Cancer-related beliefs and behaviours in eight geographic regions
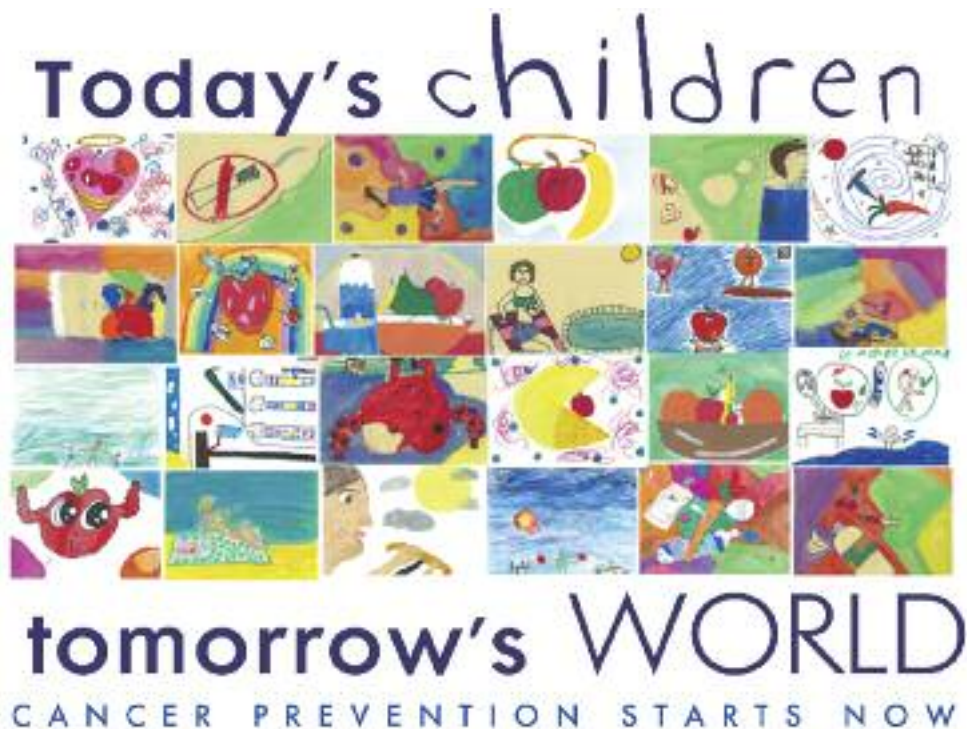
Today's children, tomorrow's WORLD
CANCER PREVENTION STARTS NOW

www.worldcancercampaign.org

"Today's children, tomorrow's world" is a five-year cancer prevention campaign initiated by the International Union Against Cancer (UICC) and focused on children and prevention.

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Acknowledgments

For more information about "Today's children, tomorrow's world" and the World Cancer Campaign, visit *www.worldcancercampaign.org* or contact Aline Ingwersen, global campaign coordinator, at *wcc@uicc.org*

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EXECUTIVE SUMMARY

Since 2007, 40,255 people from 39 countries have participated in the International Union Against Cancer's (UICC) cancer related beliefs and behaviours survey. This is the first survey to provide internationally comparable data on cancer risk behaviours, cancer diagnosis and screening and cancer related beliefs. The results are presented for eight United Nations geographic regions: Northern and Western Europe; Southern and Eastern Europe; Africa; Latin America; Northern America; Australia/New Zealand; Southern and Eastern Asia; and Western Asia.

The results show marked differences in the prevalence of behavioural risk factors for cancer. For example, daily tobacco use is reported by more than half of men in Western Asia (56%) and Southern/Eastern Asia (51%), but is uncommon among women in Africa (1%) and in Southern/Eastern Asia (4%). In regions such as Latin and Northern America, Australia/New Zealand, Western Asia and Africa, over half of individuals are overweight or obese, while this is relatively uncommon in Southern/Eastern Asia (17%). The survey results highlight the regional importance of programs and policies to improve awareness of risk factors for cancer and support healthy behaviour change.

The results also emphasise the disparity between regional cancer screening rates. More than 2 out of every 3 people in Northern and Western Europe, America and Australia/ New Zealand had previously been screened for cancer in comparison to less than 1 in 5 people in Africa and Asia. As cancer screening plays a crucial role in the early detection of many cancers, this result suggests that individuals may be diagnosed at much later stages in Africa and Asia when outcomes are not as positive. As reflected in beliefs about a cure for cancer, respondents in Africa and Asia were also more pessimistic than those in other regions, which further suggests that cancer may be detected at a stage when less can be done.

A key finding of this survey is that people at most risk from some cancers appear to downplay their own risk. For example, 25% of people who drink alcohol frequently and also use tobacco daily believe that smoking cigarettes does not increase the risk of cancer. In comparison, only 8% of people who either drink frequently or use tobacco daily believe that smoking cigarettes does not elevate their risk of cancer. This result is very concerning as tobacco and alcohol consumption multiplies the risks of some cancers[1].

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[1] Pelucchi C., Gallus, S., Garavello, W., Bosetti, C., & La Vecchia, C. (2008). Alcohol and tobacco use, and cancer risk for upper aerodigestive tract and liver. European Journal of Cancer Prevention, 17, 340-344.

INTRODUCTION

There is good evidence to show that beliefs about cancer causation, early detection and cancer treatment can influence lifestyle choices, participation in cancer screening programmes and treatment decisions. Organized, evidence-based, population-focused cancer prevention programmes at a population level have the capacity to shape changes in cancer-related beliefs and behaviours to reduce the risk of cancer in later life. However, since such beliefs and behaviours are often culture-specific, programmes need to be informed by reliable *local* population survey data in order to design appropriate messages and strategies, and evaluate progress.

In 2007, the UICC developed a population survey about cancer-related beliefs and behaviours, using a standard set of survey methods and comparable questions that could be ultimately administered in all member countries. Expertise and funds were generously provided by the Roy Morgan Research Company and their Gallup International affiliates in many countries and by the World Cancer Campaign, "Today's children, tomorrow's world". A technical advisory group led by Dr Melanie Wakefield, Director of the Centre for Behavioural Research in Cancer at the Cancer Council Victoria, Australia, has been convened to advise on survey development and reporting.[2]

The overall aims of the project are:

◗ To enhance the collection and comparability of population survey data on knowledge, attitudes and behaviours relevant to cancer risk across UICC member countries.

◗ To develop the capacity in cancer control organizations to understand and use such survey data in order to develop population-based cancer control programmes and policies and to evaluate their impact.

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[2] *Members include Dr Sharon Campbell, Canada; Dr Michael Stefanek, United States; Dr Jane Wardle, Britain; Dr Hein de Vries, Netherlands.*

METHOD

Procedure

The survey has been conducted either face-to-face or via telephone, depending upon each country's communication infrastructure and the practices of each Gallup research affiliate. The survey was administered in each country's dominant language(s). In some countries, this survey was included as part of a larger omnibus questionnaire.

Questionnaire

The survey includes questions on risk factor behaviours (tobacco use, sun protection, alcohol use, physical activity, body weight), participation in cancer screening, and perceptions about risk factors for cancer, cancer curability and treatment. An English copy of the questionnaire is appended in Appendix 1.

Data analysis

Prior to analysis, the data were weighted to reflect each country or city's population aged 18 years or over.

The margin of error in the survey results presented is ± 1.32% (95% Confidence Interval), assuming random selection of survey respondents. This means that 95% of the time, the actual percentage will lie in between these intervals around the estimated percentage figure in the report. Caution should be taken when interpreting tables and figures with small numbers as the confidence interval will be larger in these instances.

Since late 2007, 39 countries that have completed data collection are:

Table 1:   Participating countries

Albania	Georgia	Kenya	Serbia
Australia	Germany	Lebanon	Spain
Austria	Ghana	Mexico	Switzerland
Belgium	Greece	New Zealand	Turkey
Bolivia	Guatemala	Nigeria	UK
Canada	India	Pakistan	Ukraine
China	Indonesia	Panama	USA
Czech Republic	Israel	Peru	Uruguay
Dominican Republic	Italy	Philippines	Venezuela
Finland	Ivory Coast	Romania	

A further five countries are currently collecting data or have agreed to participate in the upcoming months. The additional countries are: Algeria, Ethiopia, Korea, South Africa and Sudan.

DEMOGRAPHIC CHARACTERISTICS

A total of 40,255 people participated in the survey in 39 countries. Table 2 shows the division of countries into the eight regions based on United Nations categorisation of countries into geographic regions. A similar number of males and females participated in the survey in each region (see Table 3). The majority of African respondents were aged between 18 and 29 years, with only 12.3% of respondents 45 years or older. In Latin America and Asia over two thirds of respondents were aged between 18 and 45 years. In contrast, respondents in Europe, Northern America and Australia/New Zealand were more evenly distributed across the four age categories (see Table 4). Christianity was the dominant religion in all regions except Asia (see Table 5). Over 80% of respondents in Western Asia identified themselves as Muslim, whilst in Southern and Eastern Asia approximately 40% of respondents identified with Islam or no religion. Over 60% of Northern America, Australia/New Zealand, and Southern and Eastern Asia respondents were employed (see Table 6). In contrast, only 37% of Western Asian respondents were employed.

Table 2: Categorisation of countries

Geographic Region	Countries		Number of survey participants
Northern & Western Europe	Austria Belgium Finland	Germany Switzerland UK	5873
Southern & Eastern Europe	Albania Czech Republic Greece Italy	Romania Serbia Spain Ukraine	7057
Africa	Ghana Ivory Coast	Kenya Nigeria	7541
Latin America	Bolivia Dominican Republic Guatemala Mexico	Panama Peru Uruguay Venezuela	6058
Northern America	Canada	USA	1925
Australia & New Zealand	Australia	New Zealand	2130
Southern & Eastern Asia	China India Indonesia	Pakistan Philippines	5160
Western Asia	Georgia Israel	Lebanon Turkey	4511

Table 3: Gender by Geographic Region

Geographic Region	Gender	
	Male	Female
Northern & Western Europe	48.5	51.5
Southern & Eastern Europe	47.8	52.2
Africa	50.5	49.5

Latin America	48.8	51.2
Northern America	48.7	51.3
Australia & New Zealand	49.0	51.0
Southern & Eastern Asia	50.8	49.2
Western Asia	49.8	50.2

Table 4: Age by Geographic Region

Geographic Region	Age Categories			
	18-29	30-44	45-59	60+
Northern & Western Europe	16.9	27.4	26.8	28.9
Southern & Eastern Europe	19.9	28.9	27.9	23.4
Africa	53.3	34.4	10.6	1.7
Latin America	33.8	33.7	20.8	11.7
Northern America	20.8	28.6	25.1	25.5
Australia & New Zealand	19.6	29.9	26.4	24.1
Southern & Eastern Asia	38.2	42.1	16.2	3.5
Western Asia	34.2	32.2	21.6	12.0

Table 5: Religion by Geographic Region

Geographic Region	Religion							
	Christian	Buddhist	Hindu	Jewish	Muslim	Other	No religion	Did not say
Northern & Western Europe	76.1	0.4	0.4	0.1	1.1	1.8	16.0	4.1
Southern & Eastern Europe	71.9	0.2	0.0	0.0	1.5	5.3	17.7	3.3
Africa	59.1	0.0	0.0	0.1	37.4	1.0	0.6	1.8
Latin America	86.5	0.0	0.0	0.0	0.0	1.4	11.5	0.4
Northern America	55.9	0.6	0.3	1.4	0.7	6.3	11.6	23.3
Australia & New Zealand	58.4	1.2	1.1	0.2	1.0	5.9	30.6	1.5
Southern & Eastern Asia	11.9	1.8	3.8	0.0	40.5	0.5	39.2	2.3
Western Asia	7.5	0.0	0.0	7.9	83.1	0.5	0.2	0.8

Table 6: Employment Status by Geographic Region

Geographic Region	Employment status	
	Employed	Not employed
Northern & Western Europe	54.2	45.8
Southern & Eastern Europe	55.0	45.0
Africa	43.6	56.4
Latin America	58.4	41.6
Northern America	63.3	36.0
Australia & New Zealand	66.1	33.8
Southern & Eastern Asia	61.7	38.1
Western Asia	37.2	62.3

CANCER RISK BEHAVIOUR

Cancer risk behaviours that were considered in the survey were: tobacco use, alcohol consumption, sun exposure, physical activity and body weight. Figures 1-6 display regional differences in these behaviours. Appendices 2-9 provide more detailed demographic information on cancer risk behaviours within each geographic region.

Tobacco Use

Tobacco use was determined by asking, "In the last 24 hours have you used any tobacco products…" If respondents indicated that they had used cigarettes, roll your own tobacco, pipe, cigars, chewing tobacco, snuff or bidis they were classified as a tobacco user. If respondents replied "no, none" they were classified as not being a tobacco user. As illustrated in Figure 1, the prevalence of tobacco consumption was lowest in Africa with only 5% of respondents consuming tobacco daily. Approximately one third of respondents in Europe and Western Asia consumed tobacco daily. Figure 2 shows a distinct difference in tobacco consumption amongst men and women. Across all regions, daily tobacco use was higher amongst men than women. This gender difference was most pronounced in Southern and Eastern Asia as males are 14 times more likely than females to use tobacco daily. Similarly in Africa, males are 10 times more likely than females to use tobacco daily. In contrast the gender difference was much smaller in Australia/ New Zealand where 21% of males and 19% of females used tobacco daily.

Figure 1: Prevalence of Daily Tobacco Use
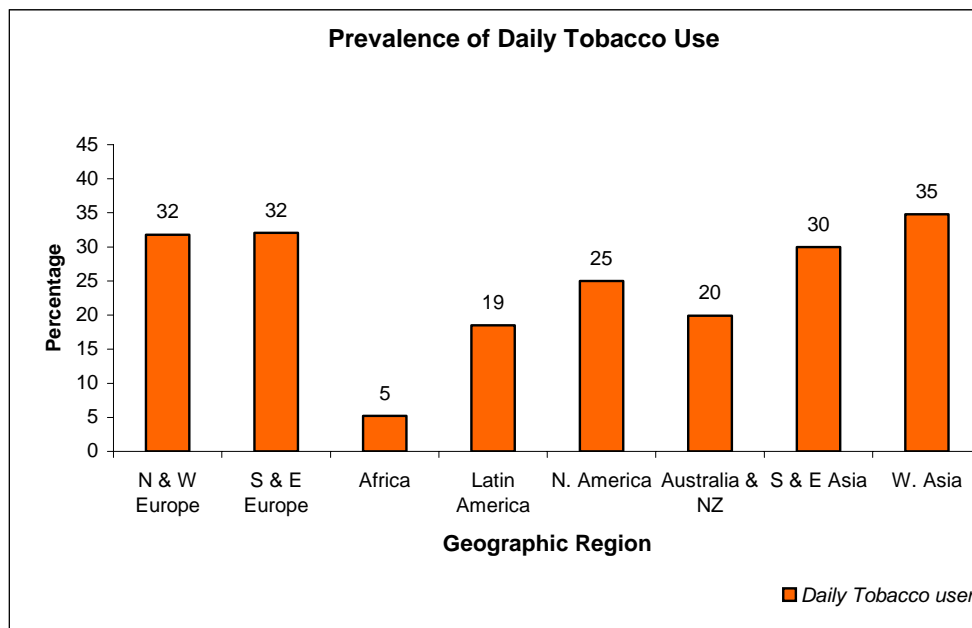
Figure 2: Prevalence of Daily Tobacco Use by Gender

Prevalence of Daily Tobacco Use by Gender
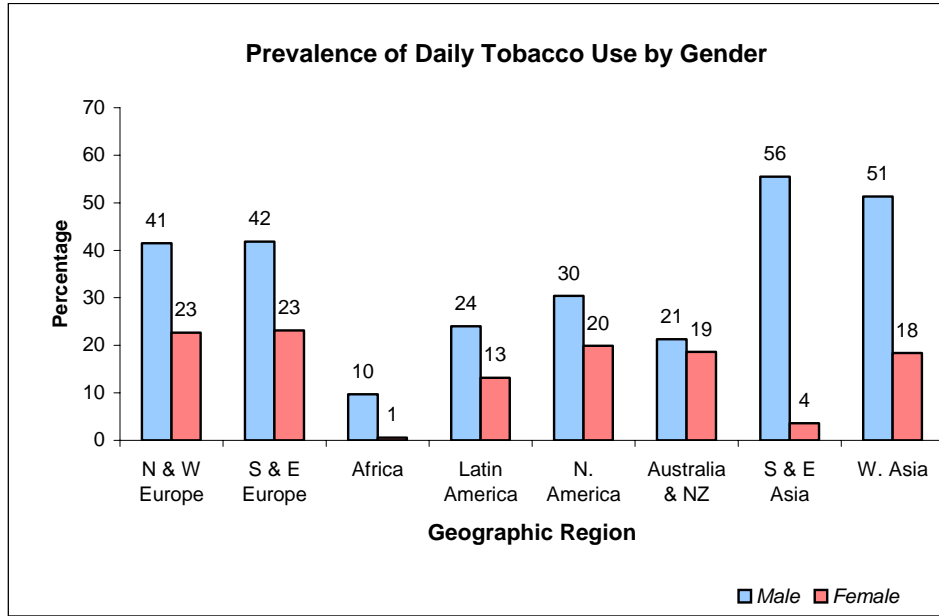
Alcohol Consumption

Alcohol consumption was determined by asking, "In the last 12 months have you had an alcoholic drink of any kind? If yes, about how often do you have an alcoholic drink?" If respondents replied "most days" or "5 or 6 days a week" they were classified as a frequent consumer. If they replied "3 or 4 days a week" or "once a week" they were classified as a moderate consumer. If respondents replied "2 or 3 times a month", "once a month", "less often", "rarely" or "no, never, or don't drink" were classified as consuming alcohol less than once a week. The majority of respondents in all regions, except Australia/ New Zealand, consumed alcohol less than once a week (see Figure 3). Respondents in Australia/New Zealand were nine times more likely to identify that they were frequent alcohol consumers than those in Latin America or Western Asia. In addition, over one third of respondents in Australia/ New Zealand and Northern and Western Europe were moderate consumers of alcohol.

Figure 3: Prevalence of Alcohol Consumption
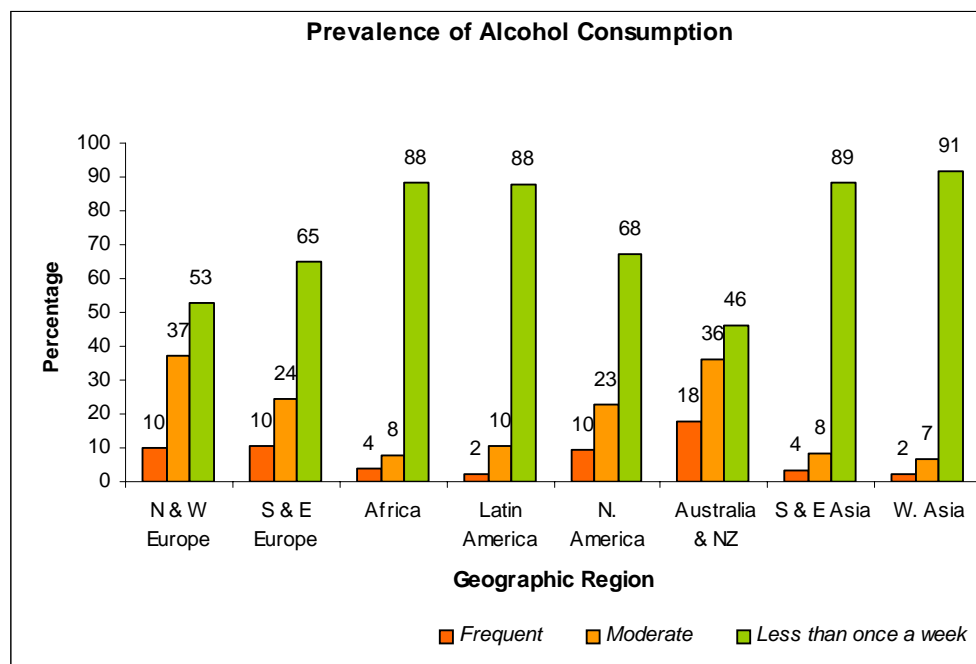
Sun Exposure

Sun exposure was determined by asking, "In the last 12 months have you been sunburnt? By sunburnt I mean any reddening of the skin after being outside in the sun?" The majority of respondents in all regions reported that they had not been sunburnt in the last 12 months (see Figure 4). However, over one third of respondents in the Americas, Australia/New Zealand and Western Asia indicated that they had been sunburnt in the past 12 months.

Figure 4: Prevalence of Sunburn
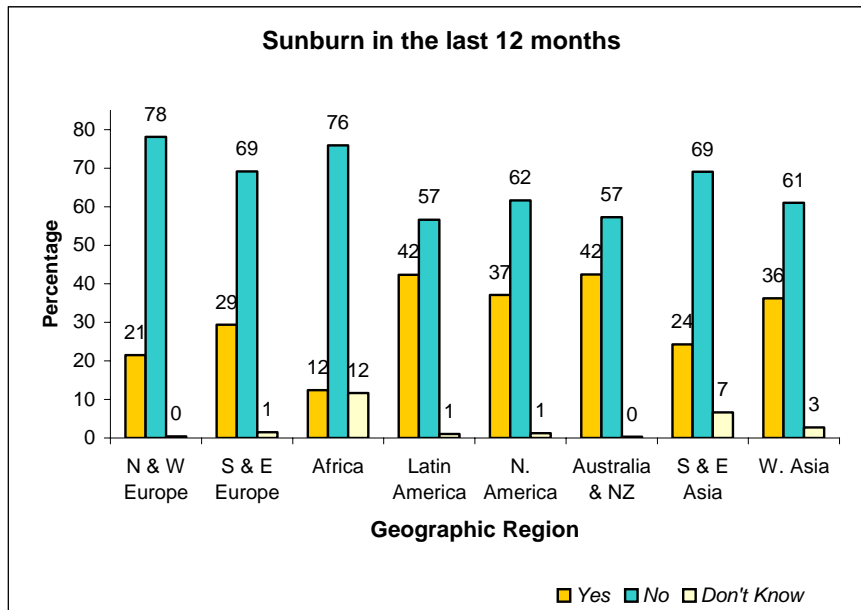
Physical Activity and Body Weight

Physical activity was assessed by asking, "How often do you do hard physical or vigorous activity…" in three contexts: work; home; or at a gym, sports place or somewhere else. Based on *National Physical Activity Guidelines for Australians*[3] a recommended level of physical activity was engaging in activity "most days", or "5 or 6 days a week". Less than recommended, was engaging in physical activity "3 or 4 days a week" "once a week", "2 or 3 times a month", "once a month", "less often", "rarely" or "never". Physical activity appeared to be more prevalent at work or home than at a gym (see Figure 5). Respondents in Northern America and Australia/ New Zealand appeared to engage in higher overall vigorous physical activity than respondents in other regions.

Figure 5: Prevalence of Vigorous Physical Activity on Most Days at work, home or gym

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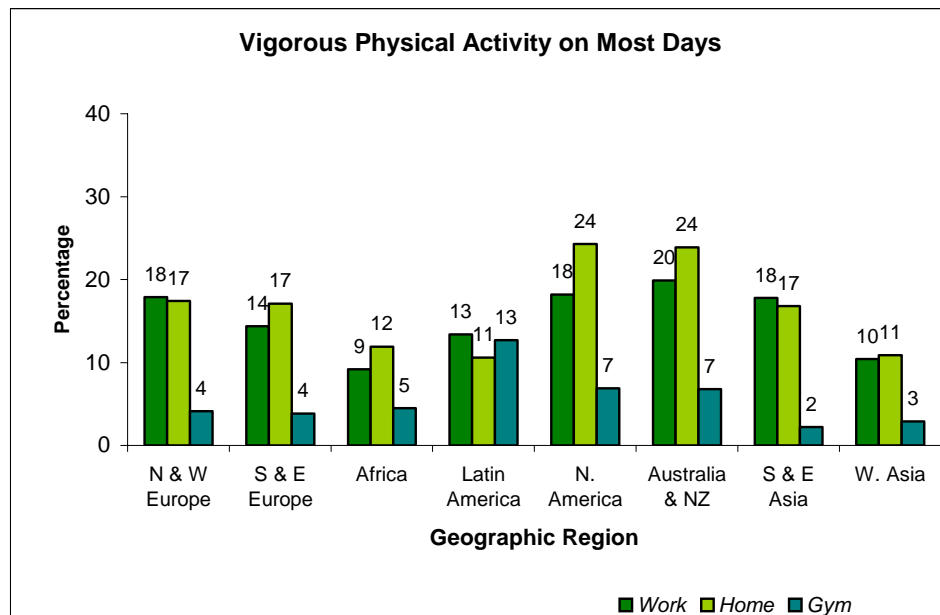
3 *Australian Government:: Department of Health and Aged Care (1999). National Physical Activity Guidelines for Adults, Canberra. Retrieved 16/10/08 from http://www.health.gov.au/internet/main/publishing.nsf/Content/phd-physical-activity-adults-pdf-cnt.htm/$File/adults_phys.pdf.*

Estimates of height and weight were used to calculate Body Mass Index (BMI). Respondents were then classified as being either of an acceptable/healthy weight or as being overweight or obese on the basis of World Health Organisation weight recommendations. Respondents in Southern and Eastern Asia were the only region where the majority of respondents were of a healthy weight (see Figure 6). Almost two thirds of respondents in Northern America were overweight or obese.

Figure 6: Prevalence of Overweight or Obese Respondents in each Geographic region
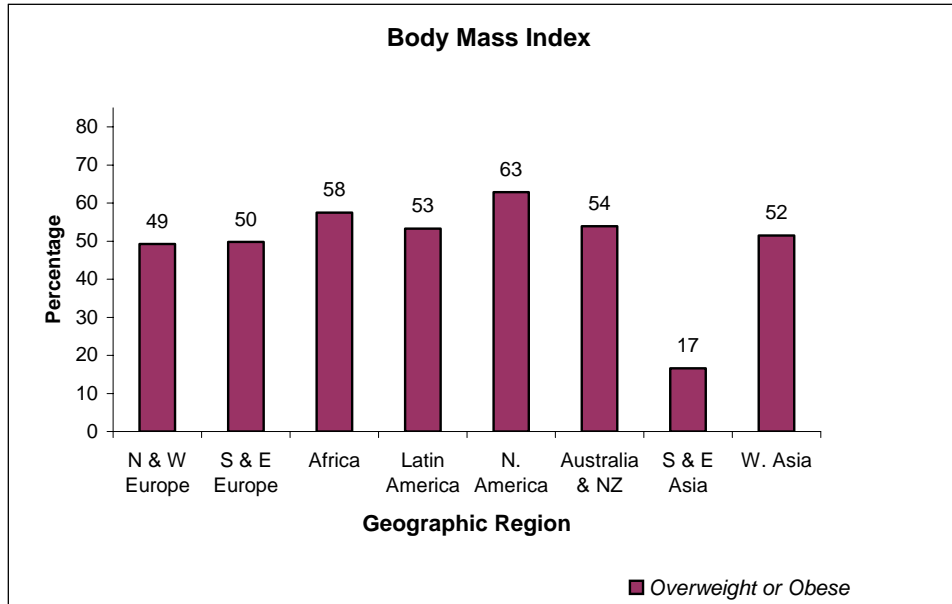
CANCER DIAGNOSIS AND SCREENING

Individuals were asked, "Have *you* ever been diagnosed with cancer?" and responded either "Yes", "No", "Don't know" or "Refused" (to respond). In Northern America and Australia/ New Zealand, 12% and 14% of respondents (respectively) had been diagnosed with cancer, in comparison to less than 5% of other respondents (see Figure 7). A further 7% of African respondents did not know if they had been diagnosed with cancer.

