

World Health Organization

WHO and INDEPTH

STUDY ON GLOBAL AGEING AND ADULT HEALTH 2007

INDEPTH Short Summary Module – Set A



Insert Fieldsite Name Here

	riptionsng and Quality of Life	
·	<u> </u>	
Household or Respondent Identifi	ication Code:	
Rotation code: (Circle one only)	A B C D	
Interviewer ID:		

Section 1000: Health State Descriptions

Time Begin	
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NOTE TO INTERVIEWERS: Where a DON'T KNOW response category is listed as an option - do not read this category out to the respondent.

I would like to ask you questions about your health and well-being. I know some of these questions may be sensitive or difficult to answer, but please try to provide an answer. I will ask about your overall health, including both your physical and your mental health. Some of the questions may sound similar or repetitive, but I need to ask all of the questions for the sake of completeness. This information is confidential and you will not be identified individually or without your consent.

Q1000	In general, how would you <u>rate your health today?</u>	1 2 3 4	Very good Good Moderate Bad
		5	Very bad
Q1001	Overall in the last 30 days, how much difficulty did you	1	None
	have with work or household activities?		Mild
		3	Moderate
		4	Severe
		5	Extreme/cannot do

Now I would like to review the different functions of your body. When answering these questions, I would like you to think about the last 30 days, taking both good and bad days into account. When I ask about difficulty, I would like you to consider how much difficulty you have had, on average, in the last 30 days, while doing the activity in the way that you usually do it. By difficulty I mean requiring increased effort, discomfort or pain, slowness or changes in the way you do the activity. Please answer this question taking into account any assistance you have available.

NOTE TO INTERVIEWER: Read and show scale to respondent

MOBILITY

	Overall in the last 30 days	None	MILD	Moderate	SEVERE	EXTREME / CANNOT DO
Q1002	how much difficulty did you have with moving around?	1	2	3	4	5
Q1003	how much difficulty did you have in vigorous activities (such as cycling or working in the fields)? 'Vigorous activities' require hard physical effort and cause large increases in breathing or heart rate.	1	2	3	4	5

SELF-CARE

	Overall in the last 30 days, how much difficulty	None	MILD	MODERATE	Severe	EXTREME / CANNOT DO
Q1004	did you have with <u>self-care</u> , such as washing/bathing or dressing yourself?	1	2	3	4	5
Q1005	did you have in taking care of and maintaining your general appearance (for example, grooming, looking neat and tidy).	1	2	3	4	5
Q1006	did you have in <u>staying by yourself</u> for a few days (for example, 3 to 7 days)?	1	2	3	4	5

PAIN AND DISCOMFORT

	Overall in the last 30 days	None	MILD	MODERATE	SEVERE	EXTREME / CANNOT DO
Q1007	how much of <u>bodily aches or pains</u> did you have?	1	2	3	4	5
Q1008	how much <u>bodily discomfort</u> did you have?	1	2	3	4	5
If Q1007 and Q1008 are both = 1, "None" →						Q1010
Q1009	how much difficulty did you have in your daily life because of your pain?	1	2	3	4	5

COGNITION

	Overall in the last 30 days, how much difficulty	None	MILD	Moderate	SEVERE	EXTREME / CANNOT DO
Q1010	did you have with concentrating or remembering things?	1	2	3	4	5
Q1011	did you have in <u>learning a new task</u> (for example, learning how to get to a new place, learning a new game, learning a new recipe)?	1	2	3	4	5

INTERPERSONAL ACTIVITIES

	Overall in the last 30 days, how much difficulty	None	MILD	Moderate	SEVERE	EXTREME / CANNOT DO
Q1012	did you have with <u>personal</u> relationships or participation in the <u>community</u> ?	1	2	3	4	5
Q1013	did you have in <u>dealing with conflicts</u> <u>and tensions</u> with others?	1	2	3	4	5
Q1014	did you have with <u>making new</u> <u>friendships</u> or <u>maintaining current</u> <u>friendships</u> ?	1	2	3	4	5
Q1015	did you have with <u>dealing with</u> <u>strangers</u> ?	1	2	3	4	5

SLEEP AND ENERGY

	Overall in the last 30 days, how much of a problem	None	MILD	MODERATE	SEVERE	EXTREME / CANNOT DO
Q1016	did you have with sleeping, such as falling asleep, waking up frequently during the night or waking up too early in the morning?	1	2	3	4	5
Q1017	did you have due to not feeling rested and refreshed during the day (for example, feeling tired or not having energy)?	1	2	3	4	5

