

ICPSR 37106

The Irish Longitudinal Study on Ageing (TILDA), 2014-2015

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Data Collection Instrument

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The **Irish** Longitudinal Study on Ageing

Wave 3 CAPI Questionnaire

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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.

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ALLOCATION OF MODULES TO RESPONDENTS

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

SECTION 1: THE ABBREVIATED MENTAL TEST SCORE MODULE (AMT)

IWER: This module is only given to the respondent in the event that a household member is concerned that they would not be able to answer the main questionnaire themselves. Its purpose is to re-assure care givers/relations that the respondent is capable of completing the interview.

NOTE: If permission to administer the AMT is declined, you should seek consent to undertake a proxy interview

IWER: READ OUT To begin I would like to ask you some short questions to see how good your memory is. Some of them may seem rather easy but others are more difficult so please just do the best you can on all of them

MT001: What is your age? CAPI NEEDS TO FEED FORWARD THE MONTH AND YEAR OF RESPONDENTS' BIRTH (DN002 and DN003) FROM **WAVE 1** AND USE THIS TO CALCULATE CURRENT AGE SO THAT THE INTERVIEWER CAN ASSESS THEIR ANSWER. IF WAVE 1 FEED FORWARD INFORMATION FOR MONTH AND YEAR OF BIRTH IS NOT AVAILABLE FOR A RESPONDENT THEN MT001 IS NOT APPLICABLE FOR THAT RESPONDENT

IWER: IF THE AGE GIVEN IS WITHIN 2 YEARS OF RESPONDENT'S REAL AGE THEN CODE THEIR ANSWER AS CORRECT

- 1. Correct age
- 5. Incorrect age
- 98 DK
- 99 RF

MT002: Without looking at your watch, what is the time to the nearest hour?

- 1. Time given correctly to the nearest hour
- 5. Time given incorrectly
- 98 DK
- 99 RF

IWER: INTRO Give the respondent an address, and ask him or her to repeat it at the end of the test. E.g. 42 West Street. Say to patient:

I AM GOING TO SAY AN ADDRESS: '42 WEST STREET' CAN YOU REPEAT THAT ADDRESS FOR ME PLEASE?

IWER: ONCE RESPONDENT HAS REPEATED THE ADDRESS BACK TO YOU SAY 'I AM GOING TO ASK YOU TO REPEAT IT FOR ME IN A FEW MINUTES'.

MT003: What is the year?

- 1. Year given correctly
- 5. Year given incorrectly
- 98 DK
- 99 RF

MT004: What is your home address?

- 1. Home address given correctly
- 5. Home address given incorrectly
- 98 DK
- 99 RF

NOTE: Code as 1 if home or nursing home or hospital address given correctly. Also code as 1 if in nursing home but respondent gives previous home address

MT005: **INTRO:** Show the respondent a pencil or pen and ask “WHAT IS THIS?” **IWER: THEN REPEAT THE SAME QUESTION WHILE POINTING TO A WATCH.**

- 1. Two objects correctly identified
 - 5. One or no objects correctly identified
 - 98. DK
 - 99. RF
- (MMSE)

NOTE: If a pen, pencil and/or watch are not available, other common objects can be substituted (e.g. eyeglasses, chair or keys).

MT006: What is your date of birth? CAPI NEEDS TO FEED FORWARD RESPONDENTS MONTH AND YEAR OF BIRTH (DN002 and DN003) FROM WAVE 1 SO THAT THE INTERVIEWER CAN ASSESS THEIR ANSWER. IF WAVE 1 FEED FORWARD INFORMATION FOR MONTH AND YEAR OF BIRTH IS NOT AVAILABLE FOR A RESPONDENT THEN MT006 IS NOT APPLICABLE FOR THAT RESPONDENT.

IWER: MONTH AND YEAR MUST BE GIVEN CORRECTLY

- 1. Date of birth given correctly
- 5. Date of birth given incorrectly
- 98 DK
- 99 RF

MT007: In what year did world war two begin?

- 1. Answers any year between 1939 and 1945
- 5. Any other year
- 98 DK
- 99 RF

NOTE: Code as 1 for any year from start to finish inclusive (both not necessary)

MT008: Can you name the current Taoiseach?

- 1. Name of current Taoiseach given correctly
- 5. Name given incorrectly
- 98 DK
- 99 RF

MT009: Can you count backwards from 20 down to 1?

- 1. Counted backwards correctly
- 5. Counted backwards incorrectly
- 98 DK
- 99 RF

NOTE: Code as 1 if no mistakes or subject corrects himself or herself spontaneously

MT010: Can you please tell me the address I asked you to remember earlier?

- 1. Address recalled correctly
- 5. Address recalled incorrectly
- 98 DK
- 99 RF

BL: COMPUTER SHOULD ASSIGN A SCORE OF 1 FOR EACH ANSWER THAT IS CODED '1', AND COMPUTE A TOTAL SCORE OUT OF TEN FOR THE TEN QUESTIONS. DO NOT COUNT ITEMS MT001 AND MT006 IN THE TOTAL SCORE IF THEY ARE NON-APPLICABLE. IF RESPONDENT SCORES LESS THAN SEVEN (AND ALL ITEMS ARE APPLICABLE) RECOMMEND FULL PROXY INTERVIEW. IF RESPONDENT SCORES GREATER THAN OR EQUAL TO 7 (AND ALL ITEMS ARE APPLICABLE) START A NORMAL INTERVIEW WITH THE RESPONDENT. IF ITEMS MT001 and MT006 ARE NOT APPLICABLE AND THE RESPONDENT SCORES LESS THAN 5 RECOMMEND FULL PROXY INTERVIEW. IF ITEMS MT001 and MT006 ARE NOT APPLICABLE AND THE RESPONDENT SCORES GREATER THAN OR EQUAL TO 5 START A NORMAL INTERVIEW WITH THE RESPONDENT.

IF ((SCORE IS LESS THAN 7 & ALL ITEMS ARE APPLICABLE) OR (SCORE IS LESS THAN 5 & MT001 AND MT006 ARE NOT APPLICABLE)) ASK AMTfail OTHERS GO TO END OF SCRIPT.

AMTfail: INTERVIEWER: THE RESPONDENT HAS FAILED THE AMT TEST. IT IS RECOMMENDED THAT YOU SEEK A PROXY RESPONDENT.

THIS RECOMMENDATION DOES NOT APPLY TO RESPONDENTS FOR WHOM ENGLISH IS NOT THE FIRST LANGUAGE.

1. Continue

SECTION 2: COVER SCREEN

Ffnmask

[CAPI: PRESENT A LIST OF ELIGIBLE RESPONDENTS 'i' to person 'n']

INTERVIEWER: THE FOLLOWING PEOPLE ARE ELIGIBLE TO BE INTERVIEWED.

Respondent

Please code who you are speaking to.

CAPI: IF INTERVIEWING IN A HOUSEHOLD WITH ONLY ONE ELIGIBLE RESPONDENT THEN PRESENT OPTION 5.

- ☐₁ Respondent i₁
- ☐₂ Respondent i₂
- ☐₃ Respondent i₃
- ☐₄ Respondent i₄
- ☐₅ Proxy respondent
- ☐₁₀ None of these [END INTERVIEW]

CAPI: IF INTERVIEWING IN A HOUSEHOLD WITH 2 ELIGIBLE RESPONDENTS. COVERSCREEN RESPONDENT AT [Ffnmask] ABOVE = PRIMARY RESPONDENT. 2ND ELIGIBLE RESPONDENT IN HOUSEHOLD BECOMES SECONDARY RESPONDENT.

HH001. INTERVIEWER: Are you interviewing at the same address that the respondent was interviewed at last time?

OR IF NEW SPOUSE / OTHER ELIGIBLE: Are you interviewing at the same address as per your contact sheet?

1 Yes Go to HH004

2 No Go to HH002

(ELSA)

HH002. INTERVIEWER: Is this interview held in a private household or in a nursing home?

1. Private household

2. Nursing home - GO TO HH002x

3. Other institution: Specify_____

(ELSA)

NOTE: a nursing home provides all of the following services for its residents: dispensing of medication, available 24-hour personal assistance and supervision (not necessarily a nurse), and room & meals.

(SHARE)

HH002x. Is [Respondent i₁] a temporary or permanent resident of the nursing home?

1 Temporary

2 Permanent

ASK HH002y if HH001 = 2

HH002y. IWER: PLEASE ENTER THE NEW ADDRESS AT WHICH THE RESPONDENT IS NOW RESIDENT.

CS027. INTERVIEWER: Is this [dwelling/nursing home/institution] 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

TILDA

CAPI: IF HH HAS ONLY ONE ELIGIBLE R THEN FEED FORWARD ELIGIBLE RESPONDENT NAME FROM <Ffnmask> THEN ASK HH004 THROUGH HH006

CAPI: SET HH004 = 3 IF PROXY INTERVIEWER: IF HH HAS ONLY ONE ELIGIBLE R AND Ffnmask = 5 (I.E. PROXY INTERVIEW) THEN HH004 = 3

HH004: IWER: Do you have reason to think that [*r's first name*] would have difficulty completing this interview because of cognitive or physical limitations?

1. No reason to think [*r's first Name*] has any cognitive or physical limitations

2. [*R's first name*][*may* have some cognitive or physical limitations but could probably do the interview

3. [*R's first name*] has cognitive or physical limitations that prevent him/her from being interviewed

(HRS)

CAPI: IF HH004 = 3 add a soft-check to the interview asking the interviewer whether they wish to continue with the interview if the respondent has cognitive or physical limitations that would preclude him/her from completing the interview.

CAPI: IF HH004 = 3 add a soft-check to the interview asking the interviewer whether they wish to continue with the interview if the respondent has cognitive or physical limitations that would preclude him/her from completing the interview.

IWER: IF HH HAS ONLY ONE ELIGIBLE R AND Ffnmask = 5 (I.E. PROXY INTERVIEW) THEN HH005>=2

HH005. IWER: Designate type of interview:

1. Self
2. Proxy, spouse/partner is reporter, and living in same household
3. Proxy, child
4. Proxy, family member other than spouse or child
5. Proxy, spouse/partner is reporter, but does not live in same Household
6. Proxy is non-family member

(HRS)

CAPI: If HH005≠1 then GO TO HH006

HH006. What is the proxy's full name?

Text: up to 60 characters

[Go to HH006x]

HH006x. Was the respondent present during the proxy interview?

- 1 Yes
- 2 No

CAP1: GENERATE A VARIABLE ENTITLED 'INTSTATUSW3' WHICH INDICATES THE PROTOCOL FOR NAVIGATING THROUGH THE COVERSCREEN SECTION AND OTHER SECTIONS OF THE QUESTIONNAIRE. THE RULES USED TO GENERATE THE 'INTSTATUSW3' VARIABLE ARE DESCRIBED BELOW:

IF HH005(W2) = 1 & HH005(W3) = 1 THEN INTSTATUSW3 = 1

(self interview W2, self interview W3)

IF HH005(W1) = 1 & HH005(W2) = . & HH005(W3) = 1 THEN INTSTATUSW3 = 2

(skipped W2, self interview W3)

IF HH005(W2) = 2 | 3 | 4 | 5 | 6 & HH005(W3) = 1 THEN INTSTATUSW3 = 3

(proxy in W2, self interview W3)

IF HH005(W1) = . & HH005(W2) = . & HH005(W3) = 1 THEN INTSTATUSW3 = 4

(new respondent W3)

IF HH005(W1) = 1 & HH005(W2) = 1 & HH005(W3) = 2 | 3 | 4 | 5 | 6 THEN INTSTATUSW3 = 5

(self interview W2, proxy W3)

IF HH005(W1) = 1 & HH005(W2) = . & HH005(W3) = 2 | 3 | 4 | 5 | 6 THEN INTSTATUSW3 = 6

(skipped W2, proxy W3)

IF HH005(W2) = 2 | 3 | 4 | 5 | 6 & HH005(W3) = 2 | 3 | 4 | 5 | 6 THEN INTSTATUSW3 = 7

(proxy W2, proxy W3)

IF HH005(W1) = . & HH005(W2) = . & HH005(W3) = 2 | 3 | 4 | 5 | 6 THEN INTSTATUSW3 = 8

(missing W1 & W2, proxy W3)

CS001 INTRO INTERVIEWER: In [{month and year previous interview}], your/this household participated in a study called TILDA. As you know, this study is interested in learning about important aspects of people's lives such as their health, lifestyle, financial and family situations. To do so, we are re interviewing people such as [yourself/Rname] who have participated in the study. 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
(SHARE)

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

Text: up to 60 characters

CAPI:

IF INTSTATUSW3 = 1 – POPULATE CS023 WITH INFORMATION COLLECTED AT WAVE 2. HOUSEHOLD INFORMATION COMES FROM:

Person ID = (derived from) Tilda_Address Serial and PERSONNUM: cs023_pi_id_ff(W2) (if cs023_01 through cs023_19(W2)==1)/ cs029_nrci_id_ff(W1) (if cs046x_i(W2)==1) / cs047_id_i_NR(W2)

Name of HHmember = cs023_pi_name_ff(W2) / CS029_nrci_name_ff(W1)(if cs046x_i(W2)==1)/ CS047_NAME_i_NR

Age of HHmember = cs023_pi_yearofbirth_ff(W2), cs023_pi_monthofbirth_ff(W2) / cs023_pi_age_ff(W2) / cs029_nrci_age_ff(W1) (if cs046x_i(W2)==1)/ CS047_AGE_i_NR

Sex of HHmember = cs023_pi_sex_ff(W2) / CS029_nrci_sex_ff(W1)(if cs046x_i(W2)==1) / CS047_SEX_i_NR

CAPI:

IF INTSTATUSW3 = 2 | 3 – POPULATE CS023 WITH INFORMATION COLLECTED AT WAVE 1. HOUSEHOLD INFORMATION COMES FROM:

Person ID = (derived from) Tilda_Address Serial and PERSONNUM: cs023_pi_id_ff(W1)

Name of HHmember = cs023_pi_name_ff(W1)

Age of HHmember = cs023_pi_yearofbirth_ff(W1), cs023_pi_monthofbirth_ff(W1)

Sex of HHmember = cs023_pi_sex_ff(W1)

CAPI: (REPEAT FOR PERSON₁ through Person₁₉ IF APPLICABLE)

CS023. Before beginning the interview, I just need to check whether there have been changes in who lives in this household. Including [yourself/Rname], our records show that [number of people in HH] people lived in this household. I would like to check if each of them still lives here (ELSA)

IWER: If the respondent reports the household member lives here, please tick the box in the left column

[cs023_01 to cs023_19]

- 0. Person not present
- 1. Person present
- 1. Not applicable

Tick a box	ID	Name	Age	Sex
	Person 1	John	24	Male
	Person 2	Mary	52	Female
	Person 3	John	58	Male

CAPI: FOR EACH PERSON NOT TICKED GO TO CS036

CAPI: HH member not ticked in the list: LOOP CS036 THROUGH CS045

(SHARE/ELSA/HRS)

NOT IN THE HH LIST

CS036 May I ask what has happened to [NAME]?

IWER: Age is given in case there is more than one person in the household with the same name. The age may not be exactly correct

CAPI: Allow interviewers to change the name if the spelling is incorrect

1 Deceased **GO TO CS037 through CS041**

2 Living elsewhere - relationship ended **GO TO NEXT HH NOT ON THE LIST**

3 Living elsewhere - moved into a nursing/residential home/other institution **GO TO CS044 THROUGH CS045**

4 Living elsewhere - other reason e.g. child moved out) **GO TO NEXT HH NOT ON THE LIST**

5 Preload error (the R does not know this person). Specify _____ **GO TO NEXT HH NOT ON THE LIST**

ELSA

CAPI:

If HH member was a participant at Wave 1 or Wave 2 and CS036=1 then apply exit interview in respect of this deceased R after finishing the present interview.

If HH member was a participant at Wave 1 or Wave 2 and CS036=2 or 4 then this is a split household. Make a provision to create a new HH including a new TILDA ID number based on the original household, then apply split household interview after finishing the present interview.

FOR ELIGIBLE RESPONDENTS ONLY

NOTE: If someone is expected to return home from hospital or temporary care (less than 6 months) before the end of the fieldwork period, please try to wait until they do so and attempt to conduct an interview with them in person. You may be told that the person would not be able to conduct an interview in person due to physical or cognitive impairment, even when they return from hospital or temporary care. If possible, you should wait until they do return home in order to make this assessment yourself and then, if necessary, conduct a proxy interview because of their impairment. We **would not** want you to visit the person in hospital or temporary care in order to try to make this assessment

Capi: IF HH member was a participant at Wave 1 or Wave 2 and CS036=3 then apply Nursing Home Interview in respect of this R after finishing the present interview.

DECEASED HH MEMBER

CS037. I am sorry to hear that [Name] has passed away. I just need to ask a few questions to check that we have the correct information about him/her.

ELSA

INTERVIEWER: Press 1 and enter to continue.

CS038 INTERVIEWER: Enter correct first name.

CS039 INTERVIEWER: CODE OR ASK IF UNSURE: Can I just check, was [NAME] [sex]?

1 Male

2 Female

ELSA

CS041. When did [NAME] die? Can you tell me the month and year?

(MM/YYYY)

(SHARE/ELSA/HRS)

_____ MONTH -98. DK -99.RF[cs041y]

_____ YEAR -98. DK -99.RF[cs041m]

GO TO NEXT HH NOT ON THE LIST

ELSE GO TO CS046

IF CS036= 3 (NURSING HOME)

CS044: In what month and year did [you/Rname] move to the (nursing home/health care facility/hospice) where [you/he/she] [are / is] now living?

Month _____[cs044y]

Year _____[cs044m]

CS045: In what county is the nursing home where [you/Rname] [are/is] living?

County _____1. Antrim	13. Kerry	25. Roscommon
2. Armagh	14. Kildare	26. Sligo

3. Carlow	15. Kilkenny	27. Tipperary
4. Cavan	16. Laois	28. Tyrone
5. Clare	17. Leitrim	29. Waterford
6. Cork	18. Limerick	30. Westmeath
7. Derry	19. Longford	31. Wexford
8. Donegal	20. Louth	32. Wicklow
9. Down	21. Mayo	33. Not in Ireland
10. Dublin	22. Meath	98. DK
11. Fermanagh	23. Monaghan	99. RF
12. Galway	24. Offaly	

GO TO NEXT HH NOT ON THE LIST

ELSE GO TO CS046

CAPI: ASK QUESTION CS046x IF COVERSCREEN RESPONDENT(W3) HAD cs017(W1)= 2 or 3 AND cs017(W2) =2 or 3.

CS046x: According to our records, in <month and year of last interview> there were some children who were not living in this household. Are any of them living here now?

IWER: READ OUT AND CODE ALL THAT ARE LIVING HERE NOW

CODE NULL FOR "NONE OF THESE"

CAPI: This list will display: non-resident children from W2 or non-resident children from W1 for skippers. Person number/name/age/sex for non-resident children come from:

For respondents who participated in w2:

**cs029_nrc1_id_ff/ cs029_nrc1_name_ff/ cs029_nrc1_age_ff/ cs029_nrc1_sex_ff to
cs029_nrc20_id_ff/ cs029_nrc20_name_ff/ cs029_nrc20_age_ff/ cs029_nrc20_sex_ff**

if tc001bff_21 to tc001bff_40=1,2,3,4,5,98,99

cs023_p1_id_ff/ cs023_p1_name_ff/ cs023_p1_age_ff/ cs023_p1_sex_ff to

cs023_p19_id_ff/ cs023_p19_name_ff/ cs023_p19_age_ff/ cs023_p19_sex_ff

if tc001aff_01 to tc001aff_19=1,2,3,4,5,98,99

tc037_41_id_nrc_ff / cs029ff_41/cs019aff_41/cs030ff_41 to

tc037_45_id_nrc_ff / cs029ff_45/cs019aff_45/cs030ff_45

if tc001ff_41 to tc001ff_45= 1,2,3,4,5,98,99

For skippers:

cs029_nrc1_id_ff/cs029_nrc1_name_ff/ cs029_nrc1_age_ff/ cs029_nrc1_sex_ff to
cs029_nrc20_id_ff/ cs029_nrc20_name_ff/ cs029_nrc20_age_ff/ cs029_nrc20_sex_ff

		ID	Name	Age	Sex
1	Non-resident child 1				
2	Non-resident child 2				
3	Non-resident child 3				
...	...None of these				

If respondent was not routed to CS046x use wording A for CS046

If respondent was routed to CS046x use wording B for CS046

CS046

Wording A: **Of the people living in this household today, has anyone else joined this household since [{month and year of previous interview}] (that is since we last interviewed a current household member)?**

Wording B: **Apart from the children we just talked about, has anyone else joined this household since [{month and year of previous interview}] (that is since we last interviewed a current household member)?**

1. Yes

5. No -----> Go to CS055

SHARE/ELSA

CAP: IF CS046 = 1 LOOP CS047 THROUGH CS054 FOR EACH NEW HOUSEHOLD MEMBER AND HIS/HER SPOUSE/PARTNER [IF APPLICABLE].

CS047a: Who has joined this household?

	ID	Name	Age	Sex
65	1 ST NEW ENTRANT			
66	NEW ENTRANTS SPOUSE/PARTNER [IF APPLICABLE]			
67	3 RD NEW ENTRANT			
68				
69				

CS047: What is his or her first name?

CS048: What is the sex of [NEW HOUSEHOLD MEMBER]?

IWER: Code or ask if unsure

1. Male
2. Female

CS050 How old is [NEW HOUSEHOLD MEMBER]?

0...120

-98. DK

-99. RF

CAPI: IF CS050 = -98 or -99 GO TO CS051

ELSE GO TO CS052

CS051: Is [NEW HOUSEHOLD MEMBER] aged...? [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		

CS052 When did [NEW HOUSEHOLD MEMBER] move into this household?)

INTERVIEWER: Enter the month and year at this question.

CS052m: In which month did [NEW HOUSEHOLD MEMBER] move into this household?

1. January	8. August
2. February	9. September
3. March	10. October
4. April	11. November
5. May	12. December
6. June	98. DK
7. July	99. RF

CS052y: In which year did [NEW HOUSEHOLD MEMBER] move into this household?

1900...2013

-98. DK

-99. RF

CS053: Is [NEW HOUSEHOLD MEMBER] living with a spouse, with a partner, or as a single?

1. Living with a spouse -----> GO TO CS047BA

2. Living with a partner -----> GO TO CS047BA

3. Living as a single person (including widows, separated etc.) GO TO CS054

CS047BA: What is [NEW HOUSEHOLD MEMBER]'s spouse/partner name?

CS048B: What is the sex of [NEW HOUSEHOLD MEMBER'S SPOUSE/PARTNER]?

IWER: Code or ask if unsure

1. Male

2. Female

CS050b How old is [NEW HOUSEHOLD MEMBER'S SPOUSE/PARTNER]?

12...120

-98. DK

-99. RF

CAPI: IF CS050b = -98 or -99 GO TO CS051B

CS051B: Is [NEW HOUSEHOLD MEMBER'S SPOUSE/PARTNER] aged...? [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		

CS052B When did [{NEW household member's spouse}] move into this household?)

INTERVIEWER: Enter the month and year at this question.

CS052Bm: In which month did [NEW HOUSEHOLD MEMBER'S SPOUSE/PARTNER]? move into this household?

1. January	8. August
2. February	9. September
3. March	10. October
4. April	11. November
5. May	12. December
6. June	98. DK
7. July	99. RF

CS052By. In which year did [NEW HOUSEHOLD MEMBER'S SPOUSE/PARTNER]? move into this household?

1914...2013

-98. DK

-99. RF

CS054 Has anyone else joined this household since [last interview date]?

1 Yes -----> Loop CS046

2 No -----> End of the loop GO TO CS055

FINAL HH MEMBER CHECK

CS055: IWER READ OUT: So, all current members of the household are:

Tick a box	ID	Name	Age
		John	24
		Mary	52

		John	58
--	--	------	----

Have we left anyone out?

1. Yes CHECK: Please go back to CS046 and add this person.

5. No GO TO CS056

CS056. Let me just check. That makes [number of people in HH] people living in this household altogether? Is that correct?

1. Yes
2. No GO TO CS046

CS058. CAPI: CONFIRM THE NAME(S) OF THE ELIGIBLE RESPONDENT(S) FROM THE LIST OF HH MEMBERS, INCLUDING ANY NEW ELIGIBLE MEMBER (S) (E.G. NEW SPOUSE / OTHER ELIGIBLE)

IWER: This household has _____ eligible respondents. Read out loud all names of eligible respondents

CAPI: ASK THE RELATIONSHIP OF EACH ELIGIBLE RESPONDENT TO EACH NEW HOUSEHOLD MEMBER.

ELSA

CS057_n: What is your relationship to [NEW HOUSEHOLD MEMBER]? You are [NEW HOUSEHOLD MEMBER]'s?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)

10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative
25. Other non-relative	25. Other non-relative

CAPI: IF RELATIONSHIP OF [RESPONDENT i_1] TO [NEW HOUSEHOLD MEMBER] = 4 | 5 | 6 | 7 THEN SET A FLAG TO MARK CS046x_personid = 1 FOR EACH RESPONDENT TO WHOM THIS RELATIONSHIP PERTAINS.

CAPI: ASK IF MORE THAN ONE ELIGIBLE RESPONDENT IN HOUSEHOLD AT WAVE 3 AND [Respondent i_2] IS STILL LIVING IN THE HOUSEHOLD.

CS057_3: What is [RESPONDENT i_2]'s relationship to [NEW HOUSEHOLD MEMBER]. [RESPONDENT i_2] is [NEW HOUSEHOLD MEMBER's]....?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)
10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter

20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative
25. Other non-relative	25. Other non-relative

CAP: IF RELATIONSHIP OF [RESPONDENT i_2] TO [NEW HOUSEHOLD MEMBER] = 4 | 5 | 6 | 7 THEN SET A FLAG TO MARK CS046xy_person_id=1 FOR EACH RESPONDENT TO WHOM THIS RELATIONSHIP PERTAINS.

**CAPI: IF INTSTATUS(W3) = 4 | 5 | 6 | 7 | 8 : (i.e. new household member or proxy respondent)
ASK CSP MEMBER THROUGH CSP_FINAL.**

CAPI: IF HH002x = 2 & HH005(W3) = 3 | 4 | 5 | 6 (i.e. permanently resident in nursing home and interview is being completed by proxy] skip CS section. GO TO CF001

CAPI: IF PR001FF=3 & HH005(W3)= 2 | 3 | 4 | 5 | 6 - END INTERVIEW (Respondent did not give permission for interview to be collected by proxy].

CSP_MEMBER: Because you are completing the interview on behalf of <Respondent i₁> we would like to begin by asking who lives here as part of the household. In addition to <Respondent i₁> who else lives here as a member of this household?

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 parent's 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 budget for meals.

IWER: LIST PROXY RESPONDENT ON LINE 2 OF THE HOUSEHOLD ROSTER IF THEY ARE A MEMBER OF THE HOUSEHOLD.

CSP_MEMBER: Do you live here as a member of the household?

1 Yes

2 No – Go to CF001

CSP03_02: How old are you?

0...120

-98. DK

-99. RF

[CAPI: ASK CSP04_02 IF CSP03_02 = -98 or -99]

CSP04_02: Is [proxy respondent] aged...? [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		

[CAPI: ASK CSP05_02 IF CSP_member = YES]

CSP05_02: Since when have you been living here in this household?

1900...2013

-98. DK

-99. RF

[CAPI: ASK CSP06_02 IF CSP05_02>=2011]

CSP06_02: In which month did [HH006] move into this household?

1. January	8. August
2. February	9. September
3. March	10. October
4. April	11. November
5. May	12. December
6. June	98. DK

7. July	99. RF
---------	--------

CSP_ELSE: Does anyone else live here as part of this household?

1 Yes

2 No

CSP01_03: What is his/her first name?

CSP02_03: What is the sex of [CSP1_03]?

IWER: Code or ask if unsure

1. Male

2. Female

CSP03_03: How old is [CSP1_03]?

0...120

-98. DK

-99. RF

[CAPI: ASK CSP04_03 IF CSP03_03 = -98 or -99]

CSP04_03=: Is [CSP1_03] aged...? [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		

CSP05_03: Since when has [CSP1_03] been living here in this household?

1900...2013

-98. DK

-99. RF

[CAPI: ASK CSP06_03 IF CSP05_03>=2011]

CSP6_03: In which month did [CSP01_03] move into this household?

1. January	8. August
2. February	9. September
3. March	10. October
4. April	11. November
5. May	12. December
6. June	98. DK
7. July	99. RF

CSP7_03: What is <Respondent i₁'s> relationship to [CSP01_03]? <Respondent i₁> is [CSP01_03's]....?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)
10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law

14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative
25. Other non-relative	25. Other non-relative

CSP8_03: What is your relationship to [CSP01_03]? [CSP01_03] is your....?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)
10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative
25. Other non-relative	25. Other non-relative

CAP1: REPEAT CSP_ELSE through CSP8_3 for each additional household member. Add a suffix _4, _5, to denote the person number that corresponds to each person's position on the roster as shown below.

FINAL HH MEMBER CHECK

CSP_TOTAL: IWER READ OUT: So, all current members of the household are:

ID	Name	Age	Sex
Person i ₁			
Proxy_02	Feed Forward from HH006	Feed Forward from CSP3_2	Feed Forward from CS004
Person_03	Feed forward from CSP1_3	Feed forward from CSP3_3	Feed forward from CSP2_3
Person_04	Feed forward from CSP1_4	Feed forward from CSP3_4	Feed forward from CSP2_4

The household grid will look like this for 4 household members. The eligible R should occupy line 1 and the proxy respondent should occupy line 2.

CSP_CHECK: Have we left anyone out?

1. Yes CHECK: Please go back to CSP_ELSE and add this person.
5. No GO TO CF001

CSP_FINAL: Let me just check. That makes [CSP_total] people living in this household altogether?
Is that correct?

3. Yes Go to CF001
4. No GO TO CSP_ELSE

2.1. COVER SCREEN-R (INDIVIDUAL INTERVIEW)

CF001: IWER: Has the Rname [proxynome] signed the consent form?

1. Yes

5. No (IWER: ASK THEM TO SIGN CONSENT FORM. REPEAT QUESTION)

CF002: IWER: Does the respondent have a spouse/partner living with him/her?
(Fed forward from coverscreen)

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)

CAPI: Ask CS015 and CS016 only to 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)?

INTERVIEWER: In the last interview Rname was [the Family/the Financial/the Family and Financial/ neither the Family nor Financial] respondent

1. Respondent

2. Spouse/partner

(HRS/SHARE)

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

INTERVIEWER: In the last interview Rname was [the Family/the Financial/the Family and Financial/ neither the Family nor Financial] respondent

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

CAPI (soft check): if two respondents are married/cohabiting in the household and the cover screen respondent is acting as a proxy for the secondary respondent, then set cs017==3 (i.e. both financial and family) for the coverscreen respondent.

If only one respondent in the household and HH005 = 3 | 4 | 5 then set CS017 ==3 (i.e. both financial and family).

CAPI: IF HH005 = 2 | 3 | 4 | 5 | 6 - GO TO DM001 (SELF COMPLETION QUESTIONNAIRE NOT GIVEN TO PROXY RESPONDENT)

SECTION 3: SELF-COMPLETION QUESTIONNAIRE (SC)

CAPI:

SC001

I would like to give you this paper questionnaire to fill in, in your own time. We greatly value your response to this questionnaire and we hope that you will find it interesting to complete. Please post it back in this prepaid envelope.

IWER:

IWER:

- 1) Please enter the 4 digit code into the computer screen

(Code can be found on the top left on the front cover of the self-completion questionnaire booklet)

__ / __ / __ / __

IF INVALID NUMBER – DISPLAY

“INVALID NUMBER – PLEASE CHECK AND TYPE AGAIN”

- 2) Write the Respondent’s TILDA number on the front cover of the self-completion booklet
- 3) Write in the respondent’s initials, their gender, today’s date <today’s date> and your interviewer number <number> on the front cover of the questionnaire.
- 4) Give the self-completion questionnaire to [RNAME]

GO TO NEXT SECTION

SECTION 4. DEMOGRAPHICS (DM)

**CAPI: IF HH HAS MORE THAN ONE ELIGIBLE R THEN ASK HH004 THROUGH HH006
ELSE GO TO GD003**

HH004: IWER: Do you have reason to think that [Rname] would have difficulty completing this interview because of cognitive or physical limitations?

1. No reason to think [Rname] has any cognitive or physical limitations
2. [Rname] *may* have some cognitive or physical limitations but could probably do the interview
3. [Rname] has cognitive or physical limitations that prevent him/her from being interviewed (HRS)

HH005. IWER: Designate type of interview:

1. Self
2. Proxy, spouse/partner is reporter, and living in same household
3. Proxy, child
4. Proxy, family member other than spouse or child
5. Proxy, spouse/partner is reporter, but does not live in same Household
6. Proxy is non-family member

(HRS)

CAPI: If HH005≠1 then GO TO HH006

HH006. What is the proxy's full name?

Text: up to 60 characters

EVERYONE TO BE ASKED GD001, GD002, DN002, DN003

GD003. I would like to begin by asking some questions about [your/Rname's]background.

GD001: IWER: Respondent's NAME

GD002: IWER: Code without asking

1. Male
2. Female

DN002: In which month [were/was] [you/Rname] born?

1. January	8. August
2. February	9. September
3. March	10. October
4. April	11. November
5. May	12. December
6. June	98. DK
7. July	99. RF

DN003: In which year [were/was] [you/Rname] born?

1900...2013

-98. DK

-99. RF

CHECK: Year of birth should not differ from wave 1 or wave 2 year of birth

FOR EXISTING RESPONDENTS (instatusW3≠4 OR 8) WHO HAVE DN003FFW1>0 | DN003FFW2>0, DN003 SHOULD BE THE SAME AS DN003FF. IF DN003≠DN003FF, ASK RESPONDENT TO CONFIRM THEIR YEAR OF BIRTH

IF DK or RF to DN003 ASK DN003b

DN003b: For the purposes of this research can you tell me if [you/Rname] [are/is] 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

4.1 Schooling

NOTE: ANY RESPONDENT WITH NO DM001 FEED FORWARD INFORMATION FROM WAVE 1 OR WAVE 2 SHOULD BE ASKED DM001. ALL RESEONDANTS WITH DM001 FF INFORMATION SHOULD BE ASKED DM001A. THEREFORE ALL RESEONDANTS WILL BE ASKED EITHER DM001 OR DM001A.

IWER: PLEASE SHOW CARD DM1

If instatusW3==4 or 8 (New spouse/other eligible) | If DM001FFW2==1 GO TO DM001 then GO TO DM048

ELSE ask DM001a

DM001 Please look at this card (DM1). What is the highest level of education that [you/ Rname] 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

If DM001==3. GO TO DM081 THEN TO DM048

ELSE GO TO DM048

DM081 Just to clarify, did [you/RName] complete an intermediate certificate, group certificate or junior certificate or equivalent?

1. Intermediate Certificate
2. Group Certificate
3. Junior Certificate

- 4. Other Equivalent Qualification
- 5. Combination of above
- 98. DK
- 99. RF

If intstatusW3==4 or 8 (New spouse/other eligible)GO TO DM048

~~GO TO CS006~~

DM001a: Since the last time that we interviewed [you/Rname] [have/has] [you/he/she] obtained any further qualifications?

NOTE: Please include only formal education obtained through an accredited source such as secondary school or university/college

- 1. Yes GO TO DM025
- 5. No GO TO ~~DM048~~CS006 unless (DM001FFW1==3 & DM001aFFW2==5) | (DM001FFW1==3 & intstatusW3==2 or 6, i.e no FF from W2) | (DM001FFW2==3) | (DM025W2==3) in which case go to DM082 i.e. unless Junior/Intermediate/Group Cert is highest educational qualification

- 98. DK
- 99. RF

SHOW CARD DM1

DM025: What is the highest qualification that [you/Rname] 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

If DM025==3 go to DM082
ELSE SKIP DM082

DM082 Just to clarify, did [you/RName] complete an intermediate certificate, group certificate or junior certificate or equivalent?

- 1. Intermediate Certificate
- 2. Group Certificate
- 3. Junior Certificate
- 4. Other Equivalent Qualification
- 5. Combination of above
- 6. None of the above
- 98. DK
- 99. RF

If intstatusW3==2 or 4 or 6 or 8 (New spouse/other eligible/ w3_recontacts) ASK DM048
ELSE GO TO CS006

DM048: **At what age did [you/he/she] leave full-time education? [as in the age [you/he/she] first left continuous education, excluding any periods spent as a mature student]**

5...30

-96. Never attended full-time education

-98. DK

-99. RF

MARITAL STATUS

NB: DO NOT FEED FORWARD MARITAL STATUS INFORMATION IF INTSTATUSW3==5 OR 6 OR 7 (PROXY INTERVIEW & NOT NEW RESPONDANT)

IWER: PLEASE USE SHOW CARD DM2

CAP1: IF intstatusW3==2 & CS006FFW1==DK/RF (R REPORTED DON'T KNOW OR REFUSED TO CS006 IN WAVE 1 & R DID NOT TAKE PART IN WAVE 2) OR CS006FFW2==DK/RF (R REPORTED DON'T KNOW OR REFUSED TO CS006 IN WAVE 2) OR intstatusW3==4 (NEW RESPONDENT), USE WORDING 'A'

IF intstatusW3==5, 6, 7 or 8 (PROXY INTERVIEW) USE WORDING 'B'

IF intstatusW3==2 & CS006FFW1== 1,2,3,4,5 or 6 (R REPORTED THEIR MARITAL STATUS IN WAVE 1 & DID NOT TAKE PART IN WAVE 2) OR intstatusW3==1 or 3 & CS006FFW2== 1,2,3,4,5 or 6 (R REPORTED THEIR MARITAL STATUS IN WAVE 2) USE WORDING 'C'

IF INTSTATUSW3==3 (Self W1, Proxy W2, Self W3), use CS006FFW2 and use wording 'C'

CS006 Please look at this card (DM2). (A) Are you... (B) Is Rname... (C) Are you still [feed forward from CS006FF]:

- | | |
|--|--------------------|
| 1. Married | SKIP CS058 |
| 2. Living with a partner as if married | SKIP CS058 |
| 3. Single (never married) | GO TO CS058 |
| 4. Separated | GO TO CS058 |
| 5. Divorced | GO TO CS058 |
| 6. Widowed | GO TO CS058 |

(HRS)

Note:

Married includes **Civil Partnerships** and 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.

CS058: [Do/Does] [you/he/she] currently have a romantic, intimate, or sexual partner?

1. Yes

5. No

98. DK

99. RF

CAP1: IF CHANGE IN MARITAL STATUS (CS006)

IF intstatusW3==1 or 3 & CS006FFW2≠1 or 2 (NOT MARRIED IN PREVIOUS INTERVIEW) OR

intstatusW3==4 OR 8 (NEW SPOUSE/OTHER ELIGIBLE), AND CS006=1 OR 2 (MARRIED IN WAVE 3)

THEN ASK CS011Y

Or intstatusW3==2 (R is re-contact) and CS006FFW1≠1 or 2 (NOT MARRIED IN PREVIOUS INTERVIEW) AND CS006=1 OR 2 (MARRIED IN WAVE 3) THEN ASK CS011Y
IF intstatusW3==1 or 3 & CS006FFW2≠6 (NOT WIDOWED IN PREVIOUS INTERVIEW) OR intstatusW3=4 OR 8 (NEW SPOUSE/ OTHER ELIGIBLE), AND CS006=6 (WIDOWED IN WAVE 3) THEN ASK CS012

Or intstatusW3==2 (R is re-contact) and CS006FFW1≠6 (NOT WIDOWED IN PREVIOUS INTERVIEW) AND CS006=6 (WIDOWED IN WAVE 3) THEN ASK CS012

IF intstatusW3==1 or 3 & CS006FFW2≠4 or 5 (NOT SEPARATED/DIVORCED IN PREVIOUS INTERVIEW) OR intstatusW3=4 OR 8 (NEW SPOUSE/ OTHER ELIGIBLE), AND CS006=4 or 5 (SEPARATED/DIVORCED IN WAVE 3) THEN ASK CS013

Or intstatusW3==2 (R is re-contact) and CS006FFW1≠4 or 5 (NOT SEPARATED/DIVORCED IN PREVIOUS INTERVIEW) AND CS006=4 or 5 (SEPARATED/DIVORCED IN WAVE 3) THEN ASK CS013

ELSE - (i.e. marital status did not change since most previous interview)

If CS006==3 (i.e. single never married) and status did not changes since most recent interview GO TO SCREENING FOR SECTION ON NON-PARTICIPATING PARTNERS

If CS006==2 and status did not changes since most recent interview GO TO CS060

If CS006==1, 4, 5, 6 and status did not changes since most recent interview GO TO CS061

IF CS006≠2 & intstatusW3==5,6, OR 7- GO TO SCREENING FOR SECTION ON NON-PARTICIPATING PARTNERS BELOW

CS011y: In which year did [you/Rname] get married or start living together?

IWER: If they lived together before getting married then record the year they started living together 1900...[current year]

-98. DK

-99. RF

(HRS/MHAS/SHARE/ELSA)

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

"Year should be at least 12 years after year of birth. Please redo"

CS012: In which year did [you/Rname] become a widow/widower?

(YYYY)

_____ YEAR

-98. DK

-99. RF

(HRS/MHAS/SHARE/ELSA)

CS013y: In which year did [you/they] stop living together/get divorced?

(YYYY)

_____ YEAR

[cs013y]

-98. DK

-99. RF

(HRS/MHAS/SHARE/ELSA)

If CS006==2 [if currently cohabiting] ask CS060 if CS006==1, 4, 5, 6 skip to CS061

CS060: [Have you]/[Has R'name] ever been married?

1.yes [go to CS061]

5. No [go to SCREENING FOR INFORMATION GATHERING ON NON-PARTICIPATING PARTNERS]

CS061: Including any previous marriages, in what year did [you/Rname] first get married?

..Year

-98

-99

CAPI: SCREENING FOR INFORMATION GATHERING ON NON-PARTICIPATING PARTNER

IF CS006=1 OR CS006=2 (MARRIED / COHABITING AND PARTNER IS NOT PARTICIPATING) GO TO DM059

IF CS006=1 OR CS006=2 AND PARTNER IS PARTICIPATING OR CS006>=3 & CS006<=6 I.E. RESPONDENT IS NOT MARRIED THEN GO TO SECTION 4.2 (CHILDHOOD)

IF HH005 == 2 or 5 then proxy is spouse/partner. If this spouse/partner is not participating in the study rephrase these questions to be "you".

Intro: I now have some questions about [your/Rname's] [husband/wife/partner].

DM059: In which month was [your/Rname's] [husband/wife/partner] born? [if proxy is non-participating partner – in which month were you born?]

1. January	8. August
2. February	9. September
3. March	10. October
4. April	11. November
5. May	12. December
6. June	98. DK
7. July	99. RF

DM060: In which year was [he/she] born? YEAR:(ex:1955)

[if proxy is non-participating partner – in which year were you born?]

1900...2013

-98. DK

-99. RF

DM061: Please look at this card (DM1). What is the highest level of education that [he/she] completed? [if proxy is non-participating partner – What is the highest level of education that you 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

If DM061==3

DM083 Just to clarify, did [you/RName] complete an intermediate certificate, group certificate or junior certificate or equivalent?

- 1. Intermediate Certificate
- 2. Group Certificate
- 3. Junior Certificate
- 4. Other Equivalent Qualification
- 5. Combination of above
- 98. DK
- 99. RF

DM080: At what age did [he/she] leave full-time education? [*as in the age [he/she] first left continuous education, excluding any periods spent as a mature student*]

[if proxy is non-participating partner – At what age did you leave full-time education??]

5...30

- 96. Never attended full-time education
- 98. DK
- 99. RF

IWER: SHOW CARD DM3

DM062 : Please look at card DM3. What is your [husband/wife/partners] employment status?

[if proxy is non-participating partner – What is your [husband/wife/partners] employment status?]

IWER: CODE THE ONE THAT APPLIES

- 1. Retired
 - 2. Employed (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)
 - 4. Unemployed
 - 5. Permanently sick or disabled
 - 6. Looking after home or family
 - 7. In education or training
 - 95. Other (specify) **GO TO DM062oth**
 - 98. DK
 - 99. RF
- (ELSA)

DM062oth: Text: Up to 60 characters.

DM063a: I would like to ask about [Spouse's/Partner's name] job. Could you tell me the name or title of this job? NOTE: *If not at work now, ask about highest paid job ever held*

[if proxy is non-participating partner – I would like to ask about your job. Could you tell me the name or title of this job?]

[If DM062#2 or 3 – When [Spouse's/Partner's name] was working, what was the name or title of this job?]

[If proxy is non-participating partner – When you were working, what was the name or title of this job?]]

Text: Up to 60 characters

98. DK

99. RF

DM063x:

IWER: CODE WITHOUT ASKING:

Is the SPOUSE'S/PARTNER'S occupation a farm owner or manager

1. Yes GO TO dm063b

5. No GO TO dm063c

Dm063b. What is the acreage of the farm?

NOTE: If the respondent is unsure ask them to round to the nearest 10 acres

1. 0-29 acres

2. 30-49 acres

3. 50-99 acres

4. 100-199 acres

5. 200 or more acres

-98. DK

-99. RF

(TILDA AND CSO)

Dm063c. IWER TO SELECT SOCIAL CLASS

(Social Class Categories)

1. Professional workers

2. Managerial and technical

3. Non-manual

4. Skilled manual

5. Semi-skilled

6. Unskilled

7. Unable to classify

8. Never worked

98. DK

99. RF

4.2 Childhood

IWER READ OUT: **The next questions ask about aspects of [your/Rname's] childhood**

CAPI:

IF intstatusW3==4 or 8 (NEW SPOUSE/OTHER ELIGIBLE)ASK DM002 through DM010

IF intstatusW3==2 or 6 (RECONTACT) GO TO DM036

ELSE GO TO DM053

DM002. Where was **[your/his/her]** 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/his/her]** 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/he/she]** living in a rural area when you were about age 14?

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

DM005: Consider **[your/his/her]** health while you were growing up, from birth to age 14. Would you say that **[your/his/her]** 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/his/her]** family when [you/he/she] were growing up, from birth to age 14. Would you say **[your/his/her]** 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/they]** were growing up, before age 14, did **[your/his/her]** mother ever 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/his/her]** mother's occupation when [you/he/she] [were/was] 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 (GO TO DM008A)

99. RF (GO TO DM008A)

ASK FOR OCCUPATIONS RATHER THAN JUST COMPANY NAMES

DM007bx

IWER: CODE WITHOUT ASKING:

Was the mother's occupation a farm owner or manager?

1. Yes GO TO DM007B2

5. No GO TO DM007B1

DM007B1

IWER TO CODE SOCIAL CLASS

(Social Class Categories)

1. Professional workers

2. Managerial and technical

3. Non-manual

4. Skilled manual

5. Semi-skilled

6. Unskilled

7. Unable to classify

IF (DM007bx = 1) ASK DM007B2 OTHERS GO TO DM008A

DM007B2. What was the acreage of the farm?

1. 0-29 acres

2. 30-49 acres

3. 50-99 acres

4. 100-199 acres

5. 200 or more acres

98. DK

99. RF

NOTE

Farm owners and managers (0-29 acres) get put into semi-skilled

Farm owners and managers (30-49 acres and area not stated) get put into skilled

Farm owners and managers (50-99 acres) get put into non-manual

Farm owners and managers (100-199 acres) get put into managerial and technical

Farm owners and managers (200 or more acres) get put into professional

DM008A: While [you/they] were growing up, before age 14, did [your/his/her] father ever 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/his/her] father's occupation when [you/he/she] [were/was] 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 (GO TO DM009)

99. RF (GO TO DM009)

(TILDA)

ASK FOR OCCUPATIONS RATHER THAN JUST COMPANY NAMES

DM008bx

IWER: CODE WITHOUT ASKING:

Was the father's occupation a farm owner or manager?

1. Yes GO TO DM008b2

5. No GO TO DM008b1

DM008B1

IWER TO CODE SOCIAL CLASS

(Social Class Categories)

1. Professional workers

2. Managerial and technical

3. Non-manual

4. Skilled manual

5. Semi-skilled

6. Unskilled

7. Unable to classify

IF (DM008bx = 1) ASK DM008B2 OTHERS GO TO DM009

DM008B2. What was the acreage of the farm?

NOTE: If the respondent is unsure ask them to round to the nearest 10 acres

1. 0-29 acres

2. 30-49 acres

3. 50-99 acres

4. 100-199 acres

5. 200 or more acres

98. DK

99. RF

NOTE:

Farm owners and managers (0-29 acres) get put into semi-skilled

Farm owners and managers (30-49 acres and area not stated) get put into skilled

Farm owners and managers (50-99 acres) get put into non-manual

Farm owners and managers (100-199 acres) get put into managerial and technical

Farm owners and managers (200 or more acres) get put into professional

IWER: PLEASE SHOW CARD DM1

DM009: What was the highest grade of school [your/his/her] 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/his/her] 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

IF HH005 = 1 (SELF INTERVIEW) intstatusW3==2 or 4 or 6 or 8 (RESPONDENT IS WAVE 3 RE-CONTACT OR NEW SPOUSE / NEWLY ELIGIBLE) ASK DM036 OTHERS GO TO DM053

DM036. Before age 14, was there a time of several months or more when [your/Rname's] father had no job?

[IWER: if [R/proxy] mentions never living with father when growing up, choose code 7.

1. YES

5. NO

6. Father never worked/always disabled

7. Never lived with father/father was not alive

98. DK

99. RF

HRS

DM053: PRE-AMBLE TO QUESTIONS ABOUT ACCOMMODATION WHILE GROWING UP

Iwer: "The following questions ask you to think about the accommodation that [you/he/she] lived in for most years until [you/he/she] [were/was] about fourteen years old. Please keep this in mind"

DM053. How many rooms did [your/his/her] household occupy in that accommodation, including bedrooms but excluding kitchen, bathrooms, and hallways?

IWER: Do not count boxroom, cellar, attic etc.

_____ (0..50)

-99. RF

-98. DK

(SHARELIFE)

DM054: Including [yourself/Rname], how many people lived in [your/his/her] household?

_____ (0..50)

-99. RF

-98. DK

(SHARELIFE)

SHOWCARD DM4

DM055

Please look at show card DM4. Did that accommodation have any of the features on this card?

IWER: Please code all that apply.

1. Fixed bath

2. Cold running (piped) water supply

3. Hot running (piped) water supply

4. Inside toilet

5. Central heating

6. Electricity

96. None of these

98. DK

99. RF

(SHARELIFE)

SHOWCARD DM5

DM056: Please look at showcard DM5. Was the accommodation...

1. Owned by your/their parent(s) or guardian(s) either owned outright or mortgaged

2. Owned by another relative (not the respondent's parent(s) or guardian (s))

3. Rented on the private market from a landlord

4. Rented from a local authority, housing cooperative (e.g. Dublin Artisans Dwelling) or a similar organisation

5. Rented from an employer (e.g. Ivy Trust, Church of Ireland, Army, Garda, CIE)

6. Occupied rent free and provided by an employer (e.g. Ivy Trust, Church of Ireland, Army, Garda, CIE)

7. Occupied rent free (but not owned by a household member or employer)

95. Other

98. DK

99. RF

(SHARELIFE)

SHOWCARD DM6

DM057: Please look at show card DM6. Approximately how many books were there in that accommodation? Do not count magazines, newspapers, or school books.

1. None or very few (0-10 books)
 2. Enough to fill one shelf (11-25 books)
 3. Enough to fill one bookcase (26-100 books)
 4. Enough to fill two bookcases (101-200 books)
 5. Enough to fill more than two bookcases (more than 200 books)
98. DK
99. RF
(SHARELIFE)

DM052 In this study we are very interested in examining migration patterns within Ireland and also the sorts of services available in [your/his/her] local area when [you/he/she] [were/was] a child.

Thinking back to [your/his/her] childhood, at which address did [you/he/she] live at for most years until [you/he/she] [were/was] about fourteen years old?

[IW to probe to get most accurate answer. Name of house or number is not necessary. Townland is necessary. Ask about spellings especially if in Irish]

Address line 1: Estate/street/road

Address Line 2: District/suburb (Urban) OR Townland/Parish (Rural) Address Line 3:
Village/Town/City

Address Line 4: County (select from list)

99. RF
98. DK
(TILDA)

**IF instatusW3≠4 OR 8 (NOT NEW RESPONDENT) AND DM008BFFW1 OR DM008BFFW2 is FARMER OR SOME VARIANT OF SPELLING THEN ASK DM058
(RESPONDENT REPORTED IN WAVE 1 OR WAVE 2 THAT THEIR FATHER WAS A FARMER)
ELSE GO TO SECTION 4.3**

DM058: In a previous interview [you/Rname] said that [your/his/her] father was involved in farming.

What was the acreage of the farm?

NOTE: If the respondent is unsure ask them to round to the nearest 10 acres

1... 1000

- 97. FATHER WAS NOT A FARMER
-98. DK
-99. RF
(SHARELIFE)

4.3 Siblings information

IF intstatusW3==2 or 4 or 6 or 8 (NEW SPOUSE/NEWLY ELIGIBLE) OR RE-CONTACT ASK DM037

OTHERS GO TO SECTION 4.4

IWER: Include step siblings and adopted siblings in the following questions

DM037. **Now I have some questions about [your/Rname's] brothers and sisters. Do/does [you/he/she] have any brothers or sisters (even if now deceased)?**

1. Yes

5. No GO TO DM011

DM049: **Thinking about [your/his/her] brothers and sisters, how many were there in total, even if now deceased?**

_____ (1...20)

-98. DK

-99. RF

DM050: Were **[you/they]**:

1. The youngest

2. The oldest

3. Neither the youngest nor the oldest

98. DK

99. RF

4.4 Migration History

**CAP1: IF intstatusW3==4 or 8 (NEW SPOUSE/NEWLY ELIGIBLE) ASK DM011 through DM019
IF intstatusW3==2 or 6 (RECONTACT) & DM017FFW1 = 1 GO TO DM046
ELSE GO TO DM024**

DM011: Were [you/they] born in the Republic of Ireland?

- 1. Yes **GO TO DM015**
- 5. No **GO TO DM012**
- (HRS)

DM012: In which country were [you/they] born?

- Text: up to 60 characters
- 98. DK
- 99. RF
- (HRS)

DM013: At what age did [you/he/she] first move to the Republic of Ireland?

- 0 ... 100
- 98. DK
- 99. RF
- (HRS)

DM014: What is [your/his/her] nationality?

- Text: up to 60 characters
- 98. DK
- 99. RF
- (HRS)

DM015: (Since coming to Ireland) Have [you/they] always lived in this county?

- 1. Yes **GO TO DM024**
- 5. No **GO TO DM016**
- 98. DK **GO TO DM016**
- 99. RF **GO TO DM016**
- (MHAS/TILDA)

**DM016: About how many years have [you/they] 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 GO TO DM017

IF DM011=5 GO TO DM024

DM017: Have [you/they] 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/they] 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/his/her] first long stay in a country other than the Republic of Ireland.
At what age did [you/he/she] go?

1 ... 100

-98. DK

-99. RF (MHAS/TILDA)

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

(HRS/ELSA/SHARE)

IF DM017FFW1=1 GO TO DM046 and DM047

**IF intstatusW3==4 or 8 (NEW SPOUSE / OTHER ELIGIBLE) AND DM017=1 GO TO DM046 and DM047
ELSE NEXT SECTION**

Last time we interviewed [you/Rname], [you/he/she] told us that [you/he/she] lived abroad
(outside of the Republic of Ireland) for more than 6 months...

DM046: Think about the country [you/Rname] spent most time in when [you/he/she] lived
outside of the Republic of Ireland. Was it?

1. The United Kingdom

2. The United States

95. Other (specify) **GO TO DM046oth**

96. None, recording error GO TO DM024

98. DK GO TO DM024

99. RF GO TO DM024

DM046oth: Other country (specify)

Text: up to 60 characters

SHOW CARD DM7

DM047: Look at card DM7. Now think about the reasons that made [your/him/her] come back.

