
National Survey of Hispanic Elderly People,
1988

English Questionnaire

Karen Davis and the Commonwealth Fund
Commission on Elderly People Living Alone

NATIONAL SURVEY OF HISPANIC ELDERLY PEOPLE, 1988

(ICPSR 9289)

English Questionnaire

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and

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Living Alone

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QUESTIONNAIRE

ENGLISH

Appendix B: Screening Questionnaire

HISPANIC ELDERLY

946502

HELLO, I'm (YOUR NAME) from Westat, a national research firm. We are conducting an important nationwide health study.

1. Are you or is anyone who usually lives in your household of Hispanic origin or descent? (IF NEEDED: Was your family originally from a Spanish speaking background?)

YES1
NO 2 (Q3)

2. Are any of the persons of Hispanic origin 65 years old or over?

YES1
NO2 (Q4)

3. And finally, is this (READ AREA CODE AND TELEPHONE NUMBER)

(_____) _____ ?
AREA CODE TELEPHONE NUMBER

YES 1 Thank you very much, but we are only interviewing people of Hispanic origin (who are 65 or over) [IF Q1 = 2, CODE '1'] IF Q2 = 2, CODE '0']

NO 2 Thank you very much, but I seem to have dialed a wrong number. It is possible that your number may be called again at a later time.

END

4. Is this (READ AREA CODE AND TELEPHONE NUMBER)

(_____) _____ ?
AREA CODE TELEPHONE NUMBER

YES 1

NO 2 Thank you very much, but I seem to have dialed a wrong number. It is possible that your number may be called again at a later time. (END)

5. Is this phone for.. (READ CATEGORIES)

Home use only , 1

Business and home use, or 2

Business use only? 3 Thank you very much but we are only interviewing in private residences. (END) (CODE "NR")

6. And are you a member of the household at least 18 years old?

YES 1

NO 2 (ASK FOR AN ADULT HOUSEHOLD MEMBER, IF NOT AVAILABLE, MAKE APPOINTMENT.)

NO HH MEMBER

18 OR OLDER 3 Thank you very much. At this time we are only interviewing in households with people who are 18 years of age or older. (END) (CODE "1")

7. This study is particularly interested in learning about the issues and problems faced by Hispanics who are 65 years old or over. So that I can refer to (them/him/her), may I please have (their/his/her) name(s)?

01. _____

02. _____

03. _____

04. _____

8. Do you have any other phone numbers in addition to (NUMBER FROM CALL RECORD) in your home? (IF YES, PROBE TO MAKE SURE IT IS A DIFFERENT TELEPHONE NUMBER.)

YES 1

NO 2 (BOX 1)

9. Is the other home phone number for ... (READ CATEGORIES)

Home use only , 1

Business and home use, or 2

Business use only? 3

BOX 1

ASK TO SPEAK WITH EACH PERSON IDENTIFIED IN Q7 AND CONTINUE WITH EXTENDED INTERVIEW.

Survey of Elderly Hispanics

conducted for

The Commonwealth Fund

Commission on Elderly Living Alone

ID 01:04

Card 1 05

Phone Number 06:16

RESPONDENT'S NAME: _____

PHONE NUMBER: _____

IF NEW RESPONDENT:

Hello my name is _____ and I'm calling from Westat, a private research firm. We are conducting a nationwide study of Hispanics who are 65 or older. Your opinions are very valuable to us and your participation in this survey is very important because it will help us to better understand the issues and problems that are faced by people like yourself.

Buenos (as) (días/tarde/noche) mi nombre es _____ y estoy llamando desde Westat, una firma privada que hace estudios en diferentes tópicos. Estamos realizando un estudio a través de todo el país de Hispánicos que tienen 65 años de edad o más. Sus opiniones son muy valiosas para nosotros y su participación en la encuesta es muy importante porque nos ayuda a comprender mejor los asuntos y problemas que enfrentan personas como usted.

PROXY RESPONDENT

I'm sorry that (RESPONDENT) is not well enough to do the interview. Let me tell you why I'm calling. This is a nationwide study of Hispanics who are 65 or older. I will be asking questions about (RESPONDENT'S) health and general well being to help us better understand the issues and problems faced by people like (RESPONDENT/RELATIONSHIP). (IF R VOLUNTEERS THAT S/HE IS NOT APPROPRIATE, PROBE FOR OTHER HOUSEHOLD MEMBER AS PROXY)

Lamento que (RESPONDENT) no se sienta bien como para contestar la entrevista. Déjeme decirle por qué estoy llamando. Este es un estudio a través de todo el país de Hispánicos que tienen 65 años de edad o más. Le haré preguntas acerca de la salud y bienestar general de (RESPONDENT) para ayudarnos a comprender mejor los asuntos y problemas que enfrentan personas como (RESPONDENT/RELATIONSHIP) (IF R VOLUNTEERS THAT S/HE IS NOT APPROPRIATE PROBE FOR OTHER HOUSEHOLD MEMBER AS A PROXY)

PROXY'S NAME: _____

RELATIONSHIP: SON/DAUGHTER 1

SPOUSE 2

OTHER RELATIVE 3

NON-RELATIVE 4

REASON FOR PROXY: _____

by

Westat, Inc.

