

Statement of Confidentiality

The identification number allows us to keep track of the questionnaires as they are returned. Any information you provide that would permit the identification of an individual will be kept strictly confidential, will be used only for the purposes of this study, and will not be disclosed or released to any other persons or used for any other purpose.

**Better InformaTion for MAnaging stomach and bowel
Problems (BITMAP)**

Initial Questionnaire

Dear Participant

We would be very grateful if you could help us by completing the enclosed questionnaire and returning it to us in the pre-paid envelope.

It should only take about 20 to 25 minutes to complete.

The information that you give us will be treated in strict confidence.

If you would like any further information or have any questions about this study, please do not hesitate to contact:

We have sent you this questionnaire because your doctor or nurse completed a permission to contact slip when they told you about the BITMAP study at the The University of Manchester. To ensure your details are up-to-date and we can contact you about the follow up part of this study, we would be grateful if you could write your details in the box below.

This page will be separated from the rest of the questionnaire and will be held in strictest confidence. It will only be used for the purposes of this study and will not be shown or given to other persons or used for any other purpose.

Please write your contact details here.

| | |
|----------------------|--|
| Name | |
| Address | |
| | |
| | |
| | |
| Postcode | |
| Telephone | |
| Email address | |

Participant Study Number

What is today's date?

First we would like a few background details about you:

1. What is your date of birth (dd/mm/yyyy)?

2. Are you? Male Female

3. What is your postcode?

4. Please tell us what the job title is of the **main earner** in your household:

The following questions are about your stomach or bowel problems:

When did your symptoms first start?

- 1 to 4 weeks ago
- More than 1 month but less than 3 months ago
- More than 3 months but less than 6 months ago
- More than 6 months but less than 12 months ago
- More than 1 year but less than 3 years ago
- More than 3 years but less than 5 years ago
- More than 5 years ago

Now please think about the symptoms you consulted your GP with *most recently*:

a) When your symptoms occurred how long did they last?

2 hours or less More than 2 hours

b) When your symptoms occurred had you changed your diet?

Yes No

c) In the 14 days before you became ill, did you:

Have gastroenteritis or food poisoning?

Yes No

Have contact with anyone with diarrhoea and vomiting (family/ other contact)?

Yes No

Have your activities (e.g. work or social activities) been interrupted in the last year because of problems with your bowels?

Yes No

Please answer the following background questions:

a) Which ethnic group do you belong to?

Please tick one box

| | | |
|-------------------------------|-------------------------|--|
| White | British or Irish | |
| | Other White | |
| Mixed | White & Black Caribbean | |
| | White and Black African | |
| | White and Asian | |
| | Other Mixed | |
| Asian or Asian British | Indian | |
| | Pakistani | |
| | Bangladeshi | |
| | Other Asian | |
| Black or Black British | Black Caribbean | |
| | Black African | |
| | Other Black | |
| Another Group | Chinese | |
| | Other ethnic group | |

- b) Please tick one box to show which **best** describes the sort of work the **main earner** in your household does. (If the main earner is not working now, please tick a box to show what they did in their last job).

Please tick one box

| | |
|---|--|
| <p>Modern professional occupations <i>such as:</i> teacher - nurse - physiotherapist - social worker - welfare officer - artist - musician - police officer (sergeant or above) - software designer</p> | |
| <p>Clerical and intermediate occupations <i>such as:</i> secretary - personal assistant - clerical worker - office clerk - call centre agent - nursing auxiliary - nursery nurse</p> | |
| <p>Senior managers or administrators (usually responsible for planning, organising and co-ordinating work and /or finance) <i>such as:</i> finance manager - chief executive</p> | |
| <p>Technical and craft occupations <i>such as:</i> motor mechanic - fitter - inspector - plumber - printer - tool maker - electrician - gardener - train driver</p> | |
| <p>Semi-routine manual and service occupations <i>such as:</i> postal worker - machine operative - security guard - caretaker - farm worker - catering assistant - receptionist - sales assistant</p> | |
| <p>Routine manual and service occupations <i>such as:</i> HGV driver - van driver - cleaner - porter - packer - sewing machinist - messenger - labourer - waiter / waitress - bar staff</p> | |
| <p>Middle or junior managers <i>such as:</i> office manager - retail manager - bank manager, restaurant manager - warehouse manager - publican</p> | |
| <p>Traditional professional occupations <i>such as:</i> accountant - solicitor - medical practitioner - scientist - civil / mechanical engineer</p> | |

c) Last week, was the **main earner** in your home any of the following?

Please tick one box.

| | |
|---------------------------|--|
| Retired | |
| Student | |
| Looking after home/family | |
| Currently sick/disabled | |
| Unemployed | |
| None of the above | |

d) Does (did) the **main earner** work as an employee or are (were) they self-employed?

Please tick one box.

| | |
|--|--|
| Employee (please go to question e) | |
| Self-employed with employees (please go to question f) | |
| Self-employed/freelance without employees (please skip the last few questions) | |

e) **For employees:** please indicate how many people work (worked) for the **main earner's** employer at their place of work (worked).

Please tick one box.

| | |
|------------|--|
| 1 to 24 | |
| 25 or more | |

f) **For self-employed:** please indicate how many people the main earner employs (employed).

Please tick one box.

| | |
|------------|--|
| 1 to 24 | |
| 25 or more | |

g) Does (did) the **main earner** supervise any other employees?

A supervisor or foreman is responsible for overseeing the work of other employees on a day-to-day basis

Please tick one box.

| | |
|-----|--|
| Yes | |
| No | |

If you have any comments about the survey or any other aspects of the research, please use the box below to tell us.

Thank you very much for answering these questions. Please return your questionnaire and consent form in the pre-paid envelope provided.

We will contact you again in 3 months time when we will send you a further questionnaire to complete. If you have any questions about the study please contact