

EASS 2021 Health Module  
QUESTIONNAIRE

## EASS 2021 Health Module

v1 EASS Study Year  
v2 Country  
v3 Respondent Number

### **A. Health Status**

#### **a-1. <Self Rated Health/Physical Health/Mental Health> : SF-12v2**

v4 SF\_Q1. In general, would you say your health is:

- (1) Excellent
- (2) Very good
- (3) Good
- (4) Fair
- (5) Poor

● Each team will adjust the translations to the original English.

The following questions are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?

v5 SF\_Q2. Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf

- (1) Yes, limited a lot
- (2) Yes, limited a little
- (3) No, not limited at all

v6 SF\_Q3. Climbing several flights of stairs

- (1) Yes, limited a lot
- (2) Yes, limited a little
- (3) No, not limited at all

During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of your physical health?

v7 SF\_Q 4. Accomplished less than you would like

- (1) All of the time
- (2) Most of the time
- (3) Some of the time
- (4) A little of the time
- (5) None of the time

v8 SF\_Q5. Were limited in the kind of work or other activities

- (1) All of the time
- (2) Most of the time
- (3) Some of the time
- (4) A little of the time
- (5) None of the time

During the past 4 weeks, how much of the time have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?

v9 SF\_Q6. Accomplished less than you would like

- (1) All of the time
- (2) Most of the time
- (3) Some of the time
- (4) A little of the time
- (5) None of the time

v10 SF\_Q7. Did work or other activities less carefully than usual

- (1) All of the time
- (2) Most of the time
- (3) Some of the time
- (4) A little of the time
- (5) None of the time

- v11** SF\_Q8. During the past 4 weeks, how much did pain interfere with your normal work (including both work outside the home and housework)?
- (1) Not at all
  - (2) A little bit
  - (3) Moderately
  - (4) Quite a bit
  - (5) Extremely

These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks...

- v12** SF\_Q9. Have you felt calm and peaceful?
- (1) All of the time
  - (2) Most of the time
  - (3) Some of the time
  - (4) A little of the time
  - (5) None of the time

- v13** SF\_Q10. Did you have a lot of energy?
- (1) All of the time
  - (2) Most of the time
  - (3) Some of the time
  - (4) A little of the time
  - (5) None of the time

- v14** SF\_Q11. Have you felt downhearted and depressed?
- (1) All of the time
  - (2) Most of the time
  - (3) Some of the time
  - (4) A little of the time
  - (5) None of the time

- v15** SF\_Q12. During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting friends, relatives, etc.)?
- (1) All of the time
  - (2) Most of the time
  - (3) Some of the time
  - (4) A little of the time
  - (5) None of the time

**sf12\_gh** SF12 Subscore: General Health  
**sf12\_pf** SF12 Subscore: Physical Functioning  
**sf12\_rp** SF12 Subscore: Role Physical  
**sf12\_re** SF12 Subscore: Role Emotional  
**sf12\_bp** SF12 Subscore: Bodily Pain  
**sf12\_mh** SF12 Subscore: Mental Health  
**sf12\_vt** SF12 Subscore: Vitality  
**sf12\_sf** SF12 Subscore: Social Functioning

**EASS 2010 Note:** TSCS only includes SF\_Q1, SF\_Q8, SF\_Q9 and SF\_Q11.

### a-3. <Symptoms/Chronic Illness/Diseases under Treatment>

**v18 A-15.** Do you have chronic diseases or longstanding health problems?

(1) Yes

(2) No → Skip question A-16

**A-16.** What are they? Please choose all that apply.

**v19** (1) Hypertension

**v20** (2) Diabetes

**n1** (3) Dyslipidemia

**v21** (4) Heart disease

**n2** (5) Stroke

**n3** (6) Cancers

**n4** (7) Mental disorders

**n5** (8) Musculoskeletal disorders (e.g. arthritis, lower back pain, knee problem, joint pain, rheumatism)

**v22** (9) Respiratory disease (e.g. asthma, emphysema)

**n6** (10) Kidney disease

**n7** (11) Liver disease

**n8** (12) Digestive diseases (e.g. ulcer)

**v23** (13) Others (Specify )

**Note:** A-16: Each country is to specify a few salient diseases as additional choices. TSCS ask the question as an open-ended.