1650 Research Blvd.

Rockville, Maryland 20850

August 1988

A. BACKGROUND

A1. How old are you now? (RECORD DON'T KNOW ONLY IF RESPONDENT IS OLD ENOUGH FOR SURVEY BUT WON'T GIVE EXACT AGE.)

AGE |__|__| YEARS 23:25
DON'T KNOW 998

IF UNDER 65 YEARS OF AGE, ASK TO SPEAK TO THE PERSON WHO IS AGE 65 OR OLDER. IF NONE, TERMINATE. CODE 0.

A2. What Hispanic group best describes your national origin or descent? (READ IF NECESSARY) (IF NOT OF HISPANIC ORIGIN, ASK IF ANYONE IN HOUSEHOLD 65 OR OVER IS OF HISPANIC ORIGIN. IF NOT, TERMINATE INTERVIEW AND CODE 1.)

MEXICAN AMERICAN/MECICAN/CHICANO, 1 26:28
CUBAN/CUBAN AMERICAN, 2
PUERTO RICAN/BORICUA, 3
HISPANO/SPANICH AMERICAN, 4
OTHER (SPECIFY) 5

A3. Are you now married, widowed, divorced, separated, or have you never married?

MARRIED 1 } 29
WIDOWED 2 } (A4)
DIVORCED 3 }
SEPARATED 4 }
NOT MARRIED, LIVING WITH PARTNER 5 }
NEVER MARRIED 6 } (A5)
DON'T KNOW 8 }

A4. How many years have you been married/widowed/divorced/separated/living with partner?

LESS THAN 1 YEAR 00 30:31
YEARS |__|__|
DON'T KNOW 98

A5. Do you live in a house, an apartment, a mobile home, or somewhere else?

HOUSE 1 32:34
APARTMENT 2
MOBILE HOME 3
OTHER (SPECIFY) 4

A6. Do you own your residence or do you rent it?

OWN 1 35: 37
RENT 2
OTHER (SPECIFY) 3

A7. Do you live alone, or are you living with someone else?

ALONE	1	38
SOMEONE ELSE	2 (A11)	

A8. How long have you been living by yourself ? (DO NOT READ LIST)

LESS THAN ONE YEAR	1	39
1 YEAR BUT LESS THAN 2 YEARS	2	
2 YEARS BUT LESS THAN 3 YEARS	3	
3 YEARS BUT LESS THAN 5 YEARS	4	
5 YEARS BUT LESS THAN 10 YEARS	5	
10 YEARS OR MORE	6	
DONT KNOW	8	

A9. Do you prefer to live alone, or would you prefer to live with someone else?

PREFER TO LIVE ALONE	1 (A12)	40
WITH SOMEONE ELSE	2	
DONT KNOW	8	

A10. What other living arrangements would you prefer? (DO NOT READ LIST)

WITH CHILDREN	01	} (A12)	41-44
WITH PARENTS	02		
WITH OTHER RELATIVES	03		
WITH FRIEND OR UNRELATED ADULT	04		
IN A SENIOR HOUSING COMPLEX	05		
IN A RETIREMENT COMMUNITY	06		
IN A 'LIFE CARE' COMMUNITY	07		
HOUSEKEEPER	08		
OTHER (SPECIFY):	09		
DONT KNOW	98		

A11. Who do you live with? (CIRCLE ALL THAT APPLY)

SPOUSE	1	45
CHILD(REN)	1	46
SISTER OR BROTHER	1	47
PARENT(S)	1	48
OTHER RELATIVES	1	49
FRIENDS, UNRELATED ADULT(S).....	1	50
FULL-TIME NURSE OR ATTENDANT	1	51
HOUSEKEEPER	1	52
OTHER	1	53

A12. What type of transportation do you use most of the time? (CIRCLE ALL THAT APPLY)

DRIVE YOURSELF	1	54
SPOUSE	1	55
DAUGHTER	1	56
SON	1	57
OTHER RELATIVES	1	58
FRIEND/NEIGHBOR	1	59
TAXIS	1	60
SUBWAY	1	61
BUS	1	62
SOCIAL SERVICE AGENCY	1	63
OTHER (SPECIFY)	1	64:66

B. FAMILY + SOCIAL NETWORK

B1. Including step and adopted children, how many living children do you have?

NONE 00 (B6) 67:68
 CHILDREN |__|__|

B2. How many of your living children are sons and how many are daughters?

SONS |__|__| 69:70
 DAUGHTERS |__|__| 71:72
 TOTAL |__|__| 73:74

(TOTAL MUST EQUAL B1)

DOES RESPONDENT LIVE WITH ANY OF HIS/HER CHILDREN? (A11)

YES 1 (B6) 75
 NO 2 (B3)

B3. How quickly can (any one of your children/ your son/ your daughter) get to your home?

NUMBER OF |__|__| MINUTES 1 207:210
 HOURS 2
 DAYS 3

B4. How often do you see (any one of your children/your son/your daughter)?

NEVER/LESS THAN ONCE A YEAR 0 211:214
 DAY 1
 WEEK 2
 TIMES PER |__|__| MONTH 3
 YEAR 4

B5. How often do you talk on the telephone with (any one of your children/your son/your daughter)?

NEVER/LESS THAN ONCE A YEAR 0 215:218
 DAY 1
 WEEK 2
 TIMES PER |__|__| MONTH 3
 YEAR 4

B6. During the past two weeks, did you...

