

Variable:	HEARINGDF_A
Module:	Adult
Section:	HEA
File(s):	Adult
Data Type:	Numeric
Length:	1
Question Text:	Do you have difficulty hearing^HEARAIID? Would you say no difficulty, some difficulty, a lot of difficulty, or you cannot do this at all?
Fills:	^HEARAIID , even when using your hearing aid(s)
Description:	Difficulty hearing
Recode:	
Universe:	HHSTAT_A=1
Universe Description:	Sample adults 18+
Sources:	
Question ID:	HEA.0030.00.1
Keywords:	hearing; difficulty hearing; hearing aid; disability
Notes:	This question is part of the Washington Group Composite Disability Indicator for adults.
Evaluation Report:	