**n9** Now I have some questions about your eyesight. Are you near-sighted?

1. Yes

2. No

(only those who answered yes to the previous question)

**n10** Do you usually wear glasses or contact lenses?

1. Yes

2. No

**Note:** TSCS does not include n9 and n10.

### a-4. <Height and Weight>

**v24 A-17.** What is your height? \_\_\_\_\_ cm

**v25 A-18.** What is your weight? \_\_\_\_\_ kg

**bmi** BMI

**Note:** JGSS, KGSS and TSCS writes the note that “(If you are currently pregnant, write in the weight before your pregnancy)” for weight question. TSCS also reminds interviewers about it and asks to recode the weight carefully.

## **B. Health Behavior**

### **b-1. <Smoking>**

**v26n** B-1. Do you smoke? (including electronic cigarettes and heated tobacco products)

JGSS: (including heated tobacco products)

1

I am a smoker

2

I used to smoke, but I have  
stopped smoking

3

I have scarcely/never smoked

### **b-2. <Drinking>**

#### **Final version**

**v28** B-3. How often do you drink alcoholic drinks?

- (1) Daily
- (2) Several times a week
- (3) Several times a month
- (4) Several times a year or less often
- (5) Never

**Note:** TSCS does not include b-2.

### **b-3. <Physical Activities>**

**n11**

How much time do you spend walking on a weekday? This includes at work and at home as your daily routine, walking to travel from place to place, and any other walking that you do for recreation, exercise, or leisure.

- (1) Less than 15 min
- (2) 15 to 29min
- (3) 30 to 59min
- (4) 60 to 89min
- (5) 90 min or more

**n12**

How long do you do physical activities per week that make you breathe somewhat harder than normal or much harder than normal? (This includes jogging, bicycling, exercising, carrying loads, physical labor, household chores, etc.) Do not include walking.

- (1) None
- (2) less than 15 min
- (3) 15 to 29 min
- (4) 30 to 59 min
- (5) About 1 hour
- (6) About 2 hours
- (7) About 3 hours
- (8) About 4 hours
- (9) About 5 hours
- (10) 6 hours or more

**n13\_1, n13\_2**

How much time do you spend sitting on a week day? This includes all the time spent sitting, for example, sitting at a desk, reading, sitting or lying down to watch television.

\_\_\_\_\_ hours \_\_\_\_\_ minutes

**n14\_1, n14\_2**

How many hours of actual sleep do you get on a week day? This may be different than the number of hours you spend in bed. **(Please do not include time for napping.)**

\_\_\_\_\_ hours \_\_\_\_\_ minutes

*Sleep time The Pittsburgh Sleep Quality Index (PSQI)*

*By: Carole Smyth MSN, APRN, BC, ANP/GNP, Montefiore Medical Center*

**Note:** TSCS does not include n11 to n14\_2.

n15

During the past month, how would you rate your sleep quality overall?

- 1 Very good
- 2 Fairly good
- 3 Fairly bad
- 4 Very bad

*Sleep time The Pittsburgh Sleep Quality Index (PSQI)*

*By: Carole Smyth MSN, APRN, BC, ANP/GNP, Montefiore Medical Center*

#### b-4. <Health Checkup>

- v30 B-5. During the last three years, did you have any health checkup?
- (1) Yes, regularly
  - (2) Yes, but not regularly
  - (3) No

**Note:** TSCS does not include B-5.

### C. Medical Care

- v31 C-1. During the last 12 months, how often did you go to see a doctor?  
(Please answer your own diseases or injuries. Do not include escorting or visitations.)
- (1) Several times a week
  - (2) About Once a week
  - (3) About Once a month
  - (4) Several times a year
  - (5) About Once a year
  - (6) None
- v32 C-2. How much do you worry about each of the following when it comes to yourself and your family?
- a. Unable to receive health care when needed
- (1) Very much
  - (2) A little
  - (3) Not so much
  - (4) Not at all
- v33 b. Unable to pay the cost when someone get a serious illness or condition
- (1) Very much
  - (2) A little
  - (3) Not so much
  - (4) Not at all
- v34 C-3. During the last 12 months, did you refrain from going to see a doctor, even though you were ill or injured? Please include a cold.
- (1) Yes, I did → Go to question C-4
  - (2) No, I did not
  - (3) I was not ill or injured during the last 12 months
- C-4. Why is it? Please circle all that apply.
- v35, v35\_tw (1) Waiting time is too long
- v36, v36\_tw (2) It costs too much
- v37 (3) There is no hospital or doctor's office nearby
- v38 (4) I do not know where to go
- v39 (5) I have no transportation
- v40 (6) I do not like to see a doctor
- v41, v41\_tw (7) There is no time to see a doctor
- v42 (8) I thought that there is no need to go
- v43 (9) I do not have active health insurance
- v44 (10) Others (Specify\_\_\_\_\_)
- v4042\_tw (11) I do not like to see a doctor or I thought that there is no need to go
- n16, n16\_tw (12) I do not want to get infected with COVID-19.