	YES	NO	
a. get together socially with friends or neighbors?	1	2	219
b. go to a show or movie, sports event, club meeting, classes or other group event?	1	2	220
c. go to church for services or other activities?	1	2	221

B7. The next questions are about problems some people have. As I read each one please tell me if it is a serious problem these days. First is (READ EACH ITEM) a serious problem for you these days, or not?

<u>START WITH</u>	NOT A			
	<u>SERIOUS</u> <u>PROBLEM</u>	<u>SERIOUS</u> <u>PROBLEM</u>	<u>NOT</u> <u>SURE</u>	
222___ a. Not having enough money to live on.....	1	2	3	229
223___ b. Loneliness or not having enough friends...	1	2	3	230
224___ c. Having too many medical bills....	1	2	3	231
225___ d. Having to depend too much on other people...	1	2	3	232
226___ e. Having to take care of a sick spouse or relative.	1	2	3	233
227___ f. Having too many problems or conflicts in the family	1	2	3	234
228___ g. Being anxious or worried	1	2	3	235

C. HEALTH

The next questions ask about how well you are able to do certain activities

READ C1a THROUGH C1g, THEN FOR EACH YES IN C1, ASK C2 TO C4

C1. Because of a <u>health or physical problem</u> do you have difficulty . . .	C2. Do you receive help from another person in (ACTIVITY IN C1)	C3. Who gives you this help? Anyone else? (CIRCLE ALL THAT APPLY)
<p>236</p> <p>a. Bathing or showering?</p> <p>YES 1</p> <p>NO 2</p>	<p>237</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>238:245</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>C4</p>
<p>246</p> <p>b. Dressing?</p> <p>YES 1</p> <p>NO 2</p>	<p>247</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>248:255</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>C4</p>
<p>256</p> <p>c. Eating?</p> <p>YES 1</p> <p>NO 2</p>	<p>257</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>258:265</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>C4</p>
<p>266</p> <p>d. Getting in and out of bed or chairs?</p> <p>YES 1</p> <p>NO 2</p>	<p>267</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>268:275</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>C4</p>
<p>307</p> <p>e. Walking?</p> <p>YES 1</p> <p>NO 2</p>	<p>308</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>309:316</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>C4</p>
<p>317</p> <p>f. Getting outside?</p> <p>YES 1</p> <p>NO 2</p>	<p>318</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>319:326</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>C4</p>
<p>327</p> <p>g. Using toilet, including getting to the toilet?</p> <p>YES 1</p> <p>NO 2</p>	<p>328</p> <p>YES 1 →</p> <p>NO 2 (C5) ↓</p>	<p>329:336</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>C4</p>

READ C5a THROUGH C5f, THEN FOR EACH YES IN C5, ASK C6 TO C8

C5. Because of a <u>health or physical problem</u> do you have difficulty . . .	C6. Do you receive help from another person in (ACTIVITY IN C5)	C7. Who gives you this help? Anyone else? (CIRCLE ALL THAT APPLY)
<p>337</p> <p>a. Preparing your own meals?</p> <p>YES 1</p> <p>NO 2</p>	<p>338</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>339:346</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>→ C8</p>
<p>347</p> <p>b. Managing your money (such as keeping track of expenses and paying bills)?</p> <p>YES 1</p> <p>NO 2</p>	<p>348</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>349:356</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>→ C8</p>
<p>357</p> <p>c. Using the telephone?</p> <p>YES 1</p> <p>NO 2</p>	<p>358</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>359:366</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>→ C8</p>
<p>367</p> <p>d. Shopping for personal items (such as toilet items or medication)?</p> <p>YES 1</p> <p>NO 2</p>	<p>368</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>369:376</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>→ C8</p>
<p>407</p> <p>e. Doing heavy housework (like scrubbing floors or washing windows)?</p> <p>YES 1</p> <p>NO 2</p>	<p>408</p> <p>YES 1 →</p> <p>NO 2 ↓</p>	<p>409:416</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>→ C8</p>
<p>417</p> <p>f. Doing light housework (like dishes, straightening up or light cleaning)?</p> <p>YES 1</p> <p>NO 2</p>	<p>418</p> <p>YES 1 →</p> <p>NO 2 (C9) ↓</p>	<p>419:426</p> <p>SPOUSE 1</p> <p>CHILD IN HOUSEHOLD 1</p> <p>CHILD NOT IN HOUSEHOLD 1</p> <p>OTHER RELATIVE IN HOUSEHOLD 1</p> <p>OTHER RELATIVE NOT IN HOUSEHOLD. 1</p> <p>NONRELATIVE IN HOUSEHOLD 1</p> <p>NONRELATIVE NOT IN HOUSEHOLD 1</p> <p>→ C8</p>

C9. Would you say your health, in general, is excellent, good, fair, or poor?

EXCELLENT	1	427
GOOD	2	
FAIR	3	
POOR	4	
NOT SURE/DON'T KNOW	8	

C10. How many visits did you have with a medical doctor or doctor's assistant during the past twelve months, that is, since YEAR AGO) 1987?

NUMBER OF VISITS.	_____	428:430
DON'T KNOW.	998	

C11. Have you been a patient overnight in a hospital during the past twelve months, that is, since (MONTH) 1987?

