
Australian [Adelaide] Longitudinal Study of Aging,
Waves 1–5 [1992–1997]

Wave 3, Clinical Data

Gary R. Andrews and George C. Myers

ICPSR 6707

AUSTRALIAN [ADELAIDE] LONGITUDINAL STUDY OF AGING,
WAVES 1-5 [1992-1997]

(ICPSR 6707)

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Third ICPSR Version
April 2000

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Andrews, Gary R., and George C. Myers.
AUSTRALIAN [ADELAIDE] LONGITUDINAL STUDY OF
AGING, WAVES 1-5 [1992-1997] [Computer file].
3rd ICPSR version. Adelaide, South Australia:
Flinders University of South Australia, Centre
for Ageing Studies [producer], 1999. Ann Arbor,
MI: Inter-university Consortium for Political
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DATA COLLECTION DESCRIPTION

Gary R. Andrews and George C. Myers

AUSTRALIAN [ADELAIDE] LONGITUDINAL STUDY OF AGING, WAVES 1-5
[1992-1997] (ICPSR 6707)

SUMMARY: The general purpose of the Australian Longitudinal Study of Aging (ALSA) is to gain further understanding of how social, biomedical, and environmental factors are associated with age-related changes in the health and well-being of persons aged 70 years and older. Emphasis is given to the effects of social and economic factors on morbidity, disability, acute and long-term care service use, and mortality. The aim is to analyze the complex relationships between individual and social factors and changes in health status, health care needs, and service utilization dimensions. Components of Wave 1 (1992-1993) (Part 1) included a comprehensive personal interview conducted via the Computer-Assisted Personal Interview (CAPI) system, a home-based assessment of physiological functions, self-completed questionnaires, and additional clinical studies. Wave 2 (1993-1994), Wave 3 (1994-1995), Wave 4 (1995-1996), and Wave 5 (1996-1997) (Parts 2, 7, 8, and 10, respectively) included questions regarding changes in domicile, current health and functional status, new morbidity conditions, changes in medication, major life events, general life satisfaction, and changes in economic circumstances. For Wave 3 Clinical Data (Part 9) information about the health histories of the respondents was elicited, including information on medication, blood pressure, and physical and mental disabilities.

UNIVERSE: Persons aged 70 and older living in the metropolitan area of Adelaide, South Australia.

SAMPLING: The sample was randomly generated from within the Adelaide Statistical Division using the State Electoral Data Base as the sampling frame. The sample was stratified by gender and by the age groups 70-74, 75-79, 80-84, and 85 and older. Both community and institutionalized individuals were included. In addition, spouses aged 65 and older of specified persons also were invited to participate, as were other household members aged 70 years and older.

NOTE: The codebooks are provided as Portable Document Format (PDF) files. The PDF file format was developed by Adobe Systems Incorporated and can be accessed using PDF reader software, such as the Adobe Acrobat Reader. Information on how to obtain a copy of the Acrobat Reader is provided through the ICPSR Website on the Internet.

EXTENT OF COLLECTION: 6 data files + machine-readable documentation (PDF) + SAS data definition statements + SPSS data definition statements

EXTENT OF PROCESSING: CONCHK.PR/ MDATA.PR/ UNDOCCHK.PR/ DDEF.ICPSR/ REFORM.DATA/ RECODE/ SCAN

DATA FORMAT: Logical Record Length with SAS and SPSS data definition statements and SPSS export files

Part 1: Wave 1 Data
File Structure: rectangular
Cases: 2,087
Variables: 1,586
Record Length: 9,222
Records Per Case: 1

Part 2: Wave 2 Data
File Structure: rectangular
Cases: 1,779
Variables: approx. 395
Record Length: 2,386
Records Per Case: 1

Part 3: SAS Data Definition
Statements for Wave 1
Record Length: 80

Part 4: SAS Data Definition
Statements for Wave 2
Record Length: 80

Part 5: SPSS Export File
for Wave 1
Record Length: 80

Part 6: SPSS Export File
for Wave 2
Record Length: 80

Part 7: Wave 3 Data
File Structure: rectangular
Cases: 1,679
Variables: 1,304
Record Length: 7,193
Records Per Case: 1

Part 8: Wave 4 Data
File Structure: rectangular
Cases: 1,504
Variables: 461
Record Length: 3,624
Records Per Case: 1

Part 9: Wave 3 Clinical Data
Cases: 1,423
Variables: approx. 165

Part 10: Wave 5 Data
File Structure: rectangular
Cases: 1,171
Variables: 393
Record Length: 7,202
Records Per Case: 1

RELATED PUBLICATIONS:

Clark, M.S., and M.J. Bond. "The Adelaide Activities Profile: A Measure of the Lifestyle Activities of Elderly People." AGING CLINICAL AND EXPERIMENTAL RESEARCH 7, 4 (1995), 174-184.

Andrews, G.R., L.K. Mawby, G.C. Myers, and S.J. Taylor. "Computer-Assisted Personal Interviewing (CAPI) in the Australian Longitudinal Study of Aging." Sydney, Australia: International Epidemiological Association 13th Scientific Meeting, 1993.

Andrews, G.R., and C.M. Rungie. "Networks of Formal and Informal Support Amongst the Aging." New Orleans, LA: Gerontological Society of America, 1993.

Sequence No:

SEQNUM

AUSTRALIAN LONGITUDINAL STUDY OF AGEING

1994

DATA COLLECTION SHEET

DATE /_/_/_/-/_/_/_/-/_/_/_/_/_/

DATEW3

INFORMED CONSENT OBTAINED

Yes - 1

No - 2

DATE OF BIRTH /_/_/_/-/_/_/_/-/_/_/_/_/_/

TIME STARTED /_/_/_/ : /_/_/_/

STTIMEW3

COMPLETED /_/_/_/ : /_/_/_/

FITIMEW3

A. PSYCHOLOGICAL BATTERY*

A.1 **Boston Naming**
(Circle proper code)

BOSTONW3

Complete - 1
Incomplete - 2
Refused - 3

A.2 **Digit Symbol Substitution**
(Circle proper code)

DIGITW3

Complete - 1
Incomplete - 2
Refused - 3

A.3 **National Adult Reading Test**
(Circle proper code)

NARTW3

Complete - 1
Incomplete - 2
Refused - 3

A.4 **Flinders Fluency Task**
(Circle proper code)

FFTW3

Complete - 1
Incomplete - 2
Refused - 3

A.5 **Initial Letter Fluency Task**
(Circle proper code)

ILFTW3

Complete - 1
Incomplete - 2
Refused - 3

***Battery given to respondent during the clinical examination**

B. QUALITY OF LIFE QUESTIONNAIRE*

B.1 **Quality of Life Questionnaire**
(Circle proper code)

Complete - 1
Incomplete - 2
Refused - 3

QOLW3

Reason for refusal
.....

QB2W3

*** Questionnaire given to respondent during the clinical examination**

QOLBW3C

C. SEXUAL BEHAVIOUR QUESTIONNAIRE

C.1 Sex Questionnaire
(Circle proper code)

Complete - 1
Incomplete - 2
Refused - 3

D. AUDIOMETRY

- | | | | |
|------|--|-----------------------------------|-----------------|
| D.1 | Do you have any difficulty with your hearing?
(Circle proper code) | Yes - 1
No - 2 | HEARW3 |
| D.2 | Have you had a cold in the last two weeks
(Circle proper code) | Yes - 1
No - 2 | COLDW3 |
| D.3 | Do you think you have a better ear?
(Circle proper code) | Right - 1
Left - 2
Equal -3 | BTEARW3 |
| D.4 | Do you have any ringing or noises in your head right now?
(Circle proper code) | Yes - 1
No - 2 | TINW3 |
| D.5a | Hearing aid - left ear
(Circle proper code) | Yes - 1
No - 2 | HAIDLEW3 |
| D.5b | Hearing aid - right ear
(Circle proper code) | Yes - 1
No - 2 | HAIDREW3 |
| D.6 | Noise - excluding headphones
(Circle proper code) | Yes - 1 | NOISEW3 |
| D.7 | Audiometry Tests - Right Ear
(Check that 7 thresholds have been reached or, where appropriate, other responses have been entered) | | AUDRW3 |

If unable to hear because

- a) outer limit reached - code 99
- b) could not establish threshold - code 88
- c) refused to proceed -code 77

	Frequency (Khz)		
D.7a	1.0	/_/_/ Db	REF1W3
D.7b	2.0	/_/_/ Db	REF2W3
D.7c	3.0	/_/_/ Db	REF3W3
D.7d	4.0	/_/_/ Db	REF4W3
D.7e	6.0	/_/_/ Db	REF6W3
D.7f	8.0	/_/_/ Db	REF8W3
D.7g	0.5	/_/_/ Db	REF0.5W3

Audiometry Tests - Left Ear**AUDLW3**

(Check that 7 thresholds have been reached or, where appropriate, other responses have been entered)

If unable to hear because	a) outer limit reached -	code 99
	b) could not establish threshold -	code 88
	c) refused to proceed -	code 77

	Frequency (Khz)		
D.8a	1.0	/__/_/ Db	LEF1W3
D.8b	2.0	/__/_/ Db	LEF2W3
D.8c	3.0	/__/_/ Db	LEF3W3
D.8d	4.0	/__/_/ Db	LEF4W3
D.8e	6.0	/__/_/ Db	LEF6W3
D.8f	8.0	/__/_/ Db	LEF8W3
D.8g	0.5	/__/_/ Db	LEF0.5W3

D.9	Reliable Audiogram		RELAUDW3
	(Circle proper code)	Yes - 1	
		No - 2	

D.10	Ambient noise level		AMBNOIW3
	(Circle proper code)	High - 1	
		Moderate - 2	
		Low - 3	

D.11a	Tuning Fork Test - left ear		TFLEW3
	(Circle proper code)	Front greater than back - 1	
		Back greater than front - 2	
		Could not establish - 3	

D.11a	Tuning Fork Test - right ear		TFREW3
	(Circle proper code)	Front greater than back - 1	
		Back greater than front - 2	
		Could not establish - 3	

E. BLOOD PRESSURE

Sitting Blood Pressure - after three-minutes rest		
E.1a	Pulse at 15 secs	/_/_/_/ PLS3MW3
E.1b	BP - Systolic	/_/_/_/ SBP3MW3
E.1c	BP - Diastolic	/_/_/_/ DBP3MW3
- after four-minutes rest		
E.2a	Pulse at 15 secs	/_/_/_/ PLS4MW3
E.2b	BP - Systolic	/_/_/_/ SBP4MW3
E.2c	BP - Diastolic	/_/_/_/ DBP4MW3
- after five-minutes rest		
E.3a	Pulse at 15 secs	/_/_/_/ PLS5MW3
E.3b	BP - Systolic	/_/_/_/ SBP5MW3
E.3c	BP - Diastolic	/_/_/_/ DBP5MW3
Standing Blood Pressure		
E.4	Able to stand? (Circle proper code)	ABSTDW3
		Yes - 1 No - 2
- after 30 seconds		
E.5a	Pulse at 15 secs	/_/_/_/ PLS15W3
(After 45 seconds)		
E.5b	BP - Systolic	/_/_/_/ SBP15W3
E.5c	BP - Diastolic	/_/_/_/ DBP15W3
-after 1 min 30 seconds		
E.5d	Pulse at 15 secs	/_/_/_/ PLS45W3
(after 1 min 45 seconds)		
E.5e	BP - Systolic	/_/_/_/ SBP45W3
E.5f	BP - Diastolic	/_/_/_/ DBP45W3
E.6	Able to complete blood pressure tests (Circle proper code)	IRRPLSW3 COMPBPW3
		Yes - 1 No - 2
E.7	Phase IV used in diastolic measurement (if Korotkow sounds are muffled rather than disappeared) (Circle proper code)	PHIVW3
		Yes - 1 No - 2

E.8	Phase V used in diastolic measurement (if Korotkow sounds disappear) (Circle proper code)	Yes - 1 No - 2	PHVW3
E.9	Symptoms of dizziness or light-headedness? (Circle proper code)	Present - 1 Not present - 2 Not sure - 3	DIZZYW3
E.10a	Do you take medication to lower your blood pressure (Circle proper code)	Yes - 1 No - 2	HYPDRGW3
E. 10b	How many hours ago was the medication taken?	hrs Not applicable - 1	TIMDRGW3
E. 11	How many hours ago was your last meal?	hrs	HRSEATW3
E. 12	Cuff (Circle correct code)	1.	SIZCFFW3
	Obese Cuff	2.	

