

# Panel on Health and Aging of Singaporean Elderly (PHASE) – Wave 1

## a.k.a Social Isolation, Health and Lifestyles Survey 2009

### NOTE:

**VARIABLE NAMES**, as they appear in the dataset are in **RED** font  
**RESPONSE CATEGORY CODES**, as they appear in the dataset are in **BLUE** font

**ISO\_SN** Master Study ID (used for merging across study waves)

**Date\_Interview** Date of Interview

**Weights** Cross-sectional survey weights based on population @ June 2008 (To be used for analysis done using SIHLS [Wave 1] data)

NAME OF RESPONDENT: \_\_\_\_\_

**Fill in the following information after you have completed the questionnaire.**

CONTACT NO.: \_\_\_\_\_ (H) \_\_\_\_\_ (O) \_\_\_\_\_ (HP/PGR)

INTERVIEWER: \_\_\_\_\_ DATE OF INTERVIEW: \_\_\_\_\_

TIME STARTED: \_\_\_\_\_ TIME ENDED: \_\_\_\_\_

TOTAL TIME TAKEN FOR INTERVIEW: \_\_\_\_\_ MINUTES

(Please include time used by the subject to attend to personal affairs or to rest.)

NUMBER OF VISITS: 1<sup>st</sup> VISIT / 2<sup>nd</sup> VISIT / 3<sup>rd</sup> VISIT / 4<sup>th</sup> VISIT / 5<sup>th</sup> VISIT

### **INTRODUCTION**

Good morning / afternoon / evening. My name is \_\_\_\_\_ and I'm from \_\_\_\_\_. We are conducting a survey on social isolation, health and lifestyles on behalf of MCYS and we would appreciate it if you could spare us some time to answer some questions. The interview will take about 45 minutes.

(If respondent cannot be interviewed due to health / non-health reasons) May I know who, apart from a maid, has helped (the subject name) in his or her daily existence for some time? We would appreciate it if this person could spare us some time to answer the following questions.

There are no right or wrong answers to the questions, and you do not have to respond to any questions that you feel uncomfortable answering. Please be assured that your identity and the information given by you will be kept strictly confidential and that only group data will be reported.

**Person giving responses:** **1** The subject **[Go to Section A]** **2** Proxy  
**PersonGivingResponses**

#### **[Interviewer:**

*Although, in general, interviews are to be conducted with a person named in the list, if the subject is incapable of being interviewed due to illness or another cause, the interview may be conducted with a proxy. This proxy must be someone who has been helping the subject in his or her daily existence for some time, and must be either a family member or someone who has been living with the subject. Maids are **NOT ELIGIBLE** for this interview.]*

**PROXY INFORMATION**

**P1** May I know your name (Proxy)?

**P2** Reason the proxy is the respondent rather than the person named in the list:

**P2\_1, P2\_2, P2\_3, P2\_4, P2\_5, P2\_6**

1 The subject has been hospitalized, and cannot be revisited during survey period.

**When was the subject hospitalized or moved to the institution? (If more than once, record the most recent.)**

2 The subject has been moved to an institution for health reasons (including physical or psychological).

**P2\_1\_Yr**      **P2\_1\_Mth**

	Yr		Mth
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**P2\_2\_Yr**      **P2\_2\_Mth**

3 The subject has been moved to an institution for reasons other than health. (e.g. subject has been incarcerated for a traffic violation or otherwise)

4 The subject has hearing difficulties (the subject is hearing impaired, etc.).

5 The subject has difficulties speaking (the subject is experiencing verbal difficulties).

6 The subject is experiencing confusion or loss of consciousness, etc.

7 The subject is experiencing memory loss, dementia.

8 The subject is experiencing some other form of psychological disorder.

9 The subject has a physical illness or disability.

10 The subject cannot respond for other reasons unrelated to health. Please explain: **P2\_10\_Explain**

**P3** What is your relationship with (the subject)?

1 Spouse

2 Son

3 Daughter

4 Daughter-in-law

5 Son-in-law

6 Grandchild

- 7 Relative other than the aforementioned (please explain: **P3\_7\_Explain** \_\_\_\_\_)
- 8 Other (please explain: **P3\_8\_Explain** \_\_\_\_\_)

## MAIN QUESTIONNAIRE

*[Interviewer: All the following questions are to be addressed to the subject. In the event that the respondent is a proxy, do not ask the questions with question number appearing in boxes, e.g. **Q13**]*

### SECTION A: BASIC ATTRIBUTES AND FAMILY MAKE-UP

**READ OUT:** You will be asked a number of questions during this survey. You do not have to respond to any questions that you feel uncomfortable answering. Also, please rest assured that all of your responses will be kept strictly confidential and will not be shown to or shared with anyone not connected with this survey.

**First, you will be asked questions about yourself (subject).**

**Q1 What is your (subject's) nationality?**

- 1 Singapore Citizen
- 2 Singapore Permanent Resident (please state nationality: **Q1\_2\_Nationality** \_\_\_\_\_)
- 3 Others (please terminate questionnaire)

**Q2.1 What is your (subject's) date of birth? How old are you now?**

**Q2\_1\_Yr**                      **Q2\_1\_Mth**

		Yr			Mth	
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- 998 Refused
- 999 Don't Know / Can't Remember

**Q2\_1\_Yrs\_Old**

	Yrs Old
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**agegroup5yr**  
(Created variable: Age in 5 year age bands)

- 1: 60-64
- 2: 65-69
- 3: 70-74
- 4: 75-79
- 5: 80-84
- 6: 85+

**agegroup10yr**  
(Created variable: Age in 10 year age bands)

- 1: 60-69
- 2: 70-79
- 3: 80-89
- 4: 90+

**Q2\_2 Record gender**

- 1 Male                      2 Female

**Q3 Which ethnic group do you (subject) belong to?**

- 1 Chinese                      2 Malay                      3 Indian                      4 Other (Please specify: **Q3\_4\_Others\_Specify**)

**Q4 What is your (subject's) religion?**

- 1 Christianity
- 2 Buddhism / Taoism
- 3 Islam
- 4 Hinduism
- 5 Other (Please specify: **Q4\_5\_Others\_Specify**)
- 6 No religion

The next questions concern your (subject's) family.

**Q5 [SHOWCARD 1] First, what is your (subject's) current marital status?**

- 1 Married  
(includes being separated from the spouse due to one spouse's being hospitalized, living in an institution, or living in another area for business reasons or to take care of others)
- 2 Widowed
- 3 Separated from spouse
- 4 Divorced
- 5 Never married

**Q6.1 How many persons are there living in your (subject's) household? (Including yourself (subject), maid and those who are temporarily hospitalized, children who are living in a hostel within Singapore, and household members who are currently in National Service/Reservist training)**

*[Interviewer: This includes all who live in the household presently, as well as those who have this address recorded in their NRIC, excluding tenants.]*

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**Q6\_1\_No\_of\_Persons**

998 RF

**Q6.2 Please give the relationship to you (subject) and the age and gender of the other members of the household. [Interviewer: Please ensure the number of members corresponds with the answer in Q6.1]**

**Q6\_3 Who is the head of the household? [Interviewer: Let this be based on the perception of the subject. If he/she asks for a definition: The head of the household is normally the oldest member, the main income earner, the owner-occupier of the house or the person who manages the affairs of the household.]**

ID	Relationship to subject	Age 998 RF 999 DK	Gender 998 RF		Head of Household			
			Male	Female				
01	Subject <b>Self</b>	--	--	--	<b>1</b> <b>Q6_3_ID_01_Head</b>			
02	Subject's <b>Q6_2_ID_02_Relationship</b>	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> Yrs <b>Q6_2_ID_02_Age</b>				<b>1</b> <b>Q6_2_ID_02_Gender</b>	<b>2</b>	<b>1</b> <b>Q6_3_ID_02_Head</b>
03	Subject's <b>Q6_2_ID_03_Relationship</b>	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> yrs <b>Q6_2_ID_03_Age</b>				<b>1</b> <b>Q6_2_ID_03_Gender</b>	<b>2</b>	<b>1</b> <b>Q6_3_ID_03_Head</b>

04	Subject's Q6_2_ID_04_Relationship	<input type="text"/> Q6_2_ID_04_Age	yrs	1 Q6_2_ID_04_Gender	2	1 Q6_3_ID_04_Head
05	Subject's Q6_2_ID_05_Relationship	<input type="text"/> Q6_2_ID_05_Age	yrs	1 Q6_2_ID_05_Gender	2	1 Q6_3_ID_05_Head
06	Subject's Q6_2_ID_06_Relationship	<input type="text"/> Q6_2_ID_06_Age	yrs	1 Q6_2_ID_06_Gender	2	1 Q6_3_ID_06_Head
07	Subject's Q6_2_ID_07_Relationship	<input type="text"/> Q6_2_ID_07_Age	yrs	1 Q6_2_ID_07_Gender	2	1 Q6_3_ID_07_Head
08	Subject's Q6_2_ID_08_Relationship	<input type="text"/> Q6_2_ID_08_Age	yrs	1 Q6_2_ID_08_Gender	2	1 Q6_3_ID_08_Head
09	Subject's Q6_2_ID_09_Relationship	<input type="text"/> Q6_2_ID_09_Age	yrs	1 Q6_2_ID_09_Gender	2	1 Q6_3_ID_09_Head
10	Subject's Q6_2_ID_10_Relationship	<input type="text"/> Q6_2_ID_10_Age	yrs	1 Q6_2_ID_10_Gender	2	1 Q6_3_ID_10_Head
11	Subject's Q6_2_ID_11_Relationship	<input type="text"/> Q6_2_ID_11_Age	yrs	1 Q6_2_ID_11_Gender	2	1 Q6_3_ID_11_Head
12	Subject's Q6_2_ID_12_Relationship	<input type="text"/> Q6_2_ID_12_Age	yrs	1 Q6_2_ID_12_Gender	2	1 Q6_3_ID_12_Head
13	Subject's Q6_2_ID_13_Relationship	<input type="text"/> Q6_2_ID_13_Age	yrs	1 Q6_2_ID_13_Gender	2	1 Q6_3_ID_13_Head

(For Internal Coding Only)

1	Spouse	5	Spouse of grandchild	9	Maid
2	Child	6	Parent	10	Other
3	Spouse of Child	7	Parent of spouse	998	Refusal
4	Grandchild	8	Sibling		

### livingarr1

(Created variable: Living arrangements summary variable. Note: Alone includes living with maid)

- 1: Living alone (with maid)
- 2: With spouse, no child (with/without maid)
- 3: With child, no spouse (with/without maid)
- 4: With child and spouse (with/without maid)
- 5: With others only (with/without maid)

**livingarr2**

(Created variable: Living arrangements summary variable. *Note:* Alone does not include living with maid)

- 1: Living alone (without maid)
- 2: With spouse, no child (with/without maid)
- 3: With child, no spouse (with/without maid)
- 4: With child and spouse (with/without maid)
- 5: With others (with/without maid)

**livingalone1**

(Created variable: Living alone. *Note:* Alone includes living with maid)

- 0: Not living alone
- 1: Living alone (with maid)

**livingalone2**

(Created variable: Living alone. *Note:* Alone does not include living with maid)

- 0: Not living alone
- 1: Living alone (without maid)

The next questions pertain to your (subject's) children.

**Q7** How many surviving children do you (subject) have, including those not staying with you in this household? **Q7\_1, Q7\_2**

- 1: Have at least one natural child
- 2: Have at least one adoptive or step child
- 3: No natural / adoptive / step children

*[Interviewer: Answer separately for biological children and adoptive or stepchildren.]*

- 1 Number of natural children: \_\_\_\_\_ **Q7\_1\_Natural Children**
- 2 Number of adoptive or step children: \_\_\_\_\_ **Q7\_2\_AdoptiveStep\_Children**
- 3 No natural / adoptive / step children **[Go to Q10]**

**childrenno**

(Created variable: Total number of children. *Note:* Includes both natural and adopted children.)

**Q8** Questions about your (subject's) children will be asked in order of oldest to youngest.

- (i) Age
- (ii) Does he / she live with you in the same household? *[Interviewer: Put a tick in the box]*
- (iii) Gender
- (iv) [SHOWCARD 2] What was ...'s highest educational level completed?
- (v) [SHOWCARD 3] What is ...'s marital status?
- (vi) [SHOWCARD 4] Is ...currently employed?

