

ICPSR 34315

The Irish Longitudinal Study on Ageing (TILDA), 2009-2011

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Data Collection Instrument

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The **Irish** Longitudinal Study on Ageing

**15-04-10
FINAL**

**Main Questionnaire
Main Stage
2009**

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EXPLANATORY NOTE ON THE USE OF CAPI IN THE TILDA PILOT

The TILDA field questionnaire will use CAPI, or Computer Assisted Personal Interviewing. Instead of collecting data using pen and paper questionnaires, interviewers will use portable computers to enter data directly via a keyboard. While the paper version that has been submitted to the ethics committee may appear cumbersome, the conversion of the questions into an electronic format will make the questions much easier and quicker to administer. Advantages of CAPI include:

- routing problems within the questionnaire are eliminated
- interviewers cannot miss questions or ask the wrong questions
- questions are 'customised' correctly
- mathematical calculations can be carried out within the program
- the computer checks for inadmissible or inconsistent responses
- errors from separate data entry are eliminated.

CAPI handles routing by taking interviewers automatically to the next appropriate question avoiding the interviewer having to interpret complex routing instructions. In addition, if a set of questions has to be asked a number of times (for example, for every type of heart disease), the computer will automatically repeat the questions (go round the 'loop') the correct number of times and then move on. CAPI's routing capabilities have two main advantages over paper and pencil techniques. First, the possibility of error from interviewers failing to follow routing instructions is eliminated; they cannot follow a wrong route and ask inappropriate questions nor can they inadvertently skip over questions. Secondly, the interview flows much more smoothly since the interviewer does not have to keep referring to earlier answers to establish the correct route through the questions. Interviewing is also made easier by the 'customising' of questions. The computer program will be able to recall a piece of data from its memory, such as a name or a date and insert it in the appropriate place in a question. For example, questions such as: "How often do/does (you/NAME) give (TYPE OF HELP)?". Using CAPI interviewers would not have to keep a check on which member of the household and which type of help they are asking about. Instead they would be faced with a series of questions like "How often does Mary help with the shopping?". In this way the accuracy of the question and the smoothness of the interview are both improved.

ALLOCATION OF MODULES TO RESPONDENTS

Module Code	Module Name	All respondents	Financial respondents	Family Respondent
1. CS	Coverscreen			
2. SC	Self-completion questionnaire	X		
3. DM	Demographics	X		
4. TC	Transfers to Children*			X
5. PH	Physical health & cognitive function	X		
6. FL	I(ADL) & helpers	X		
7. HU	Healthcare utilisation	X		
8. MH	Mental health	X		
9. WE	Employment situation	X		
10. JH	Job history	X		
11. LE	Lifelong learning	X		
12. WR	Planning for retirement	X		
13. BH	Behavioural health	X		
14. TP	Transfers to parents	X		
15. CN	Social Connectedness	X		
16. SI	Sources of income	X		
17. HO	House ownership*		X	
18. AS	Other Assets*		X	
19. EX	Expectations	X		
20. DR	Driving and Transport	X		
21. MD	Medications	X		
22. CT	Contact Names	X		
23. HA	Health Assessment	X		
24. FN	Final Check List	X		

Not asked in CAPI script

CM001. First, I would like to ask if there are any persons aged 50 or over living in this household?

1. Yes
2. No

BL:IF CM001=2 (NO) end of the interview

NOTE: a household consists of all persons - who live in the same dwelling (using the same entrance door) and- who have a common housekeeping budget or usually have their meals together. exceptions: lodgers (persons who sublet) are not considered members of the household, even though they may occasionally have dinner with the host.

SECTION 1. COVER SCREEN-H (HOUSEHOLD – ONLY ASKED ONCE)

NOTE: Person giving details about the householders is a potential respondent i.e. aged 50 or over or married/living as married with someone aged 50 or over

CS027:

IWER(CODE WITHOUT ASKING):: IS THIS DWELLING LOCATED

1. IN DUBLIN CITY OR COUNTY
2. A CITY OR TOWN IN THE REPUBLIC OF IRELAND OTHER THAN DUBLIN
3. IN A RURAL PART OF THE REPUBLIC OF IRELAND

CF001x: IWER: Has the respondent signed the consent form?

1. Yes (Go to CF001b)
5. No (IWER: Ask respondent to sign consent form and tick 'Yes')

CF001bx:

INTERVIEWER READ OUT

As I explained earlier this is a longitudinal study which means that people who take part will be visited once every two years. Are you willing to be re-contacted to participate in a similar interview in the next 2 years? Again at this stage your participation will be voluntary.

NOTE:

If respondent says no, you should make every effort to persuade the respondent of the importance of the study and the benefits to people living in Ireland.

Also attempt to understand reasons for not wanting to be re-contacted and address these i.e.give assurances on confidentiality and anonymity.

If respondent still says that they do not wish to be re-contacted code 'NO' but you may continue with this interview.

Yes

No

CS INTRO: IWER: This study is interested in learning about the health, life style, financial and family situation of people who are age 50 and over. This interview is completely voluntary and confidential. If we should come to any question you don't want to answer, just let me know and I will go on to the next question. The answers that you give will be kept confidential and will be used only for research purposes

1. Continue

CM002: In order to determine who is eligible to be interviewed, I need to ask a few questions about each household member, like name, sex, and date of birth. Let's start with you.

1. Continue

CS001: What name would you like to be referred to during the interview.

Text: up to 60 characters

CS002: In which month and year were you born?

MONTH: ____ YEAR: ____

DK ____ MONTH

DK ____ YEAR

RF ____ MONTH

RF ____ YEAR

BL:IF CS002=DK or RF then GO TO CM003, OTHERWISE GO TO CS004

CM003: For the purposes of this research can you tell me if you are aged

READ OUT

2	16 to 24	8	65 to 69
3	25 to 49	9	70 to 74
4	50 to 54	10	75 to 79
5	55 to 59	11	80 to 84
6	60 to 61	12	85 to 89
7	62 to 64	13	90 or over

CS004: IWER: (Code without asking.) Is Respondent male or female?

1. MALE

2. FEMALE

(HRS/ELSA/SHARE)

CM004: Are you...

IWER: READ OUT

1. Living with a spouse

2. Living with a partner

3. Living as a single person (including widows, separated etc.)

BL: IF CM004_ (LIVING WITH SPOUSE/PARTNER) <=2 then GO TO CS007.

IF CM004_ (SINGLE) =3 then GO TO CM007

CS007: What is [your] [wife/husband/partner]'s first name?

CS010: IWER: note sex of [wife/husband/partner] of respondent (ASK IF UNSURE)

1. Male

2. Female

CM005: How old is your {{[wife/husband/partner]}}?

98 DK

99 RF

BL:IF CM005=98 OR 99 THEN GO CM006, OTHERWISE CM007

IF CS012<18 then

CM006: Is your [husband/wife/partner] aged...?

READ OUT

2	16 to 24	8	65 to 69
3	25 to 49	9	70 to 74
4	50 to 54	10	75 to 79
5	55 to 59	11	80 to 84
6	60 to 61	12	85 to 89
7	62 to 64	13	90 or over

CM007: Excluding yourself [and your husband/wife/partner], does anyone else live in this household?

1. Yes

5. No

IWER: a household consists of all persons - who live in the same dwelling (using the same entrance door) and- who have a common housekeeping budget or usually have their meals together. Exceptions: lodgers (persons who sublet) are not considered members of the household, even though they may occasionally have dinner with the host. Children living together with their parents at the parents' address, or parents living together with their children at the children's address will be considered members of the household whether or not they have a common housekeeping budgets for meals.

BL: IF CM007_ (SOMEONE ELSE IN THE HOUSEHOLD) = 1. Yes then LOOP CM008 through CM019

OTHERWISE GO TO NEXT SECTION

CM008: What is his or her first name? [cm008_1 to cm008_10]

CM009: What is the sex of [{first name household member}]? [cm009_1 to cm009_10]

1. Male

2. Female

CM011: How old is [{first name household member}]? [cm011_1 to cm011_10]

98 DK

99 RF

BL:IF CM011=98 OR 99 THEN GO CM012, OTHERWISE CM010

CM012: Is [{first name household member}] aged...? [cm012_1 to cm012_10]

READ OUT

1	Under 16	8	65 to 69
2	16 to 24	9	70 to 74
3	25 to 49	10	75 to 79
4	50 to 54	11	80 to 84
5	55 to 59	12	85 to 89
6	60 to 61	13	90 or over
7	62 to 64		

CM010: What is [his/her] relationship to you? [cm010_1 to cm010_10]

1. Child/ adopted child
2. Step Child
3. Child-in-law (daughter-in-law, son-in-law)
4. Parent
5. Parent-in-law
6. Brother or sister
7. Brother-in-law/Sister-in-law
8. Grandparent
9. Grandparent-in-law
10. Grandchild
11. Other relative (specify) } [cm010o_1 to cm010o_10]
12. Non-relative (specify) }

IF CM011<18 set CM013 = 3 and then GO TO CM019

CM013: Is [{first name household member}] living with a spouse, with a partner, or as a single? [cm013_1 to cm013_10]

1. Living with a spouse
2. Living with a partner
3. Living as a single person (including widows, separated etc.)

BL:IF CM013=3. (Living as a single) then go to CM019

CM014: What is his or her first name? [cm014_1 to cm014_10]

CM015: What is the sex of [{first name household member's husband/wife/partner}]? [cm015_1 to cm015_10]

1. Male
2. Female

CM017: How old is [{first name household member's husband/wife/partner}]? [cm017_1 to cm017_10]

98 DK

99 RF

BL:IF CM017=98 OR 99 THEN ASK CM018, OTHERWISE GO TO CM019X

CM018: Is [{first name household member's husband/wife/partner}] aged..

READ OUT

[cm018_1 to cm018_10]

1	Under 16	8	65 to 69
2	16 to 24	9	70 to 74
3	25 to 49	10	75 to 79
4	50 to 54	11	80 to 84
5	55 to 59	12	85 to 89
6	60 to 61	13	90 or over
7	62 to 64		

CM016: What is [his/her] [relationship] to you? [cm016_1 to cm016_10]

1. Child/ adopted child
2. Step Child
3. Child-in-law (daughter-in-law, son-in-law)
4. Parent
5. Parent-in-law
6. Brother or sister
7. Brother-in-law/Sister-in-law
8. Grandparent
9. Grandparent-in-law
10. Grandchild
11. Other relative (specify): } [cm016o_1 to cm016o_10]
12. Non-relative (specify) }

IF (CM011 >= 50 OR CM012 = (4 TO 12)) AND CM013 = 3 SET CM019X = 1

IF (CM011 >= 50 OR CM012 = (4 TO 12)) OR (CM017 >=50 OR CM018 = (4 OR 12)) SET CM019X = 2

OTHERWISE CM019X = 3

CM019X: [cm019x_1 to cm019x_10]

1. Person listed at CM008 eligible for interview
2. Persons listed at CM008 and CM014 eligible for interview
3. No one in this loop is eligible for interview

CM019: Does anyone else live in this household? [cm019_1 to cm019_10]

1. Yes LOOP CM008 to CM019

5. No

BL:IF CM019=5 then end loop, GO TO CM020

CM020: Let me just check. That makes [{number of people in household}] people living in this household altogether? Is that correct?

1. Yes

5. No

CM021: IWER: READ OUT LOUD ALL NAMES ON THE HOUSEHOLD

GRID.[AllRespondents] Have we left anyone out?

1. Yes CHECK: Please go back and add this person.

5. No Continue

SECOND SCRIPT STARTS HERE

SECTION 1.1. COVER SCREEN-R (INDIVIDUAL INTERVIEW)

CF001: IWER: Has the respondent signed the consent form?

- 1. Yes (Go to CF001b)
- 5. No (IWER: Ask respondent to sign consent form and tick 'Yes')

CF001b:

INTERVIEWER READ OUT

As I explained earlier this is a longitudinal study which means that people who take part will be visited once every two years. Are you willing to be re-contacted to participate in a similar interview in the next 2 years? Again at this stage your participation will be voluntary.

NOTE:

If respondent says no, you should make every effort to persuade the respondent of the importance of the study and the benefits to people living in Ireland.

Also attempt to understand reasons for not wanting to be re-contacted and address these i.e.give assurances on confidentiality and anonymity.

If respondent still says that they do not wish to be re-contacted code 'NO' but you may continue with this interview.

Yes

No

CF002 known from CM004 or CM013

CF002: IWER: Does the respondent have a spouse/partner living with him/her?

- 1. Yes (Go To CF003)
- 5. No (Go To CS017 and code as 3)

CF003: IWER: Are both willing to participate in the survey?

- 1 Yes
- 5. No (CAPI: treat as a single person; Go To CS017 and code as 3)

CF004: IWER: Has the second respondent signed the consent form?

- 1. Yes
- 5. Not yet. Second respondent not present.

BL: If CF003=1 then ask CS015, CS016

BL: Ask CS015 and CS016 only of first member of couple

CS015: Later in this interview, I will be asking questions about your family finances and retirement planning. Which of you is the most knowledgeable about this, you or your (husband/wife/partner)?

1. Respondent
2. Spouse/partner
(HRS/SHARE)

CS016: Which of you is the most knowledgeable about family matters, you or your (husband/wife/partner)?

1. Respondent
2. Spouse/partner
(HRS/SHARE)

IF CS015 = 1 AND CS016 = 2 SET CS017 = 1

IF CS015 = 2 AND CS016 = 1 SET CS017 = 2

IF CS015 = 1 AND CS016 = 1 SET CS017 = 3

IF CS015 = 2 AND CS016 = 2 SET CS017 = 4

IF ANY OTHER COMBINATION SET CS017 = 3

CS017: Please classify this respondent as one of the following:

1. FINANCIAL R
2. FAMILY R
3. FINANCIAL AND FAMILY R
4. NEITHER

Financial R: The financial R answers questions on housing, income, and assets.

Family R: The family R answers questions on children and grandchildren

SECTION 2: SELF-COMPLETION QUESTIONNAIRE (SC)

BL: IF CF003 = 1 then SC001 comes after CS and starts as

SC001: I would now like to ask each of you some questions on your own. While [name[1]] answers these questions I would like [name[2]] to leave the room and complete a paper questionnaire. When [name[1]] has finished I'll ask [name[2]] to come back in and we can swap over so that [name[1]] does the paper questionnaire and [name[2]] answers the questions on [his/her] own.

Iwer:

- 1) Write the five character Tilda Serial Number and the respondents' initials on the cover of the self-completion questionnaire
- 2) Give Self-Completion to [INAME[1]] and ask [him/her[1]] to complete after [he/she] finishes the questionnaire
- 3) Give Self-Completion to [INAME[2]] and ask [him/her[2]] to leave the room.

IWER: PLEASE WRITE THE TILDA SERIAL NUMBER IN CAPITAL LETTERS

BL: OTHERWISE

SELF-COMPLETION QUESTIONNAIRE IS GIVEN AFTER COMPLETION OF THE WHOLE INTERVIEW)

SC001: This is the end of the interview. Thank you for taking part. Before I go, I would like to give you this paper questionnaire for you to fill in your own time.

Iwer:

- 1) Write the five character Tilda Serial Number and the respondents' initials in the cover of self-completion questionnaire
- 2) Give Self-Completion booklet to respondent at the end of this interview

IWER: PLEASE WRITE THE TILDA SERIAL NUMBER IN CAPITAL LETTERS

SECTION 3. DEMOGRAPHICS (DM)

I would like to begin by asking some questions about your background.

1. Continue

GD001: Respondent's NAME

GD002: IWER: Code without asking

Is this respondent male or female?

1. Male

2. Female

BL: DN002 Not asked if CS002 was answered. Data copied forward

DN002: In which month were you born? MONTH

1. January

2. February

3. March

4. April

5. May

6. June

7. July

8. August

9. September

10. October

11. November

12. December

BL: DN003 Not asked if CS002 was answered. Data copied forward

DN003: In which year were you born? YEAR:(ex:1955)

DN003b: For the purposes of this research can you tell me if you are aged..

READ OUT

2	16 to 24
3	25 to 49
4	50 to 54
5	55 to 59
6	60 to 61
7	62 to 64

8	65 to 69
9	70 to 74
10	75 to 79
11	80 to 84
12	85 to 89
13	90 or over

SHOW CARD CS1

CS006: [For the first interview read out] Can I just check again, are you ...

[Otherwise] Are you...

1. Married
2. Living with a partner as if married
3. Single (never married) **GO TO DM001**
4. Separated
5. Divorced
6. Widowed

(HRS)

Note:

Married includes those living temporarily apart due to illness, work, etc..

Living with a partner is a situation where there is no formal marriage but R is living in a marriage-like relationship.

Separated is a situation where R is not living with partner and there is no marriage-like relationship anymore.

IF CS006 = 1, 4, 5 OR 6 ASK

CS011y: In which year did you get married or start living together?

IF CS006 = 2 ASK

CS011y: In which year did you start living together?

(YYYY)

_____ DK RF YEAR

(HRS/MHAS/SHARE/ELSA)

CHECK: Year marriage should be at least 12 years after year of birth of respondent!

DN004: In which year was [your] [ex-/late] [husband/wife/partner] born?

IWER: RECORD BIRTH YEAR OF MOST RECENT SPOUSE

(1900..1990)

IF (CS006 = 4, 5, 6) ASK DN005

DN005: HIGHEST EDUCATIONAL DEGREE OF FORMER SPOUSE

Please look at DM1. What is the highest school certificate or degree that [your] [ex-/late] [husband/wife] [has/had] obtained?

1. Some primary (not complete)
2. Primary or equivalent
3. Intermediate/junior/group certificate or equivalent
4. Leaving certificate or equivalent
5. Diploma/certificate
6. Primary degree
7. Postgraduate/higher degree
96. None
98. DK
99. RF

BL:

IF CS006=6 (WIDOWED) GO TO CS012 THEN GO TO DM001

IF CS006= 1 OR CS006=2 (MARRIED OR COHABITING) GO TO CS014

IF CS006=4 OR CS006=5 (SEPARATED/DIVORCED) GO TO CS013 THEN TO DM001

CS012: In which year did you become a widow/widower?
(YYYY)

_____ DK RF YEAR
(HRS/MHAS/SHARE/ELSA)

BL: GO TO DM001

CS013: In which year did you stop living together/get divorced? (MM/YYYY)
(YYYY)

_____ DK RF YEAR
(HRS/MHAS/SHARE/ELSA)

BL: GO TO DM001

IF CS006 = 1, 2, 4 or 5 AND CF002 = 5

CS014: Is your (ex) (husband/wife/partner) living in a nursing home, hospital or other health care institution?

- 1. Yes
- 5. No
- 98. DK
- 99. RF

Note: Living means living long term
(HRS/MHAS/SHARE/ELSA)

BL: GO TO CS017

Schooling

IWER: PLEASE SHOW CARD DM1

DM001: Now I would like to ask some questions about your background. What is the highest level of education you have completed?

- 1. Some primary (not complete)
 - 2. Primary or equivalent
 - 3. Intermediate/junior/group certificate or equivalent
 - 4. Leaving certificate or equivalent
 - 5. Diploma/certificate
 - 6. Primary degree
 - 7. Postgraduate/higher degree
 - 96. None
 - 98. DK
 - 99. RF
- (TILDA)

Childhood

DM002: Where was your father brought up?

IWER: This is the male who acted in the parental role for most of the respondent's childhood i.e. biological father, adoptive father, step father etc

1. In Dublin city or county
2. A city or town in the Republic of Ireland other than Dublin
3. In a rural part of Republic of Ireland
4. In Northern Ireland
5. Another country

98 DK

99 RF

(TILDA)

DM003: Where was your mother brought up?

IWER: This is the female who acted in the parental role for most of the respondent's childhood i.e. biological mother, adoptive mother, step mother etc

1. In Dublin city or county
2. A city or town in the Republic of Ireland other than Dublin
- 3 In a rural part of Republic of Ireland
4. In Northern Ireland
5. Another country

98 DK

99 RF

(TILDA)

DM004: Were you living in a rural area when you were about age 14?

1. Yes

5. No

98 DK

99 RF

(TILDA)

DM005: Consider your health while you were growing up, from birth to age 14. Would you say that your health during that time was excellent, very good, good, fair, or poor?

1. Excellent

2. Very good

3. Good

4. Fair

5. Poor

98 DK

99 RF

(TILDA)

DM006: Now think about your family when you were growing up, from birth to age 14. Would you say your family during that time was pretty well off financially, about average, or poor?

- 1. Pretty well off financially
 - 2. About average
 - 3. Poor
 - 98. DK
 - 99. RF
- (HRS (age 10)/ ELSA (age 14))

DM007A: While you were growing up, before age 14, did your mother ever work outside the home? **(Farm work is to be regarded as work outside the home).**

- 1. Yes **GO TO DM007B**
 - 5. No **GO TO DM008A**
 - 98. DK **GO TO DM008A**
 - 99. RF **GO TO DM008A**
- (TILDA)

DM007B: What was your mother's occupation when you were age 14?

IWER: If mother had two professions ask the following questions about the most important job, i.e. one with highest pay

Text: Up to 60 characters

- 98. DK
- 99. RF

DM008A: While you were growing up, before age 14, did your father ever work outside the home? **(Farm work is to be regarded as work outside the home).**

- 1. Yes **GO TO DM008B**
 - 5. No **GO TO DM009**
 - 98. DK **GO TO DM009**
 - 99. RF **GO TO DM009**
- (TILDA)

DM008B: What was your father's occupation when you were age 14?

IWER: If father had two professions ask the following questions about the most important job, i.e. one with highest pay

Text: Up to 60 characters

- 98. DK
 - 99. RF
- (TILDA)

IWER: PLEASE SHOW CARD DM1

DM009: What was the highest grade of school your father completed?

1. Some primary (not complete)
 2. Primary or equivalent
 3. Intermediate/junior/group certificate or equivalent
 4. Leaving certificate or equivalent
 5. Diploma/certificate
 6. Primary degree
 7. Postgraduate/higher degree
 96. None
 98. DK
 99. RF
- (HRS/ELSA)

IWER: PLEASE SHOW CARD DM1

DM010: And what was the highest grade of school your mother completed?

1. Some primary (not complete)
 2. Primary or equivalent
 3. Intermediate/junior/group certificate or equivalent
 4. Leaving certificate or equivalent
 5. Diploma/certificate
 6. Primary degree
 7. Postgraduate/higher degree
 96. None
 98. DK
 99. RF
- (HRS/ELSA)

Migration History

DM011: Were you born in the Republic of Ireland?

1. Yes **GO TO DM0015**
 5. No **GO TO DM012**
- (HRS)

DM012: In which country were you born?

Text: up to 60 characters

98. DK
 99. RF
- (HRS)

DM013: At what age did you first move to the Republic of Ireland?

0 ... 100

98. DK
 99. RF
- (HRS)

DM014: What is your nationality?

Text: up to 60 characters

98. DK

99. RF

(HRS)

DM015: (Since coming to Ireland) Have you always lived in this **county**?

1. Yes **GO TO DM024**

2 . No **GO TO DM016**

98. DK **GO TO DM016**

99. RF **GO TO DM016**

(MHAS/TILDA)

DM016: About how many years have you lived in this **county**? IF LESS THAN 6

MONTHS CODE 0 **CODE 6 TO 12 MONTHS AS 1 YEAR**

0 ... 100

98. DK

99. RF

(MHAS/TILDA)

BL:

IF DM011=1 & DM015 ≠ 1 – GO TO DM017

IF DM011=5 & DM015 ≠ 1 – GO TO DM024

DM017: Have you ever lived abroad (outside of Republic of Ireland) for more than six months?

1. Yes

5. No **GO TO DM024**

98 DK **GO TO DM024**

99 RF **GO TO DM024**

DM018: In total for how many years have you worked or lived in another country?

IWER: CODE 6 TO 12 MONTHS AS 1 YEAR

YEARS

98. DK

99. RF

(MHAS/TILDA)

DM019: Think about your first long stay in a country other than the Republic of Ireland. At what age did you go?

1 ... 100

98. DK

99. RF

(MHAS/TILDA)

Note: By long stay we mean a minimum stay of six months.

DM024:

IWER (CODE WITHOUT ASKING) : HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION DM?

1. NEVER
2. A FEW TIMES
3. MOST OR ALL TIMES

BL: GO TO NEXT SECTION

SECTION 4. TRANSFERS TO CHILDREN (TC)

IWER: CHECK IF RESPONDENT IS FAMILY RESPONDENT (CS017=2 or 3)

Non-resident Children

CS028: Next are some questions about your living children (and those of your husband/wife/partner) who don't live with you in your home. How many living children do you have that do not live with you in your home? Please count all natural children, fostered, adopted and stepchildren, including those of your husband/your wife/your partner.

Range: 0...20

IF CS028 = 0 GO TO CS034

CS029: Please tell me the name of [the oldest/next oldest] child that does **not** live in this household. **[cs029_1 to cs029_20]**

Text: up to 60 characters

98. DK

99. RF

(HRS/MHAS)

CS030: Is [name of child not living here] male or female? **[cs030_1 to cs030_20]**

1. Male

2. Female

98. DK

99. RF

(HRS/MHAS)

CS031: How old is [name of child not living here]? **[cs031_1 to cs031_20]**

YEARS

DK

RF

(HRS/MHAS)

CS031b: Which of these age groups applies to [name of child not living here]?

1. Under 16 **[cs031b_1 to cs031b_20]**

2. 16-24

3. 25-49

4. 50-59

5. 60-64

6. 65 or over

BL: IF CS031<16 GO TO CS029 (next child)

CS032: What is (name of child not living here)'s present marital status?

1. Married [cs032_1 to cs032_20]
2. Living with a partner as if married
3. Single (never married)
4. Separated
5. Divorced
6. Widowed
- 98 DK
- 99 RF
- (HRS/MHAS)

BL: IF [CHILD'S NAME] IS NOT MARRIED OR COHABITING (CS032=3, 4, 5, 6) GO TO CS029 (NEXT CHILD)

CS033: If (child's name) is married or lives with a partner, what is the name of (child's name's) spouse/partner?

[cs033_1 to cs033_20]

Text: up to 60 characters

98. DK
99. RF
- (HRS/MHAS)

BL: ONCE LOOP QUESTIONS ARE FINISHED GO TO CS034

CS034: In total, then, how many living children do you have? (including step, foster and adoptive children)

0 ... 20

(HRS/ELSA/SHARE)

BL: IF CS028 = 0 AND CS034 = 0 GO TO TC023

BL: REPEAT TC001 THROUGH TC007 FOR EACH CHILD

BL: IF CHILD IS UNDER 16 YEARS OLD ONLY ASK TC003

BL: IF ALL RESPONDENT'S CHILDREN ARE UNDER 16 YEARS-OLD ASK TC003 AND GO TO TC023

BL: ASK QUESTION TC001 ONLY FOR NON-CORESIDENT CHILD

BL: FOR A CHILD WHO CORESIDES WITH R, START ASKING QUESTION TC002

TC001: Let's talk about CHILD'S NAME. Where does CHILD'S NAME live?

[tc001_1 to tc001_20]

1. Same building as Respondent (but not the same dwelling)
2. Same neighbourhood as Respondent
3. Different neighbourhood but same county
4. Another county.
5. Another country.
98. DK
99. RF
- (MHAS)

TC002: Does CHILD'S NAME own a home?

[tc002_1 to tc002_20]

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (HRS)

IWER: SHOW CARD TC1

TC003: Please look at card TC1. What level of education has CHILD'S NAME attained?

IWER: CODE THE ONE THAT APPLIES

[tc003_1 to tc003_20]

- 1. Some primary (not complete)
- 2. Primary or equivalent
- 3. Intermediate/junior/group certificate or equivalent
- 4. Leaving certificate or equivalent
- 5. Diploma/certificate
- 6. Primary degree
- 7. Postgraduate/higher degree
- 96. None of these
- 98. DK
- 99. RF
- (HRS/MHAS)

IWER: SHOW CARD TC2

TC004: Please look at card TC2. What is CHILD'S NAME employment status?

IWER: CODE THE ONE THAT APPLIES

[tc004_1 to tc004_20]

- 1. Full-time employed
- 2. Part-time employed
- 3. Self-employed or working for family business
- 4. Unemployed
- 5. Education including vocational training or retraining
- 6. Maternity or paternity leave
- 7. Retired
- 8. Permanent sick or disabled
- 9. Looking after home or family
- 95. Other
- 98. DK
- 99. RF
- (HRS)

BL: ASK TC005 IF [CHILD'S NAME] IS MARRIED, COHABITING OR SEPARATED (CS032 = 1,2,4 OR (CM010 = 1,2,3 AND CM013 =1,2)). OTHERS GO TO TC006

IWER: SHOW CARD TC2

TC005: Please look at card TC2. What is CHILD'S NAME SPOUSE/PARTNER employment status? **IWER: CODE THE ONE THAT APPLIES** [tc005_1 to tc005_20]

1. Full time employed
 2. Part-time employed
 3. Self-employed or working for family business
 4. Unemployed
 5. Education including vocational training or retraining
 6. Maternity or paternity leave
 7. Retired
 8. Permanent sick or disabled
 9. Looking after home or family
 95. Other
 98. DK
 99. RF
- (HRS)

TC006: How many children do/does CHILD'S NAME (and CHILD'S NAME SPOUSE/PARTNER) have? [tc006_1 to tc006_20]

- 0 ... 20
98. DK
99. RF
- (HRS)

BL: IF TC006=O (IF NO CHILDREN) LOOP QUESTIONS TC001 THROUGH TC007

TC007: Are any of his/her children under age 18? [tc007_1 to tc007_20]

1. Yes
 5. No
 98. DK
 99. RF
- (HRS)

BL: AFTER FINISHING THE LOOP - GO TO TC001 THROUGH TC007, THEN TC008

Financial Assistance Given to Children

INTRO: The next questions ask about financial help received and/or given to family members. This information is important to understand how family members help each other, especially against unforeseen events such as illness or loss of one's job. The answers that you give will be kept confidential and will be used only for research purposes.

TC008: In the last ten years, have you (or your spouse/partner) given the deeds of a house, business, property, or a large amount of money of €5,000 or more to any of your children (or grandchildren)?

IWER: INCLUDE LARGE TRANSFERS IN MONEY AND GIFTS SUCH AS IMMOVABLE PROPERTY (LAND, HOUSE), AND MOVABLE PROPERTY (CAR, JEWELLERY).

1. Yes

5. No **GO TO TC011**

98. DK **GO TO TC011**

99. RF **GO TO TC011**

(HRS/MHAS/SHARE)

TC009: About how much was this support in total?

€5,000 ... €9,999,999 **TC011**

98. DK **TC010**

99. RF **TC010**

(HRS/MHAS/SHARE)

TC010: Would you say in total it was less than _____, more than _____ or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €6,000, €7,500, €10,000, €15,000.

(Unfolding sequence)

(HRS/MHAS/SHARE)

TC011: I would now like to ask about financial assistance to your children apart from any large lump sums that you mentioned in the previous question. During the last 2 years, did you (or your spouse/partner) give financial or in-kind support totalling €250 or more to any of your children and/or grandchildren (or their spouse/partner)?

1 Yes

5. No **GO TO TC014**

98. DK

99. RF

Note: IF ASKED READ OUT Assistance may include student fees and accommodation. By in-kind support we mean goods or equipment (such as washing machine, computer, food, etc.)

(HRS/MHAS/SHARE)

TC012: About how much was this support in total?

IWER: GOODS ARE TO BE VALUED AT THE MARKET VALUE.

€250 ... €10,000,000 **TC014**

98. DK **TC013**

99. RF **TC013**

(HRS/MHAS/SHARE)

TC013: Would you say in total it was less than _____ , more than _____ or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1,000, €2,000, €5,000.

(unfolding sequence)

(HRS/MHAS/SHARE)

Non-Financial Assistance Given to Children

GO TO TC018 IF CS028 = 0

IWER: READ OUT Now I would like to ask about different kinds of help that you provided regularly to your children over the past two years. This refers only to help you provided to children *outside* the household i.e. help provided to co-resident children is to be excluded.

IWER: SHOW CARD TC3

TC014: In the last 2 years, excluding childcare, have you (and/or your spouse/partner) spent at least 1 hour a week helping your adult children and/or grandchildren with things like:

1) Practical household help, e.g. with home repairs, gardening, transportation, shopping, household chores

2) Help with paperwork, such as filling out forms, settling financial or legal matters

1. Yes

5. No **GO TO TC016**

98. DK

99. RF

(TILDA)

TC015: About how many hours per month on average did you (and/or your spouse/partner) provide such help to your children?

1 ... 750

98. DK

99. RF

(TILDA)

TC016: In the last two years, have you (or your spouse/partner) spent at least 1 hour a week taking care of grandchildren or great-grandchildren (who live outside your own household)?

1. Yes

5. No **GO TO TC018**

97. Not applicable GO TO TC018

98. DK

99. RF

(HRS/SHARE)

TC017: About how many hours on average per month did you (and/or your spouse/partner) spend taking care of your grandchildren or great-grandchildren (who live outside your own household)?

1 ... 750

98. DK

99. RF

(HRS/SHARE)

Financial Assistance Received

INTRO: READ OUT I would like to ask about financial help that you received from your children in the past two years.

TC018: In the last two years, have you (or your spouse/partner) received financial or in-kind support from any of your children or grandchildren?

(Disregard small gifts with a total value of less than €250 over the two years)

By in-kind support we mean goods or equipment (such as washing machine, computer, food, etc.)

1. Yes

5. No **GO TO TC021**

98. DK

99. RF

(HRS)

TC019: Over the last 2 years, about how much was the total value of this support from your children?

IWER: Goods are to be valued at the market value.

€250 ... €10,000,000 **TC021**

98. DK **TC020**

99. RF **TC020**

(HRS)

TC020: Did it amount to a total of less than €_____, more than €_____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1,000, €2,000, €5,000.

(unfolding sequences)

(HRS)

Non-Financial Assistance Received

GO TO TC023 IF CS028 = 0

INTRO: READ OUT The next section will ask about regular non-financial assistance that you received from your children. As before, this refers only to help received from children outside the household i.e. help received from co-resident children is to be excluded.

IWER: Please see CARD TC3

TC021: In the last 2 years, have your (and/or your spouse's/partner's) children or grandchildren spent at least 1 hour a week, helping you and/or your spouse/partner with things like:

1) Practical household help, e.g. with home repairs, gardening, transportation, shopping, household chores

2) Help with paperwork, such as filling out forms, settling financial or legal matters

1. Yes

5. No **GO TO TC023**

98. DK

99. RF

(TILDA)

TC022: About how many hours per month on average did you (or your spouse/partner) receive such help from your children (or grandchildren)?

1 ... 750

98. DK

99. RF

(TILDA)

Other relatives

INTRO: READ OUT I would now like to ask you some questions about your other relatives. By this I mean family members other than the ones we have already discussed.

IWER: PLEASE SEE CARD TC3

TC023: In the last 2 years, did your relatives give you (and your spouse/partner) any help with things like:

1) Practical household help, e.g. with home repairs, gardening, transportation, shopping, household chores

2) Help with paperwork, such as filling out forms, settling financial or legal matters

1. Yes

5. No **GO TO TC025**

98. DK

99. RF

(SHARE)

TC024: About how many hours per month of such help did you receive from other relatives over the last two years?

0 ... 750

98. DK

99. RF

(SHARE)

IWER: SHOW CARD TC4

TC025: Please look at card TC4. In the last 2 years, did you (or your spouse/partner) give any kind of help to your relatives with things like:

1) Practical household help, e.g. with home repairs, gardening, transportation, shopping, household chores

2) help with personal care, such as dressing, eating, getting into and out of bed, using the toilet

3) help with paperwork, such as filling out forms, settling financial or legal matters

1. Yes

5. No **GO TO TC027**

98. DK

99. RF

(SHARE)

TC026: About how many hours per month on average did you give such help in the last two years?

