
( ICPSR 6438)

QUESTIONNAIRE

Principal Investigator

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University of Michigan, Survey Research Center

First ICPSR Version
January 1996

Inter-university Consortium for Political and Social Research
P.O. Box 1248
Ann Arbor, Michigan 48106
<table>
<thead>
<tr>
<th>1. INTERVIEWER'S LABEL</th>
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<tbody>
<tr>
<td>SURVEY RESEARCH CENTER</td>
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<tr>
<td>INSTITUTE FOR SOCIAL RESEARCH</td>
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<td>THE UNIVERSITY OF MICHIGAN</td>
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<td>ANN ARBOR, MICHIGAN 48106</td>
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</tbody>
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| 2. Your **Iw** Number: ____________________ |
| 3. Date of **Iw**: ____________________ |
| 4. Length of Interview: ___________ Minutes |
| 5. Length of Edit: ___________ Minutes |

**THIS STATEMENT MUST BE READ TO ALL RESPONDENTS:**

This interview is completely voluntary and confidential. If we should come to any question you do not want to answer, let me know and we'll go on to the next question. Your answers will be kept completely confidential.

**REVIEWED BY:**

- [ ] SUPERVISOR ___________ (DATE )
- [ ] FIELD OFFICE ___________ (DATE )
Ala. Do you have any natural, adopted or stepchildren who are not living here with you at the present time?

1. YES 5. NO, NO CHILDREN ELSEWHERE --> GO TO Alc

Alb. Could you give me the sex and age of each of your children living elsewhere?

CHILDREN LIVING ELSEWHERE

<table>
<thead>
<tr>
<th>CHILD #</th>
<th>SEX</th>
<th>AGE</th>
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<tbody>
<tr>
<td>1</td>
<td>1. MALE</td>
<td>2. FEMALE</td>
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<td>2</td>
<td>1. MALE</td>
<td>2. FEMALE</td>
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<td>1. MALE</td>
<td>2. FEMALE</td>
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<td>1. MALE</td>
<td>2. FEMALE</td>
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<td>2. FEMALE</td>
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<td>8</td>
<td>1. MALE</td>
<td>2. FEMALE</td>
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Alc. How many grandchildren do you have, if any?

NONE

GRANDCHILDREN NUMBER
Before we start the interview, I need to relist the people who live here—adults 18 or older first, then people under 18. I don’t need names, just the age, sex and relationship to you for each person.

Let’s start with you. How old are you?

Now, I need the age, sex and relationship to you of the other people 18 or older who live here.

### RESIDENTS 18 OR OLDER

<table>
<thead>
<tr>
<th>(a) RELATIONSHIP TO RESPONDENT</th>
<th>(b) SEX</th>
<th>(c) AGE</th>
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<tbody>
<tr>
<td>1. RESPONDENT</td>
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Next, I need the age, sex and relationship to you of everyone age 17 or younger who lives here.

**NO CHILDREN UNDER 18 IN HOUSEHOLD**

### RESIDENTS UNDER 18 YEARS OF AGE

<table>
<thead>
<tr>
<th>(a) RELATIONSHIP TO RESPONDENT</th>
<th>(b) SEX</th>
<th>(c) AGE</th>
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<td>11.</td>
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<td>12.</td>
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</table>
Now I have a few questions on how you spend your time.

A2. *(RB, P. 1)* In a **typical** week, about how many times do you talk on the telephone with friends, neighbors or relatives? Would you say more than once a day, once a day, 2 or 3 times a week, about once a week, less than once a week, or never?

| 1. MORE THAN ONCE A DAY | 2. ONCE A DAY | 3. 2 OR 3 TIMES A WEEK | 4. ABOUT ONCE A WEEK | 5. LESS THAN ONCE A WEEK | 6. NEVER OR NO PHONE |

A3. *(RB, P. 2)* **How often** do you get together with friends, neighbors or relatives and do things like go out together or visit in each other's homes? Would you say more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month, or never?

| 1. MORE THAN ONCE A WEEK | 2. ONCE A WEEK | 3. 2 OR 3 TIMES A MONTH | 4. ABOUT ONCE A MONTH | 5. LESS THAN ONCE A MONTH | 6. NEVER |

A4. *(RB, STILL ON P. 2)* How often do you attend meetings or programs of groups, clubs or organizations that you belong to? (Would you say more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month, or never?)

| 1. MORE THAN ONCE A WEEK | 2. ONCE A WEEK | 3. 2 OR 3 TIMES A MONTH | 4. ABOUT ONCE A MONTH | 5. LESS THAN ONCE A MONTH | 6. NEVER/ DOES NOT BELONG |

A5. Please tell me how often you typically do each of the following things. **How Often** do you work in the garden or yard—would you say often, sometimes, rarely or never?

<table>
<thead>
<tr>
<th></th>
<th>OFTEN (1)</th>
<th>SOMETIMES (2)</th>
<th>RARELY (3)</th>
<th>NEVER (4)</th>
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</thead>
<tbody>
<tr>
<td>a. WORK IN THE GARDEN OR YARD</td>
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<td>b. How often do you engage in active sports or exercise—would you say often, sometimes, rarely or never?</td>
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<tr>
<td>c. And take walks—would you say often, sometimes, rarely or never?</td>
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SECTION B: REFLECTIONS ON ONE’S LIFE

B1. (RB, P. 3) Now please think about your life as a whole. How satisfied you are with it—are you completely satisfied, very satisfied, somewhat satisfied, not very satisfied or not at all satisfied?

1. COMPLETELY SATISFIED  2. VERY SATISFIED  3. SOMEWHAT SATISFIED  4. NOT VERY SATISFIED  5. NOT AT ALL SATISFIED

B2. At this stage in your life, what are your most important sources of satisfaction or pleasure? (ACCEPT TWO MENTIONS WITHOUT FURTHER PROBING.)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

B3. At this stage in your life, what are your most important problems, worries or concerns? (ACCEPT TWO MENTIONS WITHOUT FURTHER PROBING.)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

B4. Do you think of yourself as young, middle-aged or old?

1. YOUNG  2. MIDDLE-AGED  3. OLD
**I.** Please look at page 1 of the yellow booklet. After each statement, put an “X” in the box that best describes how strongly you agree or disagree with the statement. The best answer is usually the one that comes to your mind first, so don’t spend too much time on any one question. (If you prefer, I can read the statements to you.)

**INTERVIEWER CHECKPOINT**

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1. R READS SAB ALONE, SAY “Please let me know when you have finished.”

2. B5a-g ARE READ ALOUD TO R (R UNABLE TO READ, TOO SLOW IN USING SAB). USE RB, P. 4 FOR ANSWER CATEGORIES

<table>
<thead>
<tr>
<th>Statement</th>
<th>STRONGLY AGREE (1)</th>
<th>AGREE SOMEWHAT (2)</th>
<th>DISAGREE SOMEWHAT (3)</th>
<th>STRONGLY DISAGREE (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>B5a. My life could be happier than it is now. (Do you strongly agree,' agree somewhat, disagree somewhat or strongly disagree with this statement?)</td>
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<td>B5b. These are the best years of my life.</td>
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<td>B5c. As I look back on my life I am fairly well satisfied.</td>
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<td>B5d. I would not change my past life even if I could.</td>
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<td>B5e. Life is not worth living if one cannot contribute to the well-being of other people.</td>
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<td>B5f. A person should continue to work as long as he or she is able.</td>
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<tr>
<td>B5g. Older people should step down from their responsibilities and let younger people take their place.</td>
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</table>

**WHEN R FINISHES**

86. Now I have some questions about where you live. How many rooms do you have here, not counting hallways and bathrooms? (COUNT ROOMS IN BASEMENT OR ATTIC ONLY IF THEY ARE FINISHED AND FURNISHED.)

________________________ NUMBER OF ROOMS
B7. (RB, p. 5) How satisfied are you with your home? Are you completely satisfied very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied?

1. COMPLETELY SATISFIED  2. VERY SATISFIED  3. SOMewhat SATISFIED  4. NOT VERY SATISFIED  5. NOT AT ALL SATISFIED

B8. (RB, still on p. 5) And what about your neighborhood--how satisfied are you with your neighborhood? (Are you completely satisfied, very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied?)

1. COMPLETELY SATISFIED  2. VERY SATISFIED  3. SOMewhat SATISFIED  4. NOT VERY SATISFIED  5. NOT AT ALL SATISFIED

B9. How true is the following statement about your neighborhood: This is a neighborhood where I feel safe from personal attacks. Is this very true, mostly true, somewhat true, or not true at all?

1. VERY TRUE  2. MOSTLY TRUE  3. SOMEWHAT TRUE  4. NOT TRUE AT ALL

B10. INTERVIEWER CHECKPOINT

SEE AO

1. R IS AGE 50 OR OVER

2. ALL OTHERS-->NEXT PAGE, B12

B11. How likely is it that someday you might move to a retirement community or a building for older adults? Is this very likely, somewhat likely, not too likely, or not at all likely?

1. VERY LIKELY  2. SOMEWHAT LIKELY  3. NOT TOO LIKELY  4. NOT AT ALL LIKELY  6. R NOW LIVES IN RETIREMENT HOUSING
B12. (SAB, P. 2) Please look at page 2 of the yellow booklet. After each statement, please put an “X” in the answer category that describes how strongly you agree or disagree with the statement as it applies to you. (Again, the best answer is usually the one that comes to your mind first, so do not spend too much time on any one statement. If you prefer, I can read the statements to you.)

INTERVIEWER CHECKPOINT

1. R READS SAB ALONE, SAY "Please let me know when you have finished."
2. B12a-h ARE READ ALOUD TO R (R UNABLE TO READ, TOO SLOW IN USING SAB). USE RB, P. 6 FOR ANSWER CATEGORIES

<table>
<thead>
<tr>
<th>Statement</th>
<th>STRONGLY AGREE (1)</th>
<th>AGREE SOMEWHAT (2)</th>
<th>DISAGREE SOMEWHAT (3)</th>
<th>STRONGLY DISAGREE (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>B12a. I take a positive attitude toward myself. (Do You strongly agree, agree somewhat, disagree somewhat or strongly disagree with this statement?)</td>
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<td>B12b. At times I think I am no good at all.</td>
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<td>B12c. All in all, I am inclined to feel that I am a failure.</td>
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<tr>
<td>B12d. I can do just about anything I really set my mind to do.</td>
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<td>B12e. Sometimes I feel that I am being pushed around in life.</td>
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<td>B12f. There is really no way I can solve the problems I have.</td>
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<td>B12g. I worry that something bad will happen to me.</td>
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<tr>
<td>B12h. I worry that something bad will happen to one of my loved ones.</td>
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</tbody>
</table>

WHEN R FINISHES, NEXT PAGE, SECTION C
SECTION C: SOCIAL SUPPORT

C1. Now I have some questions about your family situation. Are you currently married, separated, divorced, widowed or have you never been married?

1. MARRIED  2. SEPARATED  3. DIVORCED; MARRIAGE ANNULLED  4. WIDOWED  5. NEVER MARRIED

GO TO C2

C1a. Are you currently living with another adult as a partner in an intimate relationship?

1. YES  5. NO --> GO TO C6

C1b. For how many months or years have you been living with your partner?

____ MONTHS OR ____ YEARS

C2. (RB, P. 7) How much does your (husband/wife/partner) make you feel loved and cared for? Would you say a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C3. (RB, STILL ON P. 7) How much do you feel (he/she) makes too many demands on you? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C4. (RB, STILL ON P. 7) How much is (he/she) willing to listen when you need to talk about your worries or problems (a great deal, quite a bit, some, a little, or not at all)?

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C5. (RB, STILL ON P. 7) How much is (he/she) critical of you or what you do? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C6. INTERVIEWER CHECKPOINT

SEE C1

☐ 1. R HAS NEVER MARRIED --> TURN TO P. 11, C13

☐ 2. ALL OTHERS --> NEXT PAGE, C7
C7. How many times have you been legally married?

ONCE

OTHER: ______ MARRIAGES

C7a. In what year were you married for the first time?

YEAR

NEXT PAGE, C11

C8. In what year were you married?

YEAR

C9. INTERVIEWER CHECKPOINT (R MARRIED ONLY ONCE)

SEE C1

☐ 1. CURRENTLY MARRIED OR SEPARATED—TURN TO P. 11, C13

☐ 2. CURRENTLY WIDOWED

☐ 3. CURRENTLY DIVORCED; MARRIAGE ANNULLED

C10a. In what month and year were you widowed?

/  

MONTH YEAR WIDOWHOOD

C10b. In general, how well do you feel you have dealt up to now with your spouse’s death and any changes or problems that may have resulted from it? Would you say very well, quite well, somewhat well or not too well?

1. VERY WELL 2. QUITE WELL

3. SOMewhat WELL 4. NOT TOO WELL

TURN TO P.11, C13

C10c. In what year was your divorce or annulment?


OTHER: ___ YR

TURN TO P.11, C13

C10e. In general, how well do you feel you have dealt up to now with the (divorce/annulment) and any changes or problems that may have resulted from it? Would you say very well, quite well, somewhat well, or not too well?

1. VERY WELL 2. QUITE WELL

3. SOMewhat WELL 4. NOT TOO WELL

TURN TO P.11, C13
R MARRIED 2 OR MORE TIMES

C11. How many times have you been widowed, if any?

WIDOWED ONCE

OTHER: # WIDOWHOODS

NEVER --> GO TO C12

C11a. In what month and year were you widowed?

MONTH

YEAR

C11b. And how many years had you been married to your (husband/wife) before (he/she) died?

YEARS

C11c. In general, how well do you feel you have dealt up to now with your spouse's death and any changes or problems—which may have resulted from it? Would you say very well, quite well, somewhat well or not too well?

