

WHITE

SN:2126

IF INVALID TRICYCLE

46. Is your tricycle petrol driven, or electrically powered?

Petrol ..... 1  
Electrically powered ..... 2

47. What is the longest journey you have done in your tricycle on any one day?

No. of miles .....

48. Have you ever been inconvenienced by not having a machine while your own tricycle was being repaired or maintained?

Yes ..... 1 - ask (a)  
(b)  
No ..... 2

If Yes (1)

(a) For how long were you without a tricycle?

(b) Why were you not lent another tricycle?

49. Do you find there are any drawbacks because it is only a one-seater?

No ..... X  
Yes (specify drawbacks) ..... X

50. Do you find there are any advantages because it's only a one-seater?

No ..... 4  
Yes (specify advantages) ..... 5

INTRODUCTION - I'd like to go on now to ask you something about the work you have done - but since education and training is tied up with this, can you tell me .....

51. How old were you when you left school (educational establishment) (completed full-time education)?

- Never went to school ..... YY - ask (a)
- Left school aged ..... . 99 - on to next section
- Still at school/university .....

If never went to school (YY)

(a) Why was that? [If private tutor back-code Qn. 51 as age completed full-time education]

52. Did you get any recognised certificates, qualifications or articles?

- Yes ..... I - ask (a)
- No ..... 0

If Yes (X)

(a) What was the highest level at which you qualified?

- University Degree/medical/vet./dental qualns. .... 1
- Full membership of prof. inst. (incl. law, architecture, engineer) ..... 2
- Diploma Technology/Humanities ... .. 3
- Teacher's Training/Cert. of Education ... .. 4
- S.R.N., S.C.M., Social Workers ..... 5
- CODE HND/HNC - (Higher National Dip. or Cert.) ..... 6
- HIGHEST ONLY "A" level - university entrance ... .. 7
- OND/ONC (Ordinary National Dip. or Cert.) ... .. 8
- "O" level - General Schools, Matric. .... 9
- City and Guilds .. .. 10
- R.S.A. or Commercial Certs ..... 11
- Others (describe) ..... 12

53. Did you complete a formal apprenticeship, lasting at least 3 years, in any trade?

- Yes, formal apprenticeship ..... 1
- No, no formal ..... 2

54. Have you had any (other) training/experience on the job, or in the Forces, or in a Training Centre for a skilled or semi-skilled trade?

- Yes ..... 4
- No ..... 5

55. Code from questions 52-54

Has qualifications/training ..... Y
No qualifications/training .. ..... X
and transfer to Qn. 80 page 32

56 Are you at present doing any work for which you are paid  
(any number of hours)?

Working ... .. 1 - go on to Qn.77  
Not working . . . . . 2 - ask (a)

If not working (2)

(a) Why is this?

Retired (incl. permanently disabled over retirement age) . . . . . 3-ask Qn.57

**PROMPT AS NECESSARY** Housewife .. . . . . 4-on to Qn.63  
Page 28

Off sick temporarily/temp disabled ..... 5-on to Qn.67  
Page 30

Unemployed (can work if job available) ..... 6-on to Qn 72  
Page 31

Permanently disabled/unable to work again ... . 7-ask Qn.57

IF RETIRED/PERMANENTLY DISABLED

57. How old were you when you gave up work altogether?

Never worked ..... 0-ask Qn.60

Yrs \_\_\_\_\_

Check back to Qn. 56. If disabled after retirement go on to Qn. 91 next section - otherwise ask Qn.58.

58. What job were you doing then (when you gave up altogether)?  
[Probe as usual on OCCUPATION]

59. Was this the sort of work you had been doing most of your life?

Yes, same sort of work ..... 1  
Did many different jobs ..... 2  
No ..... 3 - ask (a)

If No (3)

(a) Did your (disability) have anything to do with your changing your usual sort of work?

Yes, due to disability ..... Y  
No, other reason ..... X

60. Did your (disability) have anything to do with your giving up work altogether when you did (never having worked)?

Yes ..... 1 - ask (a)  
(b)

No ..... 2

If Yes (1)

(a) Can you tell me why? Was it because there were (would be) difficulties:

- PROMPT
- i) Actually getting to your work place? ..... 3
  - ii) Doing the work itself? . . . . . 4
  - iii) Having to work the number of hours they wanted you to? . . . . . 5
  - add - iv) Any other reason for giving up altogether (not working)? . . . . . 6
- (specify)

Quit for those never worked ..... X

(b) At what age would you have retired if you had your choice?

- After retirement age .... age ..... 1
- Until retirement age . . . . . 2
- Indefinitely, as long as possible ..... 3
- Other answers (specify) ..... 4

61. Have you ever been registered as disabled with the Ministry of Labour for employment purposes?

- Yes, registered ..... 1 - ask (a)
- No, not registered ..... 2

If Yes, registered (1)

(a) Has this helped in any way?

- Yes, helped ..... 3 - ask (1)
- No . . . . . 4

If Yes, helped (3)

(1) How has it helped?

Permanently Bedfast/Housebound/or over retirement age - on to next section, others ask Qn.62

IV PERMANENTLY DISABLED AND UNDER RETIREMENT AGE

62. Would you be willing, subject to your doctor's agreement, to take a job in a sheltered workshop if it were available?

Yes ..... 1 ask (a)  
No ..... 2 ask (b)

If Yes (Y)

(a) If you are really keen, I might be able to arrange for someone from the Ministry of Labour to call and see you about it. Would you like me to try, or would you rather think about it a bit more?

Like someone to call ..... 1 go on to next section  
Think about it ..... 2 section

If No (X)

(b) Why is that?

GO ON TO NEXT SECTION

IV HOUSEWIFE

63. How old were you when you gave up work to become a housewife?  
[last occasion]

Never worked ..... 0 - ask (a)  
Yrs. \_\_\_\_\_

Check back to Qn. 62 - if disabled after giving up work ask Qn. 64  
- if disabled before/same time as giving up work ask Qn. 65

If Never worked (0) - ask, or code if obvious

(a) Was this because of your present (disability) or were there other reasons?

Disability ..... 1 over 60 and section, under 60, ask Qn. 64  
Other reasons ..... 2 ask Qn. 64

64. You say you last worked (quote from Qn. 63) (never worked). Has your (disability) stopped you from going back to work (starting work) since then?

Yes ..... 1 ask (a) - next page  
No ..... 2 on to next section

Qn. 64 (Contd. . . )

If would have returned to work (1)

(a) What stopped you? Would your (disability) have made it difficult for you to

- PROMPT - i) get to your workplace? .. 3
  - ii) do the actual work you were used to? ... 4
  - iii) work the number of hours an employer would want? ..... 5
  - CODE ALL THAT APPLY add iv) or for some other reason, connected with your (disability)? ..... 6
- (specify)
- If over 60, end section.  
If under 60, ask Qn.66

If disabled before giving up work

65. Did your present (disability) cause you to give up work when you did?

- Yes ..... 1 ask (a)
- No ..... 2

If Yes (1)

(a) What job were you doing then [occupation]?

IF NOW 60 OR OVER - END SECTION

If bedfast/housebound/too disabled to work ... code 'No' to Qn.66

Otherwise ask

66. Would you be interested in getting a job again now?

- Yes, interested ..... 1 - ask (a)
- No, not immediately ... 2 - on to next section

If interested in getting a job (1)

(a) Have you tried to get a job?

- Yes tried ..... 3 - ask (i)
- No, not tried ..... 4 - ask (ii)

If Yes, tried (1)

(i) Why do you think you haven't been successful?

ON TO NEXT SECTION

If Not tried (4)

(ii) Why haven't you tried?

ON TO NEXT SECTION

- 30 -

IF OFF SICK TEMPORARILY

67. Are you off sick now because of your (name disability), or for some other reason?

Disability ..... .. 1  
Other reason ..... .. 2 - on to Qn 70

68. How long have you been off sick (this time)?

Less than 1 week .. .. 0  
\_\_\_\_ yrs. \_\_\_\_ mths. \_\_\_\_ wks

[weeks only required if less than 3 months  
months only " " " " 3 years]

69. When do you expect to be able to start work again?

70. Are you paid anything by your employer while off sick?

Yes, paid by employer ..... .. 1 - on to Qn.77  
No, unpaid ..... .. 2

If Sick (unpaid)

71. When you start working again, will you be going back to the same firm?

Yes, same firm .. .. 3 - ask (a)  
No, different firm .. .. 4 } on to  
Don't know/expect to .. .. 5 } Qn.76

If yes, same firm (3)

(a) Will you be going back to the same kind of work?

Yes ..... .. 7 - on to Qn.77  
No ..... .. 8 - ask (1)

If not going back to same kind of work (4)

(1) Why will you be changing the sort of work?

ON TO QN 77

TO ALL UNEMPLOYED

72. How long have you been unemployed? Less than 1 week ..... .. 0  
 ..... yrs. .... mths. .... wks  
 [weeks only required if less than 3 mths.  
 months " " " " " 3 yrs.]

73. Did you leave your last job because of your (disability) or was there some other reason?  
 Yes, because of disability. .. 1 - ask(a)  
 No ..... .. 2

If Yes, because of disability (1)

(a) Did you yourself decide to leave, or did some one else suggest it? (specify who suggested)  
 Decided myself ... .. 3  
 Suggested by employer or agent ... .. 4  
 " " doctor ..... .. 5  
 " " other (specify) ..... .. 6

74. How long had you been in your last job? Less than 1 month ..... .. 0  
 ..... yrs. .... mths.  
 [months only required if less than 3 years]

75. Are you registered as unemployed with the Ministry of Labour (Employment and Productivity)?  
 Yes, special register for disabled persons .... .. 1  
 Yes, ordinary register .. ..... .. 2  
 No ..... .. 3 - ask(a)

If not registered (3)  
 (a) Why not?

TO UNEMPLOYED - OR THOSE SICK NOT RETURNING TO PREVIOUS JOB

76. Do you think you will (would) have difficulty getting another job because of your (disability)? [Probe for comments and reasons, reminding informants we are interested only in difficulties arising because of disability].



TO ALL WORKING, OFF SICK OR UNEMPLOYED

[If unemployed, ask of last job]

77. How many hours a week do (did) you work? [paid for]

hrs. \_\_\_\_\_

78. Who do you work for? - Are you -

- |                          |   |   |
|--------------------------|---|---|
|                          | Self-employed . . . . .                   | 0 |
| in Ordinary employment-  | Civil Servant .. . . .                    | 1 |
|                          | Local Authority .... .                    | 2 |
| <b>PROMPT AS</b>         | Nationalised Industry/Hospitals . . . . . | 3 |
| <b>NECESSARY</b>         | Private Co or employer . . . . .          | 4 |
| in Sheltered employment- | Remploy . . . . .                         | 5 |
|                          | Local Authority .....                     | 6 |
|                          | Blind Association .....                   | 7 |
|                          | Voluntary Associations .....              | 8 |
|                          | Others (specify) . . . . .                | 9 |

79. What is your actual job? [Probe as usual on OCCUPATION]

80. CHECK BACK TO QN. 55 - If Code Y - some qualification ask Qn. 81  
If Code X - no qualification ask Qn. 83

INTRODUCE - You mention you have (quote qualifications)

81. Are you using any of your qualifications/training in your present job (last job if not now working)?

- |   |             |
|---|-------------|
| Yes, using (some) qualns./training .....        | 1 - ask (a) |
| No, not using <u>any</u> qualns./training ..... | 2           |

If using (1)

(a) Have you ever had a full-time job where you have NOT used any of your qualifications (training)?

- |           |                  |
|-----------|------------------|
| Yes ..... | 3                |
| No .....  | 4 - on to Qn. 83 |

82. What made you take a job where you weren't using your qualifications (training)?

BLUE

83. Have you ever had difficulty getting a job because of your (disability)?

Yes ..... 1  
 No ..... 2  
 Never tried/not because of disability ..... 3

84. Talking about work in general, not any particular job. Does your (disability) limit or affect

a) The number of hours you can work? Yes ..... Y  
 No ..... X

b) The distance you can travel to work? Yes ..... 1  
 No ..... 2

c) The choice of joining a pension scheme? Yes ..... 4  
 No ..... 5  
 D.K. .... 6

d) The choice of jobs if you wanted a change? Yes ..... 7  
 No ..... 8  
 D.K. .... 9

85. Are there any (other) disadvantages with regard to working arising from your (disability)?

No ..... Y  
 Yes (specify) ..... X

UNEMPLOYED GO ON TO NEXT SECTION

To all Employed or Temporarily sick

86. How long does it take you to get to work from where you live?

Works at home/no journey ..... 0 - on to next section

Varies/work not in same place ..... 1

Takes less than 5 minutes ..... 4

Takes this number of minutes .....

87. How do you usually get to work? (usual means of transport)

SINGLE CODE [ Walk only (no other transport) ..... 1  
 Wheelchair only (no other transport) ..... 2

[ Bicycle/pedal car ..... 3  
 Motor cycle/scooter, etc. .... 4  
 Private car/van etc. as driver ..... 5  
 Private car/van etc. as passenger ..... 6

CODE ALL Public transport ..... 7  
 THAT Firm's transport ..... 8  
 APPLY Invalid tricycle ..... 9  
 Other (specify) ..... 0

88 Do you have any particular difficulties getting to work because of your (disability)?

Yes . . . . . Y - ask (a)  
No . . . . . X

If Yes (Y)

(a) What is (are) the difficulty(s)?

89. You get to work by (method Qn.87) - is there some other means of transport you would rather use, but can't because of your (disability)?

Yes . . . . . Y - ask (a)(b)  
No . . . . . X

If Yes (Y)

(a) What form of transport would you like to use?

Car . . . . . 0  
Bus . . . . . 1  
Train . . . . . 2  
Other (specify) . . . . . 3

(b) Why can't you use it?

90. How much a week does it cost you to travel to work?

Nil . . . . . 0

\_\_\_\_\_ sh. per week

Check this is actual cost to informant  
- i.e. any refunds or subsidies from  
employers are deducted

Can I just ask you about any household chores you might do -

91. Who does most of the household chores, I mean housework, shopping and cooking?

- [If "shared" treat      Self does most [at least 2 items] ..... 1
- an 'other person']      Other person, (specify) ..... 2 - ask (a)

If other person (2)

(a) Is this because of your (disability), or would (other person) be doing it anyway?

- Because of disability ..... 3
- Would do it anyway ..... 4 - go on to next section

Introduce - I'd like to ask about cooking, shopping, housework and laundry arrangements. Can we start with cooking -

92. Do you do any of the cooking?

- Yes ..... Y - ask (b)
- No ..... X - ask (a)

If No (X)

(a) I this because of your (disability) or would someone else be doing it anyway?

- Disability ... ..... 1
- Someone else would do ..... 2 } on to Qn.92

If Yes (Y)

(b) Do you do

RUNNING PROMPT

- all or most of the cooking ..... 3
- about half ..... 4
- or only a little cooking? ..... 5

Introduce - There are some things connected with cooking that other people have said they find difficult. I've got a list here.

93. Does your ( . disability . ) make it hard for you to

INDIVIDUAL PROMPT

- Open tins/cans ..... 1
- Open screw top bottles ..... 2
- Turn on water taps/cooker ..... 3
- Cut things up ..... 4
- Beat eggs, stir or mix things ..... 5
- Lift pans from top of stove or over ..... 6
- Bend down to oven ..... 7
- Stand to prepare food or at cooker ..... 8
- Reach up to shelves ..... 9
- Peel, scrape, or prepare vegetables ..... 10
- Anything else you find difficult when cooking (specif.) ..... 11
- Nothing difficult ..... 0 - on to Qn.94

IF any coded see note below

If any difficulty, and does most or half cooking - go on to Qn.95  
 If any difficulty, and does only a little cooking - ask Qn.94

94 Could you get yourself a snack meal, say boil an egg, or heat a tin of soup, or something like that, if you had to?

Yes (with or without difficulty) . . . 1  
No . . . . . 2 - ask (a)

If No (2)

(a) Could you get yourself a cup of tea or coffee, even though it might be difficult?

Yes . . . . . 3  
No . . . . . 4

95. Are there times when you have to do without a proper meal because you can't get it yourself, and there is no-one else to get it for you?

Yes . . . . . 5 - ask (a)  
No . . . . . 6

If Yes (5)

(a) Does this happen

RUSHING  
PROMPT

Very often, say 2 or 3 times a week . . . . . 2  
Quite often, say once a week . . . . . 1  
Less often than that? (specify) . . . . . 0

TO ALL

96. Do you have any gadgets specially designed to help with preparation of food?

Yes . . . . . 1 - ask (a)  
No . . . . . 2

If Yes (1)

(a) What are they?

97. Have any alterations or additions been made to the furniture, fittings or layout of the kitchen to make it easier for you to manage with your (disability)?

Yes . . . . . 1 - ask (a)  
No . . . . . 2

If Yes (1)

(a) What has been done?

**YELLOW**

98.	Do you do any of the household shopping?	Yes .....	1 - ask (b)
		No .....	2 - ask (a)

If No (2)

(a) Is this because of your (disability) or would someone else be doing it anyway?

Disability . . . . .	3		}
Someone else would do . . . . .	4		- go on to In 101

If Yes (3)

(b) Do you do	RUNNING PROMPT	All or most of the shopping	6
		About half the shopping	7
		or Only a little shopping?	8

99. Do you have any difficulty

		a) Carrying the shopping?	No . . . .	1	
			Yes . . . .	2	
<b>INDIVIDUAL PROMPT</b>		b) Walking or getting to and from shops?	No . . . .	3	
			Yes . . . .	4	
		c) Any difficulties other than carrying and getting to shops?	. . . .	5	
		If Yes (specify)			

100. There are some things which help people with shopping . . .

		a) Do you use a basket on wheels?	Yes . . . .	1	
			No . . . . .	X	
<b>INDIVIDUAL PROMPT</b>		b) Do you have a refrigerator?	Yes . . . .	1	
			No . . . . .	2	
		c) Do you have any tradesmen (apart from the milkman) delivering, or travelling shops?	Yes . . . .	3 - ask (a)	
			No . . . . .	4	

If delivered or travelling shops (i)

(a) Do you get	RUNNING PROMPT	Most of your household shopping delivered	5
		About half of it	6
		or Only a few items delivered?	7

101. Do you do

- CODE 1) all the washing yourself (here or at laundrette)? ..... 1
- ALL 1i) some of the washing yourself (here or at laundrette)? ..... 2 } - ask (a)
- THAT 1ii) do you send it all to the laundry? ..... 3 } - ask (b)
- APPLY 1iv) do you send some of it to the laundry? ..... 4 } - ask (b)
- 1v) does someone else do any of your washing for you (including laundrette)? ..... 5 - ask (c)(d)

If does any washing (1, 2)

- (a) Do you have difficulty when you are doing the washing because of your (disability)?
- [Include difficulty carrying to laundrette] Yes, some difficulty ..... 7
- No ..... 8

If does all, on to Qn 102  
If some only - ask (b) or (c)

If sends to laundry (3, 4)

- (b) Do you send ~~to the~~ laundry because of your (disability), or would you send it to the laundry (they do it) anyway?
- Sends any/more because of disability ..... 7 - ask (i)
- Would send anyway ..... 8

If any or more sent because of disability (7)

- (i) How much extra do you have to spend on laundry because of your (disability)?
- Check this is extra (per week) \_\_\_\_\_ s. \_\_\_\_\_ d.

If all washing sent to laundry - on to Qn.103

If someone else does any (all) (5)

- (c) Who does it?
- (d) Is this because of your (disability), or would (person) be doing it anyway?
- Because of disability ..... 1
- Would do it anyway ..... 2

If all washing done by other person - on to Qn.103

102. Do you have any of the following things to help with the washing?

- INDIVIDUAL (i) An electric iron ..... 4
- PROMPT (ii) A washing machine ..... 5
- (iii) Spin/tumbler drier or electric drying cabinet ..... 6
- CODE ALL or (iv) Use a laundrette? ..... 7
- THAT APPLY None of the above ..... 9

YELLOW

- 3 -

103. Do you do ANY of the housework? Yes ..... 1 ask (a)  
No ..... 2 ask (b)

If Yes (1)

(a) Do you do **RUNNING** all or most of the housework .. 4  
**PROMPT** about half the housework .. 5 } -ask Qn.104  
or only a little housework? . . . 6 }

If No (2)

(b) Is this because of your (disability) or would  
someone else do it anyway? Disability .. .. . 8-ask (i)(ii)  
Someone else would do it . . . 9-on to next  
page

If disability (8)

(i) Who does it?

(ii) Are the arrangements satisfactory, or would you like  
more help?

Satisfactory ... . 5 } - on to  
Like more help . . . 6 } next page

104. Do you have any special difficulties with housework due  
to your (disability)?

Yes ... . 1 ask (a)  
No . . . . 2

If Yes (1)

(a) Would you like (more) help with the housework, or do you  
manage all right?

Like (more)help . . . . 3  
Manage all right ... . 4

105. Do you use any of the following to help you with housework?

INDIVIDUAL a) Vacuum cleaner or carpet sweeper . . . . . 1  
PROMPT b) Vacuum cleaner attachments for dusting ..... 2  
c) Squeezy/mop with long handle . . . . . 3  
CODE ALL d) Electric polisher . . . . . 4  
THAT e) Any other equipment to help with housework  
APPLY (Specify) . . . . . 5  
  
None of the above . . . . . 9

106. Have any alterations or additions been made to furniture,  
household fittings or household equipment to make it easier  
for you to do your housework?

Yes ... . 1 ask (a)  
No ..... 2

If Yes (1)

(a) What has been done?

IF INFORMANT HAS DEPENDENT  
CHILDREN UNDER 12 YRS ASK  
Q. 107, OTHERWISE GO ON TO  
NEXT SECTION



To all WOMEN with dependent children under 17 years old

107 Because of your (disability) do you have any special difficulty in taking care of the children yourself?

Yes . . . . .  
No . . . . .

1 ask (a)-(e)  
2 go on to next section

If Yes (1)

How do you manage about [ask (a)-(e)]

(a) Feeding and getting their meals - Can you do it yourself

- Without difficulty . . . . . 0
- Only with difficulty . . . . . 4
- Does someone else have to do it? (specify who) . . . . . 5

(b) What about washing and bathing them, or seeing that they keep themselves clean? Do you have any trouble with this because of your (disability) or can you manage alright?

- Have trouble . . . . . 3 - ask (1)
- Manage . . . . . 4

If has trouble (3)

(1) How do you cope with this? [Specify who if done by someone else]

(c) Getting them dressed (and off to school) - can you manage this alright, or does your (disability) make it difficult?

- Manage alright . . . . . 5
- Disability causes trouble . . . . . 6 - ask (1)

If trouble (6)

(1) Can you tell me how you cope?

(d) Do you feel you can't play with them enough, or share their leisure, because you have (disability), or doesn't it make any difference?

- Can't play/share leisure . . . . . 7
- Makes no difference . . . . . 8

(e) Are there any circumstances in which you feel your (disability) prevents your doing all you want to to care for them, and make them happy?

- Yes . . . . . 1 - ask (1)
- No . . . . . 2

If Yes (1)

(1) Can you tell me what you think they lack because of your (disability)?

HOUSING can make a big difference to whether people can get about the house, so I'd like to ask you about this.

108. How old is this house? Pre 1914 .. . . . . . 1  
 [If dwelling built-on - age of Inter-war (1915-1945) .. . . . 2  
 part lived in by this household] Post war (after 1945) .. . . . 3

109. How long have you lived at this address? \_\_\_\_\_ yrs

110 Type of accommodation

- L.A. Old people's flat/bungalow (any accommodation with warden) . . . . . Y
- L.A. Old people's flat/bungalow /bed room/one bedroom . . . . . X
- L.A. purpose built dwelling for the homeless people . . . . . 0
- Purpose built (Vol. Agency) flat for old or handicapped . . . . . 1
- Purpose built (Vol. Agency) house for old or handicapped . . . . . 2
- Other flat in block/marina etc . . . . . 3
- Self-contained flat in house . . . . . 4
- Room(s) in house (not self-contained) or lodging house (no service) . . . . . 5 - ask (a)  
(b)
- Bungalow, one-storeyed cottage, or duplex, prefab, etc. . . . . 6
- Whole house/cottage (more than one storey) . . . . . 7
- Non-permanent dwelling - caravan/tent etc (not prefab.) . . . . . 8
- Hotel/boarding house/hostel (some service) . . . . . 9
- Others (specify) . . . . . 10

If part of house (5)

(a) How many other households live at this address? . . . . .

(b) Are any members of these other households related to you?  
If so, state relationship.

0 relations . . . . . 0

Relationship \_\_\_\_\_

111. How many rooms do you have for the use of your household? . . . . .

exclude bathroom, w.c. and kitchen unless it is used to eat one sit-down meal in regularly. Any rooms not used because house too big, uninhabitable or inaccessible should be included.  
rooms shared as a right are included.

1

112. Are there any rooms you can't get to and use because of your (disability)?

11

- Yes . . . . . Y - ask (a)
- No . . . . . X
- No - Belfast . . . . . 0

If can't use any rooms (Y)

(a) Why can't you use them?

- CODE ALL THAT APPLY
- Stairs . . . . . 2
- Doors too narrow for wheelchair . . . . . 3
- Other reasons (specify) . . . . . 4

113 In which room do you spend most of the day (time when you're at home), [for housewives add - "apart from cooking and housework"]?

ONE	Living room .....	1
CODE	Bedsitter .....	2
O'LY	Bedroom .....	3
	Kitchen .....	4

114 How do you heat (room named)?

[If different heating number/water code to h, but ignore emergencies only]	CODE	Central heating .....	Y
		Solid fuel fire/heater .....	X
	ALL	Electric fire/heater/storage .....	0
	THAT	Gas heater .....	1
	APPLY	Electric floor-warming .....	2
		Oil heater .....	3
		Cooker/boiler/"non" heating appliance .....	4
	Other (specify) .....	5	

115. Do you always sleep in the bedroom or do you sometimes sleep in the living room? [~~Living rooms converted permanently to bedrooms count as bedroom~~]

D N A.	Bedsitter (One room only) .....	1
	Always sleep in bedroom (incl. room converted) ..	2
	Sometimes (always) in living room .....	3 - ask (a)

If Sometimes (always) in living room (3)

(a) Is this because of your (disability), or is there another reason?

Disability .....	4
Other reason (specify) .....	5

Can you tell me something about the amenities you have here?

116. Do you have

CODE ALL	(Mains) Electricity laid on .....	7
THAT APPLY	(Mains) Gas laid on .....	8
	Neither gas nor electricity .....	9

117. Do you have a kitchen (whatever it's called)?

[establish if necessary whether sole use or shared with other households]	Sole use of kitchen .....	1
	Shared use of kitchen .....	2
	No kitchen .....	3- ask (a)
	D.N.A. Hotel/boarder .....	4

If no kitchen (3)

(a) Do you have any cooking facilities (able to boil at least one saucepan)?

Some cooking facilities .....	6
No cooking facilities .....	7

118. Do you have a fixed bath? [Include bath fitted in kitchen]			
[Establish if necessary whether sole use or shared with other households]	Sole use of fixed bath .. . . . .	1	
	Shared fixed bath .. . . . .	2	
	No fixed bath .. . . . .	3	
<hr/>			
119. Do you have a piped hot water supply inside the dwelling?			
[Check if necessary whether shared]	Sole use of piped hot water .. . . . .	4	
	Shared piped hot water .. . . . .	5	
	No piped hot water .. . . . .	6	
<hr/>			
120. What about <u>cold</u> water. Do you have piped cold water inside the dwelling?			
[Check if necessary whether shared]	Sole use of piped cold water .. . . . .	7	
	Shared piped cold water .. . . . .	8	
	No piped cold water .. . . . .	9	
<hr/>			
121. Do you have a w.c. (flush toilet)?			
[Check if shared]	Sole use of w.c. .. . . . .	1	} ask (a)- (c)
	Shares w.c. with other h/ds to w.c. ....	2	
		3	
[If no w.c., substitute "toilet" or if known, earth/chemical closet, etc. for (a)-(c)]			
(a) Is there an indoor w.c./toilet?			
	Yes, indoor .. . . . .	Y	
	No, outside only .. . . . .	X	
[2 w.c.'s, 1 in, counts as Yes]			
(b) During the day do you have to go up or downstairs to use a w.c./toilet?			
[Irrespective of whether inside or out]	ONE	Yes, up or downstairs .. . . . .	1
	CODE	o, same level (inc 1 or 2 steps) .. . . . .	2
	ONLY	D N A - uses commode, etc. .. . . . .	3
(c) During the night do you have to go up or downstairs to use a w.c./toilet?			
[Irrespective of whether inside or out]	ONE	Yes, up or downstairs .. . . . .	4
	CODE	No, same level (inc 1 or 2 steps) .. . . . .	5
	ONLY	D N A - uses commode, etc. .. . . . .	6
<hr/>			
<u>If outside, or stairs (X, 1, 4)</u>			
(1) Do you find this (having to go outside/up and down stairs) -			
	Very inconvenient .. . . . .	7	
RUNNING PROMPT	Sometimes inconvenient .. . . . .	8	
	or are you satisfied? .. . . . .	9	



GREEN

123. Would you like any (other) alterations made to the house, or any fittings to make it easier for you to manage to do things or get about?

Yes ..... A - ask (a)  
(b)  
No ..... X

If Yes (A)

(a) What would you like done? [NO PROMPT]

	Bannister rails	..	1
	Central heating/chauffeur fire	..	2
CODE	Handrails to bath	..	3
ALL	Handrails to toilet	..	4
THAT	Widen/reverse doorway	..	5
APPLY	<u>In full/change position of</u>		
	lavatory	..	6
	bathroom	..	7
	Install ramps/pathways	..	8
	Others (specify)	..	9

(b) Have you tried to get it (them) done? Yes . . . . . A - ask (i)  
No, not tried X - ask (ii)

If tried (A)

(i) Whom did you approach, and what happened?

On to Qn.124

If not tried (X)

(ii) Why haven't you tried to get . . . done?

	Impractical (dwelling condemned, etc)	..	1
	Can't afford it/cost	..	2
CODE	Authorities no good	..	3
ALL	Don't know where to go	..	4
THAT	Don't know what's available	..	5
APPLY	'ever bothered/don't know why	..	6
	Other answers (specify)	..	9

124 Ownership of dwelling (subject or spouse is)

e.g. Informant is mother living with son who is L.A. tenant. This would be coded by 8 or 9 according to circumstance.

- Owner/occupier owns outright . . . . . 1] - ask (a)
- Owner/occupier has mortgage . . . . . 2]
- Leaseholder (pays ground rent only) . . . . . 3
- L.A. or council tenant . . . . . 4
- L.A. or council house (pays rent to L.A. tenant) . . . . . 5
- Rent free of council, furnished . . . . . 6
- Rent free, not council, unfurnished . . . . . 7
- Other (specify) . . . . . 8
- Let rent free . . . . . 9
- Other (specify) . . . . . 10

If owner/occupier (1, 2)

(a) Why I ask the rateable value of this property? R.V.L.

125. Because of your (disability) do you have any extra expenses with regard to no. 124?

- Yes, extra expenses . . . . . Y - ask (a)
- No . . . . . X

If extra expenses (Y)

(a) What expenses, and how much extra does it cost? (check because of disability)

**INTRODUCE**

Rent and rates free . . . . . 0

126. Cost of housing (Informant) - omit items which cannot apply

[Total cost before sub-letting if any]

	Cost		Period	
	£	d	Wk	Other (specify)
1. Rates (net, deducting rebate if any) [If paid separately]			1	
2. Water rate [If paid separately]			1	
3. Ground rent			1	
4. Feudal duty (Scotland only)			1	
5. Mortgage repayment			1	
interest			1	
6. Service, maintenance charge			1	
7. Rent (unfurnished) deduct rebate(s) if any			1	
8. Rent (furnished) - no service			1	
9. Rent (furnished) service / board (specify)			1	

**INTRODUCE** (I'd like to know how you feel about living here)

127. Would you like to move from here, or do you prefer to stay?

- Don't want to move, but has to ... 0 - on to Qn 129
- Is about to move ... 1
- Like to move ... 2 - see note A
- Want to stay ... 3 - see note B

Note A Like to move - add - "We don't have any influence with the Council, so it won't be possible to help you personally - but your views will help in future planning" - see Qn 1.8

Note B Want to stay - Reassure any elderly people "that's fine, we just wanted to know you are satisfied" or something like that - GO ON TO NEXT SECTION.

**TO ALL WANTING TO MOVE OR IN PROCESS OF MOVING**

128. Do you want to leave here (are you leaving here) because

- PROMPT You can't manage because of the house itself ... Y
- CODE ALL You don't like the area/people ... Y
- IF NOT APPLY or Is there some other reason (specify) ... 0

129. What sort of place would you like to move to? (if you are moving to?)

- Old People's Home/Institution, etc ... Y
  - Place without stairs (Flat/bungalow stairs mentioned) ... Y
  - Smaller place ... 0
  - Larger place ... 1
  - Semi-contained accommodation ... 2
  - More modern (amenities mentioned) ... 3
  - Garden/allotment ... 4
  - "Better" area (seaside/country/water/no smoke) ... 5
  - "Nicer" area (frie il, 'posher', better class) ... 6
  - Other answer: (specify) ... 7
- CODE  
ALL  
THAT  
APPLY

If about to move go to next section  
 If has to move but does not want to  
 or want to move - see Qn 127



INTRODUCE Some councils provide special accommodation for people with disabilities - so I'd like to ask a few questions about Council Housing

130. Have you applied to this Council for rehousing since you've been living here?

Yes . . . Y-ask (a)(b)  
No .. 7-ask (c)

If applied (X)

(a) How long ago did you apply?	Less than 6 months ...	Y
	6 mths. but less than 1 yr	0
	1 yr but less than 2 yrs	1
ONE	" " " " 3 "	2
CODE	" " " " 4 "	3
O.LY	" " " " 5 "	4
	5 " " " 10 "	5
	10 years or more (specify) ....	6

(b) Have you been offered any accommodation? Yes ..... Y-ask (i)  
No ..... X-on to next section

If Yes (Y)

(i) Why did you refuse it?

GO ON TO NEXT SECTION

To all who have not applied for rehousing (7)

(c) Why haven't you applied to the Council for rehousing?

	Don't want L.A. housing/buying house .....	1
	Wants to move right away (out of area) .....	2
	Thinks ineligible .....	3
CODE	No point (waiting list/none available/	
ALL	L.A. unco-operative) .....	4
THAT	Not well enough .....	5
APPLY	Can't afford move/rent .....	6
	Haven't bothered/not wanted immediately/	
	don't know .....	7
	Other answers (specify) .....	9

Details of Income

1. If subject is married (even if spouse is not included in sample) details of income are required for both husband and wife on the same schedule. Where the wife is likely to have an income of her own, questions should be put separately, direct to her, even though they be recorded on the same schedule.
2. For wages or salaries we require net amount after deductions for tax and national insurance only. Check that other deductions have not been made, e.g. savings, superannuation, club membership. If these deductions have been made, they should be added on to take-home pay.
3. Incomes per week or per month should be recorded in pounds and shillings (ignore pence), and annual incomes in £s only (ignore shillings and pence) Where informant answers for periods other than that required by the answer - be sure to note the period for which amount given applies
4. If the informant is drawing a Supplementary Pension or Allowance (Nat Assistance), omit Qn.144.

**INTRODUCE:** [We'd like to find out if people like yourself have extra expenses they might find it hard to meet on their present income. Could you tell me first what your income is?] - [standard definition of income - deducting income tax and national insurance, but including overtime, bonus, pension, etc.]

	Informant (incl spouse if has joint income)	Spouse if has separate income
131. What was your total income last week?	£ _____ s _____	£ _____ s _____
132. Is this the amount you usually have, or was last week unusual?		Usual .. . 1 - _____

If Unusual (2)

(a) Why was it different last week?

	Informant or joint	Spouse if separate
(b) What do you (and your wife) usually get?	£ _____ s _____	£ _____ s _____

THEN - for each dependent child (if any), mentally subtract £2 from the total income

IF single, widowed, separated with adjusted total less than £13.      ] ask full income details ←

IF married couple with adjusted total less than £17

If over these amounts - go on to Qn.145

**INCOME DETAILS - ASK QUESTIONS APPLICABLE - OR USE A7 CHECK QUESTIONS**

	Informant (incl spouse if has joint income)	Spouse if has separate income
TO THOSE SELF-EMPLOYED, or whose WIFE IS SELF-EMPLOYED		
133 How much was your total income (and your wife's) in the last 12 months for which you can give a figure, from your business (practice) etc?	£ _____	£ _____
After deducting <u>business</u> expenses and income tax.		
Note here if income tax not known.		

		Informant (incl. spouse if has joint income)	Spouse if has separate income
134	Earnings last week from work Including overtime, tips, bonus, etc Excluding N I. and Income Tax	£ _____ s. _____ ... 0	£ _____ s. _____ 0
	None		
	<u>If any earnings</u> (a) Is this the amount you usually take home, or is this week unusual? Usual . . . . 1 Unusual . . . 2 (i)(ii)		
	<u>If unusual (2)</u> (i) What was different last week?		
	(ii) What do you (your wife) usually get?	£ _____ s. _____	£ _____ s. _____
135	Apart from your regular job, do you (your wife) receive any income from casual work? Yes . . . . 1 ask (a)(b) No . . . . . 0	<u>Off. use</u>	
	<u>If Yes (1)</u> (a) How much do you get (a week)? £ _____ s. _____	1    2    3    4	
	(b) For how many weeks a year? _____	A [ ] [ ] [ ] [ ] B [ ] [ ] [ ] [ ]	
136	Are you at present receiving any of the following State benefits? (Ask or check as appropriate) If Yes, give amount per week, even if not drawn weekly.	NO	£    s.    £    s.
	(1) National Insurance Retirement Pension . . . . .	0	
	(2) Supplementary pension (Nat. Assistance) . . . . .	0	
	(3) Industrial disablement pension (incl. any additional allowance paid) . . . . .	0	
	(4) War disability pension (incl. any additional allowance paid) . . . . .	0	
	(5) Nat. Ins. Widows pension or allowance . . . . .	0	
	(6) War widows or industrial pension	0	
	(7) Family allowance/guardians allowance/childs special all. . .	0	
	(8) Maternity benefit . . . . .	0	
	(9) Sickness or industrial injury benefit . . . . .	0	
	(10) Unemployment benefit . . . . .	0	
	(11) Supplementary allowance (National Assistance) . . . . .	0	
	<u>If any benefit (8-11) - ask (a)</u> (a) For how many weeks have you been drawing this benefit? _____ weeks		
	<u>If 13 week or less</u> (b) What was your wage the last week you worked? £ _____ s. _____		

<p>137. Do you receive any of the following employer's pensions (regular allowances) at present?</p>	<p>No</p>	<p>Amount per week after deduction of income tax</p>																					
<p>(a) Central or local Government?</p>	<p>0</p>	<p><u>Informant</u></p>		<p><u>Spouse</u></p>																			
<p>(b) Own or husband's/wife's employer (not (a))?</p>	<p>0</p>	<p>£      s.</p>	<p>£      s.</p>																				
<p>138 Do you or your wife receive any annuities?</p>	<p>0</p>	<p><u>If Yes</u></p>																					
		<p>a) How much did you (your wife) get for last payment?</p>																					
		<p>Informant....£ _____ s.</p>																					
		<p>Spouse . £ _____ s.</p>																					
		<p>b) How many such payments do you get a year?</p>																					
<p>139. Do you or your wife receive any income from Trade Unions, Friendly Societies or charitable organisations?</p>	<p>0</p>	<p><u>If Yes - record weekly amounts</u></p>																					
		<p><u>Informant</u></p>		<p><u>Spouse</u></p>																			
		<p>£      s.</p>	<p>£      s.</p>																				
<p>140 Do you or your wife receive any separation allowance or alimony?</p>	<p>0</p>	<p>_____</p>																					
<p>141 Do you (or your wife) receive any regular cash help from children, relatives or friends <u>not</u> in the household?</p>	<p>0</p>	<p>_____</p>																					
<p>142 Do you or your wife receive any rent from lodgers, boarders or sub-tenants of <u>this</u> house? [Including children]</p>																							
<p>Yes. ....1 ask (a)(b) No .....2</p>																							
<p><u>If Yes (1)</u></p>																							
<p>(a) About how much did you (and your wife) receive in the last 12 months, before allowing for expenses? £ _____</p>																							
<p>(b) Do you provide any of the following services (to your boarders lodgers, etc.)?</p> <table border="0"> <tr> <td>Light.....</td> <td>1</td> </tr> <tr> <td>Heat.....</td> <td>2</td> </tr> <tr> <td>Breakfast only.....</td> <td>3</td> </tr> <tr> <td>Breakfast and one meal only.....</td> <td>4</td> </tr> <tr> <td>All meals.....</td> <td>5</td> </tr> <tr> <td>Cleaning. . . . .</td> <td>6</td> </tr> <tr> <td>Laundry .....</td> <td>7</td> </tr> <tr> <td>Furniture.....</td> <td>8</td> </tr> <tr> <td>None of the above.....</td> <td>9</td> </tr> </table> <p>CODE ALL THAT APPLY</p>						Light.....	1	Heat.....	2	Breakfast only.....	3	Breakfast and one meal only.....	4	All meals.....	5	Cleaning. . . . .	6	Laundry .....	7	Furniture.....	8	None of the above.....	9
Light.....	1																						
Heat.....	2																						
Breakfast only.....	3																						
Breakfast and one meal only.....	4																						
All meals.....	5																						
Cleaning. . . . .	6																						
Laundry .....	7																						
Furniture.....	8																						
None of the above.....	9																						
<p>143. Did you (or your wife) have any income from any other source last week?</p>																							
<p>Yes..... 1 ask (a)(b) No..... 9</p>																							
<p><u>If Yes (1)</u></p>																							
<p>(a) From what source?</p> <p>(b) About how much did you (and your wife) receive in the last 12 months? £ _____</p>																							

Omit question 144 where informant is drawing a Supplementary Pension or Allowance (National Assistance)

144 Do you or your wife have any money in

(i) The bank, savings bank, co-op, saving certificates, building society, premium bonds?

Yes, self. . . . . 1  
 Yes, wife . . . . . 2  
 No, neither. . . . . 3

(ii) Stocks, shares, including War Loan etc ?

Yes, self . . . . . 5  
 Yes, wife . . . . . 6  
 No, neither. . . . . 7

(iii) Property other than this dwelling house?

Yes, self..... . . . . 9  
 Yes, wife. . . . . X  
 No, neither. . . . . 0

If has any savings

(a) Taken together [remind inf. of items] would you say that altogether (not counting this house if owned) you have:

RUNNING	Over £2,500... ..	1
PROMPT	£500 - £2,500.....	2 - ask (i)
	Less than £500... ..	3

If between £500 and £2,500 (2)

(i) (It would help me to get it more accurately) specify amount £ \_\_\_\_\_

145 We've already talked about the extra expenses for housing. Do you have any extra expenses due to your (disability) for:

	<u>No</u>	<u>Estimate weekly amount</u>
(a) Domestic help?	0	£ _____ s.
(b) Heating?	0	£ _____ s.
(c) Special diets?	0	£ _____ s.
(d) Anything else we haven't mentioned? (Specify)	0	£ _____ s. £ _____ s. £ _____ s.

146. If any extra expenses

In the past year did you (or your wife) use up any of your savings, or raise a loan on property or insurance policy, or anything like that, to meet these extra expenses?

Yes ..... 1 - ask (a) (b)  
 No..... 2

If Yes (1)

(a) Which of these expenses?

(b) How much money did you use?

£ \_\_\_\_\_

147. <u>Telephones</u> - Is there a	Phone for use of h/d, can use .....	1	] - end (a)
	" " " " cannot use .....	2	
RUNNING	No phone in h/d, but can use .....	3	
PROMPT	" " " " cannot use?.....	4	

If phone for use of h/d. (1, 2)

(a) Do you have a standard phone or is it specially adapted in any way?

Standard model	...	5
Specially adapted	...	6

148 Some people say they miss a lot of things by being disabled, others say they get as much out of life as most other people. How do you feel?

149 What would you say is the main advantage of having (disability)?

150. Is there anything else you'd like to tell me that I haven't asked about?

- Wheelchair -

WHEELCHAIR SCHEDULE

TO ALL WHO USE WHEELCHAIR

--	--	--	--	--	--	--	--

301. Can you get in and out of your chair on your own, (even if you have trouble doing it)?

- Yes . . . . . 4
- No . . . . . 5

302. For how long have you been using a wheelchair?

- Less than 6 months . . . . . Y
- 6-11 months . . . . . 0
- No. of years . . . . .

303. Can you use the chair on your own, or do you always have to be pushed?

- Yes, use on own . . . . . 1 - ask (a)
- Use on own inside only . . . . . 2 - ask (a)
- Use on own outside only . . . . . 3 - (b)(c)
- Have to be pushed . . . . . 4 - ask (b)(c)

If use on own (1,2,3)

(a) Is it electrically powered, or do you propel it yourself when you're using it on your own?

- Electrically powered . . . . . 6
- Self-propelled . . . . . 7

If has to be pushed (2,3,4)

(b) Who usually pushes your chair (when you don't do it yourself)?

(c) Does (person) have any difficulty, or does he/she manage quite easily?

- Manages easily . . . . . 8
- Has difficulty . . . . . 9 - ask (1)

If has difficulty (9)

(1) Why is that?

Serial

- special care 1 -  
SPECIAL CARE SCHEDULE

Serial No.

If the disabled person is not able to

- (a) understand the questions, or give rational answers e.g. is mentally impaired, senile
- or (b) is permanently bedfast
- or (c) is not bedfast, but confined to a chair, and cannot get in or out of the chair without the aid of some other person
- or (d) needs someone to supply most of her personal needs

the following questions need to be asked, either of the subject herself, or of the person mainly responsible for looking after her

If direct to subject, change wording from "she" to "you" etc.

Code: Not possible to ask any questions direct ..	1
Some questions direct ... ..	2

201. If (person) needs something and there is no-one in the room, how does (she) let someone know (she) wants them -

(a) during the day?

(b) during the night?

(c) Whenever ( ) wants something can (she) usually manage to attract someone's attention?

[ IF PROXY  
I'd like to know something about what you do for ( ) ]

202. Once ( ) has (her) food, can (she)

- |  |                     |   |
|--|---------------------|---|
| (a) Cut it up (herself)?               | Yes .....           | 1 |
|  | No .....            | 2 |
| (b) Get it to (her) mouth on (her) own | Eats on own .....   | 3 |
| or does (she) have to be fed?          | Has to be fed ..... | 6 |

203. What about drinking? Can (she) lift the cup (herself) or does (she) have to have help?

- |                      |   |
|----------------------|---|
| Can drink on own ... | 7 |
| Has to have help ... | 8 |

d 13



GREY

- special care 2 -

204. How does ( ) manage about washing (her) hands and face?

Does (she) have to have the water brought to (her) or can (she) get to the wash-basin?

Has to be brought ..... 1 on to Qn.205  
Gets to the wash-basin ... 2 ask (a)

If can get to the wash-basin (2)

(a) Can (she) get to the wash basin on (her) own or does (she) have to have someone to help (her)?

Can go on own ..... 4  
Has to have help ... 5 - ask (i)

If has to have help (5)

(i) Who helps (her)?

205 Once (she) has the water (or has got to the basin) can (she)

(a) Wash (her) own hands and face without help?

Yes .. 8  
No .... 9

206. What about a bath or a body wash?

Can (she) get to the bath or does (she) have to have an all-over wash?

Can get to the bath . . . . . 1 ask (a)-(c)  
Has all-over wash or no bath ... 2 ask (d)-next page

If can get to the bath (1)

(a) Can (she) get to the bathroom on (her) own or does (she) have to have someone to help (her)?

Can get to bathroom on own .... 3  
Has to have help . . . . . 4

(b) Can (she) get in and out of the bath on (her) own or does (she) have someone to help (her)?

Can get in/out of bath ... 5  
Needs someone to help . . . 6

(c) Once (she) is in the bath can (she) bath (herself) without help?

Yes ... 7 or to Qn.207  
men, 208 women  
No ... 8 ask (i)-(ii)

If No (8)

(i) Who washes her?

(ii) How often?

GO ON TO QN 207 IF SGT MALE  
OR QN.208 " " FEMALE

(Qn.206 Cont'd )

If has all over wash or no bath (2)

(d) Once (she) has the water, can (she) wash herself down without help?

Yes .....	. 7 on to Qn 207 men Qn 208 women
No .....	. 8 ask (i)(ii)

cd 23

If No (8)

(i) Who washes her?

(ii) How often?

NEW QN

207. Can he shave himself or does someone have to do it for him?

Doesn't have a shave .....	0 - ask (a)
Shaves self .....	3 on to Qn.208
Someone shaves him .....	4 - ask (b)(c) (d)

cd 27

If doesn't have a shave (a)

(a) Can you tell me why he doesn't have a shave?

GO ON TO QN.208

If someone shaves him (4)

(b) Who shaves him?

(c) How often does he have a shave?

(d) Does he have to pay anything? If so, how much?

GREY

- special care 4 -

TO ALL

208. What about using the toilet - can (she)

RUNNING	get to the toilet on (her) own .....	1] on to Qn.214
PROMPT	get there only if helped .....	2] ask (a)
	cannot get to toilet, even with help?	3 - ask (a)

If cannot get to toilet (3)

(a) What does (she) use?	Commode	4] ask (a)
	Chamber	5] ask (a)
INDIVIDUAL	bed pan	6] ask Qn. 210
PROMPT	Tube or catheter	7] ask Qn. 211
CODE ALL THAT	MEN ONLY- Bed bottle	8] ask Qn. 212
APPLY	Other appliance or method	9] ask Qn. 213
	(specify)	

If uses commode chamber, other appliance, (4, 5, 9)

209. Can (she) get to the (appliance ..) on (her) own or does (she) have to have someone to help (her)?

Can use on own	1] ask (a)
Has to have help	2] ask (b)-(d)

If can use on own (1)

(a) Who assists it?

Go on to Qn. 214 U.L.E.S.  
 1] ask (a) - ask Qn. 210  
 2] ask (a) - ask Qn. 211  
 or bed bottle - ask Qn. 212

If has to have help (2)

(b) Who helps (her) and assists it?

----- help  
 ----- assists it

(c) About how many times a day does (she) normally need help with the (appliance ..)?

(d) And what about during the night? Does (she) use it

RUNNING	Practically every night	6] ask (i)
PROMPT	Two or three nights a week	7] ask (i)
	About once a week	8] ask (i)
	or not very often?	9] ask (i)

If uses during night (6, 7, 3)

(i) On the nights (she) uses call someone, it usually only once, or is it more often?

(If more often, specify usual number of times)	usually only once	1
	no. of times	-----

Go on to Qn. 214 U.L.E.S.  
 also used bed pan - ask Qn. 210  
 or catheter tube - ask Qn. 211  
 or bed bottle - ask Qn. 212

- special care 5 -

If uses bedpan (6)

210 Does (she) keep it handy, or does (she) have to call someone to give (her) the bedpan during the day?

Keeps it handy ..... 1 ask (a)  
Has to call . . . . . 2 ask (b)-(d)

cd 2

If keeps handy (1)

(a) Who empties it?

GO ON TO Qn.214 UNLESS  
also uses catheter, tube - ask Qn.211  
or bed bottle - ask Qn.212

If has to call (2)

(b) Who gives it to (her) and empties it?

----- gives it to her  
----- empties it

(c) About how many times a day does (she) usually

need to be given a bedpan? .....

(d) And what about during the night? Does (she) need it

Practically every night ..... 6  
Two or three times a week ..... 7 ] ask (1) cd 5  
About once a week ..... 8  
Not very often?..... 9

If uses at least once a week (6, 7, 8)

(i) On the nights (she) does call someone is it usually only once, or is it more often?

Usually only once ..... 1  
(If more often, specify usual No. of times .....  
number of times)

GO ON TO Qn.214 UNLESS  
also uses catheter, tube - ask Qn.211  
or bed bottle - ask Qn.212

If uses tube or catheter (7)

211. Does (she) need any help because (she) has to use the tube (catheter)?

Yes . . . . . 1 ask (a) cd 52  
No . . . . . 2

If needs help (1)

(a) What needs to be done?

GO ON TO Qn.214

GREY

- special case 6 -

If user bottle (8) - ask Qn. 212 and 213

212. Does he have to call someone to give him the bottle, or does he keep it handy during the day?

Has to call . . . 1 ask (a)  
keep it handy . . . 2

If has to call (1)

(1) About how many times a day does he have to call for it?

213 And what about during the night? Does he keep it handy, or does he have to call someone during the night?

Has to call . . . Y ask (a)(b)  
Keep it handy . . . X

If has to call (Y)

(Y) Does this happen

Practically every night . . . 6  
Two or three times a week . . . 7  
About once a week . . . 8  
Not very often . . . 9

(1) And on the nights he has to call someone, is it usually only once, or is it more often?

Usually only once . . . 1  
(If more often specify usual number of times) No. of times . . .

ASK ALL

214 Can (she) brush and comb (her) hair, or does someone have to do it for (her)?

Bald . . . X  
Can brush or comb own hair . . . 1  
Someone has to do it . . . 2

215 Can (she) dress or undress (her-self), or change (her) clothes without help, or does someone have to help (her)?

Can dress/undress . . . 4 on to Qn 216  
Needs help . . . 5 ask (a)

If needs help (5)

(a) Can (she) do

Most of (her) own dressing . . . 7  
Only some things for (her-self) . . . 8  
or Do you have to do practically all (her) dressing for (her)? . . . 9

- special care 7 -

216. Can (she) change (her) position in bed without someone helping (her)?

Can change position . . . 3 on to Qn.217  
Needs help . . . . 4 ask (a)(b)

If needs help (4)

(a) How often during the day does (she) need help to change (her) position in bed?

(b) How often during the night [does (she) need help in changing (her) position in bed?]

Code Qns. 217 and 218 if observed or already known, otherwise ask subject or proxy -

Yes No

217. Can (she) make (her) wishes known by speaking?

0 1 ask (a)

If not

(a) in writing?

0 2 ask (b)

(b) by signs?

0 3

218. Can (she) on (her) own, a) get out of bed?

0 4

b) get out of (her) chair?

0 5

c) walk unaided (no sticks)?

0 6

d) use stairs unaided?

0 7

GREY

- special care 8 -

ASK Qns. 219-221 of FRISKY only. OUT OF HEARING OF INFORMANT  
If interviewing subject, or subject present, go on to Qn. 27 (white) and defer the rest of the questions in this section till end of interview. Place this page at end of rest of Schedule NOW - so you do not forget.

- 219 Does (she) have any trouble holding (her) water?
  - Yes .. 1 ask Qn.220
  - No . . 0 on to Qn.221
- 220 Does (she) wet (her) clothes, or the bed?
  - Wets clothes .. 2
  - Wets bed .. . 3
  - Neither .. . 4
- 221. Does (she) soil (her) clothes or the bed?
  - Soils clothes 5] ask (a)(b)
  - Soils bed . . 6]
  - Neither . . . 7

Check back to Qn 220 If code 2 or 3 ask (a), otherwise go on to Qn.27 page 16 - in schedule

If soils or wets clothes or bed (2, 3, 5, 6)

- (a) How often do you have to change (her)?
- (b) Do you use anything to protect the bedding or clothes?

- Yes .. 1 ask (i)-(iii)
- No . . 2 ask (iv)-(v) unless very infrequent soiling when on to Qn.27 page 16, main schedule

If uses protection (1)

- (i) What do you use?
- (ii) Who supplies (item used)?

(iii) Do you (someone in household) have to pay for them/it? If so, how much? (Note how often)

If no protection used (2)

- (iv) Does the local authority run a laundry service to help people like yourself?
  - Yes . . . . . 5
  - No . . . . . 6
  - Don't know . . . . . 7
- (v) Did you know you could get pads supplied free by the Health Department?
  - Yes .... 8
  - No .... 9

GO ON TO QN 27, page 16, MAIN SCHEDULE

1. Date of interview 15/16/77

2. Person interviewed 18/9, 20/24  
DAY MONTH

Subject (singly) 1  
Subject (jointly) 2  
Subject interviewed by proxy 3  
Proxy (state relationship) 4 **SC**  
**22**

Serial Nos. 8 9 10 11 12 13 14

0	0	0	0	0	0	0
1-9	1-9	1-9	1-9	1-9	1-9	1-9

(Blank = 0) (BLOC) (CIPC)

(v) Name of subject .....  
Address .....

If a subject is at home but is too confused or ill to be interviewed, or too ill to be interviewed following a primary illness where an interview may be carried out at a later date, someone who is responsible for looking after the subject (a proxy) should be asked.

(vi) If Refusal - Reason - giving as much detail of capability as possible, e.g. if neon, amputee, active/walks with stick, etc., or out at work. Get Household composition inc. as much detail as possible.

WHITE SCHEDULE

IF MORE THAN 8 LINES, PUNCH O/C 4 ON COL 80 OF FIRST "B" CARD

23/24

any age 100 above punch as 99

(iv) HOUSEHOLD COMPOSITION

SSS code entered in this column

(a) Relationship to subject	(b) PIN code to indicate subject	(c) Sex M/F	(d) Age	(e) Marital Status Md. Sgl. Wd.	(f) Working? (any number of hours) Full Part Unemp. Sick time (unpaid) N/wife Student	(g) Bedfast or Chair rest	(h) Able to get on?
<u>25/26</u>	<u>1</u>	<u>SC</u>	<u>30</u>	<u>SC</u>	<u>31</u>	<u>CC</u>	
<u>32/33</u>	<u>2</u>	<u>12</u>	<u>35</u>	<u>37</u>	<u>38</u>		
<u>39/40</u>	<u>3</u>	<u>12</u>	<u>41</u>	<u>42</u>	<u>43</u>		
<u>46/47</u>	<u>4</u>	<u>12</u>	<u>48</u>	<u>49</u>	<u>50</u>		
<u>53/54</u>	<u>5</u>	<u>12</u>	<u>55</u>	<u>56</u>	<u>57</u>		
<u>60/61</u>	<u>6</u>	<u>12</u>	<u>62</u>	<u>63</u>	<u>64</u>		
<u>67/68</u>	<u>7</u>	<u>12</u>	<u>69</u>	<u>70</u>	<u>71</u>		
<u>74/75</u>	<u>9</u>	<u>12</u>	<u>76</u>	<u>77</u>	<u>78</u>		<u>o/c 4</u>
<u>32/33</u>	<u>9</u>	<u>12</u>	<u>34</u>	<u>35</u>	<u>36</u>		
<u>40/41</u>	<u>10</u>	<u>12</u>	<u>42</u>	<u>43</u>	<u>44</u>		
<u>47/48</u>	<u>11</u>	<u>12</u>	<u>49</u>	<u>50</u>	<u>51</u>		
<u>54/55</u>	<u>12</u>	<u>12</u>	<u>56</u>	<u>57</u>	<u>58</u>		
<u>61/62</u>	<u>13</u>	<u>12</u>	<u>63</u>	<u>64</u>	<u>65</u>		
<u>68/69</u>	<u>14</u>	<u>12</u>	<u>71</u>	<u>72</u>	<u>73</u>		
<u>75/76</u>	<u>15</u>	<u>12</u>	<u>74</u>	<u>75</u>	<u>76</u>		

media  
7  
CIP

a	b	c	d	e	f	g	h	i	k	m	n	o							



... you

... likely to apply or if estab at  
... at one or more

... ( ... ) ( ... help with) .....? Yes...  
No... (1) - on to 6 6

8

... ( ... )

... when you got better? No. of weeks ago.....

9, 10

... how long before that you (had difficulty)? No. of weeks..

... (name from postal questionnaire)  
... trouble (cause)?

PUNCH 3 SETS  
OF DIGITS

( ... )  
11, 12, 13  
14 15, 16  
17 18 19  
20, 21, 22  
P.C.  
X X X S.C.

Have you ever had (named difficulties, not cause) before this  
last time? Yes.....  
No.....

S.C. 23  
(1) - ask (a)  
(2)

(a) Has your doctor told you if this (these) trouble(s) is (are)  
likely to recur (as a result of your accident etc.)?

Yes, likely to recur.....  
Not likely to recur.....  
Doctor didn't say.....  
Not seen doctor.....

