

BASELINE SURVEY INTERVIEW

R-K INTERVENTION STUDY



"In this country, as in many others, there is an ever growing need for knowing more about the health of middle-aged males in order to improve the health services relating to them. This is why we are contacting you as one of the persons in the 45-59 age group from whom we are hoping to obtain useful opinions. Will you therefore be so kind as to have a talk with us during which we shall be asking you questions on health and disease and on the health services relating to middle-aged males. The data obtained will be considered strictly confidential." (Lithuanian version).

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FOR MAILED QUESTIONNAIRE ONLY

Please fill in the appropriate blanks or mark an in the appropriate box which best describes your situation or attitude. Unless otherwise instructed, you should mark only one box for each question.

DRAFT
March 1971

R-K Intervention Study

NO:

Surname and name: -----

Address: -----

Contact took place: Date:
Date Month Year

Not in mailed questionnaire:

Contact failed (at least three attempts):

Reason: ----- Date:
Date Month Year

Reason: ----- Date:
Date Month Year

Reason: ----- Date:
Date Month Year

(Write what time it is at this moment) hours minutes

Duration of interview

1. How would you assess your own health condition?

(Generally speaking, do you think you are?)

- In excellent health 1
- In good health 2
- Fairly healthy 3
- Not very healthy 4
- Not healthy at all 5

2. What do you think of your own health condition compared with that of other men of your age?

- | | | |
|---------------|--------|----------------------------|
| My health is: | Better | 1 <input type="checkbox"/> |
| | Same | 2 <input type="checkbox"/> |
| | Worse | 3 <input type="checkbox"/> |

3. Compared to other men of your age, do you believe that you go to the doctor:

- More often than most others 1
- About as often as most others 2
- Less often than most others 3

4. Have you any troubles, complaints or problems with your health?

- Yes 1
- No 2

If yes, please describe: -----

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- Yes 1
- No 2

Number

5. Do you think you are generally taking sufficient care of your health?

- Yes, definitely, I am taking sufficient care 1
- Perhaps I could do more for my health 2
- Definitely, I could do much more for my health 3

6. What do you think are the most frequent health problems of middle-aged male?

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Yes 1

No 2

Number

7. Do you think it is likely that a healthy man of your age might develop some serious illness within the next 5-10 years? (Lithuanian)

Very likely 1

Likely 2

Not likely 3

The chance that a healthy man of your age might develop some serious illness within the next 5-10 years is: (Dutch)

Very great 1

Great 2

Small 3

8. Do you think a healthy person of your age could reduce the likelihood of developing some serious disease by taking preventive measures?

Very likely 1

Likely 2

Not likely 3

9. One of the disorders of middle-aged males is heart disease. There are various opinions about heart disease. Which opinion is the closest to yours?

My opinion is closest to:

I do not see the doctor unless I have pain or trouble around my heart. 1

As soon as I feel even the slightest pain around my heart, I go to see the doctor. 2

Regardless of whether I have such pain or trouble, I go to see the doctor and am examined regularly. 3

10. People have different opinions about the methods for finding out about heart disease. Which opinion is the closest to yours?

My opinion is closest to:

I believe my own feeling. If I feel well, it means that I am not ill. 1

The doctor knows more than I. I would accept his statement after a general examination. 2

I do not necessarily accept the doctor's statement of a general examination unless a detailed specific examination is made. 3

11. People have different opinions about health and disease. With which of these statements do you most agree?

I most agree with statement:

If one gets ill, it can't be helped. 1

Generally, health is a matter of luck, but in some cases we can do things to prevent development of disease. 2

One can certainly do much to live a healthier life. 3

12. Suppose you have been examined and although you are feeling well the doctor found something which, in the future, could lead to a serious disease, and he prescribes a treatment of medicine for several months in order to prevent development of this disease. Would you:

Follow the treatment as long as the doctor advised? 1

Follow it as long as you feel it is necessary. 2

Not follow it. 3

13. Even if you were not affected by a particular disease, would you be willing to be under medical examination that might make it possible to discover ways to prevent the disease?