SN	Q8 (i) Age	Q8 (ii)	Q8 (iii) Gender	Q8 (iv) Highest Edu completed	Q8 (v) Marital Status	Q8 (vi) Currently Employed
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	Years old 998 RF 999 DK	Live with you in the same household [Please tick] 0 No 1 Living in the same household as subject 998 RF	1 Male 2 Female 998 RF 999 DK	1 No formal edu 2 Some primary 3 Completed Pri 4 Completed Sec 5 Vocational / ITE 6 JC / Poly 7 University 8 Don't know / Can't remember 9 Special School 998 RF	1 Married 2 Widowed 3 Separated 4 Divorced 5 Never married 6 Don't know / Can't remember 998 RF	1 Working full-time 2 Working part-time 3 Retired 4 Student 5 Home-maker 6 Unemployed 7 Don't know / Can't remember 998 RF
1	Q8_SN1_i_Age	Q8_SN1_ii_SameHH	Q8_SN1_i_ii_Gender	Q8_SN1_iv_Education	Q8_SN1_v_MaritalStatus	Q8_SN1_vi_Employed
2	Q8_SN2_i_Age	Q8_SN2_ii_SameHH	Q8_SN2_i_ii_Gender	Q8_SN2_iv_Education	Q8_SN2_v_MaritalStatus	Q8_SN2_vi_Employed
3	Q8_SN3_i_Age	Q8_SN3_ii_SameHH	Q8_SN3_i_ii_Gender	Q8_SN3_iv_Education	Q8_SN3_v_MaritalStatus	Q8_SN3_vi_Employed
4	Q8_SN4_i_Age	Q8_SN4_ii_SameHH	Q8_SN4_i_ii_Gender	Q8_SN4_iv_Education	Q8_SN4_v_MaritalStatus	Q8_SN4_vi_Employed
5	Q8_SN5_i_Age	Q8_SN5_ii_SameHH	Q8_SN5_i_ii_Gender	Q8_SN5_iv_Education	Q8_SN5_v_MaritalStatus	Q8_SN5_vi_Employed
6	Q8_SN6_i_Age	Q8_SN6_ii_SameHH	Q8_SN6_i_ii_Gender	Q8_SN6_iv_Education	Q8_SN6_v_MaritalStatus	Q8_SN6_vi_Employed
7	Q8_SN7_i_Age	Q8_SN7_ii_SameHH	Q8_SN7_i_ii_Gender	Q8_SN7_iv_Education	Q8_SN7_v_MaritalStatus	Q8_SN7_vi_Employed
8	Q8_SN8_i_Age	Q8_SN8_ii_SameHH	Q8_SN8_i_ii_Gender	Q8_SN8_iv_Education	Q8_SN8_v_MaritalStatus	Q8_SN8_vi_Employed
9	Q8_SN9_i_Age	Q8_SN9_ii_SameHH	Q8_SN9_i_ii_Gender	Q8_SN9_iv_Education	Q8_SN9_v_MaritalStatus	Q8_SN9_vi_Employed
10	Q8_SN10_i_Age	Q8_SN10_ii_SameHH	Q8_SN10_iii_Gender	Q8_SN10_iv_Education	Q8_SN10_v_MaritalStatus	Q8_SN10_vi_Employed
11	Q8_SN11_i_Age	Q8_SN11_ii_SameHH	Q8_SN11_iii_Gender	Q8_SN11_iv_Education	Q8_SN11_v_MaritalStatus	Q8_SN11_vi_Employed
12	Q8_SN12_i_Age	Q8_SN12_ii_SameHH	Q8_SN12_iii_Gender	Q8_SN12_iv_Education	Q8_SN12_v_MaritalStatus	Q8_SN12_vi_Employed
13	Q8_SN13_i_Age	Q8_SN13_ii_SameHH	Q8_SN13_iii_Gender	Q8_SN13_iv_Education	Q8_SN13_v_MaritalStatus	Q8_SN13_vi_Employed
14	Q8_SN14_i_Age	Q8_SN14_ii_SameHH	Q8_SN14_iii_Gender	Q8_SN14_iv_Education	Q8_SN14_v_MaritalStatus	Q8_SN14_vi_Employed

**Living with one's children**

**Q9** [Ask those who reside with children according to Q6.3 only]

**[SHOWCARD 5] What are the main reasons you (subject) are currently residing with your (subject's) child(ren) (Maximum 3)? [MA] Q9\_1, Q9\_2, Q9\_3**

- |           |   |           |  |
|-----------|---|-----------|--|
| <b>1</b>  | To provide financial support                    | <b>16</b> | The house is newly built   |
| <b>2</b>  | To receive financial support                    | <b>17</b> | Other (Please explain: _____ )   |
| <b>3</b>  | To help with the housework                      | <b>18</b> | Not sure   |
| <b>4</b>  | To help care for grandchildren                  | <b>19</b> | Child is divorced  |
| <b>5</b>  | To be looked after                              | <b>20</b> | Child is handicapped/disabled/blind/mentally unsound   |
| <b>6</b>  | Child(ren)'s request                            | <b>21</b> | Does own a house/property/house was demolished/waiting for own flat to live  |
| <b>7</b>  | Own request                                     | <b>22</b> | To look after children   |
| <b>8</b>  | Want to be near my child(ren)                   | <b>23</b> | Child is waiting to buy their own house/ for their new house to be ready   |
| <b>9</b>  | Child(ren) provides emotional support           | <b>24</b> | Have become accustomed to child/feels closer to child/get along better with child/have stayed with child for a long time/subject's only child/more freedom |
| <b>10</b> | To provide advice or be someone to talk to      | <b>25</b> | Follows tradition that eldest or youngest child should look after parents/child is the last one to get married   |
| <b>11</b> | To receive advice                               | <b>27</b> | To be near grandchildren   |
| <b>12</b> | My husband/wife passed away                     | <b>29</b> | To help run family business  |
| <b>13</b> | My child(ren) isn't ready to be independent yet | <b>30</b> | Convenient   |
| <b>14</b> | Child isn't married yet                         | <b>39</b> | Closely knit family  |
| <b>15</b> | To provide my child(ren) with a place to live   |           |  |

**Q10 The next few questions pertain to you (subject) and your (subject's) spouse.**

*[Interviewer: Questions on the subject's spouse should only be asked in the event that the subject responded (1) Married to Q5 above.]*

	Questions	Subject	Spouse
a	ID from the far-left side of the table on Q6.3 (00 for the spouse in the event that the couple is separated, divorced, or widowed)	Number from Q6.3 <input type="text" value="0"/> <input type="text" value="1"/> <b>Q10a_Subj_ID</b>	Number from Q6.3 <input type="text" value=""/> <input type="text" value=""/> <b>Q10a_Spouse_ID</b> 0 Not stay in same household 2 Stay in same household <i>(Note that the response does not indicate the ID from Q6.3)</i>
		<b>Q10b_Subj_Where</b>	<b>Q10b_Spouse_Where</b>
b	Before you were 10 years old, where did you reside the longest?	1 City 2 Kampung 3 Not sure	1 City 2 Kampung 3 Not sure
		<b>Q10c_Subj_Edu</b>	<b>Q10c_Spouse_Edu</b>
c	<b>[SHOWCARD 6]</b> Educational Background What was the highest educational level completed?	1 No formal education 2 Primary 3 Secondary 4 Vocational/ITE 5 Junior college/Poly 6 University and above 7 Don't know / Can't remember	1 No formal education 2 Primary 3 Secondary 4 Vocational/ITE 5 Junior college/Poly 6 University and above 7 Don't know / Can't remember
		<b>Q10d_Subj_Working</b>	<b>Q10d_Spouse_Working</b>
d	<b>[SHOWCARD 7]</b> Are you currently working?	1 Working full-time 2 Working part-time 3 Retired and not working 4 Home-maker	1 Working full-time 2 Working part-time 3 Retired and not working 4 Home-maker
		<b>Q10e_Subj_LongestOccupation</b>	<b>Q10e_Spouse_LongestOccupation</b>
e	<b>[SHOWCARD 8]</b> Which occupation were you (your spouse) engaged in the longest?	1 Professionals 2 Administrative & managerial 3 Associate professionals & technicians 4 Clerical workers 5 Sales & services 6 Production & related 7 Cleaners & laborers 8 Homemaker <b>[Go to h]</b> 9 Others (please specify _____) 10 Civil Servant 11 Self-employed 12 Army 99 DK	1 Professionals 2 Administrative & managerial 3 Associate professionals & technicians 4 Clerical workers 5 Sales & services 6 Production & related 7 Cleaners & laborers 8 Homemaker <b>[Go to h]</b> 9 Others (please specify _____) 10 Civil Servant 11 Self-employed 12 Army 99 DK

f	Years worked for the longest job	<input type="text"/> Yrs. <b>Q10f_Subj_YearforLongest</b> 998 RF 999 DK	<input type="text"/> Yrs. <b>Q10f_Spouse_YearforLongest</b> 998 RF 999 DK
g	Total years employed overall	<input type="text"/> Yrs. <b>Q10g_Subj_TotalYears</b> 998 RF 999 DK	<input type="text"/> Yrs. <b>Q10g_Spouse_TotalYears</b> 998 RF 999 DK
<b>Ask h and i only to those respondents who are not currently working [according to 'd']</b>			
h	Would you (your spouse) like to be working? <b>Q10h_Subj_IntendWork</b> <b>Q10h_Spouse_IntendWork</b>	1 Yes 2 No <b>[Go to Q11]</b> 9 DK	1 Yes 2 No <b>[Go to Q11]</b> 9 DK
i	<b>[SHOWCARD 9]</b> If yes, what are main reasons? <b>[MA]</b>	1 Income <b>Q10i_Subj_Reasons_1</b> 2 Social contact <b>Q10i_Subj_Reasons_2</b> 3 Maintain good health <b>Q10i_Subj_Reasons_3</b> 4 Enjoy working <b>Q10i_Subj_Reasons_4</b> 5 Other <b>Q10i_Subj_Reasons_5</b>	1 Income <b>Q10i_Spouse_Reasons_1</b> 2 Social contact <b>Q10i_Spouse_Reasons_2</b> 3 Maintain good health <b>Q10i_Spouse_Reasons_3</b> 4 Enjoy working <b>Q10i_Spouse_Reasons_4</b> 5 Other <b>Q10i_Spouse_Reasons_5</b>

**education1, education1\_spouse**

(Created variable: Dichotomous variable for highest education of subject, or of spouse.)

0: No formal education

1: At least primary school education

**education2, education2\_spouse**

(Created variable: Dichotomous variable for highest education of subject, or of spouse.)

0: Primary school or below

1: Above primary school education

**education3, education3\_spouse**

(Created variable: Summary variable for highest education of subject, or of spouse.)

1: No formal education

2: Primary school education

3: Secondary school education

4: Above secondary school education

**occupation, occupation\_spouse**

(Created variable: Summary variable for occupation of subject or spouse.)

1: Professionals / Administrative and managerial / Associate professionals / Civil service / Army / Self-employed

2: Clerical workers / Sales and services

3: Production and related / Cleaners and labourers

4: Homemakers

**Q11 [SHOWCARD 10] What type of housing are you (subject) living in?**

**Q11\_HousingType**

1 HDB/JTC flat (1-2 room)

6 Bungalow/semi-detached/terrace house

2 HDB/JTC flat (3 room)

7 Shophouse

- 3 HDB/JTC flat (4 room)                      8 Attap
- 4 HDB/JTC flat (5 room and above/HUDC/Executive)                      9 Others (specify: \_\_\_\_\_)
- Q11\_9\_Others\_Specify**
- 5 Condominium/Private flat

**housing1**

(Created variable: Summary variable for subject's housing.)

- 1: 1-2 room HDB  
 2: 3 room HDB  
 3: 4-5 room HDB and Private Housing (Condominium/Private flat/Bungalow/semi-detached/terrace house) and Shophouse and Others

**housing2**

(Created variable: Summary variable for subject's housing.)

