

# **LIDNS**

# Low Income Diet and Nutrition Survey 2003-2005

# **Coding & Editing Instructions**

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# 1. Introduction

This document includes two sections:

- Details of the editing and coding to be applied to Computer Assisted Personal Interviewing (CAPI) questionnaires (administered by interviewers and nurses) and of the editing applied to self-completion booklets on the LIDNS.
- Information about the coding and editing of the dietary data from 24 hour recalls.

# 2 CAPI questionnaires and Self-Completion Questionnaires

This section details the coding and editing to be applied to Computer Assisted Personal Interviewing (CAPI) questionnaires (interviewer and nurse) and editing applied to self-completion booklets on the LIDNS.

# 2.1 Factsheet Definition for CAPI editing

A factsheet is provided to aid editing of the CAPI questionnaires. It contains household information and information for each individual session and nurse schedule. The majority of questions, which need to be coded, are printed on the FACTSHEET. Coding decisions should be recorded alongside the appropriate questions or at the end of the FACTSHEET, if the question has not been printed. All factsheets also contain a summary of the respondent's eating habits, which is used for coding dietary data.

The tables below show the variables that appear on the factsheet for editing.

# Interviewer-administered questionnaire

EthOth	Backcode into EthGrp	Ethnic Group
OthAct	Backcode into COthAct	Other type of sport or exercise
OthDrnA	Backcode DrnkTyp	Other type of alcoholic drink drunk
OthAmtA	Backcode DrnkTyp	Other amount of alcoholic drink drunk
OthDrnB	Backcode DrnkTyp	Any other type of alcoholic drink drunk
OthAmtB	Backcode DrnkTyp	Any other amount of alcoholic drink drunk
OthDrnC	Backcode DrnkTyp	Any other type of alcoholic drink drunk
OthAmtC	Backcode DrnkTyp	Any other amount of alcoholic drink drunk
OthFru	Backcode Frutyp 01-17	Other fruit eaten
OthVeg	Backcode Vegtyp01-23	Other vegetables eaten
OBreType	Backcode BreType	Other type of bread eaten
ORolType	Backcode RolType	Other type of rolls eaten
OChaType	Backcode ChaType	Other breads eaten
OChipFat	Backcode ChipFat	Other chips fried in
ORiceFry	Backcode RiceFry	Other rice fried in

NoHitCO	Backcode NoHitBc1-4	Other reason for not obtaining height	
		measurement	
NoWatCO	Backcode NowtBc	NowtBc Other reason for not obtaining weight measurement	
OHiNRel	Backcode to HiNRel	Other reason for unreliable height	
		measurement	
NsRefO	Backcode to NurseRef	Other reason why respondent refused nurse	
		contact	
DLAPdO	Backcode to DLAPd	Other period Disability Living Allowance	
		covers	
EducPdO	Backcode EducPd	Other period educational grant/bursary	
		covers	
ISPCPdO	Backcode ISPCPd	Other period that Income Support/Pension	
		Credit covers	
IntPdO	Backcode IntPd	Other period interest covers	
JSAPdO	Backcode JSAPd	Other period that Jobseeker's Allowance	
		covers	
OFrqEarn	Backcode FrqEarn	Other take-home pay period	
ORegPdO	Backcode ORegPd	Other period regular sources of income	
		covers	
OthBPdO	Backcode OthBPd	Other period any other benefit cover	
PPenPdO	Backcode PPenPd	Other period Private Pension covers	
SPenPdO	Backcode SPenPd	Other period State Retirement Pension	
		covers	
HBPdO	Backcode HBPd	Other period housing benefit of income covers	
CBenPdO	Backcode CBenPd	Other period that child benefit covers	
WTCPdO	Backcode WTCPd	Other period that Working Tax Credit covers	
CTCPdO	Backcode CTCPd	Other period that Child Tax Credit covers	
EPenPdO	Backcode EPenPd	Other period Employer's Pension covers	
IncapPdO	Backcode IncapPd	Other period Incapacity Benefit covers	
AttPdO	Backcode AttPd	Other period Attendance Allowance	
PartnPdO	Backcode PartnPd	Other period amount from former/absent	
		partner covers	
GTSPdO	Backcode GTSPd	Other period Government Training	
		scheme(s) covers	
RentPdO	Backcode RentPd	Other period rent covers	
EducRecO	Backcode EducRec	How do you receive money from the	
		educational grant/bursary?	
OLackC6	Backcode LackC6	Other things to spend an extra £10 week	
ChWhat	CchWha 01-06	Changes in current diet wanted	
ChHow	CchHow 01-03	What would help to make that change to diet	
ChWhyNo	CchWhy 01-04	Reasons for no change to diet wanted	

CChChWh	CchChW 01-06	Changes in child(ren)s current diet wanted	
CChChHow	Cchchh 01-03	Things to help make changes to child(ren)s	
		current diet	
CChChWNo	cchchw11-12	Reasons for no change to child(ren)s	
		current diet wanted	
HIEat	Chleat01-10	Definitions of healthy eating	
YEatImp	Cyeatl 01-04	Reasons why healthy eating is important	
YNotImp	Cynotl 01-02	Reasons why healthy eating is not important	

# Nurse-administered questionnaire

OthNBP	Backcoded to NattBPD1-3	Other reason for not obtaining blood
		pressure.
OthDifBP	Backcoded to DifBPC1-3	Other reason for difficulty obtaining blood
		pressure.
OthSam	Backcoded to Sensac 1-2	Other reason for not wanting blood sample
		results sent to the GP
OthBDif	Backcoded to SamDifC 1-4	Other problems with taking blood sample.
OthRefC	Backcoded to GPRefC 1-2	Other reasons for refusing to allow BP
		measurements to be sent to the GP
OthWH	Backcoded to WHPNABM1	Other reasons for not attempting waist-hip
		measurements
OthRefBS	Backcoded to RefBsc 1-4	Other reason for refusing blood sample.
OthNoBSM	Backcoded to NoBSc 1-2	Other reasons for not obtaining a blood
		sample.

# 2.2 Other Ethnic Groups

**EthOth** Other ethnic group. To be coded back to **EthGrp**.

# 1. White-British

Include English, Scottish, Welsh and Cornish.

# 2. Any other white background

*Include* Northern Irish, Cypriot, Gypsy/Romany, Former USSR, Baltic States, Former Yugoslavia, Other European, White South African, American, Australian, New Zealander, Mixed White

- 3. Mixed White and Black Caribbean
- 4. Mixed White and Black African
- 5. Mixed White and Asian

# 6. Any other mixed background

#### 7. Asian or Asian British - Indian

Include Punjabi

#### 8. Asian and Asian British - Pakistani

Include Kashmiri

# 9. Asian and Asian British - Bangladeshi

# 10. Any other Asian/Asian British background

*Include* East African Asian, Sri Lankan, Tamil, Sinhalese, Caribbean Asian, Nepalese, Mixed Asian (i.e. mixture of descriptions in the Asian section)

#### 11. Black of Black British - Caribbean

Include Caribbean and West Indian islands (and also Guyana).

Do not include Puerto Rican, Dominican and Cuban, which are Latin American

#### 12. Black of Black British - African

Include Nigerian, Somali, Kenyan, Black South African, Other Black African countries

#### 13. Any other Black/Black British background

Include Black American, Mixed Black

#### 14. Chinese

Include Hong Kong

#### 15. Any other

The following ethnic groups SHOULD NOT be coded back to the categories above but should remain as "other": Japanese, Vietnamese, Filipino, Malaysian, Aborigine, Afghani, Burmese, Fijian, Inuit, Maori, Native American Indian, Thai, Tongan, Samoan, Arab, Iranian, Israeli, Jewish, Kurdish, Latin American (Cuban, Puerto Rican, Dominican, Hispanic), South American (incl. Central American), Moroccan, Other North African, Iraqi, Lebanese, Yemeni, Other Middle Eastern, Mauritian, Seychellois, Maldivian, St Helena.

#### 2.3 Adult Physical Activity

OthAct Code 'Other' sports to COthACt. Do NOT backcode 'other' sports to

WhtAct.

Code 5 Any other type of dancing: Includes any answer mentioning 'dancing'

(i.e. sequence dancing, tap dancing etc.). Does not include Ice

dancing, see code 46 below

Code 7 Football/ rugby: Includes those participating in the sport as referees

and linesmen.

Code 10 Exercises (e.g. press-ups, sit ups): Includes any answer mentioning

'exercises' (i.e. back exercises, office exercises etc.) or 'working out'

If more than one sport is mentioned in the same OthAct variable, then just code the first sport mentioned.

