



Model Disability Survey (MDS)

SURVEY MANUAL

World Health Organization 2017

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PART 1: INTRODUCTION

OVERVIEW

Introduction

The World Health Organization's Model Disability Survey (MDS) Manual is a tool to help implement the MDS in countries and to improve the quality of the interview process. This manual is intended to provide practical information about the survey instruments and their use during interviews.

Purpose

This manual is to be used as a training tool for interviewers when administering the questionnaire.

Intended audience

The manual is intended for all parties responsible for implementing the Model Disability Survey and using the resulting data. The various parties include a wide range of people from interviewers, field staff, supervisors and principal investigator(s), laboratory and data entry technicians and statisticians, to public health officials in the Ministry of Health and/or any health institutions.

Guide to using the manual

This manual has been written in eight parts. The first three parts cover background information about the Model Disability Survey, questionnaire conventions, specific roles and responsibilities including an editing guide and advice for interviewers.

Parts four, five and six are the specific question by question (QxQ) guides of the following two MDS questionnaires:

- 1. Household (Part 4);
- 2. Individual (Part 5);
- 3. Proxy Individual (Part 6)

Each part is introduced with an overview and a short table of contents to help readers find specific topics. This also enables individual parts to be easily removed from the manual and used as in-the-field reference.

In this module

This module contains the following topics:

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MDS QUESTIONNAIRE

Introduction

The MDS questionnaire consists of the follow instrument contains multiple modules addres and health in general populations:

- Household Questionnaire
- Individual Questionnaire
- Proxy Questionnaire

In addition, there are consent forms for infor

Household Questionnaire

The table below lists each of the modules inc Questionnaire.

Module	Title
0000	COVERSHEET
0100	SAMPLING INFORMATION
0200	CONTACT RECORD
1000	HOUSEHOLD ROSTER

Individual Questionnaire

The table below lists each of the modules inc

Module	Title
0000	CONTACT RECORD
0100	ELIGIBILITY
1000	SOCIO-DEMOGRAPHIC CHARACT
2000	WORK HISTORY AND BENEFITS
3000A	ENVIRONMENTAL FACTORS
4000	FUNCTIONING
5000	HEALTH CONDITION
3000B	PERSONAL ASSISTANCE, ASSIST
6000	HEALTH CARE UTILISATION
7000	WELL-BEING
8000	EMPOWERMENT
9000	INTERVIEWER OBSERVATIONS

Proxy Questionnaire

The table below lists each of the modules inc

Module	Title
0000	CONTACT RECORD
0100	ELIGIBILITY
0110	PROXY CONSENT FORM
1000	SOCIO-DEMOGRAPHIC CHARACT
2000	WORK HISTORY AND BENEFITS
3000A	ENVIRONMENTAL FACTORS
4000	FUNCTIONING
5000	HEALTH CONDITION
3000B	PERSONAL ASSISTANCE, ASSIST
6000	HEALTH CARE UTILISATION
7000	WELL-BEING
8000	EMPOWERMENT
9000	INTERVIEWER OBSERVATIONS

Target groups

The Household and Individual Questionnaires 18 years and older from different educational Supervisors will instruct interviewers about th selected households and the targeted respond

Literacy

Respondents do not need to be able to read age, maturity, and cognition, as well as the provided support of the provided suppo

MDS Survey Manual

Duration of interviews

An interview is expected to last on average 1 longer depending on respondents' compreher with language difficulties, limited education, suffer from poor health, may take longer to c

6

ABOUT MDS

Introduction

The WHO Multi-Country Surveys team and their external consultants developed the WHO Model Disability Survey (MDS) as a data collection platform to collect comprehensive, comparable and relevant disability information of adult populations to monitor the United Nations Convention on the Rights of Persons with Disabilities (CRPD).

Basis of MDS

The motivation for the Model Disability Survey project of the World Health Organisation and the World Bank arose from the recognition, clearly enunciated in the 2012 joint Report on Disability, that there is a worldwide need to collect comprehensive, comparable and relevant disability information that countries can use with confidence. In addition, the CRPD mandates that ratifying States Parties "collect appropriate information, including statistical and research data, to enable them to formulate and implement policies to give effect to the present Convention".

The development of the Model Disability Survey is grounded in the choice to evolve beyond the traditional disability data collection strategy of defining a population of individuals who are labelled as 'disabled' in terms of the health conditions or body dysfunctions they have, and then probe the difficulties they have as a consequence. The Model Disability Survey asks people – not previously identified in terms of the health conditions – what they do, or do not do, in their daily lives. These kinds of questions concern how people actually function in multiple domains given the environmental barriers and facilitators that constitute their real life situation.

Purpose

The purpose of the MDS is to collect data about all dimensions of disability – information about impairments, activity limitations, participation restrictions, and the environmental factors that facilitate or hinder full participation – are essential to understand how disability plays out in people's lives. It is necessary to examine the entirety of the disability experience in order to understand the impact of disability on people's lives and determine the appropriate response. In the scope of the MDS a metric of disability will be developed to allow for:

- (i) the collection of comprehensive and relevant information that helps countries construct a complete picture of disability with particular relevance to disability policy
- (ii) direct and reliable international comparisons of disability data and
- (ii) national and global monitoring of the implementation of the CRPD.

MDS and other studies

In developing the MDS WHO carried out following steps:

- An extensive search was used to identify disability and population health surveys from countries around the world and a subset of surveys for subsequent analysis were identified.
- A qualitative content analysis of the questions of those surveys was performed by mapping them to the International Classification of Functioning Disability and Health (ICF). The information from the two first steps is available at http://disabilitysurvey.checkdesign.de/
- Quantitative analysis of altogether 10 surveys, such as Health 2000 in Finland or ENDISC-CIF in Chile, was carried out to identify questions that address the entire spectrum of disability, distinguish capacity and performance, the impact of environmental factors, and are reliable and valid.

Pre-testing

A series of cognitive testing and pilot implementation exercises of the MDS questionnaire were carried out in 2013 and 2014 with over 500 respondents in four countries. Summary results and data will be available for registered users at: http://www.who.int/disabilities/data/mds/en/

MDS QUESTIONNAIRE

Introduction

The MDS questionnaire consists of the following three main instruments. Each instrument contains multiple modules addressing different aspects of disability and health in general populations:

Household Questionnaire

- Individual Questionnaire
- Proxy Questionnaire

In addition, there are consent forms for informants and/or respondents.

Household Questionnaire

The table below lists each of the modules included in the Household Ouestionnaire.

Module	Title
0000	COVERSHEET
0100	SAMPLING INFORMATION
0200	CONTACT RECORD
1000	HOUSEHOLD ROSTER

Individual Questionnaire

The table below lists each of the modules included in the Individual Questionnaire.

Module	Title
0000	CONTACT RECORD
0100	ELIGIBILITY
1000	SOCIO-DEMOGRAPHIC CHARACTERISTICS
2000	WORK HISTORY AND BENEFITS
3000A	ENVIRONMENTAL FACTORS
4000	FUNCTIONING
5000	HEALTH CONDITION
3000B	PERSONAL ASSISTANCE, ASSISTIVE DEVICES AND FACILITATORS
6000	HEALTH CARE UTILISATION
7000	WELL-BEING
8000	EMPOWERMENT
9000	INTERVIEWER OBSERVATIONS

Proxy Questionnaire

The table below lists each of the modules included in the Proxy Questionnaire.

Module	Title
0000	CONTACT RECORD
0100	ELIGIBILITY
0110	PROXY CONSENT FORM
1000	SOCIO-DEMOGRAPHIC CHARACTERISTICS
2000	WORK HISTORY AND BENEFITS
3000A	ENVIRONMENTAL FACTORS
4000	FUNCTIONING
5000	HEALTH CONDITION
3000B	PERSONAL ASSISTANCE, ASSISTIVE DEVICES AND FACILITATORS
6000	HEALTH CARE UTILISATION
7000	WELL-BEING
8000	EMPOWERMENT
9000	INTERVIEWER OBSERVATIONS

Target groups

The Household and Individual Questionnaires are to be administered to adults aged 18 years and older from different educational and cultural backgrounds. Supervisors will instruct interviewers about the type of interview to be conducted in selected households and the targeted respondent.

Literacy

Respondents do not need to be able to read and write. However, depending on their age, maturity, and cognition, as well as the place where they come from, some questions or concepts may be more difficult to understand than others. SHOWCARD (written prompts) will be provided to respondents as a memory aid.

Duration of interviews

An interview is expected to last on average 120 to 150 minutes but may take longer depending on respondents' comprehension and literacy levels. Respondents with language difficulties, limited education, those who are very talkative or who suffer from poor health, may take longer to complete the interview.

Privacy

The preferred condition for interviewing respondents is in private, with no other member of the household present. In some situations this may be difficult. If total privacy is not possible, the respondent may have to be interviewed outside the house or where the respondent feels comfortable discussing matters which may be sensitive.

If the respondent wishes to have someone with them during the interview, these requests should be considered and noted in module 9000.

PROCESS OVERVIEW

Introduction For a MDS study to be effective, the whole process needs to be properly planned and organized.

Key stages, tasks and timeframes

The total timeframe to conduct a MDS study, from training the trainers to releasing the study data into the public domain is approximately nine to ten months.

PART 2: ROLES AND RESPONSIBILITIES

OVERVIEW

Introduction

There are a number of key roles involved in a MDS study; however, this manual focuses only on the roles required for administering the survey.

In this part

This part covers the following roles.

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INTERVIEWERS

Introduction

The interviewers are all those who have been trained to administer the MDS survey in the field.

Core roles

The core roles and responsibilities of an interviewer include:

Role	Description
1	Physically locating and approaching sampled households in specified
	areas.
2	Introducing MDS to the sampled households and getting household
	member participation and informed consent.
3	Recording household member details
4	Asking the questions in the survey, clarifying any confusion and
	answering queries respondents may have.
5	Setting the pace of the interview, keeping the respondent focused and interested and making the interview atmosphere comfortable and
	pleasant at all times.
6	Recording respondents' answers and editing completed questionnaires.
7	Checking all forms before handing to supervisor.
8	Reporting any difficulties to supervisor.

Skills and attributes

Interviewers should have the following general skills and attributes:

- good oral and written communication skills
- friendly manner and patience
- good attention to detail
- clean and tidy appearance.

HOUSEHOLD INFORMANT, INDIVIDUAL RESPONDENT AND PROXY RESPONDENT

Introduction

Households are randomly selected to participate in the MDS survey. Household informants are selected by the interviewer and individual respondents are the eligible persons selected through one of the survey methods. Proxy respondents are people identified to respond on behalf of selected individual respondents whom are unable to respond for themselves.

Roles

The table below lists each of the roles and their desired characteristics.

Role	Attributes
Household informant	 Most knowledgeable person in the household about the household members and characteristics, household's health status, transfers and financial status, including income and expenditures. This person will often be the main income provider, the head of the household, who can be formally defined as "the individual in the family setting who provides actual support and maintenance to one or more individuals who are related to him or her through adoption, blood, or marriage". The household informant may be different from the person selected to complete the Individual Questionnaire.
Individual respondent	Household member who is above the age of 18 and who was randomly selected during the Household Questionnaire (using the Kish Table method) to complete the Individual Questionnaire.
Proxy respondent	A person who knows the respondent very well and is able to accurately answer questions about the respondent's environment, functioning, health and well-being on their behalf.

Requirements

The principle requirement of informants, respondents, and proxy respondents is to cooperate with the interviewer and follow instructions. They should also:

- Listen to questions attentively without interrupting;
- Think through the answers before answering, and try to give an accurate and complete responses as much as possible; and,
- Ask for clarifications whenever a question seems unclear to him and ask the interviewer to repeat or rephrase it.

Voluntary role

Respondents can refuse to answer any question and can stop the interview at any time. Interviewers should attempt to continue but not force a person to continue.

SUPERVISOR

Introduction

The supervisor is responsible for monitoring the progress and quality of the data collection, and ensuring that interviewers are performed to a high and consistent standard.

Supervisors are the interface between data collection and the principal investigators. Supervisors may also be involved in monitoring the data entry process, laboratory analyses and quality control processes in every stage of the survey work.

Core roles

The core roles of a Supervisor include:

Role	Description	
1	Recruiting and training interviewers.	
2	Handling the logistics of the survey, including: - obtaining and managing household lists and maps of survey areas - informing local authorities about the survey - coordinating household information for follow-up interviews - collecting GPS information - obtaining necessary venues, supplies and equipment.	
3	Supervising interview teams and the interview process including checking that: - geocoding is conducted correctly - contact procedures are correctly followed - interviews are conducted appropriately - standardized interviewing techniques are practiced.	
4	Checking completed questionnaires and ensuring data quality.	
5	Checking proxy interviews.	
6	Managing human resource performance and issues.	
7	Providing feedback and progress updates to key MDS survey stakeholders.	
8	Checking and supervising data entry.	

Role	Description
9	Transferring cleaned data on a regular basis to the agreed location for
	data entry.

Skills and attributes

Supervisor's should have the following skills and attributes:

- · Ability to work with teams and motivate people.
- Be well organized and efficient in planning MDS survey schedules.
- Able to mobilize multiple teams over a short period to complete data collection.
- Experienced in population based surveys.
- Good understanding of the philosophy and objectives of MDS.

FIELD EDITOR

Introduction

The Field Editor is responsible for checking all completed questionnaires at the end of each day before submitting them for data entry.

Core roles

The Field Editor may be the same person as the Supervisor. The core roles of a Field Editor are listed in the table below.

Role	Description
1	Checking interview forms for completeness and ensuring that interviewers have filled in key details such as: - contact information; - relevant dates; - age and sex of respondent; and, - have followed skip patterns correctly.
2	Verifying that all open ended questions have been filled in legibly, that interviewer observations are completed and any other comments in the margins can be read.
3	Checking for any missing information and determining why the information is missing.
4	Re-contacting respondents and filling in missing information as appropriate.
5	Reporting issues and concerns to the Supervisor or other MDS stakeholders.
6	Conducting retest interviews.
7	Preparing completed questionnaires for review by supervisor and data entry clerks.
8	Preparing blood samples for storage.

Skills and attributes

Field Editors should have the following general skills and attributes:

- good attention to detail
- be well organized and efficient in checking questionnaires.

PRINCIPAL INVESTIGATOR

Introduction

The Principal Investigator (PI) is the key person responsible for planning and implementing the MDS programme. The PI should be familiar with the entire manual and understand the whole MDS process.

Level of authority

The PI should have sufficient authority to:

- lead the whole process of MDS implementation;
- negotiate and obtain resources for the study; and,
- contribute to the activities that will arise from the data gathered by MDS.

Core roles

PI's may or may not be the same person as the supervisor and fulfil some or all of the following roles:

Role	Description
1	Recruiting and training interviewers.
2	Handling the logistics of the survey, including: - obtaining and managing household lists and maps of survey areas; - organizing information needed for conducting follow-up interviews; - informing local authorities about the survey; and, - obtaining necessary venues, supplies and equipment.

3	Supervising interview teams and the interview process including checking that: - geocoding is conducted correctly; - contact procedures are correctly followed; - interviews are conducted appropriately; and, - standardized interviewing techniques are practiced.
4	Checking completed questionnaires and ensuring data quality.
5	Managing human resource performance and issues.
6	Monitoring progress and providing feedback and progress updates to MDS stakeholders.
7	Checking and supervising data entry.
8	Transmitting cleaned data to WHO on a regular basis.
9	Submitting technical and financial reports to WHO.

Skills and attributes

PI's should have the following skills and attributes:

- Ability to work with teams and motivate people
- Be well organized and efficient in planning MDS survey schedules
- Able to mobilize teams over a short period to complete data collection.
- Experienced in health population based surveys.
- Good understanding of the philosophy and objectives of MDS.

WORLD HEALTH ORGANIZATION (WHO)

Introduction

The World Health Organization (WHO) Geneva Office works closely with Principal Investigators, WHO Regional and Country Offices and is responsible for coordinating MDS studies and providing technical and financial support.

Core roles

The core roles of the WHO Geneva include:

Role	Description
1	Facilitating the MDS survey process through coordinating the efforts of Regional Offices and other programmes.
2	Developing partnerships, disseminating data, and ensuring capacity building and political commitment.
3	Mobilizing resources, funding and training.
4	Identifying countries that are ready to implement the MDS.
5	Liaising with countries to identify Interviewers
6	Providing overall guidance on planning and coordinating MDS in their region.
7	Coordinating training workshops for Principal Investigators support for local training workshops.
Role	Description
8	Coordinating technical support to sites.
9	Coordinating government and agency activities at the regional and international levels.
10	Developing a regional strategy in disability and health and promoting use of MDS data.
11	Coordinating data management, release and publication of data and results.

PART 3: INTERVIEWER'S GUIDE

OVERVIEW

Introduction

This part provides generic guidelines for interviewers, from how to approach selected households to conducting the interviews and recording the responses.

Intended audience

This part is designed for use by those fulfilling the following roles:

- Interviewers
- Supervisors
- Field Editors

In this part

This part covers the following topics.

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TRAINING OVERVIEW

Introduction

The quality of MDS results and their usefulness for within- and across-country comparisons largely depends on the quality of the interviews.

What you will learn

In this training, you will learn how to:

- be part of an interview team
- interview respondents
- use and complete the MDS questionnaires.

Learning outcomes

The main learning outcome is to conduct consistent and effective interviews and record accurate data.

Specific learning outcomes for each module are provided in the table below.

Module	Learning outcome
Preparation	Knowing what materials are required to conduct MDS interviews.
Approaching selected households	Able to introduce yourself well.
Obtaining consent	Understand the consent process and need for high levels of participation.
General interview skills, probing and feedback	Able to conduct interviews consistently, accurately and efficiently using standardized survey instruments and devices.
Questionnaire conventions	 Identify and use interviewer instructions correctly throughout the questionnaire. Recognize typographical conventions and what they mean. Know how to use visual aids. Know how to use devices to measure health.
Recording information	Accurate, clear and complete questionnaires.

PREPARATION

Introduction

Before conducting your interviews, you will need to prepare all the necessary paper work and supplies, know what tasks you need to perform to complete the study and know the questionnaire contents thoroughly.

What you will need

The forms and resources you may need for data collection are listed in the following checklist:

Form	✓
Name tags for interviewers.	
Map or list of households in sample and/or GPS device.	
Pencil, eraser and clip board.	
Notification of WHO MDS study visit (Information letter (see Part 8)).	
Informed consent for the household informant.	
Informed consent for individual respondents.	
Informed consent for proxy respondent.	
MDS Questionnaires (HHQ, IQ, Proxy IQ).	
Interview Manual (including Appendices and Kish Tables).	

Team work

You will be assigned to work with a team of other interviewers in a specified area for the duration of data collection.

Each team will work with a Supervisor and/or Field Editor. The Supervisor is responsible for:

- providing answers and feedback to the interviewers;
- tracking your progress;
- identifying households for interview and completing needed information for the follow-up interviews;
- ensuring questionnaires are accurately completed;
- monitoring time and,
- handling any difficult issues you encounter and ensuring your safety.

The Field Editor (if relevant) will:

- conduct quality checks;
- review questionnaires from each completed interview; and,
- work with you to finalize the questionnaire and get them ready for data entry.

Interviewer summary task list

An overview of the tasks of an interviewer are included in the following checklist:

Task	Description	✓
1	Locate and approach selected households.	
2	Brief household members on the purpose of the survey and gain their support.	
3	Document reason(s) for non-response, if household members refuse interview. Attempt to do Task 4 (below) before final refusal.	
4	Record names of all eligible respondents on the household roster.	
5	Identify a suitable informant to complete the Household Questionnaire.	
6	Conduct the Household interview and record results.	
7	Select randomly an eligible household member aged above 18	
8	Conduct the Individual interview and record results, or Proxy respondent questionnaire if the respondent is unable to answer the questionnaire directly.	
9	Make a final check of the completed questionnaires before turning over to the Supervisor or Field Editor.	
10	Report any difficulties to Supervisor.	

Note: Each of these tasks is described in more detail on the following pages.

APPROACHING SELECTED HOUSEHOLDS AND RESPONDENTS

Introduction

For the MDS study, you will need to physically visit individual households to conduct the survey.

Contact process

The table below briefly describes each stage in the contact process.

Stage	Description
1	Obtaining appointment lists from Supervisors. This should include households with associated addresses or cluster areas (and map or GPS device if necessary) to locate the selected households.
2	Physically approaching the dwelling and making contact (knock on door, ring bell, yell out, etc.).
3	Recording on the contact record form if no one is home. Revisit is required at another time.
4	Introducing yourself and exchanging greetings.
5	Explaining the reason for your visit and purpose of the MDS study.
6	Explaining the interview process and what participation involves and the timeframe.
7	Recording each person living in the dwelling in the household roster.
8	Selecting a suitable household informant to answer the Household Questionnaire.
9	Obtaining informed consent from the household informant.

Note: Each of these stages is described in more detail below.

Contact attempts

Actual contact attempts must be made, either by knocking on the door of the household, calling out, or talking to people you encounter near the household. Simply walking by and thinking that no one is at home cannot be counted as an attempted contact.

Use the following table to help with different situations when you attempt to make contact.

If	Then
Someone is at home	Speak to the first adult you encounter in the household.
No one answers	Try again or ask neighbour if they know where the person might be.
No one is at home	Leave the WHO MDS information letter with date of anticipated return and record details in the contact record form.
Household members are not available at the time of the first visit.	Make at least 2 additional visits to obtain an interview. Choose times that are different – early morning or late afternoon.

Recording household details

Record the date and time of the visit on the contact record form.

Introducing yourself

Make sure your name tag is attached and is clearly visible. Introduce yourself and explain the reason for your visit as follows:

My name is _____ and I work for _____. The reason I am contacting you is because we are conducting a survey on health in **[country]** and I would like to ask you a number of questions.

Let me assure you that whatever information you tell us is completely confidential and will only be used for research purposes.

Explaining purpose of the survey

Explain the reasons for this study along the following lines. The MDS survey data will be used to:

- Understand the kinds of problems adults experience in life and which may arise because of their health or because of the environment in which they live.
- Identify barriers that people with health conditions or impairments may

- experience in day to day life.
- Identify unmet needs that could relieve problems experienced by people with health conditions or impairments.

Note: If the contact person is unwilling to cooperate at this stage - see page 14 for guidelines on how to persuade reluctant people to participate.

Explaining collection method

Explain that you will be collecting information from a number of households and individual respondents aged 18 years and older throughout the country. Explain how the data will be collected, as appropriate, that is through questions about health, day to day activities and well-being.

Explaining survey process

Use the table below to help run through the whole survey process to the respondents:

Stage	Description
1	Explaining the purpose of the study and its importance.
2	Responding to any questions.
3	Completing the informed consent form for the Household informant.
4	Asking some questions about the household and each of the household members.
5	Selecting an appropriate respondent from the household.
6	Determining if the selected respondent is able and capable of responding.
7	Obtaining individual consent or proxy respondent consent.
8	Asking the respondent questions about their health, work history, problems in day-to-day life, wellbeing and etc.
9	Completing the Individual Questionnaire (with selected individual or with proxy respondent) and thanking the household for their cooperation.

Duration of interview

Explain that the survey will take approximately 1 $\frac{1}{2}$ to 2 hours to complete.

Other items to explain to respondents

Use the table below to help explain to each respondent other items of interest, such as the benefits, their rights and how confidentiality will be handled.

In terms of	Explain to each respondent that
Community benefits	The results of this study will be used to develop public health programmes to improve the health and well-being of everyone.
Individual rights	The informant or respondent may: - decline to take part in the study; - stop the interview at any time; or - refuse to answer some questions.
Confidentiality	 They must provide their name and contact information in case follow-up is necessary. Participation and the data collected will be completely confidential. The information provided in this interview will be put together with all the other interviews to improve our understanding of health in this country. No personally identifiable information will be revealed to anyone outside the survey team. Their name and their household or village will not be used in any report of the study results.

PERSUADING RELUCTANT RESPONDENTS TO PARTICIPATE

Introduction

You may encounter some people that express hesitancy or reservation, or refuse to participate. Some of these people may have been contacted before. With the right approach you should be able to persuade all potential respondents to participate.

Approach

In general, be pleasant, good-natured and professional and most respondents will co-operate.

Respondents must not be forced to respond to the whole interview or to any part of the survey process. However, the more refusals that are made, the less representative the survey is of the whole population.

No prior contact

If a person who is being contacted for the first time is reluctant to participate in the study, and you are not sure why (for instance, the person says, "I'm not interested"), then pick an issue (only takes a short time, importance of the study, use of results to improve health care in your country) and begin to discuss it. Once you understand the person's real objections, you can address them.

Prior contact

For people that have been contacted before, and still refuse to participate, follow the steps below to prepare for your visit.

Step	Action
1	Review any notes from prior contacts and obtain as much background
	information as possible.
2	Prepare notes about what you plan to say.
3	Address the respondent's concerns, but be careful not to get into an
	extremely long discussion about these concerns.
4	Ask if you could at least ask questions about who lives in the
	household - and attempt to complete the Household Roster (Module
	1000).

Guidelines for persuading respondents

Follow the steps below for some tips on how to address respondents concerns, then briefly focus on the positive aspects of participating in the survey and eventually persuading them to participate.

Step	Action	
2	Identify yourself and your organization and explain that: - you are not trying to sell anything - you are not doing market research - all information will be held in the strictest of confidence. Focus on the positive aspects of the survey such as: - the study is important - most people enjoy the experience - time spent in an interview passes quickly.	
	If	Then
	the contact person becomes defensive	 Show patience and understanding. Provide empathy and understanding of his/her viewpoint, by, saying something like, "I can understand that" or "You certainly have the right to feel that way."
	you may have visited at a bad time	Tell the person that you will come back another time - try again later.
3	 Explain why we can't just contact someone else by stressing: the uniqueness of this opportunity how the respondent has been selected to participate in something that is important a chance that is being offered to only a small number of people in the area. Note: An explanation about sampling is not always a useful strategy. 	
4	If you think you may get a "No" - attempt to leave and suggest coming back later - before you get a possible or absolute "No".	

OBTAINING CONSENT

Introduction

Both the household informant and the selected individual respondent (or proxy respondent) must provide both verbal and written consent before taking part in the survey.

Obtain

For those who will take part in the study, follow the steps below to obtain

consent

informed consent.

Step	Action	
1	Select the appropriate consent form for each person taking part as follows: - Household informant - Individual respondent	
	- Proxy respondent	
	Note: See Part 8 for copies of consent to	
2	For each person taking part, use two co follows: One for the informant/respondent/p One for the MDS study central office	roxy respondent to keep
3	Allow the informant/respondent/proxy r form or, in case of poor eyesight or illite	respondent to read the consent
4	Ensure that the respondent understands involves before asking them to sign the	
5	Use the table below to help with the foll If informant/respondent/proxy	Then
	respondent	
	Answers "No" to any question in the consent form	Ask whether they understand the questions.
	Does not understand the question	Rephrase the question.
	Agrees to the interview but does not wish to sign	Ask witness to sign or you as interviewer sign the form - and indicate reason.
	Unable to sign for example if respondent is illiterate or has severe vision impairment.	Get the respondent to mark the box, and you as interviewer sign the form.
	Understands the question and the answer is still "No"	Circle 'No' in the consent form*.
	*This means the respondent will not pa include him/her in the household roster	
6	Get the respondent to sign both copies.	
7	As interviewer, you must sign as a witness.	
8	Thank him/her for agreeing to take part in the survey.	

GENERAL INTERVIEW SKILLS

Introduction

The MDS interview is about finding out and recording a list of facts and behaviours relating to selected eligible respondents.

The respondent needs to feel comfortable about the survey and can refuse to be interviewed as participation is voluntary. Your interview should therefore be as natural as possible and conducted politely, like a normal conversation.

Behaviour and tact

The table below provides guidelines on appropriate behaviour during an interview:

Behaviour	Guidelines
Respect confidentiality	Maintain the confidentiality of all information you collect.
Interviewing older people	With increasing age, sensory deficits may occur, including decreased vision and hearing. - Speak clearly and with sufficiently loud volume. - Make sure there is sufficient light when you use the SHOWCARDS for respondents to see the images clearly. - Give respondent's sufficient time to respond and prompt if needed. - Account for age differences between interviewer and respondent and any issues around this.
Respect respondents time	You are asking respondents for their time so be polite and prepared to explain.

Behaviour	Guidelines
Tact	If you feel that a person is not ready to assist you, do not force them but offer to come back later.
Friendly disposition	Act as though you expect to receive friendly co- operation and behave accordingly.
Body language	This is very culture specific - for some, good body language is to maintain good eye contact and adopt appropriate body language (for instance, sit straight, show interest, no yawning).
Pace of interview	 Don't rush the interview. Allow the respondent enough time to understand and answer a question. If pressured, a respondent may answer with anything that crosses their mind.
Patience	Be patient and polite at all times during the interview.
Acceptance	 No matter what the responses to questions, do not be judgemental of a respondent's lifestyle. Expression of any criticism may lead to refusing or concealing important information.
Appreciation	Thank them for their help and cooperation.

Asking questions

The table below provides guidelines on asking questions in an interview:

Topic	Guidelines
Issues relating to chronic, non-communicable diseases and their risk factors	Do not discuss or comment on issues relating to chronic, non-communicable diseases and their risk factors. Respondents may not give correct answers to the questions but give the answers they think the interviewer is looking for.
Right or wrong answers	Point out that there are no right or wrong answers and that the interview is not a test.
Biased answers	Ask your questions according to guidelines given in the Q by Q guide to avoid biased answers and ensure comparability of data.
Reading response options	 Response categories in normal font (including bold) should all be read. READING RESPONSE CATEGORIES IN SMALL CAPS IS OPTIONAL. If a response category repeats often, it may be sufficient to read it to the informant/respondent the first few times, but after not needed. Reading is encouraged if it improves the accuracy of responses. Do not read response categories in italics to the respondent, for example, 'Don't know', 'Not Applicable', or 'Refused'.
Reading questions	Questions should be read: - as they are written in the text - slowly and clearly emphasizing key words in bold or underlined - in a pleasant voice that conveys interest and professionalism, and - entirely to make sure the respondent has heard it completely. Do not change the wording or order of the
Making assumptions	questions. Don't make assumptions about the respondents' answers with comments such as "I know this probably doesn't apply to you, but". This practice may prevent accurate and unbiased information.

Providing clarification MDS Survey Manual

You may need to provide clarification when the respondent:
- Is unable to answer the question asked.

- Does not seem to understand the question and gives an inappropriate reply.
- Does not seem to have heard the question.
- Is taking a long time to answer the guestion and hesitates.
- Asks about a specific part of the question to be repeated (it is acceptable to repeat only that part).
- Asks for one option to be repeated (read all options again).
- Asks for one term to be clarified (refer to the explanations provided in the question by question guide).

Interruptions

Interruptions may occur during an interview. If they become too long or too many, suggest returning at another time to complete the interview. Take care that even if interrupted or delayed, you should remain patient and polite at all times.

Language issues

Be aware that if you use 'interpreters of convenience' (such as members of the respondent's family or household, the village headman, or domestic staff), you run the risk of collecting inaccurate information.

If you don't get sufficient co-operation due to a language barrier, report this to your supervisor.

PROBING

Introduction

You will need to probe further to get an appropriate response when the respondent:

- Seems to understand the question but gives an inappropriate response
- Does not seem to understand what is asked
- Misinterprets the question
- Cannot make up his or her mind
- Digresses from the topic or gives irrelevant information
- Needs to expand on what has been said to help you understand or clarify the response
- Gives incomplete information or an answer is unclear
- Says that he or she doesn't know the answer

Common responses that need probing

The table below lists some common responses that may need further probing:

If the respondent replies	Then	
"I don't know." (DK)	Repeat the question.	
"I still don't know."	Probe once before recording (DK or '888 Don't know'), for example, ask "Could you give me your best guess/estimate?".	
"I still don't know."	This may mean the respondent: - Is taking time to think and wants to gain time - Does not want to answer because of personal reasons - In fact does not know or has no opinion	
"Not applicable." (N/A)	 Ask him/her why the question does not apply to him/her. Write down N/A if it is clear that the question is irrelevant. Code is '98'. 	

Notes:

- 'Don't know', 'Don't remember', 'N/A' and 'refused' should be used only as an absolute last resort. See page 22 for more information.
- If 'Don't know', 'Not applicable' options are not available, write them in the right margin next to the question row.

Probing techniques

The table below provides a few techniques to use when probing further:

Technique	Guidelines	
Repeat the question	The respondent may come up with the right answer if	
	he/she hears the question a second time.	

Technique	Guidelines
Pause	This gives the respondent time to collect his/her thoughts and expand on his/her answer.
Repeat the respondent's reply	This is often a very effective way of having the respondent reflect on the answer he/she has just given.
Use neutral probes	Avoid biased responses and probes. Never give the impression that you approve or disapprove what the respondent says, or that their answer is right or wrong. Instead, if you want more information, ask "Anything else?", or "Could you tell me more about?"

PROVIDING FEEDBACK

Introduction

It is important that the interviewer tell the respondent when s/he is doing well, throughout the interview process. You may need or choose to do this quite often. It is also a way of maintaining control over the interview. This will help maintain motivation and encourage good performance.

When feedback is needed

Feedback is needed when the respondent:

- Needs to focus and get his/her attention back on the question.
- Is digressing from the topic.
- Is making inappropriate or personal enquiries.
- Is performing well: listens attentively and answers appropriately.

Feedback techniques

Some useful feedback techniques include:

- Vary the type of feedback by using different phrases.
- Pause briefly after feedback.
- Give verbal as well as non-verbal feedback, such as a smile or a nod.
- Use short feedback sentences for short responses and longer feedback sentences for longer responses.
- Note down some of the things the respondent says. This will motivate the respondent because he/she will feels that what he/she is saying is important.

Suggested phrases

Some suggested phases for a variety of respondent responses are provided in the table below.

If the respondent	Suggested phrases or response
 Makes inappropriate enquiries Asks for advice or information Wants to know about the interviewer's personal experiences. 	-"In this interview, we are really interested in learning about <u>your</u> experiences." -"When we finish, let us talk about that." -"We can discuss that later."
Digresses from the questions by giving lengthy responses or unnecessary information.	-"I have many more questions to ask so we should really move on." -"If you would like to talk more about that, perhaps we can do it at the end of the interview."
Gives inappropriate responses or feels like conversing.	Silence can be quite effective in this case.

Acknowledging respondent's performance

Feedback must always be neutral and you should acknowledge the respondent's performance by using appropriate feedback sentences such as those suggested in the table below.

То	Respond with
Acknowledge responses to	- "Thank you." / "Thanks."
close-ended questions	- "I see."
	- "All right".
	- "Okay."

То	Respond with		
Reinforce respondent motivation	- "That is certainly useful/helpful		
and attention on a long series of	information."		
questions, open-ended	- "It is useful to get your ideas on this."		
questions, or questions that are	- "I see, that's helpful to know."		
difficult for the respondent	- "That can be difficult to remember/answer."		
Acknowledge that what the	- Let me get that down.		
respondent has said is important	 Let me make sure I have got that right. 		
and worth recording.	(repeat answer)		
	- Let me go over what you have just told		
	me.		

Gestures and tone of voice

In addition to listening to what the respondent is saying, it is useful to pay attention to the gestures and tone of voice because they can often give a better indication of what the respondent is trying to say if their verbal answer is confusing or not clear.

For example, the respondent's anger or frustration may not come through verbally but may be communicated non-verbally.

QUESTIONNAIRE CONVENTIONS

Introduction

Standard conventions have been used throughout the questionnaire. Each of these is explained on the pages below.

Recording time

Record the time at the beginning and time at the end of each and every module marked, including those identified in the household roster. Record the time using 4 digits, for example **09:22**, using the following international conventions.