1. VERY WELL 2. QUITE WELL 3. SOMEWHAT WELL 4. NOT TOO WELL

C12. Altogether, how many times have you been divorced or had a marriage annulled?

ONE DIVORCE/ANNULMENT

OTHER: # DIVORCES/ANNULMENTS

NEVER --> NEXT PAGE, C13

C12a. In what year was your (most recent) divorce or annulment?

1986 1985

1984 1983

OTHER: YEAR --> NEXT PAGE, C13

C12b. And what month was that?

MONTH

C12c. How many years had you been married to your (wife/husband) before you (divorced/had your marriage annulled)?

YEARS

C12d. How well do you feel you have dealt up to now with the (divorce/annulment) and any changes or problems that may have resulted from it? Would you say very well, quite well, somewhat well or not too well?

1. VERY WELL 2. QUITE WELL 3. SOMEWHAT WELL 4. NOT TOO WELL
C13. INTERVIEWER CHECKPOINT

SEE AO, A1 AND A1b

☐ 1. R HAS NO CHILDREN (AT HOME OR ELSEWHERE)--TURN TO P. 14, C23

☐ 2. R HAS CHILDREN ALL UNDER 16--TURN TO P. 13, C20

☐ 3. R HAS ONLY ONE CHILD AGE 16 OR OLDER

☐ 4. R HAS TWO OR MORE CHILDREN 16 OR OLDER

In the next few questions, we want you to think about your (son/daughter) who is 16 years old or older.

In the next few questions, we want you to think about all of your children who are 16 years old or older.

C14. (RB, STILL ON P. 7) How much (does/do) your (son/daughter/children) make you feel loved and cared for? Would you say a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

C15. (RB, STILL ON P. 7) How much do you feel (he/she/they) (makes/make) too many demands on you? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

C16. (RB, STILL ON P. 7) How much (is/are) (he/she/they) willing to listen when you need to talk about your worries or problems? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

C17. (RB, STILL ON P. 7) How much (is/are) (he/she/they) critical of you or what you do? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL
C19a. (RB, P. 8) Think of your (son/daughter) who does not live with you and who is 16 years old or older. In the past 12 months, how often did you have contact with (him/her) either in person, by phone or by mail? Would you say more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month or never?

1. MORE THAN ONCE A WEEK  2. ONCE A WEEK  3. 2 OR 3 TIMES A MONTH  4. ABOUT ONCE A MONTH  5. LESS THAN ONCE A MONTH  6. NEVER

C19b. (RB, P. 8) Think of your children who do not live with you and who are 16 years old or older. In the past 12 months, how often did you have contact with at least one of them either in person, by phone or by mail? Would you say more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month or never?
C20. (RB, P. 9) At this point in your life, how satisfied are you with being a parent—do you completely satisfied, very satisfied, somewhat satisfied, not very satisfied, or not satisfied at all?

| 1. COMPLETELY SATISFIED | 2. VERY SATISFIED | 3. SOMewhat SATISFIED | 4. NOT VERY SATISFIED | 5. NOT AT ALL SATISFIED |

C21. (RB, P. 10) How often do you feel bothered or upset as a parent—almost always, often, sometimes rarely, or never?

| 1. ALMOST ALWAYS | 2. OFTEN | 3. SOMETIMES | 4. RARELY | 5. NEVER |

C22. (RB, P. 11) How happy are you with the way your (son/daughter/children) (has/have) turned out to this point—very happy, quite happy, somewhat happy, not too happy or not at all happy?

| 1. VERY HAPPY | 2. QUITE HAPPY | 3. SOMewhat HAPPY | 4. NOT TOO HAPPY | 5. NOT AT ALL HAPPY |
C23. Have you ever had a child who died?

1. YES  5. NO ----> NEXT PAGE, C24

C23a. How many?

1

OTHER: NUMBER

C23b. In what year did this happen?

1986  1985  OTHER: YEAR

C23c. In what year did this happen most recently?

C23d. In what month was that?

MONTH

C23e. Was that a son or a daughter who died?

1. SON  2. DAUGHTER

c23f. And was (his/her) death totally unexpected or did you expect it for some time?

1. UNEXPECTED  2. EXPECTED

c23g. In general, how well do you feel you have dealt up to now with (his/her) death and any changes or problems which may have resulted from it? Would you say very well, quite well, somewhat well or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL
C24. Is your natural mother still living?

1. YES

C24a. How old is she?

YEARS

5. NO

C24b. How old was your mother when she died?

YEARS

5. NO, NO LIVING MOTHER FIGURE

TURN TO P. 17, C35

C26. Is there some other person still living who is like a mother to you?

5. NO

1. YES

C27. What is this person's relationship to you?

1. ADOPTIVE MOTHER
2. STEPMOTHER
3. GRANDMOTHER
7. OTHER: _____ SPECIFY

C28. Is your mother (relationship at C27) mentally and physically capable of giving advice or help if you need it?

1. YES
5. NO

TURN TO P. 17, C35

C29. Is your (relationship at C27) mentally and physically capable of giving advice or help if you need it?

1. YES
5. NO

TURN TO P. 17, C35

C30. (RB, P.12) During the past 12 months, how often did you have contact with your (mother/relationship at C27) either in person, by phone or by mail (more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month or never)?

1. MORE THAN ONCE A WEEK
2. ONCE A WEEK
3. 2 OR 3 TIMES A MONTH
4. ABOUT ONCE A MONTH
5. LESS THAN ONCE A MONTH
6. NEVER
C31. (RB, P. 13) How much does your (mother/RELATIONSHIP) make you feel loved and cared for? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

C32. (RB, STILL ON P. 13) How much do you feel she makes too many demands on you? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

C33. (RB, STILL ON P. 13) How much is she willing to listen when you need to talk about your worries or problems? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

C34. (RB, STILL ON P. 13) How much is she critical of you or what you do? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL
C35. Is your natural father still living?

1. YES

C35a. How old is he?

YEARS

8. DK

5. NO

C35b. How old was your father when he died?

YEARS

36. Is there some other person still living who is more like a father to you than your natural father?

5. NO

1. YES

C37. Is there some other person still living who is like a father to you?

1. YES

5. NO, NO LIVING FATHER FIGURE

TURN TO P. 19, C46

C38. What is this person's relationship to you?

1. ADOPTIVE FATHER

2. STEPFATHER

3. GRANDFATHER

7. OTHER: SPECIFY

C39. Is your father mentally and physically capable of giving advice or help if you need it?

1. YES

5. NO

TURN TO P. 19, C46

C40. Is your (RELATIONSHIP AT C38) mentally and physically capable of giving advice or help if you need it?

1. YES

5. NO --> TURN TO P. 19, C46

C41. (RB, P.14) During the past 12 months, how often did you have contact with your (father/RELATIONSHIP AT C38) either in person, by phone or by mail (more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month, or never)?

1. MORE THAN ONCE A WEEK

2. ONCE A WEEK

3. 2 OR 3 TIMES A MONTH

4. ABOUT ONCE A MONTH

5. LESS THAN ONCE A MONTH

6. NEVER
C42. (RB, P. 15) How much does your (father/RELATIONSHIP AT C38) make you feel loved and cared for? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C43. (RB, STILL ON P. 15) How much do you feel he makes too many demands on you? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C44. (RB, STILL ON P. 15) How much is he willing to listen when you need to talk about your worries or problems? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C45. (RB, STILL ON P. 15) How much is he critical of you or what you do? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL
C46. Has a parent or a step-parent of yours died in the last three years?

1. YES  5. NO --> GO TO C47

C46a. Who died in the last three years? (CHECK ALL THAT APPLY)

A. MOTHER  B. STEPMOTHER  C. FATHER  D. STEPFATHER

C46b. (IF 1 ONLY) What year did (she/he) die?

(IF 2 OR MORE) Thinking of the one who was closest to you, in what year did this parent die?


C46c. And what month was it?

MONTH

C46d. How well do you feel you have dealt up to now with this death and any problems or changes that may have resulted from it? Would you say very well, quite well, somewhat well or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMEWHAT WELL  4. NOT TOO WELL

C47. (RB, STILL ON P. 15) The next few questions are about friends and relatives other than spouse, children or parents. On the whole, how much do your friends and other relatives make you feel loved and cared for? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C48. (RB, STILL ON P. 15) Again, on the average, how much do you feel your friends and other relatives make too many demands on you? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C49. (RB, STILL ON P. 15) How much are these friends and relatives willing to listen when you need to talk about your worries or problems? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C50. (RB, STILL ON P. 15) How much are they critical of you or what you do? (Would you say a great deal, quite a bit, some, a little, or not at all?)

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

C51. About how many friends or other relatives do you have whom you could call on for advice or help if you needed it?

NUMBER
(Other than deaths you already mentioned) Has one of your close friends or a close relative died in the last three years--someone you felt you could call on for advice or help if you needed it?

1. YES  5. NO -- NEXT PAGE, C53

C52a. I would like to ask a couple of questions about the person who died with whom you had the closest relationship.

What was this person's relationship to you?

____________________________ RELATIONSHIP TO

C52b. In what year did (RELATIONSHIP) die?

1985  1986  OTHER YEAR: ______-- NEXT PAGE, C53

C52c. In what month was that?

____________________________ MONTH

C52d. How well do you feel you have dealt up to now with this death and any changes or problems which may have resulted from it--very well, quite well, somewhat well, or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL
C53. Is there anyone in your life with whom you can really share your very private feelings and concerns?

1. YES
5. NO  --> GO To C55

C54. How many such persons are there?

1 2 3 OTHER: NUMBER

<table>
<thead>
<tr>
<th></th>
<th>PERSON 1</th>
<th>PERSON 2</th>
<th>PERSON 3</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>C54a.</strong> Is the person with whom you have the (next) closest relationship male or female?</td>
<td>1. MALE</td>
<td>1. MALE</td>
<td>1. MALE</td>
</tr>
<tr>
<td></td>
<td>2. FEMALE</td>
<td>2. FEMALE</td>
<td>2. FEMALE</td>
</tr>
<tr>
<td><strong>C54b.</strong> What is that person's relationship to you?</td>
<td>RELATION TO R</td>
<td>RELATION TO R</td>
<td>RELATION TO R</td>
</tr>
<tr>
<td></td>
<td>ONLY 1 CONFIDANT</td>
<td>ONLY 2 CONFIDANTS</td>
<td>GO TO C55</td>
</tr>
<tr>
<td></td>
<td>ALL OTHERS</td>
<td>ALL OTHERS</td>
<td>GO TO PERSON #3</td>
</tr>
<tr>
<td></td>
<td>Go To C55</td>
<td>Go To C55</td>
<td></td>
</tr>
</tbody>
</table>

C54c. INTERVIEWER CHECKPOINT—SEE C54

Go To C55

C55. Finally, think of all the family or friends you feel close to, whom you could call on for advice or help if you needed it. How many of these people are close to each other in the same way? Would you say all of them, most of them, about half of them, less than half of them, or none of them?

1. ALL  2. MOST  3. ABOUT HALF  4. LESS THAN HALF  5. NONE
SECTION D: MARRIAGE AND RELATIONSHIPS

D1. INTERVIEWER CHECKPOINT

SEE C1 AND C1b (P. 8)

1. R IS CURRENTLY MARRIED

2. R HAS BEEN LIVING WITH PARTNER FOR 6 MONTHS OR LONGER

3. ALL OTHERS--->TURN TO P. 26, SECTION E

Now I would like to talk with You about your (marriage/relationship with Your partner.)

D2. (RB, P. 16) Taking all things together, how satisfied are you with your (marriage/relationship) (--completely satisfied, very satisfied, somewhat satisfied, not very satisfied, or not at all satisfied)?

1. COMPLETELY SATISFIED
2. VERY SATISFIED
3. SOMEWHAT SATISFIED
4. NOT VERY SATISFIED
5. NOT AT ALL SATISFIED

D3. Some couples think of themselves as two separate people who make a life together. Others think of themselves as a couple, it being very hard to describe one person without the other. Which best describes your (marriage/relationship)-- "two separate people" or a "couple"?

1. TWO SEPARATE PEOPLE
2. COUPLE

D4. (RB, P.17) How often do you participate in leisure or social activities by yourself, or with people other than your (spouse/partner)? (Would you say more than once a week, about once a week, 2 or 3 times a month, about once a month, or less than once a month?)

1. MORE THAN ONCE A WEEK
2. ABOUT ONCE A WEEK
3. 2 OR 3 TIMES A MONTH
4. ABOUT ONCE A MONTH
5. LESS THAN ONCE A MONTH
D5. **(SAB, P. 3)** Please **turn** to page 3 of the yellow booklet. For each statement, please mark an "X" in the answer box which best describes how strongly you agree or disagree with each statement as it applies to your (marriage/relationship). (If you prefer, I can read the statements to you.)