Why did [you/Rname] return to Ireland? MULTI-CODE

1. To work [dm047_01]

2. To retire [dm047_02]

3. For family reasons (for example: a family member was returning; to look after a family member,
such as elderly parents; or to bring up children in Ireland) [dm047_03]

4. [I/he/she] was unhappy / homesick [dm047_04]

95. Other(specify) GO TO DM047oth [dm047_95]

98. DK [dm047_98]

99. RF [dm047_99]

DM047oth: Please specify other

IF (HH005 = 1) ASK DM024 OTHERS GO TO NEXT SECTION

**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

SECTION 5. TRANSFERS TO CHILDREN (TC)

IWER: CHECK IF RESPONDENT IS FAMILY RESPONDENT (CSO17=2 or 3).

5.0 CHILDREN'S CIRCUMSTANCES

Looping & routing instructions for respondents who participated in wave 1 and/or wave 2

If child is co-resident at present: copy information on TC101, TC102, TC103 and TC104 from the coverscreen (so do not ask these questions to the respondent but populate the variables). Then say "Beginning [continuing] with *CHILdN's FIRST NAME*" and go to TC105.

If child was co-resident at last wave but is non-resident at present, copy information on TC101 from the coverscreen (so do not ask this question to the respondent but populate the variable). Then say "Beginning [continuing] with *CHILdN's FIRST NAME*" and ask TC102.

If child is non-resident at present and was also non-resident at last wave and family respondent was also family respondent at last wave, say "Beginning [continuing] with *CHILdN's FIRST NAME*" and go to TC101.

If child is non-resident at present and was also non-resident at last wave and family respondent was NOT family respondent at last wave, go to TC118. Use look up tables as discussed.

If respondent has no co-resident children at present and did not have any non-resident child at last wave, go to TC118.

Looping & routing instructions for new respondents and proxies

As above, add an underscore for each child after all variables. For co-resident children, this is the underscore of their person number coming from the coverscreen (03, 05 etc). For non-resident children, follow the typical notation of 35 for first non-resident child, 36 for second non-resident child etc.

First ask questions about co-resident children. Copy information on TC101, TC102, TC103 and TC104 from the coverscreen (so do not ask these questions to the respondent but populate the variables). Then say "Next are some questions about [your/Rname's] living children. Beginning with child.." (continuing with child..) and go to TC106.

After asking about co-resident children, go to TC118. If there are no co-resident children, go directly to TC118.

TC_INTRO:

Family and friends often help one another in different ways. Part of our research involves finding out how they do that. The next questions are about [your/Rname's] family and friends, beginning with [your/his/her] children (and those of your/his/her (late) [husband/wife/partner]). The answers that you give will be kept confidential and will only be used for research purposes.

Note: By 'children' we mean biological, step- and adopted children.

NOTE: 'late' to appear if cs006 = 6

CAPI instruction: If child is co-resident at present, pre-select options in TC101, TC102, TC103, TC104 (information comes from Coverscreen)

If child was co-resident at last wave but is not-resident at present, pre-select options in TC101 (information comes from Coverscreen)

TC101: Our records show that when we last interviewed [you/Rname], [you/he/she] had a child called [Name]. Is this correct?

Beginning with *CHILDn's FIRST NAME*.

SUBSEQUENT LOOP ITERATIONS READ

Now think about *CHILDn's FIRST NAME*.

1. Yes, collected information is correct (**GO TO TC102 through TC115 THEN GO TO THE NEXT CHILD**)
2. No, child does not belong in the list anymore. E.g. Child of partner from whom R separated GO TO THE NEXT CHILD
3. Child has since died GO TO TC116 THEN GO TO NEXT CHILD
5. No, Respondent never had this child (Recording Error) GO TO THE NEXT CHILD
95. Other. SPECIFY: GO TO THE NEXT CHILD [tc101oth_n]
(ELSA)

TC102: How old is [{Child's name}]?

0...120

-98. DK

-99. RF

IF (TC102= -98 OR -99) ASK TC103. OTHERS GO TO TC104

TC103: Which of these age groups applies to [{Child's name}]?

1. Under 16
2. 16 - 24
3. 25-49
4. 50-59
5. 60-64
6. 65 or over
98. DK
99. RF

TC104: Where does [CHILD'S NAME] live at present?

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.
6. Living in the same dwelling as the Respondent

98. DK
99. RF
(MHAS)

Do not ask TC105 to new respondents (INTSTATUS=4), skippers (INTSTATUS=2), proxies (INTSTATUS=5,6,7,8) and new family respondents (CS017FF(W2)=1,4)

TC105: Is [CHILD'S NAME]'s highest level of education still (feed-forward from previous wave)....

- 1. Yes GO TO TC106
- 5. No GO TO TC106
- 98. DK GO TO TC106
- 99. RF GO TO TC106

CAPI instruction: If TC105=1, preselect correct option in TC106

IWER: SHOW CARD TC1

TC106: Please look at card TC1. What level of education has CHILD'S NAME attained?

IWER: CODE THE ONE THAT APPLIES

- 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/MHAS)

Do not ask TC107 to new respondents (INTSTATUS=4), skippers (INTSTATUS=2), proxies (INTSTATUS=5,6,7,8) and new family respondents (CS017FF(W2)=1,4)

TC107: Is [CHILD'S NAME]'s marital status still.... (feedforward from previous wave)

- 1. Yes GO TO TC108
- 5. No GO TO TC108
- 98. DK GO TO TC108
- 99. RF GO TO 108

CAPI instruction: IF TC107=1, pre-select option in TC108

TC108: What is [CHILD'S NAME]'s present marital status?

- 1. Married
- 2. Living with a partner as if married
- 3. Single (never married)
- 4. Separated
- 5. Divorced
- 6. Widowed
- 98 DK

99 RF
(HRS/MHAS)

Do not ask TC109 to new respondents (INTSTATUS=4), skippers (INTSTATUS=2), proxies (INTSTATUS=5,6,7,8) and new family respondents (CS017FF (W2)=1,4)

TC109. Is [CHILD'S NAME] employment status still (feed-forward from previous wave)...

- 1. Yes GO TO TC110
- 5. No GO TO TC110
- 98 DK GO TO TC110
- 99 RF GO TO TC110

CAPI instruction: IF TC109=1, pre-select correct option in TC110

IWER: SHOW CARD TC2

TC110: Please look at card TC2. What is [CHILD'S NAME]'s present employment status?

IWER: CODE THE ONE THAT APPLIES

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

CAPI: If Child is less than 16 years-old (TC102<16 OR TC103=1) skip TC111, TC112, TC113

I would like to ask about [Child's name] occupation. Could you tell me the name or title of this occupation?

NOTE to insert if TC110=4, 5, 7, 8, 9, 95, 98 or 99: *If not at work now, ask about highest paid job ever held*

IWER: If child is a farmer, tick 1 in TC111 and then go to TC113. If child is not a farmer, tick 5 in TC111 and then tick child's social class in TC112.

TC111: Is [child's name]'s occupation a farm owner or manager

- 1. Yes GO TO TC113
- 5. No GO TO TC112
- 98. DK GO TO TC114
- 99. RF GO TO TC114

TC112:

IWER TO SELECT SOCIAL CLASS

(Social Class Categories)

- 1 Professional workers
- 2 Managerial and technical
- 3 Non-manual
- 4 Skilled manual
- 5 Semi-skilled
- 6 Unskilled
- 7 Unable to classify – record job title (TC036a2)
- 8 Never worked
- 98 DK
- 99 RF

IF (TC111 = 1) ASK TC113 OTHERS go to TC114

TC113. What is (was) the acreage of the farm?

NOTE: If the respondent is unsure ask them to round to the nearest 10 acres

- 1. 0-29 acres
- 2. 30-49 acres
- 3. 50-99 acres
- 4. 100-199 acres
- 5. 200 or more acres
- 98. DK
- 99. RF

NOTE:

Farm owners and managers (0-29 acres) get put into semi-skilled

Farm owners and managers (30-49 acres and area not stated) get put into skilled

Farm owners and managers (50-99 acres) get put into non-manual

Farm owners and managers (100-199 acres) get put into managerial and technical

Farm owners and managers (200 or more acres) get put into professional

CAPI: If child is less than 16 years-old (TC102<16 OR TC103=1) DO NOT ASK TC114 and TC115

TC114: How many children does [CHILD'S NAME] have, if any?

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

CAPI: IF TC114=0 (IF NO CHILDREN) LOOP to next CHILD, otherwise ask TC115 and then loop to the next child.

TC115: Are any of [his/her] children under age 18?

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

TC118. [Apart from the children we have already talked about] [Do/Does] [you/Rname] or ([your/his/her] [husband/wife/partner]) have any [**other**] children or step-children who do not live in this household?

1. YES Go to TC119

5. No GO to TC122

98. DK GO to TC122

99. RF GO to TC122

TC119: Please tell me the name of [the oldest/next oldest] child

Text: up to 60 characters

98. DK

99. RF

(HRS/MHAS)

TC120: Is [name of child] male or female?

1. Male

2. Female

98. DK

99. RF

(HRS/MHAS)

Then loop tc102 to tc115

DECEASED CHILD

CAPI: IF (TC101 = 3) ASK TC116Y and TC116M OTHERWISE GO TO NEXT CHILD

TC116. I'm very sorry to hear that, let me offer my sincere condolences. Can you tell me what month and year did *CHILDn's NAME* die?

MONTH:

YEAR:

_____ YEAR

-98. DK -99.RF

[tc116y_n]

_____ MONTH

-98. DK -99.RF

[tc116m_n]

TC122 NEEDS TO BE ASKED TO ALL RESPONDENTS OF THE TC SECTION.

CAPI: If child has died (TC101=2), then this child should not be included in the count of living children at TC122

Once you have looped through all the children ask:

TC122: Let me just check. So in total you have [Respondent name has] [number of living children] children. Is this correct?

0. Yes, respondent has no living children GO TO TC023

1. Yes, respondent has 1 living child GO TO TC008

2. Yes, respondent has 2 living children GO TO TC008

3. Yes, respondent has 3 living children GO TO TC008

4. Yes, respondent has 4 living children GO TO TC008

.....

20. Yes, respondent has 20 living children GO TO TC008

-98. DK GO TO TC008

-99. REF GO TO TC008

-97. Respondent disagrees and says he has one or more children. Collect information on this child (these children) starting from TC119 and follow the routing from there. If that's the case, give a person number to this child/these children.

Families and friends often help one another in different ways. Part of our research involves finding out how they do that.

5.1 Financial assistance given to children

CAPI: do not ask questions in sections 5.1 to 5.4 (so questions TC008 to TC022) if respondent has no living children (TC122=0). If respondent has no living children, go to TC023

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: Not counting any shared housing or shared food, in the last two years [have/has] [you/Rname] (or [your/his/her] (late) [husband/wife/partner]) given financial help or gifts, including help with education, of €5,000 or more to any child (or grandchild)?

DEFINITION: BY FINANCIAL HELP WE MEAN GIVING MONEY, HELPING PAY BILLS, OR COVERING SPECIFIC TYPES OF COSTS SUCH AS THOSE FOR MEDICAL CARE OR INSURANCE, SCHOOLING, DOWN PAYMENT FOR A HOME, RENT, ETC. THE FINANCIAL HELP CAN BE CONSIDERED SUPPORT, A GIFT OR A LOAN.

1. Yes

5. No **GO TO TC011**

98. DK **GO TO TC011**

99. RF **GO TO TC011**

(HRS/MHAS/SHARE)

TC008a. Which child was that?

[IWER: CHOOSE ALL THAT APPLY]

Note for the programmer: I suggest that if the transfer was made to a particular child, then variable tc008a and the variables with a similar format (i.e. tc011a, tc014a, tc016a, tc019a and tc021a) should be followed by: underscore _03 if the transfer was made to child whose person number ends in 03; _05 if the transfer was made to child whose person number ends in 05; _36 if the transfer was made to child whose person number ends in 36 etc.

	All resident children/step children + Spouse/partners
	All non-resident children/step children + Spouse/partners
	Children/step children who have died + Spouse/partners
	New non-resident children/step children + Spouse/partners
	All children
	Grandchildren
95	OTHER . SPECIFY [tc008aoth_n]
98	DK
99	RF

NOTE: NAMES OF ALL LIVING AND DEAD CHILDREN/STEPCHILDREN AND THEIR SPOUSES/PARTNERS, IF ANY, ARE DISPLAYED.

TC009: About how much was this support in total?

€5,000 ... €9,999,999 **GO TO TC011**

-98. DK **GO TO TC010**

-99. RF **GO TO TC010**

(HRS/MHAS/SHARE)

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

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: € 7,500, €20,000, €50,000, €100,000.

(Unfolding sequence)

-98. DK

-99. RF

(HRS/MHAS/SHARE)

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

1 Yes

5. No **GO TO TC014**

98. DK **GO TO TC014**

99. RF **GO TO TC014**

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)

TC011a. Who was this support given to?

[IWER: CHOOSE ALL THAT APPLY]

	All resident children/step children + Spouse/partners
	All non-resident children/step children + Spouse/partners
	Children/step children who have died + Spouse/partners
	New non-resident children/step children + Spouse/partners
	All children
	Grandchildren
95	OTHER . SPECIFY [tc011aoth_n]
98	DK
99	RF

NOTE: NAMES OF ALL LIVING AND DEAD CHILDREN/STEPCHILDREN AND THEIR SPOUSES/PARTNERS, IF ANY, ARE DISPLAYED.

TC012: About how much was this support in total?

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

€250 ... €10,000,000 **GO TO TC043**

-98. DK **GO TO TC013**

-99. RF **GO TO 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)

-98. DK

-99. RF

IWER: SHOW CARD TC3

TC043: Please look at card TC3. What was the main reason for this assistance or gift?

[IWER: CODE THE ONE THAT APPLIES]

1. To meet basic needs
 2. To buy or furnish a house or apartment
 3. To help with a large item of expenditure (other than buying a house)
 4. For a major family event (birth, marriage, other celebration)
 5. To help with a divorce
 6. To help following a bereavement or illness
 7. To help with unemployment
 8. For further education
 9. To meet a legal obligation (e.g. alimony or compulsory payments for parents' care)
 96. No specific reason
 95. Other reason
- (SHARE)

5.2 Non-financial assistance given to children

CAPi instruction: as questions in section 5.2 are about non-financial assistance given to non-resident children, only non-resident children should appear in the list in questions tc014a and tc016a.

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

TC014: In the last 2 years, **excluding** childcare, [have/has] [you/he/she] (and/or [your/his/her] spouse/partner) spent at least 1 hour a week helping [your/his/her] adult children and/or grandchildren with things like household chores - such as gardening, transportation and shopping - or with paperwork, such as filling out forms?

1. Yes

5. No **GO TO TC016**

98. DK **GO TO TC016**

99. RF **GO TO TC016**

(TILDA)

TC014a. Who was this support given to?

[IWER: CHOOSE ALL THAT APPLY]

	All non-resident children/step children + Spouse/partners
	Non-resident Children/step children who have died + Spouse/partners
	New non-resident children/step children + Spouse/partners
	Grandchildren
95	OTHER . SPECIFY [tc014aoth_n]
98	DK
99	RF

NOTE: NAMES OF ALL LIVING AND DEAD NON-RESIDENT CHILDREN/STEPCHILDREN AND THEIR SPOUSES/PARTNERS, IF ANY, ARE DISPLAYED.

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

1 ... 750

-98. DK

-99. RF

(TILDA)

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

1. Yes

5. No **GO TO TC018**

97. Not applicable/does not have any grandchildren **GO TO TC018**

98. DK **GO TO TC018**

99. RF GO TO TC018
(HRS/SHARE)

TC016a. Which of your children are/is the parent(s) of these grandchildren?
[IWER: CHOOSE ALL THAT APPLY]

	All non-resident children/step children + Spouse/partners
	Non-resident Children/step children who have died + Spouse/partners
	New non-resident children/step children + Spouse/partners
95	OTHER . SPECIFY [tc016aoth_n]
98	DK
99	RF

NOTE: NAMES OF ALL LIVING AND DEAD NON-RESIDENT CHILDREN/STEPCHILDREN AND THEIR SPOUSES/PARTNERS, IF ANY, ARE DISPLAYED.

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

1 ... 750

-98. DK

-99. RF

(HRS/SHARE)

5.3 Financial assistance received

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

TC018: In the last two years,[have/has] [you/he/she] (or [your/his/her] spouse/partner) received financial or in-kind support from any of [your/his/her] 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 **GO TO TC021**

99. RF **GO TO TC021**

(HRS)

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

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

€250 ... €10,000,000 **GO TO TC019a**

-98. DK **GO TO TC020**

-99. RF **GO TO TC020**

(HRS)

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

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: € 500, €1,000, €5,000, €10,000.

(unfolding sequences)

-98. DK
 -99. RF
 (HRS)

TC019a. Who gave this support?

[IWER: CHOOSE ALL THAT APPLY]

	All resident children/step children + Spouse/partners
	All non-resident children/step children + Spouse/partners
	Children/step children who have died + Spouse/partners
	New non-resident children/step children + Spouse/partners
	All children
	Grandchildren
95	OTHER . SPECIFY [tc019aoth_n]
98	DK
99	RF

NOTE: NAMES OF ALL LIVING AND DEAD CHILDREN/STEPCHILDREN AND THEIR SPOUSES/PARTNERS, IF ANY, ARE DISPLAYED

IWER: SHOW CARD TC3

TC044: Please look at card TC3. What was the main reason for this assistance or gift?

[IWER: CODE THE ONE THAT APPLIES]

1. To meet basic needs
2. To buy or furnish a house or apartment
3. To help with a large item of expenditure (other than buying a house)
4. For a major family event (birth, marriage, other celebration)
5. To help with a divorce
6. To help following a bereavement or illness
7. To help with unemployment
8. For further education
9. To meet a legal obligation (e.g. alimony or compulsory payments for parents' care)
96. No specific reason
95. Other reason

(SHARE)

5.4 Non-financial assistance received

CAP1 instruction: as questions in section 5.4 are about non-financial assistance received from non-resident children, only non-resident children should appear in the list in questions tc021a.

INTRO: READ OUT The next section will ask about regular non-financial assistance that [you/Rname] received from [your/his/her] 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.

TC021: In the last 2 years, [have/has] [your/Rname] (and/or [your/his/her] spouse's/partner's) children or grandchildren spent at least 1 hour a week, helping [you/him/her] and/or [your/his/her] spouse/partner with things like household chores - such as gardening, transportation and shopping - or with paperwork, such as filling out forms?

1. Yes

5. No **GO TO TC023**

98. DK **GO TO TC023**

99. RF **GO TO TC023**

(TILDA)

TC021a. Who gave this help?

[IWER: CHOOSE ALL THAT APPLY]

	All non-resident children/step children + Spouse/partners
	Non-resident Children/step children who have died + Spouse/partners
	New non-resident children/step children + Spouse/partners
	Grandchildren
95	OTHER . SPECIFY [tc021aother_n]
98	DK
99	RF

NOTE: NAMES OF ALL LIVING AND DEAD NON-RESIDENT CHILDREN/STEPCHILDREN AND THEIR SPOUSES/PARTNERS, IF ANY, ARE DISPLAYED

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

1 ... 750

-98. DK

-99. RF

(TILDA)

5.5 Other relatives

INTRO: READ OUT Relatives can have important effects on [your/his/her] life, especially if someone in [your/his/her] family needs help. For this reason I'd like to ask some questions about [your/his/her] relatives and friends. By this I mean family members other than the ones we have already discussed.

TC023: In the last 2 years, did [your/his/her] relatives give [you/him/her] (and [your/his/her] spouse/partner) any help with things like household chores - such as gardening, transportation and shopping - or with paperwork, such as filling out forms?

1. Yes

5. No **GO TO TC025**

98. DK **GO TO TC025**

99. RF **GO TO TC025**

(SHARE)

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

0 ... 750

-98. DK

-99. RF

(SHARE)

TC025: In the last 2 years, did [you/he/she] (or [your/his/her] spouse/partner) give any kind of help to [your/his/her] relatives with things like personal care, household chores - such as gardening, transportation and shopping - or with paperwork, such as filling out forms?

1. Yes

5. No **GO TO TC027**

98. DK **GO TO TC027**

99. RF **GO TO TC027**

(SHARE)

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

0 ... 750

-98. DK

-99. RF

(SHARE)

5.6 Friends and neighbours

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

TC027: In the last 2 years, did [your/his/her] neighbours or friends regularly give [you/him/her] (or [your/his/her] spouse/partner) any kind of help with things like household chores - gardening, transportation and shopping - or with paperwork, such as filling out forms?:

IWER: CODE THE ONE THAT APPLIES

1. Yes

5. No **GO TO TC029**

98. DK **GO TO TC029**

99. RF **GO TO TC029**

(SHARE /12 months)

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

0 ... 750

-98. DK

-99. RF

(SHARE)

TC029: In the last 2 years, did [you/he/she] (or [your/his/her] spouse/partner) regularly give any kind of help to [your/his/her] friends, and neighbours (who did not pay [you/him/her]) with things like personal care, household chores - such as gardening, transportation and shopping - or with paperwork, such as filling out forms?

1. Yes

5. No **GO TO TC031**

98. DK **GO TO TC031**

99. RF **GO TO TC031**

(SHARE)

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

0 ... 750

-98. DK

-99. RF

(SHARE)

IF (HH005 = 1) ASK TC031 OTHERS GO TO NEXT SECTION

TC031. IWER: HOW OFTEN DID R RECEIVE ASSISTANCE WITH ANSWERS IN SECTION TC?

1. NEVER

2. A FEW TIMES

3. MOST OR ALL TIMES

SECTION 6. PHYSICAL & COGNITIVE HEALTH (PH)

[For self interviews, information from the last self interview is always fed forward; information provided by proxy is not fed forward]

[For proxy interviews, no information is ever fed forward]

IWER to read out at start of PH section:

IF intstatusW3 = 1, 2; In this section, we will be asking you questions about your health and how it has changed since your last interview on ... *(provide date of last interview)*

IF intstatusW3 = 3; We know that a proxy respondent completed the interview on your behalf at the last wave but for confidentiality purposes, we could not ask them all of the health-related questions. Therefore, in this section, we will be asking you questions about your health and how it has changed since the last interview that we had with you on ... *(provide date of Rname's last interview)*.

IF intstatusW3 = 5,6; In this section, we will be asking you questions about Rname's health and how it has changed since *[his/her]* last interview on ... *(provide date of his/her last interview)*

IF intstatusW3 = 7; In this section, we will be asking you questions about Rname's health and how it has changed since *the* last interview on ... *(provide date of the last interview)*

IWER: make a note of the date of last interview in case respondent needs a reminder of this at a later stage during the interview

6.1 Overall health and functional limitations

***IF (HH005 = 2,3,4,5 or 6 - PROXY INTERVIEW) GO TO PH003**

IWER: SHOW CARD PH1

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

Would you say your health is..

IWER: CODE THE ONE THAT APPLIES

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

IWER: SHOW CARD PH1

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

IWER: CODE THE ONE THAT APPLIES

1. excellent,
2. very good,
3. good,
4. fair,
5. or, poor?
98. DK

99. RF
(NSHAP)

IWER: READ OUT

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

NOTE: INCLUDING MENTAL HEALTH PROBLEMS

IWER: CODE THE ONE THAT APPLIES

- 1. Yes **GO TO PH004**
 - 5. No **GO TO PH006**
 - 98. DK **GO TO PH006**
 - 99. RF **GO TO PH006**
- (ELSA/ HRS/ SHARE)

IWER: READ OUT

PH004: Does this illness or disability limit [your/his/her] activities in any way?

IWER: CODE THE ONE THAT APPLIES

- 1. Yes **GO TO PH005**
 - 5. No **GO TO PH006**
 - 98. DK **GO TO PH006**
 - 99. RF **GO TO PH006**
- (ELSA/ HRS)

IWER: READ OUT

PH005: For the past six months or more to what extent [have/has] [you/he/she] been limited because of a health problem in activities people usually do?

IWER: CODE THE ONE THAT APPLIES

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

***If (HH002 = 2 OR CS036 = 3 - respondent is in a nursing/residential home) GO TO PH008**

PH006: [Do/Does] [you/Rname] have any health problem or disability that limits the kind or amount of paid work [you/he/she] could do, should [you/he/she] want to?

IWER: CODE THE ONE THAT APPLIES

- 1. Yes **GO TO PH007**
 - 5. No **GO TO PH008**
 - 98. DK **GO TO PH008**
 - 99. RF **GO TO PH008**
- (ELSA/ HRS)

***IF (HH005 = 2,3,4,5 or 6 - PROXY INTERVIEW) GO TO PH008**

IWER: READ OUT

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

IWER: CODE THE ONE THAT APPLIES

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

IWER: READ OUT

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

IWER: CODE THE ONE THAT APPLIES

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

***IF (HH005 = 2,3,4,5 or 6 - PROXY INTERVIEW) GO TO PH101**

IWER: SHOW CARD PH1

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

IWER: CODE THE ONE THAT APPLIES

- 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/Rname's] eyesight and hearing.

PH101: [Do/Does] [you/he/she] 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/Does] [you/he/she] usually wear ordinary glasses, bifocals, varifocals or contact lenses?

CHOOSE THE ITEM WORN MOST OFTEN

1. Glasses
2. Bifocals
3. Contact lenses
4. Varifocals
98. DK
99. RF

ASK IF PH101a = 2 OTHERWISE GO TO PH102

PH101b: How long [have/has] [you/he/she] had bifocals?

1. Less than 1 year
2. More than 1 year
98. DK
99. RF

***IF (HH005 = 2,3,4,5 or 6 - PROXY INTERVIEW) GO TO PH105**

IWER: CODE THE ONE THAT APPLIES

IWER: SHOW CARD PH1a

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

1. excellent
2. very good
3. good
4. fair
5. or, poor?
6. Registered or legally blind
98. DK
99. RF

(ELSA/ HRS/ SHARE)

NOTE TO PROGRAMMER: Create new set of variables PH105FFW2_i that contain a list of

- all conditions fed forward from Wave 2 (i.e. those reported in Wave 1 and were confirmed to still exist in Wave 2 AND conditions newly reported in Wave 2) AND
- all conditions fed forward from Wave 1 (if R did not take part in wave 2 OR had a proxy interview in wave 2)

The logic for creating the above variable is as follows:

FOR i = 01 TO 03

IF (intstatusW3 = 1 & PH105FF_i (wave 2) = 1) OR (intstatusW3 = 2,3 & PH105FF_i (wave 1) = 1),

THEN PH105FFW2_i = 1; Otherwise PH105FFW2_i=0

IF (intstatusW3 = 1,2,3 & PH105FFW2_01-03=1), ASK PH105a

ALL OTHERS GO TO PH105

PH105a: Last time you were interviewed, you told us that you [had] (*insert conditions from PH105FFW2_i*). PAUSE

1. Continue (go to PH105Y_i)
2. Respondent disputes having one/all of these conditions

CONDITION DISPUTED

PH105X0 INTERVIEWER Which of the conditions is being disputed

- | | |
|---|--------------|
| 1. Cataracts (display if PH105FFW2_01=1) | [PH105X0_01] |
| 2. Glaucoma (display PH105FFW2_02=1) | [PH105X0_02] |
| 3. Age related macular degeneration (display if PH105FFW2_03=1) | [PH105X0_03] |

IF (PH105X0_01=1) THEN ASK

PH105X_01 It may be that we have a recording error about you having Cataracts. Can you confirm, that ...READ OUT.

1. You never had Cataracts (error from previous wave)
2. Cataracts were misdiagnosed

IF (PH105X0_02=1) THEN ASK

PH105X_02 It may be that we have a recording error about you having Glaucoma. Can you confirm, that ...READ OUT.

1. You never had Glaucoma (error from previous wave)
2. Glaucoma was misdiagnosed

IF (PH105X0_03=1) THEN ASK

PH105X_03 It may be that we have a recording error about you having Age related macular degeneration. Can you confirm, that ...READ OUT.

1. You never had Age related macular degeneration (error from previous wave)
2. Age related macular degeneration was misdiagnosed

IF (PH105FFW2_01 = 1 & PH105a = 1,2 & PH105X0_01 ≠ 1), ASK PH105Y_01. OTHERS GO TO PH105Y_02

PH105Y_01 Do you still have Cataracts?

1. Yes
5. No

IF (PH105FFW2_02 = 1 & PH105a = 1,2 & PH105X0_02 ≠ 1), ASK PH105Y_02. OTHERS GO TO PH105Y_03

PH105Y_02 Do you still have Glaucoma?

- 1. Yes
- 5. No

IF (PH105FFW2_03 = 1 & PH105a = 1,2 & PH105X0_03 ≠ 1), ASK PH105Y_03. OTHERS GO TO PH105Y_03 Do you still have Age related macular degeneration?

- 1. Yes
- 5. No

PH105

IF (intstatusW3 = 4,8), USE WORDING 'B', OTHERWISE USE WORDING 'A'

(A) Since [your/his/her/the] last interview, has a doctor ever told [you/Rname] that [you/he/she] [have/has] any of the following [other] eye diseases?

(B) Has a doctor ever told [you/Rname] that [you/he/she] [have/has] any of the following eye diseases? [DISPLAY ALL CONDITIONS]

IWER: READ OUT. CODE ALL THAT APPLY.

- | | |
|-------------------------------------|-----------------------|
| 1. Cataracts | [ph105_01] |
| 2. Glaucoma | [ph105_02] |
| 3. Age related macular degeneration | [ph105_03] |
| 95. Other (please specify) | [ph105_95] [ph105oth] |
| 96. None | [ph105_96] |
| 98. DK | [ph105_98] |
| 99. RF | [ph105_99] |
| (ELSA) | |

IF ((PH105_01 = 1) OR (PH105FFW2_01 = 1 & PH105a = 1, 2 & PH105X0_01 ≠ 1)) THEN ASK PH106. OTHERS GO TO PH107

PH106: [Have/Has] [you/he/she] 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/Does] [you/he/she] use any of the following aids or appliances to help [you/him/her] with [your/his/her] hearing?

IWER: READ OUT

- | | |
|-----------------------------------|------------|
| 1. Hearing aid (all the time) | [ph107_01] |
| 2. Hearing aid (some of the time) | [ph107_02] |
| 3. Amplifier | [ph107_03] |
| 96. None of the above | [ph107_96] |
| 98. DK | [ph107_98] |
| 99. RF | [ph107_99] |

PH145: Do you feel [you/he/she] [have/has] a hearing loss?

IWER: READ OUT

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

***IF (HH005 = 2,3,4,5 or 6 - PROXY INTERVIEW) GO TO PH143**

IWER: CODE THE ONE THAT APPLIES

IWER: SHOW CARD PH1

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

- 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)

PH145 – NOW MOVED TO BEFORE PH108

Smell

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

IWER: CODE THE ONE THAT APPLIES

IWER: SHOW CARD PH1

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

1. excellent,
2. very good,
3. good,
4. fair,
5. or, poor?

98. DK

99. RF

(TILDA)

Taste

IWER: CODE THE ONE THAT APPLIES

IWER: SHOW CARD PH1

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

1. excellent,
2. very good,
3. good,
4. fair,
5. or, poor?

98. DK

99. RF

(TILDA)

6.2 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: SHOW CARD PH1

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

IWER: CODE THE ONE THAT APPLIES

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

PH142

IF (intstatusW3 = 1), USE WORDING A

IF (intstatusW3 = 2,3,4), USE WORDING B

IWER: SHOW CARD PH1b

(A) Compared to the last time we interviewed you, would you say your memory is much better now, a bit better now, about the same, a bit worse now, or much worse now than it was then?

(B) Compared to 2 years ago, would you say your memory is much better now, a bit better now, about the same, a bit worse now, or much worse now than it was then?

IWER: CODE THE ONE THAT APPLIES

- | | |
|-----------------|-------------|
| 1. Much better | GO TO ph121 |
| 2. A bit better | GO TO ph121 |
| 3. Same | GO TO ph121 |
| 4. A bit worse | GO TO ph121 |
| 5. Much worse | GO TO ph121 |
| 98.DK | GO TO ph121 |
| 99.RF | GO TO ph121 |
- (HRS/TILDA)

***IF (HH005 = 2,3,4,5 or 6 - PROXY INTERVIEW) ASK PH143, OTHERS GO TO PH121**

IWER: SHOW CARD PH1

PH143: How would you rate [Rname's] day-to-day memory at the present time? Would you say it is?

IWER: CODE THE ONE THAT APPLIES

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

PH144

IF (intstatusW3 = 5,7), USE WORDING A

IF (intstatusW3 = 6,8), USE WORDING B

IWER: SHOW CARD PH1b

(A) Compared to [his/her/the] last interview would you say [Rname's] memory is much better now, a bit better now, about the same, a bit worse now, or much worse now than it was then?

IWER NOTE: You may need to remind the proxy of the date of the last interview with the R if it was a self interview.

(B) Compared to 2 years ago, would you say [Rname's] memory is much better now, a bit better now, about the same, a bit worse now, or much worse now than it was then?

IWER: CODE THE ONE THAT APPLIES

1. Much better
2. A bit better
3. Same
4. A bit worse
5. Much worse
98. DK
99. RF

PH147: How long have you known (Rname)?

IWER: CODE THE ONE THAT APPLIES

1. Less than 2 years
2. Between 2 and 5 years
3. Between 5 and 10 years
4. 10 years or greater
98. DK
99. RF

IQCODE

IWER: INTRO "Now we want you to remember what [RName] was like [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname] and to compare it with what [he/she] is like now. I will read out situations where [Rname] has had to use his/her memory or intelligence and we want you to indicate whether this has improved, stayed the same or got worse in that situation over those years. Note the importance of comparing his/her present performance with [10 years ago/when you first got to know Rname]. So if at that time [Rname] always forgot where [he/she] had left things, and [he/she] still does, then this would be considered "Not much changed".

IWER: SHOW CARD PH1c

PH148: Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname] how is [he/she] at: Remembering things about family and friends, such as occupations, birthdays, and addresses.

Is this much improved, a bit improved, not much changed, a bit worse or much worse?

IWER: CODE THE ONE THAT APPLIES

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse

6. Does not apply98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH149: Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at: Remembering things that have happened recently?
Is this much improved, a bit improved, not much changed, a bit worse or much worse?

IWER: CODE THE ONE THAT APPLIES

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply

98. DK
99.RF
(IQC CODE /HRS in modified form)

IWER: SHOW CARD PH1c

PH150: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at): Recalling conversations a few days later?
(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply

98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH151: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:) Remembering [his/her] address and telephone number?
(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply

98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH152: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:)Remembering what day and month it is?
(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
 2. A bit Improved
 3. Not much changed
 4. A bit worse
 5. Much worse
 6. Does not apply
98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH153: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:)

Remembering where things are usually kept?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
 2. A bit Improved
 3. Not much changed
 4. A bit worse
 5. Much worse
 6. Does not apply
98. DK
99.RF
(HRS in modified form)

IWER: SHOW CARD PH1c

PH154: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:) Remembering where to find things which have been put in a different place than usual?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
 2. A bit Improved
 3. Not much changed
 4. A bit worse
 5. Much worse
 6. Does not apply
98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH155: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:) Knowing how to work familiar machines around the house?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
 2. A bit Improved
 3. Not much changed
 4. A bit worse
 5. Much worse
 6. Does not apply
98. DK

99.RF

(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH156: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:.) Learning to use a new gadget or machine around the house?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply

98. DK

99.RF

(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH157: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:.) Learning new things in general?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply

98. DK

99.RF

(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH158: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:.) Following a story in a book or on TV?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply

98. DK

99.RF

(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH159: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:.) Making decisions on everyday matters?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved

3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply
98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH160:(Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:) Handling money for shopping?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply
98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH161:(Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [Rname] at:) Handling financial matters, that is, [his/her] pension or dealing with the bank?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply
98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH162: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:) Handling other everyday arithmetic problems, such as, knowing how much food to buy, knowing how long between visits from family or friends?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply
98. DK
99.RF
(IQC CODE/HRS in modified form)

IWER: SHOW CARD PH1c

PH163: (Compared with [(IF PH147=4) 10 years ago/(IF PH147=1,2,3,98,99) when you first got to know Rname], how is [he/she] at:)Using [his/her] intelligence to understand what's going on and to reason things through?

(Is this much improved, a bit improved, not much changed, a bit worse or much worse?)

1. Much Improved
2. A bit Improved
3. Not much changed
4. A bit worse
5. Much worse
6. Does not apply

98. DK

99.RF

(IQC CODE/HRS in modified form)

IF HH005=2,3,4,5 OR 6 (PROXY INTERVIEW), GO TO PH201

6.3 MMSE

FOR ALL COGNITIVE QUESTIONS IN THE INTERVIEW, THE OPTION 'UNABLE TO CARRY OUT TASK' SHOULD ONLY BE USED IF

- 1) THE RESPONDENT HAS A PHYSICAL LIMITATION (SEVERE VISUAL IMPAIRMENT, HEARING IMPAIRMENT OR OTHER PHYSICAL DISABILITY) WHICH WOULD PREVENT THEM FROM ATTEMPTING THE QUESTION/TASK**
- 2) THE RESPONDENT CANNOT ATTEMPT THE QUESTION/TASK BECAUSE THEY ARE ILLITERATE OR NOT FLUENT IN ENGLISH**

IF THE RESPONDENT SAYS THAT THEY CAN'T/WON'T/ DON'T WANT TO ANSWER A PARTICULAR QUESTION BUT IT WOULD BE POSSIBLE FOR THEM TO ATTEMPT IT, THEN THE 'REFUSED' OPTION SHOULD BE USED.

IF THE RESPONDENT ATTEMPTS A QUESTION/TASK AND GETS IT WRONG OR FAILS TO COMPLETE IT, THEN THEIR ANSWER IS INCORRECT, AND THE CORRESPONDING OPTION FOR THAT PARTICULAR QUESTION SHOULD BE CHOSEN (E.G. NONE CORRECT, NO WORDS RECALLED, NO INSTRUCTIONS COMPLETED CORRECTLY, NO OBJECTS IDENTIFIED ...ETC).

IF YOU DO NOT UNDERSTAND THESE INSTRUCTIONS YOU NEED TO CONTACT YOUR SUPERVISOR AND SEEK CLARIFICATION

PLEASE SIGNIFY WHETHER OR NOT YOU UNDERSTAND THESE INSTRUCTIONS BY CHECKING THE RELEVANT BOX BELOW.

1. Yes – I understand these instructions
2. No – I do not understand these instructions

DROP DOWN OPTIONS/FOLLOW ON SCREEN IF 'UNABLE TO CARRY OUT TASK' OPTION IS SELECTED FOR EACH COGNITIVE QUESTION:

PH146name: IWER: Please specify reason for being unable to carry out task. Is the respondent unable to attempt the question/task because of a:

1. Visual impairment
2. Hearing impairment
3. Other physical disability
4. Illiteracy
5. Non-fluent English speaker

DO NOT DISPLAY, THE BELOW LIST IS FOR INFORMATION PURPOSES ONLY:

PH121 = PH146year
PH126 = PH146season
PH122 = PH146month
PH123 = PH146day
PH124 = PH146date
PH127 = PH146country
PH128 = PH146county
PH129 = PH146city
PH130= PH146building
PH131= PH146floor
PH130= PH146building
PH132= PH146threewords
PH133= PH146sevens
PH134= PH146world (include extra response option for ph146world:“Unable to spell world forward”)
PH135= PH146recallwords
PH136= PH146objects
PH137= PH146phrase
PH138= PH146instruction
PH139 = PH146reading
PH140= PH146sentence
PH141= PH146pentagons
PH117= PH146complist1
PH118= PH146complist2
PH119= PH146iwerlist1
PH120= PH146iwerlist2
PH125= PH146animals
PH419= PH146initials
PH712 = PH146recomplist
PH713 = PH146reciwerlist
PH715 = PH146time

IWER: READ OUT

INTRO: 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.

IWER: ASK DIRECTLY TO RESPONDENT

PH121: **Please tell me what year it is.**

- 1. Year given correctly
 - 0. Year given incorrectly
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

PH126: **What season it is is it?.**

- 1. Season given correctly
- 0. Season given incorrectly
- 97. Unable to carry out the task
- 99. RF
- (MMSE)

NOTE: Scoring the season can be difficult as it can be somewhat arbitrary. In order to score this question correctly, we will accept either season if the season is within one month of changing. If the month is August, we will accept either summer or autumn; if the month is November we will accept autumn or winter, if the month is February we will accept winter or spring; if the month is May we will accept spring or summer.

PH122: **What month is it?.**

- 1. Month given correctly
- 0. Month given incorrectly
- 97. Unable to carry out the task
- 99. RF
- (MMSE)

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

- 1. Day of week given correctly
- 0. Day of week given incorrectly
- 97. Unable to carry out the task
- 99. RF
- (MMSE)

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

- 1. Date given correctly
- 0. Date given incorrectly
- 97. Unable to carry out the task
- 99. RF
- (MMSE)

PH127: **What is the name of this country?**

- 1. Name of country given correctly
- 0. Name of country given incorrectly
- 97. Unable to carry out the task
- 99. RF
- (MMSE)

PH128: **What is the name of this county?**

- 1. Name of county given correctly
- 0. Name of county given incorrectly
- 97. Unable to carry out the task
- 99. RF
- (MMSE)

PH129: **What is the name of this city/town?**

- 1. Name of city/town given correctly
 - 0. Name of city/town given incorrectly
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

PH130: **What is this building?**

- 1. Name of building given correctly
 - 0. Name of building given incorrectly
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

NOTE: Accept either type or name of building (e.g. bungalow/address/house/home)

PH131: **What floor are we on?**

- 1. Floor number given correctly
 - 0. Floor number given incorrectly
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

NOTE: The acceptable answer depends on where the assessment is being carried out. If a respondent lives in a bungalow or two storey house, we will accept either ground or first floor. If they live in an apartment complex, we will accept the answer if it is within 1 floor of being right i.e. if the respondent lives on the 3rd floor, we will accept 2nd, 3rd or 4th floor.

PH132: **INTRO: Please listen carefully. I am going to say three words. You say them back after I stop. Ready?**

IWER: PAUSE FOR 1 SECOND AFTER EACH OF THE THREE WORDS.

Here they are... APPLE, PENNY, TABLE. Now repeat those words back to me.

NOTE: If the individual does not successfully repeat all three words on the first trial, repeat them again until he/she is able to say all three words back to you (in any order). This is important as the person needs to “make” the memory if they are to “retrieve” it later. Allow the respondent a maximum of five trials to repeat all three words. They should be scored on the first trial only.

IWER: AFTER THE RESPONDENT HAS REPEATED THE WORDS BACK TO YOU, SAY

Now keep those words in mind. I am going to ask you to say them again in a few minutes.

- 0. No words recalled
 - 1. One word given correctly
 - 2. Two words given correctly
 - 3. Three words given correctly
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

Note: *If the individual does not successfully repeat all three words on the first trial, repeat them again until he/she is able to say all three words back to you (in any order). This is important as the person needs to “make” the memory if they are to “retrieve” it later. Allow the respondent a maximum of five trials to repeat all three words. They should be scored on the first trial only.*

BL: THE NEXT TWO QUESTIONS SHOULD BE COMPLETED BY ALL RESPONDENTS HOWEVER THE COMPUTER SHOULD ONLY USE THE BEST SCORE BETWEEN THE TWO WHEN CALCULATING THE TOTAL MMSE SCORE.

PH133: **INTRO:** Now I'd like you to subtract 7 from 100. Then keep subtracting 7 from each answer until I tell you to stop. Is that ok? What is 100 minus 7?"

IWER: AFTER THE RESPONDENT GIVES YOU AN ANSWER, SAY "KEEP GOING" (AS NEEDED) UNTIL HE/SHE HAS GIVEN YOU A TOTAL OF FIVE ANSWERS. ENSURE YOU WRITE DOWN THE ANSWERS GIVEN BY THE RESPONDENT IN THE SERIAL 7 SECTION OF THE COGNITIVE BOOKLET.

- 0. none correct
 - 1. one number given correctly
 - 2. two numbers given correctly
 - 3. three numbers given correctly
 - 4. four numbers given correctly
 - 5. five numbers given correctly
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

NOTE: Give one point for each correct answer, with a maximum of 5 points for this section. An answer is considered correct if it is exactly 7 less than the previous answer, regardless of whether that previous answer was correct. e.g. correct order 93 – 86 – 79 – 72 – 65. **ALSO NOTE:** 93 – 88 – 81 – 74 – 67 has 4 correct answers. Even though 88 is incorrect, the next 3 answers are exactly 7 less than the previous answer.

PH134: **INTRO:** Now can you please spell WORLD for me.

NOTE: If the respondent is unable to spell WORLD forward, don't ask them to spell it backward (can use "unable to carry out task" option to code this).

Now can you spell WORLD backwards.

IWER: ENSURE YOU WRITE DOWN ALL THE LETTERS GIVEN BY THE RESPONDENT IN THE 'WORLD' SECTION OF THE COGNITIVE BOOKLET

- 0. None correct
 - 1. One letter given correctly
 - 2. Two letters given correctly
 - 3. Three letters given correctly
 - 4. Four letters given correctly
 - 5. Five letters given correctly
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

SCORING:

- (1) Only the backward spelling is scored, giving one point for each letter that appears in the correct order (e.g. DLROW = 5, DLORW = 3)
- (2) Respondents will often self-correct themselves during this test. If the respondent says more than 5 letters please record all the letters that he/she says in the cognitive booklet and take the 5 letters that give the best score and enter them into the boxes provided.
- (3) You should take the first response the respondent gives as your answer. You can allow the respondent up to one self-correction but it is essential you do not prompt them after that.

PH135: IWER: PLEASE ASK THE RESPONDENT “What were those three words I asked you to remember?”

IWER: DO NOT PROMPT THE RESPONDENT OR PROVIDE ANY CLUES OR HINTS. WORDS CAN BE GIVEN IN ANY ORDER. IF THE INDIVIDUAL HAS DIFFICULTY RECALLING THE THREE WORDS, BE ENCOURAGING BUT DO NOT GIVE HINTS TO THE CORRECT ANSWER.

- 0. No words recalled
 - 1. One word recalled
 - 2. Two words recalled
 - 3. Three words recalled
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

PH136: INTRO: SHOW THE RESPONDENT A PENCIL OR PEN AND ASK “What is this?” IWER: THEN REPEAT THE SAME QUESTION WHILE POINTING TO A WATCH.

NOTE: If a pen, pencil and/or watch are not available, other common objects can be substituted (e.g. eyeglasses, chair or keys).

- 0. No objects identified
 - 1. One object correctly identified
 - 2. Two objects correctly identified
 - 97. Unable to carry out the task
 - 99. RF
- (MMSE)

PH137: INTRO: “Now I am going to ask you to repeat what I say. Ready?” (PAUSE.....) IWER: READ OUT SLOWLY “NO IFS, ANDS OR BUTS. Now you say that.”

IWER: BE SURE TO SPEAK SLOWLY AND ARTICULATE CLEARLY SO THAT ALL THE “S” ENDINGS ARE AUDIBLE. If the respondent did not hear you the first time, you may repeat the sentence a second time. If the sentence needs to be repeated a third time, score the respondent 0 for this part of the test.

1. Entire phrase repeated correctly

0. Phrase repeated incorrectly

97. Unable to carry out the task

99. RF

(MMSE)

NOTE: If the respondent repeats the entire phrase correctly, then score one point for this section. If the individual does not repeat the phrase exactly, then the item should be scored as zero.

PH138: INTRO: “Please listen carefully because I am going to ask you to do something. TAKE THIS PAPER IN YOUR RIGHT HAND, FOLD IT IN HALF AND PUT IT ON THE FLOOR”.

NOTE: It is essential that you do not hand the paper to the respondent until you have given the entire 3 stage command. It is also important to hand the paper to the space in between their hands and not preferentially towards their right or left hand. If the individual is disabled or physically positioned in such a way that he/she cannot place the paper on the floor, instruct him/her to place the paper on a table.

0. No instructions correctly completed

1. One instruction correctly completed

2. Two instructions correctly completed

3. Three instructions correctly completed

97. Unable to carry out the task

99. RF

(MMSE)

SCORING: Score one point if the individual takes the paper in his/her right hand (score zero if they use their left hand). Score one point if he/she folds the paper in half (the fold does not need to be perfect). Score one point if he/she puts the paper on floor (or table, if appropriate). The maximum score for this section is 3. Score zero if the individual does not take the paper at all.

PH139: INTRO: Show the respondent the words ‘CLOSE YOUR EYES’ that appear on page 3 of the cognitive booklet. IWER: READ OUT “PLEASE READ THIS AND DO WHAT IT SAYS”.

IWER: IT IS IMPORTANT THAT YOU ONLY GIVE THE INSTRUCTION ONCE. NOTE: It is acceptable if the individual reads the command out loud but only give credit if he/she closes his/her eyes (without prompting)

1. Individual closes his/her eyes without prompting

0. Individual does something else

97. Unable to carry out the task

99. RF

(MMSE)

PH140: INTRO: : OPEN PAGE 4 OF THE COGNITIVE BOOKLET AND PLACE IT IN FRONT OF THE RESPONDENT ALONG WITH A PEN OR A PENCIL

READ OUT “Please write a sentence”.

IF HE/SHE DOES NOT RESPOND, SAY “Write about the weather”.

IWER: IF THE SENTENCE IS NOT COMPLETE OR DOES NOT CONTAIN A SUBJECT AND A VERB, ASK THEM TO WRITE YOU A LONGER SENTENCE.

IGNORE MINOR GRAMMAR OR SPELLING ERRORS.

1. Individual writes a comprehensible sentence that contains a subject and a verb

0. Individual writes a sentence that does not make sense

97. Unable to carry out the task

99. RF

(MMSE)

PH141: IWER: OPEN PAGE 5 OF THE COGNITIVE BOOKLET AND PLACE IT IN FRONT OF THE RESPONDENT, ALONG WITH A PEN OR PENCIL.

SHOW THEM THE DESIGN ON THE PAGE AND SAY. “Please copy this design”.

NOTE: If a person requests a second attempt, it is reasonable to allow this. Any more than 2 attempts and the respondent should score 0 on this part of the test.

1. Individual draws two 5-sided figures that intersect to form a 4-sided figure

0. Figure not copied correctly

97. Unable to carry out the task

99. RF

(MMSE)

NOTE: The two figures do not have to be perfect pentagons but they should be 5-sided. Furthermore, the lines do not need to be perfectly straight. The figure formed by the intersection of the two pentagons should have four sides, like a diamond. A drawing should be scored as a zero if the figure formed by the intersection has three or five sides, or if the two figures do not intersect at all.

BL: THE COMPUTER SHOULD NOW CALCULATE A TOTAL MMSE SCORE (OUT OF 30) BASED ON THE LAST 20 QUESTIONS (TAKING ONLY THE BEST SCORE FROM PH133 AND PH134)

BL: IF A RESPONDENT SCORES 14 OR LESS ON THE MMSE THE COMPUTER SHOULD PRESENT A TEXT BOX RECOMMENDING THAT THE INTERVIEWER SHOULD SEEK A PROXY RESPONDENT FOR THE REMAINING SECTIONS OF THE INTERVIEW. THIS RECOMMENDATION DOES NOT APPLY TO RESPONDENTS FOR WHOM ENGLISH IS NOT THE FIRST LANGUAGE.

THE OPTIONS TO MOVE FORWARD FROM THIS TEXT BOX ARE AS FOLLOWS:

1. SCORE 14 OR LESS BUT INTERVIEWER FEELS THE RESPONDENT IS OK TO CONTINUE INTERVIEW

2. SCORE 14 OR LESS AND INTERVIEWER AGREES THAT IT IS BEST TO SEEK A PROXY RESPONDENT

IF (SCORE IS 14 OR LESS) ASK MMSEfail OTHERS GO TO PH116

MMSEfail: INTERVIEWER: THE RESPONDENT HAS SCORED LESS THAN 15 FROM THE MMSE TEST. IT IS RECOMMENDED THAT YOU SEEK A PROXY RESPONDENT. THIS RECOMMENDATION DOES NOT APPLY TO RESPONDENTS FOR WHOM ENGLISH IS NOT THE FIRST LANGUAGE.

**IF YOU FEEL THE RESPONDENT IS OK TO CONTINUE WITH THE INTERVIEW SELECT '1'
OTHERWISE YOU WILL NEED TO TERMINATE THIS INTERVIEW AND SEEK A PROXY RESPONDENT**

1. Continue (record reasons on the next screen)

MMSEcomm: INTERVIEWER: Please record details below of why you have chosen to continue with this interview despite the respondent not getting 15 or over in the MMSE test

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 PAGE WITH THE 5-SIDED FIGURE (PAGE 5) IN 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 to activate the test message.

IWER: If the respondent cannot hear properly, adjust the volume on the laptop, and 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

BL: TIMESTAMP HERE

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 BEGIN TEST AND HAVE BOOKLET READY (PAGE 6)

BL: ONE RANDOMLY SELECTED LIST GIVEN TO EACH RESPONDENT. 1 WORD EVERY 2 SECONDS. HOWEVER, IF ANOTHER RESPONDENT IN THE SAME HOUSEHOLD HAS ALREADY BEEN INTERVIEWED AT THIS WAVE, CAPI SHOULD PRESENT A DIFFERENT WORD LIST TO THE CURRENT 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: PLAY WORD LIST

IWER: After the word list has been played

READ OUT:

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.

0.....10

97. Unable to carry out the task

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 played

READ OUT:

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.

0.....10

GO TO PH125

97. Unable to carry out the task

99. RF

(SHARE/ELSA/HRS)

BL: TIMESTAMP HERE

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. HOWEVER, IF ANOTHER RESPONDENT IN THE SAME HOUSEHOLD HAS ALREADY BEEN INTERVIEWED AT THIS WAVE, CAPI SHOULD PRESENT A DIFFERENT WORD LIST TO THE CURRENT 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 (PAGE 6 OF THE COGNITIVE BOOKLET).

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.

0.....10

97. Unable to carry out the task

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 PH119

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. ALLOW AS MUCH TIME AS THE RESPONDENT WISHES, UP TO 2 MINUTES. ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

0.....10 **GO TO PH125**

97. Unable to carry out the task

99. RF

(TILDA)

IWER: NEXT YOU WILL BE PROMPTED TO ASK [RNAME] TO NAME AS MANY DIFFERENT ANIMALS AS [HE/SHE] CAN IN ONE MINUTE. YOU SHOULD 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: WRITE THE WORDS ON PAGE 8 OF THE COGNITIVE BOOKLET PROVIDED

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: CODE NUMBER OF ANIMALS

0.....50

97. Unable to carry out the task

99. RF

(SHARE/ELSA)

NOTE: 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. Refer to page 8 for further guidance on scoring.

6.4 Heart disease section

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

NOTE TO PROGRAMMER: Create new set of variables PH201FFW2_i that contain a list of

- all conditions fed forward from Wave 2 (i.e. those reported in Wave 1 and were confirmed to still exist in Wave 2 AND conditions newly reported in Wave 2) AND
- all conditions fed forward from Wave 1 (if R did not take part in wave 2 OR had a proxy interview in wave 2)

This can be updated for subsequent waves. The logic for creating the above variable is as follows:

FOR i = 01 to 09

IF (intstatusW3 = 1 & PH201FF_i (wave 2) = 1) OR (intstatusW3 = 2,3 & PH201FF_i (wave 1) = 1),
THEN PH201FFW2_i = 1, OTHERWISE PH201FFW2_i = 0

FOR i = 10 (abnormal heart rhythm)... IF (intstatusW3=2,3 & PH201FF_10 (wave 1) = 1) OR (PH226FF (wave 2) = 98,99), THEN PH201FFW2_10 = 1;

FOR i = 11 (atrial fibrillation)... IF (PH201FF_11 (wave 2) = 1 OR PH226FF (wave 2) = 1), THEN
PH201FFW2_11 = 1;

FOR i = 12 (abnormal heart rhythm (not atrial fibrillation))... IF (PH201FF_12 (wave 2) = 1 OR
PH226FF (wave 2) = 2), THEN PH201FFW2_12=1;

OTHERWISE PH201FFW2_i = 0

NOTE: EITHER PH201FFW2_10 OR PH201FFW2_11/12 SHOULD BE FED FORWARD TO PH201a AS APPLICABLE

NOTE TO PROGRAMMER: FOR i = 01, 05, 08, 11, 12, generate an additional set of variables named PH201FF1W2_i which indicate if a R has ever reported the condition even if they no longer have the condition. These variables are used in the routing for some of the questions in this section.