F. ANTHROPOMETRY

F.1	Height - To nearest 0.1cm (not attempted/done, code 999.9)	/__/_/_./_/	HEIGHTW3
F.2	Weight - To nearest kg (not attempted/done, code 999)	/__/_/	WEIGHTW3
GIRTHS			
F.3	Arm (relaxed) - To nearest 0.1cm (not attempted/done, code 99.9)	/__/_/_./_/	RARMW3
F.4	Arm (flexed, tense) - To nearest 0.1cm (not attempted/done, code 99.9)	/__/_/_./_/	FLARMW3
F.5	Waist (minimum) - To nearest 0.1cm (not attempted/done, code 999.9)	__/_/_./_/	WAISTW3
F.6	Hip (maximum) - To nearest 0.1cm (not attempted/done, Code 999.9)	/__/_/_./_/	HIPW3
F.7	Calf (maximum) - To nearest 0.1cm (not attempted/done, code 99.9)	/__/_/_./_/	CALFW3
SKIN FOLD THICKNESSES			
F.8	Triceps - to nearest 0.1 mm (not attempted/done, code 99.9)	/__/_/_./_/ - 1	TRIC1W3
		/__/_/_./_/ - 2	TRIC2W3
		/__/_/_./_/ - 3	TRIC3W3
F.9	Metacarpals - to nearest 0.1 mm (not attempted/done, code 99.9)	/__/_/_./_/ - 1	MET1W3
		/__/_/_./_/ - 2	MET2W3
		/__/_/_./_/ - 3	MET3W3
F.10	Subscapular - to nearest 0.1 mm (not attempted/done, code 99.9)	/__/_/_./_/ - 1	SUB1W3
		/__/_/_./_/ - 2	SUB2W3
		/__/_/_./_/ - 3	SUB3W3
F.11	Supraspinale - to nearest 0.1 mm (not attempted/done, code 99.9 or 88.8 if caliper maximum)	/__/_/_./_/ - 1	SUPRA1W3
		/__/_/_./_/ - 2	SUPRA2W3
		/__/_/_./_/ - 3	SUPRA3W3
F.12	Abdominal to nearest 0.1 mm (not attempted/done, code 99.9, or 88.8 if caliper maximum)	/__/_/_./_/ - 1	ABD1W3
		/__/_/_./_/ - 2	ABD2W3
		/__/_/_./_/ - 3	ABD3W3

F.13 **Front thigh - to nearest 0.1 mm**
(not attempted/done, code 99.9)

/__/__/./__/- 1 **THIGH1W3**
/__/__/./__/- 2 **THIGH2W3**
/__/__/./__/- 3 **THIGH3W3**

F.14 **Medial calf to nearest 0.1 mm**
(not attempted/done, code 99.9)

/__/__/./__/- 1 **MEDC1W3**
/__/__/./__/- 2 **MEDC2W3**
/__/__/./__/- 3 **MEDC3W3**

BREADTHS

F.15 **Humerus - to nearest 0.1 cm**
(not attempted/done, code 99.9)

/__/__/./__/- **HUMERW3**

F.16 **Femur - to nearest 0.1 cm**
(not attempted/done, code 99.9)

/__/__/./__/- **FEMURW2**

FUNCTIONAL REACH

F.17 **Take three readings - to nearest 0.1 cm**
(not attempted/done, code 99.9)

/__/__/./__/- 1 **FUNCR1W3**
/__/__/./__/- 2 **FUNCR2W3**
/__/__/./__/- 3 **FUNCR3W3**

GRIP STRENGTH

F.18 **Take two readings - to nearest 0.1 cm**

/__/__/./__/- 1 **GRIP1W3**
/__/__/./__/- 2 **GRIP2W3**

G. VISUAL ACUITY

G.1	Light levels (Circle proper code)	High - 1 Moderate - 2 Low - 3	LGHTLVW3
SIGHT			
G.2a	Blind in right eye (Circle proper code)	Yes - 1 No - 2	BLDREW3
G.2b	Blind in left eye (Circle proper code)	Yes - 1 No - 2	BLDLEW3
DISTANCE			
G.3	Spectacles usually worn for distance vision? (Circle proper code)	Yes - 1 No - 2	SPECSW3
UNCORRECTED VISION (without spectacles)			
G.4a	Right eye, line read at 3 metres (If not done, code as 99)	/__/_/	UNCOREW3
G.4b	Right eye, adjustments - (circle as correct + or -) (If not done, code as 99)	+..... _/_/_/	ADJUNRW3
G.5a	Left eye, line read at 3 metres (If not done, code as 99)	/__/_/	UNCOLEW3
G.5b	Left eye, adjustments - (circle as correct + or -) (If not done, code as 99)	+..... _/_/_/	ADJUNLW3
CORRECTED VISION			
G.6	Vision corrected by: (Circle proper code)	Spectacles - 1 Contact lens - 2 Pinhole - 3 Not applicable - 4	VISCORW3
G.7a	Right eye, line read at 3 metres (If not applicable, code as 99)	/__/_/	CORREW3
G.7b	Right eye, adjustments - (circle as correct + or -) (If not done, code as 99)	+..... _/_/_/	ADJCORW3
G.8a	Left eye, line read at 3 metres (If not applicable, code as 99)	/__/_/	CORLEW3
G.8b	Left eye, adjustments - (circle as correct + or -) (If not applicable, code as 99)	+..... _/_/_/	ADJCOLW3

NEAR VISION

Uncorrected Vision (without spectacles - not prescribed or available)

G.9a **Right eye, line read** /__/_/ **NUNREW3**
(If not done, code as 99)

G.9b **Left eye, line read** /__/_/ **NUNLEW3**
(If not done, code as 99)

Corrected Vision

G.10 **Vision corrected by:** **NVISCOW3**
(Circle proper code)
Spectacles - 1
Magnifier - 2
Spectacles and magnifier - 3
Not applicable - 4

G.11a **Right eye, line read** /__/_/ **NCOREW3**
(If not applicable, code as 99)

G.11b **Left eye, line read** /__/_/ **NCOLEW3**
(If not applicable, code as 99)

H. OTHER PHYSICAL CONDITIONS

H.1 **Resting tremor of hands** **TREMORW3**
(Circle proper code)
Present - 1
Not present - 2
Not sure - 3
Circle appropriate degree : mild/marked **DEGTREW3**

H.2 **Ecchymoses on hand and forearm** **ECCHYW3**
(Circle proper code)
Present - 1
Not present - 2
Not sure - 3
Circle appropriate degree : mild/marked **DEGECCW3**

H.3 **Evidence of pitting oedema** **PITOEDW3**
(Circle proper code)
Present - 1
Not present - 2
Not sure - 3
Circle appropriate degree : mild/marked **DEGOEDW3**

I. EPESE

I.1 **Do you have any problems from recent surgery, injury or other health conditions that may prevent you from standing up from a chair or from walking up steps** **PREVEPW3**
(Circle proper code)

Yes - 1
No - 2
Refused - 3

If yes, please specify **QI1AW3**

STANDS

I.2 **Semi-tandem stand** **SEMSTDW3**

(Circle proper code)
Completed, semi-tandem stand held for 10 secs - 10 (go to I.3)
Incomplete, held semi-tandem stand for less than 10 secs - 11 (go to I.2a)
Tried but could not hold semi-tandem stand - 96 (go to I.4)
Refused - 97
Not attempted - 98

I.2a If code circled is 11, record number of seconds /___/(go to I.4) **HLSTDW3**

I.3 **Full Tandem Stand** **FULSTDW3**
(Circle proper code)

Completed, full tandem stand held for 10 secs - 10
Incomplete, held full tandem stand for less than 10 secs - 11 (go to I.3a)
Tried but could not hold full tandem stand - 96
Refused - 97
Not attempted - 98

I.3a If code circled is 11, record number of seconds /___/ **HLDFULW3**

I.4 **Side by Side Stand** **SBSSTDW3**
(Circle proper code)

Completed, side by side stand held for 10 secs - 10
Incomplete, held side by side stand for less than 10 secs - 11 (go to I.4a)
Tried but could not hold side by side stand - 96
Refused - 97
Not attempted - 98

I.4a If code circled is 11, record number of seconds /___/ **HLDSBSW3**

	Measured walk, time to walk 8 feet (2.44 m) twice	AIDWLKW3
I.5	Do you need a cane or a walking aid for this measured walk? (Circle proper code)	Yes - 1 No - 2 Refused - 3 Not applicable - 99
I.6	If yes, what aid? (Circle proper code)	TYPaidW3
		Walker - 1 Frame - 2 Quad cane - 3 One cane - 4 Two canes - 5
I.7	Time of first complete measured walk - to nearest 0.1 secs (If not completed, enter 99.9)	WLK1W3
		/__/_/./__
I.7a	If incomplete (Circle proper code)	INWLK1W3
	Tried but could not complete walk - 99.6	
	Not attempted - 99.7 (go to 7a.1)	QI7A1W3
	Not applicable - 99.8 (go to 7a.2)	QI7A2W3
I.8	Time of second complete measured walk - to nearest 0.1sec. (If not completed, enter 99.9)	WLK2W3
		/__/_/./__
I.8a	If incomplete (Circle proper code)	INWLK2W3
	Tried but could not complete walk - 99.6	
	Not attempted - 99.7 (go to 8a.1)	QI8A1W3
	Not applicable - 99.8 (go to 8a.2)	QI8A2W3
I.8a.1	Specify why not attempted.....	
I.8a.2	Specify why not applicable.....	