00:00	Midnight	08:00	8 AM	16:00	4 PM
01:00	1 AM	09:00	9 AM	17:00	5 PM
02:00	2 AM	10:00	10 AM	18:00	6 PM
03:00	3 AM	11:00	11 AM	19:00	7 PM
04:00	4 AM	12:00	12PM, noon, mid-day	20 : 00	8 PM
05:00	5 AM	13:00	1 PM	21:00	9 PM
06:00	6 AM	14:00	2 PM	22:00	10 PM
07:00	7 AM	15:00	3 PM	23:00	11 PM

Recording date

Dates are asked throughout the survey (for example, date of birth). You should use the format of day, month, year. For the first nine days or months - use 01, 02, 03, ..., 09. The format for months is: January = 01; February=02; March=03; April=04; May=05; June=06; July=07; August =08; September=09; October=10; November=11; December=12. For countries/cultures that use a Julian, Metonic or Persian calendar, please convert to the Gregorian calendar.

Introductory statements and questions

Introductory statements, questions and anything written in standard print (either in **bold** or not bold) must be read to the respondent. In the example below, the entire question should be read to the respondent.

	What is your mother tongue? By mother tongue, I mean the language
I1002	you learned first, the language that you can express yourself fully in, or
	voluntarily identify with.

Response categories

You should read out the response categories for questions with the same response categories (as shown in the example below) the first time (Note: SMALL CAPS TEXT). Then, depending on the respondent's reply, decide if it is necessary to continue to read out the response categories each time. If the respondent is having difficulties, you may need to use SHOWCARDS that list the response categories.

FUNCTIONING	1	2	3	4	5
	None		_		Extreme

FUNCTI	ONING	1 None	2	3	4	5 Extreme
I4001	How much of a problem is standing up from sitting down for you?	1	2	3	4	5
I4002	How much of a problem is standing for long periods such as 30 minutes for you?	1	2	3	4	5
I4003	How much of a problem is getting out of your home for you?	1	2	3	4	5

Interviewer instructions

Anything written in *italics* (*UPPERCASE* or *lowercase*, *bold* or not *bold*) is an interviewer instruction and should NOT be read aloud.

In the example below, the question should NOT be read to the respondent; it is an instruction to the interviewer only. Response categories in SMALL CAPITALS also indicate that they do not need to be read to the respondent.

	What is [NAME]'s relationship to the main income provider?
	01=SPOUSE
H1007	02=SON OR DAUGHTER
	03=SON-IN-LAW OR DAUGHTER-IN-LAW
	04=GRANDCHILD
	05=PARENT

Skips (.....→) 'go to' with questions

Skip instructions are shown usually in the far right column. Skipped questions must be left blank. An arrow (.....→) should be understood as "go to".

In the example below, if the respondent answers `3', `8' or `97', then go directly to H1021, skipping the question H1020. If the respondent answers `1' or `2', then proceed to the next question H1020.

H1019	Suppose you sold everything you have and used that money to pay off all debts you had. What would your financial situation be? Your best estimate is fine.	1 We would have money left over 2 We would still owe money 3 Our debts would just about equal assets 8 Don't know 97 Refused	If 3, 8 or 97, go to H1021
-------	---	--	--------------------------------------

Underlined type

Words that are <u>underlined</u> within questions are key words or phrases that need to be emphasized when read to the respondent.

In the example below, the "past 12 months" is underlined and should be emphasized to the respondent. The question is only interested in whether household members had any financial problems paying bills in the past 12 months.

H1021	In the past 12 months, did your household have any financial problems	1	(yes)
	paying bills, such as for electricity, central heating or phone?	5	(no)

Question leader...

Questions with a leader ("Compared with" or "How close is your relationship with") are to decrease repetition. You do not need to read the leader for every question.

relations which ye affairs, time wit me on a	m going to ask you questions about close ships. By a close relationship I mean one in ou are comfortable talking about personal can get help from, or enjoy spending leisure th. When answering these questions please tell a scale from 1 to 5 where 1 is very close and 5 t all close, how close is your relationship with	1 Very close	2 Quite close	3 To some extent close	4 Not very close	5 Not at all close
I3018	Spouse or partner	1	2	3	4	5
I3019	Family members	1	2	3	4	5
I3020	Friends and co-workers	1	2	3	4	5
I3021	Neighbours	1	2	3	4	5

'Other' entries

If the respondent indicates a response that is not listed, then the interviewer should record verbatim what the respondent says next to 'Other, specify' response option.

		What is the main reason you would like to work at present?	1 NEED THE INCOME
		The second manning about you mould mis to more at proposition	2 WANT TO OR NEED TO BE ACTIVE
	I2010	INTERVIEWER: only one answer allowed - read categories if	3 WANT TO FEEL USEFUL
			4 HELP MY FAMILY
		needed.	7 OTHER, SPECIFY:

Use of '-8', '88', '888', '97', '98' and '-9', '99', '999' response codes

For responses that are 'Don't know', 'Not applicable', 'Refused' and missing, the interviewer should use special codes for the Supervisor and Data Entry clerks. See guidelines below.

'Don't know' response

With some questions the respondent may not know the answer. In general 'Don't know' answers are NOT encouraged and should not be offered to the informant or respondent. If the respondent is having difficulty answering, you should probe or clarify the question. However, if the respondent is still not able to answer then mark the 'Don't know' option. Where a 'Don't know' option is not provided - manually write 'DK'. 'Don't know' should be coded as '-8', '88', '888' depending on the width of the field.

"Missing" response

See Editing Guide, page 134. To be coded as '-9', '9', '99', '999' depending on the question and width of the field.

'Not applicable' response

Some questions may not be applicable or relevant for the informant/respondent. For example, the respondent may never climb stairs. The response option 'Not applicable' is rarely included in the questionnaire, but if the interviewer needs to use it for a question, clearly write 'N/A'. Data entry clerk would enter this as '98', '998'...

'Refused' response

An informant or respondent may refuse to answer certain questions. The interviewer should attempt to determine the reason for the refusal, and attempt to probe and get an answer. Where this is not possible, the interviewer should circle '97', '997'... or write 'REFUSED' in the margin to the right of the question row.

Parentheses ()

Items in parentheses () contain examples to illustrate a point and are to be read to the respondent. Alternative examples that are culturally appropriate may be substituted.

In the example below, the words in the parentheses should be read to the respondent as an example of what the question is asking. You may need to use a SHOWCARD to assist the respondent with the response categories.

	Which are the assistive devices you need to help you	0	none orthopaedic footwear
	get around or for self-care?	2	artificial limb (leg/foot)
I3044	INTERVIEWER: Show SHOWCARD 003 and read	3	a cane or walking stick
15044	aloud the items in the list. More than one option can	4	crutches
	be selected. If the respondent has difficulties	5	a wheelchair
		6	a walker or a scooter
	answering, read aloud the items in the list.	7	braces

Brackets []

Items in brackets [] contain instructions to translators and interviewers:

As shown in the examples below, brackets indicate which information should be mentioned. In the case of question H1008, the name of the household member should be included. In the case of questions I4006 and I4041 country, specific examples should be added.

H1008	Is [NAME] a male or a female?
-------	-------------------------------

Is engaging in vigorous activities, such as **[add country specific examples]** a problem for

you?

Visual aids

Visual aids help respondents remember important information while answering questions and rating different items. They include:

- SHOWCARDS; and,
- lists of response options.

Allow enough time for respondents to examine the visual aids and think about their responses. Instructions are given throughout the questionnaire so you will know when to consider visual aids and how to use them.

TYPES OF QUESTIONS

Introduction

Different types of questions, response categories and choice options are used throughout the questionnaire, including:

- close-ended questions (spontaneous and non-spontaneous)
- open-ended questions
- categorical response choices
- numerical response choices.

Close-ended questions

There are two ways of getting responses for close-ended questions. These are:

- non-spontaneous
- spontaneous.

Nonspontaneous

With non-spontaneous close-ended questions, such as in the example below, you should read the question and each of the response categories the respondent should choose from.

	I will start with a question about your overall health, including your physical and	1 Very	2 Good	3 Moderate	4 Bad	5 Very bad	
15001	your mental health: In general, how would you rate your health today?	good					

Spontaneous

Spontaneous closed-ended questions are provided by answer choices in SMALL CAPITALS. You do not read out these answer options.

Read the question and when the respondent gives their answer, circle the most appropriate option from the list of response categories. Choose '9 Other' if the response does not match any of the pre-defined choices. If the respondent has difficulty choosing an option, probe for the best answer. See page 18 for details on probing techniques.

		1 HEALTH CONDITION OR DISABILITY
	What is the main reason you are not currently working?	2 STILL ENGAGED IN TRAINING
		3 PERSONAL FAMILY RESPONSIBILITIES
		4 COULD NOT FIND SUITABLE WORK
I2006		5 Do not know how or where to seek work
		6 DO NOT HAVE THE ECONOMIC NEED
		7 PARENTS OR SPOUSE DID NOT LET ME WORK
		8 No reason given
		9 OTHER

Open-ended

For open-ended questions, as shown in the example below, ask the question, and then record the answer given in the respondent's own words.

	In the last 12 months, for your main job, what has been your main occupation?	
I2012	INTERVIEWER: Write exactly what the respondent says - write in capital letters. For those who have stopped working, it should be the occupation for the most recent main job.	

Categorical choices

Where there is a list of categories to choose from, as in the example below, you should select the response category that best fits respondents answer.

Note: Clarification and probing might be needed.

	What is the highest level of education the main income provider completed?
	1. No formal education
	2. LESS THAN PRIMARY SCHOOL
H1014	3. PRIMARY SCHOOL COMPLETED
П1014	4. SECONDARY SCHOOL COMPLETED
	5. HIGH SCHOOL (OR EQUIVALENT) COMPLETED
	6. College/Pre-university/University completed
	7 POST GRADUATE DEGREE COMPLETED

Numerical choices

Where there is a need for numerical response, as in the example below, you will write numbers (one digit per box), such as age or years, height or weight.

If after probing the respondent cannot answer because they do not know, circle '888 *Don't know*'.

	How many years have you been separated, divorced or widowed?	□□ Number of years
I1012		888 Don't Know
	INTERVIEWER: if less than 1 year, enter "00"	

RECORDING INFORMATION

Introduction

All results that are recorded on the MDS questionnaire must be written as clearly as possible to avoid ambiguity and confusion when checking and entering the results.

Taking notes

Find a comfortable place for writing. Sit in front of the respondent or in a place where what you write cannot easily be seen by the respondent. It is better not to show the informant or respondent what you are writing or recording - and best to be as discrete as possible while documenting responses or taking notes. Attempt to record notes while the informant/respondent is talking, as appropriate. This will help reduce the interview time.

General requirements

Some general requirements for recording response information are as follows:

- Write clearly and legibly. (Interviewers preferably in blue pen, editors/supervisors in different colour ink).
- Write the response during the interview, while the respondent is talking.
- Record what is said, the way it is said verbatim.
- Do not erase any notes you make.
- If a question has been skipped by mistake, correct it.
- If an informant/respondent changes her/his response on one of the questions, use single line-out for old the response and record the new response.
- Record comments or explanations in brackets next to the corresponding question.
- Don't get too absorbed recording. Keep the respondent's interest by repeating the respondent's response aloud as you are writing.
- Reach a standard agreement on how to write numbers (mainly 1s and 7s).

Recording interviewer assessments

When possible, record your assessments about the respondent and questions directly into Interviewer Assessment modules as follows:

- Module 9000 of the Household Questionnaire
- Module 9000 of the Individual Questionnaire
- Module 9000 of the Individual Proxy Questionnaire

Different question types

Follow the guidelines in the table below to record responses to different question types.

Question type	Guidelines for recording responses	
Closed ended questions	Neatly circle the option. Include both the answer	
	and the number in one circle.	
Fill-in questions	Record the response in the box provided using CAPITAL LETTERS.	
Marginal notes	Record additional descriptions such as "if", "except" or "but" in the right margin.	

What not to record

Do not record the following responses:

- Justifications such as explanations to a closed-ended question. Digressions irrelevant to the question being asked.
- Hesitations, mumbling or feedback.

Handling issues

Use the table below to help with some common issues you may encounter.

If	Then
You are uncertain about a	Repeat the question and record the answer
response	exactly. Do not paraphrase a response.
You have missed a question	Go back and ask the question, make a note in the left margin that the question was asked out of sequence.
The respondent does not know and a 'Don't Know' is not	Write '888' or 'DK'
available in the response options.	
The respondent refuses to	Mark as '97' or 'REF'
answer a question	Note: Before accepting a refusal, explain the
	objective of the question to the respondent.
The question does not apply	Mark as '98' or 'N/A'
Missing data is not discovered until after the interview	If possible, re-contact the respondent and ask the question. Note in the margin that the question was asked out of sequence. If not possible, for example the survey team has moved on from the village, then write "Missing' in the left margin of the form. Code as '-9', '99', '999'

PART 4: GUIDE TO COMPLETING THE HOUSEHOLD QUESTIONNAIRE

OVERVIEW

Introduction

This guide provides background information and guidance for completing each

question in the Household Questionnaire.

Intended audience

This part is intended for those fulfilling the following roles:

InterviewerSupervisor

- Field Editor

Intended use

Use this guide in training, to prepare for the interviews, and as reference material during interviews if household informants request clarification about specific questions.

Interviewers and supervisors should refrain from offering their own interpretations.

In this part

This part covers the following modules from the Household Questionnaire:

Topic	See Page
0000 Coversheet	26
0100 Sampling Information	27
0200 Contact Record	28
1000 Household Roster	29

0000 COVERSHEET

Introduction

This module includes general information about the survey and guidance for completing this interview.

General guidelines

Revisit this page and update as you go through the interview and complete different modules, until a Supervisor's signature, indicating the data is cleaned, completed, and ready for data entry, is received.

H0001-H0008 The table below provides a guide to completing questions H0001 to H0008.

Question No.	Question	Guide for completion		
H0001 Research Centre Number		A 3-digit code for the Research Centre undertaking the survey. To be completed/provided by Supervisor.		
H0002 Household ID		Number that identifies the household. Supervisor and Primary Investigator will use a list of IDs generated by WHO and will provide these to the interviewers.		
H0003	Interviewer ID	All interviewers will be given a unique identification number. Use this ID for all interviews.		
H0004	Total number of calls/visits	 Document all attempted calls to contact a respondent. Make a minimum of 3 attempts to get an interview. Circle one answer only. Document reasons why attempt(s) to interview failed. 		
H0005	Date of final results	Date when interview, or final result if an interview was not conducted, actually took place.		
H0006	Final result code household	Enter here the result code selected in module 0200: Contact Record, item F.		
H0007	Final result code individual questionnaire	Enter here the result code selected in module 0000 of the individual questionnaire: Contact Record, item F.		
H0008	Date data editing completed	 Insert the day, month and year (dd/mm/yyyy) that editing was completed. Check all skip patterns and missing data are accounted for. 		
H0009 Code of supervisor		All supervisors will be given a unique identification number. Use this ID for all interviews.		
H0010	Signature of Supervisor	 Field Editor and/or Supervisor Sign and date on completion of editing the interview data. Indicates that the Field Editor and/or Supervisor have 		

Question No.	Question	Guide for completion	
		reviewed the interview (with Interviewer), cleaning is complete, and interview is ready for data entry.	
H0011	Data entry date	Date when data entry was completed.Insert day, month and year (dd/mm/yyyy).	

H0006 Final result codes

This refers to the final result code for the Household Questionnaire. This corresponds to Item E. of Module 0200: Contact Record - Household - whether or not the household informant accepted to do the interview and the reasons for non-interviews. Use the table below to select the appropriate code to document the final result.

Codes	Description	
01	Completed Interview (interview is accepted and conducted)	
02	Partial Interview (interview is partially completed and person will not be contacted anymore).	
03	Household contacted - initial refusal.	
04	Household contacted-uncertain about interview	
05	Resistance/refusal by household informant	
06	Final refusal by household informant	
07	Final refusal by other household member	
08	Unable to locate household or household informant	
09	No interview because informant is not eligible: less than 18, mentally unfit or too ill.	
10	Language barrier	
11	House is vacant or household occupants are elsewhere (seasonal vacancy, other residence)	
12	Unsafe or dangerous area or no access to informant	
13	Deceased informant	
14	Informant in institution (jail, hospital and not accessible)	

Office use only box

Depending on your country arrangements, further quality control information and checks (such as ID numbers for various members of the team) can be provided in an "office use only" double-line box for the:

- Supervisor
- Field Editor
- Office Editor
- Data Entry Operator (Keyed By).

SUPERVISOR	FIELD EDITOR	OFFICE EDITOR	KEYED BY
NAME	NAME		
DATE -	DATE		

0100 SAMPLING INFORMATION

Introduction This module covers all the sampling unit information and is to be completed by the Supervisor.

H0101a - The table below provides a guide to completing questions H0101a to H0104. **H0104**

Question No.	Question	Guide for completion
H0101a	Primary sampling unit (PSU) name	Write the name of the primary sampling unit taken from the Sampling Key Correspondence Table that was generated prior to the survey. For example if the PSU corresponds to 'county' and the respondent's household is in 'Riordan' county, write 'Riordan' for question H0101a.
H0101b	PSU Code	Write code for the primary sampling unit, corresponding to the PSU name reported in field H0101a. Obtain code from the Sampling Key Correspondence Table.
H0102a	Secondary sampling unit (SSU) name	 Write the name of the secondary sampling unit for the household/dwelling, taken from the Sampling Key Correspondence Table that was generated prior to the survey. This is likely to be the geographical area name that is the next smallest after the PSU.
H0102b	SSU code	Write the code for the secondary sampling unit, corresponding to the SSU name reported in H0102a. Obtain code from the Sampling Key Correspondence Table.
H0103a	Tertiary sampling unit (TSU) name	 Write the name of the tertiary sampling unit for the household/dwelling. This will be the geographical area name that is the next smallest after the SSU.
H0103b	TSU code	Write the code for the tertiary sampling unit, corresponding to the TSU name reported in H0103a. Obtain code from the Sampling Key Correspondence Table.
H0104	Setting	Write the name of the setting taken from the Sampling Key Correspondence Table that was generated prior to the survey. The setting may be: '1 = Urban' or '2 = Rural'. Note: If definitions for urban or rural are different from the definitions provided, you must define these categories and provide the definitions to WHO to allow for comparison of data between countries.

0200 CONTACT RECORD

Introduction

This module is very important for the survey - for both successful and unsuccessful interviews - to calculate an accurate response rate and to identify reasons for non-response. This information is essential for detecting potential biases in our sampling that could arise from selected households that refuse to be interviewed. It is to be filled out for each contact with a selected household.

Contact attempts

WHO recommends a minimum of three contact attempts. You must keep track of **all** contacts with households, even if the final result is no interview.

H0201-H0203

H0201 to H0203 are the columns that can be completed for each contact within a household. Complete the items in a column for each contact as you proceed with the contact. If you complete the full interview - the last item would be to enter '01' under H0201E to H0203E. Until you decide on a final result code, enter the following information for each contact attempt:

- A) Date;
- B) Time contact initiated;
- C) Interviewer identification (ID) number;
- D) Contact with (see explanation below); and,
- E) Household roster obtained.

`D. Contact with'

Once module 1000 is complete, you will know how to enter the final response category for `D'. Each option under item `D. Contact with' is explained in the table below.

Option	Refers to the person(s)
Option	Refers to the person(s)

1= Household informant	H0201 indicates who the household informant is. It is decided after going through the household roster and identifying all household members. This person is considered most knowledgeable about the household and household members.	
2= Other household member	This code would be used for a contact where the household informant is not available and the interviewer intends to return to the household. Or it could be used for a "refusal" that completes the household roster.	
3= No one	Use this code if the contact with the household resulted in no human contact.	

Final result code

At the end of the contact or interview process (either full or partial completion) you will be able to enter the 'E. Result code'.

1000 HOUSEHOLD ROSTER

Introduction

The Household Roster must be completed for all households selected randomly into the survey sample. If the household refuses to participate, the interviewer should attempt to at least complete the household roster. If they refuse all participation, including completion of the roster, then document in Module 0200 and go to next household.

The proper and complete listing and description of each person in the household is a critical component of the survey process.

Purpose

The purpose of the Household Roster is to:

- Create a list of household occupants from which a respondent will be randomly selected;
- Better understand the impact of the household members on household dynamics and individual health;
- Collect basic information required for estimating the non-response bias in the survey; and,
- Provide key information to characterize the household -- number of members and the number of children, the gender, age and relationship to the main income provider for every member, and the level of education and work situation of the income provider will be reported.
- Provide key information about the current number (prevalence) of persons in need for care and assistance because of health issues estimated for each household.

Non-response

All effort must be made to minimize non-response, and to interview as many people in the survey sample as possible. The two possible non-response scenarios are:

- The interviewer completes the household roster and the randomly chosen respondent refuses to participate.
- The interviewer is refused access to the household and is unable to fill in the household roster.

Notes:

- For guidance on how to persuade informants and/or respondents to participate, see page 14.
- In the second scenario ensure that at least all relevant questions in Module 0000 Coversheet are completed for the household.
- If available from census information, supervisors should record the number of adults (18 years of age or older), males and females in the household, and their respective ages.

Process

Responses for an individual household member each go into one column from H1006 to H1013. When that individual is completed, move to the next column for the next household member and repeat until information about all household members is collected.

Identifying the household informant

Questions H1001 to H1021 are to be answered by a member of the household who qualifies as the household informant. The household informant:

- Is usually the person who is most knowledgeable about the household's health status, employment, financial condition and expenditures. Usually, this is the main income provider. If two people are both main income providers, you just need to talk to the older one.
- Will need to provide consent as the household informant.
- May be different from the person selected for completing the Individual Questionnaire.

Note: If more than one person provides information on the Household Questionnaire, the person providing most of the information should be coded as the household informant.

Definition of main income provider

- The main income provider is considered the head of the household
- This person can be formally defined as "the individual in the family setting who provides actual support and maintenance to one or more individuals who are related to him or her through adoption, blood, or marriage".
- If two people are both main income providers, you just need to talk to the older one.

H1001 to H2024

The table below provides a guide to completing questions H1001 to H1021.

Question No.	Question	Guide for completion
H1001	What is the total number of people who live here?	 Record the number given by the informant. A member of the household is someone who usually stays in the household and who: sleeps there, shares meals, and has that address as primary place of residence; spends more than 6 months a year living there; usually stays there but is away for a short time (for instance, in an institution for a short time due to a health condition).
H1002	How many children under 18 live here?	Record the number given by the informant. Skip pattern: If no number go to H1006
H1003	Is this child / How many of these children are under age five?	Record the number given by the informant.
H1004	Is this child / How many of these children are between the ages of <u>five and twelve</u> ?	Record the number given by the informant.
H1005	Is this child / How many of these children are between the ages of thirteen and seventeen?	Record the number given by the informant.
H1006	First (given) name	 Write the First name (given name) for each member of the household in columns numbered 01 to 14. Start with the main income provider. Write clearly in CAPITALS. Check spelling and use margins for additional space. Carry over the initials for each household member to the columns on the following page.
H1007	What is [NAME] 's relationship to the main income provider?	Circle the code corresponding to the relationship (from the list of categories provided) of each household member to the household head.
H1008	Is [NAME] a male or a female?	Circle the appropriate number for each member of the household: 1=Male; 2=Female
H1009	How old is he/she?	 Record age in years at last birthday for each person in the household. If less than 1 year of age, enter '00' If unknown, estimate age based on SHOWCARD

Question No.	Question	Guide for completion
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		time line of major historical events in the country.
H1010	Does [NAME] need financial care or support, such as money to pay for bills, fees, food or medicines?	 People who need to be given care and assistance because of their health should be considered in this question. With financial care or support things such as money to pay for bills, fees, food or medicines are meant, among others. Record the appropriate response for each member of the household: 1=Yes; 5=No
H1011	Does [NAME] need physical care or support, such as help with eating, dressing, bathing, moving around the house or assistance outside the house such as for using transportation?	 People who need to be given care and assistance because of their health should be considered in this question. With physical care or support things such as help with eating, dressing, bathing, moving around the house or assistance outside the house such as for using transportation are meant, among others. Record the appropriate response for each member of the household: 1=Yes; 5=No
H1012	Does [NAME] need emotional care or support, such as comfort, advice or counselling?	 People who need to be given care and assistance because of their health should be considered in this question. With emotional care or support things such as comfort, advice or counselling are meant, among others. Record the appropriate response for each member of the household: 1=Yes; 5=No
H1013	Does [NAME] need support for health care, such as administering medicines, changing bandages or arranging for health care providers?	 People who need to be given care and assistance because of their health should be considered in this question. With support for health care things such as administering medicines, changing bandages or arranging for health care providers are meant. Record the appropriate response for each member of the household: 1=Yes; 5=No
H1014	What is the highest level of education the main income provider completed?	 Ask this question without reading the options to the respondent. If the response does not match an option, then read the options and ask the respondent to choose the best one. Record the appropriate number ONLY for the main income provider.
H1015	What is the current working situation of the main income provider of the household?	 Ask this question without reading the options to the respondent. If the response does not match an option, then read the options and ask the respondent to choose the best one. Record the appropriate number ONLY for the main income provider.
H1016	How many persons in the household work for a salary or wage?	Record the number given by the informant.
H1017	Taking into account all persons living here who work for a salary or wage: what is the total income after taxes on average per month?	 Record the amount reported by the informant. If the respondent has problems to answer, assure that their best estimate is fine.
H1018	How many persons are there in the household who are not working and actively looking for paid work?	Record the number given by the informant.
H1019	Suppose you sold everything you have and used that money to pay off	 Record the response selected by the informant. If the respondent has problems to answer, assure that their best estimate is fine.

Question No.	Question	Guide for completion
	all debts you had. What would your financial situation be? Your best estimate is fine.	Skip pattern: If 3, 8 or 97 go to H1021
H1020	How much? Again, your best estimate is fine. INTERVIEWER: Show SHOWCARD 001	Show the informant the SHOWCARD and record the selected response letter.
H1021	In the past 12 months, did your household have any financial problems paying bills, such as for electricity, central heating or phone?	 By financial problems paying bills things such as problems to pay for electricity, central heating or phone are meant, among others. Record the appropriate response: 1=Yes; 5=No

PART 5: GUIDE TO COMPLETING THE INDIVIDUAL QUESTIONNAIRE

OVERVIEW

Introduction

This guide provides background information and guidance for completing each module in the Individual Questionnaire.

Intended audience

This part is intended for those fulfilling the following roles:

- Interviewer
- Supervisor
- Field Editor

Intended use

Use this guide in training, to prepare for the interviews, and as reference material during interviews if respondents request clarification about specific questions. Interviewers and supervisors should refrain from offering their own interpretations.

In this part

This part covers the following modules from the Individual Questionnaire:

Topic	See Page
CONSENT FOR INDIVIDUAL RESPONDENT	33
CONTACT RECORD - INDIVIDUAL OR PROXY RESPONDENT	33
1000 SOCIO-DEMOGRAPHIC CHARACTERISTICS	35
2000 WORK HISTORY AND BENEFITS	37
3000A ENVIRONMENTAL FACTORS	43
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CONSENT FOR INDIVIDUAL RESPONDENT

Introduction

Before proceeding with the Individual Questionnaire, the selected respondent must first provide signed informed consent to participate.

Requirements

Informed consent means that the respondent must fully understand what their participation involves before signing the consent. The respondent can be given the consent form to read or you can read the consent form to the respondent. Time must be allowed for questions before requesting signature from the respondent.

Procedure

Follow the steps provided on page 15 above for full details on how to obtain consent and what forms to use.

CONTACT RECORD - INDIVIDUAL OR PROXY RESPONDENT (Modules 0000 and 0100)

Introduction

This module includes general information about the survey and helps to determine whether a respondent is able to participate directly or whether a proxy respondent should be sought.

Contact attempts

WHO recommends a minimum of three contact attempts. You must keep track of **all** contacts with selected individuals, even if the final result is no interview.

I0001A-I0003F

I0001 to I0003 are the columns that can be completed for each contact with the person selected for the individual interview. Complete the items in a column for each contact as you proceed with the contact. If you complete the full interview - the last item would be to enter '01' under I0001E to I0003E. Until you decide on a final result code, enter the following information for each contact attempt:

- A) Date:
- B) Time contact initiated;
- C) Interviewer identification (ID) number;
- D) Contact with (see explanation below); and,
- E) Individual interview obtained.

'D. Contact with'

Once module 1000 is complete, you will know how to enter the final response category for 'D'. Each option under item 'D. Contact with' is explained in the table below.

Option	Refers to the person(s)
1= Selected	It is decided after going through the household roster and
individual	identifying all household members, who will be selected
respondent	for the individual questionnaire. This person will answer
	the individual questionnaire.
2= Other household	This code would be used for a contact where the person
member	selected for the individual questionnaire is not available
	and the interviewer intends to return to the household.
3= No one	Use this code if the contact with the household resulted in
	no human contact.

Final result code

And at the end of the contact or interview process (either full or partial completion) you will be able to enter the 'E. Result code'. This refers to the final result code for the Individual Questionnaire. Use the table below to select the appropriate code to document the final result. The final result refers to I0001, I0002 or I0003 - individual or proxy respondent.

Codes	Description
01	Completed Interview (interview is accepted and conducted)
02	Partial Interview (interview is partially completed and person will not be contacted anymore)
03	Respondent contacted-initial refusal
04	Respondent contacted-uncertain about interview
05	Resistance/refusal by respondent
06	Final refusal by respondent
07	Final refusal by other household member
08	Unable to locate respondent
09	No interview because respondent is not eligible: less than 18, mentally unfit or too ill.
10	Language barrier
11	House is vacant or household occupants are elsewhere (seasonal vacancy, other residence)
12	Unsafe or dangerous area or no access to respondent
13	Deceased respondent
14	Respondent in institution: jail, hospital and not accessible

Module 0100 I0101-I0104

Questions I0101 to I0104 provide information on the cognitive ability of the respondent in order to determine whether they are able to participate directly in the MDS individual interview or whether a proxy respondent should be sought.

The table below provides a guide to completing questions I0101 to I0104.

Question Question No.	Guide for completion
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Question No.	Question	Guide for completion
I0101	Interviewer: Does the respondent have obvious cognitive limitations that prevent him/her from being interviewed?	Interviewer decision point. Based on interviewer's impressions, decide whether to: 1) continue with the selected respondent and arrange for the respondent to complete an individual consent form, or 2) seek a proxy respondent and go to I0102. Seeking for a proxy is justified if a significant cognitive limitation, memory problem or health condition is present that would, in the interviewer's opinion, be overly stressful for the respondent or provide responses of questionable accuracy. ALL proxy interviews will be checked by supervisors. Skip pattern: If 5 go to I0104
I0102	We would like to ask someone who knows the respondent a few questions about the respondent's health. INTERVIEWER: Who is the proxy?	Interviewer should seek a proxy and record this person. The proxy should know the respondent well enough to answer a series of detailed questions.
I0103	INTERVIEWER: Indicate who is the 'Individual Respondent'.	Interviewer will record the person number from the household roster (HH member). The Person number will be also recorded in I1001 in Module 1000.
I0104	INTERVIEWER: Was the Consent Form Agreed to and Signed / Agreed but Witness Signed or Refused?	Interviewer will record if the consent form is signed. If consent is refused, the interview cannot be carried out.

1000 SOCIO-DEMOGRAPHIC CHARACTERISTICS

Introduction

This module provides information on different background characteristics and gives an indication of income and socioeconomic status.

I1001-I1018 The table below provides a guide to completing questions I1001 to I1018.

Question No.	Question	Guide for completion
I1001	Person number of the adult recorded in HH roster	The interviewer should record the respondent's column number from H1006 in Module 1000: Household Roster.
I1002	What is your mother tongue? By mother tongue, I mean the language you learned first, the language that you can express yourself fully in, or voluntarily identify with.	 Record the respondent's mother tongue. Mother tongue is the language the respondent: voluntarily identifies with can fully express themselves in learned first If the respondent knows more than one 'mother tongue' language, record them all.
I1003	Record sex of the respondent	 Do NOT read this question to the respondent but record the respondent's sex (male or female) based on observation. Clarify if needed.
I1004	In what day, month and year were you born?	Record the date of birth. Accurate age reporting is very important for this survey. - Ask the day the respondent was born and record the numeric equivalent of this day (01-31). - Ask in which month the respondent was born and record the numeric equivalent of this month (01-12). - Ask in which year the respondent was born and record the year according to the Gregorian calendar (that is 19xx or 20xx). - Probe if necessary by asking if it was close to a national or religious holiday, or around a major event, or if they know around when a sibling or other family member of

Question No.	Question	Guide for completion
NO.		theirs was born and work from that. Use a historical time line if needed. - If after probing the respondent does not seem to know, indicate 88 for month or 8888 for year in the boxes. Skip pattern: if date known go to 11006
I1005	How old are you?	 Record respondent's age in years. Verify by a birth certificate if available. Probe if necessary and try to calculate out loud the number of years between the present and when they indicated they were born, or ask if they know the age of family members or spouse and if he/she is younger or older and by how many years. If after probing the respondent still is unable to answer, write 888 in the boxes.
I1006	In which country were you born?	 Ask this question without reading the options to the respondent. Circle whether the respondent was born in the country of interview or another country. Enter the country code using the list for country codes. Skip pattern: if 1 go to 11008
I1007	How old were you when you <u>first came to this</u> <u>country</u> ?	 Record respondent's age in years. Probe if necessary by asking if it happened around the same time as a major event. If less than 1 year, round up to 1 year (enter "01"). If after probing the respondent is still unable to answer, write 88 in the box.
I1008	Are you a <u>citizen of</u> [country of the interview]?	Circle the appropriate response: 1=Yes; 5=No
I1009	Do you have citizenship in another country?	 Citizenship denotes the link between a person and a state. Possession of citizenship is normally associated with the right to work and live in a country and to participate in political life. Circle the appropriate response: 1=Yes; 5=No Skip pattern: if 5 go to l1011
I1010	Which country?	Enter the country code using the list for country codes.
I1010 I1011	What is your current marital status?	 Ask this question without reading the options to the respondent. Emphasize that current or present marital status is needed. If the response does not match an option, for example, "single", then read the options and ask the respondent to choose the best one. For example, if the respondent is currently single (but was married in the past), the option "separated/divorced" should be recorded. "Cohabiting" means the respondent is living with a partner but is not married. Skip pattern: If 1 go to I1014; If 2 or 3 go to I1013; If 4 or 5 go to I1012
I1012	How many years have you been separated, divorced or widowed?	 Record the number of years since the respondent has been separated, divorced or widowed. Probe if necessary by asking if it happened around the same time as a major event. If less than 1 year, round up to 1 year (enter "01"). If after probing the respondent is still unable to answer, write 88 in the box. Skip pattern: Go to 11014
		Skip pattern: Go to 11014

Question No.	Question	Guide for completion
I1013	How many years have you been married or living together?	 Record the number of years the respondent was or has been married. Probe if necessary by asking the age of the oldest child and how long before the birth of this child did he/she get married. If less than 1 year, round up to 1 year (enter "01"). If after probing the respondent is still unable to answer, write 88 in the box. Where multiple marriages/partners are common, refer to the year of the first marriage.
I1014	What is the highest level of education that you have completed?	 Emphasize highest level of education completed (either at a formal school or at home). If the respondent attended 3 months of the first year of secondary school but did not complete the year, record "No schooling or never completed any grade". The categories of educational levels vary across countries. The supervisors should provide interviewers with country specific guidance for how to complete this question. Skip pattern: If 1 go to I1016
I1015	How many years of school, including higher education have you completed?	 Do not count partial years completed. If the respondent has been in school both full and part-time, record the number of years at full-time education. Count repeated grades as two years. Probe if necessary by asking at what age he/she started school and at what age he/she finished school. If less than 1 year, round up to 1 year. If after probing the respondent is still is unable to answer, write 88 in the box. Skip pattern: Go to I1018
I1016	Did you have to stop your education?	Circle the appropriate response: 1=Yes; 5=No
I1017	What was the main reason for never attending or stopping your education?	 Ask this question without reading the options to the respondent. If the response does not match an option, then read the options and ask the respondent to choose the best one. If none of the answers are appropriate indicate "Other".
I1018	What is your background or ethnic group?	 Ask what ethnic or cultural group the respondent identifies with (was born into). Do not read the response options. If the respondent does not understand how to answer, then read the response options. If none of the answers are appropriate indicate "other".