Figure 7: Individual Cancer Diagnosis
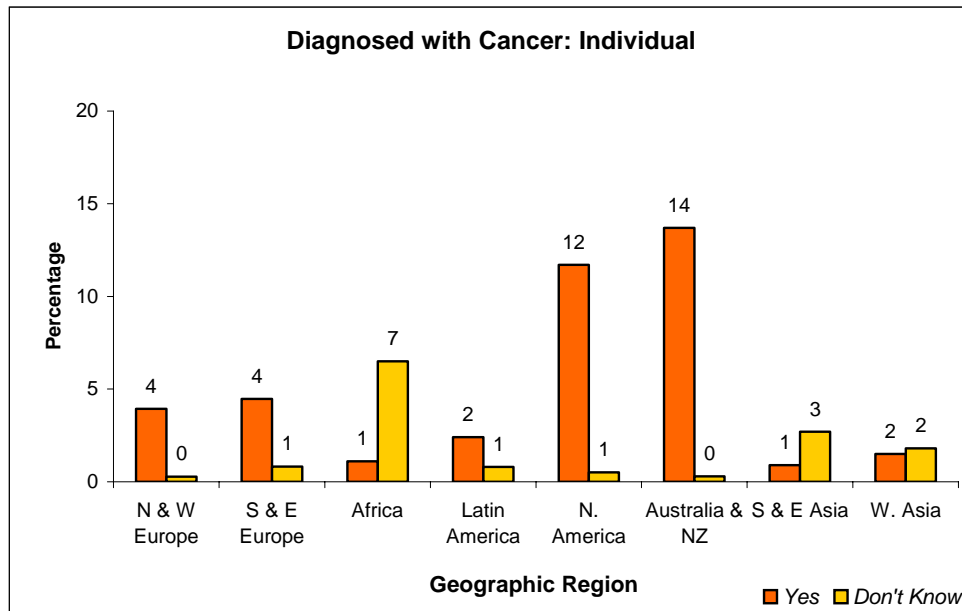
Individuals were also asked, "Has anyone in your *immediate family* ever been diagnosed with cancer?" and responded either "Yes", "No", "Don't know" or "Refused" (to respond). In Northern America and Australia/New Zealand the majority of respondents reported a diagnosis in their immediate family (Figure 8). Additionally, one third of Southern and Eastern European and Latin American respondents indicated that an immediate family member had been diagnosed with cancer. In contrast, 3% of African respondents identified that an immediate family member had been diagnosed with cancer, whilst 11% did not know.

Figure 8: Immediate family cancer diagnosis
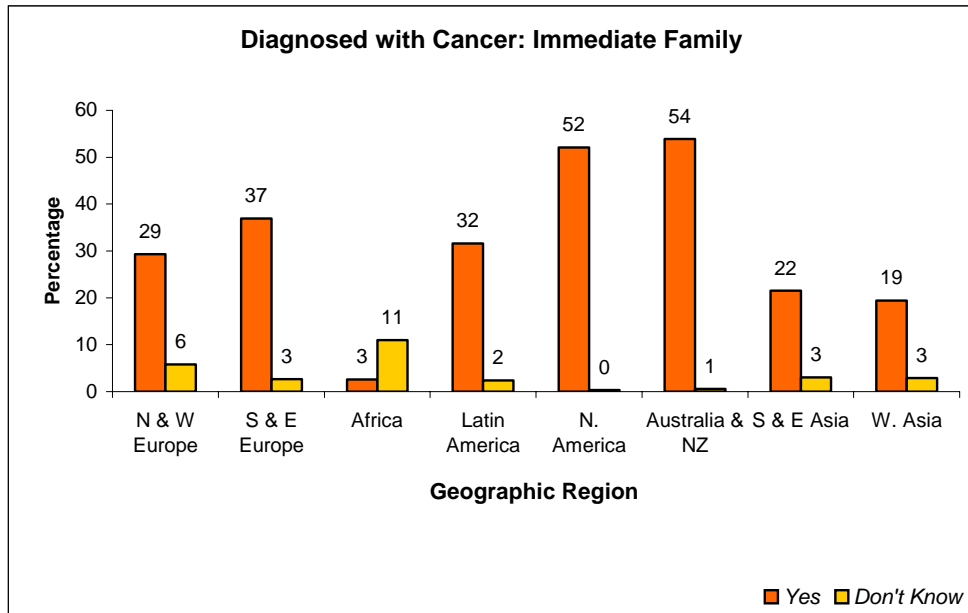
To assess involvement in cancer screening and diagnostic tests, individuals were asked, "Have you ever had a *cancer screening test*, blood test, or some other test for cancer?" If respondents replied yes, they were asked, "Which, if any, of the following cancer tests have you had? Bowel or colon cancer check; Skin cancer check; Lung cancer check; (if female) pap test or pap smear; (if female) mammogram or breast x-ray; (if male) prostate check; other check" (see Figures 9-13 and appendices 2-9 for further details). In Asia and Africa over 88% of respondents reported not being screened for cancer. However, over half of respondents in Northern and Western Europe, the Americas and Australia/ New Zealand were previously screened for cancer. Furthermore, respondents in Europe, the Americas and Australia/New Zealand were 3.8 times more likely to report being screened for cancer than those in other regions. As cancer screening plays an important role in the early detection of cancer the low prevalence of screening in Asia and Africa is of particular concern. It suggests that people may be diagnosed at a much later stage of cancer than those in regions with higher screening rates.

Figure 9. Prevalence of previous cancer screening
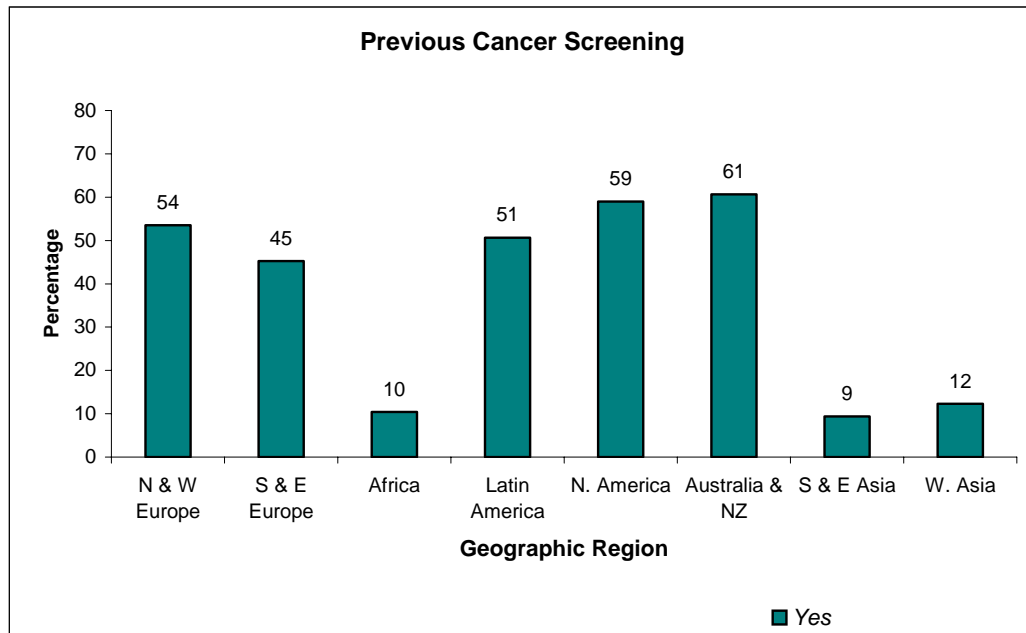
Within Asia and Africa, over 90% of males reported not being previously screened for cancer (Figure 10). In Latin America less than one third of men had been screened for cancer. In Northern America and Australia/New Zealand 48% of males had not been previously screened for cancer. Men in North America and Australia/ New Zealand were almost 6 times more likely to have been screened for cancer than men in Africa or Asia.

Figure 10: Prevalence of previous cancer screening amongst men

Previous Cancer Screening: Men
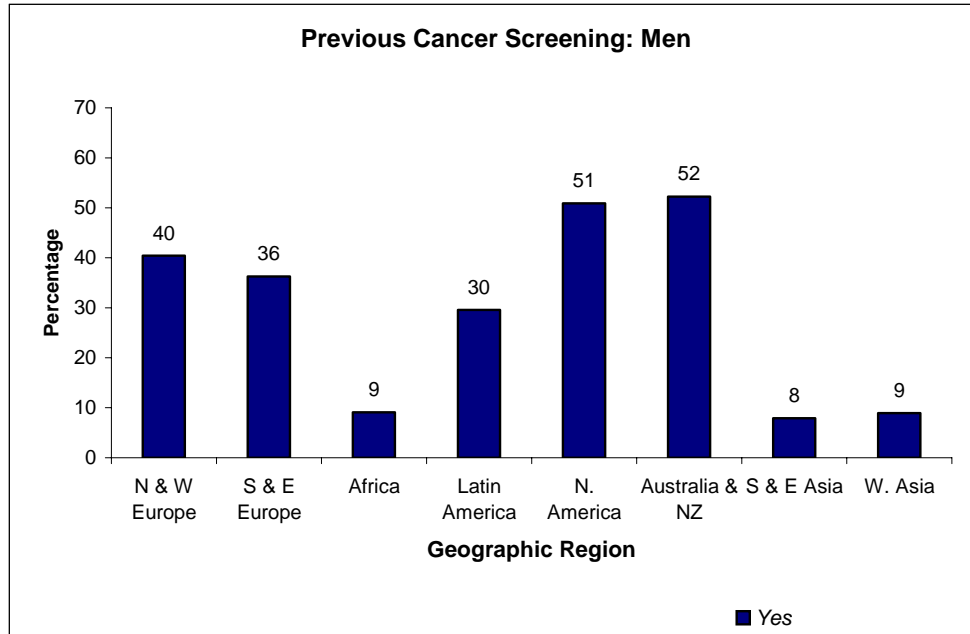
Cancer screening was more prevalent amongst women than men in each region (Figures 10 and 11). The difference between genders was most noticeable in Latin America where 71% of women and 30% of men had previously been screened for cancer. The prevalence of previous cancer screening was highest among women in Latin America and lowest among women in Southern and Eastern Asia (Figure 11). Women in Northern and Western Europe, the Americas and Australia/New Zealand are at least 4 times more likely to have previously been screened for cancer than women in Asia or Africa.

Figure 11: Prevalence of previous cancer screening amongst women
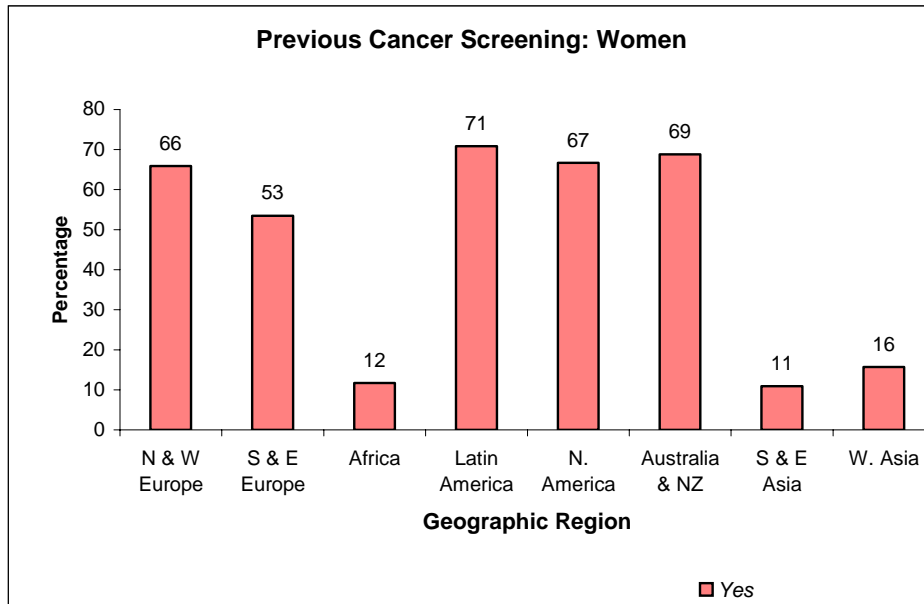
The majority of female respondents in Latin and Northern America reported having had a pap smear, as did half of those in Australia/New Zealand (Figure 12). In addition, women in Europe are 12 times more likely to report having had a pap test than women in Africa.

Figure 12: Prevalence of previous Pap test

Previous Cancer Screening: Pap test
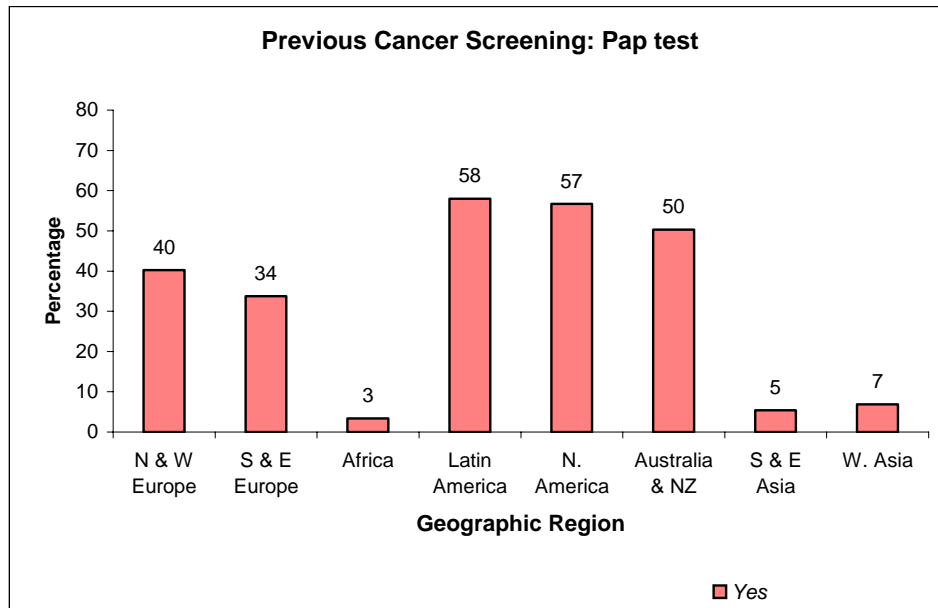
Overall, in comparison to pap tests, fewer women reported a previous mammogram. Women from Northern America and Northern and Western Europe were 23.5 times more likely than women from Southern and Eastern Asia to have reported having had a mammogram (Figure 13). In addition, only one third of women in Southern and Eastern Europe reported having had a mammogram. Mammography is the only tool for early detection that reduces mortality from breast cancer; hence improving access to mammography will help to reduce mortality from breast cancer.

Figure 13: Prevalence of previous Mammogram

Previous Cancer Screening: Mammogram
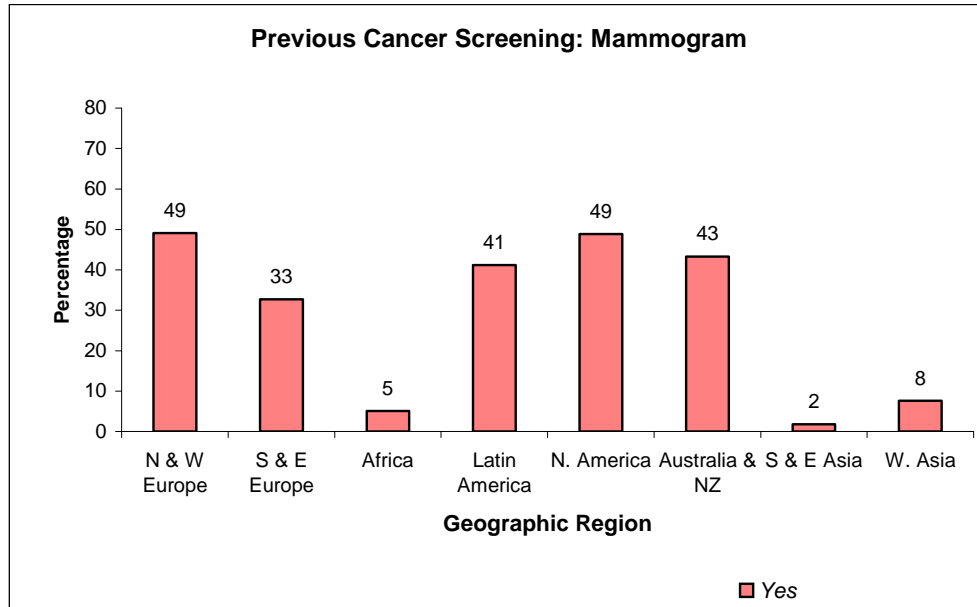
CANCER RELATED BELIEFS

Beliefs about a cure for cancer

To assess *beliefs about a cure for cancer*, individuals were asked, "Some people believe once a person has cancer not much can be done to cure it - do you agree or disagree with that?" Individuals then indicated agreement, disagreement or whether they were undecided. Items were reverse scored for reporting (see Figure 14). Over 80% of respondents in Northern and Western Europe, the Americas and Australia/ New Zealand believed much could be done to cure cancer following diagnosis. In comparison, one quarter or more of respondents in Africa and Asia believed that there was no cure for cancer following diagnosis. These more pessimistic beliefs will need to be addressed when screening programs are introduced in these regions to encourage earlier detection of cancer and better outcomes.

Figure 14: Beliefs about a cure for cancer following diagnosis
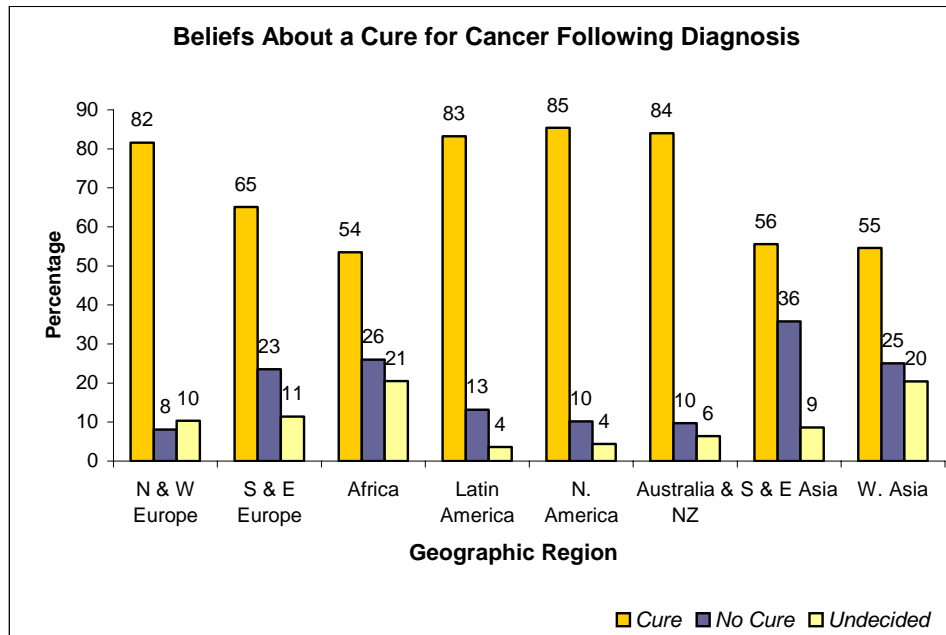
Expectations about medical decisions

To assess *expectations about medical decisions* respondents were asked, "When making a decision about what medical treatment to have, what is your preference?" Most respondents in Africa preferred the doctor to make the decisions based on treatment knowledge (see Figure 15). Respondents in Europe, the Americas and Australia/New Zealand preferred a decision-making style that allowed for more self-determination and equality amongst doctor and patient, which may reflect greater patient understanding of treatment options and hence an expectation to be able to contribute to their own medical treatment decisions.

Figure 15: Preferred medical treatment decision making style
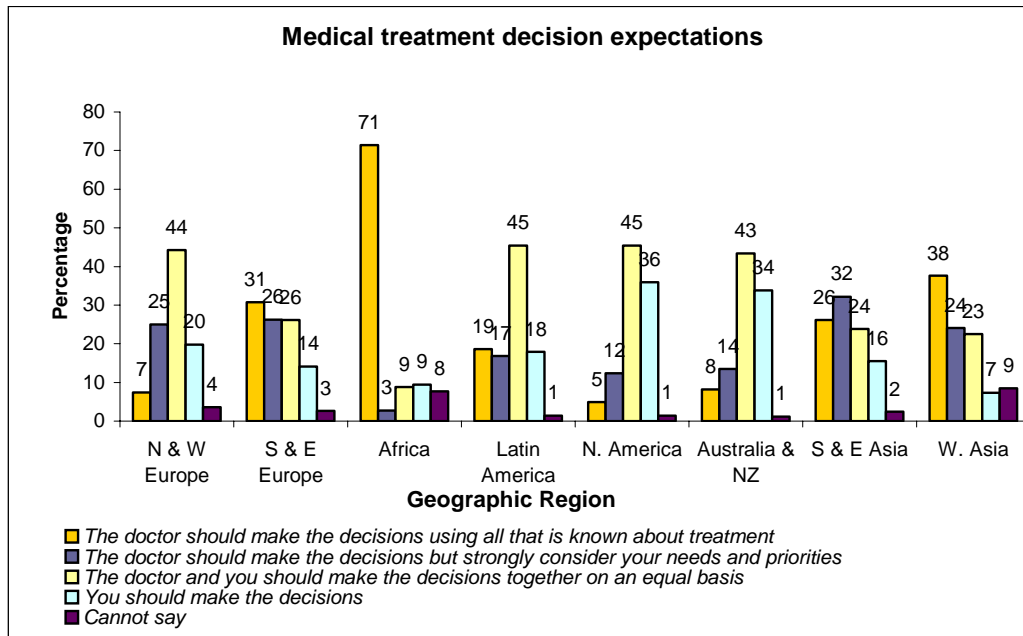
Important health issues

Respondents were asked, "Which *health issues* do you consider important?" As illustrated in Figure 16, the majority of respondents in all regions, except Africa and Southern and Eastern Asia, identified cancer as an important health issue. AIDS was the most frequently cited important health issue in Africa. The majority of Western Asian respondents also identified heart disease as an important health issue.

Figure 16: Important health issues by geographic region
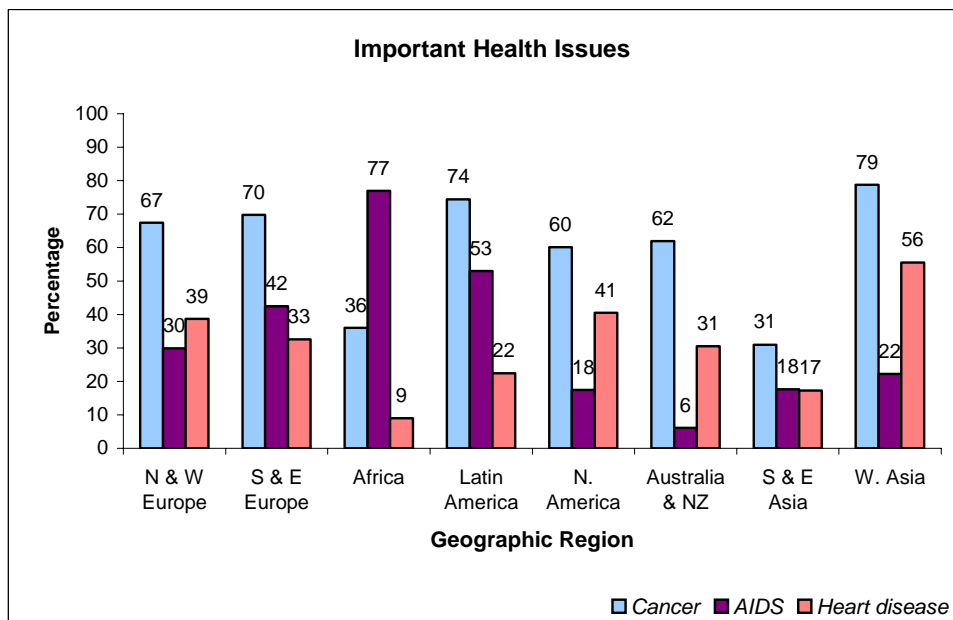
Perceived cancer risks

To assess *perceived cancer risks*, respondents were asked, "As I say some things people do and consume, please say whether you believe they increase a person's risk of cancer or not". Table 7 presents the overall perceptions of each potential cancer risk. Figures 17 to 32 display regional differences in perceptions of each potential cancer risk. Appendices 2-9 provide more detailed demographic information for each potential cancer risk within each geographic region. Overall, respondents were aware of the risk associated with tobacco and alcohol consumption and sun exposure. However, despite being a minor contributor to cancer, air pollution was also cited as elevating cancer risk. There was overall less awareness of the risk of being overweight or the benefit of a healthy diet.

Table 7:   Perceived Cancer Risks

Perceived Risk	Yes, increases risk	No risk	Can't Say
Smoking Cigarettes	89	6	4
Chewing tobacco	73	18	9
Exposure to air pollution	69	19	12
Exposing your skin to the sun	66	23	11
Drinking alcohol	65	28	8
Infection with viruses or bacteria	63	24	12
Eating fatty foods	54	33	13
Being stressed	52	34	15
Being overweight	49	38	13
Not eating vegetables	45	43	12
A lack of exercise	42	45	13
Not eating fruit	41	46	13
A lack of cereals or wholegrain	36	49	16
Eating red meat	35	50	15
Using mobile or cell phones	34	49	17
Drinking tap water	19	68	13

As illustrated in Figure 17, the majority of respondents in all countries believed that drinking tap water was not a risk. In comparison to other regions, there was greater division of opinion about this risk in Latin America. In addition, over one quarter of African and Western Asia respondents indicated that they "cannot say" if drinking tap water in their area increases a person's risk of cancer or not.