Single Chair Stands		
I.9	Height of chair used	/__/_/ cm HTCHRW3
I.10	Single chair stand (Circle proper code)	SINGCHW3
	Rises without using arms - 1 (go to I.11) Rises using arms - 2 (go to I.10a) Not attempted for safety reasons - 3 (go to I.14) Not attempted chair bound - 4 (go to I.14) Not attempted no suitable chair - 5 (go to I.14) Not attempted for other reasons - 6 (go to I.10b) Refused - 7 (go to I.14) Tried but unable - 8 (go to I.14) Not applicable - 9 (go to I.14)	
I.10a	Number of attempts at rising using arms (Up to a maximum of five attempts)	/__/_/ NOATTW3
I.10b	Reason for not attempting chair stand (circled code is 6)	QI10BW3
<i>(Go to Abnormalities of Gait & Posture if unable to proceed with chair stands)</i>		
Repeated Chair Stands		
I.11	Number completed, no arm use	/__/_/ NUMCHW3
I.12	Time taken for five complete chair stands, no arm use (If less than five, enter code 999.9 and circle reason)	TIMECHW3 /__/_/___/./__/_/
I.13	Unsuccessful repeated chair stands (Circle proper code)	UNSUCCW3
	Not attempted for safety reasons - 3 Not attempted, other - 6 Refused - 7 Tried but unable - 8	
I.13a	Specify why not attempted (if code is 6)	QI13AW3
Abnormalities of gait, posture		
I.14	Detail: (Circle proper code)	GAITW3
	Present - 1 Absent - 2 Unsure - 3	
I.14a	If present, describe:	QI14AWS

J. CONSENTS

- | | | | |
|------|---|---|-----------------|
| J.1 | Densitometry
(Circle proper code) | yes - 1
no - 2 | DENSW3 |
| J.2 | E.M.G.
(Circle proper code) | yes - 1
no - 2 | EMGW3 |
| J.3 | Collection of blood for pathology
(Circle proper code) | yes - 1
no - 2 | BLOODW3 |
| J.3a | If blood not collected, specify reason.....
..... | | QJ3AW3 |
| J.3b | If blood collected, did subject fast?
(Circle proper code) | yes - 1
no - 2 | FSTBLDW3 |
| J.3c | If subject did not fast, specify reason
(Circle proper code) | Diabetic - 1
Other - 2 | REASNFW3 |
| J.3d | If other, specify why did not fast:.....
..... | | QJ3DW3 |
| J.3e | If diabetic, what type of treatment prescribed?:
(Circle proper code) | No treatment - 1
Diet only - 2
Oral hypoglycaemics - 3
Insulin - 4
Don't know - 5 | DIABTRW3 |

K. MAILBACKS COLLECTED

- | | | | |
|-----|---|-------------------|--------------|
| K.1 | Dietary
(Circle proper code) | yes - 1
no - 2 | QK1W3 |
| K.2 | Dental
(Circle proper code) | yes - 1
no - 2 | QK2W3 |
| K.3 | Psychology
(Circle proper code) | yes - 1
no - 2 | QK3W3 |

1. Sequence Number _____ **SEQNUM**

2. [INTERVIEWER TO COMPLETE]
Respondent - male or female? **SEXW3**
Male 1
Female 2

3. See display cards number 1
(A1) [INTERVIEWER TO COMPLETE]
Type of domicile? **DOMICW3**

4. (A2a) Please specify other community living _____ **COMMW3**

5. (A2b) Please specify other institution _____ **INSTW3**

6. [INTERVIEWER TO COMPLETE FROM HOUSEHOLD DATA SHEET]
Respondent has changed address in last two years? **MOVEDW3**
Yes 1
No 2

7. We would like to check your current living arrangements.
{INTERVIEWER - Press 0 then Enter} _____

8. I am now going to read out the names of the people you told us were
living with you at the interview two years ago.
{INTERVIEWER - Press 0 then Enter} _____

9. TABLE

The table contains the following 2 questions:

9.1 Is \$W12DET.RELDET[I].NAME your \$RELDDESC still living here?
Yes (1) **NM2YR1W3-**
No (2) **NM2YR6W3**

9.2 [INTERVIEWER TO PROBE IF UNCLEAR FROM PREVIOUS RESPONSE]
Have they moved out or are they deceased?
Moved Out (1) **LEFT1W3-LEFT6W3**
Deceased (2)

Question	9.1	9.2
	Yes No	1 code
People ..	1 2	1 2
People ..	1 2	1 2
People ..	1 2	1 2
People ..	1 2	1 2
People ..	1 2	1 2
People ..	1 2	1 2
People ..	1 2	1 2

10. Are there any additional people now living with you, and if so
how many? _____ **HMNEWW3**

11. TABLE

The table contains the following 4 questions:

11.1 For each additional person now living with you, please answer the following questions.

What is their name?

NAME1W3-NAME6W3

11.2 See display cards number 2
What is their relationship to you?

RELAT1W3-RELAT6W3

11.3 What was their age last birthday?

THAGE1W3-THAGE6W3

11.4 What is their sex?

Male (1)
Female (2)

THSEX1W3-THSEX6W3

Question	11.1	11.2	11.3	11.4	
		1 code		Male	Female
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2
Person ..	_____	—	—	1	2

12. In which country were you born?

England 1
Scotland 2
Wales 3
Ireland/Eire 4
Northern Ireland 5

UKCOUW3

13. Which nationality do you regard yourself?

English 1
Scottish 2
Welsh 3
Irish (Republic) 4
Irish (Northern) 5

UKIREW3

14. Could you please tell me your current marital status?

Married 1
De Facto 2
Separated 3
Divorced 4
Widowed 5
Never married 6

MARITW3

15. How many living children do you (or your husband-wife-partner) have?

— **LIVCHW3**

16. The next questions are about your (and your husband's or wife's or partner's) child or children.

I would like to record their first name(s) (starting with the oldest).

{INTERVIEWER - If there are more than 10 children, write the overflow on paper. Now press 0 then Enter}

—

17. TABLE

The table contains the following 7 questions:

17.1 For each child, please answer the following questions.

What is his or her first name and the initial of their last name? **NMCHD1-NMCHD10**

17.2 Their sex?
{INTERVIEWER to answer unless unclear}

Male (1)
Female (2) **SXCH1W3-SXCH10W3**

17.3 What is \$NAMECHD 's relationship to you?

Child (1) **RLCH1W3-RLCH10W3**
Step or Partner's Child (2)
Other (3)

17.4 Is \$NAMECHD married and living with their spouse, living with a partner or not currently married?

Married (1) **MRCH1W3-MRCH10W3**
Live with partner (2)
Other (3)

17.5 How old is he-she ?

{INTERVIEWER - If unsure, ask ABOUT how old}

AGCH1W3-AGCH10W3

17.6 How many years of formal schooling, including tertiary, did he-she complete?

EDCH1W3-EDCH10W3

17.7 Does \$NAMECHD live more than 1 hour from you, using his/her regular means of transport?

Yes (1) **DISCH1W3-DISC10W3**
No (2)
No, lives with respondent (3)

Question	17.1	17.2	17.3	17.4	17.5	17.6
		Male Female	1 code	1 code		
ChdDet ..	_____	1 2	1 2 3	1 2 3	—	—
ChdDet ..	_____	1 2	1 2 3	1 2 3	—	—
ChdDet ..	_____	1 2	1 2 3	1 2 3	—	—
ChdDet ..	_____	1 2	1 2 3	1 2 3	—	—
ChdDet ..	_____	1 2	1 2 3	1 2 3	—	—

Question 17.7
1 code

ChdDet .. 1 2 3
ChdDet .. 1 2 3
ChdDet .. 1 2 3
ChdDet .. 1 2 3
ChdDet .. 1 2 3

18. How many living grandchildren do you (or your husband - wife - partner) have?

HMGDCHW3

19. I would now like to ask some questions about your parents.

{INTERVIEWER - Press 0 then Enter}

20. Is your mother still alive?

Yes 1
No 2 **MTHLIVW3**

21. How old was she when she died? — **MTHAGEW3**

22. Is your father still alive?

Yes 1 **FTHLIVW3**
No 2

23. How old was he when he died? — **FTHAGEW3**

24. (B3) The next few questions concern the way you feel about
your health and your life:
{INTERVIEWER - Show Prompt Card 1}

How would you rate your overall health at the present time? **SRHW3**
Excellent 1
Very Good 2
Good 3
Fair 4
Poor 5

25. (B4) Would you say that your health is better, about the same
or worse than most people your age?

Better 1
Same 2 **HLTHBTW3**
Worse 3

26. (B5) Is your health now better, about the same, or not as good
as it was about twelve months ago?

Better now 1
About the same 2 **BTSMW3**
Not as good now 3

Questions 27 and 28 :

Meaning of the labels:

Very likely(1)
Likely(2)
Unlikely(3)
Very unlikely(4)

27. (B3a) We would like to ask a few questions about various health
events in the future.

How likely do you think it is that you will need long-term care
in a nursing home at some point during your lifetime?

{INTERVIEWER - Show Prompt Card 2} 1 2 3 4 **LIKENHW3**

28. (B3c) How likely do you think it is that you will live for
another ten years?

{INTERVIEWER - Show Prompt Card 2} 1 2 3 4 **LIFEEXW3**

29. Now we have a few questions about your (husband's - wife's -
partner's) health.

How would you rate their health at the present time?

{INTERVIEWER - Show Prompt Card 1}
Excellent 1
Very Good 2
Good 3 **SPSHLLFE**
Fair 4
Poor 5

30. (B1) Does your (wife - husband - partner) have any illness or health problems which limit his or her activities in any way? **SPHLW3**
- Yes 1
- No 2
31. (B2) Do health problems limit his or her activities a lot, somewhat, or just a little? **SPLIMW3**
- A Lot 1
- Somewhat 2
- A little 3
32. (B3b) How likely do you think it is that your partner/spouse will need long-term care in a nursing home at some point during their lifetime? **LKNHSPW3**
- {INTERVIEWER - Show Prompt Card 2 - note option of 'Already in nursing home' is not on this prompt card}
- Very likely 1
- Likely 2
- Unlikely 3
- Very unlikely 4
- Already in Nursing Home 5
33. (B3d) How likely do you think it is that your partner/spouse will live for another ten years? **LIFSPW3**
- {INTERVIEWER - Show Prompt Card 2}
- Very likely 1
- Likely 2
- Unlikely 3
- Very unlikely 4
- Questions 34 through 53 :
Meaning of the labels:
- Rarely or none of the time(1)
- Some of the time(2)
- Quite a bit of the time(3)
- Most or all of the time(4)
34. (B6) We are interested in how people feel about their lives. I am now going to read a list of statements describing how people sometimes feel. Many of these statements may not apply to you but we have to ask them of everybody to get a comparison.
- Please tell me how often you felt this way during the past week:
- {INTERVIEWER - Show Prompt Card 3}
- I was bothered by things that usually don't bother me. 1 2 3 4 **CESD1W3**
35. (B7) I did not feel like eating: my appetite was poor. 1 2 3 4 **CESD2W3**
36. (B8) I felt that I could not shake off feeling low even with help from my family and friends. 1 2 3 4 **CESD3W3**
37. (B9) I felt that I was just as good as other people. 1 2 3 4 **CESD4W3**
38. (B10) I had trouble keeping my mind on what I was doing. 1 2 3 4 **CESD5W3**
39. (B11) I felt depressed. 1 2 3 4 **CESD6W3**
40. (B12) I felt that everything I did was an effort. 1 2 3 4 **CESD7W3**
41. (B13) I felt hopeful about the future. 1 2 3 4 **CESD8W3**
42. (B14) I thought my life had been a failure. 1 2 3 4 **CESD9W3**

43. (B15) I felt afraid.	1 2 3 4	CESD10W3
44. (B16) My sleep was restless.	1 2 3 4	CESD11W3
45. (B17) I was happy.	1 2 3 4	CESD12W3
46. (B18) It seemed that I talked less than usual.	1 2 3 4	CESD13W3
47. (B19) I felt lonely.	1 2 3 4	CESD14W3
48. (B20) People were unfriendly.	1 2 3 4	CESD15W3
49. (B21) I enjoyed life.	1 2 3 4	CESD16W3
50. (B22) I had crying spells.	1 2 3 4	CESD17W3
51. (B23) I felt sad.	1 2 3 4	CESD18W3
52. (B24) I felt that people disliked me.	1 2 3 4	CESD19W3
53. (B25) I could not get going.	1 2 3 4	CESD20W3

54. Thank you for responding to those questions. We would now like to move on to matters about your health. [INTERVIEWER - Press 0 and Enter]	—	COMPUTED CESDW3
--	---	------------------------

55. When we interviewed you 2 years ago, you told us about some medical conditions you had at the time. I'd like to check if you still have these conditions. {INTERVIEWER - Press 0 and Enter}	—	
---	---	--

56. TABLE

The table contains the following 5 questions:

**ONE OF THREE ASKED
(56.1, 56.2, 56.3)
DEPENDING ON
CONDITION
W1CDN1-W1CDN63**

56.1 Do you still have \$CONDDDESC?	
Yes	(1)
No	(2)

56.2 In the past two years, have you had any further episodes of \$CONDDDESC?	
Yes	(1)
No	(2)

56.3 Two years ago, you indicated you have \$CONDDDESC. {INTERVIEWER - Press 0 and enter}	
--	--

56.4 Have you stayed in hospital at least overnight in the past two years for this condition?	
Yes	(1)
No	(2)

W1HOS1-W1HOS63

56.5 Are you now prevented in any way from doing any activities because of this condition?	
Yes	(1)
No	(2)

W1LIM1 - W1LIM63

Question	56.1	56.2	56.3	56.4	56.5
	Yes No	Yes No		Yes No	Yes No
MrbCond .	1 2	1 2	—	1 2	1 2

58. Please specify other arthritis. _____ **OTHARTH2**

59. Are you currently receiving treatment for diabetes? **DIAB52W1**

Yes 1
No 2

60. What type of treatment are you receiving? **TMT52W1**

Insulin 1
Diet 2
Tablets or drugs 3

61. [INTERVIEWER - show Prompt Card 4] **NEWCDNW3**

Now I would like you to tell me which, if any, of these medical conditions you have had as new conditions in the last two years.

