1. INTERVIEWER LABEL

The University of Michigan
Survey Research Center
Institute for Social Research
Ann Arbor, MI 48106

1. Sample ID: ___________ 2. Your IW No.: ___________

3. Date of IW: ______________

4. Length of IW: ___________ (minutes)

5. Length of Edit: ___________ (minutes)

THIS STATEMENT MUST BE READ TO ALL RESPONDENTS

This interview is completely voluntary and confidential. If we should come to any question you do not want to answer, let me know and we'll go on to the next question. Your answers will be kept completely confidential.

REVIEWED BY:

☐ SUPERVISOR ___________ DATE ☐ CATI ENTRY ___________ DATE
**SECTION A: HOUSEHOLD LISTING AND ACTIVITIES OF DAILY LIFE**

A0. **TIME NOW: ________________**

A1. Before we start the interview, I need to list the people who live here besides yourself. I need the age, sex and relationship to you of the other people who live here. (PROBE: Is there anyone else living here?)

[R's SEX AND DATE OF BIRTH OR AGE SHOULD BE CHECKED ON COVER SHEET/INTRO AND TRANSFERRED HERE]

<table>
<thead>
<tr>
<th>(a) RELATIONSHIP TO RESPONDENT</th>
<th>(b) SEX</th>
<th>(c) AGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. RESPONDENT</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
A2. Do you have any children who are not living here with you at the present time? [DO NOT INCLUDE FOSTER CHILDREN.]

1. YES  5. NO, NO CHILDREN ELSEWHERE --> GO TO A3

A2a. Please tell me the sex and age of each of your children living elsewhere, and indicate if any of them is an adopted or stepchild of yours. (PROBE: Do you have any other children living elsewhere, including adopted or stepchildren?).

<table>
<thead>
<tr>
<th>CHILD #</th>
<th>SEX</th>
<th>AGE</th>
<th>INDICATE IF:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MALE (1)</td>
<td></td>
<td>ADOPTED (1)</td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

A3. In most of the rest of the interview, I will ask a question and then read you a list of possible responses. Please listen to the list of possible responses and then choose the one that best describes you or your situation. We have found through past research that the best answer is usually the one that comes to your mind first.

A4. (P. 1) First, I have a few questions about how you spend your time. In a typical week, about how many times do you talk on the telephone with friends, neighbors or relatives? Would you say more than once a day, once a day, 2 or 3 times a week, about once a week, less than once a week, or never?

1. MORE THAN ONCE A DAY  2. ONCE A DAY  3. 2 OR 3 TIMES A WEEK  4. ABOUT ONCE A WEEK  5. LESS THAN ONCE A WEEK  6. NEVER OR NO PHONE
A5. (RB, P. 2) How often do you get together with friends, neighbors or relatives and do things like go out together or visit in each other’s homes? Would you say more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month, or never?

1. MORE THAN ONCE A WEEK  
2. ONCE A WEEK  
3. 2 OR 3 TIMES A MONTH  
4. ABOUT ONCE A MONTH  
5. LESS THAN ONCE A MONTH  
6. NEVER

A6. (RB, P. 2) How often do you attend meetings or programs of groups, clubs or organizations that you belong to? (Would you say more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month, or never?)

1. MORE THAN ONCE A WEEK  
2. ONCE A WEEK  
3. 2 OR 3 TIMES A MONTH  
4. ABOUT ONCE A MONTH  
5. LESS THAN ONCE A MONTH  
6. NEVER/DOES NOT BELONG

A7. (RB, P. 3) How often do you typically work in the garden or yard? Would you say often, sometimes, rarely, or never?

1. OFTEN  
2. SOMETIMES  
3. RARELY  
4. NEVER

A8. (RB, P. 3) How often do you take walks—(often, sometimes, rarely, or never)?

1. OFTEN  
2. SOMETIMES  
3. RARELY  
4. NEVER

A9. (RB, P. 3) Other than taking walks, how often do you engage in active sports or exercise—(often, sometimes, rarely, or never)?

1. OFTEN  
2. SOMETIMES  
3. RARELY  
4. NEVER

A10. (RB, P. 3) When you go shopping or out to eat, how often do you see or run into someone you know by name? (Would you say often, sometimes, rarely, or never?)

1. OFTEN  
2. SOMETIMES  
3. RARELY  
4. NEVER  
5. VOLUNTEERED R NEVER GOES OUT
SECTION B: REFLECTIONS ON ONE'S LIFE

B1. (RB, P. 4) Now please think about your life as a whole. How satisfied are you with it—are you completely satisfied, very satisfied, somewhat satisfied, not very satisfied or not at all satisfied?

| 1. COMPLETELY SATISFIED | 2. VERY SATISFIED | 3. SOMewhat SATISFIED | 4. NOT VERY SATISFIED | 5. NOT AT ALL SATISFIED |

B2. (RB, P. 5) For each of the following statements, please tell me how strongly you agree or disagree with each statement as it applies to you. Here's the first statement.

<table>
<thead>
<tr>
<th>Agree Strongly (1)</th>
<th>Agree Somewhat (2)</th>
<th>Disagree Somewhat (3)</th>
<th>Disagree Strongly (4)</th>
</tr>
</thead>
</table>

B2a. I take a positive attitude toward myself. Do you agree strongly, agree somewhat, disagree somewhat or disagree strongly?

B2b. At times I think I am no good at all. (Do you agree strongly, agree somewhat, disagree somewhat, or disagree strongly?)

B2c. All in all, I am inclined to feel that I am a failure.

B2d. I can do just about anything I really set my mind to do.

B2e. Sometimes I feel that I am being pushed around in life.

B2f. There is really no way I can solve the problems I have.

B3. (RB, P. 6) And what about your neighborhood—how satisfied are you with your neighborhood? Are you completely, very, somewhat, not very, or not at all satisfied?

| 1. COMPLETELY SATISFIED | 2. VERY SATISFIED | 3. SOMewhat SATISFIED | 4. NOT VERY SATISFIED | 5. NOT AT ALL SATISFIED |
B4. How true is the following statement about your neighborhood: This is a neighborhood where I feel safe from personal attacks. Is this very true, mostly true, somewhat true, or not true at all?

1. VERY TRUE  2. MOSTLY TRUE  3. SOMewhat TRUE  4. NOT TRUE AT ALL

B5. How many of the people who live in your neighborhood do you know and speak to by name — all of them, most of them, some of them, only a few of them or none of them?

1. ALL  2. MOST  3. SOME  4. FEW  5. NONE

B6. Sometimes people live in areas where residents have health problems such as skin or eye irritation, breathing difficulties or even cancers because of exposure to things like radiation, hazardous chemicals or waste; or polluted air, soil or water. Thinking back over your life, have you ever lived in an area like this?

1. YES  5. NO  --->NEXT PAGE, SECTION C

B6a. Over your life, about how many years have you lived in an area with an environment like that?

YEARS OR 96. ALL MY LIFE (ACCEPT A RANGE)
C1. Now I have some questions about your family situation. Are you currently married, separated, divorced, widowed or have you never been married?

1. MARRIED  2. SEPARATED  3. DIVORCED; MARRIAGE ANNULLED  4. WIDOWED  5. NEVER MARRIED

C1a. In what month and year were you married?

MONTH YEAR

C1b. Are you currently living with another adult as a partner in an intimate relationship?

1. YES  5. NO ---TURN TO PAGE 8, SECTION D

C1c. For how many months or years have you been living with your partner?

MONTHS OR YEARS

C2. [INTERVIEWER CHECKPOINT]

SEE C1 AND C1c

1. R IS CURRENTLY MARRIED

2. R HAS BEEN LIVING WITH PARTNER FOR 6 MONTHS OR LONGER

3. ALL OTHERS---TURN TO PAGE 8, SECTION D

Now I would like to talk with you about your (marriage/relationship with your partner.)

(RB, P. 6) Taking all things together, how satisfied are you with your (marriage/relationship)--are you completely satisfied, very, somewhat, not very, or not at all satisfied?

1. COMPLETELY SATISFIED  2. VERY SATISFIED  3. SOMEWHAT SATISFIED  4. NOT VERY SATISFIED  5. NOT AT ALL SATISFIED
C4. How much does your (husband/wife/partner) make you feel loved and cared for? Would you say a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

C5. How much is (he/she) willing to listen when you need to talk about your worries or problems--(a great deal, quite a bit, some, a little, or not at all)?