YES, HAS BEEN A PATIENT	1	431
NO, HAS NOT BEEN A PATIENT.....	2 (C13)	
NOT SURE/DON'T KNOW	3 (C13)	

C12. Who cared for you after you left the hospital? (CIRCLE ALL THAT APPLY)

CARED FOR SELF	1	432
FAMILY OR SPOUSE	1	433
HOME HEALTH AGENCY	1	434
PRIVATE NURSE	1	435
FRIEND OR NEIGHBOR	1	436
NURSING HOME	1	437
OTHER	1	438
NO CARE NEEDED	1	439
NOT SURE	1	440

C13. The next few questions ask about health insurance. MEDICARE is a Social Security health insurance program persons and for persons 65 years old or older.

	<u>YES</u>	<u>NO</u>	<u>DK</u>	
a. Are you now covered by health insurance through MEDICARE that pays for hospital bills? (PART A)	1	2	8	441
b. Do you now get insurance through MEDICARE that covers doctors bills? (PART B).....	1	2	8	442

C14. There is also a national program called MEDICAID (OR (STATE NAME) which pays for health care for persons in need.

Are you know covered by MEDICAID (OR STATE NAME)?.....	1	2	8	
--	---	---	---	--

C15. Are you covered by any other kind of health insurance?.....

1	2	8	444
---	---	---	-----

C16. If you had a long term illness which caused you to be placed in a nursing home, who would pay the bill? (CIRCLE APPLY)

PRIVATE HEALTH INSURANCE	1	445
MEDICARE	1	446
MEDICAID.....	1	447
PERSONAL FUNDS, SAVINGS	1	448
FAMILY AND SPOUSE	1	449
OTHER (SPECIFY):		450 4

WOULD NOT BE ABLE TO PAY	1	453
WOULD NEED TO SELL HOME	1	454
WOULD NEED TO GET A DIVORCE	1	455
DON'T KNOW	1	456

D. WELL BEING

D1. All things considered, how satisfied are you with your life these days - very satisfied, somewhat satisfied, somewhat dissatisfied or very dissatisfied?

VERY SATISFIED	1	457
SOMEWHAT SATISFIED	2	
SOMEWHAT DISSATISFIED	3	
VERY DISSATISFIED	4	
NOT SURE	5	

D2. I am going to read you a list of ways people sometimes feel. In the last few weeks have you felt...

<u>START WITH</u>	<u>Yes</u>	<u>No</u>	
458 ___ a. Particularly excited or interested in something?	1	2	468
459 ___ b. So restless you couldn't sit still?	1	2	469
460 ___ c. Proud because someone complimented you on something you had done?	1	2	470
461 ___ d. Very lonely or remote from other people?	1	2	471
462 ___ e. Pleased about having accomplished something?	1	2	472
463 ___ f. Bored?	1	2	473
464 ___ g. On top of the world?	1	2	474
465 ___ h. Depressed or very unhappy?	1	2	475
466 ___ i. That things were going your way?	1	2	476
467 ___ j. Upset because someone criticized you?	1	2	477

E. SOCIAL SERVICES

ASK E2 FOR EACH NO IN E1

E1. Now I'm going to ask you about programs and social services for persons 65 and older. In the past 12 months, did you...

E2. (IF "NO" IN E1.) Do you presently feel a need for such a service?

	<u>YES</u>	<u>NO</u>			
a. Use transportation for the elderly?	1	2	—>	YES 1 NO 2	507
b. Use a senior center?	1	2	—>	YES 1 NO 2	508
c. Have meals delivered to your home by an agency or organization like Meals on Wheels?	1	2	—>	YES 1 NO 2	509
d. Eat meals in a senior center or in some place with a special meal program for the elderly?	1	2	—>	YES 1 NO 2	510
e. Use a homemaker service for the elderly that provides services like cleaning and cooking in the home?	1	2	—>	YES 1 NO 2	511
f. Use a service which makes routine telephone calls to check on the health of elderly people?	1	2	—>	YES 1 NO 2	512
g. Use a visiting nurse service?	1	2	—>	YES 1 NO 2	513
h. Use a health aide who comes into the home?	1	2	—>	YES 1 NO 2	514
i. Receive food stamps or coupons?	1	2	—>	YES 1 NO 2	515
j. Use services or programs for the elderly provided by your church?	1	2	—>	YES 1 NO 2	516

E3. From what single source do you get most of your information about things that are going on in the world? (CIRCLE

RADIO	1	527
TELEVISION	2	
NEWSPAPERS	3	
OTHER (SPECIFY) _____	4	

F. LABOR

F1. Have you ever worked for pay at a job or business?

YES 1 530
 NO 2 (F9)

F2. What was your usual occupation during most of your working life? (ASK FOR JOB TITLE AND MAIN DUTIES) _____

PROFESSIONAL 01 531:534
 MANAGER, OFFICIAL 02
 PROPRIETOR (SMALL BUSINESS) 03
 CLERICAL WORKER 04
 SALES WORKER 05
 SKILLED CRAFTSMAN, FOREMAN 06
 OPERATIVE, UNSKILLED LABORER
 (EXCEPT FARM) 07
 SERVICE WORKER 08
 HOUSEKEEPER/DOMESTIC WORKER 09
 FARMER, FARM MANAGER, 10
 FARM LABORER 11
 MILITARY SERVICE 12
 OTHER (SPECIFY) _____ 13

F3. Did you work at all at a job or business in the past 12 months, that is, since (TODAY'S DATE) a year ago?

