DATE Ø7

Date questionnaire completed: ⌊⌊⌋/⌊⌊⌋/⌊⌊⌋
mo dy yr

PEOPLE'S HEALTH CAN AFFECT MANY ASPECTS OF

THEIR LIVES. WE ARE INTERESTED IN HOW YOUR

HEALTH IS AFFECTING YOUR LIFE. ON THE

FOLLOWING PAGES ARE A NUMBER OF QUESTIONS

ABOUT DIFFERENT AREAS OF YOUR LIFE. PLEASE

READ EACH QUESTION CAREFULLY.

SINCE THERE ARE NO RIGHT OR WRONG

ANSWERS, USUALLY YOUR FIRST THOUGHT IS THE

BEST. WE ARE INTERESTED IN HOW <u>YOU FEEL</u>

<u>ABOUT YOUR LIFE.</u>

CAST

┌───┐
│ **PLEASE CHECK THE BOX ON THE LEFT**   │
│ **NEXT TO THE STATEMENT THAT BEST**   │
│ **DESCRIBES YOUR ANSWER TO THE QUESTION**   │
└───┘

1. HOW MUCH OF THE TIME DURING THE PAST MONTH, HAS YOUR <u>HEALTH</u> <u>LIMITED YOUR SOCIAL ACTIVITIES</u> (LIKE VISITING WITH FRIENDS OR CLOSE RELATIVES)?

   LIMIT∅7

   ☐₁ All of the time
   ☐₂ Most of the time
   ☐₃ A good bit of the time
   ☐₄ Some of the time
   ☐₅ A little of the time
   ☐₆ None of the time

2. ALL THINGS CONSIDERED, HOW SATISFIED HAVE YOU BEEN WITH YOUR SOCIAL LIFE <u>DURING THE LAST MONTH</u>?

   SOCIAL∅7

   ☐₁ Very satisfied
   ☐₂ Fairly satisfied
   ☐₃ Neutral or mixed feelings
   ☐₄ Somewhat dissatisfied
   ☐₅ Very dissatisfied

Please go to next page

3. DID YOU FEEL HEALTHY ENOUGH TO DO THE THINGS YOU WANTED TO DO DURING THE LAST MONTH?

HEALTH 07

☐₁ Yes-definitely so

☐₂ For the most part

☐₃ Health problems limited me in some important ways

☐₄ I was only healthy enough to take care of myself

☐₅ I needed someone to help me with most or all of the things I had to do

4. FOR HOW LONG (IF AT ALL) HAS YOUR HEALTH LIMITED YOU IN EACH OF THE FOLLOWING ACTIVITIES? (answer questions a through f using one of the numbers below)

1 Limited for more than 3 months

2 Limited for 3 months or less

3 Not limited at all

VIGACT07
___ a. The kinds or amounts of vigorous activities you can do, like lifting heavy objects, running or participating in strenuous sports

MODACT07
___ b. The kinds or amounts of moderate activities you can do, like moving a table, carrying groceries or bowling

WALKUP07
___ c. Walking uphill or climbing a few flights of stairs

BEND07
___ d. Bending, lifting or stooping

WALK07
___ e. Walking one block

HYGIEN07
___ f. Eating, dressing, bathing, or using the toilet

| Please go to next page |

CAST

5.a. WAS THERE A DEATH OR SERIOUS ILLNESS OF A CLOSE FRIEND OR
RELATIVE?

DEATH07

☐₁ Yes   ☐₂ No

If YES, would you say that this upset you:

☐₁ Not too much   ☐₂ Moderately   ☐₃ Very much

UPSDTH07

b. WAS THERE ANY MAJOR FINANCIAL DIFFICULTY?

MONEY07 ☐₁ Yes   ☐₂ No

If YES, would you say that this upset you:

☐₁ Not too much   ☐₂ Moderately   ☐₃ Very much

UPSMON07

c. ANY DIVORCE OR BREAK-UP INVOLVING FAMILY MEMBERS OR CLOSE
FREINDS?

DIVORC07 ☐₁ Yes   ☐₂ No

If YES, would you say that this upset you:

☐₁ Not too much   ☐₂ Moderately   ☐₃ Very much

UPSDIV07

d. ANY MAJOR CONFLICT WITH CHILDREN OR GRANCHILDREN?