Figure 17: Perceived cancer risk of drinking tap water by geographic region

Perceived Cancer Risk of Drinking Tap Water
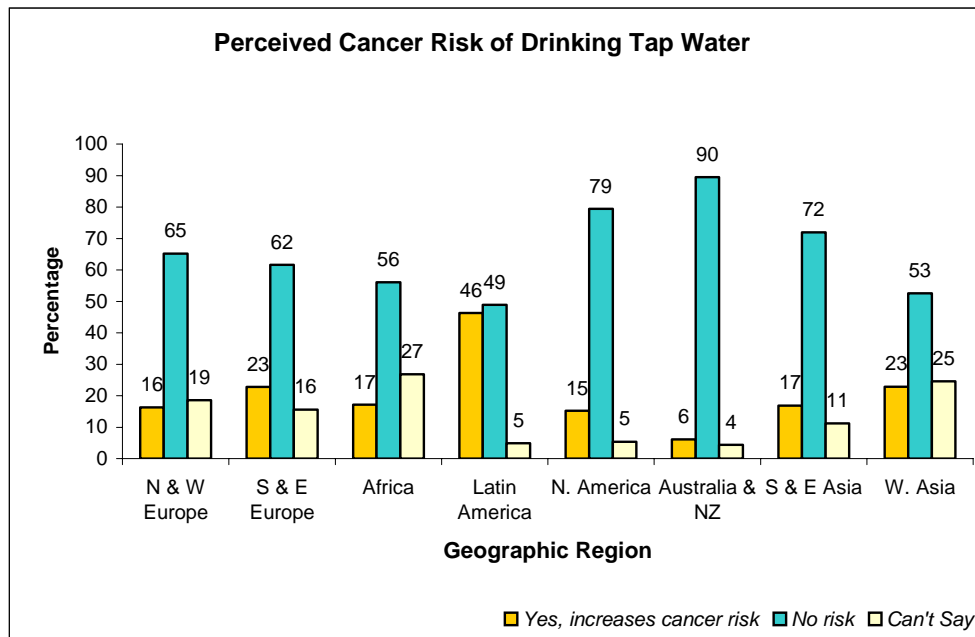
Whilst 72% of African and 87% of Southern and Eastern Asian respondents believed that smoking cigarettes increased the risk of cancer over 90% of respondents in all other regions shared this belief (see Figure 18). Over one fifth of African respondents were uncertain as to whether smoking cigarettes elevated cancer risk or not, which highlights the importance of anti-tobacco education in this region.

Figure 18. Perceived cancer risk of smoking cigarettes by geographic region

Perceived Cancer Risk of Smoking Cigarettes

Legend: ☐ Yes, increases cancer risk ☐ No risk ☐ Can't Say
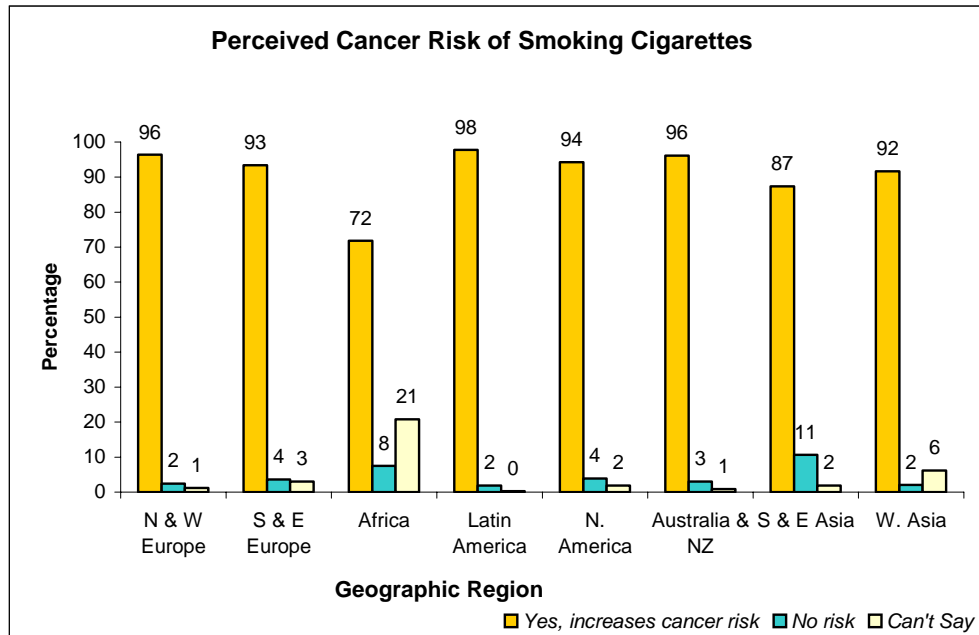
In comparison to smoking cigarettes, there was less awareness of the risk of chewing tobacco (Figure 19). Although, the majority of respondents believed that chewing tobacco increases the risk of cancer, one third of those in Southern and Eastern Asia did not believe that chewing tobacco increases the risk of cancer. Further, one quarter of those in Africa could not say if chewing tobacco increases the risk of cancer.

Figure 19. Perceived cancer risk of chewing tobacco by geographic region
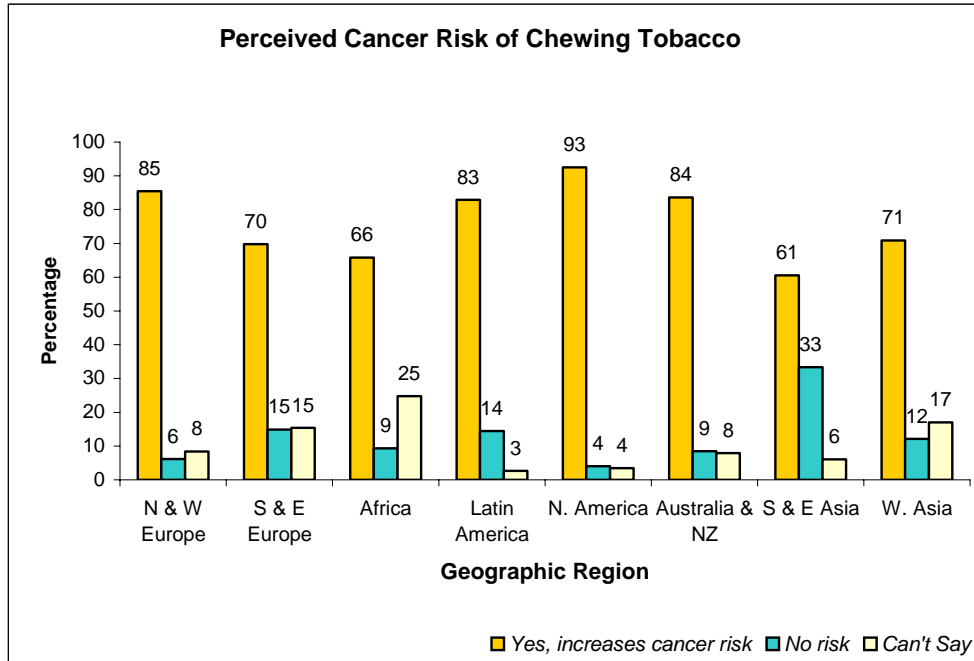
In comparison to the risk of smoking cigarettes (Figure 18) there is less awareness of the risk of drinking alcohol (Figure 20). Alcoholic drinks are a cause of cancers of the mouth, pharynx and larynx, oesophagus, colorectum and breast[4]. Whilst 83% of Western Asian respondents thought that alcohol elevated cancer risk, only 47% of Northern Americans shared this belief. Furthermore, over 40% of respondents in North America and Australia/New Zealand thought that there was no cancer risk associated with drinking alcohol. This lack of awareness is particularly concerning given the higher alcohol consumption levels in Northern America and Australia/New Zealand (see Figure 3).

Figure 20. Perceived cancer risk of drinking alcohol by geographic region

Perceived Cancer Risk of Drinking Alcohol

Legend: ■ *Yes, increases cancer risk* ■ *No risk* □ *Can't Say*

Geographic Region	Yes, increases cancer risk	No risk	Can't Say
N & W Europe	58	31	12
S & E Europe	70	22	8
Africa	58	15	27
Latin America	71	28	2
N. America	47	46	6
Australia & NZ	52	40	8
S & E Asia	73	25	2
W. Asia	83	9	8

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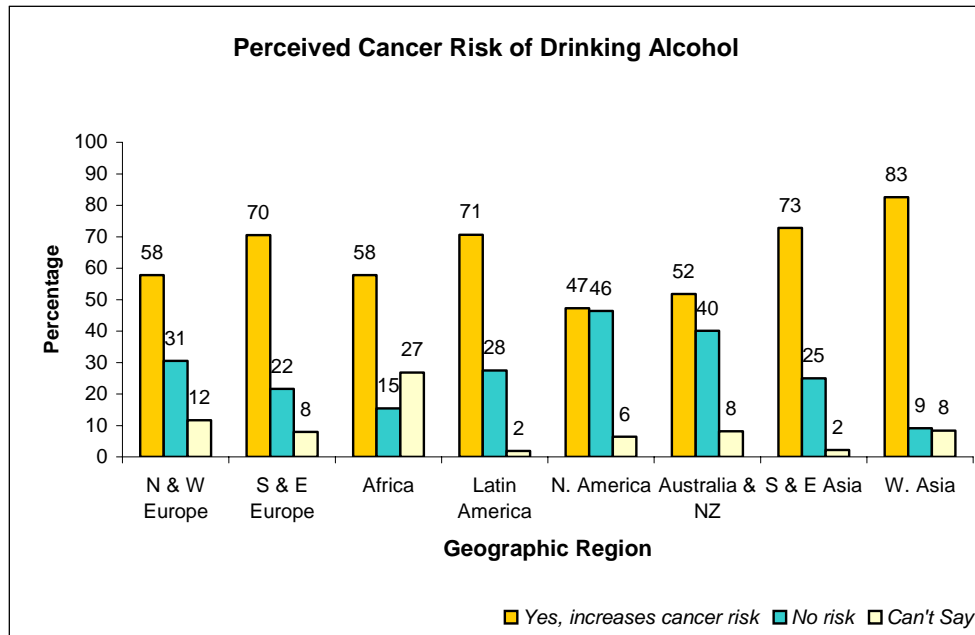
[4] World Cancer Research Fund / American Institute for Cancer Research (2007). Food, Nutrition, Physical Activity, and the Prevention of Cancer: a Global Perspective. Washington DC: AICR.

Over 60% of respondents in Northern and Western Europe, the Americas and Australia/ New Zealand thought that not eating vegetables elevated cancer risk (Figure 21). There was greater uncertainty about the protective benefits of eating vegetables in other regions. Over half of respondents in Southern and Eastern Asia thought that a lack of vegetables did not elevate cancer risk. Over one quarter of African and Western Asia respondents were unsure of the cancer risk of not eating vegetables. Non-starchy vegetables probably protect against cancers of the mouth, pharynx and larynx, oesophagus and stomach[5]; thus, the survey results highlight the need to educate people about the benefit of consuming more vegetables.

Figure 21. Perceived cancer risk of not eating vegetables by geographic region
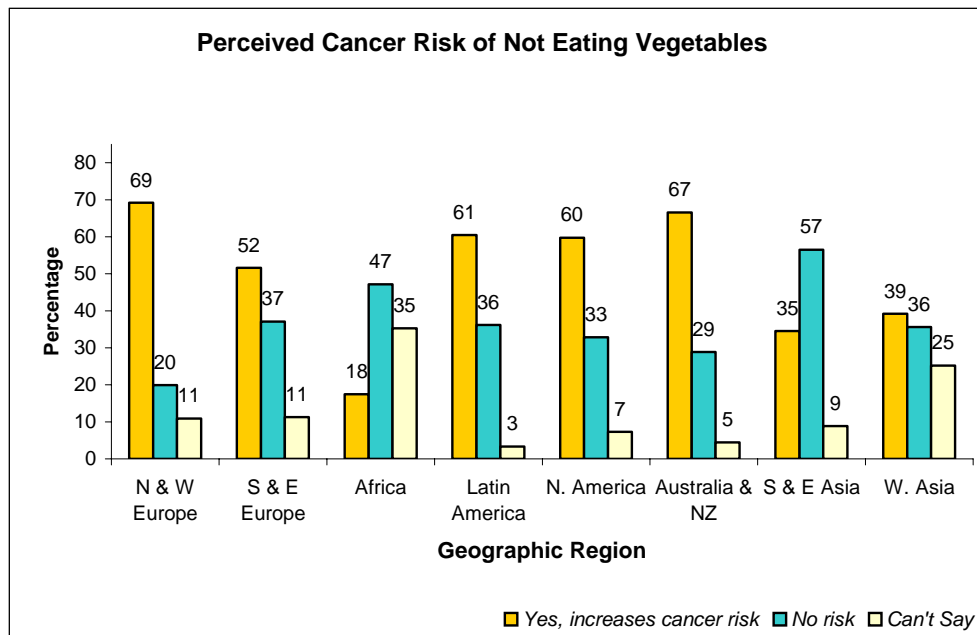
[5] World Cancer Research Fund / American Institute for Cancer Research (2007). Food, Nutrition, Physical Activity, and the Prevention of Cancer: a Global Perspective. Washington DC: AICR.

Similarly, over 60% of respondents in Northern and Western Europe, the Americas and Australia/ New Zealand thought that not eating fruit elevated cancer risk (Figure 22). In comparison over 60% of respondents in Southern and Eastern Asia believed that not eating fruit did not elevate cancer risk. There was also greater uncertainty about the protective benefits of eating fruit in other regions, highlighting that there is an opportunity to increase awareness that fruit probably protects against cancers of the mouth, pharynx and larynx, oesophagus, lung and stomach[6].

Figure 22. Perceived cancer risk of not eating fruit by geographic region
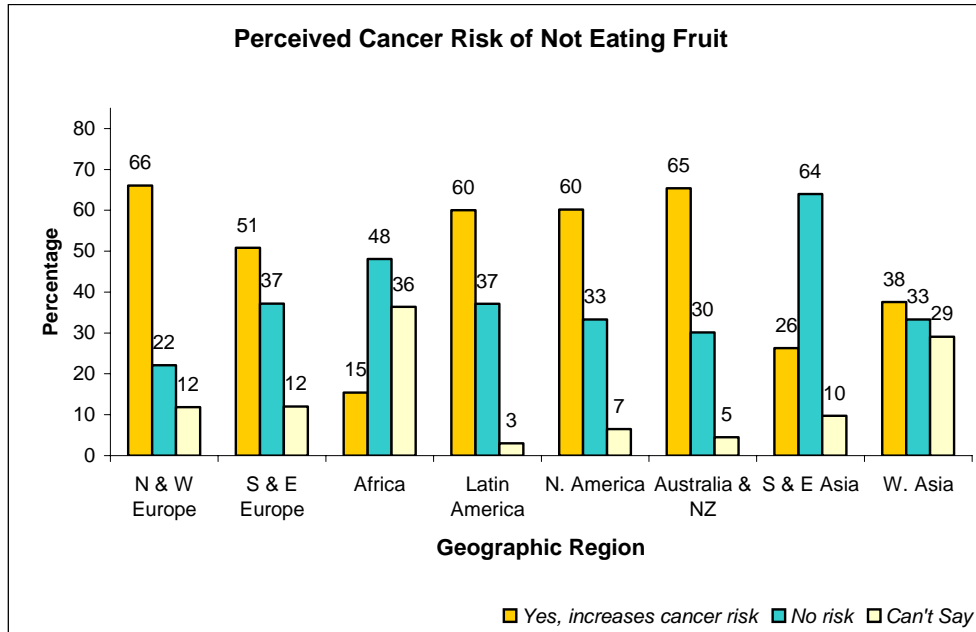
6 *World Cancer Research Fund / American Institute for Cancer Research (2007). Food, Nutrition, Physical Activity, and the Prevention of Cancer: a Global Perspective.Washington DC: AICR*

Over half of American, Australia/ New Zealand and Northern and Western European respondents thought that a lack of cereals and wholegrains elevated cancer risk (Figure 23). In comparison, two thirds of Southern and Eastern Asia respondents did not believe that a lack of cereals and wholegrains elevated cancer risk, which is close to 3 times as many as those in Northern and Western Europe who share this belief. This finding is of concern as evidence reviewed by the World Cancer Research Fund and American Institute of Cancer Research suggests that foods containing dietary fibre probably protect against colorectal cancer[7].

Figure 23. Perceived cancer risk of a lack of cereals or wholegrains by geographic region

Perceived Cancer Risk of a Lack of Cereals or Wholegrains

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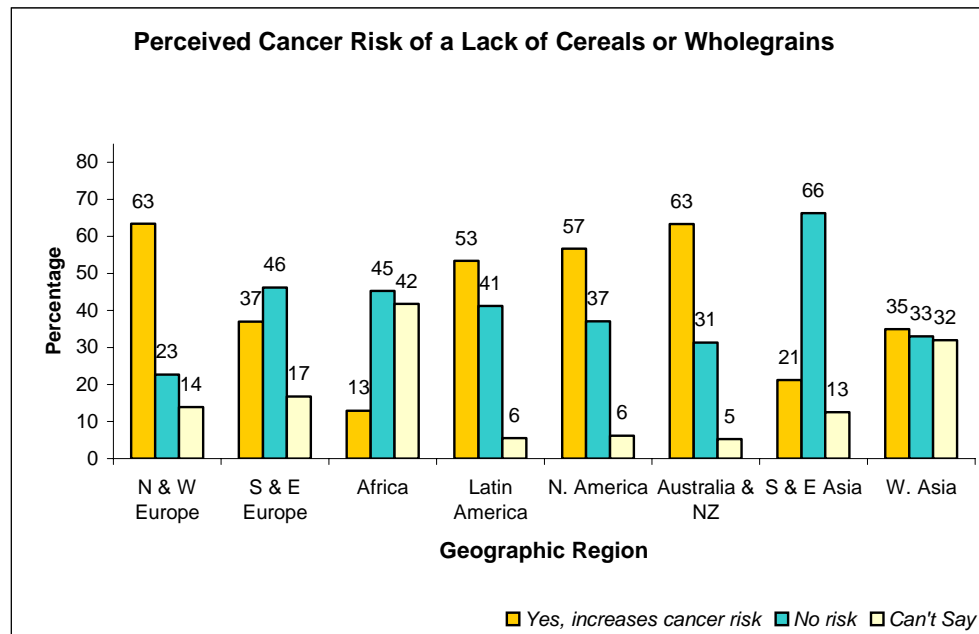
[7] *World Cancer Research Fund / American Institute for Cancer Research (2007). Food, Nutrition, Physical Activity, and the Prevention of Cancer: a Global Perspective. Washington DC: AICR.*

Over 70% of respondents in Latin America and Australia/ New Zealand thought that eating fatty foods elevated cancer risk (Figure 24). Over one third of respondents in Southern and Eastern Europe, Africa and Southern and Eastern Asia thought that there was no cancer risk associated with the consumption of fatty foods. A further 40% of African respondents could not say whether eating fatty foods elevated cancer risk.

Figure 24. Perceived cancer risk of eating fatty foods by geographic region
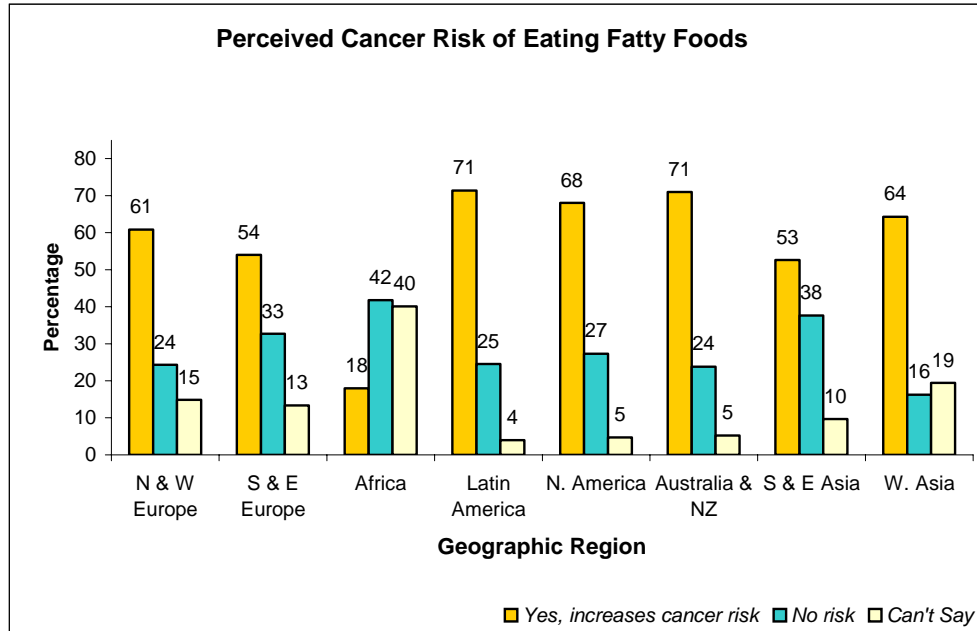
The majority of those in Latin America thought eating red meat elevated cancer risk (Figure 25). However, the majority of respondents from Northern America, Australia/ New Zealand and Southern and Eastern Asia thought eating red meat did not elevate cancer risk Uncertainty about the risk associated with eating red meat is evident in Africa. These findings are particularly concerning as there is convincing evidence that red meat causes colorectal cancer and is probably a cause of cancer of the oesophagus, lung, pancreas and endometrium[8].

Figure 25. Perceived cancer risk of eating red meat by geographic region

Perceived Cancer Risk of Eating Red Meat

Geographic Region	Yes, increases cancer risk	No risk	Can't Say
N & W Europe	42	40	17
S & E Europe	32	50	19
Africa	15	43	41
Latin America	61	35	4
N. America	41	51	8
Australia & NZ	22	71	8
S & E Asia	31	59	10
W. Asia	43	30	26
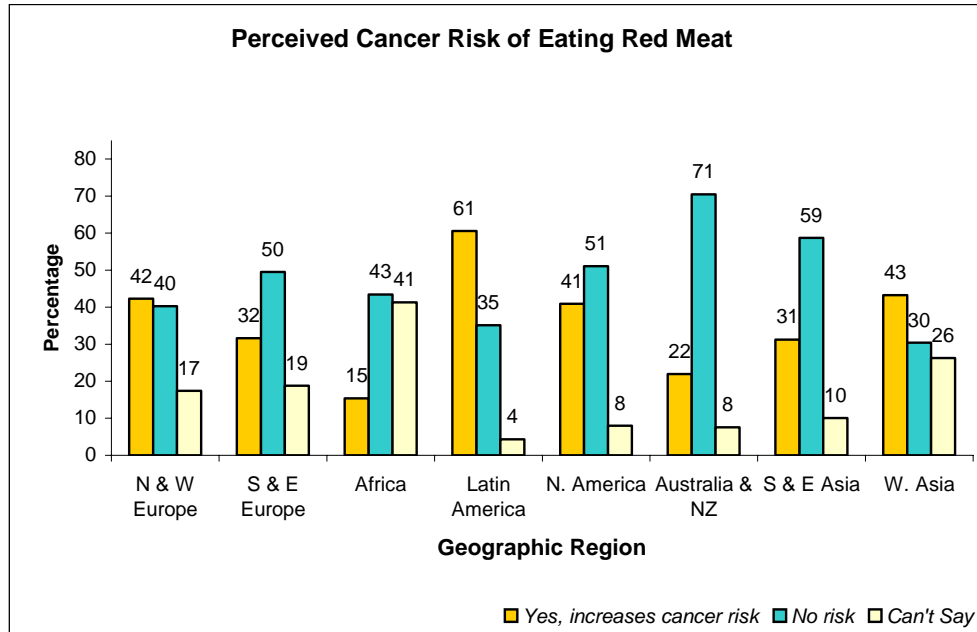
8 *World Cancer Research Fund / American Institute for Cancer Research (2007). Food, Nutrition, Physical Activity, and the Prevention of Cancer: a Global Perspective. Washington DC: AICR*

Over 60% of American and Australia/ New Zealand respondents thought that a lack of exercise elevated cancer risk whilst there was greater uncertainty about this risk in other regions (Figure 26), despite convincing evidence that physical activity protects against colon cancer. Uncertainty about this risk is most evident in Africa, where 38% of people could not say whether a lack of exercise was a risk.

Figure 26. Perceived cancer risk of a lack of exercise by geographic region

Perceived Cancer Risk of a Lack of Exercise

Geographic Region	Yes, increases cancer risk	No risk	Can't Say
N & W Europe	48	37	15
S & E Europe	39	49	12
Africa	15	47	38
Latin America	64	32	4
N. America	61	36	4
Australia & NZ	61	36	4
S & E Asia	36	54	10
W. Asia	38	29	33
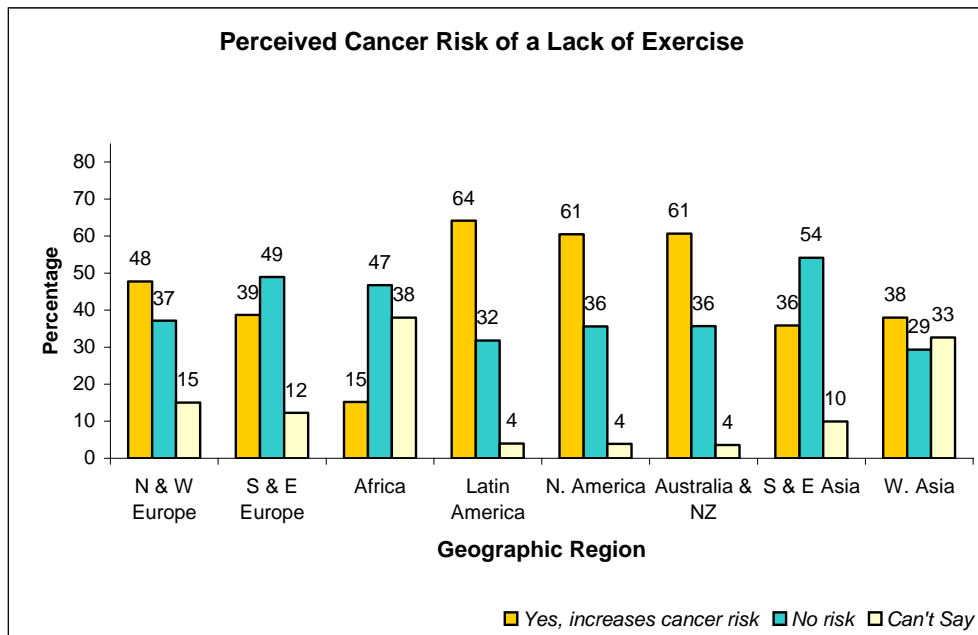
Over 60% of American, Western Asian and Australia/ New Zealand respondents thought that being overweight elevated cancer risk whilst there was greater uncertainty about this risk in other regions (Figure 27). There is convincing research that body fatness increases the risk of cancer of the oesophagus, pancreas, colorectum, kidney, endometrium and breast (postmenopausal)[9].