AFFECT

	Overall in the last 30 days, how much of a problem	None	MILD	Moderate	SEVERE	EXTREME / CANNOT DO
Q1018	did you have with <u>feeling sad, low or</u> <u>depressed</u> ?	1	2	3	4	5
Q1019	did you have with worry or anxiety?	1	2	3	4	5

VISION (If respondent normally wears, should answer as when wearing glasses/contact lenses)

Q1020	When was the last time you had your eyes examined by a medical professional?	years ago
	INTERVIEWER: ENTER YEARS AGO. ENTER "00" IF LESS THAN 1 YEAR.	-8 Don't know 98 Never
Q1021	Do you use eyeglasses or contact lenses to see far away (for example across the street)?	1 YES 2 No
Q1022	Do you use eyeglasses or contact lenses to see up close (for example at arms length, like when you are reading)?	1 YES 2 No

	Overall in the last 30 days, how much difficulty did you have	None	MILD	Moderate	Severe	EXTREME / CANNOT DO
Q1023	have in seeing and recognising a person or object you know across the road (from a distance of about 20 meters)?	1	2	3	4	5
Q1024	in seeing and recognising an object at arm's length (for example, reading)?	1	2	3	4	5

FUNCTIONING ASSESSMENT

These next questions ask about difficulties due to health conditions. Health conditions include diseases or illnesses, other health problems that may be short or long lasting, injuries, mental or emotional problems, and problems with alcohol or drugs. Think back over the last 30 days and answer these questions thinking about how much difficulty you had doing the following activities.

INTERVIEWER: For each question, please circle only one response.

	In the last 30 days, how much difficulty did you have	None	Mild	Moderate	Severe	Extreme/ cannot do	N/A
Q1025	in standing for long periods?	1	2	3	4	5	9
Q1026	in taking care of your household responsibilities?	1	2	3	4	5	9
Q1027	in joining in community activities [for example, festivities, religious or other activities] in the same way as anyone else can?	1	2	3	4	5	9
Q1028	concentrating on doing something for 10 minutes?	1	2	3	4	5	9
Q1029	in walking a long distance such as a kilometer?	1	2	3	4	5	9
Q1030	in washing (bathing) your whole body?	1	2	3	4	5	9
Q1031	in getting dressed?	1	2	3	4	5	9
Q1032	in your day to day work?	1	2	3	4	5	9
Q1033	In the last 30 days, how much have you been emotionally affected by your health condition(s)?	1	2	3	4	5	9
Q1034	Overall, how much did these difficulties interfere with your life?	1	2	3	4	5	9

	Besides any vision (eyeglasses, contact lenses)		
Q1035	or hearing aids, do you use any other assistive devices (such as a cane, walker, or other) for any difficulties you experience?	1 2	YES No

VIGNETTES FOR HEALTH STATE DESCRIPTIONS

This next section will require additional concentration. I will read to you some stories about people with varying levels of difficulties in different areas of health. I want you to think about these people's experiences as if they were your own. Once I have finished reading each story, I will ask you to rate what happened in the story.

I would like to know how <u>you view</u> each story and rate <u>how much of a problem or difficulty</u> the person described has in that area of health in the <u>same way that you described your own health to me earlier</u>. While giving the rating, think of the person in the story as someone who is of your age and background.

Interviewer: 'vigorous activities' require hard physical effort and cause large increases in breathing or heart rate?

Set A | **Affect and Mobility**

[Yusuf] is able to walk distances of up to 200 metres without any problems but feels tired after walking 1 kilometre or climbing up more than one flight of stairs. He has no problems with day-to-day physical activities, such as carrying food from the market.

	Overall in the last 30 days, how much difficulty did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1101	[Yusuf] have with moving around?	1	2	3	4	5
Q1102	[Yusuf] have in vigorous activities	1	2	3	4	5

[Lucas] feels nervous and anxious. He worries and thinks negatively about the future, but feels better in the company of people or when doing something that really interests him. When he is alone he tends to feel useless and empty.

	Overall in the last 30 days, how much of a problem did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1103	[Lucas] have with <u>feeling sad, low, or</u> <u>depressed</u> ?	1	2	3	4	5
Q1104	[Lucas] have with worry or anxiety?	1	2	3	4	5

[Gabriel] has a lot of swelling in his legs due to his health condition. He has to make an effort to walk around his home as his legs feel heavy.