0 ... 750

98. DK

99. RF

(SHARE)

Friends and Neighbours

INTRO: READ OUT The next questions are about help you (or your [husband/wife/partner]) gave or received regularly in the last two years from friends and neighbours.

IWER: SHOW CARD TC5

TC027: In the last 2 years, did your neighbours or friends give you (or your spouse/partner) any kind of help such as:

1) Household help: help with home repairs, gardening, transportation, shopping, household chores

2) Help with paperwork, such as filling out forms, settling financial or legal matters

IWER: CODE THE ONE THAT APPLIES

1. Yes

5. No **GO TO TC029**

98. DK

99. RF

(SHARE /12 months)

TC028: About how many hours per month of such help did you receive from friends and neighbours over the last two years?

0 ... 750

98. DK

99. RF

(SHARE)

IWER: SHOW CARD TC6

TC029: In the last 2 years, did you (or your spouse/partner) give any kind of help to your friends, and neighbours (who did not pay you) such as:

1) household help: help with home repairs, gardening, transportation, shopping, household chores

2) help with personal care, such as dressing, eating, getting into and out of bed, using the toilet

3) help with paperwork, such as filling out forms, settling financial or legal matters

1. Yes

5. No **GO TO TC031**

98. DK

99. RF

(SHARE)

TC030: About how many hours per month on average did you give such help in the last two years?

0 ... 750

98. DK

99. RF

(SHARE)

TC031:

IWER (CODE WITHOUT ASKING): HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION TC?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

BL: GO TO NEXT SECTION

SECTION 5. PHYSICAL & COGNITIVE HEALTH (PH)

Overall health and functional limitations

IWER: CODE THE ONE THAT APPLIES

PH001: Now I would like to ask you some questions about your health.

Would you say your health is..

IWER: READ OUT

- 1. excellent,
- 2. very good,
- 3. good,
- 4. fair,
- 5. or, poor?
- 98. DK
- 99. RF
- (ELSA/ HRS/ SHARE)

IWER: CODE THE ONE THAT APPLIES

PH002: What about your emotional or mental health? Is it ...

IWER: READ OUT

- 1. excellent,
- 2. very good,
- 3. good,
- 4. fair,
- 5. or, poor?
- 98. DK
- 99. RF
- (NSHAP)

PH003: Some people suffer from chronic or long-term health problems. By long-term we mean it has troubled you over a period of time or is likely to affect you over a period of time. Do you have any long-term health problems, illness, disability or infirmity?

NOTE: INCLUDING MENTAL HEALTH PROBLEMS

- 1. Yes
- 5. No **Go to PH006**
- 98. DK **Go to PH006**
- 99. RF **Go to PH006**
- (ELSA/ HRS/ SHARE)

PH004: Does this illness or disability limit your activities in any way?

- 1. Yes
- 5. No **Go to PH006**
- 98. DK **Go to PH006**
- 99. RF **Go to PH006**
- (ELSA/ HRS)

IWER: CODE THE ONE THAT APPLIES

PH005: For the past six months or more, to what extent have you been limited because of a health problem in activities people usually do?

IWER: READ OUT

- 1. Severely limited
- 2. Limited, but not severely
- 3. Not limited
- 98. DK
- 99. RF
- (SHARE)

PH006: Do you have any health problem or disability that limits the kind or amount of paid work you could do, should you want to?

- 1. Yes
- 5. No **Go to PH008**
- 98. DK **Go to PH008**
- 99. RF **Go to PH008**
- (ELSA/ HRS)

PH007: Is this a health problem or disability that you expect to last less than three months?

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (ELSA/ HRS)

PH008: In the past year have you lost 10 pounds (4.5 kg) or more in weight when you weren't trying to, for example, because of illness?

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (ELSA/ HRS)

IWER: CODE THE ONE THAT APPLIES

PH009: In general, compared to other people your age, would you say your health is

IWER: READ OUT

- 1. excellent,
- 2. very good,
- 3. good,
- 4. fair,
- 5. or, poor?
- 98. DK
- 99. RF
- (VES)

Eyesight

INTRO: READ OUT I would now like to ask you some questions about your eyesight and hearing.

PH101: Do you usually wear glasses or contact lenses?

1. Yes

5. No

98. DK

99. RF

Note: By usually we mean most of the time
(SHARE)

ASK IF PH101 = 1 OTHERWISE GO TO PH102

PH101a: Do you usually wear ordinary glasses, bifocals or contact lenses?

CHOOSE THE ITEM WORN MOST OFTEN

1. Glasses

2. Bifocals

3. Contact lenses

98. DK

99. RF

ASK IF PH101a = 2 OTHERWISE GO TO PH102

PH101b: How long have you had bifocals?

1. Less than 1 year

2. More than 1 year

3. DK

4. RF

IWER: CODE THE ONE THAT APPLIES

PH102: Is your eyesight (using glasses or contact lens if you use them)...

IWER: READ OUT

1. excellent

2. very good

3. good

4. fair

5. or, poor?

6. Registered or legally blind

98. DK

99. RF

(ELSA/ HRS/ SHARE)

IWER: CODE THE ONE THAT APPLIES

PH103: How good is your eyesight for seeing things at a distance, like recognising a friend across the street (using glasses or contact lens if you use them)? Would you say it is..

IWER: READ OUT

1. excellent,
 2. very good,
 3. good,
 4. fair,
 5. or, poor?
 98. DK
 99. RF
- (ELSA/ HRS/ SHARE)

IWER: CODE THE ONE THAT APPLIES

PH104: How good is your eyesight for seeing things up close, like reading ordinary newspaper print (using glasses or contact lens if you use them)? Would you say it is...

Interviewer read out

IWER: READ OUT

1. excellent,
 2. very good,
 3. good,
 4. fair,
 5. or, poor?
 98. DK
 99. RF
- (ELSA/ HRS/ SHARE)

IWER: CODE ALL THAT APPLY

PH105: Has a doctor ever told you that you have any of the following eye diseases?

IWER: READ OUT

- | | | |
|-------------------------------------|--------------------|------------------|
| 1. Cataracts | GO TO PH106 | [ph105_1] |
| 2. Glaucoma | | [ph105_2] |
| 3. Age related macular degeneration | | [ph105_3] |
| 4. Other | | [ph105_4] |
| 5. None | | [ph105_5] |
| 98. DK | | [ph105_6] |
| 99. RF | | [ph105_7] |
- (ELSA)

BL: IF PH105==1 - GO TO PH107

PH106: Have you had cataract surgery?

1. Yes one eye
 2. Yes both eyes
 5. No
 98. DK
 99. RF
- (ELSA/ HRS)

Hearing

IWER: CODE ALL THAT APPLY

PH107: Do you use any of the following aids or appliances to help you with your hearing?

IWER: READ OUT

- | | |
|-----------------------------------|-----------|
| 1. Hearing aid (all the time) | [ph107_1] |
| 2. Hearing aid (some of the time) | [ph107_2] |
| 3. Amplifier | [ph107_3] |
| 96. None of the above | [ph107_4] |
| 98. DK | [ph107_5] |
| 99. RF | [ph107_6] |

IWER: CODE THE ONE THAT APPLIES

PH108: Is your hearing (with or without a hearing aid).....

IWER: READ OUT

- 1. excellent,
 - 2. very good,
 - 3. good,
 - 4. fair,
 - 5. or, poor?
 - 98. DK
 - 99. RF
- (ELSA/ HRS/ SHARE)

IWER: CODE THE ONE THAT APPLIES

PH109: Can you follow a conversation with one person (with or without a hearing aid)?

IWER: READ OUT

IWER: IF RESPONDENT ASKS, CLARIFY THAT THE ENVIRONMENT TO THINK OF SHOULD BE NON-NOISY, I.E. THEIR HOME

- 1. with no difficulty
 - 2. with some difficulty
 - 3. with much difficulty
 - 4. no I cannot
 - 98. DK
 - 99. RF
- (LASA – Similar worded question in ELSA/ SHARE)

IWER: CODE THE ONE THAT APPLIES

PH110: Can you follow a conversation with four people (with or without a hearing aid)?

IWER: READ OUT

IWER: IF RESPONDENT ASKS, CLARIFY THAT THE ENVIRONMENT TO THINK OF SHOULD BE NON-NOISY, I.E. THEIR HOME

- 1. with no difficulty
 - 2. with some difficulty
 - 3. with much difficulty
 - 4. no I cannot
 - 98. DK
 - 99. RF
- (LASA – Similar worded question in ELSA/ SHARE)

IWER: CODE THE ONE THAT APPLIES

PH111: Can you use a normal telephone?

IWER: READ OUT

1. with no difficulty
 - 2 . with some difficulty
 3. with much difficulty
 - 4 . no I cannot
98. DK
99. RF
(LASA)

Smell

INTRO: I would now like to ask you some questions about your sense of taste and smell.

IWER: CODE THE ONE THAT APPLIES

PH112: Is your sense of smell.....

IWER: READ OUT

1. excellent,
 2. very good,
 3. good,
 4. fair,
 5. or, poor?
98. DK
99. RF
(TILDA)

Taste

IWER: CODE THE ONE THAT APPLIES

PH113: Is your sense of taste.....

IWER: READ OUT

1. excellent,
 2. very good,
 3. good,
 4. fair,
 5. or, poor?
98. DK
99. RF
(TILDA)

Memory

INTRO: READ OUT Part of this study is concerned with people's day-to-day memory and their ability to remember events that happened recently – for instance something that happened yesterday or this morning - rather than long ago.

IWER: CODE THE ONE THAT APPLIES

PH114: How would you rate your day-to-day memory at the present time? Would you say it is?

IWER: READ OUT

1. Excellent
 2. Very good
 3. Good
 4. Fair
 5. Poor
 98. DK
 99. RF
- (TILDA)

IWER: CODE THE ONE THAT APPLIES

PH115: How often would you find that you are absent minded, for example forgetting where you put your glasses / keys or finding yourself in a room having forgotten why you came in there? Would you say that you are absent minded in this sort of way?

IWER: READ OUT

1. All of the time
 2. Most of the time
 3. Some of the time
 4. None of the time
 98. DK
 99. RF
- (TILDA)

INTRO: READ OUT In the next section of the interview, we will do some memory and concentration tasks. Some of them may seem rather easy but others are more difficult so please listen carefully. Please just do the best you can on all of them.

INTRO: READ OUT Now I would like you to remember two things in order to assess everyday memory. At some point during the interview I will hand you a piece of paper and a pen.

IWER: SHOW THE WORD LIST – ANIMAL NAMES PAGE (PAGE 3) AT THE BACK OF THE COGNITIVE MODULE BOOKLET

When I do I would like you to write your initials on the top left hand corner of the piece of paper. Is that clear?

IWER: IF RESPONDENT IS NOT CLEAR REPEAT INSTRUCTIONS.

INTRO: READ OUT The second task is for you to remind me to do something. When we finish the memory and concentration tasks I will say “that is the end of the memory and concentration tasks”. When I do I would like you to remind me to record what time we finish the tasks. is that clear?
(ELSA)

IWER: IF RESPONDENT IS NOT CLEAR REPEAT INSTRUCTIONS.

INTRO: For the next task the computer will 'read' a list of words which I will ask you to recall. First I'd like to check that you will be able to hear the computer voice - please listen to this short message.

IWER: Press 1 to activate the test message.

IWER: If the respondent cannot hear properly, adjust the volume on the laptop, then go back to the previous question and press to play the test message again.

PH116: If the respondent still cannot hear properly, code that you will read out the list yourself.

1. List read out by computer
- 2 .List read out by interviewer

BL: IF PH116=1 - GO TO PH117

BL: IF PH116=2 - GO TO PH119

PH117: **INTRO:** READ OUT The computer will now read a set of 10 words. We have purposely made the list long so it will be difficult for anyone to recall all the words. Most people recall just a few. Please listen carefully to the set of words, as they cannot be repeated. When it has finished, I will ask you to recall aloud as many of the words as you can, in any order. Is this clear?

IWER: If no explain further. If yes press <enter> to begin test and have booklet ready

BL: ONE RANDOMLY SELECTED LIST GIVEN TO EACH RESPONDENT. 1 WORD EVERY 2 SECONDS

Word List A	Word List B	Word List C	Word List D
Hotel	Sky	Women	Water
River	Ocean	Rock	Church
Tree	Flag	Blood	Doctor
Skin	Dollar	Corner	Palace
Gold	Wife	Shoes	Fire
Market	Machine	Letter	Garden
Paper	Home	Girl	Sea
Child	Earth	House	Village
King	College	Valley	Baby
Book	Butter	Engine	Table

IWER: After the word list has been read out press<Enter>

Now please tell me all the words you can recall.

IWER: ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS. WRITE THE WORDS IN THE BOOKLET PROVIDED. ALLOW AS MUCH TIME AS THE RESPONDENT WISHES, UP TO 2 MINUTES. ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

1.....10 GO TO PH118

98. DK

99. RF

(SHARE/ELSA/HRS)

PH118: **INTRO:** READ OUT The computer will now read the same set of 10 words out again. When it has finished, I will ask you to recall aloud as many of the words as you can, in any order, including the words you recalled earlier. Is this clear?

IWER: After the word list has been read out press<Enter>

Now please tell me all the words you can recall.

IWER: ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS. WRITE THE WORDS IN THE BOOKLET PROVIDED. ALLOW AS MUCH TIME AS THE RESPONDENT WISHES, UP TO 2 MINUTES. ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

1.....10 GO TO PH121

98. DK

99. RF

(SHARE/ELSA/HRS)

PH119: **INTRO:** Now, I am going to read a list of 10 words from my computer screen. We have purposely made the list long so it will be difficult for anyone to recall all the words. Most people recall just a few. Please listen carefully to the set of words, as they cannot be repeated. When I have finished, I will ask you to recall aloud as many of the words as you can, in any order. Is this clear?

IWER: IF RESPONDENT IS NOT CLEAR REPEAT INSTRUCTIONS.

IWER: WAIT UNTIL WORDS APPEAR ON THE SCREEN.

BL: ONE RANDOMLY SELECTED LIST GIVEN TO EACH RESPONDENT

Word List A	Word List B	Word List C	Word List D
Hotel	Sky	Women	Water
River	Ocean	Rock	Church
Tree	Flag	Blood	Doctor
Skin	Dollar	Corner	Palace
Gold	Wife	Shoes	Fire
Market	Machine	Letter	Garden
Paper	Home	Girl	Sea
Child	Earth	House	Village
King	College	Valley	Baby
Book	Butter	Engine	Table

IWER: PAUSE FOR 3 SECONDS AFTER EACH WORD

IWER: WRITE WORDS ON SHEET PROVIDED.

IWER: ALLOW UP TO ONE MINUTE FOR RECALL.

Now please tell me all the words you can recall.

IWER: ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

IWER: WRITE THE WORDS IN THE BOOKLET PROVIDED. ALLOW AS MUCH TIME AS THE RESPONDENT WISHES, UP TO 2 MINUTES. ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

1.....10 GO TO PH120

98. DK

99. RF

(SHARE/ELSA/HRS)

PH120: **INTRO:** Now I am going to read the same words out again. When I have finished, I will ask you to recall aloud as many of the words as you can, in any order, including the words you recalled earlier. Is this clear?

IWER: IF RESPONDENT IS NOT CLEAR REPEAT INSTRUCTIONS.

IWER: READ OUT THE LIST GENERATED FOR PH116

Word List A	Word List B	Word List C	Word List D
Hotel	Sky	Women	Water
River	Ocean	Rock	Church
Tree	Flag	Blood	Doctor
Skin	Dollar	Corner	Palace
Gold	Wife	Shoes	Fire
Market	Machine	Letter	Garden
Paper	Home	Girl	Sea
Child	Earth	House	Village
King	College	Valley	Baby
Book	Butter	Engine	Table

Now please tell me all the words you can recall?

IWER: ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

IWER: WRITE THE WORDS IN THE BOOKLET PROVIDED. ALLOW AS MUCH TIME AS THE RESPONDENT WISHES, UP TO 2 MINUTES. ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

1.....10 GO TO PH121

98. DK

99. RF

(TILDA)

INTRO: READ OUT Part of this study is concerned with people's memory and ability to think about things.

PH121: Please tell me what year it is

1. Year given correctly
2. Year given incorrectly

98. DK

99. RF

(SHARE/ELSA/HRS/ MMSE)

PH122: What month it is?

1. Month given correctly
2. Month given incorrectly

98. DK

99. RF

(SHARE/ELSA/HRS/ MMSE)

PH123: Can you tell me what day of the week it is?

1. Day of week given correctly
2. Day of week given incorrectly

98. DK

99. RF

(SHARE/ELSA/HRS/ MMSE)

PH124: Can you tell me what today's date is?

1. Date given correctly
2. Date given incorrectly

98. DK

99. RF

(SHARE/ELSA/HRS/ MMSE)

PH125: Now I would like you to name as many different animals as you can think of. You have one minute to do this. Ready? go.

IWER: ALLOW ONE MINUTE PRECISELY. IF THE SUBJECT STOPS BEFORE THE END OF THE TIME, ENCOURAGE THEM TO TRY TO FIND MORE WORDS. IF RESPONDENT IS SILENT FOR 15 SECONDS REPEAT THE BASIC INSTRUCTION ("I WANT YOU TO TELL ME ALL THE ANIMALS YOU CAN THINK OF"). NO EXTENSION ON THE TIME LIMIT IS MADE IN THE EVENT THAT THE INSTRUCTION HAS TO BE REPEATED

IWER: ONLY IF THE PARTICIPANT ASKS FOR CLARIFICATION, EXPLAIN THAT ANIMALS INCLUDE BIRDS, INSECTS, FISH ETC.

IWER: THE SCORE IS THE SUM OF ACCEPTABLE ANIMALS. ANY MEMBER OF THE ANIMAL KINGDOM, REAL OR MYTHICAL IS SCORED CORRECT, EXCEPT REPETITIONS AND PROPER NOUNS. SPECIFICALLY, EACH OF THE FOLLOWING GETS CREDIT: A SPECIES NAME AND ANY ACCOMPANYING BREEDS WITHIN THE SPECIES; MALE, FEMALE AND INFANT NAMES WITHIN THE SPECIES.

IWER: CODE NUMBER OF ANIMALS

1.....50

98. DK

99. RF

(SHARE/ELSA)

Heart disease section

INTRO: READ OUT We are interested in finding out more information about heart problems people may suffer from.

IWER: SHOW CARD PH1

PH201: Please look at card PH1. Has a doctor ever told you that you have any of the conditions on this card?

INTERVIEWER: PROBE - 'WHAT OTHERS?' CODE ALL THAT APPLY.

- | | | |
|---|-------------|------------|
| 1. High blood pressure or hypertension | GO TO PH202 | [ph201_1] |
| 2. Angina | GO TO PH203 | [ph201_2] |
| 3. A heart attack
(including myocardial infarction or coronary thrombosis) | GO TO PH205 | [ph201_3] |
| 4. Congestive heart failure | GO TO PH212 | [ph201_4] |
| 5. Diabetes or high blood sugar | GO TO PH213 | [ph201_5] |
| 6. A stroke (cerebral vascular disease) | GO TO PH218 | [ph201_6] |
| 7. Ministroke or TIA | GO TO PH221 | [ph201_7] |
| 8. High cholesterol | GO TO PH225 | [ph201_8] |
| 9. A heart murmur | GO TO PH301 | [ph201_9] |
| 10. An abnormal heart rhythm | GO TO PH301 | [ph201_10] |
| 95. Any other heart trouble (specify) [ph201a] | GO TO PH224 | [ph201_11] |
| 96. None of these | GO TO PH301 | [ph201_14] |
| 98. DK | GO TO PH301 | [ph201_12] |
| 99. RF | GO TO PH301 | [ph201_13] |
- (ELSA/ similar questions in HRS/ SHARE)

PH202: Approximately how old were you when you were first told by a doctor that you had high blood pressure?

1.....97

98. DK

99. RF

(ELSA/ HRS)

PH202a: Are you currently taking any tablets or pills for high blood pressure?

1. Yes

5. No

98. DK

99. RF

BL:

IF PH201=2 GO TO PH203

IF PH201=3 GO TO PH205

IF PH201=4 GO TO PH212

IF PH201=5 GO TO PH213

IF PH201=6 GO TO PH218

IF PH201=7 GO TO PH221

IF PH201=8 GO TO PH225

IF PH201=95 GO TO PH224

OTHERWISE GO TO PH301

PH203: Approximately how old were you when you were first told by a doctor that you had angina?

1.....97

98. DK

99. RF

(ELSA/ HRS)

PH204: Are you limiting your usual activities because of your angina?

1. Yes

5. No

98. DK

99. RF

(HRS)

BL:

IF PH201=3 GO TO PH205

IF PH201=4 GO TO PH212

IF PH201=5 GO TO PH213

IF PH201=6 GO TO PH218

IF PH201=7 GO TO PH221

IF PH201=8 GO TO PH225

IF PH201=95 GO TO PH224

OTHERWISE GO TO PH301

PH205: Approximately how old were you when you were first told by a doctor that you had a heart attack (including myocardial infarction or coronary thrombosis)?

1...97

98. DK

99. RF

PH206: In what year/month was your (most recent) heart attack? **[ph206, ph206a]**
(MM/YYYY)

____/____

____ DK RF MONTH

____ DK RF YEAR

(HRS)

PH207: According to the doctor how many heart attacks have you had?

1.....97

98. DK

99. RF

(ELSA)

BL:

IF PH201 = 3 GO TO PH208

IF PH201=4 GO TO PH212

IF PH201=5 GO TO PH213

IF PH201=6 GO TO PH218

IF PH201=7 GO TO PH221

IF PH201=8 GO TO PH225

IF PH201=95 GO TO PH224

OTHERWISE GO TO PH301

PH208: Have you ever had an angioplasty or Stent?

1. Yes Go to PH209

5. No Go to PH210

98. DK

99. RF

PH209: In what year/month was your last angioplasty or Stent?
(MM/YYYY)

[ph209, ph209a]

____/____

____ DK RF MONTH

____ DK RF YEAR

PH210: Have you ever had open heart surgery?

1. Yes Go to PH211

5. No

98. DK

99. RF

PH211: In what year/month was your last heart surgery?
(MM/YYYY)

[ph211, ph211a]

____/____

____ DK RF MONTH

____ DK RF YEAR

BL:

IF PH201=4 GO TO PH212

IF PH201=5 GO TO PH213

IF PH201=6 GO TO PH218

IF PH201=7 GO TO PH221

IF PH201=8 GO TO PH225

IF PH201=95 GO TO PH224

OTHERWISE GO TO PH301

PH212: Approximately how old were you when you were first told by a doctor that you had congestive heart failure?

1....97

98. DK

99. RF

BL:

IF PH201=5 GO TO PH213

IF PH201=6 GO TO PH218

IF PH201=7 GO TO PH221

IF PH201=8 GO TO PH225

IF PH201=95 GO TO PH224

OTHERWISE GO TO PH301

PH213: Approximately how old were you when you were first told by a doctor that you had diabetes or high blood sugar?

1....97

98. DK

99. RF

(ELSA)

PH214: Are you currently taking any tablets, pills or other medication that you swallow for diabetes?

1. Yes

5. No

98. DK

99. RF

(ELSA/ similar question HRS)

PH215: Do you currently inject insulin for diabetes?

1. Yes

5. No

98. DK

99. RF

(ELSA /similar question HRS)

PH216: Has a doctor ever told you that you have any of the following conditions related to your diabetes?

1. Leg ulcers

[ph216_1]

2. Protein in your urine

[ph216_2]

3. Lack of feeling and tingling pain in your legs and feet
due to nerve damage (diabetic neuropathy)

[ph216_3]

4. Damage to the back of your eye (diabetic retinopathy)

[ph216_4]

5. Damage to your kidneys (diabetic nephropathy)

[ph216_5]

6. No, none of these

[ph216_8]

98. DK

[ph216_7]

99. RF

[ph216_6]

BL:

IF PH201=6 GO TO PH218

IF PH201=7 GO TO PH221

IF PH201=8 GO TO PH225

IF PH201=95 GO TO PH224

OTHERWISE GO TO PH301

PH218: Approximately how old were you when you were first told by a doctor that you had a stroke?

1....97

98. DK

99. RF

(ELSA similar question HRS/QVSFS)

PH219: How many strokes have you had?

1....97

98. DK

99. RF

(ELSA)

PH220: In what year was your most recent stroke?

[ph220, ph220a]

(MM/YYYY)

____/____

____ DK RF MONTH

____ DK RF YEAR

(HRS)

BL:

IF PH201=7 GO TO PH221

IF PH201=8 GO TO PH225

IF PH201=95 GO TO PH224

OTHERWISE GO TO PH301

PH221: Approximately how old were you when you were first told by a doctor that you had a TIA, ministroke, or transient ischemic attack?

1....97

98. DK

99. RF

(TILDA/QVSFS)

PH222: How many TIA's or ministrokes have you had?

1....97

98. DK

99. RF

(TILDA)

PH223: In what year was your most recent TIA or ministrokes?

[ph223, ph223a]

(MM/YYYY)

____/____

____ DK RF MONTH

____ DK RF YEAR

(TILDA)

BL:

IF PH201=8 GO TO PH225

IF PH201=95 GO TO PH224

OTHERWISE GO TO PH301

PH224: Approximately how old were you when you were first told by a doctor that you had any other heart trouble?

1....120

98. DK

99. RF

(TILDA)

BL:

IF PH201=8 GO TO PH225

OTHERWISE GO TO PH301

PH225: Are you currently taking any tablets or pills for high cholesterol?

1. Yes

5. No

98. DK

99. RF

Other chronic conditions

IWER: SHOW CARD PH2

PH301: Please look at card PH2. Has a doctor ever told you that you have any of the following conditions?

IWER: PROBE - 'WHAT OTHERS?' CODE ALL THAT APPLY.

- | | | |
|--|---------------------|-------------------|
| 1. Chronic lung disease such as chronic bronchitis or emphysema | GO TO PH302 | [ph301_1] |
| 2. Asthma | | [ph301_2] |
| 3. Arthritis (including osteoarthritis, or rheumatism) | GO TO PH304 | [ph301_3] |
| 4. Osteoporosis, sometimes called thin or brittle bones | | [ph301_4] |
| 5. Cancer or a malignant tumour (including leukaemia or lymphoma but excluding minor skin cancers) | GO TO PH309 | [ph301_5] |
| 6. Parkinson's disease | GO TO PH314 | [ph301_6] |
| 7. Any emotional, nervous or psychiatric problems, such as depression or anxiety | GO TO PH315 | [ph301_7] |
| 8. Alcohol or substance abuse | GO TO PH320 | [ph301_8] |
| 9. Alzheimer's disease | GO TO PH318 | [ph301_9] |
| 10. Dementia, organic brain syndrome, senility | GO TO PH319 | [ph301_10] |
| 11. Serious memory impairment | GO TO PH319a | [ph301_11] |
| 12. Stomach ulcers | | [ph301_12] |
| 13. Varicose Ulcers (an ulcer due to varicose veins) | | [ph301_13] |
| 14. Cirrhosis, or serious liver damage | | [ph301_14] |
| 96. None of these | | [ph301_17] |
| 98. DK | | [ph301_16] |
| 99. RF | | [ph301_15] |

(ELSA/ similar question HRS/NSHAP)

BL:

IF PH301=2, 4, 10, 12, 13, 14, 96, 98, 99 GO TO PH401

PH302: Are you receiving oxygen for your lung condition?

- 1. Yes
 - 5. No
 - 98. DK
 - 99. RF
- (HRS)

PH303: Does your lung condition limit your usual activities, such as household chores or work?

1. Yes

5. No

98. DK

99. RF

(HRS)

BL:

IF PH301=3 GO TO PH304

IF PH301=5 GO TO PH309

IF PH301=6 GO TO PH314

IF PH301=7 GO TO PH315

IF PH301=8 GO TO PH320

IF PH301=9 GO TO PH318

IF PH301=10 GO TO PH319

IF PH301=11 GO TO PH319a

OTHERWISE GO TO PH401

IWER: CODE ALL THAT APPLY

PH304: Which type or types of arthritis do you have?

IWER: READ OUT

1. Osteoarthritis [ph304_1]

2. Rheumatoid arthritis [ph304_2]

3. Some other kind of arthritis [ph304_3]

98. DK [ph304_4]

99. RF [ph304_5]

(ELSA/HRS)

PH305: Approximately how old were you when you were first told by a doctor that you had arthritis?

1....97

98. DK

99. RF

(ELSA)

PH306: Does your arthritis make it difficult for you to do your usual activities such as household chores or work?

1. Yes

5. No

3. Sometimes

98. DK

99. RF

(TILDA)

PH307: Does the arthritis limit your social and leisure activities?

- 1. Yes
 - 5. No
 - 3. Sometimes
 - 98. DK
 - 99. RF
- (TILDA)

PH308: Does your arthritis make it difficult for you to sleep at night?

- 1. Yes
 - 5. No
 - 3. Sometimes
 - 98. DK
 - 99. RF
- (TILDA)

BL:

IF PH301=5 GO TO PH309
IF PH301=6 GO TO PH314
IF PH301=7 GO TO PH315
IF PH301=8 GO TO PH320
IF PH301=9 GO TO PH318
IF PH301=10 GO TO PH319
IF PH301=11 GO TO PH319a
OTHERWISE GO TO PH401

PH309: Approximately how old were you when you were first told by a doctor that you had cancer or a malignant tumour?

- 1....97
 - 98. DK
 - 99. RF
- (ELSA/HRS/SHARE)

IWER: SHOW CARD PH3

PH310: Please look at card PH3. In which organ or part of the body have you or have you had cancer?

IWER: CODE ALL THAT APPLY

- | | |
|--|------------|
| 1. Lung | [ph310_01] |
| 2. Breast | [ph310_02] |
| 3. Colon or rectum | [ph310_03] |
| 4. Stomach | [ph310_04] |
| 5. Oesophagus | [ph310_05] |
| 6. Prostate | [ph310_06] |
| 7. Bladder | [ph310_07] |
| 8. Liver | [ph310_08] |
| 9. Brain | [ph310_09] |
| 10. Ovary | [ph310_10] |
| 11. Cervix | [ph310_11] |
| 12. Endometrium | [ph310_12] |
| 13. Thyroid | [ph310_13] |
| 14. Kidney | [ph310_14] |
| 15. Testicle | [ph310_15] |
| 16. Pancreas | [ph310_16] |
| 17. Malignant melanoma (skin) | [ph310_17] |
| 18. Oral cavity | [ph310_18] |
| 19. Larynx | [ph310_19] |
| 20. Other pharynx (including nasopharynx, oropharynx, laryngopharynx or hypopharynx) | [ph310_20] |
| 21. Non-Hodgkin Lymphoma | [ph310_21] |
| 22. Leukaemia | [ph310_22] |
| 95. Other organ | [ph310_23] |
| 98. DK | [ph310_24] |
| 99. RF | [ph310_25] |
- (SHARE/ similar question in ELSA)

PH311: Have you received any treatment for your cancer?

- | | |
|--------|--------------------|
| 1. Yes | GO TO PH312 |
| 5. No | GO TO PH314 |
| 98. DK | GO TO PH314 |
| 99. RF | GO TO PH314 |
- (ELSA/HRS)

IWER: SHOW CARD PH4

PH312: Please look at card PH4. What sort of treatments have you received for cancer?

IWER: CODE ALL THAT APPLY

- | | |
|--|------------|
| 1. Chemotherapy | [ph312_01] |
| 2. Medication | [ph312_02] |
| 3. Surgery | [ph312_03] |
| 4. Biopsy | [ph312_04] |
| 5. Radiation/X-Ray | [ph312_05] |
| 6. Treatment for symptoms (pain, nausea, rashes) | [ph312_06] |
| 95. Other (specify) [ph312oth] | [ph312_07] |
| 98. DK | [ph312_08] |
| 99. RF | [ph312_09] |
| (HRS) | |

PH313: Since you received treatment has the cancer got worse, better or stayed about the same?

- 1. Better
- 2. About the same
- 3. Worse
- 98. DK
- 99. RF
- (HRS)

BL:

IF PH301=6 GO TO PH314
IF PH301=7 GO TO PH315
IF PH301=8 GO TO PH320
IF PH301=9 GO TO PH318
IF PH301=10 GO TO PH319
IF PH301=11 GO TO PH319a
OTHERWISE GO TO PH401

PH314: Approximately how old were you when you were first told by a doctor that you had Parkinson's disease?

- 1....97
- 98. DK
- 99. RF
- (ELSA)

BL:

IF PH301=7 GO TO PH315
IF PH301=8 GO TO PH320
IF PH301=9 GO TO PH318
IF PH301=10 GO TO PH319
IF PH301=11 GO TO PH319a
OTHERWISE GO TO PH401

PH315: Approximately how old were you when you were first told by a doctor that you had emotional, nervous or psychiatric problems?

1....97

98. DK

99. RF

(ELSA/HRS)

IWER: SHOW CARD PH5

PH316: Please look at card PH5. What type of emotional, nervous or psychiatric problems do/did you have?

IWER: CODE ALL THAT APPLY

1. Hallucinations

[ph316_01]

2. Anxiety

[ph316_02]

3. Depression

[ph316_03]

4. Emotional problems

[ph316_04]

5. Schizophrenia

[ph316_05]

6. Psychosis

[ph316_06]

7. Mood swings

[ph316_07]

8. Manic depression

[ph316_08]

95. Something else

[ph316_09]

98. DK

[ph316_10]

99. RF

[ph316_11]

(ELSA)

PH317: Do you now get psychiatric treatment for your problems, such as attending a psychiatrist?

1. Yes

5. No

98. DK

99. RF

PH317a: Do you now get psychological treatment for your problems, such as counselling?

1. Yes

5. No

98. DK

99. RF

BL:

IF PH301=8 GO TO PH320

IF PH301=9 GO TO PH318

IF PH301=10 GO TO PH319

IF PH301=11 GO TO PH319a

OTHERWISE GO TO PH401

PH318: Approximately how old were you when you were first told by a doctor that you had Alzheimer's Disease?

1....97

98. DK

99. RF

(ELSA)

BL:

IF PH301=8 GO TO PH320

IF PH301=10 GO TO PH319

IF PH301=11 GO TO PH319a

OTHERWISE GO TO PH401

PH319: Approximately how old were you when you were first told by a doctor that you had dementia, senility?

1....97

98. DK

99. RF

(ELSA)

IF PH301=8 GO TO PH320

IF PH301=11 GO TO PH319a

OTHERWISE GO TO PH401

PH319a: Approximately how old were you when you were first told by a doctor that you had serious memory impairment?

1....97

98. DK

99. RF

(ELSA)

IF PH301=8 GO TO PH320

OTHERWISE GO TO PH401

PH320: Approximately how old were you when you were first told by a doctor that you suffered from alcohol or substance abuse?

1....97

98. DK

99. RF

PH321: Do you currently suffer from alcohol or substance abuse?

1. Yes

GO TO PH322

5. No

GO TO PH323

98. DK

GO TO PH323

99. RF

GO TO PH323

PH322: Are you receiving any treatment for your alcohol or substance abuse?

1. Yes

5. No

98. DK

99. RF

GO TO PH401

PH323: How long did you suffer from alcohol or substance abuse?

1....97 yrs

98. DK

99. RF

(Code any duration up to a year as "1")

PH324: Did you receive any treatment for your alcohol or substance abuse?

- 1. Yes
- 5. No
- 98. DK
- 99. RF

Falls/Fracture section

PH401: Have you fallen in the last year?

- 1. Yes
 - 5. No **GO TO PH405**
 - 98. DK **GO TO PH405**
 - 99. RF **GO TO PH405**
- (ELSA/HRS)

PH402: How many times have you fallen in the last year?

- 1....97
 - 98. DK
 - 99. RF
- (ELSA/HRS)

PH403: Were any of these falls non-accidental, i.e. with no apparent or obvious reason?