2000 WORK HISTORY AND BENEFITS

Introduction This module assesses whether the respondent has ever worked for pay, as well as the type of work, place of work and for how long the respondent has worked. It

also asks the age at which the respondent started working, and if no longer working, the age at which the respondent stopped working and why.

working, the age at miles the respondent stopped working and my,

Purpose The purpose of this module is to help answer other questions such as whether

health status contributes to unemployment or whether people in different types of occupations experience varying levels of health.

I2001- I2023 The table below provides a guide to completing questions I2001 to I2023.

Question No.	Question	Guide for completion
12001	As you know, some people take jobs for which they are paid in cash or kind. Other people sell things, have a small business, or work on the family farm or family business. Have you ever in your life done any of these things or any type of work?	 Assess if the respondent has ever worked for money or for goods. Work refers to formal and informal activities or employment in the formal and informal sectors. "Goods" refer to any item except currency (money) that is used as a payment for work or service (for example, food, clothing, housing, silver or gold, etc). Skip pattern: If 1 go to 12003
I2002	What is the main reason you have never worked to earn an income? Response options for I2002	 Only ask this question if the respondent has NEVER worked for pay or goods. Do not read the answer choices. Circle the best category, and confirm it with the respondent (for example, if the answer is "because I have very bad back pain", respond with "so you never worked because of 'health problems" and see if the respondent confirms. If the respondent provides more than one answer, ask them to specify which one is the most important or most relevant reason for not working. If the answer does not fit into any of the written answer categories, please ask the respondent to specify the reason not worked and record next to "Other". Response options to this question are specified as below:
	Health condition or disability Still engaged in training	Had/have any kind of health condition or problem preventing them from working. Have been studying in school and are not ready to work or have not had time to work for pay or goods. Can also apply to individuals in training for a vocation, but are not receiving pay or goods for their work.
	3 Could not find suitable work	Wanted to work for pay, actively looked or are looking but have not been successful in finding work.
	4 Do not know how or where to seek work	Wanted to work for pay, but do not know how or where to seek work.
	5 Not yet started to seek work	Wants to work for pay but have not started to seek work.
	6 Do not have the economic need	Do not need to work because they do not need to earn money (for example, because of inheritance, land/property ownership, or living with family members who support them).
	7 Parents or spouse did not let me work	Are married and whose spouse does not want them or allow them to work (mostly women). It can also apply to individuals living with their parents, and they did not want or allow them to work. Skip pattern: If 1 go to 12009
12003	At what age did you start	- Record the age the respondent started working
	working for pay?	for pay or goods. - If the respondent is unable to answer, circle '888 Don't know'
		Skip pattern: Go to I2005. If 888 go to I2004.

Question No.	Question	Guide for completion
I2004	How many years ago did you start working?	 Ask this question only if the respondent cannot answer I2003. Probe and calculate if necessary by asking how many years the respondent has been working, or around what major events the respondent started.
12005	What is your current working situation?	 Ask this question without reading the options to the respondent. If the response does not match an option, then read the options and ask the respondent to choose the best one. Skip pattern: If 1 go to I2006. If 4 or 5 go to I2012. Other go to
		12011.
12006	What is the main reason you are not currently working?	 Ask this question without reading the answer choices. Circle the best category, and confirm it with the respondent (for example, if the answer is "because I am going to university", respond with "so you are not working now because of being 'still engaged in training" and see if the respondent confirms. If the respondent provides more than one answer, ask them to specify which one is the most important or most relevant reason for not working. If the answer does not fit into any of the written answer categories, please ask the respondent to specify the reason not worked and record next to "Other". Note: See similar response categories definitions in I2002 above.
12007	At what age did you stop working?	 Record the age the respondent stopped working for pay or goods. If the respondent is unable to answer, circle '888 Don't know' and continue to I2008. Skip pattern: Go to I2009. If 888 go to I2008.
12008	How many years ago did you stop working?	 Record the number of years since the respondent stopped working for pay or goods. Probe and calculate if necessary by asking how many years ago the respondent stopped working, or around what major events the respondent stopped. If the respondent is unable to answer, write 888 in the box.
12009	Are you currently actively looking for work?	Persons are classified as unemployed: If they do not have a job, If they do not have a job and have actively looked for work in the prior 4 weeks, and If they are currently available for work (except for temporary illness). Ask the respondent if he or she is currently looking for a job and are available for work. Actively looking for work may consist of any of the following activities: Contacting an employer directly or having a job interview; Contacting a public or private employment agency; Talking to friends or relatives about job opportunities;

Question No.	Question	Guide for completion
		 Contacting a school or university employment center; Sending out resumes or filling out applications; Placing or answering advertisements; Checking union or professional registers; Or some other means of active job search.
I2010	What is the main reason you would like to work at present?	 Do not read the answer options. Allow to respondent to answer spontaneously. Probe if necessary by reading some of the answer options described below.
	Response option 1 Need the income	Refers to individuals who Need to work for money in order to support themselves or their family.
	2 Want to or need to be active	Want to work because they prefer not to be idle and without something to do. They may not necessarily need the money, but prefer to be active by working.
	3 Want to feel useful	Need to work in order to feel useful or to satisfy their identity or self-esteem.
	4 Help my family	Are working in order to bring income to their family. It may refer to young adults living with their parents, or to women trying to supplement their husband's income.
I2011	7 Other, specify Who is/was your employer in	Do not fit into any of the categories. - "Current" means any activity of more than one
	your current/most recent MAIN job?	 hour that the person engaged in for pay during the last two weeks. If the person is engaged in more than one kind of "job" during the last two weeks (for example, sold home-made food on the street part of the time and worked in a factory sewing shirts at other times), then "main" means the activity from which they derived the most income. For those who have stopped working - ask about their employer for the most recent main job. Probe if necessary by reading some of the answer options described below.
	Response option 1 Public sector (government employee)	Defined as, or referred to as an individual who Receive pay from the government or is hired by a government office or agency and paid a salary or wage. This includes employees of federal, state, or municipal governments and their agencies, parastatal enterprises, and semi-autonomous institutions such as social security institutions that are owned by the government or institutions like religious schools if the staff is paid by the government.
	2 Private sector (for profit and not for profit)	Is hired to work and is paid a salary or wages for a corporation, company, agency, organization, etc. This could be for profit business or not-for-profit and includes any employees not working for the government and not self-employed.
	3 Self-employed	An individual who operates a business or profession as a sole proprietor, partner in a partnership, independent contractor, or consultant. Earning one's livelihood directly from one's own trade or business rather than as an employee of another. The person may:
		 Produce goods for sale or earns an income through provision of services to different people or firms.
		Work alone or with intermittent assistance from

Question No.	Question	Guide for completion
		others, but does not employ anyone for a paid wage or salary on a regular basis.
	4 Informal employment	Informal employment could mean employment in the informal economy. Informal economy refers to the general market income category (or sector) wherein certain types of income and the means of their generation are "unregulated by the institutions of society, in a legal and social environment in which similar activities are regulated." Jobs in the informal economy are characteristically without benefits such as health insurance, sick leave, paid vacations or pensions.
I2012	In the last 12 months, for your main job, what has been your main occupation?	 Write down the answer exactly as stated. A colleague in the Primary Investigators office will code what you have written - so you need to write down clearly. Ask for clarification if needed. Provide any additional information that will help the coder. A general list of job categories follows, but the idea is to clearly write (in CAPITALS) the name of the job the respondent provides. Use this list for your own reference, or if you are having trouble understanding what the respondent's main occupation is. "Main occupation" means the occupation that the person spent the most time doing over the last 12 months. For those who have stopped working, it should be the occupation for the most recent main job.
		Do not read out the following examples of different occupation types.
	Occupation	Examples of occupations in this category include
	Legislator, Senior Official, or Manager:	Legislators; senior government officials; chiefs or heads of villages; senior officials of political parties or workers unions; and directors, chief executives or department managers who manage enterprises, organizations or departments that are large enough to require three or more managers.
	Professionals, Technicians or Associate Professionals	Occupations in the physical mathematical and engineering sciences, architects, engineers, health professionals, teachers, lawyers, social scientists, writers or performing artists, ship and aircraft controllers and technicians, financial agents, trade brokers, accountants and bookkeepers.
	Clerical	Secretaries, keyboard operators, stock clerks scribes, office assistants, cashiers, and receptionists.
	Personal Services, Marketing, or Sales	Travel attendants, restaurant workers, personal care workers, barbers, undertakers, astrologers, fire-fighters, police officers, models, salespersons.
	Agricultural or Fisheries Worker	Gardeners and crop growers, livestock, dairy, and poultry producers, forestry workers and loggers, hunters, and fishery workers
	Craft, Construction, or Trades	Miners, shop firers, stone cutters, and carvers; construction workers, metal moulders, welders, sheet-metal workers, blacksmiths, tool-makers, electrical and electronic equipment mechanics and fitters, potters, glass-makers, handicraft workers in wood, textile, leather and related materials, printing, food processing, textile and garment workers.
	Plant and Machine Operators or Assemblers	Processing-plant operators, power production operators, assembly-line operators, machine

Question No.	Question	Guide for completion
	Elementary occupations	operators, assemblers, and motor-vehicle drivers. Street vendors, domestic help, building caretakers, garbage collectors, messengers, porters, labourers (agricultural, construction, fishery, mining, transport).
	Armed Forces	Anyone who is employed as a member of military service of the country.
I2013	Do/did you usually work throughout the year, or do/did you work seasonally, or only once in a while for your main job?	Indicate if this is consistent work throughout the entire year, or if it is seasonal/part of the year or occasional (only when work is available, only in the dry season, etc.). Skip pattern: If 1 go to I2015
I2014	On average, how many weeks in a year do/did you work in your main seasonal or occasional job?	Record the number of weeks. The number of weeks should not exceed 52.
I2015	On average, how many days a week_do/did you work in your main job?	Record the number of days. The number of days should not exceed 7.
I2016	On average, how many hours a day do/did you work in your main job?	 Record the average number of hours per day the respondent works. The number of hours should not exceed 24 and should be realistic (for example, if the respondent indicates 22 hours, probe to find out if he/she was truly working for pay for 22 hours in 1 day).
I2017	In this main job, do/did you receive any retirement or pension benefits in addition to your payment in cash or in kind?	 This question refers to any money the employer puts aside for the respondent for after he or she retires. Circle the appropriate response: 1=Yes; 5=No
I2018	In this main job, do/did you receive any medical services or health care benefits in addition to your payment in cash or in kind?	 This question refers to any form of insurance coverage or actual health services provided by the employer. Circle the appropriate response: 1=Yes; 5=No
I2019	In this main job, do/did you receive any food or provisions benefits in addition to your payment in cash or in kind?	 This question refers to vouchers for food, or direct receipt of food items. Can also include housing or transportation in form of a car or bus passes, etc. Circle the appropriate response: 1=Yes; 5=No
I2020	In this main job, do/did you receive any cash bonuses benefits in addition to your payment in cash or in kind?	 This question refers to any payment in addition to the base salary, such as a Christmas bonus, or bonus at the end of the year, or for selling a certain amount of product, etc. Circle the appropriate response: 1=Yes; 5=No
I2021	In this <u>main</u> job, do/did you receive any further benefits in addition to your payment in cash or in kind?	 This question refers to any other kind of benefit not mentioned above. Circle the appropriate response: 1=Yes; 5=No and specify the name of the benefit.
12022	Have you worked at more than one job over the last 12 months?	 This refers to any job or jobs that the respondent has in addition to their MAIN job described above. It could be regular or occasional/seasonal, full or part time. Circle the appropriate response: 1=Yes; 5=No
I2023	Do you receive a disability pension or other disability benefit?	 This question refers to benefits usually paid by social security to persons with impairments or medical conditions preventing them from working. Circle the appropriate response: 1=Yes; 5=No

3000A ENVIRONMENTAL FACTORS

Introduction

This module asks questions about factors in the environment, such as availability of medicine, the accessibility of the surroundings or the attitudes of friends towards persons with health conditions that may hinder or improve health-related daily problems. Specifically, the questions are regarding the assistance needs of persons with day to day activities at home or outside, closeness of relationships, assistive products and modifications used and needed, accessibility of workplace or school, health facilities, places to socialize, shops, banks and post office, places of worship, transportation, dwelling, problems related to attitudes of others and accessibility to information.

The Environmental Factors module is divided into two parts: Module 3000A and Module 3000B.

Module 3000A is placed before the functioning module (Module 4000) and targets questions about the broad environment.

Module 3000B comes following the functioning module (Module 4000) and the health condition module (Module 5000) and includes specific questions about the use and/or need of personal assistance, assistive products and facilitators.

Purpose

Module 3000A

The purpose of this module is to identify factors in the environment that may influence health-related day to day life problems, so that specific interventions can be designed and developed. The module delivers information about the:

- · Accessibility of the general environment
- Level of social support
- Presence and level of negative attitudes of others
- · Accessibility to information
- Use of medication

Additionally, filter questions for module 3000B regarding personal assistants as well as assistive technologies and modifications are stated.

Module 3000B

The purpose of module 3000B is to collect detailed information regarding the availability and need of personal assistance, assistive technologies and modifications.

Skip patterns

It is important to closely follow the skip patterns in this module, as they have been designed to make sure the different categories of problematic environmental factors and barriers are correctly identified.

I3001- I3009 Module A

The table below provides guidelines for completing questions I3001 to I3009, which relate to hindering or facilitating aspects of the general environment.

Question No.	Question	Guide for completion
13001	To what extent does your workplace or educational institution make it easy or hard for you to work or learn?	 The respondent should evaluate diverse aspects of the workplace or school such as the design and construction of the buildings, the accessibility of entrances and exits, the amount of space and facilities available. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13002	To what extent do health facilities you need regularly make it easy or hard for you to use them?	 The respondent should evaluate diverse aspects of health facilities that she or he uses regularly such as the design and construction of the buildings, the accessibility of entrances and exits, the amount of space and facilities available. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13003	To what extent do places where you socialize and engage in community activities	The respondent should evaluate diverse aspects of places he or she visits to socialize and engage in community activities such as the design and construction of the buildings, the accessibility of entrances and exits, the amount of space and facilities available.

Question No.	Question	Guide for completion
	make it easy or hard for you to do this?	Read aloud all response options to the respondent.Circle the response option selected by the respondent.
13004	To what extent do the shops, banks and post office in your neighbourhood make it easy or hard for you to use them?	 The respondent should evaluate diverse aspects of shops, banks and the post office in the neighbourhood such as the design and construction of the buildings, the accessibility of entrances and exits, the amount of space and facilities available. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13005	To what extent do your regular places of worship make it easy or hard for you to worship?	 The respondent should evaluate diverse aspects of their regular places of worship such as the design and construction of the buildings, the accessibility of entrances and exits, the amount of space and facilities available. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3006	To what extent does the transportation you need or want to use make it easy or hard for you to use it?	 The respondent should evaluate diverse aspects of the transportation they need to use such as the availability and accessibility of means of transportation, the amount of space available or how "barrier-free" they are. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13007	To what extent does your dwelling make it easy or hard for you to live there?	 The respondent should evaluate diverse aspects of their own dwelling such as the amount of space available, cleanliness, opportunities for privacy, facilities available (such as electricity, running water), and the quality of the construction of the building (such as roof leaking and dampness). Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13008	To what extent does the toilet of your dwelling makes it easy or hard for you to use it?	 The respondent should evaluate diverse aspects of the toilet of her or his dwelling such as the amount of space available, cleanliness, accessibility, and any modifications that have been made. Read aloud all response options to the respondent. Circle the response option selected by the respondent. If the household has no toilet, please select 98 Not applicable
13009	To what extent do the temperature, terrain, and climate of the place you usually live make it easy or hard for you to live there?	 The respondent should evaluate diverse aspects of natural environment of the place they usually live such as temperature, terrain, air pollution and climate. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3010	To what extent do the lighting, noise, and crowds in your surroundings make it easy or hard for you to live there?	 The respondent should evaluate diverse aspects of their surroundings such as lighting, noise, and crowds. Read aloud all response options to the respondent. Circle the response option selected by the respondent.

I3011- I3013 Assistance, assistive products and medicines The table below provides guidelines for completing questions I3011 to I3013 which relate to assistance, assistive products and modifications. These are entrance questions and follow up questions on them will be stated in module 3000B.

Question No.	Question	Guide for completion
I3011	Do you have someone to assist you with your day-	 This question targets the presence of people assisting the respondent with day to day activities at home or
	to-day activities at home	outside, such as cleaning, washing oneself, cooking,

Question No.	Question	Guide for completion
	or outside?	 eating, dressing, shopping or using transportation, including family and friends but also paid helpers. Circle the appropriate response: 1=Yes; 5=No
I3012	Do you use any assistive products, such as glasses or a cane?	 This question targets the use of any assistive technologies. It includes any aids that the respondent may use such as such as glasses, a cane, hearing aids, crutch, wheelchair, prosthesis, orthopaedic device or grasping tools. Circle the appropriate response: 1=Yes; 5=No
I3013	Do you take medicines on a regular basis?	 Respondents should take into account if they use medicines on a regular basis. Any medication for symptom control of diseases should be considered, such as for pain, high blood pressure, asthma or sleep disturbances. Circle the appropriate response: 1=Yes; 5=No

I3014- I3023 Support & Relationships

The table below provides guidelines for completing questions I3014 to I3023, which relate to family and social support. The questions belong to the Oslo Social Support Scale.

Question No.	Question	Guide for completion
I3014	[Should you need help, how easy is it for you to get help from:] a close family member (including your partner)	 Respondents should evaluate how easy it is for them to get help from close family members such as parents, children or partners. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3015	[Should you need help, how easy is it for you to get help from:] friends and co-workers	 Respondents should evaluate how easy it is for them to get help from friends and co-workers. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3016	[Should you need help, how easy is it for you to get help from:] neighbours	 Respondents should evaluate how easy it is for them to get help from neighbours. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3017	[How close is your relationship with] spouse or partner	 Respondents should evaluate the closeness of the relationship to the spouse or partner. Relationships are considered close if one can for instance talk about personal affairs, get help, or enjoy spending leisure time. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3018	[How close is your relationship with] family members	 Respondents should evaluate the closeness of further family members such as uncles, aunts, cousins, grandparents. Relationships are considered close if one can for instance talk about personal affairs, get help, or enjoy spending leisure time. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3019	[How close is your relationship with] friends and co-workers	 Respondents should evaluate the closeness of the relationship to friends and co-workers. Relationships are considered close if one can for instance talk about personal affairs, get help, or enjoy spending leisure time. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3020	[How close is your relationship with] neighbours	 Respondents should evaluate here the closeness of the relationship to neighbours. Relationships are considered close if one can for instance talk about personal affairs, get help, or enjoy spending

Question No.	Question	Guide for completion
		leisure time. • Read aloud all response options to the respondent. • Circle the response option selected by the respondent.
13021	[With how many people do you have a close relationship] in your family	 Respondents should estimate with how many persons in the family they have a close relationship Probe if necessary and try to calculate out loud the number of persons with whom the persons has a close relationship. Record the number given by the respondent.
I3022	[With how many people do you have a close relationship] among your friends and co- workers	 Respondents should estimate with how many persons among friends and co-workers they have a close relationship. Probe if necessary and try to calculate out loud the number of persons with whom the persons has a close relationship. Record the number given by the respondent.
13023	[With how many people do you have a close relationship] among your neighbours	 Respondents should estimate with how many among your neighbours they have a close relationship. Probe if necessary and try to calculate out loud the number of persons with whom the persons has a close relationship. Record the number given by the respondent.

I3024- I3035 Attitudes & Information

The table below provides guidelines for completing questions I3024 to I3035, which relate to the attitudes of others to the respondent, and accessibility to information. Questions I3025, I3031, I3032 and I3033 are based on the Attitudes to Disability Scale (ADS); Questions I3026 to I3030 Question based on the Disabilities Module of the WHOQOL-BREF; question I3034 is based on the WHODAS.

Question No.	Question	Guide for completion
I3024	Can you participate in family decisions?	 Respondents should evaluate to what extent they can participate in family decisions such as where to live or how to spend the family income. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13025	Do you have problems getting involved in society because of the attitudes of people around you?	 Respondents should evaluate to what extent getting involved in society is difficult because of the attitudes of people around them such as disrespect or lack of patience. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13026	Do you feel that some people treat you unfairly?	 Respondents should evaluate to what extent they feel treated unfairly by people. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13027	Do you make your own choices about your day-to-day life? For example, where to go, what to do, what to eat.	 Respondents should evaluate to what extent they can make own choices about day-to-day life, for example where to go, what to do, what to eat. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13028	Do you get to make the big decisions in your life? For example, like deciding where to live, or who to live with, how to spend your money.	 Respondents should evaluate to what extent they can make own choices about big decisions such as deciding where to live, or who to live with, how to spend the own money. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3029	Do you feel that other people accept you?	 Respondents should evaluate to what extent they feel that other people accept them. Read aloud all response options to the respondent.

Question No.	Question	Guide for completion
		Circle the response option selected by the respondent.
13030	Do you feel that other people respect you? For example, do you feel that others value you as a person and listen to what you have to say?	 Respondents should evaluate to what extent they feel that other people respect them. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3031	Do you consider yourself a burden on society?	 Respondents should evaluate to what extent they consider themselves as a burden on society. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13032	Do people around you tend to become impatient with you?	 Respondents should evaluate to what extent people around them tend to become impatient with them. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13033	Do people around you not expect much from you?	 Respondents should evaluate to what extend people around them tend not to expect too much from them. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13034	Is living with dignity a problem for you because of the attitudes and actions of others?	 Respondents should evaluate to what extent living with dignity pose a problem to them because of the attitudes and actions of others. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
13035	Do you have access to the information you need or want?	 Respondents should evaluate to what extent they have access to information such as internet or newspapers in the same way as anyone else has. Read aloud all response options to the respondent. Circle the response option selected by the respondent.
I3035a	Do you have a mobile phone?	Respondents should answer if their have, own a mobile (cellular) phone for personal use.
I3035b	Do you use internet?	Respondents should answer if they use the internet, either at home, or in facilities providing access to internet.

4000 FUNCTIONING

Introduction

This module asks questions about respondents' overall problems in daily life. It covers problems with: mobility, hand and arm use, self-care, seeing, hearing, pain, sleep and energy, breathing, affect, interpersonal relationships, handling stress, communication, cognition, household tasks, community and citizenship participation, caring for others, work & schooling.

I4001- I4048

The table below provides guidelines for completing questions I4001 to I4048 which relate to problems in daily life. By problems it is meant not getting things done in the way the person wants to or not getting things done at all. These problems may arise because of the persons' health or because of the environment in which the person lives. They may also arise because of the attitudes or behaviours of people around the person.

In this module it is therefore essential to <u>repeatedly prompt respondents to keep</u> <u>in mind people who help them, any assistive technologies they use or any</u> medication the take when answering each question.

Example: If a person has a severe hearing impairment but uses a hearing aid that makes hearing possible, then the expected answer to the corresponding question

is "no problem".

Respondents are required to answer how much of a problem they experience on a scale from 1 to 5 where 1 means no problem and 5 means extreme problems.

For all questions you should:

- Read aloud all response options to the respondent and use the SHOWCARD, if necessary.
- Circle only one response option.

Question No.	Question	Guide for completion
I4001	How much of a problem is standing up from sitting down for you?	Refers to getting into and out of a standing position or changing body position from standing to any other position, such as lying down or sitting down. Respondents should answer the question taking into account any medicines, personal assistance, aids or modifications that might make standing up from sitting down easier or harder for them. Example: an older woman with arthritis has no problems with standing up from sitting down because she lives with the family, who physically helps her standing up \rightarrow the respondent should describe how much of a problem it is taking into account the received help. In this case, the expected answer is no problem.
I4002	How much of a problem is standing for long periods such as 30 minutes for you?	Involves standing for longer periods such as standing in a line. Respondents should answer the question taking into account any medicines, personal assistance, aids or modifications that might make standing for long periods easier or harder for them. Example: a person can only stand for long periods using crutches → the respondent should consider standing with the crutches to describe how big the problem is.
I4003	How much of a problem is getting out of your home for you?	Involves getting out of the own home. Problems could arise from for instance mobility limitations, anxiety or hindering entrances at home. Respondents should answer the question taking into account any medicines, personal assistance, aids or modifications that might make getting out of the home easier or harder for them. Example: a person cannot get out of the home because he or she has difficulties with walking and lives in the fourth floor of a house without lift → the respondent should describe how big the problem is, taking into account the health problems and the living situation.
I4004	How much of a problem is walking a short distance such as a 100m for you?	Walking a short distance such as a 100m usually corresponds to walking about the length of one football field or one city block. Respondents should answer the question taking into account any medicines, personal assistance, aids or modifications that might make walking a short distance easier or harder for them. Example: a person cannot walk a short distance because of problems with balance after a stroke and the bad pavement conditions of the neighbourhood → the respondent should consider both the balance problems and the pavement when describing how big the problem is.
I4005	How much of a problem is walking a kilometre for you?	Walking a kilometre usually corresponds to walking the length of ten football fields or ten city blocks. Respondents should answer the question taking into account any medicines, personal assistance, aids or

Question	Question	Guide for completion
No.		modifications that might make walking a kilometre easier or harder for them. Example : a person cannot walk a kilometre because he or she would need crutches for that and does not have them the respondent should describe how big the problem is, taking into account that crutches are not available.
I4006	How much of a problem is engaging in vigorous activities for you, such as [add country specific examples]?	Examples of vigorous activities are jogging, playing football, shovelling, carrying heavy loads, gardening, chopping woods, washing clothes by hand or bicycling fast. Respondents should answer the question taking into account any medicines, personal assistance, aids or modifications that might make engaging in vigorous activities easier or harder for them. Example: a farmworker with chronic low back pain can continue carrying heavy loads using a back pain belt the respondent should describe how big the problem is, taking into account the back pain belt.
I4007	How much of a problem is getting where you want to go for you?	Problems include moving around outside the house to get to different places, such as the workplace or places of worship. Problems could be mobility limitations, anxiety or lack of accessible transportation, for instance. Respondents should take into account medicines, personal assistance, aids or modifications that might make getting where the person wants to go easier or harder for them. Example: a person with severe epilepsy can only go out accompanied by somebody else but family and friends have very little time to do this → the respondent should describe how big the problem is, taking into account the need of having personal support and the lack of time of family and friends.
I4008	How much of a problem is doing things that require the use of your hands and fingers, such as picking up small objects or opening a container?	Difficulties in handling objects, picking up, manipulating and releasing them using one's hand, fingers and thumb, such as required to lift coins off a table or turn a dial or knob. It includes difficulties in picking up, grasping, manipulating and releasing, or more complex actions requiring coordination of these separate actions. Respondents should take into account medicines, personal assistance, aids or modifications that might make doing things that require the use of your hands and fingers easier or harder for them. Example: a person with rheumatoid arthritis has no problems opening a bottle using an assistive device → the respondent should describe how big the problem is while using an assistive device. The expected answer in this case could be no problem.
14009	How much of a problem is raising a 2 litre bottle of water from waist to eye level?	Problems in using arms and hands for raising a bottle are meant. Respondents should take into account medicines, personal assistance, aids or modifications that might make it easier or harder for them. Example: a person with a shoulder injury cannot do raise a bottle from waist to eye level anymore, even using assistive devices → the respondent should describe how big the problem is, taking into account that assistive devices offer no help.
I4010	How much of a problem is	Respondents should consider activities such as gathering

Question No.	Question	Guide for completion
	being clean and dressed?	clothing from storage areas (e.g. closet, dressers), securing buttons, tying knots, combing hair, and brushing teeth. Respondents should take into account medicines, personal assistance, aids or modifications that might make being clean and dressed easier or harder for them. Example: a person with Parkinson's disease has no problems getting dressed and clean because of the help of a personal assistant → the respondent should describe how big the problem is, taking into account the help of the personal assistant. In this case, the answer could be no problem.
I4011	How much of a problem is eating? Please take into account your health and people who help you, any assistive devices you use or any medication you take.	This question intends to capture the physical act of eating, including cutting or breaking food into pieces, and having meals. This question is not about diet or food preferences. To make this explicit, the interviewer should read "Please remember to take into account your health and people who help you, any assistive devices you use or any medication you take" just after stating the question. Respondents should take into account medicines, personal assistance, aids or modifications that might make eating easier or harder for them. Example: a person with Parkinson's disease has important problems eating but can do it with the support of the wife → the respondent should describe how big the problem is, taking into account the help of the wife.
I4012	How much of a problem is toileting?	Toileting includes regulating urination, defecation and menstrual care, and cleaning oneself afterwards. Respondents should take into account medicines, personal assistance, aids or modifications that might make toileting easier or harder for them. Example: a person with rheumatoid arthritis has important problems toileting and uses assistive devices that make toileting possible → the respondent should describe how big the problem is, taking into account the assistive devices.
I4013	How much of a problem is cutting your toenails?	Includes cleaning, cutting or polishing the nails of the toes. Respondents should take into account medicines, personal assistance, aids or modifications that might make cutting toenails easier or harder for them. Example: a person with chronic low back pain needs the help of the spouse for cutting toenails → the respondent should describe how big the problem is, taking into account the support of the spouse.
I4014	How much of a problem is looking after your health, eating well, exercising or taking your medicines?	Looking after one's health includes eating well, exercising or taking prescribed medicines, for instance. Respondents should take into account medicines, personal assistance, aids or modifications that might make looking after their health easier or harder for them. Example: a person with substance abuse can look after his or her health with the support of community care the respondent should describe how big the problem is, taking into account the community care.
I4015	How much of a problem do you have with seeing at a distance?	An example of seeing things at a distance is seeing across the street. Respondents should take into account medicines, personal assistance, aids or modifications that might make seeing things at a distance easier or harder

Question	Question	Guide for completion
No.		for them. Example : a person has problems seeing things at a distance and no glasses → the respondent should describe how big the problem is, taking into account the absence of glasses.
I4016	How much of a problem do you have with seeing at arm's length?	Includes for instance seeing the letters in a newspaper. Respondents should take into account medicines, personal assistance, aids or modifications that might make seeing an object at arm's length easier or harder for them. Example: a person has no problems seeing an object at arm's length because he or she uses glasses → the respondent should describe how big the problem is, taking into account the glasses.
I4017	How much of a problem do you have with hearing what is said in a conversation with another person in a quiet room?	The question is related to sensing sounds and discriminating the location, pitch, loudness and quality of sounds in quiet surroundings. Respondents should take into account medicines, personal assistance, aids or modifications that might make hearing easier or harder for them. Example: a person with a hearing impairment has no problems because he or she uses a hearing aid → the respondent should describe how big the problem is, taking into account the hearing aid.
I4018	How much of a problem do you have with hearing what is said in a conversation with another person in a noisy room?	The question is related to sensing sounds and discriminating the location, pitch, loudness and quality of sounds in loud surroundings. Respondents should take into account medicines, personal assistance, aids or modifications that might make hearing easier or harder for them. Example: a person with a hearing impairment has problems because his or her hearing aid is old and not working properly → the respondent should describe how big the problem is, taking into account the impairment and condition of the hearing aid.
I4019	How much of a problem is having pain in your day-to-day life for you?	Problems involve any form of physical or mental pain or discomfort. Respondents should take into account medicines, personal assistance, aids or modifications that might make pain easier or harder for them. Example: a person has chronic pain after an injury but uses very efficient painkillers → the respondent should describe how big the problem is, taking into account the pain killers.
I4020	How much of a problem do you have with sleep?	This question concerns all aspects of sleeping, not merely falling asleep, but also waking up frequently during the night or waking up too early in the morning. Respondents should take into account medicines, personal assistance, aids or modifications that might make sleeping easier or harder for them. Example: a person has chronic sleep problems, which are worsened by the loud neighbourhood → the respondent should describe how big the problem is, taking into account the loud neighbourhood.
I4021	How much of a problem is feeling tired and not having enough energy?	Problems include reduced level of energy and vitality that affects daily life. Respondents should take into account medicines, personal assistance, aids or modifications that might make feeling tired and not having enough energy better or worse.

