

National Study of Caregiving

Section HE [HEALTH]

Sequence: 6

HE1 **che1health** C1 HE1 GENERAL HEALTH

QUESTION TEXT:

Would you say that in general, your health is excellent, very good, good, fair, or poor?

CODES

| | |
|---|------------|
| 1 | EXCELLENT |
| 2 | VERY GOOD |
| 3 | GOOD |
| 4 | FAIR |
| 5 | POOR |
| | REFUSED |
| | DON'T KNOW |

| | | |
|------------|---------------------|----------------------------------|
| HE2 | che1hrtattck | C1 HE2A HAD HEART ATTACK |
| | che1othheart | C1 HE2B HAD HEART DISEASE |
| | che1highbld | C1 HE2C HAD HIGH BLOOD PRESS |
| | che1arthrits | C1 HE2D HAD ARTHRITIS |
| | che1osteopr | C1 HE2E HAD OSTEOPOROSIS |
| | che1diabetes | C1 HE2F HAD DIABETES |
| | che1lungdis | C1 HE2G HAD LUNG DISEASE |
| | che1cancer | C1 HE2H HAD CANCER |
| | che1seeing | C1 HE2I HAD SERIOUS DIFF SEEING |
| | che1hearing | C1 HE2J HAD SERIOUS DIFF HEARING |

DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display.
If at HE2a, do not display question text in brackets.
Otherwise, display question text in brackets.

QUESTION TEXT:

{{}} I will read a list of some diseases that a doctor may have said you have. Please tell me if a doctor ever told you that you had... {{}}

{variable text [a-j]}

RESPONSE [1] a. a heart attack or myocardial infarction?
RESPONSE [2] b. any other heart disease including angina or congestive heart failure?
RESPONSE [3] c. high blood pressure or hypertension?
RESPONSE [4] d. arthritis?
RESPONSE [5] e. osteoporosis or thinning of the bones?
RESPONSE [6] f. diabetes?
RESPONSE [7] g. lung disease, such as emphysema, asthma, or chronic bronchitis?
RESPONSE [8] h. cancer?
RESPONSE [9] i. serious difficulty seeing?
RESPONSE [10] j. serious difficulty hearing?

CODES

| | |
|---|-----|
| 1 | YES |
|---|-----|

2 NO
 REFUSED
 DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Array the responses and variable text columns in the panel.
 Display 'variable text' in the a-j sequence until all rows have been displayed.

| | | |
|---|----------------|-------------|
| BOX HE3 | BOX HE3 | NOT ON FILE |
| If HE2h = 1 (YES, CANCER), go to HE3. Otherwise, go to HE4PRE. | | |

| | | |
|------------|--------------------|----------------------------------|
| HE3 | che1ncrskin | C1 HE3 CANCER TYPE SKIN CANCER |
| | che1ncrbrst | C1 HE3 CANCER TYPE BREAST CANCER |
| | che1ncrpros | C1 HE3 CANCER TYPE PROSTATE CNCR |
| | che1ncroth | C1 HE3 CANCER TYPE OTHER TYPE |

DISPLAY INSTRUCTIONS:

If pre-loaded CG SEX= 2 (MALE), display "prostate cancer," and response code 3.

QUESTION TEXT:

Was that skin cancer, breast cancer, {prostate cancer,} or some other type?
 SELECT ALL THAT APPLY

| CODES | Code All That Apply | |
|--------------|--------------------------------|--------|
| 1 | SKIN CANCER | HE4PRE |
| 2 | BREAST CANCER | HE4PRE |
| 3 | {PROSTATE CANCER} | HE4PRE |
| 4 | OTHER TYPE OF CANCER (SPECIFY) | |
| | REFUSED | HE4PRE |
| | DON'T KNOW | HE4PRE |

| | | |
|-------------|-------------|-------------|
| HE3a | HE3a | NOT ON FILE |
|-------------|-------------|-------------|

QUESTION TEXT:

SPECIFY TYPE OF CANCER
 IF NEEDED: What type of cancer was that?