- 1. Yes
 - 5. No
 - 98. DK
 - 99. RF
- (TILDA)

PH404: Did you injure yourself seriously enough to need medical treatment?

IWER: IF YES, PROBE: Did you get medical treatment?

- 1. Yes and I got treatment
 - 2. Yes and I did not get treatment
 - 5. No
 - 98. DK
 - 99. RF
- (ELSA/HRS)

PH405: Have you ever had a blackout or fainted?

1. Yes

5. No

GO TO PH408

98. DK

GO TO PH408

99. RF

GO TO PH408

(TILDA)

PH406: Approximately how many times have you had a blackout or fainted in the last year?

0....97

98. DK

99. RF

(TILDA)

PH407: Were you a frequent fainter when you were younger?

1. Yes

5. No

98. DK

99. RF

(TILDA)

Fear of falling

PH408: Are you afraid of falling?

1. Yes

5. No

Go to PH411

98. DK

Go to PH411

99. RF

Go to PH411

(TILDA)

PH409: Do you feel somewhat afraid or very much afraid of falling?

1. Somewhat afraid of falling

2. Very much afraid of falling

98. DK

99. RF

(TILDA)

PH410: Do you ever limit your activities, for example, what you do or where you go, because you are afraid of falling?

1. Yes

5. No

98. DK

99. RF

(TILDA)

Steadiness

IWER: CODE THE ONE THAT APPLIES

PH411: We are interested in your steadiness when walking, standing or getting up from a chair. When walking, do you feel

IWER: READ OUT

1. very steady,
2. slightly steady,
3. slightly unsteady,
4. very unsteady

98. DK

99. RF

(TILDA)

IWER: CODE THE ONE THAT APPLIES

PH412: When standing, do you feel

IWER: READ OUT

1. very steady,
2. slightly steady,
3. slightly unsteady,
4. very unsteady

98. DK

99. RF

(TILDA)

IWER: CODE THE ONE THAT APPLIES

PH413: When getting up from a chair, do you feel

IWER: READ OUT

1. very steady,
2. slightly steady,
3. slightly unsteady,
4. very unsteady

98. DK

99. RF

(TILDA)

PH414: Have you ever fractured your hip or wrist?

1. Yes both
2. Yes hip
3. Yes wrist

5. No

98. DK

99. RF

(ELSA/HRS)

PH415: Have you had any joint replacements?

1. Yes

5. No

Go to PH418

98. DK

99. RF

(ELSA)

PH416: Which joints did you have replaced?

1. Hip

[ph416_1]

2. Both hips

[ph416_2]

3. Knee

[ph416_3]

4. Both knees

[ph416_4]

5. Hips(s) and knee(s)

[ph416_5]

6. Other joint

[ph416_6]

98. DK

[ph416_7]

99. RF

[ph416_8]

(ELSA/HRS)

PH417: Was the joint replacement(s) because of arthritis, a fracture or for some other reason?

1. Arthritis

2. Fracture

3. Both arthritis and a fracture

4. Other reason

98. DK

99. RF

(ELSA)

IWER: HAND THE COGNITIVE MODULE BOOKLET TO THE RESPONDENT WITH THE WORD LIST – ANIMAL NAMES PAGE (PAGE 3) SHOWING AND ALSO HAND HIM/HER A PEN THEN SAY “These are for you”.

IWER: PAUSE FOR EXACTLY 5 SECONDS.

IF NO RESPONSE, PROMPT:

'You were going to do something when I gave you the paper and pen. Can you remember what it was?'

IWER: IF RESPONDENT SAYS 'AM I SUPPOSED TO....?' THEN SAY:

'Do whatever you think you are supposed to do'

PH418:

IWER: CODE WHETHER OR NOT YOU PROMPTED RESPONDENT.

1. No prompt given

2. Prompt given

PH419: Now take back the booklet and pen and code what respondent did when you handed them the booklet and pen.

1. Wrote their initials in top left hand corner
 2. Wrote their initials somewhere else
 3. Wrote something else in top left hand corner
 4. Did something else
 5. Did nothing/did not remember what to do
98. DK
99. RF

Pain section

PH501: Are you often troubled with pain?

1. Yes **GO TO PH502**
 5. No **GO TO PH507**
 98. DK **GO TO PH507**
 99. RF **GO TO PH507**
- (ELSA/HRS)

IWER: CODE THE ONE THAT APPLIES

PH502: How bad is the pain most of the time? Is it...

IWER: READ OUT

- 1 mild,
 - 2 moderate,
 - 3 or, severe
98. DK
99. RF
(ELSA/HRS)

PH503: Now thinking about this pain, in which part of your body is it most severe?

IWER: CODE ALL THAT APPLY

1. Back **[ph503_1]**
2. Hips **[ph503_2]**
3. Knees **[ph503_3]**
4. Feet **[ph503_4]**
5. Mouth/teeth **[ph503_5]**
6. All over **[ph503_6]**
95. Other **[ph503_7]**
98. DK **[ph503_8]**
99. RF **[ph503_9]**

PH504: Does the pain make it difficult for you to do your usual activities such as household chores or work?

1. Yes
 5. No
98. DK
99. RF
(HRS)

PH505: Are you taking any medication to control the pain?

1. Yes

5. No **GO TO PH507**

98. DK **GO TO PH507**

99. RF **GO TO PH507**

(ELSA)

PH506: Does this medication control your pain?

1. Yes

5. No

3. Sometimes

98. DK

99. RF

(ELSA)

Oral health section

IWER: SHOW CARD PH6

PH507: Please look at card PH6. Which best describes the teeth you have?

IWER: CODE THE ONE THAT APPLIES

1. I have all my own natural teeth – none missing

2. I have my own teeth, no dentures – but some missing

3. I have dentures as well as some of my own teeth

4. I have full dentures

5. I have no teeth or dentures

98. DK

99. RF

(SLAN)

Incontinence section

INTRO: READ OUT We are interested in finding out more about problems that affect people's quality of life. I would therefore like to ask you some questions about urinary incontinence. Is that okay?

PH601: During the last 12 months, have you lost any amount of urine beyond your control?

1. Yes

5. No

GO TO PH701

98. DK

GO TO PH701

99. RF

GO TO PH701

(ELSA/HRS)

PH602: Did this happen more than once during a 1 month period?

1. Yes

5. No

98. DK

99. RF

(ELSA)

PH603: Have you ever mentioned this problem to a doctor, nurse or other health professional?

1. Yes

5. No

98. DK

99. RF

(ELSA)

PH604: Do you ever limit your activities, for example, what you do or where you go, because of urinary incontinence?

1. Yes

5. No

98. DK

99. RF

(TILDA)

Medical tests

INTRO: Have you ever had any of the following medical tests or procedures?

PH701: A flu shot?

1. Yes

5. No

98. DK

99. RF

(HRS)

PH702: A blood test for cholesterol?

- 1. Yes
 - 5. No
 - 98. DK
 - 99. RF
- (HRS)

BL:

IF (FEMALE) GD002=2 – GO TO PH703

IF (MALE) GD002=1 – GO TO PH710

PH703: Have you gone through the menopause?

IWER: If respondent is currently going through menopause code 'Yes'

- 1. Yes
 - 5. No **GO TO PH708**
 - 98. DK **GO TO PH708**
 - 99. RF **GO TO PH708**
- (HRS/TILDA)

PH704: Can you remember approximately what age you were when it started?

- 13....97
 - 98. DK
 - 99. RF
- (TILDA)

IWER: SHOW CARD PH7

PH705: Since menopause, have you used prescription hormones (examples given on card)

- | | |
|---------------------------------------|--------------------|
| 1. Yes, currently taking hormones | Go to PH706 |
| 2. Yes, but no longer taking hormones | Go to PH707 |
| 5. No | Go to PH708 |
| 98. DK | Go to PH708 |
| 99. RF | Go to PH708 |
- (NSHAP)

PH706: For how many years have you been taking prescription hormones?

- 1 ... 100
 - 98. DK
 - 99. RF
- (TILDA)

BL: GO TO PH708

PH707: For how many years did you take prescription hormones?

- 1....100
- 98. DK
- 99. RF

PH708: Do you check your breasts for lumps regularly?

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (HRS)

PH709: Have you had a mammogram or x-ray of the breast, to search for cancer?

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (HRS)

BL: GO TO PH712

PH710: An examination of your prostate to screen for cancer?

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (HRS)

PH711: A PSA blood test to screen for cancer?

NOTE: PSA blood test is a test to screen for prostate cancer

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (HRS)

BL:

IF PH116 = 1 GO TO PH712

IF PH116 = 2 GO TO PH713

PH712: A little while ago, the computer read you a list of words twice, and you repeated the ones you could remember. Please tell me any of the words that you can remember now?

IWER: ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

- 1....10
- 98. DK
- 99. RF
- (SHARE/ELSA/HRS)
- GO TO PH714

PH713: A little while ago, I read you a list of words twice, and you repeated the ones you could remember. Please tell me any of the words that you can remember now?

IWER: ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

1....10

98. DK

99. RF

(SHARE/ELSA/HRS)

PH714: That is the end of the memory and concentration tasks.

IWER: PAUSE FOR EXACTLY FIVE SECONDS

IWER: IF NO RESPONSE, PROMPT: YOU WERE GOING TO DO SOMETHING WHEN I SAID THAT. CAN YOU REMEMBER WHAT IT WAS?

IWER: IF RESPONDENT SAYS 'AM I SUPPOSED TO?' THEN SAY: 'DO WHATEVER YOU THINK YOU ARE SUPPOSED TO.'

IWER: CODE WHETHER OR NOT YOU PROMPTED RESPONDENT.

1 Prompt not given

2 Prompt given

PH715:

IWER: CODE WHAT RESPONDENT DID

1 Reminded you to record the time

2 Did something else

3 Did nothing/did not remember what to do

98. DK

99. RF

PH716:

IWER: DURING THE COGNITIVE FUNCTION TEST WERE THERE ANY FACTORS THAT MAY HAVE IMPAIRED THE RESPONDENT'S PERFORMANCE ON THE TESTS?

1. YES GO TO PH717

5. NO GO TO PH718

PH717:

IWER: WHAT WERE THESE FACTORS?

IWER: CODE ALL THAT APPLY

- | | |
|--|------------|
| 01. Blind or poor eyesight | [ph717_01] |
| 02. Deaf or hard of hearing | [ph717_02] |
| 03. Hand tremors affecting writing ability | [ph717_03] |
| 04. In pain | [ph717_04] |
| 05. Has an illness or physical impairment that affects ability to perform the test | [ph717_05] |
| 06. Too tired | [ph717_06] |
| 07. Other physical impairment | [ph717_07] |
| 08. Impaired concentration/memory (e.g. because taking medication) | [ph717_08] |
| 09. Suffers from dementia | [ph717_09] |
| 10. Nervous or anxious | [ph717_10] |
| 11. General memory problems | [ph717_11] |
| 12. Other mental impairment | [ph717_12] |
| 13. Interrupted by phone call or visitor | [ph717_13] |
| 14. Noisy environment | [ph717_14] |
| 15. Someone else in the room | [ph717_15] |
| 16. Problems with the laptop | [ph717_16] |
| 17. Other distraction | [ph717_17] |
| 18. Had difficulty understanding english | [ph717_18] |
| 19. Literacy problems | [ph717_19] |
| 95. Other | [ph717_20] |

PH718:

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION PH?

- 1. NEVER**
- 2. A FEW TIMES**
- 3. MOST OR ALL TIMES**

BL: GO TO FL001

SECTION 6. I(ADL) & HELPERS (FL)

Difficulties with Activities of Daily Life

INTRO: We need to understand the difficulties people may have with various activities

IWER: IF R IS CONFINED TO BED OR A WHEELCHAIR, READ THE FOLLOWING STATEMENT:

'I AM REQUIRED TO ASK ABOUT ALL OF THESE ACTIVITIES. I REALIZE THAT YOU MAY NOT BE ABLE TO DO SOME OF THEM, BUT I WOULD APPRECIATE IT IF YOU WOULD JUST CONFIRM THAT WITH ME AS WE GO THROUGH THE LIST.'

IWER: SHOW CARD FL1

FL001. Please look at card FL1. Because of a physical or mental health problem, do you have difficulty doing any of the activities on this card? Exclude any difficulties that you expect to last less than three months.

IWER: READ EACH ONE OF THE DIFFICULTIES

IWER: PROBE: ANY OTHERS? CODE ALL THAT APPLY

- | | |
|---|------------|
| 1. Walking 100 meters (100 yards) | [fl001_01] |
| 2. Running or jogging about 1.5 kilometers (1 mile) | [fl001_02] |
| 3. Sitting for about two hours | [fl001_03] |
| 4. Getting up from a chair after sitting for long periods | [fl001_04] |
| 5. Climbing several flights of stairs without resting | [fl001_05] |
| 6. Climbing one flight of stairs without resting | [fl001_06] |
| 7. Stooping, kneeling, or crouching | [fl001_07] |
| 8. Reaching or extending your arms above shoulder level | [fl001_08] |
| 9. Pulling or pushing large objects like a living room chair | [fl001_09] |
| 10. Lifting or carrying weights over 10 pounds/5 kilos, like a heavy bag of groceries | [fl001_10] |
| 11. Picking up a small coin from a table | [fl001_11] |
| 96. None of these GO TO FL025 | [fl001_13] |
| 99 RF GO TO FL025 | [fl001_12] |
| (SHARE) | |

IWER: IF RESPONDENT SELECTS MORE THAN ONE DIFFICULTY ENTER THE CODE FOR THAT CONDITION AND GO TO THE ROUTED QUESTIONS. ONCE COMPLETE, ENTER THE CODE FOR THE NEXT CONDITION AND GO TO THE ROUTED QUESTIONS UNTIL ALL DIFFICULTIES ARE ENTERED. WHEN ALL CONDITIONS ARE ENTERED GO TO FL020 (IF R HAS ANY OF THE DIFFICULTIES AND SOMEONE HELPS WITH THE DIFFICULTIES) OR GO TO FL025 (IF R HAS NO DIFFICULTIES).

IWER: SHOW CARD FL2.

FL002. Please look at card FL2. Because of a health or memory problem, do you have difficulty doing any of the activities on this card? Again exclude any difficulties you expect to last less than three months.

IWER: READ EACH ONE OF THE DIFFICULTIES

IWER: CODE ALL THAT APPLY

- | | | |
|---|--------------------|-----------|
| 1. Dressing, including putting on shoes and socks | GO TO FL003 | [fl002_1] |
| 2. Walking across a room | GO TO FL006 | [fl002_2] |
| 3. Bathing or showering | GO TO FL009 | [fl002_3] |
| 4. Eating, such as cutting up your food | GO TO FL012 | [fl002_4] |
| 5. Getting in or out of bed | GO TO FL014 | [fl002_5] |
| 6. Using the toilet, including getting up or down | GO TO FL017 | [fl002_6] |
| 96. None of these | GO TO FL025 | [fl002_9] |
| 98. DK | GO TO FL025 | [fl002_7] |
| 99. RF | GO TO FL025 | [fl002_8] |

IWER: PROBE: ANY OTHERS?
(SHARE)

FL003: Do you ever use equipment or devices to help you get dressed?

1. Yes
5. No **GO TO FL005**
98. DK **GO TO FL005**
99. RF **GO TO FL005**
(HRS/SHARE/ELSA)

FL004: Which equipment is that?

- | | |
|---------------------------------|-----------|
| 1. Velcro fastenings on clothes | [fl004_1] |
| 2. Shoe horn | [fl004_2] |
| 3. Pick-up stick | [fl004_3] |
| 4. Device for putting on socks | [fl004_4] |
| 95. Other (specify) [fl004oth] | [fl004_5] |
| 98. DK | [fl004_6] |
| 99. RF | [fl004_7] |
- (HRS/SHARE/ELSA)

FL005: Does anyone ever help you with dressing including putting on shoes and socks?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FL002=2 – GO TO FL006

IF FL002=3 – GO TO FL009

IF FL002=4 – GO TO FL012

IF FL002=5 – GO TO FL014

IF FL002=6 – GO TO FL017

FL006: Do you ever use equipment or devices such as a walking stick or frame when crossing a room?

1. Yes

5. No **GO TO FL008**

98. DK **GO TO FL008**

99. RF **GO TO FL008**

(HRS/SHARE/ELSA)

FL007: Which equipment is that?

1. Walking stick

[fl007_01]

2. Walking frame

[fl007_02]

3. Crutches

[fl007_03]

4. Railing

[fl007_04]

5. Orthopaedic shoes

[fl007_05]

6. Brace (leg or back)

[fl007_06]

7. Limb prosthesis

[fl007_07]

8. Oxygen/Respirator

[fl007_08]

9. Furniture or walls

[fl007_09]

10. Wheelchair or cart

[fl007_10]

95. Other (specify)

[fl007_11]

98. DK

[fl007_12]

99. RF

[fl007_13]

(HRS/SHARE/ELSA)

FL008: Does anyone ever help you with walking across a room?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FL002=3 – GO TO FL009

IF FL002=4 – GO TO FL012

IF FL002=5 – GO TO FL014

IF FL002=6 – GO TO FL017

FL009: Do you ever use equipment or devices such as a shower seat, grab rails, hand-held shower when bathing or showering?

1. Yes

5. No **GO TO FL011**

98. DK **GO TO FL011**

99. RF **GO TO FL011**

(HRS/SHARE/ELSA)

FL010: Which equipment is that?

1. Shower seat

[fl010_1]

2. Grab rails

[fl010_2]

3. Hand-held shower

[fl010_3]

4. Walking frame or stick

[fl010_4]

5. Rubber mat

[fl010_5]

95. Others (specify) **[fl010_oth]**

[fl010_6]

98. DK

[fl010_7]

99. RF

[fl010_8]

(HRS/SHARE/ELSA)

FL011: Does anyone ever help you with bathing or showering?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FL002=4 – GO TO FL012

IF FL002=5 – GO TO FL014

IF FL002=6 – GO TO FL017

FL012: Do you ever use special utensils or special dishes when you eat?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

FL013: Does anyone ever help you with eating?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FL002=1 – GO TO FL020

IF FL002=5 – GO TO FL014

FL014: Do you ever use equipment or devices such as a stick, frame or wheelchair when getting in or out of bed?

1. Yes

5. No **GO TO FL016**

98. DK **GO TO FL016**

99. RF **GO TO FL016**

(HRS/SHARE/ELSA)

FL015: Which equipment is that?

1. Walking stick

[fl015_01]

2. Walking frame

[fl015_02]

3. Bed rail

[fl015_03]

4. Crutches

[fl015_04]

5. Orthopedic Shoes

[fl015_05]

6. Brace (leg or back)

[fl015_06]

7. Prosthesis

[fl015_07]

8. Oxygen/Respirator

[fl015_08]

9. Furniture/walls

[fl015_09]

10. Wheelchair/cart

[fl015_10]

11. Bed lever

[fl015_11]

95. Other (specify) **[fl015_oth]**

[fl015_12]

98. DK

[fl015_13]

99. RF

[fl015_14]

(HRS/SHARE/ELSA)

FL016: Does anyone ever help you with getting into or out of bed?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FL002=6 – GO TO FL017

FL017: Do you ever use equipment or devices such as a raised toilet seat or portable toilet, when using the toilet?

1. Yes

5. No **GO TO FL019**

98. DK **GO TO FL019**

99. RF **GO TO FL019**

(HRS/SHARE/ELSA)

FL018: Which equipment is that?

1. Raised toilet seat

[fl018_1]

2. Portable toilet / commode

[fl018_2]

3. Grab rails

[fl018_3]

95. Others (specify) **[fl018oth]**

[fl018_4]

98. DK

[fl018_5]

99. RF

[fl018_6]

(HRS/SHARE/ELSA)

FL019: Does anyone ever help you with using the toilet, including getting on and off to the toilet?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FLO05=1 OR/AND FL008=1 OR/AND FL011=1 OR/AND FL013=1 OR/AND FL016=1 OR/AND FL019=1 - GO TO FL020

OTHERWISE GO TO FL025

[fl020a] – select person from the household list

FL020: Who most often helps you with (getting across a room / dressing / bathing / eating / getting in / out of bed / using the toilet)?

Text: up to 60 characters

98. DK

99. RF

(HRS)

FL020b Is <FL020> male or female?

1. Male

2. Female

FL021: What is that person's relationship to you?

1. Spouse / partner
2. Child / adopted child
3. Step Child
4. Child-in-law (daughter-in-law, son-in-law)
5. Parent
6. Parent-in-law
7. Brother or sister
8. Brother-in-law/Sister-in-law
9. Grandparent
10. Grandparent-in-law
11. Other blood relative
12. Other in-law
13. Grandchild
14. Non-relative

NOT ASKED HERE - data lifted from earlier sections
[fl021b] – age group of person,
[fl021c] – education level of person,
[fl021d] – employment status of person

[fl022b_1 to fl022b_3] – select person from the household list

FL022: Does anyone else help you with this activity/these activities?

BL: REPEAT FL022 TO FL024 FOR UP TO 3 NAMES

1. Yes
 5. No
 98. DK
 99. RF
- (HRS)

FL023: What is her/his first name?

[fl023_1 to fl023_3]

Text: up to 60 characters

98. DK
 99. RF
- (HRS)

FL023b Is <FL023> male or female?

[fl023b_1 to fl023b_3]

1. Male
2. Female

FL024: What is that person's relationship to you? [fl024_1 to fl024_3]

1. Spouse / partner
2. Child/ adopted child
3. Step Child
4. Child-in-law (daughter-in-law, son-in-law)
5. Parent
6. Parent-in-law
7. Brother or sister
8. Brother-in-law/Sister-in-law
9. Grandparent
10. Grandparent-in-law
11. Other blood relative
12. Other in-law
13. Grandchild
14. Non-relative

NOT ASKED HERE - data lifted from earlier sections
[fl024b_1 to fl024b_3] – age group of person,
[fl024c_1 to fl024c_3] – education level of person,
[fl024d_1 to fl024d_3] – employment status of person

IWER: IF RESPONDENT SELECTS MORE THAN ONE DIFFICULTY ENTER THE CODE FOR THAT CONDITION AND GO TO THE ROUTED QUESTIONS. ONCE COMPLETE, ENTER THE CODE FOR THE NEXT CONDITION AND GO TO THE ROUTED QUESTIONS UNTIL ALL DIFFICULTIES ARE ENTERED. WHEN ALL CONDITIONS ARE ENTERED GO TO FL031

IWER: SHOW CARD FL3

FL025. Please look at card FL3. Because of a health or memory problem, do you have difficulty doing any of the activities on this card? Again exclude any difficulties you expect to last less than three months.

IWER: READ EACH ONE OF THE DIFFICULTIES

IWER: CODE ALL THAT APPLY

- | | | |
|---|--------------------|-----------|
| 1. Preparing a hot meal | GO TO FL026 | [fl025_1] |
| 2. Doing household chores (laundry, cleaning) | GO TO FL27 | [fl025_2] |
| 3. Shopping for groceries | GO TO FL028 | [fl025_3] |
| 4. Making telephone calls | GO TO FL029 | [fl025_4] |
| 5. Taking medications | GO TO FL030 | [fl025_5] |
| 6. Managing money, such as paying bills and keeping track of expenses | GO TO FL031 | [fl025_6] |
| 96. None of these | GO TO FL042 | [fl025_8] |
| 99 RF | GO TO FL042 | [fl025_7] |

IWER: PROBE: ANY OTHERS?

FL026: Does anyone help you with preparing a hot meal?

1. Yes
 5. No
 98. DK
 99. RF
- (HRS/SHARE/ELSA)

BL:

IF FL025=2 – GO TO FL027

IF FL025=3 – GO TO FL028

IF FL025=4 – GO TO FL029

IF FL025=5 – GO TO FL030

FL027: Does anyone help you with doing household chores?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FL025=3 – GO TO FL028

IF FL025=4 – GO TO FL029

IF FL025=5 – GO TO FL030

IF FL025=6 – GO TO FL031

FL028: Does anyone help you with shopping for groceries?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

FL029: Does anyone help you make phone calls?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FL025=5 – GO TO FL030

IF FL025=6 – GO TO FL031

FL030: Does anyone help you take your medications?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

BL:

IF FL025=6 – GO TO FL031

**IF FL025~=96 AND/OR FL026=1 AND/OR FL027=1 AND/OR FL028=1 AND/OR
FL029=1 AND/OR FL030=1 AND/OR FL031=1 GO TO FL031**

FL031: Does anyone help you with managing your own money?

1. Yes

5. No

98. DK

99. RF

(HRS/SHARE/ELSA)

**IF FL026=1 AND/OR FL027=1 AND/OR FL028=1 AND/OR FL029=1 AND/OR FL030=1
GO TO FL031**

IF FL031=1 GO TO FL037

[fl032a] – select person from the household list

FL032: Who most often helps you with (preparing meals/doing household chores/shopping for groceries/making telephone calls/your medications)?

Text: up to 60 characters

98. DK

99. RF

(HRS/SHARE/ELSA)

FL032b Is <FL032> male or female?

1. Male

2. Female

FL033: What is that person's relationship to you?

1. Spouse / partner

2. Child/ adopted child

3. Step Child

4. Child-in-law (daughter-in-law, son-in-law)

5. Parent

6. Parent-in-law

7. Brother or sister

8. Brother-in-law/Sister-in-law

9. Grandparent

10. Grandparent-in-law

11. Other blood relative

12. Other in-law

13. Grandchild

14. Non-relative

NOT ASKED HERE - data lifted from earlier sections

[fl033b] – age group of person,

[fl033c] – education level of person,

[fl033d] – employment status of person

**BL: REPEAT FL034 THROUGH FL036 UP TO 3 NAMES IF FL026=1 AND/OR FL027=1
AND/OR FL028=1 AND/OR FL029=1 AND/OR FL030=1**

[fl034b_1 to fl034b_3] – select person from the household list

FL034: Does anyone else help you with this activity/these activities?

1. Yes

5. No

98. DK

99. RF

(HRS)

FL035: What is his/her first name?

[fl035_1 to fl035_3]

Text: up to 60 characters

98. DK

99. RF

(HRS)

FL035b Is <FL035> male or female?

[fl035b_1 to fl035b_3]

1. Male

2. Female

FL036: What is that person's relationship to you?

[fl036_1 to fl036_3]

1. Spouse / partner

2. Child/ adopted child

3. Step Child

4. Child-in-law (daughter-in-law, son-in-law)

5. Parent

6. Parent-in-law

7. Brother or sister

8. Brother-in-law/Sister-in-law

9. Grandparent

10. Grandparent-in-law

11. Other blood relative

12. Other in-law

13. Grandchild

14. Non-relative

NOT ASKED HERE - data lifted from earlier sections

[fl036b_1 to fl036b_3] – age group of person,

[fl036c_1 to fl036c_3] – education level of person,

[fl036d_1 to fl036d_3] – employment status of person

BL:

IF FL031=1 GO TO FL037

IF FL031~1 GO TO FL042

[fl037a] – select person from the household list

FL037: Who most often helps you to manage your money?

Text: up to 60 characters

98. DK

99. RF

(HRS)

FL037b Is <FL037> male or female?

1. Male

2. Female

FL038: What is that person's relationship to you?

1. Spouse / partner

2. Child/ adopted child

3. Step Child

4. Child-in-law (daughter-in-law, son-in-law)

5. Parent

6. Parent-in-law

7. Brother or sister

8. Brother-in-law/Sister-in-law

9. Grandparent

10. Grandparent-in-law

11. Other blood relative

12. Other in-law

13. Grandchild

14. Non-relative

NOT ASKED HERE - data lifted from earlier sections

[fl038b] – age group of person,

[fl038c] – education level of person,

[fl038d] – employment status of person

BL: REPEAT FL038 THROUGH TO FL041 (NEXT HELPER)

[fl039b_1 to fl039b_3] – select person from the household list

FL039: Does anyone else help you with this activity/these activities?

1. Yes

5. No

98. DK

99. RF

(HRS)

FL040: What is his/her first name?

[fl040_1 to fl040_3]

Text: up to 60 characters

98. DK

99. RF

(HRS)

FL040b Is <FL040> male or female?

[fl040b_1 to fl040b_3]

1. Male

2. Female

FL041: What is that person's relationship to you?

[fl041_1 to fl041_3]

1. Spouse / partner

2. Child/ adopted child

3. Step Child

4. Child-in-law (daughter-in-law, son-in-law)

5. Parent

6. Parent-in-law

7. Brother or sister

8. Brother-in-law/Sister-in-law

9. Grandparent

10. Grandparent-in-law

11. Other blood relative

12. Other in-law

13. Grandchild

14. Non-relative

NOT ASKED HERE - data lifted from earlier sections

[fl041b_1 to fl041b_3] – age group of person,

[fl041c_1 to fl041c_3] – education level of person,

[fl041d_1 to fl041d_3] – employment status of person

Helpers

BL: REPEAT FL042 THROUGH FL053 FOR THE HELPERS ON THE LIST.

FL042: Let's think for a moment about the help you receive with the difficulties that we just talked about. During the last month, on about how many days did HELPER's NAME help you? **[fl042_1 to fl042_34] [fl042x_1 to fl042x_20]**

0... 31

98. RF

99. DK

(HRS)

FL043: On the days when HELPER's NAME helps you, about how many hours per day do they spend helping you? **[fl043_1 to fl043_34] [fl043x_1 to fl043x_20]**

IWER: IF HELPER PROVIDES LESS THAN AN HOUR PER DAY CODE 1

1...24

2. 98. DK

3. 99. RF

(HRS)

BL: IF HELPER IS A SPOUSE GO TO FL045 THEN GO TO LOOP FL042 (NEXT HELPER)

FL045: Does HELPER's NAME receive the State Carer's Allowance or Carer's Benefit? **[fl045_1 to fl045_34] [fl045x_1 to fl045x_20]**

1. Yes

5. No

98. DK

99. RF

FL045b: Does HELPER's NAME receive regular payment from you , your family or from an agency or organisation to help care for you?

[fl045b_1 to fl045b_34] [fl045bx_1 to fl045bx_20]

1. Yes **GO TO FL046**

5. No **GO TO FL042 (next helper)**

FL046: Is this person [helper's name]:

[fl046_1 to fl046_34] [fl046x_1 to fl046x_20]

1. From a private agency

2. From a non-profit organization (such as the Irish Wheelchair Association, the Alzheimer's Society of Ireland, etc)

3. From the HSE (local health board)

4. Family or Friend who is paid to help

5. Other

(SHARE)

FL047: Thinking now about the cost of this paid help in the past month, about what percentage of this cost does the HSE/health board cover?

[fl047_1 to fl047_34] [fl047x_1 to fl047x_20]

0...100

98. DK

99. RF

FL048: Not counting costs paid by the HSE/health board, about how much did you (and your [husband/wife/partner]) pay HELPER's NAME in the last month?

[fl048_1 to fl048_34] [fl048x_1 to fl048x_20]

€0 ... €100,000

98. DK

99. RF

(TILDA)

FL049: Does any other person help you (and your [husband/wife/partner]) pay for this cost?

[fl049_1 to fl049_34] [fl049x_1 to fl049x_20]

1. Yes

5. No **GO TO FL042**

98. DK

99. RF

(TILDA)

FL050: Is that a (child or other) relative of yours (and your [husband/wife/partner]), or is that someone else?

[fl050_1 to fl050_34] [fl050x_1 to fl050x_20]

1. Child/child in-law/grandchild **GO TO FL051**

2. Other relative **LOOP FL042**

3. Someone else **LOOP FL042**

98. DK

99. RF

(TILDA)

FL051: Which child is that?

IWER: ENTER NAME OF CHILD

[fl051_1 to fl051_34] [fl051x_1 to fl051x_20]

Text: up to 60 characters

98. DK

99. RF

(HRS)

FL052: Any other child?

[fl052_1 to fl052_34] [fl052x_1 to fl052x_20]

1. Yes

5. No **GO TO THE NEXT HELPER**

98. DK

99. RF

(HRS)

FL053. What is her/his name?

Text: up to 60 characters

[fl053_1 to fl053_34] [fl053x_1 to fl053x_20]

98. DK

99. RF

BL: END OF LOOP QUESTION

IF (FL001 = None of these or REF OR FL002 = None of these, DK or REF) AND (FL025 = None of these, REF) then skip over FL054 (and FL055) and go to FL056

FL054: How many different paid helpers – **in total** - have been involved in taking care of you in the last two years? (If all helpers are unpaid relatives or friends code 0)

0... 10

98. DK

99. RF

FL055: How many of the paid helpers were Irish?

0... 10

98. DK

99. RF

(TILDA)

FL056:

IWER (CODE WITHOUT ASKING): HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION FL

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

BL: GO TO HU001

SECTION 7. HEALTHCARE UTILISATION (HU)

INTRO: Now we have some questions about your healthcare and how you pay for it.

HU001: Are you covered by

IWER: CODE THE ONE THAT APPLIES

1. Full Medical Card or equivalent

2. GP Visit Card

96. Neither of these

98. DK

99. RF

Note: This question is asked even of those covered by private medical insurance. Most over 70s are entitled to medical cards.

(EU-SILC)

HU002. Do you have private medical insurance cover (VHI etc.) in your own name or through another family member?

1. Yes, in own name **GO TO HU003**

2. Yes, as the spouse of a subscriber **GO TO HU003**

3. Yes, as the relative of a subscriber **GO TO HU003**

5. No **GO TO HU005**

98. DK **GO TO HU005**

99. RF **GO TO HU005**

(HEALTH INSURANCE AUTHORITY 2005 SURVEY)

HU003: Which company are you insured with?

IWER: IF RESPONDENT IS NOT CERTAIN, ASK IF HE/SHE COULD CHECK HIS/HER MEDICAL INSURANCE CARD OR LATEST MEDICAL INSURANCE BILL.

IWER: CODE THE ONE THAT APPLIES

1. QUINN Healthcare (BUPA Ireland)

2. VHI Healthcare

3. AVIVA / Hibernian Healthcare / VIVAS Health

95. Other **[hu003oth]**

98. DK

99. RF

(HEALTH INSURANCE AUTHORITY 2005 SURVEY)

BL: IF HU003 = 95 ASK HU004

HU004: Which medical insurance scheme/plan are you covered by?

IWER: IF RESPONDENT IS NOT CERTAIN, ASK IF HE/SHE COULD CHECK HIS/HER MEDICAL INSURANCE CARD OR LATEST MEDICAL INSURANCE BILL.

Text: Up to 60 Characters

98. DK

99. RF

(HEALTH INSURANCE AUTHORITY 2005 SURVEY)

BL: IF HU003 = 1 (BUPA Ireland/QUINN Healthcare) ASK

HU004a Which medical insurance scheme/plan are you covered by?

1. Essential Starter
2. Essential
3. Essential Plus Starter
4. Essential Plus with Excess
5. Essential Plus
6. PersonalCare/Familycare
7. HealthManager Starter
8. HealthManager
9. HealthManager Silver
10. Essential Gold
11. HealthManager Gold
12. Other (specify) [hu004aoth]
98. DK
99. RF

BL: IF HU003 = 2 (VHI Healthcare) ASK

HU004b Which medical insurance scheme/plan are you covered by?

1. Plan A/Plan A option
2. First Plan / Family Plan
3. First Plan Select
4. Plan B / Plan B option
5. First Plan Plus / Family Plan Plus
6. Plan C / Plan C option
7. Forward Plan
8. Plan D
9. Plan E
10. HealthSteps Silver
11. HealthSteps Gold
13. Other (specify) [hu004both]
98. DK
99. RF

BL: IF HU003 = 3 (VIVAS Health/Hibernian Healthcare) ASK

HU004c Which medical insurance scheme/plan are you covered by?

1. Me Level 1
2. I & We Level 1
3. Me Level 2
4. I & We Level 2
5. I & We Level 3
6. I & We Level 4
7. I & We Level 5
8. Day-to-day A with Me Plan
9. Day-to-day A with I or We
10. Day-to-day 50 with any plan
11. Other (specify) [hu004coth]
98. DK
99. RF

HU005: In the last 12 months, about how often did you visit your GP?