- 1: 1-2 room HDB  
 2: 3 room HDB  
 3: 4-5 room HDB  
 4: Private Housing (Condominium/Private flat/Bungalow/semi-detached/terrace house)  
 5: Shophouse and Others

**Q12 Who owns this current property that you (subject) live in?**

**Q12**

- 1 Subject    8 Rental
- 2 Child in the household                      9 Don't know
- 3 Joint ownership with spouse                      11 Spouse joint ownership with child
- 4 Joint ownership with other household member                      12 Others
- 5 Other household member(s)                      13 Spouse
- 6 Child outside household                      998 RF
- 7 Others outside household

*[Interviewer: If respondent is a proxy, please skip Q13 ~ Q21 and Go to Section C]*

**Q13 [SHOWCARD 11] Would you consider living in the following types of housing?**

		Yes	No	Maybe	DK
<b>Q13a</b>	a HDB Studio Apartment	1	2	3	4
<b>Q13b</b>	b One-room rental flats with shared common space for cooking and socializing	1	2	3	4
<b>Q13c</b>	c Senior-only housing blocks with on-site health and social services	1	2	3	4
<b>Q13d</b>	d Retirement villages with social activities and some communal services	1	2	3	4

**Q14 [SHOWCARD 12] How do you feel about in-home help services that involve someone who is not familiar to you entering your home, for example, personal aid services?**

*[Interviewer: The users pay for such services themselves.]*

1	2	3	4	5
Feel no reservations at all	Feel hardly any reservations	Feel some reservations	Have strong reservations	Not sure

**Q15 [SHOWCARD 12] How do you feel about using out-of-home services like day services and day care? [Interviewer: The users pay for such services themselves.]**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Feel no reservations at all	Feel hardly any reservations	Feel some reservations	Have strong reservations	Not sure

## SECTION B: SOCIAL ISOLATION

**Q16** [SHOWCARD 12] How do you feel about a neighbour contacting you daily to see how you are doing?

**Q16**

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Feel no reservations at all	Feel hardly any reservations	Feel some reservations	Have strong reservations	Not sure

**Q17** [SHOWCARD 13] The next questions are about how you feel about different aspects of your life. For each one, tell me how often you feel that way....

		Always	Fairly often	Occasionally	Rarely	Never
<b>Q17a</b>	a How often do you feel that you lack companionship	4	3	2	1	0
<b>Q17b</b>	b How often do you feel left out	4	3	2	1	0
<b>Q17c</b>	c How often do you feel isolated from others	4	3	2	1	0

### loneliness

(Created variable: UCLA 3-item loneliness score (range 0-12). *Note:* The response categories in the original paper above were different from what was asked in PHASE Wave 1. Therefore, the scoring is also different.

Reference: Hughes, M. E., Waite, L. J., Hawkey, L. C., & Cacioppo, J. T. (2004). A Short Scale for Measuring Loneliness in Large Surveys: Results From Two Population-Based Studies. *Research on Aging*, 26(6), 655–672. <http://doi.org/10.1177/0164027504268574>

### loneliness\_yesno

(Created variable: UCLA 3-item loneliness score, dichotomized. *Note:* This is based on the 0-12 scoring range (see above)).

**0:** Not lonely (score of 0)

**1:** Some measure of loneliness (score of >=1)

**Q18** [SHOWCARD 14] How do you feel about your social interactions?

	To what extent do you agree with the following?	Strongly disagree	Disagree	Agree	Strongly agree	No comments
<b>Q18a</b>	a I have relationships where my competence and skills are recognized.	0	1	2	3	9
<b>Q18b</b>	b There is someone who shares my interests or concerns	0	1	2	3	9
<b>Q18c</b>	c There is someone who really relies on me for their well being.	0	1	2	3	9
<b>Q18d</b>	d There is a trustworthy person I could turn to for advice if I were having problems	0	1	2	3	9
<b>Q18e</b>	e I feel a strong emotional bond with at least one other person.	0	1	2	3	9
<b>Q18f</b>	f There is someone I can depend on for aid if I really need it.	0	1	2	3	9

<b>Q18g</b>	g	There is someone I feel comfortable talking about my problems with	0	1	2	3	9
<b>Q18h</b>	h	There are people who admire my talents and abilities	0	1	2	3	9
<b>Q18i</b>	i	I feel very close to another person.	0	1	2	3	9
<b>Q18j</b>	j	There is another person who likes to do the things I do.	0	1	2	3	9
<b>Q18k</b>	k	There are people I can count on in an emergency.	0	1	2	3	9
<b>Q18l</b>	l	Another person needs me to care for them.	0	1	2	3	9

**Q19.1** [SHOWCARD 15] Among all your relatives not living with you (including children, grandchildren, in-laws, siblings, nieces, nephews, cousins, uncles, aunts, etc)...

		0	1	2	3 ~ 4	5 ~ 8	≥ 9	
<b>Q19_1a</b>	a	How many relatives do you see or hear from at least once a month?	0	1	2	3	4	5
<b>Q19_1b</b>	b	How many relatives do you feel at ease with that you can talk about private matters?	0	1	2	3	4	5
<b>Q19_1c</b>	c	How many relatives do you feel close to such that you could call on them for help?	0	1	2	3	4	5
			Never	Seldom	Sometimes	Often	Very Often	Always
<b>Q19_1d</b>	d	How often do you see or hear from relatives with whom you have the most contact?	0	1	2	3	4	5
<b>Q19_1e</b>	e	When one of your relatives has an important decision to make, how often do they talk to you about it?	0	1	2	3	4	5
<b>Q19_1f</b>	f	How often is one of your relatives available for you to talk to when you have an important decision to make?	0	1	2	3	4	5

**Q19.2** [SHOWCARD 16] Are you satisfied with the level of contact with your relatives?

<b>Q19_2</b>	1	2	3	4	5	9
	Very Satisfied	Satisfied	Unsatisfied	Very Unsatisfied	Not Sure	RF

**Q20.1** [SHOWCARD 17] Among all of your friends including those who live in your neighbourhood...

		0	1	2	3 ~ 4	5 ~ 8	≥ 9	
<b>Q20_1a</b>	a	How many friends do you see or hear from at least once a month?	0	1	2	3	4	5
<b>Q20_1b</b>	b	How many friends do you feel at ease with that you can talk about private matters?	0	1	2	3	4	5
<b>Q20_1c</b>	c	How many friends do you feel close to such that you could call on them for help?	0	1	2	3	4	5
			Never	Seldom	Sometimes	Often	Very Often	Always
<b>Q20_1d</b>	d	How often do you see or hear from friends with whom you have the most contact?	0	1	2	3	4	5

<b>Q20_1e</b>	e	When one of your friends has an important decision to make, how often do they talk to you about it?	0	1	2	3	4	5
<b>Q20_1f</b>	f	How often is one of your friends available for you to talk to when you have an important decision to make?	0	1	2	3	4	5

**lsnsr**

(Created variable: Lubben Social Network Scale Revised (LSNS-R) Score (range 0-60). It is based summing up on Q19\_1a to Q19\_1f and Q20\_1a to Q20\_1f. *Note:* This has been modified to assess social networks outside the household.)

Reference: Lubben, J., Gironde, M. (2004). Measuring social networks and assessing their benefits. In Social Networks and Social Exclusion: Sociological and Policy Perspectives. Eds. Phillipson, C., Allan, G., Morgan, D. Ashgate

**lsns6**

(Created variable: Lubben Social Network Scale Revised (LSNS6) Score (range 0-30). It is based summing up on Q19\_1a to Q19\_1c and Q20\_1a to Q20\_1c. *Note:* This has been modified to assess social networks outside the household.)

Reference: Lubben, J., Blozik, E., Gillmann, G., Iliffe, S., von Rentein Kruse, W., Beck, J.C., & Stuck, A.E. (2006). Performance of an abbreviated version of the Lubben Social Network Scale among three European community-dwelling older adult populations. The Gerontologist, 46(4), 503–513.

**Q20.2 [SHOWCARD 16] Are you satisfied with the level of contact with your friends?**

	1	2	3	4	5	9	
<b>Q20_2</b>	Very Satisfied	Satisfied	Unsatisfied	Very Unsatisfied	Not Sure	RF	

**Q21 [SHOWCARD 18] Among all of your neighbours including those you consider your friend,**

		0	1	2	3 ~ 4	5 ~ 8	≥ 9	
<b>Q21a</b>	a	How many of your neighbours do you see or hear from at least once a month?	0	1	2	3	4	5
<b>Q21b</b>	b	How many neighbours could you call on for help?	0	1	2	3	4	5

**SECTION C: HEALTH STATUS & PHYSICAL DISABILITIES / LIMITATIONS**

The next questions will be regarding health.

**Q22.1 [SHOWCARD 19] In general, how would you describe your (subject's) state of health?**

- Q22\_1** 1 Very healthy
- 2 Healthier than average
- 3 Of average health
- 4 Somewhat unhealthy
- 5 Very unhealthy
- 6 Not sure

**Q22.2 [SHOWCARD 19] Consider your health while you were growing up, from birth to age 16 years old. Would you say, that your health during that time was very healthy, healthier than average, of average health, somewhat unhealthy, very unhealthy or not sure?**

- Q22\_2** 1 Very healthy
- 2 Healthier than average

- 3 Of average health
- 4 Somewhat unhealthy
- 5 Very unhealthy
- 6 Not sure

**Q23 [SHOWCARD 20] The next question is related to vision. With your (subject's) glasses or contact lenses if you (subject) wear them, is your (subject's) eyesight excellent, very good, good, fair, poor or loss of vision in both eyes?**

- Q23**
- 1 Excellent
  - 2 Very Good
  - 3 Good
  - 4 Fair
  - 5 Poor
  - 6 Loss of vision (no vision) in both eyes

**Q24 [SHOWCARD 21] The following question is related to hearing ability. If you (subject) use hearing aids, please respond to this question based on your (subject's) hearing ability when you (subject) wear them. Is your (subject's) hearing excellent, very good, good, fair, poor or not able to hear in both ears?**

- Q24**
- 1 Excellent
  - 2 Very Good
  - 3 Good
  - 4 Fair
  - 5 Poor
  - 6 Not able to hear in both ears

**The next questions will be about experience with physical ailments that you (subject) have had.**

*[Interviewer: Ask a ~ s, repeating (i), (ii) and (iii) for each as appropriate.]*

**Q25 (i) [SHOWCARD 22] Have you (subject) ever been diagnosed by a medical professional with.?**

**(ii) [If yes, Q25(i)=1] At what age were you (subject) diagnosed with.....?**

*[Interviewer: In the event that the subject has experienced the same physical ailment more than once, record only the first occurrence for (a) through (n). In addition, record only the most recent incidence of fractures for (o) and (p) below.]*

**(iii) [If yes, Q25(i)=1] Are you (subject) presently taking medicine prescribed by a physician for this condition?**

Ailment	Q25 (i) Diagnosis			Q25 (ii) Age at Diagnosis	Q25 (iii) Taking Prescribed Medication				
	Yes	No	Not Sure		Yes	No	Not taking regularly	Not prescribed medication	
									[Go to next Item]
<i>[Interviewer: Record the first occurrence for (a) through (n) below.]</i>									
a	Heart attack, angina, myocardial infarction, etc.	1	2	3	Yrs	1	2	3	4
					999 DK				
					998 RF				