ENTER TEXT

Length 50
 REFUSED
 DON'T KNOW

| | | |
|---------------|---------------|-------------|
| HE4PRE | HE4PRE | NOT ON FILE |
|---------------|---------------|-------------|

QUESTION TEXT:

Now I have a few questions about other health problems.
 PRESS 1 AND ENTER TO CONTINUE

| | | |
|------------|-----------------|---------------------------|
| HE4 | che1pain | C1 HE4 PAIN IN LAST MONTH |
|------------|-----------------|---------------------------|

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, have you been bothered by pain?

CODES

| | | |
|---|------------|-----|
| 1 | YES | |
| 2 | NO | HE6 |
| | REFUSED | HE6 |
| | DON'T KNOW | HE6 |

HE5

che1painlmt

C1 HE5 PAIN OFT LIMITED

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, how often has pain limited your activities? Would you say every day, most days, some days, rarely, or never?

CODES

| | | |
|---|------------|--|
| 1 | EVERY DAY | |
| 2 | MOST DAYS | |
| 3 | SOME DAYS | |
| 4 | RARELY | |
| 5 | NEVER | |
| | REFUSED | |
| | DON'T KNOW | |

HE6

che1brethprb

C1 HE6 BREATHING PROBLEMS

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, did you have any breathing problems, including shortness of breath or difficulty breathing?

CODES

| | | |
|---|------------|-----|
| 1 | YES | |
| 2 | NO | HE8 |
| | REFUSED | HE8 |
| | DON'T KNOW | HE8 |

HE7

che1brethlmt

C1 HE7 BREATHING OFT LIMITED

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, how often did your breathing problems limit your activities? Would you say every day, most days, some days, rarely, or never?

CODES

| | | |
|---|-----------|--|
| 1 | EVERY DAY | |
| 2 | MOST DAYS | |
| 3 | SOME DAYS | |
| 4 | RARELY | |
| 5 | NEVER | |
| | REFUSED | |

DON'T KNOW

HE8

che1armstr

C1 HE8 LIMITED STRENGTH IN ARMS

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, did you have limited strength or movement in your shoulders, arms, or hands?

CODES

| | | |
|---|------------|------|
| 1 | YES | |
| 2 | NO | HE10 |
| | REFUSED | HE10 |
| | DON'T KNOW | HE10 |

HE9

che1armlmt

C1 HE9 ARM STRENGTH OFT LIMITED

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, how often did this problem with your shoulders, arms or hands limit your activities?

[Would you say every day, most days, some days, rarely, or never?]

CODES

| | | |
|---|------------|--|
| 1 | EVERY DAY | |
| 2 | MOST DAYS | |
| 3 | SOME DAYS | |
| 4 | RARELY | |
| 5 | NEVER | |
| | REFUSED | |
| | DON'T KNOW | |

HE10

che1legstr

C1 HE10 LIMITED STRENGTH IN LEGS

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, did you have limited strength in your hips, legs, knees, or feet?

CODES

| | | |
|---|------------|------|
| 1 | YES | |
| 2 | NO | HE12 |
| | REFUSED | HE12 |
| | DON'T KNOW | HE12 |

HE11

che1leglmt

C1 HE11 LEG STRENGTH OFT LIMITED

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, how often did this problem with your hips, legs, knees, or feet limit your activities?

[Would you say every day, most days, some days, rarely, or never?]

CODES

| | |
|---|------------|
| 1 | EVERY DAY |
| 2 | MOST DAYS |
| 3 | SOME DAYS |
| 4 | RARELY |
| 5 | NEVER |
| | REFUSED |
| | DON'T KNOW |

HE12**che1lowenrgy**

C1 HE12 LOW ENERGY IN LAST MONTH

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, did you have low energy or were you easily exhausted?