IWER: IF RESPONDENT HAS NOT VISITED GP IN THE LAST 12 MONTHS CODE 0

0...200

98. DK **GO TO HU007**

99. RF **GO TO HU007**

BL:

IF HU005=0 GO TO HU007

IF HU005>0 AND HU001=1, 2 GO TO HU007

IF HU005>0 AND HU001~=1, 2 GO TO HU006

(SHARE)

HU006: How much did you pay for your last visit to the GP, **after any health insurance reimbursement?**

IWER: IF R CANNOT GIVE EXACT VALUE, ACCEPT APPROXIMATE VALUE

€0 ... €10,000

98. DK

99. RF

HU007: In the last 12 months, how many times did you visit a hospital Emergency Department (sometimes called A&E or Accident and Emergency) as a patient?

IWER: IF RESPONDENT HAS NOT VISITED AN A&E DEPARTMENT IN THE LAST 12 MONTHS CODE 0

0... 200

98. DK

99. RF

(HARP)

HU008: In the last 12 months, about how many visits did you make to a hospital as an out-patient? (Include all types of consultations, tests, operations, procedures or treatments)

IWER: IF RESPONDENT HAS NOT MADE ANY OUT-PATIENT VISITS, CODE 0

0...200

98. DK **GO TO HU010**

99. RF **GO TO HU010**

BL:

IF HU005=0 - GO TO HU010

IF HU005>0 - GO TO HU009

HU009: On how many of these visits did you have a substantial procedure, operation or test i.e. one which took a considerable amount of time to perform?

Note: These are sometimes called day-case procedures.

IWER: IF RESPONDENT HAS NOT UNDERGONE ANY DAY-CASE PROCEDURES CODE 0

0... 200

98. DK

99. RF

HU010: In the last 12 months, on how many occasions were you admitted to hospital overnight?

IWER: IF RESPONDENT HAS NOT ADMITTED TO HOSPITAL OVERNIGHT IN THE LAST 12 MONTHS CODE 0

0...50

98. DK **GO TO HU015**

99. RF **GO TO HU015**

Note: These are sometimes called in-patient admissions.

BL:

IF HU010=0 - GO TO HU015

IF HU010>0 - GO TO HU011

HU011: During these hospital stays in the last 12 months, about how many operations (procedures) involving a full anaesthetic did you have?

IWER: IF RESPONDENT HAS NOT HAD ANY OPERATIONS (PROCEDURES) INVOLVING A FULL ANAESTHETIC IN THE LAST 12 MONTHS CODE 0

0...50

98. DK

99. RF

HU012: In total, about how many nights did you spend in hospital in the last 12 months?

1...364

98. DK

99. RF

HU013: When you stayed overnight in hospital, was this

IWER: IF THE RESPONDENT HAS HAD INPATIENT ADMISSIONS AS BOTH A PUBLIC AND A PRIVATE PATIENT PLEASE CODE THE MOST USUAL

1. As a public patient

2. As a private patient

98. DK

99. RF

HU014...: When you stayed overnight in hospital, was this in a

IWER: IF THE RESPONDENT HAS HAD INPATIENT ADMISSIONS AS BOTH A PUBLIC AND A PRIVATE HOSPITAL PLEASE CODE THE MOST USUAL

1. Public Hospital

2. Private Hospital

98. DK

99. RF

IWER: SHOW CARD HU1

HU015. Please look at card HU1

In the last 12 months, did you receive any of the following State services?

Exclude any services for which respondent pays anything other than a token or nominal amount.

IWER: READ OUT AND CODE ALL THAT APPLY

- | | |
|--|------------|
| 1. Public Health or Community Nurse GO TO HU016 | [hu015_01] |
| 2. Occupational therapy GO TO HU017 | [hu015_02] |
| 3. Chiropody services GO TO HU018 | [hu015_03] |
| 4. Physiotherapy services GO TO HU019 | [hu015_04] |
| 5. Speech & Language Therapist GO TO HU031a | [hu015_05] |
| 6. Social work services GO TO HU020 | [hu015_06] |
| 7. Psychological/counselling services GO TO HU021 | [hu015_07] |
| 8. Home help GO TO HU022 | [hu015_08] |
| 9. Personal care attendant GO TO HU023 | [hu015_09] |
| 10. Meals-on-Wheels GO TO HU024 | [hu015_10] |
| 11. Day centre services GO TO HU026 | [hu015_11] |
| 12. Optician service GO TO HU027 | [hu015_12] |
| 13. Dental services GO TO HU028 | [hu015_13] |
| 14. Hearing services GO TO HU029 | [hu015_14] |
| 15. Dietician services GO TO HU030 | [hu015_15] |
| 16. Respite services GO TO HU031 | [hu015_16] |
| 96. None of these GO TO HU031b | [hu015_17] |

IWER: Category 1 includes Public Health Nurses, Community RGNs, Community Mental Health Nurses, Clinical Nurse Specialists and Advanced Nurse Practitioners

IWER: SHOW CARD HU2

HU016. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU017. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU018. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU019. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU020. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU021. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU022. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU023. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU024. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

HU025: Thinking of a typical week, on how many days did you receive meals-on-wheels?

1...7

98.DK

99.RF

(TILDA)

IWER: SHOW CARD HU2

HU026. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU027. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU028. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU029. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU030. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU031. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU2

HU031a. Are you satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
2. No – dissatisfied because service is not supplied frequently enough
3. No – dissatisfied because service is hard to access
- 4 No – dissatisfied for other reason

IWER: SHOW CARD HU1 AGAIN

HU031b: Thinking of all these services, are there any that you do **not** now receive which you feel you have a need for?

IWER: CODE ALL THAT APPLY

- | | |
|---------------------------------------|-------------|
| 1. Public health or Community Nurse | [hu031b_01] |
| 2. Occupational therapy | [hu031b_02] |
| 3. Chiropody services | [hu031b_03] |
| 4. Physiotherapy services | [hu031b_04] |
| 5. Speech and Language Therapy | [hu031b_05] |
| 6. Social work services | [hu031b_06] |
| 7. Psychological/counselling services | [hu031b_07] |
| 8. Home help | [hu031b_08] |
| 9. Personal care attendant | [hu031b_09] |
| 10. Meals-on-Wheels | [hu031b_10] |
| 11. Day centre services | [hu031b_11] |
| 12. Optician service | [hu031b_12] |
| 13. Dental services | [hu031b_13] |
| 14 Hearing services | [hu031b_14] |
| 15. Dietician services | [hu031b_15] |
| 16. Respite services | [hu031b_16] |
| 17. None of these | [hu031b_17] |

HU031c: You have said you don't receive but would like to. Could you say what is the main thing that prevents you from receiving it? **IWER: Code main reason not receiving for each service selected in HU031b.** [hu031c_1 to hu031c_16]

1. Never heard of service
2. Did not know it was available
3. Do not have suitable transport
4. It's too costly
5. I am reluctant to apply/ don't have time to apply
6. I'm not eligible for it
7. Other
98. DK
99. RF

HU031d: If you or a relative needed one of these services, how would you go about finding out about it? **IWER: Code the first step respondent would take.**

1. Ask relatives, friends, neighbours
 2. Ask my doctor (GP)
 3. Contact the HSE
 4. Contact the Department of Health and Children
 5. Contact other national agency/ Department
 6. Search on the internet
 7. Contact a local body or organisation (such as the Citizen's Advice Bureau, St Vincent de Paul Society, Friends of the Elderly etc.)
 8. Phone Senior Helpline
 9. Other
98. DK
99. RF

HU032: In the last 12 months, how much time did you spend in a nursing home?

1. Did not spend any night in a nursing home in the last 12 months **GO TO HU034**
 2. One week or less **GO TO HU033**
 3. Up to 1 month **GO TO HU033**
 4. Up to 2 months **GO TO HU033**
 5. Up to 3 months **GO TO HU033**
 6. More than 3 months **GO TO HU033**
98. DK **GO TO HU034**
99. RF **GO TO HU034**
(SHARE)

HU033: Not counting health insurance refunds, about how much did you pay out-of-pocket for the time you spent in a nursing home in the last 12 months?

IWER: IF RESPONDENT CANNOT GIVE EXACT VALUE, ACCEPT APPROXIMATE VALUE

€0 ... and €50,000

98. DK
99. RF
(SHARE)

IWER: SHOW CARD HU3

HU034: Please look at card HU3. Think of your last prescription. Were you charged for this?

IWER: CODE THE ONE THAT APPLIES

1. No. I have a Medical Card or equivalent cards **GO TO HU036**
 2. No. I am covered by the Long Term Illness scheme or by the High Tech Drugs Scheme **GO TO HU036**
 3. I only paid part of the cost. The rest was paid through the Drug Payment scheme **GO TO HU036**
 4. Yes, but I will claim back part of it from my health insurance **GO TO HU035**
 5. Yes, and I will not claim anything back from my health insurance **GO TO HU035**
98. DK **GO TO HU035**
99. RF **GO TO HU03**

HU035: Not counting health insurance refunds, on average about how much do you pay out-of-pocket for your prescribed drugs per month?

IWER: IF RESPONDENT DOES NOT PURCHASE PRESCRIBED DRUGS REGULARLY, ASK FOR TOTAL SPENT IN THE LAST 12 MONTHS IN PRESCRIBED DRUGS AND DIVIDE BY 12.

IWER: IF R CANNOT GIVE EXACT VALUE, ACCEPT APPROXIMATE VALUE

€0 ... €5,000

98. DK

99. RF

NOTE: do not consider expenses for self-medication or drugs not prescribed

NOTE: By 'out of pocket' expenses we mean everything that is not paid by the insurance company. If you first pay but later get it refunded, this is not out of pocket expenses.

(SHARE)

HU036: Not counting any refunds from your health insurance, about how much did you pay (out-of-pocket) for any other health expenses you had in the last 12 months?

€0 ... and €20,000

98. DK

99. RF

Note:

By other health expenses we mean non-prescription drugs, private physiotherapy, preventive rehabilitative services such as occupational therapy etc..

By 'out of pocket' expenses we mean everything that is not paid by the insurance company. If you first pay but later get it refunded, this is not out of pocket expenses. Prescription drugs should be included in HU023 and not here.

(SHARE)

HU037:

IWER (CODE WITHOUT ASKING): HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION HU

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

BL: GO TO MH001

SECTION 8. MENTAL HEALTH (MH)

Depression

IWER: SHOW CARD MH1

INTRO: The next section of the interview is about people's mood, feelings and well-being. I am going to read a list of statements that describe some of the ways you may have felt or behaved in the last week. Please look at this card and indicate how often you have felt this way during the past week.

MH001: I was bothered by things that usually don't bother me

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH002: I did not feel like eating; my appetite was poor.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH003: I felt that I could not shake off the blues even with help from my family or friends.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH004: I felt that I was just as good as other people.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH005: I had trouble keeping my mind on what I was doing.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH006: I felt depressed.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH007: I felt that everything I did was an effort.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH008: I felt hopeful about the future.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH009: I thought my life had been a failure.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH010: I felt fearful.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH011: My sleep was restless.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH012: I was happy.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH013: I talked less than usual.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH014: I felt lonely.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH015: People were unfriendly.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH016: I enjoyed life.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH017: I had crying spells.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH018: I felt sad.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH019: I felt that people disliked me.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

MH020: I could not get "going."

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FELT DURING THE PAST WEEK RARELY..... SOME OF THE TIME.....?'

1. Rarely or none of the time (less than 1 day)
2. Some or a little of the time (1-2 days)
3. Occasionally or a moderate amount of time (3-4 days)
4. All of the time (5-7 days)

98. DK

99. RF

READ OUT: Now stop using SHOWCARD MH1. The next two questions do not need this card.

MH021: In the last month, have you felt that you would rather be dead?

1. Any mention of suicidal feelings or wishing to be dead
5. No such feelings

98. DK

99. RF

MH022: In the last 12 months, did you spend one or more nights in a hospital due to mental health problems?

1. Yes

5. No

98. DK

99. RF

Satisfaction

IWER: SHOW CARD MH2

MH023: Please look at card MH2. In a scale from 1 to 7, where '1' means strongly agree and '7' means strongly disagree, please say how much you agree or disagree with the following statement:

I am satisfied with my life

1 ... 7

98. DK

99. RF

MH024

IWER(CODE WITHOUT ASKING): HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION MH?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL TIMES

BL: GO TO WE001

SECTION 9. EMPLOYMENT SITUATION (WE)

Current activity status

IWER: SHOW CARD WE1

WE001. Now I'm going to ask you some questions about work, retirement and pensions. Please look at card WE1. Which one of these would you say best describes your current situation?

IWER: CODE THE ONE THAT APPLIES

1 Retired **GO TO WE003**

2 Employed **GO TO WE101**

(including unpaid work in family business, temporarily away from work, or participating in apprenticeship or employment programme - such as Community Employment)

3 Self-employed (including farming) **GO TO WE201**

4 Unemployed **GO TO WE003**

5 Permanently sick or disabled **GO TO WE003**

6 Looking after home or family **GO TO WE003**

7 In education or training **GO TO WE003**

95 Other (specify) **GO TO WE002**

98. DK **GO TO WE003**

99. RF **GO TO WE003**
(ELSA)

WE002. Other (specify)

Text: up to 60 characters

98. DK

99. RF

(ELSA)

WE003. Did you, nevertheless, do any paid work during the last week, either as an employee or self-employed, for at the least one hour?

1. Yes **GO TO WE103**

5. No

98. DK

99. RF

(SHARE/EU-SILC/TILDA)

BL:

IF WE001=4 AND WE003=5, 98, 99 - GO TO WE401

IF WE001=1, 5, 6, 7 AND WE003=5, 98, 99 - GO TO WE004

IF WE001 = 95, 98, 99 – GO TO WE004

WE004. Have you ever done any paid work?

1 Yes

5 No

98. DK

99. RF

(SHARE)

BL:

IF WE001=1 GO TO WE601

IF WE001=5 GO TO WE501

IF WE001=6 GO TO WE005

IF WE001=7 GO TO WE623

IF WE001 = 95, 98, 99 – GO TO WE623

WE005. Why are you not currently working?

1. Because of health problems

2. Work was too demanding

3. It was too expensive to hire someone to look after home or family

4. Because you wanted to take care of children or grandchildren

95. Other **GO TO WE006**

98. DK

99. RF

(SHARE/TILDA)

BL:

IF WE005=1, 2, 3, 4, 98, 99 - GO TO WE623

WE006. Other (specify)

Text: up to 60 characters

98. DK

99. RF

(SHARE)

BL:

GO TO WE623

Job description

WE101: Apart from your main job, do you have any other jobs, including subsidiary work in self-employment or farming?

1. Yes **GO TO WE102**

5. No **GO TO WE103**

98. DK **GO TO WE103**

99. RF **GO TO WE103**

(SHARE)

WE102: How many other jobs do you currently have?

1 ... 4

98. DK

99. RF

(SHARE)

WE103:

BL: IF WE101=1

Think about your most important job, that is, the job with highest salary or where you work the largest number of hours per week. What is the name or title of this job?

BL: IF WE101=5

What is the name or title of this job?

Text: up to 60 characters

98. DK

99. RF

(ELSA)

WE104: In this job are you employed in the public sector?

1. Yes

5. No

98. DK

99. RF

(SHARE)

WE105: In which year did you start this job?

1900..[current year]

98. DK

99. RF

(SHARE)

NOTE: By this we mean when did you start working with this employer.

WE106: Could you please tell me, is this?

1. A permanent job
2. A temporary job
3. Occasional work without a contract
4. Other working arrangement

98. DK

99. RF

(EU-SILC)

NOTE: By temporary job we mean working under a fixed term job contract. By occasional work without contract we mean working some hours of work per week without a contract.

WE107: How many hours a week do you usually work in this job, excluding meal breaks (but including any paid or unpaid overtime)?

0.0..168.0

98. DK **GO TO WE109**

99. RF **GO TO WE109**

(ELSA)

BL:

IF <30, GO TO WE108

IF >30, GO TO WE109

IWER: SHOW CARD WE2

WE108: Please look at card WE2. What is your main reason for working less than 30 hours per week?

IWER: CODE THE ONE THAT APPLIES

1. Undergoing education or training
2. Personal illness or disability
3. Want to work more hours, but cannot find a full-time job or work more hours in this job
4. Do not want to work more hours
5. Housework
6. Looking after children or other persons
7. Other reasons

98. DK

99. RF

(SHARE)

WE109: Excluding paid vacation or paid leave, for how many weeks did you work in the last 12 months in this job?

IWER: EXAMPLE: IF A PERSON SPENT 4 WEEKS ON HOLIDAY, THEN SUBTRACT THOSE 4 WEEKS FROM THE TOTAL OF 52 WEEKS IN THE YEAR'

1...52

98. DK

99. RF

(ELSA)

WE110x What kind of business, industry or services do you work in (that is, what do they make or do at the place where you work)?

IWER CODE FROM FOLLOWING LIST SHOW CARD WE110 IF YOU THINK THIS WOULD BE HELPFUL

- 1 A Agriculture, forestry and fishing
- 2 B Mining and quarrying
- 3 C Manufacturing
- 4 D Electricity, gas, steam and air conditioning supply
- 5 E Water supply; sewerage, waste management and remediation activities
- 6 F Construction
- 7 G Wholesale and retail trade; repair of motor vehicles and motorcycles
- 8 H Transportation and storage
- 9 I Accommodation and food service activities
- 10 J Information and communication
- 11 K Financial and insurance activities
- 12 L Real estate activities
- 13 M Professional, scientific and technical activities
- 14 N Administrative and support service activities
- 15 O Public administration and defence; compulsory social security
- 16 P Education
- 17 Q Human health and social work activities
- 18 R Arts, entertainment and recreation
- 19 S Other service activities
- 20 T Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- 21 U Activities of extra territorial organisations and bodies
- 22 CANNOT CLASSIFY

Industry need only be recorded where interviewer cannot classify from above list i.e. code 22

WE110: INTERVIEWER: Record verbatim what kind of business, industry or services the respondent works in?

Text: up to 60 characters

98. DK

99. RF

GO TO WE111

IWER: SHOW CARD WE3

WE111: Please look at card WE3. About how many people (including yourself) are employed at the place where you usually work?

IWER: CODE THE ONE THAT APPLIES

1. 1 to 5
 2. 6 to 15
 3. 16 to 24
 4. 25 to 199
 5. 200 to 499
 6. 500 or more
 98. DK
 99. RF
- (SHARE)

NOTE: By this we mean the whole organisation, not the branch, plant or service you work.

Wages

WE112: Thinking about your typical wage/salary payment, how long of a period would this cover?

1. One week
 2. Two weeks
 3. A month (4 weeks)
 4. Three months (13 weeks)
 5. Six months (26 weeks)
 6. One year (12 months/52 weeks)
 7. Don't receive monetary payment **GO TO WE134**
 95. Other (specify) **GO TO WE113**
 98. DK **GO TO WE130**
 99. RF **GO TO WE130**
- (EU-SILC)

BL: WE112=1, 2, 3, 4, 5,6 GO TO WE114

WE113: Other (specify) **GO TO WE114**

98. DK **GO TO WE130**
 99. RF **GO TO WE130**
- (EU-SILC)

WE114: Before any deductions for tax, social insurance (PRSI) or pension and health contributions, union dues and so on, about how much is your typical wage/salary payment? Include regular overtime, commission, tips etc.

€0 ... €500,000 **GO TO WE122**

98. DK

99. RF

(EU-SILC)

BL:

IF WE112=1 AND WE114=98, 99 GO TO WE115

IF WE112=2 AND WE114=98, 99 GO TO WE116

IF WE112=3 AND WE114=98, 99 GO TO WE117

IF WE112=4 AND WE114=98, 99 GO TO WE118

IF WE112=5 AND WE114=98, 99 GO TO WE119

IF WE112=6 AND WE114=98, 99 GO TO WE120

IF WE112=95 AND WE114=98, 99 GO TO WE121

WE115: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €300, €450, €600, €1,150.

98. DK

99. RF

BL:

IF WE115=RESPONSE GO TO WE122

IF WE115=98, 99 GO TO WE122

WE116: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €600, €900, €1,250, €2,500.

98. DK

99. RF

BL:

IF WE116=RESPONSE GO TO WE122

IF WE116=98, 99 GO TO WE122

WE117: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €1,250, €1,900, €2,500, €5,000.

98. DK

99. RF

BL:

IF WE117=RESPONSE GO TO WE122

IF WE117=98, 99 GO TO WE122

WE118: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €3,750, €5,600, €7,500, €15,000.

98. DK

99. RF

BL:

IF WE118=RESPONSE GO TO WE122

IF WE118=98, 99 GO TO WE122

WE119: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €7,500, €11,250, €15,000, €30,000.

98. DK

99. RF

BL:

IF WE119=RESPONSE GO TO WE122

IF WE119=98, 99 GO TO WE122

WE120: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €15,000, €22,500, €30,000, €60,000.

98. DK

99. RF

BL:

IF WE120=RESPONSE GO TO WE122

IF WE120=98, 99 GO TO WE122

WE121: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €15,000, €22,500, €30,000, €60,000.

98. DK

99. RF

BL:

IF WE121=RESPONSE GO TO WE122

IF WE121=98, 99 GO TO WE122

WE122: Usually people have some deductions made at source such as Income tax, PRSI contribution (incl. health levies), pension or superannuation contribution, trade union dues or subscriptions, life assurance premiums, private health insurance (VHI/BUPA/VIVAS) or other. What is the total net amount, i.e. after deductions at source and excluding expense refunds, you receive in your typical wage/salary payment? Include regular overtime, commission, tips etc.

€0 ... and €500,000

GO TO WE130

98. DK

99. RF

(EU-SILC)

BL:

IF WE112=1 AND WE122=98, 99 GO TO WE123

IF WE112=2 AND WE122=98, 99 GO TO WE124

IF WE112=3 AND WE122=98, 99 GO TO WE125

IF WE112=4 AND WE122=98, 99 GO TO WE126

IF WE112=5 AND WE122=98, 99 GO TO WE127

IF WE112=6 AND WE122=98, 99 GO TO WE128

IF WE112=95 AND WE122=98, 99 GO TO WE129

WE123: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €350, €500, €1,000.

98. DK

99. RF

BL:

IF WE123=RESPONSE GO TO WE130

IF WE123=98, 99 GO TO WE130

WE124: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €550, €800, €1,100, €2,150.

98. DK

99. RF

BL:

IF WE124=RESPONSE GO TO WE130

IF WE124=98, 99 GO TO WE130

WE125: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €1100, €1,600, €2,150, €4,300.

98. DK

99. RF

BL:

IF WE125=RESPONSE GO TO WE130

IF WE124=98, 99 GO TO WE130

WE126: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €3,250, €4,900, €6,500, €13,000.

98. DK

99. RF

BL:

IF WE126=RESPONSE GO TO WE130

IF WE126=98, 99 GO TO WE130

WE127: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €6,500, €9,750, €13,000, €26,000.

98. DK

99. RF

BL:

IF WE127=RESPONSE GO TO WE130

IF WE127=98, 99 GO TO WE130

WE128: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €13,000, €19,500, €26,000, €52,000.

98. DK

99. RF

BL:

IF WE128=RESPONSE GO TO WE130

IF WE128=98, 99 GO TO WE130

WE129: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €13,000, €19,500, €26,000, €52,000.

98. DK

99. RF

BL:

IF WE129=RESPONSE GO TO WE130

IF WE129=98, 99 GO TO WE130

WE130: What was the total gross amount you earned in the last 12 months in this job?
(Include all types of overtime, commission, bonuses, share options etc.)

€0 ... and €1,000,000 **GO TO WE132**

98. DK **GO TO WE131**

99. RF **GO TO WE131**

(EU-SILC)

WE131: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €15,000, €22,500, €30,000, €60,000.

98. DK

99. RF

WE134: Are you supplied with a company car which is available for private use?

1. Yes **GO TO WE135**

5. No **GO TO WE136**

98. DK **GO TO WE136**

99. RF **GO TO WE136**

(EU-SILC)

WE135: Please state make, model and year of the car?

Enter a text of at most 40 characters

98. DK

99. RF

Note: A description like 'Ford Mondeo 1.8 2002' will suffice

(EU-SILC)

BL: GO TO WE136

Working conditions

WE136. In your job, do you have any responsibility for supervising the work of other employees?

- 1. Yes **GO TO WE137**
 - 5. No **GO TO WE138**
 - 98. DK **GO TO WE138**
 - 99. RF **GO TO WE138**
- (SHARE)

IWER: SHOW CARD WE5

WE137. Please look at card WE5. About how many people are you responsible for in this job?

IWER: CODE THE ONE THAT APPLIES

- 1. 1 to 5
 - 2. 6 to 15
 - 3. 16 to 24
 - 4. 25 to 199
 - 5. 200 to 499
 - 6. 500 or more
 - 98. DK
 - 99. RF
- (SHARE)

IWER SHOW CARD WE6

WE138. Please look at card WE6. Over the past 12 months, do you feel that you personally have been subjected at work to...?

IWER: CODE ALL THAT APPLY

- | | |
|--|------------|
| 1. Sexual discrimination / discrimination linked to gender | [we138_01] |
| 2. Age discrimination | [we138_02] |
| 3. Discrimination linked to nationality | [we138_03] |
| 4. Discrimination linked to ethnic background | [we138_04] |
| 5. Discrimination linked to religion | [we138_05] |
| 6. Discrimination linked to disability | [we138_06] |
| 7. Discrimination linked to sexual orientation | [we138_07] |
| 96 None of these | [we138_10] |
| 98. DK | [we138_08] |
| 99. RF | [we138_09] |

(EUROPEAN WORKING CONDITIONS SURVEY)

CHECK: IF WE138=96 THEN ALL OTHER OPTIONS MUST BE UNTICKED

WE139. If you wanted to reduce the number of paid hours in this job, would your employer allow you to do that?

- 1. Yes **GO TO WE140**
 - 3. Only temporarily **GO TO WE140**
 - 5. No **GO TO WE141**
 - 98. DK **GO TO WE141**
 - 99. RF **GO TO WE141**
- (HRS)

WE140. Would your occupational pension benefits be affected?

- 1. Yes
 - 5. No
 - 6. Doesn't have occupational pension
 - 98. DK
 - 99. RF
- (HRS)

WE141. If you wanted to, would your employer allow you to move to a less demanding job in your company?

- 1. Yes
 - 3. Only temporarily
 - 5. No
 - 98. DK
 - 99. RF
- (TILDA)

BL:

IF WE141=1, 3 GO TO WE142

IF WE141=5, 98, 99 AND WE101=1 GO TO WE143

IF WE141=5, 98, 99 AND WE101=5,98,99 AND WE001 = 1 GO TO WE601

IF WE141=5, 98, 99 AND WE101=5,98,99 AND WE001 = 4 GO TO WE401

IF WE141=5, 98, 99 AND WE101=5,98,99 AND WE001 = 5 GO TO WE501

IF WE141=5, 98, 99 AND WE101=5,98,99 AND WE001 = 6, 7, 95, 98, 99 GO TO WE623

WE142. Would your occupational pension benefits be affected?

- 1. Yes
 - 5. No
 - 6. Doesn't have occupational pension
 - 98. DK
 - 99. RF
- (TILDA)

BL:

IF WE101=1 GO TO WE143

IF WE101=5 AND WE001 = 1 GO TO WE601

IF WE101=5 AND WE001 = 4 GO TO WE401

IF WE101=5 AND WE001 = 5 GO TO WE501

IF WE101=5 AND WE001 = 6, 7, 95, 98, 99 GO TO WE623

Subsidiary Jobs

BL: LOOP REPEAT WE143 TO WE148 PER EACH ADDITIONAL JOB, STARTING WITH JOB WITH THE HIGHEST SALARY OR MOST NUMBER OF HOURS PER WEEK

WE143: **[we143_1 to we143_4]**

We would like to ask some questions about your other jobs. Starting with the job with the next highest salary or next most number of hours per week, are you

1. An employee
2. Self-employed in farming
3. Other self-employed

98. DK

99. RF

(TILDA)

WE144: How many hours a week do you usually work in this job, excluding meal breaks (but including any paid or unpaid overtime)? **[we144_1 to we144_4]**

0...80

98. DK

99. RF

(ELSA)

BL:

IF WE143=1,98, 99 – GO TO WE145

IF WE143=2 – GO TO WE147

IF WE143=3 – GO TO WE148

WE145: I'd like to ask some details about this job. What is the name or title of this job?

Text: up to 60 characters

[we145_1 to we145_4]

98. DK

99. RF

(ELSA)

WE146: What is the total gross amount (i.e. before deductions at source and excluding expense refunds) you received from this job in the last 12 months?

€0 ... and €50,000

[we146_1 to we146_4]

98. DK

99. RF

(EU-SILC)

BL:

WE001 = 1 GO TO WE601

WE001 = 4 GO TO WE401

WE001 = 5 GO TO WE501

WE001 = 6, 7, 95, 98, 99 GO TO WE623

WE147. Before any tax and contributions, but after paying for any materials, equipment or goods that you use in your work, what was the approximate income from your farming activities in the last 12 months? **[we147_1 to we147_4]**

Note: Please include any payments from the Department of Agriculture, such as Single Farm Payment, REPS or REPS-SAC.

€0 ... and €50,000

98. DK

99. RF

(EU-SILC)

BL:

WE001 = 1 GO TO WE601

WE001 = 4 GO TO WE401

WE001 = 5 GO TO WE501

WE001 = 6, 7, 95, 98, 99 GO TO WE623

WE148. Before tax and social insurance contributions, what was the total income or profit you made? Please include any director's fees you might receive from this business or any money you draw for personal day-to-day living expenses (as distinct from business expenses). **[we148_1 to we148_4]**

€0 ... €100,000

98. DK

99. RF

(EU-SILC)

BL:

WE001 = 1 GO TO WE601

WE001 = 4 GO TO WE401

WE001 = 5 GO TO WE501

WE001 = 6, 7, 95, 98, 99 GO TO WE623

Self-Employed

WE201. What is the nature of your business or occupation?

1. Farming **GO TO WE301**

95. Other – Non farming (specify) **GO TO WE202a**

98. DK **GO TO WE203**

99. RF **GO TO WE203**

(TILDA)

WE202a What kind of business, industry or services do you work in (that is, what do they make or do at the place where you work)?

IWER CODE FROM FOLLOWING LIST SHOW CARD WE202 IF YOU THINK THIS WOULD BE HELPFUL

- 1 A Agriculture, forestry and fishing
- 2 B Mining and quarrying
- 3 C Manufacturing
- 4 D Electricity, gas, steam and air conditioning supply
- 5 E Water supply; sewerage, waste management and remediation activities
- 6 F Construction
- 7 G Wholesale and retail trade; repair of motor vehicles and motorcycles
- 8 H Transportation and storage
- 9 I Accommodation and food service activities
- 10 J Information and communication
- 11 K Financial and insurance activities
- 12 L Real estate activities
- 13 M Professional, scientific and technical activities
- 14 N Administrative and support service activities
- 15 O Public administration and defence; compulsory social security
- 16 P Education
- 17 Q Human health and social work activities
- 18 R Arts, entertainment and recreation
- 19 S Other service activities
- 20 T Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- 21 U Activities of extra territorial organisations and bodies
- 22 CANNOT CLASSIFY

Industry need only be recorded verbatim where iwer cannot classify (Code 22)

WE202b: INTERVIEWER: Record verbatim what kind of business, industry or services the respondent works in?

Text: up to 60 characters

98. DK

99. RF

WE203. In which year did you start this business?

1900...[current year]

98. DK

99. RF

(TILDA)

IWER SHOW CARD WE7

WE204. Please look at card WE7. How many employees, if any, do you have in this business?

IWER: CODE THE ONE THAT APPLIES

0. None

1. 1 to 5

2. 6 to 15

3. 16 to 24

4. 25 to 199

5. 200 to 499

6. 500 or more

98. DK

99. RF

(EU-SILC)

WE205. What is the most recent year for which accounts have been prepared for the Revenue?

IWER: IF THE RESPONDENT HAS DIFFICULTY IN RESPONDING TO THIS QUESTION PLEASE ASK HIM/HER TO CONSULT HIS/HER LATEST TAX ASSESSMENT NOTICE, ANNUAL ACCOUNTS DOCUMENT, OR TAX RETURN.

1950.. [current year]

98. DK

99. RF

(SHARE)

WE206. In relation to this business, did you make a profit or loss in the most recent 12 months?

IWER: IF THE RESPONDENT HAS DIFFICULTY IN RESPONDING TO THIS QUESTION PLEASE ASK HIM/HER TO CONSULT HIS/HER LATEST TAX ASSESSMENT NOTICE, ANNUAL ACCOUNTS DOCUMENT, OR TAX RETURN.

1. Profit **GO TO WE208**

5. Loss **GO TO WE207**

98. DK **GO TO WE623**

99. RF **GO TO WE623**

(ELSA)

WE207. How much was this loss?

IWER: IF THE RESPONDENT HAS DIFFICULTY IN RESPONDING TO THIS QUESTION PLEASE ASK HIM/HER TO CONSULT HIS/HER LATEST TAX ASSESSMENT NOTICE, ANNUAL ACCOUNTS DOCUMENT, OR TAX RETURN.

€0 ... €500,000

98. DK

99. RF

(EU-SILC)

BL: GO TO WE623

WE208. Excluding the share of any partner you might have, before tax and social insurance contributions, what was the total income or profit you made?

IWER: IF THE RESPONDENT HAS DIFFICULTY IN RESPONDING TO THIS QUESTION PLEASE ASK HIM/HER TO CONSULT HIS/HER LATEST TAX ASSESSMENT NOTICE, ANNUAL ACCOUNTS DOCUMENT, OR TAX RETURN.

€0 ... €500,000 **GO TO WE210**

98. DK **GO TO WE209**

99. RF **GO TO WE209**

Note: The total income or profit includes any director's fees you might receive from this business or any money you draw for personal day-to-day living expenses (as distinct from business expenses).

(EU-SILC)

WE209. Did it amount to a total of less than _____, more than _____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €15,000, €22,500, €30,000, €60,000.

98. DK

99. RF

WE210. Did you make any PRSI payments on this income?

1. Yes **GO TO WE211**

5. No **GO TO WE212**

98. DK **GO TO WE212**

99. RF **GO TO WE212**

(EU-SILC)

WE211. How much did you pay in PRSI?

€0 ... €5,000

98. DK

99. RF

(EU-SILC)

WE212. Have you paid any income tax in relation to the self-employment figure you have given?

1. Yes **GO TO WE213**

5. No **GO TO WE214**

98. DK **GO TO WE214**

99. RF **GO TO WE214**

(EU-SILC)

WE213. What was the amount paid?

€0 ... €100,000

98. DK

99. RF

(EU-SILC)

WE214. Did you receive any other income over that period?

1. Yes **GO TO WE215**

5. No **GO TO WE623**

98. DK **GO TO WE623**

99. RF **GO TO WE623**

Note: By other income we mean Director's fees from other business, grinds, occasional work, royalties, rental income from business properties or equipments, which were not included in the amounts already stated.

(EU-SILC)

WE215. What was the value of this other income (before tax and social insurance payments)?

€0 ... €500,000

98. DK

99. RF

(EU-SILC)

WE216. How much tax and social insurance did you pay on this other income?

€0 ... €100,000

98. DK

99. RF

(EU-SILC)

BL: GO TO WE623

Self-Employed – Farming

ONLY ASK WE301 TO WE316 IF FINANCIAL RESPONDENT (CS017 = 1 OR 3)

WE301. Do you own or have you owned a farm at any time during the last 12 months?

1. Yes **GO TO WE302**

5. No **GO TO WE306**

98. DK **GO TO WE306**

99. RF **GO TO WE306**

Note: If the farm owner has let out ALL his/her land during the last 12 months, please code as 1.