		<b>Q25a_i_Diagnosis</b>	<b>Q25a_ii_Age</b>	<b>Q25a_iii_Medication</b>			
b	Other forms of heart disease	1   2   3	yrs	1	2	3	4
c	Cancer (excluding skin cancer)	<b>Q25b_i_Diagnosis</b>	<b>Q25b_ii_Age</b>	<b>Q25b_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
d	Cerebrovascular disease (stroke, etc.)	<b>Q25c_i_Diagnosis</b>	<b>Q25c_ii_Age</b>	<b>Q25c_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
e	Dementia [only to be asked to the proxy]	<b>Q25d_i_Diagnosis</b>	<b>Q25d_ii_Age</b>	<b>Q25d_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
f	High blood pressure	<b>Q25e_i_Diagnosis</b>	<b>Q25e_ii_Age</b>	<b>Q25e_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
g	Diabetes	<b>Q25f_i_Diagnosis</b>	<b>Q25f_ii_Age</b>	<b>Q25f_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
h	Respiratory illness (chronic, such as asthma)	<b>Q25g_i_Diagnosis</b>	<b>Q25g_ii_Age</b>	<b>Q25g_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
i	Digestive illness (stomach or intestinal)	<b>Q25h_i_Diagnosis</b>	<b>Q25h_ii_Age</b>	<b>Q25h_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
j	Renal/kidney or urinary tract ailments	<b>Q25i_i_Diagnosis</b>	<b>Q25i_ii_Age</b>	<b>Q25i_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
k	Ailments of the liver or gallbladder	<b>Q25j_i_Diagnosis</b>	<b>Q25j_ii_Age</b>	<b>Q25j_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
l	Joint pain, Arthritis, rheumatism or nerve pain	<b>Q25k_i_Diagnosis</b>	<b>Q25k_ii_Age</b>	<b>Q25k_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
m	Chronic back pain	<b>Q25l_i_Diagnosis</b>	<b>Q25l_ii_Age</b>	<b>Q25l_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
n	Osteoporosis	<b>Q25m_i_Diagnosis</b>	<b>Q25m_ii_Age</b>	<b>Q25m_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
		<b>Q25n_i_Diagnosis</b>	<b>Q25n_ii_Age</b>	<b>Q25n_iii_Medication</b>			
<b>[Interviewer: Record the most recent fractures for (o) and (p) below.]</b>							
o	Fractures of the hip, thigh, and pelvis	1   2   3	yrs	1	2	3	4
p	Other fractures	<b>Q25o_i_Diagnosis</b>	<b>Q25o_ii_Age</b>	<b>Q25o_iii_Medication</b>			
		1   2   3	yrs	1	2	3	4
		<b>Q25p_i_Diagnosis</b>	<b>Q25p_ii_Age</b>	<b>Q25p_iii_Medication</b>			



d	Continue to sit for 2 hours	<b>1</b> Yes <b>2</b> No <b>3</b> Not sure <b>Q27d_i_Difficult</b>	<b>1</b> Somewhat difficult <b>2</b> Very difficult <b>3</b> Unable to perform <b>4</b> Not sure <b>Q27d_ii_Extent</b>	From <input type="text"/> <input type="text"/> Yrs old <b>Q27d_iii_Age</b> <b>999</b> DK/can't remember <b>998</b> RF
e	Stoop or bend your knees	<b>1</b> Yes <b>2</b> No <b>3</b> Not sure <b>Q27e_i_Difficult</b>	<b>1</b> Somewhat difficult <b>2</b> Very difficult <b>3</b> Unable to perform <b>4</b> Not sure <b>Q27e_ii_Extent</b>	From <input type="text"/> <input type="text"/> Yrs old <b>Q27e_iii_Age</b> <b>999</b> DK/can't remember <b>998</b> RF
f	Raise your hands above your head	<b>1</b> Yes <b>2</b> No <b>3</b> Not sure <b>Q27f_i_Difficult</b>	<b>1</b> Somewhat difficult <b>2</b> Very difficult <b>3</b> Unable to perform <b>4</b> Not sure <b>Q27f_ii_Extent</b>	From <input type="text"/> <input type="text"/> Yrs old <b>Q27f_iii_Age</b> <b>999</b> DK/can't remember <b>998</b> RF
g	Extend arms out in front of you as if to shake hands	<b>1</b> Yes <b>2</b> No <b>3</b> Not sure <b>Q27g_i_Difficult</b>	<b>1</b> Somewhat difficult <b>2</b> Very difficult <b>3</b> Unable to perform <b>4</b> Not sure <b>Q27g_ii_Extent</b>	From <input type="text"/> <input type="text"/> Yrs old <b>Q27g_iii_Age</b> <b>999</b> DK/can't remember <b>998</b> RF
h	Grasp with your fingers or move your fingers easily	<b>1</b> Yes <b>2</b> No <b>3</b> Not sure <b>Q27h_i_Difficult</b>	<b>1</b> Somewhat difficult <b>2</b> Very difficult <b>3</b> Unable to perform <b>4</b> Not sure <b>Q27h_ii_Extent</b>	From <input type="text"/> <input type="text"/> Yrs old <b>Q27h_iii_Age</b> <b>999</b> DK/can't remember <b>998</b> RF
i	Lift an object weighing approximately 10 kg (a big size bag of rice)	<b>1</b> Yes <b>2</b> No <b>[Go to Q28]</b> <b>3</b> Not sure <b>Q27i_i_Difficult</b>	<b>1</b> Somewhat difficult <b>2</b> Very difficult <b>3</b> Unable to perform <b>4</b> Not sure <b>Q27i_ii_Extent</b>	From <input type="text"/> <input type="text"/> Yrs old <b>Q27i_iii_Age</b> <b>999</b> DK/can't remember <b>998</b> RF
j	Lift an object weighing approximately 5 kg (a middle size bag of rice)	<b>1</b> Yes <b>2</b> No <b>3</b> Not sure <b>Q27j_i_Difficult</b>	<b>1</b> Somewhat difficult <b>2</b> Very difficult <b>3</b> Unable to perform <b>4</b> Not sure <b>Q27j_ii_Extent</b>	From <input type="text"/> <input type="text"/> Yrs old <b>Q27j_iii_Age</b> <b>999</b> DK/can't remember <b>998</b> RF

### **mobilitydiff**

(Created variable: Summary measure of mobility limitations (range 0-9). Higher score indicates higher number of mobility limitations *Note:* Item (i) "Lift an object weighting approximately 10 kg" not used.)

### **mobilitydiff\_yesno**

(Created variable: Summary measure of mobility limitations, dichotomized. *Note:* Item (i) "Lift an object weighting approximately 10 kg" not used.)

**0:** No mobility limitations

**1:** At least one mobility limitation

The next questions concern your (subject's) ability to perform daily activities.

[Interviewer: Ask a ~ h, repeating (i) to (iv) for each as appropriate.]

**Q28 (i)** Do you (subject) find it difficult to \_\_\_\_ alone without the assistance of a person or assistive device due to your (subject's) health or physical state?

(ii) [If "difficult", (i)=1] How difficult do you (subject) find it to \_\_\_\_ by yourself?

(iii) [If "difficult", (i)=1] From what age did you begin to experience this difficulty?

(iv) [If "difficult", (i)=1] Do you (subject) need assistance / device to \_\_\_\_?

Activities	Q28 (i) Difficult	Q28 (ii) How difficult?	Q28 (iii) Age	Q28 (iv) Assistance / Device
a. Take a bath/shower	1. Difficult 2. Not difficult [Go to b] 3. Not sure [Go to b] Q28a_i_Difficult	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure Q28a_ii_How	yrs old  Q28a_iii_Age 999 DK  998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify:____) 3. No 4. Not sure Q28a_iv_Assistance_1 Q28a_iv_Assistance_2 (Label 1 as Yes, human assistance and 2 as Yes, device assistance) Q28a_iv_2_Assistance_Specify
b. Dress up	1. Difficult 2. Not difficult [Go to c] 3. Not sure [Go to c] Q28b_i_Difficult	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure Q28b_ii_How	yrs old  Q28b_iii_Age 999 DK  998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify:____) 3. No 4. Not sure Q28b_iv_Assistance_1 Q28b_iv_Assistance_2 Q28b_iv_2_Assistance_Specify
c. Eat	1. Difficult 2. Not difficult [Go to d] 3. Not sure [Go to d] Q28c_i_Difficult	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure Q28c_ii_How	yrs old  Q28c_iii_Age 999 DK  998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify:____) 3. No 4. Not sure Q28c_iv_Assistance_1 Q28c_iv_Assistance_2 Q28c_iv_2_Assistance_Specify
d. Stand up from a bed / chair; sitting down on a chair	1. Difficult 2. Not difficult [Go to e] 3. Not sure [Go to e] Q28d_i_Difficult	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure Q28d_ii_How	yrs old  Q28d_iii_Age 999 DK  998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify:____) 3. No 4. Not sure Q28d_iv_Assistance_1 Q28d_iv_Assistance_2 Q28d_iv_2_Assistance_Specify
e. Walk (around the house)	1. Difficult 2. Not difficult [Go to f] 3. Not sure [Go to f] Q28e_i_Difficult	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure Q28e_ii_How	yrs old  Q28e_iii_Age 999 DK  998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify:____) 3. No 4. Not sure Q28e_iv_Assistance_1 Q28e_iv_Assistance_2 Q28e_iv_2_Assistance_Specify
f. Go outside (leave the house)	1. Difficult 2. Not difficult [Go to g] 3. Not sure [Go to g] Q28f_i_Difficult	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure Q28f_ii_How	yrs old  Q28f_iii_Age 999 DK  998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify:____) 3. No 4. Not sure Q28f_iv_Assistance_1 Q28f_iv_Assistance_2 Q28f_iv_2_Assistance_Specify

g. Use the squatting toilet	<b>1.</b> Difficult <b>2.</b> Not difficult <b>[Go to h]</b> <b>3.</b> Not sure <b>[Go to h]</b> <b>Q28g_i_Difficult</b>	<b>1.</b> Somewhat difficult <b>2.</b> Very difficult <b>3.</b> Unable to perform <b>4.</b> Not sure <b>Q28g_ii_How</b>	yrs old  <b>Q28g_iii_Age</b> 999 DK  998 RF	<b>1.</b> Yes, human assistance <b>2.</b> Yes, device assistance (Specify:_____) <b>3.</b> No <b>4.</b> Not sure <b>Q28g_iv_Assistance_1</b> <b>Q28g_iv_Assistance_2</b> <b>Q28g_iv_2_Assistance_Specify</b>
h. Use the sitting toilet	<b>1.</b> Difficult <b>2.</b> Not difficult <b>[Go to Q29.1]</b> <b>3.</b> Not sure <b>[Go to Q29.1]</b> <b>Q28h_i_Difficult</b>	<b>1.</b> Somewhat difficult <b>2.</b> Very difficult <b>3.</b> Unable to perform <b>4.</b> Not sure <b>Q28h_ii_How</b>	yrs old  <b>Q28h_iii_Age</b> 999 DK  998 RF	<b>1.</b> Yes, human assistance <b>2.</b> Yes, device assistance (Specify:_____) <b>3.</b> No <b>4.</b> Not sure <b>Q28h_iv_Assistance_1</b> <b>Q28h_iv_Assistance_2</b> <b>Q28h_iv_2_Assistance_Specify</b>

**adldiff**

(Created variable: Summary measure of ADL limitations (range 0-6). Higher score indicates higher number of ADL limitations. Score is based on the number of "Difficult" responses (Q28a\_i\_Difficult, Q28b\_i\_Difficult, Q28c\_i\_Difficult, Q28d\_i\_Difficult, Q28e\_i\_Difficult, Q28h\_i\_Difficult). *NOTE:* Items (f) "Go outside the house" and (g) "Use the squatting toilet" are excluded.)

**adldiff\_yesno**

(Created variable: Summary measure of ADL limitations, dichotomized. This is based on the number of "Difficult" responses (Q28a\_i\_Difficult, Q28b\_i\_Difficult, Q28c\_i\_Difficult, Q28d\_i\_Difficult, Q28e\_i\_Difficult, Q28h\_i\_Difficult). *NOTE:* Items (f) "Go outside the house" and (g) "Use the squatting toilet" are excluded.)

**0:** No ADL limitation

**1:** At least one ADL limitation

**Q29.1** **[Interviewer: If the respondent reported no difficulty in Q28, go to Q30]**

**[SHOWCARD 24] Were any of these difficulties due to any of the following conditions? If yes, which ones? [MA] Q29\_1**

- 1 Yes, Please specify illness: \_\_\_\_\_
- Q29\_1\_Yes\_1  
 Q29\_1\_Yes\_2  
 Q29\_1\_Yes\_3  
 Q29\_1\_Yes\_4  
 Q29\_1\_Yes\_5  
 Q29\_1\_Yes\_6  
 Q29\_1\_Yes\_7  
 Q29\_1\_Yes\_8  
 Q29\_1\_Yes\_9  
 Q29\_1\_Yes\_OthersSpecify

For Q29\_1\_Yes\_1 to Q29\_1\_Yes\_9, codes are as follows:

- 1 Heart attack, angina, myocardial infarction etc.
- 2 Other forms of heart disease
- 3 Cancer (excluding skin cancer)
- 4 Cerebrovascular disease (stroke etc.)
- 5 Dementia
- 6 High blood pressure
- 7 Diabetes
- 8 Respiratory illness (chronic, such as asthma)
- 9 Digestive illness (stomach or intestinal)
- 10 Renal / kidney or urinary tract ailments
- 11 Ailments of the liver or gallbladder
- 12 Arthritis, neuralgia or rheumatism
- 13 Chronic back pain
- 14 Osteoporosis
- 15 Fractures of the hip, thigh or pelvis / broken hip
- 16 Other fractures (specify)
- 17 Cataract
- 18 Glaucoma
- 19 Accident
- 20 Old age
- 21 Parkinson's disease
- 22 Thyroid
- 88 Others

- 2 No

**Q29.2** [Interviewer: Only ask those who reported a need for human assistance for any of the activities in Q28]  
 Who primarily helps you (subject) perform these activities? Q29\_2

- 1 No one
- 2 Live-in family member (Specify: \_\_\_\_\_)  
 [Interviewer: If the caregiver is a live-in family member, record the ID number from Q6.3.]  
 Q29\_2\_2\_Member\_Specify\_1  
 Q29\_2\_2\_Member\_Specify\_2  
 Q29\_2\_2\_Member\_Specify\_3  
 Q29\_2\_2\_Member\_Specify\_4  
 Q29\_2\_2\_Member\_Specify\_5  
 Q29\_2\_2\_Member\_Specify\_6
- 3 Non co-resident family member
- 4 Housemaid / houseboy
- 5 Not sure
- 6 Other (Specify: \_\_\_\_\_)  
 Q29\_2\_6\_Other\_Specify

The next question concerns slightly more complicated tasks.

