

# UK Biobank

## Health and well-being web-based questionnaire

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Version 1.2

<http://www.ukbiobank.ac.uk/>

16th August 2023



This document details the rationale and procedure for administration of the health and well-being web-based questionnaire for UK Biobank. This version (1.2) includes links to the specific data-fields that relate to each questionnaire item in the Appendix table, and supersedes version 1.1.

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## **1. Introduction – scientific rationale**

In 2021, the UK Biobank imaging enhancements working group requested the collection of information about UK Biobank participants' COVID symptoms. However, subsequent analysis of GP data from 102,769 UK Biobank participants living in England revealed that electronic GP data did not contain comprehensive information about incident symptoms of COVID-19 (particularly taste and smell disorder). It was therefore decided to obtain information about the impact of the COVID-19 pandemic on health and well-being directly from participants.

The overall aims of administering this questionnaire were:

- (i) to capture data on possible symptoms and impacts of long COVID;
- (ii) to enable comparisons of symptoms experienced by participants who have objective measures of previous COVID-19 disease (obtained through medical or vaccination records) with those who do not.

## **2. List of contributors**

In addition to the guidance related to the list of symptoms provided by Dr Katrina Davis and Professor Matthew Hotopf of King's College London and the South London and Maudsley NHS Foundation Trust on behalf of UK Biobank, advice was also sought from the following clinicians and academics:

- Dr Athena Akrami – Group Leader, Sainsbury Wellcome Centre, University College London (non-clinical cognitive neuroscientist and co-lead on the patient-led long COVID patient survey 'Characterizing long COVID in an international cohort: 7 months of symptoms and their impact').
- Professor Nisreen Alwan MBE – Professor in Public Health, University of Southampton (public health researcher with lived experience, research and patient advocacy expertise in long COVID).
- Dr Timothy Nicolson – Clinical Senior Lecturer in Neuropsychiatry, Institute of Psychiatry, Psychology and Neuroscience, King's College London; and head of long COVID clinic at King's College Hospital (co-lead on NIHR-funded international initiative with WHO to develop a core outcome set to optimise and standardise measurement of

long COVID; and collaborator on a range of research studies investigating neurological and psychiatric complications of COVID-19).

- Dr Claire Steves – Clinical Senior Lecturer, King’s College London; Consultant Geriatrician at Guy’s and St Thomas’s NHS Foundation Trust; and Deputy Director (Clinical) for TwinsUK.
- Prof Helen Ward – Clinical Professor of Public Health, Imperial College London.
- Dr Christina Atchison – Principal Clinical Academic Fellow, Faculty of Medicine, School of Public Health, Imperial College London.

### **3. Content**

The questionnaire includes questions on COVID-19 symptoms and impact drawn from the Wellcome COVID-19 questionnaire (<https://www.bristol.ac.uk/alspac/covid-19/wellcome-covid-19/>) as well as from surveys used in other large cohort studies, for example, REACT, TwinsUK and the ZOE COVID Study. We also consulted researchers developing a CORE outcome set for long COVID, to ensure that the symptoms included were those most relevant to long COVID. Some of the questions on mental well-being have been asked of UK Biobank participants in previous questionnaires, and these are identified in Appendix 1. A detailed guide to the sources of all questions used in the questionnaire and experts consulted is included below.

The following table provides details of the sources of questions used in the health and well-being questionnaire.