Question No.	Question	Guide for completion
		Example : after a stroke a person feels easily tired and the supervisor at work does not allow regular breaks → the respondent should describe how big the problem is, taking into account the situation at work.
14022	How much of a problem do you have with shortness of breath?	Includes getting out of breath after climbing stairs or exercising, for instance. Respondents should take into account medicines, personal assistance, aids or modifications that might make shortness of breath better or worse. Example: a person with asthma takes medicines before exercising or doing vigorous activities to avoid shortness of breath → the respondent should describe how big the problem is, taking into account the medicine.
I4023	How much of a problem do you have with coughing or wheezing?	Includes coughing or wheezing after climbing stairs or exercising, for instance. Respondents should take into account medicines, personal assistance, aids or modifications that might make coughing or wheezing better or worse. Example: the problems of a person with asthma with coughing or wheezing got worse because of air pollution → the respondent should describe how big the problem is, taking into account the air pollution.
14024	How much of a problem do you have with feeling sad, low or depressed?	Problems being "sad, low and depressed" include the feeling of dejection, despondence, downheartedness, gloom, heavy-heartedness, melancholy, misery, mournfulness, unhappiness, or other cultural or linguistic variations on these notions. Respondents should take into account medicines, personal assistance, aids or modifications that might make feeling sad, low or depressed better or worse. Example: the problems of a person with depression with feeling sad, low or depressed are better after he or she initiated psychosocial treatment the respondent should describe how big the problem is, taking into account the treatment.
14025	How much of a problem do you have with feeling worried, nervous or anxious?	Feeling worried, nervous or anxious refers to feelings of uneasiness, being troubled, or apprehensive about the future that is associated with, or triggers, being stressed, on edge, tense or unable to relax. Respondents should take into account medicines, personal assistance, aids or modifications that might make felling worried, nervous or anxious better or worse. Example: the problems a person with cancer experienced with being excessively worried, nervous or anxious are better after he or she initiated psychosocial treatment the respondent should describe how big the problem is, taking into account the treatment.
14026	How much of a problem is getting along with people who are close to you, including your family and friends?	Getting along with people who are close includes showing respect, warmth, appreciation, and tolerance in relationships; responding to criticism and social cues in relationships; and using appropriate physical contact. Respondents should take into account medicines, personal assistance, aids or modifications that might make getting along with people who are close easier or harder for them. Example : the problems of a person with HIV in getting

Question	Question	Guide for completion
No.		along with people who are close got better after he or she initiated treatment → the respondent should describe how big the problem is, taking treatment into account.
I4027	How much of a problem is dealing with people you do not know?	Dealing with strangers means engaging in temporary contacts for specific purposes, such as when asking for directions or making a purchase. Respondents should take into account medicines, personal assistance, aids or modifications that might make dealing with people the person does not know easier or harder for them. Example: a person has significant problems to talk after a stroke and avoid dealing with strangers when his wife is not around the respondent should describe how big the problem is taking into account the consequences of the stroke and the support of the wife.
14028	How much of a problem is initiating and maintaining friendships?	Beginning and maintaining friendships with others for a short or long period of time, in a contextually and socially appropriate manner. This includes staying in touch, interacting with friends in typical ways, initiating activities with friends and participating in activities when invited. Respondents should take into account medicines, personal assistance, aids or modifications that might make it easier or harder for them. Example: a person with Parkinson's disease has problems with getting tired very fast and only meets friends if the spouse accompany him or her → the respondent should describe how big the problem taking into account the support of the spouse.
I4029	How much of a problem do you have with intimate relationships?	Intimate relationships refer to having close or romantic relationships, such as husband and wife or sexual partners. Respondents should take into account medicines, personal assistance, aids or modifications that might make having intimate relationships easier or harder for them. Example: a person with alcohol abuse could find a partner and keep the relationship after joining a support program for alcohol abuse → the respondent should describe how big the problem is, taking into account the support program.
I4030	How much of a problem is handling stress, such as controlling the important things in your life?	Handling stress refers to managing and controlling the demands required to carry out tasks involving responsibilities and stress, distraction or crises. Respondents should take into account medicines, personal assistance, aids or modifications that might make handling stress easier or harder for them. Example: a person with cancer has got problems handling stress after the diagnosis and has no familiar or social support → the respondent should describe how big the problem is, taking into account the lack of social support.
I4031	How much of a problem is coping with all the things you have to do?	Problems include not being able to keep up at work or education, being late for appointments, or not being able to get housework done, among others. Respondents should take into account medicines, personal assistance, aids or modifications that might make coping with all the things they have to do easier or harder for them. Example: a person developed problems coping with all

Question No.	Question	Guide for completion
		the things she or he has to do after an injury leading to chronic pain and relies on the support of friends and neighbours → the respondent should describe how big the problem is taking into account the support of friends and neighbours.
I4032	How much of a problem do you have with being understood, using your usual language?	Problems involve all aspects of being understood using all usual modes of communication: spoken, written, sign language, or gestural communication. Respondents should take into account medicines, personal assistance, aids or modifications that might make being understood, using usual language, easier or harder for them. Example: a person who stutters can communicate poorly at work because colleagues are inpatient and make jokes about the problem → the respondent should describe how big the problem is taking into account the attitudes of colleagues.
14033	How much of a problem do you have with understanding others, using your usual language?	Problems involve all aspects of understanding verbal communication, including dealing with the speed of conversation, background noise, distractions and other features of the communication context. Respondents should take into account medicines, personal assistance, aids or modifications that might make understanding others, using usual language easier or harder for them. Example: a person has problems understanding the wife after a stroke because she has no patience and cannot speak slowly enough → the respondent should describe how big the problem is taking into account the attitude of the spouse.
I4034	How much of a problem is forgetfulness for you?	Problems involve forgetting keys, small objects, or minor responsibilities. Respondents should take into account medicines, personal assistance, aids or modifications that might make forgetfulness better or worse. Example: an older person counters problems with forgetfulness by using a notebook as a memory aid → the respondent should describe how big the problem is, taking into accounts the notebook.
I4035	How much of a problem is remembering to do the important things in your day to day life?	This refers to problems recalling things that are important to him or her, such as important appointments and deadlines. Respondents should take into account medicines, personal assistance, aids or modifications that might make remembering to do the important things better or worse. Example: a person with Parkinson's disease, who has significant memory impairments, uses an alarm clock to remember medication intake time → the respondent should describe how big the problem is, taking into account the alarm clock.
I4036	How much of a problem is finding solutions to day-to-day problems that you might have?	Finding solutions to situations by identifying and analysing issues, developing options and solutions, evaluating potential effects of solutions, and executing a chosen solution, such as in resolving a dispute between two people. Respondents should take into account medicines, personal assistance, aids or modifications that might make finding solutions to day-to-day problems easier or harder for them. Example : a woman with rheumatoid arthritis counts on

low much of a problem do ou have with getting your ousehold tasks done?	her daughter to find solutions to day-to-day problems the respondent should describe how big the problem is, taking into account the support of the daughter. Problems involve all aspects of maintaining the household, and needs to take into account all of the needs of the household or family, including physical, financial, and psychological needs. Examples of household tasks are cleaning the living area, washing and drying clothes, using household appliances, storing daily necessities and disposing of garbage. Respondents should take into account medicines, personal assistance, aids or modifications that might make getting household tasks done easier or harder for them.
ou have with getting your	household, and needs to take into account all of the needs of the household or family, including physical, financial, and psychological needs. Examples of household tasks are cleaning the living area, washing and drying clothes, using household appliances, storing daily necessities and disposing of garbage. Respondents should take into account medicines, personal assistance, aids or modifications that might make getting household tasks
	Example : a person with spinal cord injury using a wheelchair has no problems getting housework done because a personal assistant takes care of it → the respondent should describe how big the problem is, taking into account the personal assistant. In this case, the answer could be "no problem".
low much of a problem do ou have with managing ne money you have?	Managing the money includes all aspects of having command over economic resources for present and future needs, using and saving money, evaluating the value of objects in relation to how much these are needed, and managing the use of bank services such as credit cards or internet banking. Respondents should take into account medicines, personal assistance, aids or modifications that might make it easier or harder for them. Example: a person with dementia cannot manage his or her money alone anymore, but with the help of the son the person has no problems → the respondent should describe how big the problem is taking into account the help of the son. In this case, the answer could be "no problem".
ow much of a problem do ou have with doing things or relaxation or pleasure?	Doing things for relaxation or pleasure refers to engaging in recreational or leisure activity, and any form of play. Respondents should take into account medicines, personal assistance, aids or modifications that might make doing things for relaxation or pleasure easier or harder for them. Example: a person with dementia takes part in no leisure activities because nothing is offered for persons with dementia in the neighbourhood → the respondent should describe how big the problem is, taking into account the neighbourhood.
ow much of a problem do ou have with joining ommunity activities, such s festivities, religious or ther activities?	Includes being involved in town meetings, fairs, leisure or sport activities in the town, neighbourhood or community. Respondents should take into account medicines, personal assistance, aids or modifications that might make joining community activities easier or harder for them. Example: a person in a wheelchair has no problems joining festivities because of the support of the family and the accessibility of places in the neighbourhood → the respondent should describe how big the problem is taking into account the support of the family and the accessibility of the neighbourhood. Refers to having the possibility of engaging in the social,
ic cost	ow much of a problem do ou have with joining ommunity activities, such a festivities, religious or

Question	Question	Guide for completion
No.	you have in engaging in	political and governmental life of a citizen. For instance,
	local or national politics and in civil society organisations, such as [add country specific	political parties, Rotary Club or Red Cross. Respondents should take into account medicines, personal assistance, aids or modifications that might make it easier or harder for them.
	examples]?"	Example : a blind person has problems engaging in local politics because no information is available in Braille → the respondent should describe how big the problem is taking into account the lack of adapted materials.
I4042	How much of a problem did you have with voting in the last elections?	Refers to problems regarding voting in the face of impairments (such as mobility or visual impairments) and lack of accommodations in or lack of accessibility of polling places, for instance. Respondents should take into account medicines, personal assistance, aids or modifications that might make voting easier or harder for them.
		Example : a person in wheelchair cannot vote because the polling place is not barrier free → the respondent should describe how big the problem is taking into account the accessibility of the polling place.
	How much of a problem do you have providing care or support for others?	Providing care or support for others refers to assisting household members and others with learning, communicating, self-care, and moving within the house or outside, for instance children. Respondents should take into account medicines, personal assistance, aids or modifications that might make providing care easier or
I4043		harder for them. Example : a mother cannot bath and dress her small children after a stroke and does not get enough support from friends and neighbours → the respondent should describe how big the problem is taking into account the lack of support from friends and neighbours.
I4044	How much of a problem do you have with applying for and getting a job?	Includes locating and choosing a job, in a trade, profession or other form of employment, performing the required tasks to get hired, and getting the job. Respondents should take into account medicines, personal assistance, aids or modifications that might make applying for and getting a job easier or harder for them. Example : a blind person has significant problems finding work because of a lack of opportunities of jobs with accommodations for blind persons → the respondent should describe how big the problem is taking into account the lack of opportunities for blind persons.
I4045	How much of a problem is getting things done as required at work?	Includes performing the expected job-related tasks to keep an occupation, trade, profession or other form of employment. Respondents should take into account medicines, personal assistance, aids or modifications that might make getting things done as required at work easier or harder for them. Example: a person with diabetes cannot perform work tasks as required anymore and gets no support from her or his boss → the respondent should describe how big the problem is taking into account the lack of support at work from her or his supervisor.
I4046	How much of a problem do you have getting a formal	Includes gaining admission to school, education and attending school regularly, and completing education.

Question No.	Question	Guide for completion
	or informal education?	Respondents should take into account medicines, personal assistance, aids or modifications that might make getting a formal or informal education easier or harder for them. Example: a person in a wheelchair cannot go to the university because the buildings are not barrier free the respondent should describe how big the problem is taking into account the fact that buildings are not barrier free.
14047	How much of a problem is getting things done as required at school?	Includes working cooperatively with other students, and completing assigned tasks and projects. Respondents should take into account medicines, personal assistance, aids or modifications that might make getting things done as required at school easier or harder for them. Example: a person with depression cannot complete tasks as required anymore and gets no support from her or his teachers → the respondent should describe how big the problem is taking into account the lack of support from her or his teachers.
14048	How much of a problem is using public or private transportation?	Includes using transportation to move around as a passenger, such as being driven in a car or on a bus, rickshaw, or private or public taxi, bus, train. Respondents should take into account medicines, personal assistance, aids or modifications that might make using public or private transportation easier or harder for them. Example: a person in wheelchair cannot use public transportation because it is not barrier free → the respondent should describe how big the problem is, taking into account that public transportation is not barrier free.

5000 HEALTH CONDITIONS

Introduction

This module asks questions about problems in day to day life exclusively because of health issues as well as the presence, diagnoses and treatment of health conditions or diseases as reported by the respondent. The questions refer to current health conditions or diseases.

Purpose

The purpose of this module is to determine the number of individuals who have problems in day-to-day life exclusively because of their health, the number of individuals with health conditions and how many of these people actually receive treatment.

Procedure

In this module, respondents are first asked about problems in day-to-day life which are exclusively due to their health. Then questions about the presence of health conditions and diagnosis and treatment for the endorsed health conditions are asked. It must be noted that the proposed list of health conditions focusses on the most burdensome ones worldwide and should be updated by each country in order to be tailored to national needs and to capture the most prevalent or serious health conditions in each national setting.

I5001

The entrance question requests the respondent to rate his or her own health and was selected as the first question to encourage respondents to focus on health.

For all questions you should:

- Read aloud all response options to the respondent and
- Circle only one response option.

Question No.	Question	Guide for completion
I5001	I will start with a question	Respondent should evaluate his or her general health

about your overall health, including your physical and your mental health: In general, how would you rate your health today?	including physical and mental health. Read aloud all response options and circle the response option selected by the respondent.
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WG1-WG6

The table below provides guidelines for completing questions WG1-WG6. These questions are from the Washington Group Short-Set of Questions on Disability. These questions ask about difficulties the participant may have doing certain activities because of a HEALTH PROBLEM.

For all questions you should:

- Read aloud all response options to the respondent and
- Circle only one response option.

Question No.	Question	Guide for completion
WG1	Do you have difficulty seeing, even if wearing glasses?	The purpose of this item is to identify persons who have vision difficulties or problems of any kind even when wearing glasses (if they wear glasses). They can have a problem seeing things close up or far away. They may not be able to see out of one eye or they may be only able to see directly in front of them, but not to the sides. Any difficulty with vision that they consider a problem should be captured. Definitions: Seeing refers to an individual using his/her eyes and visual capacity in order to perceive or observe what is happening around them.
WG2	Do you have difficulty hearing, even if using a hearing aid?	The purpose of this item is to identify persons who have some hearing limitation or problems of any kind with their hearing even when using a hearing aid (if they wear a hearing aid). They can have a problem hearing only when they are in a noisy environment, or they may have problems distinguishing sounds from different sources. They may not be able to hear in one ear or both. Any difficulty with hearing that they consider a problem should be captured. Definitions: Hearing refers to an individual using his/her ears and auditory (or hearing) capacity in order to know what is being said to them or the sounds of activity, including danger that is happening around them.
WG3	Do you have difficulty walking or climbing steps?	The purpose of this item is to identify persons who have some limitation or problems of any kind getting around on foot. It may or may not contribute to difficulty in doing their daily activities. They can have a problem walking more than a block, or short or long distances, or the problem can be that they can't walk up or down steps without difficulty. They may not be able to walk any distance without stopping to rest or they may not be able to walk without using some type of device such as a cane, a walker or crutches. In some instances they may be totally unable to stand for more than a minute or two and need a wheelchair to get from place to place. Difficulties walking can include those resulting from impairments in balance, endurance, or other non-musculoskeletal systems. Any difficulty with walking (whether it is on flat land or up or down steps) that they consider a problem should be captured. Definitions: Walking refers to an individual using his/her legs in such a way as to propel themselves over the ground to get from point A to point B. The capacity to walk should be without assistance of any device or human. If such assistance

Question No.	Question	Guide for completion
		is needed, the person has difficulty walking.
WG4	Do you have difficulty remembering or concentrating?	The purpose of this item is to identify persons who have some problems with remembering or thinking that contribute to difficulty in doing their daily activities. They can have a problem finding their way around, or the problem can be that they can't concentrate on what they are doing, or they may forget where they are or what month it is. They may not remember what someone just said to them or they may seem confused or frightened about most things. Any difficulty with remembering, concentrating or understanding what is going on around them that they or family members (if the family member is the respondent) consider a problem should be captured. We do not intend to capture difficulties remembering or concentrating because of common everyday situations such as high workload or stress, or as a result of substance abuse. Definitions: Remembering refers to an individual using his/her memory capacity in order to recall what has happened around them. It means the individual can bring to mind or think again about something that has taken place in the past (either the recent past or further back). In connection with younger people, remembering is often associated with storing facts learned in school and being able to retrieve them when needed.
WG5	Do you have difficulty (with self-care such as) washing all over or dressing?	The purpose of this item is to identify persons who have some problems with taking care of themselves independently. Washing and dressing represent tasks that occur on a daily basis and are very basic activities. Definitions: Washing all over refers to the process of cleaning one's entire body (usually with soap and water) in the usual manner for the culture. The washing activity includes cleaning hair and feet, as well as gathering any necessary items for bathing such as soap or shampoo, a wash cloth, or water. Dressing refers to all aspects of putting clothing or garments on the upper and lower body including the feet if culturally appropriate. Gathering clothing from storage areas (e.g. closet, dressers), securing buttons, tying knots, zipping, etc., should be considered part of the dressing activity.
WG6	Using your usual (customary) language, do you have difficulty communicating, for example understanding or being understood?	The purpose of this item is to identify persons who have some problems with talking, listening or understanding speech such that it contributes to difficulty in doing their daily activities. They can have a problem making themselves understood, or the problem may be that they can't understand people who talk to them or try to communicate with them in other ways. Definitions: Communicating refers to a person exchanging information or ideas with other people through the use of language. They may use their voices for their exchange or make signs or write the information they want to exchange. Communication can be interrupted at numerous places in the exchange process. It may involve mechanical problems such as hearing impairment or speech impairment, or it may be related to the ability of the mind to interpret the sounds that the auditory system is gathering and to recognize the words that are being used. The intention is not to include communication problems due to non-native or unfamiliar

Question No.	Question	Guide for completion
		language.

I5002- I5017

The table below provides guidelines for completing questions I5002 to I5017 which relate to difficulties the respondent may have doing certain activities because of her or his HEALTH. It covers difficulties with: mobility, hand and arm use, self-care, seeing, hearing, pain, sleep and energy, breathing, affect, interpersonal relationships, handling stress, communication, cognition, household tasks, community and citizenship participation, caring for others, work & schooling.

Respondents should answer these questions WITHOUT TAKING INTO ACCOUNT people who help them, any assistive devices or modifications used. Medication taken in a regular basis for symptom control of diseases, for instance, for chronic pain, high blood pressure, Parkinson's disease, asthma or sleep disturbances can be taken into account.

For all questions you should:

- Read aloud all response options to the respondent and
- Circle only one response option.

Question No.	Question	Guide for completion
I5002	How much difficulty do you have moving around because of your health?	Respondents should evaluate the difficulties they have in moving around in general because of their health and not taking any personal assistance, aids or modifications into account. Difficulties include moving around outside the house to get to different places, such as the workplace or places of worship. Example: an older person with arthritis has difficulties with moving around and uses crutches the respondent should describe the extent of the difficulties without the crutches.
15003	How much difficulty do you have learning a new task because of your health?	Respondents should evaluate the difficulties they have in learning a new task, such as acquiring new information at home, school, work, or at leisure because of their health and not taking any personal assistance, aids or modifications into account. Example: a person encounters difficulties with learning new tasks after a stroke and needs support from health professionals the respondent should describe how the extent of the difficulties without support of health professionals.
I5004	Because of your health, how much difficulty do you have toileting?	Respondents should evaluate the difficulties they have in toileting, e.g. opening clothes before, using a toilet or cleaning oneself afterwards, because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with Dementia has important difficulties with toileting and needs the help of a personal assistant the respondent should describe the extent of the difficulties without considering help of the personal assistant.
15005	Because of your health, how much difficulty do you have on starting, sustaining and ending a conversation?	Respondents should evaluate the difficulties they have on starting, sustaining or ending a conversation because of their health and not taking any personal assistance, aids or modifications into account. Example: a person has difficulties understanding the wife after a stroke but can manage it because she speaks slowly the respondent should describe the

		extent of the difficulties when the wife speaks as
		usual.
15006	Because of your health, how much difficulty do you have doing things that require the use of your hands and fingers, such as picking up small objects or opening a container?	The question refers to difficulties in handling objects, picking up, manipulating and releasing them using one's hand, fingers and thumb, such as required to lift coins off a table or turn a dial or knob. Respondents should evaluate the difficulties they have in doing things that require the use of hands and fingers because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with rheumatoid arthritis has difficulties using hands and fingers but no problems opening a bottle using an assistive device → the respondent should describe the extent of the difficulties without using assistive devices.
15007	How much difficulty do you have sleeping because of your health?	Respondents should evaluate the difficulties they have in sleeping, such as difficulties falling asleep or waking up too early, because of their health and not taking any personal assistance, aids or modifications into account. Example: a person has difficulties to fall asleep and uses relaxation techniques to handle them the respondent should describe the extent of the difficulties without the use of relaxation techniques.
15008	How much difficulty do you have with shortness of breath because of your health?	Respondents should evaluate the difficulties they have with shortness of breath, for instance after climbing steps, because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with a heart disease has shortness of breath after exercising or doing vigorous activities and avoids such activities \rightarrow the respondent should describe the extent of the difficulties with shortness of breath in general.
15009	How much difficulty do you have doing household tasks because of your health?	Respondents should evaluate the difficulties they have in doing household tasks, such as doing laundry, cleaning or putting out the garbage, because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with spinal cord injury has important difficulties in getting housework done but has a personal assistant takes care of it the respondent should describe the extent of the difficulties without the help of the personal assistant.
15010	How much difficulty do you have providing care or support for others because of your health?	Providing care or support for others refers to assisting household members and others with learning, communicating, self-care, and moving within the house or outside, for instance children. Respondents should evaluate the difficulties they have in providing care or support for others because of their health and not taking any personal assistance, aids or modifications into account. Example: a mother cannot help her small children bathing and dressing after a stroke but gets enough support from friends and neighbours → the respondent should describe the extent of the difficulties without the help and support from friends

		and neighbours.
		The question includes being involved in town
I5011	Because of your health, how much difficulty do you have with joining community activities, such as festivities, religious or other activities?	meetings, fairs, leisure or sport activities in the town, neighbourhood or community. Respondents should evaluate the difficulties they have in joining community activities because of their health and not taking any personal assistance, aids or modifications into account. Example: a person in a wheelchair can join festivities because of the support of the family → the respondent should describe the extent of the difficulties without the support of the family.
I5012	How much difficulty do you have with your day to day work or school because of your health?	Interviewer: This question should only be asked if I2005 = 2, 3, 4 or 5 or if I2002 = 2. Respondents should evaluate the difficulties they have in day-to-day work or school because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with depression cannot do things as required anymore but gets support from her or his supervisor → the respondent should describe the extent of the difficulties without the support from supervisors.
I5013	To what extent do you feel sad, low or depressed because of your health?	Respondents should evaluate the difficulties they have in with feeling sad, low or depressed because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with cancer feels very often sad, low or depressed but gets support from the spouse the respondent should describe the extent of the difficulties not taking into account the support from the spouse.
I5014	To what extent do you feel worried, nervous or anxious because of your health?	Respondents should evaluate the difficulties they have with feeling worried, nervous or anxious because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with chronic pain feels worried, nervous or anxious the respondent should describe the extent of the difficulties not taking into account any kind of support.
I5015	Because of your health, how much difficulty do you have getting along with people who are close to you, including your family and friends?	Getting along with people who are close includes showing respect, warmth, appreciation, and tolerance in relationships; responding to criticism and social cues in relationships; and using appropriate physical contact. Respondents should evaluate the difficulties they have in getting along with people who are close to them because of their health and not taking any personal assistance, aids or modifications into account. Example: a person has increasing difficulties getting along with people who are close after a stroke but can handle this when the spouse is present → the respondent should describe the extent of the difficulties not taking into account the support of the spouse.
I5016	Because of your health, how much difficulty do you have coping with all the things you	Problems include not being able to keep up at work or education, being late for appointments, or not being able to get housework done, among others.

	have to do?	Respondents should evaluate the difficulties they
		have in coping with all the things they have to do
		because of their health and not taking any personal
		assistance, aids or modifications into account.
		Example : a person with Parkinson's disease copes
		better with all the things she or he has to do with the
		support of family and friends → the respondent
		should describe the extent of the difficulties without
		the support of family and friends.
		Respondents should evaluate how many bodily aches
		or pains they have because of their health without
		taking any personal assistance, aids or modifications
I5017	How many bodily aches or	into account.
	pains do you have?	Example : a person has chronic pain and uses
		meditation techniques to cope with it → the
		respondent should describe how much pain he/she
		has without using meditation techniques.

I5018- I5045 Health conditions

The table below provides guidelines for completing questions I5018 to I5045, which relate to health conditions. It must be noted that this list focusses on the most burdensome health conditions worldwide and should be tailored to national needs to capture the most prevalent or serious health conditions in the national setting.

For each health condition four columns are presented. In column "a" the answer to question a "Do you have [DISEASE NAME]?" is entered. Questions b, c and d (next columns) are only asked for the health conditions endorsed in question a.

- Question b: respondent should answer whether any doctor or any other health professional has ever told them that they have the health condition or problem.
- Question c: respondent should answer whether he or she has been given any medication for the health condition or problem in the last 12 months. Medication is defined in the ICF as "any natural or human-made object or substance gathered, processed or manufactured for medicinal purposes." In this question, medicines include natural (e.g. plants extracts) or human-made (e.g. synthetic drugs produced in laboratories) substances used in the treatment or cure of the disease or health problem, used for a limited duration for acute problems, or on a regular basis for chronic diseases.
- Question d: respondent should answer whether he or she has been given any
 other kind of treatment, beyond medicines, for the health conditions or
 problem in the last 12 months. This might include, for instance,
 physiotherapy, occupational therapy, hot and cold therapies, counselling,
 psychotherapy, etc.

Question No.	Question	Guide for completion	
The respons	The response options for the following questions are always 1=Yes; 5=No.		
Please circle	the appropriat	e response for each question.	
15018	Vision loss	Vision loss is the absence of vision or a decreased ability to see to a degree that causes problems not fixable by usual means, such as glasses. It can happen either acutely (i.e. abruptly) or chronically (i.e. over a long period of time) for instance due to cataracts, a disease in which the lenses of the eyes become cloudy and opaque, causing partial or total blindness. The term blindness is used for complete or nearly complete vision loss. If the respondent does not understand the term "vision loss", describe it as problems with having reduced vision, even when using the best	

Question No.	Question	Guide for completion
1101		possible corrective lenses or glasses.
I5019	Hearing loss	Deafness, hearing impairment, or hearing loss is a partial or total inability to hear caused by many different factors, including but not limited to age, noise, illness, chemicals and physical trauma. If the respondent does not understand the term "hearing loss", describe it as problems with having diminished sensitivity to the sounds that are normally heard.
15020	High Blood Pressure (Hypertension)	Hypertension or high blood pressure is a persistent elevation of the pressure in the arteries that may impair heart, brain or kidneys function over time.
15021	Diabetes	Diabetes is also called diabetes mellitus or "high blood sugar". If the respondent does not understand the term "diabetes", describe the condition as a chronic (or long-term) condition whereby a person has problems producing insulin. Insulin helps to turn what we eat into the energy we need to survive and to maintain the correct levels of sugar in our blood. People with diabetes eventually develop a high blood sugar level, which can lead to problems with blood vessels, eyes, kidneys, nerves and heart.
I5022	Arthritis, arthrosis	"Arthritis" is a disease of joints (for example, fingers/wrists, knees, hips, lower back). Common symptoms are swelling, stiffness, redness, heat and/or pain. If the respondent does not understand the term "Arthritis", describe the common symptoms: swelling, stiffness, redness, heat and/or pain in fingers/wrists, knees, hips, lower back.
I5023	Heart Disease, coronary disease, heart attack	Heart disease or angina (angina pectoris) is a symptom indicating chronic heart disease. If the respondent does not understand the terms, describe the condition as the presence of temporary pain in the chest that can radiate to other parts of the upper body, mainly to the left arm.
I5024	Chronic bronchitis or Emphysema	Chronic bronchitis is part of a breathing disease called COPD (Chronic Obstructive Pulmonary Disease). Bronchitis means swelling in the air passages that connect the windpipe (trachea) and lungs. This inflammation means the walls of the bronchi are swollen and filled with extra sticky mucus. Airflow into and out of the lungs is partly blocked because of the swelling and extra mucus. Emphysema is also part the lung disease called COPD. The place in the lungs where oxygen is exchanged is damaged - and usually means the person has shortness of breath and a barrel-shaped chest. If the respondent does not understand the term "chronic lung disease", describe it as problems with breathing - usually including cough and sputum production. This does not include asthma - (see I5025).
I5025	Asthma, allergic respiratory disease	Asthma is a disease characterized by recurrent attacks of breathlessness and wheezing, which vary in severity and frequency from person to person. In an individual, they may occur from hour to hour and day to day. This condition is due to inflammation of the air passages in the lungs and affects the sensitivity of the nerve endings in the airways so they become easily irritated. In an attack, the lining of the passages swell causing the airways to narrow and reducing the flow of air in and out of the lungs. If the respondent does not understand the term "asthma", describe it as recurrent attacks of breathlessness and wheezing.
I5026	Back pain or disc problems	Back pain is pain felt in the back that may have a sudden onset or can be a chronic. It can be constant or intermittent, stay in one place or radiate to other areas. It may be a dull ache, or a sharp or piercing or burning sensation. The pain may radiate into the arms and hands as

Question No.	Question	Guide for completion
		well as the legs or feet, and may include symptoms other than pain. These symptoms may include tingling, weakness or numbness.
15027	Migraine (recurrent headaches)	Migraine is a primary headache disorder that most often begins at puberty and most often affects those aged between 35 and 45 years. It is caused by the activation of a mechanism deep in the brain that leads to release of pain-producing inflammatory substances around the nerves and blood vessels of the head. Migraine is recurrent, often life-long, and characterized by "attacks". Attacks include features such as headache of moderate or severe intensity; nausea (the most characteristic); one-sided and/or pulsating quality; aggravated by routine physical activity; with duration of hours to 2-3 days; attack frequency is anywhere between once a year and once a week. If the respondent does not understand the term "migraine", describe it as recurrent headaches of moderate or severe intensity, of long duration, and usually including nausea.
15028	Stroke, e.g. cerebral bleeding	Strokes are caused by disruption of the blood supply to the brain. This may result from either blockage (ischaemic stroke) or rupture of a blood vessel (haemorrhagic stroke). If the respondent does not understand "stroke" explain that it is an injury to the brain – usually a sudden and severe attack. It can cause permanent or temporary paralysis (inability to move, usually down one side of the body) and loss of speech.
15029	Depression or Anxiety	"Depression" can be characterized by a feeling or spell of dismally low spirits: blues, dejection, despondence, doldrums, downheartedness, dumps, funk, gloom, glumness, heavy-heartedness, melancholy, miserableness, mournfulness, or unhappiness over a period of time (weeks, months or years). Although depression is common, it often goes undetected because it may be attributed to a person's physical, social or economic difficulties. "Anxiety" is an unpleasant state of inner turmoil, often accompanied by nervous behaviour, such as pacing back and forth, somatic complaints and rumination. Anxiety is a feeling of fear, worry, and uneasiness, usually generalized and unfocused as an overreaction to a situation that is only subjectively seen as menacing. It is often accompanied by restlessness, fatigue, problems in concentration, and muscular tension.
15030	Leprosy	Leprosy is a chronic infectious disease caused by Mycobacterium leprae, an acid-fast, rod-shaped bacillus. The disease mainly affects the skin, the peripheral nerves, mucosa of the upper respiratory tract and also the eyes. Leprosy is curable and treatment provided in the early stages averts disability. Left untreated, leprosy can be progressive, causing permanent damage to the skin, nerves, limbs and eyes.
I5031	Amputation	Amputation is the removal of a body extremity by trauma, or surgery. As a surgical measure, it is used to control pain or a disease process in the affected limb, such as malignancy or gangrene. A transplant or a prosthesis are the only options for recovering the loss.
I5032	Polio	Poliomyelitis (polio) is a highly infectious viral disease, which mainly affects young children. Initial symptoms of polio include fever, fatigue, headache, vomiting, stiffness in the neck, and pain in the limbs. In a small proportion of cases, the disease causes paralysis, which is often permanent. Polio can only be prevented by immunization.
I5033	Gastritis or Ulcer	Gastritis is an inflammation of the lining of the stomach, and has many possible causes. Main acute causes are excessive alcohol

Question No.	Question	Guide for completion
		consumption or prolonged use of nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin or ibuprofen. Chronic causes are infection with bacteria, primarily Helicobacter pylori, chronic bile reflux, and stress; certain autoimmune disorders can cause gastritis as well. Abdominal pain is the most common symptom; the pain may be dull,
I5034	Tumour or cancer (including blood cancer)	vague, burning, aching, gnawing, sore, or sharp. "Cancer" is a generic term for a large group of diseases that can affect any part of the body. Other terms used are "malignant tumours" and "neoplasms". One defining feature of cancer is the rapid creation of abnormal cells that grow beyond their usual boundaries, and which can then invade adjoining parts of the body and spread to other organs. This process is referred to as metastasis.
15035	Trauma	Trauma relates to road traffic accidents or events/accidents in the home, school or workplace that resulted in bodily injury limiting activities. If the respondent first answers 'No', probe by saying: "Trauma could have been an accident in which you were involved either as the occupant of a motor vehicle, or when you were riding a motorcycle/scooter, rickshaw or bicycle, or walking."
I5036	Dementia	Dementia is a serious loss of global cognitive ability in a previously unimpaired person, beyond what might be expected from normal aging. It may be static, the result of a unique global brain injury, or progressive, resulting in long-term decline due to damage or disease in the body. Affected cognitive areas can be memory, attention, language, and problem solving.
15037	Kidney diseases	Kidney diseases are disorders that affect the kidneys, the two organs that remove waste products, produce certain hormones, and regulate the level of chemicals in blood. There are at least six warning signs that may indicate kidney disease: burning or difficulty during urination; an increase in the frequency of urination; passage of blood in the urine; puffiness around the eyes, swelling of the hands and feet; pain in the small of the back just below the ribs; and high blood pressure.
15038	Skin diseases, e.g. psoriasis	Skin diseases may have a serious impact on people's quality of life, causing lost productivity at work and school, and discrimination due to disfigurement. Skin changes may also indicate the presence of more serious diseases that need treatment. A common and chronic skin disease is psoriasis. It is a build-up of excess skin tissue that looks red and thick and is covered with silvery scales. It first appears on the elbows and knees, but can spread to other parts of the limbs and even the trunk. Certain forms affect particular areas like the hands, scalp or the joints.
15039	Tuberculosis	Tuberculosis is an infectious disease caused by a bacterium and it usually affects the lungs, but all other body organs can also be involved (such as the central nervous system, bones and joints). Methods of detecting TB include examination of the sputum (that is, when a health care provider takes a sample of the substance spit out from a deep cough and sends it to a laboratory for analysis) or an X-ray picture of the chest.
15040	Mental (psychiatric) or behavioural disorders	Mental and behavioural disorders comprise a broad range of problems, with different symptoms. However, they are generally characterized by some combination of abnormal thoughts, emotions, behaviour and relationships with others. Examples are schizophrenia, depression, mental retardation and disorders due to drug abuse. Most of these disorders can be successfully treated.

Question No.	Question	Guide for completion
I5041	Claan problems	Sleeping problems include problems falling asleep, waking up
	Sleep problems	frequently during the night or waking up too early in the morning.
I5042	Tinnitus	Tinnitus comprises a ringing, roaring, or buzzing in the ears that lasts
	Tillillus	for 5 minutes or longer over at least 12 months.
I5043		Ask the respondent whether he or she has any other health condition
	Other (checify)	or disease not mentioned in the list.
	Other (specify)	Write down the health condition or disease clearly in CAPITALS.
		Check spelling and use margins for additional space.
I5044		Ask the respondent whether he or she has any other health condition
	Other (specify)	or disease not mentioned in the list.
	Other (specify)	Write down the health condition or disease clearly in CAPITALS.
		Check spelling and use margins for additional space.
15045		Ask the respondent whether he or she has any other health condition
	Other (specify)	or disease not mentioned in the list.
	Other (specify)	Write down the health condition or disease clearly in CAPITALS.
		Check spelling and use margins for additional space.

3000B PERSONAL ASSISTANCE, ASSISTIVE PRODUCTS AND FACILITATORS

Introduction

This module asks detailed questions about assistance needs with day-to-day activities at home or outside, and assistive products and modifications used and needed.

Skip patterns

It is important to closely follow the skip patterns in this module, as they have been designed to make sure the different categories of problematic environmental factors are identified. Please pay attention to the "guide for completion" where **bold** writing refers to responses that had been given in entrance questions of Module 3000 A.

I3036- I3039 Personal Assistance

The table below provides guidelines for completing questions I3036 to I3039, which relate to personal assistance.