Yes, with pleasure (definitely) 1

Yes, on condition that: ----- 2

No, I don't think so because: ----- 3

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14. Health is a great thing. But how important do you think health is if compared with other valuable things?

My opinion is closest to statement:

Health is the most valuable thing. 1

There are other things which are to me as valuable as health. 2

I prefer to live pleasantly and a bit shorter, instead of denying myself certain activities to grow a few years older. 3

What is your opinion of the following statements?

17. One can achieve nothing without being in good health:

- Strongly agree 1
- Agree 2
- Disagree 3
- Strongly disagree 4

18. Health should be seen as the greatest thing in human life:

- Strongly agree 1
- Agree 2
- Disagree 3
- Strongly disagree 4

17. Man's happiness depends on his health:

- Strongly agree 1
- Agree 2
- Disagree 3
- Strongly disagree 4

Here are some questions about the local medical service.

18. Do you find it easy to get a medical consultation if you need it?

- Yes 1
- Not always 2
- No 3

19. Is it easy to find another doctor if you are not satisfied with your general practitioner (district internist)?

- Yes 1
- Not always 2
- No 3

20. What is the name of your general practitioner (district internist)

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name: -----

address: -----

21. When was your last contact with a doctor?

If you remember the month and year, write it here:

_____/_____
Month Year

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22. What was the main reason for this contact?

- Examination 1
- Certificate 2
- Consultation 3
- Medicine 4
- Other (specify) 5

23. How many times did you consult a doctor during the past six months?

- More than 10 times 1
- 4-9 times 2
- 2-3 times 3
- Only once 4
- Did not consult a doctor 5

24. Was that your usual pattern of visiting a doctor?

- Yes, it was the usual pattern 1
- It was more than usual 2
- It was less than usual 3
- Not sure 4

25. Have you had any unpleasant experiences with health services or doctors in general?

- Never 1
- Once or twice 2
- A few times 3
- Often 4
- Very often 5

Please describe what it is that you mind most:

26. Have you had any particularly good experience with health services or doctors in general ?

- | | | |
|---------------|---|--------------------------|
| Never | 1 | <input type="checkbox"/> |
| Once or twice | 2 | <input type="checkbox"/> |
| A few times | 3 | <input type="checkbox"/> |
| Often | 4 | <input type="checkbox"/> |
| Very often | 5 | <input type="checkbox"/> |

If yes, what kind? -----

27. Do you think that nowadays it is possible to treat heart disease effectively?

- | | | |
|-------------------------------------|---|--------------------------|
| Yes, definitely, all heart diseases | 1 | <input type="checkbox"/> |
| Yes, most heart diseases | 2 | <input type="checkbox"/> |
| Depends; some heart diseases | 3 | <input type="checkbox"/> |
| No, only very few heart diseases | 4 | <input type="checkbox"/> |
| Definitely not, none at all | 5 | <input type="checkbox"/> |
| I don't know | 6 | <input type="checkbox"/> |

28. Do you think that present day medicine is capable of effectively preventing heart diseases?

- | | | |
|-------------------------------------|---|--------------------------|
| Yes, definitely, all heart diseases | 1 | <input type="checkbox"/> |
| Yes, most heart diseases | 2 | <input type="checkbox"/> |
| Depends; some heart diseases | 3 | <input type="checkbox"/> |
| No, only very few heart diseases | 4 | <input type="checkbox"/> |
| Definitely not, none at all | 5 | <input type="checkbox"/> |
| I don't know | 6 | <input type="checkbox"/> |

29. There is an idea to start examination of the middle-aged men of our city to discover their susceptibility to heart disorders. In case of necessity, a treatment would be applied. How would you react if you were invited to participate in this examination?