- Q30** (i) Do you (subject) find it difficult to \_\_\_\_\_ alone without the assistance of a person or assistive device due to your health or physical state?  
 (ii) [If “yes,” (i)=1] How difficult do you (subject) find it to \_\_\_\_\_ by yourself?  
 (iii) [If “yes,” (i)=1] From what age did you begin to experience this difficulty?  
 (iv) [If “yes,” (i)=1] Do you need assistance / device to \_\_\_\_\_?

Activities	Q30 (i)	Q30 (ii)	Q30(iii)	Q30 (iv)
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	<b>Difficult</b>	<b>How difficult?</b>	<b>Age</b>	<b>Assistance / Device</b>
a. Prepare own meals	1. Difficult 2. Not difficult <b>[Go to b]</b> 3. Do not perform activity due to a non-health/physical reason <b>[Go to b]</b> 4. Not sure <b>[Go to b]</b> <b>Q30a_i_Difficult</b>	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure <b>Q30a_ii_How</b>	yrs old  <b>Q30a_iii_Age</b> 999 DK 998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify: _____) 3. No 4. Not sure <b>Q30a_iv_Assistance_1</b> <b>Q30a_iv_Assistance_2</b> (Label 1 as Yes, human assistance and 2 as Yes, device assistance) <b>Q30a_iv_Assistance_2_Specify</b>
b. Leave the home to purchase necessary items or medication	1. Difficult 2. Not difficult <b>[Go to c]</b> 3. Do not perform activity due to a non-health/physical reason <b>[Go to c]</b> 4. Not sure <b>[Go to c]</b> <b>Q30b_i_Difficult</b>	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure <b>Q30b_ii_How</b>	yrs old  <b>Q30b_iii_Age</b> 999 DK 998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify: _____) 3. No 4. Not sure <b>Q30b_iv_Assistance_1</b> <b>Q30b_iv_Assistance_2</b> <b>Q30b_iv_Assistance_2_Specify</b>
c. Take care of financial matters such as paying utilities (electricity, water)	1. Difficult 2. Not difficult <b>[Go to d]</b> 3. Do not perform activity due to a non-health/physical reason <b>[Go to d]</b> 4. Not sure <b>[Go to d]</b> <b>Q30c_i_Difficult</b>	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure <b>Q30c_ii_How</b>	yrs old  <b>Q30c_iii_Age</b> 999 DK 998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify: _____) 3. No 4. Not sure <b>Q30c_iv_Assistance_1</b> <b>Q30c_iv_Assistance_2</b> <b>Q30c_iv_Assistance_2_Specify</b>
d. Use the phone	1. Difficult 2. Not difficult <b>[Go to e]</b> 3. Do not perform activity due to a non-health/physical reason <b>[Go to e]</b> 4. Not sure <b>[Go to e]</b> <b>Q30d_i_Difficult</b>	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure <b>Q30d_ii_How</b>	yrs old  <b>Q30d_iii_Age</b> 999 DK 998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify: _____) 3. No 4. Not sure <b>Q30d_iv_Assistance_1</b> <b>Q30d_iv_Assistance_2</b> <b>Q30d_iv_Assistance_2_Specify</b>
e. Dust, clean up and other light housework	1. Difficult 2. Not difficult <b>[Go to f]</b> 3. Do not perform activity due to a non-health/physical reason <b>[Go to f]</b> 4. Not sure <b>[Go to f]</b> <b>Q30e_i_Difficult</b>	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure <b>Q30e_ii_How</b>	yrs old  <b>Q30e_iii_Age</b> 999 DK 998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify: _____) 3. No 4. Not sure <b>Q30e_iv_Assistance_1</b> <b>Q30e_iv_Assistance_2</b> <b>Q30e_iv_Assistance_2_Specify</b>
f. Take public transport to leave home	1. Difficult 2. Not difficult <b>[Go to g]</b> 3. Do not perform activity due to a non-health/physical reason <b>[Go to g]</b> 4. Not sure <b>[Go to g]</b> <b>Q30f_i_Difficult</b>	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure <b>Q30f_ii_How</b>	yrs old  <b>Q30f_iii_Age</b> 999 DK 998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify: _____) 3. No 4. Not sure <b>Q30f_iv_Assistance_1</b> <b>Q30f_iv_Assistance_2</b> <b>Q30f_iv_Assistance_2_Specify</b>

g. Take medication as prescribed	1. Difficult 2. Not difficult <b>[Go to Q31.1]</b> 3. Do not perform activity due to a non-health/physical reason <b>[Go to Q31.1]</b> 4. Not sure <b>[Go to Q31.1]</b> <b>Q30g_i_Difficult</b>	1. Somewhat difficult 2. Very difficult 3. Unable to perform 4. Not sure <b>Q30g_ii_How</b>	yrs old <b>Q30g_iii_Age</b> 999 DK 998 RF	1. Yes, human assistance 2. Yes, device assistance (Specify: _____) 3. No 4. Not sure <b>Q30g_iv_Assistance_1</b> <b>Q30g_iv_Assistance_2</b> <b>Q30g_iv_Assistance_2_Specify</b>
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**iadldiff**

**(Problem in variable coding, category 4 of Q30\*\_i\_Difficult is not coded to 0)**

(Created variable: Summary measure of IADL limitations (range 0-7). Higher score indicates higher number of IADL limitations. Score is based on the number of "Difficult" responses.)

**iadldiff\_yesno**

**(Problem in variable coding, category 4 of Q30\*\_i\_Difficult is not coded to 0)**

(Created variable: Summary measure of IADL limitations, dichotomized. This is based on the number of "Difficult" responses.)

**0:** No IADL limitations

**1:** At least one IADL limitation

**Q31.1** **[Interviewer: If the respondent reported no difficulty in Q30, go to Q32] [SHOWCARD 24] Were any of these difficulties due to any of the following conditions? If yes, which ones? [MA]**

**Q31\_1**

**1** Yes, Please specify illness: \_\_\_\_\_

**Q31\_1\_Yes\_1**

**Q31\_1\_Yes\_2**

**Q31\_1\_Yes\_3**

**Q31\_1\_Yes\_4**

**Q31\_1\_Yes\_5**

**Q31\_1\_Yes\_6**

**Q31\_1\_Yes\_7**

**Q31\_1\_Yes\_8**

**Q31\_1\_Yes\_9**

**Q31\_1\_Yes\_10**

**Q31\_1\_Yes\_OthersSpecify**

**For Q31\_1\_Yes\_1 to Q31\_1\_Yes\_10, codes are as follows:**

**1** Heart attack, angina, myocardial infarction etc.

**2** Other forms of heart disease

**3** Cancer (excluding skin cancer)

**4** Cerebrovascular disease (stroke etc.)

**5** Dementia

**6** High blood pressure

**7** Diabetes

**8** Respiratory illness (chronic, such as asthma)

**9** Digestive illness (stomach or intestinal)

**10** Renal / kidney or urinary tract ailments

**11** Ailments of the liver or gallbladder

**12** Arthritis, neuralgia or rheumatism

**13** Chronic back pain

**14** Osteoporosis

**15** Fractures of the hip, thigh or pelvis / broken hip

**16** Other fractures (specify)

**17** Cataract

**18** Glaucoma

**19** Accident

**20** Old age

**21** Due to operation on leg(s)

**2** No

**Q31.2** *[Interviewer: Only ask those who reported a need for human assistance for any of the activities in Q30]*  
**Q31\_2** Who primarily helps you (subject) perform these activities?

- 1 No one  
Live-in family member (Specify: \_\_\_\_\_) *[Interviewer: Record the ID number from Q6.3.]*  
**Q31\_2\_2\_Member\_Specify\_1**
- 2 **Q31\_2\_2\_Member\_Specify\_2**  
**Q31\_2\_2\_Member\_Specify\_3**  
**Q31\_2\_2\_Member\_Specify\_4**  
**Q31\_2\_6\_Other\_Specify**
- 3 Non co-resident family member
- 4 Housemaid / houseboy
- 5 Not sure
- 6 Other (Specify: \_\_\_\_\_)

*[Interviewer: If the respondent reported no difficulty in any of the items in Q28 and Q30 above, go to Q33.1]*

**Q32** Do these difficulties limit your (subject's) social interaction? **Q32**

- 1 Yes
- 2 No
- 3 Not sure

The next questions concern any pain experienced by you (subject).

**Q33.1** **[SHOWCARD 25]** Overall, in the last 30 days, how much of bodily aches or pains (in terms of intensity) did you (subject) have? **Q33\_1**

- 1 None **[Go to Q34]**
- 2 Mild
- 3 Moderate
- 4 Severe
- 5 Extreme / cannot function because of pain **[Go to Q33.3]**

**Q33.2** **[SHOWCARD 26]** Did the pain affect your (subject's) daily activities? **Q33\_2**

- 1 Not at all
- 2 Rarely
- 3 Sometimes
- 4 Often
- 5 All the time

**Q33.3** **[SHOWCARD 27]** In what parts of your (subject's) body did you (subject) feel pain? **[MA]**

- Q33\_3\_1, Q33\_3\_2, Q33\_3\_3, Q33\_3\_4, Q33\_3\_5, Q33\_3\_6, Q33\_3\_7, Q33\_3\_8, (Q33\_3\_9 – not labeled)**
- |   |                            |    |  |
|---|----------------------------|----|--|
| 1 | Head                       | 13 | Hands/Palm/Fingers (E.g cold fingers, numb fingers)            |
| 2 | Neck                       | 14 | Foot/Feet/Toes   |
| 3 | Shoulders                  | 15 | Legs/Lower legs/Calves (E.g swollen leg, broken leg, weak leg) |
| 4 | Joints of the hands / arms | 16 | Mouth/Tongue/Throat  |
| 5 | Chest                      | 19 | Skin itchiness/Rash (on leg)                                   |

6	Abdomen	20	Wheelchair bound /bedridden/paralysed/stroke/coma/dementia
7	Back	25	Hips/Buttock
8	Lower back / waist	26	Nerves/Muscle pain
9	Joints of the legs / feet	27	Arm
10	Others (Specify:_____)	28	Teeth
11	Eyes	29	Whole body
12	Ears	999	Not sure

## SECTION D: HEALTH BEHAVIOURS

The next questions will be about your (subject's) height and weight.

RESPONSE to Q34 and Q35 was NOT VALID, both questions have been deleted from the dataset. Please refer to variable M17 for height and M33 for weight.

The next few questions pertain to sleep.

**Q36.1** On average, approximately how much do you (subject) sleep per night?

<input type="text"/>	<input type="text"/>	hrs	<input type="text"/>	<input type="text"/>	min	999	Not sure
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**Q36\_1\_hrs**

**Q36\_1\_min**

**sleepdur**

(Created variable: Summary measure of sleep duration (in hours, combining both hours and minutes))

**sleepdur\_rounded**

(Created variable: Summary measure of sleep duration (in hours, combining both hours and minutes).  
Note: The values in this variable are rounded, where 6 hours = 5.5-6.4 hours, 7 hours = 6.5-7.4 hours, and so on.)

**Q36.2** Do you take naps? How long do you (subject) nap?

<input type="text"/>	<input type="text"/>	hrs	<input type="text"/>	<input type="text"/>	min	98	Don't nap	999	Not sure
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**Q36\_2\_hrs**

**Q36\_2\_min**

**napcategory**

(Created variable: Summary measure of nap duration, in categories)

**0:** Do not nap

**1:** <30 minutes

**2:** 30-60 minutes

**3:** >60 minutes

**nap\_yesno**

(Created variable: Summary measure of nap duration, dichotomous)

**0:** Do not nap

**1:** Take naps

**Q36.3** How often do you feel really rested when you wake up in the morning? Would you say most of the time, sometimes, or rarely or never? **Q36\_3**

[Interviewer: If respondent is proxy, please do not ask this question]

**1** Most of the time **2** Sometimes **3** Rarely / Never **4** DK **5** RF

The next few questions pertain to personal habits.