{INTERVIEWER - Enter total number of new conditions suffered and note their names on paper} _____

62. TABLE

The table contains the following 4 questions:

62.1 Which condition? **W3CDN1 - W3CDN64**

{INTERVIEWER - Enter condition from list by entering the 4 letters in brackets EXACTLY as shown on your card}

62.2 Please specify other condition **W30TH62 - W30TH63**

62.3 Have you stayed in hospital at least overnight in the past two years for this condition? **W3HOS1 - W3HOS64**

Yes (1)
No (2)

62.4 Are you now prevented in any way from doing any activities because of this condition? **W3LIM1 - W3LIM64**

Yes (1)
No (2)

Question	62.1	62.2	62.3		62.4	
			Yes	No	Yes	No
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2
Disease .	_____	_____	1	2	1	2

63. What form of arthritis is this? **ARTH3W3 - ARTH6W3**

Rheumatism or rheumatic 1
Rheumatoid arthritis 2
Osteoarthritis 3
Other form, please specify 4

64. Please specify other arthritis. _____ **OTHARTH**

65. Are you currently receiving treatment for diabetes?		DIABW3
Yes	1	
No	2	
66. What type of treatment are you receiving?		DIABTMW3
Insulin	1	
Diet	2	
Tablets or drugs	3	
67. Do you frequently pass urine during the DAY?		URINEW3
Yes	1	
No	2	
Has Catheter	3	
68. Do you usually have to get up at NIGHT to pass urine?		NTURW3
Yes	1	
No	2	
69. About how many times per night?	—	NONTURW3
70. (C78) Do you have pain on passing urine?		PAINURW3
{INTERVIEWER - Show Prompt Card 5}		
Often	1	
Occasionally	2	
Never	3	
71. (C79) Do you have difficulty holding your urine until you get to the toilet?		HOLDURW3
{INTERVIEWER - Show Prompt Card 5}		
Often	1	
Occasionally	2	
Never	3	
72. (C80) Do you accidentally pass urine?		ACCDURW3
{INTERVIEWER - Show Prompt Card 5}		
Often	1	
Occasionally	2	
Never	3	
73. (C81) When does this occur?		REASNW3
{INTERVIEWER - Show Prompt Card 6}		
Only when you cough, laugh or strain	1	
When you cough, laugh or strain and also at other times	2	
At other times only	3	
74. The next few questions are about medicines.		
{INTERVIEWER - Press 0 and Enter}	—	
75. When we spoke with you two years ago, you indicated the medicines you were taking at that time. I'd like to check if you are still taking those medicines.		
{INTERVIEWER - Press 0 then enter}	—	
76. TABLE		
The table contains the following 1 questions:		
76.1 Are you still taking \$W12DET.DRUGDET[I].REVDRUG for your		

**REVDRUG0-REVDRUG8
(REVDRUG0-WHATFOR
INCLUDED IN W3
DATA FILE FOR EASE
OF READING)**

\$W12DET.DRUGDET[I].WHATFOR?

Yes (1) **WHATFOR0 - WHATFOR8**
No (2) **STILL0W3 - STILL8W3**

Question 76.1

	Yes	No
Meds	1	2
Meds	1	2
Meds	1	2
Meds	1	2
Meds	1	2
Meds	1	2
Meds	1	2
Meds	1	2
Meds	1	2

77. Now I'd like to ask about the new medicines you have started taking in the last two years. These include any medicines prescribed by a doctor that you have taken or were supposed to take in the last two weeks.

We are also interested in all other medicines not prescribed by a doctor such as aspirin, headache pills, laxatives, cough and cold medicines, vitamins, minerals and dietary supplements.

Could you please show me the medicines that you take?
{INTERVIEWER - CHECK CONTAINERS - Do not include ointments.
Enter number of medicines.}

— **NEWMEDW3**

78. TABLE

The table contains the following 5 questions:

DRUG1W3 - DRUG10W3

78.1 Drug Name?
{INTERVIEWER - Generic name preferred}

78.2 [INTERVIEWER TO RESPOND]
Container seen?

CONT1W3 - CONT10W3

Yes (1)
No (2)

78.3 What do you take this for?

WHY1W3 - WHY10W3

78.4 Have you been taking this for more than one month?

MRMN1W3 - MRMN10W3

Yes (1)
No (2)

78.5 Was this prescribed by a doctor?

PRDR1W3 - PRDR10W3

Yes (1)
No (2)

Question	78.1	78.2	78.3	78.4
		Yes No		Yes No
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2
NewMeds .	_____	1 2	_____	1 2

Question 78.5

	Yes	No
NewMeds .	1	2
NewMeds .	1	2
NewMeds .	1	2
NewMeds .	1	2
NewMeds .	1	2
NewMeds .	1	2
NewMeds .	1	2
NewMeds .	1	2
NewMeds .	1	2
NewMeds .	1	2

79. Now I would like to ask you about falls you may have had in the past year - including those falls that did not result in injury as well as those that did.

ACCDHAW3

How many falls did you have in the past year? _____

80. Now I want to ask you how many of these falls required medical treatment or limited your activities for more than 2 days.

HWFLSW3

81. TABLE

The table contains the following 8 questions:

81.1 (E4) For each of these falls requiring medical attention, please answer the following questions.

'Where were you when you were injured? (Please specify e.g. kitchen of own home)'

WHERE1W3-WHERE6W3

81.2 (E5) What were you doing at the time you were injured? (Please specify such as washing dishes, walking upstairs)

WHAT1W3-WHAT6W3

81.3 (E6) What went wrong? (Please specify such as slipped on rug)

CAUS1W3-CAUS6W3

81.4 (E6a) How exactly was the injury caused? (eg Landed on floor)

HOW1W3-HOW6W3

81.5 (E7) What were your injuries?
(Please specify - include body parts and nature of injury such as cut or fracture)

INJ1W3-INJ6W3

81.6 Were you limited in doing your usual activities for more than two days?

LIMIN1W3-LIMIN6W3

Yes (1)

No (2)

81.7 Did you seek medical attention for these injuries?

MEDIN1W3-MEDIN6W3

Yes (1)

No (2)

81.8 (E8) Did you stay in a hospital overnight because of your injuries?

HOSP1W3-HOSP6W3

Yes (1)

No (2)

Question	81.1	81.2
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____

Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____

Question 81.3

Falls ...	_____
Falls ...	_____
Falls ...	_____
Falls ...	_____
Falls ...	_____
Falls ...	_____
Falls ...	_____
Falls ...	_____
Falls ...	_____
Falls ...	_____

Question 81.4 81.5

Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____
Falls ...	_____	_____

Question	81.6		81.7		81.8	
	Yes	No	Yes	No	Yes	No
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2
Falls ...	1	2	1	2	1	2

82. Looking towards the next 12 months, how would you rate your chance of having a fall that required medical attention or limited your usual activities for more than two days? **LIK FAL W3**

{INTERVIEWER - Show Prompt Card 7}

- | | |
|---|---|
| Very likely to happen | 1 |
| Likely to happen | 2 |
| May happen, but not particularly likely or unlikely | 3 |
| Unlikely to happen | 4 |
| Very unlikely to happen | 5 |

83. (E27) {INTERVIEWER - Show Prompt Card 8} **NO FRAC W3**

I want you to indicate which, if any, of these bones you have broken in the last two years.

{INTERVIEWER - Enter total number of broken bones} _____

84. TABLE

The table contains the following 3 questions:

84.1 (E28) Which bone? **BON1W3 - BON6W3**
 {INTERVIEWER - Enter the three characters in brackets on
 Interviewer Prompt Card 8 EXACTLY as shown}

84.2 (E30) How did this occur? **FHOW1W3 - FHOW6W3**
 Fall at ground level (1)
 Fall from height (2)
 Motor vehicle accident (3)
 Other accident (4)
 Spontaneous break (5)
 Other (6)

84.3 (E31) Did you have surgery for this? **SUR1W3 - SUR6W3**
 Yes (1)
 No (2)

Question	84.1	84.2						84.3	
		1 code						Yes	No
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2
Fracture	___	1	2	3	4	5	6	1	2

85. Have you had any (other) surgery or operations in the last two years? **ANYSURW3**

Yes 1
 No 2

86. How many different times have you had surgery in the last two years? **HMSURW3**

87. TABLE

The table contains the following 1 questions:

87.1 For each surgical procedure, please answer the following question.
 'What was the surgery for?'

Question	87.1	WHSR1W3 - WHSR8W3
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	
Surgery .	_____	

Surgery . _____
 Surgery . _____
 Surgery . _____

	Yes	No	
88. I would now like to ask whether you have EVER had some specific surgical procedures.			
Have you EVER had surgery for cataracts?	1	2	CATARAW3
89. Have you EVER had a hip replacement?	1	2	HIPREPW3
90. Have you EVER had gall bladder surgery?	1	2	GALLBLW3
91. Have you EVER had surgery for a hernia?	1	2	HERNIAW3
92. Have you EVER had a knee replacement?	1	2	KNEEREW3
93. Have you EVER had prostate surgery?	1	2	PROSRW3
94. Have you EVER had a mastectomy?	1	2	MASTSRW3
95. Now I am going to ask you some questions about your hearing.			
Do you usually wear a hearing aid nowadays?			HRAIDW3
No	1		
Yes, some of the time	2		
Yes, most of the time	3		
96. Has this only been in the last 12 months?			
Yes	1		HR12MW3
No	2		
97. How much difficulty, if any, do you have with your hearing (even if you are wearing your hearing aid)?			
None	1		DIFFHRW3
Slight difficulty	2		
Moderate difficulty	3		
Great difficulty	4		
Can't hear at all	5		
98. Do you ever get noises in your head or ears which usually last longer than 5 minutes?			
No, never	1		RINGNSW3
Some of the time	2		
Most or all of the time	3		
99. How annoying do you find these noises when they are at their worst?			
Not at all annoying	1		HWANNW3
Slightly annoying	2		
Moderately annoying	3		
Severely annoying	4		
100. Do you find it very difficult to follow a conversation if there is background noise such as T.V., radio or children playing?			
Yes	1		BACKGRW3
No	2		