S.C.  
(1) see note  
see  
interview  
(6) - ask (1)  
(7)

... (6 7)

(2) Do you think it has cleared up for good now?

Yes, none so.....  
No.....

S.C.  
(8) see  
interview  
(9) see note

If likely to recur- explain we want to see  
how such difficulties inconvenience people -  
we w'd like to ask some questions about when  
she/he had have difficulty

nb. codes 06Y

question 6 For 11. a. a. a. a. check on where main <sup>become</sup> 06X  
or "see 2 - 0 6. "Did your doctor say you have ... 054 model type  
058

24

What does your doctor say is the matter with you?

Note

MC = 3  
0,1  
0,1  
0,1  
0,1

Doctor doesn't say ...  
hasn't seen doctor ...  
D.N.A. Amputation ...  
D.N.A. Blind ...  
doctor says (specify) ...

197  
sc  
Y  
0  
3  
9

doctor doesn't say (Y, X) 19

(a) What do you think is the matter with you?

mb codes 06X = 059  
06Y = 058

SIX 3

ONE OR MORE COMPLAINT GIVEN IN 6 OR 6a

if one of the  
of codes 0,1, 04-100

7. Which of these complaints (name them) causes the most difficulty?

0,1  
04-100

QNS 8-9 refer to main complaint

8. How long ago did this (main complaint) start causing you difficulties?

For amputees/blind - ask "How long ago did you lose your ... (leg/arm/eye)?"

ONE Within last year ...  
CODE No. of years ago ...  
ONLY From birth ...

0  
1-99  
Y

If difficulty remembering, try to get estimate and record here

age - 57 code 0 1 99 0 1 99 3(A) DN

(a) How old were you (age) years old when your difficulty started  
Yrs. old ....

0  
1-99

If (disability) started causing difficulty less than a year ago .. code ...  
i.e. code 0 at Q. 8

Y  
0  
1-99

9. During the last year has there been any change in your condition? How do you say your (disability) is

Better now than it was a year ago ...  
Worse now ...  
or About the same as it was a year ago? ...

1  
2  
3

(a) Has it ever been better/worse?

12

... drugs, tablets, medicine or using  
 ... (complaints which cause difficulty -  
 Yes ...  
 No .....

S.C.  
 1 ask (u)  
 2

67

... of a doctor, or do you buy the  
 ... the one is?

CODE FORM Bought from chemist .....  
 IF APPLY Prescribed .....

S.C.  
 3 ask (2)  
 4 ask (11)

(1) ...

(2) ... do you spend a week on things which are  
 not prescribed?  
 [Check - that's just for the things you use]

Out of pocket a. 68/69  
 C. 1-11 d. 75/76

(3) ...

(4) For the things that are prescribed, are you exempt  
 from payment (can you claim it back), or do you have  
 to pay for your (drugs/medicine/tablets, etc.)  
 yourself?

Exempt/claims back .....  
 Have to pay .....

S.C.  
 0 on to 72  
 1 on to 72

... to know how much it costs you a week .... so if you could tell  
 me (for each item) how long your prescription lasts, I can work it out

No. of more than one	Prescription lasts	Cost of prescription		Approx cost per week
		2c. 6d.	Other	
		1		
		:		
		:		
		1		

73/74 75/76  
 Out of pocket = 0, 1-11  
 or = S.C.  
 on calc. 73/74 only

... drugs and medicines, (etc.), are you having any  
 (other) reactions

From your own doctor?  
 At a hospital? .....  
 Anywhere else? .....

S.C.  
 1 ask 77  
 2 S.C.

Special sample  
 78 = 5 = GREYS

79 = 4 groups = CAPN C

CARD THE SERIAL 3-7

12. Do you see your doctor regularly - I don't mean just calling for a prescription - but actually seeing him?

Yes .....  1 - ask (a)  
 No .....  2 - ask (b)

SC  
 1  
 2

If seen regularly (1)

(a) How often do you see him?

ONE CODE ONLY  
 More than once a week .....  
 Once a week .. .....  
 Every 2 or 3 weeks .....  
 Once a month/4 weeks .....  
 Other periods (specify) .....

3  
 4  
 5  
 6  
 7  
 8, 9  
 0, 1

8

SC

GO ON TO QN.13

If not seen regularly (2)

(b) How long ago was the last time you saw him (for yourself)?

CODE FIRST THAT APPLIES  
 Within last week .....  
 Within last month .....  
 Within last 3 months .....  
 Between 3 and 6 months ago .....  
 Between 6 and 12 months ago ..  
 Years ago (specify) .....

4  
 5  
 7  
 8  
 9  
 1-3, 5,  
 0, 2, 4, 6

9

SC

13. Have you paid to see a private specialist (consultant) about your .... (main complaint) since the National Health started?

Yes .....  1 - SC 10  
 No .....  2

1  
 2

14. Have you ever consulted anyone who is not a medical doctor about your (main complaint), [such as a faith healer, osteopath, chemist, etc.]?

Yes, consulted .....  0 - ask (a)(b)  
 No .....  1

0  
 1

If Yes (0)

(a) Who was it?

Faith/spirit. healer .....  
 Osteopath/manipulator/onesetter .....  
 Homoeopath/herbalist .....  
 Psychologist .....  
 Other (specify) .....

2  
 3  
 4  
 5  
 6

11

SC

(b) Has the visit of any help to you?

Yes helped .....  Y  
 No .....  X SC

Y  
 X  
 S

CARD # E

13. Do you regularly suffer from any other chronic illness or any condition which makes it difficult for you to get about or do your work?

Yes ..... (X) 1  
No ..... 2 S.C. ask (a) 12

Yes (1) 6.  
(a) What is the matter?

PUNCH AS SIX 3-DIGIT CODES

011-162 MC  
13-15  
16-18  
19-21  
22-24  
25-27  
28-30

I'd like to ask about your eyes, next ... [code or check if observed]

16. Can (could) you recognise people you know if you were to see them across the street (wearing glasses if applicable)?

Yes, could recognise ...  
No .....

NOTE  
IF Q16 & 17 ARE BOTH Coded X THEN U = N.F. AT Q16 ONLY.  
7, X  
8  
9 S.C. 31

17. Can you usually see to read ordinary print (show leaflet) like this, and see to write (wearing glasses if applicable)?

Yes, can see to read/write .....  
Cannot read/write (illiterate) .....  
No, can't see unless uses magnifier, etc. ....  
No, can't see .....

1  
2  
3  
4  
5 S.C.

18. - [Code if observed]

Can you hear ordinary conversation (with hearing aid working if applicable)?

Yes .....  
No .....  
Says yes, but difficulty observed .....

6, 7, 8  
8  
9 S.C. 32

19. - [Use as check question if observed or unlikely]

Do you have any artificial limbs?

No .....  
Yes (describe fully) .....

(X) 0  
1 S.C. 33

State right/left - for limbs above/below knee or elbow

If coded (1) -> (2-9) MC

CARD E

has been observed

18. Can you usually get out of the house if the weather is not too bad?

Yes ..... Y - ask (a)  
 No, housebound ..... X - on to Qn 21

[Only to garden/front gate = No]

if - can get out (Y)

(a) Can you usually get out

on your own without sticks or aids and without difficulty .....

RUNNING PROMPT

on your own but only with aids or difficulty .....

or can you only get out if someone is with you? .....

34  
 S.C.  
 0 - on to Tests  
 1 - on to Qn 22 next pg.  
 2 - ask (i) (ii)  
 3 - on to Tests

if cannot get out or own (2)

(1) Who usually goes with you?

1-6, 9 S.C. Y, X  
 7, 8 N.C. 35  
 10 S.C.

(11) Can you generally get someone to go with you (take you out) when you want to go?

Yes ..... 3 S.C.  
 No ..... 4

36

if housebound (X), or not on own (2) [Check/code if obvious]

21. But can you Get about the house (walking or wheelchair)...  
 RUNNING PROMPT or Do you have to sit in a chair when you're up...  
 or Can't you leave your bed? .....

S.C.  
 1 on to Qn.22  
 2 ask (a)  
 3 ask (b) overleaf  
 3 ask (c) overleaf

if chairfast (2)

(a) Can you get in and out of your chair on your own without aid, or do you have to have someone to help, or a mechanical aid?

Sticks, etc are counted as mechanical aids.

On own without aid ..... 6 S.C.  
 Someone to help ..... 7 N.C.  
 Mechanical aid ..... 8 - ask (i) - (iii)

if has mechanical aid (8)

(1) Could you describe it to me?

37  
 6 S.C.  
 7 N.C.  
 8 - ask (i) - (iii)

1-5 N.C. 38

Parts (ii) & (iii) D.N.A. (codes 3 or 4 w (i))

(11) Who was responsible for having it put in?

39  
 7  
 1-9, X S.C.

(111) How much did you have to pay towards it?

[If hired state amount and period] Nothing .....

40  
 0  
 4, X, 1-9 S.C.

(100 212 .)

Get in and out of bed (2)

Do you get in and out of bed on your own without aid, or do you have to have someone to help, or a mechanical aid?

Scissors, etc. are counted as mechanical aids.

- On own without aid
Someone to help
Mechanical aid

6 - on to Qn.22
7 - see note below
8 - ask (1)-(11)
9, 10 - for each column (max = 2)

41

as mechanical aid (8)

(1) Could you describe it to me?

(2) Who was responsible for having it put in?

Parts (1) & (2) D.N.M. (codes 3 or 4 at 6))

1-5 n.c. 42
1-5 m.c. 43
4 44
or 1-9, x sc
45
1-9, x

(3) How much did you have to pay towards it?

If hired, state amount and period

Nothing
\$

46
0, 47
4, 1-9 sc

IF UNWILLINGLY BEDFAST or CHAIRFAST and cannot get about room in wheelchair GO ON TO TESTS.

5

For those whose only disability is non-locomotive - e.g. Blind/epileptic ... (code)

6 - Go on to Tests

2. Do you have any walking aids such as a stick, crutches, wheelchair or anything else?

Describe stick or blind

- No aids
One stick (umbrella used as stick, etc.)
Two sticks
Walking frame/tripod, etc.
Wheelchair
Elbow crutches ... ring 1 or 2 crutches and code
Shoulder crutches ring 1 or 2 crutches and code
Calipers/built-up shoes at least 1" on sole
Other (describe fully)

7 - Go on to Tests
8 - Go on to Qn.25
9 - ask qns. 23-25 for each aid
10 - ask qns. 23-25 for each aid
11 - ask qns. 23-25 for each aid
12 - ask qns. 23-25 for each aid

48/49

CODE ALL THAT APPLY

1-9 col 48
10-13 col 49
as 2/1/43

END OF CARD E.

CARD F

for each column (max no of cols = 5)

1. ...  
 ...  
 ...

10/11      19/20      28/29      37/46  
 38/47

2. ...  
 ...  
 ...  
 ...  
 ...

(1, 1)	12	21	30	39/48
SC	13	22	31	40/49
1 ask		2 ask (a)	2 ask (a)	
2 ask (a)		3 ask (b)	3 ask (b)	
3 ask (b)		4 ask (a, 25)	4 ask (a, 25)	

3. ...  
 ...  
 ...

(2, 1)	14	23	32	41/50
--------	----	----	----	-------

4. ...  
 ...  
 ...

(3, 1)	15	24	33	42/51
--------	----	----	----	-------

5. ...  
 ...  
 ...  
 ...  
 ...

(4, 1)	16	25	34	43/52
1 ask (a)(b)		1 ask (a)(b)	1 ask (a)(b)	
2 ask (b)		2 ask (b)	2 ask (b)	
3 ask (a)		3 ask (a)	3 ask (a)	
4		4	4	

6. ...  
 ...  
 ...

(5, 1)	17	26	35	44/53
--------	----	----	----	-------

7. ...  
 ...  
 ...

(6, 1)	18	27	36	45/54
(2, 1) r.c.				
(2, 2) r.c.				



TESTS OF MOTOR CAPACITY

NOTES FOR SCORING TESTS OF MOTOR CAPACITY

NO PERSONAL ASSISTANCE SHOULD BE GIVEN IN PERFORMANCE OF TESTS (E.G. TEST OBJECTS SHOULD NOT BE PLACED IN SUBJECT'S HANDS, NOR SHOULD HELP BE GIVEN TO GET OUT OF A CHAIR)

SCORE 0 FOR ANY ACTIONS PERFORMED -

- a) IN LESS THAN ABOUT 15 SECONDS EACH HAND - UNLESS OTHER STATED (EXCEPT FOR WALKING 12 PACES ALLOW ABOUT 60 SECONDS)
- b) WITHOUT HELP OF OBJECT (E.G. STICK, WALKING FRAME, CALIPERS, HAND RAIL, ARTIFICIAL LIMB)
- c) WITHOUT EXPRESSED PAIN, PANTING OR SWAYING
- d) WITHOUT ANY ABNORMAL COMPENSATORY MOVEMENT(S), PARTICULARLY AS SPECIFIED IN EACH TEST

SCORE 1 FOR ANY ACTIONS PERFORMED -

- a) IN ABOUT 15-60 SECONDS (EXCEPT FOR WALKING 12 PACES ALLOW FROM 1 UP TO ABOUT 3 MINUTES)
- b) WITH HELP OF OBJECT (E.G. ARM SUPPORTED BY FLAT SURFACE, ARTIFICIAL LIMB, HAND RAIL, WALKING FRAME, CALIPERS, STICK)
- c) WITH EXPRESSED PAIN WITH ABNORMAL COMPENSATORY MOVEMENTS (I.E. IN A WAY QUITE DIFFERENT TO THE DEMONSTRATION) PARTICULARLY AS SPECIFIED IN EACH TEST, SWAYING, OR PANTING INDUCED BY ANY ACTION.

SCORE 2 FOR ANY ACTIONS WHICH

- a) ARE NOT UNDERTAKEN BECAUSE OF MEDICAL ADVICE
- b) ARE NOT UNDERTAKEN BECAUSE SUBJECT DOES NOT FEEL CAPABLE
- c) ARE NOT UNDERTAKEN BECAUSE FAILURE OF PRIOR TEST EXCLUDES SUBJECT FROM TRYING
- d) ARE NOT COMPLETED IN THEIR ENTIRETY
- e) ARE PERFORMED IN MORE THAN ABOUT 60 SECONDS (OR MORE THAN ABOUT 3 MINUTES FOR WALKING 12 PACES)

IF SOME ITEMS ONLY REFUSED.

- a) BECAUSE INFORMANT SAYS DOCTOR FORBIDS, OR CANNOT PERFORM - ENTER SCORE 2 BUT CODE X, NOT OBSERVED.
- b) BECAUSE INFORMANT DOES NOT AGREE TO AN INDIVIDUAL TEST ("Silly, can't you take my word", etc.) - CODE REFUSED - "Y".

LINK SCHEDULE

UPPER EXTREMITY FUNCTION TEST

CARD A

22 9  
1  
X  
0 SC

1. If not observed insert code  
2. If not observed insert code  
3. If not observed insert code

Check - are you normally ..... Right handed  
Left handed  
Ambidextrous

FUNCTION	Score	
	Right	Left
<u>For each test</u>		
<u>1. GRASP, GRASP AND RELEASE</u> 1. Grasp weighted plastic tumbler, using thumb and at least <u>two</u> fingers, raise to mouth level from flat surface, the head remaining in usual position and hand held steady. Put down tumbler on surface.	0.1 2.2 3.4 23	0.1 2.2 3.4 24
<u>2. SHOULDER, FOREARM AND ELBOW MOVEMENTS</u> 2. Take tumbler in hand in the most comfortable way, turn to right side so that rim touches flat surface, turn to left side so that rim touches flat surface, using wrist, forearm and elbow only. (If obvious shoulder movement used to complete test, score 1).	25	26
<u>3. PITCH AND FINGER DEXTERITY</u> 3. Pick up pen which has tip pointing towards opposite hand, using thumb and at least <u>one</u> finger. Transfer in hand to writing position, between thumb and first finger present, or between first and second fingers. Put down again.	27	28
<u>4. MANIPULATION WITH BOTH HANDS</u> [allow up to 30 secs. for score 0] 4. Pick up and put together large nut and bolt, screw 1" up, unscrew. Both hands should be used. (if only one hand can be used score 1). 5. Pick up and put together small nut and bolt, screw 1" up, unscrew. Both hands should be used. (if only one hand can be used score 1).	29 30	
<u>5. ARM REACH MOVEMENTS (EACH ARM SEPARATELY)</u> Start with hands in lap in each case. For 6-9, bend in elbow up to 160° is acceptable for score 0. 6. Lower hand directly downwards with arm fully extended. 7. Raise hand directly above head, with arm fully extended. 8. Raise hand to shoulder height, with arm fully extended frontwards, so that hand is level with shoulder. 9. Raise hand to shoulder height, with arm fully extended sideways, so that hand is level with shoulder. 10. Touch back of head at nape of neck with hand, keeping head in normal position.	31 33 35 37 39	32 34 36 38 40
<u>6. MUSCLE STRENGTH</u> Lift 1 1/2 - 1b weight from flat surface - 11. to shoulder height (frontwards or sideways), with elbow either flexed or straight, not moving head or body. (Score 1 if head or body movement essential to complete test). 12. from shoulder height, lift weight above head height, with arm either flexed or extended, (frontwards or sideways), not moving head or body. (Score 1 if head or body movement essential to complete test). Lift 5-lb weight from flat surface - as above. 13. to shoulder height, 14. from shoulder height.	41 43 45 47	42 44 46 48

TOTAL UPPER EXTREMITY SCORE

PUNCH ALL OVERSCORES ON 1ST COL 0.1-52 49/50

(All 3 overcores)

FINR SCHEDULE.

CARD A

01 - 100 recorded in test code  
02 - 100 observed in test code  
03 - 100 in code 2

LOWER EXTREMITY FUNCTION TEST

TEST	SCORING	TEST	SCORING
<u>For each test (except I<sub>4</sub>-5)</u>			
1. Stand up from sitting position in armchair. (If rest or any other part of chair is used to assist, or if an artificial leg is worn, score 1). Recommended height of chair between 16" - 18".		51	0, 1 2, 2X 3, Y
2. Walk 8 steps (i.e. about 4 feet)		52	
3. Walk 12 steps (6 steps, turn and another 6 steps).		53	
(Score 1 if shoes built up 1" or more at the sole, if gait is uneven or body movement excessive, or if an artificial limb, crutches or other walking aid is used)			
No step available			
4. Mount a step 6" high from floor level, turn		54	0, 1, 2 3, Y
5. Descend from a step 6" above floor level		55	0, 1, 2 3, Y
(The procedure can be reversed if available step is below floor level).			
(Score 1 if stair-rail, crutch, stick, artificial limb or any other support is used to complete test. Also if excessive movement of trunk used to complete test).			
<u>If no step available (8)</u>			
(a) Could you go up one stair, or step up a kerb			
on your own without any difficulty or using a rail or other aid			0
or could you do it on your own only with difficulty or using an aid			1
or couldn't you climb a stair on your own at all?			2
<u>From standing position</u>			
6. From a standing position reach down to touch floor (anywhere) with finger-tips, using either hand and bending both knees. (If test can only be done with straight knee score 1).		56	0, 1 2, 2X 3, Y
7. Sit down from standing position in armless chair. (If an artificial leg is worn, or any other aid to sitting down is used, including the arm of a chair if only an armchair is available, score 1). Recommended height of chair between 16" - 18"		57	
8. From a sitting position reach down to touch floor (anywhere) with fingertips using either hand. (Score 1 if support of object is needed, e.g. stick or chair arm). (Note: A pick-up packet is not permitted).		58	
OC			
TOTAL SCORE FOR LOWER EXTREMITY FUNCTION	59/60	(2/3/4)	61/62 (2/3/4)
OC			
COMBINED SCORE FOR UPPER AND LOWER EXTREMITY FUNCTION	0, 1-68	(2/3/4)	0, 1-68 (2/3/4)
OC			

(all 3 overcaus may apply)

01. Could you go up a flight of stairs

on your own without any difficulty or using a rail or other aid	0
or could you do it on your own only with difficulty or using an aid	1
or couldn't you climb a flight of stairs on your own at all?	2
	3

67 S C

TOTALS WITHOUT I<sub>4</sub>-5      TOTALS WITH I<sub>4</sub>-5

PINK SCHEDULE

CARD A  
Either

If BLIND only, <sup>and</sup> no score on test .... 68  
on Qns M, N apply

(1) SC  
0110  
/ /  
/ section

Qn. N Some people feel better as the day goes on - others feel worse. Would you have found it easier or harder to do the things you've just done if I'd come at a different time, or doesn't it make any difference? Say I'd come .

(9)  
or

a) in the morning? D.N.A. (tested in morning) ..  
Easier in the morning ..... 69  
Harder ...  
About the same .....

(Y)  
(X)  
(0)  
(1) SC

b) in the afternoon? [roughly 1-5 pm] D.N.A. (tested in afternoon) ..  
Easier in afternoon . . . . . 70  
Harder . . . . .  
About the same .....

(2)  
(3)  
(4)  
(5) SC

c) in the evening? [after 5 pm] D.N.A. (tested in evening) ..  
Easier in the evening ..... 71  
Harder . . . . .  
About the same .....

(6)  
(7)  
(8)  
(9) SC

\* if most things done with ease - omit "easier"  
if most things impossible omit "harder".

Qn. N Some people have disabilities where they have good days or bad days, or good and bad spells.

Does your (disability) work like this, or is it much the same all the time?

Much the same all the time .....  
code both if apply [ Has good/bad days ..... 72  
Has good/bad spells .....

(0) SC  
(1) ml  
(2) - ask (a)  
(3) SC

If has good/bad days or spells (1, 2)

(a) Is today one of your good days or a bad day? - Good day  
Bad day 73

(1)  
(2)  
(3)  
(4) SC

END OF CARD A.

# CMD J

PERMANENTLY BEDFAST/CHAIRBOUND OR NEEDS A LOT OF HELP go on to special questionnaire.

SCORE ON TEST IS "0" - go on to Qn. 2) page 17, but code here ...

" " " " for Upper Extremities only is "0" - introduce and ask items 1-4 inclusive...

" " " " for Lower Extremities only is "0" - " " " " " 3-9

If Scores at least "1" on both extremities - introduce and ask all items,

8  
0  
Y  
X  
8

## SECTION 22 INTRODUCE -

reviewed you had some difficulty [with one or two items] - which might make it difficult for you to do some things for yourself. May I just check?

CODE	Difficulty		DIFFICULTY (1) use (a), (b) and (c)								
	to difficulty	difficulty	(a) Can you do it on your own even with difficulty		(b) Do you usually have someone (coming in) to help you with it?		(c) Do you use any special aids or gadgets to help				
			Yes	No	No	Someone in h/d (specify)	Someone outside h/d (specify)	Yes	No		
1. Getting in and out of bed on your own	0	1	2	9	3	4	5	10	11	8	9
2. Getting to and using the toilet	0	1	2	13	3	5	14	15	8	16	9
3. Taking a bath (if no bath)	0	1	2	17	3	5	18	19	8	20	9
4. Washing an all over wash	0	1	2	21	3	5	22	23	8	24	9
5. Dressing your neck and face	0	1	2	25	3	5	26	27	8	28	9
6. Putting on shoes and socks or stockings yourself	0	1	2	29	3	5	30	31	8	32	9
7. Doing up buttons and zips yourself	0	1	2	33	3	5	34	35	8	36	9
8. Dressing other buttons and shoes	0	1	2	37	3	5	38	39	8	40	9
9. Feeding yourself	0	1	2	41	3	5	42	43	8	44	9
10. Cleaning and brushing your teeth	0	1	2	45	3	5	46	47	8	48	9
11. Washing your hair yourself	0	1	2	49	3	5	50	51	8	52	9

## SECTION 23 SPECIAL AID USED IN (c)

Record Code	(i) Describe aid	(ii) Who supplied/did it?	(iii) Was it free? If not specify cost. If per session don't forget to write session
53	<u>NO HANDS 27</u>	52 (1-9.X)	0 (1-5-7-9) & c
56		57	0 58
59		60	0 61
62		63	0 64
65		66	0 67
68		69	0 70
71		72	0 73

END OF CMD J.

Have you ever heard of the Local Authority Register of unemployed persons?

If so, is this run by Man. Labour, say, "No"

Yes.....
No.....
Don't know/not sure.....

sc 8 206
NA = 0 - on to Q 29
1 - ask (a)
0 - on to Q.28

(c) Do you know what sort of people this register is for?

No.....
Yes (specify).....

1
2
3-5
NA = 9

If any indication they think it is ONLY for workers or people who can't work, say - "No, that's the Industrial Register" - and go on to Q 28.

(c) Are you yourself on this register (with this authority)?

Yes, registered.....
No, not registered.....

sc 2, 3
NA = X
3 - ask (1)
4 - ask (1v) next page

(a) For how long have you been registered? yrs. mos

4, X, 0
1-15 sc 11/12

(b) What benefit has it been to you?

None.....

0
1-6, 9 sc 13

(iii) Is this -

PROMPT AS APPLICABLE

More than you expected?.....
What you expected?.....
or did you expect them to do more?.....

sc 1
2 - on to Q.29
3 - ask (A)
NA = 2 sc 14

If a worker more (x)

(A) What did you expect?

ON TO QN. 29

(Conta ...)

If not registered (4)

(iv) Is this because you don't consider yourself to be handicapped or is there some other reason?

Don't consider handicapped ... 15  
 Other reason (specify) .....

0  
 X  
 1  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 N/C

ON TO Q. 29

TO CLOSE NOT KNOWING ABOUT REGISTER, or confusing with M.O.L.

PROP 22. All local authorities must keep a register of handicapped people, and help them where they can.

23. If you had known about this register, would you have registered with them?

Yes .... 16  
 No .....

0  
 X  
 1  
 2  
 N/C

Q. 24 (2)

(a) Is this because you don't consider yourself to be handicapped or is there some other reason?

Don't consider handicapped ...  
 Other reason (specify) .... 17

0  
 X  
 1  
 2  
 N/C

29. Do you have any of these come to visit or help you now? (at present - exclude breaks like home help ill, etc.)

	No	Yes	If Yes			
a) Home help	18	0 x 1	19	How many hours a week?	19	233/234
b) Meals on Wheels	21	0 x 2	22	How many meals a week?	22	235
c) District nurse/nurse	23	0 x 3	24		24	236
d) Health visitor	25	0 x 4	26	How often does she come?	26	237
e) Social worker	27	0 x 5	28		28	238
f) Occupational therapist	29	0 x 6	30		30	239
g) Physiotherapist	31	0 x 7	32		32	240
h) Orthopedy	33	0 x 8	34	How often do you have your feet done?	34	241
i) Any other health/welfare services? (specify)	35	0 x 9	36		36	242
	37	11	38		38	243
	39	17	40		40	244
	41	19	42		42	245
	43	19	44		44	246

NOTE: Final - 1/7/80 only as - cal - no direct - actual - code -

No

CARD K

Since you've had (disability) have you ever applied to the  
offices of a welfare association for any help, which  
they did not provide?

Yes... 45  ask (a)-(b)  
No.....

Yes (1)

(a) To whom did you apply?

(b) What help did you want?

(c) Do you know why they did not help you? ..

Col. 76 = 1  
REGISTERED WITH LA

(d) How long ago was that?

31. Do you think any of the health and welfare services I  
have just mentioned should do more to help you personally -  
or do you think they do enough?

Should do more.....  ask (a)  
Do enough..... 52   
Don't know.....

Do more (0)

(a) What more ought to be done (and by whom) to help  
you personally?

Could we talk about how you pass the time (when you are  
not working)?

32. Do you listen to the radio?

Does not listen  
 Does listen

Yes, listen.....   
Doesn't listen, but has radio..  55  
Doesn't listen, has no radio..

33. Do you watch television?

D N A Blind..   
No TV set.....   
Yes, watch.....  56  
TV, but doesn't view.....

Special Sample

col 75 = Y = GREYS  
col

SC

1-10

1-19

47/48 59/59 64/65 70/71

49 60 66 72

64/64 67/68 73/74

53/54

55

56

EXD OF CARD K



CARD L START

If permanently Bedfast or housebound - code and go on to Qr 38.  
If at this stage you know informant is working - code and go on to Qn. 35...

1011

34. Is there a Local Authority Centre for the Physically Handicapped you could get to if you wanted to go? - I don't just mean a social club.

Yes..... Y - ask (a)  
Never heard of one/Don't know.... N - on to  
Know of one, can't get there... O - Q 35 next  
"Not physically handicapped"... 1 - page

If Yes (1)

9

(a) Do you go to the Centre?

Yes, go to Centre..... 3 - ask (1)(72)  
No..... 4 - ask (111)

If Yes (goes to centre) (3)

(i) What do you do there?

10 X<sup>100</sup> 1-6,9 M.C

(ii) How do you get there? [if nec. check who provides transport]

CHE Transport provided by L.A..... 1  
CODE Private transport..... 2  
ONLY Public transport..... 3 ask (A)  
Walk/wheelchair..... 4

If public transport walk/wheelchair (3 4)

(a) How do you find it easier if the Local Authority were to supply transport to get you there and back?

11

Yes..... 5 go on  
No..... 6 do  
Other answers (specify)..... 7 Qn. 35

If does not go to Centre (4)

(iii) Is this because you are not physically handicapped, or is there some other reason?

Not physically handicapped... 8 S.C  
Other reason..... 9 - ask (a)

If other reason (1)

(a) Why don't you go there?

13

10-9  
3-5, 8-11, 6  
7-11

CAED L

35 Do you go to any Clubs nowadays?

Yes ..... A - ask (a)  
No..... 0 - ask (b)

16

(a) What sort of clubs?

- |       |  |   |
|-------|--|---|
|       | Old people/Silver Thread/D & J/etc.....    | 1 |
|       | working mens/social/bingo.....             | 2 |
|       | Womens Institute, Towns Womens Guild/Co-op | 3 |
| CODE  | Church club (ret OAP).....                 | 4 |
| ALL   | Freemasons/ Loc F/Brit. Legion, etc.....   | 5 |
| THAT  | Sports (Tennis/bowls/billiards/etc.).....  | 6 |
| APPLY | Disabled/Handicapped/blind.....            | 7 |
|       | Youth Clubs.....                           | 8 |
|       | Others (specify).....                      | 9 |

16  
A  
0  
SC

15 (b)

(b) Is this because of your (disability) or are there other reasons?

Because of disability..... 15  
Other reasons.....

Y  
Y

36 Is there any here you'd like to go, but can't simply because of your (disability)?  
[specify fully]

No, nowhere..... 16

0  
Y  
Y  
Qn. 38

37. Is this because your (disability) makes it hard for you to get there, or because once you're there, you can't get in?

CODE BOTH IF APPLICABLE

Hard to get there..... 17  
Can't get in.....

1  
2  
Y

28. Did you last year have a holiday (spend at least a week away from home for pleasure)?

(Approx.) No. of years ago ...  
Too long ago to remember.....

18  
0  
1-3  
4-6  
7-9  
10-15  
16-20  
21-25  
26-30  
31-35  
36-40  
41-45  
46-50  
51-55  
56-60  
61-65  
66-70  
71-75  
76-80  
81-85  
86-90  
91-95  
96-100

1-3, 4-6, 7-9, 10-15, 16-20, 21-25, 26-30, 31-35, 36-40, 41-45, 46-50, 51-55, 56-60, 61-65, 66-70, 71-75, 76-80, 81-85, 86-90, 91-95, 96-100

(a) Did you or your family arrange for your last holiday or was it arranged for you by the local authority or another organisation?

Self or family.....  
Organisation (specify).....

19  
1  
2  
3, 4  
5, 6, 7, 8, 9

[Use of holiday enjoyed - no need to record answer].

GO ON TO QN 39

1-3, 4-6, 7-9, 10-15, 16-20, 21-25, 26-30, 31-35, 36-40, 41-45, 46-50, 51-55, 56-60, 61-65, 66-70, 71-75, 76-80, 81-85, 86-90, 91-95, 96-100

(b) Has anyone offered you a holiday in the last 2 years?

Yes.....  
No.....

20  
1 ask (i) (ii)  
2 ask (iii)

1-3, 4-6, 7-9, 10-15, 16-20, 21-25, 26-30, 31-35, 36-40, 41-45, 46-50, 51-55, 56-60, 61-65, 66-70, 71-75, 76-80, 81-85, 86-90, 91-95, 96-100

(1) Who offered to arrange a holiday for you? [Name of organisation]

21  
1-9  
10-15  
16-20  
21-25  
26-30  
31-35  
36-40  
41-45  
46-50  
51-55  
56-60  
61-65  
66-70  
71-75  
76-80  
81-85  
86-90  
91-95  
96-100

(2) Why didn't you go?

22  
1-9  
10-15  
16-20  
21-25  
26-30  
31-35  
36-40  
41-45  
46-50  
51-55  
56-60  
61-65  
66-70  
71-75  
76-80  
81-85  
86-90  
91-95  
96-100

GO ON TO QN 39

1-3, 4-6, 7-9, 10-15, 16-20, 21-25, 26-30, 31-35, 36-40, 41-45, 46-50, 51-55, 56-60, 61-65, 66-70, 71-75, 76-80, 81-85, 86-90, 91-95, 96-100

(3) Would you like to go away anywhere for a holiday or a break?

Yes.....  
No.....

23  
1-9  
10-15  
16-20  
21-25  
26-30  
31-35  
36-40  
41-45  
46-50  
51-55  
56-60  
61-65  
66-70  
71-75  
76-80  
81-85  
86-90  
91-95  
96-100

1-3, 4-6, 7-9, 10-15, 16-20, 21-25, 26-30, 31-35, 36-40, 41-45, 46-50, 51-55, 56-60, 61-65, 66-70, 71-75, 76-80, 81-85, 86-90, 91-95, 96-100

(a) What stops you?

24  
1-9  
10-15  
16-20  
21-25  
26-30  
31-35  
36-40  
41-45  
46-50  
51-55  
56-60  
61-65  
66-70  
71-75  
76-80  
81-85  
86-90  
91-95  
96-100

1-3, 4-6, 7-9, 10-15, 16-20, 21-25, 26-30, 31-35, 36-40, 41-45, 46-50, 51-55, 56-60, 61-65, 66-70, 71-75, 76-80, 81-85, 86-90, 91-95, 96-100

(b) Why don't you want to go?

25  
1-9  
10-15  
16-20  
21-25  
26-30  
31-35  
36-40  
41-45  
46-50  
51-55  
56-60  
61-65  
66-70  
71-75  
76-80  
81-85  
86-90  
91-95  
96-100

C. D. L

Do you use a (of cr.) hobbes now?

No. ... 26  
Yes. ... 26

( ) at use your hobbes?

27/28/29/30/31/32/33/34/35

11-79 P.C.  
S. 2-2 S.C.

(part from hobbes mentioned) how else do you pass your time (when you're not working)?

No spare time... S. 11-12  
Nothing else... 26

0 2 12 S.C.

37 - 45  
Punch of same as above. sub.  
NA = 20

11-79 P.C.  
S. 2-2 S.C.

Do you need to give up anything you liked doing (in your spare time) because of your (disability)?

No. .... 46  
Yes (specify) ...  
NA =

0 2 11 S.C.

Sf 700 (Y)

47 - 55

Punch of same as above  
NA = 20

11-79 P.C.  
S. 2-2 S.C.

Do you have any other contact or how bound -  
to next section, and code . . . . .  
I've been talking about getting about - of C 42 plus

2. Do you yourself have a motor vehicle of any kind, which you drive?  
Have and drive . . . . .  
Have, but doesn't drive . . . . . **56**  
No vehicle . . . . .

Do you not accept drive on no vehicle (0.1)

(a) Does anyone else (living here) have a motor vehicle which you (could drive, or) are taken out regularly?  
Yes, can drive . . . . .  
Yes, taken out . . . . .  
No . . . . .

Yes, can drive or taken out (2.5)

(a) Whose vehicle is it? (relationship to subject)  
Father/wife . . . . .  
Child/parent/Sibling . . . . .  
Friend/boarder . . . . .

2.3 (4)

(a) Can you generally get a lift if you want to go anywhere?  
Yes, generally . . . . .  
No . . . . .

Do you not have motor vehicle - 10. 42 x 2 on 42 or 2 on 42(a)

43. Class or use what sort of vehicle it is? Is it a  
Invalid tricycle . . . . .  
Saloon/sports car . . . . .  
Estate car/van . . . . . **58**  
Motor bike/scooter . . . . .  
Other (specify) . . . . .

PROPT AS NECESSARY

44. Is it a standard model, or has it been adapted because of your (disability)?  
Standard model . . . . .  
Adapted . . . . .

Adapted (5)

(a) Who paid for adapting it?  
Self or relative/friend . . . . . **59**  
Employer . . . . .  
Ministry of Health/Scottish Home and Health . . . . .  
Other (specify) . . . . .

45. Do you have a disabled driver's car badge?  
Yes . . . . .  
No . . . . .

No badge (2)

(a) Is this because you haven't applied for one, or because you have applied and been refused?  
Haven't applied . . . . .  
Been refused . . . . .  
Other (specify) . . . . .

ON TO NEXT SECTION UNLESS THIS INVALID TRICYCLE - 10. 42 X 2 ON 42

Vertical column of handwritten notes and codes including: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100. Includes codes like 'ask (a)', 'ask (11)', 'ask (12)', 'ask (13)', 'ask (14)', 'ask (15)', 'ask (16)', 'ask (17)', 'ask (18)', 'ask (19)', 'ask (20)', 'ask (21)', 'ask (22)', 'ask (23)', 'ask (24)', 'ask (25)', 'ask (26)', 'ask (27)', 'ask (28)', 'ask (29)', 'ask (30)', 'ask (31)', 'ask (32)', 'ask (33)', 'ask (34)', 'ask (35)', 'ask (36)', 'ask (37)', 'ask (38)', 'ask (39)', 'ask (40)', 'ask (41)', 'ask (42)', 'ask (43)', 'ask (44)', 'ask (45)', 'ask (46)', 'ask (47)', 'ask (48)', 'ask (49)', 'ask (50)', 'ask (51)', 'ask (52)', 'ask (53)', 'ask (54)', 'ask (55)', 'ask (56)', 'ask (57)', 'ask (58)', 'ask (59)', 'ask (60)', 'ask (61)', 'ask (62)', 'ask (63)', 'ask (64)', 'ask (65)', 'ask (66)', 'ask (67)', 'ask (68)', 'ask (69)', 'ask (70)', 'ask (71)', 'ask (72)', 'ask (73)', 'ask (74)', 'ask (75)', 'ask (76)', 'ask (77)', 'ask (78)', 'ask (79)', 'ask (80)', 'ask (81)', 'ask (82)', 'ask (83)', 'ask (84)', 'ask (85)', 'ask (86)', 'ask (87)', 'ask (88)', 'ask (89)', 'ask (90)', 'ask (91)', 'ask (92)', 'ask (93)', 'ask (94)', 'ask (95)', 'ask (96)', 'ask (97)', 'ask (98)', 'ask (99)', 'ask (100)'. Includes 'N/A' and 'C'.

CARD L

Q. 43

Is your tricycle petrol driven, or electrically powered?

Petrol ..... 61  
Electrically powered

(2) SC

What is the longest journey you have done in your tricycle  
in a day?

No. of miles ..... 62/63/4

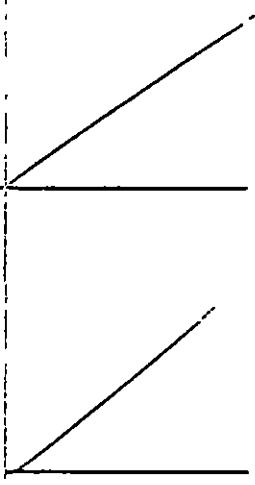
Has your tricycle ever been inconvenienced by not having a machine  
and your own tricycle was being repaired or maintained?

Yes ..... 65  
No ..... 65

(1) SC  
(1) - ask (1)  
(2)

(a) For how long were you without a tricycle?

(b) If you were not lent another tricycle?



Do you find there are any drawbacks because it is  
only a one-seater?

No .....  
Yes (specify drawbacks) ..... 66

of Yes (x) 66  
N (1) SC  
(1-3) MC

Do you find there are any advantages because it's only  
a one-seater?

No .....  
Yes (specify advantages) ..... 67 SC

Special  
Sa. - 67 C-17 = 8 = GRESS  
(col 78 4 80's

END OF CARD L.

51 - I'd like to go or not to ask you something about the work you have done - but since education and training is tied up with this, can you tell me ...

52 - How old were you when you left school (educational establishment) (completed full-time education)?

Never went to school ... ..  
 Left school aged ... ..  
 Still at school/university ... ..

89 SC  
 21/11/61  
 95/100  
 100/100

53 - How long did you go to school (yr)

(a) Why was that? [If private tutor back-code Qn. 51 as age completed full-time education]

52 Did you get any recognised certificates, qualifications or articles?

Yes .....  
 No .....  
 Nil - ask (a)

Yes (Y)

(a) What was the highest level at which you qualified?

- PUNCH 2 DIGITS
- University Degree/medical/vet./artistic qualifications ..... 1
  - Full membership of prof. inst. (incl. law, architecture, engineer) ..... 2
  - Diploma Technology/Humanities ..... 3
  - Teacher's Training/Cert. of Education ..... 4
  - S.R.N., S.C.M., Social Workers ..... 5
  - HND/HNC - (Higher National Dip. or Cert.) ..... 6
  - "A" level - university entrance ..... 7
  - OND/ONC (Ordinary National Dip. or Cert.) ..... 8
  - "O" level - General Schools, Matric. .... 9
  - City and Guilds ..... 10
  - U.S.A. or Commercial Certs. .... 11
  - Others (describe) ..... 12

11, 12  
 SC

53 Did you complete a formal apprenticeship, lasting at least 3 years, in any trade?

Yes, formal apprenticeship .....  
 No, no formal .....  
 Nil =

0 SC  
 2  
 13  
 4 SC  
 5

54 Have you had any (other) training/experience on the job, or in a Police Force, or in a Training Centre for a skilled or semi-skilled trade?

Yes .....  
 No .....

55 Code from questions 52-54

No qualifications/training .....  
 No qualifications/training .....  
 and transfer to Qn. 80 page 32

Y  
 X

Card 9

36. Do you at present doing any work for which you are paid (specify nature of work)?

Working .....  
Not working. ....

SC  
1 - 2 Qr. 70  
2 - ask (a)

(2)  
Why is this?

14

NO PAYS NECESSARY

Retired (incl. permanently disabled over retirement age) .....  
Housewife .....  
Off sick temporarily/temp. disabled .....  
Unemployed (can work if job available) .....  
Permanently disabled/unable to work again .....

SC  
2 - 2 Qr 57  
4 - 2 Qr 62  
5 - 2 Qr 67  
6 - 2 Qr 72  
7 - 2 Qr 57

if 9 coded end of 9/1/1942 FIFER

PERMANENTLY DISABLED

37. How old were you when you gave up work altogether?

NA

Never worked .....  
Yrs. XX, YY as 2 digits

SC  
ask Qn. 60  
15, 16

If disabled after retirement go on to Q. 91 next section - otherwise ask Q. 58

38. What job were you doing then (when you gave up altogether)? [Probe as usual on OCCUPATION]

NA

SC  
1, 3, 5, 11  
16, 17, x  
17, 18

39. Was this the sort of work you had been doing most of your life?

Yes, same sort of work .....  
Did many different jobs .....  
No .....

SC  
19  
ask (a)

(2)

(a) Did your (disability) have anything to do with your changing your usual sort of work?

Yes, due to disability .....  
No, other reason .....

SC  
Y  
O



Did your (disability) have anything to do with your giving up work altogether when you did (never having worked)?

Yes ..... 1 - ask (2) (0)  
No ..... 2

SC  
X  
1  
2

20

1-100 (1)

(a) Can you tell me why? Was it because there were (could be) difficulties

PROMPT  
i) Actually getting to your work place? ... 3  
ii) Doing the work itself? ..... 4 P.C.  
iii) Having to work the number of hours they wanted you to? ..... 5  
iv) Any other reason for giving up altogether (not working)? ..... 6  
(specify) ..... 7-4

NA - 3 SC.

Time for those never worked ..... 1

(a) At what age would you have retired if you had your choice?

After retirement age .... age .....  
Until retirement age ....  
Indefinitely, as long as possible ..... 3 S.C.  
Other answers (specify) .....

1  
1  
2  
3  
4  
5

21

NA = 4

vi. Have you ever been registered as disabled with the Ministry of Labour for employment purposes?

Yes, registered .....  
No, not registered .....

SC  
X  
1  
2

1-100 (1)

(a) Has this helped in any way? Yes, helped .....  
No .....  
How has it helped? .....

SC  
1  
2  
3  
4  
5

22

NA

Q 20, 1012 X Q 56(7), scale 2

Formerly by Benefit/Unemployment/over retirement age - or to work sector, other, ask Q1.62

Blind

Card 9

... ADULTS AND OVER 18 BUT UNDER 25 AGE

... subject to your doctor's agreement, to ...

Yes ... No ... 23

...

... If you are really keen, I might be able to arrange for ...

Like someone to call ... Think about it ...

...

(a) Why is that?

NA-9

GO ON TO NEXT SECTION

IF HOUSEWIFE

63 For old are you when you gave up work to become a housewife? [last occasion]

Never worked ... Yes ... 24 25

Check back to Qn. 8a - if disabled after giving up work ask Qn.64 - if disabled before/same time as giving up work ask Qn.65

... never or ec (3) - ask, or code if obvious

(a) How long because of your present (disability) or were there other reasons?

Disability ... Other reasons ... 26

64 How long you last worked (quote from Qn.63) (never worked). ...

Yes ... No ... 27

u (30 .. )

..... (1)

(a) "at stopped you" "could your (disability) have made it sufficient for you to

- PRO. 21 - i) got to your workplace? .....
  - ii) do the actual work you were used to? .....
  - iii) work the number of hours an employer would want? .....
  - CODE 22 AND APPLY and iv) or for some other reason, connected with your (disability)? .....
- (specify)

(7) SC 28  
 3 - SC  
 4 - SC  
 5 - SC  
 6 - SC

..... before giving up work

65. Did your present (disability) cause you to give up work when you did?

Yes ..... 1 ask (a)  
 No ..... 2

If Yes (1)

(a) What job were you doing then [occupation]?

IF YOU 60 OR OVER - END SECTION

..... code 'No' to

Otherwise ask

66. Would you be interested in getting a job again now?

Yes, interested ..... 1 - ask (a)  
 No, not immediately ..... 2 - go to next section

..... interested in getting a job (1)

(a) Have you tried to get a job?

Yes tried ..... 3 - ask (1)  
 No, not tried ..... 4 - ask (11)

..... (2)

(1) Why do you think you haven't been successful?

ON TO NEXT SECTION

(11) Why haven't you tried?

ON TO NEXT SECTION

29  
33

SC  
 1 - ask (a)  
 2 - go to next section

SC  
 3 - ask (1)  
 4 - ask (11)

SC

SC  
 SC 30

22

Card 9

STANDARD FORM 100

Q. How long have you been off sick because of your (into disability), or for any other reason?

Disability ..... 1 - 31  
Other reason ..... 2 - or - 70  
6 - 75

Q. How long have you been off sick [this time]?

Less than 1 week .....  
\_\_\_\_\_ yrs. \_\_\_\_\_ mos. \_\_\_\_\_ wks.

Answers only required if less than 1 month  
no answers only " " " " " , years

32  
DUA  
1-5 SC

Q. When do you expect to be able to start work again?

33  
N, 1-5 SC  
N 1 24

Q. Were you paid anything by your employer while off sick?

Yes, paid by employer ..... 1  
No, unpaid ..... 2

2 - Same (unpaid) - 12 wks 2 at Q70  
When you start working again, will you be going back to the same firm?

Yes, same firm ..... 3  
No, different firm ..... 4  
Don't know/expect to ..... 5

34  
SC  
3 - asc(2)  
4 - on to  
5 - 3-75  
6 - 1-  
7 - 77

3 - at same firm (3)

(a) Will you be going back to the same kind of work?

Yes ..... 7  
No ..... 8  
9 - onto Q77

If not going back to same kind of work (3)

(a) Why will you be changing the sort of work?

ON TO QN 77

Blue

Card G

73. How long have you been unemployed? Loss than 1 week .....  
 \_\_\_\_\_ yrs. \_\_\_\_\_ mos. \_\_\_\_\_ wks.  
 [months only required if less than 3 yrs.]

0-3-1-9  
 35

73. Did you leave your last job because of your (disability) or was there some other reason?  
 Yes, because of disability. ....  
 No .....

3 C.  
 1-1-275  
 36  
 2

If Yes, because of disability (1)  
 (a) Did you yourself decide to leave, or did some one else suggest it? (specify who suggested)  
 Decided myself .....  
 Suggested by employer or agent ...  
 " " doctor .....  
 " " other (specify) .....

2  
 4  
 5  
 6  
 37

74. How long had you been in your last job?  
 Less than 1 month .....  
 \_\_\_\_\_ yrs. \_\_\_\_\_ mos.  
 [months only required if less than 3 years]

0-3-1-10  
 38

75. Are you registered as unemployed with the Ministry of Labour (Employment and Productivity)?  
 Yes, special register for disabled persons .....  
 Yes, ordinary register .....  
 No .....

3 C.  
 39  
 3 - asc(a)

If not registered (3)  
 (a) Why not?

76. Do you think you will (would) have difficulty getting another job because of your (disability)? (Proceed for comments and reasons, reminding informants we are interested only in difficulties arising because of disability).

76. Do you think you will (would) have difficulty getting another job because of your (disability)? (Proceed for comments and reasons, reminding informants we are interested only in difficulties arising because of disability).

1-5 S.C.  
 2-4 7 C.  
 40

D-1 X  
 M-1 Y

Blue

Card G

2. ... EMPLOYER'S ...

... employer, ask of last job]

77. How many hours a week do (and) you work? [paid for]

NA = 17

NA  
17, 17  
17, 17  
17, 17

41, 42

on the G 93,

78. Who do you work for? - Are you -

- Self-employed ..... 0
- in Other employment- Civil Servant .. 1
- Local Authority ..... 2
- Nationalised Industry/Hospitals .. 3
- Private Co or employer ..... 4
- in Sheltered employment- Remploi .. 5
- Local Authority ..... 6
- Blind Association ... 7
- Voluntary Associations ..... 8
- Others (specify) ..... 9

S.C

43

FOR IT S  
NECESSARY

79. What is your actual job? [Proceed as usual on OCCUPATION]

2 digits

NA = 20

13, 5-1  
16, 17, 20

S.C

44, 45

80. CHECK BACK TO Q. 79 - If Code Y - some qualification ask Q. 81  
If Code X - no qualification ask Q. 85

S.C

EXPLANATION - You mention you have (quote qualifications)

81. Are you using any of your qualifications/training in your present job (last job if not now working)?

- Yes, using (some) qualns./training ..... 1
- No, not using any qualns./training ..... 2

NA

S.C

ask (a)

EXPLANATION (2)

(a) Have you ever had a full-time job where you have used any of your qualifications (training)?

- Yes ..... 3
- No ..... 4

S.C

2-35

46

82. Did you take a job where you weren't using your qualifications (training)?

NA = 16

13, 5  
2, 5

S.C

13, 4  
-9

S.C

47

Shun

Card 9

Do you have any difficulty getting a job because of your (disability)?

Yes ..... N/A  
 No .....  
 Never tried/not because of disability .....

SC  
 1  
 2  
 3  
**48**

84. Thinking about work in general, not any particular job. Does your (disability) limit or affect

a) The number of hours you can work? Yes **49**  
 No  
 b) The distance you can travel to work? Yes **50**  
 No  
 c) The chance of joining a pension scheme? Yes  
 No **51**  
 D.K.  
 d) The choice of jobs if you wanted a change? Yes  
 No **52**  
 D.K.

SC  
 1  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 SC  
 SC  
 SC

85. Are there any (other) disadvantages with regard to working arising from your (disability)?

No ..... N/A  
 Yes (specify) **53**

SC  
 1  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 SC

UNEMPLOYED GO ON TO NEXT SECTION

86. How long does it take you to get to work from where you live?

Works at home/no journey ..... N/A  
 Varies/work not in same place .....  
 Takes less than 5 minutes .....  
 Takes this number of minutes ... **55/54/57**

SC  
 1  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 SC

87. How do you usually get to work? (usual means of transport)

CODE [ Walk only (no other transport) ..... N/A  
 CODE [ Wheelchair only (no other transport) .....  
 [ Bicycle/peash car .....  
 [ Motor cycle/scooter, etc. .... **58**  
 [ Private car/van etc. as driver .....  
 CODE [ Private car/van etc. as passenger .....  
 [ Public transport .....  
 [ Family transport .....  
 APPLY [ Tricycle .....  
 [ Other (specify) .....

SC  
 1  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 0  
 SC

2 lines

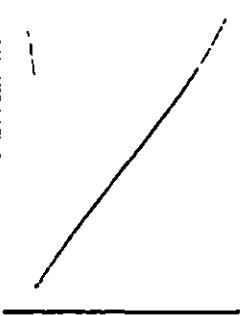
Card 9

Do you have any particular difficulties getting to work because of your (disability)?

Yes 59 Nil (1) - ask (a) SC  
No 0 (1)

\_\_\_\_\_

(a) What is (are) the difficulty(ies)?



Do you get to work by (method Qn 57) - is there some other mode of transport you would rather use, but can't because of your (disability)?

Yes 60 Nil (1) - ask (a)(c) SC  
No 0 (1)

None

(a) What form of transport would you like to use?

Car ..... 0  
Bus ..... 1  
Train ..... 2  
Other (specify) ..... 5  
61 (1) SC

(b) Why can't you use it?

62

(7, 8, 9) SC

How much a week does it cost you to travel to work?

Nil ..... 0  
1.3 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30  
1.3 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30  
1.3 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

63/64/65

- Is your tax as usual cost to informant?
- Do you get any refunds or subsidies from employers are deducted?

Card 9 ends



Do you do any of the household chores you might do -

Do you do most of the household chores, I mean housework, shopping, and cooking?

If "no area" treat Self does most [at least 2 items] 1... Other person, (specify) 4...

Other person (?)

(a) Is this because of your (disability), or would (other person) be doing it anyway?

Because of disability ... 1... Would do it anyway ... 2...

Intro 93 - I'd like to ask about cooking, shopping, housework and laundry arrangements. Can we start with cooking -

92. Do you do any of the cooking?

Yes ..... 1... No ..... 2...

SC (1)

(a) Is this because of your (disability) or would someone else be doing it anyway?

Disability ..... 1... Someone else would do .. 2...

If Yes 'Y'

(c) Do you do all or most of the cooking ... about half ... or only a little cooking?...

RUNNING PROMPT

Intro 93 - There are some things connected with cooking that other people have said they find difficult. I've got a list here.

93 Does your (... disability ...) make it hard for you to

- Open tins/cans ...
Open screw top bottles ...
Turn on water taps/cooker ...
Cut things up ...
Beat eggs, stir or mix things ...
Lift pans from top of stove or oven ...
Bend down to oven ...
Stand to prepare food or at cooker ...
Reach up to shelves ...
Peel, scrape, or prepare vegetables ...
Anything else you find difficult when cooking (specify) ...
Nothing difficult ...

INDIVIDUAL PROMPT

Cole from Items Recd

Codes 1-11 + Codes 3, 4 or 9 at Q. 93 + at Q. 92(b)

If any difficulty, and does most or half cooking - go on to Q. 95

If any difficulty, and does only a little cooking - ask Q. 94

Code 5 at Q. 92(b)

Handwritten notes on the right side of the page, including 'SC 211', 'SC 10', 'JOES', and 'SC 93-97'.

Handwritten notes including 'SC', 'Q. 93-97', and 'think'.

Handwritten notes including 'SC', 'Q. 98', and 'or to'.

Handwritten notes including 'SC', 'B', and '3 4 5'.

Handwritten notes including 'SC Q. 94 & 95', 'think', 'MC', 'IF any codes', 'see note below', and 'SC or to Q. 98'.

D

94. Could you get yourself a snack meal, say boil an egg, or eat a tin of soup, or something like that, if you had to?

Yes (with or without difficulty) ...  
No .....

X SC  
1 16  
2 - ask (a)

SC Yes (a)

(a) Could you get yourself a cup of tea or coffee, even though it might be difficult?

Yes ....  
No .....

SC  
3 17  
4

95. Are there times when you have to do without a proper meal because you can't get it yourself, and there is no-one else to get it for you?

Yes ...  
No .....

SC  
18 5  
0 - ask (a)

SC Yes (5)

(a) Does this happen  
FREQVING  
PRO/PT

Very often, say 2 or 3 times a week ...  
Quite often, say once a week ...  
Less often than that?(specify) .....

SC  
2 19  
1  
0  
3,4

SC

96. Do you have any gadgets specially designed to help with preparation of food?

Yes ....  
No .....

SC  
2 20  
2 - ask (a)

SC Yes (2)

(a) What are they?

97. Have any alterations or additions been made to the furniture, fittings or layout of the kitchen to make it easier for you to manage with your (disability)?

Yes ....  
No .....

SC  
2 21  
2 - ask (a)

SC Yes (1)

(a) What has been done?

SC  
1 22  
5,9

D

Do you do any of the household shopping?

All (household)

Yes .. 23  
No ..

SC  
ask (2)

Do you do any of the household shopping?

(a) Is it because of your (disability) or would someone else be doing it anyway?

Disability ..  
Someone else would do .. 24

SC  
no or to  
ask (2)

Do you do any of the household shopping?

(b) Do you do any of the household shopping?  
RUNNING PROMPT

All or most of the shopping ..  
About half the shopping ..  
or Only a little shopping? .. 25

SC  
ask (2)

99 Do you have any difficulty

a) Carrying the shopping?

No .. 26  
Yes ..

SC  
ask (2)

INDIVIDUAL PROMPT

b) Walking or getting to and from shops?

No .. 27  
Yes ..

SC  
ask (2)

c) Any difficulties other than carrying and getting to shops?

No .. 28  
If Yes (specify)

SC  
ask (2)

100. There are some things which help people with shopping ...

a) Do you use a basket on wheels?

Yes .. 29  
No ..

SC  
ask (2)

INDIVIDUAL PROMPT

b) Do you have a refrigerator?

Yes .. 30  
No ..

SC  
ask (2)

c) Do you have any tradesmen (apart from the milkman) delivering, or travelling shops?

Yes .. 31  
No ..

SC  
ask (2)

Do you have any tradesmen (apart from the milkman) delivering, or travelling shops?

(a) Do you get most of your household shopping delivered?  
RUNNING PROMPT About half of it ..  
or Only a few items delivered? .. 32

SC  
ask (2)

D

101 Do you do

- i) all the washing yourself [here or at laundrette]?
- ii) some of the washing yourself [here or at laundrette]?
- iii) do you send it all to the laundry?
- iv) do you send some of it to the laundry?
- v) does someone else do any of your washing for you [including laundrette]?

CODE  
P.C.  
APPL

33

1 - ask (a)  
2 - ask (a)  
3 - ask (a)  
4 - ask (a)  
5 - ask (c)(d)

If does ... (1 2)

(a) Do you have difficulty when you are doing the washing because of your (disability)?

[Include difficulty carrying to laundrette]

Yes, some difficulty  
No ..

34

1 - SC  
2 -

If does all, on to Qn 102  
If some only - ask (a) or (c)

Code 1 at Qn 101

If sends to laundry (3 4)

(a) Do you send to the laundry because of your (disability), or would you send it to the laundry (they do it) anyway?

Sends any/more because of disability  
Would send anyway .....

35

1 - SC  
2 - ask (1)  
3 -

If any or more sent because of disability (7)

(a) How much extra do you have to pay on laundry because of your (disability)?

Check this is extra (per week)

on laundry x,40

36/37

(or 2b)

38/39

If all washing sent to laundry - on to Qn 103

Code 5 at Qn 101

If someone else does any (all) (5)

(a) Who does it?

1 - SC  
2 - ask (1)  
3 -

40

(a) Is this because of your (disability), or would (person) be doing it anyway?

Because of disability  
Would do it anyway ...