Swimming	01	Netball/handball	54
Cycling	02	Orienteering	55
Workout/Exercise Bike/Weight training	03	Polo	56
Aerobics/Keep Fit/Gymnastics	04	Post natal exercise	57
Dancing	05	Power boat	58
Running/Jogging	06	Racketball	59
Football/Rugby	07	Rambling	60
Tennis/Badminton	08	Riding	61
Squash	09	Roller skating	62
Exercise (e.g. press-ups, sit-ups)	10	Rounders	63
Abseiling/ Paraseiling	11	Rowing (inc machine)	64
Adventure playground	12	Sailing (inc dingy)	65
Aquarobics	13	Scuba/subaqua diving	66
American football	14	Shooting	67
Archery	15	Skateboarding	68
Assault course	16	Skiing/dry slope skiing/snowboarding	69
Back packing	17	Skipping	70
Baseball/softball	18	Skirmishing (war games)	71
Basketball	19	Skittles	72
Battle re-enactment	20	Snooker	73
Bowls - indoor, outdoor, crown, green,	21	Snorkelling	74
Petanque			
Boxing	22	Sumo wrestling	75
Canal cruising (if responsible for working locks)	23	Surfing	76
Canoeing	24	Swing ball	77
Circuit training	25	Table tennis	78
Climbing	26	Tenpin bowling	79
Cricket	27	Territorial Army	80
Croquet	28	Toning table/bed	81
Curling	29	Trampolining	82
Darts	30	Volley ball	83
Diving	31	Walking on a jogging	84
		machine/treadmill	
Dog training	32	Water skiing	85
Drumming (in a group)	33	Weight lifting	86
Fell walking	34	Wind surfing	87

Fencing	35	Wrestling	88
Field athletics	36	Yoga	89
Fishing/ Fly fishing	37	Other light exercise (incl mini-	90
		trampoline, harness racing,	
		Alexander Technique)	
Fives	38	Other moderate exercise (incl tug of	91
		war)	
Golf	39	Other vigorous exercise (incl water-	92
		polo, football training, body building)	
Hang gliding/parachuting	41	Other - Don't know energy level (incl	98
		tehouk ball)	
Hiking	42	Irrelevant answer	99
Hitting punch sack	43		
Hockey	44		
Horse riding	45		
Ice skating/ Ice dancing	46		
Juggling	47		
Kabadi	48		
Kick boxing	49		
Lacrosse	50		
Marathon running	51		
Martial arts (Karate, Tai Chi etc.)	52		
Motor sports (Motor-cross, go-karting, jet-	53		
skiing)			

#### 2.4 Other Alcoholic Drinks

If a respondent had alcoholic drinks which were coded at **DrnkType** as "Other alcoholic drinks" (DrnkType = 7), this drink (the type and the amount) should be recoded back into one of the six drink categories noted below.

Questions for recording the *type* of other alcoholic drink are OthDrnA, OthDrnB and OthDrnC repeated for seven days of the week.

Questions for recording amounts of other alcoholic drinks are OthAmtA, OthAmtB and OthAmtC.

Exclude all low/non-alcoholic drinks. Home made drinks should be coded into the appropriate category.

#### Normal beer:

**Include**: Export, Heavy, Black & Tan, Barley Wine, Diabetic Beer, Home Brew Lager, Lager and Lime, Home Brew Beer, Gold Label, Pomagne, Stout, Scrumpy

**Exclude**: Ginger Beer. Non alcoholic lagers - Barbican, Kaliber, Bottles/cans of shandy. Beer with >6% alcohol by volume (code as 'strong'). Angostura Bitter (code as spirits)

# Strong beer/cider:

**Include**: Diamond White/Blush/Zest, K, Special Brew Lager, Tennents Super **Exclude**: Beer etc with less than 6% alcohol by volume (code as 'normal strength'). Angostura Bitter (code as spirits).

Added for archive: Diamond White is a cider but it is 8% alcohol by volume putting it in the same category as a 'strong beer'. (There is no separate category for 'strong cider'.)

# Spirits:

Include: Angostura Bitter, Cocktails, Egg Flip, Snowball, Bacardi, Bailey's, Pernod, Sloe Gin, Pimms, Bourbon, Whisky Mac, Schnapps, Liqueurs, Bluemoon, Vodka, Rum, Southern Comfort, Grappa, Tia Maria, Ouzo/Aniseed, Strega, Cherry Brandy, Arak, Irish Velvet, Brandy, 150 proof Moonshine, Gaelic Coffee, Advocaat, Tequila, Amagnac, Clan Dew, Campari, Malibu, Taboo, Pochene (Irish Moonshine), Jello shots/shooters, Vodka Jelly.

#### Sherry:

**Include**: Vermouth, Port, Cinzano, Dubonnet, Bianco, Rocardo, Noilly Prat, Stones Ginger Wine, Home made Sherry, Tonic wine, Sanatogen, Scotsmac and similar British wines fortified with spirits, Port and Lemon, Madeira.

#### Wine:

**Include**: Punch, Mead, Moussec, Concorde, Champagne, Babycham, Saki, Cherry B, Calypso Orange Perry, Home made wine, Thunder bird.

Exclude: Non alcoholic wines such as Eisberg

#### Alcopops/pre mixed alcoholic drinks:

Include: Bacardi Breezer, Metz, Smirnoff Ice, Archers Aqua, Baileys Glide, Red Square, Vodka Reef, Two Dogs, Alcola, Shotts, WKD ('Wicked'), Alcoholic Irn Bru, Thickhead, Cola Lips, Mrs Pucker's Alcoholic Lemonade, Woody's, any mention of 'alcoholic lemonade, cola, orangeade, cream soda' etc

#### **Backcoding amounts**

Amounts of other alcoholic drinks recorded verbatim at OthAmtA (OthAmtB, OthAmtC) should be recoded into the measurement units appropriate for this type of drink.

If the appropriate drinks category is *not already* coded, then information on the amount should be edited into that category's variables. If the respondent already mentioned that s/he had this type of drink on this day, then the amounts should be added together. For example, a respondent had wine and punch on Tuesday. Wine was coded 5 ("Wine") at DrnkType and punch was coded 7 ("Other alcoholic drinks"). The respondent had 2 glasses of wine and 1 glass of punch. You should recode punch back into wine, i.e. at WineNum change 2 (for two glasses) into 3.

After recoding "other" alcoholic drinks, edit DrnkType so that the code for "Other alcoholic drinks" is not chosen anymore. Details of coding decisions should be recorded on the FACTSHEET.

#### 2.5 Questions about food

#### Other fruit

OthFru Other fruit eaten in the last seven days. To be coded back FruType.

Note: nuts (e.g. cashews) are not fruit and, if mentioned, should be deleted from "Other fruit".

#### Other vegetables

OthVeg Other vegetable eaten in the last seven days. To be coded back to VegType.

*Note*: potatoes and baked beans are not included in this question. If the "other" vegetable is potato or baked beans, please edit these data as if no other vegetable was eaten (unless some other vegetable is mentioned at OthVeg as well).

Swede and turnip: Neeps are the name for Turnip in Scotland, so please code as 33. If there is any ambiguity over swede/turnip code - eg if an interviewer has typed swede and in brackets turnip, e.g. swede (turnip) - then please leave as "Other vegetables". Cabbage (code 11) includes all types, e.g red cabbage and Chinese cabbage.

- 1 Mixed vegetables (cooked)
- 2 Mixed vegetables (raw)
- 3 Ackee
- 4 Asparagus
- 5 Aubergine
- 6 Avocado
- 7 Beetroot
- 8 Broad beans
- 9 Broccoli
- 10 Brussels sprouts
- 11 Cabbage (all kinds)
- 12 Carrots
- 13 Cauliflower
- 14 Celery
- 15 Coleslaw
- 16 Courgettes

17	Cucumber
18	Green (runner) beans
19	Green salad, lettuce
20	Karella
21	Leeks
22	Mushrooms
23	Okra
24	Onion
25	Peas
26	Peppers (green, red, yellow, orange)
27	Spinach
28	Sweetcorn
29	Tomatoes
30	Other vegetables
31	No vegetables eaten in last 7 days
32	Swede
33	Turnip / Neeps
34	Parsnip
35	Mange tout

#### Other bread / other milk

**OBreType** "What is the other type of bread you usually eat?" To be coded back to **BreType**.

- 1. White
- 2. Brown
- Wholemeal/wholewheat/oven wheaten
   Includes malted wheat (not weight watchers).
- 4. Granary
- 5. Wheatgerm
- 6. Other
- 7. White slimmers bread

Use white slimmers bread as default if only slimmers/diet/nimble detail is given and white /wholemeal is not specified.