Yes, I would definitely participate (I would participate with pleasure) 1

Yes, on condition: ----- 2

No, I don't think so, because: ----- 3

-
30. There are certain habits which may be harmful to one's health. If you knew you had such habits, what would you do?

My opinion is closest to statement:

Health is most important, so I would try to stop my bad habitual activities 1

Health is important so I would try to minimize some of my bad habitual activities 2

I would not bother much about trying to change my bad habitual activities just to attempt to keep myself in good health 3

Have you ever tried to change your habits for health reasons?

31. Smoking habits:

I never smoked 1

I used to smoke but have totally stopped 2

I smoke, but have stopped for periods of more than one year 3

I restrict my smoking 4

I smoke, and have never tried to stop 5

-
32. Diet

It was never necessary for me to go on a diet 1

I should have gone on a diet but I just did not do it 2

I have tried to diet but have not followed it 3

I am now or have been on a diet and have followed it 4

33. Have you ever tried to carry out a physical exercise programme?
- It was never necessary for me to carry out a physical exercise programme. 1
- I should have carried out a physical exercise programme, but I just didn't do it. 2
- I have tried to carry out a physical exercise programme, but have not followed it. 3
- I am now or have been on a physical exercise programme and have followed it. 4
-

34. Suppose that research has proven that some things you very much like to eat may be harmful to your health. What would you do?
- I would never eat it again 1
- I would eat less of it 2
- I would think: it seems that I am not allowed to like anything any more; and the next day they will come up with another statement. Therefore, I will not change. 3
-

35. When you are ill, do you demand to know the details of what is being done to you?
- Yes, always 1
- Yes, sometimes 2
- Rarely 3
- Never 4
-

36. Do you discuss serious personal problems with your friends?
- Yes, always 1
- Yes, sometimes 2
- Rarely 3
- Never 4
-

37. Do you have any doubts about some things doctors say they can do for you?
- Yes, always 1
- Yes, sometimes 2
- Rarely 3
- Never 4
-

38. In my family we feel it very important to follow the old traditions.

Yes, always	1	<input type="checkbox"/>
Yes, sometimes	2	<input type="checkbox"/>
Rarely	3	<input type="checkbox"/>
Never	4	<input type="checkbox"/>

39. If you had a serious personal problem, would your friends make material sacrifices to help you?

Yes, always	1	<input type="checkbox"/>
Yes, sometimes	2	<input type="checkbox"/>
Rarely	3	<input type="checkbox"/>
Never	4	<input type="checkbox"/>

40. I think that each family member should certainly take account of the family in making his personal decisions. (Dutch)

I think that each family member must take his personal decisions according to the opinion of the other members of the family. (Lithuanian)

Strongly agree	1	<input type="checkbox"/>
Agree	2	<input type="checkbox"/>
Disagree	3	<input type="checkbox"/>
Strongly disagree	4	<input type="checkbox"/>

41. Are most of your close friends also friends of one another?

Yes, all	1	<input type="checkbox"/>
Quite a few	2	<input type="checkbox"/>
Hardly any	3	<input type="checkbox"/>
None	4	<input type="checkbox"/>

42. I enjoy making new acquaintances and travelling to different places.

Strongly agree	1	<input type="checkbox"/>
Agree	2	<input type="checkbox"/>
Disagree	3	<input type="checkbox"/>
Strongly disagree	4	<input type="checkbox"/>

43. I think that school and childhood acquaintances usually make one's best friends.

- | | | |
|-------------------|---|--------------------------|
| Strongly agree | 1 | <input type="checkbox"/> |
| Agree | 2 | <input type="checkbox"/> |
| Disagree | 3 | <input type="checkbox"/> |
| Strongly disagree | 4 | <input type="checkbox"/> |
-

44. Which statement best describes your attitude?

- | | | |
|---|---|--------------------------|
| I try to do my job and keep out of trouble | 1 | <input type="checkbox"/> |
| I try to become involved in those aspects of social life which especially interest me | 2 | <input type="checkbox"/> |
| I feel that I should model my whole life around the norms of my society; indeed, I feel that one should be very active in promoting the goals of his society. | 3 | <input type="checkbox"/> |
-