**Q37.1 Do you (subject) currently smoke? Q37\_1**

1 Yes [Go to Q37.4] 2 No 3 Not sure

**Q37.2 In the past, have you (subject) ever smoked? Q37\_2**

1 Yes 2 No [Go to Q38.1] 3 Not sure [Go to Q38.1]

**smoker**

(Created variable: Summary measure of smoking, categorical. Note: Current smoker defined as those currently smoking. Ex-smoker defined as those not currently smoking but smoked in the past. Non-smoker are those who are not currently smoking and have never smoked in the past.)

1: Current smoker

2: Ex-smoker

3: Non-smoker

**Q37.3 [If ever smoked, Q37.2 = 1] At what age did you (subject) quit smoking?**

		yrs (approximately)	999	DK
			998	RF

**Q37\_3\_yrs**

**Q37.4 How old were you (subject) when you (subject) first started smoking?**

*[Interviewer: In the event that the subject has quit smoking in the past or does not smoke currently, record the age at which the subject first started to smoke.]*

		yrs (approximately)	999	DK
			998	RF

**Q37\_4\_yrs**

**Q37.5 How much do/did you (subject) smoke a day on average?**

*[Interviewer: In the event that the subject smokes a pipe, record the number of times the subject smokes a day.]*

			cigarettes / cigars a day (approximately)
--	--	--	---

**Q37\_5\_cig**

**Q38.1 How often do you (subject) drink alcohol? Q38\_1**

- 1 \_\_\_\_\_ days a month **Q38\_1\_1\_DaysaMonth**
- 2 On festive seasons / special occasions (e.g. weddings, birthday parties)
- 3 Do not drink **[Go to Q39]**

**Q38.2 On the days that you (subject) drink, (i) what and (ii) how much do you (subject) normally consume? [MA] (Record the amount consumed in one day)**

(i) Type of drink 0: No ; 1: Yes	(ii) Amount Consumed
1 Beer <b>Q38_2_i_1</b>	_____ Cans <b>Q38_2_i_1_Cans</b> (Average can = 330 ml)
2 Wine <b>Q38_2_i_2</b>	_____ Glasses <b>Q38_2_i_2_Glasses</b>
3 Whisky <b>Q38_2_i_3</b>	_____ Glasses <b>Q38_2_i_3_Glasses</b>
4 Other (Please specify: _____) <b>Q38_2_i_4</b> <b>Q38_2_i_4_Others_Specify</b>	_____ (Please fill in the amount by glasses / etc.) <b>Q38_2_i_4_Fill_in_Amt</b>

The next questions will focus on your (subject's) activities.

**Q39 [SHOWCARD 28] How often do you (subject) do any of the following?**

---

		Every day	Every week	Every month	Less than once a month	Not at all	Not sure
<u>Social activities</u>							
a	Attends RC / CC / CDC / neighbourhood event <b>Q39a</b>	1	2	3	4	5	9
b	Go out to eat <b>Q39b</b>	1	2	3	4	5	9
c	Attends church, synagogue, mosque or other place of worship <b>Q39c</b>	1	2	3	4	5	9
<u>Fitness activities</u>							
d	Goes for a walk (for exercise purposes) <b>Q39d</b>	1	2	3	4	5	9
e	Plays a game of sport / exercise (e.g. Taiji, Qigong, swimming, keep fit or dancing class, etc.) <b>Q39e</b>	1	2	3	4	5	9

**Q40** On average, how many hours of television do you (subject) watch in one day? This includes watching TV while engaged in another activity, such as eating.

*[Interviewer: In the event that the respondent gives a time-range, take the average time for the range as the answer. For example, a response of 1-2 hours becomes 1 hour 30 minutes.]*

Approx.   Hrs **Q40\_hrs**   Mins **Q40\_mins** **98** Did not watch TV  
**999** Not sure

## SECTION E: DENTAL HEALTH

The next question pertains to your (subject's) ability to chew.

**Q41** [SHOWCARD 29] The following foods are ordered from hardest to softest to chew. What is the **HARDEST GROUP** you (subject) are able to bite and chew? If you are using dentures, please respond as if you (subject) were eating with your (subject's) dentures. [SA]

- 1 Ikan Bilis in Nasi Lemak or shredded dry squid
- 2 Mutton curry, dry mango, or fresh carrots,
- 3 Bak-kwa, bread with crust not toasted, or kang kong steam boiled, chicken satay, or raw cucumber
- 4 Thai Rice, fried fish ball, or Wonton noodle
- 5 Bananas, ripe papaya, hard boiled egg
- 6 Unable to chew the foods listed in (5)
- 7 Not sure

The next few questions pertain to your (subject's) teeth.

**Q42** How many original teeth do you (subject) have? Adults have 28 natural adult teeth (32 including wisdom teeth) and 0 for full dentures. Prosthetic teeth with roots should be included in the number. For bridges, the artificial tooth should not be counted; however, natural teeth acting as supports should be.

*[Interviewer: Encourage the respondent to give a rough estimate if he or she first gives "not sure" as a response.]*

natural teeth in total **97** <20 teeth  
**Q42\_teeth** **98** >20 teeth  
**999** Not sure

**Q43.1** Do you (subject) have dentures?

**Q43.1**

- 1 Yes
- 2 No [Go to Q44]
- 3 Not sure [Go to Q44]

**Q43.2** Do they fit well?

**Q43.2**

- 1 Yes
- 2 No
- 3 Not sure

**Q43.3** Can you (subject) bite and chew well with them?

**Q43.3**

- 1 Yes
- 2 No
- 3 Not sure

*[Interviewer: If respondent is a proxy, please do not ask Q44 ~ Q47. Go to Q48]*

## SECTION F: COGNITION

**Q44** The next questions are about memory. Since there isn't much scientific information on how good the average person's memory is, many of our questions are designed to provide this basic information. The questions may seem unusual, but they are routine questions we ask of everyone. Some of the questions are very easy and some are difficult, so do not be surprised if you have trouble with some of them.

Now, we will ask you a series of 10 questions.

Please try to answer these questions correctly and to the best of your knowledge.

	Questions	Response	Correct	Incorrect	Correct only when:
a	What is today's date? (including date, month and year) <b>Q44a</b>		1	2	The month, date and year are all correct
b	What is the day of the week? <b>Q44b</b>		1	2	The day is correct
c	What is the name of this place in Singapore? <b>Q44c</b>		1	2	Any of the description of the location is given: correct district, zone, street, name of the area, name of apartment complex, are all acceptable
d	What is your phone number? <b>Q44d</b> 8 RF 9 No phone		1	2	The number can be verified or the subject can repeat the same number at a later time in the interview
e	When were you born? <b>Q44e</b>		1	2	The month, date and year are correct
f	How old are you? <b>Q44f</b>		1	2	The stated age corresponds to the date of birth
g	Who is the current Prime Minister? <b>Q44g</b>		1	2	It is Lee Hsien Loong. Requires the full name to be mentioned.
h	Who was the Prime Minister before him? <b>Q44h</b>		1	2	It is Goh Chok Tong. Requires the full name to be mentioned.
i	What was your mother's maiden name? <b>Q44i</b>		1	2	Needs no verification.
j	Please count backward from 20 by 3's? <b>Q44j</b>		1	2	The entire series must be performed correctly to be scored as correct. Any error in the series - or an unwillingness to attempt the series- is scored as incorrect

### spmsq

SPMSQ score uncorrected for interviewer error PLEASE DO NOT USE

### spm\_corr

PLEASE USE THIS VARIABLE INSTEAD of **spmsq**

(Created variable: Summary measure of cognitive impairment, a corrected score. Some individuals have a some of less than zero due to adjustments made for interviewer error. Please set scores less than zero to zero before using this variable for analysis.)

Reference: Malhotra, R., Haaland, B. A., Chei, C. L., Chan, A., Malhotra, C., & Matchar, D. B. (2015). Presence of and correction for interviewer error on an instrument assessing cognitive function of older adults. *Geriatrics & gerontology international*, 15(3), 372-380.

### cognecat\_corr

(Created variable: Summary measure of cognitive impairment, in categories. Note: This is created using the corrected score. See reference above.)

- 1: Intellectually intact
- 2: Mildly impaired
- 3: Moderately impaired
- 4: Severely impaired

## SECTION G: CES – D SCALE

**Q45** The next questions are on your psychological state and ways that you cope emotionally on a daily basis. These are questions commonly used in surveys, and it is important that we receive your answers on all of the questions for comparative purposes. We ask that you bear with us and thank you for your cooperation.

**[SHOWCARD 30]** During the past week, to what extent has the following (a ~ l) been true for you?

*[Interviewer: Should respondent have any query, you may explain as such: There may be some questions for which you have no answer or which seem the same as another question, but the same questions are used internationally in studies and tests. We ask for your full cooperation.]*

			None / Rarely	Sometimes	Often	No comment
Q45a	a	My appetite was poor	0	1	2	9
Q45b	b	I felt depressed	0	1	2	9
Q45c	c	I felt that everything I did was an effort	0	1	2	9
Q45d	d	My sleep was restless	0	1	2	9
Q45e	e	I felt happy	0	1	2	9
Q45f	f	I felt lonely	0	1	2	9
Q45g	g	I felt people were unfriendly	0	1	2	9
Q45h	h	I enjoyed life	0	1	2	9
Q45i	i	I felt sad	0	1	2	9
Q45j	j	I felt that people disliked me	0	1	2	9
Q45k	k	I could not get “going”	0	1	2	9
Q45l	l	I felt hopeful about the future	0	1	2	9

### cesd

(Created variable: Summary measure of depressive symptoms, continuous, using the first 11 items i.e. Q45a to Q45k: 11-item CES-D. NOTE: Q45l is NOT used)

Reference: Kohout, F. J., Berkman, L. F., Evans, D. A., & Cornoni-Huntley, J. (1993). Two shorter forms of the CES-D depression symptoms index. *Journal of aging and health*, 5(2), 179-193.

### cesd\_yesno

(Created variable: Summary measure of depressive symptoms, dichotomized, using the first 11 items i.e. Q45a to Q45k: 11-item CES-D. NOTE: Q45l is NOT used)

- 0: Score of less than 7 (symptoms not clinically relevant)
- 1: Score of 7 and above (symptoms clinically relevant)

Reference: Malhotra, C., Chan, A., Malhotra, R., & Østbye, T. (2011). Fifteen dimensions of health among community-dwelling older Singaporeans. *Current gerontology and geriatrics research*, 2011.

**Q46** **[SHOWCARD 31]** How strongly do you agree or disagree with the following statements:

		Strongly Disagree	Disagree	Agree	Strongly Agree	Don't Know
Q46a	a	1	2	3	4	9
Q46b	b	1	2	3	4	9
Q46c	c	1	2	3	4	9
Q46d	d	1	2	3	4	9
Q46e	e	1	2	3	4	9

**mastery**

(Created variable: Summary measure of personal mastery, continuous.)

Reference: Pearlin, L. I., & Schooler, C. (1978). The structure of coping. *Journal of health and social behavior*, 2-21.

**SECTION H: INCOME AND ASSETS**

**Q47** Now think about your family when you were growing up, from birth to age 16. Would you say your family during that time was pretty well off financially, about average, or poor?

- Q47 1 Pretty well off 2 Average 3 Poor  
9 Don't know

**Q48** [SHOWCARD 32] What is your (subject's) largest source of funds? Please select from the following the 3 main sources indicating their order of importance.