(EU-SILC)

WE302. How many acres of land did/do you own in the previous year?

0 ... 9999

98. DK

99. RF

(EU-SILC)

WE303. Did you let any of this land to anyone else in the previous year?

1. Yes, all **GO TO WE305**

2. Yes, part of it **GO TO WE304**

5. No **GO TO WE306**

98. DK **GO TO WE306**

99. RF **GO TO WE306**

(EU-SILC)

WE304. How many acres did you let?

0 ... 500

98. DK

99. RF

(EU-SILC)

WE305. How much annual rent did you receive for this land?

€0 ... €50,000 **GO TO WE306**

98. DK **GO TO WE305_U1**

99. RF **GO TO WE305_U1**

(EU-SILC)

WE305_U1. Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250; €2,500; €5,000; €12,500.

98. DK

99. RF

(EU-SILC)

WE306. Did you take (rent) or farm any other land (excluding commonage) on conacre or otherwise, in the previous year?

1. Yes **GO TO WE307**

5. No **GO TO WE309**

98. DK **GO TO WE309**

99. RF **GO TO WE309**

Note: Conacre is a short-term lease of land that usually coincides with a growing season, e.g. a farmer may take land from February to September to plant wheat.

(EU-SILC)

WE307. How many acres did you rent?

1 ... 9999

98. DK

99. RF

(EU-SILC)

WE308. How much annual rent did you pay for this land?

€0 ... €50,000

98. DK

99. RF

(EU-SILC)

IWER: SHOW CARD WE8

WE309. Please look at card WE8. Please indicate what is the main enterprise or activity on your farm?

Note: If respondent has more than one enterprise/activity please code the one that contributes the largest share of all farming income.

IWER: CODE THE ONE THAT APPLIES

1. Cereal/potatoes/root crops

2. Fresh fruit or vegetables (excluding mushrooms)

3. Mushrooms

4. Other crops

5. Dry stock (cattle)

6. Dairy Cattle

7. Sheep

8. Poultry

9. Pigs

10. Horses, mules, jennets, asses

11. Goats or deer

95. Other

98. DK

99. RF

(EU-SILC)

IWER: SHOW CARD WE8

WE310. Please look at card WE8. Please indicate which other enterprises you are engaged on your farm?

IWER: CODE ALL THAT APPLY

- | | |
|--|------------|
| 1. Cereal/potatoes/root crops | [we310_01] |
| 2. Fresh fruit or vegetables (excluding mushrooms) | [we310_02] |
| 3. Mushrooms | [we310_03] |
| 4. Other crops | [we310_04] |
| 5. Dry stock (cattle) | [we310_05] |
| 6. Dairy Cattle | [we310_06] |
| 7. Sheep | [we310_07] |
| 8. Poultry | [we310_08] |
| 9. Pigs | [we310_09] |
| 10. Horses, mules, jennets, asses | [we310_10] |
| 11. Goats or deer | [we310_11] |
| 95. Other | [we310_12] |
| 96. No other enterprise | [we310_15] |
| 98. DK | [we310_13] |
| 99. RF | [we310_14] |
- (EU-SILC)

WE311. Have you received any of these payments?

IWER: CODE ALL THAT APPLY

- | | |
|---|-----------|
| 1. Single Farm Payment scheme GO TO WE312 | [we311_1] |
| 2. Rural Environment Protection Scheme (REPS) scheme GO TO WE313 | [we311_2] |
| 3. Special Area of Conservation (SAC) scheme GO TO WE314 | [we311_3] |
| 96. None of these GO TO WE315 | [we311_6] |
| 98. DK GO TO WE315 | [we311_4] |
| 99. RF GO TO WE315 | [we311_5] |
- (EU-SILC)

WE312. How much is your Net Single Farm Payment, i.e. after National Reserve and Modulation reduction?

€0 ... €90,000

98. DK

99. RF

(EU-SILC)

BL:

IF WE310=2 GO TO WE313

IF WE310=3 GO TO WE314

OTHERWISE GO TO WE315

WE313. How much did you receive in REPS payments in the last year?

€0 ... €50,000

98. DK

99. RF

(EU-SILC)

BL:

IF WE312=3 GO TO WE314

OTHERWISE GO TO WE315

WE314. How much did you receive in non-REPS Special Area of Conservation (SAC) payment in last year?

€0 ... €50,000

98. DK

99. RF

(EU-SILC)

WE315. Before any tax and contributions, but after paying for any materials, equipment or goods that you use in your work, what was the approximate income from your farming activities in the last 12 months?

Note: please exclude any rent or any payments from the Department of Agriculture, such as Single Farm Payment, REPS or REPS-SAC.

€0 ... €50,000 **GO TO WE317**

98. DK **GO TO WE316**

99. RF **GO TO WE316**

(EU-SILC)

WE316. Did it amount to a total of less than _____, more than _____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €9,500, €14,250, €19,000, €38,000.

98. DK

99. RF

(EU-SILC)

WE317. Do you have an off-farm job?

1. Yes **GO TO WE318**

5. No **GO TO WE318**

98. DK **GO TO WE623**

99. RF **GO TO WE623**

(EU-SILC)

WE318. How many weeks of full-time farm work (5 or more days of 8 or more hours) did you do in the previous year?

IWER: The number of 'full-time farm work weeks' excludes holiday weeks (i.e. if the farmer is a full time farmer and takes 4 weeks holidays per year the number of weeks of full time farm work =48)

0 ... 52

98. DK **GO TO WE623**

99. RF **GO TO WE623**

(EU-SILC)

WE319. For how many weeks did you do part-time farm work during the last 12 months?

0 ... 52

98. DK

99. RF

(EU-SILC)

WE320. How many hours per week did you usually work?

0 ... 100

98. DK

99. RF

(EU-SILC)

BL: END OF MODULE - GO TO WE623

Unemployed

WE401. In what year did you become unemployed?

YEAR (1900.. [current year])

98. DK **GO TO WE403**

99. RF **GO TO WE403**
(HRS)

WE402. In what month did you become unemployed?

MONTH

1. January

2. February

3. March

4. April

5. May

6. June

7. July

8. August

9. September

10. October

11. November

12. December

98. DK

99. RF

(HRS)

IWER: SHOW CARD WE9

WE403. Please look at card WE9. Would you tell us how you became unemployed? Was it

IWER: CODE THE ONE THAT APPLIES

1. Because your place of work or office closed

2. Because you resigned

3. Because you were laid off

4. By mutual agreement between you and your employer

5. Because a temporary job had been completed

95. Other reason

98. DK

99. RF

(SHARE)

WE404. Have you been doing anything to find work during the last four weeks?

1. Yes **GO TO WE407**

5. No **GO TO WE405**

98. DK **GO TO WE623**

99. RF **GO TO WE623**

(HRS)

IWER: SHOW CARD WE10

WE405. Please look at card WE10. What is the main reason you were not looking for work during the last four weeks?

IWER: CODE THE ONE THAT APPLIES

1. Believes nothing available in line of work is available

2. Doesn't believe can find work

3. Doesn't have needed skills /experience

4. Believes employers think he/she too old

5. Believes employers won't hire older women or minorities

6. Poor health, disability

7. Family responsibilities/child responsibilities

8. Transportation problems

9. No particular reason

95. Other (specify) **GO TO WE406**

98. DK

99. RF

(HRS)

BL: IF WE405~95 – GO TO WE623

WE406. Other (specify)

98. DK

99. RF

(HRS)

BL: GO TO WE623

IWER; SHOW CARD WE11

WE407. Please look at card WE11. What are all of the things you have done to find work during the last four weeks?

IWER: CODE ALL THAT APPLY

- | | | |
|--|--------------------|------------|
| 1. Read ads | GO TO WE410 | [we407_01] |
| 2. Attend school or received other training | GO TO WE410 | [we407_02] |
| 3. Checked with public employment agency | GO TO WE410 | [we407_03] |
| 4. Checked with private employment agency | GO TO WE410 | [we407_04] |
| 5. Visited employers directly | GO TO WE409 | [we407_05] |
| 6. Telephoned or wrote to employers directly | GO TO WE409 | [we407_06] |
| 7. Asked friends or relatives | GO TO WE410 | [we407_07] |
| 8. Placed or answered ads | GO TO WE410 | [we407_08] |
| 9. Searched internet | GO TO WE410 | [we407_09] |
| 10. Didn't do anything specific | GO TO WE410 | [we407_10] |
| 95. Other (specify) | GO TO WE408 | [we407_11] |
| 98. DK | GO TO WE410 | [we407_12] |
| 99. RF | GO TO WE410 | [we407_13] |
- (HRS)

WE408. 95. Other (specify)

98. DK

99. RF

(HRS)

BL:

IF WE407=5,6 – GO TO WE409

IF WE407~5,6 – GO TO WE410

WE409. How many employers did you call, write to or visit in the last four weeks?

1...50

98. DK

99. RF

(HRS)

WE410. Are you looking for part-time or full-time work?

1. Part-time

2. Full-time

3. Either kind

98. DK

99. RF

(HRS)

WE411. What is the lowest monthly wage you would accept if a job was offered to you?

AMOUNT

€0...€10,000

98. DK

99. RF

(HRS)

WE412. Are you available for work immediately (i.e. within two weeks)?

1. Yes

5. No

98. DK

99. RF

(HRS)

BL: GO TO WE623

Permanently sick or disabled

WE501. In what year did you become disabled?

YEAR

1900.. [current year]

98. DK **GO TO WE503**

99. RF **GO TO WE503**

(HRS)

WE502. In what month did you become disabled?

MONTH

1. January

2. February

3. March

4. April

5. May

6. June

7. July

8. August

9. September

10. October

11. November

12. December

98. DK

99. RF

(HRS)

WE503. Was this illness caused by the working activities in your last job?

1. Yes

5. No

98. DK

99. RF

(SHARE)

BL: GO TO WE623

Retired

WE601. In what month and year did you retire?

YEAR

1950...[current year]

98. DK **GO TO WE603**

99. RF **GO TO WE603**

(HRS)

WE602. In what month and year did you retire?

MONTH

1. January

2. February

3. March

4. April

5. May

6. June

7. July

8. August

9. September

10. October

11. November

12. December

98. DK **GO TO WE603**

99. RF **GO TO WE603**

(HRS)

WE603. Did you take early retirement, that is did you retire before the normal retirement age?

1 Yes **GO TO WE605**

2 No **GO TO WE604**

98. DK **GO TO WE609**

99. RF **GO TO WE609**

(ELSA)

IWER: SHOW CARD WE12

WE604. Please look at card WE12. What would you say was the main reason why you retired?

IWER: CODE THE ONE THAT APPLY

1. Became eligible for a state pension
2. Became eligible for an occupational pension
3. Became eligible for a private pension or annuity
4. Made redundant
5. Own ill health
6. Ill health of relative or friend
7. To retire at same time as spouse or partner
8. To spend more time with family
9. To enjoy life
10. Other reason (please specify)

[we604oth]

98. DK

99. RF

(SHARE)

BL: GO TO WE609

IWER: SHOW CARD WE13

WE605. Please look at card WE13. What were your reasons for taking early retirement?

IWER: CODE ALL THAT APPLY

- 1 Own ill health **GO TO WE609**
 - 2 Ill health of a relative/friend **GO TO WE609**
 - 3 Made redundant/dismissed/had no choice **GO TO WE609**
 - 4 Offered early retirement incentive by employer **GO TO WE607**
 - 5 Could not find another job **GO TO WE609**
 - 6 To spend more time with partner/ family **GO TO WE609**
 - 7 To enjoy life while still young and fit enough **GO TO WE609**
 - 8 Fed up with job and wanted a change **GO TO WE609**
 - 9 To retire at the same time as husband/wife/partner **GO TO WE609**
 - 10 To give the young generation a chance **GO TO WE609**
 - 95 Other (specify) **GO TO WE606**
 98. DK **GO TO WE609**
 99. RF **GO TO WE609**
- (ELSA)

[we605_01]

[we605_02]

[we605_03]

[we605_04]

[we605_05]

[we605_06]

[we605_07]

[we605_08]

[we605_09]

[we605_10]

[we605_11]

[we605_12]

[we605_13]

WE606. Other (specify)

Text: up to 60 characters

98. DK

99. RF

(ELSA)

BL:

IF WE605=4 GO TO WE607

IF WE605~4 GO TO WE609

WE607. How old were you when you received this incentive?

50... 80

98. DK

99. RF

(ELSA)

WE608. What kind of incentive was this? **SINGLE CODE**

1. Cash bonus

2. Additional years of service credited

3. Other pension benefits (specify)

[we608a]

95. Other (specify)

[we608b]

98. DK

99. RF

(HRS/TILDA)

WE609. When you first retired, did you retire on a ...

1 ... full pension

2 reduced pension

3 or, no pension?

98. DK

99. RF

(ELSA)

WE610. I'd like to ask some details about your last job. When did you stop working at this job?

YEAR

1950... [current year]

98. DK **GO TO WE612**

99. RF **GO TO WE612**

(ELSA)

WE611. When did you stop working at this job?

MONTH

1. January

2. February

3. March

4. April

5. May

6. June

7. July

8. August

9. September

10. October

11. November

12. December

98. DK **GO TO WE612**

99. RF **GO TO WE612**

(ELSA)

WE612. For how many years had you been working in your last job before you left?

0...50

98. DK

99. RF

(SHARE)

WE613. What was the name or title of this job?

Text: up to 60 characters

98. DK

99. RF

(TILDA)

WE614. Were you employed in the public sector?

1. Yes

5. No

98. DK

99. RF

(TILDA)

WE615. Could you please tell me, was this

1. A permanent job

2. A temporary job

3. Occasional work without a contract

4. Other working arrangement

98. DK

99. RF

(TILDA)

WE616. How many hours a week did you usually work in this job, excluding meal breaks or any paid or unpaid overtime?

0.0..168.0

98. DK

99. RF

(TILDA)

WE617x What kind of business, industry or services do you work in (that is, what do they make or do at the place where you work)?

Note: By this we mean what did they do or make at the place where you worked.

IWER CODE FROM FOLLOWING LIST SHOW CARD WE617 IF YOU THINK THIS WOULD BE HELPFUL

- 1 A Agriculture, forestry and fishing
- 2 B Mining and quarrying
- 3 C Manufacturing
- 4 D Electricity, gas, steam and air conditioning supply
- 5 E Water supply; sewerage, waste management and remediation activities
- 6 F Construction
- 7 G Wholesale and retail trade; repair of motor vehicles and motorcycles
- 8 H Transportation and storage
- 9 I Accommodation and food service activities
- 10 J Information and communication
- 11 K Financial and insurance activities
- 12 L Real estate activities
- 13 M Professional, scientific and technical activities
- 14 N Administrative and support service activities
- 15 O Public administration and defence; compulsory social security
- 16 P Education
- 17 Q Human health and social work activities
- 18 R Arts, entertainment and recreation
- 19 S Other service activities
- 20 T Activities of households as employers; undifferentiated goods- and
services-producing activities of households for own use
- 21 U Activities of extra territorial organisations and bodies
- 22 CANNOT CLASSIFY

Industry need only be recorded verbatim if iwer cannot classify (Code 22)

WE617: INTERVIEWER: Record verbatim what kind of business, industry or services the respondent works in?

Text: up to 60 characters

98. DK

99. RF

GO TO WE618

IWER: SHOW CARD WE14

WE618. Please look at card WE14. About how many people (including yourself) were employed at the place where you worked?

IWER: CODE THE ONE THAT APPLIES

- 1. 1 to 5
- 2. 6 to 15
- 3. 16 to 24
- 4. 25 to 199
- 5. 200 to 499
- 6. 500 or more
- 98. DK
- 99. RF
- (TILDA)

WE619. In this job, did you have any responsibility for supervising the work of other employees?

- 1. Yes **GO TO WE620**
- 5. No **GO TO WE621**
- 98. DK **GO TO WE621**
- 99. RF **GO TO WE621**
- (TILDA)

IWER: SHOW CARD WE14

WE620. About how many people were you responsible for in this job?

IWER: CODE THE ONE THAT APPLIES

- 1. 1 to 5
- 2. 6 to 15
- 3. 16 to 24
- 4. 25 to 199
- 5. 200 to 499
- 6. 500 or more
- 98. DK
- 99. RF
- (TILDA)

WE621. What was the total net salary/wage (i.e. after deductions at source and excluding expense refunds) you received in the last year you worked in this job?

€0 ... €1,000,000 **GO TO WE623**

- 98. DK **GO TO WE622**
- 99. RF **GO TO WE622**
- (TILDA)

WE622. Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €13,000, €19,500, €26,000, €52,000.

- 98. DK
- 99. RF

WE623

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION WE?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

BL:

IF (HAS WORKED BEFORE) WE004=1 GO TO JH101

IF (HAS NOT WORKED BEFORE) WE004=5 GO TO LE101

SECTION 10. JOB HISTORY (JH)

JH101. Now I would like to ask you some questions about your job history. At what age did you start your first regular job or business? (after you first left full-time education)

8 ... 65

98. DK

99. RF

(EU-SILC)

BL: IF JH101 = DK / REF GOTO JH102

JH101b. That means that it is xx years since you first started work. I'd now like to ask how much of that time you spent doing different things such as paid work, looking after your family and so on.

BL: "xx" is calculated from (resp.'s current age) – (answer at JH101)

JH102. Since you started your first regular job or business, roughly how many years have you spent at work, either as an employee or self-employed?

0 ... 65

98. DK

99. RF

(EU-SILC)

JH103. Since you started your first regular job or business, roughly how many years have you spent unemployed?

0 ... 65

98. DK

99. RF

(EU-SILC)

JH104. Since you started your first regular job or business, roughly how many years have you spent in education or training?

0 ... 65

98. DK

99. RF

(TILDA)

JH105. Since you started your first regular job or business, roughly how many years have you spent in home duties caring for other family members?

0 ... 65

98. DK

99. RF

(TILDA)

JH106. Since you started your first regular job or business, roughly how many years have you spent in other activities such as retirement, being unable to work due to illness, sabbatical leave etc.?

0 ... 65

98. DK

99. RF

(TILDA)

BL:

COMPUTE Y=(AGE OF RESPONDENT-JH101)

CHECK IF (JH102 + JH103 + JH104 + JH105 + JH106)= Y

IF (JH102 + JH103 + JH104 + JH105 + JH106)= Y– GO TO JH107

IF (JH102 + JH103 + JH104 + JH105 + JH106)= Y – REQUEST 'IWER: INCONSISTENT DATA PROBE JH101 TO JH106'

JH107

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION JH?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

BL: GO TO LE101

SECTION 11. LIFELONG LEARNING (LE)

LE101. Are you currently attending or did you participate in any courses or any other education and training in the last 12 months?

IWER: INCLUDE ANY TRAINING COURSES THE RESPONDENT IS CURRENTLY ATTENDING

1. Yes **GO TO LE102**

5. No **GO TO LE109**

98. DK **GO TO LE109**

99. RF **GO TO LE109**

(QNHS)

IWER: IF RESPONDENT HAS ATTENDED MORE THAN ONE COURSE, ENQUIRE ABOUT THE ACTIVITY THAT HAS LEAD TO A FORMAL QUALIFICATION OR HAS LASTED FOR THE LONGER PERIOD

LE102. Was/Is this course or activity run or organised by

1. FAS

2. A 2nd level school

3. An Institute of Technology

4. A university

95. Other (specify) **GO TO LE103**

98. DK

99. RF

BL:

IF LE102=1, 2, 3, 4, 98, 99 - GO TO LE104

(TILDA)

LE103. Other (specify)

Text: up to 60 characters

98. DK

99. RF

(TILDA)

IWER: SHOW CARD LE1

LE104. Please look at card LE1. What type of course was this?

IWER: MAKE A GENERAL QUESTION ABOUT THE TYPE OF COURSE ATTENDED AND THEN CODE RELEVANT OPTION

IWER: CODE ONE THAT APPLIES

1. Literacy classes/Basic Education (to help R overcome reading / writing difficulties)
 2. ICT classes
 3. Personal development/Recreational/Hobby
 4. Technical or vocational course, not leading to a formal qualification
 5. Technical or vocational course, leading to a formal qualification
 6. Junior or leaving cert
 7. Third level diploma or degree
 8. Postgraduate diploma or degree
 98. DK
 99. RF
- (TILDA)

LE105. On average, how many hours per week did (does) this course involve

IWER: IF RESPONDENT IS CURRENTLY PARTICIPATING IN AN EDUCATION OR TRAINING ACTIVITY, CODE THE NUMBER OF HOURS.

IWER: IF ACTIVITY LASTED FOR LESS THAN ONE HOUR CODE 1

IWER: ROUND TO THE NEAREST WHOLE INTEGER

- 1...168
 98. DK
 99. RF
- (EU-SILC)

LE106: For how many weeks did (will) this course last?

IWER: IF ACTIVITY LASTED FOR LESS THAN A WEEK CODE 1

- 1...168
 98. DK
 99. RF
- (EU-SILC)

LE107. What was the main reason for participating in this course or activity?

1. Mainly job related reasons
2. Mainly personal/social reasons
3. Not applicable

Note: Job-related (professional): the respondent takes part in this activity in order to obtain knowledge and/or learn new skills for a current or a future job, increase earnings, improve job- and/or career opportunities in a current or another field and generally improve his/her opportunities for advancement and promotion.

Note: Non job-related (personal/social): the respondent take part in this activity in order to develop competencies required for personal, community, domestic, social or recreational purposes.

(QNHS)

LE109

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION LE?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

BL:

IF WE001=1 (RETIRED) – GO TO BH001

IF WE001= 5, 6, 95 (SICK, FAMILY, OTHER) – GO TO WR301

SECTION 12. PLANNING FOR RETIREMENT (WR)

WR001. I would now like to ask you some questions with regards to the arrangements you are making to prepare for retirement. At what age do you plan to retire?

50...99

97. Do not plan to retire

98. DK

99. RF

(HRS)

CHECK: WR001 MUST BE SAME OR GREATER THAN RESPONDENT'S AGE

IF WE001=2 - GO TO WR002

IF WE001=3 (SELF-EMPLOYED) – GO TO WR301

IF WE001=4, 7 (UNEMPLOYED, EDUCATION) – GO TO WR301

WR002: Are you

1. a member of an occupational pension scheme organised by your current employer (including public sector employers)?

IF WE104=1 GO TO WR201

IF WE104=5 GO TO WR101

2. a member of a Personal Retirement Saving Account scheme organised through your employer (and not a member of an occupational pension scheme) **GO TO WR302**

5. Not a member of either type of scheme **GO TO WR003**

98. DK **GO TO WR401**

99. RF **GO TO WR401**

Note: A PRSA is a retirement saving product for employees, self-employed, homemakers, carers, unemployed and any other category of person. They can be used **instead** of occupational pension schemes by employers who do not wish to sponsor such schemes. They can also be used to **supplement** an occupational pension scheme through Additional Voluntary Contributions (AVCs).
(TILDA)

WR003. Does your employer offer any kind of pension plan to employees which you could join if you wished?

1. Yes **GO TO WR004**

5. No **GO TO WR006**

98. DK **GO TO WR006**

99. RF **GO TO WR006**

(ELSA)

WR004. Why aren't you a member of this pension scheme?

IWER: CODE THE ONE THAT APPLIES

1 Preferred, or already had, other arrangement

2 Expected to move job

3 Could not afford contributions

95 Other reason (specify) **GO TO WR005**

98. DK

99. RF

(ELSA)

BL: IF WR004=1, 2, 3, 98, 99 – GO TO WR401

WR005. Other reason (specify)

Text: up to 60 characters

98. DK

99. RF

(ELSA)

BL: GO TO WR401

WR006. Did your employer ever inform you that the company had set up a Personal Retirement Savings Account (PRSA) to which you are entitled to contribute from your salary?

1. Yes **GO TO WR007**

5. No **GO TO WR401**

98. DK **GO TO WR401**

99. RF **GO TO WR401**

Note: A PRSA is a retirement saving product for employees, self-employed, homemakers, carers, unemployed and any other category of person. They can be used **instead** of occupational pension schemes by employers who do not wish to sponsor such schemes. They can also be used to **supplement** an occupational pension scheme through Additional Voluntary Contributions (AVCs).

(TILDA)

IWER: SHOW CARD WR2

WR007. Please look at card WR2. Why did you decide not to pay into the PRSA offered by your employer?

IWER: CODE THE ONE THAT APPLIES

1. Preferred a different type of pension arrangement (Non-Standard PRSA, Personal Pension, Annuity, etc.)

2. Preferred to invest in other financial products that offer me a better return

3. Prefer to invest in the purchase of property

4. My salary is not enough as to allow me to buy into a PRSA

5. Not interested in saving for a pension at this moment in time

6. The scheme is too complex

95. Other (specify) **GO TO WR008**

98. DK

99. RF

(TILDA)

BL: IF WR007=1, 2, 3, 4, 5, 6, 98, 99 – GO TO WR401

WR008. Other (specify)
Text: up to 60 characters
98. DK
99. RF
(EU-SILC)
BL: GO TO WR401

Planning for retirement - Occupational pension

WR101:

What is the name of the pension plan?

Text: up to 100 characters

98. DK

99. RF

(SHARE)

WR102: When you became eligible to participate in this plan, were you given a choice of whether to participate, or were you enrolled automatically?

1. Given a choice

2. Enrolled automatically

98. DK

99. RF

(HRS)

WR103: At what age does this pension plan normally allow you to retire that is, what is the normal age of retirement?

30...80

98. DK

99. RF

(SHARE)

WR104: Does this pension plan allow you to retire before the normal age of retirement'?

1. Yes **GO TO WR105**

5. No **GO TO WR105A**

98. DK **GO TO WR105A**

99. RF **GO TO WR105A**

(TILDA)

WR105: What is the earliest age that your pension plan allows you to retire?

30...75

98. DK

99. RF

(TILDA)

WR105A: After you retire, on what basis will your pension be up-rated (increased)?

1. In line with prices (inflation or consumer price index)

2. In line with the salary of the job you had before retiring

3. In line with average salaries in the economy

4. At the discretion of my (former) employer or of the scheme trustees

5. My pension will not be indexed to any criteria/ will not be up-rated

98. DK

99. RF

(TILDA)

IWER: SHOW CARD WR3

WR106: Please look at card WR3. Is this pension more like Type A or Type B?

IWER: CODE THE ONE THAT APPLIES

1 Type A: My pension contributions are put into a fund which grows over time and my pension will depend on the size of this fund when I retire. This type of pension is called a 'defined contribution' or 'money purchase' scheme **GO TO WR107**

2 Type B: My pension will be based on a formula involving age, years of service and salary. This type of pension is sometimes called a 'defined benefit' or 'final salary' scheme **GO TO WR129**

98. DK **GO TO WR107**

99. RF **GO TO WR107**
(ELSA)

WR107: Does your employer contribute to this pension plan?

1. Yes **GO TO WR108**

5. No **GO TO WR111**

98. DK **GO TO WR111**

99. RF **GO TO WR111**
(ELSA)

WR108: Per month, how much does your employer currently contribute to your pension plan? You may respond to this by giving me the monthly amount or the equivalent percentage of your salary.

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR109**

2 Percentage of salary **GO TO WR110**

98. DK **GO TO WR111**

99. RF **GO TO WR111**
(ELSA)

WR109: **IWER: ENTER AMOUNT**

€0 ... €10,000 **GO TO WR111**

98. DK **GO TO WR111**

99. RF **GO TO WR111**
(ELSA)

WR110: **IWER: ENTER PERCENTAGE OF SALARY**

1 ... 50%

98. DK

99. RF

(ELSA)

WR111: Per month, how much do you currently contribute to your pension plan? You may respond to this by giving me the monthly amount or the equivalent percentage of your salary

IWER: ASK RESPONDENT TO CHECK HIS/HER PAY SLIP TO RESPOND TO THIS QUESTION, IF POSSIBLE.

IWER: CODE HOW ANSWER IS GIVEN

IWER: IF RESPONDENT DOES NOT CONTRIBUTE TO THIS PENSION, SELECT 'AMOUNT' AND ENTER '0'

1 Amount **GO TO WR112**

2 Percentage of salary **GO TO WR113**

98. DK **GO TO WR114**

99. RF **GO TO WR114**

(ELSA)

WR112: IWER: ENTER AMOUNT

€0 ... €10,000 **GO TO WR114**

98. DK **GO TO WR114**

99. RF **GO TO WR114**

(ELSA)

WR113: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50%

98. DK

99. RF

(ELSA)

WR114: In the past 12 months, did you make any Additional Voluntary Contributions (AVCs):

IWER: INCLUDE ANY CONTRIBUTIONS DONE VIA AN "ADDITIONAL VOLUNTARY CONTRIBUTIONS PRSA".

1. Yes **GO TO WR115**

5. No **GO TO WR118**

98. DK **GO TO WR118**

99. RF **GO TO WR118**

(ELSA)

WR115: In the past 12 months, how much did you contribute through additional voluntary contributions? You may respond to this by giving me the total amount or the equivalent percentage of your annual salary.

IWER: IF RESPONDENT DOES NOT CONTRIBUTE TO THIS PENSION, SELECT 'AMOUNT' AND ENTER '0'

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR116**

2 Percentage of annual salary **GO TO WR117**

98. DK **GO TO WR118**

99. RF **GO TO WR118**

(ELSA)

WR116: **IWER: ENTER AMOUNT**

€0 ... €10,000 **GO TO WR118**

98. DK **GO TO WR118**

99. RF **GO TO WR118**

(ELSA)

WR117: **IWER: ENTER PERCENTAGE OF ANNUAL SALARY**

1 ... 50%

98. DK

99. RF

(ELSA)

WR118: For how many years have you been contributing to this pension plan?

NUMBER OF YEARS

0 ... 65

98. DK

99. RF

(SHARE)

WR119: What is the value of your pension plan at present?

IWER: ASK RESPONDENT TO CHECK HIS/HER YOUR LATEST PENSION STATEMENT TO RESPOND TO THIS QUESTION, IF POSSIBLE.

€0 ... €10,000,000

98. DK

99. RF

WR120: When you retire, how will the funds from your pension plan be paid?

1. As a pension only **GO TO WR121**

2. As a lump-sum plus a pension **GO TO WR124**

98. DK **GO TO WR128**

99. RF **GO TO WR128**

(ELSA)

WR121: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR122**

2. Monthly amount **GO TO WR123**

98. DK **GO TO WR128**

99. RF **GO TO WR128**

(ELSA/TILDA)

WR122: **IWER: ENTER PERCENTAGE OF SALARY**

1 ... 80% **GO TO WR128**

98. DK **GO TO WR128**

99. RF **GO TO WR128**

(ELSA)

WR123: IWER: ENTER MONTHLY AMOUNT

€0 ... €10,000 **GO TO WR128**

98. DK **GO TO WR128**

99. RF **GO TO WR128**

(ELSA)

WR124: How much do you expect to receive as a lump sum payment from this pension scheme when you retire?

€0 ... €1,000,000

98. DK

99. RF

(ELSA)

WR125: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR126**

2. Monthly amount **GO TO WR127**

98. DK **GO TO WR128**

99. RF **GO TO WR128**

(ELSA/TILDA)

WR126: IWER: ENTER PERCENTAGE OF SALARY

1 ... 100% **GO TO WR128**

98. DK **GO TO WR128**

99. RF **GO TO WR128**

(ELSA)

WR127: IWER: ENTER MONTHLY AMOUNT

€0 ... €10,000

98. DK

99. RF

(ELSA)

IWER: SHOW CARD WR4

WR128: Please look at card WR4. When you first started contributing to this pension plan, did you transfer funds from a pension plan provided by your previous employer, a PRSA or from a personal pension plan:

IWER: CODE THE ONE THAT APPLIES

1. Yes

5. No, I did not transfer any funds from previous pensions

7. No, this was the first time I contributed to a pension plan

95. Other

98. DK

99. RF

(TILDA)

BL: GO TO WR401

CHECK ROUTING FROM WR106

WR129: Does your employer contribute to this pension plan?

1. Yes **GO TO WR130**

5. No **GO TO WR133**

98. DK **GO TO WR133**

99. RF **GO TO WR133**

(ELSA)

WR130: Per month, how much does your employer currently contribute to your pension plan? You may respond to this by giving me the monthly amount or the equivalent percentage of your salary.

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR131**

2 Percentage of salary **GO TO WR132**

98. DK **GO TO WR133**

99. RF **GO TO WR133**

(ELSA)

WR131: **IWER: ENTER AMOUNT**

€0 ... €50,000 **GO TO WR133**

98. DK **GO TO WR133**

99. RF **GO TO WR133**

(ELSA)

WR132: **IWER: ENTER PERCENTAGE OF SALARY**

1 ... 50%

98. DK

99. RF

(ELSA)

WR133: Per month, how much do you currently contribute to your pension plan? You may respond to this by giving me the monthly amount or the equivalent percentage of your salary.

IWER: IF RESPONDENT DOES NOT CONTRIBUTE TO THIS PENSION, SELECT 'AMOUNT' AND ENTER '0'

IWER: ASK RESPONDENT TO CHECK HIS/HER PAY SLIP TO RESPOND TO THIS QUESTION, IF POSSIBLE

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR134**

2 Percentage of salary **GO TO WR135**

98. DK **GO TO WR136**

99. RF **GO TO WR136**

(ELSA)

WR134: **IWER: ENTER AMOUNT**

€0 ... €50,000 **GO TO WR136**

98. DK **GO TO WR136**

99. RF **GO TO WR136**

(ELSA)

WR135: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50%

98. DK

99. RF

(ELSA)

WR136: In the past 12 months, did you make any Additional Voluntary Contributions (AVCs):

1. Yes **GO TO WR137**

5. No **GO TO WR140**

98. DK **GO TO WR140**

99. RF **GO TO WR140**

(ELSA)

WR137: In the past 12 months, how much did you contribute through additional voluntary contributions? You may respond to this by giving me the total amount or the equivalent percentage of your annual salary.

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR138**

2 Percentage of annual salary **GO TO WR139**

98. DK **GO TO WR140**

99. RF **GO TO WR140**

(ELSA)

WR138: IWER: ENTER AMOUNT

€0 ... €50,000 **GO TO WR140**

98. DK **GO TO WR140**

99. RF **GO TO WR140**

(ELSA)

WR139: IWER: ENTER PERCENTAGE OF ANNUAL SALARY

1 ... 50%

98. DK

99. RF

(ELSA)

WR140: For how many years have you been contributing to this pension plan?

NUMBER OF YEARS

0 ... 50

98. DK

99. RF

(SHARE)

WR141: What is the value of your pension plan at present?

IWER: ASK RESPONDENT TO CHECK HIS/HER YOUR LATEST PENSION STATEMENT TO RESPOND TO THIS QUESTION, IF POSSIBLE.

€0 ... €5,000,000

98. DK

99. RF

(ELSA)

WR142: Which of these best describes how your pension will be calculated?

IWER: CODE THE ONE THAT APPLIES

1 Some fraction of my final year's salary

2 Some fraction of my salary averaged over all the years I have been in the scheme

3 Some fraction of my last five years salary

95 Other (specify) **GO TO WR143**

98. DK

99. RF

BL:

IF WR142= 1, 2, 3 GO TO WR144

IF WR142= 98, 99 GO TO WR146

(ELSA)

WR143: Other (specify)

Text: up to 60 characters

98. DK

99. RF

(ELSA)

BL: GO TO WR146

WR146: When you retire, how will the funds from your pension plan be paid?