41

1 - SC  
2 -  
3 -

If uses clothes washing - code 1 at 2 at Qn 101

If all washing done by self or person - on to Qn 105

Code 5 only at Qn 101

102 Do you have any of the following things to help with the washing?

- (i) An electric iron
- (ii) A washing machine
- (iii) Spin/tumbler drier or electric drying cabinet
- (iv) Use a laundrette?
- None of the above

CODE  
P.C.  
APPL

42

1 - SC  
2 -  
3 -  
4 -  
5 -  
6 -  
7 - SC

D

103. Do you do all of the housework?

SC  
Yes 43 (a)  
No 2 ask (a)

IF YES (1)

(a) Do you do **PUTTING** all or most of the housework  
**PROPT** about half the housework 44  
or only a little housework?

SC  
3  
4  
5  
6 - ask (a) (1)

IF YES (1)

(a) Is it because of your (disability) or would  
someone else do it anyway? Disability ..... 45  
Someone else would do it .....

SC  
7  
8 - ask (a) (1)  
9 - on to next page

IF ELSE ABOVE (8)

(a) Who does it?

46  
SC  
1-6  
7 NC  
8 SC

(11) Are the arrangements satisfactory, or would you like  
more help?

Satisfactory 47  
Like more help

SC  
7  
8 - on to next page  
9

104. Do you have any special difficulties with housework due  
to your (disability)?

Yes 48  
No 2

SC  
1  
2 ask (a)

IF YES (1)

(a) Would you like (more) help with the housework, or do you  
manage all right?

Like (more) help 49  
Manage all right

SC  
1  
2  
3

105. Do you use any of the following to help you with housework?

INDIVIDUAL a) Vacuum cleaner or carpet sweeper .....  
PROPT b) Vacuum cleaner attachments for dusting .....  
c) Squeezy/mop with long handle ..... 50  
CODE ALL d) Electric polisher .....  
DEPT e) Any other equipment to help with housework  
APPLY (Specify) .....

SC  
1  
2  
3  
4 NC  
5  
6  
7  
8  
9 SC

None of the above ..... 9 SC

106. Have any alterations or additions been made to furniture,  
household fittings or household equipment to make it easier  
for you to do your housework?

Yes 51  
No 2

SC  
1  
2 ask (a)

IF YES (1)

(a) What has been done?

IF INFORMANT WAS DEPENDENT  
CHILDREN UNDER 12 YRS. ASK  
QN.107, OTHERWISE GO ON TO  
NEXT SECTION

D

... your year of

107 ... of your (disability) do you have any special difficulty in taking care of the children yourself?

Yes  
No ..... 52 (x) 1 for (a)-(e)  
2 for (f)  
no/...  
factor

... (1)

... you manage about [ask (a)-(e)]

(a) Feeding and getting their meals - Can you do it yourself

Without difficulty .....  
Only with difficulty ..... 53  
or Does someone else have to do it?  
(specify who)

(0) SC  
1  
2-9  
4

(b) ... about washing and bathing them, or seeing that they keep themselves clean? Do you have any trouble with this because of your (disability) or can you manage alright?

Have trouble ..... 54  
Manage ..... (3) SC - ask (1)  
4

... trouble (3)

(1) How do you cope with this? [Specify who if done by someone else]

55 (4) SC  
5-9  
4

(c) Getting them dressed (and off to school) - can you manage this alright, or does your (disability) make it difficult?

Manage alright ..... 56  
Disability causes trouble (5) SC  
6 - ask (1)

... trouble (5)

(1) Can you tell me how you cope?

57 (4) SC  
5-9  
4

(d) Do you feel you can't play with them enough, or share their leisure, because you have (disability), or doesn't it make any difference?

Can't play/share leisure ..... 58  
Makes no difference (7) SC  
8

(e) Are there any other ways in which you feel your (disability) prevents your doing all you want to to care for them, and make them happy?

Yes ..... 59  
No ..... (X) SC  
1 - ask (1)  
2

... Yes (1)

(1) Can you tell me what you think they lack because of your (disability)?

END OF CARD

Green

CRKD H

Serial 3-7

103. How long have you lived at this address?

104. How long has this house?

105. How long has this house been lived in by this household?

Pre 1914
Inter-war (1915-1945)
Post war (after 1945)

NA ex
2
8

106. How long have you lived at this address?

9, 10

107. How long have you lived at this address?

- 1. Old people's flat/bungalow (any accommodation with bathroom)
2. Old people's flat/bungalow/boarding/one bedroom
3. Purpose built dwelling for handicapped people
4. One built (Vol. 1900) flat for old or handicapped
5. One built (Vol. 1900) house for old or handicapped
6. Self-contained flat in house
7. House, if house (not self-contained) or lodging house (no service)
8. Bungalow, one-storeyed cottage, or duplex, prefab, etc
9. Whole house/cottage (more than one storey)
10. Non-permanent dwelling - caravan/tent etc (not prefab)
11. Hotel/boarding house/hostel (some service)
12. Others (specify)

16c
11, 12

as (a)
(b)

9NA=12

yx 01-9 col 11
10, 11, 12 col 12

108. How many other households live at this address?

(a) How many other households live at this address?

(b) Are any members of these other households related to you? If so, state relationship.

No relations

Relationship

13
14
15

16

109. How many rooms do you have for the use of your household?

Include bathroom, w.c. and kitchen unless it is used to eat one sit-down meal or regularly. Any rooms not used because house too old, unsuitable or inaccessible should be included. Rooms used as a night are included.

17
18

110. Are there any rooms you can't get to and use because of your (disability)?

Yes
No
D.N.A. - Bedfast

111. Why can't you use them?

Still too narrow for wheelchair
Or other reasons (specify)

as (a)

NA

19

20
21
22

NA 9

Good CARD. H

... (b) ... "List from cooking ..."

ONE Living room  
CODES bedroom ...  
ONLY Kitchen ...

20

112 Do you heat (room heated)?

Central heating ...  
Solid fuel fire/heater ...  
Electric fire/heater/storage ...  
Gas heater ...  
Electric floor-warming ...  
Oil heater ...  
Cooker/boiler/"non" heating appliance ...  
Other (specify) ...

21

115 Do you always sleep in the bedroom, or do you sometimes sleep in the living room? [Living rooms converted permanently to bedrooms count as bedroom].

D.V.L. Bedditter (One room only) ...  
Always sleep in bedroom (incl. room converted) ...  
Sometimes (always) in living room ...

2  
1  
2  
4  
5  
- ask (a)

Sometimes (always) in living room (3)

(a) Is this because of your (disability), or is there another reason?

22

Disability ...  
Other reason (specify) ...

4  
5  
6, 7, 9  
2  
S.C.

NA = 2

Can you tell me something about the amenities you have here?

116 Do you have

CODE ALL (2a's) Electricity laid on ...  
THAT APPLY (2b's) Gas laid on ...  
Neither gas nor electricity ...

NA = 2 S.C.  
7  
8  
9 S.C.  
23

117 Do you have a kitchen (whatever it's called)?

Enter in box whether sole use of kitchen or shared

Sole use of kitchen ...  
Shared use of kitchen ...  
No kitchen ...  
D.N.A. Hotel/boarder ...

NA = 2 S.C.  
1  
2  
3  
4  
5  
6  
7  
8  
9  
24

(2)

(a) Do you have any cooking facilities (able to boil at least one saucepan)?

Some cooking facilities ...  
No cooking facilities ...

6  
7  
S.C.



Open

C.R. 11

... ..

... ..  
... ..  
... ..

NA 25

119. Do you have a piped hot water supply inside the dwelling?

[Check if necessary whether piped]

Sole use of piped hot water  
Shared piped hot water  
No piped hot water

26

120. Do you have piped cold water inside the dwelling?

[Check if necessary whether piped]

Sole use of piped cold water  
Shared piped cold water  
No piped cold water

27

121. Do you have a w.c. (flush toilet)?

[Check if shared]

Sole use of w.c.  
Shares w.c. with other n/a/s.  
No w.c.

28

If no w.c., substitute "toilet" or if known, earth/chemical closet, etc. for (a)-(c)

(a) Is there an indoor w.c./toilet?

[Check (a), (b) counts as Yes]

Yes, indoor  
No, outside only

28

(b) During the day do you have to go up or downstairs to use a w.c./toilet?

[Irrespective of whether inside or out]

ONE CODE ONLY

Yes, up or downstairs  
No, same level (inc 1 or 2 steps)  
N.A. - uses commode, etc.

29

(c) During the night do you have to go up or downstairs to use a w.c./toilet?

[Irrespective of whether inside or out]

ONE CODE ONLY

Yes, up or downstairs  
No, same level (inc. 1 or 2 steps)  
N.A. - uses commode, etc.

29

... .. or stairs (A 1 -)

(d) Do you find this (having to go outside/up and down stairs) -

PLEASING PROMPT

Very inconvenient  
Sometimes inconvenient  
or are you satisfied?

30

Were people who visited the house to make it easier for you to get around? They might not be needed in your case. Why or why not?

How many of the following settings made because of your disability?

Setting	1		2		3		4	
	1	2	1	2	1	2	1	2
1) Banister rails?	34	2	35	0	36	0	37	0
2) Poplaced coal fires etc. so starting easier?	37	1	38	0	39	3	4	→
3) Bed unrolled/nanoles fitted to	40	1	41	0	42	3	4	
-) bath	42	1	43	0	44	3	4	
-) toilet	43	1	44	0	45	3	4	
4) Lashed or reversed doorways?	46	1	47	0	48	3	4	
5) Added/converted	49	1	50	0	51	3	4	
-) a lavatory	51	1	52	0	53	3	4	
-) a bathroom	52	1	53	0	54	3	4	
6) Installed ramps/patns?	55	1	56	0	57	3	4	
7) ... (also) been here to make it easier to do things or get about? (Specify below)	58	1	59	0	60	3	4	
8) ...	61	1	62	0	63	3	4	
9) ...	64	1	65	0	66	3	4	

Number on lines A-F



(s) (spec. or spouse is)

- 0 or/own the house outright
- 1 or/own has mortgage
- 2 or/own (pays ground rent only)
- 3 or council tenant
- 4 or council house (pays rent to council tenant) **30**
- 5 or/own, not council, furnished
- 6 or/own, not council, unfurnished
- 7 Boarder
- 8 Lives rent free
- 9 Other (specify) **RUNC. 100**

1  
2  
3  
4  
5  
6  
7  
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9  
10  
11  
12  
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43  
44  
45  
46  
47  
48  
49  
50

Rateable value (12)

**31/32/33** **YAVC**  
 1-2

125. Because of your (disability) do you have any extra expenses  
 in regard to housing?

Yes, extra expenses  **1-2**  
 No

Extra expenses (13)

(a) What expenses, and how much extra does it cost? (c) because of disability

**1-2**  
**1-2**

INTRODUCTION NO CODED SET Rent and rates free ... 0

126. List of housing [Informant] - omit items which cannot apply  
 [Total cost before sub-letting if any]

	Cost			Period	
	£	s	d	Mo	Other (specify)
1 Rates (net, deducting rebate if any) [if paid separately]				1	
2 Other rates [if paid separately]				1	
3 Ground rent				1	
4 Rent duty (Scotland only)				1	
5 Mortgage repayment				1	
Interest				1	
6 Service, maintenance or fire				1	
7 Council (unfurnished) council rebate(s) if any				1	
8 Rent (furnished) - re for council				1	
9 Rent (furnished) services/charges (specify)				1	

... (I'd like to know how you feel about living here)

... (I'd like to know how here, or do you prefer to stay?)

Do you want to move, but has to

is about to move ..... 35  
wants to move .....  
wants to stay .....

35  
ON TO Q13!  
- or so  
Q123  
- sec. etc  
- sec. note

Note 4: Like to move - ... "I don't have any influence with the Council, so it won't be possible to help you personally - but your views will help in future planning" - ask Q1.126

Note 5: Want to stay - Reassure any elderly people "That's fine, we just wanted to know you are satisfied" or something like that - GO ON TO NEXT SECTION.

DO YOU WANT TO LEAVE OR IN PROCESS OF MOVING

126 Do you want to leave here (are you leaving here) because

YOU CAN'T manage because of the house itself  
YOU DON'T like the area/people ...  
SOME OTHER reason? (specify) ...

36/37  
37  
Handwritten notes and a diagram of a house with rooms labeled.

129 What sort of place would you like to move to? (are you moving to?)

- Old People's Home/Institution, etc
- Place without stairs (Flat/bungalow) ...
- ... (specify) ...
- Smaller place
- Larger place
- Self-contained accommodation
- More rooms (amenities mentioned)
- Garden/allotment
- "better" area (sea-side/country/warmer/drier)
- "worse" area (generally 'posner', better class)
- Other answers (specify)

Handwritten notes and a vertical list of numbers 1-10 with a bracket around 1-5.

... to move go to ...  
... to move but does not want to ...  
... to move - ask Q1.130

I

Some council units provide special accommodation for people with disabilities - so I'd like to ask a few questions about Council housing

Have you applied to this Council for rehousing since you've been on the register?

Yes ... 40  
No ... 40

Handwritten notes: 5 C, 7, (a)(b), (c)

How long has it been since you applied?

CODE ONLY

Less than 6 months . . . . .  
6 mths. but less than 1 yr  
1 yr. but less than 2 yrs. . . . .  
2 " " " " 3 "  
3 " " " " 4 "  
4 " " " " 5 "  
5 " " " " 10 "  
10 years or more (specify) . . . . .

41

Handwritten notes: 1, 2, 3, 4, 5, 6, 7

Have you ever offered any accommodation?

Yes . . . . .  
No . . . . .

Handwritten notes: 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100

Yes (1)

(-) Why did you refuse it?

42

GO ON TO NEXT SECTION

Have you ever not applied for rehousing (7)

(a) Why haven't you applied to the Council for rehousing?

CODE ONLY

Don't own L.A. housing/owning house . . . . .  
Wants to move right away (out of area) . . . . .  
Thinks ineligible . . . . .  
No point (waiting list/none available/  
unco-operative) . . . . .  
Not well enough . . . . .  
Can't afford move/rent . . . . .  
Aver't better off/no. wanted immediately/  
don't know . . . . .  
Other answers (specify) . . . . .

43/44

Handwritten notes: 1, 2, 3, 4, 5, 6, 7, 8, 9, 10-15, 18, 19-20, M.C.

PLEASE GO TO PAGE 58.

Card I

147. People for use of r/a, can use  
 " " " " " cannot use  
 207 210 " " " " " can use  
 270 22 " " " " " do not use? ...

45

(C) - sur (a)  
 147

148. Do you have a standard model or is it specially adapted in any way?

Standard model  
 Specially adapted

46

149. Some people say they miss a lot of things by being disabled, others say they get as much out of life as most other people. How do you feel?

47/48  
 149

149  
 1-13, 14, 15 SC  
 2-13, 16 C

149. What would you say is the main disadvantage of having (disability)?

49/50  
 149

149  
 1-13, 14, 15 SC  
 2-13, 16 = 1/11 C

150. Is there anything else you'd like to tell me that I haven't asked about?

51/52/53  
 SC

149  
 1-13, 14, 15 SC  
 2-13, 16 = 1/11 C

END OF CARD I

011 ad 4  
 12 + 6 25, codes 2, 3, 4

TO USE WHEELCHAIR

0	0	0	0	0	0	1-9
1-9	1-9	1-9	1-9	1-9	1-9	X

Blank = 0

501. Can you get in and out of your chair on your own, (even if you have trouble doing it)?

Yes ..... 55  
 No .....

502 For how long have you been using a wheelchair?

Less than 6 months ..  
 6-11 months ..... 56  
 No. of years ..

503 Can you use the chair on your own, or do you always have to be pushed?

Yes, use on own .....  
 Use on own inside only .....  
 Use on own outside only .....  
 Have to be pushed .....

Use on own (1 2 3)

(a) Is it electrically powered, or do you propel it yourself when you're using it on your own?

Electrically powered ...  
 Self-propelled .....

Has to be pushed (2 3, 4)

(b) Who usually pushes your chair (when you don't do it yourself)?

(c) Does (person) have any difficulty, or does he/she manage quite easily?

Manages easily .....  
 Has difficulty .....

Has difficulty (9)

(-) Why is that?



CARD F

QUESTIONS (Qn 25 - coder 2, 1)

D.N.A. - not used inside  
of co. 14-5

f. ltr.

(X) - go on to Qn. 26

204. Does using your chair in the house have any drawbacks, or cause any special difficulty?

- No . . . . .
- Doors too narrow . . . . .
- Knocks/collides with furniture . . . . .
- Can't manage (internal) stairs/steps . . . . .
- Others (specify) . . . . .

(1) S.C. 72  
 (2)  
 (3) M.C.  
 (4) S.C.

205. Have you had to re-arrange carpets or furniture to enable you to use your chair inside the house?

- Yes, re-arranged . . . . .
- No . . . . .

(1) S.C.  
 (2) - ask (a)  
 '73

had to make re-arrangements (1)

(a) Has this involved you in any extra expense?  
 Yes, extra expenses . . . . .  
 No . . . . .

(1) S.C.  
 (4)

206. HAVING WHEELCHAIRS

206. Did anyone official show you how to use your chair?

- Yes, shown . . . . .
- No . . . . .

(5) S.C. ask (a)  
 (6) ask (b)  
 (7,0)

Yes shown (5)

(a) Did you get enough instruction, or did you feel you needed more?

- Enough instruction . . . . .
- Needed more . . . . .

(S.C.)  
 ON TO TESTS

no not shown (c)

(b) Would it have been easier for you if you had been shown by an official how to use it or wouldn't it have made any difference?

- Easier . . . . .
- No difference . . . . .

(4) S.C. GO ON TO TESTS  
 (5)

CARD F  
ENDS



SN: 212b

- Wheelchair 2 -

WHITE

IF USED INSIDE (Qn. 25 - codes 2,4) D.N.A. - not used inside .

X - go on to Qn. 306

304. Does using your chair in the house have any drawbacks, or cause any special difficulty?

- No ..... 0
- Doors too narrow . . . . . 1
- Knocks/collides with furniture . . . . . 2
- Can't manage (internal) stairs/steps . . . . . 3
- Others (specify) . . . . . 6

305. Have you had to re-arrange carpets or furniture to enable you to use your chair inside the house?

- Yes, re-arranged . . . . . 1 - ask (a)
- No . . . . . 2

If had to make re-arrangements (1)

(a) Has this involved you in any extra expense?

- Yes, extra expenses . . . . . 3
- No . . . . . 4

TO ALL HAVING WHEELCHAIRS

306. Did anyone official show you how to use your chair?

- Yes, shown . . . . . 5 - ask (a)
- No . . . . . 6 - ask (b)

If Yes, shown (5)

(a) Did you get enough instruction, or did you feel you needed more?

- Enough instruction . . . . . 1] GO ON TO TESTS
- Needed more . . . . . 2]

If No, not shown (6)

(b) Would it have been easier for you if you had been shown by an official how to use it or wouldn't it have made any difference?

- Easier . . . . . 4] GO ON TO TESTS
- No difference . . . . . 5]

START CARD A

WHITE

- 1 -

APPENDIX G  
INTERVIEWING SCHEDULES

MAIN SCHEDULE

(i) Interviewer \_\_\_\_\_  
 Authorisation No. ... \_\_\_\_\_  
 (ii) Date of interview \_\_\_\_\_  
 (iii) Persons interviewed:-  
 Subject (singly) . . . . . 1  
 Subject (jointly) . . . . . 2  
 Subject helped by proxy . . . . . 3  
 Proxy (state relationship) . . . . . 4

Serial No. 8 9 10 11 12 13 14  
 \_\_\_\_\_  
 (v) Name of subject . . . . . (BLOCK CAPS)  
 Address . . . . .  
 . . . . .  
 . . . . .

Where subject is at home but is too confused or irrational, or too ill to be interviewed (excluding temporary illness where an interview may be carried out at a later date), someone who is responsible for looking after the subject (a proxy) should be asked.

(vi) If Refusal - Reason - giving as much detail of capability as possible, e.g. if seen, appears active/makes with stick, etc. or out at work Get household composition inc as much detail as possible.

(iv) HOUSEHOLD COMPOSITION

SUBJECT

(a) Relationship to H.O.N	(b) P.P.S. No. and Age - sex of subject	(c) Sex M F	(d) Age	(e) Marital Status Md. Sgl. Wd.			(f) Working? (Any number of hours) Full Part Unemp. Ret. Student time time Sick W/wife (unpaid)					(g) Bedfast or Chair- bd Able to get out							
				1	2	3	4	5	1	2	3	4	5	6	7	8			
	15 →	16	17		19														
		12	18		3 4 5														
		12																	
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OFFICE USE

a	b	c	d	e	f	g	h	i	j	k	l	m	n	o
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

START CARD B

WHITE

- 1 -

APPENDIX C  
INTERVIEWING SCHEDULES

MAIN SCHEDULE

(i) Interviewer Quint 15/14/17

Authorization No. 23/24

(ii) Date of interview DAY MONTH 18/19 20/21

(iii) Person interviewed:-

Subject (singly) . . . . . 1

Subject (jointly) . . . . . 2

Subject helped by proxy . . . . . 3

Proxy (state relationship) . . . . . 4

22

S.S. 428

Serial No. 

8	9	10	11	12	13	14
---	---	----	----	----	----	----

(v) Name of subject . . . . .

Address . . . . .

Where subject is at home but is too confused or irrational, or too ill to be interviewed (excluding temporary illness where an interview may be carried out at a later date), someone who is responsible for looking after the subject (a proxy) should be asked.

(vi) If Refusal - Reason - giving as much detail of capability as possible, e.g. if seen, appears active/walks with stick, etc. or out at work, Get Household composition inc. as much detail as possible

(iv) HOUSEHOLD COMPOSITION

23/24  
1-10

(a) Relationship to H.O.N	(b) Ring code to indicate subject	(c) Sex M/F	(d) Age	(e) Marital Status Md. Sgl. Wd.	(f) Working? (give number of hours) Full Part Unemp Sick time time (unpaid)	(g) Bedfast Chair- bed	Able to get out
25/26 1-15,19 H.O.N	r	27 M	27	30	31		
32/33 1-15,19 etc	2	34 M	34	37	38		
	3	12		3 4 5	1 2 3 4 5	6 7 8	
	4	12		3 4 5	1 2 3 4 5	6 7 8	
	5	12		3 4 5	1 2 3 4 5	6 7 8	
	6	12		3 4 5	1 2 3 4 5	6 7 8	
	7	12		3 4 5	1 2 3 4 5	6 7 8	
74/75 1-15,19	8	76 M	76	79	80		
	9	12		3 4 5	1 2 3 4 5	6 7 8	
	10	12		3 4 5	1 2 3 4 5	6 7 8	
	11	12		3 4 5	1 2 3 4 5	6 7 8	
	12	12		3 4 5	1 2 3 4 5	6 7 8	

Information not available

OFFICE  
USE

a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t

START CARD C

- 2 -

I understand that a few months ago you  
(refer to postal)

If obvious that difficulty likely to apply or if estab at  
introduction, code Qn. 1 without asking

1 Are/do you still (unable to) (need help with) . . ? Yes ..  
No ..

8  
Y - on to Q 6  
X

No longer having any difficulty (x)

2 Could you tell me when you got better?  
No of weeks ago .

2 digits 9/10

3 And for how long before that you(had difficulty)? No of weeks

3 digits 11/12/13

4. When you had difficulty (name from postal questionnaire)  
what was the trouble (cause)?

3 digits 14/15/16

2 digits 17/18/19

3 digits 20/21/22

5. Have you ever had (named difficulties, not cause) before this  
last time? Yes..  
No..

23  
1 - ask (a)  
2

(a) Has your doctor told you if this (the, a) trouble(s) is (are)  
likely to recur (as a result of your accident etc.)?

Yes, likely to recur.  
Not likely to recur.

4 - see note  
5 - close  
interview  
6 - ask (i)  
7

Doctor didn't say....  
Not seen doctor.....

If doctor didn't say/not seen (6, 7)

(i) Do you think it has cleared up for good now?

Yes, hope so....

8 - close  
interview  
9 - see note

No.....

If likely to recur- explain we want to see  
how such difficulties inconvenience people -  
so we'd like to ask some questions about when  
she/he did have difficulty

Omit question 6 for blind, amputees; check qn. where medical term given on postal - e.g. "Did your doctor say you have ... epilepsy?"

6. What does your doctor say in the matter with you?

- Doctor doesn't say . . . . .  sk
- Havn't seen doctor .. . . .  ask (a)
- D N A Amputation .. . . .  m/c
- D N.A. Blind .. . . .  s/c
- Doctor says (specify) . . . . .

If not seen doctor/doctor doesn't say (Y, X)

(a) What do you think is the matter with you?

IF MORE THAN ONE COMPLAINT GIVEN in 6 or 6a

7. Which of these complaints (name them) causes the most difficulty?

QNS 8-9 refer to main complaint

8. How long ago did this (main complaint) start causing you difficulties?

For amputees/blind - ask "How long ago did you lose your ... (leg/eyesight)?"

- ONE Within last year . . . . . 0
- CODE No. of years ago . . . . .
- ONLY From birth . . . . . Y

If difficulty remembering, try to get estimate and record here

Check:-

(a) That would mean you were (age) years old when your difficulty started Yrs. old ...

If (disability) started causing difficulty less than a year ago . code ... I - go on to Qn 10

9. During the last year has there been any change in your condition? Would you say your (disability) is

- BETTER Better now than it was a year ago . . . . . 1
- PROMPT Worse now . . . . . 2
- or About the same as it was a year ago? . . . . . 3

If Better/Worse (1, 2)

(a) In what way has it got better/worse?

10. Are you taking any drugs, tablets, medicine or using ointments at present for (complaints which cause difficulty - Qn 6)?
- Yes . . . . . 1 ask (a)  
 No . . . . . 2

If Yes (1)

- (a) Are they prescribed by a doctor, or do you buy them yourself from the chemist?
- CODE BOTH Bought from chemist . . . . . 3 - ask (i)  
 IF APPLD Prescribed . . . . . 4 - ask (ii)

If bought from chemist (3)

- (i) How much do you spend a week on things which are not prescribed?  
 [Check - that's just for the things you use]

\_\_\_\_\_ x \_\_\_\_\_ d

If prescribed (4)

- (ii) For the things that are prescribed, are you exempt from payment (can you claim it back), or do you have to pay for your (drugs/medicine/tablets, etc.) yourself?
- Exempt/claims back . . . . . 0 - on to Qn.11  
 Have to pay . . . . . 1

I'd like to know how much it costs you a week . . . . . so if you could tell me (for each item) how long your prescription lasts, I can work it out

No. if more than one	Prescription lasts	Cost of prescription		Approx cost per week
		2s.6d.	Other	
		1		
		1		
		1		
		1		

TO ALL

11. Apart from drugs and medicines, [etc ], are you having any (other) treatment?
- PROMPT From your own doctor? . . . . . 1  
 At a hospital? . . . . . 2  
 Anywhere else? . . . . . 3

12. Do you see your doctor regularly - I don't mean just calling for a prescription - but actually seeing him?

Yes ..... 1 - ask (a)  
No ..... 2 - ask (b)

If seen regularly (1)

(a) How often do you see him?

ONE CODE ONLY  
More than once a week .. . . . 3  
Once a week . . . . . 4  
Every 2 or 3 weeks . . . . . 5  
Once a month/4 weeks . . . . . 6  
Other periods (specify) . . . . . 7

GO ON TO QN 15

If not seen regularly (2)

(b) How long ago was the last time you saw him (for yourself)?

CODE FIRST THAT APPLIES  
Within last week . . . . . 4  
Within last month . . . . . 6  
Within last 3 months . . . . . 7  
Between 3 and 6 months ago . . . . . 8  
Between 6 and 12 months ago . . . . . 9  
Years ago (specify)

13. Have you paid to see a private specialist (consultant) about your . . . (main complaint) since the National Health started?

Yes . . . . . 1  
No . . . . . 2

14. Have you ever consulted anyone who is not a medical doctor about your (main complaint), [such as a faith healer, osteopath, chemist, etc.]?

Yes, consulted . . . . . 0 - ask (a)(b)  
No . . . . . 1

If Yes (0)

(a) Who was it?

Faith/spirit healer . . . . . 2  
Osteopath/Manipulator/bone setter . . . . . 3  
Homoeopath/herbalist . . . . . 4  
Psychologist . . . . . 5  
Other (specify) . . . . . 6

(b) Was the visit of any help to you?

Yes helped . . . . . Y  
No . . . . . X



INTRODUCE [We've been talking about your (disability) - but there are sometimes other things which complicate conditions].

15. Do you regularly suffer from any other chronic illness or any condition which makes it difficult for you to get about or do your work?

Yes .... 1 - ask (a)  
No .. .... 2

If Yes (1)

(a) What is the matter?

I'd like to ask about your eyes, next ... [code or check if observed]

16. Can (could) you recognize people you know if you were to see them across the street (wearing glasses if applicable)?

Yes, could recognise .... 8  
No ..... 9

17. Can you usually see to read ordinary print (show leaflet) like this, and see to write (wearing glasses if applicable)?

Yes, can see to read/write ..... 1  
Cannot read/write (illiterate) ..... 2  
No, can't see unless uses magnifier, etc. .... 3  
No, can't see ..... 4

18. - [Code if observed]

Can you hear ordinary conversation (with hearing aid working if applicable)?

Yes ..... 7  
No ..... 8  
Says yes, but difficulty observed ..... 9

19. - [Use as check question if observed or unlikely]

Do you have any artificial limbs?

No ..... 0  
Yes (describe fully) ..... 1

State right/left - for limbs above/below knee or elbow

Use as check if observed

20. Can you usually get out of the house if the weather is not too bad?

Yes .....  
No, housebound ...

Y - ask (a)  
X - on to Qn 21

[Only to garden/front gate - No]

If gets out (Y)

(a) Can you usually get out

on your own without sticks or aids and without difficulty .

0 - on to Tests

RUNNING PROMPT

on your own but only with aids or difficulty . . .

1 - on to Qn 22 next pg

or can you only get out if someone is with you? ....

2 - ask (i)(ii)

If cannot get out on own (2)

(i) Who usually goes with you?

(ii) Can you generally get someone to go with you (take you out) when you want to go?

Yes .. . 3  
No . . . . 4

If housebound (X), or not on own (2) - [Check/code if obvious]

21. But can you Get about the house (walking or wheelchair).  
or Do you have to sit in a chair when you're up.  
or Can't you leave your bed? .. .

1 on to Qn 22  
2 ask (a)  
(b)overleaf  
3 ask (i) overleaf

If chairfast (2)

(a) Can you get in and out of your chair on your own without aid, or do you have to have someone to help, or a mechanical aid?

On own without aid ..... 6  
Someone to help ..... 7  
Mechanical aid ..... 8 - ask (i) - (iii)

[Sticks, etc. are counted as mechanical aids.]

If has mechanical aid (8)

(i) Could you describe it to me?

(ii) Who was responsible for having it put in?

(iii) How much did you have to pay towards it?

[If hired state amount and period] Nothing ..... 0

£ \_\_\_\_\_

Qn.21 (cont'd ...)

If chairfast or bedfast (2,3)

(b) Can you get in and out of bed on your own without aid, or do you have to have someone to help, or a mechanical aid?

Sticks, etc. are counted as mechanical aids.

- On own without aid . . . . 6 - on to Qn.22
- Someone to help . . . . 7 - see note below
- Mechanical aid . . . . . 8 - ask (i)-(iii)

If has mechanical aid (8)

(1) Could you describe it to me?

(ii) Who was responsible for having it put in?

(iii) How much did you have to pay towards it?

If hired, state amount and period

Nothing . . . . . 0

£ \_\_\_\_\_

**IF PERMANENTLY BEDFAST or CHAIRFAST and cannot get about room in wheelchair GO ON TO TESTS.**

For those whose only disability is non-locomotive -  
e.g. Blind/epileptic . . . . (code) . . . . . X - Go on to Tests

22. Do you have any walking aids such as a stick, crutches, wheelchair or anything else?

Exclude stick for blind

- No aids . . . . . 0 - Go on to Tests
- One stick (umbrella used as stick, etc.) . . . 1 - Go on to Qn.25
- Two sticks . . . . . 2 -
- Walking frame/tripod, etc. . . . . 3 -
- Wheelchair . . . . . 4 -
- Elbow crutches . . . ring 1 or 2 crutches and code . . . . . 5 - ask qns. 23-25
- Shoulder crutches ring 1 or 2 crutches and code . . . . . 6 - for each aid
- Calipers/built-up shoes at least 1" on sole . . . . . 7 -
- Other (describe fully) . . . . . 8 -

**CODES ALL THAT APPLY**

If more than one type of aid, write in code number and ask Qns. 23-25 for each separately, working down columns				Aid 1 - code	Aid 2 - code	Aid 3 - code
21. Who supplied the .... (aid) ....?						
22. Is it on free loan, do you pay for hire, or did you have to buy it for yourself?						
Free loan . . . . .	1 ask Q. 25	1 ask Q. 25	1 ask Q. 25			
Pay for hire . . . . .	2 ask (a)	2 ask (a)	2 ask (a)			
Bought . . . . .	3 ask (b)	3 ask (b)	3 ask (b)			
Personal risk/Lease . . . . .	4 ask Q. 25	4 ask Q. 25	4 ask Q. 25			
If pay for hire (2)						
(a) How much do you pay? [Amount and period]				£    s    d	£    s    d	£    s    d
				per _____	per _____	per _____
If bought (3)						
(b) How much did it cost? (nearest shilling)				£    s.	£    s.	£    s.
23. Check or establish Do you use your aid (either about the house or if you're out)?						
No, aid not used . . . . .	1 ask (a)(b)	1 ask (a)(b)	1 ask (a)(b)			
Only inside house . . . . .	2 ask (b)	2 ask (b)	2 ask (b)			
Only outside house . . . . .	3 ask (a)	3 ask (a)	3 ask (a)			
Both inside and outside . . . . .	4	4	4			
(a) Why don't you use it inside house?						
(b) Why don't you use it outside? [If different from (a)]						
IF USES A WHEELCHAIR ASK SPECIAL WHITE SHEET, OTHER-WISE ON TO TESTS						

TESTS OF MOTOR CAPACITY

1. The tests apply to all informants - even those who are bedfast may be able to do some actions if not others.

Even where you would expect to find no difficulty, you should ask the informant to do the tests, using some introduction on the lines shown in interviewers instructions.

2. If any actions are observed, e.g. walking, sitting on armless chair, etc. code without asking.
3. The order of the test could be varied - provided every item is eventually completed.

4. [Suggested Introduction]

I WOULD LIKE TO ASK YOU TO DO A FEW SIMPLE MOVEMENTS FOR ME. THEY ARE THE MOVEMENTS MOST USED IN EVERYDAY LIFE AND HAVE BEEN DESIGNED TO TELL US HOW PEOPLE MANAGE TO DO THINGS LIKE PICKING UP AND GRASPING OBJECTS AND PUTTING THINGS UP ONTO SHELVES. I'LL SHOW YOU WHAT I WANT YOU TO DO AS WE GO ALONG.

ON NO ACCOUNT ATTEMPT TO DO ANYTHING YOUR DOCTOR HAS TOLD YOU NOT TO DO OR YOU FEEL WOULD BE HARMFUL. PLEASE LET ME KNOW IF ANY OF THESE MOVEMENTS CAUSE YOU ANY PAIN OR DISCOMFORT.

The introduction to the tests will need to vary according to the condition of the informant. (Examples are given in interviewers instructions).

5. Put down the score immediately after every single movement.
6. If the whole test refused
  - (a) Reason for refusal
  - (b) Note (from observation) any indication that the informant would have had difficulty performing any item, or could do it easily.
7. If no armless chair available, ask subject to avoid using arms, and note type of chair used.

PINK

TESTS OF MOTOR CAPACITY

NOTES FOR SCORING TESTS OF MOTOR CAPACITY

NO PERSONAL ASSISTANCE SHOULD BE GIVEN IN PERFORMANCE OF TESTS (E.G. TEST OBJECTS SHOULD NOT BE PLACED IN SUBJECT'S HANDS. NOR SHOULD HELP BE GIVEN TO GET OUT OF A CHAIR)

SCORE 0 FOR ANY ACTIONS PERFORMED -

- a) IN LESS THAN ABOUT 15 SECONDS EACH HAND - UNLESS OTHER STATED (EXCEPT FOR WALKING 12 PACES ALLOW ABOUT 60 SECONDS)
- b) WITHOUT HELP OF OBJECT (E G STICK, WALKING FRAME, CALIPERS, HAND RAIL, ARTIFICIAL LIMB)
- c) WITHOUT EXPRESSED PAIN, PANTING OR SWAYING
- d) WITHOUT ANY ABNORMAL COMPENSATORY MOVEMENT(S), PARTICULARLY AS SPECIFIED IN EACH TEST

SCORE 1 FOR ANY ACTIONS PERFORMED -

- a) IN ABOUT 15-60 SECONDS (EXCEPT FOR WALKING 12 PACES ALLOW FROM 1 UP TO ABOUT 3 MINUTES)
- b) WITH HELP OF OBJECT (E G. ARM SUPPORTED BY FLAT SURFACE, ARTIFICIAL LIMB, HAND RAIL, WALKING FRAME, CALIPERS, STICK)
- c) WITH EXPRESSED PAIN WITH ABNORMAL COMPENSATORY MOVEMENTS (I.E. IN A WAY QUITE DIFFERENT TO THE DEMONSTRATION) PARTICULARLY AS SPECIFIED IN EACH TEST, SWAYING, OR PANTING INDUCED BY ANY ACTION.

SCORE 2 FOR ANY ACTIONS WHICH

- a) ARE NOT UNDERTAKEN BECAUSE OF MEDICAL ADVICE
- b) ARE NOT UNDERTAKEN BECAUSE SUBJECT DOES NOT FEEL CAPABLE
- c) ARE NOT UNDERTAKEN BECAUSE FAILURE OF PRIOR TEST EXCLUDES SUBJECT FROM TRYING
- d) ARE NOT COMPLETED IN THEIR ENTIRETY
- e) ARE PERFORMED IN MORE THAN ABOUT 60 SECONDS (OR MORE THAN ABOUT 3 MINUTES FOR WALKING 12 PACES)

IF SOME ITEMS ONLY REFUSED:

- a) BECAUSE INFORMANT SAYS DOCTOR FORBIDS, OR CANNOT PERFORM - ENTER SCORE 2. BUT CODE X, NOT OBSERVED.
- b) BECAUSE INFORMANT DOES NOT AGREE TO AN INDIVIDUAL TEST ("Silly, can't you take my word", etc.) - CODE REFUSED - "Y".

UPPER EXTREMITY FUNCTION TEST

For any 1 on refused insert code  
1, or if not observed insert code  
X as well as score 2.

Check - are you normally ..... Right handed . . . Y  
Left handed . . . X  
Ambidextrous . . . O

FUNCTION	Scored	
	Right	Left
<p><b>A. HAND REACH, GRASP AND RELEASE</b></p> <p>1. Grasp weighted plastic tumbler, using thumb and at least <u>two</u> fingers, raise to mouth level from flat surface, the head remaining in usual position and hand held steady. Put down tumbler on surface.</p>		
<p><b>B. WRIST, FOREARM AND ELBOW MOVEMENTS</b></p> <p>2. Take tumbler in hand in the most comfortable way, turn to right side so that rim touches flat surface, turn to left side so that rim touches flat surface, using wrist, forearm and elbow only. (If obvious shoulder movement used to complete test, score 1)</p>		
<p><b>C. PALM AND FINGER DEXTERITY</b></p> <p>3. Pick up pen which has tip pointing towards opposite hand, using thumb and at least <u>one</u> finger. Transfer in hand to writing position, between thumb and first finger present. <u>90°</u> between first and second fingers. Put down again.</p>		
<p><b>D. MANIPULATION WITH BOTH HANDS (allow up to 30 secs. for score 0)</b></p> <p>4. Pick up and put together large nut and bolt, screw 1° up, unscrew. Both hands should be used. (If only one hand can be used score 1).</p> <p>5. Pick up and put together small nut and bolt, screw 1° up, unscrew. Both hands should be used. (If only one hand can be used score 1).</p>		
<p><b>E. ARM REACH MOVEMENTS (EACH ARM SEPARATELY)</b></p> <p>Start with hands in lap in each case. For 6-9, bend in elbow up to 160° is acceptable for score 0.</p> <p>6. Lower hand directly downwards with arm fully extended .</p> <p>7. Raise hand directly above head, with arm fully extended.</p> <p>8. Raise hand to shoulder height, with arm fully extended frontwards, so that hand is level with shoulder.</p> <p>9. Raise hand to shoulder height, with arm fully extended sideways, so that hand is level with shoulder.</p> <p>10. Touch back of head at nape of neck with hand, keeping hand in normal position.</p>		
<p><b>F. MUSCLE STRENGTH</b></p> <p>Lift 1½ -1b weight from flat surface -</p> <p>11. to shoulder height (frontwards or sideways), with elbow either flexed or straight, not moving head or body. (Score 1 if head or body movement essential to complete test).</p> <p>12. from shoulder height, lift weight above head height, with arm either flexed or extended, (frontwards or sideways), not moving head or body. (Score 1 if head or body movement essential to complete test).</p> <p>Lift 5-lb. weight from flat surface - as above.</p> <p>13. to shoulder height,</p> <p>14. from shoulder height.</p>		
TOTAL UPPER EXTREMITY SCORE		

PINK

For any item refused insert code  
I, or if not observed insert code  
I as well as score 2.

**LOWER EXTREMITY FUNCTION TEST**

FUNCTION	SCORE
<p><b>G. STANDING</b></p> <p>1. Stand up from sitting position in armless chair (if seat or any other part of chair is used as a lever, or if an artificial leg is worn, score 1). Recommended height of chair between 16" - 18".</p>	
<p><b>H. WALKING</b></p> <p>2. Walk 2 steps (i.e. about 4 feet).</p> <p>3. Walk 12 steps (6 steps, turn and another 6 steps).</p> <p>(Score 1 if shoes built up 1" or more at the sole, if gait is uneven or body movement excessive, or if an artificial limb, crutches or other walking aid is used).</p>	
<p><b>J. STEPPING UP AND DOWN</b></p> <p>No step available . . . . . 9 - ask (a)</p> <p>4. Mount a step 6" high from floor level, turn</p> <p>5. Descend from a step 6" above floor level.</p> <p>(The procedure can be reversed if available step is below floor level).</p> <p>(Score 1 if stair-rail, crutch, stick, artificial limb or any other support is used to complete test. Also if excessive movement of trunk used to complete test)</p> <p><u>If no step available (9)</u></p> <p>(a) Could you go up one stair, or step up a kerb</p> <p>                    on your own without any difficulty or using a rail or other aid . . . . . 0</p> <p>                    or could you do it on your own only with difficulty or using an aid . . . . . 1</p> <p>                    or couldn't you climb a stair on your own at all? . . . . . 2</p>	
<p><b>K. BENDING AND SITTING</b></p> <p>6. From a standing position reach down to touch floor (anywhere) with finger-tips, using either hand and bending both knees. (If test can only be done with straight knee score 1).</p> <p>7. Sit down from standing position in armless chair. (If an artificial leg is worn, or any other aid to sitting down is used, including the arm of a chair if only an armchair is available, score 1). Recommended height of chair between 16" - 18"</p> <p>8. From a sitting position reach down to touch floor (anywhere) with fingertips using either hand (Score 1 if support or object is needed, e.g. stick or chair arm). (N.B. A pick-up gadget is not permitted).</p>	
<p>TOTAL SCORE FOR LOWER EXTREMITY FUNCTION</p>	
<p>COMBINED SCORE FOR UPPER AND LOWER EXTREMITY FUNCTION</p>	

Qn. L. Could you go up a flight of stairs

                    on your own without any difficulty or using a rail or other aids . . . . . 0

                    or could you do it on your own only with difficulty or using an aid . . . . . 1

                    or couldn't you climb a flight of stairs on your own at all? . . . . . 2



If BLIND only, no score on test .... X - on to next section

Qn.M Some people feel better as the day goes on - others feel worse. Would you have found it easier or harder to do the things you've just done if I'd come at a different time, or doesn't it make any difference? Say I'd come

- a) in the morning?
  - D N A. (tested in morning) . . . . . Y
  - Easier in the morning . . . . . X
  - Harder . . . . . 0
  - About the same . . . . . 1
  
- b) in the afternoon?
  - [roughly 1-5 pm] D N A (tested in afternoon) . . . . . 2
  - Easier in afternoon . . . . . 3
  - Harder . . . . . 4
  - About the same . . . . . 5
  
- c) in the evening?
  - [after 5 pm] D N A. (tested in evening) . . . . . 6
  - Easier in the evening . . . . . 7
  - Harder . . . . . 8
  - About the same . . . . . 9

\* if most things done with ease - omit "easier"  
if most things impossible omit "harder".

Qn.N Some people have disabilities where they have good days or bad days, or good and bad spells.

Does your (disability) work like this, or is it much the same all the time?

- Much the same all the time . . . . . 0
- code both if apply [ Has good/bad days . . . . . 1 ]- ask (a)
- [ Has good/bad spells . . . . . 2 ]

If has good/bad days or spells (1, 2)

- (a) Is today one of your good days or a bad day? - Good day . . . . . 2
- Bad day . . . . . 3

WHTT

IF PERMANENTLY BEDFAST/CHAIRBOUND or NEEDS A LOT OF HELP go on to special questionnaire  
 Others: IF SCORE ON TEST IS 40 - go on to Qs. 29 page 17, but code here ..... 0  
 " " " " for Upper Extremities only is 40 - introduce and ask items 1-4 inclusive... Y  
 " " " " for Lower Extremities only is 40 - " " " " 5-9 " " " " X  
 If Scores at least 41 on both extremities - introduce and ask all items,

2

SELF-CARE: INTRODUCE -

I noticed you had some difficulty (with one or two items) - which might make it difficult for you to do some things for yourself? May I just check?

PG	Do you generally have difficulty in	No difficulty	Difficulty	IF DIFFICULTY (1) ask (a), (b) and (c)							
				(a) Can you do it on your own even with difficulty		(b) Do you usually have someone (coming in) to help you with it?			(c) Do you use any special aids or gadgets to help		
				Yes	No	No	Someone in h/d (specify)	Someone outside h/d (specify)	Yes	No	
CODE											
(1)	Getting in and out of bed on your own	0	1	2	3	5				8	9
(2)	Getting to or using the toilet	0	1	2	3	5				8	9
(3)	Having a bath DNA - 'b bath	0	1	2	3	5				8	9
	a) Having an '11 over wash?	0	1	2	3	5				8	9
	b) Washing your hands and face?	0	1	2	3	5				8	9
(4)	Putting on shoes and socks or stockings yourself	0	1	2	3	5				8	9
(5)	Doing up buttons and zips yourself	0	1	2	3	5				8	9
(6)	Dressing other than buttons and shoes	0	1	2	3	5				8	9
(7)	Feeding yourself	0	1	2	3	5				8	9
(8)	Combing and brushing your hair	0	1	2	3	5				8	9
(9)	DNA Human [X] [X] shaving yourself	0	1	2	3	5				8	9

For any special aid used in (c)

Record Code	(i) Describe aid	(ii) Who supplied/did it? Was responsible for having it done/lending, giving it	(iii) Was it free? If not specify SDRI if per session don't forget FREE to state session
			0
			0
			0
			0
			0

27 May we talk about the Welfare Services?

Have you ever heard of the Local Authority Register of Handicapped Persons?

If asked is this run by Min. of Labour, say, "No"

Yes. . . . . 1 - ask (a)  
No . . . . . 0  
Don't know/not sure . . . . . X] on to Q.28

If Yes (1)

(a) Do you know what sort of people this register is for?

No..... 1  
Yes (specify)..... 2

If any indication they think it is ONLY for workers, or people who can't work, say, - "No, that's the Industrial Register" - and go on to Q.28.

(b) Are you yourself on this register (with this Authority)?

Yes, registered..... 3 - ask (i) - (iii)  
No, not registered..... 4 - ask (iv) next page

If registered (3)

(1) For how long have you been registered? \_\_\_ yrs. \_\_\_ mths [Months required only if less than 2 years]

(ii) What benefit has it been to you?

None..... 0

(iii) Is this -

PROMPT AS APPLICABLE

More than you expected?..... 1] on to Q.29  
What you expected?..... 2]  
or did you expect them to do more?..... 3 - ask (A)

If expected more (3)

(A) What did you expect?

ON TO Q. 29

Qn. 27 (Contd. ...)

If not registered (4)

(iv) Is this because you don't consider yourself to be handicapped or is there some other reason?

Don't consider handicapped . . . . . 1  
Other reason (specify) . . . . . 2

ON TO QN. 29

TO THOSE NOT KNOWING ABOUT REGISTER, or confusing with M.O.L.

INTRODUCE All local authorities must keep a register of handicapped people, and help them where they can.

28. If you had known about this register, would you have registered with them?

Yes . . . . . 1  
No . . . . . 2 - ask (a)

If No (2)

(a) Is this because you don't consider yourself to be handicapped or is there some other reason?

Don't consider handicapped . . . . . 3  
Other reason (specify) . . . . . 4

31.

TO ALL

29. Do you have any of these come to visit or help you now? (at present - exclude breaks like home help ill, etc.)

	No	Yes	If Yes
a) Home help	0	1	How many hours a week? _____
b) Meals on Wheels	0	2	How many meals a week? _____
c) District nurse/male nurse	0	3	How often does she come? _____ _____
d) Health visitor	0	4	
e) Social worker	0	5	
f) Occupational therapist	0	6	
g) Physiotherapist	0	7	
h) Chiropody	0	8	How often do you have your feet done? _____
j) Any other health/welfare services? (specify)	0	9	

32.

33.

- 13 -

30 Since you've had (disability) have you ever applied to the Authorities, or a welfare association for any help, which they did not provide?

Yes. . . . . 1 - ask (a)-(d)  
No.. . . . . 0

If Yes (1)

(a) To whom did you apply?

(b) What help did you want?

(c) Do you know why they did not help you?

(d) How long ago was that?

\_\_\_\_\_ yrs. \_\_\_\_\_ mths.

31. Do you think any of the health and welfare services I have just mentioned should do more to help you personally - or do you think they do enough?

Should do more.. . . . . 0 - ask (.)  
Do enough..... . . . . Y  
Don't know..... . . . . X

If should do more (0)

(a) What more ought to be done (and by whom) to help you personally?

Could we talk about how you pass the time (when you are not working)?

32. Do you listen to the radio?

Check if doesn't listen whether has one

Yes, listens..... . . . . 0  
Doesn't listen, but has radio..... 1  
Doesn't listen, has no radio..... 2

33. Do you watch television?

D.N.A. Blind. . . . . X  
No T.V. set..... . . . . 0  
Yes, watch... . . . . 1  
T.V. , but doesn't view. . . . . 2

If permanently Redfast or housebound - code and go on to Qn.38 ... X  
 If at this stage you know informant is working - code and go on to Qn. 35... Y

34. Is there a Local Authority Centre for the Physically Handicapped you could get to if you wanted to go? - I don't just mean a social club.

Yes..... Y - ask (a)  
 Never heard of one/Don't know... X } on to  
 Know of one, can't get there... 0 } Q 35 next  
 "Not physically handicapped"... 1 } page

If Yes (Y)

(a) Do you go to the Centre?

Yes, go to Centre... 3 - ask (i)(ii)  
 No... 4 - ask (iii)

If Yes (goes to centre) (3)

(i) What do you do there?

(ii) How do you get there? [if nec check who provides transport]

ONE	Transport provided by L A ..	1	
CODE	Private transport.....	2	
ONLY	Public transport .....	3	} ask (A)
	Walk/Wheelchair.....	4	

If public transport, walk/wheelchair (3, 4)

(A) Would you find it easier if the Local Authority were to supply transport to get you there and back?

Yes..... 5 } go on  
 No..... 6 } to  
 Other answers (specify)..... 7 } Qn. 35

If does not go to Centre (4)

(iii) Is this because you are not physically handicapped, or is there some other reason?

Not physically handicapped... 0  
 Other reason..... 1 - ask (a)

If other reason (1)

(a) Why don't you go there?

35. Do you go to any Clubs nowadays?

Yes  
No .. A - ask (a)  
O - ask (b)

If Yes (A)

(a) What sort of clubs?

- Old people/Silver Thread/D & J/etc 1
- Working mens/social/bingo 2
- Womens Institute, Towns Womens Guild/Co-op. 3
- Church club (not OAP) 4
- Freemasons/ Toc H/Brit Legion, etc 5
- Sports (Tennis/bowls/billiards/etc ) 6
- Disabled/Handicapped/blind 7
- Youth Clubs 8
- Others (specify) . . . 9

If No (O)

(b) Is this because of your (disability) or are there other reasons?

Because of disability . . . Y  
Other reasons . . . X

36. Is there anywhere you'd like to go, but can't simply because of your(disability)?  
[probe fully]

No, nowhere . . . 0 - on to Qn 38

37. Is this because your (disability) makes it hard for you to get there, or because once you're there, you can't get in?

CODE BOTH IF APPLICABLE  
Hard to get there. .... 1  
Can't get in..... 2

WHITE

TO ALL

38. When did you last have a holiday (spend at least a week away from home for pleasure)?

- Within last year.. . . . . 0
- (Approx.) No. of years ago. . . . .
- Too long ago to remember . . . . . f - ask (b)

If 5 years or less

(a) Did you or your family, arrange for your last holiday or was it arranged for you by the local authority or another organisation?

- Self or family. . . . . 1
- Organisation (specify)... . . . . 2

[Ask if holiday enjoyed - no need to record answer]

GO ON TO QN. 39

If more than 5 years ago

(b) Has anybody offered you a holiday in the last 5 years?

- Yes. . . . . 1 ask (i)(ii)
- No. . . . . 2 ask (iii)

If offered holiday (i)

(1) Who offered to arrange a holiday for you?  
[Name of organisation]

(ii) Why didn't you go?

GO ON TO QN. 39

If not offered holiday (2)

(iii) Would you like to go away anywhere for a holiday or a break?

- Yes. . . . . 1 ask A
- No. . . . . 2 ask B

If yes (1)

(A) What stops you?

If No (2)

(B) Why don't you want to go?



39. Do you have in, (ot'er-)hobbies now?

No. . . . . 4  
Yes . . . . . 5 - ask (a)

If Yes (5)

(a) What are your hobbies?

40. (Apart from hobbies mentioned) how else do you use your time (when you're not working)?

No spare time..... 0  
Nothing else. .... X

41. Have you had to give up anything you liked doing (in your spare time) because of your (disability)?

No... .. 0  
Yes (specify). . . . Y

WHITE

If Blind, Permanently bedfast or housebound -

go on to next section, and code ..... Y

We've been talking about getting about -

42. Do you yourself have a motor vehicle of any kind, which you drive?

- have and drive ..... 7 on to Q.43
- Have, but doesn't drive ... .. 0 ] ask (a)
- No vehicle ..... 1

If has but doesn't drive, or no vehicle (0,1)

(a) Does anyone else (living here) have a motor vehicle which you (could drive, or) are taken out in regularly?

- Yes, can drive . . . . . 2 ] ask (i)
- Yes, taken out .. .. . 3 ]
- No .. . . . . . 4 - ask (ii)

If Yes, can drive or taken out (2,3)

(i) Whose vehicle is it? (relationship to subject)

- Husband/wife ..... 5 ] on to Q.43
- Child/Parent/Sibling ..... 6 ] if uses
- Friend/boarder ..... 7 ] On to next section if taken out

If No (4)

(ii) Can you generally get a lift if you want to go anywhere?

- Yes, generally . . . . . Y ] On to next section
- No . . . . . X ]

To all who have and drive a motor vehicle

43. Check or ask what sort of vehicle it is? Is it a

- Invalid tricycle .. . . . . Y - on to Q.45
- Saloon/sports car ..... X
- Estate car/van ..... 0
- Motor bike/scooter ..... 1
- Other (specify) ..... 2

PROMPT AS NECESSARY

44. Is it a standard model, or has it been adapted because of your (disability)?

- Standard model ..... 4
- Adapted .. . . . . . 5 - ask (a)

If adapted (5)

(a) Who paid for adapting it?

- Self or relative/friend ..... 6
- Employer ..... 7
- Ministry of Health/Scottish Home and Health ..... 8
- Other (specify) ..... 9

45. Do you have a disabled driver's car badge?

- Yes ..... 1
- No ..... 2 - ask (a)

If no badge (2)

(a) Is this because you haven't applied for one, or because you have applied and been refused?

- Haven't applied ..... 3 ]
- Been refused ..... 4 ]
- Other (specify) ..... 5 ]

ON TO NEXT SECTION UNLESS HAS INVALID TRICYCLE - WHEN ASK NEXT PAGE



(i) Interviewer \_\_\_\_\_

Authorisation No. ....

(ii) Date of Interview \_\_\_\_\_

(iii) Person interviewed.-

- Subject (singly) ..... 1
- Subject (jointly) ..... 2
- Subject helped by proxy ..... 3
- Proxy (state relationship) ..... 4

NOTE: THE S/No SHOULD ALWAYS END IN THE LAST 2

Serial Nos. 0-9 0-9 0-9 0-9 0-9 0-9 1-3  
 CARD A. STARS → 8 9 10 11 12 13 14

(iv) Name of subject ..... (BLOCK CAPS)

Address .....

Where subject is at home, but is too confused or irrational, or too ill to be interviewed (excluding temporary illness where an interview may be carried out at a later date), someone who is responsible for looking after the subject (a proxy) should be asked.

(vi) If Refusal - Reason - giving as much detail of capability as possible, e.g. if seen, appears active/walks with stick, etc., or out at work. Get Household composition inc. as much detail as possible.

*CARD A. = P.H. Subject*

NOTE: PUNCH ALL OVERCODES ON 1ST. COL. OF GIVEN SET.

*Mr. Brown*

Punch only the line where the subject's No. is rung.

(iv) HOUSEHOLD COMPOSITION

(a) Relationship to H.O.h.	(b) Ring code to-indicate subject	(c) Sex M F	(d) Age	(e) Marital Status			(f) Working? (Any number of hours)					(g) Bedfast or Chair- rest			H <sup>1</sup> to get out
				Md. T/Un	Sgl. W/V	Wd. W/S	Full time	Part time	Unemp. Sick (unpaid)	Rtd. H/wife	Student	6	7	8	
H.O.H.	1	1 2		3	4	5	1	2	3	4	5	6	7	8	
	2	1 2		3	4	5	1	2	3	4	5	6	7	8	
	3	1 2		3	4	5	1	2	3	4	5	6	7	8	
	4	1 2		3	4	5	1	2	3	4	5	6	7	8	
	5	1 2		3	4	5	1	2	3	4	5	6	7	8	
	6	1 2		3	4	5	1	2	3	4	5	6	7	8	
	7	1 2		3	4	5	1	2	3	4	5	6	7	8	
	8	1 2		3	4	5	1	2	3	4	5	6	7	8	
	9	1 2		3	4	5	1	2	3	4	5	6	7	8	
	10	1 2		3	4	5	1	2	3	4	5	6	7	8	
	11	1 2		3	4	5	1	2	3	4	5	6	7	8	
	12	1 2		3	4	5	1	2	3	4	5	6	7	8	

OFFICE USE

13	14	15													
a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	

# ORANGE

Question 144 where informant is drawing a Supplementary Pension or Allowance (National Assistance)

144 Do you or your wife have any money in

CARD Q

(i) The bank, savings bank, co-op, saving certificates, building society, premium bonds?

Yes, self.....  
Yes, wife.....  
No, neither.....

0...  
A M C  
3  
4 5 6

(ii) Stocks, shares, including War Loan, etc.?

Yes, self.....  
Yes, wife.....  
No, neither.....

3 M C  
6  
7  
8 S C

(iii) Property other than this dwelling house?

Yes, self.....  
Yes, wife.....  
No, neither.....

9 M C  
0  
1 S C

If has any savings

(a) Taken together [remind inf. of items] would you say that altogether (not counting this house if owned) you have.

RUNNING PROMPT

Over £2,500...  
£300 - £2,500...  
Less than £300...