<b>Q. ID</b>	<b>Source</b>	<b>Authors</b>	<b>Available at</b>
HT1	Q1.2.1 and Q2.2.1 of Wellcome Trust Longitudinal Population Studies (LPS) Questionnaire Resource v0.5, June 2021	Questionnaire provided by Wellcome Longitudinal Population Study COVID-19 Steering Group and Secretariat (221574/Z/20/Z)	<a href="https://www.bristol.ac.uk/alspac/covid-19/wellcome-covid-19/">https://www.bristol.ac.uk/alspac/covid-19/wellcome-covid-19/</a>
	TwinsUK COVID-19 Health and Personal Experiences (CoPE) Questionnaire, v55	Department of Twin Research & Genetic Epidemiology, King's College London	From TwinsUK study team
	Office for National Statistics (ONS) COVID-19 infection survey of the UK general population	Office for National Statistics and the University of Oxford (UK), delivered by IQVIA (USA)	<a href="https://www.ndm.ox.ac.uk/covid-19/covid-19-infection-survey/case-record-forms">https://www.ndm.ox.ac.uk/covid-19/covid-19-infection-survey/case-record-forms</a>
	World Health Organization (WHO) Global COVID-19 Clinical Platform Case Report Form (CRF) for Post COVID Condition (Post COVID-19 CRF)	Health Care Readiness Unit, WHO	<a href="https://www.who.int/publications/i/item/global-covid-19-clinical-platform-case-report-form-(crf)-for-post-covid-conditions-(post-covid-19-crf-)">https://www.who.int/publications/i/item/global-covid-19-clinical-platform-case-report-form-(crf)-for-post-covid-conditions-(post-covid-19-crf-)</a>
	Prof Matthew Hotopf and Dr Katrina Davis' work on long COVID	Developed in conjunction with the UK Biobank Mental Health Outcomes Consortium and external experts on long COVID and outcome measures. Submitted to UK Biobank's Strategic Oversight Committee in support of application to undertake second mental health questionnaire (now relabelled as mental well-being questionnaire, 2022)	Internal document
	UK Biobank mental well-being questionnaire 2022	Developed in conjunction with Prof Matthew Hotopf and Dr Katrina Davis at KCL, in collaboration with UKB Mental Health Outcomes Consortium. Given favourable ethical opinion by North West - Haydock REC, amendment 01, August 2021	Questionnaire developed for online use via the University of Oxford's Online Questionnaire Sharing (OQS) Service
	COVID-19 rapid guideline: managing the long-term effects of COVID-19	NICE guideline covering the identification, assessment and management of the long-term effects of COVID-19	<a href="https://www.nice.org.uk/guidance/ng188">https://www.nice.org.uk/guidance/ng188</a>

	BMJ Best Practice: Coronavirus disease 2019 (COVID-19)	BMJ Best Practice Guidance provided for medical professionals	<a href="https://bestpractice.bmj.com/topics/en-gb/3000201/complications">https://bestpractice.bmj.com/topics/en-gb/3000201/complications</a>
	Real-time Assessment of Community Transmission Long COVID (REACT-LC) survey 2022	Faculty of Medicine, Imperial College London	<a href="https://www.imperial.ac.uk/medicine/research-and-impact/groups/react-study/studies/react-long-covid/">https://www.imperial.ac.uk/medicine/research-and-impact/groups/react-study/studies/react-long-covid/</a>
HT2	Developed by UK Biobank		
HT3	Developed by UK Biobank, using response options taken from UK Biobank mental well-being questionnaire work with Hotopf/Davis		
PHQ 4	Patient Health Questionnaire for Depression and Anxiety (PHQ-4)	Developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer Inc. No permission required to reproduce, translate, display or distribute	<a href="https://www.phqscreeners.com/select-screener">https://www.phqscreeners.com/select-screener</a>
EL1	Amended version of Q2.2.15 of Wellcome Trust LPS Questionnaire Resource v0.5, June 2021 (response options amended and presented in a different format)	Questionnaire provided by Wellcome Longitudinal Population Study COVID-19 Steering Group and Secretariat (221574/Z/20/Z)	<a href="https://www.bristol.ac.uk/alspac/covid-19/wellcome-covid-19/">https://www.bristol.ac.uk/alspac/covid-19/wellcome-covid-19/</a>
EL2	Q2.2.16 of Wellcome Trust LPS Questionnaire Resource v0.5, June 2021 (responses presented in a different order)	Questionnaire provided by Wellcome Longitudinal Population Study COVID-19 Steering Group and Secretariat (221574/Z/20/Z)	<a href="https://www.bristol.ac.uk/alspac/covid-19/wellcome-covid-19/">https://www.bristol.ac.uk/alspac/covid-19/wellcome-covid-19/</a>
C1	Developed by UK Biobank		

The full list of questions can be found in Appendix 1.

## **4. Piloting**

Prior to inviting all participants with a contact email address (approximately 330,000) to complete it, UK Biobank piloted this questionnaire with 10,000 participants to ensure that the online platform and procedures were adequately robust and that the questionnaire was acceptable in terms of content and length.

## **5. Administration**

**5.1:** The questionnaire administration process for UK Biobank participants with an email address was as follows:

- an initial invitation email (which included a hyperlink to their personalised questionnaire);
- a reminder email to non-responders sent two weeks after the initial invitation;
- a reminder email sent to partial responders (i.e. those who had only completed part of the questionnaire) two weeks after they started the questionnaire;
- a 'last-chance' invitation sent to non-responders four months after the initial invitation.

