The Australian Longitudinal Study of Ageing
Wave 6 Household Questionnaire

1. Sequence Number
2. Date of interview

Household Demographics (interviewer to answer questions 3 to 8.)
3. Type of domicile?
   (INTERVIEWER- If institution, go to next question. If community living go to question 6.)
   Community living 1
   Institution 2

4. Identify type of institution
   Private rest home 1
   Hostel 2
   Nursing home 3
   Mental institution 4
   Boarding house 5
   Other (specify below) 6

5. Please specify other institution

6. Identify type of community living
   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 (specify below) 7

7. Please specify other community living

8. Is this independent or group housing?
   Independent 1
   Group housing 2
   Retirement village 3
   Other 4

9. How many people usually live here with you?
   (INTERVIEWER –If one or more persons, complete below.)

I would like to ask you for a few details about each of these people

10.1 What is their name?

10.2 What is their relationship to you?
   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
10.3 What was their age last birthday? THAGE1W6 – THAGE5W6

10.4 What is their sex? Male 1 THSEX1W6 – Female 2 THSEX5W6

11. Could you please tell me your current marital status? Married 1 MARITW6
De facto 2
Separated 3
Divorced 4
Widowed 5
Never married 6

12. I would now like to ask you some questions about your family. How many living children do you (or your husband-wife-partner) have? (INTERVIEWER-enter total number of living children.) LIVCHW6

13. How many sons are still alive? SSTLALW6

14. How many live within one hour’s travel? (INTERVIEWER-if only one ask – Does he live within one hours travel?) SLIVHOW6

15. How many live in South Australia more than one hour’s travel away? (INTERVIEWER-if only one ask – Does he live in SA?) SLIVSAW6

16. How many live elsewhere in Australia? (INTERVIEWER-if only one ask – Does he live in Australia?) SLIVAUW6

17. How many live overseas? (INTERVIEWER-if only one ask – Does he live overseas?) SOVERSW6

18. How many daughters are still alive? DSTLALW6

19. How many live within one hour’s travel? (INTERVIEWER-if only one ask – Does she live within one hours travel?) DLIVHOW6

20. How many live in South Australia more than one hour’s travel away? (INTERVIEWER-if only one ask – Does she live in SA?) DLIVSAW6

21. How many live elsewhere in Australia? (INTERVIEWER-if only one ask – Does she live in Australia?) DLIVAUW6

22. How many live overseas? (INTERVIEWER-if only one ask – Does she live overseas?) DOVERSW6

23. Do you have any grandchildren? Yes 1 GRANCHW6
No 2

24. How many grandchildren do you have? HMGDCHW6

25. How would you rate your overall health at the present time? Excellent 1 HLTHLIW6
Very good 2
Good 3
Fair 4
Poor 5

26. Would you say that your health is better, about the same, or worse than most people your age? Better 1 HLTHBTW6
Same 2
Worse 3
Don’t know 4

27. Is your health now better, about the same, or not as good as it was about twelve months ago? Better now 1 BTSM12W6
I am now going to read a list of statements describing how people sometimes feel. Please tell me how often you felt this way during the past week. Many of these statements may not apply to you but we have to ask them of everybody to get a comparison.

(INTERVIEWER – Show Display Card 1)

Questions 28 to 47 - meaning of 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

28. I was bothered by things that usually don’t bother me. CESD1W6
29. I did not feel like eating: my appetite was poor. CESD2W6
30. I felt that I could not shake off feeling low even with help from my family and friends. CESD3W6
31. I felt that I was just as good as other people. CESD4W6
32. I had trouble keeping my mind on what I was doing. CESD5W6
33. I felt depressed. CESD6W6
34. I felt that everything I did was an effort. CESD7W6
35. I felt hopeful about the future. CESD8W6
36. I thought my life had been a failure. CESD9W6
37. I felt afraid. CESD10W6
38. My sleep was restless. CESD11W6
39. I was happy. CESD12W6
40. It seemed that I talked less than usual. CESD13W6
41. I felt lonely. CESD14W6
42. People were unfriendly. CESD15W6
43. I enjoyed life. CESD16W6
44. I had crying spells. CESD17W6
45. I felt sad. CESD18W6
46. I felt that people disliked me. CESD19W6
47. I could not get going. CESD20W6
48. Did the doctor ever tell you that you had a cancer, malignancy or tumour of any type?
   Yes 1
   No 2

49. Where was the cancer or what type of cancer was it?
   (INTERVIEWER—if more than one, enter the most recent one.) Lung 1
   Gynaecological (ovary, cervix, uterus) 2
   Breast 3
   Colon/Bowel/Rectal 4

WHTCANW6
50. Please specify other type of cancer?  
51. In what year were you first told that you had this cancer (most recent one)?  
52. Have you been hospitalised overnight for this?  
53. Did the doctor ever tell you that you had diabetes?  
54. When were you first told you had diabetes? (Year)  
55. Are you currently receiving treatment for diabetes? Yes 1 No 2  
56. What type of treatment are you receiving? Insulin 1 Diet 2 Tablets or drugs 3  
57. Have you been hospitalised overnight for this condition? Yes 1 No 2  

We would now like to ask you some questions about various medical conditions you may or may not have.