X  
4  
1  
2  
3

If between £300 and £2,500 (2)

(i) (It would help me to get it more accurately) specify amount

60/61/62/63

£ 1-4 near or 3 x

END OF CARD Q

145. We've already talked about the extra expenses for housing. Do you have any extra expenses due to (a) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n) (o) (p) (q) (r) (s) (t) (u) (v) (w) (x) (y) (z) (aa) (ab) (ac) (ad) (ae) (af) (ag) (ah) (ai) (aj) (ak) (al) (am) (an) (ao) (ap) (aq) (ar) (as) (at) (au) (av) (aw) (ax) (ay) (az) (ba) (bb) (bc) (bd) (be) (bf) (bg) (bh) (bi) (bj) (bk) (bl) (bm) (bn) (bo) (bp) (bq) (br) (bs) (bt) (bu) (bv) (bw) (bx) (by) (bz) (ca) (cb) (cc) (cd) (ce) (cf) (cg) (ch) (ci) (cj) (ck) (cl) (cm) (cn) (co) (cp) (cq) (cr) (cs) (ct) (cu) (cv) (cw) (cx) (cy) (cz) (da) (db) (dc) (dd) (de) (df) (dg) (dh) (di) (dj) (dk) (dl) (dm) (dn) (do) (dp) (dq) (dr) (ds) (dt) (du) (dv) (dw) (dx) (dy) (dz) (ea) (eb) (ec) (ed) (ee) (ef) (eg) (eh) (ei) (ej) (ek) (el) (em) (en) (eo) (ep) (eq) (er) (es) (et) (eu) (ev) (ew) (ex) (ey) (ez) (fa) (fb) (fc) (fd) (fe) (ff) (fg) (fh) (fi) (fj) (fk) (fl) (fm) (fn) (fo) (fp) (fq) (fr) (fs) (ft) (fu) (fv) (fw) (fx) (fy) (fz) (ga) (gb) (gc) (gd) (ge) (gf) (gg) (gh) (gi) (gj) (gk) (gl) (gm) (gn) (go) (gp) (gq) (gr) (gs) (gt) (gu) (gv) (gw) (gx) (gy) (gz) (ha) (hb) (hc) (hd) (he) (hf) (hg) (hh) (hi) (hj) (hk) (hl) (hm) (hn) (ho) (hp) (hq) (hr) (hs) (ht) (hu) (hv) (hw) (hx) (hy) (hz) (ia) (ib) (ic) (id) (ie) (if) (ig) (ih) (ii) (ij) (ik) (il) (im) (in) (io) (ip) (iq) (ir) (is) (it) (iu) (iv) (iw) (ix) (iy) (iz) (ja) (jb) (jc) (jd) (je) (jf) (jg) (jh) (ji) (jj) (jk) (jl) (jm) (jn) (jo) (jp) (jq) (jr) (js) (jt) (ju) (jv) (jw) (jx) (jy) (jz) (ka) (kb) (kc) (kd) (ke) (kf) (kg) (kh) (ki) (kj) (kk) (kl) (km) (kn) (ko) (kp) (kq) (kr) (ks) (kt) (ku) (kv) (kw) (kx) (ky) (kz) (la) (lb) (lc) (ld) (le) (lf) (lg) (lh) (li) (lj) (lk) (ll) (lm) (ln) (lo) (lp) (lq) (lr) (ls) (lt) (lu) (lv) (lw) (lx) (ly) (lz) (ma) (mb) (mc) (md) (me) (mf) (mg) (mh) (mi) (mj) (mk) (ml) (mm) (mn) (mo) (mp) (mq) (mr) (ms) (mt) (mu) (mv) (mw) (mx) (my) (mz) (na) (nb) (nc) (nd) (ne) (nf) (ng) (nh) (ni) (nj) (nk) (nl) (nm) (nn) (no) (np) (nq) (nr) (ns) (nt) (nu) (nv) (nw) (nx) (ny) (nz) (oa) (ob) (oc) (od) (oe) (of) (og) (oh) (oi) (oj) (ok) (ol) (om) (on) (oo) (op) (oq) (or) (os) (ot) (ou) (ov) (ow) (ox) (oy) (oz) (pa) (pb) (pc) (pd) (pe) (pf) (pg) (ph) (pi) (pj) (pk) (pl) (pm) (pn) (po) (pp) (pq) (pr) (ps) (pt) (pu) (pv) (pw) (px) (py) (pz) (qa) (qb) (qc) (qd) (qe) (qf) (qg) (qh) (qi) (qj) (qk) (ql) (qm) (qn) (qo) (qp) (qq) (qr) (qs) (qt) (qu) (qv) (qw) (qx) (qy) (qz) (ra) (rb) (rc) (rd) (re) (rf) (rg) (rh) (ri) (rj) (rk) (rl) (rm) (rn) (ro) (rp) (rq) (rr) (rs) (rt) (ru) (rv) (rw) (rx) (ry) (rz) (sa) (sb) (sc) (sd) (se) (sf) (sg) (sh) (si) (sj) (sk) (sl) (sm) (sn) (so) (sp) (sq) (sr) (ss) (st) (su) (sv) (sw) (sx) (sy) (sz) (ta) (tb) (tc) (td) (te) (tf) (tg) (th) (ti) (tj) (tk) (tl) (tm) (tn) (to) (tp) (tq) (tr) (ts) (tt) (tu) (tv) (tw) (tx) (ty) (tz) (ua) (ub) (uc) (ud) (ue) (uf) (ug) (uh) (ui) (uj) (uk) (ul) (um) (un) (uo) (up) (uq) (ur) (us) (ut) (uu) (uv) (uw) (ux) (uy) (uz) (va) (vb) (vc) (vd) (ve) (vf) (vg) (vh) (vi) (vj) (vk) (vl) (vm) (vn) (vo) (vp) (vq) (vr) (vs) (vt) (vu) (vv) (vw) (vx) (vy) (vz) (wa) (wb) (wc) (wd) (we) (wf) (wg) (wh) (wi) (wj) (wk) (wl) (wm) (wn) (wo) (wp) (wq) (wr) (ws) (wt) (wu) (wv) (ww) (wx) (wy) (wz) (xa) (xb) (xc) (xd) (xe) (xf) (xg) (xh) (xi) (xj) (xk) (xl) (xm) (xn) (xo) (xp) (xq) (xr) (xs) (xt) (xu) (xv) (xw) (xx) (xy) (xz) (ya) (yb) (yc) (yd) (ye) (yf) (yg) (yh) (yi) (yj) (yk) (yl) (ym) (yn) (yo) (yp) (yq) (yr) (ys) (yt) (yu) (yv) (yw) (yx) (yy) (yz) (za) (zb) (zc) (zd) (ze) (zf) (zg) (zh) (zi) (zj) (zk) (zl) (zm) (zn) (zo) (zp) (zq) (zr) (zs) (zt) (zu) (zv) (zw) (zx) (zy) (zz)

ON EACH LINE (a) - (c)	No	Estimated weekly amount	Actual weekly amount
(a) Domestic help? 734 25	0	£ 22/7	28/4
(b) Heating? 735 30	0	£ 21/22	33/34
(c) Special diets? 736 35	0	£ 36/37	38/39
(d) Anything else we haven't mentioned? 737 40	0	£ 75/1	75/13

24 733

146. If any extra expenses

In the past year did you (or your wife) use up any of your savings, or raise a loan on property or insurance policy, or anything like that, to meet these extra expenses?

Yes...  
No...

765 28  
3  
1  
2

If Yes (1)

(a) Which of these expenses?

(b) How much money did you use?

766 52/53

57-12 15/19

END CARD N HERE

~~STANDARD~~ CARD ZERO 3-7 SERIAL

Authorisation No. (SD) ...  
 Date of Interview Punch Card

RAY'S

8	9	10	11	12	13	14
0	0	0	0	0	0	0
1-9	1-9	1-9	1-9	1-9	1-9	1-9

Person interviewed -  
 Subject (singly) .....  
 Subject (jointly) .....  
 Subject replied by proxy .....  
 Interviewer's relationship) .....

(v) Name of subject .....  
 Address .....

This sheet for Man Kolt.

Not GREY.

Subject is at home, but is too confused or blind, or too ill to be interviewed (including temporary illness where an interview is carried out at a later date), someone who is responsible for looking after the subject (a proxy) should be asked.

(vi) If Refusal Reason - giving as much detail of capability as possible, e.g. if seen, non-active/walks with stick, etc., or out at work. Get Household composition inc. as much detail as possible.

Home 2-4 whether by x or.

WT 10

Serial = #00980 CARD ZERO

Serial sampled #00981  
 Ray or Not 550

- 24 24 = main hld inc left
- 25 25 = earned incl left
- 26 26 = total bedfast
- 27 27 = total household.
- 28 = Sampling Serial
- 29 = Region

HOUSEHOLD COMPOSITION

one code entered in this column

(a)	(b)	(c)	(d)	(e)	(f)	(g)
Relationship to subject	Ring code to indicate subject	Sex	Age	Marital Status	Working? (Any number of hours)	Bedfast
				Md. Sgl. Wd.	Full Part Unemp. Rtd. Student or Sick (unpaid) H/wife	H' to Chair-bd. get fast
1	15/16	M	17	20 20	2 1	2 3
2	1-5/9	F	12	3 4 5	1 2 3 4 5	6 7 8
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						

OFF USE

--	--	--	--	--	--	--	--	--	--

on to card 'A' & 'B'

**CARD 2500**  
UPPER EXTREMITY FUNCTION TEST

If item refused insert code  
if no observed insert code  
well as score 2

Check - are you normally . . . . Right handed . . . .  
Left handed . . . .  
Ambidextrous . . . .

SC  
Q  
Y  
X  
0

FUNCTION	Scores	
	Right	Left
<p><u>1. GRASP AND RELEASE</u></p> <p>1. Grasp designated plastic tumbler, using thumb and at least two fingers, raise to mouth level from flat surface, the head remaining in usual position and hand held steady. Put down tumbler on surface.</p> <p align="right"><i>For each test</i></p>	SC 0,1 2,2 3,3	SC 0,1 2,2 3,3
<p><u>2. WRIST AND ELBOW MOVEMENTS</u></p> <p>2. Take tumbler in hand in the most comfortable way, turn to right side so that rim touches flat surface, turn to left side so that rim touches flat surface, using wrist, forearm and elbow only. (If obvious shoulder movement used to complete test, score 1).</p>		
<p><u>3. FINGER AND FINGER DEXTERITY</u></p> <p>3. Pick up pen which has tip pointing towards opposite hand, using thumb and at least one finger. Transfer in hand to writing position, between thumb and first finger present, or between first and second fingers. Put down again.</p>		
<p><u>4. MANIPULATION WITH BOTH HANDS</u> [allow up to 30 secs. for score 0]</p> <p>4. Pick up and put together large nut and bolt, screw 1" up, unscrew. Both hands should be used (if only one hand can be used score 1).</p> <p>5. Pick up and put together small nut and bolt, screw 1" up, unscrew. Both hands should be used (if only one hand can be used score 1).</p>		
<p><u>5. ARM REACH MOVEMENTS (EACH ARM SEPARATELY)</u></p> <p>Start with hands in lap in each case. For 6-9, bend in elbow up to 160° is acceptable for score 0.</p> <p>6. Lower hand directly downwards with arm fully extended.</p> <p>7. Raise hand directly above head, with arm fully extended.</p> <p>8. Raise hand to shoulder height, with arm fully extended frontwards, so that hand is level with shoulder.</p> <p>9. Raise hand to shoulder height, with arm fully extended sideways, so that hand is level with shoulder.</p> <p>10. Touch back of head at nape of neck with hand, keeping head in normal position.</p>		
<p><u>6. MUSCLE STRENGTH</u></p> <p>Lift 1 1/2 -lb weight from flat surface -</p> <p>11. to shoulder height (frontwards or sideways), with elbow either flexed or straight, not moving head or body. (Score 1 if head or body movement essential to complete test).</p> <p>12. to shoulder height, lift weight above head height, with arm either flexed or extended, frontwards or sideways), not moving head or body. (Score 1 if head or body movement essential to complete test).</p> <p>13. to shoulder height, lift weight from flat surface - as above.</p> <p>14. to shoulder height.</p> <p>15. to shoulder height.</p>	<p><i>QC</i></p> <p>1 y - 33</p> <p>2 x - 34</p> <p>3 q - 35</p>	<p>31/32</p> <p><b>23/29</b></p>
<p>DEXTERITY SCORE</p>	0, 1-52	<p>23/29</p> <p>24/29</p>

[All 3 overrules  
insert apply]

For any item refused insert code  
 For any item observed insert code  
 If no score?

LOWER EXTREMITY FUNCTION TEST

FUNCTION	SCORE
<p><b>C STANDING</b> <span style="float: right;">[for each test SC [except 34-35]]</span></p> <p>1 Stand up from sitting position in armless chair. (If seat or any other part of chair is used as a lever, or if an artificial leg is worn, score 1). Recommended height of chair between 16" - 18".</p>	<p>0, 1, 2, 3, 2X, Y</p>
<p><b>D WALKING</b></p> <p>2 Walk 20 paces (i.e. about 4 feet).</p> <p>3 Walk 12 steps (6 steps, turn and another 6 steps).</p> <p>(Score 1 if shoes built up 1" or more at the sole, if gait is uneven or body too erect excessive, or if an artificial limb, crutches or other walking aid is used)</p>	
<p><b>J STEPPING UP AND DOWN</b> <span style="float: right;">No step available 9.</span></p> <p>4 Mount a step 6" high from floor level, turn</p> <p>5 Descend from a step 6" above floor level</p> <p>(The procedure can be reversed if available step is below floor level).</p> <p>(Score 1 if stair-rail, crutch, stick, artificial limb or any other support is used to complete test. Also if excessive movement of trunk used to complete test).</p> <p><u>If no step available (9)</u></p> <p>(a) Could you go up one stair, or step up a kerb</p> <p>on your own without any difficulty or using a rail or other aids ... 0</p> <p>RUNNING PROMPT or could you do it on your own only with difficulty or using an aid ... 1</p> <p>or couldn't you climb a stair on your own at all? ... 2</p>	<p>9</p> <p>0, 1, 2, 3, Y</p> <p>0, 1, 2, 3, 7</p>
<p><b>K SEATING AND SITTING</b></p> <p>6 From a standing position reach down to touch floor (anywhere) with finger-tips, using either hand and bending both knees. (If test can only be done with straight knee score 1).</p> <p>7 Sit down from standing position in armless chair (If an artificial leg is worn, or any other aid to sitting down is used, including the arm of a chair if only an armchair is available, score 1). Recommended height of chair between 16" - 18"</p> <p>8. From a sitting position reach down to touch floor (anywhere) with fingertips using either hand (Score 1 if support of object is needed, e.g. stick or chair arm). (NB A pick-up gadget is not permitted).</p>	<p>0/2</p> <p>14-43</p> <p>1X-44</p> <p>19-45</p> <p>36/37</p> <p>48/42</p> <p>30/31</p> <p>32/23</p>
<p>TOTAL SCORE FOR LOWER EXTREMITY FUNCTION</p>	<p>0, 1-16 (HT) 0, 1-16 (HT)</p>
<p>COMBINED SCORE FOR UPPER AND LOWER EXTREMITY FUNCTION</p>	<p>0, 1-68 (HT) 0, 1-68 (HT)</p>

Qn.L Could you go up a flight of stairs

<p>on your own, without any difficulty or using a rail or other aids ... 0</p> <p>or could you do it on your own only with difficulty or using an aid ... 1</p> <p>or couldn't you climb a flight of stairs on your own at all? ... 2</p>	<p>0</p> <p>1</p> <p>2</p>
<p>RUNNING PROMPT</p> <p>19-48</p> <p>1X-49</p> <p>19-50</p> <p>19-53</p> <p>1X-54</p> <p>19-55</p>	<p>34/35</p> <p>26/37</p> <p>51/52</p> <p>33</p> <p>560</p>

CARD ZERO

If BLIND only <sup>omit</sup> score on test .. ..  
 or D.N.A. apply

SC 61  
 39  
 101

Qn M Some people feel better as the day goes on - others feel worse  
 Would you have found it easier or harder to do the things you've  
 just done if I'd come at a different time, or doesn't it make  
 any difference? Say I'd come

9 SC

a) in the morning? D.N.A. (tested in morning) . . . . .  
 Easier in the morning . . . . .  
 Harder . . . . .  
 About the same . . . . .

Y  
 X  
 0  
 1 SC

b) in the afternoon? [roughly 1-5 pm] D.N.A. (tested in afternoon) . . . . .  
 Easier in afternoon . . . . .  
 Harder . . . . .  
 About the same . . . . .

2  
 3  
 4  
 5 SC

c) in the evening? [after 5 pm] D.N.A. (tested in evening) . . . . .  
 Easier in the evening . . . . .  
 Harder . . . . .  
 About the same . . . . .

6  
 7  
 8  
 9 SC

\* if most things done with ease - omit "easier"  
 if most things impossible omit "harder".

Qn N Some people have disabilities where they have good days or bad  
 days, or good and bad spells.

Does your (disability) work like this, or is it much the same all  
 the time?

Much the same all the time . . . . .  
 code both if apply [ Has good/bad days . . . . .  
 Has good/bad spells . . . . .

0 SC  
 1 SC  
 2 Ask (a)  
 3 SC

if has good/bad days or spells (1, 2)

(a) Is today one of your good days or a bad day? - Good day ...  
 Bad day ..

1  
 2 SC  
 3  
 4

40  
 62



Do you do any household chores you might do -  
 most of the household chores, or some, or none,  
 or do you not cook?  
 [If "none" treat as if no person]  
 Self does most of it  
 Other person, (spouse, ...)

70

... son (2)

(a) ... is because of your (disability), or would (other person) be doing it anyway?

Because of disability ... would do it anyway .....

If no one - I'd like to ask about cooking, shopping, housework and laundry arrangements. Can we start with cooking -

92. Do you do any of the cooking?

Yes .....  
No .....

(a) Is this because of your (disability) or would someone else be doing it anyway?

Disability .....  
Someone else would do .....

(b) Do you do

RUNNING PROMPT

all or most of the cooking ...  
about half .....  
or only a little cooking? .....

Introduction - There are some things connected with cooking that one or more people have said they find difficult. I've got a list here

93. Does your (... disability ...) make it hard for you to

INDIVIDUAL PROMPT

- Open tins/cans ..
- Open screw top bottles ..
- Turn on water taps/cooker ..
- Cut things up ..
- Beat eggs, stir or mix things ..
- Lift pans from top of stove or oven ..
- Bend down to oven ..
- Stand to prepare food or at cooker ..
- Reach up to shelves ..
- Peel, scrape, or prepare vegetables ..
- Anything else you find difficult when cooking (specify) ..
- Nothing difficult ..

SC Q. 94 & 95  
 1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
 SC Q. 96  
 0-9 cal 14  
 10-11 cal 15

Codes 1-11 at Q. 93

Codes 12-19 at Q. 92(b)

If any difficulty, and does most or half cooking - go on to Q. 95  
If any difficulty, and does only a little cooking - ask Q. 94

(code 5 at Q. 92(b))

D

All returned 1 SC 78  
Yes 23  
No 4

Do you do any of the household shopping?

(a) Is this because of your (disability) or would someone else be doing it anyway?

Disability . . . . . 24  
Someone else could do . . . . .

SC 79  
1  
2  
3  
4  
5

(b) Do you do ALL or most of the shopping?

All or most of the shopping . . . . . 25  
About half the shopping . . . . .  
or Only a little shopping? . . . . .

SC 80  
1  
2  
3  
4  
5

99 Do you have any difficulty

INDIVIDUAL PROMPT

a) Carrying the shopping? No . . . 26  
You . . . . .  
b) Walking or getting to and from shops? No . . . 27  
Yes . . . . .  
c) Any difficulties other than carrying and getting to shops? No . . . 28  
If Yes (specify)

SC  
1  
2  
3  
4  
5

100 There are some things which help people with shopping . . . .

INDIVIDUAL PROMPT

a) Do you use a basket on wheels? Yes . . . 29  
No . . . . .  
b) Do you have a refrigerator? Yes . . . 30  
No . . . . .  
c) Do you have any tradesmen (apart from the milkman) delivering, or travelling shops? Yes . . . 31  
No . . . . .

SC  
1  
2  
3  
4  
5

(c) Do you get most of your household shopping delivered?

(a) Do you get Most of your household shopping delivered? . . . . . 32  
About half of it . . . . .  
or Only a few items delivered? . . . . .

SC  
1  
2  
3  
4  
5

D

Do you...

- 1) All the washing yourself (here or at laundrette)?
- 2) Some of the washing yourself (here or at laundrette)?
- 3) Do you send at all to the laundry?
- 4) Do you send some of it to the laundry?
- 5) Does someone else do any of your washing for you (including laundrette)?

33

ask (c) 81-  
ask (c) 83  
ask (c) (u)

Do you have difficulty when you are doing the washing because of your (disability)?

(a) Do you have difficulty when you are doing the washing because of your (disability)?

[Include difficulty carrying to laundrette]

Yes, some difficulty  
No

34/2  
7  
8 sc - 8

If does all, or to Qr 102  
If some only - ask (a) or (c)

Do you send to the laundry (3 4)

(a) Do you send to the laundry because of your (disability), or would you send it to the laundry (they do it) anyway?

Sends any/more because of disability  
Would send anyway

35/2  
7  
8 sc  
ask (a) 85

How much extra do you have to pay for laundry because of your (disability)?

(2) How much extra do you have to pay for laundry because of your (disability)?

Check this is extra (per year)

36/37  
38/39  
x,4.0  
1 or 2 D's

If all sent to laundry - ask to Qr. 103

Does anyone else do any (a) (5)

(c) Who does it?

Code 5 or Qr 101

40

1-6, 8, 9  
7  
8 sc

(c) Is this because of your (disability), or would (person) do it anyway?

Because of disability  
Would do it anyway

41  
2  
2 sc 193

If does all/some washing - who at Qr 101

If all sent done by or person - ask to Qr 103

Code 5 or Qr 101

102 Do you have any of the following things to help with the washing?

- (1) An electric iron
- (11) A washing machine
- (111) Spin/tumbler drier or electric drying cabinet
- (11) See a laundrette?
- None of the above

42

sc  
4  
5  
6  
7  
8 sc  
94-77

D

103 Do you do \_\_\_\_\_ of the housework?

Yes **43**  
No

ASK (a)  
ASK (a)

PROPT

(a) Do you do

PROPT

all or most of the housework  
about half the housework  
or only a little housework? ... **44**

ASK (a)  
ASK (a)

PROPT

(a) Is this because of your (disability) or would someone else do it anyway?

Disability  
Someone else would do it

**45**

ASK (a)  
ASK (a)

PROPT

(a) Who does it?

**46**

ASK (a)  
ASK (a)

(ii) Are the arrangements satisfactory, or would you like more help?

Satisfactory  
Like more help

**47**

ASK (a)  
ASK (a)

104 Do you have any special difficulties with housework due to your (disability)?

Yes **48**  
No

ASK (a)  
ASK (a)

PROPT

(a) Would you like (more) help with the housework, or do you manage all right?

Like (more) help  
Manage all right

**49**

ASK (a)  
ASK (a)

105 Do you use any of the following to help you with housework?

INDIVIDUAL  
PROPT  
CODE ALL  
THAT  
APPLY

- a) Vacuum cleaner or carpet sweeper
- b) Vacuum cleaner attachments for dusting
- c) Squeezy/mop with long handle
- d) Electric polisher
- e) Any other equipment to help with housework (Specify)

**50**

ASK (a)  
ASK (a)

None of the above

106 Have any alterations or additions been made to furniture, household fittings or household equipment to make it easier for you to do your housework?

Yes **51**  
No

ASK (a)  
ASK (a)

PROPT

(a) What has been done?

IF RESPONDENT WAS DEPENDENT CHILDREN UNDER 12 YRS ASK QN 107, OTHERWISE GO ON TO NEXT SECTION

D

10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-100

10- Do you have any special difficulty in taking care of the children yourself?

Yes ... 52  
No ...  
1 or (a)-(e), 113  
2 or (a)-(e)  
3 or (a)-(e)  
4 or (a)-(e)  
5 or (a)-(e)  
6 or (a)-(e)  
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96 or (a)-(e)  
97 or (a)-(e)  
98 or (a)-(e)  
99 or (a)-(e)  
100 or (a)-(e)

Yes (1)

or do you manage about [as. (a)-(e)]

(a) Feeding and getting their meals - Can you do it yourself

With out difficulty  
Only with difficulty ... 53  
or Does someone else have to do it? ...  
(specify who)

0-4 SC  
1-7  
2-9  
3-11  
4-13  
5-15  
6-17  
7-19  
8-21  
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97-199  
98-201  
99-203  
100-205

(c) What about washing and sanitizing them, or seeing that they keep themselves clean? Do you have any trouble with this because of your (disability) or can you manage alright?

Have trouble ... 54  
Manage .....

If has trouble (3)

(1) how do you cope with this? [Specify who if done by someone else]

55  
5-9  
4-11  
3-13  
2-15  
1-17  
0-19  
10-21  
11-23  
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99-199  
100-201

(c) Getting them dressed (and off to school) - can you manage this alright, or does your (disability) make it difficult?

Manage alright ... 56  
Disability causes trouble ...

If trouble (6)

(1) Can you tell me how you cope?

57  
5-9  
4-11  
3-13  
2-15  
1-17  
0-19  
10-21  
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98-197  
99-199  
100-201

(c) Do you feel you can't play with them enough, or share their leisure, because you have (disability), or doesn't it make any difference?

Can't play/share leisure ... 58  
Makes no difference ...

(e) Are there any other ways in which you feel your (disability) prevents your doing all you want to to care for them, and make them happy?

Yes ... 59  
No .....

If yes (1)

(1) Can you tell me what you think they lack because of your (disability)?

END OF CARD D

CARD C

Xstart (1)

1 understand that a few months ago you [refer to postal] .....

If obvious that difficulty likely to apply or if estab. at introduction, code Qn. 1 without asking

1. Are/do you still (unable to) (need help with) .....? Yes..... No.....

8 140  
sc  
1. (Y) on to Q.6  
2. (X)

No longer having any difficulty (x)

2. Could you tell me when you got better? No. of weeks ago.....

1 or 2D 9/10

3. And for how long before that you (had difficulty)? No. of weeks.....

0, x + 1-3D 11/12/13

4. When you had difficulty (name from postal questionnaire) what was the trouble (cause)?

3 sets of 3 digits

14/15/16  
17/18/19  
20/21/22  
011-162  
sc  
X X X sc

5. Have you ever had (named difficulties, not cause) before this last time? Yes..... No.....

sc 141  
1. (1) - ask (a)  
2. (2)

(a) Has your doctor told you if this (these) trouble(s) is (are) likely to recur (as a result of your accident etc.)?

Yes, likely to recur.....  
Not likely to recur.....  
Doctor didn't say.....  
Not seen doctor.....

sc. 142  
4. see note  
5. close interview  
6. - ask (1)  
7.

If doctor didn't say/not seen (6, 7)

(1) Do you think it has cleared up for good now?

Yes, hope so.....  
No.....

sc 143  
8. close interview  
9. see note

If likely to recur- explain we want to see how such difficulties inconvenience people - so we'd like to ask some questions about when she/he did have difficulty

# CARD C

Omit question 6 for blind, amputees, check qn. where medical term given on postal - e.g. "Did your doctor say you have ... epilepsy?"

6 What does your doctor say is the matter with you?

Note

y, x, 9 s.c.  
and  
0, 1, 01, -162 n.c.  
xxx s.c.

Doctor doesn't say ..... 1  
Hasn't seen doctor .. ..... 2  
D.N.A. Amputation ..... 3  
D.N.A. Blind ..... 4  
Doctor says (specify)..... 5

24  
144  
sc  
ask (a)  
n.c.  
sc

If not seen doctor/doctor doesn't say (Y, X)

(a) What do you think is the matter with you?

146	152	153
141	154	157
142	154	15
149	155	161
150	157	163
151	157	163

011-162 n.c.  
xxx s.c.  
25-27  
28-30  
31-33  
34-36  
37-39  
40-42

IF MORE THAN ONE COMPLAINT GIVEN in 6 or 6a

ie. if more than one of codes 0, 1, 01, -162

7. Which of these complaints (name them) caused the most difficulty?

~~970~~ - 6 if s/c  
970 7. f 6 re s/c.  
(this is not created during code)

163	176
164	171
166	172
172	178
172	179
174	180
175	181

0, 1  
01-162 n.c.  
43-45  
46-48  
49-51  
52-54  
55-57  
58-60

If we have code for 970 + this means a child blind amputee

8. How long ago did this (main complaint) start causing you difficulties?

For amputees/blind - ask "How long ago did you lose your ... (leg/eyesight)?"

ONE Within last year .....  
CODE No. of years ago .....  
ONLY From birth .....

61/62  
x  
0 s.c.  
1-99  
203  
152, 13

If difficulty remembering, try to get estimate and record here

Check.- if code x or 99 at Qn 8, 8(a) D.N.A.

(a) That would mean you were (age) years old when your difficulty started

Yrs. old.....

184, 135, 136  
63, 64, 65  
0 or 1-3 digits

If (disability) started causing difficulty less than a year ago .. code ..  
ie. code 0 at Qn 8

9. During the last year has there been any change in your condition? Would you say your (disability) is

RUNNING PROMPT

Better now than it was a year ago .....  
Worse now .....  
or About the same as it was a year ago? .....

sc.  
go on to Qn. 10  
or sc.  
ask (a)  
66  
187

If Better/Worse (1, 2)

(a) In what way has it got better/worse?

CARD C

Are you taking any drugs, tablets, medicine or using ointments at present for (complaints which cause difficulty - Q7 6)?

Yes ..... 1 ask (a)  
No ..... 2

138  
67

If Yes (1)

(a) Are they prescribed by a doctor, or do you buy them yourself from the chemist?

CODE BOTH Bought from chemist ..... 3 ask (i)  
IF APPLY Prescribed ..... 4 ask (ii)

137  
190

If bought from chemist (3)

(1) How much do you spend a week on things which are not prescribed?

[Check - that's just for the things you use]

191, 112, 193, 110  
0 or 1-2 d. s. 0, 1-11 d.

If prescribed (4)

(ii) For the things that are prescribed, are you exempt from payment (can you claim it back), or do you have to pay for your (drugs/medicine/tablets, etc.) yourself?

Exempt/claims back .....

Have to pay .....

72  
195

in prices if used at all (days)

I'd like to know how much it costs you a week ..... so if you could tell me (for each item) how long your prescription lasts, I can work it out

No. if more than one	Prescription lasts	Cost of prescription		Approx cost per week
		2s. 6d.	Other	
		1		
		1		
		1		
		1		

136, 197, 118, 111  
73/74, 75/76  
0 or 1-2 d. s. / 0, 1-11  
or 2, 4 s.c.

TO ALL

11 Apart from drugs and medicines, [etc.], are you having any (other) treatment.

PROMPT From your own doctor? ..... 1  
At a hospital? ..... 2  
Anywhere else? ..... 3

200, 1, 2  
77  
\*

End (1)



# CARD G

INTRODUCE - I'd like to go on now to ask you something about the work you have done - but since education and training is tied up with this, can you tell me .....

51 How old were you when you left school (educational establishment) (completed full-time education)?

Never went to school ..... . YY - ask (a)  
 Left school aged ..... . XY XX or 1-2 digits  
 Still at school/University ..... . 99 - on to  
 oc } no  
 SECTION

YY=1  
 OO=2  
 99=3

YY = Ask  
 YY = OK

39, 1.0  
 8, 7 sc

If never went to school (YY)

(a) Why was that? [If private tutor back-code Qn. 51 as age completed full-time education]

52. Did you get any recognised certificates, qualifications or articles?

Yes ..... 1. X - ask (a)  
 No ..... 2. 0

If Yes (X)

(a) What was the highest level at which you qualified?

2-DIGITS

CODE HIGHEST ONLY	University Degree/medical/vet./dental qualns. .... 1 Full membership of prof inst. (incl. law, architecture, engineer) . . . . . 2 Diploma Technology/Humanities ..... 3 Teacher's Training/Cert. of Education ..... 4 S.R.N., S.C.M., Social Workers . . . . . 5 HND/HNC - (Higher National Dip or Cert) ..... 6 "A" level - university entrance . . . . . 7 OND/ONC (Ordinary National Dip. or Cert) . . . . . 8 "O" level - General Schools, Matric. . . . . 9 City and Guilds .. . . . 10 R.S.A. or Commercial Certs. .... 11 Others (describe) ... . . . . 12 13	10 341 11, 12 342 344 sc 342 13
-------------------------	---	---

53. Did you complete a formal apprenticeship, lasting at least 3 years, in any trade?

Yes, formal apprenticeship ..... 1. 1 sc 344  
 No, no formal, ..... 2. 2

54. Have you had any (other) training/experience on the job, or in the Forces, or in a Training Centre for a skilled or semi-skilled trade?

Yes ..... 1. 4 sc  
 No ..... 2. 5 345

55. Code from questions 52-54

Has qualifications/training ..... Y  
 No qualifications/training ..... X  
 and transfer to Qn. 80 page 32

**CARD G**

65 Are you at present doing any work for which you are paid  
(any number of hours)?

Working .. ... 1 } go on to Qn. 77  
Not working. .... 2 } ask (a). **14**

If not working (2)

(a) Why is this?

PROMPT S  
NECESSARY

Retired (incl. permanently disabled over retirement age) .... 1 } 3-ask Qn 57  
Housewife ..... 2 } 4-or to Qn. 63 **347**  
Off sick temporarily/temp. disabled ..... 3 } 5-or to Qn. 67  
Unemployed (can work if job available) ..... 4 } 6-or to Qn 72  
Permanently disabled/unable to work again ... 5 } 7-ask Qn 57  
**9 STOP HERE**

IF RETIRED/PERMANENTLY DISABLED

57. How old were you when you gave up work altogether?

Never worked ..... 0 } ask Qn. 60 **341**  
or  
Yrs 22, 24, 25, 26, 27 **15, 16**

Check back to Qn. 8a If disabled after retirement go on to Qn 91 next section - otherwise ask Qn. 58. **35A/2**

58 What job were you doing then (when you gave up altogether)?

[Probe as usual on OCCUPATION]

**1, 3, 5, 11**  
**16, 17, 20**  
**17, 18**

59 Was this the sort of work you had been doing most of your life?

Yes, same sort of work ..... 1 } **19**  
Did many different jobs ..... 2 } **352**  
No ..... 3 } ask (z)

If No (3)

(a) Did your (disability) have anything to do with your changing your usual sort of work?

Yes, due to disability ..... 1 } **Y**  
No, other reason ..... 2 } **X** **353**

CARD 9

60 Did your (disability) have anything to do with your giving up work altogether when you did (never having worked)?

Yes ... 1 - ask (a)  
No ... 2 (o) 355

If Yes (1)

(a) Can you tell me why? Was it because there were (would be) difficulties

- PROMPT
- i) Actually getting to your work place? .....
  - ii) Doing the work itself? .....
  - iii) Having to work the number of hours they wanted you to? .....
  - iv) Any other reason for giving up altogether (not working)? ... (specify)

13  
14  
35  
46  
7-9  
567  
sc.  
356

Out for those never worked ..... Enter

(b) At what age would you have retired if you had your choice?

- After retirement age . . . age
- Until retirement age . . .
- Indefinitely, as long as possible
- Other answers (specify)

1  
2  
3 sc  
4  
5 71

61. Have you ever been registered as disabled with the Ministry of Labour for employment purposes?

556?

Yes, registered ..... 1 - ask (a)  
No, not registered ..... 2

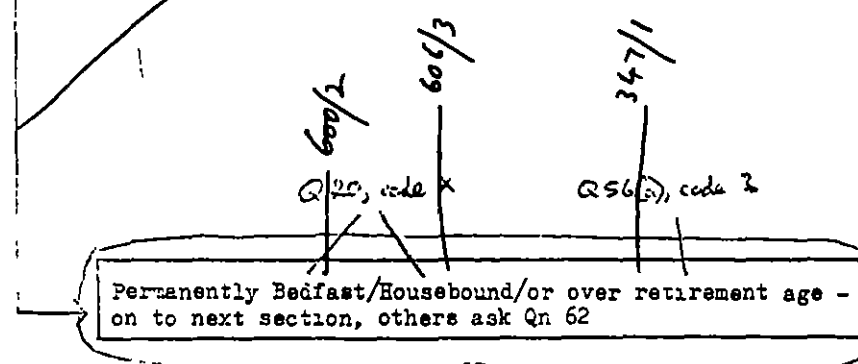
If Yes registered (1)

(a) Has this helped in any way?

Yes, helped . . . 3 - ask (i)  
No ..... 4

How helped (3)

(i) How has it helped?



62  
sc  
ask (a)  
ask (i)  
362

CARD 9

DISABLED UNDER 40% INCAPACITY AGE

... subject to your doctor's agreement, to work in a sheltered workshop if it were available?

Yes ... 1 2 ask (a) - 11  
No ... 2 3 ask (b)

(1)

(2) If you are really keen I might be able to arrange for someone from the Ministry of Labour to call and see you about it. Would you like me to try, or would you prefer to think about it a bit more?

Like someone to call ... 1 1 go or to  
Think about it ... 2 2 section

(c)

(c) try is that?

1.01 x 3

39 sc  
4-8 mc  
2-366 - 368

GO ON TO NEXT SECTION

HOUSEWIFE

63 How old were you when you gave up work to become a housewife? [last occasion]

Never worked Either ... 0 - ask (a)  
Yrs Yes 24.25 sc

Check acc. to Qn 8a - if disabled after giving up work ask Qn.64  
- if disabled before/same time as giving up work ask Qn.65

... ever work. (0) - ask, or code if obvious

(a) Was this because of your present (disability) or were there other reasons?

Disability ..... 1 Y - over 60 and section, under 60 under ask Qn.64  
Other reasons ... 2 X

64. You say you last worked (quote from Qn.63) (never worked). Has your (disability) stopped you from going back to work (starting work) since then?

Yes ..... 1 1 - (a) - next page  
No ..... 2 on to next section

CR 11

20 (Contd )

What stopped you from doing work (1)

What stopped you? Would your (disability) have made it difficult for you to

- PROMPT -
- i) get to your workplace? ..
  - ii) do the actual work you were used to? ..
  - iii) work the number of hours an employer would want? ..
  - add iv) or for some other reason, connected with your (disability)? ..
- (specify)

3 - 60 over  
 4 - 60 by  
 5 - 60 by  
 6 - 60 by

If disabled before giving up work

65. Did your present (disability) cause you to give up work when you did?

Yes ..... 1 ask (a)  
 No ..... 2

If Yes (2)

(a) What job were you doing then [occupation]?

IF NOW 60 OR OVER - END SECTION

If red/ret/no rebound/too disabled to work ... code 'No' to Qn 66

Otherwise ask

66. Would you be interested in getting a job again now?

Yes, interested ..... 1 - ask (a) 377  
 No, not immediately ..... 2 - on to next section

If interested in getting a job (1)

(a) Have you tried to get a job?

Yes tried ..... 3 - ask (1) - 80  
 No, not tried ..... 4 - ask (2)

If Yes, tried (3)

(i) Why do you think you haven't been successful?

SC  
 SC  
 SC

ON TO NEXT SECTION

If Not tried (4)

(ii) Why haven't you tried?

ON TO NEXT SECTION

67 - 110  
 SC 383  
 30

CARZIO

IF OFF TEMPORARILY

Are you off sick now because of your (name disability), or for some other reason?

Disability .....  
Other reason .....

1) sc 3154  
2) on to Qn 70

68. How long have you been off sick [this time]?

Less than 1 week .....  
\_\_\_\_\_ yrs. \_\_\_\_\_ mths. \_\_\_\_\_ wks

0 yr 1-9 sc 32  
335

[Weeks only required if less than 3 months  
months only " " " " 3 years]

69. When do you expect to be able to start work again?

4, 1-5 sc 33  
356

70. Are you paid anything by your employer while off sick?

Yes, paid by employer .....  
No, unpaid .....

1) sc on to Qn 77 31  
2)

71. When you start working again, will you be going back to the same firm?

Yes, same firm .....  
No, different firm ..  
Don't know/expect to .....

3) sc ask(a) 358  
4) on to Qn. 76 34  
5) on to Qn. 77  
6)

If yes same firm (3)

(a) Will you be going back to the same kind of work?

Yes .....  
No .....

7) sc on to Qn 77  
8) sc ask (a)  
9) on to Qn 77  
359

If not going back to same kind of work (8)

(-) Why will you be changing the sort of work?

ON TO QN 77

CHILL

TO EMPLOYED

72 How long have you been unemployed? Less than 1 week .....  
..... yrs. .... mths. .... wks.  
[months only required if less than 3 yrs.]

042-30  
1-8 370

73 Did you leave your last job because of your (disability) or  
is there some other reason?  
Yes, because of disability.  
No .....

ask(a) 30  
2 391

If yes because of disability (1)

(a) Did you yourself decide to leave, or did  
some one else suggest it? (specify who suggested)

Decided myself .....  
Suggested by employer or agent ...  
" " doctor .....  
" " other (specify) .....

2  
4  
5  
6 124  
37

74 How long had you been in your last job? Less than 1 month .....  
..... yrs. .... mths.  
[months only required if less than 3 years]

X

042 SC  
1-0 395

75. Are you registered as unemployed with the Ministry  
of Labour (Employment and Productivity)?  
Yes, special register for disabled persons ....  
Yes, ordinary register .....  
No .....

ask(a) SC  
1 37  
2  
3 396

If not registered (3)  
(a) Why not?

TO UNEMPLOYED - OF THOSE SICK NOT RETURNING TO PREVIOUS JOB

76. Do you think you will (would) have difficulty getting  
another job because of your (disability)? [Probe for  
comments and reasons, reminding informants we are  
interested only in difficulties arising because of  
disability].

74 SC  
1  
2-4 70  
40  
397-7

CR-1

DO NOT WORK OFF SICK OR UNEMPLOYED

[If unemployed, ask of last job]

77. How many hours a week do (and) you work? [paid for]

hrs.

399  
400, 401  
402

78. Who do you work for? - Are you -

- Self-employed . . . . . 05 SC
- in Ordinary employment- Civil Servant . . . . . 14
- Local Authority . . . . . 25
- Nationalised Industry/Hospitals . . . . . 36
- Private Co or employer . . . . . 47
- in Sheltered employment- Remploy . . . . . 58
- Local Authority . . . . . 69
- Blind Association . . . . . 70
- Voluntary Associations . . . . . 81
- Others (specify) . . . . . 94

PROMPT AS NECESSARY

402  
403

79. What is your actual job? [Probe as usual on OCCUPATION]

403, 404  
21575

13,5-11 SC  
404

X

80. CHECK BACK TO QN 55 - If Code (Y) - some qualification ask Qn.81  
If Code (X) - no qualification ask Qn.83

INTRODUCE - You mention you have (quote qualifications)

81. Are you using any of your qualifications/training in your present job (last job if not now working)?

- Yes, using (some) qualns /training . . . . . 1 - ask (a)
- No, not using any qualns./training . . . . . 2

If used

(a) Have you ever had a full-time job where you have NOT used any of your qualifications (training)?

- Yes . . . . . 3
- No . . . . . 4 - on to Qn 85

82. What made you take a job where you weren't using your qualifications (training)?

2,5 SC  
1,3,4, 4,9 MC  
4

407, 60?



*Chennai*

83. Have you ever had difficulty getting a job because of your (disability)?

Yes ..... 4  
 No ..... 2  
 Never tried/not because of disability ..... 401

84. Talking about work in general, not any particular job. Does your (disability) limit or affect

a) The number of hours you can work? Yes ..... 4  
 No ..... 1  
 b) The distance you can travel to work? Yes ..... 2  
 No ..... 11  
 c) The <sup>chance</sup> choice of joining a pension scheme? Yes .. 1  
 No ..... 5  
 D.K. .... 6  
 d) The choice of jobs if you wanted a change? Yes ..... 7  
 No ..... 6  
 D.K. .... 9

85. Are there any (other) disadvantages with regard to working arising from your (disability)?

No ..... 4  
 Yes (specify) ..... 5  
 433

*code 5*  
 UNEMPLOYED GO ON TO NEXT SECTION

To 11 Employed or Temporarily sick

86. How long does it take you to get to work from where you live?

Works at home/no journey ..... 10  
 Varies/work not in same place ..... 1  
 Takes less than 5 minutes ..... 4  
 Takes this number of minutes ..... 5

87. How do you usually get to work? (usual means of transport)

SINGLE CODE [ Walk only (no other transport) ..... 1  
 Wheelchair only (no other transport) ..... 2  
 Bicycle/pedal car ..... 3  
 Motor cycle/scooter, etc. .... 4  
 Private car/van etc. as driver ..... 5  
 Private car/van etc. as passenger ..... 6  
 Public transport ..... 7  
 Firm's transport ..... 8  
 Invalid tricycle ..... 9  
 Other (specify) ..... 0

Qn 87

Do you have any particular difficulties getting to work because of your (disability)?

Yes .....  
No .....

ask (a) 59  
4

.....

(c) Is (are) the difficulty(s)?

89 You get to work by (method Qn.87) - is there some other means of transport you would rather use, but can't because of your (disability)?

Yes .....  
No .....

ask (a)(b)  
426

If 'c' (Y)

(a) What form of transport would you like to use?

Car .....  
Bus .....  
Tr .....  
Other (specify) .....

427,8

(b) Why can't you use it?

78,9 SE  
L111

90. How much a week does it cost you to travel to work? £. (100)

Nil .....

1-3 £/week per week

0 SE 63  
430  
431  
430

Check this is actual cost to informant - i.e. any refunds or subsidies from employers are deducted

CH...

CARI, 2

i.e. either Gray schedule or Q 26 applies

IF PERSONALLY BEDFAST/CHAIRBOUND or NEEDS A LOT OF HELP go on to special questionnaire

Others IF SCORE ON TEST IS "0" - go on to Qn. 2) page 17, but code here ...  
 " " " " for Upper Extremities only is "0" - introduce and ask items 1-4 inclusive...  
 " " " " for Lower Extremities only is "0" - " " " " 3-9  
 Scores at least "1" on both extremities - introduce and ask all items, or blank

1  
0  
Y  
X  
SC  
33

INTRODUCE -

I noticed you had some difficulty [with one or two items] - which might make it difficult for you to do some things for yourself. May I just check?

2 3 4 6

CODE	No. difficulty	Difficulty	IF DIFFICULTY (1) ask (a), (b) and (c)							
			(a) Can you do it on your own even with difficulty		(b) Do you usually have someone (coming in) to help you with it?			(c) Do you use any special aids or gadgets to help		
			Yes	No	No	Someone in h/d (specify)	Someone outside h/d (specify)	Yes	No	
(1) Getting in and out of bed on your own	0	1	9	2	462	5	SC (1-6, 9)	SC (1-6, 9)	8	9
(2) Getting to or using the toilet	0	1	10	2	463	5			8	9
(3) Having a bath	0	1	11	2	464	5			8	9
a) Having an all over wash	0	1	12	2	465	5			8	9
b) Washing hands and face	0	1	13	2	466	5			8	9
(4) Putting on shoes and socks or stockings yourself	0	1	14	2	467	5			8	9
(5) Doing up buttons and zips yourself	0	1	15	2	468	5			8	9
(6) Dressing, other than buttons shoes	0	1	16	2	469	5			8	9
(7) Feeding yourself	0	2	17	2	470	5			8	9
(8) Combing and brushing your hair	0	1	18	2	471	5			8	9
(9) <sup>DNA Women</sup> <del>ME ONLY</del> washing yourself	0	1	19	2	472	5			8	9

For any special aid used in (c)

Record Code	(i) Describe aid	(ii) Who supplied/did it? was responsible for having it done/lending, giving it	(iii) Was it free? If not specify cost. If per session don't forget FREE to state session
1-9		SC (1-9)	0 or SC (1-5 7-9)
			0
			0
			0
			0

CA, 11

May we talk about the Welfare Services?

21 Have you ever heard of the Local Authority Register of Handicapped Persons?

If asked is this run by Min. of Labour, say, "No"

Yes.....  
No.....  
Don't know/not sure.....

s.c. 475  
on to Q. 29  
ask (a) 2  
on to Q. 28

If Yes (1)

(a) Do you know what sort of people this register is for?

No.....  
Yes (specify).....

476  
s.c. 21

If any indication they think it is ONLY for workers, or people who can't work, say, - "No, that's the Industrial Register" - and go on to Q. 28.

(b) Are you yourself on this register (with this Authority)?

Yes, registered.....  
No, not registered.....

477  
on to Q. 29  
ask (i) - 22  
(iii)  
ask (iv)  
next page

If registered (3)

(i) For how long have you been registered? [Months required only if less than 2 years]

4 = 16  
2 = 17  
0 = 18  
any 10% should not be asked will not ask Q. 28

478, 111  
s.c. 23

(ii) What benefit has it been to you?

None.....

480-2  
1-6, 9 n.c.  
s.c.

(iii) Is this -

PROMPT AS APPLICABLE

More than you expected?.....  
What you expected?.....  
or did you expect them to do more?.....

s.c. 483  
1 - on to Q. 29  
2 -  
3 - ask (A)

If expected more (3)

(A) What did you expect?

ON TO QN. 29

Qn 27 (Contd ..)

If not registered (A)

(iv) Is this because you don't consider yourself to be handicapped or is there some other reason?

Don't consider handicapped ...  
Other reason (specify) .....

45567  
1 sc  
2 27  
3-9, 17c  
4  
5  
6  
7  
8  
9  
10 sc

ON TO QN. 29

TO THOSE NOT KNOWING ABOUT REGISTER, or confusing with M.O.L.

INTRODUCE All local authorities must keep a register of handicapped people, and help them where they can.

28. If you had known about this register, would you have registered with them?

Yes .....  
No .....

If No (2)

(a) Is this because you don't consider yourself to be handicapped or is there some other reason?

Don't consider handicapped ...  
Other reason (specify) .....

488  
1 sc  
2 ask (a)  
3 28  
4  
5  
6  
7  
8  
9  
10  
489, 101  
3 sc  
4  
5-9, 17c  
6  
7  
8 sc  
9  
10

TO ALL

29. Do you have any of these come to visit or help you now? (at present - exclude breaks like home help ill, etc.)

	No	Yes	If Yes	
a) Home help	472	30	sc (0 x 1)	How many hours a week?
b) Meals on Wheels	613	33	" (0 x 2)	How many meals a week?
c) District nurse	694	35	" (0 x 3)	How often does she come?
d) Health visits	495	37	" (0 x 4)	
e) Social worker	496	39	" (0 x 5)	
f) Occupational therapist	497	41	" (0 x 6)	
g) Physiotherapist	498	43	" (0 x 7)	
h) Chiropody	499	45	" (0 x 8)	How often do you have your feet done?

505 5 6  
31/32  
x, y, or 1/2 digits  
34 (2, 1-7) s.c. 501  
36 (2, 1-9) s.c. 508  
38 - 29  
40 = 510  
42 = 511  
44 = 512  
46 = 513

j) Any other health/welfare services? (specify) 47 (0 x 9) 500 - - - - -

Line 1  
Code 0 merged = 'No' to all of items 9, 11, 17-19  
Code x merged = 'NA' to all of items 9, 11, 17-19

49 - (11)	501	-	-	-	48.5 4
51 - (17)	502	-	-	-	50 - 515
53 - (18)	503	-	-	-	52 - 516
55 - (19)	504	-	-	-	54 - 517
- 17 -	-	-	-	-	56 - 518

CARL 3

12 Do you see your doctor regularly - I don't mean just calling for a prescription - but actually seeing him?

Yes ..... 1 - ask (a)  
No ..... 2 - ask (b)

559  
sc.

If seen regularly (1)

(a) How often do you see him?

ONE  
CODE  
ONLY

More than once a week ..... 31  
Once a week ..... 41  
Every 2 or 3 weeks ..... 53  
Once a month/4 weeks ..... 64  
Other periods (specify) ..... 75

558  
560  
s.c.

GO ON TO QN.13

If not seen regularly (2)

(b) How long ago was the last time you saw him (for yourself)?

CODE FIRST  
THAT APPLIES

Within last week ..... 4  
Within last month ..... 6  
Within last 3 months ..... 7  
Between 3 and 6 months ago ..... 8  
Between 6 and 12 months ago ..... 9  
Years ago (specify) 1-3, 5, 10, 11, 14

9  
sc  
562

13. Have you paid to see a private specialist (consultant) about your .... (main complaint) since the National Health started?

Yes ..... 1  
No ..... 2

563  
sc  
10

14. Have you ever consulted anyone who is not a medical doctor about your (main complaint), [such as a faith healer, osteopath, chemist, etc.]?

Yes, consulted ..... 0  
No ..... 1

sc  
564  
ask (a)(b)

If Yes (0)

(a) Who was it?

Faith/spirit healer ..... 2  
Osteopath/Manipulator/bonesetter ..... 3  
Homoeopath/herbalist ..... 4  
Psychologist ..... 5  
Other (specify) ..... 6

sc  
565-7

(b) Was the visit of any help to you?

Yes helped ..... X  
No ..... X

sc  
568

CARLE

INTRODUCE [We've been talking about your (disability) - but there are sometimes other things which complicate conditions].

15. Do you regularly suffer from any other chronic illness or any condition which makes it difficult for you to get about or do your work?

Yes ..... 1 ask (a)  
No ..... 2

570

If Yes (1)

(a) What is the matter?

SIX 3-DIGITS  
571 577 583  
572 578 584  
573 579 585  
574 580 586  
575 581 587  
576 582 588

011-162 n.c.

13-5  
17-15  
17-21  
22-24  
25-27  
28-30

I'd like to ask about your eyes, next ... [code or check if observed]

16. Can (could) you recognise people you know if you were to see them across the street (wearing glasses if applicable)?

Yes, could recognise ..... 7  
No ..... 8  
9

590  
s.c. 31

17. Can you usually see to read ordinary print (show leaflet) like this, and see to write (wearing glasses if applicable)?

Yes, can see to read/write ..... 1  
Cannot read/write (illiterate) ..... 2  
No, can't see unless uses magnifier, etc. .... 3  
No, can't see ..... 4  
5

591  
s.c.

18. - [Code if observed]

Can you hear ordinary conversation (with hearing aid working if applicable)?

Yes ..... 16  
No ..... 27  
Says yes, but difficulty observed ..... 38  
49

592  
s.c. 37

19. - [Use as check question if observed or unlikely]

Do you have any artificial limbs?

No ..... 0  
Yes (describe fully) ..... 1

593  
s.c.

State right/left - for limbs above/below knee or elbow

If coded ① →

2-9 n.c.  
594-6

CH 3

Use as check if observed

20 Can you usually get out of the house if the weather is not too bad?

Yes .....  
No, housebound .....  
1. Y - ask (a)  
2. X - on to Qn.21

[Only to garden/front gate = No]

If gets out (Y)

(a) Can you usually get out

on your own without sticks or aids and without difficulty .....

on your own but only with aids or difficulty .....

or can you only get out if someone is with you? .....

RUNNING PROMPT

If cannot get out on own (2)

(i) Who usually goes with you?

(ii) Can you generally get someone to go with you (take you out) when you want to go?

Yes .....  
No .....

If housebound (X), or not on own (2) [Check/code if obvious]

21. But can you Get about the house (walking or wheelchair)...  
or Do you have to sit in a chair when you're up...  
or Can't you leave your bed? .....

RUNNING PROMPT

If chairfast (2)

(a) Can you get in and out of your chair on your own without aid, or do you have to have someone to help, or a mechanical aid?

Sticks, etc. are counted as mechanical aids.

On own without aid .....  
Someone to help .....  
Mechanical aid .....

If has mechanical aid (8)

(i) Could you describe it to me?

(ii) Who was responsible for having it put in?

(iii) How much did you have to pay towards it?

[If hired state amount and period] Nothing .....

£ \_\_\_\_\_

sc 600

34

sc.

0 - on to Test 601

1 - on to Qn.22 next pg.

2 - ask (i)(ii)  
3 - on to tests

602

1-6,9 sc. 603

7,8 no 604

sc 605

3 sc 605  
4

sc 606

1 on to Qn.22

2 ask (a)  
(b) overleaf

3 ask (b)  
overleaf

sc 6078

6 sc

7 no

8 - ask (i) -  
(iii)

1-5 n.c. 609-11

max 3

12 612

Part (i) & (ii) D.N.A.  
(codes 3 or 4 & (i))

1-9, x sc

613

of 12 "

4, x, 1-9 sc



Qn.21 (cont'd ..)

If chairfast or bedfast (2,3)

(b) Can you get in and out of bed on your own without aid, or do you have to have someone to help, or a mechanical aid?

Sticks, etc. are counted as mechanical aids.

On own without aid .....

Someone to help .....

Mechanical aid .....

6 - on to Qn.22  
 7 - ask qns. 23-25  
 8 - ask  
 9 - (1)-(111)  
 for each column (max = 2)

If has mechanical aid (8)

(1) Could you describe it to me?

(11) Who was responsible for having it put in?

Parts (i) & (ii) D.M.A (codes 3 or 4 at C)

(111) How much did you have to pay towards it?

If hired, state amount and period

Nothing .....

IF PERMANENTLY BEDFAST or CHAIRFAST and cannot get about room in wheelchair GO ON TO TESTS.

For those whose only disability is non-locomotive - e.g. Blind/epileptic ..... (code) .....

22. Do you have any walking aids such as a stick, crutches, wheelchair or anything else?

Exclude stick for blind

No aids .....

One stick (umbrella used as stick, etc.) .....

Two sticks .....

Walking frame/tripod, etc. ....

Wheelchair .....

Elbow crutches ... ring 1 or 2 crutches and code .....

Shoulder crutches ring 1 or 2 crutches and code .....

Calipers/built-up shoes at least 1" on sole .....

Other (describe fully) .....

CODE ALL THAT APPLY

6-8  
 1-5  
 42  
 43

44  
 4-12  
 619  
 1-7, 7 sc  
 11

620  
 4-12  
 1-5 sc

635  
 2  
 X - Go on to Tests

627-631  
 13  
 0 - Go on to Tests

1 - Go on to Qn.25  
 2  
 3  
 4 MC  
 5 ask qns. 23-25  
 6 for each aid  
 7  
 8  
 9-12  
 13

CA 113, 3

If permanently Redfast or housebound - code and go on to Qn. 38.  
If at this stage you know informant is working - code and go on to Qn. 35...  
or @ 34 applies

637  
X2  
Y  
0,1  
SC  
50

34. Is there a Local Authority Centre for the Physically Handicapped you could get to if you wanted to go? - I don't just mean a social club.

Yes..... 1. Y - ask (a) 51  
Never heard of one/Don't know..... 2. X - on to  
Know of one, can't get there..... 3. 0 - Q.35 next  
"Not physically handicapped"..... 4. 1 - page

If Yes (Y)

(a) Do you go to the Centre?

Yes, go to Centre..... 3 - ask (1)(ii)  
No..... 4 - ask (iii)

If Yes (goes to centre) (3)

(1) What do you do there?

1127 x 4

(ii) How do you get there? [If nec check who provides transport]

ONE Transport provided by L.A ..... 1 - SC 647  
CODE Private transport..... 2  
ONLY Public transport..... 3 - ask (A)  
Walk/Wheelchair..... 4

If public transport, walk/wheelchair (3, 4)

(A) Would you find it easier if the Local Authority were to supply transport to get you there and back?

Yes..... 5 - go on  
No..... 6 - to  
Other answers (specify)..... 7 - Qn. 35

If does not go to Centre (4)

(iii) Is this because you are not physically handicapped, or is there some other reason?

Not physically handicapped..... 0 - SC  
Other reason..... 1 - ask (a)

If other reason (1)

(a) Why don't you go there?

647  
SC  
55  
3-5,8 HC  
650-2  
(unemployed)

CALL 3

Do you go to any Clubs nowadays?

Yes ...  Ask (a)  
No .....  Ask (b)

If Yes (1)

(a) What sort of clubs?

- Old people/Silver Thread/D & J/etc... .. 1
- Working mens/social/bingo... .. 2
- Womens Institute, Towns Womens Guild/Co-op. 3
- CODE Church club (not OAP) . . . . . 4
- ALL Freemasons/ Toc H/Brit Legion, etc ... 5
- THAT Sports (Tennis/bowls/billiards/etc.)..... 6
- APPLY Disabled/Handicapped/blind... .. 7
- Youth Clubs. . . . . 8
- Others (specify)..... 9

sc 623  
56  
nc  
654-8

If No (0)

(b) Is this because of your (disability) or are there other reasons?

