

NATIONAL SURVEY OF HEALTH AND DEVELOPMENT

under the joint auspices of
The Medical Research Council

The National Foundation for Educational
Research in England and Wales

The Scottish Council for
Research in Education

M.R.C. Unit,
London School of Economics,
Houghton Street, W.C.2.

Ref. No:

Name:
Address:

FOR THOSE WHOSE HOME ADDRESS HAS CHANGED

New Address.....

.....

.....

ENTT1

College/Course TCOLT1

PLEASE COMPLETE EITHER BY WRITING OR BY RINGING THE APPROPRIATE NUMBER

A. DETAILS OF TRAINING

1. a. What Diploma/Certificate are you aiming
for?

LCOUT1

TCSUBT1

FESUBJT1

b. Is there a principal subject(s) in your
training?

yes 1

no 0

(If 'yes')

c. Please specify -

2. How long does your training last?

_____ years

3. Looking back at those who helped you
decide to take this training, who helped you
the most, if anyone?

4. a. Did you apply to do any other different
courses or trainings (including university)?

yes 1

no 0

(If 'yes')

b. Please give details of the courses or
trainings:

B. BACKGROUND INFORMATION

5. How would you rate the help your school gave you in your choice of training?

- very much help 1 **SCHCCT1**
- adequate help 2
- less than adequate help 3
- very little or no help 4

6. a. Now you are here, do you think you would have preferred any other training to the to the one you are taking?

- yes 1
- no 0
- undecided y

(If 'yes' or 'undecided')

b. What training might you have preferred?

c. In what ways do you think it would be preferable?

<p>7.</p> <p>FAMHAT1</p> <p>PLEASE TICK THE APPROPRIATE COLUMN</p>	delighted	glad on the whole	in two minds	opposed
a. i. How do you think your mother felt about your plans to take your present training before you were actually accepted?				
ii. How do you think she feels now?				
b. i. How do you think your father felt about your plans to take your present training before you were actually accepted?				
ii. How do you think he feels now?				

8. At what stage in your school career did you first think of taking your present training?

- before 'O' levels 1
- after 'O' levels but before 'A' 2
- later 3
- other **AGCOUT1**

b. Please explain why you feel like this?

9. a. Now that you are here are you glad that you have come?

- yes, very glad 1
- yes, moderately so 2
- about equally glad and sorry that I came 3
- no, I'm having second thoughts 4
- no, I wish I hadn't come 5
- other, namely _____

10. a. In what ways was your school (or technical college) successful in preparing you for your present student life?

b. In what ways was your school (or technical college) unsuccessful in preparing you for your present student life?

SCLSPT1

SCLIPT1

11. a. What do you like most about your present life and work?

OPCDIST1
 OPCSLT1
 OPCGENT1
 OPCLOUT1
 VOCT1
 OPCILT1
 IATSCT1
 IAHUMT1
 IAPOLT1
 IAFICTT1
 IACREATT1
 IASOCCT1
 IAODRT1
 IARELT1
 IASIOT1
 IASOOT1

b. What do you like least?

c. In what ways is it different from what you expected?

12. a. Do you plan to do any extra study after the end of this training, either where you are now or elsewhere?

PGWK1

yes	1
no	0
undecided	y

(If 'yes' or 'undecided')

b. What further certificate, diploma or degree might you take?

TPGWT1

13. If you hadn't been accepted for your present training, what career would you have wanted to take up?

C. WORK AND ACTIVITIES

14. a. Have you actually had to give up some activity this term because of work?

yes	1
no	0

(If 'yes')

b. What was it?

15. a. Compared with your fellow students, about how much time do you spend on social activities (bridge, sport, clubs, coffee, etc.)?

WKHABT1

very much more than most	1
more than most	2
about the same as most	3
less than most	4

b. What social activities do you spend most time on?