58. Do you have trouble with your bowels which makes you constipated? (INTERVIEWER-if participant has colostomy, go to question 62.) Yes 1 No 2 Has colostomy 3  
59. Do you often have trouble with your bowels which gives you diarrhoea? Yes 1 No 2  
60. How often do you usually have a bowel movement? Once a day 1 2 to 3 times a day 2 4 or more times a day 3 Once a week or less 4 2 or 3 times a week 5 4 to 6 times a week 6  
61. In the last 12 months have you noticed blood in your motions? Yes 1 No 2  
62. Are you troubled by frequent passing of urine during the day? (INTERVIEWER-if participant has catheter, go to question 73.) Yes 1 No 2 Has catheter 3  
63. Do you usually have to get up at night to pass urine? Yes, often 1 Yes, occasionally 2 No 3  
64. About how many times per night?  
65. Do you have pain on passing urine? Often 1 Occasionally 2 Never 3  
66. Do you have difficulty holding your urine until you get to the toilet? Often 1 Occasionally 2
67. Do you accidentally pass urine?  
   | Often 1 | Occasionally 2 | Never 3 | **ACCDURW6**

68. When does this occur?  
   - 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  
   - Don't know 4 | **REASNW6**

69. Have you sought any help?  
   | Yes 1 | No 2 | **NEWIN1W6**

70. From whom did you seek help?  
   | **NEWIN2W6**

71. What was the outcome of seeking help?  
   - Advice 1  
   - Treatment 2  
   - Provision of aids 3  
   - Other 4  
   - No help 5 | **NEWIN3W6**

72. Has this help had an impact on your day to day living?  
   - Yes quite a lot 1  
   - Yes a little 2  
   - No real impact 3 | **NEWIN4W6**

73. Now I would like you to tell me which, if any, of these medical conditions you currently suffer from.  
   - Rheumatism or rheumatic 1  
   - Rheumatoid arthritis 2  
   - Osteoarthritis 3  
   - Other (specify below) 4 | **ARTHRIW6**

74.1 Which condition? | **CDN1W6** – **CDN12W6**

74.2 In what year were you first told you had this condition? | **DIAG1W6** – **DIAG12W6**

74.3 Have you stayed in hospital at least overnight for this condition?  
   | Yes 1 | No 2 | **HOS1W6** – **HOS12W6**

74.4 Are you now prevented in any way from doing any activities because of this condition?  
   | Yes 1 | No 2 | **LIM1W6** – **LIM12W6**

75. What form of arthritis is this?  
   - Rheumatism or rheumatic 1  
   - Rheumatoid arthritis 2  
   - Osteoarthritis 3  
   - Other (specify below) 4 | **ARTHRIW6**

76. Please specify other arthritis. | **OTHARTW6**

The next few questions are about medicines. We are interested in 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. (Do not include ointments.)

77. Could you please show me the medicines that you take.  
   - (INTERVIEWER-Check containers, enter total number of medications. For each medication complete the details below.) | **NUMMEDW6**
78.1 Drug name. (INTERVIEWER-Generic name preferred)

78.2 Container seen? Yes 1 No 2

78.3 What do you take this for?

78.4 How long have you been taking this? Weeks 1 Months 2 Years 3

78.5 How many …weeks, months, years?

78.6 Was this prescribed by a doctor? Yes 1 No 2

79. How many falls did you have in the past year? (INTERVIEWER-enter total number of falls)

80. How many of these falls were inside your own home?

81. How many of these falls were outside of your own home?

82. Now I want to ask you how many of these falls required medical treatment or limited your activities for more than 2 days. (INTERVIEWER-enter number)

83. I want you to indicate which, if any, of these bones you have broken in the last two years. (INTERVIEWER – Show Display Card 4. Enter total number broken and detail in the following questions.)

84.1 Which bone?

84.2 How did this occur? Fall at ground level 1 Fall from height 2 Motor vehicle accident 3 Other accident 4 Spontaneous break 5 Other 6

84.3 Did you have surgery for this? Yes 1 No 2

85. Have you had any (other) surgery or operations in the last 5 years? Yes 1 No 2

86. How many different times have you had surgery in the last 5 years? (INTERVIEWER-enter total number and detail in the following questions.)

87. For each surgical procedure you have had in the last 5 years, please answer the following. What was the surgery for? (INTERVIEWER-give brief description.)

I would now like to ask whether you have EVER had some specific surgical procedures. Questions 88 to 94 - meaning of labels: Yes 1 No 2
88. Have you EVER had surgery for cataracts?  

89. Have you EVER had a hip replacement?  

90. Have you EVER had gall bladder surgery?  

91. Have you EVER had surgery for a hernia?  

92. Have you EVER had a knee replacement?  

93. (MEN ONLY) Have you EVER had prostate surgery?  

94. (WOMEN ONLY) Have you EVER had a mastectomy?  

Now I am going to ask you some questions about your hearing.  

95. Do you wear a hearing aid nowadays?  
- No  
- No, but I have tried one  
- Yes, some of the time  
- Yes, most of the time  

96. Has this only been in the last 12 months?  
- Yes  
- No  

97. How much difficulty, if any, do you have with your hearing (even if you are wearing your hearing aid)?  
- None  
- Slight difficulty  
- Moderate difficulty  
- Great difficulty  
- Can't hear at all  

98. Do you ever get noises in your head or ears which usually last longer than 5 minutes?  
- No  
- Some of the time  
- Most or all of the time  

99. How annoying do you find these noises when they are at their worst?  
- Not at all annoying  
- Slightly annoying  
- Moderately annoying  
- Severely annoying  

100. Do you have difficulty following TV programs at a volume others find acceptable, WITHOUT any aid to hearing?  
- No  
- Yes, slight difficulty  
- Yes, moderate difficulty  
- Yes, great difficulty  

101. Some people find it difficult to hear someone talking to them in a quiet room. DO YOU find this:  
- Not at all difficult  
- Slightly difficult  
- Moderately difficult  
- Very difficult  
- Can't hear at all  

102. Do you find enjoyment of your personal and social life is affected by hearing problems?  
- Never  
- Seldom  
- Some of the time  
- Often  

Now I am going to ask you some questions about your vision.  