- 8. Wholemeal slimmers bread
- 9. White bread with added wheatgerm

This code is for white bread which has added grain e.g. Hovis Best of Both. Use this code if interviewer has indicated white and whole or white and brown bread together.

Malted danish, weight watchers malted bread/danish should be coded as "Other".

**ORolType** "What are the other type of rolls you usually eat?". To be coded back to

# RolType.

Note that teacake is not bread role and should be deleted if mentioned as "other".

# **OChaType**

"What are the other type of 'other breads' you usually eat?". To be coded back to **ChaType**.

Note that croissant is not bread and should be deleted if mentioned as "other".

# Oils and spreads

**OChipFat** 

Other type of fat used for frying chips in. To be coded back

to ChipFat.

# Cooking Oils & Fats for OChipFat

Code	Type of Fat	Includes:	Does not include:
1	Blended vegetable	Crisp 'n' Dry	
	oil	Shop brand vegetable oil or	
		brand not specified	
4	Polyunsaturated oils	Sunflower, safflower, sesame,	Reduced fat
		corn, groundnut (peanut)	polyunsaturated oils
4	Polyunsaturated	Shop brand sunflower margarine,	Reduced fat
	margarines	shop brand soya margarine. NOT	polyunsaturated spreads
		Flora. NOT sunflower spreads	
6	Other: Please	Rapeseed oil, red palm oil, butter,	
	specify	any fat spreads e.g. Flora, Olivio	
		(bertolli), St Ivel Gold	

# **ORiceFry**

Other type of fat used for frying rice in. To be coded back to **RiceFry.** 

# **Cooking Oils & Fats for ORiceFry**

Code	Type of Fat	Includes:	Does not include:
1	Blended vegetable	Crisp 'n' Dry	
	oil	Shop brand vegetable oil or	
		brand not specified	
4	Polyunsaturated oils	Sunflower, safflower, sesame,	Reduced fat
		corn, groundnut (peanut)	polyunsaturated oils
4	Polyunsaturated	Shop brand sunflower margarine,	Reduced fat
	margarines	shop brand soya margarine.	polyunsaturated
			spreads,

			NOT sunflower spreads.
6	Other: Please	Rapeseed oil, red palm oil	
	specify		
8	Butter	Salted or unsalted butter or not	Spreadable butter
		specified, spreadable or standard	reduced fat
9	Reduced fat	Flora, Flora Buttery, PURA,	
	polyunsaturated	sunflower spreads	
	spread		
10	Reduced fat non-	Utterly Butterly, Stork margarine,	
	polyunsaturated	Olivio (Bertolli)	
	spread		

Responses such as eggs, water etc. are irrelevant as this question is asking only about the type of fat used and therefore should be deleted from "Other".

# 2.6 Height and weight

If there is an Interviewer Check (Active Signal) at variable **Height1**, **Height2** or **Height3** and the decimal is .0 (e.g. 150.0), suppress this warning to continue moving through the Edit. Anything other than .0, e.g. 150.4, please tab and refer to office.

NoHitCO	Other reason for not obtaining height measurement. To be coded back to Nohtbc1-4
NoWatCO	Other reason for not obtaining weight measurement. To be coded back to Nowtbc 1-3
OHiNRel	Other reason for unreliable height measurement. To be coded back to

#### 2.7 Benefits and Income

HiNRel.

About each source of income we ask which period it covers. If "other" category was chosen, try to code back to the categories available. If necessary, adjust the amount. For example, the respondent received £400 pounds that cover four months. There is no category for 4 months but there is a category "one calendar month".

Recode the amount to £100 instead of £400 and recode the period to one calendar month instead of four months.

**DLapdO** Other period covered by Disability Living Allowance. To be coded back to **DLAPd**.

**EducPdO** Other period covered by the educational grant/bursary. To be coded back to EducPd. **ISPCPdO** Other period covered by Income Support/Pension Credit. To be coded back to ISPCPd. **IntPdO** Other period covered by interest from savings and investments. To be coded back to IntPd. **JSAPdO** Other period covered by Job Seeker's allowance. To be coded back to JSAPd. **OFrqEarn** Other period covered by last take-home pay. To be coded back to FrqEarn. **ORegPdO** Other period covered by other regular source of income. To be coded back to **OregPd**. **OthBPdO** Other period covered by other benefits. To be coded back to **OthBPd**. **PPenPdO** Other period covered by Employer's pension. To be coded back to PPenPd. **SPenPdO** Other period covered by state retirement pension. To be coded back to SPenPd. **HBPdO** Other period covered by Housing benefit. To be coded back to HBPd. **CBenPdO** Other period covered by Child Benefit. To be coded back to CBenPd. WTCPdO Other period covered by Working Tax credit. To be coded back to WTCPd. **CTCPdO** Other period covered by Child Tax Credit. To be coded back to CTCPd. **EPenPdO** Other period covered by Employer's Pensions. To be coded back to EPenPd. IncapPdO Other period covered by Incapacity Benefit. To be coded back to IncapPD. **AttPdO** Other period covered by Attendance Allowance. To be coded back to AttPd. **PartnPdO** Other period covered by payment received from a former/absent partner. To be coded back to **PartnPd**. Other period covered by payment from Government Training Scheme. To **GTSPdO** be coded back to GTSPd. **RentPdO** Other period covered by rent. To be coded back to **RentPd**. EducRecO How do you receive money from the educational grant/bursary? To be coded back to EducRec.

### 2.8 Attitudes and Barriers to Healthy Eating

You can assign *up to 10 codes* in each question but be careful and *do not double-count* (i.e. do not assign two similar codes to the same answer when it is not clear which code is best applicable). If you cannot code an answer, please choose one of the codes for "other answers" and a researcher will solve these queries at the data analysis stage. There is no need to tab a query for the office.

*Interviewer remarks*. If the interviewer was short of space while recording respondents' answers, they may have put a part of it in a note. Please check whether there are any notes attached to the questions and use this info in your coding.

Note that there are three codes that cannot be used in conjunction with any other codes. These are:

97 /997 - Irrelevant or non-specific answer

98 / 998 - Don't know

99 / 999 - Not answered

The Edit program will not allow you to enter these codes at the same time as other codes.

# Changes to current diet

All respondents aged 16 years old and over were asked the question "Are there things you would like to change about your current diet?" (variable name **Change**). Those who answered Yes, were then asked "What would you like to change [about your current diet]"(**ChWhat**). Their answers were coded appropriately into variables **cchwha 01-06**<sup>1</sup>

See table below:

#### CODE

#### Eat/drink LESS of specific types of foods

- 101 Less alcohol
- Less "fat/fatty foods" (if less fatty meat, code 112; if using less fat/oil in cooking, code 301)

#### Meat

- 111 Less red meat
- Less fatty meat, e.g. burgers, kebabs
- Less (other) meat (code if could not code as 111-112)

#### Convenience foods

121 Less fast food/takeaways

<sup>&</sup>lt;sup>1</sup> This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 6 answers were given by any one respondent, thus the other 4 empty answer variable fields were deleted from the dataset.