CONFLI07 ☐₁ Yes   ☐₂ No

If YES, would you say that this upset you:

☐₁ Not too much   ☐₂ Moderately   ☐₃ Very much

UPSCON07

e. ANY MUGGINGS, ROBBERIES, ACCIDENTS OR SIMILAR EVENTS?

MUG07 ☐₁ Yes   ☐₂ No

If YES, would you say that this upset you:

☐₁ Not too much   ☐₂ Moderately   ☐₃ Very much

UPSMUG07

Please go to next page

CAST

QUALITY OF LIFE

6.   PERSONS WITH HEART PROBLEMS SOMETIMES HAVE THE FOLLOWING SYMPTOMS. PLEASE READ THIS LIST OF SYMPTOMS AND CHECK HOW OFTEN YOU HAVE EXPERIENCED THEM IN THE PAST MONTH.

SYMPTOMS	Every day	Several days a week	About once a week	2-3 times a month	About once a month	Not at all
TIRED∅7 Tired						
DIZZY∅7 Dizzy						—
FORGET∅7 Forgetful						
PALPIT∅7 Irregular Heart beats (e.g., skipped, racing)						
CHPAIN∅7 Chest pain						
CONCEN∅7 Problems concentrating						—
SOB∅7 Shortness of breath						
BLUR∅7 Blurred vision						
SLEEP∅7 Trouble sleeping						

Please go to next page

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6/18/87
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CAST

> THE NEXT SERIES OF QUESTIONS ASK YOU ABOUT YOUR WORK.
> YOU WILL NOT BE ANSWERING ALL THE QUESTIONS IN THIS
> SECTION, ONLY THE QUESTIONS THAT RELATE TO YOU.

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7. WHAT STATEMENT BEST DESCRIBES <u>YOUR CURRENT WORK SITUATION</u> OR, IF YOU ARE NOT CURRENTLY EMPLOYED, WHAT STATEMENT BEST DESCRIBES <u>YOUR LAST JOB</u>? (Check only one)

EMPLOYϕ7
- [ ] 1 Professional and/or technical
- [ ] 2 Managerial worker, own business, sales
- [ ] 3 Clerical, sales or similar work
- [ ] 4 Craftsperson or skilled worker
- [ ] 5 Semiskilled worker
- [ ] 6 Laborer (except farm)
- [ ] 7 Farmer
- [ ] 8 Member of Armed Forces
- [ ] 9 Never worked (<u>now skip to question 16 on p.9</u>)
- [ ] 10 Other (please describe) _____

8. WHICH OF THE FOLLOWING STATEMENTS BEST DESCRIBES YOUR WORK SITUATION <u>DURING THE LAST MONTH</u>? (Check only one box)

WORKϕ7
- [ ] 1 Working full or part-time (<u>Now skip to question 9 on p.7</u>)
- [ ] 2 Retired (<u>Now skip to question 10 on p.7</u>)
- [ ] 3 Unemployed (Looking for work) (<u>Now skip to question 14 on p.9</u>)
- [ ] 4 Temporary Leave (e.g., sick leave) (<u>Now skip to question 14, p.9</u>)
- [ ] 5 Other (please describe) _____
  (<u>Now skip to question 16 on p.9</u>)

Please go to next page

CAST

9.   ALL THINGS CONSIDERED, HOW SATISFIED HAVE YOU BEEN WITH YOUR JOB <u>DURING THIS LAST MONTH</u>?

JOBSAT07

☐ 1 Extremely satisfied
☐ 2 Very satisfied most of the time
☐ 3 Generally satisfied
☐ 4 Sometimes fairly satisfied, sometimes fairly dissatisfied
☐ 5 Generally dissatisfied
☐ 6 Extremely dissatisfied

<u>(Now skip to question 16 on page 9)</u>

ONLY IF YOU ARE <u>RETIRED</u>, SHOULD YOU ANSWER THE FOLLOWING SERIES OF QUESTIONS THAT RELATE TO YOUR SITUATION.

---

10.   WERE YOU FORCED TO RETIRE?

☐ 1 Yes   ☐ 2 No   (If you answered no, skip to question 12)

RETIRE07

Please go to next page

11. IF YOU WERE FORCED INTO EARLY RETIREMENT CHECK ONE BOX ON THE LEFT NEXT TO THE STATEMENT THAT <u>BEST DESCRIBES</u> YOUR REASON.