Because of disability... ..  Y sc  
Other reasons... ..  X nc

36 Is there anywhere you'd like to go, but can't simply because of your(disability)?  
[probe fully]

No, nowhere... ..  0 sc  
on to  
38 5-  
nc  
sc

wa-4 660-3

37. Is this because your (disability) makes it hard for you to get there, or because once you're there, you can't get in?

CODE BOTH IF APPLICABLE  
Hard to get there ... ..  1 nc  
Can't get in.....  2 sc

664, 5

TO ALL

CH...

Dates are wrong here

When and you last have a holiday (spend at least a week away from home for pleasure)?

(Approx.) No. of years ago...  
Within last year . . . . .  
Too long ago to remember . . . . .

616  
0-10 SC  
1-3  
Y/N ask (b)  
9, 7, NA

If 3 years ago or less i.e. codes 0, 1-3, & Q. 38

(a) Did you or your family arrange for your last holiday or was it arranged for you by the local authority or another organisation?

Self or family.....  
Organisation (specify).....

1 SC  
2  
3, 4  
6, 7 667

[Ask if holiday enjoyed - no need to record answer].

GO ON TO QN. 39

If more than 3 years ago i.e. codes 4-6 or 9 & Q. 38

(b) Has anybody offered you a holiday in the last 2 years?

Yes..... 1 ask (i)(ii)  
No..... 2 ask (iii)

668  
SC  
1 ask (i)(ii)  
2 ask (iii)

If offered holiday (1)

(1) Who offered to arrange a holiday for you?  
[Name of organisation]

(ii) Why didn't you go?

now 3

669-671  
SC  
1, 2  
2-5

For table on Res time used

2 Dcards:-  
0 66 12 12 667  
1 0 66 10 10 668 669 672 676 677 682

GO ON TO QN. 39

If not offered holiday (2)

(ii) Would you like to go away anywhere for a holiday or a break?

Yes..... 1 ask A  
No..... 2 ask B

676  
SC  
1 ask A  
2 ask B

If yes (1)

(A) What stops you?

ANYS

677-51  
1-9 n.c.  
4, 7 SC  
10

If No (2)

(B) Why don't you want to go?

1-9 n.c.  
4, 7 SC  
10

39. Do you have any (other) hobbies now?

No. .... 4  
Yes..... 5 - ask (a) 657

If Yes (5)

1. What are your hobbies?

11-79 n.c.  
81, xx s.c.

40. (Apart from hobbies mentioned) how else do you pass your time (when you're not working)?

No spare time..... 2. s. (tw) 0  
Nothing else..... 1. ~~X~~ s.c.

or

11-79 n.c.  
~~81, 83~~ s.c.

41. Have you had to give up anything you liked doing (in your spare time) because of your (disability)?

No..... 3. 0  
Yes (specify)..... 1. Y s.c. 7c

11-19  
20-29  
30-39  
40-49  
50-59  
60-69  
70-79  
80-89  
90-99  
11-79 n.c.  
81, 84, 85 s.c.

71/72/73/74/75/76/77/78/79

Q 6 notes  
Q 20, code X  
D 1144 44 700701  
D 600 22 700701  
E-Kit  
If Blind, Permanently bedfast or housebound -

go on to next section, and code ..... (Y)  
We've been talking about getting about - or Q 42 applies

42 Do you yourself have a motor vehicle of any kind, which you drive?

Have and drive ..... 1  
Have, but doesn't drive ..... 2  
No vehicle ..... 3

If has but doesn't drive, or no vehicle (0,1)

(a) Does anyone else (living here) have a motor vehicle which you (could drive, or) are taken out in regularly?

Yes, can drive ..... 1  
Yes, taken out ..... 2  
No ..... 3

If Yes, can drive or taken out (2,3)

(1) Whose vehicle is it? (relationship to subject)

Husband/wife ..... 5  
Child/Parent/Sibling ..... 6  
Friend/boarder ..... 7

If No (4)

(1) Can you generally get a lift if you want to go anywhere?

Yes, generally ..... Y  
No ..... X

To all who have and drive a motor vehicle - i.e. code X of Qn 42 or code 2 of Qn 42(a)

43. Check or ask what sort of vehicle it is? Is it a

Invalid tricycle ..... 1  
Saloon/sports car ..... 2  
Estate car/van ..... 3  
Motor bike/scooter ..... 4  
Other (specify) ..... 5

PROMPT AS NECESSARY

44. Is it a standard model, or has it been adapted because of your (disability)?

Standard model ..... 4  
Adapted ..... 5

If adapted (5)

(a) Who paid for adapting it?

Self or relative/friend ..... 6  
Employer ..... 7  
Ministry of Health/Scottish Home and Health ..... 8  
Other (specify) ..... 9

45. Do you have a disabled driver's car badge?

Yes ..... 1  
No ..... 2

If no badge (2)

(a) Is this because you haven't applied for one, or because you have applied and been refused?

Haven't applied ..... 3  
Been refused ..... 4  
Other (specify) ..... 5

ON TO NEXT SECTION UNLESS HAS INVALID TRICYCLE - WHEN ASK NEXT PAGE

C. \* = Entries To be made by computer operator

123. Would you like any (other) alterations made to the house, or any fittings to make it easier for you to manage to do things or get about?

*This is the loaded cards*

Yes ..... A - ask (a)  
 No ..... X (o)

If Yes (A)

(a) What would you like done? [NO PROMPT]

- |       |                                    |   |
|-------|------------------------------------|---|
| CODE  | Bannister rails .....              | 1 |
| ALL   | Central heating/change fires ..... | 2 |
| THAT  | Handrails to bath .....            | 3 |
| APPLY | Handrails to toilet .....          | 4 |
|       | Widen/reverse doorways .....       | 5 |
|       | <u>Install/change position of</u>  |   |
|       | lavatory .....                     | 6 |
|       | bathroom .....                     | 7 |
|       | Install ramps/pathways .....       | 8 |
|       | Others (specify) .....             | 9 |

(b) Have you tried to get it (them) done? Yes ..... A - ask (i)  
 No, not tried ..... X - ask (ii)

If tried (A)

(i) Whom did you approach, and what happened?

On to Qn.124

If not tried (X)

(ii) Why haven't you tried to get ..... done?

- |       |  |   |
|-------|--|---|
| CODE  | Impractical (dwelling condemned, etc.) ..... | 1 |
| ALL   | Can't afford it/cost .....                   | 2 |
| THAT  | Authorities no good .....                    | 3 |
| APPLY | Don't know where to go .....                 | 4 |
|       | Don't know what's available .....            | 5 |
|       | Never bothered/don't know why .....          | 6 |
|       | Other answers (specify) .....                | 9 |

GREEN original

124. Ownership of dwelling (subject or spouse is)

[e.g. Informant is mother living with son who is L.A. tenant this would be coded 5, 8 or 9 according to circumstances.]

- Owner/occupier owns outright ..... 1
- Owner/occupier has mortgage ..... 2
- Leaseholder (pays ground rent only) ..... 3
- L.A. or council tenant ..... 4
- L.A. or council house (pays rent to L.A. tenant) .. . . . . 5
- Rented, not council, furnished ..... 6
- Rented, not council, unfurnished ..... 7
- Boarder ..... 8
- Lives rent free ..... 9
- Other (specify) ..... 10

- ask (a)

If owner/occupier (1,2)

CARD N STARTS

(a) May I ask the Rateable Value of this property? R.V. £

125. Because of your (disability) do you have any extra expenses with regard to housing?

Yes, extra expenses ... 8  
No. NOTE ...

M C  
Don't  
Y - ask (a) 710  
X  
1-3, 6

If extra expenses (Y)

(a) What expenses, and how much extra does it cost? (check because of disability)

THIS QTN TO BE PUNCHED AGAIN ON CARD - AS THERE HAVE BEEN A LOT OF ALTERATIONS SINCE IT WAS PUNCHED ON CARD I COL 34

INTRODUCE

Rent and rates free 9

126. Cost of housing [Informant] - omit items which cannot apply.

[Total cost before sub-letting if any]

	Cost			Period	
	£	s	d.	Wk. 1	Other (specify)
1. Rates (net, deducting rebate if any) [If paid separately]				1	
2. Water rates [If paid separately]				1	
3. Ground rent				1	
4. Feu duty (Scotland only)				1	
5. Mortgage repayment				1	
interest				1	
6. Service, maintenance charges				1	
7. Rent (unfurnished) deduct rebate(s) if any				1	
8. Rent (furnished) - no services				1	
9. Rent (furnished) services/board (specify)				1	

Either  
0  
1, 2, 9 sc 714  
or  
1-2 digits 1-2 digits 3.  
10/11 12/13  
75/716 77/718  
Please go to page 51  
QTN 142a



Since you've had (disability) Have you ever applied to the Authorities, or a welfare association for any help, which they did not provide?

Yes.....  
No.....

If Yes (1)

(a) To whom did you apply?

(b) What help did you want?

(c) Do you know why they did not help you?

(d) How long ago was that?

31. Do you think any of the health and welfare services I have just mentioned should do more to help you personally - or do you think they do enough?

Should do more.....  
Do enough.....  
Don't know.....

If should do more (0)

(a) What more ought to be done (and by whom) to help you personally?

Could we talk about how you pass the time (when you are not working)?

32. Do you listen to the radio?

Check if doesn't listen whether has one

Yes, listens.....  
Doesn't listen, but has radio.....  
Doesn't listen, has no radio.....

33. Do you watch television?

D N.A. Blind. ....  
No T V. set.....  
Yes, watch... ..  
T.V., but doesn't view.....

550 (p75/1) to wls/2  
whether reg or not, - 18 -  
-only give a code if reg or not

CN 11. 2

Disability

S.C. 510

ask (a) (b)

for ad column (max. = 4) 521-3 NC SC

524-6 NC SC

521-9 NC SC

Y=15 = under 3 months  
Y=18 = 3-6 months  
Y=00 = 6-12 months  
Y=10 = 12-18 months

530/531 SC

62/63

ask (a)

sc 64

sc 65

sc 67

sc 548

sc 549

# ORANGE SCHED

## Details of Income

1. If subject is married (even if spouse is not included in sample) details of income are required for both husband and wife on the same schedule. Where the wife is likely to have an income of her own, questions should be put separately, direct to her, even though they be recorded on the same schedule.
2. For wages or salaries we require net amount after deductions for tax and national insurance only. Check that other deductions have not been made, e.g. savings, superannuation, club membership. If these deductions have been made, they should be added on to take-home pay.
3. Incomes per week or per month should be recorded in pounds and shillings (ignore pence), and annual incomes in £s only (ignore shillings and pence). Where informant answers for periods other than that required by the answer - be sure to note the period for which amount given applies.
4. If the informant is drawing a Supplementary Pension or Allowance (Nat. Assistance), omit Qn.144.

## CARD 0. STARTS

**INTRODUCE:** [We'd like to find out if people like yourself have extra expenses they might find it hard to meet on their present income. Could you tell me first what your income is?] - [standard definition of income - deducting income tax and national insurance, but including overtime, bonus, pension, etc.]

131. What was your total income last week?

132. Is this the amount you usually have, or was last week unusual?

If Unusual (2)

(a) Why was it different last week?

(b) What do you (and your wife) usually get?

**THESE** - for each dependent child (if any), mentally subtract £2 from the total income.

IF single, widowed, separated with adjusted total less than £13.

IF married couple with adjusted total less than £17

ask full income details

If over these amounts - go on to Qn.145

**INCOME DETAILS - ASK QUESTIONS APPLICABLE - OR USE AS CHECK QUESTIONS**

TO THOSE SELF-EMPLOYED, or whose WIFE IS SELF-EMPLOYED

(In all other cases, the question is struck through)  
133. How much was your total income (and your wife's) in the last 12 months for which you can give a figure, from your business (practice) etc?

After deducting business expenses and income tax.

Note here if income tax not known.

Informant (incl. spouse if has joint income)

Spouse if has separate income

788  
42  
789

1-2  
1-2

17/8 19/0  
790/91 792/93

NA 6  
Q 133-144

Q 135-144 DATA

# ORANGE SCHED "0"

134. Earnings last week from work

Including overtime, tips, bonus, etc.  
Excluding N.I. and Income Tax

Either or None

If any earnings

(a) Is this the amount you usually take home, or is this week unusual?

Usual ..... 1 sc for each column  
Unusual ..... 2 ask (i) (ii) (inc if both used)

If unusual (2)

(i) What was different last week?

(ii) What do you (your wife) usually get?

135. Apart from your regular job, do you (your wife) receive any income from casual work?

Yes ..... 1 ask (a)(b)  
No ..... 0 sc

If Yes (1)

(a) How much do you get (a week)? £ \_\_\_\_\_ s.

(b) For how many weeks a year? \_\_\_\_\_

136. Are you at present receiving any of the following State benefits? (Ask or check as appropriate). If Yes, give amount per week, even if not drawn weekly.

On each line

(1) National Insurance Retirement Pension ..... £ 0

(2) Supplementary pension (Nat. Assistance) ..... £ 41/42/43/44/45

(3) Industrial disablement pension (incl. any additional allowance paid) ..... £ 46/47/48/49/50  
51/52/53/54/55

(4) War disability pension (incl. any additional allowance paid) ..... £ 56/57/58/59/60  
61/62/63/64/65

(5) Nat. Inc. Widow's pension or allowance ..... £ 66/67/68/69/70

(6) War widows or industrial pension ..... 0

(7) Family allowance/guardians allowance/childs special all. ... 0

(8) Maternity benefit ..... 0

(9) Sickness or industrial injury benefit ..... 0

(10) Unemployment benefit ..... 0

(11) Supplementary allowance (National Assistance) ..... 0

If any benefit (8-11) - ask (a)

(a) For how many weeks have you been drawing this benefit?

If 13 weeks or less

(b) What was your wage the last week you worked? £ \_\_\_\_\_ s.

Informant (and spouse if has joint income) Spouse if has separate income

1-2 digits 1-2 digits

4.2 sc. 4.2 sc.

20/22 25/24 25/26 27/28

79/4/5 75/6/7 78/9 70/1 22/23

80/3 80/5 80/7 80/9

39/20 31/32 33/34 35/36

4.2 sc. 4.2 sc.

1-2 digits 1-2 digits

Off. use

1 2 3 4

A

27/38 39/40

4 sc or 1-2 digits 1-2 digits

NO or £

99

2

1-2 digits 1-2 digits

NOTE

THREE ARE 30 CENTS ALLOWED HERE FOR A MAXIMUM OF SIX ITEMS CODED WITH MONEY THE ITEM NO. IS PRINTED ON THE FIRST COL. CROSS £ ON THE SECOND THIRD SALLS ON THE FIFTH SIX. ONLY ITEM CAN APPEAR ON COL. 41.

A. F. Groom

END OF CARD 0.

# CARD Q ORANGE

<p>137 Do you receive any of the following employer's pensions (regular allowances) at present?</p> <p>(a) Central or local Government?</p> <p>(b) Own or husband's/wife's employer (not (a))?</p>	<p style="text-align: center;">Amount per week after deduction of income tax</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">No</th> <th style="text-align: center;">Informant</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">870</td> <td>£ 9/10 s. 11/12 <i>on XX on 40 → Pwch 00 on 40</i></td> <td>£ 13/14 s. 15/16 <i>on XX on 40 → Pwch 00 on 40</i></td> </tr> <tr> <td style="text-align: center;">170</td> <td>18/19 20/21</td> <td>22/23 24/25</td> </tr> </tbody> </table>	No	Informant	Spouse	870	£ 9/10 s. 11/12 <i>on XX on 40 → Pwch 00 on 40</i>	£ 13/14 s. 15/16 <i>on XX on 40 → Pwch 00 on 40</i>	170	18/19 20/21	22/23 24/25			
No	Informant	Spouse											
870	£ 9/10 s. 11/12 <i>on XX on 40 → Pwch 00 on 40</i>	£ 13/14 s. 15/16 <i>on XX on 40 → Pwch 00 on 40</i>											
170	18/19 20/21	22/23 24/25											
<p>138 Do you or your wife receive any annuities?</p>	<p><u>If Yes</u></p> <p>a) How much did you (and your wife) get for last payment?</p> <p>Informant....£ <del>27/28</del> s. <del>29/30</del></p> <p>Spouse.....£ _____ s. _____</p> <p>b) How many such payments do you get per year?</p>												
<p>139 Do you or your wife receive any income from Trade Unions, Friendly Societies or charitable organisations?</p>	<p><u>If Yes - record weekly amount</u></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: center;">Informant</th> <th colspan="2" style="text-align: center;">Spouse</th> </tr> <tr> <th style="text-align: center;">£</th> <th style="text-align: center;">s.</th> <th style="text-align: center;">£</th> <th style="text-align: center;">s.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">310</td> <td>31/33 34/35</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> </tbody> </table>	Informant		Spouse		£	s.	£	s.	310	31/33 34/35	X	X
Informant		Spouse											
£	s.	£	s.										
310	31/33 34/35	X	X										
<p>140 Do you or your wife receive any separation allowance or alimony?</p>	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">£</th> <th style="text-align: center;">s.</th> <th style="text-align: center;">£</th> <th style="text-align: center;">s.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">360</td> <td>37/38 39/40</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> </tbody> </table>	£	s.	£	s.	360	37/38 39/40	X	X				
£	s.	£	s.										
360	37/38 39/40	X	X										
<p>141 Do you (or your wife) receive any regular cash help from children, relatives or friends not in the household?</p>	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">£</th> <th style="text-align: center;">s.</th> <th style="text-align: center;">£</th> <th style="text-align: center;">s.</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">410</td> <td>42/43 44/45</td> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> </tr> </tbody> </table>	£	s.	£	s.	410	42/43 44/45	X	X				
£	s.	£	s.										
410	42/43 44/45	X	X										

142. Do you or your wife receive any rent from lodgers, boarders or sub-tenants of this house? [Including children]

Yes ... 1 ask (-) (b)  
No ... 2

If Yes (1)

(a) About how much did you (and your wife) receive last 12 months, before allowing for expenses?

(b) Do you provide any of the following services (to your boarders, lodgers, etc.)?

CODE  
ALL  
THAT  
APPLY

Light.....	1	
Heat.....	2	
Breakfast only	3	
Breakfast and one meal only	4	51
All meals	5	
Cleaning	6	
Laundry	7	
Furniture	8	
None of the above	9	

143. Did you (or your wife) have any income from any other source last week?

Yes.... 52  
No..... 53

If Yes (1)

(a) From what source?

(b) About how much did you (and your wife) receive at the GR TO BTL last 12 months?

Please go to Page 52

**FOR OFFICE CORRESPONDENCE ONLY**

From:

To:

CD/901/S418/B.

Pt. 1

W65B OPCS 2/79

# ORANGE

## of Income

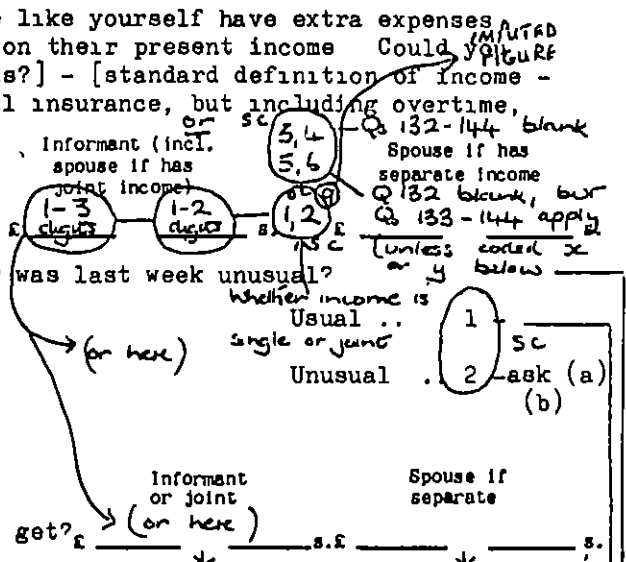
1. If subject is married (even if spouse is not included in sample) details of income are required for both husband and wife on the same schedule. Where the wife is likely to have an income of her own, questions should be put separately, direct to her, even though they be recorded on the same schedule.
2. For wages or salaries we require net amount after deductions for tax and national insurance only. Check that other deductions have not been made, e.g. savings, superannuation, club membership. If these deductions have been made, they should be added on to take-home pay.
3. Incomes per week or per month should be recorded in pounds and shillings (ignore pence), and annual incomes in £s only (ignore shillings and pence). Where informant answers for periods other than that required by the answer - be sure to note the period for which amount given applies.
4. If the informant is drawing a Supplementary Pension or Allowance (Nat. Assistance), omit Qn.144.

### CARD 0 STARTS

INTRODUCE. [We'd like to find out if people like yourself have extra expenses they might find it hard to meet on their present income. Could you tell me first what your income is?] - [standard definition of income - deducting income tax and national insurance, but including overtime, bonus, pension, etc.]

131. What was your total income last week?

132. Is this the amount you usually have, or was last week unusual?



If Unusual (2)

(a) Why was it different last week?

(b) What do you (and your wife) usually get? Informant or joint (or here) Spouse if separate

THEN - for each dependent child (if any), mentally subtract £2 from the total income

IF single, widowed, separated with adjusted total less than £13. - ask full income details

IF married couple with adjusted total less than £17. - ask full income details

Over these amounts - go on to Qn.145

INCOME DETAILS - ASK QUESTIONS APPLICABLE - OR USE AS CHECK QUESTIONS

TO THOSE SELF-EMPLOYED, or whose WIFE IS SELF-EMPLOYED

133. How much was your total income (and your wife's) in the last 12 months for which you can give a figure, from your business (practice) etc?

After deducting business expenses and income tax

Note here if income tax not known.

Informant (incl. spouse if has joint income)	Spouse if has separate income	NA to Qs 133-144
£ 4, 2 SC or 1-2 digits 1-2 digits S.	£ _____ -	Qs 133-144 Qs 135-144 DNA

# ORANGE

134. Earnings last week from work

Including overtime, tips, bonus, etc.  
Excluding N.I and Income Tax

If any earnings

(a) Is this the amount you usually take home, or is this week unusual?

Usual ... 1 sc for each column  
Unusual ... 2 ask (1) (11) (MC if both cols used)

If unusual (2)

(1) What was different last week?

(11) What do you (your wife) usually get?

135. Apart from your regular job, do you (your wife) receive any income from casual work?

Yes .... 1 ask (a)(b)  
No .. .. 0 sc

If Yes (1)

(a) How much do you get (a week)? £ \_\_\_\_\_ s

(b) For how many weeks a year? \_\_\_\_\_

136. Are you at present receiving any of the following State benefits? (Ask or check as appropriate). If Yes, give amount per week, even if not drawn weekly.

On each line

- (1) National Insurance Retirement Pension .. . . . . .
- (2) Supplementary pension (Nat. Assistance) . . . . .
- (3) Industrial disablement pension (incl any additional allowance paid) .. . . . . .
- (4) War disability pension (incl. any additional allowance paid) .. . . . . .
- (5) Nat. Ins. Widow's pension or allowance . . . . .
- (6) War widows or industrial pension
- (7) Family allowance/guardians allowance/childs special all. . . . .
- (8) Maternity benefit . . . . .
- (9) Sickness or industrial injury benefit . . . . .
- (10) Unemployment benefit . . . . .
- (11) Supplementary allowance (National Assistance) . . . . .

If any benefit (8-11) - ask (a)

(a) For how many weeks have you been drawing this benefit? \_\_\_\_\_ weeks

If 13 weeks or less

(b) What was your wage the last week you worked? £ \_\_\_\_\_ s

Informant (~~and spouse if has joint income~~)  
Spouse if ~~has separate income~~

Either None or £ 1-2 digits 1-2 digits s. £ 1-2 digits 1-2 digits s.  
or 4,2 sc or 4,2 sc or 0 or 0

Either 4,2 sc or 1-2 digits 1-2 digits s. Either 4,2 sc or 1-2 digits 1-2 digits s.

Off use  
1 2 3 4

A				
B				

4 sc or 1-2 digits 1-2 digits s END OF CARD C

CARD D STARTS

4 sc or 1-2 digits 1-2 digits s

4,2,9 sc - 50 - END OF CARD F

# ORANGE

137. Do you receive any of the following employer's pensions (regular allowances) at present?

On both lines

(a) Central or local Government? (5) 0 OR Informant AND/OR Spouse

(1-2 digits) (1-2 digits) (1-2 digits) (1-2 digits)

(b) Own or husband's/wife's employer (not (a))? 0 OR (2) 0 OR (99) 0 ditto ditto

---

138. Do you or your wife receive any annuities?

(5) 0 OR If Yes

a) How much did you (your wife) get for last payment?

Informant....£ (1-2 digits) (1-2 digits) s.

Spouse... ..£ \_\_\_\_\_ s.

b) How many such payments do you get a year?

---

139. Do you or your wife receive any income from Trade Unions, Friendly Societies or charitable organisations?

(5) 0 OR If Yes - record weekly amounts

	Informant	Spouse
	£ (1-2 digits) (1-2 digits)	£ _____ s.

---

140. Do you or your wife receive any separation allowance or alimony?

0 ditto \_\_\_\_\_

---

141. Do you (or your wife) receive any regular cash help from children, relatives or friends not in the household?

0 ditto \_\_\_\_\_

142. Do you or your wife receive any rent from lodgers, boarders or sub-tenants of this house? [Including children]

Yes..... (5) 1 ask (a) (b)

No ..... (2)

If Yes (1)

(a) About how much did you (and your wife) receive in the last 12 months, before allowing for expenses?

£ (x,y) (1-2 digits) (1-2 digits) s

(b) Do you provide any of the following services (to your boarders lodgers, etc.)?

	Light.....	1	2	3	4	5	6	7	8	9
	Heat.....	2	3	4	5	6	7	8	9	
	Breakfast only.....	3	4	5	6	7	8	9		
	Breakfast and one meal only.....	4	5	6	7	8	9			
	All meals..	5	6	7	8	9				
	Cleaning.....	6	7	8	9					
	Laundry.....	7	8	9						
	Furniture.....	8	9							
	None of the above..	9								

CODE ALL THAT APPLY

MC

\* For use of computer operator NOT TO BE PUNCHED

---

143. Did you (or your wife) have any income from any other source last week?

Yes..... (5) 1 ask (a) (b)

No..... (9)

If Yes (1)

(a) From what source?

In each column (max = 2)

(2-5) s

(b) About how much did you (and your wife) receive in the last 12 months?

£ (1-2 digits) (1-2 digits) s

(x)



Omit question 144 where informant is drawing a Supplementary Pension or Allowance (National Assistance) ie an amount correct at

144. Do you or your wife have any money in Q 136, Lines 2 or 4

(i) The bank, savings bank, co-op, saving certificates, building society, premium bonds?

- Yes, self..... 0 sc
- Yes, wife ..... 1 MC
- No, neither..... 2 MC
- 3 sc
- 4 sc

(ii) Stocks, shares, including War Loan, etc.?

- Yes, self..... 5
- Yes, wife..... 6 MC
- No, neither..... 7 sc
- 8 sc

(iii) Property other than this dwelling house?

- Yes, self..... 9
- Yes, wife..... X MC
- No, neither..... 0 sc
- 1 sc

If has any savings

(a) Taken together [remind inf. of items] would you say that altogether (not counting this house if owned) you have:

RUNNING PROMPT	Over £2,500.....	1	sc
	£300 - £2,500....	2	ask (1)
	Less than £300. ....	3	

If between £300 and £2,500 (2)

(1) (It would help me to get it more accurately) specify amount

£ 1-4 digits

or 4, X sc

145. We've already talked about the extra expenses for housing. Do you have any extra expenses due to your (disability) for.

On each line (a) - (c)

- (a) Domestic help? No 0 or Estimate weekly amount £ 1 digit or 2-4 sc
- (b) Heating? 0 £ ditto s.
- (c) Special diets? 0 £ ditto s.

On line (d)

- (d) Anything else we haven't mentioned? (Specify) 0 or £ 2 or 1 digit or 1-2 digits s.
- £ 2 or 1-2 digits or 1-2 digits s.
- £ \_\_\_\_\_ s. Ans/or

4, X sc  
NA to whole of Q 145 (Q 146 blank also)

Other domestic associated services  
Travelling expenses

146. If any extra expenses

In the past year did you (or your wife) use up any of your savings, or raise a loan on property or insurance policy, or anything like that, to meet these extra expenses?

- Yes. .... X DNA (No extra expenses)
- No..... 1 sc
- 2 ask (a) (b)

If Yes (1)

(a) Which of these expenses?

1-12, 18, 19 MC (Max = 4)  
19 sc

(b) How much money did you use?

£



**DISCOVERY CARD A.**

S/No (1) Cols 5-7 PUNCHED ON ALL CARDS

S.S. 418

(i) interviewer \_\_\_\_\_

Authorisation No \_\_\_\_\_

(ii) Date of interview \_\_\_\_\_

(iii) Person interviewed -

Subject (singly) . . . . . 1

Subject (jointly) . . . . . 2

Subject helped by proxy . . . . . 3

Proxy (state relationship) . . . . . 4

NOTE THE S/No SHOULD ALWAYS END IN THE LAST BOX

Serial Nos 0-9 0-9 0-9 0-9 0-9 0-9 1-9

CARD A STICKS - (blank) 0/1 (BLOCK CAPS)

(v) Name of subject . . . . . 2

Address . . . . .

Where subject is at home, but is too confused or irrational, or too ill to be interviewed (excluding temporary illnesses where an interview may be carried out at a later date), someone who is responsible for looking after the subject (a proxy) should be asked.

(vi) If Refusal - Reason - giving as much detail of capability as possible, e.g. if seen, appears active/walks with stick, etc., or out at work. Get Household composition inc. as much detail as possible.

~~W. S. 418~~  
**RAY**

CARD A. = Full Punched

NOTE: PUNCH ALL OVERCODES ON 1ST COL. OF GIVEN SET.

M. G. Jones

Punch only the line where the subject's No. is rung.

(iv) HOUSEHOLD COMPOSITION

(a) Relationship to H O H	(b) 3 Ring code to indicate subject	(c) 4 Sex M F	(d) 18 Age	(e) 6 Marital Status Md Sgl. Wd	(f) 7 Working? (Any number of hours) Full Part Unemp. Rtd Student time Sick H/wife (unpaid)	(g) 8 Bedfast or Chair- fast	(h) 8 Able to get out
Subject #0-11	1-9	1 2	15-19	1 2 3	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5 6 7 8
	2	1 2	17	3 4 5	1 2 3 4 5	6 7 8	
	3	1 2		3 4 5	1 2 3 4 5	6 7 8	
	4	1 2		3 4 5	1 2 3 4 5	6 7 8	
	5	1 2		3 4 5	1 2 3 4 5	6 7 8	
	6	1 2		3 4 5	1 2 3 4 5	6 7 8	
	7	1 2		3 4 5	1 2 3 4 5	6 7 8	
	8	1 2		3 4 5	1 2 3 4 5	6 7 8	
	9	1 2		3 4 5	1 2 3 4 5	6 7 8	
	10	1 2		3 4 5	1 2 3 4 5	6 7 8	
	11	1 2		3 4 5	1 2 3 4 5	6 7 8	
	12	1 2		3 4 5	1 2 3 4 5	6 7 8	

OFFICE USE

a	b	c	d	e	f	g	h	j	k	m	n	o
---	---	---	---	---	---	---	---	---	---	---	---	---

(i) Interviewer \_\_\_\_\_ 113  
 15/16/17  
 Authorisation No. ~~118~~ 3 digits 15/19 24/21  
 (ii) Date of interview 15/19 MONTH 14  
 (iii) Person interviewed -  
 Subject (singly) .....  
 Subject (jointly) ..  
 Subject helped by proxy .....  
 Proxy (state relationship) . . .  
 1 2 3 4  
 5.c  
 22 115

8	9	10	11	12	13	14
0-9	0-9	0-9	0-9	0-9	0-9	0-9

(v) Name of subject .. . . . . . (BLOCK CAPS)  
 Address . . . . .  
 . . . . .  
 . . . . .

Where subject is at home, but is too confused or irrational, or too ill to be interviewed (excluding temporary illness where an interview may be carried out at a later date), someone who is responsible for looking after the subject (a proxy) should be asked.

(vi) If Refusal - Reason - giving as much detail of capability as possible, e.g. if seen, appears active/walks with stick, etc., or out at work. Get Household composition inc as much detail as possible.

- 36 No in H/H INC INF
- 20 Total EARNERS Exc INF
- 24 Total BEDFAST
- 27 Total HOUSEBOUND

(iv) HOUSEHOLD COMPOSITION

1-10 116  
 23/24  
 Ages 7-100 punched as 99

(a) Relationship to SUBJECT	(b) Ring code to indicate subject	(c) Sex M F	(d) Age	(e) Marital Status Md. Sgl. Wd	(f) Working? (Any number of hours) Full Part Unemp. Rtd Student (unpaid) Sick H/wife	(g) Bedfast or Chair- fast	Able to get out
H.O.H. 117	1	12	119	121	31 122	9-NA 123	1 2 3 4 5 6 7 8
124 32/33	2	12	34 35/36	37	38		1 2 3 4 5 6 7 8
131 39/40	3	12	41 42/43	44	45		1 2 3 4 5 6 7 8
138 44/47	4	12	48 49/50	51	52		1 2 3 4 5 6 7 8
145 52/54	5	12	55 54/57	58	59		1 2 3 4 5 6 7 8
152 60/61	6	12	62 63/64	65	66		1 2 3 4 5 6 7 8
159 67/68	7	12	69 70/71	72	73		1 2 3 4 5 6 7 8
166 74/75	8	12	76 75/78	79 170	80 171	172 3	1 2 3 4 5 6 7 8
Began Rehab 7/31	9	12	84 85/86	87	88		1 2 3 4 5 6 7 8
	10	12	41 42/43	44	45		1 2 3 4 5 6 7 8
	11	12					1 2 3 4 5 6 7 8
	12	12					1 2 3 4 5 6 7 8

66 y.m. 151 10. 10000000  
 ETC TO END of second B CAS 15 person

OFFICE USE

a	b	c	d	e	f	g	h	j	k	p	n	o								

I understand that a few months ago you [refer to postal] ...

If obvious that difficulty likely to apply or if estab. at introduction, code Qn. 1 without asking

1 Are/do you still (unable to) (need help with) .....? Yes..... (Y) - on to Q 6 No ..... (X)

No longer having any difficulty (x)

2. Could you tell me when you got better? No. of weeks ago. . . . . (214) 11/11

3 And for how long before that you (had difficulty)? No. of weeks.. (217) 11/12/13

4 When you had difficulty (name from postal questionnaire) what was the trouble (cause)?  
Punch 3 sets of 3 digits  
011-162 - 11/12/13  
xxx

178 11/15/16  
179 11/18/19  
180 12/31/22

5. Have you ever had (named difficulties, not cause) before this last time? Yes..... (1) 23 - ask (a) No..... (2) 181

(a) Has your doctor told you if this (these) trouble(s) is (are) likely to recur (as a result of your accident etc.)?

Yes, likely to recur.. . . . 1 4 see note  
Not likely to recur. . . . . 2 5 - close interview  
Doctor didn't say..... 3 6 - ask (1)  
Not seen doctor..... 4 7 182

If doctor didn't say/not seen (6, 7)

(i) Do you think it has cleared up for good now?

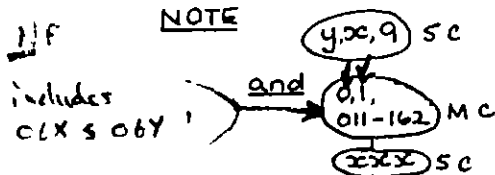
Yes, hope so. . . . . (8) 183 close interview  
No..... (9) 184 see note

If likely to recur- explain we want to see how such difficulties inconvenience people - so we'd like to ask some questions about when she/he did have difficulty

CARD C.

Omit question 6 for blind, amputees; check qn where medical term given on postal - e.g. "Did your doctor say you have ... epilepsy?"

6 What does your doctor say is the matter with you?



Doctor doesn't say ..... Y sc

Hasn't seen doctor ..... 0 - ask (a)

D.N.A. Amputation .. 01 MC

D N.A. Blind ..... 1

Doctor says (specify) ... xxx sc

184 24

Y sc

0 - ask (a)

01 MC

1

xxx sc

If not seen doctor/doctor doesn't say (Y, X)

(a) What do you think is the matter with you?

Qn 6 if 6 is S/C

970 Qn 7 if 6 is M/C

Punch as 6 three digit codes

185 166 25-27

187 3rd 28-30

188 4th 31-33

189 5th 34-36

190 6th 37-39

40-42

IF MORE THAN ONE COMPLAINT GIVEN in 6 or 6a

i.e. if more than one of codes 0, 1, 011, 162.

7 Which of these complaints (name them) causes the most difficulty?

QNS. 8-9 refer to main complaint

164

01 MC

011-162

191 43-45

192 46-48

193 49-51

194 52-54

195 55-57

196 58-60

8. How long ago did this (main complaint) start causing you difficulties?

For amputees/blind - ask "How long ago did you lose your ... (leg/eyesight)?"

ONE Within last year ..... X sc

CODE No. of years ago ..... 0 1-99

ONLY From birth ..... Y

61, 62

X sc

0 213

1-99

Y

If difficulty remembering, try to get estimate and record here

Check:- If code X or 99 at Q8, 8(a) D N A

(a) That would mean you were (age) years old when your difficulty started

Yrs. old

63-65

214

0 or 1-3 digits

If (disability) started causing difficulty less than a year ago .. code .. X

i.e. code 0 at Q 8

sc. 215

X go on to Qn. 10

9. During the last year has there been any change in your condition? Would you say your (disability) is

RUNNING PROMPT

Better now than it was a year ago ..... Y sc

Worse now ..... 1 ask (a)

or About the same as it was a year ago? ..... 2

3

66

Y sc

1 ask (a)

2

3

If Better/Worse (1, 2)

(a) In what way has it got better/worse?

CARD C

10. Are you taking any drugs, tablets, medicine or using ointments at present for (complaints which cause difficulty - Qn.6)?

Yes ..... 1 ask (a) ~~202~~  
 No ..... 2 216

sc  
 1 ask (a)  
 2 216

67

If Yes (1)

(a) Are they prescribed by a doctor, or do you buy them yourself from the chemist?

CODE BOTH Bought from chemist ..... 3 - ask (i)  
 IF APPLY Prescribed ..... 4 - ask (ii) ~~209~~

MC  
 3 - ask (i)  
 4 - ask (ii)  
 217/8

If bought from chemist (3)

(1) How much do you spend a week on things which are not prescribed?

[Check - that's just for the things you use]

xxx = DK

0 or 1 or 2 digits. 0.x 1-11 d.

68/69 70/71  
 219 230

If prescribed (4)

(ii) For the things that are prescribed, are you exempt from payment (can you claim it back), or do you have to pay for your (drugs/medicine/tablets, etc.) yourself?

Exempt/claims back .....

Have to pay ... ..

yx sc 222  
 0 on to 72  
 Qn.11 195  
 1  
 9

Applies if coded 1 at Q10(a)(i)

I'd like to know how much it costs you a week ..... so if you could tell me (for each item) how long your prescription lasts, I can work it out

No. if more than one	Prescription lasts	Cost of prescription		Approx cost per week
		2s.6d.	Other	
		1		
		1		
		1		
		1		

73/74 75/76  
 0 or 1 or 2 digits 1-11  
 or x.y sc  
 ON COLS 73/74 ONLY

TO ALL

11. Apart from drugs and medicines, [etc.], are you having any (other) treatment

PROMPT

From your own doctor? .....

At a hospital? .....

Anywhere else? .....

sc  
 1 MC 77  
 2  
 3  
 4 sc  
 5

Special card bank sample CARD C

78/79 = YON 78  
 \* FOR GREYS  
 79 = COD 51-4

12. Do you see your doctor regularly - I don't mean just calling for a prescription - but actually seeing him?

325  
Yes ..... 1 - ask (a)  
No ..... 2 - ask (b)

559  
8

If seen regularly (1)

(a) How often do you see him?

ONE  
CODE  
ONLY

More than once a week ... 3  
Once a week .. 4  
Every 2 or 3 weeks .. 5  
Once a month/4 weeks . 6  
Other periods (specify) . . . . . 7  
8,9  
0,y

SC 560

GO ON TO QN.13

If not seen regularly (2)

(b) How long ago was the last time you saw him (for yourself)?

CODE FIRST  
THAT APPLIES

Within last week . . . . . 4  
Within last month . . . . . 6  
Within last 3 months . . . . . 7  
Between 3 and 6 months ago . . . . . 8  
Between 6 and 12 months ago . . . . . 9  
Years ago (specify) . . . . . 1-3,5  
0,x,y

9  
SC 562

13. Have you paid to see a private specialist (consultant) about your .... (main complaint) since the National Health started?

Yes ..... 1 SC  
No ..... 2

563  
10

14. Have you ever consulted anyone who is not a medical doctor about your (main complaint), [such as a faith healer, osteopath, chemist, etc.]?

Yes, consulted .... 0 SC  
No ..... 1 ask (a)(b)

564

If Yes (0)

(a) Who was it?

Faith/spirit healer ..... 2  
Osteopath/Manipulator/bonesetter ..... 3  
Homoeopath/herbalist ... 4  
Psychologist ..... 5  
Other (specify) ..... 6  
7

MC 565

(b) Was the visit of any help to you?

Yes helped ..... Y  
No ..... X SC  
8

11

566

INTRODUCE [We've been talking about your (disability) - but there are sometimes other things which complicate conditions].

15. Do you regularly suffer from any other chronic illness or any condition which makes it difficult for you to get about or do your work?

Yes ..... (x) SC 1 - ask (a) 12  
No ..... 2

570

If Yes (1) 6  
(a) What is the matter?

PUNCH AS 571  
SIX 3-DIGIT  
CODES.

011-162 M.C  
13 - 15  
16 - 18  
19 - 21  
22 - 24  
25 - 27  
28 - 30

I'd like to ask about your eyes, next ... [code or check if observed]

NOTE  
IF Q 16 + 17 ARE BOTH CODED 'X', THEN Y = NA AT Q 16 ONLY

16. Can (could) you recognise people you know if you were to see them across the street (wearing glasses if applicable)?

Yes, could recognise ... (7,x) SC 590  
No ..... 8 31  
9

17. Can you usually see to read ordinary print (show leaflet) like this, and see to write (wearing glasses if applicable)?

Yes, can see to read/write ... (x) SC 591  
Cannot read/write (illiterate) ..... 1  
No, can't see unless uses magnifier, etc. .... 2  
No, can't see ..... 3  
4  
5

18. - [Code if observed]

Can you hear ordinary conversation (with hearing aid working if applicable)?

Yes ..... (6,y) SC 32  
No ..... 7  
Says yes, but difficulty observed ..... 8 592  
9

19. - [Use as check question if observed or unlikely]

Do you have any artificial limbs?

No ..... (x) SC 593  
Yes (describe fully) ..... 0 33  
1  
If coded (1) → (2-y) M.C 594  
y

State right/left - for limbs above/below knee or elbow



CARDE.

Use as check if observed

20. Can you usually get out of the house if the weather is not too bad?

Yes ..... (Y) - ask (a)  
 No, housebound ..... (X) - on to Qn.21

[Only to garden/front gate = No]

if gets out (Y)

(a) Can you usually get out

on your own without sticks or aids and without difficulty . . . . . 0

RUNNING PROMPT

on your own but only with aids or difficulty . . . . . 1

or can you only get out if someone is with you? . . . . . 2

if cannot get out on own (2)

(i) Who usually goes with you?

602

600 34  
 sc  
 601  
 sc  
 0 - on to Tests  
 1 - on to Qn.22 next pg.  
 2 - ask (i)(ii) on to tests  
 8  
 602  
 1-6,9 sc  
 7,8 MC  
 9 sc  
 35

(ii) Can you generally get someone to go with you (take you out) when you want to go?

Yes ..... (3) sc 36  
 No ..... (4) 605

if housebound (X), or not on own (2) [Check/code if obvious]

21. But can you Get about the house (walking or wheelchair)...  
 RUNNING or Do you have to sit in a chair when you're up...  
 PROMPT or Can't you leave your bed? . . . . . 3

sc 606  
 1 on to Qn.22  
 2 ask (a)  
 (b) overleaf  
 3 ask (b) overleaf

if chairfast (2)

(a) Can you get in and out of your chair on your own without aid, or do you have to have someone to help, or a mechanical aid?

[ Sticks, etc. are counted as mechanical aids. ]

On own without aid ..... (6) sc 607  
 Someone to help ..... (7) MC  
 Mechanical aid ..... (8) - ask (i) - (9) sc (iii)

if has mechanical aid (8)

(i) Could you describe it to me?

607  
 1-5 MC  
 38

Parts (ii) & (iii) & NA  
 (Codes 3 or 4 at (i))

(ii) Who was responsible for having it put in?

(Y) 612 39  
 or  
 1-9, x sc

(iii) How much did you have to pay towards it?

[If hired state amount and period] Nothing . . . . . (0)

613  
 40

£ \_\_\_\_\_ (Y, X) 1-9 sc

Qn.21 (cont'd ...)

If chairfast or bedfast (2,3)

(b) Can you get in and out of bed on your own without aid, or do you have to have someone to help, or a mechanical aid?

Sticks, etc. are counted as mechanical aids.

On own without aid ..... 6<sup>sc</sup> - on to Qn.22 614  
Someone to help ..... 7 - see note below 41  
Mechanical aid ..... 8<sup>MC</sup> - ask (i)-(iii) 9, y<sup>sc</sup>

If has mechanical aid (8)

(i) Could you describe it to me?

For each column 621 (max = 2)  
616 (1-5) MC 42 (1-5) MC 43

(ii) Who was responsible for having it put in?

Part (v) & (vi) DNA (Codes 3 or 4 or W)

619 (y) 44 (y) 625 45  
or (1-9, x) sc or (1-9, x)

(iii) How much did you have to pay towards it?

If hired, state amount and period

Nothing ..... 0 46 620 626 47  
or (y, x) sc or (y, x) sc

IF PERMANENTLY BEDFAST or CHAIRFAST and cannot get about room in wheelchair GO ON TO TESTS.

(y) 635

For those whose only disability is non-locomotive - e.g. Blind/epileptic ..... (code)

(X) - Go on to Tests

22. Do you have any walking aids such as a stick, crutches, wheelchair or anything else?

Exclude stick for blind

No aids ..... 0<sup>sc</sup> - Go on to Tests  
One stick (umbrella used as stick, etc.) ..... 1 - Go on to Qn.25 627  
Two sticks ..... 2  
Walking frame/tripod, etc. .... 3 MC 48/49  
Wheelchair ..... 4  
Elbow crutches ... ring 1 or 2 crutches and code ..... 5 - ask qns. 23-25  
Shoulder crutches ring 1 or 2 crutches and code ..... 6 for each aid  
Calipers/built-up shoes at least 1" on sole ..... 7  
Other (describe fully) ..... 8

CODE ALL THAT APPLY

NB (y, x, 0, 1-9, COL 48) (10-13 COL 49) as 0/1/2/3

(13) sc.

CARD F SERIAL 3-7

for each column (max no. of cols. = 5)

If more than one type of aid, write in code number and ask Qns. 23-25 for each separately, working down columns

10/11 sc 19/20 28/29

37/46  
38/47

23. Who supplied the .... (aid) ....?

NOTE -> Col 8/9 = Q 22

24. Is it on free loan, do you pay for hire, or did you have to buy it for yourself?

- Free loan ..... 1 ask Q.25
- Pay for hire ..... 2 ask (a)
- Bought ..... 3 ask (b)
- Personal gift/Legacy ..... 4 ask Q.25

if pay for hire (2)

(a) How much do you pay? [Amount and period]

if bought (3)

(b) How much did it cost? (nearest shilling)

25 Check or establish Do you use your aid (either about the house or if you go out)?

- No, aid not used .. 1 ask (a)(b)
- Only inside house . 2 ask (b)
- Only outside house ..... 3 ask (a)
- Both inside and outside .. 4

(a) Why don't you use it inside house?

(b) Why don't you use it outside? [If different from (a)]

Aid 1 - code	Aid 2 - code	Aid 3 - code	
(1-9) sc 12	21	30	39 48
(x) sc 13	22	31	40 49
(4, x) sc 14	23	32	41 50
(x, 0) sc 15	24	33	42 51
(x) sc 16	25	34	43 52
(x, 0) sc 17 (2-7, 9) M.C	26	35	44 53
(x, 0, 1) sc 18 (2-7, 9) M.C	27	36	45 54

IF USES A WHEELCHAIR ASK SPECIAL WHITE SHEET, OTHERWISE ON TO TESTS

on to wheelchair 1

C

TESTS OF MOTOR CAPACITY

1. The tests apply to all informants - even those who are bedfast may be able to do some actions if not others.

Even where you would expect to find no difficulty, you should ask the informant to do the tests, using some introduction on the lines shown in interviewers instructions.

2. If any actions are observed , e.g. walking, sitting on armless chair, etc. code without asking.

3. The order of the test could be varied - provided every item is eventually completed.

4. [Suggested Introduction]

I WOULD LIKE TO ASK YOU TO DO A FEW SIMPLE MOVEMENTS FOR ME. THEY ARE THE MOVEMENTS MOST USED IN EVERYDAY LIFE AND HAVE BEEN DESIGNED TO TELL US HOW PEOPLE MANAGE TO DO THINGS LIKE PICKING UP AND GRASPING OBJECTS AND PUTTING THINGS UP ONTO SHELVES. I'LL SHOW YOU WHAT I WANT YOU TO DO AS WE GO ALONG.

ON NO ACCOUNT ATTEMPT TO DO ANYTHING YOUR DOCTOR HAS TOLD YOU NOT TO DO OR YOU FEEL WOULD BE HARMFUL. PLEASE LET ME KNOW IF ANY OF THESE MOVEMENTS CAUSE YOU ANY PAIN OR DISCOMFORT.

The introduction to the tests will need to vary according to the condition of the informant (Examples are given in interviewers instructions).

5. Put down the score immediately after every single movement.

6. If the whole test refused

(a) Reason for refusal

Col 21  
Card A

Either (1-9)  
0 sc

or

Pink Schedule applies

(b) Note (from observation) any indication that the informant would have had difficulty performing any item, or could do it easily.

7. If no armless chair available, ask subject to avoid using arms, and note type of chair used.

TESTS OF MOTOR CAPACITY

NOTES FOR SCORING TESTS OF MOTOR CAPACITY

NO PERSONAL ASSISTANCE SHOULD BE GIVEN IN PERFORMANCE OF TESTS (E.G. TEST OBJECTS SHOULD NOT BE PLACED IN SUBJECT'S HANDS, NOR SHOULD HELP BE GIVEN TO GET OUT OF A CHAIR)

SCORE 0 FOR ANY ACTIONS PERFORMED -

- a) IN LESS THAN ABOUT 15 SECONDS EACH HAND - UNLESS OTHER STATED (EXCEPT FOR WALKING 12 PACES ALLOW ABOUT 60 SECONDS)
- b) WITHOUT HELP OF OBJECT (E.G. STICK, WALKING FRAME, CALIPERS, HAND RAIL, ARTIFICIAL LIMB)
- c) WITHOUT EXPRESSED PAIN, PANTING OR SWAYING
- d) WITHOUT ANY ABNORMAL COMPENSATORY MOVEMENT(S), PARTICULARLY AS SPECIFIED IN EACH TEST

SCORE 1 FOR ANY ACTIONS PERFORMED -

- a) IN ABOUT 15-60 SECONDS (EXCEPT FOR WALKING 12 PACES ALLOW FROM 1 UP TO ABOUT 3 MINUTES)
- b) WITH HELP OF OBJECT (E.G. ARM SUPPORTED BY FLAT SURFACE, ARTIFICIAL LIMB, HAND RAIL, WALKING FRAME, CALIPERS, STICK)
- c) WITH EXPRESSED PAIN WITH ABNORMAL COMPENSATORY MOVEMENTS (I.E. IN A WAY QUITE DIFFERENT TO THE DEMONSTRATION) PARTICULARLY AS SPECIFIED IN EACH TEST, SWAYING, OR PANTING INDUCED BY ANY ACTION.

SCORE 2 FOR ANY ACTIONS WHICH

- a) ARE NOT UNDERTAKEN BECAUSE OF MEDICAL ADVICE
- b) ARE NOT UNDERTAKEN BECAUSE SUBJECT DOES NOT FEEL CAPABLE
- c) ARE NOT UNDERTAKEN BECAUSE FAILURE OF PRIOR TEST EXCLUDES SUBJECT FROM TRYING
- d) ARE NOT COMPLETED IN THEIR ENTIRETY
- e) ARE PERFORMED IN MORE THAN ABOUT 60 SECONDS (OR MORE THAN ABOUT 3 MINUTES FOR WALKING 12 PACES)

IF SOME ITEMS ONLY REFUSED:

- a) BECAUSE INFORMANT SAYS DOCTOR FORBIDS, OR CANNOT PERFORM - ENTER SCORE 2 BUT CODE X, NOT OBSERVED.
- b) BECAUSE INFORMANT DOES NOT AGREE TO AN INDIVIDUAL TEST ("Silly, can't you take my word", etc.) - CODE REFUSED - "Y".

21! = Jan 9

[It should only be used in cases]

CARD A

UPPER EXTREMITY FUNCTION TEST

22 sc 10  
 21  
 22  
 23

For any item refused insert code Y, or if not observed insert code X as well as score 2

Check - are you normally ..... Right handed ...  
 Left handed .....  
 Ambidextrous .....

FUNCTION	Scores		
	Right	Left	
<b>A. HAND REACH, GRASP AND RELEASE</b>	23	24	
1. Grasp weighted plastic tumbler, using thumb and at least two fingers, raise to mouth level from flat surface, the head remaining in usual position and hand held steady. Put down tumbler on surface.	11 for each test	13 14	
<b>B. WRIST, FOREARM AND ELBOW MOVEMENTS</b>			
2. Take tumbler in hand in the most comfortable way, turn to right side so that rim touches flat surface, turn to left side so that rim touches flat surface, using wrist, forearm and elbow only. (If obvious shoulder movement used to complete test, score 1).	15 16	17 18	
<b>C. PINCH AND FINGER DEXTERITY</b>			
3. Pick up pen which has tip pointing towards opposite hand, using thumb and at least one finger. Transfer in hand to writing position, between thumb and first finger present, or between first and second fingers. Put down again.	19 20	21 22	
<b>D. MANIPULATION WITH BOTH HANDS</b> [allow up to 30 secs for score 0]	23		
4. Pick up and put together large nut and bolt, screw 1" up, unscrew. Both hands should be used. (If only one hand can be used score 1).	24	29	
5. Pick up and put together small nut and bolt, screw 1" up, unscrew. Both hands should be used (If only one hand can be used score 1).	27 28	30	
<b>E. ARM REACH MOVEMENTS (EACH ARM SEPARATELY)</b>			
Start with hands in lap in each case. For 6-9, bend in elbow up to 160° is acceptable for score 0.	31 32	31 32	33 34
6. Lower hand directly downwards with arm fully extended			
7. Raise hand directly above head, with arm fully extended.	35 36	33 34	37 38
8. Raise hand to shoulder height, with arm fully extended frontwards, so that hand is level with shoulder.	39 40	35 36	41 42
9. Raise hand to shoulder height, with arm fully extended sideways, so that hand is level with shoulder	43 44	37 38	45 46
10. Touch back of head at nape of neck with hand, keeping head in normal position.	47 48	39 40	49 50
<b>F. MUSCLE STRENGTH</b>			
Lift 1 1/2 -lb weight from flat surface -	51		53
11. to shoulder height (frontwards or sideways), with elbow either flexed or straight, not moving head or body. (Score 1 if head or body movement essential to complete test).	52	41	42
12. from shoulder height, lift weight above head height, with arm either flexed or extended (frontwards or sideways), not moving head or body. (Score 1 if head or body movement essential to complete test).	55 56	43	44
Lift 5-lb weight from flat surface - as above.	59		61
13. to shoulder height,	60	45	46
14. from shoulder height	63 64	47	48
<b>TOTAL UPPER EXTREMITY SCORE</b>		91-52	67

PUNCH ALL OVERCODES ON FIRST COLUMN

(All 3 overcodes may apply) (X)(Y)(Z) 66  
 67  
 68  
 69  
 70  
 49/50

For any item refused insert code Y, or if not observed insert code X as well as score 2.

LOWER EXTREMITY FUNCTION TEST

FUNCTION	SCORE
<p>G <u>STANDING</u></p> <p>1. Stand up from sitting position in armless chair. (If seat or any other part of chair is used as a lever, or if an artificial leg is worn, score 1). Recommended height of chair between 16" - 18".</p>	<p>For each test (except J4 &amp; 5) 69 20 51</p> <p>(0, 1, 2, 3, 2X, Y)</p> <p>71 72</p>
<p>H. <u>WALKING</u></p> <p>2. Walk 2 steps (i.e. about 4 feet)</p> <p>3. Walk 12 steps (6 steps, turn and another 6 steps).</p> <p>(Score 1 if shoes built up 1" or more at the sole, if gait is uneven or body movement excessive, or if an artificial limb, crutches or other walking aid is used).</p>	<p>52 53</p> <p>73 74 75 76</p>
<p>J. <u>STEPPING UP AND DOWN</u></p> <p>4. Mount a step 6" high from floor level, turn</p> <p>5. Descend from a step 6" above floor level.</p> <p>(The procedure can be reversed if available step is below floor level). (Score 1 if stair-rail, crutch, stick, artificial limb or any other support is used to complete test. Also if excessive movement of trunk used to complete test).</p> <p><u>If no step available (9)</u> (a) Could you go up one stair, or step up a kerb</p> <p>on your own without any difficulty or using a rail or other aids                  RUNNING or could you do it on your own only with difficulty or using an aid .....                  PROMPT or couldn't you climb a stair on your own at all? ....</p>	<p>No step available ... 9 - ask (a)</p> <p>54 55</p> <p>(0, 1, 2, 3Y) (0, 1, 2, 3Y)</p> <p>79 80 81 82</p>
<p>K. <u>BENDING AND SITTING</u></p> <p>6. From a standing position reach down to touch floor (anywhere) with finger-tips, using either hand and bending both knees. (If test can only be done with straight knee score 1).</p> <p>7. Sit down from standing position in armless chair. (If an artificial leg is worn or any other aid to sitting down is used, including the arm of a chair if only an armchair is available, score 1). Recommended height of chair between 16" - 18"</p> <p>8. From a sitting position reach down to touch floor (anywhere) with fingertips using either hand. (Score 1 if support of object is needed, e.g. stick or chair arm) (N B A pick-up gadget is not permitted).</p>	<p>56 57 58</p> <p>(0, 1, 2, 2X, 3, Y)</p>
TOTAL SCORE FOR LOWER EXTREMITY FUNCTION	59/60 (X 9/9) 0.1-16
COMBINED SCORE FOR UPPER AND LOWER EXTREMITY FUNCTION	63/64 (X 4/4) 0.1-68

Qn.L Could you go up a flight of stairs

on your own, without any difficulty or using a rail or other aids .....  
 RUNNING or could you do it on your own only with difficulty or using an aid 67  
 PROMPT or couldn't you climb a flight of stairs on your own at all? ... ..  
 (0, 1, 2, 3, 60, 50, 105)

(All 3 overcodes may apply) Totals without J4 & 5

CARD A

If BLIND only <sup>and</sup> no score on test .... 68. <sup>Either</sup>  
 or Qns M & N apply

106 sc.  
 X on to  
 Y next  
 section

Qn.M Some people feel better as the day goes on - others feel worse.  
 Would you have found it \*easier or harder to do the things you've  
 just done if I'd come at a different time, or doesn't it make  
 any difference? Say I'd come

9 sc

a) in the morning? D.N.A. (tested in morning) . . . . .  
 Easier in the morning . . . . . 69  
 Harder . . . . .  
 About the same . . . . .

or  
 Y 107  
 X sc  
 0  
 1

b) in the afternoon? D N A. (tested in afternoon) . . . . .  
 [roughly 1-5 pm] Easier in afternoon . . . . . 70  
 Harder . . . . .  
 About the same . . . . .

2 108  
 3 sc  
 4  
 5

c) in the evening? D N A. (tested in evening) . . . . .  
 [after 5 pm] Easier in the evening . . . . . 71  
 Harder . . . . .  
 About the same . . . . .

6 109  
 7 sc  
 8  
 9

\* if most things done with ease - omit "easier"  
 if most things impossible omit "harder".