1. As a pension only **GO TO WR147**

2. As a lump-sum plus a pension **GO TO WR150**

98. DK **GO TO WR154**

99. RF **GO TO WR154**

(ELSA)

WR147: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR148**

2. Monthly amount **GO TO WR149**

98. DK **GO TO WR154**

99. RF **GO TO WR154**

(ELSA/TILDA)

WR148: IWER: ENTER PERCENTAGE OF SALARY

1 ... 100% **GO TO WR154**

98. DK **GO TO WR154**

99. RF **GO TO WR154**

(ELSA)

WR149: IWER: ENTER MONTHLY AMOUNT

€0 ... €100,000 **GO TO WR154**

98. DK **GO TO WR154**

99. RF **GO TO WR154**

(ELSA)

WR150: How much do you expect to receive as a lump sum payment from this pension scheme when you retire?

€0 ... €5,000,000

98. DK

99. RF

(ELSA)

WR151: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR152**

2. Monthly amount **GO TO WR153**

98. DK **GO TO WR154**

99. RF **GO TO WR154**

(ELSA/TILDA)

WR152: IWER: ENTER PERCENTAGE OF SALARY

1 ... 100% **GO TO WR154**

98. DK **GO TO WR154**

99. RF **GO TO WR154**

(ELSA)

WR153: IWER: ENTER MONTHLY AMOUNT

€0 ... €100,000

98. DK

99. RF

(ELSA)

IWER: SHOW CARD WR4

WR154: Please look at card WR4. When you first started contributing to this pension plan, did you transfer funds from a pension plan provided by your previous employer, a PRSA or from a personal pension plan:

IWER: CODE THE ONE THAT APPLIES

- 1. Yes
- 5. No, I did not transfer any funds from previous pensions
- 7. No, this was the first time I contributed to a pension plan
- 95. Other
- 98. DK
- 99. RF
- (TILDA)

BL: GO TO WR401

Planning for retirement – Public sector pension

WR201: When did you start the job on which your pension is based?

ENTER YEAR

1900...[current year]

98. DK

99. RF

(TILDA)

IWER: SHOW CARD WR5

WR202: Please look at card WR5. Which type of public sector pension are you currently covered by?

IWER: CODE THE ONE THAT APPLIES

1. Main Civil Service Pension Scheme

2. Pension scheme of the members of armed forces

3. Pension scheme of members of the Garda

4. Pension scheme of teachers and clerical support staff in schools

5. Pension scheme of university teaching and research staff

6. Pension scheme of Health Service Executive staff

7. Pension scheme of local authorities staff

95 Other public sector scheme (specify) **GO TO WR203**

98. DK

99. RF

(TILDA)

BL

IF WR201<1995 AND WR202=1 – GO TO WR204

IF WR201=>1995 AND WR202=1 – GO TO WR215

IF WR202=2, 3, 4, 5, 6, 7, 98, 99 – GO TO WR226

WR203: Other (specify)

Text: up to 100 characters

98. DK

99. RF

(TILDA)

BL: GO TO WR226

WR204: In the past 12 months, did you purchase any additional service years ('added years') or make any additional voluntary contributions (AVC's) to this pension?

Note; Include any AVCs paid through an Additional Voluntary Contribution PRSA

1. Yes **GO TO WR205**

5. No **GO TO WR208**

98. DK **GO TO WR208**

99. RF **GO TO WR208**

(ELSA/TILDA)

WR205: In the past 12 months, how much did you spend in buying additional service years ('added years') or in additional voluntary contributions (AVC's) on this pension? You may respond to this by giving me the total amount or the equivalent percentage of your annual salary.

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR206**

2 Percentage of annual salary **GO TO WR207**

98. DK **GO TO WR208**

99. RF **GO TO WR208**

(ELSA)

WR206: **IWER: ENTER AMOUNT**

€0 ... €1,000,000 **GO TO WR208**

98. DK **GO TO WR208**

99. RF **GO TO WR208**

(ELSA)

WR207: **IWER: ENTER PERCENTAGE OF ANNUAL SALARY**

1 ... 50% **GO TO WR208**

98. DK **GO TO WR208**

99. RF **GO TO WR208**

(ELSA)

WR208: How much do you expect to receive as a lump sum payment from this pension scheme when you retire?

€0 ... €5,000,000

98. DK

99. RF

(ELSA)

WR209: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR210**

2. Monthly amount **GO TO WR211**

98. DK **GO TO WR401**

99. RF **GO TO WR401**

(ELSA/TILDA)

WR210: IWER: ENTER PERCENTAGE OF SALARY

1 ... 80%

98. DK

99. RF

(ELSA)

BL: GO TO WR401

WR211: IWER: ENTER MONTHLY AMOUNT

€0 ... €100,000

98. DK

99. RF

(ELSA)

BL: GO TO WR401

WR215: In the past 12 months, did you purchase any additional service years ('added years') or make any additional voluntary contributions (AVC's) to this pension? Note; Include any AVCs paid through an Additional Voluntary Contribution PRSA

1. Yes **GO TO WR216**

5. No **GO TO WR219**

98. DK **GO TO WR219**

99. RF **GO TO WR219**

(ELSA/TILDA)

WR216: In the past 12 months, how much did you spend in buying additional service years ('added years') or in additional voluntary contributions (AVC's) to this pension? You may respond to this by giving me the total amount or the equivalent percentage of your annual salary.

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR217**

2 Percentage of annual salary **GO TO WR218**

98. DK **GO TO WR219**

99. RF **GO TO WR219**

(ELSA)

WR217: IWER: ENTER AMOUNT

€0 ... €500,000 **GO TO WR219**

98. DK **GO TO WR219**

99. RF **GO TO WR219**

(ELSA)

WR218: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR219**

98. DK **GO TO WR219**

99. RF **GO TO WR219**

(ELSA)

WR219: How much do you expect to receive as a lump sum payment from this pension scheme when you retire?

€0 ... €5,000,000

98. DK

99. RF

(ELSA)

WR220: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR221**

2. Monthly amount **GO TO WR222**

98. DK **GO TO WR401**

99. RF **GO TO WR401**

(ELSA/TILDA)

WR221: **IWER: ENTER PERCENTAGE OF SALARY**

1... 80%

98. DK

99. RF

(ELSA)

BL: GO TO WR401

WR222: **IWER: ENTER MONTHLY AMOUNT**

€0 ... €100,000

98. DK

99. RF

(ELSA)

BL: GO TO WR401

WR226: Per month, how much do you currently contribute to your pension plan? You may respond to this by giving me the monthly amount or the equivalent percentage of your salary.

IWER: ASK RESPONDENT TO CHECK HIS/HER PAY SLIP TO RESPOND TO THIS QUESTION, IF POSSIBLE

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR227**

2 Percentage of salary **GO TO WR228**

98. DK **GO TO WR229**

99. RF **GO TO WR229**

(ELSA)

WR227: **IWER: ENTER AMOUNT**

€0 ... €50,000 **GO TO WR229**

98. DK **GO TO WR229**

99. RF **GO TO WR229**

(ELSA)

WR228: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50%

98. DK

99. RF

(ELSA)

WR229: In the past 12 months, did you purchase any additional service years ('added years') or make any additional voluntary contributions (AVC's) to this pension?

1. Yes **GO TO WR230**

5. No **GO TO WR233**

98. DK **GO TO WR233**

99. RF **GO TO WR233**

(ELSA/TILDA)

WR230: In the past 12 months, how much did you spend in buying additional service years ('added years') or in additional voluntary contributions (AVC's) on this pension? You may respond to this by giving me the monthly amount or the equivalent percentage of your annual salary.

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR231**

2 Percentage of annual salary **GO TO WR232**

98. DK **GO TO WR233**

99. RF **GO TO WR233**

(ELSA)

WR231: IWER: ENTER AMOUNT

€0 ... €1,000,000 **GO TO WR233**

98. DK **GO TO WR233**

99. RF **GO TO WR233**

(ELSA)

WR232: IWER: ENTER PERCENTAGE OF ANNUAL SALARY

1 ... 50%

98. DK

99. RF

(ELSA)

WR233: When you retire, how will the funds from your pension plan be paid?

1. As a pension only **GO TO WR234**

2. As a lump-sum plus a pension **GO TO WR237**

98. DK **GO TO WR241**

99. RF **GO TO WR241**

(ELSA)

WR234: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR235**

2. Monthly amount **GO TO WR236**

98. DK **GO TO WR241**

99. RF **GO TO WR241**

(ELSA/TILDA)

WR235: IWER: ENTER PERCENTAGE OF SALARY

1 ... 80% **GO TO WR241**

98. DK **GO TO WR241**

99. RF **GO TO WR241**

(ELSA)

WR236: IWER: ENTER MONTHLY AMOUNT

€0 ... €50,000 **GO TO WR241**

98. DK **GO TO WR241**

99. RF **GO TO WR241**

(ELSA)

WR237: How much do you expect to receive as a lump sum payment from this pension scheme when you retire?

€0 ... €5,000,000

98. DK

99. RF

(ELSA)

WR238: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR239**

2. Monthly amount **GO TO WR240**

98. DK **GO TO WR241**

99. RF **GO TO WR241**

(ELSA/TILDA)

WR239: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR241**

98. DK **GO TO WR241**

99. RF **GO TO WR241**

(ELSA)

WR240: IWER: ENTER MONTHLY AMOUNT

€0 ... €50,000

98. DK

99. RF

(ELSA)

IWER: SHOW CARD WR6

WR241: Please look at card WR6. When you first started contributing to this pension plan, did you transfer funds from a pension plan provided by your previous employer, a PRSA or from a personal pension plan:

IWER: CODE THE ONE THAT APPLIES

- 1. Yes
- 5. No, I did not transfer any funds from previous pensions
- 7. No, this was the first time I contributed to a pension plan
- 95. Other
- 98. DK
- 99. RF
(TILDA)

BL: GO TO WR401

Planning for retirement – PRSA

WR301: Do you currently pay into a Personal Retirement Savings Account (PRSA)?

1. Yes **GO TO WR302**

5. No **GO TO WR401**

98. DK **GO TO WR401**

99. RF **GO TO WR401**

IWER: IF RESPONDENT IS EMPLOYED CONSIDER ONLY CONTRIBUTIONS TO A PRSA THAT SUBSTITUTE FOR THE COMPANY PENSION SCHEME.

Note: PRSA is an retirement saving product for employees, self-employed, homemakers, carers, unemployed and any other category of person. These are designed to be used instead of occupational pension schemes by employers who do not wish to sponsor such schemes.

(TILDA)

WR302: What is the name of your PRSA policy and provider?

Text: up to 200 characters

98. DK

99. RF

(TILDA)

IF WE001 = 3 (SELF-EMPLOYED) GO TO WR307

WR303: Does your employer contribute to this PRSA?

1. Yes **GO TO WR304**

5. No **GO TO WR307**

98. DK **GO TO WR307**

99. RF **GO TO WR307**

(ELSA)

WR304: Per month, how much does your employer currently contribute to your PRSA?

You may respond to this by giving me the monthly amount or the equivalent percentage of your salary.

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR305**

2 Percentage of salary **GO TO WR306**

98. DK **GO TO WR307**

99. RF **GO TO WR3307**

(ELSA)

WR305: **IWER: ENTER AMOUNT**

€0 ... €50,000 **GO TO WR307**

98. DK **GO TO WR307**

99. RF **GO TO WR307**

(ELSA)

WR306: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50%

98. DK

99. RF

(ELSA)

WR307: Per month, how much do you currently contribute to your PRSA? You may respond to this by giving me the monthly amount or the equivalent percentage of your salary.

IWER: ASK RESPONDENT TO CHECK HIS/HER PAY SLIP TO RESPOND TO THIS QUESTION, IF POSSIBLE

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR308**

2 Percentage of salary **GO TO WR309**

98. DK **GO TO WR310**

99. RF **GO TO WR310**

(ELSA)

WR308: IWER: ENTER AMOUNT

€0 ... €50,000 **GO TO WR310**

98. DK **GO TO WR310**

99. RF **GO TO WR310**

(ELSA)

WR309: IWER: ENTER PERCENTAGE OF SALARY

1 ...50%

98. DK

99. RF

(ELSA)

WR310: For how many years have you been contributing to this PRSA?

NUMBER OF YEARS

0 ... 30

98. DK

99. RF

(SHARE)

WR311: What is the value of your PRSA at present?

IWER: ASK RESPONDENT TO CHECK HIS/HER LATEST PRSA STATEMENT TO RESPOND TO THIS QUESTION, IF POSSIBLE

€0 ... €5,000,000

98. DK

99. RF

(HRS)

WR312: In normal conditions, at what age will you be able to withdraw funds from your PRSA policy?

30 ... 80

98. DK

99. RF

(TILDA)

WR313: In case you became ill or decided to retire early, would your policy allow you to withdraw your PRSA funds before ^AGE IN WR312?

1. Yes **GO TO WR314**

5. No **GO TO WR315**

98. DK **GO TO WR315**

99. RF **GO TO WR315**

(TILDA)

WR314: What is the earliest age at which you can have access to the funds invested in this PRSA?

18...70

98. DK

99. RF

(TILDA)

IWER: SHOW CARD WR7

WR315: Please look at card WR7. How are the funds in this PRSA invested?

IWER: CODE THE ONE THAT APPLIES

1. All or mostly in shares **GO TO WR317**

2. All or mostly in interest earning assets **GO TO WR317**

3. All or mostly in property **GO TO WR317**

4. Spread across different type of assets **GO TO WR317**

5. I let my PRSA provider decide how the funds are invested **GO TO WR317**

95. Other (specify) **GO TO WR316**

98. DK **GO TO WR317**

99. RF **GO TO WR317**

(HRS)

WR316: Other (specify)

Text: up to 60 characters

98. DK

99. RF

(HRS)

WR317: When you retire, how will you use the funds from your PRSA?

1. Buy pension **GO TO WR318**

2. Withdraw a tax free lump-sum and use the remaining money to buy a pension **GO TO WR321**

98. DK **GO TO WR325**

99. RF **GO TO WR325**

(ELSA)

WR318: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR319**

2. Monthly amount **GO TO WR320**

98. DK **GO TO WR325**

99. RF **GO TO WR325**

(ELSA/TILDA)

WR319: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR325**

98. DK **GO TO WR325**

99. RF **GO TO WR325**

(ELSA)

WR320: IWER: ENTER MONTHLY AMOUNT

€0 ... €50,000 **GO TO WR325**

98. DK **GO TO WR325**

99. RF **GO TO WR325**

(ELSA)

WR321: How much do you expect to receive as a lump sum payment from this PRSA when you retire?

€0 ... €5,000,000

98. DK

99. RF

(ELSA)

WR322: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR323**

2. Monthly amount **GO TO WR324**

98. DK **GO TO WR325**

99. RF **GO TO WR325**

(ELSA/TILDA)

WR323: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR325**

98. DK **GO TO WR325**

99. RF **GO TO WR325**

(ELSA)

WR324: IWER: ENTER MONTHLY AMOUNT

€0 ... €50,000

98. DK

99. RF

(ELSA)

IWER: SHOW CARD WR8

WR325: Please look at card WR8. When you first started contributing to this pension plan, did you transfer funds from a pension plan provided by your previous employer, a PRSA or from a personal pension plan:

IWER: CODE THE ONE THAT APPLIES

- 1. Yes
- 5. No, I did not transfer any funds from previous pensions
- 7. No, this was the first time I contributed to a pension plan
- 95. Other
- 98. DK
- 99. RF
- (TILDA)

BL: GO TO WR401

Planning for retirement – Personal pension plan

WR401: Do you currently pay into one or more private pension plans or annuities?

- 1. Yes **GO TO WR402**
- 5. No **GO TO WR427**
- 98. DK **GO TO WR427**
- 99. RF **GO TO W427**

WR402: How many private pension plans or annuities do you pay into?

- 1...10 **GO TO WR403**
 - 98. DK
 - 99. RF
- (TILDA)
BL:

BL: REPEAT WR403 TO WR426 FOR EACH PENSION STARTING WITH THE MOST IMPORTANT ONE, I.E. SCHEME FOR WHICH YOU HAVE CONTRIBUTED FOR THE LONGEST NUMBER OF YEARS OR WITH THE LARGEST ACCUMULATED FUND. IF WR402 = DK OR REF ASK WR403 TO WR424 ONCE

WR403: What is the name of your private pension plan/annuity and provider?

IWER: IN CASE THE RESPONDENT HAS MORE THAN ONE PENSION START WITH THE MOST IMPORTANT ONE, I.E. SCHEME FOR WHICH YOU HAVE CONTRIBUTED FOR THE LONGEST NUMBER OF YEARS OR WITH THE LARGEST ACCUMULATED FUND

Text: up to 200 characters

[we403_1 to we403_5]

- 98. DK
 - 99. RF
- (TILDA)

BL: IF WE001 = 3 GO TO WR408

WR404: Does your employer contribute to this private pension plan/annuity?

- 1. Yes **GO TO WR405** **[we404_1 to we404_5]**
 - 5. No **GO TO WR408**
 - 98. DK **GO TO WR408**
 - 99. RF **GO TO WR408**
- (ELSA)

WR405: Per month, how much does your employer currently contribute to your private pension plan/annuity?

[we405_1 to we405_5]

IWER: CODE HOW ANSWER IS GIVEN

- 1 Amount **GO TO WR406**
 - 2 Percentage of salary **GO TO WR407**
 - 98. DK **GO TO WR408**
 - 99. RF **GO TO WR408**
- (ELSA)

WR406: IWER: ENTER AMOUNT

[we406_1 to we406_5]

€0 ... €50,000 GO TO WR408

98. DK GO TO WR408

99. RF GO TO WR408

(ELSA)

WR407: IWER: ENTER PERCENTAGE OF SALARY

[we407_1 to we407_5]

1 ... 50%

98. DK

99. RF

(ELSA)

WR408: Per month, how much do you currently contribute to your private pension plan/annuity? You may respond to this by giving me the monthly amount or the equivalent percentage of your salary.

[we408_1 to we408_5]

IWER: ASK RESPONDENT TO CHECK HIS/HER PAY SLIP TO RESPOND TO THIS QUESTION, IF POSSIBLE

IWER: CODE HOW ANSWER IS GIVEN

1 Amount GO TO WR409

2 Percentage of salary GO TO WR410

98. DK GO TO WR411

99. RF GO TO WR411

(ELSA)

WR409: IWER: ENTER AMOUNT

[we409_1 to we409_5]

€0 ... €50,000 GO TO WR411

98. DK GO TO WR411

99. RF GO TO WR411

(ELSA)

WR410: IWER: ENTER PERCENTAGE OF SALARY

[we410_1 to we410_5]

1 ... 50%

98. DK

99. RF

(ELSA)

WR411: For how many years have you been contributing to this private pension plan/annuity?

[we411_1 to we411_5]

NUMBER OF YEARS

0 ... 50

98. DK

99. RF

(SHARE)

WR412: What is the value of your private pension plan/annuity at present?

IWER: ASK RESPONDENT TO CHECK HIS/HER PRIVATE PENSION PLAN/ANNUITY STATEMENT TO RESPOND TO THIS QUESTION, IF POSSIBLE.

€0 ... €5,000,000

[we412_1 to we412_5]

98. DK

99. RF

WR413: In normal conditions, at what age will you be able to withdraw funds from your private pension plan/annuity policy? **[we413_1 to we413_5]**

30 ... 80

98. DK

99. RF

(TILDA)

WR414: In case you became ill or decided to retire early, would your policy allow you to withdraw your private pension plan/annuity fund before ^AGE IN WR413?

1. Yes **GO TO WR415**

[we414_1 to we414_5]

5. No **GO TO WR416**

98. DK **GO TO WR416**

99. RF **GO TO WR416**

(TILDA)

WR415: What is the earliest age that your pension plan/annuity allows you to retire?

30...75

[we415_1 to we415_5]

98. DK

99. RF

(TILDA)

IWER: SHOW CARD WR9

WR416: Please look at card WR9. Are the funds in this private pension plan/annuity invested mostly in shares, mostly in interest earning assets, or is it about evenly split between these, or what?

[we416_1 to we416_5]

IWER: CODE THE ONE THAT APPLIES

1. All or mostly in shares **GO TO WR418**

2. All or mostly in interest earning assets **GO TO WR418**

3. All or mostly in property **GO TO WR418**

4. Spread across different type of assets **GO TO WR418**

5. I let my PRSA provider decide how the funds are invested **GO TO WR418**

95. Other (specify) **GO TO WR417**

98. DK **GO TO WR418**

99. RF **GO TO WR418**

(HRS)

WR417: Other (specify)

[we417_1 to we417_5]

Text: up to 60 characters

98. DK

99. RF

(HRS)

WR418: When you retire, how will you use the funds from your private pension plan/annuity?

[we418_1 to we418_5]

1. Buy pension **GO TO WR419**

2. Withdraw a tax free lump-sum and use the remaining money to buy a pension **GO TO WR422**

98. DK **GO TO WR426**

99. RF **GO TO WR426**

(ELSA)

WR419: When you retire, before any tax deductions, how much do you expect to receive each month from this pension? [we419_1 to we419_5]

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR420**

2. Monthly amount **GO TO WR421**

98. DK **GO TO WR426**

99. RF **GO TO WR426**

(ELSA/TILDA)

WR420: **IWER: ENTER PERCENTAGE OF SALARY** [we420_1 to we420_5]

1 ... 80% **GO TO WR426**

98. DK **GO TO WR426**

99. RF **GO TO WR426**

(ELSA)

WR421: **IWER: ENTER MONTHLY AMOUNT** [we421_1 to we421_5]

€0 ... €50,000 **GO TO WR426**

98. DK **GO TO WR426**

99. RF **GO TO WR426**

(ELSA)

WR422: How much do you expect to receive as a lump sum payment from this private pension when you retire? [we422_1 to we422_5]

€0 ... €5,000,000

98. DK

99. RF

(ELSA)

WR423: When you retire, before any tax deductions, how much do you expect to receive each month from this pension? [we423_1 to we423_5]

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary **GO TO WR424**

2. Monthly amount **GO TO WR425**

98. DK **GO TO WR426**

99. RF **GO TO WR426**

(ELSA/TILDA)

WR424: **IWER: ENTER PERCENTAGE OF SALARY** [we424_1 to we424_5]

1 ... 80% **GO TO WR426**

98. DK **GO TO WR426**

99. RF **GO TO WR426**

(ELSA)

WR425: **IWER: ENTER MONTHLY AMOUNT** [we425_1 to we425_5]

€0 ... €50,000

98. DK

99. RF

(ELSA)

IWER: SHOW CARD WR10

WR426: Please look at card WR10. When you first started contributing to this pension plan, did you transfer funds from a pension plan provided by your previous employer, a PRSA or from a personal pension plan: **[we426_1 to we426_5]**

IWER: CODE THE ONE THAT APPLIES

- 1. Yes
- 5. No, I did not transfer any funds from previous pensions
- 7. No, this was the first time I contributed to a pension plan
- 95. Other
- 98. DK
- 99. RF
- (TILDA)

WR427: Apart from any pension plans we have already talked about, are you entitled to any other pensions from previous employers?

- 1. Yes **GO TO WR428**
- 5. No **GO TO WR430**
- 98. DK **GO TO WR430**
- 99. RF **GO TO WR430**

WR428: Thinking of the pensions you are entitled to from previous employments. How much do you expect to receive as a lump sum payment from these pensions when you retire?

- €0 ... €100,000,000
- 98. DK
- 99. RF
- (TILDA)

WR429: Thinking of the pensions you are entitled to from previous employments. In total, before any tax deductions, how much do you expect to receive each month from these pensions, when you retire?

- €0 ... €50,000
- 98. DK
- 99. RF
- (TILDA)

WR430

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION WR?

- 1. NEVER
- 2. A FEW TIMES
- 3. MOST OR ALL OF THE TIME

BL: GO TO BH001

SECTION 13. BEHAVIOURAL HEALTH (BH)

INTRO: Now I would like to ask some questions about your lifestyle.

Smoking

BH001: Have you ever smoked cigarettes, cigars, cigarillos or a pipe daily for a period of at least one year?

1. Yes **GO TO BH002**

5. No **GO TO BH101**

98. DK **GO TO BH101**

99. RF **GO TO BH101**

(SHARE/ Similar question ELSA/HRS)

BH002: Do you smoke at the present time?

IWER: IF RESPONDENT SMOKED IN THE PAST 3 MONTHS CODE 1

1. Yes **GO TO BH004**

5. No, I have stopped **GO TO BH003**

98. DK **GO TO BH003**

99. RF **GO TO BH003**

(SHARE/ Similar question ELSA/HRS)

BH003: How old were you when you stopped smoking?

1 ... 100

98. DK

99. RF

(SHARE/ Similar question HRS)

BH004: For how many years [do/did] you smoke altogether?

1 ... 100

98. DK

99. RF

(SHARE/ Similar question HRS)

BH005: What do/did you smoke (before you stopped)?

IWER: CODE ALL THAT APPLY

1. Cigarettes **GO TO BH006**

[bh005_1]

2. Pipe **GO TO BH007**

[bh005_2]

3. Cigars or cigarillos **GO TO BH008**

[bh005_3]

98. DK **GO TO BH101**

[bh005_4]

99. RF **GO TO BH101**

[bh005_5]

(SHARE/ Similar question ELSA)

BH006: How many cigarettes do/did you smoke on average per day?

1 ... 100

98. DK

99. RF

(SHARE/ Similar question ELSA)

BL: GO TO BH101

BH007: How many pipes do/did you smoke on average per day?

1 ... 100

98. DK

99. RF

(SHARE/ Similar question ELSA)

BL: GO TO BH101

BH008: How many cigars or cigarillos do/did you smoke on average per day?

1 ... 100

98. DK

99. RF

(SHARE/ Similar question ELSA)

BL: GO TO BH101

Exercise section

INTRO: We are interested in finding out about the kinds of physical activities that people do as part of their everyday lives. The next set of questions will ask you about the time you spent being physically active in the last 7 days. Please answer each question even if you do not consider yourself to be an active person. Please think about the activities you do at work, as part of your house and garden work, to get from place to place, and in your spare time for recreation, exercise or sport.

Think about all the vigorous activities that you did in the **last 7 days**. **Vigorous** physical activities refer to activities that take hard physical effort and make you breathe much harder than normal. Think *only* about those physical activities that you did for at least 10 minutes at a time.

BH101: During the **last 7 days**, on how many days did you do **vigorous** physical activities like heavy lifting, digging, aerobics, or fast bicycling?

1. _____ Number of days per week

5. No I have not done any vigorous physical activities

GO TO BH103

98. DK/ NOT SURE

99. RF

BH102: How much time did you usually spend doing **vigorous** physical activities on one of those days?

_____ hours per day (0 ...10)

_____ minutes per day

[bh102a]

98. DK/NOT SURE

99. RF

BH103: Think about all the **moderate** activities that you did in the **last 7 days**. Moderate activities refer to activities that take moderate physical effort and make you breathe somewhat harder than normal. Think only about those physical activities that you did for at least 10 minutes at a time. During the **last 7 days**, on how many days did you do **moderate** physical activities like carrying light loads, bicycling at a regular pace, or doubles tennis? Do not include walking.

1. _____ days per week

5. No I have not done any moderate physical activities

GO TO BH105

98. DK

99. RF

BH104: How much time did you usually spend doing **moderate** physical activities on one of those days?

_____ hours per day (0 ...10)

_____ minutes per day

[bh104a]

98. DK/NOT SURE

99. RF

BH105: Now think about the time you spent **walking** in the **last 7 days**. This includes at work and at home, walking to travel from place to place, and any other walking that you might do solely for recreation, sport, exercise, or leisure.

During the last 7 days, on how many days did you walk for at least 10 minutes at a time?

1. _____ days per week

5. No I have not done any walking

GO TO BH107

98. DK

99. RF

BH106: How much time did you usually spend **walking** on one of those days?

_____ hours per day (0 ...5)

_____ minutes per day

[bh106a]

98. DK/NOT SURE

99. RF

BH107: The last question is about the time you spent **sitting** on weekdays during the **last 7 days**. Include time spent at work, at home, while doing course work and during leisure time. This may include time spent sitting at a desk, visiting friends, reading, or sitting or lying down to watch television. During the **last 7 days**, how much time (per day) did you spend **sitting** on a week day?

(This question is looking for the usual number of hours spent sitting on a typical week day. If respondent has difficulty calculating, interviewer may suggest they approximate by subtracting time spent sleeping, walking, standing, exercising etc. from the 24 hours)

_____ hours per day (0 ...20)

_____ minutes per day

[bh107a]

98. DK/NOT SURE

99. RF

Sleep section

INTRO: We are interested in how well people manage to sleep at night and if they have any trouble sleeping.

IWER: CODE THE ONE THAT APPLIES

BH201: How likely are you to doze off or fall asleep during the day?

IWER: READ OUT

1. Would never doze
 2. Slight chance of dozing
 3. Moderate chance of dozing
 4. High chance of dozing
 98. DK
 99. RF
- (TILDA)

IWER: CODE THE ONE THAT APPLIES

BH202: How often do you have trouble falling asleep?

IWER: READ OUT

1. Most of the time
 2. Sometimes
 3. Rarely or never
 98. DK
 99. RF
- (HRS)

IWER: CODE THE ONE THAT APPLIES

BH203: How often do you have trouble with waking up too early and not being able to fall asleep again?

IWER: READ OUT

1. Most of the time
 2. Sometimes
 3. Rarely or never
 98. DK
 99. RF
- (HRS)

BH204

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION BH?

1. NEVER
2. A FEW TIMES
3. MOST OR ALL TIMES

BL: GO TO TP001

SECTION 14. TRANSFERS TO PARENTS (TP)

INTRO: Families and friends often help one another in different ways. Part of this study involves understanding how people do that. First of all, I'd like to ask about your mother.

Mother Alive

TP001: Is your mother alive?

1. Yes

5. No **GO TO TP005**

98. DK **GO TO TP007**

99. RF **GO TO TP007**

(HRS/SHARE/ELSA/MHAS)

TP002: How old is your mother?

32 ... 120

98. DK

99. RF

(HRS/SHARE/ELSA/MHAS)

TP003: Can your mother be left alone for an hour or more?

1. Yes

2. No

98. DK

99. RF

(HRS/SHARE/ELSA/MHAS)

TP004: Would you say that your mother's health is

1. Excellent

2. Very good

3. Good

4. Fair

5. Poor?

98 DK

99 RF

(HRS/SHARE/ELSA/MHAS)

BL: GO TO TP007

Mother deceased

TP005: How old was your mother when she died?

1 ... 120

98. DK

99. RF

(HRS)

TP006: In what month and year did she die?

MM/YYYY

_____ DK RF MONTH

_____ DK RF YEAR

(HRS)

[tp006a]

Father Alive

TP007: Is your father alive?

1. Yes

5. No **GO TO TP011**

98. DK **GO TO TP013**

99. RF **GO TO TP013**

(HRS/ELSA/SHARE/MHAS)

TP008: How old is your father?

32 ... 120

98. DK

99. RF

(HRS/ELSA/SHARE/MHAS)

TP009: Can your father be left alone for an hour or more?

1. Yes

5. No

98. DK

99. RF

(HRS/ELSA/SHARE/MHAS)

TP010: Would you say that your father's health is

1. Excellent

2. Very good,

3. Good,

4. Fair,

5. Poor

98. DK

99. RF

(HRS/ELSA/SHARE/MHAS)

BL:

IF TP001=1 AND TP007=1 - GO TO TP023

IF TP001=5 AND TP007=1 - GO TO TP018

Father deceased

TP011: How old was he when he died?

1 ... 120

98. DK

99. RF

(HRS)

TP012: In what month and year did he die?

(MM/YYYY)

_____ DK RF MONTH

_____ DK RF YEAR

[tp012a]

(HRS)

BL: IF TP001=1 AND TP007=5 - GO TO TP013

BL: IF TP001=5 AND TP006<2008 (MOTHER DIED MORE THAN TWO YEARS AGO) AND TP007=5 AND TP012 <2008 (FATHER DIED MORE THAN TWO YEARS AGO) - GO TO TP058

BL: IF TP001=5 AND TP006>2008 (MOTHER DIED LESS THAN TWO YEARS AGO) AND TP007=5 AND TP012 >2008 (FATHER DIED LESS THAN TWO YEARS AGO) - GO TO TP036

Only mother living

BL: If mother lives with R ask only TP013 and GO to TP036

TP013: Is your mother currently married or in a relationship?

1. Yes

5. No

98. DK

99. RF

(HRS)

IWER: SHOW CARD TP1

TP014: Please look at card TP1. With whom does your mother live?

IWER: CODE THE ONE THAT APPLIES

1. By herself

2. With spouse

3. With another child

4. With other relatives

5. In nursing home/care facility/other institution

6. Part of year with respondent, part of the year with other siblings

95. Other

98. DK

99. RF

(HRS)

TP015: Where does your mother live?

1. Same house or building as respondent
 2. Same neighbourhood as respondent
 3. Different neighbourhood but same county
 4. Another county
 5. Another country
 98. DK
 99. RF
- (HRS)

TP016: How often do you see your mother in person?

1. Every day
 2. Several times per week
 3. Several times per month
 4. Several times per year
 5. Once or twice per year
 6. Almost never
 98. DK
 99. RF
- (HRS)

TP017: How often do you have contact with your mother by telephone, email or post?

1. Every day
 2. Several times per week
 3. Several times per month
 4. Several times per year
 5. Once or twice per year
 6. Almost never
 98. DK
 99. RF
- (TILDA)

BL: IF TP001=1 AND TP007=5 - GO TO TP036

Only father living

BL: If father lives with R ask only TP018 and GO TO TP036

TP018: Is your father currently married or in a relationship?

1. Yes
 5. No
 98. DK
 99. RF
- (HRS)

IWER: SHOW CARD TP1

TP019: Please look at card TP1. With whom does your father live?

IWER: CODE THE ONE THAT APPLIES

1. By himself
 2. With spouse
 3. With another child
 4. With other relatives
 5. In nursing home/care facility/ other institution
 6. Part of year with respondent, part of the year with other siblings
 95. Other
 98. DK
 99. RF
- (HRS)

TP020: Where does your father live?

1. Same house or building as respondent
 2. Same neighbourhood as respondent
 3. Different neighbourhood but same county
 4. Another county
 5. Another country
 98. DK
 99. RF
- (HRS)

TP021: How often do you see your father in person?

1. Every day
 2. Several times per week
 3. Several times per month
 4. Several times per year
 5. Once or twice per year
 6. Almost never
 98. DK
 99. RF
- (MHAS)

TP022: How often do you have contact with your father by telephone, email or post?

1. Every day
 2. Several times per week
 3. Several times per month
 4. Several times per year
 5. Once or twice per year
 6. Almost never
 98. DK
 99. RF
- (TILDA)

BL: GO TO TP036

Both Parents Living

TP023: Do your parents live together?

1. Yes **GO TO TP026**

5. No

98. DK

99. RF

(HRS/MHAS)

BL: If father lives with Respondent skip TP024 and Go TO TP025

IWER: SHOW CARD TP2

TP024: Please look at card TP2. With whom does your father live?

IWER: CODE THE ONE THAT APPLIES

1. By himself

2. With spouse (not with Respondent's biological mother)

3. With another child

4. With other relatives

5. In nursing home/care facility/other institution

6. Part of year with respondent, part of the year with other siblings

95. Other

98. DK

99. RF

(HRS/MHAS)

IWER: SHOW CARD TP2

BL: If mother lives with Respondent skip TP025 and GO TO TP033

TP025: With whom does your mother live?

1. By herself **GO TO TP030**

2. With spouse (not with Respondent's biological father) **GO TO TP030**

3. With another child **GO TO TP030**

4. With other relatives **GO TO TP030**

5. In nursing home/care facility/ other institution **GO TO TP030**

6. Part of year with respondent, part of the year with other siblings **GO TO TP030**

95. Other **GO TO TP030**

98. DK **GO TO TP030**

99. RF **GO TO TP030**

(HRS/MHAS)

Mother does not live with R: GO TO TP030 THROUGH TP032

Father does not live with R: GO TO TP033 THROUGH TP035

IWER: SHOW CARD TP3

BL: If parents live with respondent GO TO TP036

TP026: Please look at card TP3. With whom do your parents live?