[IF R SAYS "I don't talk about problems," PROBE: If you wanted to, how willing would (he/she) be to listen?]

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

C6. (RB, P. 7) How often would you say the two of you typically have unpleasant disagreements or conflicts? Would you say daily or almost daily, 2 or 3 times a week, about once a week, 2 or 3 times a month, about once a month, less than once a month, or never?

1. DAILY OR ALMOST DAILY 2. 2 OR 3 TIMES A WEEK 3. ABOUT ONCE A WEEK 4. 2 OR 3 TIMES A MONTH 5. ABOUT ONCE A MONTH 6. LESS THAN A MONTH 7. NEVER

C7. Taking everything into consideration, how often do you feel bothered or upset by your (marriage/relationship)--almost always, often, sometimes, rarely, or never?

1. ALMOST ALWAYS 2. OFTEN 3. SOMETIMES 4. RARELY 5. NEVER
SECTION D: SOCIAL SUPPORT

Now I have some questions about other people in your life.

D1. [INTERVIEWER CHECKPOINT]

| 1. R HAS NO CHILDREN (AT HOME OR ELSEWHERE) | TURN TO PAGE 10, D8 |
| 2. R HAS CHILDREN ALL UNDER 16 | NEXT PAGE, D5 |
| 3. R HAS ONLY ONE CHILD AGE 16 OR OLDER | 4. R HAS TWO OR MORE CHILDREN 16 OR OLDER |

In the next two questions, we want you to think about your (son/daughter) who is 16 or older.

D2. How much [(does your son/daughter)/do your children] make you feel loved and cared for? Would you say a great deal, quite a bit, some, a little, or not at all?

| 1. A GREAT DEAL | 2. QUITE A BIT | 3. SOME | 4. A LITTLE | 5. NOT AT ALL |

D3. How much (is he/is she/are they) willing to listen when you need to talk about your worries or problems? (Would you say a great deal, quite a bit, some, a little, or not at all?)

(IF R SAYS, "I don't talk about problems," PROBE: If you wanted to, how willing would (he/she/they) be to listen?)

| 1. A GREAT DEAL | 2. QUITE A BIT | 3. SOME | 4. A LITTLE | 5. NOT AT ALL |
D4. [INTERVIEWER CHECKPOINT]

SEE A2, (P. 2)

1. NO CHILDREN 16 OR OLDER LIVING ELSEWHERE...->GO TO D5

2. ONE CHILD ELSEWHERE IS 16 OR OLDER

3. TWO OR MORE CHILDREN ELSEWHERE ARE 16 OR OLDER

D4a. (RB, P. 8) (Now think of your (son/daughter) who does not live with you and who is 16 or older.) In the past 12 months, how often did you have contact with (him/her) either in person, by phone, or by mail? Would you say more than once a week, once a week, 2 or three times a month, about once a month, less than once a month or never?

1. MORE THAN ONCE A WEEK
2. ONCE A WEEK
3. 2 OR 3 TIMES A MONTH
4. ABOUT ONCE A MONTH
5. LESS THAN ONCE A MONTH
6. NEVER

D4b. (RB, P. 8) (Now think of your children who do not live with you and who are 16 or older.) In the past 12 months, how often did you have contact with at least one of them either in person, by phone, or by mail? Would you say more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month or never?

1. MORE THAN ONCE A WEEK
2. ONCE A WEEK
3. 2 OR 3 TIMES A MONTH
4. ABOUT ONCE A MONTH
5. LESS THAN ONCE A MONTH
6. NEVER

D5. At this point in your life, how satisfied are you with being a parent—are you completely satisfied, very, somewhat, not very, or not at all satisfied?

1. COMPLETELY SATISFIED
2. VERY SATISFIED
3. SOMewhat SATISFIED
4. NOT VERY SATISFIED
5. NOT AT ALL SATISFIED

D6. How often do you feel bothered or upset as a parent—almost always, often, sometimes, rarely, or never?

1. ALMOST ALWAYS
2. OFTEN
3. SOMETIMES
4. RARELY
5. NEVER

D7. How happy are you with the way your (son has/daughter has/children have) turned out to this point—very happy, quite happy, somewhat happy, not too happy, or not at all happy?

1. VERY HAPPY
2. QUITE HAPPY
3. SOMEWHAT HAPPY
4. NOT TOO HAPPY
5. NOT AT ALL HAPPY
D8. Is your biological mother still living?

1. YES  
5. NO  
8. DK

D9. Is your biological father still living?

1. YES  
5. NO  
8. DK

D9a. [INTERVIEWER CHECKPOINT]

SEE D8 AND D9

1. R’s BIOLOGICAL MOTHER OR FATHER STILL LIVING

2. ALL OTHERS—NEXT PAGE, D12

D10. How much (does your father/does your mother/do your parents) make you feel loved and cared for? Would you say a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL  
2. QUITE A BIT  
3. SOME  
4. A LITTLE  
5. NOT AT ALL

6. VOLUNTEERED: ALL PHYSICALLY OR MENTALLY INCAPABLE OF DOING THIS

D11. How much (is he/is she/are they) willing to listen when you need to talk about your worries or problems? (Would you say a great deal, quite a bit, some, a little, or not at all?)

(IF R SAYS, "I don’t talk about problems," PROBE: If you wanted to, how willing would (he/she/they) be to listen?)

1. A GREAT DEAL  
2. QUITE A BIT  
3. SOME  
4. A LITTLE  
5. NOT AT ALL

6. VOLUNTEERED: ALL PHYSICALLY OR MENTALLY INCAPABLE OF DOING THIS
D12. The next two questions are about friends and relatives other than your (spouse/partner, children or parents).

On the whole, how much do your friends and other relatives make you feel loved and cared for? (Would you say a great deal, quite a bit, some, a little, or not at all?)

| 1. A GREAT DEAL | 2. QUITE A BIT | 3. SOME | 4. A LITTLE | 5. NOT AT ALL |

D13. How much are these friends and relatives willing to listen when you need to talk about your worries or problems? (Would you say a great deal, quite a bit, some, a little, or not at all?)

(IF R SAYS, "I don't talk about problems," PROBE: If you wanted to, how willing would they be to listen?)

| 1. A GREAT DEAL | 2. QUITE A BIT | 3. SOME | 4. A LITTLE | 5. NOT AT ALL |

D14. Thinking of all your family and friends, including your (spouse/partner, parents and children), is there anyone in your life with whom you can really share your very private feelings and concerns?

| 1. YES | 5. NO | ---NEXT PAGE, SECTION E |

D14a. How many such people are there?

| 1. ONE | OTHER NUMBER |

D14b. (Please think of the person with whom you have the closest relationship.) Is this person male or female?

| 1. MALE | 2. FEMALE |

D14c. What is that person's relationship to you?

RELATIONSHIP TO R
SECTION E: WIDOWHOOD

E1. INTERVIEWER CHECKPOINT

SEE C1 (P. 6)

1. R HAS NEVER MARRIED --- > TURN TO P. 18, SECTION F
2. R IS WIDOWED
3. ALL OTHERS

As part of this study we are gathering information about coping with the death of one's husband or wife.

E2. As a part of this study we are gathering information about coping with the death of one's husband or wife. Have you ever been widowed?

1. YES
5. NO --- > TURN TO P. 18, SECTION F

E3 In what year were you widowed most recently? (IF DON'T KNOW YEAR, PROBE FOR BEST ESTIMATE.)


TUR NO TO P. 14, E11

E4 In what month did that happen? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR)


E5. How old was your (husband/wife) when (he/she) died?

YEARS OLD

E6. Was (his/her) death totally unexpected or did you expect it for some time?

1. UNEXPECTED
2. EXPECTED IT
E7. What was the cause of (his/her) death?  (IF ACCIDENT, PROBE: What kind of accident?  AND OBTAIN BRIEF DESCRIPTION OF CIRCUMSTANCES.)

E8. INTERVIEWER CHECKPOINT

☐ 1. CAUSE OF DEATH WAS ACCIDENT, MURDER, OR SUICIDE  ☐ 2. ALL OTHERS

E8a. Was (he/she) still alive when you first heard about the incident?