IF (intstatusW3=1 & PH201FF1_i=1 & ph201x0_i !=1) OR (intstatusW3=2,3 & ph201ff_i (wave 1) =1 & ph201x0_i !=1), THEN PH201FF1W2_i=1, OTHERWISE PH201FF1W2_i=0

IF (intstatusW3 = 1,2,3 & PH201FFW2_01-12=1), GO TO PH201a. ALL OTHERS GO TO PH201.

PH201a: Last time you were interviewed, you told us that you had (*insert conditions from PH201FFW2_i*).

1. Continue (go to PH201Y_i)
2. Respondent disputes having one/all of these conditions

CONDITION DISPUTED

PH201X0 INTERVIEWER Which of the conditions is being disputed

- | | |
|---|-------------------------------|
| 1. High blood pressure or hypertension | (display if PH201FFW2_01 = 1) |
| 2. Angina | (display if PH201FFW2_02 = 1) |
| 3. A heart attack (inc. myocardial infarction or coronary thrombosis) | (display if PH201FFW2_03 = 1) |
| 4. Congestive heart failure | (display if PH201FFW2_04 = 1) |
| 5. Diabetes or high blood sugar | (display if PH201FFW2_05 = 1) |
| 6. A stroke (cerebral vascular disease) | (display if PH201FFW2_06 = 1) |

7. Ministroke or TIA	(display if PH201FFW2_07 = 1)
8. High cholesterol	(display if PH201FFW2_08 = 1)
9. A heart murmur	(display if PH201FFW2_09 = 1)
10. Abnormal heart rhythm	(display if PH201FFW2_10 = 1)
11. Atrial fibrillation	(display if PH201FFW2_11 = 1)
12. An abnormal heart rhythm (not atrial fibrillation)	(display if PH201FFW2_12 = 1)

ASK FOR EACH SELECTION AT PH201X0

PH201X_01-PH201X_12 It may be that we have a recording error about you having [condition selected at PH201X0]. Can you confirm that ...READ OUT.

1. You never had [condition selected at PH201X0] (error from previous wave)
2. [condition selected at PH201X0] was misdiagnosed

IF (PH201FFW2_01 = 1 & PH201a = 1,2 & PH201X0_01 ≠ 1), ASK PH201Y_01. OTHERS GO TO PH201Y_02

PH201Y_01: Do you still have High blood pressure or hypertension?

1. Yes
5. No

IF (PH201FFW2_02 = 1 & PH201a = 1,2 & PH201X0_02 ≠ 1), ASK PH201Y_02. OTHERS GO TO PH201Y_04

PH201Y_02: Do you still have Angina?

1. Yes
5. No

IF (PH201FFW2_04 = 1 & PH201a = 1,2 & PH201X0_04 ≠ 1), ASK PH201Y_04. OTHERS GO TO PH201Y_05

PH201Y_04: Do you still have Congestive heart failure?

1. Yes
5. No

IF (PH201FFW2_05 = 1 & PH201a = 1,2 & PH201X0_05 ≠ 1), ASK PH201Y_05. OTHERS GO TO PH201Y_08

PH201Y_05: Do you still have Diabetes or high blood sugar?

1. Yes
5. No

IF (PH201FFW2_08 = 1 & PH201a = 1,2 & PH201X0_08 ≠ 1), ASK PH201Y_08. OTHERS GO TO PH201Y_09

PH201Y_08: Do you still have High cholesterol?

1. Yes
5. No

IF (PH201FFW2_09 = 1 & PH201a = 1,2 & PH201X0_09 ≠ 1), ASK PH201Y_09. OTHERS GO TO PH226

PH201Y_09: Do you still have a heart murmur?

1. Yes
5. No

IF (PH201FFW2_10 = 1), ASK PH226. OTHERS GO TO PH201Y_11.

PH226: With regards to your abnormal heart rhythm, can you tell me if that was "Atrial Fibrillation" or not? (CODE ONE ONLY)

1. Atrial Fibrillation
2. An abnormal heart rhythm (not Atrial Fibrillation)
98. DK
99. RF

IF (PH226 = 1) OR (PH201FFW2_11 = 1 & PH201X0_11 ≠ 1), ASK PH201Y_11, OTHERS GO TO PH201Y_12

PH201Y_11: Do you still have Atrial Fibrillation?

1. Yes GO TO PH201
5. No GO TO PH201

IF (PH226 = 2) OR (PH201FFW2_12 = 1 & PH201a = 1,2 & PH201X0_12 ≠ 1), ASK PH201Y_12, OTHERS GO TO PH201

PH201Y_12: Do you still have an abnormal heart rhythm (not Atrial Fibrillation)?

1. Yes GO TO PH201
5. No GO TO PH201

IWER: SHOW CARD PH2

IF (intstatusW3 = 4,8), USE WORDING 'B'. ALL OTHERS, USE WORDING 'A'.

PH201: Please look at card PH2.

(A) Since [your/his/her/the] last interview, has a doctor ever told [you/Rname] that [you/he/she] [have/has] any of the [other] conditions on this card?

(B) Has a doctor ever told [you/Rname] that [you/he/she] [have/has] any of the conditions on this card?

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

- | | |
|--|----------------------|
| 1. High blood pressure or hypertension | [ph201_01] |
| 2. Angina | [ph201_02] |
| 3. A heart attack | |
| (including myocardial infarction or coronary thrombosis) | [ph201_03] |
| 4. Congestive heart failure | [ph201_04] |
| 5. Diabetes or high blood sugar | [ph201_05] |
| 6. A stroke (cerebral vascular disease) | [ph201_06] |
| 7. Ministroke or TIA | [ph201_07] |
| 8. High cholesterol | [ph201_08] |
| 9. A heart murmur | [ph201_09] |
| 11. Atrial Fibrillation | [ph201_11] |
| 12. An abnormal heart rhythm (not atrial fibrillation) | [ph201_12] |
| 95. Any other heart trouble (please specify) | [ph201_95][ph201oth] |
| 96. None of these | [ph201_96] |
| 98. DK | [ph201_98] |
| 99. RF | [ph201_99] |
- (ELSA/ similar questions in HRS/ SHARE)

IF (PH201_01 = 1), ASK PH202

PH202: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had high blood pressure?

(MM/YYYY)

____/____

[ph202m][ph202y]

____ DK RF MONTH

____ DK RF YEAR

(ELSA/ HRS)

IF (PH201_01 = 1) OR (PH201FF1W2_01=1), ASK PH202b.

PH202b: [Is/Are] [you/he/she] currently doing any of the following to manage [your/his/her] blood pressure? (Select all that apply)

1. Taking medications

[ph202b_01]

2. Lifestyle changes (e.g. diet, exercise, etc.)

[ph202b_02]

95. Other

[ph202b_95]

96. None of the above

[ph202b_96]

98. DK

[ph202b_98]

99. RF

[ph202b_99]

IF (PH201_02 = 1), ASK PH203

PH203: When [were/was] [you/he/she] first told by a doctor that [you/he/she] had angina?

(MM/YYYY)

____/____

[ph203m][ph203y]

____ DK RF MONTH

____ DK RF YEAR

(ELSA/ HRS)

IF (PH201_02 = 1 OR PH201Y_02 = 1), ASK PH204. OTHERS GO TO PH205

PH204: [Are/Is] [you/he/she] limiting [your/his/her] usual activities because of [your/his/her] angina?

1. Yes

5. No

98. DK

99. RF

(HRS)

IF (PH201_03 = 1 OR (PH201FFW2_03 = 1 & PH201XO_03 ≠ 1), GO TO PH205. OTHERS GO TO PH206b

PH205: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had a heart attack (including myocardial infarction or coronary thrombosis)?

(MM/YYYY)

____/____

[ph205m][ph205y]

____ DK RF MONTH

____ DK RF YEAR

IF (PH201_03 = 1), GO TO PH207. OTHERS GO TO PH206b

PH207: According to the doctor how many heart attacks [have/has] [you/he/she] had?

1.....97

-98. DK

-99. RF

(ELSA)

IF (PH207 > 1), ASK PH206. OTHERS GO TO PH206b

PH206: In what year/month was [your/his/her] (most recent) heart attack?

(MM/YYYY)

____/____

[ph206m][ph206y]

____ DK RF MONTH

____ DK RF YEAR

(HRS)

IF (PH201FFW2_03 = 1 & PH201XO_03 ≠ 1), GO TO PH206b. OTHERS GO TO PH208

PH206b: Since your last interview have you had another heart attack?

1. Yes GO TO PH206c

5. No GO TO PH208b

98. DK GO TO PH208b

99. RF GO TO PH208b

PH206c: In what year/month was your] (most recent) heart attack?

(MM/YYYY)

____/____

[ph206cm][ph206cy]

____ DK RF MONTH

____ DK RF YEAR

(HRS)

PH207b: According to your doctor, how many heart attacks have] you had since your] last interview?

1.....97

-98. DK

-99. RF

(ELSA)

IF (INTSTATUSW3=,1,2,3) & ((PH201FFW2_02 = 1 & PH201XO_02 ≠ 1) OR (PH201FFW2_03 = 1 & PH201XO_03 ≠ 1)), GO TO PH208B. OTHERS GO TO PH208

PH208: [Have/Has] [you/he/she] ever had an angioplasty or Stent?

1. Yes Go to PH209

5. No Go to PH210

98. DK GO to PH210

99. RF GO to PH210

PH209: In what year/month was [your/his/her] last angioplasty or Stent?

(MM/YYYY)

____/____

[ph209m][ph209y]

____ DK RF MONTH

____ DK RF YEAR

PH210: [Have/Has] [you/he/she] ever had open heart surgery?

1. Yes GO TO PH211

5. No GO TO PH212

98. DK GO TO PH212

99. RF GO TO PH212

PH211: In what year/month was [your/his/her] last heart surgery?

(MM/YYYY)

____/____ GO TO PH212
____ DK RF MONTH GO TO PH212
____ DK RF YEAR GO TO PH212

[ph211m][ph211y]

IF (INTSTATUSW3=,1,2,3) & ((PH201FFW2_02 = 1 & PH201XO_02 ≠ 1) OR (PH201FFW2_03 = 1 & PH201XO_03 ≠ 1)), GO TO PH208B. OTHERS GO TO PH212.

PH208b: Since your last interview, have you had an angioplasty or Stent?

1. Yes Go to PH209b
5. No Go to PH210b
98. DK Go to PH210b
99. RF Go to PH210b

PH209b: In what year/month was your last angioplasty or Stent?

(MM/YYYY)

[ph209bm][ph209by]

____/____
____ DK RF MONTH
____ DK RF YEAR

PH210b: Since your last interview, have you had open heart surgery?

1. Yes GO TO PH211b
5. No GO TO PH212
98. DK GO TO PH212
99. RF GO TO PH212

PH211b: In what year/month was your last heart surgery?

(MM/YYYY)

[ph211bm][ph211by]

____/____
____ DK RF MONTH
____ DK RF YEAR

IF (PH201_04 = 1), ASK PH212, OTHERS GO TO PH213

PH212: When [were/was] [you/he/she] first told by a doctor that [you/he/she] had congestive heart failure?

(MM/YYYY)

[ph212m][ph212y]

____/____
____ DK RF MONTH
____ DK RF YEAR

IF (PH201_05 = 1), ASK PH213. OTHERS GO TO PH213b

PH213: When [were/was] [you/he/she] first told by a doctor that [you/he/she] had diabetes or high blood sugar?

(MM/YYYY)

[ph213m][ph213y]

____/____
____ DK RF MONTH
____ DK RF YEAR

(ELSA)

IF (PH201FF1W2_05 = 1 OR PH201_05 = 1), ASK PH213b. OTHERS GO TO PH229

PH213b: [You previously told us that you had diabetes,] What type of diabetes [do/does/did] [you/Rname] have?

1. Type I
2. Type II
95. Other
98. DK
99. RF

IF (PH201_05 = 1 OR PH201FF1W2_05=1), ASK PH229. OTHERS GO TO PH216.

PH229: [Are/Is] [you/Rname] currently doing any of the following: (Select all that apply)

- | | |
|---|------------|
| 1. Taking medication, other than insulin, for diabetes | [ph229_01] |
| 2. Taking insulin injections | [ph229_02] |
| 3. Taking other injections for diabetes | [ph229_03] |
| 4. Lifestyle changes (e.g. diet, exercise, etc.) to manage diabetes | [ph229_04] |
| 95. Other | [ph229_95] |
| 96. None of these | [ph229_96] |
| 98. DK | [ph229_98] |
| 99. RF | [ph229_99] |

**IF (PH201_05 = 1) OR (PH201FFW2_05 = 1 & PH201X0_05 ≠ 1), ASK PH216. OTHERS GO TO PH218
IWER: SHOW CARD PH3**

PH216: Has a doctor ever told [you/him/her] that [you/he/she] [have/has] any of the following conditions related to [your/his/her] diabetes?

- | | |
|---|------------|
| 1. Leg ulcers | [ph216_01] |
| 2. Protein in [your/his/her] urine | [ph216_02] |
| 3. Lack of feeling and tingling pain in [your/his/her] legs and feet
due to nerve damage (diabetic neuropathy) | [ph216_03] |
| 4. Damage to the back of [your/his/her] eye (diabetic retinopathy) | [ph216_04] |
| 5. Damage to [your/his/her] kidneys (diabetic nephropathy) | [ph216_05] |
| 96. No, none of these | [ph216_96] |
| 98. DK | [ph216_98] |
| 99. RF | [ph216_99] |

PH230: [Have/Has] [you/Rname] been invited for an eye exam by the national retinal screening programme (Diabetic RetinaScreen) in the last 24 months?

- 1. Yes **GO TO PH231**
- 5. No **GO TO PH218**
- 98. DK **GO TO PH218**
- 99. RF **GO TO PH218**

PH231: Did you attend this service?

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

IF (PH201_06 = 1) OR (PH201FFW2_06 = 1 & PH201XO_06 ≠ 1), GO TO PH218. OTHERS GO TO PH219b

PH218: When [were/was] [you/he/she] first told by a doctor that [you/he/she] had a stroke?
(MM/YYYY)

____/____

[ph218m][ph218y]

____ DK RF MONTH

____ DK RF YEAR

(ELSA similar question HRS/QVSFS)

IF (PH201_06 = 1), ASK PH219. OTHERS GO TO PH219b

PH219: How many strokes [have/has] [you/he/she] had?

1....97

-98. DK

-99. RF

(ELSA)

IF (PH219 > 1), ASK PH220. OTHERS GO TO PH219b

PH220: In what year/month was [your/his/her] most recent stroke?

(MM/YYYY)

____/____

[ph220m][ph220y]

____ DK RF MONTH

____ DK RF YEAR

(HRS)

IF (PH201FFW2_06 = 1 & PH201XO_06 ≠ 1), ASK PH219b. OTHERS GO TO PH219c

PH219b: Since your last interview, have you had any further strokes?

1. Yes **GO TO PH219c**

5. No **GO TO PH221**

98. DK **GO TO PH221**

99. RF **GO TO PH221**

(ELSA)

IF (ph219b = 1), GO TO PH219c. OTHERS GO TO PH221

PH219c: Since your last interview, how many strokes have you had?

1....97

-98. DK

-99. RF

(ELSA)

PH219d: When was your most recent stroke?

(MM/YYYY)

____/____

[ph219dm][ph219dy]

____ DK RF MONTH

____ DK RF YEAR

(HRS)

IF (PH201_07 = 1), ASK PH221. OTHERS GO TO PH222b

PH221: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had a TIA, ministroke, or transient ischaemic attack?

(MM/YYYY)

____/____

[ph221m][ph221y]

____ DK RF MONTH

____ DK RF YEAR

(TILDA/QVSFS)

PH222: How many TIA's or ministrokes [have/has] [you/he/she] had?

1....97

-98. DK

-99. RF

(TILDA)

IF (PH222 > 1), GO TO PH223. OTHERWISE GO TO PH222b

PH223: In what month/year was [your/his/her] most recent TIA or ministrokes?

(MM/YYYY)

____/____

[ph223m][ph223y]

____ DK RF MONTH

____ DK RF YEAR

(TILDA)

IF (PH201FFW2_07 = 1 & PH201XO_07 ≠ 1), ASK PH222b. OTHERS GO TO PH225b

PH222b: Since your last interview, have you had any further TIA's or ministrokes?

1. Yes GO TO PH222c

5. No GO TO PH225b

98. DK GO TO PH225b

99. RF GO TO PH225b

(TILDA)

IF PH222b=1, GO TO PH222c. OTHERS GO TO PH225b

PH222c: Since your last interview, how many TIA's or ministrokes have you had?

1....97

-98. DK

-99. RF

(ELSA)

PH222d: When was your most recent TIA or ministroke?

(MM/YYYY)

____/____

[ph222dm][ph222dy]

____ DK RF MONTH

_____ DK RF YEAR
(TILDA)

IF (PH201_08 = 1) OR (PH201FF1W2_08=1), ASK PH225b. OTHERS GO TO PH227

PH225b: [Is/Are] [you/he/she] currently doing any of the following to manage [your/his/her] cholesterol? (Select all that apply)

- | | |
|--|-------------|
| 1. Taking medications | [ph225b_01] |
| 2. Lifestyle changes (e.g. diet, exercise, etc.) | [ph225b_02] |
| 95. Other | [ph225b_95] |
| 96. None of the above | [ph225b_96] |
| 98. DK | [ph225b_98] |
| 99. RF | [ph225b_99] |

IF (PH201_11=1 OR PH201FF1W2_11=1 OR PH201_12=1 OR PH201FF1W2_12=1 OR PH226=1,2,98,99), ASK PH227, OTHERS GO TO PH301a

PH227: [Are/Is] [you/Rname] taking blood thinning medications e.g. warfarin for [your/his/her] irregular heart rhythm?

- | | |
|--------|--------------|
| 1. Yes | GO TO PH228 |
| 5. No | GO TO PH301a |
| 98. DK | GO TO PH301a |
| 99. RF | GO TO PH301a |

PH228: In the last 2 months, has [your/Rname's] warfarin or blood thinning medication dose been changed more than 3 times by [your/his/her] doctor?

- | | |
|--------|--------------|
| 1. Yes | GO TO PH301a |
| 5. No | GO TO PH301a |
| 98. RF | GO TO PH301a |
| 99. DK | GO TO PH301a |

6.5 Other chronic conditions

NOTE TO PROGRAMMER: Create new set of variables PH301FFW2_i that contain a list of

- all conditions fed forward from Wave 2 (i.e. those reported in Wave 1 and were confirmed to still exist in Wave 2 AND conditions newly reported in Wave 2) AND
- all conditions fed forward from Wave 1 (if R did not take part in wave 2 OR had a proxy interview in wave 2)

This can be updated for subsequent waves. The logic for creating the above variable is as follows:

```
FOR i = 01 TO 07, 09 TO 15... IF (intstatusW3 = 1 & PH301FF_i (wave 2) = 1) OR (intstatusW3 = 2,3 &
PH301FF_i (wave 1) = 1), THEN PH301FFW2_i = 1;
FOR i = 08 (alcohol or substance abuse)... IF (intstatusW3=2,3 & PH301FF_08 (wave 1) = 1) OR
(PH326FF (wave 2) = 98,99), THEN PH301FFW2_08 = 1;
FOR i = 16 (alcohol abuse)... IF (PH301FF_16 (wave 2) = 1 OR PH326FF (wave 2) = 1,3), THEN
PH301FFW2_16 = 1;
FOR i = 17 (substance abuse)... IF (PH301FF_17 (wave 2)=1 OR PH326FF (wave 2)=2,3), THEN
PH301FFW2_17=1;
OTHERWISE PH301FFW2_i = 0
```

NOTE: EITHER PH301FFW2_08 OR PH301FFW2_16/17 SHOULD BE FED FORWARD TO PH301a I.E.

IF intstatusW3=2,3 FEED FORWARD PH301FFW_08 TO PH301a.

IF intstatusW3=1 FEED FORWARD PH301FFW2_16 OR PH301FFW2_17 AS APPLICABLE

IF (intstatusW3 = 1,2,3 & PH301FFW2_01 – PH301FFW2_17 = 1), GO TO PH301a.

ALL OTHERS GO TO PH301.

PH301a: Last time you were interviewed, you told us that you had (*insert conditions from PH301FFW2_i*).

1. Continue (go to PH301Y_i)
2. Respondent disputes having one/all of these conditions

CONDITION DISPUTED

PH301X0 INTERVIEWER Which of the conditions is being disputed?

- | | |
|---|-------------------------------|
| 1. Chronic lung disease such as chronic bronchitis or emphysema | (display if PH301FFW2_01 = 1) |
| 2. Asthma | (display if PH301FFW2_02 = 1) |
| 3. Arthritis (including osteoarthritis, or rheumatism) | (display if PH301FFW2_03 = 1) |
| 4. Osteoporosis, sometimes called thin or brittle bones | (display if PH301FFW2_04 = 1) |
| 5. Cancer or a malignant tumour | (display if PH301FFW2_05 = 1) |
| 6. Parkinson's disease | (display if PH301FFW2_06 = 1) |
| 7. Any emotional, nervous or psychiatric problems | (display if PH301FFW2_07 = 1) |
| 8. Alcohol or substance abuse | (display if PH301FFW2_08 = 1) |
| 16. Alcohol abuse | (display if PH301FFW2_16 = 1) |
| 17. Substance abuse | (display if PH301FFW2_17 = 1) |
| 9. Alzheimer's disease | (display if PH301FFW2_09 = 1) |
| 10. Dementia, organic brain syndrome, senility | (display if PH301FFW2_10 = 1) |
| 11. Serious memory impairment | (display if PH301FFW2_11 = 1) |
| 12. Stomach ulcers | (display if PH301FFW2_12 = 1) |
| 13. Varicose Ulcers (an ulcer due to varicose veins) | (display if PH301FFW2_13 = 1) |

- | | |
|--|-------------------------------|
| 14. Cirrhosis, or serious liver damage | (display if PH301FFW2_14 = 1) |
| 15. Thyroid Problems | (display if PH301FFW2_15 = 1) |

ASK FOR EACH SELECTION AT PH301X0

PH301X_01-17 It may be that we have a recording error about you having [condition selected at PH301X0]. Can you confirm, that ...READ OUT.

1. You never had [condition selected at PH301X0] (error from previous wave)
2. [condition selected at PH301X0] was misdiagnosed

IF (PH301FFW2_01 = 1 & PH301a = 1,2 & PH301X0_01 ≠ 1) ASK PH301Y_01, OTHERS GO TO PH301Y_02

PH301Y_01: Do you still have chronic lung disease?

1. Yes
5. No

IF (PH301FFW2_02 = 1 & PH301a = 1,2 & PH301X0_02 ≠ 1) ASK PH301Y_02, OTHERS GO TO PH301Y_03

PH301Y_02: Do you still have Asthma?

1. Yes
5. No

IF (PH301FFW2_03 = 1 & PH301a = 1,2 & PH301X0_03 ≠ 1) ASK PH301Y_03, OTHERS GO TO PH301Y_04

PH301Y_03: Do you still have Arthritis?

1. Yes
5. No

IF (PH301FFW2_04 = 1 & PH301a = 1,2 & PH301X0_04 ≠ 1) ASK PH301Y_04, OTHERS GO TO PH301Y_05

PH301Y_04: Do you still have Osteoporosis?

1. Yes
5. No

IF (PH301FFW2_05 = 1 & PH301a = 1,2 & PH301X0_05 ≠ 1) ASK PH301Y_05, OTHERS GO TO PH301Y_07

PH301Y_05: Do you still have Cancer or a malignant tumour?

1. Yes
5. No

IF (PH301FFW2_07 = 1 & PH301a = 1,2 & PH301X0_07 ≠ 1) ASK PH301Y_07, OTHERS GO TO PH326

PH301Y_07: Do you still have emotional, nervous or psychiatric problems?

1. Yes
5. No

IF (PH301FFW2_08 = 1), ASK PH326. OTHERS GO TO PH301Y_12

PH326: Can you clarify, did you suffer from alcohol abuse, substance abuse or both?

1. Alcohol abuse
2. Substance abuse
3. Both alcohol and substance abuse
98. DK
99. RF

(QUESTIONS ON CURRENT ALCOHOL/SUBSTANCE ABUSE ARE FOUND AT PH321 AND PH321A)

IF (PH301FFW2_12 = 1 & PH301a = 1,2 & PH301X0_12 ≠ 1) ASK PH301Y_12, OTHERS GO TO PH301Y_13

PH301Y_12: Do you still have Stomach ulcers?

- 1. Yes
- 5. No

IF (PH301FFW2_13 = 1 & PH301a = 1,2 & PH301X0_13 ≠ 1) ASK PH301Y_13, OTHERS GO TO PH301Y_14

PH301Y_13: Do you still have Varicose Ulcers/veins?

- 1. Yes
- 5. No

IF (PH301FFW2_14 = 1 & PH301a = 1,2 & PH301X0_14 ≠ 1) ASK PH301Y_14, OTHERS GO TO PH301Y_15

PH301Y_14: Do you still have Cirrhosis, or serious liver damage?

- 1. Yes
- 5. No

IF (PH301FFW2_15 = 1 & PH301a = 1,2 & PH301X0_15 ≠ 1) ASK PH301Y_15, OTHERS GO TO PH301

PH301Y_15: Do you still have thyroid problems?

- 1. Yes
- 5. No

IWER: SHOW CARD PH4**IF (intstatusW3 = 4,8), USE WORDING 'B', OTHERWISE USE WORDING 'A'**

PH301: Please look at card PH4.

(A) Since [your/his/her/the] last interview, has a doctor ever told [you/Rname] that [you/he/she] [have/has] any of the [other] conditions on this card?

(B) Has a doctor ever told [you/Rname] that [you/he/she] [have/has] any of the conditions on this card?

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

- | | | |
|--|---------------------|------------------------------|
| 1. Chronic lung disease such as chronic bronchitis or emphysema | GO TO PH302 | [ph301_01] |
| 2. Asthma | | [ph301_02] |
| 3. Arthritis (including osteoarthritis, or rheumatism) | GO TO PH304 | [ph301_03] |
| 4. Osteoporosis, sometimes called thin or brittle bones | | [ph301_04] |
| 5. Cancer or a malignant tumour (including leukaemia or lymphoma but excluding minor skin cancers) | GO TO PH309 | [ph301_05] |
| 6. Parkinson's disease | GO TO PH314 | [ph301_06] |
| 7. Any emotional, nervous or psychiatric problems, such as depression or anxiety | GO TO PH315 | [ph301_07] |
| 16. Alcohol abuse | GO TO PH320 | [ph301_16] |
| 17. Substance abuse | GO TO PH320a | [ph301_17] |
| 9. Alzheimer's disease | GO TO PH318 | [ph301_09] |
| 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] |
| 15. Thyroid Problems | GO TO PH325 | [ph301_15] |
| 18. Chronic kidney disease | GO TO PH327 | [ph301_18] |
| 19. Severe Anaemia | | [ph301_19] |
| 95. Other (please specify) | | [ph301_95] [ph301oth] |
| 96. None of these | GO TO PH328 | [ph301_96] |
| 98. DK | GO TO PH328 | [ph301_98] |
| 99. RF | GO TO PH328 | [ph301_99] |
- (ELSA/ similar question HRS/NSHAP)

BL:

IF PH301_02, _04, _12, _13, _14, _19, _95 (after inserting condition in textbox), _96, _98, _99 = 1,
GO TO PH328**IF (PH301_01 = 1 OR PH301Y_01 =1) ASK PH302. OTHERS GO TO PH304**

PH302: [Are/Is] [you/Rname] receiving oxygen for [your/his/her] lung condition?

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

PH303: Does [your/his/her] lung condition limit [your/his/her] usual activities, such as household chores or work?

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

IF (PH301_03 = 1 OR PH301Y_03 = 1) ASK PH304. OTHERS GO TO PH309

IWER: CODE ALL THAT APPLY

PH304: Which type or types of arthritis [do/does] [you/Rname] have?

IWER: READ OUT

- | | |
|----------------------------------|------------|
| 1. Osteoarthritis | [ph304_01] |
| 2. Rheumatoid arthritis | [ph304_02] |
| 95. Some other kind of arthritis | [ph304_95] |
| 98. DK | [ph304_98] |
| 99. RF | [ph304_99] |
- (ELSA/HRS)

IF (PH301_03 = 1) ASK PH305. IF PH301Y_03 = 1, GO TO PH306

PH305: When [were/was] [you/Rname] first told that [you/he/she] had arthritis?

(MM/YYYY)

____/____

[ph305m][ph305y]

____ DK RF MONTH

____ DK RF YEAR

IF (PH301_03 = 1) OR PH301Y_03 = 1, ASK PH306

PH306: Does [your/his/her] arthritis make it difficult for [you/him/her] to do [your/his/her] usual activities such as household chores or work?

- 1. Yes, all the time
 - 3. Yes, sometimes
 - 5. No
 - 98. DK
 - 99. RF
- (TILDA)

PH307: Does the arthritis limit [your/his/her] social and leisure activities?

- 1. Yes, all the time
 - 3. Yes, sometimes
 - 5. No
 - 98. DK
 - 99. RF
- (TILDA)

PH308: Does [your/his/her] arthritis make it difficult for [you/him/her] to sleep at night?

- 1. Yes, all the time
- 3. Yes, sometimes
- 5. No
- 98. DK
- 99. RF

(TILDA)

IF (PH301_05 = 1) ASK PH309. OTHERS GO TO PH310a

PH309: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had cancer or a malignant tumour?

(MM/YYYY)

____/____

[ph309m][ph309y]

____ DK RF MONTH

____ DK RF YEAR

NOTE TO PROGRAMMER: Create a new set of variables PH310FFW2_i that contain a list of all types of cancer

- Fed forward from Wave 2 (i.e. those reported in Wave 1 and were confirmed to still exist in Wave 2 (in PH310Y_01-PH310Y_22) AND cancer type newly reported in Wave 2)
- All cancers fed forward from Wave 1 (if R did not take part in wave 2 OR had a proxy interview in wave 2)

This can be updated for subsequent waves. The logic for creating the above variable is as follows:

FOR i = 01 TO 22

IF (intstatusW3 = 1 & PH310FF_i (wave 2) = 1) OR (intstatusW3 = 2,3 & PH310FF_i (wave 1) = 1),
THEN PH310FFW2_i = 1; OTHERWISE PH310FFW2_i = 0

IF (PH310FFW2_05 = 1 & PH301a = 1,2 & PH301X0_05 ≠ 1) OR (PH310FFW2_05 = 0 & PH310FFW2_i = 1)), ASK PH310a. OTHERS GO TO PH310

PH310a: In your last interview, you reported having (type of cancer from PH310FFW2_i if cancer not disputed at PH301X0_05) cancer

1. Continue (go to PH310Y_01)
2. Respondent disputes having this type of cancer

CONDITION DISPUTED

PH310X0 INTERVIEWER Which type of cancer is being disputed.

- | | |
|--|-------------------------------|
| 1. Lung | (display if PH310FFW2_01 = 1) |
| 2. Breast | (display if PH310FFW2_02 = 1) |
| 3. Colon or rectum | (display if PH310FFW2_03 = 1) |
| 4. Stomach | (display if PH310FFW2_04 = 1) |
| 5. Oesophagus | (display if PH310FFW2_05 = 1) |
| 6. Prostate [males only] | (display if PH310FFW2_06 = 1) |
| 7. Bladder | (display if PH310FFW2_07 = 1) |
| 8. Liver | (display if PH310FFW2_08 = 1) |
| 9. Brain | (display if PH310FFW2_09 = 1) |
| 10. Ovary [females only] | (display if PH310FFW2_10 = 1) |
| 11. Cervix [females only] | (display if PH310FFW2_11 = 1) |
| 12. Endometrium [females only] | (display if PH310FFW2_12 = 1) |
| 13. Thyroid | (display if PH310FFW2_13 = 1) |
| 14. Kidney | (display if PH310FFW2_14 = 1) |
| 15. Testicle [males only] | (display if PH310FFW2_15 = 1) |
| 16. Pancreas | (display if PH310FFW2_16 = 1) |
| 17. Malignant melanoma (skin) | (display if PH310FFW2_17 = 1) |
| 18. Oral cavity | (display if PH310FFW2_18 = 1) |
| 19. Larynx | (display if PH310FFW2_19 = 1) |
| 20. Other pharynx (including nasopharynx, oropharynx, laryngopharynx or hypopharynx) | (display if PH310FFW2_20 = 1) |
| 21. Non-Hodgkin Lymphoma | (display if PH310FFW2_21 = 1) |
| 22. Leukaemia | (display if PH310FFW2_22 = 1) |

ASK FOR EACH SELECTION AT PH310X0

PH310X_01-22 It may be that we have a recording error about you having [type of cancer listed at

PH301X0]. Can you confirm, that ...READ OUT.

1. You never had [cancer listed in PH310X0] (error from previous wave)
2. [type of cancer selected at PH310X0] was misdiagnosed

IF (PH310FFW2_01 = 1 & PH310a = 1,2 & PH310X0_01 ≠ 1) ASK PH310Y_01. OTHERS GO TO PH310Y_02

PH310Y_01: Do you still have lung cancer?

1. Yes
5. No

IF (PH310FFW2_02 = 1 & PH310a = 1,2 & PH310X0_02 ≠ 1) ASK PH310Y_02. OTHERS GO TO PH310Y_03

PH310Y_02: Do you still have breast cancer?

1. Yes
5. No

IF (PH310FFW2_03 = 1 & PH310a = 1,2 & PH310X0_03 ≠ 1) ASK PH310Y_03. OTHERS GO TO PH310Y_04

PH310Y_03: Do you still have colon or rectum cancer?

1. Yes
5. No

IF (PH310FFW2_04 = 1 & PH310a = 1,2 & PH310X0_04 ≠ 1) ASK PH310Y_04. OTHERS GO TO PH310Y_05

PH310Y_04: Do you still have stomach cancer?

1. Yes
5. No

IF (PH310FFW2_05 = 1 & PH310a = 1,2 & PH310X0_05 ≠ 1) ASK PH310Y_05. OTHERS GO TO PH310Y_06

PH310Y_05: Do you still have cancer of the oesophagus?

1. Yes
5. No

IF (PH310FFW2_06 = 1 & PH310a = 1,2 & PH310X0_06 ≠ 1) ASK PH310Y_06. OTHERS GO TO PH310Y_07

PH310Y_06: Do you still have prostate cancer?

1. Yes
5. No

IF (PH310FFW2_07 = 1 & PH310a = 1,2 & PH310X0_07 ≠ 1) ASK PH310Y_07. OTHERS GO TO PH310Y_08

PH310Y_07: Do you still have cancer of the bladder?

1. Yes
5. No

IF (PH310FFW2_08 = 1 & PH310a = 1,2 & PH310X0_08 ≠ 1) ASK PH310Y_08. OTHERS GO TO PH310Y_09

PH310Y_08: Do you still have liver cancer?

1. Yes
5. No

IF (PH310FFW2_09 = 1 & PH310a = 1,2 & PH310X0_09 ≠ 1) ASK PH310Y_09. OTHERS GO TO PH310Y_10

PH310Y_09: Do you still have brain cancer?

1. Yes

5. No

IF (PH310FFW2_10 = 1 & PH310a = 1,2 & PH310X0_10 ≠ 1) ASK PH310Y_10. OTHERS GO TO PH310Y_11

PH310Y_10: Do you still have cancer of the ovary?

1. Yes

5. No

IF (PH310FFW2_11 = 1 & PH310a = 1,2 & PH310X0_11 ≠ 1) ASK PH310Y_11. OTHERS GO TO PH310Y_12

PH310Y_11: Do you still have cancer of the cervix?

1. Yes

5. No

IF (PH310FFW2_12 = 1 & PH310a = 1,2 & PH310X0_12 ≠ 1) ASK PH310Y_12. OTHERS GO TO PH310Y_13

PH310Y_12: Do you still have cancer of the endometrium?

1. Yes

5. No

IF (PH310FFW2_13 = 1 & PH310a = 1,2 & PH310X0_13 ≠ 1) ASK PH310Y_13. OTHERS GO TO PH310Y_14

PH310Y_13: Do you still have cancer of the thyroid?

1. Yes

5. No

IF (PH310FFW2_14 = 1 & PH310a = 1,2 & PH310X0_14 ≠ 1) ASK PH310Y_14. OTHERS GO TO PH310Y_15

PH310Y_14: Do you still have cancer of the kidney?

1. Yes

5. No

IF (PH310FFW2_15 = 1 & PH310a = 1,2 & PH310X0_15 ≠ 1) ASK PH310Y_15. OTHERS GO TO PH310Y_16

PH310Y_15: Do you still have testicular cancer?

1. Yes

5. No

IF (PH310FFW2_16 = 1 & PH310a = 1,2 & PH310X0_16 ≠ 1) ASK PH310Y_16. OTHERS GO TO PH310Y_17

PH310Y_16: Do you still have cancer of the pancreas?

1. Yes

5. No

IF (PH310FFW2_17 = 1 & PH310a = 1,2 & PH310X0_17 ≠ 1) ASK PH310Y_17. OTHERS GO TO PH310Y_18

PH310Y_17: Do you still have malignant melanoma (skin)?

1. Yes

5. No

IF (PH310FFW2_18 = 1 & PH310a = 1,2 & PH310X0_18 ≠ 1) ASK PH310Y_18. OTHERS GO TO PH310Y_19

PH310Y_18: Do you still have cancer of the oral cavity?

1. Yes

5. No

IF (PH310FFW2_19 = 1 & PH310a = 1,2 & PH310X0_19 ≠ 1) ASK PH310Y_19. OTHERS GO TO PH310Y_20

PH310Y_19: Do you still have cancer of the larynx?

1. Yes

5. No

IF (PH310FFW2_20 = 1 & PH310a = 1,2 & PH310X0_20 ≠ 1) ASK PH310Y_20. OTHERS GO TO PH310Y_21

PH310Y_20: Do you still have cancer of the other pharynx?

1. Yes

5. No

IF (PH310FFW2_21 = 1 & PH310a = 1,2 & PH310X0_21 ≠ 1) ASK PH310Y_21. OTHERS GO TO PH310Y_22

PH310Y_21: Do you still have Non-Hodgkin Lymphoma cancer?

1. Yes

5. No

IF (PH310FFW2_22 = 1 & PH310a = 1,2 & PH310X0_22 ≠ 1) ASK PH310Y_22. OTHERS GO TO PH310

PH310Y_22: Do you still have Leukaemia?

1. Yes

5. No

**IF (PH301_05 = 1), USE WORDING 'B'. OTHERWISE USE WORDING 'A'
OTHERS GO TO PH314**

IWER: SHOW CARD PH5

PH310: Please look at card PH5.

(A) Since our last interview, has a doctor ever told you that you have any of these [other] types of cancer? IF SO ASK, Which one?

(B) What type of cancer [have/has] [you/he/she] had?

IWER: CODE ALL THAT APPLY

- | | | |
|--------------------|----------------|------------|
| 1. Lung | | [ph310_01] |
| 2. Breast | [females only] | [ph310_02] |
| 3. Colon or rectum | | [ph310_03] |
| 4. Stomach | | [ph310_04] |
| 5. Oesophagus | | [ph310_05] |
| 6. Prostate | [males only] | [ph310_06] |
| 7. Bladder | | [ph310_07] |
| 8. Liver | | [ph310_08] |

9. Brain		[ph310_09]
10. Ovary	[females only]	[ph310_10]
11. Cervix	[females only]	[ph310_11]
12. Endometrium	[females only]	[ph310_12]
13. Thyroid		[ph310_13]
14. Kidney		[ph310_14]
15. Testicle	[males only]	[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 (please specify)		[ph310_95] [ph310oth]
96. None of these		[ph310_96]
98. DK		[ph310_98]
99. RF		[ph310_99]
(SHARE/ similar question in ELSA)		

IF (PH310_01-95=1), ASK PH311 TO PH313 FOR EACH TYPE OF CANCER (e.g. if ph310_01 = 1, variables used are ph311_01, ph312_01_x, ph313_01, etc). IF ph301_95=1, ASK PH311 TO PH313 FOR CANCER LISTED IN ph310oth textbox

IF (PH310FFW2_01-22=1 & PH310X0_01-22 ≠ 1), ASK PH311a TO PH313a FOR EACH TYPE OF CANCER (e.g. variables used are ph311a_01, ph312a_01_x, ph313a_01, etc.)

PH311: [Have/Has] [you/he/she] received any treatment for [your/his/her] [cancer type listed at PH310_i]? [ph311_01 to ph311_95]

- | | |
|--------|-------------------------------|
| 1. Yes | GO TO PH312 |
| 5. No | SKIP PH312 & ph313 |
| 98. DK | SKIP PH312 & ph313 |
| 99. RF | SKIP PH312 & ph313 |

(ELSA/HRS)

IWER: SHOW CARD PH6

PH312: Please look at card PH6. What sort of treatments [have/has] [you/he/she] received for [cancer type listed at PH310_i]? [ph312_01_01 to ph312_95_99]

IWER: CODE ALL THAT APPLY

- | | |
|--|---------------------------|
| 1. Chemotherapy | [ph312_i_01] |
| 2. Medication | [ph312_i_02] |
| 3. Surgery | [ph312_i_03] |
| 4. Biopsy | [ph312_i_04] |
| 5. Radiation/X-Ray | [ph312_i_05] |
| 6. Treatment for symptoms (pain, nausea, rashes) | [ph312_i_06] |
| 95. Other (specify) | [ph312_i_95] [ph312oth_i] |
| 98. DK | [ph312_i_98] |
| 99. RF | [ph312_i_99] |
- (HRS)

PH313: Since [you/he/she] received this treatment has the [cancer type listed at PH310_i] got worse, better or stayed about the same? **[ph313_01 to ph313_95]**

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

IF (PH310FFW2_01-22=1 & PH310X0_01-22 ≠ 1), ASK PH311a TO PH313a FOR EACH TYPE OF CANCER (e.g. variables used are ph311a_01, ph312a_01_x, ph313a_01, etc)

OTHERS GO TO PH314

PH311a: Since our last interview, have you received any treatment for your [cancer type listed at PH310FFW2_i and not disputed at PH310X0_i]? **[ph311a_01 to ph311a_22]**

- 1. Yes **GO TO PH312a**
- 5. No **SKIP PH312a & ph313a**
- 98. DK **SKIP PH312a & ph313a**
- 99. RF **SKIP PH312a & ph313a**
- (ELSA/HRS)

IWER: SHOW CARD PH6

PH312a: Please look at card PH6. Since our last interview, what sort of treatments have you received for [cancer type listed at PH310FFW2_i and not disputed at PH310X0_i]? **[ph312a_01_01 to ph312a_22_99]**

IWER: CODE ALL THAT APPLY

- 1. Chemotherapy **[ph312a_i_01]**
- 2. Medication **[ph312a_i_02]**
- 3. Surgery **[ph312a_i_03]**
- 4. Biopsy **[ph312a_i_04]**
- 5. Radiation/X-Ray **[ph312a_i_05]**
- 6. Treatment for symptoms (pain, nausea, rashes) **[ph312a_i_06]**
- 95. Other (specify) **[ph312a_i_95] [ph312aoth_i]**
- 98. DK **[ph312a_i_98]**
- 99. RF **[ph312a_i_99]**
- (HRS)

PH313a: Since you received treatment in the past two years has the [cancer type listed at PH310FFW2_i and not disputed at PH310X0_i] got worse, better or stayed about the same? **[ph313a_01 to ph313a_22]**

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

IF (PH301_06 = 1) ASK PH314. OTHERS GO TO PH315

PH314: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had Parkinson's disease? (MM/YYYY)

____/____
____ DK RF MONTH
____ DK RF YEAR

[ph314m][ph314y]

IF (PH301_07 = 1) ASK PH315. OTHERS GO TO PH316

PH315: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had emotional, nervous or psychiatric problems?

(MM/YYYY)

____/____
____ DK RF MONTH
____ DK RF YEAR

[ph315m][ph315y]

IF (PH301_07 = 1 OR PH301Y_07 = 1) ASK PH316. OTHERS GO TO PH320

IWER: SHOW CARD PH7

PH316: Please look at card PH7. What type of emotional, nervous or psychiatric problems [do/does] [you/he/she] 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] |
| 9. Post-traumatic stress disorder | [ph316_09] |
| 95. Something else | [ph316_95] |
| 98. DK | [ph316_98] |
| 99. RF | [ph316_99] |
| (ELSA) | |

IF (PH301_07 = 1) ASK PH317. OTHERS GO TO PH317b

PH317: [Do/Does] [you/he/she] get psychiatric treatment for [your/his/her] problems, such as attending a psychiatrist?

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

PH317a: [Do/Does] [you/he/she] get psychological treatment for [your/his/her] problems, such as counselling?

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

IF (PH301FFW2_07 = 1 & PH301X0_07 ≠ 1) ASK PH317b. OTHERS GO TO PH320

PH317b: Since [your/Rname's] last interview, did [you/he/she] get psychiatric treatment for [your/his/her] problems, such as attending a psychiatrist?

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

PH317c: Since [your/his/her] last interview, did [you/he/she] get psychological treatment for [your/his/her] problems, such as counselling?

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

IF (PH301_16 = 1 or PH326 = 1,3) ASK PH320. OTHERS GO TO PH321

PH320: When [were/was] [you/Rname] first told by a doctor that [you/he/she] suffered from alcohol abuse?

(MM/YYYY)

____/____

[ph320m][ph320y]

____ DK RF MONTH

____ DK RF YEAR

IF (PH301_16 = 1 OR PH326 = 1,3 OR (PH301FFW2_16 = 1 & PH301X0_16 ≠ 1) ASK PH321. OTHERS GO TO PH320a

PH321: [Do/Does] [you/he/she] currently suffer from alcohol abuse?

- 1. Yes **GO TO PH322**
- 5. No **GO TO PH323**
- 98. DK **GO TO PH323**
- 99. RF **GO TO PH323**

IF (PH321 = 1) ASK PH322. OTHERS GO TO PH323

PH322: [Are/Is] [you/he/she] receiving any treatment for [your/his/her] alcohol abuse?

- 1. Yes **SKIP PH323 AND PH324**
- 5. No **GO TO PH324**
- 98. DK **SKIP PH323 AND PH324**
- 99. RF **SKIP PH323 AND PH324**

IF (PH321 = 5,98,99) ASK PH323. OTHERS GO TO PH324

PH323: How long did [you/Rname] suffer from alcohol abuse?

1....97 yrs

-98. DK

-99. RF

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

IF (PH321 = 5,98,99 OR PH322 = 5) ASK PH324. OTHERS GO TO PH320a

PH324: Did [you/he/she] ever receive any treatment for [your/his/her] alcohol abuse?

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

IF (PH301_17 = 1 or PH326 = 2,3) ASK PH320a. OTHERS GO TO PH321a

PH320a: When [were/was] [you/Rname] first told by a doctor that [you/he/she] suffered from substance abuse?

(MM/YYYY)

____/____

[ph320m][ph320y]

____ DK RF MONTH

____ DK RF YEAR

IF (PH301_17 = 1 OR PH326 = 2,3 OR (PH301FFW2_17 = 1 & PH301X0_17 ≠ 1) ASK PH321a. OTHERS GO TO PH318

PH321a: [Do/Does] [you/he/she] currently suffer from substance abuse?

1. Yes GO TO PH322a

5. No GO TO PH323a

98. DK GO TO PH323a

99. RF GO TO PH323a

IF (PH321a = 1) ASK PH322a. OTHERS GO TO PH318

PH322a: [Are/Is] [you/he/she] receiving any treatment for [your/his/her] substance abuse?

1. Yes SKIP PH323a AND PH324a

5. No GO TO PH324a

98. DK SKIP PH323a AND PH324a

99. RF SKIP PH323a AND PH324a

IF (PH321a = 5,98,99) ASK PH323a. OTHERS GO TO PH324a

PH323a: How long did [you/he/she] suffer from substance abuse?

1....97 yrs

-98. DK

-99. RF

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

IF (PH321a = 5,98,99 OR IF PH322a = 5) ASK PH324a. OTHERS GO TO PH318

PH324a: Did [you/he/she] ever receive any treatment for [your/his/her] substance abuse?

1. Yes

5. No

98. DK

99. RF

IF (PH301_09 = 1) ASK PH318. OTHERS GO TO PH319

PH318: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had Alzheimer's Disease?

(MM/YYYY)

____/____

[ph318m][ph318y]

____ DK RF MONTH

____ DK RF YEAR

IF (PH301_10 = 1) ASK PH319. OTHERS GO TO PH319a

PH319: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had dementia, senility?

(MM/YYYY)

____/____

[ph319m][ph319y]

_____ DK RF MONTH
_____ DK RF YEAR

IF (PH301_11 = 1) ASK PH319a. OTHERS GO TO PH325

PH319a: When [were/was] [you/Rname] first told by a doctor that [you/he/she] had serious memory impairment?

(MM/YYYY)

_____/____

[ph319am][ph319ay]

_____ DK RF MONTH

_____ DK RF YEAR

IF (PH301_15 = 1 OR PH301Y_15 = 1), ASK PH325. OTHERS GO TO PH327

PH325: [Do/Does] [you/Rname] have an overactive (hyperactive) thyroid or an underactive (hypoactive) thyroid?

1. Overactive (Hyperactive) thyroid
2. Underactive (Hypoactive) thyroid
96. None of these
98. DK
99. RF

IF (PH301_18 = 1), ASK PH327. OTHERS GO TO PH328

PH327: Have you ever had dialysis or a kidney transplant?

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

ALL RESPONDENTS ARE ASKED PH328

PH328: [Have/Has] [you/Rname] ever had a major bleed which required hospitalisation or a blood transfusion?

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

6.6 Falls/Fracture section

PH401: IF (intstatusW3 = 2 - 8), use wording 'A'

If (intstatusW3 = 1), use wording 'B'

(A) [Have/Has] [you/Rname] fallen in the last year?

(B) Have you fallen since your last interview?

1. Yes **IF instatusW3 = 1, GO TO PH402a. OTHERWISE GO TO PH402**

5. No **GO TO PH405**

98. DK **GO TO PH405**

99. RF **GO TO PH405**

(ELSA/HRS)

PH402a: How many times have you fallen since your last interview?

1....97

-98. DK

-99. RF

(ELSA/HRS)

PH402:

How many times [have/has] [you/he/she] fallen in the last year?

1....97

-98. DK

-99. RF

(ELSA/HRS)

PH403: [Was this fall/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/he/she] injure [yourself/himself/herself] seriously enough to need medical treatment?

IWER: IF YES, PROBE: Did [you/he/she] get medical treatment?

1. Yes and [I/he/she] got treatment

2. Yes and [I/he/she] did not get treatment

5. No

98. DK

99. RF

(ELSA/HRS)

IF HH005==1 & PH405FF==1 GO TO PH406a

IF (intstatusW3 = 2 - 8), USE WORDING 'A'. IF (instatusW3 = 1), USE WORDING 'B'.

PH405: (A) [Have/Has] [you/Rname] ever had a blackout or fainted?

(B) Since your last interview, have you had a blackout or fainted?

1. Yes **GO TO PH406**

5. No **GO TO PH408**

98. DK **GO TO PH408**

99. RF **GO TO PH408**

(TILDA)

IF HH005==1 &PH405FF==1 ASK PH406a

PH406a: Approximately how many times have you had a blackout or fainted since your last interview?

0.....97 **IF >0 GO TO PH406**

-98. DK **GO TO PH406**

-99. RF **GO TO PH406**

(TILDA)

PH406: Approximately how many times [have/has] [you/he/she] had a blackout or fainted in the last year?

0.....97

-98. DK

-99. RF

(TILDA)

PH438: Approximately how many times [have/has] [you/he/she] had a blackout, near-faint or fainted before the age of 18?

0.....97

-98. DK

-99. RF

(TILDA)

PH439: Approximately how many times [have/has] [you/he/she] had a blackout, near-faint or fainted after the age of 18?

0.....97

-98. DK

-99. RF

(TILDA)

Fear of falling

PH408: [Are/Is] [you/Rname] afraid of falling?

1. Yes

5. No **Go to PH411**

98. DK **Go to PH411**

99. RF **Go to PH411**

(TILDA)

IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW), GO TO PH410

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/Does] [you/he/she] ever limit [your/his/her] activities, for example, what [you/he/she] [do/does] or where [you/he/she] [go/goes], because [you/he/she] [are/is] afraid of falling?

1. Yes

5. No
98. DK
99. RF
(TILDA)

IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW), GO TO PH414

Steadiness

IWER: CODE THE ONE THAT APPLIES – SHOW CARD PH7A

PH411: We are interested in your steadiness when walking, standing or getting up from a chair [and if this has changed since your last interview]. 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 SHOW CARD PH7A

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 SHOW CARD PH7A

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)

NOTE TO PROGRAMMER: Create new set of variables PH414FFW2_i that contain a list of

- all fractures fed forward from Wave 2 (i.e. those reported in Wave 1 and were not disputed in Wave 2 AND fractures newly reported in Wave 2) AND
- all fractures fed forward from Wave 1 (if R did not take part in wave 2 OR had a proxy interview in wave 2)

This can be updated for subsequent waves. The logic for creating the above variable is as follows:

FOR i = 01 TO 02

IF (intstatusW3 = 1 & PH414FF_i (wave 2) = 1) OR (intstatusW3 = 2,3 & PH414FF_i (wave 1) = 1),
THEN PH414FFW2_i = 1; OTHERWISE PH414FFW2_i = 0

FOR i= 03

IF (intstatusW3 = 1,2,3 & PH414FF_03 (wave 2) = 1), THEN PH414FFW2_03=1; OTHERWISE
PH414FFW2_03 = 0

IF (intstatusW3 = 1,2,3) & (PH414FFW2_01-03=1), GO TO PH414a.

ALL OTHERS, GO TO PH414 (original question).

PH414a: Last time you were interviewed, you told us that you had fractured your (*insert fracture locations from PH414FFW2_i*).

1. Continue (go to PH414)
2. Respondent disputes having one/all of these conditions

CONDITION DISPUTED

PH414X0 INTERVIEWER Which fracture is being disputed

1. Hip (display if (PH414W2FF_01= 1) **[ph414X0_01]**
2. Wrist (display if (PH414W2FF_02 = 1) **[ph414X0_02]**
3. Back/spine (vertebral) (display if PH414W2FF_03 = 1) **[ph414X0_03]**

IF (PH414X0_01 = 1) THEN ASK

PH414X_01 It may be that we have a recording error about you fracturing your hip. Can you confirm, that ...READ OUT.

1. You never fractured your hip (error from previous wave)
2. The hip fracture was misdiagnosed

IF (PH414X0_02 = 1) THEN ASK

PH414X_02 It may be that we have a recording error about you fracturing your wrist. Can you confirm, that ...READ OUT.

1. You never fractured your wrist (error from previous wave)
2. The wrist fracture was misdiagnosed

IF (PH414X0_03 = 1) THEN ASK

PH414X_03 It may be that we have a recording error about you fracturing bones in your back/spine. Can you confirm, that ...READ OUT.

1. You never fractured bones in your back/spine (error from previous wave)
2. The back/spine fracture was misdiagnosed

PH414

IF (intstatusW3= 4,8), USE WORDING 'A'. OTHERS, USE WORDING 'B'

(A) [Have/Has] [you/Rname] ever fractured any of the following?

(B) Since [your/his/her/the] last interview, [have/has] [you/Rname] fractured any of the following?