122	Less pre-cooked food/TV dinners
123	Less pizza (if takeaway pizza, code 121)
129	Less of (other) convenience foods (code if could not code as 121-123)
123	Less of (other) convenience roods (code if codid not code as 121-125)
130	Less salt (including using less salt when cooking)
Sugary fo	ods
141	Less chocolate/sweets
142	Less fizzy/sugary drinks
143	Less biscuits/cakes
149	Less sugar/(other) sugary foods (code if could not code as 141-143)
150	Less "junk food" (code only if respondent uses term "junk")
151	Less crisps/chips (if takeaway chips, code 121)
152	Less coffee/tea (less caffeine)
155	Less starchy foods, e.g. bread/pasta/potatoes (if substituting brown bread for white
	bread, code 450)
180	Eat/drink less of other specific types of foods not listed above
Eat/drink	LESS – without specifying particular foods
195	Eat/drink less to lose weight
199	Eat/drink less for other reasons (or without specifying reasons)
Eat/drink	MORE of specific types of foods
201	More fibre
202	More low fat/reduced fat products (if substituting reduced fat spread for butter, code 450)
203	More low sugar/no added sugar products
204	More low salt/no added salt products
205	More fruit/fruit juice
206	More vegetables (including salad)
Fish	
211	More oily fish, e.g. sardines, salmon, mackerel, tuna
219	More fish (code if could not code as 211)
Meat	
221	More white meat, e.g. poultry (if substituting white meat for red meat, code 450)
222	More red meat
223	More meat (code if could not code as 221 or 222)
231	More "fresh food" (code only if respondent mentions "fresh food")
232	More organic foods
233	Foods rich in vitamins and minerals

236 More milk
 237 More water
 280 Eat/drink more of other specific types of foods not listed above

# Eat/drink MORE – without specifying particular foods

- 295 Eat/drink more to gain weight
- Eat/drink more for other reasons (or without specifying reasons)

# **Food preparation**

301 Use less fat/oil in cooking / do not fry / steam or g	rill rather than fry
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302 Use healthier fats/oils in cooking, e.g. use olive oil

390 Other references to food preparation not listed above

# General change

Substitution of one type of food for a healthier alternative (NB Like for like). For example, using reduced fat spreads instead of butter or using olive oil in cooking instead of lard or eating brown bread instead of white bread, etc.

501	More variety
502	(Better) balanced diet
503	Better quality foods
504	"Healthier" diet (code only if respondent mentions "healthy")
505	More cheaper foods
511	Cook more / eat more home-cooked food
512	Eat at regular times/regularly/not skipping meals/not snacking
513	Eat "proper meals" (only code if respondent mentions "proper"/"properly")
995	Other specific answers (only use if the answer is clearly different to anything)
997	Irrelevant or Non-specific Answers (only code if none of the above used)
998	Don't Know
999	Not answered

# Helping to make changes to current diet

All respondents aged 16 years old and over were asked the question "Are there things you would like to change about your current diet?" (variable name **Change**). Those who answered Yes, were then asked "What would help you make that change? "(**ChHow**). Their answers were coded appropriately into variables **CchHow 01-03** <sup>2</sup> See table below:

<sup>2</sup> This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 3 answers were given by any one respondent, thus the other 7 empty answer variable fields were deleted from the dataset.

# Code

100 Nothing

# Factors associated with an individual's attitudes, skills, effort, etc.

201	(More) willpower / self-discipline
202	Motivation / enthusiasm
203	Better cooking skills (including joining a cooking club)
204	Changing personal taste preferences (e.g. "acquiring a taste for fruit and vegetables")
290	Other factors associated with an individual's attitudes, skills, effort, etc. not listed above

# **Health issues**

301	Better health (including better teeth)
390	Other health issues

# Support/encouragement from other people

401	Family members changing their diet/eating healthier foods
402	Help with food shopping and food preparation
403	Joining a slimming club
404	Joining other support groups (not slimming club)
405	Better information about food/healthy eating (including recipes and better
	food labelling)
406	No/less "junk" food available in shops/restaurants
407	No/fewer food adverts
490	Other support/encouragement from other people not listed above (code only
	if could not code 401-407)

# Other factors which are predominantly *not* associated with an individual's attitudes, skills, effort, etc.

501	More money / Certain (healthier) foods being less expensive
502	Better cooking and storage facilities
503	More time available to spend on food shopping and food preparation (e.g.
	better working hours)
504	More shops in the local area
505	Better shops in the local area
506	Cheaper shops in the local area
507	Home food delivery schemes (introduce, improve (cheap or free))
590	Other factors which are predominantly not associated with an individual's
	attitudes, skills, effort, taste preferences etc. and which are not listed above
	(code only if could not code 501-507)
995	Other specific answers (only use if the answer is clearly different to anything)
997	Irrelevant or Non-specific Answers (e.g. "more physical exercise", "eating

more v	reg and fruit", "eating a healthy diet", etc.; only code if none of the
above	used)
Don't k	now
Not an	swered

# Reasons for reluctance to make changes to the diet

All respondents aged 16 years old and over were asked the question "Are there things you would like to change about your current diet?" (variable name **Change**). Those who answered No, were then asked "Why not?[Why aren't there things you would like to change about your current diet?] (**CChWhyNo**). Their answers were coded appropriately into variables **CchWhy 01-04** <sup>3</sup> See table below:

#### CODE

998 999

# Reluctance to change because the diet is already good/healthy

01	Balanced/varied diet
02	A lot of/enough vegetables/fruit
03	Little or no fatty food
04	Little or no sugary food
05	Little or no salt/salty food
06	Little/no pre-cooked food/fast food/"junk food"/etc.
07	Not overeating
09	Other specific indication why the diet is already healthy/good not listed above
10	Diet is healthy/good (without specifying in which way; code if could not code 01-
	09)

#### Other reasons

21	Diet is OK/ Happy with diet /No need to change diet
22	Used to this diet and therefore would not like to change it
23	Not interested in food / do not care about what to eat
24	Enjoying food is very important (e.g. "Because I like my food")
25	Do not like fruit/vegetables, do not like healthy food (e.g. "healthy food is boring")
26	Eat current diet due to religious (or similar) reasons
27	Not overweight/Weight is fine, so no need to diet (these responses relate to
	dieting to lose weight rather than diet in general)
28	No health problems that require dietary change
29	Diet is already restricted due to medical reasons
30	Too late to change diet/set in ways
31	Still young/too young
32	Money (e.g. "healthy food is too expensive")

<sup>3</sup> This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 4 answers were given by any one respondent, thus the other 6 empty answer variable fields were deleted from the dataset.

33	Would be difficult to cook different food
34	Not enough time to make changes/do shopping required/etc.
95	Other specific answers (only use if the answer is clearly different to anything)
97	Irrelevant or Non-specific Answers (only code if none of the above used)
98	Don't know
99	Not answered

# Changes to child(ren)'s diet

All respondents aged 16 years old and over who have children were asked the question "Are there things you would like to change about your child(ren)'s diet?" (variable name **ChCh**). Those who answered yes, were then asked "What would you like to change [about your child(ren)'s diet]? (**CChChWh**). Their answers were coded appropriately into variables **CchChW 01-06** <sup>4</sup> See table below:

# CODE

# Eat/drink LESS of specific types of foods

Less "fat/fatty foods" (if less fatty meat, code 112; if using less fat/oil in cooking, code 301)

#### Meat

111	Less red meat
112	Less fatty meat, e.g. burgers, kebabs
119	Less (other) meat (code if could not code as 111-112)

#### **Convenience foods**

121	Less fast food/takeaways
122	Less pre-cooked food/TV dinners
123	Less pizza (if takeaway pizza, code 121)
129	Less of (other) convenience foods (code if could not code as 121-123)
130	Less salt (including using less salt when cooking)

# **Sugary foods**

141	Less chocolate/sweets
142	Less fizzy/sugary drinks
143	Less biscuits/cakes
149	Less sugar/(other) sugary foods (code if could not code as 141-143)
150	Less "junk food" (code only if respondent uses term "junk")

<sup>4</sup> This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 6 answers were given by any one respondent, thus the other 4 empty answer variable fields were deleted from the dataset.

	151	Less crisps/chips (if takeaway chips, code 121)
	152	Less coffee/tea (less caffeine)
	155	Less starchy foods, e.g. bread/pasta/potatoes (if substituting brown bread
		for white bread, code 450)
	180	Eat/drink less of other specific types of foods not listed above
Eat/dr	rink LESS –	without specifying particular foods
	195	Eat/drink less to lose weight
	199	Eat/drink less for other reasons (or without specifying reasons)
Eat/dr	rink MODE o	of specific types of foods
	201	More fibre
	202	More low fat/reduced fat products (if <i>substituting</i> reduced fat spread for
•	202	butter, code 450)
	203	More low sugar/no added sugar products
	204	More low salt/no added salt products
	205	More fruit/fruit juice
	206	More vegetables (including salad)
Fish		
2	211	More oily fish, e.g. sardines, salmon, mackerel, tuna
	219	More fish (code if could not code as 211)
Meat		
	221	More white meat, e.g. poultry (if substituting white meat for red meat, code
		450)
;	222	More red meat
;	223	More meat (code if could not code as 221 or 222)
2	231	More "fresh food" (code only if respondent mentions "fresh food")
2	232	More organic foods
:	233	Foods rich in vitamins and minerals
;	236	More milk
;	237	More water
	280	Eat/drink more of other specific types of foods not listed above
Eat/dr	rink MODE	· without specifying particular foods
Lavui	IIIK WOKL –	Eat/drink more to gain weight
	295	Lavanink more to gain weight
	200	Eat/drink more for other reasons (or without specifying reasons)
	299	242 4 Thoration of the reasons (of without apositying reasons)