16. Please answer the following questions by ticking the appropriate column.

ATWKT1

	always	frequently	sometimes	seldom	never
i. When reading do you find that you reach a point where you are mechanically registering the actual words rather than their meaning?					
ii. Are you prevented from study by visitors or friends dropping in?					
iii. When you have set aside a time for study, do you have difficulty in settling down to it?					
iv. Have you been handicapped by illness while studying?					
v. Do you find yourself too tired or listless to study efficiently?					
vi. Do you find prolonged study gives rise to headaches?					
vii. Do you actively participate in discussions during tutorials?					
viii. Do you find difficulty in expressing your ideas?					
ix. Are you conscientious about writing up lecture notes while the subject matter is fresh in your mind?					
x. Do you find difficulty in concentrating your attention on the subject matter of lectures?					
xi. Do you spend an undue amount of time at the beginning of each examination paper before you 'get into your stride'?					
xii. Do you find more difficulty in expressing your ideas under examination conditions than in ordinary written work?					
xiii. Do you find difficulty during examinations in portioning out your effort to cover the minimum number of questions adequately?					
xiv. Do you feel that your examination performance is lowered by 'examination nerves' or anxiety?					
17.	definitely yes	yes, on the whole	sometimes, yes	no, on the whole	definitely no
i. Do you work better under a fairly rigid timetable imposed from above, as opposed to planning your own study time?					
ii. Is your knowledge of a subject structured as opposed to a loosely organised collection of facts and ideas?					
iii. Are your studies more of a grind than an enlightening experience for you?					
iv. Do you find tutorials worth the time spent on them?					
v. Do you think tutorials merely serve as a platform for the verbalistically competent 'empty vessels' of the student body?					
vi. Do you spend more time on your weak subjects than on the others?					

18. In an average week how many hours do you spend on the following?

a. Lectures, tutorials (*including all teaching received whether practical or not but excluding teaching practice.*)

HTWT1 **THWWT1** hours per week

b. Private study (*including work in library*) (*For those studying music or art include unsupervised practice.*)

HWPWT1 hours per week

19. a. Do you have to study in the evening?

yes 1

no 0

(If 'yes')

b. How many evenings did you study for 1 hour or more last week?

NEWT1 evenings

20. What is the smallest teaching group you attend (*excluding individual help with teaching practice*)?

4 or less 1

TGST1 5 - 9 2

10 - 19 3

20 or more 4

21. As compared with the other students in your year, would you describe yourself as having?

more friends than most 1

an average number of friends 2

less friends than most 3

(N.B. By friends we mean people who you meet outside working hours, who are more than acquaintances.)

D. PERSONAL INFORMATION

(This section, and indeed all this questionnaire, is entirely confidential) **WLIVT1**

22. Where are you living at the moment?

home 1

College/Hostel/Hall of Residence 2

digs with food 3

digs without food 4

flat supervised by the College 5

other flat 6

other, namely _____

23. Do you have a room of your own to study in?

ORMT1 yes 1

no 0

24. a. Have you any wish to change your present living arrangements this year?

yes 1

no 0

(If 'yes')

b. Why do you wish to change?

WCGET1

25. How long does it take you to get from your normal residence to the College (*one way only*)?

TIMCT1 mins.

live on the spot y

26. How much do your parents contribute to your expenses? **PCONTT1**

they contribute everything 1

more than half 2

less than half 3

pocket money only 4

nothing 5

27. What financial strain, if any, was it for your parents to continue your education in the 6th Form?

PAR6T1

considerable 1

heavy 2

slight 3

none 4

28. a. Matched against other students, how much would you say that you had to spend?

as much **SPENDT1** 1

more 2

less 3

b. Would you describe yourself as - **PSPENDT1**

definitely short, having to cut down on essentials 1

rather pinched 2

able to manage alright 3

having sufficient for a few extras 4

E. BOOKS AND NEWSPAPERS

29. In the last four weeks, what types of books, if any, have you read (*excluding work ones*)? (Circle more than one number if necessary)

- novels 1
- crime 2
- science fiction 3
- biography 4
- history 5
- other, namely _____

none 0

30. a. Do you read any daily papers regularly?

- yes 1
- no 0

(If 'yes')

b. Which ones?

NPRST1

31. a. Do you read any Sunday papers regularly?

- yes 1
- no 0

(If 'yes')

b. Which ones?

SUNPRT1

32. a. Do you read any weekly/monthly/quarterly magazines regularly?

- yes 1
- no 0

(If 'yes')

b. Which ones? _____

33. What are your hobbies now, if any?

34. What clubs, if any, do you attend regularly?

35. How else do you spend your spare time?

F. VACATION WORK

36. Did you do a vac job at Christmas?

- yes 1
- for **XMJBT1** weeks
- no 0

37. a. Did you do any studying during the Christmas vac?

- yes **XMSDYT1** 1
- no 0

b. How many hours per week? _____ hrs.

For how many weeks? _____ wks.

38. a. Do you hope to do a vac job in the summer?

- yes 1
- no 0

(If 'yes')

b. What job do you hope for?

SUMJBT1

c. Why do you want it? **JBREAT1**

d. How long do you hope to have it for?

