveys, despite question instruction, due to the complex nature of ethnicity. For example, a respondent of mixed ethnic background may well select both 'White British' and 'Black Caribbean' rather than the single 'Mixed – White and Black Caribbean'. Therefore, for ethnicity it is normal to apply a logical data editing protocol to correct for this error as much as possible.

4.3.2 Routing error

The questionnaire contained a number of filtered questions, i.e. questions that respondents were asked to answer or skip based on their answers to previous questions. In the online survey, it was possible to route respondents automatically through the survey, but on the paper questionnaire, this relied upon respondent comprehension of, and adhering to, routing instructions. While every effort was taken during the development of the questionnaire to ensure the clarity of all routing instructions, some routing error was still encountered. Table 4.2 presents the incidence of routing error for all questions that were not to be answered by all.

Table 4.2 – Incidence of routing error

	Errors (n)
Question 18	16
Question 23	6
Question 24	0
Question 25	0
Question 31	4
Question 32	0
Question 33	0
Question 36	10
Question 67	0
Question 68	5
Question 69	47

Source: Ipsos MORI.

Base: All respondents.

In total 11 questions involved routing instructions. Analysis of erroneous responses shows that very few respondents failed to follow routing instructions set out, with only two questions showing higher incidences of error.

The first of these was question 18, which asked for the age of the respondent when they first smoked; those answering 'I have never smoked', or who failed to give an answer, at question 17 should have ignored question 18. In reality, 16 respondents who did not report smoking at question 17 went on to give an age at question 18.

The second example is question 69, which asked if a long term illness, disability or medical condition affects the respondents school attendance; those answering 'No' at question 66 '*Do you have a long term illness, disability or medical condition...diagnosed by a doctor?*' should have skipped this question (along with Q67 and Q68). The final question in this sequence question generated a higher level of error than the previous two questions with the same routing instructions. This could have been caused in part by a misconception of their medical conditions. However, given that the vast majority of those who made this error answered 'No' to question 69, this may simply be the result of respondent fatigue towards the end of what is a relatively lengthy questionnaire.

4.3.3 Data processing errors

Several questions required respondents to enter a number in two-digit format. Due to the way this was captured during scanning, some difficulty in distinguishing between responses of '00' and blanks in the postal data was encountered. Therefore, after an analysis of a number of questionnaires, postal responses at questions 3, 4, 5 and 6 were edited as follows: (i) if a respondent appeared as '00' at all four questions, they were coded as 'not stated' at all four questions, and (ii) if they gave a response that was not '00' at one or more of these questions, the '00' was treated as such. As a result of this editing, it is likely that the 'Not Stated' figure at this question is still over stated to a degree.

4.4 Comparison of key prevalence questions

Responses to the key prevalence questions on smoking, drinking and drug use were compared with those from the Survey of Smoking, Drinking and Drug Use among Young People in England (SDD). Under-reporting of all of these risky behaviours was evident in the '*What About YOuth?*' survey. There are a number of possible reasons for this difference. In particular, the 'bystander effect' is a likely influencer of response here. This is potentially supported by the fact that respondents reporting that they had received help from a parent or guardian in completing the questionnaire were more

likely to report having never smoked, drank alcohol or tried cannabis. SDD is conducted in-school and therefore the ‘bystander effect’ may play less of a role there. Studies³⁰ have shown that the involvement or presence of parents during the interviews with adolescent respondents “was associated with lower estimates of alcohol use, marijuana use, and ever using other illicit drugs among the adolescent respondents”³¹.

While possible under-reporting of indicators does raise issues for comparability of findings with similar studies, this effect is likely to be the same between waves of the survey. Therefore, this does not necessarily reduce the ability of this survey to detect change over time.

³⁰ Response Effects Due to Bystander Presence in CASI and Paper-and-Pencil Surveys of Drug Use and Alcohol Use, *Journal of Substance Use & Misuse*, 35(6-8), 845-867, Aquilino, W.S., Wright, D.L., and Supple, A.J. (2000)