IWER: CODE ALL THAT APPLY

- | | |
|---|------------|
| 1. Hip | [ph414_01] |
| 2. Wrist | [ph414_02] |
| 3. Bones in [your/his/her] back/spine (Vertebral) | [ph414_03] |
| 95. Other | [ph414_95] |
| 96. None of the above | [ph414_96] |
| 98. DK | [ph414_98] |
| 99. RF | [ph414_99] |

(ELSA/HRS/WHO FRAX)

IF (PH414FFW2_01=1 & PH414x0_01≠1) OR (PH414_01=1), GO TO PH438a

IF (PH414FFW2_02=1 & PH414x0_02≠1) OR (PH414_02=1), GO TO PH438b

IF (PH414FFW2_03=1 & PH414x0_03≠1) OR (PH414_03=1), GO TO PH438c

If R indicates that they have a history of hip, wrist or vertebral fracture.... Repeat the following loop for each fracture (i.e. ph438a to ph441a for hip; ph438b to ph441b for wrist; ph438c to ph441c for vertebral)

PH438a: [Were/Was] [you/Rname] aged 40 or over when [you/he/she] fractured [your/his/her] hip?

- | | |
|--------|--------------|
| 1. Yes | |
| 5. No | GO TO PH438b |
| 98. DK | GO TO PH438b |
| 99. RF | GO TO PH438b |

PH439a: In what month/year did this fracture occur?

(MM/YYYY)

____/____

[ph439am][ph439ay]

____ DK RF MONTH

____ DK RF YEAR

PH440a: Was this fracture the result of a fall, a car accident or another event?

- | | |
|-----------------|--------------|
| 1. Fall | |
| 2. Car accident | GO TO PH438b |
| 95. Other event | GO TO PH438b |
| 98. DK | GO TO PH438b |
| 99. RF | GO TO PH438b |

IWER: SHOW CARD PH8

PH441a: Which of the following best describes the circumstances of this fall?

- | | |
|---|-------------|
| 1. Fell while sitting, standing still or walking slowly | |
| 2. Fell while walking quickly, jogging or running | |
| 3. Fell when turning | |
| 4. Fell when getting out of bed | |
| 5. Fell when sitting down, standing up or using the toilet | |
| 6. Fell from a height e.g. off a chair, when using stairs, steps, ladders, etc. | |
| 95. Other (please specify in text box) | [ph441aoth] |

98. DK
99. RF

IF (PH414FFW2_02 = 1 & PH414x0_02≠1) OR (PH414_02=1) ASK PH438b, OTHERS GO TO PH438c.

PH438b: [Were/Was] [you/Rname] aged 40 or over when [you/he/she] fractured [your/his/her] wrist?

1. Yes
5. No GO TO PH438c
98. DK GO TO PH438c
99. RF GO TO PH438c

PH439b: In what month/year did this fracture occur?

(MM/YYYY)

____/____

[ph439bm][ph439by]

____ DK RF MONTH

____ DK RF YEAR

PH440b: Was this fracture the result of a fall, a car accident or another event?

1. Fall
2. Car accident GO TO PH438c
95. Other event GO TO PH438c
98. DK GO TO PH438c
99. RF GO TO PH438c

IWER: SHOW CARD PH8

PH441b: Which of the following best describes the circumstances of this fall?

1. Fell while sitting, standing still or walking slowly
2. Fell while walking quickly, jogging or running
3. Fell when turning
4. Fell when getting out of bed
5. Fell when sitting down, standing up or using the toilet
6. Fell from a height e.g. off a chair, when using stairs, steps, ladders, etc.
95. Other (please insert in text box) [ph441both]
98. DK
99. RF

IF (PH414FFW2_03 = 1 & PH414x0_03≠1) OR (PH414_03=1) ASK PH438c, OTHERS GO TO PH436.

PH438c: [Were/Was] [you/Rname] aged 40 or over when [you/he/she] fractured [your/his/her] back/spine (vertebrae)?

1. Yes
5. No GO TO PH436
98. DK GO TO PH436
99. RF GO TO PH436

PH439c: In what month/year did this fracture occur?

(MM/YYYY)

____/____

[ph439cm][ph439cy]

____ DK RF MONTH

_____ DK RF YEAR

PH440c: Was this fracture the result of a fall, a car accident or another event?

- 1. Fall
- 2. Car accident GO TO PH436
- 95. Other event GO TO PH436
- 98. DK GO TO PH436
- 99. RF GO TO PH436

IWER: SHOW CARD PH8

PH441c: Which of the following best describes the circumstances of this fall?

- 1. Fell while sitting, standing still or walking slowly
- 2. Fell while walking quickly, jogging or running
- 3. Fell when turning
- 4. Fell when getting out of bed
- 5. Fell when sitting down, standing up or using the toilet
- 6. Fell from a height e.g. off a chair, when using stairs, steps, ladders, etc.
- 95. Other (please insert in text box) **[ph441coth]**
- 98. DK
- 99. RF

PH436: Did either of [your/his/her] parents ever have a hip or wrist fracture?

- 1. Yes
- 5. No **Go to PH415**
- 98. DK **Go to PH415**
- 99. RF **Go to PH415**

PH437: Which of [your/his/her] parents had a previous hip or wrist fracture?

- 1. Mother
- 2. Father
- 3. Both
- 98. DK
- 99. RF

PH415: [Have/Has] [you/Rname] had any joint replacements?

- 1. Yes
- 5. No **GO TO PH418**
- 98. DK **GO TO PH418**
- 99. RF **GO TO PH418**
- (ELSA)

PH416: Which joints did [you/he/she] have replaced?

- 1. Hip **[ph416_01]**
- 2. Both hips **[ph416_02]**
- 3. Knee **[ph416_03]**
- 4. Both knees **[ph416_04]**
- 95. Other joint **[ph416_95]**
- 98. DK **[ph416_98]**
- 99. RF **[ph416_99]**
- (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
95. Other reason
98. DK
99. RF
- (ELSA)

IF HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW, GO TO PH501

IWER: HAND THE COGNITIVE MODULE BOOKLET TO THE RESPONDENT WITH THE 5-SIDED FIGURE (PAGE 5) 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
95. Did something else
96. Did nothing/did not remember what to do
97. Unable to carry out the task
99. RF

6.7 Pain Section

PH501: [Are/Is] [you/Rname] often troubled with pain?

- 1. Yes **GO TO PH506**
- 5. No **GO TO PH507**
- 98. DK **GO TO PH507**
- 99. RF **GO TO PH507**

(ELSA/HRS)

PH506: Has this pain lasted more than 3 months?

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

***IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW), GO TO PH507**

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 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_01]**
- 2. Hips **[ph503_02]**
- 3. Knees **[ph503_03]**
- 4. Feet **[ph503_04]**
- 5. Mouth/teeth **[ph503_05]**
- 6. All over **[ph503_06]**
- 95. Other **[ph503_95]**
- 98. DK **[ph503_98]**
- 99. RF **[ph503_99]**

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

6.8 Oral health section

IWER: SHOW CARD PH9

PH507: Please look at card PH9. Which best describes the teeth [you/Rname] [have/has]?

IWER: CODE THE ONE THAT APPLIES

1. [I/He/She] [have/has] all [my/his/her] own natural teeth – none missing
 2. [I/He/She] [have/has] [my/his/her] own teeth, no dentures – but some missing
 3. [I/He/She] [have/has] dentures as well as some of [my/his/her] own teeth
 4. [I/He/She] [have/has] full dentures
 5. [I/He/She] [have/has] no teeth or dentures
98. DK
99. RF
(SLAN)

IWER: SHOW CARD PH1

PH508: Would you say [your/Rname's] dental health (mouth, teeth and/or dentures) is

IWER: CODE THE ONE THAT APPLIES

1. Excellent
 2. Very good
 3. Good
 4. Fair
 5. Poor
98. DK
99. RF
[ELSA wave 3]

IWER: SHOW CARD PH10

PH509: In the past 6 months, have any problems with mouth, teeth or dentures caused [you/Rname] to have any of the following?

IWER: CODE ALL THAT APPLY (OUT OF THE FIRST 5 OPTIONS)

- | | |
|--|------------|
| 1. Difficulty eating food | [ph509_01] |
| 2. Difficulty speaking clearly | [ph509_02] |
| 3. Problems with smiling, laughing and showing teeth without embarrassment | [ph509_03] |
| 4. Problems with emotional stability, for example, becoming more easily upset than usual | [ph509_04] |
| 5. Problems enjoying the company of other people such as family, friends, or neighbours | [ph509_05] |
| 96. None of these | [ph509_96] |
| 98. DK | [ph509_98] |
| 99. RF | [ph509_99] |
- [ELSA wave 3]

PH510: Over the last few years, how often [have/has] [you/he/she] visited the dentist?

1. More frequently than every 2 years
 2. Less frequently than every 2 years
 3. Never
98. DK
99. RF

IWER: SHOW CARD PH11

PH511: If [you/he/she] needed a routine visit for dental care, which one of the following would [you/Rname] attend?

1. A general dental practice as a private patient [with or without PRSI reimbursement]
 2. A general dental practice through the Medical Card Scheme
 3. A HSE dentist at the local clinic
 4. A Dental Hospital (either UCC or Trinity College Dublin)
 5. A dental technician
98. DK
99. RF

6.9 Incontinence section

INTRO: READ OUT We are interested in finding out more about problems that affect people's quality of life.

PH601: During the last 12 months, [have/has][you/Rname] lost any amount of urine beyond [your/his/her] 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/Has] [you/he/she] ever mentioned this problem to a doctor, nurse or other health professional?

1. Yes

5. No

98. DK

99. RF

(ELSA)

PH604: [Do/Does] [you/he/she] ever limit [your/his/her] activities, for example, what [you/he/she] [do/does] or where [you/he/she] [go/goes], because of urinary incontinence?

1. Yes

5. No

98. DK

99. RF

(TILDA)

6.10 Medical tests

IF (intstatusW3 = 4,8), GO TO PH701, OTHERS GO TO PH701a

INTRO: [Have/Has] [you/Rname] ever had any of the following medical tests or procedures?

PH701: A flu vaccination?

- 1. Yes **GO TO PH731**
- 5. No **GO TO PH702**
- 98. DK **GO TO PH702**
- 99. RF **GO TO PH702**
- (HRS)

PH701a: Since [your/Rname's/the] last interview, [have/has] [you/he/she] had a flu vaccination?

- 1. Yes **GO TO PH731**
- 5. No **GO TO PH702**
- 98. DK **GO TO PH702**
- 99. RF **GO TO PH702**
- (HRS)

PH731: Did [you/he/she] get a flu vaccination for

- 1. The 2013/2014 winter
- 2. The 2014/2015 winter *
- 3. Both the 2013/2014 and 2014/2015 winters *
- 5. No
- 98. DK
- 99. RF

*OPTIONS 2 and 3 should appear IF (Date of interview is after 30th September 2014)

PH732: Did [you/he/she] get a flu vaccination from:

- 1. A GP
- 2. A nurse in a GP surgery
- 3. A pharmacist
- 4. Occupational health (i.e., at work)
- 95. Other, please specify [ph732oth]
- 98. DK
- 99. RF

IF (intstatusW3 = 4,8), GO TO PH702, OTHERS GO TO PH702a

PH702: A blood test for cholesterol?

- 1. Yes
- 5. No
- 98. DK
- 99. RF
- (HRS)
- GO TO PH734

PH702a: Since [your/Rname's/the] last interview, [have/has] [you /he/she] had a blood test for cholesterol?

- 1. Yes
- 5. No

98. DK
99. RF
(HRS)

PH734: [Have/Has] [you/Rname] had [your/his/her] blood pressure measured in the last twelve months?

1. Yes
2. No
98. DK
99. RF

IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW), GO TO PH712

PH728: Have you had a Faecal Occult Blood Test, or Colonoscopy to screen for cancer?

If R requires further clarification, IWER to read out: The faecal occult blood test detects small amounts of blood in your faeces which you would not normally see or be aware of. Faeces are sometimes called stools or motions. A colonoscopy is a test that allows your doctor to look at the inner lining of your large intestine (rectum and colon). He or she uses a thin, flexible tube called a colonoscope to look at the colon. A colonoscopy helps find ulcers, colon polyps, tumors, and areas of inflammation or bleeding. Colonoscopy can also be used as a screening test to check for cancer or precancerous growths in the colon or rectum.

1. Yes, a Faecal Occult Blood Test	GO TO PH729
2. Yes, a Colonoscopy	GO TO PH730
3. Yes, both	GO TO PH729
5. No	GO TO PH703
98. DK	GO TO PH703
99. RF	GO TO PH703

PH729: When was your most recent Faecal Occult Blood Test?
(MM/YYYY)

____/____
____ DK RF MONTH
____ DK RF YEAR

[ph729m] [ph729y]

IF PH728 = 3, GO TO PH730. OTHERS GO TO PH703.

PH730: When was your most recent Colonoscopy?
(MM/YYYY)

____/____
____ DK RF MONTH
____ DK RF YEAR

[ph730m] [ph730y]

IF (GD002 = 2 (FEMALE)) GO TO PH703. IF (GD002 = 1 (MALE)) GO TO PH710.

NOTE TO PROGRAMMER: Create new variables PH703FFW2 and PH705FFW2 that indicate

- answers fed forward from Wave 2 (if female R took part in wave 2) AND
- answers fed forward from Wave 1 (if female R skipped wave 2 or had a proxy interview at wave 2)

FOR i = 1,5,98,99

IF (intstatusW3 = 1 & PH703FF (wave 2)=i) OR (intstatusW3 = 2,3 & PH703FF(wave 1) = i)), THEN
PH703FFW2 = i

FOR i = 1,2,5,98,99

IF (intstatusW3 = 1 & PH705FF (wave 2)=i) OR (intstatusW3 = 2,3 & PH705FF(wave 1) = i)), THEN
PH705FFW2 = i

IF PH703FFW2 = 5,98,99 OR intstatusW3=4, GO TO PH703

IF PH703FFW2 = 1 & PH705FFW2 = 1, GO TO PH705a

IF PH703FFW2 = 1 & PH705FFW2 = 5, GO TO PH705b

IF PH703FFW2 = 1 & PH705FFW2 = 2, GO TO PH705c

IF (PH703FFW2 = 1) & (PH705FFW2 = 98, 99), GO TO PH705d

PH703: Have you gone through or are you currently going through the menopause?

- 1. Yes – gone through the menopause already
 - 2. Yes – currently going through the menopause
 - 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 PH12

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)

IF PH703FFW2 = 1 & PH705FFW2 = 1, GO TO PH705a. OTHERS GO TO PH705b

IWER: SHOW CARD PH12

PH705a: In your last interview, you said that you had already gone through the menopause or were going through the menopause and were taking hormones at that time. Are you still using prescription hormones?

- | | |
|-----------------------------------|--------------------|
| 1. Yes, currently taking hormones | GO TO PH706 |
| 5. No, no longer taking hormones | GO TO PH707 |
| 98. DK | GO TO PH708 |
| 99. RF | GO TO PH708 |
- (NSHAP)

IF PH703FFW2 = 1 & PH705FFW2 = 5, GO TO PH705b. OTHERS GO TO PH705c

IWER: SHOW CARD PH12

PH705b: In your last interview, you said that you had already gone through the menopause or were going through the menopause but had not taken hormones. Since then, have you used prescription hormones?

- | | |
|---------------------------------------|--------------------|
| 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)

IF PH703FFW2 = 1 & PH705FFW2 = 2, GO TO PH705c. OTHERS GO TO PH705d

IWER: SHOW CARD PH12

PH705c: In your last interview, you said that you had already gone through the menopause or were going through the menopause but were no longer taking hormones. Are you taking prescription hormones now?

- | | |
|-----------------------------------|--------------------|
| 1. Yes, currently taking hormones | GO TO PH706 |
| 5. No | GO TO PH708 |
| 98. DK | GO TO PH708 |
| 99. RF | GO TO PH708 |
- (NSHAP)

IF (PH703FFW2 = 1) & (PH705FFW2 = 98 OR 99), GO TO PH705d. OTHERS GO TO PH708

IWER: SHOW CARD PH12

PH705d: In your last interview, you said that you had already gone through or were going through the menopause. 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)

*****Could this option be added in here – usually NO coded as '5' so would have to change wave 2 coding to keep it consistent with this approach**

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

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

BL: GO TO PH708

IF (PH705 = 2 OR PH705a = 5 OR PH705b = 2 OR PH705d = 2) ASK PH707 OTHERS 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)

IF (intstatusW3=4), GO TO PH709, OTHERS GO TO PH709a

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

1. Yes

GO TO PH726

5. No

GO TO PH725

98. DK

GO TO PH725

99. RF

GO TO PH725

(HRS)

BL:

PH709a: Since your last interview, have you had a mammogram or x-ray of the breast, to search for cancer?

1. Yes

GO TO PH726

5. No

GO TO PH725

98. DK

GO TO PH725

99. RF

GO TO PH725

(HRS)

PH733: When was your most recent mammogram?

(MM/YYYY)

____/____

[ph733m] [ph733y]

____ DK RF MONTH

____ DK RF YEAR

PH725: Approximately how old were you when you began your menstrual cycle?

1....20

-98. DK

-99. RF

BL: GO TO PH719

IF (GD002 = 1 'MALE') ASK PH710, OTHERS GO TO PH719

IF (intstatusW3 = 4), GO TO PH710, OTHERS GO TO PH710a

PH710: Have you had an examination of your prostate to screen for cancer?

1. Yes

5. No

98. DK

99. RF

(HRS)

BL: GO TO PH711

PH710a: Since your last interview, have you had an examination of your prostate to screen for cancer?

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

IF (intstatusW3=4), GO TO PH711, OTHERS GO TO PH711a

PH711: A PSA blood test to screen for cancer?

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

- 1. Yes **GO TO PH727**
- 5. No **GO TO PH719**
- 98. DK **GO TO PH719**
- 99. RF **GO TO PH719**

(HRS)

BL:

PH711a: Since your last interview, have you had a PSA blood test to screen for cancer?

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

- 1. Yes **GO TO PH727**
- 5. No **GO TO PH719**
- 98. DK **GO TO PH719**
- 99. RF **GO TO PH719**

(HRS)

PH727: When was your most recent PSA blood test?

(MM/YYYY)

____/____
____ DK RF MONTH
____ DK RF YEAR

[ph727m] [ph727y]

PH719: Approximately how much do you weigh?

IWER: CODE HOW ANSWER IS GIVEN

- 1. KILOGRAMS **GO TO PH720**
- 2. STONES AND POUNDS **GO TO PH721**
- 98. DK **GO TO PH722**
- 99. RF **GO TO PH722**

PH721: **IWER: ENTER WEIGHT IN STONES AND POUNDS**

____ STONES [ph721s]
____ POUNDS [ph721p]

PH720: **IWER: ENTER WEIGHT IN KG**

____ KG
GO TO PH722

PH722: How tall are you?

IWER: CODE HOW ANSWER IS GIVEN

- | | |
|--------------------|--------------------|
| 1. CENTIMETRES | GO TO PH723 |
| 2. FEET AND INCHES | GO TO PH724 |
| 98. DK | GO TO PH726 |
| 99. RF | GO TO PH726 |

PH723: **IWER: ENTER HEIGHT IN CENTIMETRES**

____ CM

PH724: **IWER: ENTER HEIGHT IN FEET AND INCHES**

____ FEET	[ph724f]
____ INCHES	[ph724i]

NOTE: CAPI script to calculate BMI and check it is within a valid range.

IF (intstatusW3 = 2,3,4,5,6,7,8), ASK PH726. IF (intstatusW3=1), SKIP PH726

IWER: SHOW CARD PH13

PH726: Please look at card PH13. [Do/did] any of [your/his/her] primary or first-degree relatives (mother, father, sister, brother, son, daughter) have any of the conditions on this card?

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

- | | |
|---|-------------------|
| 1. Diabetes or high blood sugar | [ph726_01] |
| 2. High cholesterol | [ph726_02] |
| 3. High blood pressure or hypertension | [ph726_03] |
| 4. Heart disease (heart attack, stroke, angina) | [ph726_04] |
| 5. Obesity | [ph726_05] |
| 6. Osteoporosis (thin or brittle bones) | [ph726_06] |
| 7. Alzheimer's disease or dementia | [ph726_07] |
| 8. Breast Cancer | [ph726_08] |
| 9. Ovarian Cancer | [ph726_09] |
| 10. Prostate Cancer | [ph726_10] |
| 11. Colon Cancer | [ph726_11] |
| 12. Depression | [ph726_12] |
| 13. Anxiety | [ph726_13] |
| 95. OTHER (NONE of those listed above) | [ph726_95] |
| 96. NO family history of ANY disease | [ph726_96] |
| 98. DK | [ph726_98] |
| 99. RF | [ph726_99] |

BL:

IF PH116 = 1 GO TO PH712 (List read out by computer)

IF PH116 = 2 GO TO PH713 (List read out by interviewer)

IF HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW GO TO FL001

BL: TIMESTAMP HERE

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: WRITE THE WORDS IN PAGE 9 OF THE BOOKLET PROVIDED. ALLOW AS MUCH TIME AS THE RESPONDENT WISHES, UP TO 2 MINUTES. ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

0....10

-97. Unable to carry out the task

-99. RF

(SHARE/ELSA/HRS)

GO TO PH714

BL: NOTE THE TIME HERE

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: WRITE THE WORDS IN PAGE 9 OF THE BOOKLET PROVIDED. ALLOW AS MUCH TIME AS THE RESPONDENT WISHES, UP TO 2 MINUTES. ENTER THE NUMBER OF WORDS THE RESPONDENT CORRECTLY RECALLS.

0....10

-97. Unable to carry out the task

-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 do.'

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

97. Unable to carry out task

99. RF

6.11 Satisfaction

IWER: SHOW CARD PH14

MH023: Please look at card PH14. 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

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_95] |

IF (HH005 = 1) ASK PH718 OTHERS GO TO NEXT SECTION

PH718:

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

1. NEVER

2. A FEW TIMES

3. MOST OR ALL TIMES

SECTION 7. 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/does] [you/Rname] 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 kilometres (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/his/her] 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_96] |
| 98. DK GO TO FL025 | [fl001_98] |
| 99 RF GO TO FL025 | [fl001_99] |
| (SHARE) | |

IWER: SHOW CARD FL2.

FL002. Please look at card FL2. Because of a health or memory problem, [do/does] [you/Rname] 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 FL057 | [fl002_01] |
| 2. Walking across a room GO TO FL006 | [fl002_02] |
| 3. Bathing or showering GO TO FL009 | [fl002_03] |
| 4. Eating, such as cutting up [your/his/her] food GO TO FL012 | [fl002_04] |
| 5. Getting in or out of bed GO TO FL014 | [fl002_05] |
| 6. Using the toilet, including getting up or down GO TO FL017 | [fl002_06] |
| 96. None of these GO TO FL025 | [fl002_96] |
| 98. DK GO TO FL025 | [fl002_98] |
| 99. RF GO TO FL025 | [fl002_99] |
- (SHARE)

IWER: SHOW CARD FL3

FL057 Please look at card FL3. When dressing, [Do/Does] [you/he/she] have difficulty with any of the activities on this card?

IWER: CODE ALL THAT APPLY

- | | |
|------------------------------|-----------------------|
| 1. Putting on top/shirt | [fl057_01] |
| 2. Taking off top/shirt | [fl057_02] |
| 3. Putting on pants/trousers | [fl057_03] |
| 4. Taking off pants/trousers | [fl057_04] |
| 5. Putting on socks | [fl057_05] |
| 6. Taking off socks | [fl057_06] |
| 7. Putting on shoes | [fl057_07] |
| 8. Taking off shoes | [fl057_08] |
| 9. Manipulating fastenings | [fl057_09] |
| 95. Other (Please specify) | [fl057_95] [fl057oth] |
| 96. None of these | [fl057_96] |
| 98. DK | [fl057_98] |
| 99. RF | [fl057_99] |

FL003: [Do/Does] [you/he/she] ever use equipment or devices to help [you/him/her] get dressed?

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

FL005: Does anyone ever help [you/him/her] with dressing including putting on shoes and socks?

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

CAPI:

IF FL002_02=1 – GO TO FL006
IF FL002_03=1 – GO TO FL009
IF FL002_04=1 – GO TO FL012
IF FL002_05=1 – GO TO FL014
IF FL002_06=1 – GO TO FL017
OTHERWISE GO TO FL020

FL006: [Do/Does] [you/he/she] ever use equipment or devices such as a walking stick or frame when crossing a room?

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

FL008: Does anyone ever help [you/him/her] with walking across a room?

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

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

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

FL011: Does anyone ever help [you/him/her] with bathing or showering?

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

(HRS/SHARE/ELSA)

FL012: [Do/Does] [you/he/she] ever use special utensils or special dishes when [you/he/she] [eat/eats]?

1. Yes

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

FL013: Does anyone ever help [you/him/her] with eating?

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

FL014: [Do/Does] [you/he/she] ever use equipment or devices such as a stick, frame or wheelchair when getting in or out of bed?

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

FL016: Does anyone ever help [you/him/her] with getting into or out of bed?

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

FL017: [Do/Does] [you/he/she] ever use equipment or devices such as a raised toilet seat or portable toilet, when using the toilet?

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

FL019: Does anyone ever help [you/him/her] with using the toilet, including getting on and off 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

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

IWER: CODE THE ONE THAT APPLIES

CAPI: GENERATE A LIST OF POTENTIAL HELPERS USING DYNAMIC ROUTING. THE SPOUSE/PARTNER OF THE RESPONDENT AND CURRENT HOUSEHOLD MEMBERS CAN BE FED FORWARD FROM COVER SCREEN. IF THE FAMILY RESPONDENT HAS COMPLETED THE TC SECTION THEN A LIST OF NON-RESIDENT CHILDREN CAN BE DISPLAYED. IF THE FAMILY RESPONDENT HAS NOT COMPLETED THE TC SECTION THEN DO NOT DISPLAY NON-RESIDENT CHILDREN. INSTEAD MAKE CODE 92 AVAILABLE.

[DISPLAY BY CAPI]

	Name	Relationship
1.		Spouse/partner name
2-19	Through N_HH member's name	Householders
20-49	Through N_children's name	Non-resident children
	[ROW PROVIDED BY CAPI AS NECESSARY]	
92	Non-resident child	
93	OTHER NOT IN THE LIST_SPECIFY:	Non-coresident relative. Specify :
94	OTHER NOT IN THE LIST_SPECIFY :	Non-relative. Specify:
95	OTHER NOT IN THE LIST_SPECIFY	Paid by R or by other sources
96	EMPLOYEE(S) OF NURSING HOME	
97		SPECIFY:
98	DK	
99	RF	

NOTE: "EMPLOYEE(S) OF FACILITY" APPEARS ON LIST ONLY FOR AN R CURRENTLY LIVING IN A NURSING HOME OR WHO WAS LIVING IN A NURSING HOME OR HOSPICE WHEN S/HE DIED.

CAPI: IF THE IWER MARKS CODE 92 THEN ASK FL020o1, FL020a, FL020b AND USE THE LOOK-UP FILE TO IDENTIFY THIS NON-RESIDENT CHILD.

IF FL020=94 OR 95 THEN ASK FL020o2

IF FL020=93 THEN ASK FL020o1 through FL020g

Otherwise go to FL022

FL020o2. **Please specify name of <FL020>**

Text up to 60 characters

GO TO FL022

FL020o1. **Please specify name of <FL020>**

Text up to 60 characters

FL020a. **Is <FL020> male or female?**

1.Male

2.Female

FL020b. **How old is <FL020>?**

Range 4-97

-98. DK

-99. RF

IF (FL020b = -98, -99) ASK FL020b1.

Populate answer from FL020b otherwise

FL020b1 **Please estimate this person's age**

1. Under 16
2. 16 - 24
3. 25-49
4. 50-59
5. 60-64
6. 65 or over

FL020g: **What is that person's relationship to you?**

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)
10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative

SHOW CARD FL4

FL020c. Please look at card FL4. What level of education has <FL020> attained?

IWER: CODE THE ONE THAT APPLIES

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/MHAS)

CAPI: IF (FL020b1 = 1 (Under 16)) set FL020e = 3 (Single)

FL020e: What is <FL020>'s present marital status?

1. Married
2. Living with a partner as if married
3. Single (never married)
4. Separated

5. Divorced
 6. Widowed
 98 DK
 99 RF
 (HRS/MHAS)

FL022: Does anyone else help [you/him/her] with this activity/these activities?

CAPI: REPEAT FL022 TO FL024 FOR UP TO 3 NAMES

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

CAPI: GENERATE A LIST OF POTENTIAL HELPERS USING DYNAMIC ROUTING. THE SPOUSE/PARTNER OF THE RESPONDENT AND CURRENT HOUSEHOLD MEMBERS CAN BE FED FORWARD FROM COVER SCREEN. IF THE FAMILY RESPONDENT HAS COMPLETED THE TC SECTION THEN A LIST OF NON-RESIDENT CHILDREN CAN BE DISPLAYED. IF THE FAMILY RESPONDENT HAS NOT COMPLETED THE TC SECTION THEN DO NOT DISPLAY NON-RESIDENT CHILDREN. INSTEAD MAKE CODE 92 AVAILABLE.

FL023: Who is that?

[fl023_01 to fl023_03]

IWER: CODE THE ONE THAT APPLIES

1.		Spouse/partner name
2-19	Through N_HH member's name	Householders
20-49	Through N_children's name	Non-resident children
	[ROW PROVIDED BY CAPI AS NECESSARY]	
92	Non-resident child	
93	OTHER NOT IN THE LIST_SPECIFY:	Non-coresident relative. Specify:
94	OTHER NOT IN THE LIST_SPECIFY:	Non-relative. Specify:
95	OTHER NOT IN THE LIST_SPECIFY	Paid by R or by other sources
96	EMPLOYEE(S) OF NURSING HOME	
97		SPECIFY:
98	DK	
99	RF	

CAPI: IF THE RESPONDENT MARKS CODE 92 THEN ASK FL023o1, FL023a, FL023b AND USE THE LOOK-UP FILE TO IDENTIFY THIS NON-RESIDENT CHILD.

IF FL023=94 OR 95 THEN ASK FL023o2

IF FL023=93 THEN ASK FL023o1 through FL023g Otherwise go to FL025

FL023o2. Please specify name of <FL023>

Text up to 60 characters

GO TO FL025

FL023o1. Please specify name of <FL023>

Text up to 60 characters

FL023a (CODE OR ASK IF UNSURE) Is <FL023> male or female?

1. Male
2. Female

FL023b. How old is <FL023>?

Range 4-97

-98. DK

-99. RF

CAPI: IF (FL023b = -98, -99) ASK FL023b1. Populate answer from FL023b otherwise

FL023b1 Please estimate this person's age

1. Under 16
2. 16 - 24
3. 25-49
4. 50-59
5. 60-64
6. 65 or over

FL023g: What is that person's relationship to [you/him/her]?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)
10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative

FL023c. Please look at card FL4. What level of education has <FL023> attained?

IWER: CODE THE ONE THAT APPLIES

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/MHAS)

CAPI: IF (FL023b1 = 1 (Under 16)) set FL023e = 3 (Single)

FL023e: What is <FL023>'s present marital status?

1. Married

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

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 FL5

FL025. Please look at card FL5. Because of a health or memory problem, [do/does] [you/Rname] 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_01] |
| 2. Doing household chores (laundry, cleaning) | GO TO FL026 | [fl025_02] |
| 3. Shopping for groceries | GO TO FL026 | [fl025_03] |
| 4. Making telephone calls | GO TO FL029 | [fl025_04] |
| 5. Taking medications | GO TO FL030 | [fl025_05] |
| 6. Managing money, such as paying bills and keeping track of expenses | GO TO FL031 | [fl025_06] |
| 7. Going outside the home alone to shop or to visit a doctor's surgery | GO TO FL058 | [fl025_07] |
| 96. None of these | GO TO FL042 | [fl025_96] |
| 98. DK | GO TO FL042 | [fl025_98] |
| 99 RF | GO TO FL042 | [fl025_99] |

IWER: PROBE: ANY OTHERS?

CAPI:

- IF FL025_01=1 – GO TO FL026**
- IF FL025_02=1 – GO TO FL026**
- IF FL025_03=1 – GO TO FL026**
- IF FL025_04=1 – GO TO FL029**
- IF FL025_05=1 – GO TO FL030**
- IF FL025_06=1 – GO TO FL031**
- IF FL025_07=1 – GO TO FL058**

FL026: Does anyone help [you/him/her] with preparing a hot meal, doing household chores, shopping for groceries?

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

FL029: Does anyone help [you/him/her] make phone calls?

- 1. Yes**
- 5. No**

98. DK
99. RF
(HRS/SHARE/ELSA)

FL030: Does anyone help [you/him/her] take [your/his/her] medications?

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

FL031: Does anyone help [you/him/her] with managing [your/his/her] own money?

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

FL058: Does anyone help [you/him/her] to go outside the home alone or to visit a doctor's surgery?

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

IF FL026=1 AND/OR FL029=1 AND/OR FL030=1 GO TO FL032

IF FL031=1 OR FL058 = 1 GO TO FL037

CAPI: GENERATE A LIST OF POTENTIAL HELPERS USING DYNAMIC ROUTING. THE SPOUSE/PARTNER OF THE RESPONDENT AND CURRENT HOUSEHOLD MEMBERS CAN BE FED FORWARD FROM COVER SCREEN. IF THE FAMILY RESPONDENT HAS COMPLETED THE TC SECTION THEN A LIST OF NON-RESIDENT CHILDREN CAN BE DISPLAYED. IF THE FAMILY RESPONDENT HAS NOT COMPLETED THE TC SECTION THEN DO NOT DISPLAY NON-RESIDENT CHILDREN. INSTEAD MAKE CODE 92 AVAILABLE.

[fl032] – select person from the household list

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

IWER: CODE THE ONE THAT APPLIES

1.		Spouse/partner name
2-19	Through N_HH member's name	householders
20-49	Through N_children's name	non-resident Children
	[ROW PROVIDED BY CAPI AS NECESSARY]	

92	Non-resident child	
93	OTHER NOT IN THE LIST_SPECIFY:	Non-coresident relative. Specify:
94	OTHER NOT IN THE LIST_SPECIFY:	Non-relative. Specify:
95	OTHER NOT IN THE LIST_SPECIFY	Paid by R or by other sources
96	EMPLOYEE(S) OF NURSING HOME	
97		SPECIFY:
98	DK	
99	RF	

NOT ASKED HERE - data lifted from earlier sections for helper who is an HH member or children

CAP: IF THE IWER MARKS CODE 92 THEN ASK FL032o1, FL032a, FL032b AND USE THE LOOK-UP FILE TO IDENTIFY THIS NON-RESIDENT CHILD.

IF FL032=94 OR 95 THEN ASK FL032o2

IF FL032=93 THEN ASK FL032o1 through FL032g. However, if this helper was already mentioned in FL020 or FL023, don't ask FL032a through FL032g. Otherwise go to FL034

FL032o2. Please specify name of <FL032>

Text up to 60 characters

GO TO FL034

FL032o1. Please specify name of <FL032>

Text up to 60 characters

FL032a (CODE OR ASK IF UNSURE) Is <FL032> male or female?

1. Male

2. Female

FL032b. How old is <FL032>?

Range 4-97

-98. DK

-99. RF

IF (FL032b = -98, -99) ASK FL032b1. Populate answer from FL032b otherwise

FL032b1: Please estimate this person's age

1. Under 16

2. 16 - 24

3. 25-49

4. 50-59

5. 60-64

6. 65 or over

FL032g: What is that person's relationship to [you/him/her]?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)

10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative

FL032c. Please look at card FL4. What level of education has <FL032> attained? [non-resident relative from fl032o1]

IWER: CODE THE ONE THAT APPLIES

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/MHAS)

CAPI: IF (FL032b1 = 1 (Under 16)) set FL032e = 3 (Single)

FL032e: What is <FL032>'s present marital status?

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

FL034: Does anyone else help [you/him/her] with this activity/these activities?

CAPI: REPEAT FL034 TO FL035 FOR UP TO 3 NAMES

1. Yes
 5. No GO TO FL037
 98. DK
 99. RF
- (HRS)

CAPI: GENERATE A LIST OF POTENTIAL HELPERS USING DYNAMIC ROUTING. THE SPOUSE/PARTNER OF THE RESPONDENT AND CURRENT HOUSEHOLD MEMBERS CAN BE FED FORWARD FROM COVER SCREEN. IF THE FAMILY RESPONDENT HAS COMPLETED THE TC SECTION THEN A LIST OF NON-RESIDENT CHILDREN CAN BE DISPLAYED. IF THE FAMILY RESPONDENT HAS NOT COMPLETED THE TC SECTION THEN DO NOT DISPLAY NON-RESIDENT CHILDREN. INSTEAD MAKE CODE 92 AVAILABLE.

FL035:What is his/her first name?

[fl035_01 to fl035_03]

IWER: CODE THE ONE THAT APPLIES

1.		Spouse/partner name
2-19	Through N_HH member's name	Householders
20-49	Through N_children's name	Non-resident Children
	[ROW PROVIDED BY CAPI AS NECESSARY]	
92	Non-resident child	
93	OTHER NOT IN THE LIST_SPECIFY:	Non-coresident relative. Specify:
94	OTHER NOT IN THE LIST_SPECIFY:	Non-relative. Specify:
95	OTHER NOT IN THE LIST_SPECIFY	Paid by R or by other sources
96	EMPLOYEE(S) OF NURSING HOME	
97		SPECIFY:
98	DK	
99	RF	

CAPI: IF THE IWER MARKS CODE 92 THEN ASK FL035o1, FL035a, FL035b AND USE THE LOOK-UP FILE TO IDENTIFY THIS NON-RESIDENT CHILD.

IF FL035=94 OR 95 THEN ASK FL035o2.

IF FL035=93 then ask FL035o1 through FL035g. However, if this helper was already mentioned in FL020 or FL023, then don't ask FL035a through FL035g. Otherwise go to FL037

FL035o2. Please specify name of <FL035>

Text up to 60 characters

GO TO FL037

FL035o1. Please specify name of <FL035>

Text up to 60 characters

FL035a (CODE OR ASK IF UNSURE) Is <FL035> male or female?

1.Male

2.Female

FL035b. **How old is <FL035>?**

Range 4-97

-98. DK

-99. RF

IF (FL035b = -98, -99) ASK FL035b1 . Populate answer from FL035b otherwise

FL035b1 **Please estimate this person's age**

1. Under 16

2. 16 - 24

3. 25-49

4. 50-59

5. 60-64

6. 65 or over

FL035g: What is that person's relationship to [you/him/her]?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)
10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative

FL035c. Please look at card FL4. What level of education has <FL032> attained? [non-resident relative from fl035o1]

IWER: CODE THE ONE THAT APPLIES

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/MHAS)

CAPI: IF (FL035b1 = 1 (Under 16)) set FL035e = 3 (Single)

FL035e: What is <FL035>'s present marital status?

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

CAPI:

IF FL031=1 GO TO FL037

IF FL031≠1 GO TO FL042

CAPI: GENERATE A LIST OF POTENTIAL HELPERS USING DYNAMIC ROUTING. THE SPOUSE/PARTNER OF THE RESPONDENT AND CURRENT HOUSEHOLD MEMBERS CAN BE FED FORWARD FROM COVER SCREEN. IF THE FAMILY RESPONDENT HAS COMPLETED THE TC SECTION THEN A LIST OF NON-RESIDENT CHILDREN CAN BE DISPLAYED. IF THE FAMILY RESPONDENT HAS NOT COMPLETED THE

TC SECTION THEN DO NOT DISPLAY NON-RESIDENT CHILDREN. INSTEAD MAKE CODE 92 AVAILABLE.

FL037: Who most often helps [you/him/her] to manage your money / to go outside the home alone or to visit a doctor's surgery?

IWER: CODE THE ONE THAT APPLIES

1.		Spouse/partner name
2-19	Through N_HH member's name	Householders
20-49	Through N_children's name	Non-resident Children
92	Non-resident child	
	[ROW PROVIDED BY CAPI AS NECESSARY]	
93	OTHER NOT IN THE LIST_SPECIFY:	Non-coresident relative. Specify:
94	OTHER NOT IN THE LIST_SPECIFY:	Non-relative. Specify:
95	OTHER NOT IN THE LIST_SPECIFY	Paid by R or by other sources
96	EMPLOYEE(S) OF NURSING HOME	
97		SPECIFY:
98	DK	
99	RF	

CAPI: IF THE IWER MARKS CODE 92 THEN ASK FL037o1, FL037a, FL037b AND USE THE LOOK-UP FILE TO IDENTIFY THIS NON-RESIDENT CHILD.

IF FL037=94 OR 95 THEN ASK FL037o2

IF FL037=93 then ask FL037o1 through FL037g. However, if this helper was already mentioned in FL020 or FL023 or FL032 or FL035, then don't ask FL037a through FL037g. Otherwise go to FL039

FL037o2. Please specify name of <FL037>

Text up to 60 characters

GO TO FL039

FL037o1. Please specify name of <FL037>

Text up to 60 characters

FL037a (CODE OR ASK IF UNSURE) Is <FL037> male or female?

1. Male

2. Female

FL037b. **How old is <FL037>?**

Range 4-97

-98. DK

-99. RF

CAPI: IF (FL037b = -98, -99) ASK FL037b1. Populate answer from FL037b otherwise

FL037b1 Please estimate this person's age

1. Under 16

2. 16 - 24

3. 25-49
4. 50-59
5. 60-64
6. 65 or over

FL037g: What is that person's relationship to [you/him/her]?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)
10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative

FL037c. Please look at card FL4. What level of education has <FL037> attained? [non-resident relative from fl037o1]

IWER: CODE THE ONE THAT APPLIES

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/MHAS)

CAP: IF (FL037b1 = 1 (Under 16)) set FL037e = 3 (Single)

FL037e: What is <FL037>'s present marital status?

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

FL039: Does anyone else help [you/him/her] with this activity/these activities?

1. Yes GO TO FL040
5. No GO TO FL042
98. DK

99. RF
(HRS)

CAPI: GENERATE A LIST OF POTENTIAL HELPERS USING DYNAMIC ROUTING. THE SPOUSE/PARTNER OF THE RESPONDENT AND CURRENT HOUSEHOLD MEMBERS CAN BE FED FORWARD FROM COVER SCREEN. IF THE FAMILY RESPONDENT HAS COMPLETED THE TC SECTION THEN A LIST OF NON-RESIDENT CHILDREN CAN BE DISPLAYED. IF THE FAMILY RESPONDENT HAS NOT COMPLETED THE TC SECTION THEN DO NOT DISPLAY NON-RESIDENT CHILDREN. INSTEAD MAKE CODE 92 AVAILABLE.

FL040: What is her/his first name? [fl040_01 to fl040_03]

IWER: CODE THE ONE THAT APPLIES

1.		Spouse/partner name
2-19	Through N_HH member's name	Householders
20-49	Through N_children's name	non-resident Children
	[ROW PROVIDED BY CAPI AS NECESSARY]	
92	Non-resident child	
93	OTHER NOT IN THE LIST_SPECIFY:	Non-coresident relative. Specify:
94	OTHER NOT IN THE LIST_SPECIFY:	Non-relative. Specify:
95	OTHER NOT IN THE LIST_SPECIFY	Paid by R or by other sources
96	EMPLOYEE(S) OF NURSING HOME	
97		SPECIFY:
98	DK	
99	RF	

CAPI: IF THE IWER MARKS CODE 92 THEN ASK FL040o1, FL040a, FL040b AND USE THE LOOK-UP FILE TO IDENTIFY THIS NON-RESIDENT CHILD.

IF FL040=94 OR 95 THEN ASK FL040o2

IF FL040=93 then ask FL040o1 through FL040g. However, if this helper was already mentioned in FL020 or FL023 or FL032 or FL035 or FL037, then don't ask FL040a through FL040g. Otherwise go to FL042.

FL040o2. Please specify name of <FL040>

Text up to 60 characters

GO TO FL042

FL040o1. Please specify name of <FL040>

Text up to 60 characters

FL040a (CODE OR ASK IF UNSURE) Is <FL040> male or female?

1.Male

2.Female

FL040b. **How old is <FL040>?**

Range 4-97

-98. DK

-99. RF

CAPI: IF (FL040b = -98, -99) ASK FL040b1. Populate answer from FL040b otherwise

FL040b1 Please estimate this person's age

1. Under 16
2. 16 - 24
3. 25-49
4. 50-59
5. 60-64
6. 65 or over

FL040g: What is that person's relationship to [you/him/her]?

MALES	FEMALES
1. Husband	2. Wife
3. Partner/cohabitee	3. Partner/cohabitee
5. Father	4. Mother
7. Father-in-law	6. Mother-in-law
8. Son (Including adopted and foster)	9. Daughter (Including adopted and foster)
10. Step son	11. Step daughter
12. Son-in-law	13. Daughter-in-law
14. Brother	15. Sister
16. Brother-in-law	17. Sister-in-law
19. Grand-son	18. Grand-daughter
20. Grandfather	21. Grandmother
23. Uncle	22. Aunt
24. Other relative	24. Other relative

FL040c. Please look at card FL4. What level of education has <FL040> attained? [non-resident relative from fl037o1]

IWER: CODE THE ONE THAT APPLIES

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/MHAS)

CAPI: IF (FL040b1 = 1 (Under 16)) set FL040e = 3 (Single)

FL040e: What is <FL040>'s present marital status?

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

CAPI:

IF FL005 OR FL008 OR FL011 OR FL013 OR FL016 OR FL019 OR FL026 OR FL029 OR FL030 OR FL031 OR FL058 = 1 (YES)

AND (FL020 OR FL023(01 to 03) OR FL032 OR FL035(01 to 03) OR FL037 OR FL040(01 to 03) IS NOT EQUAL TO 96) (empl

oyee of institution)

LOOP THROUGH FL042 FOR EACH HELPER NOT EQUAL TO 96

CAPI: REPEAT FL042 THROUGH FL051 FOR THE HELPERS ON THE LIST.

Helpers

CAPI: HELPER LIST:

NOTE: AT THIS POINT A LIST IS COMPILED BY CAPI OF ALL HELPERS MENTIONED IN THIS SECTION. THE LIST WILL COMPILE THE HELPER'S NAME, EXCLUDING EMPLOYEES OF FACILITIES AND THOSE OTHER NON-RELATIVES PAID BY THE RESPONDENT OR OTHER. THIS LIST IS NOT VISIBLE TO THE IWER.

PERSON ID

NAME

RELATIONSHIP TO RESPONDENT

CAPI: IF R HAS MORE THAN ONE PAID HELPER (95) THEN HELPER'S NAME SHOULD BE LISTED AS FIRST PAID HELPER, SECOND PAID HELPER, THIRD PAID HELPER, ETC.

IF R HAS ONLY A HELPER(S) WHO IS/ARE EMPLOYEE OF NURSING HOME GO TO FL056 NOT ASKED HERE - data lifted from earlier sections for each

[fl042id_i_name] – name of helper

[fl042id_i] – relationship of helper

i= 01 - 12

FL042: FIRST ITERATION ONLY READ

"Let's think for a moment about the help [you/he/she] [receive/receives] with the difficulties that we just talked about".

During the last month, on about how many days did HELPER's NAME help [you/Rname]?

[fl042_01 to fl042_12]

1... 31

-98. RF

-99. DK

(HRS)

FL043: On the days when HELPER's NAME helps [you/Rname], about how many hours per day does [he/she] spend helping [you/him/her]?

[fl043_01 to fl043_12]

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

1...24

-98. DK

-99. RF

(HRS)

CAPI : ASK FL045 AND FL045b FOR EACH HELPER

FL045: Does HELPER's NAME receive the State Carer's Allowance or Carer's Benefit?

[fl045_01 to fl045_12]

1. Yes

5. No

98. DK
99. RF

CAPI: IF HELPER IS A SPOUSE SKIP FL045b-FL051 AND CONTINUE TO NEXT HELPER ON THE LIST

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

[fl045b_01 to fl045b_12]

1. Yes **GO TO FL046**
5. No **GO TO FL042** (next helper)

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

[fl046_01 to fl046_12]

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
95. 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_01 to fl047_12]

0...100
-98. DK
-99. RF

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

[fl048_01 to fl048_12]

€0 ... €10,000
-98. DK
-99. RF
(TILDA)

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

[fl049_01 to fl049_12]

1. Yes
5. No **GO TO FL042**
98. DK
99. RF
(TILDA)

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

[fl050_01 to fl050_12]

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/ren] [is/are] [that/they]?**

[IWER: CHOOSE ALL THAT APPLY]

	Through N_ coresident children's name
	Through N_ non-coresident children's name [ROW PROVIDED BY CAPI AS NECESSARY]
95	All children
96	OTHER. SPECIFY
98	DK
99	RF

This is a list which comes from CS055 (HH list), TC032A/B (children's list) and CS029 (new children)

[FL051_01_01-FL051_01_49 TO FL051_12_49]

[FL051_01oth TO FL051_12oth]

CAPI: 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/him/her] 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)

CAPI: IF HH005 IS NOT EQUAL 1 (PROXY) THEN GO TO THE NEXT SECTION

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

CAPI: GO TO HU001

SECTION 8. HEALTHCARE UTILISATION (HU)

INTRO: **Now we have some questions about healthcare and how [you/Rname] [pay/pays] for it.**

HU001: [Is/Are] [you/he/she] 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)

HU070: [Is/Are] [you/he/she] covered by:

IWER: option 2 applies to females only

- 1. The long term illness scheme
- 2. A Health Act Amendment Card (Women only)
- 96 Neither of these
- 98 DK
- 99 RF

HU002. [Do/Does] [you/he/she] have private medical insurance cover (VHI etc.) in [your/his/her] 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 HU049**
- 98. DK **GO TO HU049**
- 99. RF **GO TO HU049**

(HEALTH INSURANCE AUTHORITY 2005 SURVEY)

HU003: Which company [are/is] [you/he/she] 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. LAYA Healthcare / BUPA / QUINN Healthcare | GO TO HU044 |
| 2. VHI Healthcare | GO TO HU044 |
| 3. AVIVA / Hibernian Healthcare / VIVAS Health | GO TO HU044 |
| 4. GLO Health | GO TO HU044 |
| 95. Other | GO TO HU004 |
| 98. DK | |
| 99. RF | |

(HEALTH INSURANCE AUTHORITY 2005 SURVEY)

IF HU003 = 95 GO TO HU004

HU004: Which other medical insurance scheme/plan/company [are/is] [you/he/she] insured with?

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)

IF HU002 =1,2,3 GO TO HU044

HU044: Approximately how much was [your/Rname's] latest annual health insurance premium?

IWER: IF NOT PAID ANNUALLY HELP RESPONDENT WORK OUT ANNUAL PAYMENT ON A CALCULATOR

€0 ... €500,000 **GO TO HU046**

-98. DK **GO TO HU045**

-99. RF **GO TO HU045**

IWER SHOW CARD HU1

HU045: Please look at card HU1. Please select which annual health insurance premium category is most appropriate.

IWER: CODE THE ONE THAT APPLIES

0	€0	-	€400
1	€401	-	€800
2	€801	-	€1200
3	€1201	-	€1600
4	€1601	-	€2000
5	€2001	-	€2400
6	€2401	-	€2800
7	More than €2800		

-98. DK

-99. RF

IF HU002 =1,2,3

HU046: Including [yourself/Rname] how many people does this current policy cover?

1..20

-98. DK

-99. RF

IF HU002=1,2,3

HU071: Does [your/Rname] health insurance include the cost of GP visits?

1. Yes, in full

2. Yes, partially

3. No

98 DK

99 RF

(Growing up in Ireland)

IF HU002 =1,2,3

HU072: Some people review their health insurance policy when their premium is due. Have [you/he/she] changed the level of cover on your policy since last year?

1. Yes, I have increased the cover on my policy
2. Yes, I have decreased the cover on my policy
3. No, my policy cover is the same as last year

98 DK

99 RF

IF HU002 =1,2,3

HU048: Including [yourself/Rname] how many people were covered by the policy last year?

1..20 GO TO HU005

-98. DK GO TO HU005

-99. RF GO TO HU005

IF HU002 =5,98,99

HU049: In the last 5 years did [you/he/she] ever have health insurance?

1 Yes GO TO HU050

5 No GO TO HU005

98. DK GO TO HU005

99. RF GO TO HU005

If HU049=1

HU050: In what year did [you/he/she] last have health insurance?

IWER: CODE THE ONE THAT APPLIES

1 2013

2 2012

3 2011

4 2010

5 2009

98. DK GO TO HU005

99. RF GO TO HU005

If HU049=1

HU073: Why did [you/he/she] discontinue [your/his/her] health insurance policy?

1. Too expensive
2. Never made a claim on it
3. Changed employer
4. I became eligible for a medical card

95 Other

98 DK

99 RF

IF HU073=95

HU073othPlease specify other

98 DK

99 RF

HU005: In the last 12 months, about how often did [you/he/she] visit [your/his/her] 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

IF (HU005=0, -98,-99) GO TO HU007

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

IF (HU005>0 AND HU070= 2) GO TO HU007

IF (HU005>0 AND HU001≠1, 2) GO TO HU006

IF (HU005>0 AND HU070 ≠ 2) GO TO HU006

(SHARE)

HU006: How much did [you/he/she] pay for [your/his/her] last visit to the GP, after any health insurance reimbursement?

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

€0.00 ... €10,000

-98. DK

-99. RF

HU007: In the last 12 months, how many times did [you/he/she] 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)

If HU007>0 GO TO HU054

IF (HU007 = 0,98,99) GO TO HU008

IWER SHOW CARD HU1A

HU054: Please look at card HU1A. How satisfied or dissatisfied [were/was] [you/Rname] with the service [you/he/she] received on [your/his/her] most recent visit to a hospital Emergency Department?

IWER: CODE THE ONE THAT APPLIES

1. VERY SATISFIED

2. SOMEWHAT SATISFIED

3. NEUTRAL

4. SOMEWHAT DISSATISFIED

5. VERY DISSATISFIED

98. DK

99. RF

HU057 Was [your/his/her] emergency department visit the result of:

1. A fall, faint, collapse or blackout
2. A crime related event e.g. being assaulted, robbed or attacked
5. Other (No need to specify)

98. DK

99. RF

HU058 Following this visit to the emergency department were [you/he/she]:

IWER: CODE ALL THAT APPLY

- | | |
|--|------------|
| 1. Admitted to hospital? | [hu058_01] |
| 2. Referred to a consultant | [hu058_02] |
| 3. Referred to an outpatient department? | [hu058_03] |
| 4. Asked to follow up with your GP? | [hu058_04] |
| 5. No follow-up | [hu058_05] |
| 95. Other please specify | [hu058_95] |
| 98. DK | [hu058_98] |
| 99. RF | [hu058_99] |

If HU058_95=1

HU058oth: Please specify

[hu058oth]

98. DK

99. RF

IF (HU001 = 1 AND HU007 > 0) GO TO HU008

IF (HU070 = 2 AND HU007 > 0) GO TO HU008

IF (HU001 ≠ 1 AND HU007 > 0) GO TO HU038

IF (HU070 ≠ 2 AND HU007 > 0) GO TO HU038

IF (HU007 = 0,98,99) GO TO HU008

HU038: In total, how much did [you/he/she] pay for all of [your/his/her] A&E visit(s) in the last 12 months, after any health insurance reimbursement?'

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

€0 ... €10,000

-98. DK

-99. RF

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

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

0...200

-98. DK -99. RF

IF HU008=0, -98,-99 - GO TO HU062
IF HU008>0 - GO TO HU060

IWER SHOW CARD HU1A

HU060: Please look at card HU1A. How satisfied or dissatisfied [were/was] [you/Rname] with the service [you/he/she] received on [your/his/her] most recent outpatient/day patient visit?

1. VERY SATISFIED
2. SOMEWHAT SATISFIED
3. NEUTRAL
4. SOMEWHAT DISSATISFIED
5. VERY DISSATISFIED
98. DK
99. RF

HU009: On how many of these visits as an outpatient/day patient did [you/he/she] 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

HU075: In total, how much did [you/he/she] pay for [your/his/her] outpatient/day patient visits in the last 12 months, after any health insurance reimbursement? (May be zero)

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

- €0 ... €50,000
-98. DK
-99. RF

HU062 Have [you/he/she] seen a consultant in the last 12 months?