301	Use less fat/oil in cooking / do not fry / steam or grill rather than fry
301	Use healthier fats/oils in cooking, e.g. use olive oil
302	Other references to food preparation not listed above
	• •

390

# General change

450	Substitution of one type of food for a healthier alternative (NB Like for like). For example, using reduced fat spreads <i>instead</i> of butter or using olive oil in cooking <i>instead</i> of lard or eating brown bread <i>instead</i> of white bread, etc.
501	More variety
502	(Better) balanced diet
503	Better quality foods
504	"Healthier" diet (code only if respondent mentions "healthy")
505	More cheaper foods
511	Cook more / eat more home-cooked food
512	Eat at regular times/regularly/not skipping meals/not snacking
513	Eat "proper meals" (only code if respondent mentions "proper"/"properly")
995	Other specific answers (only use if the answer is clearly different to anything)
997	Irrelevant or Non-specific Answers (only code if none of the above used)
998	Don't know
999	Not answered

# Helping to make changes to child(ren)'s current diet

All respondents aged 16 years old and over who have children were asked the question "Are there things you would like to change about your child(ren)'s diet?" (variable name **ChCh**). Those who answered yes, were then asked "What would help you make that change?[Change to the respondent's child(ren)'s diet] (**CChChHow**). Their answers were coded appropriately into variables **Cchchh 01-03** <sup>5</sup>

See table below:

# CODE

101	Nothing (do not code if coded 102)
102	It is up to the child(ren) to change their diet (do not code if coded 101)

<sup>5</sup> This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 3 answers were given by any one respondent, thus the other 7 empty answer variable fields were deleted from the dataset.

# Factors associated with an individual's (i.e. the respondent's or the child(ren)'s) attitudes, skills, effort, etc.

201	(More) willpower / self-discipline (refers to both the respondent and the
	child(ren))/persistence in enforcing certain (healthier) foods on children (e.g.
	respondent buying no certain foods and drinks, so that they are not available
	to children)
231	Children's obedience: children following the respondent's advice (or that of
	some other adult members of the household) and eating food that they
	buy/prepare
203	Better cooking skills (including joining a cooking club)
204	Changing personal taste preferences (e.g. "acquiring a taste for fruit and
	vegetables")
290	Other factors associated with an individual's attitudes, skills, effort, etc. not
	listed above (code if could not assign above)

# Health issues (refers to both the respondent and the child(ren))

301	Better health (including better teeth)
390	Other health issues

# Support/encouragement from other people (i.e. not members of the family)

405	Better information about food/healthy eating (including recipes and better
	food labelling; if information is provided at school, code 531)
431	School providing education about food/healthy eating
432	School having "rules" about what foods can be brought in for
	breaks/lunchtime
406	No/less "junk" food available in shops/restaurants
407	No/fewer food adverts
490	Other support/encouragement from other people not listed above (code only if
	could not assign above)

# Other factors which are predominantly *not* associated with an individual's (i.e. the respondent's or the child(ren)'s) attitudes, skills, effort, etc.

501	More money / Certain (healthier) foods being less expensive
502	Better cooking and storage facilities
503	More time available to spend on food shopping and food preparation (e.g.
	better working hours)
504	More shops in the local area
505	Better shops in the local area
506	Cheaper shops in the local area
507	Home food delivery schemes (introduce, improve (cheap or free))
531	BETTER FOOD PROVIDED/AVAILABLE AT SCHOOL (E.G. HEALTHIER/MORE
	VARIED/LESS EXPENSIVE, ETC.)
590	Other factors which are predominantly not associated with an individual's

attitudes, skills, effort, taste preferences etc. and which are not listed above (code only of could not assigned above)

995	Other specific answers (only use if the answer is clearly different to anything)
997	Irrelevant or Unspecific Answers (e.g. "more physical exercise", "eating more
	veg and fruit", "eating a healthy diet", etc.; only code if none of the above
	used)
998	Don't Know
999	Not answered

# Reasons for reluctance to make changes to child(ren)'s current diet

All respondents aged 16 years old and over who have children were asked the question "Are there things you would like to change about your child(ren)'s diet?" (variable name **ChCh**). Those who answered no, were then asked "Why not? [Why aren't there things you would like to change about your child(ren)'s diet] (**CChChWNo**). Their answers were coded appropriately into variables **cchchw11-12** <sup>6</sup>

See table below:

#### CODE

# Reluctance to change because the diet is already good/healthy

01	Balanced/varied diet
02	A lot of/enough vegetables/fruit
03	Little or no fatty food
04	Little or no sugary food
05	Little or no salt/salty food
06	Little/no pre-cooked food/fast food/"junk food"/etc.
07	Not overeating
08	Child(ren) eat(s) food provided by the respondent or someone else in the
	household and the respondent is happy with this choice of food
09	Other specific indication why the diet is already healthy/good not listed above
10	Diet is healthy/good (without specifying in which way; code if could not code
	01-09)

#### Other reasons

Diet is OK/ Happy with diet /No need to change diet
Used to this diet and therefore would not like to change it
Not interested in food / do not care about what to eat
Enjoying food is very important
Do not like fruit/vegetables, do not like healthy food (e.g. "healthy food is
boring")

<sup>6</sup> This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 2 answers were given by any one respondent, thus the other 8 empty answer variable fields were deleted from the dataset.

26	Eat current diet due to religious (or similar) reasons
27	Not overweight/Weight is fine, so no need to diet (these responses relate to
	dieting to lose weight rather than diet in general)
28	No health problems that require dietary change
29	Diet is already restricted due to medical reasons
30	Too late to change diet/set in ways
31	Still young/too young (incl. when the question is irrelevant because the child is
	a baby and is either breastfed or drinks formula)
32	Money (e.g. "healthy food is too expensive")
33	Would be difficult to cook different food
34	Not enough time to make changes/do shopping required/etc.
35	Cannot face fighting with child about changes needed to make diet healthier
36	Do not have control over what child eats
95	Other specific answers (only use if the answer is clearly different to anything
	above)
97	Irrelevant or Non-specific Answers (only code if none of the above used)
98	Don't know
99	Not answered

# **Definition of Healthy Eating**

All respondents aged 16 years old and over were asked the following question "There is no one definition for healthy eating. Can you tell me please how you personally would describe healthy eating?" (hIEat). Their answers were coded appropriately into variables **Chleat 01-10** <sup>7</sup>

# CODE

# Eating/drinking LESS of specific types of foods

101	Less alcohol
102	Less "fat/fatty foods" (if less fatty meat, code 112; if using less fat/oil in
	cooking, code 301)

#### Meat

111	Less red meat (if substitution of white meat for red meat, code 402)
112	Less fatty meat, e.g. burgers, kebabs
119	Less (other) meat (code if could not code as 111-112)

# **Convenience foods**

121	Less fast food/takeaways
122	Less pre-cooked food/TV dinners
123	Less pizza (if takeaway pizza, code 121)

<sup>7</sup> This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 10 answers were given by any one respondent, thus there were no empty answer variable fields.

129	Less of (other) convenience foods (code if could not code as 121-123)
130	Less salt (including using less salt when cooking)
Sugary foods	
141	Less chocolate/sweets
142	Less fizzy/sugary drinks
143	Less biscuits/cakes
149	Less sugar/(other) sugary foods (code if could not code as 141-143)
150	Less "junk food" (code only if respondent uses term "junk")
151	Less crisps/chips (if takeaway chips, code 121)
152	Less coffee/tea (less caffeine)
153	Less dairy (e.g. less milk, cheese, etc.)
154	Less preservatives/additives
155	Less starchy foods, e.g. bread/pasta/potatoes (if substituting brown bread
	for white bread, code 404)
180	Eat/drink less of other specific types of foods not listed above
Eating/drinkin	g LESS – without specifying particular foods
191	Eating only when hungry
192	Eating smaller portions / eating "in moderation" (if "not snacking", code 512)
199	Other references to eating/drinking less
Eating/Drinkin	ng More
201	(More) fibre
202	Low fat/reduced fat products (if substituting low-fat for full-fat products,
	choose a code from 401-409)
203	Low sugar/no added sugar products
204	Low salt/no added salt products
205	Fruit/fruit juice
206	Vegetables (including salad)
Fish	
211	(More) oily fish, e.g. sardines, salmon, mackerel, tuna
219	Fish (code if could not code as 211)
Meat	
221	(More) white meat, e.g. poultry (if substituting white meat for red meat, code 402)
222	Red meat
223	Lean meat (if substituting lean meat for fatty meat, code 401)
229	Meat (code if could not code as 221-223)
231	"Fresh food" (code only if respondent mentions "fresh food")