**5.2:** Ninety six per cent of participants completed the questionnaire in 20 minutes or less.

**5.3:** As of 20<sup>th</sup> May 2023, there were 201,684 participants who had fully completed the online questionnaire out of a total of 333,427 participants sent an email invitation.

**5.4:** Participants for whom UK Biobank did not have an email address were encouraged via the information in the 2022 newsletter and on the UK Biobank website to complete the online questionnaire by logging in to the participant website. A further 1,094 participants accessed the questionnaire via the participant website in this way, without having received an email invitation.

**5.5:** Email invitations are also routinely sent to those participants who have recently updated their email address (and who have not yet completed the questionnaire). We therefore anticipate that data will continue to accrue for a small number of participants.

**5.6:** Data were removed from participants who failed the identity check at the beginning of the online questionnaire: that is, the dates of birth they provided did not match UK Biobank records. These amounted to 3% of all respondents.

## Appendix 1: Questions and format of the questionnaire

Health & well-being questionnaire					
Introduction (INTRO1)					
The past few years have been very challenging for a lot of us and it is important for us to understand how people's health has been affected. We would therefore like to ask for your help by providing us with some information about your health and well-being at the moment.					
Q.ID	Field ID	Stem	Question identical to previous questionnaire*	Question similar to previous questionnaire	Responses
<b>Identity check</b>					
ID_INTRO 1		<p>This questionnaire is participant specific. It should only be completed by the person named on the email invitation OR the person who logged in to the participant website.</p> <p>We just want to check your date of birth. This is so that we can double-check that this questionnaire has been completed by the correct person (and not, for example, by someone who shares an email address with you).</p>			
ID_INTRO 2		Please enter your details below:			
ID_DAY		Day of birth:			<i>[DropDownList1: 31 choices 1 – 31.]</i>
ID_MONTH		Month of birth:			<i>[DropDownList2: 12 choices for months: "January" to "December".]</i>
ID_YEAR		Year of birth:			<i>[Text box allowing integer values and it allows selection of an integer between 1934 and 1971.]</i>
<b>Your health today</b>					
HTINTRO1	These questions are about health issues that you may have at the moment.				



HTBLOCK1		<p><i>[List of questions to be split over several pages. Following to be displayed at top of each page. Page titles indicated in italics in list below]</i></p> <p>Are you <b>currently</b> suffering from any of the following health issues (that are new or have worsened in recent weeks)?</p>			
HT1	<p><a href="#">28600</a></p> <p><a href="#">28603</a></p> <p><a href="#">28606</a></p> <p><a href="#">28609</a></p> <p><a href="#">28612</a></p> <p><a href="#">28615</a></p> <p><a href="#">28618</a></p> <p><a href="#">28621</a></p> <p><a href="#">28624</a></p> <p><a href="#">28627</a></p> <p><a href="#">28630</a></p> <p><a href="#">28633</a></p>	<p><i>[PT002=Gastrointestinal]</i></p> <p>a. A decrease in appetite</p> <p>b. Nausea and/or vomiting</p> <p>c. Gastrointestinal issues e.g. diarrhoea, constipation</p> <p><i>[PT003=Eyes and ENT]</i></p> <p>d. Vision problems</p> <p>e. A loss or change in sense of smell</p> <p>f. A loss or change in sense of taste</p> <p>g. A sore or painful throat</p> <p>h. Nasal congestion</p> <p>i. Tinnitus</p> <p>j. Hearing loss</p> <p>k. Other hearing issues</p> <p><i>[PT004=Pain]</i></p> <p>l. Headaches</p>			<p><i>[For each of issues HT1.a to HT1.ss, if response=Yes (01), select one from 00-01. DK, DA are exclusive.]</i></p> <p>00=No</p> <p>01=Yes</p> <p>DK(-1)=Do not know</p> <p>DA(-3)=Prefer not to answer</p>

HT1 cont...	<a href="#">28636</a>	m. Neck pain/stiff neck				
	<a href="#">28639</a>	n. Back pain				
	<a href="#">28642</a>	o. Chest pain				
	<a href="#">28645</a>	p. Pain on breathing				
	<a href="#">28648</a>	q. Abdominal pain/tummy ache				
	<a href="#">28651</a>	r. Leg pain				
	<a href="#">28654</a>	s. Muscle pain/achy muscles				
	<a href="#">28657</a>	t. Joint pain or swelling of joint(s)				
	<a href="#">28660</a>	u. Bone pain				
			<i>[PT005=Cardio-thoracic]</i>			
	<a href="#">28663</a>	v. A persistent cough				
	<a href="#">28666</a>	w. Phlegm production/a chesty cough				
	<a href="#">28669</a>	x. Tightness in the chest				
	<a href="#">28672</a>	y. Chest pressure/'heaviness'				
	<a href="#">28675</a>	z. Heart issues e.g. palpitations (unusual beating of the heart), tachycardia (increased heart rate)				
	<a href="#">28678</a>	aa. Postural tachycardia (increased heart rate after sitting or standing up)				
	<a href="#">28681</a>	bb. Dizziness/light-headedness				
	<a href="#">28684</a>	cc. Shortness of breath or trouble breathing (affecting normal activities)				
			<i>[PT006=Sleep and energy]</i>			