IWER: CODE THE ONE THAT APPLIES

- | | |
|--------|--------------------|
| 1 Yes | GO TO HU063 |
| 5. No | GO TO HU010 |
| 98. DK | GO TO HU010 |
| 99. RF | GO TO HU010 |

If HU062==1

IWER SHOW CARD HU1A

HU063: Please look at card HU1A. How satisfied or dissatisfied [were/was] [you/he/she] with the service [you/he/she] received at [your/his/her] last consultant visit?

1. VERY SATISFIED
2. SOMEWHAT SATISFIED
3. NEUTRAL
4. SOMEWHAT DISSATISFIED
5. VERY DISSATISFIED

98. DK
99. RF

HU039 In total, how much did [you/he/she] pay for [your/his/her] visit(s) to consultant(s) in the last 12 months, after any health insurance reimbursement? (May be zero)

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

€0 ... €20,000

-98. DK
-99. RF

HU010: In the last 12 months, on how many occasions [were/was] [you/he/she] admitted to hospital overnight? Note: These are sometimes called in-patient admissions.

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

CODE 0

0...50

-98. DK
-99. RF

IF HU010=0, -98, -99 - GO TO HU076

IF HU010>0 –GO TO HU065

IWER SHOW CARD HU1A

HU065: Please look at card HU1A. How satisfied or dissatisfied [were/was] [you/he/she] with the service [you/he/she] received on [your/his/her] most recent overnight hospital admission?

IWER: CODE THE ONE THAT APPLIES

1. VERY SATISFIED
2. SOMEWHAT SATISFIED
3. NEUTRAL
4. SOMEWHAT DISSATISFIED
5. VERY DISSATISFIED

98. DK
99. RF

HU011: During these hospital stays in the last 12 months, about how many operations (procedures) involving a full anaesthetic did [you/he/she] 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/he/she] spend in hospital in the last 12 months?

1...364

-98. DK
-99. RF

HU013: When [you/he/she] 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/he/she] 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

HU040 In total, how much did [you/he/she] pay for [your/his/her] overnight hospital stays(s) in the last 12 months, after any health insurance reimbursement? (May be zero)

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

€0 ... €50,000

- 98. DK
- 99. RF

HOME CARE

HU076: In the last 12 months, did [you/Rname] pay any individual or private company to provide home help or personal care?

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

HU015A: In the last 12 months, did [you/Rname] receive any of the following State services?

NB: Some people hire home help or personal care privately, this private help SHOULD NOT be included in this question.

CODE ALL THAT APPLY

- 1. **Home help** (a person employed by State to help [you/Rname] with household chores such as cleaning and cooking) **HU015_A1 through HU015_A4** [hu015a_01]
- 2. **Personal care attendant** (a person employed by the State to assist [you/him/her] with bathing, showering, bodily care etc.) **HU015_B1 through HU015_B4** [hu015a_02]
- 3. **Meals-on-Wheels** **HU015_C1 through HU015_C4** [hu015a_03]
- 4. **Home Care Package** **HU015_D1 through HU015_D4** [hu015a_04]
- 96. None of these **GO TO HU015** [hu015a_96]
- 98. DK **GO TO HU015** [hu015a_98]
- 99. RF **GO TO HU015** [hu015a_99]

HU015_a1: Let's think for a moment about the home help [you/Rname] received. During the last month, on about how many days did [you/he/she] receive home help?

0... 31
-98. RF
-99. DK

HU015_a2: On the days when [you/Rname] received home help, for about how many hours per day did [you/he/she] receive help?

1...24
-98. DK
-99. RF

IWER SHOW CARD HU3

HU015_a3: Please look at show card HU3. [Are/Is] [you/he/she] satisfied with this home help service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
 2. No – dissatisfied because service was not supplied frequently enough
 3. No – dissatisfied because service was hard to access
 - 4 No – dissatisfied for other reason
98. DK
99. RF

HU015_a4: Not counting costs paid by the HSE/health board, about how much did [you/Rname] (and [your/his/her] [husband/wife/partner]) pay for this home help in the last month? (May be zero)

€0 ... €10,000
-98. DK
-99. RF

GO TO HU015

HU015_b1: Let's think for a moment about the help [you/Rname] received from a personal care attendant. During the last month, on about how many days did [you/he/she] receive this service?

0... 31
-98. RF
-99. DK

HU015_b2: On the days when [you/he/she] received help from a personal care attendant, for about how many hours per day did [you/he/she] receive help?

1...24
-98. DK
-99. RF

IWER SHOW CARD HU3

HU015_b3: Please look at show card HU3. [Are/Is] [you/he/she] satisfied with this personal care service?

IWER: CODE THE ONE THAT APPLIES

- 1. Yes- satisfied
- 2. No – dissatisfied because service was not supplied frequently enough
- 3. No – dissatisfied because service was hard to access
- 4 No – dissatisfied for other reason
- 98. DK
- 99. RF

HU015_b4: Not counting costs paid by the HSE/health board, about how much did [you/Rname] (and [your/his/her] [husband/wife/partner]) pay this personal care attendant in the last month?

(May be zero)

€0 ... €10,000

- 98. DK
- 99. RF

GO TO HU015

HU015_c1: Let's think for a moment about Meals-on-Wheels [you/Rname] received. During the last month, on about how many days did [you/he/she] receive Meals-on-Wheels?

0... 31

- 98. RF
- 99. DK

IWER SHOW CARD HU3

HU015_c3: Please look at show card HU3. [Are/Is] [you/he/she] satisfied with this meals service?

IWER: CODE THE ONE THAT APPLIES

- 1. Yes- satisfied
- 2. No – dissatisfied because service was not supplied frequently enough
- 3. No – dissatisfied because service was hard to access
- 4 No – dissatisfied for other reason
- 98. DK
- 99. RF

HU015_c4: Not counting costs paid by the HSE/health board, about how much did [you/Rname] (and [your/his/her] [husband/wife/partner]) pay for Meals-on-Wheels in the last month? (May be zero)

€0 ... €10,000

- 98. DK
- 99. RF

GO TO HU015

HU015_d1: Let's think for a moment about the home care package [you/Rname] received. During the last month, on about how many days did [you/he/she] receive this service?

0... 31

-98. RF
-99. DK

HU015_d2: On the days when [you/he/she] received help from the Home Care Package, for about how many hours per day did [you/he/she] receive help?

1...24
-98. DK
-99. RF

IWER SHOW CARD HU3

HU015_d3: Please look at show card HU3. [Are/Is] [you/he/she] satisfied with this home care package?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
 2. No – dissatisfied because service was not supplied frequently enough
 3. No – dissatisfied because service was hard to access
 - 4 No – dissatisfied for other reason
98. DK
99. RF

HU015_d4: Not counting costs paid by the HSE/health board, about how much did [you/Rname] (and [your/his/her] [husband/wife/partner]) pay for this Home Care Package in the last month?

(May be zero)
€0 ... €10,000
-98. DK
-99. RF

GO TO HU015

IWER: SHOW CARD HU2

HU015. Please look at card HU2. In the last 12 months, did [you/Rname] receive any of these other State services?

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

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

IWER: READ OUT AND CODE ALL THAT APPLY

- | | | |
|--|-----------------|------------|
| 1. Public Health or Community Nurse | GO TO HU016a_01 | [hu015_01] |
| 2. Occupational therapy | GO TO HU016a_02 | [hu015_02] |
| 3. Chiropody services | GO TO HU016a_03 | [hu015_03] |
| 4. Physiotherapy services | GO TO HU016a_04 | [hu015_04] |
| 5. Speech & Language Therapist | GO TO HU016a_05 | [hu015_05] |
| 6. Social work services | GO TO HU016a_06 | [hu015_06] |
| 7. Psychological/counselling services | GO TO HU016a_07 | [hu015_07] |
| 11. Day centre services | GO TO HU016a_11 | [hu015_11] |
| 12. Optician service | GO TO HU016a_12 | [hu015_12] |
| 13. Dental services | GO TO HU016a_13 | [hu015_13] |

14. Hearing services	GO TO HU016a_14	[hu015_14]
15. Dietician services	GO TO HU016a_15	[hu015_15]
16. Respite services	GO TO HU016a_16	[hu015_16]
96. None of these	GO TO HU031b	[hu015_96]
98. DK	GO TO HU031b	[hu015_98]
99. RF	GO TO HU031b	[hu015_99]

CAPI: FOR EACH SERVICE RECEIVED IN HU015 ASK HU016a_(i) to HU016b_(i) (i = 01 to 16)

HU016a_(i) NUMBER OF TIMES RECEIVED STATE SERVICE

In the last 12 months, how many times did [you/he/she] use the <state service from HU015>

1...365
-98 DK
-99 RF

IWER: SHOW CARD HU3

HU016b_(i): SATISFACTION WITH RECEIVED STATE SERVICE

Please look at show card HU3. [Are/Is] [you/he/she] satisfied with this service?

IWER: CODE THE ONE THAT APPLIES

1. Yes- satisfied
 2. No – dissatisfied because service was not supplied frequently enough
 3. No – dissatisfied because service was hard to access
 - 4 No – dissatisfied for other reason
98. DK
99. RF

IWER: SHOW CARD HU2

HU031b: Thinking of all these services, are there any that [you/he/she] [do/does] not now receive which [you/he/she] [feel/feels] [you/he/she] have a need for?

IWER: CODE ALL THAT APPLY

- | | | |
|---------------------------------------|-----------------|-------------|
| 1. Public health or Community Nurse | GO TO HU031c_01 | [hu031b_01] |
| 2. Occupational therapy | GO TO HU031c_02 | [hu031b_02] |
| 3. Chiropody services | GO TO HU031c_03 | [hu031b_03] |
| 4. Physiotherapy services | GO TO HU031c_04 | [hu031b_04] |
| 5. Speech and Language Therapy | GO TO HU031c_05 | [hu031b_05] |
| 6. Social work services | GO TO HU031c_06 | [hu031b_06] |
| 7. Psychological/counselling services | GO TO HU031c_07 | [hu031b_07] |
| 11. Day centre services | GO TO HU031c_11 | [hu031b_11] |
| 12. Optician service | GO TO HU031c_12 | [hu031b_12] |
| 13. Dental services | GO TO HU031c_13 | [hu031b_13] |
| 14Hearing services | GO TO HU031c_14 | [hu031b_14] |
| 15. Dietician services | GO TO HU031c_15 | [hu031b_15] |
| 16. Respite services | GO TO HU031c_16 | [hu031b_16] |
| 96. None of these | GO TO HU031c_96 | [hu031b_96] |

CAPI: **FOR EACH HU031b_01-16 ASK HU031c_(i) (i = 01 to 16)**

HU031c: You have said [you/he/she] [don't/doesn't] receive but would like to. Could you say what is the main thing that prevents [you/him/her] from receiving it? IWER: Code main reason not receiving for each service selected in HU031b. [hu031c_01 to hu031c_16]

IWER: SHOW CARD HU031c

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
95. Other
98. DK
99. RF

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

IWER: SHOW CARD HU031d

1. Ask relatives, friends, neighbours
2. Ask my doctor (GP)
3. Contact the HSE
4. Contact the Department of Health
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, Age Action etc.)
8. Phone Senior Helpline
95. Other
98. DK
99. RF

HU032: In the last 12 months, how many weeks [have/has/did] [you/he/she] [spent/spend] as a resident in a nursing home or convalescent home?

IWER: Zero means did not spend any nights in a nursing/convalescent home

_____ Weeks

0...52

-98. DK **GO TO HU077**

-99. RF **GO TO HU077**

(SHARE)

IF HU032 = 0 GO TO HU077

IF HU032 > 0 GO TO HU043

HU043: How [was/is] [your/his/her] nursing/convalescent home care paid for?

(Tick all boxes that apply)

- | | |
|--------------------------------------|------------|
| 1. Out of [my/his/her] own resources | [hu043_01] |
| 2. By Health Insurance | [hu043_02] |
| 3. By the government (Fair Deal) | [hu043_03] |

4. By Children or Relatives	[hu043_04]
95. Paid for in another way	[hu043_95]
98. DK	[hu043_98]
99. RF	[hu043_99]

HU033: Not counting health insurance refunds, how much was paid by [you/Rname] and [your/his/her] relatives for the time [you/he/she] 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)

HU077: Have [you/he/she/Rname] ever added features to [your/his/her] home to make it easier or safer for an older person to live there? This includes changes to the home to make it easier to get around like grab bars, railings or ramps or larger modifications including remodelling existing buildings.

1 Yes

5 No

98 DK

99 RF

If HU077=1 GO TO HU078

If HU077=5,98,99 GO TO HU034

HU078: What was the total cost of modifications made to [his/her]home?

€0 ... and €500,000

-98. DK

-99. RF

HU079: Were any of the costs of the modifications covered by the State?

1 Yes, all of the costs

2 Yes, some of the costs

3 No, none of the costs

98 DK

99 RF

If HU079=1, 98, 99 GO TO HU034

If HU079=2,3 GO TO HU080

HU080: How much did [you/he/she] pay for the home modifications?

IWER: Enter amount to the nearest €

0-500,000

-98 DK

-99 RF

IWER: SHOW CARD HU5

HU034: Please look at card HU5. Think of [your/his/her] last prescription. [Were/Was] [you/he/she] charged for this?

IWER: CODE THE ONE THAT APPLIES

1. No. [I/He/She] [am/is] covered by the Long Term Illness scheme, Health Act Amendment Card or by the High Tech Drugs Scheme
 2. Yes, but [I/he/she] [have/has] Medical Card and paid only the €2.50 per prescribed item charge
 3. Yes, but [I/he/she] only paid part of the cost. The rest was paid through the Drug Payment Scheme.
 4. Yes, but [I/he/she] will claim back part of it from [my/his/her] health insurance
 5. Yes, and [I/he/she] paid the full payment out-of-pocket
98. DK
99. RF

HU035: Not counting health insurance refunds, on average about how much [do/does] [you/he/she] pay out-of-pocket for [your/his/her] 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: Include the €2.50 per prescribed item charges for medical card holders.

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/he/she] first [pay/pays] but later get it refunded, this is not out of pocket expenses.

(SHARE)

HU036: Not counting any refunds from [your/his/her] health insurance, about how much did [you/he/she] pay (out-of-pocket) for any other health expenses [you/he/she] 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/he/she] first pay/pays] but later [get/gets] it refunded, this is not out of pocket expenses. Prescription drugs should be included in HU035 and not here.

(SHARE)

IF (HH005 = 1) ASK HU037 OTHERS GO TO NEXT SECTION

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**

GO TO MH001

SECTION 9 (I). MENTAL HEALTH (MH)

9.1 Depression

***IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW) GO TO MH022**

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.

IWER: SHOW CARD MH1 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

IWER: SHOW CARD MH1

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

IWER: SHOW CARD MH1

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

IWER: SHOW CARD MH1

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

IWER: SHOW CARD MH1

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

IWER: SHOW CARD MH1

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

IWER: SHOW CARD MH1

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

IWER: SHOW CARD MH1

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

IWER: 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/Rname] spend one or more nights in a hospital due to mental health problems?

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

***IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW) GO TO BH001**

9.2 Composite International Diagnostic Interview –SF Major Depressive

Episode

IWER: READ OUT We are also interested in people's moods over a longer time, not just the past week.

MH101: During the last 12 months, was there ever a time when you felt sad, blue, or depressed for two weeks or more in a row?

1. YES

2. (IF VOLUNTEERED) ON ANTI-DEPRESSANT MEDICATION

5. NO

GO TO MH120

98. DK

GO TO MH120

99. RF

GO TO MH120

MH102: Please think of the two-week period during the last 12 months when these feelings were worst. During that time did the feelings of being sad, blue, or depressed usually last all day long, most of the day, about half the day, or less than half the day?

1. All day long

2. Most of the day

3. About half

GO TO MH120

4. Less than Half

GO TO MH120

98. DK

GO TO MH120

99. RF

GO TO MH120

MH103: During those two weeks, did you feel this way every day, almost every day, or less often than that?

1. Every day

2. Almost every day

3. Less often

GO TO MH120

98. DK

GO TO MH120

99. RF

GO TO MH120

MH104: During those two weeks did you lose interest in most things like hobbies, work or activities that usually give you pleasure?

1. YES

5. NO

98. DK

99. RF

MH105: Thinking about those same two weeks, did you feel more tired out or low on energy than is usual for you?

1. YES

5. NO

98. DK

99. RF

MH106: During these weeks did you gain or lose weight without trying, or did you stay about the same?

IWER NOTE: If respondent asks: "Are we still talking about the same two weeks?" Answer "Yes"

- | | |
|--------------------------------|---------------------|
| 1. Gain | GO TO MH107a |
| 2. Lose | GO TO MH107b |
| 3. Both gained and lost weight | GO TO MH107a |
| 4. Stayed about the same | GO TO MH109 |
| 5. Was on a diet | GO TO MH109 |
| 98. DK | GO TO MH109 |
| 99. RF | GO TO MH109 |

MH107a: About how much did you gain?

IWER: SPECIFY KGS/LBS [mh107ab]. ACCEPT A RANGE RESPONSE

-98. DK

-99. RF

ASK MH107b IF MH106 = 2 OR 3

MH107b: About how much did you lose?

IWER: SPECIFY KGS/LBS [mh107bb]. ACCEPT A RANGE RESPONSE

-98. DK

-99. RF

MH108: IWER: DID WEIGHT CHANGE BY MORE THAN 5KGS (11 LBS)?

1. YES

5. NO

98. DK

99. RF

MH109: Did you have more trouble falling asleep than you usually do during those two weeks?

1. YES

5. NO

GO TO MH111

98. DK

GO TO MH111

99. RF

GO TO MH111

MH110: Did this happen every night, nearly every night or less often during those two weeks?

1. Every night

2. Nearly every night

3. Less often

98. DK

99. RF

MH111: During those two weeks, did you have a lot more trouble concentrating than usual?

1. YES

5. NO

98. DK

99. RF

MH112: People sometimes feel down on themselves, no good or worthless. During that two week period, did you feel this way?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

IWER NOTE: If respondent asks: "Are we still talking about the same two weeks?" Answer "Yes"

MH113: Did you think a lot about death – either your own, someone else's, or death in general during those two weeks?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

BL: IF RESPONDENT ANSWERED YES TO ANY OF QUESTIONS (MH104, MH105, MH108, MH111, MH112, MH113) OR IF MH110=1 or 2 PROCEED TO MH114. OTHERWISE GO TO MH138

MH114: **IWER READ OUT:** To review, you had two weeks in a row during the past 12 months when you were sad, blue, or depressed and also had some other feelings or problems like (BL: READ OUT FIRST THREE "YES" RESPONSES (e.g. with appetite/sleep/concentration) FROM QUESTIONS MH104 THROUGH MH113).

About how many weeks altogether did you feel this way during the past 12 months?

- 1. _____ weeks (Range 2 – 51)
- 94. Entire year **GO TO MH116**
- 98. DK **GO TO MH115**
- 99. RF **GO TO MH115**

MH115: Think about the most recent time when you had two weeks in a row when you felt this way. How long ago was that?

_____ months in the past

- 98. DK
- 99. RF

MH116: Did you tell a doctor about these problems?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH117: Did you tell any other professional (such as psychologist, social worker, counsellor, nurse, clergy, or other helping professional)?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH118: Did you take medication, or use drugs or alcohol more than once for these problems?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH119: How much did these problems interfere with your life or activities?

- | | |
|---------------|-------------|
| 1. A lot | GO TO MH138 |
| 2. Some | GO TO MH138 |
| 3. A little | GO TO MH138 |
| 4. Not at all | GO TO MH138 |
| 98. DK | GO TO MH138 |
| 99. RF | GO TO MH138 |

MH120: During the past 12 months was there ever a time lasting two weeks or more when you lost interest in most things like hobbies, work or activities that usually give you pleasure?

- 1. YES
 - 2. (IF VOLUNTEERED) ON ANTI-DEPRESSANT MEDICATION
 - 5. NO
 - 98. DK
 - 99. RF
- | | |
|--|-------------|
| | GO TO MH138 |
| | GO TO MH138 |
| | GO TO MH138 |

MH121: For the next few questions, please think of the two-week period during the past 12 months when you had most complete loss of interest in things. During that two-week period, did the loss of interest usually last all day long, most of the day, about half the day, or less than half the day?

- 1. All day long
 - 2. Most of the day
 - 3. About half
 - 4. Less than Half
 - 98. DK
 - 99. RF
- | | |
|--|-------------|
| | GO TO MH138 |
| | GO TO MH138 |
| | GO TO MH138 |
| | GO TO MH138 |

MH122: Did you feel this way every day, almost every day, or less often than that?

- 1. Every day
 - 2. Almost every day
 - 3. Less often
 - 98. DK
 - 99. RF
- | | |
|--|-------------|
| | GO TO MH138 |
| | GO TO MH138 |
| | GO TO MH138 |

MH123: During those two weeks, did you feel more tired out or low on energy more than is usual for you?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH124: During these weeks did you gain or lose weight without trying, or did you stay about the same?

- | | |
|--------------------------------|---------------------|
| 1. Gain | GO TO MH125a |
| 2. Lose | GO TO MH125b |
| 3. Both gained and lost weight | GO TO MH125a |
| 4. Stayed about the same | GO TO MH127 |
| 5. Was on a diet | GO TO MH127 |
| 98. DK | GO TO MH127 |
| 99. RF | GO TO MH127 |

MH125a: About how much did you gain?

IWER: SPECIFY KGS/LBS [mh125ab]. ACCEPT A RANGE RESPONSE

-
- 98. DK
-99. RF

ASK MH125b IF MH124 = 2 OR 3

MH125b: About how much did you lose?

IWER: SPECIFY KGS/LBS [mh125bb]. ACCEPT A RANGE RESPONSE

-
- 98. DK
-99. RF

MH126: IWER TO CODE IF WEIGHT CHANGED BY MORE THAN 5KGS (11 LBS).

1. YES
5. NO
98. DK
99. RF

MH127: Did you have more trouble falling asleep than you usually do during those two weeks?

- | | |
|--------|--------------------|
| 1. YES | |
| 5. NO | GO TO MH129 |
| 98. DK | GO TO MH129 |
| 99. RF | GO TO MH129 |

MH128: Did this happen every night, nearly every night or less often during those two weeks?

1. Every night
2. Nearly every night
3. Less often
98. DK
99. RF

MH129: During those two weeks, did you have a lot more trouble concentrating than usual?

1. YES
5. NO
98. DK
99. RF

MH130: People sometimes feel down on themselves, no good or worthless. During that two week period, did you feel this way?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH131: Did you think a lot about death – either your own, someone else's, or death in general during those two weeks?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

BL: IF RESPONDENT ANSWERED YES TO ANY OF QUESTIONS (MH123, MH126 , MH129, MH130, MH131) OR IF MH128 = 1 or 2 GO TO MH132 OTHERWISE PROCEED TO MH138

MH132: **IWER READ OUT:** To review, you had two weeks in a row during the past 12 months when you lost interest in most things and also had some other things like (BL: READ OUT FIRST THREE "YES" RESPONSES M QUESTIONS MH123 THROUGH MH131)

About how many weeks altogether did you feel this way during the past 12 months?

- 1. _____ weeks (Range 2 – 51)
- 94. Entire year **GO TO MH134**
- 98. DK **GO TO MH133**
- 99. RF **GO TO MH133**

MH133: Think about the most recent time when you had two weeks in a row when you felt this way. How long ago was that?

_____ months in the past

- 98. DK
- 99. RF

MH134: Did you tell a doctor about these problems?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH135: Did you tell any other professional (such as psychologist, social worker, counsellor, nurse, clergy, or other helping professional)?

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

MH136: Did you take medication or use drugs or alcohol more than once for these problems?

1. YES

5. NO

98. DK

99. RF

MH137: How much did these problems interfere with your life or activities?

1. A lot

2. Some

3. A little

4. Not at all

98. DK

99. RF

9.3 Resilience

IWER: SHOW CARD MH2

***IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW) GO TO BH001**

IWER: READ OUT We are also interested in how people react to difficult events. We want to know how people cope with such events and possibly how to help other people in similar situations.

MH138: Please look at this card. Please tell me if any of these events have happened to you in the past five years. Do not consider events that have occurred in the past month.

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

- | | |
|---|------------|
| 1. New residence or change in living arrangements. | [mh138_01] |
| 2. Serious financial difficulty | [mh138_02] |
| 3. Experienced a crime e.g. mugging, burglary or theft | [mh138_03] |
| 4. A relative or close friend had a serious injury or illness | [mh138_04] |
| 5. A relative or close friend died, not a spouse or child | [mh138_05] |
| 6. You had a serious injury or illness | [mh138_06] |
| 7. Your spouse/partner had a serious injury or illness | [mh138_07] |
| 8. Your spouse/partner died | [mh138_08] |
| 9. One of your children died | [mh138_09] |
| 96. None of these | [mh138_96] |
| 98. DK | [mh138_98] |
| 99. RF | [mh138_99] |

IF [MH138_01, 02, 03, 04, 05, 06, 07, 08, 09 = 1] GO TO MH139

IF [MH138_96, 98, 99 = 1] GO TO BH001

[GENERATE A NEW VARIABLE MH139 INDICATING THE MOST STRESSFUL EVENT, THE EVENTS ARE RANKED IN THE CAPI IN THE FOLLOWING ORDER FROM MOST STRESSFUL TO LEAST STRESSFUL]

- | | |
|------------------|--|
| mh138_09. | the death of your child. |
| mh138_08. | the death of your husband/wife/partner. |
| mh138_07. | the serious injury or illness suffered by your spouse/partner. |
| mh138_06. | your own serious injury or illness. |
| mh138_05. | the death of your relative/close friend. |
| mh138_04. | the serious injury or illness suffered by your relative/close friend. |
| mh138_03. | the time that you were robbed or mugged. |
| mh138_02. | the serious financial problems or difficulties that you experienced |
| mh138_01. | your move to a new residence (or other change in your living arrangements). |

IWER ASK THE REMAINING QUESTIONS ABOUT THE MOST STRESSFUL EVENT INDICATED BY THE RESPONDENT

MH140: Now thinking about [MH139], after the event, how much worse did you feel than before it happened..... great deal, quite a bit, a little, or not at all.

1. A great deal
 2. Quite a bit
 3. A little
 4. Not at all
98. DK
99. RF

MH141. After this event, how much harder was it to get everyday things done.....a great deal, quite a bit, a little, or not at all?

1. A great deal
 2. Quite a bit
 3. A little
 4. Not at all
98. DK
99. RF

MH142. After this event, how long did it take until you started to feel better again.....a few days, a few weeks, a few months, a year, more than a year, or still not better yet?

1. A few days
 2. A few weeks
 3. A few months
 4. A year
 5. More than a year
 6. Still not better yet
98. DK
99. RF

MH143. How long ago did this event occur..... between 1 and 6 months, more than 6 months and up to 1 year, more than 1 year and up to 2 years, or more than 2 years?

1. Between 1 and 6 months ago
 2. More than 6 months and up to 1 year ago
 3. More than 1 year and up to 2 years ago
 4. More than 2 years ago
98. DK
99. RF

MH144. As a result of this event, have you stopped doing some activities that were important to you?

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

MH145. As a result of this event, have you started doing some activities that have become important to you?

1. Yes
5. No

98. DK
99. RF

IWER: DO NOT READ OUT THE ANSWER OPTIONS FOR THIS QUESTION

MH146. Has this event made a permanent change in how you feel about your life?

IWER: IF THE RESPONDENT SAYS YES BUT OFFERS NO FURTHER INSIGHT YOU CAN PROMPT BY SAYING “would you say this change is for the worse.....or...?”

IWER: CODE THE ONE THAT APPLIES

- 1. Yes, but for the better
- 2. Yes, but for the worse
- 5. No, it has made no permanent change

98. DK
99. RF

MH147: Excluding any events which may have occurred in the last month, do you consider this event to be the most stressful event you have experienced in the past five years ?

- | | |
|--------|-------------|
| 1. Yes | GO TO BH001 |
| 5. No | GO TO MH148 |
| 98. DK | GO TO MH148 |
| 99. RF | GO TO BH001 |

IWER: SHOW CARD MH2

MH148: Please look at the card again. Excluding any events which may have occurred in the last month, what do you consider to be the most stressful event you have experienced in the past five years?

- | | |
|---|-----------------------|
| 1. New residence or change in living arrangements. | [mh148_01] |
| 2. Serious financial difficulty | [mh148_02] |
| 3. Experienced a crime e.g. mugging, burglary or theft | [mh148_03] |
| 4. A relative or close friend had a serious injury or illness | [mh148_04] |
| 5. A relative or close friend died, not a spouse or child | [mh148_05] |
| 6. You had a serious injury or illness | [mh148_06] |
| 7. Your spouse/partner had a serious injury or illness | [mh148_07] |
| 8. Your spouse/partner died | [mh148_08] |
| 9. One of your children died | [mh148_09] |
| 95. Any other event (please specify) | [mh148_95] [mh148oth] |
| 98. DK | [mh148_98] |
| 99. RF | [mh148_99] |

BL: GO TO NEXT SECTION.

SECTION 10. BEHAVIOURAL HEALTH (BH)

INTRO: Now I would like to ask some questions about [you/Rname's] lifestyle.

10.1 Smoking

IF (intstatusW3=1 & BH002FF (wave 2)=.) OR (intstatusW3=2,3 & BH002FF (wave 1)=.), GO TO BH001

IF (intstatusW3=1 & BH002FF (wave 2)=1) OR (intstatusW3=2,3 & BH002FF (wave 1)=1), GO TO BH002b

IF (intstatusW3=1 & BH002FF (wave 2)=5) OR (intstatusW3=2,3 & BH002FF (wave 1)=5), GO TO BH002a

IF (intstatusW3=4,5,6,7,8), GO TO BH001

BH001: [Have/Has] [you/Rname] 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/Does][you/he/she] smoke at the present time?

IWER: IF RESPONDENT SMOKED IN THE PAST 3 MONTHS CODE 1

1. Yes **GO TO BH004**

5. No, [I/he/she] [have/has] stopped **GO TO BH003**

98. DK **GO TO BH101**

99. RF **GO TO BH101**

(SHARE/ Similar question ELSA/HRS)

BH002a: Our records show that at the time of the last interview [you/Rname] did not smoke. [Do/Does][you/he/she] smoke at the present time?

IWER: IF RESPONDENT SMOKED IN THE PAST 3 MONTHS CODE 1

1. Yes **GO TO BH004**

5. No **GO TO BH101**

98. DK **GO TO BH101**

99. RF **GO TO BH101**

(SHARE/ Similar question ELSA/HRS)

BH002b: Our records show that at the time of the last interview [you/Rname] smoked. [Do/Does][you/he/she] smoke at the present time?

IWER: IF RESPONDENT SMOKED IN THE PAST 3 MONTHS CODE 1

1. Yes **GO TO BH004**

5. No, [I/he/she] [have/has] stopped **GO TO BH003**

98. DK **GO TO BH101**

99. RF **GO TO BH101**

(SHARE/ Similar question ELSA/HRS)

BH003: How old [were/was] [you/he/she] when [you/he/she] stopped smoking?

1 ... 100

-98. DK

GO TO BH101

-99. RF

GO TO BH101

(SHARE/ Similar question HRS)

BH009. Why did [you/he/she] stop smoking?

1. Personal choice

[bh009_01]

2. Doctor's advice

[bh009_02]

3. Financial reasons

[bh009_03]

4. Illness or ill health

[bh009_04]

95. Other reasons (please specify)

[bh009_95] [bh009oth]

98. DK

[bh009_98]

99. RF

[bh009_99]

BH004: For how many years [did/have/has] [you/R name] [smoke/smoked] altogether?

1 ... 100

-98. DK

-99. RF

(SHARE/ Similar question HRS)

BH005: What [do/does/did][you/he/she] smoke (before you stopped)?

IWER: CODE ALL THAT APPLY

1. Cigarettes

GO TO BH006

[bh005_01]

2. Pipe

GO TO BH007

[bh005_02]

3. Cigars or cigarillos

GO TO BH008

[bh005_03]

98. DK

GO TO BH101

[bh005_98]

99. RF

GO TO BH101

[bh005_99]

(SHARE/ Similar question ELSA)

BH006: How many cigarettes [do/ does/did][you/he/she] smoke on average per day?

1 ... 100

-98. DK

-99. RF

(SHARE/ Similar question ELSA)

BL: GO TO BH101

BH007: How many pipes [do/ does/did][you/he/she] 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/ does/did][you/he/she] smoke on average per day?

1 ... 100

-98. DK

-99. RF

(SHARE/ Similar question ELSA)

BL: GO TO BH101

10.2 Exercise section

INTRO: The next set of questions will ask you about the time [you/Rname] spent being physically active in the last 7 days.

Vigorous physical activities refer to activities that take hard physical effort and make [you/him/her] breathe much harder than normal. Think *only* about those physical activities that [you/he/she] did for at least 10 minutes at a time.

BH101: During the **last 7 days**, on how many days did [you/he/she] do **vigorous** physical activities like heavy lifting, digging, aerobics, or fast bicycling?

1. _____ Number of days per week

0. No [I/he/she] [have/has] not done any vigorous physical activities

GO TO BH103

98. DK/ NOT SURE

GO TO BH103

99. RF

GO TO BH103

BH102: How much time did [you/he/she] usually spend doing **vigorous** physical activities on one of those days?

_____ hours per day (0 ...10)

[bh102h]

_____ minutes per day

[bh102m]

98. DK/NOT SURE

99. RF

BH103: Moderate activities refer to activities that take moderate physical effort and make [you/him/her] breathe somewhat harder than normal. Think only about those physical activities that [you/he/she] did for at least 10 minutes at a time. During the **last 7 days**, on how many days did [you/he/she] do **moderate** physical activities like carrying light loads, bicycling at a regular pace, or doubles tennis? Do not include walking.

1. _____ days per week

0. No [I/he/she] [have/has] not done any moderate physical activities

GO TO BH105

98. DK

GO TO BH105

99. RF

GO TO BH105

BH104: How much time did [you/he/she] usually spend doing **moderate** physical activities on one of those days?

_____ hours per day (0 ...10)

[bh104h]

_____ minutes per day

[bh104m]

98. DK/NOT SURE

99. RF

BH105: Now think about the time [you/he/she] 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/he/she] might do solely for recreation, sport, exercise, or leisure.

During the last 7 days, on how many days did [you/he/she] walk for at least 10 minutes at a time?

1. _____ days per week

0. No [I/he/she] [have/has] not done any walking

GO TO BH107

98. DK

GO TO BH107

99. RF

GO TO BH107

BH106: How much time did [you/he/she] usually spend **walking** on one of those days?

_____ hours per day (0 ...15)

[bh106h]

_____ minutes per day

[bh106m]

98. DK/NOT SURE

99. RF

BH107: On a typical weekday, how many hours would [you/he/she] spend **watching TV**?

_____ hours per day (0 ... 24)

-98. DK/NOT SURE

-99. RF

10.3 Sleep section

INTRO: We are interested in how well [you/Rname] [manage/manages] to sleep at night and if [you/he/she] [have/has] any trouble sleeping.

BH200: Approximately how many hours [do/does] [you/he/she] sleep on a weeknight?

IWER: ASK RESPONDENT TO ESTIMATE TO NEAREST HOUR

2.....24

-98. DK

-99. RF

(ELSA)

BH201: How likely [are/is] [you/he/she] 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)

***IF (HH005 = 2,3,4,5 or 6 PROXY INTERVIEW) GO TO BH301.**

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)

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)

IF (HH005 = 1) ASK BH204 OTHERS GO TO NEXT SECTION

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 NEXT SECTION

10.4 Alcohol questions

IF (HH005 = 1 - SELF INTERVIEW) GO TO NEXT SECTION

We are interested in knowing more about people's drinking patterns.

BH301. Has [Rname] ever had an alcoholic drink e.g. glass of wine, glass of beer etc?

- 1. Yes GO TO BH302
- 5. No GO TO **NEXT SECTION**
- 98. DK GO TO **NEXT SECTION**
- 99. RF GO TO **NEXT SECTION**

BH302. Has [he/she] had an alcoholic drink of any kind in the last 6 months?

- 1. Yes GO TO BH303
- 5. No GO TO **NEXT SECTION**
- 98. DK GO TO **NEXT SECTION**
- 99. RF GO TO **NEXT SECTION**

BH303. During the last 6 months, how often has [he/she] drunk any alcoholic beverages, like beer, cider, wine, spirits or cocktails? **IWER: CODE ONLY ONE ANSWER**

- 1. Daily
- 2. 4-6 days a week
- 3. 2-3 days a week
- 4. Once a week
- 5. 2-3 days a month
- 6. Once a month
- 7. One or a couple of days per year
- 98. DK
- 99. RF

BH304. More recently (i.e. in the last month), would you describe [his/her] current alcohol intake as:
IWER: CODE ONLY ONE ANSWER

- 1. Daily
- 2. 4-6 days a week
- 3. 2-3 days a week
- 4. Once a week
- 5. 2-3 days a month
- 6. Once a month
- 7. Less than once a month
- 98. DK
- 99. RF

BH305. IWER: SHOW CARD BH1. Please look at this card. On the days that [Rname] drinks, what type of drink does [he/she] have? **Please indicate the drink that [he/she] would be most likely to drink.**

IWER: READ OUT OPTIONS AND INDICATE THEM ON THE CARD.CHOOSE ONLY ONE.

1. Full pint of beer/cider/lager
2. Full pint of stout
3. Half pint or glass of beer/cider/lager
4. Large glass of wine (250mls)
5. Measure of spirit
6. Premixed spirit drink (e.g. Smirnoff Ice)
98. DK GO TO BH306
99. RF GO TO BH306

BH307:

Thinking about [his/her] drink of choice, on average, in the last 6 months on the days that [he/she] drank, about how many did [he/she] have?

IWER CODE NUMBER OF DRINKS

1. 1
2. 2
3. 3
4. 4
5. 5
6. 6
7. 7
8. 8
9. 9
10. 10
11. 11 or more
98. DK
99. RF

BH306. Has [he/she] reduced [his/her] alcohol intake since the last interview?

1. Yes GO TO BH306b
5. No GO TO NEXT SECTION
98. DK GO TO NEXT SECTION
99. RF GO TO NEXT SECTION

BH306b. Why did [he/she] reduce [his/her] alcohol intake?

CODE ALL THAT APPLY

1. Personal choice [bh306b_01]
2. Doctor's advice [bh306b_02]
3. Medication [bh306b_03]
4. Illness or ill health [bh306b_04]
95. Other reasons (please specify). [bh306b_95], [bh306both]
98. DK [bh306b_98]
99. RF [bh306b_99]

BL: GO TO NEXT SECTION

***IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW) GO TO NEXT SECTION**

SECTION 9 (II). MENTAL HEALTH (MH)

9.4 HAD-S

INTRO: I am now going to read out some statements and I would like you to please look at the cards I show you and indicate how well these statements describe your feelings during the past week. 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.

IWER: PROMPT IF NECESSARY - 'WOULD YOU SAY THIS STATEMENT DESCRIBES THE WAY YOU FEEL NORMALLY MOST OF THE TIME.....A LOT OF THE TIME.....OCCASIONALLY.....NOT AT ALL'

IWER: SHOW CARD MH3

MH201: I feel tense or "wound up"

1. most of the time
 2. a lot of the time
 3. from time to time, occasionally
 4. not at all
98. DK
99. RF

IWER: SHOW CARD MH4

MH202: I get a sort of frightened feeling as if something awful is about to happen

1. very definitely and quite badly
 2. yes, but not too badly
 3. a little, but it does not worry me,
 4. Not at all
98. DK
99. RF

IWER: SHOW CARD MH5

MH203: Worrying thoughts go through my mind

1. A great deal of the time
 2. A lot of the time
 3. From time to time but not too often
 4. Only occasionally
98. DK
99. RF

IWER: SHOW CARD MH6

MH204: I can sit at ease and feel relaxed

1. Definitely
 2. Usually
 3. Not often
 4. Not at all
98. DK
99. RF

IWER: SHOW CARD MH7

MH205: I get a sort of frightened feeling like "butterflies" in the stomach

1. Not at all
2. Occasionally
3. Quite often
4. Very often

98. DK

99. RF

IWER: SHOW CARD MH8

MH206: 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

98. DK

99. RF

IWER: SHOW CARD MH9

MH207: I get sudden feelings of panic

1. Very often indeed
2. Quite a lot
3. Not very much
4. Not at all

98. DK

99. RF

9.5 Composite International Diagnostic Interview – Generalized Anxiety Disorder

IWER: READ OUT We are also interested in people's moods over a longer time, not just the past week and any feelings of worry/anxiety you may have had over a longer period of time

MH301: During the past 12 months, did you ever have a period lasting one month or longer when most of the time you felt worried, tense, or anxious?

- 1. YES **GO TO MH303**
- 5. NO
- 98. DK
- 99. RF

MH302: People differ a lot in how they worry about things. Did you have a time in the past 12 months when you worried a lot more than most people would in your situation?

- 1. YES
- 5. NO **GO TO WE001**
- 98. DK **GO TO WE001**
- 99. RF **GO TO WE001**

MH303: Has that period ended or is it still going on?

- 1. Ended **GO TO MH304**
- 2. Still going on **GO TO MH305**
- 98. DK **GO TO MH305**
- 99. RF **GO TO WE001**

MH304: How many months or years did it go on before it ended?

- 1. _____ Months **[mh304m]**
- 2. _____ Years **[mh304y]**
- 3. (IF VOLUNTEERED) "All my life" or "As long as I can remember"
- 98. DK
- 99. RF

IF (MH303 = 2) ASK MH305 OTHERS GO TO MH306

MH305: How many months or years has it been going on?

- 1. _____ Months **[mh305m]**
- 2. _____ Years **[mh305y]**
- 3. "All my life" or "As long as I can remember"
- 98. DK
- 99. RF

MH306: During that period, [was your/is your] worry stronger than in other people?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH307: [Did/Do] you worry most days?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH308: [Did/Do] you usually worry about one particular thing, such as your job security or the failing health of a loved one, or more than one thing?

- 1. One thing
- 5. More than one thing
- 98. DK
- 99. RF

MH309: [Did/Do] you find it difficult to stop worrying?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH310: [Did/Do] you ever have different worries on your mind at the same time?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH311: How often [was/is] your worry so strong that you [couldn't/can't] put it out of your mind no matter how hard you [tried/try] – often, sometimes, rarely or never?

- 1. Often
- 2. Sometimes
- 3. Rarely
- 4. Never
- 98. DK
- 99. RF

MH312: How often [did/do] you find it difficult to control your worry – often, sometimes, rarely, or never?

- 1. Often
- 2. Sometimes
- 3. Rarely
- 4. Never
- 98. DK
- 99. RF

MH314: When you [were/are] worried or anxious, [were/are] you also restless?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH315: When you [were/are] worried or anxious, [were/are] you also keyed up or on edge?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH316: When you [were/are] worried or anxious, [were/are] you also easily tired?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH317: When you [were/are] worried or anxious, [did/do] you have difficulty keeping your mind on what you [were/are] doing?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH318: When you [were/are] worried or anxious, [were/are] you also more irritable than usual?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH319: When you [were/are] worried or anxious, [did/do] you have tense, sore or aching muscles?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH320: When you [were/are] worried or anxious, [did/do] you have trouble falling asleep or staying asleep

- 1. YES
- 5. NO
- 98. DK
- 99. RF

BL: IF RESPONDENT HAS ZERO OR ONE "YES" RESPONSES TO QUESTIONS MH314-MH320 GO TO WE001

BL: IF RESPONDENT HAS MORE THAN ONE "YES" RESPONSE TO MH314-MH320 PROCEED TO MH321

MH321: Did you tell a doctor about your worry or about the problems it was causing?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH322: Did you tell any other professional (such as psychologist, social worker, counsellor, nurse, clergy, or other helping professional)?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH323: Did you take medication or use drugs or alcohol more than once for the worry or the problems it was causing?

- 1. YES
- 5. NO
- 98. DK
- 99. RF

MH324: How much did/does the worry or anxiety interfere with your life or activities?

- 1. A lot
- 2. Some
- 3. A little
- 4. Not at all
- 98. DK
- 99. RF

BL: GO TO WE001

SECTION 11. EMPLOYMENT SITUATION (WE)

11.1 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/Rname's] 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)

IF (WE001 = 95) ASK WE002 OTHERS GO TO WE003

WE002. **Other (specify)**

[we001oth]

Text: up to 60 characters

98. DK

99. RF

(ELSA)

IF (WE001 = 1, 4, 5, 6, 7, 95, 98, 99) ASK WE003 OTHERS GO TO WE004

WE003. Did [you/he/she], 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=1, 4, 5, 6, 7, 95, 98, 99 AND WE003=5, 98, 99) ASK WE004 OTHERS GO TO WE101 WE004.

[Have/Has] [you/he/she] [ever] done any paid work?

1 Yes GO TO WE007 (unless we001==1 in which case go to WE601)

5 No

98. DK

99. RF

(SHARE)

BL:

IF WE001=1 & WE004==5 GO TO ~~WE005~~ WE623 /*SAYS THEY ARE RETIRED BUT HAS NEVER WORKED*/

IF WE001=5 & WE004==5 GO TO WE501 /*SAYS THEY ARE SICK/DISABLED & NEVER WORKED*/

IF WE001=4 & WE004==5 GO TO WE404 /*SAYS THEY ARE UNEMPLOYED & NEVER WORKED*/

IF WE001=6 AND WE004=5 GO TO WE623 /*SAYS THEY ARE LOOKING AFTER FAMILY & HAVE NEVER WORKED*/

IF WE001=7 AND WE004=5 GO TO WE623 /*SAYS THEY ARE IN EDUCATION & HAVE NEVER WORKED*/

IF WE001 = 95, 98, 99 – GO TO WE623

IF (WE004 = 1 AND WE001 ≠ 1) ASK WE007 OTHERS GO TO WE005

WE007. When [you/he/she] [were/was] working what was the title or name of [your/his/her] job?

IWER: IF HE/SHE HAD MORE THAN ONE JOB, THINK OF THE HIGHEST PAID JOB EVER HELD.

VERIFY THE SPELLING OF THE JOB TITLE & ASK FOR OCCUPATIONS RATHER THAN JUST COMPANY NAMES

Text: up to 60 characters

98. DK (GO TO WE008)

99. RF (GO TO WE008)

(TILDA)

WE007x

IWER: CODE WITHOUT ASKING:

Was the respondent a farm owner or manager?

1. Yes GO TO WE007b

5. No GO TO WE007a

We007a

IWER TO ALSO SELECT SOCIAL CLASS

(Social Class Categories)

1 Professional workers

2 Managerial and technical

3 Non-manual

4 Skilled manual

5 Semi-skilled

6 Unskilled

7 Unable to classify

IF (WE007a = 1 (FARM OWNER / MANAGER)) ASK WE007b OTHERS GO TO WE008

We007b. What was the acreage of the farm?

NOTE: If the respondent is unsure ask them to round to the nearest 10 acres

1... 1000

-98. DK

-99. RF

IF (WE007b = 0...29) We007SC = 5 (semi-skilled)

IF (WE007b = 30...49) We007SC = 4 (skilled)

IF (WE007b = 50...99) We007SC = 3 (non-manual)

IF (WE007b = 100...199) We007SC = 2 (managerial and technical)

IF (WE007b = 200...1000) We007SC = 1 (professional workers)

We007SC

SET IN BACKGROUND – NOT ASKED

(Social Class Categories)

1 Professional workers

2 Managerial and technical

3 Non-manual

4 Skilled manual

5 Semi-skilled

6 Unskilled

7 All others gainfully occupied and unknown

IWER: SHOW CARD WE2

WE008. Please look at this card. When [you/he/she] [were/was] working in this job, [were/was] [you/he/she] working in...

1. The public sector

2. A semi-state company

3. The Private sector as an employee

4. The Private sector as a self-employed person (e.g. as a partner in a practice or business, sole trader, director-major shareholder)

95. Other

98. DK

99. RF

NOTE: Public sector includes: teaching in Dept. of Education supported schools, civil service, local authorities, health boards or HSE, emergency services, prison service or defence forces and non-commercial state bodies. Semi-state companies are commercial bodies like CIE, Bord na Mona, ESB etc.

(i.e. homemakers or in education who once worked)

IF (we001 = 6, 7 & we004 = 1) ASK WE009 OTHERS GO TO WE010 because question is repeated in the unemployment section and disability section

WE009. In what year did [you/he/she] cease working?

[Year of birth+10]...[current year]

-98 DK

-99 RF

IWER: SHOW CARD WE2A

WE010 Please look at card WE2A. Which of these best describes the work that [you/Rname] did in [your/Rname's] that job?

1. Sedentary occupation: You spent most of your time sitting (such as in an office)

2. Standing occupation: You spent most of your time standing or walking. However the way you spent your time did not require intense physical effort (e.g. shop assistant, hairdresser, security guard etc.)
3. Physical work: Involved some physical effort including handling of heavy objects and use of tools (e.g. plumber, cleaner, nurse, sports instructor, electrician, carpenter etc.)
4. Heavy manual work: Involved very vigorous physical activity including handling of very heavy objects (e.g. docker, miner, bricklayer, construction worker etc.)
98. DK
99. RF
- (ELSA)

WE011 [Were you/Is Rname] a member of trade union or a staff association?

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

(UK Labour Force Survey)

WE012 [if we011=2 then add "Nevertheless"] Did agreements between a trade union and [your/Rname] employer affect [your/his/her] pay, conditions or pensions?

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

(UK Labour Force Survey)

WE013: Did the organization [you/he/she] worked for provide a group health insurance plan and did you avail of it?

1. No health insurance plan available
2. Yes, plan was available but I opted out of the plan
3. Yes, plan was available and I joined the plan
4. Yes, plan was available and was mandatory
- (TILDA)**

BL:

IF (WE001 = 6, 7 AND WE004 = 1 in education or looking after family) ASK WE005

IF (WE001 = 4, AND WE004 = 1 unemployed but once worked) ASK WE401

IF (WE001 = 5, AND WE004 = 1 disabled but once worked) ASK WE501

OTHERS GO TO WE201

WE005. Why [are/is] [you/he/she] 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/he/she] wanted to take care of children or grandchildren
95. Other **GO TO WE006**

98. DK
99. RF

(SHARE/TILDA)

BL:

IF (WE005 = 95) ASK WE006 OTHERS GO TO WE623

WE006. Other (specify)

[we005oth]

Text: up to 60 characters

98. DK

99. RF

(SHARE)

BL:

GO TO WE623

11.2 Job description

IF (WE001 = 2) ASK WE101 OTHERS GO TO WE103

WE101:

[In the last two years] Apart from [your/his/her] main job, [do/does] [you/he/she] have, [have/has] [you/he/she] had 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)

IF (WE101 = 1) ASK WE102 OTHERS GO TO WE103

WE102: How many other jobs [do/does] [you/he/she] currently have?

1 ... 4

-98. DK

-99. RF

(SHARE)

WE103: What is the name or title of [your/his/her] main job?

IWER: IF PERSON HAS MORE THAN ONE JOB, CHOOSE THE ONE WHICH IS HIGHEST PAID. VERIFY THE SPELLING OF THE JOB TITLE & ASK FOR OCCUPATION RATHER THAN JUST COMPANY NAMES.

Text: up to 60 characters

98. DK (GO TO WE149)

99. RF (GO TO WE149)

(ELSA)

WE103x

IWER: CODE WITHOUT ASKING:

Is the respondent a farm owner or manager?

1. Yes **GO TO WE103b**

5. No **GO TO WE103a**

WE103A:

IWER VERIFY THE SPELLING OF THE JOB TITLE & ASK FOR OCCUPATIONS RATHER THAN JUST COMPANY NAMES

IWER TO ALSO SELECT SOCIAL CLASS

(Social Class Categories)

1 Professional workers

2 Managerial and technical

3 Non-manual

4 Skilled manual

5 Semi-skilled

6 Unskilled

7 Unable to classify

IF (WE103a = 1 (FARM OWNER / MANAGER)) ASK WE103b OTHERS GO TO WE149

We103b. What was the acreage of the farm?

NOTE: If the respondent is unsure ask them to round to the nearest 10 acres

1... 1000

-98. DK

-99. RF

IF (WE103b = 0...29) We103SC = 5 (semi-skilled)

IF (WE103b = 30...49) We103SC = 4 (skilled)

IF (WE103b = 50...99) We103SC = 3 (non-manual)

IF (WE103b = 100...199) We103SC = 2 (managerial and technical)

IF (WE103b = 200...1000) We103SC = 1 (professional workers)

We103SC

SET IN BACKGROUND – NOT ASKED

(Social Class Categories)

1 Professional workers

2 Managerial and technical

3 Non-manual

4 Skilled manual

5 Semi-skilled

6 Unskilled

7 All others gainfully occupied and unknown

SHOW CARD WE2B

WE149. Please look at card WE2B. Is this job in....

1. The public sector

2. A semi-state company

3. The Private sector as an employee

4. The Private sector as a self-employed person (e.g. as a partner in a practice or business, sole trader, director-major shareholder)

98. DK

99. RF

(SHARE)

NOTE: Public sector includes: teaching in Dept. of Education supported schools, civil service, local authorities, health boards or HSE, emergency services, prison service or defence forces and non-commercial state bodies. Semi-state companies are commercial bodies like CIE, Bord na Mona, ESB etc.

IWER: SHOW CARD WE3

WE152: Please look at card WE3. Which of these best describes the work that [you/Rname] [do/does] in [your/Rname's] main job?

1. Sedentary occupation: You spend most of your time sitting (such as in an office)

2. Standing occupation: You spend most of your time standing or walking. However the way you spend your time does not require intense physical effort (e.g. shop assistant, hairdresser, security guard etc.)

3. Physical work: This involves some physical effort including handling of heavy objects and use of tools (e.g. plumber, cleaner, nurse, sports instructor, electrician, carpenter etc.)

4. Heavy manual work: This involves very vigorous physical activity including handling of very heavy objects (e.g. docker, miner, bricklayer, construction worker etc.)

98. DK

99. RF
(ELSA)

WE153: [Are you/Is Rname] *a member of a trade union or a staff association?*

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

(UK LABOUR FORCE SURVEY)

WE154: [if we153=5 then add "Nevertheless"] **Do agreements between a trade union and [your/his/her] employer affect [your/Rname's] pay, conditions or pensions?**

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

(UK LABOUR FORCE SURVEY)

WE155: Does the organization you work for provide a group health insurance plan and do you avail of it?

- 1. No health insurance plan available.
- 2. Yes, plan is available but I opted out of the plan.
- 3. Yes, plan is available and I joined the plan.
- 4. Yes, plan is available and was mandatory.

(TILDA)

- 98. DK
- 99. RF

(TILDA)

WE105:

In which year did [you/he/she] start this job?

Birth Year..[current year]

- 98. DK
- 99. RF

(SHARE)

NOTE: By this we mean when did [you/he/she] 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
 95. 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/does] [you/he/she] usually work in this job, excluding meal breaks (but including any paid or unpaid overtime)?

0..168

-98. DK **GO TO WE109**

-99. RF **GO TO WE109**

(ELSA)

BL:

IF (WE107 < 30) ASK WE108 OTHERS GO TO WE109

IWER: SHOW CARD WE4

WE108:

Please look at card WE4. What is [your/his/her] 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
 95. Other reasons
 98. DK
 99. RF
- (SHARE)

WE109: Excluding paid vacation or paid leave, for how many weeks did [you/he/she] 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)

IWER: SHOW CARD WE5

WE111:

Please look at card WE5. About how many people (including [yourself/Rname]) are employed at the place where [you/he/she] usually [work/works]?

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 in which [you/he/she] [work/works/works]].