45. If you don't feel quite well, would you:

- | | | |
|---|---|--------------------------|
| Continue your normal activities | 1 | <input type="checkbox"/> |
| Restrict your activities and get extra rest | 2 | <input type="checkbox"/> |
| Ask for medical help | 3 | <input type="checkbox"/> |
-

46. When I have the gripe or heavy cold:

- | | | |
|--|---|--------------------------|
| I keep on working as usual | 1 | <input type="checkbox"/> |
| I stay at home and do everything I can to return to work quickly | 2 | <input type="checkbox"/> |
| I stay at home and wait to get well | 3 | <input type="checkbox"/> |
| I expect to stay in bed for several days at least | 4 | <input type="checkbox"/> |
-

47. Compared with other men of my age, I participate in the clubs and organizations of social life:

- | | | |
|---------------------------|---|--------------------------|
| Much more than others | 1 | <input type="checkbox"/> |
| A little more than others | 2 | <input type="checkbox"/> |
| About the same as others | 3 | <input type="checkbox"/> |
| A little less than others | 4 | <input type="checkbox"/> |
| Much less than others | 5 | <input type="checkbox"/> |
-

48. Since you were ten years old, how long have you lived in the following places:

rural area ----- years
small town ----- years
industrial area ----- years

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49. How long have you lived in your present residence?

----- years

For official use

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50. What is your occupation, and what kind of work are you doing?

Profession:-----

For official use

Description of work: -----

00

51. What is your present marital status?

Single
Married
Widower
Divorced or separated

1
2
3
4

52. What is your date of birth?

Date Month Year

For official use

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53. How many years have you spent:

At elementary school ----- years
At secondary school ----- years
At special technical education ----- years
At college/university ----- years
In post-graduate study ----- years

For official use

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00
00
00

54. Have you hear about the local heart disease programme?

Yes	1	<input type="checkbox"/>
No	2	<input type="checkbox"/>

55. If yes, from whom or what source did you hear about it?

Radio/TV	1	<input type="checkbox"/>
Newspapers	2	<input type="checkbox"/>
Wife	3	<input type="checkbox"/>
Other family member	4	<input type="checkbox"/>
Friend	5	<input type="checkbox"/>
Work associate	6	<input type="checkbox"/>
Physician	7	<input type="checkbox"/>
Other (specify) -----	8	<input type="checkbox"/>

(Check more than one, if applicable)

56. If yes, when did you hear about it?

Within the last week	1	<input type="checkbox"/>
Within the last month	2	<input type="checkbox"/>
Within the last six months	3	<input type="checkbox"/>
Before that time	4	<input type="checkbox"/>

57. Do you know anyone who has been given a physical examination in the heart control programme?

Yes	1	<input type="checkbox"/>
No	2	<input type="checkbox"/>

If yes, how many persons? -----

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58. If yes, who are these persons?

Relative	1	<input type="checkbox"/>
Neighbour	2	<input type="checkbox"/>
Friend	3	<input type="checkbox"/>
Work associate	4	<input type="checkbox"/>
Other (specify): -----	5	<input type="checkbox"/>

(Check more than one, if applicable).

59. Have you talked with him/them about the examination?

Yes 1
No 2

60. Do you think the examination activity is good or not?

Good 1
Neutral - neither good nor bad 2
Not good 3

We shall much appreciate it if you would write down any remarks or questions you have after having filled up this questionnaire, because these could be useful to us

For interviewer only:

Write down what time it is at this moment

hours minutes

Thank you very much for your kind cooperation. You can be sure that all the information you have given will be treated strictly confidential. (Lithuanian)

Thank you very much for your kind cooperation. You can be sure that all the information you have given will be treated strictly confidential and will come under the professional code of medical secrecy. (Dutch)

Interviewer -----
Name