Vitamins/minerals  234 (More) protein  235 Carbohydrate  236 (More) dairy (e.g., milk, yoghurt, etc.; if substituting low-fat dairy for full-fat dairy, code 405)  237 (More) water  238 Decaffeinated tea and coffee/herbal teas  290 Other references to eating/drinking more (code if could not assign above)  Food preparation  301 Using less fat/oil in cooking /not frying /steaming or grilling rather than frying 302 Using healthier fats/oils in cooking, e.g. using olive oil  303 Trimming fat off food before eating 390 Other references to food preparation not listed above  Substitution of one type of food for a healthier alternative (NB Like for like)  401 Substitution of lean meat for fatty meat 402 Substitution of white meat for red meat 403 Substitution of reduced fat spreads for butter/margarines 404 Substitution of low fat dairy for high fat dairy 409 Other references to substitution not listed above  General  501 (More) variety 502 Eating a balanced diet 503 Better quality foods  511 Cooking more / eating more home-cooked food 512 Eating at regular times/regularly/not skipping meals/not snacking 513 Eating "proper meals" (only code if respondent mentions "proper"/"properly")  521 Becoming vegetarian/vegan 522 Boring; eating "rabbit food"; having to watch what you eat all the time 4995 Other specific answers (only use if the answer is clearly different to anything)  997 Irrelevant or Non-specific Answers (only code if none of the above used) 998 Don't know Not answered	232	Organic foods
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237 (More) water 238 Decaffeinated tea and coffee/herbal teas  290 Other references to eating/drinking more (code if could not assign above)  Food preparation  301 Using less fat/oil in cooking /not frying /steaming or grilling rather than frying 302 Using healthier fats/oils in cooking, e.g. using olive oil 303 Trimming fat off food before eating 390 Other references to food preparation not listed above  Substitution of one type of food for a healthier alternative (NB Like for like)  401 Substitution of lean meat for fatty meat 402 Substitution of white meat for red meat 403 Substitution of brown/wholemeal bread for butter/margarines 404 Substitution of low fat dairy for high fat dairy 409 Other references to substitution not listed above  General  501 (More) variety 502 Eating a balanced diet 503 Better quality foods  511 Cooking more / eating more home-cooked food 512 Eating at regular times/regularly/not skipping meals/not snacking 513 Eating "proper meals" (only code if respondent mentions "proper"/"properly")  521 Becoming vegetarian/vegan 522 Boring; eating "rabbit food"; having to watch what you eat all the time  995 Other specific answers (only use if the answer is clearly different to anything)  100 Irrelevant or Non-specific Answers (only code if none of the above used)  101 Don't know	230	
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998 Don't know	995	
	997	Irrelevant or Non-specific Answers (only code if none of the above used)
999 Not answered	998	Don't know
	999	Not answered

# Importance of healthy eating

All respondents aged 16 years old and over were asked the following question: "How important is healthy eating to you" (EatImp). Those respondents who answered "Very important" or "Fairly important" to that question were then asked "Can you tell me why healthy eating is important to you?" (variable YEatImp). Their answers were then coded under variable name CyeatI 01-048. See table below:

# CODE

Health reasons	/ life	expectancy
----------------	--------	------------

01	Healthy eating is related to general health (e.g. "good for health", "I want to be
	healthy", etc.)
02	References to illnesses/health problems that the respondent has/ had (e.g.
	"Because I have diabetes", "If I eat well, I do not get as many spots", etc.)
03	Healthy eating is a way to live longer/reduce risk of chronic disease (e.g. "I
	want to live long", want to reduce risk of heart disease, cancer, diabetes)
04	References to family history of illnesses/health problems (e.g. "Parents had
	heart problems")
05	To stay healthy for sake of children (e.g. "I have a child to look after", "I need to
	stay well because of the children")
06	Other health reasons (only code if could not code 01-05)

# Other reasons

21	Stress on how one feels if s/he eats healthily (e.g. "makes me feel better", "general wellbeing", etc.)
22	Overall benefits to the body (e.g. "I can work very well", "It helps my body to function well", "Good for energy", "If I eat well, I do not feel sluggish", etc.)
23	To lose weight/not to gain weight
24	To gain weight
25	References to fitness (e.g. "it makes/keeps you fit", "I want to be fit")
26	It is good for growth/development of children
27	Old age (e.g. "because I am getting older")
28	Nutritional value of healthy food (e.g. "it gives you vitamins", "because you get all the nutrition a person needs", etc.)
95	Other specific answers not listed above (only use if the answer is clearly different to anything)
97	Irrelevant or Unspecific Answers (e.g. "To be well", "Don't like junk food", etc.; only code if none of the above used)
98	Don't know

<sup>8</sup> This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 4 answers were given by any one respondent, thus the other 6 empty answer variable fields were deleted from the dataset.

# Unimportance of healthy eating

All respondents aged 16 years old and over were asked the following question: "How important is healthy eating to you" (**EatImp**). Those respondents who answered "Not at all important" or "Not very important" to that question were then asked "Can you tell me why healthy eating is not important to you?" (variable **YnotImp**). Their answers were then coded under variable name **CYNotI 01-02** <sup>9</sup>

See table below:

#### CODE

01	Diet is OK/ Happy with diet /No need to change diet
02	Used to this diet and therefore would not like to change it
03	Not interested in food / do not care about what to eat
04	Enjoying food is very important (e.g. "Because I like my food")
05	Do not like fruit/vegetables, do not like healthy food (e.g. "healthy food is boring")
06	Have no control over what I eat/what is provided for me to eat
07	Not overweight/Weight is fine, so no need to diet (these responses relate to
	dieting to lose weight rather than diet in general)
08	No health problems
09	Diet is already restricted due to medical reasons
10	Too late to change diet/set in ways
11	Still young
12	Healthy food is too expensive
13	Cannot/would be difficult to cook different food
14	Do not want to cook different food
15	Already eat healthily / do not overeat
95	Other specific answers (only use if the answer is clearly different to anything)
97	Irrelevant or Unspecific Answers (only code if none of the above used)
98	Don't know
99	Not answered

# 2.9 Self-Completion Questionnaire: How do you eat?

Where respondents circled two codes instead of one, the questionnaires should be checked once again to see whether one of the codes appears to be crossed out.

1. If 2 responses are directly next to each other then code the following:

9 This was an open question and the answers that respondents gave were recorded by interviewers verbatim. The coders could use up to 10 codes to code each answer. For this question, a maximum of 2 answers were given by any one respondent, thus the other 8 empty answer variable fields were deleted from the dataset.

```
If coded 1 & 2 = code 2

If coded 2 & 3 = code 3

If coded 3 & 4 = code 3

If coded 4 & 5 = code 4
```

2. If 2 responses have been chosen that are separated by another response then code the following:

```
If coded 1 & 3 = \text{code } 2
If coded 2 & 4 = \text{code } 3
If coded 3 & 5 = \text{code } 4
```

3. In cases where there is more than one intermediate response between 2 selected codes, then code the following:

```
If coded 1 & 4 = code 9 (not answered)

If coded 1 & 5 = code 9

If coded 2 & 5 = code 9
```

4. If D.O.B is blank = CTRL R

#### 2.10 Nurse Questionnaire

# MedBI and DrC Drug coding

Attempt to code medicines coded as 999999. Query with the UCL research team if necessary. If a query could not be resolved by UCL, code 999996.

# 3. Coding and editing of the 24-hour recalls

This section outlines procedures for coding dietary data by interviewers and for editing these data by coders at NatCen and nutritionists at KCL. The section also includes details of backcoding of "other" answers to some of the questions asked after each 24 hour recall.

#### 3.1 Food and portion size coding by interviewers

Interviewers were responsible for coding the food and drink recorded during the 24-hour recall. Coding was not done as part of the interview but as a separate exercise afterwards. Interviewers were encouraged to code the previous 24-hour recall before visiting the respondent for the next interview. This enabled them to gather any extra information they may have needed to code the food item as close as possible to the time of data collection.