**Note:** ISSP Q18 has partial overlap with C-3 and C-4. TSCS team divides the ISSP question and adds more choices. For question C-1, JGSS includes only the first sentence in the parentheses, but can exclude those escorting or visitations with the Japanese translation. For question C-3, since "cavity" is one of the popular reasons for going to see a doctor in Japan, JGSS adds "a cavity" as example.

TSCS does not include options (3) (4) (5) (6) (8) (9) (10) for C-4.

## **D. Medical Insurance/Social Security Insurance**

- v45 D-1.** What kind of health insurance do you have?
- (1) Public health insurance only
  - (2) Public health insurance and private insurance
  - (3) Private health insurance only
  - (4) No health insurance at all
  - (5) Not sure

## **E. Alternative Medicine**

E-1. Have you ever received the following treatment during the last 12 months?

- |               |                                  |       |      |
|---------------|----------------------------------|-------|------|
| <b>v46n_1</b> | A. Acupuncture -----             | 1 Yes | 2 No |
| <b>v46n_2</b> | B. Moxibustion -----             | 1 Yes | 2 No |
| <b>v46n_3</b> | C. Cupping -----                 | 1 Yes | 2 No |
| <b>v47</b>    | D. Oriental herbal medicine----- | 1 Yes | 2 No |
| <b>v48</b>    | E. Acupressure or massage -----  | 1 Yes | 2 No |

**Note:** TSCS does not include E-1. JGSS does not include E-1C.

## **F. Social Support /Social Trust**

### **f-1. <Social Support: Emotional/Financial/Instrumental Support>**

**s1\_cjk F-1J.** Did anyone listen to your concerns in general when you needed it during the last 12 months?

1 Yes

2 No

3 I did not have any concern

**F-2J.** Who were they? Choose all that apply.

- |                 |  |
|-----------------|--|
| <b>s2_1_cjk</b> | 1 Co-residing family members                                   |
| <b>s2_2_cjk</b> | 2 Other relatives (including those who live separately)        |
| <b>s2_3_cjk</b> | 3 Colleagues at work   |
| <b>s2_4_cjk</b> | 4 Neighbors  |
| <b>s2_5_cjk</b> | 5 Friends  |
| <b>s2_6_cjk</b> | 6 Professional workers (care takers, therapists, doctors etc.) |
| <b>s2_7_cjk</b> | 7 Others (specify _____)                                       |

**Note:** TSCS does not include f-1.

### **f-2. <Social Trust >**

- v58 F-6.** Generally speaking, would you say that people can be trusted or that you can't be too careful in dealing with people?
- (1) People can almost always be trusted
  - (2) People can usually be trusted
  - (3) You usually can't be too careful in dealing with people
  - (4) You almost always can't be too careful in dealing with people

## **G. Environment**

### **g-1. <Physical Environment>**

G-1. How severe are the following issues in the area of your local residence?		Very severe	Somewhat severe	Not so severe	Not severe at all
v59	A Air pollution -----→	1 .....	2 .....	3 .....	4
v60	B Water pollution -----→	1 .....	2 .....	3 .....	4
v61	C Noise pollution -----→	1 .....	2 .....	3 .....	4
n17	D Insufficient sunlight -----→	1 .....	2 .....	3	4

**Note:** KGSS does not include g-1.

### **g-2. <Socioeconomic Environment>**

G-2. We would like to ask about the area 1km (approximately 15 minutes on foot) around your home. To what extent do you agree or disagree with each of the following statements?		Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
v62	A The neighborhood is suitable for doing exercise such as jogging or walking -----→	1 .....	2 .....	3 .....	4 .....	5
v63	B A large selection of fresh fruits and/or vegetable is available in the neighborhood -----→	1 .....	2 .....	3 .....	4 .....	5
v64	C The neighborhood has adequate public facilities (community center, library, park, etc.) -----→	1 .....	2 .....	3 .....	4 .....	5
v65	D The neighborhood is safe -----→	1 .....	2 .....	3 .....	4 .....	5
v66	E The neighbors are mutually concerned for each other -----→	1 .....	2 .....	3 .....	4 .....	5
v67	F The neighbors are willing to provide assistance when I am in need -----→	1 .....	2 .....	3 .....	4 .....	5