**INTERVIEWER CHECKPOINT**

- **1. R READS SAB ALONE, SAY "Please let me know when you have finished."**
- **2. D5a-h ARE READ ALOUD TO R (R UNABLE TO READ, TOO SLOW IN USING SAB). USE RB, P. 18 FOR ANSWER CATEGORIES**

<table>
<thead>
<tr>
<th>Statement</th>
<th>STRONGLY AGREE (1)</th>
<th>AGREE SOMEWHAT (2)</th>
<th>DISAGREE SOMEWHAT (3)</th>
<th>STRONGLY DISAGREE (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>D5a. I would feel completely lost if I didn’t have my (spouse/partner). (Do you strongly agree, agree somewhat, disagree somewhat or strongly disagree with this statement?)</td>
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<tr>
<td>D5b. There is a great deal of love and affection expressed in our relationship.</td>
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<tr>
<td>D5c. My (spouse/partner) doesn’t treat me as well as I deserve to be treated.</td>
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<tr>
<td>D5d. I sometimes think of divorcing or separating from my (spouse/partner).</td>
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<tr>
<td>D5e. If my (spouse/partner) died it would be the worst thing that could happen to me.</td>
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<tr>
<td>D5f. There have been things that have happened in our (marriage/relationship) that I can never forgive.</td>
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<tr>
<td>D5g. No one could ever take the place of my (spouse/partner).</td>
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<tr>
<td>D5h. If my (spouse/partner) died, I feel I would deal very well with any resulting problems or changes.</td>
<td></td>
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</tbody>
</table>

**WHEN R FINISHES, GO TO NEXT PAGE, D6**
D6. (RB, P. 19) When you and your (husband/wife/partner) disagree about something, how often do you work things out so that both of you are satisfied—almost always, often, sometimes, rarely or never?

1. ALMOST ALWAYS  2. OFTEN   3. SOMETIMES  4. RARELY  5. NEVER

D7. (RB, P. 20) How often would you say the two of you typically have unpleasant disagreements or conflicts? Would you say daily or almost daily, 2 or 3 times a week, about once a week, 2 or 3 times a month, about once a month, less than once a month, or never?

1. DAILY OR ALMOST DAILY  2. 2 OR 3 TIMES A WEEK  3. ABOUT ONCE A WEEK  4. 2 OR 3 TIMES A MONTH  5. ABOUT ONCE A MONTH  6. LESS THAN ONCE A MONTH  7. NEVER

D8. (SAB, P. 4) Please turn to page 4 of the yellow booklet and choose the answer category that best describes how often your (spouse/partner) behaves in the ways described there.

INTERVIEWER CHECKPOINT

1. R READS SAB ALONE, SAY “Please let me know when you have finished.”

2. D8a-d ARE READ ALOUD TO R (R UNABLE TO READ, TOO SLOW IN USING SAB). USE RB, P. 21 FOR ANSWER CATEGORIES

<table>
<thead>
<tr>
<th>D8a. My (spouse/partner) drinks too much. (Does this happen often, sometimes or never?)</th>
<th>OFTEN (1)</th>
<th>SOMETIMES (2)</th>
<th>NEVER (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>D8b. (He/She) pushes, slaps, or hits me.</td>
<td></td>
<td></td>
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<tr>
<td>D8c. (He/She) wastes money the family needs for other things.</td>
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<tr>
<td>D8d. (He/She) has extramarital affairs.</td>
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</tbody>
</table>

WHEN R FINISHES

D9. (RB, P. 22) Taking everything into consideration, how often do you feel bothered or upset by your (marriage/relationship)—almost always, often, sometimes, rarely, or never?

1. ALMOST ALWAYS  2. OFTEN   3. SOMETIMES  4. RARELY  5. NEVER
D10. I would like to ask you about your (husband's/wife's/partner's) health. HOW would you rate your (spouse's/partner's) health at the present time—would you say it is excellent, very good, good, fair or poor?

1. EXCELLENT  2. VERY GOOD  3. GOOD  4. FAIR  5. POOR

D11. INTERVIEWER CHECKPOINT

SEE C1 (P. 8)

☐ 1. R HAS NEVER MARRIED-->TURN TO P. 31, SECTION F

☐ 2. ALL OTHERS-->NEXT PAGE, SECTION E
SECTION E: WIDOWHOOD

E1. INTERVIEWER CHECKPOINT

SEE C10a (P. 9) AND C11a (P. 10)

1. R HAS EVER BEEN WIDOWED

2. ALL OTHERS--TURN TO P. 31, SECTION F

El. IWER: RECORD DATE OF (CURRENT/MOST RECENT) WIDOWHOOD / (FROM C10a/C11a)

E2. INTERVIEWER CHECKPOINT

1. R WIDOWED WITHIN THE LAST 3 MONTHS--TURN TO P. 31, SECTION F

2. ALL OTHERS--EVER WIDOWED

People differ in how they react to the death of their spouse, and how long these effects last. As part of this study, we are gathering, for the first time, important information about widowhood from people like you who have experienced the death of a spouse.

[IF R WIDOWED MORE THAN ONCE:] You told me you were last widowed in (READ DATE FROM Ela). When answering the following questions in this section, please think about your most recent experience of being widowed.

E3. How old was your (husband/wife) when (he/she) died?

_________ YEARS OLD

E4. Was (his/her) death totally unexpected or did you expect it for some time?

1. UNEXPECTED

2. EXPECTED IT
What was the official cause of (his/her) death? (E.G., HEART ATTACK, ACCIDENT, SUICIDE, CANCER, MURDER, WAR) (IF ACCIDENT, PROBE: What kind of accident?)

INTERVIEWER CHECKPOINT

1. CAUSE WAS "SUICIDE" OR "MURDER" --> GO TO E8

2. ALL OTHERS

Did (he/she) die within a few days after the (fatal accident/the beginning of the fatal illness), or was (he/she) terminally ill for a period of weeks, a period of months, or a year or more before (he/she) died?

1. A FEW DAYS  2. WEEKS  3. MONTHS  4. A YEAR OR MORE

How would you describe how much you have recovered from your (husband’s/wife’s) death—would you say you have recovered completely, almost completely, fairly much, somewhat or not much?

1. COMPLETELY  2. ALMOST COMPLETELY  3. FAIRLY MUCH  4. SOMEWHAT  5. NOT MUCH

How many months or years did it take you after your (husband’s/wife’s) death to recover from this loss?

MONTHS

YEARS

In what way would you say you are not recovered?

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________
E9. Even people who feel they have recovered entirely from their loss tell us that they sometimes have thoughts or memories of their (husband/wife) that keep coming back to them.

(RB, P. 23) During the past 3 months, how often have you had thoughts or memories of your late (husband/wife) come into your mind—would you say daily or almost daily, 2 to 3 times a week, about once a week, 2 or 3 times a month, about once a month, less than once a month, or never)?

1. DAILY OR ALMOST DAILY
2. 2 - 3 TIMES A WEEK
3. ABOUT ONCE A WEEK
4. 2 OR 3 TIMES A MONTH
5. ABOUT ONCE A MONTH
6. LESS THAN ONCE A MONTH
7. NEVER

E10. (RB, STILL ON P. 23) During the past 3 months, how often did you talk about your late (husband/wife) (would you say daily or almost daily, 2 to 3 times a week, about once a week, 2 or 3 times a month, about once a month, less than once a month, or never)?

1. DAILY OR ALMOST DAILY
2. 2 - 3 TIMES A WEEK
3. ABOUT ONCE A WEEK
4. 2 OR 3 TIMES A MONTH
5. ABOUT ONCE A MONTH
6. LESS THAN ONCE A MONTH
7. NEVER

En. INTERVIEWER CHECKPOINT

1. R SAID "NEVER" TO BOTH E9 AND E10—>NEXT PAGE, E14
2. ALL OTHERS

E12. During the past 3 months, how often did thinking (or talking) about you, late (husband/wife) make you feel happy? Would you say never, rarely, sometimes, often, or almost always?

1. NEVER
2. RARELY
3. SOMETIMES
4. OFTEN
5. ALMOST ALWAYS

E13. And, how often did thinking (or talking) about (him/her) make you feel sad or upset—never, rarely, sometimes, often, or almost always?

1. NEVER
2. RARELY
3. SOMETIMES
4. OFTEN
5. ALMOST ALWAYS
E14. (RB, p. 24) **Some people** have said that they find themselves **searching** to make sense or find some meaning in their loved one's death. Have you ever done this since your (husband's/wife's) death? Would you say no, never; yes, but rarely; sometimes; frequently; or all the time?

1. **NO, NEVER**
2. **YES, BUT RARELY**
3. **YES, SOMETIMES**
4. **YES, FREQUENTLY**
5. **YES, ALL THE TIME**

GO TO E15

E14a. (RB, STILL ON P. 24) Have you done this during the past 3 months (no, never; yes, but rarely; sometimes; frequently; or all the time)?

1. **NO, NEVER**
2. **YES, BUT RARELY**
3. **YES, SOMETIMES**
4. **YES, FREQUENTLY**
5. **YES, ALL THE TIME**

E15. (RB, P. 25) Have you **made** any sense or **found** any meaning in your (husband/wife)'s death? Would you say: no, not at all; yes, a little; yes, some; yes, quite a bit; or yes, a great deal?

1. **NO, NOT AT ALL**
2. **YES, A LITTLE**
3. **YES, SOME**
4. **YES, QUITE A BIT**
5. **YES, A GREAT DEAL**

E16. (RB, P. 26) Some widowed people report that at times, the sadness and loneliness that they experienced right after the death returns to them on particular occasions, such as the date of the spouse's death or (his/her) birthday.

Has this ever happened to you during the past year (no, never; yes, but rarely; sometimes; frequently; or all the time)?

1. **NO, NEVER**
2. **YES, BUT RARELY**
3. **YES, SOMETIMES**
4. **YES, FREQUENTLY**
5. **YES, ALL THE TIME**

NEXT PAGE, E17

E16a. When you experience these feelings, how long do they typically last--a few moments, a few hours, a day or so, a few days, or a week or longer?

1. **A FEW MOMENTS**
2. **A FEW HOURS**
3. **A DAY OR SO**
4. **A FEW DAYS**
4. **A WEEK OR LONGER**

E16b. When you experience these feelings, how intense are they--extremely, quite, somewhat, just a little, or not at all intense?

1. **EXTREMELY**
2. **QUITE**
3. **SOMETHAT**
4. **JUST A LITTLE**
5. **NOT AT ALL**
I am now going to read some statements that people who have been widowed have said about their experience. Please tell me how true you think each statement is as it applies to you now.

<table>
<thead>
<tr>
<th>Statement</th>
<th>VERY TRUE (1)</th>
<th>MOSTLY TRUE (2)</th>
<th>SOMEWHAT TRUE (3)</th>
<th>NOT TRUE AT ALL (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>E17a.</strong> As a result of having to manage without my (husband/wife), I have become more self-confident. (Is this very true, mostly true, somewhat true or not true at all as it applies to you now?)</td>
<td></td>
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<tr>
<td><strong>E17b.</strong> Something my (husband/wife) did contributed to (his/her) death.</td>
<td></td>
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<tr>
<td><strong>E17c.</strong> My (husband’s/wife’s) death was caused by someone else’s negligence.</td>
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<tr>
<td><strong>E17d.</strong> I don’t question my (husband’s/wife’s) death because it was meant to be.</td>
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<tr>
<td><strong>E17e.</strong> I feel my (husband’s/wife’s) death was senseless and unfair.</td>
<td></td>
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<tr>
<td><strong>E17f.</strong> I don’t worry about finding meaning in my (husband’s/wife’s) death because these things just happen.</td>
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<tr>
<td><strong>E17g.</strong> [IF NOT CURRENTLY MARRIED] My life will not be complete unless I remarry.</td>
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<tr>
<td><strong>E17h.</strong> My (husband/wife) is better off now than if (he/she) had lived longer.</td>
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<tr>
<td><strong>E17j.</strong> I am a stronger person as a result of dealing with the loss of my spouse.</td>
<td></td>
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</tbody>
</table>
SECTION F: CHILD CARE, PARENTING AND HOUSEHOLD WORK

F1. INTERVIEWER CHECKPOINT

SEE A1

☐ 1. CHILD(REN) UNDER 18 LIVE IN THE HOUSEHOLD

☐ 2. ALL OTHERS--->TURN TO P. 33, F7

The next questions are about the care of children.

F2. (R.B., P.28) About how many hours do you spend in an average week caring for the child(ren) who live(s) here? (Would you say less than 10 hours a week, 10 to 19, 20 to 39, or 40 hours or more per week?)

1. LESS THAN 10  2. 10 - 19  3. 20 - 39  4. 40 OR MORE  6. VOLUNTEERED: NEVER

TURN TO P. 33, F7

F3. How much do you enjoy caring for (this child/these children)--a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

F4. Are you yourself better off because of the care you give the children?)?

1. YES  5. NO

F4a. Would you say you are a great deal, somewhat, or only a little better off?

1. A GREAT DEAL  2. SOMEWHAT

3. ONLY A LITTLE

F4b. Are you worse off because of the childcare you do?

1. YES  5. NO --NEXT PAGE, F5

F4c. Would you say you are a great deal, somewhat, or only a little worse off?

1. A GREAT DEAL  2. SOMEWHAT

3. ONLY A LITTLE
F5. Are there other people who are better off because of the care you give the children?

1. YES  
5. NO --> GO To F6

F5a. Would you say they are a great deal better off, somewhat or only a little better off?

1. A GREAT DEAL  
2. SOMewhat  
3. ONLY A LITTLE

F6. Do other people also take care of the children?

1. YES  
5. NO
F7. Next I have some questions about work you do to maintain or improve your home, yard, or automobile.

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<table>
<thead>
<tr>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>F7a. In the last 12 months, did you yourself do any painting, redecorating or repairs on your home?</td>
<td>1. YES</td>
<td>5. NO</td>
<td></td>
</tr>
<tr>
<td>F7b. Did you yourself do any work in your yard or other areas outside your home? Please include things like mowing the lawn, weeding plants, or removing snow.</td>
<td>1. YES</td>
<td>5. NO</td>
<td></td>
</tr>
<tr>
<td>F7c. Did you yourself grow, freeze or can any of your own food during the last 12 months?</td>
<td>1. YES</td>
<td>5. NO</td>
<td></td>
</tr>
<tr>
<td>F7d. Did you yourself do any repairs on a car or truck that you own?</td>
<td>1. YES</td>
<td>5. NO</td>
<td></td>
</tr>
</tbody>
</table>

F8. INTERVIEWER CHECKPOINT

1. R DID SOME MAINTENANCE/IMPROVEMENT WORK (ONE OR MORE "YES" AT F7)

2. ALL OTHERS --> NEXT PAGE, F12

F9. (RB, P. 29) Altogether, how many hours did you spend doing these things during the last 12 months? (Would you say less than 20 hours, 20 to 39, 40 to 79, 80 to 159, or 160 hours or more?)