First source		Q48_First_Source
Second source		Q48_Second_Source
Third source		Q48_Third_Source

**(For internal coding only)**

- |   |  |    |   |
|---|--|----|---|
| 1 | Income from work   | 8  | Public assistance / Short-term financial assistance from Community Development Councils (CDC) |
| 2 | Pension  | 9  | Other (Please specify: _____)   |
| 3 | Central Provident Fund   | 10 | Not sure  |
| 4 | Savings, life insurance, bonds, stock                                  | 11 | Financial support from spouse   |
| 5 | Financial support from children, grandchildren or relatives            | 12 | Financial support from religion groups  |
| 6 | Income in the form of rent from self-owned condominiums or real-estate | 13 | Financial support from friends  |
| 7 | Income from family business  |    |   |

**Q49** [SHOWCARD 33] What is the total monthly income of this household (from all sources includes drawing down from savings)? **Q49**

- 1 Less than \$500
- 2 \$500-\$999
- 3 \$1000-\$1999
- 4 \$2000-\$2999
- 5 \$3000-\$3999
- 6 \$4000-\$4999
- 7 \$5000 and above
- 8 Refused
- 9 Don't know
- 98 None

**Q50** [SHOWCARD 34] Do you feel that you have adequate income to meet your expenses per month? **Q50**

- 1 Enough money, with some left over
- 2 Just enough money, no difficulty
- 3 Some difficulty to meet expenses
- 4 Much difficulty to meet expenses
- 9 Don't know

**SECTION I: VIGNETTES FOR PAIN**

**Q51** Next I will outline the state of health of a number of people. All of them are different from yourself but please assume that their age, sex and position are similar to your own. After listening to the state of health described for each person, imagine you are that person and answer how you would feel.

[SHOWCARD 35] Overall, in the last 30 days how much of bodily aches or pains did \_\_\_\_\_ have?

Vignettes		None	Mild	Moderate	Severe	Extreme / Cannot function because of pain	RF	Don't Understand / Cannot answer
A	Uncle Ong has pain in his knees, elbows, wrists and fingers, and the pain is present almost all the time. It gets worse during the first half of the day. Although medication helps, he feels uncomfortable when moving around, holding and lifting things. <b>Q51a</b>	1	2	3	4	5	8	9
b	Aunty Tan cannot remember when she last felt pain as this has not happened for the last several years now. She does not experience any pain even after hard physical labor or exercise. <b>Q51b</b>	1	2	3	4	5	8	9

c	Ah Hock has pain in the neck radiating to the arms that is not relieved by any medicines or other treatment. The pain is sharp at all times and keeps him awake most of the night. During the day the pain has made him completely incapacitated. It has necessitated complete confinement to the bed and often makes him think of ending his life. <b>Q51c</b>	1	2	3	4	5	8	9
d	Aunty Lily has a headache once a month that is relieved one hour after taking a pill. During the headache she can carry on with her day to day affairs. <b>Q51d</b>	1	2	3	4	5	8	9
e	Ah Huay has pain that radiates down her right arm and wrist during her day at work. This is slightly relieved in the evenings when she is no longer doing her desk work. <b>Q51e</b>	1	2	3	4	5	8	9

***Thank you very much for your cooperation!***

*[Interviewer: If you don't mind, we would like to take down your telephone number. There didn't seem to be any problems during this interview, but you may receive a phone call to confirm that you were not troubled in any way during this interview. I assure you this phone call will not be troublesome in any way.]*

## POST INTERVIEW: OBSERVATIONS OF THE INTERVIEWER

*[Interviewer: Please fill in the following questions based on your observations during the interview.]*

**I1 Select one from below that best describes the interview: I1**

- 1 Responses given by subject **[Go to I2 – I4]**
- 2 Responses given by subject who required the assistance of a third party **[Go to I5 & I6]**
- 3 Responses given by a proxy **[Go to I7]**

**I2 During the survey, was there someone either present in the room or in a room nearby who could hear the contents of the interview? I2**

- 1 Yes, during most of the interview
- 2 Yes, during half of the interview
- 3 Yes, at times during the interview
- 4 For the most part, no 3rd party was present to hear **[Go to I7]**

**I3 If there was someone present, what was his or her relationship to the subject? [MA]**

**I3\_1, I3\_2, I3\_3, I3\_4, I3\_5, I3\_6, I3\_7**

- |            |                   |                  |
|------------|-------------------|------------------|
| 1 Spouse   | 4 Daughter-in-law | 7 Other relative |
| 2 Son      | 5 Son-in-law      | 8 Neighbour      |
| 3 Daughter | 6 Grandchild      | 9 Other          |
- (Please explain: **I3\_9 Explain**)

**I4 To what extent did this third party influence the subject's responses? I4**

- 1 Would correct the subject's responses or prevent the subject from giving his or her own responses
- 2 Listened to the interview, but did not interrupt verbally
- 3 Hardly paid any attention to the interview
- 4 Didn't seem to have any effect on the subject's responses

**[Go to I7]**

**I5 If there was someone assisting the subject, what was his or her relationship to the subject? [MA]**

**I5\_1, I5\_2, I5\_3**

- |            |                   |                  |
|------------|-------------------|------------------|
| 1 Spouse   | 4 Daughter-in-law | 7 Other relative |
| 2 Son      | 5 Son-in-law      | 8 Neighbour      |
| 3 Daughter | 6 Grandchild      | 9 Other          |
- (Please explain: **I5\_9 Explain**)

**I6 Why was someone needed to assist the subject? [MA]**

**I6\_1, I6\_2, I6\_3, I6\_4, I6\_5, I6\_6**

- 1 The subject has been hospitalized
- 2 The subject has been moved to an institution for health reasons (including physical or psychological).
- 3 The subject has been moved to an institution for reasons other than health (e.g. subject has been incarcerated for a traffic violation or otherwise).
- 4 The subject has difficulties hearing (the subject is hearing impaired, etc.).
- 5 The subject has difficulties speaking (the subject is experiencing verbal difficulties).
- 6 The subject has experienced memory loss, confusion or loss of consciousness, etc.
- 7 The subject is experiencing dementia.
- 8 The subject is experiencing some other form of psychological disorder.



# Panel on Health and Aging of Singaporean Elderly (PHASE) – Wave 1

## a.k.a Social Isolation, Health and Lifestyles Survey 2009

### Anthropometric Measurement Sheet

**MeasurementTaken:** At least one anthropometric measurement done

(1 = Taken 2 = Not taken)

CASE NO.: \_\_\_\_\_ NAME OF RESPONDENT: \_\_\_\_\_

Fill in the following information after you have completed the questionnaire.

INTERVIEWER: \_\_\_\_\_ DATE OF INTERVIEW: \_\_\_\_\_

TIME STARTED: \_\_\_\_\_ TIME ENDED: \_\_\_\_\_

TOTAL TIME TAKEN FOR MEASUREMENT: \_\_\_\_\_ MINUTES

(Please include time used by the subject to attend to personal affairs or to rest.)

#### INTRODUCTION

Next, we would like to better understand certain aspects related to the health and physical status of persons your age. For this reason, we are going to take 5 different physical measurements, which involve gripping an object with your hands and having your blood pressure, height, weight, and waist measurements taken. If you have any questions now or later, please don't hesitate to ask.

*[Interviewer: Before beginning the physical measurements, you must have a signed consent form from the Respondent. Subjects must be eligible for at least 3 of the 5 measurements before proceeding (e.g. subject should at least be able to sit upright).]*

#### SECTION A: BLOOD PRESSURE

Equipment needed: Omron HEM-780N Monitor, Batteries, Stop Watch

Now let's talk about the first activity. I'd like to measure your blood pressure using this monitor and cuff which I will secure around your left arm. I would like to take three blood pressure measures. I will ask you to relax and remain seated and quiet during the measurements. First, I will place the cuff on your left arm. Once the cuff is placed appropriately on your arm and we are ready to begin, I'll ask you to lay your arm on a flat surface palm facing up so that the center of your upper arm is at the same height as your heart. I will then press the Start button. The cuff will inflate and deflate automatically. After we have completed all three measures, I will give you your results.

*[Interviewer: Demonstrate the test.]*

**Q1 Do you have a rash, a cast, edema (swelling) in the arm, open sores or wounds, or a significant bruise where the blood pressure cuff will be in contact? M1**

- 1 Yes [Do not complete this measure, record the reasons in Q4 and Go to Section B]
- 2 No

**Q2 Do you understand the directions for this test? M2**

- 1 Yes
- 2 No

**Q3 Do you feel it would be safe for you to do this test? M3**

- 1 Yes
- 2 No [Do not complete this measure, record the reasons in Q4 and Go to Section B]

**Q4 Record why the respondent did not complete the blood pressure measurement [MA]:**

**M4\_1, M4\_2, M4\_3**

- 1 Respondent felt it would not be safe
- 2 Interviewer felt it would not be safe

- 3 Respondent refused or was not willing to complete the test
- 4 Respondent tried but was unable to complete test
- 5 Respondent did not understand the instructions
- 6 Respondent had a rash, a cast, edema, open sores or wounds, or significant bruise where the blood pressure cuff would contact Respondent's arm
- 7 Other (Specify: \_\_\_\_\_) **M4\_7\_Specify**

**INSTRUCTIONS FOR ADMINISTERING BLOOD PRESSURE TEST:**

- a) Insert arm cuff plug into jack on the side of the monitor.
- b) Instruct Respondent to remove bulky clothing from upper left arm.
- c) Instruct Respondent to sit upright in a chair with his/her feet flat on the floor and place his/her upper arm on a table.
- d) Place the cuff on the Respondent's left arm approximately 1/2" above the elbow. Position the blue marker over the brachial artery on the inside of the arm.
- e) Press the sewn hook material firmly against the side of the cuff. [The cuff should make direct contact with the Respondent's skin]. The Respondent should easily be able to fit his/her index finger between the cuff and the arm.
- f) Instruct the Respondent to rest his/her arm comfortably on a support (like a table) with palm facing upward so the cuff is at the same level as the heart.
- g) Press the START/STOP button and instruct the Respondent to remain still. When the ♥ symbol appears on the display, press the START button. The cuff will begin to inflate automatically. Numbers will appear on the display and the ♥ symbol will blink.
- h) The cuff will then automatically deflate. The monitor will first display the SYSTOLIC and DIASTOLIC readings. RECORD time of reading and both SYSTOLIC and DIASTOLIC readings in chart below. Record the pulse identified by the letter P.
- i) Press the START/STOP button to repeat the measure. The cuff does not need to be removed or loosened in between readings. If you receive an error message, remove cuff, reposition and try again.
- j) Allow approximately 45 seconds to 1 minute between readings and repeat steps e ~ i two more times.

*[Interviewer: Record measurements in chart.]*

Q5	Measurement	Time of Reading	Systolic Reading (High)	Diastolic Reading (Low)	Pulse
		___ : ___ am / pm	mmHg	mmHg	P
1 <sup>st</sup>		<b>M5_1st_Reading_Time</b>	<b>M5_1st_Systolic_Reading</b>	<b>M5_1st_Diastolic_Reading</b>	<b>M5_1st_Pulse</b>
		___ : ___ am / pm	mmHg	mmHg	P
2 <sup>nd</sup>		<b>M5_2nd_Reading_Time</b>	<b>M5_2nd_Systolic_Reading</b>	<b>M5_2nd_Diastolic_Reading</b>	<b>M5_2nd_Pulse</b>
		___ : ___ am / pm	mmHg	mmHg	P
3 <sup>rd</sup>		<b>M5_3rd_Reading_Time</b>	<b>M5_3rd_Systolic_Reading</b>	<b>M5_3rd_Diastolic_Reading</b>	<b>M5_3rd_Pulse</b>

**hypertension\_yesno**

(Created variable: Summary measure of hypertension, dichotomous. *Note:* Hypertension taken as systolic ≥ 140 mm Hg and/or diastolic ≥ 90 mm Hg (mean of 3 measures), or use of antihypertensive medication – as indicated in Q25f\_iii\_Medication). Only apply to those with blood pressure measurements.