Figure 27. Perceived cancer risk of being overweight by geographic region

Perceived Cancer Risk of Being Overweight

Geographic Region	Yes, increases cancer risk	No risk	Can't Say
N & W Europe	56	30	14
S & E Europe	51	37	12
Africa	18	41	41
Latin America	70	26	4
N. America	66	30	4
Australia & NZ	69	27	4
S & E Asia	42	49	10
W. Asia	60	17	23

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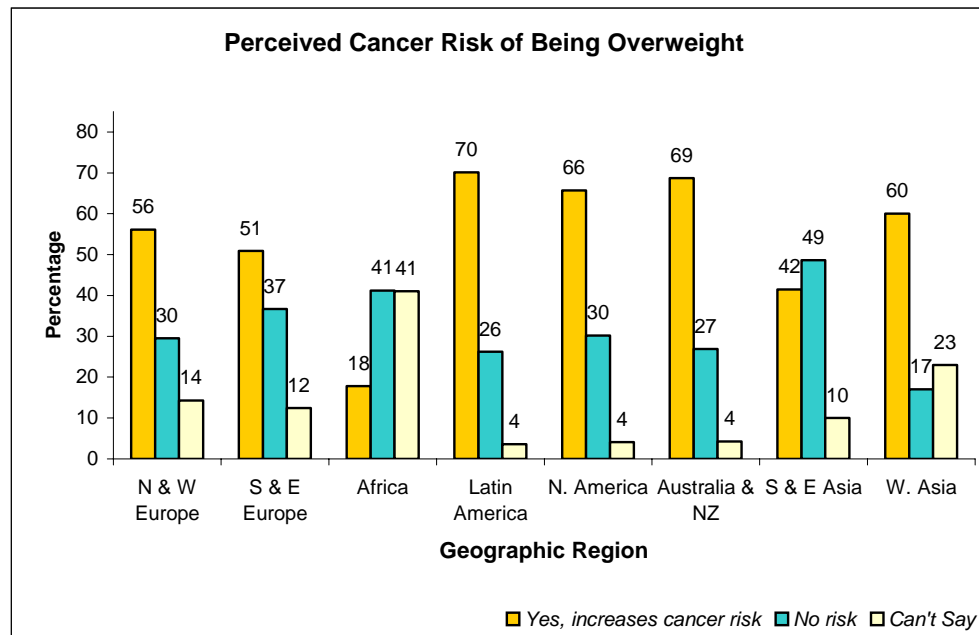
9 *World Cancer Research Fund / American Institute for Cancer Research (2007). Food, Nutrition, Physical Activity, and the Prevention of Cancer: a Global Perspective. Washington DC: AICR.*

More respondents in Europe and Western Asia than in other regions believed that using mobile phones did not elevate cancer risk (Figure 28). In comparison, the majority of respondents in Northern America, Australia and Southern and Eastern Asia believed there was no risk from the use of mobile phones

Figure 28. Perceived cancer risk of using mobile phones by geographic region
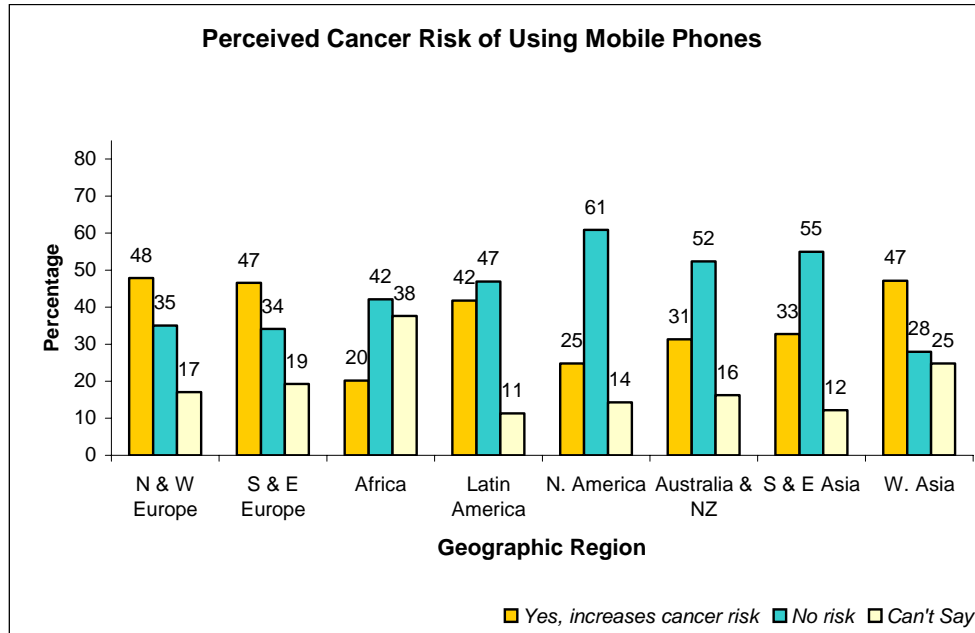
Over 90% of respondents in the Americas, Australia/ New Zealand and Northern and Western Europe thought that exposing your skin to the sun elevated cancer risk (Figure 29). There was greater division of opinion about this cancer risk in Africa and Southern and Eastern Asia.

Figure 29. Perceived cancer risk of exposing your skin to the sun by geographic region
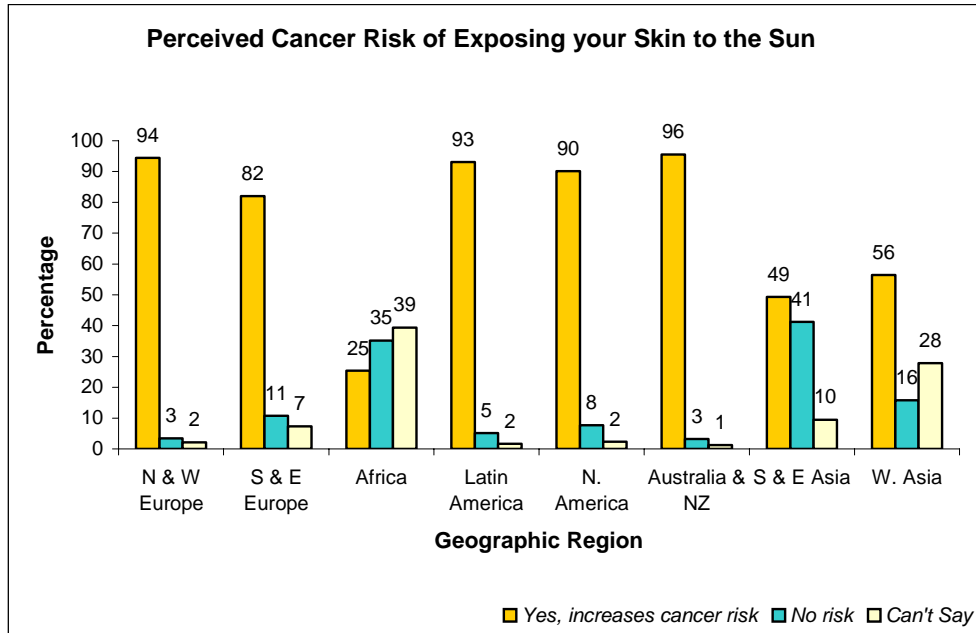
The majority of respondents in all regions, except Africa, believed that air pollution elevated cancer risk (Figure 30). Forty percent of African respondents were not sure whether air pollution elevated cancer risk. As air pollution makes only a minor contribution to cancer risk, this result suggests that people are more willing to accept risks outside of their control (i.e., air pollution) than those that are within their control, such as being overweight (Figure 27).

Figure 30. Perceived cancer risk of exposure to air pollution by geographic region
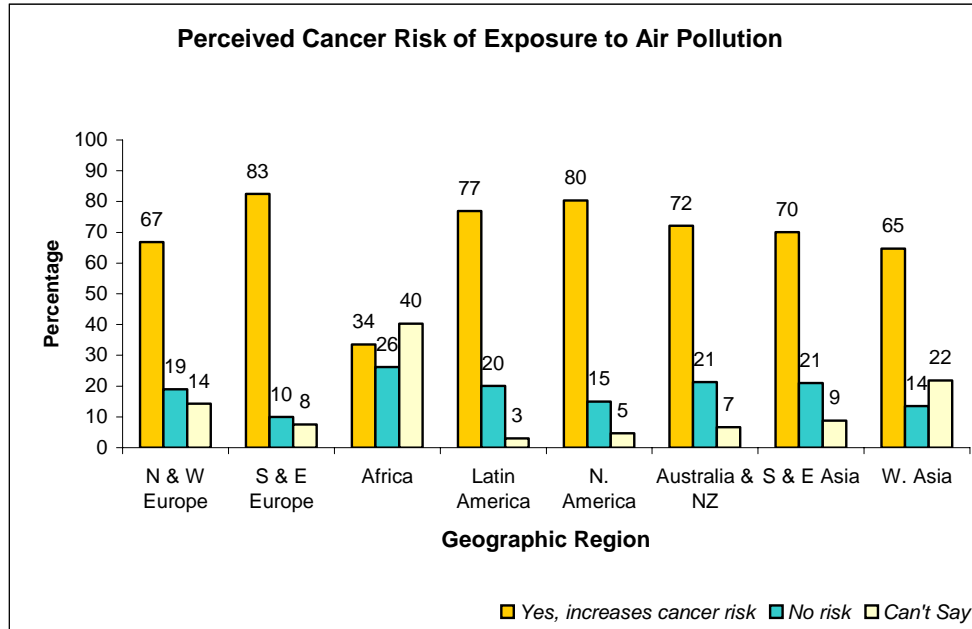
The belief that infection with viruses/ bacteria elevates cancer risk was most prevalent in Latin America followed by Southern and Eastern Asia and Northern and Western Europe (Figure 31). In comparison, over one third of Australian/ New Zealand respondents did not believe there was an elevated cancer risk associated with infection with viruses/bacteria, whilst over one third of African respondents were unsure.

Figure 31. Perceived cancer risk of infection with viruses/bacteria by geographic region
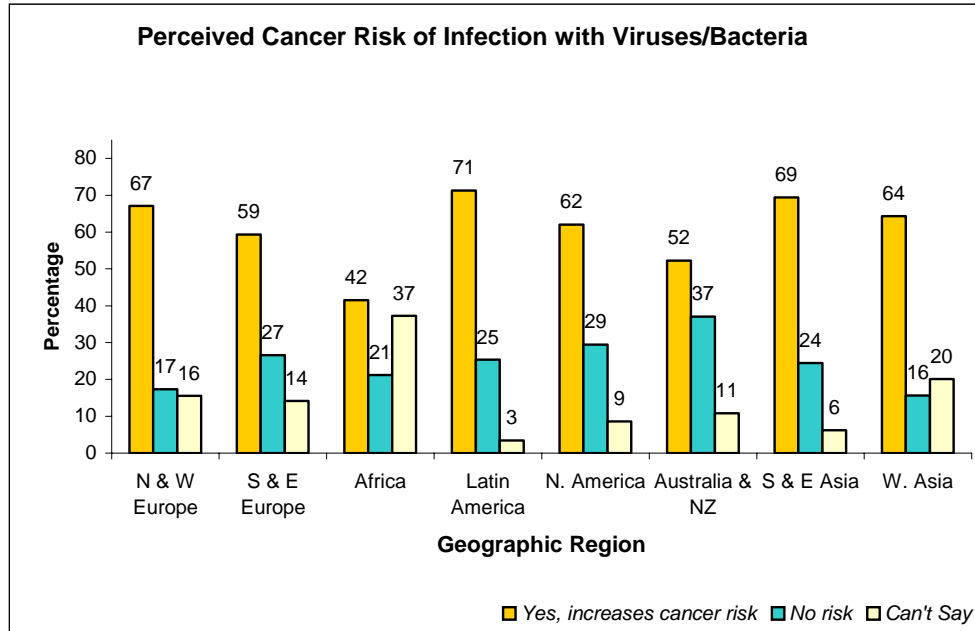
The majority of respondents in all regions, except Africa and Northern and Western Europe believed that being stressed elevated cancer risk (Figure 32). This belief was most prevalent in Western Asia.

Figure 32.Perceived cancer risk of being stressed by geographic region
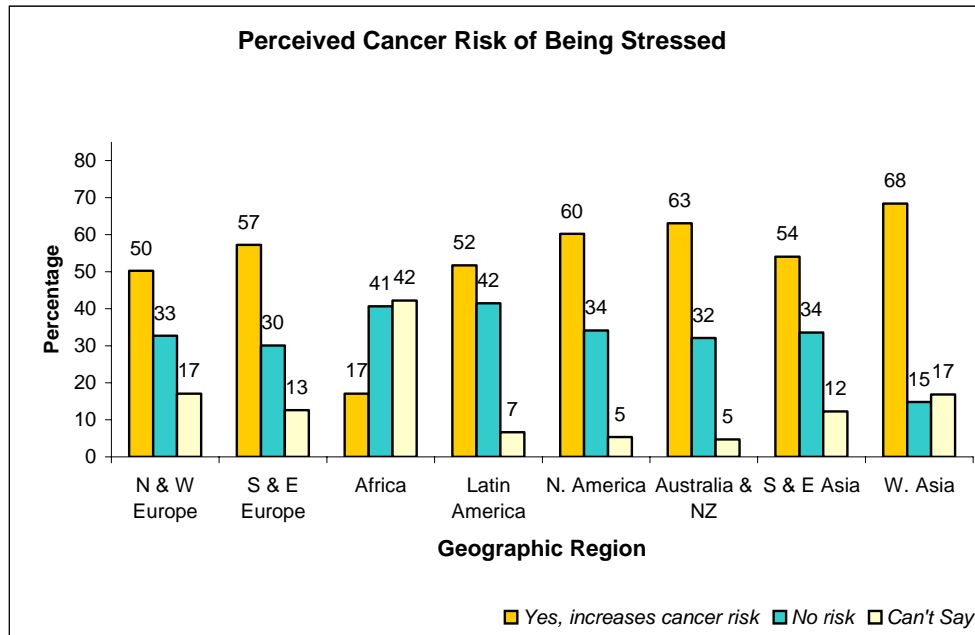
Multiple Risk Factors and Prevention Beliefs

Body Mass Index and Alcohol Consumption

Three Body Mass Index and alcohol risk categories were defined. If individuals did not drink alcohol frequently and were not overweight or obese they were categorised as having no risk factors. If individuals either consumed alcohol frequently or were overweight/obese, they were classified as having one risk factor. Individuals who consumed alcohol frequently and were overweight or obese had both risk factors. As illustrated in Figure 33, the majority of respondents in Southern and Eastern Asia did not drink alcohol frequently and were not overweight/obese. Approximately half of respondents in all other regions were identified as having one risk factor. Additionally, 11% of Australian/ New Zealand respondents were categorised as having both risk factors.

Figure 33. Prevalence of alcohol and body weight risk factors by geographic region
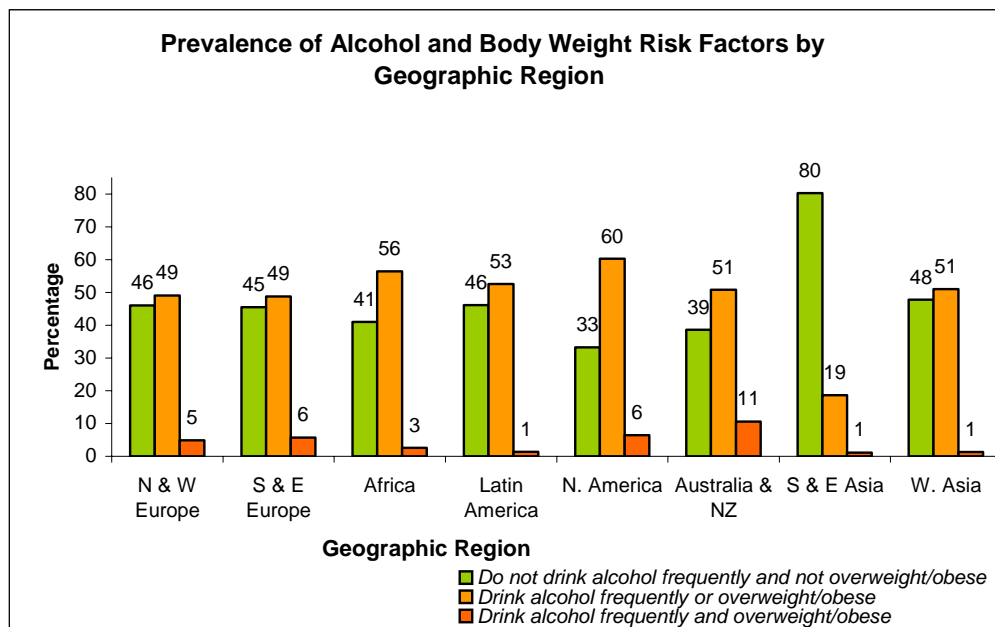
Regardless of the extent of personal risk, almost half of all respondents believed that being overweight elevated cancer risk (Figure 34).

Figure 34. Perceived cancer risk of being overweight by alcohol and body weight risk factors

Perceived Cancer Risk of Being Overweight by Alcohol and Body Weight Risk Factors

Risk factors

Yes, increases cancer risk   No risk   Can't Say
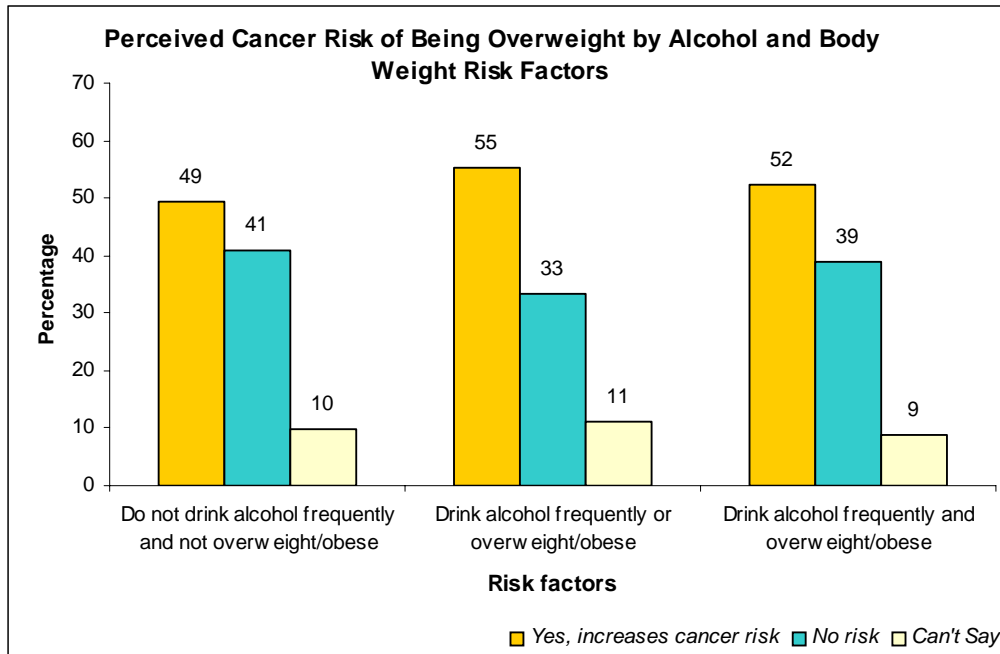
Two thirds of respondents with no risk believed that drinking alcohol increases cancer risk (Figure 35). Less than half of those with both risk factors perceived drinking alcohol to elevate cancer risk.

Figure 35. Perceived cancer risk of drinking alcohol by alcohol and body weight risk factors

Perceived Cancer Risk of Drinking Alcohol by Alcohol and Body Weight Risk

Risk factors

Yes, increases cancer risk   No risk   Can't Say
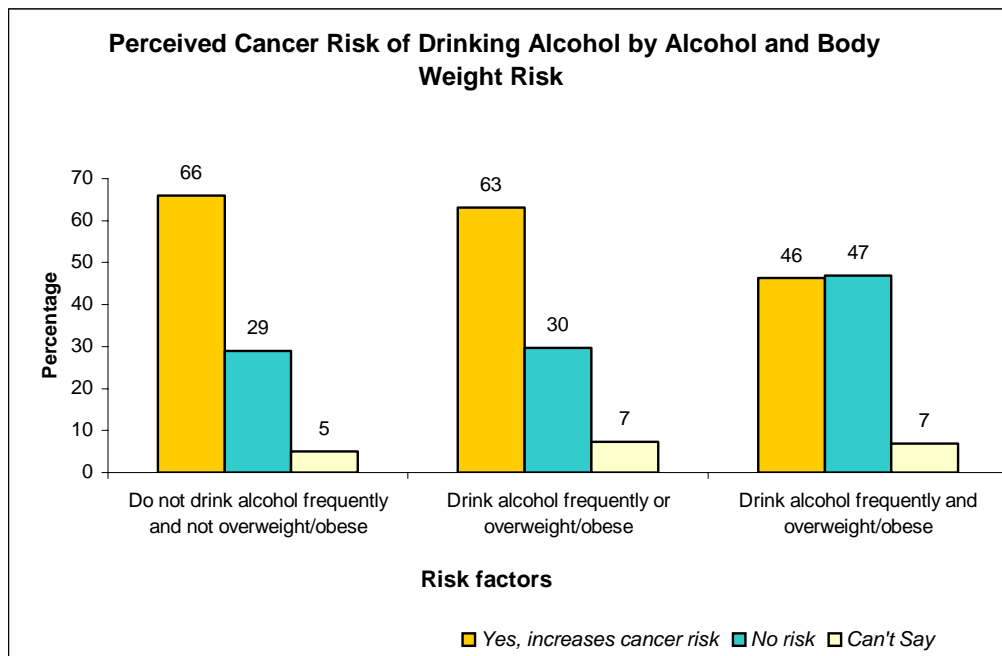
Body Mass Index and Daily Tobacco Use

Three Body Mass Index and tobacco use risk categories were defined (Figure 36). If individuals did not use tobacco daily and were not overweight or obese they were categorised as having no risk factors. If individuals either used tobacco daily or were overweight/obese they were classified as having one risk factor. Individuals who used tobacco daily and were overweight or obese had both risk factors. The majority of respondents in Southern and Eastern Asia did not use tobacco daily and were not overweight/obese. Approximately half of respondents in all of the other regions were identified as having one risk factor. In Western Asia, North America and Europe, 15% or more of respondents used tobacco daily and were overweight/ obese.

Figure 36. Prevalence of daily tobacco use and body weight risk factors by geographic region
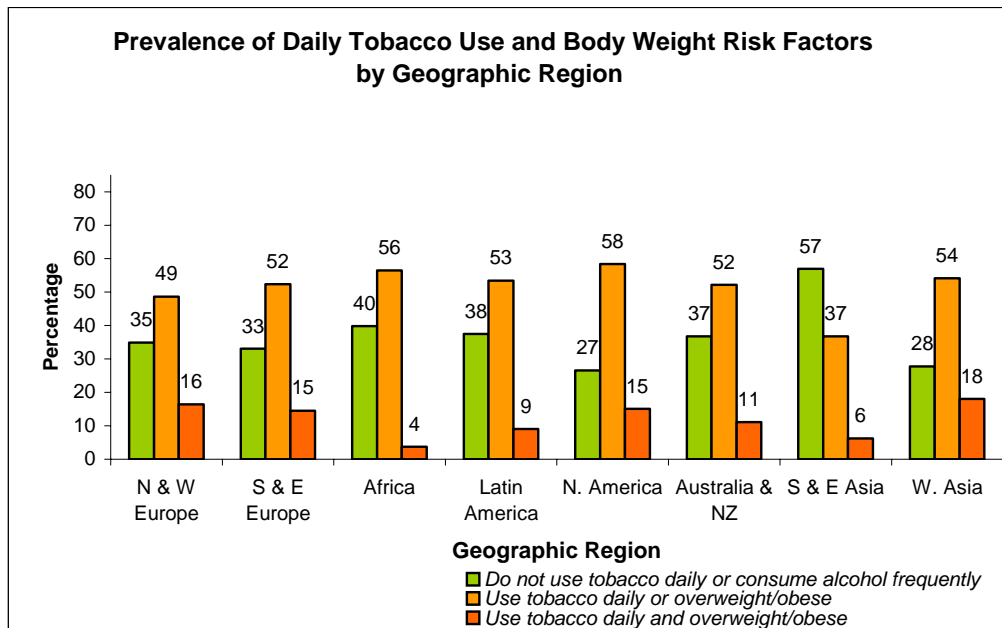
Over half of all respondents' perceived being overweight to elevate cancer risk (Figure 37).

Figure 37. Perceived cancer risk of being overweight by tobacco and body weight risk factors

Perceived Cancer Risk of Being Overweight by Tobacco and Body Weight Risk Factors
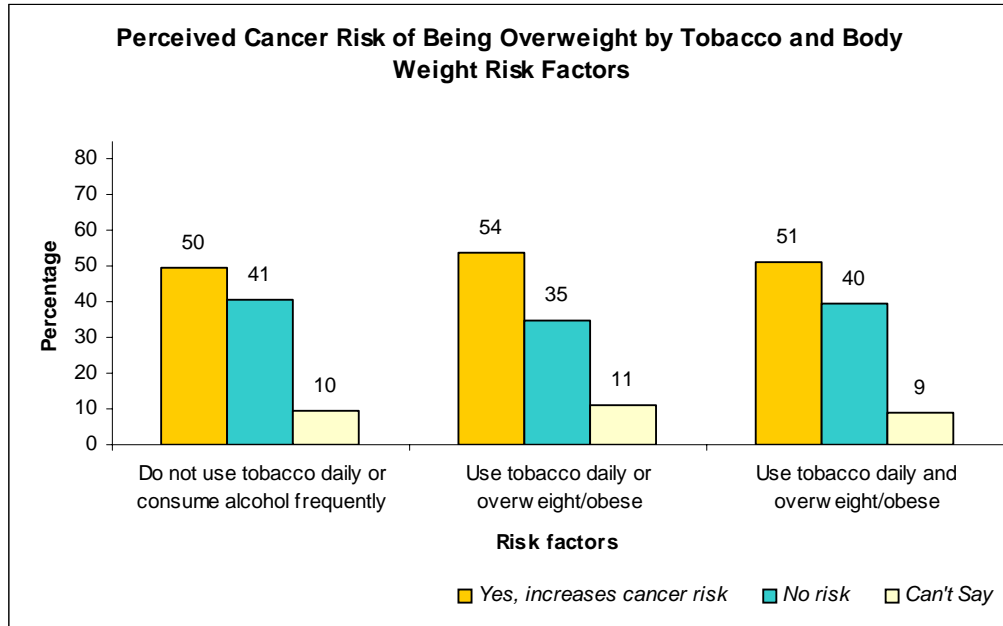
Regardless of the extent of risk, the majority of respondents believed smoking cigarettes elevated cancer risk (Figure 38). Individuals who use tobacco daily and are overweight/obese are twice as likely as those who do not consume tobacco daily and are of an acceptable weight to believe that there is no cancer risk from smoking cigarettes.