<p>| | | | | |</p>
<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. LESS THAN 20 HOURS</td>
<td>2. 20-39 HOURS</td>
<td>3. 40-79 HOURS</td>
<td>4. 80-159 HOURS</td>
<td>5. 160 HOURS OR MORE</td>
</tr>
</tbody>
</table>

F10. (RB, P. 30) About how much do you think you saved altogether by doing this kind of (house, yard, automotive) work last year? (Would you say less than $500, $500 to $1000, $1001 to $3000, or more than $3000?)

<p>| | | | | |</p>
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<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. LESS THAN $500</td>
<td>2. $500 - 1000</td>
<td>3. $1001 - 3000</td>
<td>4. MORE THAN $3000</td>
<td></td>
</tr>
</tbody>
</table>

F11. How much did you enjoy doing that work—did you enjoy it a great deal, quite a bit, some, a little, or not at all?

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. A GREAT DEAL</td>
<td>2. QUITE A BIT</td>
<td>3. SOME</td>
<td>4. A LITTLE</td>
<td>5. NOT AT ALL</td>
</tr>
</tbody>
</table>
F12. Now let’s talk about housework, including cooking and cleaning and doing other work around the house.

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>F12a. Do you prepare food for meals or wash dishes?</td>
<td>1. YES</td>
<td>5. NO</td>
</tr>
<tr>
<td>F12b. Do you do grocery shopping?</td>
<td>1. YES</td>
<td>5. NO</td>
</tr>
<tr>
<td>F12c. Do you clean or vacuum?</td>
<td>1. YES</td>
<td>5. NO</td>
</tr>
<tr>
<td>F12d. Do you do laundry?</td>
<td>1. YES</td>
<td>5. NO</td>
</tr>
<tr>
<td>F12e. Do you sew and mend?</td>
<td>1. YES</td>
<td>5. NO</td>
</tr>
</tbody>
</table>

F13. INTERVIEWER CHECKPOINT

1. RESPONDENT DOES SOME HOUSEWORK (ONE OR MORE ‘YES” AT F12)

2. ALL OTHERS--->NEXT PAGE, SECTION G

F14. Altogether, about how many hours do you spend doing these things in an average week?

_________________________ HOURS PER WEEK

F15. How much do you enjoy doing housework—do you enjoy it a great deal, quite a bit, some, a little, or not at all?

<table>
<thead>
<tr>
<th>1. A GREAT DEAL</th>
<th>2. QUITE A BIT</th>
<th>3. SOME</th>
<th>4. A LITTLE</th>
<th>5. NOT AT ALL</th>
</tr>
</thead>
</table>

F16. Is there anyone else who does some of the housework?

| 1. YES | 5. NO |
### SECTION G: HEALTH AND LIMITATION OF ACTIVITIES

**G1.** The next questions are about your health. In general, how satisfied are you with your health—completely, very, somewhat, not very, or not at all satisfied?

<table>
<thead>
<tr>
<th>1. COMPLETELY SATISFIED</th>
<th>2. VERY SATISFIED</th>
<th>3. SOMEWHAT SATISFIED</th>
<th>4. NOT VERY SATISFIED</th>
<th>5. NOT AT ALL SATISFIED</th>
</tr>
</thead>
</table>

**G2.** We’d like to know if you have experienced any of the following health problems during the last 12 months.

<table>
<thead>
<tr>
<th>Question</th>
<th>1. YES</th>
<th>5. NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>G2a. Have you had arthritis or rheumatism?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2b. During the last 12 months, have you had a lung disease?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2c. (Have you had) hypertension, sometimes called high blood pressure, or have you taken medication for it?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2d. Have you had a heart attack or other heart trouble during the last 12 months?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2e. (Have you had) diabetes or high blood sugar, or have you taken medication for it?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2f. During the last 12 months, have you had cancer or a malignant tumor of any kind?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2g. (Have you had) foot problems such as problems with circulation, corns or callouses?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2h. Have you had a stroke during the last 12 months?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2j. (Have you had) any broken or fractured bones?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G2k. Have you lost any amount of urine beyond your control during the last 12 months?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
G3. Do you wear eyeglasses or contact lenses?

1. YES

33a. How well can you see with your glasses or contact lenses--very well, quite well, somewhat well, not too well or not at all well?

5. NO

33b. How well can you see--very well, quite well, somewhat well, not too well or not at all well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL  5. NOT AT ALL WELL

G4. Do you wear a hearing aid?

1. YES

34a. How well can you hear with your hearing aid--very well, quite well, somewhat well, not too well or not at all well?

5. NO

33b. How well can you hear--very well, quite well, somewhat well, not too well or not at all well?

1. VERY WELL  2. QUITE WELL  3. SOMESThAT WELL  4. NOT TOO WELL  5. NOT AT ALL WELL
65. Are you currently in bed or in a chair for most or all of the day because of your health?

1. YES  
5. NO

66. Do you currently have any difficulty bathing by yourself?

1. YES  
5. NO --->Go TO G7

26a. How much difficulty do you have bathing by yourself--a little, some, a lot, or can’t you do this on your own?

1. A LITTLE  
2. SOME  
3. A LOT  
4. CANNOT DO

G6b. Does someone else help you bathe?

1. YES  
5. NO

TURN TO P. 39, G12

67. INTERVIEWER CHECKPOINT

☐ 1. R ANSWERED “YES” TO G5-->TURN TO P. 39, G12

☐ 2. ALL OTHERS-->NEXT PAGE, G8
G8* Do you currently have any difficulty climbing a few flights of stairs because of your health?

1. YES  3. VOLUNTEERED: AGE IS ONLY LIMITATION  5. NO --> GO TO G9

G8a. How much difficulty do you have--a little, some, a lot, or can't you do this at all?

1. A LITTLE  2. SOME  3. A LOT  4. CANNOT DO

G9. Do you currently have any difficulty walking several blocks because of your health?

1. YES  3. VOLUNTEERED: AGE IS ONLY LIMITATION  5. NO --> GO TO G10

G9a. How much difficulty do you have--a little, some, a lot, or can't you do this at all?

1. A LITTLE  2. SOME  3. A LOT  4. CANNOT DO

G10. INTERVIEWER CHECKPOINT

1. R ANSWERED 'A MT" OR "CANNOT DO" TO EITHER G8a OR G9a --> NEXT PAGE, G12
2. ALL OTHERS

G11. Would you currently have any difficulty doing heavy work around the house such as shoveling snow or washing walls, because of your health?

1. YES  3. VOLUNTEERED: AGE IS ONLY LIMITATION  5. NO --> NEXT PAGE, G12

G11a. How much difficulty would you have--a little, some, a lot, or couldn't you do this at all?

1. A LITTLE  2. SOME  3. A LOT  4. COULD NOT DO
G12. Within this (community/area), are you able to get to any place you want to go?

1. YES  5. NO

G13. Do you receive help from another person or from an agency in getting around in the community?

1. YES  5. NO

G14. How would you rate your health at the present time? Would you say it is excellent, very good, good, fair, or poor?

1. EXCELLENT  2. VERY GOOD  3. GOOD  4. FAIR  5. POOR

G15. Do you have any major health problems that I haven’t asked you about?

1. YES  5. NO -->GO TO G16

G15a. What are they?

G16. How much are your daily activities limited in any way by your health or health-related problems—a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL -->GO

G16a. What specific health problems are the main cause of the limitations you experience?

G17. The next questions are about your use of health care services. Have you been a resident or patient in a nursing home at any time during the past 6 months?

1. YES  5. NO -->NEXT PAGE, G18

G17a. How long were you in the nursing home?

_______ DAYS OR _______ WEEKS OR _______ MONTHS
G18. Have you been a patient in a hospital, overnight or longer, at any time during the past 6 months?

1. YES  
5. NO --->GO TO G19

G18a. How many nights were you a hospital patient during the past 6 months?

______ NIGHTS

G19. The next questions refer to the last 3 months. (Aside from days spent in the hospital or nursing home) Did illness or injury or just not feeling well ever keep you in bed all or most of the day during the past 3 months?

1. YES  
5. NO --->GO TO G20

G19a. On about how many days during the past 3 months did you stay in bed all or most of the day?

______ DAYS

G20. (Other than when you were in the hospital or nursing home) Have you seen a medical doctor during the past 3 months?

1. YES  
5. NO --->GO TO G21

G20a. How many times have you seen a medical doctor in the past 3 months (other than when you were in the hospital or nursing home)?

______ TIMES

G21. During the past 3 months have you seen somebody for a personal or mental problem--someone like a psychiatrist, psychologist, medical doctor, clergyman or social worker?

1. YES  
5. NO --->GO TO G22

G21a. How many times in the past 3 months have you seen any of these professionals about a personal or mental health problem?

______ TIMES

G22. How often does someone remind you to do things which will help you stay healthy, such as getting enough sleep or exercise, or taking medications? Do other people do this often, sometimes, rarely, or never?

1. OFTEN  2. SOMETIMES  3. RARELY  4. NEVER --->NEXT PAGE, G23

G22a. Who reminds you (what is that person's relationship to you)?

(PROBE: Anyone else?)

RELATIONSHIP TO R
G23. How tall are you without shoes on?

\[
\begin{array}{c}
/ \\
\text{FEET} & \text{INCHES}
\end{array}
\]


G25. How many hours of sleep do you usually get in a 24-hour period, including naps? _______ HOURS

G26. Do you smoke cigarettes now?

5. NO 1. YES --- G26a. On the average, how many cigarettes or packs do you usually smoke in a day?

_______ CIGARETTES OR _______ PACKS

GO TO G28

G27. Did you ever smoke cigarettes?

1. YES 5. NO

G28. Do you ever drink beer, wine, or liquor?

1. YES 5. NO --- NEXT PAGE, SECTION H

G28a. During the last □onth, on how many days did you drink beer, wine or liquor?

_______ DAYS/MONTH OR _______ DAYS/WEEK  ONE --- NEXT PAGE, SECTION H

G28b. On days that you drink, how many cans of beer, glasses of wine, or drinks of liquor do you usually have?

_______ CANS/GLASSES/DRINKS PER DAY WHEN DRINK NUMBER
SECTION H: SELF DESCRIPTION

(H1, p. 5) Please look at page 5 of the yellow booklet where you will find a list of statements describing how people sometimes feel. After each statement, please put an "x" in the answer category that indicates how often you felt that way during the past week. (Again, the best answer is usually the one that comes to your mind first, so do not spend too much time on any one statement. If you prefer, I can read the statements to you.)

INTERVIEWER CHECKPOINT

- 1. R READS SAB ALONE, SAY "Please let me know when you have finished."
- 2. Hla-p ARE READ ALOUD TO R (R UNABLE TO READ, TOO SLOW IN USING SAB). USE RB, P. 31 FOR ANSWER CATEGORIES

<table>
<thead>
<tr>
<th>During the past week . . .</th>
<th>HARDLY EVER (1)</th>
<th>SOME OF THE TIME (2)</th>
<th>MOST OF THE TIME (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hla. I felt depressed (hardly ever, some of the time or most of the time).</td>
<td></td>
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</tr>
<tr>
<td>Hlb. I felt that everything I did was an effort.</td>
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<tr>
<td>Hlc. I felt that there were people who really understood me.</td>
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<td></td>
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<tr>
<td>Hid. My sleep was restless.</td>
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</tr>
<tr>
<td>Hle. I was happy.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Hlf. I felt lonely.</td>
<td></td>
<td></td>
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<tr>
<td>Hlg. People were unfriendly.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hlh. I felt that no one really knows me well.</td>
<td></td>
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<tr>
<td>Hlj. I enjoyed life.</td>
<td></td>
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<tr>
<td>Hlk. I did not feel like eating. My appetite was poor.</td>
<td></td>
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</tr>
<tr>
<td>Hlm. I felt sad.</td>
<td></td>
<td></td>
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<tr>
<td>Hln. I felt that people disliked me.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Hip. I could not get &quot;going.&quot;</td>
<td></td>
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</tr>
</tbody>
</table>

WHEN R FINISHES, NEXT PAGE, H2
H2. Have you ever had a time in your life that lasted an entire week or more when you felt sad, blue or depressed most of the time, or when you lost all interest and pleasure in things you usually care about or enjoy?

1. YES  5. NO --> NEXT PAGE, H4

H3. Have you felt this way for an entire week or more in the past 12 months?

1. YES  5. NO --> NEXT PAGE, H4

H3a. In what month and year did you start to feel that way?

/ MONTH YEAR

H3b. How many weeks or months did this time of feeling sad and depressed last?

________ WEEKS OR ________ MONTHS

H3c. (IF NECESSARY:) Have you been feeling this way for the past week?

1. YES  5. NO

H3d. Do you think any particular incident or event caused you to become sad or depressed?

1. YES  5. NO --> NEXT PAGE, H4

H3e. What was that event?

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
4. Now I'm going to read a series of questions that you can answer with yes or no. I will go through them rather quickly.

