

ACTIVITIES OF DAILY LIFE

This form is to be administered at Baseline Visit 2 and all annual visits. If necessary, information may be obtained from a person who is knowledgeable about the participant's daily life.

1. SHEP ID: (3) 22 23 - (4) 24 25 26 27 - 28 29 (5) 2. Acrostic: 41 42 43 44 45 46 (6)
3. Date: 36 37 38 39 34 35 (7) 4. a. Visit: 1 [ ] Baseline Visit 2 47 (8) 2 [ ] Annual -> b. Which? 48 (9)

"The next set of questions is about everyday activities." (Give response card #1 to participant.)

(Interviewer: Record any help as help. Repeat lead and response categories as necessary.)

"At the present time, do you need help from another person or from special equipment for . . . "

5a. Walking across a small room? Go to 5c < No help (10) [ ] 1
Go to 5b < Help [ ] 2
Go to 6 < Unable to do [ ] 3
Go to 5c < Refused [ ] 7
DK [ ] 8

b. Is this help from a person, from special equipment or both? Person only [ ] 1
Equipment only [ ] 2
Both [ ] 3
Refused (11) [ ] 7
DK [ ] 8
50

c. How much difficulty, on the average, do you have doing this? Would you say that you have . . . (say the responses) No difficulty at all [ ] 1
A little difficulty [ ] 2
Some difficulty (12) [ ] 3
A lot of difficulty [ ] 4
Refused 51 [ ] 7
DK [ ] 8

6a. Do you need help from another person or from special equipment for bathing-- either a sponge bath, tub bath, or shower? Go to 6c < No help (13) [ ] 1
Go to 6b < Help [ ] 2
Go to 7 < Unable to do [ ] 3
Go to 6c < Refused [ ] 7
DK [ ] 8
52

b. Is this help from a person, from special equipment, or both? Person only [ ] 1
Equipment only [ ] 2
Both [ ] 3
Refused (14) [ ] 7
DK [ ] 8
53

c. How much difficulty, on the average, do you have doing this? Would you say that you have . . . (say the responses) No difficulty at all [ ] 1
A little difficulty [ ] 2
Some difficulty (15) [ ] 3
A lot of difficulty [ ] 4
Refused 54 [ ] 7
DK [ ] 8

7a. Do you need help for personal grooming, like brushing hair, brushing teeth, or washing face?

Go to 7c ← No help  1  
 Go to 7b ← Help  2  
 Go to 8 ← Unable to do  3  
 Go to 7c ←  Refused  7  
 DK  8

55

b. Is this help from a person, from special equipment, or both?

Person only  1  
 Equipment only  2  
 Both  3  
 Refused  7  
 DK  8

c. How much difficulty, on the average, do you have doing this? Would you say that you have . . . (say the responses)

No difficulty at all  1  
 A little difficulty  2  
 Some difficulty  3  
 A lot of difficulty  4  
 Refused  7  
 DK  8

18

57

8a. Do you need help for dressing, like putting on a shirt, buttoning and zipping, or putting on shoes?

Go to 8c ← No help  1  
 Go to 8b ← Help  2  
 Go to 9 ← Unable to do  3  
 Go to 8c ←  Refused  7  
 DK  8

58

19

b. Is this help from a person, from special equipment or both?

Person only  1  
 Equipment only  2  
 Both  3  
 Refused  7  
 DK  8

59

c. How much difficulty, on the average do you have doing this? Would you say that you have . . . (say the responses)

No difficulty at all  1  
 A little difficulty  2  
 Some difficulty  3  
 A lot of difficulty  4  
 Refused  7  
 DK  8

21

60

9a. Do you need help for eating, like holding a fork, cutting food, or drinking from a glass?

Go to 9c ← No help  1  
 Go to 9b ← Help  2  
 Go to 10 ← Unable to do  3  
 Go to 9c ←  Refused  7  
 DK  8

61

22

b. Is this help from a person, from special equipment or both?

Person only  1  
 Equipment only  2  
 Both  3  
 Refused  7  
 DK  8

62

c. How much difficulty, on the average, do you have doing this? Would you say that you have . . . (say the responses)

No difficulty at all  1  
 A little difficulty  2  
 Some difficulty  3  
 A lot of difficulty  4  
 Refused  7  
 DK  8

24

63

10a. Do you need help getting from a bed to a chair?

Go to 10c ← No help □ 1  
Go to 10b ← Help □ 2  
Go to 11 ← Unable to do □ 3  
Go to 10c ←  Refused (25) □ 7  
 DK □ 8  
64

b. Is this help from a person, from special equipment or both?

Person only □ 1  
Equipment only □ 2  
Both □ 3  
Refused (26) □ 7  
DK □ 8  
65

c. How much difficulty, on the average, do you have doing this? Would you say that you have . . . (say the responses)

No difficulty at all □ 1  
A little difficulty □ 2  
Some difficulty (27) □ 3  
A lot of difficulty □ 4  
Refused □ 7  
DK □ 8  
66

11a. Do you need help using the toilet?

Go to 11c ← No help □ 1  
Go to 11b ← Help □ 2  
Go to 12 ← Unable to do □ 3  
Go to 11c ←  Refused (28) □ 7  
 DK □ 8  
67

b. Is this help from a person, from special equipment or both?

Person only □ 1  
Equipment only □ 2  
Both □ 3  
Refused (29) □ 7  
DK □ 8  
68

c. How much difficulty, on the average, do you have doing this? Would you say that you have . . . (say the responses)

No difficulty at all □ 1  
A little difficulty □ 2  
Some difficulty □ 3  
A lot of difficulty (30) □ 4  
Refused □ 7  
DK □ 8  
69

12. Are you able to do heavy work around the house, like washing windows, walls or floors without help?  
(PROBE: Could you do it if you needed to?)