WHYRET07 ☐₁ My employer told me to retire

☐₂ I was offered early retirement benefits that I could not resist

☐₃ My spouse and family insisted that I retire early

☐₄ My doctor told me to retire

☐₅ I decided to retire because of poor health

☐₆ Other, please describe _____

12. WOULD YOU SAY YOUR TIME WITHOUT WORK HAS BEEN

LIKRET07 ☐₁ More enjoyable than you expected

☐₂ About what you expected

☐₃ Less enjoyable than you expected

AGERET07

13. HOW OLD WERE YOU WHEN YOU RETIRED? _____ YEARS

(Now please skip to question 16)

Please go to next page

14. HOW MANY WEEKS HAVE YOU BEEN UNEMPLOYED OR ON LEAVE? _____ Weeks

15. DO YOU PLAN TO RETURN TO WORK?

☐₁ Yes   ☐₂ No   RETWRK07

16. FOR EACH OF THE FOLLOWING QUESTIONS, PLEASE MARK THE ANSWER THAT COMES <u>CLOSEST</u> TO THE WAY YOU HAVE BEEN FEELING <u>DURING THE PAST MONTH</u>.

	All of the time	Most of the time	A good bit of time	Some of the time	A little of the time	None of the time
NERVUS07 How much of the time during the past month, have you been a very <u>nervous person</u>?						
CALM07 During the past month, how much of the time have you felt <u>calm and peaceful</u>?						
BLUE07 How much of the time, during the past month, have you felt <u>downhearted and blue</u>?						
HAPPY07 During the past month, how much of the time have you been a <u>happy person</u>?						
DUMPS07 How often, during the past month, have you felt so <u>down in the dumps that nothing could cheer you up</u>?						

Please go to next page

17. DURING THE <u>PAST FOUR WEEKS</u>, WAS SOMEONE AVAILABLE <u>TO HELP</u> YOU IF YOU NEEDED AND WANTED HELP (FOR EXAMPLE, IF YOU NEEDED SOMEONE TO TALK TO OR IF YOU NEEDED HELP WITH DAILY CHORES)? (Check one box)

HELP07
- ☐ 1 Yes, as much as I wanted
- ☐ 2 Yes, quite a bit
- ☐ 3 Yes, a fair amount
- ☐ 4 Yes, a little bit
- ☐ 5 No, not at all

18. HOW FREQUENTLY DO YOU PARTICIPATE IN RELIGIOUS ACTIVITIES?

RELIG07
- ☐ 1 More than once a week
- ☐ 2 Every week
- ☐ 3 Regularly, but not every week
- ☐ 4 Only on special occasions
- ☐ 5 Never

19. DO YOU BELONG TO ANY ORGANIZATIONS OR CLUBS (SUCH AS POLITICAL GROUPS, ATHLETIC GROUPS OR REGULAR SOCIAL ORGANIZATIONS)?

GROUPS07 ☐ 1 Yes   ☐ 2 No

If YES, how many groups/organizations _NUMGRP07_

20. WHAT IS YOUR CURRENT MARITAL STATUS (Check one):
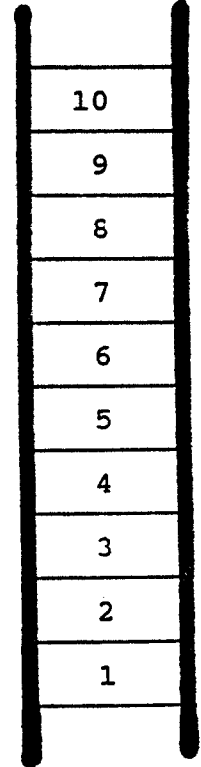
MARITL07
- ☐ 1 Married
- ☐ 2 Separated or Divorced
- ☐ 3 Widowed
- ☐ 4 Not married, living in spouse-like relationship
- ☐ 5 Single

Please go to next page

CAST

21. HERE IS A LADDER REPRESENTING THE
     "LADDER OF LIFE". THE TOP OF THE
     LADDER REPRESENTS THE BEST POSSIBLE
     LIFE FOR YOU. THE BOTTOM OF THE
     LADDER REPRESENTS THE WORST POSSIBLE
     LIFE FOR YOU.
     (Answer questions a through c below)

a.   On which step of the ladder do you
     feel you personally stand at the
     present time?

