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BUREAU RÉGIONAL DE L'EUROPE

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ЕВРОПЕЙСКОЕ РЕГИОНАЛЬНОЕ БЮРО

INDEXES

Comparative Epidemiology Meeting of Investigators:
Ad Hoc Study on Health Care of the Elderly

Kiev, 22-25 November 1977

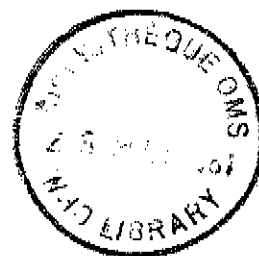
Meeting of Steering Group for the Ad Hoc Study
on Health Care of the Elderly

Copenhagen, 21-22 February 1978

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COMBINED REPORT ON THE COMPARATIVE EPIDEMIOLOGY MEETING OF INVESTIGATORS AND
THE MEETING OF THE STEERING GROUP FOR THE AD HOC STUDY ON HEALTH CARE OF THE ELDERLY



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COMBINED REPORT

Pursuant to resolution EUR/RC25/R3 of the twenty-fifth session of the WHO Regional Committee for Europe, which requested the Regional Director "to initiate and coordinate studies on the specific morbidity and mortality of the elderly, paying particular attention to the socioeconomic, cultural and environmental factors which may be associated with diseases of this age-group", the Regional Office has initiated an Ad hoc Study on Health Care of the Elderly.

The first meeting on this subject was held in Copenhagen in December 1976. The available literature on epidemiological surveys relating to the elderly was reviewed and a study protocol drafted. The protocol was circulated to the governments of a number of Member States of the WHO European Region, together with an invitation to participate in the ad hoc study.

The governments of the Member States which decided to join the study nominated principal investigators responsible for conducting the study in their countries. These investigators met in Kiev from 22 to 25 November 1977. (A list of participants is given in Annex I.) The objectives of the meeting were to review and adopt the study protocol and questionnaire, to discuss and approve the scope and methods of standardizing national studies and, finally, to develop a plan of action for the study.

During the discussions, suggestions for revising the protocol and questionnaire were made. It was recommended that the final drafts should be drawn up by a small steering group.

The meeting of the steering group was convened in Copenhagen from 21 to 22 February 1978. (A list of participants is given in Annex I.) The group redrafted the study protocol (Annex II) and the questionnaire (Annex III) according to the suggestions made at the meeting in Kiev and the written comments received from Belgium, Finland, Norway, Poland and the USSR.

The group reconfirmed the recommendation of the Meeting of Investigators that pilot studies should be undertaken, at least in some of the participating countries, in order to test the protocol and questionnaire.

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COMPARATIVE EPIDEMIOLOGY MEETING OF INVESTIGATORS:
AD HOC STUDY ON HEALTH CARE OF THE ELDERLY

LIST OF PARTICIPANTS

TEMPORARY ADVISERS

- Dr B.O. Adebajo
Federal Ministry of Health, Lagos, Nigeria
- Professor M.F. Antonini
Director, Institute of Geriatrics and Gerontology, University of Florence, Florence, Italy
- Professor Monique Asiel¹
School of Public Health, Free University of Brussels, Brussels, Belgium
- Professor F. Baro¹
Director, "Sint Kamillus" Psychiatric Institute, Broeders van Liefde, Bierbeek, Belgium
- Professor D.F. Chebotarev
Director, Institute of Gerontology, Kiev, USSR
- Dr V. Gaustad¹
Head Physician, Oslo Helseråd, Oslo, Norway
- Dr E. Heikkinen
Professor of Gerontology, Department of Public Health, University of Tampere, Tampere, Finland
- Dr Dj. Kozarević
Director, Institute of Chronic Diseases and Gerontology, Belgrade, Yugoslavia
- Professor W. Pedich
Head, Department of Gerontology, Medical Academy, Bialystok, Poland
- Dr J. Schouten¹
Head, Geriatrics Department, Slotervaart Hospital, Slotervaartziekenhuis, Amsterdam, Netherlands
- Dr F. Valdorf-Hansen
Old Peoples Town, Geriatric Unit, Copenhagen, Denmark
- Dr G. Vig
Chief Medical Officer, Department of Social Affairs, Province of Hedmark, Hamar, Norway
- Professor W.E. Waters
Department of Community Medicine, University of Southampton, Southampton, United Kingdom

WORLD HEALTH ORGANIZATION

Regional Office for Europe

- Dr Z. Brzezinski (Secretary)
Regional Officer for Epidemiology
- Dr R. Glyn Thomas
Regional Officer for the Development of Community Services

Headquarters

- Dr K. Kupka
Chief, International Classification of Diseases

¹Participation expenses not paid by WHO

Annex I

MEETING OF STEERING GROUP FOR THE AD HOC STUDY
ON HEALTH CARE OF THE ELDERLY

LIST OF PARTICIPANTS

TEMPORARY ADVISERS

Professor Monique Asiel

School of Public Health, Free University of Brussels, Brussels, Belgium

Dr E. Heikkinen

Professor of Gerontology, Department of Public Health, University of Tampere, Tampere, Finland

Professor W.E. Waters

Department of Community Medicine, University of Southampton, Southampton, United Kingdom