	Overall in the last 30 days, how much difficulty did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1105	[Gabriel] have with moving around?	1	2	3	4	5
Q1106	[Gabriel] have in vigorous activities?	1	2	3	4	5

[Jane] enjoys her work and social activities and is generally satisfied with her life. She gets depressed every 3 weeks for a day or two and loses interest in what she usually enjoys but is able to carry on with her day to day activities.

	Overall in the last 30 days, how much of a problem did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1107	[Jane] have with <u>feeling sad, low, or</u> <u>depressed</u> ?	1	2	3	4	5
Q1108	[Jane] have with worry or anxiety?	1	2	3	4	5

[Margaret] does not exercise. She cannot climb stairs or do other physical activities because she is obese. She is able to carry the groceries and do some light household work.

	Overall in the last 30 days, how much of a problem did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1109	[Margaret] have with moving around?	1	2	3	4	5
Q1110	[Margaret] have in vigorous activities?	1	2	3	4	5
	_					

	eels depressed most of the time. She weeps from the same that seems and that seems are the same as the same that seems are the same that seems are				ut the futu	re. She
	Overall in the last 30 days, how much of a problem did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1111	[Susan] have with <u>feeling sad, low, or</u> depressed?	1	2	3	4	5
Q1112	[Susan] have with worry or anxiety?	1	2	3	4	5
[Mary] ha a week.	l as no problems with walking, running or using h	er hands,	arms and	l legs. She jo	gs 4 kilom	etres twice
	Overall in the last 30 days, how much difficulty did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1113	[Mary] have with moving around?	1	2	3	4	5
Q1114	[Mary] have in <u>vigorous activities</u> ?	1	2	3	4	5
[Abdul] is	 s paralyzed from the neck down. He is unable to	move his	arms an	d leas or to s	hift body r	osition. He
	ed to bed.			3	, ,	
	Overall in the last 30 days, how much difficulty did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1115	[Abdul] have with moving around?	1	2	3	4	5
Q1116	[Abdul] have in vigorous activities?	1	2	3	4	5
	 loves life and is happy all the time. He never v they come.	vorries or	gets upse	et about anyth	ning and d	eals with
	Overall in the last 30 days, how much of a problem did	None	Mild	Moderate	Severe	Extreme/ Cannot do
Q1117	[Samson] have with <u>feeling sad, low, or</u> <u>depressed</u> ?	1	2	3	4	5
Q1118	[Samson] have with worry or anxiety?	1	2	3	4	5
the past	tica] has already had five admissions into the higher and has harmed herself on three other occeeday, and sees no hope of things ever getting Overall in the last 30 days, how much of a	casions. S	he is very	distressed e	very day f	or the most life again. Extreme/
Q1119	problem did[Scholastica] have with feeling sad, low,	1	2	3	4	Cannot do
	or depressed?	ا -				
Q1120	[Scholastica] have with worry or anxiety?	1	2	3	4	5

Time End					
Time End					
	Time	End			

Section 2000: Subjective Wellbeing and Quality of Life

	Time Begin Now, we'd like to ask for your thoughts about your life and life situation.							
Q2001	Do you have enough energy for everyday life?	1 Completely 2 Mostly 3 Moderately 4 A little 5 None at all						
Q2002	Do you have enough money to meet your needs?	1 Completely 2 Mostly 3 Moderately 4 A little 5 None at all						

Please tell us how satisfied you are with the following issues.

	and the satisfied you a	VERY SATISFIED	SATISFIED	NEITHER SATISFIED NOR DISSATISFIED	DISSATISFIED	VERY DISSATISFIED
Q2003	How satisfied are you with your health?	1	2	3	4	5
Q2004	How satisfied are you with yourself?	1	2	3	4	5
Q2005	How satisfied are you with your ability to perform your daily living activities?	1	2	3	4	5
Q2006	How satisfied are you with your personal relationships?	1	2	3	4	5
Q2007	How satisfied are you with the conditions of your living place?	1	2	3	4	5
Q2008	Taking all things together, how satisfied are you with your life as a whole these days?	1	2	3	4	5
Q2009	How would you rate your overall quality of life? Read responses		1 Very Good 2 Good 3 Moderate 4 Bad 5 Very Bad 8 Don't Know			
Q2010	Taking all things together, how would you say you are these days? Read responses		 Very happy Happy Neither happy nor unhappy Unhappy Very unhappy Don't Know 			

Time	End			