IWER: CODE THE ONE THAT APPLIES

1. By themselves
 2. With another child
 3. With other relatives
 4. In nursing home/ care facility/ other institution
 5. Part of year with respondent, part of the year with other siblings
 95. Other
 98. DK
 99. RF
- (HRS/MHAS)

BL: IF TP026=5 - GO TO TP036

TP027: Where do your parents live?

1. Same house or building as Respondent
 2. Same neighbourhood as Respondent
 3. Different neighbourhood but same county
 4. Another county
 5. Another country
 98. DK
 99. RF
- (HRS/MHAS)

TP028: How often do you see your parents in person?

1. Every day
 2. Several times per week
 3. Several times per month
 4. Several times per year
 5. Once or twice per year
 6. Almost never
 98. DK
 99. RF
- (HRS/MHAS)

TP029: How often do you have contact with your parents by telephone, email, or post?

1. Every day
 2. Several times per week
 3. Several times per month
 4. Several times per year
 5. Once or twice per year
 6. Almost never
 98. DK
 99. RF
- (HRS/MHAS)

Parents do not live together

IF Mother lives with respondent go to TP033

TP030: Where does your mother live?

1. Same house or building as Respondent
2. Same neighbourhood as Respondent
3. Different neighbourhood but same county
4. Another county
5. Another country

98. DK

99. RF

(HRS/MHAS)

TP031: How often do you see your mother in person?

1. Every day
2. Several times per week
3. Several times per month
4. Several times per year
5. Once or twice per year
6. Almost never

98. DK

99. RF

(HRS/MHAS)

TP032: How often do you have contact with your mother by telephone, email, or post?

1. Every day
2. Several times per week
3. Several times per month
4. Several times per year
5. Once or twice per year
6. Almost never

98. DK

99. RF

(HRS/MHAS)

IF Father lives with respondent go to TP036

TP033: Where does your father live?

1. Same house or building as Respondent
2. Same neighbourhood as Respondent
3. Different neighbourhood but same county
4. Another county
5. Another country

98. DK

99. RF

(HRS/MHAS)

TP034: How often do you see your father in person?

- 1. Every day
 - 2. Several times per week
 - 3. Several times per month
 - 4. Several times per year
 - 5. Once or twice per year
 - 6. Almost never
 - 98. DK
 - 99. RF
- (HRS/MHAS)

TP035: How often do you have contact with your father by telephone, email, or post?

- 1. Every day
 - 2. Several times per week
 - 3. Several times per month
 - 4. Several times per year
 - 5. Once or twice per year
 - 6. Almost never
 - 98. DK
 - 99. RF
- (HRS/MHAS)

Siblings

TP036: Now I have some questions about your siblings. How many living sisters do you have?

- 0 ... 10
 - 98. DK
 - 99. RF
- (MHAS)

TP037: How many living brothers do you have?

- 0 ... 10
 - 98. DK
 - 99. RF
- (MHAS)

IF TP036 = 0 AND TP037 = 0 GOTO TP040

TP038: Excluding shared housing and food, did any of your siblings (or their spouse/partner) give any type of financial assistance to your parents/ father/ mother (deceased parents/ father/ mother) in the last two years?

- 1. Yes
 - 5. No
 - 98. DK
 - 99. RF
- (MHAS)

TP039: In the last two years, because of health problems, did any of your siblings (or their spouse/partner) help your parents/father/mother (deceased/ father/ mother) with basic personal activities such as dressing, eating and bathing?

1. Yes

5. No

98. DK

99. RF

(MHAS)

Financial Help to Parents

INTRO: Families sometimes help one another in a variety of ways, and each type of help can be important. The next questions are about help given or received by your parents.

TP040: Not counting any shared housing or shared food, in the last two years, have you (and your spouse/partner) given financial help to your parents/father/mother (deceased parents/father/mother)? Include help to pay costs such as rent, but exclude shared housing or food.

1. Yes

5. No **GO TO TP044**

98. DK **GO TO TP044**

99. RF **GO TO TP044**

(HRS/SHARE)

Note: By financial help we mean help to pay bills in general (medical, utility bills, etc), or covering specific types of costs such as health insurance, schooling, rent, down payment for a home, etc.

TP041: In total over these two years, did this assistance amount to €250 or more?

1. Yes **GO TO TP042**

5. No **GO TO TP044**

98. DK **GO TO TP044**

99. RF **GO TO TP044**

(HRS/SHARE)

TP042: In total, in the last two years, about how much was this support?

€250 ... €100,000,000 **GO TO TP044**

98. DK **GO TO TP043**

99. RF **GO TO TP043**

(HRS/SHARE)

TP043: Did it amount to less than €_____, more than €_____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1,000, €2,000, €5,000.

(unfolding sequence)

98. DK

99. RF

(HRS/SHARE)

Non-Financial Help to Parents

TP044: In the last two years, because of health problems, did you and/or your spouse/partner (late spouse/partner) help your parents/father/mother (deceased parents/father/mother) REGULARLY with basic personal activities such as dressing, eating and bathing?

1. Yes

5. No **GO TO TP049**

98. DK **GO TO TP049**

99. RF **GO TO TP049**

(MHAS)

TP045: Did this help take at least 1 hour a week?

1. Yes

5. No

98. DK

99. RF

(MHAS/HRS)

IWER: IF ONLY MOTHER OR FATHER IS ALIVE, CODE WITHOUT ASKING TP046

TP046: Who received this help?

1. Mother

2. Father

3. Both

98. DK

98. RF

(MHAS/HRS)

TP047: Roughly how many hours did you and/or your spouse/partner spend helping them/him/her in an average week?

IWER: IF RESPONDENT SPENDS LESS THAN ONE HOUR PER WEEK CODE 1

1 ... 168

98. DK

99. RF

(MHAS/HRS)

BL: FOR THOSE ANSWERED DK OR RF GO TO TP048, OTHERWISE GO TO TP049

TP048: Did it amount to less than ____ hours, more than ____ hours, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 10 hrs, 20 hrs, 40 hrs, 50 hrs.

(unfolding sequence)

(MHAS/HRS)

TP049: In the last two years, did you (or your (late) spouse/partner) help your parents/father/mother (deceased parents/mother/father) regularly with other things such as household chores, errands, shopping, transportation etc?

1. Yes

5. No **GO TO TP054**

98. DK **GO TO TP054**

99. RF **GO TO TP054**
(MHAS)

TP050: Did this help take at least 1 hour a week?

1. Yes

5. No **GO TO TP054**

98. DK **GO TO TP054**

99. RF **GO TO TP054**
(MHAS/HRS)

TP051: Who received this help?

1. Mother

2. Father

3. Both

98. DK

99. RF

(MHAS/HRS)

TP052: Roughly how many hours did you and/or your spouse/partner spend helping them/him/her in an average week?

IWER: IF RESPONDENT SPENDS LESS THAN ONE HOUR PER WEEK CODE 1

1 ... 168 **GO TO TP054**

98. DK **GO TO TP053**

99. RF **GO TO TP053**
(MHAS/HRS)

TP053: Did it amount to less than _____ hours, more than _____ hours, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 10 hrs, 20 hrs, 40 hrs, 50 hrs.

(unfolding sequence)

(MHAS/HRS)

Financial Assistance Received from Parents

TP054: Not counting any shared food or housing, have you (and your spouse/partner) received financial help from your parents/father/mother (deceased parents/father/mother), in the last two years? (Do not include inheritances)

1. Yes

5. No **GO TO TP058**

98. DK

99. RF

(MHAS)

TP055: In total over these two years, did this assistance amount to €250 or more?

1. Yes **GO TO TP056**

5. No **GO TO TP058**

98. DK

99. RF

(MHAS/HRS/SHARE)

TP056: In total, in the last two years, about how much was this support?

€250 ... €100,000,000 **GO TO TP058**

98. DK **GO TO TP057**

99. RF **GO TO TP057**

(HRS/SHARE)

TP057: Did it amount to less than €_____, more than €_____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1,000, €2,000, €5,000.

(unfolding sequence)

(MHAS/HRS/SHARE)

TP058:

IWER (CODE WITHOUT ASKING): HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION TP?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

SECTION 15. SOCIAL CONNECTEDNESS (CN)

CN001: Now, I would like to ask some questions about your social activities, your family and relationship with your friends. Do you participate in any groups such as a sports or social group or club, a church connected group, a self-help or charitable body or other community group or a day care centre?

1. Yes

5. No

98. DK

99. RF

(SNI)

IWER: IF RESPONDENT HAS DIFFICULTY, MENTION THE FOLLOWING EXAMPLES: GAA OR OTHER SPORTS CLUB, ST. VINCENT DE PAUL SOCIETY, RESIDENTS' ASSOCIATION, BOOK CLUB ETC.

BL: DATA COPIED FROM CS034 IF ASKED

CN002a: In total, then, how many living children do you have? (including step, foster and adoptive children)

1 ... 20

98. DK

99. RF

(HRS/ELSA/SHARE)

BL: IF RESPONDENT HAS NO CHILDREN GO TO CN003

CN002: How many of your children do you feel very close to?

0 ... 20

98. DK

99. RF

(SNI)

CN003: In general, (apart from your children), how many (other) relatives do you have that you feel close to? (People you feel at ease with, can talk to about private matters, and can call on for help)?

0... 20

98. DK

99. RF

(SNI)

CN004: In general, how many close friends do you have? (People that you feel at ease with, can talk to about private matters, and can call on for help).

0 ... 20

98. DK

99. RF

(SNI)

QUESTIONS MOVED FROM SECTION 3 (DM)

Religion

INTRO: New I would like to ask some questions about religion

DM020: What is your religion?

1. Roman Catholic
 2. Anglican/ Church of Ireland/Episcopalian
 3. Methodist
 4. Presbyterian
 5. Other Christian
 6. Other religion. Specify: _____ **[dm020x]**
 7. No religion **GO TO CN005**
 98. DK
 99. RF
- (HRS)

DM021: About how often do you go to religious services?

1. Never/almost never
 2. Once or twice a year
 3. Every few months
 4. Once or twice a month
 5. Once a week
 6. More than once a week
 98. DK
 99. RF
- (SNI)

DM022: How important would you say religion is in your life; is it very important, somewhat important, or not too important?

1. Very important
 2. Somewhat important
 3. Not too important
 4. Not at all important (DO NOT READ OUT)
 98. DK
 99. RF
- (HRS)

DM023: Do you find that you get comfort and strength from religion or not?

1. Yes
 5. No
 98. DK
 99. RF
- (HRS)

CN005

**IWER (CODE WITHOUT ASKING): HOW OFTEN DID R RECEIVE ASSISTANCE WITH
ANSWERS IN
SECTION CN?**

1. NEVER

2. A FEW TIMES

3. MOST OR ALL TIMES

BL:

SECTION 16. SOURCES OF INCOME (SI)

INTRO: You will understand that it's very important for our study to assess people's standard of living and what they can afford as they grow older. I would, therefore, now like to ask you some questions about pensions and state benefits. We fully realise that people can be sensitive about these issues. However, it is really important for our study to get good information about financial matters. Of course, your answers to these questions will, like all the information you give, be kept strictly confidential and will only be used for research purposes. They will not be passed on in an identifiable way to any other organisation or individual.

Income from occupational pensions

SI101:

BL: IF WE001=1 (RETIRED)

Are you receiving a retirement pension from a former employment or (if applicable) your deceased spouse's former employment?

BL: IF WE001~1 (NOT RETIRED)

Some people can receive a pension even if they are still in work. Are you receiving a retirement pension from a former employment or (if applicable) your deceased spouse's former employment?

IWER: DO NOT INCLUDE STATE OLD AGE PENSIONS (E.G. CONTRIBUTORY OR NON-CONTRIBUTORY OLD AGE PENSIONS).

1. Yes **GO TO SI102**

5. No **GO TO SI201**

98. DK **GO TO SI201**

99. RF **GO TO SI201**

(EU-SILC)

SI102: How many of these retirement pensions are you currently receiving?

1...10

98. DK

99. RF

(TILDA)

BL: REPEAT SI103 TO SI113 FOR EACH PENSION STARTING WITH THE MOST IMPORTANT ONE, I.E.

SI103: Does this pension arise from employment in the public sector?

1. Yes [si103_1 to si103_10]

5. No

98. DK

99. RF

(TILDA)

IWER: SHOW CARD SI1

SI104: Please look at card SI1. Was this pension more like Type A or Type B?

IWER: CODE THE ONE THAT APPLIES. [si104_1 to si104_10]

1 Type A: My pension contributions are put into a fund which grows over time and my pension will depend on the size of this fund when I retire. This type of pension is called a 'defined contribution' or 'money purchase' scheme.

2 Type B: My pension will be based on a formula involving age, years of service and salary. This type of pension is sometimes called a 'defined benefit' or 'final salary' scheme.

98. DK

99. RF

(TILDA)

SI105: In which year did you start receiving this pension? [si105_1 to si105_10]

1950...[current year]

98. DK

99. RF

(SHARE)

SI106: For how many months during the last 12 months did you receive this pension?

0 ... 12

[si106_1 to si106_10]

98. DK

99. RF

(SHARE)

IWER: SHOW CARD SI2

SI107: Please look at card SI2. How long a period did your last pension payment cover?

IWER: CODE THE ONE THAT APPLIES. [si107_1 to si107_10]

1. One week

2. Two weeks

3. A month/4 weeks

4. Three months/13 weeks

5. Six months/26 weeks

6. One year/12 months/52 weeks

95. Other (specify)

98. DK

99. RF

(EU-SILC)

SI108: Other (specify)

[si108_1 to si108_10]

Text: up to 60 characters

98. DK

99. RF

(EU-SILC)

SI109: Before any deductions, about how much was the last payment from this pension?

€0 ... €100,000

[si109_1 to si109_10]

98. DK

99. RF

(EU-SILC)

SI110: Did you ever receive any additional or lump sum (one off) payment from this pension?

[si110_1 to si110_10]

1. Yes **GO TO SI111**

5. No **GO TO SI113**

98. DK **GO TO SI113**

99. RF **GO TO SI113**

(SHARE)

SI111: Did this lump sum payment occur in the last 12 months?

[si111_1 to si111_10]

1. Yes

5. No

98. DK

99. RF

(TILDA)

SI112: Before taxes, about how much did you receive as additional or lump sum payments from this pension?

[si112_1 to si112_10]

€0 ... €5,000,000

98. DK

99. RF

(SHARE)

SI113: On what basis is your pension up-rated (increased)?

[si113_1 to si113_10]

1. In line with prices (inflation or consumer price index)

2. In line with the salary of the job you had before retiring

3. In line with average salaries in the economy

4. At the discretion of my former employer or of the scheme trustees

5. My pension is not indexed to any criteria/ is not up-rated

98. DK

99. RF

(TILDA)

Income from private pensions or annuities

SI201:

BL: IF WE001=1 (RETIRED)

Are you receiving payments from a private pension or annuity? By this I mean a pension scheme or PRSA fully organised and paid for by yourself or by a deceased spouse.

BL: IF WE001~1 (NOT RETIRED)

Some people can receive a pension even if they are still in work. Are you receiving payments from a private pension or annuity? By this I mean a pension scheme or PRSA fully organised and paid for by yourself or by a deceased spouse.

1. Yes **GO TO SI202**

5. No **GO TO SI301**

98. DK **GO TO SI301**

99. RF **GO TO SI301**

(EU-SILC)

NOTE: Please do not include payments from private insurance policies that cover out of work periods due to illness and also exclude capital accumulating life assurance schemes that pay a lump sum on maturity.

SI202: How many pensions/annuities are you currently receiving?

1...10

98. DK

99. RF

(TILDA)

BL: REPEAT SI203 TO SI211 FOR EACH PENSION STARTING WITH THE MOST IMPORTANT ONE, I.E. THE ONE THAT PROVIDES THE HIGHEST LEVEL OF INCOME.

SI203: In which year did you start receiving this pension/annuity?

1950...[current year]

[si203_1 to si203_10]

98. DK

99. RF

(SHARE)

SI204: For how many months during the last 12 months did you receive this pension/annuity?

[si204_1 to si204_10]

0 ... 12

98. DK

99. RF

(SHARE)

IWER: SHOW CARD SI2

SI205: Please look at card SI2. How long a period did your last pension/annuity payment cover? **[si205_1 to si205_10]**

IWER: CODE THE ONE THAT APPLIES

- 1. One week
- 2. Two weeks
- 3. A month/4 weeks
- 4. Three months/13 weeks
- 5. Six months/26 weeks
- 6. One year/12 months/52 weeks
- 95. Other (specify)
- 98. DK
- 99. RF
- (EU-SILC)

SI206: Other (specify)

[si206_1 to si206_10]

Text: up to 60 characters

- 98. DK
- 99. RF
- (EU-SILC)

SI207: Before any deductions, about how much was the last payment from this pension/annuity?

[si207_1 to si207_10]

€0 ... €500,000

- 98. DK
- 99. RF
- (EU-SILC)

SI208: Did you ever receive any additional or lump sum (one off) payment from this pension/annuity?

[si208_1 to si208_10]

- 1. Yes **GO TO SI209**
- 5. No **GO TO SI211**
- 98. DK **GO TO SI211**
- 99. RF **GO TO SI211**
- (SHARE)

SI209: Did this lump sum payment occur in the last 12 months?

[si209_1 to si209_10]

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (TILDA)

SI210: Before taxes, about how much did you receive as additional or lump sum payments from this pension/annuity?

[si210_1 to si210_10]

€0 ... €5,000,000

- 98. DK
- 99. RF
- (SHARE)

SI211: On what basis is your pension up-rated (increased)?

READ OUT [si211_1 to si211_10]

1. In line with prices (inflation or consumer price index)
 2. In line with the salary of the job you had before retiring
 3. In line with average salaries in the economy
 4. At the discretion of my former employer or of the scheme trustees
 5. My pension is not indexed to any criteria/ is not up-rated
98. DK
99. RF
(TILDA)

Income from individual state benefits

IWER: SHOW CARD SI3

SI301: Please look at Card SI3. Did you receive any of these payments in the last 12 months?

IWER: CODE ALL THAT APPLY

1. Contributory State Pension
(previously known as Contributory Old Age Pension) **GO TO SI302** [si301_01]
 2. Non-Contributory State Pension
(previously known as Non-Contributory Old Age Pension) **GO TO SI304** [si301_02]
 3. Transition State Pension
(previously known as Retirement Pension) **GO TO SI306** [si301_03]
 4. Widow's or Widower's Contributory Pension **GO TO SI308** [si301_04]
 5. Disability Allowance **GO TO SI310** [si301_05]
 6. Jobseeker's Allowance
(previously known as Unemployment Assistance) **GO TO SI312** [si301_06]
 7. Disability Benefit (previously known as Illness Benefit) **GO TO SI314** [si301_07]
 8. Invalidity Pension **GO TO SI316** [si301_08]
 9. Jobseeker's Benefit (previously known as Unemployment Benefit)
GO TO SI318 [si301_09]
 10. Carer's Allowance **GO TO SI320** [si301_10]
 11. Supplementary Welfare Allowance (SWA) **GO TO SI322** [si301_11]
 95. Other (specify) **GO TO SI324** [si301b] [si301_12]
 96. None of these **GO TO SI325A** [si301_15]
 98. DK **GO TO SI325A** [si301_14]
 99. RF **GO TO SI325A** [si301_13]
- (TILDA) (TILDA)

SI302: For how many weeks during the last 12 months did you receive the (Contributory) State Pension (previously Contributory Old Age Pension)?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI303: What was the weekly amount of the (Contributory) State Pension (previously Contributory Old Age Pension) you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=2 GO TO SI304

IF SI301=3 GO TO SI306

IF SI301=4 GO TO SI308

IF SI301=5 GO TO SI310

IF SI301=6 GO TO SI312

IF SI301=7 GO TO SI314

IF SI301=8 GO TO SI316

IF SI301=9 GO TO SI318

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI304: For how many weeks during the last 12 months did you receive the (Non-Contributory) State Pension (previously Non-Contributory Old Age Pension)?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI305: What was the weekly amount of the (Non-Contributory) State Pension (previously Non-Contributory Old Age Pension) you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=3 GO TO SI306

IF SI301=4 GO TO SI308

IF SI301=5 GO TO SI310

IF SI301=6 GO TO SI312

IF SI301=7 GO TO SI314

IF SI301=8 GO TO SI316

IF SI301=9 GO TO SI318

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI306: For how many weeks during the last 12 months did you receive the (Transition) State Pension (previously Retirement Pension)?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI307: What was the weekly amount of the (Transition) State Pension (previously Retirement Pension) you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=4 GO TO SI308

IF SI301=5 GO TO SI310

IF SI301=6 GO TO SI312

IF SI301=7 GO TO SI314

IF SI301=8 GO TO SI316

IF SI301=9 GO TO SI318

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI308: For how many weeks during the last 12 months did you receive the Widow's or Widower's Contributory Pension?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI309: What was the weekly amount of the Widow's or Widower's Contributory Pension you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=5 GO TO SI310

IF SI301=6 GO TO SI312

IF SI301=7 GO TO SI314

IF SI301=8 GO TO SI316

IF SI301=9 GO TO SI318

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI310: For how many weeks during the last 12 months did you receive the Disability Allowance?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI311: What was the weekly amount of the Disability Allowance you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=6 GO TO SI312

IF SI301=7 GO TO SI314

IF SI301=8 GO TO SI316

IF SI301=9 GO TO SI318

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI312: For how many weeks during the last 12 months did you receive the Jobseeker's Allowance?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI313: What was the weekly amount of the Jobseeker's Allowance you received during the last 12 months?

€0.00 ... €240

9.8 DK

99. RF

(EU-SILC)

BL:

IF SI301=7 GO TO SI314

IF SI301=8 GO TO SI316

IF SI301=9 GO TO SI318

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI314: For how many weeks during the last 12 months did you receive the Disability Benefit?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI315: What was the weekly amount of the Disability Benefit you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=8 GO TO SI316

IF SI301=9 GO TO SI318

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI316: For how many weeks during the last 12 months did you receive the Invalidity Pension?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI317: What was the weekly amount of the Invalidity Pension you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=9 GO TO SI318

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI318: For how many weeks during the last 12 months did you receive the Jobseeker's Benefit?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI319: What was the weekly amount of the Jobseeker's Benefit you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=10 GO TO SI320

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI320: For how many weeks during the last 12 months did you receive the Carer's Allowance?

0 ... 52 weeks

98. DK

99. RF

(EU-SILC)

SI321: What was the weekly amount of the Carer's Allowance you received during the last 12 months?

€0.00 ... €240

98. DK

99. RF

(EU-SILC)

BL:

IF SI301=11 GO TO SI322

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

SI322: For how many weeks during the last 12 months did you receive the Supplementary Welfare Allowance?

0 ... 52

98. DK

99. RF

(EU-SILC)

SI323: What was the weekly amount of the Supplementary Welfare Allowance you received during the last 12 months?

€0.00 ... €240

98. DK

99 RF

(EU-SILC)

BL:

IF SI301=95 GO TO SI324

OTHERWISE GO TO SI325A

IWER: SHOW CARD SI4

SI324: Please look at Card SI4. Did you receive any of these payments in the last 12 months?

- | | |
|--|------------|
| 1. Pre-retirement Allowance | [si324_01] |
| 2. Back To Work Allowance | [si324_02] |
| 3. Back To Work Enterprise Allowance | [si324_03] |
| 4. Back To Education Allowance | [si324_04] |
| 5. Part-time Job Incentive Scheme | [si324_05] |
| 6. Farm Assist Scheme | [si324_06] |
| 7. Widow's or Widower's Non-Contributory Pension | [si324_07] |
| 8. Widowed Parent Grant | [si324_08] |
| 9. Deserted Wife's Benefit | [si324_09] |
| 10. Bereavement Grant | [si324_10] |
| 11. Injury Benefit | [si324_11] |
| 12. Disablement Benefit | [si324_12] |
| 13. Blind Pension | [si324_13] |
| 14. Constant Attendance Allowance | [si324_14] |
| 15. Infectious Diseases Maintenance Allowance | [si324_15] |
| 16. Medical Care Scheme | [si324_16] |
| 96. None of these | [si324_19] |
| 98. DK | [si324_18] |
| 99. RF | [si324_17] |
- (TILDA)

SI325: Thinking of the last 12 months, in total, how much did you receive from this benefit/these benefits?

€0 ... €10,000

98. DK

99. RF

(EU-SILC)

SI325A Are you in receipt of any of the following Social Welfare payments :
READ OUT

- | | | |
|----|--|------------|
| 1 | (If female) Child Benefit (Children's Allowance)? | [si325a_1] |
| 2 | Single Parent Family Allowance? | [si325a_2] |
| 3 | Family Income Supplement? | [si325a_3] |
| 4 | (If female) Deserted Wife's Allowance? | [si325a_4] |
| 96 | None of these | [si325a_5] |
| 98 | Don't know | [si325a_6] |
| 99 | Refused | [si325a_7] |

IF SI325A = 1 (Child Benefit (Children's Allowance))

SI325B In respect of how many children do you receive Child Benefit (Children's Allowance)?

0...20

98. DK

99. RF

IF SI325A = 2 (Single Parent Family Allowance)

SI325C How much did you receive last week from the Single Parent Family Allowance scheme?

€0....€300

98. DK

99. RF

IF SI325A = 3 (Family Income Supplement)

SI325D How much did you receive last week from the Family Income Supplement scheme?

€0....€300

98. DK

99. RF

IF SI325A = 4 (Deserted Wife's Allowance)

SI325E How much did you receive last week from the Deserted Wife's Allowance scheme?

€0....€300

98. DK

99. RF

IWER: SHOW CARD SI5

SI326: Please look at card SI5. Did you or your spouse/partner receive any of these types of benefits in the last 12 months?

IWER: CODE ALL THAT APPLY

- | | | |
|-------------------------------------|--------------------|-----------|
| 1. Free travel | GO TO SI327 | [si326_1] |
| 2. Free Television Licence | GO TO SI328 | [si326_2] |
| 3. Telephone Rental Allowance | GO TO SI328 | [si326_3] |
| 4. Free Electricity Allowance | GO TO SI328 | [si326_4] |
| 5. Free Natural Gas | GO TO SI328 | [si326_5] |
| 6. Free Bottled Gas Refill Vouchers | GO TO SI328 | [si326_6] |
| 96. None of these | GO TO SI328 | [si326_9] |
| 98. DK | GO TO SI328 | [si326_7] |
| 99. RF | GO TO SI328 | [si326_8] |
- (TILDA)

SI327: Approximately how much have you or your spouse/partner saved over the last 4 weeks by using your free travel pass?

€0.00... €500

98. DK

99. RF

(EU-SILC)

SI328: Have you received a social welfare payment from another country in the last 12 months?

1. Yes **GO TO SI329**

5. No **GO TO SI401**

98. DK **GO TO SI401**

99. RF **GO TO SI401**

(EU-SILC)

SI329: What was the total foreign social welfare payment you received during the last 12 months (in Euros)?

€0... €5,000

98. DK

99. RF

(EU-SILC)

Other sources of income

SI401: Did you receive any payments from your life insurance policy in the last 12 months?

1. Yes **GO TO SI402**

5. No **GO TO SI403**

98. DK **GO TO SI403**

99. RF **GO TO SI403**

(ELSA)

SI402: Before taxes, how much did you receive from this life insurance policy in the last 12 months?

€0 ... €1,000,000

98. DK

99. RF

(ELSA)

IWER: SHOW CARD SI6

SI403: Please look at card SI6. Did you receive any payments from other sources, such as other insurance payments, personal accident plan, redundancy payment, trade union payment, retirement gratuity or win(s) on the football pools, national lottery or other form of gambling in the last 12 months?

1. Yes **GO TO SI404**

5. No **GO TO SI405**

98. DK **GO TO SI405**

99. RF **GO TO SI405**

(ELSA)

SI404: Before taxes, how much did you receive from all these payments in the last 12 months?

€0 ... €1,000,000

98. DK

99. RF

(ELSA)

SI405: Have you had any income tax directly refunded by the Revenue Commissioners during the last 12 months?

1. Yes **GO TO SI406**

5. No **GO TO SI407**

98. DK **GO TO SI407**

99. RF **GO TO SI407**

(ELSA)

SI406: How much was refunded?

€0 ... €1,000,000

98. DK

99. RF

(ELSA)

SI407: Finally, we would like to get an indication of the overall economic situation of your household. Could I ask you to think about all the adults (16 years or over) in the household including yourself and your spouse? Which of these people was in receipt of income of any kind during the past twelve months?

IWER: PLEASE IDENTIFY ON THE FOLLOWING LIST ALL THOSE WHO WERE IN RECEIPT OF INCOME DURING THE PAST 12 MONTHS

1. NAME 1

[si407_01 to si407_22]

2. NAME 2

3. NAME 3 ETC

98. DK

[si407_23]

99. RF

[si407_24]

BL: IF SI407 = DK / RF GO TO SI410

SI408: Could you say about how much income *in total* these people received during the last 12 months? I am thinking of the *total* income of the household after tax. An approximate figure is all we need.

€0 ... €2,000,000

98. DK GO TO SI409

99. RF GO TO SI409

(SHARE)

SI409: Did the total household income amount to a figure of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: € 10,000, €20,000, €40,000, €70,000.

RANDOM ENTRY POINTS: €20,000, €40,000.

98. DK

99. RF

SI410

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION SI?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

BL: GO TO HW101

SECTION 17. HOUSE OWNERSHIP (HW)

IWER: CHECK IF RESPONDENT IS FINANCIAL RESPONDENT (CSO17=1 OR 3)

IWER: SHOW CARD HW1

HW101: Please look at card HW1. Now I have a few questions about your place of residence. Is this

IWER: CHOOSE THE ONE THAT APPLIES

- 1. a detached house? **GO TO HW103**
- 2. a semi-detached house? **GO TO HW103**
- 3. a terraced house? **GO TO HW103**
- 4. an apartment/flat/bedsitter? **GO TO HW103**
- 95. Other (specify) **GO TO HW102**
(EU-SILC)

HW102: Other (specify)

Text: up to 60 characters

(EU-SILC)

HW103: How many rooms does your house/apartment/flat/bed-sitter have?

1. 0 ... 99

98. DK

99. RF

(EU-SILC)

Note: The following should not be counted as rooms: kitchenette, scullery, bathroom, toilet, garage, consulting rooms, office, shop.

HW104: In what year was the house/apartment/flat/bed-sitter constructed?

IWER: Date of first construction if dwelling was modified at a later date.

1. Before 1919

2. 1919-1940

3. 1941-1960

4. 1961-1970

5. 1971-1980

6. 1981-1990

7. 1991-2000

8. 2001 or later

98. DK

99. RF

(EU-SILC)

HW105: Is the dwelling...

IWER: IN CASE THE RESPONDENT OWNS HIS/HER HOUSE THROUGH A HOUSING COOPERATIVE PLEASE SELECT CODE 1 BELOW

1. Owned by the respondent or his/her spouse/partner **GO TO HW106**
2. Owned by another household member (not the respondent's spouse/partner) **GO TO HW108**
3. Rented **GO TO HW114**
4. Occupied rent free (but not owned by a household member) **GO TO HW117**
98. DK **GO TO HW117**
99. RF **GO TO HW117**
(SHARE)

HW106: Did you or your spouse/partner receive any rent from this property in the last year?

1. Yes **GO TO HW107**
5. No **GO TO HW108**
98. DK **GO TO HW108**
99. RF **GO TO HW108**
(SHARE)

HW107: How much income or rent did you or your spouse/partner receive from that property in the last year, after any expenses and taxes?

€1...€100,000

98. DK
99. RF
(SHARE)

HW108: In your opinion, about how much would this house/apartment/flat/bed-sitter today fetch if it were to be sold today?

€1 ... €10,000,000

98. DK
99. RF
(SHARE)

HW108A: Would this amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €100,000, €200,000, €400,000, €700,000.

RANDOM ENTRY POINTS: €200,000, €400,000.

98. DK
99. RF

HW109: Is your house/apartment/flat/bed-sitter

1. Owned outright **GO TO HW117**
2. Owned with a mortgage
(including joint owner rental with the local authority) **GO TO HW110**
3. Owned under the tenant purchase scheme **GO TO HW112**
98. DK **GO TO HW117**
99. RF **GO TO HW117**
(EU-SILC)

HW110: How much is your present monthly mortgage repayment?

IWER: ASK RESPONDENT TO CHECK THIS ON A BANK STATEMENT IF POSSIBLE.

€1...€50,000

98. DK

99. RF

(EU-SILC)

HW111: In what year was your mortgage taken out?

1960 ... [current year]

98 DK

99. RF

(EU-SILC)

HW112: What is the term of your mortgage (in years)?

IWER: PLEASE ASK FOR THE FULL TERM OF THE MORTGAGE, NOT THE OUTSTANDING YEARS

0 ... 40

98. DK

99. RF

(EU-SILC)

HW113: Excluding interest, how much of the principal amount remains outstanding?

IWER: IF THE RESPONDENT RE-MORTGAGED, THEN THIS QUESTION ASKS THE AMOUNT OF THE ORIGINAL MORTGAGE THAT IS OUTSTANDING.

€0...€5,000,000

98. DK

99. RF

(EU-SILC)

BL: GO TO HW117

HW114: Do you rent this house/apartment/flat/bed-sitter from your Local Authority?

1. Yes **GO TO HW115**

5. No **GO TO HW116**

98. DK **GO TO HW117**

99. RF **GO TO HW117**

(EU-SILC)

HW115: How much rent do you pay weekly to the local authority?

€0.00 ... €500

98. DK

99. RF

(EU-SILC)

BL: GO TO HW117

HW116: How much rent did you pay (before rent allowances, if applicable) in the last month?

€0 ... €10,000

98. DK

99. RF

(EU-SILC)

HW117

IWER(CODE WITHOUT ASKING): HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION HW?

- 1. NEVER**
- 2. A FEW TIMES**
- 3. MOST OR ALL OF THE TIME**

BL: GO TO AS101

SECTION 18. OTHER ASSETS (AS)

IWER: CHECK IF RESPONDENT IS FINANCIAL RESPONDENT (CSO17=1 OR 3)

INTRO: We've already talked about your sources of income and I explained how important it is for us to obtain good information about people's financial situation. To complete the picture, I'd now like to ask some questions about your overall financial resources. This information is vital to our study. As I have already mentioned, your answers to these questions will, like all the information you give, be kept strictly confidential and will only be used for research purposes. They will not be passed on in an identifiable way to any other organisation or individual.

AS101: If you added up all the deposit or saving accounts you and/or your spouse/partner currently own, about how much would they amount to right now?

€0 ... €5,000,000

98. DK

99. RF

(SHARE)

BL:

AS102: Before taxes, how much interest did you and/or your spouse/partner receive from these accounts in the last 12 months?

€0 ... €500,000

98. DK

99. RF

(SHARE)

IWER: SHOW CARD AS1

AS103: Please look at card AS1. Think of other financial assets you and/or your spouse/partner might currently own, such as, life insurance (current cash value), mutual funds, bonds or shares. If you added up all the money you have in any of these how much would this amount to right now?

IWER: IF RESPONDENT HAS NO ASSETS PLEASE CODE 0.

€0 ... €5,000,000 **GO TO AS105**

98. DK **GO TO AS104**

99. RF **GO TO AS104**

(SHARE/TILDA)

BL: IF AS103=0 GO TO AS106

Note: Housing or any other property should not be considered as financial assets.

AS104: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €5,000, €7,500, €10,000, €20,000.

RANDOM ENTRY POINTS: €7,500, €10,000.

98. DK

99. RF

AS105: Before taxes, how much interest and/or dividend did you receive from all these assets in the last 12 months?

€0 ... €500,000

98. DK

99. RF

(SHARE/TILDA)

AS106: Do you and/or your spouse/partner own one or more cars?