11.3 Wages

WE112:

Thinking about [your/his/her] typical wage/salary payment, what time period does 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

IF (WE112 = 95) ASK WE113 OTHERS GO TO WE114

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

[we112oth]

98. DK **GO TO WE130**

99. RF **GO TO WE130**

(EU-SILC)

IF (WE112=1, 2, 3, 4, 5, 6, 95) ASK WE114 OTHERS GO TO WE130

WE114: **Before any deductions, about how much is [your/his/her] typical wage/salary payment?**

Include regular overtime, commission, tips etc. INSERT REMINDER OF PAY PERIOD

€0 ... €500,000

-98. DK

-99. RF

(EU-SILC)

NOTE: If RESP asks what "deductions" mean then prompt: tax, Universal Social Charge, social insurance (PRSI) or pension and health contributions, union dues and so on.

[UPPER LIMITS : WE112 (1) = 10,000, WE112(2) = 20,000, WE112(3) = 40,000, WE112(4) = 120,000, WE112(5) = 250,000, WE112(95) = 250,000]

IF (WE112=1 AND WE114=-98, -99) ASK WE115 OTHERS GO TO WE116

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

IF (WE112=2 AND WE114=-98, -99) ASK WE116 OTHERS GO TO WE117

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

IF (WE112=3 AND WE114=-98, -99) ASK WE117 OTHERS GO TO WE118

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

IF (WE112=4 AND WE114=-98, -99) ASK WE118 OTHERS GO TO WE119

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

IF (WE112=5 AND WE114=-98, -99) ASK WE119 OTHERS GO TO WE120

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

IF (WE112=6 AND WE114=-98, -99) ASK WE120 OTHERS GO TO WE121

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

IF (WE112=95 AND WE114=-98, -99) ASK WE121 OTHERS 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

WE122: **What is the total net amount, i.e. after deductions at source and excluding expense refunds, [you/he/she] [receive/receives] in [your/his/her] typical wage/salary payment? Include regular overtime, commission, tips etc.**

IWER: Please ensure that resp uses the same pay period as in the previous question

Just to clarify, could you give your answer in terms of the [weekly/fortnightly/monthly/semi annually/annually/other] pay period that you were referring to in the previous question.

0...€500,000

-98. DK

-99. RF

(EU-SILC)

NOTE: If RESP asks what is meant by "deduction" then prompt: Usually people have some deductions made at source such as Income tax, Universal Social Charge, PRSI contribution (incl. health levies), pension or superannuation contribution, trade union dues or subscriptions, life assurance premiums, private health insurance (VHI/BUPA/QUINN HEALTH INSURANCE/VIVAS/HIBERNIAN HEALTH /AVIVA HEALTH) or other.

[UPPER LIMITS : WE112 (1) = 10,000, WE112(2) = 20,000, WE112(3) = 40,000, WE112(4) = 120,000, WE112(5) = 250,000, WE112(95) = 250,000]

IF (WE122 >= €0 & WE122 <= €500,000 & (we114≠-98 & we114≠-99) & (we122-we114)>=0) GO TO WE150

IF (WE122 >= €0 & WE122 <= €500,000 & (we114≠-98 & we114≠-99) & ((we114-we122)/we114 >=0.60)) GO TO WE150

IF WE122 is “don’t know/refuse” and/or if we114 and following bracket is “don’t know or refuse then” don’t go to we150 IF (WE122 >= €0 & WE122 <= €500,000 & (we114≠-98 & we114≠-99) & ((we114-we122)/we114 <0.60)) GO TO WE134

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

WE150: The gross figure [i.e. before tax and other deductions] you have given [we114] is smaller/the same/much bigger when compared to the net figure [we122] [i.e. after tax and other deductions] you have given. Could you please confirm this is the case? If you are satisfied that these are correct then we can proceed to the next question

IF NOT SATISFIED GO BACK TO WE112

IF (WE112=1 AND WE122=-98, -99) ASK WE123 OTHERS GO TO WE124

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

IF (WE112=2 AND WE122=-98, -99) ASK WE124 OTHERS GO TO WE125

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

IF (WE112=3 AND WE122=-98, -99) ASK WE125 OTHERS GO TO WE126

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

IF (WE112=4 AND WE122=-98, -99) ASK WE126 OTHERS GO TO WE127

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

IF (WE112=5 AND WE122=-98, -99) ASK WE127 OTHERS GO TO WE128

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

IF (WE112=6 AND WE122=-98, -99) ASK WE128 OTHERS GO TO WE129

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

IF (WE112=95 AND WE122=-98, -99) ASK WE129 OTHERS 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 (WE112 = 98, 99 OR IF WE113 = -98, -99) ASK WE130 OTHERS GO TO WE134

WE130: What was the total gross amount [you/he/she] 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 WE134**

-98. DK **GO TO WE131**

-99. RF **GO TO WE131**

(EU-SILC)

IF (WE130 = -98, -99) ASK WE131 OTHERS GO TO WE134

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/Is] [you/he/she] supplied with a company car which is available for private use?

1. Yes **GO TO WE135**

5. No **GO TO WE151**

98. DK **GO TO WE151**

99. RF **GO TO WE151**

(EU-SILC)

IF (WE134 = 1) ASK WE135 OTHERS GO TO WE151

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 WE151

11.4 Working conditions

***IF (HH005 = 2,3,4,5 or 6 PROXY INTERVIEW) GO TO WE136**

WE 151 I am now going to read a statement people might use to describe their work. We would like to know if you feel like this about your (main) job.

IWER SHOW CARD WE6

WE151: Please look at card WE6. All things considered I am satisfied with this job. Would you say you strongly agree, agree, disagree or strongly disagree?

- 1. Strongly agree
- 2. Agree
- 3. Disagree
- 4. Strongly disagree
- 98. DK
- 99. RF
- [SHARE]

WE136. In [your/his/her] job, [do/does] [you/he/she] have any responsibility for supervising the work of other employees?

- 1. Yes **GO TO WE137**
- 5. No **GO TO WE623**
- 98. DK **GO TO WE623**
- 99. RF **GO TO WE623**
- (SHARE)

IF (WE136 = 1) ASK WE137 OTHERS GO TO WE623

IWER: SHOW CARD WE5

WE137. Please look at card WE5. About how many people [are/is] [you/he/she] 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)

BL: END OF SECTION - GO TO WE623

IF (WE001 = 3) ASK WE201. OTHERS GO TO WE301

11.5 Self-employed

WE201.

IWER: PLEASE VERIFY THE SPELLING IF OTHER – NON FARMING

What is the nature of [your/his/her] business or occupation?

1. Farming **GO TO WE301**

5. Other – Non farming **GO TO WE201a**

98. DK **GO TO WE203**

99. RF **GO TO WE203**

(TILDA)

IF (WE201 = 5) ASK WE201A OTHERS GO TO WE203

WE201A

Would [you/he/she]

describe[yourself/himself/herself] as..

1. Sole trader

2. In partnership

3. Limited company

98. DK

99. RF

We218 What is the title or name of [your/his/her] job?

IWER: IF PERSON HAS MORE THAN ONE JOB, CHOOSE THE ONE WHICH IS HIGHEST PAID. VERIFY THE SPELLING OF THE JOB TITLE & ASK FOR OCCUPATION RATHER THAN JUST COMPANY NAMES.

IWER: ASK FOR OCCUPATIONS RATHER THAN JUST THE PHRASE “SELF-EMPLOYED”. WE WANT “SELF-EMPLOYED SOLICITOR”, “SELF-EMPLOYED WINDOW CLEANER”, ETC.;

Text: up to 60 characters

98. DK (GO TO WE203)

99. RF (GO TO WE203)

(TILDA)

WE218x

IWER: CODE WITHOUT ASKING:

Is the respondent a farm owner or manager?

1. Yes **GO TO WE301**

5. No **GO TO WE218a**

WE218a:

IWER TO ALSO SELECT SOCIAL CLASS LIST

(Social Class Categories)

1 Professional workers

2 Managerial and technical

3 Non-manual

4 Skilled manual

5 Semi-skilled

6 Unskilled

7 Unable to classify

IWER: SHOW CARD WE7

WE219: Please look at card WE7. Which of these best describes the work that [you/Rname] do[es] in [your/Rname's] main job?

1. Sedentary occupation: You spend most of your time sitting (such as in an office)
2. Standing occupation: You spend most of your time standing or walking. However the way you spend your time does not require intense physical effort (e.g. shop assistant, hairdresser, security guard etc.)
3. Physical work: This involves some physical effort including handling of heavy objects and use of tools (e.g. plumber, cleaner, nurse, sports instructor, electrician, carpenter etc.)
4. Heavy manual work: This involves very vigorous physical activity including handling of very heavy objects (e.g. docker, miner, bricklayer, construction worker etc.)

98. DK

99. RF

(ELSA)

WE203.

In which year did [you/he/she] start this business?

1900...[current year]

-98. DK

-99. RF

(TILDA)

IWER SHOW CARD WE8

WE204. Please look at card WE8. How many employees, if any, [do/does/does] [you/he/she] 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/Rname] 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**

2. Loss **GO TO WE207**

98. DK **GO TO WE217**

99. RF **GO TO WE217**

(ELSA)

IF (WE206 = 2) ASK WE207 OTHERS GO TO WE208

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 WE217

IF (WE206 = 1) ASK WE208 OTHERS GO TO WE217

WE208. Excluding the share of any partner [you/he/she] might have, before tax and social insurance contributions, what was the total income or profit [you/he/she] 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/he/she] might receive from this business or any money [you/he/she] [draw/draws] for personal day-to-day living expenses (as distinct from business expenses).

(EU-SILC)

IF (WE208 = -98, -99) ASK WE209 OTHERS GO TO WE210

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/he/she] 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)

IF (WE210 = 1) ASK WE211 OTHERS GO TO WE212

WE211. How much did [you/he/she] pay in PRSI?

€0 ... €50,000

-98. DK
-99. RF
(EU-SILC)

WE212. [Have/Has/Has] [you/he/she] 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)

IF (WE212 = 1) ASK WE213 OTHERS GO TO WE214

WE213. What was the amount paid?

€0 ... €100,000

-98. DK
-99. RF
(EU-SILC)

WE214. Did [you/he/she] receive any other income over that period?

- 1. Yes **GO TO WE215**
- 5. No **GO TO WE217**
- 98. DK **GO TO WE217**
- 99. RF **GO TO WE217**

Note: By other income we mean Director's fees from other business, grinds, occasional work, royalties, rental income from business properties or equipment, which were not included in the amounts already stated.

(EU-SILC)

IF (WE214 = 1) ASK WE215 OTHERS GO TO WE217

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/he/she] pay on this other income?

€0 ... €100,000

-98. DK
-99. RF
(EU-SILC)

***IF (HH005 = 2,3,4,5 or 6 PROXY INTERVIEW) GO TO WE623**

I am now going to read a statement people might use to describe their work. We would like to know if you feel like this about your (main) job.

IWER: SHOW CARD WE9

WE217: Please look at card WE9. All things considered I am satisfied with this job. Would you say you strongly agree, agree, disagree or strongly disagree?

- 1. Strongly agree
- 2. Agree
- 3. Disagree

4. Strongly disagree

98. DK

99. RF

[SHARE]

BL: END OF SECTION - GO TO WE623IF

**IF WE201 = 1 OR WE218x = 1 ASK WE301 OTHERS GO TO WE317
THIS SECTION ASKED REGARDLESS OF CS017 STATUS**

11.6 Farming

WE301.

[Do/Does/Does] [you/Rname] own or [have/has/has] [you/he/she] owned a farm at any time during the last 2 years?

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)

IF (WE301 = 1) ASK WE302 OTHERS GO TO WE306

WE302.

How many acres of land did [you/he/she] own in the previous year?

0 ... 9999

-98. DK

-99. RF

(EU-SILC)

WE303.

Did [you/he/she] let any of this land to anyone else in the previous 2 years?

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)

IF (WE303 = 2) ASK WE304 OTHERS GO TO WE305

WE304.

[In the last two years] How many acres did [you/he/she] let?

0 ... 500

-98. DK

-99. RF

(EU-SILC)

IF (WE303 = 1, 2) ASK WE305 OTHERS GO TO WE306

WE305. **How much annual rent did [you/he/she] receive for this land?**

€0 ... €50,000 **GO TO WE306**

-98. DK **GO TO WE305U1**

-99. RF **GO TO WE305U1**

(EU-SILC)

IF (WE305 = -98, -99) ASK WE305U1 OTHERS GO TO WE306

WE305U1. **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/he/she] 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)

IF (WE306 = 1) ASK WE307 OTHERS GO TO WE309

WE307. How many acres did rent?

1 ... 9999

-98. DK
-99. RF
(EU-SILC)

WE308. How much annual rent did [you/he/she] pay for this land?

€0 ... €50,000

-98. DK
-99. RF
(EU-SILC)

IWER: SHOW CARD WE10

WE309. Please look at card WE10.

Please indicate what is the main enterprise or activity on [your/his/her] 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 WE10

WE310.

Please look at card WE10. Please indicate which other enterprises [you/he/she] [are/is] engaged in on [your/his/her] 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_95] |
| 96. No other enterprise | [we310_96] |
| 98. DK | [we310_98] |
| 99. RF | [we310_99] |
| (EU-SILC) | |

WE311.

[In the last two years] [Have/Has] [you/he/she] received any of these payments?

IWER: CODE ALL THAT APPLY

- | | | |
|---|--------------------|------------|
| 1. Single Farm Payment scheme | GO TO WE312 | [we311_01] |
| 2. Agricultural Environmental Options (AEOS) Scheme / Rural Environment Protection Scheme (REPS) scheme | GO TO WE313 | [we311_02] |
| 3. Special Area of Conservation (SAC) scheme | GO TO WE314 | [we311_03] |
| 96. None of these | GO TO WE315 | [we311_96] |
| 98. DK | GO TO WE315 | [we311_98] |
| 99. RF | GO TO WE315 | [we311_99] |
| (EU-SILC) | | |

IF (WE311_01=1) ASK WE312 OTHERS GO TO WE313

WE312. How much is [your/his/her] Net Single Farm Payment, i.e. after National Reserve and Modulation reduction?

€0 ... €100,000

-98. DK

-99. RF

(EU-SILC)

IF (WE311_02=1) ASK WE313 OTHERS GO TO WE314

WE313. How much did [you/he/she] receive in REPS/AEOS payments in the last year?

€0 ... €500,000

-98. DK

-99. RF

(EU-SILC)

IF (WE311_03=1) ASK WE314 OTHERS GO TO WE315

WE314. How much did [you/he/she] receive in non-REPS Special Area of Conservation (SAC) payment in last year?

€0 ... €500,000

-98. DK
-99. RF
(EU-SILC)

WE315. Before any tax and contributions, but after paying for any materials, equipment or goods that [you/he/she] [use/uses] in [your/his/her] work, what was the approximate income from [your/his/her] 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 ... €500,000 **GO TO WE317**

-98. DK **GO TO WE316**

-99. RF **GO TO WE316**

(EU-SILC)

IF (WE315 = -98, -99) ASK WE316 OTHERS GO TO WE317

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)

IF (WE201 = 1) ASK WE317 OTHERS GO TO WE401

WE317. [Do/Does] [you/he/she] have an off-farm job?

1. Yes **GO TO WE318**

5. No **GO TO WE318**

98. DK **GO TO WE321**

99. RF **GO TO WE321**

(EU-SILC)

IF (WE317 = 1, 5) ASK WE318 OTHERS GO TO WE321

WE318. How many weeks of full-time farm work (5 or more days of 8 or more hours) did [you/he/she] 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 WE321**

-99. RF **GO TO WE321**

(EU-SILC)

IF (WE318 ≠ 98, 99) ASK WE319 OTHERS GO TO WE321

WE319. For how many weeks did [you/he/she] 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/he/she] usually work?

0 ... 100

-98. DK

-99. RF

(EU-SILC)

BL: END OF MODULE - GO TO WE321

***IF (HH005 = 2,3,4,5 OR 6 - PROXY INTERVIEW) GO TO WE623**

IWER: SHOW CARD WE11

I am now going to read a statement people might use to describe their work. We would like to know if you feel like this about your farming job.

WE321: Please look at card WE11. All things considered I am satisfied with this job. Would you say you strongly agree, agree, disagree or strongly disagree?

1. Strongly agree
 2. Agree
 3. Disagree
 4. Strongly disagree
98. DK
99. RF
[SHARE]

IWER SHOWCARD WE12

IWER: Farm work can vary in the intensity of physical effort according to the type of farming that you are engaged in.

WE322: Please look at card WE12. Which of these best describes the work that [you/Rname] do[es] in [your/Rname's] main job?

1. Sedentary occupation: You spend most of your time sitting (such as in an office)
 2. Standing occupation: You spend most of your time standing or walking. However the way you spend your time does not require intense physical effort
 3. Physical work: This involves some physical effort including handling of heavy objects and use of tools
 4. Heavy manual work: This involves very vigorous physical activity including handling of very heavy objects
98. DK
99. RF
(ELSA)

BL: END OF SECTION - GO TO WE623

IF (WE001 = 4) ASK WE401 OTHERS GO TO WE501

11.7 Unemployed

WE401. In what year did [you/he/she] become unemployed?

YEAR (1900.. [current year])

-98. DK **GO TO WE403**

-99. RF **GO TO WE403**

(HRS)

IF (WE401 ≠ -98, -99) ASK WE402 OTHERS GO TO WE403

WE402. In what month did [you/he/she] become unemployed?

MONTH

1. January	8. August
2. February	9. September
3. March	10. October
4. April	11. November
5. May	12. December
6. June	98. DK
7. July	99. RF

(HRS)

IWER: SHOW CARD WE13

WE403. Please look at card WE13.

Would you tell us how [you/he/she] became unemployed? Was it

IWER: CODE THE ONE THAT APPLIES

1. Because [your/his/her] place of work or office closed

2. Because [you/he/she] resigned

3. Because [you/he/she] were laid off

4. By mutual agreement between [you/Rname] and [your/his/her] employer

5. Because a temporary job had been completed

95. Other reason

98. DK

99. RF

(SHARE)

WE404. [Have/Has] [you/he/she] 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)

IF (WE404 = 5) ASK WE405 OTHERS GO TO WE407

IWER: SHOW CARD WE14

WE405. Please look at card WE14. What is the main reason [you/he/she] [were/was] 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

IF (WE405 = 95) ASK WE406 OTHERS GO TO WE407

WE406. Other (specify)

[we405oth]

98. DK

99. RF

(HRS)

BL: GO TO WE623

IF (WE404 = 1) ASK WE407 OTHERS GO TO WE623

IWER; SHOW CARD WE15

WE407. Please look at card WE15. What are all of the things [you/he/she] [have/has] 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_95] |
| 98. DK GO TO WE410 | [we407_98] |
| 99. RF GO TO WE410 | [we407_99] |
| (HRS) | |

IF (WE407_95 = 1) ASK WE408 OTHERS GO TO WE409

WE408. Other (specify)

[we407oth]

98. DK

99. RF
(HRS)
BL:

IF (WE407_05,06 = 1) ASK WE409 OTHERS GO TO WE410

WE409. How many employers did [you/he/she] call, write to or visit in the last four weeks?

1...50
-98. DK
-99. RF
(HRS)

WE410. [Are/Is] [you/he/she] 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/he/she] would accept if a job was offered to [you/him/her]?

AMOUNT
€0...€10,000
-98. DK
-99. RF
(HRS)

WE412. [Are/Is] [you/he/she] available for work immediately (i.e. within two weeks)?

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

BL: GO TO WE623

11.8 Permanently sick or disabled

IF (Persister and WE001= 5 AND WE001FFW2 ≠ 5) then ask we501

If (New Wave 2 and WE001= 5 AND WE001FFW2 ≠ 5) then ask we501

If (New Wave 3 and WE001= 5) then ask we501

If (Re-contact and WE001= 5 AND WE001FFW1 ≠ 5) then ask we501

But if disabled/sick in most previous interview and we001==5 then ask we623

WE501. In what year did [you/he/she] become sick/disabled?

YEAR 1900.. [current year]

-98. DK **GO TO WE503**

-99. RF **GO TO WE503**

(HRS)

IF (WE501 ≠ -98, -99) ASK WE502 OTHERS GO TO WE503

WE502. In what month did [you/he/she] become sick/disabled?

MONTH

1. January	8. August
2. February	9. September
3. March	10. October
4. April	11. November
5. May	12. December
6. June	98. DK
7. July	99. RF

(HRS)

WE503. Was this illness caused by the working activities in [your/his/her] last job?

1. Yes

5. No

98. DK

99. RF

(SHARE)

BL: GO TO WE623

11.9 Retired

IF (Persister and WE001= 1 AND WE001FFW2 ≠ 1) then ask we601

If (New Wave 2 and WE001= 1 AND WE001FFW2 ≠ 1) then ask we601

If (New Wave 3 and WE001= 1) then ask we601

If (Re-contact and WE001= 1 AND WE001FFW1 ≠ 1) then ask we601

i.e. any change in we001 status go to we601

But if retired in most previous interview and we001==1 then ask we625

WE601. In what year did [you/he/she] retire?

YEAR

1950...[current year]

-98. DK **GO TO WE603**

-99. RF **GO TO WE603**

(HRS)

IF (WE601 != -98, -99) ASK WE602 OTHERS GO TO WE603

WE602. In what month did [you/he/she] 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

99. RF

(HRS)

WE603. Did [you/he/she] take early retirement, that is did [you/he/she] retire before the normal retirement age?

1 Yes **GO TO WE605**

5 No **GO TO WE604**

98. DK **GO TO WE609**

99. RF **GO TO WE609**

(ELSA)

IF (WE603 = 5) ASK WE604 OTHERS GO TO WE605

IWER: SHOW CARD WE16

WE604. Please look at card WE16.

What would [you/he/she] say was the main reason why [you/he/she] 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
95. Other reason (please specify)
98. DK
99. RF
- (SHARE)

[we604oth]

IF (WE603 = 1) ASK WE605 OTHERS GO TO WE609

IWER: SHOW CARD WE17

WE605. Please look at card WE17. What [were/was] [your/his/her] reasons for taking early retirement?

IWER: CODE ALL THAT APPLY

- | | |
|---|------------|
| 1 Own ill health GO TO WE609 | [we605_01] |
| 2 Ill health of a relative/friend GO TO WE609 | [we605_02] |
| 3 Made redundant/dismissed/had no choice GO TO WE609 | [we605_03] |
| 4 Offered early retirement incentive by employer GO TO WE607 | [we605_04] |
| 5 Could not find another job GO TO WE609 | [we605_05] |
| 6 To spend more time with partner/ family GO TO WE609 | [we605_06] |
| 7 To enjoy life while still young and fit enough GO TO WE609 | [we605_07] |
| 8 Fed up with job and wanted a change GO TO WE609 | [we605_08] |
| 9 To retire at the same time as husband/wife/partner GO TO WE609 | [we605_09] |
| 10 To give the young generation a chance GO TO WE609 | [we605_10] |
| 95. Other (specify) GO TO WE606 | [we605_95] |
| 98. DK GO TO WE609 | [we605_98] |
| 99. RF GO TO WE609 | [we605_99] |
| (ELSA) | |

IF (WE605_95 = 1) ASK WE606 OTHERS GO TO WE607

WE606. Other (specify)

[we605oth]

Text: up to 60 characters

98. DK

99. RF

(ELSA)

BL:

IF (WE605_04 = 1) ASK WE607 OTHERS GO TO WE609

WE607. How old [were/was] [you/he/she] when [you/he/she] 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)

[we608oth1]

95. Other (specify)

[we608oth2]

98. DK

99. RF

(HRS/TILDA)

WE609.

When [you/he/she] first retired, did [you/he/she] retire on a ...

1 .a full pension

2. a reduced pension

3. no pension?

98. DK

99. RF

(ELSA)

WE610. I'd like to ask some details about [your/Rname's] last job. In what year did [you/he/she] stop working at this job?

YEAR

1950... [current year]

-98. DK **GO TO WE612**

-99. RF **GO TO WE612**

(ELSA)

IF (WE610 ≠ -98, -99) ASK WE611 OTHERS GO TO WE612

WE611. In what month did [you/he/she] 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

99. RF

(ELSA)

WE612. For how many years had [you/he/she] been working in [your/his/her] last job before [you/he/she] left?

0...50

-98. DK

-99. RF

(SHARE)

WE613 . What was the title or name of [your/his/her] job?

IWER: IF PERSON HAS MORE THAN ONE JOB, CHOOSE THE ONE WHICH IS HIGHEST PAID. VERIFY THE SPELLING OF THE JOB TITLE & ASK FOR OCCUPATION RATHER THAN JUST COMPANY NAMES.

IWER: ASK FOR OCCUPATIONS RATHER THAN JUST THE PHRASE "SELF-EMPLOYED". WE WANT "SELF-EMPLOYED SOLICITOR", "SELF-EMPLOYED WINDOW CLEANER", ETC.;

Text: up to 60 characters

98. DK (GO TO WE624)

99. RF (GO TO WE624)

(TILDA)

WE613x

IWER: CODE WITHOUT ASKING:

Was the respondent a farm owner or manager?

1. Yes GO TO WE613b

5. No GO TO WE613a

WE613a:

IWER TO ALSO SELECT SOCIAL CLASS

(Social Class Categories)

1 Farm owner or manager

2 Professional workers

3 Managerial and technical

4 Non-manual

5 Skilled manual

6 Semi-skilled

7 Unskilled

8 Unable to classify

IF (WE613a = 1 (FARM OWNER / MANAGER)) ASK WE613b OTHERS GO TO WE624

We613b. What was the acreage of the farm?

NOTE: If the respondent is unsure ask them to round to the nearest 10 acres

1... 1000

-98. DK

-99. RF

IF (WE613b = 0...29) We613SC = 5 (semi-skilled)

IF (WE613b = 30...49) We613SC = 4 (skilled)

IF (WE613b = 50...99) We613SC = 3 (non-manual)

IF (WE613b = 100...199) We613SC = 2 (managerial and technical)

IF (WE613b = 200...1000) We613SC = 1 (professional workers)

We613SC

SET IN BACKGROUND – NOT ASKED

(Social Class Categories)

- 1 Professional workers
- 2 Managerial and technical
- 3 Non-manual
- 4 Skilled manual
- 5 Semi-skilled
- 6 Unskilled
- 7 Unable to classify

IWER: SHOW CARD WE18

WE624. Thinking of the last job you held before retiring [were/was] [you/he/she] working in ..

- 1 The public sector
- 2 A semi-state company
- 3 The Private sector as an employee
- 4 The Private sector as a self-employed person (e.g. as a partner in a practice or business, sole trader, director- shareholder)
95. Other
98. DK
99. RF

NOTE: Public sector includes: teaching in Dept. of Education supported schools, civil service, local authorities, health boards or HSE, emergency services, prison service or defence forces and non-commercial state bodies. Semi-state companies are commercial bodies like CIE, Bord na Mona, ESB etc.

IWER: SHOW CARD WE19

WE625: Please look at card WE19. Which of these best describes the work that [you/Rname] did in [your/Rname's] job before retiring?

1. Sedentary occupation: You spent most of your time sitting (such as in an office)
 2. Standing occupation: You spent most of your time standing or walking. However the way you spent your time does not require intense physical effort (e.g. shop assistant, hairdresser, security guard etc.)
 3. Physical work: This involved some physical effort including handling of heavy objects and use of tools (e.g. plumber, cleaner, nurse, sports instructor, electrician, carpenter etc.)
 4. Heavy manual work: This involved very vigorous physical activity including handling of very heavy objects (e.g. docker, miner, bricklayer, construction worker etc.)
 98. DK
 99. RF
- (ELSA)

WE626: [Were you/Was Rname] a member of a trade union or a staff association?

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

(UK LABOUR FORCE SURVEY)

WE627: [if we626=2 then add "Nevertheless"] **Did agreements between a trade union and [your/his/her] employer affect [your/Rname's] pay, conditions or pensions?**

1. Yes

5. No

98. DK

99. RF

(UK LABOUR FORCE SURVEY)

WE628: Did the organization you worked for provide a group health insurance plan and did you avail of it?

1. No health insurance plan available.

2. Yes, plan was available but I opted out of the plan.

3. Yes, plan was available and I joined the plan.

4. Yes, plan was available and was mandatory.

(TILDA)

98. DK

99. RF

~~IF (WE001ff = 1 & WE610ff < 2002) GO TO WE621~~

~~IF (WE001ff = 1 & WE610ff >= 2002) GO TO WE623~~

IF (W2WE001 ≠ 1) ASK WE615 if W2we001==1 GO TO WE623

IF (Persister and WE001= 1 AND WE001FFW2 ≠ 1) then ask we615 (i.e. newly retired)

If (New Wave 2 and WE001= 1 AND WE001FFW2 ≠ 1) then ask we615

If (New Wave 3 and WE001= 1) then ask we615

If (Re-contact and WE001= 1 AND WE001FFW1 ≠ 1) then ask we615

i.e. any change in we001 status go to we615

But if retired in most previous interview and we001==1 then we623 (i.e. retired now and retired last time)

WE615. Could you please tell me, was this

1. A permanent job

2. A temporary job

3. An occasional work without a contract

4. Another working arrangement

98. DK

99. RF

(TILDA)

WE616. How many hours a week did [you/he/she] usually work in this job, excluding meal breaks or any paid or unpaid overtime?

0.0..168.0

-98. DK

-99. RF

(TILDA)

IWER: SHOW CARD WE20

WE618.

Please look at card WE20. About how many people (including [yourself/Rname]) were employed at the place where [you/he/she] 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/he/she] 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)

IF (WE619 = 1) ASK WE620 OTHERS GO TO WE621

IWER: SHOW CARD WE20

WE620. About how many people [were/was] [you/he/she] 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.

Then READ:

THEN IW READS TO ALL:

What was the total net salary/wage (i.e. after deductions at source and excluding expense refunds) [you/he/she] received in the last year [you/he/she] worked in this job?

1000 ... 1,000,000 **GO TO WE622x**

-98. DK **GO TO WE622**

-99. RF **GO TO WE622**

(TILDA)

IF (WE621 = -98, -99) ASK WE622 OTHERS GO TO WE622x

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

IWER: CODE OR ASK IF UNSURE

WE622x. Was this amount in...

1. Euros?
2. Punts?
98. DK
99. RF

IF (HH005 = 1) ASK WE623 OTHERS GO TO NEXT SECTION

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**

SECTION 12. JOB HISTORY (JH)

we004==5 skip to next section otherwise continue (i.e. if person has never done paid work, skip to next section)

JH101. [if persister, new wave 2 or recontact.. "Now I would like to confirm some of the information we collected when we last interviewed [you/Rname"] about [your/his/her] job history.] At what age did [you/he/she] start [your/his/her] first regular job or business? (after [you/he/she] first left full-time education)

8 ... 65

-98. DK

-99. RF (EU-SILC)

JH110:

SEE showcard JH1

Think about [your/his/her] first job after [you/he/she] left full-time education. In [your/his/her] first job, [were/was] [you/he/she] working in ..

1. The public sector (including working in schools, colleges, ITs, universities, the civil service, local authorities, hospitals, health boards or HSE, emergency services, prison service or defence forces)

2. A semi-state company

3. The Private sector as an employee

4. The Private sector as a self-employed person (e.g. as a partner in a practice or business, sole trader, director- shareholder)

5. Farming

95. Other

98. DK

99. REF

(TILDA)

IF JH110=3,4,5,98,99 GO TO JH112

IF JH110=1,2 GO TO JH111

JH111: In which sector was this job?

1. Local and Public Administration

2. Armed forces

3. Garda

4. Public education

5. Higher education and research in a public institution

6. Health Service

95. Other public sector

98. DK

99. REF

(TILDA)

JH112: What was the name or title of [your/his/her] occupation in this first job?

IWER: to record verbatim

(TILDA)

98. DK

99. RF

IF gd002=1 (male) go to next section

IF gd002=2 (female) & CS006≠3 (i.e. single, never married), go to next section

IF gd002=2 (female) & CS006==2 & CS060==5 (i.e. cohabiting and never married previously), go to next section

IF gd002=2 (female) & cs006==1, 4,5 or 6, GO TO JH114 [i.e. married at some point] GO TO JH114

IF gd002=2 (female) & cs006==2 & cs060==1 [cohabiting, but married at some point in the past], GO TO JH114

JH114: Did [you/he/she] have to leave a job because of the marriage bar?

IWER: Explain what the marriage bar was if the respondents doesn't know.

1. YES

5. NO

98: DK

99: REF

(TILDA)

IF JH114=5,98,99 GO TO THE NEXT SECTION

IF JH114=1 GO TO JH115

JH115: Was the job that [you/he/she] had to leave, the first job that [you/he/she] had that we just discussed?

1. YES

5. NO

98. DK

99. REF

(TILDA)

IF JH115=1,98,99 GO TO JH119

IF JH115=5 GO TO JH116

JH116:

SEE showcard JH1

Think about the job [you/he/she] left because of the marriage bar. In that job, [were/was] [you/she/he] working in ..

1. The public sector (including working in schools, colleges, ITs, universities, the civil service, local authorities, hospitals, health boards or HSE, emergency services, prison service or defence forces)

2. A semi-state company

3. The Private sector as an employee

4. The Private sector as a self-employed person (e.g. as a partner in a practice or business, sole trader, director- shareholder)

5. Farming

95. Other

98. DK

99. REF

(TILDA)

IF JH116=3,4,5,6,98,99 GO TO JH118

IF JH116=1,2 GO TO JH117

JH117: In which sector was this job?

- 1. Local and Public Administration
- 2. Armed forces
- 3. Garda
- 4. Public education
- 5. Higher education and research in a public institution
- 6. Health Service
- 95. Other public sector
- 98. DK
- 99. REF
- (TILDA)

JH118: What was the name or title of [your/his/her] occupation in this job?

IWER: to record verbatim

- 98. DK
- 99. RF

JH119: Did [you/he/she] ever return to full-time employment after leaving this job?

- 1. YES
- 5. NO
- 98. DK
- 99. REF
- (TILDA)

IF JH119=5,98,99, GO TO NEXT SECTION

IF JH119=1 GO TO JH120

JH120: In which year did [you/he/she] return to full time employment after leaving this job?

- .. YEAR
- 98. DK
- 99. REF
- (TILDA)

JH121:

SEE showcard JH1

If [you/he/she] returned to work after the marriage bar, in which sector was this job?

- 1. The public sector (including working in schools, colleges, ITs, universities, the civil service, local authorities, hospitals, health boards or HSE, emergency services, prison service or defence forces)
- 2. A semi-state company
- 3. The Private sector as an employee
- 4. The Private sector as a self-employed person (e.g. as a partner in a practice or business, sole trader, director- shareholder)
- 5. Farming
- 95. Other
- 98. DK
- 99. REF
- (TILDA)

JH122: What was the name or title of [your/his/her] occupation in job [you/he/she] had after [you/she/he] returned to work after the marriage bar?

IWER: to record verbatim

98. DK

99. RF

(TILDA)

IF (HH005 = 1) ASK JH107 OTHERS GO TO NEXT SECTION

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 NEXT SECTION

SECTION 13. PLANNING FOR RETIREMENT (WR)

***IF (HH005 = 2,3,4,5 or 6 - PROXY INTERVIEW) GO TO NEXT SECTION.**

IF WE001=1 (RETIRED) – GO TO NEXT SECTION

IF WE001= 5, 6, 95, 98, 99 (SICK, FAMILY, OTHER, DK, REFUSED) – GO TO WR301

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

-96. 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

INTERVIEWER: The next questions are about pension arrangements you might have *other* than state pensions. First, we would like to learn more about what type of pension plans or retirement saving plans you may have that are connected to your current job.

WR002: Are you

1. a member of an occupational pension scheme organised by your current employer (including public sector employers)?

IF WE149=1 or 2 GO TO WR201

IF WE149=3 GO TO WR101

IF WE149=4 GO TO WR302

IF WE149=98,99 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 WR301

99. RF GO TO WR301

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 - By this I mean voluntary contributions you made in addition to any compulsory contributions). (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 WR004OTH**

98. DK

99. RF

(ELSA)

BL: IF WR004=1, 2, 3, 98, 99 – GO TO WR401

WR004OTH. 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 - By this I mean voluntary contributions you made in addition to any compulsory contributions.)
(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 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 WR007OTH**

98. DK

99. RF

(TILDA)

BL: IF WR007=1, 2, 3, 4, 5, 6, 98, 99 – GO TO WR401

WR007OTH. Other (specify)

Text: up to 60 characters

98. DK

99. RF

(EU-SILC)

BL: GO TO WR401

13.1 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 your (former) employer or of the scheme trustees
5. Your 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 IN EUROS

€0 ... €10,000 **GO TO WR111**

-98. DK **GO TO WR155**

-99. RF **GO TO WR155**

(ELSA)

IF (WR109=-98 OR -99) ASK WR155 THEN GO TO WR111

WR155: Did it amount to a total of less than _____, more than _____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500

-98. DK

-99. RF

WR110: **IWER:** ENTER PERCENTAGE OF SALARY

1 ... 50%

-98. DK **GO TO WR156**

-99. RF **GO TO WR156**

(ELSA)

IF (WR110=-98 OR -99) ASK WR156

WR156: **Did it amount to a total of less than ____ , more than ____ , or what?**

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

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 IN EUROS

€0 ... €10,000 **GO TO WR114**

-98. DK **GO TO WR157**

-99. RF **GO TO WR157**

(ELSA)

IF (WR112=-98 OR -99) ASK WR157 then go to WR114

WR157: **Did it amount to a total of less than ____ , more than ____ , or what?**

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500

98. DK

99. RF

WR113: **IWER:** ENTER PERCENTAGE OF SALARY

1 ... 50%

-98. DK **GO TO WR158**

-99. RF **GO TO WR158**

(ELSA)

IF (WR113=-98 OR -99) ASK WR158

WR158: **Did it amount to a total of less than ____ , more than ____ , or what?**

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

WR114: **In the past 12 months, did you make any Additional Voluntary Contributions (AVCs)?**

(By this I mean voluntary contributions you made in addition to any compulsory contributions.)

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 WR159**

99. RF **GO TO WR118**

(ELSA)

WR116: **IWER:** ENTER AMOUNT IN EUROS

€0 ... €10,000 **GO TO WR118**

-98. DK **GO TO WR159**

-99. RF **GO TO WR159**

(ELSA)

IF (WR159=-98 OR -99) ASK WR159 THEN GO TO WR118

WR159: Did it amount to a total of less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1000, €5000, €10,000

-98. DK

-99. RF

WR117: **IWER:** ENTER PERCENTAGE OF ANNUAL SALARY

1 ... 50%

-98. DK **GO TO WR160**

-99. RF **GO TO WR160**

(ELSA)

IF (WR117=-98 OR -99) ASK WR160

WR160: Did it amount to a total of less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 10%, 20%, 30%, 40%

-98. DK

-99. RF

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 **GO TO WR161**

-99. RF **GO TO WR161**

IF (WR119=-98 OR -99) ASK WR161

WR161: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €10,000, €50,000, €100,000, €500,000

-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 WR163**

99. RF **GO TO WR124**

(ELSA/TILDA)

WR122: IWER: ENTER PERCENTAGE OF SALARY

1 ... 80% **GO TO WR128**

-98. DK **GO TO WR162**

-99. RF **GO TO WR162**

(ELSA)

IF (WR122=-98 OR -99) ASK WR162 THEN GO TO WR128

WR162: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR123: **IWER:** ENTER MONTHLY AMOUNT IN EUROS
€0 ... €10,000 **GO TO WR128**
-98. DK **GO TO WR163**
-99. RF **GO TO WR163**
(ELSA)

IF (WR123=-98 OR -99) ASK WR163 THEN GO TO WR128
WR163: Is it less than ____ , more than ____ , or what?
PROCEDURES: 2Up1Down, 1Up2Down
BREAKPOINTS: €250, €500, €750, €1000
-98. DK
-99. RF

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 **GO TO WR164**
-99. RF **GO TO WR164**
(ELSA)

IF (WR124=-98 OR -99) ASK WR164
WR164: Is it less than ____ , more than ____ , or what?
PROCEDURES: 2Up1Down, 1Up2Down
BREAKPOINTS: €5,000, €10,000, €50,000, €100,000
-98. DK
-99. RF

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 WR166**
99. RF **GO TO WR128**
(ELSA/TILDA)

WR126: **IWER:** ENTER PERCENTAGE OF SALARY
1 ... 100% **GO TO WR128**
-98. DK **GO TO WR165**
-99. RF **GO TO WR165**
(ELSA)

IF (WR126=-98 OR -99) ASK WR165 THEN GO TO WR128
WR165: Is it less than ____ , more than ____ , or what?
PROCEDURES: 2Up1Down, 1Up2Down
BREAKPOINTS: 20%, 40%, 60%, 80%
-98. DK
-99. RF

WR127: **IWER:** ENTER MONTHLY AMOUNT IN EUROS

€0 ... €10,000

-98. DK **GO TO WR166**

-99. RF **GO TO WR166**

(ELSA)

IF (WR127=-98 OR -99) ASK WR166

WR166: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

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 WR168**

99. RF **GO TO WR133**

(ELSA)

WR131: IWER: ENTER AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR133**

-98. DK **GO TO WR167**

-99. RF **GO TO WR167**

(ELSA)

IF (WR131=-98 OR -99) ASK WR167 THEN GO TO WR133

WR167: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500.

-98. DK

-99. RF

WR132: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50%

-98. DK **GO TO WR168**

-99. RF **GO TO WR168**

(ELSA)

IF (WR132=-98 OR -99) ASK WR168

WR168: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

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 WR170**

99. RF **GO TO WR136**

(ELSA)

WR134: IWER: ENTER AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR136**

-98. DK **GO TO WR169**

-99. RF **GO TO WR169**

(ELSA)

IF (WR134=-98 OR -99) ASK WR169 THEN GO TO WR136

WR169: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500.

-98. DK

-99. RF

WR135: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50%

-98. DK **GO TO WR170**

-99. RF **GO TO WR170**

(ELSA)

IF (WR135=-98 OR -99) ASK WR170

WR170: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

WR136: In the past 12 months, did you make any Additional Voluntary Contributions? (AVCs):

(By this I mean voluntary contributions you made in addition to any compulsory contributions.)

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 WR171**

99. RF **GO TO WR140**

(ELSA)

WR138: IWER: ENTER AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR140**

-98. DK **GO TO WR171**

-99. RF **GO TO WR171**

(ELSA)

IF (WR138=-98 OR -99) ASK WR171 THEN GO TO WR140

WR171: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1000, €5000, €10,000

-98. DK

-99. RF

WR139: IWER: ENTER PERCENTAGE OF ANNUAL SALARY

1 ... 50%

-98. DK **GO TO WR172**

-99. RF **GO TO WR172**

(ELSA)

IF (WR139=-98 OR -99) ASK WR172

WR172: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 10%, 20%, 30%, 40%

-98. DK

-99. RF

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 LATEST PENSION STATEMENT TO RESPOND TO THIS QUESTION, IF POSSIBLE.

€0 ... €5,000,000

-98. DK **GO TO WR173**

-99. RF **GO TO WR173**

(ELSA)

IF (WR141=-98 OR -99) ASK WR173

WR173: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €10,000, €50,000, €100,000, €500,000

-98. DK

-99. RF

WR142: Which of these best describes how your pension will be calculated?

IWER: CODE THE ONE THAT APPLIES

1 Some fraction of your final year's salary

2 Some fraction of your salary averaged over all the years I have been in the scheme

3 Some fraction of your last five years salary

95 Other (specify) **GO TO WR142OTH**

98. DK

99. RF

(ELSA)

GO TO WR146

WR142OTH: 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 WR150**
99. RF **GO TO WR150**
(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 WR174**
-99. RF **GO TO WR174**
(ELSA)

IF (WR148=-98 OR -99) ASK WR174 THEN GO TO WR154

WR174: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

- 98. DK
-99. RF

WR149: **IWER:** ENTER MONTHLY AMOUNT IN EUROS

- €0 ... €100,000 **GO TO WR154**
-98. DK **GO TO WR175**
-99. RF **GO TO WR175**
(ELSA)

IF (WR149=-98 OR -99) ASK WR175 THEN GO TO WR154

WR175: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

- 98. DK
-99. RF

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 **GO TO WR176**
-99. RF **GO TO WR176**
(ELSA)

IF (WR150=-98 OR -99) ASK WR176

WR176: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €5,000, €10,000, €50,000, €100,000

-98. DK

-99. RF

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 WR177**

-99. RF **GO TO WR177**

(ELSA)

IF (WR152=-98 OR -99) ASK WR177 THEN GO TO WR154

WR177: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR153: IWER: ENTER MONTHLY AMOUNT IN EUROS

€0 ... €100,000

-98. DK **GO TO WR178**

-99. RF **GO TO WR178**

(ELSA)

IF (WR153=-98 OR -99) ASK WR178 THEN GO TO WR154

WR178: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

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

13.2 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 WR202OTH**

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

WR202OTH: **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?

(By this I mean voluntary contributions you made in addition to any compulsory contributions.)

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 WR242**

99. RF **GO TO WR208**

(ELSA)

WR206: IWER: ENTER AMOUNT IN EUROS

€0 ... €1,000,000 **GO TO WR208**

-98. DK **GO TO WR242**

-99. RF **GO TO WR242**

(ELSA)

IF (WR206=-98 OR -99) ASK WR242 then go to WR208

WR242: Is it less than _____, more than _____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1000, €5000, €10,000

-98. DK

-99. RF

WR207: IWER: ENTER PERCENTAGE OF ANNUAL SALARY

1 ... 50% **GO TO WR208**

-98. DK **GO TO WR243**

-99. RF **GO TO WR243**

(ELSA)

IF (WR207=-98 OR -99) ASK WR243

WR243: Is it less than _____, more than _____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 10%, 20%, 30%, 40%

-98. DK

-99. RF

WR208: How much, in euros, do you expect to receive as a lump sum payment from this pension scheme when you retire?

€0 ... €5,000,000 **GO TO WR209**

-98. DK **GO TO WR244**

-99. RF **GO TO WR244**

(ELSA)

IF (WR208=-98 OR -99) ASK WR244

WR244: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €5,000, €10,000, €50,000, €100,000

-98. DK

-99. RF

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 WR245**

99. RF **GO TO WR241**

(ELSA/TILDA)

WR210: IWER: ENTER PERCENTAGE OF SALARY

1 ... 80% **GO TO WR241**

-98. DK **GO TO WR245**

-99. RF **GO TO WR245**

(ELSA)

IF (WR210=-98 OR -99) ASK WR245 then to WR241

WR245: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR211: IWER: ENTER MONTHLY AMOUNT IN EUROS

€0 ... €100,000 **GO TO WR241**

-98. DK **GO TO WR246**

-99. RF **GO TO WR246**

(ELSA)

IF (WR211=-98 OR -99) ASK WR246 then go to WR241

WR246: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

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?

(By this I mean voluntary contributions you made in addition to any compulsory contributions.)

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 WR247**

99. RF **GO TO WR219**

(ELSA)

WR217: IWER: ENTER AMOUNT IN EUROS

€0 ... €500,000 **GO TO WR219**

-98. DK **GO TO WR247**

-99. RF **GO TO WR247**

(ELSA)

IF (WR217=-98 OR -99) ASK WR247 then go to wr219

WR247: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1000, €5000, €10,000

-98. DK

-99. RF

WR218: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR219**

-98. DK **GO TO WR248**

-99. RF **GO TO WR248**

(ELSA)

IF (WR218=-98 OR -99) ASK WR248

WR248: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 10%, 20%, 30%, 40%

-98. DK

-99. RF

WR219: How much do you expect to receive as a lump sum payment from this pension scheme when you retire?

€0 ... €5,000,000 **GO TO WR220**

-98. DK **GO TO WR249**
-99. RF **GO TO WR249**
(ELSA)

IF (WR219=-98 OR -99) ASK WR249

WR249: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €5,000, €10,000, €50,000, €100,000

-98. DK

-99. RF

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 WR241**

99. RF **GO TO WR241**

(ELSA/TILDA)

WR221: IWER: ENTER PERCENTAGE OF SALARY

1... 80% **GO TO WR241**

-98. DK **GO TO WR250**

-99. RF **GO TO WR250**

(ELSA)

IF (WR221=-98 OR -99) ASK WR250 then go to wr241

WR250: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR222: IWER: ENTER MONTHLY AMOUNT IN EUROS

€0 ... €100,000 **GO TO WR241**

-98. DK **GO TO WR251**

-99. RF **GO TO WR251**

(ELSA)

IF (WR222=-98 OR -99) ASK WR251 then go to wr241

WR251: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

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 WR252**

99. RF **GO TO WR229**

(ELSA)

WR227: **IWER:** ENTER AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR229**

-98. DK **GO TO WR252**

-99. RF **GO TO WR252**

(ELSA)

IF (WR227=-98 OR -99) ASK WR252 then go to wr229

WR252: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500

-98. DK

-99. RF

WR228: **IWER:** ENTER PERCENTAGE OF SALARY

1 ... 50%

-98. DK **GO TO WR253**

-99. RF **GO TO WR253**

(ELSA)

IF (WR228=-98 OR -99) ASK WR253

WR253: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

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?**

(By this I mean voluntary contributions you made in addition to any compulsory contributions.)

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 WR254**
- 99. RF **GO TO WR233**
(ELSA)

WR231: **IWER: ENTER AMOUNT IN EUROS**

€0 ... €1,000,000 **GO TO WR233**

- 98. DK **GO TO WR254**
- 99. RF **GO TO WR254**
(ELSA)

IF (WR231=-98 OR -99) ASK WR254 then go to wr233

WR254: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €500, €1000, €5000, €10,000

- 98. DK
- 99. RF

WR232: **IWER: ENTER PERCENTAGE OF ANNUAL SALARY**

1 ... 50% **GO TO WR233**

- 98. DK **GO TO WR255**
- 99. RF **GO TO WR255**
(ELSA)

IF (WR232=-98 OR -99) ASK WR255

WR255: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 10%, 20%, 30%, 40%

- 98. DK
- 99. RF

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 WR256**

-99. RF **GO TO WR256**

(ELSA)

IF (WR235=-98 OR -99) ASK WR256 then go to wr241

WR256: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR236: **IWER:** ENTER MONTHLY AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR241**

-98. DK **GO TO WR257**

-99. RF **GO TO WR257**

(ELSA)

IF (WR236=-98 OR -99) ASK WR257 then go to wr241

WR257: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

WR237: **How much do you expect to receive as a lump sum payment from this pension scheme when you retire? GO TO WR238**

€0 ... €5,000,000

-98. DK **GO TO WR258**

-99. RF **GO TO WR258**

(ELSA)

IF (WR237=-98 OR -99) ASK WR258

WR258: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €5,000, €10,000, €50,000, €100,000

-98. DK

-99. RF

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 WR260**

99. RF **GO TO WR241**

(ELSA/TILDA)

WR239: **IWER:** ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR241**

-98. DK **GO TO WR259**

-99. RF **GO TO WR259**

(ELSA)

IF (WR239=-98 OR -99) ASK WR259 then go to wr241

WR259: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR240: **IWER:** ENTER MONTHLY AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR241**

-98. DK **GO TO WR260**

-99. RF **GO TO WR260**

(ELSA)

IF (WR240=-98 OR -99) ASK WR260

WR260: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

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

13.3 PRSA

INTERVIEWER: The next questions are about pension arrangements you might have *other* than state pensions.

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**

Note: PRSA is a retirement saving product for employees, self-employed, homemakers, carers, unemployed and any other category of person-
(TILDA)

WR302: **What is the name of your PRSA policy and provider?**

Text: up to 200 characters

98. DK

99. RF

(TILDA)

IF WE001 = 3,4,5,6,7,95,98,99 (SELF-EMPLOYED, UNEMPLOYED, PERMANENTLY SICK OR DISABLED, LOOKING AFTER HOME OF FAMILY, IN EDUCATION OR TRAINING, OTHER, DK, REFUSED) 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 WR327**

99. RF **GO TO WR307**

(ELSA)

WR305: **IWER:** ENTER AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR307**

-98. DK **GO TO WR326**

-99. RF **GO TO WR326**

(ELSA)

IF (WR305=-98 OR -99) ASK WR326 THEN GO TO WR307

WR326: Is it less than _____, more than _____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500

-98. DK

-99. RF

WR306: **IWER:** ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR307**

-98. DK **GO TO WR327**

-99. RF **GO TO WR327**

(ELSA)

IF (WR306=-98 OR -99) ASK WR327

WR327: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

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 WR328**

99. RF **GO TO WR310**

(ELSA)

WR308: **IWER:** ENTER AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR310**

-98. DK **GO TO WR328**

-99. RF **GO TO WR328**

(ELSA)

IF (WR308=-98 OR -99) ASK WR328 THEN GO TO WR310

WR328: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500

-98. DK

-99. RF

WR309: **IWER:** ENTER PERCENTAGE OF SALARY

150% **GO TO WR310**

-98. DK **GO TO WR329**

-99. RF **GO TO WR329**

(ELSA)

IF (WR309=-98 OR -99) ASK WR329

WR329: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

WR310: **For how many years have you been contributing to this PRSA?**

NUMBER OF YEARS

0 ... 30

-98. DK

-99. RF

GO TO WR311

(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 **GO TO WR312**

-98. DK **GO TO WR330**

-99. RF **GO TO WR330**

(HRS)

IF (WR311=-98 OR -99) ASK WR330

WR330: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €10,000, €50,000, €100,000, €500,000

-98. DK

-99. RF

WR312: In normal conditions, at what age will you be able to withdraw funds from your PRSA policy?

30 ... 80

-98. DK

-99. RF

GO TO WR313

(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**

GO TO WR314

(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

GO TO WR315

(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 WR315OTH**
98. DK **GO TO WR317**
99. RF **GO TO WR317**
(HRS)

WR315OTH: **Other (specify)**

Text: up to 60 characters

98. DK

99. RF

GO TO WR317

(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 WR318**
99. RF **GO TO WR318**
(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 WR332**

99. RF **GO TO WR325**

(ELSA/TILDA)

WR319: **IWER:** ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR325**

-98. DK **GO TO WR331**

-99. RF **GO TO WR331**

(ELSA)

IF (WR319=-98 OR -99) ASK WR331 THEN GO TO wr325

WR331: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR320: **IWER:** ENTER MONTHLY AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR325**

-98. DK **GO TO WR332**

-99. RF **GO TO WR332**

(ELSA)

IF (WR320=-98 OR -99) ASK WR332 THEN GO TO wr325

WR332: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

WR321: How much do you expect to receive as a lump sum payment from this PRSA when you retire? €0 ... €5,000,000 GO TO WR322

-98. DK **GO TO WR333**

-99. RF **GO TO WR333**

(ELSA)

IF (WR321=-98 OR -99) ASK WR333

WR333: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €5,000, €10,000, €50,000, €100,000

-98. DK

-99. RF

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 WR335**

99. RF **GO TO WR325**

(ELSA/TILDA)

WR323: IWER: ENTER PERCENTAGE OF SALARY

1 ... 50% **GO TO WR325**

-98. DK **GO TO WR334**

-99. RF **GO TO WR334**

(ELSA)

IF (WR323=-98 OR -99) ASK WR334 THEN GO TO GO TO WR325

WR334: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR324: IWER: ENTER MONTHLY AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR325**

-98. DK **GO TO WR335**

-99. RF **GO TO WR335**

(ELSA)

IF (WR324=-98 OR -99) ASK WR335 THEN GO TO GO TO WR325

WR335: Is it less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

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

13.4 Personal pension plan

WR401: **Do you currently pay into one or more private pension plans or annuities (other than those we have already covered)?**

- 1. Yes **GO TO WR402**
- 5. No **GO TO WR427**
- 98. DK **GO TO WR427**
- 99. RF **GO TO WR427**

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 RF 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 TO FOR THE LONGEST NUMBER OF YEARS OR WITH THE LARGEST ACCUMULATED FUND

Text: up to 200 characters

[wr403_01 to wr403_10]

98. DK

99. RF (TILDA)

BL: IF WE001 = 3,4,5,6,7,95,98,99 (SELF-EMPLOYED, UNEMPLOYED, PERMANENTLY SICK OR DISABLED, LOOKING AFTER HOME OR FAMILY, IN EDUCATION OR TRAINING, OTHER, DK, REFUSED) GO TO WR408

WR404: **Does your employer contribute to this private pension plan/annuity?**

1. Yes **GO TO WR405**

[wr404_01 to wr404_10]

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?**

[wr405_01 to wr405_10]

IWER: CODE HOW ANSWER IS GIVEN

1 Amount **GO TO WR406**

2 Percentage of salary **GO TO WR407**

98. DK **GO TO WR432**

99. RF **GO TO WR408**

(ELSA)

WR406: **IWER:** ENTER AMOUNT IN EUROS

[wr406_01 to wr406_10]

€0 ... €50,000 **GO TO WR408**

-98. DK **GO TO WR431**
-99. RF **GO TO WR431**
(ELSA)

IF (WR406=-98 OR -99) ASK WR431 THEN GO TO wr408

WR431: Is it less than _____ , more than _____ , or what?