YES 1 535
 NO 2 (F6)

F4. In the weeks that you worked in the past 12 months, approximately how many hours per week did you work? (IF WORKED WHAT R USUALLY WORKED)

|_|_|_|_|
 HOURS PER WEEK 536:538

F5. Are you working for pay now?

YES 1 (BOX 1) 539
 NO 2

F6. At this time, do you consider yourself completely retired, partly retired, or not retired at all?

COMPLETELY RETIRED 1 540
 PARTLY RETIRED 2
 NOT RETIRED AT ALL 3 (F9)

F7. How long has it been since you retired?

LESS THAN 1 YEAR 00 541:542

|_|_|_| YEARS

F8. Did you retire because of a health or physical problem?

YES 1 543
NO 2

F9. Would you like to have a paying job now, either full-time or part-time?

YES, Full-time 1 544
YES, Part-time 2
NO, Would not like 3
NO, Unable to work (volunteer) 4
DON'T KNOW 8

<p>Box 1</p> <p>IS R MARRIED, WIDOWED, DIVORCED, SEPARATED, OR LIVING WITH A PARTNER? (QA3)</p> <p>YES 1 (F10) 545 NO 2 (G1)</p>
--

F10. What was the usual occupation of your spouse during most of (his/her) working life? (ASK FOR JOB TITLE AND MAIN DUTIES)

PROFESSIONAL	01	546:549
MANAGER, OFFICIAL	02	
PROPRIETOR (SMALL BUSINESS)	03	
CLERICAL WORKER	04	
SALES WORKER	05	
SKILLED CRAFTSMAN, FOREMAN	06	
OPERATIVE, UNSKILLED LABORER (EXCEPT FARM)	07	
SERVICE WORKER	08	
HOUSEKEEPER/DOMESTIC WORKER	09	
FARMER, FARM MANAGER,	10	
FARM LABORER	11	
STUDENT	12	
HOUSEWIFE	13	
MILITARY SERVICE	14	
WELFARE	15	
DISABLED	16	
OTHER (SPECIFY)	17	

G. INCOME AND BENEFITS

IF YES IN G1, ASK G2 THROUGH G4 IN SEQUENCE

G1.	G2.	G3.	G4.
(Even though you do not consider yourself retired), are you now receiving retirement income from: (DO NOT INCLUDE DISABILITY)	How long have you been receiving (ITEM IN Q.G1)	Were you 62, 65, or some other age, when you first received Social Security Retirement income?	Do you now receive (ITEM IN Q.G1) because of your own work experience or because you are a dependent or survivor of someone else?
550 a. Social Security? YES 1 NO 2	551:552 _____ YEARS	553:554 62 65 OTHER _____	555 OWN WORK 1 SOMEONE ELSE 2 BOTH 3
556 b. A Private Employer or Union Pension? YES 1 NO 2	557:558 _____ YEARS (G4)		559 OWN WORK 1 SOMEONE ELSE 2 BOTH 3
560 c. A Federal, State, or Local Government Employee Pension? YES 1 NO 2	561:562 _____ YEARS (G4)		563 OWN WORK 1 SOMEONE ELSE 2 BOTH 3
564 d. Some other source, such as, Railroad Retirement or Military Retirement? YES 1 NO 2	565:566 _____ YEARS (G4)		567 OWN WORK 1 SOMEONE ELSE 2 BOTH 3

DOES RESPONDENT RECEIVE SOCIAL SECURITY (G1a)?	
YES 1 (G5)	568
NO 2 (G9)	

G5. You said you receive Social Security. In thinking about how to help more elderly people, changes to Social Security are sometimes suggested. We would like your opinion about some of these suggestions:

I'll read each one separately, and then ask you to respond to it. Would you be willing to have your Social Security benefits reduced by \$20 or \$30 a month, if it would guarantee that all medical costs could be paid for you and all elderly people?

- WILLING 1
- NOT WILLING 2
- NOT SURE/DEPENDS 3

G6. Would you be willing to have your Social Security benefits reduced by \$20 to \$30 a month if it would guarantee that home costs could be paid for you and all other elderly people? (IF RESPONDENT BEGINS ADDING UP DOLLARS G5 PLUS \$20 IN G6, ETC., TELL RESPONDENTS THAT EACH ITEM SHOULD BE CONSIDERED AS A SEPARATE I

WILLING 1 570
 NOT WILLING 2
 NOT SURE/DEPENDS 3

G7. Would you be willing to have your Social Security benefits reduced by \$20 to \$30 a month in order to provide services for all elderly people who need them to continue living at home? (IF RESPONDENT BEGINS ADDING UP DOLLARS \$20 IN G5 PLUS \$20 IN G6, ETC., TELL RESPONDENTS THAT EACH ITEM SHOULD BE CONSIDERED AS AN ITEM.)

WILLING 1 571
 NOT WILLING 2
 NOT SURE/DEPENDS 3

G8. Here's the last suggestion. In the U.S. 14% of elderly people live in poverty. Would you be willing to have your Social Security benefits reduced by \$20 to \$30 a month if it would guarantee that no elderly person would live in poverty? (IF RESPONDENT BEGINS ADDING UP DOLLARS I.E. \$20 IN G5 PLUS \$20 IN G6, ETC., TELL RESPONDENTS THAT EACH ITEM SHOULD BE CONSIDERED AS A SEPARATE ITEM.)