101. Some people find it difficult to hear someone talking to them in a quiet room. Do YOU find this: **DIFFQUW3**
- | | |
|----------------------------|---|
| Not at all difficult | 1 |
| Slightly difficult | 2 |
| Moderately difficult | 3 |
| Very difficult | 4 |
| Can't hear at all | 5 |
102. Do you find enjoyment of your personal and social life is affected by hearing problems? **HRSOCW3**
- | | |
|------------------------|---|
| Never | 1 |
| Seldom | 2 |
| Some of the time | 3 |
| Often | 4 |
103. In the last 2 years have you been to see your doctor about your hearing or noises in your ears or head? **HRDRSNW3**
- | | |
|-----------|---|
| Yes | 1 |
| No | 2 |
104. Do you have difficulty following TV programmes at a volume others find acceptable, WITHOUT any aid to hearing? **HRTVW3**
- | | |
|--------------------------------|---|
| No | 1 |
| Yes, slight difficulty | 2 |
| Yes, moderate difficulty | 3 |
| Yes, great difficulty | 4 |
105. (F17) Now I am going to ask you some questions about your sight.
- Are you totally blind in either eye?
- | | | |
|-----------|---|----------------|
| Yes | 1 | BLINDW3 |
| No | 2 | |
106. (F18) Which eye? **WHEYEW3**
- | | |
|-------------|---|
| Right | 1 |
| Left | 2 |
| Both | 3 |
107. (F19) Do you currently wear eye glasses or contact lenses? **GLSSCOW3**
- | | |
|-----------|---|
| Yes | 1 |
| No | 2 |
108. (When wearing eye glasses or contact lenses) how well can you see? **SPECRDW3**
- | | |
|---|---|
| Well enough to recognise the letters in ordinary newspaper print .. | 1 |
| Only well enough to recognise the headlines | 2 |
| Only well enough to tell if a light is on or off in a room | 3 |
- Yes No
109. (F21) Do you use a magnifying glass for reading? **MAGGLSW3**
- | | |
|---|---|
| 1 | 2 |
|---|---|
110. (F25) Have you noticed that your eyesight is worsening in the last 2 years? **WRSLS2W3**
- | | |
|---|---|
| 1 | 2 |
|---|---|
111. Have you had your eyes checked in the last 2 years? **EYECHKW3**
- | | |
|---|---|
| 1 | 2 |
|---|---|

112. Did you get new glasses or contact lenses? 1 2 **NEWGLSW3**

113. We would now like to ask about your use of various health services. **NURS12W3**
Have you been a resident in a nursing home in the last 12 months? 1 2

114. (G8) How many different times were you in a nursing home in the last 12 months? **HWMNNHW3** —

115. (G9) For about how many days was that in total? — **DYSNHW3**

116. How many times was this for respite care? — **TMRESPW3**

117. In the last 12 months, have you been in hospital at least overnight? **HSP12W3**
Yes 1
No 2

118. (G11) How many different times were you in hospital in the last 12 months? **TMHS12W3** —

119. TABLE

The table contains the following 6 questions:

119.1 For each hospital admission, please answer the following questions.

What was the main medical condition you were admitted to hospital for?

{INTERVIEWER - Show Prompt Card 4}

RADM1W3-RADM10W3

119.2 Please specify other reason for admission.

OTHAD1W3-OTAD10W3

119.3 Did you have an operation while in hospital?

OPADM1W3-OPDM10W3

Yes (1)

No (2)

119.4 See display cards number 3

WHOP1W3-WHOP10W3

What operation did you have?

{INTERVIEWER - Show Prompt Card 4A}

119.5 Please specify other operation.

OTHOP1W3-OTOP10W3

119.6 For about how many days were you in hospital on this occasion?

DYHS1W3-DYHS10W3

Question	119.1	119.2	119.3	119.4
			Yes No	1 code
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___
HospDet .	_____	_____	1 2	___

Question 119.5 119.6

HospDet . _____
HospDet . _____
HospDet . _____
HospDet . _____
HospDet . _____
HospDet . _____
HospDet . _____
HospDet . _____
HospDet . _____
HospDet . _____

120. (G13) Over the last 12 months have you spent more than a week
in bed because of illness or injury (other than in hospital or a
nursing home)? **WKBD12W3**

Yes illness 1
Yes injury 2
Yes both 3
No 4

121. (G14) For about how many days in total was that? **HWMNWKW3**

122. Do you go to a day care or day therapy centre(s), and if so, how
often? **HWMNDCW3**

{INTERVIEWER - Show Prompt Card 9}
Daily 1
4 or more times a week 2
At least once a week 3
At least once a month 4
Less than once a month 5
Irregular, depends on condition 6
When needed 7
Never 8

123. See display cards number 4 **SERUT1W3-SERUT6W3**

I am now going to read a list of services and want you to tell
me if in the last 12 months you have received services from any
of the following agencies.
{INTERVIEWER - Show Prompt Card 10} _ _ _ _ _

124. Please specify help from local government or council **OTHLGAW3**

125. Please specify paid help **OTHPDW3**

126. Please specify other service **OTHSRVW3**

127. Now I have a few questions about your teeth.
{INTERVIEWER - Press 0 then Enter} _

128. (H1) Have you lost all your teeth from your upper jaw? **UPPJAWW3**
Yes 1
No 2

129. (H2) I would like to get some idea of how many teeth you have
in your upper jaw. Including the wisdom teeth, there are 16
teeth making up a complete set of teeth in the upper jaw.
Could you tell me the number of remaining teeth in your upper
jaw? **TTHUPPW3**
Yes No

130. (H3) Do you have a denture or false teeth for your upper jaw? 1 2 **DENUPPW3**
131. (H4) Have you lost all your teeth from your lower jaw? 1 2 **LOWJAWW3**
132. (H5) Including the wisdom teeth, there are 16 teeth making up a complete set of teeth in the lower jaw also. **TTHLOWW3**
 Could you tell me the number of remaining teeth in your lower jaw? —
133. (H6) Do you have a denture or false teeth for your lower jaw? **DENLOWW3**
 Yes 1
 No 2
134. (H13) How long ago did you see a dentist about your teeth, dentures or gums? **SEEDENW3**
 12 months or less 1
 12 months to 2 years 2
 More than 2 years 3
135. Did you make that visit to the dentist for a check-up, or did you go because you were in discomfort or you needed something fixed? **WHYDENW3**
 Check up 1
 In discomfort 2
 Something needed to be fixed 3
136. (H15) For your last course of dental treatment, did you go to a private dentist, a dental technician or a public hospital or public clinic? **TYPDENW3**
 Private dentist 1
 Dental technician 2
 Public hospital or public clinic 3
137. (I1) I am now going to ask you some questions about your weight. Do you wish to answer these questions in stones and pounds or kilograms? **WTKPW3**
 stones and pounds 1
 kilograms 2
138. (I2B) About how much do you weigh now?
 {INTERVIEWER - For example, if 10 stone 12 lbs, type 10.12 or if 8 stone 7 lbs (8 and a half stone), type 8.07} —
139. (I2A) About how much do you weigh now? — **WEIGHTW3**
(IN KGS, CONVERSION DONE)
140. Compared to 12 months ago, do you weigh more now, weigh less now or weigh the same? **WTCHANW3**
 weigh more 1
 weigh less 2
 Same 3
141. How much weight have you gained? (in stones and lbs) —
142. How much weight have you gained? (in kg) — **WGHTGNW3**
(IN KGS)

143. How much weight have you lost? (in stones and lbs) _____

144. How much weight have you lost? (in kg) _____

**WTLOSTW3
(IN KG)**

Questions 145 through 152 :

Meaning of the labels:

Strongly disagree(1)
Moderately disagree(2)
Mildly disagree(3)
Mildly agree(4)
Moderately agree(5)
Strongly agree(6)

145. We would now like to get a little more information on how you feel about your life at present.

How strongly do you agree with the following statements?

{INTERVIEWER - Show Prompt Card 11}

I am the kind of person who likes to give new things a try.	1 2 3 4 5 6	NEWTHGW3
146. I have a sense of direction and purpose in life.	1 2 3 4 5 6	DIRPURW3
147. So far, I have gotten the important things I want in life.	1 2 3 4 5 6	IMPLFW3
148. I gave up trying to make big improvements and changes in my life long ago.	1 2 3 4 5 6	IMPRVW3
149. For me, life has been a continuous process of learning, changing, and growth.	1 2 3 4 5 6	LEACHW3
150. I used to set goals for myself, but now that seems like a waste of time.	1 2 3 4 5 6	GOALWSW3
151. If I could live my life over, I would change almost nothing.	1 2 3 4 5 6	CHANOTW3
152. I enjoy making plans for the future and working to make them a reality.	1 2 3 4 5 6	FUTPLNW3

Correct Incorrect

153. (K1) Now let me ask you a few questions to check your concentration and memory. Some of them will seem very simple, but we have to ask them of everyone to get a comparison. Let's begin.

What day of the week is it?

{INTERVIEWER - Code response}

1 2 **WEEKW3**

154. (K2) What is the date today?

1 2 **DATEW3**

155. (K3) What is the month?

1 2 **MONTHW3**

156. (K4) What is the year?

1 2 **YEARW3**

157. (K5) What season of the year is it?

1 2 **SEASONW3**

158. (K6) Without looking at a watch or clock, what is the time of day?

{INTERVIEWER - Hours and minutes or 24 hour clock acceptable}

1 2 **TIMEW3**

159. (K7) What country are we in?

1 2 **COUNTW3**

160. (K8) What city or town are we in?	1	2	CITYW3
161. (K9) What is the name of the State or Territory?	1	2	STATEW3
162. (K11) What is the name of this suburb?	1	2	SUBURBW3
163. (K12) What floor of the building are we on?	1	2	FLOORW3
164. (K13) What are the names of 2 MAIN ROADS near your home?	1	2	STRNAMW3
165. (K14) What is the name of the Prime Minister of this country?	1	2	PRIMEW3
166. (K15) I am going to name three objects - After I have said them, I want you to repeat them - Remember what they are because I am going to ask you to name them again in a few minutes: ...apple...table...penny... - Respondent remembers Apple?	1	2	THRTHGW3
167. (K16) Respondent remembers Table?	1	2	TBLEW3
168. (K17) Respondent remembers Penny?	1	2	PENNYW3
169. (K18) {INTERVIEWER - After first trial repeat as often as necessary until respondent can say all three (up to 10 trials).} Try to remember these three things because I am going to ask you to recall them in a little while {INTERVIEWER - Record the number of trials}		—	TIMESW3
	Correct Incorrect		
170. (K19) Now, speaking aloud, subtract 7 from 100, and then subtract 7 from the answer you get and keep subtracting 7 until I tell you to stop: Stop after five subtractions {INTERVIEWER - Count only 1 error if respondent makes subtraction error, but subsequent answers are 7 less than the error}. '100 - 7 = 93?'	1	2	MATHSW3
171. 93 - 7 = 86?	1	2	EIGHSXW3
172. 86 - 7 = 79?	1	2	SEVNINW3
173. 79 - 7 = 72?	1	2	SEVTWOW3
174. 72 - 7 = 65?	1	2	SIXFIVW3
175. (K20) Now I am going to spell a word forwards and I want you to spell it backwards. The word is WORLD. {INTERVIEWER - Spell W-O-R-L-D aloud forwards} Spell WORLD backwards - will you do this for me please?			SPELLW3
Yes		1	
No		2	

	Correct	Incorrect	
176. First letter - D?	1	2	DW3
177. Second letter - L?	1	2	LW3
178. Third letter - R?	1	2	RW3
179. Fourth letter - O?	1	2	OW3
180. Fifth letter - W?	1	2	WW3
181. (K21) Now what were the three things I asked you to remember? Respondent remembers Apple?	1	2	REMEMW3
182. (K22) Respondent remembers Table?	1	2	TABLW3
183. (K23) Respondent remembers Penny?	1	2	PENNW3
Questions 184 through 192 : Meaning of the labels:			
Correct	(1)		
Incorrect	(2)		
Incapable of response	(3)		
184. What is this called? {INTERVIEWER - Hold up a pencil - score as correct for pen OR pencil}		1 2 3	PENW3
185. What is this called? {INTERVIEWER - Point to watch}		1 2 3	WATCHW3
186. Would you repeat the following phrase -- 'No if's, and's, or but's' {INTERVIEWER - Allow only one trial. CORRECT requires an accurately articulated repetition}		1 2 3	PHRASEW3
187. Read the words on this page and then do what it says. {INTERVIEWER - Show Prompt Card 12. Code as correct if respondent closes his-her eyes}		1 2 3	RDPAGEW3
188. [INTERVIEWER - Read full statement below and then hand respondent a blank piece of paper. Do not repeat instructions or coach.] Take this piece of paper in your right hand, fold the paper in half with both hands, and put the paper down on your lap. Takes paper in RIGHT hand?		1 2 3	PAPTSTW3
189. Folds paper in half with both hands?		1 2 3	PAPHLFW3
190. Puts paper on lap?		1 2 3	PAPLAPW3
191. Would you please write any complete sentence on that piece of paper for me. {INTERVIEWER - Sentence should have a subject and a verb and make sense. Spelling and grammatical errors are acceptable.		1 2 3	WRITSNW3
192. Please copy this design on the same piece of paper. {INTERVIEWER - show Prompt Card 13. Code as correct if 2 convex five-sided figures and intersection makes a four-sided figure}		1 2 3	DESIGNW3