CODES

| | | |
|---|------------|------|
| 1 | YES | |
| 2 | NO | HE14 |
| | REFUSED | HE14 |
| | DON'T KNOW | HE14 |

HE13**che1enrgylmt**

C1 HE13 ENERGY OFT LIMITED

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, how often did your low energy or exhaustion limit your activities?

[Would you say every day, most days, some days, rarely, or never?]

CODES

| | |
|---|------------|
| 1 | EVERY DAY |
| 2 | MOST DAYS |
| 3 | SOME DAYS |
| 4 | RARELY |
| 5 | NEVER |
| | REFUSED |
| | DON'T KNOW |

HE14**che1sleeptrb**

C1 HE14 TROUBL FALLNG BACK ASLEP

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, on nights when you woke up before you wanted to, how often did you have trouble falling back asleep?

[Would you say every day, most days, some days, rarely, or never?]

CODES

| | |
|---|-------------|
| 1 | EVERY NIGHT |
| 2 | MOST NIGHTS |
| 3 | SOME NIGHTS |

- 4 RARELY
- 5 NEVER
- REFUSED
- DON'T KNOW

BOX HE15

BOX HE15

NOT ON FILE

If preloaded INHOUSELHOLD flag = 1 for Caregiver, go to HE15.

Otherwise, go to HE16.

HE15

che1sleepint

C1 HE15 INTERRUPTED SLEEP

DISPLAY INSTRUCTIONS:

Display "In the last month" in underlined text.

QUESTION TEXT:

In the last month, how often did helping {SP} cause your sleep to be interrupted?

[Would you say every day, most days, some days, rarely, or never?]

CODES

- 1 EVERY NIGHT
- 2 MOST NIGHTS
- 3 SOME NIGHTS
- 4 RARELY
- 5 NEVER
- REFUSED
- DON'T KNOW

HE16

che1weight

C1 HE16 WEIGHT IN POUNDS

QUESTION TEXT:

How much do you currently weigh?

ENTER WEIGHT IN POUNDS

ENTER NUMBER

- Range 65 to 600
- Soft Range 90 to 300
- REFUSED
- DON'T KNOW

HE17a

che1heightft

C1 HE17A HEIGHT IN FEET

QUESTION TEXT:

How tall are you?

ENTER FEET

ENTER NUMBER

- Range 3 to 7
- Soft Range 4 to 6
- REFUSED HE18
- DON'T KNOW HE18

HE17b

che1heightin

C1 HE17B HEIGHT INCHES

QUESTION TEXT:

[How tall are you?]

ENTER INCHES

ENTER NUMBER

Range 0 to 11
REFUSED
DON'T KNOW

HE18

che1lost10lb

C1 HE18 IN YR LOST 10 POUNDS

QUESTION TEXT:

Have you lost 10 or more pounds in the last 12 months?

CODES

| | | |
|---|------------|------|
| 1 | YES | |
| 2 | NO | HE19 |
| | REFUSED | HE19 |
| | DON'T KNOW | HE19 |

HE18a

che1try2lose

C1 HE18A TRYING TO LOSE WEIGHT

QUESTION TEXT:

Were you trying to lose weight?

CODES

| | |
|---|------------|
| 1 | YES |
| 2 | NO |
| | REFUSED |
| | DON'T KNOW |

HE19

che1moodcher

C1 HE19A CG FELT CHEERFUL

che1moodpcfl

C1 HE19B CG FELT CALM PEACEFUL

che1moodfull

C1 HE19C CG FELT FULL OF LIFE

che1moodbord

C1 HE19D CG FELT BORED

che1moodlone

C1 HE19E CG FELT LONELY

che1moodupst

C1 H319F CG FELT UPSET

DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display.
If at HE19a, do not display question text in brackets.
Otherwise, display question text in brackets.
Display "the last month" in underlined text.