103. Do you currently wear eye glasses or contact lenses?  
- Yes  
- No  

ALSA Wave 6 Questionnaire
104. Do you wear the eye glasses or contact lenses for:  
   Distance viewing 1  
   Reading 2  
   Both 3  

GCFORW6

105. Eight years ago, did you wear eye glasses or contact lenses for:  
   Distance viewing 1  
   Reading 2  
   Both 3  

GCFOR8W6

To what extent, if at all, does your vision interfere with your ability to carry out the following activities.  
(INTERVIEWER-Show Display Card 5. Answers to take into account both eyes with glasses if applicable.)  
Questions 106 to 122 - meaning of labels:  
Not applicable 1  
Not at all 2  
A little 3  
Moderately 4  
A lot 5

106. Seeing in the distance.  

INTDSTW6

107. Recognising faces across the street.  

INTFACW6

108. Watching TV.  

INTWTCW6


INTBLIW6

110. Seeing in poor light.  

INTPLIW6

111. Appreciating colours.  

INTCOLW6

112. Driving a car/riding a bicycle by day.  

INTDYDW6

113. Driving a car/riding a bicycle at night.  

INTBNTW6

114. Walking inside.  

INTWAIW6

115. Walking outside.  

INTWAOW6

116. Using steps.  

INTSTEW6

117. Crossing the road.  

INTROAW6

118. Using public transport.  

INTTRAW6

119. Travelling independently.  

INTINDWT6

120. Moving in unfamiliar surroundings.  

INTMOVW6

121. Jobs / study / housework.  

INTJSHW6

122. Hobbies / leisure activities.  

INTHLAW6

Now, before I go on to the next question I would like to ask you if there are any medical conditions or symptoms that you consider we have not covered in any of the previous questions.  
(INTERVIEWER-if more than one condition/symptom specify below.)

123.1 What is the other medical condition or symptom?  
(INTERVIEWER-clarify anything not talked about so far.)  

OMED1W6 – 
OMED3W6

123.2 How long have you had this condition/symptom?  

OTHLO1W6 – 
OTHLO3W6

123.3 Have you consulted a doctor about this condition/symptom?  
Yes 1  

OTHDO1W6 –
123.4 Have you stayed in hospital at least overnight for this condition/symptom?  
Yes 1  
No 2  

123.5 Are you now prevented in any way from doing any activities because of this condition/symptom?  
Yes 1  
No 2  

We are now going to ask you a few questions about how you use health services.

124. Is there one particular doctor or private medical practice you usually go to when you are sick or when you need advice about your health?  
Yes 1  
No 2  

125. How many times have you consulted a doctor in the last 2 weeks (other than when you were in hospital)?  
None 1  
Once 2  
Two to five 3  
Six to ten 4  
More than 10 5  

In the last 12 months have you consulted any of the following people about your health?  
Questions 126 to 145 - meaning of labels:  
Yes 1  
No 2  

126. A General Practitioner?  

127. A Specialist?  

128. A Hospital Outpatients?  

129. A Dentist?  

130. A Dietician?  

131. A Chemist for advice?  

132. An Optician or Optometrist?  

133. An Audiologist (hearing specialist)?  

134. A Physiotherapist?  

135. An Occupational Therapist?  

136. Speech Therapist?  

137. A Chiropractor?  

138. A Chiropodist or Podiatrist?  

139. A Psychiatrist?  

140. A Psychologist?  

141. A District, Home or Community Nurse?  

142. A Social or Welfare Worker?  

143. A Naturopath?
144. An Acupuncturist?  
ACUPUNW6

145. Have you consulted any other person about your health other than those I have already mentioned?  
CONSOTW6

146. Please specify other person consulted.  
SPECCOW6

147. Have you ever been a patient in a nursing home?  
NURSHOW6

148. Have you been a patient in a nursing home in the last 12 months?  
NSHM12W6

149. How many different times were you in a nursing home in the last 12 months?  
HMNYNSW6

150. For about how many days was that in total?  
DYSNNSW6

151. In the last 12 months, have you been in hospital at least overnight because of illness or an accident?  
HSPO12W6

152. How many different times were you in hospital in the last 12 months?  
TMHS12W6

153. For about how many days was that in total?  
DYSHSPW6

154. Do you ever go to a day care or day therapy centre?  
DYCRTHW6

155. How often do you go to the centre(s)?  
HWMDNCW6

156. Compared to 12 months ago, do you weigh more now, weigh less now, or weigh the same?  
WTCHANW6

157. Have you lost all your teeth from your upper jaw?  
NOTTHUW6

158. I would like to get some idea of how many natural 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 natural teeth in your upper jaw?  
(NATTEEW6

159. Do you have a denture or false teeth for your upper jaw?  
UPPERDW6

160. Have you lost all your teeth from you lower jaw?  
LOSTALW6

161. Including the wisdom teeth, there are 16 teeth making up a complete set of teeth in the lower jaw (also). Could you tell me the number of remaining natural teeth in your lower jaw?  
NTTHLW6

162. Do you have a denture or false teeth for your lower jaw?  
LOWERDW6
Questions 163 to 168 - meaning of labels:

No 2
Yes 1

163. Are you ordinarily able to chew boiled vegetables? CHWBVEW6

164. Are you ordinarily able to chew a hamburger? CHWHAMW6

165. Are you ordinarily able to chew a fresh lettuce salad? CHWLTW6

166. Are you ordinarily able to chew a piece of carrot? CHWFCRW6

167. Are you ordinarily able to chew firm meat such as steak or chops? CHWMEAW6

168. Are you ordinarily able to bit off and chew a piece from a whole fresh apple? CHWAPPW6

169. If you needed to pay a $100 dental bill in the next month, how much difficulty would that create financially?
   No difficulty 1
   Hardly any difficulty 2
   A little difficulty 3
   A lot of difficulty 4
   DFFPYBW6

170. If you needed dental care in the next month, how much difficulty would you have travelling to the dentist?
   No difficulty 1
   Hardly any difficulty 2
   A little difficulty 3
   A lot of difficulty 4
   DFFTRVW6

Next are a series of sentences. How often are these sentences true for you.