[wr431_01 to wr431_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500

-98. DK

-99. RF

WR407: **IWER: ENTER PERCENTAGE OF SALARY**

[wr407_01 to wr407_10]

1 ... 50% **GO TO WR408**

-98. DK **GO TO WR432**

-99. RF **GO TO WR432**

(ELSA)

IF (WR407=-98 OR -99) ASK WR432

WR432: Is it less than _____ , more than _____ , or what?

[wr432_01 to wr432_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

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.

[wr408_01 to wr408_10]

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 IN EUROS**

[wr409_01 to wr409_10]

€0 ... €50,000 **GO TO WR411**

-98. DK **GO TO WR433**

-99. RF **GO TO WR433**

(ELSA)

IF (WR409=-98 OR -99) ASK WR433 THEN GO TO WR411

WR433: Is it less than _____ , more than _____ , or what?

[wr433_01 to wr433_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €50, €100, €250, €500

-98. DK

-99. RF

WR410: **IWER: ENTER PERCENTAGE OF SALARY**

[wr410_01 to wr410_10]

1 ... 50% **GO TO WR411**

-98. DK **GO TO WR434**
-99. RF **GO TO WR434**
(ELSA)

IF (WR410=-98 OR -99) ASK WR434

WR434: Is it less than _____ , more than _____ , or what? [wr434_01 to wr434_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 2.5%, 5%, 7.5%, 10%

-98. DK

-99. RF

WR411: For how many years have you been contributing to this private pension plan/annuity?

NUMBER OF YEARS [wr411_01 to wr411_10]

0 ... 50

-98. DK

-99. RF

(SHARE)

WR412: What is the value in euros 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 [wr412_01 to wr412_10]

-98. DK **GO TO WR435**

-99. RF **GO TO WR435**

IF (WR412=-98 OR -99) ASK WR435

WR435: Is it less than _____ , more than _____ , or what? [wr435_01 to wr435_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €10,000, €50,000, €100,000, €500,000

-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?

[wr413_01 to wr413_10]

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** [wr414_01 to wr414_10]

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 [wr415_01 to wr415_10]

-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? [wr416_01 to wr416_10]

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 WR416OTH**
- 98. DK **GO TO WR418**
- 99. RF **GO TO WR418**
(HRS)

WR416OTH: Other (specify) [wr416oth_01 to wr416oth_10]

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? [wr418_01 to wr418_10]

- 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 WR422**
- 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? [wr419_01 to wr419_10]

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 WR437**
- 99. RF **GO TO WR426**
(ELSA/TILDA)

WR420: IWER: ENTER PERCENTAGE OF SALARY [wr420_01 to wr420_10]

- 1 ... 80% **GO TO WR426**
- 98. DK **GO TO WR436**
- 99. RF **GO TO WR436**
(ELSA)

IF (WR420=-98 OR -99) ASK WR436 THEN GO TO WR426

WR436: Is it less than ____ , more than ____ , or what?

[wr436_01 to wr436_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR421: IWER: ENTER MONTHLY AMOUNT IN EUROS

[wr421_01 to wr421_10]

€0 ... €50,000 **GO TO WR426**

-98. DK **GO TO WR437**

-99. RF **GO TO WR437**

(ELSA)

IF (WR421=-98 OR -99) ASK WR437

WR437: Is it less than ____ , more than ____ , or what?

[wr437_01 to wr437_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

WR422: How much do you expect to receive in euros as a lump sum payment from this private pension when you retire? **GO TO WR423**

[wr422_01 to wr422_10]

€0 ... €5,000,000

-98. DK **GO TO WR438**

-99. RF **GO TO WR438**

(ELSA)

IF (WR422=-98 OR -99) ASK WR438

WR438: Is it less than ____ , more than ____ , or what?

[wr438_01 to wr438_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €5,000, €10,000, €50,000, €100,000

-98. DK

-99. RF

WR423: When you retire, before any tax deductions, how much do you expect to receive each month from this pension?

[wr423_01 to wr423_10]

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 WR440**

99. RF **GO TO WR426**

(ELSA/TILDA)

WR424: IWER: ENTER PERCENTAGE OF SALARY

[wr424_01 to wr424_10]

1 ... 80% **GO TO WR426**

-98. DK **GO TO WR439**

-99. RF **GO TO WR439**

(ELSA)

IF (WR424=-98 OR -99) ASK WR439 THEN GO TO wr426

WR439: Is it less than ____ , more than ____ , or what?

[wr439_01 to wr439_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR425: IWER: ENTER MONTHLY AMOUNT IN EUROS

[wr425_01 to wr425_10]

€0 ... €50,000 **GO TO WR426**

-98. DK **GO TO WR440**

-99. RF **GO TO WR440**

(ELSA)

IF (WR425=-98 OR -99) ASK WR440

WR440: Is it less than ____ , more than ____ , or what?

[wr440_01 to wr440_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

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:

[wr426_01 to wr426_10]

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)

NOW ASK WR403-WR426 FOR THE NEXT PRIVATE PENSION

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 WR446**

5. No **GO TO WR430**

98. DK **GO TO WR430**

99. RF **GO TO WR430**

WR446: Thinking of the pensions you are entitled to from previous employments, how many pensions are you entitled to?

1....10 **GO TO WR447**

-98. DK **GO TO WR428**

-99. RF **GO TO WR428**

(TILDA)

BL: REPEAT WR447 AND WR448 FOR EACH PENSION MENTIONED IN WR446

WR447: For how many years have you contributed to the [first/second/third/etc.] pension from your previous employer?

NUMBER OF YEARS

0 65

[WR447_01 TO WR447_10]

-98. DK

-99. RF

(TILDA)

WR448: Did this pension arise from employment in the public sector?

1. Yes

[WR448_01 TO WR448_10]

5. No

98. DK

99. RF

(TILDA)

WR428: Now thinking of all the pensions you are entitled to from previous employments. How much do you expect to receive in euros as a lump sum payment from these pensions when you retire?

€0 ... €100,000,000 GO TO WR429

-98. DK GO TO WR441

-99. RF GO TO WR441

(TILDA)

IF (WR428=-98 OR -99) ASK WR441

WR441: Is it less than _____, more than _____, or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €5,000, €10,000, €50,000, €100,000

-98. DK

-99. RF

WR429: Still thinking of all 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?

IWER: IF ASKED, IN TODAY'S PRICES

IWER: CODE HOW ANSWER IS GIVEN

1. Percentage of salary GO TO WR442

2. Monthly amount GO TO WR444

98. DK GO TO WR430

99. RF GO TO WR430

WR442: IWER: ENTER PERCENTAGE OF SALARY

1 ... 80% GO TO WR430

-98. DK GO TO WR443

-99. RF GO TO WR443

(ELSA)

IF (WR442=-98 OR -99) ASK WR443

WR443: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: 20%, 40%, 60%, 80%

-98. DK

-99. RF

WR444: IWER: ENTER MONTHLY AMOUNT IN EUROS

€0 ... €50,000 **GO TO WR430**

-98. DK **GO TO WR445**

-99. RF **GO TO WR445**

(ELSA)

IF (WR444=-98 OR -99) ASK WR445

WR445: Is it less than _____ , more than _____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €250, €500, €750, €1000

-98. DK

-99. RF

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 NEXT SECTION

SECTION 14 NUMERACY/FINANCIAL LITERACY (NU)

***IF (HH005 = 2,3,4,5 or 6 - PROXY INTERVIEW) GO TO THE NEXT SECTION.**

INTERVIEWER: If necessary, encourage the respondent to use a piece of paper and a pencil to answer NU001, NU002 AND NU003.

NU001: Next I would like to ask you some questions which assess how people use numbers in everyday life.

If the chance of getting a disease is 10 percent, how many people out of 1,000 would be expected to get the disease?

... Number of people

-98: DK

-99: RF

(HRS)

NU002: If 5 people all have the winning numbers in the lottery and the prize is two million euro, how much will each of them get?

... Amount

-98: DK

-99: RF

(HRS)

IF ANSWER TO NU001=100 AND/OR ANSWER TO NU002=400,000 ASK NU003; OTHERWISE GO TO NEXT SECTION

NU003: Let's say you have €200 in a savings account. The account earns 10 percent interest per year. How much would you have in the account at the end of two years?

... Amount

-98: DK

-99: RF

(HRS)

GO TO NEXT SECTION

SECTION 15 TRANSFERS TO PARENTS (TP)

IF (TP001FF(W2) = 1 & TP007FF(W2) = 1) GO TO TP001 (BOTH PARENTS ALIVE AT WAVE 2) / OR IF RESPONDENT ONLY IN WAVE 1 IF (TP001FF(W1) = 1 & TP007FF(W1) = 1) GO TO TP001 (BOTH PARENTS ALIVE AT WAVE 1)

IF (TP001FF(W2) >= 2 & TP007FF(W2) >= 2) GO TO NEXT SECTION (MOTHER & FATHER DECEASED WAVE 2) / OR IF RESPONDENT ONLY IN WAVE 1 IF (TP001FF(W1) >= 2 & TP007FF(W1) >= 2) GO TO NEXT SECTION (MOTHER & FATHER DECEASED WAVE 1)

IF (TP001FF(W2) >= 2 & TP007FF(W2) = 1) GO TO TP007 (ONLY MOTHER DECEASED AT WAVE 2) / OR IF RESPONDENT ONLY IN WAVE 1 IF (TP001FF(W1) >= 2 & TP007FF(W1) = 1) GO TO TP007 (ONLY MOTHER DECEASED AT WAVE 1)

IF (HH005 = 2,3,4,5,6 - PROXY INTERVIEW) GO TO NEXT SECTION
IF (NEW SPOUSE / OTHER ELIGIBLE) GO TO TP001

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.

15.1 Mother alive

IF (Mother lives with R) GO TO TP003

TP001: Is your mother alive?

1. Yes

5. No **GO TO TP006**

98. DK **GO TO TP007**

99. RF **GO TO TP007**

(HRS/SHARE/ELSA/MHAS)

IF NEW SPOUSE / OTHER ELIGIBLE GO TO TP002 ELSE GO TO TP003

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

5. 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

IWER SHOW CARD TP1

TP004a: Please look at this card, Has a doctor ever told your mother that she has any of the following?

IWER NOTE: (Medical doctors include specialists such as Neurologists, Dermatologists, Psychiatrists, Ophthalmologists, Osteopaths, Cardiologists, as well as family doctors, internists and physicians' assistants. Also include diagnoses made by Nurses and Nurse Practitioners.)

IWER: CODE THE ONE THAT APPLIES

1. Alzheimer's disease
 2. Dementia, senility or any other serious memory impairment
 3. None of the above
 98. DK
 99. RF
- (modified HRS)

BL: GO TO TP007

15.2 Mother deceased

TP006: In what month and year did she die?

MM/YYYY

_____ DK RF MONTH

[tp006m]

_____ DK RF YEAR

[tp006y]

(HRS)

15.3 Father alive

**IF (TP001FF(W2) = 1 & TP007FF(W2) >=2) GO TO TP013 (ONLY FATHER DECEASED AT WAVE 2)
OR IF R ONLY IN WAVE 1 IF (TP001FF(W1) = 1 & TP007FF(W1) >=2) GO TO TP013 (ONLY FATHER DECEASED AT WAVE 1)**

IF (Father lives with R) GO TO TP009

TP007: Is your father alive?

1. Yes

5. No **GO TO TP012**

98.DK **GO TO TP013**

99.RF **GO TO TP013**

(HRS/ELSA/SHARE/MHAS)

IF NEW SPOUSE / OTHER ELIGIBLE GO TO TP008 ELSE GO TO TP009

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)

IWER SHOW CARD TP1

TP010a: Please look at this card, Has a doctor ever told your father that he has any of the following?

IWER NOTE: (Medical doctors include specialists such as Neurologists, Dermatologists, Psychiatrists, Ophthalmologists, Osteopaths, Cardiologists, as well as family doctors, internists and physicians' assistants. Also include diagnoses made by Nurses and Nurse Practitioners.)

IWER: CODE THE ONE THAT APPLIES

1. Alzheimer's disease

2. Dementia, senility or any other serious memory impairment

3. None of the above

98. DK

99. RF
(modified HRS)

BL:

IF TP001=1 AND TP007=1 - GO TO TP023 (Mother and father still alive)

IF TP001>=2 AND TP007=1 - GO TO TP018 (Father alive, mother not alive)

15.4 Father deceased

TP012: In what month and year did he die?

(MM/YYYY)

_____ DK RF MONTH

[tp012m]

_____ DK RF YEAR

[tp012y]

(HRS)

BL: IF TP001=1 AND TP007>=2 - GO TO TP013

**BL: IF TP001 >=2 AND TP006a<2010 (MOTHER DIED MORE THAN TWO YEARS AGO) AND TP007=5
AND TP012a<2010 (FATHER DIED MORE THAN TWO YEARS AGO) - GO TO TP058**

**BL: IF TP001=5 AND TP006a>=2010 (MOTHER DIED LESS THAN TWO YEARS AGO) AND TP007=5
AND TP012 >=2010 (FATHER DIED LESS THAN TWO YEARS AGO) - GO TO TP038**

BL: IF TP001>=2 AND TP007 = 1 GO TO TP018

15.5 Only mother living

BL: If mother lives with R ask only TP013 and GO to TP038

TP013: **Is your mother currently married or in a relationship?**

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

IWER: SHOW CARD TP2

TP014: **Please look at card TP2. 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?**

IWER: CODE THE ONE THAT APPLIES

- 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>=2 - GO TO TP038

BL: IF TP001>=2 AND TP007 = 1 GO TO TP018

15.6 Only father living

BL: If father lives with R ask only TP018 and GO TO TP038

TP018: **Is your father currently married or in a relationship?**

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

IWER: SHOW CARD TP2

TP019: **Please look at card TP2. 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?**

IWER: CODE THE ONE THAT APPLIES

- 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 TP038

15.7 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?**

IWER: CODE THE ONE THAT APPLIES

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 TP038

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 TP038

TP027: Where do your parents live?

IWER: CODE THE ONE THAT APPLIES

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)

GO TO TP038

15.8 Parents do not live together

IF Mother lives with respondent go to TP033

TP030: **Where does your mother live?**

IWER: CODE THE ONE THAT APPLIES

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 TP038

TP033: **Where does your father live?**

IWER: CODE THE ONE THAT APPLIES

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)

IF (DM037FF(W2)==1 OR DM049FF(W2) > 0 (HAD SIBLINGS)) / OR IF RESPONDENT ONLY IN WAVE 1 IF (DM037FF(W1)==1 OR DM049FF(W1) > 0) GO TO TP038. OTHERS GOTO TP040

15.9 Siblings

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
- 97. N/A – no living siblings
- 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)

15.10 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)

15.11 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)

-98. DK

-99. RF

(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)

IWER: IF ONLY MOTHER OR FATHER IS ALIVE, CODE WITHOUT ASKING TP051

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)

-98. DK

-99. RF

(MHAS/HRS)

15.12 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 **GO TO TP058**

99. RF **GO TO TP058**

(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 **GO TO TP058**

99. RF **GO TO TP058**

(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)

-98. DK

-99. RF

(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

IF (HH005 = 2,3,4,5,6 - PROXY INTERVIEW) GO TO NEXT SECTION

SECTION 16. SOCIAL CONNECTEDNESS AND CARING (CN)

CN INTRO: Now, I would like to ask some questions about, your relationship with family and friends.

Question CN001 moved to after CN004

IF CS017 = 1 | 2 | 3 | 4 GO TO CN002a

CN002a: In total, then, how many living children do you have? (including step, foster and adoptive children)

0 ... 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)

CN001: 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.

16.1 Volunteering and Caring

IWER SHOW CARD CN1

CN006: Please look at card CN1. Did you do any of these activities during the last month, that is since <date>?

IWER NOTE IF YES, PROBE: Which ones?

IWER: CODE ALL THAT APPLY.

- | | |
|--------------------------------------|------------|
| 1. Voluntary work | [cn006_01] |
| 2. Cared for someone | [cn006_02] |
| 96. None of these GO TO DM020 | [cn006_96] |

IWER: CODE MAXIMUM 2 OUT OF 3 POSSIBLE RESPONSES
(ELSA)

BL: IF CN006_01=1 GO TO CN007

BL: IF CN006_02=1 AND CN006_01≠1 GO TO CN008

IWER SHOW CARD CN2

CN007: Please look at card CN2. For which of the reasons given on this card, if any, do you do voluntary work or give unpaid help?

IWER: CODE ALL THAT APPLY.

- | | |
|------------------------------------|------------|
| 1. To meet other people | [cn007_01] |
| 2. To contribute something useful | [cn007_02] |
| 3. For personal achievement | [cn007_03] |
| 4. Because I am needed | [cn007_04] |
| 5. Because I enjoy it | [cn007_05] |
| 6. To use my skills | [cn007_06] |
| 7. To keep fit | [cn007_07] |
| 8. Because I feel obliged to do it | [cn007_08] |
| 96. None of these | [cn007_96] |

IWER: CODE MAXIMUM 8 OUT OF 9 POSSIBLE RESPONSES
(ELSA)

BL: IF CN006_02=1 GO TO CN008 ELSE GO TO DM020

CN008: Did you look after anyone in the past week (including your partner or other people in your household)?

IWER: By 'look after' we mean the active provision of care.

- | | |
|-------|--------------------|
| 1 Yes | GO TO CN009 |
| 2 No | GO TO DM020 |

(ELSA)

CN009: What relation is this person or people to you?

IWER: CODE ALL THAT APPLY.

- | | |
|----------------------|------------|
| 1. Spouse or partner | [cn009_01] |
| 2. Child | [cn009_02] |
| 3. Grandchild | [cn009_03] |

- | | |
|------------------------|------------|
| 4. Other relative | [cn009_04] |
| 5. Friend or neighbour | [cn009_05] |
| 95. Other | [cn009_95] |

IWER: CODE MAXIMUM 6 OUT OF 6 POSSIBLE RESPONSES
(ELSA)

CN010: How many hours in the past week did you do this?

IWER: IF 'ALL THE TIME', ENTER 168.

1..168

-98 DK

-99 RF

CN011: Some people have extra responsibilities because they look after someone who has long-term physical or mental ill health or disability, or problems related to old age. May I check, is there anyone (living with /not living with) who is sick, disabled or frail whom you look after or give special help to, other than in a professional capacity (for example, a sick or disabled (or elderly) relative/husband/wife/child/friend/parent, etc)?

IWER: CODE NO IF GIVES FINANCIAL HELP ONLY.

1. Yes **GO TO CN012**

2. No **GO TO DM020**

CN012: Who is that person?

Select person(s) from household list or select other

NOTE TO CODER: PLEASE DISPLAY A LIST OF ALL CONFIRMED HOUSEHOLD MEMBERS AT WAVE 3. [FEED FORWARD FROM THE COVER SCREEN SECTION]. INCLUDE A TICK BOX OPTION SO THE RESPONDENT CAN INDICATE WHICH MEMBER(S) OF THE HOUSEHOLD HAS AN INTELLECTUAL OR LEARNING DISABILITY.

16.2 Religion

INTRO: Now I would like to ask some questions about religion

DM020. What is your religion?

IWER: CODE THE ONE THAT APPLIES

1. Roman Catholic
2. Anglican/ Church of Ireland/Episcopalian
3. Methodist
4. Presbyterian
5. Other Christian

95. Other religion. Specify: _____

[dm020oth]

96. No religion **GO TO DM021a**

98. DK

99. RF

(HRS)

DM021: About how often do you go to religious services?

IWER: CODE THE ONE THAT APPLIES

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)

IF DMO20 = 7 ask DM021a-DM023c:

Even though you indicated that you are not a member of any religion, we would like to ask you a few additional questions about religion.

DM021a: About how often would you go to religious services?

IWER: CODE THE ONE THAT APPLIES

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

DM022a: 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)

DM023a: Do you find that you get comfort and strength from religion or not?

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

ASK dm064 of all respondents

DM064: I would now like to ask a question about praying.

About how often do you pray apart from at religious services?

IWER: CODE THE ONE THAT APPLIES

1. More than once a day
 2. Once daily
 3. A couple of times a week
 4. Once a week
 5. Less than once a week
 6. Never
 98. DK
 99. RF
- (HRS adjusted)**

The next few questions ask you to think back about twenty years to when you were about <respondent's age minus 20> in <year – 20>

DM068. What was your religion back then?

IWER: CODE THE ONE THAT APPLIES

1. Roman Catholic
 2. Anglican/ Church of Ireland/Episcopalian
 3. Methodist
 4. Presbyterian
 5. Other Christian
 95. Other religion. Specify: _____
 96. No religion
 98. DK
 99. RF
- (HRS)

[dm068oth]

DM065: About how often did you go to religious services back then?

IWER: CODE THE ONE THAT APPLIES

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 adjusted)**

[IF DM065 = 1 OR 2 OR 3 OR 4 OR 5 ASK DM066 DM067]

DM066: How important would you say religion was in your life back twenty years ago; was 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 adjusted)

DM067: About how often would you pray back then apart from at religious services?

IWER: CODE THE ONE THAT APPLIES

1. More than once a day
2. Once daily

- 3. A couple of times a week
- 4. Once a week
- 5. Less than once a week
- 6. Never
- 98. DK
- 99. RF

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

SOCIAL NETWORKS

SNPrivacy The following set of questions should be answered by the respondent in private. If there are any other persons in the room at this point, please remind them that parts of the interview are of a private nature and should be answered by each respondent on his or her own. No proxy allowed. If the respondent is not capable of answering any of these question on her/his own, enter 98 at each question.

1. No need to explain, respondent is interviewed in private
2. Explained private nature of the interview to third persons, left the room
3. Explained private nature of the interview to third persons, did not leave the room

SN001_Introduction Now I am going to ask some questions about your relationships with other people. Most people discuss with others the good or bad things that happen to them, problems they are having, or important concerns they may have. Looking back over the last 12 months, who are the people with whom you most often discussed important things? These people may include your family members, friends, neighbors, or other acquaintances. Please refer to these people by their first names.

1. Continue

SN001_01

Please give me the first name of the person with whom you MOST OFTEN discuss things that are important to you:

SN002_01

What is [{first name of person in roster}]'s relationship to you? Prompt if needed: so this person is your..

1. Spouse/Partner
2. Mother
3. Father
4. Mother-in-law
5. Father-in-law
6. Stepmother
7. Stepfather
8. Brother
9. Sister
10. Child
11. Step-child/your current partner's child
12. Son-in-law
13. Daughter-in-law
14. Grandchild
15. Grandparent
16. Aunt
17. Uncle
18. Niece
19. Nephew
20. Other relative
21. Friend
22. (Ex-)colleague/co-worker
23. Neighbour

- 24. Ex-spouse/partner
- 25. Minister, priest, or other clergy
- 26. Therapist or other professional helper
- 27. Housekeeper/Home health care provider
- 96. None of these

SN003_01 Are there any more (persons with whom you discuss things that are important to you)?

- 1. Yes
- 2. No

[IF SN003_01 = Yes REPEAT SN001 – SNOO2 FOR UP TO 6 PERSONS]

[An additional probe (SN004a) is asked in the Social Network name generating roster to allow respondents to mention an additional person who is important to them “for some other reason”. As a result, the number of names on the social network roster can reach a maximum of 7.]

SN004a Is there anyone (else) who is very important to you for some other reason?

- 1. Yes
- 2. No

SN004b Please give me the first name of the person who is important too for some other reason
[POPULATE AS LINE 7 ON THE ROSTER IF ROSTER>=6]

SN005 DUPLICATES CHECK Please check the list below for duplicates. (i.e., Tick one of the persons listed twice to remove them from the list.) {List with people in roster}

SN006_Intro INTRODUCTION CLOSENESS Now I would like to ask a few more questions about the people who are close to you.

- 1. Continue

[REPEAT SN007_01 THROUGH SN010 FOR EACH PERSON LISTED ON THE ROSTER]

SN007_01 Code sex of [{First name of person in roster}] (ask if unsure)

- 1. Male
- 2. Female

SN008_01 Please look at [card SN1] Where does [{First name of person in roster}] live?

- 1. In the same household
- 2. In the same building
- 3. Less than 1 kilometre away
- 4. Between 1 and 5 kilometres away
- 5. Between 5 and 25 kilometres away
- 6. Between 25 and 100 kilometres away
- 7. Between 100 and 500 kilometres away
- 8. More than 500 kilometres away
- 98. DK
- 99. RF

IF SNOO8_01 <=> 1 ask SN009_01

SN009_01 During the past twelve months, how often did you have contact with [{First name of person in roster}] either personally, by phone or mail? Any kind of contact, including for example e-mail, sms or other means

- 1. Daily
- 2. Several times a week
- 3. About once a week
- 4. About every two weeks
- 5. About once a month
- 6. Less than once a month
- 7. Never
- 98. DK
- 99. RF

SN010_01 How close do you feel to [{First name of person in roster}]? Read out

- 1. Not very close
- 2. Somewhat close
- 3. Very close
- 4. Extremely close
- 98. DK
- 99. RF

[IF ROSTER = 0 ASK: SN011a_Network_Satisfaction]

SN011a You indicated that there is no one with whom you discuss matters, and no one who is important to you for some other reason. How satisfied are you with this on a scale of 0-10, where 0 means completely dissatisfied and 10 means completely satisfied?

(0..10).

-98. DK

-99. RF

[IF SOCIAL NETWORK >=1 ASK: SN011b_Network_Satisfaction]

SN011b Overall, how satisfied are you with the [relationship that you have with the person/relationships that you have with the persons] we have just talked about? Please answer on a scale from 0 to 10 where 0 means completely dissatisfied and 10 means completely satisfied

(0..10).

-98. DK

-99. RF

SECTION 17. 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 [your/Rname's] 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 any individual.

17.1 Income from occupational pensions

SI101:

BL: IF WE001=1 (RETIRED) or IF (HH005 = 2,3,4,5 or 6 PROXY INTERVIEW).

[Are/Is] [you/he/she] receiving a retirement pension from a former employment or (if applicable) [your/his/her] deceased spouse's former employment?

BL: IF WE001≠1 (NOT RETIRED) and *IF (HH005 = 1 - NOT PROXY).

Some people can receive an occupational 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?

1. Yes **GO TO SI102**

5. No **GO TO SI201**

98. DK **GO TO SI201**

99. RF **GO TO SI201**

(EU-SILC)

IWER: DO NOT INCLUDE STATE PENSIONS (E.G. CONTRIBUTORY OR NON-CONTRIBUTORY OLD AGE PENSIONS AND WIDOWS PENSIONS, ETC.)

SI102:

How many of these retirement pensions [are/is] [you/he/she] currently receiving?

1...10

-98. DK

-99. RF

(TILDA)

BL: REPEAT SI103 TO SI113 FOR EACH PENSION STARTING WITH THE MOST IMPORTANT ONE,

SI103:

Does this pension arise from employment in the public sector?

1. Yes [si103_01 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_01 to si104_10]

1 Type A: [My/His/Her] pension contributions were put into a fund which grows over time and [my/his/her] pension depends on the size of this fund when [I/he/she] [retired/retires]. This type of pension is called a 'defined contribution' or 'money purchase' scheme.

2 Type B: [My/His/Her] pension is 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/he/she] start receiving this pension? [si105_01 to si105_10]

- 1950...[current year]
-98. DK
-99. RF
(SHARE)

SI106: **For how many months during the last 12 months did [you/he/she] receive this pension?**

- 0 ... 12 [si106_01 to si106_10]
-98. DK
-99. RF
(SHARE)

IWER: SHOW CARD SI2

SI107: **Please look at card SI2. How long a period did [your/his/her] last pension payment cover?**

IWER: CODE THE ONE THAT APPLIES. [si107_01 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)

IF SI107_i = 95

SI108: Other (specify)

[si107oth_01 to si107oth_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_01 to si109_10]
-98. DK
-99. RF
(EU-SILC)

IF (SI107=1 AND SI109=-98, -99, WEEKLY PAYOUT) ASK SI115 OTHERS GO TO SI116
SI115: **Did it amount to a total of less than ____ , more than ____ , or what?** [si115_01 to si115_10]
PROCEDURES: 2Up1Down, 1Up2Down
BREAKPOINTS: €75, €200, €300, €500.
-98. DK
-99. RF

IF (SI107=2 AND SI109=-98, -99, FORTNIGHTLY PAYOUT) ASK SI116 OTHERS GO TO SI117
SI116: **Did it amount to a total of less than ____ , more than ____ , or what?** [si116_01 to si116_10]
PROCEDURES: 2Up1Down, 1Up2Down
BREAKPOINTS: €450, €900, €1,300, €1700.
-98. DK
-99. RF

IF (SI107=3 AND SI109=-98, -99, MONTHLY) ASK SI117 OTHERS GO TO SI118
SI117: **Did it amount to a total of less than ____ , more than ____ , or what?** [si117_01 to si117_10]
PROCEDURES: 2Up1Down, 1Up2Down
BREAKPOINTS: €300, €1,000, €2200, €3600.
-98. DK
-99. RF

IF (SI107=4 AND SI109=-98, -99, QUARTERLY) ASK SI118 OTHERS GO TO SI119
SI118: **Did it amount to a total of less than ____ , more than ____ , or what?** [si118_01 to si118_10]
PROCEDURES: 2Up1Down, 1Up2Down
BREAKPOINTS: €300, €1,000, €2200, €3600.
-98. DK
-99. RF

IF (SI107=5 AND SI109=-98, -99, SEMI-ANNUAL) ASK SI119 OTHERS GO TO SI120
SI119: **Did it amount to a total of less than ____ , more than ____ , or what?** [si119_01 to si119_10]
PROCEDURES: 2Up1Down, 1Up2Down
BREAKPOINTS: €300, €1,000, €2200, €3600.
-98. DK
-99. RF

IF (SI107=6 AND SI109=-98, -99, YEARLY) ASK SI120 OTHERS GO TO SI121

SI120: Did it amount to a total of less than ____ , more than ____ , or what? [si120_01 to si120_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €300, €1,000, €2200, €3600.

-98. DK

-99. RF

IF (SI107=95 AND SI109=-98, -99) ASK SI121 OTHERS GO TO SI110

SI121: Did it amount to a total of less than ____ , more than ____ , or what? [si121_01 to si121_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €300, €1,000, €2200, €3600.

-98. DK

-99. RF

SI110: Did [you/he/she] ever receive any additional or lump sum (one off) payment from this pension? [si110_01 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_01 to si111_10]

1. Yes

5. No

98. DK

99. RF

(TILDA)

SI112: Before taxes, about how much did [you/he/she] receive as additional or lump sum payments from this pension? [si112_01 to si112_10]

€0 ... €5,000,000

-98. DK

-99. RF

(SHARE)

IF (SI112=-98, -99) ASK WE121 OTHERS GO TO SI113

SI122: Did it amount to a total of less than ____ , more than ____ , or what? [si122_01 to si122_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €16000, €40,000, €75000, €100000.

-98. DK

-99. RF

SI113: Please look at card SI2a. On what basis is [your/his/her] pension up-rated (increased) [si113_01 to si113_10]

1. In line with prices (inflation or consumer price index)

2. In line with the salary of the job [you/he/she] had before retiring

3. In line with average salaries in the economy

4. At the discretion of [your/his/her] former employer or of the scheme trustees

5. [Your/His/Her] pension is not indexed to any criteria/ is not up-rated

98. DK

99. RF

(TILDA)

17.2 Income from private pensions or annuities

SI201:

BL: IF WE001=1 (RETIRED) or IF (HH005 = 2,3,4,5 or 6 PROXY INTERVIEW).

[Are/Is] [you/he/she] receiving payments from a private pension or annuity? By this I mean a pension scheme or PRSA fully organised and paid for by [yourself/himself/herself] or by a deceased spouse.

BL: IF WE001≠1 (NOT RETIRED) AND IF (HH005 = 1 NOT PROXY).

Some people can receive a private 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/is] [you/he/she] 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/he/she] start receiving this pension/annuity?

1950...[current year]

[si203_01 to si203_10]

-98. DK

-99. RF

(SHARE)

SI204: For how many months during the last 12 months did [you/he/she] receive this pension/annuity?

[si204_01 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/his/her] last pension/annuity payment cover? [si205_01 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)

IF SI205_i = 95 ELSE GO TO SI207

SI206: Other (specify)

[si205oth_01 to si205oth_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_01 to si207_10]

€0 ... €500,000

- 98. DK
- 99. RF
- (EU-SILC)

IF (SI205=1 AND SI207=-98, -99, WEEKLY PAYOUT) ASK SI212 OTHERS GO TO SI213

SI212: Did it amount to a total of less than _____, more than _____, or what? [si212_01 to si212_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €75, €200, €300, €500.

- 98. DK
- 99. RF

IF (SI205=2 AND SI207=-98, -99, FORTNIGHTLY) ASK SI213 OTHERS GO TO SI214

SI213: Did it amount to a total of less than _____, more than _____, or what? [si213_01 to si213_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €450, €900, €1,300, €1700.

- 98. DK
- 99. RF

IF (SI205=3 AND SI207=-98, -99, MONTHLY) ASK SI214 OTHERS GO TO SI215

SI214: Did it amount to a total of less than _____, more than _____, or what? [si214_01 to si214_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €300, €1,000, €2200, €3600.

- 98. DK
- 99. RF

IF (SI205=4 AND SI207=-98, -99, QUARTERLY) ASK SI215 OTHERS GO TO SI216

SI215: Did it amount to a total of less than ____ , more than ____ , or what? [si215_01 to si215_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €300, €1,000, €2200, €3600.

-98. DK

-99. RF

IF (SI205=5 AND SI207=-98, -99, SEMI-ANNUAL) ASK SI216 OTHERS GO TO SI217

SI216: Did it amount to a total of less than ____ , more than ____ , or what? [si216_01 to si216_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €300, €1,000, €2200, €3600.

-98. DK

-99. RF

IF (SI205=6 AND SI207=-98, -99, ANNUAL) ASK SI217 OTHERS GO TO SI218

SI217: Did it amount to a total of less than ____ , more than ____ , or what? [si217_01 to si217_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €300, €1,000, €2200, €3600.

-98. DK

-99. RF

IF (SI205=95 AND SI207=-98, -99) ASK SI218 OTHERS GO TO SI208

SI218: Did it amount to a total of less than ____ , more than ____ , or what? [si218_01 to si218_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €300, €1,000, €2200, €3600.

-98. DK

-99. RF

SI208:

Did [you/he/she] ever receive any additional or lump sum (one off) payment from this pension/annuity?

[si208_01 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?

1. Yes

[si209_01 to si209_10]

5. No

98. DK

99. RF

(TILDA)

SI210: Before taxes, about how much did [you/he/she] receive as additional or lump sum payments from this pension/annuity?

[si210_01 to si210_10]

€0 ... €5,000,000

-98. DK

-99. RF

(SHARE)

IF (SI210=-98, -99) ASK SI219 OTHERS GO TO SI211

SI219: Did it amount to a total of less than _____, more than _____, or what? [si219_01 to si219_10]

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: €9000, €20000, €50000, €100000.

-98. DK

-99. RF

SHOW CARD SI2A

SI211:

Please look at card SI2A. On what basis is [your/his/her] pension up-rated (increased)?

[si211_01 to si211_10]

1. In line with prices (inflation or consumer price index)
2. In line with the salary of the job [you/he/she] had before retiring
3. In line with average salaries in the economy
4. At the discretion of [your/his/her] former employer or of the scheme trustees
5. [Your/His/Her] pension is not indexed to any criteria/ is not up-rated

98. DK

99. RF

(TILDA)

17.3 Income from individual state benefits

IWER: SHOW CARD SI3

SI301: Please look at Card SI3.

Did [you/he/she] 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, Widower's or Surviving Civil Partner'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 or 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) [si301oth] | GO TO SI324 | [si301_95] |
| 96. None of these | GO TO SI325A | [si301_96] |
| 98. DK | GO TO SI325A | [si301_98] |
| 99. RF
(TILDA) (TILDA) | GO TO SI325A | [si301_99] |

SI302: For how many weeks during the last 12 months did [you/he/she] 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/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL:

IF SI301_02=1 GO TO SI304

IF SI301_03=1 GO TO SI306

IF SI301_04=1 GO TO SI308

IF SI301_05=1 GO TO SI310

IF SI301_06=1 GO TO SI312

IF SI301_07 =1 GO TO SI314

IF SI301_08 =1 GO TO SI316

IF SI301_09=1 GO TO SI318

IF SI301_10 =1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI304: For how many weeks during the last 12 months did [you/he/she] 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/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL:

IF SI301_03=1 GO TO SI306

IF SI301_04=1 GO TO SI308

IF SI301_05=1 GO TO SI310

IF SI301_06=1 GO TO SI312

IF SI301_07=1 GO TO SI314

IF SI301_08=1 GO TO SI316

IF SI301_09=1 GO TO SI318

IF SI301_10=1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI306: For how many weeks during the last 12 months did [you/he/she] 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/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL:

IF SI301_04=1 GO TO SI308

IF SI301_05=1 GO TO SI310

IF SI301_06=1 GO TO SI312

IF SI301_07=1 GO TO SI314

IF SI301_08=1 GO TO SI316

IF SI301_09=1 GO TO SI318

IF SI301_10=1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI308: For how many weeks during the last 12 months did [you/he/she] receive the Widow's, Widower's or Surviving Civil Partner's Contributory Pension?

0 ... 52 weeks

-98. DK

-99. RF

(EU-SILC)

SI309: What was the weekly amount of the Widow's, Widower's or Surviving Civil Partner's Contributory Pension [you/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL:

IF SI301_05=1 GO TO SI310

IF SI301_06=1 GO TO SI312

IF SI301_07=1 GO TO SI314

IF SI301_08=1 GO TO SI316

IF SI301_09=1 GO TO SI318

IF SI301_10=1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI310: For how many weeks during the last 12 months did [you/he/she] receive the Disability Allowance?

0 ... 52 weeks

-98. DK

-99. RF

(EU-SILC)

SI311: What was the weekly amount of the Disability Allowance [you/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL:

IF SI301_06=1 GO TO SI312

IF SI301_07=1 GO TO SI314

IF SI301_08=1 GO TO SI316

IF SI301_09=1 GO TO SI318

IF SI301_10=1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI312: For how many weeks during the last 12 months did [you/he/she] 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/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL:

IF SI301_07=1 GO TO SI314

IF SI301_08=1 GO TO SI316

IF SI301_09=1 GO TO SI318

IF SI301_10=1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI314: For how many weeks during the last 12 months did [you/he/she] receive Disability Benefit or Illness Benifit?

0 ... 52 weeks

-98. DK

-99. RF

(EU-SILC)

SI315: What was the weekly amount of Disability Benefit or Illness Benefit [you/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL: IF SI301_08=1 GO TO SI316

IF SI301_09=1 GO TO SI318

IF SI301_10=1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI316: For how many weeks during the last 12 months did [you/he/she] receive the Invalidity Pension?

0 ... 52 weeks

-98. DK

-99. RF

(EU-SILC)

SI317: What was the weekly amount of the Invalidity Pension [you/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL: IF SI301_09=1 GO TO SI318

IF SI301_10=1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI318: For how many weeks during the last 12 months did [you/he/she] 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/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL: : IF SI301_10= 1 GO TO SI320

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

SI320: For how many weeks during the last 12 months did [you/he/she] 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/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL:

IF SI301_11=1 GO TO SI322

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325_

SI322: For how many weeks during the last 12 months did [you/he/she] 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/he/she] received during the last 12 months?

€0.00 ... €800

-98. DK

-99. RF

(EU-SILC)

BL:

IF SI301_95=1 GO TO SI324

OTHERWISE GO TO SI325A

IWER: SHOW CARD SI4

SI324:

Please look at Card SI4. Did [you/he/she] 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, Widower's or Surviving Civil Partner's Non-Contributory Pension | [si324_07] |
| 8. Widowed or Surviving Civil Partner 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_96] |
| 98. DK | [si324_98] |
| 99. RF | [si324_99] |
- (TILDA)

SI325: **Thinking of the last 12 months, in total, how much did [you/he/she] receive from this benefit/these benefits?**

€0 ... €20,000

-98. DK

-99. RF

(EU-SILC)

SI325A**[Are/Is] [you/he/she] in receipt of any of the following Social Welfare payments :**

READ OUT

- | | | |
|----|---|-------------|
| 1 | Child Benefit (Children's Allowance)? | [si325a_01] |
| 2 | One/Single Parent Family Allowance? | [si325a_02] |
| 3 | Family Income Supplement? | [si325a_03] |
| 4 | (If female) Deserted Wife's Allowance? | [si325a_04] |
| 96 | None of these GO TO SI326 | [si325a_96] |
| 98 | Don't know GO TO SI326 | [si325a_98] |
| 99 | Refused GO TO SI326 | [si325a_99] |

IF SI325A_01 = 1 (Child Benefit (Children's Allowance))

SI325B **In respect of how many children [do/does] [you/he/she] currently receive Child Benefit (Children's Allowance)?**

0....20

-98. DK

-99. RF

IF SI325_02 = 1 (One/Single Parent Family Allowance)

SI325C How much did [you/he/she] receive last week from the One/Single Parent Family Allowance scheme?

€0....€300

-98. DK

-99. RF

IF SI325A_03 = 1 (Family Income Supplement)

SI325D How much did [you/he/she] receive last week from the Family Income Supplement scheme?

€0....€300

-98. DK

-99. RF

IF SI325A_04 = 1 (Deserted Wife's Allowance)

SI325E How much did [you/she] 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/he/she] or [your/his/her] 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_01] |
| 2. Free Television Licence GO TO SI328 | [si326_02] |
| 4. Free Electricity Allowance GO TO SI328 | [si326_04] |
| 5. Free Natural Gas GO TO SI328 | [si326_05] |
| 6. Free Bottled Gas Refill Vouchers GO TO SI328 | [si326_06] |
| 96. None of these GO TO SI328 | [si326_96] |
| 98. DK GO TO SI328 | [si326_98] |
| 99. RF GO TO SI328 | [si326_99] |
- (TILDA)

SI327: Approximately how much [have/has] [you/he/she] or [your/his/her] spouse/partner saved over the last 4 weeks by using [your/his/her] free travel pass?

€0.00... €500

-98. DK

-99. RF

(EU-SILC)

SI328: [Have/Has] [you/he/she] 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/he/she] received during the last 12 months (in Euros)?

€0... €20,000

-98. DK

-99. RF

(EU-SILC)

17.4 Other sources of income

SI401: Did [you/he/she] receive any payments from [your/his/her] 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/he/she] 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/Rname] 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/he/she] receive from all these payments in the last 12 months?

€0 ... €1,000,000

-98. DK

-99. RF

(ELSA)

SI405: [Have/Has] [you/he/she] 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)

IWER: PLEASE IDENTIFY ON THE FOLLOWING LIST ALL THOSE *WHO* WERE IN RECEIPT OF INCOME DURING THE PAST 12 MONTHS

Turn into a question that loops

SI407: **Finally, we would like to get an indication of the overall economic situation of [your/Rname's] household. Could I ask you to think about all the adults (16 years or over) in the household including [yourself/Rname] and [your/his/her] spouse? Which of these people were in receipt of income of any kind during the past twelve months?**

Adults (over 16 listed from the coverscreen)	
1.	NAME 1 (SI407_01) (SI407_namep1, SI407_agep1, SI407_agep1)
2.	NAME 2 (SI407_02)
3.	NAME 3 ETC (SI407_03)
...	
	Refused (SI407_99)
	Don't know (SI407_98)
	None of these (SI407_96)

FOR EACH PERSON SELECTED ABOVE ASK

SI412_i: **Could you estimate [NAME_i's] net annual income (after tax & deductions)?**

- 1. Yes GO TO SI409
- 2. No GO TO SI411_i
- 98. DK GO TO SI411_i
- 99. RF GO TO SI411_i

Loop over each person in the household

SI409_i: **Approximately, what is [Name_i's] net annual income (after tax & deductions)?**

€1....€500,000

-98. DK

-99. RF

IF (si409_i is answered) GO TO NEXT PERSON ON THE LIST

SI411_i: **Did the net income of [NAME i] 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

Loop over each person in the household

17.5 Household Consumption

**IF HH005 != 1 (Proxy Interview) GO TO Next Section
ELSE GO TO SI501**

IWER: Now I would like to ask you some questions about your expenditure. We know that it is hard to remember exactly how much you spend on different items per month but please answer as best you can. We are going to ask you about your outgoings in the previous month. If you usually think about spending on a weekly basis we can convert the amounts to a monthly amount.

SI501. About how much did you and your household spend on food that you use at home in the PAST MONTH? [IW: Prompt if you prefer to think in terms of weekly expenditure, we can multiply this by four]

_____ Amount

-98 DK

-99 RF

SI502. [(if we001==2 | we001==3)] THEN SAY: Excluding any meals at work], about how much did you and your household spend eating out in the PAST MONTH?

_____ Amount

-99 RF

-98 DK

SI503. About how much did you and your household spend on consumer durables such as cars, televisions, furniture, etc [include clothes and small appliances] in the PAST MONTH?

_____ Amount [SET MAX TO 50,000]

-98 DK

-99 RF

SI504. About how much did you and your household spend on household utilities such as gas, electricity, phone bills (including mobile phone credit) in the PAST MONTH?

_____ Amount

-98 DK-99 RF

SI505. So in total you and your household spent about [si501+si502+si503+si504] on household utilities, consumer durables and food in the past month. Does that sound correct?

1. Yes

5. No

98. DK

99.RF

IW if not true..allow answers to si501 to si504 to be adjusted but only re-check once

[IW to help RESP with converting weekly or other amounts to monthly]

(Source Browning et al Economic Journal 2003)

IF (HH005 = 1) ASK SI410 OTHERS GO TO NEXT SECTION

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 18. HOUSE OWNERSHIP (HW)

IWER: CHECK IF RESPONDENT IS FINANCIAL RESPONDENT (CSO17=1 OR 3)

IF HH002 = 2 (NURSING HOME) GO TO HW100

ELSE GO TO “DETAILS OF PRIVATE RESIDENCE” preamble before HW101

HW100: Now I have a question about [your/Rname’s] residence outside the nursing home. [Do/Does] [you/he/she] still own or rent a residence outside the nursing home?

1. Yes dwelling that I own GO TO HW100a
2. Yes dwelling that I rent privately GO TO HW100a
3. Yes dwelling that I rent from local authority GO TO HW100a
5. NO **GO TO GO TO NEXT SECTION**
98. DK **GO TO GO TO NEXT SECTION**
99. RF **GO TO GO TO NEXT SECTION**

IF HW100=1 | HW100=2 | HW100=3

HW100a: Is this the residence in which [you/he/she] [were/was] living at the time of the last interview?

1. YES GO TO HW105
5. NO GO TO HW100b
98. DK GO TO NEXT SECTION
99. RF GO TO NEXT SECTION

HW100b

Could I ask you for the address of this other residence

PA002: Interviewer: write the details of address

ADDRESS - Text: Up to 100 characters

DETAILS OF PRIVATE RESIDENCE:

Then interviewer should say:

“Now I would like to ask some questions about [your/her/his] place of residence [outside of nursing home]”

IF interviewer is visiting exact same address as in last wave interviewed i.e. if hh001=1, then skip HW101, hw102, hw103, hw104, and proceed to hw105.
Otherwise proceed with HW101

HW101:

IWER: SHOW CARD HW1

Please look at card HW1. Now I have a few questions about [your/Rname's] main place of residence [by main place of residence I mean the place [you/he/she] [reside/resides] in most of the time]. 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 HW101oth**
(EU-SILC)

HW101oth: **Other (specify)**
(EU-SILC)

Text: up to 60 characters

HW103: **How many rooms does [your/his/her] property have?**

1 ... 20

-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 property 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:

With regard to the main residence [outside of nursing home] Is the dwelling...

IWER: IF OWNED THROUGH A HOUSING COOPERATIVE SELECT CODE 1 BELOW

1. Owned by [you/the respondent] or [your/his/her] spouse/partner **GO TO HW106**
 2. Owned by another household member (not [you/the respondent/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 HW118**
 98. DK **GO TO HW117**
 99. RF **GO TO HW117**
- (SHARE)

HW106:

[Did/Does] [you/Rname] or [your/his/her] 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/Rname] or [your/his/her] 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 property fetch if it were to be sold today?

(IWER: Record the amount in actual euro i.e. if the value is four hundred thousand euro enter 400000, not 400)

€9,999.....€10,000,000

-98. DK

-99. RF

(SHARE)

IF HW108 = -98, -99

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/his/her] property

1. **Owned outright (no mortgage outstanding) GO TO HW118**

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/his/her] 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/his/her] mortgage taken out?** If more than one mortgage taken out, please give year of most recent mortgage.

1960 ... [current year]

-98. DK

-99. RF

(EU-SILC)

HW112: **What is the term of [your/his/her] mortgage (in years)?**

IWER: PLEASE ASK FOR THE FULL TERM OF THE MORTGAGE, NOT THE OUTSTANDING YEARS

1 ... 50

-98. DK

-99. RF

(EU-SILC)

HW113: **Excluding interest, how much of the principal amount remains outstanding?**

IWER: IF RE-MORTGAGED, THEN THIS QUESTION ASKS THE AMOUNT OF THE ORIGINAL MORTGAGE THAT IS OUTSTANDING.

€999...€5,000,000

-98. DK

-99. RF

(EU-SILC)

BL: GO TO HW118

HW114:

[Do/Does] [you/he/she] rent this property from [your/his/her] Local Authority?

1. Yes **GO TO HW115**

5. No **GO TO HW116**

98. DK **GO TO HW118**

99. RF **GO TO HW118**

(EU-SILC)

HW115: **How much rent [do/does] [you/he/she] pay weekly to the local authority?**

€0.00 ... €500

-98. DK

-99. RF

(EU-SILC)

BL: GO TO HW118

HW116: **How much rent did [you/he/she] pay (before rent allowances, if applicable) in the last month?**

€0 ... €10,000

-98. DK

-99. RF

(EU-SILC)

GO TO HW118

HW118: **For how many years [have you lived / did you live] at [this/that] address?**

Years 0....age of respondent

-98 DK

-99 RF

(TILDA)

HW119: **What type of piped water supply does your accommodation have?**

- 1 Connection to a Public Main
 - 2 Connection to a Group Water Scheme with a Local Authority source of supply
 - 3 Connection to a Group Water Scheme with a private source of supply (e.g. borehole, lake, etc.)
 - 4 Connection to other private source (e.g. well, lake, rainwater tank, etc.)
 - 96 No piped water supply
 - 98 DK
 - 99 RF
- (Irish Census)

IF (HH005 = 1) ASK HW117 OTHERS GO TO NEXT SECTION

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

SECTION 19 OTHER ASSETS (AS)

IWER: CHECK IF RESPONDENT IS FINANCIAL RESPONDENT (CSO17=1 OR 3)

INTRO: We've already talked about [your/his/her] 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/his/her] 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.

IWER: Please ensure that full monetary amounts are given. E.g. if respondent answers 400 to AS101 they are likely to really mean €400,000. In relation to other questions 400 could actually mean €400 or €400,000 so please double check.

AS101: If [you/he/she] added up all the deposit or saving accounts [you/he/she] and/or [your/his/her] spouse/partner currently own, about how much would they amount to right now?

€1 ... €5,000,000 GO TO AS102, IF AS101 = 0 go to AS103

-98. DK

-99. RF

(SHARE)

BL: IF AS101 = -98 or -99 then go to as118

AS118: Does it amount to a total of less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: € 5,000, €7,500, €10,000, €20,000.

-98. DK

-99. RF

(SHARE)

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/he/she] and/or [your/his/her] 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/he/she] [have/has] in all of these how much would this amount to right now?

IWER: IF RESPONDENT HAS NO ASSETS PLEASE CODE 0.

€1 ... €5,000,000 GO TO AS105. If as103=0 go to as106

-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: Does it amount to a total of less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: € 5,000, €7,500, €10,000, €20,000.

-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/Does] [you/he/she] and/or [your/his/her] 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/does] [you/he/she] and/or [your/his/her] spouse/partner own? Please exclude company cars.

1..10

-98. DK

-99. RF

(ELSA)

AS108: If [you/Rname] and/or [your/his/her] spouse/partner sold this/these car(s) and paid off any debts that [you/he/she] may have on it/them, about how much would be left?

€0...€100,000 go to as109

-98. DK go to as121

-99. RF go to as121

(ELSA)

AS121: Does it amount to a total of less than ____ , more than ____ , or what?

PROCEDURES: 2Up1Down, 1Up2Down

BREAKPOINTS: € 1,000, €5,000, €10,000, €20,000.

-98. DK

-99. RF

AS109:

[Do/Does] [you/he/she] and/or [your/his/her] spouse/partner own any other houses, flats or holiday homes (excluding timeshares) besides [your/his/her] own residence that we discussed already?

1. Yes **GO TO AS119**

5. No **GO TO AS112**

98. DK **GO TO AS112**

99. RF **GO TO AS112**

(ELSA/TILDA)

AS119: In which year did [you/he/she] purchase this [most recently bought] property?

_____ YEAR

-98. DK

-99. RF

AS110: How much income or rent did [you/he/she] and/or [your/his/her] 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/he/she] sold all that property about how much would [you/he/she] and/or [your/his/her] spouse/partner get?

€0 ... €10,000,000 GO TO AS112

-98. DK GO TO AS120

-99. RF GO TO AS120

(SHARE)

AS120: 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.

-98. DK

-99. RF

IWER: SHOW CARD AS2.

AS112. We have now talked about various types of property or assets that [you/Rname] and/or [your/his/her] spouse/partner 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/him/her], etc. If [you/Rname] and/or [your/his/her] spouse/partner 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

-98. DK **GO TO AS113**

-99. RF **GO TO AS113**

(SHARE/TILDA)

BL: IF AS112 >0 GO TO AS114

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.

-98. DK

-99. RF

AS114: Did [you/he/she] and/or [your/his/her] 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/he/she] and/or [your/his/her] spouse/partner receive from these assets?

€0 ...€500,000

-98. DK

-99. RF

(ELSA/TILDA)

AS116: Excluding any mortgage [you/he/she] might have on [your/his/her] primary residence, how much [do/does] [you/he/she] and/or [your/his/her] 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)

IF (HH005 = 1) ASK AS117 OTHERS GO TO NEXT SECTION

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 20. EXPECTATIONS & CRIME (EX)

NOT SUITABLE FOR PROXY MOVE TO SECTION 22

***IF (HH005 = 2,3,4,5 or 6 PROXY INTERVIEW) GO TO SECTION 22.**

INTRO: Now, I have some questions about how likely you think various events might be.

IF WE001=1, 3,4,5,6,7,95,98,99 go to EX104

If WE001=2 GO TO EX108

IWER: SHOW CARD EX1

EX108. Sometimes people are permanently laid off from jobs that they want to keep. Using the scale on this card, what are the chances that you will lose your job during the next year?

0...100

-98. DK

-99. RF

(HRS)

IWER: SHOW CARD EX1

EX109. Suppose you were to lose your job this month. What do you think are the chances that you could find an equally good job in the same line of work within the next few months?

0...100

-98. DK

-99. RF

(HRS)

IF (HH001 = 1 OR HH002 = 1) ASK EX104. OTHERS GO TO EX110

IWER: SHOW CARD EX1

EX104. Using this 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.