HT1 cont...	<a href="#">28687</a>	dd. Difficulty sleeping			
	<a href="#">28690</a>	ee. Night sweats			
	<a href="#">28693</a>	ff. Unrestful sleep			
	<a href="#">28696</a>	gg. Mild fatigue (e.g. feeling more tired than usual)			
	<a href="#">28699</a>	hh. Severe fatigue (e.g. unable to get out of bed)			
	<a href="#">28702</a>	ii. 'Post-exertional symptom exacerbation' (i.e. an immediate or delayed and significant worsening of existing symptoms following physical or mental exertion).			
		<i>[PT007=Skin and allergies]</i>			
	<a href="#">28705</a>	jj. Skin issues e.g. raised, red itchy areas, new rash			
	<a href="#">28708</a>	kk. Red/purple sores or blisters on your feet (including toes)			
	<a href="#">28711</a>	ll. New allergy or intolerance e.g. swelling of the face or lips, food intolerance, intolerance to medication			
		<i>[PT008=Body temperature]</i>			
	<a href="#">28714</a>	mm. Fever (feeling too hot)			
	<a href="#">28717</a>	nn. Chills (feeling too cold)			
	<i>[PT009=Thoughts and feelings]</i>				

<b>HT1 cont...</b>	<a href="#">28720</a>  <a href="#">28723</a>  <a href="#">28726</a>  <a href="#">28729</a>  <a href="#">28732</a>	oo. Problems thinking e.g. 'brain fog', memory problems, difficulty concentrating, decreased alertness, confusion  pp. Problems communicating e.g. difficulty speaking or putting your thoughts into words  qq. Problems relating to mood, anxiety and emotions e.g. feeling 'down', anxious or irritable  <i>[PT010=Sensory and neurological]</i>  rr. Weakness of muscles or difficulty moving arms and legs  ss. Numbness or tingling somewhere in the body, e.g. 'pins and needles'			
<b>HTBLOCK2</b>		<i>[PT011=Duration of issue]</i>  How long have you been suffering from [issue]? Please include the total time spent experiencing the issue (if it has been coming and going, then include the overall time since the start of the problem).			
<b>HT2</b>	<a href="#">28601</a> <a href="#">28604</a> <a href="#">28607</a> <a href="#">28610</a> <a href="#">28613</a> <a href="#">28616</a> <a href="#">28619</a> <a href="#">28622</a>	a. A decrease in appetite b. Nausea and/or vomiting c. Gastrointestinal issues d. Vision problems e. A loss or change in sense of smell f. A loss or change in sense of taste g. A sore or painful throat h. Nasal congestion			<i>[For each of issues HT1.a to HT1.ss, if response=Yes (01) select one from 00-01. DK, DA are exclusive.]</i>  01=Less than two weeks 02=Two to three weeks 03=Four to twelve weeks 04=More than twelve weeks  DK(-1)=Do not know DA(-3)=Prefer not to answer

HT2 cont...	<a href="#">28625</a>	i.	Tinnitus			
	<a href="#">28628</a>	j.	Hearing loss			
	<a href="#">28631</a>	k.	Other hearing issues			
	<a href="#">28634</a>	l.	Headaches			
	<a href="#">28637</a>	m.	Neck pain/stiff neck			
	<a href="#">28640</a>	n.	Back pain			
	<a href="#">28643</a>	o.	Chest pain			
	<a href="#">28646</a>	p.	Pain on breathing			
	<a href="#">28649</a>	q.	Abdominal pain/tummy ache			
	<a href="#">28652</a>	r.	Leg pain			
	<a href="#">28655</a>	s.	Muscle pain/achy muscles			
	<a href="#">28658</a>	t.	Joint pain or swelling of joint(s)			
	<a href="#">28661</a>	u.	Bone pain			
	<a href="#">28664</a>	v.	A persistent cough			
	<a href="#">28667</a>	w.	Phlegm production/a chesty cough			
	<a href="#">28670</a>	x.	Tightness in the chest			
	<a href="#">28673</a>	y.	Chest pressure/'heaviness'			
	<a href="#">28676</a>	z.	Heart issues			
	<a href="#">28679</a>	aa.	Postural tachycardia			
<a href="#">28682</a>	bb.	Dizziness/light-headedness				
<a href="#">28685</a>	cc.	Shortness of breath or trouble breathing				
<a href="#">28688</a>	dd.	Difficulty sleeping				
<a href="#">28691</a>	ee.	Night sweats				