(INTERVIEWER – Show Display Card 7)

Questions 171 to 180 - meaning of labels:

Almost always true 1
Often true 2
Sometimes true 3
Not often true 4
Never true 5

171. I feel that I'm a person of worth, at least on an equal plane with others. SELF1W6

172. I feel that I have a number of good qualities. SELF2W6

173. I am able to do things as well as most other people. SELF3W6

174. I feel I do not have much to be proud of. SELF4W6

175. I take a positive attitude towards myself. SELF5W6

176. I think that I am no good at all. SELF6W6

177. I am a useful person to have around. SELF7W6

178. I feel I can’t do anything right. SELF8W6

179. When I do a job, I do it well. SELF9W6

180. I feel that my life is not very useful. SELF10W6

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.

Questions 181 to 208 - meaning of labels:

Correct 1
Incorrect 2

181. What day of the week is it? WEEKW6

182. What is the date today? DAT2W6
183. What is the month?  
184. What is the year?  
185. What season of the year is it?  
186. Without looking at a watch or clock, what is the time of day?  
(INTERVIEWER-hours and minutes or 24 hour clock acceptable.)  
187. What country are we in?  
188. What city or town are we in?  
189. What is the name of the State or Territory?  
190. What is the name of this suburb?  
191. What floor of the building are we on?  

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.  
(INTERVIEWER-after the first trial repeat as often as necessary [up to 10 trials]. Record the number of trials below.)  
192. INTERVIEWER-the respondent remembers Apple?  
193. INTERVIEWER-the respondent remembers Table?  
194. INTERVIEWER-the respondent remembers Penny?  
195. 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.)  

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.  
(INTERVIEWER- stop after 5 subtractions. Count only 1 error if respondent makes subtraction error, but subsequent answers are 7 less than the error.)  
196. 100 – 7 = 93?  
197. 93 – 7 = 86?  
198. 86 – 7 = 79?  
199. 79 – 7 = 72?  
200. 72 – 7 = 65?  

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.)  
Now spell WORLD backwards.  
201. First letter – D?  
202. Second letter – L?  
203. Third letter – R?  
204. Fourth letter – O?  
205. Fifth letter – W?
Now what were the three things I asked you to remember?

206. Respondent remembers Apple?  REMEMW6

207. Respondent remembers Table?  TABLW6

208. Respondent remembers Penny?  PENNW6

Questions 209 to 217 - meaning of labels:

Correct  1
Incorrect  2
Incapable of response  3

209. What is this called?  PENW6
(INTERVIEWER-hold up pencil. Score as correct for pen or pencil)

210. What is this called?  WATCHW6
(INTERVIEWER-point to watch.)

211. Would you repeat the following phrase – “No if’s, and’s, or but’s.”  PHRASEW6
(INTERVIEWER-Allow only one trial. Correct requires an accurately articulated repetition.)

212. Would you please read the words on this page and then do what it says.  RDPAGEW6
(INTERVIEWER-Show Display Card 8. Code as correct if respondent closes his/her eyes.)

(INTERVIEWER-Read the following statement in full 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.

213. Respondent takes paper in RIGHT hand?  PAPTSTW6

214. Respondent folds paper in half with both hands?  PAPHLFW6

215. Respondent puts paper on lap?  PAPLAPW6

216. Would you please write any complete sentence on that piece of paper for me.  WRITSNW6
(INTERVIEWER-Sentence should have a subject and a verb and make sense. Spelling and grammatical errors are acceptable.)

217. Please copy this design on the same piece of paper.  DESIGNW6
(INTERVIEWER-Show Display Card 9. Code as correct if 2 convex five-sided figures intersect.)

Please listen carefully to the following name and address, then repeat it – John Brown, 42 West Street, Kensington.
(INTERVIEWER-Repeat address until learned [up to 5 tries]. Then ask the respondent to remember this name and address for later. Please record the number of attempts taken to remember the whole address below.)

Questions 218 to 222 - meaning of labels:

Correct  1
Incorrect  2

218. Respondent remembered John?  JOHNW6


220. Respondent remembered Forty Two?  FORTYTW6

221. Respondent remembered West Street?  WESTSTW6

222. Respondent remembered Kensington?  KENSINW6

223. (INTERVIEWER-Please record the number of attempts taken to remember the whole address.)  CORRESW6
(INTERVIEWER-For the next 3 questions, if response is vague, say – ‘Could you tell me a bit more?’)

224. In what way are an apple and a banana alike?
   - 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

225. In what way are a boat and a car alike?
   - Correct abstraction such as both are a means of transport: 1
   - Partially correct, gives concrete similarities such as both have seats: 2
   - Incorrect: 3

226. In what way are an egg and a seed alike?
   - 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: 3

What is the name and address I asked you to remember a short time ago?

Questions 227 to 231 - meaning of labels:
   - Correct: 1
   - Incorrect: 2

227. Remembered John? REMEBW6
228. Remembered Brown? BROWW6
229. Remembered Forty Two? FORTW6
230. Remembered West Street? WESW6
231. Remembered Kensington? KENW6

Now I would like some information about how you sleep.
(INTERVIEWER-Show Display Card 10.)

Questions 232 to 234 - meaning of labels:
   - Never: 1
   - Rarely: 2
   - Sometimes: 3
   - Often: 4
   - Almost always: 5

232. How often do you have trouble falling asleep? TRBSLPW6
233. How often do you have trouble with waking up during the night? WAKNTW6
234. How often do you have trouble with waking up earlier than intended and not being able to fall asleep again at all? WAKEARW6
235. How many days per week would you intentionally take a nap or sleep in the daytime?
   - No days: 1
   - 1 or 2 days: 2
   - 3 or 4 days: 3
   - 5 or more days: 4

236. If you take intentional daytime naps or sleeps, how long are they usually?
   (INTERVIEWER-Enter total number of minutes.)