WILLING 1 572
 NOT WILLING 2
 NOT SURE/DEPENDS 3

G9. The next few questions ask about how family members help each other. Do you...

	<u>YES</u>	<u>NO</u>	<u>DK</u>	
a. Provide babysitting services for your family?	1	2	8	573
b. Help your (children/other family members) with important decisions?	1	2	8	574
c. Give regular financial assistance to family members or friends? (EXCLUDE PERSONS IN HH SUCH AS SPOUSE)	1	2 (G11)	8 (G11)	575

G10. To whom do you give financial assistance? (CIRCLE ALL THAT APPLY)

PARENT 1 607
 FORMER SPOUSE 1 608
 CHILD(REN) 1 609
 GRANDCHILD(REN) 1 610
 OTHER RELATIVE 1 611
 FRIEND, UNRELATED ADULT 1 612
 OTHER (Specify) 1 613 615

G11. Do you receive regular financial assistance from family members or friends, or not?

YES 1 616
 NO 2 (G15)

G12. Who gives financial assistance to you? (CIRCLE ALL THAT APPLY)

PARENT	1	617
FORMER SPOUSE	1	618
CHILD(REN)	1	619
GRANDCHILD(REN)	1	620
OTHER RELATIVE	1	621
FRIEND, UNRELATED ADULT	1	622
OTHER (Specify)	1	623:625

G13. Approximately how often do you receive financial assistance from your family or friends?

MORE OFTEN THEN ONCE A WEEK	1	626:628
WEEKLY	2	
EVERY TWO WEEKS	3	
MONTHLY	4	
EVERY 6 MONTHS	5	
YEARLY	6	
OTHER (Specify)	7	

G14. Approximately how much do you receive each time?

UNDER \$50	1	629
BETWEEN \$50 - \$99	2	
BETWEEN \$100 - \$199	3	
\$200 OR MORE	4	

G15. Let me just confirm, how many people live in your household, including yourself?

People | ___ | ___ |

630:631

G16. Which of the following income categories best describes your total 1987 household income? Please include income from Social Security, pensions, and investments, as well as any wages or business income. Is it...

READ INCOME GRID APPROPRIATE TO NUMBER IN HOUSEHOLD

632

PEOPLE IN HOUSEHOLD

1		2		3	
\$5,500 or less	1 (G18)	\$5,500 or less	1 (G19)	\$5,500 or less	(G19)
\$5,501-\$10,000	2 (H1)	\$5,501-\$10,000	2 (G17b)	\$5,501-\$10,000	(G19)
\$10,001-\$15,000	3 (H1)	\$10,001-\$15,000	3 (H1)	\$10,001-\$15,000	(G19)
\$15,001-\$25,000	4 (H1)	\$15,001-\$25,000	4 (H1)	\$15,001-\$25,000	(H1)
\$25,001-\$35,000	5 (H1)	\$25,001-\$35,000	5 (H1)	\$25,001-\$35,000	(H1)
Over \$35,000	6 (H1)	Over \$35,000	6 (H1)	Over \$35,000	(H1)
NOT SURE	8 (G17b)	NOT SURE	8 (G17b)	NOT SURE	(G17b)
REFUSED	7 (G17b)	REFUSED	7 (G17b)	REFUSED	(G17b)

PEOPLE IN HOUSEHOLD

4		5		6	
\$5,500 or less	1 (G19)	\$5,500 or less	1 (G19)	\$5,500 or less	(G19)
\$5,501-\$10,000	2 (G18)	\$5,501-\$10,000	2 (G19)	\$5,501-\$10,000	(G19)
\$10,001-\$15,000	3 (G17a)	\$10,001-\$15,000	3 (G17b)	\$10,001-\$15,000	(H1)
\$15,001-\$25,000	4 (H1)	\$15,001-\$25,000	4 (H1)	\$15,001-\$25,000	(H1)
\$25,001-\$35,000	5 (H1)	\$25,001-\$35,000	5 (H1)	\$25,001-\$35,000	(H1)
Over \$35,000	6 (H1)	Over \$35,000	6 (H1)	Over \$35,000	(H1)
NOT SURE	8 (G17b)	NOT SURE	8 (G17b)	NOT SURE	(G17b)
REFUSED	7 (G17b)	REFUSED	7 (G17b)	REFUSED	(G17b)

PEOPLE IN HOUSEHOLD

7		8		9+	
\$5,500 or less	1 (G19)	\$5,500 or less	1 (G19)	\$5,500 or less	(G19)
\$5,501-\$10,000	2 (G19)	\$5,501-\$10,000	2 (G19)	\$5,501-\$10,000	(G19)
\$10,001-\$15,000	3 (G18)	\$10,001-\$15,000	3 (G18)	\$10,001-\$15,000	(G18)
\$15,001-\$25,000	4 (G17a)	\$15,001-\$25,000	4 (G17a)	\$15,001-\$25,000	(H1)
\$25,001-\$35,000	5 (H1)	\$25,001-\$35,000	5 (H1)	\$25,001-\$35,000	(H1)
Over \$35,000	6 (H1)	Over \$35,000	6 (H1)	Over \$35,000	(H1)
NOT SURE	8 (G17b)	NOT SURE	8 (G17b)	NOT SURE	(G17b)
REFUSED	7 (G17b)	REFUSED	7 (G17b)	REFUSED	(G17b)

G17a. Would you estimate it was under or over (READ APPROXIMATE FIGURE)?