QUESTION TEXT:

{[}] Thinking about the last month, how often did you feel... {]}

{variable text [a-f]}

RESPONSE [1] a. cheerful?
 RESPONSE [2] b. calm and peaceful?
 RESPONSE [3] c. full of life?
 RESPONSE [4] d. bored?
 RESPONSE [5] e. lonely?
 RESPONSE [6] f. upset?

{[] Would you say every day, most days, some days, rarely, or never?[]}

CODES

- 1 EVERY DAY
- 2 MOST DAYS
- 3 SOME DAYS
- 4 RARELY
- 5 NEVER
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Array the responses and variable text columns in the panel.
Display 'variable text' in the a-f sequence until all rows have been displayed.

HE20

che1fltltin

C1 HE20A CG FELT LITTLE INTERST

che1flttdown

C1 HE20B CG FELT DOWN DEPRESSED

che1fltnervs

C1 HE20C CG FELT NERVOUS ANXIOUS

che1fltwworry

C1 HE20D CG FELT UNABLE2STP WRRY

DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display.
If at HE20a, do not display question text in brackets.
Otherwise, display question text in brackets.
Display "the last month" in underlined text.

QUESTION TEXT:

{[] Over the last month, how often have you... []}

{variable text [a-d]}

RESPONSE [1] a. had little interest or pleasure in doing things?

RESPONSE [2] b. felt down, depressed, or hopeless?

RESPONSE [3] c. felt nervous, anxious, or on edge?

RESPONSE [4] d. been unable to stop or control worrying?

{[] Would you say not at all, several days, more than half the days, or nearly every day?[]}

CODES

- 1 NOT AT ALL
- 2 SEVERAL DAYS
- 3 MORE THAN HALF THE DAYS
- 4 NEARLY EVERY DAY
- REFUSED
- DON'T KNOW

PROGRAMMER INSTRUCTIONS:

Array the responses and variable text columns in the panel.
Display 'variable text' in the a-d sequence until all rows have been displayed.

HE21

che1lifemng

C1 HE21A LIFE HAS MEANING PURPOS

che1feelconf

C1 HE21B CG FEELS CONFIDENT

che1gaveup

C1 HE21C CG GAVEUP IMPROVNG LIFE

che1lifegood

C1 HE21D CG LIKES LIVING SITUATN

che1lifelone

C1 HE21E CG FEELS LONELY

che1easychng
che1rcvrqick

C1 HE21F CG ADJUSTS CHANG EASILY

C1 HE21G CG RECOVERS QUICKLY

DISPLAY INSTRUCTIONS:

Use "Same Question Stem" display.
If at HE21a, do not display question text in brackets.
Otherwise, display question text in brackets.

QUESTION TEXT:

{[]} Now I'm going to read a few statements.

Think about yourself, and after each statement, please tell me whether you agree strongly, agree somewhat, disagree somewhat, or disagree strongly. {}

{variable text [a-g]}

RESPONSE [1] a. My life has meaning and purpose.
RESPONSE [2] b. In general, I feel confident and good about myself.
RESPONSE [3] c. I gave up trying to improve my life a long time ago.
RESPONSE [4] d. I like my living situation very much.
RESPONSE [5] e. I often feel lonely because I have few close friends.
RESPONSE [6] f. I have an easy time adjusting to changes.
RESPONSE [7] g. I get over (recover from) illness and hardship quickly.

CODES

| | | |
|---|-------------------|------------|
| 1 | AGREE STRONGLY | Section HD |
| 2 | AGREE SOMEWHAT | Section HD |
| 3 | DISAGREE SOMEWHAT | Section HD |
| 4 | DISAGREE STRONGLY | Section HD |
| | REFUSED | Section HD |
| | DON'TKNOW | Section HD |

PROGRAMMER INSTRUCTIONS:

Array the responses and variable text columns in the panel.
Display 'variable text' in the a-g sequence until all rows have been displayed.