237. How many days per week would you fall asleep unintentionally (eg while watching TV, reading, or riding in a car)?
   - No days: 1
   - 1 or 2 days: 2
   - 3 or 4 days: 3
   - 5 or more days: 4

238. How often do you usually take a sedative or sleeping pill that has been prescribed by a doctor to help you sleep?
   - Nightly: 1
   - A few times per week: 2
239. Do you usually sleep with your partner/spouse? Yes 1 SLPARRW6
No 2

240. Is your sleep normally disturbed by your partner? Yes 1 SLPPTW6
No 2

241. Is this due to snoring, twitching, both of these or some other reason? Snoring 1 SLPTRSW6
Twitching 2
Both 3
Other 4

Here is a sheet with 4 words for you to learn and remember. Each word
belongs to a different category. Please read each word out loud to me.
(INTERVIEWER-Show Display Card 11.)
Questions 242 to 249 - meaning of labels: Yes 1
No, incapable of response 2

242. Respondent read the word HISTORY? MISREHW6
243. Respondent read the word FACTORY? MISREFW6
244. Respondent read the word POLICEMAN? MISREPW6
245. Respondent read the word TOOTHBRUSH? MISRETW6

To help you learn, I will tell you the category cue for each word and ask you to
tell me the word that goes with each category cue. When I read each category
cue to you, please tell me which one of these words goes with the category.
(INTERVIEWER-Read each cue aloud in the following order. If the response to
cue is not correct, tell respondent, repeat the cue, and ask them to give
another response until they give the correct response. CUE-building (factory);
CUE-personal item (toothbrush); CUE-school subject (history); CUE-city
employee (policeman))

246. Respondent identified FACTORY? MISIDFW6
247. Respondent identified TOOTHBRUSH? MISIDTW6
248. Respondent identified HISTORY? MISIDHW6
249. Respondent identified POLICEMAN? MISIDPW6

Try to remember these words because I am going to ask you to recall them in a
little while.
(INTERVIEWER-Take Display Card 11 away.)

(INTERVIEWER-Give the respondent the piece of paper with the following
instructions.)
Please draw me a clock that says 1:45. Set the hands and numbers on the
face so that a child could read them.
(INTERVIEWER-Repeat the above instructions until they are clearly
understood. Once the respondent begins to draw, no further assistance is
allowed.)

250. Respondent drew the clock? Correct 1 CLOCKW6
Incorrect 2
Incapable of response 3

Now, please tell me as many of the 4 words I asked you to remember.
(INTERVIEWER-Allow 20 seconds for recall of 4 words in any order. Stop if no
more words have been recalled for 10 seconds.)
Questions 251 to 258 - meaning of labels:

Yes 1
No 2

251. Respondent remembered FACTORY?
MISFRFW6

252. Respondent remembered TOOTHBRUSH?
MISFRTW6

253. Respondent remembered HISTORY?
MISFRHW6

254. Respondent remembered POLICEMAN?
MISFRPW6

To jog your memory I am now going to say the category cues for the words you haven’t remembered.

(INTERVIEWER-CUE-school subject (history), CUE-building (factory), CUE-city employee (policeman), CUE-personal item (toothbrush). Allow 5 seconds for recall of each word.)

255. Respondent recalled HISTORY?
MISCRHW6

256. Respondent recalled FACTORY?
MISCRFW6

257. Respondent recalled POLICEMAN?
MISCRPW6

258. Respondent recalled TOOTHBRUSH?
MISCRTPW6

I would now like to ask about your physical functioning.

259. Are you able to walk up and down stairs to a first floor of a building without help?

Yes 1
No 2

260. Are you able to walk half a mile without help?

Yes 1
No 2

Now I am going to ask you how difficult it is, on average, to do similar kinds of activities.

(INTERVIEWER-Show Display Card 12)

Questions 261 to 265 - meaning of labels:

No difficulty at all 1
A little difficulty 2
Some difficulty 3
A lot of difficulty 4
Just unable to do it 5

261. How much difficulty, if any, do you have pulling or pushing a large object like a living room chair?
PSHPLLW6

262. What about stooping, crouching or kneeling?
STPCRKW6

263. Lifting or carrying weights over 10 pounds (4 kilograms) like a heavy bag of groceries?
LFT10W6

264. Reaching or extending your arms above shoulder level?
RCHOVW6

265. Either writing or handling or fingering small objects?
DIFSMJW6

266. I am now going to ask you about some everyday activities. For each of the activities identified, 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 – Show Display Card 13)

266.1 For (activity listed on display card), have you received help from a person, special equipment or both?

No help 1
Person 2

ADL1HPW6 – ADL8HPW6
266.2 Do you still require this help?  
Yes 1  
No 2  

266.3 Who is (was) your main helper?  
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  

266.4 Does (did) any other relative or friend help you?  (see labels as above)  

266.5 Any other relative or friend help you?  (see labels as above)  

266.6 Do (did) you receive any other help, such as from one of these organisations?  
(INTERVIEWER-Show Display Card 15)  

266.7 Does any other organisation help with this activity?  
(INTERVIEWER-Show Display Card 15)  

266.8 (With this help) how much difficulty, on average, do you have with this activity?  
No difficulty at all 1  
A little difficulty 2  
Some difficulty 3  
A lot of difficulty 4  

267. I am now going to ask you about some other activities. For each of the activities identified, I’d like to ask if you have had any difficulties or have had any help from a person in the last 12 months if you do any of these activities (apart from when you may have been in a hospital or a nursing home). If you don’t do the activity at all, just tell me so.  
(INTERVIEWER-Show Display Card 14)  

267.1 When doing (activity listed on display card), do (did) you receive any help to assist you with this activity?  
(INTERVIEWER-If no help, go to question 267.8)  
No help 1  
Person 2  
Special equipment 3  
Both 4
267.2 Do you still require this help? Yes 1  IHP1W6 –  IHP10W6
   No 2
267.3 Who is (was) your main helper? No-one 1  IMNH1W6 –  IMNH10W6
   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