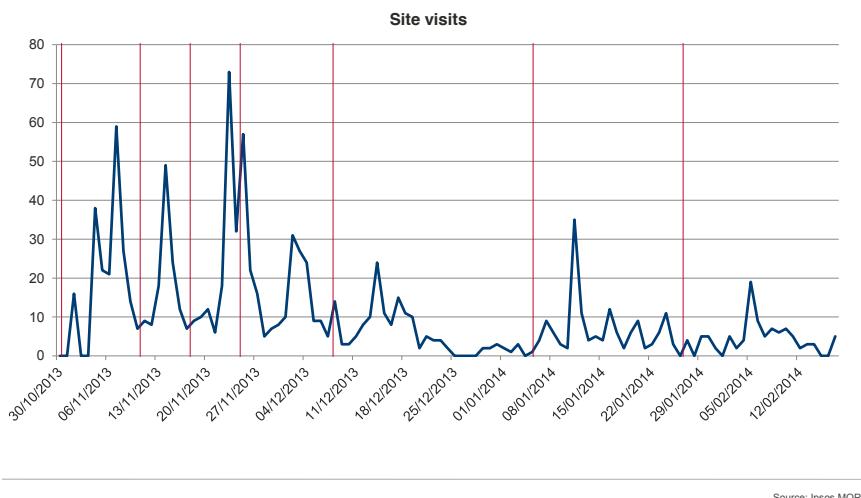
³¹ *Ibid.*, p.862

5 Study website web analytics

The study website³² was created as part of the survey promotion process for the study. Participants, and their parents, were directed to the website as a source of further information on the survey as part of initial communications. The paper questionnaire also included a QR code which allowed respondents to access the study website via smartphone and/or tablet PCs.

Figure 5.1 illustrates the pattern of site visits throughout fieldwork. Spikes in site visits are evident following the arrival of each of the survey mailings (mailing dates are indicated on the chart by a red vertical line).

Figure 5.1 – Visits to study website



Source: Ipsos MORI

On average, visitors spent 2.08 minutes on the site, and viewed an average of 2.06 pages per visit. A quarter of the overall visits were from returning visitors.

Table 5.1 illustrates the frequency with which each page of the website was viewed.

³² www.whataboutyouth.com

Table 5.1 – Website visits by page

	Number
Landing page visits	1115
Unique visits	847
Total page views	2294
Homepage	1295
About the study	272
Young person FAQs	250
Parent FAQs	173
Who we are	184
Advice about your health and lifestyle	120

Source: Ipsos MORI.

Base: All visits to study website during fieldwork period.

6 Lessons learned

This chapter provides a summary of the lessons learned throughout the course of the trial study.

6.1 Opt-outs

During fieldwork a number of emails and telephone calls were received from a small number of young people and/or their parent(s)/guardian(s) asking to opt out of the study. It should be noted that it was not a requirement for opting out that a reason be given. However, common reasons cited by young people were related to school workloads and exam revision. Common reasons given by parent(s)/guardian(s) included health concerns, or that their child's special or educational needs meant they were not able to participate in the survey.

The overall proportion of opt-outs represented just 0.5% of the overall sample, and can therefore be considered to pose only a minor risk to the likelihood of achieving the desired number of responses. This issue does not, therefore, require any significant reconsideration ahead of a potential main stage.

6.2 Respondent queries and feedback

In addition to contact for the purpose of opting out, several emails and calls were received offering feedback on the study, or enquiries for further information.

Contact was most often made to check if completed questionnaires had been received. Some of these queries were from respondents in the conditional incentive group who wanted to check that they would receive their incentive. However, some queries were from respondents in the other incentive groups, suggesting that these young people were fully engaged with the objectives of the survey.

A small number of contacts were received from participants in the group receiving no incentive who believed they would receive incentives having been made aware of the possibility by classmates and friends. Given the need to allocate proportions of the same clusters to different incentive groups, this issue was inherent in the design. However, the risk of this causing any significant issues was minimised by ensuring selected young people in the same household or residential school were allocated to the same test group. As one incentive condition will be used across the sample for the main stage, this will not present an ongoing issue.

If the main stage goes ahead, it will be possible to make use of the study website to provide information on the nature of incentives and timings for the dispatch of these, if applicable.

The survey also included one open-ended question, which invited respondents to provide information on '*anything concerning your health and wellbeing that you would like to mention but isn't covered in the rest of the survey?*'

All responses to this question were coded to enable analysis³³. A number of respondents used this opportunity to suggest other topics that should be covered in the study. The most commonly mentioned was a need for greater focus on mental health issues, such as anxiety, depression and self-harming (as illustrated in Table 6.1). Approaching a third of those who gave a response (31%) mentioned mental health issues. This represents 4% of the overall sample. Sex and sexual health concerns were mentioned by 3% of those giving a response (less than 0.5% of the overall sample). A very small number of respondents mentioned the inclusion of questions on sexual health.

Table 6.1 – Mentions of mental health issues

	Number of mentions	Mentions as a % of total responses	Mentions as a % of those responding to Q70
Depression (including bipolar)	40	1%	10%
Stress/pressure	32	1%	8%
Anxiety problems/panic attacks	31	1%	8%
Self-harm	20	1%	5%
Lack of confidence/Self-esteem issues	17	1%	4%
General mental health	13	*34	3%

³³ Seven in ten (70%) of respondents left this question blank, while a further 17% left an answer that could be coded as 'No/nothing'.