     PRESENT TIME (1 to 10) _____   LADNOW07

b.   On which step would you have stood
     five years ago?

     FIVE YEARS AGO (1 TO 10) _____   LADPST07

c.   Thinking about your future, on which
     step do you think you will stand
     about five years from now?

     FIVE YEARS FROM NOW (1 to 10) _____   LADFUT07

Best Possible Life

Step
10
9
8
7
6
5
4
3
2
1

Worst Possible Life

Twelve Quality of Life score variables have been added to record type 07 (QL).
These scores are computed from raw variables in the record type. Because of
their complexity, they are not computed during batch data input but are set by
a retrieval update that runs as part of the regular weekly database update.

Some of the scores (indicated as "I" below) have only integer values while
others, which are means of several raw variables, can take on fractional
values and are stored with one decimal place (indicated as "F1" below). These
latter scores are defined if at least some fraction of their components have
non-missing values; the minimum number of components needed is in the MINCOMP
column and total number of components in the TOTCOMP column.

Several of the raw component variables are reversed in computing scores; e.g.
SOCIAL07 is reversed in computing the QSOCAL07 score; thus in computing the
mean SOCAL07 is recoded 1 -> 5, 2 -> 4, 3 -> 3, 4 -> 2, 5 -> 1.

Definitions are...

#	Var Name Type Variable Label Definition	MINCOMP	TOTCOMP
1	QSOCAL07 F1 Social Functioning Score = (LIMIT07 + reversed SOCIAL07) / 2 Worst = low (1), best = high (6)	1	2
2	QNOW07 I Perceived Health Score = LADNOW07	1	1
3	QEXPCT07 I Health Expectancy Score = LADFUT07 - LADNOW07	2	2
4	QFUNCT07 F1 Physical Functioning Score = VIGACT + MODACT + WALKUP + BEND + WALK + HYGIEN where VIGACT = recode VIGACT07 (1, 2 = 1) (3 = 2) and similarly for MODACT, etc. Worst = low (6), best = high (12)	4	6

5	QSTRES07 F1 Life Events Score
	= DEATH + MONEY + DIVORC + CONFLI + MUG
	where DEATH = recode DEATH07 & UPSDTH07:
	          1 if DEATH07 = 2
	          2 if DEATH07 = 1 and UPSDTH07 = 1
	          3 if DEATH07 = 1 and UPSDTH07 = 2
	          4 if DEATH07 = 1 and UPSDTH07 = 3
	and similarly for MONEY, etc.
	Worst = high (20), best = low (5)
		3	5

6	QSYMPT07 F1 Symptoms Score = TIRED07 + DIZZY07 + FORGET07 + PALPIT07 + CHPAIN07 + CONCEN07 + SOB07 + BLUR07 + SLEEP07 Worst = high (54), best = low (9)	5	9
7	QWORK07 I Work Score recode EMPLOY07 (1 thru 4 = 1) (5 thru 10 = 0)	1	1

#	Var Name	Type	Variable Label	MINCOMP	TOTCOMP
			Definition		

8   QRETIR07   I   Retire Score   1   1
recode RETIRE07 (1 - 1) (2 - 0)

9   QRETRN07   I   Return to Work Score   1   1
recode RETWRK07 (1 - 1) (2 - 0)

10 QWELL07   Fl   Well-being Score   3   5
- reversed NERVUS07 + CALM07 + reversed BLUE07 +
  HAPPY07 + reversed DUMPS07
Worst - low (5), best - high (30)

11 QSUPRT07   I   Social Support Score   1   1
- reversed HELP07
Worst - low (1), best - high (5)

12 QINTGR07   Fl   Social Integration Score   2   3
- RELIG + GROUPS + MARITL
where RELIG - recode RELIG07 (1, 2, 3 - 1) (4, 5 - 0)
      GROUPS - recode GROUPS07 (1 - 1) (2 - 0)
      MARITL - recode MARITL07 (1, 4 - 1) (2, 3, 5 - 0)
Worst - low (0), best - high (3)