HT2 cont...	<a href="#">28694</a> <a href="#">28697</a> <a href="#">28700</a> <a href="#">28703</a> <a href="#">28706</a> <a href="#">28709</a> <a href="#">28712</a> <a href="#">28715</a> <a href="#">28718</a> <a href="#">28721</a> <a href="#">28724</a> <a href="#">28727</a> <a href="#">28730</a> <a href="#">28733</a>	ff. Unrestful sleep gg. Mild fatigue hh. Severe fatigue ii. 'Post-exertional symptom exacerbation' jj. Skin issues kk. Red/purple sores or blisters on your feet ll. New allergy or intolerance mm. Fever (feeling too hot) nn. Chills (feeling too cold) oo. Problems thinking pp. Problems communicating qq. Problems relating to mood, anxiety etc rr. Weakness of muscles ss. Numbness or tingling			
HTBLOCK3		[PT012=Impact of issue] To what extent is [issue] affecting you? [Replicate issues from HT1, if response=Yes (01)]			
HT3	<a href="#">28602</a> <a href="#">28605</a> <a href="#">28608</a> <a href="#">28611</a> <a href="#">28614</a>	a. A decrease in appetite b. Nausea and/or vomiting c. Gastrointestinal issues d. Vision problems e. A loss or change in sense of smell			[For each of issues HT1.a to HT1.ss, if response=Yes (01) select one from 00-01. DK, DA are exclusive.] 00=It is not limiting me 01=It is causing me to avoid, reduce or spread out my usual activities DK(-1)=Do not know

HT3 cont...	<a href="#">28617</a>	f. A loss or change in sense of taste			DA(-3)=Prefer not to answer
	<a href="#">28620</a>	g. A sore or painful throat			
	<a href="#">28623</a>	h. Nasal congestion			
	<a href="#">28626</a>	i. Tinnitus			
	<a href="#">28629</a>	j. Hearing loss			
	<a href="#">28632</a>	k. Other hearing issues			
	<a href="#">28635</a>	l. Headaches			
	<a href="#">28638</a>	m. Neck pain/stiff neck			
	<a href="#">28641</a>	n. Back pain			
	<a href="#">28644</a>	o. Chest pain			
	<a href="#">28647</a>	p. Pain on breathing			
	<a href="#">28650</a>	q. Abdominal pain/tummy ache			
	<a href="#">28653</a>	r. Leg pain			
	<a href="#">28656</a>	s. Muscle pain/achy muscles			
	<a href="#">28659</a>	t. Joint pain or swelling of joint(s)			
	<a href="#">28662</a>	u. Bone pain			
	<a href="#">28665</a>	v. A persistent cough			
	<a href="#">28668</a>	w. Phlegm production/a chesty cough			
	<a href="#">28671</a>	x. Tightness in the chest			
	<a href="#">28674</a>	y. Chest pressure/'heaviness'			
	<a href="#">28677</a>	z. Heart issues			
	<a href="#">28680</a>	aa. Postural tachycardia			
	<a href="#">28683</a>	bb. Dizziness/light-headedness			

HT3 cont...	<a href="#">28686</a> <a href="#">28689</a> <a href="#">28692</a> <a href="#">28695</a> <a href="#">28698</a> <a href="#">28701</a> <a href="#">28704</a> <a href="#">28707</a> <a href="#">28710</a> <a href="#">28713</a> <a href="#">28716</a> <a href="#">28719</a> <a href="#">28722</a> <a href="#">28725</a> <a href="#">28728</a> <a href="#">28731</a> <a href="#">28734</a>	cc. Shortness of breath or trouble breathing dd. Difficulty sleeping ee. Night sweats ff. Unrestful sleep gg. Mild fatigue hh. Severe fatigue ii. 'Post-exertional symptom exacerbation' jj. Skin issues kk. Red/purple sores or blisters on your feet ll. New allergy or intolerance mm. Fever (feeling too hot) nn. Chills (feeling too cold) oo. Problems thinking pp. Problems communicating qq. Problems relating to mood, anxiety etc rr. Weakness of muscles ss. Numbness or tingling			
PHQ-4 INTRO	We would like to know about how you have been feeling recently				
BLOCK PHQ-4 1	Over the last <b>2 weeks</b> , how often have you been bothered by any of the following problems? <i>[4 questions on one page].</i>				
PHQ-4 1a	<a href="#">28735</a>	Feeling nervous, anxious or on edge	<a href="#">Field ID 20506</a> (Mental health questionnaire)		<i>Select one from the following for each of the statements]</i> 01=Not at all 02=Several days 03=More than half the days