Qn.N Some people have disabilities where they have good days or bad  
 days, or good and bad spells.

Does your (disability) work like this, or is it much the same all  
 the time?

code both if apply [ Much the same all the time . . . . .  
 Has good/bad days . . . . . 72  
 Has good/bad spells . . . . .

110/111  
 0 sc  
 1 MC ask (a)  
 2  
 3 sc

If has good/bad days or spells (1, 2)

(a) Is today one of your good days or a bad day? - Good day  
 Bad day 73

1 112  
 2 sc  
 3  
 4

END OF  
 CARD A



IF PERMANENTLY BEDFAST/CHAIRBOUND or NEEDS A LOT OF HELP go on to special questionnaire

Others IF SCORE ON TEST IS "0" - go on to Qn. 29 page 17, but code here ..... ^ 8 9 0 450  
 " " " " for Upper Extremities only is "0" - introduce and ask items 1-4 inclusive... Y sc  
 " " " " for Lower Extremities only is "0" - " " " " 3-9 " ... X sc  
 IF Scores at least "1" on both extremities - introduce and ask all items, or blank

SELF-CARE INTRODUCE -

I noticed you had some difficulty [with one or two items] - which might make it difficult for you to do some things for yourself May I just check?

on each line

26 Do you generally have difficulty in	IF DIFFICULTY (1) ask (a), (b) and (c)		(a) Can you do it on your own even with difficulty			(b) Do you usually have someone (coming in) to help you with it?			(c) Do you use any special aids or gadgets to help			
	No difficulty	Difficulty	Yes		No	No	Someone in h/d (specify)		Someone outside h/d (specify)		Yes	No
			2	3	4		5	6	7	8		
CODE (1) Getting in and out of bed on your own 451	0	1	sc	462	4	5	sc (1-6,9)	11	sc (1-6,9)	8	9	
(2) Getting to or using the toilet 452	0	1	2	13	3	5	14	15	8	16	9	
(3) Having a bath DNA - No bath 453	0	1	2	17	3	5	18	19	8	20	9	
a) Having an all over wash? 454	0	1	2	21	3	5	22	23	8	24	9	
b) Washing your hands and face? 455	0	1	2	25	3	5	26	27	8	28	9	
(4) Putting on shoes and socks or stockings yourself 456	0	1	2	29	3	5	30	31	8	32	9	
(5) Doing up buttons and zips yourself 457	0	1	2	33	3	5	34	35	8	36	9	
(6) Dressing, other than buttons and shoes 458	0	1	2	37	3	5	38	39	8	40	9	
(7) Feeding yourself 459	0	1	2	41	3	5	42	43	8	44	9	
(8) Combing and brushing your hair 460	0	1	2	45	3	5	46	47	8	48	9	
(9) MEN ONLY shaving or DNA Women yourself 461	0	1	2	49	3	5	50	51	8	52	9	

For any special aid used in (c)

Record Code	(i) Describe aid	(ii) Who supplied/did it? was responsible for having it done/lending, giving it	(iii) Was it free? If not specify cost. If per session don't forget to state session
53		54 sc (1-9)	0 or 55 sc (1-5)
56		57	0 58
59		60	0 61
62		63	0 64
65		66	0 67
68		69	0 70
71		72	0 73

(max 7)

27. May we talk about the Welfare Services?

Have you ever heard of the Local Authority Register of Handicapped Persons?

If asked is this run by Min. of Labour, say, "No"

Yes..... 1  
No..... 0  
Don't know/not sure..... X  
sc 8  
1 - on to Q.29  
1 - ask (a) 475  
0 - on to Q.28

If Yes (1)

(a) Do you know what sort of people this register is for?

No..... 1  
Yes (specify)..... 2  
NA = 9  
sc 9  
3-5  
7-9  
476

If any indication they think it is ONLY for workers, or people who can't work, say, - "No, that's the Industrial Register" - and go on to Q.28.

(b) Are you yourself on this register (with this Authority)?

Yes, registered..... 3  
No, not registered..... 4  
sc 10  
NA = X  
X, Y - on to Q.29  
3 - ask (i) - 477  
(iii)  
4 - ask (iv) next page

If registered (3)

(1) For how long have you been registered? yrs mths  
[Months required only if less than 2 years]

4, X, 0  
1-15  
sc 11, 12  
479

(ii) What benefit has it been to you?

None..... 0  
or 1-6, 9  
sc 13  
NA = X  
X sc 480

(iii) Is this - PROMPT AS APPLICABLE

More than you expected?..... 1  
What you expected?..... 2  
or did you expect them to do more?..... 3  
sc 14  
NA = X  
1 - on to Q.29  
2 - ask (A)  
3 - ask (A)  
483

If expected more (3)

(A) What did you expect?

ON TO QN. 29

Qn. 27 (Contd ...)

If not registered (4)

(iv) Is this because you don't consider yourself to be handicapped or is there some other reason?

Don't consider handicapped .. 15  
Other reason (specify) ..

485  
1 sc  
2  
4-9, MC  
y  
0 sc

ON TO QN. 29

TO THOSE NOT KNOWING ABOUT REGISTER, or confusing with M O.L.

INTRODUCE: All local authorities must keep a register of handicapped people, and help them where they can.

28. If you had known about this register, would you have registered with them?

Yes ..... 16  
No .....

488  
1 sc  
2 - ask (a)  
x y

If No (2)

(a) Is this because you don't consider yourself to be handicapped or is there some other reason?

Don't consider handicapped ...  
Other reason (specify) .. 17

3 sc  
4  
2, 5-9 MC  
y  
0, x sc  
489

TO ALL

29 Do you have any of these come to visit or help you now? (at present - exclude breaks like home help ill, etc.)

	No	Yes	If Yes	
a) Home help	492	18	sc (0 x 1)	How many hours a week? 19/20
b) Meals on Wheels	493	21	" (0 x 2)	How many meals a week? 22
c) District nurse/male nurse	494	23	" (0 x 3)	24
d) Health visitor	495	25	" (0 x 4)	26
e) Social worker	496	27	" (0 x 5)	How often does she come? 28
f) Occupational therapist	497	29	" (0 x 6)	30
g) Physiotherapist	498	31	" (0 x 7)	32
h) Chiropody	499	33	" (0 x 8)	How often do you have your feet done? 34

506  
x, y or 1-2 digits  
x, 1-7 sc 507  
x, 1-9 sc 508  
" " 509  
" " 510  
" " 511  
" " 512  
" " 513

j) Any other health/welfare services? (specify)	35		(0 x 9) 500	36	514
	37		(11) 501	38	515
	39		(17) 502	40	516
	41		(18) 503	42	517
	43		(19) 504	44	518

Line ↓

Code 0 ringed = 'NO' to all of items 9, 11, 17-19  
Code x ringed = NA to all of items 9, 11, 17-19

NOTE PUNCH  
1, 7, 8 or 9 ONLY  
COL NO DENTUS  
ACTUAL CODE  
- 17 -

30 Since you've had (disability) have you ever applied to the Authorities, or a welfare association for any help, which they did not provide?

Yes..... 45 30 SC 520  
ask (a)-(d)  
No..... 0

If Yes (1)

(a) To whom did you apply?

For each column (max = 4)

46  
MC (2-4) SC 532  
57 63 69

(b) What help did you want?

47/48  
MC (1-5, 7,8, 11-19) SC 535  
59 64 70/71

(c) Do you know why they did not help you?

MC (1-7, 9) SC 538  
49 60 66 72

(d) How long ago was that?

\_\_\_\_\_ yrs. \_\_\_\_\_ mths.

50/51 SC 531  
4,2 61/62 67/68 73/74  
0,1-14 542

END OF CARD K

31. Do you think any of the health and welfare services I have just mentioned should do more to help you personally - or do you think they do enough?

Should do more..... 0 ask (a)  
Do enough..... 52 Y  
Don't know..... X SC 543  
XX

If should do more (0)

(a) What more ought to be done (and by whom) to help you personally?

MC (1-5, 7,8, 11-19) SC 544  
00, 44 SC 53/54

Could we talk about how you pass the time (when you are not working)?

32. Do you listen to the radio?

Check if doesn't listen whether has one

Yes, listens..... X,9 0 SC 55  
Doesn't listen, but has radio..... 1 SC 548  
Doesn't listen, has no radio..... 2

33. Do you watch television?

D N.A. Blind. .... X  
No T.V. set..... 0 SC 56  
Yes, watch... 1 SC 549  
T V , but doesn't view. .... 2,9

Vol. 76 Code 0 = Registered

side card 75 = J = GLEYS sample

with L.A.

CARD L

Either

If permanently bedfast or housebound - code and go on to Qn. 38... X  
 If at this stage you know informant is working - code and go on to Qn. 35... Y  
 or Q 34 applies 0.1

sc 639

34. Is there a Local Authority Centre for the Physically Handicapped you could get to if you wanted to go? - I don't just mean a social club.

Yes..... Y ask (a)  
 Never heard of one/Don't know..... X on to  
 Know of one, can't get there..... 0 Q.35 next  
 "Not physically handicapped"..... 1 page  
 2  
 8  
 9 on to Q35

sc 640

If Yes (Y)

(a) Do you go to the Centre?

Yes, go to Centre..... 3 - ask (i)(ii)  
 No..... 4 - ask (iii)

sc 642

If Yes (goes to centre) (3)

(i) What do you do there?

10 1-6 mc.  
 9  
 x sc 643

(ii) How do you get there? [If nec check who provides transport]

ONE Transport provided by L.A ..... 1 sc  
 CODE Private transport..... 2 647  
 ONLY Public transport..... 3 ask (A)  
 Walk/Wheelchair..... 4

If public transport, walk/wheelchair (3, 4)

(A) Would you find it easier if the Local Authority were to supply transport to get you there and back?

Yes..... 5 go on  
 No..... 6 to 648  
 Other answers (specify)..... 7 Qn. 35

sc

If does not go to Centre (4)

(iii) Is this because you are not physically handicapped, or is there some other reason?

Not physically handicapped..... 0 sc 649  
 Other reason..... 1 - ask (a)

If other reason (1)

(a) Why don't you go there?

13 4, x 0 sc  
 1, 2, 7, 9 650  
 3-5, 8 mc

35. Do you go to any Clubs nowadays?

653

Yes..... (X) SC  
A - ask (a)  
No..... (0) - ask (b)

If Yes (A)

(a) What sort of clubs?

14

- |   |   |
|---|---|
| Old people/Silver Thread/D & J/etc.....         | 1 |
| Working mens/social/bingo.....                  | 2 |
| Womens Institute, Towns Womens Guild/Co-op..... | 3 |
| Church club (not OAP).....                      | 4 |
| Freemasons/ Toc H/Brit. Legion, etc. ....       | 5 |
| Sports (Tennis/bowls/billiards/etc ).....       | 6 |
| Disabled/Handicapped/blind... ..                | 7 |
| Youth Clubs.....                                | 8 |
| Others (specify).....                           | 9 |

654  
MC

CODE  
ALL  
THAT  
APPLY

If No (0)

(b) Is this because of your (disability) or are there other reasons?

Because of disability..... 15  
Other reasons... ..

(9) SC  
(Y) MC 659  
(X)

36. Is there anywhere you'd like to go, but can't simply because of your(disability)?  
[probe fully]

No, nowhere..... 16

(X) SC  
(0) - on to  
(1-9) Qn. 38  
(Y) MC  
(9) SC 660

37. Is this because your (disability) makes it hard for you to get there, or because once you're there, you can't get in?

CODE BOTH IF  
APPLICABLE

Hard to get there... 17  
Can't get in.....

(1) MC  
(2) MC 664  
(X) SC

TO ALL

38. When did you last have a holiday (spend at least a week away from home for pleasure)?

Within last year... .. 18.  
(Approx.) No of years ago. ..  
Too long ago to remember... ..

666  
0 sc  
1-8 sc  
Y - ask (b)  
9, x

If 3 years ago or less i.e. codes 0, 1-3 at Q38

(a) Did you or your family arrange for your last holiday or was it arranged for you by the local authority or another organisation?

Self or family..... 19  
Organisation (specify).....

667  
1 sc  
2 sc  
3, 4  
6, 9

[Ask if holiday enjoyed - no need to record answer].

GO ON TO QN. 39

If more than 3 years ago i.e. codes 4, 4-8 or 9 at Q38

(b) Has anybody offered you a holiday in the last 2 years?

Yes..... 20  
No..... 20  
x sc 668  
1 ask (1)(11)  
2 ask (111)

If offered holiday (1)

(i) Who offered to arrange a holiday for you?  
[Name of organisation]

21  
1, 9 sc  
2-5 MC 669

(ii) Why didn't you go?

22  
1-9 MC  
4, x sc  
672

GO ON TO QN. 39

If not offered holiday (2)

(111) Would you like to go away anywhere for a holiday or a break?

Yes..... 23  
No..... 23  
0, x sc  
1 ask A 676  
2 ask B

If yes (1)

(A) What stops you?

24  
1-9 MC  
4, x sc 677

If No (2)

(B) Why don't you want to go?

25  
1-9 MC  
4, x sc 678

39. Do you have any (other) hobbies now?

No.....26 : 0 sc 687  
 Yes...26 : 4 - ask (a)  
5

If Yes (5)

(a) What are your hobbies?

11-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-99	or 91
27	28	29	30	31	32	33	34	35	

11-79 MC  
81, xx SC

40. (Apart from hobbies mentioned) how else do you pass your time (when you're not working)?

Either  
 No spare time.....36 : 0 sc 688  
 Nothing else.....36 : X  
Y

or

11-79 MC  
81, xx SC

37 - 45

Punch the same as above

41. Have you had to give up anything you liked doing (in your spare time) because of your (disability)?

No.....46 : 0 sc 689  
 Yes (specify).....46 : Y  
X

If Yes(Y)

11-79 MC  
81, 91, xx SC.

47 - 55  
 Punch the same as above

690



Q6, code 1  
If Blind, Permanently bedfast or housebound -

go on to next section, and code .....  
We've been talking about getting about - or Q42 applies

Either (Y)

42. Do you yourself have a motor vehicle of any kind, which you drive?

- Have and drive ..... X
- Have, but doesn't drive ..... 0
- No vehicle ..... 1

700  
sc  
on to Q.43  
ask (a)

If has but doesn't drive, or no vehicle (0,1)

(a) Does anyone else (living here) have a motor vehicle which you (could drive, or) are taken out in regularly?

- Yes, can drive ..... 5
- Yes, taken out ..... 2
- No ..... 3

56  
sc  
ask (i)  
ask (ii)

If Yes, can drive or taken out (2,3)

(i) Whose vehicle is it? (relationship to subject)

- Husband/wife .... 5
- Child/Parent/Sibling ..... 6
- Friend/boarder ..... 7

sc  
ie code 2 at Q42(a)  
on to Q.43  
if uses  
On to next section if taken out  
ie code 3 at Q42

If No (4)

(ii) Can you generally get a lift if you want to go anywhere?

- Yes, generally ..... Y
- No ..... X

57  
On to next section  
sc

To all who have and drive a motor vehicle ie code X at Q42 or code 2 at Q42(a)

43. Check or ask what sort of vehicle it is? Is it a

- Invalid tricycle ..... Q
- Saloon/sports car ..... Y
- Estate car/van ..... X
- Motor bike/scooter ..... 0
- Other (specify) ..... 1

sc  
on to Q.45

PROMPT AS NECESSARY

44. Is it a standard model, or has it been adapted because of your (disability)?

- Standard model ..... X
- Adapted ..... 4

sc  
ask (a)

If adapted (5)

(a) Who paid for adapting it?

- Self or relative/friend ... 59
- Employer ..... 6
- Ministry of Health/Scottish Home and Health ..... 7
- Other (specify) ..... 8

sc

45. Do you have a disabled driver's car badge?

- Yes ..... 1
- No ..... 2

sc  
ask (a)

If no badge (2)

(a) Is this because you haven't applied for one, or because you have applied and been refused?

- Haven't applied ..... 3
- Been refused ..... 4
- Other (specify) ..... 5

60  
sc

ON TO NEXT SECTION UNLESS HAS INVALID TRICYCLE - WHEN ASK NEXT PAGE

CARD L

IF INVALID TRICYCLE - i.e. code y at Q43

46. Is your tricycle petrol driven, or electrically powered?

Petrol ..... 61 ..... (X) 1 SC  
Electrically powered ..... 61 ..... ( ) 2

47. What is the longest journey you have done in your tricycle on any one day?

No. of miles ..... (X) or 1-3 digits

62/63/64

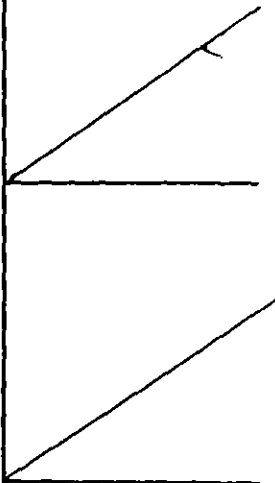
48. Have you ever been inconvenienced by not having a machine while your own tricycle was being repaired or maintained?

Yes ..... (X) 1 SC ask (a)  
No ..... 65 ..... ( ) 2 (b)

If Yes (1)

(a) For how long were you without a tricycle?

(b) Why were you not lent another tricycle?



49. Do you find there are any drawbacks because it is only a one-seater?

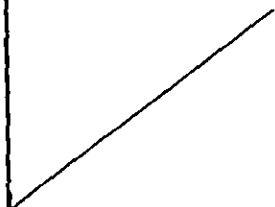
No ..... (Y) SC  
Yes (specify drawbacks) ..... (X)

If Yes (X)

(1-3) MC } 66  
( ) SC

50. Do you find there are any advantages because it's only a one-seater?

No ..... (4) SC  
Yes (specify advantages) ..... 67 ..... (5)



col's

CARD A. Serial 3-7.

INTRODUCE - I'd like to go on now to ask you something about the work you have done - but since education and training is tied up with this, can you tell me .....

51. How old were you when you left school (educational establishment) (completed full-time education)?

Never went to school .....  
 Left school aged .....  
 Still at school/university .....

8, 9.  
 340 s.c.  
 YY - ask (a)  
 XX or 1-2 digits  
 99? - on to next section  
 00

If never went to school (YY)

(a) Why was that? [If private tutor back-code Qn. 51 as age completed full-time education]

52. Did you get any recognised certificates, qualifications or articles?

Yes .....  
 No .....

9 s.c. 10  
 X - ask (a)  
 0 341

If Yes (X)

(a) What was the highest level at which you qualified?

UNIVERSITY DEGREE/MEDICAL/VET./DENTAL QUALNS. .... 1  
 Full membership of prof. inst. (incl. law, architecture, engineer) ..... 2  
 Diploma Technology/Humanities ..... 3  
 Teacher's Training/Cert. of Education ..... 4  
 S.R.N., S.C.M., Social Workers ..... 5  
 HND/HNC - (Higher National Dip. or Cert.) ..... 6  
 "A" level - university entrance ..... 7  
 OND/ONC (Ordinary National Dip. or Cert.) ..... 8  
 "O" level - General Schools, Matric. .... 9  
 City and Guilds ..... 10  
 R.S.A. or Commercial Certs. .... 11  
 Others (describe) ..... 12  
 13

CODE HIGHEST ONLY

342  
 11, 12.  
 s.c.

53. Did you complete a formal apprenticeship, lasting at least 3 years, in any trade?

Yes, formal apprenticeship .....  
 No, no formal .....

0  
 1 s.c.  
 2 } 344

54. Have you had any (other) training/experience on the job, or in the Forces, or in a Training Centre for a skilled or semi-skilled trade?

Yes .....  
 No .....

3  
 4 s.c.  
 5 } 345

55. Code from questions 52-54

Has qualifications/training ..... Y  
 No qualifications/training ..... X  
 and transfer to Qn. 60 page 32

56. Are you at present doing any work for which you are paid (any number of hours)?

Occupational Centre  
Working ..... 1 - go on to Qn. 77  
Not working ..... 2 - ask (a) 346

If not working (2)

(a) Why is this?

Retired (incl. permanently disabled over retirement age) ..... 3 - ask Qn. 57  
Housewife ..... 4 - on to Qn. 53 Page 23  
Off sick temporarily/temp. disabled ..... 5 - on to Qn. 67 Page 30 347  
Unemployed (can work if job available) ..... 6 - on to Qn. 72 Page 31  
Permanently disabled/unable to work again ..... 7 - ask Qn. 57  
IF coded 9, end card here. 9 - on to next section

PROMPT AS NECESSARY

IF RETIRED/PERMANENTLY DISABLED

57. How old were you when you gave up work altogether?

Never worked ..... 0 - ask Qn. 60  
or  
Yrs. XX, YY or 2 digits 15, 16  
S.C. 348

Check back to Qn. 8a. If disabled after retirement go on to Qn. 91 next section - otherwise ask Qn. 58.

58. What job were you doing then (when you gave up altogether)? [Probe as usual on OCCUPATION]

13, 5-11, 16, 17, X S.C. 350  
17, 18.

59. Was this the sort of work you had been doing most of your life?

Yes, same sort of work ..... 1 S.C. 352  
Did many different jobs ..... 2  
No ..... 3 - ask (a)

If No (3)

(a) Did your (disability) have anything to do with your changing your usual sort of work?

Yes, due to disability ..... Y S.C.  
No, other reason ..... X O 353

19

CARD 9.

60. Did your (disability) have anything to do with your giving up work altogether when you did (never having worked)?

Yes ..... 1 ask (a)  
 (b)  
 No ..... 2 355

If Yes (1)

(a) Can you tell me why? Was it because there were (would be) difficulties:

PROMPT i) Actually getting to your work place? ..... 3  
 ii) Doing the work itself? ..... 4 MC  
 iii) Having to work the number of hours they wanted you to? ..... 5  
 add - iv) Any other reason for giving up altogether (not working)? ..... 6 356  
 (specify) ..... 7-9  
 (4) sc.

20.

Omit for those never worked ..... Either (X)

(b) At what age would you have retired if you had your choice? or

After retirement age .... age ..... 1 361  
 Until retirement age ..... 2 sc. 21.  
 Indefinitely, as long as possible ..... 3  
 Other answers (specify) ..... 4  
 ..... 5

61. Have you ever been registered as disabled with the Ministry of Labour for employment purposes?

Yes, registered ..... (X) 1 sc. 362  
 No, not registered ..... 2 ask (a)

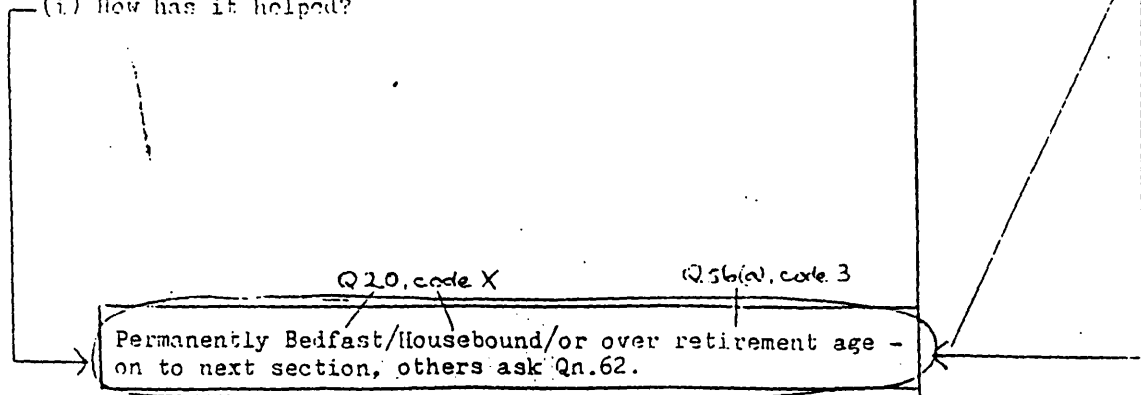
If Yes, registered (1)

(a) Has this helped in any way?

Yes, helped ..... (3) 1 sc. ask (i)  
 No ..... 4  
 ..... 5 363

If Yes, helped (3)

(i) How has it helped?



IF PERMANENTLY DISABLED AND UNDER RETIREMENT AGE

62. Would you be willing, subject to your doctor's agreement, to take a job in a sheltered workshop if it were available?

Yes .....  S.C. ask (a)  
No .....  ask (b) 364

If Yes (Y)

(a) If you are really keen, I might be able to arrange for someone from the Ministry of Labour to call and see you about it. Would you like me to try, or would you rather think about it a bit more?

Like someone to call .....  S.C. 1 - go on to next section 365  
Think about it .....  2 - section

23

If No (X)

(b) Why is that?

3,9 S.C.  
4-8 M.C.  
366

GO ON TO NEXT SECTION

IF HOUSEWIFE

63. How old were you when you gave up work to become a housewife? [last occasion]

370  
Either  S.C. 24  
Never worked .....  - ask (a) 25  
or  
Yrs. 44 or 2 digits S.C.

Check back to Qn. 8a - if disabled after giving up work ask Qn.64  
- if disabled before/same time as giving up work ask Qn.65

If Never worked (0) - ask, or code if obvious

(a) Was this because of your present (disability) or were there other reasons?

Disability .....  371 over 60 end section, under 60.  
Other reasons .....  X - ask Qn.64

26

64. You say you last worked (quote from Qn.63) (never worked). Has your (disability) stopped you from going back to work (starting work) since then?

Yes .....  1 ask (a) - next page  
No .....  2 on to next section

372 27

Qn. 64 (Contd. ...)

If would have returned to work (1)

(a) What stopped you? Would your (disability) have made it difficult for you to

- PROMPT - i) get to your workplace? .....
- ii) do the actual work you were used to? ...
- iii) work the number of hours an employer would want? .....
- CODE ALL add iv) or for some other reason, connected with your (disability)? .....
- THAT APPLY (specify)

(X) sc 28.  
 MC  
 3 If over  
 4 60, end section.  
 5 If under  
 6 60, ask Qn. 66  
 375

If disabled before giving up work

65. Did your present (disability) cause you to give up work when you did?

- Yes ..... 1 ask (a)
- No ..... 2

If Yes (1)

(a) What job were you doing then [occupation]?

IF NOW 60 OR OVER - END SECTION

If bedfast/housebound/too disabled to work ... code 'No' to Qn. 66

Otherwise ask

66. Would you be interested in getting a job again now?

- Yes, interested ..... (X) 1 - ask (a)
- No, /not immediately ..... 2 - on to next section

29

(X) sc. 379  
 1 - ask (a)  
 2 - on to next section

If interested in getting a job (1)

(a) Have you tried to get a job?

- Yes tried ..... 3 - ask (i)
- No, not tried ..... 4 - ask (ii)

sc. 380  
 3 - ask (i)  
 4 - ask (ii)  
 5

If Yes, tried (3)

(i) Why do you think you haven't been successful?

Either blank  
 or (y) sc. 381

If Not tried (4)

(ii) Why haven't you tried?

ON TO NEXT SECTION

382  
 6.7 MC  
 9 sc.  
 30

ON TO NEXT SECTION

IF OFF SICK TEMPORARILY

67. Are you off sick now because of your (name disability), or for some other reason?

Disability..... 1 s.c. 31  
Other reason ..... 2 on to Qn.70 384

68. How long have you been off sick [this time]?

Less than 1 week ..... 0, y, x s.c. 32  
\_\_\_\_\_ yrs. \_\_\_\_\_ mths. \_\_\_\_\_ wks 1-9 385

weeks only required if less than 3 months  
months only " " " " 3 years

69. When do you expect to be able to start work again?

X, 1-5 s.c. 33  
386

70. Are you paid anything by your employer while off sick?

Yes, paid by employer ..... 4 on to 71 or 77  
No, unpaid ..... 1 on to Qn.77 387  
2

If Sick (unpaid) i.e. code 2 at Q.70

71. When you start working again, will you be going back to the same firm?

Yes, same firm ..... 3 s.c. 34  
No, different firm ..... 4 ask(a)  
Don't know/expect to ..... 5 on to 388  
6 on to Q.77

If yes, same firm (3)

(a) Will you be going back to the same kind of work?

Yes ..... 7 s.c.  
No ..... 8 on to Qn.77  
9 ask (i) 389  
on to Q.77

If not going back to same kind of work (8)

(i) Why will you be changing the sort of work?



TO ALL UNEMPLOYED

72. How long have you been unemployed?

Less than 1 week .....  
\_\_\_\_\_ yrs. \_\_\_\_\_ mths. \_\_\_\_\_ wks.

weeks only required if less than 3 mths.  
months " " " " " 3 yrs.

0.4 x 35  
1-9 390

73. Did you leave your last job because of your (disability) or was there some other reason?

Yes, because of disability.  
No .....

s.c.  
x on to Q75  
1 ask(a)  
2 391 36

If Yes, because of disability (1)

(a) Did you yourself decide to leave, or did some one else suggest it? (specify who suggested)

Decided myself .....  
Suggested by employer or agent ...  
" " doctor .....  
" " other (specify) .....

3  
4 M.C 37  
5  
6  
9 s.c. 392

74. How long had you been in your last job?

Less than 1 month .....  
\_\_\_\_\_ yrs. \_\_\_\_\_ mths.

[months only required if less than 3 years]

0.4 x s.c. 38  
1-10 395

75. Are you registered as unemployed with the Ministry of Labour (Employment and Productivity)?

Yes, special register for disabled persons .....  
Yes, ordinary register .....  
No .....

s.c.  
x 39  
1 396  
2  
3 - ask(a)

If not registered (3)

(a) Why not?

TO UNEMPLOYED - OR THOSE SICK NOT RETURNING TO PREVIOUS JOB

76. Do you think you will (would) have difficulty getting another job because of your (disability)? [Probe for comments and reasons, reminding informants we are interested only in difficulties arising because of disability].

0.4 s.c. 40  
1  
2-12 M.C 397

DNA: x  
NA: y

TO ALL WORKING, OFF SICK OR UNEMPLOYED

[If unemployed, ask of last job]

77. How many hours a week do (did) you work? [paid for]

Either  
xx,yy,xy  
or  
1 or 2 digits

on to Q.83

41, 42

401

78. Who do you work for? - Are you:-

- PROMPT AS NECESSARY
- Self-employed ..... X
  - in Ordinary employment- Civil Servant ..... 0
  - Local Authority ..... 1 S.C.
  - Nationalised Industry/Hospitals ..... 2
  - Private Co. or employer ..... 3
  - in Sheltered employment- Remploy ..... 4 43
  - Local Authority ..... 5
  - Blind Association ..... 6 402
  - Voluntary Associations ..... 7
  - Others (specify) ..... 8
  - ..... 9
  - ..... 4

79. What is your actual job? [Probe as usual on OCCUPATION]

404  
2 digits  
2 DIGITS  
N.A.=X

1,3,5-11 S.C.  
16,17,X

44, 45.

80. CHECK BACK TO QN.55 - If Code Y - some qualification ask Qn.81  
If Code X - no qualification ask Qn.83

INTRODUCE - You mention you have (quote qualifications)

81. Are you using any of your qualifications/training in your present job (last job if not now working)?

- Yes, using (some) qualns./training ..... X
- No, not using any qualns./training ..... 1

S.C.  
ask (a)  
405

If using (1)

-(a) Have you ever had a full-time job where you have NOT used any of your qualifications (training)?

- Yes ..... 3
- No ..... 4 - on to Qn.83

46

82. What made you take a job where you weren't using your qualifications (training)?

X  
2,5 S.C.  
1,3,4 M.C.  
6,9  
N.A.=X

407

47

CARD 9.

83. Have you ever had difficulty getting a <sup>Suitable</sup> job because of your (disability)?

Yes .....  1 s.c. 48  
 No ..... 2 409  
 Never tried/not because of disability ..... 3

84. Talking about work in general, not any particular job. Does your (disability) limit or affect

Either  s.c.

a) The number of hours you can work? Yes 49  9 s.c. 410  
 No 49  11

b) The distance you can travel to work? Yes 50  1 s.c. 411  
 No 50  2 3

c) The ~~choice~~ <sup>chance</sup> of joining a pension scheme? Yes .....  4 s.c. 412  
 No 51  5 X  
 D.K. .... 6

d) The choice of jobs if you wanted a change? Yes .....  7 s.c. 413  
 No 52  8  
 D.K. .... 9

85. Are there any (other) disadvantages with regard to working arising from your (disability)?

No .....  0 s.c. 414  
 Yes (specify) 53  1 X  
 1-5 M.C.  
 7.8

Q 56(a), code 6  
 (UNEMPLOYED GO ON TO NEXT SECTION)

To all Employed or Temporarily sick

86. How long does it take you to get to work from where you live?

Works at home/no journey ..... 54  0 on to next section 417

Varies/work not in same place ..... 1 s.c.  
 Takes less than 5 minutes ..... 4  
 Takes this number of minutes 55/56/57  1-3 420

87. How do you usually get to work? (usual means of transport)

SINGLE CODE [ Walk only (no other transport) .....  1 s.c.  
 Wheelchair only (no other transport) .....  2 421

CODE ALL THAT APPLY [ Bicycle/pedal car ..... 3  
 Motor cycle/scooter, etc. ..... 58 4  
 Private car/van etc. as driver ..... 5  
 Private car/van etc. as passenger ..... 6  
 Public transport ..... 7 M.C.  
 Firm's transport ..... 8  
 Invalid tricycle ..... 9  
 Other (specify) ..... 0

88. Do you have any particular difficulties getting to work because of your (disability)?

Yes .. 59  
No .....

Y S.C. ask (a)  
 X  
 I 425

If Yes (Y)

(a) What is (are) the difficulty(s)?

89. You get to work by (method Qn.87) - is there some other means of transport you would rather use, but can't because of your (disability)?

Yes .. 60  
No .....

Y S.C. ask (a)(b)  
 X  
 I 426

If Yes (Y)

(a) What form of transport would you like to use?

Car .....  
Bus .....  
Train ..... 61  
Other (specify) .....

0  
 1  
 2  
 3 MC. 427  
 4  
 5

(b) Why can't you use it?

62

7,8,9 S.C. 429

90. How much a week does it cost you to travel to work? Either

Nil .....

or 1-3 digits sh. per week

63/64/65

0  
 X S.C. 432  
 Y

Check this is actual cost to informant - i.e. any refunds or subsidies from employers are deducted

{ col 77 = 2 = Cyn...  
col 78 = 2 = special sample  
eps 1-4

\*

Can I just ask you about any household chores you might do -

91. Who does most of the household chores, I mean housework, shopping and cooking?  
 [If "shared" treat as 'other person'] Self does most [at least 2 items] ... 8  
 Other person, (specify) ..... 9

If other person (2)

(a) Is this because of your (disability), or would (other person) be doing it anyway?

Because of disability ..... 9  
 Would do it anyway ..... 10

Introduce - I'd like to ask about cooking, shopping, housework and laundry arrangements. Can we start with cooking -

92. Do you do any of the cooking?

If No (X)

(a) Is this because of your (disability) or would someone else be doing it anyway?

Disability ..... 1  
 Someone else would do ..... 2

If Yes (Y)

(b) Do you do

RUNNING PROMPT

all or most of the cooking ..... 3  
 about half ..... 4  
 or only a little cooking? ..... 5

Introduce - There are some things connected with cooking that other people have said they find difficult. I've got a list here.

93. Does your (... disability ...) make it hard for you to

INDIVIDUAL PROMPT

- Open tins/cans ..... 1
- Open screw top bottles ..... 2
- Turn on water taps/cooker ..... 3
- Cut things up ..... 4
- Beat eggs, stir or mix things ..... 5
- Lift pans from top of stove or oven ..... 6
- Bend down to oven ..... 7
- Stand to prepare food or at cooker ..... 8
- Reach up to shelves ..... 9
- Peel, scrape, or prepare vegetables ..... 10
- Anything else you find difficult when cooking (specify) ..... 11
- Nothing difficult ..... 0

If any difficulty, and does most or half cooking - go on to Qn.95  
 If any difficulty, and does only a little cooking - ask Qn.94

Code 5  
 or Q 92(b)

230  
 (Y) - Qs 92-106 blank  
 (1) S.C.  
 (2) - ask (a)  
 (1-6,8,9) S.C. (Y, X) oc  
 (7) MC  
 (8) S.C.  
 (3) S.C.  
 (4) go on to next section  
 (unless Q107 applies)

235  
 S.C.  
 (Y) - ask (b)  
 (X) - ask (a)  
 (8) Qs 93-97 blank

236  
 S.C.  
 (1) on to Qn.98  
 (2)

237  
 S.C.  
 (3)  
 (4)  
 (5)  
 (9)

(X) S.C. Qs 94-95 blank  
 (1) MC.  
 (2)  
 (3)  
 (4)  
 (5)  
 (6)  
 (7)  
 (8)  
 (9)  
 (10)  
 (11)  
 IF any coded see note below  
 (0) S.C. - on to Qn.96

Codes 1-11  
 or Q 93.

Codes 3,4 or 9  
 or Q. 92(b)

94. Could you get yourself a snack meal, say boil an egg, or heat a tin of soup, or something like that, if you had to?

250  
Yes (with or without difficulty) ... 1 s.c. 16  
No ..... 2 - ask (a)

If No (2)

(a) Could you get yourself a cup of tea or coffee, even though it might be difficult?

251  
Yes ..... 3 s.c. 17  
No ..... 4

95. Are there times when you have to do without a proper meal because you can't get it yourself, and there is no-one else to get it for you?

252  
Yes ..... 5 s.c. 18  
No ..... 6 - ask (a)

If Yes (5)

(a) Does this happen  
RUNNING Very often, say 2 or 3 times a week .....  
PROMPT Quite often, say once a week .....  
Less often than that?(specify) .....

253  
2 s.c. 19  
1  
0  
3  
4

TO ALL

96. Do you have any gadgets specially designed to help with preparation of food?

254  
Yes ..... 1 s.c. 20  
No ..... 2 - ask (a)

If Yes (1)

(a) What are they?

97. Have any alterations or additions been made to the furniture, fittings or layout of the kitchen to make it easier for you to manage with your (disability)?

255  
Yes ..... 1 s.c. 21  
No ..... 2 - ask (a)

If Yes (1)

(a) What has been done?

256-262  
1-5 m.c. 22  
8,9

Q. 99-100 blank

98. Do you do any of the household shopping?

All delivered -  s.c.  
 Yes .. 23 ..  - ask (b)  
 No .. 23 ..  - ask (a)

If No (2)

(a) Is this because of your (disability) or would someone else be doing it anyway?

Disability ..... 264 ..  s.c.  
 Someone else would do .. 24 ..  go on to Qn.101

If Yes (1) or All delivered (c)

(b) Do you do

RUNNING  
 PROMPT

All or most of the shopping ... 265 ..  s.c.  
 About half the shopping .. 25 ..   
 or Only a little shopping? .. 25 ..

99. Do you have any difficulty

a) Carrying the shopping?

No ... 26 ..  s.c. 266  
 Yes .. 26 ..

INDIVIDUAL  
 PROMPT

b) Walking or getting to and from shops?

No ... 27 ..  s.c. 267  
 Yes .. 27 ..

c) Any difficulties other than carrying and getting to shops?

No ... 28 ..  s.c. 268  
 If Yes (specify)

100. There are some things which help people with shopping ....

a) Do you use a basket on wheels?

Yes .. 29 ..  s.c. 269  
 No ... 29 ..

INDIVIDUAL  
 PROMPT

b) Do you have a refrigerator?

Yes .. 30 ..  s.c. 270  
 No .. 30 ..

c) Do you have any tradesmen (apart from the milkman) delivering, or travelling shops?

Yes .. 31 ..  - ask (a)  
 No .. 31 ..  s.c. 271

If delivered or travelling shops (3)

(a) Do you get  
 RUNNING  
 PROMPT

Most of your household shopping delivered ..... 32 ..  s.c. 272  
 About half of it ..... 32 ..   
 or Only a few items delivered? ..... 32 ..

CARD D

101. Do you do

CODE  
ALL  
THAT  
APPLY

- i) all the washing yourself [here or at laundrette]?
- ii) some of the washing yourself [here or at laundrette]?
- iii) do you send it all to the laundry?
- iv) do you send some of it to the laundry?
- v) does someone else do any of your washing for you [including laundrette]?

Q102 blank  
1 - ask (a)  
2 MC.  
3 - ask (b)  
4  
5 - ask (c)(d)  
273-275

If does any washing (1,2)

(a) Do you have difficulty when you are doing the washing because of your (disability)?

[Include difficulty carrying to laundrette]

Yes, some difficulty 34  
No

276  
6 sc  
7  
8 sc 84

If does all, on to Qn.102  
If some only - ask (b) or (c)

code 1 at Q101

If sends to laundry (3, 4)

(b) Do you send to the laundry because of your (disability), or would you send it to the laundry (they do it) anyway?

Sends any/more because of disability 35  
Would send anyway

sc.  
7 - ask (i) 85  
8  
277

If any or more sent because of disability (7)

(i) How much extra do you have to spend on laundry because of your (disability)?

Check this is extra (per week)

Blank or blank  
1 or 2 Ds. 1 or 2 Ds.  
38/39

278 279

If all washing sent to laundry - on to Qn.103

code 3 at Q101

If someone else does any (all) (5)

(c) Who does it?

281-283  
40

sc.  
1-6, 8, 9  
7 MC.  
8 sc.  
9

(d) Is this because of your (disability), or would (person) be doing it anyway?

Because of disability 41  
Would do it anyway

1  
2 sc. 284  
3

If does all/some washing - codes 1 or 2 at Q.101

If all washing done by other person - on to Qn.103

code 5 only at Q.101

102. Do you have any of the following things to help with the washing?

INDIVIDUAL  
PROMPT

- (i) An electric iron
- (ii) A washing machine
- (iii) Spin/tumbler drier or electric drying cabinet

CODE ALL  
THAT APPLY

- or (iv) Use a laundrette?
- None of the above

sc.  
4  
5  
6 MC.  
7  
9 sc.

285-288



103. Do you do any of the housework?

289  
Yes . 4.3 . (1) ask (a) ~~18~~  
No . . . . . (2) ask (b)

If Yes (1)

(a) Do you do

RUNNING  
PROMPT

290  
all or most of the housework . . . . . (3)  
about half the housework . . . . . (4) s.c. ~~19~~  
or only a little housework? . . . . . (5) - ask Qn. 104  
44 (6)

If No (2)

(b) Is this because of your (disability) or would someone else do it anyway?

291  
Disability . . . . . (7) on to next page  
Someone else would do it . . . . . (8) ask (i)(ii)  
45 (9) on to next page

If disability (8)

(i) Who does it?

292-294  
46  
(1-6,8,9) s.c. ~~19~~  
(7) M.C. ~~19~~  
(8) s.c. ~~19~~

(ii) Are the arrangements satisfactory, or would you like more help?

295  
Satisfactory . . . . . (7) s.c. ~~19~~  
Like more help . . . . . (5) on to next page  
47 (6)

104. Do you have any special difficulties with housework due to your (disability)?

296  
Yes . 4.8 . (X) s.c. ~~19~~  
No . . . . . (1) ask (a)  
(2)

If Yes (1)

(a) Would you like (more) help with the housework, or do you manage all right?

297  
Like (more) help . . . . . (3) s.c. ~~19~~  
Manage all right . . . . . (4) ~~19~~  
49 (5)

105. Do you use any of the following to help you with housework?

INDIVIDUAL  
PROMPT

CODE ALL  
THAT  
APPLY

- a) Vacuum cleaner or carpet sweeper . . . . . (1)
- b) Vacuum cleaner attachments for dusting . . . . . (2)
- c) Squeezy/mop with long handle . . . . . (3) 50
- d) Electric polisher . . . . . (4) M.C. ~~19~~
- e) Any other equipment to help with housework (Specify) . . . . . (5)

298-302  
None of the above . . . . . (9) s.c.

106. Have any alterations or additions been made to furniture, household fittings or household equipment to make it easier for you to do your housework?

303  
Yes . 5.1 . (X) s.c.  
No . . . . . (1) ask (a)  
(2)

If Yes (1)

(a) What has been done?

IF INFORMANT HAS DEPENDENT CHILDREN UNDER 12 YRS. ASK QN.107, OTHERWISE GO ON TO NEXT SECTION.

To all WOMEN with dependent children under 12 years old

107. Because of your (disability) do you have any special difficulty in taking care of the children yourself?

Yes ... 52 ... 1 ask (a)-(e)  
No ..... 52 ... 2 go on to next section

304

If Yes (1)

How do you manage about [ask (a)-(e)]

(a) Feeding and getting their meals - Can you do it yourself

Without difficulty ..... 53 ... 0 s.c.  
Only with difficulty ..... 53 ... 4  
or Does someone else have to do it? ..... 5-9 M.C. #4  
(specify who) y

305-307

(b) What about washing and bathing them, or seeing that they keep themselves clean? Do you have any trouble with this because of your (disability) or can you manage alright?

Have trouble ..... 54 ... 3 s.c. ask (i) #9  
Manage ..... 54 ... 4

310

If has trouble (3)

(i) How do you cope with this? [Specify who if done by someone else]

55 ... 4-9 y M.C. #20

311-313

(c) Getting them dressed (and off to school) - can you manage this alright, or does your (disability) make it difficult?

Manage alright ..... 56 ... 5 s.c.  
Disability causes trouble ..... 56 ... 6 - ask (i) #25

315

If trouble (6)

(i) Can you tell me how you cope?

57 ... 4-9 y M.C. #28

316-318

(d) Do you feel you can't play with them enough, or share their leisure, because you have (disability), or doesn't it make any difference?

Can't play/share leisure ..... 58 ... 7 s.c. #31  
Makes no difference ..... 58 ... 8

320

(e) Are there any other ways in which you feel your (disability) prevents your doing all you want to to care for them, and make them happy?

Yes ... 59 ... X 1 ask (i)  
No ..... 59 ... 2 #32

If Yes (1)

(i) Can you tell me what you think they lack because of your (disability)?

321

END OF CARD D

HOUSING can make a big difference to whether people can get about the house, so I'd like to ask you about this.

108. How old is this house? Pre 1914 ..... 1  
 [If dwelling built-on - age of Inter-war (1919-1945) ... 2 sc. 8  
 part lived in by this household] Post war (after 1945) ... 3

109. How long have you lived at this address? 0, y, x or 1-2 digits yrs. 9, 10. 212

110. Type of accommodation

L.A. Old people's flat/bungalow (any accommodation with warden) ..... Y  
 L.A. Old people's flat/bungalow/bedsitter/one bedroom ..... X  
 L.A. purpose built dwelling for handicapped people ..... 0  
 Purpose built (Vol. Agency) flat for old or handicapped ... 1 213  
 Purpose built (Vol. Agency) house for old or handicapped ... 2  
 Other flat in block/maisonette ..... 3 sc. 11, 12  
 Self-contained flat in house ..... 4  
 Room(s) in house (not self-contained) or lodging house (no service) ..... 5 - ask (a), (b)  
 Bungalow, one-storeyed cottage, or duplex, prefab., etc. ... 6  
 Whole house/cottage (more than one storey) ..... 7  
 Non-permanent dwelling - caravan/tent etc. (not prefab.) ... 8  
 Hotel/boarding house/hostel (some service) ..... 9  
 Others (specify) ..... 10  
 11  
 12

y, x, 0, 1-9 - Col. 11  
 10, 11, 12 :- Col. 12

If part of house (5)

(a) How many other households live at this address? ..... x or 1-3 digits 214 13 14 15  
 (b) Are any members of these other households related to you? If so, state relationship.

No relations ..... 0 216 sc. 16  
 9, x

Relationship \_\_\_\_\_

111. How many rooms do you have for the use of your household? ..... x or 1-2 digits 218 17 18

exclude bathroom, w.c. and kitchen unless it is used to eat one sit-down meal in regularly. Any rooms not used because house too big, uninhabitable or inaccessible should be included; rooms shared as a right are included.

112. Are there any rooms you can't get to and use because of your (disability)? sc. 219  
 Yes ..... Y - ask (a)  
 No ..... X  
 D.N.A. - Bedfast ..... 0  
 1

If can't use any rooms (Y)

(a) Why can't you use them?

CODE ALL THAT APPLY

Stairs ..... 2 220 mc  
 Doors too narrow for wheelchair ..... 3  
 Other reasons (specify) ..... 4 sc.  
 9  
 5 mc

113. In which room do you spend most of the day (time when you're at home), [for housewives add - "apart from cooking and housework"]?

- ONE Living room ..... 1  
 CODE Bedsitter ..... 2  
 ONLY Bedroom ..... 3  
 Kitchen ..... 4  
 5

223  
 sc. 20

114. How do you heat (room named)?

If different heating summer/winter code both, but ignore emergencies only

- Central heating ..... 1  
 Solid fuel fire/heater ..... 2  
 CODE Electric fire/heater/storage ..... 0  
 ALL Gas heater ..... 1  
 THAT Electric floor-warming ..... 2  
 APPLY Oil heater ..... 3  
 Cooker/boiler/"non" heating appliance ..... 4  
 Other (specify) ..... 5

224  
 sc.  
 mc 21

115. Do you always sleep in the bedroom, or do you sometimes sleep in the living room? [Living rooms converted permanently to bedrooms count as bedroom].

- D.N.A. Bedsitter (One room only) ..... 1  
 Always sleep in bedroom (incl. room converted) ..... 2  
 Sometimes (always) in living room ..... 3

229  
 sc.  
 - ask (a)

If Sometimes (always) in living room (3)

(a) Is this because of your (disability), or is there another reason?

- Disability ..... 4  
 Other reason (specify) ..... 5

22  
 230  
 sc.

Can you tell me something about the amenities you have here?

116. Do you have

- CODE ALL (Mains) Electricity laid on ..... 7  
 THAT APPLY (Mains) Gas laid on ..... 8  
 Neither gas nor electricity ..... 9

231  
 sc.  
 mc 23  
 sc

117. Do you have a kitchen (whatever it's called)?

Establish if necessary whether sole use or shared with other households

- Sole use of kitchen ..... 1  
 Shared use of kitchen ..... 2  
 No kitchen ..... 3  
 D.N.A. Hotel/boarder ..... 4

233  
 sc.  
 ask (a)

If no kitchen (3)

(a) Do you have any cooking facilities (able to boil at least one saucepan)?

- Some cooking facilities ..... 6  
 No cooking facilities ..... 7

24  
 234  
 sc.

# CARD 1 STARTS

GREEN

HOUSING can make a big difference to whether people can get about the house, so I'd like to ask you about this.

108. How old is this house? Pre 1914 ..... 24  
Inter-war (1919-1945) ..... 25  
Post war (after 1945) ..... 36 8  
210

[If dwelling built-on - age of part lived in by this household]

109. How long have you lived at this address? 0, y, x  
0-1-2 digits yrs.

110. Type of accommodation

L.A. Old people's flat/bungalow (any accommodation with warden) .....	Y12	
L.A. Old people's flat/bungalow/bedsitter/one bedroom .....	X13	
L.A. purpose built dwelling for handicapped people .....	014	s.c. 212
Purpose built (Vol. Agency) flat for old or handicapped ...	1	
Purpose built (Vol. Agency) house for old or handicapped ..	2	11, 12
Other flat in block/maisonette .....	3	
Self-contained flat in house .....	4	
Room(s) in house (not self-contained) or lodging house (no service) .....	5	ask (a) (b)
Bungalow, one-storeyed cottage, or duplex, prefab., etc. ...	6	
Whole house/cottage (more than one storey) .....	7	
Non-permanent dwelling - caravan/tent etc. (not prefab.) ...	8	
Hotel/boarding house/hostel (some service) .....	9	
Others (specify) .....	10/10	

y-9 col 11  
10, 11, 12 col 12

If part of house (5)

(a) How many other households live at this address? 9 = 9 in main 214  
13 UNITS

(b) Are any members of these other households related to you? If so, state relationship.

No relations ..... 0 s.c. 14

Relationship \_\_\_\_\_

111. How many rooms do you have for the use of your household? 9 = 9 in main 218  
15 UNITS

[Exclude bathroom, w.c. and kitchen unless it is used to eat one sit-down meal in regularly. Any rooms not used because house too big, uninhabitable or inaccessible should be included; rooms shared as a right are included.]

112. Are there any rooms you can't get to and use because of your (disability)?

Yes .....	Y	s.c. ask (a) 217
No .....	X	
D.N.A. - Bedfast .....	0	

16

Can't use any rooms (Y)

(a) Why can't you use them?

CODE ALL THAT APPLY	Stairs .....	1	n.c.
	Doors too narrow for wheelchair .....	2	n.c.
	Other reasons (specify) .....	3	n.c.
		4	n.c.

220, 1, 2

In which room do you spend most of the day (time when you're at home), [for housework - "apart from cooking and housework"]?

- ONE Living room .....
- CODE Bedsitter .....
- CODE Bedroom .....
- ONLY Kitchen .....

~~1~~ 223  
 2 s.c. 17  
 3  
 4  
 5

114. How do you heat (room named)?

If different heating summer/winter code both, but ignore emergencies only

- Central heating .....
- Solid fuel fire/heater .....
- CODE Electric fire/heater/storage .....
- ALL Gas heater .....
- THAT Electric floor-warming .....
- APPLY Oil heater .....
- Cooker/boiler/"non" heating appliance .....
- Other (specify) .....

~~1~~ s.c.  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 0  
 1  
 2  
 3  
 4  
 5  
 224-8  
 H.C. 18

115. Do you always sleep in the bedroom, or do you sometimes sleep in the living room? [Living rooms converted permanently to bedrooms count as bedroom].

- D.N.A. Bedsitter (One room only) .....
- Always sleep in bedroom (incl. room converted) .....
- Sometimes (always) in living room .....

~~1~~ s.c. 229  
 2  
 3 - ask (a)

Sometimes (always) in living room (3)

(a) Is this because of your (disability), or is there another reason?

- Disability .....
- Other reason (specify) .....

19  
 4  
 5  
 6  
 7  
 8  
 9  
 0  
 1  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 0  
 s.c. 200

Can you tell me something about the amenities you have here?

116. Do you have

- CODE ALL (Mains) Electricity laid on .....
- THAT APPLY (Mains) Gas laid on .....
- Neither gas nor electricity .....

~~1~~ s.c. 231  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 0  
 1  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 0  
 s.c. 20

117. Do you have a kitchen (whatever it's called)?

Establish if necessary whether sole use or shared with other households

- Sole use of kitchen .....
- Shared use of kitchen .....
- No kitchen .....
- D.N.A. Hotel/boarder .....

~~1~~ s.c.  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 0  
 1  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 0  
 21

No kitchen (3)

(a) Do you have any cooking facilities (able to boil at least one saucepan)?

- Some cooking facilities .....
- No cooking facilities .....

~~1~~ s.c. 22  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9  
 0

118. Do you have a fixed bath? [Include bath fitted in kitchen]

[Establish if necessary whether sole use or shared with other households]

Sole use of fixed bath .....  
Shared fixed bath .....  
No fixed bath .....

1  
2  
3 } s.c. 25  
235

119. Do you have a piped hot water supply inside the dwelling?

[Check if necessary whether shared]

Sole use of piped hot water .....  
Shared piped hot water .....  
No piped hot water .....

4  
5  
6 } s.c. 26  
236

120. What about cold water. Do you have piped cold water inside the dwelling?

[Check if necessary whether shared]

Sole use of piped cold water .....  
Shared piped cold water .....  
No piped cold water .....

7  
8  
9 } s.c. 27  
237

121. Do you have a w.c. (flush toilet)?

[Check if shared]

Sole use of w.c. ....  
Shares w.c. with other h/ds. ....  
No w.c. ....

1  
2  
3  
4 } s.c. 27  
238  
ask (a)-  
(c)

[If no w.c., substitute "toilet" or if known, earth/chemical closet, etc. for (a)-(c)]

(a) Is there an indoor w.c./toilet?

Yes, indoor .....  
No, outside only .....

[2 w.c.'s, 1 in, counts as Yes]

Y  
X  
9 } s.c. 28  
239

(b) During the day do you have to go up or downstairs to use a w.c./toilet?

[Irrespective of whether inside or out] ONE CODE ONLY

Yes, up or downstairs .....  
No, same level (inc. 1 or 2 steps) .....  
D.N.A. - uses commode, etc. ....

1  
2  
3 } s.c. 29  
240

(c) During the night do you have to go up or downstairs to use a w.c./toilet?

[Irrespective of whether inside or out] ONE CODE ONLY

Yes, up or downstairs .....  
No, same level (inc. 1 or 2 steps) .....  
D.N.A. - uses commode, etc. ....

4  
5  
6  
Y } s.c. 241  
241

If outside, or stairs (X, 1, 4)

(i) Do you find this (having to go outside/up and down stairs) -

RUNNING PROMPT

Very inconvenient .....  
Sometimes inconvenient .....  
or are you satisfied?.....

7  
8  
9  
0 } s.c. 242  
242

CARD H.

FOR THOSE SCORING 0 ON THE TESTS ASK G ONLY

Some people have had alterations made to the house to make it easier for them to get around. They might not be needed in your case, but may I just check?

122. Have you had any of the following fittings made because of your (disability)?

On each line except G.

Fitting	Fitted?		If Yes (2) a) How much did it cost you (your family)?			If paid i) Was this full or part cost?		If free or part cost ii) Who paid (the rest)?	
	No	Yes	£	s.	Free	Full	Part		
A) Bannister rails?	sc 34 (1 y 2) 250		x.4 1-9 s.c.		35 0	36 (3 5 4) s.c.		sc (6-9) 0	
B) Replaced coal fires with something easier?	37 1 2 251				38 0	39 3 4			
C) Had handrails/handles fitted to i) bath ii) toilet	40 252 1 2 1 2 253 43				41 0 44	42 3 4 3 45			
D) Widened or reversed doorways?	254 1 2 46				47 0	48 3 4			
Remind - because of (disability)	255								
E) Added/converted i) a lavatory ii) a bathroom	49 1 2 1 2 256 52				50 0 53	51 3 4 3 4 54			
<u>Wheelchair users only</u> F) Installed ramps/paths?	sc 257 (1 2) D.N.A. X 55				56 0	57 3 4			
<u>TO ALL</u> * G) Has anything (else) been done to make it easier to do things or get about? (Specify below)	258 1 2 58				59 0	60 3 4			
H)	259 1 2 61				62 0	63 3 4			
J)	260 1 2 64				65 0	66 3 4			

END OF CARD H.

\* Line G Col 78 = Special Sample  
Code 1 ringed = NO(1) should be punched on lines A-F, H & J  
Code 2 ringed = Lines A-F, H & J coded  
Code 4 ringed = N.A. to whole gn.

Note Line G need not be punched.  
+ col 79 = an asterisk  
ca 1972.



118. Do you have a fixed bath? [Include bath fitted in kitchen]

[Establish if necessary whether sole use or shared with other households]

Sole use of fixed bath ..... 1  
Shared fixed bath ..... 2  
No fixed bath ..... 3

1 s.c. 22  
235

119. Do you have a piped hot water supply inside the dwelling?

[Check if necessary whether shared]

Sole use of piped hot water ..... 4  
Shared piped hot water ..... 5  
No piped hot water ..... 6

4 s.c. 236  
5  
6

120. What about cold water. Do you have piped cold water inside the dwelling?

[Check if necessary whether shared]

Sole use of piped cold water ..... 7  
Shared piped cold water ..... 8  
No piped cold water ..... 9

7 s.c. 237  
8  
9

121. Do you have a w.c. (flush toilet)?

[Check if shared]

Sole use of w.c. .... 1  
Shares w.c. with other h/ds. .... 2  
No w.c. .... 3

1 s.c. 74  
2 - ash (a) -  
3 233

[If no w.c., substitute "toilet" or if known, earth/chemical closet, etc. for (a)-(c)]

(a) Is there an indoor w.c./toilet?

[2 w.c.'s, 1 in, counts as Yes]

Yes, indoor ..... Y  
No, outside only ..... X

Y s.c. 25  
X 231

(b) During the day do you have to go up or downstairs to use a w.c./toilet?

[Irrespective of whether inside or out] ONE CODE ONLY

• Yes, up or downstairs ..... 1  
No, same level (inc. 1 or 2 steps) ..... 2  
D.N.A. - uses commode, etc. .... 3

1 s.c. 247  
2  
3

(c) During the night do you have to go up or downstairs to use a w.c./toilet?