1. Yes **GO TO AS107**

5. No **GO TO AS109**

98. DK **GO TO AS109**

99. RF **GO TO AS109**

(ELSA/TILDA)

AS107: How many cars do you and/or your spouse/partner own? Please exclude company cars.

1..10

98. DK

99. RF

(ELSA)

AS108: If you and/or your spouse/partner sold this/these car(s) and paid off any debts that you may have on it/them, about how much would be left?

€0...€100,000

98. DK

99. RF

(ELSA)

AS109: Do you and/or your spouse/partner own any other houses, flats or holiday homes (excluding timeshares) besides your current residence?

1. Yes **GO TO AS110**

5. No **GO TO AS112**

98. DK **GO TO AS112**

99. RF **GO TO AS112**

(ELSA/TILDA)

AS110: How much income or rent did you and/or your spouse/partner receive from that property in the last year, after any expenses and taxes?

IWER: IF RESPONDENT HAS RECEIVED NO RENT OR INCOME CODE 0

€0...€500,000

98. DK

99. RF

(SHARE)

AS111: If you sold all that property about how much would you and/or your spouse/partner get?

€0 ... €10,000,000

98. DK

99. RF

(SHARE)

IWER: SHOW CARD AS2.

AS112. We have now talked about various types of property or assets that you and/or your spouse might own, including savings, equities, houses, cars etc. Please look at card AS2. This card shows **other** types of assets such as land, a firm or business, an inheritance or money owed to you, etc. If you and/or your spouse own any of these other assets, could you please tell me how much in total they would be worth right now?

IWER: IF RESPONDENT HAS NO ASSETS PLEASE CODE 0.

€0 ... €10,000,000 **GO TO AS114**

98. DK **GO TO AS113**

99. RF **GO TO AS113**

(SHARE/TILDA)

BL: IF AS112=0 GO TO AS116

AS113: Did it amount to a total of less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €10,000, €100,000, €250,000, €500,000.

RANDOM ENTRY POINTS: €100,000, €250,000.

98. DK

99. RF

AS114: Did you and/or your spouse/partner receive any income from those assets in the last 12 months?

1. Yes **GO TO AS115**

5. No **GO TO AS116**

98. DK **GO TO AS116**

99. RF **GO TO AS116**

(ELSA/TILDA)

AS115: In the last 12 months, how much income did you and/or your spouse/partner receive from these assets?

€0 ... €500,000

98. DK

99. RF

(ELSA/TILDA)

AS116: Excluding any mortgage you might have on your primary residence, how much do you and/or your spouse/partner currently owe?

€0 ... €10,000,000

98. DK

99. RF

Note: This can include debt on cars and other vehicles, overdue bills (phone, electricity, heating), overdue credit cards/store card bills, other loans (from bank, building society or other financial institution), debts to relatives or friends, or student loans.

(SHARE/TILDA)

AS117

IWER(CODE WITHOUT ASKING): HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION AS?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL OF THE TIME

BL: GO TO EX101

SECTION 19. EXPECTATIONS (EX)

INTRO: Now, I have some questions about how likely you think various events might be.

IWER: SHOW CARD EX1

EX101. Using the scale on this card, what is the percent chance that you will live to be

IWER: CODE PERCENTAGE GIVEN BY RESPONDENT

75 IF AGE IS LESS THAN 65

80 IF AGE IS 65-69

85 IF AGE IS 70-74

90 IF AGE IS 75-79

95 IF AGE IS 80-84

100 IF AGE IS 85-89

110 IF AGE IS 90 OR OVER

0...100

98. DK

99. RF

(HRS)

BL: IF Rs' AGE <62 GO TO EX102

BL: IF (Rs' AGE >=62 AND <65) GO TO EX103

BL: IF Rs' AGE >=65 GO TO EX104

IWER: SHOW CARD EX1

EX102. Using the same scale, what are the chances you will be working full-time after you reach age 62?

IWER: CODE PERCENTAGE GIVEN BY RESPONDENT

0...100

98. DK

99. RF

(SHARE)

BL: IF Rs' AGE <65 GO TO EX103

BL: IF Rs' AGE >=65 GO TO EX104

IWER: SHOW CARD EX1

EX103. Using the same scale, what are the chances you will be working full-time after you reach age 65?

IWER: CODE PERCENTAGE GIVEN BY RESPONDENT

0...100

98. DK

99. RF

(SHARE)

IWER: SHOW CARD EX1

EX104. Using the same scale, what are the chances that you will move to a nursing home in the next five years?

IWER: CODE PERCENTAGE GIVEN BY RESPONDENT

0...100

98. DK

99. RF

(HRS)

Note: Nursing homes are institutions primarily for people who need constant nursing supervision or are incapable of living independently. Nursing supervision must be provided on a continuous basis for the institution to qualify as a nursing home. Please don't include stays in adult foster care facilities or other short-term stays in a hospital.

BL:

IF Rs' AGE <75 – GO TO EX105

IF Rs' AGE >75 – GO TO EX107

IWER: SHOW CARD EX1

EX105. Using the same scale, and assuming you will still be alive at age 75, what are the chances that your health will allow you to live independently? By that, I mean to live at home without help and to manage your own affairs?

IWER: CODE PERCENTAGE GIVEN BY RESPONDENT

0...100

98. DK

99. RF

(HRS)

IWER: SHOW CARD EX1

EX106. Using the same scale, and assuming you will still be alive at age 75, what are the chances that you will be free of serious memory or reasoning problems? By that I mean problems that would interfere with your ability to manage your own affairs?

IWER: CODE PERCENTAGE GIVEN BY RESPONDENT

0...100

98. DK

99. RF

(HRS)

EX107:

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION EX?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL TIMES

BL: GO TO DR001

SECTION 20. DRIVING/TRAVEL (DR):

IWER: SHOW CARD DR1

DR001. I'd now like to ask about how you get around. Please look at Card DR1. Within the past twelve months, which of these methods of transport have you used regularly (i.e. more than twice)?

IWER: Code all that apply

- | | | |
|-----|---|------------|
| 1. | Bicycle/ motorbike | [dr001_01] |
| 2. | Drive myself | [dr001_02] |
| 3. | Driven as passenger by family | [dr001_03] |
| 4. | Driven as passenger by friends | [dr001_04] |
| 5. | Public bus (city or urban) | [dr001_05] |
| 6. | Public bus (intercity) | [dr001_06] |
| 7. | Public bus (rural) | [dr001_07] |
| 8. | Taxi/hackney | [dr001_08] |
| 9. | DART/Luas | [dr001_09] |
| 10. | Train (commuter) | [dr001_10] |
| 11. | Train (intercity) | [dr001_11] |
| 12. | Bus operating as part of the rural transport scheme | [dr001_12] |
| 13. | None of these | [dr001_15] |
| 98. | DK | [dr001_13] |
| 99. | RF | [dr001_14] |

DR002. Which of these methods of transport do you use most often?

IWER: Code one.

IF DR001 not coded 2 (drive myself) go to DR005

DR003. In an average week, how often do you drive?

READ OUT

- 1. Not at all
- 2. One or two days per week
- 3. Three to four days per week
- 4. Five or six days per week
- 5. Every day
- 98. DK
- 99. RF

DR004. Do you drive less now compared to five years ago?

- 1. Yes Go TO DR008
- 5. No GO TO DR013
- 98. DK GO TO DR013
- 99. RF GO TO DR013

DR005. Did you use you drive in the past?

- 1. Yes GO TO DR006
- 5. No GO TO DR013
- 98. DK
- 99. RF

DR006. Do you have a valid driver's licence?

- 1. Yes
- 5. No
- 98. DK
- 99. RF

DR007. Are you currently insured to drive a car?

- 1. Yes
- 5. No
- 98. DK
- 99. RF

DR008.

IF USED TO DRIVE IN THE PAST BUT NOT NOW (DR005 = 1)

"What was it that caused you to stop driving?"

IF THE RESPONDENT DRIVES LESS NOW THAN FIVE YEARS AGO (DR004 = 1)

"What was it that caused you to reduce the amount you drive?"

TICK ALL THAT APPLY.

- | | |
|--|------------|
| 1. Problems with eyesight/Visual impairment | [dr008_01] |
| 2. Problems with Hearing/Hearing impairment | [dr008_02] |
| 3. Physical incapacity | [dr008_03] |
| 4. Memory problems | [dr008_04] |
| 5. Do not want to anymore | [dr008_05] |
| 6. Told by doctor | [dr008_06] |
| 7. Told by family | [dr008_07] |
| 8. It became too expensive | [dr008_08] |
| 9. Other reason not related to health/capacity | [dr008_09] |
| 98. DK | [dr008_10] |
| 99. RF | [dr008_11] |

DR009. When was the last time that you drove?

- 1. -----month ----- year **[dr009 and dr009m]**
- 98. DK
- 99. RF

DR010. Over the past 12 months, how often has [not driving / reduced driving] affected how you socialise with others, like visiting family and friends?

READ OUT

- 1. Never
- 2. Rarely
- 3. Some of the time
- 4. Most of the time
- 5. All of the time
- 98. DK
- 99. RF

DR011. Over the past 12 months, how often has [not driving / reduced driving] affected your ability to go about your business such as doing the shopping, going to the post-office, visiting the bank, attending the church etc.

READ OUT

- 1. Never
- 2. Rarely
- 3. Some of the time
- 4. Most of the time
- 5. All of the time
- 98. DK
- 99. RF

DR012. Over the past 12 months, how often has [not driving / reduced driving] affected your ability to attend health and social care appointments such as out-patient clinics at the hospital?

READ OUT

- 1. Never
- 2. Rarely
- 3. Some of the time
- 4. Most of the time
- 5. All of the time
- 98. DK
- 99. RF

DR013. How would you rate overall **private** transport options in your neighbourhood such as taxis and hackneys?

READ OUT

- 1. Very poor
- 2. Poor
- 3. Fair
- 4. Good
- 5. Excellent
- 98. DK
- 99. RF

DR014. How would you rate overall **public** transport options in your neighbourhood such as trains, public buses and community buses?

READ OUT

1. Very poor
2. Poor
3. Fair
4. Good
5. Excellent
98. DK
99. RF

DR015. Does the lack of transport facilities in your area affect your lifestyle?

READ OUT

1. A great deal
2. To some extent
3. Not at all
98. DK
99. RF

DR016. What would you consider are **the most important improvements** that could be made to the transport options available to you?

IWER: PROBE 'Anything else?'

DR017:

IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION DR?

- 1. NEVER**
- 2. A FEW TIMES**
- 3. MOST OR ALL TIMES**

BL: GO TO NEXT SECTION

SECTION 21. MEDICATIONS (MD)

MD001: Now I would like to record all medications that you take on a regular basis, like every day or every week. This will include prescription and non-prescription medications, over-the-counter medicines, vitamins, and herbal and alternative medicines.

IWER: ASK RESPONDENT IF YOU COULD SEE THE MEDICATIONS HE/SHE TAKES SO YOU CAN COPY DOWN THE CORRECT SPELLING OF EACH TABLET.

1. [md001a_1 to md001a_10 – 4 digit code]
2. [md001b_1 to md001b_10 – name of medication]
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

IWER: PROMPT: DO I HAVE ALL OF YOUR MEDICATIONS HERE?

Only ask MD002 TO MD004 if HU001 is 1 or 2

MD002

IWER: Some studies like TILDA link the information they collect with official health records to provide a complete picture about the health and treatment history of the participant.

Would you be happy to provide us with your medical card number for this purpose?

1. Yes **Go to MD003**

5. No

98. DK

99. RF

IWER: Ask the respondent to show you their medical card so that the correct number can be recorded by you.

MD003:

Please can you tell me your medical card number?

1...20 **Go to MD004**

IWER: Please ensure that the letter at the end of the medical card number is recorded.

MD004: IWER code how you recorded the medical number

1. respondent showed interviewer medical card
2. respondent provided number but did not show medical card

BL: GO TO CS035

SECTION 22. CONTACT NAMES (CT)

CS035: Can you give me the name, address, telephone number and relationship of two persons who do not live with you and who would know where you are, in case we need to contact you in the future?

NAME - Text: Up to 60 characters

ADDRESS - Text: Up to 100 characters

TELEPHONE NUMBER - Text: Up to 20 characters

RELATIONSHIP - Text: Up to 20 characters

98. DK

99. RF

NAME - Text: Up to 60 characters

ADDRESS - Text: Up to 100 characters

TELEPHONE NUMBER - Text: Up to 20 characters

RELATIONSHIP - Text: Up to 20 characters

98. DK

99. RF

SECTION 23. HEALTH ASSESSMENT (HA)

HA001: READ OUT There are two parts to this survey. You have just helped us with the first part. We hope you will also help us with the second part, which is a visit to a health centre to collect more medical information and carry out some physical measurements. (IWER Inform respondent about the location of the health centres in Dublin and Cork) With your permission, I would like to make an appointment for you with the nurse at the health assessment centre

INTERVIEWER: REFER THE RESPONDENT TO THE HEALTH INFORMATION BOOKLET AND SAY IF ASKED FOR DETAILS THAT - 'THE NURSE WILL TAKE SOME MEASUREMENTS INCLUDING YOUR HEIGHT, WEIGHT AND BLOOD PRESSURE ETC. YOU WILL NOT HAVE ANY MEASUREMENTS TAKEN IF YOU DO NOT WISH TO'. EXPLAIN WHERE THE LAB IS LOCATED AND THAT THE STUDY WILL ARRANGE AND PAY FOR THEIR TRANSPORT TO AND FROM THE ASSESSMENT CENTRE.

- | | |
|---|--------------------|
| 1 Yes to visit to health assessment centre | Go to HA002 |
| 2 No to visit to health assessment centre | Go to HA003 |
| 3 Undecided, nurse to phone to discuss health assessment in more detail | Go to HA002 |

HA002: IWER: Phone health centre executive officer to arrange a visit to the health centre at a time and date that suits the respondent. If after 5:30 pm leave a message on the answering service containing respondent's TILDA Serial Number (XX999), name, address, telephone number and preferred date and time for visit. Inform the respondent that the TILDA executive officer will phone back to arrange an appointment the following day. If an appointment is made fill in details on the appointment card and give to respondent. Explain to the respondent that the executive officer will call 2 days in advance to confirm the appointment and answer any questions the respondent may have. Don't forget to leave the health information leaflet. If the respondent is undecided and wants to speak with a nurse, then leave instructions regarding respondent's TILDA Serial Number (XX999), name, address and telephone number on the answering service and inform the respondent that they will be called by a nurse on the following day.

1. Health assessment appointment arranged by you
2. Health assessment appointment to be arranged by executive officer on following day
3. Respondent to be phoned back by nurse to discuss health assessment further

GO TO END OF SECTION

- HA003: **IWER:** Record reason why respondent refused visit to health centre
- 0 Own doctor already has information **GO TO HA004** [ha003_1]
 - 1 Given enough time already to this survey/expecting too much
GO TO HA004 [ha003_2]
 - 2 Too busy, cannot spare the time (if Code 1 does not apply)
GO TO HA004 [ha003_3]
 - 3 Had enough of medical tests/medical profession at present time
GO TO HA004 [ha003_4]
 - 4 Worried about what nurse may find out/'might tempt fate'
GO TO HA004 [ha003_5]
 - 5 Scared/of medical profession/ particular medical procedures
(e.g. blood sample) **GO TO HA004** [ha003_6]
 - 6 Not interested/Can't be bothered/ **GO TO HA004** [ha003_7]
 - 7. Unable to attend due to mobility problems **GO TO HA004** [ha003_8]
 - 7. Other reason (specify) **GO TO HA004** [ha003_9]

IWER: Please specify other reason for refusal. [ha003oth]

HA004: INTERVIEWER: IF THE RESPONDENT IS UNWILLING OR UNABLE TO VISIT THE HEALTH ASSESSMENT CENTRE YOU SHOULD OFFER THEM A HOME ASSESSMENT BY A TRAINED NURSE. SHOW THEM THE HEALTH INFORMATION BOOKLET AND EXPLAIN THAT A TRAINED NURSE WILL VISIT THEIR HOME AT A TIME THAT BEST SUITS THEM TO CARRY OUT A SHORTENED MEDICAL ASSESSMENT.

Would you be happy for a nurse to visit your home to carry out a health assessment?

- 1 Yes to home health assessment **Go to HA005**
- 2 No to home health assessment **Go to HA006**
- 3 Undecided, nurse to phone to discuss health assessment in more detail **Go to HA005**

HA005: IWER: Phone health centre executive officer and inform her that a respondent has agreed to a home assessment. Pass on the TILDA Serial Number (XX999) name, address, telephone number. If after 5.30pm leave a message on the answering service containing respondent's details. Inform the respondent that their nurse will phone back to arrange an appointment sometime during the next few weeks. Don't forget to leave the health information leaflet. If the respondent is undecided and wants to speak with a nurse, then leave instructions regarding the TILDA Serial Number (XX999), name, address and telephone number on the answering service and inform the respondent that they will be called by a nurse on the following day.

- 1. Spoke to executive officer about home assessment
- 2. Left a message for executive officer about home assessment
- 3. Respondent to be phoned back by nurse to discuss health assessment further

HA006: **IWER:** Record reason why respondent refused visit by a nurse to the home.

- | | |
|--|-----------|
| 0 Own doctor already has information | [ha006_1] |
| 1 Given enough time already to this survey/expecting too much | [ha006_2] |
| 2 Too busy, cannot spare the time (if Code 1 does not apply) | [ha006_3] |
| 3 Had enough of medical tests/medical profession at present time | [ha006_4] |
| 4 Worried about what nurse may find out/'might tempt fate' | [ha006_5] |
| 5 Scared/of medical profession/ particular medical procedures
(e.g. blood sample) | [ha006_6] |
| 6 Not interested/Can't be bothered/ | [ha006_7] |
| 7. Unable to attend due to mobility problems | [ha006_8] |
| 7. Other reason (specify) | [ha006_9] |

IWER: Please specify other reason for refusal. [ha006oth]

IWER: END OF QUESTIONNAIRE. THANK RESPONDENT

IWER: SUPPLY RESPONDENT WITH SELF-COMPLETION QUESTIONNAIRE

SECTION 24: FINAL CHECK (FN)

FN001. Check respondent's first name and surname

FN002. Check address as written on the HSS is correct. If not correct, then write changes on Address label

ABOUT THIS QUESTIONNAIRE

This questionnaire is a part of The Irish Longitudinal Study on Ageing (TILDA). We greatly value your participation in our study, and we hope that you will find this questionnaire interesting to complete. Your answers are extremely important to us. Please remember that your participation is voluntary and that you may skip over any questions that you would prefer not to answer.

How to fill in this questionnaire

Please answer the questions by:

Ticking a box like this



Or writing a number in a box like this



Or circling an answer like this: 1 2 (3) 4 5

Sometimes you will find an instruction

telling you which questions to answer next like this:

YES



NO



Go to

1

How to return this questionnaire

Please give the questionnaire to the interviewer or post it back in the envelope provided.

If you have any questions about the questionnaire, please feel free to call us at **01 896 4120**.

1. WE WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT PARTICIPATION IN SOCIAL ACTIVITIES. HOW OFTEN, IF AT ALL, DO YOU DO ANY OF THE FOLLOWING ACTIVITIES?

PLEASE TICK ONE BOX PER LINE.	DAILY/ ALMOST DAILY	ONCE A WEEK OR MORE	TWICE A MONTH OR MORE	ABOUT ONCE A MONTH	EVERY FEW MONTHS	ABOUT ONCE OR TWICE A YEAR	LESS THAN ONCE A YEAR	NEVER
Watch television.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Go out to films, plays and concerts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attend classes and lectures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel for pleasure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work in the garden, or your home, or on a car.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Read books or magazines for pleasure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listen to music, radio.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spend time on hobbies or creative activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Play cards, bingo, games in general.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Go to the pub.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eat out of the house.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participate in sport activities or exercise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visits to or from family or friends, either in person or talking on the phone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do voluntary work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. HERE IS A LIST OF STATEMENTS THAT PEOPLE HAVE USED TO DESCRIBE THEIR LIVES OR HOW THEY FEEL. HOW OFTEN DO YOU FEEL LIKE THIS?

PLEASE TICK ONE BOX PER LINE.

OFTEN

SOMETIMES

RARELY

NEVER

My age prevents me from doing the things I would like to.

☐
☐
☐
☐

I feel that what happens to me is out of my control.

☐
☐
☐
☐

I feel free to plan for the future.

☐
☐
☐
☐

I feel left out of things.

☐
☐
☐
☐

I can do the things that I want to do.

☐
☐
☐
☐

Family responsibilities prevent me from doing what I want to do.

☐
☐
☐
☐

I feel that I can please myself in what I can do.

☐
☐
☐
☐

My health stops me from doing the things I want to do.

☐
☐
☐
☐

Shortage of money stops me from doing the things that I want to do.

☐
☐
☐
☐

I look forward to each day.

☐
☐
☐
☐

I feel that my life has meaning.

☐
☐
☐
☐

I enjoy the things that I do.

☐
☐
☐
☐

I enjoy being in the company of others.

☐
☐
☐
☐

On balance, I look back on my life with a sense of happiness.

☐
☐
☐
☐

I feel full of energy these days.

☐
☐
☐
☐

I choose to do things that I have never done before.

☐
☐
☐
☐

I feel satisfied with the way my life has turned out.

☐
☐
☐
☐

I feel that life is full of opportunities.

☐
☐
☐
☐

I feel that the future looks good for me.

☐
☐
☐
☐

3. THE NEXT QUESTIONS ARE ABOUT HOW YOU FEEL ABOUT DIFFERENT ASPECTS OF YOUR LIFE. FOR EACH ONE, PLEASE SAY HOW OFTEN YOU FEEL THAT WAY.

PLEASE TICK ONE BOX PER LINE.	OFTEN	SOME OF THE TIME	HARDLY EVER OR NEVER
How often do you feel you lack companionship?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often do you feel left out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often do you feel isolated from others?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often do you feel in tune with the people around you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often do you feel lonely?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. DID YOU VOTE IN THE LAST GENERAL ELECTION?

PLEASE TICK ONE BOX

YES ☐

NO ☐

5. THE NEXT FOUR QUESTIONS ARE ABOUT HOW YOU HAVE FELT IN THE PAST MONTH.

PLEASE TICK ONE BOX PER LINE.	HARDLY EVER	ALMOST NEVER	SOME TIMES	FAIRLY OFTEN	VERY OFTEN
In the last month, how often have you felt that you were unable to control the important things in your life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the last month, how often have you felt confident about your ability to handle your personal problems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the last month, how often have you felt that things were going your way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. DO YOU HAVE A HUSBAND, WIFE OR PARTNER WITH WHOM YOU LIVE?

PLEASE TICK ONE BOX

YES ☐

NO ☐ GO TO **9**

7. WE WOULD NOW LIKE TO ASK YOU SOME QUESTIONS ABOUT YOUR SPOUSE OR PARTNER.

PLEASE TICK ONE BOX PER LINE WHICH BEST SHOWS HOW YOU FEEL ABOUT EACH STATEMENT.

A LOT SOME A LITTLE NOT AT ALL

How much does he/she really understand the way you feel about things?

☐
☐
☐
☐

How much can you rely on him/her if you have a serious problem?

☐
☐
☐
☐

How much can you open up to him/her if you need to talk about your worries?

☐
☐
☐
☐

How much does he/she make too many demands on you?

☐
☐
☐
☐

How much does he/she criticise you?

☐
☐
☐
☐

How much does he/she let you down when you are counting on him/her?

☐
☐
☐
☐

How much does he/she get on your nerves?

☐
☐
☐
☐

8. HOW CLOSE IS YOUR RELATIONSHIP WITH YOUR SPOUSE OR PARTNER?

PLEASE TICK ONE BOX

VERY CLOSE

☐

QUITE CLOSE

☐

NOT VERY CLOSE

☐

NOT AT ALL CLOSE

☐

9. DO YOU HAVE ANY CHILDREN?

PLEASE TICK ONE BOX

YES ☐

NO ☐ GO TO **11**

10. WE WOULD NOW LIKE TO ASK YOU SOME QUESTIONS ABOUT YOUR CHILDREN.

PLEASE TICK ONE BOX PER LINE WHICH BEST SHOWS HOW YOU FEEL ABOUT EACH STATEMENT.

A LOT SOME A LITTLE NOT AT ALL

How much do they really understand the way you feel about things?

☐☐☐☐

How much can you rely on them if you have a serious problem?

☐☐☐☐

How much can you open up to them if you need to talk about your worries?

☐☐☐☐

How much do they make too many demands on you?

☐☐☐☐

How much do they criticise you?

☐☐☐☐

How much do they let you down when you are counting on them?

☐☐☐☐

How much do they get on your nerves?

☐☐☐☐

11. APART FROM YOUR SPOUSE/PARTNER AND CHILDREN (IF ANY), DO YOU HAVE ANY OTHER FAMILY MEMBERS (SUCH AS BROTHERS, SISTERS, PARENTS, COUSINS ETC)?

PLEASE TICK ONE BOX

YES ☐

NO ☐ GO TO **13**

12. WE WOULD NOW LIKE TO ASK YOU SOME QUESTIONS ABOUT THESE FAMILY MEMBERS.

PLEASE TICK ONE BOX PER LINE WHICH BEST SHOWS HOW YOU FEEL ABOUT EACH STATEMENT.

	A LOT	SOME	A LITTLE	NOT AT ALL
How much do they really understand the way you feel about things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much can you rely on them if you have a serious problem?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much can you open up to them if you need to talk about your worries?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much do they make too many demands on you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much do they criticise you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much do they let you down when you are counting on them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much do they get on your nerves?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. WE WOULD NOW LIKE TO ASK YOU SOME QUESTIONS ABOUT YOUR FRIENDS.

PLEASE TICK ONE BOX PER LINE WHICH BEST SHOWS HOW YOU FEEL ABOUT EACH STATEMENT.	A LOT	SOME	A LITTLE	NOT AT ALL
How much do they really understand the way you feel about things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much can you rely on them if you have a serious problem?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much can you open up to them if you need to talk about your worries?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How often do they make too many demands on you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much do they criticise you?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much do they let you down when you are counting on them?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How much do they get on your nerves?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. FOR SOME PEOPLE SEX IS A VERY IMPORTANT PART OF THEIR LIVES AND FOR OTHERS IT IS NOT VERY IMPORTANT AT ALL. HOW IMPORTANT A PART OF YOUR LIFE WOULD YOU SAY THAT SEX IS?

PLEASE TICK ONE BOX

EXTREMELY IMPORTANT	<input type="checkbox"/>
VERY IMPORTANT	<input type="checkbox"/>
MODERATELY IMPORTANT	<input type="checkbox"/>
SOMEWHAT IMPORTANT	<input type="checkbox"/>
NOT AT ALL IMPORTANT	<input type="checkbox"/>

15. PLEASE INDICATE HOW WELL THE FOLLOWING STATEMENTS CURRENTLY DESCRIBE YOUR FEELINGS. PLEASE CHOOSE ONE RESPONSE FROM THE FOUR GIVEN FOR EACH STATEMENT. YOU SHOULD GIVE AN IMMEDIATE RESPONSE AND NOT THINK TOO LONG ABOUT YOUR ANSWER.

	PLEASE TICK ONE BOX
I feel tense or “wound up”.	
1. Most of the time.	<input type="checkbox"/>
2. A lot of the time.	<input type="checkbox"/>
3. From time to time, occasionally.	<input type="checkbox"/>
4. Not at all.	<input type="checkbox"/>
I get a sort of frightened feeling as if something awful is about to happen.	
1. Very definitely and quite badly.	<input type="checkbox"/>
2. Yes but not too badly.	<input type="checkbox"/>
3. A little but it doesn’t worry me.	<input type="checkbox"/>
4. Not at all.	<input type="checkbox"/>
Worrying thoughts go through my mind.	
1. A great deal of the time.	<input type="checkbox"/>
2. A lot of the time.	<input type="checkbox"/>
3. From time to time but not too often.	<input type="checkbox"/>
4. Only occasionally.	<input type="checkbox"/>

PLEASE TICK
ONE BOX

I can sit at ease and feel relaxed.

1. Definitely.

☐

2. Usually.

☐

3. Not often.

☐

4. Not at all.

☐

I get a sort of frightened feeling like “butterflies” in the stomach.

1. Not at all.

☐

2. Occasionally.

☐

3. Quite often.

☐

4. Very often.

☐

I feel restless as if I have to be on the move.

1. Very much indeed.

☐

2. Quite a lot.

☐

3. Not very much.

☐

4. Not at all.

☐

I get sudden feelings of panic.

1. Very often indeed.

☐

2. Quite a lot.

☐

3. Not very often.

☐

4. Not at all.

☐

16. FOR EACH OF THE FOLLOWING EVENTS, PLEASE INDICATE WHETHER THE EVENT OCCURRED AT ANY POINT IN YOUR LIFE. IF THE EVENT DID HAPPEN, PLEASE INDICATE THE YEAR IN WHICH IT HAPPENED MOST RECENTLY.

PLEASE TICK ONE BOX PER LINE.

USE 4 DIGITS FOR THE YEAR, I.E. 1999 OR 2007

YES

NO

IF 'YES', WHAT
YEAR?

Have you ever been in a major fire, flood or other natural disaster?

☐
☐

Has your spouse, partner, or child ever been addicted to drugs or alcohol?

☐
☐

Were you the victim of a serious physical attack or assault in your life?

☐
☐

Did you ever have a life-threatening illness or accident?

☐
☐

Did your spouse, partner, or a child of yours ever have a life-threatening illness or accident?

☐
☐

Has a child of yours ever died?

☐
☐

Before you were 18 years old, did you have to repeat a year of school over again?

☐
☐

Before you were 18 years old, did either of your parents drink or use drugs so often that it caused problems in the family?

☐
☐

Before you were 18 years old, were you ever physically abused by either of your parents?

☐
☐

Before you were 18 years old, were you ever physically abused by anyone other than your parents?

☐
☐

Before you were 18 years old, were you ever sexually abused by either of your parents?

☐
☐

Before you were 18 years old, were you ever sexually abused by anyone other than your parents?

☐
☐

17. HAVE ANY OF YOUR CLOSE FRIENDS DIED IN THE PAST FIVE YEARS?

PLEASE TICK ONE BOX

YES ☐

NO ☐

18. DO YOU DRINK ALCOHOL?

PLEASE TICK ONE BOX

YES ☐

NO ☐ GO TO 26

19. DURING THE LAST SIX MONTHS, HOW OFTEN HAVE YOU DRUNK ANY ALCOHOLIC BEVERAGES, LIKE BEER, CIDER, WINE, SPIRITS OR COCKTAILS?

	PLEASE TICK ONE BOX
1. Almost every day.	<input type="checkbox"/>
2. Five or six days a week.	<input type="checkbox"/>
3. Three or four days a week.	<input type="checkbox"/>
4. Once or twice a week.	<input type="checkbox"/>
5. Once or twice a month.	<input type="checkbox"/>
6. Less than once a month.	<input type="checkbox"/>
7. Not at all in the last 6 months.	<input type="checkbox"/>

20. DURING THE LAST SIX MONTHS, HOW OFTEN HAVE YOU HAD MORE THAN TWO DRINKS IN A SINGLE DAY? (A DRINK IS A HALF PINT OF BEER OR A GLASS OF WINE)

PLEASE TICK ONE BOX

1. Almost every day.

☐

2. Five or six days a week.

☐

3. Three or four days a week.

☐

4. Once or twice a week.

☐

5. Once or twice a month.

☐

6. Less than once a month.

☐

7. Not at all in the last 6 months.

☐

21. DURING THE LAST SIX MONTHS, ON THE DAYS YOU DRINK, ABOUT HOW MANY DRINKS DO YOU HAVE?

22. HAVE YOU EVER FELT THAT YOU SHOULD CUT DOWN ON DRINKING?

PLEASE TICK ONE BOX

YES ☐

NO ☐

23. HAVE PEOPLE EVER ANNOYED YOU BY CRITICISING YOUR DRINKING?

PLEASE TICK ONE BOX

YES ☐

NO ☐

24. HAVE YOU EVER FELT BAD OR GUILTY ABOUT DRINKING?

PLEASE TICK ONE BOX

YES ☐

NO ☐

**25. HAVE YOU EVER TAKEN A DRINK FIRST THING IN THE MORNING TO
STEADY YOUR NERVES OR GET RID OF A HANGOVER?**

PLEASE TICK ONE BOX

YES ☐

NO ☐

26. PLEASE CIRCLE THE ONE NUMBER THAT BEST DESCRIBES HOW TYPICAL OR CHARACTERISTIC EACH ITEM IS OF YOU

PLEASE CIRCLE ONE NUMBER PER LINE

NOT AT ALL TYPICAL SOMEWHAT TYPICAL VERY TYPICAL

1 2 3 4 5

My worries overwhelm me.

1 2 3 4 5

Many situations make me worry.

1 2 3 4 5

I know I should not worry about things, but I just cannot help it.

1 2 3 4 5

When I am under pressure, I worry a lot.

1 2 3 4 5

I am always worrying about something.

1 2 3 4 5

As soon as I finish one task, I start to worry about everything else I must do.

1 2 3 4 5

I have been a worrier all my life.

1 2 3 4 5

I have been worrying about things.

NOT AT ALL TYPICAL

SOMEWHAT TYPICAL

VERY TYPICAL

27. WE ARE INTERESTED IN YOUR OWN PERSONAL VIEWS AND EXPERIENCES ABOUT GETTING OLDER. PLEASE INDICATE YOUR VIEWS ON THE FOLLOWING STATEMENTS (STRONGLY DISAGREE, DISAGREE, NEITHER AGREE NOR DISAGREE, AGREE, OR STRONGLY AGREE).

PLEASE TICK ONE BOX PER LINE WHICH BEST SHOWS HOW YOU FEEL ABOUT EACH STATEMENT	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
I am conscious of getting older all of the time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am always aware of my age.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I always classify myself as old.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am always aware of the fact that I am getting older.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel my age in everything that I do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As I get older I get wiser.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As I get older I continue to grow as a person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As I get older I appreciate things more.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get depressed when I think about how ageing might affect the things that I can do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The quality of my social life in later years depends on me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The quality of my relationships with others in later life depends on me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whether I continue living life to the full depends on me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get depressed when I think about the effect that getting older might have on my social life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As I get older there is much I can do to maintain my independence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whether getting older has positive sides to it depends on me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE TICK ONE BOX PER LINE
THAT BEST DESCRIBES YOUR VIEW
FOR EACH STATEMENT.

	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
Getting older restricts the things that I can do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting older makes me less independent.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting older makes everything a lot harder for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As I get older I can take part in fewer activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As I get older I do not cope as well with problems that arise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Slowing down with age is not something I can control.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How mobile I am in later life is not up to me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have no control over whether I lose vitality or zest for life as I age.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have no control over the effects which getting older has on my social life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get depressed when I think about getting older.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I worry about the effects that getting older may have on my relationships with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I go through cycles in which my experience of ageing gets better and worse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My awareness of getting older comes and goes in cycles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel angry when I think about getting older.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I go through phases of feeling old.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My awareness of getting older changes a great deal from day to day.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I go through phases of viewing myself as being old.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. IF THERE IS ANYTHING YOU WOULD LIKE TO TELL US, PLEASE WRITE IN THE SPACE BELOW. FEEL FREE TO WRITE ON THE BACK OF THIS PAGE OR TO ADD A PAGE IF THIS SPACE IS INSUFFICIENT. WE SHALL BE VERY INTERESTED TO READ WHAT YOU HAVE TO SAY.

THANK YOU VERY MUCH FOR TAKING THE TIME TO ANSWER OUR QUESTIONS. PLEASE GIVE THE QUESTIONNAIRE TO THE INTERVIEWER OR POST IT BACK IN THE ENVELOPE PROVIDED. ALL YOUR ANSWERS WILL REMAIN CONFIDENTIAL.