#### 3.2 Food coding using the food code list

Nutritionists supplied the interviewers with a food code list in two formats: a 'food coding' book and a 'food coding' program on their laptop. In both formats, the food code list contained code numbers for about 4000 items and a full description of each item taken from the National Diet and Nutrition Surveys nutrient databank. The list was organised into 20 main sections, for example milk and cream, breakfast cereals, fruit, vegetables and different types of meat. The 'food coding' book contained additional check lists prepared for interviewers by KCL and the Agency which helped interviewers correctly code particular food groups which required a lot of detail, for example soft drinks and fats used for spreading and cooking. The food code list was updated to take account of new products eaten by the respondents that became available during the fieldwork period, and the revised list was sent to interviewers on a monthly basis. Interviewers used the food code list to assign a food code to every single food or drink item recorded during the recall. For composite dishes, where each individual component was recorded separately, those components were each assigned a code. If an item had been recorded and there was no suitable code given on the list or the interviewer was unsure of the correct code to use, these were assigned a zero. Interviewers did not code recipes, as these would be allocated codes by the nutritionists during the editing stage

# 3.3 Portion coding

As well as assigning a food code, interviewers needed to assign a portion code for each food or drink consumed by the respondent. The portion code related to the *amount* of food or drink that was consumed. If the amount consumed had been described using a photograph from the food atlas, the photograph number was entered as the portion code (e.g. the photo of a white bread roll is number G2F). If the amount consumed had been described in household measures (e.g. cups, spoons), interviewers would look up the corresponding portion code using the 'food coding' program. If the amount consumed had been described

as a weight (or volume), the interviewer would enter the weight in grams (or volume in ml) as the portion code.

# 3.4 Data entry of the 24-hour recall booklet

Once interviewers had coded the 24-hour recall, the booklets were returned to NatCen's Operations Department in Brentwood for data entry. The Blaise program was used to computerise and automate the entry of the 24-hour recall data (Rec24 program).

After the coder had entered a food code and a portion code into the Rec24 program, the following information was displayed on screen for the coder to check that the data entered matched the interviewer's entry on the 24-hour recall sheet:

- 1. Description of food or drink
- 2. Description of portion used (photo atlas number (e.g. G12M), household measure (e.g. tablespoon) or weight (in grams))
- 3. Weight consumed (in grams) as calculated by the Rec24 program from (2).

Once the information had been displayed, the coder visually checked that all codes were correct and that this coding exactly matched that written down by the interviewer on the record sheet. If any codes did not match the description given on the record sheet, the coder could choose to go to the same food coding program and food coding book used by the interviewers to allocate the correct code. In order to assist the coding of the 24-hour recall data and help resolve any queries, the coders had access to fact sheets containing information taken from relevant sections of the face-to-face interview regarding eating habits and food preparation. If coders changed a code, they had to amend the record sheet in green ink to reflect this change. If they could not find the correct code or were unsure of their selection, the entry was manually "flagged" for the nutritionists to check. Coders could also enter general comments about the standard of coding by the interviewer.

The Rec24 program itself incorporated the following checks and raised a flag for the nutritionists where appropriate:

- The coder enters a "missing" code (0 for the food code or 99999 for the portion size code).
- The portion size is outside a defined range. All portion codes are converted into weight in grams by the program. There is a 2-stage flagging process, first to check for data entry errors and then to check that the weight does not exceed the maximum weight set for this food in the nutrient databank.
- Inappropriate portion code used for the food code.
- Excluded food codes used, such as food codes for raw meat.
- Food and portion codes where the base weight has been removed (this prevents the program from calculating the weight consumed and was done for a few foods where the weight needed to be entered manually by the nutritionists).

After entry, the recall data was sent to KCL in batches and viewed by the nutritionists through a version of the Rec24 program that allowed them to see all the flagged entries. The nutritionists also had the 24-hour recall booklets and copies of the fact sheets used by the coders for each respondent. The nutritionists assigned appropriate codes for all flagged food and portion codes and checked entries where the weight exceeded the maximum set for a food. All recipe sheets were individually checked and the type and proportion of ingredients used was compared with existing recipes. If the ingredients differed from an existing recipe in a way that was nutritionally significant, the existing food code was not used. A new food code was allocated to the item and the nutritionists recorded the recipe for each new food code. This comprised the gram weight for each ingredient, percentage vitamin losses for each ingredient where appropriate and, for a cooked dish, a percentage water loss for the whole dish. Each new recipe was added to the nutrient databank and the nutrient content calculated. Initially, the Agency were involved in all decisions regarding the addition of new foods or recipes to the databank, and continued to audit a proportion of these throughout the survey.

For any new products not on the food code list, the nutritionists visited supermarkets or contacted the manufacturer to obtain information on nutrient content in order to decide whether an existing food code could be used or if a new food code was needed.

A respondent's usual eating habits or formally agreed default values were used to answer individual queries. For example, if lasagne was eaten at a restaurant and it was not possible to establish details of the ingredients, the standard food code for that item was used. The nutritionists also referred to food/recipe and portion size data collected from schools for the survey of school meals in secondary schools in England for the accurate coding of school lunches. In addition, the Agency supplied the nutritionists with portion sizes for children of different ages for a range of foods eaten in the home, supermarket products and fast foods. (see Appendix 1 of the main report for more details).

In cases where the interviewer had recorded a missing meal, for example, where a young child had had a school lunch or food out of the home but could not remember what they had consumed, the nutritionists would either copy the foods recorded for a school lunch or comparable meal on another day if these were available, or use an imputed school meal adjusted for age where appropriate. If several meals or a large part of the day's intake was recorded as missing, this day was omitted from the final data set for analysis. Respondents were excluded from LIDNS if meals were missing on more than one day.

A full check of all food and portion code entries (not just the flagged queries) was undertaken by the nutritionists for a random 10% of all of the 24 hour recalls. All supplements were checked in all 24-hour recalls to ensure they had been allocated to the correct supplement group and were assigned a food and portion code.

At the end of data entry and editing, the following checks were run on all the recall data:

- Weights missing or below 0
- Missing portion codes
- Missing food codes
- Food codes not available in the nutrient databank
- Food weights over 1000g
- Missing nutrients in nutrient databank

Finally, each respondent's energy and nutrient intake for each of the four days was calculated. This was then used to calculate the respondent's intake as a percentage of the dietary reference value for each nutrient. Age group and sex specific histograms showing the distribution of intake for each nutrient were then produced and examined by the nutritionists. Cut-offs specific to each age and sex group were identified where high/extreme values existed in the distribution of energy and nutrients. This resulted in data for approximately 500 days being checked against the original paper record sheet. This not only picked up a small number of incorrect food codes or portion sizes (about 5% of outliers) but also a few erroneous nutrient values within the databank (4% of outliers).

# 3.6 Back coding of "Other" answers in the 24-hour recall booklet

# Other reason for consuming more or less food and drink on the recall day

After each day's recall we ask "Was the amount of food/drink that you had yesterday about what you usually have, less than usual, or more than usual?" If the respondent answers "Less than usual" or "More than usual", they are then asked to give the main reason that the amount they had to eat/drink was less/more than usual. Where respondents gave an "other" answer, the response was back coded as shown in the table below:

FdLOth	Other main reason for eating less than usual on day of recall. To be coded
	back to <b>foodles</b>
CODE	
1	SICKNESS/ TIREDNESS
	Toothache/Sore mouth
	Injury/Accident
	Back pain/Period pain
2	SHORT OF MONEY
	Saving money
3	LITTLE FOOD IN THE HOUSE
	Not much/no food to eat
	Wanted to make food stretch/last
	Saving food for others/shared food
4	TRAVELLING
	Out of house/Visiting friends/Relatives/At hospital/Went out/Playing out
5	AT A SPECIAL OCCASION OR ON HOLIDAY

6	ON A SPECIAL DAY
7	WEEKEND DAY
	Friday
8	TOO BUSY
	Lack of time
9	NOT HUNGRY
	Not in the mood to eat/didn't feel like it
	Had a lot the day before/late evening meal/ate more after midnight
	Ate a lot of sweets/snacks/ice cream/chips so put off other food
	Weather/temperature related
10	DIETING
	Deliberate decision
	Cutting down/trying to cut down
	Didn't snack/Snacking only
	Feeling fat
	Missed meal/no proper meal (no elaboration of reason given)
11	FASTING
	Include fasting for exercise/sport
	Fasting for hospital appointment
12	BORED OR STRESSED
40	Other emotional reason e.g. Excited, Upset, Depressed
13	WORKING SHIFTS
4.4	At work (no elaboration given)
14	DON'T KNOW
	Can't remember what had
	Don't know/not sure if he/she had anything else
15	No reason SOME OTHER REASON
13	Any reason that cannot be coded elsewhere
	e.g. Powercut – cooker not working
	No company /lonely
	Forgot to eat
	Watching TV
	Method/study related
	Fussy/problem eater/food not liked/food refused
16	CHANGE OF ROUTINE OF RESPONDENT/ MFP/ MUM/ WIFE
10	Not at school/ work
	Mum/Wife ill/away so did not have dinner
	Tiredness/sickness of Mum/ Wife/ MFP/ Other person in HH
	Sleeping/got up late/bed early
	Usually do something else
	No cooker/kitchen not available
17	LAZV COLLIDA'T RE ROTHEDED

