## 2010 National Health Interview Survey Quality of Life/Functioning and Disability Supplement (QOL)

The Quality of Life/Functioning and Disability supplement (QOL) fielded with the 2010 NHIS Sample Adult module is part of an international project to develop and test improved measures of functioning. The project is part of a partnership with the Washington Group on Disability Statistics (WG) and the Budapest Initiative on the Measurement of Health State (BI). More information on the WG, the short and extended set of disability questions developed by this group, and testing efforts to date can be found on the NCHS website at http://www.cdc.gov/nchs/washington\_group.htm. More information about the BI can be found at http://www.unece.org/stats/documents/2005.11.health.htm. A set of questions developed by both the WG and BI were included as a supplement (the Disability Questions Tests) in the NHIS from October 2008 through December 2009. The questions included in the 2010 NHIS reflect changes to that set as a result of cognitive testing and analysis of the 2008/2009 questions and data. The question set was further modified for inclusion in the 2011 NHIS (and the supplement was renamed Functioning and Disability). As development and testing of the questions is ongoing, modifications to the questions used in the NHIS will also continue. Additional information on the question set, variables included on the data file and the methodology used to develop the questions will be provided in a separate document in the near future. Check http://www.cdc.gov/nchs/nhis/qualityoflife2010.htm for updates.

Approximately one quarter of the sample adults were randomly selected to receive the 2010 QOL supplement. As a result of the selection process, different weights were generated for these respondents. In addition, a separate, stand-alone public use file was created for the QOL variables, rather than appending these variables to the 2010 Sample Adult file. The file itself contains information about a respondent's functioning in various basic and complex activity domains: vision (difficulty seeing), hearing (difficulty hearing), mobility (difficulty walking, climbing steps, or moving around), upper body (difficulty with self care), learning (difficulty learning), cognition (difficulty remembering or concentrating), affect (feelings of being worried, nervous, or anxious; feelings of being depressed), pain, fatigue (feelings of being very tired or exhausted), and communication (difficulty communicating). The file also contains a set of questions designed to capture an individual's ability to participate in society - a measure of quality of life. Follow-up questions on the degree of difficulty, use of assistive devices, and functioning with assistance were included for most domains.

There are two verbatim fields in the QOL file. These fields contain edited narrative text descriptions of the type of equipment or help the respondent received for getting around (MOBSPEC) and reasons for tiredness (PTIRED4E). The data captured in these fields were edited in order to protect the respondents' confidentiality. Text descriptions used to replace original text that could have resulted in a breach of confidentiality are surrounded by arrows (<>). Grammatical and/or spelling errors were not corrected. The codes "97" (which represents "Refused") and "99" (which represents "Don't know") have also been left in the file. The following additional changes were made to the file in order to protect the respondents' confidentiality:

• Person names (first, middle, and/or surnames or initials) were replaced with <He> or

## <She>;

- Names of commercial operations were replaced with a general category (e.g., the name
  of a restaurant that serves fast food would be replaced with <fast food restaurant>);
- All place names, including cities, counties, states, and street addresses, were removed;
- Brand names were replaced with a generic term for the product (e.g., the brand name of a car would be replaced with <motor vehicle>);
- Text that indicated unusual personal behavior or events was modified to make it less remarkable.

Although approximately one quarter of all sample adults were to be asked the questions in the QOL supplement, some persons did not complete the section. Persons who did not give responses to any of the questions in the section were given a coded value of "1" for the Quality of Life/Functioning and Disability record completion status variable (variable RCS\_QOL), which indicates that their record only contains responses of "not ascertained." These respondents are retained in the file, but they are coded as "8" in all remaining relevant fields of the QOL file. Adults who met the criteria for completing the section were given a coded value of "2" (all answers refused or don't know), "3" (all answers refused, don't know, or not ascertained), or "4" (at least one valid answer) for the record completion status variable (RCS\_QOL).

Many NHIS analysts will want to produce estimates and perform comparisons within key subgroups such as age, sex, and race/ethnicity. This requires merging the Quality of Life/Functioning and Disability File with one or more health data files. Information on merging data files can be found in Appendix VI of the 2010 NHIS Survey Description Document. The weight WTFA\_QOL provided with the Quality of Life File is designed to produce annual-level estimates calculated based on data included in the file.