1. YES  5. NO  ➔ GO TO E8c

E8b. How long after that did (he/she) die?  (RECORD NUMBER OR MARK BOX)

NO WARNING/MINUTES

OR  OR  OR  OR  OR
#HRS  #DAYS  #WKS  #MOS  #YRS

E8c. Before the (accident/suicide/murder) did (he/she) have any serious ongoing health problems?

1. YES  5. NO

NEXT PAGE, NEXT PAGE, E9  E11

E8d. How long before your (husband's/wife's) death did you realize that (he/she) was going to die?  (RECORD NUMBER OR MARK BOX)

NO WARNING/MINUTES

OR  OR  OR  OR  OR
#HRS  #DAYS  #WKS  #MOS  #YRS

E8e. Was the cause of (his/her) death an ongoing condition that you knew about before, or did you only learn about it for the first time shortly before (he/she) died?

1. ONGOING  2. FIRST TIME

NEXT PAGE, E9

E8f. Did (he/she) have any serious ongoing health problems?

1. YES  5. NO

NEXT PAGE, NEXT PAGE, E9  E11
E9. Did you yourself provide physical care to your (husband/wife) in the 6 months before (he/she) died? By physical care we mean helping (him/her) with eating, bathing, dressing, taking medicine and other such things.

1. YES --->GO TO E10

E9a. During the last 3 months of (his/her) life, about how many hours a day did you spend providing physical care for your (husband/wife)? Less than 1 hour, 1 to 2 hours, 3 to 4 hours, 5 to 8 hours, or more than 8 hours a day?

1. LESS THAN 1 HOUR
2. 1-2 HOURS
3. 3-4 HOURS
4. 5-8 HOURS
5. MORE THAN 8 HOURS

E9b. For how many weeks, months, or years did you provide such care?

# WEEKS OR # MONTHS OR # YEARS

E10. While your (husband/wife) was ill, did you ever go through a period of grief or intense sadness over the thought of losing (him/her)? Would you say no, never; yes, but rarely; yes, sometimes; or yes, often?

1. NO, NEVER
2. YES, BUT RARELY
3. YES, SOMETIMES
4. YES, OFTEN

E11. INTERVIEWER CHECKPOINT

SEE E3

1. R WIDOWED WITHIN LAST 3 MONTHS--->TURN TO P. 18, SECTION F
2. ALL OTHERS (WIDOWED 1986-1993)

E12. How would you describe how much you have recovered from your (husband’s/wife’s) death—would you say you have recovered completely, almost completely, fairly much, somewhat, or not much?

1. COMPLETELY
2. ALMOST COMPLETELY
3. FAIRLY MUCH
4. SOMEWHAT
5. NOT MUCH

E12a. How many months or years did it take you after your (husband’s/wife’s) death to recover from this loss?

______ MONTHS OR _______ YEARS
E13. INTERVIEWER CHECKPOINT

SEE E12a.

1. R RECOVERED COMPLETELY OR ALMOST COMPLETELY IN 6 MONTHS OR LESS
2. ALL OTHERS--->GO TO E15

E14. People react to the loss of their husband or wife in different ways. At any time during the first few months after (his/her) death, did you go through a period of grief or intense sadness over the loss of your (husband/wife)? Would you say no, never; yes, but rarely; yes, sometimes; or yes, often?

1. NO, NEVER
2. YES, BUT RARELY
3. YES, SOMETIMES
4. YES, OFTEN

E15. Some people have said that they find themselves searching to make sense or find some meaning in their loved one’s death. Have you ever done this since your (husband’s/wife’s) death? Would you say no, never; yes, but rarely; sometimes; frequently; or all the time?

1. NO, NEVER
2. YES, BUT RARELY
3. YES, SOMETIMES
4. YES, FREQUENTLY
5. YES, ALL THE TIME

E15a. Have you done this during the last 3 months--(no, never; yes, but rarely; sometimes; frequently; or all the time)?

1. NO, NEVER
2. YES, BUT RARELY
3. YES, SOMETIMES
4. YES, FREQUENTLY
5. YES, ALL THE TIME

E16. Have you made any sense or found any meaning in your (husband’s/wife’s) death? Would you say no, not at all; yes, a little; yes, some; yes, quite a bit; or yes, a great deal?

1. NO, NOT AT ALL
2. YES, A LITTLE
3. YES, SOME
4. YES, QUITE A BIT
5. YES, A GREAT DEAL
E17. (RB, P. 9) Even some people who feel they have recovered entirely from their loss tell us that thoughts or memories of their (husband/wife) sometimes keep coming back to them.

During the past 3 months, how often have you had thoughts or memories of your late (husband/wife) come into your mind—would you say daily or almost daily, 2 or 3 times a week, about once a week, 2 or 3 times a month, about once a month, less than once a month, or never?

<table>
<thead>
<tr>
<th>1. DAILY OR ALMOST DAILY</th>
<th>2. 2 - 3 TIMES A WEEK</th>
<th>3. ABOUT ONCE A WEEK</th>
<th>4. 2 OR 3 TIMES A MONTH</th>
<th>5. ABOUT ONCE A MONTH</th>
<th>6. LESS THAN ONCE A MONTH</th>
<th>7. NEVER</th>
</tr>
</thead>
</table>

E18. (RB, P. 9) During the past 3 months, how often did you talk about your late (husband/wife)—(would you say daily or almost daily, 2 or 3 times a week, about once a week, 2 or 3 times a month, about once a month, less than once a month, or never?)

<table>
<thead>
<tr>
<th>1. DAILY OR ALMOST DAILY</th>
<th>2. 2 - 3 TIMES A WEEK</th>
<th>3. ABOUT ONCE A WEEK</th>
<th>4. 2 OR 3 TIMES A MONTH</th>
<th>5. ABOUT ONCE A MONTH</th>
<th>6. LESS THAN ONCE A MONTH</th>
<th>7. NEVER</th>
</tr>
</thead>
</table>

E19. INTERVIEWER CHECKPOINT

1. R SAID "NEVER" TO BOTH E17 AND E18—NEXT PAGE, E22
2. ALL OTHERS

E20. How often did (thinking/talking/thinking and talking) about (him/her) make you feel sad or upset—never, rarely, sometimes, often, or almost always?

1. NEVER 2. RARELY 3. SOMETIMES 4. OFTEN 5. ALMOST ALWAYS

E21. During the past 3 months, how often did thinking (or talking) about your late (husband/wife) make you feel happy—never, rarely, sometimes, often, or almost always?

1. NEVER 2. RARELY 3. SOMETIMES 4. OFTEN 5. ALMOST ALWAYS
E22. Some widowed people report that at times, the sadness and loneliness that they experienced right after the death returns to them on particular occasions, such as the date of the (husband's/wife's) death or (his/her) birthday. Has this ever happened to you during the past year—would you say no, never; yes, but rarely; sometimes; frequently; or all the time?

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. NO, NEVER</td>
<td>2. YES, BUT RARELY</td>
<td>3. YES, SOMETIMES</td>
<td>4. YES, FREQUENTLY</td>
<td>5. YES, ALL THE TIME</td>
</tr>
</tbody>
</table>

E22a. When you experience these feelings, how long do they typically last—a few moments, a few hours, a day or so, a few days, or a week or longer?

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

E22b. When you experience these feelings, how intense are they—extremely, quite, somewhat, just a little, or not at all intense?

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. EXTREMELY</td>
<td>2. QUITE</td>
<td>3. SOMEWHAT</td>
<td>4. JUST A LITTLE</td>
<td>5. NOT AT ALL INTENSE</td>
</tr>
</tbody>
</table>

E23. Here is a statement that some widowed people have made about their experience. Please tell me how true you think this statement is as it applies to you now. As a result of having to manage without my (husband/wife), I have become more self-confident. Is this very true, mostly true, somewhat true, or not true at all as it applies to you now?

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. VERY TRUE</td>
<td>2. MOSTLY TRUE</td>
<td>3. SOMETIME TRUE</td>
<td>4. NOT TRUE AT ALL</td>
</tr>
</tbody>
</table>
F1. INTERVIEWER CHECKPOINT

SEE A1 (P. 1)

1. CHILD(REN) 17 OR YOUNGER LIVE IN THE HOUSEHOLD
   □

2. ALL OTHERS-->GO TO F4
   □

The next questions are about the care of children.