193. (K30) New Year's Day falls on what date?	NEWYRW3
First of January	1
First day of New Year	2
A wrong date	3
Does not know, no codable reply, refusal	4
Not asked	5
194. (K35) {INTERVIEWER - For the next 3 questions, if response is vague, say - Could you tell me a bit more?} In what way are an apple and a banana alike?	BANANAW3
Correct abstraction such as both fruit	1
Partially correct, gives concrete similarities such as both grow, can eat both, both have peel	2
Incorrect	3
195. (K36) In what way are a boat and a car alike?	BOATW3
Correct abstraction such as both are a means of transport	1
Partially correct, gives concrete similarities such as both have seats	2
Incorrect, only mentioned ways different	3
196. (K37) In what way are an egg and a seed alike?	EGGW3
Correct abstraction such as beginnings of life, first stage of development	1
Partially correct, gives concrete similarities such as things grow from both	2
Incorrect - not alike	3
MMW1W3 TO MM40W3 EQUIVALENT TO Q153 TO Q192 AND CODED FOR COMPUTATION (1=CORRECT 0=INCORRECT)	
SUBTRACT TO MMSEW3 GIVES COMPOSITE MINIMENTAL SCORE	
MMSEW3 = FULL MINIMENTAL SCORE	
197. (L1) Now I would like some information about how you sleep.	
How often do you have trouble falling asleep?	
{INTERVIEWER - Show Prompt Card 14}	TRBSLPW3
Never	1
Rarely	2
Sometimes	3
Often	4
Almost always	5
198. (L2) How often do you have trouble with waking up during the night?	WAKNTW3
{INTERVIEWER - Show Prompt Card 14}	
Never	1
Rarely	2
Sometimes	3
Often	4
Almost always	5
199. (L6) How often do you have trouble with waking up earlier than intended and not being able to fall asleep again at all?	WAKEARW3
{INTERVIEWER - Show Prompt Card 14}	
Never	1
Rarely	2
Sometimes	3
Often	4
Almost always	5
200. (L10) How many days per week would you fall asleep unintentionally (e.g. while watching TV, reading, or riding in a car?)	UNINNPW3
No days	1
One or two days	2
Three or four days	3
Five or more days	4

201. (L11) Compared to one year ago, do you have sleep problems more now, less now, or is your sleeping pattern about the same? **SLP1YRW3**
- More now 1
Less now 2
About the same 3
202. (L12) How often do you usually take a sedative or sleeping pill that has been prescribed by a doctor to help you sleep? **PRSEDW3**
- Nightly 1
A few times per week 2
A few times per month 3
Less often 4
Never 5
- Yes No
203. (L23) Do you usually sleep with your partner/spouse? 1 2 **SLPARRW3**
204. (L24) Is your sleep normally disturbed by your partner? 1 2 **SLPPTW3**
205. Is this due to snoring, twitching, both of these or some other reason? **SLPTRSW3**
- Snoring 1
Twitching 2
Both 3
Other 4
- Yes No
206. (M1) I would now like to ask about your physical functioning.
- Are you able to walk up and down the stairs to a first floor of a building without help? 1 2 **STRS2FW3**
207. (M2) Are you able to walk half a mile without help? 1 2 **WLKHLFW3**
- Questions 208 through 212 :
Meaning of the labels:
- No difficulty at all(1)
A little difficulty(2)
Some difficulty(3)
A lot of difficulty(4)
Just unable to do it(5)
208. (M3) Now I am going to ask you how difficult it is, on the average, to do similar kinds of activities.
{INTERVIEWER - Show Prompt Card 15}
- How much difficulty, if any, do you have pulling or pushing large objects like a living room chair?
- 1 2 3 4 5 **PSHPLLW3**
209. (M4) What about stooping, crouching or kneeling? 1 2 3 4 5 **STPCRKW3**
210. (M5) Lifting or carrying weights over 10 pounds (4 kilograms) like a heavy bag of groceries? 1 2 3 4 5 **LFT10W3**

211. (M6) Reaching or extending your arms above shoulder level? 1 2 3 4 5 **RCHOVW3**

212. (M7) Either writing or handling or fingering small objects? 1 2 3 4 5 **DIFSMJW3**

213. (M8) I am now going to ask you about some everyday activities.
I'd like to ask if you had any difficulties or have had any help
in the last 12 months from either a person or from some
equipment or device in doing any of these activities (apart from
when you may have been in a hospital or a nursing home).
{INTERVIEWER - Press 0 then Enter}

214. TABLE

The table contains the following 6 questions:

- 214.1 (M10) In \$DESC, have you received help from a person, special equipment or both?
- | | | |
|-------------------------|-----|--------------------------|
| No Help | (1) | ADL1HPW3-ADL8HPW3 |
| Person | (2) | |
| Special equipment | (3) | |
| Both | (4) | |
- 214.2 (M11) Do you still require this help?
- | | | |
|-----------|-----|--------------------------|
| Yes | (1) | HLPST1W3-HLPST8W3 |
| No | (2) | |
- 214.3 See display cards number 5
(M12) Is (was) this help provided by relatives or friends? If so, who is (was) your main helper?
- MNHP1W3-MNHP8W3**
- 214.4 See display cards number 6
(M13) Does (did) any other relative or friend help you?
{INTERVIEWER - Type a space before each code}
- OTHP1AW3-OTHP1FW3**
OTHP2AW3-OTHP2EW3
- 214.5 (M14) Do (did) you receive any other help such as from a care organisation?
{INTERVIEWER - Show Prompt Card 10}
- | | | |
|--|-----|--------------------------|
| Royal District Nursing Society | (1) | ORHP2AW3-ORHP4AW3 |
| Domiciliary Care | (2) | |
| Local Government or Council | (3) | |
| Meals on Wheels | (4) | |
| Private home care from nursing organisations | (5) | |
| Paid help | (6) | ORHP5AW3-ORHP5BW3 |
| Other help | (7) | ORHP6AW3-ORHP6CW3 |
| None | (8) | ORHP7AW3-ORHP8AW3 |
- 214.6 (M15) (With this help), how much difficulty on average do you have doing this activity?
- | | | |
|----------------------------|-----|--------------------------|
| No difficulty at all | (1) | |
| A little difficulty | (2) | |
| Some difficulty | (3) | |
| A lot of difficulty | (4) | ADLDF1W3-ADLDF8W3 |

Question	214.1	214.2	214.3
	1 code	Yes No	1 code
ADLAct ..	1 2 3 4	1 2	—
ADLAct ..	1 2 3 4	1 2	—
ADLAct ..	1 2 3 4	1 2	—
ADLAct ..	1 2 3 4	1 2	—
ADLAct ..	1 2 3 4	1 2	—
ADLAct ..	1 2 3 4	1 2	—
ADLAct ..	1 2 3 4	1 2	—
ADLAct ..	1 2 3 4	1 2	—

max 24

[illegible]***IADLPRB***

The table contains the following 6 questions:

IADL1W3-IADL10W3

IHP1W3-IHP10W3

IMNHP1W3-IMNH10W3

(see table below)

IORG1AW3-IORG10AW3
IORG2BW3-IORG4BW3
IORG10BW3

IOR10AW3, IOR10BW3

IDIFF1W3-IDIF10W3

[illegible]

Question
216.4

max 24

[illegible][illegible]

217. Now I would like to ask some questions about your relationships
with family and friends.

{INTERVIEWER - Press 0 and Enter}

Questions 218 through 223 :

Meaning of the labels:

More than once per week(1)
Once a week(2)
Two or three times a month(3)
Almost once a month(4)
Less than once a month(5)
Never(6)

218. (01) Think of your children and/or children-in-law who do
not live with you. In the past twelve months, how often did
you have PERSONAL CONTACT with at least one of them?

{INTERVIEWER - Show Prompt Card 16}

1 2 3 4 5 6 **CONTCHW3**

219. (02) Again thinking of your children and/or children-in-law
who do not live with you. In the past twelve months, how
often did you have PHONE CONTACT with at least one of them?

{INTERVIEWER - Show Prompt Card 16}

1 2 3 4 5 6 **PHCNCHW3**

220. (03) Again thinking of your children and/or children-in-law
who do not live with you. In the past twelve months, how
often did you receive MAIL from at least one of them?

{INTERVIEWER - Show Prompt Card 16}

1 2 3 4 5 6 **MLFRCHW3**

221. (01a) Think of your grandchildren (who do not live with
you). In the past twelve months, how often did you have
PERSONAL CONTACT with at least one of them?

{INTERVIEWER - Show Prompt Card 16}

1 2 3 4 5 6

CONTGDW3

222. (02a) Again thinking of your grandchildren (who do not live
with you). In the past twelve months, how often did you have
PHONE CONTACT with at least one of them?

{INTERVIEWER - Show Prompt Card 16}

1 2 3 4 5 6

PHCNGDW3

223. (03a) Again thinking of your grandchildren (who do not live
with you). In the past twelve months, how often did you
receive MAIL from at least one of them?

{INTERVIEWER - Show Prompt Card 16}

1 2 3 4 5 6

MLFRGDW3

224. (05) Do you agree or disagree with the following statement?

'Older people should be able to depend on their adult CHILDREN
for the help they need?'

{INTERVIEWER - Show Prompt Card 17}

Strongly agree 1
Agree 2
Disagree 3
Strongly disagree 4

DEPCHDW3

225. (05a) Do you agree or disagree with the following statement?

'Older people should be able to depend on their adult
GRANDCHILDREN for the help they need?'

{INTERVIEWER - Show Prompt Card 17}

Strongly agree 1
Agree 2
Disagree 3
Strongly disagree 4

DEPGDW3

226. (06) If you (and your husband or wife or partner) had health problems which made you very dependent on others, do you think you would WANT to:?

Stay at home with outside help	1	SUPPRFW3
(Move in with children)	2	
Move to a home for the aged	3	
Move to a nursing home	4	

Questions 227 through 238 :
Meaning of the labels:

Never	(1)
Rarely	(2)
Sometimes	(3)
Often	(4)

227. (07) As you know, parents and children sometimes support each other in different ways. Do you help your children and/or children-in-law in any of the following ways?
{INTERVIEWER - Show Prompt Card 18}

Give gifts, apart from money?	1 2 3 4	GIFT4CW3
-------------------------------	---------	-----------------

228. (08) Help out with money?	1 2 3 4	MONY4CW3
---------------------------------	---------	-----------------

229. (09) Help out when someone is ill?	1 2 3 4	CHDILLW3
--	---------	-----------------

230. (010) Help keep house or fix things around the house?	1 2 3 4	HSMNCHW3
---	---------	-----------------

231. (011) Take care of grandchildren or babysit for awhile when parents are out?	1 2 3 4	SITGRDW3
--	---------	-----------------

232. (012) Do your children and/or children-in-law support you in any of the following ways?
{INTERVIEWER - Show Prompt Card 18}

When you are ill (or when your husband or wife is ill)?	1 2 3 4	CHHPILW3
---	---------	-----------------

233. (013) Give gifts, apart from money?	1 2 3 4	GIFFRCW3
---	---------	-----------------

234. (014) Shop or run errands for you?	1 2 3 4	CHSHOPW3
--	---------	-----------------

235. (015) Help out with money?	1 2 3 4	MONFRCW3
----------------------------------	---------	-----------------

236. (016) Help keep house or fix things around the house for you?	1 2 3 4	HSMNTYW3
---	---------	-----------------

237. (017) Prepare meals for you?	1 2 3 4	CHPRMLW3
------------------------------------	---------	-----------------

238. (018) Drive you places such as doctor, shopping, church?	1 2 3 4	CHDRVEW3
--	---------	-----------------

239. (028) INCLUDING YOUR PARTNER, from all the people you know, is there any one special person that you feel very close and intimate with - someone you share confidences and feelings with, someone you feel you can depend on?