WORLD HEALTH ORGANIZATION

Regional Office for Europe

Dr Z. Brzezinski (Secretary)

Regional Officer for Epidemiology

Dr R. Glyn Thomas

Regional Officer for Development of Community Services

PROTOCOL OF THE AD HOC STUDY ON HEALTH CARE OF THE ELDERLY

1. Aim of the ad hoc study

The aim of the study is, in several different countries, to produce a standardized collection of data, which are at present unavailable, on the health of the elderly and on their use of the health services. It is recognized that the use of these services depends not only on the level of health but also on the available social support. Therefore an inquiry on both health and social support will be required. Much of the information, at present available, arbitrarily groups together all those over a particular age, usually the retiring age. However, present evidence suggests that the elderly are far from being a homogeneous group and that the use of health services varies greatly with age, even within the elderly group. Age changes cause changes in morbidity. There may be different rates of aging in different countries and health expectations may also vary from country to country, reflecting on the use of health services. The rate of aging may also vary over time with changes in economic and other factors. The present study will give baseline data for comparison with future studies (cohort effect). Demographic projections in several countries suggest that the age-structure of this group will change appreciably during the next decade or so, and that an increasing proportion of the elderly will consist of the very old. The proposed study will collect information on the implications for health services of these predicted demographic changes.

In addition to providing the information needed to plan health services for the elderly in future years, the study may also generate hypotheses about the need for health services, the levels of health and the process of aging in different countries. This may form a basis for research studies on intervention aimed at the prevention of premature disability.

2. Methodology of the study

2.1 Introduction

It is proposed to conduct a basic cross-sectional comparative study in a number of participating countries. The present protocol outlines the method to be used in the study, and the type of information that will be collected. It is suggested that some countries may wish to extend this basic study and could include larger numbers, survey additional age-groups, collect further data or make additional measurements that would be useful in their particular country. Such extensions to the basic study are encouraged and some are mentioned below. However, decisions on their extent and ways of coordinating them should be made by each country.

The basic study will use a similar methodology in all the participating countries. It will consist of a package of questions and interviewer evaluations that have, wherever possible, been tested in other studies - studies for the most part conducted on elderly populations. To facilitate the coordination of data collection and to speed data handling and analysis a pre-coded questionnaire will be used. Translation from English into the language of each area will be the responsibility of the participating country. It is suggested that epidemiologists, as well as translators, should be involved in this task and that the appropriateness of the translation should be checked by having the document retranslated into English and then comparing it again with the original English version.

Although the comparative study is cross-sectional, it is hoped that some countries will be able to follow-up the samples, at least in some age-groups, and thus obtain the advantages of additional information available only in a longitudinal study.

2.2 The sample

2.2.1 Age range to be studied, sample size and method of sampling

There is no agreed definition of an elderly person: the usual retiring age varies from country to country. The sample should be selected from those aged 60, 65, 70, 75 and 80 years. In addition, some countries may wish to include 55-year-olds or more elderly groups, such as those aged 85 and 90 years. With the older groups it may only be possible to study women, because of the fewer men surviving to such ages. A factor limiting sample size is cost and, in order to obtain reliable estimates for most of the data to be collected, there should be a minimum of 100

Annex II

individuals of each sex in each age-group. A systematic sampling method should be used within each age/sex group with a different sampling ratio in each such group. This would give a minimum of 1000 persons (but see section 2.3 below). Some countries may wish to include ages immediately before and after retirement in order to examine the effect of retirement on the use of health services. Some countries may also wish to include larger numbers in at least some of the age-groups. In order to get appreciably more accurate estimates, however, the sample size should be increased by a whole order of magnitude (perhaps to about 500-1000 individuals). Each subgroup will include a sample of individuals born in a specified calendar year to provide the above-mentioned age cohorts. For this reason the coordination of the timing of the survey in the various countries is important in order to give samples of similar age. Substitution for individuals not available, or refusing cooperation, was considered by the group of investigators. It was agreed that this would make the survey more expensive. Moreover, the substitutions might not be similar to the non-respondents in the original sample. This problem is best tackled by a pilot study of the sampling frame and increasing the number in the subsample (say to 120 or 130) if this is found to be necessary to make up the final number of respondents in each subgroup to approximately 100. Much depends on the age and accuracy of the sampling frame and the mobility of the population in the survey area. If some countries should wish to use substitution it is important that the data for the original sample (i.e. excluding substitutes) should be available for comparison with other countries. An important priority in every country is a high response rate for the study. It was, however, agreed to get as much information as possible about the non-respondents, including, wherever possible, the reason(s) for non-response in each case.

2.2.2 Sampling base

The base to be used will have to vary depending on the sources available. The most appropriate base would be current national personal registers giving ages or some other form of comprehensive register that could be used as a sampling frame. Electoral lists may not provide ages and may exclude the mentally ill. A special listing of the elderly in a given community may be useful, but may prove expensive for the size of population required. It is most important that a representative sample of individuals be obtained. Great care should be taken not to omit those elderly who are in any institutions of any sort or who are mentally retarded, physically handicapped, mentally ill or in other similar groups. For this, a separate sample or check of these groups in and near the study areas may be needed. To help ensure comparability it is suggested that each country send details of their sampling intentions for consideration by a steering group at the WHO Regional Office, Copenhagen, in the spring of 1978.