					04=Nearly every day DA=Prefer not to answer
<b>PHQ-4 1b</b>	<a href="#">28736</a>	Not being able to stop or control worrying	<a href="#">Field ID 20509</a> (Mental health questionnaire)		<i>Select one from the following for each of the statements]</i> 01=Not at all 02=Several days 03=More than half the days 04=Nearly every day DA=Prefer not to answer
<b>PHQ-4 1c</b>	<a href="#">28737</a>	Little interest or pleasure doing things	<a href="#">Field ID 20514</a> (Mental health questionnaire)  <a href="#">Field ID 120104</a> (Pain questionnaire)		<i>[Select one from the following for each of the statements]</i> 01=Not at all 02=Several days 03=More than half the days 04=Nearly every day DA=Prefer not to answer
<b>PHQ-4 1d</b>	<a href="#">28738</a>	Feeling down, depressed or hopeless	<a href="#">Field ID 20510</a> (Mental health questionnaire)  <a href="#">Field ID 120105</a> (Pain questionnaire)		<i>[Select one from the following for each of the statements]</i> 01=Not at all 02=Several days 03=More than half the days 04=Nearly every day DA=Prefer not to answer
<b>ELINTRO1</b>	We would like to know if your current health is impacting on your everyday life.				
<b>ELBLOCK1</b>		How much difficulty do you have with the following activities?			
<b>EL1</b>	<a href="#">28739</a> <a href="#">28740</a> <a href="#">28741</a>  <a href="#">28742</a>  <a href="#">28743</a>  <a href="#">28744</a>  <a href="#">28745</a>	a. Standing for long periods, such as 30 minutes? b. Taking care of your household responsibilities? c. Learning a new task, e.g. learning how to get to a new place? d. Joining in community activities (e.g. festivities, religious, other)? e. Being emotionally affected by your health problems? f. Concentrating on doing something for ten minutes? g. Walking a long distance such as one kilometre or half a mile?			<i>[For each of questions EL 1.a to EL 1.n, select one from]</i> 00=No difficulty 01=Mild difficulty 02=Moderate difficulty 03=Severe difficulty 04=Extreme difficulty / unable to do this DK(-1)=Do not know DA(-3)=Prefer not to answer

	<a href="#">28746</a> <a href="#">28747</a> <a href="#">28748</a> <a href="#">28749</a> <a href="#">28750</a>  <a href="#">28751</a>  <a href="#">28752</a>	h. Washing your whole body? i. Getting dressed? j. Dealing with people you do not know? k. Maintaining a friendship? l. Dealing with noisy environments (e.g. from TV, people's chattering, street noise)? m. Doing your day-to-day work (including unpaid work or studying)? n. Looking after your children/grandchildren? What additional help do you need because of the health issue(s) you have identified? Please select all that apply.			
<b>EL2</b>	<a href="#">28753</a>	What additional help do you need because of the health issue(s) you have identified? Please select all that apply.			<i>[Select one or more from 01-09. 00 is exclusive. If EL2=I do not need any additional help (00) no other selection can be made]</i>  00=I have not needed any additional support 01=Getting essential shopping e.g. food or medication 02=Preparing food and/or drink 03=Washing and dressing 04=Doing housework e.g. laundry, cleaning or vacuuming 05=Managing household responsibilities e.g. finances or paying bills 06=Doing day-to-day work (including unpaid work or studying) 07=Doing childcare or other caring responsibilities 08=Letting other people know about my illness (e.g. employer, university, family) 09=Getting about (travel) e.g. driving
<b>Comments</b>					
<b>C1</b>		Please tell us anything else relevant to this questionnaire here. (If you do not wish to add any extra information here, please click Save/continue).			<i>Free text field, max. 1000 characters]</i>

\* Fields in common with items from other questionnaires can be mapped between respective field IDs using [Schema 21](#) on Showcase.