³⁴ * = less than 0.5%

Eating disorders/problems	10	*	3%
Anger issues	7	*	2%
Obsessive compulsive disorder	5	*	1%

Source: Ipsos MORI.

Base: All respondents (2954)

All respondents responding to Question 70 (396)

In addition, many comments were suggestions of how health provision could be changed to better support young people who are seeking help with various issues. Other comments related to the pressures of being a child carer, health issues such as diabetes, acne/spots, special educational needs and pollution.

The wide variety of responses here, which the broad scope of the question invited, will be useful in helping refine the questionnaire ahead of a potential main stage. However, in order to provide more useful information, it may be sensible to amend the wording of the open-ended question included. A question designed to gather specific information, for example regarding other services required for young people at a local level, may prove more useful, especially given the volume of responses to be obtained.

In addition, the inclusion of further sign-posting of sources for further information and/or support in relation to the topics covered on the questionnaire should be considered.

Finally, several questions provided spaces for 'other' answers to be included. These were included in questions on who may have helped filling in the questionnaire, health conditions, ethnicity and religion. There was generally a low incidence of completion for these 'other' answers, which were not coded, but were reviewed to identify any patterns, and therefore inform suggestions for questionnaire refinement. However, there were no significant patterns in these 'other' responses, especially where questions were sourced from other surveys, for example ONS UK Census questions.

6.3 Disclosure of harm

During the process of coding responses to the open question, four responses were flagged to the Ipsos MORI research team as requiring further attention and follow-up, due to possible disclosure of harm by the young person responding. Appropriate follow-up was decided upon following consultation with HSCIC and DH, and advice sought from Children's Services teams at relevant local authorities.

6.4 Other lessons learned

6.4.1 Ethical considerations

As discussed in Chapter 2, an ethical review of the trial study was conducted by the NCB Research Ethics Board as part of the development and set-up work. The board made a number of recommendations that were taken into account for the trial study. In addition, a number of considerations for the main stage were also made at this stage, and these are detailed below. It will be necessary to ensure that these are taken into consideration for the main stage.

Facilitating participation

A key concern for the ethics board is whether the methodology presents any barriers to any specific groups of participants (for example, due to language or literacy issues). We will need to outline the arrangements which will be in place to aid participation of children with Special Educational Needs (SEN).

Disclosure of harm

As mentioned earlier in this chapter, it will be necessary to demonstrate that there is a clear protocol for handling disclosure of harm. Further consultation with DH, HSCIC and NCB will be necessary prior to the first full survey; however, the process has been developed during fieldwork. Our protocol closely follows the approach used on other large surveys³⁵ currently run by Ipsos MORI that are similar to “*What about YOuth?*”

- Encouraging young people to seek help/support/advice by directing them to parent(s)/guardian(s), teachers, GPs, and Childline, for instance.
- Procedure for dealing with immediate risk of harm, for example by contacting the emergency services.
- Procedure for dealing with less serious and less immediate risk of harm, with a clear chain of escalation, involving the project team, an internal panel of experts, and seeking advice from local authorities (on an anonymised basis).
- Less clear cut cases of potentially serious (but non-emergency) harm/risk of harm would be escalated to the project team, who would possibly be able to decide on a course of action.

Promoting the survey

³⁵ Millennium Cohort Study, a longitudinal study of children born in 2000/01 and Flying Start, an early intervention programme by the Welsh Government for families with children under the age of 4.

The board also suggested that the survey should be promoted among schools and local authorities (and potentially other agencies).

6.4.2 Data Processing

As noted, several questions required respondents to enter a number in two-digit format. Due to the way this was captured during scanning, some difficulty in distinguishing between responses of '00' and blanks in the postal data was encountered. This suggests a need to refine the process used for recording 'not stated' responses. It may also be worth considering changes to these questions to avoid this problem.

7 Conclusion and recommendations

This chapter discusses the overall conclusions, in terms of the success of the trial study, the outcomes of the incentive experiment, and the likely ability of a main survey to deliver the sample sizes required at a local authority level. Based on these conclusions, recommendations are made below as to the approaches that should be considered in any decision in how to proceed with a main stage of the survey.

7.1 Conclusions

7.1.1 Response rates – overall conclusions

Overall, the trial study can be considered successful, in that it has shown that it is possible, using the sample frame and methodology as discussed earlier in this report, to deliver high response rates with the desired audience (15 year olds), regardless of the incentive type used.