2.3 Geographical area of study

There are important urban/rural differences in morbidity and mortality, which vary in extent from country to country. It is desirable for each participating country to select a fairly representative area for the study. The population of the study area should have a socioeconomic structure similar to that of the country as a whole, although this may not be practical in each country. Both urban and rural areas (and possibly suburban areas as well) should be included if possible. Each country should aim to sample urban and rural areas in approximately the ratio in which they occur in the country as a whole. In practice, some of these suggestions may be difficult to adopt. If it is possible to conduct the survey, for example, only in an urban area, this should not eliminate that area from the cooperative study. Indeed, the comparison of areas from large cities may be the most meaningful and it is important that each country include such an area in its study area. In any case, each country should describe the characteristics of the study area (density of population, centres of population and occupational pattern).

The geographical area may have to be fairly large in order to include enough of the population, especially if the older age-groups are included. For example, in some European countries, to obtain a sample of 100 90-year-old men (with a sampling ratio of 1:1) it would be necessary to use a population of half-a-million as a sampling base. Lower numbers than 100 in the optional older age-groups (85 and 90) would, however, be acceptable, as the use of health services at these ages will be more extensive and reliable estimates will hence be possible with a smaller sample size. As far as is practical, the geographical area should be so defined as to include the number of various institutions (for the mentally retarded, physically handicapped and mentally ill, etc.) typical of the country as a whole.

2.4 Timing of survey and pre-survey plans

To standardize for seasonal variations in replies to the questions it is hoped that the surveys can be conducted between January and May 1979. Any additional questions should be sent to the WHO Regional Office for Europe, Copenhagen, by December 1977. A revised questionnaire should be available by the end of March 1978. Definite decisions from each country to participate in the study are required by the spring of 1978. A pilot study, in at least one country, is desirable and proposals should be sent to the WHO Regional Office by the end of April 1978. The pilot study should include 10%-20% of the target population and the results should be available by the end of September 1978. A meeting of investigators can then be held in November 1978 and a final protocol prepared.

2.5 Method of data collection

2.5.1 Interviewers

Data will be obtained by a trained interviewer visiting the sample population, if possible in their homes. The forms will be pre-coded in order to obtain a high response rate and the interview will be kept simple. All interviewers will have a training period of at least two weeks (but often longer) which should be at an institute with experience in conducting community surveys. Training the interviewers is the responsibility of each country. It was agreed that each country should try and include a social scientist with experience of such surveys on their own coordinating committees. It was agreed that the interviewers should, if possible, be female, of similar age and background. Retired nurses were suggested, but some countries may have to use medical students or other groups, though this will not prevent their participation in the study. Countries may wish to send a letter to the probands to arrive shortly before the interview date. This should give the name of the interviewer, the research unit conducting the study and mention that it is part of an international survey. Before the survey, police and other authorities and, if desirable, the medical profession should be notified. A standard introduction by the interviewer will reduce the possibilities of bias. The interviewer should introduce herself, mention the research unit conducting the study, refer to the initial letter to the proband and ask to come in to discuss the survey with the proband. The fact should be stressed that all the information is for research purposes and confidential, and that individuals will not be identified. It should be mentioned that the survey is part of an international study of the elderly and that some questions may not be relevant to certain individuals in the study. Individuals should not be offended or distressed by any of the questions as many may apply only to other people, but it is necessary to ask them in all cases. The cooperation of the proband is then invited. At the end of the interview the interviewer should thank the proband for his or her help. Any action that may be required as a result of the visit, such as referral to a doctor or social services, will be with the proband's permission and such action will have been considered by each country before the survey starts.

After training, each interviewer will be familiar with the questionnaire and evaluations. Some monitoring of observer variation (both intra- and inter-observer variation) is desirable in each country.

2.5.2 Proxy interviews

When the interviewer finds it impossible, or not meaningful, to interview the proband, every effort should be made to interview a relative, or neighbour, who plays the major part in looking after the proband. This person is likely to know most of the information that the study seeks. One important factor calling for a proxy interview is the proband's memory. Initial questions in the interview will test this and, if it does not reach a required standard, the interview with the proband will be abandoned and a proxy interview substituted. In each case, the reason for the proxy interview will be recorded. A separate analysis of such interviews will be possible. If the subject is in hospital or some other institution, the interviewers should wait and see if they are likely to return home during the survey period. If not, they should be interviewed in the hospital or institution. For those in institutions some questions will have to be omitted, others added and a classification of institutions will be required.

Annex II

2.5.3 Response rate

A high response rate is particularly important in a survey of this type. In many epidemiological surveys the response rate decreases in the elderly. Contacting professional health workers and informing them of the study may, in some countries, help to increase the response rate. If possible some description of the individuals not seen in the survey is highly desirable. One method of obtaining this information may be by contacting the health workers.