Yes	1	CONFW3
No	2	

240. See display cards number 9
(029) What is their relationship to you? **CONRELW3**

241. (028a) Again, from all the people you know, is there any OTHER special person that you feel very close and intimate with - someone else you share confidences and feelings with, someone else you feel you can depend on? **OTCNFW3**

Yes 1

No 2

242. See display cards number 10 **OTCNRLW3**

(029a) What is the relationship of this other person? —

243. (030) Including persons in your household, is there someone you could call on to help around the house or help to take care of you if you were sick? **HSHLCRW3**

Yes 1

No 2

244. (031) Who is that? **CARER1W3 - CARER3W3**

Spouse 1

Other household member 2

Other relative 3

Other friend 4

Community or government agency 5

Paid private source 6

Other 7

245. See display cards number 11 **MSTHLPW3**

(034) If you needed help in the last year, who has been most helpful with daily tasks like grocery shopping, house cleaning, cooking, telephoning or taking you places? —

246. (038j) At present, when it comes to making major family decisions, who has the final say? **FAMDECW3**

(Major decisions mean things like when to retire, where to live and how much money to spend on major purchases)

You 1

Your partner/spouse 2

You and your partner/spouse equally 3

Questions 247 through 252 :
Meaning of the labels:

Always agree(1)

Almost always agree(2)

Occasionally disagree(3)

Frequently disagree(4)

Almost always disagree(5)

Always disagree(6)

247. Most persons have some disagreements in their relationships, and we are interested to see how you deal with various matters.

Please indicate the approximate extent of agreement or disagreement between you and your partner for each item on the following list.

{INTERVIEWER - Show Prompt Card 19}

Handling family finances 1 2 3 4 5 6 **FAMFINW3**

248. Matters of recreation 1 2 3 4 5 6 **MATRECW3**

249. Friends	1 2 3 4 5 6	FRIENDW3
250. Ways of relating to children	1 2 3 4 5 6	DEALCHW3
251. Making major decisions	1 2 3 4 5 6	MAJDECW3
252. Household tasks	1 2 3 4 5 6	HSTASKW3

Questions 253 through 257 :

Meaning of the labels:

All the time(1)
Most of the time(2)
More often than not(3)
Occasionally(4)
Rarely(5)
Never(6)

253. [INTERVIEWER - Show Prompt Card 20] In general, how often do you think that things between you and your partner are going well?	1 2 3 4 5 6	RELWELW3
254. How often do you and your partner quarrel?	1 2 3 4 5 6	QUARW3
255. How often do you or your partner leave the house after a fight?	1 2 3 4 5 6	LEAVFTW3
256. How often do you and your partner 'get on each other's nerves'?	1 2 3 4 5 6	ONNERVW3
257. How often do you laugh together?	1 2 3 4 5 6	LAUGHW3

Yes No

258. (P1) The next few questions are about major events that may have
taken place in your life in the last two years.

Have you been a victim of a serious physical attack or assault in
the last two years?

1 2 **ASSLTW3**

259. (P19) Have you been robbed or was your home burglarised in the
last two years?

1 2 **ROB3YW3**

260. (P23) Have you lost anyone close to you through death in the last
2 years?

1 2 **BRVW3**

261. (P24) Who was it that died?

WH01W3-WH03W3

Spouse 1
Child 2
Child-in-law 3
Grandchild 4
Sibling 5
Other relative 6
Friend 7

262. (Q1) I now have a few questions about smoking.

Do you currently smoke cigarettes?

SMOKERW3

Yes 1
No 2

263. (Q2) How many cigarettes do you usually smoke a day? — **CIGDAYW3**

264. (Q7) Do you currently smoke a pipe or cigars? **PIPCIGW3**
Yes 1
No 2

265. (Q9) The next few questions are about beverages that contain alcohol. **FRQALW3**

How often do you have a drink containing alcohol?

Never 1
Monthly or less 2
Two to four times a month 3
Two to three times a week 4
Four or more times a week 5

266. (Q10) { INTERVIEWER - Show Prompt Card 21 for next question}
How many standard drinks containing alcohol do you have on a typical day when you are drinking? **NOSTDRW3**
One or two 1
Three or four 2
Five or six 3
Seven to nine 4
Ten or more 5

267. (Q11) {INTERVIEWER - Show Prompt Card 22 for next question}
How often do you have six or more drinks on one occasion? **FR6PLSW3**
Never 1
Less than monthly 2
Monthly 3
Weekly 4
Daily or almost daily 5

268. Now I have some questions about how you spend your time. **VIGEXCW3**
How many times did you engage in vigorous exercise in the past two weeks? By vigorous exercise, I mean exercise which made you breathe harder or puff and pant - things like tennis or jogging. —

269. (R7) How many times did you walk for recreation or exercise in the past two weeks? **HWALKW3** —

270. When we interviewed you 2 years ago, you indicated some clubs of which you were a member. We would like to check if you are still a member of these clubs.
{INTERVIEWER - Press 0 and enter} —

271. TABLE **STIL1W3-STIL34W3**

The table contains the following 1 questions:

271.1 Are you still a member of \$CLUBDESC ? **(INCLUDED MEMBER1-MEMBER34 FROM W1)**
Yes (1)
No (2)

Yes No

[illegible]

272. (R12) How many group meetings or gatherings did you go to in the past month?

MTGMTHW3

273. (R13) Are you presently an officer of any of the clubs you belong to such as president, secretary, treasurer?

PRESECW3

Yes	1
No	2

274. (R14) How many different offices do you hold (in different clubs)?

HWMNOFW3

275. (R16) In guiding your life, would you say that religion is very important, somewhat important or not at all important?

RELGUIW3

Very important	1
Somewhat important	2
Not at all important	3
No opinion	4

276. (R17) I am going to ask you some questions about a number of activities in which you may participate, some of which I have mentioned before. I now want you to tell me how often you participate in each activity in a typical 3 month period. If you like, you could think about the last 3 months.

AAP1W3

How often have you prepared a main meal?
(Needs to play a substantial part in the organisation,
preparation and cooking of a main meal, not just snacks)

Never 1
Less than once a week 2
One to two times a week 3
Most days 4

277. (R18) How often have you washed the dishes? **AAP2W3**
 (Must do it all or share equally eg. washing or wiping and putting away, not just rinsing occasional items)
 Less than once a week 1
 One or two days a week 2
 Most days 3
 Every day 4

278. (R19) How often have you washed clothes? **AAP3W3**
 (Organisation of washing and drying of own clothes, whether in a washing machine, by hand or at a laundrette)
 Never 1
 About once a month 2
 About once a fortnight 3
 Once a week or more 4

279. (R20) How often have you done light housework? **AAP4W3**
 (Such as dusting, polishing, sweeping, tidying up)
 Never 1
 Once a fortnight or less 2
 About once a week 3
 Several days a week 4

280. (R21) How often have you done heavy housework? **AAP5W3**
 (Taking out the garbage, cleaning floors, vacuuming, washing windows, moving chairs)
 Never 1
 About once a month 2
 About once a fortnight 3
 Once a week or more 4

281. (R22) How many hours of voluntary or paid employment have you done? **AAP6W3**
 None 1
 Up to ten hours a week 2
 Ten to thirty hours a week 3
 More than thirty hours a week 4

Questions 282 and 283 :
 Meaning of the labels:

Never(1)
 About once a month(2)
 About once a fortnight(3)
 Once a week or more(4)

282. (R23) How often have you cared for other family members? **AAP7W3**
 (Caring for a sick relative, baby sitting, caring for a spouse etc) 1 2 3 4

283. (R24) How often have you done household shopping? **AAP8W3**
 (Must play a substantial role in the organisation and buying of the shopping eg. groceries, fruit and vegetables - Also includes paying household bills) 1 2 3 4

284. (R25) How often have you done personal shopping? **AAP9W3**
 (Must play a substantial role in the organisation and buying of the shopping eg. clothing, toiletries, gifts)
 Never 1
 Once in three months 2
 About once a month 3
 Once a fortnight or more 4

Questions 285 and 286 :

Meaning of the labels:

- Never(1)
About once a month(2)
About once a fortnight(3)
Once a week or more(4)
285. (R26) How often have you done light gardening? (Weeding, watering, sweeping paths, potting) 1 2 3 4 **AAP10W3**
286. (R27) How often have you done heavy gardening? (Digging garden beds pruning, mowing lawns) 1 2 3 4 **AAP11W3**
287. (R28) How often have you done household and/or car maintenance? **AAP12W3**
- (Cleaning gutters, painting, doing minor repairs, servicing and/or washing the car)
- Never 1
Once in 3 months 2
About once a month 3
Once a fortnight or more 4
288. (R29) How often have you needed to drive a car or organise your own transport? **AAP13W3**
- (The emphasis is on the organisation of transport, not the journey itself, includes driving own car, catching bus or train, calling taxi etc. Excludes transport for the person organised by someone else.)
- Never 1
Up to once a month 2
Up to once a fortnight 3
Once a week or more 4
289. (R33) How often have you invited people to your home? **AAP14W3**
- (Implies either casual or formal social contact eg. having people to dinner, inviting people for a cup of tea, card evenings - Includes standing invitations to family and close friends.)
- Less than once a fortnight 1
About once a fortnight 2
About once a week 3
More than once a week 4
290. (R30) How often have you spent some time on a hobby? **AAP15W3**
- (Must require some active participation and thought e.g. knitting, crosswords, painting, gardening, games, letter writing, not just watching television)
- Never 1
About once a month 2
About once a fortnight 3
Once a week or more 4
291. (R31) How many hours have you spent reading books, magazines or newspapers? **AAP16W3**
- Less than two hours a week 1
Two to five hours a week 2
Five to ten hours a week 3
Over ten hours a week 4

292. (R32) How many telephone calls have you made to friends or family?
(Emphasis is on making calls NOT receiving calls) **AAP17W3**
- | | |
|--------------------------------|---|
| None | 1 |
| Up to three calls a week | 2 |
| Four to ten calls a week | 3 |
| Over ten calls a week | 4 |
293. (R34) How much time have you spent watching television or listening to the radio?
(Emphasis is on watching/listening, not just having the TV/radio on in the background while doing other things) **AAP18W3**
- | | |
|---------------------------------|---|
| Less than one hour a day | 1 |
| One to three hours a day | 2 |
| Three to five hours a day | 3 |
| Over five hours a day | 4 |
294. (R35) How often have you participated in social activities at a centre such as a club, a church, or a community centre?
(Bingo, senior citizens, RSL, a hotel, self-education courses) **AAP19W3**
- | | |
|------------------------------|---|
| Less than once a month | 1 |
| About once a month | 2 |
| About once a week | 3 |
| More than once a week | 4 |
- Questions 295 and 296 :
Meaning of the labels:
- | | |
|------------------------------|-----|
| Never | (1) |
| About once a month | (2) |
| About once a fortnight | (3) |
| Once a week or more | (4) |
295. (R36) How often have you attended religious services or meetings? 1 2 3 4 **AAP20W3**
296. (R37) How often have you participated in an outdoor social activity?
(BBQs, picnics, spectator sports etc.) 1 2 3 4 **AAP21W3**
297. (R38) How often have you spent some time outdoors participating in a recreational or sporting activity?
(Bowls, fishing, golf etc. Excludes spectator sports) **AAP22W3**
- | | |
|-----------------------------|---|
| Never | 1 |
| About once a month | 2 |
| About once a week | 3 |
| More than once a week | 4 |
298. (R39) How often have you walked outdoors for 15 minutes or more?
(Sustained walking for about 1 mile. Short stops for breath are allowed. Can include walking to the shops, provided it is far enough.) **AAP23W3**
- | | |
|----------------------------------|---|
| About once a month or less | 1 |
| About once a fortnight | 2 |
| About once a week | 3 |
| Most days | 4 |