While a number of factors were determined to be influential in determining likelihood to respond, one of the most important differences was seen by gender, with girls much more likely to respond than boys, to all incentives. This has important implications for the sample design of the main survey and is discussed in the following section.

7.1.2 Response rates – impact of incentives

The differential impact of the incentives was quite clear cut, with high value incentives having a greater impact on response rates than low value incentives (or no incentive at all), and unconditional incentives (sent with the initial questionnaire mailing) achieving a higher response rate than conditional incentives, as was expected at the outset of the study.

The four incentive strategies tested also had a differential impact based on the demographic characteristics of respondents. This is important to take into account when considering the possible incentive strategy for the main stage, as it has implications for analysis and weighting. The implication for weighting is that the greater the variation, the larger the effect of non-response weighting will be. Response to the different incentives varied by gender, with the £2 unconditional incentive having the largest difference between males and females, whilst using no incentive produced the smallest difference. However, given the lower overall response rate, this is not the best option.

Response to different incentives also differed by level of deprivation (based on IMD). Lower levels of deprivation produced higher likelihoods to respond, to all incentives. The £5 conditional incentive produced the

highest range of response rates here, with the £5 unconditional incentive producing the lowest range.

Given the differential response rates, one consideration would be to use different incentive strategies for gender and/or deprivation. However, this has been discarded as an option for the '*What About YOuth?*' study, due to the high proportions of young people at a local level being sampled. This would lead to the possibility that incentives are discussed and therefore possibly give rise to complaints from respondents. In addition this may have a negative impact in terms of damaging the credibility of the study, and dissuading people from participating.

7.2 Recommendations

7.2.1 Recommendations for main stage methodology

Incentive Strategy

Based on the results of the trial study, the local authority level response rate modelling presented earlier in this report, and the conclusions discussed above, we have presented three suggested alternative incentive approaches for carrying out a main stage of the '*What About YOuth?*' survey.

Option 1: £2 unconditional incentive

Option 2: £5 unconditional incentive

Option 3: £5 conditional incentive

The option of using no incentive at all, which was tested in the trial study, has been disregarded as it is predicted to achieve the target effective sample size in fewer than half of local authorities.

Based on analysis of the predicted response rates at a local authority level, Table 7.1 illustrates for each option the total starting sample that would be required, the predicted number of responses achieved, the total effective sample size, and the total number of local authorities reaching their target sample size.

Table 7.1 – Summary of options

	Option 1: £2 unconditional	Option 2: £5 unconditional	Option 3: £5 conditional
Starting sample	342,483	283,812	30,8412
Total responses	118,857	123,576	122,751
Total effective sample size	113,197	117,692	116,906
LAs achieving target effective sample size	77	129	118

Source: Ipsos MORI

In choosing the most appropriate approach for the main survey, it is necessary to consider both the number of local authorities that would be able to achieve their target effective sample size using a given option, and the relative cost of each option.

Basing choices purely on the overall effectiveness, Option 2 above would deliver the target effective sample size for the greatest number of local authorities. However, comparing the cost effectiveness³⁶ of Options 2 and 3 shows that the cost per LA for Option 2 is 1.38 times the cost per LA for Option 3, i.e. Option 2 is 38% more expensive.

Full costs for each of these options have been provided to HSCIC and DH separately. Cost effectiveness has not been calculated for Option 1, as the total cost of this option would be greater than that for Option 3, while delivering the target effective sample size in 35% fewer local authorities.

Fieldwork strategy

For all three incentive options, the recommendation in terms of fieldwork strategy is the same, and is as follows:

- opt-out approach; and
- advance mailing to parents and young people; Three full questionnaire mailings (mailings 1, 2 and 3) and a postcard reminder between mailings 1 and 2.

³⁶ Examined by calculating the cost per LA achieving its target sample size, and expressing the costs of one option as a ratio of the other.

It should be noted that none of the above options include an additional mailing. Whilst the local authority response rate modelling is based on the assumption that only **three mailings** would be employed, it is possible to estimate the impact of an additional mailing. Assuming that the additional mailing would include no further incentive/no further promised incentive, the estimated response rate to this additional mailing is 3%, i.e. 3% of non-responders to **mailings 1-3** would respond to **additional reminder**.

Sampling

Assuming that the sample frame for the main stage of the survey will be MIDAS, as used for the trial study, and given the findings from the modelling exercise undertaken, we would make the following recommendations regarding drawing the sample for the main stage:

- 1** in local authorities where it is possible³⁷, the starting sample should be varied by gender, to account for the differential level of response expected based on gender;
- 2** in local authorities with sufficient numbers of 15 year olds a sample proportional to that local authority would be drawn to ensure the target range of ±3% at the 95% confidence interval is achievable; and
- 3** In all other local authorities a census is drawn, i.e. every 15 year old in the local authority would be invited to take part in the survey.