<table>
<thead>
<tr>
<th>Question</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>(IF VOL.) SOMETIMES (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>H4a. Are you a talkative person?</td>
<td></td>
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<tr>
<td>H4b. Would you call yourself a nervous person?</td>
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</tr>
<tr>
<td>H4c. Are you a worrier?</td>
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</tr>
<tr>
<td>H4d. Does your mood often go up and down?</td>
<td></td>
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<tr>
<td>H4e. Do you usually take the initiative in making new friends?</td>
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<td></td>
</tr>
<tr>
<td>H4f. Do you often feel fed-up?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>H4g. Do you tend to keep in the background on social occasions?</td>
<td></td>
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</tr>
<tr>
<td>H4h. Would you call yourself tense or &quot;high-strung&quot;?</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>H4i. Are you mostly quiet when you are with other people?</td>
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</tr>
<tr>
<td>H4k. Are you the type of person who plans for the future?</td>
<td></td>
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</tr>
</tbody>
</table>

5. Have you usually felt pretty sure your life would work out the way you want it to, or have there been times when you haven't been sure about it?

1. PRETTY SURE
2. HAVEN'T BEEN SURE

6. When you do make plans ahead, do you usually get to carry out things the way you expected, or do things usually come up to make you change your plans?

1. CARRY OUT WAY EXPECTED
2. HAVE TO CHANGE PLANS
J1. We would like to know about what you do—are you working now for pay, looking for work, retired, keeping house, a student, or something else? (CHECK ALL THAT APPLY.)

A. WORKING NOW
B. ONLY TEMPORARILY LAID OFF; SICK OR MATERNITY LEAVE
C. UNPAID FAMILY WORKER
D. LOOKING FOR WORK, UNEMPLOYED
E. RETIRED
F. PERMANENTLY DISABLED
G. KEEPING HOUSE
H. STUDENT
J. OTHER (SPECIFY):

J2. Are you doing any work for pay at the present time?

1. YES  5. NO  --TURN TO P.51, J25

J3. Including paid vacation and sick leave, how many weeks altogether were you employed during the past 12 months?

WEEKS IN LAST 12 MONTHS OR FROM / TO /

J4. What is your occupation on your main job?

J5. What kind of work do you do? What are your most important activities or duties?

J6. What kind of business or industry is that in? What do they make or do where you work?
J7. Are you self-employed, or do you work for a private employer, or a municipal, county, state, or federal government?

1. SELF-EMPLOYED  2. PRIVATE EMPLOYER  3. GOVERNMENT EMPLOYER

J8. Do you supervise others on your job?

1. YES  5. NO

J9. On the average, how many hours a week do you work on this job, including paid and unpaid overtime?

______________ HOURS PER WEEK

J10. How much do you earn now from this job?

$ ______________ PER __________

J11. How much do you enjoy doing that work—do you enjoy it a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL  2. QUITE A BIT

3. SOME  4. A LITTLE  5. NOT AT ALL

J12. How satisfied are you with your job—completely, very, somewhat, not very or not at all satisfied?

1. COMPLETELY SATISFIED  2. VERY SATISFIED

3. SOMEWHAT SATISFIED  4. NOT VERY SATISFIED  5. NOT AT ALL SATISFIED
J13. Aside from the money, are you yourself better off because of your work on this job?

1. YES

J13a. Would you say you are a great deal, somewhat, or only a little better off?

1. A GREAT DEAL
2. SOMewhat
3. ONLY A LITTLE

J13b. Are you worse off because of your work on this job?

1. YES
5. NO --GO TO J14

J13c. Would you say you are a great deal, somewhat, or only a little worse off?

1. A GREAT DEAL
2. SOMewhat
3. ONLY A LITTLE

J14. Are there other people who are better off because of your work on this job?

1. YES

J14a. Would you say they are a great deal, somewhat, or only a little better off?

1. A GREAT DEAL
2. SOMewhat
3. ONLY A LITTLE

J14b. Are there other people who are worse off because of your work on this job?

1. YES
5. NO --GO TO J15

J14c. Would you say they are a great deal, somewhat, or only a little worse off?

1. A GREAT DEAL
2. SOMewhat
3. ONLY A LITTLE

J15. In addition to your main job, do you have another regular job for which you are paid?

1. YES
5. NO
J16. Thinking about your job or jobs over the past year, would you have liked to work more?

1. YES   
2. NO

J16a. Would you have liked to work less?

1. YES   
2. NO

J17. Sometimes people lose jobs they want to keep. How likely is it that during the next couple of years you will involuntarily lose your main job—not at all likely, not too likely, somewhat likely, or very likely?

1. NOT AT ALL LIKELY   
2. NOT TOO LIKELY   
3. SOMEWHAT LIKELY   
4. VERY LIKELY

J18. If you were to lose your main job, what do you think your chances would be of finding another job that paid about the same—would your chances be very good, good, fair, or poor?

1. VERY GOOD   
2. GOOD   
3. FAIR   
4. POOR   
5. DK

J19. INTERVIEWER CHECKPOINT

SEE J9 (P. 46)

1. R WORKS 20 OR MORE HOURS/WEEK ON MAIN JOB-->NEXT PAGE, J20

2. ALL OTHERS-->TURN TO P. 50, J21
(SAB, P. 6) page 6 of the yellow booklet lists some things that people tell us about their work. After each statement, please put an "X" in the answer category that best describes how strongly you agree or disagree with the statement as it applies to your work. (If you prefer, I can read the statements to you.)

INTERVIEWER CHECKPOINT

☐ 1. R READS SAB ALONE, SAY, "Please let me know when you have finished."

☐ 2. J20a-k ARE READ ALOUD TO R (R UNABLE TO READ, TOO SLOW IN USING SAB). USE RB, P. 32 FOR ANSWER CATEGORIES

<table>
<thead>
<tr>
<th></th>
<th>STRONGLY AGREE (1)</th>
<th>AGREE SOMEWHAT (2)</th>
<th>DISAGREE SOMEWHAT (3)</th>
<th>STRONGLY DISAGREE (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>J20a. I have very little chance to decide how I do my work. (Do you strongly agree, agree somewhat, disagree somewhat or strongly disagree with this statement?)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>J20b. I get to do a variety of different things in my work.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>J20c. I have a lot to say about what happens in my work.</td>
<td></td>
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</tr>
<tr>
<td>J20d. My work requires working very fast.</td>
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</tr>
<tr>
<td>J20e. My work requires lots of physical effort.</td>
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</tr>
<tr>
<td>J20f. I have enough time to get my work done.</td>
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</tr>
<tr>
<td>J20g. My work requires rapid and continuous physical activity.</td>
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</tr>
<tr>
<td>J20h. I am free from conflicting demands that others make.</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>J20j. I am bored with my work.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>J20k. I am not appreciated for the work I do.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

WHEN R FINISHES, NEXT PAGE, J21
J21. In general, how often do you feel bothered or upset in your work--almost always, often, sometimes, rarely, or never?

1. ALMOST ALWAYS  2. OFTEN  3. SOMETIMES  4. RARELY  5. NEVER

J22. During the past three years, have you had any serious problems or difficulties in your work that upset you a lot?

1. YES  5. NO → GO TO J23

J22a. What was the most serious problem?

J23. Changing the subject a bit, how likely is it that you might stop doing work for pay in the next two or three years? Is this very likely, somewhat likely, not too likely, or not at all likely?

1. VERY LIKELY  2. SOMewhat LIKELY  3. NOT TOO LIKELY  4. NOT AT ALL LIKELY

GO TO J24

J23a. People stop working for pay for many different reasons. What do you think will be the reasons you decide to stop doing any work for pay?

J23b. Do you feel that stopping work for pay will be entirely good, mostly good, mostly bad, or entirely bad for you?

1. ENTIRELY GOOD  2. MOSTLY GOOD  3. MOSTLY BAD  4. ENTIRELY BAD

J23c. How much choice do you think you will have in deciding when to stop working for pay? Is that complete choice, a great deal of choice, some choice, or no choice at all?

1. COMPLETE CHOICE  2. A GREAT DEAL OF CHOICE  3. SOME CHOICE  4. NO CHOICE AT ALL

J24. INTERVIEWER CHECKPOINT

SEE J1 (P.45)

☐ 1. R IS RETIRED → NEXT PAGE, J25

☐ 2. ALL OTHERS → TURN TO P. 52, J36
J25. INTERVIEWER CHECKPOINT

SEE J1 (P.45)

1. R IS RETIRED

2. ALL OTHERS

J25a. Have you ever held a regular job for pay?

1. YES  5. NO -->NEXT PAGE,  J36

J26. Now we have a few questions about the last regular job you had (before retirement). What was your occupation on this job?

____________________________________________________________________________________

J27. What kind of work did you do on that last job? What were your most important activities or duties?

____________________________________________________________________________________

J28. What kind of business or industry was that in? What did they make or do where you worked?

____________________________________________________________________________________

J29. Were you self-employed, or did you work for a private employer, or a municipal, county, state, or federal government?

1. SELF-EMPLOYED  2. PRIVATE EMPLOYER  3. GOVERNMENT EMPLOYER

J30. In what year did you stop working on that job?

YEAR ENDED

J31. How much did you enjoy doing that work--did you enjoy it a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL
J32. people (retire/leave a paid job) for many reasons. What are the reasons you (retired/left your last job)? (PROBE: Were there any other reasons?)

J33. How much choice did you have in deciding to (retire/stop working on that job)? Was that complete choice, a great deal of choice, some choice, or no choice at all?

1. COMPLETE CHOICE
2. A GREAT DEAL OF CHOICE
3. SOME CHOICE
4. NO CHOICE AT ALL

J34. Did you leave this job earlier, later, or just about the time you wanted to?

1. EARLIER
2. LATER
3. JUST ABOUT RIGHT
4. OTHER

J35. Have the changes brought about by your (retirement/stopping work) been entirely good, mostly good, mostly bad, or entirely bad?

1. ENTIRELY GOOD
2. MOSTLY GOOD
3. MOSTLY BAD
4. ENTIRELY BAD

J36. INTERVIEWER CHECKPOINT

SEE J1 (P. 45)

☐ 1. R is keeping house (Box G checked at J1) --> NEXT PAGE, J37

☐ 2. ALL OTHERS --> TURN TO P. 54, J38
You told me earlier that you are keeping house. Page 7 of the yellow booklet lists some things that people tell us about their housekeeping work. (Please put an "X" in the answer category that best describes how strongly you agree or disagree with the statement. If you prefer, I can read the questions to you.)

INTERVIEWER CHECKPOINT

☐: 1. R READS SAB ALONE, SAY "Please let me know when you have finished."

☐: 2. J37a-k ARE READ ALOUD TO R (R UNABLE TO READ, TOO SLOW IN USING SAB). USE RB, p. 32 FOR ANSWER CATEGORIES

| J37a. I have very little chance to decide how I do my household work. (Do you strongly agree, agree somewhat, disagree somewhat or strongly disagree with this statement?) | STRONGLY AGREE (1) | AGREE SOMEWHAT (2) | DISAGREE SOMEWHAT (3) | STRONGLY DISAGREE (4) |
|Ｊ37b. I get to do a variety of different things in my household work. | |
| J37c. I have a lot to say about what happens in my household work. | |
| J37d. My household work requires working very fast. | |
| J37e. My household work requires lots of physical effort. | |
| J37f. I have enough time to get my household work done. | |
| J37g. My household work requires rapid and continuous physical activity. | |
| J37h. I am free from conflicting demands that others make. | |
| J37j. I am bored with my household work. | |
| J37k. I am not appreciated for the household work I do. | |

WHEN R FINISHES, NEXT PAGE, J38
J38. Some people feel that they have not had really good jobs during their lives. What about you? Do you feel that anything has kept you from getting really good jobs in your life?

1. YES  
5. NO --&gt; GO TO J39

J38a. What things have kept you from getting really good jobs in your life?

J39. People often pay each other to do work or chores instead of going to regular businesses. During the past 12 months were you paid to do any work of this sort that was not part of a regular job?

1. YES  
5. NO --&gt; TURN TO P. 56, SECTION K

J40. (RB, P. 33) Altogether, about how many hours did you spend doing paid work that was not part of a regular job during the past 12 months? (Would you say less than 20 hours, 20 to 39 hours, 40 to 79 hours, 80 to 159 hours or 160 hours or more?)

1. LESS THAN 20 HRS  
2. 20-39 HRS  
3. 40-79 HRS  
4. 80-159 HRS  
5. 160 HOURS OR MORE

J41. How much did you enjoy doing this work? Would you say you enjoyed it a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL  
2. QUITE A BIT  
3. SOME  
4. A LITTLE  
5. NOT AT ALL

J42. How satisfied were you with this work--completely, very, somewhat, not very or not at all satisfied?

1. COMPLETELY SATISFIED  
2. VERY SATISFIED  
3. SOMEWHAT SATISFIED  
4. NOT VERY SATISFIED  
5. NOT AT ALL SATISFIED
J43. Aside from the money, are you yourself better off because of the work you did in the past 12 months that was not part of a regular job?

1. YES
2. NO

J43a. Would you say you are a great deal, somewhat, or only a little better off?

1. A GREAT DEAL
2. SOMEWHAT
3. ONLY A LITTLE

J43b. Are you worse off because of this work?

1. YES
2. NO

J43c. Would you say you are a great deal, somewhat, or only a little worse off?

1. A GREAT DEAL
2. SOMEWHAT
3. ONLY A LITTLE

J44. Are there other people who are better off because of this work?

1. YES
2. NO

J44a. Would you say they are a great deal better off, somewhat or only a little better off?

1. A GREAT DEAL
2. SOMEWHAT
3. ONLY A LITTLE

J45. How many years have you been doing work for pay that was not part of your regular job?

______ YEARS

J45a. Has this work been very steady, somewhat steady, or not steady at all during those years?