[Irrespective of whether inside or out] ONE CODE ONLY

• Yes, up or downstairs ..... 4  
No, same level (inc. 1 or 2 steps) ..... 5  
D.N.A. - uses commode, etc. .... 6

4 s.c. 241  
5  
6

If outside or stairs (X. 1. 4)

(i) Do you find this (having to go outside/up and down stairs) -

RUNNING PROMPT

Very inconvenient ..... 7  
Sometimes inconvenient ..... 8  
or are you satisfied? ..... 9

7 s.c. 242  
8  
9

243 used as check

FOR PEOPLE FILLING IN ON THE TESTS ASK G ONLY

Some people have had alterations made to the house to make it easier for them to get around. They might not be needed in your case, but may I just check?

122. Have you had any of the following fittings made because of your (disability)?

Fitting	Fitted?		a) How much did it cost you (your family)?			b) Was this full or part cost?		c) Who paid (the rest)?
	No	Yes	£	s.	Free	Full	Part	
A) Banister rails?	S.C.	250 1 2 27	2, 4 1-9	0		3 5 4 S.C.	2-9 0	
B) Replace coal fires with something easier?		28 1 2 251		0		3 4		
C) Had handrails/handles fitted to		252 79						
i) bath		1 2		0		3 4		
ii) toilet		13, 2 253		0		3 4		
D) Lifted or reversed		31 2 254		0		3 4		
Remind - because of (disability)		255						
E) Added/converted		32						
i) a lavatory		1 2		0		3 4		
ii) a bathroom		1256 33		0		3 4		
<u>Wheelchair users only</u>		257						
F) Installed ramps/paths?	S.C.	1 2 34		0		3 4		
	D.N.A.	X						
G) Has anything (else) been done to make it easier to do things or get about? (Specify below)		258 1 2 35		0		3 4		
		259 1 2 36		0		3 4		
		260 1 2 37		0		3 4		

Line 1 Case 1 ringed = No (1) should be punched on card  
 Line 2 Case 2 = Lines H-F, H-J cells  
 NOTE Line 6 next no.

CARD I Starts.

123. Would you like any (other) alterations made to the house, or any fittings to make it easier for you to manage to do things or get about?

*Finished as is* Yes ..... 7A ask (a)  
 No ..... 8 ask (b)  
 S.C. (b) 265

If Yes (A)

(a) What would you like done? [NO PROMPT] For each column (max = 3)

CODE	Bannister rails .....	1		
ALL	Central heating/change fires .....	2		
THAT	Handrails to bath ..... <u>9/</u>	3	16/	237/
APPLY	Handrails to toilet .....	4	17	120
	Widen/reverse doorways ..... <u>10</u>	5		
	<u>Install/change position of</u>			
	lavatory .....	6		
	bathroom .....	7	278	
	Install ramps/pathways .....	8		
	Others (specify) .....	9		
		10-16		
		19		

(b) Have you tried to get it (them) done? Yes ..... A ask (i)  
 No, not tried (!) ..... X ask (ii)  
 S.C. (i) 18 25  
 S.C. (ii) 271 283

If tried (A)

(i) Whom did you approach, and what happened?

12 mc 4, x, 0 272 284  
 sc 1, 2 19 26  
 ③

13 sc 1-3 20 27  
5-9 274 286

On to Qn.124

If not tried (X)

(ii) Why haven't you tried to get ..... done?

CODE	Impractical (dwelling condemned, etc.) .....	1		
ALL	Can't afford it/cost ..... <u>14</u>	2	21/	28/
THAT	Authorities no good ..... <u>15</u>	3	22	28
APPLY	Don't know where to go .....	4		
	Don't know what's available .....	5		
	Never bothered/don't know why .....	6		
	Other answers (specify) .....	9		
		7, 8		
		10-16		
		19		

M.C. (y) 275 287  
 S.C.

CARD I.

124. Ownership of dwelling (subject or spouse is)

e.g. Informant is mother living with son who is L.A. tenant. This would be coded 5, 8 or 9 according to circumstances.

- Owner/occupier owns outright ..... 1
- Owner/occupier has mortgage ..... 2
- Leaseholder (pays ground rent only) ..... 3
- L.A. or council tenant ..... 4
- L.A. or council house (pays rent to L.A. tenant) ..... 5
- Rented, not council, furnished ..... 6
- Rented, not council, unfurnished ..... 7
- Boarder ..... 8
- Lives rent free ..... 9
- Other (specify) ..... 10

SC  
- ask (a)  
290  
S.C.

If owner/occupier (1,2)

31/32/33 R.V. £ 2-3 digit

(a) May I ask the Rateable Value of this property? R.V. £

125. Because of your (disability) do you have any extra expenses with regard to housing?

CARD N starts. Yes, extra expenses .....  
No .....

S.C. 710  
ask (a) 8

If extra expenses (Y)

(a) What expenses, and how much extra does it cost? (check because of disability)

711  
1-3,6 M.C.

INTRODUCE

Rent and rates free 9.

126. Cost of housing [Informant] - omit items which cannot apply.

[Total cost before sub-letting if any]

	Cost			Period	
	£	s	d.	Wk.	Other (specify)
1. Rates (net, deducting rebate if any) [If paid separately]				1	
2. Water rates [If paid separately]				1	
3. Ground rent				1	
4. Feu duty (Scotland only)				1	
5. Mortgage repayment interest				1	
6. Service, maintenance charges				1	
7. Rent (unfurnished) deduct rebate(s) if any				1	
8. Rent (furnished) - no services				1	
9. Rent (furnished) services/board (specify)				1	

Either  
0 y, x, 9 s.c. 714  
or  
1 or 2 digit 1 or 2 digit s.  
10/11 12/13  
See Notes on Page 51  
Qn. 142 a.  
715

123. Would you like any (other) alterations made to the house, or any fittings to make it easier for you to manage to do things or get about?

Yes ..... A - ask (a)  
No ..... 2X ask (b) 16

38  
14/16  
14/16

(a) What would you like done? [NO PROMPT]

for each column  
(max = 3)

39/40 46/47

CODE  
ALL  
THAT  
APPLY

- Bannister rails ..... 1
- Central heating/change fires ..... 2
- Handrails to bath ..... 3
- Handrails to toilet ..... 4
- Widen/reverse doorways ..... 5
- Install/change position of ..... 6
- lavatory ..... 6
- bathroom ..... 7
- Install ramps/pathways ..... 8
- Others (specify) ..... 9

278-282

266-270

MC

(b) Have you tried to get it (them) done?

Yes ..... A - ask (i)  
No, not tried ..... 2X - ask (ii)

If tried (A)

(i) Whom did you approach, and what happened?

48  
271 253

272-4 284-5

MC  
47  
SC

49

43  
SC

50  
286  
274

On to Qn.124

If not tried (X)

(ii) Why haven't you tried to get ..... done?

CODE  
ALL  
THAT  
APPLY

- Impractical (dwelling condemned, etc.) ..... 1
- Can't afford it/cost ..... 2
- Authorities no good ..... 3
- Don't know where to go ..... 4
- Don't know what's available ..... 5
- Never bothered/don't know why ..... 6
- Other answers (specify) ..... 9

74/75 51/52

MC

SC

275-7 287-9

124. Ownership of dwelling (subject or spouse is)

e.g. Informant is mother living with son who is L.A. tenant. This would be coded 5, 8 or 9 according to circumstances.

- Owner/occupier owns outright ..... 1
- Owner/occupier has mortgage ..... 2
- Leaseholder (pays ground rent only) ..... 3
- L.A. or council tenant ..... 4
- L.A. or council house (pays rent to L.A. tenant) ..... 5
- Rented, not council, furnished ..... 6
- Rented, not council, unfurnished ..... 7
- Boarder ..... 8
- Lives rent free ..... 9
- Other (specify) ..... 10

ask (a)  
53  
SC 290  
10

If owner/occupier (1,2)

(a) May I ask the rateable Value of this property? R.V.£

x, y, o  
£

125. Because of your (disability) do you have any extra expenses with regard to housing?

- Yes, extra expenses ..... Y
- No ..... X

SC  
ask (a)

If extra expenses (Y)

(a) What expenses, and how much extra does it cost? (check because of disability)

1-3,6 MC

INTRODUCE

NOT CODED YET

Rent and rates free ..... 0

126. Cost of housing [Informant] - omit items which cannot apply.

[Total cost before sub-letting if any]

	Cost			Period	Other (specify)
	£	s	d.	.....	
1. Rates (net, deducting rebate if any) [If paid separately]				1	
2. Water rates [If paid separately]				1	
3. Ground rent				1	
4. Feu duty (Scotland only)				1	
5. Mortgage repayment				1	
interest				1	
6. Service, maintenance charges				1	
7. Rent (unfurnished) deduct rebate(s) if any				1	
8. Rent (furnished) - no services				1	
9. Rent (furnished) services/boards (specify)				1	

INTRODUCE [I'd like to know how you feel about living here]

127. Would you like to move from here, or do you prefer to stay?

Don't want to move, but has to .....  
 Is about to move ..... 35  
 Like to move .....  
 Want to stay .....

24 on to Q.131  
 0 on to Qn.129  
 1 s.c.  
 2 see note A  
 3 see note B  
 on to next Section

291

Note A Like to move - add - "We don't have any influence with the Council, so it won't be possible to help you personally - but your views will help in future planning" - ask Qn.128.

Note B Want to stay - Reassure any elderly people "That's fine, we just wanted to know you are satisfied" or something like that - GO ON TO NEXT SECTION.

TO ALL WANTING TO MOVE OR IN PROCESS OF MOVING Codes 1 or 2 at Q 127

128. Do you want to leave here (are you leaving here) because

PROMPT You can't manage because of the house itself ..... 36/  
 CODE ALL You don't like the area/people ..... 37  
 THAT APPLY or Is there some other reason? (specify) .....

Y MC  
 X  
 0 s.c.  
 15  
 1-11, 14 MC.

292

129. What sort of place would you like to move to? (are you moving to?)

Old People's Home/Institution, etc. .... Y  
 Place without stairs (Flat/bungalow stairs mentioned) ..... X  
 CODE SMALLER place ..... 0  
 ALL LARGER place ..... 1  
 THAT SELF-contained accommodation ..... 2  
 APPLY MORE modern (amenities mentioned) ..... 38/39 MC  
 Garden/allotment ..... 4  
 "Better" area (seaside/country/warmer/no smoke) ..... 5  
 "Nicer" area (friendly, 'posher', better class) ..... 6  
 Other answers (specify) ..... 7

Y  
 X  
 0  
 1  
 2  
 3 MC  
 4  
 5  
 6  
 7  
 8-10  
 15 s.c.

296

Code 1 at Q 127

If about to move go to next section.  
 If has to move but does not want to or wants to move - ask Qn.130.

CARD I

INTRODUCE Some councils provide special accommodation for people with disabilities - so I'd like to ask a few questions about Council Housing.

130. Have you applied to this Council for rehousing since you've been living here?

Yes ... 40 ...  
No ... 40 ...

301  
8,9 s.c.  
X ask (a)(b)  
7 ask (c)

If applied (X)

(a) How long ago did you apply?

ONE  
CODE  
ONLY

Less than 6 months .....  
6 mths. but less than 1 yr. ....  
1 yr. but less than 2 yrs. ....  
2 " " " " 3 " .....  
3 " " " " 4 " .....  
4 " " " " 5 " .....  
5 " " " " 10 " .....  
10 years or more (specify) .....

Y  
0  
1  
2  
3  
4  
5  
6  
9

303

s.c.

(b) Have you been offered any accommodation?

Yes .....  
No ..... 42

0 s.c. 304  
Y ask (i)  
X on to next section

If Yes (Y)

(i) Why did you refuse it?

1,2 s.c.  
3-7,9 MC.  
305

GO ON TO NEXT SECTION

To all who have not applied for rehousing (7)

(c) Why haven't you applied to the Council for rehousing?

CODE  
ALL  
THAT  
APPLY

Don't want L.A. housing/buying house .....  
Wants to move right away (out of area) .....  
Thinks ineligible .....  
No point (waiting list/none available/ L.A. unco-operative) .....  
Not well enough .....  
Can't afford move/rent .....  
Haven't bothered/not wanted immediately/ don't know .....  
Other answers (specify) .....

1  
2  
3  
4  
5  
6  
7  
9  
10-15  
18  
8,9 s.c.

308

MC



INTRODUCER [I'd like to know how you feel about living here]

127. Would you like to move from here, or do you prefer to stay?

Don't want to move, but has to..... 07

Is about to move ..... 514

Like to move ..... 125

Want to stay ..... 36

54  
on to Q.128  
on to Qa.129  
go to Q.128  
go to Q.131  
291

Note A Like to move - add - "We don't have any influence with the Council, so it won't be possible to help you personally - but your views will help in future planning" - ask Qn.128.  
Note B Want to stay - Reassure any elderly people "That's fine, we just wanted to know you are satisfied" or something like that - GO ON TO SECTION Q131

TO ALL WANTING TO MOVE OR IN PROCESS OF MOVING - (codes for 2 of Q. 127)

128. Do you want to leave here (are you leaving here) because

PROMPT You can't manage because of the house itself .....  
CODE ALL You don't like the area/people .....  
THAT APPLY or Is there some other reason? (specify) .....

55/56  
15  
16  
17  
1-11  
212

129. What sort of place would you like to move to? (are you moving to?)

Old People's Home/Institution, etc .....  
Place without stairs (Flat/bungalow stairs mentioned) .....  
Smaller place .....  
Larger place .....  
Self-contained accommodation .....  
More modern (amenities mentioned) .....  
Garden/allotment .....  
"Better" area (seaside/country/warmer/no smoke) .....  
"Nicer" area (friendly, 'posher', better class) .....  
Other answers (specify) .....

CODE  
ALL  
THAT  
APPLY

Y-11  
X-12  
1357/58  
1  
2  
3  
4 MC  
5  
6  
7  
8-10  
15 SC  
2 16

codes for Q.127

If about to move go to next section.  
If has to move but does not want to or wants to move - ask Qn.130.

INTRODUCE Some councils provide special accommodation for people with disabilities - so I'd like to ask a few questions about Council Housing.

150. Have you applied to this Council for rehousing since you've been living here?

Yes .....  
No .....

57  
sc 301  
ask (a)(b)  
No 7-ask (c)  
M

How long ago (X)

(a) How long ago did you apply? Less than 6 months ..... 1  
6 mths. but less than 1 yr. .... 0-2  
1 yr. but less than 2 yrs. .... 1  
2 " " " " 3 " ..... 2  
3 " " " " 4 " ..... 3  
4 " " " " 5 " ..... 4  
5 " " " " 10 " ..... 5  
10 years or more (specify) ..... 6

ONE  
CODE  
ONLY

8  
3  
1  
2  
3  
4  
5  
6  
7  
8  
9

(b) Have you been offered any accommodation?

Yes .....  
No .....

sc 304  
ask (i)  
on to next section

If Yes (Y)

(i) Why did you refuse it?

61-  
1,2 sc  
3-7,9 MC  
35 7

GO ON TO NEXT SECTION

To all who have not applied for rehousing (7)

(c) Why haven't you applied to the Council for rehousing?

Don't want L.A. housing/buying house ..... 1  
Wants to move right away (out of area) ..... 2  
Thinks ineligible ..... 3  
No point (waiting list/none available/  
L.A. unco-operative) ..... 4  
Not well enough ..... 5  
Can't afford move/rent ..... 6  
Haven't bothered/not wanted immediately/  
don't know ..... 7  
Other answers (specify) ..... 9

CODE  
ALL  
THAT  
APPLY

308 310  
67/68  
7  
9  
10-15  
18  
sc

... IS MARRIED (even if spouse is not included in sample, ... income are required for both husband and wife on the same schedule. Where the wife is likely to have an income of her own, questions should be put separately, direct to her, even though they be recorded on the same schedule.

- For wages or salaries we require net amount after deductions for tax and national insurance only. Check that other deductions have not been made, e.g. savings, superannuation, club membership. If these deductions have been made, they should be added on to take-home pay.
- Incomes per week or per month should be recorded in pounds and shillings (ignore pence), and annual incomes in £s only (ignore shillings and pence). Where informant answers for periods other than that required by the answer - be sure to note the period for which amount given applies.
- If the informant is drawing a Supplementary Pension or Allowance (Nat. Assistance), omit Qn.144.

CARD Q starts

INTRODUCE: [We'd like to find out if people like yourself have extra expenses they might find it hard to meet on their present income. Could you tell me first what your income is?] - [standard definition of income - deducting income tax and national insurance, but including overtime, bonus, pension, etc.] **780** *imputed figure*

131. What was your total income last week?

Informant (incl. spouse if has joint income) **3, 4** *imputed figure*  
 Spouse if has separate income **5, 6**  
 1-3 digits 1-2 digits 1-2 digits  
 9/10/11 781 12/13 786  
 14 787  
 15 sc. ask (a) (b)

132. Is this the amount you usually have, or was last week unusual? **786**

If Unusual (2)

(a) Why was it different last week?

(b) What do you (and your wife) usually get? **9 = 817.** **787**

THEN - for each dependent child (if any), mentally subtract £2 from the total income.

IF single, widowed, separated with adjusted total less than £13. - ask full income details

IF married couple with adjusted total less than £17. - ask full income details

If over these amounts - go on to Qn.145

INCOME DETAILS - ASK QUESTIONS APPLICABLE - OR USE AS CHECK QUESTIONS *Either 5-6 or Q. 133 - 144 apply.*

TO THOSE SELF-EMPLOYED, or whose WIFE IS SELF-EMPLOYED (in all other cases the question is struck through)

133. How much was your total income (and your wife's) in the last 12 months for which you can give a figure, from your business (practice) etc?

[After deducting business expenses and income tax.

Informant (incl. spouse if has joint income) **dc 788**  
 Spouse if has separate income **sc. 789**  
 1-2 digits 1-2 digits  
 17/18 14/20  
**790**

Note here if income tax not known.

134. Earnings last week from work

Including overtime, tips, bonus, etc.  
Excluding M.I. and Income Tax

Either

Informant (incl. spouse if has joint income)

... or ... separate income

Either

£ (1-2 digits) s. (1-2 digits)	£ (1-2 digits) s. (1-2 digits)
412/00 794	412/00 798
21/22 23/24	25/26 27/28

any earnings

(a) Is this the amount you usually take home, or is this week unusual?

Usual ... 1 Ask for each Col.  
Unusual ... 2 Ask (i) (ii) ...

If unusual (2)

(i) What was different last week?

29/30 31/32 33/34 35/36

(ii) What do you (your wife) usually get?

£ (1-2 digits) s. (1-2 digits)	£ (1-2 digits) s. (1-2 digits)
802	806

135. Apart from your regular job, do you (your wife) receive any income from casual work?

Yes ..... 1 Ask (a)(b)  
No ..... 0 Ask

If Yes (1) do not punch, but check

(a) How much do you get (a week)? £ \_\_\_\_\_ s

(b) For how many weeks a year? \_\_\_\_\_

Off. use

1 2 3 4

A

--	--	--	--

B

37/38	39/40
-------	-------

£ (1-2 digits) s. (1-2 digits)	£ (1-2 digits) s. (1-2 digits)
2/00	1/00

136. Are you at present receiving any of the following State benefits? (Ask or check as appropriate). If Yes, give amount per week, even if not drawn weekly.

Item No

- (1) National Insurance Retirement Pension
- (2) Supplementary pension (Nat. Assistance)
- (3) Industrial disablement pension (incl. any additional allowance paid)
- (4) War disability pension (incl. any additional allowance paid)
- (5) Nat. Ins. Widow's pension or allowance
- (6) War widows or industrial pension
- (7) Family allowance/guardians allowance/childs special all. ...
- (8) Maternity benefit
- (9) Sickness or industrial injury benefit
- (10) Unemployment benefit
- (11) Supplementary allowance (National Assistance)

NO	£	s.	£	s.
	99			
	2			
	0			
	41	42/43/44/45		
	46	47/48/49/50		
	51	52/53/54/55		
	56	57/58/59/60		
	61	62/63/64/65		
	66	67/68/69/70		
	0	" "		
	0	" "		
	0	" "		
	0	" "		
	0	" "		
	0	" "		

NOTE: THERE ARE 50 COLS ALLOWED FOR A MAX. OF 6 ITEMS CODED WITH MONEY. THE ITEM NO. IS PUNCHED ON THE FIRST COL OF EACH SET. 1-5 ON SECOND, THIRD, FOURTH AND FIFTH. ANY REMAIN APPEAR ON COL. 41.

S.N. 6070  
was amount  
correct with  
2130341-45  
but there  
are other  
items which  
which are  
not punched.

(11) Supplementary allowance (National Assistance)  
(a) For how many weeks have you been receiving this benefit?

What was your usual weekly amount?  
£ 13 weeks or less 7/72 23/74

7 = 7 = GREENS  
7 = 808 1-4  
75 END 100 000

	No	Amount per week after deduction of income tax	
		Informant	Spouse
Following employer's pensions (regular allowances) at present?			
(a) Central or local Government?	8 (9) sc	9 £10 (1 s/2) (1-2 digits)	13 s 14 (1-2 digits) (2) (9)
(b) Own or husband's/wife's employer (not (a))?	17 0	15/19 ditto. 20/21	22/23 ditto. 24/25
138. Do you or your wife receive any annuities?	26 (4) sc	If Yes a) How much did you (your wife) get for last payment? Informant...£ 27.28 (1-2 digits) (2) (9) Spouse.....£ 29.30 (1-2 digits) (2) (9) b) How many such payments do you get a year?	
139. Do you or your wife receive any income from Trade Unions, Friendly Societies or charitable organisations?	31 (4) sc	If Yes - record weekly amounts Informant: £ 37.38 (1-2 digits) (2) (9) Spouse: £ 39.40 (1-2 digits) (2) (9)	
140. Do you or your wife receive any separation allowance or alimony?	30 (4) sc	" £ 37.38 39.40	
141. Do you (or your wife) receive any regular cash help from children, relatives or friends not in the household?	41 (4) sc	" £ 42.43 44.45	

142. Do you or your wife receive any rent from lodgers, boarders or sub-tenants of this house? [Including children]

Card Q cols 47-50 skipped

Yes... 1 ask (a) (b) 46

No..... 2

If Yes (1)

(a) About how much did you (and your wife) receive in the last 12 months, before allowing for expenses?

£ 719 (14) (2,4) sc or 15 16 17 18 (1-2 digits) (1-2 digits) 720.

(b) Do you provide any of the following services (to your boarders, lodgers, etc.)? CARD Q.

CODE ALL THAT APPLY	Light..... 1	For use of computer operator - NOT TO BE PUNCHED
	Heat..... 2	
	Breakfast only..... 3	
	Breakfast and one meal only..... 4	
	All meals..... 5	
	Cleaning..... 6	
	Laundry..... 7	
	Furniture..... 8	
	None of the above..... 9	s.c.

143. Did you (or your wife) have any income from any other source last week?

IN both cols

Yes..... 1 ask (a) (b) 52

No..... 9

If Yes (1)

(a) From what source?

53 (2-3) sc 55

(b) About how much did you (and your wife) receive in the last 12 months?

CARD N

£ 720 (20/21 22/23) (1-2 digits) (1-2 digits) 60/61 62/63

END CARD N

Omit question 144 where informant is drawing a Supplementary Pension or Allowance (National Assistance) i.e. an amount coded at Q. 136, Lines 2 or 4.

144. Do you or your wife have any money in

CARD Q.

(i) The bank, savings bank, co-op, saving certificates, building society, premium bonds?

Yes, self..... 56 ..... 1 M.C.  
 Yes, wife..... 56 ..... 2 M.C.  
 No, neither..... 3 S.C.

(ii) Stocks, shares, including War Loan, etc.?

Yes, self..... 57 ..... 5 M.C.  
 Yes, wife..... 57 ..... 6 M.C.  
 No, neither..... 7 S.C.

(iii) Property other than this dwelling house?

Yes, self..... 58 ..... 9 M.C.  
 Yes, wife..... 58 ..... X M.C.  
 No, neither..... 0 S.C.

If has any savings

(a) Taken together [remind inf. of items] would you say that altogether (not counting this house if owned) you have:

RUNNING Over £2,500..... 1  
 PROMPT £300 - £2,500..... 59 ..... 2 ask (i)  
 Less than £300..... 3

If between £300 and £2,500 (2)

(i) (It would help me to get it more accurately) specify amount £ (1-4 digits) 60, 61, 62, 63

END OF CARD Q. or (y, x) S.C.

145. We've already talked about the extra expenses for housing. Do you have any extra expenses due to your (disability) for:

(y) N.A. to whole of Q. 145 733 (Q. 146 blank also)

on each line (a-c) No Estimate weekly amount  
 (a) Domestic help? 734 25 0 or £ 26, 27 738 28, 29 S.  
 (b) Heating? 735 30 0 £ 31, 32 742 33, 34 S.  
 (c) Special diets? 736 35 0 £ 36, 37 746 38, 39 S.  
 (d) Anything else we haven't mentioned? 40 0 or £ 41, 42 750 43, 44 S.  
 (Specify) 737 and/or → £ 44 or 45, 46 754 47, 48 S.

24

Other domestic & assoc. expenses.  
 Travelling expenses 49, 50  
 6-12 M.C. (max = 3)  
 19  
 759

146. If any extra expenses

In the past year did you (or your wife) use up any of your savings, or raise a loan on property or insurance policy, or anything like that, to meet these extra expenses?

Yes... 51, 765 ..... 1 S.C. ask (a) (b)  
 No... 2

If Yes (1)

(a) Which of these expenses?

1-9 Col 52  
 10-14 53  
 1-12 M.C. (max = 4)  
 18, 19 (y) S.C.  
 766

(b) How much money did you use?

(1, 2, 3, 4) M.C. 54

RUNNING  
PROMPT

phone for use of h/d, can use .....  
" " " " " cannot use .....  
No phone in h/d, but can use .....  
" " " " cannot use?.....

1  
2 - ask (a)  
3 6 11  
4

If phone for use of h/d, (1, 2)

(a) Do you have a standard phone or is it specially adapted in any way?

Standard model ..... 1 5 s.c.  
Specially adapted ..... 2 6 5

148. Some people say they miss a lot of things by being disabled, others say they get as much out of life as most other people. How do you feel?

66/0  
17  
1, 2, 1 s.c.  
14, 15  
2-13 n.c.  
16

149. What would you say is the main disadvantage of having (disability)?

67/0  
17  
1, 2, 1 s.c.  
14, 15  
2-13 n.c.  
16  
327-16

150. Is there anything else you'd like to tell me that I haven't asked about?

Partial Interviews

70, 71, 72  
327, 328

No. of an. at which interview ends

CARD J.

147. Telephone - Is there a

RUNNING  
PROMPT

Phone for use of h/d, can use .....  
" " " " " cannot use .....  
No phone in h/d, but can use .....  
" " " " cannot use?.....

xc  
1 ] - ask (a)  
2 ]  
3 ]  
4 ] 315

If phone for use of h/d, (1, 2)

(a) Do you have a standard phone or is it specially adapted in any way?

Standard model .....  
Specially adapted .....

5 )  
6 ) s.c 316  
9 )

148. Some people say they miss a lot of things by being disabled, others say they get as much out of life as most other people. How do you feel?

47/48.

4, x, 1 s.c  
14, 15 317  
2-13  
16 MC

149. What would you say is the main disadvantage of having (disability)?

49/50

4, x, 1 s.c  
14, 15  
2-13  
16 MC  
322

150. Is there anything else you'd like to tell me that I haven't asked about?



HERE FOR ITEMS N<sup>o</sup>s for main edit

GREY SCHEDULES

N.B. Item 999 used as dummy put at end of card 14 for S.Y.

rest of items the same as

Serial No.	1	2	3	4	5	6	7	8	9	10
------------	---	---	---	---	---	---	---	---	---	----

If the disabled person is not able main edit for War-Gray CARD M. STARTS

(a) understand the questions, or give rational answers e.g. is mentally impaired, until

- or (b) is permanently bedfast
- or (c) is not bedfast, but confined to a chair, and cannot get in or out of the chair without the aid of some other person
- or (d) needs someone to supply most of her personal needs.

820 8

The following questions need to be asked, either of the subject herself, or of the person mainly responsible for looking after her.

If direct to subject, change wording from "she" to "you" etc.

Code: Not possible to ask any questions direct ..... 1 2 3 s.c.  
 Some questions direct ..... 9

801. If (person) needs something and there is no-one in the room, how does (she) let someone know (she) wants them - 821

(a) during the day?

822 10 C, 1-9 s.c.  
X, 4  
11 1/2

(b) during the night?

823 11 C, 1-9 s.c.  
X, 4  
11 1/2

(c) Whenever ( ) wants something can (she) usually manage to attract someone's attention?

824 12 1-5 s.c.  
NA

If proxy

I'd like to know something about what you do for ( )

802. Once ( ) has (her) food, can (she)

(a) Cut it up (herself)?

Yes .....  
 No .....  
 Eats on own ..... 825  
 Has to be fed ..... 13

(b) Get it to (her) mouth on (her) own or does (she) have to be fed?

NA s.c.  
1 2 3 4 5 6 7 8 9, C NA

803. How about drinking? Can (she) lift the cup (herself) or does (she) have to have help?

Can drink on own ...  
 Has to have help ...

7 8 9, C NA

CARD M

Q. How does ( ) manage about washing (her) hands and face?

Does (she) have to have the water brought to (her) or can (she) get to the wash-basin?

Has to be brought ..... 828  
Gets to the wash-basin ... 2 ask (a)  
Varies (3)

Can get to the wash-basin (2) or varies (3)

(a) Can (she) get to the wash basin on (her) own or does (she) have to have someone to help (her)?

Can go on own 825  
Has to have help 825

Has to have help (5)

(1) Who helps (her)?

830-3  
15/16  
10-19  
1-2-24

205. Once (she) has the water (or has got to the basin) can (she)

Wash (her) own hands and face without help?

835  
Yes  
No 17

206. What about a bath or a body wash?

Can (she) get to the bath or does (she) have to have an all-over wash?

Can get to the bath ..... 836  
Has all-over wash or no bath ... 2 ask (a)-(c)  
page

Can get to the bath (1)

(a) Can (she) get to the bathroom on (her) own or does (she) have to have someone to help (her)?

Can get to bathroom on own  
Has to have help ..... 837

(b) Can (she) get in and out of the bath on (her) own or does (she) have someone to help (her)?

Can get in/out of bath ... 838  
Needs someone to help ...

(c) Once (she) is in the bath can (she) bath (herself) without help?

Yes 840  
No 19  
7 on to Q. 207  
then 208 version  
ask (1)-(11)

Who (3)

(1) Who washes her?

841-3  
20/21  
10-19  
1-2-24

(11) How often?

846 22

Handwritten notes and diagrams on the right margin, including circled numbers 14, 15/16, 17, 18, 19, 22 and various initials like 'NA', 'S.C.', 'ask (a)', 'ask (c)', 'ask (1)-(11)'. There are also some small sketches of a person's head and shoulders.

206. (she) washes down ...

CARD M

Has she ever washed down the back? (2)

(a) Once (she) has the water, can (she) wash herself down without help?

Yes .....  
847 23  
No .....

2-7 NA  
1-10-19  
2-7-20-19  
2-7-20-19  
ask (2)(11)

Who washes her? (2)

(a) Who washes her?

22, 24, 20, 1-9  
+ 3-9  
848-50 24/25  
10-19  
24, 23, 10-19

4, 2, 0 S.C.  
2-7 u.c.  
1, 3-4, 16-19 S.C.

(ii) How often?

852

1-10 S.C.  
NA  
26

Can he shave himself? (0)

207. Can he shave himself or does someone have to do it for him?

Doesn't have a shave .853  
Shaves self ..... 27  
Someone shaves him .....

S.C.  
0 - ask (2)  
3 - on to 2-7-20-19  
4 - ask (3)(C)  
1 - ask (2)  
NA

If doesn't have a shave (0)

(a) Can you tell me why he doesn't have a shave?

GO ON TO Q. 208

Who shaves him? (2)

(b) Who shaves him?

854-6 28/29  
10-19  
22, 10-19

4, 2, 0 S.C.  
2-7 u.c.  
1, 3-4, 16-19 S.C.

(c) How often does he have a shave?

859

1-4, 2 S.C.

(d) Does he have to pay anything? If so, how much?

30  
860

4

CARD M

308.

What about using the toilet - can (she)

RUNNING get to the toilet on (her) own .....  
 PROMPT get there only if helped .....  
 cannot get to toilet, even with help .....

900 = 2  
 1/2 x 15  
 arcade  
 833  
 N/A  
 S.C.  
 1 - ask (a)  
 2 - ask (a)

If cannot get to toilet (3) or also uses other appliance/method  
 (specify)

(a) What does (she) use?

INDIVIDUAL	Commode .....
PROMPT	Chamber .....
CODE ALL THAT APPLY	Bed pan .....
	Tube or catheter .....
	MEN ONLY - Bed bottle .....
	Other appliance or method .....

(specify)

47  
 50  
 53  
 56  
 57  
 58  
 60  
 ask Qn. 209  
 ask Qn. 210  
 ask Qn. 211  
 ask Qn. 212  
 ask Qn. 209  
 85  
 86

If uses commode, chamber, other appliance, (4, 5, 9)

309. Can (she) get to the (... appliance ...) on (her) own or does (she) have to have someone to help (her)?

Can use on own .....  
 Has to have help .....

867  
 82  
 1 - ask (a)  
 2 - ask (b)-(c)

If can use on own (1)

(a) Who empties it?

868-712  
 33/34  
 10-19  
 10-19

4, 2, 0 S.C.  
 2- S.C.  
 1, 3-5  
 16-19 S.C.

Go on to Qn. 214 UNLESS  
 also uses bed pan - ask Qn. 210  
 or catheter, tube - ask Qn. 211  
 or bed bottle - ask Qn. 212

If has to have help (2)

(b) Who helps (her) and empties it?

874-85/36

4, 2, 0 S.C.  
 2- S.C.  
 1, 5-5, 18-19 S.C.

helps

(c) About how many times a day does (she) generally need help with the (... appliance ...)?

875/30 37/38

1-19  
 1-19 S.C.

(d) And what about during the night? Does (she) use it

RUNNING Practically every night .....  
 PROMPT Two or three nights a week .....  
 About one night a week .....  
 or Not very often ? .....

883 39

1-19 S.C.  
 1-19

If uses during night (3, 7, 8)

(e) On the nights (she) does call someone, is it usually only once, or is it more often?

(If more often, specify usual number of times)

Usually only once  
 No. of times .....

585

41

6- S.C.  
 7 - ask (1)  
 8-  
 9-

S.C.  
 1-19  
 2-10  
 2-10  
 N/A

Go on to Qn. 214 UNLESS  
 also uses bed pan - ask Qn. 210  
 or catheter, tube - ask Qn. 211  
 or bed bottle - ask Qn. 212

CHOW M

110. Does (she) keep at home, or does (she) have to call someone to give (her) the bedpan during the day?

Keeps it handy Has to call ...

896 12

S.C.  
1 ask (A)  
2 ask (B)-(C)

111. Who empties it?

879 12/144

S.C.  
1 ask (A)  
2 ask (B)  
3 ask (C)  
4 ask (D)  
5 ask (E)

GO ON TO Qn. 214 UNLESS also uses catheter, tube - ask Qn. 211 or bed bottles - ask Qn. 212

112. Who gives it to (her) and empties it?

874 45/46

gives it to her

S.C.  
1 ask (A)  
2 ask (B)  
3 ask (C)  
4 ask (D)  
5 ask (E)

113. About how many times a day does (she) usually need to be given a bedpan?

114. How often during the night? Does (she) need it

890 49

Practically every night  
Two or three times a week  
About once a week  
Not very often?

S.C.  
1 ask (A)  
2 ask (B)  
3 ask (C)  
4 ask (D)  
5 ask (E)

115. On the nights (she) does call someone is it usually only once, or is it more often?

Usually only once  
No. of times

S.C.  
1 ask (A)  
2 ask (B)  
3 ask (C)  
4 ask (D)  
5 ask (E)

GO ON TO Qn. 214 UNLESS also uses catheter, tube - ask Qn. 211 or bed bottles - ask Qn. 212

116. Does (she) need any help because (she) has to use the tube (catheter)?

905

Yes 52  
No 2

S.C.  
1 ask (A)  
2 ask (B)

117. Does (she) need to be done?

GO ON TO Qn. 214

908 has bottle (a) - ask Gen. 212 and 213

212. Does he have to call someone to give him the bottle, or does he keep it handy during the day?

908  
53  
Has to call ...  
Keeps it handy ...

NA  
S.C.  
ask (a)

908 has to call (a)

(a) About how many times a day does he have to ask for it?

908  
54  
S.C.

213. And what about during the night? Does he keep it handy, or does he have to call someone during the night?

908  
Has to call .....  
Keeps it handy .....

S.C.  
ask (a)(b)

908 has to call (a)

(a) Does this happen

RUNNING  
PROMPT

908  
55  
Practically every night .....  
Two or three times a week .....  
About once a week .....  
Not very often .....

S.C.

(b) And on the nights he has to call someone, is it usually only once, or is it more often?

(If more often specify usual number of times)

910  
Usually only once  
No. of times .....

S.C.

ASK ALL

214. Can (she) brush and comb (her) hair, or does someone have to do it for (her)?

911  
Bald .....  
Can brush or comb own hair .....  
Someone has to do it .....

NA  
S.C.

215. Can (she) dress or undress (herself), or change (her) clothes without help, or does someone have to help (her)?

912  
57  
Can dress/undress .....  
Needs help .....

NA  
S.C.  
ask (a)

913 has to call (a)

(a) Can (she) do

RUNNING  
PROMPT

913  
Most of (her) own dressing .....  
Only some things for (herself) .....  
or Do you have to do practically all (her) dressing for (her)? .....

NA  
S.C.

93. Can (she) change (her) position in bed without someone helping (her)?

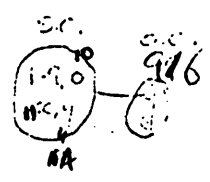
Can change position 58 on to 914?  
Needs help ..... 2/4 NA (2)(3)

914

If needs help (a)

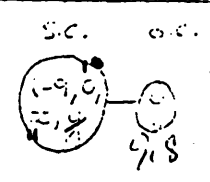
(a) How often during the day does (she) need help to change (her) position in bed?

915  
59



(b) How often during the night [does (she) need help in changing (her) position in bed?]

60  
917



Code Cns. 217 and 218 if observed or already known, otherwise ask subject or proxy -

217. Can (she) make (her) wishes known by speaking?

If yes

- (a) in writing?
- (b) by signs?

Yes No  
919 0 ask (a)

920 2 ask (b)

921 4 NA

Other

218. Can (she) on (her) own, a) get out of bed?

922 1, 1 NA S.C.

b) get out of (her) chair?

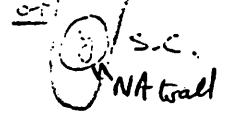
923 1, 2 NA S.C.

c) walk unaided (no sticks)?

924 6, 3 NA S.C.

d) use stairs unaided?

925 1, 7 NA S.C.



1200

M

FOR THE HONORABLE SENATOR, OUT OF HEARING OF REPORT.

... ..

... ..

928 2 NA

... ..

928 3 NA

... ..

928 4 NA

... ..

... ..

929 64 NA

... ..

930 65 NA

... ..

931-5 66 940 70 73

... ..

936-8 67 947 71 74

... ..

939 68 950 72 75

... ..

940 69 END OF CARD M

... ..

941 70 NA

8/79 ARE CONGRESSIONAL



TO ALL WHO USE WHEELCHAIR

0.	0.	0.	0.	0.	0.	1-9
1-9	1-9	1-9	1-9	1-9	1-9	X

Blank = 0

301. Can you get in and out of your chair on your own, (even if you have trouble doing it)?

Yes ..... 55 ..... (6/4) s.c.  
No ..... (5)

302. For how long have you been using a wheelchair?

Less than 6 months ..... Y  
6-11 months ..... 56 ..... 0 s.c.  
No. of years ..... (1-7, x)

303. Can you use the chair on your own, or do you always have to be pushed?

For each column (max = 5)

Yes, use on own ..... 1 - ask (a)  
Use on own inside only ..... 2 - ask (a)  
Use on own outside only ..... 3 - (b)(c)  
Have to be pushed ..... 4 - ask (b)(c)

If use on own (1,2,3)

57

60 65 66

(a) Is it electrically powered, or do you propel it yourself when you're using it on your own?

Electrically powered ..... 5  
Self-propelled ..... 6  
7

If has to be pushed (2,3,4)

(b) Who usually pushes your chair (when you don't do it yourself)?

58

s.c. (1-6) (9) (0) (5) (X)  
mc (7,8) 61 64 67  
sc (2)

(c) Does (person) have any difficulty, or does he/she manage quite easily?

Manages easily ..... 8 s.c.  
Has difficulty ..... 9 - ask (i)  
y

If has difficulty (9)

(i) Why is that?

59

62 65 68 7

(1) s.c.  
(2-5)  
M.C.

CARD F.

Either

IF USES INSIDE (Qn.25 - codes 2,4)

D.N.A. - not used inside ..  
or Qs 304-5 apply

(X) - go on to Qn.306

304. Does using your chair in the house have any drawbacks, or cause any special difficulty?

- No .....
- Doors too narrow .....
- Knocks/collides with furniture .....
- Can't manage (internal) stairs/steps .....
- Others (specify) .....

(0) S.C. 72  
 (1)  
 (2) M.C.  
 (3)  
 (6)  
 (7)  
 (y) S.C.

305. Have you had to re-arrange carpets or furniture to enable you to use your chair inside the house?

- Yes, re-arranged .....
- No .....

(x) S.C.  
 (1) - ask (a)  
 (2)

If had to make re-arrangements (1)

(a) Has this involved you in any extra expense?

- Yes, extra expenses .....
- No .....

(y) S.C.  
 (3)  
 (4)

73

TO ALL HAVING WHEELCHAIRS

306. Did anyone official show you how to use your chair?

- Yes, shown .....
- No .....

S.C.  
 (5) - ask (a)  
 (6) - ask (b)  
 (7,0)

If Yes, shown (5)

(a) Did you get enough instruction, or did you feel you needed more?

- Enough instruction .....
- Needed more .....

(x) S.C.  
 (1) GO ON TO  
 (2) TESTS

If No, not shown (6)

(b) Would it have been easier for you if you had been shown by an official how to use it or wouldn't it have made any difference?

- Easier .....
- No difference .....

S.C.  
 (4) GO ON TO  
 (5) TESTS  
 (y)

74

CARD F  
ENDS

\*

**FOR OFFICE CORRESPONDENCE ONLY**

From:

To:

Handicapped  
& Impaired in  
Great Britain

CO/901/5418/B.

pt. 2.

SN: 212b

CARD 5

JUL 11 1950

SS 1108

Interviewer \_\_\_\_\_  
Authorization No. (SD) 15/16/17

Serial Nos. 8 9 10 11 12 13 14  
1-9 1-9 1-9 1-9 1-9 1-9 X

(1) Date of Interview March April  
18/19, 20/21  
(2) Person Interviewed DAY MONTH  
Subject (singly) ..... 1  
Subject (jointly) ..... 2 S.C.  
Subject helped by proxy ..... 3  
Proxy (state relationship) ..... 4 22

(v) Name of subject .....  
Address .....  
.....  
.....

If the subject is at home, but is too confused or irrational, or too ill to be interviewed (excluding the proxy illness where an interview may be carried out at a later date), someone who is responsible for looking after the subject (a proxy) should be asked.

(vi) If Refusal - Reason - giving as much detail of capability as possible, e.g. if seen, appear active/walks with stick, etc., or out at work. Get Household composition inc. as much detail as possible.

9 months  
23/24  
any age 100 or over punch as 99

IF MORE LINES, PUNCH O/C BY ON CARD OF FIRST "S" CARD

HOUSEHOLD COMPOSITION

one code entered in this column

(a) Relationship to subject	(b) Code to indicate subject	(c) Sex M F	(d) Age 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99	(e) Marital Status Md. Sgl. Wd.	(f) Working? (Any number of hours) Full Part Unemp. Rtd. Student time Sick H/wife (unpaid)	(g) Bedfast or Chair- bd. get out
25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99	1	SC	30	SC	1 2 3 4 5	6 7 8
	2		34		1 2 3 4 5	6 7 8
	3		42		1 2 3 4 5	6 7 8
	4		49		1 2 3 4 5	6 7 8
	5		56		1 2 3 4 5	6 7 8
	6		63		1 2 3 4 5	6 7 8
	7		70		1 2 3 4 5	6 7 8
	8		77		1 2 3 4 5	6 7 8
	9		34		1 2 3 4 5	6 7 8
	10		41		1 2 3 4 5	6 7 8
	11		48		1 2 3 4 5	6 7 8
	12		55		1 2 3 4 5	6 7 8
	13		62		1 2 3 4 5	6 7 8
	14		69		1 2 3 4 5	6 7 8
	15		76		1 2 3 4 5	6 7 8

a b c d e f g h j k m n o

# SS 418 DISABILITIES. ✓

NEW CARD O, Pink top

1	SS418	41	70	D8
2	O (zero)	42	739c	71,2 D9
3	B3 A3 3	43	74	D10
4	B4 A4 4	44	75	D11
5	B5 A5 5	45	76	D12
6	B6 A6 6	46	77	D13
7	B7 A7 7	47	78	D14
8	B8 A8 8	48	79	D15
9	B9 A9 9	49	80	D16
10	B10 A10 10	50	81-83	D17
11	B11 A11 11	51	84	D18
12	B12 A12 12	52	85	D19
13	B13 A13 13	53	86	D20
14	B14 A14 14	54	87	D21
15	Relation to HOH A 15	55	88	D22
16	16	56	89	D23
17	SEX 17	57	90	D24
18	AGE 117 18	58	91	D25
19	AGE 118 19	59	92	D26
20	Marital Status 119 20	60	93	D27
21	Wkg <sup>21</sup> & bedfast <sup>22</sup> 21 22	61	94	D28
22	LINE NO. 23 (9w) B23	62	95	D29
23	23 A24	63	96	D30
24	NO in household inc. inf <sup>24</sup> 24	64	97	D31
25	Total earners excl. inf <sup>25</sup> 25B	65	98	D32
26	Total bedfast 26B	66	99	D33
27	Total household 27B	67	100	D34
28	Total upper 28 (31/32) A49	68	101	D35
29	extremity score o/c 33-35 A50	69	102	D36
30	Lower total 36/37 30 A51	70	103	D37
31	o/c 38 39 40 A60	71	104	D38
32	Lower total 41/42 A61	72	105	D39
33	o/c 43, 44, 45 A62	73	106	D40
34	Comb total 46/47 A63	74	107	D41
35	o/c 48, 49, 50 A64	75	108	D42
36	Comb total 51/52 A65	76	109	D43
37	o/c 53 54 55 A66	77	110	D44
38	On L Stairs 60 A67	78	111	D45
39	Blind? 61 A68	79	112	D46
40	Good/bad day 62 A73	80	113	D47
			WEIGHT ONLY	

# SS418 . DISABILITIES

New card 1



1	SS418		
2	1		
3	SERIAL		
4			
5			
6			
7			
8	H 8	210	
9	H 9	211	
10	H 10	212	
11	H 11	213	
12	H 12		
* 13	H 13	15 (9 = 9 or more)	214
14	H 16	216	
* 15	H 17	18 (9 = 9 or more)	218
16	H 19	219, 220/2	
17	H 20	223	
18	H 21	224	
19	H 22	229, 230	
20	H 23	231/2	
21	H 24	233, 234	
22	H 25	235	
23	H 26	236, 237	
24	H 27	238	
25	H 28	239	
26	H 29	240, 241, 242	
27	H 30	250	
28	H 31	251	
29	H 32	252	
30	H 33	253	
31	H 34	254	
32	H 35	255	
33	H 36	256	
34	H 37	257	
35	H 38	258	
36	H 39	259	
37	H 40	260	
38	H 41	265	
39	H 42	266-270	
40	H 43		

41	I 11	271	
42	I 12	272/3	
43	I 13	274	
44	I 14	275/7	
45	I 15		
46	I 16	278/282	
47	I 17		
48	I 18	283	
49	I 19	284/5	
50	I 20	286	
51	I 21	287/4	
52	I 22		
53	I 30	290	
54	I 35	291	
55	I 36	292-5	
56	I 37		
57	I 38	296-300	
58	I 39		
59	I 40	301, 302	
60	I 41	303	
61	I 42	304, 305/4	
62	I 43	308-40	
63	I 44		
64	I 45	315	
65	I 46	316	
66	I 47	317-21	
67	I 48		
68	I 49	322-6	
69	I 50		
70	I 51	327	
71	I 52	328	
72	I 53	329	
73			
74			
75			
76			
77			
78			
79			
80	H 80	WELL	

SS 418 DISABILITIES

New Card 2



1	SS418			41	K29	497	
2	2			42	K30		511
3	} SERIAL			43	K31	498	
4				44	K32		512
5				45	K33	499	
6				46	K34		513
7				47	K35	500	
8	J8	450	462	48	K36		514
9	J9	451	463	49	K37	501	
10	J13	452	464	50	K38		515
11	J17	453	465	51	K39	502	
12	J21	454	466	52	K40		516
13	J25	455	467	53	K41	503	
14	J29	456	468	54	K42		517
15	J33	457	469	55	K43	504	
16	J37	458	470	56	K44		518
17	J41	459	471	57	K45	505	
18	J45	460	472	58	K46	521/3	
19	J49	461		59	K47	} 524/6	
20	K8	475		60	K48		
21	K9	476		61	K49	527/4	
22	K10	477		62	K50	} 530	
23	K11	478		63	K51		531
24	K12	479		64	K52	532	
25	K13	480/2		65	K53	} 541/7	
26	K14	483		66	K54		
27	K15	485/7		67	K55	548	
28	K16	488		68	K56	549	
29	K17	489/491		69	K57	532-4	
30	K18	492		70	K58	} 535-7	
31	K19	505		71	K59		
32	K20	506		72	K60	533-340	
33	K21	493		73	K61	521	
34	K22	507		74	K62	542	
35	K23	474		75	K70	550 Register	
36	K24	508		76			
37	K25	495		77			
38	K26	509		78			
39	K27	496		79			
40	K28	510		80	J80	WEIGHT	

SS418 DISABILITIES  
NEW Card 3

1	SS418		
2	3		
3			
4			
5			
6	SERIAL		
7			
8	E8	559	560 561
9	E9	562	
10	E10	563	
11	E11	564	565/7 568
12	E12	570	
13	E13	571	
14	E14	572	
15	E15	573	
16	E16	574	
17	E17	575	
18	E18	576	
19	E19	577	
20	E20	578	
21	E21	579	
22	E22	580	
23	E23	581	
24	E24	582	
25	E25	583	
26	E26	584	
27	E27	585	
28	E28	586	
29	E29	587	
30	E30	588	
31	E31	589	591
32	E32	590	
33	E33	591	594/8
34	E34	600	601
35	E35	602,3	604/8
36	E36	605	
37	E37	606	607/8
38	E38	609-11	
39	E39	612	
40	E	613	

41	E41	614	
42	E42	615-8	
43	E43	619	
44	E44	620	
45	E45	621-4	
46	E46	625	
47	E47	626	
48	E48	627-631	
49	E49		
50	L8	639	<del>639-4</del>
51	L9	640-642	
52	L10	643-6	
53	L11	647	648
54	L12	649	
55	L13	650-2	
56	L14	653	654-8
57	L15	659-3	
58	L16	660-3	
59	L17	661,5	
60	L18	666	
61	L19	667	
62	L20	668	
63	L21	669-671	
64	L22	672-5	
65	L23	676	
66	L24	677-81	
67	L25	682-6	
68	L26	687	
69	L36	688	
70	L46	689-694	
71	L47		
72	L48		
73	L49		
74	L50		
75	L51		
76	L52		
77	L53		
78	L54		
79	L55		
80	L56	695-700	

700 701



CARD B

SERIAL NO. 3-7

SS 118 8.

Date viewer

Authorisation No

SD 15/16/17

(1) Date of interview

Punch card  
18/19, 20/21  
DAY MONTH

Person interviewed

Subject (singly)  
Subject (jointly)  
Subject helped by proxy  
Proxy (state relationship)

1  
2 S.C.  
3  
4 22

Serial Nos

0	0	0	0	0	0	1-9
1-9	1-9	1-9	1-9	1-9	1-9	X

(v) Name of subject

Address

Where subject is at home but is too confused or blind, or too ill to be interviewed (excluding temporary illness where an interview may be carried out at a later date), someone who is responsible for looking after the subject (a proxy) should be asked

(vi) If Refusal - Reason - giving as much detail of capability as possible, e.g. if seen, unable to walk with stick, etc., or out at work. Get Household composition inc. as much detail as possible

IF MORE THAN 8 LINES, PUNCH O/C Y ON COL 80 OF FIRST "B" CARD

23/24

any age 100 above punch on 99

HOUSEHOLD COMPOSITION

one code entered in this column

(a) Relationship to subject	(b) Rinc code to indicate subject	(c) Sex M F	(d) Age 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99	(e) Marital Status Md Sgl Wd			(f) Working? (Any number of hours) Full time Part time Unemp Sick (unpaid) Rtd H/wife Student					(g) Bedfast or Chair-rast		Able to get out
				1	2	3	4	5	6	7	8	9	10	
25/26	1	M	30			16								
32/33	2	F	35			27								
39/40	3	F	42			44								
46/47	4	F	48			51								
53/54	5	F	55			58								
60/61	6	F	62			65								
67/68	7	F	69			72								
74/75	8	F	76			79								
32/33	9	F	34			37								
39/40	10	F	41			44								
46/47	11	F	48			51								
53/54	12	F	55			58								
60/61	13	F	62			65								
67/68	14	F	69			72								
74/75	15	F	76			79								

of continuation... a b c d e f g h i j k l m n o

# SS 418 DISABILITIES

NEW CARD 0, Pink top

1	SS 418		41	70	D 8
2	0 (zero)		42	71,2	D 9
3	SERIAL	B3 A3 3	43	74	D 10
4		B4 A4 4	44	75	D 11
5		B5 A5 5	45	76	D 12
6		B6 A6 6	46	77	D 13
7		B7 A7 7	47	78	D 23
8	SAMPLING SERIAL	B8 A8 8	48	79	D 24
9		B9 A9 9	49	80	D 25
10		B10 A10 10	50	81-83	D 33
11		B11 A11 11	51	81	D 34
12		B12 A12 12	52	85	D 35
13		B13 A13 13	53	85	D 36
14		B14 A14 14	54	85	D 37
15	Relation to HOH	A 15	55	85	D 38
16		16	56	85	D 39
17	SEX	17	57	90, 92	D 40
18	AGE	18	58	92	D 41
19		18	59	94, 97	D 42
20	Marital Status	A19	60	95	D 43
21	Wkg <sup>21</sup> & bedfast <sup>22</sup>	Bc/A20	61	95	D 44
22	LINE NO.	23	62	95	D 45
23		23	63	90, 103	D 46
24	NO in household inc. inf <sup>24</sup>	24B	64	100	D 47
25	Total earners excl. inf <sup>25</sup>	25B	65	105	D 48
26	Total bedfast	26B	66	110	D 49
27	Total household	27B	67	110	D 50
28	Total upper	31/32 A49	68	117	D 51
29	extremity score o/c 33-35	A50	69	117	D 52
30	Lower total	36/37 A59	70	110	D 53
31	o/c 38 39 40	A60	71	111	D 54
32	Lower total	41/42 A61	72	100-104	D 55
33	c/c 43, 44, 45	A62	73	115	D 56
34	Comb. total	46/47 A63	74	100-104	D 57
35	c/c 48, 49, 50	A64	75	117	D 58
36	Comb total	51/52 A65	76	117	D 59
37	c/c 53 54 55	A66	77		
38	On L Stairs	6c A67	78		
39	Blind?	61 A68	79		
40	Good/bad day (?)	A73	80		

WEIGHT ONLY (D 8)

# SS418 DISABILITIES

New card 1



1	SS418		
2	1		
3			
4	SERIAL		
5			
6			
7			
8	H8	210	
9	H9	} 211	
10	H10		212
11	H11	} 213	
12	H12		
* 13	H15	15 (9=9 or more)	214
14	H16	216	
* 15	H17	18 (9=9 or more)	218
16	H19		219, 220/2
17	H20	223	
18	H21	224	
19	H22	227, 230	
20	H23	231/2	
21	H24	233, 234	
22	H25	235	
23	H26	236, 237	
24	H27	238	
25	H28	239	
26	H29	240, 241, 242	
27	H34	250	
28	H37	251	
29	H40	252	
30	H43	253	
31	H46	254	
32	H49	255	
33	H52	256	
34	H55	257	
35	H58	258	
36	H61	259	
37	H64	260	
38	H8	265	
39	I 9	266-270	
40	I 10		

41	I 11	271	
42	I 12	272/3	
43	I 13	274	
44	I 14	} 275/7	
45	I 15		
46	I 16	} 278, 280	
47	I 17		
48	I 18	283	
49	I 19	284/5	
50	I 20	286	
51	I 21	} 287/9	
52	I 22		
53	I 30	290	
54	I 35	291	
55	I 36	} 292-5	
56	I 37		
57	I 38	} 292-300	
58	I 39		
59	I 40	301, 302	
60	I 41	303	
61	I 42	304, 305/9	
62	I 43	} 308 10	
63	I 44		
64	I 45	315	
65	I 46	316	
66	I 47	} 317-21	
67	I 48		
68	I 49	} 322-6	
69	I 50		
70	I 51	327	
71	I 52	328	
72	I 53	329	
73			
74			
75			
76			
77			
78			
79			
80	H 80	WEIGHT	205

SS 418 DISABILITIES

New Card 2

1	SS418		
2	2		
3			
4			
5			
6			
7			
8	J8	150	<del>462</del>
9	J9		462
10	J13	452	463
11	J17	453	464
12	J21	451	465
13	J25	452	466
14	J29	456	467
15	J33	451	468
16	J37	458	469
17	J41	459	470
18	J45	460	471
19	J49	461	472
20	K8	475	
21	K9	476	
22	K10	477	
23	K11	478	
24	K12	479	
25	K13	480/1	
26	K14	481	
27	K15	482/7	
28	K16	483	
29	K17	484/471	
30	K18	485	
31	K19	486	
32	K20	487	
33	K21	490	
34	K22	507	
35	K23	510	
36	K24	508	
37	K25	41	
38	K26	1	
39	K27	416	
40	K28	510	

41	K29	492	
42	K30		511
43	K31	493	
44	K32		512
45	K33	491	
46	K34		513
47	K35	500	
48	K36		514
49	K37	1	
50	K38		515
51	K39	502	
52	K40		516
53	K41	503	
54	K42		517
55	K43	504	
56	K44		518
57	K45	500	
58	K46	521/2	
59	K47	524/6	
60	K48		
61	K49	521/1	
62	K50	530	
63	K51	531	
64	K52	542	
65	K53	544/7	
66	K54		
67	K55	548	
68	K56	549	
69	K57	532-4	
70	K58	535-7	
71	K59		
72	K60	533-4	
73	K61	41	
74	K62	542	
75	K76	550 Register	
76			
77			
78			
79			
80	J80	WEIGHT	

SS418 DISABILITIES  
NEW Card 3

1	SS418		
2	3		
3			
4			
5			
6	SERIAL		
7			
8	E8	559	560 561
9	E9	562	
10	E10	563	
11	E11	564	565/7 568
12	E12	570	
13	E13	571	
14	E14	572	
15	E15	583	
16	E16	572	
17	E17	578	
18	E18	584	
19	E19	573	
20	E20	570	
21	E21	585	
22	E22	574	
23	E23	580	
24	E24	586	
25	E25	575	
26	E26	581	
27	E27	587	
28	E28	576	
29	E29	582	
30	E30	588	
31	E31	590	591
32	E32	592	
33	E33	593	594/6
34	E34	600	601
35	E35	602,3	604/6
36	E36	605	
37	E37	606	607/8
38	E38	609-11	
39	E39	612	
40	E40	613	

41	E41	614	
42	E42	615-8	
43	E43	619	
44	E44	620	
45	E45	621-4	
46	E46	625	
47	E47	626	
48	E48	627-631	
49	E49		
50	L8	639	<del>640-4</del>
51	L9	640-642	<del>643-6</del>
52	L10	643-6	
53	L11	647	648
54	L12	649	
55	L13	650-2	
56	L14	653	654-8
57	L15	659	
58	L16	660-3	
59	L17	664, 5	
60	L18	666	
61	L19	667	
62	L20	668	
63	L21	669-671	
64	L22	672-5	
65	L23	676	
66	L24	677-81	
67	L25	682-6	
68	L26	687	
69	L36	684	
70	L46	681, 2, 5	
71	L47		
72	L48		
73	L49		
74	L50		
75	L51		
76	L52		
77	L53		
78	L54		
79	L55		
80	L56	699-700	<del>701-4</del>

700 701

REFERENCE  
C.O.S 3-7

X  
p.u.c.l.  
a.s.c. 2  
al 2

ENGLAND	
WALES	
SCOTLAND	

enter tick (✓)  
as appropriate

QUESTIONNAIRE REFERENCE	111
'SPECIAL CARE' GROUP	YES* NO*

1 Informant's household status Q 124 P 46 Note 5  
HOUSEHOLDER\*  
NON H/HLDR.\*  
BOARDER \*

2 Scale rates	Q.IV P.1. Note 7	Age	£ s. d.	£ s. d.
	Resp.		.	.
	Spouse		.	.
	Deps.		.	.
	"		.	.
	"		.	.
	"		.	.
	LTA		.	.