Had visitors/Bank holiday/Socialising/Meal out

	Couldn't be bothered to shop/cook/eat
18	ALCOHOL RELATED
	Had a hangover /drunk
	Drinking alcohol (instead of eating)
FdMOth	Other main reason for eating more than usual on day of recall. To be coded back to <b>foodmor</b>
CODE	back to recame!
1	JUST GOT SOME MONEY
·	Free food/Food gift/ present/food bought by X/meals provided at work
	More food in the house/been food shopping
	Vouchers/coupons for food/price reductions
2	TRAVELLING
	Out of house/Visiting friends/relatives/Went out
3	AT A SPECIAL OCCASION OR ON HOLIDAY
	Had visitors/Bank holiday/Socialising/Meal out/takeaway
	Treating myself/pigging out
4	ON A SPECIAL DAY
5	WEEKEND DAY
	Friday
6	VERY HUNGRY
	Bigger portion than usual
	Ate extra food/meal
	Picking/more snacking/Ate more sweets
	Long gap between meals /skipped a meal
	Making up for not eating much on previous day
	Weather / temperature related/ no heating
	Feeling better after being ill
7	BORED OR STRESSED
	Other emotional reason e.g. Excited, Upset, Depressed
8	WORKING SHIFTS
	At work (no elaboration given)
9	DON'T KNOW
	No reason
10	SOME OTHER REASON
	Any reason that cannot be coded elsewhere
	e.g. It was there/it was available/fancied it
	Nice food/liked the food that I had
	Food would go off otherwise/ go stale
	Method/study related
	At home (no elaboration given)
	Someone else cooked

SICKNESS / HANGOVER / TIREDNESS

Didn't cook anything

11

	Medical related – taking tablets/period / menopause Alcohol related
12	DIETING
	Deliberate decision
13	BUSY/ACTIVE/EXERCISE
14	CHANGE OF ROUTINE OF RESPONDENT/ MFP/ MUM/ WIFE
	Not at school/ work
	Got up early/went to bed late/got home early
DrLOth	Other main reason for drinking less than usual on day of recall. To be coded
	back to <b>driess</b>
CODE	
1	SICKNESS/ TIREDNESS
	Toothache/Sore mouth
	Injury/Accident
	Back pain/Period pain
2	SHORT OF MONEY
	Saving money
3	LITTLE DRINK IN THE HOUSE
	Not much/no drink
	Wanted to make food stretch/last
	Saving drink for others
4	TRAVELLING
	Out of house/Visiting friends/Relatives/At hospital/Went out/Playing out
5	AT A SPECIAL OCCASION OR ON HOLIDAY
	Had visitors/Bank holiday/Socialising/Meal out
6	ON A SPECIAL DAY
7	WEEKEND DAY
	Friday
8	TOO BUSY
	Lack of time
9	NOT THIRSTY
	Not in the mood to drink/didn't feel like it
	Had a lot the day before
	Weather/temperature related
10	DIETING
	Deliberate decision
	Cutting down/trying to cut down e.g. Coffee
11	FASTING
	Include fasting for exercise/sport
	Fasting for hospital appointment
12	BORED OR STRESSED
	Other emotional reason e.g. Excited, Upset, Depressed
13	WORKING SHIFTS

	At work (no elaboration given)
14	DON'T KNOW
	Can't remember what had
	Don't know/not sure if he/she had anything else
	No reason
15	SOME OTHER REASON
	Any reason that cannot be coded elsewhere
	e.g. no hot water
	No company /lonely
	Forgot to drink
	Method/study related
	Fussy
16	CHANGE OF ROUTINE OF RESPONDENT/ MFP/ MUM/ WIFE
	Not at school/ work
	Tiredness/sickness of Mum/ Wife/ MFP/ Other person in HH
	Sleeping/got up late/bed early
17	LAZY, COULDN'T BE BOTHERED
	Couldn't be bothered to shop/drink
18	ALCOHOL RELATED
	Had a hangover /drunk
DrMOth	Other main reason for drinking more than usual on day of recall. To be coded
	back to <b>drmore</b>
CODE	
1	JUST GOT SOME MONEY
	Free drink/Drink gift/ present/bought by X/drink provided at work
	More drink in the house/been food shopping
	Vouchers/coupons for drink
2	TRAVELLING
	Out of house/Visiting friends/relatives/Went out
3	AT A SPECIAL OCCASION OR ON HOLIDAY
	Had visitors/Bank holiday/Socialising/Night out
	Treating myself
4	ON A SPECIAL DAY
5	WEEKEND DAY
	Friday
6	VERY THIRSTY
	Drank extra
	Making up for not drinking much on previous day
	Weather / temperature related/ no heating
	Dehydrated
7	BORED OR STRESSED
	Other emotional reason e.g. Excited, Upset, Depressed
8	WORKING SHIFTS

	At work (no elaboration given)
9	DON'T KNOW
	No reason
10	SOME OTHER REASON
	Any reason that cannot be coded elsewhere
	e.g. It was there/it was available/fancied it
	Nice drink/liked the drink that I had
	Drink would go off otherwise/go stale
	Method/study related
11	SICKNESS / HANGOVER / TIREDNESS
	Medical related – taking tablets/period/menopause
	Alcohol related
12	DIETING
	Deliberate decision
	Eating less so drinking more
	Little food in the house
13	BUSY/ACTIVE/EXERCISE
14	CHANGE OF ROUTINE OF RESPONDENT/ MFP/ MUM/ WIFE
	Not at school/ work
	Got up early/went to bed late/got home early

# Other reason for difficulty in carrying out the recall interview

After each recall we ask the interviewer to complete a feedback questionnaire. One of the questions asks, "Did you or the respondent have difficulty with this interview?" If yes, the interviewer is asked to give reasons for this difficulty. Where interviewers gave an "other" reason, the response was back coded as shown in the table below:

DiffOth CODE	Other reason for difficulty with recall interview. To be coded back to whatdif
1	DID NOT UNDERSTAND THE QUESTIONS
	Got confused
	Did not respond well to probing
	Found it difficult
2	DID NOT PREPARE FOOD
	At friends /relatives/ café/ work etc - not sure how foods are cooked
3	FOODS WERE EATEN AWAY FROM HOME
	Child at nursery/school
	Child at other parents/friends house
4	POOR MEMORY OF FOOD
	Elderly respondent /Alzheimer's
	Couldn't remember what was eaten at school
	Used phrases such as 'I think I had' / 'I must have had' / 'I usually have'
	Could not remember
5	SICK
	Respondent not feeling well so couldn't spend long at the visit
	Respondent interviewed from bed so difficult to check items in cupboard
6	LANGUAGE BARRIER
	Difficulty understanding/first language not English
7	UNCOOPERATIVE / IMPATIENT/NERVOUS/POOR CONCENTRATION
	Angry /stressed
	Nervous / poor concentration
_	Difficult respondent to interview
8	NOT ASCERTAINED
9	FREQUENT INTERRUPTIONS
	Children needing attention
	TV on in room / respondent distracted by it
	Telephone calls whilst interviewer was at house
40	Visitors whilst interviewer was at house
10	SOME OTHER REASON
4.4	Any reason that cannot be coded elsewhere
11	DIFFICULTIES WITH HEARING
40	Respondent deaf
12	PROBLEMS WITH PORTION SIZE ASSESSMENT/FOOD ATLAS
	Respondent could not see the photos/ poor eyesight

Respondent could not differentiate between the portions in the atlas Difficulty describing portion size in household measures Respondent couldn't get to grips with portion sizes

# 13 ALCOHOL RELATED

Respondent drunk at visit

Respondent had been drinking alcohol

# 14 RESPONDENT TIRED /BUSY

Felt under pressure to finish interview /respondent in a rush