Figure 38. Perceived cancer risk of smoking cigarettes by tobacco and body weight risk factors

Perceived Cancer Risk of Smoking Cigarettes by Tobacco and Body Weight Risk Factors
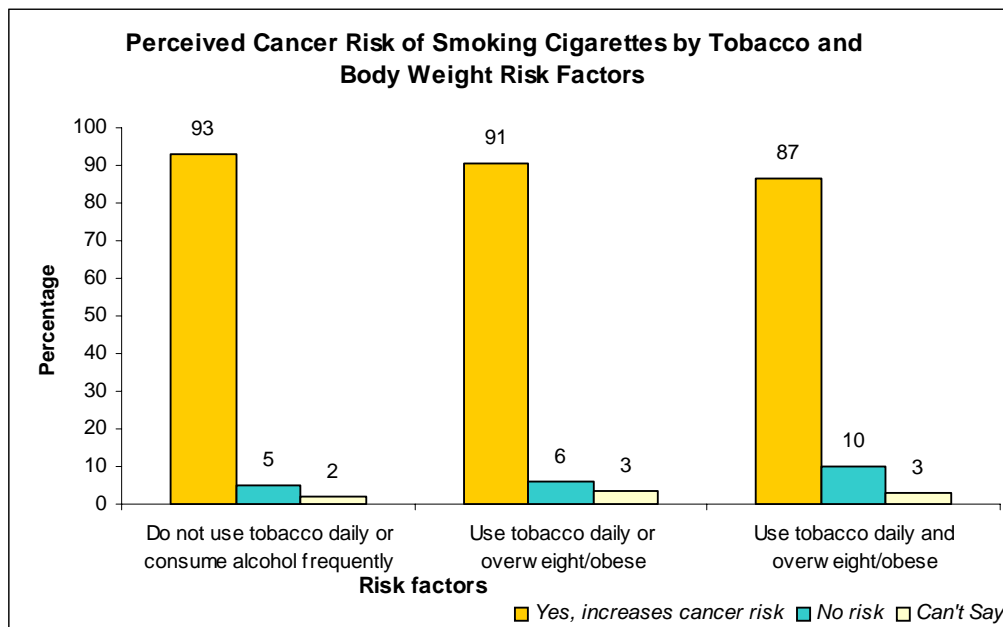
Alcohol Consumption and Daily Tobacco Use

Three tobacco and alcohol risk categories were defined. If individuals did not drink alcohol frequently and did not use tobacco daily they were categorised as having no risk factors. If individuals either consumed alcohol frequently or used tobacco daily they were classified as having one risk factor. Individuals who consumed alcohol frequently and tobacco daily had both risk factors. As illustrated in Figure 39, over 80% of Latin American and African respondents did not use tobacco daily or consume alcohol frequently. One third of European and Western Asian respondents used tobacco daily or consumed alcohol frequently. Nearly 1 in 20 adults in Europe and Australia/ New Zealand had both risk factors.

Figure 39. Prevalence of alcohol and tobacco risk factors by geographic region
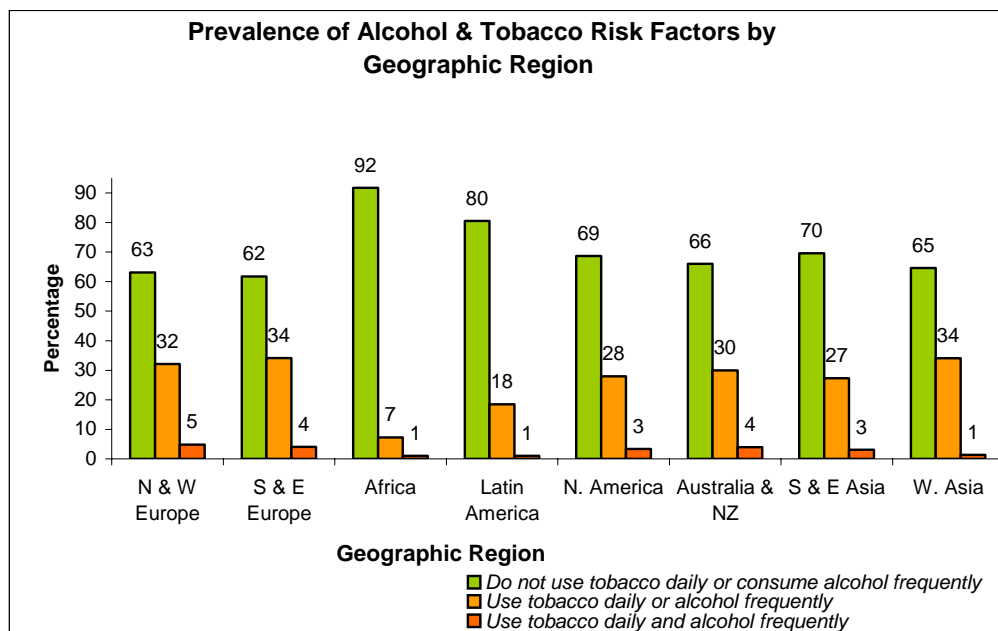
As personal risk increased, the belief that smoking cigarettes elevated cancer risk decreased (Figure 40). Specifically, individuals who are both smokers and alcohol drinkers are more likely to think there is no risk from smoking (25%) than those who have only one risk factor (8%) or neither of these risk factors (5%). Since tobacco and alcohol multiply the risks of certain cancers of the upper digestive and respiratory tracts[10] this is quite concerning.

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[10] Pelucchi C., Gallus, S., Garavello, W., Bosetti, C., & La Vecchia, C. (2008). Alcohol and tobacco use, and cancer risk for upper aerodigestive tract and liver. *European Journal of Cancer Prevention, 17,* 340-344.

Figure 40. Perceived cancer risk of smoking cigarettes by tobacco and alcohol risk factors

Perceived Cancer Risk of Smoking Cigarettes by Tobacco & Alcohol Risk Factors

	Do not use tobacco daily or consume alcohol frequently	Use tobacco daily or alcohol frequently	Use tobacco daily and alcohol frequently
Yes, increases cancer risk	91	88	73
No risk	5	8	25
Can't Say	4	4	2
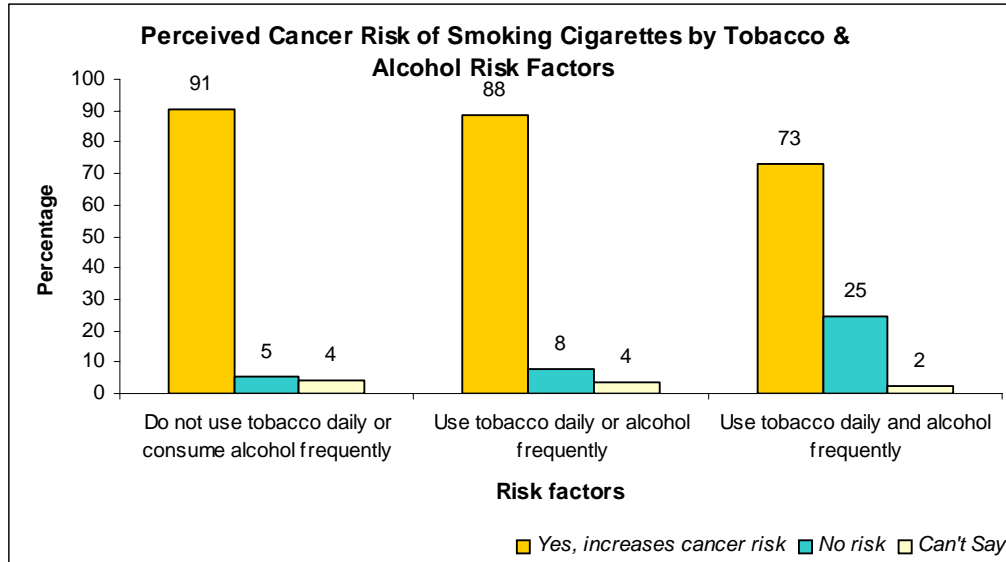
Risk factors

Similar to perceptions of smoking cigarettes, individuals who use tobacco daily and alcohol frequently are more likely to think there is no risk from drinking alcohol (46%) than those who have only one risk factor (32%) or neither of these risk factors (25%) (Figure 41).

Figure 41. Perceived cancer risk of drinking alcohol by tobacco and alcohol risk factors

Perceived Cancer Risk of Drinking Alcohol by Tobacco & Alcohol Risk Factors

	Do not use tobacco daily or consume alcohol frequently	Use tobacco daily or alcohol frequently	Use tobacco daily and alcohol frequently
Yes, increases cancer risk	66	62	49
No risk	25	32	46
Can't Say	8	6	5

Risk factors
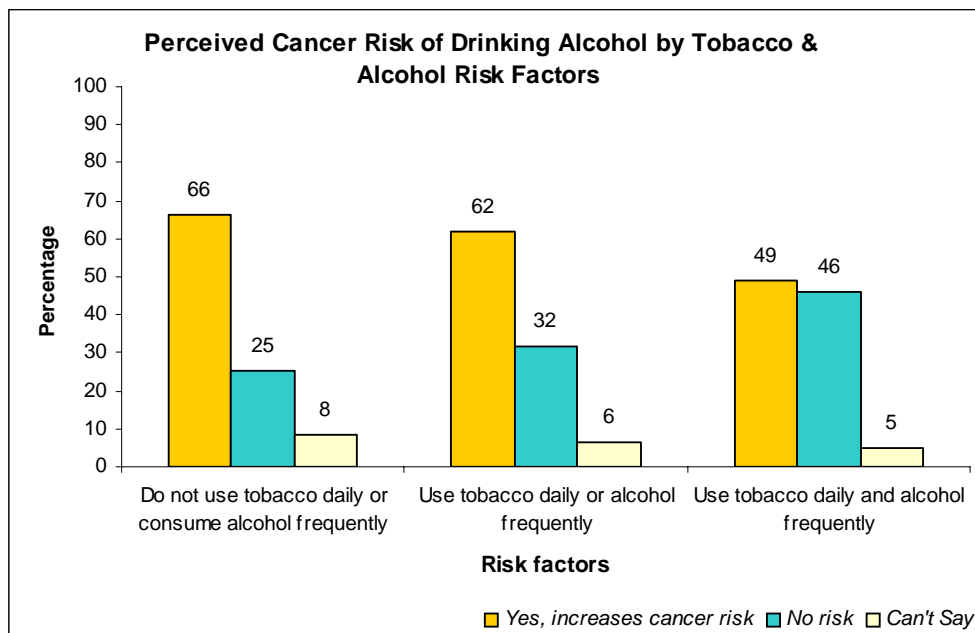
APPENDIX 1 : QUESTIONNAIRE

Roy Morgan/Gallup International –

1. International Union Against Cancer Global Survey
   on Primary Cancer Prevention and Risk Reduction

2. Occupation & Employment Survey

COUNTRY OF INTERVIEW *Country Code Columns 1-3*

COUNTRY	CODE
Australia	003
Austria	004
China	010
Dominican Republic	061
Georgia	018
Guatemala	062
India	024
Indonesia	025
Kenya	031
New Zealand	038
Nigeria	039
Pakistan	041
Panama	064
Peru	042
Philippines	043
Romania	046
Serbia	048

Spain	066
Turkey	054
UK	055
Ukraine	056
USA	057
Venezuela	058
Albania	060
Uruguay	067

Code for location in country C4-8

LIST OF REGIONS WITHIN EACH COUNTRY/CODE NUMBERS WILL BE FINALISED ONCE FINAL LIST OF PARTICIPATING COUNTRIES IS COMPILED. EACH COUNTRY SHOULD ADVISE ITS SAMPLING STRATIFICATION PRIOR TO SURVEY LAUNCH

*PLEASE RECORD **RESPONDENT ID NUMBER** ON Columns 9 – 13*

Good morning/afternoon/evening. My name is (SAY NAME) from (NAME OF COMPANY). Today we are conducting a short survey on a range of topical issues.

QAGE. Firstly, would you mind telling me your approximate age?

18 – 19 01		C14-15
20 – 24 02		
25 – 29 03		
30 – 34 04		
35 – 39 05		
40 – 44 06		
45 – 49 07		
50 – 54 08		
55 – 59 09		
60 – 64 10		
65 – 70 11		

70+ 12

QGENDER. RECORD RESPONDENT'S SEX:

MALE............. 1   C16

FEMALE........ 2

SECTION 1. Health Issues:

We now have a series of questions about ILLNESSES and other MEDICAL CONDITIONS.

1. Which THREE health issues do you consider most important?   **DO NOT AID OR READ ANSWERS**

Aged care, Old age..01   Columns 17-22

AIDS...02   (First answer should be recorded

Alzheimer's..03   On Col 17-18 , second answer on

Arthritis...................................... 04   19-20, and third answer 21-22)

Asthma.. 05

Cancer..06

Children's health..07

Dental, Teeth problems.......................................08

Depression...09

Diabetes...................................... 10

Diet issues.................................... 11

Drug abuse...12

Ear, Nose, Throat...13

Eyes, Vision, Blindness.................. 14

Fitness, Exercise.................................... 15

Headache / Migraine 16

Hearing loss...17

Heart disease, Cardiac arrest............. 18

Infections...19

Limb disorder (lower limbs) 20

Limb disorder (upper limbs)............................21

Mental health, Behaviour issues.......................22

Muscle / bone problems (back, hip etc)..........23

Overweight (Obesity)...24

SIDS, Cot death.............................. ....<u>25</u>

Skin problems...26

Smoking, Smoking related issues.....................27

Tuberculosis 28

Underweight (Anorexia, Bulimia)....................29

Record other illnesses or other medical conditions: 97

……………………………………………………………………………

……………………………………………………………………………

CAN'T SAY ……………………..   98

2. As I say some things people do and consume, please say whether you believe they increase a person's risk of cancer or not.

	Yes, Increase Cancer risk	No risk	Can't Say	
a. Drinking tap water from this area	1	2	3	C23
b. Smoking cigarettes	1	2	3	C24
c. Chewing tobacco	1	2	3	C25
d. Drinking alcohol	1	2	3	C26

e. Not eating vegetables................................1 ....2....................3   C27

f. Not eating fruit..1 ....2....................3   C28

g. A lack of cereals or wholegrain..........................1 ....2....................3   C29

h. Eating fatty foods ....1 ....2....................3   C30

i. Eating red meat......................................1 ....2....................3   C31

j. A lack of exercise ....1 ....2....................3   C32

k. Being overweight....................................1 ....2....................3   C33

l. Using mobile (or cell) phones............................1 ....2....................3   C34

m. Exposing your skin to the sun............................1 ....2....................3   C35

n. Exposure to air pollution...................................1 ....2....................3   C36

o. Infection with viruses or bacteria ....1 ....2....................3   C37

p. Being stressed...1 ....2....................3   C38

2A. Have you ever had a cancer screening test, blood test, or some other test for cancer?

IF YES, Which, if any, of the following cancer tests have you had? (READ OUT)

                 YES   **NO**

a. Bowel or Colon cancer check...............................1 2   C39

b. Skin cancer check.....................................1 2   C40

c. Lung cancer check....................................1 2   C41

d. **Ask women**: Pap test or Pap smear 1 2   C42

e. **Ask women**: Mammogram or Breast x-ray 1 2   C43

f. **Ask men**: Prostate check.......................................1 2   C44

g. Other check..1 2   C45

h. **No, None**...1   C46

2B. Some people believe once a person has cancer not much can be done to cure it –

do you **agree** or **disagree** with that?

Agree...1   C47

Disagree..2

Undecided.......................................3

3a. In the last 12 months, have you used any tobacco products such as cigarettes, roll your own tobacco, a pipe, cigars, chewing tobacco, or snuff, or bidis*? **IF YES**: Which? (READ OUT)

MULTIPLE RESPONSE

Cigarettes 1   C48-54

Roll your own tobacco.................2

Pipe..3

Cigars..4

Chewing tobacco 5

Snuff..6

Bidis*..7

No, None………………..……...8 Go to 4

* Ask only in India, Bangladesh, Nepal, Sri Lanka and the Maldives.

3b. And which have you used in the last 24 hours since this time yesterday? (READ OUT)

MULTIPLE RESPONSE

Cigarettes 1   C55-61

Roll your own tobacco.................2

Pipe..3

Cigars..4

Chewing tobacco 5

Snuff 6

Bidis* 7

No, None 8

* Ask only in India and countries where used

4. In the last 12 months have you had an alcoholic drink of any kind? **IF YES:** About how often do you have an alcoholic drink?

Most days 1   C62

5 or 6 days a week 2

3 or 4 days a week 3

Once a week 4

2 or 3 times a month 5

Once a month 6

Less often 7

Rarely 8

No, Never, Don's use/drink 9

RECORD OR ASK:

5a. How would you describe your natural skin colour when you don't have a tan?

Very fair 1   C63

Fair 2

Medium 3

Olive 4

Dark 5

Very Dark 6

5b. In the last 12 months have you been sunburnt? By sunburnt I mean any reddening of the skin after being outside in the sun?

Yes 1   C64

No 2

Don't Know 3

6a.   Have you yourself ever been diagnosed with cancer?

   Yes 1   C65

   No 2

   Don't know 3

   Refused 4

6b.   Has anyone in your immediate family ever been diagnosed with cancer?

   Yes 1   C66

   No 2

   Don't know 3

   Refused 4

Next about vigorous activity, hard physical work or sport participation.

7a.   How often do you do hard physical or vigorous activity **at work**?

   Most days 1   C67

   5 or 6 days a week.......................2

   3 or 4 days a week.......................3

   Once a week.................................4

   2 or 3 times a month...................5

   Once a month 6

   Less often.....................................7

   Rarely 8

   Never 9

   Don't work 0

7b.   And how often do you do hard physical or vigorous activity **at home?**

Most days....................................1   C68

5 or 6 days a week.......................2

3 or 4 days a week.......................3

Once a week................................4

2 or 3 times a month...................5

Once a month 6

Less often....................................7

Rarely..8

Never 9

8.   And how often do you do hard physical or vigorous activity **at a gym, sports place or somewhere else?**

Most days....................................1   C69

5 or 6 days a week.......................2

3 or 4 days a week.......................3

Once a week................................4

2 or 3 times a month...................5

Once a month 6

Less often....................................7

Rarely..8

Never 9

Now some questions about medical treatment for cancer.

Q9a.   When making a decision about what medical treatment to have, what is your preference? READ OUT:

C70

The doctor should make the decisions using

all that's known about treatment..1

The doctor should make the decisions but strongly

consider your needs and priorities...2

The doctor and you should make the decisions together

on an equal basis 3

You should make the decisions, but would strongly

consider the doctor's opinion...4

You should make the decisions using all you know

or learn about the treatments 5

(Single response)

CAN'T SAY (DO NOT READ) 6

IF CAN'T SAY:

Your opinions are really important. There are no right or wrong answers, it's your opinion we need. Let me read the questions again.

9b. Now some questions about medical treatments. If you had cancer and a very expensive cancer drug that you would have to pay for could treat your cancer, would you expect your doctor to tell you about this new drug? Or not?

YES...1   C71

NO, WOULD NOT 2

DEPENDS (DO NOT READ...............................3

CAN'T SAY 4

Next, thinking about computers.

10a.How many computers do **you** own?

ONE 1   C72

TWO...................................... 2

THREE.................................. 3

FOUR OR MORE................ 4

NONE 0   Go to 11

10b.   What kind of Internet connection do you have **in your home**?

Dial up modem 1   Go to 10d   C73

ISDN...................................... 2

Broadband/High speed 3   Ask 10c

NONE 4   Go to 10d

CAN'T SAY 5   Go to 10d

10c. What type of **Broadband connection** do you have in your home?

IF WIRELESS: Is it **portable** wireless not fixed to your home or, do you use a **fixed wireless** to access in your home?

ADSL/DSL 1   C74

Cable 2

Satellite 3

Wireless – Portable 4

Wireless – Fixed in home .. 5

CAN'T SAY 6

10d.   How often do you now **backup your computer data**?

Daily...................................... 1   C75

Weekly 2

Monthly 3

Every 3 months 4

Every 6 months 5

Annually 6

Less often 7

Don't ever do 8

CAN'T SAY 9

SECTION 2: EMPLOYMENT QUESTIONS

ASK EVERYONE

13a. In the next 12 months, do you expect the number of unemployed to **increase a lot**, to **increase slightly**, remain the **same**, **fall slightly**, or **fall a lot**?

INCREASE A LOT 1   C76

INCREASE SLIGHTLY 2

REMAIN THE SAME 3

FALL SLIGHTLY 4

FALL A LOT 5

(DO NOT READ) CAN'T SAY 6

13b. Are you now in **paid** employment?

IF **YES**: **Full**-time for 35 hours or more a week, or **part**-time?

YES FULL-TIME .... 1 Go to 15a   C77

YES PART-TIME .... 2 Go to 14d

NO .... 3 Ask 13c

13c. Are you self-employed or a consultant?

IF **YES**: **Full**-time for 35 hours or more a week, or **part**-time?

YES FULL-TIME .... 1 Go to 15a   C78

YES PART-TIME .... 2 Go to 14d

NO .... 3 Ask 14a

14a. IF NO: Are you <u>now</u> <u>looking</u> <u>for</u> a paid job?

IF <u>LOOKING</u>:

A **<u>full</u>**-time job – for 35 hours or more a week – or a **<u>part</u>**-time job?

FULL-TIME..................... 1   C79

PART-TIME 2

IF <u>NOT</u> LOOKING:

Are you (READ OUT ANSWER PLACES):

Retired?............................ 3

A student?........................ 4

A non-worker? 5

Or Home duties?........... 6

14b. And may I have your **previous occupation** please – your position and industry?

(Probe for answers to main duties or tasks)

C80-81

Professional................................ 1

Owner or Executive................. 2

Owner of Small Businesses 3
Sales 11
Semi-Professional 12

Other White Collar 4   Ask 14c
Skilled 5
Semi-Skilled 6
Unskilled 7
Farm Owner............................. 8
Farm Worker 9

No Occupation 10

Never been employed .... 13 Go to 16a

14c. Did you previously do **all** your work from home, **some** of your work from home, or **no** work from home?

ALL WORK FROM HOME 1   C82

SOME WORK FROM HOME 2   Go to 16a

NO WORK FROM HOME 3

14d. Are you **now looking for** a full-time job or additional hours?

FULL-TIME JOB 1   C83

ADDITIONAL HOURS 2   Go to 15a

NO 3

IF NOW EMPLOYED FULL-TIME OR PART-TIME:

15a. And may I have your **occupation** please – your position and industry?
     (Probe for answers to main duties or tasks)

C84-85

Professional 1

Owner or Executive 2

Owner of Small Businesses 3

Sales 11

Semi-Professional 12

Other White Collar 4

Skilled 5

Semi-Skilled 6

Unskilled 7

Farm Owner 8

Farm Worker 9

15b. Is that in the **public** service – in **private** industry – or **self-employed**?

      PUBLIC SERVICE................................ 1   C86

      PRIVATE INDUSTRY.......................... 2

      SELF EMPLOYED 3

15c. Do you now do **all** your work from home, **some** of your work from home, or <u>no</u> work from home?

      ALL WORK FROM HOME 1   C87

      SOME WORK FROM HOME................2

      NO WORK FROM HOME.....................3

15d. How **satisfied** are you with your job?

    (**READ OUT**)

      Very satisfied.. 1   C88

      Satisfied 2

      Neither satisfied nor dissatisfied 3

      Dissatisfied... 4

      Very dissatisfied 5

15e. Do you think your present **job is safe**, or do you think there's a chance you may become **unemployed**?

      PRESENT JOB SAFE 1   C89

      CHANCE OF UNEMPLOYMENT.......2

      DON'T KNOW, NO RESPONSE..........3

15f. If you became unemployed, do you think you'd be able to find a new job **fairly quickly**, or do you think it might **take longer**?

      NEW JOB QUICKLY...............................1   C90

      MAY TAKE LONGER 2

WOULDN'T LOOK................................3

DON'T KNOW, NO RESPONSE..........4

Finally, we have a few questions about you to make sure we have interviewed a cross section of people.

IN USA, PLEASE ASK Q16a and Q16b. EVERYWHERE ELSE, ASK Q17a and Q17b:

IF IN USA ASK

16a. Please indicate your approximate height (without shoes). **IF NO:** Estimate.

Less than 4'8" 01   C91-92

4'8" 02

4'9" 03

4'10" 04

4'11" 05

5'0" 06

5'1" 07

5'2" 08

5'3" 09

5'4" 10

5'5" 11

5'6" 12

5'7" 13

5'8" 14

5'9" 15

5'10" 16

5'11" 17

6'0" 18

6′1″ ....<u>19</u>

6′2″ 20

6′3″ 21

 6′4″ 22

More than 6′4″ 23

Wouldn't say 24

16b. Please indicate your approximate weight. **IF NO:** Estimate.

Less than 100 pounds .. 01   C93-94

100 – 109 pounds 02

110 – 119 pounds 03

120 – 129 pounds 04

130 – 139 pounds 05

140 – 149 pounds 06

150 – 159 pounds 07

160 – 169 pounds 08

170 – 179 pounds .... <u>09</u>

180 – 189 pounds 10

190 – 199 pounds 11

200 – 209 pounds 12

210 – 219 pounds 13

220 – 229 pounds 14

230 – 239 pounds 15

240 – 249 pounds 16

250 – 259 pounds 17

260 – 269 pounds 18

270 – 279 pounds .... <u>19</u>

280 – 289 pounds 20

290 – 299 pounds 21

300 pounds or more 22

Wouldn't say 23

EVERYWHERE OUTSIDE USA (Australia, UK, Europe) ASK:

17a. Please indicate your approximate height (without shoes). **IF NO:** Estimate.

Less than 143 cm (4'8") 01   C95-96

143 cm (4'8") 02

145 cm (4'9") 03

148 cm (4'10") 04

150 cm (4'11") 05

153 cm (5'0") 06

155 cm (5'1") 07

158 cm (5'2") 08

160 cm (5'3") ....<u>09</u>

163 cm (5'4") 10

165 cm (5'5") 11

168 cm (5'6") 12

170 cm (5'7") 13

173 cm (5'8") 14

175 cm (5'9") 15

178 cm (5'10") 16

180 cm (5'11") 17

183 cm (6'0") 18

185 cm (6'1") ....<u>19</u>

188 cm (6'2") 20

190 cm (6'3") 21

193 cm (6'4") 22

More than 193 cm (6'4") 23

Wouldn't say................……...24

17b. Please indicate your approximate weight. **IF NO:** Estimate.