1. VERY STEADY
2. SOMEWHAT STEADY
3. NOT STEADY AT ALL

J46. Would you like to do more paid work that is not a part of a regular job?

1. YES
2. NO

J46. Would you like to do less?

1. YES
2. NO

J47. Now thinking about the next 5 years, do you think that you will be doing more, less, or about the same amount of paid work that is not part of a regular job?

1. MORE
2. LESS
3. ABOUT THE SAME
SECTION K: FINANCIAL SITUATION

Now a few questions about (your/your family’s) financial situation.

K1. How satisfied are you with (your/your family’s) present financial situation—completely, very, somewhat, not very or not at all satisfied?

1. COMPLETELY SATISFIED
2. VERY SATISFIED
3. SOMEWHAT SATISFIED
4. NOT VERY SATISFIED
5. NOT AT ALL SATISFIED

K2. How difficult is it for (you/your family) to meet the monthly payments on your (family’s) bills? Is it extremely difficult, very difficult, somewhat difficult, slightly difficult, or not difficult at all?

1. EXTREMELY DIFFICULT
2. VERY DIFFICULT
3. SOMEWHAT DIFFICULT
4. SLIGHTLY DIFFICULT
5. NOT DIFFICULT AT ALL

K3. In general, how do your (family’s) finances usually work out at the end of the month—do you find that you usually end up with some money left over, just enough money to make ends meet, or not enough money to make ends meet?

1. SOME MONEY LEFT OVER
2. JUST ENOUGH MONEY
3. NOT ENOUGH MONEY

K4. In the past three years, have you had any serious financial problems or difficulties?

1. YES
5. NO ----> NEXT PAGE, SECTION L

K4a. In what month and year was the most recent occurrence?


K4d. And in what month was that? MONTH

K4c. Was this problem totally unexpected, or did you expect it for some time?

2. UNEXPECTED
1. EXPECTED IT

K4d. How well do you feel you have dealt up to now with this problem—very well, quite well, somewhat well, not too well, or not at all well?

1. VERY WELL
2. QUITE WELL
3. SOMEWHAT WELL
4. NOT TOO WELL
5. NOT AT ALL WELL
SECTION L: VOLUNTARY ACTIVITY

1. Now let’s talk about volunteer work you may have done during the last 12 months.

| L1a. Did you do volunteer work in the last year for a church, synagogue or other religious organization? |
|---------------------------------------------------|--------------------------------------------------|
| 1. YES | 5. NO |

<table>
<thead>
<tr>
<th>Lib. Did you do volunteer work for a school or educational organization?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. YES</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>L1c. Did you do volunteer work for a political group or labor union in the last 12 months?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. YES</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lid. Did you do work last year for a senior citizen group or related organization?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. YES</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Lie. In the last 12 months, did you do volunteer work for any other national or local organization, including United Fund, hospitals, and the like?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. YES</td>
</tr>
</tbody>
</table>

2. INTERVIEWER CHECKPOINT

- 1. RESPONDENT DID VOLUNTEER WORK (ANY ONE OR MORE “YES” TO L1)
- 2. ALL OTHERS-->TURN TO P. 59, L10

3. (RB, STILL ON P. 39) About how many hours did you spend on volunteer work of (this kind/these kinds) during the last 12 months? (Would you say less than 20 hours, 20 to 39 hours, 40 to 79 hours, 80 to 159 hours, or 160 hours or more?)

<table>
<thead>
<tr>
<th>1. LESS THAN 20 HOURS</th>
<th>2. 20-39 HOURS</th>
<th>3. 40-79 HOURS</th>
<th>4. 80-159 HOURS</th>
<th>5. 160 HOURS OR MORE</th>
</tr>
</thead>
</table>

4. (RB, P.34) If the organization(s) had paid someone for the volunteer work you did, about how much do you think it would have cost them? (Would you say less than $500, $500 to $1,000, $1,001 to $3,000, or more than $3,000?)

<table>
<thead>
<tr>
<th>1. LESS THAN $500</th>
<th>2. $500-$1,000</th>
<th>3. $1,001-$3,000</th>
<th>4. $3,000 OR MORE</th>
</tr>
</thead>
</table>

5. How much did you enjoy doing that volunteer work—did you enjoy it a great deal, quite a bit, some, a little, or not at all?

<table>
<thead>
<tr>
<th>1. A GREAT DEAL</th>
<th>2. QUITE A BIT</th>
<th>3. SOME</th>
<th>4. A LITTLE</th>
<th>5. NOT AT ALL</th>
</tr>
</thead>
</table>
L6. How satisfied were you with the results of your volunteer work—completely, very, somewhat, not very or not at all satisfied?

1. COMPLETELY SATISFIED  2. VERY SATISFIED  3. SOMEWHAT SATISFIED  4. NOT VERY SATISFIED  5. NOT AT ALL SATISFIED

L7. INTERVIEWER CHECKPOINT

SEE L3

1. RESPONDENT DID 40 OR MORE HOURS OF VOLUNTEER WORK

2. ALL OTHERS—NEXT PAGE, L10

L8. Are you yourself better off because of your volunteer work?

Y. YES  5. NO

.8a. Would you say you are a great deal, somewhat, or only a little better off?

1. A GREAT DEAL  2. SOMEWHAT

3. ONLY A LITTLE

.8b. Are you worse off because of your volunteer work?

1. YES  5. NO—GO TO L9

.8c. Would you say you are a great deal, somewhat, or only a little worse off?

1. A GREAT DEAL  2. SOMEWHAT

3. ONLY A LITTLE

L9. Are there other people who are better off because of your volunteer work?

1. YES  5. NO—NEXT PAGE, L10

L9a. Would you say they are a great deal better off, somewhat or only a little better off?

1. A GREAT DEAL  2. SOMEWHAT  3. ONLY A LITTLE
L10. Now let's talk about help you may have given in the last year to friends, neighbors, or relatives who did not live with you. We are interested in help you provided during the last 12 months for which you did not receive pay.

| L10a. During the last 12 months, did you provide transportation, shop or run errands for friends, neighbors or relatives who did not live with you? | 1. YES | 5. NO |
| L10b. Did you help others with their housework or with the upkeep of their house, car or other things? | 1. YES | 5. NO |
| L10c. In the last 12 months, did you do childcare without pay for persons not living in your household? | YES | 5. NO |
| L10d. Did you do any other things in the last 12 months to help neighbors, friends or relatives who did not live with you? | 1. YES | 5. NO |

L11. INTERVIEWER CHECKPOINT

1. RESPONDENT GAVE HELP TO RELATIVES, FRIENDS OR NEIGHBORS (ONE OR MORE "YES" TO L10)
2. ALL OTHERS --> TURN TO P. 61, L18

L12. (RB, P. 25) Altogether, about how many hours did you spend doing these things during the last 12 months? (Would you say less than 20 hours, 20 to 39 hours, 40 to 79 hours, 80 to 159 hours, or 160 hours or more?)

| 1. LESS THAN 20 HOURS | 2. 20-39 HOURS | 3. 40-79 HOURS | 4. 80-159 HOURS | 5. 160 HOURS OR MORE |

L13. How much did you enjoy helping friends, neighbors, and relatives -- a great deal, quite a bit, some, a little, or not at all?

| 1. A GREAT DEAL | 2. QUITE A BIT | 3. SOME | 4. A LITTLE | 5. NOT AT ALL |

L14. How satisfied were you with the things you did to help friends, neighbors and relatives -- completely, very, somewhat, not very or not at all satisfied?

| 1. COMPLETELY SATISFIED | 2. VERY SATISFIED | 3. SOMEWHAT SATISFIED | 4. NOT VERY SATISFIED | 5. NOT AT ALL SATISFIED |
L15. INTERVIEWER CHECKPOINT

SEE L12

1. R SPENT 40 OR MORE HOURS HELPING RELATIVES, FRIENDS OR NEIGHBORS

☐ 2. ALL OTHERS-->NEXT PAGE, L18

L16. Are you yourself better off because of your help to friends, neighbors and relatives?

1. YES  5. NO

L16a. Would you say you are a great deal, somewhat, or only a little better off?

1. A GREAT DEAL  2. SOMewhat

3. ONLY A LITTLE

L16b. Are you worse off because of your help to friends, neighbors and relatives?

1. YES  5. NO --> GO TO L17

L16c. Would you say you are a great deal, somewhat, or only a little worse off?

1. A GREAT DEAL  2. SOMEWHAT

3. ONLY A LITTLE

L17. Are there other people who are better off because of your help to friends, neighbors and relatives?

1. YES  5. NO --> NEXT PAGE, L18

L17a. Would you say they are a great deal better off, somewhat or only a little better off?

1. A GREAT DEAL  2. SOMEWHAT  3. ONLY A LITTLE
L18. INTERVIEWER CHECKPOINT

SEE L1 (P. 57) AND L10 (P. 59)

1. RESPONDENT GAVE HELP TO ORGANIZATIONS OR TO RELATIVES/FRIENDS
   (ANY "YES" AT L1 OR L10)
2. ALL OTHERS--GO TO L21

L19. Please think about all the unpaid activities you did during the last year to help others or to help organizations. Would you have liked to do more of that kind of unpaid work?

1. YES 5. NO

L19a. Would you have liked to do less of that kind of work?

1. YES 5. NO

L20. Do you feel that on the whole, you did more unpaid work for others in the last 12 months than others did for you, or did others do more unpaid work for you?

1. R DID MORE 2. VOLUNTEERED: ABOUT EQUAL 3. OTHERS DID MORE

L21. In the home and neighborhood where you grew up, did people help each other out with unpaid work?

1. YES 5. NO 8. DON'T KNOW
SECTION M: MEMORY

Now I'd like to ask some questions dealing with memory. Even people with very good memories seem to forget some of these things from time to time. They are routine questions we ask everyone.

M1. What is the date today—month, day and year? (WRITE OUT MONTH)

____________________________________

MONTH / DAY / YEAR

M2. What day of the week is it?

1. MON 2. TUES 3. WED 4. THURS 5. FRI 6. SAT 7. SUN

M3. What was your mother’s maiden name—just her last name?

____________________________________

MOTHER’S MAIDEN NAME

M4. What is the name of the president of the United States?

____________________________________

CURRENT PRESIDENT

M5. What is the name of the person who was president just before him?

____________________________________

PREVIOUS PRESIDENT

M6. Please subtract 3 from 20 and tell me the number you get. Then, keep subtracting 3 from this number and each new number you get, telling me the results as you go.

(INTEVIEWER: RECORD ANSWERS STARTING AT “A”. STOP WHEN THE ANSWER IS 2 OR LESS.)

A  B  C  D  E  F
SECTION N: VERBAL FACILITY

(SAB, P. 8) On page 8 of the yellow booklet you will find a list of sentences that are missing one word. Beneath each sentence are five words that might be used to complete the sentence. Pick the word you think completes the sentence in the most sensible way. Let’s look at the example at the top of the page. You see that the box beside the word “stars” is marked. Please complete the six sentences in the same way. If you are not sure which word to use just take a guess.

EXAMPLE:
We see __________ only at night.

1. CHILDREN  2. PLANTS  X 3. STARS  4. HOUSES  5. TREES

N1. Not every cloud gives __________.

1. WEATHER  2. SHADE  3. SKY  4. CLIMATE  5. RAIN

N2. In the spring the buds form on the branches of the __________.

1. TREES  2. RIVERS  3. BUGS  4. LEAVES  5. ANIMALS

N3. The important thing is not so much that every child should be taught as that every child should be given the wish to __________.

1. LEARN  2. PLAY  3. HOPE  4. REJECT  5. TEACH

N4. It is better that ten guilty people __________, than that one innocent suffer.

1. SUFFER  2. ESCAPE  3. CAPTURE  4. STARVE  5. REPENT

CONTINUED ON NEXT PAGE
N5. Think long when you may _______ only once.

☐ 1. ABSTAIN  ☐ 2. LIVE  ☐ 3. DIE  ☐ 4. DECIDE  ☐ 5. EAT

N6. The coward threatens only when he is ________.

☐ 1. AFRAID  ☐ 2. SURROUNDED  ☐ 3. SAFE  ☐ 4. CONQUERED  ☐ 5. HAPPY

WHEN R FINISHES, NEXT PAGE, SECTION P
SECTION P: LIFE EVENTS

The next questions are about major events that sometimes take place during a person’s life.

P1. Have you ever been the victim of a serious physical attack or assault at any time in your life?

1. YES  5. NO → GO To P2

P1a. In what year was the most recent occurrence?

1985  1986  OTHER YEAR: __________

P1b. And in what month did it happen?

MONTH

P1c. How well do you feel you have dealt up to now with this experience and any changes or problems which may have resulted from it—very well, quite well, somewhat well, or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL

P2. Have you ever had a life-threatening illness or accidental injury at any time in your life?

1. YES  5. NO → NEXT PAGE, P3

P2a. In what year did that happen most recently?

1985  1986  OTHER YEAR: __________

P2b. And in what month did it happen?

MONTH

P2c. How well do you feel you have dealt up to now with this life-threatening (illness/injury) and any changes or problems that may have resulted from it—very well, quite well, somewhat well, or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL
P3. The next questions are about the past three years.

Did you have any (other) serious, but not life-threatening, illness or accidental injury that occurred or got worse in the last three years?

1. YES  5. NO -->NEXT PAGE, P4

P3a. In what year did that happen most recently?

1985  1986  OTHER YEAR: ____________

P3b. In what month did it happen?

MONTH

P3c. And how well do you feel you have dealt up to now with this (illness/injury) and any changes or problems that may have resulted from it—very well, quite well, somewhat well, or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL
P4. Have you moved to a new residence during the past three years?

1. YES   5. NO --> NEXT PAGE, P5

P4a. In what year was your most recent move?