Question No.	Question	Guide for completion
I3036	You told me that there are people assisting you. How many of these people are paid or belong to charity organizations?	 This question targets how many people assisting the respondent are paid helpers, such as home nurses, social services workers or employees of charities. Record the number of persons.
I3037	How many of these people are not paid, such as family members, friends or volunteers?	 This question targets how many people assisting the respondent are non-paid helpers, such as family members, friends, neighbours or volunteers. Record the number of persons.
13038	You told me that there are people assisting you. Do you think you need additional assistance with your day to day activities at home or outside?	 This question targets the need of more people to assist the respondent with day to day activities at home or outside, such as cleaning, washing oneself, cooking, shopping or using transportation, including family and friends but also paid helpers. Circle the appropriate response: 1=Yes; 5=No Skip pattern: Go to I3040
13039	You told me that there are no people assisting	This question targets the need of people to assist the respondent with day to day activities at home or outside, such as cleaning, washing oneself, cooking, shopping or

Question No.	Question	Guide for completion
	you. Do you think you need someone to assist you?	using transportation, including family and friends but also paid helpers. • Circle the appropriate response: 1=Yes; 5=No

I3040- I3074 Assistive devices

The table below provides guidelines for completing questions I3040 to I3074 that relate to assistive devices. $\,$

Question No.	Question	Guide for completion
13040	You told me that you use assistive products. Do you use any assistive products to get around, to do selfcare or to support (parts of) your body?	This question targets the use of any assistive technologies to help the person get around or for self-care, such as cane, crutch, wheelchair, grasping bars hand, and arm brace. Skip pattern: If 1 go to I3041; If 5 got to I3043
I3041	Which ones do you use?	 This question targets which assistive products are used to help the person get around or for self-care, such as cane, crutch, wheelchair, grasping bars hand, and arm brace. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13042	In addition to these, do you think you need other assistive products to get around, to do self-care or to support (parts of) your body?	 This question targets whether the person needs any additional assistive products to help him or her get around or for self-care Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to I3045
I3043	You told me you do not assistive products to get around, to do selfcare or to support (parts of) your body? Do you think you need any?	 This question targets whether the person needs any assistive products to help him or her get around or for self-care. Response options: 1=Yes, 5=No Skip pattern: If 5 go to I3045
I3044	Which are the assistive devices you need to help you get around or for self-care?	 Read aloud all response options to the respondent and use the SHOWCARD Circle all appropriate response options; more than one option can be selected.
I3045	Do you use any assistive products to help you manage seeing problems?	 This question targets the use of any assistive products to help the person manage seeing problems such as glasses or contact lenses, Braille reading materials, or talking books. Response options: 1=Yes, 5=No Skip pattern: If 1 go to I3046; If 5 go to I3048
I3046	Which ones do you use?	 Question targets which assistive products the person uses to manage seeing problems such as glasses or contact lenses, Braille reading materials, or talking books. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13047	In addition to these, do you think you need any other assistive product to help you manage seeing problems?	 This question targets the need of additional assistive products to help the person manage seeing problems such as glasses or contact lenses, Braille reading materials, or talking books. Circle all appropriate response options; more than one

Question No.	Question	Guide for completion
		option can be selected.
		Skip pattern: Go to I3050
I3048	You told me you do not use anything to help you manage seeing problems. Do you think you need any assistive product, such as glasses?	 This question targets whether the person needs any assistive products to manage seeing problems. Response options: 1=Yes, 5=No Skip pattern: If 5 go to I3050
I3049	Which are the assistive products for seeing that you need?	 Question targets which assistive products the person needs to manage seeing problems, such as glasses or contact lenses, Braille reading materials, or talking books. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13050	Do you use any assistive products to help you hear or communicate better?	 This question targets the use of any assistive products to help the person communicate better such as hearing aids, phone related devices, amplifiers or a visual or vibrating alarm. Response options: 1=Yes, 5=No Skip pattern: If 1 go to I3051; If 5 got to I3053
I3051	Which ones do you use?	 This question targets which assistive products the person uses to communicate better such as hearing aids, phone related devices, amplifiers or a visual or vibrating alarm. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options, more than one option can be selected.
I3052	In addition to these, do you think you need other assistive products to help you hear and communicate better?	 This question targets which additional assistive products the person needs to communicate better, such as hearing aids, phone related devices, amplifiers or a visual or vibrating alarm. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 13055
I3053	You told me you do not use assistive products for hearing and communication. Do you think you need any, such as a visual or vibrating alarm?	 This question targets whether the person needs any assistive products to communicate better such as hearing aids, phone related devices, amplifiers or a visual or vibrating alarm. Response options: 1=Yes, 5=No Skip pattern: If 5 go to I3055
I3054	Which are the assistive products for hearing and communication you need?	 This question targets which assistive products the person needs to communicate better, such as hearing aids, phone related devices, amplifiers or a visual or vibrating alarm. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
I3055	Do you use any assistive products to help you staying	This question targets the use of any assistive products to help the person manage cognitive problems, such as problems with getting oriented, attention or memory.

Question No.	Question	Guide for completion
No.	oriented or managing memory and attention problems?	Examples of assistive products are pill organisers, recorders or simplified mobile phones. • Response options: 1=Yes, 5=No
		Skip pattern: If 5 go to I3058
13056	Which ones do you use?	 This question targets which assistive products the person uses to help him or her manage cognitive problems, such as problems with getting oriented, attention or memory. Examples of assistive products are pill organisers, recorders or simplified mobile phones. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
I3057	In addition to these, do you think you need other assistive products to help you staying oriented or managing memory and attention problems?	 This question targets which additional assistive products the person needs to manage cognitive problems, such as problems with getting oriented, attention or memory. Examples of assistive products are pill organisers, recorders or simplified mobile phones. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to I3060
13058	You told me you do not use assistive products for staying oriented or managing memory and attention problems. Do you think you need any, such as pill organizers or recorders?	 This question targets which assistive products the person would need to manage cognitive problems, such as problems with getting oriented, attention or memory. Examples of assistive products are pill organisers, recorders or simplified mobile phones. Response options: 1=Yes, 5=No Skip pattern: If 5 go to I3060
13059	Which are the assistive products you need for staying oriented or managing memory and attention problems?	 This question targets which assistive products the person would need to manage cognitive problems, such as problems with getting oriented, attention or memory. Examples of assistive products are pill organisers, recorders or simplified mobile phones. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13060	Are there any assistive products or modifications that make it easier for you to work, such as a computer with large print or voice recognition, adjustable height desks or modified working hours?	 This question targets whether the person has assistive products or modifications that make it easier to work, such as a computer with large print or voice recognition, adjustable height desks or modified working hours. Response options: 1=Yes, 5=No Skip pattern: If 5 got to I3063
I3061	Which ones do you use?	 This question targets which assistive products or modifications the person uses to make it easier to work, such as a computer with large print or voice recognition, adjustable height desks or modified working hours. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.

Question No.	Question	Guide for completion
13062	In addition to these, do you think there are any other things that would make it easier for you to work?	 This question targets which assistive products or modifications the person additionally needs to make it easier to work, such as a computer with large print or voice recognition, adjustable height desks or modified working hours. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options, more than one option can be selected. Skip pattern: Go to 13065
I3063	You told me you have no assistive products or modifications that make it easier for you to work. Do you think you need any aid or modification?	 This question targets if the person needs any assistive products or modifications to make it easier to work, such as a computer with large print or voice recognition, adjustable height desks or modified working hours. Response options: 1=Yes, 5=No Skip pattern: If 5 go to I3065
13064	Which are the assistive products or modifications for work you need?	 This question targets which assistive products or modifications the person needs to make it easier to work, such as a computer with large print or voice recognition, adjustable height desks or modified working hours. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13065	Are there any assistive products or modifications that make it easier for you to get an education, such as portable spell checkers, extra time for exams or accessible classrooms?	 Ask only if the respondent is receiving education. The question targets whether there are any assistive products or modifications that make it easier to get an education, such as portable spell checkers, extra time for exams or accessible classrooms. Response options: 1=Yes, 5=No Skip pattern: If 5 got to I3068
13066	Which ones do you use?	 The question targets which assistive products or modifications the person to make it easier to get an education, such as portable spell checkers, extra time for exams or accessible classrooms. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13067	In addition to these, do you think there are any other things that would make it easier for you to get an education?	 The question targets whether the person needs additional assistive products or modifications to make it easier to get an education, such as portable spell checkers, extra time for exams or accessible classrooms. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 13070

Question No.	Question	Guide for completion
13068	You told me you have no assistive products or modifications that make it easier for you to get an education. Do you think you need any assistive products or modifications that make it easier for you to get an education?	 The question targets whether the person needs assistive products or modifications to make it easier to get an education, such as portable spell checkers, extra time for exams or accessible classrooms. Response options: 1=Yes, 5=No Skip pattern: If 5 go to I3070
13069	Which are the assistive products or modifications you need?	 The question targets which assistive products or modifications are needed to make it easier to get an education, such as portable spell checkers, extra time for exams or accessible classrooms. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13070	Are there any modifications that make it easier for you to be at home, such as ramps, grab bars, or any other accessibility features?	 The question targets whether there are any assistive products or modifications that make it easier to be at home, such as ramps, grab bars, or any other accessibility features. Response options: 1=Yes, 5=No Skip pattern: If 5 got to I3073
I3071	Which ones do you use?	 The question targets which assistive products or modifications make it easier to be at home, such as ramps, grab bars, or any other accessibility features. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
I3072	In addition to these, do you think there are any other things that would make it easier for you at home?	 The question targets whether the person needs any additional assistive products or modifications that make it easier to be at home, such as ramps, grab bars, or any other accessibility features. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 13075
13073	You told me you have no assistive products or modifications that make it easier for you to be at home. Do you think you need any modifications?	 The question targets if the person needs any assistive products or modifications that make it easier to be at home, such as ramps, grab bars, or any other accessibility features Response options: 1=Yes, 5=No Skip pattern: If 5 go to I3075
I3074	Which are the modifications that you need at home?	 The question targets which assistive products or modifications that make it easier to be at home are needed, such as ramps, grab bars, or any other accessibility features. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.

Question No.	Question	Guide for completion
13075	Are there any modifications that make it easier for you to participate in community activities such as accessible public transportation or accessible public toilets?	 The question targets if there are any assistive products or modifications that make it easier to participate in community such as accessible public transportation or accessible public toilets. Response options: 1=Yes, 5=No Skip pattern: If 5 got to I3078
13076	Which ones do you use?	 The question targets which assistive products or modifications that make it easier to participate in community such as accessible public transportation or accessible public toilets. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13077	In addition to these, do you think there are any other things that would make it easier for you to participate in community activities?	 The question targets which additional assistive products or modifications that make it easier to participate in community are needed such as accessible public transportation or accessible public toilets Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 16001
13078	You told me you have no modifications that make it easier for you to participate in the community. Do you think you need any modifications to make it easier to participate in the community?	 The question targets if any assistive products or modifications that make it easier to participate in community are needed, such as accessible public transportation or accessible public toilets. Response options: 1=Yes, 5=No Skip pattern: If 5 go to I6001
13079	Which are the modifications you need?	 The question targets which assistive products or modifications that make it easier to participate in community are needed, such as accessible public transportation or accessible public toilets. Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.

6000 HEALTH CARE UTILISATION

Introduction

This module assesses the respondent's and the household's experiences with the health system. In particular, questions are asked about:

- Needing and not getting inpatient and outpatient health care;
- Responsiveness of health care professionals and systems to the respondent's health care needs.

I6001-I6003 Need of health care

The table below provides guidelines for completing questions I6001 to I6003 that relate to needing health care. Use SHOWCARD (Appendix Response Scales) as needed.

Question	Question	Guide for completion
No.		

Question No.	Question	Guide for completion
I6001	How long ago was the last time that you needed health care?	 "Needed" means the last time the respondent felt she or he had a health problem and required a health professional. Record years and/or months. If less than 1 year ago, enter '00' for years ago If 'Don't know', go to I6002.
16002	If 'Don't know' to I6001: Was it more than 3 years ago?	 Ask only if response to I6001 is 'Don't know'. If 'Yes', probe, asking about any type of health care from a doctor, nurse, pharmacist, traditional healer, midwife, or other. Skip pattern: If 1 go to I7001
16003	Thinking about health care you needed in the last 3 years, where did you go most often when you felt sick or needed to consult someone about your health?	 Record only one location in which the respondent most frequently received health care over the last 3 years. Read the response categories to the respondent only if she/he is having troubles responding. A "medical doctor" can include general practitioner or specialist including, for example, gynaecologist, psychiatrist or other. Use the local term for "traditional healer". Circle the appropriate response, only one answer allowed. If the respondent answer is not listed in the response options, select "Other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.

I6004- I6009 Inpatient hospital care

The table below provides guidelines for completing questions I6004 to I6009, which relate to health care that required an overnight stay in a health care facility over the last 3 years and health care received over the last 12 months.

Question No.	Question	Guide for completion
16004	In the last 3 years, have you ever stayed overnight in a hospital, rehabilitation facility or long-term care facility?	"Overnight" stays could be one night or longer in a hospital, health centre, health clinic, hospice or long-term care facility (old persons home, nursing home or other name – use local terms). Skip pattern: If 5 go to I6010
I6005	When was the last overnight stay in a hospital or long-term care facility?	 Ask respondent to try to remember when s/he had her/his last overnight stay (anytime in the last 3 years). If she/he only knows a date, calculate how long ago and repeat back for verification. For example, if you are interviewing in June 2014 and the respondent says, "I think it was around January 2012", you could calculate that date to say, "So that was about 2 and a half years ago"? If the respondent stayed overnight when visiting someone in hospital or because a child of hers/his was in hospital, skip to I6010. Skip pattern: If more than 3 years ago, go to I6010
I6006	Over the last 12 months, how many different times were you a patient in a hospital, rehabilitation facility or long-term care facility for at least one night?	 Enter the total number of times the respondent has stayed overnight in a health care facility because of her/his own health care needs or situation. Emphasize the time frame - the number of overnight stays in the last 12 months from the day of the interview. The overnight stay could be one night or multiple nights. Skip pattern: If "00" (no overnight stays), go to 16010
16007	In the last 12 months, has there been a time when you needed to stay overnight in a	 Emphasize the time frame – was there a time when the respondent needed overnight care but did not get care in the last 12 months from the day of the interview. Circle the appropriate response: 1=Yes; 5=No

Question No.	Question	Guide for completion
	health care facility but did not get that care?	Skip pattern: If 5 go to I6010
16008	What was the main reason you needed care, but did not get care?	 Record only one main reason, i.e. which health problem, for not having received the needed care. Read the response categories to the respondent only if she/he is having troubles responding. A SHOWCARD can be used if needed. Circle the appropriate response option, one answer allowed If the respondent answer is not listed in the response options, select "Other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.
16009	Which reason(s) best explains why you did not get health care?	 Record all reasons that the respondent indicates. Read the response categories to the respondent only if she/he is having troubles responding. If the respondent answer is not listed in the response options, select "Other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.

I6010 - I6020 Outpatient care & care at home

The table below provides guidelines for completing questions I6010 to I6020 that relate to health care received from a health care worker at a hospital (not including an overnight stay), health centre, clinic, private office or at home.

Question No.	Question	Guide for completion
I6010	Over the last 12 months, did you receive any health care NOT including an overnight stay in hospital, rehabilitation facility or long-term care facility?	 Determine if the respondent received any outpatient or home health care. This could be health care received in a clinic, hospital, dispensary, private office or at home, for example, but care which does not necessitate an overnight stay by the respondent outside of their home. The types of health care professionals they might have seen include a Medical Doctor (including gynaecologist, psychiatrist and other specialists), Nurse, Midwife, Dentist, Physiotherapist or Chiropractor, Traditional medicine practitioner (use local names), Pharmacist, or Home health visitor, to mention some common types of health care providers.
I6011	In total, how many times did you receive health care or consultation in the last 12 months?	Record the number of times the respondent received medical care or consultation - again in the outpatient or home setting - over the last 12 months.
I6012	Thinking about your last visit to a health care facility in the last 12 months: Which facility did you visit?	Read out all response options but circle only one option for the last visit.
16013	What was the name of this health care facility?	Write down the name of the health care facility used clearly and in CAPITALS. Check spelling and use margins for additional space.
I6014	Thinking about your last visit to a health care provider in the last 12 months: Who was the health care provider you visited?	 The types of health care professionals they might have seen include a Medical Doctor (including gynaecologist, psychiatrist and other specialists), Nurse, Midwife, Dentist, Physiotherapist or chiropractor, Traditional medicine practitioner (use local names), Pharmacist, or Home health visitor, to mention some common types of health care providers. Read the response categories to the respondent only if she/he is having troubles responding. Circle the appropriate response option, one answer allowed

Question No.	Question	Guide for completion
		 After this question substitute the type of health care provider selected by the patient when you see [health care provider] in brackets.
I6015	What was the sex of the [health care provider]?	 Substitute [health care provider] by the response to I6014 Circle the appropriate response option.
I6016	Was this visit to [health care provider] for a chronic (ongoing) condition, new condition, both or routine check-up?	 Substitute [health care provider] by the response to I6014. Circle the appropriate response option.
I6017	Which reason best describes why you needed this visit?	 Record only one main reason, i.e. which health problem, for having received the needed care. Read the response categories to the respondent only if she/he is having troubles responding. A SHOWCARD can be used if needed. Circle the appropriate response option, one answer allowed If the respondents answer is not listed in the response options, select "other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.
I6018	In the last 12 months, was there a time when you needed health care that did not require overnight stay in a health care facility, but did not get care?	Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 5, go to I6021
I6019	What was the main reason you needed care, even if you did not get care?	 Record only one main reason, i.e. which health problem, for not having received the needed care. Read the response categories to the respondent only if she/he is having troubles responding. A SHOWCARD can be used if needed. Circle the appropriate response option, one answer allowed If the respondent answer is not listed in the response options, select "other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.
I6020	Which reason(s) best explains why you did not get health care?	 Record all reasons that the respondent indicates. Read the response categories to the respondent only if she/he is having troubles responding. If the respondent answer is not listed in the response options, select "other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.

I6021- I6029 Responsiveness of health care system

Questions I6021 to I6029 target the respondent's opinion about and satisfaction with the health care in their country.

Question No.	Question	Guide for completion
16021	the amount of time you <u>waited</u> before being attended to?	 Respondent should rate the amount of time waited before being attended in the last visit to a health care provider. Read the response categories to the respondent and circle the appropriate response option.
16022	your experience of being treated respectfully?	 Respondent should rate how respectful they were treated in the last visit to a health care provider. Read the response categories to the respondent and circle the appropriate response option.

Question No.	Question	Guide for completion
16023	how <u>clearly</u> health care providers <u>explained</u> things to you?	 Respondent should rate how clearly health care providers explained things to them in the last visit to a health care provider. Read the response categories to the respondent and circle the appropriate response option.
16024	your experience of being involved in making decisions for your treatment?	 Respondent should rate their experience of being involved in decisions about treatment in the last visit to a health care provider. Read the response categories to the respondent and circle the appropriate response option.
16025	the way the health services ensured that you could talk privately to providers?	 Respondent should rate privacy and discretion ensured in last visit to a health care provider. Read the response categories to the respondent and circle the appropriate response option.
16026	the ease with which you could see a health care provider you were happy with?	 Respondent should rate how easy it was to see the health care provider they wanted in last visit to a health care provider. Read the response categories to the respondent and circle the appropriate response option.
I6027	the <u>cleanliness</u> in the health facility?	 Respondent should rate the cleanliness in the health facility in last visit to a health care provider. Read the response categories to the respondent and circle the appropriate response option.
The final 2 q country.	uestions in this module ask	about the respondent's satisfaction with health care in their
I6028	In general, how satisfied with how the health care services are run in your c [in your area] – are you satisfied, satisfied, neithe satisfied nor dissatisfied, dissatisfied, or very dissa	of satisfaction with the state of health care in their country. • Circle the appropriate response option. fairly
16029	How would you rate the value health care in your countries involves you in deciding value services it provides and wall provides them?	ry a citizen to get involved in making decisions that would affect the structure of the health system.

7000 WELL-BEING

Introduction

This module covers the respondent's thoughts about their life and well-being, including feelings of loneliness.

It includes the following three main assessments:

- quality of life
- Ioneliness
- subjective well-being

Duration

Attention was paid to include a short but informative module about quality of life, and well-being. This module will take a maximum of 10 minutes of interview time.

Quality of Life

WHO defines Quality of Life (QoL) as an individual's perception of her/his position in life in the context of the culture and value systems in which she/he lives and in relation to her/his goals, expectations, standards and concerns. It is a broad ranging concept affected in a complex way by the person's physical health, psychological state, personal beliefs, social relationships and her/his relationship to salient features of their environment.

The WHO Quality of Life (WHOQOL) instrument is used to measure 'QoL. The WHOQOL was designed for multiple cultural settings whilst allowing the results from different populations and countries to be compared. The questions have many uses, including use in medical practice, research, audit, and policy making. The eight questions included are suitable for calculating a quality of life score.

Loneliness

Four items of the UCLA Loneliness Scale, designed to measure one's subjective feelings of loneliness and feelings of social isolation, are included.

Well-Being

Subjective well-being is assessed with the day reconstruction method and a newly developed but experienced well-being measure, the HWB12, by Jacqui Smith and Arthur Stone (2011), a measure of 12 overall experiences of hedonic well-being referring to the previous day.

17001 - 17008 Quality of life

The table below provides guidelines for completing questions I7001 to I7008. All questions are from the WHO Quality of Life (WHOQOL) instrument, brief version.

Question No.	Question	Guide for completion
17001	In the <u>past 30 days</u> , how would you <u>rate your</u> <u>quality of life</u> ?	 Examine the way a respondent assesses his/her overall quality of life. Read the response options to the respondent and ask the respondent to choose the best one.
17002	How <u>satisfied</u> are you with <u>your health</u> ?	 Examine the way a respondent assesses his/her overall health. Read the response options to the respondent and ask the respondent to choose the best one.
17003	How <u>satisfied</u> are you with your ability to perform your daily living activities?	 Explore the respondent's ability to perform usual daily living activities. Daily living activities include: self-care and caring appropriately for property. Focus on the respondent's ability to carry out activities which he/she is likely to need to perform on a day-to-day basis. The degree to which people are dependent on others to help them in their daily activities is also likely to affect their quality of life.
17004	How <u>satisfied</u> are you <u>with yourself</u> ?	 Determine how the respondent feels about her/himself. Responses may range from feeling very positive (very satisfied) to feeling extremely negative (very dissatisfied) about herself/himself. Respondents may interpret this question in a way that is meaningful and relevant to her/his position in life. For example, self-esteem may depend on how a respondent functions at work, at home, or how she/he is perceived and treated by others. In some cultures self-esteem is the esteem felt within the family rather than individual self-esteem.
17005	How <u>satisfied</u> are you with your <u>personal</u> relationships?	 Determine the extent to which the respondent feels the companionship, love and support they desire from the intimate relationship(s) in their life. Include all types of loving relationships, such as close friendships, marriages and both heterosexual and homosexual partnerships. Determine the respondent's ability and opportunity to love, to be loved and to be intimate with others both emotionally and physically. Include: The extent to which the respondent feels they can share moments of both happiness and distress with loved ones, and a sense of loving and being loved. Physical aspects of intimacy such as hugging and touch.
17006	How <u>satisfied</u> are you <u>with the conditions of your living place</u> ?	 WHOQOL item Examine the principal place where a respondent lives (and at a minimum sleeps and keeps most of his/her possessions), and the way that this impacts on the person's life. Assess the quality of the dwelling on the basis of being comfortable, as well as affording the person a safe place to reside. Factors to be considered: Crowdedness; the amount of space available; cleanliness; opportunities for privacy; facilities available (such as electricity, toilet, running water); and the

Question No.	Question	Guide for completion	
		quality of the construction of the building (such as roof leaking and dampness). - Quality of the immediate neighbourhood around the home. • Phrase questions to include the usual word for 'home', where the person usually lives with his/her family. However, questions are phrased to include people who do not live in one place with their family, such as refugees, or people living in institutions. It would not usually be possible to phrase questions to allow homeless people to answer meaningfully.	
17007	Do you have <u>enough</u> <u>energy for everyday life</u> ?	 Determine the energy, enthusiasm and endurance the respondent has to perform daily living and other activities such as recreation. Reports may range from disabling tiredness to adequate levels of energy, to feeling really alive. Tiredness may result from a number of causes, for example illness, problems with nerves, depression or over-exertion. 	
17008	Do you have <u>enough</u> <u>money</u> to meet your needs?	 Ask this question regardless of the respondent's state of health or whether the person is employed or not. Determine the respondent's view of how his/her financial resources (and other exchangeable resources) and the extent to which these resources meet the needs for a healthy and comfortable life style. Focus on what the respondent can afford or cannot afford which might affect quality of life. Individual interpretation of "enough" and "meeting my needs" may vary greatly. Ensure that questions are framed to allow this variation to be accommodated. 	

17009 - 17012 Loneliness

The table below provides guidelines for completing questions I7009 to I7012. Questions of this part belong to the UCLA Loneliness Scale and have been designed to measure one's subjective feelings of loneliness as well as feelings of social isolation.

Question No.	Question	Guide for completion
17009	How alone do you feel in your life?	• Read aloud the response options to the respondent and circle the appropriate response option.
17010	How often do you feel that you lack companionship?	 Question intends to capture lack of companionship Read aloud the response options to the respondent and circle the appropriate response option.
I7011	How often do you feel left out?	 Question captures feeling of being left out by others Read aloud the response options to the respondent and circle the appropriate response option.
I7012	How often do you feel isolated from others?	 Question captures feeling isolated from others Read aloud the response options to the respondent and circle the appropriate response option.

I7013 -I7026 Subjective Well-Being

The table below provides guidelines for completing questions I7013 to I7026. All questions belong to the HWB12, by Jacqui Smith and Arthur Stone (2011), a measure of 12 overall experiences of hedonic well-being referring to the previous day. Before the interview begins, it is important to ask the respondent to take a few quiet seconds to recall his or her activities and experiences yesterday. It is also important to repeat "yesterday" and all response categories at least twice when asking questions I7013 to I7026.

Question No.	Question	Guide for completion
I7013	To begin, please tell me what time you woke up <u>yesterday</u> ?	The respondent may not know exactly when s/he woke up, so ask her/him to give her/his

Question No.	Question	Guide for completion
		best guess if s/he is reluctant to answer. • If s/he cannot answer, record '8888 Don't know time'.
17014	And what time did you go to sleep yesterday?	 The respondent may not know exactly when s/he went to sleep for the night, so ask her/him to give her/his best guess if s/he is reluctant to answer. If s/he cannot answer, record '8888 Don't know time'.
17015	Yesterday, did you feel happy? Would you say not at all, a little, somewhat, quite a bit, or very happy?	Read aloud the question to the respondent and circle the appropriate response option.
17016	Yesterday, did you feel enthusiastic? Would you say not at all, a little, somewhat, quite a bit, or very enthusiastic?	Read aloud the question to the respondent and circle the appropriate response option.
17017	Yesterday, did you feel content? Would you say not at all, a little, somewhat, quite a bit, or very content?	Read aloud the question to the respondent and circle the appropriate response option.
17018	Yesterday, did you feel angry? Would you say not at all, a little, somewhat, quite a bit, or very angry?	Read aloud the question to the respondent and circle the appropriate response option.
17019	Yesterday, did you feel frustrated? Would you say not at all, a little, somewhat, quite a bit, or very frustrated?	Read aloud the question to the respondent and circle the appropriate response option.
17020	Yesterday, did you feel tired? Would you say not at all, a little, somewhat, quite a bit, or very tired?	Read aloud the question to the respondent and circle the appropriate response option.
17021	Yesterday, did you feel sad? Would you say not at all, a little, somewhat, quite a bit, or very sad?	Read aloud the question to the respondent and circle the appropriate response option.
17022	Yesterday, did you feel stressed? Would you say not at all, a little, somewhat, quite a bit, or very stressed?	Read aloud the question to the respondent and circle the appropriate response option.
17023	Yesterday, did you feel lonely? Would you say not at all, a little, somewhat, quite a bit, or very lonely?	Read aloud the question to the respondent and circle the appropriate response option.
17024	Yesterday, did you feel worried? Would you say not at all, a little, somewhat, quite a bit, or very worried?	Read aloud the question to the respondent and circle the appropriate response option.
17025	Yesterday, did you feel bored? Would you say not at all, a little, somewhat, quite a bit, or very bored?	Read aloud the question to the respondent and circle the appropriate response option.
17026	Yesterday, did you feel pain? Would you say not at all, a little, somewhat, quite a bit, or very much?	Read aloud the question to the respondent and circle the appropriate response option.

8000 EMPOWERMENT

Introduction

This module covers aspects of empowerment and an assessment of personality traits.

Selfperception and

The questions about aspects of empowerment and personality traits include:

 Two questions of General Self-Efficacy Scale (GSES), proven to deliver enough information on self-efficacy, i.e., the extent to which people believe in their

Personality

- ability to deal with barriers and adversities.
- Two items of the Attitudes to Disability Scale (ADS), subscale gains, which have an explicitly positive focus and reflect positive gains in relation to self.
- The complete short version of the Big Five Inventory (BFI) is used to measure personality traits.
- Additionally, the Disability Module of the WHOQOL-BREF is used to estimate the impact of the disability experience on quality of life. Six items of the Disability Module of the WHOQOL-BREF, questions I8005 to I8010, are included in the present module and can be used together with five further items, questions I3026 to I3030 of Module 3000A, to estimate a score of the impact of the disability experience on quality of life. All questions of the Disability Module of the WHOQOL-BREF but two can be found in the MDS: The very first question about "Does your disability have a negative (bad) effect on your day-to-day life?" and the item "Are you satisfied with your changes to be involved in local activities?" have not been included.

Question No.	Question	Guide for completion
To what ex	tent would you agree with the	following statements about you?
I8001	To what extent would you agree with the statement that you are a reserved person?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
18002	To what extent would you agree with the statement that you are a generally trusting person?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
18003	To what extent would you agree with the statement that you tend to be a lazy person?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
I8004	To what extent would you agree with the statement that you are a relaxed person, a person that handles stress well?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
18005	To what extent would you agree with the statement that you are a person who has few artistic interests?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
18006	To what extent would you agree with the statement that you are an outgoing, sociable person?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
18007	To what extent would you agree with the statement that you are a person who tends to find fault with others?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
18008	To what extent would you agree with the statement that you are a person who does a thorough job?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
18009	To what extent would you agree with the statement that you are a person who gets nervous easily?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
18010	To what extent would you agree with the statement that you are a person who has an active imagination?	Question is part of the Big Five Inventory (BFI) and measures personality aspects.
I8010	To what extent are you confident you can find the means and ways to get what you want if someone opposes you?	 General Self-Efficacy Scale (GSES) item Targets confidence is getting what the persons wants in the face of obstacles, such as the presence of a person opposing to oneself Read aloud the response options to the respondent and circle the appropriate response option.
I8012	To what extent are you confident that you could <u>deal</u>	General Self-Efficacy Scale (GSES) item Targets confidence is dealing with unexpected

	efficiently with unexpected events?	eventsRead aloud the response options to the respondent and circle the appropriate response option.
I8013	Do you think that the problems you have told me about have made you a stronger person?	 Based on an Attitudes to Disability Scale (ADS) item, Scale 3, gains Question intends to capture positive implications of living with disability, like personal growth Read aloud the response options to the respondent and circle the appropriate response option.
I8014	Do you think that the problems you have told me about have made you more determined to reach your goals?	 Based on an Attitudes to Disability Scale (ADS) item, Scale 3, gains Question intends to capture positive implications of living with disability, like personal growth. Read aloud the response options to the respondent and circle the appropriate response option.
I8015	Do you need someone to stand up for you when you have problems?	 Based on Disability Module of the WHOQOL-BREF Read aloud the response options to the respondent and circle the appropriate response option.
I8016	Do you worry about what might happen to you in the future? For example, thinking about not being able to look after yourself, or being a burden to others in the future.	Based on Disability Module of the WHOQOL-BREF Read aloud the response options to the respondent and circle the appropriate response option.
I8017	Do you feel in control of your life? For example, do you feel in charge of your life?	 Based on Disability Module of the WHOQOL-BREF Read aloud the response options to the respondent and circle the appropriate response option
I8018	Are you satisfied with your ability to communicate with other people? For example, how you say things or get your point across, the way you understand others, by words or signs.	Based on Disability Module of the WHOQOL-BREF Read aloud the response options to the respondent and circle the appropriate response option.
I8019	Are you satisfied with the opportunities you get for social activities? For example, with the chances you get to meet friends, go out for a meal, go to a party, etc.	Based on Disability Module of the WHOQOL-BREF Read aloud the response options to the respondent and circle the appropriate response option.
18020	Do you feel that you will be able to achieve your dreams, hopes, and wishes?	 Based on Disability Module of the WHOQOL-BREF Read aloud the response options to the respondent and circle the appropriate response option.

9000 INTERVIEWER OBSERVATIONS

Introduction

This module provides the interviewer with space to identify any issues or problems related to the interview or other associated factors for the selected household.

This information is important for the editing, cleaning and interpreting processes and will be used by the Field Editors, Supervisors and Principal Investigators.

H9001 -H9004

The table below provides guidelines for completing questions ${\rm H}9001$ to ${\rm H}9004$.

Question No.	Question	Guide for completion
H9001	Was someone else present during the interview?	If at any point during the interview, another person was present during the interview, circle "Yes". This could be a household member or other person. This person may or may not have contributed to the interview - either way, indicate whether a person was physically present.
H9002	What is your evaluation of the accuracy of the	This is the interviewer's perception about the accuracy of the household informant's responses.

	informant's answers?	
H9003	What is your assessment	This is the interviewer's perception about the cooperation
	of the respondent's	level of the household informant.
	cooperation?	
H9004	Comments:	This space is provided for any additional information related
		to the interview or the interviewing process.

PART 6: GUIDE TO COMPLETING THE PROXY QUESTIONNAIRE

OVERVIEW

Introduction

This guide provides background information and guidance for completing each question in the Proxy Questionnaire.

Intended audience

This part is intended for those fulfilling the following roles:

- Interviewer
- Supervisor
- Field Editor

Intended use

Use this guide in training, to prepare for the interviews, and as reference material during interviews if respondents request clarification about specific questions.

Interviewers and supervisors should refrain from offering their own interpretations.

In this part

This part covers the following sections from the Proxy Questionnaire:

Topic	See Page
CONSENT FOR INDIVIDUAL PROXY	84
CONTACT RECORD - PROXY RESPONDENT	85
CONTACT RECORD - INDIVIDUAL OR PROXY RESPONDENT	
1000 SOCIO-DEMOGRAPHIC CHARACTERISTICS	87
1000 SOCIO-DEMOGRAPHIC CHARACTERISTICS	
2000 WORK HISTORY AND BENEFITS	90
3000A ENVIRONMENTAL FACTORS	96
4000 FUNCTIONING	101
5000 HEALTH CONDITION	111
6000 HEALTH CARE UTILISATION	126
3000B PERSONAL ASSISTANCE, ASSISTIVE DEVICES AND FACILITATORS	121
9000 INTERVIEWER ASSESSMENT	131

CONSENT FORM

Random selection

[Respondent's Name] has been randomly selected to be part of this survey, but due to cognitive limitations that prevent her/him from being interviewed, we would like to interview you as a proxy. This survey is conducted by the World Health Organization in collaboration with the [Ministry of Health] and the [WHO Regional Office] and will be carried out by professional interviewers from [name of institution]. This survey is currently taking place in several countries

around the world.

Confidentiality

The information you provide about the respondent is totally <u>confidential</u> and will not be disclosed to anyone. It will only be used for research purposes. Your name, the respondent's name, address, and other personal information will be removed from the instrument, and only a code will be used to connect the respondent and your answers without identifying either of you. You may be contacted by the survey team again only if it is necessary to complete the information on the survey.

Voluntary participation

Your participation is <u>voluntary</u> and you can withdraw from the survey after having agreed to participate. You are free to refuse to answer any question that is asked in the questionnaire. If you have any questions about this survey you may ask me or contact [name of institution and contact details] or [principal Investigator at site].

Consent to participate

Signing this consent indicates that you understand what will be expected of you and indicates that you are willing to participate in this survey.

Read by Participant	Interviewer	
Agreed	Refused	

I hereby provide INFORMED CONSENT to take part in the Model Disability Survey (MDS).

Name:	Sign:
Parent/Guardian:	Sign:
Witness:	Sign:

CONTACT RECORD - PROXY RESPONDENT (Sections 0000 and 0100)

Introduction This section includes general information about the survey.

Contact attempts

WHO recommends a minimum of three contact attempts. You must keep track of **all** contacts with selected individuals, even if the final result is no interview.

I0001A-I0003F I0001 to I0003 are the columns that can be completed for each contact with the person selected for the individual interview. Complete the items in a column for each contact as you proceed with the contact. If you complete the full interview - the last item would be to enter '01' in the column for that date. Until you decide on a final result code, enter the following information or circle the correct option for each contact attempt:

A) Date;

- B) Time contact initiated;
- C) Interviewer identification (ID) number;
- D) Contact with (see explanation below); and,
- E) Individual interview obtained.

'D. Contact with'

Once section 1000 is complete, you will know how to enter the final response category for 'D'. Each option under item 'D. Contact with' is explained in the table below.

Option	Refers to the person(s)
1= Selected individual respondent	It is decided after going through the household roster and identifying all household members, who will be selected for the individual questionnaire. This person will answer the individual questionnaire.
2= Other household member	This code would be used for a contact where the person selected for the individual questionnaire is not available and the interviewer intends to return to the household.
3= No one	Use this code if the contact with the household resulted in no human contact.

Final result code

And at the end of the contact or interview process (either full or partial completion) you will be able to enter the `E. Result code'. This refers to the final result code for the Individual Questionnaire. Use the table below to select the appropriate code to document the final result. The final result refers to I0001, I0002 or I0003 - individual or proxy respondent.