**0:** No hypertension

**1:** Presence of hypertension

**Q6** Record which arm was used to conduct the measurements: **M6**

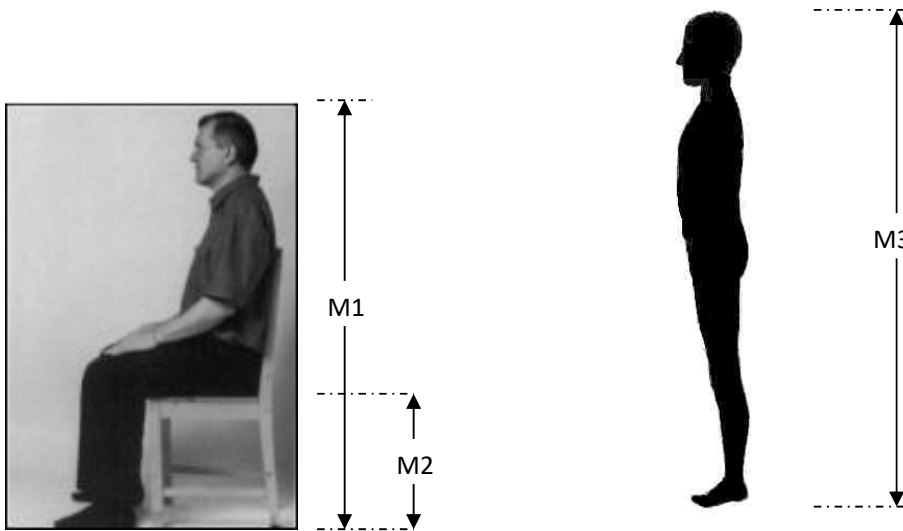


### INSTRUCTIONS FOR MEASURING SITTING HEIGHT

- a) Ask Respondent to sit on a flat chair, box, and stool or on the floor. The chair should preferably not be cushioned.
- b) Make sure Respondent is sitting up as straight and comfortable as possible facing forward with the head level, the shoulders and upper arms relaxed, and forearms and hands extended forward horizontally. The thighs are parallel, and the knees are flexed  $90^\circ$  (if sitting on an elevated surface) with the feet in line with the thighs.
- c) Place a self-adhesive note on the wall near the top of the Respondent's head.
- d) Position your rafter's square against the wall directly over the Respondent's head. It should be parallel to the floor, resting on the Respondent's head but not pressing on it.
- e) Make a mark on the self-adhesive note at the bottom of the rafter's square.
- f) Now, position your rafter's square to make a similar mark for the sitting surface. If the sitting surface is cushioned, then position your rafter's square to make a mark near the middle of the cushion.
- g) Measure the vertical distance between the top of the head and the floor (Measurement 1).
- h) Measure the vertical distance between the sitting surface and the floor with the measuring tape (Measurement 2).
- i) Record Respondent's height in **cm** on self-adhesive note on the wall and remove it from the wall.

### INSTRUCTIONS FOR MEASURING STANDING HEIGHT

- a) Ask Respondent for location to conduct measurement.
- b) Make sure Respondent is standing up as straight and comfortable as possible with his/her heels and shoulders as close to the wall as comfortable.
- c) Place a self-adhesive note on the wall near the top of the Respondent's head.
- d) Position your rafter's square against the wall directly over the Respondent's head. It should be parallel to the floor, resting on the Respondent's head but not pressing on it.
- e) Make a mark on the self-adhesive note at the bottom of the rafter's square.
- f) Ask the Respondent to move away from the wall.
- g) Position the tape measure under a door jam, floor molding or your foot and measure from the floor to the mark on the self-adhesive note.
- h) Record Respondent's height in **cm** on self-adhesive note on the wall and remove it from the wall. (Measurement 3)



*[Interviewer: Record measurement in chart to nearest 0.1cm (example: record 140.5 cm)]*

Q14	Measurement 1 (M1)	Height
M14	Distance from top of head to the floor (Sitting position)	_____ . ____ cm

Q15	Measurement 2 (M2)	Height
M15	Distance from sitting surface to the floor	_____ . ____ cm

Q16 Record Sitting Height (Sitting Height = Measurement 1 – Measurement 2): \_\_\_\_\_ cm  
 M16 \_\_\_\_\_

Q17	Measurement 3 (M3)	Standing Height
M17	Distance from top of head to the floor (Standing position)	_____ . ____ cm

Q18 Record what the Respondent was sitting on: M18

- 1 Floor
- 2 Chair without cushion
- 3 Cushioned chair
- 4 Stool
- 5 Box
- 6 Other (Please specify: \_\_\_\_\_) M18\_6\_Specify

Q19 Record the type of floor surface: M19

- 1 Linoleum / wood / ceramic / marble
- 2 Low-pile carpet

- 3 High-pile carpet
- 4 Concrete
- 5 Not sure
- 6 Other (Specify): \_\_\_\_\_ **M19\_6\_Specify**

**Q20 Record if Respondent was wearing shoes during the measurement: M20**

- 1 Yes
- 2 No

**Q21 Record how compliant the Respondent was during this measurement: M21**

- 1 Respondent was fully compliant
- 2 Respondent was prevented from fully complying due to illness, pain, or other symptoms or discomforts
- 3 Respondent was not fully compliant, but no obvious reason for this

## SECTION C: WAIST

Equipment needed: Soft Tape measure

Next I'm going to ask you to perform a simple measurement of your waist circumference. For this measurement it is important for you to be standing. I will ask you to identify where on your body your navel (belly button) is located. I will then ask you to place this cloth measuring tape around your waist, over your clothing, holding it securely at the level of your navel. Once the tape measure is placed appropriately around your waist then we are ready to begin. I will ask you to take a normal breath and exhale, holding your breath at the end of the exhale. I will then record the measurement.

*[Interviewer: Demonstrate the measurement.]*

**Q22 Do you understand the directions for this measurement? M22**

- 1 Yes
- 2 No

**Q23 Do you feel it would be safe for you to do this test? M23**

- 1 Yes
- 2 No [Do not complete this measure, record this reason in Q24, and Go to Section D]

**Q24 Record why the Respondent's waist was not measured:**

**M24\_1, M24\_2, M24\_3**

- 1 Respondent felt it would not be safe
- 2 Interviewer felt it would not be safe
- 3 Respondent refused or was not willing to complete the measurement
- 4 Respondent tried but was unable to complete measurement
- 5 Respondent did not understand the instructions
- 6 Respondent is not able to stand
- 7 Other (Specify): \_\_\_\_\_ **M24\_7\_Specify**

## INSTRUCTIONS FOR MEASURING WAIST CIRCUMFERENCE

- a) Instruct Respondent to remove bulky clothing.
- b) Respondent should be in the standing position and measuring tape should be applied over the clothing around the waist at the level of the navel.
- c) Ask Respondent to point to his/her navel.
- d) Instruct Respondent to place the tape around his/her waist at the level of the navel. The Respondent should hold tape in place at the navel. The tape should be snug but not tight. If the Respondent is not able to put the tape around his/her waist, you may have them hold one end of the tape measure at their navel, and walk around the Respondent with the other end.
- e) Check that the tape is horizontal all away around the Respondent.
- f) Instruct Respondent to take a normal breath and exhale holding breath at end of exhale.
- g) Read the measurement on the tape after the Respondent exhales. Record measurement to nearest **0.1cm** in the chart below (e.g. 30.1 cm).

*[Interviewer: Record measurements in chart.]*

Q25	Measurement	Waist Measurement
<b>M25</b>	1 <sup>st</sup>	___ ___ . ___ cm

### **ab\_obesity**

(Created variable: Summary measure of abdominal obesity, dichotomous. *Note:* Abdominal obesity cut off is gender specific, based on Asia-Pacific guidelines. For males, cut off is  $\geq 90.0$ . For females, cut off is  $\geq 80.0$ )

**0:** No obesity

**1:** Presence of obesity

Reference: <http://www.wpro.who.int/nutrition/documents/docs/Redefiningobesity.pdf>

**Q26 Record the difficulties that occurred during this measurement [MA]:**

**M26\_1, M26\_2, M26\_3, M26\_4**

- 1 None
- 2 Respondent had breathing difficulties
- 3 Respondent was unable to hold breath at the end of the exhale
- 4 Respondent was prevented from giving full effort by illness, pain, or other symptoms or discomforts
- 5 Respondent did not appear to give full effort, but no obvious reason for this
- 6 Others (Specify): \_\_\_\_\_ **M26\_6\_Specify**

**Q27 Record how compliant the Respondent was during this measurement: M27**

- 1 Respondent was fully compliant
- 2 Respondent was prevented from fully complying due to illness, pain, or other symptoms or discomforts
- 3 Respondent was not fully compliant, but no obvious reason for this

**Q28 Record who completed the measurement: M28**

- 1 Respondent completed the measurement
- 2 Interviewer completed the measurement

**Q29 Record whether the Respondent wore bulky clothing during this measurement: M29**

- 1 Yes
- 2 No



### **bmi\_whodetailed**

(Created variable: Summary measure of BMI according to WHO detailed classification, categorical)

- 1: Severe thinness (BMI < 16.0)
- 2: Moderate thinness (BMI = 16-16.9)
- 3: Underweight (BMI = 17-18.4)
- 4: Normal weight (BMI = 18.5 – 24.9)
- 5: Pre-obese (BMI = 25.0-29.9)
- 6: Obese Class I (BMI = 30.0-34.9)
- 7: Obese Class II (BMI = 35.0-39.9)
- 8: Obese Class III (BMI ≥ 40.0)

Reference: [http://apps.who.int/bmi/index.jsp?introPage=intro\\_3.html](http://apps.who.int/bmi/index.jsp?introPage=intro_3.html)

### **bmi\_whosimple**

(Created variable: Summary measure of BMI according to WHO simple classification, categorical)

- 1: Underweight (BMI <18.5)
- 2: Normal weight (BMI = 18.5 – 24.9)
- 3: Pre-obese (BMI = 25.0-29.9)
- 4: Obese (BMI ≥ 30.0)

Reference: [http://apps.who.int/bmi/index.jsp?introPage=intro\\_3.html](http://apps.who.int/bmi/index.jsp?introPage=intro_3.html)

### **bmi\_asian**

(Created variable: Summary measure of BMI according to WHO Asian classification, categorical)

- 1: Underweight (BMI <18.5)
- 2: Normal weight (BMI = 18.5 – 22.9)
- 3: Pre-obese (BMI = 23.0-27.4)
- 4: Obese (BMI ≥ 27.5)

Reference: [http://www.who.int/nutrition/publications/bmi\\_asia\\_strategies.pdf](http://www.who.int/nutrition/publications/bmi_asia_strategies.pdf)

#### **Q34 Record the type of floor surface: M34**

- |   |                                    |   |   |
|---|------------------------------------|---|---|
| 1 | Linoleum / wood / ceramic / marble | 4 | Concrete                                    |
| 2 | Low-pile carpet                    | 5 | Not sure                                    |
| 3 | High-pile carpet                   | 6 | Other (Specify): _____ <b>M34_6_Specify</b> |

#### **Q35 Record if Respondent was wearing shoes during the measurement: M35**

- |   |     |   |    |
|---|-----|---|----|
| 1 | Yes | 2 | No |
|---|-----|---|----|

#### **Q36 Record how compliant the Respondent was during this measurement: M36**

- 1 Respondent was fully compliant
- 2 Respondent was prevented from fully complying due to illness, pain, or other symptoms or discomforts
- 3 Respondent was not fully compliant, but no obvious reason for this

## **SECTION E: HAND STRENGTH**

Equipment needed: Dynamometer

Now I would like to assess the strength of your hand in a gripping action. I will ask you to squeeze this handle as hard as you can, just for a couple of seconds and then let go. I will take alternately two measurements from your right and your left hands.

*[Interviewer: Demonstrate the test.]*



- 3 Both hands equally dominant

[Interviewer: Record measurements in chart.]

Measurement	Left Hand	Right Hand
1st	____ : ____ kg <b>M43_1st_Left_Hand</b>	____ : ____ kg <b>M43_1st_Right_Hand</b>
2nd	____ : ____ kg <b>M43_2nd_Left_Hand</b>	____ : ____ kg <b>M43_2nd_Right_Hand</b>

**hgs\_dom\_highest**

(Created variable: Highest recorded value of dominant hand grip strength, continuous.)

**hgs\_dom\_mean**

(Created variable: Mean value of dominant hand grip strength, continuous.)

**hgs\_nondom\_highest**

(Created variable: Highest recorded value of non-dominant hand grip strength, continuous.)

**hgs\_nondom\_mean**

(Created variable: Mean value of non-dominant hand grip strength, continuous.)

NOTE: Hand dominance was based on the response in variable M42. If the respondent indicated “3 – Both hands equally dominant”, the higher of the two values was used.

**Q44 Record how much effort the Respondent gave to this test: M44**

- 1 Respondent gave full effort
- 2 Respondent was prevented from giving full effort by illness, pain, or other symptoms or discomforts
- 3 Respondent did not appear to give full effort, but no obvious reason for this

**Q45 Record what the Respondent’s position was for this test: M45**

- 1 Standing
- 2 Sitting
- 3 Lying down

**Q46 Record whether the Respondent rested his / her arm on a support while performing the test: M46**

- 1 Yes
- 2 No

**Variables with information about the interviewers**

**Interviewer\_Code** Interviewer ID