F2. About how many hours do you spend in an average week caring for the child(ren) who live(s) here? Would you say less than 10 hours a week, 10 to 19, 20 to 39, or 40 hours or more per week?

1. LESS THAN 10 HOURS
2. 10 - 19 HOURS
3. 20 - 39 HOURS
4. 40 HOURS OR MORE
5. NEVER

GO TO F4

F3. How much do you enjoy caring for (this child/these children)—a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL
2. QUITE A BIT
3. SOME
4. A LITTLE
5. NOT AT ALL

F4. Now I have some questions about work you do to maintain or improve your home, yard, or automobile.

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>F4a. In the last 12 months, did you yourself do any painting, redecorating or repairs on your home?</td>
<td>(1)</td>
<td>(5)</td>
</tr>
<tr>
<td>F4b. Did you yourself do any work in your yard or other areas outside your home? (Please include things like mowing the lawn, weeding plants, or removing snow.)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F4c. Did you yourself grow, freeze or can any of your own food during the last 12 months?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F4d. Did you yourself do any repairs or upkeep on a car or truck that you own?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
F5. INTERVIEWER CHECKPOINT

☐ 1. R DID SOME MAINTENANCE/IMPROVEMENT WORK (ONE OR MORE "YES" AT F4)

☐ 2. ALL OTHERS--->GO TO F8

F6. (RB, P. 10) Altogether, how many hours did you spend doing these things during the last 12 months? Would you say less than 20 hours, 20 to 39, 40 to 79, 80 to 159, or 160 hours or more?

1. LESS THAN 20 HOURS
2. 20-39 HOURS
3. 40-79 HOURS
4. 80-159 HOURS
5. 160 HOURS OR MORE

F7. How much did you enjoy doing that work--did you enjoy it a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL
2. QUITE A BIT
3. SOME
4. A LITTLE
5. NOT AT ALL

F8. Now let's talk about housework, including cooking and cleaning and doing other work around the house.

|^|YES|NO|
---|---|---|
F8a. Do you prepare food for meals or wash dishes? | | |
F8b. Do you do grocery shopping? | | |
F8c. Do you clean or vacuum? | | |
F8d. Do you do laundry? | | |
F8e. Do you sew or mend? | | |

F9. INTERVIEWER CHECKPOINT

☐ 1. R DOES SOME HOUSEWORK (ONE OR MORE "YES" AT F8)

☐ 2. ALL OTHERS--->NEXT PAGE, SECTION G

F10 Altogether, about how many hours do you spend doing these things in an average week?

_________________ HOURS PER WEEK

F11. How much do you enjoy doing housework--do you enjoy it--a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL
2. QUITE A BIT
3. SOME
4. A LITTLE
5. NOT AT ALL
SECTION G: HEALTH AND LIMITATION OF ACTIVITIES

G1. The next questions are about your health. In general, how satisfied are you with your health—
   completely, very, somewhat, not very, or not at all satisfied?

   1. COMPLETELY SATISFIED  2. VERY SATISFIED  3. SOMEWHAT SATISFIED  4. NOT VERY SATISFIED  5. NOT AT ALL SATISFIED

(THERE IS NO G2 IN THIS QUESTIONNAIRE.)

G3. We’d like to know if you have experienced any of the following health problems during the last 12 months.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. G3a. Have you had arthritis or rheumatism?</td>
<td>(1)</td>
</tr>
<tr>
<td>2. G3b. During the last 12 months, have you had a lung disease?</td>
<td></td>
</tr>
<tr>
<td>3. G3c. Have you had hypertension, sometimes called high blood pressure, or have you taken medication for it?</td>
<td></td>
</tr>
<tr>
<td>4. G3d. Have you had a heart attack or other heart trouble during the last 12 months?</td>
<td></td>
</tr>
<tr>
<td>5. G3e. Have you had diabetes or high blood sugar, or have you taken medication for it?</td>
<td></td>
</tr>
<tr>
<td>6. G3f. During the last 12 months, have you had foot problems, such as problems with circulation, corns or callouses?</td>
<td></td>
</tr>
<tr>
<td>7. G3g. Have you had a stroke?</td>
<td></td>
</tr>
<tr>
<td>8. G3h. (Have you had) any broken or fractured bones during the last 12 months?</td>
<td></td>
</tr>
<tr>
<td>9. G3j. Have you lost any amount of urine beyond your control?</td>
<td></td>
</tr>
</tbody>
</table>

G4. During the last 12 months, have you had cancer or a malignant tumor of any kind, or have you received treatment for it?

   1. YES  5. NO --->NEXT PAGE, G5

   G4a. What kind of cancer or malignant tumor did you have? (In what part of your body did it start?)

   TYPE OF CANCER

   |
   |----|
   | 1. |
   | 2. |
   | 3. |
   | 4. |
   | 5. |
G5. During the last 12 months, have you had any major health problems that I haven't asked you about?

1. YES  
5. NO ---GO TO G6

G5a. What are they? (DO NOT PROBE "AO")

G6. Are you currently in bed or in a chair for most or all of the day because of your health?

1. YES  
5. NO

G7. Do you currently have any difficulty bathing by yourself?

1. YES  
5. NO ---GO TO G8

G7a. How much difficulty do you have bathing by yourself—a little, some, a lot, or can't you do this on your own?

1. A LITTLE  2. SOME  3. A LOT  4. CANNOT DO

G8. INTERVIEWER CHECKPOINT

☐ 1. R ANSWERED "YES" TO G6--->NEXT PAGE, G13
☐ 2. ALL OTHERS

G9. Do you currently have any difficulty climbing a few flights of stairs because of your health?

1. YES  3. VOLUNTEERED: AGE IS ONLY LIMITATION  
5. NO ---NEXT PAGE, G10

G9a. How much difficulty do you have—a little, some, a lot, or can't you do this at all?

1. A LITTLE  2. SOME  3. A LOT  4. CANNOT DO

G10. Do you currently have any difficulty walking several blocks because of your health?

1. YES  3. VOLUNTEERED: AGE IS ONLY LIMITATION  
5. NO ---GO TO G11

G10a. How much difficulty do you have—a little, some, a lot, or can't you do this at all?
G11. INTERVIEWER CHECKPOINT

1. R ANSWERED "A LOT" OR "CANNOT DO" TO EITHER G9a OR G10a--GO TO G13
2. ALL OTHERS

G12. Would you currently have any difficulty doing heavy work around the house such as shoveling snow or washing walls, because of your health?

1. YES 3. VOLUNTEERED: AGE IS ONLY LIMITATION 5. NO--GO TO G13

G12a. How much difficulty would you have--a little, some, a lot, or couldn't you do this at all?

1. A LITTLE 2. SOME 3. A LOT 4. COULD NOT DO

G13. How would you rate your health at the present time? Would you say it is excellent, very good, good, fair, or poor?

1. EXCELLENT 2. VERY GOOD 3. GOOD 4. FAIR 5. POOR

G14. How much are your daily activities limited in any way by your health or health-related problems--a great deal, quite a bit, some, a little, or not at all?

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL
G15. The next questions are about your use of health care services. Have you been a patient in a hospital, overnight or longer, at any time during the past 6 months?

1. YES  
5. NO --->GO TO G16

G15a. How many nights were you a hospital patient during the past 6 months?

__________________ NIGHTS

G16. Have you been a resident or patient in a nursing home at any time since (MONTH OF IW, 1989 OR 1986)?

1. YES  
5. NO --->GO TO G17

G16a. How long were you in the nursing home?

# DAYS OR # WEEKS OR # MONTHS OR # YEARS

G17. The next questions refer to the last 3 months. (Aside from days spent in the hospital or nursing home) Did illness or injury or just not feeling well ever keep you in bed all or most of the day during the past 3 months?

1. YES  
5. NO --->GO TO G18

G17a. On about how many days during the past 3 months did you stay in bed all or most of the day?

__________________ DAYS

G18. (Other than when you were in the hospital or nursing home) Have you seen a medical doctor during the past 3 months?