Codes	Description	
01	Completed Interview (interview is accepted and conducted)	
02	Partial Interview (interview is partially completed and person will not be	
	contacted anymore).	
03	Respondent contacted-initial refusal	
04	Respondent contacted-uncertain about interview	
05	Resistance/refusal by respondent	
06	Final refusal by respondent	
07	Proxy contacted – initial refusal	
08	Proxy contacted – uncertain about interview	
09	Resistance/refusal by proxy	
10	Final refusal by proxy	
11	Final refusal by other household member	
12	Unable to locate respondent	
13	No interview because respondent is not eligible: less than 18, mentally unfit or too ill.	
14	Language barrier	
15	House is vacant or household occupants are elsewhere (seasonal vacancy,	
	other residence)	
16	Unsafe or dangerous area or no access to respondent	
17	Deceased respondent	
18	Respondent in institution: jail, hospital and not accessible	

Section 0100 I0101-I0104

Questions I0101 to I0104 provide information on the cognitive ability of the respondent who cannot directly participate.

The table below provides a guide to completing questions I0101 to I0104.

Question No.	Question	Guide for completion
I0101	Interviewer: Does the respondent have obvious cognitive limitations that prevent him/her from being interviewed?	 Interviewer decision point Based on interviewer's impressions Seek a proxy respondent and go to I0102.
	interviewed?	Seeking for a proxy is justified if a significant cognitive limitation, memory problem or health condition is present that would, in the interviewer's opinion, be overly stressful for the respondent or provide responses of questionable accuracy.
I0102	We would like to ask someone who knows the respondent a few questions about the respondent's health.	ALL proxy interviews will be checked by supervisors. Interviewer should seek for a proxy and record who this person is. Please note if the proxy is the respondent's spouse or not.
	Interviewer: Who is the proxy?	
I0103	INTERVIEWER: Indicate who the 'Individual Respondent' is.	Interviewer will record the person number from the household roster (HH member). The Person number will be also recorded in I1001 in section 1000. Here, the person recorded is the respondent, not the proxy.
I0104	INTERVIEWER: Was the Consent Form Agreed to and Signed / Agreed but Witness Signed or Refused?	Interviewer will record if the consent form is signed. If consent is refused, the interview cannot be carried out.

1000 SOCIO-DEMOGRAPHIC CHARACTERISTICS

Question No.	Question	Guide for completion
I1001	Number of respondent from household HH roster	The interviewer should record the respondent's column number from H1006 in Section 1000: Household Roster.
I1001A	Person number of the selected proxy in HH roster	The interviewer should record the selected proxy's column number from H1006 in Section 1000: Household Roster.
I1002	What is the respondent's mother tongue? By mother tongue, I mean the language s/he learned first, the language that s/he can express her/himself fully in, or voluntarily identify with.	 Record the respondent's mother tongue. Mother tongue is the language the respondent: voluntarily identifies with can fully express themselves in learned first If the respondent knows more than one 'mother tongue' language, record them all.
I1003	Record sex of the respondent	- Record the respondent's sex (male or female)

		based on proxy's response Clarify if needed.
I1004	What day, month and year was the respondent born in? DD / MM / YYYY	 Record the date of birth. Accurate age reporting is very important for this survey. Ask the day the respondent was born and record the numeric equivalent of this day (01-31). Ask in which month the respondent was born and record the numeric equivalent of this month (01-12). Ask in which year the respondent was born and record the year according to the Gregorian calendar (that is 19xx or 20xx). Probe if necessary by asking if it was close to a national or religious holiday, or around a major event, or if they know around when a sibling or other family member of the respondent's was born and work from that. Use a historical time line if needed. If after probing the proxy does not seem to know, indicate 88 for month or 8888 for year in the box.
I1005	How old is the respondent now?	 Record respondent's age in years. Verify by a birth certificate if available. Probe if necessary and try to calculate out loud the number of years between the present and when they indicated they were born, or ask if they know the age of family members or spouse and if the respondent's is younger or older and by how many years. If after probing the respondent still is unable to answer, write 888 in the box.
I1006	In which <u>country</u> was the respondent born?	 Ask this question without reading the options to the proxy. Circle whether the respondent was born in the country of interview or another country. Enter the country code using the list for country codes. Skip pattern: If 1, go to I1008
I1007	How old was the respondent when s/he first came to this country?	 Record respondent's age in years. Probe if necessary by asking if it happened around the same time as a major event. If less than 1 year, round up to 1 year (enter "01"). If after probing the respondent is still unable to answer, write 88 in the box.
I1008	Is the respondent a <u>citizen</u> of [country of the interview] ?	- Circle the appropriate response: 1=Yes; 5=No
I1009	Does s/he have <u>citizenship in</u> another country?	- Citizenship denotes the link between a person and a state. Possession of citizenship is normally associated with the right to work and live in a country and to participate in political

		life Circle the appropriate response: 1=Yes; 5=No
		Skip pattern: If 5, go to I1011
I1010	Which country?	- Enter the country code using the list for country codes.
I1011	What is the respondent's current marital status?	 Ask this question without reading the options to the proxy. Emphasize that current or present marital status is needed. If the response does not match an option, for example, "single", then read the options and ask the proxy to choose the best one. For example, if the respondent is currently single (but was married in the past), the option "separated/divorced" should be recorded. "Cohabiting" means the respondent is living with a partner but is not married. Skip pattern: If 1, go to I1014; If 2 or 3 go to I1013; If 4 or 5 go to I1012
I1012	How many years has s/he been separated, divorced or widowed?	 Record the number of years since the respondent has been separated, divorced or widowed. Probe if necessary by asking if it happened around the same time as a major event. If less than 1 year, round up to 1 year (enter "01"). If after probing the proxy is still unable to answer, write 88 in the box. Skip pattern: Go to I1014
I1013	How many years has s/he been married or living together?	 Record the number of years the respondent was or has been married. Probe if necessary by asking the age of the oldest child and how long before the birth of this child the respondent got married. If less than 1 year, round up to 1 year (enter "01"). If after probing the proxy is still unable to answer, write 88 in the box. Where multiple marriages/partners are common, refer to the year of the first marriage.
I1014	What is the highest level of education that the respondent has completed?	 Emphasize highest level of education completed (either at a formal school or at home). If the respondent attended 3 months of the first year of secondary school but did not complete the year, record "No schooling or never completed any grade". The categories of educational levels vary across countries. The supervisors should provide interviewers with country specific guidance for how to complete this question.

		Skip pattern: If 1, go to I1016
I1015	How many years of school, including higher education has s/he completed?	 Do not count partial years completed. If the respondent has been in school both full and part-time, record the number of years at full-time education. Count repeated grades as two years. Probe if necessary by asking at what age the respondent started school and at what age he/she finished school. If less than 1 year, round up to 1 year. If after probing the proxy is still is unable to answer, write 88 in the box. Skip pattern: Go to 11018
I1016	Did s/he have to stop her/his education?	- Circle the appropriate response: 1=Yes; 5=No
I1017	What was the main reason for never attending or stopping her/his education?	 Ask this question without reading the options to the proxy. If the response does not match an option, then read the options and ask the proxy to choose the best one. If none of the answers are appropriate, indicate "Other".
I1018	What is the respondent's background or ethnic group?	 Ask what ethnic or cultural group the respondent identifies with (was born into). Do not read the response options. If the proxy does not understand how to answer, then read the response options. If none of the answers are appropriate indicate "other".

2000 WORK HISTORY AND BENEFITS

Introduction

This section is to assess whether the respondent has ever worked for pay, the type of work, place of work and for how long the respondent worked. It also asks about age at which the respondent started working, and if no longer working, the age at which the respondent stopped working and why.

Purpose

The purpose of this section is to help answer other questions such as whether or not health status contributes to unemployment, or whether people in different kinds of occupations enjoy different levels of health.

I2001- I2023 The table below provides a guide to completing questions I2001 to I2023.

Question No.	Question	Guide for completion
I2001	As you know, some people take jobs for which they are paid in cash or kind. Other people sell things, have a small business, or work on the family farm or family business. Has [NAME] in her/his life done any of these things or any type of work?	 Assess if the respondent has ever worked for money or for goods. Work refers to formal and informal activities or employment in the formal and informal sectors. "Goods" refer to any item except currency (money) that is used as a payment for work or service (for example, food, clothing, housing, silver or gold, etc.). Skip pattern: If 1, go to 12003
12002	What is the main reason s/he never worked to earn an income?	 Only ask this question if the respondent has NEVER worked for pay or goods. Do not read the answer choices. Circle the best category, and confirm it with the proxy (for example, if the answer is "because I have very bad back pain", respond with "so s/he never worked because of 'health problems'" and see if the proxy confirms. If the proxy provides more than one answer, ask them to specify which one is the most important or relevant reason for the respondent not working. If the answer does not fit into any of the written answer categories, please ask the proxy to specify the reason not worked and record next to "Other". Response options to this question are specified as below:
	Response option I2002	Defined as, or refers to individuals who
	1 Health condition or disability	Had/have any kind of health condition or problem preventing them from working.
	2 Still engaged in training	Have been studying in school and are not ready to work or have not had time to work for pay or goods. Can also apply to individuals in training for a vocation, but are not receiving pay or goods for their work.
	3 Personal family responsibilities	Has responsibilities within the family that prevent him or her from working such as taking care of children or elderly family members.
	4 Could not find suitable work	Wanted to work for pay, actively looked or are looking but have not been successful in finding work.
	5 Do not know how or where to seek work	Wanted to work for pay, but do not know how or where to seek work.
	6 Not yet started to seek work	Wants to work for pay but have not started to seek work.

Question	Question	Guide for completion
No.		
	7 Do not have the economic need 8 Parents or spouse did not let her/him	Do not need to work because they do not need to earn money (for example, because of inheritance, land/property ownership, or living with family members who support them). Are married and whose spouse does not want them or allow them to work (mostly women). It can also apply to individuals living with their parents, and they did not want or allow them to work. Skip pattern: If 1, go to 12009
12003	At what age did s/he start working for pay?	Record the age the respondent started working for pay or goods.If the proxy is unable to answer, circle '8 Don't know'.
		Skip pattern: Go to I2005. If 888 go to I2004.
I2004	How many years ago did s/he start working?	 Ask this question only if the proxy cannot answer I2003. Probe and calculate if necessary by asking how many years the respondent has been working, or around what major events the respondent started.
12005	What is her/his current working situation?	 Ask this question without reading the options to the proxy. If the response does not match an option, then read the options and ask the proxy to choose the best one. Skip pattern: If 1 go to I2006. If 4 or 5 go to I2012. Other go to I2011.
12006	What is the main reason s/he is not currently working?	 Ask this question without reading the answer choices. Circle the best category, and confirm it with the proxy (for example, if the answer is "because I am going to university", respond with "so, s/he is not working now because of being 'still engaged in training" and see if the proxy confirms. If the proxy provides more than one answer, ask them to specify which one is the most important or most relevant reason for not working. If the answer does not fit into any of the written answer categories, please ask the respondent to specify the reason not worked and record next to "Other". Note: See similar response categories definitions in I2002 above.
12007	At what age did s/he stop working?	 Record the age the respondent stopped working for pay or goods. If the proxy is unable to answer, circle '8 Don't know' and continue to I2008. Skip pattern: Go to I2009. If 888 go to I2008.
I2008	How many years ago did s/he	- Record the number of years since the respondent stopped working for pay or goods.

Question No.	Question	Guide for completion
	stop working?	 Probe and calculate if necessary by asking how many years ago the respondent stopped working, or around what major events the respondent stopped. If the proxy is unable to answer, write 88 in the box.
I2009	Is s/he currently actively looking for work?	 Persons are classified as unemployed: If they do not have a job, If they do not have a job and have actively looked for work in the prior 4 weeks, and If they are currently available for work (except for temporary illness). Ask the proxy if the respondent is currently looking for a job and is available for work. Actively looking for work may consist of any of the following activities: Contacting an employer directly or having a job interview; Contacting a public or private employment agency; Talking to friends or relatives about job opportunities; Contacting a school or university employment centre; Sending out resumes or filling out applications; Placing or answering advertisements; Checking union or professional registers; Or some other means of active job search.
I2010	What is the main reason s/he would like to work at present? Response option	 Do not read the answer options. Allow the proxy to answer spontaneously. Probe if necessary by reading some of the answer options described below. Refers to individuals who
	1 Need the income	Need to work for money in order to support themselves or their family
	2 Want to or need to be active	Want to work because they prefer not to be idle and without something to do. They may not necessarily need the money, but prefer to be active by working.
	3 Want to feel useful	Need to work in order to feel useful or to satisfy their identity or self-esteem.
	4 Help my family	Are working in order to bring income to their family. It may refer to young adults living with their parents, or to women trying to supplement their husband's income.
	7 Other, specify	Do not fit into any of the categories
I2011	Who is/was employer in the respondent's current/most recent MAIN job?	 "Current" means any activity of more than one hour that the respondent engaged in for pay during the last two weeks. If the respondent was engaged in more than one kind of "job" during the last two weeks (for example, sold home-made food on the street part of the time and worked in a factory sewing shirts at other times), then "main" means the activity from which they derived the most income.

Question	Guide for completion
	 For those who have stopped working - ask about the respondent's employer for the most recent main job. Probe if necessary by reading some of the answer options described below.
Response option 1 Public sector (government employee)	Defined as, or referred to as an individual who Receive pay from the government or is hired by a government office or agency and paid a salary or wage. This includes employees of federal, state, or municipal governments and their agencies, parastatal enterprises, and semi-autonomous institutions such as social security institutions that are owned by the government or institutions like religious schools if the staff is paid by the government.
2 Private sector (for profit and not for profit)	Is hired to work and is paid a salary or wages for a corporation, company, agency, organization, etc. This could be for profit business or not-for-profit and includes any employees not working for the government and not self-employed.
3 Self-employed	An individual who operates a business or profession as a sole proprietor, partner in a partnership, independent contractor, or consultant. Earning one's livelihood directly from one's own trade or business rather than as an employee of another. The person may:
	 Produce goods for sale or earns an income through provision of services to different people or firms.
	 Work alone or with intermittent assistance from others, but does not employ anyone for a paid wage or salary on a regular basis.
4 Informal employment	Informal employment could mean employment in the informal economy. Informal economy refers to the general market income category (or sector) wherein certain types of income and the means of their generation are "unregulated by the institutions of society, in a legal and social environment in which similar activities are regulated." Jobs in the informal economy are characteristically without benefits such as health insurance, sick leave, paid vacations or pensions.
In the last 12 months, for her/his main job, what has been her/his main occupation?	 Write down the answer exactly as stated. A colleague in the Primary Investigators office will code what you have written - so you need to write down clearly. Ask for clarification if needed. Provide any additional information that will help the coder. A general list of job categories follows, but the idea is to clearly write (in all capitals) the name of the job the proxy provides. Use this list for your own reference, or if you are having trouble understanding what the proxy's main occupation is.
	Response option 1 Public sector (government employee) 2 Private sector (for profit and not for profit) 3 Self-employed 4 Informal employment In the last 12 months, for her/his main job, what has

Question No.	Question	Guide for completion
		 "Main occupation" means the occupation that the person spent the most time doing over the last 12 months. For those who have stopped working, it should be the occupation for the most recent main job. Do not read out the following examples of different occupation types.
	Occupation	Examples of occupations in this category
	Legislator, Senior Official, or Manager:	include Legislators; senior government officials; chiefs or heads of villages; senior officials of political parties or workers unions; and directors, chief executives or department managers who manage enterprises, organizations or departments that are large enough to require three or more managers.
	Professionals, Technicians or Associate Professionals	Occupations in the physical mathematical and engineering sciences, architects, engineers, health professionals, teachers, lawyers, social scientists, writers or performing artists, ship and aircraft controllers and technicians, financial agents, trade brokers, accountants and bookkeepers.
	Clerical	Secretaries, keyboard operators, stock clerks scribes, office assistants, cashiers, and receptionists.
	Personal Services, Marketing, or Sales	Travel attendants, restaurant workers, personal care workers, barbers, undertakers, astrologers, fire-fighters, police officers, models, salespersons.
	Agricultural or Fisheries Worker	Gardeners and crop growers, livestock, dairy, and poultry producers, forestry workers and loggers, hunters, and fishery workers
	Craft, Construction, or Trades	Miners, shop firers, stone cutters, and carvers; construction workers, metal moulders, welders, sheet-metal workers, blacksmiths, tool-makers, electrical and electronic equipment mechanics and fitters, potters, glass-makers, handicraft workers in wood, textile, leather and related materials, printing, food processing, textile and garment workers.
	Plant and Machine Operators or Assemblers Elementary occupations	Processing-plant operators, power production operators, assembly-line operators, machine operators, assemblers, and motor-vehicle drivers. Street vendors, domestic help, building caretakers,
		garbage collectors, messengers, porters, labourers (agricultural, construction, fishery, mining, transport).
	Armed Forces	Anyone who is employed as a member of military service of the country.
I2013	Does/did the respondent usually work throughout the year, or does/did s/he work seasonally, or only once in a while for her/his main job?	Indicate if this is consistent work throughout the entire year or if it is seasonal/part of the year or occasional (only when work is available, only in the dry season, etc.).
	initial including job.	Skip pattern: If 1, go to I2015.

Question No.	Question	Guide for completion
I2014	On average, how many weeks in a year does/did the respondent work in her/his main seasonal or occasional job?	Record the number of weeks. The number of weeks should not exceed 52.
I2015	On average, how many days a week does/did the respondent work in her/his main job?	Record the number of days. The number of days should not exceed 7.
I2016	On average, how many hours a day does/did the respondent work in her/his main job?	 Record the average number of hours per day the respondent works. The number of hours should not exceed 24 and should be realistic (for example, if the respondent indicates 22 hours, probe to find out if he/she was truly working for pay for 22 hours per day).
I2017	In this main job, does/did s/he receive any retirement or pension benefits in addition to her/his payment in cash or in kind?	 This question refers to any money the employer puts aside for the respondent for after he or she retires. Circle the appropriate response: 1=Yes; 5=No
I2018	In this main job, does/did s/he receive any medical services or health care benefits in addition to her/his payment in cash or in kind?	 This question refers to any form of insurance coverage or actual health services provided by the employer. Circle the appropriate response: 1=Yes; 5=No
I2019	In this main job, does/did s/he receive any food or provisions benefits in addition to her/his payment in cash or in kind?	 This question refers to vouchers for food, or direct receipt of food items. Can also include housing or transportation in form of a car or bus passes, etc. Circle the appropriate response: 1=Yes; 5=No
12020	In this main job, does/did s/he receive any cash bonuses benefits in addition to her/his payment in cash or in kind?	 This question refers to any payment in addition to the base salary, such as a Christmas bonus, or bonus at the end of the year, or for selling a certain amount of product, etc. Circle the appropriate response: 1=Yes; 5=No
I2021	In this main job, does/did s/he receive any further benefits in addition to her/his payment in cash or in kind?	 This question refers to any other kind of benefit not mentioned above. Circle the appropriate response: 1=Yes; 5=No and specify the name of the benefit.
I2022	Has s/he worked at more than one job over the last 12 months?	 This refers to any job or jobs that the respondent has in addition to their MAIN job described above. It could be regular or occasional/seasonal, full or part time. Circle the appropriate response: 1=Yes; 5=No
I2023	Does s/he receive a disability pension or other disability benefit?	 This question refers to benefits usually paid by social security to persons with impairments or medical conditions preventing them from working. Circle the appropriate response: 1=Yes; 5=No

3000A ENVIRONMENTAL FACTORS

Introduction

This module asks questions about factors in the environment, such as availability of medicine, the accessibility of the surroundings or the attitudes of friends towards persons with health conditions that may hinder or improve health-related daily problems. Specifically, the questions are regarding the assistance needs of persons with day to day activities at home or outside, closeness of relationships,

aids and modifications used and needed, accessibility of workplace or school, health facilities, places to socialize, shops, banks and post offices, places of worship, transportation, dwelling, problems related to attitudes of others and accessibility to information.

The Environmental Factors module is divided into two parts: Module 3000A and Module 3000B.

Module 3000A is placed before the functioning module (4000) and targets questions about the broad environment. Module 3000B comes following the functioning questions and includes specific questions about the use and/or need of personal assistance, assistive technologies and facilitators.

Purpose

Module 3000A

The purpose of this module is to identify factors in the environment that may influence health-related day to day life problems, so that specific interventions can be designed and developed. The module delivers information about the:

- Accessibility of the environment
- Social support
- Presence and level of negative attitudes of others
- Accessibility to information
- Use of medication

Additionally, filter questions for module 3000B regarding personal assistants as well as assistive technologies and modifications are stated.

Module 3000B

The purpose of this module is to collect detailed information regarding the availability and need of personal assistance, aids and devices and facilitators.

Skip patterns

It is important to closely follow the skip patterns in this module, as they have been designed to make sure the different categories of problematic environmental factors are identified.

I3001- I3009 Module A

The table below provides guidelines for completing questions I3001 to I3010, which relate to hindering or facilitating aspects of the environment.

	T	
Question No.	Question	Guide for completion
13001	Does [NAME's] workplace or educational institution make it easy or hard for her/him to work or learn?	 The proxy should evaluate diverse aspects of the respondent's workplace or school such as the design and construction of the buildings, the entrances and exits, the amount of space and facilities available. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3002	Do the health facilities [NAME] needs regularly make it easy or hard for her/him to use them?	 The proxy should evaluate diverse aspects of health facilities the respondent regularly uses such as the design and construction of the buildings, the entrances and exits, the amount of space and facilities available. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13003	Do the places where [NAME] socializes and engages in community activities make it easy or hard for her/him to do this?	 The proxy should evaluate diverse aspects of places the respondent visits to socialise and engage in community activities such as the design and construction of the buildings, the entrances and exits, the amount of space and facilities available. Read aloud all response options to the proxy Circle the response option selected by the proxy.
13004	Do the shops, banks and post office in [NAME's] neighbourhood make it easy or hard for her/him to use them?	 The proxy should evaluate diverse aspects of shops, banks and post offices in the neighbourhood such as the design and construction of the buildings, the entrances and exits, the amount of space and facilities available. Read aloud all response options to the proxy. Circle the response option selected by the proxy.

Question No.	Question	Guide for completion
I3005	Do [NAME's] regular places of worship make it easy or hard for her/him to worship?	 The proxy should evaluate diverse aspects of the respondent's regular places of worship such as the design and construction of the buildings, the entrances and exits, the amount of space and facilities available. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3006	Does the transportation [NAME] needs or wants to use make it easy or hard for her/him to use it?	 The proxy should evaluate diverse aspects of the transportation the respondent needs to use such as their availability, accessibility, the amount of space available or how much "barrier-free" they are. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3007	Does [NAME's] dwelling make it easy or hard for her/him live there?	 The proxy should evaluate diverse aspects of the respondent's dwelling such as the amount of space available; cleanliness; opportunities for privacy; facilities available (such as electricity, running water); and the quality of the construction of the building (such as roof leaking and dampness). Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3008	Does the toilet of [NAME's] dwelling make it easy or hard for her/him to use it?	 The proxy should evaluate diverse aspects of the toilet in the respondent's dwelling such as the design, accessibility, or cleanliness. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13009	Do the temperature, terrain, and climate of the place [NAME] usually lives make it easy or hard for her/him to use it?	 The proxy should evaluate diverse aspects of natural environment of the place the respondent usually lives such as temperature, terrain, air pollution and climate. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3010	Do the lighting, noise, and crowds in [NAME's] surroundings make it easy or hard for you to live there?	 The proxy should evaluate diverse aspects of the respondent's surroundings such as lighting, noise, and crowds. Read aloud all response options to the proxy. Circle the response option selected by the proxy.

I3011- I3013 Assistance and Aids

The table below provides guidelines for completing questions I3011 to I3013 that relate to respondent's use of personal assistance or assistive devices and aids.

Question No.	Question	Guide for completion
13011	Does [NAME] have someone to assist her/him with her/his day to day activities at home or outside?	 This question targets the presence of people assisting the respondent with day to day activities at home or outside, such as cleaning, washing oneself, cooking, shopping or using transportation, including family and friends but also paid helpers. Circle the appropriate response: 1=Yes; 5=No
I3012	Does [NAME] use any aids, such as glasses or a cane?	 This question targets the use of any aids. It includes any aids that the respondent may use such as such as glasses, a cane, hearing aids, crutch, wheelchair, prosthesis, orthopaedic device or grasping tools.

Question No.	Question	Guide for completion
		 Circle the appropriate response: 1=Yes; 5=No
I3013	Does [NAME] take medicines on a regular basis?	 Proxies should take into account they take medicines on a regular basis. Any medication for symptom control of diseases should be considered, such as for pain, high blood pressure, asthma, or sleep disturbances. Circle the response option selected by the respondent

I3014- I3023 Support & Relationships

The table below provides guidelines for completing questions I3014 to I3023, which relate to family and social support. These questions belong to the Oslo Social Support Scale.

Question	Question	Guide for completion
No.		
I3014	[Should [NAME] need help, how easy is it for her/him to get help from:] a close family member (including her/his partner)	 Proxy should evaluate here how easy it is for the respondent to get help from close family members such as parents, children or partners. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3015	[Should [NAME] need help, how easy is it for her/him to get help from:] friends and coworkers	 Proxy should evaluate here how easy it is for the respondent to get help from friends and co-workers. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3016	[Should [NAME] need help, how easy is it for her/him to get help from:] neighbours	 Proxy should evaluate here how easy it is for the respondent to get help from neighbours. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3017	[How close is NAME's] relationship with] spouse or partner	 Proxy should evaluate here the closeness of the relationship of the respondent with the spouse or partner. Relationships are considered close if one can for instance talk about personal affairs, get help, or enjoy spending leisure time. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3018	[How close is NAME's] relationship with] family members	 Proxy should evaluate here the closeness of further family members such as uncles, aunts, cousins, grandparents to the respondent. Relationships are considered close if one can for instance talk about personal affairs, get help, or enjoy spending leisure time. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3019	[How close is NAME's] relationship with] friends and co-workers	 Proxy should evaluate here the closeness of the relationship to friends and co-workers. Relationships are considered close if one can for instance talk about personal affairs, get help, or enjoy spending leisure time. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13020	[How close is NAME's] relationship with] neighbours	 Proxy should evaluate here the closeness of the relationship to neighbours. Relationships are considered close if one can for instance talk about personal affairs, get help, or enjoy spending leisure time. Read aloud all response options to the proxy. Circle the response option selected by the proxy.

Question No.	Question	Guide for completion
I3021	[With how many people does [NAME] have a close relationship] in her/his family	 Proxy should estimate with how many persons in the family the respondent has a close relationship. Probe if necessary and try to calculate out loud the number of persons with whom the respondent has a close relationship. Record the number given by the proxy.
I3022	[With how many people does [NAME] have a close relationship] among her/his friends and co-workers	 Proxy should estimate with how many persons among friends and co-workers the respondent has a close relationship. Probe if necessary and try to calculate out loud the number of persons with whom the respondent has a close relationship. Record the number given by the proxy.
13023	[With how many people does [NAME] have a close relationship] among her/his neighbours	 Proxy should estimate with how many among her/his neighbours they have a close relationship Probe if necessary and try to calculate out loud the number of persons with whom the respondent has a close relationship. Record the number given by the proxy.

I3024- I3035 Attitudes & Information

The table below provides guidelines for completing questions I3024 to I3035, which relate to the attitudes of others toward the respondent, and accessibility to information.

Question No.	Question	Guide for completion
I3024	Can [NAME] participate in family decisions?	 Proxies should evaluate to what extent the respondent can participate in family decisions such as where to live or how to spend the family income. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3025	Does [NAME] have problems getting involved in society because of the attitudes of people around her/him?	 Question based on the Attitudes to Disability Scale (ADS) Proxies should evaluate to what extent getting involved in society is difficult for the respondent because of the attitudes of people around her/him, such as disrespect or lack of patience. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13026	Does [NAME] feel that some people treat her/him unfairly?	 Question based on the Disabilities Module of the WHOQOL-BREF Proxies should evaluate to what extent they feel the respondent is treated unfairly by people. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13027	Does [NAME] make her/his own choices about her/his day-to-day life? For example, where to go, what to do, what to eat.	 Question based on the Disabilities Module of the WHOQOL-BREF Proxies should evaluate to what extent the respondent can make her/his own choices about day-to-day life. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13028	Does [NAME] get to make the big decisions in her/his life? For example, like deciding where to live, or who to live with, how to spend your money.	 Question based on the Disabilities Module of the WHOQOL-BREF Proxies should evaluate to what extent the respondent can make her/his own choices about big decisions such as deciding where to live, or who to live with, how to spend the own money. Read aloud all response options to the proxy. Circle the response option selected by the proxy

Question	Question	Guide for completion
No.		
13029	Does [NAME] feel that other people accept her/him?	 Question based on the Disabilities Module of the WHOQOL-BREF Proxies should evaluate to what extent they feel that other people accept the respondent. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13030	Does [NAME] feel that other people respect her/him? For example, do you feel that others value her/him as a person and listen to what she/he has to say?	 Question based on the Disabilities Module of the WHOQOL-BREF Proxies should evaluate to what extent they feel that other people respect the respondent. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3031	Does [NAME] consider her/him-self a burden on society?	 Question based on the Attitudes to Disability Scale (ADS) Proxies should evaluate to what extent the respondent considers her/himself to be a burden on society. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
I3032	Do people around [NAME] tend to become impatient with her/him?	 Question based on the Attitudes to Disability Scale (ADS) Proxies should evaluate to what extent people around her/him tend to become impatient with the respondent. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13033	Do people around [NAME] not expect much from her/him?	 Question based on the Attitudes to Disability Scale (ADS) Proxies should evaluate to what extent people around her/him do not expect much from her/him. This is a double negative item, where the scores are reversed. Therefore if people around the respondent do not expect much for them, the response option is 5 and if they expect a lot from them the response option is 1. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13034	Is living with dignity a problem for <code>[NAME]</code> because of the attitudes and actions of others?	 Question based on the WHODAS Proxies should evaluate to what extent living with dignity poses a problem to the respondent because of the attitudes and actions of others. Read aloud all response options to the proxy. Circle the response option selected by the proxy.
13035	Does [NAME] have access to the information s/he needs or wants?	 Proxies should evaluate to what extent the respondent has access to information, such as internet or newspapers, in the same way as others in their surroundings. Read aloud all response options to the proxy. Circle the response option selected by the proxy.

4000 FUNCTIONING

Introduction

This section asks questions about respondents' overall problems in daily life. It covers problems with: mobility, hand and arm use, self-care, seeing, hearing, pain, sleep and energy, breathing, affect, interpersonal relationships, handling stress, communication, cognition, household tasks, community and citizenship participation, caring for others, work & schooling.

I4001- I4048

The table below provides guidelines for completing questions I4001 to I4048, which relate to problems in daily life. By problems it is meant not getting things

done in the way the respondent wants to or not getting things done at all. These problems may arise because of the respondent's health or because of the environment in which the respondent lives. They may also arise because of the attitudes or behaviours of people around the respondent.

In this section it is therefore essential to <u>repeatedly prompt proxies to keep in</u> <u>mind people who help the respondent, any assistive devices they use or any medication the respondent takes</u> when answering each question.

Example: If a person has a hearing impairment but uses a hearing aid that makes hearing not a problem, then the expected answer to the corresponding question is "no problem".

Proxies are requested to answer how much of a problem the respondent experiences on a scale from 1 to 5 where 1 means no problem and 5 means extreme problems.

For all questions you should:

- Read aloud all response options to the proxy and use the SHOWCARD if necessary.
- Circle only one response option.

Question No.	Question	Guide for completion
I4001	How much of a problem is standing up from sitting down for [NAME] ?	Refers to getting into and out of a standing position or changing body position from standing to any other position, such as lying down or sitting down. Proxies should answer the question taking into account any medicines, personal assistance, aids or modifications that might make standing up from sitting down easier or harder. Example: an older woman with arthritis has no problems with standing up from sitting down because she lives with the family, who physically helps her standing up \Rightarrow the proxy should describe how much of a problem it is taking into account the received help. In this case, the expected answer is no problem.
14002	How much of a problem is standing for long periods such as 30 minutes for [NAME]?	Involves standing for longer periods such as standing in a line. Proxies should answer the question taking into account any medicines, personal assistance, aids or modifications that might make standing for long periods easier or harder. Example: a person can only stand for long periods using crutches → the proxy should consider standing with the crutches to describe how big the problem is.
14003	How much of a problem is getting out of her/his home for [NAME]?	Involves getting out of the own home. Problems could arise from for instance mobility limitations, anxiety or hindering entrances at home. Proxies should answer the question taking into account any medicines, personal assistance, aids or modifications that might make getting out of the home easier or harder. Example: a person cannot get out of the home because he or she has difficulties with walking and lives in the fourth floor of a house without lift → the proxy should describe how big the problem is, taking into account the health problems and the living situation.
I4004	How much of a problem is walking a short distance such as a 100m for	Walking a short distance such as a 100m usually corresponds to walking about the length of one football field or one city block. Proxies should answer the question

Question No.	Question	Guide for completion
	[NAME]?	taking into account any medicines, personal assistance, aids or modifications that might make walking a short distance easier or harder. Example: a person cannot walk a short distance because of problems with balance after a stroke and the bad pavement conditions of the neighbourhood → the proxy should consider both the balance problems and the pavement when describing how big the problem is.
14005	How much of a problem is walking a kilometre for [NAME]?	Walking a kilometre usually corresponds to walking the length of ten football fields or ten city blocks. Proxies should answer the question taking into account any medicines, personal assistance, aids or modifications that might make walking a kilometre easier or harder. Example: a person cannot walk a kilometre because he or she would need crutches for that and does not have them → the proxy should describe how big the problem is, taking into account that crutches are not available.
14006	How much of a problem is engaging in vigorous activities for [NAME], such as [add country specific examples]?	Examples of vigorous activities are jogging, playing football, shovelling, carrying heavy loads, gardening, chopping woods, washing clothes by hand or bicycling fast. Proxies should answer the question taking into account any medicines, personal assistance, aids or modifications that might make engaging in vigorous activities easier or harder. Example: a farmworker with chronic low back pain can continue carrying heavy loads using a back pain belt the proxy should describe how big the problem is, taking into account the back pain belt.
14007	How much of a problem is getting where s/he wants to go for [NAME] ?	Problems include moving around outside the house to get to different places, such as the workplace or places of worship. Problems could be mobility limitations, anxiety or lack of accessible transportation, for instance. Proxies should take into account medicines, personal assistance, aids or modifications that might make getting where the person wants to go easier or harder. Example: a person with severe epilepsy can only go out accompanied by somebody else but family and friends have very little time to do this the proxy should describe how big the problem is, taking into account the need of having personal support and the lack of time of family and friends.
14008	How much of a problem is doing things that require the use of <code>[NAME's]</code> hands and fingers, such as picking up small objects or opening a container?	Difficulties in handling objects, picking up, manipulating and releasing them using one's hand, fingers and thumb, such as required to lift coins off a table or turn a dial or knob. It includes difficulties in picking up, grasping, manipulating and releasing, or more complex actions requiring coordination of these separate actions. Proxies should take into account medicines, personal assistance, aids or modifications that might make doing things that require the use of your hands and fingers easier or harder. Example: a person with rheumatoid arthritis has no problems opening a bottle using an assistive device → the proxy should describe how big the problem is while using an assistive device. The expected answer in this case could be no problem.

