

A1.	What year were you born?		
A2.	What is your gender?	Female Male	
A3.	Which county do you live in?		
		England.Bedfordshire	
		England.Berkshire	
		England.Buckinghamshire	
		England.Cambridgeshire	
		England.Cheshire	
		England.City of London	
		England.Cornwall	
		England.Cumbria	
		England.Derbyshire	
		England.Devon	
		England.Dorset	
		England.Durham	
		England.East Riding of Yorkshire	
		England.East Sussex	
		England.Essex	
		England.Gloucestershire	
		England.Greater London	
		England.Greater Manchester	
		England.Hampshire	
		England.Herefordshire	
		England.Hertfordshire	
		England.Isle of Wight	
		England.Kent	
		England.Lancashire	



Eng	land.Leicestershire	
En	ngland.Lincolnshire	
I E	England.Merseyside	
	England.Norfolk	
Englan	nd.North Yorkshire	
England	.Northamptonshire	
Englan	nd.Northumberland	
Englan	nd.Nottinghamshire	
Er	ngland.Oxfordshire	
	England.Rutland	
E	England.Shropshire	
	England.Somerset	
Englar	nd.South Yorkshire	
Enş	gland.Staffordshire	
	England.Suffolk	
	England.Surrey	
Engla	and.Tyne and Wear	
Eng	land.Warwickshire	
Engla	and.West Midlands	
En	ngland.West Sussex	
Engla	nd.West Yorkshire	
	England.Wiltshire	
Engla	and.Worcestershire	
	Wales.Clywd	
	Wales.Dyfed	
	Wales.Gwent	
	Wales.Gwynedd	
Wal	les.Mid Glamorgan	
	Wales.Powys	



Wales.South Glamorgan	
Wales.West Glamorgan	
Scotland.Inverclyde	
Scotland.Renfrewshire	
Scotland.West Dunbartonshire	
Scotland.East Dunbartonshire	
Scotland.Glasgow	
Scotland.East Renfrewshire	
Scotland.North Lanarkshire	
Scotland.Falkirk	
Scotland.West Lothian	
Scotland.Edinburgh	
Scotland.Midlothian	
Scotland.East Lothian	
Scotland.Clackmannanshire	
Scotland.Fife	
Scotland.Dundee	
Scotland.Angus	
Scotland. Aberdeenshire	
Scotland. Aberdeen	
Scotland.Moray	
Scotland.Highland	
Scotland.Na h-Eileanan Siar	
Scotland.Argyll and Bute	
Scotland.Perth and Kinross	
Scotland.Stirling	
Scotland.North Ayrshire	
Scotland.East Ayrshire	
Scotland.South Ayrshire	



	Scotland.Dumfries and Galloway	
	Scotland.South Lanarkshire	
•	Scotland.Scottish Borders	
	Scotland.Orkney	
	Scotland.Shetland	
	Northern Ireland.Antrim	
	Northern Ireland.Armagh	
	Northern Ireland.Derry	
	Northern Ireland.Down	
	Northern Ireland.Fermanagh	
	Northern Ireland. Tyrone	
	Other.Not in United Kingdom	
A4.	Do you consider yourself to have a disability?	
	Yes	
	No	
A5.	What kind of experience do you have interacting with people with disabilities? (You may select more than one answer).	
	Parent(s)	
	Children	
	Sibling(s)	
	Friend(s)	
	Spouse/Partner	
	Volunteering	
	Other	
	None of the above	
A6.	What kind of experience do you have of interacting with older people? (You may select more than one answer).	
	Family	
	Caring Responsibilities	
	Colleague(s)	



	Friend(s)	
	Volunteering	
	Other	
	None of the above	
A7.	Which sector do you work in? (Please choose the most applicable category).	
	Agriculture, forestry & fishing	
	Mining, energy & water supply	
	Construction	
	Wholesale, retail & repair of motor vehicles	
	Transport & storage	
	Accommodation & food services	
	Information & Communication	
	Financial & insurance activities	
	Real estate activities	
	Professional, scientific & technical activities	
	Administrative & support services	
	Public admin, defence & social security	
	Education	
	Human health and social work activities	
	Other services	
A8.	How many people work for your employer, across all of their sites and locations, and including yourself?	
	1 employee (i.e. sole proprietor)	
	2-5 employees	
	6-15 employees	
	16-50 employees	
	51-250 employees	
	250+ employees	



A9.	Are you involved in recruitment and/or retention decisions in your current role?	
	Yes	
	No	
A10.	How long have you been involved in recruitment and retention decisions?	
	Less than 1 year	
	1-2 years	
	3-5 years	
	6-10 years	
	10+ years	
A11.	Which statement best describes you?	
	I strongly prefer non-disabled to disabled persons	
	I moderately prefer non-disabled to disabled persons	
	I slightly prefer non-disabled to disabled persons	
	I like non-disabled and disabled persons equally	
	I slightly prefer disabled to non-disabled persons	
	I moderately prefer disabled to non-disabled persons	
	I strongly prefer disabled to non-disabled persons	
A12.	Which statement best describes you?	
	I strongly prefer young people to old people	
	I moderately prefer young people to old people	
	I slightly prefer young people to old people	
	I like young people and old people equally	
	I slightly prefer old people to young people	
	I moderately prefer old people to young people	
	I strongly prefer old people to young people	



B1.	Please select the ONE box that best describes your health TODAY.		
	MOBILITY		
•	uk-english © EuroQol Research Foundation. EQ-5D™ is a trade mark of the EuroQol Research Foundation. UK (English) v2.0		
	I have no problems in walking about		
		- -	
	I have slight problems in walking about	—	
	I have moderate problems in walking about		
	I have severe problems in walking about	_	
	I am unable to walk about		
C1.	Please select the ONE box that best describes your health TODAY.		
	SELF-CARE		
	uk-english		
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	I have no problems washing or dressing myself		
	I have slight problems washing or dressing myself		
	I have moderate problems washing or dressing myself		
	I have severe problems washing or dressing myself		
	I am unable to wash or dress myself		
D1.	Please select the ONE box that best describes your health TODAY.		
	USUAL ACTIVITIES (e.g. work, study, housework, family or leisure activities)		
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	I have no problems doing my usual activities		
	I have slight problems doing my usual activities		
	I have moderate problems doing my usual activities		
	I have severe problems doing my usual activities		
	I am unable to do my usual activities		



PAIN / DISCOMFORT		
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I have no pain or discomfort		
I have slight pain or discomfort		
I have moderate pain or discomfort		
I have severe pain or discomfort		
I have extreme pain or discomfort		
F1. Please select the ONE box that best describes your health TODAY.		
ANXIETY / DEPRESSION		
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I am not anxious or depressed		
I am slightly anxious or depressed		
I am moderately anxious or depressed		
I am severely anxious or depressed		
I am extremely anxious or depressed		
G1.		
• We would like to know how good or bad your health is TODAY.		
• This scale is numbered from 0 to 100.		
• 100 means the <u>best</u> health you can imagine.		
0 means the <u>worst</u> health you can imagine.		
• Please indicate on the scale how your health is TODAY.		
YOUR HEALTH		
TODAY = uk-english		
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