1985   1986   OTHER YEAR: __________

P4b. In what month did it happen?

MONTH

P4c. In what city or county and state did you live before you moved here?

CITY/COUNTY / STATE

SAME CITY/COUNTY AS PRESENT

P4d. Thus far, have the changes brought about in your life by this move been entirely good, mostly good, mostly bad or entirely bad?

1. ENTIRELY GOOD   2. MOSTLY GOOD   3. MOSTLY BAD   4. ENTIRELY BAD

P4e. And how well do you feel you have dealt up to now with the changes brought on by moving to a new residence—very well, quite well, somewhat well, or not too well?

1. VERY WELL   2. QUITE WELL   3. SOMEWHAT WELL   4. NOT TOO WELL
P5. In the last three years, have you involuntarily lost a job for reasons other than retirement?

1. YES  5. NO \rightarrow \text{GO TO P6}

P5a. In what year did that last happen?

1985  1986  OTHER YEAR: __________

P5b. In what month did it happen?

MONTH

P5c. Was this job loss totally unexpected, or did you expect it for some time?

1. TOTALLY UNEXPECTED  2. EXPECTED IT

P5d. And how well do you feel you have dealt up to now with the loss of your job and any changes or problems that might have resulted from it--very well, quite well, somewhat well, or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL

P6. Aside from something you already told me about, were you robbed or was your home burglarized in the last three years?

1. YES  5. NO \rightarrow \text{NEXT PAGE, P7}

P6a. In what year did that happen most recently?

1985  1986  OTHER YEAR: __________

P6b. And in what month did it happen?

MONTH

P6c. And how well do you feel you have dealt up to now with this (burglary/robbery) and any changes or problems that might have resulted from it--very well, quite well, somewhat well, or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL
P7. During the last 3 years, has anything (else) bad happened to you that upset you a lot and that you haven't already told me about?

1. YES  5. NO --> NEXT PAGE, P8

P7a. What was the most upsetting thing that happened that you haven't already told me about?

__________________________________________________________________________

P7b. In what year did that happen?

1985  1986  OTHER YEAR: ____________

P7b. What month was that?

__________________________________________________________________________

P7d. And how well do you feel you have dealt up to now with this event and any changes or problems that might have resulted from it—very well, somewhat well, or not too well?

1. VERY WELL  2. QUITE WELL  3. SOMewhat WELL  4. NOT TOO WELL
Now I would like to talk with you about people who have trouble taking care of themselves because of physical or mental illness, disability, or for some other reason. Are you currently involved in helping someone like this by caring for them directly or arranging for their care by others?

1. YES  5. NO  --> NEXT PAGE, P9

P8a. How many such people do you help?

ONE  OTHER: NUMBER

I have a few questions about the person with whom you have the greatest involvement.

P8b. Who is this person? (What is this person’s relationship to you?)

RELATIONSHIP TO R

P8c. Does (he/she) live with you in your household?

1. YES  5. NO

P8d. Do you actually help to care for (him/her), or do you arrange for (his/her) care by others, or do you do both?

1. CARE FOR  2. ARRANGE FOR CARE  3. BOTH

P8e. (RB, P. 35) About how many hours did you spend doing this in the past year? (Would you say less than 20 hours, 20 to 39, 40 to 79, 80 to 159, or 160 hours or more?)

1. LESS THAN 20 HOURS  2. 20-39 HOURS  3. 40-79 HOURS  4. 80-159 HOURS  5. 160 HOURS OR MORE

P8f. (RB, P. 36) How stressful is it for you to care for (him/her) or to arrange for (his/her) care? Is it very stressful, quite stressful, somewhat stressful, not too stressful, or not at all stressful?

1. VERY STRESSFUL  2. QUITE STRESSFUL  3. SOMewhat STRESSFUL  4. NOT TOO STRESSFUL  5. NOT AT ALL STRESSFUL
P9. **During the past 12 months**, has anyone else you care about had a **serious** injury, illness, personal problem or sudden crisis?

1. YES
2. NO

--- NEXT PAGE, SECTION Q ---

**P9a. How many such persons are there?**

![Diagram](ONE | OTHER: NUMBER)

Of those people, let me ask about the person for whom you care most.

**P9b. Who is this person?** (What is this person's relationship to you?)

---

**RELATIONSHIP TO R**

**P9c. In what month and year did (his/her) problem(s) start?**

MONTH YEAR

**P9d. What kind of problem did (he/she) have?**

---

**P9e.** *(RB, P. 37)* Altogether, about how many hours did you spend in the past year helping (him/her) with (his/her) problem(s) or talking with (him/her) about the problem(s)? (Would you say less than 20 hours, 20 to 39, 40 to 79, 80 to 159, or 160 hours or more?)

1. LESS THAN 20 HOURS
2. 20-39 HOURS
3. 40-79 HOURS
4. 80-159 HOURS
5. 160 HOURS OR MORE
SECTION Q: WORLD VIEWS AND RELIGION

Q1. *(RB, P. 38)* Please tell me how strongly you agree or disagree with each of the following statements. I will read these rather quickly because the best answer is usually the one that comes to mind first.

<table>
<thead>
<tr>
<th>Q1a. When bad things happen, we are not supposed to know why. We are just supposed to accept them. (Do you strongly agree, agree somewhat, disagree somewhat or strongly disagree?)</th>
<th>STRONGLY AGREE (1)</th>
<th>AGREE SOMEWHAT (2)</th>
<th>DISAGREE SOMEWHAT (3)</th>
<th>STRONGLY DISAGREE (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1b. People die when it is their time to die, and nothing can change that.</td>
<td></td>
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<tr>
<td>Q1c. Everything that happens is a part of God's plan.</td>
<td></td>
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<tr>
<td>Q1d. I have made many sacrifices to ensure a good future for myself (and my family).</td>
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<tr>
<td>Q1e. If bad things happen, it is because they were meant to be.</td>
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<tr>
<td>Q1f. By and large, people deserve what they get.</td>
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<tr>
<td>Q1g. People who meet with misfortune have often brought it on themselves.</td>
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<tr>
<td>Q1h. In the long run good people will be rewarded for the good things they have done.</td>
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<tr>
<td>Q1j. Because I worked hard and sacrificed in the past, I am entitled to good things in my future.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Q2. The next several questions are about religion. What is your religious preference--Protestant, Roman Catholic, Jewish, or something else?

1. PROTESTANT  2. ROMAN CATHOLIC  3. JEWISH  4. NONE, NO PREFERENCE  7. OTHER: (SPECIFY)

Q2a. What denomination is that?

Q3. In general, how important are religious or spiritual beliefs in your day-to-day life--would you say very important, fairly important, not too important, or not at all important?

1. VERY IMPORTANT  2. FAIRLY IMPORTANT  3. NOT TOO IMPORTANT  4. NOT AT ALL IMPORTANT

(RB, P. 39) How often do you usually attend religious services?

1. MORE THAN ONCE A WEEK  2. ONCE A WEEK  3. 2 OR 3 TIMES A MONTH  4. ABOUT ONCE A MONTH  5. LESS THAN ONCE A MONTH  6. NEVER

Q5. (RB, STILL ON P. 39) How often do you read religious books or religious materials (more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month, or never?)

1. MORE THAN ONCE A WEEK  2. ONCE A WEEK  3. 2 OR 3 TIMES A MONTH  4. ABOUT ONCE A MONTH  5. LESS THAN ONCE A MONTH  6. NEVER

Q6. (RB, STILL ON P. 39) How often do you watch or listen to religious programs on T.V. or radio or listen to religious tapes? (Would you say more than once a week, once a week, two or three times a month, about once a month, less than once a month, or never?)

1. MORE THAN ONCE A WEEK  2. ONCE A WEEK  3. 2 OR 3 TIMES A MONTH  4. ABOUT ONCE A MONTH  5. LESS THAN ONCE A MONTH  6. NEVER
Q7. When you have problems or difficulties in your work, family or personal life, how often do you seek spiritual comfort and support—almost always, often, sometimes, rarely or never?

1. ALMOST ALWAYS  2. OFTEN  3. SOMETIMES  4. RARELY  5. NEVER

Q8. Some people believe that people simply stop existing after death while others believe in an afterlife. Which comes closest to what you believe—that people stop existing after death or that there is an afterlife?

1. STOP EXISTING  2. AFTERLIFE  8. VOLUNTEERED: DK

Q8a. Please tell me how strongly you agree or disagree with each of the following statements. The first one is: In the afterlife, you will be reunited with your loved ones. Do you strongly agree, agree somewhat, disagree somewhat, or strongly disagree with that statement?

1. STRONGLY AGREE  2. AGREE SOMEWHAT  3. DISAGREE SOMEWHAT  4. STRONGLY DISAGREE

Q8b. People who suffer unjustly in this life will be rewarded in the afterlife. Do you strongly agree, agree somewhat, disagree somewhat, or strongly disagree?
SECTION R: DEMOGRAPHICS

Now I have some questions about your background and personal characteristics. First, in order to get an idea of the different ethnic groups and races that participate in this study, I would like to ask you about your ethnic background or origins. Most people in the United States have ancestors who came from other parts of the world.

R1. Are you of Spanish or Hispanic descent, that is, Mexican, Mexican American, Chicano, Puerto Rican, Cuban or Spanish? [IF NECESSARY: Which one?]

00. NOT SPANISH/HISPANIC --> GO TO R2

01. MEXICAN 02. MEXICAN AMERICAN 03. CHICANO 04. PUERTO RICAN 05. CUBAN 07. OTHER SPANISH (SPECIFY)

R1a. How close do you feel in your ideas and feelings about things to people of (GROUP NAMED IN R1) descent?, Would you say very close, fairly close, not too close or not close at all?

1. VERY CLOSE 2. FAIRLY CLOSE 3. NOT TOO CLOSE 4. NOT CLOSE AT ALL

NEXT PAGE, R3

R2. In addition to being American, what do you think of as your ethnic background or origins?

NONE  DK  REFUSED

R2a. INTERVIEWER CHECKPOINT

1. ONLY ONE GROUP MENTIONED AT R2

2. ALL OTHERS

R2b. Which do you feel best describes your ethnic background or origins?

R2c. How close do you feel in your ideas and feelings about things to people of (GROUP NAMED IN R2b/R2) descent?, Would you say very close, fairly close, not too close or not close at all?

1. VERY CLOSE 2. FAIRLY CLOSE 3. NOT TOO CLOSE 4. NOT CLOSE AT ALL
R3. Are you white, black, American Indian, Asian, or another race? (CHECK ALL THAT APPLY.)

WHITE  BLACK  AMERICAN INDIAN  ASIAN  OTHER (SPECIFY):  REFUSED

GO TO R4

R3a. INTERVIEWER CHECKPOINT

☐ 1. WHITE ONLY MENTIONED AT R3 --> GO TO R4

☐ 2. ONLY ONE NON-WHITE GROUP MENTIONED AT R3

☐ 3. ALL OTHERS

R3b. Which do you feel best describes your race?

WHITE  BLACK  AMERICAN INDIAN  ASIAN  OTHER (SPECIFY):  REFUSED

GO TO R4

R3c. How close do you feel in your ideas and feelings about things to (GROUP NAMED IN R3b/R3) people—Would you say very close, fairly close, not too close, or not close at all?

1. VERY CLOSE  2. FAIRLY CLOSE  3. NOT TOO CLOSE  4. NOT CLOSE AT ALL

R4. In what state or foreign country was your natural father born?

____________________ STATE, OR COUNTRY IF NOT U.S.A.

R5. What is his last name?

____________________ FATHER’S LAST NAME

R6. In what state or foreign country was your natural mother born?

____________________ STATE, OR COUNTRY IF NOT U.S.A.

R7. How many of your grandparents were born outside the United States?

0. NONE  1. ONE  2. TWO  3. THREE  4. FOUR
R8. In what state or foreign country were You born?

STATE (OR COUNTRY IF NOT U.S.A.)

R9. INTERVIEWER CHECKPOINT

1. R BORN IN U.S.

2. ALL OTHERS

R10. How old were you when you came to live in the United States?

YEARS OLD

R11. And in what state or foreign country did you live the longest until you were 16 years old?

STATE (OR COUNTRY IF NOT U.S.A.)

R12. What is the month, day, and year of your birth?

MONTH / DAY / YEAR

R13. What is the highest grade of school or year of college you have completed?

GRADES OF SCHOOL

00 01 02 03 04 05 06 07 08 09 10 11 12

COLLEGE

13 14 15 16 17+

R13a. Did you get a high school diploma or pass a high school equivalency test?

1. YES  5. NO

R13b. Do you have a bachelor's degree?

1. YES  5. NO
R14. INTERVIEWER CHECKPOINT

SEE C1 (P. 8)

1. R IS CURRENTLY MARRIED

☐ 2. R IS CURRENTLY WIDOWED—>NEXT PAGE, R16

☐ 3. ALL OTHERS—>TURN TO P. 80, R23

R15. We also are interested in your (husband’s/wife’s) present work situation. Is (he/she) working for pay at the present time, looking for work, retired, or doing something else?

1. WORKING NOW;
   ON SICK LEAVE

2. TEMPORARILY
   LAID OFF WORK

4. RETIRED

3. LOOKING FOR WORK,
   UNEMPLOYED

5. PERMANENTLY DISABLED

6. KEEPING HOUSE

7. STUDENT

8. OTHER (SPECIFY):

R15a. Has (he/she) done any work for pay in the past 3 years?

1. YES 5. NO—>NEXT PAGE, R20

NEXT PAGE, R16
R16. What (is/was) your (husband’s/wife’s) main occupation?

R17. What kind of work (does/did) (he/she) do? What (are/were) (his/her) most important activities?