Question No.	Question	Guide for completion
14009	How much of a problem is raising a 2 litre bottle of water from waist to eye level?	Problems in using arms and hands for raising a bottle are meant. Proxies should take into account medicines, personal assistance, aids or modifications that might make it easier or harder. Example: a person with a shoulder injury cannot do raise a bottle from waist to eye level anymore, even using assistive devices → the proxy should describe how big the problem is, taking into account that assistive devices offer no help.
I4010	How much of a problem is being clean and dressed?	Proxies should consider activities such as gathering clothing from storage areas (e.g. closet, dressers), securing buttons, tying knots, combing hair, and brushing teeth. Proxies should take into account medicines, personal assistance, aids or modifications that might make being clean and dressed easier or harder. Example: a person with Parkinson's disease has no problems getting dressed and clean because of the help of a personal assistant the proxy should describe how big the problem is, taking into account the help of the personal assistant. In this case, the answer could be no problem.
I4011	How much of a problem is eating? Please remember to take into account the respondent's health and people who help her/him, any assistive devices s/he uses or any medication s/he would take.	This question intends to capture the physical act of eating, including cutting or breaking food into pieces, and having meals. This question is not about diet or food preferences. To make this explicit, the interviewer should read "Please remember to take into account your health and people who help you, any assistive devices you use or any medication you take" just after stating the question. Proxies should take into account medicines, personal assistance, aids or modifications that might make eating easier or harder. Example: a person with Parkinson's disease has important problems eating but can do it with the support of the wife \rightarrow the proxy should describe how big the problem is, taking into account the help of the wife.
I4012	How much of a problem is toileting?	Toileting includes regulating urination, defecation and menstrual care, and cleaning oneself afterwards. Proxies should take into account medicines, personal assistance, aids or modifications that might make toileting easier or harder. Example: a person with rheumatoid arthritis has important problems toileting and uses assistive devices that make toileting possible → the proxy should describe how big the problem is, taking into account the assistive devices.
I4013	How much of a problem is cutting her/his toenails?	Includes cleaning, cutting or polishing the nails of the toes. Proxies should take into account medicines, personal assistance, aids or modifications that might make cutting toenails easier or harder. Example: a person with chronic low back pain needs the help of the spouse for cutting toenails → the proxy should describe how big the problem is, taking into account the support of the spouse.
I4014	How much of a problem is looking after her/his health, eating well,	Looking after one's health includes eating well, exercising or taking prescribed medicines, for instance. Proxies should take into account medicines, personal assistance,

Question No.	Question	Guide for completion
1101	exercising or taking her/his medicines?	aids or modifications that might make looking after their health easier or harder. Example : a person with substance abuse can look after his or her health with the support of community care → the proxy should describe how big the problem is, taking into account the community care.
I4015	How much of a problem does [NAME] have with seeing at a distance?	An example of seeing things at a distance is seeing across the street. Proxies should take into account medicines, personal assistance, aids or modifications that might make seeing things at a distance easier or harder. Example: a person has problems seeing things at a distance and no glasses the proxy should describe how big the problem is, taking into account the absence of glasses.
I4016	How much of a problem does [NAME] have with seeing an object at arm's length?	Includes for instance seeing the letters in a newspaper. Proxies should take into account medicines, personal assistance, aids or modifications that might make seeing an object at arm's length easier or harder. Example: a person has no problems seeing an object at arm's length because he or she uses glasses → the proxy should describe how big the problem is, taking into account the glasses.
I4017	How much of a problem does [NAME] have with hearing what is said in a conversation with another person in a quiet room?	The question is related to sensing sounds and discriminating the location, pitch, loudness and quality of sounds in quiet surroundings. Proxies should take into account medicines, personal assistance, aids or modifications that might make hearing easier or harder. Example : a person with a hearing impairment has no problems because he or she uses a hearing aid → the proxy should describe how big the problem is, taking into account the hearing aid.
I4018	How much of a problem does [NAME] have with hearing what is said in a conversation with another person in a noisy room?	The question is related to sensing sounds and discriminating the location, pitch, loudness and quality of sounds in loud surroundings. Proxies should take into account medicines, personal assistance, aids or modifications that might make hearing easier or harder. Example: a person with a hearing impairment has problems because his or her hearing aid is old and not working properly → the proxy should describe how big the problem is, taking into account the impairment and condition of the hearing aid.
I4019	How much of a problem is having pain in [NAME's] daily life for her/him?	Problems involve any form of physical or mental pain or discomfort. Proxies should take into account medicines, personal assistance, aids or modifications that might make pain easier or harder. Example: a person has chronic pain after an injury but uses very efficient painkillers → the proxy should describe how big the problem is, taking into account the pain killers.
I4020	How much of a problem does [NAME] have with sleep?	This question concerns all aspects of sleeping, not merely falling asleep, but also waking up frequently during the night or waking up too early in the morning. Proxies should take into account medicines, personal assistance, aids or modifications that might make sleeping easier or harder. Example: a person has chronic sleep problems, which

Question No.	Question	Guide for completion
		are worsened by the loud neighbourhood → the proxy should describe how big the problem is, taking into account the loud neighbourhood.
I4021	How much of a problem is feeling tired and not having enough energy?	Problems include reduced level of energy and vitality that affects daily life. Proxies should take into account medicines, personal assistance, aids or modifications that might make feeling tired and not having enough energy better or worse.
14021		Example : after a stroke a person feels easily tired and the supervisor at work does not allow regular breaks → the proxy should describe how big the problem is, taking into account the situation at work.
I4022	How much of a problem does [NAME] have with shortness of breath?	Includes getting out of breath after climbing stairs or exercising, for instance. Proxies should take into account medicines, personal assistance, aids or modifications that might make shortness of breath better or worse. Example: a person with asthma takes medicines before exercising or doing vigorous activities to avoid shortness of breath → the proxy should describe how big the problem is, taking into account the medicine.
I4023	How much of a problem does [NAME] have with coughing or wheezing?	Includes coughing or wheezing after climbing stairs or exercising, for instance. Proxies should take into account medicines, personal assistance, aids or modifications that might make coughing or wheezing better or worse. Example: the problems of a person with asthma with coughing or wheezing got worse because of air pollution → the proxy should describe how big the problem is, taking into account the air pollution.
I4024	How much of a problem does [NAME] have with feeling sad, low or depressed?	Problems being "sad, low and depressed" include the feeling of dejection, despondence, downheartedness, gloom, heavy-heartedness, melancholy, misery, mournfulness, unhappiness, or other cultural or linguistic variations on these notions. Proxies should take into account medicines, personal assistance, aids or modifications that might make feeling sad, low or depressed better or worse. Example: the problems of a person with depression with feeling sad, low or depressed are better after he or she initiated psychosocial treatment the proxy should describe how big the problem is, taking into account the treatment.
14025	How much of a problem does [NAME] have with felling worried, nervous or anxious?	Feeling worried, nervous or anxious refers to feelings of uneasiness, being troubled, or apprehensive about the future that is associated with, or triggers, being stressed, on edge, tense or unable to relax. Proxies should take into account medicines, personal assistance, aids or modifications that might make felling worried, nervous or anxious better or worse. Example: the problems a person with cancer experienced with being excessively worried, nervous or anxious are better after he or she initiated psychosocial treatment the proxy should describe how big the problem is, taking into account the treatment.
I4026	How much of a problem is getting along with people who are close to [NAME],	Getting along with people who are close includes showing respect, warmth, appreciation, and tolerance in relationships; responding to criticism and social cues in

Question No.	Question	Guide for completion
NO.	including her/his family and friends?	relationships; and using appropriate physical contact. Proxies should take into account medicines, personal assistance, aids or modifications that might make getting along with people who are close easier or harder. Example: the problems of a person with HIV in getting along with people who are close got better after he or she initiated treatment the proxy should describe how big the problem is, taking treatment into account.
14027	How much of a problem is dealing with people [NAME] does not know?	Dealing with strangers means engaging in temporary contacts for specific purposes, such as when asking for directions or making a purchase. Proxies should take into account medicines, personal assistance, aids or modifications that might make dealing with people the person does not know easier or harder. Example: a person has significant problems to talk after a stroke and avoid dealing with strangers when his wife is not around the proxy should describe how big the problem is taking into account the consequences of the stroke and the support of the wife.
14028	How much of a problem is initiating and maintaining friendships?	Beginning and maintaining friendships with others for a short or long period of time, in a contextually and socially appropriate manner. This includes staying in touch, interacting with friends in typical ways, initiating activities with friends and participating in activities when invited. Proxies should take into account medicines, personal assistance, aids or modifications that might make it easier or harder. Example: a person with Parkinson's disease has problems with getting tired very fast and only meets friends if the spouse accompany him or her the proxy should describe how big the problem taking into account the support of the spouse.
14029	How much of a problem does [NAME] have with intimate relationships?	Intimate relationships refer to having close or romantic relationships, such as husband and wife or sexual partners. Proxies should take into account medicines, personal assistance, aids or modifications that might make having intimate relationships easier or harder. Example: a person with alcohol abuse could find a partner and keep the relationship after joining a support program for alcohol abuse → the proxy should describe how big the problem is, taking into account the support program.
14030	How much of a problem is handling stress, such as controlling the important things in [NAME's] life?	Handling stress refers to managing and controlling the demands required to carry out tasks involving responsibilities and stress, distraction or crises. Proxies should take into account medicines, personal assistance, aids or modifications that might make handling stress easier or harder. Example: a person with cancer has got problems handling stress after the diagnosis and has no familiar or social support → the proxy should describe how big the problem is, taking into account the lack of social support.
14031	How much of a problem is coping with all the things [NAME] has to do?	Problems include not being able to keep up at work or education, being late for appointments, or not being able to get housework done, among others. Proxies should take into account medicines, personal assistance, aids or

Question No.	Question	Guide for completion
		modifications that might make coping with all the things they have to do easier or harder. Example : a person developed problems coping with all the things she or he has to do after an injury leading to chronic pain and relies on the support of friends and neighbours → the proxy should describe how big the problem is taking into account the support of friends and neighbours.
I4032	How much of a problem does [NAME] have with being understood, using her/his usual language?	Problems involve all aspects of being understood using all usual modes of communication: spoken, written, sign language, or gestural communication. Proxies should take into account medicines, personal assistance, aids or modifications that might make being understood, using usual language, easier or harder. Example: a person who stutters can communicate poorly at work because colleagues are inpatient and make jokes about the problem → the proxy should describe how big the problem is taking into account the attitudes of colleagues.
14033	How much of a problem does [NAME] have with understanding others, using her/his usual language?	Problems involve all aspects of understanding verbal communication, including dealing with the speed of conversation, background noise, distractions and other features of the communication context. Proxies should take into account medicines, personal assistance, aids or modifications that might make understanding others, using usual language easier or harder. Example: a person has problems understanding the wife after a stroke because she has no patience and cannot speak slowly enough → the proxy should describe how big the problem is taking into account the attitude of the spouse.
I4034	How much of a problem is forgetfulness for [NAME]?	Problems involve forgetting keys, small objects, or minor responsibilities. Proxies should take into account medicines, personal assistance, aids or modifications that might make forgetfulness better or worse. Example: an older person counters problems with forgetfulness by using a notebook as a memory aid → the proxy should describe how big the problem is, taking into accounts the notebook.
14035	How much of a problem is remembering to do the important things in <code>[NAME's]</code> day to day life?	This refers to problems recalling things that are important to him or her, such as important appointments and deadlines. Proxies should take into account medicines, personal assistance, aids or modifications that might make remembering to do the important things better or worse. Example: a person with Parkinson's disease, who has significant memory impairments, uses an alarm clock to remember medication intake time → the proxy should describe how big the problem is, taking into account the alarm clock.
14036	How much of a problem is finding solutions to day to day problems that [NAME] might have?	Finding solutions to situations by identifying and analysing issues, developing options and solutions, evaluating potential effects of solutions, and executing a chosen solution, such as in resolving a dispute between two people. Proxies should take into account medicines, personal assistance, aids or modifications that might

Question No.	Question	Guide for completion
		make finding solutions to day-to-day problems easier or harder. Example : a woman with rheumatoid arthritis counts on her daughter to find solutions to day-to-day problems → the proxy should describe how big the problem is, taking into account the support of the daughter.
I4037	How much of a problem does [NAME] have with getting her/his household tasks done?	Problems involve all aspects of maintaining the household, and needs to take into account all of the needs of the household or family, including physical, financial, and psychological needs. Examples of household tasks are cleaning the living area, washing and drying clothes, using household appliances, storing daily necessities and disposing of garbage. Proxies should take into account medicines, personal assistance, aids or modifications that might make getting household tasks done easier or harder. Example: a person with spinal cord injury using a wheelchair has no problems getting housework done because a personal assistant takes care of it → the proxy should describe how big the problem is, taking into account the personal assistant. In this case, the answer
I4038	How much of a problem does [NAME] have with managing the money s/he has?	could be "no problem". Managing the money includes all aspects of having command over economic resources for present and future needs, using and saving money, evaluating the value of objects in relation to how much these are needed, and managing the use of bank services such as credit cards or internet banking. Proxies should take into account medicines, personal assistance, aids or modifications that might make it easier or harder. Example: a person with dementia cannot manage his or her money alone anymore, but with the help of the son the person has no problems → the proxy should describe how big the problem is taking into account the help of the son. In this case, the answer could be "no problem".
I4039	How much of a problem does [NAME] have with doing things for relaxation or pleasure?	Doing things for relaxation or pleasure refers to engaging in recreational or leisure activity, and any form of play. Proxies should take into account medicines, personal assistance, aids or modifications that might make doing things for relaxation or pleasure easier or harder. Example: a person with dementia takes part in no leisure activities because nothing is offered for persons with dementia in the neighbourhood → the proxy should describe how big the problem is, taking into account the neighbourhood.
I4040	How much of a problem does [NAME] have with joining community activities, such as festivities, religious or other activities?	Includes being involved in town meetings, fairs, leisure or sport activities in the town, neighbourhood or community. Proxies should take into account medicines, personal assistance, aids or modifications that might make joining community activities easier or harder. Example: a person in a wheelchair has no problems joining festivities because of the support of the family and the accessibility of places in the neighbourhood → the proxy should describe how big the problem is taking into account the support of the family and the accessibility of the neighbourhood.

Question No.	Question	Guide for completion
I4041	How much of a problem does [NAME] have in engaging in local or national politics and in civil society organisations, such as [add country specific examples]?	Refers to having the possibility of engaging in the social, political and governmental life of a citizen. For instance, political parties, Rotary Club or Red Cross. Proxies should take into account medicines, personal assistance, aids or modifications that might make it easier or harder. Example: a blind person has problems engaging in local politics because no information is available in Braille the proxy should describe how big the problem is taking into account the lack of adapted materials.
I4042	How much of a problem did [NAME] have with voting in the last elections?	Refers to problems regarding voting in the face of impairments (such as mobility or visual impairments) and lack of accommodations in or lack of accessibility of polling places, for instance. Proxies should take into account medicines, personal assistance, aids or modifications that might make voting easier or harder. Example: a person in wheelchair cannot vote because the polling place is not barrier free → the proxy should describe how big the problem is taking into account the accessibility of the polling place.
I4043	How much of a problem does [NAME] have providing care or support for others?	Providing care or support for others refers to assisting household members and others with learning, communicating, self-care, and moving within the house or outside, for instance children. Proxies should take into account medicines, personal assistance, aids or modifications that might make providing care easier or harder. Example: a mother cannot bath and dress her small children after a stroke and does not get enough support from friends and neighbours → the proxy should describe how big the problem is taking into account the lack of support from friends and neighbours.
I4044	How much of a problem does [NAME] have with applying for and getting a job?	Includes locating and choosing a job, in a trade, profession or other form of employment, performing the required tasks to get hired, and getting the job. Proxies should take into account medicines, personal assistance, aids or modifications that might make applying for and getting a job easier or harder. Example: a blind person has significant problems finding work because of a lack of opportunities of jobs with accommodations for blind persons → the proxy should describe how big the problem is taking into account the lack of opportunities for blind persons.
I4045	How much of a problem is getting things done as required at work?	Includes performing the expected job-related tasks to keep an occupation, trade, profession or other form of employment. Proxies should take into account medicines, personal assistance, aids or modifications that might make getting things done as required at work easier or harder. Example: a person with diabetes cannot perform work tasks as required anymore and gets no support from her or his boss → the proxy should describe how big the problem is taking into account the lack of support at work from her or his supervisor.
I4046	How much of a problem does [NAME] have getting a formal or informal	Includes gaining admission to school, education and attending school regularly, and completing education. Proxies should take into account medicines, personal

Question No.	Question	Guide for completion
	education?	assistance, aids or modifications that might make getting a formal or informal education easier or harder. Example : a person in a wheelchair cannot go to the university because the buildings are not barrier free → the proxy should describe how big the problem is taking into account the fact that buildings are not barrier free.
I4047	How much of a problem is getting things done as required at school?	Includes working cooperatively with other students, and completing assigned tasks and projects. Proxies should take into account medicines, personal assistance, aids or modifications that might make getting things done as required at school easier or harder. Example: a person with depression cannot complete tasks as required anymore and gets no support from her or his teachers → the proxy should describe how big the problem is taking into account the lack of support from her or his teachers.
I4048	How much of a problem is using public or private transportation?	Includes using transportation to move around as a passenger, such as being driven in a car or on a bus, rickshaw, or private or public taxi, bus, train. Proxies should take into account medicines, personal assistance, aids or modifications that might make using public or private transportation easier or harder. Example: a person in wheelchair cannot use public transportation because it is not barrier free → the proxy should describe how big the problem is, taking into account that public transportation is not barrier free.

5000 HEALTH CONDITIONS

Introduction

This section asks questions about problems in day to day life exclusively because of health issues as well as the presence, diagnoses and treatment of health conditions or diseases as reported by the proxy. The questions refer to current health conditions or diseases.

Purpose

The purpose of this section is to determine the number of individuals with problems in day-to-day life exclusively because of their health, the number of individuals with health conditions and how many of these people actually receive treatment.

Procedure

In this section, proxies are first asked about problems in day-to-day life exclusively due to the respondent's health. Then questions about the presence of health conditions and about diagnosis and treatment for the endorsed health conditions are asked. It must be noted that the list of health conditions proposed here focusses on the most burdensome ones worldwide and should be updated by countries in order to be tailored to national needs and to capture the most prevalent or serious health conditions in the national setting.

I5001- I5017

The table below provides guidelines for completing questions I5001 to I5019, which relate to difficulties the respondent may have doing certain activities because of her or his HEALTH. Proxies should answer these questions WITHOUT TAKING INTO ACCOUNT people who help the respondent and any assistive devices or modifications the respondent uses. The entrance question requests the proxy to rate the respondent's health and was selected as the first question to support proxies focusing on health.

For all questions you should:

- Read aloud all response options to the proxy and
- Circle only one response option.

I5001

The entrance question requests the proxy to rate the respondent's health and was selected as the first question to encourage respondents to focus on health.

For all questions you should:

- Read aloud all response options to the respondent and
- Circle only one response option.

Question No.	Question	Guide for completion
15001	I will start with a question about the respondent's overall health, including her/his physical and mental health: In general, how would you rate [NAME's] health today?	Respondent should evaluate his or her general health including physical and mental health. Read aloud all response options and circle the response option selected by the respondent.

WG1-WG6

The table below provides guidelines for completing questions WG1-WG6. These questions are from the Washington Group Short-Set of Questions on Disability. These questions ask about difficulties the participant may have doing certain activities because of a HEALTH PROBLEM.

For all questions you should:

- Read aloud all response options to the respondent and
- Circle only one response option.

Question	Question	Guide for completion
No.		
WG1	Does [NAME] have difficulty seeing, even if wearing glasses?	The purpose of this item is to identify persons who have vision difficulties or problems of any kind even when wearing glasses (if they wear glasses). They can have a problem seeing things close up or far away. They may not be able to see out of one eye or they may be only able to see directly in front of them, but not to the sides. Any difficulty with vision that they consider a problem should be captured. Definitions: Seeing refers to an individual using his/her eyes and visual capacity in order to perceive or observe what is happening around them.
WG2	Does [NAME] have difficulty hearing, even if using a hearing aid?	The purpose of this item is to identify persons who have some hearing limitation or problems of any kind with their hearing even when using a hearing aid (if they wear a hearing aid). They can have a problem hearing only when they are in a noisy environment, or they may have problems distinguishing sounds from different sources. They may not be able to hear in one ear or both. Any difficulty with hearing that they consider a problem should be captured. Definitions: Hearing refers to an individual using his/her ears and auditory (or hearing) capacity in order to know what is being said to them or the sounds of activity, including danger that is happening around them.
WG3	Does [NAME] have walking or climbing steps?	The purpose of this item is to identify persons who have some limitation or problems of any kind getting around on foot. It may or may not contribute to difficulty in doing their daily activities. They can have

Question No.	Question	Guide for completion
		a problem walking more than a block, or short or long distances, or the problem can be that they can't walk up or down steps without difficulty. They may not be able to walk any distance without stopping to rest or they may not be able to walk without using some type of device such as a cane, a walker or crutches. In some instances they may be totally unable to stand for more than a minute or two and need a wheelchair to get from place to place. Difficulties walking can include those resulting from impairments in balance, endurance, or other non-musculoskeletal systems. Any difficulty with walking (whether it is on flat land or up or down steps) that they consider a problem should be captured. Definitions: Walking refers to an individual using his/her legs in such a way as to propel themselves over the ground to get from point A to point B. The capacity to walk should be without assistance of any device or human. If such assistance is needed, the person has difficulty walking.
WG4	Does [NAME] have difficulty remembering or concentrating?	The purpose of this item is to identify persons who have some problems with remembering or thinking that contribute to difficulty in doing their daily activities. They can have a problem finding their way around, or the problem can be that they can't concentrate on what they are doing, or they may forget where they are or what month it is. They may not remember what someone just said to them or they may seem confused or frightened about most things. Any difficulty with remembering, concentrating or understanding what is going on around them that they or family members (if the family member is the respondent) consider a problem should be captured. We do not intend to capture difficulties remembering or concentrating because of common everyday situations such as high workload or stress, or as a result of substance abuse. Definitions: Remembering refers to an individual using his/her memory capacity in order to recall what has happened around them. It means the individual can bring to mind or think again about something that has taken place in the past (either the recent past or further back). In connection with younger people, remembering is often associated with storing facts learned in school and being able to retrieve them when needed.
WG5	Does [NAME] have difficulty (with self-care such as) washing all over or dressing?	The purpose of this item is to identify persons who have some problems with taking care of themselves independently. Washing and dressing represent tasks that occur on a daily basis and are very basic activities. Definitions: Washing all over refers to the process of cleaning one's entire body (usually with soap and water) in the usual manner for the culture. The washing activity includes cleaning hair and feet, as well as gathering any necessary items for bathing

Question	Question	Guide for completion
No.		
		such as soap or shampoo, a wash cloth, or water. Dressing refers to all aspects of putting clothing or garments on the upper and lower body including the feet if culturally appropriate. Gathering clothing from storage areas (e.g. closet, dressers), securing buttons, tying knots, zipping, etc., should be
		considered part of the dressing activity.
WG6	Using her/his usual (customary) language, does [NAME] have difficulty communicating, for example understanding or being understood?	The purpose of this item is to identify persons who have some problems with talking, listening or understanding speech such that it contributes to difficulty in doing their daily activities. They can have a problem making themselves understood, or the problem may be that they can't understand people who talk to them or try to communicate with them in other ways. Definitions: Communicating refers to a person exchanging information or ideas with other people through the use of language. They may use their voices for their exchange or make signs or write the information they want to exchange. Communication can be interrupted at numerous places in the exchange process. It may involve mechanical problems such as hearing impairment or speech impairment, or it may be related to the ability of the mind to interpret the sounds that the auditory system is gathering and to recognize the words that are being used. The intention is not to include communication problems due to non-native or unfamiliar language.

I5002- I5017

The table below provides guidelines for completing questions I5002 to I5017 which relate to difficulties the respondent may have doing certain activities because of her or his HEALTH. It covers difficulties with: mobility, hand and arm use, self-care, seeing, hearing, pain, sleep and energy, breathing, affect, interpersonal relationships, handling stress, communication, cognition, household tasks, community and citizenship participation, caring for others, work & schooling.

Proxies should answer these questions WITHOUT TAKING INTO ACCOUNT people who help them, any assistive devices or modifications used. Medication taken in a regular basis for symptom control of diseases, for instance, for chronic pain, high blood pressure, Parkinson's disease, asthma or sleep disturbances can be taken into account.

For all questions you should:

- Read aloud all response options to the respondent and
- Circle only one response option.

15002	How much difficulty does [NAME] have moving around because of her/his health?	Proxies should evaluate the difficulties they have in moving around in general because of their health and not taking any personal assistance, aids or modifications into account. Difficulties include moving around outside the house to get to different places, such as the workplace or places of worship. Example: an older person with arthritis has difficulties with moving around and uses crutches → the proxy should describe the extent of the difficulties without the crutches.
15003	How much difficulty does [NAME] have learning a new	Proxies should evaluate the difficulties they have in learning a new task, such as acquiring new

	tack because of bor/bis books?	information at home school work or at leisure
15004	Because of her/his health? Because of her/his health, how much difficulty does [NAME]	information at home, school, work, or at leisure because of their health and not taking any personal assistance, aids or modifications into account. Example: a person encounters difficulties with learning new tasks after a stroke and needs support from health professionals → the proxy should describe how the extent of the difficulties without support of health professionals. Proxies should evaluate the difficulties they have in toileting, e.g. opening clothes before, using a toilet or cleaning oneself afterwards, because of their health and not taking any personal assistance, aids or modifications into account.
13001	have toileting?	Example : a person with Dementia has important difficulties with toileting and needs the help of a personal assistant → the proxy should describe the extent of the difficulties without considering help of the personal assistant.
15005	Because of [NAME's] health, how much difficulty does s/he have on starting, sustaining and ending a conversation?	Proxies should evaluate the difficulties they have on starting, sustaining or ending a conversation because of their health and not taking any personal assistance, aids or modifications into account. Example: a person has difficulties understanding the wife after a stroke but can manage it because she speaks slowly → the proxy should describe the extent of the difficulties when the wife speaks as usual.
15006	Because of [NAME's] health, how much difficulty does s/he have doing things that require the use of her/his hands and fingers, such as picking up small objects or opening a container?	The question refers to difficulties in handling objects, picking up, manipulating and releasing them using one's hand, fingers and thumb, such as required to lift coins off a table or turn a dial or knob. Proxies should evaluate the difficulties they have in doing things that require the use of hands and fingers because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with rheumatoid arthritis has difficulties using hands and fingers but no problems opening a bottle using an assistive device → the proxy should describe the extent of the difficulties without using assistive devices.
15007	How much difficulty does [NAME] have sleeping because of her/his health?	Proxies should evaluate the difficulties they have in sleeping, such as difficulties falling asleep or waking up too early, because of their health and not taking any personal assistance, aids or modifications into account. Example: a person has difficulties to fall asleep and uses relaxation techniques to handle them → the proxy should describe the extent of the difficulties without the use of relaxation techniques.
15008	How much difficulty does [NAME] have with shortness of breath because of her/his health?	Proxies should evaluate the difficulties they have with shortness of breath, for instance after climbing steps, because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with a heart disease has shortness of breath after exercising or doing vigorous activities and avoids such activities → the proxy should describe the extent of the difficulties with shortness of breath in general.

15009	How much difficulty does [NAME] have doing household tasks because of her/his health?	Proxies should evaluate the difficulties they have in doing household tasks, such as doing laundry, cleaning or putting out the garbage, because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with spinal cord injury has important difficulties in getting housework done but has a personal assistant takes care of it → the proxy should describe the extent of the difficulties without the help of the personal assistant.
15010	How much difficulty does [NAME] have providing care or support for others because of her/his health?	Providing care or support for others refers to assisting household members and others with learning, communicating, self-care, and moving within the house or outside, for instance children. Proxies should evaluate the difficulties they have in providing care or support for others because of their health and not taking any personal assistance, aids or modifications into account. Example: a mother cannot help her small children bathing and dressing after a stroke but gets enough support from friends and neighbours → the proxy should describe the extent of the difficulties without the help and support from friends and neighbours.
15011	Because of [NAME's] health, how much difficulty does s/he have with joining community activities, such as festivities, religious or other activities?	The question includes being involved in town meetings, fairs, leisure or sport activities in the town, neighbourhood or community. Proxies should evaluate the difficulties they have in joining community activities because of their health and not taking any personal assistance, aids or modifications into account. Example: a person in a wheelchair can join festivities because of the support of the family → the proxy should describe the extent of the difficulties without the support of the family.
15012	How much difficulty does [NAME] have with her/his day to day work or school because of her/his health?	Interviewer: This question should only be asked if 12005 = 2, 3, 4 or 5 or if 12002 = 2. Proxies should evaluate the difficulties they have in day-to-day work or school because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with depression cannot do things as required anymore but gets support from her or his supervisor → the proxy should describe the extent of the difficulties without the support from supervisors.
I5013	How much difficulty does [NAME] have with feeling sad, low or depressed because of her/his health?	Proxies should evaluate the difficulties they have in with feeling sad, low or depressed because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with cancer feels very often sad, low or depressed but gets support from the spouse → the proxy should describe the extent of the difficulties not taking into account the support from the spouse.
I5014	How much difficulty does [NAME] have with feeling worried, nervous or anxious because of her/his health?	Proxies should evaluate the difficulties they have with feeling worried, nervous or anxious because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with chronic pain feels worried,

		nervous or anxious → the proxy should describe the
		extent of the difficulties not taking into account any
		kind of support.
I5015	Because of her/his health, how much difficulty does <i>[NAME]</i> have getting along with people who are close to her/him, including her/his family and friends?	Getting along with people who are close includes showing respect, warmth, appreciation, and tolerance in relationships; responding to criticism and social cues in relationships; and using appropriate physical contact. Proxies should evaluate the difficulties they have in getting along with people who are close to them because of their health and not taking any personal assistance, aids or modifications into account. Example: a person has increasing difficulties getting along with people who are close after a stroke but can handle this when the spouse is present → the proxy should describe the extent of the difficulties not taking into account the support of the spouse.
I5016	Because of her/his health, how much difficulty does [NAME] have coping with all the things s/he has to do?	Problems include not being able to keep up at work or education, being late for appointments, or not being able to get housework done, among others. Proxies should evaluate the difficulties they have in coping with all the things they have to do because of their health and not taking any personal assistance, aids or modifications into account. Example: a person with Parkinson's disease copes better with all the things she or he has to do with the support of family and friends → the proxy should describe the extent of the difficulties without the support of family and friends.
I5017	How many bodily aches or pains does [NAME] have?	Proxies should evaluate how many bodily aches or pains they have because of their health without taking any personal assistance, aids or modifications into account. Example: a person has chronic pain and uses meditation techniques to cope with it the proxy should describe how much pain he/she has without using meditation techniques.

I5018- I5045 Health conditions The table below provides guidelines for completing questions I5018 to I5045 that relate to health conditions. It must be noted that this list focusses on the most burdensome health conditions worldwide and should be tailored to national needs and capture the most prevalent or serious health conditions in the national setting.

For each health condition four columns are presented. In column "a" the answer to question a "Do you have [DISEASE NAME]?" is entered. Questions b, c and d (next columns) are only asked for the health conditions endorsed in questions a.

- Question b: respondent should answer whether any doctor or any other health professional has ever told them that they have the health condition or problem.
- Question c: respondent should answer whether he or she has been given any medication for the health conditions or problems in the last 12 months. Medication is defined in the ICF as "any natural or human-made object or substance gathered, processed or manufactured for medicinal purposes." In this question, medicines include natural (e.g. plants extracts) or human-made (e.g. synthetic drugs produced in laboratories) substances used in the treatment or cure of the disease or health problem, used for a limited duration for acute problems, or on a regular basis for chronic diseases.
- Question d: respondent should answer whether he or she has been given any
 other kind of treatment, beyond medicines, for the health conditions or
 problem in the last 12 months. This might include, for instance,
 physiotherapy, occupational therapy, hot and cold therapies, counselling,
 psychotherapy and etc.

Question No.	Question	Guide for completion
	e options for the	following questions are always 1=Yes; 5=No.
_		response for each question.
I5018	Vision loss	Vision loss is the absence of vision or a decreased ability to see to a degree that causes problems not fixable by usual means, such as glasses. It can happen either acutely (i.e. abruptly) or chronically (i.e. over a long period of time) for instance due to cataracts, a disease in which the lenses of the eyes become cloudy and opaque, causing partial or total blindness. The term blindness is used for complete or nearly complete vision loss. If the respondent does not understand the term "vision loss", describe it as problems with having reduced vision, even when using the best
		possible corrective lenses or glasses.
15019	Hearing loss	Deafness, hearing impairment, or hearing loss is a partial or total inability to hear caused by many different factors, including but not limited to age, noise, illness, chemicals and physical trauma. If the proxy does not understand the term "hearing loss", describe it as problems with having diminished sensitivity to the sounds that are normally heard.
I5020	High blood pressure (Hypertension)	Hypertension or high blood pressure is a persistent elevation of the pressure in the arteries that may impair heart, brain or kidneys function over time.
15021	Diabetes	Diabetes is also called diabetes mellitus or "high blood sugar". If the proxy does not understand the term "diabetes", describe the condition as a chronic (or long-term) condition whereby a person has problems producing insulin. Insulin helps to turn what we eat into the energy we need to survive and to maintain the correct levels of sugar in our blood. People with diabetes eventually develop a high blood sugar level, which can lead to problems with blood vessels, eyes, kidneys, nerves and heart.
15022	Arthritis, arthrosis	"Arthritis" is a disease of joints (for example, fingers/wrists, knees, hips, lower back). Common symptoms are swelling, stiffness, redness, heat and/or pain. If the proxy does not understand the term "Arthritis", describe the

Question No.	Question	Guide for completion
		common symptoms: swelling, stiffness, redness, heat and/or pain in fingers/wrists, knees, hips, lower back.
15023	Heart disease, coronary disease, heart attack	Heart disease or angina (angina pectoris) is a symptom indicating chronic heart disease. If the proxy does not understand the terms, describe the condition as the presence of temporary pain in the chest that can radiate to other parts of the upper body, mainly to the left arm.
I5024	Chronic bronchitis/ emphysema	Chronic bronchitis is part of a breathing disease called COPD (Chronic Obstructive Pulmonary Disease). Bronchitis means swelling in the air passages that connect the windpipe (trachea) and lungs. This inflammation means the walls of the bronchi are swollen and filled with extra sticky mucus. Airflow into and out of the lungs is partly blocked because of the swelling and extra mucus. Emphysema is also part the lung disease called COPD. The place in the lungs where oxygen is exchanged is damaged - and usually means the person has shortness of breath and a barrel-shaped chest. If the proxy does not understand the term "chronic lung disease", describe it as problems with breathing - usually including cough and sputum production. This does not include asthma - (see I5025).
I5025	Asthma, allergic respiratory disease	Asthma is a disease characterized by recurrent attacks of breathlessness and wheezing, which vary in severity and frequency from person to person. In an individual, they may occur from hour to hour and day to day. This condition is due to inflammation of the air passages in the lungs and affects the sensitivity of the nerve endings in the airways so they become easily irritated. In an attack, the lining of the passages swell causing the airways to narrow and reducing the flow of air in and out of the lungs. If the proxy does not understand the term "asthma", describe it as recurrent attacks of breathlessness and wheezing.
I5026	Back pain or disc problems	Back pain is pain felt in the back that may have a sudden onset or can be a chronic. It can be constant or intermittent, stay in one place or radiate to other areas. It may be a dull ache, or a sharp or piercing or burning sensation. The pain may radiate into the arms and hands as well as the legs or feet, and may include symptoms other than pain. These symptoms may include tingling, weakness or numbness.
I5027	Migraine (recurrent headaches)	Migraine is a primary headache disorder that most often begins at puberty and most affects those aged between 35 and 45 years. It is caused by the activation of a mechanism deep in the brain that leads to release of pain-producing inflammatory substances around the nerves and blood vessels of the head. Migraine is recurrent, often lifelong, and characterized by attacks. Attacks include features such as headache of moderate or severe intensity; nausea (the most characteristic); one-sided and/or pulsating quality; aggravated by routine physical activity; with duration of hours to 2-3 days; attack frequency is anywhere between once a year and once a week. If the proxy does not understand the term "migraine", describe it as recurrent headaches of moderate or severe intensity, of long duration, and usually including nausea.
I5028	Stroke, e.g. cerebral bleeding	Strokes are caused by disruption of the blood supply to the brain. This may result from either blockage (ischaemic stroke) or rupture of a blood vessel (haemorrhagic stroke). If the proxy does not understand "stroke", explain that it is an injury to the brain – usually a sudden and severe attack. It can cause permanent or temporary paralysis (inability to move, usually down one side of the body) and loss of speech.