1. YES  
5. NO --->GO TO G19

G18a. How many times have you seen a medical doctor in the past 3 months (other than when you were in the hospital or nursing home)?

__________________ TIMES
G19. During the past 3 months have you seen somebody for a personal or mental problem--someone like a psychiatrist, psychologist, medical doctor, clergy or social worker?

1. YES  5. NO  --->GO TO G20

G19a. How many times in the past 3 months have you seen any of these professionals about a personal or mental health problem?

______________ TIMES

G20. Are you now covered by a health insurance plan or a health maintenance organization?

1. YES  5. NO

G21. About how much do you weigh?

LBS  (ACCEPT A RANGE)

G22. Do you smoke cigarettes now?

1. YES  5. NO  --->NEXT PAGE, G23

G22a. On the average, how many cigarettes or packs do you usually smoke in a day?

(CIGARETTES  OR   ___________ PACKS  (ACCEPT A RANGE)
G23. Do you ever drink alcoholic beverages such as beer, wine, or liquor?

1. YES  5. NO --->GO TO G24

G23a. During the last month, on how many days did you drink beer, wine or liquor?

_______DAYS/MONTH OR _______DAYS/WEEK

G23b. On days that you drink, how many cans of beer, glasses of wine, or drinks of liquor do you usually have?

______CANS/GLASSES/DRINKS PER DAY WHEN DRINK

G23. During the last month, on how many days did you drink beer, wine, or liquor?

_______DAYS/MONTH OR _______DAYS/WEEK

G23b. On days that you drink, how many cans of beer, glasses of wine, or drinks of liquor do you usually have?

______CANS/GLASSES/DRINKS PER DAY WHEN DRINK

G24. In the past, have you ever regularly drunk alcoholic beverages such as beer, wine or liquor?

1. YES  5. NO --->NEXT PAGE, SECTION H

G24a. How old were you when you stopped? _______YEARS

G24b. Did you stop because your drinking was causing problems for your health; or causing other problems in your life; or for another reason? (CHECK ALL THAT APPLY)

1. CAUSING PROBLEMS  2. CAUSING PROBLEMS  7. OTHER
   FOR HEALTH       IN LIFE       REASON(S)
H1. I'm going to read you a list of statements describing how people sometimes feel. After each statement, indicate how often you felt that way during the past week. The best answer is usually the one that comes to your mind first. Here's the first statement.

<table>
<thead>
<tr>
<th></th>
<th>NEVER OR HARDLY EVER (1)</th>
<th>SOME OF THE TIME (2)</th>
<th>MOST OF THE TIME (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>H1a.</td>
<td>I felt depressed--How often have you felt that way during the past week--never or hardly ever, some of the time, or most of the time.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1b.</td>
<td>Here's the next statement. I felt that everything I did was an effort. (How often have you felt that way during the past week--never or hardly ever, some of the time, or most of the time?)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1c.</td>
<td>My sleep was restless.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1d.</td>
<td>I was happy.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1e.</td>
<td>I felt lonely.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1f.</td>
<td>People were unfriendly. (How often have you felt that way during the past week--never or hardly ever, some of the time, or most of the time?)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1g.</td>
<td>I enjoyed life.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1h.</td>
<td>I did not feel like eating. My appetite was poor.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1i.</td>
<td>I felt sad.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1j.</td>
<td>I felt that people disliked me.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H1k.</td>
<td>I could not get &quot;going&quot;.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
H2. Now, thinking about all the feelings you just rated, was last week **better** than usual, **about the same**, or **worse** than usual?

1. BETTER

3. ABOUT THE SAME

5. WORSE

GO TO H3

H2a. Was last week a **lot** better, **somewhat** better, or only a **little** better than usual?

1. A LOT

2. SOME-

3. A LITTLE

H2b. Was last week a **lot** worse, **somewhat** worse, or only a **little** worse than usual?

1. A LOT

2. SOME-

3. A LITTLE

H3. Since we last interviewed you in (MONTH OF IW, 1989 OR 1986) have you ever had a time that lasted an entire week or more when you felt sad, blue, or depressed most of the time, or when you lost all interest and pleasure in things you usually care about or enjoy?

1. YES

5. NO

---NEXT PAGE, SECTION J

H3a. In what month and year did that happen (most recently)?

MONTH / YEAR
SECTION J: PAID EMPLOYMENT

J1. We would like to know about what you do. (READ SLOWLY) Are you working now for pay, looking for work, retired from a paid job, keeping house, a student or something else? (CHECK ALL THAT APPLY)

1. WORKING NOW
2. ONLY TEMPORARILY LAID OFF; SICK OR MATERNITY LEAVE
3. UNPAID FAMILY WORKER
4. LOOKING FOR WORK, UNEMPLOYED
5. RETIRED FROM A PAID JOB
6. PERMANENTLY DISABLED
7. KEEPING HOUSE
8. STUDENT
9. OTHER (SPECIFY):

J2. Are you doing any work for pay at the present time?

1. YES

GO TO J3

5. NO

J2a. Would you like to be working for pay?

1. YES

5. NO ---> TURN TO P. 31, J18

J2b. If you could work any number of hours you wanted to, how many hours would you like to work for pay each week?

HOURS/WEEK

TURN TO P. 31, J18

J3. Including paid vacations and sick leave, how many weeks altogether were you employed during the past 12 months?

WEEKS IN LAST 12 MONTHS OR FROM / TO /
J4. How long have you worked at your present job or position?

<table>
<thead>
<tr>
<th># WEEKS</th>
<th>OR</th>
<th># MONTHS</th>
<th>OR</th>
<th># YEARS</th>
</tr>
</thead>
</table>

J5. INTERVIEWER CHECKPOINT

☐ 1. R EMPLOYED AT PRESENT JOB/POSITION 8 YEARS OR LONGER—NEXT PAGE, J11

☐ 2. ALL OTHERS

J5a. Have you been working at this same job since [MONTH OF IW, 1989 OR 1986]?

☐ 1. YES

☐ 5. NO

J6. What is your occupation on your main job now? What sort of work do you do?

____________________________________________________________________________________

J7. What are your most important activities or duties?

____________________________________________________________________________________

J8. What kind of business or industry is that in? (PROBE FOR DETAILED INFORMATION ABOUT THE PRODUCT, MADE WHERE R WORKS, OR THE KIND OF SERVICE PROVIDED; e.g., What do they make or do where you work?)

____________________________________________________________________________________

J9. Are you self-employed, or do you work for a private employer or a municipal, county, state or federal government?

1. SELF-EMPLOYED

2. PRIVATE EMPLOYER

3. GOVERNMENT EMPLOYER

J10. Do you supervise others on your job?

☐ 1. YES

☐ 5. NO
J11. On the average, how many **hours a week** do you work on this job, including paid and unpaid overtime?

\[\text{HOURS PER WEEK}\]

J12. How much do you earn **now** from this job before taxes?

\[\text{\$ PER }\]

J13. How much do you enjoy doing that kind of work—do you enjoy it **a great deal**, **quite a bit**, **some**, **a little**, or **not at all**?

1. A GREAT DEAL 2. QUITE A BIT 3. SOME 4. A LITTLE 5. NOT AT ALL

J14. In general, how often do you feel bothered or upset in your work—**almost always**, **often**, **sometimes**, **rarely**, or **never**?

1. ALMOST ALWAYS 2. OFTEN 3. SOMETIMES 4. RARELY 5. NEVER

J15. How satisfied are you with your job—**completely**, **very**, **somewhat**, **not very** or **not at all** satisfied?

1. COMPLETELY SATISFIED 2. VERY SATISFIED 3. SOMEWHAT SATISFIED 4. NOT VERY SATISFIED 5. NOT AT ALL SATISFIED
J16. Thinking about your job or jobs over the past year, would you have liked to work more?

1. YES 5. NO  

---

J16a. Would you have liked to work less?

1. YES 5. NO  

---

J16b. If you could work any number of hours you wanted to, how many hours would you like to work each week? HOURS

---

NEXT PAGE, J22

J17. INTERVIEWER CHECKPOINT

SEE J1 (P. 28)

1. "RETIRED" IS CHECKED AT J1 (BOX 5)

2. ALL OTHERS

J17a. Have you ever held a regular job for pay?