267.4 Does (did) any other relative or friend help you? (see labels as above) IOTH1AW6 –  IOT10AW6
267.5 Does (did) any other relative or friend help you? (see labels as above) IOTH1BW6 –  IOT10BW6
267.6 Do (did) you receive any other help, such as from a care organisation? (INTERVIEWER- Show Display Card 15) IORG1AW6 –  IOR10AW6
267.7 Does any other organisation help with this activity? (INTERVIEWER – Show Display Card 15) IORG1BW6 –  IOR10BW6
267.8 (With this help) how much difficulty, on average, do you have with this activity? No difficulty at all 1 IDIFF1W6 –  IDIF10W6
   A little difficulty 2
   Some difficulty 3
   A lot of difficulty 4

Now I would like to ask some questions about your relationships with family and friends. (INTERVIEWER – Show Display Card 16)
Questions 268 to 273 - meaning of labels: More than once per week 1
   Once a week 2
   2 or 3 times a month 3
   Almost once a month 4
   Less than once a month 5
   Never 6

268. Think of your children and/or children-in-law who do not live with you. In the past 12 months, how often did you have PERSONAL CONTACT (FACE TO FACE) with at least one of them? CONTCHW6
269. Again, think of your children and/or children-in-law who do not live with you. In the past 12 months, how often did you have PHONE CONTACT with at least one of them? PHCNCHW6
270. Again, think of your children and/or children-in-law who do not live with you. In
the past 12 months, how often did you RECEIVE MAIL from at least one of them?

271. Think of your grandchildren, who do not live with you. In the past 12 months, how often did you have PERSONAL CONTACT (FACE TO FACE) with at least one of them?  CONTGDW6

272. Again, think of your grandchildren, who do not live with you. In the past 12 months, how often did you have PHONE CONTACT with at least one of them?  PHCNGDW6

273. Again, think of your grandchildren, who do not live with you. In the past 12 months, how often did you RECEIVE MAIL from at least one of them?  MLFRGDW6

Please tell me if you agree or disagree with the following statements.

(INTERVIEWER – Show Display Card 17)

274. Older people should be able to depend on their adult CHILDREN for the help they need?  DEPCHDW6

275. Older people should be able to depend on their adult GRANDCHILDREN for the help they need?  DEPGDW6

276. If you (and your husband/wife/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
Move in with children  2
Move to a home for the aged  3
Move to a nursing home  4

SUPPRFW6

As you know, parents and children sometimes support each other in different ways. The following questions are about how family members may help each other. Do you help your children and/or children-in-law in any of the following ways?

(INTERVIEWER – Show Display Card 18)

Questions 277 to 288 - meaning of labels:

Never  1
Rarely  2
Sometimes  3
Often  4

277. Give gifts, apart from money?  GIFT4CW6

278. Help out with money?  MONY4CW6

279. Help out when someone is ill?  CNDILLW6

280. Help keep house and fix things around the house?  HSMNCHW6

281. Take care of grandchildren or babysit for a while when parents are out?  SITGRDW6

Do your children and/or children-in-law support you in any of the following ways?

(INTERVIEWER – Show Display Card 18)

282. When you are ill (or when your husband or wife is ill)?  CHHPILW6

283. Give gifts, apart from money?  GIFTFRW6

284. Help out with money?  MONYFRW6

285. Shop or run errands for you?  CHSHOPW6
286. Help keep house or fix things around the house for you?  

287. Prepare meals for you?  

288. Drive you places such as a doctor, shopping, church?  

289. 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  
   No 2  

290. What is their relationship to you?  
   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  

291. Again, from all the people you know, is there any OTHER 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  
   No 2  

292. What is their relationship to you?  

293. 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?  
   Yes 1  
   No 2  

294. Who is that? (INTERVIEWER-Record up to 3 carers if required)  
   Spouse 1  
   Other household member 2  
   Other relative 3  
   Other friend 4  
   Community or government agency 5  
   Paid private source 6  
   Other 7  

295. 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?  
   Spouse 1  
   Daughter 2  
   Son 3  
   Brother or sister 4  
   Other relative 5  
   Neighbour 6  
   Friend 7  
   Other 8  
   No one 9  

I now have a few questions about the person with whom you have the greatest involvement in caring for.  

296. Who is this person?  
   Spouse 1  
   Parent including in-laws 2  
   Child including in-laws 3  
   Brother including in-laws 4  
   Sister including in-laws 5
297. About how many hours a week do you usually spend caring for him or her? [HRCRPRW6]

298. How stressful is it for you to care for him or her or to arrange for his or her care? [STRSPRW6]

   - Very stressful 1
   - Quite stressful 2
   - Somewhat stressful 3
   - Not at all stressful 4

The next few questions are about your general satisfaction with life. Could you choose a category from this card which best applies to you.

(INTELLRIEVER – Show Display Card 19)

Questions 299 to 306 - meaning of labels:

   - Extremely satisfied 1
   - Very satisfied 2
   - Satisfied 3
   - Somewhat dissatisfied 4
   - Very dissatisfied 5

299. Are you satisfied with the area where you live? [SATPLAW6]

300. Are you satisfied with your own health and physical condition? [SATPHYW6]

301. Are you satisfied with your financial situation? [SATFINW6]

302. Are you satisfied with your friendships? [SATFRIW6]

303. Are you satisfied with your marriage? [SATMARW6]

304. Are you satisfied with your family life? [SATFAMW6]

305. Are you satisfied with the way you handle problems that come up in your life? [SATPROW6]

306. Are you satisfied with your life in general? [SATLIFW6]

307. When it comes to making major family decisions, who has the final say? (e.g. when to retire, where to live, how much money to spend on major purchases).