Question No.	Question	Guide for completion
15029	Depression or Anxiety	"Depression" can be characterized by a feeling or spell of dismally low spirits: blues, dejection, despondence, doldrums, downheartedness, dumps, funk, gloom, glumness, heavy-heartedness, melancholy, miserableness, mournfulness, unhappiness over a period of time (weeks, months or years). Although depression is common, it often goes undetected because it may be attributed to a person's physical, social or economic difficulties. "Anxiety" is an unpleasant state of inner turmoil, often accompanied by nervous behaviour, such as pacing back and forth, somatic complaints and rumination. Anxiety is a feeling of fear, worry, and uneasiness, usually generalized and unfocused as an overreaction to a situation that is only subjectively seen as menacing. It is often accompanied by restlessness, fatigue, problems in concentration, and muscular tension.
15030	Leprosy	Leprosy is a chronic infectious disease caused by Mycobacterium leprae, an acid-fast, rod-shaped bacillus. The disease mainly affects the skin, the peripheral nerves, mucosa of the upper respiratory tract and also the eyes. Leprosy is curable and treatment provided in the early stages averts disability. Left untreated, leprosy can be progressive, causing permanent damage to the skin, nerves, limbs and eyes.
I5031	Amputation	Amputation is the removal of a body extremity by trauma, or surgery. As a surgical measure, it is used to control pain or a disease process in the affected limb, such as malignancy or gangrene. A transplant or a prosthesis are the only options for recovering the loss.
I5032	Polio	Poliomyelitis (polio) is a highly infectious viral disease, which mainly affects young children. Initial symptoms of polio include fever, fatigue, headache, vomiting, stiffness in the neck, and pain in the limbs. In a small proportion of cases, the disease causes paralysis, which is often permanent. Polio can only be prevented by immunization.
15033	Gastritis or ulcer	Gastritis is an inflammation of the lining of the stomach, and has many possible causes. Main acute causes are excessive alcohol consumption or prolonged use of nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin or ibuprofen. Chronic causes are infection with bacteria, primarily Helicobacter pylori, chronic bile reflux, and stress; certain autoimmune disorders can cause gastritis as well. Abdominal pain is the most common symptom; the pain may be dull, vague, burning, aching, gnawing, sore, or sharp
I5034	Tumour or Cancer (including blood cancer)	Cancer is a generic term for a large group of diseases that can affect any part of the body. Other terms used are malignant tumours and neoplasms. One defining feature of cancer is the rapid creation of abnormal cells that grow beyond their usual boundaries, and which can then invade adjoining parts of the body and spread to other organs. This process is referred to as metastasis.
I5035	Trauma	Trauma relates to road traffic accidents or events/accidents in the home, school or workplace that resulted in bodily injury limiting activities. If the proxy first answers 'No', probe by saying: "Trauma could have been an accident in which you were involved either as the occupant of a motor vehicle, or when you were riding a motorcvcle/scooter, rickshaw or bicycle, or walking."
15036	Dementia	Dementia is a serious loss of global cognitive ability in a previously unimpaired person, beyond what might be expected from normal aging. It may be static, the result of a unique global brain injury, or progressive, resulting in long-term decline due to damage or disease

Question No.	Question	Guide for completion	
		in the body. Affected cognitive areas can be memory, attention, language, and problem solving.	
15037	Kidney diseases	Kidney diseases are disorders that affect the kidneys; the two organs that remove waste products, produce certain hormones, and regulate the level of chemicals in blood. There are at least six warning signs that may indicate kidney disease: burning or difficulty during urination; an increase in the frequency of urination; passage of blood in the urine; puffiness around the eyes, swelling of the hands and feet; pain in the small of the back just below the ribs; and high blood pressure.	
15038	Skin diseases, e.g. Psoriasis	Skin diseases may have a serious impact on people's quality of life, causing lost productivity at work and school, and discrimination due to disfigurement. Skin changes may also indicate the presence of more serious diseases that need treatment. A common and chronic skin disease is for instance psoriasis. It is a build-up of excess skin tissue that looks red and thick and is covered with silvery scales. It first appears on the elbows and knees, but can spread to other parts of the limbs and even the trunk. Certain forms affect particular areas like the hands, scalp or the joints.	
15039	Tuberculosis	Tuberculosis is an infectious disease caused by a bacterium and it usually affects the lungs, but all other body organs can also be involved (such as the central nervous system, bones and joints). Methods of detecting TB include examination of the sputum (that is, when a health care provider takes a sample of the substance spit out from a deep cough and sends it to a laboratory for analysis) or an X-ray picture of the chest.	
I5040	Mental (psychiatric) or behavioural disorders	Mental and behavioural disorders comprise a broad range of problems, with different symptoms. However, they are generally characterized by some combination of abnormal thoughts, emotions, behaviour and relationships with others. Examples are schizophrenia, depression, mental retardation and disorders due to drug abuse. Most of these disorders can be successfully treated.	
I5041	Sleep problems	Sleeping problems include problems falling asleep, waking up frequently during the night or waking up too early in the morning.	
I5042	Tinnitus	Tinnitus comprises a ringing, roaring, or buzzing in the ears that lasts for 5 minutes or longer over at least 12 months.	
15043	Other (specify)	Ask the proxy whether the respondent has any other health condition or disease not mentioned in the list. Write down the health condition or disease clearly and in CAPITALS. Check spelling and use margins for additional space.	
15044	Other (specify)	Ask the proxy whether the respondent has any other health condition or disease not mentioned in the list. Write down the health condition or disease clearly and in CAPITALS. Check spelling and use margins for additional space.	
15045	Other (specify)	Ask the proxy whether the respondent has any other health condition or disease not mentioned in the list. Write down the health condition or disease clearly and in CAPITALS. Check spelling and use margins for additional space.	

3000B PERSONAL ASSISTANCE, ASSISTIVE DEVICES AND FACILITATORS

Introduction This module asks detailed questions about assistance needs with day to day activities at home or outside, and aids and modifications used and needed.

Skip patterns It is important to closely follow the skip patterns in this module, as they have been designed to make sure the different categories of problematic environmental

factors are identified. Please pay attention to the "guide for completion" where \boldsymbol{bold} writing refers to responses that had been given in entrance questions of Module 3000 A.

I3036- I3039 Personal Assistance

The table below provides guidelines for completing questions I3036 to I3039 which relate to personal assistance.

Question No.	Question	Guide for completion
13036	If I3011=1 (yes) go to I3036 if I3011=5 (no) go to I3039 You told me that there are people assisting [NAME]. How many of these people are paid or belong to charity organizations?	 This question targets the use of any personal assistants who are paid or belong to charity organizations to help the respondent in his or her day-to-day life. Write down the number of people who are assisting the respondent who are paid or belong to charity organizations.
13037	How many of these people are not paid, such as family members, friends or volunteers?	 This question targets the use of any personal assistants who are paid or belong to charity organizations to help the respondent in his or her day-to-day life. Write down the number of people who are assisting the respondent who not paid, such as family members, friends or volunteers.
13038	If I3011=5 (no) You told me that there are people assisting [NAME]. Do you think s/he needs additional assistance with her/his day to day activities at home or outside?	This question targets additional need of the respondent for personal assistance with day to day activities at home or outside. Circle the appropriate response: 1=Yes; 5=No Skip pattern: Go to I3040
13039	You told me that there are no people assisting [NAME]. Do you think s/he needs someone to assist her/him?	 This question targets additional need of the respondent for personal assistance with day to day activities at home or outside. Circle the appropriate response: 1=Yes; 5=No
I3040	If I3012=1 (yes) go to I3040; if I3012=5 (no) go to I3043 You told me [NAME] uses aids. Does s/he use any assistive devices to help her/him get around or for self-care?	 This question targets the use of any aids to help the person get around or for self-care, such as cane, crutch, wheelchair, grasping bars hand, and arm brace. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 1 go to I3041; If 5 got to I3043
I3041	Which ones does s/he use?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13042	In addition to these, do you think [NAME] needs other aids to help her/him get around or for self-care?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 13045

Question No.	Question	Guide for completion
13043	You told me [NAME] does not use aids to help her/him get around and for self-care. Do you think s/he needs any?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle the appropriate response: 1=Yes; 5=No Skip pattern: if 5 go to I3045
I3044	Which are the assistive devices [NAME] needs to help get her/him around or for self-care?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
I3045	If I3012=1 (yes) go to I3045; if I3012=5 (no) go to I3048 Does [NAME] use any assistive devices to help her/him manage seeing problems?	 This question targets the use of any aids to help the person to see well, such as glasses. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 1 go to 3046; If 5 go to 3048
I3046	Which ones does s/he use?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
I3047	In addition to these, do you think [NAME] needs any other thing to help her/him manage seeing problems?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 13050
I3048	You told me [NAME] does not use anything to help her/himself see better. Do you think s/he needs any, such as glasses?	 This question targets the use of any aids to help the person to see well, such as glasses. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 5 go to I3050
I3049	Which are the assistive devices for seeing that [NAME] needs?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13050	If I3012=1 (yes) go to I3050; if I3012=5 (no) go to I3053 Does [NAME] use any assistive devices to help her/him hear or communicate better?	 This question targets the use of any aids to help the person to communicate better, such as hearing aids or voice amplifiers. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 1 go to I3051, If 5 got to I3053
I3051	Which ones does s/he use?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13052	In addition to these, do you think [NAME] needs other things to help her/him hear and communicate better?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.

Question No.	Question	Guide for completion
		Skip pattern: go to 13055
I3053	You told me [NAME] does not use assistive devices for hearing and communication.	 Read aloud all response options to the proxy. Circle the appropriate response: 1=Yes; 5=No
	Do you think s/he needs any, such as a visual or vibrating alarm?	Skip pattern: If 5 go to 13055
I3054	Which are the assistive devices for hearing and communication [NAME] needs?	 Read aloud all response options to the respondent and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13055	Are there any aids or modifications that make it easier for [NAME] to work, such as a computer with a large print, adjustable high desks or modified working hours?	 This question should only be asked if the person is currently working (I2005 = 2, 3, 4 or 5). If else, go to I3060 This question targets the use of any aids that make it easier for the person to work, such as adjustable high desks or modified working hours. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 1 go to I3056; if 5 go to I3058
I3056	Which ones does s/he use?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
I3057	In addition to these, do you think there are any other things that would make it easier for [NAME] to work?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 13060
I3058	You told me you have no aids or modifications that make it easier for [NAME] to work. Do you think s/he needs any aid or modification?	 Read aloud all response options to the proxy. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 5 go to I3060
13059	Which are the aids or modifications for work that [NAME] needs?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13060	Are there any aids or modifications that make it easier for [NAME] to get an education, such as extra time for exams or barrier free classrooms?	 This question should only be asked if the person is currently receiving education (I2002 = 2). If else, select not applicable and go to I3065. This question targets the use of any aids that make it easier for the person at school or college, such as barrier free classrooms. Circle the appropriate response: 1=Yes; 5=No

Question	Question	Guide for completion
No.		Skip pattern: If 1 go to 13061; If 5 got to 13063
13061	Which ones does s/he use?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
I3062	In addition to these, do you think there are any other things that would make it easier for [NAME] to get an education?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 13065
13063	You told me [NAME] has no modifications that make it easier for her or him to get an education. Do you think s/he needs aids or modifications that make it easier for her/him to get an education?	 Read aloud all response options to the proxy. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 5 go to I3065
I3064	Which are the aids or modifications that [NAME] needs?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13065	Are there any modifications that make it easier for [NAME] to be at home, such as ramps, grab bars, or any other accessibility features?	 This question targets the use of any aids that make it easier for the person to be at home. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 1 go to I3066; If 5 got to I3068
13066	Which ones does s/he use?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13067	In addition to these, do you think there are any other things that would make it easier for [NAME] at home?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip pattern: Go to 13070
13068	You told me there are no aids or modifications that make it easier for [NAME] to be at home. Do you think s/he needs any modifications?	 Read aloud all response options to the proxy. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 5 go to I3070
13060	Which are the modifications	- Pood aloud all reconses entires to the array and
I3069	Which are the modifications	• Read aloud all response options to the proxy and use

Question No.	Question	Guide for completion
	that s/he needs at home?	the SHOWCARD. • Circle all appropriate response options; more than one option can be selected.
13070	Are there any modifications that make it easier for [NAME] to participate in community activities such as accessible public transportation or accessible public toilets?	 This question targets the use of any aids that make it easier for the respondent to participate in community activities, such as accessible public transportation or accessible public toilets. Circle the appropriate response: 1=Yes; 5=No Skip patterns: If 1 go to I3071, If 5 got to I3073
I3071	Which ones does s/he use?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.
13072	In addition to these, do you think there are any other things that would make it easier for <code>[NAME]</code> to participate in community activities?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected. Skip patterns: Go to 16001
13073	You told me [NAME] has no modifications that make it easier for her/him to participate in the community. Do you think s/he needs any modifications to make it easier to participate in community activities?	 Read aloud all response options to the proxy. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 5 go to I6001
13074	Which are the modifications that [NAME] needs?	 Read aloud all response options to the proxy and use the SHOWCARD. Circle all appropriate response options; more than one option can be selected.

6000 HEALTH CARE UTILISATION

Introduction

This section assesses the respondent's and the household's experiences with the health system. In particular, questions are asked about:

- Needing health care;
- Inpatient hospital care;
- Outpatient care and care at home; and,
- Responsiveness of health care professionals and systems to the respondent's health care needs.

I6001-I6003 Need of health care

The table below provides guidelines for completing questions I6001 to I6003 that relate to needing health care. Use SHOWCARD (Appendix Response Scales) as needed.

Question	Question	Guide for completion
No.		

Question No.	Question	Guide for completion
I6001	How long ago was the last time that [NAME] needed health care?	 "Needed" means the last time the respondent felt she or he had a health problem and required a health professional. Record years and/or months. If less than 1 year ago, enter '00' for years ago If 'Don't know', go to I6002.
16002	Was it more than 3 years ago?	 Ask only if response to I6001 is 'Don't know'. If 'Yes', probe, asking about any type of health care from a doctor, nurse, pharmacist, traditional healer, midwife, or other. Skip pattern: If 1, go to I7001
16003	Thinking about health care [NAME] needed in the last 3 years, where did s/he go most often when s/he felt sick or needed to consult someone about her/his health?	 Record only one location in which the respondent most frequently received health care over the last 3 years. Read the response categories to the proxy only if she/he is having troubles responding. A "medical doctor" can include general practitioner or specialist including, for example, gynaecologist, psychiatrist or other. Use the local term for traditional healer. Circle the appropriate response option, one answer allowed If the proxy's answer is not listed in the response options, select "other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.

I6004- I6009 Inpatient hospital care

The table below provides guidelines for completing questions I6004 to I6009 that relate to health care that required an overnight stay in a health care facility over the last 3 years and health care received over the last 12 months.

Question	Question	Guide for completion
No. 16004	In the last 3 years, has s/he ever stayed overnight in a hospital or long-term care facility?	"Overnight" stays could be one night or longer in a hospital, health centre, health clinic, hospice or long-term care facility (old persons home, nursing home or other name – use local terms). Skip pattern: If 5, go to I6010
16005	When was the last overnight stay in a hospital, rehabilitation facility or long-term care facility?	 Ask proxy to try to remember when the respondent had her/his last overnight stay (anytime in the last 3 years). If the proxy only knows a date, calculate how long ago and repeat back for verification. For example, if you are interviewing in June 2014 and the proxy says, "I think it was around January 2012", you could calculate that date to say, "So that was about 2 and a half years ago"? If the respondent stayed overnight when visiting someone in hospital or because a child of hers/his was in hospital, skip to I6010. Skip pattern: If more than 3 years ago, go to I6010
16006	Over the last 12 months, how many different times was s/he a patient in a hospital, rehabilitation facility or long-term care facility for at least one night?	 Enter the total number of times the respondent has stayed overnight in a health care facility because of her/his own health care needs or situation. Emphasize the time frame - the number of overnight stays in the last 12 months from the day of the interview. The overnight stay could be one night or multiple nights.

Question No.	Question	Guide for completion
16007	In the last 12 months, has there been a time when s/he needed to stay overnight in a health care facility but did not get that care?	 Emphasize the time frame – determine if there was a time when the respondent needed overnight care but did not get it in the last 12 months from the day of the interview. Circle the appropriate response: 1=Yes; 5=No Skip pattern: If 5 go to I6010
16008	What was the main reason s/he needed care, but did not get care?	 Record only one main reason, i.e. which health problem, for not having received the needed care. Read the response categories to the proxy only if she/he is having troubles responding. A SHOWCARD can be used if needed. Circle the appropriate response option, one answer allowed If the proxy's answer is not listed in the response options, select "other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.
16009	Which reason(s) best explains why s/he did not get health care?	 Record all reasons that the proxy indicates. Read the response categories to the proxy only if she/he is having troubles responding. If the proxy's answer is not listed in the response options, select "other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space.

I6010 - I6020 Outpatient care & care at home

The table below provides guidelines for completing questions I6010 to I6020, which relate to health care received at a hospital (not including an overnight stay), health centre, clinic, private office or at home from a health care worker.

Question No.	Question	Guide for completion
I6010	Over the last 12 months, did s/he receive any health care NOT including an overnight stay in hospital or long-term care facility?	 Determine if the respondent received any outpatient or home health care. This could be health care received in a clinic, hospital, dispensary, private office or at home, for example, but care which does not necessitate an overnight stay by the respondent outside of their home. The types of health care professionals they might have seen include a Medical Doctor (including gynaecologist, psychiatrist and other specialists), Nurse, Midwife, Dentist, Physiotherapist or chiropractor, Traditional medicine practitioner (use local names), Pharmacist, or Home health visitor, to mention some common types of health care providers. Skip pattern: If no, go to I6018
I6011	In total, how many times did s/he receive health care or consultation in the last 12 months?	Record the number of times the respondent received medical care or consultation - again in the outpatient or home setting - over the last 12 months.
I6012	Thinking about [NAME's] last visit to a health care facility in the last 12 months: Which facility did s/he	Read out all response options but circle only one option for the last visit.

Question No.	Question	Guide for completion	
-	visit?		
I6013	What was the name of this health care facility?	 Write down the name of the health care facility used clearly and in CAPITALS. Check spelling and use margins for additional space. 	
I6014	Thinking about [NAME's] last visit to a health care provider in the last 12 months: Who was the health care provider s/he visited?	 The types of health care professionals they might have seen include a Medical Doctor (including gynaecologist, psychiatrist and other specialists), Nurse, Midwife, Dentist, Physiotherapist or chiropractor, Traditional medicine practitioner (use local names), Pharmacist, or Home health visitor, to mention some common types of health care providers. Read the response categories to the proxy only if she/he is having troubles responding. Circle the appropriate response option, one answer allowed After this question substitute the type of health care provider selected by the patient when you see [health care provider] in parentheses 	
I6015	What was the sex of the [health care provider]?	 Substitute [health care provider] by the response to I6014. Circle the appropriate response option. 	
I6016	Was this visit to [health care provider] for a chronic (ongoing) condition, new condition, both or routine check-up?	 Substitute [health care provider] by the response to I6014. Circle the appropriate response option. 	
I6017	Which reason best describes why [NAME] needed this visit?	 Record only one main reason, i.e. which health problem, for not having received the needed care. Read the response categories to the proxy only if she/he is having troubles responding. A SHOWCARD can be used if needed. Circle the appropriate response option, one answer allowed If the proxy's answer is not listed in the response options, select "other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space. 	
I6018	In the last 12 months, was there a time when [NAME] needed health care that did not require overnight stay in a health care facility, but did not get care?	Circle the appropriate response: 1=Yes; 5=No	
I6019	What was the main reason [NAME] needed care, even if s/he did not get care?	 Record only one main reason, i.e. which health problem, for not having received the needed care. Read the response categories to the proxy only if she/he is having troubles responding. A SHOWCARD can be used if needed. Circle the appropriate response option, one answer allowed If the proxy's answer is not listed in the response options, select "other, specify" and write down the service used clearly and in CAPITALS. Check spelling and use margins for additional space. 	
I6020	Which reason(s) best	Record all reasons that the proxy indicates	

Question	Question	Guide for completion
No.		
	explains why [NAME]	Read the response categories to the proxy only if she/he is
	did not get health care?	having troubles responding.
		If the proxy answer is not listed in the response options,
		select "other, specify" and write down the service used
		clearly and in CAPITALS. Check spelling and use margins
		for additional space.

I6021- I6029 Responsiveness of health care system

Questions I6021 to I6029 target the respondent's opinion about and satisfaction with the health care in their country.

Question No.	Question	Guide for completion
I6021	the amount of time s/he <u>waited</u> before being attended to?	 Proxy should rate the amount of time the respondent waited before being attended in the last visit to a health care provider. Read the response categories to the proxy and circle the appropriate response option.
I6022	her/his experience of being treated respectfully?	 Proxy should rate how respectful the respondent was treated in the last visit to a health care provider. Read the response categories to the proxy and circle the appropriate response option.
16023	how <u>clearly</u> health care providers <u>explained</u> things to her/him?	 Proxy should rate how clearly health care providers explained things to the respondent in the last visit to a health care provider. Read the response categories to the proxy and circle the appropriate response option.
16024	her/his experience of being involved in making decisions for her/his treatment?	 Proxy should rate the respondent's experience of being involved in decisions about treatment in the last visit to a health care provider. Read the response categories to the proxy and circle the appropriate response option.
16025	the way the health services ensured that s/he could talk privately to providers?	 Proxy should rate privacy and discretion ensured in last visit to a health care provider. Read the response categories to the proxy and circle the appropriate response option.
16026	the ease with which s/he could see a health care provider s/he was happy with?	 Proxy should rate how easy it was to see the health care provider the respondent wanted in last visit to a health care provider. Read the response categories to the proxy and circle the appropriate response option.
I6027	the <u>cleanliness</u> in the health facility?	 Proxy should rate the cleanliness in the health facility in respondent's last visit to a health care provider. Read the response categories to the proxy and circle the appropriate response option.
The final 2 country.	questions in this section ask	about the respondent's satisfaction with health care in their
16028	In general, how satisfied is [NAME] with how the health care services are run in her/his country [in	 This question targets a report of the overall level of satisfaction with the state of health care in their country. Circle the appropriate response option.

Question No.	Question	Guide for completion
	her/his area] -is s/he very satisfied, satisfied, neither satisfied nor dissatisfied, fairly dissatisfied, or very dissatisfied?	
I6029	How would [NAME] rate the way health care in her/his country involves her/him in deciding what services it provides and where it provides them?	 This question targets to find out how easy it is for a citizen to get involved in making decisions that would affect the structure of the health system. Circle the appropriate response option.

9000 INTERVIEWER ASSESSMENT

Introduction The following questions are for the interviewer, to help the survey team assess

the interview. The observations of the proxy and the impressions of how the proxy engaged with the interviewer during the interview are of interest here.

H9000 The table below provides guidelines for completing questions H9001 to H9004.

These will help the Supervisors, Principal Investigators and WHO to improve the

questionnaire and the interview process for follow-up surveys.

Question No.	Question	Guide for completion
H9001	Was someone else present during the interview?	If at any point during the interview, another person was present during the interview, circle "Yes". This could be a household member or other person. This person may or may not have contributed to the interview - either way, indicate whether a person was physically present.
H9002	What is your evaluation of the accuracy of the informant's answers?	This is the interviewer's perception about the accuracy of the household informant's responses.
H9003	What is your assessment of the proxy's cooperation?	This is the interviewer's perception about the cooperation level of the proxy.
H9004	Comments:	This space is provided for any additional information related to the interview or the interviewing process.

PART 7: EDITING QUESTIONNAIRES AND PREPARING FOR DATA ENTRY

OVERVIEW

Introduction

Editing and cleaning the questionnaires should be done while still in the selected sampling area and once done indicates the questionnaire results are ready for entry into the data entry programme. When an interview is completed and questionnaires are transferred from an interviewer to a field editor/supervisor, the editing process begins. The guidelines provided in this part are to assist with quality control measures.

Aim

The aim is to have clear, codeable responses to be able to record for in the data entry software for every question.

Intended audience

This part is intended for those fulfilling the following roles:

- Interviewer
- Field Editor
- Supervisor
- Principal Investigator
- Data Editor
- Data Entry Clerk
- WHO (Geneva) MDS Team.

In this part

This part covers the following topics regarding editing the questionnaires.

Topic	See Page
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CORE ROLES AND RESPONSIBILITIES	
	133
GENERAL GUIDELINES	
	134
EDITING AND QUALITY ASSURANCE	
DATA CODING FOR OPEN ENDED QUESTIONS	134

CORE ROLES AND RESPONSIBILITIES

Introduction

In addition to the general roles and responsibilities identified in Part 2, this module identifies the specific roles and responsibilities for editing the completed questionnaire data and preparing it for data entry.

Summary of responsibilities

The table below provides a summary of each of the core roles and their responsibilities.

Role	Responsibility
Interviewer	Check each completed questionnaire after each interview. Keep track of non-response households.
Field Editor	Editing and preparing questionnaires for data entry by reviewing each questionnaire for accuracy and completeness. Any notes about data quality or editing can be made on the questionnaire in an agreed ink colour.
Supervisor	 Completing retest questionnaires for 10% of the sample and general quality control. Following-up all proxy respondent questionnaires to ensure proxy interviews were warranted. Revisiting 5% of completed Individual questionnaire respondents, and completing a proxy respondent questionnaire for validation.
Principle Investigator	Monitoring completed questionnaires and general quality control. Monitoring completed questionnaires for quality control. Arranging data transfer to WHO on bi-monthly basis.
Data Editor	Verifying codeable data.Identifying missing data patterns and inconsistencies.

Role	Responsibility
Data Entry Clerk	 Entering data into the data processing software. Logging and seeking resolution to data quality issues (from Data Editor, Supervisor, Principal Investigator etc. as appropriate). Data Entry Clerk should alert data editor, data manager, supervisor or primary investigator of any data quality issues or problems identified during data entry. Providing assistance and support for errors and complications.
WHO Geneva	For technical support, the Principal Investigators can forward details of all errors and complications requiring resolution to the WHO MDS Team.

GENERAL GUIDELINES

Introduction

When an interview is completed and all questionnaires are transferred from an interviewer to a field editor/supervisor, the editing process begins. The guidelines are provided to assist with quality control measures.

The guidelines are divided into two sets of instructions. The first set describes the general rules and steps for editing which should be applied throughout the instruments, and the second set is an edit checklist which instructs the editor to look at specific items in the MDS instruments for accuracy. Editing and cleaning the questionnaires should be done while still in the selected sampling area to help obtain the highest quality results possible.

GENERAL EDITING STEPS

Guidelines

Listed below are some general guidelines and mark up conventions that should be observed while editing the questionnaires. Full details on the questionnaire conventions and how to record information are provided in Part 3, Interviewer's Guide.

Topic	Guidelines
Erasing information	Never erase any information written into the questionnaire by interviewers, respondents, editors, or anyone else. The notes in the questionnaire provide documentation of the interaction and they are critical to maintaining the integrity of the data. The only exception to this is removing respondent or respondent family names, addresses, telephone numbers, or other identifying information. Use a heavy marker to black out this information.
Disregarding a response	A single line through a circled response category or written response is the preferred way to indicate an editing decision to disregard a response. It should always include a note, "Do not enter," or "Do not code," etc. The correct response should then be indicated (circled or written).
Marking up in colours	The Field Editor should use a different colour pen than the Interviewer and the Supervisor. This way it will be apparent by the colour of the pen used whether a comment came from an Interviewer, Supervisor, or Editor.
Underlining	Underlining is the preferred way to indicate important text or editing decisions made in the questionnaire. Further emphasis can be made by writing in "Enter this," or "Code this," etc., and drawing an arrow to the text.
Missing responses	When an individual response that should have been recorded does not appear in the questionnaire, record '9', '99', '999' as is appropriate to the width of the field. This applies to other items which should have been asked, but that are missing for no apparent reason. Refusal to answer is recorded as '97'. Not applicable is recorded as '98'.
Don't Know	If the final response to an individual question is "Don't Know", record -8, 8, 88, etc. to fit the width of the field, rather than leaving the question blank (indicates missing).
Numbers	Check all number boxes are filled from the right side. For example, the number '50' would be entered as the following: [
	dates and time - confirm that each digit is included and makes sense (for

Topic	Guidelines
	example, age not greater than 120 years, dates are within timeframe and are in the format dd/mm/yyyy, times are sequential and increasing over the course of the questionnaire).
Open ended	Ensure written responses to all open-ended questions and "Other, specify"
questions	categories are legible.
Codes	Response categories for some questions in the MDS questionnaires appear very close together. Be sure that one code is clearly marked as the response (unless the question is designed to accept multiple responses).
Skip	Verify that all skip patterns were followed accurately - responses to questions
instructions	asked in error should be crossed out (crossed out), and noted "do not enter."
	Missing data should be assigned the appropriate codes.
Corrections	Corrections to interviews need to be done in the field
Problems	Problem questionnaires should be set aside for review with a Supervisor, Data
Corrections	Missing data should be assigned the appropriate codes. Corrections to interviews need to be done in the field

Edit log

Keep track of completed questionnaires in a separate log. This log will be useful for monitoring the status of interviews, and planning workloads. The log should be kept in a location near the questionnaires so that anyone with a question can check the log. This is especially important if more than one person is examining the questionnaires at the same time.

The log should include:

- · household ID
- date edited
- · editor's name
- · date delivered to data entry
- any special notes about the case.

EDITING AND QUALITY ASSURANCE

Introduction Editing and quality assuran

Editing and quality assurance is to be carried out for every completed survey questionnaire.

Procedure

Follow the steps below to check, edit and quality assure each completed questionnaire.

Step	Action
1	Read the Interviewer Observation modules (H9000 and I9000). These observations will hopefully provide context for the interview interaction and will alert you to circumstances helpful in identifying problems.
2	Check non-response for selected households - and check Module H0200 for call record and result code. Check to see if the interviewer was able to complete at least the Household Roster (Module H1000). Whatever the outcome of the non-response, clearly document reasons for non-response and other details about the dwelling and location (Modules H0100 and H0200).
3	Check time begin and time end for each module. Time should be legible, completed and sequential.
4	Make sure that I1001 for each individual questionnaire matches the Household member number for that individual, from H1006.
5	Review for missing data as soon as they are received from the field. Check each question, which includes verifying skip patterns for accuracy. Those that have large blank modules that should have been filled in, botched skip patterns or other problems the Field Editor cannot resolve should be noted as early possible in the event that a household needs to be revisited to complete the questionnaire.

DATA CODING FOR OPEN ENDED QUESTIONS

Introduction

For open ended questions the interviewer records verbatim the response provided by the respondent. These responses are not pre-coded. In order to make these data usable and accessible to the research team, these text responses need to be coded – whenever possible – to a set of standard numeric code values.

Categories of

There are generally the following three basic categories of open ended question:

open ended question

- pre-coded lists where international standard classifications apply
- pre-coded lists with an "other, specify" category
- truly open ended questions.

Required skills

It is recommended that each research team train and utilize a core staff of coders, who can become very familiar with the code frames and with the question objectives. Some specific items require review by the Principal Investigator, and others can be handled by the data entry staff.

Standard classifications

For some pre-coded lists, there are international standard classifications that can be used.

Procedure

Follow the steps below to process, code and check the open ended data.

Step	Action
1	Review all open-ended responses and where "other, specify" responses have been recorded
	verbatim, code back into the pre-coded categories.
2	Review the residual open-ended responses with the coding supervisor and the Principal
	Investigator to determine whether any additional structured response codes can be created
	that accurately describe the content of the open-ended responses.
3	Once new structured categories have been created, code the data to these categories and
	key into the data file.
4	Prepare a memo describing the new codes for all open-ended variables.
5	Data Supervisor/Manager reviews ALL coding work by checking 10% and provides feedback
	on performance to the data entry team.

PART 8: FORMS AND REFERENCE MATERIAL

OVERVIEW

Introduction The forms provided in this Part are to assist interviewers with their interviews.

SHOWCARDS

For a full set of all the MDS SHOWCARDS to be used during the interviews, please refer to the separate MDS SHOWCARDS document.

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In this part

This part includes the forms and materials listed in the table below. For the SHOWCARDS, refer to MDS SHOWCARDS document.

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RESPONDENT INFORMATION FORM	
CONSENT FORM	138

NOTIFICATION OF WHO MDS STUDY VISIT



World Health Organization Notification	on of WHO MDS Study Vis	
Today, interviewers and other survey staff from [enter INSTITUTION NAME HERE] visited your household to conduct a survey of adult members of your		
dwelling on issues related to health and well-being. We will try to return on the		
date indicated below. If this is not convenient, please contact us to make a		
suitable time for the survey.		
Date of Visit		
Household Number		
Next Visit	Day/Date:	Time:
Contact		
<site> Ministry of Health, <address></address></site>		

	World Organ	Health
AL CONTRACTOR OF THE PROPERTY	Organ	IZation

World Health Organization Notificati	on of WHO MDS Study Vi	sit	
Today Ministry of Health employees visited your household to conduct a survey			
of people aged 18 years and older on health issues. We will try to return on the			
date indicated below. If this is not convenient, please contact us to make a			
suitable time for the survey.			
Date of Visit			
Household Number			
Next Visit	Day/Date:	Time:	
Contact			
<site> Ministry of Health, <address></address></site>			

RESPONDENT INFORMATION FORM

Introduction This form describes what participation in the WHO MDS survey means. Title of survey

The title of this survey is Model Disability Survey (MDS).

Aim of theThe aim of the survey is to measure and be able to compare, health and well-

survey

being among people in populations around the world.

Data collection methods

We will visit individual households and use a questionnaire to collect information from **[insert sample size]** participants throughout the area in which the survey is being conducted.

What's involved

The table below shows each of the steps involved. You will be given time to consider your participation.

Step	Action
1	We will describe the MDS study approach to you.
2	You may ask any questions you may have.
3	We will ask you to sign a consent form.
4	You will be asked to respond to questions about your health and well-
	being.

Timeframe

It is estimated that Step 1 to 4 of the survey will take approximately $1 \frac{1}{2}$ hour.

Community benefits

The results of this study will be used to assist the Ministry of Health in developing public health programmes that target efforts to increase health and well-being.

Your rights

It is your right to:

- decline to take part in the study,
- withdraw your consent at any time, and
- decline to answer any questions in the interview that you do not wish to answer.

Confidentiality

You will provide your name and contact information so that you can be contacted if there is any need to follow up with you after the survey is conducted.

Your participation and data provided will be completely confidential.

Your name will not be used in any report of the study.

Results

The results of this survey will be used to help plan strategies in improving health and well-being in your community.

The results will be published in research publications, media briefings, fact sheets, and reports and can be made available to you through the local researchers.

Ethical approval

This study has received ethical approval from the Research Ethics Review Committee of [insert name of institution and of location].

CONSENT FORM

Dear Participant,

Random selection

You have been randomly selected to be part of this survey and this is why we would like to interview you. This survey is conducted by the World Health Organization in collaboration with the [Ministry of Health] and the [WHO Regional Office] and will be carried out by professional interviewers from **[name of institution]**. This survey is currently taking place in several countries around the world.

Confidentiality

The information you provide is totally <u>confidential</u> and will not be disclosed to anyone. It will only be used for research purposes. Your name, address, and other personal information will be removed from the instrument, and only a code will be used to connect your name and your answers, without identifying you. You may be contacted by the survey team again only if it is necessary to complete the information on the survey.

Voluntary participation

Your participation is <u>voluntary</u> and you can withdraw from the survey after having agreed to participate. You are free to refuse to answer any question that is asked in the questionnaire. If you have any questions about this survey you may ask me or contact [name of institution and contact details] or [Principal Investigator at site].

Consent to participate

Signing this consent indicates that you understand what will be expected of you and are willing to participate in this survey.

Read by Participant	Interviewer	
Agreed	Refused	

Signatures

I hereby provide INFORMED CONSENT to take part in the Model Disability Survey (MDS).

Name:	Sign:
Parent/Guardian:	Sign:
Witness:	Sign:

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