Under 7 stone (under 44kg)...........................01   C97-98

7 to under 8 stone (44 – 50kg)........................02

8 to under 9 stone (51 – 56kg)........................03

9 to under 10 stone (57 – 63kg).....................04

10 to under 11 stone (64 – 69kg)....................05

11 to under 12 stone (70 – 75kg)....................06

12 to under 13 stone (76 – 82kg)....................07

13 to under 14 stone (83 – 88kg)....................08

14 to under 15 stone (89 – 94kg)....................09

15 to under 16 stone (95 – 101kg)..................10

16 to under 17 stone (102 – 107kg)................11

17 to under 18 stone (108 – 113kg)................12

18 to under 19 stone (114 – 120kg)................13

19 to under 20 stone (121 – 126kg)................14

20 stone or more (127kg or more).................15

Wouldn't say................……………....…...16

ASK EVERYONE

18a. What is your religion?

ANGLICAN (CHURCH OF ENGLAND).................01   C99-100

BAPTIST...02

CATHOLIC..03

EPISCOPAL..04

JEHOVAH'S WITNESS 05

LUTHERAN 06

METHODIST 07

MORMON 08

PENTECOSTAL 09

PRESBYTERIAN 10

UNITING 11

OTHER CHRISTIAN 12

BUDDHIST 13

HINDU 14

JEWISH.. 15

MUSLIM.. 16

OTHER 17

NO RELIGION 18

Wouldn't say ....…………………………….....19

18b.   Do you belong to a trade union?

YES 1   C101

NO 2

18c. Does anyone else in your household belong to a trade union?

YES 1   C102

NO 2

Q19, Ethnicity (different in each country) examples of questions would be as follows – please use most appropriate for your market

How would you describe your ethnicity?

Which one ethnic group do you consider yourself to be from?

Which of these groups do you consider you belong to?   C103-106

White/Caucasian	101
Black (Caribbean)	102
Black (African)	103
Black (Other)	104
African American	201
Native American	202
Hispanic	203
Guatemalan	204
Uruguayan	205
Panamanian	206
Dominican	207
Venezuelan	208
Indigenous/native	209
Chinese	301
Other Asian	397
Pakistani	401
Indian	402
Bangladeshi	403
Kurdish	404
Arabic	405
Syrian Christian	406
Jewish	407

French	501
German	502
Swiss	503
Italian	504
Russian	505
Romanian	506
Swedish	507
Greek	508
Turkish	509
Armenian	510
Spanish	511
Other European	597
Maori	601
Fijian	602
Samoan	603
Other Polynesian	697
Cook Islander	701
Nuiain	702
Tongan	703
Papua	704
Batak	801
Betawi	802
Minang	803
Melayu	804
Sunda	805
Jawa	806
Madura	807

Bali	808
Bugis/ Makassar	809
Palembang/Lampung	810
Aceh	811
Nias	812
Banjar/Dayak	813
Minahasa	814
Sasak	815
Flores	816
Tionghoa	817
Ambon/Maluku	818
Bicolano	830
Cebuano	831
Ibanag	832
Igorot	833
Ilokano	834
Ilonggo	835
Kapampangan	836
Pangasinense	837
Tagalog	838
Waray	839
Other Ethnic Group	997
Don't know	998
Refused	999

IF SURVEY CONDUCTED FACE TO FACE ASK:

Q20. Is there a telephone connected to this household – I don't mean a mobile phone?

Yes 1

No 2

Can't say/Refused 3

Q20a. How many separate telephone lines are connected to your home?

1 LINE	1
2 LINES	2
3 LINES	3
4 OR MORE LINES	4
CAN'T SAY	5

Q20b. May I have your phone number?

RECORD

Won't say number X

Q20c. Do you have a mobile, or cellular phone?

Yes 1

No 2

Can't say/Refused 3

Thank you for your time and assistance. This market research is carried out in compliance with the Privacy Act, and the information you provided will be used only for research purposes.

We are conducting this research on behalf of ROY MORGAN RESEARCH.

If you would like any more information about this project or Roy Morgan Research, you can phone us on 1800 337 332.

APPENDIX 2 : NORTHERN AND WESTERN EUROPE

There were 6 countries in Northern and Western Europe: Austria, Belgium, Finland, Germany, Switzerland and the United Kingdom. In this region 5873 people were surveyed.

Table 8: Gender and age breakdown of tobacco consumption

	Tobacco User	Do not consume
Male	41.5	58.5
Female	22.7	77.3
18-29	40.0	60
30-44	42.0	58
45-59	37.1	62.9
60+	12.5	87.5

Table 9: Gender and age breakdown of alcohol consumption

	Frequent	Moderate	Less than once a week
Male	13.9	47.7	38.5
Female	6.1	27.4	66.5
18-29	4.8	42.5	52.7
30-44	11.5	44.8	43.8
45-59	12.9	40.1	47.0
60+	8.6	24.3	67.1

Table 10: Gender and age breakdown of physical activity

	Physical Activity on most days at:		
	Work	Home	A gym, sports place
Male	24.5	9.9	5.1
Female	11.7	24.4	3.2
18-29	18.8	17.1	8.9
30-44	28.0	19.2	4.2
45-59	23.8	18.6	2.8
60+	2.4	14.8	2.5

Table 11: Gender and age breakdown of sunburn in the last 12 months

	Yes	No	Don't Know
Male	22.4	77.4	0.2
Female	20.6	78.9	0.5
18-29	28.7	70.7	0.5
30-44	29.3	70.3	0.4
45-59	23.5	76.4	0.1
60+	8.0	91.5	0.5

Table 12:   Gender and age breakdown of beliefs about a cure for cancer

	Cure	No Cure	Undecided
Male	80.2	9.6	10.2
Female	82.9	6.6	10.4
18-29	80.4	9.2	10.4
30-44	84.2	7.6	8.2
45-59	81.2	8.3	10.6
60+	80.2	7.8	12.0

Table 13:   Gender and age breakdown of individual cancer diagnosis

	Yes	No	Don't know	Refused
Male	3.3	95.4	0.4	1.0
Female	4.5	93.9	0.2	1.5
18-29	0.5	99.1	0.1	0.3
30-44	3.5	94.7	0.3	1.5
45-59	4.1	94.7	0.2	1.0
60+	6.2	91.7	0.5	1.6

Table 14:   Gender and age breakdown of family cancer diagnosis

	Yes	No	Don't know	Refused
Male	25.9	67.1	5.8	1.2
Female	32.6	59.9	5.8	1.7
18-29	26.8	66.1	6.5	0.6
30-44	28.6	63.6	6.0	1.7
45-59	31.4	62.4	4.9	1.3
60+	29.5	62.6	6.0	1.9

Table 15:   Gender and age breakdown of medical decision expectations

	The doctor should make the decisions using all that is known about treatment	The doctor should make the decisions but strongly consider your needs and priorities	The doctor and you should make the decisions together on an equal basis	You should make the decisions	Cannot say
Male	8.7	25.9	42.8	19.6	3.1
Female	6.3	24.2	45.7	20.0	3.9
18-29	9.2	23.6	44.6	20.4	2.2
30-44	7.3	29.0	43.4	16.8	3.5
45-59	6.9	24.3	46.3	19.1	3.5
60+	7.0	22.6	43.0	22.9	4.5

Table 16:   Gender and age breakdown of cancer screening behaviour

	Overall	Female screening	Male Screening
18-29	24.0	33.4	15.5
30-39	53.1	67.4	35.7
40-49	55.0	68.6	43.4
50-59	64.0	77.0	50.9
60+	64.1	74.0	51.5

Table 17:   Age breakdown of gender specific cancer screening behaviour

	Pap test	Mammogram	Prostate check
18-29	18.2	12.7	1.8
30-39	36.1	42.1	3.7
40-49	49.1	49.9	14.7
50-59	44.4	64.5	22.4
60+	46.4	63.3	38.8

Table 18:   Gender and age breakdown of cancer screening behaviour

	Bowel or colon cancer check	Skin cancer check	Lung cancer check
Male	7.9	7.8	9.0
Female	10.2	7.8	5.0
18-29	2.2	3.2	2.1
30-39	3.3	5.4	5.3
40-49	7.5	7.7	6.7
50-59	10.0	8.8	8.3
60+	17.3	11.3	10.2

Table 19:   Gender and age breakdown of perceived risk of drinking tap water

	Increases risk	No risk	Can't say
Male	18.0	67.5	14.5
Female	14.5	63.0	22.4
18-29	10.0	72.7	17.4
30-44	17.6	65.2	17.2
45-59	14.5	64.2	21.2
60+	20.1	61.6	18.2

Table 20:   Gender and age breakdown of perceived risk of smoking cigarettes

	Increases risk	No risk	Can't say
Male	96.8	2.0	1.2
Female	96.1	2.8	1.2
18-29	95.9	2.0	2.1
30-44	98.4	0.8	0.7
45-59	96.8	2.3	0.9
60+	94.4	4.2	1.4

Table 21: Gender and age breakdown of perceived risk of chewing tobacco

	Increases risk	No risk	Can't say
Male	87.8	6.2	6.0
Female	83.3	6.2	10.5
18-29	82.0	8.5	9.5
30-44	89.9	4.0	6.1
45-59	86.3	6.0	7.6
60+	82.5	6.9	10.5

Table 22: Gender and age breakdown of perceived risk of drinking alcohol

	Increases risk	No risk	Can't say
Male	58.2	32.5	9.3
Female	57.4	28.7	13.9
18-29	54.6	38.2	7.1
30-44	61.6	28.1	10.2
45-59	58.9	28.7	12.4
60+	55.1	30.0	14.9

Table 23: Gender and age breakdown of perceived risk of not eating vegetables

	Increases risk	No risk	Can't say
Male	69.2	19.8	11.1
Female	69.2	20.1	10.7
18-29	66.4	25.5	8.0
30-44	69.0	20.2	10.8
45-59	67.2	19.3	13.5
60+	72.9	16.9	10.2

Table 24: Gender and age breakdown of perceived risk of not eating fruit

	Increases risk	No risk	Can't say
Male	65.6	22.0	12.4
Female	66.4	22.2	11.4
18-29	63.1	28.6	8.2
30-44	65.4	22.8	11.8
45-59	63.9	20.8	15.3
60+	70.4	18.7	10.9

Table 25: Gender and age breakdown of perceived risk of a lack of cereals and wholegrains

	Increases risk	No risk	Can't say
Male	63.2	23.3	13.5
Female	63.6	22.1	14.3
18-29	59.2	29.3	11.4
30-44	63.3	24.4	12.3
45-59	61.9	21.6	16.5
60+	67.4	18.2	14.4

Table 26: Gender and age breakdown of perceived risk of eating fatty foods

	Increases risk	No risk	Can't say
Male	62.9	23.8	13.2
Female	58.9	24.7	16.4
18-29	57.4	30.1	12.5
30-44	60.4	25.2	14.4
45-59	62.8	21.5	15.7
60+	61.5	22.6	15.9

Table 27: Gender and age breakdown of perceived risk of eating red meat

	Increases risk	No risk	Can't say
Male	43.0	41.2	15.8
Female	41.7	39.4	18.9
18-29	36.1	47.4	16.4
30-44	40.6	43.8	15.6
45-59	42.5	40.8	16.7
60+	47.4	32.3	20.3

Table 28: Gender and age breakdown of perceived risk of a lack of exercise

	Increases risk	No risk	Can't say
Male	52.0	35.2	12.7
Female	43.7	39.0	17.3
18-29	46.6	38.8	14.6
30-44	48.5	38.8	12.6
45-59	45.6	40.0	14.4
60+	49.6	32.2	18.3

Table 29: Gender and age breakdown of perceived risk of being overweight

	Increases risk	No risk	Can't say
Male	60.8	27.4	11.8
Female	51.8	31.5	16.7
18-29	53.7	36.3	10.0
30-44	56.2	29.4	14.4
45-59	57.2	27.9	14.9
60+	56.5	27.2	16.3

Table 30: Gender and age breakdown of perceived risk of using mobile or cell phones

	Increases risk	No risk	Can't say
Male	49.8	35.0	15.1
Female	46.1	35.0	18.9
18-29	36.4	51.3	12.3
30-44	53.8	32.1	14.1
45-59	50.0	32.8	17.2
60+	47.2	30.4	22.4

Table 31: Gender and age breakdown of perceived risk of exposing your skin to the sun

	Increases risk	No risk	Can't say
Male	94.4	3.4	2.2
Female	94.4	3.4	2.2
18-29	95.1	3.3	1.6
30-44	95.5	2.6	1.8
45-59	94.6	3.6	1.8
60+	92.8	4.1	3.2

Table 32: Gender and age breakdown of perceived risk of exposure to air pollution

	Increases risk	No risk	Can't say
Male	71.5	17.6	11.0
Female	62.4	20.2	17.3
18-29	59.5	28.2	12.3
30-44	72.6	15.3	12.1
45-59	68.5	18.8	12.7
60+	64.1	17.0	18.9

Table 33: Gender and age breakdown of perceived risk of infection with viruses or bacteria

	Increases risk	No risk	Can't say
Male	70.7	16.6	12.7
Female	63.7	18.1	18.2
18-29	60.1	25.6	14.3
30-44	67.5	17.3	15.2
45-59	68.4	17.9	13.7
60+	69.7	12.1	18.2

Table 34: Gender and age breakdown of perceived risk of being stressed

	Increases risk	No risk	Can't say
Male	53.5	33.0	13.6
Female	47.2	32.4	20.4
18-29	39.4	46.0	14.6
30-44	53.1	31.5	15.3
45-59	51.9	32.7	15.4
60+	52.3	25.9	21.8

APPENDIX 3: SOUTHERN & EASTERN EUROPE

There were 8 countries in Southern and Eastern Europe: Albania, Czech Republic, Greece, Italy, Romania, Serbia, Spain and Ukraine. In this region 5873 people were surveyed.

Table 35: Gender and age breakdown of tobacco consumption

	Tobacco User	Do not consume
Male	41.8	58.2
Female	23.1	76.9
18-29	37.0	63.0
30-44	35.0	65.0
45-59	34.2	65.8
60+	21.7	78.3

Table 36: Gender and age breakdown of alcohol consumption

	Frequent	Moderate	Less than once a week
Male	14.5	33.2	52.4
Female	6.6	16.4	77.0
18-29	5.5	29.4	65.0
30-44	8.3	27.1	64.6
45-59	13.1	23.6	63.3
60+	13.7	17.7	68.6

Table 37: Gender and age breakdown of physical activity

	Physical Activity on most days at:		
	Work	Home	A gym, sports place
Male	20.0	13.7	4.4
Female	9.3	20.2	3.3
18-29	14.4	12.3	5.9
30-44	20.4	17.0	2.4
45-59	18.3	18.9	3.8
60+	2.3	19.1	4.0

Table 38: Gender and age breakdown of sunburn in the last 12 months

	Yes	No	Don't Know
Male	31.4	67.4	1.2
Female	27.5	70.7	1.7
18-29	42.2	56.4	1.4
30-44	34.0	65.0	1.0
45-59	27.2	71.1	1.7
60+	15.5	82.6	1.9

Table 39:   Gender and age breakdown of beliefs about a cure for cancer

	Cure	No Cure	Undecided
Male	63.8	25.2	11.1
Female	66.3	22.0	11.7
18-29	63.7	24.8	11.4
30-44	66.0	22.7	11.3
45-59	67.0	22.7	10.2
60+	62.8	24.3	12.9

Table 40:   Gender and age breakdown of individual cancer diagnosis

	Yes	No	Don't know	Refused
Male	3.3	94.2	0.9	1.6
Female	5.6	92.2	0.7	1.5
18-29	1.0	96.5	1.2	1.3
30-44	2.6	95.5	0.7	1.3
45-59	5.0	92.8	0.8	1.4
60+	9.1	87.9	0.7	2.2

Table 41:   Gender and age breakdown of family cancer diagnosis

	Yes	No	Don't know	Refused
Male	31.8	63.4	3.0	1.8
Female	41.6	54.6	2.3	1.5
18-29	28.5	65.7	3.5	2.3
30-44	37.3	59.1	2.1	1.5
45-59	39.9	56.8	2.2	1.1
60+	40.1	55.1	3.0	1.8

Table 42:   Gender and age breakdown of medical decision expectations

	The doctor should make the decisions using all that is known about treatment	The doctor should make the decisions but strongly consider your needs and priorities	The doctor and you should make the decisions together on an equal basis	You should make the decisions	Cannot say
Male	32.8	26.0	24.0	14.7	2.6
Female	28.9	26.5	28.2	13.6	2.7
18-29	29.8	30.4	22.1	14.5	3.2
30-44	30.1	25.6	27.2	15.0	2.2
45-59	30.2	26.2	27.4	14.1	2.0
60+	33.2	23.6	27.1	12.8	3.3

Table 43: Gender and age breakdown of cancer screening behaviour

	Overall	Female screening	Male Screening
18-29	25.9	31.2	20.7
30-39	39.2	50.0	27.6
40-49	45.2	61.7	30.1
50-59	55.2	64.4	43.7
60+	59.5	59.3	59.7

Table 44: Age breakdown of gender specific cancer screening behaviour

	Pap test	Mammogram	Prostate check
18-29	18.9	10.2	5.9
30-39	31.7	22.9	5.4
40-49	42.9	39.6	8.8
50-59	42.3	46.5	24.5
60+	33.8	42.5	40.6

Table 45: Gender and age breakdown of cancer screening behaviour

	Bowel or colon cancer check	Skin cancer check	Lung cancer check
Male	12.7	8.1	12.9
Female	12.1	7.2	10.9
18-29	5.1	5.8	9.2
30-39	7.7	6.3	8.4
40-49	8.2	7.5	10.5
50-59	17.0	8.7	14.6
60+	22.3	9.5	16.1

Table 46: Gender and age breakdown of perceived risk of drinking tap water

	Increases risk	No risk	Can't say
Male	22.8	62.0	15.2
Female	22.8	61.3	15.9
18-29	24.8	57.9	17.4
30-44	23.3	61.9	14.8
45-59	22.3	62.8	14.9
60+	21.0	63.1	15.9

Table 47: Gender and age breakdown of perceived risk of smoking cigarettes

	Increases risk	No risk	Can't say
Male	93.3	3.8	2.9
Female	93.4	3.4	3.2
18-29	93.6	3.8	2.6
30-44	93.5	3.0	3.4
45-59	92.6	4.1	3.3
60+	93.8	3.5	2.7

Table 48:   Gender and age breakdown of perceived risk of chewing tobacco

	Increases risk	No risk	Can't say
Male	68.8	16.6	14.6
Female	70.6	13.3	16.1
18-29	67.4	17.9	14.7
30-44	68.0	16.2	15.7
45-59	71.7	13.1	15.3
60+	71.6	12.7	15.7

Table 49:   Gender and age breakdown of perceived risk of drinking alcohol

	Increases risk	No risk	Can't say
Male	67.9	24.1	8.1
Female	72.9	19.4	7.8
18-29	66.1	24.5	9.4
30-44	71.5	20.8	7.7
45-59	71.6	21.3	7.1
60+	71.6	20.6	7.8

Table 50:   Gender and age breakdown of perceived risk of not eating vegetables

	Increases risk	No risk	Can't say
Male	50.2	38.3	11.4
Female	52.9	36.0	11.1
18-29	44.5	42.5	12.9
30-44	53.4	36.5	10.1
45-59	54.7	35.1	10.3
60+	51.9	35.6	12.5

Table 51: Gender and age breakdown of perceived risk of not eating fruit

	Increases risk	No risk	Can't say
Male	50.1	37.9	12.0
Female	51.4	36.6	12.0
18-29	44.9	41.1	14.1
30-44	51.0	37.6	11.3
45-59	55.6	34.2	10.2
60+	49.8	37.0	13.3

Table 52: Gender and age breakdown of perceived risk of a lack of cereals and wholegrains

	Increases risk	No risk	Can't say
Male	37.5	44.9	17.6
Female	36.6	47.4	16.0
18-29	30.7	50.5	18.8
30-44	36.8	47.1	16.2
45-59	40.6	44.3	15.0
60+	38.4	43.8	17.8

Table 53: Gender and age breakdown of perceived risk of eating fatty foods

	Increases risk	No risk	Can't say
Male	54.2	32.2	13.5
Female	53.8	33.1	13.1
18-29	46.4	37.2	16.4
30-44	54.5	32.9	12.6
45-59	56.1	30.6	13.3
60+	57.2	31.2	11.6

Table 54: Gender and age breakdown of perceived risk of eating red meat

	Increases risk	No risk	Can't say
Male	30.7	50.8	18.6
Female	32.5	48.4	19.0
18-29	25.7	53.7	20.5
30-44	29.9	52.1	18.0
45-59	36.1	45.8	18.1
60+	33.4	47.4	19.2

Table 55:   Gender and age breakdown of perceived risk of a lack of exercise

	Increases risk	No risk	Can't say
Male	39.9	48.1	11.9
Female	37.6	49.7	12.7
18-29	38.3	47.3	14.3
30-44	37.6	52.0	10.4
45-59	39.3	48.5	12.2
60+	39.8	47.2	13.1

Table 56:   Gender and age breakdown of perceived risk of being overweight

	Increases risk	No risk	Can't say
Male	51.4	36.0	12.6
Female	50.5	37.3	12.3
18-29	49.4	37.1	13.5
30-44	47.7	39.6	12.7
45-59	52.5	35.5	12.0
60+	54.2	34.1	11.7

Table 57:   Gender and age breakdown of perceived risk of using mobile or cell phones

	Increases risk	No risk	Can't say
Male	44.6	35.9	19.5
Female	48.4	32.5	19.1
18-29	47.6	37.1	15.3
30-44	47.2	34.4	18.3
45-59	47.6	33.5	19.0
60+	43.8	32.1	24.1

Table 58:   Gender and age breakdown of perceived risk of exposing your skin to the sun

	Increases risk	No risk	Can't say
Male	80.9	11.7	7.3
Female	83.0	9.8	7.2
18-29	80.7	11.9	7.3
30-44	83.2	9.5	7.3
45-59	83.6	9.7	6.7
60+	79.7	12.4	8.0

Table 59:   Gender and age breakdown of perceived risk of exposure to air pollution

	Increases risk	No risk	Can't say
Male	81.4	10.8	7.8
Female	83.5	9.2	7.2
18-29	81.2	10.9	7.8
30-44	81.7	10.3	8.0
45-59	84.4	8.8	6.8
60+	82.4	10.2	7.4

Table 60:   Gender and age breakdown of perceived risk of infection with viruses or bacteria

	Increases risk	No risk	Can't say
Male	58.5	27.5	14.0
Female	60.1	25.7	14.2
18-29	59.3	26.6	14.0
30-44	57.0	28.0	15.0
45-59	60.3	26.6	13.0
60+	61.0	24.5	14.5

Table 61:   Gender and age breakdown of perceived risk of being stressed

	Increases risk	No risk	Can't say
Male	54.4	32.7	12.9
Female	59.8	27.8	12.4
18-29	50.8	34.7	14.5
30-44	56.1	31.3	12.6
45-59	60.6	28.5	10.9
60+	60.1	26.8	13.1

APPENDIX 4: AFRICA

There were 4 countries in Africa: Ghana, Kenya, Ivory Coast and Nigeria. In this region 7541 people were surveyed.