   - You 1
   - Your partner/spouse 2
   - You and your partner/spouse equally 3

(FAMDECW6)

308. Do you look after or care for any pets? [CAREPEW6]

   - Yes 1
   - No 2

309. Specify type of pets. [TYPEPEW6]

310. Have you been a victim of a serious physical attack or assault in the last 2 years? [ASSLTW6]

311. Have you been robbed or was your home burglarised in the last 2 years? [ROBW6]

312. Have you lost anyone close to you through death in the last 2 years? (INTERVIEWER – if yes, complete details below) [BRVW6]

313. Who was it that died?

   - Spouse 1
   - Child 2
   - Child-in-law 3
   - Grandchild 4 [WHO1W6 – WHO3W6]
I now have a few questions about smoking.

314. Do you currently smoke cigarettes? Yes 1 No 2

315. How many cigarettes do you usually smoke a day? CIGDAYW6

316. Do you currently smoke a pipe or cigars? Yes 1 No 2

The next few questions are about alcoholic beverages.

317. How often do you have a drink containing alcohol? Never 1 Monthly or less 2 2 to 4 times a month 3 2 to 3 times a week 4 4 or more times a week 5

318. How many standard drinks containing alcohol do you have on a typical day when you are drinking? (INTERVIEWER – Show Display Card 20) 1 or 2 1 3 or 4 2 5 or 6 3 7 to 9 4 10 or more 5

319. How often do you have 6 or more drinks on one occasion? (INTERVIEWER – Show Display Card 21) Never 1 Less than monthly 2 Monthly 3 Weekly 4 Daily or almost daily 5

Now I have some questions about how you spend your leisure time.

320. In the past two weeks did you engage in vigorous exercise? (exercise which made you breathe harder or puff or pant such as tennis, jogging, etc? exclude walking) Yes 1 No 2

321. How many sessions of vigorous exercise did you engage in over the past 2 weeks? VIGEXCW6

322. How much time did you spend exercising vigorously during the past 2 weeks? (INTERVIEWER – enter number of minutes) TMVEXCW6

323. In the past 2 weeks, did you engage in less vigorous exercise for recreation, sport or health-fitness purposes which did not make you breathe harder or puff and pant? (exclude walking) Yes 1 No 2

324. How many sessions of less vigorous exercise did you engage in over the past 2 weeks? (exclude walking) LSVEXCW6

325. In the past two weeks, did you walk for recreation or exercise? Yes 1 No 2

326. How many times did you walk for recreation or exercise in the past 2 weeks? HWMNWKW6

327. In the past 2 weeks, in the course of your tasks around the house, were you involved in moderate to heavy physical exertion which made you breathe harder or puff or pant? Yes 1 No 2
328. How much time were you involved in moderate to heavy physical exertion tasks at (work or) home during the past 2 weeks? (INTERVIEWER-enter number of hours)

329. How many group meetings or gatherings did you go to in the past month?

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

I am now 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.

331. 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.)

332. How often have you washed the dishes? (Must do it all or share equally e.g. washing or wiping and putting away, not just rinsing occasional items.)

333. How often have you washed clothes? (Organisation of washing and drying of own clothes, whether in a washing machine, by hand or at a laundrette.)

334. How often have you done light housework? (Such as dusting, polishing, sweeping, tidying up.)

335. How often have you done heavy housework? (Taking out the garbage, cleaning floors, vacuuming, washing windows, moving chairs.)

336. How many hours of voluntary or paid employment have you done? None

337. How often have you cared for other family members? (Caring for a sick relative, baby sitting, caring for a spouse, etc.)

338. How often have you done household shopping? (Must play a substantial role in
the organisation and buying of the shopping e.g. groceries, fruit and vegetables. Also includes paying household bills.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>1</td>
</tr>
<tr>
<td>About once a month</td>
<td>2</td>
</tr>
<tr>
<td>About once a fortnight</td>
<td>3</td>
</tr>
<tr>
<td>Once a week or more</td>
<td>4</td>
</tr>
</tbody>
</table>

339. How often have you done personal shopping? (Must play a substantial role in the organisation and buying of the shopping e.g. clothing, toiletries, gifts.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>1</td>
</tr>
<tr>
<td>Once in three months</td>
<td>2</td>
</tr>
<tr>
<td>About once a month</td>
<td>3</td>
</tr>
<tr>
<td>About once a fortnight</td>
<td>4</td>
</tr>
<tr>
<td>Once a week or more</td>
<td>4</td>
</tr>
</tbody>
</table>

340. How often have you done light gardening? (Weeding, watering, sweeping paths, potting.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>1</td>
</tr>
<tr>
<td>About once a month</td>
<td>2</td>
</tr>
<tr>
<td>About once a fortnight</td>
<td>3</td>
</tr>
<tr>
<td>Once a week or more</td>
<td>4</td>
</tr>
</tbody>
</table>

341. How often have you done heavy gardening? (Digging garden beds, pruning, mowing lawns.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>1</td>
</tr>
<tr>
<td>About once a month</td>
<td>2</td>
</tr>
<tr>
<td>About once a fortnight</td>
<td>3</td>
</tr>
<tr>
<td>Once a week or more</td>
<td>4</td>
</tr>
</tbody>
</table>

342. How often have you done household and/or car maintenance? (Cleaning gutters, painting, doing minor repairs, servicing and/or washing the car.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>1</td>
</tr>
<tr>
<td>Once in three months</td>
<td>2</td>
</tr>
<tr>
<td>About once a month</td>
<td>3</td>
</tr>
<tr>
<td>About once a fortnight</td>
<td>4</td>
</tr>
<tr>
<td>Once a week or more</td>
<td>4</td>
</tr>
</tbody>
</table>

343. How often have you needed to drive a car or organise your own transport? (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.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>1</td>
</tr>
<tr>
<td>Up to once a month</td>
<td>2</td>
</tr>
<tr>
<td>Up to once a fortnight</td>
<td>3</td>
</tr>
<tr>
<td>Once a week or more</td>
<td>4</td>
</tr>
</tbody>
</table>