2.6 Information required

The pre-coded questionnaire will seek information on:

- (1) Basic data: age, sex, marital state and history, length of residence at present address and whether urban or rural.
- (2) Simple questions to test memory; these are questions already tested among the elderly and selected so that they are unlikely to cause any offence.
- (3) Data on dwelling: number of persons; relationship, age and sex
number of rooms
stairs/lift
bathing facilities and details of toilet and cooking facilities
time needed to get to shops
impression gained by the interviewer of the standard of heating,
lighting and general accommodation. (Being subjective, this
information will be useful only for rough comparison within each
country).
- (4) Main, and present, occupations and some details of education. It is not thought possible to obtain details of income or expenditure in this study, but information on the use of cars and other household apparatus will be sought.
- (5) Details of support from: relatives, neighbours, community services.
- (6) Utilization of health services. Data on the following will be obtained either as regards frequency of utilization over the previous few weeks to one year (depending on whether the contacts are likely to be remembered) or as the date of last contact:
 - (a) medical practitioner: home
clinic/surgery
telephone
 - (b) nurse: home
clinic/surgery
telephone
 - (c) physiotherapy/occupational therapy
 - (d) hospital outpatient
 - (e) hospital or other institution as inpatient: hospital for acute conditions
psychiatric hospital
long-stay hospital
nursing home
other
 - (f) dentist
 - (g) operations requiring a general anaesthetic. Wherever possible this information should be validated by checking all the information, or a subsample, against hospital records, etc.
- (7) Use of drugs. The number of different drugs taken in the previous week should be recorded. Those prescribed by medical practitioners should be distinguished from those purchased by the individual (these suggestions take a view intermediate between the differing types of advice offered, which varied from asking no questions about drugs to a comprehensive record of drugs with names and dosages).

- (8) Details of other services used: meals on wheels
home help
laundry services
chiroprody services
social workers.
- (9) Physical activities of daily living - dressing, cooking, eating, washing, mobility.
- (10) Health status and questions on symptoms and physical impairment: proband's perception of own health and subjective awareness of disease, injuries and symptoms together with information on physical impairments such as: deafness
foot defects
vision and reading
incontinence (bladder and bowels): nocturia.
- (11) Mental function.
- (12) Proband's attitude to life: loneliness - critical life events.
- (13) Quality of life: economic aspects.
- (14) Living habits - physical activity, smoking.
- (15) Social role.
- (16) Interviewer's evaluation.
- (17) Additional aspects of survey for individual countries: each country should add additional questions according to its own requirements. In general these should be placed at the end of the questionnaire. Some countries may wish to include a physical examination and special investigations, but these are not part of the basic protocol. If physical examinations and special investigations are to be used for international comparisons, standardization of the methods and parameters used by the different countries is necessary.

It is important that the last few questions of the questionnaire should be about pleasant matters to leave the subject in a cheerful mood.

2.7 Analysis and use of the data

The analysis and use of the data is the responsibility of individual countries. Standard forms of analysis for comparison between countries will be prepared and coordinated by WHO in cooperation with the participating countries. This combined analysis will be used for the final report and for the future development of the medium-term global programme on health care of the elderly.

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Annex III

3. Legally, are you never married, married, widowed, divorced or separated? Code: Never married - 1
Married - 2
Widowed - 3
Divorced - 4
Separated - 5
Not answered - 6
4. Which schools did you attend and at what ages? Code: Number
Never - 00
For how many years did you have full-time education?
..... years
5. How about your professional training; did you have: Code: No professional training? - 1
Apprenticeship at work-place? - 2
Full time professional training for less than 2 years? - 3
Full time professional training for 2 years or more? - 4
A university degree or equivalent? - 5
6. What is or was your profession?
7. What is or was your main occupation? (the occupation you had for the longest time)
- What type of work was this?
8. What is your present occupation?
- If retired:
Did you change to some intermediate occupation before retiring? Code: Yes - 1
No - 2
Not relevant - 3
- If not retired:
(a) What is your present work status? Code: Full time employment - 1
Part time employment - 2
Not employed because of ill-health - 3
Not employed because of unemployment - 4
Not employed for other reasons - 5
Homewife only - 6
Not relevant - 7

If part time employment (2)

- | | | | |
|---|-------|------------------------------|------|
| | Code: | Is this more than half-time? | - 1 |
| | | About half-time | - 2 |
| | | Less than half-time? | - 3 |
| | | Not relevant? | - 4 |
| (b) On average, how many hours a day do you have physical exercise at work now? | Code: | None | - 1 |
| | | Less than 1 | - 2 |
| | | 1-2 | - 3 |
| | | 3-4 | - 4 |
| | | 5-8 | - 5 |
| | | 9-14 | - 6 |
| | | More than 14 | - 7 |
| | | Not relevant | - 8 |
| (c) <u>If not in main occupation now:</u>
Did you leave your main occupation (specify) because of: | Code: | Age? | - 1 |
| | | Ill health? | - 2 |
| | | Better occupation? | - 3 |
| | | Redundancy? | - 4 |
| | | Other reasons? | - 5 |
| | | Or were you never employed? | - 6 |
| | | Not relevant | - 7 |
| 9. During your life (if retired say "up to your retirement") for how many years in all were you unemployed? | Code: | Number | |
| | | Not relevant | - 99 |
| 10. What is or was the main occupation of your husband (wife)? | | | |
| | | | |
| | Code: | Never married | - 0 |

Now I am going to ask you some questions about where you live and the facilities that you have here.