This will mean that when the data are weighted for local authority level analysis, two weighting schemes for gender will be required³⁸.

- 1** design weighting to account for the differential probability of selection for males and females; and
- 2** non-response weighting to account for the differential levels of response amongst males and females.

For the purpose of the analysis included in this report, and consideration of main stage methodology, it has been assumed that overall the design effect would be 1.05, and this has been used in estimating the effective sample sizes included in Table 7.1.

Due to the extremely large sample size being achieved at an overall level, national level analysis would most likely not encounter any issues due to the effect of differential sampling strategies at a local authority level.

³⁷ i.e. all local authorities where a census is not being drawn.

³⁸ N.B. Additional weighting schemes may also be required.

Assumptions

The recommendations in this chapter are based on a number of important assumptions, outlined below.

- all projections of response rates have been based on the assumption that MIDAS will be used as the sample frame for the main survey³⁹;
- projections for initial population sizes at a local authority level are based on the data taken from the 2011 Census⁴⁰;
- the assumptions made as part of the response rate modelling are assumed to be correct⁴¹. It is possible that different response rates would be experienced in reality; and
- calculations of the target effective sample size has been based on the population (as outlined above) and also the following:
 - that the desire is to achieve a 3% Confidence Interval⁴² within each local authority; and
 - the design effect being estimated at 1.05.

Implications for detecting change over time

The main consideration in determining the options for a main stage survey have been based on ensuring that as many local authorities as possible achieve their target effective sample size for a 3% Confidence Interval. However, it is also important to consider the ability the survey would have to detect change over time. Achieving a larger sample size is preferable for detecting change over time – while Option 2 would be the best option, Option 3 would be the most cost-effective option.

Table 7.2 below is based on a worked example for a local authority with a population of 2,000 15 year olds, where an effective sample size of 800 is achieved in two waves of the survey. The table illustrates the percentage change required between the two waves for a change to be considered statistically significant. For example if the proportion of 15 year olds saying they smoked decreased from 11% to 8% then this would be statistically significant.

³⁹ Therefore the percentage of addresses assumed to be ineligible is 2.8%. If MIDAS is not used as the sample frame, this proportion may vary, depending on the quality of the sample.

⁴⁰ Our target population has been defined as those aged 12 at the time of the 2011 Census, and therefore who will be aged 15 in 2014 at the time of the main survey.

⁴¹ Including, but not limited to, that it is possible to predict response based on the two variables gender and ACORN category, and therefore that two local authorities identical in these two regards would experience identical response rates to the survey.

⁴² At the 95% confidence level, and with a 50% survey finding.

This does not, however, take into account the power the survey would give to attribute change to any interventions, rather than natural variation in the population.

Table 7.2 – Confidence Intervals between waves

Survey Finding	Confidence Interval ⁴³ at 95% level of confidence
10%/90%	2.3
20%/80%	3.0
30%/70%	3.5
40%/60%	3.7
50%/50%	3.8

Source: Ipsos MORI.

7.2.2 Testing of face-to-face and telephone methods

In making recommendations for conducting the main stage of the survey, the possibility of including face-to-face interviews/reminders and/or telephone interviews/reminders as part of the fieldwork methodology has not been considered. This approach has been taken due to the fact that it was not possible to test the effectiveness of these approaches as part of the trial study, as discussed earlier.

However, should it be desired to evaluate the possible impact of these approaches, for purposes of including these as options for future iterations of the '*What About YOuth?*' survey, then it would be possible to conduct a further small scale trial. This could be done either using MIDAS or NPD as the sample frame, depending on the necessary permissions being granted.

Should any such trial prove to be successful, then future iterations of the '*What About YOuth?*' study may seek to include face-to-face interviews/reminders and/or telephone interviews/reminders as part of the fieldwork methodology. If the use of the MIDAS sample frame for this purpose is not possible, then the sample frame to be used for the survey would change between waves, to NPD. This would need careful consideration, but some of the implications of this are as follows:

- the non-coverage, i.e. the proportion of the eligible population that are not contained within the sample frame, for NPD is known to be around 7% due to the exclusion of pupils from independent schools;

⁴³ Please note that these confidence intervals assume a purely random sample.

- the level of non-contactable addresses on NPD may be higher than that experience from MIDAS in the trial study; and
- trend data may be affected by the change in sampling methodology.

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