ASK ALL

IWER: SHOW CARD EX1

EX110. CHANCES STANDARD OF LIVING WILL BE BETTER

Using the same scale, what are the chances that five years from now your standard of living will be better than today?

IWER: BY STANDARD OF LIVING WE MEAN THE ABILITY TO BUY GOODS AND SERVICES (in monetary terms)

0...100

-98. DK

-99. RF

(ELSA)

If financial respondent (cs017=1 or cs017=3) go to ex112
If NOT financial respondent (cs017=2 or cs017=4), go to ex115

IWER: SHOW CARD EX1

EX112: Using the same scale, including property and other valuables, what are the chances that you [and/or your spouse/partner] will leave an inheritance totalling €50,000 or more?

0...100

-98. DK

-99. RF

(ELSA)

IF EX112 = 0 go to EX114

IF EX112 ≠ 0 go to EX113

IWER: SHOW CARD EX1

EX113: Using the same scale, what are the chances that you [and/or your spouse/partner] will leave an inheritance totalling €150,000 or more?

0...100

-98. DK

-99. RF

(ELSA)

IWER: SHOW CARD EX1

EX114: Using the same scale, what are the chances that you [and/or your spouse/partner] will leave any inheritance?

IWER: INCLUDE PROPERTIES AND OTHER VALUABLES

0...100

-98. DK

-99. RF

(ELSA)

IF WE001=1 GO TO EX116

IF WE001≠1 GO TO EX115

IWER: SHOW CARD EX2

EX115: Now thinking about your retirement, how much money do you think you will have to live on?

1. More than my income now

2. About the same as my income now

3. Two thirds of my income now

4. Half of my income now

5. A third of my income now

6. Less than a third of my income now

98. DK

99. RF

(Wealth and Assets Survey)

Fear of Crime

Intro: The next questions ask about crime and fear of crime

EX116: Do you worry about the possibility that you, or anyone else who lives with you, might become a victim of crime?

INTERVIEWER: PROBE : Is this a victim of personal injury or property theft or damage?

IWER: CODE THE ONE THAT APPLIES

- 1. Yes, personal injury
- 2. Yes, property theft, damage
- 3. Yes, both personal and property
- 4. No
- 98. DK
- 99. RF

If hh002==2 then skip ex117, ex118 & ex119

EX117: How safe do you feel when you are alone in your own home at night?
Would you say you feel.....READ OUT

- 1. Very safe
- 2. Safe
- 3. Unsafe
- 4. Very unsafe
- 98. DK
- 99. RF

100: I cannot answer because I am never alone

If ex117=100 go to ex118, otherwise go to ex119

EX118: INTERVIEWER: IF NEVER ALONE PROBE : How safe WOULD you feel?

- 1. Very safe
- 2. Safe
- 3. Unsafe
- 4. Very unsafe
- 98. DK
- 99. RF

EX119: How safe do you feel walking alone in this area after dark?

- 1. Very safe
- 2. Safe
- 3. Unsafe
- 4. Very unsafe
- 98. DK
- 99. RF

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 NEXT SECTION

SECTION 21. MEDICATIONS (MD)

MD001: Now I would like to record all medications that [you/Rname] [take/takes] 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.

IWER: PROMPT: DO I HAVE ALL OF [YOUR/RName's] MEDICATIONS HERE?

(MD001_01 – MD001_20)

If medication is not listed in the CAPI choose “other” option and enter medication name using free text.

(MD001oth_01 – MD001oth_20)

MD005: Was this medication prescribed by a doctor or did you get it over the counter?

(MD005_01-MD005_20)

1. Prescribed by a doctor

2. Over the counter

98. DK

99. RF

(Note to Scripters - For medications that are available over the counter as well as on prescription, we are interested in how the respondent got them.)

NOTE:

MD002FFWi – RECODED INTO

'1' WHERE A CORRECT MEDICAL CARD NUMBER WAS PROVIDED,

'2' A MEDICAL CARD NUMBER WAS PROVIDED BUT WAS INCORRECT

'3' A MEDICAL CARD NUMBER WAS NOT PROVIDED AT WAVE i.

IF (instatusW3=1,3 AND HU001 = 1,2 AND HU001FFW2 = 96, 98, 99) GO TO MD002

IF (instatusW3=2 AND HU001 = 1,2 AND HU001FFW1 = 96, 98, 99) GO TO MD002

IF (instatusW3=4 AND HU001=1,2) GO TO MD002

IF (instatusW3=1,3 AND HU001 = 1,2 AND IF MD002FFW2 = 3) GO TO MD002

IF (instatusW3=2 AND HU001 = 1,2 AND IF MD002FFW1 = 3) GO TO MD002

IF (instatusW3=1,3 AND HU001 = 1,2 AND IF MD002FFW2 = 2) GO TO MD002a

IF (instatusW3=2 AND HU001 = 1,2 AND IF MD002FFW1 = 2) GO TO MD002a

IF (instatusW3=1,3 AND HU001 = 1,2 AND IF MD002FFW2 = 1) GO TO MD002a

IF (instatusW3=2 AND HU001 = 1,2 AND IF MD002FFW1 = 1) GO TO MD002a

IF (HU001 = 96,98,99 OR interview=5, 6, 7) GO TO NEXT SECTION

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 GO TO NEXT SECTION
- 98. DK GO TO NEXT SECTION
- 99. RF GO TO NEXT SECTION

MD002a

IWER: At the last interview [you] agreed to provide us with [your] medical card number to give us a complete picture about [your] health and treatment history. I would just like to check that we have recorded the correct number. Can you please tell me [your] medical card number?

IWER: Ask the respondent to show you their medical card so that the correct number can be recorded by you. Each medical card number is composed of 8 characters and ends in the letter A, B or C. If the letter on the medical card number given to you ends in D or higher, please confirm (if possible by seeing the card) that the number they have given you is indeed their medical card number.

- 1. Yes Go to MD003
- 5. No GO TO NEXT SECTION
- 98. DK GO TO NEXT SECTION
- 99. RF GO TO NEXT SECTION

(Note to Scripters - This has to be 8 characters and that it must end in a letter. Also if the last letter is D or higher, the interviewer could get a warning to re-check that it is indeed the medical card number they have given.)

MD003: Please can you tell me [your] medical card number?

IWER: ASK THE RESPONDENT TO SHOW YOU THEIR MEDICAL CARD SO THAT THE CORRECT NUMBER CAN BE RECORDED BY YOU. EACH MEDICAL CARD NUMBER IS COMPOSED OF 8 CHARACTERS AND ENDS IN THE LETTER A, B OR C. IF THE LETTER ON THE MEDICAL CARD NUMBER GIVEN TO YOU ENDS IN D OR HIGHER, PLEASE CONFIRM (IF POSSIBLE BY SEEING THE CARD) THAT THE NUMBER THEY HAVE GIVEN YOU IS INDEED THEIR MEDICAL CARD NUMBER.

- 1.....8 Characters GO TO MD004
- 98. DK GO TO NEXT SECTION
- 99. RF GO TO NEXT SECTION

(Note to Scripters - This has to be 8 characters and that it must end in a letter. Also if the last letter is D or higher, the interviewer could get a warning to re-check that it is indeed the medical card number they have given.)

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 NEXT SECTION

SECTION 22. CONTACT AND ADDRESS

22.1 Nominated Other Contacts

Instructions for all respondents

If (HH005 = 1 –Self interview) GO TO CT001

IF (HH005 = 2,3,4,5,6 - Proxy interview) GO TO NEXT SECTION (PC001)

CT001

If (HH005 = 1 –Self interview) USE WORDING A

IF (HH005 = 2,3,4,5,6 - Proxy interview) USE WORDING B

WORDING A: In case you move from this address, could you give me the name, address, telephone number and relationship of two people who do not live with you and who would know where you are, in case we need to contact you in the future?

WORDING B: Could you give me the name, address, telephone number and relationship of two other people who would know where [Rname] is, in case we need to contact them in the future?

Note: INTERVIEWER: If the respondent is unwilling to give address as they are not planning to move, add: 'As people who aren't planning to move sometimes do move because their circumstances change, we would be very grateful if you could give us the name and address of a contact person just in case you do move unexpectedly.'

INTERVIEWER: If given, write the details

1 Willing to give one contact address **GO TO CT001_01**

2 Willing to give two contact addresses **GO TO CT001_01**

3 Unwilling to give any contact address (SEE NOTE) **GO TO END OF SECTION 22.1**

4 Does not wish to be re-contacted **GO TO END OF SECTION 22.1**

CT001_01: Interviewer: write the details of address and telephone

NAME - Text: Up to 60 characters

ADDRESS - Text: Up to 100 characters

TELEPHONE NUMBER - : Up to 20 numbers

CT001_02: Interviewer: write the details of address and telephone

NAME - Text: Up to 60 characters

ADDRESS - Text: Up to 100 characters

TELEPHONE NUMBER - : Up to 20 numbers

If (HH005 = 1 - Self interview) GO TO NEXT SECTION (PR001)

IF (HH005 = 2,3,4,5,6 - Proxy interview) GO TO END OF SECTION

22.2 Proxy Interview Consent

If (HH005 = 1 –Self interview) GO TO PR001

IF (HH005 = 2,3,4,5,6 - Proxy interview) GO TO PC001

PR001 Sometime in the next two years, we will wish to contact you again. In the event that we are still unable to contact you personally for example if you are ill at the time, would you be prepared for us to collect information about your circumstances from [spouse/partner], a relative or a close friend?

INTERVIEWER: If asked please clarify further: 'For example, we would not intentionally approach someone if you were away on holiday or temporarily ill.

We would only approach the person if you were too ill. We would not give the person details of what you have said in previous interviews.' INTERVIEWER: If given, write details in PA002

1 Willing to give proxy nomination **GO TO PR001a**

2 Unwilling to give proxy nomination **GO TO END OF SECTION**

3 Does not wish to be interviewed by proxy **GO TO END OF SECTION**

PR001a – Who would be the best person for us to approach?

RECORD NAME OF PROXY NOMINATION

Name	
1.	Spouse/partner name
2	Through N_HH member's name (GO TO PR002na)
3	Through N_non-resident children's name (GO TO PR002na)
	[ROW PROVIDED BY CAPI AS NECESSARY]
95	OTHER NOT IN THE LIST_SPECIFY: (GO TO PR002na)

Interviewer: write the details of address and telephone

PR002na: FULL NAME - Text: Up to 60 characters (**If PR001a is a HH member GO TO PR002te – do not ask for address**)

PR002ad: ADDRESS - Text: Up to 100 characters

PR002te: TELEPHONE NUMBER - : Up to 20 numbers

GO TO END OF SECTION

PC001 TILDA is a longitudinal study. This means we try to keep in contact with our respondents every two years. As you are answering on behalf of [Rname], we may wish to contact you again within the next two years. Could you give me your name, address and telephone number so that we can contact you in the future?

1 Willing to give contact address **GO TO PC002**

2 Unwilling to give any contact address **GO TO CT001**

3 Does not wish to be re-contacted **GO TO CT001**

PC002: Interviewer: write the details of address and telephone

NAME - Text: Up to 60 characters

ADDRESS - Text: Up to 100 characters

TELEPHONE NUMBER - : Up to 20 numbers

22.3 Exit interview

FOR EACH WAVE 1 AND/OR WAVE 2 RESPONDENT IN THE HOUSEHOLD GRID

IF CS036_01- CS036_19 = 1 (DECEASED) GO TO PA001

IF CS036_01- CS036_19 = 2 OR 4 (MOVED) GO TO MV001

IF CS036_01- CS036_19 = 3 (INSTITUTION) GO TO NH001

ELSE GO TO END OF SECTION

PA001 THROUGH PA005 ONLY APPLY FOR ELIGIBLE HH MEMBER WHO HAS DIED AND HAD PARTICIPATED IN WAVE 1 AND/OR WAVE 2

PA001 I was told earlier that [HH member name CS023_p1_Name to CS023_p19_Name] has passed away. In order to ensure that we understand the end of [his/her] life, we have some questions we would like to ask about [him/her]. Would you be willing to answer these questions at a future date?

INTERVIEWER: Give details of content of end of life interview.

It will cover the deceased respondent's activities in their last year of life, [his/her] health and some summary financial information.

1 Willing to answer exit interview face-to-face **GO TO PA005**

2 Unwilling to answer exit interview themselves but would nominate another **TRY TO PERSUADE**

3 SPONTANEOUS ONLY: Unwilling for anyone to answer the exit interview **TRY TO PERSUADE** (ELSA)

IF ((PA001 = 2 OR 3) & DATE OF DEATH LESS THAN 6 MONTHS AGO –CS041_01-CS041_19) GO TO PA002

IF ((PA001 = 2 OR 3) & DATE OF DEATH MORE THAN 6 MONTHS AGO – CS041_01-CS041_19) GO TO PA003

PA002 I understand that [HH members name]'s death occurred very recently. If at some time in the future we'd like to talk to you about [him/her], may we contact you to see if you would be willing to help us?

1 Willing to be approached **GO TO END OF SECTION**

2 Unwilling to be approached **GO TO PA003** (ELSA)

PA003 **Could you nominate someone else who could answer the questions?** (If appropriate, refer to stable address contact).

1 Willing to give details of exit interview informant **GO TO PA004**

2 Unwilling to give details of exit interview informant **TRY TO PERSUADE**

NOTE:

If respondent says unwilling, you should make every effort to persuade the respondent of the importance of the study and the benefits to people living in Ireland. Emphasise that [Name of deceased] wanted to be re-contacted by the study and that [his/her] contribution to the study was very generous and has been very valuable.

Also attempt to understand reasons for not wanting to be interviewed 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 'Unwilling'

PA004: Interviewer: write the details of address and telephone

NAME - Text: Up to 60 characters

ADDRESS - Text: Up to 100 characters

TELEPHONE NUMBER - : Up to 20 numbers

PA005 How is the potential exit interview respondent related to [HH members name]

13. Spouse/partner
 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)
 12. Non-relative (specify)
- [Don't know and Refusal are not allowed]

BL: GO TO END OF SECTION

22.4 Split Household or Participants Moved House

MV001 THROUGH MV002 ONLY APPLY FOR HH MEMBER WHO MOVED OUT AND HAD PARTICIPATED IN WAVE 1 AND/OR WAVE 2

MV001_X You told me that [HH member name CS023_p1_Name to CS023_p19_Name] has moved out. We are interested in understanding the changes that happen in people's lives, so we'd like to invite [HH member name] to continue to participate in this survey.

Could you please give me [HH member name]'s full name, address & telephone number?

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. Emphasise that [HH member name] wanted to be re-contacted by the study and that [his/her] contribution to the study has been very valuable.

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 [HH member name] to be re-contacted code 'NO'

1. Yes – Record name, address and telephone number

5. No **GO TO END OF SECTION**

MV002na Record [HH member name]'s name in full - Text: Up to 60 characters

MV002co **What county does [HH member name] live in?**

1. Antrim	13. Kerry	25. Roscommon
2. Armagh	14. Kildare	26. Sligo
3. Carlow	15. Kilkenny	27. Tipperary
4. Cavan	16. Laois	28. Tyrone
5. Clare	17. Leitrim	29. Waterford
6. Cork	18. Limerick	30. Westmeath
7. Derry	19. Longford	31. Wexford
8. Donegal	20. Louth	32. Wicklow
9. Down	21. Mayo	33. Not in Ireland
10. Dublin	22. Meath	98. DK
11. Fermanagh	23. Monaghan	99. RF
12. Galway	24. Offaly	

IF (MV002co ≠ 33) ASK MV002ad OTHERS GO TO NEXT SECTION

MV002ad RECORD ADDRESS FOR [HH member name]- Text: Up to 100 characters

MV002te RECORD [HH member name]'s TELEPHONE NUMBER - : Up to 20 numbers

-98 DK

-99 RF

-96 Has no phone

(Hrs)

BL: GO TO END OF SECTION

22.5 Nursing Home Contacts

NH001 THROUGH NH005 ONLY APPLY FOR HH MEMBER WHO MOVED TO NURSING HOME AND HAD PARTICIPATED IN WAVE 1 AND/OR WAVE 2

Repeat for each relevant respondent so variable names use xxxxx_01, xxxxx_02, xxxxx_03, xxxxx_04 format

NH001 You told me that [HH member name:CS023_p1_Name to CS023_p19_Name] has moved into a (nursing home/residential home/other institution). We are interested in understanding the changes that happen in people's lives, so we'd like to invite [HH member name] to continue to participate in this survey. Do you think that [he/she] will be able to answer the questions on [his/her] own behalf if we were to approach [him/her] in the future? [NH001_01 to NH001_04], [NHNUM_01 to NHNUM_04 are feedforward variables for HH members]

1 Yes GO TO NH004

5 No GO TO NH002

**98 Don't know GO TO NH002
(Elsa)**

NH002. Is there someone who could accompany me to the nursing home to assist [HH member name] with the interview or to answer the questions on [his/her] behalf? [NH002_01 to NH002_04]

1 Willing to give institution proxy informant details GO TO NH003

99 Unwilling to give institution proxy informant details (IWER: SEE NOTE) GO TO HA SECTION

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. Emphasise that [HH member name] wanted to be re-contacted by the study and that [his/her] contribution to the study has been very valuable. 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 [HH member name] to be re-contacted code 'NO'

NH003: Interviewer: write the details of address and telephone

NAME - Text: Up to 60 characters [NH003NA_01 to NH003NA_04]

ADDRESS - Text: Up to 100 characters [NH003AD_01 to NA003AD_04]

TELEPHONE NUMBER - : Up to 20 numbers [NH003TE_01 to NH003TE_04]

NH004 Would you be prepared to give me the contact details of [HH member name]'s residential/nursing home? [NH004_01 to NH004_04]

1 Willing to give institution details GO TO NH005

99 Unwilling to give institution details (SEE NOTE) GO TO HA SECTION

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. Emphasise that [HH member name] wanted to be re-contacted by the study and that [his/her] contribution to the study has been very valuable.

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 [**HH member name**] to be re-contacted code 'NO'

NH005 Interviewer: write the details of address and telephone

INSTITUTION NAME - Text: Up to 60 characters [**NH005NA_01 to NH005NA_04**]

ADDRESS - Text: Up to 100 characters [**NH005AD_01 to NH005AD_04**]

TELEPHONE NUMBER - : Up to 20 numbers **NH005TE_01 to NH005TE_04**

BL: GO TO END OF SECTION

If (HH005 = 1 –Self interview) GO TO HA SECTION (SECTION 23)

IF (HH005 = 2,3,4,5,6 - Proxy interview) GO TO HA SECTION (SECTION 23)

SECTION 23. HEALTH ASSESSMENT (HA)

If (HH005 = 1 –Self interview) GO TO HA001

IF (HH005 = 2,3,4,5,6 - Proxy interview) AND in_ha (W1) = 1 GO TO HA007

IF (HH005 = 2,3,4,5,6 - Proxy interview) AND in_ha (W1) = 2 GO TO HA013

IF (HH005 = 2,3,4,5,6 - Proxy interview) AND in_ha (W1) = 3 GO TO NEXT SECTION (FN001)

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 centre in Dublin) 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 ASSESSMENT CENTRE 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 CENTRE IS LOCATED AND THAT THE STUDY WILL REIMBURSE THEM 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 in the next few days. Explain to the respondent that the executive officer will confirm their appointment by post and will call 2 days in advance to re-confirm the appointment and answer any questions the respondent may have. Don't forget to leave the health assessment centre 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 within the next few days. PLEASE CLEARLY INDICATE THAT THE RESPONDENT IS UNDECIDED.

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

- | | | |
|---|--------------------|-------------------|
| 1 Own doctor already has information | GO TO HA004 | [ha003_01] |
| 2 Given enough time already to this survey/expecting too much | GO TO HA004 | [ha003_02] |
| 3 Too busy, cannot spare the time | GO TO HA004 | [ha003_03] |

4 Had enough of medical tests/medical profession at present time	GO TO HA004	[ha003_04]
5 Worried about what nurse may find out/'might tempt fate'	GO TO HA004	[ha003_05]
6 Scared/of medical profession/ particular medical procedures (e.g. blood sample)	GO TO HA004	[ha003_06]
7 Not interested/Can't be bothered	GO TO HA004	[ha003_07]
8 Unable to attend due to mobility problems	GO TO HA004	[ha003_08]
9 Health assessment centre is too far away	GO TO HA004	[ha003_09]
95 Other reason (specify)	GO TO HA004	[ha003_95]

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 HOME HEALTH ASSESSMENT 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 home health assessment 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 within the next few days. PLEASE CLEARLY INDICATE THAT THE RESPONDENT IS UNDECIDED.

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.

1 Own doctor already has information	[ha006_01]
2 Given enough time already to this survey/expecting too much	[ha006_02]
3 Too busy, cannot spare the time	[ha006_03]
4 Had enough of medical tests/medical profession at present time	[ha006_04]
5 Worried about what nurse may find out/'might tempt fate'	[ha006_05]
6 Scared/of medical profession/ particular medical procedures (e.g. blood sample)	[ha006_06]
7 Not interested/Can't be bothered	[ha006_07]
8. Unable to attend due to mobility problems	[ha006_08]
95 Other reason (specify)	[ha006_95]

IWER: Please specify other reason for refusal. [ha006oth]

HA007: READ OUT There are two parts to this survey. You have just helped us with the first part. As part of wave 1 (**Rname**) also participated in a centre based health assessment (IWER Inform respondent about the location of the health centre in Dublin).

INTERVIEWER: REFER THE PROXY RESPONDENT TO THE HEALTH ASSESSMENT CENTRE INFORMATION BOOKLET AND SAY IF ASKED FOR DETAILS THAT - 'THE NURSE WILL TAKE SOME MEASUREMENTS INCLUDING THEIR HEIGHT, WEIGHT AND BLOOD PRESSURE ETC. EXPLAIN TO THE PROXY RESPONDENT THAT THEY WILL HAVE TO ACCOMPANY THE TILDA RESPONDENT TO THE HEALTH ASSESSMENT CENTRE AND THAT THE NURSE WILL ONLY TAKE MEASUREMENTS THAT THE TILDA RESPONDENT IS ABLE AND WILLING TO COMPLETE. ALSO EXPLAIN THAT THE STUDY WILL REIMBURSE BOTH OF THEIR TRANSPORT COSTS TO AND FROM THE DUBLIN HEALTH ASSESSMENT CENTRE.

With your permission, we would like to make an appointment for (**Rname**) with the nurse at the health assessment centre.

- | | |
|---|--------------------|
| 1 Yes to visit to health assessment centre | GO TO HA008 |
| 2 No to visit to health assessment centre | GO TO HA009 |
| 3 Undecided, nurse to phone to discuss health assessment in more detail | GO TO HA008 |

HA008: IWER: Phone health centre executive officer to arrange a visit to the health centre at a time and date that suits the proxy and TILDA respondent. (NOTE: proxy respondent must accompany TILDA respondent). If after 5:30 pm leave a message on the answering service containing TILDA respondent's TILDA Serial Number (XX999), name, address, telephone number and preferred date and time for visit. Inform the proxy respondent that the TILDA executive officer will phone back to arrange an appointment within the next few days. Explain to the proxy and TILDA respondent that the executive officer will confirm the appointment by post and will call 2 days in advance to re-confirm the appointment and answer any questions the respondent may have. Don't forget to leave the health assessment centre information leaflet. If the proxy respondent is undecided and wants to speak with a nurse, then leave instructions regarding the respondent's TILDA Serial Number (XX999), and the name, address and telephone number of the proxy respondent on the answering service and inform the proxy respondent that they will be called by a nurse within the next few days. PLEASE CLEARLY INDICATE THAT THE RESPONDENT IS UNDECIDED.

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

HA009: **IWER:** Record reason why proxy respondent refused visit to health centre

- | | | |
|--|--------------------|-------------------|
| 1 Own doctor already has information | GO TO HA010 | [ha009_01] |
| 2 Given enough time already to this survey/expecting too much | GO TO HA010 | [ha009_02] |
| 3 Too busy, cannot spare the time | GO TO HA010 | [ha009_03] |
| 4 Had enough of medical tests/medical profession at present time | GO TO HA010 | [ha009_04] |
| 5 Worried about what nurse may find out/'might tempt fate' | GO TO HA010 | [ha009_05] |
| 6 Scared/of medical profession/ particular medical procedures | GO TO HA010 | [ha009_06] |
| 7 Not interested/Can't be bothered | GO TO HA010 | [ha009_07] |
| 8. Unable to attend due to mobility problems | GO TO HA010 | [ha009_08] |

9. Health assessment centre is too far away **GO TO HA010** [ha009_09]
 10 Proxy respondent does not think the TILDA participant is well enough **GO TO HA010** [ha009_10]

95. Other reason (specify) **GO TO HA010** [ha009_95]

IWER: Please specify other reason for refusal. [ha009oth]

HA010: INTERVIEWER: IF THE PROXY RESPONDENT IS UNWILLING TO CONSENT TO THE TILDA RESPONDENT HAVING A CENTRE BASED HEALTH ASSESSMENT YOU SHOULD OFFER THEM A HOME ASSESSMENT BY A TRAINED NURSE. SHOW THEM THE HOME HEALTH ASSESSMENT INFORMATION BOOKLET AND EXPLAIN THAT A TRAINED NURSE WILL VISIT THE TILDA RESPONDENTS HOME AT A TIME THAT BEST SUITS THEM TO CARRY OUT A SHORTENED MEDICAL ASSESSMENT. EXPLAIN TO THE PROXY RESPONDENT THAT THEY WILL HAVE TO BE PRESENT IN THE TILDA RESPONDENTS HOME DURING THE HEALTH ASSESSMENT AND THAT THE NURSE WILL ONLY TAKE MEASUREMENTS THAT THE TILDA RESPONDENT IS ABLE AND WILLING TO COMPLETE.

Would you be happy for a nurse to visit **(Rname)** home to carry out a health assessment?

1 Yes to home health assessment **Go to HA011**
 2 No to home health assessment **Go to HA012**
 3 Undecided, nurse to phone to discuss health assessment in more detail **Go to HA011**

HA011: IWER: Phone health centre executive officer and inform her that a proxy respondent has agreed to a TILDA participant having a home assessment. Pass on the TILDA Serial Number (XX999) name, address, and telephone number of the proxy respondent. If after 5.30pm leave a message on the answering service containing the proxy respondent's details. Inform the proxy and TILDA 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 proxy respondent is undecided and wants to speak with a nurse, then leave instructions regarding the TILDA Serial Number (XX999), name, address and telephone number of the proxy respondent on the answering service and inform the proxy respondent that they will be called by a nurse within the next few days. PLEASE CLEARLY INDICATE THAT THE RESPONDENT IS UNDECIDED.

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

HA012: IWER: Record reason why proxy respondent refused visit by a nurse to the TILDA participant's home.

1 Own doctor already has information [ha012_01]
 2 Given enough time already to this survey/expecting too much [ha012_02]
 3 Too busy, cannot spare the time [ha012_03]
 4 Had enough of medical tests/medical profession at present time [ha012_04]
 5 Worried about what nurse may find out/'might tempt fate' [ha012_05]
 6 Scared/of medical profession/ particular medical procedures [ha012_06]
 7 Not interested/Can't be bothered/ [ha012_07]
 8. Unable to attend due to mobility problems [ha012_08]
 9. Proxy respondent does not think the TILDA participant is well enough [ha012_09]
 95. Other reason (specify) [ha012_95]

IWER: Please specify other reason for refusal.

[ha012oth]

HA013: READ OUT There are two parts to this survey. You have just helped us with the first part. As part of wave 1 (**Rname**) also participated in a home health assessment

INTERVIEWER: REFER THE PROXY RESPONDENT TO THE HOME HEALTH ASSESSMENT INFORMATION BOOKLET AND SAY IF ASKED FOR DETAILS THAT - 'THE NURSE WILL TAKE SOME MEASUREMENTS INCLUDING THEIR HEIGHT, WEIGHT AND BLOOD PRESSURE ETC. EXPLAIN THAT A TRAINED NURSE WILL VISIT THE TILDA RESPONDENTS HOME AT A TIME THAT BEST SUITS THEM. EXPLAIN TO THE PROXY RESPONDENT THAT THEY WILL HAVE TO BE PRESENT IN THE TILDA RESPONDENTS HOME DURING THE HEALTH ASSESSMENT AND THAT THE NURSE WILL ONLY TAKE MEASUREMENTS THAT THE TILDA RESPONDENT IS ABLE AND WILLING TO COMPLETE.

Would you be happy for a nurse to visit (**Rname**) home to carry out a home health assessment?

- | | |
|---|--------------------|
| 1 Yes to home health assessment | Go to HA014 |
| 2 No to home health assessment | Go to HA015 |
| 3 Undecided, nurse to phone to discuss health assessment in more detail | Go to HA014 |

HA014: **IWER:** Phone health centre executive officer and inform her that a proxy respondent has agreed to a TILDA participant having a home assessment. Pass on the TILDA Serial Number (XX999) name, address, and telephone number of the proxy respondent. If after 5.30pm leave a message on the answering service containing the proxy respondent's details. Inform the proxy and TILDA 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 proxy respondent is undecided and wants to speak with a nurse, then leave instructions regarding the TILDA Serial Number (XX999), name, address and telephone number of the proxy respondent on the answering service and inform the proxy respondent that they will be called by a nurse within the next few days. PLEASE CLEARLY INDICATE THAT THE RESPONDENT IS UNDECIDED.

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

HA015: **IWER:** Record reason why proxy respondent refused visit by a nurse to the TILDA participant's home.

- | | |
|---|------------|
| 1 Own doctor already has information | [ha015_01] |
| 2 Given enough time already to this survey/expecting too much | [ha015_02] |
| 3 Too busy, cannot spare the time (if Code 2 does not apply) | [ha015_03] |
| 4 Had enough of medical tests/medical profession at present time | [ha015_04] |
| 5 Worried about what nurse may find out/'might tempt fate' | [ha015_05] |
| 6 Scared/of medical profession/ particular medical procedures | [ha006_06] |
| 7 Not interested/Can't be bothered | [ha015_07] |
| 8. Unable to attend due to mobility problems | [ha015_08] |
| 9. Proxy respondent does not think the TILDA participant is well enough | [ha015_09] |
| 95. Other reason (specify) | [ha015_95] |

IWER: Please specify other reason for refusal.

[ha015oth]

IWER: SUPPLY RESPONDENT WITH SELF-COMPLETION QUESTIONNAIRE

BL: GO TO FN SECTION

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

FN003. Check phone number provided on contact sheet is correct

If (HH005 = 1 –Self interview) GO TO email1

IF (HH005 = 2,3,4,5,6 - Proxy interview) GO TO Qxx3

email1: **Can you please tell me your email address?**

NOTE: If asked why we want an email address, please explain:

- TILDA will add your email to a TILDA respondent mailing list.
- TILDA produces an electronic newsletter keeping respondents updated on news and events relevant to the study.
- TILDA will email respondents this newsletter twice annually
- You can take your email address off this list any time you like by contacting TILDA or by using the link provided in each email sent to you.

Please tell me the first part of the address before the @ sign

(text up to 50 characters)

95 Does not have an email address **GO TO SCQ REMINDER**

98 DK **GO TO SCQ REMINDER**

99 RF **GO TO SCQ REMINDER**

Emal2: **Thank you. Please now tell me the second part of the address after the @ sign.**

Interviewer note: Please code the following or other specify if not listed

- | | |
|---------------------|----------------------------|
| 2. AOL.com | 17.O2.co.uk |
| 3. Blueyonder.co.uk | 18.Sky.com |
| 4. Btinternet.com | 19.Talk21.com |
| 5. Btopenworld.com | 20.Talktalk.net |
| 6. Fsmail.net | 21.Tesco.net |
| 7. Gmail.com | 22.Tiscali.co.uk |
| 8. Googlemail.com | 23.Virgin.net |
| 9. Hotmail.com | 24.Yahoo.co.uk |
| 10.Hotmail.co.uk | 25.Yahoo.com |
| 11.Eircom.net | 26.Yahoo.ie |
| 12.Live.co.uk | 95. Other (please specify) |
| 13.Live.com | [Emal2oth] |
| 14.Live.ie | |
| 15.msn.com | |
| 16.ntworld.com | |

Emal3:
READ OUT

May I just check, your email address is "<emal1> @ <emal2>"

INTERVIEWER PLEASE PROCEED TO THE NEXT SCREEN TO CONFIRM

- 1 Yes, correct **GO TO SCQ REMINDER**
- 5 No, incorrect **PLEASE REDO EMAIL ADDRESS**

SCQREMINDER

NOTE:

Please remind respondent that you have given [him/her] a questionnaire to complete in [his/her] own time. We greatly value [his/her] answers to these questions.

Qxx3

INTERVIEWER:

Now complete a promissory note by writing on the 5 character Tilda serial number (<Tilda_Serial>) and hand it over to the respondent/proxy

Press '1' to continue

Qxx4: As we are going to be sending you out a cheque for the 20 Euros, can I just confirm the name that you want the cheque made payable to.

Are you happy to have the cheque made payable to <R full name>

- 2. Yes, agree make cheque out to the name above
- 5. No (capture new name on the next screen – Qxx5)

Qxx5:

What name do you want the cheque made payable to?

IWER: END OF QUESTIONNAIRE. THANK RESPONDENT



INSTRUCTIONS

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 ☐ 4 5

Sometimes you will find an instruction telling you which questions to answer next like this

Yes ☐

NO ☒ If 'N O' GO TO question **1**

HOW TO RETURN THIS QUESTIONNAIRE

Please give the questionnaire to the interviewer or post it back in the prepaid 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"/>
Visit 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. 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"/>

3. WE WOULD NOW LIKE TO ASK YOU SOME QUESTIONS ABOUT YOUR SPOUSE OR PARTNER WITH WHOM YOU LIVE.

IF YOU DO NOT HAVE A HUSBAND, WIFE OR PARTNER WITH WHOM YOU LIVE,
PLEASE GO TO QUESTION 5

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?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

How much can you rely on him/her 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 him/her if you need to talk about your worries?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

How much does he/she make too many demands on you?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

How much does he/she criticise you?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

How much does he/she let you down when you are counting on him/her?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

How much does he/she get on your nerves?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------

4. HOW CLOSE IS YOUR RELATIONSHIP WITH YOUR SPOUSE OR PARTNER WITH WHOM YOU LIVE?

PLEASE TICK ONE BOX

Very close

☐

quite close

☐

Not very close

☐

Not at all close

☐

5. WE WOULD NOW LIKE TO ASK YOU SOME QUESTIONS ABOUT YOUR CHILDREN.

IF YOU DO NOT HAVE CHILDREN, PLEASE GO TO QUESTION 6

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?

☐☐☐☐

6. 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 ☐ If 'N O' GO TO QUESTION 8



7. 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"/>
--------------------------	--------------------------	--------------------------	--------------------------

8. 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 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"/>
--------------------------	--------------------------	--------------------------	--------------------------



9. THIS QUESTION IS ABOUT HOW YOU HAVE FELT IN THE PAST MONTH.

PLEASE TICK ONE BOX PER LINE

HARDLY
EVER ALMOST
NEVER SOMETIMES 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"/>
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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"/>
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10. WE WOULD LIKE TO ASK SOME QUESTIONS ABOUT HOW CONCERNED YOU ARE ABOUT THE POSSIBILITY OF FALLING. FOR EACH OF THE FOLLOWING ACTIVITIES, PLEASE INDICATE HOW CONCERNED YOU ARE THAT YOU MIGHT FALL IF YOU DID THIS ACTIVITY.

IF YOU CURRENTLY DON'T DO THE ACTIVITY (E.G. IF SOMEONE DOES YOUR SHOPPING FOR YOU), PLEASE ANSWER TO SHOW WHETHER YOU THINK YOU WOULD BE CONCERNED ABOUT FALLING IF YOU DID THE ACTIVITY.

PLEASE TICK ONE BOX PER LINE	NOT AT ALL CONCERNED	SOMEWHAT CONCERNED	FAIRLY CONCERNED	VERY CONCERNED
Cleaning the house (e.g. sweep, vacuum, dust).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting dressed or undressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preparing simple meals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Taking a bath or shower.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Going to the shop.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting in or out of a chair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Going up or down stairs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking around in the neighbourhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaching for something above your head or on the ground.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Going to answer the telephone before it stops ringing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking on a slippery surface (e.g. wet or icy).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Visiting a friend or relative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking in a place with crowds.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking on an uneven surface (e.g. rocky ground, poorly maintained pavement).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking up or down a slope.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Going out to a social event (e.g. religious service, family gathering, or club meeting).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



11. THE FOLLOWING ARE WAYS PEOPLE REACT TO VARIOUS DIFFICULT, STRESSFUL, OR UPSETTING SITUATIONS. PLEASE CIRCLE A NUMBER FROM 1 TO 5 ON EACH LINE FOR EACH OF THE FOLLOWING ITEMS. INDICATE HOW MUCH YOU ENGAGE IN THESE TYPES OF ACTIVITIES WHEN YOU ENCOUNTER A DIFFICULT, STRESSFUL OR UPSETTING SITUATION.

PLEASE CIRCLE ONE NUMBER PER LINE	NOT AT ALL				VERY MUCH
Take some time off and get away from the situation.	1	2	3	4	5
Focus on the problem and see how I can solve it.	1	2	3	4	5
Blame myself for having gotten into this situation.	1	2	3	4	5
Treat myself to a favourite food or snack.	1	2	3	4	5
Feel anxious about not being able to cope.	1	2	3	4	5
Think about how I solved similar problems.	1	2	3	4	5
Visit a friend.	1	2	3	4	5
Determine a course of action and follow it.	1	2	3	4	5
Buy myself something.	1	2	3	4	5
Blame myself for being too emotional about the situation.	1	2	3	4	5
Work to understand the situation.	1	2	3	4	5
Become very upset.	1	2	3	4	5
Take corrective action immediately.	1	2	3	4	5
Blame myself for not knowing what to do.	1	2	3	4	5
Spend time with a special person.	1	2	3	4	5
Think about the event and learn from my mistakes.	1	2	3	4	5
Wish that I could change what had happened or how I felt.	1	2	3	4	5
Go out for a snack or meal.	1	2	3	4	5
Analyse the problem before reacting.	1	2	3	4	5
Focus on my general inadequacies.	1	2	3	4	5
Phone a friend.	1	2	3	4	5



**12. 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 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 being in the company of others.

☐☐☐☐

I feel satisfied with the way my life has turned out.

☐☐☐☐

I feel that life is full of opportunities.

☐☐☐☐



13. HAvE yOU EvER HAd dRINKS CONTAININg ALCOHOL, E.g. g LASS OF WINE, g LASS OF bEER, ETC.?

PLEASE TICK ONE BOX

YeS ☐

NO ☐ If 'N O' GO TO que STION **27**

14. HAvE yOU HAd dRINKS CONTAININg ALCOHOL OF ANY kINd IN THE LAST 6 MONTHS?

PLEASE TICK ONE BOX

YeS ☐

NO ☐ If 'N O' GO TO que STION **27**

15. dURING THE LAST 6 MONTHS, HOW OFTEN HAvE yOU HAd d RINK S CONTAININg ALCOHOL, Lik E bEER, CIdER, WINE, SpIRITS OR COCK TAILS?

PLEASE TICK ONE BOX

Daily

☐

4-6 days a week

☐

2-3 days a week

☐

Once a week

☐

2-3 days a month

☐

Once a month

☐

One or a couple of days per year

☐

GO TO que STION **17**

16. MORE RECENTLY (I.E. IN THE LAST MONTH), WOULD YOU DESCRIBE YOUR CURRENT ALCOHOL INTAKE AS:

PLEASE TICK ONE BOX

Daily

☐

4-6 days a week

☐

2-3 days a week

☐

Once a week

☐

2-3 days a month

☐

Once a month

☐

17. FROM THE PICTURES BELOW, PLEASE TICK THE BOX THAT REPRESENTS THE DRINK YOU WOULD BE MOST LIKELY TO DRINK

PLEASE TICK ONE BOX

Full pint of beer/
cider/lager

Full pint of stout

1/2 pint or glass
of stout/beer/
cider/lager

Large glass of
wine

Measure of
spirit

Pre-mixed
spirit drink (e.g.
Smirnoff Ice)

☐☐☐☐☐☐

18. THINKING ABOUT YOUR DRINK OF CHOICE, ON AVERAGE, IN THE LAST 6 MONTHS ON THE DAYS THAT YOU DRANK, ABOUT HOW MANY DID YOU HAVE?

PLEASE TICK ONE BOX

1

☐

5

☐

9

☐

2

☐

6

☐

10

☐

3

☐

7

☐

11 or more

☐

4

☐

8

☐



19. THINKING ABOUT YOUR DRINK OF CHOICE, DURING THE LAST 6 MONTHS, APPROXIMATELY WHAT WAS THE LARGEST NUMBER OF DRINKS YOU HAD ON ANY ONE DAY?

PLEASE TICK ONE BOX

1	<input type="checkbox"/>	5	<input type="checkbox"/>	9	<input type="checkbox"/>
2	<input type="checkbox"/>	6	<input type="checkbox"/>	10	<input type="checkbox"/>
3	<input type="checkbox"/>	7	<input type="checkbox"/>	11 or more	<input type="checkbox"/>
4	<input type="checkbox"/>	8	<input type="checkbox"/>		

20. HOW OFTEN IN THE LAST 6 MONTHS WOULD YOU SAY YOU DRANK THE MAXIMUM NUMBER OF DRINKS YOU INDICATED IN THE LAST QUESTION?

PLEASE TICK ONE BOX

Daily or almost daily	<input type="checkbox"/>
Weekly	<input type="checkbox"/>
Monthly	<input type="checkbox"/>
Less than monthly	<input type="checkbox"/>

21. HAVE YOU EVER FELT THAT YOU SHOULD CUT DOWN ON DRINKING?

PLEASE TICK ONE BOX

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

22. HAVE YOU REDUCED YOUR ALCOHOL INTAKE IN THE LAST 2 YEARS?

PLEASE TICK ONE BOX

Yes	<input type="checkbox"/>
No	<input type="checkbox"/> If 'NO' GO TO QUESTION 24



23. WHy dId yOU REdUCE yOUR ALCOHOL INTAkE?

PLEASE TICK ONE BOX

Personal choice

☐

Doctor's advice

☐

Medication

☐

Illness or ill health

☐

Other reasons (please specify)

☐

24. HAvE pEOpLE EvER ANNOyEd yOU by CRITICISINg yOUR dRINK INg?

PLEASE TICK ONE BOX

YeS

☐

NO

☐

25. HAvE yOU EvER FELT bAd OR g UILTy AbOUT dRINK INg?

PLEASE TICK ONE BOX

YeS

☐

NO

☐

26. HAvE yOU EvER TAKEN A dRINK FIRST THINg IN THE mORNING TO STEAdy yOUR NERvES OR g ET RId OF A HANg OvER?

PLEASE TICK ONE BOX

YeS

☐

NO

☐



27. WE WOULD NOW LIKE TO ASK SOME QUESTIONS ABOUT HOW MUCH YOU WORRY ABOUT THINGS. PLEASE INDICATE HOW TYPICAL OR CHARACTERISTIC EACH STATEMENT IS OF YOU.

PLEASE TICK ONE BOX PER LINE	NOT AT ALL TYPICAL		SOMEWHAT TYPICAL		VERY TYPICAL
My worries overwhelm me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Many situations make me worry.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I know I should not worry about things, but I just cannot help it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
When I am under pressure, I worry a lot.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am always worrying about something.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As soon as I finish one task, I start to worry about everything else I must do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have been a worrier all my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have been worrying about things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28. HAVE ANY OF YOUR CLOSE FRIENDS DIED IN THE PAST TWO YEARS?

PLEASE TICK ONE BOX

Yes ☐

No ☐



**29. WHAT IS THE main WAY IN WHICH yOU HEAT yOUR ACCOmMOdATION
IN THE WINTER (TICK ONE b Ox ONLY)**

PLEASE TICK ONE BOX

Central heating

☐

Open fire onl

☐

Portable heaters only

☐

Open fire and portable heater

☐

Closed solid fuel appliance only

☐

Closed solid fuel appliance and portable heaters

☐

**30. COULD yOU TELL mE WHETHER yOU HAvE ANY OF THE FOLLOWING
pROBLEmS IN yOUR ACCOmMOdATION?
IF SO, WOULD yOU SAY THAT THESE ARE A mINOR, mOdERATE OR
mAj OR pROBLEm FOR THE ACCOmMOdATION?**

PLEASE TICK ONE BOX PER LINE
DO YOU HAVE PROBLEMS WITH...

	NO PROBLEM	MINOR PROBLEM	MODERATE PROBLEM	MAJOR PROBLEM
A leaking roof?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaking or moisture getting in through walls?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaking or moisture getting in at door or windows?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaks from water pipes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rising damp?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Condensation dampness?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General dampness from unknown sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mould on walls/ceilings etc?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corrosion or rot around any external door(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Badly fitting doors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Corrosion or rot around any window(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leaky or draughty windows?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windows that don't open/close properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rot in timbers other than windows/doors, such as rot in joists, floor boards etc?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Structural cracks in internal or external SUPPORT walls?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subsidence in floors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pests – rats, mice, cockroaches?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise from neighbouring houses?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Difficulty in heating your accommodation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other problems (tick level of problem and specify below)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. THINKING ABOUT THE FOOD THAT YOU EAT, WE WOULD LIKE YOU TO TELL US HOW OFTEN YOU USUALLY EAT THE FOLLOWING FOODS.

FOR EACH FOOD THERE IS AN AMOUNT SHOWN, EITHER WHAT WE THINK IS A “MEDIUM SERVING” OR A COMMON HOUSEHOLD UNIT SUCH AS A SLICE OR TEASPOON. PLEASE PUT A TICK IN THE BOX TO INDICATE HOW OFTEN, ON AVERAGE, YOU HAVE EATEN THE SPECIFIED AMOUNT OF EACH FOOD (TO THE NEAREST WHOLE NUMBER) DURING THE PAST YEAR, I.E. FROM WHEN YOU RECEIVE THIS QUESTIONNAIRE TO THE SAME MONTH THE PREVIOUS YEAR.

Examples:

The following are examples on how to estimate how often and how much bread and potatoes you ate over the past year. Please estimate your food intake for all foodstuffs in the same way.

Potatoes: If you ate a medium serving of potatoes 3 times per week over the past year, put a tick in the box “2-4 per week”. If you think you usually ate more or less than a medium serving, please try to estimate which box suits best.

EXAMPLE 1:

AVERAGE USE LAST YEAR									
Potatoes, Rice, Pasta (medium serving)	Never/ less than once a month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
Potatoes, including boiled, mashed, baked potatoes, but excluding roast potatoes, chips or potato products (e.g. waffles)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For white bread a medium serving is one medium-sized slice. Therefore if you usually ate 1 medium slice 4 or 5 times per day, then you should put a tick in the column headed “4-5 per day”. If you ate 2 medium slices 4-5 times per day, then you should put a tick in the column “6+ per day”.

EXAMPLE 2:

AVERAGE USE LAST YEAR									
Cereals and Breads (one bowl or one slice)	Never/ less than once a month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
White bread	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>



pLEASE ESTImATE yOUR AvERAgE FOOD USE AS bEST yOU CAN. pLEASE ANSWER EvERY QUESTION, dO NOT LEAvE ANy LINES bLANK.

	Never/less than once a month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
Meat and meat alternatives (medium serving)									
Beef or Lamb-including roast, steak stew, mince	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pork-including roast, chops, slices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ham, Bacon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chicken or Turkey portion –including breast, thigh, leg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chicken products- including chicken nuggets or breaded chicken	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fresh fish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fish, including breaded, battered, or fish fingers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Processed meat - including meat pies, pasties, sausage rolls, burgers, sausages,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lentils, tofu, soya meat, vegeburger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cereals and Breads (one bowl or one slice)									
White bread	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brown bread	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porridge, readybrek	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
High fibre cereal e.g Weetabix, all bran branflakes, bran buds, muesli	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other cereal e.g. cornflakes, rice crispies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



	Never/less than once a month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
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Potatoes, Rice, Pasta (medium serving)

Potatoes, including
boiled, mashed, baked
potatoes, but excluding
roast potatoes, chips
or potato products eg
waffles

☐☐☐☐☐☐☐☐☐

Chips, roast potatoes,
and potato products, eg
potato waffles, smiles

☐☐☐☐☐☐☐☐☐

Rice

☐☐☐☐☐☐☐☐☐

Pasta

☐☐☐☐☐☐☐☐☐

Dairy Products and Fats

Yoghurt (carton)

☐☐☐☐☐☐☐☐☐

Cheese-including
cheddar, cheese slices,
soft cheese

☐☐☐☐☐☐☐☐☐

Eggs (one) including
boiled, scrambled,
poached, fried

☐☐☐☐☐☐☐☐☐

Cream (tablespoon)

☐☐☐☐☐☐☐☐☐

Salad dressings
(tablespoon)

☐☐☐☐☐☐☐☐☐

Butter (teaspoon)

☐☐☐☐☐☐☐☐☐

Low fat spread
(teaspoon)

☐☐☐☐☐☐☐☐☐

Cholesterol lowering
spread e.g. benecol,
flora pro active

☐☐☐☐☐☐☐☐☐

Fruit and Vegetables

Fruit including fresh,
frozen, dried, tinned

☐☐☐☐☐☐☐☐☐

Green vegetables,
including cabbage,
broccoli, peas, green
beans

☐☐☐☐☐☐☐☐☐



	Never/less than once a month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
Orange/Yellow vegetables, including carrots, turnips, cauliflower	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Salad or other vegetables, including leeks, onions, garlic, sweet peppers, mushrooms, sweetcorn, tomatoes, beetroot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Sweets and snacks

Plain biscuits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Chocolate Biscuits, including wrapped chocolate biscuits, eg Twix, Kit-Kat, Penguin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Confectionary, including sweets and chocolate bars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Cakes, buns, desserts, eg cheesecakes, apple tart	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Savoury snacks, eg crisps, tortilla chips	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Soups, sauces, spreads

Vegetable soup (homemade/carton)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Vegetable soup (packet, cup-a-soup)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Sauces e.g. white sauce, cheese sauce, gravy (tablespoon)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Marmite, bovril	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Jam, marmalade	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Drinks

Water (glass)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	Never/less than once a month	1-3 per month	Once a week	2-4 per week	5-6 per week	Once a day	2-3 per day	4-5 per day	6+ per day
Tea (cup)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coffee (cup)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cocoa, hot chocolate (cup)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Horlicks, Ovaltine (cup)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wine (glass)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beer (half pint)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spirits (single measure)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low Calorie or Diet Fizzy drinks (glass)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fizzy drinks (glass)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pure fruit juice (glass)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fruit squash, diluted orange (glass)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



32. WHAT Type OF mILk d O yOU USE mOST OFTEN?

PLEASE TICK ONE BOX

☐

None

If 'None' GO TO question 34

☐

Whole/full fat

☐

Low fat

☐

Skimmed

☐

Super/fortified

☐

Soya

☐

Other

33. HOW mUCH mILk d O yOU USE EACH dAy?

PLEASE TICK ONE BOX

☐

Less than half a pint

☐

250ml (half pint)

☐

568ml (1 pint)

☐

One litre

☐

More than one litre



**34. WE ARE INTERESTED IN yOUR OWN pERSONAL vIEWS AND
ExpERiENCES AbOUT gETTING OLdER. pLEASE INDICATE HOW
STRONGLy yOU AgREE OR dISAgREE WITH THE FOLLOWING
STATEmENTS**

PLEASE TICK ONE BOX PER LINE	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE NOR DISAGREE	AGREE	STRONGLY AGREE
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 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"/>
Getting older makes me less independent.	<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 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 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"/>
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"/>
I go through phases of viewing myself as old.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

35. IN OUR STUDY WE ARE INTERESTED IN LOOKING AT THE mlG RATION pATTERNS OF pEOpLE THROUG HOUT THEIR LIFETImE bOTH WITHIN IRELAND AND TO AND FROM IRELAND. WE ALSO WANT TO INvESTIg ATE THE pOSSibLE EFFECT OF WATER SuppLy ON HEALTH.

WHERE dId yOU pREvIOUSLy LIvE?

PLEASE START WITH THE MOST RECENT PREVIOUS ADDRESS FIRST, THEN THE SECOND MOST RECENT AND SO ON. YOU DO NOT NEED TO ENTER YOUR CURRENT ADDRESS

	Address	Year	Number of Years	Type of water supply (please tick)
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PLEASE ENTER ADDRESSES USING ONE BOX PER LETTER, AS IN THE EXAMPLES BELOW

U R B A N	Estate/Street	N O R T H C I R C U L A R R D	From:		Public main	<input checked="" type="checkbox"/>
	District/Townland		1 9 8 4		Group scheme	<input type="checkbox"/>
	Village/Town/City	D U B L I N 7	To:	1 5	Private well	<input type="checkbox"/>
	County	D U B L I N	1 9 9 9			
	Country					
R U R A L	Estate/Street		From:		Public main	<input type="checkbox"/>
	District/Townland	C A R R A V I L L A	1 9 6 4		Group scheme	<input type="checkbox"/>
	Village/Town/City	H O L L Y M O U N T	To:	2 0	Private well	<input checked="" type="checkbox"/>
	County	M A Y O	1 9 8 4			
	Country					

PLEASE BEGIN HERE WITH YOUR MOST RECENT PREVIOUS ADDRESS

1	Estate/Street		From:		Public main	<input type="checkbox"/>
	District/Townland				Group scheme	<input type="checkbox"/>
	Village/Town/City		To:		Private well	<input type="checkbox"/>
	County					
	Country					
2	Estate/Street		From:		Public main	<input type="checkbox"/>
	District/Townland				Group scheme	<input type="checkbox"/>
	Village/Town/City		To:		Private well	<input type="checkbox"/>
	County					
	Country					
3	Estate/Street		From:		Public main	<input type="checkbox"/>
	District/Townland				Group scheme	<input type="checkbox"/>
	Village/Town/City		To:		Private well	<input type="checkbox"/>
	County					
	Country					



Address			Year	Number of Years	Type of water supply (please tick)			
4	Estate/Street		From:		Public main	<input type="checkbox"/>		
	District/Townland				Group scheme	<input type="checkbox"/>		
	Village/Town/City		To:			Private well	<input type="checkbox"/>	
	County							<input type="checkbox"/>
	Country							
5	Estate/Street		From:		Public main	<input type="checkbox"/>		
	District/Townland				Group scheme	<input type="checkbox"/>		
	Village/Town/City		To:			Private well	<input type="checkbox"/>	
	County							<input type="checkbox"/>
	Country							
6	Estate/Street		From:		Public main	<input type="checkbox"/>		
	District/Townland				Group scheme	<input type="checkbox"/>		
	Village/Town/City		To:			Private well	<input type="checkbox"/>	
	County							<input type="checkbox"/>
	Country							
7	Estate/Street		From:		Public main	<input type="checkbox"/>		
	District/Townland				Group scheme	<input type="checkbox"/>		
	Village/Town/City		To:			Private well	<input type="checkbox"/>	
	County							<input type="checkbox"/>
	Country							
8	Estate/Street		From:		Public main	<input type="checkbox"/>		
	District/Townland				Group scheme	<input type="checkbox"/>		
	Village/Town/City		To:			Private well	<input type="checkbox"/>	
	County							<input type="checkbox"/>
	Country							
9	Estate/Street		From:		Public main	<input type="checkbox"/>		
	District/Townland				Group scheme	<input type="checkbox"/>		
	Village/Town/City		To:			Private well	<input type="checkbox"/>	
	County							<input type="checkbox"/>
	Country							
10	Estate/Street		From:		Public main	<input type="checkbox"/>		
	District/Townland				Group scheme	<input type="checkbox"/>		
	Village/Town/City		To:			Private well	<input type="checkbox"/>	
	County							<input type="checkbox"/>
	Country							



36. IF THERE IS ANYTHING YOU WOULD LIKE TO TELL US, PLEASE WRITE IN THE SPACE BELOW. FEEL FREE 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 PREPAID ENVELOPE PROVIDED. ALL YOUR ANSWERS WILL REMAIN CONFIDENTIAL.