634

PEOPLE IN HOUSEHOLD

1	2	3
---	---	---

PEOPLE IN HOUSEHOLD

4	5	6
---	---	---

\$11,600?

UNDER \$11,600	1	}	(H1)
OVER \$11,600	2		
NOT SURE	8		
REFUSED	7		

PEOPLE IN HOUSEHOLD

7	8	9+
---	---	----

\$17,700?

\$19,500?

UNDER \$17,700	1	}	(H1)	UNDER \$19,500	1	}	(H1)
OVER \$17,700	2			OVER \$19,500	2		
NOT SURE	8			NOT SURE	8		
REFUSED	7			REFUSED	7		

PEOPLE IN HOUSEHOLD		
1	2	3
\$5,500?	\$6,900?	\$9,100?
UNDER \$5,500 1 (G18)	UNDER \$6,900 1 (G18)	UNDER \$9,100 1 (G18)
OVER \$5,500 2 (H1)	OVER \$6,900 2 (H1)	OVER \$9,100 2 (H1)
NOT SURE 8 (H1)	NOT SURE 8 (H1)	NOT SURE 8 (H1)
REFUSED 7 (H1)	REFUSED 7 (H1)	REFUSED 7 (H1)

PEOPLE IN HOUSEHOLD		
4	5	6
\$11,600?	\$13,700?	\$15,500?
UNDER \$11,600 1 (G18)	UNDER \$13,700 1 (G18)	UNDER \$15,500 1 (G18)
OVER \$11,600 2 (H1)	OVER \$13,700 2 (H1)	OVER \$15,500 2 (H1)
NOT SURE 8 (H1)	NOT SURE 8 (H1)	NOT SURE 8 (H1)
REFUSED 7 (H1)	REFUSED 7 (H1)	REFUSED 7 (H1)

PEOPLE IN HOUSEHOLD		
7	8	9+
\$17,700?	\$19,500?	\$23,300?
UNDER \$17,700 1 (G18)	UNDER \$19,500 1 (G18)	UNDER \$23,300 1 (G18)
OVER \$17,700 2 (H1)	OVER \$19,500 2 (H1)	OVER \$23,300 2 (H1)
NOT SURE 8 (H1)	NOT SURE 8 (H1)	NOT SURE 8 (H1)
REFUSED 7 (H1)	REFUSED 7 (H1)	REFUSED 7 (H1)

PEOPLE IN HOUSEHOLD		
1	2	3
\$4,100?	\$6,200?	\$6,800?
UNDER \$4,100 1 (G19) OVER \$4,100 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)	UNDER \$6,200 1 (G19) OVER \$6,200 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)	UNDER \$6,800 1 (G19) OVER \$6,800 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)

PEOPLE IN HOUSEHOLD		
4	5	6
\$8,700?	\$10,300?	\$11,600?
UNDER \$8,700 1 (G19) OVER \$8,700 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)	UNDER \$10,300 1 (G19) OVER \$10,300 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)	UNDER \$11,600 1 (G19) OVER \$11,600 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)

PEOPLE IN HOUSEHOLD		
7	8	9+
\$13,300?	\$14,600?	\$17,500?
UNDER \$13,300 1 (G19) OVER \$13,300 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)	UNDER \$14,600 1 (G19) OVER \$14,600 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)	UNDER \$17,500 1 (G19) OVER \$17,500 2 (H1) NOT SURE 8 (G19) REFUSED 7 (G19)

G19. Do you or does anyone in your household receive SSI, Supplemental Security Income? (the Gold Colored Check)

YES 1 (H1) 640
 NO 2
 DON'T KNOW 8

G20. So far as you know, are you eligible for SSI?

YES 1 641
 NO 2
 DON'T KNOW 8

G21. Do you have savings of \$2,000 or more (IF NEEDED: We only ask this to learn how many people are eligible for SSI.)

YES, More than \$2000 1 (H1) 642
 NO, Less than \$2000 2 (G22)
 DON'T KNOW 8 (H1)

G22. You may in fact be eligible for SSI. Why have you not enrolled? (DO NOT READ, CIRCLE ALL THAT APPLY.)

- I FELT ASHAMED (VERGUENZA/PENA) TO USE THIS PROGRAM 1 643
- I FELT MY FRIENDS/RELATIVES/NEIGHBORS
 WOULD CRITICIZE ME 1 644
- THE PROGRAM SERVES MOSTLY NON HISPANICS AND I
 FEEL UNCOMFORTABLE 1 645
- AFRAID OF THE GOVERNMENT 1 646

- NEVER HEARD OF IT/NEVER KNEW ABOUT SSI BENEFITS 1 647
- BELIEVED I WAS NOT ELIGIBLE 1 648
- BENEFITS TOO LOW TO BOTHER WITH 1 649
- DON'T NEED IT 1 650

- NOT WILLING TO ACCEPT WELFARE 1 651
- DON'T WANT TO DEAL WITH GOVERNMENT AGENCY 1 652
- THINK IT'S TOO MUCH RED TAPE TO APPLY FOR SSI 1 653
- I DON'T SPEAK ENGLISH 1 654

- WHEN I WENT TO APPLY I WAS TREATED DISRESPECTFULLY (MALA CARA) 1 655
- I DIDN'T KNOW WHERE TO GO 1 656
- I TRIED BUT WAS TOLD I WAS NOT ELIGIBLE 1 657

- OTHER (specify) _____
 _____ 1 658:662
- DON'T KNOW 1 663

H. DEMOGRAPHICS

I have just a few questions that are for statistical purposes.