Table 62: Gender and age breakdown of tobacco consumption

	Tobacco User	Do not consume
Male	9.7	90.3
Female	0.6	99.4
18-29	3.8	96.2
30-44	6.7	93.3
45-59	6.5	93.5
60+	9.3	90.7

Table 63: Gender and age breakdown of alcohol consumption

	Frequent	Moderate	Less than once a week
Male	7.2	12.1	80.7
Female	1.0	3.1	95.9
18-29	2.9	7.1	90.0
30-44	5.5	7.8	86.8
45-59	5.5	10.0	84.4
60+	6.0	9.2	84.8

Table 64: Gender and age breakdown of physical activity

	Physical Activity on most days at:		
	Work	Home	A gym, sports place
Male	11.9	10.5	6.1
Female	6.5	13.3	2.8
18-29	6.2	12.9	4.9
30-44	13.8	11.6	4.2
45-59	11.1	8.4	3.1
60+	3.3	9.0	5.3

Table 65: Gender and age breakdown of sunburn in the last 12 months

	Yes	No	Don't Know
Male	11.3	76.9	11.7
Female	13.6	74.9	11.6
18-29	11.9	77.1	11.0
30-44	13.6	74.2	12.2
45-59	12.1	73.8	14.1
60+	7.5	85.0	7.5

Table 66: Gender and age breakdown of beliefs about a cure for cancer

	Cure	No Cure	Undecided
Male	54.4	26.8	18.8
Female	52.7	25.2	22.2
18-29	53.6	26.4	20.0
30-44	53.7	25.8	20.5
45-59	52.1	25.3	22.6
60+	56.6	21.7	21.8

Table 67: Gender and age breakdown of individual cancer diagnosis

	Yes	No	Don't know	Refused
Male	0.9	90.0	6.8	2.3
Female	1.3	89.8	6.3	2.5
18-29	0.9	90.6	6.4	2.1
30-44	1.0	89.5	6.7	2.8
45-59	1.9	87.3	7.7	3.1
60+	4.1	93.0	1.7	1.2

Table 68: Gender and age breakdown of family cancer diagnosis

	Yes	No	Don't know	Refused
Male	2.6	82.5	11.6	3.3
Female	2.6	83.0	10.4	4.0
18-29	2.4	82.9	11.3	3.4
30-44	2.7	82.8	10.7	3.8
45-59	3.3	81.3	10.8	4.6
60+	4.1	85.3	8.0	2.6

Table 69: Gender and age breakdown of medical decision expectations

	The doctor should make the decisions using all that is known about treatment	The doctor should make the decisions but strongly consider your needs and priorities	The doctor and you should make the decisions together on an equal basis	You should make the decisions	Cannot say
Male	71.5	2.9	8.8	9.6	7.2
Female	71.4	2.5	8.8	9.2	8.1
18-29	72.9	1.9	9.0	8.7	7.5
30-44	70.0	2.8	8.2	10.7	8.2
45-59	69.3	4.6	9.5	9.0	7.7
60+	68.0	11.6	6.9	9.9	3.6

Table 70:   Gender and age breakdown of cancer screening behaviour

	Overall	Female screening	Male Screening
18-29	10.0	11.0	9.0
30-39	10.7	11.2	10.1
40-49	10.8	14.4	7.4
50-59	11.6	14.1	9.3
60+	12.1	12.9	11.5

Table 71:   Age breakdown of gender specific cancer screening behaviour

	Pap test	Mammogram	Prostate check
18-29	3.1	5.2	2.6
30-39	4.1	5.0	3.2
40-49	3.6	5.6	3.3
50-59	3.7	4.2	2.4
60+	1.6	4.9	4.9

Table 72:   Gender and age breakdown of cancer screening behaviour

	Bowel or colon cancer check	Skin cancer check	Lung cancer check
Male	2.1	3.3	3.3
Female	2.5	3.8	3.6
18-29	2.2	3.6	3.4
30-39	2.6	3.4	3.7
40-49	2.4	4.1	3.5
50-59	1.9	3.3	3.0
60+	2.4	2.6	3.6

Table 73:   Gender and age breakdown of perceived risk of drinking tap water

	Increases risk	No risk	Can't say
Male	17.8	56.8	25.4
Female	16.3	55.5	28.2
18-29	17.1	57.8	25.2
30-44	18.0	54.2	27.8
45-59	14.6	54.9	30.4
60+	16.0	51.1	32.9

Table 74:   Gender and age breakdown of perceived risk of smoking cigarettes

	Increases risk	No risk	Can't say
Male	71.4	8.5	20.1
Female	72.1	6.4	21.4
18-29	72.1	7.7	20.2
30-44	72.1	7.3	20.5
45-59	68.2	7.2	24.5
60+	74.9	5.3	19.7

Table 75:   Gender and age breakdown of perceived risk of chewing tobacco

	Increases risk	No risk	Can't say
Male	65.4	10.2	24.4
Female	66.3	8.6	25.2
18-29	66.2	9.7	24.1
30-44	66.7	8.7	24.6
45-59	60.6	10.5	28.9
60+	69.1	5.8	25.0

Table 76:   Gender and age breakdown of perceived risk of drinking alcohol

	Increases risk	No risk	Can't say
Male	56.5	17.5	26.0
Female	59.1	13.2	27.6
18-29	58.7	15.3	25.9
30-44	58.0	15.2	26.8
45-59	52.2	16.3	31.5
60+	58.7	15.5	25.9

Table 77:   Gender and age breakdown of perceived risk of not eating vegetables

	Increases risk	No risk	Can't say
Male	18.5	47.6	33.8
Female	16.5	46.8	36.8
18-29	17.3	48.0	34.7
30-44	18.2	46.1	35.6
45-59	16.4	46.9	36.7
60+	18.0	43.8	38.2

Table 78: Gender and age breakdown of perceived risk of not eating fruit

	Increases risk	No risk	Can't say
Male	16.3	48.5	35.1
Female	14.6	47.7	37.7
18-29	14.4	48.9	36.7
30-44	16.8	48.1	35.1
45-59	15.6	45.3	39.1
60+	18.4	43.4	38.2

Table 79: Gender and age breakdown of perceived risk of a lack of cereals and wholegrains

	Increases risk	No risk	Can't say
Male	13.9	45.4	40.7
Female	11.9	45.3	42.8
18-29	12.4	45.7	41.9
30-44	13.5	45.6	40.9
45-59	12.9	43.5	43.6
60+	15.5	39.6	44.9

Table 80: Gender and age breakdown of perceived risk of eating fatty foods

	Increases risk	No risk	Can't say
Male	19.6	41.7	38.6
Female	16.4	41.9	41.7
18-29	16.5	42.7	40.8
30-44	18.9	41.6	39.5
45-59	20.9	39.2	40.0
60+	31.6	34.1	34.3

Table 81: Gender and age breakdown of perceived risk of eating red meat

	Increases risk	No risk	Can't say
Male	17.0	43.6	39.4
Female	13.7	43.1	43.2
18-29	14.6	44.2	41.3
30-44	16.0	42.7	41.3
45-59	15.8	41.9	42.3
60+	23.5	40.7	35.7

Table 82:   Gender and age breakdown of perceived risk of a lack of exercise

	Increases risk	No risk	Can't say
Male	16.3	47.5	36.2
Female	14.0	46.1	39.9
18-29	15.2	48.0	36.8
30-44	15.0	46.0	39.0
45-59	14.4	44.7	40.8
60+	22.9	37.7	39.4

Table 83:   Gender and age breakdown of perceived risk of being overweight

	Increases risk	No risk	Can't say
Male	19.0	41.7	39.3
Female	16.6	40.7	42.7
18-29	17.3	42.1	40.6
30-44	17.9	41.3	40.9
45-59	19.0	37.8	43.2
60+	25.1	33.9	41.1

Table 84:   Gender and age breakdown of perceived risk of using mobile or cell phones

	Increases risk	No risk	Can't say
Male	21.6	43.0	35.4
Female	18.8	41.3	39.9
18-29	20.0	43.5	36.5
30-44	19.7	42.5	37.8
45-59	21.7	36.1	42.3
60+	25.4	31.6	43.0

Table 85: Gender and age breakdown of perceived risk of exposing your skin to the sun

	Increases risk	No risk	Can't say
Male	26.7	35.1	38.2
Female	24.0	35.3	40.7
18-29	25.0	36.1	38.9
30-44	25.3	34.9	39.8
45-59	27.2	31.4	41.4
60+	26.9	35.3	37.8

Table 86: Gender and age breakdown of perceived risk of exposure to air pollution

	Increases risk	No risk	Can't say
Male	35.5	26.0	38.6
Female	31.6	26.4	42.0
18-29	33.7	27.0	39.3
30-44	33.1	25.6	41.3
45-59	34.0	23.9	42.1
60+	34.8	25.4	39.9

Table 87: Gender and age breakdown of perceived risk of infection with viruses or bacteria

	Increases risk	No risk	Can't say
Male	43.5	21.4	35.1
Female	39.5	21.0	39.6
18-29	42.3	21.4	36.4
30-44	41.2	21.1	37.7
45-59	38.0	21.2	40.7
60+	46.1	16.8	37.0

Table 88: Gender and age breakdown of perceived risk of being stressed

	Increases risk	No risk	Can't say
Male	18.4	42.1	39.5
Female	15.7	39.4	44.9
18-29	16.8	41.7	41.5
30-44	17.3	40.6	42.2
45-59	16.6	37.6	45.8
60+	24.4	33.0	42.6

APPENDIX 5: LATIN AMERICA & THE CARIBBEAN

There were 8 countries in Latin America and the Caribbean: Bolivia, Dominican Republic, Guatemala, Mexico, Panama, Peru, Uruguay and Venezuela. In this region 6058 people were surveyed.

Table 89: Gender and age breakdown of tobacco consumption

	Tobacco User	Do not consume
Male	24.0	76.0
Female	13.2	86.8
18-29	20.6	79.4
30-44	19.9	80.1
45-59	16.8	83.2
60+	11.5	88.5

Table 90: Gender and age breakdown of alcohol consumption

	Frequent	Moderate	Less than once a week
Male	3.0	15.4	81.7
Female	1.2	5.5	93.3
18-29	2.2	15.5	82.3
30-44	0.9	7.7	91.4
45-59	3.3	9.8	86.9
60+	2.6	3.6	93.7

Table 91: Gender and age breakdown of physical activity

	Physical Activity on most days at:		
	Work	Home	A gym, sports place
Male	19.7	7.4	13.1
Female	7.4	13.6	12.3
18-29	11.9	8.9	15.7
30-44	16.0	10.6	10.9
45-59	14.6	13.9	9.8
60+	8.3	9.2	14.3

Table 92: Gender and age breakdown of sunburn in the last 12 months

	Yes	No	Don't Know
Male	45.8	53.2	1.0
Female	39.0	59.9	1.0
18-29	52.4	46.7	0.8
30-44	43.8	55.2	1.0
45-59	33.7	64.9	1.4
60+	24.3	74.8	1.0

Table 93:   Gender and age breakdown of beliefs about a cure for cancer

	Cure	No Cure	Undecided
Male	82.6	13.6	3.8
Female	83.7	12.8	3.5
18-29	84.7	12.7	2.6
30-44	79.7	16.7	3.5
45-59	85.9	10.1	4.0
60+	84.1	9.8	6.1

Table 94:   Gender and age breakdown of individual cancer diagnosis

	Yes	No	Don't know	Refused
Male	1.3	97.7	0.7	0.3
Female	3.4	95.6	0.8	0.2
18-29	1.6	97.2	0.9	0.3
30-44	0.9	98.1	0.7	0.3
45-59	3.2	95.8	0.7	0.3
60+	7.4	91.7	0.9	0.0

Table 95:   Gender and age breakdown of family cancer diagnosis

	Yes	No	Don't know	Refused
Male	28.9	68.2	2.6	0.2
Female	34.2	63.3	2.3	0.2
18-29	28.6	68.5	2.7	0.2
30-44	30.9	66.7	2.1	0.3
45-59	35.0	61.8	3.0	0.2
60+	36.7	61.6	1.5	0.2

Table 96:   Gender and age breakdown of medical decision expectations

	The doctor should make the decisions using all that is known about treatment	The doctor should make the decisions but strongly consider your needs and priorities	The doctor and you should make the decisions together on an equal basis	You should make the decisions	Cannot say
Male	21.1	18.1	41.5	18.2	1.1
Female	16.3	15.6	49.1	17.5	1.6
18-29	18.4	16.7	46.3	17.4	1.2
30-44	17.0	20.0	43.8	18.1	1.1
45-59	17.9	13.7	47.7	18.5	2.2
60+	25.2	13.2	43.2	17.3	1.2

Table 97:   Gender and age breakdown of cancer screening behaviour

	Overall	Female screening	Male Screening
18-29	27.1	41.3	13.9
30-39	53.5	81.9	19.1
40-49	61.6	86.1	35.3
50-59	67.3	84.7	50.2
60+	78.9	87.9	68.5

Table 98:   Age breakdown of gender specific cancer screening behaviour

	Pap test	Mammogram	Prostate check
18-29	29.2	17.6	6.8
30-39	70.5	41.1	13.2
40-49	69.2	56.4	27.9
50-59	72.5	60.9	43.6
60+	76.2	60.9	59.7

Table 99:   Gender and age breakdown of cancer screening behaviour

	Bowel or colon cancer check	Skin cancer check	Lung cancer check
Male	8.4	6.6	8.8
Female	6.9	3.5	5.2
18-29	2.7	2.8	3.0
30-39	4.6	2.7	4.3
40-49	7.2	2.6	4.7
50-59	14.0	13.7	15.4
60+	22.1	10.6	18.4

Table 100: Gender and age breakdown of perceived risk of drinking tap water

	Increases risk	No risk	Can't say
Male	46.9	48.9	4.2
Female	45.6	48.9	5.5
18-29	39.2	56.4	4.4
30-44	44.7	49.7	5.6
45-59	53.3	41.3	5.5
60+	58.7	38.3	3.0

Table 101: Gender and age breakdown of perceived risk of smoking cigarettes

	Increases risk	No risk	Can't say
Male	97.6	2.2	0.2
Female	97.9	1.6	0.5
18-29	97.8	2.1	0.1
30-44	98.0	1.8	0.1
45-59	98.9	0.6	0.5
60+	94.8	4.0	1.2

Table 102: Gender and age breakdown of perceived risk of chewing tobacco

	Increases risk	No risk	Can't say
Male	84.7	13.2	2.1
Female	81.2	15.6	3.2
18-29	81.7	15.3	3.0
30-44	83.2	13.8	3.1
45-59	83.3	15.5	1.2
60+	84.8	12.0	3.3

Table 103: Gender and age breakdown of perceived risk of drinking alcohol

	Increases risk	No risk	Can't say
Male	72.5	26.2	1.3
Female	68.9	28.8	2.4
18-29	67.4	31.3	1.2
30-44	68.4	29.6	2.0
45-59	78.4	19.9	1.7
60+	72.6	23.8	3.6

Table 104: Gender and age breakdown of perceived risk of not eating vegetables

	Increases risk	No risk	Can't say
Male	58.2	38.3	3.5
Female	62.7	34.2	3.1
18-29	51.4	45.6	3.1
30-44	63.3	32.9	3.8
45-59	68.8	28.5	2.6
60+	63.9	32.2	3.8

Table 105: Gender and age breakdown of perceived risk of not eating fruit

	Increases risk	No risk	Can't say
Male	58.6	38.5	2.9
Female	61.3	35.7	3.0
18-29	51.8	45.5	2.7
30-44	61.6	34.9	3.5
45-59	68.8	28.8	2.4
60+	63.2	33.6	3.2

Table 106: Gender and age breakdown of perceived risk of a lack of cereals and wholegrains

	Increases risk	No risk	Can't say
Male	54.8	40.7	4.5
Female	51.9	41.6	6.4
18-29	44.8	51.1	4.1
30-44	56.5	38.0	5.6
45-59	61.2	31.7	7.2
60+	55.2	38.7	6.1

Table 107: Gender and age breakdown of perceived risk of eating fatty foods

	Increases risk	No risk	Can't say
Male	71.1	25.8	3.1
Female	71.8	23.4	4.8
18-29	66.8	29.8	3.4
30-44	71.7	23.8	4.5
45-59	79.5	16.2	4.3
60+	69.9	26.7	3.5

Table 108: Gender and age breakdown of perceived risk of eating red meat

	Increases risk	No risk	Can't say
Male	61.1	35.0	4.0
Female	60.2	35.3	4.5
18-29	54.7	41.2	4.1
30-44	62.0	35.1	2.8
45-59	63.9	31.2	5.0
60+	67.8	24.6	7.5

Table 109: Gender and age breakdown of perceived risk of a lack of exercise

	Increases risk	No risk	Can't say
Male	65.9	30.8	3.3
Female	62.5	32.8	4.7
18-29	61.9	34.7	3.4
30-44	66.6	30.5	2.9
45-59	62.9	31.6	5.5
60+	65.9	27.6	6.5

Table 110: Gender and age breakdown of perceived risk of being overweight

	Increases risk	No risk	Can't say
Male	72.0	25.6	2.4
Female	68.4	26.9	4.7
18-29	66.5	30.5	3.0
30-44	70.4	25.9	3.6
45-59	72.1	23.5	4.4
60+	76.3	19.8	3.9

Table 111: Gender and age breakdown of perceived risk of using mobile or cell phones

	Increases risk	No risk	Can't say
Male	40.9	49.5	9.7
Female	42.7	44.5	12.8
18-29	35.1	58.5	6.4
30-44	47.2	42.7	10.1
45-59	46.8	36.0	17.3
60+	37.1	45.1	17.8

Table 112: Gender and age breakdown of perceived risk of exposing your skin to the sun

	Increases risk	No risk	Can't say
Male	92.0	6.7	1.3
Female	94.1	3.8	2.1
18-29	92.9	5.8	1.3
30-44	93.9	4.7	1.4
45-59	93.7	4.0	2.3
60+	90.4	6.9	2.7

Table 113: Gender and age breakdown of perceived risk of exposure to air pollution

	Increases risk	No risk	Can't say
Male	79.9	18.1	2.0
Female	74.0	22.0	4.0
18-29	69.1	28.0	2.9
30-44	79.4	18.0	2.5
45-59	80.8	15.1	4.1
60+	85.1	11.9	3.0

Table 114: Gender and age breakdown of perceived risk of infection with viruses or bacteria

	Increases risk	No risk	Can't say
Male	72.0	25.2	2.7
Female	70.6	25.3	4.1
18-29	69.0	27.6	3.4
30-44	72.6	24.2	3.1
45-59	75.2	20.9	3.9
60+	67.0	29.5	3.5

Table 115: Gender and age breakdown of perceived risk of being stressed

	Increases risk	No risk	Can't say
Male	49.1	45.6	5.3
Female	54.3	37.7	8.0
18-29	44.8	48.8	6.3
30-44	52.6	42.3	5.1
45-59	58.0	33.9	8.2
60+	58.3	31.9	9.9

APPENDIX 6: NORTHERN AMERICA

There were 2 countries in Northern America: USA and Canada. In this region 1925 people were surveyed.

Table 116: Gender and age breakdown of tobacco consumption

	Tobacco User	Do not consume
Male	30.4	69.6
Female	19.9	80.1
18-29	36.3	63.7
30-44	25.0	75.0
45-59	26.6	73.4
60+	14.4	85.6

Table 117: Gender and age breakdown of alcohol consumption

	Frequent	Moderate	Less than once a week
Male	13.7	29.0	57.3
Female	5.8	17.0	77.2
18-29	2.1	23.7	74.2
30-44	8.9	26.4	64.6
45-59	13.2	26.7	60.2
60+	13.1	14.4	72.5

Table 118: Gender and age breakdown of physical activity

	Physical Activity on most days at:		
	Work	Home	A gym, sports place
Male	23.1	22.6	7.5
Female	13.5	25.9	6.5
18-29	26.1	27.5	8.2
30-44	20.3	22.8	6.6
45-59	22.5	22.5	9.2
60+	5.2	25.1	4.1

Table 119: Gender and age breakdown of sunburn in the last 12 months

	Yes	No	Don't Know
Male	40.5	59.0	0.4
Female	33.9	64.1	2.0
18-29	45.0	53.9	1.1
30-44	47.8	50.8	1.4
45-59	37.5	61.7	0.8
60+	18.3	80.1	1.5

Table 120: Gender and age breakdown of beliefs about a cure for cancer

	Cure	No Cure	Undecided
Male	83.4	12.0	4.6
Female	87.3	8.6	4.2
18-29	80.7	16.9	2.4
30-44	88.3	7.4	4.3
45-59	87.2	9.8	3.0
60+	84.1	8.5	7.4

Table 121: Gender and age breakdown of individual cancer diagnosis

	Yes	No	Don't know	Refused
Male	9.5	89.5	0.8	0.2
Female	13.7	84.7	0.3	1.2
18-29	4.3	93.5	1.1	1.1
30-44	6.0	93.1	0.6	0.3
45-59	10.7	89.3	0.0	0.0
60+	25.0	73.0	0.5	1.5

Table 122: Gender and age breakdown of family cancer diagnosis

	Yes	No	Don't know	Refused
Male	50.7	48.6	0.5	0.2
Female	53.5	45.3	0.0	1.2
18-29	42.8	56.1	0.0	1.1
30-44	48.5	50.7	0.5	0.3
45-59	57.8	41.7	0.4	0.0
60+	58.1	40.3	0.1	1.5

Table 123: Gender and age breakdown of medical decision expectations

	The doctor should make the decisions using all that is known about treatment	The doctor should make the decisions but strongly consider your needs and priorities	The doctor and you should make the decisions together on an equal basis	You should make the decisions	Cannot say
Male	7.5	12.8	40.6	37.4	1.7
Female	2.5	12.0	49.9	34.5	1.1
18-29	7.0	11.2	52.5	28.8	0.5
30-44	6.3	14.3	43.0	34.9	1.5
45-59	1.6	11.0	46.4	38.9	2.2
60+	5.1	12.7	41.3	39.9	1.1

Table 124: Gender and age breakdown of cancer screening behaviour

	Overall	Female screening	Male Screening
18-29	32.4	35.4	29.6
30-39	54.6	67.3	43.6
40-49	62.3	74.5	48.2
50-59	72.4	78.9	64.6
60+	73.9	76.6	70.7

Table 125: Age breakdown of gender specific cancer screening behaviour

	Pap test	Mammogram	Prostate check
18-29	29.5	13.5	7.3
30-39	60.7	29.7	14.0
40-49	63.0	58.5	24.3
50-59	65.7	71.6	53.1
60+	64.0	67.5	55.5

Table 126: Gender and age breakdown of cancer screening behaviour

	Bowel or colon cancer check	Skin cancer check	Lung cancer check
Male	26.3	25.2	14.2
Female	24.2	23.6	12.1
18-29	4.3	11.7	3.4
30-39	14.6	22.4	10.5
40-49	19.5	19.6	5.1
50-59	42.0	32.1	17.6
60+	44.8	35.1	26.2

Table 127: Gender and age breakdown of perceived risk of drinking tap water

	Increases risk	No risk	Can't say
Male	13.3	82.5	4.2
Female	17.0	76.5	6.5
18-29	11.6	83.0	5.3
30-44	18.9	76.7	4.5
45-59	14.5	81.7	3.9
60+	14.6	77.4	8.0

Table 128: Gender and age breakdown of perceived risk of smoking cigarettes

	Increases risk	No risk	Can't say
Male	94.1	4.2	1.7
Female	94.3	3.7	2.0
18-29	93.9	4.4	1.6
30-44	96.1	2.4	1.5
45-59	93.4	4.9	1.7
60+	93.2	4.3	2.5

Table 129: Gender and age breakdown of perceived risk of chewing tobacco

	Increases risk	No risk	Can't say
Male	91.8	5.0	3.2
Female	93.2	3.0	3.8
18-29	93.8	4.4	1.8
30-44	94.5	3.3	2.2
45-59	91.5	4.6	3.9
60+	90.2	3.7	6.1

Table 130: Gender and age breakdown of perceived risk of drinking alcohol

	Increases risk	No risk	Can't say
Male	42.6	53.2	4.2
Female	51.7	39.9	8.4
18-29	56.3	39.2	4.5
30-44	44.5	50.3	5.3
45-59	43.8	50.6	5.6
60+	46.5	43.7	9.9

Table 131: Gender and age breakdown of perceived risk of not eating vegetables

	Increases risk	No risk	Can't say
Male	56.8	37.7	5.5
Female	62.6	28.4	9.0
18-29	41.3	52.7	6.0
30-44	62.5	33.7	3.7
45-59	64.5	28.9	6.6
60+	67.0	20.0	13.1

Table 132: Gender and age breakdown of perceived risk of not eating fruit

	Increases risk	No risk	Can't say
Male	59.2	35.7	5.2
Female	61.2	31.0	7.8
18-29	46.2	47.8	6.0
30-44	60.1	35.7	4.2
45-59	65.0	28.6	6.4
60+	67.0	23.4	9.6

Table 133: Gender and age breakdown of perceived risk of a lack of cereals and wholegrains

	Increases risk	No risk	Can't say
Male	55.8	39.0	5.2
Female	57.6	35.4	7.1
18-29	41.3	51.6	7.1
30-44	58.2	38.0	3.8
45-59	62.5	31.7	5.8
60+	61.9	29.6	8.5

Table 134: Gender and age breakdown of perceived risk of eating fatty foods

	Increases risk	No risk	Can't say
Male	64.8	30.5	4.7
Female	71.2	24.2	4.7
18-29	61.4	35.2	3.4
30-44	68.9	28.1	3.0
45-59	71.5	24.6	3.9
60+	69.3	22.4	8.3

Table 135: Gender and age breakdown of perceived risk of eating red meat

	Increases risk	No risk	Can't say
Male	37.1	57.0	6.0
Female	44.5	45.6	9.9
18-29	32.2	60.7	7.1
30-44	38.7	56.6	4.7
45-59	44.7	46.2	9.1
60+	46.8	41.9	11.2

Table 136: Gender and age breakdown of perceived risk of a lack of exercise

	Increases risk	No risk	Can't say
Male	61.0	35.6	3.4
Female	60.0	35.7	4.3
18-29	56.0	40.6	3.4
30-44	63.3	34.9	1.8
45-59	63.1	32.5	4.4
60+	58.3	35.6	6.2

Table 137: Gender and age breakdown of perceived risk of being overweight

	Increases risk	No risk	Can't say
Male	64.0	31.5	4.5
Female	67.4	28.8	3.8
18-29	61.1	36.9	2.0
30-44	66.2	31.3	2.5
45-59	66.3	28.9	4.8
60+	68.5	24.6	7.0

Table 138: Gender and age breakdown of perceived risk of using mobile or cell phones

	Increases risk	No risk	Can't say
Male	23.3	63.4	13.3
Female	26.3	58.4	15.3
18-29	27.8	63.7	8.5
30-44	23.8	65.2	11.0
45-59	26.0	58.2	15.8
60+	22.2	56.3	21.4

Table 139: Gender and age breakdown of perceived risk of exposing your skin to the sun

	Increases risk	No risk	Can't say
Male	87.3	10.4	2.2
Female	92.6	5.1	2.3
18-29	89.3	7.7	2.9
30-44	92.0	6.9	1.2
45-59	91.1	7.7	1.2
60+	87.4	8.6	4.0

Table 140: Gender and age breakdown of perceived risk of exposure to air pollution

	Increases risk	No risk	Can't say
Male	81.8	15.2	3.0
Female	79.0	14.8	6.3
18-29	76.7	20.9	2.4
30-44	82.3	14.7	3.0
45-59	83.7	11.9	4.4
60+	77.7	13.6	8.7

Table 141: Gender and age breakdown of perceived risk of infection with viruses or bacteria

	Increases risk	No risk	Can't say
Male	61.6	30.1	8.3
Female	62.4	28.8	8.8
18-29	65.0	30.6	4.4
30-44	62.4	31.2	6.4
45-59	56.3	33.5	10.2
60+	64.7	22.5	12.8

Table 142: Gender and age breakdown of perceived risk of being stressed

	Increases risk	No risk	Can't say
Male	58.4	36.4	5.2
Female	62.1	32.2	5.7
18-29	52.4	41.2	6.4
30-44	62.6	36.0	1.4
45-59	63.0	30.9	6.1
60+	61.6	29.8	8.5

APPENDIX 7 : AUSTRALIA & NEW ZEALAND

In this region 2130 people were surveyed.