3 Rent etc. QQ 124, 126 P.46 Note 8  
... adjust for sublet etc. Q 142 P 51 Note 8

4 Special expenses Q 101 P 38 Note 9  
Q 145 P 52 Note 9

CODE	ITEM	Col (i) STATED COST	Col (ii) ALLOW
15/16 - 18 M.V. 1,4,12	LAUNDRY		17/5 19
20/21	D/A., CARE ETC.		22/13 24
28/29	HEATING		37/18 39
30/31	SPECIAL DIET		32/33 34
35/36	TRAVELLING EXP.		37/38 39
40/41	CLOTHING/SHOES		47/43 44
42	TELEPHONE		NIL
43/44	BEDDING ETC.		47/45 49
45	CONSUMER DURABLES		NIL
46	FRES - MED. TREAT.		NIL
47	AIDS ETC.		NIL
50/51	OTHERS: SPECIFY		54/53 54
TOTAL			TOTAL

NOTE  
Col II ALLOW  
CODES 000 = NIL MENTIONED  
ANY ITEM CODED 100/2 OR MORE  
HAS BEEN PUNCHED AS 999

ITEM D/A CARE ETC  
SINGLE PUNCHING = 01 or 04 or 12  
MULTI-PUNCHING = AS ABOVE  
EG CODES 1, 4, 12  
col 20 = 01 MC  
col 21 = 12 MC

TELEPHONE/DURABLES/FRES AND AIDS  
CAN BE MULTICODED ON COL 1  
in 4. Borne.

Where the item is shown  
but not the cost enter  
a tick (✓) in the  
appropriate box (col(i)).

- LTA  
TOTAL (ALLOW)  
TOTAL REQUIREMENTS

\*Delete inappropriate item(s).

P T O

5 Income	Col (i)	Col (ii)	Col (iii)
	'EXCESS INCOME' GROUP	OTHERS	
		WITH S.B.	WITHOUT S.B.
Q 131 (132) Usual wkly income			
	£ s. d.	£ s. d.	£ s. d.
Q 133 E's (s/empl.)	NK		
Q 134 E's (empl'd)	NK		
Q 135 E's (casual)	NK		
Q 136 State benefits	NK		
Q 137 Supn.	NK		
Q 138 Annuities	NK		
Q 139 Charitable pay'ts	NK		
Q 140 C.O., alimony etc.	NK		
Q 141 Vol. Payts.	NK		
Q 143 Others: specify:	NK		
Q 144 Capital	NK	NK	
(Note 12 )	NK	NK	£ s. d.
<b>INCOME TOTAL</b>			. . .

6 CALCULATION BOX

TOTAL REQUIREMENTS	£	.	.	
TOTAL INCOME	£	.	.	
BALANCE	£	2,000	2,000	

+ enter (1)  
 - enter (2) 59  
 (3)

7 Head of Supp. B. Unit - refer to item IV P.1. of questionnaire

Head of supp. b. unit

(a)

WORKING, FULL TIME		(1)
WORKING, PART TIME		(2)
UNEMPLOYED/SICK		(3) 60
RETIRED		(4)
HOUSEWIFE		(5)
STUDENT		(6)

(enter tick (✓) as appropriate)

(b)

RETIREMENT AGE OR OVER		(1) 61
UNDER RETIREMENT AGE		(2)

(enter tick (✓) as appropriate)

END CARD ON COL 61

# MASTER SCHEDULE

## DEAD OR IN INSTITUTIONS.

Questionnaire to be used where subject has died or entered permanently a hospital or other institution since the time of the postal enquiry.

CARD R

REF. No.  
COLS → 3-7

(i) Interviewer \_\_\_\_\_  
Authorisation No. ... **SD 15/16/17**

S.S. 418

8	9	10	11	12	13	14
0	0	0	0	0	0	0
1-9	1-9	1-9	1-9	1-9	1-9	1-9

(ii) Date of Interview **18/19** **20/21**  
DAY MONTH

Serial Nos (Blank = 0)  
..... (BLOCK CAPS)

(iii) Subject deceased ..... 1  
permanently in hospital/  
nursing home ..... 2  
permanently in Home/  
Institution ..... **29** **3** **MC**

(v) Name of subject .....  
Address .....

(iv) Person interviewed  
Subject ..... 4  
Specify relationship to subject ..... 5  
Subject helped by proxy ..... 6

**NOTE**  
**ALL CARDS HAVE COLS. 3-7 PUNCHED ON THEM.**  
**MFB.**

If unable to get interview, give as much information as possible about subject, cause of death or admittance to institution, and condition immediately before this.

(vi) HOUSEHOLD COMPOSITION at time of postal (Mid-June, 1968)

one code ringed in this column

(a) Relationship to subject	(b) Ring code to indicate subject	(c) Ringed figure	(d) ONLY COLS PUNCHED			(e) Mar. Stat. Wd.	(f) Working? (Any number of hours) Full time Part time Unempl. Sick (unpaid) Rtd. H/wife Student	(g) Bedfast or chair-fast	(h) Able to get out	
			1	2	3					
24/25 H.O.H	1	<b>23</b> 1-15 19	1	2	3	4	5	6	7	8
31/32	2	33	1	2	3	4	5	6	7	8
38/39	3	40	1	2	3	4	5	6	7	8
45/46	4	47	1	2	3	4	5	6	7	8
52/53	5	54	1	2	3	4	5	6	7	8
59/60	6	61	1	2	3	4	5	6	7	8
66/67	7	68	1	2	3	4	5	6	7	8
	8		1	2	3	4	5	6	7	8
	9		1	2	3	4	5	6	7	8
	10		1	2	3	4	5	6	7	8
	11		1	2	3	4	5	6	7	8
	12		1	2	3	4	5	6	7	8

**NOTE**  
Col. 78 = Q27d  
Col. 79 = Q28d  
Col. 80 = SUBJECTS AND INSTITUTIONS = 1  
a b c d e f g h i j k l m n o p q r s t u v w x y z

**ONLY THOSE ANSWERING Q27**

**READ CARD R HERE BUT PUNCH A 'J' ON COL. 73 IF THERE ARE MORE THAN 7 PERSONS IN THE HOLD.**

**IF THERE ARE MORE THAN 7 PERSONS PUNCH A 2nd CARD WITH COLS. 3-7, J ON COL. 8 FROM START AT 24-72.**

**Read Done**



# CARD 5

I understand that a few months ago (she) ..... **STARTS** [refer to postal] ... had difficulty .....

Omit question 1 for blind, amputees; check qn. where medical term given on postal e.g. "Did the doctor say ( ) had epilepsy?"

1. What did the doctor say was the cause of this?

Note

(y, x, 9) sc

and

(011-162) mc

Doctor didn't say .....  
 Hadn't seen doctor .....  
 D.N.A. Amputation .....  
 D.N.A. Blind .....  
 Doctor said (specify) .....

sc  
 Y ask(a)  
 X  
 0 mc  
 1  
 9 sc

Codes 0 and 1, can occur alone, or in conjunction with y, x, 9

If not seen doctor/doctor d'dn't say (Y,X)

(a) What did ( ) think was the matter with (her)?

(011-162) mc  
 Max: 5

9/10/11  
 12/13/14  
 15/16/17  
 18/19/20  
 21/22/23

**IF MORE THAN ONE COMPLAINT GIVEN in 1 or 1a** *ie if more than one of codes 0, 1, 011-162*

2. Which of these complaints (name them) caused the most difficulty?

QNS. 3-4 refer to main complaint

3. How long ago did this (main complaint) start causing (her) difficulties?

For amputees/blind - ask "How long ago did ( ) lose (her) ..... (leg/eyesight)?"

ONE Within last year  
 CODE No. of years ago  
 ONLY From birth

2  
 0  
 1-99 sc  
 Y

If difficulty remembering, try to get estimate and record here \_\_\_\_\_

Check:- If code x or 99 at Q 3, Q 3(a) DNA.

(a) That would mean ( ) was (age) years old when (her) difficulty started

41/42  
 Yrs. Old 43  
 0 or 1-3 digits

4. Was (main complaint) the cause of (her) [death/going to hospital/Home, etc.]?

If No (2) 3  
 (a) What was the cause?

NA.  
 Yes .....  
 No .....  
 One of the main complaints was the cause

4  
 1  
 2 ask(a)  
 3

Person looking after subject was ill.

(011-162) mc  
 444 Max: 5

45/46/47  
 48/49/50  
 51/52/53  
 54/55/56  
 57/58/59

# CARD S

5. Could ( ) usually get out of the house if the weather was not too bad?

Yes .. . . . . . Y ask(a)  
 No, housebound . . . . . X on to Qn.6

[Only to garden/front gate = No]

If got out (Y)

(a) Could ( ) usually get out

	on (her) own without sticks or aids and without difficulty . . . . .	0 on to Q.16 page 7
RUNNING PROMPT	on (her) own but only with aids or difficulty . . . . .	1 on to Q.7 next page
	or could (she) only get out if someone was with (her)? . . . . .	2 ask(1) 8 (11)

If could not get out on own (2)

(i) Who usually went with (her)?

(ii) Could ( ) generally get someone to go with (her) (take (her) out) when (she) wanted to go?

Yes .. . . . . . 9  
 No .. . . . . . 3 sc  
 4

If Housebound (X), or not on own (2)

6. But could ( ) Get about the house (walking or wheelchair) . . . . .  
 or Did ( ) have to sit in a chair when (she) was up . . . . .  
 RUNNING PROMPT  
 or Couldn't ( ) leave (her) bed? . . . . .

X sc  
 1 on to Q.7  
 2 ask(a)(b) overleaf  
 3 ask(b) overleaf

If chairfast (2)

(a) Could ( ) get in and out of (her) chair on (her) own without aid, or did (she) have to have someone to help, or a mechanical aid?

[ Sticks, etc. are counted as mechanical aids. ]

On own without aid . . . . . 6 sc  
 Someone to help . . . . . 7 mc  
 Mechanical aid . . . . . 8 ask(i)

If had mechanical aid (8)

(1) Could you describe it to me?

63 1-5 mc

# CARD 5

Qn. 6 (cont'd ...)

If chairfast or bedfast (2, 3)

(b) Could ( ) get in and out of bed on (her) own without aid, or did (she) have to have someone to help, or a mechanical aid?

[ Sticks, etc. are counted as mechanical aids. ]

On own without aid ..... 6 on to Qn.7  
 Someone to help ... .. 7 see note below  
 Mechanical aid ..... 8 ask(1)

If had mechanical aid (8)

(1) Could you describe it to me?

6H

9, y sc

1-5 mc

**IF WAS PERMANENTLY BEDFAST OR CHAIRFAST and could not get about the room in a wheelchair GO ON TO Q.19**

For those whose only disability was non-locomotive - e.g. Blind/epileptic . . . . . (code) . . . . .

4

X Go on to Qn.16

7. Did ( ) use any walking aids such as a stick, crutches, wheelchair or anything else?

[ Exclude stick for blind ]

No aids . . . . . 0 Go on to Qn.16

One stick (umbrella used as stick, etc.) . . . . . 1

Two sticks . . . . . 2

Walking frame/tripod, etc. . . . . 3 Ask qns. 8-9 of each aid

Wheelchair . . . . . 4

Elbow crutches ... ring 1 or 2 crutches and code . . . . . 5

Shoulder crutches ring 1 or 2 crutches and code . . . . . 6

Callipers/built-up shoes at least 1" on sole . . . . . 7

Other (describe fully) . . . . . 8

65 = 3-9

66 = 10-13

0

1

2

3

4

5

6

7

8

9-12

13 sc

mc

CODE ALL THAT APPLY

for each column (max no of cols = 4)

If more than one type of aid, write in code number and ask Qns 8-9 for each separately, working down columns	Aid 1 - Code	Aid 2 - Code	Aid 3 - Code	
8. Who supplied the .. (aid) .. ?	1-12 sc 67	70	73	76
9. Was it on free loan, did (she) pay for hire, or did (she) have to buy it for (herself)?	1-9 sc 68	71	74	77
Free loan . . . . . 1 ask Q.25				
Paid for hire . . . . . 2 ask (a)				
Bought . . . . . 3 ask (b)				
Personal gift/legacy . . . . . 4 ask Q.25				
	2 sc 69	72	75	78

IF USED A WHEELCHAIR ASK QNS 10-15 OTHERS GO ON TO QN.16

END OF CARD 5

CARD 1 STARTS

TO ALL WHO USED A WHEELCHAIR

10. Could ( ) get in and out of (her) chair on (her) own, (even if (she) had trouble doing it)?

Yes .. 8 .. 6  
No ..... 4 5 sc

11. For how long had ( ) been using a wheelchair?

Less than 6 months ..... 9 .. Y  
6 - 11 months ..... 0 sc  
No of years ..... 7 x

12. Did (she) use the wheelchair inside and outside?

Inside only ..... 1  
Outside only ..... 2 sc  
Both inside and outside .. 10 .. 3

13. Could ( ) use the chair on (her) own, or did (she) always have to be pushed?

Yes, used on own .. 1 ask (a)  
Used on own inside only .. 2 ask (a)  
Used on own outside only .. 3 (b) (c)  
Had to be pushed ..... 4 ask (b)  
(c)

If used on own (1,2,3)

(a) Was it electrically powered, or did ( ) propel it (herself) when (she) used it on (her) own?

Electrically powered ..... 5  
Self-propelled ..... 6 7 sc

If had to be pushed (2,3,4)

(b) Who usually pushed (her) chair (when (she) didn't do it (herself))?

12 oc  
sc 1-6 9 4, 2 0  
mc 7, 8  
sc 2

(c) Did (person) have any difficulty, or did (she) manage quite easily?

Managed easily ..... 8 sc  
Had difficulty ..... 9 ask(i)

If had difficulty (9)

(i) Why was that?

13  
1 sc  
2-5 mc

CARD T

Either

IF USED INSIDE (Qn.12 - codes 1,3)

D.N.A. - not used inside  
or Qs 14-15 apply

X go on to Qn. 16

14. Did using (her) chair in the house have any drawbacks, or cause any special difficulty?

- No .. 14
- Doors too narrow ..
- Knocks/collides with furniture ..
- Couldn't manage (internal) stairs/steps ..
- Others (specify) ..

- 0 sc
- 1
- 2
- 3 Mc
- 6
- 7
- 8 sc

15. Did ( ) have to re-arrange carpets or furniture to enable (her) to use (her) chair inside the house?

- Yes, re-arranged ..
- No ..

- 2 sc
- 1 ask(a)
- 2

If had to make re-arrangements (1)

(a) Did this involve (her) in any extra expense?

- Yes, extra expenses ..
- No ..

- 4
- 3 sc
- 4

17 Just before ( ) [died/went into a Home etc.] was (she) able to wash and dress (herself) and get to the toilet alright and things like that or did (she) need someone to help (her)?

Needed someone to help(her) ... 1 go to Qn.19  
 Managed alright ... .. 2

If subject was

CARD T

(a) permanently bedfast [Q.6, Code 3]  
 or (b) not bedfast, but confined to a chair and could not get in or out of the chair without the aid of some other person, [Qn 5a, code 7 or Qn.10, Code 5]

ASK QNS 19-39

OTHERS ASK QNS 17 and 18

17. Did ( ) generally have difficulty in	No difficulty		Difficulty		IF DIFFICULTY (1) = (a), (b) and (c)					
	0	1	a) Could (she) do it or (her) own even with difficulty?		b) Did (she) usually have someone (coming in) to help (her) with it?		c) Did (she) use any special aids or gadgets to help?			
			Yes	No	No	Someone h/d (specify)	Someone outside h/d (specify)	Yes	No	
(1) Getting in and out of bed or (her) own	0	1	2	3	4	5	6	7	8	9
(2) Getting to or using the toilet	0	1	2	3	4	5	6	7	8	9
(3) Having a bath	0	1	2	3	4	5	6	7	8	9
↳ a) Having an all over wash?	0	1	2	3	4	5	6	7	8	9
↳ b) Washing (her) hands and ... ?	0	1	2	3	4	5	6	7	8	9
(5) Putting on shoes and socks or stockings (herself)	0	1	2	3	4	5	6	7	8	9
(6) Doing up buttons and zips (herself)	0	1	2	3	4	5	6	7	8	9
(7) Dressing, other than buttons and shoes	0	1	2	3	4	5	6	7	8	9
(8) Feeding (her) self	0	1	2	3	4	5	6	7	8	9
(9) Combing and brushing (her) hair	0	1	2	3	4	5	6	7	8	9
(10) MEN ONLY shaving himself	0	1	2	3	4	5	6	7	8	9

18 Women or men who had been living alone

Just before (she) [died/went into a Home, etc.] did (she) do most of the (i) cooking?

Yes ... .. 1  
 No ..... 2  
 Don't know .... 3

(ii) the shopping?

Yes ... .. 1  
 No ..... 2  
 Don't kn ... 3

(iii) the housework?

Yes ... .. 1  
 No ..... 2  
 Don't kn ... 3

GO ON TO QN.40, P 16.

END OF CARD T

CARD 4 STARTS

Ask Qns. 19-39 of those who were/are permanently bedfast, chairfast or need(ed) a lot of looking after

19. If ( ) needed something and there was no-one in the room, how did (she) let someone know (she) wanted them -

(a) during the day?

18

0, 1-9 sc  
x, y

(b) during the night?

9

0, 1-9 sc  
x, y

(c) Whenever ( ) wanted something could (she) usually manage to attract someone's attention?

10

1-5 sc  
x

20. Once ( ) had (her) food, could (she)

(a) Cut it up (herself)?

Yes .//.  
No ..//..

x  
1  
2  
3 sc

(b) Get it to (her) mouth on (her) own or did (she) have to be fed?

Ate on own  
Had to be f

5  
6 sc  
4, y

21. What about drinking? Could (she) lift the cup (herself) or did (she) have to have help?

Could drink on ow  
Had to have help

7  
8 sc  
9, 0

# CARD 4

22. How did ( ) manage about washing (her) hands and face?

Did (she) have to have the water brought to-(her) or could (she) get to the wash-basin?

Had to be brought ... .. 4 sc  
 Got to the wash-basin ... .. 1  
 2 ask (a)  
 3

If could get to the wash-basin (2) or Urines (3)

(a) Could (she) get to the wash-basin on (her) own or did (she) have to have someone to help (he-)?

Names  
 12  
 Could go on own ..... 2 sc  
 Had to have help ..... 4  
 5 ask (i)

If had to have help (5)

(i) Who helped (her)?

13-14  
 4-9  
 10-19  
 4-9 sc  
 2-7 MC  
 1, 8-13, 16-19 MC

23. Once (she) had the water (or had got to the basin) could (she)

(a) Wash (her) own hands and face without help?

Yes ... 15  
 No ... .. 8 sc  
 9  
 4

24. What about a bath or a body wash?

Could (she) get to the bath or did (she) have to have an all-over wash?

Could get to the bath ..... 4 sc  
 Had all-over wash or no bath ... 1 ask (a)-(c)  
 2 ask (d)  
 next page

If could get to the bath (1)

(a) Could (she) get to the bathroom on (her) own or did (she) have to have someone to help (her)?

16  
 Could get to bathroom on own ... 3 sc  
 Had to have help ..... 4

(b) Could (she) get in and out of the bath on (her) own or did (she) have someone to help (her)?

Could get in/out of bath ..... 2  
 Needed someone to help ..... 5 sc  
 6

(c) Once (she) was in the bath could (she) bath (herself) without help?

Yes ... 17 sc  
 No ... .. 7 on to Q25  
 men, 26 women  
 8 ask (1)-  
 (11)

If No (8)

(i) Who washed her?

(ii) How often?

18-19  
 4, 2, 0 sc  
 2-7 MC  
 1, 8-13, 16-19 MC

GO ON TO QN. 25 IF SJT. MALE  
 OR QN 26 " " FEMALE

1-7, 9 sc  
 2  
 20



# CARD U

(Qn. 24 cont'd)

If had all over wash or no bath (2)

(d) Once (she) had the water, could (she) wash herself down without help?

Yes 21 .7 on to Qn25 men  
 Qn26 women  
 No 21 .8 ask (1) - (11)

If No (8)

(i) Who washed her?

22 = 4-9  
23 = 10-19

4, x, 0 sc  
2-7 MC 5 oc  
1, 8-13  
16-19 MC

(ii) How often?

24

1-7, 9 x

MEN ONLY

25. Could he shave himself or did someone have to do it for him?

Didn't have a shave 0 .0 - ask (a)  
 Shaved self ..... 25 .3 on to Qn26  
 Someone shaved him ..... 25 .4 - ask (b)  
 x (c)(d)

If didn't have a shave (0)

(a) Can you tell me why he didn't have a shave?

sc  
 on to Q 26

GO ON TO Qn. 26

If someone shaved him (4)

(b) Who shaved him?

26 = 4-9  
27 = 10-19

4, x, 0 sc  
2-7 MC 5 oc  
1, 8-13  
16-19 MC

(c) How often did he have a shave?

28

1-4, x sc  
5

(d) Did he have to pay anything? If so, how much?

or blank

# CARD 4

TO ALL

26. What about using the toilet - could (she)

RUNNING	get to the toilet on (her) own .....
PROMPT	get there only if helped .....
	couldn't get to the toilet, even with help?

29

(x) x (x) oc

1 on to Q32

2

3 - ask(a) over-coded x

4] MC

5] ask Q27

6 ask Q28

7 ask Q29

8 ask Q30

9 ask Q27

0, y or blank (NA)

If couldn't get to toilet (3) or, also uses other appliance/method (override x)

(a) What did (she) use?	Commode.....
INDIVIDUAL	Chamber ..
PROMPT	Bed pan .....
CODE ALL THAT	Tube or catheter .....
APPLY	MEN ONLY Bed bottle ..
	Other appliance or method (specify) ..

If used commode, chamber, other appliance (4, 5, 9, 0 or y)

27. Could (she) get to the (... appliance ...) on (her) own or did (she) have to have someone to help, (her)?

Could use on own	1 ask (a)
Had to have help	2 ask (b)-(d)

30

(x) x

1 ask (a)

2 ask (b)-(d)

MC

y, x, 0 x

(2-7) MC (y) oc

1, 8-13, 16-19 MC

If could use on own (1)

(a) Who emptied it?

4-9 = 10-19

31/32

Go on to Qn.32 UNLESS  
also used bed pan - ask Qn.28  
or catheter, tube - ask Qn.29  
or bed bottle - ask Qn.30

- 4-9 = 10-19

33/34

y, x, 0 x oc

(2-7) MC (y)

1, 8-13, 16-19 MC

y, x, 0 x oc

(2-7) MC (y) oc

1, 8-13, 16-19 MC

If had to have help (2)

(b) Who helped (her) and emptied it?

----- helped

----- emptied it

35/36

(c) About how many times a day did (she) generally need help with the (... appliance ..)?

(d) And what about during the night? Did (she) use it

RUNNING	Practically every night .....
PROMPT	Two or three nights a week
	About one night a week .....
	or Not very often? .....

37

(1-9) 0 x

(x) x

6] x

7] ask (i)

8-

9

38

If used during night (6, 7, 8)

(1) On the nights (she) did call someone, was it usually only once, or was it more often?

Usually only once

No of times .....

(If more often, specify usual number of times)

39

(x) x

1

2-9, 0 x

Go on to Qn.32 UNLESS  
also used bed pan - ask Qn.28  
or catheter, tube - ask Qn.29  
or bed bottle - ask Qn.30

# CARD 4

If used bed pan (6)

28. Did (she) keep it handy, or did (she) have to call someone to give (her) the bed pan during the day?

Kept it handy NA  
Had to call 40

NA  
y sc  
1 ask(a)  
2 ask(b)-(d)

If kept handy (1)

(a) Who emptied it?

3-9 = 10-19  
41/42

4, 2, 0 sc  
2-7 mc y oc  
1, 8-13 mc  
16-19 mc

GO ON TO QN.32 UNLESS  
also used catheter, tube - ask Qn.29  
or bed bottle - ask Qn.30

If had to call (2)

(b) Who gave it to (her) and emptied it?

----- gave it to her

----- emptied it

4-9 = 10-19  
45/46

4, 2, 0 sc oc  
2-7 mc y  
1, 8-13 16-19 mc

(c) About how many times a day did (she) usually need to be given a bedpan? ...

(d) And what about during the night? Did (she) need it

RUNNING  
PROMPT

Practically every night .....  
Two or three times a week 18  
About once a week .....  
Not very often? .....

4, 2, 0 sc oc  
2-7 mc y  
1, 8-13 16-19 mc  
1-9, 0 x, y

If used at least once a week (6, 7, 8)

(1) On the nights (she) did call someone was it usually only once, or was it more often?

(If more often, specify usual number of times )

Usually only once  
No. of times 49

2 sc  
6 ask(1)  
7  
8  
9

GO ON TO QN.32 UNLESS  
also used catheter, tube - ask Qn.29  
or bed bottle - ask Qn.30

If used tube or catheter (7)

29. Did (she) need any help because (she) had to use the tube (catheter)?

Yes 50  
No .....

NA  
y sc  
1 ask(a)  
2

If needed help (1)

(a) What needed to be done?

GO ON TO QN.32

If used bottle (8) - ask Qns. 30 and 31

30. Did he have to call someone to give him the bottle, or did he keep it handy during the day?

Had to call .51  
Kept it handy .1.  
2

2  
0  
1 ask(a)  
2

If had to call (1)

(a) About how many times a day did he have to ask for it?

59  
1-9, 0  
2, 4

31. And what about during the night? Did he keep it handy, or did he have to call someone during the night?

Had to call .....  
Kept it handy 53

0  
Y ask (a)(b)  
X  
1

If had to call (Y)

(a) Did this happen

RUNNING  
PROMPT

NA  
Practically every night .....  
Two or three times a week ..  
About once a week . . . . .  
Not very often? . . . . .

5  
6  
7  
8  
9

(b) And on the nights he had to call someone, was it usually only once, or was it more often?

(If more often specify usual number of times)

Usually only once 54  
No of times . .

1  
2-9, 0, 2

ASK ALL

32. Could (she) brush and comb (her) hair, or did someone have to do it for (her)?

Bald .. . . . . .  
Could brush or comb own hair ...  
Someone had to do it .....

4  
X  
1  
2

33. Could (she) dress or undress (herself), or change (her) clothes without help, or did someone have to help (her)?

Could dress/undress . . . . .  
Needed help .....

55  
0, 3  
4 on to Q34  
5 ask (a)

If needed help (5)

(a) Could (she) do

RUNNING  
PROMPT

Most of (her) own dressing .....  
Only some things for (herself) ....  
or Did you have to do practically all  
(her) dressing for (her)? .....

6  
7  
8  
9

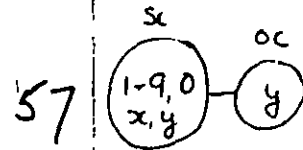
# CARD 4

34. Could (she) change (her) position in bed without someone helping (her)?

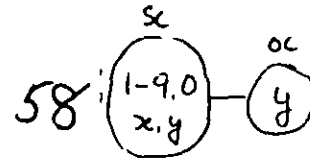
Could change position ..... 3 on to Q35  
 Needed help ..... 4 ask(a)(b)

If needed help (4)

(a) How often during the day did (she) need help to change (her) position in bed?



(b) How often during the night [did (she) need help in changing (her) position in bed]?



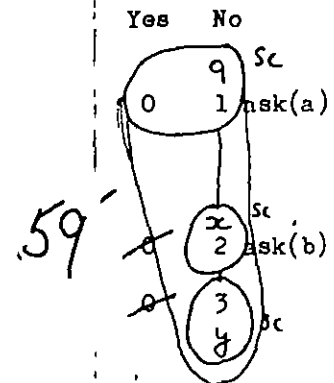
Code Qns. 35 and 36 if observed or already known, otherwise ask subject or proxy -

35. Could (she) make (her) wishes known by speaking?

If not (1)

(a) in writing?

(b) by signs?



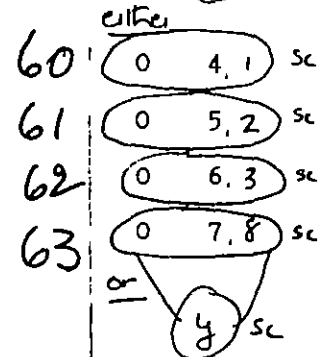
36. Could (she) on (her) own,

a) get out of bed?

b) get out of (her) chair?

c) walk unaided (no sticks)?

d) use stairs unaided?



END CARD 4

CARD V STARTS

ASK Qns 37 - 39 of PROXY only, OUT OF HEARING OF INFORMANT.  
 If interviewing subject, or subject present, go on to Q.40 and defer the rest of the questions in this section till end of interview

37. Did (she) have any trouble holding (her) water?

Yes ..... 1 ask Qn.38  
 No ..... 0 on to Qn.39

IF YES 1

38. Did (she) wet (her) clothes, or the bed?

Wet clothes ... 2 MC  
 Wet bed ... 3  
 Neither ... 4

39. Did (she) soil (her) clothes or the bed?

Soiled clothes ... 5 ask  
 Soiled bed ... 6 (a)(b)  
 Neither ... 7  
 8  
 9 SC

Check back to Qn.38, if code 2 or 3 ask (a), otherwise go on to Qn.40

If soiled or wet clothes or bed (2, 3, 5, 6) at Q38  
5, 6, 8 at Q39

(a) How often did you have to change (her)?

9 1-6, 9, 0, X SC

(b) Did you use anything to protect the bedding or clothes?

Yes .. 10 1 ask (i)-  
 No .. 2 (iii)

If used protection (1)

(i) What did you use?

(ii) Who supplied (item used)?

(iii) Did you (someone in household) have to pay for them/it? If so, how much? (Note how often)

11	14	17
MC <u>1-6, 9</u>		
12	15	18
MC <u>1-3X</u>		
13	16	19
SC <u>0, 1, 2X</u>		

# CARD V

TO ALL

40. Was ( ) on the Local Authority Register for Handicapped people?

Yes ..... 20  
 No .....  
 Don't know .....  
 N.A. X  
 1  
 2  
 3

M.C.  
 J

41. Did ( ) have any of these come to visit or help(her)?

N.A TO WHOLE OF Q41

	D K	No	Yes	If Yes			
e) Home help	21	X	0	1	How many hours a week?	29/30	x, 1, 2 DKS
b. Meals on Wheels	24	X	0	2	How many meals a week?	25	x, 1-7
c) District nurse/male nurse	26	X	0	3	How often did she come?	27	x, 1-9
d) Health Visitor	28	X	0	4		29	..
e) Social worker	30	X	0	5		31	..
f) Occupational therapist	32	X	0	6		33	..
g) Physiotherapist	34	X	0	7		35	..
h) chiropody	36	X	0	8	How often did ( ) have (her) feet done?	37	..

j) Any other health/welfare services (specify) 38 X 0 9

40	→ 11	39	"
41	→ 17	41	"
42	→ 18	43	"
43	→ 19	45	"
44	→ 19	47	"

**NOTE** IF X or 0 CODED HERE LINE J ONLY, THEN SPACE TO Q42 col 48

**IF CODED**  
 PUNCH THE UNIT FIGURE ONLY ON ITS PARTICULAR ASSOCIATED COLUMN

42. Did ( ) have an invalid tricycle or a motor car adapted for (her) disability?

Yes, invalid tricycle ..... 1  
 Yes, adapted car .. 27  
 No .... 48  
 Don't know ..... 4  
 N.A. X

CARD V

Could I ask you a little about the amenities (she) had.

43. How old is this (was (her)) house? Pre 1914 .....  
 [If dwelling built-on - age of Inter-war (1919-1945) .....  
 part lived in by (her) household] Post war (after 1945) .....

Y  
X  
1  
2  
3

S.C

44. How long had ( ) lived at this address? 50/51 yrs.  
 (10, 4, X or 120ks)

45. Type of accommodation

- ..... Old people's flat/bungalow (any accommodation with warden) .....
- L.A. Old people's flat/bungalow/bedsitter/one bedroom .....
- L.A. purpose built dwelling for handicapped people .....
- Purpose built (Vol. Agency) flat for old or handicapped .....
- Purpose built (Vol. Agency) house for old or handicapped .....
- Other flat in block/maisonette .....
- Self-contained flat in house .....
- Room(s) in house (not self-contained) or lodging house (no service) .....
- Bungalow, one storeyed cottage, or duplex, prefab, etc. ....
- Whole house/cottage (more than one storey) .....
- Non-permanent dwelling - caravan/tent etc. (not prefab.) .....
- Hotel/boarding house/hostel (some service) .....
- Others (specify) .....

Y  
X  
0  
1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12

S.C

46. Did (she) have

- CODE ALL (Mains) Electricity laid on .....  
 THAT APPLY (Mains) Gas laid on .....  
 Neither gas nor electricity .....

X  
7  
8  
9

S.C

47. Did (she) have a kitchen (whatever it's called)?

Establish if necessary whether sole use or shared with other households

- Sole use of kitchen .....
- Shared use of kitchen .....
- No kitchen .....
- D.N.A. Hotel/boarder .....

X  
1  
2  
3  
4

ask(a)

If no kitchen (3)

- (a) Did (she) have any cooking facilities (able to boil at least one saucepan)?

- Some cooking facilities .....
- No cooking facilities .....

55



CARD V

48. Did (she) have a fixed bath? [Include bath fitted in kitchen]

[Establish if necessary whether sole use or shared with other households]

Sole use of fixed bath ..... 56  
 Shared fixed bath ... ..  
 No fixed bath . . . . .

X  
1  
2  
3

49. Did (she) have a piped hot water supply inside the dwelling?

[Check if necessary whether shared]

Sole use of piped hot water .....  
 Shared piped hot water .. ..  
 No piped hot water .. . . . .

Y  
4  
5  
6

50. What about cold water. Did (she) have piped cold water inside the dwelling?

[Check if necessary whether shared]

Sole use of piped cold water ...  
 Shared piped cold water .....  
 No piped cold water .. . . . .

0  
7  
8  
9

51. Did (she) have a w.c (flush toilet)?

[Check if shared]

Sole use of w.c. . . . .  
 Shared w.c. with other h/ds .....  
 No w.c. . . . .

1  
2  
3  
4

If no w.c. substitute "toilet" or if known, earth/chemical closet, etc. for (a) - (c)

(a) Did she have an indoor w c./toilet?

[2 w c.'s 1 in, counts as Yes]

Yes, indoor . . . . .  
 No, outside only .. . . .

Y  
X  
9

(b) During the day did (she) have to go up or downstairs to use a w c./toilet?

[Irrespective of whether inside or out]

ONE CODE ONLY  
 Yes, up or downstairs .....  
 No, same level (inc. 1 or 2 steps) ... ..  
 D.N.A - used commode, etc. ....

X  
1  
2  
3

(c) During the night did (she) have to go up or downstairs to use a w.c./toilet?

[Irrespective of whether inside or out]

ONE CODE ONLY  
 Yes, up or downstairs .. . . .  
 No, same level (inc. 1 or 2 steps) .....  
 D.N.A. - used commode, etc. ....

4  
5  
6  
Y

CARD V

52. We'd like to know something about (her) financial position.

About how much a week was (her) total income?

60

Informant (incl. spouse if had joint income)

34, 56

Spouse if had separate income

05  
E 1-3d(a) - 1-2d(a) - 12 WHETHER INCOME IS SINGLE | JOINT B.

61/62/63 Don't know 64/65 - ask (a) 66

If Don't know (X)

(a) Was (she) getting a Supplementary Pension or Allowance (Nat. Assistance)?

Yes ..... 1  
No ..... 2  
Probably ..... 3 sc  
Don't know ..... 4

END OF CARD V.

Disabilities Edit 1 Run 1Item Definitions

2	<u>Weight Item</u>	• 04	Grey non-weights
		16	Grey weights
		10	Unweights
		40	Weights

3 Special Sample

DNA Weighted sample or unweights if female or NA to sex

H25 = 1 ♀

H26 = 1 ♀

H27 = 1 ♀

H28 = 1

}	1	Q14 not 5 and not 7
	2	Q14 = 5
	3	Q14 = 7

}	4	Q14 not 5 and not 7
	5	Q14 = 5
	6	Q14 = 7

Those not coded above

5 No of persons in household

8

1	• no persons under 11 with relationship code 5 or 6
2	• persons " " " " " " " " " "

9

1	• no persons under 16 with relationship code 5 or 6
2	• persons " " " " " " " " " "

12 Persons per bedroom

NA • NA to no of bedrooms

1	• less than, or equal to 15 persons per bedroom
2	• greater than 15 persons per bedroom

- B5 Category
- 1
  - 2
  - 3
  - 4
  - 5
  - 6
  - 7
  - 8
  - 9 - Greys with category either 1 or 2
  - 10 - All schedules with category 1 or 2

B7 Combinations of NA codes for income section

- |    |       |     |                  |
|----|-------|-----|------------------|
| 1  | Blank |     |                  |
| 2  | 3 s/c |     |                  |
| 3  | 4 s/c |     |                  |
| 4  | 5 s/c |     |                  |
| 5  | 6 s/c |     |                  |
| 6  | Y o/c |     |                  |
| 7  | Y + 3 | m/c |                  |
| 8  | Y + 4 | m/c | at card B card O |
| 9  | Y + 5 | m/c |                  |
| 10 | Y + 6 | m/c |                  |
| 11 | X s/c |     |                  |
| 12 | X + 3 | m/c |                  |
| 13 | X + 4 | m/c |                  |
| 14 | X + 5 | m/c |                  |
| 15 | X + 6 | m/c |                  |

- B9 Income per week - Taken from card O cols 9/10/11  
 If these cols were blank ~~00~~, the figure was taken from  
 card N cols 55/56 If these were <sup>also</sup> blank ~~00~~ then the item was made NA

- |   |       |    |              |
|---|-------|----|--------------|
| 1 | 10-15 | 10 | 145-150      |
| 2 | 5-10  | 11 | 150 and over |
| 3 | 10-15 |    |              |
| 4 | 15-20 |    |              |
| 5 | 20-25 |    |              |
| 6 | 25-30 |    |              |
| 7 | 30-35 |    |              |
| 8 | 35-40 |    |              |
| 9 | 40-45 |    |              |

~~Make 20/25/30/35/40/45~~

90 1 = not coded 2 below  
 2 = female, married, aged 16-59 incapable of doing own housework  
 12 A16 = 2 A19 = 3 A17/18 is 16-59 D10 = 3

91 Working Status

1	Q14 = 1 or 2	9	Q41/42	10	1+30
2	.	9	Q41/42	10	31 and over
3	.	7	Q41/42	10	NA
4	Q14 = 4				
5	Q14 = 5 or 6				
6	Q14 = 7				
7	Q14 = 9				
8	Those not coded above				

92 Prescription Charges

1	C73/74 = 0		
2	1	}	C72 = 1
3	2		
4	3		
5	4		
6	x, y or blank		
7	C72 = 0, 9, x or y		
NA	Those not coded above		

95 Special Diets

1	N35 = 0		
2	N36 → 39	20	1-9s
3	.	0	10-19
4	.	1	
5	.	2	and over
6	.	NA	
7	N24 = y		

} N24 ≠ y

93 Domestic Help  
 2  
 3  
 4  
 5  
 6  
 7  
 8  
 9

94 Heating  
 2  
 3  
 4  
 5  
 6  
 7  
 8

96 Travel expenses

1	N40 = 0 or N45 → 4B = 0		
2	N45 → 4B	£0	1-9s
3		0	10-19
4		1	
5		2	
6		3 and over	
7		NA	
8	N24 = y		

} N24 ≠ y

97 Total expenses

1	from 93, 94, 95 and 96 <u>all</u> code 1		
2	The sum of amounts in	£0	1-9s
3	N26 - 29	0	10-19
4	+ N31 - 34	1	
5	+ N36 - 39	2	
6	+ N41 - 44	3	
7		4	
8		5 and over	
9	from 93 = code 8 <u>and</u> from 94 = code 7 <u>and</u> from 95 = code 6 <u>and</u> from 96 = code 7		
10	N24 = y		

} N24 ≠ y

98 Age

- 1 . 16-19
- 2 . 20-29
- 3 . 30-39
- 4 . 40-49
- 5 . 50-59
- 6 . 60 and over

- 99 DNA card 0 or B is s/c 3 or s/c 4 or x or y
- 1 No benefits (ignoring whether have/have not FAM)
  - 2 Benefits other than FAM

ITEM DEFINITIONS

2 Weight Item = 0.4 Grey non-weights  
 = 1.6 Grey weights  
 = 1.0 Unweights  
 = 4.0 Weights

3 Special Sample DNA 'Weighted' sample or Unweights if female or NA to sex

H25=1 & H26=1 & H27=1 & H28=1	{ <ul style="list-style-type: none"> <li>1</li> <li>2</li> <li>3</li> </ul>	G14 not 5 and NOT 7	}	The rest	
		G14 = 5			to ...
		G14 = 7			because ...

Those not coded above {
 

- 4
- 5
- 6

 G14 not 5 and not 7  
 G14 = 5  
 G14 = 7

15 No. of persons in Household

18

1	means no persons under 11 with relationship code 5 or 6
2	" There are " " " " " " " " " " " " " "

19

1	means no persons under 16 with relationship code 5 or 6
2	" There are " " " " " " " " " " " " " "

10 Persons per bedroom

NA NA to no. of bedrooms  
 1 Less than or equal to 1.5 persons per bedroom  
 2 Greater than 1.5 persons per bedroom

85 Category

1	}	4
2		
3		
4		
5		
6	-3	
7	}	5
8		
9	Greys with category either 1 or 2	
10	<del>All relatives with category 21</del>	

87

Combinations of NA codes for income section

- |    |           |                   |
|----|-----------|-------------------|
| 1  | Blank     | } at col 8 card 0 |
| 2  | 3 a/c     |                   |
| 3  | 4 a/c     |                   |
| 4  | 5 a/c     |                   |
| 5  | 6 a/c     |                   |
| 6  | Y a/c     |                   |
| 7  | Y & 3 w/c |                   |
| 8  | Y & 4 w/c |                   |
| 9  | Y & 5 w/c |                   |
| 10 | Y & 6 w/c |                   |
| 11 | X a/c     |                   |
| 12 | X & 3 w/c |                   |
| 13 | X & 4 w/c |                   |
| 14 | X & 5 w/c |                   |
| 15 | X & 6 w/c |                   |

89 Income per week

Card N ~~55/56/57/58~~

The figure was taken from ~~Card N~~

If these cols were blank the figure was taken from Card O cols 9-13. ~~Card N cols 55/56~~. If these were also blank then the Item was made NA.

The value figure was grouped as follows:-

- |     |                                     |
|-----|-------------------------------------|
| 1.  | <del>0</del> 0 - under 5            |
| 2.  | <del>6</del> 10 5 - under 10        |
| 3.  | <del>14</del> 15 10 - under 15      |
| 4.  | <del>16</del> 20 15 - under 20      |
| 5.  | <del>22</del> 25 20 - under 25      |
| 6.  | <del>26</del> 30 25 - under 30      |
| 7.  | <del>31</del> 35 30 - under 35      |
| 8.  | <del>36</del> 40 35 - under 40      |
| 9.  | <del>41</del> 45 40 - under 45      |
| 10. | <del>46</del> 50 45 - under 50      |
| 11. | <del>51</del> 55 or over 50 or over |
| 12. | <del>56 or over</del>               |

90

- |   |  |
|---|--|
| 1 | Not coded 2 below  |
| 2 | Female Married age 16-59 incapable of doing own housework.<br>i.e. A16 = 2 & A19 = 3 & A17/18 is 16-59 & D10 = 3 |



<u>91</u>	Working Status			
	<u>code</u>			
	1	G14 = 1 or X	and G41/42 is 1 → 30	
	2	"	and G41/42 is 31 and over	
	3	"	and G41/42 is NA	
	4	G14 = 4		
	5	G14 = 5 or 6		
	6	G14 = 7		
	7	G14 = 9		
	8	Those not coded above		

<u>92</u>	Prescription Charges			
	<u>code</u>			
	1	C 73/74 = 0 shillings	}	C72 = 1
	2	1		
	3	2		
	4	3		
	5	4		
	6	XY or blank		
	7			C72 = 0, 9, X or Y
	NA	Those not coded above		

<u>93</u>	Domestic Help				
	<u>code</u>				
	1	N25 = 0	}	N24 ≠ y	
	2	N26/27/28/29			≠ 0 1-9
	3	"			0 10-19
	4	"			1
	5	"			2
	6	"			3
	7	"			4 or over
	8	"			NA
	9			N24 = y	

<u>94</u>	Heating				
	<u>code</u>				
	1	N30 = 0	}	N24 ≠ y	
	2	N31-34			≠ 0 1-9
	3	"			0 10-19
	4	"			1
	5	"			2
	6	"			3 or over
	7	"			NA
	8				

95 Special Diets

code

- 1
- 2
- 3
- 4
- 5
- 6
- 7

N35 = 0  
 N36 → 39  
 "  
 "  
 "

1 <sup>sh</sup>  
 0 1-9  
 0 10-19  
 1  
 2 same  
 NA

N24 ≠ y

N24 = y

96 Travel expenses

code

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8

N40 = 0  
 N45 → 48  
 "  
 "  
 "  
 "  
 "

or N45 → 48 = 0  
 1 <sup>sh</sup>  
 0 1-9  
 0 10-19  
 1  
 2  
 3 same  
 NA

N24 ≠ y

N24 = y

97 Total expenses

code

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9

Item 93, 94, 95, and 96  
 The sum of the amounts in  
 N 26 → 29  
 5 N 31 → 34  
 4 N 36 → 39  
 5 N 41 → 44

all code 1  
 1 <sup>sh</sup>  
 0 1-9  
 0 10-19  
 1  
 2  
 3  
 4  
 5 6 over

N24 ≠ y

Item 93 = code 8 and Item 94 = code 7  
 and Item 95 = code 6 and Item 96 = code 7

10

N24 = y

98 Age

code

- 1
- 2
- 3
- 4
- 5
- 6

16-19  
 20-29  
 30-39  
 40-49  
 50-59  
 60 & over

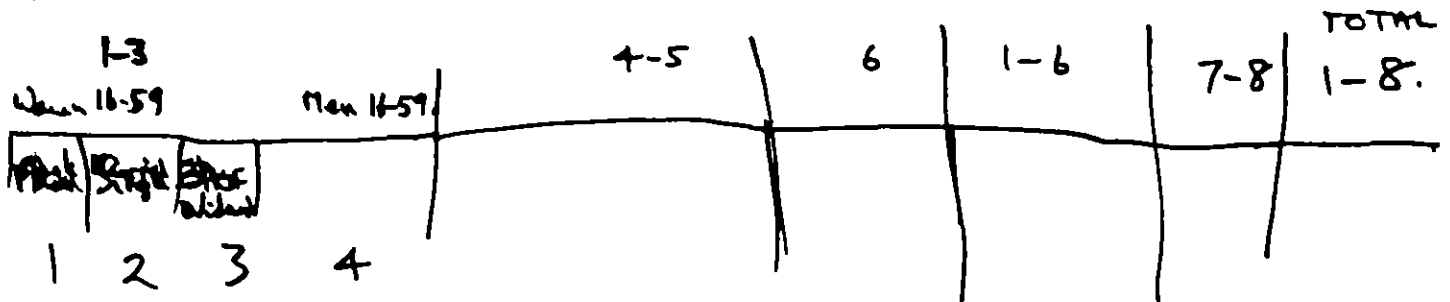
99

DNA and O<sub>2</sub> col 8 is  $s/c3$  or  $s/c4$   
or X or Y

- 1 No benefits (Ignoring whether they have or have not family allowance)
  - ~~2 ~~These These not coded above~~~~
  - 2 Benefits found other than family allowance
-

~~99 with success 4~~ → 101 → 199

New Item 300 GRT = 24 TYPE = 3



NA category unknown  
DNA outside age ranges

Working Status

New Item 400

GRT = ~~10~~ TYPE = 0

$$\text{VAR}(400) = \text{VAR}(42)$$

$$\text{IF}(\text{VAR}(42) \text{ EQ } 4) \text{ VAR}(400) = \text{VAR}(43) \text{ AND } \text{VAR}(43) \text{ GE } 1.0$$

$$\text{VAR}(400) = \text{VAR}(43) + 1$$

$$\text{IF}(\text{VAR}(400) \text{ GE } 3.0) \text{ VAR}(400) = \text{VAR}(400) - 1.0$$

Those not answering Qn 136 → 99 = DNA

~~yes to 136 (9)~~ → ~~MAZ~~

Yes to 136 (9)

GRT = 1 TYPE = 0

New Item 500

$$\text{VAR}(500) = -\text{ETA}$$

$$\text{IF}(\text{VAR}(99) \text{ EQ } -\text{ETA}) \text{ GO TO } 101$$

$$\text{VAR}(500) = \text{ETA}$$

$$\text{DO } 102 \text{ I} = 78, 83$$

$$102 \text{ IF}(\text{VAR}(\text{I}) \text{ EQ } 1.0) \text{ VAR}(500) = 1.0$$

2) 99 = 1 and 400 = 4 code 1  
99 = 7 and 400 = 7 code 7

card B Sex cc. 27, 34, 41, 48, 55, 62, 69, 76 (code 1, 2)  
 " Working Status cc. 31, 38, 45, 52, 59, 66, 73, 80 (code 1-5)

New Items

701

code	1	No dependent	
	2	1	"
	3	2	"
	4	3 +	"

✓

702

	1	no spouse	
	2	spouse not work	
	3	spouse working	

✓

703/4/5

1	No dependit	
2	No dependent	married
3	"	non-married
4	1	<del>total</del> No dependit
5	2	
6	3 +	
7	All married	
8	" non-married	
<del>9</del>	<del>All</del>	<del>N.A. to marital status.</del>
<del>10</del>	<del>All</del>	

706

2	informant work	CID = 1 or X
1 2	<del>not status</del> informant not work	CID = 2
3	other	

85-45 111 222 331  
1 1 85 9 9

T 410 89 6 85 3 6 2 6 702 33  
706 1 1

for 701 = 1 - 410  
2 - 411  
3 - 412  
4 - 413

all

N 584 0002 → 591 0002

N 592 0005 → 599 0005

N 701 0004 702 0003 703 3008 706 0003

T 414 89 6 703 6 6 2 6 706 2 2  
- 85 13  
85 46  
85 78  
HEE

N 300 3074 400 0010 500 0001 600 0001

For each area separately & for men & women separately:

Category & age  
Item 85 & Item 98

— categories item 2 = 1-4 w/ item  
item 4 = 1-1 men  
item 4 = 2-2 women

age grouped as follows

16-59	} for women
60-64	
65-74	
75- <del>80</del> 79	
80 and over	

16-04	} for men
65-74	
75- <del>80</del> 79	
80 and over	

if these 2 groups are a nuisance use the grouping for women for both men & women

1/11  
1/11

G	<del>7</del>	<del>7</del>	59	64	74	<del>79</del>	9999				
R	7	7	1	-1	4	1	1	7	2	5	

N 601 10~~5~~27 602 002~~2~~

G 601 602 ~~424 474 499 999 1024 1049 1299 1324~~

~~424~~ 474 <sup>499</sup> 999 999 ~~1024~~ 1049 1299 1324

1349 1374 1399 1424 1449 1474 1499 1524 1549

1574 1599 1624 1649 1674 1699 2449 2479 9999

~~20012 602 - 28012 - 100~~

G 602 602 22 1 2 22 3 22 4 22 6 7

8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 5 22

T	9001	<del>602</del> 801	-	<del>602</del> 7	100	2	-	4	1	1↑
T	9002	<del>801</del>	-	<del>602</del>	100	2	-	4	2	2↑

602 is 1 up to 22

601  
583/811

Index No	Card Type	Codes	codes	
1	A	4→7	numeric	Serial no
2	Weight			
3				
4	A	16	1,2	Sex
5				
6				
7	A	17/18	numeric	Age of informant
8				
9				
10	A	19	3→5	1→3 Marital Status of informant
11				
12				
13	A	80	9	1 For greys 1 = weighted
14				
15				
16	B	25/26	numeric	relationship Age.
17	B	28/29	numeric	
18	B	32/33	numeric	
19	B	35/36	num	
20	B	39/40	"	
21	B	42/43	"	
22	B	46/47	"	
23	B	49/50	"	
24	B	53/54	"	
25	B	56/57	"	
26	B	60/61	"	
27	B	63/64	"	
28	B	67/68	"	
29	B	70/71	"	
30	B	74/75	"	
31	B	77/78	"	
32	B	80	Y	1 means a continuation exists
33				
34				
35	C	72	Y, X, 0→9	1→12
36	<del>C</del>	<del>72</del>	<del>Y, X, 0→9</del>	
37				
38	C	73/74	numeric	
39	D	8	1	
40	D	10	3	1



			schedul codes	Team codes
41	E	34	Y,X	1,2
42	G	14	X,0,1,2	1,2,3,4
43	G	14	3→9	1→7
44	G	10	X,0	1,2
45	G	41/42	numeric	
46	G	78	1→4	1→4
47	H	17/18	numeric	
48	H	25	1	1
49	H	26	4	1
50	H	27	1	1
51	H	28	Y	1
52	J	<del>8</del>	<del>Y,X,0</del> <sup>1→8</sup>	<del>1,2,3</del> <sup>1→8</sup>
53	J	8	Y,X,0	1,2,3
54	N	24	Y	1
55	N	25	0	1
56	N	26/7/8/9	numeric	
57		<del>28</del>	<del>numeric</del>	
58	N	<del>29/30</del> 30	<del>numeric</del>	1
59	N	31/2/3/4	numeric	
60				
61	N	35	0	1
62	N	36/7/8/9	numeric	
63				
64	N	40	0	1
65	N	41/2/3/4	numeric	
66				
67				
68	N	45/6/7/8	numeric	
69				
70	N	55/56	numeric	
71	N	57/58	numeric	
72				
73	O	8	3→6	1→4
74	O	8	Y,X	1,2
75				
76	O	9/10/11	numeric	
77	O	12/13	numeric	
78	O	41	X,0→9	1→11
79	O	46	X,0→9	1→11
80	O	51	X,0→9	1→11

1 = acc G-hue  
 3 = working  
 4 = Not working  
 1 = Retired / 2 = H/W / 3 = sick / 4 = Unempl / 5 = Permanent disable

81	0	56	X,0-9	1-11
82	0	61	X,0-9	1-11
83	0	66	X,0-9	1-11
84				
85				
86				
87				
88				
89				
90				
91				
92				
93				
94				
95				
96				
97				
98				
99				
100				
101	H	19	Y,X,0	1→3
102	I	8	Y,X	1,2
103	I	35	0,1,2,3	1→4
104	I	45	1→4	1→4
105	I	47	Y,X,0,1	1→4
106	I	48	5	1
107	I	n/c 49/50	Y,X,0,1 5 60, 30, 1	1→21 m/c
108				
109				
110				
111				
112				
113				
114				
115				
116				
117				
118				
119				
120				

144  
144

121  
122  
~~123~~  
124  
125  
126  
127  
128  
129

~~K~~      ~~10~~      ~~3,4~~      ~~1,2~~  
~~K~~      76      ~~1 1~~  
 L      16      w/c Y,X,0\*9      1→12 w/c

130  
131  
132  
133  
134  
135  
136  
137  
138  
139  
140  
141  
142  
143  
144  
145  
146  
147  
148  
149  
150

L      56      Y,X,0,1      1→4  
 L      56      2,3,4      1,2,3  
 L      57      5→9      1→5  
 L      57      Y,X,0      1,3,3  
 L      58      Y,X,0,1,2      1→5  
 L      59      X,0→5      1→7  
 L      59      6→9      1→4  
 L      18      Y,X,0      1→3 (IF 2 make NA)  
 L      26      4,5      1,2  
 L      46      Y,Y,0      1→3 (IF 2 make NA)

New 1 - 124 s/c 3 // 2 - 124 s/c 2 // 3 - 124 scaled 1,4→12  
New 1 - 105 = 1 or 105 = 2 or 106 = 1 // 2 - 105 = 4

41 E 34 Y 5 X  
 191 K 10 122 3 out  
 102 K 76 123 1  
 103-124 L 16 124-128 m/c Y, X, 0, 1 to 9 Recode m/c 5  
 a/c 0 - 1  
 s/c X - 2  
 1-9 to y - 3

143

113 L 18 140 Y, X, 0 make X NA  
 114 L 26 141 4 to 5  
 115 L 46 142 Y, X, 0 make X NA

~~114~~ G 10 ~~Y, X, 0~~ - X to 0

~~117~~ H 19 101 Y, X, 0

~~118~~ ✓ I 8 102 Y, X

~~119~~ ✓ I 35 103 ~~Y, X, 0~~ 0, 1, 2, 3

~~120~~ ✓ I 45 104 1, 2, 3, 4

~~121~~ ✓ I 47 105 Y, X, 0 1 }  
 15 }

Yan X to 15 - 1  
 \* 1 - 2

144

~~122~~ ✓ I 48 106  
 123 I 49/50 m/c from Yan 49 to 6 on 50 m/c 7  
 124 107-113

$$\begin{aligned} \text{VAR}(52) &= \text{VAR}(120) \\ \text{GRT}(52) &= \text{GRT}(120) \\ \text{KYPE}(52) &= \text{KYPE}(120) \\ \text{VAR}(53) &= \text{VAR}(121) \\ \text{GRT}(53) &= \text{GRT}(121) \\ \text{KYPE}(53) &= \text{KYPE}(121) \end{aligned}$$

2001  
 DO I = 254, 283  
~~VAR(I)~~ J = I - 200  
 VAR(J) = VAR(I)  
 GRT(J) = GRT(I)  
 KYPE(J) = KYPE(I)

6

N

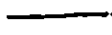
~~VAR(14) = 0~~  
~~VAR(14) = 15~~

K = VAR(70)  
K = K/5 + 2  
IF (VAR(71).EQ.0.0. AND. K.LT.2) ~~VAR(71) = 1~~ K=1  
IF (K.GT.12) K=12  
~~IF (VAR(70).EQ.ETA)~~  
VAR(33) = K  
IF (VAR(70).EQ.ETA) VAR(33) = ETA

K = VAR(70)  
K = K/5 + 2  
IF (VAR(77).EQ.0.0. AND. K.EQ.2) K=1  
IF (K.GT.12) K=12  
VAR(34) = K  
IF (VAR(76).EQ.ETA) VAR(34) = ETA

Previously Fernie prepared tables for DHISS on married women housewives

with the definition married women, aged 16-59 in categories 1-6 who were not working nor seeking paid employment  
 This gave a base of 313 women (1-6).



From his quote of "the sample contains just under 200 people" he really wants

married women aged 16-59 who cannot do their household chores because of their disability & who are neither working nor off-sick or unemployed & seeking work, in categories 1-8.

Totals	Category			
	1+2	4	} 31	} 125
	3	27		
	4	24		
	5	35		
	6	35		
	7	36	} 68	
	8	32		
NA to categ		4		4
		<u>197</u>		

37912  
SEMS

~~Married women aged 16-59 in categories 1 & 4~~

Married women who cannot do their own chores because of their disability and who are either not working because they are a housewife or because they are permanently disabled x age x cat x main cause of impairment.

Item 43 is 2 or 5 and Item 40 = 1