- | | | | |
|--|-------|-----------------|-----|
| 11. How long have you been living at your present address? | Code: | Number of years | |
| 12. During your childhood did you live in mainly urban or rural areas? | Code: | Mainly urban | - 1 |
| | | Mainly rural | - 2 |
| | | Both | - 3 |
| 13. As an adult did you live in mainly urban or rural areas? | Code: | Mainly urban | - 1 |
| | | Mainly rural | - 2 |
| | | Both | - 3 |

Annex III

14. How many people are living here with you? Code: None - 0
 One - 1
 Two - 2
 Three - 3
 Four - 4
 Five - 5
 Six - 6
 Seven - 7
 Eight or more - 8
 Institution - 9

15. Could you please tell me what these people are to you and what their ages are?

(Note for the Interviewer: Information on all persons has to be written down.)

Number	Relationship	Age	Sex
1			
2			
3			
4			
5			
6			
7			
8			

- Code: Spouse - 1
 Relative - 2
 In-law - 3
 Non-relative - 4
 Do not know - 9
- Younger than 18 - 1
 18-24 - 2
 25-64 - 3
 65-74 - 4
 75 and older - 5
 Do not know - 9
- Male - 1
 Female - 2
 Do not know - 9

- Are you living in "open marriage" now? Code: Yes - 1
 No - 2

Annex III

16. How many rooms are there here, not counting a bathroom?	Code: Not applicable because proband lives in an Institution	- 0
(Note: a kitchen <u>is</u> a room; a kitchenette <u>is not</u> a room)	One	- 1
	Two	- 2
	Three	- 3
	Four	- 4
	Five	- 5
	Six	- 6
	Seven	- 7
	Eight	- 8
	Nine or more	- 9
17. How many rooms do you ("and your spouse") have for your own use, not counting a bathroom?	Code: Number	
18. Is there a bathroom, shower or sauna?	Code: Yes No	- 1 - 2
<u>If No</u> , do you have the use of a bathroom, shower or sauna nearby?	Code: Yes No Not relevant	- 1 - 2 - 3
19. Do you have a tap for warm water?	Code: Yes No	- 1 - 2
20. Do you have a tap for cold water:	Code: Inside? Outside? Both? Neither?	- 1 - 2 - 3 - 4
21. Do you have a toilet:	Code: Indoors? Outdoors? Both? Or don't you have a toilet?	- 1 - 2 - 3 - 4
22. Do you share the toilet with other households?	Code: Yes No Not relevant	- 1 - 2 - 3
23. Do you have cooking facilities:	Code: Of your own? Shared with household? Shared with other households?	- 1 - 2 - 3

Annex III

24. Do you have the use of:

An automatic washing machine?	Code: Yes	- 1
	No	- 2
A fridge?	Yes	- 1
	No	- 2
A deep freeze?	Yes	- 1
	No	- 2
A telephone?	Yes	- 1
	No	- 2
A television?	Yes	- 1
	No	- 2
A radio?	Yes	- 1
	No	- 2

25. Are you living on more than one floor?	Code: Yes	- 1
	No	- 2

26. Which floor(s) do you live on? (lowest number)	Code: Basement	- 0
	Ground floor/	
	First floor	- 1
	Second floor	- 2
	Third floor	- 3
	Fourth floor	- 4
	Fifth floor	- 5
	Sixth floor	- 6
	Seventh floor	- 7
	Eighth floor	- 8
	Ninth or higher	- 9

27. Is there a lift?	Code: Yes	- 1
	No	- 2

28. How many stairs are there to get to the road?	Code: 0	- 1
	1-5	- 2
	6-10	- 3
	11-20	- 4
	21 or more	- 5

29. How long would it take you to walk to the nearest grocery shop?	Code: Less than 5 minutes	- 1
	5 to 9 minutes	- 2
	10 to 19 minutes	- 3
	20 to 29 minutes	- 4
	30 or more minutes	- 5
	Not applicable	- 6

Now I would like to ask you some questions about your health.

30. How do you feel about your present health; do you feel quite healthy?	Code: Yes	- 1
	No	- 2

Annex III

Now some questions about particular symptoms.

35. In the last two weeks have you suffered from any of the following symptoms:

	<u>No</u>	<u>If Yes</u>		
		Occasionally?	Often?	Nearly continuously?
1. Head ache?	_____	_____	_____	_____
2. Worsening of memory?	_____	_____	_____	_____
3. Lack of appetite?	_____	_____	_____	_____
4. Heartburn?	_____	_____	_____	_____
5. Stomach pains?	_____	_____	_____	_____
6. Diarrhea?	_____	_____	_____	_____
7. Nightmares?	_____	_____	_____	_____
8. Difficulties in falling asleep?	_____	_____	_____	_____
9. Lack of sexual desire?	_____	_____	_____	_____
10. Sense of giddiness?	_____	_____	_____	_____
11. Palpitation of the heart?	_____	_____	_____	_____
12. Tremor of hands?	_____	_____	_____	_____
13. Excessive sweating without physical effort?	_____	_____	_____	_____
14. Difficulties in breathing or shortness of breath, without physical effort?	_____	_____	_____	_____
15. Unwillingness to do things or lack of energy?	_____	_____	_____	_____
16. Tiredness or feeling of faintness?	_____	_____	_____	_____
17. Nervous tension, nervousness?	_____	_____	_____	_____
18. Irritability or bursts of anger?	_____	_____	_____	_____
19. Low spirits or depression?	_____	_____	_____	_____
20. Constipation?	_____	_____	_____	_____
21. Aching or pain in the joints?	_____	_____	_____	_____
22. Back trouble?	_____	_____	_____	_____