Table 143: Gender and age breakdown of tobacco consumption

	Tobacco User	Do not consume
Male	21.3	78.7
Female	18.6	81.4
18-29	24.3	75.7
30-44	24.6	75.4
45-59	21.1	78.9
60+	9.3	90.7

Table 144: Gender and age breakdown of alcohol consumption

	Frequent	Moderate	Less than once a week
Male	24.3	40.7	35.0
Female	12.0	31.6	56.4
18-29	8.8	40.8	50.5
30-44	14.4	40.0	45.6
45-59	22.1	35.1	42.8
60+	25.6	28.6	45.9

Table 145: Gender and age breakdown of physical activity

	Physical Activity on most days at:		
	Work	Home	A gym, sports place
Male	29.4	22.2	6.8
Female	10.7	25.4	6.7
18-29	23.8	19.1	9.6
30-44	25.2	26.0	7.5
45-59	22.6	19.8	6.6
60+	7.3	29.6	3.8

Table 146: Gender and age breakdown of sunburn in the last 12 months

	Yes	No	Don't Know
Male	46.5	53.1	0.4
Female	38.6	61.2	0.2
18-29	57.8	41.8	0.4
30-44	53.1	46.1	0.8
45-59	38.8	61.1	0.1
60+	20.8	79.2	0.0

Table 147: Gender and age breakdown of beliefs about a cure for cancer

	Cure	No Cure	Undecided
Male	82.7	11.4	5.9
Female	85.2	8.0	6.8
18-29	81.2	12.4	6.3
30-44	86.3	8.5	5.1
45-59	85.0	8.3	6.6
60+	82.0	10.2	7.7

Table 148: Gender and age breakdown of individual cancer diagnosis

	Yes	No	Don't know	Refused
Male	13.7	85.8	0.3	0.2
Female	13.7	85.8	0.4	0.2
18-29	3.5	95.6	0.5	0.4
30-44	5.5	93.8	0.5	0.3
45-59	15.2	84.3	0.4	0.1
60+	30.6	69.4	0.0	0.0

Table 149: Gender and age breakdown of family cancer diagnosis

	Yes	No	Don't know	Refused
Male	50.8	48.4	0.5	0.2
Female	56.8	42.4	0.6	0.2
18-29	38.3	59.9	1.0	0.7
30-44	54.4	44.8	0.6	0.2
45-59	61.1	38.6	0.3	0.0
60+	57.9	41.7	0.5	0.0

Table 150: Gender and age breakdown of medical decision expectations

	The doctor should make the decisions using all that is known about treatment	The doctor should make the decisions but strongly consider your needs and priorities	The doctor and you should make the decisions together on an equal basis	You should make the decisions	Cannot say
Male	9.3	16.0	39.3	33.9	1.5
Female	7.0	11.2	47.3	33.7	0.8
18-29	9.8	16.5	39.6	33.4	0.7
30-44	6.1	13.7	41.2	38.3	0.8
45-59	5.3	12.6	46.5	34.3	1.1
60+	12.5	11.9	45.7	28.0	2.0

Table 151: Gender and age breakdown of cancer screening behaviour

	Overall	Female screening	Male Screening
18-29	31.1	44.1	18.7
30-39	51.5	59.7	42.8
40-49	63.6	69.3	58.1
50-59	77.6	86.8	66.4
60+	78.2	82.3	74.0

Table 152: Age breakdown of gender specific cancer screening behaviour

	Pap test	Mammogram	Prostate check
18-29	36.8	6.1	2.0
30-39	45.9	17.9	4.5
40-49	54.4	43.9	23.4
50-59	64.4	75.0	42.6
60+	50.7	69.9	58.3

Table 153: Gender and age breakdown of cancer screening behaviour

	Bowel or colon cancer check	Skin cancer check	Lung cancer check
Male	17.6	33.9	7.9
Female	15.9	32.6	6.3
18-29	1.5	12.3	1.0
30-39	6.2	30.5	2.4
40-49	12.5	35.7	4.5
50-59	27.9	41.3	13.3
60+	33.5	45.0	13.9

Table 154: Gender and age breakdown of perceived risk of drinking tap water

	Increases risk	No risk	Can't say
Male	5.8	89.3	4.9
Female	6.4	89.6	4.0
18-29	7.6	88.9	3.5
30-44	8.6	87.8	3.6
45-59	5.5	90.7	3.8
60+	2.4	90.6	6.9

Table 155: Gender and age breakdown of perceived risk of smoking cigarettes

	Increases risk	No risk	Can't say
Male	96.1	2.5	1.4
Female	96.1	3.5	0.4
18-29	97.5	2.1	0.3
30-44	95.8	3.2	0.9
45-59	96.2	3.3	0.5
60+	95.3	3.1	1.6

Table 156: Gender and age breakdown of perceived risk of chewing tobacco

	Increases risk	No risk	Can't say
Male	82.6	8.6	8.9
Female	84.6	8.4	7.1
18-29	82.8	12.7	4.5
30-44	86.5	7.4	6.0
45-59	85.7	6.9	7.4
60+	78.2	8.1	13.7

Table 157: Gender and age breakdown of perceived risk of drinking alcohol

	Increases risk	No risk	Can't say
Male	47.8	45.3	6.9
Female	55.5	35.1	9.3
18-29	59.7	35.4	4.9
30-44	53.5	41.5	4.9
45-59	52.5	39.0	8.5
60+	42.3	43.4	14.3

Table 158: Gender and age breakdown of perceived risk of not eating vegetables

	Increases risk	No risk	Can't say
Male	65.5	29.6	4.9
Female	67.6	28.2	4.2
18-29	53.6	42.4	4.1
30-44	70.9	25.8	3.4
45-59	71.7	24.4	3.9
60+	66.2	26.8	7.1

Table 159: Gender and age breakdown of perceived risk of not eating fruit

	Increases risk	No risk	Can't say
Male	64.8	30.2	5.1
Female	66.1	30.0	3.9
18-29	51.9	43.6	4.5
30-44	68.8	28.2	3.0
45-59	70.0	26.4	3.7
60+	67.3	25.5	7.2

Table 160: Gender and age breakdown of perceived risk of a lack of cereals and wholegrains

	Increases risk	No risk	Can't say
Male	61.6	32.7	5.6
Female	65.0	29.9	5.0
18-29	41.4	52.9	5.6
30-44	68.2	28.0	3.8
45-59	71.8	23.4	4.8
60+	66.0	26.5	7.5

Table 161: Gender and age breakdown of perceived risk of eating fatty foods

	Increases risk	No risk	Can't say
Male	68.4	26.2	5.4
Female	73.6	21.4	4.9
18-29	66.1	29.7	4.1
30-44	73.5	22.7	3.8
45-59	79.1	18.6	2.3
60+	63.1	26.0	10.8

Table 162: Gender and age breakdown of perceived risk of eating red meat

	Increases risk	No risk	Can't say
Male	22.4	71.4	6.2
Female	21.5	69.6	8.9
18-29	21.9	74.3	3.8
30-44	21.4	72.6	6.1
45-59	22.9	67.5	9.5
60+	21.7	68.0	10.3

Table 163: Gender and age breakdown of perceived risk of a lack of exercise

	Increases risk	No risk	Can't say
Male	61.0	35.0	4.0
Female	60.4	36.4	3.1
18-29	60.3	36.2	3.6
30-44	60.2	37.7	2.1
45-59	64.5	33.9	1.6
60+	57.5	34.9	7.7

Table 164: Gender and age breakdown of perceived risk of being overweight

	Increases risk	No risk	Can't say
Male	70.8	25.8	3.4
Female	66.7	28.1	5.3
18-29	69.8	26.9	3.3
30-44	68.0	29.7	2.4
45-59	70.5	25.9	3.6
60+	66.8	24.8	8.4

Table 165: Gender and age breakdown of perceived risk of using mobile or cell phones

	Increases risk	No risk	Can't say
Male	30.4	53.9	15.7
Female	32.3	50.9	16.8
18-29	39.6	54.8	5.6
30-44	35.1	51.8	13.1
45-59	29.4	53.0	17.7
60+	22.1	50.5	27.3

Table 166: Gender and age breakdown of perceived risk of exposing your skin to the sun

	Increases risk	No risk	Can't say
Male	94.0	4.3	1.7
Female	96.9	2.2	1.0
18-29	96.1	2.9	1.0
30-44	97.9	1.1	0.9
45-59	95.6	3.7	0.7
60+	91.7	5.5	2.8

Table 167: Gender and age breakdown of perceived risk of exposure to air pollution

	Increases risk	No risk	Can't say
Male	72.9	21.0	6.0
Female	71.2	21.5	7.3
18-29	74.4	21.8	3.8
30-44	73.2	20.7	6.0
45-59	72.7	19.9	7.4
60+	68.0	22.9	9.1

Table 168: Gender and age breakdown of perceived risk of infection with viruses or bacteria

	Increases risk	No risk	Can't say
Male	56.1	34.8	9.0
Female	48.5	39.0	12.5
18-29	58.3	35.7	6.0
30-44	48.6	42.6	8.8
45-59	53.7	34.8	11.5
60+	50.1	33.4	16.5

Table 169: Gender and age breakdown of perceived risk of being stressed

	Increases risk	No risk	Can't say
Male	59.4	35.3	5.3
Female	66.7	29.1	4.1
18-29	52.5	44.3	3.1
30-44	64.1	31.5	4.4
45-59	70.0	26.1	3.9
60+	63.0	29.7	7.4

APPENDIX 8: SOUTHERN & EASTERN ASIA

There were 5 countries in the Southern and Eastern Asia region: China, India, Indonesia, Pakistan and the Philippines. In this region 5160 people were surveyed. Pakistan was excluded from any analysis involving age (e.g., age breakdown of tobacco consumption).

Table 170: Gender and age breakdown of tobacco consumption

	Tobacco User	Do not consume
Male	55.5	44.5
Female	3.6	96.4
18-29	24.6	75.4
30-44	37.2	62.8
45-59	36.8	63.2
60+	31.1	68.9

Table 171: Gender and age breakdown of alcohol consumption

	Frequent	Moderate	Less than once a week
Male	6.2	14.0	79.8
Female	0.7	2.0	97.4
18-29	2.6	8.9	88.6
30-44	4.1	12.8	83.0
45-59	5.0	4.0	90.9
60+	13.3	6.8	79.9

Table 172: Gender and age breakdown of physical activity

	Physical Activity on most days at:		
	Work	Home	A gym, sports place
Male	25.9	13.9	3.8
Female	9.4	19.8	0.6
18-29	15.1	19.1	1.8
30-44	22.8	18.5	1.3
45-59	17.9	18.2	1.8
60+	7.5	7.3	0.9

Table 173: Gender and age breakdown of sunburn in the last 12 months

	Yes	No	Don't Know
Male	25.8	68.4	5.8
Female	22.7	69.8	7.5
18-29	29.6	65.0	5.4
30-44	21.7	74.2	4.1
45-59	21.8	69.8	8.4
60+	6.4	89.7	3.9

Table 174: Gender and age breakdown of beliefs about a cure for cancer

	Cure	No Cure	Undecided
Male	55.3	36.6	8.1
Female	55.9	35.0	9.1
18-29	55.4	39.0	5.6
30-44	61.8	33.7	4.5
45-59	59.0	33.5	7.5
60+	60.1	38.2	1.6

Table 175: Gender and age breakdown of individual cancer diagnosis

	Yes	No	Don't know	Refused
Male	0.3	96.1	1.9	1.7
Female	1.4	93.6	3.5	1.5
18-29	0.2	96.5	2.4	1.0
30-44	0.1	97.8	1.5	0.6
45-59	4.2	93.5	1.3	1.0
60+	0.3	97.5	1.3	0.9

Table 176: Gender and age breakdown of family cancer diagnosis

	Yes	No	Don't know	Refused
Male	23.4	69.6	3.1	3.9
Female	19.6	74.4	2.8	3.2
18-29	19.8	75.1	4.2	0.9
30-44	27.2	69.1	3.1	0.7
45-59	15.9	79.9	3.4	0.8
60+	32.8	63.9	2.5	0.9

Table 177: Gender and age breakdown of medical decision expectations

	The doctor should make the decisions using all that is known about treatment	The doctor should make the decisions but strongly consider your needs and priorities	The doctor and you should make the decisions together on an equal basis	You should make the decisions	Cannot say
Male	28.8	31.9	21.3	16.0	1.9
Female	23.5	32.4	26.3	14.9	3.0
18-29	22.6	36.1	22.6	18.1	0.5
30-44	25.1	34.2	27.4	12.7	0.6
45-59	23.5	28.4	26.8	20.8	0.5
60+	23.7	19.2	29.5	26.9	0.6

Table 178: Gender and age breakdown of cancer screening behaviour

	Overall	Female screening	Male Screening
18-29	6.7	6.4	7.1
30-39	9.9	13.3	7.2
40-49	17.6	19.3	15.6
50-59	16.5	21.6	11.2
60+	11.1	9.8	12.5

Table 179: Age breakdown of gender specific cancer screening behaviour

	Pap test	Mammogram	Prostate check
18-29	1.1	0.8	1.3
30-39	10.4	0.8	0.8
40-49	6.2	0.9	1.0
50-59	18.3	13.9	6.5
60+	1.8	0.0	1.2

Table 180: Gender and age breakdown of cancer screening behaviour

	Bowel or colon cancer check	Skin cancer check	Lung cancer check
Male	0.5	0.3	1.0
Female	0.2	0.2	0.5
18-29	0.2	0.1	0.7
30-39	0.2	0.3	0.5
40-49	0.4	0.4	1.0
50-59	0.7	0.5	2.1
60+	4.2	1.2	2.2

Table 181: Gender and age breakdown of perceived risk of drinking tap water

	Increases risk	No risk	Can't say
Male	14.0	73.6	12.4
Female	19.8	70.2	10.0
18-29	13.0	75.7	11.4
30-44	14.3	76.4	9.4
45-59	14.3	73.2	12.4
60+	7.3	84.5	8.2

Table 182: Gender and age breakdown of perceived risk of smoking cigarettes

	Increases risk	No risk	Can't say
Male	85.8	11.5	2.7
Female	89.0	9.9	1.1
18-29	88.4	11.2	0.5
30-44	88.4	9.5	2.1
45-59	84.9	14.1	1.0
60+	98.2	1.8	0.0

Table 183: Gender and age breakdown of perceived risk of chewing tobacco

	Increases risk	No risk	Can't say
Male	57.6	35.6	6.9
Female	63.6	31.0	5.4
18-29	55.3	39.3	5.4
30-44	49.7	42.2	8.1
45-59	68.9	26.4	4.8
60+	78.6	20.3	1.1

Table 184: Gender and age breakdown of perceived risk of drinking alcohol

	Increases risk	No risk	Can't say
Male	70.3	26.9	2.7
Female	75.3	23.1	1.7
18-29	65.0	33.8	1.3
30-44	73.4	25.4	1.2
45-59	77.8	20.0	2.2
60+	78.3	21.7	0.0

Table 185: Gender and age breakdown of perceived risk of not eating vegetables

	Increases risk	No risk	Can't say
Male	32.6	58.8	8.6
Female	36.7	54.1	9.2
18-29	32.4	59.6	8.0
30-44	34.6	58.7	6.7
45-59	44.5	48.4	7.0
60+	19.8	74.3	5.9

Table 186: Gender and age breakdown of perceived risk of not eating fruit

	Increases risk	No risk	Can't say
Male	23.5	67.3	9.2
Female	29.1	60.6	10.3
18-29	28.3	63.4	8.4
30-44	21.0	72.6	6.4
45-59	44.5	47.6	7.9
60+	26.0	68.9	5.0

Table 187: Gender and age breakdown of perceived risk of a lack of cereals and wholegrains

	Increases risk	No risk	Can't say
Male	18.0	70.0	12.0
Female	24.6	62.4	13.0
18-29	19.8	68.6	11.6
30-44	20.9	69.4	9.7
45-59	36.6	52.3	11.1
60+	22.1	69.2	8.7

Table 188: Gender and age breakdown of perceived risk of eating fatty foods

	Increases risk	No risk	Can't say
Male	49.9	40.6	9.5
Female	55.4	34.7	9.8
18-29	53.8	39.4	6.8
30-44	61.0	31.5	7.6
45-59	64.5	28.5	7.1
60+	44.9	50.1	5.0

Table 189: Gender and age breakdown of perceived risk of eating red meat

	Increases risk	No risk	Can't say
Male	30.5	59.5	10.0
Female	31.9	57.9	10.2
18-29	30.3	60.3	9.4
30-44	32.7	61.3	6.0
45-59	39.9	52.6	7.6
60+	31.7	62.3	6.0

Table 190: Gender and age breakdown of perceived risk of a lack of exercise

	Increases risk	No risk	Can't say
Male	36.1	53.7	10.2
Female	35.7	54.8	9.5
18-29	39.3	52.0	8.7
30-44	41.2	51.1	7.7
45-59	33.5	56.7	9.8
60+	15.9	78.3	5.8

Table 191: Gender and age breakdown of perceived risk of being overweight

	Increases risk	No risk	Can't say
Male	40.8	49.2	10.0
Female	42.2	48.0	9.9
18-29	40.7	51.5	7.7
30-44	46.6	47.6	5.8
45-59	51.3	38.8	9.9
60+	32.2	62.1	5.7

Table 192: Gender and age breakdown of perceived risk of using mobile or cell phones

	Increases risk	No risk	Can't say
Male	30.8	57.8	11.5
Female	35.0	52.1	12.9
18-29	36.5	53.6	9.9
30-44	27.7	63.1	9.3
45-59	34.9	53.7	11.5
60+	36.3	55.6	8.0

Table 193: Gender and age breakdown of perceived risk of exposing your skin to the sun

	Increases risk	No risk	Can't say
Male	44.3	46.4	9.3
Female	54.5	35.8	9.6
18-29	50.1	44.1	5.8
30-44	56.5	36.2	7.3
45-59	59.7	34.0	6.3
60+	53.5	43.8	2.7

Table 194: Gender and age breakdown of perceived risk of exposure to air pollution

	Increases risk	No risk	Can't say
Male	71.5	19.4	9.1
Female	68.7	22.7	8.6
18-29	71.4	22.9	5.7
30-44	76.5	16.6	6.9
45-59	75.5	15.7	8.8
60+	83.8	10.3	5.9

Table 195: Gender and age breakdown of perceived risk of infection with viruses or bacteria

	Increases risk	No risk	Can't say
Male	69.8	23.6	6.5
Female	69.0	25.2	5.8
18-29	68.3	27.2	4.5
30-44	69.8	26.2	4.0
45-59	75.9	17.5	6.6
60+	69.5	26.1	4.5

Table 196: Gender and age breakdown of perceived risk of being stressed

	Increases risk	No risk	Can't say
Male	54.0	32.2	13.8
Female	54.1	35.1	10.8
18-29	49.8	37.4	12.8
30-44	61.6	29.3	9.1
45-59	65.7	22.7	11.6
60+	58.7	32.6	8.7

APPENDIX 9: WESTERN ASIA

There were four countries in the Western Asia region: Georgia, Israel, Lebanon and Turkey. From this region, 4511 people were surveyed.

Table 197: Gender and age breakdown of tobacco consumption

	Tobacco User	Do not consume
Male	51.3	48.7
Female	18.4	81.6
18-29	37.8	62.2
30-44	40.2	59.8
45-59	32.9	67.1
60+	15.2	84.8

Table 198: Gender and age breakdown of alcohol consumption

	Frequent	Moderate	Less than once a week
Male	3.5	10.1	86.4
Female	0.5	3.2	96.3
18-29	1.5	7.2	91.3
30-44	1.6	7.5	90.9
45-59	3.4	5.1	91.5
60+	2.0	5.3	92.6

Table 199: Gender and age breakdown of physical activity

	Physical Activity on most days at:		
	Work	Home	A gym, sports place
Male	17.6	9.8	3.3
Female	3.3	12.0	2.4
18-29	9.2	8.7	2.8
30-44	13.7	10.1	2.4
45-59	11.4	14.1	2.2
60+	3.6	13.3	5.2

Table 200: Gender and age breakdown of sunburn in the last 12 months

	Yes	No	Don't Know
Male	40.9	56.8	2.4
Female	31.6	65.2	3.2
18-29	45.2	52.7	2.1
30-44	37.5	59.4	3.1
45-59	30.5	66.7	2.8
60+	17.8	78.4	3.8

Table 201: Gender and age breakdown of beliefs about a cure for cancer

	Cure	No Cure	Undecided
Male	56.7	24.9	18.4
Female	52.5	25.2	22.3
18-29	59.6	24.1	16.3
30-44	52.3	25.7	22.0
45-59	53.1	25.0	21.9
60+	48.9	26.4	24.7

Table 202: Gender and age breakdown of individual cancer diagnosis

	Yes	No	Don't know	Refused
Male	0.8	96.4	1.4	1.3
Female	2.1	94.6	2.2	1.1
18-29	0.4	96.8	1.5	1.3
30-44	1.4	95.2	2.1	1.3
45-59	2.3	94.7	2.2	0.8
60+	3.1	94.4	1.5	1.0

Table 203: Gender and age breakdown of family cancer diagnosis

	Yes	No	Don't know	Refused
Male	15.5	80.4	2.8	1.2
Female	23.3	72.6	2.9	1.1
18-29	16.2	79.5	3.2	1.2
30-44	19.5	75.5	3.4	1.5
45-59	20.3	77.0	1.8	0.9
60+	26.8	69.8	2.5	0.9

Table 204: Gender and age breakdown of medical decision expectations

	The doctor should make the decisions using all that is known about treatment	The doctor should make the decisions but strongly consider your needs and priorities	The doctor and you should make the decisions together on an equal basis	You should make the decisions	Cannot say
Male	38.2	25.1	21.4	6.9	8.5
Female	37.1	23.1	23.6	7.6	8.5
18-29	36.9	27.7	20.9	8.0	6.5
30-44	37.0	24.0	22.2	7.4	9.5
45-59	39.7	21.8	22.9	6.9	8.6
60+	38.0	18.5	26.8	5.5	11.1

Table 205: Gender and age breakdown of cancer screening behaviour

	Overall	Female screening	Male Screening
18-29	6.6	8.8	4.4
30-39	10.1	13.1	6.8
40-49	11.8	18.6	6.0
50-59	20.0	25.3	14.0
60+	23.8	22.9	24.8

Table 206: Age breakdown of gender specific cancer screening behaviour

	Pap test	Mammogram	Prostate check
18-29	3.1	2.0	0.5
30-39	6.6	4.1	0.5
40-49	9.3	11.3	1.7
50-59	11.6	15.6	5.2
60+	8.5	13.4	13.1

Table 207: Gender and age breakdown of cancer screening behaviour

	Bowel or colon cancer check	Skin cancer check	Lung cancer check
Male	2.3	1.3	1.5
Female	2.6	2.2	1.7
18-29	0.5	0.9	0.8
30-39	1.2	1.9	1.2
40-49	1.3	1.7	1.2
50-59	5.5	2.5	3.3
60+	8.4	2.9	3.2

Table 208: Gender and age breakdown of perceived risk of drinking tap water

	Increases risk	No risk	Can't say
Male	21.9	56.2	21.9
Female	23.9	48.8	27.4
18-29	25.3	51.6	23.0
30-44	23.4	51.3	25.3
45-59	22.2	55.7	22.1
60+	15.8	52.1	32.1

Table 209: Gender and age breakdown of perceived risk of smoking cigarettes

	Increases risk	No risk	Can't say
Male	91.9	2.2	5.9
Female	91.4	2.0	6.6
18-29	93.4	1.6	5.1
30-44	92.2	1.9	5.8
45-59	91.4	2.8	5.8
60+	85.7	2.8	11.5

Table 210: Gender and age breakdown of perceived risk of chewing tobacco

	Increases risk	No risk	Can't say
Male	72.6	12.5	14.9
Female	69.2	11.6	19.1
18-29	73.9	11.3	14.7
30-44	72.8	12.0	15.1
45-59	70.7	12.3	17.0
60+	57.7	13.9	28.4

Table 211: Gender and age breakdown of perceived risk of drinking alcohol

	Increases risk	No risk	Can't say
Male	82.4	10.1	7.5
Female	82.8	8.1	9.1
18-29	85.1	7.9	6.9
30-44	84.3	8.4	7.3
45-59	79.9	11.7	8.4
60+	76.0	9.1	14.9

Table 212: Gender and age breakdown of perceived risk of not eating vegetables

	Increases risk	No risk	Can't say
Male	38.6	37.7	23.6
Female	39.8	33.5	26.7
18-29	38.7	37.4	23.9
30-44	40.0	36.0	24.0
45-59	43.9	31.6	24.4
60+	30.4	36.6	33.0

Table 213: Gender and age breakdown of perceived risk of not eating fruit

	Increases risk	No risk	Can't say
Male	37.6	36.2	26.2
Female	37.5	30.4	32.0
18-29	38.4	34.5	27.1
30-44	37.2	33.3	29.5
45-59	41.3	30.8	27.9
60+	29.7	34.0	36.4

Table 214: Gender and age breakdown of perceived risk of a lack of cereals and wholegrains

	Increases risk	No risk	Can't say
Male	36.0	34.8	29.2
Female	34.0	31.2	34.8
18-29	35.2	34.1	30.7
30-44	34.8	33.3	31.9
45-59	38.5	30.8	30.6
60+	28.5	32.8	38.7

Table 215: Gender and age breakdown of perceived risk of eating fatty foods

	Increases risk	No risk	Can't say
Male	63.4	17.3	19.3
Female	65.1	15.4	19.5
18-29	64.0	16.7	19.2
30-44	64.3	15.0	20.7
45-59	66.7	17.0	16.3
60+	60.4	17.7	21.9

Table 216: Gender and age breakdown of perceived risk of eating red meat

	Increases risk	No risk	Can't say
Male	42.3	32.6	25.1
Female	44.2	28.2	27.5
18-29	42.1	30.5	27.4
30-44	42.5	31.4	26.2
45-59	48.4	28.6	23.0
60+	39.4	30.9	29.7

Table 217: Gender and age breakdown of perceived risk of a lack of exercise

	Increases risk	No risk	Can't say
Male	39.7	30.8	29.4
Female	36.2	28.0	35.8
18-29	37.7	30.4	31.9
30-44	37.8	31.2	31.0
45-59	41.8	26.4	31.9
60+	32.5	27.2	40.3

Table 218: Gender and age breakdown of perceived risk of being overweight

	Increases risk	No risk	Can't say
Male	59.7	18.3	22.0
Female	60.2	15.8	24.0
18-29	60.4	16.9	22.7
30-44	59.6	16.1	24.3
45-59	62.5	17.2	20.3
60+	54.9	19.6	25.5

Table 219: Gender and age breakdown of perceived risk of using mobile or cell phones

	Increases risk	No risk	Can't say
Male	49.4	29.3	21.3
Female	44.9	26.8	28.3
18-29	48.9	30.7	20.3
30-44	48.3	27.3	24.4
45-59	48.0	25.5	26.5
60+	37.6	26.8	35.6

Table 220: Gender and age breakdown of perceived risk of exposing your skin to the sun

	Increases risk	No risk	Can't say
Male	56.3	17.6	26.1
Female	56.4	14.0	29.6
18-29	58.2	15.9	25.9
30-44	56.7	14.7	28.5
45-59	57.4	16.8	25.8
60+	48.1	16.7	35.2

Table 221: Gender and age breakdown of perceived risk of exposure to air pollution

	Increases risk	No risk	Can't say
Male	66.5	13.4	20.2
Female	62.9	13.7	23.4
18-29	67.4	12.7	20.0
30-44	65.9	12.9	21.2
45-59	64.3	13.5	22.2
60+	54.1	17.9	28.0

Table 222: Gender and age breakdown of perceived risk of infection with viruses or bacteria

	Increases risk	No risk	Can't say
Male	67.4	14.5	18.1
Female	61.2	16.7	22.0
18-29	68.3	14.3	17.5
30-44	65.8	15.9	18.2
45-59	64.3	14.1	21.6
60+	49.2	20.9	29.9

Table 223: Gender and age breakdown of perceived risk of being stressed

	Increases risk	No risk	Can't say
Male	68.4	16.3	15.4
Female	68.5	13.3	18.2
18-29	68.5	16.2	15.3
30-44	71.2	13.6	15.2
45-59	70.5	13.9	15.6
60+	57.1	15.4	27.5