LJOBT1 weeks

G. MISCELLANEOUS INFORMATION

39. a. Have you lost time from your studies since October?

- yes through illness 1
- yes, for other reasons 2
- no **ABOCTT1** 0

(If 'yes')

b. How long have you been away?

HLAWT1

40. a. Have you seen a doctor since October?

- yes 1
- no 0

(If 'yes')

b. How many times? **DRVSTST1**

c. What did you go about?

41. a. Have you felt the need to go to anyone for advice on a personal problem since the start of your course?

- yes 1
- no 0

(If 'yes')

b. To whom did you go?

PPROBT1

42. a. Do you have trouble with your sleep?

- yes 1
- no 0

(If 'yes')

b. What sort of trouble do you have?

(If necessary circle more than one number)

- difficulty in getting off to sleep 1
- waking up during the night and not being able to get off to sleep again quickly 2
- unpleasant dreams or nightmares 3
- waking too early in the morning and staying awake 4
- sleeping all right but still feeling tired in the morning 5

other, namely **SLEEPT1**

43. a. Is your sight normal in both eyes?

- yes 1
- no 0

(If 'no') **SIGHTT1**

b. Are you -

- long sighted 1
- short sighted 2

other, namely _____

SIDFTT1

c. Have you ever had a squint?

- yes 1
- no **SQUINTT1** 0

d. Have you ever had astigmatism?

- yes 1
- no **ASTIGT1** 0

44. Try and decide whether 'yes' or 'no' is how you usually feel and then circle the 'yes' or the 'no' like this: (no) . If you find it quite impossible to decide, then circle the '?', like this: (?). However don't use the question-mark unless you feel you have to. Work quickly and don't spend too much time on any question, we want your first reaction.

Don't leave any questions out. There are no right or wrong answers - this isn't a test of intelligence, it is simply to give us an idea of how you feel and behave.

- MPIEXT1** i. Are you happiest when you get involved in some project that calls for rapid action? Yes ? No
- MPIINT1** ii. Do you sometimes feel happy, sometimes depressed, without any apparent reason? Yes ? No
- iii. Does your mind often wander while you are trying to concentrate? Yes ? No
- iv. Do you usually take the initiative in making new friends? Yes ? No
- v. Are you inclined to be quick and sure in your actions? Yes ? No
- vi. Are you frequently 'lost in thought' even when supposed to be taking part in a conversation? Yes ? No
- vii. Are you sometimes bubbling over with energy and sometimes very sluggish? Yes ? No
- viii. Would you rate yourself as a lively individual? Yes ? No
- ix. Would you be very unhappy if you were prevented from making numerous social contacts? Yes ? No
- x. Are you inclined to be moody? Yes ? No
- xi. Do you have frequent ups and downs in mood, either with or without apparent cause? Yes ? No
- xii. Do you prefer action to planning for action? Yes ? No

H. GENERAL HEALTH

45. a. The last accident we have recorded for you was ACCST1 in 19 .
 Have you had any accident since then, in which you were burnt or scalded, you broke a bone, you were badly cut or bruised or injured by a chemical?

yes 1
 no 0

(If 'yes')

b. Please give the following details about each accident -

Type of injury (enter as BURN, SCALD, BROKEN BONE, CUT, etc.)	Part or parts injured	Age when injured (in years and months)	Treatment Hos. I.P, Hos. O.P, Nursing Home, Own Home	If treated in own home, who gave treatment? (Doctor, Nurse, other)	Details of remaining scarring, disability or deformity
DETAILS of how each ACCIDENT OCCURRED (if burnt by fire say whether electric, gas, open fire or oil stove)				Where it occurred (own home, school, street, etc.,)	

46. a. The last hospital admission recorded for you was _____

Have you been a hospital in-patient since then?

yes 1
 no 0

(If 'yes' please give) **HOADT1**

b. Name of hospital _____

c. Date of admission _____

d. The nature of the illness or operation _____

e. The length of your stay in hospital _____

f. The name of the Doctor in charge of you in hospital _____

47. a. Since October 1962 have you attended a hospital out-patient dept.

yes 1
 no 0

(If 'yes' please give)

b. Name of hospital _____

c. Date of first attendance _____

d. Reason for attendance _____

48. a. Since October 1962 have you attended a clinic?

CLINICT1
 yes 1
 no 0

(If 'yes' please give)

b. Name of clinic _____

c. Date of first attendance _____

d. Reason for attendance _____

49. What has being on your present course meant to you in terms of your relationships with those here and at home?

THANK YOU VERY MUCH

COMPT1