Annex III

36. Do you hear what a person speaking at normal volume is saying to you when you are alone with him or her? Code: Yes - 1
No - 2
With difficulty - 3
37. Do you hear what a person speaking at normal volume is saying to you, when you are in a group of people, all talking together? Code: Yes - 1
No - 2
With difficulty - 3
38. Can you read the newspaper or books: (Note - with glasses if worn) Code: Easily? - 1
With difficulty? - 2
Don't you read at all? - 3
Cannot read? - 4
39. Do you ever have trouble getting to the lavatory on time? Code: No - 1
Rarely - 2
Yes - 3
Have a catheter or colostomy - 4
Not answered - 5
- If Yes, ask (a) and (b)
- (a) How often do you wet yourself? (either day or night) Code: Never - 1
Once or twice a week - 2
Three times a week or more - 3
Not answered - 4
- (b) How often do you soil yourself? (either day or night) Code: Never - 1
Once or twice a week - 2
Three times a week or more - 3
Not answered - 4
40. Do you have any problems with your feet such as bunions, corns, bent toes or long toe-nails? Code: Yes - 1
No - 2
- If Yes, do these foot problems restrict your activities? Code: Yes - 1
No - 2

The next lot of questions concern your living habits and physical activity. It is important that we know these for our research.

41. Have you ever smoked regularly, almost every day at least for one year? Code: No - 1
Yes - 2
- If Yes, for how many years? Code: Number
- years.

Annex III

42. Do you smoke regularly now? Code: No - 1
Yes - 2

If No, how many years ago did you stop smoking? Code: Number
Less than 1 - 0
..... years ago.

43. How many cigarettes, cigars and pipefuls do you smoke daily?

	<u>Cigarettes</u>	<u>Cigars</u>	<u>Pipefuls</u>
None	_____	_____	_____
1-4	_____	_____	_____
5-14	_____	_____	_____
15-24	_____	_____	_____
More than 24	_____	_____	_____

44. Do you drink:

Spirits? Code: No - 1
Yes - 2
Wine? No - 1
Yes - 2
Beer? No - 1
Yes - 2

If you sometimes drink spirits, wine or beer, how many days ago did you last have

Spirits? days
Wine? days
Beer? days

45. Which of the following statements best describes your present style of life?

I am unable to move without some aid. - 1
I am living for the most part indoors and cannot undertake anything physically strenuous. - 2
I am living for the most part indoors and am only able to do light jobs outside. - 3
I am living for the most part indoors and am able to do heavy jobs outside. - 4
I am living for the most part outdoors and am only able to do light jobs. - 5
I am living for the most part outdoors and am able to do heavy jobs. - 6

46. Do you practice physical exercise, such as brisk walking, jogging or swimming, etc., now? Code: Yes - 1
No - 2

If yes.

- (a) Is this physical exercise: Code: Mainly for your health? - 1
Mainly because you enjoy it? - 2
Both reasons? - 3
Not relevant - 4
- (b) On average, how many hours a day do you practise physical exercise, outside work, to improve your physical fitness and health now? Code: None - 1
Less than one - 2
1-2 hours - 3
3-4 hours - 4
5-8 hours - 5
9-14 hours - 6
More than 14 hours - 7
Not relevant - 9
- (c) When you practise physical exercise now, which way do you usually do it? Code: Slowly? - 1
Briskly? - 2
Strenuously? - 3
Not relevant - 4
47. How many kilometers do you usually walk daily? Code: None - 1
Less than one - 2
1-2 km - 3
3-5 km - 4
6-9 km - 5
More than 9 km - 6

Thank you for your help so far. We are half way through all the questions. Next we have some questions about your use of health services.

48. (a) In the last 12 months how often did the doctor come and see you at home? _____
(b) In the last 12 months how often did you go to see the doctor? _____
(c) In the last 12 months how often did you consult with the doctor over the telephone? _____
49. In the last 12 months how often did you see the dentist? _____
50. (a) In the last 12 months how often did the nurse or health visitor visit you at home? _____
(b) In the last 12 months how often did you go to see the nurse? _____
(c) In the last 12 months how often did you consult with the nurse over the telephone? _____

Annex III

51. How often were you treated by the Physiotherapist during the last year, not including inpatient treatments, but including day hospitals?
(Prompt if necessary. A physiotherapist is someone who gives exercises, massage or heat treatment.)

Code:	Not at all	- 0
	Once	- 1
	Twice	- 2
	Three times	- 3
	More than three times	- 4

52. How often were you visited by the Occupational Therapist during the last 12 months, not including inpatient treatments, but including day hospitals?
(Prompt if necessary. An occupational therapist is someone who helps people recover by teaching them skills, usually using hands or feet.)