**Note:** TSCS does not include G-2E.

## **H. Epidemiology**

v68	H-1. Were you vaccinated against influenza (of any type) during the last 12 months? (1) Yes (2) No
s10_cjk	H-2: How much are you worried about getting infected with COVID-19? 1 Very much worried 2 Somewhat worried 3 Somewhat not worried 4 Not worried
s11_cjk	1. If a person got infected with COVID-19, it would be their own fault. (1) Agree (2) Somewhat agree (3) Somewhat disagree (4) Disagree
S12_cjk	2. If I got infected with COVID-19, it would be my own fault. (1) Agree (2) Somewhat agree (3) Somewhat disagree (4) Disagree



**s13\_cjk** 3. What do you consider to be your own probability of getting infected with COVID-19?

Extremely likely

Extremely unlikely |

1

2

3

4

5

6

7

## **I. Family Care Need and Care Management**

**v70 I-1.** Is there anyone among your family members, whether living together or not, who needs care because of a long-term physical or mental illness or disability, or is getting old and weak?

(1) Yes

(2) No → Skip question 1-2

**v71 I-2.** Are you the major care giver for at least one of them?

(1) Yes

(2) No

## **J. Worries about Aging**

**J-1.** Next we would like to talk about your feelings about getting older. Please indicate how strongly you agree or disagree with the following statements.

Strongly agree

Agree

Neither  
agree nor  
disagree

Disagree

Strongly disagree

**v72** A I worry about not being able to get around  
on my own as I get older -----→ 1 ..... 2 ..... 3 ..... 4 ..... 5

**v73** B I worry others will have to make decisions  
for me as I get older -----→ 1 ..... 2 ..... 3 ..... 4 ..... 5

**v74** C Financial dependence on others is one of  
my greatest fears about old age -----→ 1 ..... 2 ..... 3 ..... 4 ..... 5

**Note:** TSCS does not include J-1.

### Optional: KGSS

Strongly agree

Agree

Neither  
agree nor  
disagree

Disagree

Strongly disagree

**s8\_kr** D I worry that I will have to live with my adult children when I am older

**s9\_kr** E I worry that I will not be able to live with my  
adult children when I am older → 1 ..... 2 ..... 3 ..... 4 ..... 5

Considering the meaning of health, how important is each of the followings to you?

[4 point scale 1 very important, 2 important, 3 slightly important (just a little important) 4 not important]

		Very important	Important	Slightly important	Not important
<b>n18</b>	A Absence of (freedom from) bodily pains	1.....	.. 2 .....	3 .....	4
<b>n19</b>	B Peace in mind and mental composure	1.....	.. 2 .....	3 .....	4
<b>n20</b>	C Performance of familial roles and duties	1.....	.. 2 .....	3 .....	4
<b>n21</b>	D Performance of workplace/social roles and duties	1.....	.. 2 .....	3 .....	4

**Note:** TSCS does not include n18 to n21.

#### **s14\_cnkr**

4. How often do you need to have someone help you when you read instructions, pamphlets, or other written materials from your doctor or pharmacy?

- (1) Never
- (2) Rarely
- (3) Sometimes
- (4) Often
- (5) Always

#### **s15\_cntw**

5. How confident are you filling out medical forms yourself? (e.g. personal file, medical history, consent form)

- (1) Extremely
- (2) Quite a bit
- (3) Somewhat
- (4) A little bit
- (5) Not at all

6. Without other's help, how often do you have problems learning about your medical condition because of

**s16\_cntw** a. difficulty understanding healthcare providers' explanations?

**s17\_cntw** b. not knowing how to ask healthcare providers questions?

**s18\_cntw** c. difficulty understanding health written materials?

- (1) Never
- (2) Occasionally
- (3) Sometimes
- (4) Often
- (5) Always

**s19\_cnkr** V1: Older people get more than their fair share from the government

**s20\_cnkr** V2: Older people are a burden on society

**s21\_cnkr** V3: Old people have too much political influence

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

### **Standard Background Variables:**

- Add: Spousal health (health module scale)
- In general, would you say your spouse's health is:
  - (1) Excellent
  - (2) Very good
  - (3) Good
  - (4) Fair
  - (5) Poor

**Note:** TSCS does not include spousal health.