1. YES 5. NO  

---

NEXT PAGE, J22

J18. Now please think about the last regular job you had (before retirement/stopping work). In what year did you stop working on that job? (IF DK, ASK FOR ESTIMATE)


YEAR:

---

NEXT PAGE, J22

J18a. In what month was that? (IF DK, PROBE FOR SEASON OR HALF OF YEAR)

---

MONTH

---

NEXT PAGE, J22

J19. People (retire/leave a paid job) for many reasons. What are the reasons you (retired/left your last job)? (PROBE: Were there any other reasons?)
J20. How much choice did you have in deciding to (retire/stop working on that job)? Was that **complete choice, a great deal of choice, some choice, or no choice at all**?

1. COMPLETE CHOICE  
2. A GREAT DEAL OF CHOICE  
3. SOME CHOICE  
4. NO CHOICE AT ALL

J21. Did you leave that job **earlier, later, or just about the time** you wanted to?

1. EARLIER  
2. LATER  
3. JUST ABOUT RIGHT

J22. People often pay each other to do work or chores instead of going to regular businesses. **During the past 12 months**, were you paid to do any work of this sort that was not part of a regular job?

1. YES  
5. NO  \(\rightarrow\) GO TO J25

J23. (RB, P. 10) Altogether, about **how many hours** did you spend doing paid work that was not part of a regular job during the past 12 months? Would you say less than 20 hours, 20 to 39, 40 to 79, 80 to 159, or 160 hours or more?

1. LESS THAN 20 HOURS  
2. 20-39 HOURS  
3. 40-79 HOURS  
4. 80-159 HOURS  
5. 160 HOURS OR MORE

J24. How much did you enjoy doing this work? Would you say you enjoyed it a **great deal, quite a bit, some, a little, or not at all**?

1. A GREAT DEAL  
2. QUITE A BIT  
3. SOME  
4. A LITTLE  
5. NOT AT ALL

J25. Some people work in situations where workers have health problems such as skin or eye irritation, breathing difficulties, accidents or even cancers because of unsafe working conditions or exposure to things like radiation, hazardous chemicals or waste, or polluted air, water or soil? Thinking of all the work you have done for pay over your life, have you ever worked in a situation like this?

1. YES  
5. NO  \(\rightarrow\) NEXT PAGE, SECTION K

J25a. Over your life about how many years have you worked in situations like that?

YEARS OR 96. ALL MY LIFE  
(ACCEPT A RANGE)
**SECTION K: VOLUNTARY ACTIVITY**

▲ **K1.** Now let's talk about volunteer work you may have done during the last 12 months.

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>K1a. Did you do volunteer work in the last 12 months for a church, synagogue or other religious organization?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K1b. Did you do volunteer work for a school or educational organization?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K1c. Did you do volunteer work for a political group or labor union in the last 12 months?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K1d. Did you do work for a senior citizen group or related organization?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K1e. In the last 12 months, did you do volunteer work for any other national or local organization, including United Fund, hospitals, and the like?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>1. respondent did volunteer work (one or more &quot;yes&quot; to k1)</th>
<th>2. all others --&gt; next page, k5</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**K2.** [INTERVIEWER CHECKPOINT]

1. [ ] RESPONDENT DID VOLUNTEER WORK (ONE OR MORE "YES" TO K1)
2. [ ] ALL OTHERS --> NEXT PAGE, K5

**K3.** (RB, P. 10) Altogether, about how many hours did you spend on volunteer work of (this kind/these kinds) during the last 12 months? Would you say **less than 20 hours, 20 to 39, 40 to 79, 80 to 159, or 160 hours or more**?

1. **LESS THAN 20**
2. **20 - 39 HOURS**
3. **40 - 79 HOURS**
4. **80 - 159 HOURS**
5. **160 OR MORE HOURS**

**K4.** How much did you enjoy doing that volunteer work--did you enjoy it **a great deal, quite a bit, some, a little, or not at all**?

1. **A GREAT DEAL**
2. **QUITE A BIT**
3. **SOME**
4. **A LITTLE**
5. **NOT AT ALL**
A K5. Now I have a few questions about help you may have given in the last year to friends, neighbors, or relatives who did not live with you. We are interested in help you provided during the last 12 months for which you did not receive pay.

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>K5a. During the last 12 months, did you provide transportation, shop or run errands for friends, neighbors or relatives who did not live with you?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K5b. Did you help others with their housework or with the upkeep of their house, car or other things?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K5c. In the last 12 months, did you do childcare without pay for persons not living in your household?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K5d. Did you do any other things in the last 12 months to help neighbors, friends or relatives who did not live with you?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

K6. INTERVIEWER CHECKPOINT

- [ ] 1. GAVE HELP TO RELATIVES, FRIENDS, OR NEIGHBORS (1 OR MORE YES" TO K5)
- [ ] 2. ALL OTHERS-->NEXT PAGE, K9

K7. (RB, P. 10) Altogether, about how many hours did you spend doing these things during the last 12 months? Would you say less than 20 hours, 20 to 39, 40 to 79, 80 to 159, or 160 hours or more?

<table>
<thead>
<tr>
<th>1. LESS THAN 20 HOURS</th>
<th>2. 20 - 39 HOURS</th>
<th>3. 40 - 79 HOURS</th>
<th>4. 80 - 159 HOURS</th>
<th>5. 160 OR MORE HOURS</th>
</tr>
</thead>
</table>

K8. How much did you enjoy helping friends, neighbors, and relatives—a great deal, quite a bit, some, a little, or not at all?

<table>
<thead>
<tr>
<th>1. A GREAT DEAL</th>
<th>2. QUITE A BIT</th>
<th>3. SOME</th>
<th>4. A LITTLE</th>
<th>5. NOT AT ALL</th>
</tr>
</thead>
</table>
K9. Now I would like to talk with you about friends and relatives who have trouble taking care of themselves because of physical or mental illness, disability, or for some other reason. In the last 12 months have you been involved in helping someone like this by caring for them directly or arranging for their care by others?

1. YES
5. NO -- NEXT PAGE, SECTION L

K9a. (RB, P. 10) About how many hours did you spend doing this in the past 12 months? Would you say less than 20 hours, 20 to 39, 40 to 79, 80 to 159, or 160 hours or more?

1. LESS THAN 20 HOURS
2. 20-39 HOURS
3. 40-79 HOURS
4. 80-159 HOURS
5. 160 HOURS OR MORE

K9b. How stressful is it for you to take care of the person or to arrange for their care? Is it very stressful, quite, somewhat, not too, or not at all stressful?

1. VERY STRESSFUL
2. QUITE STRESSFUL
3. SOMEWHAT STRESSFUL
4. NOT TOO STRESSFUL
5. NOT AT ALL STRESSFUL
Now I'd like to ask some questions dealing with memory. Even people with very good memories seem to forget some of these things from time to time. These are routine questions we ask everyone.

L1. What is the date today--month, day and year? (WRITE OUT MONTH)

MONTH / DAY / YEAR

L1a. IWER MARK, ANSWER IS: 1. CORRECT 2. INCORRECT

L2. What day of the week is it?

1. MON 2. TUE 3. WED 4. THURS 5. FRI 6. SAT 7. SUN

L2a. IWER MARK, ANSWER IS: 1. CORRECT 2. INCORRECT

L3. What was your mother's maiden name--just her last name?

MOTHER'S MAIDEN NAME

L3a. IWER MARK, ANSWER IS:

1. DIFFERENT NAME FROM R  2. SAME NAME AS R  3. DK/NO ANSWER

L4. What is the name of the president of the United States?

CURRENT PRESIDENT

L4a. (CORRECT ANSWER IS CLINTON) IWER MARK, ANSWER IS:

1. CORRECT 2. INCORRECT 3. R CLEARLY KNOWS CLINTON BUT WILL NOT SAY NAME, OR USES NICKNAME
L5. What is the name of the person who was president just before him?

PREVIOUS PRESIDENT

L5a. (CORRECT ANSWER IS BUSH) IWER MARK, ANSWER IS:

1. CORRECT  2. INCORRECT  3. R CLEARLY KNOWS BUSH BUT WILL NOT SAY NAME, OR USES NICKNAME

L6. Please subtract 3 from 20 and tell me the number you get. (PAUSE AND RECORD) Now, keep subtracting 3 from this number and tell me each new number you get. (INTERVIEWER: RECORD ANSWERS STARTING AT "A". STOP WHEN THE ANSWER IS 2 OR LESS.)

