



National Health & Aging Trends Study

how daily life changes as we age

SHOW CARDS

July 2014

Free-standing (detached) single house

Single house but attached to others (row house, townhouse, duplex, triplex, or triple decker)

Mobile home or trailer

Multi-unit (2+) building

Not at all

Several days

More than half the days

Nearly every day

Every night

Most nights

Some nights

Rarely

Never

- 1. Private residence**
- 2. A group home, board and care, or supervised housing**
- 3. Assisted living facility or continuing care retirement community (CCRC)**
- 4. Religious group quarters**

- 1. No schooling completed**
- 2. 1st-8th grade**
- 3. 9th-12th grade (no diploma)**
- 4. High school graduate (high school diploma or equivalent)**
- 5. Vocational, technical, business, or trade school certificate or diploma (beyond high school level)**
- 6. Some college but no degree**
- 7. Associate's degree**
- 8. Bachelor's degree**
- 9. Master's, professional, or doctoral degree**

- 1. Private residence**
- 2. A group home, board and care, or supervised housing**
- 3. Assisted living facility or continuing care retirement community (CCRC)**
-
- 5. Nursing home**

- 1. No schooling completed**
- 2. 1st-8th grade**
- 3. 9th-12th grade (no diploma)**
- 4. High school graduate (high school diploma or equivalent)**
- 5. Vocational, technical, business, or trade school certificate or diploma (beyond high school level)**
- 6. Some college but no degree**
- 7. Associate's degree**
- 8. Bachelor's degree**
- 9. Master's, professional, or doctoral degree**

Examples of wheelchairs



MD1

Examples of scooters



MD2

Every day (7 days a week)

Most days (5-6 days a week)

Some days (2-4 days a week)

Rarely (once a week or less)

Never

Back

Hips

Knees

Feet

Hands

Wrists

Shoulders

Head

Neck

Arms

Legs

Stomach

Every day (7 days a week)

Most days (5-6 days a week)

Some days (2-4 days a week)

Rarely (once a week or less)

Never

Much better

Better

Same

Worse

Much Worse

Every day (7 days a week)

Most days (5-6 days a week)

Some days (2-4 days a week)

Rarely (once a week or less)

Never

Every time

Most times

Sometimes

Rarely

Never

Most times

Sometimes

Rarely

Never

Every day (7 days a week)

Most days (5-6 days a week)

Some days (2-4 days a week)

Rarely (once a week or less)

Never

In the last month...

- 1. I always did it by myself**
- 2. I always did it together with someone else**
- 3. Someone else always did it for me**
- 4. It varied (more than one way)**

In the last month...

- 1. He/she always did it by himself/herself**
- 2. He/she always did it together with someone else**
- 3. Someone else always did it for him/her**
- 4. It varied (more than one way)**

Cash

Check

Debit or gift card

Credit card

- 1. Drove**
- 2. Got a ride from a family member or friend or someone paid to help**
- 3. Used a van or shuttle service provided by the place SP lives**
- 4. Used a van or shuttle service for people with disabilities or seniors NOT provided by the place SP lives**
- 5. Took public transportation (bus, subway, train, or tram)**
- 6. Took a taxi**
- 7. Walked**

Every time

Most times

Sometimes

Rarely

Never

Every time

Most times

Sometimes

Rarely

Most times

Sometimes

Rarely

Never

Every time

Most times

Sometimes

Rarely

Never

Every day (7 days a week)

Most days (5-6 days a week)

Some days (2-4 days a week)

Rarely (once a week or less)

Never

In the last month...

- 1. I always did it by myself**
- 2. I always did it together with someone else**
- 3. Someone else always did it for me**
- 4. It varied (more than one way)**

In the last month...

- 1. He/she always did it by himself/herself**
- 2. He/she always did it together with someone else**
- 3. Someone else always did it for him/her**
- 4. It varied (more than one way)**

Every time

Most times

Sometimes

Rarely

Never

- 1. Drove**
- 2. Got a ride from a family member or friend or someone paid to help**
- 3. Used a van or shuttle service provided by the place SP lives**
- 4. Used a van or shuttle service for people with disabilities or seniors NOT provided by the place SP lives**
- 5. Took public transportation (bus, subway, train, or tram)**
- 6. Took a taxi**
- 7. Walked**
- 8. Home visit**

Every day (7 days a week)

Most days (5-6 days a week)

Some days (2-4 days a week)

Rarely (once a week or less)

Never

- 1. Less than \$1,000**
- 2. \$1,000 - \$1,999**
- 3. \$2,000 - \$2,999**
- 4. \$3,000 - \$4,999**
- 5. \$5,000 or more**

- 1. Less than \$250**
- 2. \$250 - \$499**
- 3. \$500 - \$999**
- 4. \$1000 or more**

1. Less than \$50,000

2. \$50,000 - \$100,000

3. Over \$100,000

- 1. Less than \$50,000**
- 2. \$50,000 - \$74,999**
- 3. \$75,000 - \$99,999**
- 4. \$100,000 - \$199,999**
- 5. \$200,000 - \$299,999**
- 6. \$300,000 - \$499,999**
- 7. \$500,000 - \$749,999**
- 8. \$750,000 or more**

- 1. Less than \$1,000**
- 2. \$1,000 - \$1,999**
- 3. \$2,000 - \$3,999**
- 4. \$4,000 - \$5,999**
- 5. \$6,000 - \$9,999**
- 6. \$10,000 - \$19,999**
- 7. \$20,000 or more**

- 1. Less than \$500**
- 2. \$500 - \$999**
- 3. \$1,000 - \$1,999**
- 4. \$2,000 - \$3,999**
- 5. \$4,000 - \$5,999**
- 6. \$6,000 - \$9,999**
- 7. \$10,000 - \$19,999**
- 8. \$20,000 or more**

Not at all

A little

Somewhat

A lot

0 1 2 3 4 5 6 7 8 9 10

**No
Pain**

**Worst
Imaginable
Pain**

PN2

A lot

Some

A little

Not at all

Every night

Most nights

Some nights

Rarely

Never

Very good

Good

Fair

Poor

Very Poor

Every day

Most days

Some days

Rarely

Never

- 1. Freestanding nursing home**
- 2. Freestanding assisted living facility**
- 3. Nursing home and assisted living facility**
- 4. Continuing care retirement community (CCRC)**
- 5. Adult family care home**
- 6. Group home**
- 7. Board and care home**
- 8. Retirement community or senior housing (not CCRC)**

Meals (in common dining areas or in residents' own rooms)

Help with medications

Help with bathing and dressing

Laundry services for linens or clothing

Housekeeping services

A van or shuttle to doctors or other medical care providers

A van or shuttle to stores or events like concerts

Recreational facilities, like swimming pools, game rooms, or tennis courts, for residents

Organized social events and activities

Resident or resident's family

Social Security or SSI

Medicaid

Medicare

Private insurance

Other government source (VA, state, county)