R18. What kind of business or industry (is/was) that in? What (do/did) they make or do when (he/she) (works/worked)?

R19. (Is/was) your (husband/wife) self-employed or (does/did) (he/she) work for a private employer or a municipal, county, state or federal government?

1. SELF-EMPLOYED  2. PRIVATE EMPLOYER  3. GOVERNMENT EMPLOYER

R20. What is the month, day, and year of your spouse’s birth?

/ / /

R21. In what state or foreign country was (he/she) born?

STATE (OR COUNTRY IF NOT USA)

R22. What (is/was) the highest grade of school or year of college your (husband/wife) (has/had) completed?

GRADY OF SCHOOL

13 14 15 16 17+

R22a. Did (he/she) get a high school diploma or pass a high school equivalency test?

1. YES  5. NO

R22b. (Does/Did) (he/she) have a bachelor’s degree?

1. YES  5. NO
R23. Do you own your own (home/apartment/farm), do you pay rent, or what?

1. OWNS OR IS BUYING

5. PAYS RENT

8. NEITHER OWNS NOR RENTS

GO TO R24

R23a. About how much rent do you pay per month?

$___________ PER MONTH

GO TO R24

R23b. Do you have a mortgage on this property?

1. YES: MORTGAGE,
   LAND CONTRACT,
   OR DEED OF TRUST

5. NO --GO TO R23d

R23c. How much are your monthly mortgage payments?

$___________ PER MONTH

R23d. If you sold this (house/apartment/farm) today, how much money would you get for it (after paying off the mortgage)?

$___________ AMOUNT R WOULD RECEIVE

R24. About how much (do you/does your family) spend on food in an average week? Please include food stamps and money spent on eating out.

$___________ PER WEEK
Suppose you needed money quickly, and you cashed in all of your (and your spouse’s) checking and savings accounts, and any stocks and bonds, and real estate (other than your principal home). If you added up what you got, about how much would this amount to? Just give me the letter from the list.

| A. LESS THAN $10,000 (01) | E. $100,000-199,999 (05) |
| B. $10,000-19,999 (02) | F. $200,000-499,999 (06) |
| C. $20,000-49,999 (03) | G. $500,000 OR MORE (07) |
| D. $50,000-99,999 (04) |

In order to get an accurate picture of your (and your spouse’s) income, it helps to know the different sources of income you (and your spouse) may have had during the past 12 months. We do not need detailed amounts, just whether you (and your spouse) have any income from the sources I will mention.

R26a. In the last 12 months, did you (and your spouse) have any income from rent, interest, dividends, money market funds or trust funds?  

| 1. YES | 5. NO |

R26b. Social Security?  

| 1. YES | 5. NO |

R26c. Veterans benefits or other retirement pay, pensions or annuities?  

| 1. YES | 5. NO |

R26d. Unemployment compensation, disability or workers’ compensation in the last 12 months?  

| 1. YES | 5. NO |

R26e. Alimony or child support?  

| 1. YES | 5. NO |

R26f. SS1 (Supplemental Security Income)?  

| 1. YES | 5. NO |

R26g. ADC OR AFDC (Aid to Dependent Children) or other welfare or Public Assistance?  

| 1. YES | 5. NO |

R26h. Food Stamps?  

| 1. YES | 5. NO |

R26j. Any other sources of income?  

| 1. YES | 5. NO |
R27. (RB, P. 41) If we include the income from all these sources, and add all of your (and your spouse's) earnings, what would your total income before taxes for the last 12 months add up to? Just give me the letter from the list on this page.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A. LESS THAN $5,000 (01)</td>
<td>E. $20,000-24,999 (05)</td>
<td>J. $60,000-79,999 (09)</td>
</tr>
<tr>
<td>B. $5,000-9,999 (02)</td>
<td>F. $25,000-29,999 (06)</td>
<td>K. $80,000+ (10)</td>
</tr>
<tr>
<td>C. $10,000-14,999 (03)</td>
<td>G. $30,000-39,999 (07)</td>
<td></td>
</tr>
<tr>
<td>D. $15,000-19,999 (04)</td>
<td>H. $40,000-59,999 (08)</td>
<td></td>
</tr>
</tbody>
</table>

R28. (RB, STILL ON P. 41) How much of this total did you yourself receive? (Just give me the letter.)

ALL  LETTER  NOTHING

R29. We have talked about past and current activities, satisfactions and problems in many areas of your life. Looking to the future, what are some of the things that you especially look forward to in the next few years?

R30. This completes the interview; thank you for answering these questions. Is there anything that you would like to add, any comments you would like to make?

R31. EXACT TIME NOW: _______

TURN TO COVER SHEET, RECONTACT INFORMATION
INTERVIEWER

REMEMBER TO COMPLETE THE OBSERVATION SECTION OF THIS INTERVIEW BEFORE SENDING IT IN TO THE FIELD OFFICE.
SECTIONS X: INTERVIEWER'S OBSERVATIONS

xl. Respondent’s sex is:

| 1. MALE | 2. FEMALE |

xr. Rate respondent’s appearance/attractiveness

| 1. VERY ATTRACTIVE OR BEAUTIFUL | 2. ATTRACTIVE (ABOVE AVERAGE FOR AGE AND SEX) | 3. AVERAGE ATTRACTION FOR AGE AND SEX |
| 4. UNATTRACTIVE (BELOW AVERAGE FOR AGE AND SEX) | 5. VERY UNATTRACTIVE |

x3. Was spouse or adult child present during respondent’s interview?

| 1. YES, MOST OF IW | 2. YES, ABOUT HALF OF IW | 3. YES, BUT INFREQUENT | 5. NO --GO TO X4 |

X3a. How much influence or input did spouse/adult child seem to have on R’ answers?

2. Listened, but did not actively interfere.
3. Paid little attention.
4. No influence

x4. Who else was present during the interview?

| 1. NO ONE | 2. OTHER ADULTS | 3. CHILD(REN) UNDER 18 | 4. ADULTS AND CHILDREN UNDER 18 |

GO TO X5

X4a. How much distraction was caused by (this person/these people)?

| 1. CONSTANT | 2. SOME | 3. LITTLE | 4. NONE |

x5. How was R’s understanding of the questions?

| 1. EXCELLENT | 2. GOOD | 3. FAIR | 4. POOR |

x6. How was R’s cooperation during the interview?

| 1. EXCELLENT | 2. GOOD | 3. FAIR | 4. POOR |
X7. How tiring did the interview seem to be to R?

1. VERY TIRING
2. A LITTLE TIRING
3. NOT TIRING

X8. How much did R seem to enjoy the interview?

1. A GREAT DEAL
2. QUITE A BIT
3. SOME
4. A LITTLE
5. NOT AT ALL

X9. How much difficulty did R have remembering things that you asked (him/her) about?

1. NO DIFFICULTY
2. A LITTLE DIFFICULTY
3. SOME DIFFICULTY
4. A LOT OF DIFFICULTY
5. COULD NOT DO AT ALL

X10. How much difficulty did R have hearing YOU when YOU talked to (him/her)?

1. NO DIFFICULTY
2. A LITTLE DIFFICULTY
3. SOME DIFFICULTY
4. A LOT OF DIFFICULTY
5. COULD NOT DO AT ALL

GO TO X11

X10a. INTERVIEWER: DID YOU OBSERVE ANY OF THE FOLLOWING? CHECK ALL THAT APPLY:

A. R required frequent repetition of questions.
B. R appeared strained by leaning forward and/or watching Your lips very carefully.
C. R failed to react to your questions and comments, if R did not watch your lips.
D. None of the above

X11. How much difficulty did R have seeing things up close (like the SAB)?

1. NO DIFFICULTY
2. A LITTLE DIFFICULTY
3. SOME DIFFICULTY
4. A LOT OF DIFFICULTY
5. COULD NOT DO AT ALL

X12. How much difficulty did R seem to have walking around in the home?

1. NO DIFFICULTY
2. A LITTLE DIFFICULTY
3. SOME DIFFICULTY
4. A LOT OF DIFFICULTY
5. COULD NOT DO AT ALL

X13. How would you rate R's health?

1. EXCELLENT
2. GOOD
3. FAIR
4. POOR
5. GRAVELY OR TERMINALLY ILL
X14. **(IF R IS MARRIED/LIVING WITH PARTNER:) Based on your limited exposure, how would you rate the health of R's (spouse/partner)?**

<table>
<thead>
<tr>
<th>1. EXCELLENT</th>
<th>2. GOOD</th>
<th>3. FAIR</th>
<th>4. POOR</th>
<th>5. GRAVELY OR TERMINALLY ILL</th>
</tr>
</thead>
</table>

X15. On the basis of your experience with R in the interview, how comfortable would you say R is in dealing with other people?

<table>
<thead>
<tr>
<th>1. NOT AT ALL</th>
<th>2. SLIGHTLY</th>
<th>3. SOMEWHAT</th>
<th>4. FAIRLY</th>
<th>5. VERY</th>
</tr>
</thead>
</table>

X16. On the basis of your experience with R in this interview, how skilled would you say R is in handling or dealing with other people?

<table>
<thead>
<tr>
<th>1. NOT AT ALL</th>
<th>2. SLIGHTLY</th>
<th>3. SOMEWHAT</th>
<th>4. FAIRLY</th>
<th>5. VERY</th>
</tr>
</thead>
</table>

X17. How self-confident did R seem to be?

<table>
<thead>
<tr>
<th>1. VERY</th>
<th>2. QUITE</th>
<th>3. SOME</th>
<th>4. A LITTLE</th>
<th>5. NOT</th>
</tr>
</thead>
</table>

X18. How depressed did R seem to be?

<table>
<thead>
<tr>
<th>1. VERY</th>
<th>2. QUITE</th>
<th>3. SOME</th>
<th>4. A LITTLE</th>
<th>5. NOT</th>
</tr>
</thead>
</table>

X19. How was R's ability to express him/herself?

<table>
<thead>
<tr>
<th>1. EXCELLENT</th>
<th>2. GOOD</th>
<th>3. FAIR</th>
<th>4. POOR</th>
</tr>
</thead>
</table>

X20. Does R have a pet or did you observe evidence of a pet (e.g., food, cat hair)?

<table>
<thead>
<tr>
<th>1. YES</th>
<th>5. NO</th>
<th>(--\rightarrow) GO TO X21</th>
</tr>
</thead>
</table>

X20a. What type of pet(s)?
X21. Type of structure in which respondent lives:

| 01. TRAILER | 020 DETACHED SINGLE FAMILY HOUSE |
| 030 TWO FAMILY HOUSE | 04. HOUSE CONVERTED TO APARTMENTS |
| 05. ROW HOUSE OR TOWNHOUSE (3 OR MORE UNITS, 3 STORES OR LESS) | 06. APARTMENT HOUSE (5 OR MORE UNITS, 3 STORES OR LESS) |
| 07. APARTMENT HOUSE (5 OR MORE UNITS, 3 STORES OR LESS) | 08. APARTMENT IN A PARTLY COMMERCIAL STRUCTURE |

97. OTHER (SPECIFY): ________________________________

X22. (IF R LIVES IN APARTMENT:) R’s dwelling/housing unit is located on the ____ floor.

X23. Number of stories in the structure, not counting basement or attic:

| ONE | TWO | THREE | MORE THAN THREE (SPECIFY): |

X24. Is there a ramp leading from sidewalk to the first floor of (R’s dwelling/entrance of R’s building)?

| 1. YES | 5. NO |

X25. Is R’s building/community/area especially designed for older people - is it retirement housing or an adult only community?

| 1. YES | 5. NO | 8. DK |

X26. How far is it from R’s home (building) to the nearest home or other building (on either side or across the road)?

| 1. LESS THAN 15 FEET (less than 1 car length) | 2. 15-29 FEET (1 to 2 car lengths) | 3. 30-40 FEET (2 to 3 car lengths) |
| 4. 50-99 FEET (3 to 6 car lengths) | 5. MORE THAN 100 FEET (more than 6 car lengths) |

X27. How clean was the interior of the dwelling unit?

| 1. VERY CLEAN | 2. CLEAN | 3. SO-SO | 4. NOT VERY CLEAN | 5. DIRTY |
X28. **NEIGHBORHOOD** : Look at the structures on R's block and check as many boxes as apply.

- **A. VACANT LAND**
- **B. TRAILER**
- **C. DETACHED SINGLE FAMILY HOUSE**
- **D. TWO FAMILY HOUSE**
- **E. HOUSE CONVERTED TO APARTMENTS**
- **F. ROW HOUSE (3 OR MORE UNITS IN AN ATTACHED ROW)**
- **G. APARTMENT HOUSE (5 OR MORE UNITS IN AN ATTACHED ROW)**
- **H. APARTMENT HOUSE (5 OR MORE UNITS, 3 STORIES OR LESS)**
- **J. APARTMENT IN A PARTLY COMMERCIAL STRUCTURE**
- **K. COMMERCIAL OR INDUSTRIAL STRUCTURE**
- **L. PARK**
- **M. SCHOOL OR OTHER GOVERNMENTAL BUILDING**
- **N. VACANT BUILDING**
- **P. OTHER (SPECIFY):**

X29. How well kept are the structures in the neighborhood?

1. **VERY WELL**
2. **MIXED--COULD USE A PAINT JOB**
3. **POORLY--NEED PAINTING AND MINOR REPAIRS**
4. **VERY POORLY--DILAPIDATED**

X30. How well kept and cared for are the yards and/or sidewalks in front of the structures in the neighborhood?

1. **VERY WELL**
2. **FAIRLY WELL**
3. **POORLY**
4. **VERY POORLY**
X31. THUMBNAIL SKETCH