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
</tr>
</thead>
</table>

L6a. (CORRECT ANSWER IS 17, 14, 11, 8, 5, 2) IWER MARK, ANSWER IS:

1. CORRECT  2. INCORRECT

NOTE: THERE IS NO SECTION M
GO TO SECTION N
Next, I have some questions about experiences you may have had since we interviewed you last in (MONTH OF IW, 1989 OR 1986).

N1. Since we interviewed you in (MONTH OF IW, 1989 OR 1986) have you moved to a new residence?

1. YES  
5. NO --> NEXT PAGE, N2

N1a. In what year did that happen most recently? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


N1b. In what month was that? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

MONTH
N2. Were you robbed or was your home burglarized since (MONTH OF IW, 1989 OR 1986)?

1. YES

5. NO ---> GO TO N3

N2a. In what year did that happen most recently? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


GO TO N3

N2b. And in what month did it happen? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

N3. Have you involuntarily lost a job for reasons other than retirement since (MONTH OF IW, 1989 OR 1986)?

1. YES

5. NO ---> NEXT PAGE, N4

N3a. In what year did that last happen? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


GO TO N3c

N3b. In what month did it happen? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

N3c. Was this job loss totally unexpected or did you expect it for some time?

1. UNEXPECTED

2. EXPECTED IT
N4. Have you been the victim of a serious physical attack or assault since (MONTH OF IW, 1989 OR 1986)?

1. YES  
5. NO  \(\rightarrow\) GO TO N5

N4a. In what year was the most recent occurrence? (IF DK, OBTAIN BEST ESTIMATE)


N4b. In what month did it happen? (IF DK, PROBE FOR SEASON OR HALF OF YEAR.)

N5. Has a parent or step-parent of yours died since (MONTH OF IW, 1989 OR 1986)?

1. YES  
5. NO  \(\rightarrow\) NEXT PAGE, N6

N5a. Who died since then? (CHECK ALL THAT APPLY)

1. MOTHER  2. STEP-MOTHER  3. FATHER  4. STEP-FATHER

N5b. (IF 1 ONLY:) In what year did (he/she) die?

(IF 2 OR MORE:) In what year did this happen most recently? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


N5c. In what month did it happen? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

MONTH
N6. Since (MONTH OF IW, 1989 OR 1986), have you had a life-threatening illness or accidental injury?

1. YES

5. NO ---GO TO N7

N6a. In what year did that happen most recently? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


GO TO N7

N6b. And in what month did it happen? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

---------MONTH

N7. Since (MONTH OF IW, 1989 OR 1986), have you had any serious, but not life-threatening illness or injury that occurred or got worse?

1. YES

5. NO ---NEXT PAGE, N8

N7a. In what year did that happen most recently? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


NEXT PAGE, N8

N7b. In what month did it happen? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

---------MONTH
N8. Have you gotten a divorce since (MONTH OF IW, 1989 OR 1986)?

1. YES  
   5. NO ---> GG TO N9

N8a. In what year did you and your (ex-husband/ex-wife) live together for the last time? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


   GO TO N8c

N8b. In what month? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

   MONTH

   GO TO N9

N8c. In what year did this divorce become official?


   GO TO N9

N8d. In what month? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

   MONTH


1. YES  
   5. NO ---> NEXT PAGE, N10

N9a. In what year did that happen (most recently)? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


   GO TO N9c

N9b. In what month did it happen? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

   MONTH

N9c. Was it a son or daughter who died?

1. SON  2. DAUGHTER

N9d. How old was (he/she) when it happened?

YEARS OLD

N9e. Was (his/her) death totally unexpected or did you expect it for some time?

1. UNEXPECTED  2. EXPECTED IT
N10. Other than a spouse, parent or child, has a close relative or one of your close friends died since we interviewed you in (MONTH OF IW, 1989 OR 1986)--someone you felt you could call on for advice or help if you needed it?

1. YES

5. NO --> GO TO N11

N10a. In what year did that happen most recently? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


GO TO N11

N10b. In what month was that? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

MONTH

N11. Since (MONTH OF IW, 1989 OR 1986) have you had any serious financial problems or difficulties?

1. YES

5. NO --> NEXT PAGE, N12

N11a. In what year did that happen most recently? (IF DON'T KNOW, OBTAIN BEST ESTIMATE)


GO TO N11c

N11b. And in what month did it happen? (IF DON'T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

MONTH

N11c. Was this problem totally unexpected or did you expect it for some time?

1. UNEXPECTED

2. EXPECTED IT
N12. Again, since we last interviewed you in (MONTH OF IW, 1989 OR 1986) has anything (else) bad happened to you that upset you a lot and that you haven’t already told me about?

1. YES

5. NO --> NEXT PAGE, N13

N12a. What was the most upsetting thing that happened that you haven’t already told me about?

________________________________________________________________________

________________________________________________________________________

N12b. In what year did that happen? (IF DON’T KNOW, OBTAIN BEST ESTIMATE)


NEXT PAGE, N13

N12c. What month was that? (IF DON’T KNOW, PROBE FOR SEASON OR HALF OF YEAR.)

_________________________________ MONTH
N13. Now thinking over your whole life, have you ever been treated unfairly or badly because of your race or ethnicity?

1. YES  5. NO  --> NEXT PAGE, SECTION P

N13a. How often have you been treated unfairly or badly because of your race or ethnicity?

1. OFTEN  2. SOMETIMES  3. RARELY

N13b. In what year did that happen most recently?

YEAR

N13c. What happened?

__________________________

__________________________

N13d. How stressful was this experience for you—was it very stressful, quite stressful, somewhat stressful, or not at all stressful?

1. VERY  2. QUITE  3. SOMewhat  4. NOT AT ALL

N13e. How did you respond to this experience? Did you accept it as a fact of life or did you try to do something about it?

1. ACCEPT IT AS A FACT OF LIFE  2. TRY TO DO SOMETHING ABOUT IT

N13f. Did you talk to other people about the experience or did you keep it to yourself?

1. TALK TO OTHER PEOPLE ABOUT IT  2. KEEP IT TO YOURSELF
SECTION P: WORLD VIEWS AND RELIGION

Please tell me how strongly you agree or disagree with each of the following statements. The best answer is usually the one that comes to mind first.

P1a. People die when it is their time to die, and nothing can change that. Do you agree strongly, agree somewhat, disagree somewhat, or disagree strongly?

<table>
<thead>
<tr>
<th>AGREE STRONGLY</th>
<th>AGREE SOMEWHAT</th>
<th>DISAGREE SOMEWHAT</th>
<th>DISAGREE STRONGLY</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

P1b. If bad things happen, it is because they were meant to be.

P2. How often do you usually attend religious services? Would you say more than once a week, once a week, 2 or 3 times a month, about once a month, less than once a month, or never?

1. MORE THAN ONCE A WEEK  2. ONCE A WEEK  3. 2 OR 3 TIMES A MONTH  4. ABOUT ONCE A MONTH  5. LESS THAN ONCE A MONTH  6. NEVER

P3. In general, how important are religious or spiritual beliefs in your day-to-day life? Would you say very important, fairly important, not too important, or not at all important?

1. VERY IMPORTANT  2. FAIRLY IMPORTANT  3. NOT TOO IMPORTANT  4. NOT AT ALL IMPORTANT
SECTION Q: DEMOGRAPHICS

Now I have a few questions about your background and personal characteristics.

Q1. INTERVIEWER CHECKPOINT

SEE C1 (P. 6)

1. R IS CURRENTLY MARRIED
2. ALL OTHERS ----> TURN TO P. 49, Q7

Q2. We are also interested in your (husband's/wife's) present work situation. Is (he/she) working for pay at the present time, looking for work, retired, or doing something else? (IF MORE THAN ONE, PROBE: Which best describes (his/her) current situation?)

1. WORKING NOW; ON SICK LEAVE
2. TEMPORARILY LAID OFF WORK
3. RETIRED
4. LOOKING FOR WORK, UNEMPLOYED
5. PERMANENTLY DISABLED
6. KEEPING HOUSE
7. STUDENT
8. OTHER (SPECIFY):

Q2a. How many hours does (he/she) work in an average week?