H1. What is the last grade or highest level of school you completed? (CIRCLE ONE CODE)

- NO FORMAL SCHOOLING 01
- + TRADE/TECHINICAL/VOCATIONAL 02

- FIRST THRU 4TH GRADE 03
- + TRADE/TECHNICAL/VOCATIONAL 04

- FIFTH THRU 7TH GRADE 05
- + TRADE/TECHNICAL/VOCATIONAL 06

- 8TH GRADE 07
- + TRADE/TECHNICAL/VOCATIONAL 08

- SOME HIGH SCHOOL 09
- + TRADE/TECHNICAL/VOCATIONAL 10

- HIGH SCHOOL GRADUATE/GED 11
- + TRADE/TECHNICAL/VOCATIONAL 12

- SOME COLLEGE 13
- + TRADE/TECHNICAL/VOCATIONAL 14

- TWO-YEAR COLLEGE GRADUATE 15
- + TRADE/TECHNICAL/VOCATIONAL 16

- FOUR- YEAR COLLEGE GRADUATE
OR MORE 17
- + TRADE/TECHNICAL/VOCATIONAL 18

- DON'T KNOW 19

H2. Do you

Would you say you (ACTIVITY ...)

Well, Fairly, Poorly?

- | | | | | |
|-------------------|-----------------|-------|---|-----------|
| a. | | BLANK | | 666 672 |
| b. Read English? | Yes 1 --> | 1 | 2 | 3 667 673 |
| | No 2 | | | |
| c. Write English? | Yes 1 --> | 1 | 2 | 3 668 674 |
| | No 2 | | | |
| d. Speak Spanish? | Yes 1 --> | 1 | 2 | 3 669 675 |
| | No 2 | | | |
| e. Read Spanish? | Yes 1 --> | 1 | 2 | 3 670 676 |
| | No 2 | | | |
| f. Write Spanish? | Yes 1 --> | 1 | 2 | 3 671 677 |
| | No 2 | | | |

H3 Is your religious background Protestant, Catholic, Jewish, or something else?

- PROTESTANT 1 707:709
- CATHOLIC 2
- JEWISH 3
- OTHER (Specify) _____ 4
- NONE 5

H4. In what country were you born?

- Puerto Rico 1 710:712
- Other state in US 2 (H6)
- Cuba 3
- Mexico 4
- Nicaragua 5
- Panama 6
- El Salvador 7
- Guatemala 8
- Other Hispanic (SPECIFY) 9

H5. How old were you when you first came to live in the US/Mainland?

 | _ | _ | _ | 713:715
 AGE

H6. May I have your name please? (IF NEEDED: Because we hope to do another survey next year.)

(FIRST) (LAST)

(ADDRESS)

(CITY) (STATE) (ZIP)

Thank you very much that is all my questions. We appreciate your cooperation.

IF THERE IS ANOTHER ELIGIBLE R IN HOUSEHOLD ASK TO SPEAK TO HIM/HER
--

SEX OF PERSON WHOM THE INTERVIEW IS ABOUT

- MALE 1 716
- FEMALE 2

INTERVIEWERS OVERALL JUDGMENT ON HOW WELL RESPONDENT UNDERSTOOD THE QUESTIONS AND WHETHER RESPONDENT GAVE LUCID ANSWERS.

- EXCELLENT 1 717
- PRETTY GOOD 2
- ONLY FAIR 3
- POOR 4

INTERVIEWER'S OVERALL IMPRESSION: IS THIS RESPONDENT LIVING ALONE, OR NOT?

- LIVING ALONE 1 718
- NOT LIVING ALONE 2

TIME ENDED: |__|__| : |__|__| AM/PM 719:723

INTERVIEW CONDUCTED IN . . . ENGLISH 1 724
SPANISH. 2

NON INTERVIEW REPORT

1. REASON FOR NON-RESPONSE:

Refusal/Breakoff _____ 1
Some Other Problem _____ 2

2. REFUSAL/BREAKOFF MADE BY:

Respondent _____ 1
Someone else (RECORD NAME AND/OR RELATIONSHIP TO RESPONDENT) _____ 2

3. STATE REASON FOR REFUSAL/BREAKOFF OR OTHER PROBLEM: (RECORD VERBATIM)

CIRCLE ALL THAT APPLY

Confidential/Too Personal _____ 1
Too Busy/Not Interested _____ 2
Negative Reaction to Survey _____ 3
Negative Reaction to Government or Surveys in General _____ 4
Respondent Does Not Think Interviewer is Legitimate/ Mistrusts Interviewer _____ 5
Interview Sounds Too Long/Is Taking Too Long _____ 6
NO REASON GIVEN _____ 7

4. STRENGTH OF REFUSAL/BREAKOFF:

Mild-no Hostility _____ 1
Firm but not Hostile _____ 2
Hostile _____ 3

5. INTERVIEWER RECOMMENDATION:

