Start		
Aston University	MANCHESTER 1824	Food Standards Agency
	The University of Manchester	
University Hospitals Birmingham	Newcastle University	Guy's and St Thomas'

Welcome to this national survey, part of the #FOODSENSITIVE project, investigating the impact of Food Hypersensitivities on people's lives.

In the survey we will:

- · ask about which food hypersensitivities people in your home have
- ask about the impact of those conditions on you, or your child's, quality of life
- ask you to make some "what would you do?" choices
- ask about you and your attitude to you, or your child's, food hypersensitivity and your attitude to risk

We'll explain more about the project and survey in a moment - but please create a code/password (minimum of 6 characters) for yourself here - this will allow you to rejoin the survey where you left off, if you do not complete it in one go.

If you are returning to the survey - enter the code/password you chose and you will be taken back to where you left the survey.

Next













The University of Manchester





In the survey we will:

- · ask about which food hypersensitivities people in your home have
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To thank you for your time and effort completing the survey at the end you wil have a chance to enter into a prize draw to win high street shopping vouchers (see https://www.highstreetvouchers.com).

We will randomly select 4 participants to win a £50 voucher, and for every 25 people who complete the survey we will award a £10 voucher to someone.

So, if 1000 people complete the survey and leave their contact details we will give away 40 x £10 vouchers and 4 x £50 vouchers.



pisandinfo

In order to decide whether to participate in this study please read this <u>Participant Information Sheet</u> - and the statements below.

Then indicate whether or not you agree to take part in the study.

- I confirm that I have read the attached information sheet for the above study and have had the opportunity to consider the information and ask questions and had these answered satisfactorily.
- I understand that my participation in the study is voluntary and that I am free to withdraw at any time without giving a reason and without detriment to myself.
- I confirm that I am 18 years old or older.
- I understand that data collected during the study may be looked at by individuals from The University of Manchester or regulatory authorities, where it is relevant to your taking part in this research. You give
- I agree that any data collected may be published in anonymous form in academic books, reports or journals.
- I agree that the researchers may retain your contact details if you decide (optionally) to provide your email address in order to participate in later stages of the research project
- I agree to take part in this study.

[Script] [Script]

consent=2

consent

Having read those statements please decide whether you wish to continue with the survey:

consent = 1 I confirm the statements above and **agree to take part in the survey**.

I do not agree with one or more of these statements and do not wish to take part in the study.

contact

If you have any questions about this form or the study please contact: <u>Professor Dan Rigby</u> at the University of Manchester.

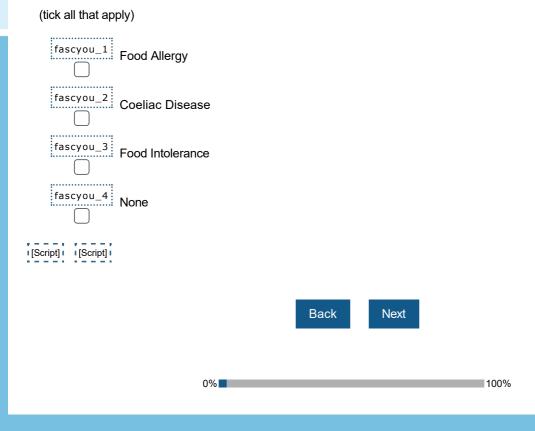
For more information about how we treat the information you provide please have a look at the University of Manchester's <u>Privacy Notice for Research</u>.

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Please tell us which of these conditions you have?

Do NOT answer about children in your household on this page - thanks (We'll ask about children and other adults in your household on the next page).



adultnumb
How many adults (aged 18+) do you live with who have a food hypersensitivity (food allergy, food intolerance, Coeliac disease)?
(enter 0 if you are the only adult in your home with a food hypersensitivity)
I [Script] I
kidnumb
How many children/young people (aged under 18) in your home have a food hypersensitivity (food allergy, food intolerance, Coeliac disease)?
(enter 0 if there are no children/young people in your home with a food hypersensitivity)
Back Next
0%

fascadults

You have told us that you live with iscriptian adults with a food hypersensitivity. For each of those people, please indicate which conditions they have.

	Food Allergy	Coeliac Disease	Food Intolerance	Other
Adult 1	fascadults_r1_c1	fascadults_r1_c2	fascadults_r1_c3	fascadults_r1_c4
Adult 2	fascadults_r2_c1	fascadults_r2_c2	fascadults_r2_c3	fascadults_r2_c4
Adult 3	fascadults_r3_c1	fascadults_r3_c2	fascadults_r3_c3	fascadults_r3_c4
Adult 4	fascadults_r4_c1	fascadults_r4_c2	fascadults_r4_c3	fascadults_r4_c4
Adult 5	fascadults_r5_c1	fascadults_r5_c2	fascadults_r5_c3	fascadults_r5_c4
Adult 6	fascadults_r6_c1	fascadults_r6_c2	fascadults_r6_c3	fascadults_r6_c4
Adult 7	fascadults_r7_c1	fascadults_r7_c2	fascadults_r7_c3	fascadults_r7_c4
Adult 8	fascadults_r8_c1	fascadults_r8_c2	fascadults_r8_c3	fascadults_r8_c4
Adult 9	fascadults_r9_c1	fascadults_r9_c2	fascadults_r9_c3	fascadults_r9_c4
Adult 10	fascadults_r10_c1	fascadults_r10_c2	fascadults_r10_c3	fascadults_r10_c4
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kidage

You have told us that you live with [Script] [Script] under 18 years of age with a food hypersensitivity.

Please indicate their age and which condition(s) they have.

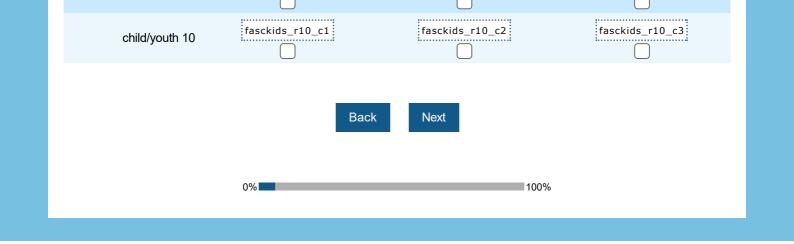
	Age (years)
child/youth 1	kidage_r1_c1
child/youth 2	kidage_r2_c1
child/youth 3	kidage_r3_c1
child/youth 4	kidage_r4_c1
child/youth 5	kidage_r5_c1
child/youth 6	kidage_r6_c1
child/youth 7	kidage_r7_c1
child/youth 8	kidage_r8_c1
child/youth 9	kidage_r9_c1
child/youth 10	kidage_r10_c1

fasckids

For each child or young adult (less than 18) you live with who has a food hypersensitivity , please indicate which conditions they have.

Use as many rows as you need (leave the rest blank).

	Food Allergy	Coeliac Disease	Food Intolerance
child/youth 1	fasckids_r1_c1	fasckids_r1_c2	fasckids_r1_c3
child/youth 2	fasckids_r2_c1	fasckids_r2_c2	fasckids_r2_c3
child/youth 3	fasckids_r3_c1	fasckids_r3_c2	fasckids_r3_c3
child/youth 4	fasckids_r4_c1	fasckids_r4_c2	fasckids_r4_c3
child/youth 5	fasckids_r5_c1	fasckids_r5_c2	fasckids_r5_c3
child/youth 6	fasckids_r6_c1	fasckids_r6_c2	fasckids_r6_c3
child/youth 7	fasckids_r7_c1	fasckids_r7_c2	fasckids_r7_c3
child/youth 8	fasckids_r8_c1	fasckids_r8_c2	fasckids_r8_c3
child/youth 9	fasckids_r9_c1	fasckids_r9_c2	fasckids_r9_c3



adultcond

You have told us you have more than one condition - please select the one* which has the greatest impact on you.

	Food Allergy	Coeliac Disease	Food Intolerance
I have	adultcond_r1=1	adultcond_r1=2	adultcond_r1=3

* we ask this to ensure we show you appropriate questions later on (it would take you too long if we showed you questions for more than one food hypersensitivity).

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conditionsummary

Thank you for telling us about the people in your household who have a food hypersensitivity.

You have indicated that you:

--have a food hypersensitivity

--do NOT live with children with a food hypersensitivity

--do NOT live with adults with a food hypersensitivity

If any of this information is not correct - use the BACK button below to go back and change your responses - thanks.

	[Script]	I [Script] I	I [Script] I		Back	Next	
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pickonechild

You have told us you live with more than one child with a food hypersensitivity.

In some of the questions that follow we will ask you to answer questions about "your child".

When we do that we would like you to think about just one of your children with a Food Hypersensitivity.

pickonechild2

Ideally that would be a child aged 4+ who has a Food Hypersensitivity.

• If you have more than one child aged 4+ who has a Food Hypersensitivity:

....then answer about the child who is worst affected by their Food Hypersensitivity. If it's hard to say who is worst affected, choose the child aged 4+, who had their birthday most recently.

• If all your child/children with a Food Hypersensitivity are aged 3 or less:

...then answer about the child who is worst affected by their Food Hypersensitivity. If it's hard to say who is worst affected, choose the oldest child.

pickonechild1

So, please decide now which of your children you will answer about when we ask about "your child".

childage

Г

Please tell us the age of the child you will be answering about today in the questions when we ask about your "your child":

	Back	Next		
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Thank you.

And please tell us which food hypersensitivity this child aged [Script] has.

If they have more than one condition, please select the one* which has the greatest impact on them.

	Food Allergy	Coeliac Disease	Food Intolerance
They are most affected by	childcond_r1=1	childcond_r1=2	childcond_r1=3

* we ask this to ensure we show you appropriate questions later on (it would take you too long if we showed you questions for more than one food hypersensitivity).

	Back	Next	
0%	 		100%



Thank you.

You have told us your child has more than one food hypersensitivity.

Please select the one* which has the greatest impact on them.

	Food Allergy	Coeliac Disease	Food Intolerance
They are most affected by	kid1cond_r1=1	kid1cond_r1=2	kid1cond_r1=3

* we ask this to ensure we show you appropriate questions later on (it would take you too long if we showed you questions for more than one food hypersensitivity).

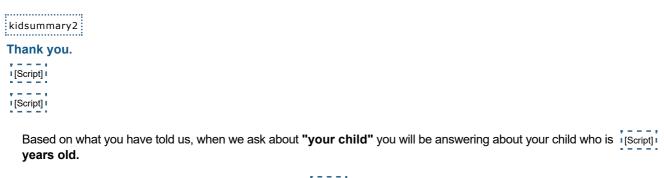
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kidsummary

Thank you, we are just processing what you have told us to make sure we understand who has which food hypersensitivities in your household.

Please press NEXT

I [Script] I				
[Script]				
		Back	Next	
	0%			100%



Their only, or most significant, food hypersensitivity is [Script]

If any of this information is not correct - use the BACK button below to go back and change your responses - thanks.

	Back	Next		
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STARTofWave1FHquestions	
Thank you, we would like to know a little about your child's health and their food hypersensitivity.	
Back Next	
0%	

whendiagk

Approximately how old was your [Script] year old child when their [Script] was diagnosed or when you diagnosed it yourself?

howdiagnosedk

How did you find out about their [Script]?

(Please select all that apply)

howdiagnosedk_1	A health care professional diagnosed it after asking questions about their symptoms and didn't do any tests
howdiagnosedk_2	They had a skin prick test
howdiagnosedk_3	They had a positive blood test (showing antibodies were present for allergy)
howdiagnosedk_4	They had a food challenge
howdiagnosedk_5	They had a blood test to show antibodies were positive for Coeliac Disease
howdiagnosedk_6	They or I noticed that this food causes them problems, but they have not been formally diagnosed with a specific condition
howdiagnosedk_7	They have been diagnosed by an alternative or complementary therapist
	I don't know or can't remember
howdiagnosedk_9	Other, please tell us
	Back Next
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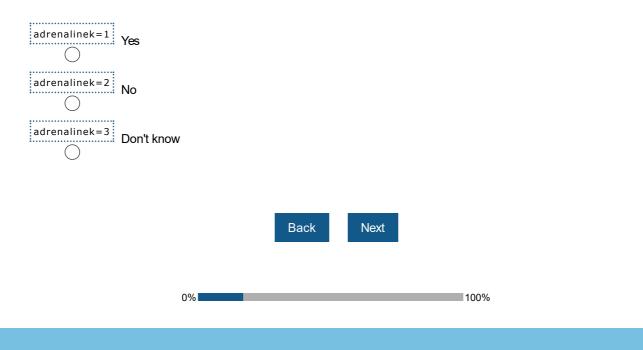
whodiagnosedk If their (Script) was diagnosed by a health care professional, please tell us what type

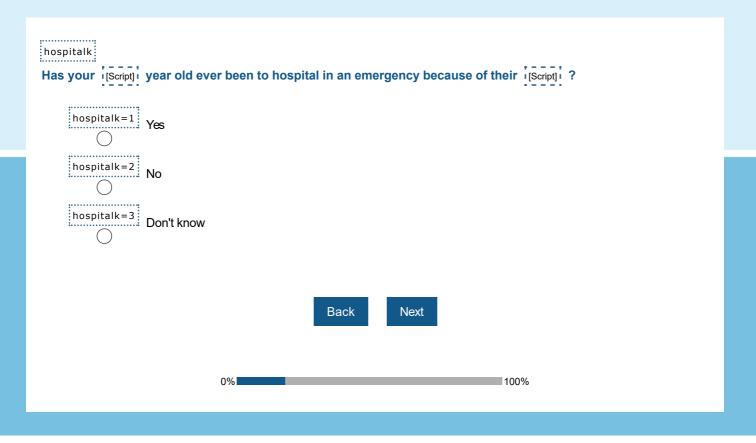
(please select one only)

whodiagnosedk=1	G.P
whodiagnosedk=2	Nurse at your G.P. surgery
whodiagnosedk=3	Hospital doctor
whodiagnosedk=4	Nurse at the hospital
whodiagnosedk=5	Dietician
whodiagnosedk=6	Pharmacist
whodiagnosedk=7	Someone at the GP surgery but I am not sure who they were
whodiagnosedk=8	Someone at the hospital but I am not sure who they were
whodiagnosedk=9	whodiagnosedk_9_other
\bigcirc	Other (please say):
	Back Next
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adrenalinek

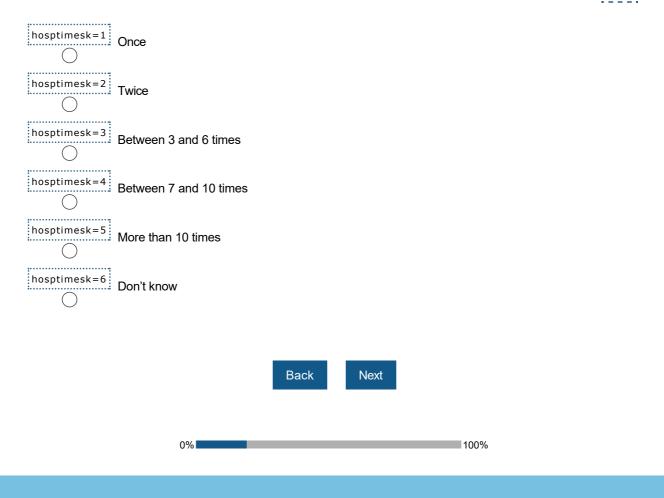
Has your child been prescribed an adrenaline auto-injector such as Epi-Pen, Emerade or JEXT?





hosptimesk

Approximately how many times has your child had to go to hospital in an emergency because of their (Script)?





Thank you

We would like to ask about your [Script] year old's health today..

EQintrok2

Children differ in how fit and healthy they are.

EQintrok3

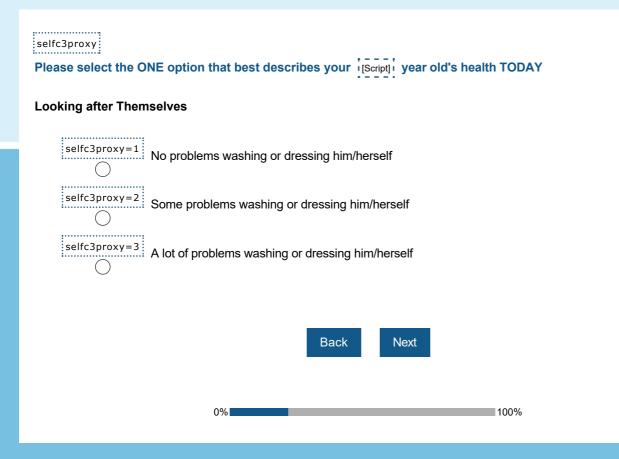
We are going to show you a form that is used internationally to rate children's health on 5 aspects:

- Mobility
- Selfcare
- Performing usual activities
- Pain/Discomfort
- Anxiety/depression

- we'd like you to rate your child's health today using it

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mob3proxy
Please select the ONE option that best describes your [Script] year old's health TODAY
Mobility (walking about)
No problems walking about
Some problems walking about
A lot of problems walking about
Back Next
0%



usual3proxy Please select the ONE option that best describes your [Script] year old's health TODAY

Doing Usual Activities (for example: going to school, hobbies, sports, playing, doing things with family or friends)

usual3proxy=1 No problems doing his/her usual activities	
usual3proxy=2 Some problems doing his/her usual activities	
A lot of problems doing his/her usual activities	
Back Next	
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pain3proxy				
Please select the ONE option that best describes	s your	pt] year	old's health TODAY	,
Having pain or discomfort				
pain3proxy=1 No pain or discomfort				
pain3proxy=2 Some pain or discomfort				
pain3proxy=3 A lot of pain or discomfort				
_				
	Back	Next		

100%

0%

anxious3proxy
Please select the ONE option that best describes your [Script] year old's health TODAY
Feeling worried, sad or unhappy
anxious3proxy=1 Not worried, sad or unhappy
anxious3proxy=2 A bit worried, sad or unhappy
anxious3proxy=3 Very worried, sad or unhappy
Back Next

100%

0%

VASerror1

Note that the Visual Analogue Scale 'thermometer' question was programmed using Java and its appearance is not well represented in this PDF version of the survey - the project report includes screenshots of the VAS question.

healthscorekid	
	Your Health Today
Item 1	healthscorekid_r1_c1
	Back Next 0%

qolintrokid				
Thank you.				
We would like you now to comple	ete some question	s about the im	pact your child's	has on them and their life.
		Back	Next	
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FAQLQint0to12a

Food Allergy Quality of Life Questionnaire-Parent Form (FAQoL-PF)

Children aged 0-12 years

The following are scenarios that parents have told us affect children's quality of life because of food allergy.

FAQLQint0to12b										
	wer each question by									
0 - not 1	- barely 2 - slig	htly 3 - modera	ately 4 - qu	ite 5 - very	6 - extremely					
childfaq1to5										
	Because of their for	od allergy, my child f	eels							
	0 not	1 barely	2 slightly	3 moderately	4 quite	5 very	e			
Anxious about food	childfaq1to5_r1=1	childfaq1to5_r1=2	childfaq1to5_r1=3	childfaq1to5_r1=4	childfaq1to5_r1=5	childfaq1to5_r1=6	childf			
Different from other children	childfaq1to5_r2=1	childfaq1to5_r2=2	childfaq1to5_r2=3	childfaq1to5_r2=4	childfaq1to5_r2=5	childfaq1to5_r2=6	childf			
Frustrated by dietary restrictions	childfaq1to5_r3=1	childfaq1to5_r3=2	childfaq1to5_r3=3	childfaq1to5_r3=4	childfaq1to5_r3=5	childfaq1to5_r3=6	childf			
Afraid to try unfamiliar foods	childfaq1to5_r4=1	childfaq1to5_r4=2	childfaq1to5_r4=3	childfaq1to5_r4=4	childfaq1to5_r4=5	childfaq1to5_r4=6	childf			
Concerned that I am worried that he/she will have a reaction to food	childfaq1to5_r5=1	childfaq1to5_r5=2	childfaq1to5_r5=3	childfaq1to5_r5=4	childfaq1to5_r5=5	childfaq1to5_r5=6	childf			
childfaq6to8 Because of their food allergy, my child										
	0 not	1 barely	2 slightly	3 moderately	4 quite	5 very				
Experiences physica distress		childfaq6to8_r1=2		childfaq6to8_r1=4	childfaq6to8_r1=5	childfaq6to8_r1=6	child			
Experiences emotiona distress		childfaq6to8_r2=2	childfaq6to8_r2=3	childfaq6to8_r2=4	childfaq6to8_r2=5	childfaq6to8_r2=6	child			
Has a lacl of variety ir his/her die				childfaq6to8_r3=4	childfaq6to8_r3=5	childfaq6to8_r3=6	child			
	0	8a0	ck Next	100%						

······							
FAQLQint0to		marking the appropria	ate hov:				
	- barely 2 - sligh			5 - very 6 - e	xtremely		
childfaq9to1							
	Because of their foo	d allergy, my child has	s been negatively aπe	3	4	5	
Receiving	not	barely	slightly	moderately	quite	very	
attention than other children of his/her age	childfaq9to11_r1=1	childfaq9to11_r1=2	childfaq9to11_r1=3	childfaq9to11_r1=4	childfaq9to11_r1=5	childfaq9to11_r1=6	childfa
Having to grow up more quickly than other children of his/her age	childfaq9to11_r2=1	childfaq9to11_r2=2	childfaq9to11_r2=3	childfaq9to11_r2=4	childfaq9to11_r2=5	childfaq9to11_r2=6	childfa
His/her environment being more restricted than other children of his/her age		childfaq9to11_r3=2	childfaq9to11_r3=3	childfaq9to11_r3=4	childfaq9to11_r3=5	childfaq9to11_r3=6	childfa
childfaq12to	Because of food alle	ergy, my child's social	2	3	4	5	
Restaurants	not	barely	slightly	moderately	quite	very	
we can safely go to as a family	childfaq12to13_r1=1		childfaq12to13_r1=			_r1=5 childfaq12to13	_r1=6
Holiday destinations we can safely go to as a family	childfaq12to13_r2=1	childfaq12to13_r2=2	childfaq12to13_r2=	3 childfaq12to13_r	2=4 childfaq12to13	r2=5 childfaq12to13	_r2=6
childfaq14	Passure of food alla		in take yout has been l	incide al			
	0	rgy, my child's ability t 1	2 3	4	5	6	
In social activities in other people's houses (sleepovers, parties,			aq14_r1=3 C				
playtime)		Back	Next				

0 - not 1 - b	arely	2 - slightly	rking the appropri 3 - moderate		4 - quite	5	-very 6-e	xtremely	,			
	arciy	2 - Signuy	J - moderate	ıy	4 - quite		- very 0-e.	Allemery				
childfaq15		Because of	food allergy, my ch	nild's	ability to take part	has I	been limited					
		0 not	1 barely		2 slightly		3 moderately	q	4 juite	5 very	extre	
In prescho events involvi parties/treats/lu	ng food (class		1=1 childfaq15_r		childfaq15_r1=3	chil	dfaq15_r1=4	childfac	115_r1=5	childfaq15_	r1=6 childfaq	L5_r1=
childfaq16to22		e of food aller	gy, my child feels.									
	Dooudot	0 not	1 barely		2 slightly		3 moderately	,	a	4 uite	5 very	
Anxious when going to new places		16to22_r1=1			childfaq16to22_r1					ito22_r1=5	childfaq16to22	_r1=6
Concerned that he/she must always be cautious about food	childfaq	16to22_r2=1	childfaq16to22_r:	2=2	childfaq16to22_r2		childfaq16to22		childfaq16 (0to22_r2=5	childfaq16to22	_r2=6
'Left out' in activities involving food	childfaq	16to22_r3=1	childfaq16to22_r	3=2	childfaq16to22_r3		childfaq16to22	_r3=4	childfaq16	ito22_r3=5	childfaq16to22	_r3=6
Upset that family social outings (eating out, celebrations, days out) have been limited by food allergy	childfaq	16to22_r4=1	childfaq16to22_r	4=2	childfaq16to22_r4	=3	childfaq16to22	_r4=4	childfaq16	ito22_r4=5	childfaq16to22	_r4=6
Anxious about accidentally eating an ingredient to which he/she is allergic	childfaq	16to22_r5=1	childfaq16to22_r	5=2	childfaq16to22_r5	=3	childfaq16to22	_r5=4	childfaq16	ito22_r5=5	childfaq16to22	_r5=6
Anxious when eating with unfamiliar adults/children	childfaq	16to22_r6=1	childfaq16to22_r	6=2	childfaq16to22_r6		childfaq16to22		childfaq16	ito22_r6=5	childfaq16to22	_r6=6
Frustrated by social restrictions	childfaq	16to22_r7=1	childfaq16to22_r	7=2	childfaq16to22_r7	=3	childfaq16to22	_r7=4	childfaq16	ito22_r7=5	childfaq16to22	_r7=6
childfaq23to26												
Bec	ause of f	food allergy, i	ny child		2		3		4		5	
ls more anxious	not		barely		slightly		moderately		quite		very	
in general than other children of his/her age	ldfaq23to	26_r1=1 ch	ildfaq23to26_r1=2		ldfaq23to26_r1=3		dfaq23to26_r1=		ldfaq23to26	_r1=5 chi	ildfaq23to26_r1=	6 cl
Is more cautious in general than other children of his/her age	ldfaq23to	26_r2=1 ch	illdfaq23to26_r2=2	chi	ldfaq23to26_r2=3	chil	dfaq23to26_r2=	4 chi	ldfaq23to26	_r2=5 ch	dfaq23to26_r2=	6 C
Is not as confident as other	ldfaq23to		ildfaq23to26_r3=2		ldfaq23to26_r3=3		dfaq23to26_r3=		ldfaq23to26		ildfaq23to26_r3=	6 cł

Wishes his/her food allergy would go away	childfaq23to26_r4=1		childfaq23to26_r4=3	childfaq23to26_r4=4	childfaq23to26_r4=5	childfaq23to26_r4=6
		Back	Next			
	09	6		100%		

FAQLQint7							
Please and	swer e		rking the appropriate b	oox:			
0 - not	1 - bar	ely 2 - slightly	3 - moderately	4 - quite	5 - very 6 - extremel	у	
childfaq271	to30	ecause of food allere	gy, my child feels				
		0	1	2	3	4	5
Worried at	hout	not	barely	slightly	moderately	quite	very
his/her fu	iture					childfaq27to30_r1=5	
(opportuni relationsh		\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
That m							
people do underst						childfaq27to30_r2=5	
the ser nature of f	ious ^{1.}	\bigcirc		\bigcirc			
	ergy						
Concerne poor labe		childfag27to30_r3-1	childfag27to30_r3-2		childfag27to30_r3-4	childfaq27to30 r3=5	childfag27to30_r3-6
on f	food						
prod That f		Ŭ	Ŭ	Ŭ	Ŭ	Ŭ	Ŭ
allergy li	mits	childfaq27to30_r4=1			childfaq27to30_r4=4	childfaq27to30_r4=5	childfaq27to30_r4=6
his/her lit gen	fe in neral	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
			Back	Next			
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Food Allergy Quality of Life Questionnaire - Parent Form - Adolescents Aged 13-17

The following are all scenarios that parents have told us affect their adolescent's quality of life because of food allergy.

FAQLQint13to17b

Please indicate how much of an impact each scenario has on your teenager's quality of life by selecting one of the boxes number 0-6.

If you believe the scenario has no impact please choose 0 (not at all).

It is important that you answer all the questions to help us understand the impact of food allergy on the quality of life of teenagers.

You may choose from one of the following answers:

0 - not 1 - barely 2 - slightly 3 - moderately 4 - quite 5 - very 6 - extremely

teenfaq1to9

	Dietary Frustrations	5					
	0 not	1 barely	2 slightly	3 moderately	4 quite	5 very	6 extremely
My teenager misses out because of food allergy	teenfaq1to9_r1=1				teenfaq1to9_r1=5		-
My teenager gets frustrated because of food allergy	teenfaq1to9_r2=1	teenfaq1to9_r2=2	teenfaq1to9_r2=3	teenfaq1to9_r2=4	teenfaq1to9_r2=5	teenfaq1to9_r2=6	teenfaq1to9_
My teenager has a restricted diet because of food allergy	teenfaq1to9_r3=1	teenfaq1to9_r3=2	teenfaq1to9_r3=3	teenfaq1to9_r3=4	teenfaq1to9_r3=5	teenfaq1to9_r3=6	teenfaq1to9_
My teenager gets irritated by his/her food allergy	teenfaq1to9_r4=1	teenfaq1to9_r4=2	teenfaq1to9_r4=3		teenfaq1to9_r4=5	teenfaq1to9_r4=6	teenfaq1to9_
My teenager has to be more responsible than other teenagers	teenfaq1to9_r5=1	teenfaq1to9_r5=2	teenfaq1to9_r5=3	teenfaq1to9_r5=4	teenfaq1to9_r5=5	teenfaq1to9_r5=6	teenfaq1to9_
My teenager always eats the same foods because of food allergy	teenfaq1to9_r6=1	teenfaq1to9_r6=2	teenfaq1to9_r6=3	teenfaq1to9_r6=4	teenfaq1to9_r6=5	teenfaq1to9_r6=6	teenfaq1to9_
My teenager cannot experiment with different foods on holiday because of food allergy	teenfaq1to9_r7=1	teenfaq1to9_r7=2	teenfaq1to9_r7=3	teenfaq1to9_r7=4	teenfaq1to9_r7=5	teenfaq1to9_r7=6	teenfaq1to9_
My teenager feels different to other teenagers because of food allergy	teenfaq1to9_r8=1	teenfaq1to9_r8=2	teenfaq1to9_r8=3	teenfag1to9 r8=4	teenfaq1to9_r8=5	teenfaq1to9_r8=6	teenfaq1to9_
My teenager feels anxious in	teenfaq1to9_r9=1	teenfaq1to9_r9=2	teenfaq1to9_r9=3	teenfaq1to9_r9=4	teenfaq1to9_r9=5	teenfaq1to9_r9=6	teenfaq1to9_

restaurants	i								
	teenfaq10to16 Social Restrictions								
		1	2	3	4	5			
	not	barely	slightly	moderately	quite	very			
My teenager finds it difficult to ask about food ingredients in restaurants	teenfaq10to16_r1=1	teenfaq10to16_r1=2	teenfaq10to16_r1=3	teenfaq10to16_r1=4	teenfaq10to16_r1=5	teenfaq10to16_r1=6			
My teenager avoids telling people about his/her food allergy until he/she knows them well	teenfaq10to16_r2=1	teenfaq10to16_r2=2	teenfaq10to16_r2=3	teenfaq10to16_r2=4	teenfaq10to16_r2=5	teenfaq10to16_r2=6			
My teenager worries as he/she always has to carry a bag because of his/her medication	teenfaq10to16_r3=1	teenfaq10to16_r3=2	teenfaq10to16_r3=3	teenfaq10to16_r3=4	teenfaq10to16_r3=5	teenfaq10to16_r3=6			
My teenager worries that he/she can only eat in a limited range of restaurants	teenfaq10to16_r4=1	teenfaq10to16_r4=2	teenfaq10to16_r4=3	teenfaq10to16_r4=4	teenfaq10to16_r4=5	teenfaq10to16_r4=6			
My teenager feels different because he/she cannot eat what his/her friends can eat	teenfaq10to16_r5=1	teenfaq10to16_r5=2		teenfaq10to16_r5=4		teenfaq10to16_r5=6			
School trips away are not easy for my teenager		teenfaq10to16_r6=2		teenfaq10to16_r6=4		teenfaq10to16_r6=6			
My teenager sticks to foods he/she knows		teenfaq10to16_r7=2	teenfaq10to16_r7=3		teenfaq10to16_r7=5				
	0%1	Back	Next	100%					

It is important the teenagers. You may choose 0 - not 1 teenfaq17to22 Psy My teenager has been really scared by having a reaction My teenager gets frightened about food allergy My teenager feels nervous around the food they are albergic to because of food allergy I feel my teenager has had to grow teenager	e from one of the folic - barely 2 - slip ychological Impact 0 not enfaq17to22_r1=1 O enfaq17to22_r2=1	owing answers: ghtly 3 - moderate 1 barely	lerstand the impact of foc ely 4 - quite	allergy on the quality of 5 - very 6 - extrema 3 moderately teenfaq17to22_r1=4 0	mely 4 quite	5 very teenfaq17to22_r1=6
0 - not 1 teenfaq17to222 Psy has been really scared by having a reaction My teenager gets frightened about food allergy My teenager feels nervous around the food allergic to because of food allergy I feel my teenager has had teenager allergic to because of food allergy	- barely 2 - slip	ghtly 3 - moderate	2 slightly teenfaq17to22_r1=3	3 moderately teenfaq17to22_r1=4	4 quite	very
teenfaq17to22 Psy has been really scared by having a reaction My teenager gets frightened about food allergy My teenager feels nervous around the food allergy I feel my teenager has had teenager feels nervous around the food allergy Leenager feels nervous around the food allergy Leenager feels nervous around the food allergy Leenager feels nervous around the food allergy Leenager feels nervous around the food allergy Leenager feels nervous around teenager has had teenager has had has	ychological Impact 0 not enfaq17to22_r1=1	1 barely	slightly	moderately teenfaq17to22_r1=4		very
My teenager has been really scared by having a reaction My teenager gets frightened about food allergy My teenager feels nervous around the food allergy I feel my teenager has had to grow up more quickly because of food allergy	0 not	1 barely	slightly	moderately teenfaq17to22_r1=4		very
teenager has been really scared by having a reaction My teenager gets frightened about food allergy My teenager feels nervous around the food allergy I feel my teenager has had to grow up more quickly because of food allergy	enfaq17to22_r1=1	teenfaq17to22_r1=2	teenfaq17to22_r1=3	teenfaq17to22_r1=4		
My teenager gets frightened about food allergy My teenager feels nervous around the food allergy Leenager has had to grow up more quickly because of food allergy	0	teenfaq17to22_r2=2	teenfaq17to22_r2=3	teenfag17to22_r2_4		
teenager feels nervous around the food they are allergic to because of food allergy I feel my teenager has had to grow up more quickly because of food allergy					teenfaq17to22_r2=5	teenfaq17to22_r2=6
teenager has had to grow up more quickly because of food allergy		teenfaq17to22_r3=2	teenfaq17to22_r3=3	teenfaq17to22_r3=4	teenfaq17to22_r3=5	teenfaq17to22_r3=6
My	enfaq17to22_r4=1	teenfaq17to22_r4=2	teenfaq17to22_r4=3	teenfaq17to22_r4=4	teenfaq17to22_r4=5	teenfaq17to22_r4=6
teenager has been teased because of food allergy	enfaq17to22_r5=1	teenfaq17to22_r5=2	teenfaq17to22_r5=3	teenfaq17to22_r5=4	teenfaq17to22_r5=5	teenfaq17to22_r5=6
My teenager is more				teenfaq17to22_r6=4		teenfaq17to22_r6=6
teenfaq23to26						
Foc	od Allergy Awarene	1	2	3	4	5
My teenager takes more of an terest in food because of food allergy	not	barely teenfaq23to26_r1=2	slightly teenfaq23to26_r1=3	moderately teenfaq23to26_r1=4	quite	very teenfaq23to26_r1=6

reads the label on everything he/she eats	teenfaq23to26_r2=1	teenfaq23to26_r2=2	teenfaq23to26_r2=3	teenfaq23to26_r2=4	teenfaq23to26_r2=5	teenfaq23to26_r2=6
My teenager is frustrated about food labelling	teenfaq23to26_r3=1	teenfaq23to26_r3=2	teenfaq23to26_r3=3	teenfaq23to26_r3=4	teenfaq23to26_r3=5	teenfaq23to26_r3=6
My teenager is more wary of situations because of food allergy	teenfaq23to26_r4=1	teenfaq23to26_r4=2	teenfaq23to26_r4=3	teenfaq23to26_r4=4	teenfaq23to26_r4=5	teenfaq23to26_r4=6
	0%	Back	Next	100%		

IntoleranceLO								
Food Intolerance Quality of Life Questionnaire- Parent Form (FIQLQ-PF)								
		Childr	en aged 0-17 years					
FIQLQintroAlla The following are scenarios that parents have told us affect their children's quality of life because of food intolerance. We are interested in All or Any food intolerances.								
FIQLQintroAll	:							
Please indication boxes numb		n impact each scena	rio has on your chil	d's quality of life by	selecting one of the	Э		
0 - not 1 ·	- barely 2 - slig	ghtly 3 - mode	rately 4 - c	quite 5 - very	6 - extremely			
childfiq1to5								
	Because of food in	tolerance, my child	feels					
	0 not	1 barely	2 slightly	3 moderately	4 quite	5 very	ext	
Upset about being intolerant to food	childfiq1to5_r1=1	childfiq1to5_r1=2	childfiq1to5_r1=3	childfiq1to5_r1=4	childfiq1to5_r1=5	childfiq1to5_r1=6	childfiq:	
Different from other children in food related situations	childfiq1to5_r2=1	childfiq1to5_r2=2	childfiq1to5_r2=3	childfiq1to5_r2=4	childfiq1to5_r2=5	childfiq1to5_r2=6	childfiq	
Frustrated by having to avoid many foods	childfiq1to5_r3=1	childfiq1to5_r3=2	childfiq1to5_r3=3	childfiq1to5_r3=4	childfiq1to5_r3=5	childfiq1to5_r3=6	childfiq	
Reluctant to try foods he/she has not eaten before	childfiq1to5_r4=1	childfiq1to5_r4=2	childfiq1to5_r4=3	childfiq1to5_r4=4	childfiq1to5_r4=5	childfiq1to5_r4=6	childfiq	
Concerned that I worry about his/her food intolerance	childfiq1to5_r5=1	childfiq1to5_r5=2	childfiq1to5_r5=3	childfiq1to5_r5=4	childfiq1to5_r5=5	childfiq1to5_r5=6	childfiq	
childfiq6to8								
	Because of food i	ntolerance, my child	ł					
	0 not	1 barely	2 slightly	3 moderately	4 quite	5 very	e	
Experiences physical distress from symptoms if he/she has a reaction to food		childfiq6to8_r1=2	childfiq6to8_r1=3	childfiq6to8_r1=4	childfiq6to8_r1=5	childfiq6to8_r1=6	childfi	
Experiences emotional distress from symptoms if he/she has a reaction to food	childfiq6to8_r2=1	childfiq6to8_r2=2	childfiq6to8_r2=3	childfiq6to8_r2=4	childfiq6to8_r2=5	childfiq6to8_r2=6	childfi	
Has limitations								

on the variety of foods that he/she can try or taste	childfiq6to8_r3=1	childfiq6to8_r3=2	childfiq6to8_r3=3	childfiq6to8_r3=4	childfiq6to8_r3=5	childfiq6to8_r3=6	childf
		Ba	ck Next				
	07	%		100%			

FIQLQint4plus1

Please indicate how much of an impact each scenario has on your child's quality of life by selecting one of the boxes numbered 0-6.

childfiq9to10

Beca	use of food int	olerance my cl	hild must be					
2000	0 not	1	2 slightly	3 moderately	4 y quite	5	6 oxtromoly	
More	not	barely	siignuy	moderatel	y quite	very	extremely	
responsible	lfiq9to10_r1=1	childfiq9to10_						
More restricted in his/her everyday environment (e.g. having to follow more 'rules', child or having to avoid certain foods or places), than other children of his/her age.	lfiq9to10_r2=1	childfiq9to10_	r2=2 childfiq9to10	_r2=3 childfiq9to10_	r2=4 childfiq9to10_r	2=5 childfiq9to10_r	2=6 childfiq9to10_	
childfiq11to14 Because of food intolerance, my child experiences limitations on								
		0 not	1 barely	2 slightly	3 moderately	4 quite	5 very	
The varie restaurants he/she safely	ety of e can	not	•	slightly childfiq11to14_r1=3	3	•	very	
restaurants he/she	ety of e can go to	not 1to14_r1=1 c	barely	slightly	3 moderately	quite	very	
restaurants he/she safely Holidays/T Social activities in o people's houses may involve food sleepovers, pa	ety of e can go to ravel childfiq1 childfiq1 childfiq1 childfiq1 childfiq1	not 1to14_r1=1 c 1to14_r2=1 c 0	barely hildfiq11to14_r1=2	slighty childfiq11to14_r1=3	3 moderately childfiq11to14_r1=4	quite	very childfiq11to14_r1=	
restaurants he/she safely Holidays/T Social activities in o people's houses may involve food sleepovers, pa	ety of e can go to ravel childfiq1 childfiq1 childfiq1 childfiq1 childfiq1 childfiq1 childfiq1	not 1to14_r1=1 c 1to14_r2=1 c 1to14_r3=1 c 0	barely hildfiq11to14_r1=2	slighty childfiq11to14_r1=3	3 moderately childfiq11to14_r1=4	quite childfiq11to14_r1=5 childfiq11to14_r2=5	very childfiq11to14_r1= childfiq11to14_r2= childfiq11to14_r2= childfiq11to14_r3=	

FIQLQint4plus2

Please indicate how much of an impact each scenario has on your child's quality of life by selecting one of the boxes numbered 0-6.

childfiq15to19

		lerance, my child feel	S				
	0 not	1 barely	2 slightly	3 moderately	4 quite	5 very	
Frustrated that he/she must be cautious around food	childfiq15to19_r1=1	childfiq15to19_r1=2	childfiq15to19_r1=3	childfiq15to19_r1=4	childfiq15to19_r1=5	childfiq15to19_r1=6	
'Left out' in activities involving food (e.g. unless own food is brought to event)	childfiq15to19_r2=1	childfiq15to19_r2=2	childfiq15to19_r2=3	childfiq15to19_r2=4	childfiq15to19_r2=5	childfiq15to19_r2=6	
Upset that social outings (e.g. going to restaurants or birthday parties) must be planned ahead.	childfiq15to19_r3=1	childfiq15to19_r3=2	childfiq15to19_r3=3	childfiq15to19_r3=4	childfiq15to19_r3=5	childfiq15to19_r3=6	
Concerned about accidentally eating a 'hidden' ingredient	childfiq15to19_r4=1	childfiq15to19_r4=2	childfiq15to19_r4=3	childfiq15to19_r4=4	childfiq15to19_r4=5	childfiq15to19_r4=6	
Frustrated by the need to explain to others	childfiq15to19_r5=1	childfiq15to19_r5=2	childfiq15to19_r5=3	childfiq15to19_r5=4	childfiq15to19_r5=5	childfiq15to19_r5=6	
childfiq20to2	:	lerance, my child, in g	onorol				
	0	1	2	3	4	5	
Must be more aware of risk than other children of his/her age	not childfiq20to22_r1=1	barely childfiq20to22_r1=2	slightly childfiq20to22_r1=3	childfiq20to22_r1=4	quite	very childfiq20to22_r1=6	c
Must be more cautious than other children of his/her age	childfiq20to22_r2=1	childfiq20to22_r2=2	childfiq20to22_r2=3	childfiq20to22_r2=4	childfiq20to22_r2=5	childfiq20to22_r2=6	c
Wishes his/her food intolerance would go away	childfiq20to22_r3=1	childfiq20to22_r3=2	childfiq20to22_r3=3		childfiq20to22_r3=5		с
	0%	Back	Next	100%			

FIQLQint7plus

Please indicate how much of an impact each scenario has on your child's quality of life by selecting one of the boxes numbered 0-6.

childfiq23to25						
	Because of food into	lerance, my child is co	oncerned			
	0 not	1 barely	2 slightly	3 moderately	4 quite	5 very
That he/she will be embarrassed by the symptoms of intolerance in social situations	childfiq23to25_r1=1	childfiq23to25_r1=2	childfiq23to25_r1=3	childfiq23to25_r1=4	childfiq23to25_r1=	
That many people do not understand the needs of people with food intolerance	childfiq23to25_r2=1	childfiq23to25_r2=2	childfiq23to25_r2=3	childfiq23to25_r2=4	childfiq23to25_r2=	5 childfiq23to25_r2=6
By the quality and clarity of 'labelling' in general (e.g. in restaurant menus; on food products)	childfiq23to25_r3=1	childfiq23to25_r3=2	childfiq23to25_r3=3	childfiq23to25_r3=4	childfiq23to25_r3=	5 childfiq23to25_r3=6
	0%/	Back	Next	= 400%		
	0%			100%		

...... coeliacLQkid1

Coeliac Disease - Parent Form

..... coeliacLQkid2

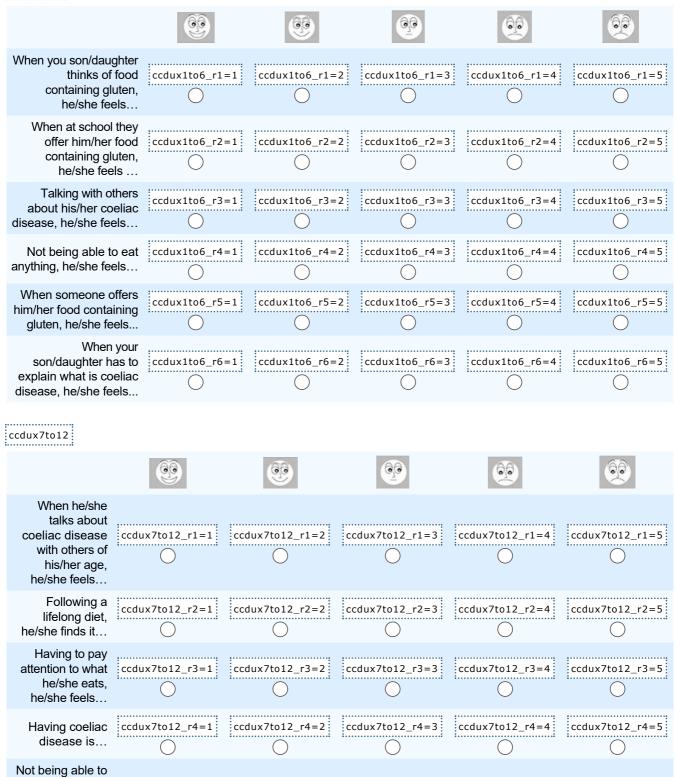
We would like to know how your i [Script] year old have been feeling lately.

In your opinion, mark how they have been feeling recently, in the following situations.

Click the face that best represents how they feel.

There are no wrong answers. It is your view that is important.

ccdux1to6



.....

ccdux7to12_r5=3

.....

ccdux7to12_r5=4

ccdux7to12_r5=5

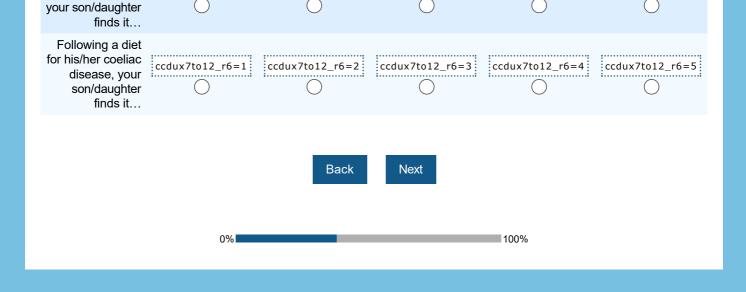
eat all the things ccdux7to12_r5=1 other people eat,

.....

·····

.....

ccdux7to12_r5=2





Thank you.

ChildEQ5DnoFHstart

EQnohyper4

Earlier you scored how your child's health is today in terms of:

- Mobility
- Selfcare
- Performing usual activities
- Pain/Discomfort
- Anxiety/depression

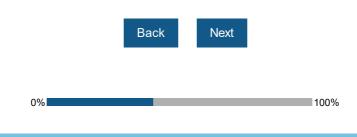
EQnohyper2

Now we would like you to think about what your child's health would be <u>today</u> if they have had no Food Hypersensitivity (no food allergies, food intolerances or Coeliac disease).

	Back	Next	
0%			100%

EQnohyper3

On the pages that follow, please score what you think your child's health would be <u>today</u> if they had no Food Hypersensitivities (No Food Allergy, Food Intolerance or Coeliac disease)



iftheyhad1

If your [[Script]] year old had no food hypersensitivity...

mob3proxyno

Please select the ONE option that you think would best describe their health TODAY if they did not have a food hypersensitivity.

Mobility (walking about)

No problems walking about	t
mob3proxyno=2 Some problems walking about the second s	oout
A lot of problems walking ab	bout
I	Back Next
0%	100%

iftheyhad2

If your [[Script]] year old had no food hypersensitivity...

selfc3proxyno

Please select the ONE option that you think would best describe their health TODAY if they did not have a food hypersensitivity.

Looking after Themselves

selfc3proxyno=1 No problems washing or dressing him/herself	
selfc3proxyno=2 Some problems washing or dressing him/herself	
selfc3proxyno=3 A lot of problems washing or dressing him/herself	
Back Next	
0%	100%
070	100 /0

iftheyhad3 If your [Script] year old had no food hypersensitivity...

usual3proxyno

Please select the ONE option that you think would best describe their health TODAY if they did not have a food hypersensitivity.

Doing Usual Activities (for example: going to school, hobbies, sports, playing, doing things with family or friends)

usual3proxyno=1	No problems doing his/her usual activities					
usual3proxyno=2	Some problems doing his/her usual activities					
usual3proxyno=3	A lot of problems doing his/her usual activities					
	Back Next					
	0%					

iftheyhad4

If your [[Script]] year old had no food hypersensitivity...

pain3proxyno

Please select the ONE option that you think would best describe their health TODAY if they did not have a food hypersensitivity.

Having pain or discomfort

pain3proxyno=1	No pain or discomfort			
pain3proxyno=2	Some pain or discomfort			
pain3proxyno=3	A lot of pain or discomfort			
		Back	Next	
	0%			100%

iftheyhad5

If your [Script] year old had no food hypersensitivity...

anxious3proxyno

Please select the ONE option that you think would best describe their health TODAY if they did not have a food hypersensitivity.

Feeling worried, sad or unhappy

anxious3proxyno=1	Not worried, sad or unhappy
anxious3proxyno=2	A bit worried, sad or unhappy
anxious3proxyno=3	Very worried, sad or unhappy
	Back Next
	0% 100%

VASerror2

Note that the Visual Analogue Scale 'thermometer' question was programmed using Java and its appearance is not well represented in this PDF version of the survey - the project report includes screenshots of the VAS question.

kidnoFHscore

Below is the scale on which you scored your child's health today.

You scored your [Script] year old's health today as [Script].

We'd like you to use it to show what you think that score would be today if they did not have any Food Hypersensitivity.

noFHhealthscorekid	
	Your Health Today
Item 1	noFHhealthscorekid_r1_c1
	0% 100%



Thank you.

You have told us about how your child's hypersensitivity to food affects their health and quality of life, and what their health would be like without their food hypersensitivity.

Now we would like you to think some more about your child not having a food hypersensitivity.

	Back	Next	
0%			100%

pillintrok1

We would like you to imagine that there is a pill available which would remove all the effects of your child's food hypersensitivity (food allergy, food intolerance or Coeliac Disease).

Your child would take a single pill and its effects would last for a certain length of time.

pillintrok2

During this time, they would be able to eat the food(s) to which they are hypersensitive without having any reaction.

After a set length of time their food hypersensitivities would return.



pillsafe1

The pill would be safe.

It would have been tested and been found to have no side effects – taking it would be like taking a food supplement. It would be available in online and high street shops such as health food stores and pharmacies.

onepillonly1

Your child would be able to take only <u>one</u> pill in their lifetime.





So, we are going to ask you to consider some choices.

These choices will be between 2 options:

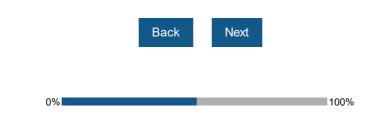
- In Option A nothing changes with your child's food hypersensitivities.
- In Option B the pill they take removes all symptoms and limitations of their food hypersensitivities for the specified period of time.

pilltakenow
If you choose Option B (take the Pill) your child would have to take it now - so think about it like that, rather than
as an option that could be taken at same later date.

	Back	Next		
0%			1	00%

DCEerror

Note that the DCE choice sets were programmed using Java and their appearance is not well represented in this PDF version of the survey - the project report includes screenshots of the choice sets.



explainpillk1

In this example the pill removes your child's food hypersensitivities for 1 year:

- In Option A nothing changes with your child's food hypersensitivities.
- In Option B the pill they take removes all symptoms and limitations of their food hypersensitivities for 1 year. Then those food hypersensitivities return as they are now.

tidtrain_Random1	only options, which would you choose?
Years with no Food Hypersensitivity	None
Annual Cost	£0
	kidtrain_Random1 Select
1 year	
£0	
kidtrain_Rando	m1 Select
	Back Next
	0%

pillreminders1

Thanks. When making your choices please remember these things about the Pill:

- It would have to be taken **now** not at some later date.
- They could only take the Pill once in their lifetime.
- It is 100% effective against all aspects of food hypersensitivity.
- After the time period shown, their food hypersensitivity would return exactly as it is now.

	Back	Next		
0%		_	100)%

explainpillk2

Here is another choice.

Notice that the period of time that the pill removes your child's food hypersensitivities has changed - it is now 5 years

kidtrain_Random2

If these were your only options, which would you choose?

Years with no Food Hypersensitivity	None
Annual Cost	£0
	kidtrain_Random2
	Select
5 years	
£0	
kidtrain_Rando	m2
	Select
	Back Next
	0%

explainpillk3

Here is another choice.

Notice that the period of time that the pill removes your child's food hypersensitivities has changed - it is now 20 years

kidtrain_Random3

If these were your only options, which would you choose?

Years with no Food Hypersensitivity	None
Annual Cost	£0
	kidtrain_Random3
	Select
20 years	
£0	
kidtrain_Rando	m3
	Select
	Back Next
	0%

thanksfreekid Thank you for making	those choices.				
[Script]					
		Back	Next		
	0%			100%	

freenochooseabskid

We notice that you never selected an option involving your child taking the pill to temporarily remove their food hypersensitivity.

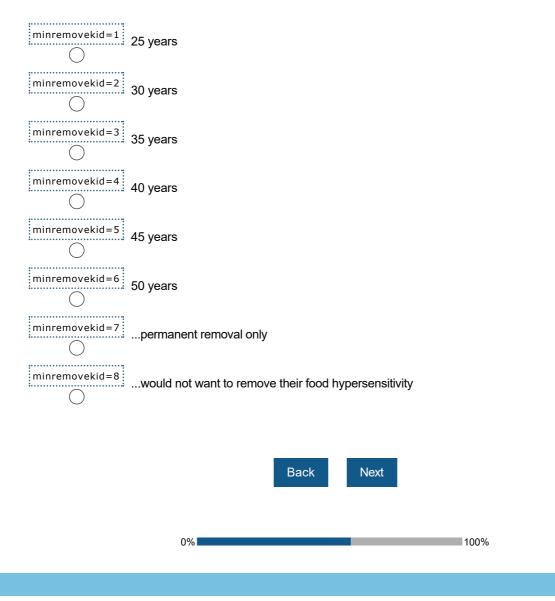
It would be helpful to know why that was - so please select the option that best explains why you never chose the temporary removal of your food hypersensitivity.:

freenochooseabskid=1	My child's condition was not removed for long enough to make it worthwhile.
freenochooseabskid=2	It was not worth it as they would have to adjust to having their condition when it came back.
freenochooseabskid=3	freenochooseabskid_3_other
	Other (please add)
	Back Next
	0%

minremovekid

You declined the option involving the removal of your child's condition for 20 years.

Please tell us the minimum number of years your child's condition would need to be removed for you to select that option:



minthankskid	
Thank you.	
Now, we'll ask you another question about the rem	oval of your child's food hypersensitivity.
I [Script]	
	Back Next
0%	100%

nowpaypillkid

Now we would like you to think about making choices where the pill is available to buy - from a high street shop or online.

You would have to pay for it.

	Back	Next	
0%			100%

pillchoiceskid

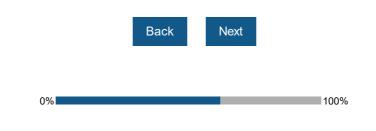
So now the choices will be between:

- nothing changing with your child's food hypersensitivities.
- you buying the pill your child take to remove all symptoms and limitations of their food hypersensitivities for the specified period of time.

showexkid We will show you an example.				
		Back	Next	
	0%			100%

DCEerror1

Note that the DCE choice sets were programmed using Java and their appearance is not well represented in this PDF version of the survey - the project report includes screenshots of the choice sets.



explainpillpayk1

Here the choice is between:

- nothing changing with your child's food hypersensitivities.
- you pay for the pill at a **cost of £1,000** to remove all the symptoms and limitations of your child's food hypersensitivity for **1 year**.

ese were your only options, which would y	
None	1 year
80	£1,000
kidpaytrain_Random1 Select	kidpaytrain_Random1 Select
	Back Next



Thanks. We'd like to say something about the choices we are asking you to make:

We all love our children. We always want them to be well and happy.

It may seem uncomfortable making a choice where you do not pay for the pill and your child's food hypersensitivity continues unchanged – but we all have a fixed budget and have many demands on that budget.

So please do not see those choices as asking if you're a good and caring parent – that's not what we are asking – we want you to consider these choices carefully including whether you really could, now, pay the price shown.



explainpillpayk2

Here is another example of the choices we will ask you to make.

Notice that 2 things have changed in Option B:

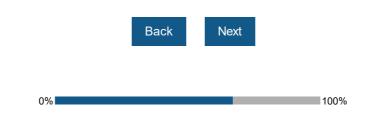
- The period of time that the Pill removes your child's food hypersensitivities it is now 5 years.
- The amount you would have to pay for the Pill the cost is now £5,000 paid at the start of those 5 years.

None	5 years
20	£1,000
kidpaytrain_Random2 Select	kidpaytrain_Random2 Select
	Back Next

explainpillpayk3 Now we will ask you to to make the rest of your choices	
Back Next	
0%	

DCEerror2

Note that the DCE choice sets were programmed using Java and their appearance is not well represented in this PDF version of the survey - the project report includes screenshots of the choice sets.



lone	1 year
0	£500
kidpill_Random1	kidpill_Random1
Select	Select
ice 1 of 9	-
	Back Next

None	1 year	
20	£1,500	
kidpill_Random2	kidpill_Random2 Select	
ice 1 of 9		

lone	5 years	
0	£500	
kidpill_Random3	kidpill_Random3	Select
ce 1 of 9		

None	5 years
20	£1,000
kidpill_Random4	kidpill_Random4
Select	Select
ice 1 of 9	
	Back Next

None	10 years
20	£250
kidpill_Random5	kidpill_Random5 Select
ice 1 of 9	

None		10 years	
20		£5,000	
kidpill_Random6		kidpill_Random6	
Sele	ct	Select	
ice 1 of 9			

lone	15 years
0	£500
kidpill_Random7	kidpill_Random7
Select	Select
ice 1 of 9	
	Back Next

£1,000 kidpill_Random8
kidpill_Random8
elect Select

None	20 years
20	£1,500
kidpill_Random9	kidpill_Random9
Select	Select
ice 1 of 9	
	Back Next

thankspillDCE	
Thank you for completing those choices.	
We'd like to know how you found them	
ı [Script] ı	
Back Next	
0%	

diffpillcompkid

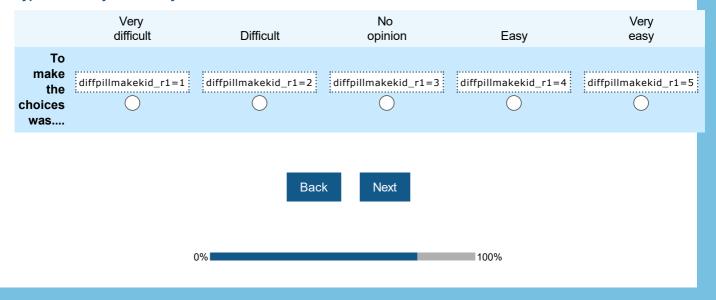
·····

How easy or hard was it to <u>understand</u> the choice questions involving your child's food hypersensitivity and money?

	Very difficult	Difficult	No opinion	Easy	Very easy
To understand the choices	diffpillcompkid_r1=1	diffpillcompkid_r1=2	diffpillcompkid_r1=3	diffpillcompkid_r1=4	diffpillcompkid_r1=5
was	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

diffpillmakekid

How easy or hard was it to <u>decide</u> which option to choose in the questions involving your child's food hypersensitivity and money?



kidnopaypill

We notice that you never selected an option that involved paying to remove the symptoms and limitations of your child's food hypersensitivity.

It would be helpful to know why that was - so please select the option that best explains why you never chose to pay:

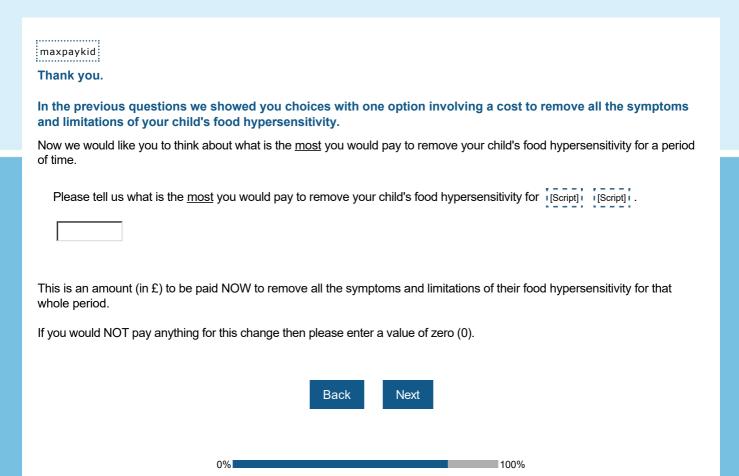
kidnopaypill=1	The cost was too high compared to the benefit my child would get.
kidnopaypill=2	I could not afford to pay what was asked.
kidnopaypill=3	My child's condition was not removed for long enough to make it worth paying the prices offered.
kidnopaypill=4	It was not worth it as they would have to adjust to having their condition when it came back.
kidnopaypill=5	I did not trust that the pill was safe.
kidnopaypill=6	I did not trust that the pill would work.
kidnopaypill=7	I should not have to pay - the government should provide health care.
kidnopaypill=8	kidnopaypill_8_other
\bigcirc	Other (please tell us)
	Back Next
	0%

kidallpaypill

We notice that you always selected the option that involved paying to remove the symptoms and limitations of your child's food hypersensitivity.

It would be helpful to know why that was - so please select the option that best explains why that was the case:

kidallpaypill=1	I did not think the payment was realistic, so I ignored the prices.
kidallpaypill=2	The cost was small compared to the benefit my child would get.
kidallpaypill=3	kidallpaypill_3_other
	Other (please tell us)
	Back Next
	0% 100%



maxpayminremovekid
Thank you.
Now we would like you to think about what is the <u>most</u> you would pay to remove your child's food hypersensitivity for that period of time.
Please tell us what is the most you would pay to remove your child's food hypersensitivity for [Script] years.
This is an amount (in £) to be paid NOW to remove all the symptoms and limitations of your food hypersensitivity for that whole period. If you would NOT pay anything for this change then please enter a value of zero (0).
Back Next
0%

permpayintrokid

In the previous questions we showed you choices in which all the symptoms and limitations of your child's food hypersensitivity were removed for a limited period, then they returned.

Now we would like you to think about the scenario in which your child's food hypersensitivity could be permanently removed.

maxpaypermkid

We would like you to think about what's the most you would be willing and able to to remove your child's food hypersensitivity permanently.

Please tell us what is the most you would be willing and able to pay to achive this.

This is an amount (in £) to be paid NOW to remove all the symptoms and limitations of your child's food hypersensitivity FOREVER.

If you would NOT pay anything for this change then please enter a value of zero (0).



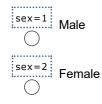
SomeQsAboutYou				
We would like to ask a few que	estions about you.			
	Back	Next		
	0%		100%	

age

Please tell us your age

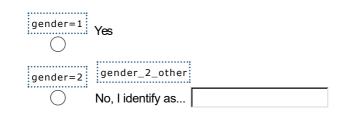
sex

As what sex were you registered when born?



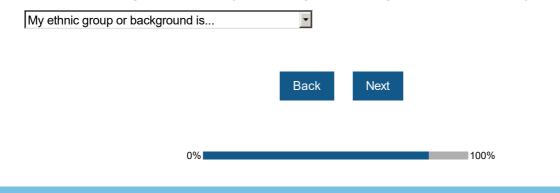
gender

Is that the gender you identify yourself as now?



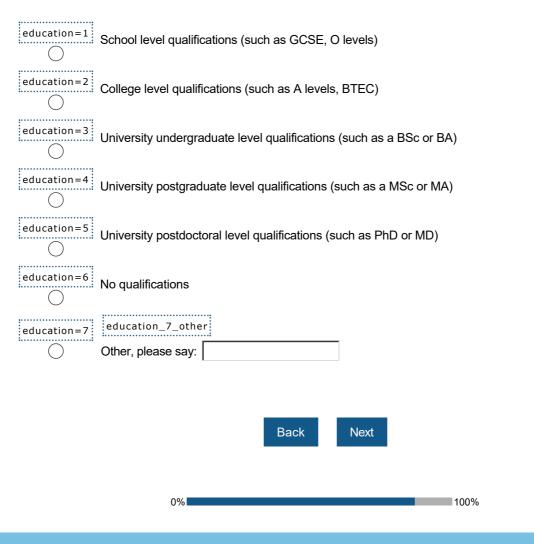
ethnicity

Which of the following best describes your ethnic group or background? (select one only)



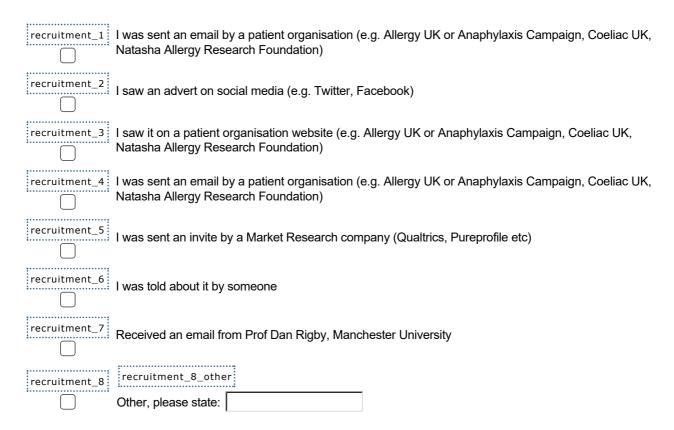
education







Please tell us how you were invited to this survey (select all that apply)



support

Are you a member of a support group or patient organisation because of your bad or unpleasant reaction to food? (please select all that apply)

100%

support_1 Allergy UK
support_2 Anaphylaxis Campaign
support_3 Coeliac UK
support_4 Natasha Allergy Research Foundation
support_5 I am not a member of a support group or patient organisation
support_6 support_6_other
Other please tell us:
Back Next



It would help us to know about the Chief Income Earner in your household

This is the person with the largest income. If this person

- is retired with an occupational pension then answer about their most recent occupation.
- not in a paid job but has been out of work for less than 6 months, then answer about their most recent job. ٠

The Chief Income Earner is (or was)

Semi or unskilled manual work

• (e.g. Manual workers, all apprentices to be skilled trades, Caretaker, Park keeper, non-HGV driver, shop assistant)

Skilled manual worker

..... class=2 (

..... class=1

> • (e.g. Skilled Bricklayer, Carpenter, Plumber, Painter, Bus/ Ambulance Driver, HGV driver, AA patrolman, pub/bar worker, etc.)



Supervisory or clerical/ junior managerial/ professional/ administrative

• (e.g. Office worker, Student Doctor, Foreman with 25+ employees, salesperson, etc)

. class=4 (

class=5

Intermediate managerial/ professional/ administrative

(e.g. Newly qualified (under 3 years) doctor, Solicitor, Board director small organisation, middle manager in large organisation, principal officer in civil service/local government)

Higher managerial/ professional/ administrative

• (e.g. Established doctor, Solicitor, Board Director in a large organisation (200+ employees, top level civil servant/public service employee))

Class=6 Student
Class=7 Casual worker – not in permanent employment
class=8 Homemaker
Class=9 Retired and living on state pension
Class=10 Unemployed or not working due to long-term sickness
Class=11 Full-time carer of other household member

0%

Back	Next
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Please tell us the first part of your postcode

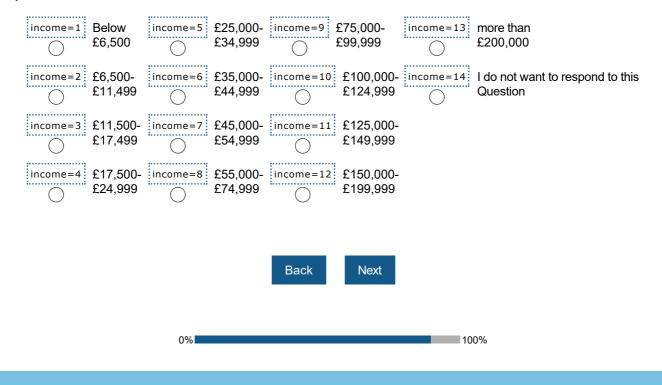
By this we mean just the first 2, 3 or 4 characters, eg M6, E10, SK12:

This information will not be used to identify you in any way but will help us understand how answers are connected to different areas of the UK.

income

Please tell us your Household income group

This is the amount you earn before tax, and includes the people you live with (partner, family) – but do not include people you house/flat share with.





Thank you.

Now we would like you to respond to some questions about your views or perception of your is some for hypersensitivity.

These questions are used in studies around the world to understand people's views or perceptions of their illnesses and conditions.

	Back	Next	
0%			100%

AttMedintro2

For the following questions, please select the option (0 - 10) that best corresponds to your views:

pleffects

How much does your condition affect your life?

	no effect at all 0	1	2	3	4	5	6	7	8
			p1effects_r1=3					p1effects_r1=8	
р	2dur								
	How long do yo	ou think your con	dition will continue	?					
	a very short time 0	1	2 3	4	5	6	7 8	9	forever 10
	p2dur_r1=1	p2dur_r1=2 p2d	ur_r1=3 p2dur_r1	p2dur_r1=5	p2dur_r1=6	p2dur_r1=7 p2d	lur_r1=8 p2dur_	r1=9 p2dur_r1=1	0 p2dur_r1=11
	3control								
		trol do you feel yo	ou have over your o	condition?					
	absolutely no control 0	1	2	3	4	5	6	7	8
	p3control_r1=1	p3control_r1=2	p3control_r1=3	p3control_r1=4	p3control_r1=5	p3control_r1=6	p3control_r1=7	p3control_r1=8	p3control_r1=9
р	4treat								
	How much do y	ou think treatmer	nt can help your co	ndition?					
	not at all 0	1	2	3	-	5 6	7	8	9
				reat_r1=4 p4tre				L=8 p4treat_r1=9	
			Back	Next					
		0%			100%				

p5symps

How much do you experience symptoms from your condition?

no symptoms at

many se sympto 10 all 0
 p5symps_r1=1
 p5symps_r1=2
 p5symps_r1=3
 p5symps_r1=4
 p5symps_r1=5
 p5symps_r1=6
 p5symps_r1=7
 p5symps_r1=8
 p5symps_r1=9
 p5symps_r1=10
 p5symps_r1=10</th

p6concern

How concerned are you about your condition?

not at all

concerned 0 p6concern_r1=1 p6concern_r1=2 p6concern_r1=3 p6concern_r1=4 p6concern_r1=5 p6concern_r1=6 p6concern_r1=7 p6concern_r1=8 p6concern_r1=9 p6concern_r1=10

p7understand

How well do you feel you understand your condition?

0%

don't understand at all 0 p7understand_r1=1 p7understand_r1=2 p7understand_r1=3 p7understand_r1=4 p7understand_r1=5 p7understand_r1=6 p7understand_r1=7 p7understand_r1=8 p7understand

p8emotion

How much does your condition affect you emotionally? (e.g. does it make you angry, scared, upset or depressed?) not at all affected emotionally 0

p8emotion_r1=1 p8emotion_r1=2 p8emotion_r1=3 p8emotion_r1=4 p8emotion_r1=5 p8emotion_r1=6 p8emotion_r1=7 p8emotion_r1=8 p8emotion_r1=9 p8emotion_r1=7

Back	Next
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p1effectsk

How much does your child's condition affect their life?

no effect at all 0	1	2	3	4	5	6	7	8
							pleffectsk_r1=8	p1effectsk_r1=9
0	\bigcirc	0	0	0	\bigcirc	0	0	\bigcirc
p2durk								
How long do you	think your child's	condition will conti	inue?					
a very short time 0	1	2 3	4	5	6	7	8 9	foreve 10
		urk_r1=3 p2durk_r					durk_r1=9 p2durk_	
p3controlk								
How much contro	ol do you feel you l	have over your child	d's condition?					
absolutely no control 0	1	2	3	4	5	6	7	8
							7 p3controlk_r1=8	
p4treatk								
How much do you	u think treatment c	can help your child's	s condition?					
not at all 0	1	2	3	-	5 6		-	9
	p4treatk_r1=2 p	p4treatk_r1=3 p4tr	reatk_r1=4 p4trea	atk_r1=5 p4trea	tk_r1=6 p4treat	k_r1=7 p4treatk	_r1=8 p4treatk_r1	
		Back	Next					
	0%			100%				

p5sympsk

How much does your	child experience	symptoms from thei	ir condition?						
no symptoms at all 0	1	2	3	4	5	6 7	8	9	mar syı
p5sympsk_r1=1 p5s		5sympsk_r1=3 p5syr		ympsk_r1=5 p5syr		npsk_r1=7 p5sympsk			=10 p5sym
p6concernk									
How concerned are yo	ou about your chil	Id's condition?							
not at all concerned 0	1	2	3	4	5	6	7	8	9
		p6concernk_r1=3					p6concernk_r1=8	p6concernk_r1=9	p6concernk_r:
p7understandk									
How well do you feel y	you understand yo	our child's condition	.1?						
don't understand at all 0	1	2		3	4	5	6	7	
p7understandk_r1=1						p7understandk_r1=6			_r1=8 p7un
p8emotionk									
How much does your	child's condition a	affect them emotion	ally? (e.g. does it	make them angry,	, scared, upset or de	pressed?)			
not at all affected emotionally 0	1	2	3	4	5	6	7	8	9
p8emotionk_r1=1 p8		p8emotionk_r1=3	p8emotionk_r1=4					p8emotionk_r1=9	p8emotionk
		Death		-					



100%

riskintro Finally, we would like to ask you about something different - about your attitude to taking risks. These questions are used in studies around the world to understand people's views of taking risks.						
Back Next						
0%						

ris	sk1									
W	e'd like to kno	ow how you s	ee yourself:							
Ar	e you generally	y a person who	o is fully prepare	ed to take risks	s or do you try	to avoid taking	risk?			
Ple	ease choose a	n option where	e 0 means "risk	averse" and 1	0 means "fully	prepared to ta	ke risks".			
	risk averse 0	1	2	3	4	5	6	7	8	9
	risk1_r1=1	risk1_r1=2	risk1_r1=3	risk1_r1=4	risk1_r1=5	risk1_r1=6	risk1_r1=7	risk1_r1=8	risk1_r1=9	risk1_r1=10
				Back	Next					
			0%			10	0%			



People can behave differently in different situations.

How would you rate your willingness to take risks in the following areas?

	risk averse 0	1	2	3	4	5	6	7	8	9
while driving	risk2_r1=1	risk2_r1=2	risk2_r1=3	risk2_r1=4	risk2_r1=5	risk2_r1=6	risk2_r1=7	risk2_r1=8	risk2_r1=9	risk2_r1=
in financial matters	risk2_r2=1	risk2_r2=2	risk2_r2=3	risk2_r2=4	risk2_r2=5	risk2_r2=6	risk2_r2=7	risk2_r2=8	risk2_r2=9	risk2_r2=
during leisure and sports	risk2_r3=1	risk2_r3=2	risk2_r3=3	risk2_r3=4	risk2_r3=5	risk2_r3=6	risk2_r3=7	risk2_r3=8	risk2_r3=9	risk2_r3=
	risk averse									
	0	1	2	3	4	5	6	7	8	9
in your occupation							risk2_r4=7			risk2_r4=
with your health		risk2_r5=2	risk2_r5=3	risk2_r5=4	risk2_r5=5	risk2_r5=6	risk2_r5=7	risk2_r5=8	risk2_r5=9	risk2_r5=
your faith in other people	risk2_r6=1	risk2_r6=2	risk2_r6=3	risk2_r6=4	risk2_r6=5	risk2_r6=6	risk2_r6=7	risk2_r6=8	risk2_r6=9	risk2_r6=
		0%	Bac	k Next	<u> </u>	100%				



Thank you so much for your time and effort - we really appreciate it.

Those are all the questions we have - is there anything else you would like to say about the questions that we have asked you and the choices we have asked you to make?

Please click NEXT to submit	your survey respor	nses.			
		Back	Next		
	011			1008/	
	0%			100%	

byebye	
Thank you Please click NEXT to submit your survey responses.	
Back Next	
0%	
0%	



Note:

0%

When respondents take the survey in regular mode this page will not be displayed. Respondents will be redirected to the link below:

https://www.food.gov.uk/about-us/consumer-research-on-livingwith-a-food-hypersensitivity