344. How often have you invited people to your home? (Implies either casual or formal social contact e.g. having people to dinner, inviting people for a cup of tea, card evenings. Includes standing invitations to family and close friends.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than once a fortnight</td>
<td>1</td>
</tr>
<tr>
<td>About once a fortnight</td>
<td>2</td>
</tr>
<tr>
<td>About once a week</td>
<td>3</td>
</tr>
<tr>
<td>More than once a week</td>
<td>4</td>
</tr>
</tbody>
</table>

345. How often have you spent some time on a hobby? (Must require some active participation and thought e.g. knitting, crosswords, painting, gardening, games, letter writing, not just watching TV.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>1</td>
</tr>
<tr>
<td>About once a month</td>
<td>2</td>
</tr>
<tr>
<td>About once a fortnight</td>
<td>3</td>
</tr>
<tr>
<td>Once a week or more</td>
<td>4</td>
</tr>
</tbody>
</table>

346. How many hours have you spent reading books, magazines or newspapers?

<table>
<thead>
<tr>
<th>Hours</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 2 hours a week</td>
<td>1</td>
</tr>
<tr>
<td>2 to 5 hours a week</td>
<td>2</td>
</tr>
<tr>
<td>5 to 10 hours a week</td>
<td>3</td>
</tr>
<tr>
<td>Over 10 hours a week</td>
<td>4</td>
</tr>
</tbody>
</table>

347. How many telephone calls have you made to friends or family? (Emphasis is on making calls NOT receiving calls.)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>1</td>
</tr>
</tbody>
</table>
348. 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.)

- Up to 3 calls a week  2
- 4 to 10 calls a week  3
- Over 10 calls a week  4

349. 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.)

- Less than once a month  1
- About once a month  2
- About once a week  3
- More than once a week  4

350. How often have you attended religious services or meetings?

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

351. How often have you participated in an outdoor social activity? (BBQs, picnics, spectator sports, etc.)

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

352. How often have you spent some time outdoors participating in a recreational or sporting activity? (Bowls, fishing, golf, etc. Excludes spectator sports.)

- Never  1
- About once a month  2
- About once a week  3
- More than once a week  4

353. 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.)

- About once a month or less  1
- About once a fortnight  2
- About once a week  3
- Most days  4

354. How often have you gone for a drive or been on an outing? (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

355. Do you own a car?

- Yes  1
- No  2

356. 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

357. In the past 12 months, have you CHANGED your driving habits because of concerns related to your age or your health?

- Yes (specify below)  1
- No  2

358. Please specify how you have changed your driving habits.
Now I would like to ask you about your housing.

(INTERVIEWER – If respondent in institution, ask questions 370 through to 374 only, and then move to question 377.)

359. Is this house, flat or unit being rented by you or any other usual resident of the household? Yes 1

No 2

360. Who is the rent paid to? SA Housing Trust 1

Person in dwelling 2

Landlord or Real Estate Agent 3

Other 4

361. What is the total rent each week (total dollars)?

362. Is this house, flat or unit being paid off or is it owned? Yes, being paid off 1

Yes, owned 2

No 3

363. What is the total repayment each week (total dollars)?

364. In which of these categories does the marked value of your house, flat or unit fall?

(INTERVIEWER – Show Display Card 22.)

365. How many main rooms do you have in this house, flat or unit? (Do not include bathrooms, porches, balconies or foyers.)

366. What is the MAIN thing you like about living in this home?

367. What is the MAIN thing you really do not like about living in this home?

368. Are there changes or alterations required to the home which would make it easier or safer for you to live her or to live more independently? Yes 1

No 2

369. What are the MAIN alterations or changes that are needed to make it easier to live here?

(INTERVIEWER- Show Display Card 23. Multiple selections permitted)

370. Have you moved in the last 6 years.

Yes 1

No 2

371. Do you intend to move house (again)? Yes 1

No 2

372. For what reason do you intend to move (again)?

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

373. What sort of accommodation would you like to move to?

(INTERVIEWER – Show Display Card 24.)

374. Have you put your name down for any special aged accommodation or retirement village in the last two years? Yes 1

No 2
375. This list shows sources of housing assistance. Which of these, if any, are you CURRENTLY receiving as housing assistance?  
(INTERVIEWER – Show Display Card 26)  

376. This list shows sources of financial housing assistance. In the past, which of these, if any, have you ever received as housing assistance?  
(INTERVIEWER – Show Display Card 26)  

Now I would like to ask you about any benefit cards and your income and any benefits.

377. This card lists various benefit cards. Which of these do you currently hold?  
(INTERVIEWER-Show Display Card 27. If more than one card, detail below.)  

378. Please specify other benefit(s).  

379. This card lists various sources of income. Which of these do you (and your partner) currently receive as income?  
(INTERVIEWER – Show Display Card 28. If more than one income source, detail below.)  

380. If we include the income from all these source, 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 Display Card 29)  

381. How well does the amount of money you have take care of your needs?  

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very well</td>
<td>1</td>
</tr>
<tr>
<td>Fairly well</td>
<td>2</td>
</tr>
<tr>
<td>Poorly</td>
<td>3</td>
</tr>
</tbody>
</table>

382. How well does the amount of money you have take care of your large annual expenses?  

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very well</td>
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</tr>
<tr>
<td>Fairly well</td>
<td>2</td>
</tr>
<tr>
<td>Poorly</td>
<td>3</td>
</tr>
</tbody>
</table>

383. Do you usually have enough to buy those little extras i.e. small luxuries?  

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
</tbody>
</table>

384. 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 Display Card 30.)  

385. Do you currently work in a paid job?  

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
</tr>
</tbody>
</table>

386. How many hours did you work last week?  

387. Contact details – We need some information to help us locate participants in the future. Could you please give me the name, address and telephone number of three persons, including at least one son or daughter if they live in South Australia, and one brother or sister if they live in South Australia, who do not live with you and who would know where you are in case we needed to make contact with you?  

387.1 Full name.  

387.2 Address  

387.3 Telephone number
387.4 Relationship to participant?

CREL1W6 – CREL3W6