_____ HOURS

NEXT PAGE, Q3
Q3. **INTERVIEWER CHECKPOINT**

SEE C1 AND C1a AND SAMPLE ADDRESS LABEL

1. R got married **after** date of last interview
2. All others...-> go to Q7

Q4. What is the month, day, and year of your (husband's/wife's) birth?

___/___/___

MONTH  DAY  YEAR

Q5. In what state or foreign country was (he/she) born?

__STATE (OR COUNTRY IF NOT USA)___

Q6. What is the highest grade of school or year of college your (husband/wife) completed?

Grades of School

<table>
<thead>
<tr>
<th>00</th>
<th>01</th>
<th>02</th>
<th>03</th>
<th>04</th>
<th>05</th>
<th>06</th>
<th>07</th>
<th>08</th>
<th>09</th>
<th>10</th>
<th>11</th>
<th>12</th>
</tr>
</thead>
</table>

College

<table>
<thead>
<tr>
<th>13</th>
<th>14</th>
<th>15</th>
<th>16</th>
<th>17+</th>
</tr>
</thead>
</table>

Q6a. Did (he/she) get a high school diploma or pass a high school equivalency test?

1. YES  5. NO

Q6b. Does (he/she) have a bachelor's degree?

1. YES  5. NO
Q7. Now a few questions about (your/your family's) financial situation. How satisfied are you with (your/your family's) present financial situation—completely, very, somewhat, not very or not at all satisfied?

1. COMPLETELY SATISFIED  2. VERY SATISFIED  3. SOMEWHAT SATISFIED  4. NOT VERY SATISFIED  5. NOT AT ALL SATISFIED

Q8. (RB, P. 11) How difficult is it for (you/your family) to meet the monthly payments on your (family's) bills? Is it extremely difficult, very difficult, somewhat difficult, slightly difficult, or not difficult at all?

1. EXTREMELY DIFFICULT  2. VERY DIFFICULT  3. SOMEWHAT DIFFICULT  4. SLIGHTLY DIFFICULT  5. NOT DIFFICULT AT ALL

Q9. Do you own your own (home/apartment/farm), do you pay rent, or what?

1. OWNS OR IS BUYING  5. PAYS RENT  7. NEITHER OWNS NOR RENTS

Q9a. Do you have a mortgage on this property?

1. YES: MORTGAGE, LAND CONTRACT, OR DEED OF TRUST  5. NO

Q9b. If you sold this (house/apartment/farm) today, how much money would you get for it (after paying off the mortgage)?

$_________________________ AMOUNT R WOULD RECEIVE
Q10. Suppose you needed money quickly, and you cashed in all of your (and your [husband's/wife's]) checking and savings accounts, and any stocks and bonds, and real estate (other than your principal home). If you added up what you would get, would it be $50,000 or more?

1. YES

Q10a. Would it be $100,000 or more?

1. YES
5. NO

Q10b. Would it be $200,000 or more?

1. YES
5. NO

Q10c. Would it be $500,000 or more?

5. NO

Q10d. Would it be $10,000 or more?

1. YES
5. NO

Q10e. Would it be $20,000 or more?

1. YES
5. NO

Q11. In order to get an accurate picture of your (and your [husband's/wife's]) income, it helps to know the different sources of income you [and your (husband/wife)] may have had during the past 12 months. We do not need detailed amounts, just whether you [and your (husband/wife)] have any income from the sources I will mention.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>(5)</td>
</tr>
</tbody>
</table>

Q11a. In the last 12 months, did you (and your [husband/wife]) have any income from wages or salary?

Q11b. Any income from rent, interest, dividends, money market funds or trust funds?

Q11c. Social Security?

Q11d. Veterans benefits or other retirement pay, pensions or annuities?

Q11e. Unemployment compensation, disability or workers' compensation in the last 12 months?

Q11f. Alimony or child support?

Q11g. SSI (Supplemental Security Income)?

Q11h. ADC or AFDC (Aid to Dependent Children) or other welfare or Public Assistance?

Q11i. Food Stamps?

Q11k. Any other sources of income?
Q12. Taking into consideration all sources of income, what was your [and your (husband's/wife's)] total income before taxes in the last 12 months?

$__________

NEXT PAGE, Q13

REFUSED/DON'T KNOW

Q12a. Would you [and your (husband's/wife's)] total income before taxes in the last 12 months be $30,000 or more?

1. YES

5. NO

Q12f. Would it be $15,000 or more?

1. YES

5. NO

Q12h. Would it be $10,000 or more?

1. YES

5. NO

Q12b. Would it be $50,000 or more?

1. YES

Q12c. Would it be $80,000 or more?

1. YES

5. NO

Q12d. Would it be $100,000 or more?

1. YES

5. NO

NEXT PAGE, Q13

Q12e. Would it be $40,000 or more?

1. YES

5. NO

Q12g. Would it be $20,000 or more?

1. YES

5. NO

Q12j. Would it be $25,000 or more?

1. YES

5. NO

NEXT PAGE, Q13

Q12f. Would it be $15,000 or more?

1. YES

5. NO

Q12h. Would it be $10,000 or more?

1. YES

5. NO

Q12k. Would it be $5,000 or more?

1. YES

5. NO

NEXT PAGE, Q13
Q13. This completes the interview. Thank you very much for answering these questions.

Q14. EXACT TIME NOW: ______________

GO TO ___ ON COVERSHEET TO UPDATE/VERIFY ADDRESS PHONE NUMBER AND CONTACT PERSON WITH RESPONDENT

INTERVIEWER

REMEMBER TO COMPLETE THE OBSERVATION SECTION OF THIS INTERVIEW AND THE ADDRESS AND CONTACT INFORMATION ON THE COVERSHEET BEFORE SENDING IT IN TO THE FIELD OFFICE
SECTION X: INTERVIEWER’S OBSERVATIONS

X1. Interview taken:
   1. FACE TO FACE  2. BY TELEPHONE

X2. Interview conducted in:
   1. ENGLISH  2. SPANISH  3. OTHER SPECIFY:

X3. How was R’s understanding of the questions?
   1. EXCELLENT  2. GOOD  3. FAIR  4. POOR

X4. How was R’s cooperation during the interview?
   1. EXCELLENT  2. GOOD  3. FAIR  4. POOR

X5. How tiring did the interview seem to be to R?
   1. VERY TIRING  2. A LITTLE TIRING  3. NOT TIRING

X6. How much did R seem to enjoy the interview?
   1. A GREAT DEAL  2. QUITE A BIT  3. SOME  4. A LITTLE  5. NOT AT ALL

X7. How much difficulty did R have remembering things that you asked (him/her) about?
   1. NO DIFFICULTY  2. A LITTLE DIFFICULTY  3. SOME DIFFICULTY  4. A LOT OF DIFFICULTY  5. COULD NOT DO AT ALL
X8. How much difficulty did R have hearing you when you talked to (him/her)?

1. NO DIFFICULTY  2. A LITTLE DIFFICULTY  3. SOME DIFFICULTY  4. A LOT OF DIFFICULTY  5. COULD NOT DO AT ALL

X9. On the basis of your experience with R in the interview, how comfortable would you say R is in dealing with other people?

1. NOT AT ALL  2. SLIGHTLY  3. SOMewhat  4. FAIRLY  5. VERY

X10. On the basis of your experience with R in this interview, how skilled would you say R is in handling or dealing with other people?

1. NOT AT ALL  2. SLIGHTLY  3. SOMewhat  4. FAIRLY  5. VERY

X11. How self-confident did R seem to be?

1. VERY  2. QUITE  3. SOME  4. A LITTLE  5. NOT AT ALL

X12. How depressed did R seem to be?

1. VERY  2. QUITE  3. SOME  4. A LITTLE  5. NOT AT ALL

X13. How was R's ability to express him/herself?

1. EXCELLENT  2. GOOD  3. FAIR  4. POOR
X14. THUMBNAIL SKETCH:

CONTINUE ON NEXT PAGE IF NECESSARY

X15. BE SURE TO THOROUGHLY EDIT THIS IW AND ITS COVERSHEET BEFORE MAILING IT TO ANN ARBOR