Yes 70 □ 1  
No (31) □ 2  
Refused □ 7  
DK, Unsure □ 8

13. Are you able to walk up and down stairs to the second floor without help?  
(PROBE: Could you do it if you needed to?)

Yes 71 □ 1  
No (32) □ 2  
Refused □ 7  
DK, Unsure □ 8

14. Are you able to walk half a mile without help? That's about eight ordinary blocks.  
(PROBE: Could you do it if you needed to?)

Yes 72 □ 1  
No (33) □ 2  
Refused □ 7  
DK, Unsure □ 8

(Interviewer: Give response card #2 to participant.)

"Now I'm going to ask you about how difficult it is, on the average, for you to do certain kinds of activities."

- |  |  |   |
|--|--|---|
| 15. To begin, how much difficulty, if any, do you have pulling or pushing large objects like a living room chair? Would you say you have . . . | No difficulty at all<br>A little difficulty<br>Some difficulty<br>A lot of difficulty<br>Just unable to do it<br>Refused<br>DK | <input type="checkbox"/> 1<br><input type="checkbox"/> 2<br><input checked="" type="checkbox"/> 3<br><input type="checkbox"/> 4<br><input type="checkbox"/> 5<br><input type="checkbox"/> 7<br><input type="checkbox"/> 8 |
| 16. What about stooping, crouching, or kneeling? Do you have . . .   | No difficulty at all<br>A little difficulty<br>Some difficulty<br>A lot of difficulty<br>Just unable to do it<br>Refused<br>DK | <input type="checkbox"/> 1<br><input type="checkbox"/> 2<br><input type="checkbox"/> 3<br><input checked="" type="checkbox"/> 4<br><input type="checkbox"/> 5<br><input type="checkbox"/> 7<br><input type="checkbox"/> 8 |
| 17. Lifting or carrying weights under 10 pounds, like a bag of potatoes? Do you have . . .   | No difficulty at all<br>A little difficulty<br>Some difficulty<br>A lot of difficulty<br>Just unable to do it<br>Refused<br>DK | <input type="checkbox"/> 1<br><input type="checkbox"/> 2<br><input type="checkbox"/> 3<br><input checked="" type="checkbox"/> 4<br><input type="checkbox"/> 5<br><input type="checkbox"/> 7<br><input type="checkbox"/> 8 |
| 18. Reaching or extending arms above shoulder level? Do you have . . .   | No difficulty at all<br>A little difficulty<br>Some difficulty<br>A lot of difficulty<br>Just unable to do it<br>Refused<br>DK | <input type="checkbox"/> 1<br><input type="checkbox"/> 2<br><input type="checkbox"/> 3<br><input checked="" type="checkbox"/> 4<br><input type="checkbox"/> 5<br><input type="checkbox"/> 7<br><input type="checkbox"/> 8 |
| 19. Either writing or handling small objects? Do you have . . .  | No difficulty at all<br>A little difficulty<br>Some difficulty<br>A lot of difficulty<br>Just unable to do it<br>Refused<br>DK | <input type="checkbox"/> 1<br><input type="checkbox"/> 2<br><input type="checkbox"/> 3<br><input checked="" type="checkbox"/> 4<br><input type="checkbox"/> 5<br><input type="checkbox"/> 7<br><input type="checkbox"/> 8 |

Questions 20-23 for interviewer only.

20. Were all items in the Activities of Daily Life Questionnaire read, or was the questionnaire not completed? All questions read 78  1  
Not completed, at participant's request (39)  2  
Not completed, at interviewer's initiative  3
21. From whom were responses obtained? Participant entirely  1  
Participant mostly  2  
Participant and proxy about equally (40)  3  
Proxy mostly  4  
Proxy entirely 79  5
22. How would you rate the overall validity of the responses that were obtained? Very good  1  
Good (41)  2  
Fair  3  
Poor 80  4  
Very poor  5
- 23a. Did anything in particular contribute to non-completion or adversely effect the overall quality of the interview? Go to 23b < 81 Yes  1  
Go to END < (42) No  2
- b. Hearing problem? 82 (43) Yes  1 No  2
  - c. Language difficulty? 83 (44) Yes  1 No  2
  - d. Mental confusion? 84 (45) Yes  1 No  2
  - e. Hostile attitude? 85 (46) Yes  1 No  2
  - f. Lack of interest? 86 (47) Yes  1 No  2
  - g. Fatigue? 87 (48) Yes  1 No  2
  - h. Participant's proxy? 88 (49) Yes  1 No  2
  - i. Noise, interruptions? 89 (50) Yes  1 No  2
  - j. Time pressure? 90 (51) Yes  1 No  2
  - k. Other? (Specify: \_\_\_\_\_) 91 (52) Yes  1 No  2

END

Finish conversations that may have been side-tracked earlier in the interview. Thank the participant for his or her cooperation.

94 (54) RECORD TYPE 101-103 (56) UPDATE NUMBER 110  
 DATE RECEIVED (55) DATE LAST PROCESSED (57) 104-109 PAPER COPY (59) (53)

24. Interviewer: \_\_\_\_\_

(514) BATCH DATE (516) TIME MODIFIED 111 Code 92/93  
 (515) DATE MODIFIED (517) EDIT STATUS (59) Cross-Forms Edit Status SH33/5