Code:	Not at all	- 0
	Once	- 1
	Twice	- 2
	Three times	- 3
	More than three times	- 4

53. In the last 12 months, how often have you been seen in hospital outpatient departments or polyclinics?

54. In the last 12 months, how often have you been admitted to a general hospital?

If at all, how many days have you been in a general hospital during the last 12 months?

55. Have you been admitted to any other institution, psychiatric hospital, longstay hospital or nursing home, during the last 12 months?
Code: Yes - 1
No - 2

If yes, which hospitals or homes were these and how many days were you in them during the last 12 months?

56. How many times did you have an operation requiring a general anaesthetic, during the last 12 months?
(Prompt if necessary. General anaesthetic - one that made you unconscious.)

Code:	Not at all	- 0
	Once	- 1
	Twice	- 2
	Three times	- 3
	Four or more	- 4

57. How many different medicines or tablets prescribed by a doctor have you taken during the past seven days?

Code: Number
None - 0

(Code number of different tablets, capsules and medicine taken)

If proband has taken any, how many of these medicines or tablets prescribed by a doctor have you taken regularly each day for at least the last 3 months?

Code: Number
None - 0
Not relevant - 9

58. How many different medicines or tablets that you bought yourself have you taken during the past seven days?

Code: Number
None - 0

(Code number of different tablets, capsules and medicine taken)

If proband has taken any, how many of these medicines or tablets that you bought yourself have you taken regularly each day for at least the last 3 months?

Code: Number
None - 0
Not relevant - 9

59. Do you take sleeping pills or tranquilizers to help you sleep most nights now?

Code: No - 1
Yes - 2

Now there are some questions about your daily activities and how you spend your time.

60. Elderly people often have difficulties in moving around. Which of the following alternatives describes best your situation?

I am able to move without difficulty, both outdoors and indoors. - 1

I am able to walk between rooms but not outside without the help of other persons. - 2

I am not able to walk between rooms or outside and am mostly confined to bed or chair. - 3

Annex III

61. The following tasks are often difficult to perform by the elderly. I would like to know if you have problems in doing them?

Are you able:	<u>No</u>		<u>Yes</u>	
		Without difficulty	With some difficulty, but can manage without help	Not able to manage without help
1. To move outdoors?	_____	_____	_____	_____
2. To walk between rooms?	_____	_____	_____	_____
3. To use stairs?	_____	_____	_____	_____
4. To walk at least 400 m?	_____	_____	_____	_____
5. To carry a heavy thing e.g. shopping bag of 5 kg for a hundred meters?	_____	_____	_____	_____
6. To use the lavatory?	_____	_____	_____	_____
7. To wash and bathe yourself?	_____	_____	_____	_____
8. To dress and undress?	_____	_____	_____	_____
9. To get in and out of bed?	_____	_____	_____	_____
10. To do your own cooking?	_____	_____	_____	_____
11. To feed yourself?	_____	_____	_____	_____
12. To cut toenails?	_____	_____	_____	_____
13. To do light housework (wash dishes, sweep floors)?	_____	_____	_____	_____
14. To do heavy housework (wash windows and floors, general house cleaning)?	_____	_____	_____	_____

62. Do you drive yourself in: Code: A normal car? - 1
 An adapted car? - 2
 An invalid car? - 3
 Or don't you drive - 4

63. Do you travel by bus or train: Code: Whenever necessary? - 1
 Only out of rush hour? - 2
 Or are you unable to use bus or train? - 3
 Or don't you want to use bus or train? - 4

Annex III

64. Are you able to walk, or go by public transport, to the nearest medical centre unaccompanied?	Code: Yes No	- 1 - 2
65. Are you able, without the help of anyone else, to walk, or go by public transport, to any institution and settle a question which interests you?	Code: Yes No	- 1 - 2
66. In the last 12 months, have you had "meals-on-wheels":	Code: Never? Occasionally? Regularly?	- 0 - 1 - 2
67. In the last 12 months, have you had a home-help:	Code: Never? Occasionally? Regularly?	- 0 - 1 - 2
68. In the last 12 months, have you used a free laundry service:	Code: Never? Occasionally? Regularly?	- 0 - 1 - 2
69. In the last 12 months, have you used chiropody services:	Code: Never? Occasionally? Regularly?	- 0 - 1 - 2
70. In the last 12 months, have you seen a social worker:	Code: Never? Occasionally? Regularly?	- 0 - 1 - 2

(Note: These questions on the use of social services may be expanded here in each country depending on the services available in that country.)

71. In your view, what is the most important helping service that you need?

(Record in subjects words - one only) _____

72. Are you a member of some club, association or society?	Code: Yes No	- 1 - 2
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If Yes, how many clubs or associations or societies are there in which you are a member?

Code: Number

If Yes, which of the following statements describes best your function in the organization?

Code: I am only an inactive member and do not participate in activities	- 1
I am a member and participate occasionally in activities	- 2
I am an active member	- 3
I belong to the executive members of the organization	- 4

Annex III

73. I would like to know: Are you a member of some association of retired people? Code: Yes - 1
No - 2
74. Are you at present a responsible person (or appointed representative) in a state or municipal organization? Code: Yes - 1
No - 2
75. Have you in the last 12 months visited or taken part in the following places or occasions? Code: Yes - 1
No - 2

If Yes, how many times?

- | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|----|
| 1. Family ceremonies, wedding, funerals, birthday parties | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9+ |
| 2. Theatre, movies, concert, art exhibition | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9+ |
| 3. Library | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9+ |
| 4. Sport competitions, watching or taking part | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9+ |
| 5. Religious service | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9+ |
| 6. A foreign country | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9+ |
| 7. Journey in home country (at least one hundred km)* | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9+ |

* Distance may need reducing in some countries.

76. How do you usually spend the time which is left over outside work and necessary housework, shopping and rest?

77. How often are you alone: Code: Often? - 1
Rarely? - 2
Never? - 3
78. When did somebody last visit you or you visit someone else? Code: Today or yesterday - 1
Some days ago - 2
About a week ago - 3
About 2 weeks ago - 4
About a month ago - 5
About half a year ago - 6
More than half a year ago - 7

79. Now I would like to know how many living children, sisters or brothers you have, and how many good friends you have?

Code: Children	0	1	2	3	4	5	6	7	8	9+
Sisters or brothers	0	1	2	3	4	5	6	7	8	9+
Good friends	0	1	2	3	4	5	6	7	8	9+

If there are children, are some of your children living:

Code: In the same house as you or in the very near neighbourhood?	- 1
In the same area?	- 2
None of them is living near to me?	- 3

80. Which of the following statements describes best your relation to your neighbours?

Code: Our relations are so familiar that we help each other always when needed (at least one such person).	- 1
We have good relations with our neighbours but we seldom visit each other.	- 2
I do not have any contacts with neighbours.	- 3

81. Do you assist in bringing up any grandchildren or other children?

Code: Yes	- 1
No	- 2

82. Do you feel lonely:

Code: For the most of the time?	- 1
Sometimes?	- 2
Never?	- 3

83. Do you feel forgotten:

Code: Very much?	- 1
Somewhat?	- 2
Not at all?	- 3

84. Do you feel unnecessary:

Code: Often?	- 1
Sometimes?	- 2
Never?	- 3

85. How satisfied are you with your present life?

Code: Very satisfied?	- 1
Satisfied?	- 2
Reasonably satisfied, so-so?	- 3
Unsatisfied?	- 4
Very unsatisfied?	- 5

86. Do you long for company:

Code: Often?	- 1
Sometimes?	- 2
Never?	- 3

Annex III

87. Do you feel that people respect you:	Code: Very much?	- 1
	Somewhat?	- 2
	Not at all?	- 3
88. Do you feel tired of life:	Code: Often?	- 1
	Sometimes?	- 2
	Never?	- 3
89. Are you worried about the future:	Code: Often?	- 1
	Sometimes?	- 2
	Never?	- 3
90. How do you feel about your economic situation:	Code: Good?	- 1
	Satisfactory?	- 2
	Bad?	- 3
91. How do you feel your economic situation is now compared with your situation 10 years ago:	Code: Better?	- 1
	The same?	- 2
	Worse?	- 3
92. How do you feel that your economic situation compares with that of most people of your age:	Code: Better?	- 1
	The same?	- 2
	Worse?	- 3
93. Are you satisfied with your past work or carrier:	Code: Satisfied?	- 1
	Cannot say?	- 2
	Unsatisfied?	- 3
94. Are you satisfied with the human relationships which you have had or made during the course of your life:	Code: Satisfied?	- 1
	Cannot say?	- 2
	Unsatisfied?	- 3
95. If you could start your life again would you live it more or less in the same way:	Code: Yes?	- 1
	Cannot say?	- 2
	No?	- 3

Interviewer's Evaluation

Questions to be answered by the interviewer

96. Standard of temperature control (heating, insulation):	Code: Good	- 1
	Sufficient	- 2
	Insufficient	- 3
97. General accommodation (furniture, decoration, damp):	Code: Good	- 1
	Sufficient	- 2
	Insufficient	- 3

Annex III

98. Standard of nature lighting:	Code: Good	- 1
	Sufficient	- 2
	Insufficient	- 3
99. Standard of artificial lighting:	Code: Good	- 1
	Sufficient	- 2
	Insufficient	- 3
100. Opinion of hygiene in the home:	Code: Good	- 1
	Sufficient	- 2
	Insufficient	- 3
101. Opinion of hygiene of the person: (clothes, hair, hands)	Code: Good	- 1
	Sufficient	- 2
	Insufficient	- 3
102. During the interview did the subject's behaviour strike you as:		
(a) Mentally alert?	Code: Yes	- 1
	No	- 2
(b) Depressed and/or tearful?	Yes	- 1
	No	- 2
(c) Suspicious (more than reasonable)?	Yes	- 1
	No	- 2
(d) Bizarre or inappropriate in thought or action?	Yes	- 1
	No	- 2
103. Do you think the subject's answers about physical health were:	Code: Optimistic?	- 1
	About right?	- 2
	Pessimistic?	- 3
104. Do you think the subject's answers were:	Code: Optimistic?	- 1
	About right?	- 2
	Pessimistic?	- 3

Time required to complete questionnaire? _____

Interviewer's name

Date of interview

Place of interview: Normal home - 1
Special housing - 2
Institution - 3

Area of residence: Urban - 1
Sub-urban - 2
Rural - 3