299. (R40) How often have you gone for a drive or been on an outing? **AAP24W3**
 (The common factor is an outing for pleasure e.g. by bus, train or car, excludes routine trips for a purpose such as shopping or visiting friends)
 Never 1
 About once a month 2
 About once a fortnight 3
 Once a week or more 4
300. (R41) Do you own a car? **OWNCARW3**
 Yes 1
 No 2
301. I would now like to ask about your driving habits. **HWOFDRW3**
 How often do you drive a motor vehicle?
 At least once a day 1
 Once or twice a week 2
 Once or twice a month 3
 Less than once or twice a month 4
 Never 5
302. In the past twelve months, have you CHANGED your driving habits because of concerns related to your age or your health? **CHDRVW3**
 Yes 1
 No 2
303. Please specify how you have changed your driving habits. **SPECDRW3**

304. (E24) How often do you cross the street as a pedestrian? **CRSTRW3**
 At least once a day 1
 Once or twice a week 2
 Once or twice a month 3
 Less than once or twice a month 4
 Never 5
305. Now I would like to ask you about your housing and finances.
 {INTERVIEWER - Press 0 and enter} —
306. (T1) Is this house, flat or unit being rented by you or any other usual resident of the household? **RENTHSW3**
 Yes 1
 No 2
307. (T2) Who is the rent paid to? **LANDLDW3**
 South Australian Housing Trust 1
 Person in dwelling 2
 Landlord or Real Estate Agent 3
 Other 4
308. (T3) What is the total rent each week (total dollars)? **TOTRNTW3**

309. (T4) Is this house, flat or unit being paid off or is it owned? **OWNPAYW3**
 Yes, being paid off 1
 Yes, owned 2
 No 3

310. (T5) What is the total repayment each week (total dollars)? _____ **REPAYW3**
311. (T6) In which of these categories does the market value of your house, flat or unit fall? **MKTVALW3**
 {INTERVIEWER - Show Prompt Card 23}
 Up to seventyfour thousand 1
 From seventyfive thousand to one hundred thousand 2
 From onehundred and one thousand to one hundred and fifty thousand 3
 From one hundred and fifty thousand to two hundred thousand 4
 Over two hundred thousand 5
312. (T9) How many main rooms do you have in this house, flat or unit? (Do not include bathrooms, porches, balconies or foyers) _____ **NOMNRMW3**
313. (T12) Do you intend to move house (again)? **MVAGNW3**
 Yes 1
 No 2
314. (T13) For what reason do you intend to move (again)? **REASMW3**
 More or better personal care at new home 1
 Closer to things or people 2
 Better neighbourhood 3
 Cost of rent or mortgage or upkeep and repairs too high 4
 Modified or better designed or more suitable dwelling 5
 Family changes such as bereavement or to live with family 6
 Other 7
315. (T14) Have you put your name down for any special aged accommodation or retirement village in the last two years? **MVSPACW3**
 Yes 1
 No 2
316. (T16) {INTERVIEWER - Show Prompt Card 24} **CONC1W3 - CONC3W3**
 This card lists various benefit cards.
 Which of these do you currently hold?
 {INTERVIEWER - Prompt for all types}
 Pensioner health benefits and concession card 1
 Commonwealth Seniors Health card 2
 Other 3
 None 4
317. (T16a) Please specify other benefit(s) **OTHBENW3**

318. See display cards number 12 **SRC1W3 - SRC5W3**
 (T15) {INTERVIEWER - Show Prompt Card 25}
 This card lists various sources of income. Which of these do you (and your partner) currently receive as income?
 List all sources of income. _ _ _ _ _
319. See display cards number 13 **TTINCYW3**
 (T17) If we include the income from all these sources, and add all of your (and your partner's) earnings, in which of these groups would your total income be before tax or anything else is taken out?
 {INTERVIEWER - Show Prompt Card 26}

Questions 320 and 321 :

Meaning of the labels:

Very well(1)
Fairly well(2)
Poorly(3)

320. (T21) How well does the amount of money you have take care of your needs? **NDSMETW3**
1 2 3

321. (T22) How well does the amount of money you have take care of your large annual expenses? **LRGANNW3**
1 2 3

322. (T23) Do you usually have enough to buy those little extras i.e. small luxuries? **SMLUXW3**
Yes 1
No 2

323. See display cards number 14 **TTLASSW3**
(T24) Suppose you needed money quickly, and you cashed in all of your (and your spouse's) cheque and savings accounts, any stocks and bonds, and real estate (other than your principal home).
About how much would this amount to?
{INTERVIEWER - Show Prompt Card 27 and enter relevant code} _

324. How many years of formal schooling, including tertiary, did you complete? **FORMSCW3**
_

325. (U5) Do you currently work in a paid job? **CURRWKW3**
Yes 1
No 2

326. How many hours did you work last week? **WKHRLW3**
_

327. That concludes the questions we have to ask of you. Thank you very much for your time, and continuing contribution to our study. **PROXREL to
CONFCNV
are proxy
variables. See
separate proxy
questionnaire**

{INTERVIEWER - Press 0 and Enter.}

The following display cards are used

Display card number 1

House (1)
Home unit or flat (2)
Granny flat with own kitchen (3)
Granny flat without kitchen (4)
Non-self contained unit (5)
Bed sitter room (6)
Other community living (7)
Retirement village (8)
Private rest home (9)
Hostel (10)
Nursing home (11)
Hospital (12)
Mental institution (13)
Boarding house (14)
Other institution (15)

Display card number 2

Spouse	(1)
Son	(2)
Daughter	(3)
Son-in-law	(4)
Daughter-in-law	(5)
Grandchild	(6)
Parent	(7)
Parent-in-law	(8)
Brother or sister	(9)
Brother or sister-in-law	(10)
Nephew or niece	(11)
Cousin	(12)
Uncle or aunt	(13)
Great grandchild	(14)
Other relative	(15)
Friend	(16)
Boarder or lodger	(17)
Other	(18)

Display card number 3

Cataract removal	(1)
Coronary by-pass	(2)
Gall Bladder removal	(3)
Glaucoma operation	(4)
Hernia repair	(5)
Hip replacement	(6)
Hysterectomy	(7)
Knee replacement	(8)
Lens implant	(9)
Pacemaker fitted	(10)
Prostate operation	(11)
Other operation	(12)

Display card number 4

Royal District Nursing Society	(1)
Domiciliary Care	(2)
Local Government or Council (to specify)	(3)
Meals on Wheels	(4)
Private home care from nursing organisations	(5)
Paid Help (to specify)	(6)
Other help (to specify)	(7)
None	(8)
Royal Society for the Blind	(9)
Australian Hearing Service (formerly National Acoustic Laboratory)	(10)

Display card number 5

No-one	(1)
Spouse	(2)
Son	(3)
Daughter	(4)
Son-in-law	(5)
Daughter-in-law	(6)
Grandchild	(7)
Parent	(8)
Parent-in-law	(9)
Brother	(10)
Sister	(11)
Brother-in-law	(12)
Sister-in-law	(13)
Nephew	(14)
Niece	(15)
Cousin	(16)
Uncle	(17)
Aunt	(18)
Great Grandchild	(19)
Other Relative	(20)
Friend	(21)

Neighbour	(22)
Boarder or lodger	(23)
Other	(24)
Display card number 6	
No	(1)
Spouse	(2)
Son	(3)
Daughter	(4)
Son-in-law	(5)
Daughter-in-law	(6)
Grandchild	(7)
Parent	(8)
Parent-in-law	(9)
Brother	(10)
Sister	(11)
Brother-in-law	(12)
Sister-in-law	(13)
Nephew	(14)
Niece	(15)
Cousin	(16)
Uncle	(17)
Aunt	(18)
Great Grandchild	(19)
Other Relative	(20)
Friend	(21)
Neighbour	(22)
Boarder or lodger	(23)
Other	(24)
Display card number 7	
No-one	(1)
Spouse	(2)
Son	(3)
Daughter	(4)
Son-in-law	(5)
Daughter-in-law	(6)
Grandchild	(7)
Parent	(8)
Parent-in-law	(9)
Brother	(10)
Sister	(11)
Brother-in-law	(12)
Sister-in-law	(13)
Nephew	(14)
Niece	(15)
Cousin	(16)
Uncle	(17)
Aunt	(18)
Great Grandchild	(19)
Other Relative	(20)
Friend	(21)
Neighbour	(22)
Boarder or lodger	(23)
Other	(24)
Display card number 8	
No	(1)
Spouse	(2)
Son	(3)
Daughter	(4)
Son-in-law	(5)
Daughter-in-law	(6)
Grandchild	(7)
Parent	(8)
Parent-in-law	(9)
Brother	(10)
Sister	(11)

Brother-in-law	(12)
Sister-in-law	(13)
Nephew	(14)
Niece	(15)
Cousin	(16)
Uncle	(17)
Aunt	(18)
Great Grandchild	(19)
Other Relative	(20)
Friend	(21)
Neighbour	(22)
Boarder or lodger	(23)
Other	(24)
Display card number 9	
Spouse	(1)
Daughter	(2)
Daughter-in-law	(3)
Son	(4)
Son-in-law	(5)
Brother	(6)
Sister	(7)
Other male relative	(8)
Other female relative	(9)
Male friend	(10)
Female friend	(11)
Display card number 10	
Spouse	(1)
Daughter	(2)
Daughter-in-law	(3)
Son	(4)
Son-in-law	(5)
Brother	(6)
Sister	(7)
Other male relative	(8)
Other female relative	(9)
Male friend	(10)
Female friend	(11)
Display card number 11	
Spouse	(1)
Daughter	(2)
Son	(3)
Brother or sister	(4)
Other relative	(5)
Neighbour	(6)
Friend	(7)
Other	(8)
No one	(9)
Display card number 12	
Wages or salary	(1)
Superannuation	(2)
Income from your own business or partnership	(3)
Income from interest, dividends or rent	(4)
Workers compensation	(5)
Age pension	(6)
Carer's pension	(7)
Disability support pension	(8)
Widowed person's allowance	(9)
Overseas pension	(10)
Repat Pension	(11)
Repat TPI	(12)
Other pension	(13)
Other	(14)

Display card number 13

- Up to 5,000 dollars pa (1)
- Between 5,000 & 8,500 dollars pa (2)
- Between 8,500 & 12,000 dollars pa (3)
- Between 12,000 & 15,000 dollars pa (4)
- Between 15,000 & 20,000 dollars pa (5)
- Between 20,001 & 30,000 dollars pa (6)
- Between 30,000 & 40,000 dollars pa (7)
- Between 40,000 & 50,000 dollars pa (8)
- More than 50,000 pa (9)

Display card number 14

- Less than 999 (1)
- Between 1,000 and 4,999 dollars (2)
- Between 5,000 and 9,999 dollars (3)
- Between 10,000 and 19,999 dollars (4)
- Between 20,000 and 49,999 dollars (5)
- Between 50,000 and 99,999 dollars (6)
- Between 100,000 and 199,999 dollars (7)
- Between 200,000 and 499,999 dollars (8)
- More than 500,000 dollars (9)